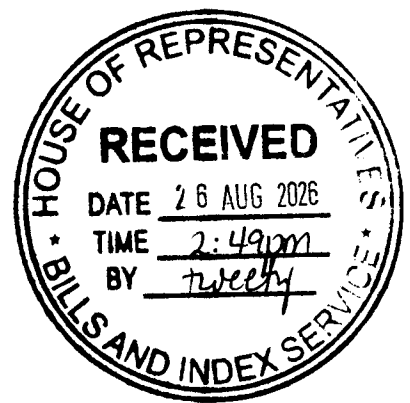


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

TWENTIETH CONGRESS
Second Regular Session

HOUSE BILL NO. 10974



Introduced by: Kababaihan Kabalikatan para sa Kapakanan at Kaunlaran ng Bayan (4K) Party-list
Representative Iris Marie D. Montes

AN ACT
CREATING A CONGRESSIONAL COMMISSION ON HEALTH TO REVIEW,
ASSESS, AND EVALUATE THE STATE OF THE PHILIPPINE HEALTH
SYSTEM AND RECOMMEND COMPREHENSIVE, EVIDENCE-BASED, AND
TARGETED HEALTH REFORMS, AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

Article II, Section 15 of the 1987 Constitution provides that "The State shall protect and promote the right to health of the people and instill health consciousness among them." Article XIII, Section 11 further mandates that "The State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost." These constitutional principles recognize that protecting the health of the people is a continuing obligation of the State and requires sustained legislative attention to ensure that the country's health system remains responsive to present and future challenges.

Over the years, Congress has enacted landmark legislation that has significantly strengthened the Philippine health sector. These laws have expanded access to health services, improved public health programs, enhanced health financing mechanisms, promoted patient protection, and strengthened the country's institutional capacity to deliver health care. Nevertheless, the health sector continues to evolve in response to changing demographic patterns, epidemiological transitions, technological innovation, population ageing, urbanization, climate-related health risks, emerging and re-emerging infectious diseases, and increasing public expectations for accessible, affordable, and quality health care.

The Philippine health system has likewise become increasingly complex. It encompasses a wide range of institutions, programs, financing mechanisms, regulatory bodies, local government units, public and private health care providers, educational institutions, professional organizations, and development partners whose respective roles must operate in a coordinated and complementary manner. The effectiveness of the health system depends not only on the sound implementation of individual laws but also on the coherence, efficiency, and responsiveness of the health system as a whole.

As the country's needs continue to evolve, there is a corresponding need for Congress to periodically undertake a comprehensive review of the Philippine health system to determine whether existing laws, policies, institutions, governance arrangements, financing mechanisms, and service delivery models continue to achieve their intended objectives. Such a review must be comprehensive, evidence-based, forward-looking, and informed by the experiences of health professionals, local governments, patients, academic institutions, civil society organizations, the private sector, and other stakeholders throughout the country.

This bill seeks to create the Congressional Commission on Health (HEALTHCOM), an independent, bipartisan, and time-bound congressional body mandated to review, assess, and evaluate the overall state of the Philippine health system and formulate comprehensive, evidence-based, and targeted recommendations for legislative, policy, institutional, administrative, and financing reforms. HEALTHCOM shall conduct a thorough assessment of the country's health governance, financing, service delivery, human resources for health, infrastructure, public health programs, health information systems, research and innovation, emergency preparedness, regulatory framework, and other critical components of the health sector.

The Commission shall likewise undertake nationwide consultations, commission policy research and technical studies, benchmark international best practices, and develop a National Health System Reform Roadmap with measurable targets and strategic priorities to guide future legislative and policy action. Its recommendations are intended to provide Congress with an objective, comprehensive, and evidence-based foundation for strengthening the Philippine health system and ensuring that future reforms are coherent, responsive, fiscally responsible, and focused on improving health outcomes for every Filipino.

Ultimately, this measure recognizes that building a stronger health system is a continuing national undertaking. Periodic and comprehensive evaluation is indispensable to ensure that health laws, institutions, and public investments remain responsive to changing realities and are capable of delivering equitable, quality, resilient, and people-centered health care for present and future generations.

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


IRIS MARIE D. MONTES
Kababaihan Kabalikatan para sa Kapakanan
at Kaunlaran ng Bayan (4K) Party-list

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AN ACT

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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 "Congressional Commission on Health (HEALTHCOM) 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 and to ensure that quality, accessible, affordable, and responsive health care and other essential health services are made available to all. The State shall give priority to the health needs of the underprivileged, the sick, older persons, persons with disabilities, women, children, and other vulnerable sectors, and shall endeavor to improve the quality of life of every Filipino through an equitable and people-centered health system.

