

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

SECRETARY

SENATE
S.B. No. 2126

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Introduced by Senator Loren Legarda

EXPLANATORY NOTE

The State recognizes the vital role of the youth in nation-building and shall promote and protect their physical, moral, spiritual, intellectual, and social well-being.

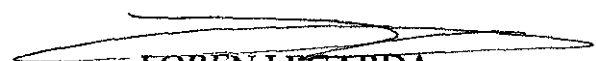
Statistics show that a large number of Filipino children are underweight, in particular, 31% of those in pre-school and 33% of those in school-age. Most come from families that are living within the poverty belt. Undernutrition paves the way for diseases and weaknesses in health, and more often than not, results in lifetime disability.

While the National Health Insurance Act provides a system wherein the poor can avail of health services through their membership in the National Health Insurance Program (NHIP), there are gaps that need to be filled - particularly on children.

This bill seeks to fill the gaps by increasing the scope and coverage of the NHIP to cover the health needs of our children through a Children's Health Insurance Program (CHIP). Under this program, eligible children coming from low-income families shall be entitled to a full range of health services that shall include regular check-ups, immunizations, laboratory tests and dental care.

This proposed legislation is in line with the Millennium Development Goals of reducing child mortality, among others. Recognizing the importance of children's welfare, especially health-wise, and providing institutional support through such a measure, is a step towards fulfilling the goals of providing a world fit for children to live in.

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


LOREN LEGARDA
Senator

JUL 27 1953

SENATE
S.B. No. 2126

RECEIVED BY: *[Signature]*

Introduced by Senator Loren Legarda

AN ACT
INSTITUTING MECHANISMS FOR THE ESTABLISHMENT OF A
CHILDREN'S HEALTH INSURANCE PROGRAM, AMENDING FOR THE
PURPOSE REPUBLIC ACT NO. 7875, OTHERWISE KNOWN AS
"THE NATIONAL HEALTH INSURANCE ACT OF 1995," AS AMENDED,
AND FOR OTHER PURPOSES

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

1 **SECTION 1.** Section 4 of Republic Act No. 7875 is hereby amended to read as
2 follows:

3 "SEC. 4. Definition of Terms. - For the purposes of this Act, the
4 following terms shall be defined as follows:

5 xxx

6 (d) *CHILD HEALTH ASSISTANCE* - A RANGE OF HEALTH CARE
7 AND SUPPORT SERVICES INCLUDING, BUT NOT LIMITED TO,
8 PHYSICIAN SERVICES AND ANY OTHER MEDICAL, DIAGNOSTIC,
9 SCREENING, PREVENTIVE, RESTORATIVE, REMEDIAL, THERAPEUTIC
10 OR REHABILITATIVE SERVICE;

11 xxx

12 (s) *Member* - Any person whose premiums have been regularly
13 paid to the National Health Insurance Program. He may be a paying member,
14 an indigent member, A QUALIFIED CHILD MEMBER, or a pensioner /
15 retiree member.

16 xxx

17 (dd) *QUALIFIED CHILD MEMBER* - ANY CHILD OF A LOW-
18 INCOME FAMILY UNDER SIX YEARS OF AGE, OR SIX YEARS OF AGE OR
19 OVER BUT IS UNABLE TO FULLY TAKE CARE OF OR PROTECT
20 HIMSELF/HERSELF FROM ABUSE, NEGLECT, CRUELTY,

1 EXPLOITATION OR DISCRIMINATION BECAUSE OF A PHYSICAL,
2 MENTAL DISABILITY OR CONDITION, AND WHOSE FAMILY IS BELOW
3 POVERTY LINE AS DETERMINED BY THE PERTINENT GOVERNMENT
4 AGENCY;

5 xxx''

6
7 **SECTION 2.** Section 5 of the same Act is hereby amended to read as follows:

8 "SEC. 5. Establishment and Purpose. - There is hereby created the
9 National Health Insurance Program which shall provide health insurance
10 coverage and ensure affordable, acceptable, available and accessible health
11 care services for all citizens of the Philippines, in accordance with the policies
12 and specific provisions of this Act. xxx It shall initially consist of Programs I
13 and II of Medicare and be expanded progressively to constitute one universal
14 health insurance program for the entire population. IT SHALL INITIATE
15 AND EXPAND THE PROVISION OF CHILD HEALTH ASSISTANCE TO
16 INCLUDE A CHILD HEALTH INSURANCE PROGRAM FOR UNINSURED,
17 LOW-INCOME CHILDREN IN AN EFFECTIVE MANNER THAT IS
18 COORDINATED WITH OTHER SOURCES OF HEALTH BENEFITS
19 COVERAGE FOR CHILDREN.

