

ANNEX 1

PRIORITY LEGISLATIVE MEASURES

Achieving universal health care for all Filipinos will require the following priority legislation:

1. Amendment of the National Health Insurance Act;
2. Laws for corporate governance of hospitals ;
3. Restructuring of Sin Taxes (Alcohol and Tobacco);
4. Law on Responsible Parenthood; and
5. Amendment of selected laws governing practice of health professionals.

The proposed amendment of the National Health Insurance Act is intended to amend provisions concerning national and local premium counterpart sharing for the Sponsored Program. The amendment will allow for premiums of the poorest families to be paid in full by the national government. The amendments will also provide for the inclusion of the second poorest NHTS-PR families and LGU-identified poor into the Sponsored program through a three-way premium sharing scheme between the national and local governments and individual families.

On the other hand, specific laws converting public facilities into corporate hospitals will facilitate participation of individual hospitals into PPP arrangements. These specific laws will provide a corporate nature to the facility, define its mandate as a government corporation, provide for a governing board and allow the facility to enter into contracts, mobilize its assets as well as generate, retain and spend revenues to limit budgetary dependence and promote long term sustainability.

The restructuring of sin taxes for alcohol and tobacco will require an amendment of the existing Sin Tax Law (RA 9334). The amendments will allow maximizing revenues from sin taxes and making price levels high enough to discourage cigarette and alcohol consumption. The restructuring is expected to generate some *Php* 60B per year, of which a portion shall be earmarked to finance universal health care investments.

A law on responsible parenthood, otherwise known as the RH Bill, will mandate the provision of modern FP services nationwide instead of it being an optional service subject to the political preference of government officials and health providers. The law will ensure explicit and sustained provision of modern FP and related services and effectively shield the family planning program from the annual uncertainty of the budget process.

Lastly, amending the specific laws governing health professions is intended to allow for flexibilities in the exercise of specific clinical functions to pave the way for substitution (e.g. Nurses or midwives as physician substitutes for specific functions) and allow other health professionals to be compensated by PhilHealth for services rendered. In particular, the flexibilities are needed to expand the reach of critical services such as maternal care especially in underserved areas. For example, midwives are currently prevented by the Midwifery Act and the Medical Act to administer lifesaving interventions such as IV therapy (i.e. administration of antibiotics). As a result, midwives who perform these procedures either need to be supervised by a physician or run the risk of being held legally-liable or not getting reimbursed by PhilHealth.

An alternative to passing specific pieces of legislation would be to pass a specific law on universal health care itself. This law on universal health care can be made to contain the specific provisions necessary to achieve the goals of specific amendments or new legislation as stated above