



## HOUSE OF REPRESENTATIVES

H. No. 7081

---

BY REPRESENTATIVES COSCOLLUELA, VELARDE, TEODORO, PRIETO-  
TEODORO, ANGARA, GARIN, BONOAN-DAVID, TIENG, CODILLA,  
ANTONINO, ALMARIO, MENDOZA (M.), ROMULO, PINGOY, GONZALES  
(N.), DE GUZMAN AND DEL MAR, PER COMMITTEE REPORT NO. 2557

---

AN ACT GRANTING ADDITIONAL POWERS TO THE PHILIPPINE  
HEALTH INSURANCE CORPORATION (PHILHEALTH),  
AMENDING FOR THE PURPOSE REPUBLIC ACT NO. 7875,  
OTHERWISE KNOWN AS THE "NATIONAL HEALTH  
INSURANCE ACT OF 1995", AS AMENDED, AND FOR OTHER  
PURPOSES"

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

1           SECTION 1. Section 4 of Republic Act No. 7875, as amended, is hereby  
2 further amended by adding a definition of the informal sector, to be  
3 denominated as paragraph (r) and succeeding paragraphs to be re-denominated  
4 accordingly.

5           "SEC. 4. *Definition of Terms.* – For the purpose of this  
6 Act, the following terms shall be defined as follows:

7           "x x x

1           **“R) INFORMAL SECTOR – THE INFORMAL SECTOR**  
 2           **REFERS TO THAT SECTOR CONSISTING OF UNITS ENGAGED IN**  
 3           **THE PRODUCTION OF GOODS AND SERVICES WITH THE**  
 4           **PRIMARY OBJECTIVE OF GENERATING EMPLOYMENT AND**  
 5           **INCOMES TO THE PERSON CONCERNED, IN ORDER TO EARN A**  
 6           **LIVING, PARTICULARLY UNINCORPORATED HOUSEHOLD**  
 7           **ENTERPRISES THAT ARE MARKET AND NON-MARKET**  
 8           **PRODUCERS OF GOODS AS WELL AS MARKET PRODUCERS OF**  
 9           **SERVICES. TO THIS SECTOR BELONG, AMONG OTHERS, STREET**  
 10           **HAWKERS, MARKET VENDORS, PEDICAB AND TRICYCLE**  
 11           **DRIVERS, SMALL CONSTRUCTION WORKERS AND HOME-BASED**  
 12           **INDUSTRIES AND SERVICES.**

13           “x x x.”

14           SEC. 2. Section 16 of the same Act is hereby amended to read as  
 15 follows:

16           “SEC. 16. *Powers and Functions.* – The Corporation  
 17 shall have the following powers and functions:

18           “x x x

19           “c) TO SUPERVISE THE PROVISION OF HEALTH  
 20 BENEFITS AND to set standards, rules, and regulations necessary  
 21 to ensure quality of care, appropriate utilization of services, fund  
 22 viability, member satisfaction, and overall accomplishment of  
 23 Program objectives;

24           “d) to formulate and implement guidelines on  
 25 contributions and benefits; portability of benefits, cost  
 26 containment and quality assurance; [and] health care provider  
 27 arrangements, payment methods, and referral systems; AND  
 28 PROVISION OF AN INCENTIVE SYSTEM FOR HEALTH CARE  
 29 PROVIDERS SUBJECT TO TERMS AND CONDITIONS AS MAY BE  
 30 DETERMINED BY THE BOARD;

1 "x x x

2 "m) [to supervise the provision of health benefits with  
3 the power]to VISIT, ENTER AND inspect FACILITIES OF HEALTH  
4 CARE PROVIDERS AND EMPLOYERS AND TO SECURE COPIES OF  
5 THEIR medical, [and] financial AND OTHER RECORDS  
6 PERTINENT TO THE CLAIMS, ACCREDITATION, PREMIUM  
7 CONTRIBUTION records, AND THAT of THEIR PATIENTS OR  
8 EMPLOYEES, WHERE APPLICABLE, [health care providers and  
9 patients] who are [participants in] BENEFICIARIES or members  
10 of the Program;[, and the power to enter and inspect accredited  
11 health care institutions, subject to the rules and regulations to be  
12 promulgated by the Corporation;]

13 "x x x."

14 SEC. 3. Section 18 of the same Act, as amended, is hereby  
15 further amended to read as follows:

16 "SEC. 18. *The Board of Directors.* –

17 "a) *Composition* – The Corporation shall be governed  
18 by a Board of Directors hereinafter referred to as the Board,  
19 composed of the following members:

20 "The Secretary of Health;

21 "The Secretary of Labor and Employment or his  
22 representative;

23 "The Secretary of the Interior and Local Government or  
24 his representative;

25 "The Secretary of Social Welfare and Development or his  
26 representative;

1                    “The President **AND CHIEF EXECUTIVE OFFICER (CEO)**  
2 of the Corporation;

3                    “A representative of the [labor] **FORMAL** sector;

4                    “A representative of employers;

5                    “The SSS Administrator or his representative;

6                    “The GSIS General Manager or his representative;

7                    “The Vice Chairperson for the basic sector of the National  
8 Anti-Poverty Commission or his representative;

9                    “A representative of Filipino overseas workers;

10                   A representative of the [self-employed] **INFORMAL** sector;  
11 and

12                   “A representative of health care providers [to be endorsed  
13 by the national associations of health care institutions and  
14 medical health professionals].

15                   **“SECTORAL REPRESENTATIVES SHALL BE ENDORSED BY  
16 THEIR RESPECTIVE DULY RECOGNIZED NATIONAL  
17 ASSOCIATIONS.**

18                   “The Secretary of Health shall be the *ex officio*  
19 Chairperson while the President **AND CHIEF EXECUTIVE  
20 OFFICER (CEO)** of the Corporation shall be the Vice  
21 Chairperson of the Board.

22                   “x x x.”

23                   SEC. 4. Section 19, subsection a) of the same Act, is hereby amended  
24 to read as follows:

25                   **“SEC. 19. *The President of the Corporation.* –**

26                   **“a) *Appointment and Tenure* –** The President of the  
27 Philippines shall appoint for a non-renewable term of six (6)  
28 years the President of the Corporation, hereinafter referred to as

1 the President, upon the recommendation of the Board. The  
2 President **MAY BE REMOVED FOR CAUSE, UPON**  
3 **RECOMMENDATION OF THE BOARD** [shall not be removed from  
4 office except in accordance with existing laws].

