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OFFICE OF THE SANGGUNIANG PANLALAWIGAN SECRETARY

RAMON V. GUICO III MARK ROXM DG. LAMBINO PHILIP THEODORE E. CRUZ HAIDEE S. PACHECO JERRY AGERICO B. ROSARIO OUIE Q. SISON CAROLYN D. SISON

RAUL R. SABANGAN

VERNAT. NAVA-PEREZ Secretary to the Sanggunian

CERTIFICATION

TO WHOM IT MAY CONCERN:

THIS IS TO CERTIFY that at the regular session duly constituted of the Sangguniang Panlalawigan, Province of Pangasinan, held on July 22, 2024 at the Session Hall, Capitol Building, Lingayen, Pangasinan, the following provincial ordinance was approved:

Authored by SP Member Shiela Marie F. Baniqued and co-authored by SP Member Jerry Agerico B. Rosario

PROVINCIAL ORDINANCE NO. 328-2024

AN ORDINANCE INSTITUTIONALIZING THE ESTABLISHMENT AND OPERATIONALIZATION OF THE PROVINCEWIDE HEALTH SYSTEM, INCLUDING ITS MANAGEMENT SUPPORT SYSTEMS, AND APPROPRIATING FUNDS THEREOF

WHEREAS, Section 11, Article XIII of the 1987 Constitution declared that "The state shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health, and other social services available to all people at an affordable cost. There shall be a priority for the needs of the underprivileged, sick, elderly, disabled, women, and children. The state shall endeavor to provide free medical care to paupers";

WHEREAS, Section 16 of the Local Government Code of 1991 states that every local government unit (LGU) shall exercise its powers expressly granted for its efficient and effective governance and those which are essential to the promotion of the general welfare, as such, under Section 33 for cooperative undertakings, LGUs may group themselves, consolidate, or coordinate their efforts, services, and resources for purposes commonly beneficial to them. In support of such undertakings, the local government units involved may, upon approval of the Sanggunian concerned after a public hearing conducted for the purpose, contribute funds, real estate, equipment, and other kinds of property and appoint or assign personnel under such terms and conditions as may be agreed upon by the participating local units through Memoranda of Agreement;

WHEREAS. Section 19, Chapter V of the Republic Act No. 11223, otherwise known as the Universal Health Care (UHC) Act, recognizes the importance of integration of local health systems into a province-wide health system, consisting of a component city and municipal health systems, to ensure effective and efficient delivery of population-based and individual-based health services.



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WHEREAS, Section 20 of Chapter V of the UHC Act, states that the province-wide Health Systems, shall pool and manage, through a special health fund, all resources intended for health services to finance population-based and individual-based health services, health systems operating costs, capital investments, and remuneration of additional health workers and incentives for all health workers.

WHEREAS, the UHC Act seeks to address health system fragmentation and to reorient the health system towards primary health care, primarily through the integration of local health systems into province-wide and city-wide health systems.

WHEREAS, the Provincial Government of Pangasinan is firmly committed to improving the overall management of its local health system, in coordination with civil society and non-health agencies, towards ensuring access to quality and affordable health care and financial risk protection of its people; guaranteeing decent predictable income, career advancement opportunities, and job security and satisfaction of its health care workers, and assuring health care providers compliance to quality and performance standards.

WHEREAS, the Provincial Government of Pangasinan and its component LGUs commit to invest, operationalize and fully implement all local health systems reforms endeavored in the UHC Act, particularly those concerning local health systems integration, the establishment, and management of a Special Health Fund (SHF), as a strategy to achieve its health system goals.

