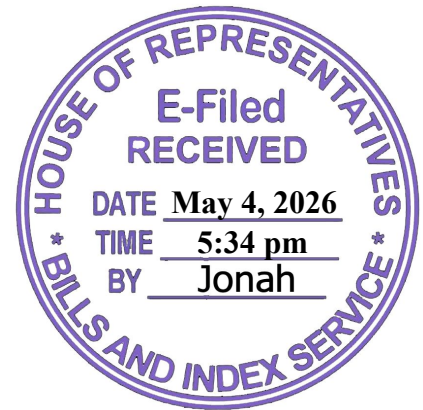


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH CONGRESS
First Regular Session

HOUSE BILL NO. 9065



Introduced by **Representative Ryan S. Recto**

In current medical practice in the Philippines, the determination of who may provide consent on behalf of a patient who lacks decision-making capacity is often guided by the customary application of the “next-of-kin” principle. However, this custom does not have a clear statutory basis under existing laws, including the Family Code and the Civil Code of the Philippines. While informal practices may sometimes accommodate companions or partners, such recognition is inconsistent and dependent on institutional discretion rather than guaranteed rights.

At present, the closest reference to “next-of-kin” in the context of healthcare decision-making may be found in the Code of Ethics of the Philippine Medical Association (PMA), which provides that consent may be obtained from the patient’s “next-of-kin or their legally authorized representative.”

This gap in the law has led to delays in treatment, ethical uncertainty among healthcare providers, and, in some cases, preventable harm to patients. It disproportionately affects individuals in nontraditional or underserved family arrangements, including unmarried partners, solo parents, and those estranged from their biological families, whose chosen caregivers are frequently excluded from participating in critical medical decisions. The absence of a legally recognized mechanism to designate a trusted decision-maker does not uphold the fundamental principle of patient autonomy and fails to reflect the evolving realities of Filipino family structures.

The Right to Care Act, seeks to address these longstanding gaps by establishing a legal framework for the recognition of Healthcare Proxies. Under this Act, any qualified adult may designate a Healthcare Agent of their choosing, who shall be authorized to make healthcare decisions on their behalf in the event of incapacity. The authority granted to the Healthcare Agent shall be limited exclusively to medical and healthcare-

related decisions and shall not extend to matters involving property, inheritance, or civil status.

The proposed measure seeks to promote timely and appropriate medical intervention while addressing the uncertainty and disputes that often arise in the absence of a clearly recognized decision-maker. It provides a more coherent legal basis for healthcare providers in the exercise of their duties and, at the same time, upholds the individual's right to designate a trusted person to act on their behalf during periods of incapacity. In doing so, the measure supports the development of a more responsive, inclusive, and patient-centered healthcare system.

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



Ryan S. Recto
Representative
6th District, Batangas

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

TWENTIETH CONGRESS
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HOUSE BILL NO. 9065

Introduced by **Representative Ryan S. Recto**

AN ACT
RECOGNIZING THE RIGHT OF PATIENTS TO DESIGNATE A HEALTHCARE
AGENT THROUGH A HEALTHCARE PROXY, PROMOTING ADVANCE CARE
PLANNING, AND PROVIDING FOR SUPPORTED HEALTHCARE DECISION-
MAKING IN THE HEALTHCARE SYSTEM

*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 “*Right to Care Act*”.

2
3 Sec 2. *Declaration of Policy.* – The State recognizes health as a fundamental human
4 right and affirms the dignity, autonomy, and well-being of every person in the delivery of
5 healthcare services.

6
7 Pursuant to Article II, Section 15 of the Constitution, the State shall protect and
8 promote the right to health of the people and instill health consciousness among them.

