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| *Mpango wa Watoto Wachanga wa North Carolina* |  |

*Jedwali la Maelezo ya Bima*

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| ***Mtoa huduma anawajibika kwa uthibitishaji wa maelezo ya bima. Maelezo yaliyo kwenye fomu hii si hakikisho la malipo.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. **Maelezo ya Mtoto:** | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | | *SFS % ya ITP* | | | | | | | | | | *Kikomo cha Juu Zaidi Kila Mwezi* | | | | | | | *Tarehe ya Kujazwa* | | | |
|  | | | | | | | |  | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | |
| *Jina la Kwanza la Mtoto* | | | | | | | | *Jina la Katikati/Herufi za Mwisho* | | | | | | | | | | | | | | *Jina la Mwisho la Mtoto* | | | | | | | | | | | |  | | | | | | | | | |  | | | | | | |  | | | |
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| *Anwani* | | | | | | | | *Jiji* | | | | | | | | | | | | | *Jimbo* | | | | | | | *Msimbo wa Eneo* | | | | | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | *Jinsia:* Mwanamume  Mwanamke | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | |
| *Tarehe ya Kuzaliwa:* | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | *Namba ya Simu ya Nyumbani:* | | | | | | | | | | | | | | *Namba Nyingine ya Simu:* | | | | | | | | | | |
| 1. **Maelezo ya Bima:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Medicaid #**: | | |  | | | | | | | | | | | | | | | | | | | | | | | | Ikiwa ni Carolina ACCESS, taja Daktari wa Matibabu ya Msingi: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tarehe ya Kuanza Kutumia: | | | | | | | | | |  | | | | Tarehe ya Mwisho wa Matumizi: | | | | | | | | | | | | | | | |  | | | Msingi  Bima nyingine inayotumika (angalia hapa chini) | | | | | | | | | | | | | | | | | | | | | |
| **Bima ya Msingi** : | | Mtu Binafsi  Kikundi  HMO/PPO  Bima ya Mwanajeshi | | | | | | | | | | | | | | | | | | | | | | | | | | | **Bima ya Ziada**: | | | | | | | Mtu Binafsi  Kikundi  HMO/PPO  Bima ya Mwanajeshi | | | | | | | | | | | | | | | | | | |
| Jina la Bima: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Jina la Bima: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Mwajiri/Kikundi: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Mwajiri/Kikundi: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Bima#/ ID #: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Bima #/ ID #: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Kitambulisho cha Kikundi #: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Kitambulisho cha Kikundi #: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Tarehe ya Kuanza Kutumika: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Tarehe ya Kuanza Kutumika: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Namba ya Simu ya Madai #: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Namba ya Simu ya Madai #: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Anwani ya Madai: | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | Anwani ya Madai: | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Jiji: |  | | | | | | Jimbo: | | | | | | | | | | Msimbo wa Eneo: | | | | | | | | | | | | Jiji: | | |  | | | | | | | | | Jimbo: | | | | | | | Msimbo wa Eneo: | | | | | | |
| Jina la Mshiriki: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Jina la Mshiriki: | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Uhusiano wa Mshiriki na Mteja: | | | | | | | | |  | | | | | | Tarehe ya Kuzaliwa ya  Mshiriki: | | | | | | | | | | | | | | Uhusiano wa Mshiriki na Mteja: | | | | | | | | | | | | |  | | | | Tarehe ya Kuzaliwa ya  Mshiriki: | | | | | | | | |
| Mshiriki ni Mdhamini: | | | | Ndiyo  Hapana | | | | | | | | | | | | | Jinsia:  Mwanamume  Mwanamke | | | | | | | | | | | | Mshiriki ni Mdhamini: | | | | | | | | Ndiyo  Hapana | | | | | | | | | | | | | Jinsia:  Mwanamume  Mwanamke | | | | |
