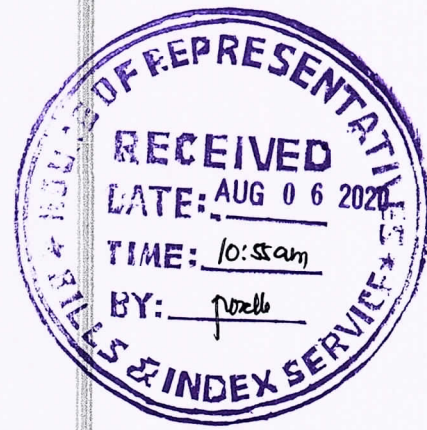


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

HOUSE BILL NO. **7300**



Introduced by Representative Michael L. Romero

EXPLANATORY NOTE

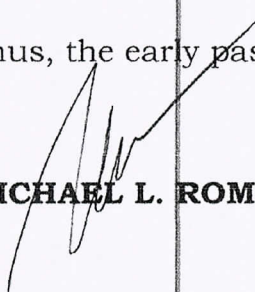
In the republic of the Philippines, Government hospitals are not at all capable to support the ideal hospital bed to population ratio.

The 2018 data, the ratio of government-owned hospital beds to population stands at **1: 2,320**. This is many numbers away from the hospital bed to population ratio that the *Philippine Health Facility Development Plan 2017-2022* of the Department of Health (**DOH**) has set as target (**one hospital bed for every 800 citizens or 1: 800**).

The DOH's National Health Facility Registry lists has a total of **89,700 hospital beds**. Of this figures, government-owned hospitals account for 47,645 or only (53 percent of the beds), including 33,008 (69 percent) in Luzon; 6,767 or (14 percent) in the Visayas; and 7,870 or (17 percent) in Mindanao.

This House Bill seeks to ensure access and availability of hospital services and facilities to all Filipinos, establishment of new hospitals shall be regulated based on a set of criteria as embodied under prevailing laws.

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


MICHAEL L. ROMERO

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

HOUSE BILL NO. 7300

Introduced by Representative Michael L. Romero

AN ACT

PROVIDING FOR A COMPREHENSIVE **POPULATION TO HOSPITAL BEDS RATIO**, TO FOSTER THE AVAILABILITY, ACCESS AND DISTRIBUTION OF HEALTH FACILITIES AND SERVICES, AND FOR OTHER PURPOSES

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

SECTION 1. DECLARATION OF POLICY – It is hereby a declared policy of the state to promote the application of an appropriate system modeling using system dynamics, the model identified by health professionals, the population, and financial sources that greatly affect healthcare services.

The state shall support the simulations that shall reveal, that the Republic of the Philippines may be able to satisfy the hospital bed requirements by year 2022.

The state shall recognize that, this will only be possible if both public and private hospitals will provide just compensation to healthcare providers and

invest on infrastructure and facility such as acquisition of new hospital beds to accommodate the healthcare needs of the growing population.

The 1987 Philippine Constitution, in Section 15 Article III, declares that the State shall protect and promote the right to health of the people and instill health consciousness among them.

Section II Article XIII declares that the State shall adopt an integrated and comprehensive approach to health development that shall endeavor to make essential goods, health and other social services available to all the people at affordable cost.

These roles of the State as stated in the Constitution are one of the justification for government intervention in or regulation of the health sector. Free market forces cannot be allowed to reign if this will result in inequity and lack of access to health services. Health and health services, being public goods, must be distributed equitably to the whole population. And it is the role of the government to ensure equitable distribution of health resources.

SECTION 2. GENERAL GUIDELINES:

- A. The BHFS (*bureau of health facilities and services*) shall require all applicants for PTC (*permit to construct*) for the establishment of new hospitals to secure a Certificate of Need from the CHD (*center for health development*). The CHD shall require all applicants to accomplish the DOH-prescribed application form for the issuance of Certificate of Need.
- B. Conversion or upgrading of a birthing home into a general hospital, or a special hospital into a general hospital, shall also require a Certificate of Need from the CHD as a requirement for the application for a PTC.

- C. Each CHD shall create a committee composed of three members coming from CHD technical staff that will evaluate the application for a Certificate of Need. This committee shall recommend to the CHD Director the approval or disapproval of the application..
- D. The CHD Director shall approve/disapprove the application for a Certificate of Need. If approved, the CHD Director shall endorse to the BHFS the Certificate of Need of the applicant together with the evaluation report. If disapproved, the CHD shall inform the applicant by registered mail the particular reason for the disapproval of the application.
- E. All CHDs shall map all existing hospitals in the region, as well as establish a database of all hospitals with corresponding bed capacities and the projected population of all political subdivisions within the region. The CHD shall update the regional map of all existing hospitals periodically, and shall submit a copy of the map during the first quarter of the year to the BHFS.
- F. All applicants with a disapproved PTC application that has been inactive for one year before the approval of this Order, as well as those applicants with approved PTC applications but whose PTC has already lapsed (i.e. construction has not begun within 365 days upon approval of the PTC) shall be required to secure a Certificate of Need from the CHD.

G. The CHD shall impose a non-refundable application fee for the issuance of Certificate of Need in the amount of Twenty Thousand pesos (**P20,000.00**) and shall be paid to the Cashier of the CHD. The application fee shall be updated regularly by the BHFS.

SECTION 3. POLICIES

Bed to Population Ratio

The bed-to-population ratio must not be more than one (1) bed per 800 population (**1 : 800**).

In a province or region where the bed-to-population ratio is already more than **1: 800**, additional beds may be put up if the average occupancy rate for all hospitals for the past three (3) years is more than 85%. The number of additional beds that may be put up shall be based on the health care needs of the population.

Travel Time. The proposed hospital shall be at least one (1) hour away by the usual means of transportation during most part of the year from the nearest existing hospital.

Accessibility. The proposed hospital site must be accessible to patients and clients by the usual means of land or sea transportation during most part of the year. If the proposed site is in an island municipality, the proposed hospital must be strategically located.

Integration with local hospital development plan. If there is an existing local hospital development plan that has been approved by the DOH, the proposed hospital must be integrated with this existing plan. The proponent should show proof that it has checked with the local government for any relevant local hospital development plan.

Track record. If the proponent is currently operating a hospital, that hospital must have an acceptable track record in terms of good compliance with licensing requirements and a consistent history of few verified complaints.

SECTION 4. TRANSITORY PROVISION – Existing industries, businesses and offices affected by the implementation of this Act shall be given six **(6)** months transitory period from the effectivity of the IRR or such other period as may be determined, to comply with the requirements of this Act.

SECTION 5. IMPLEMENTING RULES AND REGULATIONS. – The departments and agencies charged with carrying out the provisions of this Act shall, within sixty **(60)** days after the effectivity of this Act, formulate the necessary rules and regulations for its effective implementation.

SECTION 6. REPEALING CLAUSE. – All laws, decrees, executive orders, rules and regulations, or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SECTION 7. SEPARABILITY CLAUSE. – If, for any reason, any section or provision of this Act is held unconstitutional or invalid, the other sections or provisions hereof shall not be affected thereby.

SECTION 8. EFFECTIVITY CLAUSE. – This Act shall take effect after fifteen (15) days from its publication in the Official Gazette or in at least two (2) national newspapers of general circulation whichever comes earlier.

Approved,