EXPLANATORY NOTE

Originally filed in the 17th Congress by Rep. Tom Villarin, House Bill No. 337 entitled “An Act Creating the Community Health Worker Education and Training Program, Increasing Compensation and Other Benefits for Barangay Health Workers (BHW), Appropriating Funds Therefor and for Other Purposes” along with other legislative measures granting honoraria and additional incentives to BHWs have been pending for deliberation by the Committee on Local Government.

This bill emulates the spirit of Section 12, Article XIII (Social Justice and Human Rights) of the 1987 Constitution, which compels the State to “undertake appropriate health manpower development and research, responsive to the country’s health needs and problems.” To this end, Republic Act No. 7610 or the Local Government Code of 1991 specifies the Local Government Units’ responsibility to provide for health services and facilities for each barangay, including the implementation of programs and projects on primary health care, maternal and child care, and communicable and non-communicable disease control services, access to secondary and tertiary health services.

To further address the State’s role on undertaking health manpower development, Republic Act No. 7883 or the Barangay Health Workers’ Benefits and Incentives Act of 1995 was enacted to provide support for barangay health workers in terms of health education and trainings, and in incentives and benefits. The State recognizes that it is ultimately the barangay health workers that secure the effectivity of the most basic of the country’s healthcare programs and projects.

However, despite the barangay health workers’ critical role as front-liners of our country’s community-based health interventions, many cities and municipalities still lack health workers.\(^1\) While there are those that are equipped with functional

\(^1\) https://www.sunstar.com.ph/article/152252
barangay health services and workers, the many challenges hampering efficient healthcare service delivery remain a glaring reality the Government cannot keep disregarding. Some barangay health workers need to slog through the fields just to conduct house-to-house visits in some areas; some need to shell out of their own pockets for food and travel; some are exposed to many health and hazard risks while on the job; and some lack up-to-date awareness on emerging health issues.\(^2\) Their heroic services, whether to the most far-flung of barangays or to the most populated ones, need not be at the expense of the depreciation of their labor for the country’s indigent communities.

The lack of sufficient training and commensurate incentives for the services of barangay health workers can be addressed with appropriate legislative action. This bill aims to provide free Education and Training Programs for barangay health workers, in addition to entitlement to additional compensation and incentives.

In view of the foregoing, immediate approval of this measure is earnestly sought.

Republic of the Philippines

HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH (18th) CONGRESS
First Regular Session

HOUSE BILL NO. 165

Introduced by REP. JOSE CHRISTOPHER Y. BELMONTE

AN ACT
CREATING THE COMMUNITY HEALTH WORKER EDUCATION AND TRAINING PROGRAM, INCREASING COMPENSATION AND OTHER BENEFITS FOR BARANGAY HEALTH WORKERS (BHW), APPROPRIATING FUNDS THEREFOR AND FOR OTHER PURPOSES

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

1. SECTION 1. Title. – This Act shall be known as the “Barangay Health Workers Empowerment Act”.

2. SEC. 2. Declaration of Principles. – It is the policy of the State to 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. In furtherance of this, the State shall endeavor to provide accessible and quality health services through barangay health workers as front-liners in community-based health interventions.

3. SEC. 3. Coverage. – The provisions of this Act shall be applicable to all barangay health workers under Republic Act No. 7883. For the purpose of this Act, the term barangay health worker shall refer to a person who has undergone training program under any accredited government or non-government organization primarily to render health care services, pursuant to Republic Act No. 7883.

4. SEC. 4. Six-Month Education and Training Program for Community-Based Health Workers. – The Department of Health (DOH), in coordination with the University of the
Philippines, shall develop a competency-based education and training curriculum for all barangay health workers. The curriculum shall train the community health workers as healthcare provider, community organizer, health service manager, trainer and educator, and researcher. It shall include basic orientation and training on health programs and institutionalized health service delivery system, primary healthcare, basic community organizing, local health research, social health insurance navigation, basic local resource generation and mobilization, training needs analysis, basic report writing and communication skills, and program planning and development. Courses on basic dental care, reproductive health, STI and HIV/AIDS prevention, nutrition, physical therapy, traditional and herbal medicine and reflexology shall be offered.

