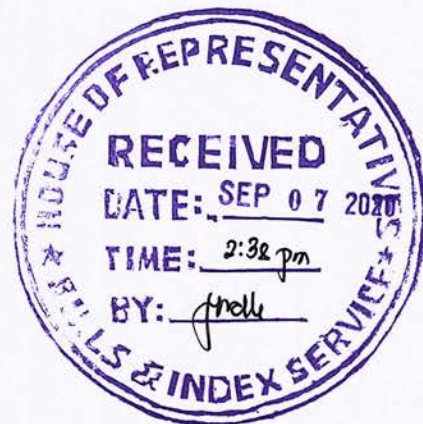


REPUBLIC OF THE PHILIPPINES
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

House Bill No. 7593



Introduced by **MAGDALO Party-List Representative**
HON. MANUEL DG. CABOCHAN III

EXPLANATORY NOTE

Article XI, Section 15 of the 1987 Constitution provides:

"The State shall protect and promote the right to health of the people and instill health consciousness among them."

In the recent outbreak of the COVID-19 pandemic, our nation has been severely stifled by the Enhanced Community Quarantine. Thousands of Filipinos have been left displaced because of the health risks caused by this contagious menace. According to the Department of Health, this highly contagious novel virus has incurred 6,459 total number of cases in the country with around 428 deaths as of April 20, 2020.¹ These numbers continue to rise as countries race against time to produce a vaccine to stop this pandemic.

There is an urgent need to address this kind of public emergency that threatens the welfare of the whole nation. Hence, this proposed measure seeks to strengthen the government's preparedness for public health emergencies. This includes those which result from natural disasters, disease outbreaks and pandemic, terrorist attacks, nuclear emergency, chemical emergencies and radiological emergencies. Further,

¹Department of Health. COVID-19 Case Tracker. Retrieved from <https://www.doh.gov.ph/covid-19/case-tracker>

this bill would mandate national government agencies and local government units to harmonize national preparedness against existing and future health crisis. As an old saying states that "an ounce of prevention is worth a pound of cure."

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



MANUEL DG. CABOCHAN III

Representative

Magdalo Para Sa Pilipino Party-List

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Introduced by **MAGDALO Party-List Representative**
HON. MANUEL DG. CABOCHAN III

AN ACT
STRENGTHENING THE NATIONAL PREPAREDNESS AND RESPONSE TO
PUBLIC HEALTH EMERGENCIES AND ESTABLISHING THE PUBLIC HEALTH
EMERGENCY COUNCIL, PROVIDING ITS POWERS AND FOR OTHER
PURPOSES

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

1 SECTION 1. *Short Title.*— This Act shall be known as the "Public Health
2 Emergency Act of 2020."

3
4 SEC. 2. *Declaration of Policy.*— The State shall protect and promote the right
5 of the people and instill health consciousness among them. In the light of new and
6 emerging threats of natural disasters, disease outbreaks and pandemic, terrorist
7 attacks, nuclear emergency, chemical emergencies and radiation emergencies, the
8 State shall focus on the prevention, detection, management and containment of
9 public health emergencies.

1 The State shall endeavor to respond immediately and effectively to potential
2 or actual public health emergencies, and in responding, shall require the exercise of
3 extraordinary government functions which may require the cooperation of the
4 people.

5
6 SEC. 3. *Definition of Terms.*—For the purpose of this Act:

