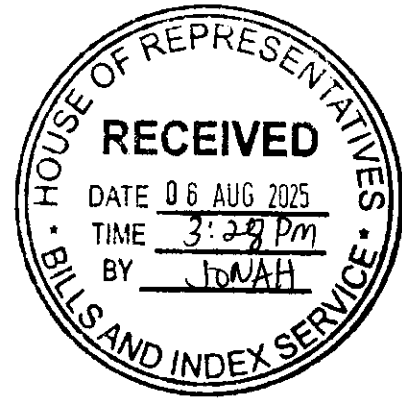


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH CONGRESS
First Regular Session

House Bill No. 3275



Introduced By Representative LORENZ R. DEFENSOR

EXPLANATORY NOTE

This bill seeks to upgrade the incentives, allowances and benefits provided to Barangay Health Workers in the country in recognition of their invaluable contributions to the society and indispensable role as front liners during public health emergencies and crises.

A "*Barangay Health Worker*", commonly known as a "BHW", is "a person who has undergone training programs under any accredited government and nongovernment organization 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 DOH."¹

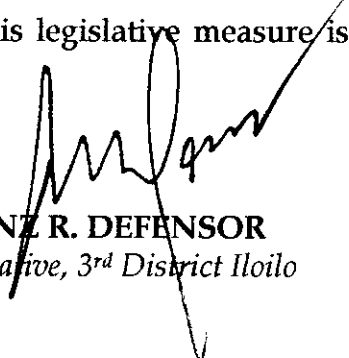
During the COVID-19 pandemic, the crucial role of BHWs as frontliners has been emphasized being tasked to transport positive COVID-19 patients to quarantine facilities, conducting contact tracing, monitoring of quarantine of patients and assisting the Department of Health in the roll-out of its vaccination program in local communities. Albeit their limited resources and long hours of work, our BHWs continue risking their lives in service of their local communities and are continuously exposed to the dangers of their work, especially during the COVID-19 pandemic.

Despite the foregoing, our BHWs are only considered as mere "volunteers"² paid with an honorarium of P1,300.00 per month instead of being given their corresponding salary, benefits, and security of tenure befitting their hard work and sacrifices for society. Under this bill, BHWs will be afforded their basic rights to security of tenure and just compensation consistent with the principles of equal pay for equal work and work of equal value.

¹ <https://www.officialgazette.gov.ph/1995/02/20/republic-act-no-7883/>.

² <https://pulitzercenter.org/stories/workers-frontlines-philippines-fight-against-coronavirus>

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



LORENZ R. DEFENSOR
Representative, 3rd District Iloilo

Republic of the Philippines
HOUSE OF REPRESENTATIVES
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TWENTIETH CONGRESS
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House Bill No. 3275

Introduced By Representative LORENZ R. DEFENSOR

AN ACT
PROVIDING FOR THE MAGNA CARTA OF BARANGAY HEALTH WORKERS

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

1
2 **Section 1. Short Title.** — This Act shall be known as the "*Magna Carta of Barangay*
3 *Health Workers.*"

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5 **Sec. 2. Statement of Policy.** — It is hereby declared the policy of the State to promote
6 a just and dynamic social order that will ensure prosperity and independence of the
7 nation and free the people from poverty through policies that provide adequate social
8 services, promote full employment, a rising standard of living, and an improved
9 quality of life for all. The State recognizes that quality health care services promote
10 social justice in all phases of national development.

11
12 It is likewise the declared policy of the State to protect and promote the right
13 to health of the people and to adopt an integrated and comprehensive approach to
14 health development. Primary Health Care is recognized as a major strategy towards
15 health empowerment, emphasizing the need to provide accessible, available and
16 affordable quality health services at the grassroots level.

17
18 Pursuant thereto, the government and all its instrumentalities recognize the
19 economic and social rights of barangay health workers to security of tenure and just
20 compensation, consistent with the principle of equal pay for equal work and work of
21 equal value.

