



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

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UNIVERSAL HEALTH CARE
 KAUNTAHAN AT BAHAGYAN PARA SA LAHAT

PHILHEALTH CIRCULAR
 No. 2020-0605

TO : ALL DIRECT CONTRIBUTOR MEMBERS OF THE NATIONAL HEALTH INSURANCE PROGRAM AND ALL OTHERS CONCERNED

SUBJECT : Premium Contribution Schedule in the National Health Insurance Program (NHIP) Pursuant to R.A. No. 11223 Known as the “Universal Health Care Act” (Revision 1)

I. RATIONALE

It is the policy of the State “to adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost and to provide free medical care to paupers. Towards this end, the State shall provide, among others, (b) A health care model that provides all Filipinos access to a comprehensive set of quality and cost-effective, promotive, preventive, curative, rehabilitative and palliative health services without causing financial hardship, and prioritizes the needs of the population who cannot afford such services [Section 11, Article XVIII on Social Justice and Human Rights of the Constitution and typified in Article 1 of Republic Act (R.A.) No. 7875, as amended by R.A. No. 10606, and R.A. No. 11223 otherwise known as the Universal Health Care (UHC) Act of 2019].

Among the general objectives of the UHC Act is to progressively realize universal health care in the country through a systemic approach and clear delineation of roles of key agencies and stakeholders towards better performance in the health system; and to ensure that all Filipinos are guaranteed equitable access to quality and affordable health care goods and services, and protected against financial risk.

To accomplish these objectives, Section 7 of the UHC Act provides for an “Individual-based health services” that shall be financed primarily through prepayment mechanisms such as social health insurance, private health insurance, and HMO plans to ensure predictability of health expenditures.” Under Section 8 of the UHC Act, the program membership in the NHIP is simplified into two (2) types, namely Direct and Indirect Contributors.

As such, the National Health Insurance Program (NHIP) under R.A. No. 7875 was engaged with the same purpose of providing health insurance coverage and ensuring affordable, acceptable, available and accessible health care services for all citizens of the Philippines, in accordance with the policies and specific provisions of the Act. This social health insurance program serves as the means for the healthy to help pay for the care of the sick and for those who can afford medical care to subsidize those who cannot (Section 5, Article III of R.A. No. 7875, as amended).

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II. OBJECTIVE

To operationalize the “Individual-based health services” for all Direct Contributors of the NHIP by providing set of rules and guidelines on the payment mechanism pursuant to R.A. No. 7875, as amended by the UHC Act.

III. SCOPE

This Circular covers all Direct Contributors as defined under the UHC Act, including their qualified dependents.

IV. DEFINITION OF TERMS

A. *Dependent* – the qualified dependents of a member, namely:

1. Legal spouse/s who is/ are not an active member;
2. Unmarried and unemployed legitimate, illegitimate children, and legally adopted or stepchildren below twenty-one (21) years of age;
3. Foster children as defined in RA 10165 (Foster Care Act of 2012); and
4. Parents who are sixty (60) years old and above, not otherwise an enrolled member.

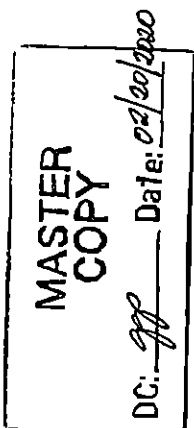
B. *Direct Contributors* – including their qualified dependents shall be composed of, but not limited to, the following:

