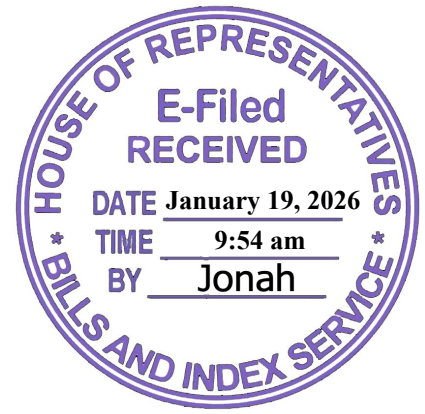


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 7176



Introduced by: **REP. SALVADOR A. PLEYTO, SR.**

EXPLANATORY NOTE

The 1987 Philippine Constitution, under Article II, Section 15, mandates that the State shall protect and promote the right to health of the people and instill health consciousness among them. Furthermore, Article XIII, Section 11 emphasizes the need for an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health, and other social services available to all the people at affordable cost.

The Philippines, an archipelago of over 7,641 islands, faces perennial challenges in the equitable distribution of healthcare services. For decades, our citizens in Geographically Isolated and Disadvantaged Areas (GIDAs) have suffered from a lack of specialist care, often having to travel hours or days across sea and land to reach tertiary hospitals in urban centers. This "archipelagic barrier" has resulted in delayed diagnoses and preventable mortalities.

The COVID-19 pandemic served as a massive "proof of concept" for digital health. Between 2020 and 2022, telemedicine became a lifeline for millions. However, as we move through 2026, we find that the practice is still largely governed by temporary Administrative Orders (AOs) and Joint Memorandum Circulars. These temporary measures lack the permanent legal "teeth" required to address complex issues of medical malpractice, cross-border licensing, and long-term PhilHealth reimbursement.

Currently, there is a fragmentation of standards. Different platforms operate under varying privacy protocols, and healthcare providers often operate in a "gray area" regarding the legality of remote prescriptions and digital certifications. This Bill, the "Philippine Telemedicine Act of 2026," seeks to bridge these gaps by establishing a National Telemedicine Council (NTC) to set uniform clinical and technical standards and provide a clear legal framework for healthcare practitioners, defining their liabilities and protecting their right to practice using modern tools.

Telemedicine is no longer just an "alternative" mode of care; it is an essential pillar of a modern healthcare system. By providing a robust regulatory framework, we transform our archipelago's geography from a barrier into a gateway for digital health innovation.

For the health of every Filipino, regardless of their island or province, the immediate passage of this bill is earnestly sought.



SALVADOR A. PLEYTO, SR.

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HOUSE BILL NO. 7176

Introduced by: **REP. SALVADOR A. PLEYTO, SR.**

**AN ACT PROVIDING FOR A NATIONAL POLICY AND REGULATORY
FRAMEWORK FOR THE PHILIPPINE TELEMEDICINE SYSTEM,
APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES**

*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 "Philippine
Telemedicine Act of 2026."

SEC. 2. *Declaration of Policy.* - It is the policy of the State to protect and
promote the right to health of the people. The State recognizes the potential of
Information and Communications Technology (ICT) to achieve universal health
care. To this end, the State shall institutionalize telemedicine as a legitimate and
essential mode of healthcare delivery.

SEC. 3. *Definition of Terms.* - For purposes of this Act:

- Telemedicine refers to the practice of medicine over a distance, where interventions, diagnostic and treatment decisions, and recommendations are based on data, documents, and other information transmitted through telecommunication systems.
- Synchronous Telemedicine refers to real-time interactions (e.g., video calls).
- Asynchronous Telemedicine refers to "store-and-forward" transmissions (e.g., sending an X-ray for later review).

- Telemedicine Practitioner refers to any healthcare professional, duly licensed by the Professional Regulation Commission (PRC), who provides services via telemedicine.

SEC. 4. *The National Telemedicine Council (NTC).* – There is hereby created a National Telemedicine Council, chaired by the Secretary of Health, which shall serve as the policy-making and coordinating body. The NTC shall:

1. Develop the National Telemedicine Roadmap.
2. Set technical and ethical standards for telemedicine platforms.
3. Accredite Telemedicine Service Providers (TSPs) in coordination with the DOH.

SEC. 5. *Physician-Patient Relationship.* – A physician-patient relationship is deemed established when a physician agrees to diagnose or treat a patient via telemedicine. The same legal and ethical duties applicable to in-person consultations shall apply.

SEC. 6. *Informed Consent and Data Privacy.* –

1. Consent: No telemedicine service shall be rendered without the patient's informed consent, which may be obtained through digital or recorded means.
2. Privacy: All telemedicine systems must comply with Republic Act No. 10173, or the "Data Privacy Act of 2012." Telemedicine providers are considered "Data Controllers" and must implement end-to-end encryption for all health data.

SEC. 7. *Integration with Universal Health Care (UHC).* – The Philippine Health Insurance Corporation (PhilHealth) shall expand its benefit packages, specifically the *PhilHealth Konsulta*, to include telemedicine consultations. Reimbursement rates for telemedicine services shall be equitable to face-to-face consultations, provided they meet NTC standards.

SEC. 8. *Electronic Prescriptions and Laboratory Requests.* – Electronic prescriptions (e-prescriptions) and digital laboratory requests issued through accredited telemedicine platforms shall be recognized as valid by all pharmacies and diagnostic centers, provided they comply with the FDA and DOH guidelines.

SEC. 9. *Penalties.* –

- Unauthorized Practice: Any person practicing telemedicine without a valid PRC license shall be penalized under the Medical Act of 1959.

- Data Breach: Violations of patient confidentiality shall be penalized under the Data Privacy Act of 2012.
- Platform Violations: TSPs operating without NTC accreditation shall face a fine of not less than ₱500,000 but not more than ₱2,000,000.

SEC. 10. Appropriations. – The amount necessary for the initial implementation of this Act shall be charged against the current year's appropriation of the Department of Health. Thereafter, such sums as may be necessary shall be included in the annual General Appropriations Act.

SEC. 11. Implementing Rules and Regulations (IRR). – Within ninety (90) days from the effectivity of this Act, the DOH, in coordination with the DICT, PhilHealth, and PRC, shall promulgate the necessary IRR.

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

SEC. 14. Repealing Clause. - All laws, decrees, orders, rules, and regulations, or parts thereof, inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

SEC. 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,