

Republic of the Philippines  
HOUSE OF REPRESENTATIVES  
Quezon City

NINETEENTH CONGRESS  
First Regular Session

HOUSE BILL NO. 159



---

Introduced by Representative Ma. Rene Ann Lourdes G. Matibag

---

**AN ACT CREATING THE PHILIPPINE CENTERS FOR DISEASE CONTROL AND PREVENTION, AND FOR OTHER PURPOSES**

**EXPLANATORY NOTE**

The Disease Control and Prevention Bureau (DCPB) of the Department of Health (DOH) was created pursuant to Executive Order No. 366<sup>1</sup>, which directed a strategic review of the operations and organizations of the Executive Branch. The creation of the Bureau has done much to streamline the operations of the DOH with respect to maintaining public health and safety by controlling the spread of infectious, occupational, environmental, and lifestyle-related diseases.

The COVID-19 pandemic challenged the efficiency and effectiveness of the organization in maintaining public health and safety. The DCPB has done all it can in helping to stop the spread of COVID-19. However, we have also realized that in order to stop pandemics of a global scale in the future, disease control and prevention must be given priority in terms of funds, operational efficiency, and logistics.

This bill aims to create the Philippine Centers for Disease Control and Prevention (CDC), a government agency attached to the DOH for policy coordination and administrative supervision. Akin to the Centers for Disease Control and Prevention in countries such as the US and China, the proposed CDC shall become the country's leading institution in matters of public health. It shall be headed by an Executive Director, who will have the rank of undersecretary. By giving such a center more operational leeway and funding, the Philippines may yet become more prepared for future public health and safety emergencies.

Considering the rationale stated above, urgent passage of this bill is earnestly sought.

  
MA. RENE ANN LOURDES G. MATIBAG

---

<sup>1</sup> <https://www.doh.gov.ph/orgchart-dpcb>

Republic of the Philippines  
**HOUSE OF REPRESENTATIVES**  
Quezon City

NINETEENTH CONGRESS  
First Regular Session

HOUSE BILL NO. 159

---

**Introduced by Representative Ma. Rene Ann Lourdes G. Matibag**

---

**AN ACT CREATING THE PHILIPPINE CENTERS FOR DISEASE CONTROL AND PREVENTION, AND FOR OTHER PURPOSES**

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 the “Philippine Centers for Disease Control and Prevention Act.”

**SEC. 2. Declaration of Policy** – It is the declared policy of the State to protect and promote the right to health of the people and instill health consciousness among them. Towards this end, the State shall protect the people from public health threats by establishing efficient and effective disease surveillance and providing an effective response system through a dedicated and highly-specialized institution imbued with suitable expertise and technological resources to decisively address epidemics and other public health emergencies.

**SEC. 3. Definition of Terms.** – As used in this Act, the following terms shall mean:

(a) “Disease” refers to an illness due to a specific toxic substance, occupational exposure or infectious agent, which affects a susceptible individual, either directly or indirectly, as from an infected animal or person, or indirectly through an intermediate host, vector, or the environment;

(b) “Disease control” refers to the reduction of disease incidence, prevalence, morbidity or mortality to a locally acceptable level as a result of deliberate efforts and continued intervention measures to maintain the reduction;

(c) “Disease surveillance” refers to the ongoing systematic collection, analysis, interpretation, and dissemination of outcome-specific data for use in the planning, implementation, and evaluation of public health practice. A disease surveillance system includes the functional capacity for data analysis as well as the timely dissemination of these data to persons who can undertake effective prevention and control activities;

(d) "Epidemic/outbreak" refers to an occurrence of more cases of disease than normally expected within a specific place or group of people over a given period of time;

(e) "Infectious disease" refers to a clinically manifested disease of humans or animals resulting from an infection;

(f) "Public health emergency" refers to an occurrence or imminent threat of an illness or health condition that:

(1) Is caused by any of the following:

(i) Bio terrorism;

(ii) Appearance of a novel or previously controlled or eradicated infectious agent or biological toxin;

(iii) A natural disaster;

(iv) A chemical attack or accidental release;

(v) A nuclear attack or accident; or

(vi) An attack or accidental release of radioactive material; and

(2) Poses a high probability of any of the following:

(i) A large number of deaths in the affected population;

