

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

HOUSE OF REPRESENTATIVES
H.B. No. 254

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Introduced by Representative Herminio Harry L. Roque Jr.

**AN ACT
ESTABLISHING A NATIONAL PROGRAM FOR SHARING OF ORGANS
FROM DECEASED DONORS**

EXPLANATORY NOTE

The Constitution, Article 2, Section 15 provides: "The State shall promote the right to health of the people and instill health consciousness among them."

Kidney transplantation is supposedly the best treatment option for patients diagnosed with end stage renal disease. Transplant patients get an opportunity to have a better quality of life. Indeed, most are able to return to a life of normalcy.

The practice of kidney transplantation in the country is not without controversy. In the Philippines, transplanted kidneys are usually sourced from "living" donors. According to the Philippine Renal Registry Report, in 2009, 95.5% (639 out of 669) of transplanted kidneys came from living donors, 70.1% (448 out of 639) of whom were not related by blood to the kidney recipients at all. Kidneys from deceased donors reportedly constituted only 45% (30 out of 669) of the total number of transplanted kidneys.

Many of the non-related living "donors" are reportedly destitute individuals who sold their kidneys to rich patients in need. These "donors" are supposedly recruited by middle men who go around the different parts of the country convincing them to sell their kidneys in exchange for about P100,000.00. The crime is perfected by unscrupulous surgeons and hospitals out to make huge amounts of money at the expense of these poor people.

Thus, there is a need to legislate the establishment of an effective, efficient, and ethical organ procurement system that will equitable allocate organs from deceased donors to potential transplant recipients in order to control the exploitative practice of organ buying and selling.

This bill seeks to establish a National Program for Sharing of Organs from Deceased Donors, as proposed by upright nephrologists and transplant surgeons who wish to correct this deplorable situation. This bill is based on Department of Health Administrative Order 2010-0019, or the "Establishment of a National program for Sharing of Organs from Deceased Donors," which was issued by former Health Secretary Esperanza I. Cabral.¹


HERMINIO HARRY L. ROQUE JR.

¹ This bill was originally filed during the Fifteenth Congress, Second Regular Session.

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1 **AN ACT**
2 **ESTABLISHING A NATIONAL PROGRAM FOR SHARING OF ORGANS**
3 **FROM DECEASED DONORS**

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

4 SECTION 1. *Title.* – This Act shall be known as the “Deceased Organ Donor Act.”

5 SECTION 2. *Declaration of Policy.* – The State shall protect and promote the right to
6 health of the people and instill health consciousness among them. It also recognizes the
7 importance of an active deceased donor program in providing valuable treatment to those with
8 kidney failure as well as in protecting the vulnerable sectors of society from the potential for
9 abuse of living organ donors.

10 It is a policy of the State that the human body or any of its parts, is beyond the commerce
11 of man. Thus, any commercialization in the handling of organs for transplantation is prohibited.
12 The State shall respect the desire of citizens to donate organs and shall ensure that the consent
13 process is informed and purely voluntary. It also recognizes the family’s right to make a choice
14 by having access to complete information, including the positive impact that the act of organ
15 donation will have on fellow Filipinos.

16 SECTION 3. *Definition of Terms.* – For purposes of this Act:

17 (a) “Attending Physician” or “AP” is the primary physician responsible for both the
18 care and management of the potential multiple organ donor.

1 (b) “Brain Death” or “BD” is the irreversible cessation of all functions of the entire
2 brain, including the brain stem.

3 (c) “Death” is the irreversible cessation of circulatory and respiratory functions or the
4 irreversible cessation of all functions of the entire brain, including the brain stem, which is
5 determined in accordance with acceptable medical practice and diagnosed separately by the
6 attending physician and another consulting physician, both of whom must be appropriately
7 qualified and suitably experienced in the care of such patients.

8 (d) “Decedent” refers to a deceased individual, and includes a stillborn infant or fetus.

9 (e) “Donor Service Area” or “DSA” refers to the territorial jurisdiction of an organ
10 procurement organization as may be designated by the PHILNOS.

11 (f) “Gift” or “Incentive” refers to money in any form, *i.e.*, cash, check or its
12 equivalent in kind, which is given to the donor from the recipient and considered unduly
13 beneficial to the donor.

14 (g) “Host OPO” is the particular Organ Procurement Organization (OPO) which,
15 having received an organ donor call from a referring hospital, assumes responsibility for organ
16 procurement.