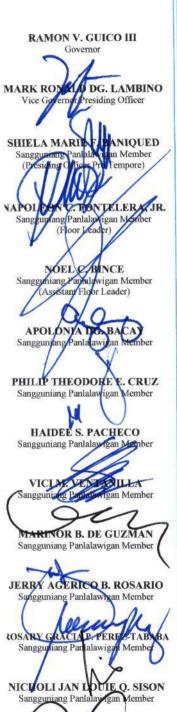
NOW, THEREFORE, be it ORDAINED as it is hereby ORDAINED by the Sangguniang Panlalawigan of Pangasinan in session duly assembled that:

ARTICLE I. GENERAL PROVISIONS

SECTION 1. Title. This Ordinance shall be known as the "INSTITUTIONALIZATION OF THE PROVINCE-WIDE HEALTH SYSTEM OF PANGASINAN".

The Province of Pangasinan recognizes the importance of integrating the management, delivery, and financing of health care services as a means to improve health outcomes. To sustain the reforms initiated by the province under the Universal Health Care (UHC) Act of 2019 in establishing an integrated local health system, this Ordinance is hereby enacted.

SECTION 2. Declaration of the Policy. It is the policy of the State to protect and promote the right to health of all the people in the Province of Pangasinan and instill health consciousness among them. Towards this end, the province shall institutionalize and sustain the following:



CAROLYN D. SISON

RAUL R. SABANGAN

VERNAT. XAVA-PEREZ Secretary to the Sanggunian

ERNANDEZ



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- a. An integrated and comprehensive approach to ensure that all the people of the Province of Pangasinan are health literate, provided with comfortable and decent living conditions, and protected from hazards and risks that could affect their health. Health shall be the shared accountability among the State, communities, and individuals. Taking ownership of health at the individual and community levels shall be made possible by investing in improving overall health literacy;
- b. A health care model that provides all the people of the Province of Pangasinan access to a comprehensive set of quality and cost-effective, promotive, preventive, curative, rehabilitative, and palliative health services without causing financial hardship, and prioritizes the needs of the population who cannot afford such services;
- c. A framework that fosters a whole-of-system, whole-of-government, and whole-of-society approach in the implementation, monitoring, and evaluation of health policies, programs, and plans; and
- d. A responsive healthcare delivery system centered on people's needs and well-being, cognizant of the differences in culture, values, and beliefs. Primary health care, through multi-sectoral action, shall be the ethos of the health system with people-centered, primary care-led integration as the bedrock the of health care delivery system;

SECTION 3. Objectives. This Ordinance shall seek to attain the following objectives according to UHC Act:

- a. To progressively realize universal health care in the province through a systemic approach and clear delineation of roles of key agencies and stakeholders towards better performance in the health system. Equity and fairness shall guide the path towards the progressive realization of universality by prioritizing the needs of unserved, underserved, and marginalized through evidence-informed planning, and fair transparency priority setting;
- b. To ensure that all the people of the province and its component LGUs are guaranteed equitable access to quality and affordable health care goods and services, and protected against financial risk.
- c. To ensure and strengthen the collaborative linkages between the province and its component LGUs through the generation, mobilization, and allocation of essential resources and its human resources for health complement the improvement and sustainability of an efficient and effective health care delivery system:

RAMON V. GUICO III
Governor

MARK ROYALD DG. LAMBINO
Vice Governor/Presiding Officer

SHIELA MARIE A HANIQUED
Sangguniang Panlalawigan Member
(Presiding Officer Pro Tempore)

APOLLON C. FONTELERA, JR.
Sangguniang Panlalawigan Member
(Floor Leader)

NOEL C. BINCE
Sangguniang Panlalawigan Member
(Assistant Floor Leader)

PHILIP THEODORE E. CRUZ Sangguniang Panlalawigan Member

HAIDEE S. PACHECO Sangguniang Panlalawigar Member

VICINITE AND ILLA Sanggunang and wigan Member

MARINOR B. DE GUZMAN Sangguniang Panlalawigan Member

JERRY AGERICO B. ROSARIO Sangguniang Panlalawigan Member

ROSARY GRACIA P. PUREZ-TABABA Sangguniang Pantalay igan Member

CHOLI JAN NOUIE Q. SISON Sangguniang Panlalawigan Member

Sangguniang Panlalawigan Member

CAROLYN B. SISON
'rovincial Councilor League Representative

JOYCED FERNANDEZ Sangguniang Kabataan Rypresentative

KAUL R. SABANGAN
Liga ng mga Barangay Interim Presiding Officer

VERNA T. AAVA-PEREZ Secretary to the Sangounian



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SECTION 4. General Guidelines. The integration of the local health systems of the province of Pangasinan/into a Province-wide Health Systems (PWHS) shall be guided by the following:

