



## HOUSE OF REPRESENTATIVES

H. No. 5042

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BY REPRESENTATIVES TAN (A.), MAGSAYSAY, CO, BATOCABE, DEL ROSARIO (A.G.), MERCADO-REVILLA, PAGDILAO, SUANSING, AGLIPAY, UNGAB, CUA, ALMARIO, ANGPING, BATAOIL, LOBREGAT, PIAMONTE, ABUEG, ACHARON, ACOSTA-ALBA, ADIONG, ALMONTE, ARENAS, BRAVO (A.), CAYETANO, COLMENARES, CRUZ-GONZALES, DE VENECIA, ESCUDERO, FORTUN, GARCIA (G.), GO (A.C.), GUANLAO, GULLAS, HICAP, ILAGAN, MENDOZA (M.), MACROHON-NUÑO, OLIVAREZ, ORTEGA (V.), PADILLA, PAQUIZ, PANCHO, PICHAY, RAMOS, ROMULO, TING, TINIO, UY (J.), YU AND PRIMICIAS-AGABAS, PER COMMITTEE REPORT NO. 436

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AN ACT ESTABLISHING A COMPREHENSIVE PHILIPPINE PLAN OF ACTION TO ELIMINATE TUBERCULOSIS AS A PUBLIC HEALTH PROBLEM AND APPROPRIATING FUNDS THEREFOR

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

1           SECTION 1. *Title.* – This Act shall be known as the “Comprehensive  
2 Tuberculosis Elimination Plan Act”.

3           SEC. 2. *Declaration of Policy.* – The State is mandated to adopt an  
4 integrated and comprehensive approach to health development. Towards this  
5 end, the State shall support and expand efforts to eliminate tuberculosis as a  
6 public health problem by increasing investments for its prevention, treatment  
7 and control, and adopting a multisectoral approach in responding to the  
8 disease.

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

2           (a) *Comprehensive Philippine Plan of Action to Eliminate*  
3 *Tuberculosis* refers to the program of the national government for the  
4 elimination of tuberculosis in the country; and

5           (b) *Tuberculosis* or *TB* refers to an infectious but curable disease  
6 caused by bacteria called *Mycobacterium tuberculosis*. It is transmitted from a  
7 TB patient to another through coughing, sneezing and spitting and while the  
8 bacterium usually affects the lungs, it may also affect the bone and other  
9 organs like the kidney and the liver.

10          SEC. 4. *Comprehensive Philippine Plan of Action to Eliminate*  
11 *Tuberculosis.* – The Secretary of the Department of Health (DOH) shall  
12 establish a Comprehensive Philippine Plan of Action to Eliminate Tuberculosis  
13 in consultation with appropriate public and private entities. The Philippine  
14 Plan of Action shall consist of the following:

15           (a) The country's targets and strategies in addressing the disease;

16           (b) The prevention, diagnosis, treatment, care and support, and other  
17 components of the country's response;

18           (c) The development and application of appropriate technologies to  
19 diagnose and treat the disease;

20           (d) The strengthening of linkages with local and international  
21 organizations for possible partnership in education, advocacy, research and  
22 funding assistance;

23           (e) The establishment of a review and monitoring system to gather data  
24 and monitor the progress made in the elimination of tuberculosis; and

25           (f) The immediate mobilization of anti-TB services during and after  
26 natural and man-made disasters through collaborative efforts of national and  
27 local governments and other entities.

1           SEC. 5. *Strengthening of the National and Regional Coordinating*  
2 *Committees.* – The National Coordinating Committee (NCC) and the  
3 Regional Coordinating Committee (RCC) of the DOH shall serve as the  
4 National TB Control Program’s (NTP’s) arm in strengthening and supporting  
5 nationwide capacity for program operations and bridging collaborative efforts  
6 between the public and private sector.

7           The Secretary of Health shall continue to improve the capability of the  
8 existing NCC and RCC in ensuring efficiency in the implementation,  
9 monitoring and evaluation of the Philippine Plan of Action and in the  
10 coordination of efforts of various sectors.

11           SEC. 6. *Research, Demonstration Projects, Education and Training.*

12 – The Secretary of Health shall, directly or through grants to public or  
13 nonprofit private entities, perform the following activities:

14           (a) Conduct basic and clinical research based on the health agenda to  
15 be developed by partners in the academe, health professional groups and other  
16 local health partners with possible support from foreign organizations;

17           (b) Develop demonstration projects to generate evidence for responsive  
18 policies and to develop regional capabilities for the prevention, detection,  
19 control, and elimination of tuberculosis;

20           (c) Conduct nationwide public information campaign and education  
21 programs;

22           (d) Undertake education, training and clinical skills improvement  
23 activities for health care providers;

24           (e) Provide support for model centers to sustain their initiatives under  
25 subparagraphs (b), (c) and (d); and

26           (f) Collaborate with local and foreign organizations for partnership in  
27 various activities and in providing technical and funding support.

