

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



23 JAN 23 P3:37

SENATE
S. No. 1728

RECEIVED BY: 

Introduced by Senator MARK A. VILLAR

AN ACT
INSTITUTIONALIZING A NATIONAL TELEMEDICINE SYSTEM IN THE PHILIPPINES

EXPLANATORY NOTE

Globally, telemedicine has been adopted especially when mobility restriction and lockdowns were enforced during the onset of the COVID-19 pandemic.

Based on a study, telemedicine portrayed an unequivocal benefit as it continued services and accessibility to patients who need immediate medical response. Convenience, cost-effectiveness, decreased patient expenses, and time efficiency were also among the perceived benefits of telemedicine.¹ Cancer patients are of the many people who reaped the benefits of this medical advancement.

Telemedicine has its potential in bridging healthcare inequity. It will also increase access for vulnerable and disadvantaged populations and to the far-flung, and unreachable areas.² There are, however, obstacles as to the nationwide adoption of telemedicine such as the poor broadband internet access and doctor shortage.

Thus, this bill seeks to institutionalize telemedicine system. This bill aims to create an innovative, unified, and comprehensive policy framework for the practice and development of telemedicine in the country. This bill likewise allows the use of

¹ Mac, E., Cruz-Lim, D., Cartier, H., Co, S., Jonne, M., Mendoza, L., Dumlaog III, P., Lucero, J., Yap, B., Victorio, C., & Garcia, L. (n.d.). *Physicians' Perceptions on the Role of Telemedicine in Cancer Care During and Post-COVID-19 Pandemic*. <https://actamedicaphilippina.upm.edu.ph/index.php/acta/article/download/2836/2308/>

² Fisher K, Magin P. The telehealth divide: health inequity during the COVID-19 pandemic. *Fam Pract*. 2021;XX:1-3., as mentioned in Cordero, D.A. (2022) Telehealth during the COVID-19 pandemic in the Philippines, OUP Academic. Oxford University Press. Available at: <https://academic.oup.com/fampra/advance-article/doi/10.1093/fampra/cmab078/6632235> (Accessed: October 27, 2022).

information and communication technology in the delivery of healthcare services especially in times of emergencies and disasters; to strengthen the health system and infrastructure of the country that will enable it to serve all Filipinos and withstand any unforeseen events.

Human life is sacred. Thus, it is the duty of the State to ensure that everyone shall be given due care and medical support for them to live longer and healthier. Every Filipino, regardless of their status and location, deserves to be provided with a proper health care.

Thus, in view of the foregoing, the approval of this bill is earnestly sought.



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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 "*Telemedicine Act of*
2 *2023*"

3 Sec. 2. *Declaration of Policy.* – The State shall protect and promote the right to
4 health of the people and instill health consciousness among them. Hence, it is the
5 policy of the State to continuously search for, develop, and utilize innovative ways and
6 systems to fully protect the health of all Filipinos, from the dense populations of urban
7 centers to the far-flung and unreachable rural and remote areas.

8 It shall likewise be the policy of the State to encourage and strengthen
9 initiatives for promoting health in times of emergencies and calamities through the
10 use of information and communication technology.

11 Sec. 3. *Objective.* – The objectives of this Act are:

12 (a) To create an innovative, unified, and comprehensive policy framework for
13 the practice and development of telemedicine in the country;

14 (b) To provide healthcare services, including consultation, diagnosis, treatment,
15 and prescription of medicines especially in areas that have inadequate
16 and/or are far from traditional healthcare institutions and professionals;

1 (c) To allow the use of information and communication technology in the
2 delivery of healthcare services especially in times of emergencies and
3 disasters; and

4 (d) To strengthen the health system of the country that will enable it to serve
5 all Filipinos and withstand any unforeseen events.

