AN ACT PROVIDING POLICIES AND PRESCRIBING PROCEDURES TO PREVENT, CONTROL, AND RESPOND TO INFECTIOUS DISEASES, AMENDING FOR THE PURPOSE REPUBLIC ACT NO. 11332, OTHERWISE KNOWN AS THE MANDATORY REPORTING OF NOTIFIABLE DISEASES AND HEALTH EVENTS OF PUBLIC HEALTH CONCERN ACT, AND FOR OTHER PURPOSES

EXPLANATORY NOTE

COVID-19, a new strain of the coronavirus first identified in Wuhan, Hubei, China in December 2019, has infected more than nineteen million individuals and has claimed the lives of more than seven hundred thousand individuals over the past months all over the world. In the Philippines alone, as of August 12, 2020, COVID-19 has infected more than one hundred forty thousand people (143,749 confirmed cases) and has claimed the lives of more than two thousand four hundred (2,404 deaths). Given the rapid spread of the disease, the unprecedented increase in the number of infected cases, the World Health Organization (WHO) has already declared COVID-19 as a pandemic.

The COVID-19 pandemic brought lasting social and economic losses to the government, the private sector and even to individual Filipinos. It has underscored policy gaps that must be immediately addressed as we adjust to the changes and disruptions caused by the pandemic. With this, there is then a need to establish policies, processes and organized response for effective and immediate measures to analyze, address and prevent threats to public health and safety.

This bill seeks to provide additional measures to preserve the health of Filipino people, ensure health promotion and respond effectively in the event of the emergence or reemergence of an infectious disease.

In view of the foregoing, immediate passage of this bill is earnestly sought.

LOREN LEGARDA

AN ACT PROVIDING POLICIES AND PRESCRIBING PROCEDURES TO PREVENT, CONTROL, AND RESPOND TO INFECTIOUS DISEASES, AMENDING FOR THE PURPOSE REPUBLIC ACT NO. 11332, OTHERWISE KNOWN AS THE MANDATORY REPORTING OF NOTIFIABLE DISEASES AND HEALTH EVENTS OF PUBLIC HEALTH CONCERN

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

SECTION 1. Section 4 of Republic Act No. 11332, otherwise known as the Mandatory Reporting of Notifiable Diseases and Health Events of Public Health Concern Act is hereby amended as follows:

Section 4. Objectives. – This Act shall have the following objectives:

(a) To continuously develop and upgrade the list of nationally notifiable diseases and health events of public health concern with their corresponding case definitions and laboratory confirmation;

(b) To ensure the establishment and maintenance of relevant, efficient and effective disease surveillance and response system at the national and local levels;

(c) To expand collaborations beyond traditional public health partners to include others who may be involved in the disease surveillance and response, such as agricultural agencies, veterinarians, environmental
agencies, law enforcement entities, and transportation and communication agencies, among others;
(d) To provide accurate and timely health information about notifiable diseases, and health-related events and conditions to citizens and health providers as an integral part of response to public health emergencies;
(e) To establish effective mechanisms for strong collaboration with national and local government health agencies to ensure proper procedures are in place to promptly respond to reports of notifiable diseases and health events of public health concern, including case investigations, treatment, control and containment, including APPROPRIATE RESTRICTIONS ON DOMESTIC AND INTERNATIONAL TRAVEL, AND follow-up activities;
(f) To ensure that public health authorities have the statutory and regulatory authority to ensure the following:

1) Mandatory reporting of reportable diseases and health events of public health concern;
2) Epidemic/outbreaks and/or epidemiologic investigation, case investigations, patient interviews, review of medical records, contact tracing, specimen collection and testing, risk assessments, laboratory investigation, population surveys, and environmental investigation;
3) RAPID quarantine and isolation; and,
4) Rapid containment and implementation of measures for disease prevention and control;
(g) To provide sufficient funding to support operations needed to establish and maintain epidemiology and surveillance units at the DOH, health facilities and local government units (LGUs); efficiently and effectively investigate outbreaks and health events of public health concern; validate, collect, analyze and disseminate disease surveillance information to relevant agencies or organizations; and implement appropriate response;

(h) To require public and private physicians, allied medical personnel, professional societies, hospitals, clinics, health facilities, laboratories, pharmaceutical companies, private companies and institutions, workplaces, schools, prisons, ports, airports, establishments, communities, other government agencies, and nongovernment organizations (NGOs) to actively participate in disease surveillance and response, AND PREVENTION MEASURES; [and]

