

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

SEVENTEENTH CONGRESS
First Regular Session
House Bill No. 4277



Introduced by Representative Ron P. Salo

EXPLANATORY NOTE

For many years now, Barangay Health Workers have been an indispensable segment in the health sector's provision of primary health care within the communities. They have been in the forefront of providing basic health services in their localities, including health and nutrition education; family planning services; maternal, newborn, and child health care; and promotion of good hygiene and sanitation practices. In Barangay Health Centers, they provide assistance and support to physicians, nurses, and midwives.

The presence of health workers in the barangays is crucial to ensure that people in the different parts of the country, including in the remote, underserved areas, can avail of the proper medical attention in their respective localities. This is in keeping with our vision to provide universal health care access to all citizens. It is also consistent with the duty of the State to protect and promote the health of its citizens and to instill health consciousness among them.

The organization and training of Barangay Health Workers (BHWs) as primary health care workers in their own barangays since the 1970's, was both a means to address the need to bring health services closer to the communities, as well as to empower the communities to fully participate and be responsible for the protection and maintenance of their own health. Moreover, BHWs fill the gap brought about by the dwindling number of health workers in the Philippines due to continued migration of nurses and doctors for better opportunities abroad.

However, despite the significant role of the BHWs, their work is primarily anchored on volunteerism and many BHWs do not receive remuneration commensurate to the work they do. In 1995, Republic Act No. 7883, otherwise known as the Barangay

Health Workers and Benefits and Incentives Act of 1995, sought to provide incentives to them in recognition of their services. The law specified that BHWs are entitled to hazard and subsistence allowance, training programs, Civil Service eligibility, free legal services, and access to loan services. However, it did not provide fixed rates for their allowances, and the local government units vary in the rates and benefits they provide. Consequently, there are BHWs who are underpaid and receive far less than what their counterparts receive.

This proposed bill aims to enhance the benefits and incentives of the BHWs, in recognition of their important role and the amount of work they do, especially during disease outbreaks that most often emerge in remote areas, and during natural calamities. It mandates fixed monthly honoraria and a floor or a minimum for the hazard and subsistence allowances for BHWs, in addition to other incentives. This is to ensure that all the BHWs in the different localities receive reasonable amounts of allowances.

The additional benefits are a long-overdue set of incentives especially considering the continuing inflation. It is an affirmation of the Barangay Health Workers' heroic role in helping the State fulfill its obligation to provide universal health care to all its citizens, especially in the underserved areas.

Hence, the immediate passage of this bill is earnestly sought.


Ron P. Salo
KABAYAN Party List

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AN ACT GRANTING ADDITIONAL INCENTIVES AND BENEFITS TO BARANGAY HEALTH WORKERS, AMENDING FOR THE PURPOSE REPUBLIC ACT 7883, OTHERWISE KNOWN AS THE BARANGAY HEALTH WORKERS BENEFITS AND INCENTIVES ACT OF 1995

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

SECTION 1. – Section 6 of Republic Act 7883, otherwise known as the Barangay Health Workers' Benefits and Incentives Act of 1995, is hereby amended to read as follows:

"Section 6. Incentives and Benefits. – In recognition of their services, all accredited barangay health workers who are actively and regularly performing their duties shall be entitled to the following incentives and benefits:

- a) **HONORARIA - ALL ACCREDITED BARANGAY HEALTH WORKERS SHALL BE ENTITLED TO A MONTHLY HONORARIA OF AT LEAST THREE THOUSAND PESOS (P 3,000.00);**
- b) **CHRISTMAS BONUS - ALL ACCREDITED BARANGAY HEALTH WORKERS SHALL BE ENTITLED TO A CHRISTMAS BONUS OF AT LEAST THREE THOUSAND PESOS (P 3,000.00);**

THE MONTHLY HONORARIA AND CHRISTMAS BONUS MAY BE INCREASED BY THE SECRETARY OF HEALTH SUBJECT TO BUDGETARY ALLOCATION BY CONGRESS, OR TO BE TAKEN FROM SAVINGS OF THE DEPARTMENT OF HEALTH, AS THE CASE MAY BE.

- c) **Hazard Allowance – [Volunteer b] Barangay health workers in rural and urban areas WHO, IN THEIR WORK ENVIRONMENT, ARE exposed to**

situations, conditions, or **RISKS** [factors in the work environment or place where foreseeable but unavoidable danger or risks exist which adversely] **THAT** endanger [his] **THEIR** health or life [and/or increase the risk of producing adverse effect on his person] in the exercise of [his] **THEIR** duties, to be validated by [the proper authorities] **THE SANGGUNIANG BARANGAY WHERE THEY ARE RENDERING SERVICE**, shall be entitled to hazard allowance in an amount to be determined by the local health board and the local peace and order council of the local government unit concerned **BUT IN NO CASE SHALL IT BE LOWER THAN ONE THOUSAND PESOS (P 1,000.00)**

