Section 1. This Act shall also be known as the Hospital Licensure Act.

Sec. 2. Definitions. — As used in this Act —

(a) 'Hospital' means a place devoted primarily to the maintenance and operation of facilities for the diagnosis, treatment and care of individuals suffering from illness, disease, injury or deformity, or in need of obstetrical or other medical and nursing care. The term 'hospital shall also be construed as any institution, building or place where there are installed beds, or cribs, or bassinets for twenty-four-hour use or longer by patients in the treatment of diseases, diseased-conditions, injuries, deformities, or abnormal physical and mental states, maternity cases, and all institutions such as those for convalescence, sanitarial or sanitarial care, infirmities, nurseries, dispensaries and such other names by which they may designated.

(b) 'Government hospital' means a hospital operated and maintained either partially or wholly by the national, provincial, municipal or city government or other political subdivision, or by any department, division, board or other agency thereof.

(c) 'Private hospital' means one which is privately owned, established and operated with funds raised or contributed through donations, or by private capital or other means, by private individuals, association, corporation, religious organization, firm, company or joint stock association.

(d) 'Clinic' means a place in which patients avail of medical consultations or treatments on an out-patient basis. However, any clinic or dispensary where there is at least six beds or cribs or bassinets installed for twenty-four-hour use by patients shall be construed to fall within the definition of a hospital as described in this Act.

(e) 'Licensee' is the person or persons granted a license to operate and maintain a hospital according to an approved minimum standard.

Sec. 3. Construction Permit. — No hospital, government or private, shall be constructed unless plans have been approved and construction permit issued by the licensing agency as defined in this Act.

Sec. 4. Registration and license. — No hospital shall operate or be opened to the public unless it shall have been registered and a license for its operation obtained from the licensing agency provided in this Act.

Sec. 5. Licensing Agency. — For purposes of setting standards in hospital construction and operation, the Bureau of Medical Services in addition to its present duties shall act as the licensing agency. The Secretary of Health shall reorganize this Bureau to include a staff of hospital architects, hospital administrators, sanitary engineers and such personnel as may be necessary to carry out the purposes of this Act without necessarily increasing the present personnel strength of this Bureau.

Sec. 6. Powers and duties of the licensing agency. — The Bureau of Medical Services, or the licensing agency shall have the following powers and duties:

a. To conduct an ocular survey of all existing hospitals in the Philippines, government or private, with a view to determine their fitness to operate considering their facilities and physical plant.

b. To prescribe standard plans for government hospital plants in consultation with the Division of Architecture, Bureau of Public Works.

c. To approve plans for hospital plants, government or private, and to issue permits or authority to construct hospitals in accordance with the provisions of this Act.

d. To keep a permanent register of approved hospitals or those issued licenses to operate indicating the
name of the hospital, address or location, type of hospital, name of the director or administrator, ownership, number of authorized beds and bassinets and such other pertinent data as may be necessary.

e. To grant licenses for the operation and maintenance of hospitals or revoke the same in accordance with the provisions of this Act.

f. To make periodic inspection of all hospitals so as to check compliance with rules and regulations legally promulgated or with the provisions of this Act and to make recommendations to directors or administrators of hospitals for the correction of defects found during such inspections.

g. To publish yearly a list of all approved hospitals indicating the name, location, type, authorized beds, and name of the director or administrator.

h. To submit yearly reports to the Secretary of Health, the Speaker of the House of Representatives, the President of the Senate and the chairmen and members of the Committees on Health of both Houses of Congress, such reports to include a list of approved hospitals indicating the name of the hospital, location, bed capacity and name of the director or administrator and make recommendations on hospital needs or requirements for hospital service in certain communities that do not enjoy such hospital services.

Sec. 7. Filing of Application for Construction Permit. — Application for a permit to construct a hospital shall be submitted to the Office of the Director, Bureau of Medical Services in a form prescribed by the latter and accompanied by a plan of the hospital plant proposed to be constructed. The application shall state the name of the hospital, ownership, number of beds proposed to be operated, location and type of hospital to be constructed.

Sec. 8. Minimum Standards of Construction. — In order that a permit to construct a hospital can be issued the hospital plan shall provide sufficient bed space for the hospital bed capacity proposed, a laboratory room, an operating room, including work rooms for sterilization, anesthesia preparation, etc., an X-ray or radiology room, pharmacy, dispensary or out-patient department, delivery room, isolation rooms, autopsy room or morgue, sufficient quarters for residents, nurses, attendants and helpers and sufficient number of toilet facilities.

