



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

Twentieth Congress
First Regular Session

HOUSE BILL NO. 2837



Introduced by **Representatives JOCELYN P. TULFO, RALPH WENDEL P. TULFO, and EDVIC G. YAP**

AN ACT INSTITUTIONALIZING A NATIONAL MEDICINE SYSTEM IN THE PHILIPPINES

EXPLANATORY NOTE

The rapid advancement of information and communication technology (ICT) has transformed various sectors, including healthcare. Despite these advancements, the Philippines continues to face significant challenges in ensuring equitable access to medical services, particularly in geographically isolated and disadvantaged areas (GIDAs) and during emergencies. The proposed **Telemedicine Act** seeks to institutionalize a national telemedicine system that harnesses ICT to deliver quality healthcare to all Filipinos, bridging gaps in access and strengthening the country's healthcare resilience.

The need for this legislation is underscored by persistent healthcare disparities. Over 50% of Filipinos lack timely access to medical services due to geographic and economic barriers, as reported by the Department of Health (DOH) in 2023. The *Universal Health Care Act (R.A. 11223)* mandates equitable healthcare access, and this bill operationalizes that mandate through digital solutions. Telemedicine enables remote consultations, diagnoses, and prescriptions, ensuring that even those in far-flung areas can receive timely medical attention.

The COVID-19 pandemic demonstrated the critical role of telemedicine in maintaining healthcare continuity during crises. This bill ensures systemic readiness for future emergencies by establishing protocols for telemedicine deployment during disasters, aligning with the *Philippine Disaster Risk Reduction and Management Act (R.A. 10121)*.

While existing laws such as the Philippine E-Commerce Act (R.A. 8792) and the *Data Privacy Act (R.A. 10173)* provide partial foundations for digital healthcare, a dedicated law is necessary to standardize telemedicine practices, protect patient data, and define professional accountability. The bill establishes a **National Telemedicine Council**, chaired by the DOH, to oversee policy, accreditation, and infrastructure development. It also enforces strict compliance with medical confidentiality, adhering to the *Data Privacy Act* and DOH guidelines, while ensuring that the standard of care matches traditional healthcare services. Additionally, the DOH Administrative Order No.

2020-0056 (Telemedicine Guidelines) provides a provisional framework, but legislation is essential to ensure permanence and sustainable funding.

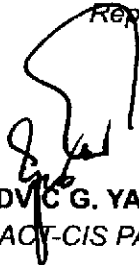
In conclusion, the *Telemedicine Act* is a timely and necessary measure to modernize Philippine healthcare, reduce disparities, and enhance the system's resilience. Its passage will fulfill constitutional mandates under *Article II, Section 15* (right to health) and *Article XIII, Section 11* (priority for marginalized sectors). We earnestly seek the immediate approval of this bill to pave the way for a more inclusive and technologically advanced healthcare system in the Philippines.

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



HON. JOCELYN P. TULFO

Representative, ACT-CIS PARTYLIST



HON. EDVIC G. YAP

Representative, ACT-CIS PARTYLIST



HON. RALPH WENDEL P. TULFO

*Representative, 2ND DISTRICT OF
QUEZON CITY*



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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 *“Telemedicine Act”*.

SECTION 2. Declaration of Policy.

The State shall protect and promote the right to health of the people and instill health consciousness among them. Hence, it is the policy of the State to continuously search for, develop, and utilize innovative ways and systems to fully protect the health of all Filipinos, from the dense populations of urban centers to the far-flung and unreachable rural and remote areas. It shall likewise be the policy of the State to encourage and strengthen initiatives for promoting health in times of emergencies and calamities through the use of information and communication technology.

SECTION 3. Objectives.

The objectives of this Act are:

- a. To create an innovative, unified, and comprehensive policy framework for the practice and development of telemedicine in the country;
- b. To provide healthcare services, including consultation, diagnosis, treatment and prescription of medicines especially in areas that have inadequate or are far from traditional healthcare institutions and professionals;
- c. To allow the use of information and communication technology in the delivery of healthcare services in time of emergencies and disasters; and
- d. To strengthen the health system and infrastructure of the country that will enable it to serve all Filipinos and withstand any unforeseen events.

