

Republic of the Philippines  
**HOUSE OF REPRESENTATIVES**  
Quezon City, Metro Manila

**TWENTIETH (20<sup>th</sup>) CONGRESS**  
**FIRST REGULAR SESSION**

House Bill No. 238



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**Introduced by**  
**Rep. ROBERT NAZAL**

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**AN ACT ESTABLISHING MALASAKIT CENTERS IN PRIVATE HOSPITALS,  
AND APPROPRIATING FUNDS THEREFOR**

**EXPLANATORY NOTE**

Access to healthcare is a fundamental right guaranteed by the 1987 Constitution, which mandates the State to ensure that all Filipinos receive adequate and affordable medical services. The establishment of Malasakit Centers in public hospitals has significantly improved the process of availing government financial and medical assistance, particularly for indigent patients. However, many private hospitals, despite receiving government subsidies or tax incentives, do not have a similar structured mechanism to facilitate these benefits for financially incapable patients.

This bill seeks to bridge that gap by requiring private hospitals that receive government funding or incentives to establish Malasakit Centers within their premises. However, to ensure that the assistance provided through these centers is directed to those who need it most, only indigent patients confined in charity wards shall be eligible for Malasakit Center benefits. The Department of Health, in coordination with PhilHealth and the Department of Social Welfare and Development, shall develop clear guidelines for determining indigency status and charity ward admissions to prevent abuse or misuse of the system.

Additionally, the bill mandates PhilHealth to process and pay claims from private hospitals within thirty (30) calendar days from the submission of complete documentary requirements. Failure to comply with this deadline without justifiable cause shall result in administrative and criminal liability for responsible PhilHealth officials and employees. This measure ensures accountability, prevents bureaucratic inefficiencies, and protects both healthcare providers and patients from the negative effects of delayed reimbursements.

By institutionalizing Malasakit Centers in qualified private hospitals while establishing clear eligibility criteria and efficient payment mechanisms, this legislation strengthens the healthcare system's ability to provide timely and equitable medical assistance to indigent Filipinos.

In view of these objectives, the immediate passage of this bill is earnestly sought.



**Rep. ROBERT NAZAL**  
Bagong Henerasyon Party-list

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

**SECTION 1. TITLE**

This Act shall be known as the "Private Hospital Malasakit Centers Act."

**SECTION 2. DECLARATION OF POLICY**

It is the policy of the State to provide accessible and efficient health care services to all Filipinos, particularly indigent patients, by institutionalizing a one-stop-shop system in hospitals to streamline medical and financial assistance from various government agencies. To enhance public-private cooperation in healthcare, this Act mandates the establishment of Malasakit Centers in private hospitals that receive government financial assistance or tax incentives.

**SECTION 3. SCOPE AND COVERAGE**

This Act shall apply to all private hospitals that meet any of the following criteria:

- a) Receive government subsidies or financial aid for indigent patient care;
- b) Enjoy fiscal incentives such as tax breaks, duty exemptions, or other benefits from the government;
- c) Have a minimum bed capacity of one hundred (100) and cater to at least a specified percentage of indigent patients annually.

#### **SECTION 4. ESTABLISHMENT OF MALASAKIT CENTERS IN PRIVATE HOSPITALS**

- a) Private hospitals falling under Section 3 shall establish Malasakit Centers within their premises to provide a streamlined system for indigent and financially incapable patients to access government assistance.
- b) The Malasakit Centers shall:
  - 1. Facilitate financial assistance from the Philippine Charity Sweepstakes Office (PCSO), Department of Social Welfare and Development (DSWD), PhilHealth, and other government agencies;
  - 2. Ensure the availability of social workers and patient navigators to assist indigent patients;
  - 3. Provide information on medical financial aid programs and assist in application processes;
  - 4. Coordinate with government and non-governmental organizations for further patient support; and
  - 5. Ensure that only indigent patients confined in the charity wards of private hospitals shall be eligible to avail of the benefits and financial assistance facilitated by the Malasakit Center. The DOH, in consultation with PhilHealth and DSWD, shall establish clear guidelines for determining indigency status and the criteria for charity ward admission.

#### **SECTION 5. FUNDING AND SUPPORT**

- a) The DOH, in coordination with the Department of Finance (DOF) and other relevant agencies, shall allocate financial assistance or provide incentives for private hospitals that establish Malasakit Centers.
- b) Private hospitals may claim reimbursements for services rendered to indigent patients in charity wards under government-sponsored programs, subject to verification and approval by the appropriate agencies.
  - 1. PhilHealth shall ensure that all claims submitted by private hospitals for services rendered to indigent patients in charity wards shall be processed and paid within thirty (30) calendar days from the submission of complete documentary requirements.
  - 2. Failure to meet this payment timeline without justifiable cause shall render responsible PhilHealth officers and employees administratively and criminally liable under existing laws on graft, corruption, and negligence of duty. Administrative penalties may include suspension, dismissal from service, and forfeiture of benefits, while criminal liability shall be subject to

penalties provided under the Revised Penal Code, the Anti-Graft and Corrupt Practices Act (RA 3019), and other relevant laws.

3. The Implementing Rules and Regulations (IRR) of this Act shall specify clear accountability mechanisms for delayed payments, including the procedures for filing complaints against erring PhilHealth personnel and the imposition of appropriate sanctions.
- c) The government shall explore partnerships with private hospitals to expand funding sources for the sustainability of Malasakit Centers.

## **SECTION 6. IMPLEMENTING AGENCIES AND OVERSIGHT**

- a) The Department of Health (DOH) shall oversee the implementation, monitoring, and regulation of Malasakit Centers in private hospitals.
- b) The PhilHealth, DSWD, and PCSO shall coordinate to ensure smooth facilitation of assistance programs.
- c) A Congressional Oversight Committee shall be created to review and assess the effectiveness of Malasakit Centers in private hospitals, ensuring compliance and continuous improvement.

## **SECTION 7. PENALTIES FOR NON-COMPLIANCE**

- a) Private hospitals failing to establish Malasakit Centers despite meeting the criteria under Section 3 shall be subject to:
  1. Revocation of government subsidies or fiscal incentives;
  2. Monetary penalties (to be determined by the DOH and the Department of Finance);
  3. Other administrative sanctions as may be prescribed by law.
- b) Any hospital or official found guilty of misusing Malasakit Center funds or engaging in corrupt practices shall be subject to criminal and civil liabilities under existing laws.

## **SECTION 8. IMPLEMENTING RULES AND REGULATIONS (IRR)**

Within ninety (90) days from the approval of this Act, the DOH, in consultation with PhilHealth, PCSO, DSWD, the Department of Finance, and representatives from the private hospital sector, shall promulgate the necessary rules and regulations for the effective implementation of this Act.

## **SECTION 9. SEPARABILITY CLAUSE**

If any provision of this Act is declared unconstitutional or invalid, the other provisions not affected shall remain in full force and effect.

## **SECTION 10. REPEALING CLAUSE**

All laws, executive orders, rules, or regulations inconsistent with this Act are hereby repealed or amended accordingly.

## **SECTION 11. EFFECTIVITY**

This Act shall take effect 15 days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

*Approved,*