

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



22 JUL 11 P 4 :08

**SENATE**  
**S. No. 253**

RECEIVED BY 

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Introduced by Senator **PIA S. CAYETANO**

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**AN ACT**  
**PROVIDING FOR A HEALTH MASTER PLAN TOWARDS THE INSTITUTION OF REFORMS IN THE HEALTH CARE SYSTEM, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES**

EXPLANATORY NOTE

According to the Pan American Health Organization and the World Health Organization (WHO), non-communicable diseases (NCDs) are the number one cause of death and disability in the world, but can be prevented through the reduction of tobacco use, harmful alcohol use, physical inactivity, and unhealthy diets.<sup>1</sup> The Philippines is one of 15 countries worldwide with a heavy burden of tobacco-related ill health, such that 87,600 Filipinos die annually from tobacco-related diseases.<sup>2</sup> Tobacco control is not only a public health priority, but also a key development issue which affects overall quality of life and well-being.<sup>3</sup> In 2021, it was identified that Ischaemic heart diseases, cerebrovascular diseases, and COVID-19 virus were the lead causes of death in the Philippines.<sup>4</sup>

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<sup>1</sup> Pan American Health Organization. (n.d.). *Noncommunicable diseases*. <https://www.paho.org/en/topics/noncommunicable-diseases#:~:text=Many%20NCDs%20can%20be%20prevented,injuries%20and%20mental%20health%20disorders>.

<sup>2</sup> Department of Health. (n.d.). *Tobacco control key facts and figures*. <https://doh.gov.ph/Tobacco-Control-Key-facts-and-Figures>

<sup>3</sup> Department of Health. (n.d.). *Tobacco control key facts and figures*. <https://doh.gov.ph/Tobacco-Control-Key-facts-and-Figures>

<sup>4</sup> Philippine Statistics Authority. (2022, March 29). *Causes of deaths in the Philippines (preliminary): January to December 2021*. <https://psa.gov.ph/content/causes-deaths-philippines-preliminary-january-december-2021>

With the foregoing, there is a need to strengthen our primary health care by rationalizing existing health-related programs and fully implement a holistic plan that would serve as a blueprint to ensure healthy lives and promote the well-being of Filipinos of all ages. As mentioned in Bill Gates' book entitled *How To Prevent The Next Pandemic*, "studies have shown that putting more focus into primary care can actually drive down overall health costs: If high blood pressure is diagnosed early through the primary care system, the patient can get inexpensive medication and counseling and avoid the life-threatening and expensive consequences—heart attack, kidney failure, stroke—that will require an expensive visit to the hospital. It's been estimated that 80 percent of health problems can be handled effectively by a strong primary health care system through preventive measures."<sup>5</sup>

In order to promote the constitutional right to health of Filipinos, and be consistent with our national objectives and country's commitment to the International Health Regulations of the World Health Organization (WHO) and the Sustainable Development Goals (SDGs), particularly SDG 3, which requires the State to ensure healthy lives and promote well-being for all at all ages, this proposed measure mandates the Department of Health (DOH) to craft and establish a Health Master Plan identifying the gaps and issues of our country's entire health care system. The DOH shall holistically review, rationalize, and consolidate its existing projects, activities, and programs, and provide, among others, long-term strategic plans. To measure our country's progress, the DOH shall determine the indicators which shall be evidence-based, measurable, grounded on science, and aligned with the parameters provided under the SDGs. In this regard, SDG 3 targets include: reducing global maternal health, ending preventable deaths of newborns and children under 5 years of age, reducing by one third premature mortality from non-communicable diseases (NCDs) through prevention and treatment, and promoting mental health and well-being.

Our country has shown its commitment to the SDGs as we continue to enact health-related laws, such as Republic Act No. 11223, or the *Universal Health Care Act*,

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<sup>5</sup> Bill Gates. (2022). *How to prevent the next pandemic* (p. 227). Penguin Random House.

which covered all Filipinos under the Philippine Health Insurance Corporation,<sup>6</sup> and increased their access to preventive care, medical diagnostic and treatment services for communicable diseases.<sup>7</sup> The Health Master Plan would further ensure that the Philippines' health care system has the capacity to identify, address, prevent, and even withstand all health-related issues of Filipinos, including future public health events and emergencies.