- a. UHC Act (RA 11223) seeks to address health systems fragmentation of the Province of Pangasinan and to reorient the health system towards primary care strengthening, primarily through the integration of local health systems into PWHS. The integration of local health systems into PWHS is a strategy in which the Provincial Government and its component Local Government Units (LGUs) agree to take shared responsibility for how collective resources are organized, and managed, delivered, and financed.
- b. The PWHS shall consist, at the minimum, of the provincial, city, and municipal health offices, provincial and district/municipal hospitals, infirmaries, rural health units (RHU), and barangay health stations (BHS) in the Province of Pangasinan.
- c. The PWHS shall define the roles and responsibilities of both the Provincial Government and its component LGUs in the organization and management of the PWHS and shall focus on the achievement of improved local health system performance consistent with the UHC Act.
- d. The Provincial Government and its component LGUs shall encourage the private sector to participate in the integration of the local health system, i.e., managerial, technical, and financial integration, and complement/augment health services provided by the public health facilities or to support in the management of the PWHS through a contractual arrangement or any appropriate formalized partnership, subject to existing laws and policies.
- e. In consideration of the size, population, and geography of the province, for effective health service delivery and management of the health systems, a group of adjacent municipalities may form a subprovincial health system.
- f. The Provincial Government and its component LGUs shall cooperate and perform their respective duties and obligations for the PWHS to manifest managerial, technical, and financial integration as described in the Memorandum of Agreement (MOA).

RAMON V. GUICO III
Governor

MARK ROALD DG. LAMBINO
Vice G. Verdor/Presiding Officer

SHIELA MARIE F. BANIQUED
Sangguniang Pahlara Gran Member
(Presiding Delicative Tempore)

NAPOLLAL C. HONTIELERA, JR.
(Sangguniang Panlalawigan Member
(Floor Leader)

NOEL C. BINCE
Sangguniang Panlalawigan Member
(Assistant Floor Leader)

APOLONIA DG. BACAY
Sangguniang Pahlalawigan Member

PHILIP THEODORE E. CRUZ
Sangguniang Panlalawigan Member

HAIDEE S. PACHECO

MARINOR B. DE GUZMAN Sangguniang Panlalawigan Member

Sangguniang Panlalawie

VICLM

COSARY GRACIA DATEREZ-NABABA Sangguniang Pahlatawigan Member

gan Member

NCHOLI JAN OUIE Q. SISON Sangguniang Panlalawigan Member

SALVADORS. PEAZ, JR Sangguniang Pallalawigan Member

CAROLYN D. SISON
'rovincial Councilor League Representative

JOYCE FERNANDEZ
Sangguniang Kabataan Representative

RAUL R. SABANGAN
Liga ng mga Barangay interim Presiding Officer

VERNAT. XAVA-PEREZ Secretary to the Sanggunian



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ARTICLE II ORGANIZATION OF THE PUBLIC-LED HEALTH CARE PROVIDER NETWORK

SECTION 5. Provincial Health Board [PHB]. The PHB, assisted by the Provincial Health Office [PHO] as the Technical Secretariat and Management Support Unit as its Administrative Secretariat, shall facilitate and sustain the organization and operations of the province Health Care Provider Network (HCPN). The network shall be categorized as a *Public-led Health Care Provider Network or Province-wide Health System (PWHS)*.

A General Assembly among all HCPN members shall be conducted, at least once a year, or as often as necessary, for the discussion of HCPN operation-related concerns and challenges.

SECTION 6. Components of PWHS. The PWHS shall be composed of *Primary Care Provider Network/s (PCPN/s)* providing primary care service, and licensed *infirmaries* and *hospitals* delivering secondary and tertiary general health care.

