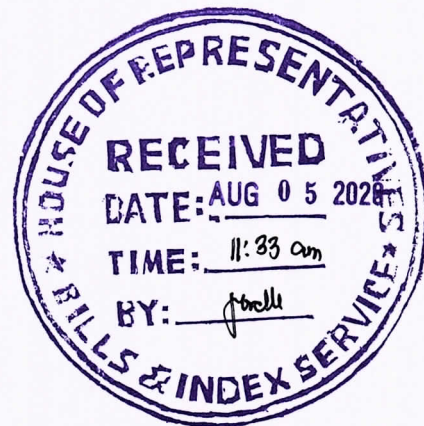




Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

Eighteenth Congress
First Regular Session

House Bill No. 7274



Introduced by Representative PAUL R. DAZA

EXPLANATORY NOTE

COVID-19 has indeed shown all countries in the world that the most vulnerable area in the public domain is the health sector. Nevertheless, it is also an area that provides a lot of potential for *bayanihan* and *pagamalasakit*.

Certainly, COVID-19 is tough but it also motivates us to revisit our public health systems. One of the more glaring realities that we are facing is the lack of medical- and health-trained professionals. This is aggravated by the fact that most if not all professional licensure examinations and continuing education system are indefinitely postponed.

A source of hope is the promising potential of the wealth of talents and skills that we already have. For example, more than 1,500 medical school graduates are waiting to complete their licensure examinations this year (PRC as cited in Aguilar, 2020)¹. Meanwhile, an estimate of 26,000 nurses graduate from our schools annually (POEA & CHED as cited in Lopez & Jiao, 2020).² While brain drain in the medical sector is still a serious concern—and we need to look into that sooner than later—our medical and health graduates are definitely our most important wealth especially at this critical time.

Meanwhile, serious pandemics and emergencies impact employment. The immediate employment of healthcare workers will then partly address economic difficulties. In fact, the International Labor Organization has highlighted that interventions “for economic reactivation should follow a job-rich approach,” anchored on a “stronger employment policies and institutions, better-resourced and comprehensive social protection systems.”³

¹Aguilar, K. (2020, 3 Mar). 1,500 medical graduates eyed to help combat coronavirus menace. Available at <https://newsinfo.inquirer.net/1246881/tolentino-wants-to-waive-licensure-exam-of-medicine-graduates>

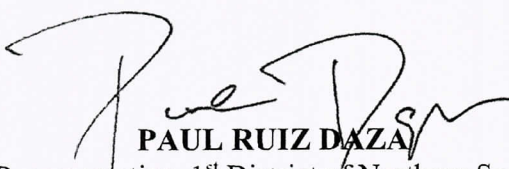
²Lopez, D. & Jiao, C. (2020, 24 Apr). *Supplier of World's Nurses Struggles to Fight Virus at Home*. Available at <https://www.bloomberg.com/news/articles/2020-04-23/philippines-sends-nurses-around-the-world-but-lacks-them-at-home>

³International Labor Organization (2020, Apr). As job losses escalate, nearly half of global workforce at risk of losing livelihoods. Available at https://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS_743036/lang-en/index.htm

Given the urgent requirements for healthcare workers as well as the benefit of employment-based approach to the country's economic recovery program, it is then necessary that the government provides mechanisms—such as a *Medical Reserve Corps* system—that will allow us to employ new graduates and other qualified professionals in the medical fields. Moreover, a *Medical Reserve Corps* system will ultimately help promote a culture of nationalism, patriotism, and volunteerism—values which are critical to recovery and nation-building.

Indeed, the Filipino soul is capable of genuine *bayanihan* and *pagmamalasakit*.

The immediate enactment of this proposed legislation is then earnestly sought.



PAUL RUIZ DAZA
Representative, 1st District of Northern Samar



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

Eighteenth Congress
First Regular Session

House Bill No. **7274**

Introduced by Representative PAUL R. DAZA

AN ACT INSTITUTING THE MEDICAL RESERVE CORPS, APPROPRIATING FUNDS THEREFOR AND FOR OTHER PURPOSES

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

Section 1. *Short Title.* – This Act shall be known as the “Medical Reserve Corps Act of 2020.”

