SANGGUNIANG BAYAN RESOLUTION NO. 111
Series of 2008

A RESOLUTION AUTHORIZING THE MUNICIPAL MAYOR, HON. STRIKE B. REVILLA, TO SIGN MEMORANDUM OF AGREEMENT BETWEEN THE MUNICIPALITY OF BACOOR AND THE LAS PINAS GENERAL HOSPITAL AND SATELLITE TRAUMA CENTER REGARDING THE FORMER'S "MEDICAL ASSISTANCE PROGRAM (MAP)".

Sponsored by Councilor Normita Celestino

WHEREAS, the Municipality of Bacoor intends to launch a "Medical Assistance Program" to provide medical assistance to indigent and deserving patients in Bacoor;

WHEREAS, the Las Pinas General Hospital and Satellite Trauma Center, a government district hospital located at Bernabe Compound, Pulang Lupa, Las Pinas City has the facilities to provide the medical services and treatment that the indigent and deserving patients of Bacoor may need;

WHEREAS, Councilor Normita Celestino underlined to the Sangguniang Bayan the grave need for the Municipality of Bacoor to partner with a government hospital near Bacoor that will treat the indigent and deserving students of Bacoor;

NOW, THEREFORE, upon motion of Councilor Normita Celestino, in regular session assembled this 28th day of July 2008, BE IT RESOLVED AS IT IS HEREBY RESOLVED to authorize the Municipal Mayor, the Honorable Strike B. Revilla, to enter into a Memorandum of Agreement with the Las Pinas General Hospital and Satellite Trauma Center and the Municipality of Bacoor for the latter's Medical Assistance Program.

RESOLVED, FINALLY, to furnish copies of this Resolution to all offices concerned.

ADOPTED this 28th day of July 2008 at Bacoor, Cavite in regular session assembled.

Prepared by:

HON. MIGUEL N. BAUTISTA
Acting Presiding Officer
MEMORANDUM OF AGREEMENT

KNOW ALL MEN BY THESE PRESENTS:

This Memorandum of Agreement (MOA), entered into on this ____ day of ______, 2008 in the Municipality of Bacoor, by and between:

The HON. STRIKE B. REVILLA, Municipal Mayor, Bacoor, Cavite, with business address at the Office Of The Municipal Mayor, Municipal Hall Building, Bacoor, Cavite, referred to herein as the FIRST PARTY;

- and -

The LAS PIÑAS GENERAL HOSPITAL AND SATELLITE TRAUMA CENTER, a district hospital created and operating pursuant to Republic Act No. 9240, represented herein by District health Officer II (Chief of Hospital) DR. EDMUNDO B. LOPEZ, MD, MPH, MHA with office address at Bernabe Compound, Pulang Lupa, Las Piñas City, hereinafter referred to as the SECOND PARTY;

WHEREAS, the FIRST PARTY seeks to have a Medical Assistance Program (MAP) that will help and provide assistance to indigent and deserving patients requiring medical attention;

WHEREAS, the SECOND PARTY has the facilities to provide the services needed by indigent and deserving patients requiring medical attention and is willing to extend such services and facilities to said patients as well as to coordinate and monitor the implementation of the MAP of the FIRST PARTY;

WHEREAS, through the efforts and representation of the FIRST PARTY, an appropriation, subject to the availability of funds earmarked for the purpose shall be made to cover/defray the cost of the MAP to the SECOND PARTY;

WHEREAS, coordination and cooperation between and among the parties hereto is indispensably necessary for the effective and proper implementation of the MAP;

NOW, THEREFORE, for and in consideration of the above-premises and the terms and conditions hereunder enumerated, the PARTIES to this Agreement hereby agree, stipulates and covenants:

1. The FIRST PARTY shall IDENTIFY AND recommend through a letter, the indigent and or deserving patients to avail of the benefits of the MAP as well as the extent of medical assistance to be provided by the SECOND PARTY. Attached is a copy of a “Letter of Authority” (LOA) to be signed by the Hon. Strike B. Revilla or his authorized representative evidencing the latter’s consent, permission and acknowledgement to whomsoever is the beneficiary of the MAP. Likewise, is the “specimen” signatures of the FIRST PARTY for purposes of authentication;

2. For the MAP availment, hereunder are the procedures to be observed:

2.1 The indigent or his/her authorized representative (with letter of authorization) shall personally appear before the office of the FIRST PARTY. Such request for medical assistance shall be accomplished by filling up the required form;
2.2. He/she will be interviewed for purpose of evaluation and or assessment prior to his/her entitlement/coverage under the MAP. Thereafter, a LOA shall be prepared by the FIRST PARTY. The LOA will indicate the maximum amount the patient-beneficiary could avail under the program. A control number with bar code and period of validity would be indicated in the LOA.

