

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

NINETEENTH CONGRESS
Second Regular Session

HOUSE BILL No. 9568



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
AMENDING REPUBLIC ACT 7305, OTHERWISE KNOWN AS THE MAGNA
CARTA OF PUBLIC HEALTH WORKERS, AND FOR OTHER PURPOSES

EXPLANATORY NOTE

Article II Section 15 of the 1987 Philippine Constitution declared that it is the policy of the State to protect and promote the right to health of the people and instill health consciousness among them. Furthermore, the State is mandated to protect the rights of workers, including health workers, and promote their welfare. The rights, which are supposedly guaranteed by the State, includes the workers' right to self-organization, collective bargaining and negotiations, peaceful concerted activities, including the right to strike, security of tenure, humane conditions of work, and a living wage.

In 1992, the Philippine government enacted Republic Act 7305 or the Magna Carta of Public Health Workers (a) to promote and improve the social and economic well-being of the health workers, their living and working conditions and terms of employment; (b) to develop their skills and capabilities in order that they will be more responsive and better equipped to deliver health projects and programs; and (c) to encourage those with proper qualifications and excellent abilities to join and remain in government service.

The Department of Health (DOH) recognizes that "health human resource is the main driver of the health care system." However, despite such recognition, the rights and welfare of our health workers are often neglected. In fact, in its 2021 Field Health

Services Information System (FHSIS), data shows that there is a severe understaffing in our public health institutions. There are only 310,008 public health workers, wherein majority were hired by local government units (LGUs), serving the needs of the whole public health system in the Philippines. The breakdown is as follows:

	Number of public health workers	Per Population Ratio
Physicians	4,046	27,236
Dentists	1,993	55,293
Nurses	22,713	4,852
Midwives	21,561	5,111
Nutritionists	681	161,819
Medical Technologists	3,153	34,950
Sanitary Engineers	55	2,003,612
Sanitary Inspectors	2,752	40,043

Meanwhile, based on its data submission during the 2023 General Appropriations Bill deliberations, the Department of Health (DOH) estimates that there are 819,099 health workers as of December 2021. The majority of which are either working in other fields outside of health practice or overseas. Only 309,888 practicing health professionals in both public and private institutions, wherein 40,850 are physicians, 175,900 are nurses and 57,108 are midwives. This translates to only 2.51 physicians, nurses and midwives per 1,000 population¹ — very far from the internationally set threshold of 4.45 per 1,000.²

The lack of and the lack of care of health workers became more apparent during the COVID-19 pandemic. The heroes amid the health crisis are treated like slaves. Many of them are forced to use improvised personal protective equipment (PPE) using plastic bags due to lack thereof. They are forced to serve way beyond the safe working hours and under inhumane working conditions. For several instances, they called for “timeouts” to revise, rethink and improve its pandemic response as the health system is being overwhelmed with the surging COVID-19 and non-COVID cases. Despite all these sacrifices, their salaries and wages they receive remain incomparable to other countries. Worse, the payment of their pandemic benefits are yet to be completed.

As of September 2022, DOH Officer-in-Charge Maria Rosario Vergeire said that the Philippines lacks 106,000 nurses in both public and private facilities and hospitals.

¹ Based the projected Philippine population (110,198,654) as used under the 2021 FHSIS of the DOH

² Global strategy on human resources for health: Workforce 2030. *World Health Organization*, 2016. <https://apps.who.int/iris/bitstream/handle/10665/250368/9789241511131-eng.pdf>

There is a shortage of doctors, pharmacists, radiologic technologists, medical technologists, occupational therapists, physical therapists, midwives, and dentists.³ In March 2023, the ‘shortage’ was further increased to more than 350,000 nurses.⁴

Furthermore, the Philippine Overseas Employment Administration (POEA), through Governing Board Resolution No. 09, s. 2020, even imposed a ban on Filipino health workers to go overseas. It suspended the deployment of the following “until the national state of emergency is lifted and until COVID-19-related travel restrictions are lifted at the destination countries”: medical doctor/physician, nurse, microbiologist, molecular biologist, medical technologist, clinical analyst, respiratory therapist, pharmacist, laboratory technician, X-ray/radiologic technician, nursing assistant/nursing aid, operator of medical equipment, supervisor of health services and personal care, and repairman of medial-hospital equipment. It added that in 2019, there is already a shortage of 290,000 health workers in the country and an average annual migration of 13,000 health care professionals aggravating the deficiency. Due to public opposition, the Inter-Agency Task Force for the Management of Emerging Infectious Diseases, through Resolution No. 23, s. 2020, exempted medical and allied medical health care professionals with perfected and signed overseas employment contracts from the ban.