9
10 Towards this end, the State shall:

- 11
12 a) Adopt a rights-based approach to healthcare, recognizing the right of every
13 person to participate in decisions affecting the person’s health and medical
14 care;
15
16 b) Promote advance care planning by enabling individuals to designate a
17 Healthcare Agent through a Healthcare Proxy;
18
19 c) Strengthen universal access to healthcare services, consistent with the
20 Universal Health Care Act and the country’s commitments to the Sustainable
21 Development Goals; and

- 1 d) Promote supported decision-making that respects the rights, will, and
2 preferences of individuals.
3

4 And finally, the recognition of Healthcare Agents and Healthcare Proxies shall be
5 implemented in an inclusive, non-discriminatory, and person-centered manner within the
6 healthcare system.
7

8 Sec 3. *Definition of Terms.* – For the purposes of this Act:
9

- 10 a) *Advance Directive* refers to a written or recorded instruction indicating a
11 person's preferences concerning the provision, withholding, or withdrawal of
12 Healthcare under specified conditions;
13
- 14 b) *Healthcare* refers to any care, treatment, service, or procedure undertaken
15 to maintain, diagnose, monitor, or otherwise affect a person's physical or
16 mental condition;
17
- 18 c) *Healthcare Agent* refers to a natural person at least twenty-one (21) years
19 of age designated by a Principal through a Healthcare Proxy to make
20 Healthcare Decisions on the Principal's behalf;
21
- 22 d) *Healthcare Decision* refers to any decision to consent to, refuse, or withdraw
23 consent to the provision of Healthcare on behalf of the Principal;
24
- 25 e) *Healthcare Provider* refers to any individual, facility, or institution licensed,
26 accredited, or otherwise authorized by law to provide Healthcare;
27
- 28 f) *Healthcare Proxy* refers to a written instrument executed by a Principal
29 designating a Healthcare Agent to make Healthcare Decisions on the
30 Principal's behalf;
31
- 32 g) *Incapacity* refers to a temporary or permanent loss of decision-making
33 capacity characterized by the inability of a person to understand information
34 concerning the person's health condition; understand the consequences of
35 decisions or actions on the person's life or health or on the life or health of
36 others; understand information about the nature of a proposed treatment,
37 including its methodology, effects, and possible side effects; or communicate
38 consent to treatment or hospitalization or information regarding the person's
39 own condition or as determined by the healthcare provider;
40
- 41 h) *Next of Kin* refers to the closest living relative of the Principal in the following
42 order of priority, namely, spouse, adult child, parent, adult sibling,
43 grandparent, or other relative as determined under applicable laws;
44
- 45 i) *Principal* refers to a natural person who designates a Healthcare Agent
through a Healthcare Proxy; and

- 1
2 j) *Supported Healthcare Decision-Making* refers to assistance provided by
3 persons chosen by an individual to help the individual understand, make, or
4 communicate decisions while respecting the individual's rights, will, and
5 preferences.
6

7 Sec 4. *Right to Designate a Healthcare Agent.* – Every person may designate a
8 Healthcare Agent through a Healthcare Proxy to make Healthcare Decisions on the
9 person's behalf in the event of incapacity.
10

11 The designation of Healthcare Agent shall be valid if it is freely and voluntarily
12 made by the Principal; executed without fraud, coercion, undue influence or
13 misrepresentation; based on the Principal's freedom of choice; and, reduced into a
14 Healthcare Proxy: *Provided*, that the Principal may modify, replace, or revoke the
15 Healthcare Proxy at any time and such designation shall not constitute a waiver of the
16 Principal's right to make Healthcare Decisions whenever capable of doing so.
17

18 In the absence of a Healthcare Proxy, Healthcare Decisions may be made by the
19 Next of Kin and such authority shall only apply when no Healthcare Agent has been
20 designated or when the designated Healthcare Agent is unavailable.
21

22 Sec 5. *Healthcare Proxy Form and Acceptance.* – A Healthcare Proxy may be
23 executed in any written form at any given time and shall indicate the name of the Principal
24 and the Healthcare Agent; the authority of the Healthcare Agent to make Healthcare
25 Decisions; and acceptance by the Healthcare Agent: *Provided*, that the acceptance may
26 be indicated in the Healthcare Proxy or made at the point of care when the Healthcare
27 Agent is called upon to act.
28

29 Sec 6. *Authority and Standards of the Healthcare Agent.* – Subject to any
30 limitations expressly provided in the Healthcare Proxy or in any Advance Directive
31 executed by the Principal, the Healthcare Agent shall have the authority to make
32 Healthcare Decisions on behalf of the Principal within healthcare settings.
33

34 The Healthcare Agent shall have the right to receive relevant medical information
35 and records necessary to make informed Healthcare Decisions. Disclosure of such
36 information shall be deemed authorized for purposes of this Act.
37