2.3. The LOA will be signed by the FIRST PARTY or in case of his absence or unavailability, his designated authorized representative;

2.4. Subsequently, the patient-beneficiary shall then go to the Office Of The Chief of Hospital of the SECOND PARTY for purposes of referral to the proper departments or service units. On the other hand, if the patient has been issued a prescription, he/she will present the LOA together with the prescription to the hospital’s pharmacy, where the price of the medicine or medical supplies is determined and written in the face of the LOA. In cases where the patient presents a prescription from or other than the SECOND PARTY, a “RE-ISSUANCE” of the prescription from the SECOND PARTY is required prior to acceptance by the pharmacy;

2.5. Likewise, if the patient needs "laboratory services", the LOA together with the prescription on the needed laboratory services shall be presented to the Laboratory Department of the SECOND PARTY. It shall be the responsibility of said Department to indicate the amount/price corresponding to the services/terms availed from the same Department;

2.6. The patient or his/her representative shall present the “Original” of the LOA (and prescription, if any) to the hospital coordinator for the MAP of the SECOND PARTY for approval. However, in urgent/extreme situations if not circumstances, a fax copy of the LOA may be presented and provisionally approved pending telephone validation of its authenticity to be initiated by the hospital coordinator of the MAP. In such cases, the original of the LOA must be presented not later than three (3) calendar days from its approval;

2.7. Patient accepted in the MAP requiring hospital admission by the SECOND PARTY should be roomed/placed at the CHARITY WARD. However, admission to the cheapest/lowest possible rooms of the pay wards may be allowed only in emergency cases when there is no available rooms at the charity wards. In no case shall admission to suite rooms be allowed. In either charity or pay ward admission, the patients shall present the approved LOA to the Billing Section of the SECOND PARTY prior to discharge;

3. The FIRST PARTY shall address the LOA to the Chief of Hospital with copies of the letter furnished the various departments of the SECOND PARTY as may be deemed necessary on a case to case basis, to wit:

a. Pharmacy  
b. Ward  
c. Medical Social Services  
d. Laboratory  
e. Medicine

4. Medical Assistance to said indigents may include but not limited to, medicine, laboratory tests, radiology and other medical and laboratory procedures as indicated in the LOA of the FIRST PARTY;

4.1. Subject to availability of funds, in case where the patient is admitted and some medicines or other medical supplies are not available at the pharmacy, said
medicine may be purchased from other drugstores chargeable to the aforementioned appropriation. Provided, that such is certified by the pharmacy that the needed medicine or other medical supplies are not available; Provided, further, that such purchases are supported by official receipts in order to be chargeable to the aforementioned appropriation;

4.2. The same procedure will also apply in case there is breakdown in laboratory or other diagnostic machines and such procedures could not be performed in the hospital. Said procedure will be referred to other hospital chargeable to the aforementioned appropriation;

5. Professional fees of physicians shall not be charged to the funds set aside for the implementation of the MAP;

6. The SECOND PARTY through its Accounting Office, shall furnish the FIRST PARTY, on a monthly basis, with the list of patients who have availed of the Program including the amount of assistance extended for monitoring and recording purposes of the FIRST PARTY;

7. This agreement shall be effective upon the signing by the parties and the deposit of the funds to the account of the SECOND PARTY or upon receipt by the FIRST PARTY the appropriate documents from the office concerned showing that the appropriation of the fund mentioned has been processed and or given due course;

8. All payments and releases under the MAP of the FIRST PARTY shall be made in accordance with existing government accounting and auditing rules and regulations.

IN WITNESS WHEREOF, the parties hereto set their hands at the date and place above-written.

LAS PIÑAS GENERAL HOSPITAL AND SATELLITE TRAUMA CENTER

By:

HON. STRIKE B. REVILLA DR. EDMUNDO B. LOPEZ MD,
MPH, MHA, Chief of Hospital
Municipal Mayor FIRST PARTY SECOND PARTY

SIGNED IN THE PRESENCE OF:
REPUBLIC OF THE PHILIPPINES
Province of Cavite J.S.S.
Municipality of Bacoor

BEFORE ME, a Notary Public for and in the Municipality of Bacoor, Province of Cavite, this ___ day of ______ 2008, personally appeared the following:

NAME CTC NO. DATE/PLACE ISSUED

STRIKE B. REVILLA
EDMUNDO B. LOPEZ

known to me and to me known to be the same persons who executed the foregoing instruments and who acknowledged to me that the same is their free and voluntary act and deed of the entities which they represent in this instance.

This instrument refers to the Memorandum of Agreement consisting of ___ pages including this page where this Acknowledgment is written and has been signed by the parties and their witnesses on all pages thereof.

WITNESS MY HAND AND SEAL, this ___ day of ___, 2008 at the Municipality of Bacoor.

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