17 (h) “Organ Procurement” is the administrative procedure involved with acquiring
18 organs for transplantation through various programs, systems, or organizations. It includes
19 obtaining consent, donor management, and arranging for transportation of donor organs to the
20 hospital for processing and transplant.

21 (i) “Organ Procurement Organization” or “OPO” is a Philippine Network for Organ
22 Sharing Corporation (PHILNOS) accredited non-profit organization, independent or hospital-
23 based, licensed and authorized by the DOH to procure organs for transplantation. The OPO is
24 responsible for the procurement of organs from deceased donors from hospitals, including
25 preservation and transportation of such organs.

26 (j) “Organ Transplant Candidate” or “OTC” is a patient diagnosed with an end-stage-
27 organ-disease and is medically suitable to receive an organ graft.

28 (k) “Organ-Specific Allocation Scoring System” or “OSASS” is the national scoring
29 system by which allocation of organs/grfts from deceased donors shall be based.

1 (l) "Philippine Organ Donor and Recipient Registry System" or "PODRRS" is the
2 web-based electronic utility used by the PHILNOS contractor to conduct its business. The
3 PODRRS comprises of the national database of all organ transplant candidates, organ transplant
4 recipients, and organ donors, and all other software, applications and security architecture
5 needed for the collection, modification, validation, reporting, management and redundancy of
6 data associated with the tasks and activities of the PHILNOS.

7 (m) "Potential Multiple Organ Donor" or "PMOD" is any patient who will
8 imminently become brain dead, or who currently meets the criteria for brain death.

9 (n) "Referring Hospital" or "RH" refers to any hospital that identifies and refers
10 potential deceased organ donors to PHILNOS.

11 (o) "Testator" is an individual who makes a legacy of all or part of his body.

12 (p) "Transplant Center" or "TxC" refers to any hospital which is duly accredited by
13 the Department of Health (DOH) to perform organ transplantation.

14 (q) "Transplant Coordinator" or "TC" refers to the designated trained health care
15 professional who takes the central role and acts as liaison between the referring hospital, and the
16 retrieval and transplant team members in processing a potential organ donor.

17 (r) "Procurement Transplant Coordinator" or "PTC" is the TC who shall have the
18 responsibility of coordinating the donor's evaluation, management, and recovery of organs for
19 transplantation.

20 (s) "Clinical Transplant Coordinator" or "CTC" is the TC who shall have the
21 responsibility of coordinating the transplant candidate's evaluation, management, and follow-up
22 care.

23 t) "Transplant Doctor" is a licensed physician who is involved in the care and/or
24 management of a transplant candidate or recipient.

25 SECTION 4. *Creation and Nature of the Corporation.* – The Philippine Network for
26 Organ Sharing Corporation (PHILNOS) is hereby created, which shall have the status of a tax-
27 exempt government corporation attached to the DOH for policy coordination and guidance. It
28 shall facilitate a national system of promoting organ donation from deceased donors and sharing

1 of organs in coordination with private organ procurement organizations. It is tasked to serve as
2 the central coordinating body for all deceased organ donation and transplantation activities in the
3 country.

4 SECTION 5. *Records and Reports.* – The PHILNOS shall keep such records as may be
5 necessary for the purpose of making actuarial studies, calculations and valuations of its funds.
6 The PHILNOS shall maintain appropriate books of accounts to record its assets, liabilities,
7 income, expenses, receipts and disbursement of funds and other financial transactions and
8 operations.

9 SECTION 6. *Examination and Valuation of the Funds.* – The PHILNOS shall make a
10 periodic actuarial examination and valuation of its funds in accordance with accepted actuarial
11 principles.

12 SECTION 7. *Exemptions from Taxes and Duties.* – The actuarial solvency of the funds of
13 the PHILNOS shall be preserved and maintained at all times. Thus, the PHILNOS, its assets,
14 revenues including all accruals, and any donation, contribution, bequest, subsidy or financial aid
15 which may be made to the Corporation shall be exempt from all taxes, assessments, fees,
16 charges, or duties of all kinds.

17 Moreover, said donation, contribution, bequest, subsidy or financial aid which may be
18 made to PHILNOS shall constitute as allowable deduction from the income of the donor for
19 income tax purposes and shall be exempt from donor's tax, subject to such conditions as
20 provided for in the National Internal Revenue Code, as amended.

