EXPLANATORY NOTE

The Covid-19 outbreak, which was declared by the World Health Organization (WHO), as a global pandemic on 11 March 2020 has now infected more than fifty-one (51) million individuals all around the world. It has tested the capability and capacity of all health care systems across nations with most of them having reported to be operating at full, if not beyond, capacity due to the overwhelming influx of patients.

This experience is not at all foreign to the Philippines, which, as of date, has already recorded a total of 402,820 cases and still counting. The relative novelty, contagiousness, and lack of vaccine or medication to cure the disease struck a heavy blow on our hospitals and medical facilities to the extent that they pleaded the government to consider a two-week extension of the imposed lockdown in order to ease out the burdens of the medical frontliners, to which the latter readily agreed. While this is indeed a gracious effort to provide our medical health care workers some relief and support as they carry the load of saving the lives of our sick people, there is more that we can do as a nation in lending a helping hand.

By establishing the Medical Reserve Heroes Corps, this legislative measure seeks to considerably address the overwhelming burden faced by our medical frontliners and health care institutions as they do their best to respond to a public health crisis not only to the Covid-19 pandemic that we are presently waging war against but future national health emergencies that our country may encounter as well. By mobilizing our citizens who have adequate knowledge and skills on medicine and other health-related fields,
although not currently practicing as doctors, nurses, or medical professionals, we, as a nation, can face a crisis as big, or even bigger as the one we are currently facing now.

The Medical Reserve Heroes Corps may be called upon and mobilized to assist the national government, its agencies and instrumentalities, and the local government units in their functions related to addressing the immediate medical needs of the public in times of (1) a global pandemic, as determined and declared by the World Health Organization (WHO), and upon the declaration by the State of a national emergency in the country in relation to such WHO declaration; or (2) during a state of war whereby the State is forced to defend itself against foreign or domestic attacks; (3) during such other health-related emergencies, whether national, regional, or local, involving novel illnesses, diseases or public health concerns originating in or endemic to the Philippines and has proven to be spreading so quickly and affecting enough of the population, locally, regionally, or nationally, as to overwhelm the existing medical facilities in the said locality, region, or country even though the global community is not (yet) affected by such novel illness; or (4) other analogous situations that may be considered a national health emergency.

This said, the Medical Reserve Heroes Corps serves as additional human resource that reinforces our health care system so that our country will be better-prepared to face a crisis of such novelty and magnitude as the Covid-19 pandemic, in the near or far future.

This Bill also presents an opportunity for our fellow citizens with medical and/or health-related knowledge and skills to step up, help save lives, bring honor, and defend our country from health-related threats and challenges of magnanimous scope, nature, and impact.

To borrow the wise and historic words of John F. Kennedy, "Ask not what your country can do for you. Ask what you can do for your country." This Bill serves as a challenge to our citizens – a challenge to rise up to the occasion and think of ways to contribute to the public good and awaken our slumbering sense of patriotism. This is a call for unity, "bayanihan", and love for the country carefully balanced with the protection and promotion of the rights of the members of the Corps in their rendering of service/work. Thus, while this bill is a call to action for the people, it also lays down the responsibilities of the government to them – a sort of assurance, so to speak, that our country, more so, our government will also not leave them behind.

ERIC OLIVAREZ
Introduced by REPRESENTATIVE ERIC L. OLIVAREZ

"AN ACT INSTITUTING THE MEDICAL RESERVE HEROES CORPS, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER PURPOSES"

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

Section 1. Short Title. This Act shall be known as the "Medical Reserve Heroes Corps Act of 2020".

Sec. 2 Statement of Policy. It shall be the policy of the State:

a. To institutionalize the vital role of medical and health-related personnel in nation-building;

b. To inculcate nationalism and patriotism among our citizens especially during times of national crisis; and

c. To ensure that the medical and health-related personnel, and those who are pursuing the same are well-trained and well-equipped to supplement and provide support to the existing national and local government response system in times of a global pandemic, declaration of war, and other contingencies of parallel nature.
Sec. 3. Medical Reserve Heroes Corps. It is hereby instituted a Medical
Reserve Heroes Corps to be composed of the following:

a. Duly licensed medical and healthcare workers who are practicing their
profession but are not currently responding to the ongoing medical
emergencies specified in this Act;

b. Health care workers who are not currently practicing their medical or health-
related profession for whatever valid and legal reason such as the practice
of another non health-related profession, engagement in a business, or
personal decision to be unemployed, and other analogous situations;

c. Health care workers who have their licenses suspended or revoked for
reasons not related to intentional crimes committed while in the performance
of their professions;

d. Retired medical and health-related professionals who are still able to serve
physically, mentally, and psychologically, and with no serious comorbidities
in relation to the particular health concern being responded to. Provided, that
these retired medical and health-related professionals are not above 75
years of age, unless the retiree himself/herself volunteers;

e. All persons who have obtained degrees in their respective fields of medicine,
nursing, medical technology, and other health-related fields but have yet to
obtain their respective licenses to practice for reasons such as, but not
limited to, not having taken and/or passed the licensure examinations; and
finally,

f. Fourth year students of medicine, nursing, medical technology and other
health related courses who shall only be tapped for their services when
those above-mentioned persons are still insufficient to respond to the
medical health crisis being faced by the nation;