(i) To respect to the fullest extent possible, the rights of people to liberty, bodily integrity, and privacy while maintaining and preserving public health and security[.];

(J) TO PROMOTE AND MAINTAIN PHYSICAL AND MENTAL HEALTH, PROTECT FRONTLINE HEALTH WORKERS AND VULNERABLE POPULATIONS, BY PRESCRIBING NECESSARY POLICIES IN THE EVENT OF THE EMERGENCE OR RE-EMERGENCE OF INFECTIONOUS DISEASES;

(K) TO ESTABLISH AND IMPLEMENT POLICIES AND MEASURES TO CONTROL THE SPREAD AND PREVALENCE OF INFECTIOUS DISEASES;
(L) TO CONTINUOUSLY PROVIDE AND DEVELOP INNOVATIVE APPROACHES TO ADDRESS THE NEEDS OF THE PUBLIC WHILE ADAPTING TO THE PREVAILING CIRCUMSTANCES; AND,
(M) TO ESTABLISH EFFECTIVE MECHANISMS AND INFORMATION SYSTEMS TO ACCURATELY AND IMMEDIATELY RESPOND TO EMERGING AND RE-EMERGING INFECTIOUS DISEASES WITHIN AND OUTSIDE THE COUNTRY.

Section 2. A new section 6 shall be inserted, to read as follows and the succeeding sections shall be renumbered accordingly:

SECTION 6. SURVEILLANCE AND MONITORING – THE DEPARTMENT OF HEALTH (DOH) SHALL ENSURE THE PREVENTION AND CONTROL OF INFECTIOUS DISEASES BY PROVIDING AND DISSEMINATING RELEVANT INFORMATION THROUGH CONSTANT SURVEILLANCE AND MONITORING OF EMERGING AND RE-EMERGING INFECTIOUS DISEASES, WHICH MAY POSE THREATS TO PUBLIC HEALTH, SAFETY AND SECURITY.

THE DOH SHALL PROVIDE THE PUBLIC TIMELY INFORMATION PERTAINING TO HEALTH CONCERNS AND PRESENT RESPECTIVE PARTICULARITIES AND CASE DEFINITIONS. IT SHALL LIKewise CONDUCT MASS TESTING FOR EARLY PREVENTION AND CONDUCT PERIODIC REPORTING ON RESULTS FOR EFFECTIVE RISK COMMUNICATION AND IMMEDIATE RESPONSE AND MITIGATION OF SAID THREAT TO PUBLIC HEALTH.
Section 3. A new section 7 shall be inserted, to read as follows and the succeeding sections shall be renumbered accordingly:

SECTION 7. PREPAREDNESS, PREVENTION AND CONTROL - THE FOLLOWING MEASURES SHALL BE PERFORMED UPON CONFIRMATION AND VERIFICATION OF THE EMERGENCE OR RE-EMERGENCE OF AN INFECTION DISEASE WITHIN OR OUTSIDE THE COUNTRY.

a. THE DOH AND ITS LOCAL COUNTERPARTS SHALL BE MANDATED TO PROVIDE NATIONAL AND LOCAL HEALTH STRATEGIES AND MEASURES TO PREPARE AND CURB THE SPREAD OF THE INFECTION DISEASE;

b. THE DOH SHALL PUBLISH A LIST OF EXPERTS AND MEDICAL INSTITUTIONS ON INFECTION DISEASES TO BE CONSULTED AND MOBILIZED;

c. THE DOH SHALL ENSURE THAT THERE IS AN AMPLE SUPPLY OF MEDICAL EQUIPMENT, PROTECTIVE EQUIPMENT, AND MEDICINES IN ALL HOSPITALS, RURAL HEALTH UNITS, AND MEDICAL FACILITIES;

d. THE DOH SHALL PROVIDE STRATEGIES TO ENSURE THE DIAGNOSTIC AND TREATMENT CAPACITY OF HOSPITALS, RURAL HEALTH UNITS, AND MEDICAL FACILITIES TO HANDLE THE SURGE IN CASES, WHILE ENSURING CONTINUITY OF ESSENTIAL HEALTH SERVICE DELIVERY;

