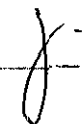


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SENATE

S. No. 2984

RECEIVED BY: 

Introduced by Senator Ralph G. Recto

AN ACT
GRANTING AUTOMATIC PHILHEALTH COVERAGE FOR ALL WOMEN ABOUT TO GIVE BIRTH AND THEIR NEWBORN CHILDREN, AMENDING FOR THE PURPOSE REPUBLIC ACT NO. 7875, AS AMENDED BY REPUBLIC ACT NO. 10606, OTHERWISE KNOWN AS THE "NATIONAL HEALTH INSURANCE ACT OF 2013", PROVIDING FUNDS THEREFOR AND FOR OTHER PURPOSES

Explanatory Note

In year 2000, the United Nations member states including the Philippines, came together and entered into a landmark commitment to "*spare no effort to free our fellow men, women and children from the abject and dehumanizing conditions of extreme poverty*".¹ This commitment was later on translated into a comprehensive framework identifying the so-called eight Millennium Development Goals (MDGs) to address the different facets of poverty within a 15-year time frame. Two of these MDGs deal with the improvement of maternal and child health.

For the Philippines, the MDG on the improvement of maternal health was meant to reduce the maternal mortality ratio by seventy-five percent from 209 deaths for every 100,000 live births in the 1990s to 52 deaths in 2015². On the other hand, the MDG on improving child health was aimed at reducing mortality among children under five years old from about 80 per 1,000 live births in the 1990s to 28 in 2015³.

Through the years, our country has performed relatively well in attaining the aforesaid MDGs. Various programs were implemented by the government to attain the targets set for each of the goals. For maternal health, maternal care was included in the benefit packages under the state's national health insurance program. Information campaign was likewise conducted aggressively to inform and influence pregnant women to seek the care and services of skilled professionals before, during and after childbirth.

In the same manner, immunization for infant and children was mandated by the government through the Department of Health. Moreover, health care for newborns was also incorporated in the national health insurance packages while at the same time intensified programs on micronutrient supplementation, breast feeding and birth spacing were used as strategies by the health department.

In spite of the gains, however, the Philippines' scorecard on MDGs pertaining to maternal and child health would indicate that we are yet to achieve our targets after 15 years. Maternal care remains to be a big challenge considering that the percentage of women availing

¹ See "The Millennium Development Goals Report 2015", United Nations, Accessed at [http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%20\(July%201\).pdf](http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%20(July%201).pdf).

² See "Philippines Scorecard on MDGs 4 and 5", Accessed at <http://www.philstar.com/science-and-technology/2014/05/29/1328329/philippine-scorecard-mdgs-4-and-5>.

³ http://www.undp.org/content/dam/undp/library/MDG/english/MDG%20Country%20Reports/Philippines/Philippines_MDGReport_2003.pdf.

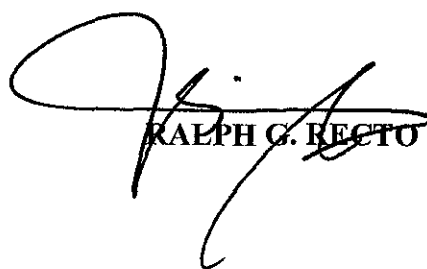
pre and post natal check-up are still low. A lot of expectant mothers still do not have access to these health care services either because they do not know where to seek such services or they do not have the means to pay for them.

This bill seeks to address the aforesaid problems by providing automatic health insurance coverage to all women about to give birth who are not yet enrolled under any existing categories of the Philippine Health Insurance Corporation (Philhealth). The premium of such membership shall be borne by the national government through the National Health Insurance Fund of Philhealth to be sourced from the sin tax collections in accordance with Republic Act No. 10351 otherwise known as "An Act Restructuring the Excise Tax on Alcohol and Tobacco Products".

Through this measure, all expectant mothers will be able to avail of pre and post natal care as well as childbirth benefits while at the same time extending to their children, adequate newborn health care services. Hence, contributing to the attainment of our MDGs on maternal and child health.

The bill will likewise be a step closer to attaining universal Philhealth coverage as it will automatically enroll all expectant mothers and their newborn children in the national health insurance program of the government.

It is in this regard that the passage of this bill is earnestly sought.

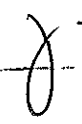


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AN ACT
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Be it enacted by the Senate and the House of Representatives of the Philippines in Congress assembled:

1 **SECTION 1. Short Title.** – This Act shall be known as the “*Philhealth Para sa Buntis at*
2 *Kanyang Sanggol Act of 2015*”.

3 **Sec. 2.** Section 12 of Republic Act No. 7875, as amended by Republic Act No. 10606 is
4 hereby further amended to read as follows:

5 “SEC. 12. *Entitlements to Benefits.* – A member whose premium contributions for
6 at least three (3) months have been paid within six (6) months prior to the first day of
7 availment, including those of the dependents, shall be entitled to the benefits of the
8 Program: *Provided,* That such member can show that contributions have been made with
9 sufficient regularity: *Provided, further,* That the member is not currently subject to legal
10 penalties as provided for in Section 44 of this Act.

11 “The following need not pay the monthly contributions to be entitled to the
12 Program’s benefits:

13 “a. Retirees and pensioners of the SSS and GSIS prior to the effectivity of
14 this Act; [and]

15 “b. Lifetime members[.]; AND

16 **“C. ALL FILIPINO WOMEN ABOUT TO GIVE BIRTH AND**
17 **THEIR NEWBORN CHILDREN WHO ARE NOT CURRENTLY**
18 **COVERED UNDER ANY EXISTING CATEGORY OF**
19 **PHILHEALTH.**

20 **Sec. 3.** Section 29-B of Republic Act No. 7875, as amended, is hereby further amended to
21 read as follows:

1 “SEC. 29-B. *Coverage of Women About to Give Birth.* – The annual required
2 premium for the coverage of unenrolled women who are about to give birth **AND THEIR**
3 **NEWBORN CHILDREN** shall be fully borne by the national government **TO BE SOURCED**
4 **FROM THE NATIONAL HEALTH INSURANCE FUND OF PHILHEALTH**
5 **EARMARKED FROM THE PROCEEDS OF SIN TAX COLLECTIONS AS PROVIDED**
6 **FOR IN REPUBLIC ACT NO. 10351.** [and/or LGUs and/or legislative sponsor which shall be
7 determined through the means testing protocol recognized by the DSWD].

8 **Sec. 4. *Repealing Clause.*** – All laws, decrees, executive orders, rules and regulations, or
9 parts thereof which are inconsistent with this Act are hereby repealed, amended or modified
10 accordingly.

11 **Sec. 5. *Effectivity.*** – This Act shall take effect fifteen (15) days after its publication in the
12 Official Gazette or in at least two (2) newspapers of general circulation.

Approved,