38 Healthcare Decisions made by the Healthcare Agent shall be exercised while
39 physically present, and shall be made in accordance with the known wishes, will, and
40 preferences of the Principal, or, in the absence thereof, in the best interests of the
41 Principal.
42

43 In the event of the death of the Principal, the Healthcare Agent may likewise make
44 the necessary arrangements for the funeral and burial of the Principal.
45

1 Healthcare Decisions made by a duly designated Healthcare Agent shall have
2 priority over decisions made by any other person, including members of the Principal's
3 family, except where the Principal has expressly stated a contrary wish. In cases of
4 disagreement among family members or other persons, the decision of the Healthcare
5 Agent shall prevail.

6
7 A Healthcare Agent shall be free from liability for Healthcare Decisions made in
8 good faith and in accordance with this Act.

9
10 Where neither the Healthcare Agent nor the Next of Kin is available or able to
11 decide on behalf of the Principal, the Healthcare Provider may determine the appropriate
12 course of action in accordance with applicable laws, clinical practice guidelines, and
13 institutional protocols.

14
15 Nothing in this Act shall prevent a Healthcare Provider from seeking ethical
16 consultation, mediation, or judicial relief in cases involving substantial uncertainty,
17 conflict, or allegations of abuse or bad faith in the exercise of authority by the Healthcare
18 Agent.

19
20 *Sec 7. Commencement and Termination of Authority.* – The authority of the
21 Healthcare Agent shall commence upon a determination of Incapacity by a Healthcare
22 Provider and shall cease once the Principal regains decision-making capacity and upon
23 the revocation of the healthcare proxy.

24
25 The Principal may revoke the Healthcare Proxy by notifying a Healthcare Provider
26 orally or in writing; executing a subsequent Healthcare Proxy; or by any act clearly
27 indicating the intent to revoke the designation.

28
29 *Sec 8. Obligations of Healthcare Providers.* – Healthcare Providers shall recognize
30 a valid Healthcare Proxy; determine the presence or absence of incapacity in accordance
31 with existing laws and clinical guidelines; make reasonable efforts to notify the Healthcare
32 Agent when the Principal is unable to make Healthcare Decisions; and comply in good
33 faith with Healthcare Decisions made by the Healthcare Agent.

34
35 Healthcare Providers shall not be held civilly, criminally, or administratively liable
36 for actions taken in good faith reliance on Healthcare Decisions made by a Healthcare
37 Agent under this Act.

38
39 *Sec 9. Duties of Government Agencies.* – The following government agencies shall
40 perform the respective duties provided under this Act:

41
42 a) Department of Health (DOH), as the lead implementing agency, shall:

43
44 i) Develop policies, standards, and guidelines to ensure the effective
45 recognition and implementation of Healthcare Proxies and the exercise
46 of authority by Healthcare Agents in healthcare settings;

- ii) Integrate advance care planning and the recognition of Healthcare Proxies into hospital policies, patient rights frameworks, and clinical practice guidelines;
- iii) Ensure that public and private healthcare facilities establish appropriate protocols for recognizing Healthcare Proxies and facilitating Healthcare Decisions made under this Act;
- iv) Conduct capacity-building and training programs for Healthcare Providers on supported healthcare decision-making, patient autonomy, and the implementation of this Act; and
- v) Monitor compliance with this Act and coordinate with appropriate regulatory bodies in enforcing administrative accountability.

b) Philippine Health Insurance Corporation (PhilHealth) shall:

- i) Establish appropriate systems for the recording and recognition of Healthcare Proxy designations within its membership and health information systems;
- ii) Ensure that Healthcare Decisions made pursuant to this Act are recognized in the processing of benefit claims and healthcare coverage; and
- iii) Support public information initiatives to promote awareness of advance care planning and the designation of Healthcare Agents.

c) Department of the Interior and Local Government (DILG) and Local Government Units (LGUs) shall:

- i) Support the local implementation of this Act through public education and community-based information campaigns;
- ii) Assist in integrating awareness of Healthcare Proxies and advance care planning into local health programs and services; and
- iii) Encourage the participation of barangay health workers and local health personnel in promoting public awareness of the rights and mechanisms provided under this Act.

