



S E N A T E

S. No. 1520

---

PREPARED BY THE COMMITTEE ON HIGHER, AND TECHNICAL  
AND VOCATIONAL EDUCATION, WITH SENATORS SOTTO  
III, RECTO, VILLANUEVA, DELA ROSA, ANGARA, LAPID,  
PACQUIAO, LACSON, TOLENTINO, REVILLA, VILLAR,  
GATCHALIAN, ZUBIRI, GORDON, GO AND POE AS  
AUTHORS

---

AN ACT ESTABLISHING A MEDICAL SCHOLARSHIP  
AND RETURN SERVICE PROGRAM FOR  
DESERVING STUDENTS AND APPROPRIATING  
FUNDS THEREFOR AND FOR OTHER PURPOSES

*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  
2 the “Doktor Para sa Bayan Act”.

3           SEC. 2. *Declaration of Policy.* – It is hereby declared  
4 the policy of the State to protect and promote the right to  
5 health of the people through the formulation and  
6 implementation of policies and strategies for the

1 appropriate generation, recruitment, retraining, regulation,  
2 retention, and reassessment of health workforce for the  
3 needs of the population. It is also the declared policy of the  
4 State to promote social justice by expanding access to  
5 quality education and creating opportunities for  
6 underprivileged individuals.

7 Towards these goals, the State shall institutionalize a  
8 medical scholarship program for deserving and qualified  
9 aspiring, new, and continuing medical students, that will  
10 establish access for them to pursue education in the field of  
11 medicine, integrate them, upon qualifying as doctors of  
12 medicine, into the public health care system to provide  
13 quality basic, promotive, preventive and curative health  
14 care services in under-served, remote, economically  
15 underdeveloped, distressed, conflict-afflicted and/or  
16 geographically isolated and disadvantaged areas.

17 *SEC. 3. Establishment of the Medical Scholarship and*  
18 *Return Service Program.* – There shall be established a  
19 Medical Scholarship and Return Service Program (MSRSP)  
20 for poor but deserving Filipino students in state

1 universities and colleges (SUCs) and in partner private  
2 higher education institutions (PHEIs) in regions where  
3 there are no SUCs offering medicine: *Provided*, That the  
4 applicant has satisfied the qualifications enumerated in  
5 Section 5 of this Act.

6 The Commission on Higher Education (CHED) may  
7 designate more than one (1) partner higher education  
8 institutions (HEIs) in the region, including regions where  
9 there are existing SUCs offering medicine as deemed  
10 necessary, upon consultation with the Department of  
11 Health (DOH).

12 SEC. 4. *Coverage of the Medical Scholarship and*  
13 *Return Service Program.* – The student financial assistance  
14 under the MSRSP shall cover the following:

15 (a) Tuition, laboratory, miscellaneous, and other  
16 related school fees;

17 (b) Allowance for prescribed books, supplies and  
18 equipment;

19 (c) Clothing or uniform allowance;

1 (d) Allowance for dormitory or boarding house  
2 accommodation, or transportation allowance, whichever is  
3 more applicable;

4 (e) Internship fees, including financial assistance  
5 during the required internship period;

6 (f) Medical board review fees and licensure fees:  
7 *Provided*, That the support shall only be limited to the first  
8 licensure examination of the scholar concerned taken  
9 within one (1) year after graduation or completion of  
10 post-graduate internship and other academic requirements,  
11 as appropriate;

12 (g) Annual medical insurance; and

13 (h) Subsistence or living allowance.