21 SECTION 8. *Powers and Functions of PHILNOS.* – PHILNOS shall exercise the
22 following powers and functions:

- 23 (a) To administer and supervise the implementation of this Act;
- 24 (b) To formulate, adopt, amend and/or rescind such rules and regulations as may be
25 necessary to carry out the provisions and purposes of this Act, as well as the effective exercise of

1 the powers and functions, and the discharge of duties and responsibilities of the PHILNOS, its
2 officers and employees;

3 (c) To manage the national deceased donor program, ensuring effectiveness,
4 efficiency, equity and transparency in the national system of allocation of deceased organs;

5 (d) To initiate and implement programs that will increase awareness and acceptance
6 of deceased organ donation and transplantation, and that will increase the number of organs from
7 deceased donors for transplantation;

8 (e) To formulate and implement the policies that will promote the ethical practice of
9 deceased organ donation and transplantation;

10 (f) To supervise all functions of organ procurement organizations;

11 (g) To serve as an advisory body to the President of the Philippines and to relevant
12 government agencies, in all policies pertaining to organ donation and transplantation;

13 (h) To adopt and approve the annual and supplemental budget of receipts and
14 expenditures including salaries and allowances of the PHILNOS personnel;

15 (i) To authorize such capital and operating expenditures and disbursements of the
16 PHILNOS as may be necessary and proper for its effective management and operation;

17 (j) To invest the funds of the PHILNOS, directly or indirectly, in accordance with the
18 provisions of this Act, and all applicable laws, and rules and regulations.

19 (k) To conduct continuing actuarial and statistical studies and valuations to determine
20 the financial condition of the PHILNOS, and taking into consideration such studies and
21 valuations and the limitations provided, re-adjust the allocation or re-allocation of the funds to
22 the agency or organization covered;

23 (l) To sue and be sued;

24 (m) To enter into, make, perform and carry out contracts of every kind and description
25 with any person, firm or association or corporation, domestic or foreign;

26 (n) To carry on any other lawful business whatsoever in pursuance of, or in
27 connection with the provisions of this Act;

1 (o) To enter into agreements with the Philippine Health Insurance Corporation or any
2 other entity, enterprise, corporation or partnership for the benefit of Filipino patients needing
3 organ transplantation;

4 (p) To submit to the President of the Philippines and to both Houses of Congress its
5 Annual Report, and to make such report available to the general public. The report shall contain
6 the status of the PHILNOS Fund, its total disbursements, reserves, average costing to OPO, and
7 any request for additional appropriation. It should also contain data that ensures the transparency
8 of the allocation process for deceased organs and all other data pertinent to the implementation
9 of the national deceased donor program.

10 (q) To exercise such powers and perform such other acts as may be deemed
11 appropriate, useful, incidental or auxiliary to carry out the provisions of this Act, or to attain the
12 purposes and objectives of this Act.

13 SECTION 9. *Quasi-Judicial Powers.* – The PHILNOS, in order to carry out its tasks
14 more effectively, shall be vested with the following powers:

15 (a) Conduct investigations for the determination of a question, controversy,
16 complaint, or unresolved grievance brought to its attention relating to deceased organ donation or
17 organ transplantation, and render decisions, orders, or resolutions on the cases. It shall proceed to
18 hear and determine the case even in the absence of any party who has been properly served with
19 notice to appear. It shall conduct its proceedings in public or in executive session; adjourn its
20 hearings to any time; refer technical matters or accounts to an expert and to accept his reports as
21 evidence; direct parties to be joined in or excluded from the proceedings; and give all such
22 directions as it may deem necessary or expedient in the determination of the dispute before it;

23 (b) Issue summons and/or subpoenas requiring the attendance and/or testimony of
24 parties to a controversy or witnesses, or the production of documents and other materials
25 necessary to a just determination of the case under investigation;

26 (c) Temporary suspension or permanent revocation of license, and/or imposition of
27 fines after due notice and hearing. The decision shall immediately be executory, even pending

1 appeal, when the public interest so requires, and as may be provided for in the implementing
2 rules and regulations.

3 The revocation of an OPO's accreditation shall disqualify it from obtaining another
4 accreditation in its own name, under a different name, or through another entity, whether natural
5 or juridical.

6 In the exercise of its quasi-judicial powers, PHILNOS shall not be bound by the technical
7 rules of evidence.

8 SECTION 10. *Coverage.* – This Act shall cover all government and private hospitals,
9 health facilities, organ procurement organizations, medical and allied medical professionals,
10 foundations, non-government organizations and other government units that are involved or have
11 relevant roles in organ transplantation in the Philippines.

