

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Batasan Hills, Quezon City

Twentieth Congress
First Regular Session



House Bill No. **6833**

**Introduced by AKBAYAN Representatives PERCIVAL V. CENDAÑA,
JOSE MANUEL TADEO "CHEL" I. DIOKNO, and DADAH KIRAM
ISMULA and Dinagat Islands Representative KAKA J. BAG-AO**

**AN ACT
ESTABLISHING THE PHILIPPINE GERIATRIC CENTER, DEFINING
ITS PURPOSES AND OBJECTIVES, AND APPROPRIATING
FUNDS THEREFOR**

EXPLANATORY NOTE

According to the Philippine Statistics Authority, around 9.2 million people, or 8.5% of the country's total population, are senior citizens. Additionally, we have seen the increasing trend in the number of senior citizens through the years. The United Nations (2019) predicts that by 2050, 16.5% of the Filipino population will be senior citizens.

However, around 1.84 million or 20% of senior citizens cannot meet their urgent healthcare needs (Zaldarriaga, 2025). Visual impairment was the most common ailment among the elderly, followed by hypertension and osteoarthritis. According to De la Vega et al. (2020), older Filipinos also experience sensory impairments like hearing loss, cataracts, vertigo, and sleep difficulties, as well as mental health issues like depression, dementia, and anxiety disorders. According to a study by the Philippine Institute for Development Studies (2020), only 51.4% of all older people are covered by PhilHealth as members or dependents, despite the Universal Health Care Act's mandate to cover all Filipinos.

Although half of the population has access to PhilHealth and other social services programs, elderly Filipinos and their families still pay more than half, or 59.0%, of healthcare costs out of pocket, with social insurance contributing 19.8% and the national health agency covering 6.5%, respectively (PSA, 2020). Furthermore, a

sizable portion of senior citizens, about 2.94 million or 32.1%, do not have access to any of these social security services.

To address these issues, this Act shall take a thorough and integrated approach to health development. Building a specialized hospital to meet the medical and health needs of senior citizens and the aging population will ensure that they have access to high-quality healthcare services.

To fortify the rights and welfare of the senior citizens, this Act aims to provide and sustain hospital care for the prevention, diagnosis, treatment, and rehabilitation of diseases and illnesses affecting the elderly and the aging population that is prompt, cheap, high-quality, and people-centered.

This also aims to encourage and assist the DOH, other government organizations, medical facilities, local government units, and other stakeholders in implementing an integrated strategy and promoting a research-centric approach to the provision of geriatric health services across the country.

The senior citizen is an integral part of Filipino families and nation-building in our country. Hence, allocating resources towards promoting the rights and welfare of their community is right and just, as part of the broader Filipino population. No one shall be left behind, and all will be catered to.

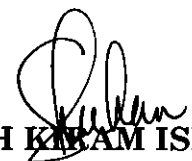
Thus, approval of this bill is earnestly sought.



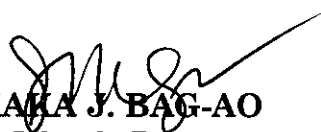
PERCIVAL V. CENDANA
Akbayan Representative



JOSE MANUEL TADEO
"CHEL" I. DIOKNO
Akbayan Representative



DADAH KIRAM ISMULA
Akbayan Representative



KARA J. BAG-AO
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FUNDS THEREFOR

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

1 **SECTION 1. *Short Title.*** – This Act shall be known as the “Philippine
2 Geriatric Center Act.”

3
4 **SEC. 2. *Declaration of Policy.*** – It is the policy of the State to protect and
5 promote the right to health of the Filipino people and to instill health
6 consciousness among them.

7 Towards this end, the State shall adopt an integrated and comprehensive
8 approach to health development. It shall ensure that quality health services are
9 accessible and available to older people and the aging population by establishing
10 a specialized hospital that will cater to their medical and health needs.

11
12 **SEC. 3. *Philippine Geriatric Center.*** – There shall be established a
13 tertiary specialty hospital for geriatric care under the direct control and
14 supervision of the Department of Health (DOH), to be known as the Philippine
15 Geriatric Center (PGC).