SEC. 5. Accreditation and Competency Assessment. — The Department of Health, in coordination with local governments and the Civil Service Commission, shall conduct a competency assessment test upon completion of the Education and Training Program, provided that this requirement shall be waived for those who have served as Barangay Health Workers for five (5) or more years. Only those who have passed the assessment test or have served as BHWs for five years or more will be accredited. The Provincial Health Board, with the participation of TESDA, PhilHealth, and accredited training NGOs, is hereby mandated to carry out the accreditation of Barangay Health Workers.

SEC. 6. Program Cost and Cost Sharing for Local Government Units. — The basic Education and Training Program shall be offered free of charge. Local governments shall adopt a cost-sharing financing scheme with the National Government through the DOH for the implementation of the basic course on Barangay Health Work depending on the income level of the concerned local government units.

SEC. 7. Compensation and Other Incentives. — All accredited Barangay Health Workers shall be entitled to a monthly basic pay of six thousand pesos (PhP6,000.00). They shall likewise be entitled to the incentives and benefits provided under the Magna Carta for Public Health Workers, and shall be covered by all existing statutory benefits such as PAG-IBIG, GSIS and PhilHealth. In addition, they shall be given burial and disability assistance in case of death or if the BHW is afflicted by illness which results to disability, especially if such occurs in the duration of his service. A regular adjustment in monetary and other non-monetary incentives shall be made to help improve the living condition of Barangay Health Workers.

A BHW who has served less than five (5) years upon the passage of this Act will be given a pro-rated amount based on years of service. BHWs will be given first priority in
enlisting for the Education and Training Program.

SEC. 8. Compensation Based on PhilHealth Utilization. – PhilHealth is directed to
develop a compensation package for accredited BHWs based on PhilHealth utilization for
programs including but not limited to social health insurance navigation, maternal neo-natal
child health care and nutrition, primary care packages, rehabilitation and recovery of senior
citizens and Persons with Disability (PWD), provided that compensation received from
PhilHealth will be over and above the monthly basic pay.

SEC. 9. Mandatory Continuing Community-Based Health Education. – The DOH, in
cooperation with TESDA, will formulate a module for Mandatory Continuing Community-
based Health Education (MCCHE). Each accredited BHW will be required to undergo an
MCCHE at least every three (3) years of active service, or as warranted by the DOH.

SEC. 10. Implementing Agencies. – Within one (1) year from the effectivity of this
Act, the TESDA and DOH, with the participation of various health union representatives shall
formulate, finalize and launch the BHW education training program, assessment, and national
certification program. The Department of Interior and Local Government (DILG), DOH,
LGUs, and other appropriate government agencies, with the participation of various health
union representatives, shall provide the Implementing Rules and Regulations necessary to
carry out the provisions of this Act. The Implementing Rules and Regulations shall be
published in the Official Gazette or in a newspaper of general circulation.

SEC. 11. Funding Source. – An initial allocation of Fifty Million Pesos
(PhP50,000,000.00) shall be included in the General Appropriations to support the policies
and objectives under this Act. Congress shall provide subsequent appropriations in the annual
budget of the Department of Health from sin tax revenues.

SEC. 12. Separability Clause. – Should any provision of this Act be declared
unconstitutional, the remaining parts not affected thereby shall remain valid and operational.

SEC. 13. Repealing Clause. – All laws, decrees, executive orders, proclamations,
rules and regulations, or any part thereof which are inconsistent with this Act, are hereby
repealed, amended or modified accordingly.

SEC. 14. Effectivity. – This Act shall take effect fifteen (15) days after its publication
in the Official Gazette or in any two (2) newspaper of general circulation in the Philippines.

Approved,