

How much should you be paying for your doctor's fee?

As a member of the National Health Insurance Program (NHIP), we want you to know how much doctors are paid for their services. PhilHealth is committed to providing you with the most comprehensive understanding of how the professional fee for surgical procedures is computed. The professional fee is based on the Relative Value Unit (RVU), a number assigned to compensable services provided by a physician. This includes the physician's time, technical difficulty of the service and stress due to the potential risk to the patient. The higher the RVU the more complex the procedure is.

All payments for professional fees shall be compensated using the RVU provided that the procedure is listed in the Relative Value Scale 2001 Manual. To calculate the professional fee of the surgeon who performed the procedure, multiply the RVU with the peso conversion factor (PCF) of P40. The PCF is set by the Corporation based on the present premium rates and collection. Currently, the maximum benefit limit for professional fee of the surgeon is up to P16,000 and the professional fee for the anesthesiologist is 30% of the surgeon's fee with benefit limit of up to P5,000.

Below is a sample computation::

Procedure	Relative Value Unit	Peso Conversion Factor (multiply)	Surgeon's Fee (in pesos)
Cesarian Delivery	150	40	6,000.00 *

^{*} This fee only represents PhilHealth payment to the surgeon. It does not include payment to other physicians if required, or hospital costs.

The following are the most common surgical procedures being paid for by PhilHealth:

Skin, Subcutaneous and Accessory Structures	RVU	Amount of Professional fee for surgeons (in pesos)
Incision and drainage of abscess	6	240.00
Debridement of extensive eczemous or infected skin	60	2,400.00
Debridement, skin, partial thickness	10	400.00
Debridement, skin, subcutaneous tissue	20	800.00
Debridement, skin, subcutaneous tissue and muscle	30	1,200.00
Excision of benign skin lesion, except skin tag, trunk 0.5cm	6	240.00
Excision of benign skin lesion, except skin tag, trunk 0.6 to 1.0 cm	10	400.00
Excision of benign skin lesion, except skin tag, trunk 1.1 to 2.0 cm	10	400.00
Excision of benign skin lesion, except skin tag, trunk over 4.0 cm	10	400.00
Excision of nail and nail matrix, partial or complete (eg. Ingrown or deformed nail) for		
permanent removal	10	400.00
Simple repair of superficial wounds of scalp 25 cm and less	10	400.00
Simple repair of superficial wounds of scalp 2.6 cm to 7.5 cm	15	600.00
Simple repair of superficial wounds of face	20	800.00
Layer closure of wounds of scalp and axillae	10	400.00
Breast		
Excision of cyst, fibroadenoma, or other benign or malignant tumor aberrant breast tissue,		
duct lesion or nipple lesion, male or female, one or more lesions	25	1,000.00
Mastectomy, modified radical, including axillary lymph nodes w/ or w/o pectoralis minor muscle, but excluding pectoralis major muscle	150	6,000.00

Musculoskeletal System	RVU	Amount of Professional fee for surgeons (in pesos)
Removal of foreign body in muscle or tendon sheath	30	1,200.00
Removal of implant, superficial (eg. buried wire, pin or rod)	60	2,400.00
Excision of ganglion, wrist (dorsal or volar)	40	1,600.00
Fracture and/or Dislocation		
Closed treatment of radial and ulnar shaft fractures	50	2,000.00
Closed treatment of distal radial fracture	40	1,600.00
Partial hip replacement, prosthesis	220	8,800.00
Amputation, leg, through tibia and fibula	150	6,000.00
Repair of Hernia		
Repair initial inguinal hernia, age 6mos. to under 5yrs w/ or w/o hydrocelectomy, reducible	50	2,000.00
Repair initial inguinal hernia, age 5yrs. or over; reducible	50	2,000.00
Repair recurrent inguinal hernia, age 5yrs or over, reducible	100	4,000.00
Repair recurrent inguinal hernia, age 3yrs of over, incarcerated	100	4,000.00
	100	4,000.00
Urinary System		
Lithotripsy, extracorporeal shock wave	100	4,000.00
Cystourethroscopy	30	1,200.00
Cystourethroscopy, w/ ureteral catherization, w/ or w/o irrigation, instillation, or ureteropyelography, exclusive of radiologic service	40	1,600.00
Cystourethroscopy, w/ insertion of indwelling ureteral stent		
(eg, Gibbons or double-J type)	50	2,000.00
Male Genital System		
Transurethral electrosurgical resection of prostate, including control of postoperative		
bleeding, complete (vasectomy, meatomy. Cystourethroscopy, urethral calibration		
and/or dilation, and internal urethromy are included)	200	8,000.00
Transurethral resection of prostrate; first stage of two-stage resection		
(partial resection)	110	4,400.00
Excision of varicocele of litigation of spermatic veins for varicocele	60	2,400.00
Female Genital System		
Marsupialization of Bartholin's gland cyst	25	1,000.00
Conization of cervix, w/ or w/o fulguration, w/ or w/o dilation and curettage, w/ or		1,000.00
w/o repair; cold knife or laser	50	2,000.00
Dilation and curettage	40	1,600.00
Myomectomy, excision of fibroid tumor of uterus, single or multiple; abdominal approach	150	6,000.00
Total abdominal hysterectomy (corpus and cervix), w/ or w/o removal of tube (s), w/ or		
w/o removal of ovary(s)	200	8,000.00
Vaginal hysterectomy	200	8,000.00
Litigation or transaction of fallopian tube(s), abdominal or vaginal approach, unilateral or		
bilateral	15	600.00
Salpingectomy, complete or partial, unilateral or bilateral	100	4,000.00
Salpingo-oophorectomy, complete or partial, unilateral or bilateral	120	4,800.00
Oophorectomy, partial or total, unilateral or bilateral	100	,000.00
Surgical treatment of eptopic pregnancy; tubal or ovarian, requiring salpingectomy and/or		
oophorectomy, abdominal or vaginal approach	150	6,000.00
Cesarian delivery	150	6,000.00
Digestive System		
Tonsillectomy, primary or secondary	40	1,600.00
Appendectomy	100	4,000.00
Upper gastrointestinal endoscopy with biopsy, single or multiple	40	1,600.00
Exploratory laparatory, exploratory celiotomy w/ or w/o biopsy	150	6,000.00
Colectomy, partial w/ anastomosis	250	10,000.00
Appendectomy for ruptured appendix w/ abscess or general peritonitis	150	6,000.00
Esophagoscopy rigid or flexible, diagnostic, w/ or w/o collection of specimen(s) by	100	4.000.00
brushings or washing	40	1,600.00
Upper gastrointestinal endoscopy, simple primary examination (e.g. w/ small dm flexible	40	4.000.00
endoscope)	40	1,600.00
Colonoscopy, rigid or flexible, transabdominal via colostomy single or multiple	40	1,600.00
Proctosigmoidoscopy, rigid, diagnostic, w/ or w/o collection of specimen(s) brushing or washing	20	800.00