1 **SEC. 4. *Purposes and Objectives.*** – To carry out the provisions of this Act,
2 the PGC shall have the following purposes and objectives:

3 (a) Provide and maintain an affordable, quality, timely, and people-centered
4 hospital care for the prevention, diagnosis, rehabilitation, and treatment of
5 diseases and illnesses of older people and the aging population;

6 (b) Promote and support an integrated approach in the delivery of geriatric
7 health services nationwide, in collaboration with the DOH and other government
8 agencies, healthcare facilities, local government units (LGUs), and other
9 stakeholders;

10 (c) Develop, implement, promote, and encourage scientific research on
11 diseases and illnesses related to old age with a view to translating research
12 outcomes into policy and specialized health care solutions, and publish research
13 studies that shall serve as a critical information resource for the medical and
14 research community, in coordination with the DOH, the Philippine Council on
15 Health Research and Development and the Institute on Aging of the National
16 Institutes of Health;

17 (d) Provide consultancy services and technical assistance to DOH, other
18 government agencies, and medical institutions and associations, in setting
19 standards for the provision of geriatric care in hospitals and other healthcare
20 facilities, nursing homes, and residential care facilities, and at home by health
21 care professionals;

22 (e) Provide technical assistance and capacity building in the establishment
23 and maintenance of senior citizens' wards in government hospitals, pursuant to
24 Republic Act No. 9994, otherwise known as the "Expanded Senior Citizens Act of
25 2010"; and

26 (f) Provide education and training on geriatric care for healthcare
27 professionals, postgraduates, academics, allied healthcare providers, social
28 workers, barangay health workers, and volunteer organizations, in the practice
29 and scientific implementation of geriatric health services to older people and the
30 aging population.

31
32 **SEC. 5. *Organizational Structure and Staffing Pattern.*** – The

1 Secretary of the DOH shall determine the organizational structure and staffing
2 pattern of the PGC, subject to the evaluation and approval of the Department of
3 Budget and Management (DBM) and in compliance with civil service laws, rules
4 and regulations.

5
6 **SEC. 6. *Coordination with and Assistance from Other Government***
7 ***Agencies.*** – The PGC shall collaborate with the DOH, the Philippine Health
8 Insurance Corporation (PhilHealth), and the National Commission of Senior
9 Citizens (NCSC), in the development, implementation, and continuous
10 improvement of programs and services for the elderly.

11 The PGC, in coordination with the DOH, shall establish and maintain a
12 National Geriatric Health Registry to collect, update, and manage data on the
13 health status, care needs, and service utilization of the elderly population. This
14 registry shall inform policy formulation, health planning, and service delivery for
15 geriatric care across the country.

16 In partnership with DOH and PhilHealth, the PGC shall ensure the
17 integration of comprehensive geriatric services within the Universal Health Care
18 (UHC) framework. This shall include, but not be limited to, PhilHealth coverage
19 for age-related conditions, long-term care, palliative and rehabilitative services,
20 and preventive health interventions tailored to the specific needs of senior
21 citizens.

22 For the effective implementation of this Act, the PGC may call upon any
23 department, bureau, office, agency, or instrumentality of the government for
24 technical, logistical, or other necessary assistance in pursuit of its objectives.

25
26 **SEC. 7. *Appropriations.*** – The amount necessary for the implementation
27 of this Act shall be charged against the current year's appropriation of the DOH.
28 Thereafter, such amount as may be necessary to effectively carry out the
29 provisions of this Act shall be included in the annual General Appropriations Act.

30
31 **SEC. 8. *Implementing Rules and Regulations.*** – Within ninety (90) days
32 from the effectivity of this Act, the DOH shall, in consultation with the DBM, the

1 NCSC, civil society organizations, non-government organizations, and other
2 stakeholders, promulgate the rules and regulations for the effective
3 implementation of this Act.
4

5 **SEC. 9. *Separability Clause.*** – If any provision or part of this Act is
6 declared unconstitutional, the remaining provisions not affected thereby shall
7 remain in full force and effect.
8

9 **SEC. 10. *Repealing Clause.*** – All other laws, decrees, executive orders,
10 issuances, and rules and regulations contrary to or inconsistent with the
11 provisions of this Act are hereby repealed or modified accordingly.
12

13 **SEC. 11. *Effectivity.*** – This Act shall take effect after fifteen (15) days from
14 its publication in the *Official Gazette*, or in two (2) newspapers of general
15 circulation.
16

Approved,