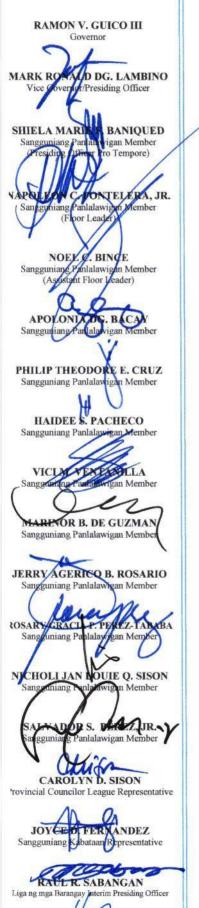
a. A primary care provider network (PCPN) which refers to a coordinated group of publics, private, or mixed primary care providers is the foundation of the health care provider network. The PCPN shall serve as initial contact and navigator to guide patients to appropriate levels of care, facilitate two-way referrals, and enable patient records to be accessible throughout the health systems.

The PCPN shall be composed of the following licensed or accredited facilities, as applicable, that provides both population- and individual-based primary care services: Primary Care Facilities, such as Rural Health Units (RHUs)/Health Centers (HCs), and Medical Outpatient Clinics, and other health facilities, such as but not limited to, barangay health stations, stand-alone birthing homes, stand-alone clinical laboratories, pharmaceutical outlets, and dental clinics.

b. Hospitals, as classified by the DOH shall include, 1) at least one Level 1 providing secondary care, and; 2) at least one Level 2 or 3 hospital providing tertiary care.

The PWHS shall deliver both population-based and individual-based health services and shall be linked to special health facilities as identified and designated by the Department of Health. Special health facilities include but are not limited to Apex or End-referral Hospitals, Specialty Centers, Drug Abuse and Treatment Rehabilitation Centers, Blood Service Facilities, Public Health Laboratories, and Quarantine Facilities.

The hospitals or other qualified health facilities within the network shall provide outpatient specialist care services and inpatient care, while the primary care providers will be responsible for the outpatient primary care services.



VERNAT. NAVA-PEREZ Secretary to the Sanggunian



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SECTION 7. Management Support Systems under the PWHS. To sustain the operations of the PWHS, the Provincial Government of Pangasinan, in collaboration and cooperation with its component LGUs, shall maintain a primary healthcare-oriented provincewide health system characterized by the adoption and sustained operation of the management support systems/mechanisms, that include but not limited to the following:

- 1. Local Investment Plan for Health (LIPH) refers to the strategic (3 years) and public investment plan for health that specifies the strategic direction of the province of Pangasinan in terms of improving health service delivery, strengthening the health systems operations and management, addressing social determinants of health, and specifies actions and commitment of different stakeholders.
- 2. Human Resources for Health Management and Development (HRHMD) System refers to the set of competency-based systems designed to achieve quality work life characterized by productivity, human resource (HR) development, and readiness of HRH for change and innovation. These systems support the human resource in the organization and ensure that the career of each employee is properly managed from the time of his/her entry up to his/her exit or retirement. The following are the critical elements of HRHMD systems:
 - a. Regular assessment, gaps analysis, and identification of corresponding investment needs for HRHMD System;
 - b. Presence of PWHS Human Resources for Health (HRH) Plan;
 - c. Updated National Health Workforce Registry (NWHR);
 - d. Presence of Harmonized HRH Management and Development System and HRH Performance Assessment System;
 - e. Presence of DOH-PRC Certified Primary Health Care Workers;
 - f. Creation of Permanent Plantilla Positions for HRH;
 - g. Monitoring of PWHS Performance on HRHMD.
- 3. Information Management System (IMS) which refers to an ICTintegrated local health system that enables timely generation, processing, and reporting of quality health and health-related data for operations and delivery of individual- and population-based health services, response to health emergencies and health events of public health concern, health policy development, decision-making, and program planning and implementation at all levels of healthcare utilization at the LGU. Critical elements of an integrated Information Management System are as follows:
 - a. Regular assessment, gaps analysis, and investment needs identification on health information management (HIM) and ICT development across all health facilities and offices within the PWHS;

