

NINETEENTH CONGRESS OF THE )  
REPUBLIC OF THE PHILIPPINES )  
First Regular Session )



Senate  
Office of the Secretary

22 AUG -4 P5:51

SENATE

S. No. 1039

RECEIVED BY: \_\_\_\_\_

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Introduced by Senator FRANCIS G. ESCUDERO

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**AN ACT**  
**STRENGTHENING PHILIPPINE PUBLIC HEALTH EMERGENCY**  
**PREPAREDNESS AND RESPONSE CAPABILITY, ESTABLISHING FOR THE**  
**PURPOSE A PHILIPPINE CENTER FOR DISEASE PREVENTION AND**  
**CONTROL, APPROPRIATING FUNDS THEREFOR, AND FOR OTHER**  
**PURPOSES**

EXPLANATORY NOTE

Drawing from the painful lessons of the coronavirus pandemic, this bill seeks to achieve a comprehensive framework where technical guidance grounded on science and research would direct public efforts in addressing not only the ongoing COVID-19 threat, but the public health emergencies the country may endure in the future.

This bill, in particular, establishes an accountable and competent government agency to be named the Philippine Center for Disease Prevention and Control, attached to the Department of Health, which shall serve as the technical authority in forecasting, preventing, controlling, and monitoring public health emergencies in the country. Through this agency, along with other interventions such as the development of a Framework for Public Health Emergency Preparedness and Response, it is hoped that the country and its health care system will be better equipped to prepare, detect, prevent, manage and mitigate the succeeding public health emergencies that will happen within our shores.

In view of the foregoing, and cognizant of the call of President Ferdinand R. Marcos, Jr. for the establishment of a Center for Disease Control and Prevention, this bill is filed for Congress' immediate consideration and approval.

Respectfully submitted.

**FRANCIS G. ESCUDERO**



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

1           Section 1. *Short Title.* – This Act shall be known as the “Philippine Center for  
2 Disease Prevention and Control Act.”

3           Sec. 2. *Declaration of Policy.* – It is hereby declared the policy of the State to  
4 protect and promote the right to health of the people and instill health consciousness  
5 among them. To this end, cognizant of the constitutional mandate to adopt an  
6 integrated and comprehensive approach to health development, the State shall  
7 develop an effective mechanism to forecast, prevent, control and mitigate public  
8 health emergencies and their adverse impact on the health and well-being of all  
9 Filipinos.

10           Sec. 3. *Definition of Terms.* – For the purposes of this Act:

11           (a) “Public Health Emergency” shall refer to an occurrence or imminent  
12 threat of an illness or health condition that:

13                   1. Is caused by the following:

14                           i. Bioterrorism;

- 1                   ii. Appearance of a novel or previously controlled or eradicated
- 2                   infectious agent or biological toxin;
- 3                   iii. A natural disaster;
- 4                   iv. A chemical attack or accidental release;
- 5                   v. A nuclear attack or accident;
- 6                   vi. An attack or accidental release of radioactive materials; and
- 7           2. Poses a high probability of any of the following:
- 8                   i. A large number of deaths in the affected population;
- 9                   ii. A large number of serious injuries or long-term disabilities in
- 10                  the affected population;
- 11                  iii. Widespread exposure to an infectious or toxic agent that
- 12                  poses a significant risk of substantial harm to a large number
- 13                  of people in the affected population;
- 14                  iv. International exposure to an infectious or toxic agent that
- 15                  poses a significant risk to the health of citizens of other
- 16                  countries; or
- 17                  v. Trade and travel restrictions;
- 18   (b) "Disease" shall refer to an illness due to a specific toxic substance,
- 19       occupational exposure or infectious agent, which affects a susceptible
- 20       individual, either directly or indirectly, as from an infected animal or person,
- 21       or indirectly through an intermediate host, vector, or the environment;
- 22   (c) "Disease Control" shall refer to the reduction of disease incidence,
- 23       prevalence, morbidity or mortality to locally acceptable levels as a result of
- 24       deliberate efforts and continued intervention measures to maintain such
- 25       reduction;
- 26   (d) "Disease Prevention" shall refer to the population- and individual-based
- 27       interventions aimed at minimizing the burden of diseases and associated
- 28       risk factors;
- 29   (e) "Disease Surveillance" shall refer to the ongoing systematic collection,
- 30       analysis, interpretation, and dissemination of outcome-specific data for use
- 31       in planning, implementation, and evaluation of health practice;

