HOUSE OF REPRESENTATIVES

H. No. 8558

BY REPRESENTATIVES TAN (A.), REVILLA, BAGATSING, SAULOG, TAMBUNTING, ALONTÉ, CARI, TEVES (J.), CABOCHAN, VARGAS, VILLAFUERTE, SUANSING (E.), ROBES, SY-ALVARADO, ROMUALDO, ERIGUEL, LOYOLA, MARIANO-HERNANDEZ, LAZATIN, SAVELLANO, DEFENSOR (M.), GATO, RAMOS, VIOLAGO, NATIVIDAD-NAGAÑO, CHUNGALAO, NIETO, ARENAS, HERNANDEZ, GARCIA (P.J.), BELMONTÉ, ERMITA-BUHAIN, SALCEDA, CUA, TEJADA, GASATAYA, JALOSJOS, SUANSING (H.), MATUGAS, GARCIA (J.E.), GONZAGA, HAESCO, CUARESMA, UY (J.), DAZA, LIMKAICHONG, ZUBIRI, SAGARBARRIA, BAUTISTA-BANDIGAN, CALDERON, CAMPOS, SUAREZ (D.), GONZALEZ, MOMO, FRASCO, ZAMORA (W.K.), BALINDONG, BARBA, BERNOS, BRAVO, BASCUG, CAMINERO, DALOG, DELOS SANTOS, DELOSO-MONTALLA, DIMAPORO (A.), ESPINO, FARÍNAS (R.C.), FORTUNO, HOFER, JIMÉNEZ, LABADLABAD, MARIÑO, NAVA, ORTEGA, OUANO-DIZON, PLAZA, ROMAN, SANCHEZ, SILVERIO, SINGSION-MEEHAN, TIANGO, TUTOR, TY (D.), VARGARA, CO (E.), CABATBAT, DAGOOC, GUYA, QUIMBO, FORTUN, BABASA, ENVERGA, GATCHALIAN, MENDOZA, NOGARES (J.J.), RAMIREZ-SATO, RODRIGUEZ, ROMULO, SANGCOFAN, SARMIENTO, SUNTAY, DALIPE AND MACEDA, PER COMMITTEE REPORT NO. 725
AN ACT
PROVIDING FOR A MANDATORY IMMUNIZATION PROGRAM, REPEALING FOR
THE PURPOSE REPUBLIC ACT NO. 10152, OTHERWISE KNOWN AS THE
“MANDATORY INFANTS AND CHILDREN HEALTH IMMUNIZATION ACT OF 2011”

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

SECTION 1. Title. — This Act shall be known as the “Mandatory Immunization
Program Act”.

SEC. 2. Declaration of Policy. — In accordance with Article II, Section 15 of the
Constitution, it is hereby declared the policy of the State to take a proactive role in the
preventive health care of all Filipinos. Towards this end, the State shall adopt a
comprehensive, mandatory and sustainable immunization program for vaccine-
preventable diseases.

SEC. 3. National Immunization Program. — There is hereby established a
National Immunization Program under the Department of Health (DOH), which shall
ensure that the population is equitably protected from vaccine-preventable diseases that
can cause disability or death through an integrated and comprehensive immunization
program for all life stages, in accordance with this Act.

SEC. 4. Coverage. — The mandatory immunization provided under this Act shall
cover the following vaccine-preventable diseases:

(a) Tuberculosis;
(b) Diphtheria, Tetanus, and Pertussis;
(c) Poliomyelitis;
(d) Measles;
(e) Mumps;
(f) Rubella or German measles;
(g) Hepatitis-B;
(h) H. Influenza type B (HIB);
(i) Rotavirus;
(j) Japanese encephalitis;
(k) Pneumococcal conjugate vaccine (PCV);
(l) Human papilloma virus (HPV);
(m) Booster for Measles, Rubella, Tetanus, Diphtheria (MRTD)
(n) Such other types as may be determined by the Secretary of Health upon
the recommendation of the National Immunization Technical and Advisory
Group (NITAG) established under Section 6 of this Act and after a separate
or joint public hearing conducted by the Committee on Health and
Demography of the Senate of the Philippines and the Committee on Health
of the House of Representatives: Provided, That when there is a pandemic
and when the Congress of the Philippines is not in session, the said public
hearings need not be conducted.

The Philippine Health Insurance Corporation (PhilHealth) shall include the
mandatory immunization services specified under this Act in its benefit package.
However, such other types under Section 4 (n) shall undergo evaluation by the Health
Technology Assessment Council pursuant to R.A. 11223, otherwise known as the
"Universal Health Care Act", before its inclusion in the benefit package.

SEC. 5. Administration of Vaccines. - The vaccines shall be administered for
free in any government hospital or health facility, and in any public school or community
under its school-based or community-based immunization program, and in any private
health facility if such is included in the PhilHealth benefit package.