RAMON V. GUICO III MARK RO VD DG. LAMBINO Presiding Officer SHIELA MARNE FANIQUED Sangguniang Panlalan gan Member Tempore) FONTELERA, JR. (Floor Leader NOEL Y. BINCE Sangguniang Danlalawigan Member in Floor Leader)

PHILIP THEODORE E. CRUZ Sangguniang Panlalawigan Member

APOLONIADG. BACAY

Sangguniang Pa

HAIDER'S, PACHECO Sangguniang Panlalawigan Member

VICLM VEN ANIELA igan Member

MARINOR B. DE GUZMAN Sangguniang Panlalawigan Member

JERRY AGERICO B. ROSARIO

NICHOLI JAN TOUTE Q. SISON

CAROLYN D. SISON

D. FER ANDEZ

RAUL R. SABANGAN

VERNAT. NAVA-PEREZ



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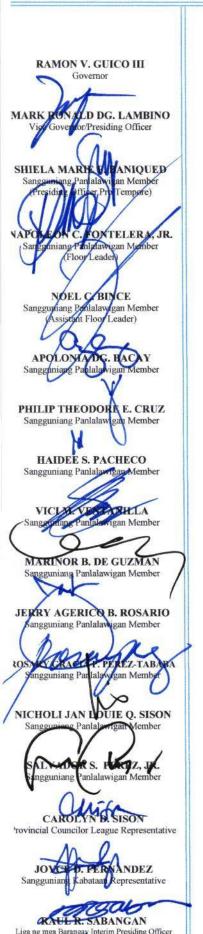
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- b. Periodic issuance and updating of PWHS HIM and ICT development plan as subsumed under the Local Investment Plan for Health (LIPH) and executed under the Annual Operational Plan (AOP), including the promulgation of relevant local health ICT policies, standards, and guidelines;
- c. Implementation and maintenance of a functional electronic medical record (EMR) system among all health facilities and offices within the PWHS;
- d. Adoption and routine use of telemedicine services in the delivery of individual-based health services across all health facilities and offices within the PWHS;
- e. Deployment of dedicated health ICT personnel in the PHO, health facilities, and other health offices;
- f. Implementation of a validated EMR system that links members of PCPN to secondary and tertiary care providers; and
- g. Compliance with statutory requirements on privacy and data protection as provided under Republic Act #10173 (Data Privacy Act of 2012), its Implementing Rules and Regulations (IRR), relevant issuances from the National Privacy Commission, and other applicable laws and regulations.
- 4. Epidemiology and Surveillance System (ESS) refers to the continuous systematic collection, analysis, interpretation, and timely dissemination of health data for planning, implementation, and evaluation of public health programs (UHC Act IRR). The following are the minimum elements of Epidemiology and Surveillance Systems:
 - a. Fully functional Epidemiology and Surveillance Units (ESUs) with dedicated personnel competent in field epidemiology, disease surveillance, and case/outbreak investigation in the PHO, public and private health facilities, and other offices mandated by relevant laws/policies to establish or designate ESUs.
 - b. Presence and full implementation of the PHB-approved epidemiology and surveillance system technical guidelines/manual of operations.

5. Supply Chain Management System (SCMS)

- a. Presence of a Pharmacy and Therapeutics Committee (PTC).
- b. Presence of technical guidelines/manual on harmonized supply chain management system.
- c. Presence of Registered Pharmacist and/or NC III Certified Pharmacy Assistant and dedicated trained personnel on supply chain management in the PHO.
- d. Interoperable electronic supply chain/logistics management system within the PWHS.



