



Republic of the Philippines

House of Representatives

Quezon City, Metro Manila



Twentieth Congress
First Regular Session

HOUSE BILL NO. 5304

Introduced by Representatives Romeo M. Acop and Ronaldo V. Puno

AN ACT
ESTABLISHING A DEPARTMENT OF HEALTH (DOH) - OPERATED
TERTIARY HOSPITAL IN THE CITY OF ANTIPOLO, PROVINCE OF RIZAL,
TO BE KNOWN AS THE ANTIPOLO - RIZAL TERTIARY HOSPITAL (ARTH),
AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

“The moral test of government is how it treats those who are in the dawn of life, the children; those who are in the twilight of life, the elderly; and those who are in the shadows of life – the sick, the needy, and the handicapped.”¹

The State is duty-bound to protect and promote the right to health of the people and instill health consciousness among them, as enshrined in Article II, Section 15 of the 1987 Philippine Constitution. Furthermore, Article XIII, Section 11 mandates the State to adopt an integrated and comprehensive approach to health development, endeavoring to make essential goods, health services, and other necessities available to all citizens at an affordable cost.

The right to health includes four interrelated elements: availability, accessibility, acceptability and quality of health facilities, goods, and services. These elements recognize that healthcare is more than just the presence of doctors and hospitals; it encompasses a comprehensive system that addresses the social, economic, and even the logistical demands of the citizens. By focusing on these four pillars, we can move towards a more equitable and effective healthcare system for all.

The World Health Organization (WHO) recommends a ratio of 20 hospital beds per 10,000 people, or 2 beds per 1,000 inhabitants.² However, according to Health

¹ U.S. Vice President Hubert H. Humphey, 1977.

² “Philippines needs to triple its bed capacity – DOH” at <https://www.pids.gov.ph/details/news/in-the-news/philippines-needs-to-triple-hospital-bed-capacity->

Secretary Teodoro Herbosa, the Philippines averages only 5 beds per 10,000 people – far below the global standard. Of the country's 1,300 hospitals, only 11.9% are located in Metro Manila and other urban centers, with most beds concentrated in private institutions.³ This underscores the urgent need to expand public healthcare infrastructure.

Antipolo City, with nearly one million residents, currently relies on four Level 1 hospitals under the Rizal Provincial Hospital System (RPHS). Despite these facilities and the recent completion of the Northern Tagalog Regional Hospital (NRTTH) in Montalban, Rizal, a significant portion of patients seeking care in Metro Manila's government hospitals are still Antipoleños and Rizaleños. Data from Amang Rodriguez Memorial Medical Center (Marikina City), Rizal Medical Center (Pasig City), Quirino Memorial Medical Center, and East Avenue Medical Center (Quezon City) show **that between 30% to 52% of their patients originate from Antipolo City and other municipalities in Rizal Province.**

This is not a marginal figure, it represents nearly half the patient load in some cases, placing immense pressure on Metro Manila's referral centers and exposing the geographic and systemic gaps in Rizal's healthcare infrastructure. The persistent outflow of patients from Rizal to Metro Manila hospitals is a clear indicator of unmet medical needs and the absence of a tertiary-level facility within the province's most populous city.

Moreover, while the Northern Tagalog Regional Hospital (NRTTH) is technically located within Rizal Province, its geographic position in Montalban makes it more accessible to residents of San Mateo, Montalban, and even Payatas, Quezon City, than to the population centers of Antipolo and eastern Rizal. In practice, NRTTH functions as a regional facility for northern Metro Manila and western Rizal, rather than serving the province as a whole.

This geographic reality reinforces the urgent need for a strategically located tertiary hospital in Antipolo City, which sits at the heart of Rizal's population and economic activity. Without such a facility, Antipoleños and residents of nearby municipalities continue to face long travel times, overcrowded referral centers, and limited access to specialized care – despite the province's growing healthcare demands.