Wards shall be constructed such that segregation of the sexes is observed and as far as practicable classified as to the type of cases to be confined.

Sec. 9. Application for Registration and Issuance of License. — Application for registration of a hospital and for the issuance of a license for its operation and maintenance shall be filed with the Bureau of Medical Services on a form prescribed by it. Registration may be made and license issued upon compliance with the provisions of Section eight hereof and the rules and regulations prescribed by the licensing agency pursuant to the provisions of this Act.

SECTION 10. Inspection. — Permit to construct a hospital or a major portion thereof and license to operate and maintain the same shall be issued by the licensing agency only after a representative of the licensing agency has conducted an ocular inspection and certified that the applicant has satisfactorily complied with requisites prescribed in this Act. The license to operate and maintain a hospital shall be renewed every year upon payment of the prescribed fees.

SECTION 11. Revocation of License. — The licensing agency may suspend or revoke a license already issued for any of the following grounds: (a) repeated violation by the licensee of any provision of this Act or of any other existing law; (b) repeated violation of rules and regulations prescribed in the implementation of this Act; or (c) repeated failure to make necessary corrections or adjustments required by the licensing agency in the improvement of facilities and services.

SECTION 12. Hearing. — Any person, association, corporation, or any other private entity who has been refused a license to operate and maintain a hospital or whose license for such hospital has been suspended or revoked shall be entitled to an administrative hearing to be conducted by the Secretary of Health and his two undersecretaries to determine the justifiability of such denial, suspension or revocation of the license: provided, that the licensee may resort to the courts, as in other cases provided by law.

SECTION 13. Separate Licenses Required. — Separate licenses shall be required for hospitals or branches thereof maintained in separate premises, even though they are operated under the same management:
provided, however, that separate licenses shall not be required for separate buildings in the same compound: provided, further, that permits for construction or alteration of buildings within the same compound shall also be secured from the licensing agency to determine compliance with standards and requirements herein authorized.

SECTION 14. Licence not transferable. — License for the operation of hospitals shall not be transferable. The licensing agency shall be notified of any change in ownership, change of name of the hospital, and transfer of location and in the latter case, an application for a new license should be submitted.

SECTION 15. Rules and Regulations. — The Bureau of Medical Services acting as a licensing agency and subject to the approval of the Secretary of Health, shall promulgate rules and regulations to implement the provisions of this Act.

SECTION 16. Classification of Hospitals. — The licensing agency shall study and adopt a system of classifying hospitals in the Philippines as to: (1) general or special; (2) hospital services capabilities; (3) size or bed capacity and (4) class of hospital whether training or not.

SECTION 17. Fees. — Each applicant for a permit to construct a hospital shall pay the amount of five pesos as permit fee. A registration fee of five pesos and an annual license fee of ten pesos shall likewise be collected for each hospital and for each approved license: provided, that a government hospital shall be exempt from the payment of such fees. The amount herein collected shall be officially receipted by the licensing agency and shall constitute as a revolving fund for the use of the licensing agency.

SECTION 18. Penalties. — Any person, partnership, association, or corporation who establishes, operates, conducts, manages or maintains a hospital or hospital clinic within the meaning of this Act without first obtaining a license as provided for in this Act or violates any provision hereof shall be guilty of a misdemeanor, and upon conviction thereof shall be liable to a fine of not more than five hundred pesos for the first offense and not more than one thousand pesos for each subsequent offense, and each day that the hospital shall operate after the first conviction shall be considered a subsequent offense.

SECTION 19. Repeal. — Any law or laws or parts thereof inconsistent with the provisions of this Act are hereby repealed.

Sec. 20. Effectivity. — This Act shall take effect upon its approval.

Approved: June 19, 1965
Section 1. Declaration of Policy. - The State shall protect and promote the right to health of the people and instill health consciousness among them; adopt an integrated and comprehensive approach to health development, with priority for the underprivileged sick, elderly, disabled, women and children; endeavor to make essential goods, health and other social services available to all the people at affordable cost; establish and maintain an effective food and drug regulatory system; and undertake appropriate health manpower development and research, responsive to the country's health needs and problems.