5 "x x x."

6 SEC. 5. Section 31 of the same Act is hereby amended to read as  
7 follows:

8 "SEC. 31. *Authority to Grant Accreditation.* – The  
9 Corporation shall have the authority to grant to health care  
10 providers accreditation which confers the privilege of  
11 participating in the Program: **PROVIDED, HOWEVER, THAT IN NO**  
12 **CASE SHALL THE CORPORATION GRANT THE RENEWAL OF**  
13 **ACCREDITATION OR RE-ACCREDITATION, TO ANY HEALTH**  
14 **CARE PROVIDER FOUND GUILTY AS CHARGED FOR ANY**  
15 **VIOLATIONS OF THIS ACT, SUBJECT TO THE TERMS AND**  
16 **CONDITIONS ISSUED BY THE BOARD."**

17 SEC. 6. Section 41, subsections a) and b) of the same Act, is hereby  
18 amended to read as follows:

19 "SEC. 41. *Grievance and Appeal Procedures.* – A  
20 member, his dependent, or a health care provider may file a  
21 complaint for grievance based on any of the above grounds, in  
22 accordance with the following procedures:

23 "a) A complaint for grievance must be filed with the  
24 [Office] CORPORATION which shall rule on the complaint within  
25 [ninety (90)] SIXTY (60) calendar days from receipt thereof.

26 "b) Appeals from [Office] THE CORPORATION'S  
27 decisions must be filed with the Board within [thirty (30)]

1 FIFTEEN (15) CALENDAR days from receipt of THE notice of  
2 DECISION [dismissal or disallowance by the Office].

3 "x x x."

4 SEC. 7. Section 44 of the same Act is hereby amended to read as  
5 follows:

6 "Article X. OFFENSES AND PENALTIES

7 ["SEC. 44. *Penal Provisions.* – Any violation of the  
8 provisions of this Act, after due notice and hearing, shall suffer  
9 the following penalties:

10 "A fine of not less than Ten thousand pesos (P10,000) nor  
11 more than Fifty thousand pesos (P50,000) in case the violation is  
12 committed by the hospital management or provider. In addition,  
13 its accreditation shall be suspended or revoked from three (3)  
14 months to the whole term of accreditation: *Provided, however,*  
15 That recidivists may not anymore be accredited as a participant  
16 of the Program;

17 "A fine of not less than Five hundred pesos (P500) nor  
18 more than Five thousand pesos (P5,000) and imprisonment of  
19 not less than six (6) months nor more than one (1) year in case  
20 the violation is committed by the member.

21 "Where the violations consist of failure or refusal to  
22 deduct contributions from the employee's compensation or to  
23 remit the same to the Corporation, the penalty shall be a fine of  
24 not less than Five hundred pesos (P500) but not more than One  
25 thousand pesos (P1,000) multiplied by the total number of  
26 employees employed by the firm and imprisonment of not less  
27 than six (6) months but not more than one (1) year: *Provided,*  
28 *further,* That in the case of self-employed members, failure to

1 remit one's own contribution shall be penalized with a fine of not  
2 less than Five hundred pesos (P500) but not more than One  
3 thousand pesos (P1,000).]

4 **"SEC. 44. PENAL PROVISIONS.**

5 **I. OFFENSES OF INSTITUTIONAL HEALTH CARE PROVIDERS**

6 **"A) THE FOLLOWING VIOLATIONS OF ACCREDITED**  
7 **INSTITUTIONAL HEALTH CARE PROVIDERS, AFTER DUE NOTICE**  
8 **AND HEARING, SHALL BE PENALIZED WITH SUSPENSION OF**  
9 **ACCREDITATION OF NOT LESS THAN THREE (3) MONTHS BUT**  
10 **NOT MORE THAN SIX (6) MONTHS OR REVOCATION OF**  
11 **ACCREDITATION, AT THE DISCRETION OF THE CORPORATION**  
12 **AND/OR A FINE OF NOT LESS THAN FIFTY THOUSAND PESOS**  
13 **(P50,000.00) BUT NOT MORE THAN ONE HUNDRED THOUSAND**  
14 **PESOS (P100,000.00):**

15 **"1) FILING OF MULTIPLE CLAIMS - ANY HEALTH**  
16 **CARE PROVIDER WHO, FOR THE PURPOSE OF CLAIMING**  
17 **PAYMENT FROM THE NHIP, FILES TWO (2) OR MORE CLAIMS**  
18 **FOR A PATIENT FOR THE SAME CONFINEMENT OR ILLNESS, OR**  
19 **MAKES IT APPEAR THAT THE PATIENT HAD BEEN CONFINED**  
20 **FOR TWO (2) OR MORE TIMES AND/OR FOR TWO (2) OR MORE**  
21 **DIFFERENT ILLNESSES;**

22 **"2) UNJUSTIFIED ADMISSION BEYOND ACCREDITED**  
23 **BED CAPACITY - ANY HEALTH CARE INSTITUTION WHICH,**  
24 **FOR THE PURPOSE OF CLAIMING PAYMENT FROM THE NHIP,**  
25 **FILES A CLAIM FOR PATIENTS CONFINED IN EXCESS OF THE**  
26 **ACCREDITED BED CAPACITY AT ANY GIVEN TIME WITHOUT**  
27 **JUSTIFICATION IN THE FORM AND MANNER PRESCRIBED BY**  
28 **THE CORPORATION;**

29 **"3) CLAIMS FOR UNAUTHORIZED SERVICES AND**  
30 **PROCEDURES PERFORMED BEYOND ACCREDITATION**

1           **CAPABILITY OF THE HEALTH CARE INSTITUTION – ANY**  
2           **HEALTH CARE INSTITUTION WHICH PERFORMS HEALTH CARE**  
3           **SERVICES AND PROCEDURES BEYOND ITS AUTHORIZED**  
4           **CAPABILITY, EXCEPT WHEN SUCH SERVICES WERE DONE IN AN**  
5           **EMERGENCY SITUATION TO SAVE LIVES AND WHEN REFERRAL**  
6           **TO A HIGHER CATEGORY PROVIDER IS PHYSICALLY**  
7           **IMPOSSIBLE;**

8           **“4) BREACH OF WARRANTIES OF ACCREDITATION –**  
9           **ANY INSTITUTIONAL HEALTH CARE PROVIDER WHO COMMITS**  
10           **ANY BREACH OF WARRANTIES OF ACCREDITATION; AND**