- 7 (a) *Biological agent* refers to any microorganism, virus, infectious substance,
8 naturally occurring or bioengineered product, or other biological material
9 that could cause instant or gradual death, disease, or other harm to a
10 human, an animal, a plant, or another living organism;
11 (b) *Biological attack* refers to any direct or indirect attack against the
12 population with the use of weapons and equipment employing the use of
13 biological agents;
14 (c) *Chemical agent* refers to any solid, liquid or gaseous substance that has
15 the capacity to cause instant or gradual death, disease or other harm to a
16 human, an animal, a plant, or another living organism;
17 (d) *Chemical attack* refers to any direct or indirect attack against the
18 population with the use of weapons and equipment employing the use of
19 chemical agents;
20 (e) *Health care facility* refers to any institution, building or agency or portion
21 thereof, whether public or private (for profit or non-profit) that is used,
22 operated or designed to provide health services, medical treatment,
23 nursing, rehabilitative or preventive care to any person or persons. This
24 includes, but not limited to ambulatory surgical facilities, health
25 maintenance organizations, home health agencies, hospices, hospitals,
26 infirmaries, intermediate care facilities, kidney treatment centers, long-
27 term care facilities, medical assistance facilities, mental health centers,
28 outpatient facilities, public health centers, rehabilitation facilities,
29 residential treatment facilities, skilled nursing facilities and adult daycare
30 centers. The term also includes, but not limited to, the following property
31 when used for or in connection with the foregoing: laboratories, research
32 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;

(f) *Health care provider* refers to 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;

(g) *Infectious disease* refers to as disorders in a living organism caused by pathogenic microorganisms such as bacteria, viruses, parasites or fungi that can be spread directly or indirectly (vector-borne) from one individual to another. An infectious disease may, or may not, be transmissible from person to person, animal to person, or insect to person;

(h) *Isolation* refers to the physical separation and confinement of individuals known or suspected through signs, symptoms or laboratory criteria to be infected with a contagious disease to prevent them from transmitting disease to others;

(i) *Nuclear agent* refers to any radioactive material, element or by-products thereof, that could cause instant or gradual death, disease other harm to a human, an animal, a plant, or another living organism;

(j) *Nuclear attack* refers to any direct and indirect attack against the population with the use of weapons and equipment employing the use of nuclear technology;

(k) *Public health emergency* refers to the occurrence or imminent risk of an illness or health condition that may be caused by natural calamities, terrorist attacks, 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 such as, but not limited to, the agriculture sector, which includes to the nation's food supply;

- 1 (l) *Quarantine* refers to the compulsory physical separation (including the
2 restriction of movement or confinement) of individual and/or groups
3 believed to have been exposed to or know to have been infected with a
4 contagious disease from individuals who are believed not to have been
5 exposed or infected, in order to prevent or limit the transmission of the
6 disease to others;
- 7 (m) *Radioactive material* refers to a nuclear or radioactive substance that
8 has the capacity to cause bodily injury or gradual death to a human, an
9 animal, a plant or another living organism;
- 10 (n) *Terrorist attack* refers to an attack against to the population with the
11 intent to deliberately cause death or harm to persons or damage to
12 property using weapons of mass destruction or mass disruption. Such
13 weapons, but are not limited to, may be biological, chemical, radiological
14 or nuclear, or other conventional or improvised weapons;
- 15 (o) *Tests* refer to any, but not limited to, diagnostic or investigative analyses
16 necessary to prevent the spread of disease or protect the public's health,
17 safety and welfare.

18
19 SEC. 4. *Public Health Emergency Council (PHEC).*— The Public Health
20 Emergency Council (PHEC), hereinafter referred to as the Council, is hereby
21 established composed of the following:

- 22 (a) Secretary of Health as Chairperson;
23 (b) Executive Secretary as Co-Chairperson;
24 (c) Secretary of National Defense as Member;
25 (d) Secretary of Interior and Local Government as Member;
26 (e) Secretary of Justice as Member;
27 (f) Secretary of Budget and Management as Member;
28 (g) Secretary of Trade and Industry as Member;
29 (h) Press Secretary as Member;
30 (i) National Security Adviser as Member; and
31 (j) Chairman of the National Disaster Risk Reduction and Management
32 Plan.