Section 2. Mandate. - The Department shall be primarily responsible for the formulation, planning, implementation, and coordination of policies and programs in the field of health. The primary function of the Department is the promotion, protection, preservation or restoration of the health of the people through the provision and delivery of health services and through the regulation and encouragement of providers of health goods and services.

Section 3. Powers and Functions. - The Department shall:

1. Define the national health policy and formulate and implement a national health plan within the framework of the government's general policies and plans, and present proposals to appropriate authorities on national issues which have health implications;

2. Provide for health programs, services, facilities and other requirements as may be needed, subject to availability of funds and administrative rules and regulations;

3. Coordinate or collaborate with, and assist local communities, agencies and interested groups including international organizations in activities related to health;

4. Administer all laws, rules and regulations in the field of health, including quarantine laws and food and drug safety laws;

5. Collect, analyze and disseminate statistical and other relevant information on the country's health situation, and require the reporting of such information from appropriate sources;

6. Propagate health information and educate the population on important health, medical and environmental matters which have health implications;

7. Undertake health and medical research and conduct training in support of its priorities, programs and activities;

8. Regulate the operation of and issue licenses and permits to government and private hospitals, clinics and dispensaries, laboratories, blood banks, drugstores and such other establishments which by the nature of their functions are required to be regulated by the Department;

9. Issue orders and regulations concerning the implementation of established health policies; and

10. Perform such other functions as may be provided by law.

Section 4. Organizational Structure. - The Department shall consist of the Department Proper, National Health Facilities, Regional Offices, Provincial Health Offices, District Health Offices and Local Health Agencies.

Chapter 2

DEPARTMENT PROPER

Section 5. Department Proper. - The Department Proper shall be composed of the Office of the Secretary, the Office for Management Services, the Office for Public Health Services, the Office for Hospital and Facilities Services, the Office for Standards and Regulations, and the Executive Committee for National Field Operations.

Section 6. Office of the Secretary. - The Office of the Secretary shall be composed of the Secretary of
Health and his immediate staff; the undersecretary acting as Chief of Staff in the Office of the Secretary; the Assistant Secretary for Legal Affairs; the Assistant Secretary for Financial, Operations and Front Line Services Audit; and the Staff Services for the Secretary.

Section 7. Duties of the Undersecretary Acting as Chief of Staff. - The Undersecretary acting as Chief of Staff in the Office of the secretary, shall supervise the Assistant Secretary for Legal Affairs, the Assistant Secretary for Financial Operations, and Front Line Services Audit, and the Staff Support Services to the Secretary; and head the secretariat of the Executive Committee for National Field Operations.

Section 8. Duties of the Assistant Secretary for Legal Affairs. - The Assistant Secretary for Legal Affairs shall head the office that shall provide the Secretary with legal advice on all policy, program and operational matters of the Department; act as Counsel for the Department in cases in which it is a party; handle administrative cases against Department personnel and submit recommendations pertaining thereto; and review legislative proposals.

Section 9. Duties of the Assistant Secretary for Financial Operations. - The Assistant Secretary for Financial Operations, and Front Line Services Audit shall head the office that shall monitor the Department's financial affairs, internal operations, and the delivery of frontline services with a view to assuring the integrity of the Department's financial operations and the requirements of the Commission on Audit; optimizing the internal operating efficiency of the Department and its field offices; and ensuring that the Department's constituencies are provided front line services from the Department with the adequacy, quality, and efficiency that they are entitled to.

Section 10. The Staff Support Services. - The following Staff Support Services shall undertake such staff services intended to assist the Secretary in performing his functions;

(1) Community Health Service which shall provide services related to formulating and implementing plans and programs for coordinating with local governments and non-government organizations in health related activities, programs and projects;

(2) Public Information and Health Education Service which shall provide services related to formulating and implementing plans, programs, and projects for public education on health and for the timely and accurate public communication of Department policy on health issues;

(3) Health Intelligence Service which shall provide services related to the formulation of disease intelligence, assessment of the state of health of the country and development and maintenance of effective and comprehensive health information system to support planning and implementation of health programs;

(4) Internal Planning Service which shall provide the Department with necessary services related to planning, programming and project development;

(5) Foreign Assistance Coordination Service which shall provide staff services related to the development, coordination, monitoring, reporting and assessment of foreign assisted projects of the Department.