1 **SECTION 4. Definition of Terms.**

- 2 a. **Telemedicine** – also referred to as telehealth or electronic healthcare, is a
- 3 system of delivering healthcare services through the use of information and
- 4 communications technology as a complement to traditional healthcare
- 5 systems. It includes the total management of a patient’s health care from
- 6 consultation, diagnosis, and treatment to prescription of medicine and
- 7 record-keeping. It likewise includes the education and training of health
- 8 personnel to capacitate them to use telemedicine systems as well as the
- 9 development of applications and programs for the furtherance of health.
- 10 b. **Information and Communications Technology** – includes but is not
- 11 limited to:
- 12 1. Digital interactive video, audio, and/or data transmission;
- 13 2. Video or web-conferencing technology;
- 14 3. Still image capture or asynchronous store and forward;
- 15 4. Modern medical devices for patient care and diagnosis.

16 **SECTION 5. National Telemedicine Council.**

17 A National Telemedicine Council is hereby established and composed of the

18 following:

- 19 a. **Secretary of Health**, who shall serve as Chairperson;
- 20 b. **Secretary of Information and Communication Technology**;
- 21 c. **Secretary of Science and Technology**;
- 22 d. **Secretary of the Interior and Local Government**;
- 23 e. **President of the Philippine Health Insurance Corporation**;
- 24 f. **Director-General of the Food and Drug Administration**;
- 25 g. **Presidents of healthcare professional associations** (Philippine Medical
- 26 Association, Philippine Nurses Association, Philippine Pharmacists
- 27 Association);
- 28 h. **Director of the Office for Telemedicine.**

29 **SECTION 6. Functions of the Council.**

30 The Council, with regard to telemedicine in the Philippines shall:

- 31 a. Establish guidelines and regulations on the practice and provision of
- 32 services;
- 33 b. Create a national roadmap for the achievement and furtherance of the
- 34 objectives of this Act;
- 35 c. Establish a national integrated database system for medical information;
- 36 d. Establish and provide for a mechanism of accreditation for electronic
- 37 healthcare providers;
- 38 e. Establish a system for electronic prescription of medicine;

- f. Capacitate and train healthcare professionals on the provision of health services;
- g. Set quality standards for systems, professionals, and services.

The Council shall convene as frequently as necessary.

SECTION 7. Implementing Agency and Secretariat.

The Department of Health shall be the lead implementing agency. An *Office of Telemedicine* shall be created under the Department to serve as the Secretariat for the Council, headed by a Director.

SECTION 8. Practice of Medicine.

Telemedicine services shall be limited to registered physicians and shall constitute acts of medical practice, establishing a doctor–patient relationship.

SECTION 9. Emergency.

The Council shall establish special rules and systems to enhance telemedicine utilization during emergencies and calamities.

SECTION 10. Privacy.

All medical records generated through telemedicine must comply with laws on healthcare confidentiality, patient rights to medical information, and recordkeeping. Violations shall be penalized to the maximum extent under the law.

SECTION 11. Standard of Care.

The standard of care shall be equivalent to traditional healthcare services.

SECTION 12. Implementing Rules and Regulations.

The Council shall promulgate implementing rules and regulations within ninety (90) days from this Act’s effectivity.

SECTION 13. Appropriations.

Initial funding shall be sourced from the current DOH budget. Continued implementation shall be a separate item in the annual DOH appropriations.

SECTION 14. Separability Clause.

If any part of this Act is declared unconstitutional, the remaining provisions shall remain in force.

SECTION 15. Repealing Clause.

All laws, decrees, executive orders, rules and regulations inconsistent with this Act are repealed or amended accordingly.

SECTION 16. Effectivity Clause.

This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in two newspapers of general circulation.

Approved,