

EIGHTEENTH CONGRESS OF THE  
REPUBLIC OF THE PHILIPPINES  
First Regular Session



Senate  
Office of the Secretary

20 JAN 21 A8:53

SENATE  
S. B. NO. 1283

RECEIVED BY

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Introduced by **SENATOR JOEL VILLANUEVA**

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**AN ACT PROVIDING SCHOLARSHIPS TO QUALIFIED STUDENTS  
TAKING MEDICAL EDUCATION PROGRAMS, APPROPRIATING  
FUNDS THEREFOR AND FOR OTHER PURPOSES**

**EXPLANATORY NOTE**

Article XIII, Section 12 of the 1987 Constitution provides that: "The State shall establish and maintain an effective food and drug regulatory system and undertake appropriate health manpower development and research, responsive to the country's health needs and problems."

If the Philippines hopes to adopt the Cuban health system, the first thing it needs to address in the doctor shortage. The ratio of doctors to patients in the country has always been a challenge for the public health sector. The Philippine Medical Association data show that there are 130,000 licensed doctors in the country but only about 70,000 of them are actively practicing the profession. The present doctor-population ratio here in the Philippines is 1:33,000, a far outcry from the 1:1,000 in Cuba, majority of whom are primary care physicians<sup>1</sup>.

Various reasons have been cited as a factor to the shortage of doctors serving the country. One is the lack of Higher Education Institutions (HEIs) offering Medicine programs. There are only thirty medical schools in the country, of which, only five are public and government-funded<sup>2</sup>. Another reason is the prohibitive cost of becoming a doctor. Medical studies in the country are too costly that it has become beyond the reach of Filipino families even those belonging to the higher middle-income class. To make this problem even worse is the fact that doctors are leaving the country for more lucrative jobs overseas.

This bill seeks to address the shortage of doctors by establishing a medical scholarship program. It shall provide the institutional mechanism for the envisioned

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<sup>1</sup> <https://today.mims.com/doctor-shortage-in-the-philippines--an-analysis>

<sup>2</sup> *ibid*

sustained human resource development of the Philippine public health care system. The scholarship program shall provide financial and other educational resource support mechanisms for the pursuit of studies in the field of medicine by deserving and qualified people.

This bill also mandates the scholars to be integrated in the public health system through a mandatory return service program, as they will be required to provide quality basic, promotive, preventive and curative health care services in government public health offices especially the underserved, remote, economically underdeveloped, distressed, conflict-afflicted and geographically disadvantaged areas.

In view of the urgent need to create a steadily expanding pool of medical doctors in order to fulfill the gaps in the current public health system and enable the government to deliver timely, adequate, competent medical and health care services, the passage of this measure is immediately sought.

  
SENATOR JOEL VILLANUEVA





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

1 **SECTION 1. Short Title.** – This Act shall be known as the “Medical  
2 Scholarship Act.”  
3

4 **SEC. 2. Declaration of Policy.** – It is the policy of the State to protect and  
5 promote the right to health of the people and instill health consciousness  
6 among them. Towards this end, the State shall institute and support policies  
7 and programs that are geared towards increasing the number of health  
8 professionals who will provide the needed health services in the country, such  
9 as a medical scholarship program that will encourage aspiring medical  
10 students to pursue education and training in the fields of health and medicine.  
11 In return, these physicians shall provide quality basic, promotive, preventive  
12 and curative health care services in government public health offices  
13 especially in under-served, remote, economically underdeveloped, distressed,  
14 conflict-afflicted and/or geographically disadvantaged areas.  
15

16 **SEC. 3. Establishment of the Medical Scholarship Program.** – There shall  
17 be established a Medical Scholarship Program for deserving students in State  
18 Universities and Colleges (SUCs) and in Private Higher Education Institutions  
19 (PHEIs) in regions where there are no SUCs offering medicine: *Provided,*  
20 That the applicant has passed the admission and other qualifying  
21 requirements of the Commission on Higher Education (CHED) and SUCs and  
22 PHEIs concerned.  
23  
24

1 The scholarship shall include, but not be limited, to the following:

- 2
- 3 a) Free tuition and other schools fees;
- 4
- 5 b) Allowance for prescribed books, supplies and equipment;
- 6
- 7 c) Clothing or uniform allowance;
- 8
- 9 d) Allowance for dormitory or boarding house accommodation;
- 10
- 11 e) Transportation allowance;
- 12
- 13 f) Internship fees, including financial assistance during the required
- 14 internship period;
- 15
- 16 g) Medical board review fees and licensure fees; *Provided*, that the support
- 17 shall only be limited to the first licensure examination of the scholar
- 18 concerned taken within one (1) year after graduation or completion of
- 19 post-graduate internship and other academic requirements, as
- 20 appropriate; and
- 21
- 22 h) Other education-related miscellaneous subsistence or living allowance.
- 23

