

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

17th Congress
2nd Regular Session

7298
HOUSE BILL NO. _____



Introduced by: **HON. "KUYA" JOSE ANTONIO R. SY-ALVARADO**

EXPLANATORY NOTE

Shortage of doctors is a national problem that was raised harboring issues of affordability and accessibility.

According to an article published by Elma Sandoval, Doctor Shortage in the Philippines: An Analysis, there are 130,000 licensed physicians in the country but only 70,000 are active in the profession. Only 2,300 new doctors are produced annually that is equal to a low passing rate of 30-40%.

Data provided by the Philippine Statistics Authority showed that for every 5 Filipinos, 3 die without seeing a doctor, nurse or any other allied health professional. The doctor to population ratio in the Philippines is 1:30,000, not even close to the 1:20,000 standard of the World Health Organization and way far from the 1:1,000 ratio of the Cuban Health System.

Another factor that contributed to the shortage of doctors is medical school expenses. Medical education is probably one of the most expensive courses in the Philippines. There are only 30 few medical schools in the country and only 5 of these medical schools are public. Tuition fee in the very few public medical schools is merely subsidized and not fully shouldered by the government. Private medical schools cost almost three folds of the expenses in a public medical school. Aspiring doctors may spend Php70,000.00 to Php150,000.00 for tuition fee alone per semester and an additional of almost Php50,000.00 or more for miscellaneous fees, books, medical equipment and other school-related expenses.

The high cost of becoming a doctor is what pushes many medical graduates to demand commensurate salary, and oftentimes to seek greater offers abroad. If not abroad, the very few active medical practitioner in the country chooses to go into private practice in urban areas instead of community health service in rural areas. This preference, causes maldistribution of doctors.

In order to provide solution for the existing crisis in the Philippine Health System, this bill aims to encourage Filipino to pursue a medicine career by rendering scholarship program for qualified medical students. This measure may increase the annual production of doctors in our country.

This bill also aims to properly distribute doctors to provinces to address the issue of concentrated medical pool by requiring medical graduates to serve for at least one (1) year to provincial or municipal medical centers outside Metro Manila.

Thus, the early passage of this bill is earnestly requested.

"KUYA" JOSE ANTONIO R. SY-ALVARADO *JS*

Representative
First District of Bulacan

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AN ACT
PROVIDING MEDICAL SCHOLARSHIPS TO ALL DESERRVING STUDENTS AND
REQUIRING ALL MEDICAL GRADUATES TO SERVE IN A GOVERNMENT
PUBLIC HEALTH OFFICE OR HOSPITAL

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

SECTION 1. Short Title. – This act shall be known and may be cited as the “Philippine Health System Act of 2018”

Sec. 2. Declaration of Policy. – It is hereby declared that the improvement of the health system is a matter of State concern, as is the accessibility of medical services, all of which are threatened by the shortage of doctors in our country.

Sec. 3. Medical Scholarship Program. - The scholarship program shall grant free tuition fee and other related school fees; allowance for required textbooks, supplies and equipment; clothing and uniform allowance; allowance for accommodation; transportation allowance; and fees for medical board review. The program shall also cover fees and other expenses during post-graduate internship.

Sec. 4. Eligible Candidates for Medical Scholarship Programs. – Any Filipino citizen who is willing to perform humanitarian work in the field of medicine that possesses all academic requirements and completed any of the undergraduate prerequisite courses to be administered for a doctoral degree in medicine. The institution concerned may determine such other qualifications as it deems necessary for the admission of the students.

Sec. 5. Scholarship Policies and Conditions. – The scholar must meet the following policies and conditions:

- a. The scholar shall pass and finish Doctor of Medicine program in the prescribed time frame in accordance to the prescribed load of subjects per semester by the school.
- b. The scholar upon passing the licensure examination for physicians shall be part of the mandatory return service in a government hospital in his/her hometown or in any underserved municipality or province determined by the DOH for at least two (2) years.
- c. The scholar will lose his/her scholarship and pay his/her full scholarship if he/she accepts another scholarship; fails 30% of the subjects; fails to pass the licensure examination for physicians for the second time.
- d. The scholar upon passing the licensure examination for physicians fails or refuses to serve the conditions stated-above, he/she will be required to pay the full cost of

the scholarship including all financial assistance incurred in the scholarship program.

Sec. 6. Scholarship Administration. – The Department of Health (DOH) in coordination with the Commission on Higher Education (CHED) shall be primarily responsible for the administration of the scholarship program by performing the following functions:

- a. Conduct regular information dissemination of and recruitment to the medical scholarship program to ensure that there will be an adequate number of medical doctors in all the municipalities and provinces.
- b. Determine the number of physicians needed for every municipality or province.
- c. Coordinate with the corresponding agencies for the mandatory integration of doctors/scholars into the public health care system.
- d. Provide funds for the effective implementation of the Medical Doctor Scholarship Program under this act; and
- e. Recommend to the Department of Budget and Management (DBM) the budget for the plantilla positions including the determination of salaries and salary increase.

Sec. 9. Appropriations. – The amount necessary to carry out the initial implementation of this act shall be sourced from the current budget of SUC's and DOH.

Sec. 10. Implementing Rules. – Within ninety (90) days after the effectivity of this Act, the Department of Health (DOH), the Commission on Higher Education (CHED) and the Department of Budget and Management (DBM) shall promulgate the necessary rules and regulations for the proper implementation of this Act.

Sec. 11. Repealing Clause. – All laws decrees, orders, rules and regulations, or other issuances or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

Sec. 7. Separability Clause. If any portion or provision of this Act is declared unconstitutional, the remainder of this Act or any provision not affected thereby shall remain in force and effect.

Sec. 8. Effectivity. – This Act shall take effect after fifteen (15) days following the completion of its publication either in the Official Gazette or in at least (2) newspapers of general circulation in the Philippines, whichever comes earlier.

Approved,

