

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Constitution Hills, Quezon City

TWENTIETH CONGRESS
Second Regular Session

House Bill No. 11470



Introduced by: **REPRESENTATIVE ERIC L. OLIVAREZ**

EXPLANATORY NOTE

As the Filipino population ages, more senior citizens are living with chronic and age-related conditions that require continuous maintenance medications. The rising cost of medicines, vitamins, and other medically necessary supplements can place a significant financial burden on elderly Filipinos, particularly those who rely solely on pensions or have limited sources of income.

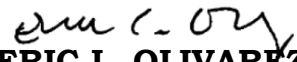
While Republic Act No. 9994, otherwise known as the “Expanded Senior Citizens Act of 2010,” provides senior citizens with discounts and tax exemptions on medicines and other health-related goods, these benefits do not necessarily ensure that maintenance medications are available and affordable to all senior citizens. For many elderly Filipinos, even the remaining cost of regularly purchased medicines may constitute a substantial portion of their limited income.

This measure seeks to establish a government program that will provide free maintenance medications and medically indicated vitamins and mineral supplements to qualified senior citizens, subject to an appropriate national formulary and prescription requirements. It also provides mechanisms for community-based access and delivery, particularly for the oldest-old, frail, homebound, and bedridden senior citizens.

The measure further ensures coordination with the Philippine Health Insurance Corporation’s existing medication benefits, including the Guaranteed and Accessible Medications for Outpatient Treatment (GAMOT), to complement existing programs and prevent duplication of benefits.

By reducing the financial burden of essential medicines and promoting continuity of treatment, this measure seeks to improve medication adherence, prevent avoidable complications and hospitalizations, and promote healthier and more dignified aging among Filipino senior citizens.

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


ERIC L. OLIVAREZ

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**“AN ACT
PROVIDING FOR FREE MAINTENANCE MEDICATIONS,
VITAMINS, AND MINERAL SUPPLEMENTS FOR SENIOR
CITIZENS”**

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

Section 1. Short Title. - This Act shall be known as the "*Lingap Gamot at Resistensya Pack Para sa Nakatatandang Pinoy Act.*"

Section 2. Declaration of Policy. - 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, giving priority to the needs of the underprivileged, sick, elderly, persons with disabilities, women, and children.

It is hereby declared the policy of the State to promote and protect the health and well-being of senior citizens by ensuring continuous and affordable access to essential maintenance medications and medically indicated vitamins and mineral supplements, thereby helping prevent complications, improve treatment adherence, and enable senior citizens to maintain an active and meaningful participation in society.

Section 3. Free Maintenance Medications, Vitamins, and Mineral Supplements. - The government shall provide free maintenance medications and medically indicated vitamins and mineral supplements to qualified senior citizens, subject to the coverage, formulary, prescription, and other conditions provided under this Act and its implementing rules and regulations.

Section 4. Eligibility and Registration. - To qualify for the free maintenance medications, vitamins, and mineral supplements, a senior citizen must:

- a) be a registered senior citizen with the Office of Senior Citizens Affairs (OSCA);

- b) be registered with a designated primary healthcare provider, government health facility, or authorized dispensing facility, as may be prescribed by the Department of Health (DOH);
- c) have a valid prescription or treatment plan issued by a licensed physician or other health professional authorized by law to prescribe the covered medication, in accordance with applicable laws, rules, and regulations; and
- d) comply with such other reasonable requirements as may be prescribed by the DOH to establish medical necessity and prevent duplication or misuse of benefits.

Section 5. Access to Maintenance Medications, Vitamins, and Mineral Supplements. - The free maintenance medications, vitamins, and mineral supplements shall be accessed through barangay health centers, government health facilities, Botika ng Bayan, PhilHealth-accredited dispensing facilities, and/or pharmacies or drug outlets duly accredited or authorized by the DOH or PhilHealth, as applicable: *Provided*, that access to and delivery of these items to the most vulnerable-old, frail, homebound, and bedridden senior citizens may be facilitated through designated barangay health workers or other authorized community health personnel, subject to applicable laws and regulations on the dispensing, handling, storage, and delivery of medicines.

Section 6. National Senior Citizens Maintenance Medicine and Supplement Formulary. - The DOH, in coordination with the Philippine Health Insurance Corporation (PhilHealth), Food and Drug Administration (FDA), and other concerned agencies, shall establish and periodically update a National Senior Citizens Maintenance Medicine and Supplement Formulary identifying the maintenance medications, vitamins, and mineral supplements that may be provided under this Act.

The Formulary shall, as appropriate, consider the prevalence of chronic diseases among senior citizens, clinical necessity, safety and efficacy, availability of generic equivalents, cost-effectiveness, and the recommendations of relevant health experts.

Section 7. Harmonization with PhilHealth Benefits. - Covered maintenance medications of qualified senior citizens that are included in the PhilHealth Guaranteed and Accessible Medications for Outpatient Treatment (GAMOT) or any successor outpatient medicine benefit shall be provided in accordance with the applicable PhilHealth benefit package and shall not be subject to duplicate reimbursement under this Act.

Medicines, vitamins, and mineral supplements covered by this Act but not included in the applicable PhilHealth benefit package may be provided through the program established under this Act, subject to the National Senior Citizens Maintenance Medicine and Supplement Formulary and the guidelines prescribed by the DOH.

Section 8. Special Assistance for Vulnerable Senior Citizens. - The DOH, in coordination with the National Commission of Senior Citizens

(NCSC), Department of Social Welfare and Development (DSWD), Department of the Interior and Local Government (DILG), local government units, and other concerned agencies, shall establish mechanisms to prioritize and facilitate the delivery of covered maintenance medications, vitamins, and mineral supplements to most vulnerable-old, frail, indigent, homebound, and bedridden senior citizens, particularly those who have difficulty accessing health facilities.

Section 9. Implementation and Coordination. - The DOH shall be responsible for the implementation of this Act. It shall coordinate with relevant agencies, including but not limited to PhilHealth, the NCSC, the DSWD, the DILG, Food and Drug Administration (FDA), Department of Budget and Management (DBM), local government units, and recognized senior citizens associations, to ensure the efficient allocation, procurement, distribution, and monitoring of the free maintenance medications, vitamins, and mineral supplements.

Section 10. Monitoring and Reporting. - The DOH shall establish a monitoring system to track the allocation, procurement, distribution, and utilization of the free maintenance medications, vitamins, and mineral supplements. An annual report shall be submitted to Congress detailing the program's implementation, expenditures, coverage, availability of medicines, incidence of stock-outs, and effectiveness in improving the health and well-being of senior citizens.

Section 11. Appropriations. - The amount necessary for the initial implementation of this Act shall be charged against the current appropriations of the DOH and other concerned agencies, subject to existing budgeting, accounting, and auditing laws, rules, and regulations. Thereafter, such sums as may be necessary for the continued implementation of this Act shall be included in the annual General Appropriations Act.

Section 12. Implementing Rules and Regulations. - The DOH, in coordination with PhilHealth, NCSC, DSWD, DILG, FDA, DBM, and other concerned agencies, shall promulgate the necessary rules and regulations to implement this Act effectively within ninety (90) days from its effectivity.

Section 13. Separability Clause. - If any part, section, or provision of this Act is held invalid or unconstitutional, the remaining provisions not affected shall remain in full force and effect.

Sec. 14. Repealing Clause. - All laws, decrees, orders, rules, and regulations, or parts thereof, inconsistent with this Act are hereby repealed or amended accordingly.

Sec. 15. Effectivity. - This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in two (2) newspapers of general circulation.

Approved,