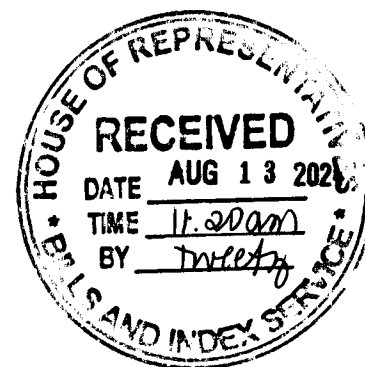




Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila



NINETEENTH CONGRESS

Third Regular Session

HOUSE BILL NO. 10749

Introduced by HON. BAMBI B. EMANO

AN ACT
AMENDING REPUBLIC ACT NO. 11223, OTHERWISE KNOWN AS THE
"UNIVERSAL HEALTH CARE ACT"

EXPLANATORY NOTE

Universal health care (UHC) is critical in achieving the Sustainable Development Goals (SDG), specifically, Goal No. 3 which aims to ensure healthy lives and promote well-being for all, at all ages. At the United Nations General Assembly High-Level Meeting on UHC in 2019, countries reaffirmed that health is a precondition for and an outcome and indicator of the social, economic, and environmental dimensions of sustainable development.

UHC coverage means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation, and palliative care across the life course.

While the Philippines has taken a great stride with the enactment of Republic Act No. 11223 or the Universal Health Care Act in December 2018 in keeping with its commitment to the SDGs, this bill aims to protect the Filipino people further from the financial consequences of paying for health services out of their own pockets. This would consequently reduce the risk of pushing them into poverty because the cost of needed services and treatments requires them to use up their life savings, sell assets, or borrow – destroying their futures and often those of their children.

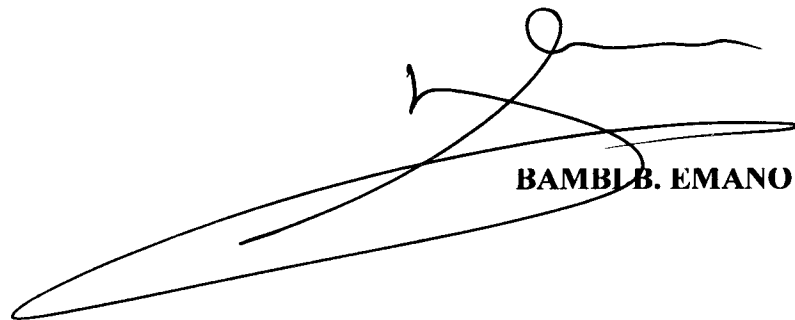
To this end, this bill seeks to adjust the premium contribution rates for migrant workers and self-earning individuals to a more manageable level based on the income floor to alleviate OFWs and other self-employed Filipinos from financial strain.

In light of our experience during the COVID-19 pandemic, this bill also proposes to grant the President of the Philippines the power to suspend the increase in PhilHealth premium payment rates in the event of a state of national emergency, public health emergency, or state of calamity. Moreover, this bill proposes to dispense with the stringent

requirements of the Health Technology and Assessment Council (HTAC) on safety and effectiveness in case of a pandemic or upon the declaration of a state of public health emergency. As we have experienced also during the pandemic, this proposed amendment to the existing law will facilitate swift action on the part of the government to take appropriate steps to acquire and distribute life-saving medicines and medical facilities.

To ensure the delivery of health services at the community level, this bill mandates all local government units to use the special health fund for incentives and benefits for all public health workers, including barangay health workers (BHW) and barangay nutrition scholars (BNS). At present, there is no law that provides for a mandatory and definite source of funds for our BHWs and BNSs, unlike the SK and education which, under Republic Act No. 7160 or the Local Government Code, has an automatic appropriation of 10% from the national tax allocation and one percent from real estate tax respectively.

Immediate approval of this bill is earnestly sought.