1            *SEC. 7. Strengthening of the Regional Centers for Health Development*  
2 *in the Provision of Health Services to Eliminate TB.* – The Secretary of  
3 Health shall strengthen the Regional Centers for Health Development in the  
4 provision of health services to eliminate TB by undertaking the following  
5 activities:

6            (a) Provide free laboratory services through the DOH retained  
7 hospitals;

8            (b) Provide reliable supply of drugs to patients for free by ensuring that  
9 local health centers, through coordination with local government units (LGUs)  
10 concerned, have sufficient supply of medicines for the communities they serve;

11            (c) Undertake public information and educational programs to train the  
12 public on basic ways and means to prevent the spread of tuberculosis;

13            (d) Train and enhance the capability of health providers in both public  
14 and private hospitals;

15            (e) Ensure the proper monitoring of tuberculosis cases in the country;  
16 and

17            (f) Ensure that monitoring services are extended as far as practicable,  
18 at the lowest local level health unit.

19            *SEC. 8. Education Programs.* – The Secretary of Health, in  
20 coordination with the Commission on Higher Education (CHED), shall  
21 encourage the faculty of schools of medicine, nursing or medical technology  
22 and allied health institutions, to intensify information and education programs,  
23 including the development of curricula, to significantly increase the  
24 opportunities for students and for practicing providers to learn the principles  
25 and practices of preventing, detecting, managing, and controlling tuberculosis.

26            *SEC. 9. Inclusion in Basic Education.* – The Secretary of Health, in  
27 coordination with the Secretary of the Department of Education (DepED), shall  
28 work for the inclusion of modules on the principles and practices of

1 preventing, detecting, managing and controlling tuberculosis in the health  
2 curriculum of every public and private elementary and high school.

3 SEC. 10. *Media Campaign.* – The Secretary of Health, in coordination  
4 with the Philippine Information Agency (PIA), shall encourage local media  
5 outlets to launch a media campaign on tuberculosis control, treatment and  
6 management, using all forms of multimedia and other electronic means of  
7 communication.

8 The media campaign shall include materials that would discourage the  
9 general public from spitting in public places and exhibiting unhygienic  
10 behavior that tend to undermine the overall effort of preventing the spread of  
11 the disease.

12 SEC. 11. *Regulation on Sale and Use of TB Drugs.* – The Food and  
13 Drug Administration (FDA) shall strengthen its implementation of the  
14 “No prescription, No anti-TB drugs” to regulate the sale and use of anti-TB  
15 drugs in the market. It shall also ensure the quality of TB drugs distributed in  
16 the market.

17 SEC. 12. *Notification on TB Cases.* – All public and private health  
18 centers, hospitals and facilities shall observe the national protocol on TB  
19 management and shall notify the DOH of all TB cases as prescribed under the  
20 Manual of Procedures of the National TB Program and the Philippine Plan of  
21 Action on Tuberculosis Control.

22 SEC. 13. *PhilHealth TB Package.* – The Philippine Health Insurance  
23 Corporation, otherwise known as the PhilHealth, shall, as far as practicable,  
24 expand its benefit package for TB patients to include new, relapse and  
25 return-after-default cases, and extension of treatment.

26 The PhilHealth shall enhance its present outpatient Directly Observed  
27 Treatment Short Course (DOTS) package to make it more responsive to

1 patients' needs. It shall likewise increase the number of accredited DOTS  
2 facilities to widen target beneficiaries who may avail of reimbursements.

3 SEC. 14. *Report.* – The Secretary of Health shall submit an annual  
4 report to the Committees on Health of the Senate and the House of  
5 Representatives on the activities carried out to comply with the provisions of  
6 this Act.

7 SEC. 15. *Appropriations.* – The amount necessary to implement the  
8 provisions of this Act shall be charged against the corporate funds of  
9 PhilHealth and the appropriations of the DOH, DepED, CHED and the PIA  
10 under the General Appropriations Act.

11 SEC. 16. *Implementing Rules and Regulations.* – The DOH, in  
12 consultation with the DepED, CHED, PIA, LGUs, nongovernment  
13 organizations and other concerned entities, shall issue the rules and regulations  
14 implementing the provisions of this Act within ninety (90) days from its  
15 effectivity.

16 SEC. 17. *Separability Clause.* – If any provision or part hereof is held  
17 invalid or declared unconstitutional, the other provisions which are not affected  
18 thereby shall continue to be in full force and effect.

19 SEC. 18. *Repealing Clause.* – Any law, presidential decree or  
20 issuance, executive order, letter of instruction, administrative order, rule or  
21 regulation contrary to or inconsistent with the provisions of this Act is hereby  
22 repealed, modified or amended accordingly.

23 SEC. 19. *Effectivity.* – This Act shall take effect fifteen (15) days after  
24 its publication in the *Official Gazette* or in a newspaper of general circulation.

Approved,