Section 11. Undersecretaries. - The Secretary shall be assisted by five (5) Undersecretaries who shall exercise the following functions;

(1) Advise the Secretary in the promulgation of Department orders, administrative orders and other issuances;

(2) Exercise supervision and control over the offices, services, operating units and individuals under their authority and responsibility;

(3) Recommend the promulgation of rules and regulations, consistent with Department policies, that will effectively implement the activities of operating units under their authority and responsibility;

(4) Coordinate the functions and activities of the units under their authority with that of the Undersecretaries and regional health directors;

(5) Exercise delegated authority on substantive and administrative matters related to the functions and activities of agencies under their office to the extent granted by the Secretary through
administrative issuances;

(6) Perform such other functions as may be provided by law or appropriately assigned by the Secretary.

CHAPTER 3
DEPARTMENT SERVICES

Section 12. Office for Management Services. - The Office for Management Services, headed by an Undersecretary who shall be supported by an Assistant Secretary, shall include six (6) staff services involved in providing support services to the Department Proper, field offices and attached agencies, which are as follows:

(1) Financial Services which shall provide the Department with staff advice and assistance on accounting, budget and financial matters; supervise the coordinated preparation and implementation of annual and long term financial and work plan and budget estimates; conduct periodic department-wide performance and financial reviews; and design and implement improvements in financial management systems, procedures and practices;

(2) Management Advisory Service which shall provide staff advice and assistance on internal control and management system improvement, including management information systems; supervise the establishment of a management accounting system, control procedures and management information systems for improved decision-making;

(3) Health Manpower Development and Training Service which shall formulate plans, policies, standards and techniques for the effective and efficient manpower development and training of Department personnel; provide consultative, training and advisory services to implementing agencies; conduct studies and research related to health manpower development and training; and develop plans and programs for improved recruitment, deployment, development, and maintenance of personnel;

(4) Procurement and Logistics Service which shall undertake the central procurement of the health care products and supplies needed by the Department and its field offices which are not produced by or beyond the production capacity of its in-house production facilities; and ensure the proper, adequate and timely flow of health products and services to the Department's field offices;

(5) Biological Production Services which shall formulate plans, policies, programs, standards and techniques for the processing, manufacture, standardization, and improvement of biological products for Department use; manufacture vaccines, sera, anti-iodins, and other biologicals; provide consultative training and advisory services to implementing agencies; and conduct studies and research related to biological production, distribution and use;

(6) Administrative Service which shall provide the Department with efficient and effective services relating to personnel, records, collections, disbursements, security, custodial work, and other general services not covered by the preceding Services.

CHAPTER 4
OFFICES AND BUREAUS

Section 13. Office for Public Health Services. - The Office for Public Health Services, headed by an Undersecretary, shall include ten (10) staff services involved in policy formulation, standards development, programs development, and program monitoring of disease control and service delivery programs implemented by the field offices. The Undersecretary for Public Health Services, who shall be supported by an Assistant Secretary, shall supervise the following:

(1) Maternal and Child Health Services which shall formulate plans, policies, programs, standards and techniques relative to maternal and child health; provide consultative training and advisory services to implementing agencies; and conduct studies and research related to health services for mothers and children;

(2) Tuberculosis Control Service which shall formulate plans, policies, programs, standards and techniques relative to control morbidity and mortality from tuberculosis; provide consultative,
training and advisory services to implementing agencies; and conduct studies and research related to tuberculosis;

(3) Family Planning Service which shall formulate plans, policies, programs, standards and techniques relative to family planning in the context of health and family welfare; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to family planning;

(4) Environmental Health Service which shall formulate plans, policies, programs, standards and techniques relative to environmental health and sanitation; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to environmental health;

(5) Nutrition Service which shall formulate plans, policies, programs, standards and techniques relative to nutrition services in the context of primary health care, provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to Nutrition;

(6) Dental Health Service which shall formulate plans, policies, programs, standards and techniques relative to dental health services; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to dental services.

