

Republic of the Philippines  
HOUSE OF REPRESENTATIVES  
Quezon City

TWENTIETH CONGRESS  
First Regular Session

HOUSE BILL NO. 3215



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Introduced by **HON. BRIAN RAYMUND S. YAMSUAN**

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**AN ACT**  
**ESTABLISHING A MAGNA CARTA FOR BARANGAY HEALTH WORKERS**

**EXPLANATORY NOTE**

Barangay health workers (BHWs) are an integral part of the country's healthcare system. As community-based frontliners, they often serve as the first point of contact for Filipinos seeking medical assistance from their respective local government units.<sup>1</sup> They provide essential services such as health education, primary health care provider, disease prevention, and emergency response.

Despite their critical role, BHWs are classified as volunteers who are compensated in the form of honoraria or allowances, which amounts vary across LGUs and are often insufficient.<sup>2</sup> The lack of standardization leaves many BHWs without the social protections afforded to other healthcare workers.

There are over 230,000 barangay health workers nationwide.<sup>3</sup> In the 2<sup>nd</sup> District of Parañaque alone, the latest available data provides that there are 16 rural health units<sup>4</sup> covered by at least 180 barangay health workers.<sup>5</sup> The COVID-19 pandemic underscored the indispensable role of BHWs, where their responsibilities were expanded to contact tracing and vaccination drives.<sup>6</sup> It is thus important that these workers be granted appropriate benefits in recognition of their invaluable contributions

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<sup>1</sup> <https://actamedicaphilippina.upm.edu.ph/index.php/acta/article/view/9589/6761>

<sup>2</sup> *Id.*

<sup>3</sup> <https://uniglobalunion.org/news/philippines-approves-magna-carta-of-bhws/>;  
[https://openstat.psa.gov.ph/PXWeb/pxweb/en/DB/DB\\_\\_3E\\_\\_CH\\_\\_HN/0053E3D5170.px/table/tableViewLayout1/?rxid=0c726ac9-4361-42a7-8924-5109b41f5870](https://openstat.psa.gov.ph/PXWeb/pxweb/en/DB/DB__3E__CH__HN/0053E3D5170.px/table/tableViewLayout1/?rxid=0c726ac9-4361-42a7-8924-5109b41f5870);  
<https://archium.ateneo.edu/cgi/viewcontent.cgi?article=1133&context=dev-stud-faculty-pubs>

<sup>4</sup> [https://www.philhealth.gov.ph/news/2020/prnq\\_ensures.php](https://www.philhealth.gov.ph/news/2020/prnq_ensures.php);  
<https://rssoncr.psa.gov.ph/sites/default/files/Countryside-in-Figures-2019-Para%C3%B1aque-City.pdf>

<sup>5</sup> <https://paranaquecity.gov.ph/social-service-profile/>

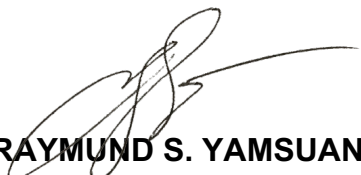
<sup>6</sup> <https://digital.car.chula.ac.th/jhr/vol38/iss1/7/>

and dedicated service to the community.

While Republic Act No. 7883 or the *Barangay Health Workers' Benefits and Incentives Act of 1995* mandates that all accredited BHWs shall be entitled to hazard and subsistence allowance, there is no national standardized rate.<sup>7</sup> The law also does not provide for insurance coverage for the BHWs, who are oftentimes exposed to health risks.

Consistent with the 1987 Constitution which declares that the State shall protect and promote the right to health of the people,<sup>8</sup> this bill aims to standardize the benefits and incentives received by BHWs across the country. In recognition of the service provided by the BHWs, the bill seeks to grant benefits such as monthly honoraria, subsistence allowance, hazard pay, transportation allowance, and GSIS coverage, as well as continuous training and educational programs. With this measure, we affirm the vital role of BHWs and ensure that they are properly equipped and fairly compensated for their invaluable service to the nation.