VERNAT. VAVA-PEREZ Secretary to the Sanggunian



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RAMON V. GUICO III
Governor

MARK BONALD DG. LAMBINO Vice coverpor/Presiding Officer

SHIELA MARUE I BANIQUED Sangguriang Paul (Pvigan Member (Presidific Officer Pto Tempore)

APOLEON C. JONTELERA, JR Sangganiang Panlalawigan Mepuber (Floor Leader)

NOEL C. MINGE Sangguniang Papalawigan Member (Assistant Floor Leader)

APOLONIA BG. BAGAY Sangguniang Pahlala vigan Member

PHILIP THEODORE E. CRUZ Sangguniang Panlalawigan Member

HAIDER'S. PACHECO Sangguniang Panlalawigan Member

VICI M VEN AVILLA
Sanggupt and Sanggupt and

MARINOR B. DE GUZMAN Sangguniang Panlalawigan Member

JERRY AGERICO B. ROSARIO

ROSAN GRACIAT PEREZ TABABA Sengguniang Parlalawigan Member

NICHOLI JAN LOUIE Q. SISON Sangguniang Panlalanga Member

SALVADOR S. PLACZ JA Sangguniang Banlalawigan Member

CAROLYN D. SISON 'rovincial Councilor League Representative

JOYCE TERNADEZ
Sangguniang Kabataan Representative

RAUL R. SABANGAN
Liga ng mga Barangay Interim Presiding Officer

VERNAT. NAVA-PEREZ Secretary to the Sanggunian

- 6. Patient Navigation and Referral System (PNRS)
 - a. Presence and full implementation of the following;
 - 1. P/CHB-approved technical guidelines/manual on implementation of the referral system that contains:
 - A directory of health facilities in an HCPN indicating service capabilities, pricing catalog, operating hours, and contact details;
 - Roles and responsibilities of all actors in the referral system;
 - Medical transportation and inter-facility communication guidelines.
 - A directory of the ambulance and medical transport reflecting the contact information of the provider, operating hours, list of services and prices, and
 - Guidelines on feedback mechanisms include data collection from both clients/patients and healthcare providers in the HCPN, data recording, storage, and utilization protocols.
 - 2. PHB-approved health facility development plan.
 - 3. Public Health Units (PHU) in LGU-owned hospitals.
 - b. Registration of all constituents to a primary care provider in the province of Pangasinan, especially indigents, people with disability, and other marginalized populations.
 - c. Formation of appropriate formalized partnerships (e.g., MOA) between HCPN and Apex or End-referral hospitals, subject to existing laws and policies.
 - d. Adoption and implementation of prevailing clinical pathways, health program protocols, and updated case management protocols as circulated and endorsed by the Department of Health.
- 7. Disaster Risk Reduction and Management in Health (DRRM-H) System that shall ensure timely, effective, and efficient preparedness and response to public health emergencies and disasters, and such other means to ensure delivery of population-based health services (UHC Act IRR). The following are the minimum elements of DRRM-H Systems as provided in AO No. 2020-0036 also known as "Guidelines on the Institutionalization of DRRM-H in Province-wide and City-wide Health System":
 - a. Organization of a DRRM-H system in the PWHS and its subprovincial health system, as applicable
 - b. Designated or appointed DRRM-H manager;
 - c. A unified, comprehensive, and coherent, DRRM-H Plan that is approved, updated, tested, and disseminated within the PWHS;
 - d. A self-sufficient public health and hospital **Health Emergency Response Teams (HERTs)** organized and acquired the minimum training required of a PWHS;



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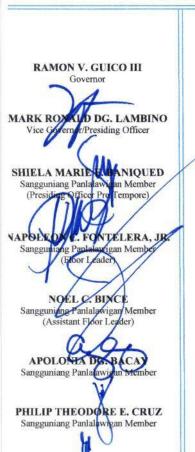
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- Essential Health Emergency Commodities (HECs) that are available
 and accessible along with an equipped, servicing ambulance or patient
 transport vehicle and arrangement for a field implementation facility;
- f. Functional **Emergency Operations Center (EOC)** capable of 4Cs command, and control, communication, and coordination that can be readily activated, as necessary.
- 8. Health Promotion Programs and Campaigns (HPPC) refer to the proactive, effective, and evidence-based formulation and implementation of health promotion policies, programs, campaigns, and other activities, including strategies that address the social determinants of health. The following are the minimum elements to ensure efficient implementation:
 - a. Organization of the following:
 - Health Promotion Committee (HPC);
 - o Health Promotion Unit (HPU) in the PHO;
 - Dedicated Health Education and Promotion Officers (HEPOs) in component cities and municipalities;
 - o Barangay Health Workers (BHWs) as on-the-ground health promotion officers.
- b. Presence of an ordinance/policy adopting the Health Promotion Framework Strategy (HPFS) 2030; and
- c. Implementation of population-wide health promotion programs.