(7) Malaria Control Service which shall formulate plans, policies, programs, standards and techniques relative to the control of malaria; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to malaria and its control;

(8) Schistosomiasis Control Service which shall formulate plans, policies, programs, standards and techniques relative to the control of schistosomiasis; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to schistosomiasis and its control;

(9) Communicable Disease Control Service which shall formulate plans, policies, programs, standards and techniques relative to the control of communicable diseases, other than the major causes or mortality and morbidity, such as leprosy, sexually transmitted diseases, filariasis and others; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to these other communicable diseases;

(10) Non-communicable Disease Control Services which shall formulate plans, policies, programs, standards and techniques relative to the control of non-communicable diseases; provide consultative, training and advisory services to implementing agencies; and conduct studies and research related to mental illness, cardiovascular-diseases, cancer, other non-communicable diseases, and occupational health.

Section 14. Office for Hospital and Facilities Services. - The Office for Hospital and Facilities Services, headed by an Undersecretary who shall be supported by an Assistant Secretary, shall include four (4) staff services involved in policy formulation, standards development, program monitoring and provision of specialized assistance in the operations of hospitals and the management of facilities, which are as follows:

(1) Hospital Operations and Management Service which shall formulate and implement plans, programs, policies, standards and techniques related to management improvement and quality control of hospital operations; provide consultative, training and advisory services to field offices in relation to the supervision and management of hospital components; and conduct studies and research related to hospital operations and management;

(2) Radiation Health Service which shall formulate and implement plans, policies, programs, standards and techniques to ensure radiation health safety; provide consultative, monitoring, training and advisory services to private and government facilities with radiation-emitting apparatus; and conduct studies and research related to radiation health;

(3) Hospital Maintenance Service which shall formulate and implement plans, programs, policies, standards and techniques related to assuring the proper maintenance of Department equipment; provide consultative, training and advisory services to implementing agencies in relation to preservation, repair and maintenance of medical and non-medical equipment of the Department;
and conduct studies and research related to equipment and facility maintenance;

(4) Health Infrastructure Service which shall formulate and implement plans, policies, programs, standards and techniques related to development and preservation of health infrastructure; provide consultative, training and advisory services to implementing agencies in relation to infrastructure projects to assure economical and efficient implementation; and conduct studies and research related to infrastructure development and utilization.

**Section 15. Office for Standards and Regulations.** - The Office for Standards and Regulations, headed by an Undersecretary and supported by an Assistant Secretary, shall include three (3) bureaus and one (1) national office that shall be responsible for the formulation of regulatory policies and standards over the various areas of concern in the health sector, whose implementation shall be the general responsibility of the Department's regional field offices. The same bureaus shall also be responsible for those areas of activity covered by regulatory policy to provide the Secretary with current information on the status of these regulated areas of activity and to provide the Secretary with a basis for preliminary evaluation of the efficiency of the Department's field offices in performing their regulatory functions. The same bureaus shall conduct studies and research pertinent to their areas of responsibility. In certain instances the bureaus may also perform consultative, training and advisory services to the practitioners and institutions in the area of regulated activity. The same bureaus and national office are the following:

(1) Bureau of Research and Laboratories which shall develop and formulate plans, standards and policies for the establishment and accreditation and licensing of laboratories; blood banks and entities handling biological products, provide consultative, training and advisory services to public and private laboratories; and conduct studies and research related to laboratory procedures and operations;

(2) Bureau of Food and Drugs which shall act as the policy formulation and sector monitoring arm of the Secretary on matters pertaining to foods, drugs, traditional medicines, cosmetics and household products containing hazardous substances, and the formulation of rules, regulations and standards in accordance with Republic Act 3720 (1963), as amended by Executive Order No. 175, s. 1987, and other pertinent laws for their proper enforcement; prescribe general standards and guidelines with respect to the veracity of nutritional and medicinal claims in the advertisement of food, drugs and cosmetics in the various media, to monitor such advertisements; advise the Department's field offices to call upon any erring manufacturer, distributor, or advertiser to desist from such inaccurate or misleading nutritional or medicinal claims in their advertising; should such manufacturer, distributor, or advertiser refuse or fail to obey the desistance order issued by the Bureau, he shall be subject to the applicable penalties as may be prescribed by law and regulations; the Bureau shall provide consultative, training and advisory services to all agencies and organizations involved in food and drug manufacturing and distribution with respect to assuring safety and efficacy of food and drugs; conduct studies and research related to food and drug safety; maintain a corps of specially trained food and drugs inspectors for assignment to the various field offices of the Department; while these inspectors shall be under the technical supervision and guidance of the Bureau, they shall be under the administrative supervision of the head of the field office to which they shall be assigned, the latter being responsible for regulatory program implementation within the geographic area of his jurisdiction;

(3) Bureau of Licensing and Regulation which shall formulate policies and establish the standards for the licensing and regulation of hospitals, clinics and other health facilities; establish standards that shall be the basis of inspections and licensure procedures of the Department's field offices; and provide consultative, training and advisory services to field offices on the conduct of licensing and regulatory functions over hospitals, clinics and other health facilities.