12 SECTION 11. *Board of Directors.* –

13 (a) *Composition.* – The corporate powers and functions of the PHILNOS shall be
14 vested in and exercised by Board of Directors (here called the “Board”), and shall be composed
15 of seven (7) members as follows:

- 16 1) The Secretary of Health;
- 17 2) The President of PHILNOS;
- 18 3) The Chairperson of the National Transplant Ethics Committee;
- 19 4) Two (2) representatives from professional organizations related to transplantation,
20 including but not limited to Philippine Society of Nephrology (PSN) and
21 Philippine Society of Transplant Surgeons (PSTS);
- 22 5) A representative from the patient group; and
- 23 6) A representative from PhilHealth.

24 The Secretary of Health shall be the *ex-officio* chairperson, while the President of
25 PHILNOS shall be the Vice-Chairperson of the Board.

26 (b) *Appointment and Tenure.* – The President of the Philippines shall appoint all the
27 Members of the Board upon the recommendation of the Chairperson of the Board and in

1 consultation with the sectors concerned. Members of the Board shall have a term of four (4)
2 years each, renewable for a maximum of two (2) years, except for members whose terms shall be
3 co-terminus with their respective positions in government. Any vacancy in the Board shall be
4 filled in the manner in which the original appointment was made and the appointee shall serve
5 only the unexpired term of his predecessor.

6 (c) *Meetings and Quorum.* – The Board shall hold regular meetings at least once a
7 month. Special meetings may be convened at the call of the Chairperson or by a majority of the
8 members of the Board. The presence of four (4) voting members shall constitute a quorum. In the
9 absence of the Chairperson and Vice Chairperson, a temporary presiding officer shall be
10 designated by the majority of the quorum.

11 (d) *Allowances and Per Diems.* – The members of the Board shall receive a *per diem*
12 for every meeting actually attended, subject to the pertinent budgetary laws, and rules and
13 regulations on compensation, honoraria and allowances.

14 SECTION 12. *President of PHILNOS.* –

15 (a) *Duties and Functions.* – The President shall have the duty of advising the Board
16 and effecting the policies and decisions. His functions are as follows:

- 17 1) to act as the chief executive officer of the PHILNOS;
- 18 2) to be responsible for the general conduct of the operations and management
19 functions of the PHILNOS; and
- 20 3) to execute any other duties assigned to him by the Board.

21 (b) *Qualifications.* – The President must be a Filipino citizen and must possess
22 adequate and appropriate training with at least (3) years of experience in the field of healthcare
23 management.

24 (c) *Salary.* – The President shall receive a salary to be fixed by the Board, with the
25 approval of the President of the Philippines, payable from the funds of the Corporation, subject
26 to applicable laws and rules and regulations on compensation of officers of government-owned
27 or controlled corporations.

1 (d) *Prohibition.* – To avoid conflict of interest, the President must not be a physician
2 in active medical practice during his term. Neither shall he be involved in any capacity with any
3 OPO and/or health care institution.

4 In the event that the President is a transplant doctor, he shall only be allowed to return to
5 active medical practice twelve (12) months from the date of termination of his term.

6 SECTION 13. *Executive Department Composition.* – The Executive Department shall be
7 composed of the President of PHILNOS and the heads of the departments which shall be the
8 following:

9 (a) Accreditation and Training Department shall handle the accreditation of the OPO,
10 including its quality assurance and standardization. It shall also provide training and certification
11 of TCs.

12 (b) Ethics and Legal Affairs Department shall handle ethical and legal matters.

13 (c) Finance Committee shall handle standardization of organ acquisition costs
14 including system of reimbursement for the OPO members and auditing of financial statements in
15 relation with OPO transactions.

16 (d) Information and Advocacy Department shall handle lay education, information
17 dissemination and media concerns.

18 (e) Registry Department shall handle registry and research.

19 Other departments may be formed upon the discretion of the Board of PHILNOS.

20 SECTION 14. *External Audit Department.* – The External Audit Department shall
21 conduct a periodic review and audit of the operations of PHILNOS, with special emphasis on
22 organ allocation procedures. It shall submit its annual audit report to the PHILNOS Board and
23 Office of the President of the Philippines, and make these reports available to the general public.

24 This department shall be composed of designated representatives from PhilHealth, OPO,
25 transplant hospital, public sector and from professional organizations related to transplantation,
26 including but not limited to the PSN and PSTS.

1 SECTION 15. *Organ Procurement Organization (OPO).* –

2 (a) *Main Function.* – An OPO is responsible for the procurement of organs from
3 deceased donors from hospitals including preservation and transportation of such organs. All OPOs
4 must secure accreditation and licensing from PHILNOS.

