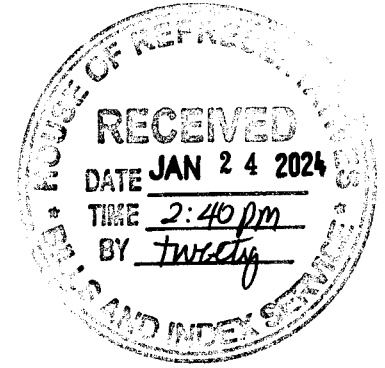


Republic of the Philippines
House of Representatives
Quezon City

NINETEENTH CONGRESS
Second Regular Session

HOUSE BILL NO. 9826



Introduced by BHW PARTYLIST REP. ANGELICA NATASHA A. CO

EXPLANATORY NOTE

With the enactment into law of the Republic Act No. 11223, otherwise known as the “Universal Health Care Act” (UHC Act) in February 2019, primary health care takes the forefront in ensuring the Filipino people’s right to health in keeping with the Philippines commitment to the International Alma-Ata Declaration and the Sustainable Development Goals.

Primary Health Care (PHC) refers to essential health care based on practical, scientifically sound, and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination (Alma-Ata Declaration VI - D).

Primary Care (PC) is first-contact, accessible, continued, comprehensive, and coordinated care. First-contact care is accessible at the time of need; ongoing care focuses on the long-term health of a person rather than the short duration of the disease; comprehensive care is a range of services appropriate to the common problems in the respective population and coordination is the role by which primary care acts to coordinate with other specialists that the patient may need. PC is a subset of PHC (WHO, n.d.).

To fully realize primary health care, however, critical policy reforms must be undertaken to enable the local government units to fully implement it by strengthening the necessary health governance mechanisms. Financing primary health care should also be addressed by lifting the limitation on personnel services provided in the R.A No. 7160, otherwise known as the Local Government Code, and by boosting local financing with clear local sources of funds in addition to the support they receive from the national government as stipulated in the UHC Act.

This bill mandates municipalities and cities to establish a comprehensive primary health care plan - - focusing on preventive and promotive care in their respective jurisdictions, with technical assistance from the DOH. It shall include the strengthening of human resources for health, including the Barangay Health Workers and Barangay Nutrition Scholars.

The municipal and city primary healthcare plans shall form part of developing province-wide and city-wide health systems and comprehensive health investment plans pursuant to the UHC Act.

Moreover, this bill seeks to encourage the establishment of local health enterprises and cooperatives by providing financial and technical support from local and national sources.

The immediate passage of this bill is earnestly sought.



REP. ANGELICA NATASHA A. CO

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HOUSE BILL NO. 9826

Introduced by BHW PARTYLIST REP. ANGELICA NATASHA A. CO

**AN ACT STRENGTHENING PRIMARY HEALTH CARE IN SUPPORT OF THE
UNIVERSAL HEALTH CARE ACT**

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

SECTION 1. Short Title. - This Act shall be known as the "Primary Health Care Enhancement "

SEC. 2. Statement of Policy. - The State shall protect and promote the right to health of the people and provide conditions for health empowerment, where each individual has access to information and services that will bring about health and well-being. The Primary Health Care Approach is recognized as the major strategy towards health empowerment, emphasizing the need to provide accessible and acceptable health services through participatory strategies such as health education, training of barangay health workers (BHW) and barangay nutrition scholars (BNS), community building and organizing.

To this end, this Act shall strengthen and institutionalize primary healthcare programs at the barangay level by providing and upgrading vital and essential health facilities, human resource development, and fiscal support.

SEC. 3. Definition. - As used in this Act:

(a) *Primary Health Care (PHC)* refers to essential health care based on practical, scientifically sound, and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation and at a cost that the community and country can afford to maintain at every stage of their development in the spirit of self-reliance and self-determination (Alma-Ata Declaration VI - D).

(b) *Primary Care (PC)* refers to first-contact, accessible, continued, comprehensive, and coordinated care. First-contact care is accessible at the time of need; ongoing care focuses on the long-term health of a person rather than the short duration of the disease; comprehensive care is a range of services appropriate to the common problems in the respective population

SEC. 4. City, Municipal, and Province-Wide Comprehensive Primary Healthcare Plan. - Every city, municipality, and province shall develop a Comprehensive Primary Healthcare Plan focusing on preventive and promotive primary healthcare, in accordance with the Universal Healthcare Act.