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

  
PIA S. CAYETANO

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<sup>6</sup> Department of Health. (2020, October 18). PhilHealth expedites 100% inclusion of all Filipinos in NHIP as part UHC. <https://doh.gov.ph/doh-press-release/PHILHEALTH-EXPEDITES-100-INCLUSION-OF-ALL-FILIPINOS-IN-NHIP-AS-PART->

UHC#:~:text=President%20Rodrigo%20Duterte%20signed%20the,health%20care%2C%20without%20causing%20financial

<sup>7</sup> World Health Organization. (2017). *Philippines-WHO: Country cooperation strategy 2017-2022*. [https://apps.who.int/iris/rest/bitstreams/1096340/retrieve#:~:text=The%20Philippines%E2%80%933WHO%20Country%20Cooperation%20Strategy%202017%E2%80%932022%20sets%20out,Sustainable%20Development%20Goals%20\(SDGs\).](https://apps.who.int/iris/rest/bitstreams/1096340/retrieve#:~:text=The%20Philippines%E2%80%933WHO%20Country%20Cooperation%20Strategy%202017%E2%80%932022%20sets%20out,Sustainable%20Development%20Goals%20(SDGs).)

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**AN ACT**  
**PROVIDING FOR A HEALTH MASTER PLAN TOWARDS THE INSTITUTION OF REFORMS IN THE HEALTH CARE SYSTEM, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES**

*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 "*Philippine Health*  
2 *Master Plan.*"

3 Sec. 2. *Declaration of Policy.* — The State shall protect and promote the right  
4 to health of Filipinos and instill health consciousness among them. Towards this end,  
5 the State shall institute the necessary reforms to build a robust, well-designed, and  
6 resilient health system capable of ensuring timely access to the highest attainable  
7 standard of care to all its citizens; providing preventive and curative care for the most  
8 common conditions; and dealing with pandemics and other outbreaks of emerging  
9 and re-emerging infectious disease, as well as concurrent disasters. It shall adopt:

10 (a) An integrated and comprehensive approach to ensure that all Filipinos  
11 are provided with healthy living conditions, protected from hazards and  
12 risks that could affect their health;

13 (b) A health care model that provides all Filipinos access to a comprehensive  
14 set of quality, cost-effective, promotive, preventive, curative,  
15 rehabilitative, and palliative health services without causing financial  
16 hardship and prioritizes the needs of the population who cannot afford  
17 such services;

18 (c) A framework that fosters a whole-of-system, whole-of-government, and

- 1 whole-of-society approach in the development, implementation,  
2 monitoring, and evaluation of health policies, programs, and plans; and  
3 (d) A people-oriented approach for the delivery of health services that is  
4 centered on people's needs and well-being, and cognizant of the  
5 differences in culture, values, and beliefs; and  
6 (e) A systematic approach to ensure that all Filipinos are health literate and  
7 knowledgeable about the importance of wellness, including good  
8 nutrition, exercise, and adequate sleep.

9 *Sec. 3. Philippine Health Master Plan.* — The Department of Health (DOH), as  
10 the lead agency, shall establish, continuously update, and fully implement a Health  
11 Master Plan that would serve as a blueprint to ensure healthy lives and promote the  
12 well-being of Filipinos of all ages. The Health Master Plan shall integrate all existing  
13 development plans of the DOH, identify the gaps and possible issues of the Philippines'  
14 entire health care system, and provide solutions, targets, and objectives based on  
15 science, which should be measurable through data-driven and evidence-based targets.  
16 The necessary annual budgetary requirements with the corresponding targets shall be  
17 included in the Health Master Plan, which shall be submitted yearly by the DOH to the  
18 Department of Budget and Management and other concerned agencies for the  
19 determination of appropriate budget allocation and inclusion under the National  
20 Expenditure Program of the government: *Provided,* That the DOH and local  
21 government units (LGUs) shall closely work together to ensure that there are no  
22 overlapping functions and the national and local targets are fully funded and  
23 implemented, taking into consideration the delineated health programs, activities, and  
24 projects from the DOH to LGUs.

25 *Sec. 4. Philippine Health Master Plan Components.* — Through the Health  
26 Master Plan, the DOH shall review, rationalize, and consolidate the existing projects,  
27 activities, and programs, and provide, among others, long-term strategic plans aligned  
28 with laws, rules and regulations, prioritizing and integrating the following:

- 29 (a) *Health Information System.* - Close coordination with relevant  
30 government and non-government agencies, shall constantly,  
31 proactively, and systematically gather all relevant data and statistics on  
32 health, both at a local and international level, which will be the

1 foundation of the policies in the Health Master Plan.