The State likewise recognizes the need to continuously strengthen the Philippine health system through evidence-based policies, effective governance, sustainable financing, efficient service delivery, a competent health workforce, resilient health infrastructure, and innovation to respond to the evolving health needs of the population and emerging public health challenges.

Towards this end, the State shall undertake a comprehensive and independent review, assessment, and evaluation of the Philippine health system and recommend legislative, policy, institutional, administrative, and fiscal reforms that will promote universal access to quality health care, strengthen public health governance, improve health outcomes, and ensure a more integrated, equitable, resilient, and future-ready health system.

SEC. 3. *Objectives of HEALTHCOM.* — In order to adopt an integrated and comprehensive approach to health development, undertake a whole-of-system review of the Philippine health system, and formulate specific, targeted, measurable, and time-bound solutions to address its persistent and emerging challenges, HEALTHCOM shall pursue the following objectives:

(a) Conduct a comprehensive and independent assessment of the Philippine health system;

(b) Review the implementation and effectiveness of existing health laws, policies, programs, and institutional arrangements;

(c) Examine the adequacy of health financing, governance systems, service delivery, health workforce development, infrastructure, digital health, research, innovation, and public health programs;

(d) Identify policy, legislative, institutional, administrative, and operational gaps affecting the accessibility, quality, efficiency, equity, sustainability, and resilience of health services;

(e) Recommend legislative, policy, institutional, administrative, and fiscal reforms necessary to strengthen the Philippine health system and improve the delivery of quality health care throughout the country; and

(f) Develop a long-term national roadmap for health sector transformation, including clearly defined goals, strategies, performance indicators, implementation timelines, and accountability mechanisms, that is responsive to emerging demographic, epidemiological, technological, environmental, and public health challenges.

SEC. 4. *Creation of HEALTHCOM.* — There is hereby created a HEALTHCOM, hereinafter referred to as the Commission, to undertake a comprehensive national assessment and evaluation of the Philippine health system for the purpose of recommending transformative, concrete, and targeted reforms with the end in view of strengthening the Philippine health system, improving health outcomes, ensuring equitable, accessible, quality, and people-centered health care, and enhancing the capacity, resilience, efficiency, and sustainability of the country's health system to meet present and future health challenges.

SEC. 5. *Composition of HEALTHCOM.* — The Commission shall be composed of ten (10) members, with five (5) members from the Senate and five (5) members from the House of Representatives.

The chairpersons of the Senate Committee on Health and Demography and the chairperson of the House Committee on Health shall serve as Co-Chairpersons of the Commission.

The other four (4) members each from the Senate and the House of Representatives shall be designated by the Senate President and the Speaker of the House of Representatives, respectively.

The members of the Commission shall receive no compensation, but travelling, communications, and other necessary expenses shall be allowed, subject to existing laws, and rules and regulations.

SEC. 6. *Duration of HEALTHCOM.* — The Commission shall accomplish its mandate within three (3) years from its organization. It shall organize itself and commence its mandate upon the effectivity of this Act.

SEC. 7. *Powers and Functions of HEALTHCOM.* — The Commission shall have the following powers and functions:

(a) Review, assess, and evaluate the state of the Philippine health system, including its governance, financing, service delivery, public health programs, health human resources, infrastructure, health information systems, health research and innovation, health emergency preparedness and response, pharmaceutical and medical device regulation, and other related components of the health sector, taking into consideration existing laws, policies, institutional arrangements, and internationally recognized best practices;

(b) Recommend comprehensive, evidence-based, and targeted legislative, policy, institutional, administrative, regulatory, and financing reforms necessary to strengthen the Philippine health system and improve the accessibility, quality, equity, efficiency, responsiveness, sustainability, resiliency, and overall health outcomes of the Filipino people;

(c) Formulate short-term and long-term policy and program recommendations that consist of specific, targeted, measurable, and time-bound solutions, including, but not limited to, the following:

(1) strengthening primary health care and the implementation of the Universal Health Care Act;

(2) improving governance, accountability, and coordination within the health sector;

(3) ensuring adequate, equitable, and sustainable health financing and financial risk protection;

(4) improving the education, training, equitable distribution, retention, welfare, and professional development of human resources for health;

(5) strengthening public health programs, disease prevention, health promotion, and nutrition;

(6) improving health infrastructure, hospitals, rural health units, laboratories, and other health facilities;