ARTICLE III MANAGEMENT STRUCTURE OF THE PCWHS

SECTION 8. Provincial Health Board (PHB). The Province of Pangasinan hereby establishes an improved governance structure and arrangement to manage the operation of the province- or city-wide health system. The PHB shall be the steward of the integrated local health system and responsible for setting the policy and strategic directions of the province-wide health systems. It shall be composed of the following:

Chairperson	: Provincial Governor
Vice-Chairperson	: Provincial Health Officer
Members	: Sanggunian Panlalawigan (SP) Chair on Committee on Health
	: Provincial DOH Representative
	: Representative/s of municipalities and component cities [for PWHS only]
	: People's Organization (PO), Nongovernmental Organizations (NGO), or Private Sector Representative
	: Indigenous Cultural Communities/Indigenous Peoples (ICC/IP) Representative, as applicable
	: Others may be defined by the existing PHB



HAIDEE S. PACHECO

Sangguniang Panlalawigan Member

HARINOR B. DE GUZMAN

NICHOLI JAN NOUIE Q. SISON

RAUL R. SABANGAN

VERNAT. NAVA-PEREZ

AGERICO B. ROSARIO

N. SISON

-TAB

Sangguniang Panlalawigan Membe

VICLM

JERRY

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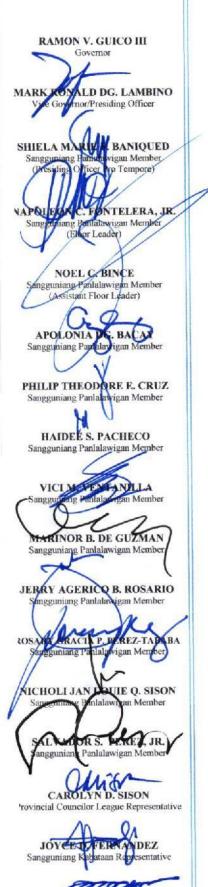
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The **PHB** shall have the following functions as provided in Section 102 (b) of the Local Government Code (LGC) of 1991, and Section 19.17 of the UHC Act IRR, to wit:

- a. Propose to the SP, following the standard and criteria set by the DOH, annual budgetary allocation for the operation and maintenance of health facilities and services within the province;
- Serve as an advisory committee to the SP on health matters such as, but not limited to, the necessity for and application of, local appropriations for public health purposes;
- c. Consistent with the technical and administrative standards of the DOH, create committees, which shall advise local health agencies on matters such as, but not limited to, personnel selection and promotion, bids and awards, grievance and complaints, personnel discipline, budget review, operations review, and similar functions;
 - Create committees and/or additional units as may be necessary to assist in health matters;
 - Establish a technical working unit that shall serve primarily as a recommendatory and oversight body to the provincial health board;
- d. Set the overall health policy directions and strategic thrusts, including the development and implementation of the strategic and investment plans of the PWHS;
- e. Oversee and coordinate the integration and delivery of health services across the health care continuum for the PWHS;
- f. Assume full responsibility for the management of the Special Health Fund (SHF) and ensure that the SHF is optimally utilized to help achieve the desired health outcomes of the population of the province;
- g. Exercise administrative and technical supervision over health facilities and health human resources within the province;
 - Require the submission of reports, cause the conduct of management audit, performance evaluation, and inspection to determine compliance with policies, standards, and guidelines of the DOH and take such actions as may be necessary for the proper performance of official functions. Provided that, such actions shall not extend to the appointment and other personnel actions which shall remain with the concerned LGU; and
 - Oversee the operations of the province-wide health system and ensure that the facilities are managed effectively, efficiently, and economically without interference with day-to-day activities