(ii) A large number of serious injuries or long-term disabilities in the affected population;

(iii) Widespread exposure to an infectious or toxic agent that poses a significant risk of substantial harm to a large number of people in the affected population;

(iv) International exposure to an infectious or toxic agent that poses a significant risk to the health of citizens of other countries; or

(v) Trade and travel restrictions;

(g) "Public health threat" refers to any situation or factor that may represent a danger to the health of the people; and

(h) "Response" refers to the implementation of specific activities to control further spread of infection, outbreaks or epidemics and prevent re-occurrence. It includes verification, contact tracing, rapid risk assessment, case measures, treatment of patients, risk communication, conduct of prevention activities, and rehabilitation.

**SEC. 4. Creation of the Philippine Centers for Disease Control and Prevention. –**

There is hereby created the Philippine Centers for Disease Control and Prevention, hereinafter referred to as the “CDC,” a government agency attached to the Department of Health (DOH) for policy coordination and administrative supervision.

**SEC. 5. Mandate and Functions. –** The CDC shall be the principal agency responsible for tracking and monitoring diseases and risk factors among Filipinos to inform policy and action at national and local levels. It will be the focal point for the implementation at the local level of international health regulations and other international initiatives for global health security and outbreak response. It shall perform the following functions:

- (a) Conduct routine surveillance of infectious diseases, non-communicable conditions, risk factors, violence and injuries, and mental health conditions throughout the life course;
- (b) Formulate programs for preparedness and response to chemical, biological, radiation and nuclear events, bioterrorism, and global health security;
- (c) Investigate reported outbreaks and epidemics through patient interviews, review of medical records, contact tracing, collection, storage, transport and testing of samples and specimens, risk assessments, laboratory investigations, population surveys, and sampling of environmental contaminants, among others;
- (d) Develop and maintain technical cooperation programs with domestic and international entities;
- (e) Conduct research to develop technology and scientific methodology to test pathogens and participate in randomized clinical trials in line with global efforts to develop tests, vaccines and medicines for the effective control of infectious diseases;
- (f) Administer national programs to improve the performance of laboratories in identifying and classifying infectious diseases as well as other hazardous substances;
- (g) Develop and administer health standards to ensure readiness for the emergence of new infectious diseases and regularly report on the status of recurrent and new diseases in localities;
- (h) Assess and support the capabilities of local government units (LGUs) in preventing the emergence and transmission of infectious diseases;
- (i) Set the standards and the process for the establishment of Epidemiology Surveillance Units (ESUs) as mandated under Section 8 of Republic Act No. 11332, assist DOH-retained hospitals, local health facilities and laboratories in establishing ESUs, assess their performance and accredit them based on the standards set by the CDC;
- (j) Recommend such measures and policies as may be necessary to prevent the transmission of infectious diseases and to reduce risk factors for other diseases and conditions;

- (k) Establish the parameters for the declaration of the existence of an epidemic;
- (l) Recommend to the Secretary of Health the declaration of an epidemic or public health emergency;
- (m) Maintain and administer a national stockpile of medical supplies and equipment to provide medical help in case of an epidemic or a public health emergency; and
- (n) Perform such other functions as may be mandated by law, or as may be delegated by relevant authorities.

**SEC. 6. Disease Surveillance and Response Systems.** – The CDC shall establish real-time disease surveillance and response systems utilizing, whenever necessary, all technological means available while respecting, to the extent possible, the rights of the people to liberty, bodily integrity, and privacy. All data or information collected pursuant thereto shall be used for public health concern purposes only and shall be exempted from the provisions of the Data Privacy Act on accessibility of data.

**SEC. 7. CDC Executive Director; Deputy Executive Director.** – The CDC shall be headed by an Executive Director with a rank of Undersecretary. He shall be assisted by a Deputy Executive Director with a rank of Assistant Secretary.

The Executive Director and the Deputy Executive Director shall be appointed by the President from a list of at least three (3) nominees for each position to be submitted by the Secretary of Health. No person shall be appointed as Executive Director or Deputy Executive Director without at least fifteen (15) years of exemplary performance, relevant experience and proven expertise in the fields of public health, medicine and/or epidemiology, and at least a Masters degree in any of the aforementioned fields.

