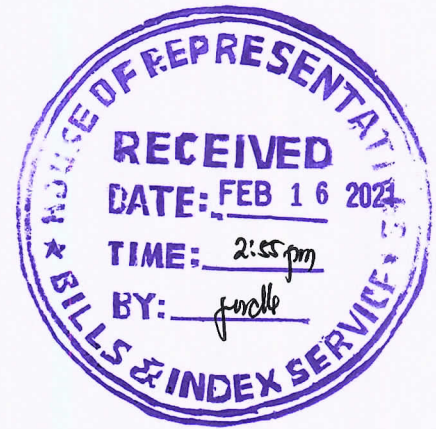


Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City

EIGHTEENTH CONGRESS
Second Regular Session

HOUSE BILL NO. 8739



Introduced By Representative: **ALLAN BENEDICT S. REYES**

EXPLANATORY NOTE

According to a 2018 study by the Philippine Institute for Development Studies (PIDS), the Philippines is on its way to becoming an “ageing society” in 2032. This means that in eleven (11) years, Filipinos aged 65 years old and older will make up seven per cent (7%) of our country’s total population. In 2069, this figure is even expected to go up to fourteen per cent (14%), thus, making the Philippines an “aged society.”¹ This rapid population ageing will naturally lead to changing demands to health care systems.² These systems are thus expected to accommodate care for the elderly for which they need medical facilities that will cater to the unique health conditions of this vulnerable sector of our society. As we may all know, an ageing population tends to have a higher prevalence of chronic diseases, physical disabilities, mental illnesses and other co-morbidities. Thus, the health needs and health-related problems of elderly people cannot be viewed in isolation.³

Geriatrics is the branch of medicine that focuses on prevention, diagnosis, and treatment of diseases in the aged and on the socio-economic matters that affect health care services for elderly persons. Geriatrics research and clinical practice encompass both persons residing with or without caregivers at home and those receiving clinical care at hospitals and nursing facilities. In addition to managing the care of aged patients, the key goals of geriatric medicine include training medical students, physicians, and other health care professionals in geriatric issues as well as researching the aging process and the accompanying conditions affecting the elderly.⁴

On 27 May 2010, the National Center for Geriatric Health (NCGH) was inaugurated as part of former President Gloria Macapagal Arroyo's social safety net and health services programs which aim to provide for the special needs of senior citizens nationwide.⁵ Up to this

¹ Ageing in the Philippines available at <https://www.mc.edu.ph/alumni/news/ArticleID/1509/Ageing-in-the-Philippines> (last accessed 7 February 2021).

² The challenge for health care systems available at https://www.who.int/ageing/publications/alc_fs_ageing_policy.pdf (last accessed 7 February 2021).

³ Shrivastava, S. R., Shrivastava, P. S., & Ramasamy, J. (2013). Health-care of Elderly: Determinants, Needs and Services. *International journal of preventive medicine*, 4(10), 1224–1225 available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3843313/citedby/> (last accessed 7 February 2021).

⁴ The impact of a literature consult service on geriatric clinical care and training in falls prevention available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2268225/#i1536-5050-096-02-0088-b8> (last accessed 7 February 2021).

⁵ Nat'l Geriatric Health: The need for an institutionalized center available at <https://www.pna.gov.ph/articles/1070895> (last accessed 7 February 2021).

date, however, the NCGH is still not operational because there is no law which allows it to operate.⁶ NCGH remains to be an out-patient department (OPD) under Jose Reyes Memorial Center. A number of bills have already been sponsored to convert the NCGH into a corporate body to be attached to the Department of Health (DOH) but none of these bills have been passed as of writing.

Since NCGH is located in Manila, elderly in the provinces may have difficulty availing of its programs and services. Hence, there is need to bring geriatric care closer to our senior citizens, especially to those who reside in far-flung areas, through the various local government units (LGUs). This can be more effectively done through the establishment of geriatric special-care units in our existing public hospitals, instead of constructing new establishments. After all, no less than Article XIII, Section 11 of the Constitution provides that we must adopt an integrated and comprehensive approach to health development which shall endeavor to make health and other social services available to all the people at affordable cost, especially for the vulnerable members of society like the elderly.

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



HON. ALLAN BENEDICT S. REYES
Representative
3rd District, Quezon City

⁶ Id. Nat'l Geriatric Health: The need for an institutionalized center available at <https://www.pna.gov.ph/articles/1070895> (last accessed 7 February 2021).
⁶ Id.

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HOUSE BILL NO. 8739

Introduced By Representative: **ALLAN BENEDICT S. REYES**

**AN ACT MANDATING THE ESTABLISHMENT OF GERIATRIC SPECIAL CARE
UNITS IN ALL PUBLIC HOSPITALS AND APPROPRIATING FUNDS THEREFOR**

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

1
2 **SECTION 1. Short Title.** - This Act shall be known as the ***“Geriatric Special Care***
3 ***Units Act of 2021.”***
4

5
6 **SECTION 2. Coverage.** - Except for specialty hospitals catering to other non-elderly
7 sectors, all Metro Manila and regional hospitals under the Department of Health (DOH)
8 shall have Geriatric Special Care Units that will provide exceptional patient care, both in-
9 patient and out-patient, as well as research on aging and training for physicians and other
10 health care professionals, to address the specific medical needs of the elderly.
11

12
13 **SECTION 3. Geriatric Special Care Units Fund.** - Funding for the establishment of
14 Geriatric Special Care Units shall be sourced from the DOH under the General
15 Appropriations Act. Disbursements from the said Fund shall be subject to the usual
16 accounting and budgeting rules and regulations.
17

18
19 **SECTION 4. Implementing Rules and Regulations.** - Within sixty (60) days from the
20 promulgation of this Act, the necessary rules and regulations for the proper implementation
21 of its provisions shall be formulated by the Department of Health (DOH) in coordination
22 with all the stakeholders and covered establishments and institutions.
23

24
25 **SECTION 5. Repealing Clause.** - All laws, executive orders, administrative orders,
26 rules, regulations, decrees, and other issuances or parts thereof, which are inconsistent
27 with the provisions of this Act are hereby revoked, repealed, or modified accordingly.
28

29
30 **SECTION 6. Separability Clause.** - If any provision of this Act is held
31 unconstitutional or invalid, the other provisions not affected thereby shall continue in
32 operation and remain in full force and effect.

1
2 **SECTION 7. *Effectivity Clause.*** – This Act shall take effect fifteen (15) days after
3 its publication the *Official Gazette* or in the two (2) national newspaper of general
4 circulation.
5

6 Approved,

1