



Annex B: Supplementary Rules in Accrediting and Contracting Health Facilities

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Supplementary Rules in Accrediting and Contracting Health Facilities

- 1. PhilHealth shall contract qualified accredited HFs to offer the services under the Z Benefits Package for Open Heart Surgeries. These contracted HFs are required to provide the offered services of the benefits package to qualified patients.
- 2. The contract shall contain the terms and conditions agreed upon by PhilHealth and the accredited HFs. Co-payment, if applicable, shall not exceed the corresponding package rate.
- 3. The accredited HFs shall submit co-payment proposals to PhilHealth. They shall identify the amenities, choice of physician, specialist fees for private patients, or any additional or upgrade of services beyond the coverage of the benefits package including specialist fees, if applicable. In cases of cost variance, the contracted HFs shall provide the necessary information to support the co-payment proposal or adjustment to the existing rates.
- 4. PhilHealth shall negotiate the proposed rates of the health services considered for inclusion in the co-payment arrangement submitted by the accredited HFs.
- 5. PhilHealth shall examine the co-payment proposal of the accredited HFs if these services are necessary for the patient's care but are not included in the identified essential health services.
- 6. Contracted HFs with an existing contract for the Z Benefits package for Open Heart Surgeries (Coronary Artery Bypass Graft, Ventricular Septal Defect and Tetralogy of Fallot) shall update their co-payment proposal.
- 7. For further guidance, please refer to PhilHealth Circular No. 2022-0012 "Contracting of a Health Facility as a Z Benefits Provider (Revision 1)" or its subsequent amendments.

