

### 3. Cashier Services

#### 3.1 Payment of Diagnostic Procedures, Medicines and Other Services

This service directs clients to transact all payments at the Cashier's Office before the service, procedure, medicine is provided or released.

<b>Office or Division:</b>	Cash Operations			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen; G2G – Government to Government			
<b>Who may avail:</b>	All			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Complete and Valid Diagnostic Request Form (1 original) or Doctor's Prescription (1 original)		Attending Physician		
Charge Slip (1 original)		Cashier's Section or Requesting Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present the diagnostic procedure request form or the doctor's prescription	1.1 Receive the doctor's prescription/request form and write costing of the procedure	None	4 Minutes	<i>Cashier</i> Cashier Section
3. Pay the total cost of the diagnostic procedure or medicine.	3. Accept and check the payment in cash.	Based on the cost of procedure/ medicine	3 Minutes	<i>Cashier</i> Cashier Section
4. Receive the official receipt and the diagnostic procedure request form or the doctor's Prescription.	4. Issue official receipt and return the diagnostic procedure request form or the doctor's prescription to the	None	2 Minutes	<i>Cashier</i> Cashier Section

	Customer.			
<b>TOTAL</b>		<b>Depending on the cost of the service/procedure/medicine</b>	<b>10 Minutes</b>	

### 3.2 Payment of Hospital Bills

This service directs patients/watchers/significant others to settle their accounts or pay required amount at the Cashier's Office. Service is available from Monday to Saturday, 8:00 am to 6:00 pm.

<b>Office or Division:</b>	St. Paul Hospital			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C – Government to Citizen			
<b>Who may avail:</b>	All hospital clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Complete and Valid Patient's Statement of Account (1 original) Patient Ledger (1 original) Billing Discharge Clearance (1 original)		Billing Section Billing Section Billing Section		
<b>CLIENT STEPS</b>	<b>AGENCY ACTIONS</b>	<b>FEEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sanitize hands with alcohol.	1. Tell the client to sanitize their hands first before paying.	None	1 Minute	<i>Cashier</i> Cashier Section
2. Approach the Cashier Window once the Statement of Account, Patient ledger and billing discharge clearance are forwarded by the Billing Section to the Cashier.	2. Receive and check the forwarded documents.  2.1 Inform the client of the total required amount to be paid.	None	2 Minute	<i>Cashier</i> Cashier Section
3. Pay the total required amount.	3. Accept and check payment	Based on the required/ billed amount	3 Minutes	<i>Cashier</i> Cashier Section

<p>4. Receive copy of the Statement of Account, official receipt and the stamped billing discharge clearance.</p> <p>4.1 Proceed to the nurse station and give the stamped billing discharge clearance.</p>	<p>4. Issue official receipt (OR).</p> <p>4.1 Stamp the billing discharge clearance.</p> <p>4.2 Give the Official Receipt, Statement of Account and the stamped billing discharge clearance to the client.</p> <p>4.3 Instruct client to go and give the stamped billing discharge clearance to the nurse station for discharge.</p>	<p>None</p>	<p>6 Minutes</p>	<p><i>Cashier</i> Cashier Section</p>
<b>TOTAL</b>		<p><b>Depending on the amount reflected on the bill</b></p>	<p><b>12Minutes</b></p>	