6 Sec. 4. *Definition of Terms.* – For the purposes of this Act, the following
7 definitions shall apply:

8 (a) "*Telemedicine*" also referred to as telehealth or electronic healthcare, is a
9 system of delivering healthcare services through the use of information and
10 communications technology as a complement to traditional healthcare systems.
11 It includes the total management of a patient's health care from consultation,
12 diagnosis, and treatment to prescription of medicine and record-keeping. It
13 likewise includes the education and training of health personnel to capacitate
14 them to use telemedicine systems as well as the development of applications
15 and programs for the furtherance of health;

16 (b) "*Information and Communications Technology*" includes but is not limited
17 to:

- 18 i. Digital interactive video, audio, and/or data transmission;
- 19 ii. Video or web-conferencing technology;
- 20 iii. Still image capture or asynchronous store and forward; or
- 21 iv. Modern medical devices for patient care and diagnosis.

22 Sec. 5. *National Telemedicine Council.* – A National Telemedicine Council,
23 hereinafter referred to as "Council", is hereby established and shall be composed of
24 the following members:

- 25 (a) Secretary of Health, who shall serve as Chairperson;
- 26 (b) Secretary of Information and Communication Technology;
- 27 (c) Secretary of Science and Technology;
- 28 (d) Secretary of the Interior and Local Government;
- 29 (e) President of the Philippine Health Insurance Corporation;
- 30 (f) Director-General of the Food and Drug Administration;

1 (g) Presidents of healthcare professional associations such as the Philippine
2 Medical Association, Philippine Nurses Association, and the Philippine
3 Pharmacists Association; and

4 (h) Director of the Office for Telemedicine.

5 *Sec. 6. Functions of the Council.* – The Council shall:

6 (a) Establish guidelines and regulations on the practice and provision of
7 services;

8 (b) Create a national roadmap for the achievement and furtherance of the
9 objectives of this Act;

10 (c) Establish and provide for a mechanism of accreditation for electronic
11 healthcare providers;

12 (d) Establish a national integrated database system for medical information;

13 (e) Establish a system for electronic prescription of medicine;

14 (f) Spearhead and promote research and development activities;

15 (g) Capacitate and train existing and new healthcare professionals of the
16 provision of health services; and

17 (h) Set quality standards for systems, professionals and services.

18 The Council shall convene as frequently as necessary to perform its mandated
19 functions.

20 *Sec. 7. Implementing Agency and Secretariat.* – The Department of Health
21 (DOH) shall be the lead agency in implementing this Act. For this purpose, an Office
22 for Telemedicine shall be created under the Department which shall serve as the
23 Secretariat for the Council. The Office for Telemedicine shall be headed by a Director.

24 *Sec. 8. Practice of Medicine.* – The provision of Telemedicine services shall be
25 limited only to registered physicians. Telemedicine services shall be deemed as acts
26 constituting practice of medicine and shall result to the establishment of a doctor-
27 patient relationship.

28 *Sec. 9. Emergency.* – The Council shall establish special rules and systems for
29 the enhanced utilization of Telemedicine in times of emergencies and calamities.

30 *Sec. 10. Privacy.* – All medical records generated, including records maintained
31 via video, audio, electronic, or other means acquired through Telemedicine must
32 conform to the laws regarding the confidentiality of healthcare information of the

1 patient, rights to medical information, and recordkeeping requirements. Any violation
2 of this provision shall be penalized to the maximum extent under the law.

3 Sec. 11. *Standard of Care.* – The standard of care shall be the same as the
4 standard of care required in traditional or non-Telemedicine healthcare services.

5 Sec. 12. *Implementing Rules and Regulations.* – The DOH shall promulgate the
6 necessary rules and regulations for the effective implementation of this Act within
7 ninety (90) days from its effectivity.

8 Sec. 13. *Appropriations.* – The amount necessary for the initial implementation
9 this Act shall be taken from the current appropriations of the DOH. Thereafter, the
10 amount needed for the continued implementation of this Act shall be included in the
11 annual appropriations of the DOH as a distinct and separate item.

12 Sec. 14. *Separability Clause.* – If any provision of this Act is declared invalid or
13 unconstitutional, the remaining provisions shall continue to be in full force and effect.

14 Sec. 15. *Repealing Clause.* – All laws, decrees, executive orders, proclamations,
15 rules and regulations, and issuances, or parts thereof which are inconsistent with the
16 provisions of this Act, are hereby repealed, amended, or modified accordingly.

17 Sec. 16. *Effectivity.* – This Act shall take effect after fifteen (15) days following
18 its publication in the *Official Gazette* or in a newspaper of general circulation.

Approved,