- 1 (f) "Health Service Providers" shall refer to individuals and facilities that  
2 provides health care services such as physicians, allied medical personnel,  
3 hospitals, clinics, health laboratories and other similar individuals and  
4 facilities, whether public or private;
- 5 (g) "International Health Regulations" shall refer to the legally binding  
6 international agreement to build state capacity to detect, assess, report and  
7 respond to potential public health emergencies and public health events;
- 8 (h) "Publicly Accessible Facilities" shall refer to facilities, whether public or  
9 private, that can be accessed by members of the general public, such as  
10 schools, workplaces, shopping malls, prisons, ports, airports, stations,  
11 amusement parks, and other similar establishments;
- 12 (i) "Public Health Laboratory Networks" shall refer to a network of laboratories  
13 which are responsible for providing timely and reliable diagnostic results  
14 primarily for disease prevention, control, surveillance, population-based  
15 interventions, and outbreak emergency response; and for performing core  
16 public health and environmental activities, including reference tests for  
17 diseases of public health importance; and
- 18 (j) "Public Health Emergency Response" shall refer to the implementation of  
19 specific activities to control further spread of infection, outbreaks, or  
20 epidemics and prevent their reoccurrence.

21 *Sec. 4. Philippine Center for Disease Prevention and Control.* – There is hereby  
22 created a government agency to be known as the Philippine Center for Disease  
23 Prevention and Control (PCDPC), which shall be the technical authority on the  
24 forecasting, preventing, controlling, and monitoring of public health emergencies,  
25 whether domestic or international in origin. The PCDPC shall be attached to the  
26 Department of Health (DOH) for purposes of policy and program coordination.

27 *Sec. 5. Powers and Functions of the Philippine Center for Disease Prevention*  
28 *and Control.* – The PCDPC shall exercise the following powers and functions:



- 1 (a) Recommend to the President, through the Secretary of Health, the  
2 declaration of a state of public health emergency and set parameters for  
3 the existence and termination of the same;
- 4 (b) Develop and update a Framework for Public Health Emergency  
5 Preparedness and Response as provided under Section 11 of this Act;
- 6 (c) Provide technical assistance in (i) developing and implementing  
7 interventions concerning public health emergencies; (ii) maintaining public  
8 health monitoring systems; and (iii) building the capacity of other  
9 government agencies and instrumentalities in disease forecasting,  
10 prevention, monitoring, and mitigation;
- 11 (d) Conduct research, investigations, disease surveillance, and other similar  
12 activities in relation to forecasting, prevention, monitoring, and control of  
13 diseases and public health emergencies;
- 14 (e) Set standards, parameters, and processes for the establishment and  
15 operation of Epidemiology and Surveillance Units, testing laboratories, and  
16 other similar establishments;
- 17 (f) Develop, implement, maintain, and update an integrated disease  
18 surveillance system and a public health laboratory network;
- 19 (g) Develop and update training programs on specialized fields such as, but  
20 not limited to, public health emergency preparedness, disease monitoring  
21 and surveillance, and field epidemiology;
- 22 (h) Provide technical guidance on the procurement of critical health and  
23 medical supplies, such as, but not limited to, medicines and vaccines;
- 24 (i) Promote and facilitate collaboration, coordination, communication and  
25 information-sharing among the relevant government agencies, academic  
26 and scientific community, civil society organizations, and private sector  
27 stakeholders on matters concerning public health emergency preparedness  
28 and response;
- 29 (j) Solicit and receive from domestic or foreign sources such legacies, gifts,  
30 donations, grants, endowments, contributions or transfers of ownership or  
31 possession of personal or real properties in support of the activities and  
32 mandates of the PCDDPC: *Provided*, That any legacy, gift, donation, grant,