2 (b) *Primary Health Care.* - Prioritization of building a strong primary health  
3 care system that would allow Filipino patients to have access to  
4 affordable medication, including counseling, to avoid preventable  
5 diseases and life-threatening illnesses.

6 (c) *Pollution.* - Reduction of deaths and illnesses from hazardous chemicals  
7 and air, water, and soil pollution and contamination.

8 (d) *Maternal and Neonatal Health.* - Prioritization of the health, well-being,  
9 and safety of mothers and children throughout their pregnancy,  
10 childbirth, and the postnatal period to avoid deaths and ensure that  
11 women and their children develop to their full potential.

12 (e) *Infant and Mandatory Immunization.* - Strengthen programs that ensure  
13 the full and safe development of infants and children, which shall be  
14 consistent with relevant laws, including Republic Act No. 10152, or the  
15 "Mandatory Infants and Children Health Immunization Act of 2011."

16 (f) *Adolescent and Young Adult Health.* - Identify the specific needs of  
17 adolescents in the Philippines and provide them access to, among  
18 others, health care, health education, mental health programs, and  
19 substance abuse intervention and prevention programs that ensure the  
20 full and safe development of adolescents and young adults' health during  
21 their critical transition periods to adulthood.

22 (g) *Reproductive Health and Education.* - Strengthen the reproductive  
23 health programs, activities, and projects to improve family and  
24 community health and well-being, which shall be consistent with  
25 Republic Act No. 10354, or *The Responsible Parenthood and*  
26 *Reproductive Health Act of 2012.* Ensure that Filipinos have access to  
27 sexual and reproductive health care services, including family planning,  
28 information, and education.

29 (h) *Health Financing.* - Prioritize cost-efficient health spending, including  
30 funding infrastructure, programs, services, human health workforce,  
31 vaccines, and medicines. Target for the Philippines to achieve financial  
32 sustainability of our health financing systems.

- 1 (i) *Digitalization of the Health System.* - Utilize technological advancement  
2 on health and provide for a policy on an overall digital transformation,  
3 including e-health, online medical record or database for Filipino  
4 patients, and digitally-connected diagnostics.
- 5 (j) *Screening of Harmful Products.* - Regulate the approval of health-related  
6 products without sacrificing safety by strengthening its policy under  
7 relevant laws, including Republic Act No. 11223, or the *Universal Health*  
8 *Care Act* and Republic Act No. 9711, or *The Food and Drug*  
9 *Administration Act of 2009.*
- 10 (k) *Research and Development of Vaccines and Medicines.* - Maximize and  
11 formulate policies for the investment, monitoring, and reviewing of  
12 medical and health research development, which shall be consistent with  
13 relevant laws, including Republic Act No. 10532, or the *Philippine*  
14 *National Health Research System Act of 2013.*
- 15 (l) *Universal Health Care.* - Identify the gaps and issues in attaining  
16 universal health care in the Philippines, which should cover essential  
17 health services, service capacity and access, among the general and the  
18 most disadvantaged population.
- 19 (m) *Infectious and Non-infectious Diseases.* - Strengthen the system of  
20 surveillance, identification, and notification of infectious and non-  
21 infectious diseases internationally and locally, which shall be consistent  
22 with relevant laws, including Republic Act No. 11332, or the *Mandatory*  
23 *Reporting of Notifiable Diseases and Health Events of Public Health*  
24 *Concern Act.* The DOH shall also prioritize the end of the epidemics of  
25 AIDS, tuberculosis, malaria, and neglected tropical diseases and combat  
26 hepatitis, water-borne diseases, and other communicable diseases.
- 27 (n) *Health Human Resource.* - Prioritize and recognize that the health  
28 human resource is the backbone of a dynamic health care system.  
29 Ensure that there is sufficient supply of human health resources in the  
30 Philippines, especially in geographically isolated, far-flung and  
31 disadvantaged areas.
- 32 (o) *Global Linkages.* - Join and actively participate in global health forums

1 where all governments can share experiences, coordinate action, and  
2 agree on international standards and policies for global health.

