

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

NINETEENTH CONGRESS
First Regular Session



HOUSE BILL No. 3650

Introduced by
ACT Teachers Party-List Rep. FRANCE L. CASTRO,
GABRIELA Women's Party Rep. ARLENE D. BROSAS,
and **KABATAAN Party-List Rep. RAOUL DANNIEL A. MANUEL**

AN ACT
INCREASING THE PUBLIC HEALTH EMERGENCY BENEFITS OF THE
HEALTH CARE AND NON-HEALTH CARE WORKERS, AND FOR OTHER
PURPOSES, AMENDING FOR THE PURPOSE REPUBLIC ACT 11712,
OTHERWISE KNOWN AS THE "PUBLIC HEALTH EMERGENCY BENEFITS
AND ALLOWANCES FOR HEALTH CARE WORKERS ACT"

EXPLANATORY NOTE

While caring for the Filipino people amid the raging COVID-19 pandemic and the country's public health crisis, thousands of health workers got infected with the viral disease. Health workers relentlessly provide health services to the Filipino people despite all the hazards—threat of getting infected, lack of personal PPEs, low wages and benefits and inhumane working conditions.

Health workers have aired their grievances again and again over limited and substandard personal protective equipment (PPE) and the lack of personnel, facilities, medicines, and medical supplies. With the militaristic yet failed pandemic response of the Duterte administration, the health workers asked for "timeout" in August 2020 to slow down the spread of COVID-19 and provide them a breathing space in the fight against the pandemic.

The special risk allowance and active hazard duty pay initially provided to the health workers are insufficient and limited. Pursuant to Administrative Orders 35 and 36 signed by President Rodrigo Duterte, public and private health workers are entitled to a special risk allowance not exceeding ₱5,000 only while the frontline human resources for health are entitled to active hazard duty pay not exceeding ₱3,000 only. These amounts are a far cry from the health workers' demand: ₱15,000 special risk allowance and ₱5,000 active hazard duty pay for all health workers.

Moreover, based on DOH Memorandum 2021-0221, only public health workers catering to COVID-19 patients or providing COVID-19 healthcare response during the state of national emergency, medical and allied professionals, and administrative and support personnel are entitled to hazard pay, subsistence and laundry allowance. The Memorandum explicitly excluded "healthcare workers hired without employer-employee relationship," including the contractual workers employed through job orders, contracts of service, and other similar arrangements. Health workers who do not directly cater to COVID-19 patients and do not perform COVID-19-related health services are not given the benefits despite being at risk of getting infected by the viral disease while providing healthcare services to the people.

This Bill was first filed as House Bill 9640 during the 18th Congress by Bayan Muna Party-List Reps. Carlos Zarate, Ferdinand Gaite and Eufemia Cullamat, ACT Teachers Party-List Rep. France Castro, Gabriela Women's Party Rep. Arlene Brosas and Kabataan Partylist Rep. Sarah Elago. It was passed on Third Reading by the House of the Representatives, and was signed into law as Republic Act 11712 or the *Public Health Emergency Benefits and Allowances for Health Care Workers Act* on April 27, 2022.

Republic Act 11712 institutionalized the benefits for the health workers during a public health emergency, unifying the special risk allowance and active hazard duty pay into the "Health Emergency Allowance" or HEA. RA 11712 retained the risk exposure categorization of health workers, under which ₱3,000, ₱6,000 and ₱9,000 will be granted to those deployed in low, medium risk, and high risk areas, respectively.

But, as health care and non-health care workers would attest, there is no such thing as "low, medium, or high risk" in health care facilities amid a public health emergency such as a pandemic—all are at risk of getting infected by the disease while in the line of duty, whether they are in a COVID-ward or not, or whether they travel to the hospital or are staying within the vicinity (e.g. off-site dormitories). Such a system of granting benefits based on the "level of exposure" necessitates health and non-health workers to prove the risk they are exposed to before they can qualify for the benefits—a neoliberal tool of cost-cutting while disregarding the health, safety and priceless sacrifices of our health care providers.

No amount of benefits could measure up to the invaluable services provided by our health care providers in times of public health emergencies like the COVID-19 pandemic. Yet, as recognition of the crucial roles and contributions of the health workers amid the public health emergency, this Bill seeks to increase the public health emergency benefits received by health care and non-health care workers, exempt these benefits from income tax, ensure the grant to all health workers including non-regular workers, and remove the risk categorization, among others.

Let us not allow the efforts and sacrifices of our health workers to be just tokenly appreciated and recognized. Let us not allow our health workers to be further demoralized and frustrated and seek better paying jobs abroad and elsewhere. Let us give them the recognition and benefits they rightfully deserve.

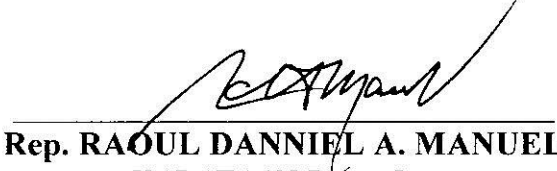
Thus, immediate passage of this Bill is earnestly sought.