d) Department of Information and Communications Technology (DICT) shall:

- i) Integrate the Healthcare Proxy system into the national e-Government platform, including the eGovPH App, to enable the secure digital

1 creation, storage, and retrieval of Healthcare Proxies and Advance
2 Directives;

- 3
- 4 ii) Develop and maintain interoperable digital infrastructure that allows
5 authorized healthcare providers and institutions to access Healthcare
6 Proxy information, subject to applicable data privacy and security laws;
7
- 8 iii) Ensure that the platform includes user-friendly features that allow
9 individuals to designate, update, or revoke their Healthcare Agent
10 electronically, and to facilitate real-time verification of such designations
11 in healthcare settings; and
12
- 13 iv) Coordinate with the Department of Health (DOH), Philippine Health
14 Insurance Corporation (PhilHealth), and other relevant agencies to
15 ensure seamless integration of Healthcare Proxy data into existing
16 health information systems and the broader e-government ecosystem.

- 17
- 18 e) Other Government Agencies. All concerned government agencies shall
19 cooperate with the Department of Health in the implementation of this Act and
20 shall adopt measures within their respective mandates to support the effective
21 recognition of Healthcare Agents and Healthcare Proxies.
22

23

24 *Sec 10. Liability of Healthcare Cost.* – Healthcare provided pursuant to decisions
25 made by a Healthcare Agent shall be treated as if such healthcare had been provided
26 pursuant to the decision of the Principal. The cost incurred shall remain the obligation of
27 the Principal, and unpaid healthcare costs shall form part of the obligations recoverable
28 from the Principal, subject to applicable laws. The Healthcare Agent shall not be
29 personally liable for any costs incurred in the provision of healthcare under this Act.
30

31 Subject to applicable social and financial protection laws, programs, and services,
32 the Healthcare Agent may apply for government assistance on behalf of the Principal:
33 *Provided,* That the Healthcare Agent shall not derive any financial benefit therefrom.
34

35 *Sec 11. Non-Discrimination and Non-Limitation of Rights.* – No person or entity
36 shall require, deny, or prohibit the execution of a Healthcare Proxy as a condition for the
37 provision of healthcare or related services, including but not limited to services provided
38 by health management organizations, insurance companies, or other healthcare
39 institutions.
40

41 Nothing in this Act shall create, expand, diminish, impair, or supersede any existing
42 authority of a Principal to make or express decisions, wishes, or instructions regarding
43 Healthcare, whether or not expressed in a Healthcare Proxy.
44

45 Nothing in here shall be construed to permit the Healthcare Agent to consent to
46 any act or omission to which the Principal could not consent under the law.

1
2 Sec 12. *Penalties.* – The DOH, the Professional Regulation Commission, PhilHealth
3 and any other relevant government agencies may suspend or revoke the licenses,
4 accreditation, or certifications of Healthcare Providers, and any of its authorized
5 representatives and employees, or impose other administrative liabilities for any violation
6 of this Act.

7
8 The imposition of administrative liabilities is without prejudice to the filing of
9 appropriate civil or criminal action that may be filed by the relevant government agency,
10 principal, or Healthcare Agent.

11
12 Sec 13. *Implementing Rules and Regulations.* – The DOH, together with PhilHealth,
13 relevant civil society organizations with proven track record, and other concerned
14 stakeholders shall formulate the necessary rules and regulations for the implementation
15 of this Act within ninety (90) days upon its effectivity.

16
17 Sec 14. *Appropriations.* – The amount necessary for the implementation of this
18 act shall be charged against the current appropriations of the DOH, DILG, PhilHealth,
19 and the LGUs.

20
21 Sec 15. *Separability Clause.* – If any Section or provision of this Act is held
22 unconstitutional or invalid, the remaining Sections or provisions with the provisions not
23 affected thereby shall continue to be in full force and effect.

24
25 Sec 16. *Repealing Clause.* – All laws, decrees, executive orders, rules and
26 regulations, issuance or parts thereof inconsistent with this Act are hereby repealed or
27 modified accordingly.

28
29 Sec 17. *Effectivity.* – This Act shall take effect fifteen (15) days after publication
30 in the Official Gazette or two (2) newspapers of general circulation.

31
32 *Approved,*