Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

THIRTEENTH CONGRESS

First Regular Session

House Bill No. 197

Introduced by Hon. Rozzano Rufino B. Biazon

EXPLANATORY NOTE

Recently, the world became a witness, and at the same time the victim, of the ravages of a disease that has left the world shocked and awed at its virility and lethality. The rapid spread across international boundaries and the manner in which it kills its victim in a short period of time has given it the notoriety that it now shares with the Bubonic Plague and AIDS.

Severe Acute Respiratory Syndrome, or SARS, has shocked and awed the world into a paranoia that has caused countries to close their borders and restrict the movement of people. Countries like China, Singapore and Hong Kong have been hardest hit, and even advanced countries such as Canada were not spared. Though advanced science and technology are being used to combat the disease, it is modern technology itself that also caused its spread.

The ease of cross border travel offered by modern transportation and the new world order of globalization have also made it easier for viruses to transfer from one country to another, and one continent to another.

Though there is no outbreak of SARS in the Philippines, the small number of victims in the country has magnified our vulnerability. It is just through plain luck that we have not been struck as severe as our neighboring countries. It bought us time to work out a contingency plan to counteract the effects of the disease.

In this regard, we should be stirred into action and prepare for the next contagion. SARS was not the first and will definitely not be the last biological agent to wreak havoc in our society. Its severity is just a sampling of things to come, for as medical science comes up with medicine or vaccines to counter the disease, viruses have a way of adapting to survive.

The establishment of a set plan to counteract such emergence or resurgence of contagions is a must. We should have a ready plan that we can pull out from our drawer and implement immediately should an outbreak occur. And with the threat of a deliberate outbreak via bioterrorism, the urgency is even more emphasized.

This bill seeks to establish a Public Health Emergency Council which would have the primary responsibility to draw up a battle plan against a public health emergency and implement the same. It seeks to give us a fighting chance against biological, chemical or nuclear health threats through preparation, management and disposal.

For these reasons, the passage of this bill is earnestly sought.

ROZZANO RUFINO B. BIAZON
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Lone District of Muntinlupa

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AN ACT
ESTABLISHING THE PUBLIC HEALTH EMERGENCY COUNCIL, PROVIDING POWERS THEREFOR, AND FOR OTHER PURPOSES

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

Section 1. Title – This act shall be known as the "Emergency Health Powers Act".

Section 2. Declaration of Policies – The State shall protect and promote the right of the people and instill health consciousness among them. It is also the prime duty of Government to serve and protect the people and in this pursuit, may require the people to cooperate in times of public health emergencies.

In the light of new and emerging threats, including emergent and resurgent infectious diseases and terrorist attacks involving the use of chemical, biological or nuclear agents, the State shall focus on the prevention, detection, management, and containment of public health emergencies.

The State shall endeavor to respond, immediately and effectively, to potential or actual public health emergencies, and in responding, shall require the exercise of extraordinary government functions.

The exercise of emergency health powers shall only be for the promotion of the common good.

Section 3. Definition of Terms – For purposes of this Act, the following terms are herein defined:

(A) "Biological agent" means a microorganism, virus, infectious substance, naturally occurring or bioengineered product, or other biological material that could cause death, disease, or other harm to a human, an animal, a plant, or another living organism.
(B) "Biological Attack" means an attack against the population with the use of weapons employing biological agents.
(C) "Chemical agent" means a poisonous chemical agent that has the capacity to cause death, disease, or other harm to a human, an animal, a plant, or another living organism.
(D) "Chemical Attack" means an attack against the population with the use of weapons employing chemical agents.

(E) "Contagious disease" is a disease that can be transmitted from person to person, animal to person, or insect to person.

(F) "Facility" means any real property, building, structure, or other improvement to real property or any motor vehicle, rolling stock, aircraft, watercraft, or other means of transportation.

