

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
First Regular Session



HOUSE BILL No. 2502

Introduced by REP. RAMIL L. HERNANDEZ

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

This measure is previously filed by Rep. Ruth Mariano-Hernandez through House Bill No. 4483 and was approved by House Committee on Health in February 2023.

The proposed "Mandatory Immunization Program Act," seeks to fulfill the State's constitutional mandate under Article II, Section 15 of the Constitution, which declares the policy of the State to take a proactive role in the preventive health care of all Filipinos. Building upon the foundations of existing public health efforts, this Act aims to establish a comprehensive, mandatory, and sustainable immunization program for vaccine-preventable diseases across all life stages.

Currently, the "Mandatory Infants and Children Health Immunization Act of 2011" (Republic Act No. 10152) primarily focuses on immunization for infants and children. While this has been crucial in protecting our youngest population, a significant gap exists in providing a systematic and universal immunization framework for adolescents and adults. Many vaccine-preventable diseases, such as tetanus, diphtheria, measles, mumps, rubella, and certain types of pneumonia and influenza, pose risks throughout an individual's life, leading to preventable morbidity, disability, and even death if not adequately addressed through continuous immunization. Furthermore, the emergence of new diseases and the persistent threat of existing ones, particularly in the context of global pandemics, underscore the critical need for an expanded and agile immunization strategy that covers the entire population.

This proposed measure addresses these gaps by:

- **Expanding the scope of mandatory immunization** beyond infants and children to cover all life stages. This ensures that adolescents and adults are also protected from a broad range of vaccine-preventable diseases, fostering lifelong immunity.

- **Establishing a National Immunization Program under the Department of Health (DOH)**, tasked with ensuring equitable protection for the population.
- **Including a comprehensive list of vaccine-preventable diseases** for mandatory immunization, ranging from Tuberculosis and Poliomyelitis to Human Papilloma Virus (HPV) and boosters for Measles, Rubella, Tetanus, and Diphtheria (MRTD). It also provides a mechanism for the inclusion of new vaccines upon recommendation of the National Immunization Technical and Advisory Group (NITAG) and appropriate legislative review or in cases of pandemics.
- **Mandating the inclusion of these mandatory immunization services in the PhilHealth benefit package**, ensuring financial accessibility for all Filipinos. New vaccines added to the list will undergo evaluation by the Health Technology Assessment Council (HTAC) for inclusion in the benefit package, in line with the Universal Health Care Act.
- **Ensuring free administration of vaccines** in government health facilities, public schools, communities, and private health facilities covered by PhilHealth. It also strengthens school-based and community-based immunization programs through DOH collaboration with the Department of Education and the Department of Interior and Local Government.
- **Creating a National Immunization Technical and Advisory Group (NITAG)**, an independent, multi-disciplinary body of experts, to provide evidence-based policy and program decisions on immunization and vaccines to the DOH.
- **Emphasizing robust education and information campaigns** for healthcare practitioners and the public on the importance and benefits of immunization.

By enacting this "Mandatory Immunization Program Act," the Philippines will significantly enhance its public health infrastructure, prevent the spread of debilitating diseases, reduce healthcare expenditures on preventable illnesses, and ultimately safeguard the health and well-being of Filipinos across their entire lifespan.

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

Approved,

RAMIL L. HERNANDEZ
2nd District, Laguna

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2502

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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 “Mandatory Immunization Program Act.”

Section 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.

Section 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.

The National Immunization Program herein established shall integrate and build upon the existing immunization program of DOH, ensuring the continued provision of mandatory vaccines for infants and children. Furthermore, the existing program shall expand its coverage to include mandatory immunization services for adolescents, adults, and other vulnerable populations across all life stages, as determined by the Secretary of Health upon the recommendation of the National Immunization Technical and Advisory Group (NITAG) based on evidence and public health needs.

Section 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, Diptheria (MRTD)
- 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 inclusion of these newly determined mandatory immunization services in the Philippine Health Insurance Corporation (PhilHealth) benefit package shall be subject to a separate and subsequent evaluation by the Health Technology Assessment Council (HTAC), pursuant to Republic Act No. 11223, otherwise known as the 'Universal Health Care Act,' which shall assess its clinical effectiveness, cost-effectiveness, and budget impact for public funding.

Section 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 of 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 DOH to implement this Act.

Section 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 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., the National Institutes of Health, University of the Philippines Manila, and patient advocacy groups.

The NITAG shall have the following functions:

- a) To advise 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.

Section 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.

Section 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.

Section 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 across life stages against vaccine-preventable diseases.

Section 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.

Section 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.

Section 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.

Section 13. *Transition.* – All ongoing immunization activities under Republic Act No. 10152 shall continue seamlessly until this Act becomes fully implemented.

Section 14. *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.

Section 15. *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.

Section 16. *Effectivity.* - This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,