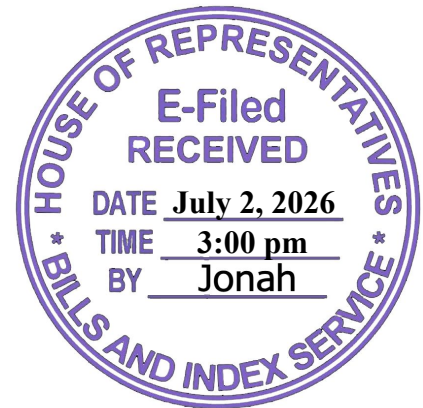


TWENTIETH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

HOUSE OF REPRESENTATIVES

HOUSE BILL NO. 10003



Introduced by Rep. CARMELO G. LAZATIN, JR.

AN ACT
PROVIDING COVERAGE FOR THE TREATMENT OF INFERTILITY IN ANY
GROUP HEALTH PLAN OR HEALTH INSURANCE, AND FOR OTHER PURPOSES

EXPLANATORY NOTE

The 1987 Philippine Constitution provides that the State shall protect and promote the right to health of the people to instill health consciousness among them. Consistent with Article XIII, Section 11, the State shall endeavor to make essential health services available to all at affordable cost.

Many couples desire to have children of their own but not many are fortunate enough or have the genetic capabilities to reproduce. According to the Philippine Society for Reproductive Medicine, approximately 10% of the population or a staggering 11.4 million Filipinos or 5.7 million couples will require fertility services.¹

Although there are already scientific procedures which may aid in the couple's conception, these services are rather very expensive and the ordinary Filipino may not be able to afford such fertility treatments.

According to the 2025 National Demographic and Health Survey (NDHS) the 1.7 total fertility rate (FTR) is a significant decline from 4.1 children per woman recorded in 1993.²

¹ "The Rise of Infertility: A problem among Filipino Women." Available at <http://metro.style/wellness/health/the-rise-of-infertility-among-filipinos-today/39119>

² "Survey: PH fertility rate hits historic low of 1.7 children per woman." Available at <https://www.pna.gov.ph/index.php/articles/1272079>

While the government through the Department of Health has been campaigning for couples to adopt family planning methods, the decline in fertility might later put the country among the aging population like that of Japan where the number of people was mainly composed of elderly.

Republic Act No. 10354, or the Responsible Parenthood and Reproductive Health Act of 2012, expressly includes the “prevention, treatment and management of infertility” as part of reproductive health care, and provides that accredited public health facilities shall render necessary and reasonable procedures for poor and marginalized couples with infertility issues who desire to have children.

Further, Republic Act No. 11223, or the Universal Health Care Act, affirms the State’s commitment to quality, accessible, and affordable health care, and directs that doubts in its implementation be resolved in favor of upholding the rights and interests of every Filipino to such care.

This proposed measure aims to aid couples have a chance at infertility treatment, which may be augmented through coverage in the group health plan or insurance plan.

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


CARMELO G. LAZATIN, JR.



Republic of the Philippines

House of Representatives

Quezon City, Metro Manila

TWENTIETH CONGRESS OF THE)
REPUBLIC OF THE PHILIPPINES)
First Regular Session)

HOUSE BILL NO. 10003

Introduced by Rep. CARMELO G. LAZATIN, JR.

AN ACT

PROVIDING COVERAGE FOR THE TREATMENT OF INFERTILITY IN ANY GROUP HEALTH PLAN OR HEALTH INSURANCE, AND FOR OTHER PURPOSES

Section 1. Short Title. – This Act shall be known as “Infertility Treatment Coverage Act”

Section 2. Declaration of Policy. – It is the policy of the State to protect and promote the right to health, including reproductive health. In line with the Responsible Parenthood and Reproductive Health Act of 2012 and the Universal Health Care Act, the State shall promote access to medically appropriate infertility services and ensure that health coverage provides adequate protection against financial hardships.

Section 3. Definition of Terms. – For purposes of this Act, the following term shall mean:

- a. Infertility- a condition of the reproductive system that results in the inability to achieve a clinical pregnancy or to carry a pregnancy to live birth, as determined in accordance with clinical standards to be issued or recognized by the Department of Health (DOH). Infertility includes male-factor and female-factor infertility.
- b. Group Health Plan – a group health coverage arrangement provided by an employer or organization for its members or employees, as may be defined in the Implementing Rules and Regulations (IRR).
- c. Health Insurance – a health coverage product providing insurance benefits for health-related costs, as may be defined in the IRR.

1 *Section 4. Standards Relating to Benefits for Treatment of Infertility –*
2

- 3 a. Inclusion of Infertility Benefits – In any group health plan where obstetrical services
4 are offered, the treatment of infertility shall be included.
5
- 6 b. Required Coverage – A group health plan and health insurance covered by the
7 IRR shall provide coverage for the treatment of infertility when medically necessary
8 and appropriate as determined by the attending physician, in accordance with DOH-
9 recognized clinical guidelines.
10
- 11 c. Minimum Covered Services – Coverage under this Act shall include, when medically
12 indicated: ovulation induction, artificial insemination, in vitro fertilization (IVF),
13 intracytoplasmic sperm injection (ICSI), and egg freezing, and such other infertility
14 services, medicines, diagnostics, and procedures as may be determined by the DOH
15 pursuant to this Act.
16
- 17 d. Reasonable Step Therapy; Exceptions – Coverage may require completion of less
18 costly medically appropriate treatments prior to Assisted Reproductive Technology
19 (ART) only when clinically appropriate. Medically necessary exceptions shall be
20 allowed where less costly treatments are contraindicated, futile, or unlikely to succeed
21 based on diagnosis and DOH standards.
22
- 23 e. Treatment Cycle – the IRR shall define a “treatment cycle” and may provide reasonable
24 limits on covered cycles per benefit year or lifetime, taking into account the safety,
25 effectiveness, and cost-effectiveness and subject to medically necessary exceptions.
26

27 *Section 4. Review of Requirements for Treatment of Infertility.* – The Secretary of Health
28 shall issue or recognize clinical guidelines and minimum standards for infertility treatment
29 benefits, including eligibility criteria, documentation requirements, covered services and
30 medicines, and patient safety safeguards.
31

32 The Secretary of Health shall conduct a review of the requirements and minimum standards
33 for infertility treatment coverage every five (5) years from the effectivity of this Act. The results
34 shall be published and submitted to Congress.
35

36 *Section 5. Implementing Rules and Regulations.* – Within ninety (90) days from the
37 effectivity of this Act, the Department of Health in consultation with PhilHealth, relevant
38 government agencies, health insurance providers, professional societies, and other stakeholders
39 shall promulgate the implementing rules and regulations to effectively carry out the provisions of
40 this Act.
41

1 *Section 6. Separability Clause.* – If any provision of this Act is declared unconstitutional
2 or invalid, the other provision not affected thereby shall remain in full force and effect.

3
4 *Section 7. Repealing Clause.* – All laws, decrees, orders, rules and regulations, or parts
5 therefor, which are inconsistent with the provisions of this Act are hereby repealed or modified
6 accordingly.

7
8 *Section 8. Effectivity Clause.* – This Act shall take effect fifteen (15) days after its
9 publication in the Official Gazette or in a newspaper of general circulation.

10
11 Approved,