5 (b) *Duties and Responsibilities.* – OPOs are required to fulfill the following duties
6 and responsibilities:

- 7 1) Respond to call from RH within his DSA and subsequent evaluation of the
8 PMOD for eligibility;
- 9 2) Discuss organ donation with the potential donor's family;
- 10 3) Obtain consent for donation and for removal of the organs;
- 11 4) Management of organ procurement within its DSA;
- 12 5) Reporting to PHILNOS the availability of a PMOD immediately after consent for
13 donation is obtained;
- 14 6) Fulfillment of all medico-legal requirements;
- 15 7) Appropriate preservation, and packaging of the organs;
- 16 8) Assurance that adequate tissue typing material is procured, divided, and
17 packaged;
- 18 9) Assurance that written documentation of donor evaluation, donor maintenance,
19 consent for donation, death pronouncement, and organ procurement quality
20 accompanies the organ;
- 21 10) Cooperation and coordination with other OPOs;
- 22 11) Promotion of deceased organ donation through education and information
23 dissemination; and
- 24 12) Adherence to all DOH and PHILNOS rules and regulations.

25 (c) *Temporary Suspension of license.* – An OPO's license to operate can be
26 suspended by PHILNOS for failure to:

- 27 1) Respond to calls from Referring Hospitals (RH);
- 28 2) Procure an available organ;

- 1 3) Fulfill reportorial requirements; or
- 2 4) Non-compliance with the PHILNOS rules and regulations.
- 3 (d) *Permanent Revocation of License.* – An OPO’s license can be revoked by
- 4 PHILNOS for any of the following reasons:
- 5 1) Repeated violation of PHILNOS rules and regulations;
- 6 2) Violation of Republic Act No. 9208, otherwise known as Anti-Trafficking Law;
- 7 or
- 8 3) Violation of Section 21 of this Act.

9 The PHILNOS, through its Board, after consultation with professional medical
10 organizations, may provide for additional grounds for the revocation of an OPO’s license.

11 (e) *Designation of DSA.* – The designation of the DSA shall be guided by the
12 following:

- 13 1) Geographical proximity;
- 14 2) Technical capacity; and
- 15 3) Quality of service.

16 SECTION 16. *Reporting of Brain Death.* – All patients with brain death in a tertiary
17 hospital within the DSA of an OPO are to be considered potential multiple organ donors
18 (PMOD) and as such, should be reported by the hospital to the designated OPO.

19 All tertiary hospitals, government or private, in the country are required to include the
20 number of brain death cases in their annual report.

21 SECTION 17. *Brain Death Certification.* –

22 (a) Organs may be procured only from patients who have been declared to have
23 suffered brain death and have a prior written intention to donate their organs (such as an organ
24 donor card or will) or whose legal next of kin has given consent for organ donation.

25 (b) The DOH, in consultation with an appropriate professional organization such as
26 the Philippine Neurological Association (PNA), shall establish and promulgate the acceptable
27 parameters for declaring the occurrence of brain death (BD). Such criteria may be reviewed

1 and/or modified as deemed appropriate by the members of the PNA or upon request by the
2 PHILNOS.

3 (c) Certification of BD shall be done separately by two (2) physicians, both of whom
4 must be appropriately qualified and suitably experienced in neurological assessment for the
5 diagnosis of brain death.

6 (d) The death certificate should be signed at the time of brain death certification.

7 SECTION. 18. *Consent for Deceased Organ Donation.* –

8 (a) Consent for donation shall be obtained by the PTC and shall be done only after
9 the issuance of the BD certificate. Laboratory examinations shall commence only after consent
10 for donation is secured.

11 (b) Consent for deceased organ donation must be obtained from the legal next-of-kin
12 of the PMOD in the following order of priority, as stipulated in Republic Act No. 7170,
13 otherwise known as the Organ Donation Act of 1991:

- 14 1) Spouse;
- 15 2) Son or daughter of legal age;
- 16 3) Either parent;
- 17 4) Brother or sister of legal age; or
- 18 5) Guardian over the deceased person at the time of death.

19 (c) In the absence of the legal next-of-kin of the PMOD and in the absence of any
20 document of organ donation, the physician in charge of the patient, the head of the hospital or a
21 designated officer of the hospital who has custody of the body of the deceased classified as
22 accident, trauma, or other medico-legal cases, may authorize in a public document the removal
23 from such body for the purpose of transplantation of the organ to the body of a living person;
24 Provided, that the physician, head of hospital or officer designated by the hospital for this
25 purpose has exerted reasonable efforts, within forty-eight (48) hours, to locate the nearest
26 relative listed in Section 17 (b) of this Act, as stipulated in R.A. No. 7170.

