



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

Twentieth Congress
First Regular Session

HOUSE BILL NO. 6007



Introduced by Representative Carlos Andes Loria

EXPLANATORY NOTE

This bill seeks to provide for the Magna Carta of Barangay Health Workers, repealing for the purpose Republic Act No. 7883, otherwise known as the "Barangay Health Workers' Benefits and Incentives Act of 1995."

Barangay Health Workers (BHWs) form the foundation of the country's primary health care system and are indispensable in promoting health and delivering essential services at the grassroots level. They perform vital functions such as health promotion, disease prevention, maternal and child care, health education, emergency response, and coordination with higher-level health facilities. During national emergencies and public health crises such as the COVID-19 pandemic, BHWs stood at the frontlines—conducting contact tracing, health monitoring, and community education—ensuring that even the most remote and underserved communities continued to receive essential health services.

Despite their critical role, many BHWs continue to be treated merely as volunteers, receiving minimal and irregular honoraria and with limited access to social protection, training, and institutional support. Their contributions to public health and nation-building remain underrecognized in terms of legal status, compensation, and welfare benefits. Republic Act No. 7883, or the *Barangay Health Workers' Benefits and Incentives Act of 1995*, provided limited benefits to BHWs but has since become inadequate to meet present realities, particularly amid increasing health demands and inflationary pressures.

This proposed measure seeks to institutionalize a comprehensive and updated legal framework to protect, professionalize, and promote the welfare of all duly accredited Barangay Health Workers nationwide. It aims to give due recognition to the loyal and invaluable service of BHWs by granting equitable compensation, allowances, and benefits, and by ensuring their access to continuous training, social protection, and grievance mechanisms.

Under the proposed Magna Carta, BHWs shall be registered and accredited through their respective Local Health Boards, which shall issue certificates of accreditation to qualified applicants who have rendered satisfactory health services. The measure clearly defines the roles of BHWs as advocates, educators, disseminators, coordinators, record keepers, and health care service providers in their communities. Accredited BHWs shall receive a monthly honoraria of not less than Three Thousand Pesos (P3,000.00), along with hazard, transportation, and subsistence allowances, a one-time gratuity cash incentive, health and insurance benefits, paid vacation and maternity leaves, and cash gifts. Those who have rendered at least five (5) years of continuous service shall be conferred Civil Service eligibility to facilitate their career progression in government service.

The bill mandates the Government Service Insurance System (GSIS) to provide BHWs with appropriate insurance coverage at the expense of the local government unit (LGU) concerned, while the Department of Health (DOH), in coordination with DepEd, CHED, TESDA, and other relevant agencies, shall develop continuing education and career enrichment programs. The Department of the Interior and Local Government (DILG), together with the local health boards, shall establish a grievance mechanism to address cases of discrimination or unjust removal from service, while the DOH shall ensure continuous education, training, and capacity building for all BHWs.

By updating and expanding the provisions of R.A. 7883, this measure recognizes BHWs as indispensable partners in the delivery of primary health care, affirms their rights to fair compensation, protection, and professional growth, and guarantees the sustainability of community-based health services. It upholds the right of every Filipino to accessible and quality health care by strengthening the capacity, dignity, and security of those who serve on the frontlines of public health.

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


CARLOS ANDES LORIA



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AN ACT

PROVIDING FOR THE MAGNA CARTA OF BARANGAY HEALTH WORKERS, REPEALING FOR THE PURPOSE REPUBLIC ACT NO. 7883, OTHERWISE KNOWN AS THE "BARANGAY HEALTH WORKERS' BENEFITS AND INCENTIVES ACT OF 1995"

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

SECTION 1. *Short Title.* – This Act shall be known as the "*Magna Carta of Barangay Health Workers*"

SEC. 2. *Declaration of Policy.* – It is the declared policy of the State to protect and promote the right to health of the people and adopt an integrated and comprehensive approach to health development, and pursuant thereto, it shall endeavor to make essential goods, healthcare and other social services available at the grassroots level through the barangay health workers. In cognizance of the vital role of barangay health workers and in line with the country's commitment

1 to accomplish health indicator targets under United Nations sustainable
2 development goals, the State shall adopt policies that promote the welfare and
3 well-being of barangay health workers and effectively harness their potential as
4 partners in health development.

