


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

SEVENTEENTH CONGRESS
First Regular Session

HOUSE BILL No. 1921

HOUSE OF REPRESENTATIVES	
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Introduced by Representative Rosenda Ann Ocampo

EXPLANATORY NOTE

In the year 2000, the United Nations member-states, including the Philippines, came together and entered into a landmark commitment to *"spare no effort to free our fellow men, women and children from the object and dehumanizing conditions of extreme poverty"*.

This commitment was later translated into a comprehensive framework identifying the so called Eight (8) Millennium Development Goals (MDGs) to address the different facets of poverty within a 15-year time frame.

Two of these MDGs deal with the improvement of maternal and child health.

For the Philippines, the MDGs on the improvement of maternal health was meant to reduce the maternal mortality ratio by seventy-five percent from 209 deaths for every 100,000 live births in the 1990's to 52 deaths in 2015.

On the other hand, the MDGs, on improving child health was aimed at reducing mortality among children under five years old from about 80 per 1,000 live births in the 1990's to 28 in 2015.

Through the years, our country has performed relatively well in attaining the aforesaid MDGs. Various programs were implemented by the government to attain the targets set for each of the goals.

For maternal health, maternal care was included in the benefit packages under the State's national health insurance program. Information campaign was likewise conducted aggressively to inform and influence pregnant women to seek the care and services of skilled professionals before, during and after childbirth.

In the same manner, immunization for infant and children was mandated by the government through the Department of Health (DOH). Moreover, health care for newborns was also incorporated in the national health insurance packages while at the same time intensified programs on micronutrient supplementation, breast feeding and birth spacing were used as strategies by the health department.

In spite of the gains, however, the Philippines scorecard on MDGs pertaining to maternal and child health would indicate that we are yet to achieve our targets after 15 years.

Maternal care remains to be a big challenge considering that the percentage of women availing pre- and post-natal check-up is still low. A lot expectant mothers still do not have access to these health care services either because they do not know where to seek such services or they do not have the means to pay for them.

This bill will seek to address the aforesaid problems by providing automatic health insurance coverage to all women about to give birth who are not yet enrolled under any existing categories of the Philippines Health Insurance Corporation (Philhealth).

The premium of such membership shall be borne by the national government through the National Health Insurance Fund of Philhealth to be sourced from the sin tax collections in accordance with Republic Act No. 10351 otherwise known as ***"An Act Restructuring the Excise Tax on Alcohol and Tobacco Products"***.

Through this measure, all expectant mothers will be able to avail of pre- and post-natal care as well as childbirth benefits while at the same time extending to their children, adequate newborn health care services.

Hence, contributing to the attainment of our MDGs on maternal and child health.

This bill will likewise be a step closer to attaining universal Philhealth coverage as it will automatically enroll all expectant mothers and their newborn children in the national health insurance program of the government.

It is in this regard that the passage of this bill is earnestly sought.



ROSENDA ANN OCAMPO

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HOUSE BILL No. **1921**

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AN ACT

GRANTING AUTOMATIC PHILHEALTH COVERAGE FOR ALL WOMEN ABOUT TO GIVE BIRTH AND THEIR NEWBORN CHILDREN, AMENDING FOR THIS PURPOSE REPUBLIC ACT NO. 7875, AS AMENDED BY REPUBLIC ACT NO. 10606, OTHERWISE KNOWN AS THE "NATIONAL HEALTH INSURANCE ACT OF 2013", AND PROVIDING FUNDS NECESSARY THEREFOR AND FOR OTHER PURPOSES

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

SECTION 1. *Short Title* – This Act shall be known as the "*Philhealth for Pregnant Women and their Infants Act of 2016*".

SEC. 2. Section 12 of Republic Act No. 7875, as amended by Republic Act No. 10606 is hereby further amended to read as follows:

"SEC. 12. *Entitlement to Benefits* – A member whose premium contributions for at least three (3) months have been paid within six (6) months prior to the first day of availment, including those of the dependents, shall be entitled to the benefits of the Program: *Provided*, That such member can show that the contributions have been made with sufficient regularity: *Provided, further*, That the member is not currently subject to legal penalties as provided for in Section 44 of this Act.

- a. Retirees and pensioners of the SSS and GSIS prior to the effectivity of this Act; [and]
- b. Lifetime members [,]; **AND**

C. ALL FILIPINO WOMEN ABOUT TO GIVE BIRTH AND THEIR NEWBORN CHILDREN WHO ARE NOT CURRENTLY COVERED UNDER ANY EXISTING CATEGORY OF PHILHEALTH."

SEC. 3. Section 29-B of Republic Act No. 7875, as amended, is hereby further amended to read as follows:

*“SEC. 29-B. Coverage of Women About to Give Birth – The annual required premium for the coverage of unenrolled women who are about to give birth **AND THEIR NEWBORN CHILDREN** shall be fully borne by the national government **TO BE SOURCED FROM THE NATIONAL HEALTH INSURANCE FUND OF PHILHEALTH EARMARKED FROM THE PROCEEDS OF SIN TAX COLLECTIONS AS PROVIDED FOR IN REPUBLIC ACT NO. 10351.** [and/or LGU’S and/or legislative sponsor which shall be determined through the means testing protocol recognized by the DSWD].”*

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

SEC. 5. Effectivity – This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in at least two (2) newspapers of general circulation.

APPROVED.