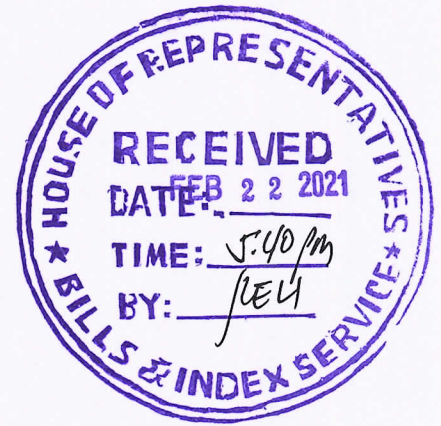


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Batasan Hills, Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

House Bill No. **8799**



Introduced by HON. LORD ALLAN JAY Q. VELASCO, HON. FERDINAND MARTIN G. ROMUALDEZ, HON. PAOLO Z. DUTERTE, HON. RODANTE D. MARCOLETA, HON. ERIC GO YAP, HON. RODOLFO "OMPONG" M. ORDANES, and HON. MICHAEL L. ROMERO

EXPLANATORY NOTE

Article XIII, Section 11 of the 1987 Philippine Constitution states 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." Likewise, Article XV, Section 4 further declares that it is the duty of the family to take care of its elderly members while the State may design programs of social security for them.¹

The Philippines has reached what is considered an ageing population. According to the Population Commission, 8.2% of the total population is over 60 years old while 4.7% or a total of 5 million Filipinos is aged 65 and older by the end of 2018. It is projected that the percentage of elderly people (65 and above) in the country will most likely grow by 4.9% by year 2020, 5.6% by year 2025, and 6.3% by year 2030.²

Part of the emergent trend of an ageing population and the rise of life expectancy is the increase in the incidences of age-related communicable and non-communicable diseases that require cumulative specialized medical attention, and, in relation, proves taxing in state

¹ The 1987 Philippine Constitution of the Republic of the Philippines

² Commission on Population and Development (POPCOM), 2018

health policies, as shown in the study of the Global Health and Aging study conducted by the World Health Organization (WHO) in 2011.¹

The common chronic age-related communicable diseases identified in the Philippines are hypertension, degenerative osteoarthritis, diabetes mellitus, pulmonary tuberculosis, osteoporosis, cardiovascular disease, and pneumonia. Aside from common diseases, geriatric syndromes or degenerative diseases such as dementia and Alzheimer's disease, hearing impairment, malnutrition, depression, and Chronic Pain Syndrome, were identified in the study conducted by Philippine General Hospital last 2005.

Moreover, the Philippine Statistics Authority reported that 22.1% of the elderly population aged 65 years old and above are disabled or are in need of increased medical attention and care.² Nearly a third (31.4%) of older people is living in poverty, which greatly diminishes their access to the highly-specialized field of geriatric medical care.³

Accessibility of the geriatric wards and specialty services still needs to be improved. Survey conducted by Research and Performance Management of the DOH - Health Facility Development Bureau showed high proportion of patients are senior citizen and low compliance of the government hospitals to provide geriatric health services (Napulan, De Roxas, et al., 2019).⁴

Establishing a national hospital specialized in geriatric health will ease the double burden of addressing communicable and degenerative diseases, the rise in life expectancy and the increase in the ageing population, hospital, whether government or private, and community-based health care, should promote active and healthy ageing.

Furthermore, as found in research on specialized geriatric care, it will lower the average length of hospital stay among elderly patients from 7.3 days to 6.7 days, minimize hospital costs to around Fifty Thousand Pesos (PhP 50,000.00) per patient, and improve overall care of our senior citizens.⁵

Finally, a hospital specialized in geriatric care can help bridge the persistent shortage of geriatricians in the Philippines since it can become a training ground for doctors who seek

¹ Global Health and Aging, World Health Organization, National Institute on Aging, (2011).

² Philippine Statistics Authority, "Persons with Disability in the Philippines (based on 2010 census)", (2013).

³ Help Age Global Network, "Ageing population in the Philippines". <http://www.ageinasia.org>.

⁴ "Profile of Geriatric Wards and Accessibility of Health Services for Senior Citizens", Napulan, Roderick M., De Roxas, Dianne Melody A., Feliciano, Erickson A., Ople, Camille C., and Reyes, Andy Geo A.

⁵ Barnes, et. al., Acute Care for Elder Units Produced Shorter Hospital Stays at Lower Cost while Maintaining Patients' Functional Status, (2012).

to pursue a specialization in geriatric health. It will also establish geriatric health as a viable field of specialty and incentivize new and upcoming doctors to become geriatricians.

Thus, this bill seeks to make the country's commitment to Universal Health Care more genuinely felt by the elderly population and give our almost ten million senior citizens the quality healthcare they rightfully deserve.