e. THE DOH SHALL LEAD THE PROMPT CONDUCT OF RISK ASSESSMENT TO IDENTIFY HIGH-RISK AND
VULNERABLE POPULATIONS, AND CONTINGENCY PLANNING, IN COORDINATION WITH THE NATIONAL DISASTER RISK REDUCTION COUNCIL (NDRRMC), DEPARTMENT OF INTERIOR AND LOCAL GOVERNMENT (DILG) AND OTHER GOVERNMENT INSTRUMENTALITIES. THE CONTINGENCY PLAN SHALL INCLUDE MEASURES TO RECONFIGURE HEALTH FACILITIES AND REPURPOSE PUBLIC AND PRIVATE FACILITIES TO PROVIDE SAFE AREAS FOR EMERGENCY CASE MANAGEMENT, QUARANTINE, AND ISOLATION;

f. THE DOH SHALL ISSUE PARAMETERS AND GUIDELINES ON CASE REPORTING, MONITORING AND CASE HANDLING AS WELL AS ESTABLISH HEALTH AND SAFETY PROTOCOLS. LGUS AND GOVERNMENT AGENCIES AND INSTRUMENTALITIES ARE REQUIRED TO COMPLY WITH SUCH GUIDELINES;

g. THE DOH AND ITS LOCAL COUNTERPART SHALL ESTABLISH INTEROPERABLE MONITORING MECHANISMS AND INFORMATION SYSTEMS TO CONTINUOUSLY MONITOR POTENTIAL AND CONFIRMED CASES OF THE INFECTIOUS DISEASE, LOCALLY AND NATIONALLY.

h. THE DOH SHALL EMPLOY THE USE OF TECHNOLOGICAL SOLUTIONS, WHERE POSSIBLE, SUCH AS TELEMEDICINE, TO MONITOR PATIENTS AND
PROMOTE REMOTE CONSULTATION, TO MINIMIZE RISK TO PATIENTS

i. THE NATIONAL GOVERNMENT AND LGUS SHALL CONDUCT PREVENTIVE MEASURES AGAINST THE INFECTIOUS DISEASE IN ACCORDANCE WITH EXISTING LAWS AND REGULATIONS. THE SECRETARY OF HEALTH, PROVINCIAL GOVERNOR, OR CITY OR MUNICIPAL MAYOR SHALL UNDERTAKE THE FOLLOWING PREVENTIVE MEASURES, IN PART OR IN FULL, TO PREVENT THE SPREAD OF ANY INFECTIOUS DISEASE;

i. TO RESTRICT OR PROHIBIT GATHERINGS, SUCH AS ASSEMBLIES, RELIGIOUS CEREMONIES, OR ANY OTHER MASS GATHERINGS;

ii. TO PARTIALLY OR TEMPORARILY CLOSE NON-ESSENTIAL PLACES OF WORK, BUSINESS AND EDUCATIONAL ESTABLISHMENTS;

iii. TO PARTIALLY OR FULLY RESTRICT TRAVEL WITHIN THEIR LOCALITY, OR REGULATE TRAVEL BY LAND, SEA OR AIR;

iv. TO PARTIALLY OR FULLY CLOSE ALL AIRPORTS AND SEAPORTS;

v. TO ORDER THE SANITATION AND DISINFECTION OF FACILITIES BUILDINGS OR COMMUNITIES, AS MAY BE DEEMED NECESSARY;
vi. TO DESIGNATE MEDICAL FACILITIES OR BUILDINGS AS LOCAL ISOLATION AND TREATMENT CENTERS;

vii. TO ESTABLISH SURVEILLANCE UNITS AND MECHANISMS, FROM THE BARANGAY TO THE PROVINCIAL LEVEL, TO CAPTURE ACCURATE AND TIMELY DATA NECESSARY TO PREVENT, MONITOR AND CURB THE SPREAD OF THE DISEASE; AND,

viii. TO DESIGNATE OR CONTRACT PERSONNEL TO ASSIST IN CONTACT TRACING, TESTING, RISK COMMUNICATION, COMMUNITY ENGAGEMENT, HEALTH PROMOTION, OR OTHER PUBLIC HEALTH INTERVENTIONS;

j. THE PHILIPPINE NEWS AGENCY SHALL ISSUE CONSTANT RELEVANT INFORMATION ON THE STATUS OF THE INFECTIOUS DISEASE.