| Anwani ya Mshiriki: | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Anwani ya Mshiriki: | | | | | | | |  | | | | | | | | | | | | | | | | | |
| Akaunti ya Malipo ya Afya iliyoambatishwa kwenye bima ya msingi. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Akaunti ya Malipo ya Afya iliyoambatishwa kwenye bima ya msingi. | | | | | | | | | | | | | | | | | | | | | | | | | |
| Akaunti ya Matumizi ya Afya iliyoambatishwa kwenye bima ya msingi. **(HAKIKISHA kipengele cha malipo ya kiotomatiki kimezimwa!)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Akaunti ya Matumizi ya Afya iliyoambatishwa kwenye bima ya msingi. **(HAKIKISHA kipengele cha malipo ya kiotomatiki kimezimwa!)** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Manufaa ya Ndani ya Mtandao** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Manufaa ya Ndani ya Mtandao** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Kikomo cha Juu cha Maisha:** | | Ndiyo  Hapana | | | | | | | | | | | | | | | | **Kiasi cha Kikomo cha Juu cha LT** | | | | | | |  | | | | **Kikomo cha Juu cha Maisha:** | | | | | | Ndiyo  Hapana | | | | | | | | | | | | **Kiasi cha Kikomo cha Juu cha LT** | | | | |  | | |
| Asilimia ya Gharama Utakayolipa: | | | | |  | | | | | | | | Ada Utakayolipa: | | | | | | | | | |  | | | | | | Asilimia ya Gharama Utakayolipa: | | | | | | | | | | |  | | | | |  | | | | | | |  | | |
| Kiasi cha Kukatwa: | | | | |  | | | | | | | | Amt. Met: | | | | | | |  | | | | | | | | | Kiasi cha Kukatwa: | | | | | | | | | | |  | | | | | Amt. Met: | | | | | | |  | | |
| **Manufaa ya NJE ya Mtandao** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Manufaa ya NJE ya Mtandao** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Kikomo cha Juu cha Maisha:** | | Ndiyo  Hapana | | | | | | | | | | | | | | **Kiasi cha Kikomo cha Juu cha LT** | | | | | | | |  | | | | | **Kikomo cha Juu cha Maisha:** | | | | | | Ndiyo  Hapana | | | | | | | | | | | | | | **Kiasi cha Kikomo cha Juu cha LT** | | | | |  |
| Asilimia ya Gharama Utakayolipa: | | | | | |  | | | | | | | Ada Utakayolipa: | | | | | | | | |  | | | | | | | Asilimia ya Gharama Utakayolipa: | | | | | | | | | |  | | | | | | Ada Utakayolipa: | | | | | | | |  | |
| Kiasi cha Kukatwa: | | | | |  | | | | | | | | Amt. Met: | | | | | | |  | | | | | | | | | Kiasi cha Kukatwa: | | | | | | | | |  | | | | | | | Amt. Met: | | | | | | |  | | |
| **Je, Idhini ya Mapema Inahitajika kwa Uchunguzi?**  Ndiyo  Hapana | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Je, Idhini ya Mapema Inahitajika kwa Uchunguzi?**  Ndiyo  Hapana | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***TAFADHALI TAJA MANUFAA YA HUDUMA ZIFUATAZO:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ***TAFADHALI TAJA MANUFAA YA HUDUMA ZIFUATAZO:*** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Uchunguzi: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Uchunguzi: | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tiba ya Matatizo ya Kikazi: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tiba ya Matatizo ya Kikazi: | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tiba ya Mwendo: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tiba ya Mwendo: | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tiba ya Matamshi: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Tiba ya Matamshi: | | | | | | | | | | | | | | | | | | | | | | | | | |
| Huduma Zingine: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Huduma Zingine: | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Je, Idhini ya Mapema Inahitajika kwa Tiba Maalum?**  Ndiyo  Hapana | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Je, Idhini ya Mapema Inahitajika kwa Tiba Maalum?**  Ndiyo  Hapana | | | | | | | | | | | | | | | | | | | | | | | | | |