22
23 **Sec. 3. Definition of terms.** — As used in this Act, the term *Barangay Health Worker*
24 (*BHW*) refers to a person who has undergone training under any accredited
25 government and non-government organization and who voluntarily renders primary
26 healthcare services in the community after having been accredited to function as such
27 by the local health board in accordance with the guidelines promulgated by the

Department of Health (DOH). The accredited BHW shall be given a copy of the proof of said accreditation.

A BHW shall be considered as a public health worker as defined under Republic Act No. 7305 or the *Magna Carta of Public Health Workers* for purposes of receiving any special risk allowance granted to health workers for the COVID-19 pandemic, and any other pandemic that may occur hereafter.

Sec. 4. Registration. — BHWs shall be registered with the local health board in the city or municipality in which they render service. The registered health workers shall be given appropriate proof of said registration.

The municipal and city health offices shall regularly maintain and update the BHW Registry with the assistance of the BHW Federation and shall submit the same to the municipal or city health board. The local health offices shall submit a copy of their respective updated BHW registry to the Provincial Health Office which shall consolidate all registries. Upon the validation of the Provincial BHW Federation, the consolidated Provincial Registry shall be submitted to the Provincial Health Board, and the same shall be posted in the municipal or city bulletin boards and barangay health centers.

The provincial BHW Registry shall be submitted on or before April 30 of every year to the DOH at the regional and national levels for consolidation. The DOH is hereby mandated to maintain a national register of BHWs. In order to qualify for registration, a BHW must:

- (a) Have rendered basic community healthcare 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 certified by the Rural Health Midwife (RHM) or public health nurse assigned to the barangay and by the head of the barangay health workers association;
- (b) Have completed the basic orientation and training for BHWs as prescribed by the DOH and conducted by an accredited government agency, or DOH recognized academic institution, or non-governmental organization (NGO);
- (c) Be at least eighteen (18) years of age at the date of the filing of the application for registration; and
- (d) Be physically and mentally fit.

Sec. 5. Accreditation. — To further professionalize the health care services rendered by the BHWs and ensure the health and welfare of the community, a duly registered BHW may apply for accreditation to the municipal or city health board. The municipal or city health board shall issue the certificate of accreditation to qualified BHWs. In order to qualify for accreditation, the applicant BHW must:

- (a) Be registered in accordance with Section 4 hereof;

- (b) Have completed in the locality at least two (2) years of continuous and satisfactory service immediately prior to the filing of application for accreditation;
- (c) Have completed a regular training program on health care service and community-based health program that would upgrade and develop the skills and competency of BHWs to perform their roles. The training program shall be institutionalized by the DOH, in cooperation with local government units (LGUs).

It shall be the duty of the municipal and city LGUs, in cooperation with the provincial government and the DOH, to provide the applicant BHWs the necessary support and opportunities for accreditation. This includes providing information on the availability of regular training programs for accreditation.

The municipal and city health boards or through their registration and accreditation committee shall act on the applications for accreditation of BHWs not later than 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.

Sec. 6. Number and Role of Barangay Health Workers. — The DOH, in consultation with the Department of Interior and Local Government (DILG) shall determine the ideal ratio of BHWs to the number of households per barangay: Provided, That the total number of BHWs nationwide shall not be less than one (1%) of the total population. As far as practicable, the BHW to be employed must be a resident of the barangay.

As one of the key partners in a reformed healthcare delivery system, the DOH and LGUs shall support the roles of BHWs as:

- (a) Advocate - to support, promote and champion current health programs, projects, and activities to improve access to quality health services towards 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 importance of birth plan and facility-based delivery in reducing maternal and infant deaths; newborn screening for the early detection of congenital metabolic disorders which may lead to mental retardation and even death, among others;
- (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) Coordinator - to facilitate access to any group or association of the community with a relevant network of or 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 healthcare services as may be needed in the community in any health event.

