

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

EIGHTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 6669



INTRODUCED BY REP. JOHN REYNALD M. TIANGCO

EXPLANATORY NOTE


The State has the duty to provide accessible health care to the public and to promote public safety and welfare of the people.

Because of the COVID-19 pandemic, the whole world expects to set a new normal. Now more than ever, the shift to virtual communication and remote rendering of services shall be prioritized and strengthened through regulation and implementation of reasonable measures by the proper government agency.

It is also timely for the State to prioritize health services, and its accessibility, especially during this transition to the new normal. As such, the permission of telemedicine practice shall be introduced to heed to the rising demand to medical services, and supplement what is already present in status-quo.

This measure seeks to expand the scope of medical practice to include the practice of telemedicine, so as to make access to health care available to a broader audience, especially during the transition to the world's "new normal".

For the promotion of the right to health of the Filipino people, the passage of the bill is earnestly sought.


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AN ACT
EXPANDING THE SCOPE OF MEDICAL PRACTICE THROUGH PROVIDING GUIDELINES FOR
TELEMEDICINE SERVICES, AMENDING REPUBLIC ACT NO. 2382 OR THE MEDICAL ACT OF 1959,
AND FOR OTHER PURPOSES

Section 1. **Short Title** – The Act shall be known as “The Telemedicine Act.”

Sec. 2. **Declaration of Policy** – The State recognizes the right of the Filipino people to health, including access to health services, especially in times of a pandemic, where the new normal sets to maintain the state of physical distancing and the public’s limitation to travel and movement. It is high time, therefore, to introduce, and at the same time regulate, the practice of telemedicine in the Philippines. It is the intent of the legislature to recognize the practice of telemedicine as a legitimate means by which a patient may receive medical services from a licensed physician without physical contact.

Sec. 3. **Objectives** – This Act provides for and shall govern the:

- (a) Provision of access to health services in medically underserved rural and urban areas;
- (b) Standardization, upgrading, and maintenance of the distinct domain of telemedicine;
- (c) Supervision and regulation of the practice and operations of telemedicine;
- (d) Upholding of competence, values, and professional ethics of physicians who will engage with the telemedicine practice.

Sec. 4. **Definition of Terms**

(a) *Practice of Medicine* - acts constituting practice of medicine. A person shall be considered as engaged in the practice of medicine:

(1) who shall, for compensation, fee, salary or reward in any form, paid to him directly or through another, or even without the same, examine any person, physically or remotely, and diagnose, treat, operate or prescribe any remedy for any human disease, injury, deformity, physical, mental or physical condition or any ailment, real or imaginary, regardless of the nature of the remedy or treatment administered, prescribed or recommended; or

(2) who shall, by means of signs, cards, advertisements, written or printed matter, or through the radio and television, either offer or undertake by any means or method to diagnose, treat, operate or prescribe any remedy for any human disease, injury, deformity, physical, mental or physical condition; or

(3) who shall falsely use the title M.D. after his name.¹

(b) *Telemedicine*, as defined by the World Medical Association - the practice of medicine over a distance, in which interventions, diagnostic and treatment decisions and recommendations are based on data, documents and other information transmitted through telecommunication systems.²

(c) *Physician* – a professional duly licensed to practice medicine, or otherwise permitted to engage in the practice of medicine by the Medical Act of 1959.

(d) *Patient* – any person receiving medical treatment.

(e) *Domain* – a specified field of knowledge or activity.

(f) *Telecommunication systems* – A collection of nodes and links, including devices and technology used, to enable e telecommunication.

Sec. 5. **Applicability** – This law shall should apply to all physicians or persons engaged in the industry of telemedicine, including hospitals and establishments which offers telemedicine to its patients, through its physicians.

¹ The Medical Act of 1959 [Medical Act], Republic Act No. 2382.

1959. p. 10; An Act to Amend Certain Sections of Republic Act No. 2382, otherwise known as ,The Medical Act of 1959,' Republic Act No. 4224. 1965. Republic Act No. 4224 amends sections 3-7, 9-16, and 18- 21 of the Medical Act of 1959.

