EIGHTEENTH CONGRESS OF THE REPUBLIC OF THE PHILIPPINES

First Regular Session

S E N A T E S. No. 100)



Introduced by Senator Aquilino "Koko" Pimentel III

AN ACT CONVERTING THE NATIONAL CENTER FOR GERIATRIC HEALTH INTO A CORPORATE BODY TO BE KNOWN AS THE "NATIONAL CENTER FOR GERIATRIC HEALTH AND RESEARCH INSTITUTE," AND APPROPRIATING FUNDS THEREFOR

EXPLANATORY NOTE

This bill seeks to convert the National Center for Geriatric Health into a corporate body to be known as the "National Center for Geriatric Health and Research Institute", which will provide a full range of health care services, including primary care, wellness services, and behavioral health care to the elderly population of the country.

Article XIII, Section 11 of the Constitution provides, in part, that "The State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all the people at affordable cost. There shall be priority for the needs of the underprivileged sick, elderly, disabled, women, and children. The State shall endeavor to provide free medical care to paupers."

Consistent with this constitutional provision, this bill aims to establish the National Geriatric Health and Research Institute, a specialized hospital which will cater to the elderly of the country. It will be the first of its kind in the Philippines. Its establishment is long overdue considering the continuing increase in our country's

population of people aged sixty and above. In 2000, there were 4.6 million senior citizens, representing about 6% of the total population. In one decade, this grew to 6.5 million or about 6.9% of the total population. In 2018, senior citizen population increased further to 8.013 million or 8.2% of the total population.

The National Geriatric Health and Research Institute will ensure the availability and accessibility of medical services for the elderly. Also, the facility will enable our elderly population who are most vulnerable to diseases to avail of much needed specialized health care. As a tribute to our country's elderly citizens who have served and contributed their talent and time to the society in the prime of their life, it is only fitting to establish a health and research facility, which will primarily provide geriatric health services.

In view of foregoing considerations, approval of this bill is earnestly sought.

AQUILINO "KOKO" PIMENTEL III

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AN ACT

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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 "National Center for Geriatric Health and Research Institute Act."
- SEC. 2. Declaration of Policy. It is hereby declared the policy of the State to protect and promote the right to health of older persons by ensuring that health services are available and accessible to them through the establishment of a specialized hospital that will cater to their medical needs.
 - **SEC. 3.** *Definition of Terms.* As used in this Act:
- (a) Geriatric health services refer to the medical services or intervention provided by a multi-disciplinary team usually headed by a Geriatrician;
- 12 (b) *Geriatrician* refers to a medical doctor who has passed the necessary training and examination, and specializes in the field of Geriatrics;

- 1 (c) Geriatrics refers to the sub-specialty of Internal Medicine
 2 that aims to promote health, and to prevent and treat
 3 disabilities of older adults;
- (d) Gerontology refers to the study of the biological, psychological, spiritual, social, economic, and demographics aspects of the aging process;

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- (e) Integrated delivery of geriatric health services refers to hospital and community-based medical and psycho-social services provided to senior citizens by a multi-disciplinary team;
 - Multi-disciplinary team refers to a team composed of health (f) professionals headed by a geriatrician and includes surgeons, specialists, nurses, clinical organ-system dentists. social therapists, nutritionists, rehabilitation patients caregivers, family members. and workers. themselves: and
 - (g) Senior citizens or older persons refer to Filipino citizens who are at least sixty (60) years old.
- SEC. 4. Conversion of the National Center for Geriatric Health (NCGH). NCGH, located in San Miguel, Manila, is hereby converted into a corporate body to be known as the "National Center for Geriatric Health and Research Institute" (NCGHRI). The NCGHRI shall be attached to the Department of Health (DOH) for the primary benefit of senior citizens or the elderly. The bed capacity of the hospital shall be increased from fifty (50) to one hundred (100).
- **SEC. 5.** *Purposes and Objectives.* The NCGHRI shall have the following purposes and objectives:
 - (a) Equip, maintain, administer, and operate an integrated medical institution, which shall specialize in geriatric health services;
 - (b) Provide and maintain affordable, quality, and timely hospital care through an efficient health service delivery system, which prioritizes the needs of the elderly and the resources which will provide free medical care to indigent citizens;

(c) Finance, sponsor, hold, or participate in congresses, conventions, conferences, seminars, workshops, and training programs on geriatric health services or related fields in the Philippines and abroad;