The Executive Director and the Deputy Executive Director may be removed only for cause.

**SEC. 8. Organization and Personnel of the CDC.** – Within sixty (60) days from appointment, the Executive Director shall, in consultation with the Secretary of Health, draw up the organizational structure, staffing pattern, qualification standards, compensation and position classification plan for the CDC. The qualification standards and the compensation and position classification plan shall be subject to the approval of the Civil Service Commission and the Department of Budget and Management, respectively.

All subordinate personnel of the CDC shall be appointed by the Executive Director based on merit, qualifications and competitive examinations. Technical officers must have a Masters degree in public health, epidemiology, biotechnology or other relevant areas of scientific endeavor as specified by the CDC.

The CDC shall also be authorized to engage the services of consultants in highly specialized research programs.

The CDC shall maintain the highest achievable standards for the use of information

technology to track and trace diseases as well as monitor the impact and effectiveness of interventions.

**SEC. 9. Partner Institutions.** – The CDC shall develop a network of scientific partner institutions from existing institutions in the public and private sector and may designate a research agency or health facility as a “center of excellence” for research or innovation that becomes part of the “Centers” as a partner institution.

**SEC. 10. Continuing Competency Development Program.** – The CDC performs functions that require knowledge and expertise of superior degree. As such, it is imperative that all personnel tasked with carrying out its primary mandate are competent, equipped, and updated with the current developments and best practices in relevant fields. For this purpose, the CDC, through the Executive Director, shall devise and implement continuing competency development programs such as the Field Epidemiology Training Program (FETP), the Field Management Training Program (FMTP) and other initiatives to build competencies for public health and epidemiology throughout the country. Members of the technical staff of the CDC are required to participate at regular intervals in trainings and workshops and will be required to undertake research and publish results on a yearly basis. Failure to comply or complete the continuing competency development program without justifiable reason shall constitute a ground for removal from office.

**SEC. 11. Establishment of a Public Health Laboratory Network.** – The CDC shall establish and oversee a network of high containment laboratories with Biosafety Level 4 and initially five (5) Biosafety Level 3 laboratories to be equitably located and operated at such strategic places in the country as the CDC may determine. The network will expand the development of Biosafety Level 2 laboratories throughout the country as part of the national pandemic preparedness and response plan and as the needs and resources of the CDC warrant.

The provision of the preceding paragraph, notwithstanding, the CDC shall, upon the initiative of the LGUs, assist in the establishment of similar laboratories in their respective localities. The cost of establishing and operating the laboratories shall be borne by the LGUs concerned.

The specifications of the LGU-operated laboratories and the qualifications of their personnel complement shall strictly comply with the standards and qualification requirements prescribed by the CDC.

**SEC. 12. Authority to Solicit, Receive Donations, Grants and the Like.** – The CDC may solicit, negotiate with, and receive in trust from any public or private domestic or foreign sources legacies, gifts, donations, grants, endowments, contributions or other transfers of ownership and/or possession of real or personal properties of all kinds in favor and for the benefit of the agency: Provided, That full disclosure is made by the CDC through annual reports; Provided further, That the CDC submit such annual report to Congress. The Executive Director shall prescribe the measures necessary for the proper use, maintenance and safekeeping of said donations, grants, endowments, contributions or transfers and the compliance of the terms and conditions thereon, if any, in accordance with pertinent accounting and auditing laws, rules and regulations.

**SEC. 13. Appropriation.** – The amount of Two Hundred Fifty Million Pesos (P250,000,000.00) is hereby appropriated and shall be made available from the funds of the National Treasury not otherwise appropriated. Thereafter, the amount necessary for the continuous implementation of the provisions of this Act shall be included in the annual General Appropriations Act.

**SEC. 14. Implementing Rules and Regulations.** – The Secretary of Health shall promulgate the necessary rules and regulations within ninety (90) days from the effectivity of this Act.

**SEC. 15. Separability Clause.** – If for any reason, any part or provision of this Act is declared invalid or unconstitutional, the other parts or provisions not affected shall remain in full force and effect.

**SEC. 16. Repealing Clause.** – All laws, presidential decrees, executive orders, rules and regulations contrary to or inconsistent with the provisions of this Act are hereby repealed or modified accordingly.

Approved,