In 2020, the DOH called for medical professionals to join the government’s pandemic response. In one of their volunteer programs, the agency offered to the medical professionals free PPE, food and accommodation, and a P500 daily allowance if they volunteer to be assigned in the three designated COVID-19 hospitals: Lung Center, Philippine General Hospital or Dr. Jose N. Rodriguez Hospital. It is not only an insult to our health professionals to be given an allowance lower than the minimum wage in the National Capital Region, it is a testament on how low the Philippine government gives importance to our health workers.⁵

Ironically, despite all these public pronouncements, department order and deployment ban, contractualization and lay-off of public health workers are prevalent on the ground. Furthermore, none of these “solutions” actually address the main cause of migration of health workers. While other countries are aggressively and actively recruiting Filipino health workers through better salaries and benefits, the Philippine government maintains the current dismal state of our health workers – underpaid and overworked.

³ Ombay, Gissele. “DOH: Philippine hospitals, private and public, need 106,000 nurses.” *GMA News Online*, 29 September 2022. <https://www.gmanetwork.com/news/topstories/nation/846445/doh-philippine-hospitals-private-and-public-need-106-000-nurses/story/>

⁴ Callas, Willie. “PNA urges DOH to act and stop brain drain in nursing.” *Manila Standard*, 3 March 2023. <https://manilastandard.net/news/314310576/pna-urges-doh-to-act-and-stop-brain-drain-in-nursing.html>

⁵ “DOH calls on volunteer health professionals in fight vs COVID-19 with P500 daily allowance.” *PhilStar*, 27 March 2020. <https://www.philstar.com/headlines/2020/03/27/2003837/doh-calls-volunteer-health-professionals-fight-vs-covid-19-p500-daily-allowance>

Instead of solving the alleged “shortage of health workers,” the chronic and severe understaffing in our public health institutions, and numerous vacant plantilla positions, the DOH resorts to contract-out the services of our health workers through different schemes and programs like National Health Workforce Support System (NHWSS), formerly known as the Human Resources for Health Deployment Program (2017-2019). From 2017 to 2021, the DOH deployed an average of 27,500 health workers to augment the health workforce in priority areas. In 2021, the DOH deployed 23,856 health workers, mostly nurses, to achieve 17 health workers per 10,000 population ratio.⁶

The policy of exporting health workers continues to plague our health system. In fact in 2022, the overseas deployment cap of nurses was increased to 7,000. On 15 February 2022, POEA deputy administrator Bong Plan alleged that the reason for increasing the deployment cap is due to the decreasing number of COVID-19 infections in the country resulting in low demand for nurses.

From 5,000, the Department of Labor and Employment (DOLE) raised the deployment cap to 7,000 in December 2021.⁷ The DOH said that the 7,000 cap is set by the DOLE without consultation with the DOH. The DOH complained that the migration of health workers is one of its problems and sought to discuss with the Department of Migrant Workers and the DOLE.⁸ However, in 2022, it was further increased to 7,500.⁹

While espousing nationalist ideals, the dual-faced government pushes our workers abroad and shamelessly frames them as if they don’t want to serve their country. It is outright insincere and insensitive to the plight of our health workers and the health needs of the Filipino people for the government to call for health workers to serve in our country while promoting and continuing its labor export policy, and disregarding the main causes of migration.

The compensation currently received by health workers in the Philippines is so low compared to the other countries. Under RA 11466 or the Salary Standardization Law of 2019 (SSL V), the minimum salary of government employees, including public health workers, is pegged at ₱13,000 per month and even lower if working in various local government units. Meanwhile, based on the 2020 Occupational Wages Survey of the Philippine Statistics Authority, the average salary of private health workers goes as low as ₱12,321.

⁶ “2021 DOH Annual Report”. *Department of Health*, 2022. <https://doh.gov.ph/sites/default/files/publications/DOH-2021-Annual-Report-as-of-November-13-2022.pdf>

⁷ “Lifting of 7,000 deployment cap on health workers urged.” *Inquirer.net*, 31 January 2022. <https://newsinfo.inquirer.net/1547440/lifting-of-7k-deployment-cap-on-health-workers-urged>

⁸ Ombay, Giselle. “Vergeire: DOLE, not DOH, sets cap on health workers’ deployment abroad.” *GMA News Online*, 3 October 2022. <https://www.gmanetwork.com/news/topstories/nation/846823/vergeire-dole-not-doh-sets-cap-on-health-workers-deployment-abroad/story/>

⁹ Patinio, Ferdinand. “7.5K deployment cap on health workers not yet reached: POEA.” *Philippine News Agency*, 16 June 2022. <https://www.pna.gov.ph/articles/1176831>

Section 19 (b) of RA 7305 or the Magna Carta of Public Health Workers mandates that there shall be equality in salary scale of public health workers and that the National Government must subsidize the amount necessary to pay the difference between that received by nationality-paid and locally-paid health workers of equivalent positions. However, this is not being implemented on the ground. The salaries of public health workers working in municipalities and 2nd to 6th class provinces/cities remain subject to the salary schedule as provided under Section 7 of SSL V.