11           **“5) OTHER VIOLATIONS – ANY OTHER WILLFUL OR**  
12           **NEGLIGENT ACT OR OMISSION OF THE INSTITUTIONAL HEALTH**  
13           **CARE PROVIDER IN VIOLATION OF THIS ACT WHICH TENDS TO**  
14           **UNDERMINE OR DEFEAT THE OBJECTIVES OF THE NHIP SHALL**  
15           **BE CONSIDERED AS BREACH OF WARRANTIES.**

16           **“B) THE FOLLOWING OFFENSES OF INSTITUTIONAL**  
17           **HEALTH CARE PROVIDERS, AFTER DUE NOTICE AND HEARING,**  
18           **SHALL BE PENALIZED WITH SUSPENSION OF ACCREDITATION**  
19           **OF NOT LESS THAN SIX (6) MONTHS AND ONE (1) DAY BUT NOT**  
20           **MORE THAN NINE (9) MONTHS OR REVOCATION OF**  
21           **ACCREDITATION AT THE DISCRETION OF THE CORPORATION**  
22           **AND/OR A FINE OF NOT LESS THAN FIFTY THOUSAND PESOS**  
23           **(P50,000.00) BUT NOT MORE THAN ONE HUNDRED THOUSAND**  
24           **PESOS (P100,000.00):**

25           **“1) MISREPRESENTATION BY FURNISHING FALSE OR**  
26           **INCORRECT INFORMATION – ANY HEALTH CARE PROVIDER**  
27           **SHALL BE LIABLE FOR FRAUDULENT PRACTICE WHEN FOR THE**  
28           **PURPOSE OF PARTICIPATION IN THE NHIP OR CLAIMING**  
29           **PAYMENT THEREFROM, IT FURNISHES FALSE OR INCORRECT**  
30           **INFORMATION CONCERNING ANY MATTER REQUIRED BY THIS**  
31           **ACT;**



1                   **"2) ABUSES AND UNETHICAL PRACTICES - ANY**  
2 **HEALTH CARE INSTITUTION SHALL BE LIABLE FOR THE**  
3 **FOLLOWING ABUSES AND UNETHICAL PRACTICES:**

4                   **"i) CHARGING OR COLLECTING FROM A MEMBER AN**  
5 **AMOUNT IN EXCESS OF THE BENEFITS INCLUDING THOSE**  
6 **COVERED BY CAPITATION OR GLOBAL BUDGETS FOR**  
7 **PHILHEALTH-COVERED SERVICES AND SUPPLIES WHICH**  
8 **PROHIBITS CHARGING OF OUT-OF-POCKET PAYMENT**  
9 **INCLUDING OUTSIDE PURCHASES OF MEDICINES, SUPPLIES AND**  
10 **HEALTH CARE SERVICES THAT ARE INCLUDED IN THE BENEFIT;**

11                   **"ii) ENROLLMENT AND/OR RECRUITMENT OF A PERSON**  
12 **FOR MEMBERSHIP IN THE NHIP FOR THE SOLE PURPOSE OF**  
13 **CLAIMING BENEFITS OR PAYMENT OF PREMIUM OF A MEMBER**  
14 **BEFORE PROVIDING HEALTH CARE SERVICES TO HIM/HER,**  
15 **EXCEPT WHEN THE PATIENT OR MEMBER IS ITS EMPLOYEE OR**  
16 **THE OWNER'S RELATIVE WITHIN THE FOURTH CIVIL DEGREE**  
17 **OF CONSANGUINITY OR AFFINITY; AND**

18                   **"iii) ALL SUCH OTHER ANALOGOUS ABUSES AND**  
19 **UNETHICAL PRACTICES AS MAY BE DETERMINED BY THE**  
20 **CORPORATION.**

21                   **"3) OTHER FRAUDULENT ACTS - ANY INSTITUTIONAL**  
22 **HEALTH CARE PROVIDER SHALL ALSO BE LIABLE FOR THE**  
23 **FOLLOWING FRAUDULENT ACTS:**

24                   **"i) MAKING IT APPEAR THAT THE PATIENT SUFFERED**  
25 **FROM COMPENSABLE ILLNESS OR UNDERWENT A**  
26 **COMPENSABLE PROCEDURE;**

27                   **"ii) FAILURE OR REFUSAL TO GIVE THE BENEFITS DUE**  
28 **TO QUALIFIED MEMBERS/DEPENDENTS;**

29                   **"iii) CHARGING QUALIFIED PATIENTS FOR MEDICINES**  
30 **AND/OR SERVICES WHICH ARE LEGALLY CHARGEABLE TO AND**  
31 **COVERED BY THE NHIP;**

1           **“iv) FAILURE OR REFUSAL TO REFUND TO THE MEMBER**  
2           **THE PAYMENT RECEIVED FROM THE NHIP WHEN THE**  
3           **HOSPITAL CHARGES AND PROFESSIONAL FEES ARE FULLY PAID**  
4           **IN ADVANCE BY THE MEMBER WITHIN THE PERIOD OF THIRTY**  
5           **(30) DAYS FROM THE DATE OF RECEIPT OF REFUND CHECK**  
6           **FROM THE CORPORATION: *PROVIDED, HOWEVER, THAT IF THE***  
7           **MEMBER FAILED TO GET HIS/HER REFUND DESPITE DUE**  
8           **NOTICE, THE HEALTH CARE INSTITUTION SHALL RETURN SUCH**  
9           **UNCLAIMED REFUND TO THE CORPORATION WITHIN THE**  
10           **PRESCRIBED PERIOD AS MAY BE DETERMINED BY THE BOARD;**

11           **“v) FAILURE OR REFUSAL TO ACCOMPLISH AND SUBMIT**  
12           **THE REQUIRED FORMS IN CONNECTION WITH LETTER IV OF**  
13           **THIS SECTION;**

14           **“vi) FAILURE OR REFUSAL TO PROVIDE THE MEMBERS**  
15           **WITH THE REQUIRED FORMS FOR DIRECT FILING OF CLAIMS,**  
16           **BILLING STATEMENTS, OFFICIAL RECEIPTS AND OTHER**  
17           **DOCUMENTS REQUIRED FOR FILING OF CLAIMS; OR**

