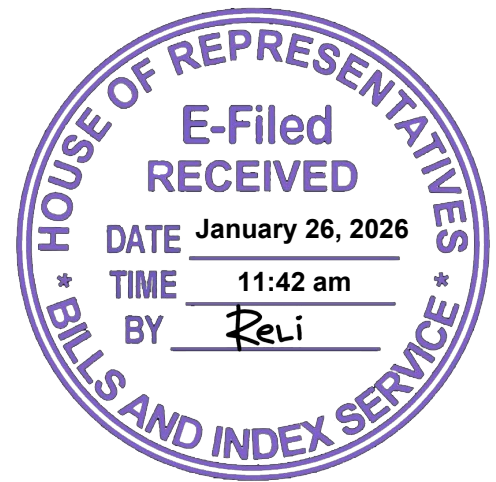


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City
TWENTIETH CONGRESS
First Regular Session



HOUSE BILL NO. 7297

Introduced by **REP. BERNADETTE "DETTE" G. ESCUDERO**

**AN ACT
INSTITUTIONALIZING THE "NO BALANCE BILLING POLICY"
IN ALL ACCREDITED HEALTH CARE INSTITUTIONS AND
APPROPRIATING FUNDS THEREOF**

EXPLANATORY NOTE

Access to healthcare in the Philippines continues to face significant challenges. Despite the Universal Health Care Act (RA 11223) and PhilHealth coverage, many Filipinos still encounter high out-of-pocket expenses, often forcing them to choose between essential medical care and basic needs. This situation contradicts the law's intent to provide quality, cost-effective health services.

To address these gaps, it is crucial to properly institutionalize the "No Balance Billing" policy and improve its reporting disclosures, empowering Filipinos to seek necessary medical care without financial fear. Strengthening the program through this measure can improve health outcomes, promote equity, and ensure that poverty does not prevent families from accessing essential treatment. The goal is a system where parents can bring their children to hospitals and receive quality care without the burden of excessive costs, making healthcare truly accessible to all.

In view of the foregoing, the approval of this bill is earnestly sought.


HON. BERNADETTE "DETTE" G. ESCUDERO
Representative
1st District, Sorsogon

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

1 **SECTION 1. Short Title.** – This Act shall be known as the "*No Balance Billing*
2 *Act.*"

3
4 **SEC. 2. Declaration of Policy.** – As provided in the Constitution of the
5 Republic of the Philippines, it is the declared policy of the State to adopt an
6 integrated and comprehensive approach to health development, which shall
7 endeavor to make essential goods, health, and other social services available to all
8 the people at affordable cost. There shall be priority for the needs of the
9 underprivileged, sick, elderly, disabled, women, and children. Consistent with these
10 constitutional principles, this Act shall recognize the rights of the most vulnerable
11 groups including the poorest of the poor for the provision of a comprehensive health
12 care including drugs and medicines, supplies, or diagnostic procedures which shall
13 be provided to them and their dependents at no added cost.

14
15 **SEC. 3. Definition of Terms.** – For the purpose of this Act, the following terms
16 shall mean:

- 17
18 a. Care rate refers to the fixed rate or amount that the Philippine Health
19 Insurance Corporation will reimburse for a specific illness/case, which shall
20 cover for the fees of health care professionals, and all facility charges
21 including, but not limited to, room and board, diagnostics and laboratories,
22 drugs, medicines and supplies, operating room fees and other fees and
23 charges;

- 1 b. Health care institutions refer to all levels of hospitals and other health
2 facilities including ambulatory surgical clinics, freestanding dialysis clinics,
3 infirmaries, dispensaries,
4 c. National Health Insurance Program refers to the social health insurance
5 program implemented by the Philippine Health Insurance Corporation as
6 mandated by Republic Act No. 7875 as amended by Republic Act No. 9241
7 which seeks to provide health insurance coverage and ensure affordable,
8 acceptable, available, accessible, and quality health care services for all
9 citizens of the Philippines;
10 d. No Balance Billing refers to the government policy that no other fees or
11 expenses shall be charged or paid for by the Sponsored Program members of
12 the Philippine Health Insurance Corporation patient-member above and
13 beyond the packaged rates; and
14 e. Sponsored member refers to a member whose contribution is being paid by
15 another individual, government agency, or private entity.
16

17 **SEC. 4. Institutionalization of the "No Balance Billing Policy".** - For
18 purposes of providing optimal financial risk protection to the most vulnerable groups
19 including the poorest of the poor, the "No Balance Billing Policy" of the government,
20 hereafter referred to as the "NBB Policy", is hereby institutionalized in all accredited
21 government health care institutions for all case-based payments and covered
22 benefits that shall be specified for the purpose by the Department of Health,
23 hereafter referred to as the Department, and subject to conditions that it shall
24 prescribe.

25 Accordingly, in pursuit of achieving the intents of the National Health Insurance
26 Program, claims for medical conditions and procedures shall be paid by the
27 Philippine Health Insurance Corporation using ease rates in order to reduce the out-
28 of-pocket expenditures of disadvantaged patients.