(G) "Health care facility" means any institution, building, or agency or portion thereof, whether public or private (for-profit or nonprofit) that is used, operated, or designed to provide health services, medical treatment, or nursing, rehabilitative, or preventive care to any person or persons. This includes, but is not limited to, ambulatory surgical facilities, health maintenance organizations, home health agencies, hospices, hospitals, infirmaries, intermediate care facilities, kidney treatment centers, long-term care facilities, medical assistance facilities, mental health centers, outpatient facilities, public health centers, rehabilitation facilities, residential treatment facilities, skilled nursing facilities, and adult daycare centers. The term also includes, but is not limited to, the following related property when used for or in connection with the foregoing: laboratories, research facilities, pharmacies, laundry facilities, health personnel training and lodging facilities, and patient, guest, and health personnel food service facilities, and offices and office buildings for persons engaged in health care professions or services.

(H) "Health care provider" means any person or entity who provides health care services including, but not limited to, hospitals, medical clinics and offices, special care facilities, medical laboratories, physicians, pharmacists, dentists, physician assistants, nurse practitioners, registered and other nurses, paramedics, firefighters who provide emergency medical care, emergency medical or laboratory technicians, and ambulance and emergency medical workers.

(I) "Infectious disease" is a disease caused by a living organism or virus. An infectious disease may, or may not, be transmissible from person to person, animal to person, or insect to person.

(J) "Isolation" and "quarantine" mean the compulsory physical separation (including the restriction of movement or confinement) of individuals and/or groups believed to have been exposed to or known to have been infected with a contagious disease from individuals who are believed not to have been exposed or infected, in order to prevent or limit the transmission of the disease to others; if the context so requires, "quarantine" means compulsory physical separation, including restriction of movement, of populations or groups of healthy people who have been potentially exposed to a contagious disease, or to efforts to segregate these persons within specified geographic areas. "Isolation" means the separation and confinement of individuals known or suspected (via signs, symptoms, or laboratory criteria) to be infected with a contagious disease to prevent them from transmitting disease to others.

(K) "Nuclear Agent" means radioactive material, element or byproducts thereof, that could cause death, disease, or other harm to a human, an animal, a plant, or another living organism

(L) "Nuclear Attack" means an attack against the population with the use of weapons employing nuclear agents.

(M) "Public health emergency" means the occurrence or imminent risk of an illness or health condition that may be caused by terrorism, epidemic or pandemic disease, or a novel infectious agent or biological or chemical agent and that poses a substantial risk of a significant number of human fatalities, widespread illness, or serious economic impact to the agricultural sector, including food supply.

(N) "Radioactive material" means a nuclear or radioactive substance that has the capacity to cause bodily injury or death to a human, an animal, a plant, or another living organism.

(O) "Terrorist Attack" means an attack against the general population with the intent to deliberately cause death or harm to persons or damage to property using weapons of mass destruction or mass disruption. Such weapons may be biological, chemical or nuclear, or other conventional or improvised weapons.

(P) "Tests" include, but are not limited to, any diagnostic or investigative analyses necessary to prevent the spread of disease or protect the public's health, safety, and welfare.

Section 4. Public Health Emergency Council (PHEC) – The Public Health Emergency Council (PHEC) is hereby established composed of the following: the Secretary of Health as chairman, with the Secretary of Interior and Local Government, the Secretary of Trade and Industry, the Secretary of Justice, the Secretary of National Defense and the Press Secretary as members. Other government agencies not under the authority or jurisdiction of the standing members of the council may be included in the council should their inclusion be determined by the Council as necessary.

The Council shall convene when a State of Public Health Emergency is declared by the President and shall be responsible for the formulation and implementation of a Public Health Emergency Plan to detect, prevent the spread, contain and manage public health emergencies resulting from an outbreak of highly contagious and/or infectious diseases, biological, chemical or nuclear attack.

Within six months from the approval of this Act, the PHEC shall draw up the National Public Health Emergency Plan, and conduct a briefing for all local government units. The plan shall serve as the framework for the government's response to a public health emergency.

The Council shall also advise the President on courses of action outside the Public Health Emergency Plan that may be taken in the event that a Public Health Emergency occurs.

Section 5. Declaration of State of Public Health Emergency – The President, upon the recommendation of the Secretary of Health, may declare a State of Public Health Emergency and immediately convene the Public Health Emergency Council (PHEC). The basis for such a declaration shall be made public by the PHEC through the mass media and a written report submitted to both Houses of Congress.

The State of Public Health Emergency shall be for a period of sixty days, unless extended or terminated earlier by the PHEC.