1. Employees with formal employment characterized by the existence of an employer-employee relationship, which include workers in the government and private sector, whether regular, casual or contractual are occupying either an elective or appointive position, regardless of the status of appointment, whose premium contribution payments are equally shared by the employee and the employer.
2. Kasambahays, as defined in RA 10361 (Domestic Workers Act);
3. All other workers who are not covered by formal contracts or agreements or who have no employee-employer relationship and whose premium contributions are self-paid, and with capacity to pay premiums, such as the following:
 - a. Self-earning individuals; and
 - b. Professionals practitioners;
4. Overseas Filipino Workers, as defined in RA 10022 (Migrant Workers Act) and RA 10801 (OWWA Act) such as, but not limited to:
 - a. Sea-based Filipino workers or seafarers; and
 - b. Land-based overseas Filipino workers;
5. Filipino living abroad;
6. Filipinos with dual citizenship;
7. Lifetime members as defined in RA10606 (National Health Insurance Act); and
8. All Filipinos aged 21 years and above who have the capacity to pay premiums.

C. *Indirect contributors* – refer to all others not included as direct contributors, as well as their qualified dependents, whose premium are subsidized by the national government including those who are subsidized as a result of special laws.

D. *Member* – all Filipino citizens as defined under the 1987 Philippine Constitution.

E. *Professional Practitioners* - refer to all practitioners required to pass government



licensure examinations in order to practice their professions. The term "professional" also refers to one who pursues an art and makes his living therefrom such as artists, athletes and others similarly situated.

F. Monthly Basic Salary (MBS) - the fixed basic rate of an employee which shall not include sales commission, overtime pay, allowances, thirteenth month pay, bonuses or other gratuity payments. Further to this, those deductions to the employee's pay occasioned by his/her under time, tardiness, leave(s) without pay, absences, or other similar circumstances shall also be excluded in this computation. For the monthly-paid and daily-paid employees, the MBS shall be computed based on the estimated Equivalent Monthly Rate (EMR) consistent with the latest edition of the Department of Labor and Employment-Bureau of Working Condition's Handbook on Worker's Statutory Monetary Benefits.

G. Self-Earning Individuals – those who render services or sell goods as a means of livelihood outside of an employer-employee relationship or enterprises owned and operated by employers which may employ fewer than (10) employees or informal sectors, such as seasonal employees engaged in the production of goods and services with the primary objective of generating employment and income for the persons concerned including job order contractors and project-based contractors.

V. GENERAL GUIDELINES

A. Premium Contribution Table for Direct Contributors.

Effective the applicable month upon effectivity of the Implementing Rules and Regulations (IRR) of the UHC Act, the monthly premium contributions shall be in accordance with the premium rates and monthly income/basic salary floor and ceiling prescribed in the said Act, as follows:

Year	Monthly Basic Salary	Premium Rate	Monthly Premium
2019	₱10,000.00	2.75%	₱275.00
	₱10,000.01 to ₱49,999.99		₱275.00 to ₱1,375.00
	₱50,000.00		₱1,375.00
2020	₱10,000.00	3.00%	₱300.00
	₱10,000.01 to ₱59,999.99		₱300.00 to ₱1,800.00
	₱60,000.00		₱1,800.00
2021	₱10,000.00	3.50%	₱350.00
	₱10,000.01 to ₱69,999.99		₱350.00 to ₱2,450.00
	₱70,000.00		₱2,450.00
2022	₱10,000.00	4.00%	₱400.00
	₱10,000.01 to ₱79,999.99		₱400.00 to ₱3,200.00
	₱80,000.00		₱3,200.00
2023	₱10,000.00	4.50%	₱450.00
	₱10,000.01 to ₱89,999.99		₱450.00 to ₱4,050.00
	₱90,000.00		₱4,050.00

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Year	Monthly Basic Salary	Premium Rate	Monthly Premium
2024	₱10,000.00	5.00%	₱500.00
to	₱10,000.01 to ₱99,999.99		₱500.00 to ₱5,000.00
2025	₱100,000.00		₱5,000.00