BAMBL B. EMANO



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

SECTION 1. Section 9 of Republic Act No. 11223 is hereby amended to read as follows:

Sec. 9. Entitlement to Benefits. — Every member shall be granted immediate eligibility for health benefits package under the NHIP: *Provided*, That PhilHealth Identification Card shall not be required in the availment of any health services: *Provided further*, That no co-payments shall be charged for services rendered in basic accommodation: *Provided furthermore*, That co-payments and co-insurance for amenities in public hospitals shall be regulated by the DOH and PhilHealth: *Provided [finally]*, FURTHERMORE, That the current PhilHealth package for members shall not be reduced: and PROVIDED, FINALLY, THAT THE AMOUNTS UNDER EACH BENEFIT PACKAGE SHALL BE SUBJECT TO THE REVIEW AND ASSESSMENT OF THE HEALTH TECHNOLOGY ASSESSMENT COUNCIL PURSUANT TO SECTION 34 OF THIS ACT,"

PhilHealth shall provide additional NHIP benefits for direct contributors, where applicable: *Provided*, That failure to pay premiums shall not prevent the enjoyment of any NHIP benefits: *Provided further*, That employers [~~and self-employed direct contributors~~] shall be required to pay all missed contributions with an interest, compounded monthly, of at least three percent (3%) for employers [~~and not exceeding 1.5% for self-earning, professional practitioners and migrant workers~~].

SECTION. 2. Section 10 of Republic Act No. 11223 is hereby amended to read as follows:

SEC. 10. Premium Contributions. - For direct contributors, premium rates shall be in accordance with the following schedule, and monthly income floor and ceiling:

~~Year~~	~~Premium Rate~~	~~Income Floor~~	~~Income Ceiling~~
~~2019~~	~~2.75%~~	~~P10,000.00~~	~~P50,000.00~~
~~2020~~	~~3.00%~~	~~P10,000.00~~	~~P60,000.00~~
~~2021~~	~~3.5%~~	~~P10,000.00~~	~~P70,000.00~~
~~2022~~	~~4.0%~~	~~P10,000.00~~	~~P80,000.00~~
~~2023~~	~~4.5%~~	~~P10,000.00~~	~~P90,000.00~~
~~2024~~	~~5.0%~~	~~P10,000.00~~	~~P100,000.00~~
~~2025~~	~~5.0%~~	~~P10,000.00~~	~~P100,000.00~~

Year	Premium Rate	Income Floor	Income Ceiling
2024	4%	P10,000.00	P50,000.00
2025	4.25%	P10,000.00	P60,000.00
2026	4.5%	P10,000.00	P65,000.00
2027	4.75%	P10,000.00	P70,000.00
2028	5%	P10,000.00	P75,000.00

PROVIDED, THAT AFTER CONSULTATION WITH STAKEHOLDERS AND UPON RECOMMENDATION OF THE SECRETARY OF HEALTH, THE PHILHEALTH BOARD MAY ADJUST THE INCOME FLOOR AND INCOME CEILING BASED ON THE FUNDING REQUIREMENT OF HEALTH BENEFIT PACKAGES.

FOR MIGRANT WORKERS, PREMIUM CONTRIBUTIONS SHALL BE BASED ON THE INCOME FLOOR: PROVIDED, THAT FIFTY PERCENT (50%) OF THE PREMIUM CONTRIBUTION OF MIGRANT WORKERS SHALL BE SHOULDERED BY THE NATIONAL GOVERNMENT: PROVIDED FURTHER, THAT UNPAID PREMIUM CONTRIBUTIONS OF MIGRANT WORKERS IN DISTRESS SHALL NOT BE COLLECTED UPON THEIR ARRIVAL IN THE COUNTRY: PROVIDED FINALLY, THAT FAILURE TO PAY PHILHEALTH CONTRIBUTION SHALL NOT BE A GROUND FOR NON-ISSUANCE OF OVERSEAS EMPLOYMENT CERTIFICATE OF A MIGRANT WORKER.

[Provide, That f]For indirect contributors, premium subsidy shall be gradually adjusted and included annually in the General Appropriations Act (GAA): Provided,

[further,] That the funds shall be released to Philhealth: Provided further[more], That the DOH, in coordination with Philhealth, may request Congress to appropriate supplemental funding to meet targeted milestones of this Act: Provided finally, That for every increase in the rate of contribution of direct contributors and premium subsidy of indirect contributors, Philhealth shall provide for a corresponding increase in benefits.