20 xxx "

21
22 **SECTION 3.** Section 7 of the same Act is hereby amended to read as follows:

23 "SEC. 7. Enrollment. - The Program shall enroll beneficiaries in order
24 for them to be placed under coverage that entitles them to avail of benefits
25 with the assistance of the financial arrangements provided by the Program.
26 The process of enrollment shall include the identification of beneficiaries,
27 issuance of appropriate documentation specifying eligibility to benefits, and
28 indicating how membership was obtained or is being maintained. The
29 enrollment shall proceed in accordance with these specific policies:

30 a) xxx;

31 b) xxx;

32 c) xxx; and

33 d) xxx.

34 All indigents AND QUALIFIED CHILD MEMBERS not enrolled in the
35 Program shall have priority in the use and avilment of the services and

1 facilities of government hospitals, health care personnel, and other health
2 organizations: Provided, however, That such government health care
3 providers shall ensure that said indigents AND QUALIFIED CHILD
4 MEMBERS shall subsequently be enrolled in the Program.”

5
6 **SECTION 4.** Section 12 of the same Act shall now read as follows:

7 “SEC. 12. Entitlement to Benefits. - xxx

8 The following need not pay the monthly contributions to be entitled to
9 the Program’s benefits: Retirees and pensioners of the SSS and GSIS prior to
10 the effectivity of this Act; Members who reach the age of retirement as
11 provided for by law and have paid at least one hundred twenty (120)
12 monthly contributions; [and] Enrolled indigents; AND (D) QUALIFIED
13 CHILD MEMBERS.”

14
15 **SECTION 5.** Section 28 of the same Act is hereby amended to read as follows:

16 “SEC. 28. Contributions. - All members of the Program shall contribute
17 to the Fund, in accordance with a reasonable, equitable and progressive
18 contribution schedule to be determined by the Corporation on the basis of
19 applicable actuarial studies and in accordance with the following guidelines:

20 xxx

21 CONTRIBUTIONS MADE IN BEHALF OF A QUALIFIED CHILD
22 MEMBER SHALL NOT EXCEED THE MINIMUM CONTRIBUTIONS SET
23 FOR EMPLOYED MEMBERS.”

24
25 **SECTION 6.** A new Section 30 is hereby added to read as follows:

26 “SEC. 30. PAYMENT FOR A QUALIFIED CHILD MEMBER’S
27 CONTRIBUTIONS. - CONTRIBUTIONS FOR QUALIFIED CHILD
28 MEMBERS SHALL BE SUBSIDIZED PARTIALLY BY THE LOCAL
29 GOVERNMENT UNIT WHERE THE MEMBER RESIDES. THE
30 CORPORATION SHALL PROVIDE COUNTERPART FINANCING EQUAL
31 TO THE LGU’S SUBSIDY FOR CHILDREN. THE SHARE OF THE LGUS
32 SHALL BE PROGRESSIVELY INCREASED UNTIL SUCH TIME THAT
33 THEIR SHARE BECOME EQUAL TO THAT OF THE NATIONAL
34 GOVERNMENT.”

1 **SECTION 7. *Implementing Rules and Regulations.*** - Within thirty (30) days
2 from the effectivity of this Act, the Board of Directors of the Philippine Health
3 Insurance Corporation (PHIC) shall convene to formulate the rules and regulations
4 for the implementation of this Act.

5
6 **SECTION 8. *Separability Clause.*** - If any part or provision of this Act shall
7 be held unconstitutional or invalid, other provisions which are not affected thereby
8 shall continue to be in full force and effect..

9
10 **SECTION 9. *Repealing Clause.*** - All laws, presidential decrees, executive
11 orders, rules and regulations or parts thereof which are deemed inconsistent with
12 the provisions of this Act are hereby repealed, amended, or modified accordingly.

13
14 **SECTION 10. *Effectivity Clause.*** - This Act shall take effect fifteen (15) days
15 following its full and complete publication in an Official Gazette or in at least two (2)
16 newspapers of general circulation, whichever comes first.

17
18 Approved,