Section 2. *Statement of Policy.* – It shall be the policy of the State to:

- a. recognize and institutionalize the essential role of medical and health personnel and volunteers in nation building;
- b. promote and protect their physical, moral, spiritual, intellectual, and social well-being;
- c. build their capacity based on the current frameworks of national and territorial defense, law enforcement and peace and order, and national disaster risk reduction and management;
- d. prepare them for immediate mobilization at the soonest possible time in order to respond to national and/or local contingencies, which may require manpower beyond the capabilities of existing national government agencies or local government units; and
- e. encourage culture and values of volunteerism, patriotism, and nationalism through involvement in public and civic affairs including medical- and health- related services during emergencies and pandemics.

Section 3. *Medical Reserve Corps.* – There is hereby established a Medical Reserve Corps (MRC), which shall be composed of resident Filipino citizens who:

(a) have degrees in the fields of medicine, nursing, medical technology, and other health-related fields but who have not yet been issued respective licenses and/or awaiting licensure examinations in their respective professions;

(b) are medical reservists of the Armed Forces of the Philippines (AFP); and

(c) public health experts, scientists, and non-medical volunteers trained for health, emergencies, and other necessary services.

Section 4. *Medical Reserve Corps Mobilization.* – In times of national emergencies, pandemics, and other contingencies, the members of the MRC may be called upon and mobilized to assist the national government, its agencies and instrumentalities, and the local government in functions related to the medical and health needs of the public.

(a) The mobilization shall be initiated by the Secretary of Department of Health (DOH), in coordination with the Secretaries of the Department of National Defense (DND), Department of Education (DepEd), and Department of Interior and Local Government (DILG), or their duly authorized representatives with a rank of at least Undersecretary.

(b) On regular basis and during periods of national emergencies and other contingencies, the MRC shall be called for retraining to maintain and enhance its personnel's level of competency and readiness for public service.

Section 5. *Request for Deployment.* – The members of MRC shall be called upon and mobilized to assist the national government, its agencies and instrumentalities, and local government units in their functions related to the medical and health needs of the public through requests for deployment by the heads of such national government agencies or local government units submitted to the DOH. The requests shall contain information as may be required by the DOH, including the nature of the national or local contingencies to be addressed, the purpose of the requested deployment, the number of personnel requested to be deployed, and the period of deployment.

Section 6. *Evaluation of the Request for Deployment.* – The DOH shall evaluate the requests for deployment.

(a) If the number of personnel requested does not exceed one hundred and fifty (150) and the period of deployment does not exceed sixty (60) days, the DOH shall decide whether to approve or disapprove the request within twenty-four (24) hours from receipt thereof.

(b) If the number of personnel requested exceeds one hundred and fifty (150) or the period of deployment exceeds sixty (60) days, the DOH shall make a recommendation to the Office of the President (OP) within twenty-four (24) hours from receipt of the request. The

OP shall decide whether to approve or disapprove the request within twenty-four (24) hours from receipt of the recommendation of the DOH.

(c) In case of the approval of the request for deployment, the DOH shall issue an Order of Deployment requiring the MRC, or a number thereof, to assist the national government, its agencies and instrumentalities and the local government units in their functions related to the medical- and health-related needs of the public.

Section 7. *Deployment in Case of a Declaration of a State of War, State of Lawless Violence or State of Calamity.* – In case of a declaration of a state of war, state of lawless violence, or a state of pandemic or calamity, the DOH may *motu proprio* recommend the mobilization of the MRC to the President of the Philippines. The President of the Philippines, by himself, shall also have the power to order the mobilization of the MRC to respond to national or local contingencies related to external and territorial defense, internal security and peace order and/or disaster risk reduction management.

Section 8. *Mobilization Centers.* – There shall be established in each province and city as many mobilization centers as needed according to the number and geographical distribution of the MRC, where they will report in case of deployment.

In case of mobilization, the equipment of the MRC shall be supplied in close coordination with the DOH and other national agencies and offices, with the end in view of achieving immediate mobilization.

Section 9. *Expenses of Deployment.* – Upon deployment, the national government agency or the local government unit to which the MRC is deployed shall shoulder the operational expenses of deployment.