14 *SEC. 5. Qualification Requirements.* – An applicant to  
15 the MSRSP shall possess the following qualifications:

16 (a) Must be a natural-born or naturalized Filipino  
17 citizen residing in the Philippines;

18 (b) Must have a family income not sufficient to  
19 support medical education;

1           (c) Must be a graduating student or a graduate of an  
2 appropriate undergraduate program identified as a  
3 prerequisite for a Doctor of Medicine degree from any  
4 CHED-recognized HEI or a direct entrant to the integrated  
5 pre-medical and medical degree program, such as the  
6 seven-year Integrated Liberal Arts Medicine (INTARMED)  
7 Program of the University of the Philippines, who  
8 satisfactorily completes the first two (2) years of the  
9 program: *Provided*, That deserving incoming second year  
10 medical students and those in the higher year levels of the  
11 Doctor of Medicine program may also apply for the  
12 MSRSP, as long as they have maintained a general  
13 weighted average of at least a passing grade in the past  
14 terms preceding their scholarship application;

15           (d) Must have passed the entrance examinations and  
16 other related requirements for admission for a Doctor of  
17 Medicine degree in the SUC or PHEI where the scholar  
18 intends to enroll, as determined by CHED and the DOH;  
19 and

1 (e) Must have obtained the National Medical  
2 Admission Test (NMAT) score mandated by CHED and the  
3 cut-off score required by the SUC or PHEI where the  
4 student intends to enroll in.

5 *Provided*, That qualified applicants from municipalities  
6 without government physicians shall be prioritized in the  
7 allocation of slots to ensure the assignment of one (1)  
8 doctor for every town in the country: *Provided, further*,  
9 That if no resident from a municipality without  
10 government physician qualifies for the program, the  
11 allotted slot for that municipality may be assumed by an  
12 applicant coming from another municipality in the same  
13 province: *Provided, finally*, That the student who assumed  
14 the slot of another municipality shall be required to render  
15 service in the municipality where the slot was originally  
16 intended, if no threat to the scholar's life is present.

17 SEC. 6. *Conditions for the Grant of Scholarship.* –  
18 Students accepted to the MSRSP shall be subject to the  
19 following conditions:

1           (a) Must sign an agreement containing the terms and  
2 conditions for the grant of the scholarship as provided  
3 under this Act and as may be prescribed in the  
4 implementing rules and regulations;

5           (b) Must carry the full load of subjects prescribed per  
6 semester by the SUC or the PHEI concerned, and shall  
7 under no circumstance, drop a course which will result in  
8 underloading;

9           (c) Must finish the entire Doctor of Medicine Program  
10 within the prescribed time frame of the SUC or PHEI  
11 where the scholar is enrolled in, subject to the retention  
12 policies of the SUC or the PHEI: *Provided*, That the  
13 scholar may be allowed, for valid and justifiable reasons, to  
14 file a leave of absence for one (1) academic year;

15           (d) Must undertake the required medical internship  
16 in a DOH-accredited public health facility or hospital upon  
17 graduation from a four-year Doctor of Medicine Program,  
18 subject to the Association of Philippine Medical Colleges  
19 (APMC) Intern Matching Program or the rules and  
20 regulations of the SUC or PHEI concerned;

1           (e) Must take the board examination within a  
2 maximum period of one (1) year after completion of an  
3 internship program; and

4           (f) Must agree to render return of service as provided  
5 under Section 8 of this Act.

6           SEC. 7. *Termination of Scholarship and Penalties.* –

7 The grant of benefits under the MSRSR shall be  
8 terminated and the scholar shall repay the full cost of  
9 scholarship and related benefits received in case of the  
10 following circumstances:

11           (a) If the scholar fails to comply with any of the  
12 conditions for the grant of scholarship as provided under  
13 Section 6 of this Act;

14           (b) If the scholar accepts another scholarship from  
15 other government or private agencies or entities while  
16 enjoying the benefits under this Act;

17           (c) If the scholar fails to meet the academic  
18 requirements of the SUC or the PHEI or to complete the  
19 course within the prescribed period without valid cause as

1 may be determined by the SUC or PHEI, CHED or DOH:

2 *Provided*, That instead of repaying in cash the full cost of

3 the scholarship and related expenses, the terminated

4 scholar may opt to repay the same in kind by working in

5 the public health sector for a period equivalent to the

6 number of years the scholarship has been availed:

7 *Provided, further*, That the alternative return service shall

8 exclude the period of internship and residency training

9 that is undertaken in a private health institution or

10 facility; and

11 (d) While being a scholar, the scholar commits gross

12 misconduct in a manner that would bring significant

13 damage to the SUC or PHEI concerned or to the

14 community as a whole.