- B. The premium of Employed members in the government and private sector, including household help and sea based OFWs, shall be computed straight based on the monthly basic salary of the employee to be equally shared between the employee and employer.
- C. For those whose basic monthly salary is below the income floor, the premium contribution shall be computed based on the income floor, while those whose basic monthly income is above the income ceiling, the premium contribution shall be computed based on the income ceiling in accordance with the DBM Circular No. 2019-8 [(Re: Employer (Government) Share in the Health Insurance Corporation Effective FY 2019)].
- D. The employers shall ensure that the premium contribution of women who are on maternity leave shall be regularly remitted to PhilHealth pursuant to the Department Advisory No. 01 s. 2019 of the Department of Labor and Employment (DOLE) re: “Guidelines on the Computation of Salary Differential of Female Workers During Her Maternity Leave and Its Criteria for Exemption Pursuant to Republic Act 11210 and its Implementing Rules and Regulations.”
- E. For Self-Earning Individuals, Professional Practitioners, Land-based Migrant Workers and all other Direct Contributors with no employer-employee relationship, their monthly premium shall be computed straight based on their monthly income to be paid wholly and individually by the member in accordance with the terms of payments and corresponding due dates as prescribed by the Corporation. A separate Corporate implementing guidelines will be issued for this purpose.
- Individually paying members including Land-based Migrant Workers shall be required to provide a proof of income, such as financial books/records, latest BIR-received income tax return or a duly-notarized affidavit of income declaration and overseas employment contract.
- F. Lifetime and Senior Citizen members who obtain a regular source of income from employment, practice of profession and other means of income shall resume paying the required monthly premium contribution corresponding to membership type under the direct contributors.
- G. In accordance with R.A. No. 10361, the premium contributions of the Kasambahay (or Domestic Worker) shall be shouldered solely by the household employer. However, if the Kasambahay is receiving a monthly salary of five thousand pesos (₱5,000.00) or above, the Kasambahay shall pay his/her proportionate share.
- H. R.A. No. 11228 decrees the mandatory PhilHealth coverage of all persons with disability (PWDs). Premium contributions for all PWDs shall be paid by the National Government. For employed PWD members, the premium shall be shared equally by their employers and the National Government (employee share).

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- I. The monthly premium contributions of all members shall be remitted and reported on or before the schedule prescribed by the Corporation. Failure to pay premiums shall not prevent the member from enjoying any Program benefits. Provided, that the direct contributors shall be required to pay all missed contributions with interest, compounded monthly, of at least three percent (3%) for employers of private and government sector, sea-based migrant workers, and kasambahays; and not exceeding one and one-half percent (1.5%) for self-earning individuals, professional practitioners, land-based migrant workers, Filipinos living abroad, and Filipinos with dual citizenship. Provided further, that in the case of direct contributors like self-earning individuals, professional practitioners, land-based migrant workers, Filipinos living abroad, and Filipinos with dual citizenship, non-compliance to issued final demand letter for past due premiums, including incurred interests, shall result in the temporary discontinuance of succeeding benefit availments and may constitute an administrative offense sanctioned under Section 38 of the UHC Act. Provided finally, that in the case of employed member, the failure of the employer to remit the required contribution and to submit the required remittance list shall constitute an offense as provided for under Section 38 of the UHC Act.

VI. SEPARABILITY CLAUSE

In the event that a part of the provision of this Circular is declared unconstitutional or rendered invalid by any Court of Law or competent authority, provisions not affected by such declaration shall remain in full force and effect.

VII. REPEALING CLAUSE

All issuances inconsistent with this Circular are hereby repealed or modified accordingly.

VIII. DATE OF EFFECTIVITY

This Circular shall take effect after fifteen (15) days from its publication in a newspaper of general circulation and three (3) certified true copies had been furnished the Office of National Administrative Register (ONAR) of the UP Law Center.

BGEN. RICARDO C. MORALES, AFP (RET) FICD
President and Chief Executive Officer (CEO)

Date signed: 2/19/2020

Premium Contribution Schedule in the National Health Insurance Program (NHIP) Pursuant to Republic Act 11223 known as the "Universal Health Act" (Revision 1)

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