(4) National Quarantine Office which shall formulate and implement quarantine laws and regulations and, through its field offices, exercise supervision over rat-proof zones in designated international ports and airports and over medical examination of aliens for immigration purposes.
Republic of the Philippines  
Congress of the Philippines  
Metro Manila 

Thirteenth Congress  
Third Regular Session 

Begun and held in Metro Manila, on Monday, the nineteenth day of February, two thousand seven. 

REPUBLIC ACT NO. 9439  
April 27, 2007 

AN ACT PROHIBITING THE DETENTION OF PATIENTS IN HOSPITALS AND MEDICAL CLINICS ON GROUNDS OF NONPAYMENT OF HOSPITAL BILLS OR MEDICAL EXPENSES 

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

SECTION 1. It shall be unlawful for any hospital or medical clinic in the country to detain or to otherwise cause, directly or indirectly, the detention of patients who have fully or partially recovered or have been adequately attended to or who may have died, for reasons of nonpayment in part or in full of hospital bills or medical expenses.

SEC. 2. Patients who have fully or partially recovered and who already wish to leave the hospital or medical clinic but are financially incapable to settle, in part or in full, their hospitalization expenses, including professional fees and medicines, shall be allowed to leave the hospital or medical clinic, with a right to demand the issuance of the corresponding medical certificate and other pertinent papers required for the release of the patient from the hospital or medical clinic upon the execution of a promissory note covering the unpaid obligation. The promissory note shall be secured by either a mortgage or by a guarantee of a co-maker, who will be jointly and severally liable with the patient for the unpaid obligation. In the case of a deceased patient, the corresponding death certificate and other documents required for interment and other purposes shall be released to any of his surviving relatives requesting for the same: Provided, however, That patients who stayed in private rooms shall not be covered by this Act.

SEC. 3. Any officer or employee of the hospital or medical clinic responsible for releasing patients, who violates the provisions of this Act shall be punished by a fine of not less than Twenty thousand pesos (P20,000.00), but not more than Fifty thousand pesos (P50,000.00), or imprisonment of not less than one month, but not more than six months, or both such fine and imprisonment, at the discretion of the proper court.

SEC. 4. The Department of Health shall promulgate the necessary rules and regulations to carry out the provisions of this Act.

SEC. 5. If any provision of this Act is declared void and unconstitutional the remaining provisions hereof not affected thereby shall remain in full force and effect.

SEC. 6. All laws, decrees, orders, rules and regulations or part thereof inconsistent with this Act are hereby repealed or amended accordingly.

SEC. 7. This Act shall take effect fifteen (15) days after its publication in two national newspapers of general circulation.
IMPLEMENTING RULES AND REGULATIONS OF REPUBLIC ACT NO. 8344,
OTHERWISE KNOWN AS "AN ACT PENALIZING THE REFUSAL OF HOSPITALS AND MEDICAL CLINICS TO ADMINISTER APPROPRIATE INITIAL MEDICAL TREATMENT AND SUPPORT IN EMERGENCY OR SERIOUS CASES, AMENDING FOR THE PURPOSE BATAS PAMBANSA BILANG 702, OTHERWISE KNOWN AS AN ACT PROHIBITING THE DEMAND OF DEPOSITS OR ADVANCE PAYMENTS FOR THE CONFINEMENT OR TREATMENT OF PATIENTS IN HOSPITALS AND MEDICAL CLINICS IN CERTAIN CASES"

WHEREAS, the Tenth Congress of the Republic of the Philippines enacted Republic Act No. 8344 on June 05, 1997;

WHEREAS, the President of the Republic of the Philippines signed into law R.A. 8344 on August 25, 1997;

WHEREAS, under Section 5 of R.A. 8344, the Department of Health (DOH) is mandated to promulgate the necessary rules and regulations to carry out the provisions of the aforementioned law.