Section 10. *Operationalization of Deployment.* – The DOH shall promulgate the specific mechanisms by which deployment is efficiently implemented, including the organization of the Corps to be deployed, their territorial assignments, how deployment orders are communicated to each member of the MRC and to which mobilization center they will report. MRC members shall be supervised by licensed professionals unless during extreme cases or emergencies where their immediate response will help save lives.

Section 11. *Protection covered by labor, occupational, environmental, and social legislation.* All MRC members shall be accorded protection as provided by existing labor laws and standards and other relevant occupational, safety, environmental, and social legislation.

Section 12. *Legal liability and malpractice insurance.* No MRC member shall be liable for the death of or injury to any person or for the loss of, or damage to, the property of any person where such death, injury, loss, or damage was proximately caused by the circumstances of an actual emergency, pandemic, or its subsequent conditions, or the circumstances of the formal exercise or training if such formal exercise or training simulates conditions of an actual emergency.

(a) The Insurance Commission is mandated to work with insurers to develop pandemic- and emergency-specific malpractice insurance policy or modify existing policies that would protect MRC professionals' efforts from any legal liability as provided for by this Section and allow them to respond in good faith during emergencies and pandemics.

(b) This section shall not preclude liability for civil damages as a result of gross negligence, recklessness, or willful misconduct.

Section 13. *Identification, Serial Numbers, and Registry.* – Upon completion of their respective degrees, the graduates shall be issued individual serial numbers, which will serve as their identification in case of deployment.

(a) An MRC Identification Card that describes the certification information of Corps members, as well as other identifying information determined necessary by the DOH, shall be issued unless such an ID card becomes redundant with the issuance of the Philippines Identification System ID (PhilSys ID).

(b) The DOH shall maintain and update a registry/database containing the names of the members of the Corps, their serial numbers, address, contact details and such other information as the DOH may determine, in accordance with any applicable privacy laws. For this purpose, all public and private colleges, universities and learning institutions are hereby mandated to annually transmit their records of the graduates covered under this Act to the DOH, in the form as may be determined by it.

(c) All graduates covered under this Act are required to update their addresses and contact details on file with the DOH as often as necessary. Orders of deployment sent to the addresses and/or through the contact details on file with the DOH shall be sufficient notice for purposes of deployment.

(d) In cases when a graduate has changed address immediately prior to deployment, his nearest LGU (barangay) shall immediately exert efforts to locate his/her known closest resident kin (within the same barangay), who is then mandated to exert similar efforts. The use of digital communications and social media shall be encouraged in locating such graduates.

Section 14. *Termination of Deployment.* – Upon the expiration of the requested period of deployment, without an extension having been requested and approved by the DOH, the Corps shall be discharged of his/her duties. The deployment may also be terminated earlier upon a determination by the DOH, in consultation with the requesting national government agency or local government unit, that such deployment is no longer in accordance with the objectives and purposes of this Act.

Section 15. *Effect on Employment.* – Deployment of employees in accordance with the provisions of this Act shall not be a ground for dismissal or diminution of any benefit enjoyed by such graduates prior to their deployment. The members of the Corps shall continue to be entitled to their regular wage or salary (based on their current employment or contractual arrangement) during their deployment. In the case of project-based or contractual employees, fees and benefits in their current or prevailing contracts shall still apply, with the deployment not causing undue disadvantage or economic losses (e.g., if a graduate's project contract is 12 months and the deployment lasted for six months, then he/she is still entitled to a work tenure of six months in the same project).

Section 16. *Volunteerism.* Other qualified Filipino citizens and professionals shall be accorded all means possible to allow them to render voluntary services under this Act.

(a) Professionals whose licenses recently expired or expired prior to or during a declared emergency or pandemic may voluntarily be admitted to the Corps, upon approval of PRC. They shall also be issued individual serial numbers, which are differentiated from unlicensed Corps members.

(b) The Commission on Higher Education (CHED) and Technical and Skills Development Authority (TESDA) shall work with relevant universities, colleges, and schools to ensure that the provisions of this Act shall be incorporated in any relevant subject or course in medical- and health-related fields of study.