3 (p) *International Health Standards.* - Ensure full compliance with treaties  
4 where the Philippines is a signatory, and ensure that these are  
5 considered in the crafting of policies, rules, and regulations.

6 (q) *Early Warning and Risk Reduction.* - Strengthen the Philippines'  
7 monitoring, early warning, risk reduction and management of national  
8 and global health risks.

9 (r) *Leadership and Governance.* - Identify the roles and responsibilities of  
10 the government and non-government agencies at different levels,  
11 including national, regional, and local, in compliance with the Health  
12 Master Plan.

13 The DOH shall lead the Philippines' health agenda, as provided in the Health  
14 Master Plan, by setting norms and standards, articulating evidence-based policy  
15 options, providing technical support, and monitoring and assessing health trends on a  
16 local, regional, national, and international level.

17 *Sec. 5. Indicators of Good Health and Well-Being.* — In setting and assessing  
18 the targets under the Health Master Plan, the DOH shall determine the indicators,  
19 which shall be aligned with the following parameters provided under the United  
20 Nations 2030 Agenda for Sustainable Development:

- 21 (a) Maternal mortality ratio;
- 22 (b) Proportion of births attended by skilled health personnel;
- 23 (c) Under-five mortality rate;
- 24 (d) Neonatal mortality rate;
- 25 (e) Number of new HIV infections per 1,000 uninfected population, by sex,  
26 age and key populations;
- 27 (f) Tuberculosis incidence per 1,000 population;
- 28 (g) Malaria incidence per 1,000 population;
- 29 (h) Hepatitis B incidence per 100,000 population;
- 30 (i) Number of people requiring interventions against neglected tropical  
31 diseases;
- 32 (j) Mortality rate attributed to cardiovascular disease, cancer, diabetes or



- 1 chronic respiratory disease;
- 2 (k) Suicide mortality rate;
- 3 (l) Coverage of treatment interventions (pharmacological, psychosocial,  
4 and rehabilitation and aftercare services) for substance use disorders;
- 5 (m) Harmful use of alcohol, defined according to the national context as  
6 alcohol per capita consumption (aged 15 years and older) within a  
7 calendar year in liters of pure alcohol;
- 8 (n) Death rate due to road traffic injuries;
- 9 (o) Proportion of women of reproductive age (aged 15-49 years) who have  
10 their need for family planning satisfied with modern methods;
- 11 (p) Adolescent birth rate (aged 10-14 years; aged 15-19 years) per 1,000  
12 women in that age group;
- 13 (q) Coverage of essential health services, which is the average coverage of  
14 essential services based on tracer interventions that include  
15 reproductive, maternal, newborn and child health, infectious diseases,  
16 non-communicable diseases and service capacity and access, among the  
17 general and the most disadvantaged population);
- 18 (r) Proportion of population with large household expenditures on health as  
19 a share of total household expenditure or income;
- 20 (s) Mortality rate attributed to household and ambient air pollution;
- 21 (t) Mortality rate attributed to unsafe water, unsafe sanitation and lack of  
22 hygiene (exposure to unsafe Water, Sanitation and Hygiene for All  
23 (WASH) services);
- 24 (u) Mortality rate attributed to unintentional poisoning;
- 25 (v) Age-standardized prevalence of current tobacco use among persons  
26 aged 15 years and older;
- 27 (w) Proportion of the target population covered by all vaccines included in  
28 their national programme;
- 29 (x) Total net official development assistance to medical research and basic  
30 health sectors;
- 31 (y) Proportion of health facilities that have a core set of relevant essential  
32 medicines available and affordable on a sustainable basis;

- 1 (z) Health worker density and distribution;  
2 (aa) International Health Regulations capacity and health emergency  
3 preparedness; and  
4 (bb) Such other indicators to be determined by the DOH, which are consistent  
5 with the objectives of this Act.

6 Sec. 6. *Appropriations.* — The amount necessary for the effective  
7 implementation of this Act shall be included in the annual General Appropriations Act.

8 Sec. 7. *Separability Clause.* — If any part or provision of this Act is declared  
9 unconstitutional or invalid, the remainder of this Act or any provision not affected  
10 thereby shall remain to be in full force and effect.

11 Sec. 8. *Effectivity Clause.* — This Act shall take effect fifteen (15) days following  
12 its publication in the Official Gazette or in a major daily newspaper of national  
13 circulation in the Philippines.

*Approved,*