

Republic of the Philippines  
Congress of the Philippines  
Metro Manila  
Seventeenth Congress  
Third Regular Session

Begun and held in Metro Manila, on Monday, the twenty-third day of July, two thousand eighteen.



[ REPUBLIC ACT NO. **11332** ]

AN ACT PROVIDING POLICIES AND PRESCRIBING PROCEDURES ON SURVEILLANCE AND RESPONSE TO NOTIFIABLE DISEASES, EPIDEMICS, AND HEALTH EVENTS OF PUBLIC HEALTH CONCERN, AND APPROPRIATING FUNDS THEREFOR, REPEALING FOR THE PURPOSE ACT NO. 3573, OTHERWISE KNOWN AS THE "LAW ON REPORTING OF COMMUNICABLE DISEASES"

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

SECTION 1. *Short Title.* – This Act shall be known as the "Mandatory Reporting of Notifiable Diseases and Health Events of Public Health Concern Act".

SEC. 2. *Declaration of Policy.* – It is hereby declared the policy of the State to protect and promote the right to health of the people and instill health consciousness among them. It

shall endeavor to protect the people from public health threats through the efficient and effective disease surveillance of notifiable diseases including emerging and re-emerging infectious diseases, diseases for elimination and eradication, epidemics, and health events including chemical, radio-nuclear and environmental agents of public health concern and provide an effective response system in compliance with the 2005 International Health Regulations (IHR) of the World Health Organization (WHO). The State recognizes epidemics and other public health emergencies as threats to public health and national security, which can undermine the social, economic, and political functions of the State.

The State also recognizes disease surveillance and response systems of the Department of Health (DOH) and its local counterparts, as the first line of defense to epidemics and health events of public health concern that pose risk to public health and security.

SEC. 3. *Definition of Terms.* – As used in this Act:

(a) *Disease* refers to an illness due to a specific toxic substance, occupational exposure or infectious agent, which affects a susceptible individual, either directly or indirectly, as from an infected animal or person, or indirectly through an intermediate host, vector, or the environment;

(b) *Disease control* refers to the reduction of disease incidence, prevalence, morbidity or mortality to a locally acceptable level as a result of deliberate efforts and continued intervention measures to maintain the reduction;

(c) *Disease surveillance* refers to the ongoing systematic collection, analysis, interpretation, and dissemination of outcome-specific data for use in the planning, implementation, and evaluation of public health practice. A disease surveillance system includes the functional capacity for data analysis as well as the timely dissemination of these data to persons who can undertake effective prevention and control activities;

(d) *Emerging or re-emerging infectious diseases* refer to diseases that: (1) have not occurred in humans before; (2) have occurred previously but affected only small numbers of people in isolated areas; (3) have occurred throughout human history

but have only recently been recognized as a distant disease due to an infectious agent; (4) are caused by previously undetected or unknown infectious agents; (5) are due to mutant or resistant strains of a causative organism; and (6) once were major health problems in the country, and then declined dramatically, but are again becoming health problems for a significant proportion of the population;

(e) *Epidemic/outbreak* refers to an occurrence of more cases of disease than normally expected within a specific place or group of people over a given period of time;

(f) *Epidemiologic investigation* refers to an inquiry to the incidence, prevalence, extent, source, mode of transmission, causation of, and other information pertinent to a disease occurrence;

(g) *Health event of public health concern* refers to either a public health emergency or a public health threat due to biological, chemical, radio-nuclear and environmental agents;

(h) *Infectious disease* refers to a clinically manifested disease of humans or animals resulting from an infection;

(i) *Mandatory reporting* refers to the obligatory reporting of a condition to local or state health authorities, as required for notifiable diseases, epidemics or public health events of public health concern;

(j) *Notifiable disease* refers to a disease that, by legal requirements, must be reported to the public health authorities;