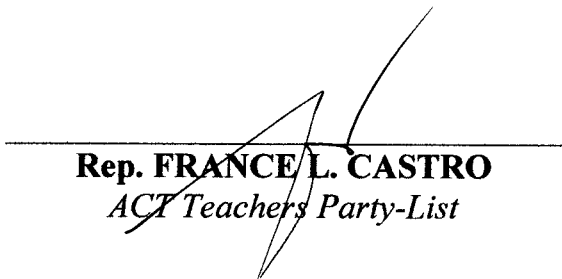
Meanwhile, Section 32 of RA 9173 or the Philippine Nursing Act of 2002, was only upheld by the Supreme Court in 2019. For seventeen years, public health nurses were provided salaries below what was lawfully and rightfully due to them. Worse, up until now there are reports that there are nurses being compensated below SG 15. In fact, the Department of Budget and Management (DBM), through Budget Circular (BC) No. 2020-4, as amended by BC No. 2021-2, provided exemptions contrary to law which deprives various public health nurses from receiving the mandated minimum base pay.

The government is wary of increasing the salaries and benefits of its workers, including health workers, in the public sector because it may cause migration of workers in the private sector to the public sector. This should not be the case. The public sector should serve as a standard and model respecting the rights and welfare of its workers.

Even the benefits due to health workers who served amid the COVID-19 pandemic, such as the special risk allowance (SRA), active duty hazard pay (ADHP) One COVID-19 Allowance (OCA), Health Emergency Allowance (HEA) and meals, accommodation and transportation allowance (MAT), remains yet to be fully disbursed. There are cases wherein the health worker already died due to COVID-19 but still not being paid by the DOH. In September 2022, during the deliberations of the General Appropriations Bill FY 2023, the DOH and the DBM admitted that there is an unfunded ₱65 billion to pay the arrears to health workers from 2021 to 2022.

The health workers are risking their lives and safety to provide the health needs of the Filipino people. As the backbone of the health system, the Philippine government should ensure that the rights and welfare of the health workers are protected. Along with the pursuit of a free, comprehensive and progressive national public health system, the Philippines should also provide just salaries, sufficient benefits and humane working conditions to our health workers.

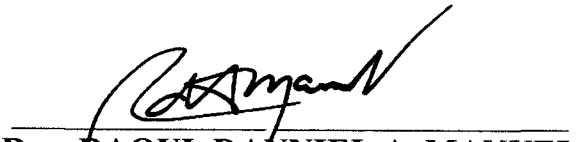
In this light, the passage of this Bill is earnestly sought.



Rep. FRANCE L. CASTRO
ACT Teachers Party-List



Rep. ARLENE D. BROSAS
GABRIELA Women's Party



Rep. RAOUL DANNIEL A. MANUEL
KABATAAN Party-List

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AN ACT
AMENDING REPUBLIC ACT 7305, OTHERWISE KNOWN AS THE MAGNA
CARTA OF PUBLIC HEALTH WORKERS, AND FOR OTHER PURPOSES

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

SEC. 1. Section 3 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 3. *Definition.* — For purposes of this Act, "health workers" shall mean all persons who are engaged in health and health-related work, and all persons employed in all hospitals, sanitarium, health infirmaries, health centers, rural health units, barangay health stations, clinics, **HEALTH OFFICES** and other health-related establishments owned and operated by the Government or its political subdivisions with original charters and shall include medical, allied health professionals, administrative and support personnel employed **IN NATIONAL GOVERNMENT AGENCIES (NGAs), INCLUDING STATE UNIVERSITIES AND COLLEGES (SUCs), GOVERNMENT-OWNED AND -CONTROLLED CORPORATIONS (GOCCs), GOVERNMENT FINANCIAL INSTITUTIONS (GFIs), LOCAL GOVERNMENT UNITS (LGUs) AND ALL OTHER GOVERNMENT INSTRUMENTALITIES** regardless of their employment status; **WHETHER HOLDING PERMANENT OR TEMPORARY STATUS; CASUAL OR CONTRACTUAL; JOB ORDERS, CONTRACT OF SERVICE, RENDERING SERVICES ON FULL TIME OR PART TIME BASIS; AND WHOSE POSITIONS ARE EITHER COVERED OR NOT BY**

REPUBLIC ACT 6758 "COMPENSATION AND POSITION CLASSIFICATION ACT OF 1989", AS AMENDED."