Rep. FRANCE L. CASTRO
ACT Teachers Party-List



Rep. ARLINE D. BROSAS
GABRIELA Women's Party



Rep. RAOUL DANNIEL A. MANUEL
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Be it enacted by the Senate and House of Representatives of the Republic of the Philippines in Congress assembled:

SECTION 1. Section 3 of Republic Act 11712, otherwise known as the "*Public Health Emergency Benefits and Allowances for Health Care Workers Act*" is hereby amended to read as follows:

(a) Health facilities

x x x For purposes of this Act, health facilities and other health related establishments shall refer to those duly licensed or designated by the Department of Health (DOH), including the DOH-Central Office, Centers for Health Development (CHD), Provincial/City/Municipal Health Offices, **GOVERNMENT-OWNED AND -CONTROLLED CORPORATIONS (GOCCs)**, and Local Government Health Offices, x x x

(b) *Health care and non-health care workers* shall refer to all **REGULAR AND NON-REGULAR** public and private medical, allied medical, administrative, technical, support and other necessary personnel employed by, and assigned in hospitals, health facilities, laboratories, medical or temporary treatment and monitoring facilities, or vaccination sites. x x x

[(d) *Risk exposure categorization* shall refer to the following levels if exposure:

- (1) Low risk exposure – health workers performing administrative duties in non-public areas of health facilities, away from other staff members or away from patients, otherwise known as “clean areas”;
- (2) Medium risk exposure – health workers within the health facility that are providing direct physical care to the general public who are not known or suspected COVID-19 patients and working at busy staff work areas within a health facility; and
- (3) High risk exposure – health workers entering a COVID-19 patient’s room to directly provide for patients involving aerosol-generating procedures such as intubation, cough induction procedures, bronchoscopies, dental procedures and exams, or invasive specimens from known or suspected COVID-19 patients.

Provided, That for purposes of future public health emergencies, the DOH may formulate a new risk exposure categorization.]

SEC. 2. Section 5 of RA 11712 is hereby amended to read as follows:

SEC. 5 *Grant of Health Emergency Allowance, Compensation Package and Other Benefits.* – The national government shall grant the following benefits to covered individuals under Section 4 hereof:

(a) Health emergency allowance (HEA) for every month of service during the state of public health emergency [based on the risk exposure categorization as defined in this Act, as follows:

- (1) Those deployed in “low risk areas” shall be given at least Three thousand pesos (P3,000.00);
- (2) Those deployed in “medium risk areas” shall be given at least Six thousand pesos (P6,000.00); and

- (3) Those deployed in “high risk areas” shall be given at least Nine thousand pesos (P9,000.00).]

ALL HEALTH CARE AND NON-HEALTH CARE WORKERS SHALL BE GIVEN AT LEAST TWENTY THOUSAND PESOS (P20,000.00). *Provided,* That the HEA shall be released monthly in addition to the existing benefits that the health care and non-health care workers receive: [*Provided, further,* That the HEA shall be released in full if a health care worker or non-health care worker physically renders services for at least ninety-six (96) hours in a month; otherwise, the benefit shall be prorated] **PROVIDED, FURTHER, THAT THE DEPARTMENT OF HEALTH SHALL, IN COORDINATION WITH THE DEPARTMENT OF LABOR AND EMPLOYMENT AND IN CONSULTATION WITH HEALTH CARE WORKERS AND OTHER STAKEHOLDERS, CONDUCT A PERIODIC REVIEW OF THE HEA AND, WHEN NECESSARY, ADJUST THE AMOUNT THEREOF: PROVIDED, FINALLY, THAT IN NO CASE SHALL THE REVIEWED AMOUNT BE LOWER THAN THE EXISTING RATES.**

X X X

- (c) Full PhilHealth coverage for direct health care costs of hospitalized health care and non-health care workers due to COVID-19.

For future national public health emergencies, PhilHealth coverage for direct health care costs of hospitalized health care and non-health care workers shall be subject to [fund availability and] the Health Technology Council (HTAC) assessment and recommendation.

- (d) **FREE** [R]regular testing of health care and non-health care workers, **AT LEAST FOURTEEN (14) DAYS OR** as often as necessary, which shall be fully covered by the [PhilHealth]**EMPLOYER.**

SEC. 3. *Exemption from Income Taxation of Benefits under the Public Health Emergency Benefits and Allowances for Health Care Workers Act.* – A new Section 6 shall be inserted after Section 5 of RA 11712. The succeeding Sections shall be renumbered accordingly.

SECTION 6. EXEMPTION FROM INCOME TAXATION OF BENEFITS UNDER THIS ACT. – ALL AMOUNTS GRANTED TO HEALTH CARE WORKERS UNDER THIS ACT SHALL NOT BE INCLUDED IN THE COMPUTATION OF GROSS INCOME AND SHALL BE EXEMPT FROM INCOME TAXATION.

SEC. 4. Section 9 of RA 11712 shall be amended as follows:

SEC. [9]10 Appropriations. – THE AMOUNT OF FOUR HUNDRED FIFTY BILLION PESOS (P450,000,000,000.00) FOR FISCAL YEAR 2022 IS HEREBY APPROPRIATED FOR THE PAYMENT OF COVID-19 BENEFITS FOR ALL HEALTH WORKERS COVERED UNDER THIS ACT. x x x Provided, That unreleased appropriations and unobligated allotments for [infrastructure and] social [assistance projects] **SERVICES** shall not be discontinued, reprogrammed, reallocated, or realigned for the above purpose. [Any programs, activities or projects (P/A/P) declared as savings for this purpose may be revived and proposed for funding in the subsequent GAAs, as necessary.]

The DBM shall release the funds for the payment of the benefits and allowances consistent with this Act.

SEC. 5. Separability Clause. – If, for any reason or reasons, any part or provision of this Act shall be declared as unconstitutional or invalid, the other parts or provisions hereof which are not affected thereby shall continue to be in full force and effect.

SEC. 6. Repealing Clause. – All provisions of existing laws, orders, rules and regulations or parts which are in conflict or inconsistent with the provisions of this Act are hereby repealed, amended or modified accordingly.

SEC. 7. Effectivity Clause. – This Act shall take effect immediately upon its publication in the Official Gazette or in at least two (2) newspapers of general circulation in the Philippines.

Approved.