29 The NBB Policy shall likewise be made applicable to all other membership types
30 of the program who shall avail of the maternity care package, newborn care
31 package and such other health services that shall be determined by the Department.
32

33 **SEC. 5. Expansion of Priority Conditions and Procedures.** — The
34 Philippine Health Insurance Corporation shall expand the priority conditions and
35 procedures to be packaged into case rates. It shall provide reasonable case rates to
36 ensure that beneficiaries under the policy will get full and quality health services.
37

38 **SEC. 6. Augmentation of Reimbursement Rates.** — Funds from the
39 Philippine Charity Sweepstakes Office (PCSO) and the Department of Social Welfare
40 and Development (DSWD) shall be used to augment reimbursement rates for health
41 interventions that require surgery and/or accommodation to intensive care unit,
42 isolation room or other special accommodation or those that are considered as
43 medically difficult and expensive treatment and procedure.

44 In the spirit of efficiency and exigency of service, private health care
45 institutions must be paid no later than 60 days. Likewise, they have the option to

1 avail their the amount payable of the government to them in their gross income tax
2 compliance subject to the certification issued by the PhilHealth.

3
4
5 **SEC. 7. Responsibilities of Health Care Institutions.** — Health care
6 institutions shall have the following responsibilities:

- 7
8 a. To ensure that utmost quality of healthcare is provided to qualified NBB
9 members and dependents. They shall provide the most cost-effective clinical
10 approach without compromising the quality of care;
11
12 b. To ensure access that all qualified NBB members and dependents shall
13 receive the basic necessities and comfort each patient must receive;
14
15 c. To give NBB patients preferential access to their social welfare funds;
16
17 d. To be responsible and accountable for the care of patients and in achieving
18 the best outcome. They shall extend all medical and financial support to
19 qualified NBB members and dependents. They shall not deny access to health
20 services whenever necessary;
21
22 e. To ensure the delivery of utmost quality of care and provide complete
23 medical and nonmedical care including but not limited to drugs, supplies,
24 diagnostics and other necessary medical services such as the provision of
25 adequate patients' meals based on prescribed therapeutic diet, nutritional
26 status and dietary requirements to achieve the best possible outcome;
27
28 f. To provide NBB patients appropriate accommodation such as intensive care
29 unit, isolation room, recovery room and other special accommodation if
30 necessary. In cases where a ward type accommodation is not available,
31 patients shall be provided the next higher accommodation available.
32
33 g. To ensure that there shall always be an available health care professional to
34 manage the patient at no added cost.
35
36 h. To exclusively bear the cost of acquisition of medications, diagnostics and
37 supplies that are not available inside the facility. Sourcing outside the facility
38 shall only be made as a last resort when all other possible sourcing options
39 have been exhausted.

40 **SEC. 8. Incentives for Private Health Care Institutions Implementing**
41 **the NBB Policy.** - The Department shall coordinate, facilitate, and encourage the
42 participation of accredited private health care institutions in the implementation of
43 the NBB policy. This shall be achieved through the provision of appropriate
44 incentives, enabling mechanisms and conducive environment for their participation.

45
46 **SEC. 9. Information Dissemination.** — All qualified NBB members and
47 dependents shall be given thorough and appropriate orientation regarding the case

1 rates and NBB Policy upon admission in the health care institution. This shall be
2 made in collaboration with the concerned personnel of the Philippine Health
3 Insurance Corporation assigned in the facility using Information and Education
4 Campaign materials.

5
6 **SEC. 10. Compliance Monitoring and Evaluation.** — The Department,
7 through the PhilHealth, shall regularly conduct compliance monitoring and
8 evaluation to the NBB Policy using exit interview, post-audit system, and such other
9 mechanisms that will ensure effective compliance to this Act and its existing rules
10 and regulations.

11
12 **SEC. 11. Grievance and Complaints.** — The Department, through the
13 Philippine Health Insurance Corporation, shall establish complaints desks and such
14 other facility to report violations of this Act.

15
16 **SEC. 12. Penalties.** - Any health care institution which shall violate any
17 provision of this Act shall suffer a fine of not less than One Hundred Thousand
18 Pesos (Php100,000.00) but not more than Five Hundred Thousand Pesos
19 (Php500,000.00). For the second conviction, additional penalty of revocation or
20 suspension of accreditation shall be imposed from three (3) months to the whole
21 term of accreditation. For the third conviction, in addition to the aforesaid penalties,
22 suspension or revocation of license to operate at the discretion of the court shall be
23 imposed.

24
25 The Secretary of the Department of Health shall have the authority to impose,
26 in a graduated manner, administrative sanctions such as suspension or cancellation
27 of license to operate.

28 **SEC. 13. Appropriations.** - The amount necessary to carry out the
29 provisions of this Act may be sourced out from the following:

- 30 a) Annual appropriations of the DOH included in the GAA;
31 b) Official Development Assistance to the Philippine Government;
32 c) Collection from excise taxes on tobacco and alcohol products;
33 d) National Government share from the income of the Philippine Amusement
34 Gaming Corporation (PAGCOR) as provided for in Presidential Decree No.
35 1869, as amended; and
36 e) Charity Fund, net of Documentary Stamp Tax Payments, and mandatory
37 contributions of the Philippine Charity Sweepstakes Office (PCSO) as
38 provided for in Republic Act No. 1169, as amended.

39
40 **SEC. 14. Repealing Clause.** - All laws, orders, proclamations, rules and
41 regulations, or part thereof, which are inconsistent with any provision of this Act are
42 hereby repealed or modified accordingly.

1 **SEC. 15. Effectivity Clause.** - This Act shall take effect fifteen (15) days
2 after its publication in the Official Gazette or in two (2) newspapers of general
3 circulation.

Approved,