

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

NINETEENTH CONGRESS
First Regular Session

House Bill No. 3646



INTRODUCED BY HONORABLE LIANDA B. BOLILIA

EXPLANATORY NOTE

This bill seeks to standardize incentives and provide additional benefits and training to barangay health workers (BHWs) in recognition to the important role they play in the delivery of health services in the barangay level.

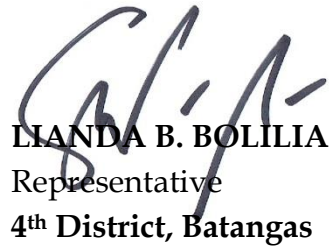
Article XIII Section 11 of the 1987 Philippine Constitution provides that, "The State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost." Republic Act 7883 otherwise known as the "Barangay Health Workers' Benefits and Incentives Act of 1995" reinforces Article XIII Section 11 while recognizing the role of BHWs who serve as frontliners in the delivery of the Primary Health Care Approach which promotes health empowerment, and accessible and acceptable health services through participatory strategies.

Over the years, BHWs have been increasingly instrumental in the delivery of health services. This was especially evident during the pandemic when there was a very high demand for health workers in the government's management of COVID-19 and vaccination drive.

Despite their important role, BHWs are considered volunteers with insufficient benefits. They are also deprived of the security of tenure that befits their level of commitment.

The passage of this bill will not only recognize the valuable contribution of the BHWs but also encourage more Filipinos to become a BWH and work with the government in making health care accessible to all.

In view of the foregoing, the immediate enactment and approval of this bill is earnestly sought.



LIANDA B. BOLILIA
Representative
4th District, Batangas

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

NINETEENTH CONGRESS
First Regular Session

House Bill No. 3646

INTRODUCED BY HONORABLE LIANDA B. BOLILIA

AN ACT
PROVIDING FOR THE MAGNA CARTA OF BARANGAY HEALTH WORKERS

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

1 **SECTION 1. *Short Title.*** – This Act shall be known as the “Magna Carta of
2 Barangay Health Workers.”

3
4 **SECTION 2. *Declaration of Policy.*** – It is hereby declared the policy of the State
5 to protect and promote the right to health of people and adopt an integrated and
6 comprehensive approach to health development. Pursuant thereto, it shall endeavor to
7 make essential goods, healthcare, and other social services available to all the people. In
8 line with the country’s commitment to accomplish health indicator targets under United
9 Nations’ Millennium Development Goals (MDGs), the State shall adopt policies that
10 promote the welfare and well-being of barangay health workers who are the forefront of
11 the delivery of healthcare at the grassroots level, and which shall effectively harness their
12 potential as partners in development.

13
14 **SECTION 3. *Definition.*** – As used in this Act, the term “barangay health worker”
15 refers to a person who has undergone training under any accredited government and
16 nongovernment organization and who voluntarily renders primary healthcare services
17 in the community after having been accredited to function as such by the local health
18 board in accordance with the guidelines promulgated by the Department of Health

(DOH) pursuant to Section 3 of Republic Act No. 7883 otherwise known as the “Barangay Health Workers’ Benefits and Incentives Act of 1995.”

SECTION 4. *Registration.* – Barangay health workers (BHWs) shall be registered with the local health board in the city or municipality in which they render service. The registered health workers shall be given appropriate proof of said registration.

The municipal and city health offices shall regularly maintain and update the BHW Registry with the assistance of the BHW Federation and shall submit the same to the municipal or city health board. The local health offices shall submit a copy of their respective updated BHW registry to the Provincial Health Office which shall consolidate all registries. Upon the validation of the Provincial BHW Federation, the consolidated Provincial Registry shall be submitted to the Provincial Health Board, and the same shall be posted in the municipal or city bulletin boards and barangay health centers.

The Provincial BHW Registry shall be submitted on or before April 30 of every year to the DOH at the regional and national levels for consolidation. The DOH is hereby mandated to maintain a national register of BHWs.