A BHW shall not be required to engage in any partisan political activity.

Sec. 7. *Barangay Health Workers in the Botika sa Barangay.* — When available and offered in the community, BHWs shall man and operate "*Botika sa Barangay*" service in accordance with the relevant issuances of DOH. They shall be given appropriate trainings by the DOH and Food and Drug Administration (FDA) in consultation with relevant professional organizations and associations.

Sec. 8. *Incentives and Benefit.* — All BHWs who are actively and regularly performing their duties shall be entitled to monthly honoraria in the amount of not less than Three thousand pesos (P3,000.00) subject to adjustment based on the prevailing market value, in addition to the following incentives and benefits:

(a) **Privileges for the BHWs.** — All accredited BHWs shall be entitled to twenty percent (20%) discount on all the items enumerated under Section 4(a) of Republic Act No. 9994 otherwise known as the "Expanded Senior Citizens Act of 2010": Provided, That the privileges shall not be claimed if the BHW is eligible for a higher discount that may be granted by the commercial establishment or other existing laws.

The commercial establishment may claim the discount granted under this Section as tax deduction based on the cost of goods sold or services rendered: Provided, That the discount shall be allowed as deduction from the gross income for the same taxable year that the discount is granted: Provided, further, that the total amount of the claimed tax deduction net of value-added tax, if applicable, shall be included in their gross sales receipt for tax purposes and shall be subject to proper documentation and to the provisions of the National Internal Revenue Code of 1997, as amended;

(b) **Hazard allowance.** — All accredited BHWs shall be entitled to 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.** — All accredited BHWs who render service within the premises of isolated barangay health stations shall be entitled to subsistence allowance equivalent to the meals they take in the course of their duty, which shall be computed in accordance with prevailing circumstances as determined by the LGU concerned. Such allowance shall, in no case, be less than One hundred pesos (P100.00) per day;

(d) **Transportation allowance.** — All accredited BHWs, in the performance of their official duties, shall be entitled to a transportation allowance of not less than One thousand pesos (P1,000.00) per month, subject to auditing rules and regulations;

(e) **One-time retirement cash incentive.** — An accredited BHW who has continuously and satisfactorily served for at least fifteen (15) years shall be entitled to a one-time retirement cash incentive of not less than Ten thousand pesos (P10,000.00) in recognition of their loyalty and dedication, which shall be borne by the municipality or city concerned. The provincial government may provide assistance for this purpose, in the case of component cities;

- (f) 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 in the following programs:
- (1) Educational programs which credit the years of primary healthcare 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;
 - (2) Continuing education, study and exposure tours, grants, field immersion, and scholarships, among others;
 - (3) Scholarship benefits in the form of tuition fees in state colleges, to be granted to one (1) child of every barangay health worker who will not be able to take advantage of the programs described in paragraphs (1), (2), and (3) hereof; and
 - (4) Special training programs such as traditional medicine, disaster preparedness and other programs that address emergent community health problems and issues.
- (g) Health benefits. — All accredited BHWs shall be entitled to the following health benefits during their incumbency:
- (1) Free medical care, including surgery and surgical expenses medicines, x-ray and other laboratory fees, when confined in any public hospital or health institution;
 - (2) 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;
 - (3) Mandatory and immediate membership in the PhilHealth as indirect contributors;
 - (4) Disability or burial assistance in case of disability or death.
- The LGUs concerned shall also endeavor to provide other health benefits to accredited BHWs not otherwise provided by law;
- (h) Insurance Coverage. — Accredited BHW's shall be granted insurance coverage and benefits by 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 unique circumstances of the BHWs;
- (i) Sick, Vacation and Maternity Leaves. — All accredited BHWs shall be entitled to sick, vacation and maternity leaves as may be prescribed in the implementing rules and regulations of this Act: 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 a cash gift 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) Disability benefit. — An accredited BHW who sustains an injury or falls ill in the course of the performance of their duties shall be entitled to Two thousand pesos (P2,000.00) for every year of service;
- (l) Civil service eligibility. — A first grade eligibility shall be granted to accredited BHWs who have rendered three (3) 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 BHW's service in the computation of retirement benefits.
- (m) Security of tenure. — No person duly registered or accredited as a BHW shall be removed except for a valid cause to be determined by the Local Health Board (LHB): Provided, That if found to be unjustly removed from service, a BHW shall be entitled to reinstatement without loss of benefits and incentives from the time of termination up to the time of his reinstatement. The LHB shall resolve termination cases against a BHW judiciously not later than ninety (90) days from the receipt of a complaint;
- (n) Free legal service. — Legal representation and consultation services shall be immediately provided by the Public Attorney's Office to a BHW in cases of coercion, interference, and civil and criminal cases filed by or against the BHW arising out of or in connection with the performance of their duties as such;
- (o) Preferential access to loan facilities. — The DOH in coordination with other concerned government agencies shall provide, within one hundred eighty (180) days after the effectivity of this Act, a mechanism that shall provide organized BHWs access to loan services. The agencies providing loan services shall set aside (1%) of their loanable funds for organized BHW groups that have community-based income-generating projects in support of health programs or activities.