- d) Subsistence Allowance – Barangay health workers who render service [within the premises of] **IN** isolated barangay health stations **AND STAY WITHIN THE PREMISES OF THE ISOLATED BARANGAY** in order to make their services available at any and all times, shall be entitled to subsistence allowance equivalent to the meals they take in the course of their duty, which shall be computed in accordance with prevailing circumstances as determined by the local government unit concerned **BUT IN NO CASE SHALL IT BE LOWER THAN ONE THOUSAND PESOS (P 1,000.00)**
- e) Training, Education and Career Enrichment Programs – The DOH, in coordination with the Department of Education [Culture and Sports] and other concerned government agencies and non-government organizations, shall provide opportunities for the following:
 - i. Educational programs which shall recognize years of primary health care service as credits to higher education in institutions with stepladder curricula that will entitle barangay health workers to upgrade their skills and knowledge for community work or to pursue further training as midwives, pharmacists, nurses or doctors;
 - ii. Continuing education, study and exposure tours training, grants, field immersion, scholarships, etc.;
 - iii. Scholarship benefits in the form of tuition fees in state colleges, to be granted to one child of every barangay health worker who will not be able to take advantage of the above programs; and
 - iv. Special training programs such as those on traditional medicine, disaster preparedness and other programs that address emergent community health problems and issues.
- f) Civil Service Eligibility. – A second grade eligibility shall be granted to barangay health workers who have rendered **THREE (3)** years continuous service as such: Provided, That should the barangay health worker

become a regular employee of the government, the total number of years served as barangay health worker shall be credited to his/her service in computing retirement benefits.

- g) Free Legal Services – Legal representation and consultation services for barangay health workers shall be immediately provided by the Public Attorney's Office in cases of coercion, interference, and in other civil and criminal cases filed by or against barangay health workers arising out of or in connection with the performance of their duties as such.
- h) Preferential Access to Loans – The DOH in coordination with other concerned government agencies shall provide, within one hundred eighty (180) days after the effectivity of this Act, a mechanism for access to loan services by organized barangay health workers. The agencies providing loan services will set aside one percent (1%) of their loanable funds for organized barangay health worker groups that have community-based income-generating projects in support of health programs or activities.
- i) **COMPULSORY PHILHEALTH COVERAGE – ALL BARANGAY HEALTH WORKERS, WHO HAVE RENDERED AT LEAST SIX (6) MONTHS OF CONTINUOUS SERVICE, SHALL BE ENROLLED IN THE NATIONAL HEALTH INSURANCE PROGRAM TO RECEIVE AND AVAIL OF AN ADEQUATE PACKAGE OF PERSONAL HEALTH SERVICES, AND OTHER SUPPLEMENTARY HEALTH BENEFITS AS MAY BE DEFINED BY THE LOCAL GOVERNMENT UNITS (LGU) WHERE THEY RENDER SERVICES. PROVIDED, THAT THE LGUs WHERE THEY ARE RENDERING SERVICES SHALL HAVE THE OBLIGATION OF ENROLLING THE BARANGAY HEALTH WORKERS IN THE INSURANCE PROGRAM, AND PAYING FOR THEIR RESPECTIVE PREMIUMS.**
- j) **SCHOLARSHIP GRANTS TO DEPENDENTS OF BHWs – COLLEGE SCHOLARSHIPS TO ANY STATE UNIVERSITIES AND COLLEGES OR TESDA SCHOLARSHIPS SHALL BE GRANTED TO A MAXIMUM OF TWO (2) CHILDREN TO ALL BARANGAY HEALTH WORKERS, WHO HAVE RENDERED AT LEAST TWO (2) YEARS OF CONTINUOUS SERVICE.**

SEC. 2. Appropriations. – The amount necessary to implement the provisions of this Act shall be included in the annual budget of the Department of Health in the General Appropriations Act for the succeeding years following the approval of this Act. The premium fees for BHW's Philhealth coverage shall be provided for in the annual budget of the concerned LGUs.

SEC. 3. Implementing Rules and Regulations. – The Department of Health, in consultation with the Department of Interior and Local Government, Civil Service Commission, Commission on Higher Education, Technical Education and Skills Development Authority, and the National Confederation of Barangay Health Workers shall prepare the Implementing Rules and Regulations within sixty (60) days from the effectivity of this Act.

SEC. 4 Repealing Clause. – All laws, decrees, executive orders, proclamations, rules and regulations, and other issuances, or parts thereof which are inconsistent with the provisions of this Act are hereby repealed, amended or modified accordingly.

SEC. 5. Separability Clause. – If, for any reason, any part, section or provision of this Act is held invalid or unconstitutional, the remaining provisions not affected thereby shall continue to be in full force and effect.

SEC. 6. Effectivity. – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.