1
2 Other government agencies not under the authority or jurisdiction of the
3 standing members of the Council may be included should their inclusion be
4 determined by the Council as necessary.
5

6 The Council shall convene when a State of Public Health Emergency is
7 declared or as often as may be necessary, to advise the President on course of
8 action that may be taken in the event that a public health emergency occurs and in
9 order to perform its mandate.
10

11 SEC. 5. *Creation of a Public Health Emergency Plan.*— A Public Health
12 Emergency Plan (PHEP) shall be formulated by the Council within six (6) months
13 after the effectivity of this Act. The PHEP shall serve as the framework for the
14 government's response to any public health emergency. It shall provide for
15 integrated policy coordination and strategic direction with respect to all matters
16 related to national public health and medical preparedness and execution and
17 deployment of national response before, during, and following public health
18 emergencies.
19

20 It shall set out goals and specific objectives to detect, prevent the spread,
21 contain and manage public health emergencies resulting from an outbreak of highly
22 contagious and/or infectious diseases, epidemic and pandemics, biological,
23 chemical, radiological or nuclear attack. It shall include the following:

- 24 (a) Provisions for increasing the preparedness, response capabilities and
25 surge capacity of ambulatory care facilities, dental health facilities and critical
26 care service systems;
27 (b) Plans for optimizing a coordinated and flexible approach to the medical
28 surge capacity of hospitals, other health care facilities, critical care and
29 trauma care and emergency medical systems;
30 (c) Provisions taking into account the unique needs of individuals with
31 disabilities in a public health emergency;

1 (d) Strategic initiatives to advance countermeasures to diagnose, mitigate,
2 prevent or treat harm from any natural calamities, infectious diseases,
3 epidemic and pandemics, biological, chemical, radiological or nuclear agents,
4 whether naturally occurring, unintentional, or deliberate;

5 (e) Conduct of periodic evaluations of national and local preparedness and
6 response capabilities which shall include drills and exercises to ensure medical
7 surge capacity for events without notice.

8
9 SEC. 6. *Declaration of State of Public Health Emergency.*— The President,
10 upon the recommendation of the Secretary of Health, may declare a State of Public
11 Health Emergency and immediately convene the Council. The basis for such a
12 declaration shall be made public by the Council through the mass media and a
13 written report shall be submitted to both Houses of Congress.

14
15 The State of Public Health Emergency shall be for a period of sixty (60) days,
16 unless extended or terminated earlier by the Council. The exercise of such
17 declaration shall only be for the promotion of the common good.

18
19 SEC. 7. *Creation of a Task Force on Public Emergencies.*— A task force under
20 the control of the Council shall be established in order to conduct research
21 necessary for the creation of the Plan. The Task Force shall be composed of
22 representatives from:

- 23 (a) Department of Health;
24 (b) National Disaster Risk Reduction and Management Council (NDRRMC);
25 (c) Department of Interior and Local Government (DILG);
26 (d) National Security Adviser;
27 (e) Philippine National Red Cross (PNRC).

28
29 SEC. 8. *Functions of Task Force on Public Emergencies.*— The task force
30 established in this Act shall have the following functions:

- 1 (a) Monitor emerging issues and concerns as they relate to medical and
2 public health preparedness and response for at-risk individuals in the event of
3 a public health emergency;
- 4 (b) Identify and minimize gaps, duplication and other inefficiencies in medical
5 and public health preparedness and response activities and the actions
6 necessary to overcome these obstacles;
- 7 (c) Disseminate and update novel and best practices of outreach to and care
8 of at-risk individuals before, during and following public health emergencies in
9 a timely manner as is practicable including from the time a public health
10 threat is immediately identified; and
- 11 (d) Ensure that public health and medical information distributed by the
12 government during a public health emergency is delivered in a manner that
13 takes into account the range of communication needs of the intended
14 recipients, including at-risk individuals.

15
16 SEC. 9. *Creation of Medical Reserve Corps.*— The Council shall establish a
17 medical reserve corps composed of volunteer health professionals. The Medical
18 Reserve Corps shall be called into duty if needed during the period of the State of
19 Public Health Emergency.

20
21 SEC. 10. *Health Care Facilities and Services During State of Public Health*
22 *Emergency.*— During the period of the State of Public Health Emergency, the Council
23 may, within reasonable and necessary grounds for emergency response to a public
24 health emergency, require privately-owned health care facilities to provide services
25 or the use of their facilities.

