

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 7806



Introduced by
LONE DISTRICT OF DINAGAT ISLANDS REPRESENTATIVE KAKA BAG-AO,
AKBAYAN REPRESENTATIVES JOSE MANUEL TADEO "CHEL" I. DIOKNO, PERCIVAL V.
CENDAÑA, and DADAH KIRAM ISMULA

AN ACT
STRENGTHENING THE BARANGAY HEALTH CARE SYSTEM BY MANDATING THE
APPOINTMENT OF BARANGAY HEALTH WORKERS AS REGULAR MUNICIPAL OR CITY
EMPLOYEES, ELEVATING THEIR STATUS FROM VOLUNTEERS TO REGULAR
EMPLOYEES, PROVIDING FOR THEIR COMPENSATION, BENEFITS, AND SECURITY OF
TENURE, AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

Section 11, Article XIII of the 1987 Philippine Constitution mandates the State to "adopt 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 an affordable cost." This is reinforced by the **Universal Health Care (UHC) Act (R.A. 11223)**, which envisions a primary care-led system.

At the heart of this system are the **Barangay Health Workers (BHWs)**. Currently, BHWs serve as the first point of contact for approximately **114 million Filipinos**¹. However, their status remains a relic of an era that undervalued community labor:

- **The Reality of "Volunteerism":** Under R.A. 7883, BHWs are classified as "volunteers." This legal designation has been used to justify sub-minimum wage

¹ **Philippine Statistics Authority. (2021).** *2020 Census of Population and Housing (2020 CPH)*. <https://psa.gov.ph>; See also PSA (2024) *Updated Population Projections based on the 2020 Census*.

"honoraria." As of 2024, data from the **Department of Health (DOH)** shows that BHW honoraria vary from as low as **PHP 500 to PHP 4,000 per month**², which is significantly below the **PHP 13,797** monthly poverty threshold for a family of five (PSA, 2023)³.

- **The Work-Force Gap:** There are approximately **253,400 active BHWs** nationwide⁴. While they cover 42,046 barangays⁵, the current BHW-to-population ratio in urban poor and remote areas often exceeds **1:100 households**, far beyond the ideal **1:20** ratio needed for effective primary care (DOH Health Human Resources Bureau, 2024)⁶.
- **Gender and Economic Inequity:** Over **95% of BHWs are women**⁷. By keeping them in "volunteer" status, the State perpetuates a gendered pay gap where women perform professional health services—such as immunization, maternal care monitoring, and disease surveillance—without the security of tenure or retirement benefits.
- **The Mandanas-Garcia⁸ Context:** With the full implementation of the **Mandanas-Garcia Ruling**, Local Government Units (LGUs) have seen a significant increase in their **National Tax Allotment (NTA)**. In 2024 alone, the total NTA exceeded **PHP 871 billion**⁹. There is no longer a financial excuse to deny BHWs the status of regular employees.

This bill seeks to professionalize the BHW workforce by elevating them to **Regular Employee** status with a minimum salary of **Salary Grade 1**. This ensures that the frontliners of our health system are provided with the same dignity, social protection, and security of tenure as the officials they serve.

² **Philippine Institute for Development Studies (PIDS).** (2023). *Review of Benefits and Incentives for Barangay Health Workers* (Discussion Paper Series No. 2023-01).

³ **Philippine Statistics Authority.** (2024). *Official Poverty Statistics of the Philippines: Full Year 2023*. <https://psa.gov.ph/poverty-press-release>.

⁴ **Department of Health [DOH].** (2024). *National BHW Registry Annual Report (Fiscal Year 2023-2024)*. Health Human Resources Bureau.

⁵ **Philippine Statistics Authority.** (2024). *Philippine Standard Geographic Code (PSGC) Summary of Barangays by Region*.

⁶ **World Health Organization.** (2018). *WHO guideline on health policy and system support to optimize community health worker programmes*. <https://apps.who.int/iris/handle/10665/275474>.

⁷ **Department of Budget and Management [DBM].** (2023). *Local Budget Memorandum No. 87: National Tax Allotment (NTA) Shares of LGUs for FY 2024*. <https://www.dbm.gov.ph>.

⁸ **Mandanas, et al. v. Executive Secretary, et al.**, G.R. No. 199802 (July 3, 2018).

