AN ACT
GRANTING CONTINUING COVID-19 BENEFITS TO PUBLIC AND PRIVATE
HEALTH WORKERS AND BARANGAY HEALTH WORKERS DURING THE
PERIOD OF THE COVID-19 PANDEMIC, PROVIDING FUNDS THEREFOR
AND FOR OTHER PURPOSES

EXPLANATORY NOTE

Continuing benefits for public and private health workers and Barangay Health Workers (BHW) during the COVID-19 Pandemic is critical in the fight against the dreaded disease to protect our health frontliners and, in turn, to protect the general populace. Ultimately, this will redound to national economic recovery.

Under Republic Act No. 11494 or the Bayanihan to Recover as One Act ("Bayanihan 2"), Congress provided several benefits for our health workers, which include:

- P15,000 each for health workers who contract mild or moderate COVID-19; P100,000 for severe or critical cases; and in case of death, the amount of P1 million to the heirs;
- Monthly special risk allowance for all public and private health workers directly catering to or in contact with COVID-19 patients;
- Actual hazard duty pay for all health workers serving in the front line; and,
- Life insurance, accommodation, transportation and meals to all public and private health workers.

The aforementioned law, however, did not explicitly include BHWs. As such, our BHWs have been put in a situation where in they have to practically beg for their rightful benefits, incentives and protection as frontline health workers who are very much at risk.

The problem lies in the fact that BHWs are not included in the definition of public health workers under Republic Act No. 7305 or the Magna Carta of Public Health Workers. Under Republic Act 7160 or the Local Government Code, BHWs are “volunteers” and because of this “legal” status, our BHWs during this COVID-19 pandemic have been treated as “second class citizens” who are not entitled to the same benefits that other health frontliners receive.
Under present laws and guidelines issued by the government, for example, only BHWs who are rendering active duty in hospitals and COVID facilities are entitled to special risk allowance or SRA, yet, many are not receiving such benefits, as reported by our BHW associations in various parts of the country. Moreover, BHWs assigned to vaccination sites and conducting house-to-house contact tracing are not entitled to SRA.

The “Bayanihan Act 2” lapsed in June 30, 2021. Although certain provisions were put in place to ensure that the aforementioned benefits will continue so long as the declaration of national emergency remained in place, differing interpretations of these provisions cropped-up within the bureaucracy. As a result, many healthcare workers have continued to serve in the frontlines without receiving the benefits that was rightly due them. This has since prompted also many of our healthcare workers to threaten mass walk-outs, which would severely cripple the country’s ongoing response to the pandemic.

In view of the foregoing, this measure seeks to ensure the continuing grant of COVID-19 benefits to public and private health workers regardless of employment status, including BHWs, with retroactive application from July 2021 which shall remain effective so long as the Presidential declaration of national public health emergency is in place.

The passage of this bill is urgent.

REP. ANGELICA NATASHA A. CO
BHW PARTYLIST
AN ACT

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

SECTION 1. Short Title. - This Act shall be known and cited as "COVID-19 Benefits for Health Workers Act of 2021."

SEC. 2. Declaration of Policy. — It is the policy of the State to provide adequate support health workers in public and private sectors to ensure the continuous delivery of health services during the existence of a national public health emergency. Towards this end, it shall safeguard the welfare of our health workers and guarantee that all benefits owing to them shall be provided to them with utmost efficiency.

SEC. 3. Coverage. — This Act shall apply to all public and private health workers during the period of the Covid-19 pandemic, regardless of employment status. Public and private health workers shall refer to medical, allied medical, and other necessary personnel assigned in hospitals, healthcare facilities, laboratories, medical or quarantine facilities, or vaccination sites and those administering medical assistance. It also includes non-medical workers and outsourced personnel hired under institutional or individual contract of service or job order basis who are similarly exposed to COVID-19.

Barangay Health Workers (BHW) assigned in hospitals, healthcare facilities, laboratories, medical or quarantine facilities, or vaccination sites and those administering medical assistance are also covered by this Act.

SEC. 4. Continuing Grant of COVID-19 Benefits. - The national government shall provide the following benefits to covered individuals under Section 3 hereof:

(a) COVID-19 special risk allowance and active hazard duty pay for every month served:

Provided, That the special risk allowance and active hazard duty pay shall be in addition to existing benefits being received by health workers under existing laws;
(b) Provision of life insurance, accommodation, transportation, and meals, regardless of the community quarantine status; and

(c) Provision of compensation to those who have contracted COVID-19 in the line of duty, with the following amounts, upon submission of required documents to support claims:

(1) In case of death of the covered individual, One million pesos (P1,000,000.00) shall be provided to the heirs of the covered individuals;

(2) In case of sickness, for a severe or critical case, One hundred thousand pesos (P100,000.00) shall be provided to the covered individuals; and

(3) In case of sickness, for a mild or moderate case, Fifteen thousand pesos (P15,000) shall be provided to the covered individuals: Provided, That the compensation provided herein shall be given to the beneficiaries not later than three (3) months after the date of confinement or death.

The provision of the foregoing benefits shall have retroactive application from July 1, 2021 and shall remain in full force and effect during the state of national public health emergency as declared by the President.

SEC 5. Tax Exemption. — The benefits received by covered workers under this Act, during the period of the COVID-19 pandemic shall be exempt from income tax.

SEC. 6. Appropriations. — The amount necessary for the implementation of this Act shall be charged against the current year available appropriations of the Department of Health. Thereafter, the amount necessary for its continuous implementation shall be included in the Annual General Appropriations.

SEC. 7. Implementing Rules and Regulations. — Within sixty (30) days from the effectivity of this Act, the Department of Health and the Department of Budget and Management shall promulgate the Implementing Rules and Regulations to carry out the provisions of this Act.

The non-promulgation of the rules and regulations provided under this section 8 shall not prevent the immediate implementation of this Act upon effectivity.

SEC. 8. Repealing Clause. — All laws, decrees, executive orders, executive issuances or letters of instruction, rules and regulations or any part thereof inconsistent with or contrary to the provisions of this Act are hereby deemed repealed, amended or modified accordingly.

SEC. 9. Separability Clause. — If any part of this Act shall be declared unconstitutional or invalid the remaining provisions hereof not affected thereby shall continue to be in full force and effect.

SEC. 10. Effectivity Clause. — This Act shall take effect immediately after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,