26
27 SEC. 11. *Dangerous Facilities and Materials.*— During the State of Public
28 Health Emergency, the Council may exercise, in coordination with national
29 government agencies, local governments, and other organizations responsible for
30 the implementation of the PHEP, the following powers over facilities or materials
31 that may be considered dangerous due to contamination or exposure to chemical,
32 nuclear or biological agents or infectious disease pathogens:

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

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

7
8 SEC. 12. *Control of Pharmaceutical Agents or Medical Supplies.*— After the
9 declaration of a State of Public Health Emergency, the Council may authorize
10 concerned agencies to purchase, store or distribute anti-toxins, serums, vaccines,
11 immunizing agents, antibiotics and other pharmaceutical agents or medical supplies
12 that it considers advisable in the interest of preparing for or controlling a public
13 health emergency, with the right to take immediate possession thereof.

14
15 If a State of Public Health Emergency results in a nationwide or regional
16 shortage or threatened shortage of any product covered by the preceding
17 paragraph, the Council may control, restrict and regulate by rationing and using
18 quotas, prohibitions on shipments, price fixing, allocation or other means, the use,
19 sale dispensing, distribution or transportation of the relevant product necessary to
20 protect the health, safety and welfare of the people. In making rationing or other
21 supply and distribution decisions, the Council must give preference to health care
22 providers, disaster response personnel and mortuary staff.

23
24 Nothing in this section shall be construed to allow the Council to obtain anti-
25 toxins, serums, vaccines, immunizing agents, antibiotics and other pharmaceutical
26 agents or medical supplies for the primary purpose of hoarding such items or
27 preventing their fair and equitable distribution among health care institutions and
28 providers, both government and private.

29
30 SEC. 13. *Control and Treatment of Infectious Disease.*— During a State of
31 Public Health Emergency, the Council shall use every available means to prevent the

1 transmission of contagious and infectious diseases and to ensure that all cases of
2 infectious disease are subject to proper control and treatment.

3
4 SEC. 14. *Physical Examinations or Tests; Isolation or Quarantine of Persons*
5 *Refusing Examination.*— During a State of Public Health Emergency, the Council may
6 perform voluntary physical examinations or tests as necessary for the diagnosis or
7 treatment of individuals.

8
9 The Council may isolate or quarantine any person whose refusal of physical
10 examination or testing results in uncertainty regarding whether he or she has been
11 exposed to or is infected with a contagious or possibly contagious disease or
12 otherwise poses a danger to public health.

13
14 Isolation and quarantine shall be mandatory for persons exhibiting any
15 symptom of an infectious disease causing the public health emergency or whose
16 physical examination or test results confirm an infection.

17
18 SEC. 15. *Isolation and Quarantine of Individuals or Groups.*— During a State of
19 Public Health Emergency, the Council may perform voluntary physical examinations
20 or tests as necessary for the diagnosis or treatment of individuals. It shall establish
21 and maintain places of isolation and quarantine, and set rules and make orders.

22 The Council may isolate or quarantine an individual or groups of individuals in order
23 to prevent or contain the transmission of contagious diseases. Isolation and
24 quarantine shall be mandatory for persons exhibiting any symptom of an infectious
25 disease causing the public health emergency or whose physical examination or test
26 results confirm an infection. Individuals who have not been vaccinated, treated,
27 tested or examined may also be subjected to quarantine or isolation.

28
29 The Council shall adhere to the following conditions and principles when
30 placing individuals or groups of individuals under isolation or quarantine:

31 (a) Isolation and quarantine must be by the least restrictive means
32 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;

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

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

(d) 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;

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

(f) 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;

(g) 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; and

(h) Any person entering an isolation or quarantine premises with or without authorization of the Council may be isolated or quarantined as provided for in this Act.