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



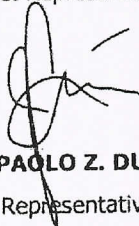
HON. LORD ALLAN JAY Q. VELASCO

District Representative Marinduque, Lone District



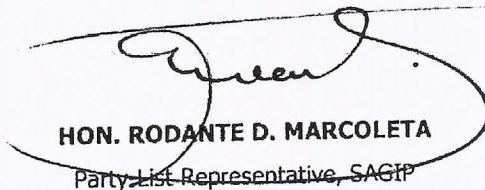
HON. FERDINAND MARTIN G. ROMUALDEZ

First District Representative, Leyte



HON. PAOLO Z. DUTERTE

First District Representative, Davao City



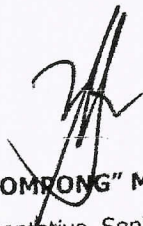
HON. RODANTE D. MARCOLETA

Party-List Representative, SAGIP

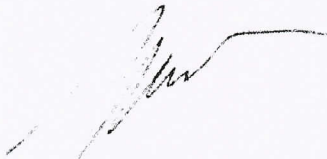


HON. ERIC GO-YAP

Party-List Representative, ACT-CIS



HON. RODOLFO "OMPONG" M. ORDANES
Party-List Representative, Senior Citizens



HON. MICHAEL L. ROMERO., Ph.D.
Party-List Representative, 1-PACMAN

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Introduced by HON. LORD ALLAN JAY Q. VELASCO, HON. FERDINAND MARTIN G.
ROMUALDEZ, HON. PAOLO Z. DUTERTE, HON. RODANTE D. MARCOLETA,
HON. ERIC GO YAP, HON. RODOLFO "OMPONG" M. ORDANES, and
HON. MICHAEL L. ROMERO

**AN ACT ESTABLISHING THE NATIONAL CENTER FOR GERIATRIC HEALTH UNDER
THE DEPARTMENT OF HEALTH AND APPROPRIATING FUNDS THEREFOR**

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

SECTION 1 *Short Title.* - This Act shall be known as "Francisco G. Datol, Jr. National Center
for Geriatric Health."

SECTION 2. *Declaration of Policy.* - It is hereby declared a policy of the State to protect
and promote the right to health of the Filipino people and to instill health consciousness
among them. Towards this end, the State shall adopt an integrated and comprehensive
approach to health development. It shall ensure that quality health services are available
and accessible to them through the establishment of a specialized hospital that will cater to
their medical needs.

SECTION 3. *Francisco G. Datol, Jr. National Center for Geriatric Health (NCGH).* – The Francisco G. Datol, Jr. National Center for Geriatric Health (NCGH) located in San Miguel, Manila, is hereby established as a tertiary specialty hospital under the direct control and supervision of the Department of Health for the benefit of the senior citizens and older persons.

The bed capacity and service capabilities including its organizational structure and staffing requirements shall be consistent with its hospital development plan.

SECTION 4. *Purposes and Objectives.*– The NCGH shall have the following purposes and objectives:

- a) Equip, maintain, administer, and operate an integrated medical institution which shall specialize in geriatric health services;
- b) Promote medical services to the elderly and scientific research/database relative to the prevention, diagnosis, treatment, care, rehabilitation and relief of disease of older persons;
- c) Provide education and training of physicians, nurses, officers, social workers, barangay health workers, and other medical and technical personnel in the practice and scientific implementation of health services to older persons; and
- d) Coordinate the various efforts and activities of other government agencies and local government units for the purpose of achieving a more effective approach to the delivery of geriatric health.

SECTION 5. *Referral System.* – The NCGH shall be the National Specialty Referral Center for all private and government facilities for specialized geriatric care.

SECTION 6. *Appropriations.* – An amount of One Hundred Million Pesos (PhP 100,000,000.00) shall be appropriated for the establishment and initial operations of the NCGH. Furthermore, The Secretary of Health shall immediately include in the Department's program the implementation of this Act, the funding of which shall be included in the subsequent Annual General Appropriations Act. Thereafter, the amount necessary for the continued operation of the hospital, upgrading, and expansion of services shall be included in the annual General Appropriations Act.

SECTION 7. *Implementing Rules and Regulations* - The Department of Health shall, in consultation and coordination with appropriate government agencies, such as Department of

Budget and Management, National Commission on Senior Citizens (NCSC), Civil Society Organizations (CSOs), Non-Government Organizations (NGOs), and other stakeholders, within ninety (90) days from the effectivity of this Act, promulgate the Implementing Rules and Regulations for the effective and efficient implementation of the provisions of this Act.

SECTION 8. *Separability Clause.* – If any provision of this Act is held invalid or unconstitutional, the same shall not affect the validity and effectivity of the other provisions hereof.

SECTION 9. *Repealing Clause.* –All existing laws, decrees, executive orders, rules and regulations, or parts thereof which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

SECTION 10. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in two (2) newspapers of general circulation.

Approved.