1 endowment, contribution received by the PCDPC shall be deposited in full  
2 in a special account in the general fund in the National Treasury and shall  
3 be used exclusively for the purpose specified in the deeds and instruments  
4 covering them: *Provided, further,* That any legacy, gift, donation, grant,  
5 endowment, contributions used actually, directly and exclusively for the  
6 purpose of the PCDPC shall be exempt from donor's tax and shall be  
7 considered as allowable deductions from the gross income of the donor for  
8 the purpose of computing the taxable income of the donor concerned in  
9 accordance with the provisions of the National Internal Revenue Code of  
10 1997, as amended; and

- 11 (k) Perform such other functions as may be mandated by law or duly delegated  
12 by the President of the Philippines or the Secretary of Health.

13 *Sec. 6. Composition of the Philippine Center for Disease Prevention and Control.*

14 – The PCDPC shall be headed by a Director-General with the rank of Undersecretary,  
15 who shall be assisted by one (1) Deputy Director-General with the rank of Assistant  
16 Secretary. The Director-General and the Deputy Director-General shall be appointed  
17 by the President of the Philippines upon the recommendation of the Secretary of  
18 Health: *Provided,* That no person shall be appointed as PCDPC Director-General or  
19 Deputy Director-General unless he or she is a citizen and resident of the Philippines,  
20 of good moral character, of proven integrity, and with at least seven (7) years of  
21 competence and expertise in public health management, health emergency  
22 preparedness, health emergency response, epidemiology and other related disciplines.

23 *Sec. 7. Powers and Functions of the Director-General of the Philippine Center*  
24 *for Disease Prevention and Control.* – The PCDPC Director-General shall perform the  
25 following powers and functions:

- 26 (a) Manage and direct the activities and operations of the PCDPC as provided  
27 under this Act or in accordance with the instruction of relevant government  
28 authorities;  
29 (b) Certify to the Secretary of Health the occurrence of a public health  
30 emergency and recommend appropriate interventions to address the same;

1 (c) Act as the focal point for communication with the World Health  
2 Organization on matters concerning the International Health Regulations  
3 (IHR); and

4 (d) Perform such other functions as may be mandated by law or duly delegated  
5 by the President of the Philippines or the Secretary of Health.

6 *Sec. 8. Organizational Structure and Staffing Pattern.* – The PCDPC shall, in  
7 consultation with the DOH and subject to approval of the Department of Budget and  
8 Management (DBM), determine its organizational structure and create new bureaus,  
9 divisions or units as it may deem necessary, and shall appoint its officers and  
10 employees in accordance with the civil service law, rules, and regulations.

11 *Sec. 9. Framework for Public Health Emergency Preparedness and Response.* –  
12 The PCDPC shall, in consultation with the DOH and other relevant public and private  
13 stakeholders, formulate a roadmap for improving government capacity to detect,  
14 prevent, forecast and respond to public health emergencies. The framework shall  
15 include, but not be limited to, the development of the following capabilities:

- 16 (a) Identifying and assessing public health risks and vulnerabilities;
- 17 (b) Improving community resilience against public health emergencies;
- 18 (c) Developing and maintaining systems for coordination among agencies  
19 engaged in public health emergency operations;
- 20 (d) Formulating effective mechanisms to share and disseminate public  
21 information and health warnings;
- 22 (e) Designing effective means to mitigate public health emergencies, which  
23 shall include, but not be limited to, procurement and distribution of medical  
24 and health care supplies, provision of nonpharmaceutical interventions,  
25 and enforcement of occupational health, safety and wellness for  
26 emergency responders;
- 27 (f) Devising interventions to manage and mitigate the impact of surges, which  
28 shall include, but not be limited to, management of fatalities, provision of  
29 mass care, and recruitment of health care volunteers; and

1 (g) Preventing the onset of public health emergencies through disease  
2 surveillance and epidemiological investigations.

