

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 1701



Introduced by **HON. MIGUEL LUIS R. VILLAFUERTE**

EXPLANATORY NOTE

Article II, Section 15 of the 1987 Constitution provides that it is the duty of the State to protect and promote the right to health of the Filipino people and instill health consciousness among them. Republic Act (RA) No. 11223 also known as the "Universal Health Care Act," calls for the creation of a Health Information System (HIS) to support the delivery of equitable, efficient, and patient-centered care.

Despite ongoing efforts to digitize the healthcare system, the Philippines continues to face significant challenges, particularly in data integration, ensuring systems interoperability and bridging infrastructure gaps. Dr. Iris Isip-Tan, a professor at the University of the Philippines Manila's College of Medicine was quoted in a news article saying that while electronic health record (EHR) systems exist in the Philippines, "EHR data is not collected and curated in a way that is optimized for learning health systems (LHS)."¹ Moreover, access to digital technologies in underserved rural and remote areas are lacking. A study conducted by the Philippine Primary Care Studies noted that over 94% of healthcare workers across rural, urban, and remote settings expressed their intention to use the EHR system.² This highlights a strong support and need to modernize our healthcare system to ensure the seamless and continuous delivery of quality care.

This proposed measure provides operational standards and technical mechanisms to implement a fully unified and interoperable national EHR system. Moreover, it mandates its adoption across all public hospitals and eventually private health facilities with clear timelines while mutually reinforcing provisions in RA No. 10173 or the "Data Privacy Act" and RA No. 11055 or the "Philippine Identification System Act." It also institutionalizes offline access for geographically isolated or rural areas, and mentions capacity-building for its implementation.

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


HON. MIGUEL LUIS R. VILLAFUERTE

¹ Mirasol, Patricia. (2025, 4 November). *Interoperability: a key component in digital health*. Business World. <https://www.bworldonline.com/health/2024/11/04/632442/interoperability-a-key-component-in-digital-health/>

² Asis, C. M. L., & Rey, M. P. (2025, April 10). *User-Centered: Enhancing acceptance of electronic health records*. Philippine Primary Care Studies Policy Pulse. University of the Philippines Center for Integrative and Development Studies. <https://cids.up.edu.ph/user-centered-enhancing-acceptance-electronic-health-records/>

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HOUSE BILL NO. 1701

Introduced by **HON. MIGUEL LUIS R. VILLAFUERTE**

**AN ACT ESTABLISHING A NATIONAL ELECTRONIC HEALTH RECORD SYSTEM TO
ENSURE CONTINUITY OF CARE, IMPROVE MEDICAL EFFICIENCY, AND PROMOTE
UNIVERSAL HEALTH ACCESS FOR ALL FILIPINOS, AND
APPROPRIATING FUNDS THEREFOR**

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 “One Patient–One Health Record Act.”

SECTION 2. *Declaration of Policy.* – It is the policy of the State to protect and promote the right to health of every Filipino. To this end, the government shall institutionalize a secure, interoperable, and universally accessible Electronic Health Record (EHR) system that ensures efficient, seamless, and continuous healthcare services nationwide.

SECTION 3. *Objectives.* – This Act seeks to:

- (a) Create a National Electronic Health Record System (NEHRS) for all citizens;
- (b) Assign every Filipino a unique Digital Health ID linked to their personal health record;
- (c) Facilitate data sharing among authorized healthcare providers to ensure timely and efficient care;
- (d) Promote equity in access to all health services; and
- (e) Support public health monitoring, disease surveillance, and national health planning.

SECTION 4. *Development and Implementation of NEHRS.* – The Department of Health (DOH), in coordination with the Department of Information and Communications Technology (DICT) and the National Privacy Commission (NPC), shall develop and implement the NEHRS.

The system shall include:

- (a) Individual patient profiles including, but not limited to, personal information, medical history, laboratory and imaging results, prescriptions, allergies, and immunizations;

- (b) Access protocols for public and private health facilities, governed by data privacy and patient consent;
- (c) Offline access mechanisms and capabilities for rural and underserved areas; and
- (d) Integration with existing systems such as PhilHealth, Universal Health Care database, and local health information systems, and the Philippine Identification System (PhilSys).

To ensure seamless sharing and portability of patient records across health facilities, the NEHRS shall adopt internationally recognized health data standards. The DOH, DICT and NPC, shall develop and regularly update the NEHRS technical architecture to enable interoperability among all certified EHR systems.

SECTION 5. *Digital Health ID System.* – Every Filipino shall be assigned a Digital Health ID, which shall be:

- (a) Linked to their PhilSys (National ID) number or issued separately when necessary;
- (b) Usable across all public and licensed private health facilities; and
- (c) Securely stored with privacy-compliant biometric or multi-factor authentication systems.

SECTION 6. *Adoption of NEHRS.* – The following institutions shall be required to adopt and implement the NEHRS within two (2) years from the effectivity of this Act:

- (a) All DOH-retained hospitals and provincial government hospitals;
- (b) All public rural health units (RHUs), barangay health stations, and city or municipal health offices; and
- (c) All state universities and colleges (SUCs) offering medical and health courses;

Private hospitals and clinics may participate voluntarily within the first year. By the third year, they shall be mandated to adopt the system, with incentives corresponding incentives for early adoption as determined by the DOH and DICT.

SECTION 7. *Security Measures and Ethical Use.* – Strict compliance with the provisions of the Data Privacy Act of 2012 (RA No. 10173) and all related laws shall be enforced.

- (a) Patients records shall not be accessed or disclosed without informed consent, except in legally authorized situations such as public health emergencies.
- (b) All data shall be encrypted and stored in secure, government-certified cloud or on-premise systems.
- (c) Regular audits and cybersecurity measures shall be undertaken; and
- (d) Penalties shall be imposed for violations, including unauthorized access, misuse, or data breaches as prescribed under existing laws and administrative rules.

SECTION 8. *Capacity Building and Support.* – The DOH, in coordination with the DICT, NPC, and other relevant agencies shall provide digital literacy trainings and programs for the healthcare workers and administrators using the NEHRS. There shall be a technical support unit to assist the local government units and health facilities in the implementation of this Act.

SECTION 9. *Appropriations.* – The initial funding for the implementation of this Act shall be charged against the current appropriations of the DOH, DICT, and NPC. Thereafter, the funds necessary for the continued operation, maintenance, upgrades, and capacity building of the NEHRS shall be appropriated annually under the General Appropriations Act (GAA).

SECTION 10. *Implementing Rules and Regulations.* – Within ninety (90) days from the effectivity of this Act, the DOH, in coordination with the DICT, NPC, PhilHealth, and other relevant agencies shall promulgate the Implementing Rules and Regulations (IRR).

SECTION 11. *Separability Clause.* – If any provision or part of this Act is declared unconstitutional, the remaining parts or provisions not affected shall remain in full force and effect.

SECTION 12. *Repealing Clause.* – All laws, executive orders, issuances, and rules and regulations inconsistent with this Act are hereby repealed or modified accordingly.

SECTION 13. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,