



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

TWENTIETH CONGRESS

First Regular Session

HOUSE BILL NO. **4905**

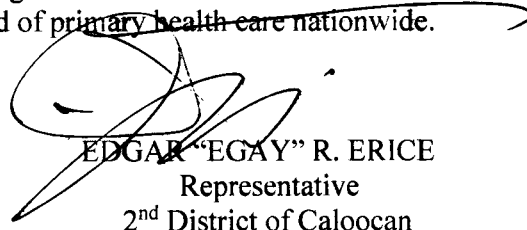
Introduced by Representative EDGAR R. ERICE

EXPLANATORY NOTE

Barangay Health Workers (BHWs) are indispensable agents in the implementation of community-based health programs. Their critical role, especially highlighted during the COVID-19 pandemic, underscores the need for a legal framework that guarantees their protection, fair compensation, professional development, and immunity from political harassment.

Currently, many BHWs are subject to arbitrary termination or removal due to political changes in barangay or local government leadership. This bill proposes to transfer the administrative authority to the Department of Health, ensuring a merit-based and apolitical system of employment and oversight. Additionally, it sets a national deployment standard—1 BHW per 500 population or 5% of households—to prevent workforce shortages and ensure accessible care.

Through this bill, we aim to empower BHWs as integral members of the national health workforce, secure their employment, and raise the standard of primary health care nationwide.


EDGAR "EGAY" R. ERICE
Representative
2nd District of Caloocan



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HOUSE BILL NO. **4905**

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AN ACT

STRENGTHENING THE RIGHTS, WELFARE, AND SECURITY OF BARANGAY HEALTH WORKERS BY TRANSFERRING ADMINISTRATIVE SUPERVISION TO THE DEPARTMENT OF HEALTH, ASSIGNING SALARY GRADES, PROVIDING PROTECTION FROM POLITICAL HARASSMENT, AND STANDARDIZING DEPLOYMENT RATIOS, AMENDING FOR THE PURPOSE REPUBLIC ACT NO. 7883, OTHERWISE KNOWN AS BARANGAY HEALTH WORKERS' BENEFITS AND INCENTIVES ACT OF 1995

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 “BHW Welfare, Protection, and Deployment Standardization Act of 2025.”

Section 2. Declaration of Policy. It is the policy of the State to recognize the indispensable role of Barangay Health Workers (BHWs) in delivering primary health care at the grassroots level. The State shall protect their rights and welfare, standardize their deployment based on population needs, ensure professional and non-partisan management through the Department of Health (DOH), and provide fair compensation through government salary grading.

1 **Section 3. Definition of Terms.** For the purposes of this Act, the following terms are
2 defined as follows:

- 3 a. **Barangay Health Worker (BHW)** – a trained and accredited frontline health
4 worker who voluntarily or professionally renders primary health care functions
5 within the community under the supervision of the Department of Health.
6
- 7 b. **Administrative Supervision** – the authority to oversee the performance,
8 deployment, hiring, evaluation, and discipline of BHWs.
9
- 10 c. **Political Harassment** – any act of intimidation, coercion, reassignment, denial of
11 benefits, or dismissal based on political affiliation or activity.
12
- 13 d. **Salary Grade** – the classification of compensation under the Salary Standardization
14 Law determining base pay and other benefits.
15
- 16 e. **Primary Health Care Services** – basic health services provided at the community
17 level such as maternal care, immunization, disease prevention, sanitation, and
18 health education.
19
- 20 f. **Health Center** – a public health facility operated by the national or local
21 government providing basic and essential health services to a specific catchment
22 population.

23 **Section 4. Transfer of Administrative Supervision to the Department of Health.**
24 Barangay Health Workers shall be placed under the direct administrative and technical
25 supervision of the Department of Health (DOH). LGUs may assist in logistics and coordination
26 but shall have no authority to hire, dismiss, reassign, or interfere in personnel matters involving
27 BHWs.

28 **Section 5. Assignment of Salary Grade.** All accredited BHWs shall be assigned a
29 minimum Salary Grade 6 under the Salary Standardization Law. Advancement in rank and
30 salary grade shall be based on performance, years of service, continuing education, and
31 expanded roles, subject to guidelines issued by the DBM, DOH, and CSC.

32 **Section 6. Standardized Benefits.** All BHWs shall receive the following:

- 33 a. Monthly salary based on the assigned salary grade;
- 34
- 35 b. Hazard pay during public health emergencies;
- 36
- 37 c. PhilHealth, SSS, Pag-IBIG, and retirement coverage;
- 38
- 39 d. Five (5) days of service incentive leave annually;
- 40
- 41 e. Annual medical examination and provision of uniforms and PPE;
- 42
- 43 f. Insurance coverage for field work-related injuries or death.
- 44

1 **Section 7. Standard Deployment Ratio of BHWs.** The Department of Health shall
2 adopt the following standard deployment ratio for Barangay Health Workers to ensure
3 equitable and efficient delivery of health services:

4
5 a. One (1) Barangay Health Worker for every 500 population, or

6
7 b. At least five percent (5%) of the total household count in the barangay, whichever is
8 higher.

9
10 c. Each barangay health center shall have no fewer than five (5) full-time BHWs, with
11 adjustments based on geographic, demographic, and epidemiological conditions

12
13 d. The DOH shall regularly assess and adjust this ratio based on health service demands
14 and local health profiles.

15
16 **Section 8. Protection from Political Harassment.** No BHW shall be suspended,
17 removed, reassigned, or denied benefits based on political beliefs or refusal to engage in
18 partisan political activities. Offenders shall be subject to administrative and criminal sanctions
19 under existing laws.

20
21 **Section 9. Security of Tenure and Civil Service Eligibility.** BHWs who have served
22 continuously for five (5) years shall be granted career service eligibility and be considered for
23 permanent appointment under special CSC qualification standards in coordination with DOH.

24
25 **Section 10. BHW Registry and Information System.** The DOH shall maintain a
26 National BHW Registry containing personal profiles, training records, deployment status, and
27 benefit entitlements to aid in program planning and protection monitoring.

28
29 **Section 11. Appropriations.** The funds necessary to implement this Act shall be
30 charged to the annual General Appropriations Act (GAA). The DOH may also realign or use
31 special health funds as needed.

32
33 **Section 12. Implementing Rules and Regulations.** The DOH, in consultation with the
34 DBM, DILG, and CSC, shall issue the implementing rules and regulations (IRR) within ninety
35 (90) days from the effectivity of this Act.

36
37 **Section 13. Repealing Clause.** All laws, decrees, orders, rules and regulations or parts
38 thereof contrary or inconsistent with the provisions of this Act are hereby repealed or modified
39 accordingly.

40 **Section 14. Effectivity.** This Act shall take effect fifteen (15) days after its publication
41 in the Official Gazette or in at least one newspaper of general circulation