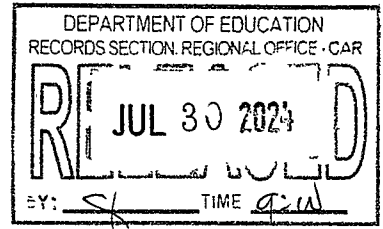




Republic of the Philippines  
**Department of Education**  
CORDILLERA ADMINISTRATIVE REGION



July 26, 2024

**REGIONAL MEMORANDUM**

No. 495.2024

**DISSEMINATION OF MEMORANDUM OUF-2024-0547 FROM THE  
UNDERSECRETARY OF FINANCE  
(GSIS GROUP PERSONAL ACCIDENT INSURANCE, GSIS-GPAI)**

To : Assistant Regional Director  
All Schools Division Superintendents  
School Heads  
All Others Concerned

1. Enclosed is a copy of Memorandum OUF-2024-0547 dated July 16, 2024 on the subject "GSIS Group Personal Accident Insurance (GSIS-GPAI)", for information.
2. For immediate dissemination and compliance to said memorandum.

  
**ESTELA P. LEON-CARIÑO EdD, CESO III**  
Director IV/Regional Director 

Encl. as stated

ASD/OCAO/connie



Address: DepEd-CAR Compound, Wangal, La Trinidad, Benguet, 2601  
Telephone No: (074) 422 – 1318  
Email Address: car@deped.gov.ph



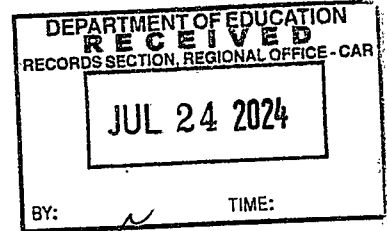
DepEd Tayo Cordillera



<https://depedcar.ph>



Certificate No. P1P CMB  
24 93 0182



Republic of the Philippines  
**Department of Education**  
 Office of the Undersecretary for Finance

**MEMORANDUM**  
**OUF-2024-0549**  
 July 16, 2024

**TO :** REGIONAL DIRECTORS  
 DIRECTOR IV, BUREAU OF HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT  
 DIRECTOR IV, INFORMATION AND COMMUNICATIONS TECHNOLOGY SERVICE  
 SCHOOLS DIVISION SUPERINTENDENTS  
 SCHOOL HEADS  
 ALL OTHERS CONCERNED

**FROM :** *Annalyn M. Sevilla*  
 ANNALYN M. SEVILLA  
 Undersecretary

**SUBJECT :** **GSIS GROUP PERSONAL ACCIDENT INSURANCE (GSIS-GPAI)**

This is to reiterate that DepEd personnel who are involved in work and non-work-related accidents may file a claim under the Government Service Insurance System (GSIS) Group Personal Accident Insurance (GPAI) policy.

Under the GSIS-GPAI, DepEd personnel can claim for accidental death or dismemberment of up to Php100,000.00. GPAI also offers medical reimbursement feature for accident-related injuries of up to Php30,000.00.

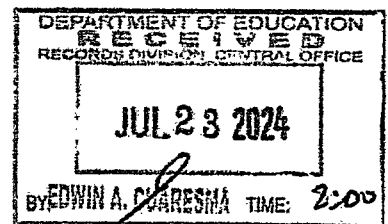
The said policy includes injuries sustained in accidents encountered by covered DepEd personnel both locally and internationally, whether work-related or not. Furthermore, 100% of the principal sum will be received by the beneficiaries of the DepEd personnel in case of unprovoked murder or assault.

Claims must be reported to [nonmotorclaims@gsis.gov.ph](mailto:nonmotorclaims@gsis.gov.ph) which includes the complete contact details of the claimant/victim, including email address, landline or phone number, contact person, and mailing address. The claim should be filed within 120 days of the date of the accident. Attached as Annex A are the required documents to be submitted in filing claims.

For dissemination and compliance.

*Copy Furnished:*

1. *Wilfredo E. Cabral*  
Undersecretary for Human Resource and Organizational Development
2. *Francis Cesar B. Bringas*  
Assistant Secretary for Operations



Address: 2F Rizal Bldg., DepEd Complex Meralco Avenue, Pasig City  
 Telephone Nos.: (02) 8633-9342 TeleFax No: (02) 8638-3703  
 Email Address: [usec.financebpm@deped.gov.ph](mailto:usec.financebpm@deped.gov.ph)

## **ANNEX A**

### **GOVERNMENT SERVICE INSURANCE SYSTEM - GROUP PERSONAL ACCIDENT INSURANCE (GSIS GPAI)**

**COVERAGE: From October 05, 2023 to October 04, 2024**

#### **REQUIREMENTS:**

##### **MEDICAL REIMBURSEMENT CLAIM**

1. **Original** Endorsement of Claim by the Office of the Insured Person to GSIS
2. **Original** Medical Certificate
3. **Original** Official Receipts for medical expenses incurred
4. **Original** Doctor's Prescription (for over the counter medicines)
5. Photos of bodily injuries
6. Vaccination Schedule (if injury caused by Animal Bite /Scratch)
7. Statement of Account (if hospitalized)
8. Hospital Records (Clinical Abstract, Laboratory, X-Ray, CT Scan Results)
9. **For Vehicular Accident: Original** Police Report or **Originally Signed CTC** of the Police Report

##### **For Non-Vehicular Accident:**

- **Original** Affidavit on the Circumstances of the Accident (**Notarized**) *with attached photocopy of valid ID w/ signature & picture*
- **Original** Affidavit of Two Disinterested Witness (**Notarized**) *with attached photocopy of valid ID-w/ signature & picture*

##### **ACCIDENTAL DEATH/DISEMBEUREMENT**

1. **Original** Endorsement of Claim to GSIS by Head of Office of the Insured Person
2. **Original** PSA Death Certificate
3. **Original** Certificate of Employment prior to death w/ Service Record
4. **Original** or CTC of Police/Traffic Investigation Report
5. Photos of bodily injury/incident
6. Statement of account (if hospitalized)
7. Hospital Records (Clinical Abstract, Laboratory, X-ray, CT Scan Results)
8. Autopsy Report, if any
9. **Original** Certificate of Legal Heirs from the assured's Human Resources Dept.
10. **If the deceased is married:**
  - **Original** PSA Marriage Certificate
  - **Original** PSA Birth Certificate of Children
  - For minor children: **Original** Affidavit of Guardianship
11. **If the deceased is single :**
  - **Original** PSA Birth Certificate of Insured
  - **Original** PSA Marriage Certificate of Parents
12. Extrajudicial Affidavit & Waiver of Rights, if applicable