

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City
19TH CONGRESS
Third Regular Session



House Bill No. **10798**

**INTRODUCED BY REPRESENTATIVE
MICHAEL L. ROMERO**

EXPLANATORY NOTE

The **1987 Constitution** mandates the state to establish sufficient **hospital infrastructures** and **healthcare facilities** through appropriate technology and research, with adequate financial, equipment and other support services.

The **Republic of the Philippines** is an archipelago in the South-East Asia Region, with a population of 121.9 million as of 2022. The Philippines is currently one of Asia's fastest growing economies with a gross domestic product growth of 6.7% at the end of 2018. Categorized as a newly industrialized country, it is transitioning from one based on agriculture to one based more on services and manufacturing.

We must ensure a stable and applicable health care program by involving as many stakeholders as possible in the healthcare sector.

We must review the mandate and flow of operations of all our government agencies involved in the delivery and regulation of all our key health care services to improve synergy in pursuant to the mandate of this House Bill.

The topic of health has become increasingly more important over the past few decades in the Philippines. The country has implemented several rounds of reform to strengthen its health system. Philippines adopted decentralized health governance in 1991, introduced a social health insurance program – **PHILHEALTH** – in 1995, and has actively pursued universal health coverage since 2010. As a consequence of its focus on the health sector and general socioeconomic development.

Although much has been achieved to date, there are still many concerns in the health sector that need to be tackled. These include a reduction in the prevalence of tuberculosis and childhood pneumonia, as well as managing the rising tide of non-communicable diseases and further strengthening the preparation and response capacity to natural and human-induced disasters.

There have been widespread efforts to improve health service delivery in the country, but regional and socioeconomic disparities in the availability and accessibility of resources are prominent. There is mal-distribution of infrastructure and human resources across and within regions, which are concentrated in Metro Manila and other major cities. Philippines is a major exporter of health-care professionals but finds it challenging to ensure adequate availability within the country.

Utilization of the health budget has improved over the years, but governance and implementation challenges persist due to the fragmented nature of the system. The country has a mixed health system with an expanding private sector. There is no effective mechanism to regulate private for-profit health-care providers. More than 50% of the total health spending is out of pocket. Coverage by the **Philippine Health Insurance Corporation (PhilHealth)** has increased over the years, but not all the eligible members are aware of the benefits of the program. There is no effective mechanism in place to monitor the accreditation of facilities, and regulate the cost and quality of services.

To overcome some of these challenges, the **Department of Health (DOH)** and PhilHealth are pushing the development of functional Service Delivery Networks (SDNs) using both government and private sector institutions. Simultaneously, there will be a concerted effort to regulate and accredit all providers as well as ensure that end-users understand the benefits that they are entitled to

This House Bill envisions a highly acceptable and perpetual solution to the perennial problem on the governance of our key health care system. It has been proven that our healthcare providers are very erratic and therefore very unreliable in several scenarios.

Our healthcare workers and experts should be encouraged to perform more to meet our mandated standards, they should be provided with adequate support through, better seedlings, enhanced stocking, improved farm mechanization, and accessible credits.

Furthermore, it promotes alternative learning approaches, including informal and community-based programs. The Republic of the Philippines, must find a permanent and lasting solution to our recurring school shortage crisis. The state must ensure a stable and sufficient program by involving as many stakeholders as possible in all sectors.

We must review the mandate and flow of operations of all our government agencies involved in the production and distribution of all our school facilities and programs to improve synergy in pursuant to the mandate of the Constitution. Several recent studies have pointed out the alarming deterioration of the quality of healthcare in the Philippines, but this was

officially confirmed in the report delivered by concurrently serving **Department of Health (DOH)**. There are several issues that plague the country's healthcare system and reforms.

The biggest concern. **The lack of hospital infrastructure and resources** to support the ideal process is the most pressing issue.

Data unveiled the health agenda focused on reforms, accelerated delivery of services, promoting the well-being of health workers, and providing greater support. Responding to the report, in acknowledging the government's accountability to the nation's healthcare sector. **DOH** promised to build more and **better infrastructure** by investing heavily.

The President had referenced his administration's **development plan (PDP)**, this crisis is linked to years of incapacity and lacking investment in healthcare.

This House Bill seeks to create programs aimed to attain national goals and promote well-being for all experts and workers. To bolster the construction of **more hospital buildings/healthcare facilities**.

Thus, the early passage of this bill is earnestly requested.

A handwritten signature in black ink, appearing to read 'Michael L. Romero', with a long horizontal line extending to the right.

MICHAEL L. ROMERO Ph.D.