In order to qualify for registration, a barangay health worker must:

- a. Have rendered basic community health care services continuously and satisfactorily for at least six (6) months immediately preceding the date of the filing of application for registration in the barangay as certified by the Rural Health Midwife (RHM) or public health nurse assigned to the barangay and by the head of the barangay health workers association;
- b. Have completed the basic orientation and training for BHWs as prescribed by the DOH and conducted by an accredited government agency, or DOH-recognized academic institution, or nongovernmental organization (NGO);
- c. Be at least eighteen (18) years of age at the date of the filing of the application for registration; and,
- d. Be physically and mentally fit.

1 It shall be the duty of the municipal and city health offices, in cooperation with the
2 Provincial Health Office and DOH, to provide the BHW applicants with basic orientation
3 and training within six (6) months from the date of approval of their application.
4

5 **SECTION 5. Accreditation.** – To further professionalize the health care services
6 rendered by the BHWs and ensure the health and welfare of the community, a duly
7 registered BHW must be accredited by the municipal or city health board.
8

9 The municipal or city health board shall issue the certificate of accreditation to
10 qualified BHWs. In order to qualify for accreditation, the applicant BHW must:

- 11 a. Be registered in accordance with Section hereof;
12
- 13 b. Have completed in the locality at least two (2) years of continuous and
14 satisfactory service immediately prior to the filing of application for
15 accreditation;
16
- 17 c. Have completed a regular training program on health care service and
18 community-based health program, that would upgrade and develop the skills
19 and competency of BHWs to perform their roles. The training program shall be
20 institutionalized by the DOH, in cooperation with local government units
21 (LGUs)
22

23 It shall be the duty of the municipal and city LGUs, in cooperation with the provincial
24 government and the DOH, to provide the applicant BHWs the necessary support and
25 opportunities for accreditation.
26

27 A BHW must complete the regular training program on health care service and
28 community-based health program within five (5) years from registration.
29

30 The municipal and city health boards or through their registration and accreditation
31 committee shall act on the applications for accreditation of BHWs not later than thirty
32 (30) days from the date of application.
33

34 The DOH shall also maintain an updated roster of accredited BHWs that is
35 accessible to the general public.
36

1 **SECTION 6. *Number and Role of Barangay Health Workers.*** – Notwithstanding the
2 limitations prescribed under Section 325 (a) of Republic Act No. 7160, as amended,
3 otherwise known as “The Local Government Code of 1991”, each barangay shall at least
4 have one (1) BHW for every twenty (20) households.
5

6 As one of the key partners in a reformed healthcare delivery system, the DOH and
7 LGUs shall support the roles of BHWs as:

- 8 a. *Advocate* – to support, promote and champion current health programs, projects,
9 and activities to improve access to quality health services towards the improved
10 health status of the community
11
- 12 b. *Educator* – to guide and advice the community on the current DOH and health
13 priorities of LGUs such as importance of birth plan and facility-bases delivery in
14 reducing maternal and infant deaths; newborn screening for the early detection
15 of congenital metabolic disorders which may lead to mental retardation and
16 event death, among others;
17
- 18 c. *Disseminator* – to maintain regular communication with local professional health
19 workers on health events and updates and concerns relevant to the community
20 and inform the same to the community for appropriate action, if necessary;
21
- 22 d. *Coordinator* – to facilitate access to any group or association of the community
23 with a relevant network of or specific health and non-health service providers;
24
- 25 e. *Record Keeper* – to maintain updated records of health data, health activities and
26 events in the community;
27
- 28 f. *Health Care Service Provider* – to assist and provide basic healthcare services as
29 may be needed in the community in any health event.
30

31 A BHW shall not be required to engage in any partisan political activity.
32

33 **SECTION 7. *Mandatory Appointment of Barangay Health Worker (BHW).*** – There
34 shall be appointed at least one (1) BHW in every barangay for every twenty (20)
35 households who shall be under the supervision and control of the DOH. The BHW so
36 appointed shall coordinate closely with the local government health officer in the
37 implementation of health programs in the locality. As far as practicable, the BHW to be
38 employed must be a resident of the barangay.