The DOH, in collaboration with the Department of Education and the Department
of Interior and Local Government, shall undertake a school-based and community-based
immunization program. The DOH shall determine the vaccines suitable for the various
age groups from the list enumerated in Section 4 under this Act.

Hepatitis-B vaccine shall be administered by any duly licensed physician, nurse or
midwife to infants born in hospitals, health infirmaries, health centers or lying-in centers
with obstetrical and pediatric services, whether public or private, within twenty-four (24)
hours after birth: Provided, however, That in cases of infants born in places other than
the above, any duly licensed physician, nurse or midwife who delivers or assists in the
delivery of the newborn, shall be responsible for administering the vaccine to the latter:
Provided, further, That for deliveries assisted by persons other than the health
professionals mentioned above, the infant should be brought to any available health care
facility to be immunized against Hepatitis-B within twenty-four (24) hours but not later than
seven (7) days after birth: Provided, finally, That subsequent doses of the Hepatitis-B
vaccine shall be completed according to the recommended schedule of Hepatitis-B
immunization to be provided in the rules and regulations to be issued by the DOH to
implement this Act.

SEC. 6. Creation of the National Immunization Technical and Advisory
Group. – A National Immunization Technical and Advisory Group (NITAG) shall be
created to serve as a technical and independent multi-disciplinary advisory body to
provide evidence-based policy and program decisions on immunization and vaccines to
the DOH. The NITAG shall be composed of experts from the fields of pediatrics, infectious
diseases, epidemiology, public health, health economy and from affiliate agencies such
as the Formulary Executive Council, Food and Drug Administration, Philippine Nurses
Association, Philippine Pharmacists Association, Inc., and the National Institutes of Health.

The NITAG shall have the following functions:

a). To advise the DOH in the formulation of policies, plan and strategies for research and development of the existing and new vaccines, and the vaccine delivery technology;

b). To conduct policy analysis, review of the program data and evidence in order to provide evidence-based technical advice and recommendations for the development of appropriate and sustainable immunization policies, guidelines, strategies, and approaches related to Immunization Program and vaccine delivery technology; and

c). To review the position papers, studies, international guidelines and recommendations from internationally acknowledged resources for possible adoption in the country policies and plans for NITAG.

SEC. 7. Education and Information campaign. - All health care practitioners or health care workers who are administering prenatal care shall educate all pregnant mothers on the importance of immunization through vaccination in safeguarding infant health and well-being as well as on the possible effects of immunization.

The DOH, other government agencies, non-government organizations (NGOs), professional and academic societies, and local government units (LGUs) shall make available appropriate information materials and shall institute an efficient public information dissemination system to increase awareness on the importance of immunization as a disease prevention strategy.

SEC. 8. Obligation to Inform. - Any physician, nurse, midwife, nursing aide or skilled birth attendant, who delivers or assists in the delivery of a newborn shall, prior to delivery, inform parents or legal guardian of the newborn of the availability, nature and benefits of immunization against Hepatitis-B and other vaccine-preventable diseases at birth.

SEC. 9. Continuing Education and Training of Health Personnel. —The DOH shall, with the assistance of the LGUs, academe, professional societies and NGOs, undertake continuing information, education and training programs for all health personnel on the rationale and benefits of, as well as modern procedures for immunization of infants and children against vaccine-preventable diseases.

SEC. 10. Annual Report. — The DOH shall submit to the Office of the President of the Philippines, the Senate Committee on Health and Demography, and the House of Representatives Committee on Health on or before the end of December of every year, or upon the request of any of the aforesaid committees of Congress, a report giving a detailed account of the status of the implementation of this Act.
SEC. 11. Appropriations. — The amount necessary to carry out the implementation of this Act shall be charged against the current year's appropriations for expanded program on immunization of the DOH. Thereafter, such sums as may be necessary for the continued implementation of this Act shall be included in the annual General Appropriations Act.

SEC. 12. Implementing Rules and Regulations. — The DOH shall, in consultation with the National Immunization Committee, issue the implementing rules and regulations within ninety (90) days after the approval of this Act.

SEC. 13. Separability Clause. — If, for any reason, any part or provision of this Act shall be declared unconstitutional or invalid, the remaining provisions hereof which are not affected thereby shall continue to be in full force and effect.

SEC. 14. Repealing Clause. — Republic Act No. 10152, otherwise known as the “Mandatory Infants and Children Health Immunization Act of 2011” is hereby repealed. All other laws, decrees, executive orders, rules and regulations or parts thereof which are inconsistent with this Act are hereby repealed, amended or modified accordingly.

SEC. 15. Effectivity. — This Act shall take effect fifteen (15) days after its publication in the Official Gazette or in a newspaper of general circulation.

Approved,