5 SEC. 3. **Coverage.** – This Act shall cover duly accredited Barangay Health
6 Workers (BHWs), whether full-time, part-time, or contractual, who are not
7 receiving fixed salaries as permanent employees of the government.

8 For purposes of this Act, *Barangay Health Worker* refers to a person who
9 has undergone training under any accredited government or non-government
10 organization (NGO), and voluntarily renders primary healthcare services in the
11 community after having been accredited to function as such by the local health
12 board.

13 SEC. 4. **Registration.** – The local health board of the city or municipality
14 shall register all BHWs and issue appropriate proof of registration.

15 The city or municipal health offices shall regularly update and maintain
16 the BHW Registry with the assistance of the BHW Federation. The BHW
17 Registry is subject to the approval of the local health board. The local health
18 offices shall regularly submit a copy of the updated and duly approved registry
19 to the Provincial Health Office for consolidation and validation with the
20 assistance of the Provincial BHW Federation, which shall also be subject to the
21 approval of the Provincial Health Board. The Provincial BHW Registry shall be
22 posted in the city or municipal bulletin board and barangay health centers.

1 The Provincial Health Board shall submit the Provincial BHW Registry to
2 the Department of Health (DOH) at the regional and national levels for
3 consolidation on or before April 30 of every year. The DOH shall maintain a
4 national registry of BHWs.

5 The city or municipal health offices shall, in cooperation with the
6 Provincial Health Office and the DOH, provide BHW applicants basic orientation
7 and training within six (6) months from the date of approval of their application
8 for registration.

9 SEC. 5. *Qualifications.* – A Barangay Health Worker must:

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

1 SEC. 6. *Accreditation.* – The local health board shall accredit issue a
2 certificate of accreditation to BHWs who possess the following qualifications:

- 3 a. Registered in accordance with Section 4 hereof;
- 4 b. Satisfactorily undertaken the role of a BHW in the locality as provided for
5 in Section 7 hereof, for at least two (2) years of continuous and satisfactory
6 service immediately prior to the filing of application for accreditation;
- 7 c. Completed a regular training program on health care service and
8 community-based health program in order to upgrade and develop the
9 skills and competency required of a BHW.

10 The DOH shall, in cooperation with local government units (LGUs),
11 institutionalize the training program for BHWs. The city or municipal
12 government shall, in cooperation with the provincial government and DOH,
13 provide the applicant BHWs the necessary support and opportunities for
14 accreditation.

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

17 The local health boards or through their registration and accreditation
18 committee shall act on the applications for accreditation of BHWs not later than
19 thirty (30) days from the date of application.

20 The DOH shall also maintain an updated roster of accredited BHWs that
21 is accessible to the general public.

1 SEC. 7. ***Barangay Health Workers Roles.*** – As one of the key partners in
2 a reformed health care delivery system, the DOH and LGUs shall support BHWs
3 as they perform the following roles:

- 4 a. Advocate - to support, promote and champion current health programs,
5 projects, and activities to improve access to quality health services
6 towards the improved health status of the community;
- 7 b. Educator - to guide and advise the community on the current DOH and
8 health priorities of LGUs such as the importance of a birth plan and
9 facility-based delivery in reducing maternal and infant deaths; newborn
10 screening for the early detection of congenital metabolic disorders that
11 may lead to mental retardation and even death, among others;
- 12 c. Disseminator - to maintain regular communication with local
13 professional health workers on health events and updates and concerns
14 relevant to the community and inform the same to the community for
15 appropriate action, if necessary;
- 16 d. Linker - to facilitate access to any group or association of the
17 community with a relevant network of or specific health and non-health
18 service providers;
- 19 e. Record Keeper - to maintain updated records of health data, health
20 activities and events in the community; and
- 21 f. Health Care Service Provider – to assist and provide basic health care
22 services as may be needed in the community in any health event.

