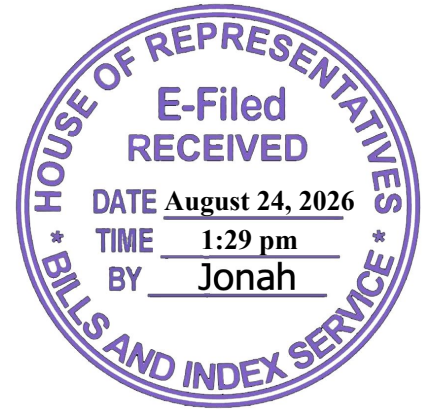


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH CONGRESS
Second Regular Session

HOUSE BILL NO. 10872



Introduced by **ANG PROBINSYANO**
Party-List Representative Alfred Delos Santos

EXPLANATORY NOTE

Reliable electricity is not a convenience for hospitals, it is a matter of life and death. Ventilators, incubators, blood banks, operating rooms, dialysis machines, and cold-chain storage for vaccines and medicines all depend on an uninterrupted power supply. Yet many of our public hospitals, particularly those in far-flung and off-grid areas, continue to grapple with unstable, intermittent, or altogether absent electricity service. During typhoons, earthquakes, and other calamities and public health emergencies, precisely when hospitals are needed most, power interruptions place patients' lives at risk and compromise the delivery of essential health services.

At the same time, public hospitals that do enjoy stable grid access shoulder some of the highest and most continuous electricity demands among government facilities, placing a significant and recurring burden on public funds that could otherwise be channeled toward direct patient care, medical supplies, and health workforce needs.

Solar energy offers a practical, sustainable, and increasingly cost-effective solution to both dependence on costly and often unreliable conventional electricity sources, lower long-term operating costs, and, when paired with appropriate energy storage, provide a critical layer of resilience that keeps essential hospital services running through outages, calamities, and emergencies. This is consistent with the policy already established under Republic Act No. 9513, or the "Renewable Energy Act of 2008," which promotes the development and utilization of renewable energy to strengthen the country's energy security and reduce its dependence on fossil fuels.

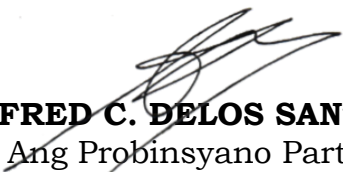
This bill mandates the installation, integration, and maintenance of solar energy systems in national hospitals, local government unit hospitals, state and university hospitals, and other government-owned and controlled hospitals. To

ensure that this mandate is achievable rather than aspirational, the bill provides for a phased implementation: covered hospitals are required to achieve solar energy generation capability equivalent to at least twenty percent (20%) of their annual electricity demand within one (1) year from the law's effectivity, and at least fifty percent (50%) within three (3) years, subject to standards and guidelines to be jointly established by the Department of Health (DOH) and the Department of Energy (DOE), in coordination with other relevant agencies.

The bill likewise directs covered hospitals to integrate energy storage and backup capabilities where technically and financially feasible, so that critical hospital facilities and services remain powered during grid outages and emergencies.

In recognition of the role of local industry in nation-building, the bill gives priority to local businesses in the contracting and purchase of solar energy systems from accredited solar photovoltaic installers, while ensuring that all procurement remains fully compliant with existing bidding and procurement laws and is conducted with transparency.

In view of the foregoing, the passage of this measure is urgently sought.


ALFRED C. DELOS SANTOS
Representative, Ang Probinsyano Partylist

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HOUSE BILL NO. 10872

Introduced by **ANG PROBINSYANO**
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AN ACT MANDATING THE USE AND UTILIZATION OF SOLAR ENERGY IN NATIONAL HOSPITALS, LOCAL GOVERNMENT UNIT HOSPITALS, STATE AND UNIVERSITY HOSPITALS, AND OTHER GOVERNMENT-OWNED AND -CONTROLLED HOSPITALS, AND PROVIDING FUNDS THEREFOR

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

SECTION 1. *Short Title.* – This Act shall be known as the “Solar-Powered Public Hospitals”

SECTION 2. *Declaration of Policy.* – It is the policy of the State to protect and promote the right to health and support the delivery of essential health services, particularly in public hospitals during emergencies, calamities, and public health crises, when reliable electricity is critical to preserving life. Consistent with Republic Act No. 9513, or the “Renewable Energy Act of 2008,” the State likewise promotes the development and utilization of renewable energy to strengthen energy security, reduce dependence on fossil fuels, and ensure a sustainable energy supply.

The State recognizes that the high and continuous electricity demands of public hospitals place a significant burden on public funds. The use of solar energy, as an abundant, renewable, and sustainable resource, can reduce this burden while ensuring the continuity of critical hospital services during power interruptions and emergencies.

SECTION 3. *Definitions.* – For purposes of this Act, the following terms shall mean:

(a) **Public hospital** refers collectively to national hospitals, LGU hospitals, state and university hospitals, other agency hospitals, and GOCC hospitals as defined under this Act;

(b) **National hospital** refers to a hospital owned and operated by the national government, including those under the direct supervision and control of the DOH or attached agencies thereof;

(c) **Local government hospital** refers to a hospital established, operated, and maintained by a province, city, or municipality pursuant to Republic Act No. 7160, or the "Local Government Code of 1991";

(d) **State and university hospitals** refer to hospitals owned, operated, and maintained by state universities and colleges (SUCs) as part of their health, training, and public service functions;

(e) **Government-owned and controlled hospitals** refer to hospitals owned, operated, or controlled by government-owned or controlled corporations, as defined under Republic Act No. 10149, or the "GOCC Governance Act of 2011";