(7) enhancing health emergency preparedness, response, recovery, and resilience;

(8) strengthening health information systems, digital health, interoperability, and evidence-based decision-making;

(9) promoting health research, innovation, health technology assessment, and appropriate health technologies;

(10) improving access to affordable, quality medicines, vaccines, diagnostics, and other essential health products;

(11) promoting equitable access to quality health services, particularly for underserved, vulnerable, geographically isolated, and disadvantaged populations;

(12) strengthening partnerships among national government agencies, local government units, professional organizations, academic institutions, civil society organizations, development partners, and the private sector; and

(13) addressing such other priority concerns as the Commission may determine to be necessary.

(d) Approve the Commission's work plan, strategic direction, organizational structure, research agenda, operational priorities, budget utilization plan, and such other policies and measures as may be necessary for the effective discharge of its mandate;

(e) Appoint, hire, fix the compensation of, and, when necessary, discipline or remove, in accordance with applicable laws, the Executive Director, technical experts, consultants, advisers, researchers, legal counsel, administrative personnel, and such other officers and employees as may be necessary for the efficient and effective performance of the Commission's functions;

(f) Hold public hearings, inquiries, consultations, technical conferences, regional consultations, focus group discussions, and other appropriate proceedings as may be necessary in the performance of its mandate;

(g) Require, by subpoena or subpoena duces tecum, the attendance of witnesses and the production of books, records, reports, papers, contracts, electronic data, and other evidence relevant to any inquiry conducted by the Commission, administer oaths and affirmations, and cite for contempt persons refusing, without lawful excuse, to obey its lawful orders, in accordance with existing laws and the Rules of Court;

(h) Conduct, commission, supervise, or cause the conduct of studies, surveys, policy research, technical assessments, benchmarking activities, impact evaluations, and other evidence-generating initiatives necessary for the effective discharge of its mandate;

(i) Call upon any department, bureau, office, agency, instrumentality of the Government, including government-owned or -controlled corporations, state universities and colleges, constitutional bodies, local government units, and other public institutions, to provide information, records, technical expertise, facilities, personnel support, or such other assistance as may be necessary for the performance of its functions;

(j) Organize technical working groups, advisory committees, expert panels, and similar bodies composed of representatives from government agencies, professional organizations, academe, research institutions, civil society organizations, development partners, and the private sector to assist the

Commission in specialized areas of health policy and health systems development;

(k) Promulgate such internal rules of procedure, operational guidelines, and administrative policies as may be necessary for the effective and efficient discharge of its functions;

(l) Report to Congress its accomplishments on a periodic basis, its findings and recommendations on actions to be taken by Congress, the Department of Health, PhilHealth, local government units, and other departments, agencies, and instrumentalities concerned with health, and provide a final report at the end of the existence of the Commission. The report shall include a National Health Reform Roadmap with clear key performance indicators, measurable targets, implementation milestones, and a results framework to strengthen the Philippine health system, guided by the following principles:

(1) Strategic — reforms shall focus on interventions that produce the greatest improvements in population health outcomes, health system performance, and universal access to quality health care;

(2) Equitable — reforms shall reduce disparities in health outcomes and ensure that quality health services are accessible, affordable, and responsive to the needs of all Filipinos, particularly underserved, vulnerable, geographically isolated, and disadvantaged populations;

(3) Resilient — reforms shall strengthen the capacity of the Philippine health system to anticipate, prepare for, respond to, and recover from public health emergencies, disasters, demographic changes, technological advancements, and other emerging health challenges; and

(4) Systemic — reforms shall address structural, institutional, governance, financing, workforce, and service delivery issues affecting the overall performance, efficiency, sustainability, and accountability of the Philippine health system.

(m) Recommend additional legislation, policy measures, institutional reforms, and appropriations necessary to further the purposes and objectives of this Act and to strengthen the Philippine health system.

(n) Formulate the necessary rules of procedure, internal rules, and operational guidelines for the effective implementation of this Act.

(o) Exercise all other powers necessary or incidental to achieve the purposes of this Act.

SEC. 8. *National Health System Assessment.* — The Commission shall undertake a comprehensive national assessment of the Philippine health system.