27 (d) To guarantee the priority of a decedent's wishes over the decedent's family
28 members with respect to their objections to organ donation, all hospitals and emergency

1 personnel shall be mandated to develop procedures of “routine inquiry/required request” that will
2 elicit from the patient, upon admittance to the hospital, or their families, at patient’s death, about
3 organ donation. If the patient expresses the intent to donate his or her organs, that information is
4 added to the patient’s record.

5 (e) The following documents, or advance directives, shall be recognized and honored
6 as expressions of the testator’s legacy or desire to donate his organs upon his death:

7 1) Organ Donor Card (ODC) which shall have the following elements:

- 8 i. Signature and/or fingerprint mark of testator;
9 ii. Signature and/or fingerprint mark of one witness; and
10 iii. Date the ODC was signed.

11 PHILNOS shall release a universal ODC that shall bear the PHILNOS
12 logo and a provisional space for the logo of the TxC or OPO where the ODC was
13 obtained.

14 2) Driver’s License;

15 3) Last will and testament provides instructions for someone’s medical care if that
16 person becomes incapacitated or otherwise unable to make decisions for himself
17 or herself. In most cases, a will can direct that one’s organs or tissues be taken
18 and donated if medically appropriate. If individuals execute a will, it is advisable
19 for them to inform their physicians and their families of its existence.

20 4) Special Powers of Attorney for Health Care names someone, the individual’s
21 “agent,” to make important decisions regarding that person’s health care should
22 the person become incapacitated. These documents can instruct the person’s agent
23 to donate the person’s organs or tissues upon the person’s death. Like wills, the
24 special power of attorney for medical care is only effective if, in addition to the
25 agent, the family and the person’s physician know of its existence.

26 5) An advance care medical directive (ACMD) combines some features of the will
27 and the special power of attorney for health care. An ACMD allows individuals to
28 provide instructions for the type of care they do or do not want in a number of

1 medical scenarios. These documents need to be created in consultation with their
2 physician.

3 6) Video-tape of oral attestation.

4 SECTION 19. *Examination of Human Body or Part Thereof.* – A legacy or donation of
5 all or part of a human body authorizes any examination necessary to assure medical acceptability
6 of the legacy or donation for the purpose intended.

7 For purposes of this Act, all the necessary laboratory examinations, *i.e.*, not autopsy, shall
8 be conducted on the cadaver of accident, trauma, or other medico-legal cases immediately after
9 the pronouncement of death to determine viability and/or quality of human organs that will be
10 utilized for transplantation and/or in furtherance of medical science.

11 SECTION 20. *Enrollment of the Organ Transplant Candidate.* – All OTCs shall be
12 enrolled according to established criteria per organ. They shall be registered in the Philippine
13 Organ Donor and Recipient Registry System (PODRRS) through their respective TxCs.

14 SECTION 21. *Organ Allocation.* –

15 (a) Only the enrolled OTC shall be eligible to receive an organ retrieved from the
16 deceased donor.

17 (b) Only PHILNOS shall have the authority to allocate all retrieved organs in the
18 country.

19 (c) PHILNOS shall oversee the formulation and implementation of each and every
20 allocation scoring system for each graft that shall form the basis for the allocation of individual
21 organs/grafts. Such a scoring system shall be formulated through broad-based consultation and
22 should be consistent with current international and national ethical and scientific standards.

23 (d) PHILNOS shall ensure the transparency of the implementation of the Organ-
24 Specific Allocation Scoring System (OSASS) through daily electronic monitoring and audit.

1 (e) All OSASS are subject to periodic review and revision as deemed appropriate and
2 as recommended by PHILNOS and/or by related professional organizations such as but not
3 limited to the Philippine Society of Nephrology and Philippine Society of Transplant Surgeons.

4 SECTION 22. *Organ Transplantation.* –

5 (a) Organ transplantation can be performed only in accredited and licensed TxC.

6 (b) The DOH, through the PHILNOS, shall formulate and implement the
7 accreditation requirements for TxC, define their functions, monitor their operations and ensure
8 their compliance with all government regulations.

9 (c) Organ transplantation can be carried out only by medical professionals accredited
10 by the appropriate professional medical organizations.

11 (d) PHILNOS shall ensure that all medical and paramedical personnel involved in
12 transplantation shall comply with pertinent government regulations.

13 (e) No TxC may perform a transplant procedure using an organ from a deceased
14 donor that has not been allocated through PHILNOS.