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



REP. KAKA BAG-AO

Lone District of Dinagat Islands



REP. PERCIVAL CENDAÑA

AKBAYAN Party-list



REP. JOSE MANUEL TADEO "CHEL" I. DIOKNO

AKBAYAN Party-list



REP. DADAH KIRAM ISMULA

AKBAYAN Party-list

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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 **"BHW Employment and**
2 **Professionalization Act."**

3 **SEC. 2. Declaration of Policy.** – It is the policy of the State to protect and promote the
4 right to health of the people (**Art. II, Sec. 15, 1987 Constitution**). Recognizing Barangay
5 Health Workers (BHWs) as the backbone of the healthcare system, the State shall:

6 **(a) Guarantee Labor Rights and Tenure:** Pursuant to the Constitutional mandate
7 to protect the rights of all workers to security of tenure and a living wage (Art.
8 XIII, Sec. 3), the State shall abolish the "volunteer" status of BHWs and grant
9 them the status of regular public servants, ensuring protection against arbitrary
10 removal and political displacement.

(b) Professionalize for Universal Health Care: In line with **R.A. 11223 (UHC Act)**, the State shall integrate BHWs into the formal health workforce as primary care providers. This professionalization ensures the delivery of quality service and fulfills the State’s obligation to provide accessible, community-based health interventions.

(c) Ensure Fiscal Equity: Guided by the **Mandanas-Garcia Ruling (G.R. No. 199802)**, the State shall mandate that the increased National Tax Allotment (NTA) of Local Government Units (LGUs) be prioritized for the regular compensation of BHWs, ensuring that fiscal decentralization directly translates to strengthened grassroots social services.

(d) Implement Gender Justice: Pursuant to **R.A. 9710 (Magna Carta of Women)**, the State shall recognize the economic value of community health work—a sector predominantly composed of women—by providing just compensation and benefits commensurate with the essential nature of their labor.

SECTION 3. Definition of Terms. –

(a) Barangay Health Worker (BHW): An accredited person who has undergone DOH-standardized training and provides primary health care services.

(b) Regular Employment: A position in the local government unit with security of tenure, entitled to all benefits under the Civil Service rules and the Labor Code.

SECTION 4. Appointment of BHWs as Regular Employees. – All accredited BHWs who have rendered at least two (2) years of continuous service, **upon the recommendation of the concerned Barangay Chairperson**, shall be appointed as **regular employees** by the City or Municipal Mayor.

(a) Ratio: Each city shall maintain a ratio of at least one (1) BHW for every twenty (20) households. Municipalities shall likewise maintain a ratio of one BHW for every 20 households, as far as practicable.

(b) **Security of Tenure:** BHWs shall not be terminated except for just cause and after due process, regardless of changes in local political leadership.

SECTION 5. Compensation. – BHWs appointed under this Act shall receive a minimum monthly salary equivalent to **Salary Grade 1 (SG-1)** as prescribed under Republic Act No. 11466 or the Salary Standardization Law of 2019.

SECTION 6. Additional Benefits. – In addition to the basic salary, BHWs shall be entitled to:

1. **Hazard Allowance:** Not less than 20% of the basic salary for those in geographically isolated and disadvantaged areas (GIDA).
2. **PhilHealth Integration:** Pursuant to R.A. 11223, PhilHealth shall provide additional capitation payments to LGUs specifically for BHW performance incentives.
3. **Social Security:** Mandatory coverage under GSIS, PhilHealth, and Pag-IBIG.
4. **Civil Service Eligibility:** BHWs who have served for five (5) consecutive years shall be granted a **Special BHW Eligibility**, equivalent to a first-level eligibility for health-related positions.

SECTION 7. Special BHW Assistance Program. – The DOH and DILG shall establish a fund to subsidize the salaries of BHWs in 4th, 5th, and 6th class municipalities for a period of ten (10) years to assist LGUs in the transition from volunteerism to regular employment.

SECTION 8. Appropriations. – The funding for the initial year shall be sourced from the DOH's current appropriations and the NTA of the respective LGUs. Subsequent funding shall be included in the annual General Appropriations Act and local ordinances.

SECTION 9. Implementing Rules and Regulations (IRR). – The DILG, DOH, and CSC, in consultation with BHW national unions, shall promulgate the IRR within ninety (90) days of this Act's effectivity.

63 **SECTION 10. Non-Diminution of Benefits.** – Nothing in this Act shall be construed to
64 reduce existing benefits currently enjoyed by BHWs under R.A. 7883.

65 **SECTION 11. Separability Clause.** – If any provision of this Act is declared
66 unconstitutional, the remainder shall remain in effect.

67 **SECTION 12. Repealing Clause.** – R.A. 7883 and all other laws inconsistent with this
68 Act are hereby amended or repealed.

69 **SECTION 13. Effectivity.** – This Act shall take effect fifteen (15) days after publication
70 in the Official Gazette.

Approved,