

SIXTEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES Second Regular Session

15 JAN 20 P4 25

#### SENATE

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# S. B. No. 2577

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#### Introduced by Senator Antonio "Sonny" F. Trillanes IV

#### AN ACT

# **REVERTING TO THE NATIONAL GOVERNMENT THE DISCHARGE OF BASIC HEALTH SERVICES DEVOLVED TO LOCAL GOVERNMENT UNITS (LGUs) AND REPEALING FOR THE PURPOSE PERTINENT SECTIONS OF REPUBLIC ACT NO. 7160, OTHERWISE KNOWN AS THE LOCAL GOVERNMENT CODE OF 1991**

Section 15, Article II of the 1987 Constitution declares that the State shall protect and promote the right to health of the people and instill health consciousness among them. Apparently pursuant to the aforementioned State policy, the Local Government Code of 1991 was enacted to introduce, among others, the devolution of the country's health care system from the national government to local government units (LGUs). This was based on the postulate that with decentralization, citizens would have better access to health services because presumably, the local government executives would know where the need for such services is dire and would be able to prioritized such needs. Hence, the responsibility for the maintenance of public health, including the operation and maintenance of local health facilities, was transferred from the Department of Health (DOH) to the Governors of concerned provinces or Mayors of host municipalities and cities.

More than twenty years since its implementation, however, the actual results of this devolution experiment have run counter to previous expectations. Assessments of the quality of health services since the advent of devolution conducted by independent experts have confirmed the "slow decay" in the delivery of health services in some areas of the country (Grundy, et al. 2003).<sup>1</sup> Among the problems that hound the devolution of health services include: the low priority given by LGUs to health concerns, corruption in the procurement of medicines, and denial of benefits of health workers due to inability of LGUs to bear the financial costs of increased salaries.

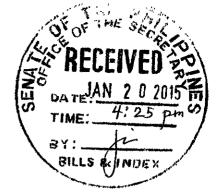
It is against this backdrop that this measure seeks to repeal certain sections of the Local Government Code of the Philippines to revert to the national government the duty to ensure delivery of health services to the citizenry.

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

ONNY" F. TRILLANES IV

<sup>&</sup>lt;sup>1</sup> Towards more effective delivery of health services. A position paper of the Liga ng mga Barangay (LnB) on the devolution of health services and on the rationalization of the structure, programs and operations of the DOH. [Accessed from http://www.pdf.ph/downloads/decentralization/EO%20444-LnB%20draft%20Posnion%20Paper.pdf on 12/11/2014]

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#### AN ACT

# **REVERTING TO THE NATIONAL GOVERNMENT THE DISCHARGE OF BASIC HEALTH SERVICES DEVOLVED TO LOCAL GOVERNMENT UNITS (LGUs), REPEALING FOR THE PURPOSE PERTINENT SECTIONS OF REPUBLIC ACT NO. 7160, OTHERWISE KNOWN AS THE LOCAL GOVERNMENT CODE OF 1991**

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

### 1 SECTION 1. Title. - This Act shall be known as the "Re-Nationalization of Devolved 2 Health Services and Facilities Act of 2015." SEC. 2. Declaration of Policy. - It is the declared policy of the State to protect and 3 promote the right to health of the people and instill health consciousness among them. Further, 4 the State shall endeavor to make essential goods, health and other services available to all the 5 people at affordable cost. б 7 SEC. 3. Objectives. - The objectives of this Act are: 8 To prevent the further deterioration of government health services and facilities a. brought about by the devolution of the duty to provide health services and maintain 9 medical facilities to local government units (LGUs); 10

- b. To improve the provision of essential health services to the people, especially the
  sick, the poor and marginalized sector of society;
- c. To improve and uplift the morale, social and economic well-being of previously
  devolved health workers; and
- d. To develop a professional health manpower complement that is responsive to the
  people's health needs and problems.

1	SEC. 4. Re-nationalization All health services and facilities devolved to the local	
2	government units (LGUs) are hereby re-nationalized and/or returned to the management,	
3	supervision and control of the national government. For this purpose, the following provisions of	
4	the Republic Act No. 7160, otherwise known as The Local Government Code of 1991 are hereby	
5	expressly repealed:	
6	a.	Section 17 (b) paragraph 1 (ii), paragraph 3 (iv) and paragraph 4 for health services
7		only;
8	b.	Section 102 a (1), a (2), a (3), b (1), b (2), and b (3);
9	C.	Section 103 (a) and (b);
10	d.	Section 104;
11	e.	Section 105; and
12	f.	Other related provisions of the Local Government Code that pertain to devolved
13		health services and facilities.
14	SEC. 5. Authority to use income Upon implementation of this Act, re-nationalized	
15	hospitals and Rural Health Units/Centers are hereby authorized to use the income they derived	

from their operation to improve and upgrade the services they provide; *Provided*, That the supporting financial and work plans are first approved by the Department of Health.

18 SEC. 6. Appropriation. – In the year following the enactment of this Act into law, the 19 costs of the devolved health services and facilities as of December 31, 1992 shall be deducted by 20 the Department of Budget and Management (DBM) from the Internal Revenue Allotment (IRA) 21 of the Local Government Units (LGUs) and shall be used as funding source to implement the 22 provision of this Act. Any deficiency shall be charged against the Organizational Adjustment 23 fund and appropriations saving/reserves. Thereafter, such sums as may be needed for its 24 continued implementation shall be included in the annual General Appropriations Act (GAA).

The IRA of LGUs in the succeeding years shall be net of the costs of providing, operating
and maintaining the previously devolved health services and facilities as of December 31, 1992.

SEC. 7. Implementing Rules and Regulations. – The DOH, in consultation with the
 Department of Interior and Local Government (DILG), shall formulate the Implementing Rules
 and Regulations (IRR) within three (3) months after the enactment of this Act.

SEC. 8. *Repealing Clause.* – All laws, presidential decrees, executive orders, and rules
and regulations, or parts thereof, inconsistent with the provisions of this Act are hereby repealed
or modified accordingly.

SEC. 9. Separability Clause. - If, for any reason, any section or provision of this Act is
held unconstitutional or invalid, the other sections or provisions thereof shall not be affected
thereby and shall remain in full force and effect.

SEC. 10. Effectivity Clause. - This Act shall take effect fifteen (15) days following its
 publication in the Official Gazette or in any two (2) newspapers of national circulation.

Approved,