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

RECEIVED BY: 

SENATE
S. No. 555

Introduced by Senator Antonio "Sonny" F. Trillanes IV

AN ACT
TO PROVIDE FOR A FRAMEWORK IN THE CARE AND TREATMENT OF
DIABETES, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER
PURPOSES

EXPLANATORY NOTE

Article II Section 15 of the 1987 Constitution provides that the State shall protect and promote the right to health of the people and instill health consciousness among them. Despite such policy, efforts on the part of the government remain inadequate especially in light of the soaring number of Filipinos afflicted with disabling and costly diseases such as diabetes. Dubbed as a silent killer, diabetes ranks 8th among the leading causes of mortality in the Philippines. Over time, diabetes can lead to heart and blood vessel disease, blindness, kidney failure, and foot ulcers among other conditions. It is expected that over seven (7) million Filipinos will have diabetes by 2030. Furthermore, diabetes awareness is low among the public.

It is in this light that this bill seeks to promote a different approach in responding to this illness. This measure requires the Department of Health (DOH) to establish an advisory group to examine and recommend best practices of diabetes and chronic illness employee wellness incentivization and disease management programs; to prepare, biennially, a diabetes report card for the nation that: (1) is adaptable by state and local agencies in order to rate or report local diabetes care, costs, and prevalence; and (2) includes trend analysis in order to track progress in meeting established national goals and objectives and to inform policy and program development; to conduct, support, and promote the collection, analysis, and publication of data on the prevalence and incidence of type 1 and 2 diabetes and of pre-diabetes; and to improve diabetes mortality data collection.

It is hoped that the passage of this measure shall put a halt to this fast-growing pandemic and shall bring about a healthier diabetes-free population.

In view of the foregoing, approval of this measure is earnestly sought.


ANTONIO "SONNY" F. TRILLANES IV
Senator



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PURPOSES**

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

1 **SECTION 1. Short Title.** - This Act may be known as the "Diabetes Care Act of
2 2016".
3

4 **SEC. 2. Definition of Terms.** - As used in this Act, the following terms shall mean as
5 follows:

6 a) Employee wellness and disease management programs shall include but not be
7 limited to personal coaching intervention to target lifestyle topics such as back care,
8 blood pressure management, blood sugar control, exercise, walking breaks, nutrition
9 and stress management, healthy weight management program, smoking cessation
10 program, and reduction of behavior-related causes of disease.
11

12 b) Chronic illness is one that lasts for a very long time and usually cannot be cured
13 completely. It shall include but not be limited to diabetes, heart disease, arthritis,
14 kidney disease, lupus, multiple sclerosis, and HIV.
15

16 **SEC. 3. Advisory Group Regarding Diabetes and Chronic Employee Wellness**
17 **Incentivization and Disease Management Best Practices.** -
18

19 a) Establishment - The Secretary of the Department of Health (hereinafter referred to as
20 the Secretary) shall establish an advisory group consisting of representatives of the
21 public and private sector. The advisory group shall include representatives from
22 public and private sector entities with experience in administering and operating
23 employee wellness and disease management programs.
24

25 b) Duties - The advisory group established under subsection (a) shall examine and make
26 recommendations of best practices of chronic illness employee wellness
27 incentivization and disease management programs in order to:
28

29 i. provide public and private sector entities with improved information in
30 assessing the role of employee wellness incentivization and disease
31 management programs in saving money and improving quality of life for
32 patients with chronic illnesses; and

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ii. encourage the adoption of effective chronic illness, employee wellness and disease management programs.

c) Report - Not later than one (1) year after the date of the enactment of this Act, the advisory group established shall submit to the Speaker, Majority and Minority Leader of the House of Representatives, the President, and Majority Leader and Minority Leader of the Senate, the results of the examination under subsection (b)(i).

SEC. 4. National Diabetes Report Card. –

a) Establishment - The Secretary of the Department of Health (referred to in this section as DOH) shall prepare on a biennial basis a national diabetes report card (hereinafter referred to as 'Report Card') for the Nation.

b) Contents - Each Report Card shall include statistically valid aggregate health outcomes related to individuals diagnosed with diabetes and pre-diabetes including:

- i. preventative care practices and quality of care;
- ii. risk factors; and
- iii. outcomes.

c) Updated Reports - Each Report Card that is prepared after the initial Report Card shall include trend analysis for the nation for the purpose of:

- i. tracking progress in meeting established national goals and objectives for improving diabetes care, costs, and prevalence; and
- ii. informing policy and program development.

d) Availability - The Secretary shall make each Report Card publicly available including posting the Report Card on the Internet.

SEC. 5. Improvement of Vital Statistics Collection.-

a) The Secretary of the Department of Health shall:

- i. promote the education and training of physicians on the importance of birth and death certificate data and how to properly complete these documents, including the collection of such data for diabetes and other chronic diseases;
- ii. encourage local government units adoption of the latest standard revisions of birth and death certificates; and
- iii. work with LGDs to re-engineer their vital statistics systems in order to provide cost-effective, timely, and accurate vital systems data.

- 1 b) Death Certificate Additional Language - In carrying out this Section, the Secretary
2 may promote the addition of language to death certificates to improve collection of
3 diabetes mortality data, including the addition of a question for the individual
4 certifying to the cause of death regarding whether the deceased had diabetes.
5

6 **SEC. 6. Study of Appropriate Level of Diabetes Medical Education. –**
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- 8 a. *In General* - The Secretary of the Department of Health (hereinafter referred to as
9 'Secretary') shall, in collaboration with the University of the Philippines College
10 of the Medicine, and appropriate associations and councils, conduct a study of the
11 impact of diabetes on the practice of medicine in the Philippines and the
12 appropriateness of the level of diabetes medical education should be required prior
13 to licensure, board 25 certification, and board recertification;
14
15 b. *Report* - Not later than two (2) years after the date of the enactment of this Act,
16 the Secretary shall submit a report on the study under subsection (a) to the
17 appropriate committees of the House of Representatives and the Senate of the
18 Philippines.
19

20 **SEC. 7. Appropriation.** - The amount necessary to carry out the provisions of this Act
21 shall be taken out from the appropriations of the DOH. Thereafter, such amount necessary for
22 the implementation of this Act shall be included in the annual General Appropriations Act.
23

24 **SEC. 8. Separability Clause.** - If any provision or part hereof is held invalid or
25 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain
26 valid and subsisting.
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28 **SEC. 9. Repealing Clause.** - Any law, presidential decree or issuance, executive
29 order, letter of instruction, administrative order, rule or regulation contrary to, or inconsistent
30 with, the provisions of this Act, is hereby repealed, modified, or amended accordingly.
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32 **SEC. 10. Effectivity Clause.** - This Act shall take effect fifteen (15) days after its
33 complete publication in the Official Gazette or in at least two (2) newspapers of general
34 circulation.

Approved,