² World Medical Association Statement on the Ethics of Telemedicine, Adopted by the 58th WMA General Assembly, Copenhagen, Denmark. October 2007

Sec. 6. **Enforcement** – The Department of Health, hereby referred to as DOH shall regulate and supervise the telemedicine practice in the Philippines, and shall be permitted to create an attached agency intended for this purpose.

Sec. 7. **Persons allowed to diagnose through telemedicine** – Only licensed physicians, or those licensed by the Professional Regulatory Board of Medicine, are allowed to diagnose and provide physician consultation services through telecommunication systems.

Sec. 8. **Privacy and consent of patients** – The following general conditions shall be observed and complied with by the parties to telemedicine service:

(a) Prior to the rendering of health services through telemedicine, the physician who has the authority over the primary diagnosis shall obtain written informed consent, duly signed by the patient. The consent procedure shall ensure that the following information is given and explained to the patient:

- (1) The individual retains the option to withhold or withdraw consent, at any time, without affecting the right to access to care or treatment which the individual would otherwise be entitled;
- (2) A clear explanation of the potential risks, consequences, and benefits of telemedicine;
- (3) All existing laws and stipulation on confidentiality shall apply;
- (4) The patient shall have access to all medical information transmitted during a telemedicine consultation, and copies of this information shall be made available to the patient;
- (5) Dissemination of any patient identifiable images or information from the telemedicine consultation to other third parties shall not be made without the consent of the patient;
- (6) The patient understands the written information provided pursuant to subdivision and that this information has been discussed with the physician, or his or her representative or assignee.

(b) The written consent statement signed by the patient shall become part of the patient's medical record.

(c) The failure of the physician to comply with this section shall be penalized under this act.

(d) Where the patient is a minor or is incapacitated or incompetent, such that he or she is unable to give informed consent, the patient's legal guardian shall sign in behalf of the patient.

(e) The physician or persons engaged in telemedicine, including hospitals or establishments which offers this service through its licensed physicians, shall have the obligations of a data controller under the Data Privacy Act of 2012.

(f) The patient shall have all the rights of a data subject under the Data Privacy Act of 2012.

(g) This section not apply in an emergency situation in which a patient is unable to give informed consent and the representative of that patient is not available.

Sec. 9. ***Establishment of physician-patient relationship*** – Upon compliance to the preceding paragraph, the physician and patient interacting through telecommunication services, for purposes of telemedicine practice, shall be considered to have established a physician-patient relationship, and all pertinent laws governing and related to the said relationship shall likewise apply.

Sec. 10. ***Compliance required*** – Hospitals, establishments, or persons allowed, under this Act, to offer the delivery of medical services through telecommunication systems, or otherwise regarded as telemedicine practice, shall meet the following requirements:

(a) All persons and facilities including but not limited to, clinics, hospitals, and medical establishments, which will undertake telemedicine practice shall be registered with the DOH as facilities rendering telemedicine;

(b) All personnel employed by, whether regular or contractual, the above-stated facilities, intended to handle all the data and telecommunication systems under this Act shall be licensed or certified by their respective board or agency, where licensure is required by law;

(c) All equipment and telecommunication systems intended to be used in carrying out telemedicine shall be duly declared upon registration with the DOH and the operating personnel for the equipment or system shall be licensed or certified, as required by law;

(d) All telemedicine services shall be available, at reasonable times, to all persons intending to avail such services. To the extent feasible, the facility shall make all services accessible to all.

Sec. 11. ***Implementing Rules and Regulations*** – Within ninety (90) days after the approval of this Act, the DOH, in consultation and coordination with appropriate government agencies, representatives from the private sector, and other stakeholders, shall promulgate the necessary implementing rules and regulations for the effective implementation of this Act.

Sec. 12. ***Separability Clause*** – In the event any provision of this Act or the application of such provision to any person or circumstances is declared invalid, the remainder of this Act or the application of said provisions to other persons or circumstances shall not be affected by such declaration.

Sec. 13. ***Repealing clause*** – All acts and regulations not consistent with this Act are hereby amended or repealed.

Sec. 14. ***Effectivity*** – This Act shall take effect fifteen (15) days after its publication in at least two (2) national newspapers of general circulation.

Approved,