Establishing a Department of Health-operated tertiary hospital in Antipolo is not merely beneficial – it is imperative. It will:

- Directly serve nearly one million Antipoleños, along with surrounding municipalities;
- Substantially reduce congestion in Metro Manila's DOH hospitals;
- Strengthen regional health equity by anchoring advanced care within Rizal Province.

[doh#:~:text=The%20World%20Health%20Organization%20\(WHO\),1%20000%20people%20in%20a%20country. \[last accessed on 10 June 2025\]](#)

³ *Id.*

This initiative will ensure timely access to specialized medical care, reduce out-of-pocket expenses, and enhance the responsiveness of our healthcare system. It is a decisive step toward fulfilling the constitutional mandate of providing available, accessible, acceptable, and quality health services to all.

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



ROMEO M. ACOP



RONALDO V. PUNO



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**ESTABLISHING A DEPARTMENT OF HEALTH (DOH) - OPERATED
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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 "Antipolo-Rizal Tertiary Hospital Act of 2025".

SECTION 2. *Declaration of the Policy.* - It is the policy of the State to promote accessible, equitable, and comprehensive healthcare services, especially in underserved and rapidly growing areas such as Antipolo City and the Province of Rizal. The State shall establish, maintain, and operate a DOH-controlled tertiary hospital to serve the healthcare needs of residents in Antipolo and nearby communities.

SECTION 3. *Establishment.* - There is hereby established a tertiary hospital in the City of Antipolo, Province of Rizal, to be operated by the Department of Health. The hospital shall serve as one of the apex hospitals for the Southern Luzon region. Any future increase in bed capacity or upgrading of services shall be guided by a hospital development plan prepared by the DOH.

SECTION 4. *Location.* - The hospital shall be located in the City of Antipolo, Province of Rizal, or in any other site within the city as may be designated by the Secretary of Health in coordination with the local government unit.

SECTION 5. *Corporate Status.* - The hospital shall be a government-owned and controlled corporation (GOCC), attached to the DOH for policy and program coordination. It shall possess juridical personality, with the authority to sue and be

sued, acquire and manage property, and perform all acts necessary to fulfill its mandate.

SECTION 6. *Objectives.* - The hospital shall primarily function as a tertiary referral center, providing comprehensive medical care, training, and research for Antipolo, Rizal, and neighboring areas.

SECTION 7. *Functions.* - The hospital shall have the following functions:

- a. Provide specialized, advanced, and comprehensive tertiary healthcare services.
- b. Serve as a training ground for health professionals and medical students.
- c. Conduct research to improve healthcare delivery.

SECTION 8. *Governing Board.* - The hospital shall be administered and managed by a Governing Board composed of the following members:

- a. The Secretary of Health as Chairman;
- b. The Medical Director of the hospital as Vice-Chairman;
- c. The regional director of the Department of Health in Region IV-A or designated representative;
- d. The President of the hospital's Medical Staff Alliance;
- e. A representative from the local government unit of Antipolo, designated by the local chief executive;
- f. A representative from the private sector, to be appointed by the Secretary of Health.

SECTION 9. *Powers and Responsibilities.* - The Board shall have the power to promulgate policies, rules, and regulations governing the operation of the hospital, approve the annual budget, and oversee its implementation.

SECTION 10. *Appropriations.* - The amount necessary to implement this Act shall be charged against the current appropriations of the Department of Health. The Secretary of Health shall immediately include in the programs of the Department the implementation of this Act, the funding shall be included in the General Appropriations Law.

SECTION 11. *Additional Funding Sources.* - The hospital may generate income through research grants, donations, and other legal means, which shall be utilized solely for the operation and development of the hospital.

SECTION 12. *Implementation.* - The Secretary of the DOH shall prepare and issue the necessary rules and regulations for the effective implementation of this Act consistent with the hospital development plan.

SECTION 13. *Separability Clause.* - If any provision or part of this Act is declared invalid or unconstitutional, the other provisions not affected thereby shall remain in full force and effect.

SECTION 14. *Repealing Clause.* - All laws, executive orders, issuances, and rules and regulations inconsistent with this Act are hereby repealed or modified accordingly.

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

Approved,