1 SEC. 8. ***Duties and Responsibilities.*** – The BHW shall:

- 2 a. Monitor and report the height and weight of children;
- 3 b. Monitor, follow up and report the defaulted cases of immunization,
- 4 family planning, tuberculosis compliance to treatment and others;
- 5 c. Report any incidence of disease or any health cases in the community;
- 6 d. Communicate and coordinate the participation of the community in
- 7 barangay health center activities and strengthen referral systems;
- 8 e. Gather data about the overall status of health of the community,
- 9 including health profiling, and identify residents with disease and
- 10 sickness;
- 11 f. Administer first aid and collect sputum;
- 12 g. Conduct health visits, birth planning for pregnant women, and health
- 13 education;
- 14 h. Act as responders during natural calamities and disasters and conduct
- 15 psychosocial debriefing for stress and post-calamity initiatives ; and
- 16 i. Coordinate closely with the local government health officer in the
- 17 implementation of health programs in the locality.

18 SEC. 9. ***Number of Barangay Health Workers.*** – Subject to relevant laws,
19 and in coordination with relevant government agencies and respective local
20 government units, the number of BHWs in every barangay shall be guided by and
21 based on the particular need of the barangay for BHW services.

1 The DOH shall determine the ideal ratio of barangay health workers to the
2 number of households: *Provided*, That the total number of barangay health
3 workers nationwide must be at least one percent (1%) of the total population.

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

6 SEC. 10. ***Incentives and Benefits.*** - All accredited BHWs who are actively
7 and regularly performing their duties and responsibilities are entitled to the
8 following incentives and benefits:

- 9 a. Monthly Honoraria of not less than Three thousand pesos (P3,000.00),
10 subject to adjustment based on the prevailing market value;
- 11 b. Hazard Allowance in the amount that the local health board of LGU
12 concerned may determine, but must not be less than One thousand
13 pesos (P1,000.00) per month;
- 14 c. Subsistence Allowance in the amount that the local health board of
15 LGU concerned may determine, but must not be less than One hundred
16 pesos (P100.00) per day: *Provided*, That the accredited BHW shall
17 render service within the premises of isolated barangay health stations;
- 18 d. Transportation Allowance of not less than One thousand pesos
19 (P1,000.00) per month for BHWs who are not residents of their place
20 of assignment;
- 21 e. One-time Gratuity Cash Incentive of not less than Ten thousand pesos
22 (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. Discount Privileges for BHWs. – BHWs are 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 if a higher discount is granted by the commercial establishment and/or other existing laws to BHWs, the higher discount shall apply.

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 VAT, 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.

- 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

1 organizations, provide information on and opportunities for education
2 and career enrichment for accredited BHWs, such as the following:

- 3 1. Educational programs which credit the years of primary health
4 care service of the BHW towards higher education completion in
5 institutions with stepladder curricula, thus allowing them to
6 upgrade their skills and knowledge for community work or
7 pursue further training as midwives, pharmacists, nurses or
8 doctors;
- 9 2. Continuing education, study and exposure tours, grants, field
10 immersion, scholarships; and
- 11 3. Special training programs such as traditional medicine, disaster
12 preparedness and other programs that address emergent
13 community health problems and issues.

14 h. Health Benefits. – During their incumbency, BHWs are entitled to the
15 following health benefits:

- 16 1. Free medical care, including surgery and surgical expenses,
17 medicines, x-ray and other laboratory fees, when confined in any
18 public hospital or health institution;
- 19 2. Emergency assistance not exceeding five thousand pesos
20 (P5,000.00) chargeable against the fund of the barangay
21 concerned for expenses incurred in the nearest private hospital or

1 clinic in case of extreme emergency where there is no available
2 public hospital; and

3 3. Mandatory and immediate membership in the Philippine Health
4 Insurance Corporation (PhilHealth) as indirect contributors.

5 i. Insurance Coverage. - BHWs are entitled to insurance coverage and
6 benefits under the Government Service Insurance System (GSIS), the
7 cost of which is charged against the LGU concerned. For this purpose,
8 the GSIS shall design an insurance benefit package suited to the needs
9 and status of BHWs;

10 j. Sick and Maternity Leaves. – BHWs are entitled to sick and maternity
11 leaves as may be prescribed by the local health board: *Provided*, That
12 the BHWs shall continue to receive their monthly honoraria while on
13 leave;

14 k. Cash Gift. – Accredited BHWs are entitled to receive cash gift of not
15 less than the minimum monthly honoraria every December of every
16 year charged against the general fund of the barangay or city or
17 municipality concerned;

