

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 1386



Introduced by: Rep. Keith Micah "Atty. Mike" D.L. Tan and
Rep. Iris Marie D. Montes

AN ACT
PROVIDING FOR A MANDATORY IMMUNIZATION PROGRAM,
REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 10152,
OTHERWISE KNOWN AS THE "MANDATORY INFANTS AND CHILDREN
HEALTH IMMUNIZATION ACT OF 2011"

EXPLANATORY NOTE

Republic Act No. 10152 or the "Mandatory Infants and Children Health Immunization Act of 2011" was primarily enacted to protect infants and children against common and vaccine-preventable diseases.

In particular, it seeks to address newborns and children infected with hepatitis-B virus and mandated immunization for tuberculosis; diphtheria, tetanus and pertussis; poliomyelitis; measles; mumps; rubella or German measles; hepatitis-B; and H. Influenza type B (HIB).

The landmark law also empowered the Secretary of the Department of Health (DOH) to determine such other types of vaccine-preventable diseases in a department circular. To put it otherwise, R.A. 10152 gives the Secretary of Health unfettered discretion to expand the list of vaccine-preventable diseases.

The Dengvaxia controversy has placed under the spotlight the government's vaccination program, bringing to the fore the policy of empowering the Secretary of Health to overrule reservations of the Formulary Executive Council (FEC), a panel of top Filipino experts tasked to identify the diseases for which medicines need to be included in the formulary based on a continuing review of disease statistics from public and private hospitals and other health facilities.

In this light, this bill seeks to limit the power of the Secretary of Health to determine other types of vaccine-preventable diseases by requiring the recommendation of the National Immunization Technical and Advisory Group (NITAG) and after a separate or joint public hearing conducted by the Committee on Health and Demography of the Senate of the Philippines and the Committee on Health of the House of Representatives. However, when there is a pandemic and when the Congress of the Philippines is not in session, the said public hearings need not be conducted.

This proposal, which was approved by the House and transmitted to the Senate during the 18th Congress, aims to include rotavirus, Japanese encephalitis, pneumococcal conjugate vaccine, and human papilloma virus in

the list of vaccine-preventable diseases and requires the submission of an annual report to ensure the efficient, economical, and effective implementation of the law.

In view of the foregoing, the passage of this measure is earnestly sought.


KEITH MICAH "ATTY. MIKE" D.L. TAN
4th District, Quezon


IRIS MARIE D. MONTES
Kababaihan Kabalikatan para sa Kapakanan
at Kaunlaran ng Bayan (4K) Party-list

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

SECTION 1. *Title.* — This Act shall be known as the "Mandatory Immunization Program Act".

SEC. 2. *Declaration of Policy.* — In accordance with Article II, Section 15 of the Constitution, it is hereby declared the policy of the State to take a proactive role in the preventive health care of all Filipinos. Towards this end, the State shall adopt a comprehensive, mandatory and sustainable immunization program for vaccine-preventable diseases.

SEC. 3. *National Immunization Program.* — There is hereby established a National Immunization Program under the Department of Health (DOH), which shall ensure that the population is equitably protected from vaccine-preventable diseases that can cause disability or death through an integrated and comprehensive immunization program for all life stages, in accordance with this Act.

SEC. 4. *Coverage.* — The mandatory immunization provided under this Act shall cover the following vaccine-preventable diseases:

- (a) Tuberculosis;
- (b) Diphtheria, Tetanus, and Pertussis;
- (c) Poliomyelitis;
- (d) Measles;
- (e) Mumps;
- (f) Rubella or German measles;
- (g) Hepatitis-B;
- (h) H. Influenza type B (HIB);
- (i) Rotavirus;
- (j) Japanese encephalitis;

(k) Pneumococcal conjugate vaccine (PCV);

(l) Human papilloma virus (HPV);

(m) Booster for Measles, Rubella, Tetanus, Diphtheria (MRTD); and

(n) Such other types as may be determined by the Secretary of Health upon the recommendation of the National Immunization Technical and Advisory Group (NITAG) established under Section 6 of this Act and after a separate or joint public hearing conducted by the Committee on Health and Demography of the Senate of the Philippines and the Committee on Health of the House of Representatives: Provided, That when there is a pandemic and when the Congress of the Philippines is not in session, the said public hearings need not be conducted.

The Philippine Health Insurance Corporation (PhilHealth) shall include the mandatory immunization services specified under this Act in its benefit package. However, such other types under Section 4 (n) shall undergo evaluation by the Health Technology Assessment Council pursuant to R.A 11223, otherwise known as the "Universal Health Care Act", before its inclusion in the benefit package.