(k) *Public health authority* refers to the DOH (specifically the Epidemiology Bureau, Disease Prevention and Control Bureau, Bureau of Quarantine and International Health Surveillance, Health Emergency Management Bureau, Food and Drug Administration, government hospitals, Research Institute of Tropical Medicine and other National Reference Laboratories, and DOH Regional Offices), the local health office (provincial, city or municipality), or any person directly authorized to act on behalf of the DOH or the local health office;

(l) *Public health emergency* refers to an occurrence or imminent threat of an illness or health condition that:

(1) Is caused by any of the following:

(i) Bioterrorism;

(ii) Appearance of a novel or previously controlled or eradicated infectious agent or biological toxin;

(iii) A natural disaster;

(iv) A chemical attack or accidental release;

(v) A nuclear attack or accident; or

(vi) An attack or accidental release of radioactive materials; and

(2) Poses a high probability of any of the following:

(i) A large number of deaths in the affected population;

(ii) A large number of serious injuries or long-term disabilities in the affected population;

(iii) Widespread exposure to an infectious or toxic agent that poses a significant risk of substantial harm to a large number of people in the affected population;

(iv) International exposure to an infectious or toxic agent that poses a significant risk to the health of citizens of other countries; or

(v) Trade and travel restrictions;

(m) *Public health threat* refers to any situation or factor that may represent a danger to the health of the people; and

(n) *Response* refers to the implementation of specific activities to control further spread of infection, outbreaks or epidemics and prevent re-occurrence. It includes verification, contact tracing, rapid risk assessment, case measures, treatment of patients, risk communication, conduct of prevention activities, and rehabilitation.

SEC. 4. *Objectives.* – This Act shall have the following objectives:

(a) To continuously develop and upgrade the list of nationally notifiable diseases and health events of public health concern with their corresponding case definitions and laboratory confirmation;

(b) To ensure the establishment and maintenance of relevant, efficient and effective disease surveillance and response system at the national and local levels;

(c) To expand collaborations beyond traditional public health partners to include others who may be involved in the disease surveillance and response, such as agricultural agencies, veterinarians, environmental agencies, law enforcement entities, and transportation and communication agencies, among others;

(d) To provide accurate and timely health information about notifiable diseases, and health-related events and conditions to citizens and health providers as an integral part of response to public health emergencies;

(e) To establish effective mechanisms for strong collaboration with national and local government health agencies to ensure proper procedures are in place to promptly respond to reports of notifiable diseases and health events of public health concern, including case investigations, treatment, and control and containment, including follow-up activities;

(f) To ensure that public health authorities have the statutory and regulatory authority to ensure the following:

(1) Mandatory reporting of reportable diseases and health events of public health concern;

(2) Epidemic/outbreaks and/or epidemiologic investigation, case investigations, patient interviews, review of medical records, contact tracing, specimen collection and testing, risk assessments, laboratory investigation, population surveys, and environmental investigation;

(3) Quarantine and isolation; and

(4) Rapid containment and implementation of measures for disease prevention and control;

(g) To provide sufficient funding to support operations needed to establish and maintain epidemiology and surveillance units at the DOH, health facilities and local government units (LGUs); efficiently and effectively investigate outbreaks and health events of public health concern; validate, collect, analyze and disseminate disease surveillance information to relevant agencies or organizations; and implement appropriate response;

(h) To require public and private physicians, allied medical personnel, professional societies, hospitals, clinics, health facilities, laboratories, pharmaceutical companies, private companies and institutions, workplaces, schools, prisons, ports, airports, establishments, communities, other government agencies, and nongovernment organizations (NGOs) to actively participate in disease surveillance and response; and

(i) To respect to the fullest extent possible, the rights of people to liberty, bodily integrity, and privacy while maintaining and preserving public health and security.

*SEC. 5. Notifiable Diseases and Health Events of Public Health Concern.* – The Epidemiology Bureau under the DOH shall regularly update and issue a list of nationally notifiable diseases and health events of public health concern with their corresponding case definitions. The selection and the deletion of diseases and health events of public health concern shall be based on criteria established by the DOH.

