


**SEVENTEENTH CONGRESS OF THE }
REPUBLIC OF THE PHILIPPINES }
First Regular Session }**



Senate
Office of the Secretary

'16 NOV -8 P3:10

S E N A T E
S.B. No. 1232

RECEIVED BY: 

INTRODUCED BY **SENATOR VICENTE C. SOTTO III**

AN ACT
PROVIDING MEDICAL SCHOLARSHIPS IN STATE UNIVERSITIES AND
COLLEGES TO QUALIFIED STUDENTS AND FOR OTHER PURPOSES

EXPLANATORY NOTE

Mahatma Gandhi once said *"It is health which is real wealth, and not pieces of gold and silver."* It means that there is nothing in life that is more valuable than our health as it is a state of a person's complete physical, mental and social well-being. It is that important that it has been a declared policy of the State, and enshrined in the highest law of the land, to protect and promote the right to health of the people and instill health consciousness among them.

However, even though the government is allotting so much of our limited resources for the country's healthcare – with an increasing budget and spending trend every year – it seems that there are still a lot of areas for improvement. One of the areas that have to be addressed is the worsening shortage of doctors. In a statement given by the Philippine Medical Association (PMA) in 2014, it declared that the shortage is expected to reach 930,000 when the country's population reaches 100 million – considering that the "internationally-suggested" ratio is one doctor per 100 population¹. As of January 01, 2016, the population of Philippines was estimated to be 101,498,763 people; thus, the predicted shortage by the PMA in 2014 is not

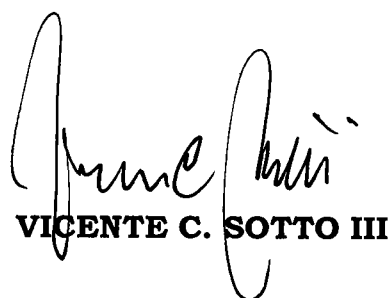
¹ <http://www.philstar.com/headlines/2014/01/31/1285056/pma-warns-worsening-shortage-doctors>

anymore a forecast but a reality – reality that, has to be faced and solved head-on.

In addition to the scarcity in the number of doctors, another issue that has to be addressed in relation thereto is the severe “maldistribution” of physicians in the country caused by most doctors preferring to practice in the urban areas than in the rural.²

This proposed measure seeks to address both issues of scarcity and maldistribution of physicians because the granting of scholarships to deserving medical students would aid in the increase of the number of physicians in the country. At the same time, the condition stipulated in this bill that immediately after graduating from the program, the scholar must work in the country for five (5) years, two (2) years of which must be rendered in a government hospital or office where he/she resides would hopefully put a sense of balance in the distribution of doctors particularly in the government sector, which take care of nearly 70%³ of the health care needs of the population.

If the afore-cited issues would be solved, it will translate into better services and eventually a better nation, thus the passage of this bill is earnestly recommended.



VICENTE C. SOTTO III


² The Philippine Health Agenda for 2016 to 2022, Philippine Journal of Internal Medicine, Esperanza I. Cabral, M.D

³ *Ibid.*,



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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 “Medical
2 Scholarship Act of 2016.”

3 SECTION 2. **Declaration of Policy.** – It is the policy of the State to
4 protect and promote the right to health of the people and instill health
5 consciousness among them. In order to carry out such policy, the number of
6 health professionals who will provide for the needed health services must
7 meet the World Health Organization standards. Towards this end, the State
8 shall establish a scholarship program that will encourage aspiring medical
9 students to pursue education and training in the field of medicine and who,
10 thereafter, shall render their services in government hospitals or offices.

11 SECTION 3. **Qualifications of Candidates.** – A scholarship in a
12 state-run university or college shall be granted to any aspiring medical
13 student, subject to the following qualifications:

- 14 a) Must belong to the top twenty per centum (20%) of the graduating
15 batch;
16 b) The personal and/or family's income must not be sufficient to
17 support the aspiring medical student's education;
18 c) Must passed the National Medical Admission Test (NMAT);

- 1 d) Must passed the medical school's entrance examination
2 e) Such other qualifications as the state-run university or college may
3 deem necessary, provided that it shall not defeat the purpose of
4 this Act

5 **SECTION 4. *Extent of Scholarship Grant.*** – The scholarship grant
6 shall cover expenses for, among others, tuition, laboratory and
7 miscellaneous fees; required textbooks, school supplies and equipment;
8 clothing and uniform allowances; traveling expenses; board and lodging
9 expenses; and subsistence and living allowances.

10 **SECTION 5. *Conditions of the Scholarship Grant.*** – The admitted
11 scholars shall continue to enjoy the benefits of the scholarship grant until
12 the completion of the program, subject to the following conditions:

- 13 a) The scholar should finish the entire program without any delay;
14 b) The scholar may be allowed to file a leave of absence for one (1)
15 school year in the institution where he/she is enrolled only for
16 justifiable reasons;
17 c) No other scholarship grant shall be accepted by the scholar while
18 enjoying the benefits of this Act;
19 d) Immediately after graduating from the program, the scholar must
20 work in the country for five (5) years, two (2) years of which must
21 be rendered in a government hospital or office where he/she
22 resides.

23 **SECTION 6. *Failure to Comply with the Conditions.*** – Failure of the
24 scholar to comply with Section 5 pars. (a), (b) and (c) shall automatically
25 disqualify him/her to enjoy the benefits of the scholarship program. In
26 addition thereto, the non-compliant scholar shall pay for all the expenses
27 incurred during his/her participation in the scholarship program if any
28 condition is breached.

29 **SECTION 7. *Number of Scholars to be Admitted.*** – Every five (5)
30 years upon the effectivity of this Act, the Secretary of the Department of
31 Health (DOH), the Chairman of the Commission on Higher Education
32 (CHED), and the President and a representative from the respective Boards
33 of Regents of the state universities or colleges concerned shall determine the

1 number of scholars that should be admitted every school year. The needed
2 number of physicians of the town or province where the state university or
3 college is situated shall be taken into consideration in determining the
4 number of scholars, provided that the admitted scholars in any state
5 university or college for any given school year shall not be less than five (5).

6 SECTION 8. **Appropriations.** – Fifty per centum (50%) of the amount
7 necessary to effectively carry out the initial implementation of this Act shall
8 be sourced from the DOH, while the remaining fifty per centum (50%) shall
9 be coming from the funds of the covered state-run university or college.
10 Thereafter, such amount necessary for the continued implementation of this
11 Act shall be included in the General Appropriations Act.

12 SECTION 9. **Implementing Rules and Regulations.** – Within 60
13 days after the effectivity of this Act, the Secretary of DOH, the Chairman of
14 CHED, and the President and a representative from the respective Boards of
15 Regents of the state universities or colleges concerned shall promulgate
16 rules and regulations necessary for the effective implementation of this Act.

17 SECTION 10. **Separability Clause.** – If any provision of this Act is
18 held invalid or unconstitutional, the same shall not affect the validity and
19 effectivity of the other provisions hereof.

20 SECTION 11. **Repealing Clause.** – All laws, decrees, orders, and
21 issuances, or portions thereof, which are inconsistent with the provisions of
22 this Act, are hereby repealed, amended or modified accordingly.

23 SECTION 12. **Effectivity Clause.** – This Act shall take effect fifteen
24 (15) days after its publication in the *Official Gazette* or in two (2) newspapers
25 of general circulation.

Approved,