The plan shall include and ensure the availability of essential inputs and investments to realize the primary health care programs, plans, and activities. It shall ensure that comprehensive nutrition and oral health programs for pregnant women, mothers, and children as a priority, as well as comprehensive oral health. It shall likewise ensure that all RHUs are included in networks of primary care providers.

The Department of Health (DOH) shall formulate the necessary guidelines and provide technical assistance to the concerned LGUS.

SEC. 5. Representation in the Local Health Board and Health Care Provider Network. - The president of the municipal or city association of BHWs and BNS shall be a member of the municipal or city local health board. The Presidents of each component city and municipality of a province shall elect among themselves the BHW and BNS representatives to the provincial health board.

The BHWs and BNSs shall also form part of the Health Care Provider Network in the implementation of primary health care programs and services.

SEC. 6. Local Health Plan. - Local government units are hereby mandated to formulate their respective local health plans in harmony with the national health plan formulated by the DOH. The BHWs and BNS shall actively take part in the formulation, implementation, monitoring, and evaluation of the health plans insofar as primary health care programs, projects, and activities are concerned.

SEC. 7. Barangay Health Center. — There shall be at least one (1) barangay health center which shall have basic and essential facilities and provisions as prescribed by the DOH to effectively carry out primary health care programs and services in the barangay. The barangay health centers shall assist in disaster risk reduction and mitigation and nutrition programs and activities.

SEC. 8. Botika sa Barangay. - The DOH shall provide the guidelines for the establishment and Management of "Botika sa Barangay" programs and services. The DOH and the Food and Drug Administration (FDA) shall give appropriate training to BHWs, in consultation with relevant professional organizations and associations.

The BHWs shall assist in the Botika sa Barangay programs and services under the supervision of the city/municipal health officer.

SEC. 9. Education and Information Campaign — The DOH shall conduct an education and information campaign that would enhance the knowledge and skills of BHWs and BNSs on primary health care through various forms in major Philippine dialects including, but not limited to, online E-Learning and multimedia.

The DOH, in coordination with TESDA and other concerned agencies, shall also assist the LGUs in the development of education modules or materials to promote the collective

experiences and learnings of BHWs and BNSs on primary health care, as well as to promote traditional and complementary medicine.

The DOH shall also maintain an updated roster of registered and accredited BHWs and BNSs that is accessible to the general public.

SEC. 10. Funding. - Funds for the benefits and incentives of BHWs and BNSs and the implementation of local health programs, projects, and activities, shall be allocated from the following, on top of existing fund sources:

- 1) Ten percent (10%) of the national tax allocations of the LGUs;
- 2) Ten percent (10%) of the tobacco excise tax proceeds of tobacco-producing LGUs;
and
- 3) At least ten percent (10%) of the LGUs' incomes derived from local economic enterprises;

Provided, that the LGUs concerned shall first fulfill the benefits and incentives due for BHWs and BNSs in accordance with this Act. Provided further, that any expenditure by the LGUs for the benefits and incentives of BHWs and BNSs shall be exempt from the forty-five percent (45%) limit on allocation for personal services of LGUs in the case of first to third class LGUs, and fifty-five percent (55%) in the case of fourth class or lower class LGUs.

SEC.11. Penalty Clause - Any local government official concerned who violates any provision of this Act may be administratively charged in accordance with law.

SEC. 12. Rules and Regulation. - The DOH shall, in consultation with concerned government agencies and non-governmental organizations, formulate the rules and regulations necessary for proper implementation of this Act not later than one hundred eighty days (180) from its effectivity.

SEC. 13. Separability Clause. - If any provision of this Act is declared invalid, the remainder of any provision hereof not affected thereby shall remain in force and effect.

SEC. 14. Repealing Clause. - Republic Act No. 7883 is hereby repealed. All laws, decrees, executive orders, and other presidential issuances which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

SEC. 15. Effectivity. - This Act shall take effect fifteen days (15) after its publication in the Official Gazette or at least in two (2) national newspapers of general circulation.

Approved,