*SEC. 6. Mandatory Reporting of Notifiable Diseases and Health Events of Public Concern.* – The DOH, through the Epidemiology Bureau, shall issue the official list of institutionalized public health information system, disease surveillance and response systems for mandatory reporting of notifiable diseases and health events of public concern provided in Section 5 of this Act. This official list shall include the Field Health Service Information System (FHSIS), the Philippine Integrated Disease Surveillance Response (PIDSRS) System with its Case-based Surveillance and Event-based Surveillance, and other duly institutionalized public health disease surveillance and response systems of the DOH.

Under this Act:

(a) The DOH and its local counterparts are mandated to implement the mandatory reporting of notifiable diseases and health events of public health concern;

(b) The DOH and its local counterparts shall establish and maintain functional disease surveillance and response systems, which include coordination mechanisms, implementation protocols for reporting and response, measures for data security and confidentiality, and procedures and provision to ensure safety of personnel conducting disease surveillance and response activities;

(c) All public and private physicians, allied medical personnel, professional societies, hospitals, clinics, health facilities, laboratories, institutions, workplaces, schools, prisons, ports, airports, establishments, communities, other government agencies, and NGOs are required to accurately and immediately report notifiable diseases and health events of public health concern as issued by the DOH;

(d) Data collection, analysis, and the dissemination of information from official disease surveillance and response systems can only be done by authorized personnel from the DOH and its local counterparts and may only be used for public health concern purposes only; thus, should be exempted in the provision of Data Privacy Act on accessibility of data;

(e) To perform their disease surveillance and response functions, authorized health personnel from the DOH and its local counterparts have the statutory and regulatory authority to enforce the following:

(1) Establishment of public health information system disease surveillance and response systems in private and public facilities deemed necessary to protect the health of the population in coordination with the DOH-Epidemiology Bureau;

(2) Mandatory reporting of notifiable diseases and health events of public health concern;

(3) Conduct of epidemic/outbreak and epidemiologic investigations, case investigations, patient interviews, review of medical records, contact tracing, collection, storage,

transport and testing of samples and specimen, risk assessments, laboratory investigation, population surveys, and environmental investigation;

(4) Rapid containment, quarantine and isolation, disease prevention and control measures, and product recall;

(5) Response activities for events of public health concern;

(f) The DOH and its local counterparts shall ensure that all surveillance and response officers have adequate capacity for mandatory reporting of notifiable diseases, risk assessment, epidemiology, disease surveillance, and response to epidemics and health events of public health concern. It shall also ensure that the safety and protection of all personnel directly involved in surveillance and response activities are upheld; and

(g) All personnel of the DOH and its local counterparts, and all other individuals or entities involved in conducting disease surveillance and response activities shall respect, to the fullest extent possible, the rights of people to liberty, bodily integrity, and privacy while maintaining and preserving public health and security.

*SEC. 7. Declaration of Epidemic or Public Health Emergency.* – The Secretary of Health shall have the authority to declare epidemics of national and/or international concerns except when the same threatens national security. In which case, the President of the Republic of the Philippines shall declare a State of Public Health Emergency and mobilize governmental and nongovernmental agencies to respond to the threat.

Provincial, city or municipal health offices may only declare a disease outbreak within their respective localities provided the declaration is supported by sufficient scientific evidence based on disease surveillance data, epidemiologic investigation, environmental investigation, and laboratory investigation.

*SEC. 8. Establishment of Epidemiology and Surveillance Units.* – The DOH, in coordination with the LGUs, shall ensure that the Epidemiology and Surveillance Units (ESUs)

are established and functional in all levels of the DOH and its local counterparts, and in public and private health facilities and laboratories, as well as ports and airports in all provinces, cities and municipalities throughout the country. The ESU shall capture and verify all reported notifiable diseases and health events of public health concern; provide timely, accurate, and reliable epidemiologic information to appropriate agencies; conduct disease surveillance and response activities; coordinate needed response; and facilitate capacity building in the field of epidemiology, disease surveillance and response at the Epidemiology Bureau.