Section 6. Health Care Facilities and Services During State of Public Health Emergency – During the period of the state of public health emergency, the PHEC may, within reasonable and necessary bounds for emergency response to a public health emergency, require a health care facility to provide services or the use of its facility; *Provided,* that the PHEC may require privately owned health care facilities to provide services or use of its facility only if government health institutions are unable to cope with the public health emergency.

When the PHEC needs the use or services of the facility to isolate or quarantine individuals during a public health emergency, the management and supervision of the health care facility must be coordinated with the PHEC to ensure protection of existing patients and compliance with the terms of this act.

Section 7. Dangerous Facilities and Materials. - During the state of public health emergency, the PHEC may exercise, in coordination with national government agencies, local governments, and other organizations responsible for implementation of the Public Health Emergency Plan, the following powers over facilities or materials that may be considered dangerous due to contamination or exposure to chemical, nuclear or biological agents or infectious disease pathogens:

(1) to close, direct and compel the evacuation of, or to decontaminate or cause to be decontaminated, any facility of which there is reasonable cause to believe that it may endanger the public health; and

(2) to decontaminate or cause to be decontaminated, any material of which there is reasonable cause to believe that it may endanger the public health.

Section 8. Control of Pharmaceutical Agents or Medical Supplies - After the declaration of a public health emergency, PHEC may purchase, store or distribute antitoxins, serums, vaccines, immunizing agents, antibiotics, and other pharmaceutical agents or medical supplies that it considers advisable in the interest of preparing for or controlling a public health emergency, with the right to take immediate possession thereof.

If a state of public health emergency results in a nationwide or regional shortage or threatened shortage of any product covered by the preceding paragraph, the PHEC may control, restrict, and regulate by rationing and using quotas, prohibitions on shipments, price fixing, allocation or other means, the use, sale, dispensing, distribution, or transportation of the relevant product necessary to protect the health, safety, and welfare of the people. In making rationing or other supply and distribution decisions, the PHEC must give preference to health care providers, disaster response personnel, and mortuary staff.

Nothing in this section shall be construed to allow the PHEC to obtain antitoxins, serums, vaccines, immunizing agents, antibiotics, and other pharmaceutical agents or medical supplies for the primary purpose of hoarding such items or preventing their fair and equitable distribution among the health care institutions and providers, both government and private.

Section 9. Control and Treatment of Infectious Disease. - During a state of public health emergency, the PHEC shall use every available means to prevent the transmission of contagious and infectious diseases and to ensure that all cases of infectious disease are subject to proper control and treatment.

Section 10. Physical Examinations or Tests; Isolation or Quarantine of Persons Refusing Examination. - During a state of public health emergency, the PHEC may perform voluntary physical examinations or tests as necessary for the diagnosis or treatment of individuals.

The PHEC may isolate or quarantine any person whose refusal of physical examination or testing results in uncertainty regarding whether he or she has been exposed to or is infected with a contagious or possibly contagious disease or otherwise poses a danger to public health.

Isolation and quarantine shall be mandatory for persons exhibiting any symptom of an infectious disease causing the public health emergency or whose physical examination or test results confirm an infection.

Section 11. Isolation and Quarantine of Individuals or Groups; Penalty for Noncompliance - During a public health emergency, the PHEC may isolate or quarantine an individual or groups of individuals. This includes individuals or groups who have not been vaccinated, treated, tested, or examined pursuant to Section 10. The PHEC may also establish and maintain places of isolation and quarantine, and set rules and make orders.

The PHEC shall adhere to the following conditions and principles when placing individuals or groups of individuals under isolation or quarantine:

(1) isolation and quarantine must be by the least restrictive means necessary to prevent the spread of a contagious or possibly contagious disease to others and may include, but are not limited to, confinement to private homes or other private and public premises;

(2) individuals isolated because of objective evidence of infection or contagious disease must be confined separately from quarantined asymptomatic individuals;

(3) the health status of isolated and quarantined individuals must be monitored regularly to determine if they require isolation or quarantine;

(4) if a quarantined individual becomes infected or is reasonably believed to be infected with a contagious or possibly contagious disease, he or she must be promptly removed to isolation;

(5) isolated and quarantined individuals must be immediately released when they pose no substantial risk of transmitting a contagious or possibly contagious disease to others;

(6) the needs of persons isolated and quarantined must be addressed in a systematic and competent fashion including, but not limited to, providing adequate food, clothing, shelter, means of communication with those in isolation or quarantine and outside these settings, medication, and competent medical care;

(7) premises used for isolation and quarantine must be maintained in a safe and hygienic manner and be designed to minimize the likelihood of further transmission of infection or other harms to persons isolated or quarantined.