18 l. Disability Benefit. – An accredited BHW who sustains injury or
19 sickness in the course of the performance of duties, resulting in
20 permanent disability or incapacity to continue service, is entitled to
21 Two thousand pesos (P2,000.00) for every year of service;

1 m. Civil Service Eligibility. – A second grade eligibility shall be granted
2 to accredited BHWs who have rendered five (5) years continuous
3 service as such: *Provided, That,* should a BHW become a regular
4 employee of the government, the total number of years served as such
5 shall be credited to the BHWs service in computing the retirement
6 benefits;

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

12 o. Preferential Access to Loan. - The DOH shall, in coordination with
13 other concerned government agencies, establish a mechanism access to
14 loan services for BHWs. The agencies providing loan services shall set
15 aside one percent (1%) of their loanable funds for organized BHW
16 groups engaged in community-based, income generating projects that
17 support health programs or activities.

18 Notwithstanding the limitations under this section, all registered BHWs
19 are entitled to monthly honoraria and hazard allowance.

20 The LGUs concerned shall also endeavor to provide other health benefits
21 to BHWs not otherwise provided by law.

1 SEC. 11. ***Annual Review.*** - The local health board shall conduct an annual
2 review of the BHW program and performance, as well as the benefits, incentives
3 and allowances enumerated in the immediately preceding Section, taking into
4 consideration the current consumer price index as published by the Philippine
5 Statistics Authority.

6 SEC. 12. ***Prohibition Against Discrimination.*** - Discrimination against
7 any BHW by reason of gender, civil status, creed, religious, or political beliefs
8 and ethnic groupings in the exercise of their functions and responsibilities is
9 prohibited. For purposes of this section, discrimination refers to acts that unjustly
10 exclude, harass, threaten, or deny a BHW the exercise of their lawful functions,
11 benefits, or access to facilities on the basis of the foregoing prohibited grounds.

12 SEC. 13. ***Security of Tenure.*** - No accredited BHW may be removed
13 except for a valid cause as determined by the local health board. The local health
14 board shall resolve termination cases against BHWs judiciously and not later than
15 ninety (90) days from the receipt of a complaint: *Provided*, That if a BHW is
16 found to be unjustly removed from service, the BHW is entitled to reinstatement
17 without loss of benefits and incentives from the time of termination up to the time
18 of reinstatement.

19 SEC. 14. ***Grievance Mechanism.*** - The local health board shall establish a
20 grievance mechanism as a means of processing the complaints of BHWs against
21 alleged acts of discrimination and unjust removal from the service. The decisions
22 rendered by the local health board is final and executory.

1 SEC. 15. ***Barangay Health Workers Federation.*** – The DOH shall
2 facilitate the organization of accredited BHWs to form BHW federation for
3 municipalities, cities and provinces and a national federation of BHW. These
4 federations shall serve as platform to ventilate, articulate, and crystalize issues
5 affecting health care delivery system and with utmost regard to patient service,
6 continuity of barangay health services and promotion of public health, safety and
7 survival.

8 The BHW federation for municipalities, cities, and provinces shall elect
9 their respective local federation boards of directors to be headed by a president.
10 All the local federation board of directors shall comprise the BHW national
11 federation members. A Secretary-General shall be chosen from among the
12 national federation members to manage the day-to-day operation and activities
13 of the federation. The respective boards of directors may create such other
14 positions as may be necessary for the management of the affairs of the local and
15 national federation.

16 SEC. 16. ***Representation.*** – The president of the local federation of BHWs
17 shall be an *ex-officio* member of the local health board. The respective presidents
18 of the federation of BHWs of each city and municipality shall elect from among
19 themselves their representative to the provincial health board: *Provided, That the*
20 BHW representative to the local health board shall not be allowed to vote on the
21 registration, accreditation, and disciplinary or removal complaints of BHWs.

1 SEC. 17. ***Prohibition against Partisan Political Activity.*** – No BHW shall
2 engage in any partisan political activity.

3 SEC. 18. ***Continuous Capacity Building.*** – The DOH shall conduct
4 continuous capacity building for BHWs to enhance and upgrade their knowledge
5 and skills through various forms including online learning and multimedia in
6 major Philippine dialects.