18           **“vii) DELIBERATE FAILURE OR REFUSAL TO COMPLY**  
19           **WITH THE REQUIREMENTS UNDER THIS ACT.**

20           **“c) THE FOLLOWING OFFENSES OF INSTITUTIONAL**  
21           **HEALTH CARE PROVIDERS, AFTER DUE NOTICE AND HEARING,**  
22           **SHALL BE PENALIZED WITH SUSPENSION OF ACCREDITATION**  
23           **OF NOT LESS THAN NINE (9) MONTHS AND ONE (1) DAY BUT NOT**  
24           **MORE THAN TWELVE (12) MONTHS OR REVOCATION OF**  
25           **ACCREDITATION AT THE DISCRETION OF THE CORPORATION**  
26           **AND/OR A FINE OF NOT LESS THAN FIFTY THOUSAND PESOS**  
27           **(P50,000.00) BUT NOT MORE THAN ONE HUNDRED THOUSAND**  
28           **PESOS (P100,000.00):**

1           **"1) PADDING OF CLAIMS - ANY INSTITUTIONAL**  
2 **HEALTH CARE PROVIDER WHO, FOR THE PURPOSE OF**  
3 **CLAIMING PAYMENT FROM THE NHIP, FILES A CLAIM FOR**  
4 **BENEFITS WHICH ARE IN EXCESS OF THE BENEFITS ACTUALLY**  
5 **PROVIDED BY ADDING DRUGS, MEDICINES, SUPPLIES,**  
6 **PROCEDURES AND SERVICES;**

7           **"2) CLAIMS FOR SERVICES NOT RENDERED AND/OR**  
8 **CONFINEMENTS OF NON-ADMITTED PATIENTS - ANY**  
9 **INSTITUTIONAL HEALTH CARE PROVIDER WHO, FOR THE**  
10 **PURPOSE OF CLAIMING BENEFIT REIMBURSEMENT FROM THE**  
11 **NHIP BY:**

12           **"i) MAKING IT APPEAR THAT THE PATIENT IS ACTUALLY**  
13 **CONFINED AND/OR PROVIDED IN THE PHILHEALTH-COVERED**  
14 **SERVICES IN THE HEALTH CARE INSTITUTION/FACILITY; OR**

15           **"ii) USING SUCH OTHER MACHINATIONS THAT WOULD**  
16 **RESULT IN CLAIMS FOR SERVICES NOT RENDERED/GIVEN.**

17           **"3) EXTENDING THE PERIOD OF CONFINEMENT - THIS**  
18 **IS COMMITTED BY ANY HEALTH CARE PROVIDER WHO, FOR**  
19 **THE PURPOSE OF CLAIMING PAYMENT FROM THE NHIP, FILES**  
20 **A CLAIM WITH EXTENDED PERIOD OF CONFINEMENT BY:**

21           **"i) INCREASING THE PERIOD OF ACTUAL**  
22 **CONFINEMENT OF ANY PATIENT;**

23           **"ii) CONTINUOUSLY CHARTING ENTRIES IN THE**  
24 **DOCTORS' ORDER, NURSES' NOTES AND OBSERVATION DESPITE**  
25 **ACTUAL DISCHARGE OR ABSENCE OF THE PATIENTS; OR**

26           **"iii) USING SUCH OTHER MACHINATIONS THAT WOULD**  
27 **RESULT IN THE UNNECESSARY EXTENSION OF CONFINEMENT.**

28           **"4) POST-DATING OF CLAIMS - ANY INSTITUTIONAL**  
29 **HEALTH CARE PROVIDER WHO, FOR PURPOSES OF CLAIMING**  
30 **PAYMENT FROM THE NHIP, FILES A CLAIM FOR PAYMENT OF**  
31 **SERVICES RENDERED NOT WITHIN SIXTY (60) CALENDAR DAYS**

1 FROM THE DATE OF DISCHARGE OF THE PATIENT OR SUCH  
2 OTHER PRESCRIPTIVE PERIODS AS THE CORPORATION MAY  
3 ISSUE BUT MAKES IT APPEAR SO BY CHANGING, ERASING OR  
4 ADDING TO THE PERIOD OF CONFINEMENT OR IN ANY MANNER  
5 ALTERING DATES SO AS TO CONFORM WITH THE ADOPTED  
6 PRESCRIPTIVE PERIOD;

7 "5) FABRICATION OR POSSESSION OF FABRICATED  
8 FORMS AND SUPPORTING DOCUMENTS – ANY INSTITUTIONAL  
9 HEALTH CARE PROVIDER WHO IS FOUND PREPARING CLAIMS  
10 WITH MISREPRESENTATION OR FALSE ENTRIES OR TO BE IN  
11 POSSESSION OF CLAIM FORMS AND OTHER DOCUMENTS WITH  
12 FALSE ENTRIES;

13 "D) PERIOD TO FILE CLAIMS – ALL CLAIMS FOR  
14 REIMBURSEMENT SHALL BE FILED WITHIN A PERIOD OF SIXTY  
15 (60) CALENDAR DAYS FROM THE DATE OF DISCHARGE OF THE  
16 PATIENT; OTHERWISE, THE CLAIM SHALL BE DENIED:  
17 *PROVIDED, HOWEVER, THAT SUCH PERIOD MAY BE EXTENDED*  
18 *FOR SUCH CAUSES AS MAY BE DETERMINED BY THE*  
19 *CORPORATION.*

20 "E) CRIMINAL LIABILITY – IN ADDITION, A CRIMINAL  
21 COMPLAINT SHALL BE FILED AGAINST THE CHIEF EXECUTIVE  
22 OFFICER (CEO)/CHIEF OPERATING OFFICER (COO) OR ITS  
23 EQUIVALENT OFFICERS, MEDICAL DIRECTOR OR ITS  
24 EQUIVALENT OFFICER AND OTHER OFFICERS OF THE ERRING  
25 INSTITUTIONAL HEALTH CARE PROVIDER BEFORE THE  
26 APPROPRIATE OFFICE OF THE PROSECUTOR FOR VIOLATIONS  
27 OF THIS ACT AND/OR THE REVISED PENAL CODE.

