

Republic of the Philippines  
**HOUSE OF REPRESENTATIVES**  
Quezon City

**TWENTIETH CONGRESS**  
***First Regular Session***

House Bill No. 9445



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**Introduced by Representative KAREN HOPE F. GARCIA**

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### **EXPLANATORY NOTE**

The Philippine Constitution mandates the State to protect and promote the right to health and ensure access to essential health services for all. Article II, Section 15 of the 1987 Constitution expressly provides that “the State shall protect and promote the right to health of the people and instill health consciousness among them,” while Article XIII, Section 11 requires the State to adopt an integrated and comprehensive approach to health development and make health services available to all at affordable cost, prioritizing the underprivileged. Despite these mandates, many Filipinos from Unserved and Underserved areas (UUAs), Geographically Isolated and Disadvantaged Areas (GIDAs) and Indigenous Peoples communities, continue to face systemic barriers to healthcare access.

According to the Department of Health (DOH)<sup>1</sup>, as of 2024, there are over 7,193 areas all over the country that remain partially or severely underserved, with large clusters of UUAs found in Mindanao, the Cordillera, Eastern Visayas, and remote island provinces. Families in these areas often travel several hours, or in some cases days, by boat, habal-habal, or on foot to reach the nearest primary care facility. These barriers contribute to delayed diagnoses, preventable maternal deaths, untreated chronic illnesses, and widening inequities in health outcomes—challenges consistently acknowledged in national health assessments.

The COVID-19 pandemic revealed the immense potential of telehealth and digital medicine to bridge these gaps. DOH documented a surge of 100,000 patients a month

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<sup>1</sup> DEPARTMENT MEMORANDUM No. 2024-0459: Dissemination of the 2024 List of Underserved and Unserved Areas." Department of Health, 20 Nov. 2024.

in the first quarter of 2021<sup>2</sup>, demonstrating the ability of remote medicine to extend care despite physical distance, lockdowns, or workforce shortages.

Telehealth has since proven essential for primary care, specialist referrals, mental health counseling, follow-up care, and health education. It was confirmed by the National Institute of Health of the University of the Philippines-Manila that there was at least a 50% increase in the use of telemedicine services in 2020 from pre-pandemic levels in urban areas<sup>3</sup>. However, not so much has been recorded from rural areas due to the lack of access.

This bill seeks to strengthen the Universal Health Care Act by institutionalizing telehealth services, establishing Rural Telehealth Centers (RTCs), and integrating them into local Service Delivery Networks. It mandates the DOH and LGUs to ensure referral linkages, operational standards, and digital infrastructure support. Crucially, the bill also establishes a Community Telehealth Development Program in partnership with the National Commission on Indigenous Peoples (NCIP), TESDA, and the Indigenous Peoples Health Program. This program will train Katutubo Health Workers (KHWs)<sup>4</sup>, Barangay Health Workers, midwives, and community telehealth aides in telemedicine operations, culturally appropriate primary care, emergency teletriage, and digital health literacy, ensuring that IP communities and UUAs receive safe, respectful, and effective healthcare within their cultural context.

Ultimately, this bill reinforces UHC by ensuring that digital health solutions become permanent, standardized, and accessible components of the national health system.

In view of the foregoing, and with the urgent need to ensure that no Filipino, regardless of geography, ethnicity, or economic class, is denied timely and quality medical care, the immediate approval of this bill is earnestly sought.



**Rep. KAREN HOPE F. GARCIA**  
3rd District, Province of Cebu

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<sup>2</sup> Cordero Jr., Dalmacito A. "Telehealth during the COVID-19 Pandemic in the Philippines." Family Practice, vol. 40, no. 5, 2022, <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9384447/>

<sup>3</sup> Balinbin, Arjay L. "Telehealth Offers Filipinos a Lifeline Amid Pandemic." BusinessWorld Online, 3 Mar. 2022, <https://www.bworldonline.com/top-stories/2022/03/03/433553/telehealth-offers-filipinos-a-lifeline-amid-pandemic/>

<sup>4</sup> "Indigenous peoples to train as health workers." INQUIRER.net, 9 Dec. 2023, <https://newsinfo.inquirer.net/1654588/indigenous-peoples-to-train-as-health-workers>