SEC. 2. Section 8 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 8. *Security of Tenure.* — **ALL** [In case of regular employment of] public health workers[,] **SHALL BE GRANTED SECURITY OF TENURE AND THEY** [their services] shall not be **SEPARATED OR** terminated **FROM THE POSITIONS THEY ARE CURRENTLY HOLDING** except for **JUST** cause provided by law and after due process. **ALL POSITIONS AFFECTED BY THIS ACT CURRENTLY HELD BY THE COVERED EMPLOYEES AND WORKERS SHALL BE DEEMED NECESSARY AND DESIRABLE FOR THE EFFICIENT OPERATION OF THE GOVERNMENT, INCLUDING ALL NATIONAL GOVERNMENT AGENCIES, LGUS, SUCS, GOCCS AND ALL OTHER GOVERNMENT INSTRUMENTALITIES, AND, SHALL NOT BE CONSIDERED AS COTERMINOUS WITH THE INCUMBENT:** *Provided,* That if a public health worker is found by the Civil Service Commission to be unjustly dismissed from work, he/she shall be entitled to reinstatement without loss of seniority rights, to his/her back wages with twelve percent (12%) interest computed from the time his/her compensation was withheld from him/her up to the time of reinstatement, **AND THE PAYMENT OF ATTORNEY'S FEES.**

NOTHING IN THIS ACT SHALL PREVENT THE CREATION OF SUFFICIENT NUMBER OF PERSONNEL REQUIRED BY THE AGENCY OR INSTRUMENTALITY FOR THIS PURPOSE. ALL AGENCIES AND INSTRUMENTALITIES SHALL SUBMIT TO THE DEPARTMENT OF BUDGET AND MANAGEMENT (DBM), AS PART OF THEIR ANNUAL BUDGET PROPOSALS, THE NUMBER OF POSITIONS OCCUPIED BY COVERED EMPLOYEES AND WORKERS IN THIS ACT WHICH ARE REQUIRED TO BE CREATED."

SEC. 3. Section 9 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 9. *Discrimination Prohibited.* — A public health worker shall not be discriminated against with regard to gender, **AGE**, civil status, **DISABILITY**, creed, religious or political beliefs and ethnic groupings in the exercise of his/her profession."

SEC. 4. Section 10 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 10. *No Understaffing/Overloading of Health Staff.* — There shall be no understaffing or overloading of Public Health Workers. The ratio of health staff to patient load shall be such as to reasonably effect a sustained delivery of

quality health care at all times without overworking the public health worker and over extending his/her duty and service.

THERE SHALL BE A NURSE-TO-PATIENT RATIO OF 1:8 IN GENERAL WARDS AND 1:1 IN INTENSIVE CARE UNITS.

IN THE COMMUNITY LEVEL,

- i. NURSE-TO-POPULATION RATIO OF 1:20,000;**
- ii. MIDWIFE-TO-POPULATION: 1:5,000;**
- iii. DENTIST-TO-POPULATION: 1:50,000;**
- iv. MEDICAL PHYSICIAN-TO-POPULATION OF 1:20,000; AND**
- v. SANITARY INSPECTOR-TO-POPULATION OF 1:20,000.**

THE DEPARTMENT OF HEALTH SHALL PERIODICALLY UPDATE THE SAFE HEALTH WORKER-TO-PATIENT/POPULATION RATIO.

Health students and apprentices shall be allowed only for purposes of training and education.

In line with the above policy, substitute officers or employees shall be provided in place of officers or employees who are on leave for over three (3) months. Likewise, the Secretary of Health or the proper government official shall assign a medico-legal officer in every province.

In places where there is no such medico-legal officer, rural physicians who are required to render medico-legal services shall be entitled to additional honorarium and allowances."

SEC. 5. Section 13 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 13. *Duties and Obligations.* — The public health worker shall:

- a) discharge his/her duty humanely with conscience and dignity;
- b) perform his/her duty with utmost respect for life; and
- c) exercise his/her functions without consideration to race, **AGE**, gender, religion, nationality, party politics, social standing or capacity to pay."

SEC. 6. Section 15 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 15. *Normal Hours of Work.* — The normal hours of work of any public health worker shall not exceed eight (8) hours a day, **INCLUSIVE OF A**

MEAL BREAK, or forty (40) hours a week. WORKING BEYOND 8 HOURS A DAY SHALL MERIT A MONETIZED OVERTIME PAY.