24 **SEC. 4. Qualifications of Scholars.** – An applicant for the Medical  
25 Scholarship Program shall possess the following qualifications:

- 26
- 27 a) Must be a natural-born or naturalized Filipino citizen residing in the
- 28 Philippines;
- 29
- 30 b) Must be a graduating student or a graduate of an appropriate
- 31 undergraduate program identified as a prerequisite for a Doctor of
- 32 Medicine degree, from any Higher Education Institution (HEI) duly
- 33 recognized by the Commission on Higher Education (CHED), including
- 34 the direct entrant to the seven-year Integrated Liberal Arts Medicine
- 35 (INTARMED) Program of the University of the Philippines who
- 36 satisfactorily completes the first two (2) years of the program;
- 37
- 38 c) Must have passed the entrance examinations and other related
- 39 requirements for admission for a Doctor of Medicine degree in the SUC
- 40 or PHEI where the scholar intends to enroll in; and
- 41
- 42 d) Must have obtained the National Medical Admission Test (NMAT) score
- 43 mandated by CHED and the cut-off score required by the SUC or PHEI
- 44 where the student intends to enroll in.
- 45

46 **SEC. 5. Conditions for the Grant of Scholarship.** – Deserving students  
47 accepted to the Medical Scholarship Program shall be subject to the following  
48 conditions:



- 1 a) Must sign an agreement stating the terms and conditions of the  
2 scholarship on a form prescribed by CHED and DOH;  
3  
4 b) Must carry the full load of subjects prescribed per semester by the SUC  
5 or the PHEI concerned, and shall under no circumstance, drop a course  
6 which will result in underloading;  
7  
8 c) Must finish the entire Doctor of Medicine program within the prescribed  
9 time frame of the SUC or PHEI where the scholar is enrolled in, subject  
10 to the retention policies of the SUC or the PHEI;  
11  
12 d) Must undertake the required medical internship in a DOH-accredited  
13 public health facility or hospital upon graduation from a four-year Doctor  
14 of Medicine program, subject to the Association of Philippine Medical  
15 Colleges (APMC) Intern Matching Program: *Provided*, That for a five-  
16 year Doctor of Medicine program, the scholar enrolled in the SUC or  
17 PHEI must undertake the internship in the base or partner-hospital of the  
18 SUC or PHEI concerned;  
19  
20 e) Must take the board examination within a maximum period of one (1)  
21 year after completion of an internship program as required in Section  
22 4(d) above; and  
23  
24 f) Must agree to serve in a government public health office or government  
25 hospital in the scholar's hometown or, in the absence of threat for his/her  
26 safety, in any underserved municipality determined by DOH as a priority  
27 area, for at least eight (8) years or two (2) years for every year that the  
28 scholarship has been availed of; *Provided*, That such return service shall  
29 be completed within ten (10) years for those who have availed of a four-  
30 year program, and twelve (12) years for those who have availed of a  
31 five-year program, upon passing the licensure examination for  
32 physicians: *Provided further*, That the mandatory return service shall be  
33 in addition to the required internship under Section 4(d) above; *Provided*  
34 *further*, That residency training shall not be considered as a return  
35 service under this provision; *Provided finally*, That the physician shall  
36 receive appropriate salaries and other benefits for services rendered  
37 during the period of his return service as required under this Act.  
38

39 Notwithstanding anything to the contrary, the scholar may be allowed, for valid  
40 and justifiable reasons, to defer availing of the scholarship and file a leave of  
41 absence for a period not exceeding one (1) school year, subject to the  
42 guidelines and policies of the SUC or PHEI concerned.  
43

44 **SEC. 6. Failure to Comply with the Conditions and Termination of**  
45 **Scholarship.** – Failure of the scholar to comply with any of the conditions for  
46 the grant of scholarship as provided under this Act shall automatically  
47 disqualify the scholar from further enjoying the benefits of the scholarship  
48 program. The non-compliant scholar shall also repay the full cost of  
49 scholarship and related benefits he/she received, including all the expenses  
50 incurred during his/her participation in the scholarship program.