1
2 The DOH shall determine the ratio of barangay health workers according to the
3 number of households: *Provided*, That there shall be at least one (1) BHW for every twenty
4 (20) households: *Provided, further*, That the total number of barangay health workers
5 nationwide shall not be less than one percent (1%) of the total population.
6

7 **SECTION 8. *Incentives and Benefits.*** – All BHWs who are actively and regularly
8 performing their duties shall be entitled to monthly honoraria in the amount of not less
9 than Three thousand pesos (P3,000.00) subject to adjustment based on the prevailing
10 market value, in addition to the following incentives and benefits:

- 11 a. *Privileges for the BHWs.* – All accredited BHWs shall be entitled to twenty percent
12 (20%) discount on all the items enumerated under Section 4(a) of Republic Act
13 No. 9994 otherwise known as the “Expanded Senior Citizens Act of 2010”:
14 *Provided*, That the privileges shall not be claimed if the BHW is eligible for a
15 higher discount that may be granted by the existing laws
16

17 The commercial establishment may claim the discount granted under this
18 Section as tax deduction based on the cost of goods sold or services rendered:
19 *Provided*, that the discount shall be allowed as deduction from the gross income
20 for the same taxable year that the discount is granted: *Provided, further*, that the
21 total amount of the claimed tax deduction net of value-added tax, if applicable,
22 shall be included in their gross sales receipt for tax purposes and shall be subject
23 to proper documentation and to the provisions of the National Internal Revenue
24 Code of 1997, as amended.
25

- 26 b. *Hazard Allowance.* – All accredited BHWs shall be entitled to hazard allowance in
27 an amount to be determined by the local health board of the LGU concerned,
28 which in no case shall be less than one thousand pesos (P1,000.00) per month,
29 subject to existing laws, rules, and regulations;
30

- 31 c. *Subsistence Allowance.* – All accredited BHWs who render service within the
32 premises of isolated barangay health stations shall be entitled to subsistence
33 allowance equivalent to the meals they take in the course of their duty, which
34 shall be computed in accordance with prevailing circumstances as determined
35 by the LGU concerned. Such allowance shall, in no case, be less than one
36 hundred pesos (P100.00) per day;
37

- 1 d. *Transportation Allowance.* – All accredited BHWs, in the performance of their
2 official duties, shall be entitled to a transportation allowance of not less than one
3 thousand pesos (₱1,000.00) per month, subject to auditing rules and regulations;
4
- 5 e. *One-time Retirement Cash Incentive.* – An accredited BHW who has continuously
6 and satisfactorily served for at least fifteen (15) years shall be entitled to a one-
7 time retirement cash incentive of not less than Ten thousand pesos (₱10,000.00)
8 in recognition of their loyalty and dedication, which shall be borne by the
9 municipality or city concerned. The provincial government may provide
10 assistance for this purpose, in the case of component cities;
11
- 12 f. *Training, Education and Career Enrichment Programs.* – The DOH shall, in
13 coordination with the Department of Education (DepEd), Commission on
14 Higher Education (CHED), Technical Education and Skills Development
15 Authority (TESDA), DOH-recognized academic institutions, other concerned
16 agencies and nongovernment organizations, provide information on and
17 opportunities for education and career enrichment for accredited BHWs, such as
18 in the following programs:
19
- 20 1. Educational programs which credit the years of primary healthcare service
21 of the BHW towards higher education completion in institutions with
22 stepladder curricula thus allowing them to upgrade their skills and
23 knowledge for community work or to pursue further training as midwives,
24 pharmacists, nurses or doctors;
25
 - 26 2. Continuing education, study and exposure tours, grants, field immersion,
27 and scholarships, among others;
28
 - 29 3. Scholarship benefits in the form of tuition fees in state colleges, to be granted
30 37 to one (1) child of every barangay health worker who will not be able to
31 take advantage of the programs described in paragraphs (1), (2), and (3)
32 hereof; and
33
 - 34 4. Special training programs such as traditional medicine, disaster
35 preparedness and other programs that address emergent community health
36 problems and issues.
37

1 g. *Health Benefits.* – All accredited BHWs shall be entitled to the following health
2 benefits during their incumbency:

3 1. Free medical care, including surgery and surgical expenses medicines, x-ray
4 and other laboratory fees, when confined in any public hospital or health
5 institution.

