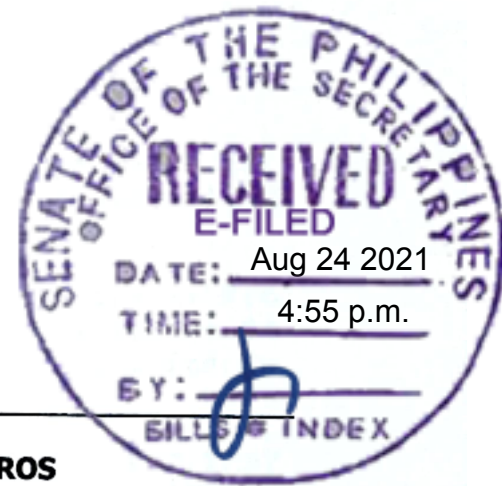


**EIGHTEENTH CONGRESS OF THE )  
REPUBLIC OF THE PHILIPPINES )  
Third Regular Session )**

**SENATE  
P.S.R. No. 880**



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INTRODUCED BY **SENATOR RISA HONTIVEROS**

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**RESOLUTION**

**DIRECTING THE APPROPRIATE SENATE COMMITTEE TO CONDUCT AN INVESTIGATION IN AID OF LEGISLATION ON THE PAYMENT CLAIMS ISSUES BETWEEN PHILHEALTH AND PRIVATE HOSPITALS WITH THE END IN VIEW OF ENSURING UNINTERRUPTED HEALTH CARE AND SOCIAL PROTECTION FOR FILIPINOS**

**WHEREAS**, universal health and equitable access to health services are declared policies of the State and the heart of Republic Act No. 11223, otherwise known as the Universal Health Care Act;

**WHEREAS**, in the midst of this unprecedented health crisis, Filipinos more than ever need safety nets against health emergencies, as well as a financial cushion against the costs of hospitalization, whether from COVID-19 or other diseases;

**WHEREAS**, the Philippine Health Insurance Corporation (PhilHealth) issued Philhealth Circular No. 2021-0013 "suspending payment of claims that are subject of investigations pertaining to fraudulent, unethical acts, and/or abuse of authority" for a period of one hundred twenty (120) days;

**WHEREAS**, the Private Hospital Association Inc. (PHAPi) and the Philippine Hospital Association (PHA), as a result of this directive, announced that they were "disengaging" with Philhealth and that Philhealth members cannot avail of Philhealth benefits when they go to their member-hospitals "for the meantime";

**WHEREAS**, according to PHAPi president Dr. Jose Rene de Grano, Philhealth has around P86 billion in unpaid claims to their member hospitals;

**WHEREAS**, PhilHealth has also been besieged by allegations of rampant corruption inside the agency, spurring marathon investigative hearings in this Chamber last year; and on the other hand, Philhealth has lodged allegations of spurious claims and overbilling against some health care providers;

**WHEREAS**, according to PhilHealth President and CEO Dante Gierran, the issuance of the order was simply consistent with PhilHealth Circular No. 2016-026, and the new circular introduced additional provisions to ensure the observance of due process and prevent arbitrary investigations among health care providers;

**WHEREAS**, the temporary suspension of claims may severely impact on struggling small hospitals and treatment centers, including the health workers employed therein, as these facilities are already overwhelmed and strained by the surge of COVID-19 cases;

**WHEREAS**, with confirmed community transmissions of the Delta variant and the detection of a local case of the Lambda variant, as well as the record-high new cases and

a 25% positivity rate, interruptions in health care insurance will have literal life-and-death implications, especially for the poor and the middle classes who cannot afford the full cost of privatized health care;

**WHEREAS**, if this impasse is not broken at the soonest possible time and if no agreements are reached between PhilHealth and the private health care providers, the consequences will be borne by the Filipino people who are already reeling from the multiple burdens wrought by the pandemic;

**NOW THEREFORE, BE IT RESOLVED, AS IT IS HEREBY RESOLVED, THAT THE APPROPRIATE SENATE COMMITTEE TO CONDUCT AN INVESTIGATION IN AID OF LEGISLATION ON THE PAYMENT CLAIMS ISSUES BETWEEN PHILHEALTH AND PRIVATE HOSPITALS WITH THE END IN VIEW OF ENSURING UNINTERRUPTED HEALTH CARE AND SOCIAL PROTECTION FOR FILIPINOS**

Adopted,

  
RISA HONTIVEROS  
*Senator*