Hours worked shall include: a) all the time during which a public health worker is required to be on active duty or to be at a prescribed workplace; and b) all the time during which a public health worker is suffered or permitted to work. *Provided*, That, the time when a public health worker is placed on "On Call" status shall not be considered as hours worked but shall entitle the public health worker to an "On Call" pay equivalent to fifty percent (50%) of his/her regular wage. "On Call" status refers to a condition when public health workers are called upon to respond to urgent or immediate need for health/medical assistance or relief work during emergencies such that he/she cannot devote the time for his/her own use."

SEC. 7. Section 16 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 16. *Overtime Work.* — Where the exigencies of the service so require, any public health worker may be required to render service beyond the normal eight (8) hours a day; **PROVIDED, THAT HE/SHE IS MENTALLY AND PHYSICALLY FIT DURING THE TIME THAT THE HEALTH WORKER IS REQUIRED TO RENDER DUTY EXTENSION OF 4 HOURS AND ABOVE, THE HEALTH WORKER SHALL BE PROVIDED WITH A MEAL IRRESPECTIVE OF HIS/HER SUBSISTENCE ALLOWANCE.** In such a case, the workers shall be paid an additional compensation [in accordance with existing laws and prevailing practices] **OF 25% BASE RATE DURING NORMAL DAYS, 50% OF BASE RATE ON REST DAY AND 50% OF BASE RATE DURING HOLIDAY BASED ON SECTION 15."**

SEC. 8. Section 18 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 18. *Night Shift Differential.* — (a) Every public health worker shall be paid a night shift differential of [ten percent (10%)] **TWENTY PERCENT (20 %), PURSUANT TO REPUBLIC ACT 11701** of his/her regular wage for each hour of work performed during the night-shifts [customarily adopted by hospitals]. **NIGHT SHIFTS SHALL BE DEFINED AS DUTY HOURS BETWEEN SIX (6) O'CLOCK IN THE EVENING TO SIX (6) O'CLOCK IN THE MORNING.**

(b) Every health worker required to work on the period covered after his/her regular schedule shall be entitled to his/her regular wage plus the regular overtime rate and an additional amount of [ten percent (10%)] **TWENTY PERCENT (20%)** of such overtime rate for each hour of work performance between [ten o'clock (10)] **SIX (6) o'clock in the evening to six (6) o'clock in the morning."**

SEC. 9. Section 19 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 19. *Salaries.* — [In the determination of the salary scale of public health workers, the provisions of Republic Act No. 6758 shall govern, except that the benchmark for Rural Health Physicians shall be upgraded to Grade 24.] **THE ENTRY SALARY OF SALARY GRADE (SG) 1 PUBLIC HEALTH WORKERS SHALL BE THIRTY-THREE THOUSAND PESOS (P33,000.00) AND THE ENTRY SALARY OF NURSES SHALL BE FIFTY THOUSAND PESOS (P50,000.00): PROVIDED, THAT SALARIES SHALL BE INCREASED EVERY THREE (3) YEARS.**

a) Salary Scale — Salary scales of public health workers shall be provided progression: *Provided*, That the progression from the minimum of the salary scale shall not extend over a period of ten (10) years: *Provided, further*, That the efficiency rating of the public health worker concerned is at least satisfactory.

b) Equality in Salary Scale — The salary scales of public health workers whose salaries are appropriated by a city, municipality, district, or provincial government shall not be less than those provided for public health workers of the National Government: *Provided*, That the National Government shall subsidize the amount necessary to pay the difference between that received by nationally-paid and locally-paid health workers of equivalent positions.

c) STEP INCREMENTS EVERY THREE YEARS SHALL BE IMPLEMENTED TO ALL PUBLIC HEALTH WORKERS.

[c] d) Salaries to be Paid in Legal Tender — Salaries of public health workers shall be paid in legal tender of the Philippines or the equivalent in checks or treasury warrants: *Provided, however*, That such checks or treasury warrants shall be convertible to cash in any national, provincial, city, or municipal treasurers' office or any banking institution operating under the laws of the Republic of the Philippines.

[d] e) Deductions Prohibited — No person shall make any deduction whatsoever from the salaries of public health workers except under specific provisions of law authorizing such deductions: *Provided, however*, That upon written authority executed by the public health workers concerned, a) lawful dues or fees owing to any organization/association where such public health worker is an officer or member, and b) premiums properly due all insurance policies, retirement and [medicare] **PHILHEALTH** shall be considered deductible."

