

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

FIFTEENTH CONGRESS
First Regular Session

House Bill No. 1854

INTRODUCED BY HON. MARCELINO "MARCY" R. TEODORO

EXPLANATORY NOTE

Article XIII, Section 11 of the Philippine Constitution says that "the State shall 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. There shall be priority for the needs of the under-privileged, sick, elderly, disabled, women, and children..." In this light, this bill seeks the establishment of a children's health insurance program by introducing amendments to Republic Act 7875, also known as "The National Health Insurance Act of 1995."

The country's future depends on the youth, and yet they seem to be part of the marginal concerns of the government. They deserve utmost care and attention not only because of the aforementioned, but more importantly they are the most vulnerable sector of society. Neglect or minimal attention to their needs would only result in present and future concerns, such as delinquency or criminality. It is the State's responsibility to ensure its tomorrow today by providing quality health care insurance for its deserving future stewards.

In light of the foregoing, passage of this bill is earnestly sought.



MARCELINO "MARCY" R. TEODORO
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INTRODUCED BY HON. MARCELINO "MARCY" R. TEODORO

AN ACT
INSTITUTING MECHANISMS FOR THE ESTABLISHMENT OF CHILDREN'S
HEALTH INSURANCE PROGRAM, AMENDING FOR THE PURPOSE
REPUBLIC ACT NO. 7875, OTHERWISE KNOWN AS "THE NATIONAL
HEALTH INSURANCE ACT OF 1995," AS AMENDED BY R.A. 9241, AND
FOR OTHER PURPOSES

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

1 **SECTION 1.** Section 4 of Republic Act No. 7875 is hereby amended to read as
2 follows:

3 "SEC. 4. Definition of Terms. – For the purposes of this Act, the following terms
4 shall be defined as follows:

5 xxx

6 (d) CHILD HEALTH ASSISTANCE – A RANGE OF HEALTH CARE AND
7 SUPPORT SERVICES INCLUDING, BUT NOT LIMITED TO, PHYSICIAN
8 SERVICES AND ANY OTHER MEDICAL, DIAGNOSTIC, SCREENING,
9 PREVENTIVE, RESTORATIVE SERVICES;

10 xxx

11 (s) Member – any person whose premiums have been regularly paid to the
12 National Health Insurance Program. He may be a paying member, an indigent
13 member, A QUALIFIED CHILD MEMBER, or a pensioner/ retiree member.

14 xxx

15 (dd) QUALIFIED CHILD MEMBER –ANY CHILD OF A LOW-INCOME FAMILY
16 UNDER 18 YEARS OF AGE OR OVER BUT WHO ARE UNABLE TO FULLY TAKE
17 CARE OF THEMSELVES OR PROTECT THEMSELVES FROM ABUSE,
18 NEGLECT, CRUELTY, EXPLOITATION OR DISCRIMINATION BECAUSE OF A
19 PHYSICAL, MENTAL DISABILITY OR CONDITION AND WHOSE FAMILY IS
20 BELOW POVERTY, AND DETERMINED AS SUCH BY THE PERTINENT
21 GOVERNMENT AGENCY;

22 **SECTION 2.** Section 5 of the same Act shall now read as follows:

23 "Sec. 5. Establishment and Purpose. – There is hereby created the National
24 Health Insurance Program which shall provide health insurance coverage and
25 ensure affordable, acceptable, available and accessible health care services for all
26 citizens of the Philippines, in accordance with the policies and specific provisions of

1 this Act. xxx. It shall initially consist of Programs I and II of Medicare and be expanded
2 progressively to constitute one universal health insurance program for the entire
3 population. IT SHALL INITIATE AND EXPAND THE PROVISION OF CHILD HEALTH
4 ASSISTANCE TO INCLUDE A CHILD HEALTH INSURANCE PROGRAM FOR
5 UNINSURED, LOW-INCOME CHILDREN IN A EFFECTIVE AND EFFICIENT
6 MANNER THAT IS COORDINATED WITH OTHER SOURCES OF HEALTH
7 BENEFITS COVERAGE FOR CHILDREN. xxx.