- (d) Encourage and assist in the education and training of physicians, nurses, health officers, social workers, and other medical and technical personnel in the practical and scientific implementation of health services to the older persons;
- (e) Coordinate the various efforts and activities of other government agencies and local government units for the purpose of achieving a more effective approach to the delivery of geriatric health services; and
 - (f) Extend medical services to elderly persons pursuant to the goals, objectives, and rules of the National Health Insurance Program (NHIP).
- SEC. 6. Scope of Services. Consistent with its purposes and objectives, the NCGHRI shall provide the following services:
 - (a) Hospital-based services to ensure the availability of medical facilities and equipment necessary to provide long term and palliative services with its wards divided into the following: dementia, long term care, palliative care, respite care, and other units as may be deemed necessary;
 - (b) Community-based services to develop and implement community-based programs in partnership with local government units, conduct research and external resource outsourcing to implement community-based integrated geriatric health services, and conduct training necessary for the social functioning of senior citizens and their families, utilizing the multi-disciplinary team approaches;
 - (c) Education programs to pursue excellence and the highest level of practice in the specialized field of geriatrics and other related fields, and to conduct post-graduate training and short-term courses for medical doctors and allied medical professions;

- (d) Program development and research to develop cutting edge researches and programs to combat diseases of old age, promote active health care, and to provide necessary consultancy service, technical assistance, and standard setting for geriatric wards in every tertiary level hospital, nursing homes, and residential center catering to the health and functioning needs of senior citizens, in coordination with the Philippine Council on Health Research and Development (PCHRD) and the Institute of Aging of the National Institute of Health (IA-NIH); and
- 11 (e) Assistance in the installation of a "senior citizens ward" in
 12 every government hospital for the exclusive use of senior
 13 citizens who are in need of hospital confinement by reason of
 14 their health conditions, pursuant to Section 5 (c) of Republic
 15 Act No. 9994 otherwise known as the "Expanded Senior
 16 Citizens Act of 2010."
- SEC. 7. Board of Trustees. The NCGHRI shall be administered by a Board of Trustees, hereinafter referred to as the Board, to be composed of the following:
- 20 (a) Secretary of Health, as Chairperson;

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- 21 (b) Secretary of Social Welfare and Development, as Vice-22 Chairperson;
- 23 (c) Director of the Institute of Aging of the National Institute of Health;
- 25 (d) Chief Executive Officer/President of the Philippine Health 26 Insurance Corporation;
- 28 (e) President of the Federation of Senior Citizens Association of the Philippines;
 - (f) President of the Society of Geriatrics and Gerontology;
- One representative from the Philippine Medical Association with expertise in the field of geriatrics and gerontology;
- 33 (h) One representative from non-governmental organizations 34 which provide services for senior citizens, duly registered

with the Securities and Exchange Commission (SEC) or any appropriate regulatory body, and with programs accredited by the Department of Social Welfare and Development (DSWD), as member;

- (i) Two representatives from the private sector; and
- (i) Chief Executive Officer of the Hospital.

The members of the Board enumerated in subparagraphs (a), (b), (c), and (d) shall serve as ex-officio members. The ex-officio members of the Board may designate their respective alternates who shall be the officials next-in-rank to them and whose acts shall be considered the acts of their principals.

The members of the Board under subparagraphs (e), (f), (h), (i), and (j) shall be appointed by the President of the Philippines, upon the recommendation of the Secretary of Health for the first initial appointees, and then by the Board for subsequent appointees.

The appointive members of the Board shall serve for one (1) year, unless sooner removed for a cause.

No person shall be appointed member of the Board unless a citizen and a resident of the Philippines, of good moral character, and has attained proficiency, expertise, and recognized competence in one or more of the following fields: hospital finance and administration, medical care, public health care, government rules and regulations, law, business management, or marketing. The members of the Board should have at least five (5) year experience in their fields of expertise.

To maintain the quality of management, the DOH, in coordination with the DSWD, subject to the approval of the President, shall prescribe, pass upon, and review the qualifications and disqualifications of individuals appointed as members of the Board and shall disqualify those found unfit.

The Board shall be governed by a set of by-laws, which shall include the members' responsibilities, accountabilities, and cause of termination.

The members of the Board shall be composed of a maximum of eleven (11) members.