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



**BRIAN RAYMUND S. YAMSUAN**  
*Representative*  
2<sup>nd</sup> District of Parañaque

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<sup>7</sup> <https://archium.ateneo.edu/cgi/viewcontent.cgi?article=1133&context=dev-stud-faculty-pubs>

<sup>8</sup> 1987 Constitution, Article II, Section 15.

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

CHAPTER 1. GENERAL PROVISIONS

**SECTION 1. Short Title.** — This Act shall be known as the “Magna Carta for Barangay Health Workers.”

**SECTION. 2. Declaration of Policy.** — It is the declared policy of the State to protect and promote the right to health of the people. In line with this, the State recognizes the vital role of barangay health workers (BHWs) as frontliners in the delivery of primary healthcare services at the community level. In recognition of their indispensable contribution to the healthcare system, the State shall ensure the provision of standardized benefits, incentives, and support mechanisms to promote the welfare of BHWs.

**SECTION 3. Definition.** — As used in this Act, the term “barangay health worker” refers to a person who has undergone training programs under any accredited government and non-government organization (NGO), and who voluntarily renders primary health care services in the community after having been accredited to function as such by the local health board, in accordance with the guidelines promulgated by the Department of Health (DOH).

**SECTION 4. Coverage.** — This Act shall apply to all BHWs as defined under this Act: *Provided*, that all incentives and benefits granted under this Act shall extend only to duly accredited BHWs who have undergone at least two (2) years of training.

However, duly registered BHWs who are not yet accredited shall be entitled to a monthly honoraria and hazard allowance as provided in Section 10.

When the BHW receives a fixed salary under a permanent appointment in any government office, by election to another public office, or by employment in the private sector, coverage under this Act shall automatically cease and the BHW shall be covered under applicable laws.

## CHAPTER 2. REGISTRATION AND ACCREDITATION

**SECTION 5. Registration.** – All BHWs shall be registered with the local health board in the city or municipality in which they render service. Registered BHWs shall be given appropriate proof of said registration.

In order to qualify for registration, a BHW must:

- (a) Have rendered basic community health care services continuously and satisfactorily for at least six (6) months immediately preceding the date of the filing of application for registration in the barangay as recommended by the Rural Health Midwife (RHM) or public health nurse assigned to the barangay and by the head of the BHW association and certified by the Sangguniang Barangay;
- (b) Have completed the basic orientation and training for BHWs as prescribed by the DOH and conducted by an accredited government agency, a DOH-recognized academic institution, or an NGO;
- (c) Be at least eighteen (18) years of age as of the date of the filing of the application for registration; and,
- (d) Be physically and mentally fit.

It shall be the duty of the municipal and city health offices, in cooperation with the Provincial Health Office and the DOH, to provide BHW applicants basic orientation and training within six (6) months from the date of approval of their application.

**SECTION 6. Barangay Health Workers Registry.** – The municipal and city health offices shall regularly update and maintain the BHW Registry. The BHW Registry shall be subject to the approval of the municipal or city health board. The local health offices shall submit a copy of the updated and duly approved registry to the Provincial Health Office for consolidation and validation, which shall also be subject to the approval of the Provincial Health Board. The Provincial BHW Registry shall be posted in the municipal or city bulletin board and barangay health centers.

The Provincial BHW Registry shall be submitted on or before April 30 of every year to the Department of Health (DOH) at the regional and national levels for consolidation. The DOH is hereby mandated to maintain a national registry of BHWs.

**SECTION 7. Accreditation.** – A duly registered BHW must be accredited by the municipal or city health board.

The municipal or city health board shall issue a certificate of accreditation to qualified BHWs. In order to qualify for accreditation, the applicant BHW must:

- (a) Be registered in accordance with Section 5 hereof;
- (b) Have satisfactorily undertaken the role of a BHW in the locality as provided for in Section 8 hereof, for at least two (2) years of continuous and satisfactory service immediately prior to the filing of the application for accreditation;
- (c) Have completed a regular training program on health care service and community-based health program in order to upgrade and develop the skills and competency required of a BHW. The training program shall be institutionalized by the DOH, in cooperation with local government units (LGUs).

It shall be the duty of the municipal or city government, as the case may be, in cooperation with the provincial government and DOH, to provide the applicant BHWs the necessary support and opportunities for accreditation.