**II. OFFENSES OF HEALTH CARE PROFESSIONALS**

1  
2           **"A) A HEALTH CARE PROFESSIONAL, AFTER DUE**  
3 **NOTICE AND HEARING, SHALL BE PENALIZED WITH**  
4 **SUSPENSION/REVOCAION OF ACCREDITATION OF NOT LESS**  
5 **THAN THREE (3) MONTHS TO THE WHOLE TERM OF**  
6 **ACCREDITATION OR A FINE OF NOT LESS THAN FIFTY**  
7 **THOUSAND PESOS (P50,000.00) BUT NOT MORE THAN ONE**  
8 **HUNDRED THOUSAND PESOS (P100,000.00) OR BOTH SUCH FINE**  
9 **AND SUSPENSION OR REVOCATION, AT THE DISCRETION OF THE**  
10 **CORPORATION:**

11           **"1) MISREPRESENTATION BY FALSE OR INCORRECT**  
12 **INFORMATION - ANY HEALTH CARE PROFESSIONAL SHALL BE**  
13 **LIABLE FOR FRAUDULENT PRACTICE WHEN, FOR PURPOSES OF**  
14 **PARTICIPATION IN THE NHIP OR CLAIMING PAYMENT FROM**  
15 **THE CORPORATION, FURNISHES FALSE OR INCORRECT**  
16 **INFORMATION CONCERNING ANY MATTER REQUIRED BY THIS**  
17 **ACT;**

18           **"2) BREACH OF WARRANTIES OF ACCREDITATION -**  
19 **ANY HEALTH CARE PROFESSIONAL FOUND TO HAVE**  
20 **COMMITTED ANY BREACH OF WARRANTIES OF**  
21 **ACCREDITATION;**

22           **"3) ABUSES AND UNETHICAL PRACTICES - ANY**  
23 **HEALTH CARE PROFESSIONAL SHALL BE LIABLE FOR THE**  
24 **FOLLOWING ABUSES AND UNETHICAL PRACTICES:**

25           **"i) PERFORMANCE OF PROCEDURES BEYOND THOSE**  
26 **ALLOWED BY THE HEALTH PROFESSIONAL'S QUALIFICATIONS**  
27 **AND TRAINING EXCEPT WHEN UNDER THE DIRECT**  
28 **SUPERVISION OF A QUALIFIED HEALTH CARE PROFESSIONAL;**

29           **"ii) CHARGING OR COLLECTING FROM A MEMBER AN**  
30 **AMOUNT IN EXCESS OF THE BENEFITS INCLUDING THOSE**  
31 **COVERED BY CAPITATION OR GLOBAL BUDGETS FOR**

1           **PHILHEALTH-COVERED SERVICES AND SUPPLIES WHICH**  
2           **PROHIBITS CHARGING OUT-OF-POCKET PAYMENTS INCLUDING**  
3           **OUTSIDE PURCHASES OF MEDICINES, SUPPLIES AND HEALTH**  
4           **CARE SERVICES THAT ARE INCLUDED IN THE BENEFIT;**

5           **“iii) ENROLLMENT AND/OR RECRUITMENT OF A PERSON**  
6           **FOR MEMBERSHIP IN THE NHIP WITH THE SOLE PURPOSE OF**  
7           **CLAIMING BENEFITS AND/OR PAYMENT OF PREMIUM OF A**  
8           **MEMBER BEFORE PROVIDING HEALTH CARE SERVICES TO**  
9           **HIM/HER, EXCEPT WHEN THE PATIENT OR MEMBER IS HIS/HER**  
10          **EMPLOYEE OR RELATIVE WITHIN THE FOURTH CIVIL DEGREE**  
11          **OF CONSANGUINITY OR AFFINITY; AND**

12          **“iv) ALL SUCH OTHER ANALOGOUS ABUSES AND**  
13          **UNETHICAL PRACTICES AS MAY BE DETERMINED BY THE**  
14          **CORPORATION.**

15          **“4) OTHER FRAUDULENT ACTS – ANY HEALTH CARE**  
16          **PROFESSIONAL SHALL ALSO BE LIABLE FOR THE FOLLOWING**  
17          **FRAUDULENT ACTS:**

18          **“i) MAKING IT APPEAR THAT THE PATIENT SUFFERED**  
19          **FROM COMPENSABLE ILLNESS OR UNDERWENT A**  
20          **COMPENSABLE PROCEDURE;**

21          **“ii) FAILURE OR REFUSAL TO GIVE THE BENEFITS DUE**  
22          **TO QUALIFIED MEMBERS/DEPENDENTS;**

23          **“iii) CHARGING QUALIFIED PATIENTS FOR MEDICINES**  
24          **AND/OR SERVICES WHICH ARE LEGALLY CHARGEABLE TO AND**  
25          **COVERED BY THE NHIP;**

26          **“iv) FAILURE OR REFUSAL TO REFUND TO THE MEMBER**  
27          **THE PAYMENT RECEIVED FROM THE NHIP WHEN THE**  
28          **HOSPITAL CHARGES AND PROFESSIONAL FEES ARE FULLY PAID**  
29          **IN ADVANCE BY THE MEMBER WITHIN THE PERIOD OF THIRTY**  
30          **(30) DAYS FROM THE DATE OF RECEIPT OF REFUND CHECK**  
31          **FROM THE CORPORATION;**

1                   **“v) FAILURE OR REFUSAL TO ACCOMPLISH AND SUBMIT**  
2                   **THE REQUIRED FORMS IN CONNECTION WITH LETTER (iv) OF**  
3                   **THIS SECTION; .**

4                   **“vi) FAILURE OR REFUSAL TO PROVIDE THE MEMBERS**  
5                   **WITH THE REQUIRED FORMS FOR DIRECT FILING OF CLAIMS:**  
6                   **BILLING STATEMENTS, OFFICIAL RECEIPTS AND OTHER**  
7                   **DOCUMENTS REQUIRED FOR FILING OF CLAIMS; OR**

8                   **“vii) DELIBERATE FAILURE OR REFUSAL TO COMPLY**  
9                   **WITH THE REQUIREMENTS UNDER THIS ACT.**

10                   **“5) OTHER VIOLATIONS – ANY OTHER WILLFUL OR**  
11                   **NEGLIGENT ACT OR OMISSION OF A HEALTH CARE**  
12                   **PROFESSIONAL IN VIOLATION OF THIS ACT WHICH TENDS TO**  
13                   **UNDERMINE OR DEFEAT THE OBJECTIVES OF THE NHIP SHALL**  
14                   **BE CONSIDERED AS BREACH OF WARRANTIES.**