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AN ACT
PROVIDING FOR THE CREATION **OF MORE HOSPITAL
INFRASTRUCTURES AND HEALTHCARE FACILITIES**, TO
PROTECT AND PROMOTE THE RIGHT OF EVERY FILIPINO TO
QUALITY, EQUITABLE, CULTURE-BASED, AND COMPLETE
HEALTHCARE, APPROPRIATING FUNDS THEREFOR AND FOR
OTHER PURPOSES

*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 "
Hospital Buildings and Healthcare Facilities Act of 2024".

SECTION 2. DECLARATION OF POLICY - It shall hereby be a
declared the policy of the state to it shall hereby be a declared policy of the
state to:

- a)** Ensure sufficient healthcare programs and services for all,
specifically those manufactured from domestically land-
based agricultural activities.
- b)** Promote reasonable prices specially during times of
calamities and in all cases of emergency situations.

- c) Take the lead role in order to provide the necessary resources, planning, organizational and control systems to optimize the delivery of appropriate healthcare.
- d) Provide adequate technical support, regulatory principles, and monetary guidelines.
- e) Initiate progress monitoring to all sectors actively involved.

SECTION 3. HOSPITAL BUILDINGS/HEALTHCARE FACILITIES - shall be the heart of the formal education system. It is where students learn. Schools shall have a single aim of providing the best possible education for all learners.

Governance of education shall begin at the national level it is at the regions, divisions, schools and learning centers herein referred to as the field offices - where the policy and principle for the governance of basic education shall be translated into programs, projects and services developed, adapted and offered to fit local needs.

The state shall encourage local initiatives for improving the quality of basic education. The state shall ensure that the values, needs and aspirations of a school community are reflected in the program of education for the children, out-of-school youth and adult learners. Schools and learning centers shall be empowered to make decisions on what is best for the learners they serve.

SECTION 4. ESTABLISHMENT OF A SELF-GOVERNING NATIONAL ADVISORY-CONSTRUCTION COUNCIL. — There shall be established a self-governing advisory council to be headed by the **DOH**.

The **National Advisory Council** shall formulate its own implementing rules and regulations to govern its proceedings. The Council shall choose its official home base and organize a staffing protocol to aid and carry out its functions.

Existing structures, facilities and equipment's that would meet the standard requirements could be upgraded to effectively serve and be designated as such in compliance with rules and regulations set by the **Department of Health(DOH)**.

SECTION 5. REGIONAL ADVISORY COUNCIL - for purposes of this act, to execute the foregoing policy, there shall hereby be created the **Regional advisory Council**. This council shall have the overall authority and responsibility and accountability for crafting and formulating a comprehensive program for the implementation of *hospital construction*.

The regional advisory councils and NAC shall have, as members, representatives from the **Department of Budget and Management (DBM)**, **Department of Public Works and Highways (DPWH)**, **Department of Health (DOH)**, **Commission on Audit (COA)**. The regional advisory councils and NAC shall also have, as additional members, two **(2)** representatives from accredited nongovernmental organizations working or monitoring school construction and service programs.

The Council shall formulate its own implementing rules and regulations to govern its proceedings. The Council shall choose its official home base and organize a staffing protocol to aid and carry out its functions.

SECTION 6. CRITERIA FOR CONSTRUCTION – it should meet the prescribed standards of **DOH** in accordance with the **DPWH** regulations and protocols.

SECTION 7. RECURRING ASSESSMENT. - Every three **(3)** years after the effectivity of this Act, the **(NAC)** shall conduct an impact assessment to evaluate the quality of the buildings/facilities, the reliability and the program implementation should go and shall be completed as scheduled.

The amounts indicated in this Act shall be made available to the members of all the **(NAC)** during the implementation of this Act.

Provided, that every three **(3)** years after the effectivity of this Act, the **(DPWH)** shall recommend to the **DBM** whether the cash grants shall be adjusted to its present value using the current price index, as published by the **PSA**

Provided, further, That the **NAC** shall ensure that the grant amounts are sufficient to make a positive impact on the entire education sector and are delivered timely.

SECTION 8. SETTINGS FOR ENTITLEMENT. - All qualified/accredited contractors/suppliers shall comply with all of the following required conditions as set by the **NAC** for continued program eligibility, in accordance with the **building code**.

SECTION 9. MANDATES OF THE COUNCIL – to institutionalize all foregoing policies, the Republic of the Philippines shall focus all its development plans and programs towards the achievement of the National goals.

The **DPWH** and the **DBM** shall provide the necessary technical and financial assistance to ensure the effective operation and construction of the school infrastructures/facilities.