A BHW must complete the regular training program on health care service and community-based health program within five (5) years from registration.

The municipal and city health boards shall act on the applications for accreditation of BHWs not than later thirty (30) days from the date of application. The DOH shall also maintain an updated roster of accredited BHWs that is accessible to the general public.

**SECTION 8. – Roles, Duties, and Responsibilities of Barangay Health Workers.**

– As one of the key partners in a reformed health care delivery system, the DOH and LGUs shall support BHWs as they perform the following roles:

- (a) Advocate - to support, promote, and champion current health programs, projects, and activities for the improved access to quality health services and the improved health status of the community;
- (b) Educator - to guide and advise the community on the current DOH and health priorities of LGUs, such as immunization, nutrition, sanitation and hygiene, maternal health, non-communicable disease prevention, and cancer screening;
- (c) Disseminator - to maintain regular communication with local professional health workers on health events and updates, and concerns relevant to the community, and inform the same to the community for appropriate action, if necessary;

- (d) Liaison - to facilitate access to any group or association of the community with a relevant network of specific health and non-health service providers;
- (e) Record Keeper - to maintain updated records of health data, health activities, and events in the community; and
- (f) Health Care Service Provider - to assist and provide basic health care services as may be needed in the community in any health event.

The BHW shall perform the following duties and responsibilities:

- (a) Height and weight monitoring;
- (b) Monitoring and following up of defaulted cases of immunization, family planning, maternal health, compliance to tuberculosis treatment, among others;
- (c) Reporting to the barangay health data and any incidence of disease or any health cases in the community;
- (d) Communicating and coordinating with the community to participate in barangay health center activities;
- (e) Gathering of data about the overall status of health of the community;
- (f) Administering first aid;
- (g) Conducting health visits;
- (h) Conducting birth planning for pregnant women;
- (i) Conducting health education;
- (j) Strengthening referral systems;
- (k) Identifying people with disease and sickness;
- (l) Community health profiling;
- (m) Psychosocial debriefing for stress and post-calamity initiatives;
- (n) Responding in natural calamities and disasters; and
- (o) Coordinating closely with the local government health officer in the implementation of health programs in the locality.

**SECTION 9. Number of Barangay Health Workers.** – The DOH shall determine the ideal ratio of barangay health workers to the number of households: Provided, That the total number of BHWs nationwide shall not exceed one percent (1%) of the total population.

Subject to relevant laws, and in coordination with relevant government agencies and respective LGUs, the number of BHWs in every barangay shall be guided by the particular need of the barangay for BHW services.

The residents of the barangay must be given preference in the registration and accreditation of BHWs.

### CHAPTER 3. INCENTIVES, BENEFITS, AND RIGHTS OF BHWs

**SECTION 10. Incentives and Benefits.** – All accredited BHWs who are actively and regularly performing their duties and responsibilities shall be entitled to the following incentives and benefits:

- (a) Monthly Honoraria - A monthly honoraria in the amount of not less than three thousand pesos (P3,000.00) for registered BHWs and not less than five thousand pesos (P5,000.00) for accredited BHWs, subject to adjustment based on the prevailing market value as provided in Section 11 hereof;
- (b) Hazard Allowance - For BHWs exposed to risks to their health, life, or on their person, in the exercise of their duties and responsibilities, a hazard allowance in an amount to be determined by the local health board of the LGU concerned, which in no case shall be less than one thousand pesos (P1,000.00) per month, subject to existing laws, rules, and regulations;
- (c) Subsistence Allowance - For BHWs who render service in unserved or underserved barangays where they are not residents to make their services available at any and all times, an amount equivalent to the meals taken during their duty, which shall be computed in accordance with prevailing conditions as determined by the LGU concerned, which in no case shall be less than one hundred pesos (P1,000.00) per day;
- (d) Transportation Allowance - An amount of not less than one thousand pesos (P1,000.00) per month, subject to auditing rules and regulations, *provided* that the availment of transportation services are in line with the performance of the BHW's official duties and responsibilities;
- (e) One-time Gratuity Cash Incentive - An amount of not less than ten thousand pesos (P10,000.00) in recognition of the BHW's loyalty and dedication and for having continuously and satisfactorily served for at least fifteen (15) years;
- (f) Insurance Coverage. - All BHWs shall be granted insurance coverage and benefits from the Government Service Insurance System (GSIS) which shall be borne by the LGU concerned. For this purpose, the GSIS shall design an insurance benefit package suited to the needs and status of BHWs;
- (g) Training, Education, and Career Enrichment Programs. - The DOH shall, in coordination with the Department of Education (DepEd), Commission on Higher Education (CHED), Technical Education and Skills Development Authority (TESDA), DOH-recognized academic institutions, other concerned agencies, and non-government organizations, provide information on and