15                   **“B) CRIMINAL LIABILITY – IN ADDITION, A CRIMINAL**  
16                   **COMPLAINT SHALL BE FILED AGAINST ERRING HEALTH CARE**  
17                   **PROFESSIONALS BEFORE THE APPROPRIATE OFFICE OF THE**  
18                   **PROSECUTOR FOR VIOLATIONS OF THIS ACT AND/OR THE**  
19                   **REVISED PENAL CODE.**

20                   **“III. OFFENSES OF MEMBERS**

21                   **“A) FRAUDULENT ACTS – ANY MEMBER WHO, FOR**  
22                   **PURPOSES OF CLAIMING NHIP BENEFITS OR ENTITLEMENT**  
23                   **THERE TO, SHALL COMMIT ANY OF THE OFFENSES PROVIDED**  
24                   **FOR BY THIS ACT, INDEPENDENTLY OR IN CONNIVANCE WITH**  
25                   **THE HEALTH CARE PROVIDER, SHALL SUFFER SUSPENSION**  
26                   **FROM AVAILMENT OF NHIP BENEFITS FOR NOT LESS THAN**  
27                   **THREE (3) MONTHS BUT NOT MORE THAN SIX (6) MONTHS**  
28                   **AND/OR A FINE OF FIVE THOUSAND PESOS (P5,000.00).**

1                   **“B) CRIMINAL LIABILITY – IN ADDITION, A CRIMINAL**  
2                   **COMPLAINT SHALL BE FILED AGAINST THE MEMBER BEFORE**  
3                   **THE OFFICE OF THE PROSECUTOR FOR THE**  
4                   **ABOVEMENTIONED VIOLATIONS WHICH CARRY A PENALTY OF**  
5                   **IMPRISONMENT OF NOT LESS THAN SIX (6) MONTHS BUT NOT**  
6                   **MORE THAN ONE (1) YEAR.**

7                   **“IV. OFFENSES OF EMPLOYERS**

8                   **“A) FAILURE/REFUSAL TO REGISTER/DEDUCT/REMIT**  
9                   **THE CONTRIBUTIONS – ANY EMPLOYER WHICH FAILS OR**  
10                   **REFUSES TO REGISTER ITS EMPLOYEES OR TO DEDUCT**  
11                   **CONTRIBUTIONS FROM THE EMPLOYEE’S COMPENSATION**  
12                   **AND/OR TO REMIT THE SAME TO THE CORPORATION SHALL BE**  
13                   **PENALIZED WITH IMPRISONMENT OF NOT LESS THAN SIX (6)**  
14                   **YEARS AND ONE (1) DAY TO TWELVE (12) YEARS AND A FINE OF**  
15                   **NOT LESS THAN FIVE THOUSAND PESOS (P5,000.00)**  
16                   **MULTIPLIED BY THE TOTAL NUMBER OF EMPLOYEES OF THE**  
17                   **FIRM.**

18                   **“Any employer or any officer authorized to collect**  
19                   **contributions under this Act who, after collecting or deducting**  
20                   **the monthly contributions from his employees’ compensation,**  
21                   **fails to remit the said contributions to the Corporation within**  
22                   **thirty (30) days from the date they become due shall be**  
23                   **presumed to have misappropriated such contributions and shall**  
24                   **suffer the penalties provided for in Article 315 of the Revised**  
25                   **Penal Code.**

26                   **“B) DEDUCTIONS OF EMPLOYER’S SHARE, DIRECTLY**  
27                   **OR INDIRECTLY, FROM THE COMPENSATION OF ITS**  
28                   **EMPLOYEES – Any employer who shall deduct directly or**  
29                   **indirectly from the compensation of the covered employees or**



1 otherwise recover from them **THEIR** [his]own contribution on  
2 behalf of such employees shall be punished by **IMPRISONMENT**  
3 **FOR NOT LESS THAN SIX (6) YEARS AND ONE (1) DAY TO**  
4 **TWELVE (12) YEARS AND** a fine [not exceeding] **OF FIVE [One]**  
5 thousand pesos [(P1,000)] **(P5,000.00)** multiplied by the total  
6 number of employees employed by the firm[, or imprisonment  
7 not exceeding one (1) year, or both fine and imprisonment, at the  
8 discretion of the Court].

9 "If the act or omission penalized by this Act be committed  
10 by an association, partnership, corporation or any other  
11 institution, its managing directors or partners or president or  
12 general manager, or other persons responsible for the  
13 commission of the said act shall be liable for the penalties  
14 provided for in this Act and other laws for the offense.

15 **"C) MISAPPROPRIATION OF FUNDS BY EMPLOYEES OF**  
16 **THE CORPORATION** -- Any employee of the Corporation who  
17 receives or keeps funds or property belonging, payable or  
18 deliverable to the Corporation, and who shall appropriate the  
19 same, or shall take or misappropriate or shall consent, or through  
20 abandonment or negligence shall permit any other person to take  
21 such property or funds wholly or partially, shall likewise be  
22 liable for misappropriation of funds or property and shall suffer  
23 imprisonment of not less than six (6) years and **ONE (1) DAY BUT**  
24 not more than twelve (12) years and a fine of not less than Ten  
25 thousand pesos (P10,000.00) nor more than Twenty thousand  
26 pesos (P20,000.00). Any shortage of the funds or loss of the

1 property upon audit shall be deemed *prima facie* evidence of the  
2 offense.

3 "D) CRIMINAL ACTION ARISING FROM A VIOLATION OF  
4 THE PROVISIONS OF THIS ACT MAY BE COMMENCED BY THE  
5 CORPORATION OR EMPLOYEE CONCERNED, WHERE  
6 APPLICABLE, EITHER UNDER THIS ACT OR IN THE REVISED  
7 PENAL CODE: *PROVIDED*, THAT SUCH CRIMINAL ACTION MAY  
8 BE FILED BY THE CORPORATION IN THE CITY OR  
9 MUNICIPALITY WHERE THE CORPORATION'S OFFICE IS  
10 LOCATED IF THE VIOLATION WAS COMMITTED WITHIN ITS  
11 TERRITORIAL JURISDICTION OR IN METRO MANILA, AT THE  
12 OPTION OF THE CORPORATION.

