

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Philippines

EIGHTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 4205



INTRODUCED BY REPRESENTATIVE ALFRED VARGAS

AN ACT

**CREATING A MEDICAL SCHOLARSHIP AND RETURN SERVICE
PROGRAM FOR THE RECRUITMENT OF QUALIFIED FILIPINOS WHO
WILL SERVE AS PRIMARY CARE WORKERS IN PRIORITY BARANGAYS,
MUNICIPALITIES, AND CITIES, APPROPRIATING FUNDS THEREFOR,
AND FOR OTHER PURPOSES**

EXPLANATORY NOTE

Article 13, Section 11, of the 1987 Philippine Constitutions states 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 under-privileged, Sick, elderly, disabled, women, and children. The State shall endeavor to provide free medical care to paupers."

Republic Act No. 7160 or the Local Government Code devolved health service delivery to Local Government Units. This has tasked the DOH with the impossibly complex task of coordinating 81 provinces, 1,600 cities and municipalities and 42,000 barangays to provide the same level of health services.

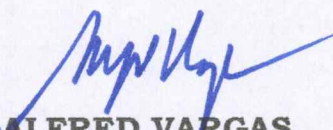
Unplanned specialization of skilled workers has produced an imbalance between specialty and general health care. As a result, individuals often have to consult directly with a specialist when it may not be needed. This is unfortunate, as 75 percent to 85 percent of persons require only primary care services in a given year. It can be summed up in one tragic statistic: **6 out of every 10 Filipinos die without seeing a doctor.**

This bill proposes a simple solution to provide a transition to a primary care system. This measure defines primary care as a system of providing health services in which front-line primary care providers serve as the initial point of care, point of continuing care, and coordinator of necessary specialized services.

Finally, as the point of continuing care, primary care providers shall act as the coordinator and liaison between the patient and the secondary or tertiary care provider.

In order to fill up the new Primary Care Provider positions, this bill seeks to establish a medical scholarship and return program which will recruit qualified Filipinos who will serve as primary care providers. Under the program, the DOH shall provide a scholarship and financial assistance to qualified Filipinos who shall complete a course on primary care and serve as primary care providers in priority barangays, municipalities and Cities for at least five (5) years.

Thus, the immediate passage of this measure is earnestly sought.



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

ARTICLE I
GENERAL PROVISIONS

Section 1. Short Title. — This Act shall be known as the "Medical Scholarship and Return Service nor Primary Care Act of 2019 “.

Sec. 2. Declaration of Policy. — The State shall protect and promote the right to health of the people and instill health consciousness among them. The State recognizes the essential role of a sufficient number of primary care providers in promoting and protecting the right to health. To this end, there is a need to create the positions of primary care providers, and retraining and scholarship programs to recruit qualified individuals to serve as primary care providers who will serve as the initial point of care, point of continuing care, and the coordinator of necessary services in the health system.

Sec. 3. Definition of Terms. - For the purposes of this Act:

(a) Primary Core — refers to a system of providing health services in which front-line primary care providers serve as the initial point of care, point of continuing caret and coordinator of necessary specialized services.

(b) Primary Care Provider - refers to Individuals who are provide primary care services, which shall include the following:

1. Maternal, Newborn and Child Health Services;
2. Family Planning and Reproductive Health;
3. Prevention and Control of Communicable Diseases;
4. Prevention and Control of Tropical Diseases;
5. Prevention and Control of Non-Communicable Diseases; and
6. Emergency Care.

(c) Primary Care Scholarship and Return Service Program — refers to the program created under this Act which seeks to recruit individuals to serve as Primary Care Providers in priority Cities, municipalities, and barangays.

Sec. 4. Establishment of the Primary Care Scholarship and Return Service Program. — A primary care scholarship and return program IS hereby established under the Department of Health (DOH). Under this program, the DOH shall provide a scholarship and financial assistance to qualified Filipinos who shall complete a course on primary care on the condition that they shall serve as primary care providers in priority barangays, municipalities and cities.

Sec. 5. Scope of the Scholarship Program. — The scholarship program shall cover expenses such as, but not limited to:

- (a) Tuition, laboratory and other school fees;
- (b) Required textbooks, supplies and equipment;
- (c) Clothing and uniform allowances; and
- (d) Housing expenses, traveling expenses and subsistence and living allowances;

Sec. 6. Conditions of the Scholarship Program. — The scholarship program shall have the following conditions:

- (a) The scholar shall pass the admission examinations and related requirements of the UPCM in the first two (2) years of this Act's effectivity, or In any other university that offers the primary care course thereafter;
- (b) The scholar shall carry the full load of subjects prescribed per semester under the primary care program;
- (c) The scholar shall pay the full amount of the scholarship if he or she falls to complete the course; and
- (d) The scholar shall, upon completion of the course, serve as a Primary care for at least five (5) years in a barangay health center, rural health unit, or City health office as determined by the DOH: Provided, that the DOH shall prioritize barangay, municipalities, and cities which have an acute shortage of health human resources.

Sec. 7. Duties and Responsibilities of Primary Care Providers.

- Primary care providers under this Act shall have the following responsibilities:

(a) As the initial point of care, they shall strive to render general health care services to all persons at the onset of disease to prevent costly treatment on the secondary and tertiary levels of care, which shall include:

1. Maternal, Newborn and Child Health Services;
2. Family Planning and Reproductive Health;
3. Prevention and Control of Communicable Diseases;
4. Prevention and Control of Tropical Diseases;
5. Prevention and Control of Non-Communicable Diseases;
6. Emergency Care;

(b) As the coordinator of necessary specialized services, they shall, when necessary, refer patients to secondary or tertiary care providers. They shall serve as the coordinators and navigators of the health care system; and

(c) As the point of continuing care, they shall act as the coordinator and liaison between the patient and the secondary or tertiary care provider.

Sec. 8. Information Dissemination. — The DOH and the Presidential Communications Operations Office (PCOO) and its

attached agencies shall conduct regular information dissemination campaigns on the programs under this Act.

Sec. 9. Implementing Rules and Regulations. —The members of the technical committee along With the DBM, CHED and the PCOO shall promulgate the Implementing rules and regulations of this Act within thirty (30) days from its effectivity.

Sec. 10. Appropriation. -- The amounts necessary for the effective Implementation of this Act shall be included under the appropriations of the Department of Health under the annual General Appropriations Act.

Sec. 11 Penalties. — Any primary care provider who falls to comply with Section 14 (d) of this Act shall be, upon conviction, perpetually disqualified from employment and re-employment In the government service and pay a fine of five hundred thousand pesos (Php500, 000) to one million pesos (Php1, 000,000), without prejudice to the imposition of administrative sanctions such as the revocation of their certificate of completion or their suspension from providing primary care.

Sec. 12. 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. 13. 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. 14. Effectivity Cause. -This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation

Approved,