NOW THEREFORE, pursuant to the provisions of R.A. 8344 authorizing the Department of Health to promulgate the necessary rules and regulations, the following are hereby issued:

1. Section 1 of said Act provides: "In emergency or serious cases, it shall be unlawful for any proprietor, president, director, manager or any other officer, and/or medical practitioner or employee of a hospital or medical clinic to request, solicit, demand or accept any deposit or any other form of advance payment as a prerequisite for confinement or medical treatment of a patient in such hospital or medical clinic or to refuse to administer medical treatment and support as dictated by good practice of medicine to prevent death or permanent disability: Provided, That by reason of inadequacy of the medical capabilities of the hospital or medical clinic, the attending physician may transfer the patient to a facility where appropriate care can be given, after the patient or his next of kin consents to said transfer: Provided, however, That when the patient is unconscious, incapable of giving consent and/or unaccompanied, the physician can transfer the patient even without his consent, Provided, further, That such transfer shall be done only after the necessary emergency treatment and support have been administered to stabilize the patient and after it has been established that such transfer entails less risks than the patient's continued confinement: Provided, finally, That strict compliance with the foregoing procedure on transfer shall not be construed as a refusal made punishable by this Act."

2. For the purpose of implementing the above, the following definitions are provided:

2.1 Emergency - A condition or state of patient wherein based on the objective findings of a prudent medical officer on duty for the day there is immediate danger and where delay in initial support and treatment may cause loss of life or cause permanent disability to the patient.

2.2 Serious Case - refers to a condition of a patient characterized by gravity or danger wherein based on the objective findings of a prudent medical officer on duty for the day when left unattended to, may cause loss of life or cause permanent disability to the patient.

2.3 Confinement - a state of being admitted in a hospital or medical clinic for medical observation, diagnosis, testing, and treatment consistent with the capability and available facilities of the hospital or clinic.

2.4 Hospital - a facility devoted primarily to the diagnosis, treatment and care of individuals or other medical and nursing care. It shall also be construed as any institution, building or place where there are facilities and personnel for the continued and prolonged care of patients. The hospital shall be duly licensed by the Bureau of Licensing and Regulation of the DOH.

2.5 Emergency Treatment and Support - any medical or surgical measure within the capability of a hospital or medical clinic that is administer by qualified health care professionals to prevent the death or permanent disability of a patient. (In determining the capability of a hospital or clinic, the standards and the classification of these facilities set by the DOH Bureau of Licensing and Regulation shall be used).
2.6 Medical Clinic - a place in which patients can avail of medical consultation or treatment on an outpatient basis.

2.7 Permanent Disability - a condition of physical disability as defined under Article 192-C and Article 193-B and C of Presidential Decree No. 442, as amended, otherwise known as the Labor Code of the Philippines.

2.8 Stabilize - the provision of necessary care until such time that the patient may be discharged or transferred to another hospital or clinic with a reasonable probability that no physical deterioration would result from or occur during such discharge or transfer.

3. Transfer of Patients - Section 3 of R.A. 8344 provides: "After the hospital or medical clinic mentioned above shall have administered medical treatment and consistent with the needs of the patients preferably to a government hospital, specially in the case of poor or indigent patients."

3.1 The transferring and receiving hospital, shall be as much as practicable, be within ten (10) kilometer radius of each other.

3.2 The transfer of patients contemplated under this Act shall at all times be properly documented.

3.3 Hospitals may require a deposit or advance payment when the patient is no longer under the state of emergency and he/she refuses to be transferred.

4. All hospitals shall use a Uniform Discharge/Transfer Slip for cases covered by RA 8344 which shall include the following information:

4.1 Admission Form of transferring hospital.

4.2 Transfer Form of Transferring Hospital, to include but not necessarily limited to the following information:

4.2.1 Vital signs

4.2.2 Name of Attending Physician

4.2.3 Treatment given to patient

4.2.4 Name of receiving hospital

4.2.5 Name of contact person and approving official at receiving hospital

4.2.6 Consent of the patient or companion. In case of an unaccompanied minor or patient, they may be transferred without consent provided that the provisions of Section 1 of RA 8344 is strictly observed.

The hospital shall endeavor to use all forms of media to contact the next of kin of the unaccompanied minor or patient.

4.2.7 In case of refusal of transfer, the name of the hospital, the name(s) of persons who refused and the reason(s) for the refusal.