SEC. 8. *Powers and Functions.* – The Board shall have the following powers and functions in addition to its general powers of administration:

- (a) Formulate and adopt the by-laws, rules and regulations, policies, guidelines, and procedures consistent with law and the provisions of this Act to govern the administration and operations of the NCGHRI;
- (b) Formulate and develop programs for the enhancement of healthcare services for older persons, including the training of NCGHRI personnel and resident doctors;
 - (c) Enter into such agreements and arrangements with other medical institutions, domestic or foreign, as may be necessary, in attaining the purposes and objectives of the NCGHRI;
 - (d) Receive in trust legacies, gifts, and donations, or real and personal properties of all kinds, and to administer the same for the benefit of the NCGHRI, in accordance with the directions and instructions of the donor, and in default thereof, in such manner as the Board of Trustees may, in its discretion, determine;
 - (e) Receive and appropriate to the ends specified by law such sums as may be provided by law for the support of the NCGHRI; and
 - (f) Perform all such other acts as maybe necessary for or incidental to the accomplishment of the objectives of the NCGHRI.
 - SEC. 9. Organizational Structure and Staffing Pattern. The Board shall determine the organizational structure and staffing pattern of the NCGHRI subject to the evaluation by the Civil Service Commission and of the Organization Position Classification and Compensation Bureau of the Department of Budget and Management (DBM) and the DOH. The Board may reorganize said structure, modify the staffing pattern, and create or abolish divisions, sections, or units in the NCGHRI.

SEC. 10. Corporate Officers. — The Board shall appoint a Secretary and such other officers as may be deemed necessary to carry out its objectives. Selection of the corporate officers must be based on the fundamental and specific qualifications prescribed by existing laws.

- SEC. 11. Chief Executive Officer. The NCGHRI shall be headed by a Chief Executive Officer (CEO), who shall be appointed by the President of the Philippines for a term of one (1) year and renewable upon the recommendation of the Secretary of Health.
- The CEO shall exercise the following powers and functions:
 - (a) Execute the policies, guidelines, and programs approved by the Board, and be responsible for the efficient discharge of management and operational functions;
 - (b) Submit for the consideration and approval of the Board proposed measures, policies, guidelines, and programs as may be deemed necessary or proper for the effective implementation of the purposes and objectives of the Act;
 - (c) Direct and supervise the management, operation, and administration of the NCGHRI, and may delegate this power and any or some of his administrative responsibilities and duties to the other officers of the NCGHRI;
 - (d) Execute, on behalf of the Board, all contracts and agreements which the latter may enter into, and to execute, accomplish, and deliver any and all documents relative to such contracts and agreements;
- (e) Represent the NCGHRI in all dealings with other persons or entities, whether domestic or foreign, and whether government and private;
- 28 (f) Determine the staffing pattern and the number of personnel of the NCGHRI and define their duties and responsibilities;
- 30 (g) Recommend to the Board the appointment, promotion, 31 transfer, dismissal, and suspension of officers and employees 32 of the NCGHRI; and

- Exercise such other powers and perform such other duties as (h) may be vested or reposed by the Board.
- SEC. 12. Board of Trustees' Meetings and Quorum. The Board 3 shall hold meetings at least once a month. Special meetings may be 4 convened at the call of the Chairperson or by the majority of the 5 members of the Board. Six (6) members of the Board shall constitute a 6 quorum for the transaction of official business. 7

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- SEC. 13. Property of NCGHRI. The property of NCGHRI shall consist of real, personal, and other types of property previously owned by, or reserved for, the NCGHRI, or property which may hereafter be given, donated, acquired, transferred, or conveyed to it by the Philippine government, its branches and instrumentalities, or any foreign government, as well as by trust, foundation, corporations or persons, 13 alien or domestic, in order to carry out its purposes and objectives as set 14 forth herein. 15
 - SEC. 14. Appointment by the Board. The Board shall have the authority to appoint, promote, transfer, remove, suspend, or otherwise discipline the officers or employees of the NCGHRI upon the recommendation of the Chief Operating Officer (COO), subject to Civil Service laws, rules, and regulations.
 - SEC. 15. Executive Committee. The Board may, by a resolution approved by the majority of all its members, create an Executive Committee of not more than five (5) members whom it shall appoint. At least three (3) members of the Executive Committee shall be members of the Board. The Executive Committee shall exercise all such powers as may be delegated to it by the Board. The Executive Committee shall keep regular minutes of its proceedings and report the same to the Board whenever required. The Board shall have the power to change the members of the Executive Committee at any time, to fill vacancies therein and to discharge or dissolve such Committee either with or without cause.
 - **SEC. 16.** Compensation of Members of the Board of Trustees. The members of the Board, by resolution of the majority of the members in good standing of the NCGHRI, may claim expenses for their attendance in regular or special meetings: Provided, however, that actual and necessary expenses of the members of the Board, while serving the interests of NCGHRI and in pursuit of its defined objectives and purposes, may be allowed by special board resolution.

The appointive non-government members of the Board shall be entitled to honorarium for each meeting actually attended at rates determined under existing laws, rules, and regulations.