15 (f) Organ transplantation with deceased donor shall be carried out at the TxC of
16 choice of the OTC. The organ transplantation shall also be performed by the transplant team of
17 choice of the OTC.

18 SECTION 23. *Non-Commercialization of Donated Organs, Incentives and Recognitions.*

19 – Organs should only be donated freely, without any monetary payment. Purchasing, or offering
20 to purchase organs for transplantation is prohibited. PHILNOS shall formulate guidelines to
21 ensure that any gifts or rewards are not, in fact, disguised forms of payment for donated organs.

22 (a) All OPOs have the option to give recognition to the family or next-of-kin of the
23 deceased organ donor and/or to the deceased organ donor through a commemorative token or
24 ceremony that has a monetary value not greater than the amount that shall be stipulated by
25 PHILNOS.

26 (b) All OPOs shall not offer or give any gift to the family or next-of-kin of the
27 PMOD in anticipation or in exchange for organ donation.

1 (c) To further increase awareness on deceased organ donation, a designated week
2 during the calendar year shall be declared as National Organ Donation Awareness Week when
3 PHILNOS, OPOs and/or hospitals will be holding activities pertaining organ donation.

4 SECTION 24. *Education.* – The Department of Education shall mandate the inclusion of
5 organ donation awareness in the national high school curriculum. The Commission on Higher
6 Education (CHED) shall mandate the inclusion of organ donation awareness in all medical and
7 paramedical courses including, but not limited to, Medicine, Nursing, Physical Therapy,
8 Occupational Therapy, Respiratory Therapy, Radiation Technology and Medical Technology.

9 SECTION 25. *Driver's License.* – The Land Transportation Office is mandated to
10 provide information on organ donation to all applicants for a license to operate a motor vehicle.
11 It is required to include a query regarding consent for organ donation in case of brain death in all
12 drivers' license applications.

13 SECTION 26. *Air Transport.* –

14 (a) The Civil Aviation Authority of the Philippines (CAAP) under the Department of
15 Transportation and Communication (DOTC) and the DOH shall jointly formulate guidelines that
16 shall govern the transport of procured organs through commercial airlines.

17 (b) The CAAP shall ensure the compliance of all registered commercial airlines with
18 the regulations allowing transport of procured organs.

19 SECTION 27. *Violations and Sanctions.* – Non-compliance with the policy guidelines
20 stated in this Act shall be ground for suspension or revocation of license of the hospital or
21 transplant center, or organ procurement organization subject to the implementing rules and
22 regulations to be established. Any violations by erring professionals, *i.e.*, doctors, nurses,
23 transplant coordinators, shall be investigated by the DOH and the Professional Regulations
24 Commission, for appropriate administrative sanctions.

1 SECTION 28. *Appropriation.* –

2 (a) *Initial Appropriation.* – Congress shall appropriate the amount of Forty Million
3 Pesos (P 40,000,000.00) for the initial implementation of this Act.

4 (b) *Subsequent Appropriations.* – The following year after the initial appropriation,
5 and succeeding years thereafter, the appropriation for PHILNOS shall be included in the regular
6 budgetary allocation for the DOH, until such time that PHILNOS shall be self-sustaining through
7 its own funding.

8 (c) *Additional Appropriations.* – DOH may request the Congress to appropriate
9 supplemental funding for PHILNOS in order to meet targeted milestones of this Act, as may be
10 deemed necessary by PHILNOS.

11 SECTION 29. *Financing.* –

12 (a) A standard Organ Acquisition Cost from organ retrievals coming from deceased
13 donors shall be determined by PHILNOS.

14 (b) PhilHealth shall develop a benefit package for the reimbursement of the organ
15 acquisition cost to the Host OPO for every organ transplantation event that occurs.

16 (c) To be included in the PODRRS list, a potential transplant recipient of PHILNOS
17 shall pay a one-time, non-refundable registration fee.

18 (d) PHILNOS shall be given authority to conduct tax-exempted fund-raising
19 activities that will help augment the revolving fund for organ acquisition.

20 SECTION 30. *Funds of the PHILNOS.* –

21 (a) *Funds* – All income derived from registration fees, donations or from fund-raising
22 activities shall be utilized solely for the continuous operations of PHILNOS.

23 The funds of the PHILNOS shall not be used for purposes other than what are provided
24 for under this Act. Moreover, no portion of the funds of the PHILNOS or income shall accrue to
25 the General Fund of the national government and its political subdivisions, instrumentalities and

1 other agencies including government-owned and controlled corporations except as may be
2 allowed under this Act.