SEC. 10. Section 20 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 20. *Additional Compensation.* — Notwithstanding Section 12 of Republic Act No. 6758, public health workers shall receive the following allowances: hazard allowance, subsistence allowance, longevity pay, **STEP INCREMENTS, RICE PROVISION (50 KILOS PER MONTH IN GOOD QUALITY)**, laundry allowance and remote assignment allowance."

SEC. 11. Section 21 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 21. *Hazard Allowance.* — Public health workers in hospitals, sanatoria, rural health units, main health centers, health infirmaries, barangay health stations, clinics and other health-related establishments located in difficult areas, strife-torn or embattled areas, distressed or isolated stations, prisons camps, mental hospitals, radiation-exposed clinics, laboratories or disease-infested areas or in areas declared under state of calamity or emergency for the duration thereof which expose them to greater danger, contagion, radiation, volcanic activity/eruption, occupational risks or perils to life as determined by the Secretary of Health or the Head of the unit with the approval of the Secretary of Health, shall be compensated hazard allowances equivalent to at least [twenty-five (25%) of the monthly basic salary of health workers receiving salary grade 19 and below, and five percent (5%) for health workers with salary grade 20 and above] **TEN THOUSAND PESOS (P10,000.00) PER MONTH AND WILL BE READJUSTED PERIODICALLY, TAKING INTO ACCOUNT THE PRESENT CONSUMER PRICE INDEX AS PUBLISHED BY THE PHILIPPINE STATISTICS AUTHORITY.**"

SEC. 12. Section 22 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 22. *Subsistence Allowance.* — Public health workers who are required to render service within the premises of hospitals, sanatoria, health infirmaries, main health centers, rural health units and barangay health stations, or clinics, and other health-related establishments in order to make their services available at any and all times, shall be entitled to full subsistence allowance of three (3) meals which may be computed **FIVE HUNDRED PESOS (P500.00) PER DAY AND WILL BE READJUSTED PERIODICALLY** in accordance with prevailing circumstances, **LIKE INFLATION**, as determined by the Secretary of Health in consultation with the Management-Health Workers' Consultative Councils, as established under Section 33 of this Act: *Provided*, That representation and travel allowance shall be given to rural health physicians as enjoyed by municipal agriculturists, municipal planning and development officers and budget officers."

SEC. 13. Section 23 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 23. *Longevity Pay.* — A monthly longevity pay equivalent to [five percent (5%)] **FIFTEEN PERCENT (15%)** of the monthly basic pay shall be

paid to a health worker for every five (5) years of continuous, efficient and meritorious services rendered as certified by the chief of office concerned, commencing with the service after the approval of this Act."

SEC. 14. Section 24 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 24. *Laundry Allowance.* — All public health workers who are required to wear uniforms regularly shall be entitled to laundry allowance equivalent to [One hundred twenty five pesos (₱125.00)] **ONE THOUSAND PESOS (₱1,000.00)** per month: Provided, that this rate shall be reviewed periodically and increased accordingly by the Secretary of Health in consultation with the [appropriate government agencies] **NATIONAL MANAGEMENT-HEALTH WORKERS CONSULTATIVE COUNCIL** taking into account existing laws and prevailing practices."

SEC. 15. Section 25 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 25. *Remote Assignment Allowance.* — Doctors, dentist, nurses and midwives who accept assignments such as in remote areas or isolated stations, which for reasons of far distance or hard accessibility, such positions had not been filled for the last two (2) years prior to the approval for this Act, shall be entitled to an incentive bonus in the form of remote assignment allowance equivalent to fifty percent (50%) of their basic pay, and shall be entitled to reimbursement of the cost of reasonable transportation to and from such remote post or station, upon assuming or leaving such position and during official trips. **THERE SHALL BE A LIFE INSURANCE AMOUNTING TO ONE MILLION PESOS (₱1,000,000.00) PROVIDED BY THE AGENCY IN CASES OF DISABILITY AND DEATH IN LINE OF DUTY.**

In addition to the above, such doctors, dentists, nurses, and midwives mentioned in the preceding paragraph shall be given priority in promotion or assignment to better areas. Their tour of duties in the remote areas shall not exceed two (2) years, except when there are no positions for their transfer or they prefer to stay in such post in excess of two (2) years."

SEC. 16. Section 26 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 26. *Housing.* — All public health workers who are on tour of duty and those who, because of unavoidable circumstances are forced to stay in the hospital, sanatoria or health infirmary premises, shall be entitled to free living quarters within the hospitals, sanitarium or health infirmary or if such quarters are not available, shall receive [quarters] **ACCOMMODATION** allowance as may be determined by the Secretary of Health and other appropriate government agencies concerned; *Provided*, That this rate shall be reviewed periodically and increased accordingly by the Secretary of Health in consultation with the appropriate government agencies concerned.