3 Sec. 10. *Integrated Disease Surveillance System.* – The PCDPC shall establish  
4 and maintain an integrated disease surveillance system for the continuous and  
5 systematic collection, analysis and interpretation of health-related data; the  
6 application of such data in planning, implementation and evaluation of public health  
7 practices and interventions; and the dissemination of such data to agencies engaged  
8 in disease prevention and control and to the general public. The PCDPC shall unify the  
9 public health information system disease surveillance and response systems  
10 established under Section 6(a)(1) of Republic Act No. 11332, otherwise known as the  
11 Mandatory Reporting of Notifiable Diseases and Health Events of Public Health  
12 Concern Act, and maintain mechanisms and protocols for coordination, reporting and  
13 communication between the PCDPC, the DOH, local health offices, health service  
14 providers, publicly accessible facility operators, the academic and scientific  
15 communities, and other relevant stakeholders.

16 Sec. 11. *Public Health Laboratory Network.* – There shall be a Public Health  
17 Laboratory Network to unify all diagnostic surveillance of public health importance into  
18 standalone laboratories across the nation. The Public Health Laboratory Network shall  
19 be composed of the following:

- 20 (a) National Reference Laboratories (NRLs) which shall (i) provide end-referral  
21 laboratory confirmatory services and training; (ii) implement external  
22 quality assurance programs, (iii) perform surveillance, outbreak response,  
23 kit evaluation, research, and (iv) establish technical standards;
- 24 (b) Subnational Reference Laboratories (SRLs) which shall (i) conduct  
25 confirmatory testing for routine surveillance samples; (ii) perform  
26 specialized tests, training, laboratory-related research; and (iii) cascading  
27 of protocols and standards set by the NRLs: *Provided,* That SRLs shall be  
28 established in each of the following catchment areas: North Luzon, National  
29 Capital Region and Central Luzon; South Luzon; Visayas; and Mindanao;  
30 and



1 (c) Regional Public Health Laboratories (RPHLs) which shall (i) perform  
2 diagnostic tests both for diseases of public health importance, and (ii)  
3 conduct laboratory-related research: *Provided*, That RPHLs shall be  
4 established or designated in all regions of the country.

5 The PCDPC shall exercise supervisory and oversight functions over the  
6 development and operations of all public health laboratories in the Public Health  
7 Laboratory Network. For the purpose of managing the Public Health Laboratory  
8 Network, the PCDPC shall perform the following:

- 9 1. Identification of public health laboratories and designation of NRLs, SRLs,  
10 and RPHLs;
- 11 2. Transition of identified public health laboratories that are currently housed  
12 in their existing host hospitals into standalone laboratory facilities to serve  
13 as diagnostic surveillance centers separate from its hospital operations;  
14 and
- 15 3. Establishment of an integrated laboratory information system accessible to  
16 all public health laboratories and surveillance units.

17 *Sec. 12. Joint Oversight Committee.* – There shall be a Joint Oversight  
18 Committee on Disease Prevention and Control to be chaired jointly by the Chairpersons  
19 of the Senate Committee on Health and Demography and the House of  
20 Representatives Committee on Health. The Joint Committee shall be composed of five  
21 (5) members from the Senate of the Philippines and five (5) members from the House  
22 of Representatives, to be appointed by the Senate President and the Speaker of the  
23 House of Representatives, respectively.

24 *Sec. 13. Annual Report.* – The PCDPC shall submit to Congress an annual report  
25 containing, among other information, (i) an evaluation of current and emerging threats  
26 to public health, (ii) interventions undertaken to address such threats; (iii) a progress  
27 report on the Philippine commitments under the IHR; and (iv) policy recommendations  
28 to improve public health emergency preparedness and response.

1           Sec. 14. *Appropriations.* – The initial amount needed for the implementation of  
2 this Act shall be charged against the current year’s appropriations of the offices  
3 transferred to the PCDPC as provided under Section 10 of this Act. Thereafter, the  
4 amount needed for the implementation of this Act shall be included in the annual  
5 General Appropriations Act.