Digestive System	RVU	Amount of Professional fee for surgeons (in pesos)
Colonoscopy, flexible proximal to splenic flexure, diagnostic, w/ or w/o collection of specimen(s) brushing or washing w/ or w/o colon decompression	40	1,600.00
Upper gastrointestinal endoscopy including esophagus, stomach and either the duodenum	40	1,000.00
and/or jejunum as appropriate, diagnosis, w/ or w/o collection of specimen(s) by brushing		
or washing	40	1,600.00
Respiratory System		
Intubation, endotracheal, emergency procedures	15	600.00
Tracheostomy, planned	40	1,600.00
Thoracentesis, puncture of pleural cavity for aspiration, initial or subsequent	15	600.00
Bronchoscopy, diagnostic (flexible or rigid), w/ or w/o cell washing or brushing Tube thoracostomy w/ or w/o water seal (eg. for abscess, hemothora, empyema)	40 35	1,600.00 1,400.00
	33	1,400.00
Anus		
Hemorrhoidectomy, by simple ligature (e.g. rubber band)	40	1,600.00
Hemorrhoidectomy, external complete	40	1,600.00
Surgical treatment of anal fistula (fistulectomy/fistulotomy); subcutaneous Hemorrhoidectomy, internal and external, simple	50 50	2,000.00 2,000.00
	50	2,000.00
Arteries and Veins		
Introduction of needle or intracatheter, arteriovenous shunt created for dialysis		
(cannula, fistula or graft)	40	1,600.00
Placement of central venous catheter (subclavian, jugular or other vein)(eg, for central venous pressure, hyperalimentation, hemodialysis or chemotheraphy); percutaneous or		
cutdown	10	400.00
Insertion of cannula for hemodialysis, other purpose, vein to vein	25	1,000.00
Liver		
Cholecystectomy w/ cholangiography	200	8,000.00
Cholecystectomy w/ exploration of common duct	300	1,200.00
Laparascopy, surgical, cholecystectomy	180	7,200.00
Thyroid Gland		
	150	6,000,00
Total thyroid lobectomy, unilateral, w/ or w/o isthmusectomy Thyroidectomy, total or complete	150 225	6,000.00 9,000.00
Total thyroid lobectomy w/ contralateral subtotal lobectomy, including isthmusectomy	180	7,200.00
Eye		
Excision or transposition of pterygium, w/o graft	20	800.00
Discission of secondary membranous cataract by laser surgery (eq. YAG laser	20	800.00
(one or more stages)	40	1,600.00
Extracapsular cataract removal w/ insertion of intraocular lens prosthesis		
(one or more stages)	180	7,200.00
Vitrectomy, mechanical, pars plana approach	400	16,000.00
Destruction of extensive or progressive retinopathy by photocoagulation	75	3,000,00
(laser or xenon, arc) Excision of chalazion	75 10	3,000.00 400.00
Extracapsular cataract removal w/ insertion of intraocular lens prosthesis	10	400.00
(one stage procedure),(eg. Phacoemulsification)	200	8,000.00
Vitrectomy, mechanical pars plan approach	400	16,000.00
Other Services		
Radiation treatment delivery, external beam radiation (Cobalt or Linear Accelerator)	10	400.00
Hemodialysis procedure	10	400.00
Dialysis procedure other than hemodialysis (eg. Peritoneal, hemofiltration)	10	400.00
Imaging supervision, interpret & report for injection, procedure during cardiac catherization,		
coronary angiography	50	2,000.00
Chemotheraphy administration	10	400.00

In the next few months PhilHealth will soon be implementing the case rate payment for surgical fee in selected number of surgeries and procedures. The case rate basis shall comprise of a health care professional fee based on the RVU of the procedure and a health facility fee component.

For other surgical procedures compensable by PhilHealth, please visit PhilHealth website www.philhealth.gov.ph