6
7 2. Emergency assistance not exceeding the amount of five thousand pesos
8 (₱5,000.00) chargeable against the fund of the barangay concerned, for
9 expenses incurred on the nearest private hospital or clinic in case of extreme
10 emergency where there is no available public hospital;

11
12 3. Mandatory and immediate membership in the PhilHealth as indirect
13 contributors.

14
15 The LGUs concerned shall also endeavor to provide other health benefits to
16 accredited BHWs not otherwise provided by law;

17
18 h. *Insurance Coverage.* – Accredited BHWs shall be granted insurance coverage and
19 benefits by the Government Service Insurance System (GSIS) which shall be
20 borne by the LGU concerned. For this purpose, the GSIS shall design an
21 insurance benefit package suited to the needs and unique circumstances of the
22 BHWs;

23
24 i. *Sick, Vacation and Maternity Leaves.* – All accredited BHWs shall be entitled to
25 sick, vacation and maternity leaves as may be prescribed in the implementing
26 rules and regulations of this Act: *Provided, That,* the BHWs shall continue to
27 receive their monthly honoraria while on leave, for such period in accordance
28 with existing laws and practices.

29
30 j. *Cash Gift.* – All accredited BHWs are entitled to a cash gift not less than the
31 minimum monthly honoraria to be given every December from the general fund
32 of the barangay or from such other funds appropriated by the national
33 government for the purpose;

34
35 k. *Disability Benefit.* – An accredited BHW who sustains an injury or falls ill in the
36 course of the performance of their duties shall be entitled to two thousand pesos
37 (₱2,000.00) for every year of service.

1 1. *Civil Service Eligibility.* – A first grade eligibility shall be granted to accredited
2 BHWs who have rendered three (3) years continuous service as such: *Provided,*
3 That should a BHW become a regular employee of the government, the total
4 numbers of years served as such shall be credited to the BHW's service in the
5 computation of retirement benefits.

6
7 No person duly accredited as a BHW shall be removed except for a valid cause
8 to be determined by the Local Health Board (LHB): *Provided,* That if found to be
9 unjustly removed from service, a BHW shall be entitled to reinstatement without
10 loss of benefits and incentives from the time of termination up to the time of
11 reinstatement. The LHB shall resolve termination cases against a BHW
12 judiciously not later than ninety (90) days from the receipt of a complaint.

13
14 m. *Free Legal Services.* – Legal representation and consultation services shall be
15 immediately provided by the Public Attorney's Office to a BHW in cases of
16 coercion, interference, and in other civil and criminal cases filed by or against the
17 BHW arising out of or in connection with the performance of their duties as such.

18
19 n. *Preferential Access to Loan Facilities.* – The DOH in coordination with other
20 concerned government agencies shall provide, within one hundred eighty (180)
21 days after the effectivity of this Act, a mechanism that shall provide organized
22 BHWs access to loan services. The agencies providing loan services will set aside
23 one percent (1%) of their loanable funds for organized BHW groups that have
24 community-based income generating projects in support of health programs or
25 activities.

26
27 **SECTION 9. *Review by the Local Health Board.*** – Every incentive or benefit for
28 BHWs requiring expenditure of local funds shall be reviewed and approved by the LHB.
29 Such benefits and incentives may be increased, upon review of the LHB, after
30 considering, among others, the present Consumer Price Index (CPI) as published by the
31 Philippine Statistics Authority (PSA)."