For purposes of this Section, the Department of Health is authorized to develop housing projects in its own land, not otherwise devoted for other uses, for public health workers in coordination with appropriate government agencies."

SEC. 17. Section 27 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 27. *Medical Examination.* — Compulsory medical examination, **DENTAL AND OTHER DIAGNOSTIC PROCEDURES** shall be provided free of charge to all public health workers before entering the service in the Government or its subdivisions and shall be repeated once a year during the tenure of employment of all public health workers; *Provided*, That where medical examination shows that medical treatment and/or hospitalization is necessary for those already in the government service, the **OUTPATIENT treatment and/or hospitalization including medicines, VACCINES, RADIOLOGIC AND DIAGNOSTIC PROCEDURES, ONCOLOGIC TREATMENT AND DIALYSIS** shall be provided free either in a government or a private hospital by the government entity paying the salary of the public health worker; *Provided, further*, That the cost of such medical examination and treatment shall be included as automatic appropriation in said entity's annual budget. **IN CASE THAT THE NECESSARY EXAM/S IS/ARE NOT AVAILABLE IN THE SAID HOSPITAL, A REFERRAL NETWORK SHALL BE UTILIZED AND THE MOTHER AGENCY WILL SHOULDER THE EXPENSES.**"

SEC. 18. Section 28 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 28. *Compensation for Injuries, DISEASES AND DEATH.* — Public health workers shall be protected against the consequences of employment injuries **AND DEATH** in accordance with existing laws. Injuries, **DISEASES AND DEATH** incurred while doing overtime work **OR WHILE TRAVELING TO AND FROM WORK** shall be presumed work-connected."

SEC. 19. Section 29 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 29. *Leave Benefits for Public Health Workers.* — Public health workers are entitled to such vacation and sick leaves as provided by existing laws and prevailing practices; *Provided*, That in addition to the leave privilege now enjoyed by public health workers, women health workers are entitled to such maternity leaves provided by existing laws and prevailing practices: *Provided, further*, That upon separation of the public health workers from service, they shall be entitled to all accumulated leave credits with pay. **ALL MANDATED BENEFITS SHALL NOT BE TAKEN AGAINST THE EMPLOYEES' PERFORMANCE NOR SHALL NOT IN ANY WAY DIMINISH BENEFITS.**"

SEC. 20. Section 30 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 30. *Highest Basic Salary Upon Retirement.* — Three (3) months prior to **THE OPTIONAL** and compulsory retirement, the public health worker shall automatically be granted one (1) salary range or grade higher than his/her retirement benefit thereafter, computed on the basis of his/her highest salary, **AND TWO THOUSAND PESOS (₱2,000.00) PER YEAR AS GRATUITY INCENTIVE ON TOP OF THE BASIC SALARY:** *Provided,* That he/she has reached the age and fulfilled service requirements under existing laws. **PROVIDED, FURTHER, THAT THE RETIREMENT BENEFIT SHALL BE TAX FREE."**

SEC. 21. Section 31 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 31. *Right to Self-Organization.* — Public health workers shall have the right to freely form, join or assist organizations or unions for purposes not contrary to law in order to defend and protect their mutual interests and to obtain redress of their grievances through peaceful concerted activities **INCLUDING THE RIGHT TO STRIKE."**

SEC. 22. Section 33 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 33. *Consultation With Health Workers' Organizations.* — In the formulation of national policies governing the social security **AND PROTECTION** of public health workers, professionals and health workers' organizations or unions as well as other appropriate government agencies concerned shall be consulted by the Secretary of Health. For this purpose, Management-Health Workers' Consultative Councils for national, regional and other appropriate levels shall be established and operationalized."

SEC. 23. Section 34 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 34. *Health Human Resource Development/Management Study.* — The Department of Health shall conduct a periodic health human resource development/management study into, among others, the following areas:

- a) adequacy of facilities and supplies to render quality health care to patients and other client population;
- b) opportunity for health workers to grow and develop their potentials and experience a sense of worth and dignity in their work. Public health workers who undertake post-graduate studies in a degree course shall be entitled to an upgrading in their position or raise in pay: *Provided,* That it shall not be more often every two (2) years;