15 SEC. 8. *Mandatory Return Service and Integration*

16 *into the Public Health and Medical Service System.* –

17 Within one (1) year from the passing of the licensure

18 examinations for physicians, the scholar shall serve in a

19 government public health office or government hospital in

1 the scholar's hometown, province or region or, in the  
2 presence of threat for his/her safety, in any underserved  
3 municipality determined by the DOH as a priority area, for  
4 a period equivalent to the number of years prescribed  
5 under Section 26 of Republic Act No. 11223, otherwise  
6 known as the "Universal Health Care Act": *Provided*, That  
7 scholars from municipalities with no government  
8 physicians shall render a return service work in the  
9 scholar's hometown: *Provided, further*, That the scholar  
10 who assumed the slot of another municipality where no  
11 resident qualified to be a scholar shall render a return  
12 service work in the same municipality where the slot was  
13 originally intended: *Provided, further*, That in all cases, the  
14 scholar shall only be required to serve in such municipality  
15 if no threat to the scholar's life is present: *Provided*,  
16 *further*, That such mandatory return service and  
17 integration into the public health and medical service  
18 system under this Act shall be separate and distinct  
19 from the mandatory post-graduate internship in a  
20 DOH-accredited public health facility required by

1 Professional Regulation Commission (PRC) as a  
2 prerequisite for taking the Physician Licensure  
3 Examination (PLE): *Provided, further,* That the number of  
4 years served by the scholar in the public health and  
5 medical service system as part of the return service  
6 requirements, if any, of the SUC or PHEI concerned, or  
7 under the scholar's residency training, or residency  
8 training undertaken in a private health facility in the  
9 province where there is no public health facility available,  
10 or health or medical research within the Philippines in a  
11 public institution or any international organization  
12 accredited by DOH for work for the underprivileged sectors  
13 within the Philippines or full-time teaching in a public  
14 institution shall be counted in the required number of  
15 years of return service under this Act.

16 In the event that a physician-scholar fails or refuses  
17 to serve the return service required under this Act, he/she  
18 shall be required to pay the full cost of the scholarship,  
19 including other benefits and related expenses incurred by  
20 reason of participation in the scholarship program. In case

1 of non-payment, the PRC shall deny the renewal of the  
2 physician's license: *Provided, finally,* That the sanction  
3 shall not apply to physicians who fail to comply with the  
4 required return service on account of, or by reason of,  
5 severe or serious illness.

6 In the event that a scholar has failed to obtain a  
7 passing grade in his/her PLE within five (5) years from the  
8 time he/she has completed his/her mandatory internship  
9 program, the scholar shall have the option to pay the full  
10 cost of the scholarship and other related expenses, or in  
11 lieu thereof, be integrated into the public health and  
12 medical service system in accordance with this section.

13 *SEC. 9. Integration of All Nationally-Funded Medical*  
14 *Scholarship Programs.* – Upon the effectivity of this Act,  
15 all nationally-funded medical scholarship programs shall  
16 be harmonized, rationalized and consolidated under the  
17 MSRSP. The harmonization, rationalization and consolidation  
18 of scholarship programs under the MSRSP shall be in  
19 coordination with the UniFAST Board created under

1 Republic Act No. 10687 or the “Unified Student Financial  
2 Assistance System for Tertiary Education (UniFAST) Act”.

3       SEC. 10. *Determination of Number and Allocation of*  
4 *Scholars to be Admitted.* – Every five (5) years from the  
5 effectivity of this Act, the DOH and CHED shall, upon  
6 assessing the shortage of health human resource workforce  
7 in the country against the ideal standards and the  
8 National Health Human Resource Master Plan created  
9 under Section 23 of Republic Act No. 11223 or “Universal  
10 Health Care (UHC) Act”, and upon consultation with  
11 participating SUCs and PHEIs, the Department of Budget  
12 and Management (DBM), and the PRC, shall determine  
13 the number and geographical allocation of scholars to be  
14 admitted every school year allocating at least one (1)  
15 scholarship slot in municipalities without government  
16 physicians: *Provided*, That in determining the allocation  
17 quota of the scholars to be admitted to the program,  
18 utmost priority is given to regions with the low doctor-to-  
19 population ratios: *Provided, finally*, That in order to ensure  
20 an adequate number of competent human resource for