Section. 4. A new section 8 shall be inserted, to read as follows, and the succeeding sections shall be renumbered accordingly:

SECTION 8. HANDLING OF POTENTIAL AND CONFIRMED CASES.

THE FOLLOWING MEASURES SHALL BE OBSERVED:

a. THE DOH AND LGUS SHALL IMMEDIATELY IDENTIFY AND DESIGNATE HOSPITALS, RURAL HEALTH UNITS, OR MEDICAL FACILITIES OPERATING SOLELY TO HANDLE AND TREAT THE INFECTIOUS DISEASE;

b. THE LGU AND HEALTH OFFICES SHALL ISSUE A LIST OF POTENTIAL CARRIERS OF THE INFECTIOUS DISEASE, BASED ON THE GUIDELINES PRESCRIBED BY THE DOH;
c. THE LGU SHALL PREPARE ITS OWN PANDEMIC PREPAREDNESS PLAN ALIGNED WITH THE NATIONAL PLAN;

d. IDENTIFIED POTENTIAL CARRIERS ARE DIRECTED TO UNDERGO QUARANTINE PROCEDURES IN IDENTIFIED HOSPITALS UNDER THE SUPERVISION OF LOCAL HEALTH AUTHORITIES AND MEDICAL PERSONNEL;

E. UPON VERIFICATION OF THE CONFIRMED CARRIER, CONTACT-TRACING SHALL BE IMMEDIATELY CONDUCTED BY THE DOH IN COORDINATION WITH LOCAL HEALTH AUTHORITIES. THE FOLLOWING MAY BE USED FOR THE EFFICIENT CONDUCTION OF CONTACT-TRACING;

1. PATIENT INTERVIEWS AND QUESTIONNAIRES; AND,

2. LOCAL AUTHORIZED HEALTH PERSONNEL SHALL USE DATA FROM THE GPS AND LOCATION FROM THE SOCIAL MEDIA SITES OF THE PATIENT FOR EFFICIENT CONTACT-TRACING. THE USE OF DATA IS ONLY FOR THE SOLE PURPOSE OF SURVEILLANCE OF THE DISEASE AND CONTACT TRACING AND IS SUBJECT TO DATA SECURITY AND CONFIDENTIALITY MEASURES.

F. AVAILABLE TECHNOLOGY INCLUDING, BUT NOT LIMITED TO, THE USE OF SMARTPHONES AND TELECOMMUNICATION SERVICES SHALL BE UTILIZED IN MONITORING THE MOVEMENT AND HEALTH CONDITIONS OF THE POTENTIAL AND CONFIRMED CARRIER.

G. PRIVATE BUSINESSES OPERATING IN PUBLIC PLACES SHALL BE REQUIRED TO COLLECT DATA FROM ITS
PATRONS AND VISITORS FOR PURPOSES FACILITATING CONTACT TRACING AND NOTIFICATION, SUBJECT TO EXISTING RULES AND REGULATIONS ON DATA SECURITY AND PRIVACY. EMPLOYERS ARE RESPONSIBLE FOR CONTACT TRACING & NOTIFICATION IN THE WORKPLACE, WHILE SCHOOL ADMINISTRATORS ARE RESPONSIBLE FOR CONTACT TRACING & NOTIFICATION IN THE SCHOOL ENVIRONMENT.

Section 5. A new section 9 shall be inserted to read as follows and the succeeding sections shall be renumbered accordingly:

SECTION 9. INCENTIVES. – PRIVATE GROUPS AND ENTITIES ENGAGED IN SURVEILLANCE AND MONITORING SHALL BE GRANTED INCENTIVES INCLUDING, BUT NOT LIMITED TO, EXEMPTION FROM PAYMENT OF RELEVANT TAXES, AND OTHER INCENTIVES AS MAY BE PROVIDED UNDER EXISTING LAWS AND REGULATIONS.

Section 6. Separability Clause. – If, for any reason, any section or provision of this Act is declared as unconstitutional or invalid, the other sections or provisions hereof shall not be affected thereby.

Section 7. Repealing Clause. – All laws, ordinances, rules and regulations and other issuances or parts thereof which are inconsistent with this Act are hereby repealed or modified accordingly.

Section 8. Effectivity Clause. – This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved,