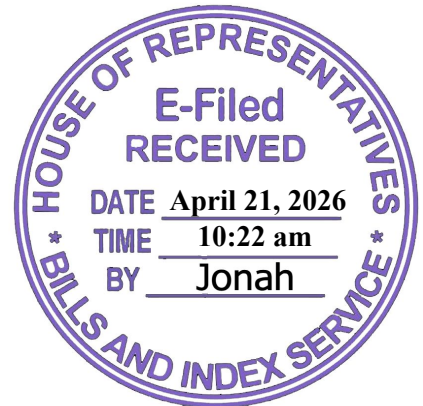




Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

Twentieth Congress
First Regular Session

HOUSE BILL NO. 8900



Introduced by Representatives Ferdinand Martin G. Romualdez, Yedda Marie K. Romualdez, Andrew Julian K. Romualdez and Jude A. Acidre

AN ACT
INSTITUTIONALIZING ANNUAL BARANGAY-BASED PREVENTIVE HEALTH SCREENING DRIVES FOR THE EARLY DETECTION OF PRIORITY NON-COMMUNICABLE DISEASE, ESTABLISHING REFERRAL AND TREATMENT PATHWAYS, ENSURING DATA PRIVACY AND COMMUNITY HEALTH PROFILING, PROVING CAPACITY-BUILDING AND AWARENESS CAMPAIGN, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES

EXPLANATORY NOTE

Non-communicable diseases (NCDs) are a growing public health crisis in the Philippines, consistently comprising the majority of the top five leading causes of death nationwide. According to the Philippine Institute of Development Studies (PIDS), if no urgent action is taken, the incidence of NCDs is projected to double by 2040, placing an overwhelming strain on both families and the healthcare system.

Unlike communicable diseases, NCDs often remain undetected in their early stages. Patients frequently seek medical attention only when complications have already developed, resulting in premature deaths and catastrophic out-of-pocket expenses. The rising prevalence of hypertension, diabetes, malnutrition, cardiovascular disease, and certain cancers underscores the urgent need for proactive, community-based prevention and early detection strategies.

This proposed measure seeks to complement and operationalize the intent of Republic Act No. 11223, otherwise known as the Universal Health Care (UHC) Act, by strengthening its preventive health component. While the UHC law ensures access to healthcare, this bill directly addresses the gaps in early detection and community-level screening, which are vital in reducing the long-term health and economic burden of NCDs.

The measure institutionalizes annual barangay-based NCD screening drives to be carried out nationwide, preferably every October, designated as “Barangay NCD Screening Month.” Under the leadership of the Department of Health (DOH) and in coordination with local government units (LGUs), Rural Health Units (RHUs), and Barangay Health Workers (BHWs), these drives will:

1. Provide free and accessible community screening for priority NCDs, with emphasis on indigent families, senior citizens, and other vulnerable groups;
2. Establish referral and treatment pathways to ensure timely linkage to appropriate health facilities and social support;
3. Develop barangay-level health data profiles to inform local health programs, while ensuring compliance with the Data Privacy Act of 2012;
4. Build the capacity of BHWs and health personnel through regular training on screening protocols, patient referral, and data management; and
5. Conduct sustained information and education campaigns on healthy lifestyles, nutrition, and the importance of early detection.

By empowering barangays as the frontline of NCD prevention, this measure will not only save lives but also reduce the economic and social costs of chronic illnesses. It ensures that communities—especially the poor and vulnerable—are equipped with the tools, knowledge, and access necessary to fight NCDs at their root, while fulfilling both national health goals and international commitments.

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



FERDINAND MARTIN G. ROMUALDEZ



YEDDA MARIE K. ROMUALDEZ

A stylized handwritten signature in black ink, consisting of a large 'A' followed by 'JR'.

ANDREW JULIAN K. ROMUALDEZ

A stylized handwritten signature in black ink, featuring a large 'J' and 'A' with a horizontal line crossing through them.

JUDE A. ACIDRE



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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 “*Barangay-Based Preventive Health Screening Act.*”

SEC. 2. *Declaration of Policy.* – It is hereby declared the policy of the State to protect and promote the right to health of the people, in accordance with Article II, Section 15 of the 1987 Constitution. Recognizing the growing burden of non-communicable diseases (NCDs) such as hypertension, diabetes, cardiovascular conditions, certain cancers, and nutrition-related disorders, the State shall institutionalize preventive and early detection strategies at the community level to reduce morbidity, mortality, and health care costs, while ensuring equity and accessibility for all.

SEC. 3. *Objectives.* – This Act aims to

- a. Institutionalize annual barangay-level screening drives focused on major NCDs;
- b. Provide free and accessible screening for hypertension, diabetes, malnutrition, and selected cancer-risk assessments;
- c. Strengthen community-based referral systems to ensure timely confirmatory diagnosis, treatment, and follow-up care;
- d. Establish barangay health data profiles for NCDs to guide responsive health planning and local program development; and
- e. Promote health awareness and preventive practices related to lifestyle, nutrition, and NCD risk reduction.

SEC. 4. *Definition of Terms.* – For purposes of this Act:

- a. ***Non-communicable diseases (NCDs)*** refer to the medical conditions not transmissible from person to person, including but not limited to hypertension, diabetes, cardiovascular disease, cancers, and nutrition-related disorders.

- b. ***Barangay Health Workers (BHWs)*** refer to the community-based health workers accredited by the Department of Health (DOH) who assist in health promotion, NCD screening drives, and referral pathways.
- c. ***Referral Pathways*** refers to the structured linkages between barangay-based health services and municipal, city, or higher-level health facilities for confirmatory diagnosis, management, and treatment.

SEC. 5. *Annual Barangay-Based Disease Screening Operation.* – Through implementing agencies led by the Department of Health (DOH), in coordination with Local Government Units (LGUs), municipal or city health centers, Barangay Health Workers (BHWs), and Rural Health Units (RHUs), there shall be an annual barangay-based screening drive for early detection of major NCDs, such as but not limited to hypertension, diabetes, tuberculosis, malnutrition and cancer-risk screening.

The annual screening operation shall last for a month, preferably every month of October; *Provided*, that it is subject to adjustment determined on the local conditions and capacity. *Provided*, further, that priority shall be granted to indigent families, senior citizens, and other vulnerable populations.

SEC. 6. *Data Management and Privacy.* – Data gathered in screening drives shall be consolidated and maintained in a health data profile at the barangay level. Such data shall be submitted to the DOH and LGUs for the formulation of responsive health programs, targeted interventions, and community-specific initiatives to address the identified health needs of citizens. Liability and strict compliance with Republic Act No. 10173, otherwise known as the Data Privacy Act of 2012, shall be

observed in health information collected; *Provided*, that such data shall be limited to health planning, program development, and service delivery, and shall not be disclosed to unauthorized persons or entities.

The DOH shall mandate standards for secure storage, retention, and reporting of the screening data.

SEC. 7. *Referral and Treatment Pathways.* – Health facilities conducting screening shall employ referral mechanisms to those individuals found at risk of NCDs. There shall be BHWs and municipal/city health personnel on duty to assist patients in navigating and accessing higher levels of care.

The Department of Health (DOH) shall coordinate with PhilHealth to ensure screening results are linked to health benefits and treatment packages. Social support shall be extended to vulnerable and indigent populations through DSWD and other agencies.

SEC. 8. *Personnel Capacity Building.* – The DOH, in collaboration with LGUs, shall design and provide regular training for BHWs and local health personnel on:

- a. NCD screening protocols and techniques;
- b. Data management and confidentiality safeguards;
- c. Patient navigation and referral systems; and
- d. Community-based health promotion for NCD prevention.

SEC. 9. *Information and Awareness Campaign.* – The DOH, in coordination with the LGU and the municipal/city health office, shall lead a community-specific

campaign to increase awareness on the importance of early detection of NCDs, healthy lifestyle practices to prevent NCDs and the availability of free annual barangay-based NCD screening services.

SEC. 10. *Appropriations.* – The amount necessary for the initial implementation of this Act shall be charged against the current appropriations of the Department of Health. Thereafter, the necessary sums for its continued operation and maintenance shall be included in the annual General Appropriations Act (GAA) under the budget of the DOH. Subsequently, LGUs shall allocate funds from their Internal Revenue Allotment (IRA) and other health-related budgets to support implementation.

SEC. 11. *Implementing Rules and Regulation (IRR).* – Within one hundred twenty (120) days from the effectivity of this Act, the DOH, in consultation with the DILG, DSWD, PhilHealth, League of Provinces, League of Cities, League of Municipalities, and *Liga ng mga Barangay*, shall issue the necessary IRR for its effective implementation.

SEC. 12. *Separability Clause.* – If, for any reason, any part or provision of this Act shall be held unconstitutional or invalid, other parts of provisions thereof not affected shall thereby continue to be in full force and effect.

SEC. 13. *Repealing Clause.* – All laws, decrees, executive orders, proclamations, rules and regulations, and other issuances or parts thereof contrary to or inconsistent with this Act are hereby repealed or modified accordingly.

SEC. 14. *Effectivity.* – This Act shall take fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,