opportunities for education and career enrichment for accredited BHWs, such as the following:

- (i) Educational programs, which credit the years of primary health care service of the BHW towards higher education completion in institutions with stepladder curricula, thus allowing them to upgrade their skills and knowledge for community work or to pursue further training as midwives, pharmacists, nurses or doctors;
  - (ii) Continuing education, study and exposure tours, grants, field immersion, scholarships; and
  - (iii) Special training programs such as traditional medicine, disaster preparedness, and other programs that address emergent community health problems and issues.
- (h) Health Benefits. - During their incumbency, BHWs are entitled to the following health benefits:
- (i) Free medical care, including surgery and surgical expenses, medicines, x-ray and other laboratory fees, when confined in any public hospital or health institution;
  - (ii) Emergency assistance not exceeding the amount of five thousand pesos (P5,000.00) chargeable against the fund of the barangay concerned, for expenses incurred in the nearest private hospital or clinic in case of extreme emergency where there is no available public hospital;
  - (iii) Mandatory and immediate membership in the Philippine Health Insurance Corporation (PhilHealth) as indirect contributors.
- (i) Leaves. - BHWs shall be entitled to maternity, paternity, and solo parent leaves as prescribed by law: Provided, That, the BHWs shall continue to receive their monthly honoraria while on leave, for such period in accordance with existing laws and practices;
- (j) Cash Gift - All accredited BHWs are entitled to cash gift of not less than the minimum monthly honoraria to be given every December from the general fund of the barangay or from such other funds appropriated by the national government for the purpose;
- (k) Civil Service Eligibility. - A second grade eligibility shall be granted to accredited BHWs who have rendered five (5) years continuous service as such: Provided, That, should a BHW become a regular employee of the government, the total numbers of years served as such shall be credited to the BHWs service in computing the retirement benefits;

- (l) Free Legal Services. - Legal representation and consultation services shall be immediately provided by the Public Attorney's Office to an accredited BHW in cases of coercion, interference, and in other civil and criminal cases filed by or against BHWs arising out of or in connection with the performance of their duties as such;

**SECTION 11. Mandatory Annual Review.** – The local health boards shall conduct an annual review of the implementation of this Act, and the benefits, incentives, and allowances enumerated in the immediately preceding section, taking into consideration the current consumer price index as published by the Philippine Statistics Authority.

**SECTION 12. Discrimination Prohibited.** – Discrimination against any BHW by reason of gender, civil status, creed, religious or political beliefs, and ethnic groupings in the exercise of their functions and responsibilities is hereby prohibited.

**SECTION 13. Protection Against Unjust Removal.** – No accredited BHW shall be removed except for a valid cause as determined by the local health board. The local health board shall resolve termination cases against BHWs judiciously and not later than ninety (90) days from the receipt of a complaint: Provided, That if a BHW is found to be unjustly removed from service, the BHW shall be entitled to reinstatement without loss of benefits and incentives from the time of termination up to the time of reinstatement.

**SECTION 14. – Grievance Mechanism.** – The local health board shall establish a grievance mechanism as a means of processing complaints of BHWs against alleged acts of discrimination and unjust removal from the service. The decisions rendered by the local health board shall be final and executory.

**SECTION 15. Right to Self-Organization.** – All BHWs shall have the right to form, join, or assist organizations of their own choosing for the furtherance and protection of their interests.