3 (b) *Deposits and Disbursements.* – All revenues collected and all accruals shall be
4 deposited, administered and disbursed in accordance with the law. A maximum expense loading
5 of seventy percent (70%) of the yearly revenues from all sources may be disbursed for
6 administrative and operational expenses except as may be otherwise approved by the President
7 of the Philippines on the basis of actuarial and management studies.

8 (c) *Investment of Funds.* – The funds of the PHILNOS which are not needed to meet
9 its current obligations may be invested under such terms and conditions and rules and regulations
10 as may be prescribed by the Board: Provided, That investments shall satisfy the requirements of
11 liquidity, safety/security and yield in order to ensure the actuarial solvency of the funds of the
12 PHILNOS; Provided, further, That the PHILNOS shall submit an annual report on all
13 investments made to both Houses of Congress of the Philippines, and to other agencies as may
14 be required by law, such as:

- 15 1) in interest-bearing bonds or securities or other evidence of indebtedness of the
16 Government of the Philippines;
- 17 2) in interest-bearing deposits or securities in any domestic bank doing business in
18 the Philippines: Provided, That in the case of such deposits, there shall not exceed
19 at any time the unimpaired capital and surplus or total private deposits of the
20 depository bank, whichever is smaller; Provided, further, That the said bank has
21 prior designation as a depository for the purpose by the Monetary Board of the
22 Central Monetary Authority;
- 23 3) in real estate property including shares of stocks involving real state property and
24 investments secured by first mortgages on real estate or other collaterals
25 acceptable to the PHILNOS: Provided, That such investment shall, in the
26 determination of the Board, redound to the benefit of the Corporation, its
27 members as well as the general public;

- 1 4) in loans to, or in bonds, debentures, promissory notes or other evidence of
2 indebtedness of any solvent corporation created or existing under the laws of the
3 Philippines;
- 4 5) in common and preferred stocks of any solvent corporation or financial institution
5 created or existing under the laws of the Philippines listed in the stock exchange
6 with proven track record of profitability over the last three (3) years and payment
7 of dividends at least once over the same period; and
- 8 6) in domestic mutual funds including investments related to the operations of
9 mutual funds.

10 SECTION 31. *General Provisions.* –

11 (a) *Dispensation of PHILNOS funds.* – PHILNOS shall pay for the expenditures of all
12 Organ Donation Events that have been performed/processed by authorized OPOs within their
13 DSAs, provided, that all requirements are submitted to PHILNOS within sixty (60) days from
14 date of Organ Procurement.

15 Compensation for the staff and board members of PHILNOS shall be drawn from the
16 Corporation's own funds upon such time that it has been deemed self-sustaining..

17 PHILNOS shall also provide for the funding of memorial gardens, medallions, and
18 similar tokens as recognition for the noble act of organ donors.

19 (b) *Development and Disposition of Acquired Assets.* – PHILNOS shall have the right
20 to develop and dispose of its acquired assets obtained in the ordinary course of its business. To
21 add value to, improve profitability of, and/or enhance the marketability of an acquired asset,
22 PHILNOS may further develop/renovate the same either with its own capital or through a joint
23 venture arrangement with private companies or individuals.

24 PHILNOS may sell its acquired assets in accordance with existing Commission on Audit
25 (COA) rules and regulations for an amount not lower than the current market value of the
26 property. For this purpose, PHILNOS shall conduct an annual appraisal of its property or
27 acquired assets to determine its current market value. All notices of sale shall be published in
28 newspapers of general circulation.

1 No injunction or restraining order issued by any court, commission, tribunal or office
2 shall bar, impede or delay the sale and disposition by PHILNOS of its acquired assets, except on
3 questions of ownership and national or public interest.

4 SECTION 32. *Implementing Rules and Regulations.* – PHILNOS, in consultation with
5 relevant medical societies and government agencies, shall promulgate the necessary
6 Implementing Rules and Regulations within three (3) months from the effectivity of this Act.

7 SECTION 33. *Separability Clause.* – If any provision or part hereof is held invalid or
8 unconstitutional, the remainder of the law or the provision not otherwise affected shall remain
9 valid and subsisting.

10 SECTION 34. *Repealing Clause.* – All laws, decrees, orders, rules and regulations, or
11 parts thereof inconsistent with this Act are hereby repealed, amended, or modified accordingly.

12 SECTION 35. *Effectivity.* – This Act shall take effect fifteen (15) days after its
13 publication in at least two (2) newspapers of general circulation.

Approved,