32
33 **SECTION 10. *Discrimination Prohibited.*** – Discrimination against any BHW by
34 reason of gender, civil status, creed, religious or political beliefs and ethnic groupings in
35 the exercise of their functions and responsibilities is hereby prohibited.

1 **SECTION 11. *Protection of BHWs.*** – The municipal, city, provincial governments
2 and the Department of the Interior and Local Government (DILG) shall establish a
3 grievance mechanism as a means of processing complaints of BHWs against alleged acts
4 of discrimination and unjust removal from the service. A BHW may appeal their
5 grievances to the DILG.
6

7 **SECTION 12. *Right to Self-organization.*** – A BHW shall have the right to freely
8 form, join or assist organizations to obtain redress of their grievances through peaceful
9 concerted activities, in a manner not contrary to law, and with utmost regard to service
10 to patients and the continuous operation of barangay health services in the interest of
11 public health, safety, or survival of patients.
12

13 **SECTION 13. *Representation in the Local Health Board and Primary Health Care***
14 ***Provider Network.*** – The president of the municipal or city association of BHWs shall be
15 a member of the municipal or city local health board. The presidents of the association of
16 BHWs of each component city and municipality associations of a province shall elect
17 from among themselves their representative to the provincial health board: *Provided,*
18 That, the BHW representatives to the health boards shall not be allowed to vote on the
19 registration, accreditation and disciplinary or removal complaints of BHWs.
20

21 The BHWs shall also form part of the healthcare provider network and shall
22 participate in the implementation of healthcare services and programs.
23

24 **SECTION 14. *Continuous Capacity Building for BHWs.*** – The DOH shall conduct
25 continuous capacity building for BHWs to enhance and upgrade their knowledge and
26 skills, including training programs conducted online and in major Philippine dialects.
27

28 The DOH shall, in coordination with TESDA and other concerned agencies shall also
29 assist the LGUs in the development of education modules or materials that highlight the
30 collective experiences and learnings of BHWs and the use of traditional and
31 complementary medicine.
32

33 The LGUs shall endeavor to establish their own training centers for their BHWs and
34 other health workers in coordination with TESDA, NGOs, and other agencies concerned.
35

36 The LGUs shall also implement a development program for BHWs that will allow
37 them to benefit from ladderized training as provided under Republic Act No. 10968,

1 otherwise known as the "PQF Act," and Republic Act No. 10647, otherwise known as the
2 "Ladderized Education Act of 2014," including academic credits for health-related
3 courses.

4
5 **SECTION 15. *Penalty Clause.*** – Any local government official who violates any
6 provision of this Act may be administratively and criminally charged in accordance with
7 law.

8
9 **SECTION 16. *Appropriations.*** – The amount necessary for the implementation of
10 this Act shall be charged against the National Tax Allotment (NTA) of the LGUs, other
11 local funds and the special health fund under Republic Act No. 11223 otherwise known
12 as the "Universal Health Care Act."

13
14 **SECTION 17. *Implementing Rules and Regulation.*** – The DOH and the DILG shall,
15 in consultation with the DepEd, the CSC, the GSIS, and other concerned government
16 agencies and nongovernmental entities, promulgate the rules and regulations to
17 implement this Act not later than one hundred eighty (180) days from the effectivity of
18 this Act.

19
20 **SECTION 18. *Separability Clause.*** – If any portion or provision of this Act is
21 declared invalid or unconstitutional, other provisions hereof shall remain in full force
22 and effect.

23
24 **SECTION 19. *Repealing Clause.*** – Republic Act No. 7883 otherwise known as the
25 "Barangay Health Workers' Benefits and Incentives Act of 1995" is hereby repealed. All
26 laws, decrees, executive orders, rules and regulations, which are inconsistent with this
27 Act are hereby repealed, or modified accordingly.

28
29 **SECTION 20. *Effectivity.*** – This Act shall take effect fifteen (15) days after its
30 publication in the *Official Gazette* or in a national newspaper of general circulation.

31
32 Approved,