SEC. 16. *Safe Disposal of Human Remains.*— To ensure the safe disposal of human remains of suspected or known to be a victim of an infectious disease, the Council shall coordinate with hospitals and funeral institutions for such period as the State of Public Health Emergency exists, to:

(a) Take possession or control of any human remains which cannot be safely handled otherwise;

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

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

8
9 All human remains prior to disposal must be clearly labeled with all available
10 information to identify the deceased and the circumstances of death. Any human
11 remains of a deceased person with an infectious disease must have an external,
12 clearly visible tag indicating that the human remains are infected and, if know, the
13 infectious disease.

14
15 Every person in charge of disposing of any human remains must maintain a
16 written record of each set of human remains and all available information to identify
17 the deceased and the circumstances of death and disposal. If the human remains
18 cannot be identified, prior to disposal, a qualified person must, to the extent
19 possible, take fingerprints and one or more photographs of the human remains, and
20 collect a DNA specimen. All information gathered under this paragraph must be
21 promptly forwarded to the PHEC. Identification must be handled by the agencies
22 that have laboratories suitable for DNA identification.

23
24 SEC. 17. *Centralized Information.*— During the State of Public Health
25 Emergency, the PHEC, through the Press Secretary or a designated alternate, shall
26 provide the public with daily updates, news bulletins or briefings on the progress of
27 the management and containment of the public health emergency and shall
28 endeavor to prevent or stop the spread of misinformation.

29
30 In this pursuit, the PHEC, through the Press Secretary, may be request the
31 mass media to refrain from reporting or disseminating information about the public
32 health emergency that has not been cleared by the PHEC.

1
2 SEC. 18. *Role of Local Government Units.*— Within six (6) months after the
3 adoption of a Public Health Emergency Plan, local government units shall draw up
4 their respective Local Public Health Emergency Plans (LPHPs) conforming to the
5 Public Health Emergency Plan and the provisions of this Act.
6

7 During a State of Public Health Emergency, local government officials are
8 hereby mandated to provide all the necessary support and cooperation to the
9 national government in order to address the situation.
10

11 Refusal of local government officials to provide support and cooperation shall
12 constitute an offense and shall be dealt with disciplinary action as provided for in
13 the Local Government Code.
14

15 SEC. 19. *Prohibited Acts.*— For the purpose of this Act:

- 16 (a) Failure of person or persons placed in isolation or quarantine to comply
17 with the Council's rule and orders who went beyond the isolation or
18 quarantine zone that may compromise public health and safety;
19 (b) Entering an isolation or quarantine premises without authorized
20 permission from the Council; and
21 (c) Facilitating, aiding or conspiring to violate any provisions of this Act.
22

23 Isolated and quarantined individuals who have committed the
24 abovementioned prohibited acts shall only be penalized from the time that the
25 Council has deemed that they pose no substantial risk of transmitting a contagious
26 or possibly contagious disease to others.
27

28 SEC. 20. *Penalty.*— Violation of any of the prohibited acts stated in the
29 preceding section shall be penalized with the imprisonment of not more than six (6)
30 months or a fine of Ten Thousand Pesos (P10,000.00).
31

1 SEC. 21. *Appropriations.*— The amounts necessary to implement this Act shall
2 be taken from the current budget of the Department of Health. Thereafter, such
3 amounts necessary to effectively carry out the provisions of this Act shall be included
4 in the annual General Appropriations Act.

5
6 SEC. 22. *Implementing Rules and Regulations.*— The Secretary of the
7 Department of Health shall promulgate the implementing rules and regulations,
8 objectives, purposes and provisions of this Act within ninety (90) days from its
9 effectivity.

10
11 SEC. 23. *Separability Clause.*— If any provision of this Act is declared invalid or
12 unconstitutional, the other provisions not affected by such declaration shall remain in
13 force and effect.

14
15 SEC. 24. *Repealing Clause.*— All laws, executive orders, administrative orders,
16 and rules and regulations inconsistent with this Act are hereby repealed or amended
17 accordingly.

18
19 SEC. 25. *Effectivity Clause.*— This Act shall take effect fifteen (15) days after
20 its publication in the Official Gazette or in a newspaper of general circulation.

Approved,