The assessment shall examine the performance, effectiveness, efficiency, accessibility, equity, responsiveness, resilience, sustainability, governance, financing, and overall state of the Philippine health system and shall include, but not be limited to, the following:

- (a) health governance and institutional arrangements;
- (b) implementation of Republic Act No. 11223, otherwise known as the Universal Health Care Act, and other major health-related laws;
- (c) health financing, financial risk protection, and public health expenditures;
- (d) primary health care, preventive and promotive health services, and public health programs;
- (e) hospitals, specialty facilities, laboratories, and other health facilities;
- (f) human resources for health, including education, training, deployment, retention, compensation, and professional development;
- (g) health information systems, digital health, interoperability, and health data governance;
- (h) health research, innovation, and health technology assessment;
- (i) access to medicines, vaccines, diagnostics, medical devices, and other essential health commodities;
- (j) emergency preparedness, pandemic response, disaster resilience, and health security;
- (k) mental health, rehabilitation, long-term care, and other priority health services;
- (l) health equity and access to quality health services among vulnerable, marginalized, geographically isolated, disadvantaged, and underserved populations; and
- (m) such other matters as may be determined by the Commission.

SEC. 9. *Standing Committees.* — The members of the Commission shall establish from among its members standing committees, to be chaired by such members or experts from multisectoral groups, and engage resource persons from the public and private sectors as may be needed.

The standing committees shall include representatives from the Department of Health, the Philippine Health Insurance Corporation, the Department of the Interior and Local Government, the Commission on Higher Education, the Professional Regulation Commission, state universities and colleges offering health sciences programs, professional medical and allied health organizations, hospitals, civil society organizations, patient groups, and other relevant stakeholders in their respective consultations to ensure that governance, health financing, service delivery, human resources for health, public health, research and innovation, and other key components of the Philippine health system are comprehensively assessed and reflected in the Commission's recommendations.

SEC. 10. *Technical Secretariat.* — A Technical Secretariat, to be headed by an Executive Director (ED), shall be organized to provide technical and administrative support to the Commission in the exercise of its powers and performance of its functions under Section 7 of this Act.

The Technical Secretariat shall co-exist with the Commission.

SEC. 11. *Executive Director.* — The ED to be appointed by the Commission must be a recognized expert with experience in both the fields of health and management. The ED shall work full-time and shall have the rank, privileges, and emoluments of an Executive Director IV (Salary Grade 29).

SEC. 12. *Philippine Institute for Development Studies (PIDS).* — The Philippine Institute for Development Studies (PIDS) is hereby designated as the principal research arm of the Commission. During the course of the Commission's existence, it shall produce data-based research and provide analysis to contribute to the formulation of health policy recommendations.

To ensure the execution of this statutory mandate, this additional function of the PIDS shall be considered in mandating, through the General Appropriations Act (GAA), the direct transfer of research funds to and extending the budget ceiling of the Institute.

SEC. 13. *Health, Legislation and Policy Advisory Council.* — A Health, Legislation and Policy Advisory Council (Advisory Council) is hereby created to provide the Commission with expert assistance and advice. The members of the Advisory Council shall always be present in all meetings of the Commission.

The Senate President and the Speaker of the House of Representatives shall jointly choose recognized experts from the following sectors to form part of the Advisory Council:

(a) two (2) members from the academe with recognized expertise in medicine, public health, health systems, health policy, health economics, epidemiology, or related disciplines;

(b) two (2) members from the private health sector, including representatives from private hospitals, health care providers, pharmaceutical or medical technology industries, or other health-related enterprises;

(c) two (2) members from government health agencies, who shall have extensive experience in health governance, public health, health financing, or health systems administration;

(d) two (2) members who are heads of local government units, with demonstrated experience in the administration and delivery of local health services; and

(e) two (2) members from civil society organizations, patient advocacy groups, professional health organizations, or development partners actively engaged in health systems strengthening, public health, health equity, or health policy.

The Advisory Council shall provide technical advice, independent policy perspectives, and expert recommendations to the Commission on matters relating to the review, assessment, evaluation, and reform of the Philippine health system.

SEC. 14. *Appropriations.* — The amount necessary for the initial implementation of this Act shall be charged against the current appropriations of the Senate and the House of Representatives. Thereafter, the funding necessary for the continuous operation of HEALTHCOM and the dedicated research budget for PIDS shall be included in the Annual General Appropriations Act.

SEC. 15. *Separability Clause.* — If any provision of this Act is declared unconstitutional or invalid, the remaining provisions not affected thereby shall remain in full force and effect.

SEC. 16. *Repealing Clause.* — All laws, presidential decrees, executive orders, administrative orders, rules and regulations, or parts thereof inconsistent with the provisions of this Act are hereby repealed, amended, or modified accordingly.

SEC. 17. *Effectivity.* — This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,