1 health for the entire country, the DOH shall submit to  
2 Congress the National Health Human Resource Master  
3 Plan, and any updates thereto, in accordance with the  
4 UHC Law.

5       SEC. 11. *Training while Serving the Mandatory*  
6 *Return Service.* – The CHED and DOH shall develop  
7 programs for the continuous training of scholars while  
8 serving the mandatory return service under this Act.

9       SEC. 12. *Medical Schools and Plantilla Positions.* – In  
10 order to have a holistic solution and address the scarcity of  
11 doctors in the country, the CHED, in coordination with  
12 DOH, shall ensure that each region shall have at least one  
13 (1) medical school. For this purpose, the CHED shall also  
14 streamline the requirements for the application for  
15 authority to offer Doctor of Medicine Program. The CHED  
16 and DOH shall also issue the appropriate guidelines within  
17 sixty (60) days from the effectivity of this Act to facilitate  
18 the partnership between SUCs and DOH hospitals with a  
19 view of increasing the number of medical schools  
20 throughout the country with one (1) region having at least

1 one (1) state-operated medical school: *Provided*, That  
2 within three (3) years from the effectivity of this Act, there  
3 shall be a state-operated medical school in at least half of  
4 the regions with no existing state-operated medical school:  
5 *Provided, finally*, That within five (5) years from the  
6 effectivity of this Act, there shall be at least one (1) state-  
7 operated medical school in each region in the country.

8 In addition, the DBM, DOH, and LGUs where  
9 applicable shall ensure that all scholars required to render  
10 return service under this Act shall be appointed to  
11 appropriate plantilla positions commensurate to their  
12 merit and fitness.

13 SEC. 13. *Funding*. – The amount necessary to carry  
14 out the implementation of this Act shall be charged against  
15 the current year’s appropriation of the participating SUC,  
16 DOH and CHED.

17 Thereafter, the amount necessary for the continuous  
18 implementation of the medical scholarship provided under  
19 this Act shall be included in the scholarship program of

1 SUCs and CHED in the annual General Appropriations  
2 Act.

3       SEC. 14. *Transitory Provisions.* – Upon the effectivity  
4 of this Act, current scholars under the existing medical  
5 scholarship programs of DOH and CHED shall  
6 automatically be eligible to avail the benefits under this  
7 Act.

8       SEC. 15. *Implementing Rules and Regulations.* –  
9 Within one hundred eighty days (180) days from the  
10 effectivity of this Act, the Secretary of Health and the  
11 Chairman of CHED, in consultation with various SUCs  
12 and PHEIs and other relevant stakeholders, shall jointly  
13 promulgate the rules and regulations necessary for the  
14 effective implementation of this Act. In addition, the  
15 implementing rules and regulations shall also provide for  
16 the most efficient and expeditious process of releasing the  
17 benefits provided under this Act either directly to the  
18 students or to the SUC or PHEI concerned, whether  
19 through a voucher system which can be used throughout  
20 the country or otherwise.

1           SEC. 16. *Separability Clause.* – If any part or  
2 provision of this Act shall be held invalid or  
3 unconstitutional, the other parts or provisions hereof that  
4 are not affected shall remain in full force and effect.

5           SEC. 17. *Repealing Clause.* – All laws, decrees, or  
6 rules inconsistent with this Act are hereby repealed or  
7 modified accordingly.

8           SEC. 18. *Effectivity Clause.* – This Act shall take  
9 effect fifteen (15) days after its publication in the *Official*  
10 *Gazette* or in at least two (2) newspapers of general  
11 circulation.

Approved,