SEC. 5. *Administration of Vaccines.* - The vaccines shall be administered for free in any government hospital or health facility, and in any public school or community under its school-based or community-based immunization program, and in any private health facility if such is included in the PhilHealth benefit package.

The DOH, in collaboration with the Department of Education and the Department of Interior and Local Government, shall undertake a school-based and community-based immunization program. The DOH shall determine the vaccines suitable for the various age groups from the list enumerated in Section 4 under this Act.

Hepatitis-B vaccine shall be administered by any duly licensed physician, nurse or midwife to infants born in hospitals, health infirmaries, health centers or lying-in centers with obstetrical and pediatric services, whether public or private, within twenty-four (24) hours after birth: Provided, however, That in cases of infants born in places other than the above, any duly licensed physician, nurse or midwife who delivers or assists in the delivery of the newborn, shall be responsible for administering the vaccine to the latter: Provided, further, That for deliveries assisted by persons other than the health professionals mentioned above, the infant should be brought to any available health care facility to be immunized against Hepatitis-B within twenty-four (24) hours but not later than seven (7) days after birth: Provided, finally, That subsequent doses of the Hepatitis-B vaccine shall be completed according to the recommended schedule of Hepatitis-B immunization to be provided in the rules and regulations to be issued by the DOH to implement this Act.

SEC. 6. *Creation of the National Immunization Technical and Advisory Group.* - A National Immunization Technical and Advisory Group (NITAG) shall be created to serve as a technical and independent multi-disciplinary advisory body to provide evidence-based policy and program decisions on immunization and vaccines to the DOH. The NITAG shall be composed of experts from the fields of pediatrics, infectious diseases, epidemiology, public health, health economy and from affiliate agencies such as the Formulary Executive Council, Food and Drug Administration, Philippine Nurses Association, Philippine Pharmacists Association, Inc., and the National Institutes of Health.

The NITAG shall have the following functions:

a). To advise the DOH in the formulation of policies, plan and strategies for research and development of the existing and new vaccines, and the vaccine delivery technology;

b). To conduct policy analysis, review of the program data and evidence in order to provide evidence-based technical advice and recommendations for the development of appropriate and sustainable immunization policies, guidelines, strategies, and approaches related to Immunization Program and vaccine delivery technology; and

c). To review the position papers, studies, international guidelines and recommendations from internationally acknowledged resources for possible adoption in the country policies and plans for NITAG.

SEC. 7. Education and Information Campaign. - All health care practitioners or health care workers who are administering prenatal care shall educate all pregnant mothers on the importance of immunization through vaccination in safeguarding infant health and well-being as well as on the possible effects of immunization.

The DOH, other government agencies, non-government organizations (NGOs), professional and academic societies, and local government units (LGUs) shall make available appropriate information materials and shall institute an efficient public information dissemination system to increase awareness on the importance of immunization as a disease prevention strategy.

SEC. 8. Obligation to Inform. - Any physician, nurse, midwife, nursing aide or skilled birth attendant, who delivers or assists in the delivery of a newborn shall, prior to delivery, inform parents or legal guardian of the newborn of the availability, nature and benefits of immunization against Hepatitis-B and other vaccine-preventable diseases at birth.

SEC. 9. Continuing Education and Training of Health Personnel. —The DOH shall, with the assistance of the LGUs, academe, professional societies and NGOs, undertake continuing information, education and training programs for all health personnel on the rationale and benefits of, as well as modern procedures for immunization of infants and children against vaccine-preventable diseases.

SEC. 10. Annual Report. - The DOH shall submit to the Office of the President of the Philippines, the Senate Committee on Health and Demography, and the House of Representatives Committee on Health on or before the end of December of every year, or upon the request of any of the aforesaid committees of Congress, a report giving a detailed account of the status of the implementation of this Act.

SEC. 11. Appropriations. — The amount necessary to carry out the implementation of this Act shall be charged against the current year's appropriations for expanded program on immunization of the DOH. Thereafter, such sums as may be necessary for the continued implementation of this Act shall be included in the annual General Appropriations Act.

SEC. 12. Implementing Rules and Regulations. —The DOH shall, in consultation with the National Immunization Committee, issue the implementing rules and regulations within ninety (90) days after the approval of this Act.

SEC. 13. Separability Clause. —If, for any reason, any part or provision of this Act shall be declared unconstitutional or invalid, the remaining provisions hereof which are not affected thereby shall continue to be in full force and effect.

SEC. 14. *Repealing Clause.* — Republic Act No. 10152, otherwise known as the “Mandatory Infants and Children Health Immunization Act of 2011” is hereby repealed. All other laws, decrees, executive orders, rules and regulations or parts thereof which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

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

Approved,