Sec. 4. Medical Reserve Heroes Corps Mobilization. The Medical Reserve Heroes
Corps may be called upon and mobilized to assist the national government, its
agencies and instrumentalities, and the local government units in their functions
related to addressing the immediate medical needs of the public in times of (1) a
global pandemic as determined and declared by the World Health Organization,
and upon the declaration by the State of a national emergency in the country in
relation to such WHO declaration; or (2) during a state of war whereby the State is
forced to defend itself against foreign or domestic attacks; (3) during such other
health-related emergencies, whether national, regional, or local, involving novel
illnesses, diseases or public health concerns originating in or endemic to the
Philippines and has proven to be spreading so quickly and affecting enough of the
population locally, regionally, or nationally as to overwhelm the existing medical
facilities in the said locality, region, or country, even though the global community
is not (yet) affected by such novel illness; or (4) other analogous situations that may be considered a national health emergency.

In all cases, there must be a showing or, at the very least, a calculated projection that public hospitals and other medical facilities/institutions are, or will imminently be operating beyond their maximum capacity and that the mobilization of the Medical Reserve Heroes Corps is necessary and beneficial to the general public.

Sec. 5. Requests for Deployment. The Medical Reserve Heroes Corps may be called upon and mobilized by the national government through the Department of Health (DOH) to supplement public hospitals and other current human resources of public medical facilities and provide support and assistance to licensed medical doctors and other health-related professionals in their functions related to addressing the medical needs of the public. The heads of public hospitals or medical facilities in need of additional staff and/or the heads of local government units after consultations with medical experts and stakeholders shall submit to the DOH a written request for deployment. The DOH shall evaluate each request objectively and shall have the power to approve or deny the same based on its assessment of the urgency of situation.

The written request for deployment shall contain the following:

1. The exact number of supplemental staff needed and the particular field/area of knowledge they must belong in;

2. The projected duration of deployment of the Medical Reserve Heroes Corps requested which shall not exceed three (3) months for each member called upon for duty unless the member called upon voluntarily extends his/her tour of duty;

3. A clear description of duties for the members requested to be deployed;

4. Signature of the head of the hospital or medical facility, or the local government unit.

Sec. 6. Conscription. The conscription of the members of the Medical Reserve Heroes Corps to be deployed shall always be through public drafting or raffle unless the members themselves volunteer. The Medical Reserve Heroes Corps member shall be required to report for duty two (2) weeks after the receipt of deployment order at the earliest.

Sec. 7. Tour of Duty and Rotational Deployment. Members of the Medical Reserve Heroes Corps shall serve upon an order of deployment by the DOH for as long as their services are needed, provided that the duration of their deployment or tour of duty does not exceed three (3) months at a time. The DOH shall ensure
that the Medical Reserve Heroes Corps serve on a rotational basis. The DOH shall exhaust the list of members of the Medical Reserve Heroes Corps in the particular area of medicine/public health where they are needed as the case may be before ordering a repeat deployment or another tour of duty of the members who have already served for an aggregate amount of three (3) months.

Sec. 8. Exemption. Members of the Medical Reserve Heroes Corps may seek exemption from a deployment order altogether, or only certain duties/tasks specified in the deployment order, if the following conditions apply to them at the time of deployment order:

1. Has an existing serious medical condition and/or comorbidity such that serving on duty would endanger his/her life;

2. Has an existing serious disability that would render him/her ineffective or incapable of performing his/her duties, or such that serving on duty would aggravate his/her disability;

3. A solo parent as defined in the Solo Parents Act of 2020;

4. Pregnant women;

5. Is currently in another country or is in the process of migrating to another country for permanent residency, work, or education purposes. Provided, that the process of migration is already underway by the time that the deployment order was issued. Provided further, that the exemption only starts one (1) month before the date of departure of the person;

6. All doctors and medical and health-related professionals already working in a hospital or medical facility specifically to respond to the ongoing health crisis;

7. Other analogous situations worthy of exemptions as determined by the DOH.

The Heroes Corps member shall file a written request for exemption with the DOH within seven (7) days after receipt of deployment order. In all abovementioned cases, sufficient proof of inability to serve must be shown by the Heroes Corps member. Such proof shall be attached to his/her written request for exemption.