- c) mechanism for democratic consultation in government health institutions;
- d) staffing patterns and standards of health care to ensure that the people receive quality care. Existing recommendations on staffing and standards of health care shall be immediately and strictly enforced;
- e) ways and means of enabling the rank-and-file workers to avail of educational opportunities for personal growth and development;
- f) upgrading of working conditions, reclassification of positions and salaries of public health workers to correct disparity *vis-à-vis* other professions such that position requiring longer study be upgraded and given corresponding pay scale: **PROVIDED, THAT THE DOH SHALL CONDUCT A STUDY IN ORDER TO RECONCILE AND INTEGRATE THE OVERLAPPING ISSUES IN THE ACTUAL PRACTICE OF THE DIFFERENT PROFESSIONS IN THE PUBLIC SECTOR AND RECOMMEND, IF NECESSARY, THE CORRESPONDING AMENDMENTS TO THE DIFFERENT LAWS AND IMPLEMENTING RULES OF THE DIFFERENT HEALTH DISCIPLINES;** and
- g) assessment of the national policy on exportation of skilled health human resource to focus on how these resources could instead be utilized productively for the country's needs.

There is hereby created a Congressional Commission on Health (HEALTHCOM) to review and assess health human resource development, particularly on continuing professional education and training and the other areas described above. The Commission shall be composed of five (5) members of the House of Representatives and five (5) members of the Senate. It shall be co-chaired by the chairpersons of the Committee on Health of both houses. It shall render a report and recommendation to Congress which shall be the basis for policy legislative in the field of health. Such a congressional review shall be undertaken once every five (5) years."

SEC. 24. Amend Section 36 of Republic Act 7305:

SEC. 36. *Prohibition Against Double Recovery of Benefits.* — Whenever other laws provided for the same benefits covered by this Act, the public health worker shall have the option to choose which benefits will be paid to him/her. However, in the event that the benefits chosen are less than that provided under this Act, the worker shall be paid only the difference. **PROVIDED, THAT SPECIAL BENEFITS, SUCH AS BUT NOT LIMITED TO BENEFITS GIVEN DURING THE PANDEMICS AND STATE OF HEALTH EMERGENCY, SHALL BE ENJOYED BY THE HEALTH WORKERS**

ON TOP OF THE BENEFITS UNDER THIS ACT AND OTHER EXISTING LAWS.

SEC. 25. Section 39 of Republic Act 7305 is hereby amended to read as follows:

"SEC. 39. *Penal Provision.* — Any person who shall willfully interfere with, restrain or coerce any public health worker in the exercise of his/her rights or shall in any manner commit any act in violation of any of the provisions of this Act, upon conviction, shall be punished by a fine of not less than [Twenty thousand pesos (P20,000.00)] **TWO HUNDRED THOUSAND PESOS (P200,000.00)** but not more than [Forty thousand pesos (P40,000.00)] **FIVE HUNDRED THOUSAND PESOS (P500,000.00)** or imprisonment of not less than [one (1) year)] six (6) years or both at the discretion of the court.

If the offender is a public official, the court, in addition to the penalties provided in the preceding paragraph, may impose the additional penalty of **PERPETUAL** disqualification from holding public office."

SEC. 26. A new Section 38 of Republic Act 7305 is hereby amended to read as follows:

SEC. 38. ON PROTECTION AND SAFETY OF HEALTH WORKERS. — THE STATE SHALL UPHOLD AND PROTECT THE RIGHTS OF HEALTH WORKERS AS PROVIDED BY LAW. THE STATE SHOULD STOP THE KILLINGS OF HEALTH WORKERS, PUNISH THOSE IN AUTHORITY OF RED TAGGING, OPPRESSION AND RAPE OF HEALTH WORKERS TO ENSURE THEIR PROTECTION AND SAFETY. THE STATE SHALL LEGAL ASSISTANCE FOR HEALTH WORKERS WHO ARE VICTIMS OF SUCH KILLINGS, RED TAGGING, OPPRESSION AND RAPE.

The subsequent Sections are hereby renumbered accordingly.

SEC. 27. *Implementing Rules and Regulations.* — Within ninety (90) days from the effectivity of this Act, the Secretary of Health, after consultation with appropriate agencies of the Government, professionals' and health workers' organizations, unions, and other stakeholders, shall promulgate the necessary rules and regulations for the effective implementation of this Act.

SEC. 28. *Appropriations.* The initial funding required for the implementation of this Act shall be sourced from the budget of the agencies concerned. The funds needed in subsequent years shall be included in the General Appropriations Act.

SEC. 29. *Separability Clause.* — Should any provision herein be declared unconstitutional, the remaining provisions not otherwise affected shall be valid and subsisting.

SEC. 30. *Repealing Clause.* — All laws, decrees, orders, rules and regulations or other issuances or parts thereof inconsistent with the provisions of this Act are hereby repealed.

SEC. 32. *Effectivity Clause.* — This Act shall take effect within thirty (30) days after its publication in the Official Gazette or one (1) newspaper of general circulation.

Approved,