13 "V. CIRCUMSTANCES WHICH AFFECT ADMINISTRATIVE LIABILITY

14 "A) MITIGATING AND AGGRAVATING CIRCUMSTANCES  
15 - THE FOLLOWING CIRCUMSTANCES SHALL AFFECT THE  
16 GRAVITY OF THE VIOLATION AND THE LIABILITY OF THE  
17 ERRING HEALTH CARE PROVIDER, MEMBER AND EMPLOYER:

18 "1) MITIGATING CIRCUMSTANCES - THE FOLLOWING  
19 CIRCUMSTANCES SHALL MITIGATE THE LIABILITY OF THE  
20 RESPONDENT:

21 "i) VOLUNTARY ADMISSION OF GUILT;

22 "ii) GOOD TRACK RECORD;

23 "iii) FIRST OFFENSE; AND

24 "iv) SUCH OTHER VALID CIRCUMSTANCES AS MAY BE  
25 DETERMINED BY THE CORPORATION.

26 "2) AGGRAVATING CIRCUMSTANCES - THE  
27 FOLLOWING CIRCUMSTANCES SHALL AGGRAVATE THE  
28 LIABILITY OF THE RESPONDENT:



1           **“A) FIRST OFFENSE - SUSPENSION OF ACCREDITATION**  
2           **FOR NOT LESS THAN THREE (3) MONTHS BUT NOT MORE THAN**  
3           **SIX (6) MONTHS AND/OR A FINE OF NOT LESS THAN FIFTY**  
4           **THOUSAND PESOS (P50,000.00) BUT NOT MORE THAN ONE**  
5           **HUNDRED THOUSAND PESOS (P100,000.00);**

6           **“B) SECOND OFFENSE - SUSPENSION OF**  
7           **ACCREDITATION FOR NOT LESS THAN SIX (6) MONTHS AND ONE**  
8           **(1) DAY BUT NOT MORE THAN NINE (9) MONTHS AND/OR A FINE**  
9           **OF NOT LESS THAN FIFTY THOUSAND PESOS (P50,000.00) BUT**  
10           **NOT MORE THAN ONE HUNDRED THOUSAND PESOS**  
11           **(P100,000.00);**

12           **“C) THIRD OFFENSE - PERMANENT REVOCATION OF**  
13           **ACCREDITATION AND A FINE OF NOT LESS THAN FIFTY**  
14           **THOUSAND PESOS (P50,000.00) BUT NOT MORE THAN ONE**  
15           **HUNDRED THOUSAND PESOS (P100,000.00).**

16           **“ALL PENALTIES FOR OFFENSES COMMITTED BY**  
17           **HEALTH CARE PROVIDERS AND MEMBERS SHALL CARRY WITH**  
18           **THEM DENIAL OF PAYMENT OF CLAIMS IN QUESTION AND/OR**  
19           **REFUND TO THE CORPORATION, IF ALREADY PAID.**

20           **“IF THE PENALTY OF SUSPENSION IMPOSED AGAINST A**  
21           **HEALTH CARE PROVIDER EXCEEDS THE VALIDITY OF THE**  
22           **CURRENT ACCREDITATION, THE RENEWAL OR THE RE-**  
23           **ACCREDITATION OF THE LATTER SHALL NOT BE ACTED UPON**  
24           **UNTIL THE FULL TERM OF THE SUSPENSION IMPOSED HAD**  
25           **BEEN SERVED OR LIFTED. FOR THIS PURPOSE, THE PERIOD**  
26           **COVERING THE EXPIRATION OF ACCREDITATION AND THE**  
27           **START OF THE EFFECTIVITY OF THE RENEWAL OR RE-**  
28           **ACCREDITATION SHALL BE CONSIDERED AS PART OR**  
29           **CONTINUATION OF THE SUSPENSION. THE SUSPENSION SHALL**

1 BE CARRIED OUT BY THE TEMPORARY CESSATION OF THE  
2 BENEFITS OR PRIVILEGES UNDER THE NHIP.

3 "SHOULD THE AGGREGATE PERIOD OF SUSPENSION TO  
4 BE IMPOSED UPON THE PROVIDER ON ACCOUNT OF TWO (2) OR  
5 MORE VIOLATIONS EXCEED TWENTY-FOUR (24) MONTHS, THE  
6 MAXIMUM IMPOSABLE PENALTY SHALL BE EXACTED.

7 "IN ALL CASES WHEREIN A DECISION RENDERED  
8 AGAINST A HEALTH CARE PROVIDER, THE DEPARTMENT OF  
9 HEALTH (DOH), INCLUDING ITS REGIONAL OFFICES, THE  
10 PROFESSIONAL REGULATION COMMISSION (PRC), THE  
11 PHILIPPINE MEDICAL ASSOCIATION (PMA), THE PRIVATE  
12 HOSPITALS ASSOCIATION OF THE PHILIPPINES (PHAP) AND  
13 OTHER CONCERNED AGENCIES SHALL BE FURNISHED WITH A  
14 COPY OF THE SAME FOR INFORMATION AND APPROPRIATE  
15 ACTION.

16 "A NOTICE OF SUSPENSION FOR THE INFORMATION OF  
17 THE PUBLIC SHALL BE POSTED IN CONSPICUOUS PLACES IN THE  
18 INSTITUTION CONCERNED INDICATING THE PERIOD OF  
19 SUSPENSION IN SUCH FORM AND MANNER TO BE PRESCRIBED  
20 BY THE CORPORATION.

21 "A HEALTH CARE PROVIDER WHO AT THE TIME OF  
22 TRIAL FOR AN OFFENSE ENUMERATED HEREIN SHALL HAVE  
23 BEEN PREVIOUSLY CONVICTED BY FINAL JUDGMENT FOR ANY  
24 OFFENSE UNDER THIS ACT MAY NO LONGER BE ACCREDITED  
25 AS PARTICIPANT OF THE NHIP.

#### 26 "VII. PROSECUTION OF OFFENSES

27 "OFFENSES AS HEREIN DEFINED, SHALL BE PROSECUTED  
28 IN REGULAR COURTS OF JUSTICE OF COMPETENT  
29 JURISDICTION WITHOUT PREJUDICE TO ADMINISTRATIVE

1 ACTION THAT MAY BE INSTITUTED BY THE CORPORATION  
2 UNDER EXISTING LAWS.

3 "VIII. FILING OF OTHER LEGAL ACTIONS BEFORE THE  
4 PROPER COURTS

5 "THE FILING OF AN ADMINISTRATIVE ACTION AGAINST  
6 ANY HEALTH CARE PROVIDER, INSTITUTIONAL OR  
7 PROFESSIONAL, EMPLOYER, OR MEMBER UNDER THIS ACT IS  
8 WITHOUT PREJUDICE TO THE FILING OF FURTHER LEGAL  
9 ACTIONS IN THE PROPER COURTS.