(c) Medical reservists and professionals (including those who are not currently practicing health-related assignments) of the Armed Forces of the Philippines (AFP) and Philippines National Police (PNP) shall be encouraged to join the roster of MRC particularly when the health system is already experiencing a critical lack of personnel.

(d) Other public health experts, scientists, and non-medical volunteers trained for health emergencies and other necessary services shall also be encouraged to join the MRC roster.

(e) Civil servants who opted to join the MRC roster shall continue enjoying their compensations and benefits as provided for in this Act. Private citizens who were

unemployed prior or became unemployed due to a pandemic or emergency and who voluntarily joined the roster (but not qualified for compensation as provided by Section 15) shall be qualified to a fair compensation including an allowance for transportation and food (up to three meals a day if warranted by the duration of their work shifts).

Section 17. *Effect on Licensing and Licensure Examination.* Deployment of personnel in accordance with the provisions of this Act shall entitle them to applicable credits or *equivalency* system in the Continuing Professional Development (CPD) system.

(a) The Professional Regulation Commission (PRC) in coordination with DOH shall be mandated to issue the necessary guidelines for this provision.

(b) Even with the MRC system in place, PRC, in consultation with relevant agencies such as the DOH, shall be mandated to conduct medical- and health-related licensure examinations even during or immediately after any pandemic or emergency situation—whether face-to-face or online—at the earliest possible time provided that the conduct of examinations shall guarantee the establishment of strict measures that will ensure protection of both examinees and examiners from health and environmental risks.

Section 18. *Medical Reserve Corps Fund.* – A Medical Reserve Corps Fund is hereby established exclusively for the implementation of the objectives and purposes of this Act. The Office of the President shall monitor and evaluate the activities and the balances of the Fund. All costs related to the implementation of MRC (unless provided for in Section 9) including procurement of insurance policies as provided for in this Act shall be chargeable to this Fund.

Section 19. *School Fees.* – Public colleges, universities and similar learning institutions covered by Republic Act No. 10931, otherwise known as the Universal Access to Quality Tertiary Education Act, shall not collect any fee from and charges pertinent to their education and training in said colleges, universities and other similar institutions.

Section 20. *Annual Reports.* - The DOH shall regularly publish an annual report containing a list of its accomplishments, status of its operations, number and demography of its Medical Reserve Corps, and assessment of readiness for mobilization for the year concerned. The annual report shall also include the results of audit investigation on the spending of funds appropriated, collected, or advanced for the implementation of the provisions of this Act.

Section 21. *Appropriations.* – The Medical Reserve Corps Fund shall be included in the annual General Appropriations Act.

Section 22. *Audit of Funds.* – Audit of any and all funds used through the implementation of this Act shall be in accordance with the audit jurisdiction of the Commission on Audit, the Bureau of Internal Revenue, and the Department of Health, under existing laws and regulations.

Section 23. *Penal Provisions; Failure to Respond.* – Failure to respond to the order of deployment despite notices sent to the address and/or contact details in file with the DOH without justifiable reason shall, upon conviction by a civil court, be punishable as follows:

1. First offense: One hundred and twenty (120) hours of community service;
2. Second offense: Two hundred and forty (240) hours of community service; and
3. Third and Subsequent Offenses: Six (6) months imprisonment and four hundred and eighty (480) hours of community service.

Section 24. *Disciplinary and Corrective Proceedings.* – Administrative offenses committed by persons involved in or in relation to the implementation of this Act, shall be subject to administrative penalties in accordance with the applicable civil service rules or the rules and regulations of PRC, as the case may be.

Section 25. *Disciplinary and Corrective Proceedings.* – The DOH shall be tasked to formulate and approve the necessary rules and regulations to implement the objectives and purposes of this Act within thirty (30) days from its effectivity. The rules and regulations shall include provisions on the structure and organization of the MRC, the specific mechanisms for the efficient mobilization and deployment of the Corps, and such other matters as the DOH may deem necessary or essential to fully implement the objectives and purposes of this Act.

Section 26. *Repealing Clause.* – All laws, orders, rules and regulations and other issuances, or parts thereof, which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

Section 27. *Separability Clause.* – Any provision of this Act declared unconstitutional shall not affect the validity of the other provisions thereof.

Section 28. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its publication in two (2) newspapers of national circulation.

Approved,