(f) **Power applications** refer to renewable energy systems or facilities that produce electricity;

(g) **Off-Grid systems** refer to electrical systems not connected to the wires and related facilities of the On-Grid Systems of the Philippines;

(h) **On-grid systems** refers to electrical systems composed of interconnected transmission lines, distribution lines, substations, and related facilities for the purpose of conveyance of bulk power on the grid of the Philippines;

(i) **Solar energy** refers to the energy derived from solar radiation that can be converted into useful thermal or electrical energy; and

(j) **Solar energy systems** refer to energy systems which convert solar energy into thermal or electrical energy;

SECTION 4. Coverage. – The Act applies to all public hospitals at the primary, secondary, and tertiary levels of the Philippine Health Care delivery facilities. It shall cover installation, integration, and maintenance of solar energy systems in:

(a) Existing and public hospitals that are not connected to the electricity grid;

- (b) Existing public hospitals located in areas with intermittent, unstable, or unreliable electricity supply, as determined by the DOH and the DOE or any of their attached agencies, including the National Electrification Administration (NEA), and the National Power Corporation (NPC);
- (c) Existing public hospitals with stable grid access, which shall nonetheless be required to integrate a minimum level of solar energy capacity as determined by the DOH and DOE; and
- (d) All newly constructed public hospitals, which shall be designed and constructed to be solar-ready, with the cost of solar energy systems integrated into the total construction cost of the school.

SECTION 5. *Solar Energy Generation.* – All covered hospitals shall install and utilize solar energy systems as a primary or supplemental source of electricity, consistent with their energy requirements, available space, location, and existing electrical infrastructure. Such solar energy systems shall be designed to reduce dependence on conventional sources of electricity, lower energy costs, and support the continuous delivery of essential hospital services. Where technically and financially feasible, as determined by the DOE and DOH, covered hospitals shall integrate energy storage and other appropriate backup capabilities to ensure the availability of electricity for critical hospital facilities and services during power interruptions, calamities, and emergencies.

SECTION 6. *Grid-Connected and Off-Grid Solar Energy Systems.* – Covered hospitals shall adopt solar energy systems appropriate to their location and power supply conditions, as follows:

- (a) **Grid-Connected Hospitals** – Hospitals located in areas served by an existing and reliable electricity grid shall install grid-connected solar energy systems that may operate as on-site generation, subject to applicable laws, rules, and regulations. Where feasible, such systems shall be integrated with energy storage and backup systems to provide electricity to designated critical loads during grid outages;
- (b) **Off-Grid or Unreliable Connected Hospitals** – Hospitals located in off-grid areas or areas with unreliable, inadequate, or frequently interrupted electricity supply shall prioritize the installation of solar energy systems with sufficient energy storage and backup capability to ensure the continuous operation of critical hospital facilities and services. Such systems may operate as standalone or hybrid systems, as appropriate to local conditions; and
- (c) **Hybrid and Other Appropriate Systems** – Covered hospitals may adopt hybrid solar energy systems that combine solar generation with grid electricity, battery energy storage, or other duly authorized

backup generation technologies, as may be necessary to meet their operational power requirements, subject to applicable technical, safety, and regulatory standards.

SECTION 7. *Mandatory Installation and Phased Implementation.* – All public hospitals covered by this Act shall, where feasible and technologically practicable, progressively install and utilize solar energy systems in accordance with the following phases:

- (a) Within one (1) year from the effectivity of this Act, covered hospitals shall achieve a solar energy generation capability equivalent to at least twenty percent (20%) of their annual electricity demand;
- (b) Within three (3) years, covered hospitals shall achieve a solar generation capability equivalent to at least fifty percent (50%) of their average annual electricity demand; and
- (c) The installation and expansion of solar energy systems shall be undertaken in phases, taking into account the hospital's energy requirements, available space, existing electrical infrastructure, structural capacity, technical feasibility, and other relevant conditions.

The DOH, in coordination with the DOE, the DPWH, the DILG, and the ERC, and other concerned government agencies establish the standards and guidelines for determining solar energy generation capability of covered hospitals, facilitate the phased implementation of the requirements under this Section, and monitor compliance therewith.

SECTION 8. *Sourcing for Solar Photovoltaic Installers.* – In the contracting and purchase of solar energy systems from accredited Solar PV installers, local business shall be given priority in supplying the government.

All bidding and procurement done for the purpose of this Act shall be in accordance with the law and existing rules and regulations. The same shall be made in public with all pertinent documents available.

SECTION 9. *Funding.* – The amount necessary for the immediate implementation of this Act shall be charged against any available fund of the government agencies covered by this Act. Thereafter, such sums as may be necessary to implement this Act shall be included in the General Appropriations Act (GAA).

SECTION 10. *Implementing Rules and Regulations.* – Within sixty (60) days after the effectivity of this Act, the DOE shall, in coordination with the Interagency Energy and Conservation Committee created under Republic Act No. 11285 or the Energy Efficiency and Conservation Act, and in consultation with the DOH, the DPWH, DILG, and ERC, and other relevant government agencies

and stakeholders in the electric power and renewable energy industry, including civil society organizations, people's organizations, and other pertinent on-the-ground stakeholders, promulgate the rules and regulations to effectively implement the provisions of this Act.

SECTION 11. *Separability Clause.* – If any provision or part of this Act is held invalid or unconstitutional, the remaining provisions or parts unaffected shall remain in full force and effect.

SECTION 12. *Repealing Clause.* – All laws, executive orders, presidential decrees or issuances, letters of instruction, administrative orders, rules, and regulations contrary to or inconsistent with the provisions of this Act are hereby repealed, amended, or modified accordingly.

SECTION 13. *Effectivity Clause.* – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,