IN THE EVENT OF A STATE OF NATIONAL EMERGENCY, PUBLIC HEALTH EMERGENCY, OR STATE OF CALAMITY, THE PRESIDENT OF THE PHILIPPINES, UPON RECOMMENDATION OF THE PHILHEALTH BOARD AFTER CONSULTATION WITH STAKEHOLDERS, MAY SUSPEND THE INCREASE IN PREMIUM CONTRIBUTION RATES PROVIDED UNDER THIS SECTION. THE MANDATED INCREASE SHALL BE IMPLEMENTED UPON LIFTING OF THE STATE OF NATIONAL EMERGENCY, PUBLIC HEALTH EMERGENCY, OR STATE OF CALAMITY. IN THE EVENT OF SUSPENSION, ALL SUBSEQUENT SCHEDULED INCREASES IN CONTRIBUTION RATES SHALL BE IMPLEMENTED IN THE SUCCEEDING YEARS ACCORDINGLY.

SECTION 3. Section 12 of Republic Act 11223 is hereby amended to read as follows:

Sec 12. Administrative Expense— ~~[No more than 5]~~ Seven and one-half percent (7.5%) of the actual total premium collected from direct and indirect contributory members during the immediately preceding year shall be allotted for the administrative cost of implementing the Program.

SECTION. 4. Section 20 of Republic Act No. 11223 is hereby amended to read as follows:

Section 20. *Special Health Fund.* - The province-wide or city-wide health system shall pool and manage, through a special health fund, all resources intended for health services to finance population-based and individual-based health services, health system operating costs, capital investments, and remuneration of additional health workers and incentives for all health workers: *Provided*, That the DOH, in consultation with the DBM and the LGUs, shall develop guidelines for the use of the Special Health Fund. PROVIDED FURTHER, THAT AMONG OTHER PURPOSES AS MAY BE DETERMINED AND APPROVED BY THE PROVINCIAL AND CITY HEALTH BOARDS, THE SPECIAL HEALTH FUND SHALL BE USED FOR INCENTIVES AND BENEFITS FOR ALL HEALTH WORKERS IN ACCORDANCE WITH REPUBLIC ACT NO. 7305, OTHERWISE KNOWN AS THE “MAGNA CARTA FOR PUBLIC HEALTH WORKERS,” REPUBLIC ACT NO. 7883, OTHERWISE KNOWN AS THE “BARANGAY HEALTH WORKERS INCENTIVES AND BENEFITS ACT,” PRESIDENTIAL DECREE 1569 “STRENGTHENING THE BARANGAY NUTRITION PROGRAM,” REPUBLIC ACT NO. 11148 OTHERWISE KNOWN AS THE “KALUSUGAN AT NUTRISYON NG MAG-NANAY ACT,” AND OTHER RELEVANT LAWS.

SECTION. 5. Section 34(b)(2) of Republic Act No. 11223, otherwise known as the "Universal Health Care Act" is hereby amended to read as follows:

"SEC. 34. Health Technology Assessment (HTA) —

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"(b). The following criteria must be observed in the conduct of HTA:

"(2) Safety and Effectiveness. — Each intervention must have undergone Phase IV clinical trial, and systematic review and meta-analysis must be readily available. The interventions must also not pose any harm to the users and health care providers; PROVIDED THAT, IN CASE OF A PANDEMIC OR UPON THE DECLARATION OF A STATE OF PUBLIC HEALTH EMERGENCY, SUCH REQUIREMENTS MAY BE DISPENSED WITH;"

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SECTION 6. *Continuity of Benefits.* — Nothing in this Act shall be construed to eliminate or diminish any benefits or entitlements already granted to members of Philhealth.

SECTION 7. *Separability Clause.* — If any provision of this Act is declared invalid or unconstitutional, the remainder thereof not otherwise affected shall remain in full force and effect.

SECTION 8. *Repealing Clause.* — All laws, presidential decrees, executive orders, letters of instruction, proclamations, and administrative regulations that are inconsistent with the provisions of this Act are hereby repealed, amended or modified accordingly.

SECTION 9. *Effectivity Clause:* This Act shall take effect after fifteen (15) days following the completion of its publication in the Official Gazette or in any newspaper of general circulation.

Approved,