Sec. 9. Leave of Absence When Valid. The Heroes Corps member may be excused from work on a day-to-day basis for valid grounds such as sickness, serious accident, fortuitous events like typhoons, earthquakes, and other analogous situations that render him/her incapable of reporting for work. Proof thereto shall be subject to the rules and regulations and policies of the hospital, medical facility, or site where they are deployed. Provided, that absences on a day-
to-day basis shall be deducted from their three (3) month aggregate service requirement.

Sec. 10. Termination of Deployment. Upon the expiration of the requested period of deployment or tour of duty, the Heroes Corps shall be discharged of its duties. The deployment may also be terminated earlier upon a determination by the DOH, in consultation with requesting local government unit, hospital, or medical facility, that such deployment no longer serves the objectives of this Act or is no longer necessary based on the recent developments related to the crisis.

Sec. 11. Serial Numbers and Registry. All Filipino doctors and other health-related professionals with licenses shall be assigned serial numbers and be listed in the registry of the Medical Reserve Heroes Corps.

Upon completion of their respective health-related degrees, graduates yet to obtain their licenses shall be issued individual serial numbers, which will serve as their identification in case of deployment.

The DOH shall maintain and update a registry/database containing the names of the members of the Heroes Corps, their respective degrees, their serial numbers, addresses, contact details, and such other information as the DOH may determine, in accordance with any applicable privacy laws. The DOH registry/database shall be disaggregated by sex, age, disability (if any), and other relevant factors, whenever applicable.

All members of the Medical Reserve Heroes Corps are required to update their addresses and contact details on file with the DOH as often as necessary. Orders of deployment shall be sent to the addresses and through the email addresses of the members of the Medical Reserve Heroes Corps. In addition, the DOH shall publish the list of members who are ordered for deployment on the DOH website or a website/webpage exclusively dedicated for the Medical Reserve Heroes Corps. The DOH shall also cause to publish said list in newspapers of general circulation for a crisis that is national in scope, or newspapers circulated in the particular locality or region affected, as the case may be.

If the reinforcement still proves to be insufficient after tapping the abovementioned medical health workers, fourth year students taking up medical and other health-related courses may be called on duty as the last line of defense. In such a case, the DOH shall mandate all universities, colleges, and educational institutions to submit the list of their fourth year students enrolled in their medical and other health-related courses. The conscription of fourth year students shall also be by way of public drafting or raffle.

Sec. 12. Compensation. Members of the Medical Reserve Heroes Corps shall receive reasonable salaries for services rendered on a day-to-day basis to
be determined by the DOH, which shall in no case be less than the prevailing
minimum wage plus daily hazard pay equivalent to their respective salary per day.
They shall also be given reasonable accommodations such as means of
transportation or transportation allowance, free food rations or food allowance, and
board and lodging if necessary, among others. The salary of the members shall be
determined based on the category they belong to as enumerated in Section 3 of
this Act, taking into account their educational attainment, skills, and expertise.

Sec. 13. Effect on Employment. Employed members of the Medical
Reserve Heroes Corps called for deployment shall not be dismissed from work nor
shall suffer diminution of any benefit as enjoyed by them prior to their deployment.
Employers of the members of the Medical Reserve Heroes Corps shall pay the
salary differential of the employee during the period of their deployment, to be
computed as follows:

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\text{Salary differential} = \text{regular wage or salary of the employee}
\text{before deployment less reasonable salary excluding the hazard pay}
\text{and other benefits provided by the government to deployed Corps}
\text{member)}
\]

Employed members of the Heroes Corps shall also be extended reasonable
accommodations such as means of transportation or transportation allowance,
free food rations or food allowance, and board and lodging, if necessary, among
others.

Sec. 14. Prohibition on Employers – Employers shall not cause any
groundless and preemptive dismissal, suspension, or diminution of benefits of any
employee in anticipation of an order of deployment by the DOH. Violation of this
Section shall subject the erring employer to the penalties provided in this Act,
without prejudice to the penalties provided in the Labor Code on illegal dismissal.

Sec. 15. Reporting. The DOH shall submit an accomplishment report to the
Office of the President and Congress of the Philippines within one (1) year from
the effectivity of this Act and every two (2) years thereafter regarding the
immediately implementable provisions of this Act such as the strategic plan for
mobilization, the organizational structure of the Corps, the training of the members
of the Medical Research Corps, the establishment and maintenance of the
registry/database, among others.

However, in times of situations mentioned in Section 4 of this Act, which
would call for the mobilization of the Medical Reserve Heroes Corps, the DOH shall
also submit a separate evaluation report within one (1) year from the cessation of
the immediate public health concern being responded to and/or the
renormalization of the capacity of the healthcare system in the country or the
affected region or locality. The report shall contain an assessment of the effectiveness
and efficiency of the mobilization of the Medical Reserve Heroes Corps, best
practices among affected regions, localities, or places, areas for improvement, and
use of funds, among others. Thereafter, a new or revised strategic plan shall be
developed in preparation for another crisis that might occur in the future. Such
strategic plan may be revised as often as necessary based on any developments
in science, law, and other relevant considerations.