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

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

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

19 SEC. 19. ***Barangay Health Workers Day.*** – Every barangay shall
20 commemorate BHW Day every April 7 of every year in recognition of the heroic
21 services of barangay health workers in times of crises, and their indispensable
22 role in promoting health and wellness among the citizenries.

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

5 **SEC. 20. Penalties.** - Any person who discriminates against a Barangay
6 Health Worker (BHW) by reason of gender, age, civil status, creed, religious or
7 political belief, ethnicity, disability, or any analogous circumstance in connection
8 with the performance of the BHW's duties shall be punished with imprisonment
9 of not less than six (6) months but not more than one (1) year or a fine of not less
10 than Fifty thousand pesos (P50,000.00) but not more than One hundred thousand
11 pesos (P100,000.00), or both, at the discretion of the court.

12 If the offender is a public official or employee, such person shall also be
13 subject to administrative sanctions under existing Civil Service laws and
14 regulations, including suspension of not less than thirty (30) days but not more
15 than six (6) months for the first offense, and dismissal from service for the second
16 offense.

17 The aggrieved BHW may claim civil damages, including moral and
18 exemplary damages, in accordance with the Civil Code and other applicable laws.

19 Any BHW who engages in partisan political activity, including
20 campaigning for or against any candidate, soliciting votes, or using barangay
21 health facilities, funds, or programs for political purposes, shall be subject to
22 suspension of benefits and incentives for a period of three (3) to six (6) months

1 pending investigation by the local health board. After the determination of guilt,
2 the accreditation of the BHW shall be revoked and shall be disqualified from re-
3 accreditation for a period of five (5) years. If the act constitutes an election
4 offense under the Omnibus Election Code, the matter shall be referred to the
5 Commission on Elections (COMELEC) for appropriate prosecution in
6 accordance with law.

7 Any public official, employee, or officer of a local government unit who
8 willfully refuses, delays, or unjustifiably withholds the benefits, honoraria, or
9 incentives due to a BHW under this Act shall be liable for administrative
10 penalties under existing civil service and local government laws, and shall further
11 be punished by imprisonment of not less than six (6) months but not more than
12 two (2) years, or a fine of not less than Fifty thousand pesos (P50,000.00) but not
13 more than One hundred thousand pesos (P100,000.00), or both, at the discretion
14 of the court, without prejudice to the obligation to pay the unlawfully withheld
15 benefits.

16 The DOH and DILG shall jointly monitor the enforcement of this section
17 and may recommend the filing of appropriate administrative or disciplinary
18 action against erring officials under their respective jurisdictions.

19 **SEC. 21. Appropriations.** – The amount necessary for the implementation
20 of this Act shall be charged against the annual budget of the respective city or
21 municipality.

1 The national government, through the Department of Health, may provide
2 special financial assistance or augmentation to resource-challenged city or
3 municipality for the benefits, honoraria, or incentives due to a BHW under this
4 Act.

5 **SEC. 22. *Implementing Rules and Regulations.*** – Within ninety (90) days
6 from the effectivity of this Act, the Secretaries of Health and the Interior and
7 Local Government shall, in coordination with the Secretaries of Budget and
8 Management and Education, Chairpersons of the Civil Service Commission and
9 Commission on Higher Education, President and General Manager of
10 Government Service Insurance System, and Director General of Technical
11 Education and Skills Development Authority, promulgate the rules and
12 regulations necessary for the effective implementation of this Act.

13 **SEC. 23. *Separability Clause.*** – If any part, section, or provision of this
14 Act is held unconstitutional or invalid, the other provisions not affected thereby
15 shall remain in full force and effect.

16 **SEC. 24. *Repealing Clause.*** – Republic Act No. 7883, otherwise known
17 as the “*Barangay Health Workers’ Benefits and Incentives Act of 1995*,” is
18 repealed. All other laws, presidential decrees, executive orders, rules and
19 regulations inconsistent with the provisions of this Act are hereby repealed or
20 modified accordingly.

1 SEC. 25. *Effectivity Clause.* – This Act shall take effect fifteen (15) days
2 after its publication in the Official Gazette or in a newspaper of general
3 circulation.

4 *Approved,*