10 "IX. EXECUTION OF PENALTY

11 "WHEN AN INSTITUTIONAL HEALTH CARE PROVIDER  
12 CEASES OPERATION OR AN INDEPENDENT HEALTH CARE  
13 PROFESSIONAL STOPS HIS/HER PRACTICE BEFORE SERVING  
14 THE SUSPENSION, EXECUTION OF THE PENALTY SHALL BE  
15 DEFERRED, TO BE IMPLEMENTED WHEN THE SAME OWNER OR  
16 MEDICAL DIRECTOR OPENS OR OPERATES A NEW INSTITUTION  
17 IRRESPECTIVE OF THE NAME OR LOCATION, OR WHEN THE  
18 HEALTH CARE PROVIDER PRACTICES AGAIN; *PROVIDED, THAT*  
19 *THE DISPOSITIVE PART OF THE RESOLUTION REQUIRING*  
20 *PAYMENT OF FINES, REIMBURSEMENT OF PAID CLAIM OR*  
21 *DENIAL OF PAYMENT SHALL BE IMMEDIATELY EXECUTORY.*

22 "A SPOUSE OR RELATIVE WITHIN THE FOURTH DEGREE  
23 OF CONSANGUINITY OR AFFINITY OF THE OWNER, CHIEF  
24 OPERATING OFFICER OR ITS COUNTERPART OFFICER, MEDICAL  
25 DIRECTOR OR ITS COUNTERPART OFFICER AND OTHER  
26 OFFICERS SHALL BE PRESUMED TO BE THE ALTER EGO OF  
27 SUCH OWNER OR MEDICAL DIRECTOR FOR THE ABOVE  
28 PURPOSES.

29 "DESPITE THE CESSATION OF OPERATION OR PRACTICE  
30 OF A HEALTH CARE PROVIDER WHILE THE COMPLAINT IS  
31 BEING HEARD, THE PROCEEDING SHALL CONTINUE UNTIL  
32 RENDITION OF JUDGMENT FOR PURPOSES OF DETERMINING

1 FUTURE RELATIONSHIPS BETWEEN THE CORPORATION AND  
2 THE ERRING HEALTH CARE PROVIDER.

3 "X. APPLICABILITY OF THESE PROVISIONS

4 "COMPLAINTS ALREADY FILED WITH AND UNDER  
5 DELIBERATION BY APPROPRIATE BODIES OF THE  
6 CORPORATION PRIOR TO THE EFFECTIVITY OF THIS ACT  
7 SHALL BE GOVERNED IN ACCORDANCE WITH THE PREVIOUS  
8 ACTS AND THEIR IMPLEMENTING RULES AND REGULATIONS.

9 "XI. IMPOSITION OF INTERESTS AND SURCHARGES

10 "THE CORPORATION MAY IMPOSE INTERESTS AND  
11 SURCHARGES OF THREE PERCENT (3%) PER MONTH OR AT  
12 ANY RATE AS MAY BE FIXED BY THE CORPORATION IN CASE OF  
13 ANY DELAY IN REMITTANCE OF CONTRIBUTIONS WHICH ARE  
14 DUE WITHIN THE PRESCRIBED PERIOD. NOTWITHSTANDING  
15 THE PROVISIONS OF ANY LAW TO THE CONTRARY, THE  
16 CORPORATION MAY ALSO COMPROMISE, WAIVE OR RELEASE,  
17 IN WHOLE OR IN PART, SUCH INTERESTS OR SURCHARGES  
18 UNDER SUCH VALID TERMS AND CONDITIONS IT MAY  
19 PRESCRIBE.

20 "XII. LEGAL ASSISTANCE AND BENEFITS

21 "ANY OFFICER, EMPLOYEE, OR AUTHORIZED  
22 REPRESENTATIVE OF THE CORPORATION WHO MAY BE SUED  
23 BY ANY HEALTH CARE PROVIDER/MEMBER/STAKEHOLDER OR  
24 ANY OTHER PERSON/ENTITY, IN CONNECTION WITH THE  
25 PERFORMANCE OF THEIR DUTIES AND OBLIGATIONS UNDER  
26 THE NHIP MAY BE ENTITLED TO SUFFICIENT LEGAL  
27 ASSISTANCE TO BE PROVIDED BY A COMPETENT COUNSEL AND  
28 ATTORNEY'S FEES UNDER SUCH TERMS AND CONDITIONS AS  
29 MAY BE PRESCRIBED BY THE BOARD.

**“XIII. OTHER VIOLATIONS**

1  
2           “All other violations [involving funds]of the PROVISIONS  
3       **OF THIS ACT OR OF THE RULES AND REGULATIONS**  
4       **PROMULGATED BY THE Corporation shall be PUNISHED BY**  
5       **IMPRISONMENT OF NOT LESS THAN SIX (6) YEARS AND ONE (1)**  
6       **DAY TO TWELVE (12) YEARS OR A FINE OF NOT LESS THAN**  
7       **FIVE THOUSAND PESOS (P5,000.00) NOR MORE THAN TWENTY**  
8       **THOUSAND PESOS (P20,000.00), OR BOTH, AT THE DISCRETION**  
9       **OF THE COURT [governed by the applicable provisions of the**  
10       **Revised Penal Code or other laws, taking into consideration the**  
11       **rules on collection, remittances, and investment of funds as may**  
12       **be promulgated by the Corporation].”**

13           **SEC. 8. *Implementing Rules and Regulations.*** – Within one (1) year  
14 from the approval of this Act, the Corporation shall promulgate a new  
15 implementing rules and regulations which shall be published in at least two (2)  
16 newspapers of general circulation.

17           **SEC. 9. *Separability Clause.*** – If any part or provision of this Act  
18 shall be held unconstitutional or invalid, other provisions which are not  
19 affected thereby shall continue to be in full force and effect.

20           **SEC. 10. *Repealing Clause.*** – All laws, issuances or parts thereof  
21 inconsistent with this Act are hereby repealed or modified accordingly.

22           **SEC. 11. *Effectivity.*** – This Act shall take effect fifteen (15) days after  
23 its publication in the *Official Gazette* or in at least two (2) newspapers of  
24 general circulation.

Approved,