All ESUs shall have trained required human resource complement and provision of adequate resources, including equipment, logistics, communication, transportation, laboratory supplies and reagents, personal protective equipment and health insurance, to effectively perform their disease surveillance and response functions.

SEC. 9. *Prohibited Acts.* - The following shall be prohibited under this Act:

(a) Unauthorized disclosure of private and confidential information pertaining to a patient's medical condition or treatment;

(b) Tampering of records or intentionally providing misinformation;

(c) Non-operation of the disease surveillance and response systems;

(d) Non-cooperation of persons and entities that should report and/or respond to notifiable diseases or health events of public concern; and

(e) Non-cooperation of the person or entities identified as having the notifiable disease, or affected by the health event of public concern.

Disclosure of confidential information will not be considered violation of this Act under this section if the disclosure was made to comply with a legal order issued by a court of law with competent jurisdiction.

SEC. 10. *Penalties.* – Any person or entity found to have violated Section 9 of this Act shall be penalized with a fine of not less than Twenty thousand pesos (P20,000.00) but not more than Fifty thousand pesos (P50,000.00) or imprisonment of not less than one (1) month but not more than six (6) months, or both such fine and imprisonment, at the discretion of the proper court.

The Professional Regulation Commission shall have the authority to suspend or revoke the license to practice of any medical professional for any violation of this Act.

The Civil Service Commission shall have the authority to suspend or revoke the civil service eligibility of a public servant who is in violation of this Act.

If the offense is committed by a public or private health facility, institution, agency, corporation, school, or other juridical entity duly organized in accordance with law, the chief executive officer, president, general manager, or such other officer in charge shall be held liable. In addition, the business permit and license to operate of the concerned facility, institution, agency, corporation, school, or legal entity shall be cancelled.

SEC. 11. *Appropriations.* – The amount needed for the initial implementation of this Act shall be charged against the current year's appropriations of the DOH. Thereafter, such sums as may be necessary for the continued implementation of this Act shall be included in the annual General Appropriations Act.

SEC. 12. *Implementing Rules and Regulations.* – The DOH shall issue the implementing rules and regulations for this Act within one hundred twenty (120) days after the approval of this Act.

SEC. 13. *Separability Clause.* – If any part, section or provision of this Act is held invalid or unconstitutional, other provisions not affected thereby shall remain in full force and effect.

SEC. 14. *Repealing Clause.* – Act No. 3573, otherwise known as the "Law on Reporting of Communicable Diseases",

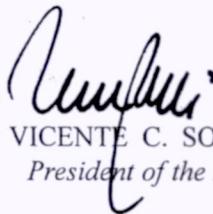
is hereby repealed. All laws, decrees, orders, issuances and rules and regulations or parts thereof inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

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

Approved,

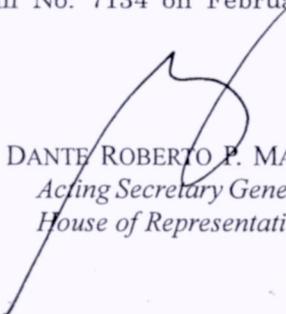


GLORIA MACAPAGAL-ARROYO  
*Speaker of the House  
of Representatives*



VICENTE C. SOTTO III  
*President of the Senate*

This Act was passed by the Senate of the Philippines as Senate Bill No. 2186 on February 4, 2019 and adopted by the House of Representatives as an amendment to House Bill No. 7134 on February 8, 2019.

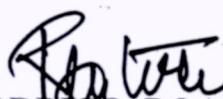


DANTE ROBERTO P. MALING  
*Acting Secretary General  
House of Representatives*



MYRA MARIE D. VILLARICA  
*Secretary of the Senate*

Approved: APR 26 2019




RODRIGO ROA DUTERTE  
*President of the Philippines*

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