

August 27, 2019

Honorable **ANGELINA D.L. TAN, M.D.**
Chairperson
Committee on Health
House of Representatives
Quezon City

ISHIA XEQUIEL Z. OROGA
09-09-19

Dear Representative Tan:

The Department of Social Welfare and Development (DSWD) supports the various bills [HB Nos. 1140, 2309, 2511, 2536, 2540, 2543, 2849, 2891, 3114, 3273 & 3345], which seek the establishment of **Malasakit Centers** all over the country.

We believe that the Establishment of Malasakit Centers will serve as a one-stop shop for indigent Filipinos who are in need of medical assistance and other related social services, including DSWD Assistance to Individuals in Crisis Situations (AICS). In effect it will reduce the out-of-pocket expenditures and minimize transportation and other incidental costs of the qualified beneficiaries, which would make the delivery of basic services more efficient, responsive and sustainable.

To contribute to the bills' enhancement, we are recommending the following:

1. Consolidate the eleven (11) bills into one.

2. **Explanatory Note**

2.1 HBN 1140 (Rep. Ouano-Dizon)

Use "**Persons with Disability**" instead of "**disabled**".

2.2 HBN 2543 (Rep. Villafuerte, Jr.)

On **Paragraph 3, line 4**, kindly amend '**Masakit**' Center to '**Malasakit**' Center, which will be read as follows:

*"Seen to effectively ease the process of availing government services for patients, more **Malasakit** Centers were established."*

3. **Sec. 3 – Definition of Terms**

3.1 On HBN 2543 (Rep. Villafuerte, Jr.)

- 3.1.1 **Page 3, letter (a):** DOH Hospital, remove repeated phrase 'refers to a'; and
- 3.1.2 **Page 4, letter (g):** Medical Assistance, 'guaranty' should be spelled as 'guarantee'

3.2 On HBN 2849 (Reps. Villaraza-Suarez and Suarez)

- 3.2.1 On **letter (d):** Indigent Patient, to change the term "**identified**" to "**assess**", which will be read as follows:

*"Indigent patient refers to patient...as **assessed** by DSWD, LGU social worker or the medical social worker of the health facility; and*

- 3.2.2 On **letter (i):** Poor Patient, **item (1)**, include "**children victim-survivors as defined by recent laws, such as RA 9208 (Anti-Trafficking in Persons Act of 2003) as amended by RA 10364 (The Expanded Anti-Trafficking in Persons Act of 2012), RA 9975 (Anti-Child Pornography Act), RA 9995 (Anti-Photo and Video Voyeurism Act of 2009) and RA 10175 (Cybercrime Prevention Act of 2012)**";

4. **Sec. 4 – Malasakit Centers**

4.1 HBN 2540 (Rep. Daza)

Item (4) provides that "*PCSO shall be in-charge of providing medical and other assistance.*" On this, may we be clarified on the difference of functions between the Department of Health (DOH) and that of the Philippine Charity Sweepstakes Office (PCSO).

4.2 HBN 2309 (Rep. Gatchalian)

Page 5, item (3), to consider **establishing a referral system with DOH and PhilHealth through the Malasakit Center in order to avoid duplication of services / assistance provided to beneficiaries.**

5. **Sec. 5 – Provision of Medical Assistance** (HB Nos. 2309, 2511, 2540, 2543, 2849, 3114 and 3273)

- ✓ For **Persons with Disability**
- Consider including **Rehabilitation Services** aside from the assistive devices for Persons with Disability specifically with physical impairment; and
 - Indicate the **provision of physical, occupational and speech therapy interventions / services for indigent children who have invisible disability.** These services are very expensive including the neuropsychological

services for people with non-apparent disabilities, such as autism spectrum disorder.

✓ **On Financial-Medical Assistance**

- Provide guidance as to the limit that can be charged against the Department's annual appropriations;
- Transfer the DSWD's provision of outright financial-medical assistance to beneficiaries to the DOH through the Malasakit Centers. DSWD should focus on other needs of beneficiaries such as the case management of VAWC, torture victims, and other related cases who are at the same time patients and center beneficiaries;
- Establish clear guidelines on the assessment of eligible clients;
- Institutionalize financial assistance by establishing and strengthening the medical social service office in every hospital;
- Securing the regularization of social workers, psychologists and other allied profession to deliver the provision of medical assistance in the Malasakit Center;

6. **Sec. 9 – Donations from Non-Governmental Organizations and the Private Sector** provides that: ***"The DOH may solicit and receive donations from the private sector for medical assistance to indigent and poor patients...xxx"***.

- ✓ With this, the DOH is still duty-bound to apply for a solicitation permit from DSWD.

7. **Sec. 9 – Functions of Partner Agencies** (HBN 1140, Rep. Ouano-Dizon and HBN 2891, Rep. Nieto)

- ✓ On **letter (b), item (ii)**, provides that: ***"DSWD furnish necessary equipment to the Center for its conduct of operation."***
 - To clarify what kind of equipment the DSWD is required to furnish the Malasakit Centers.

8. **Other Comments:**

- ✓ Add a budget provision for hiring of additional DSWD staff for deployment to hospitals;
- ✓ Equipment for use of staff to be deployed to the Center should be added to the budget appropriation of the government hospital for the operation of the Center;
- ✓ Another option on the deployment of staff is the turn-over of the function of DSWD to provide medical financial assistance to the DOH since it is more aligned to their mandate. The budget of DSWD for medical assistance can be transferred to the DOH.

- DSWD can still retain the AICS Program on provision of funeral/burial and transportation expenses;
- ✓ Creation of a legislative oversight committee to review the implementation of the law, determine if there are weaknesses in the implementation and to recommend necessary legislative interventions; and
 - ✓ Harmonize the bills with the Universal HealthCare Act of PhilHealth and the programs and services of the DSWD and PCSO. If the programs and services of these agencies will be harmonized there will be more seamless, convenient and very sensible health care services provided to the public. We also recommend that DSWD will provide the transportation assistance while PhilHealth and PCSO will provide all medical needs of the client.

For the Committee's consideration.

Very truly yours,



ROLANDO JOSELITO D. BAUTISTA

Secretary

Date: _____