RESOLUTION NO. 136  
Series of 2021  
September 03, 2021

**WHEREAS,** Section 15 Article II of the 1987 Constitution states that the State shall protect and promote the right to health of the people and instill health consciousness among them;

**WHEREAS,** Section 2(b) of Executive Order No. 168 (s.2014) mandates the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF) to prevent and/or minimize the entry of suspected or confirmed patients with emerging infectious diseases into the country;

**WHEREAS,** on September 16, 2020, the President issued Proclamation No. 1021 (s.2020) extending the period of the State of Calamity throughout the Philippines until September 21, 2021;

**WHEREAS,** the Department of Health (DOH), the University of the Philippines-Philippine Genome Center (UP-PGC), and the University of the Philippines-National Institutes of Health (UP-NIH) biosurveillance have detected B.1.1.7 (Alpha), B.1.351 (Beta), and P.1 (Gamma) variants of SARS-CoV-2 in the Philippines. The DOH, UP-PGH, and UP-NIH have likewise confirmed the presence of the B.1.617 (Delta) variant that was first detected in India;

**WHEREAS,** the continued implementation of proactive measures and restrictions must be put in place to slow down the surge in COVID-19 cases, stop further spread of variants, buy time for the health system to cope, and to protect more lives;

**NOW, THEREFORE, BE IT RESOLVED,** as it is hereby resolved, that the IATF approves the following:

A. Upon the recommendations of the sub-Technical Working Group on Data Analytics, the IATF adopts the “Yellow” and “Red” classifications, in addition to the “Green List” for countries/territories/jurisdictions based on their respective incidence rates and case counts as primary criteria, and testing data as secondary criteria:
1. “Yellow List” countries/jurisdictions/territories are those classified by the IATF as “Moderate Risk” countries/jurisdictions/territories, upon recommendation of the sub-Technical Working Group on Data Analytics, based on the following metrics: (i.) for populations greater than 100,000, the incidence rate (cumulative new cases over the past 28 days per 100,000 population) shall be 50 to 500; and (ii.) For populations less than 100,000, the COVID-19 case counts (cumulative new cases over the past 28 days) shall be 50 to 500, and testing rate of tests over the past 28 days per 100,000 population, as prescribed by its Technical Advisory Group;

2. The inbound international travel of all persons, regardless of vaccination status, coming from or with travel history within the last fourteen (14) days prior to arrival in the country from “Yellow List” countries/jurisdictions/territories, to any port of the Philippines, shall be governed by the following entry, testing and quarantine protocols:

   i. All arriving travelers shall undergo fourteen (14) day quarantine upon arrival. The first ten (10) days of which shall be observed in a quarantine facility, with the remainder to be completed under home quarantine in their respective local government units of destination;

   ii. Reverse Transcription Polymerase Chain Reaction (RT-PCR) testing shall be conducted on the seventh day with Day 1 being the day of arrival. Notwithstanding a negative test result, the arriving traveler shall complete the facility-based quarantine period of ten (10) days;

   iii. The Bureau of Quarantine shall ensure strict symptom monitoring while in the facility quarantine for 10 days; and

   iv. The foregoing shall be subject to special protocols approved by the IATF or the Office of the President for certain classes of travelers or ports of origin.

3. “Red List” countries/jurisdictions/territories are those classified by the IATF as “High Risk” countries/jurisdictions/territories, upon
recommendation of the sub-Technical Working Group on Data Analytics, based on the following metrics: (i.) for populations greater than 100,000, the incidence rate (cumulative new cases over the past 28 days per 100,000 population) shall be more than 500; and (ii.) For populations less than 100,000, the COVID-19 case counts (cumulative new cases over the past 28 days) shall be more than 500, and testing rate of tests over the past 28 days per 100,000 population, as prescribed by its Technical Advisory Group;

4. The inbound international travel of all persons, regardless of vaccination status, coming from or who have been to “Red List” countries/jurisdictions/territories to any port of the Philippines shall not be allowed. Only Filipinos returning to the country via government-initiated repatriation, non-government-initiated repatriation, and Bayanihan Flights may be allowed entry subject to the following entry, testing and quarantine protocols:

   i. All arriving travelers shall undergo fourteen (14) day quarantine upon arrival. The first ten (10) days of which shall be observed in a quarantine facility, with the remainder to be completed under home quarantine in their respective local government units of destination;

   ii. Reverse Transcription Polymerase Chain Reaction (RT-PCR) testing shall be conducted on the seventh day with Day 1 being the day of arrival. Notwithstanding a negative test result, the arriving traveler shall complete the facility-based quarantine period of ten (10) days;

   iii. The Bureau of Quarantine shall ensure strict symptom monitoring while in the facility quarantine for ten (10) days;

   iv. The foregoing shall be subject to special protocols approved by the IATF or the Office of the President for certain classes of travelers or ports of origin;
v. All passengers, whether Filipinos or foreigners, merely transiting through a Red List country/jurisdiction/territory shall not be deemed as having come from or having been to said country/jurisdiction/territory if they stayed in the airport the whole time and were not cleared for entry into such country/jurisdiction/territory by its immigration authorities;

vi. Upon arrival in the Philippines, passengers covered by the immediately preceding paragraph shall comply with existing testing and quarantine protocols.