1 In addition, the scholarship being received by the scholar shall also be  
2 terminated in case of the following:

- 3
- 4 a) If the scholar accepts another scholarship from other government or  
5 private agencies or entities while enjoying the benefits under this Act;  
6
- 7 b) If the scholar fails in forty percent (40%) of the subjects he/she is  
8 enrolled in or fails to meet the academic requirements of the SUC or the  
9 PHEI or to complete the course within the prescribed period without valid  
10 cause as may be determined by the SUC or PHEI, CHED or DOH:  
11 *Provided*, That instead of repaying in cash the full cost of the scholarship  
12 and related expenses, the terminated scholar may opt to repay the same  
13 in kind by working in the public health sector, such as engaging in  
14 health-related research or teaching health-related subjects in public  
15 education institutions, or becoming integrated into the public health  
16 service system for a period equivalent to the number of years of  
17 mandatory return service as provided under this Act; *Provided further*,  
18 That the alternative return service shall exclude the period of internship  
19 and residency training;  
20
- 21 c) While being a scholar, the scholar commits gross misconduct in a  
22 manner that would bring significant damage to the SUC or PHEI or  
23 government institution where the scholar is affiliated with, or the  
24 community as a whole.  
25

26 **SEC. 7. Mandatory Return Service and Integration into the Public Health**  
27 **and Medical Service System; Penalty for Non-Compliance.** – Upon  
28 passing the Physician Licensure Examination (PLE) administered by the  
29 Philippine Regulatory Commission (PRC), the scholar shall be integrated into  
30 the public health and medical service system with the appropriate rank and  
31 salary and related benefits, for at least eight (8) years or two (2) years for  
32 every scholarship year availed of: *Provided*, That such return service shall be  
33 completed within the period prescribed under Section 4(f) under this Act;  
34 *Provided further*, That such mandatory return service and integration into the  
35 public health and medical service system under this Act shall be separate and  
36 distinct from the return service requirement of the SUC or PHEI and the  
37 mandatory post-graduate internship in a DOH-accredited public health facility,  
38 required by PRC as a prerequisite for taking the PLE; *Provided finally*, That an  
39 additional year of return service shall be imposed for every succeeding PLE  
40 that the scholar takes.  
41

42 In the event that a physician-scholar fails or refuses to serve the return  
43 service required under this Act, he/she shall be required to pay the full cost of  
44 the scholarship, including other benefits and related expenses incurred by the  
45 government for his/her schooling.  
46

47 In case of non-payment, the PRC shall deny the renewal of the physician's  
48 license: *Provided*, That the sanction shall not apply to physicians who fail to  
49 comply with the required return service on account of, or by reason of, severe  
50 or serious illness.

1  
2 **SEC. 8. Funding.** – The amount necessary to carry out the initial  
3 implementation of this Act shall be charged against the current year's  
4 appropriation of the participating SUC and/or DOH. Thereafter, the amount  
5 necessary for the continuous implementation of the medical scholarship  
6 provided under this Act shall be included in the annual budget of CHED in the  
7 General Appropriations Act.  
8

9 **SEC. 9. Five-Year Review of the Number of Scholars to be Admitted –**  
10 Every five (5) years from the effectivity of this Act, CHED and DOH, in  
11 consultation with participating SUCs and PHEIs, shall determine the number  
12 of scholars to be admitted every school year; *Provided*, that in all cases, the  
13 number of physicians needed by DOH to effectively serve all Filipino citizens  
14 shall be taken into consideration in determining the number of scholars in a  
15 given school year.  
16

17 **SEC. 10. Implementing Rules and Regulations.** – Within one hundred  
18 eighty days (180) days from the effectivity of this Act, the Secretary of Health  
19 and the Chairman of CHED, in consultation with various SUCs and PHEIs and  
20 other relevant stakeholders, shall jointly promulgate the rules and regulations  
21 necessary for the effective implementation of this Act.  
22

23 **SEC. 11. Separability Clause.** – If any part or provision of this Act shall be  
24 held invalid or unconstitutional, the other parts or provisions hereof that are  
25 not affected shall remain in full force and effect.  
26

27 **SEC. 12. Repealing Clause.** – All laws, decrees, or rules inconsistent with  
28 this Act are hereby repealed or modified accordingly.  
29

30 **SEC. 13. Effectivity Clause.** – This Act shall take effect fifteen (15) days after  
31 its publication in the *Official Gazette* or in at least two (2) newspapers of  
32 general circulation.  
33

34 **Approved,**