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- **SEC. 17.** *Civil Service Law Coverage for Employees.* The hiring, appointment, promotion, discipline, and other terms and conditions of the service of all employees of the NCGHRI shall be consistent with the provisions of the Civil Service laws, rules, and regulations, except as otherwise provided for in this Act.
- SEC. 18. Security of Tenure of Civil Service Officers and Employees of the Corporation. The provision of Republic Act No. 6656 entitled, "An Act to Protect the Security of Tenure of Civil Service Officers and Employees in the Implementation of Government Reorganization" and other existing laws shall apply to all officers and employees of NCGHRI except to the members of the Board.
 - **SEC. 19.** Salaries, Benefits, and Other Compensation. The salaries, benefits, and other compensation of the officers and employees of the NCGHRI shall be in accordance with the existing compensation and the standard position classification for employees of the government. *Provided, That* there shall be no diminution in the salaries and benefits of the employees and officers.
- SEC. 20. Early Retirement and Separation Benefits. Officials and employees of the NCGH voluntarily opting for separation or retirement shall be entitled to the benefits provided for under existing laws.
- SEC. 21. Assistance from Other Government Offices. The NCGHRI may call upon any department, bureau, office, agency, or instrumentality of the government, for such assistance, as it may need in the pursuit of its purposes and objectives.
- All individuals, entities, and institutions are hereby enjoined to render full assistance and cooperation to the NCGHRI in the accomplishment of its objectives and activities.
- SEC. 22. Program for Indigents. The Board shall ensure that the NCGHRI shall adopt and enforce a program for indigents. The number of beds allocated for the indigent patients shall not be less than forty percent (40%) of the total number of hospital beds.

SEC. 23. *Tax Exemptions.* – Any donation, bequest, and grant shall be exempt from donor's tax and the same shall be considered as allowable deduction from the gross income of the donor in accordance with the provisions of the *National Internal Revenue Code of 1997*, as amended.

The NCGHRI is hereby declared exempt from all income and all other internal revenue taxes, tariff, and customs duties, and all other kinds of taxes, fees, charges, and amendments thereto, levied by the government and its political subdivisions, agencies, and instrumentalities.

- SEC. 24. Hospital Trust Fund. All funds not coming from the General Appropriations Act (GAA), such as contributions from taxes and assessments from authorized sweepstakes lotteries, donations, legacies, and endowment from various sources, domestic and foreign entities and individuals, and income of pay wards and other hospital services shall be used and disbursed only upon the authorization of the Board for the purposes of enhancing the health services for the elderly and the improvement of hospital facilities, which include the purchase of medicines, supplies, hospital beds, equipment, and career advancement. Provided, That disbursements shall be in accordance with existing accounting and auditing rules and regulations: Provide, further, That the funds shall be exclusive for hospital utilization and shall not be used to cover personnel services expenditures.
- SEC. 25. Transfer of Personnel, Assets, Records, and Equipment.—
 All personnel, assets, records, equipment, and liabilities of the NCGH
 are hereby transferred to and shall henceforth appertain to the NCGHRI
 as a Corporation.
- SEC. 26. Annual Report. The NCGHRI, through its Board, shall submit an annual report to the President of the Philippines, the Senate Committee on Health and Demography, and the House Committee on Health, on its activities, accomplishments, and recommendations to better improve the delivery of geriatric health services.
 - **SEC. 27.** *Auditor.* The Commission on Audit shall appoint a representative who shall be the auditor of the NCGHRI and such personnel as may be necessary.

- SEC. 28. Effect of Dissolution. In the event that NCGHRI is dissolved for any reason, all its remaining properties at the time of such dissolution shall be placed under the custody of DOH.
- SEC. 29. Appropriations. The amount necessary for the implementation of this Act shall be charged to the DOH appropriations under the current GAA. Thereafter, such sum as may be necessary for the continued operation of the NCGHRI shall be included in the annual GAA.
- SEC. 30. Implementing Rules and Regulations. Within sixty (60) days from the effectivity of this Act, the DOH, in coordination with the DSWD, and the DBM, shall promulgate such rules and regulations necessary for the effective implementation of this Act.
- SEC. 31. Separability Clause. If any provision of this Act is declared invalid or unconstitutional, the other provisions not affected by such declaration shall remain in full force and effect.
 - **SEC. 32.** Repealing Clause. All laws, executive and administrative orders, rules and regulations inconsistent with the foregoing provisions are hereby repealed or modified accordingly.
 - **SEC. 33.** *Effectivity.* This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,

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