6           Sec. 15. *Transfer of Agencies, Personnel, Records, Assets, Properties and*  
7 *Equipment.* – All relevant functions, appropriations, records, assets, properties,  
8 equipment and personnel of the following agencies shall be transferred to the PCDPC:

- 9           (a) Epidemiology Bureau;
- 10           (b) Research Institute for Tropical Medicine;
- 11           (c) Sexually-Transmitted Disease – Acquired Immune Deficiency Syndrome  
12           Cooperative Central Laboratory;
- 13           (d) Office of Health Laboratories;
- 14           (e) Personnel and offices under the International Health Surveillance Division  
15           of the Bureau of Quarantine that perform the following functions: (i)  
16           passive international health surveillance; and (ii) dissemination of critical  
17           public health information; and
- 18           (f) Personnel and offices under the Disease Prevention and Control Bureau  
19           engaged in technical and standard setting functions.

20           Sec. 16. *Transitory Provisions.* – The transfer of functions, assets, funds,  
21 equipment, properties, transactions, and personnel of the affected agencies, and the  
22 formulation of the internal organic structure, staffing pattern, operating system, and  
23 revised budget of the PCDPC shall be completed within six (6) months from the  
24 effectivity of this Act, during which time, the existing personnel shall continue to  
25 assume their posts in holdover capacities until new appointments are issued: *Provided,*  
26 That no diminution of salaries, benefits, seniority rights or ranks shall be effected to  
27 employees who are qualified for retention or continuation as a result of the transfer:  
28 *Provided, further,* That the PCDPC and the DOH, in coordination with the DBM, shall  
29 determine and create new positions as may be necessary within their respective  
30 agencies: *Provided, finally,* That the funding requirements for such new positions shall

1 not exceed the cost of positions that may be declared redundant, abolished or  
2 reorganized.

3 Affected personnel who would opt to retire or be separated as a result of the  
4 transfer shall be entitled, at the option of the employee concerned, to the retirement  
5 benefits and separation incentives under Republic Act No. 1616, as amended; Republic  
6 Act No. 660; and Republic Act No. 8291, as amended.

7 In addition to said retirement benefits, the affected personnel who would opt  
8 to retire or be separated shall be entitled to the following applicable separation  
9 incentives:

- 10 (a) One hundred percent (100%) of the actual monthly basic salary for every  
11 year of government service, for those who have rendered less than eleven  
12 (11) years of service;
- 13 (b) One hundred fifty percent (150%) of the actual monthly basic salary for  
14 every year of government service, computed starting from the first (1<sup>st</sup>)  
15 year, for those who have rendered eleven (11) years to less than twenty-  
16 one (21) years of service;
- 17 (c) Two hundred percent (200%) of the actual monthly basic salary for every  
18 year of government service, computed starting from the first (1<sup>st</sup>) year, for  
19 those who have rendered twenty-one (21) years to less than thirty-one  
20 (31) years of service; and
- 21 (d) Two hundred fifty percent (250%) of the actual monthly basic salary for  
22 every year of government service, computed starting from the first (1<sup>st</sup>)  
23 year, for those who have rendered at least thirty-one (31) years of service.

24 *Sec. 17. Implementing Rules and Regulations.* – Within thirty (30) days from  
25 effectivity of this Act, the DOH shall, in consultation with the DBM, promulgate the  
26 rules and regulations to effectively implement the provisions of this Act.

27 *Sec. 18. Repealing Clause.* – All other laws, acts, presidential decrees, executive  
28 orders, issuances, presidential proclamations, rules and regulations or parts thereof,

1 which are contrary to and inconsistent with any provision of this Act, are hereby  
2 repealed, amended or modified accordingly.

3           Sec. 19. *Separability Clause.* – If any portion or provision of this Act is declared  
4 unconstitutional, the remainder of this Act or any provision not affected thereby shall  
5 remain in force and effect.

6           Sec. 20. *Effectivity.* – This Act shall take effect immediately following the  
7 completion of its publication in the *Official Gazette* or at least two (2) newspapers of  
8 general circulation.

Approved,