**SECTION 16. Municipal, City, Provincial, and National Federation of BHWs.** - There shall be an organization of accredited BHWs for the purpose of electing the municipal, city, provincial, and national-level federation in order to ventilate issues affecting health care delivery system and with utmost regard to service to patients and the continuous operation of barangay health services in the interest of public health, safety, or survival of patients.

The BHW federation for municipalities, cities, and provinces shall elect their respective local federation boards of directors, and a set of national officers to comprise the national board of directors to be headed by a president. A Secretary-General shall be chosen from among the national federation members to manage the day-to-day

operation and activities of the federation. The respective boards of directors may create such other positions as may be necessary for the management of the affairs of the local and national federation.

**SECTION 17. Representation in the Local Health Board and Primary Health Care Provider Network.** – The President of the municipal or city federation of BHWs shall be a member of the municipal or city local health board. The respective presidents of the federation of BHWs of each city and municipality federation of a province shall elect from among themselves their representative to the provincial health board: *Provided*, That the BHW federation representatives to the local health boards shall not be allowed to vote on the registration, accreditation, and disciplinary or removal complaints of BHWs.

The BHWs shall also be part of the health care provider network in the implementation of health care services and programs.

**SECTION 18. Prohibition from Engaging in Partisan Political Activity.** – No BHW shall engage in any partisan political activity. Any BHW who files an application as a candidate in any political position is hereby deemed removed from the list of registered BHWs. Participation in political activities shall serve as basis for removal of the BHWs from the list of registered BHWs.

**SECTION 19. Continuous Capacity Building for Barangay Health Workers.** – The DOH shall conduct continuous capacity building for BHWs that will enhance and upgrade their knowledge and skills through various forms, including online learning and multimedia in major Philippine dialects.

The DOH shall, in coordination with TESDA and other concerned agencies, assist the LGUs in the development of education modules or materials to promote the collective experiences and learnings of BHWs as well as to promote traditional and complementary medicine.

The LGUs shall endeavor to establish their own training centers for their BHWs and other health workers in coordination with the TESDA, NGOs, and other agencies concerned.

The LGUs shall also implement a development program for BHWs that will allow them to benefit from the ladderized training as provided under Republic Act No. 10968, otherwise known as the Philippine Qualification Framework Act, and Republic Act No. 10647, otherwise known as the Ladderized Education Act of 2014, including academic credits for health-related courses.

**SECTION 20. Observance of BHW Day.** - Every barangay shall commemorate BHW Day during April 7 of every year in recognition of the service of Barangay Health

Workers, their heroic services in times of crises, and their indispensable role in promoting health and wellness among the citizenry.

The DOH, in cooperation with the Department of the Interior and Local Government (DILG) and all LGUs shall hold simple ceremonies or activities to highlight the indispensable role of BHWs in nation-building.

#### CHAPTER 4. MISCELLANEOUS PROVISIONS

**SECTION 21. Penalty Clause.** - Any local government official who violates any provision of this Act may be administratively and criminally charged in accordance with law.

**SECTION 22. Appropriations.** — The amount necessary for the implementation of this Act shall be charged against the National Tax Allotment of the LGUs, other local funds, and the special health fund under Republic Act No. 11223, otherwise known as the “Universal Health Care Act.”

**SECTION 23. Implementing Rules and Regulations.** — The DOH and DILG shall, in consultation with the DepEd, CSC, GSIS, and other concerned government agencies and non-governmental entities, promulgate the rules and regulations to implement this Act not later than one hundred eighty (180) days from the effectivity of this Act

**SECTION 24. Repealing Clause.** – Republic Act No. 7883, otherwise known as the “Barangay Health Workers' Benefits and Incentives Act of 1995” is hereby repealed. All laws, decrees, executive orders, rules and regulations, which are inconsistent with this Act are hereby repealed or amended or accordingly.

**SECTION 25. Separability Clause.** – If any provision of this Act or the application of such provision to any person or circumstance is held invalid for any reason, the remainder of this Act or the application of such provision to other persons or circumstances shall not be affected thereby.

**SECTION 26. Effectivity.** – This Act shall take effect fifteen (15) days after its publication in the *Official Gazette* or in at least two (2) national newspapers of general circulation, whichever comes earlier.

*Approved,*