In the preparation of the assessment report and strategic plan, the DOH
shall conduct consultations with relevant stakeholders such as the representatives
of the hospital or the medical facility, representatives of the local government units,
the Medical Reserve Heroes Corps members deployed, and the general public
affected by the crisis. In so doing, the DOH shall ensure that the stakeholders to
be consulted are well-represented in terms of sex, age, and disability, among other
factors.

**Sec. 16. School Fees.** Public colleges, universities, and similar learning
institutions covered by Republic Act No. 10931, otherwise known as the Universal
Access to Quality Tertiary Education Act, shall not collect any additional fee from
the members of the Medical Reserve Heroes Corps aside from the normal fees
and charges pertinent to their education and training in the medical and health-
related field.

**Sec. 17. Mandatory School Orientation on the Medical Reserve Heroes
Corps.** All colleges, universities, and educational institutions that offer health-
related degrees are mandated to include a briefing on the Medical Reserve Heroes
Corps as part of their orientation to their incoming undergraduate students.
Furthermore, such colleges, universities, and educational institutions shall
promptly disseminate to its concerned students any new information introduced by
the DOH regarding the Medical Reserve Heroes Corps.

**Sec. 18. Operationalization of Deployment.** The DOH shall promulgate the
specific mechanisms by which deployment is efficiently implemented, including the
organization of the Corps to be deployed, their territorial assignments, their
reasonable compensation, and the means and process of communication and
coordination, among others. The DOH cannot however change the manner of
conscription as provided in this Act, which is by public raffle or draft, unless the
Medical Reserve Heroes Corps member himself/herself volunteers. They may
however improve/develop the raffle or draft system to make it more efficient,
utilizing the current technological tools available.
Sec. 19. Medical Reserve Heroes Corps Fund. A Medical Reserve Heroes Corps Fund is hereby established exclusively for the implementation of the objectives and purposes of this Act. The Office of the President and Congress of the Philippines shall monitor and evaluate the activities, expenditures, and balances of the Fund to determine its sufficiency in responding to future medical health crisis.

Sec. 20. Appropriations. The Medical Reserve Heroes Corps Fund shall be included in the annual General Appropriations Act.

Sec. 21. Audit of Funds. Audit of any and all funds used for the implementation of this Act shall be in accordance with the audit jurisdiction of the Commission on Audit (COA), the Bureau of Internal Revenue (BIR), and the Department of Health (DOH).

Sec. 22. Penalties for Failure to Respond. Failure to respond to the order of deployment despite notice sent to the address and contact details on file with the DOH without any justifiable reason shall, upon conviction in summary proceedings by an appropriate court, be punishable as follows:

1. First offense – Five (5) day imprisonment and two hundred forty (240) hours of community service;
2. Second offense - Ten (10) day imprisonment and four hundred eighty (480) hours of community service;
3. Third offense onwards - One (1) month imprisonment and nine hundred sixty (960) hours of community service;

The penalty of imprisonment shall not be subject to probation and the community service shall be served by the offender at least five (5) hours in a day to be monitored by the barangay officials where they reside or work. The barangay officials shall submit a report regarding the completion of the offender of the community service to the Department of Interior and Local Government (DILG), which, shall in turn, submit the same to the Department of Health (DOH);

Sec. 23. Disciplinary and Corrective Proceedings. Administrative offenses committed by persons involved in or in relation to the implementation of this Act, shall be subject to administrative penalties in accordance with the applicable civil service rules or the rules and regulations of the Professional Regulation Commission (PRC), as the case may be.

Sec. 24. Implementing Rules and Regulations (IRR). The DOH shall promulgate and approve the necessary rules and regulations to implement the objectives and purposes of this Act within ninety (90) days from its effectivity. The
rules and regulations shall include provisions on the structure and organization of
the Corps, mechanisms for effective and efficient mobilization, compensation and
other benefits for the deployed members, and such other matters as the DOH may
decem necessary to fully implement the objectives and purposes of this Act.

Sec. 25. Repealing Clause. All laws, orders, rules and regulations, and other
issuances, or parts thereof, which are inconsistent with this Act are hereby
repealed, amended, or modified accordingly.

Sec 26. Separability Clause. In the event that any provision of this Act or
any portion thereof is declared unconstitutional by a competent court, the other
provisions shall not be affected thereby and shall remain valid and enforceable.

Sec 27. Effectivity Clause. This Act shall take effect after its publication in at
least three (3) newspapers of general circulation.

Approved.