8 **SECTION 3.** Section 6 of the same Act shall now read as follows:

9 "Sec. 6. Coverage. – All citizens of the Philippines, WHETHER CHILD OR
10 ADULT, shall be covered by the National Health Insurance program. In accordance
11 with the principles of universality and compulsory coverage enunciated in Section 2
12 (b) and 2 (1) hereof, implementation of the Program shall, furthermore, be gradual and
13 phased in over a period of not more than fifteen (15) years. Provided, That the
14 Program shall not be made compulsory in certain provinces and cities until the
15 Corporation shall be able to ensure that members in such localities shall have
16 reasonable access to adequate and acceptable health care services."

17 **SECTION 4.** Section 7 of the same Act shall now read as follows:

18 "SEC. 7. Enrollment. – The Program shall enroll beneficiaries in order for them
19 to be placed under coverage that entitles them to avail of benefits with the assistance
20 of the financial arrangements provided by the Program. The process of enrollment
21 shall include the identification of beneficiaries, issuance of appropriate documentation
22 specifying eligibility to benefits, and indicating how membership was obtained or is
23 being maintained. The enrollment shall proceed in accordance with these specific
24 policies:

- 25 a) xxx;
26 b) xxx;
27 c) xxx; and
28 d) xxx.

29 All indigents AND QUALIFIED CHILD MEMBER not enrolled in the Program
30 shall have priority in the use and avilment of the services and facilities of government
31 hospitals, health care personnel, and other health organization; Provided, however,
32 That such government health care providers shall ensure that said indigents AND
33 QUALIFIED MEMBER shall subsequently be enrolled in the Program."

34 **SECTION 5.** Section 12 of the same Act shall now read as follows:

35 "SEC. 12. Entitlement to Benefits. – xxx

36 The following need not pay the monthly contributions to be entitled to the
37 Program's benefits. Retirees and pensioners of the SSS and GSIS prior to the
38 effectivity of this Act; Members who reach the age of retirement as provided for
39 by law and have paid at least one hundred twenty (120) monthly contributions;
40 [and] Enrolled indigents; AND (D) QUALIFIED CHILD OF LOW-INCOME
41 FAMILIES."

42 **SECTION 6.** Section 28 of the same Act is hereby amended to read as follows:

43 "SEC. 28. Contributions. – All members of the Program shall contribute to the
44 Fund, in accordance with a reasonable, equitable and progressive contribution
45 schedule to be determined by the Corporation on the basis of applicable
46 actuarial studies and in accordance with the following guidelines:

47 xxx
48 xxx

XXX

1 CONTRIBUTIONS MADE IN BEHALF OF A QUALIFIED CHILD
2 MEMBER SHALL NOT EXCEED THE MINIMUM CONTRIBUTIONS SET FOR
3 EMPLOYED MEMBERS."

4 **SECTION 7.** A new Section 30 is hereby added to read as follows:

5 "SEC. 30. Payment for a Child Beneficiary's Contributions. -
6 CONTRIBUTIONS FOR QUALIFIED CHILDREN BENEFICIARIES SHALL BE
7 SUBSIDIZED PARTIALLY BY THE LOCAL GOVERNMENT UNIT WHERE
8 THE MEMBER RESIDES. THE CORPORATION SHALL PROVIDE
9 COUNTERPART FINANCING EQUAL TO THE LGUS SHALL BE
10 PROGRESSIVELY INCREASED UNTIL SUCH TIME THAT IST SHARE
11 BECOMES EQUAL TO THAT OF THE NATIONAL GOVERNMENT."

12 **SECTION 8. Implementing Rules and Regulations.** Within thirty (30) days
13 from the effectivity of this Act, the Board of Directors of the Philippine Health
14 Insurance Corporation (PHIC) shall convene to formulate the rules and regulations for
15 the implementation of this Act.

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

19 **SECTION 10. Repealing Clause.** All laws, presidential decrees, executive
20 orders, rules and regulations or parts thereof which are deemed inconsistent with the
21 provisions of this Act are hereby repealed, amended, or modified accordingly.

22 **SECTION 11. Effectivity Clause.** This Act shall take effect fifteen (15) days
23 following its full and complete publication in at least two (2) newspapers of general
24 circulation.

Approved,