B. Travel restrictions currently in place in India, Pakistan, Bangladesh, Sri Lanka, Nepal, United Arab Emirates, Oman, Thailand, Malaysia, and Indonesia shall be lifted effective 06 September 2021. International travelers coming from the aforementioned countries shall comply with the appropriate entry, testing and quarantine protocols depending on their “Listing” as herein approved.

C. The recommendations of the National Task Force Against COVID-19 Task Group on Vaccine Evaluation and Selection are approved, the specifics of which are as follows:

1. Due to the vast number of similar studies targeting the general population, and in consideration of the goal to accelerate the implementation of the National COVID-19 vaccination program in priority adult groups, the Task Group on Vaccine Evaluation and Selection with concurrence from the Food and Drugs Administration, the primary body responsible for the regulation for clinical trials, recommends for sponsors/trialists to shift their focus towards people of different age groups and people with comorbidities, or the immunocompromised, to be more inclusive in addressing the COVID-19 pandemic;

2. Due to the need to generate evidence for the use of vaccines in specific populations, priority is given to Phase 3 clinical trials that will enroll volunteers in any of the following special populations:
   a. Pediatric age groups (6 months – 12 years old)
   b. Elderly (>60 years old)
   c. Pregnant mothers
   d. Patients with immunodeficiency (i.e. HIV, cancer, post-transplant recipients, etc.)
e. Patients with autoimmune diseases
f. Patients with renal disorders (i.e. CKD, on hemodialysis, etc.)
g. Patients with chronic respiratory diseases (i.e. asthma, COPD, etc.)

Application for conduct of new clinical trials in the general healthy adult populations may also be considered if these vaccines addresses the impact of new variants, such as the vaccine is a:

a. Third dose of a vaccine with Emergency Use Authorization (EUA) in the country, or
b. Second generation COVID-19 vaccines under EUA.

3. The FDA, as one of the major stakeholders undertaking the evaluation of COVID-19 trials, had expressed their support in these recommendations with consideration of the following:

a. Adequate measures included in the protocol of applicants that will ensure protection of the rights, safety, and well-being of trial participants in accordance with the International Council on Harmonization-Good Clinical Practice;

b. Applicants to provide a risk/benefit considerations tailored to the characteristics and need of a specific population;

c. Subject protection plan carefully designed for every group of participants; and

d. Ethical considerations related to informed consent for the vulnerable populations.

D. The soft launch of the VaxCertPH will be on 06 September 2021. The initial phase of implementation of the VaxCertPH will prioritize requests coming from Overseas Filipino Workers (OFWs), and Filipinos who will be departing from the Philippines for international travel with place of residence indicating National Capital Region and Baguio City. The VaxCertPH will be opened to the general public and for other purposes at a later time based on the recommendations of the VaxCertPH Sub-Technical Working Group to the IATF. The Department of Information and Communications Technology is directed to ensure that private establishments be given access with the public key in order to provide a manner for confirming authenticity of vaccination certificates purportedly obtained using VaxCertPH.
RESOLVED FURTHER, that the Chairperson and the Co-Chairperson shall be duly authorized to sign this Resolution for and on behalf of the Inter-Agency Task Force.

APPROVED during the 136th Inter-Agency Task Force Meeting, as reflected in the minutes of the meeting, held this September 03, 2021, via video conference.

KARLO ALEXEI B. NOGRALES
Secretary, Office of the Cabinet Secretariat
IATF Co-Chairperson
CERTIFICATION

This is to certify that:

1. I am presently an Undersecretary of the Department of Health;

2. I am the Head of the Secretariat of the Inter-Agency Task Force (IATF) on the Management of Emerging Infectious Diseases created under Executive Order No. 168, (s.2014) and chaired by the Department of Health (DOH);

3. The IATF Secretariat holds office in the DOH Main Office, San Lazaro Compound, Tayuman, Sta. Cruz, Manila;

4. I am the custodian of the records of the IATF, including the Minutes of Meetings and Resolutions;

5. In the Regular Meeting of the IATF held on 03 September 2021 via teleconference during which a quorum was present and acted throughout, IATF Resolution No. 136 was unanimously approved and adopted;

6. The foregoing resolution has been signed by Secretary Karlo Alexei B. Nograles upon the authority of the IATF Members;

7. The aforesaid resolution has not been altered, modified nor revoked and the same is now in full force and effect:

8. I am executing this Certification for whatever legitimate purpose this may serve.

IN WITNESS WHEREOF, I have hereunto affixed my signature this 3rd day of September 2021, Manila.

ATTY. CHARADE B. MERCADO-GRANDE
Undersecretary of Health
Head Secretariat, IATF