


NINETEENTH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)



'22 JUL 19 P 6:39

SENATE
S.B. No. 770

RECEIVED 

Introduced by SENATOR SONNY ANGARA

AN ACT
AMENDING CERTAIN PROVISIONS OF REPUBLIC ACT NO. 11223,
OTHERWISE KNOWN AS THE UNIVERSAL HEALTH CARE ACT

EXPLANATORY NOTE

No less than the 1987 Constitution recognizes the right to health of every Filipino and mandates that the State shall instill health consciousness among its people. In fulfillment of this mandate, Congress passed Republic Act No. 11223 otherwise known as the Universal Health Care Act on February 20, 2019. Among the objectives of the Universal Health Care Act is to ensure that all Filipinos are guaranteed equitable access to quality and affordable health care goods and services and protected against financial risk.

The Philippine Health Insurance Corporation (PhilHealth) identified certain provisions in the law which hinders the flexibility in the determination, fixing and reduction of published case rates/packages. To address this, the proposed measure seeks to amend Sections 9 and 34 of the Universal Health Care Act to enable PhilHealth to adjust the packages subject to the review, assessment, and recommendation of the Health Technology Assessment Council (HTAC).

In addition, during the 18th Congress, the Senate has conducted numerous investigations on allegations of rampant corruption, incompetence, and inefficiency within PhilHealth with the end in view of reforming the country's national health insurance program to be more responsible and accountable with the funds provided by the public.

Part of the discussion was the alleged overpayment of PhilHealth to several health care providers (HCPs)/health care institutions (HCIs) through its Interim

Reimbursement Mechanism (IRM). Meanwhile, some hospitals who are in actual need of reimbursements from the Corporation have been seemingly neglected. For instance, the Senate Committee of the Whole discovered that PhilHealth hastily released funds to a specific cluster of dialysis centers while various hospitals have reached out to the Committee and reported that they have not received IRM funds.

Hence, the proposed measure will also introduce an amendment to the Universal Health Care Act and add another layer of accountability to the release of reimbursement for medical claims as HCPs, HCIs, and PhilHealth will be mandated to execute a sworn undertaking that all medical claims and reimbursements are true and correct. This shall, in turn, be part of PhilHealth's submission to the Commission on Audit (COA) in order to give the public assurance that their contributions and the subsidy of the national government are spent responsibly and judiciously.

In view of the foregoing, the immediate passage of the bill is earnestly sought.



SONNY ANGARA
FP

NINETEENTH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

'22 JUL 19 P 6:39

SENATE
S.B. No. 770

RECEIVED BY



Introduced by SENATOR SONNY ANGARA

AN ACT
AMENDING CERTAIN PROVISIONS OF REPUBLIC ACT NO. 11223,
OTHERWISE KNOWN AS THE UNIVERSAL HEALTH CARE ACT

Be it enacted by the Senate and House of Representatives of the Philippines in Congress assembled:

1 **SECTION 1.** Section 9 of Republic Act No. 11223 or the Universal Health Care
2 Act is hereby amended to read as follows:

3 "Sec. 9. Entitlement to Benefits. – Every member shall be granted
4 immediate eligibility for health benefit package under the Program:
5 Provided, That PhilHealth Identification Card shall not be required in
6 the availment of any health service: Provided, further, That no co-
7 payment shall be charged for services rendered in basic or ward
8 accommodation: Provided, furthermore, That co payments and co-
9 insurance for amenities in public hospitals shall be regulated by the
10 DOH and PhilHealth: Provided, [finally] **FURTHERMORE**, That the
11 [current] **EXISTING** PhilHealth [package] **COVERAGE** for
12 members shall not be reduced: **PROVIDED, FINALLY, THAT THE**
13 **AMOUNTS UNDER EACH BENEFIT PACKAGE SHALL BE**
14 **SUBJECT TO THE REVIEW AND ASSESSMENT OF THE**
15 **HEALTH TECHNOLOGY ASSESSMENT COUNCIL PURSUANT**
16 **TO SECTION 34 OF THIS ACT."**

17 **SEC. 2.** Section 18 of the same Act is hereby amended to read as follows:

18 "Section 18. Individual-based Health Services. –

- 1 a) x x x.
2 b) PhilHealth shall endeavor to shift to paying providers using
3 performance-driven, close-end, prospective payments based
4 on disease or diagnosis related groupings and validated
5 costing methodologies and without differentiating facility and
6 professional fees; develop differential payment schemes that
7 give due consideration to service quality, efficiency and
8 equity; and institute strong surveillance and audit mechanisms
9 to ensure networks' compliance to contractual obligations:

10 **PROVIDED, THAT HEALTH CARE**
11 **INSTITUTIONS/HEALTH CARE PROVIDERS ARE**
12 **MANDATED TO EXECUTE A SWORN UNDERTAKING**
13 **THAT THE MEDICAL CLAIMS SUBMITTED TO**
14 **PHILHEALTH FOR REIMBURSEMENT ARE CERTIFIED**
15 **TRUE AND CORRECT: PROVIDED FURTHER, THAT**
16 **PHILHEALTH, FOR ITS PART, SHALL LIKEWISE ISSUE**
17 **A CERTIFICATION UNDER OATH THAT A THOROUGH**
18 **REVIEW OF THE MEDICAL CLAIM WAS DONE AND**
19 **THAT THE ACTUAL REIMBURSEMENT PAID TO THE**
20 **HEALTH CARE INSTITUTIONS/HEALTH CARE**
21 **PROVIDERS ARE TRUE AND CORRECT: PROVIDED**
22 **FINALLY, THAT THIS DOCUMENT SHOULD FORM PART**
23 **OF PHILHEALTH'S SUBMISSION TO THE COMMISSION**
24 **ON AUDIT (COA)."**

25 **SEC. 3.** Section 34 of Republic Act No. 11223 is hereby amended to read as
26 follows:

27 "Sec. 34. Health Technology Assessment (HTA). –

28 (a) x x x.

29 (b) x x x.

30 (c) The HTAC, to be composed of health experts, shall be created
31 within the DOH and supported by a Secretariat and a Technical
32 Unit for Policy, Planning and Evaluation with evidence generation

1 and validation capacity. The HTAC shall: (1) facilitate provision
2 of financing and/or coverage recommendations on health
3 technologies to be financed by DOH and PhilHealth; (2) oversee
4 and coordinate the HTA process within DOH and PhilHealth; and
5 (3) review and assess existing DOH and PhilHealth benefit
6 packages **AND RECOMMEND APPROPRIATE AND**
7 **REASONABLE AMOUNTS PER PACKAGE BASED ON**
8 **PREVAILING TECHNOLOGIES AND/OR TREATMENT.**

9 Within five (5) years after the establishment and effective
10 operation of the HTAC, it shall transition into an independent entity
11 separate from the DOH, attached to DOST.

12 (d) x x x.

13 (e) x x x."

14 **SEC. 3. Separability Clause.** – If any provision of this Act is declared invalid
15 or unconstitutional, the other provisions not affected thereby shall continue to be in
16 full force and effect.

17 **SEC. 4. Repealing Clause.** – All laws, decrees, executive orders or rules and
18 regulations contrary to or inconsistent with the provisions of this Act are hereby
19 repealed or modified accordingly

20 **SEC. 5. Effectivity Clause.** – This Act shall take effect fifteen (15) days after
21 its publication in the Official Gazette or in any newspaper of the general circulation.

Approved,