Persons subject to isolation or quarantine must comply with the PHEC's rules and orders, and must not go beyond the isolation or quarantine premises. Failure to comply with these provisions shall be penalized with a fine of Ten Thousand Pesos.

Only authorized physicians, health care workers, or other persons with written permission from the PHEC shall have access to individuals in isolation or quarantine as necessary to meet the needs of isolated or quarantined individuals. Failure to comply with or willful violation of this provision shall be penalized with a fine of Ten Thousand Pesos or imprisonment of not more than six months.

Facilitating, aiding or conspiring to violate these provisions shall be penalized with a fine of Ten Thousand Pesos or imprisonment of not more than six months.

Any person entering an isolation or quarantine premises with or without authorization of the PHEC may be isolated or quarantined as provided for in this act.

Section 12. Local Government Role – Within six months after the adoption of a National Public Health Emergency Plan, local government units shall draw up their respective Local Public Health Emergency Plans conforming to the National Public Health Emergency Plan and the provisions of this Act.

During a state of public health emergency, local government officials shall provide unconditional support and cooperation to the PHEC and the National Public Health Emergency Plan.

Refusal of local government officials to provide support and cooperation shall constitute an offense and shall be dealt with disciplinary action as provided for in the Local Government Code.

Section 13. Powers and Duties Regarding Safe Disposal of Human Remains. - The PHEC must coordinate with hospitals and funeral institutions, for such period as the state of public health emergency exists, to exercise, in addition to existing powers, the following powers regarding the safe disposal of human remains suspected or known to be a victim of an infectious disease:

(1) to take possession or control of any human remains which cannot be safely handled otherwise;

(2) to order the disposal of human remains of a person who has died of an infectious disease through burial or cremation within twenty-four hours after death;

(3) to require any business or facility authorized to embalm, bury, cremate, inter, disinter, transport, and dispose of human remains under existing laws to accept any human remains or provide the use of its business or facility if these actions are reasonable and necessary for emergency response.

All human remains prior to disposal must be clearly labeled with all available information to identify the deceased and the circumstances of death. Any human remains of a deceased person with an infectious disease must have an external, clearly visible tag indicating that the human remains are infected and, if known, the infectious disease.

Every person in charge of disposing of any human remains must maintain a written record of each set of human remains and all available information to identify the deceased and the circumstances of death and disposal. If the human remains cannot be identified, prior to disposal, a qualified person must, to the extent possible, take fingerprints and one or more photographs of the human remains, and collect a DNA specimen. All information gathered under this paragraph must be promptly forwarded to the PHEC. Identification must be handled by the agencies that have laboratories suitable for DNA identification.

Section 14. Centralized Information – During the State of Public Health Emergency, the PHEC, through the Press Secretary or a designated alternate, shall provide the public with daily updates, news bulletins or briefings on the progress of the management and containment of the public health emergency and shall endeavor to prevent or stop the spread of misinformation.

In this pursuit, the PHEC, through the Press Secretary, may request the mass media to refrain from reporting or disseminating information about the public health emergency that has not been cleared by the PHEC.

Section 15. Implementing Authority – The Secretary of the Department of Health shall promulgate the implementing rules and regulations, orders and other issuances as may be necessary to implement and carry out the intent, objectives, purposes and provisions of this Act.

Section 16. Separability Clause. – If any part, section or provision of this Act is held invalid or unconstitutional, other provisions not affected thereby shall remain in force and effect.

Section 17. Repealing Clause - All other laws, decrees, orders, issuances, rules and regulations that are inconsistent with the provisions of this Act are hereby repealed, amended or modified accordingly.

Section 18. Effectivity. – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

Approved.