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**AN ACT**  
**STRENGTHENING REPUBLIC ACT NO. 11223, OTHERWISE KNOWN AS THE**  
**“UNIVERSAL HEALTH CARE ACT,” BY INSTITUTIONALIZING TELEHEALTH**  
**SERVICES, ESTABLISHING RURAL TELEHEALTH CENTERS, AND PROVIDING**  
**COMMUNITY-BASED TRAINING PROGRAMS FOR INDIGENOUS AND RURAL**  
**HEALTH WORKERS**

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

***Section 1. Amendments to Section 4 of Republic Act No. 11223 (Definition of Terms).*** Sections 4 (v), (w), and (x) of RA 1123 are hereby inserted to read as follows:

“Section 4. Definition of Terms. - As used in this Act:

(a) Abuse of authority – xxx

(b) Amenities – xxx

...

(u) Unethical act – xxx

**(v) Telehealth or Telemedicine refers to the delivery of health care services using information and communications technologies, including teleconsultations, remote diagnostics, digital prescriptions, telecounseling, and remote patient monitoring.**

**(w) Rural Telehealth Centers (RTCs) are community-based telehealth service sites established by the DOH and LGUs and integrated into the**

**Service Delivery Network (SDN), prioritizing Geographically Isolated and Disadvantaged Areas (GIDAs).**

**(x) Katutubo Health Workers (KHWs) refer to trained community health workers belonging to Indigenous Cultural Communities/Indigenous Peoples (ICCs/IPs), developed in coordination with the Indigenous Peoples Health Program (IPHP)."**

***Section 2. Amendments to Section 17 of Republic Act No. 11223 (Population-based Health Services).*** Section 17 (d) of RA 1123 is hereby inserted to read as follows:

"Section 17. Population-based Health Services. - The DOH shall endeavor to contract province-wide and city-wide health systems for the delivery of population-based health services. Province-wide and city-wide health systems shall have the following minimum components:

- (a) Primary care provider network with patient records accessible throughout the health system;
- (b) Accurate, sensitive, and timely epidemiologic surveillance systems; and
- (c) Proactive and effective health promotion programs or campaigns.
- (d) **A Service Delivery Network (SDN) that integrates Telehealth Services and Rural Telehealth Centers (RTCs) as essential components of local health systems. Local Government Units (LGUs) shall ensure the establishment, operationalization, and referral linkage of RTCs into primary care facilities, specialty centers, and higher-level hospitals within the SDN, prioritizing access for Unserved and Underserved Areas (UAAs), formerly known as Geographically Isolated and Disadvantaged Areas (GIDAs)."**

***Section 3. Amendments to Section 23 of Republic Act No. 11223 (National Health Human Resource Master Plan).*** Section 23 (a) of RA 1123 is hereby inserted to read as follows:

"Section 23. National Health Human Resource Master Plan. - The DOH, together with stakeholders, shall ensure the formulation and implementation of a National Health Human Resource Master Plan that will provide policies and strategies for the appropriate generation, recruitment, retraining, regulation, retention and reassessment of health workforce based on population health needs.

To ensure continuity in the provision of the health programs and services, all

health professionals and health care workers shall be guaranteed permanent employment and competitive salaries.

**(a) Community Telehealth Development.** The DOH, in partnership with the National Commission on Indigenous Peoples (NCIP), Technical Education and Skills Development Authority (TESDA), and the Indigenous Peoples Health Program (IPHP), shall implement a Community Telehealth Development Program to train:

- (1) Katutubo Health Workers (KHWs);**
- (2) Barangay Health Workers (BHWs);**
- (3) Midwives and community health navigators; and**
- (4) Telehealth aides supporting digital consultations.**

**Training shall include telemedicine operations, culturally appropriate primary care, maternal and child health, emergency teletriage, mental health first aid, digital health literacy, among others.”**

**Section 4. *Repealing clause.*** All existing laws, orders, decrees, rules and regulations or parts thereof, inconsistent with the provisions of this Act are hereby amended, modified or repealed accordingly.

**Section 5. *Effectivity.*** This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

**Approved,**