Sec. 9. Review by the Local Health Board. — Every incentive or benefit for BHWs requiring expenditure of local funds shall be reviewed and approved by the LHB. Such benefits and incentives may be increased upon review of the LHB in consideration of, among others, the present Consumer Price Index (CPI) as published by the Philippine Statistics Authority (PSA).

Sec. 10. Discrimination Prohibited. — Discrimination against any BHWs 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.

Sec. 11. Right to Self-Organization. — A BHW shall have the right to freely form, join or assist organizations to obtain redress of their grievances through peaceful concerted activities, in a manner not contrary to law, and with utmost regard to service to patients and the continuous operation of barangay health services in the interest of public health; safety, and survival of patients.

Sec. 12. Representation in the Local Health Board and Primary Health Care Provider Network. — The president of the municipal or city association of BHWs shall be a

member of the municipal or city local health board. The presidents of the association of BHWs of each component city and municipality associations of a province shall elect from among themselves their representative to the provincial health board: Provided, That the BHW representatives to the health boards shall not be allowed to vote on the registration, accreditation and disciplinary or removal of complaints of BHWs.

The BHWs shall also form part of the healthcare provider network and shall participate in the implementation of healthcare services and programs.

Sec. 13. Continuous Capacity Building for BHWs. – The DOH shall conduct continuous capacity building for BHWs to enhance and upgrade their knowledge and skills, including training programs conducted online and 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 that highlight the collective experiences and learnings of BHWs and the use of traditional and complementary medicine.

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

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

Sec. 14. Appropriations. – The amount necessary for the implementation of this Act shall be charged against the National Tax Allotment (NTA) of the LGUs, other local funds and the special health fund under Republic Act No. 11223 otherwise known as the "Universal Health Care Act".

Sec. 15. Implementing Rules and Regulations. – The DOH and the DILG shall, in consultation with DepEd, CSC, GSIS, and other concerned government agencies, NGOs and stakeholders, promulgate the rules and regulations to implement this Act not later than one hundred eighty (180) days from the effectivity of this Act.

Sec. 16. Separability Clause. – If any portion or provision of this Act is declared invalid or unconstitutional, the remainder of the law or the provision not otherwise affected shall remain full force and effect.

Sec. 17. Repealing Clause. – Republic Act No. 7883. Otherwise known as the "Barangay Health Workers Benefits and Incentives Act of 1995" is hereby repealed. All other laws, decrees, orders, circulars, issuances, rules and regulations which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

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Sec. 18. Effectivity. — This act shall take effect fifteen (15) days after its publication in the Official Gazette or in any two (2) national newspaper of general circulation.

Approved.