A copy of the Uniform Discharge/Transfer Slip is hereto attached as Annex A*.

5. Penal Provisions - any official, medical practitioner or employee of the hospital or medical clinic who violates the provisions of RA 8344 shall, upon conviction by final judgment, be punished by imprisonment of not less than six (6) months and one (1) day but not more than two (2) years and four months, or a fine of not less than Twenty Thousand Pesos (P20,000.00) but not more than One Hundred Thousand Pesos (P100,000.00) or both at the discretion of the court: Provided, however, that if such violation was committed pursuant to an established policy of the hospital or clinic or upon instruction of its management, the director or officer of such hospital or clinic responsible for the formulation and imprisonment of four (4) to six (6) years, or a fine of not less than One Hundred Thousand Pesos (P100,000.00), but not more than Five Hundred Thousand Pesos (P500,000.00) or both, at the discretion of the court.

6. In order to demonstrate compliance with the Act's provisions, all hospitals and medical clinics are
instructed to institute the following measures:

6.1 A copy of the law and this implementing rules and regulations should be displayed prominently at hospital emergency rooms, hospital admission, counters and medical clinic premises.

6.2 Hospital and clinic managers shall establish billing and collection procedure for treatment or confinement of emergency and serious cases which shall not commence until the essential appropriate treatment of such cases has been completed.

6.3 Hospital and clinic managers shall instruct their personnel to provide prompt and immediate medical attention to emergency and serious cases without any prior requirements for payment or deposit.

6.4 It is clarified that the law and this administrative order covers only the provision of medical and surgical goods and services, and do not cover the provision of non-medical amenities which have nothing to do with the treatment of the emergency or serious case. The provisions of and payment for these non-medical amenities shall be subject to appropriate institutional business practice.

6.5 Alleged violations of the Act and this Order may be reported to the Bureau of Licensing and Regulations, Office for Standards and Regulations, Department of Health, Sta. Cruz, Manila, or to the nearest Regional Health Office which shall immediately conduct a fact-finding investigation. The findings shall be referred to the appropriate fiscal for criminal prosecution. Persons convicted of violation shall be punished in accordance with the Act.

6.6 At the instance of the Bureau of Licensing and Regulation, Administrative proceedings may also be pursued against erring clinics or hospitals that could lead to either suspension or revocation of appropriate licenses.

These Rules and Regulations shall take effect fifteen (15) days after publication in the Official Gazette or in a newspaper of general circulation.

Adopted: February 18, 1998
Section 1. All government and private hospitals or clinic duly licensed to operate as such are hereby required to render immediate emergency medical assistance and to provide facilities and medicine within its capabilities to patients in emergency cases who are in danger of dying and/or who may have suffered serious physical injuries.

Sec. 2. The expenses and losses of earnings incurred by a private hospital or clinic for medicines, facilities and services beyond first aid extended to emergency cases as required herein, and not to exceed fifty thousand pesos per year, shall be deductible expenses and losses for income tax purposes which may be carried over for a period of five years, any provision of law or regulation to the contrary notwithstanding.

Sec. 3. Any hospital director, administrator, officer-in-charge or physician in the hospital, medical center or clinic, who shall refuse or fail without good cause to render the appropriate assistance pursuant to the requirements of section one after said case had been brought to his attention, or any nurse, midwife or medical attendant who shall refuse to extend the appropriate assistance, subject to existing rules, or neglect to notify or call a physician shall be punished by imprisonment of one month and one day to one year and one day, and a fine of three hundred pesos to one thousand pesos, without prejudice to the provisions of Republic Act Numbered Twenty-three hundred eighty-two in the case of physicians.

In the case of Government hospitals, the imposition of the penalty upon the person or persons guilty of the violations shall be without prejudice to the administrative action that might be proper.

In the case of private hospitals, aside from the imposition of penalty upon the person or persons guilty of the violations, the license of the hospital to operate shall, whenever justified, be suspended or revoked.

Sec. 4. Subject to the approval of the Secretary of Health, the Bureau of Medical Services shall promulgate the necessary rules and regulations to carry out the provisions of this Act.

Sec. 5. Any law or laws or parts thereof inconsistent with the provisions of this Act is hereby repealed.

Sec. 6. This Act shall take effect upon its approval.

Approved: October 23, 1972