SECTION 10. NONCOMPLIANCE WITH TERMS AND CONDITIONS. - The responsible person of a reported who fails to comply with conditions set forth by the **(NAC)** shall at first be notified in writing and the payment of shall immediately be terminated. After review **(3)** months of the noncompliance, the person/entity shall be subject to case management process of the **NAC**.

Should the so notified persist in not complying with the conditions within a period of three **(3)** months since the day of receipt of the written notification, they shall be removed from the program.

SECTION 11. SUPERVISING AND ASSESSMENT CONCERNS. — the Department of Public Works and Highways (**DPWH**) and the Department of Budget and Management (**DBM**), shall provide the necessary technical and financial assistance to ensure the effective operations and build-up.

SECTION 12. IMPLEMENTING AGENCY. — the **Department of Health (DOH)**.

The **DOH** shall serve as the central planning, coordinating, implementing and monitoring body of the Program, it shall

SECTION 13. IMPLEMENTING RULES AND REGULATIONS. — Within ninety (**90**) days from the effectivity of this Act, the **Department of Health (DOH)**, and other concerned government and private agencies, promulgate the necessary rules and regulations to carry out the provisions of this Act.

SECTION 14. TRANSITORY PROVISION – Existing industries, businesses and offices affected by the implementation of this Act shall be given three (**3**) months transitory period from the effectivity of the **IRR** or such other period as may be determined, to comply with the requirements of this Act.

SECTION 15. APPROPRIATION. — The amount necessary for the initial implementation to fund this act shall be charged under the **Department of Health (DOH)**.

The amount of fifty (**50**) billion pesos (**Php 50, 000,000,000.00**) necessary for the initial implementation to fund this act shall be charged under the **Department of Health (DOH)**.

The amount determined by the **Department of Budget and Management (DBM)** for the implementation of this Act shall be charged under the existing funding of the **Department of Health (DOH)**.

Thereafter such amounts necessary for the successive and continuous implementation of this Act, including the operations maintenance of reserves shall be automatically appropriated in the **General Appropriations Act (GAA)**.

Thereafter, such amounts necessary for the initial implementation of this act shall be included in the annual **General Appropriations Act (GAA)**.

The agencies concerned shall provide for the continued maintenance, operation, and management of all the facilities and equipment's.

SECTION 16. CONTINUING APPROPRIATION. - The Department of Budget and Management (**DBM**) is hereby mandated to include annually in the next five (**5**) years, in the President's Program of expenditures for submission to Congress, and release, an amount not less than ten (**10**) billion pesos (**Php 10, 000, 000, 000.00**) for the implementation of this Act.

SECTION 17. PERIODIC REPORTS - The **Secretary** of (**DOH**) shall submit periodic reports on its findings and make recommendations on actions to be taken by Congress and Senate and the appropriate department, and in order to carry out the objectives and mandates of this Act.

The **DOH** shall annually publish a full report of the construction progress, for the implementation of the previous fiscal year.

The said report shall include financial disclosures, number of schools for construction/renovation, and recommendations to the **National Advisory Council**, to the President and to both chambers of Congress on how to further enhance it. This report shall be submitted to Congress before the submission of the President's Budget Message.

SECTION 18. MANDATORY MONITORING. - The **DOH** shall monitor the implementation of the program and report its status at least once every three (**3**) years in order to ensure the attainment of the national goals enumerated in of this Act to the House of Representatives and the Senate of the Philippines.

SECTION 19. AUTOMATIC REVIEW - Every three **(3)** years after the effectivity of this Act, an independent review panel composed of experts to be appointed by the **President** of the Republic shall review the policies and programs in the agriculture sector and shall make recommendations, based on its findings, to the President and to both Houses of Congress.

SECTION 20. INDEPENDENT MONITORING AGENCY. - An **Independent Monitoring Agency** shall be created at the regional, and national levels, composed of representatives from the private sector to complement the monitoring activities of the **DOH** and **DPWH** to provide feedback for appropriate action.

It shall submit a report on the results of its monitoring activities relative to the implementation of the program to the respective regional advisory councils and the **NAC**.

Section 21. PROGRAM CLARITY— The **DOH** shall regularly and timely post and update on its website a report of financial disclosures and information about beneficiaries based on geographical area, social, economic and cultural circumstances.

SECTION 22. SEPARABILITY CLAUSE. — If any provision of this Act shall be held unconstitutional or invalid, the remaining provisions which are not affected thereby shall continue to be in full force and effect.

SECTION 23. REPEATING CLAUSE. — All laws, decrees, executive orders, rules and regulations, and other issuances, or parts thereof, contrary to or inconsistent with this Act are hereby modified, amended or repealed accordingly.

SECTION 24. EFFECTIVITY. — This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,