NINETEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES *First Regular Session* 

BILLS

# SENATE S. No. 26

#### Introduced by SENATOR RAMON BONG REVILLA, JR.

#### AN ACT

### ACCELERATING THE IMPLEMENTATION OF THE PHILIPPINE HEALTH FACILITY DEVELOPMENT PLAN, THEREBY CREATING A BUILD, BUILD, BUILD PROGRAM FOR HOSPITALS AND OTHER HEALTH FACILITIES, AND APPROPRIATING FUNDS THEREFOR

#### **EXPLANATORY NOTE**

The Covid-19 pandemic has presented a unique opportunity to comprehensively assess the capacities of our health care systems, and address the inadequacies thereof.

While there is a Health Facilities Enhancement Program (HFEP) which aims to upgrade and modernize the hospitals, health care infrastructure and medical equipment, budget disbursement and utilization for the program has been low. During one of the Senate budget deliberations hearing, it was revealed that though the program had total appropriations of more than Php 130 billion over a ten-year period, only 11% of the total funds were disbursed.

And so, the problem of hospitals being congested with patients, areas having no access to quality care, and facilities lacking necessary machinery and manpower to deliver basic health service persist.

In fact, it was reported that out of all the regions in the country, only the National Capital Region (NCR) and Northern Mindanao have met the ideal hospital bed to population ratio of 1:800. In some areas, the said ratio is at 1:4,000. To close this gap, there is a need to provide 43,000 hospital beds.

Also, a study reported that 25 provinces and two cities in Metro Manila do not have Level 2 or Level 3 hospitals which could treat Covid-19 patients.

During the pandemic, the country was also found to be lacking a network of reliable laboratories that could have easily tested individuals and diagnosed infections.

As the government turns to increased spending in public infrastructure to restart the economy after the pandemic, it is high time that we fast track the construction, rehabilitation and modernization of our health care facilities.

It is timely that we recalibrate the Build, Build, Build program and prioritize investments in the public health sector, especially when multilateral financial institutions have offered funding in support of Covid-19 response and building of more health infrastructure.

This proposed measure aims to accelerate the implementation of the Philippine Health Facility Development Plan and hasten lasting reforms in our health care systems to fulfill the objectives of the Universal Health Care Act. An initial funding of fifty billion pesos is also appropriated for the massive undertaking.

In this light, the immediate passage of this bill is highly recommended.

RAMON BONG REVILLA, JR.

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

1 Sec. 1. Short Title. - This Act shall be known as the "Kaayusan sa Adhikaing

2 Pagamut**an Act**".

Sec. 2. *Declaration of Policy.* – It is a policy of the State to protect and promote the right to health of the people and instill health consciousness among them. In line with this policy, the State shall ensure that an extensive network of fully-equipped public health care facilities, which are able to provide the highest quality of health services, shall be accessible to all Filipinos and are fully responsive to the health care needs of the population.

9 Sec. 3. *Build, Build, Build Program for Hospitals and Other Facilities.* – There 10 shall be created a Build, Build, Build Program for Hospitals and other facilities, 11 hereafter referred to as the Program, which shall accelerate the implementation of the 12 Philippine Health Facility Development Plan and address the lack of health care 13 infrastructure such as hospitals, polyclinics, referral laboratories, birthing centers and 14 other health facilities throughout the country, through upgrading and modernizing of 15 the existing facilities, expanding their capacities, repairing and renovating those

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structures damaged by natural or man-made calamities, and construction of new
 hospitals and other health facilities.

Sec. 4. *Inter-Agency Committee.* – There is hereby created an Inter-Agency Committee for the monitoring and implementation of this Act. The Committee shall be composed of the Secretary of the Department of Health (DOH), Secretary of the Department of Public Works and Highways (DPWH), Secretary of the Department of Budget and Management (DBM), and the Director General of the National Economic and Development Authority (NEDA), or their respective authorized representatives.

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Sec. 5. *Prioritization.* – The Program shall prioritize the following:

- (a) The upgrading of Level 1 DOH and local government unit hospitals to Level
  2 capacity, such that every province and highly urbanized city in the country
  shall have at least one (1) Level 2 or Level 3 hospital;
- (b) The expansion of capacities of DOH and LGU hospitals, specifically targeting
  those provinces, cities and other areas with the highest hospital bed-to population ratio, with the ultimate objective of reaching the ideal hospital
  bed-to-population ratio across the country;
- 17 (c) The construction of specialty hospitals and/or development of specialty 18 centers such as heart and lung center, orthopedic center, kidney care and 19 transplant center, mental health center, children's center, geriatric center, 20 among others, in all regions which respond to the specific health issues of 21 the community based on socio-economic, demographic and geographic 22 profile, occupational hazards, leading causes of mortality and morbidity, and 23 other risk factors;
- (d) The construction of polyclinics at the municipal and city level that will serve
  as intermediate between primary care facilities and hospitals, and will
  provide outpatient specialty care including diagnostics, imaging and
  laboratory services;
- (e) The creation of a fully responsive Service Delivery Network for reproductive
  and maternal health, including emergency obstetric and neonatal care;
- (f) The institutionalization of a nationwide network of quality-assured
  laboratories compliant to biosafety standards and capable of performing
  research, surveillance and testing on communicable diseases, and

responding to emerging diseases and disease outbreaks, epidemics and pandemic.

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3 Sec. 5. *Manpower and equipment requirements.* – The upgrade of existing 4 hospitals and health care facilities shall have a corresponding increase and upgrade in 5 the number of medical personnel and procurement of necessary equipment and 6 machineries, in accordance with the established guidelines of the Department of 7 Health and Department of Budget and Management.

Sec. 6. National registry and inventory of health facilities. - The registry of 8 duly accredited and licensed public and private hospitals and health care facilities shall 9 be updated by the Department of Health, and shall be submitted to the Inter-Agency 10 Committee for proper identification of priority infrastructure; Provided, that all local 11 government units may, within a reasonable period given by the Committee, submit 12 their requests and recommendations to the Committee, after the conduct of their own 13 assessment of local health infrastructure and requirements; Provided, further, that 14 local government units, especially in poor regions of the country, with the widest gap 15 in terms of existing health infrastructure against the actual needs of the population 16 will be given priority. 17

Sec. 7. *Appropriation.* – An initial amount of Fifty Billion Pesos (Php 50,000,000,000.00) is hereby appropriated under the Health Facilities Enhancement Program (HFEP) for the implementation of this Act.

Sec. 8. *Separability Clause.* – If any provision or part hereof is held invalid or unconstitutional, the remainder of the law or the provision or part not otherwise affected shall remain valid and subsisting.

Sec. 9. *Repealing Clause.* – Any law, presidential decree or issuance, executive order, letter of instruction, administrative order, rule, or regulation contrary to or inconsistent with the provisions of this Act are hereby repealed, modified, or amended accordingly.

28 Sec. 10. *Effectivity.* – This Act shall take effect fifteen (15) days after its 29 publication in the *Official Gazette* or in a newspaper of general circulation.

Approved,

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