SECTION 9. Management Support Units (MSU). The MSU, created under the **PHB**, shall assist in its operations, primarily, in the management of the Special Health Fund (SHF):

a. The MSU shall be composed of, but not limited to, the following staff who may be hired or designated/appointed based on their existing competencies:



ding Officer

VERNA T. NAVA-PEREZ Secretary to the Sanggunian



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1

MARK BANGLD DG. LAMBINO
Vice pover for/Presiding Officer

RAMON V. GUICO III

SHIELA MARIE Y BANIQUED Sangguniang Parlalaw gan Member (Presidin) Officer P to Tempore)

NAPONE (C. FONTELERA, JR. Sanggundana Panjalawigan Vember (Floor Leader)

Sangganjang Panlalawigan Member (Assistant Joor Leader)

APOLONIA JG. BACAY Sangguniang Panlalawigan Member

PHILIP THEODORE E. CRUZ Sangguniang Pantalawigan Member

HAIDEE S. PACHECO Sangguniang Panlal Wiggs Member

VICEN, VENTAHLLA

MARINOR B. DE GUZMAN Sangguniang Panlalawigan Member

JERRY AGERICO B. ROSARIO Sangguniang Panlahayigan Member

ROSARY GRACIA P. PEREZ JABABA Sangguniang Pahlajawigan Member

Sangguniang Panlala rigan Member

SALVADOR S. DARRY, JR. Salgguniang Panlalawigan Member

CAROLYN D. SISON
'rovincial Councilor League Representative

JOYCE FERN NDEZ Sangguniang Kabataan Rypresentative

RAUL R. SABANGAN
Liga ng mga Barangay,Interim Presiding Officer

VERNAT. AVA-PEREZ Secretary of the Sanggunian

- o Accountant (Accountant II, SG 16)
- o Administrative Officer (AO II, SG 11); and
- o Liaison Officer (AA III, SG 9)

The MSU shall perform the following functions, but are not limited to:

- a. Provision of assistance to the Local Health Board in the management of the SHF:
 - Ensuring the timely submission of the required information to PhilHealth for the assessment and review of the performance of the province-wide health system as the bases for release of future tranches and renewal of contracts;
- b. Perform the following administrative and financial tasks:
 - Preparation of the health board resolution on the SHF budget;
 - Ensuring that budgetary documents are approved and signed by the Budget Officer, Treasurer, and/or Accountant; and
 - Preparation, submission, and reporting of financial status and physical accomplishments.
- Coordinate with the necessary PHWS stakeholders on matters pertaining to the administration and health care financing; and
- d. Coordination with the Budget Officer, Treasurer, Accountant, and Province Health Officer for planning, budgeting, utilization, and liquidation.

SECTION 10. Provincial Health Office (PHO). The PHO shall be the technical secretariat of the health board, in close coordination with the MSU. It shall also be responsible for the technical integration and supervision of the PWHS, to wit:

- a. Oversee the day-to-day operations of the province-[city-] wide health systems;
- Hold monthly management meetings, and be fully responsible for the operationalization of the network of health care providers' activities based on the approved integrated work and financial plan;
- Monitor technical, operational, and financial performance of the province-wide health systems, where applicable and recommend actions for endorsement;
- d. Coordinate the conduct of quarterly HCPN monitoring and evaluation activities that should include, but are not limited to the following:
 - Data gathering from all member health facilities
 - Data analysis and interpretation
 - Presentation of data captured during regular HCPN management unit meetings or HCPN general assemblies.
- e. Recommend strategic allocation of the SHF consistent with national guidelines for endorsement to the Local Health Board





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SECTION 11. Technical Working Group (TWG)/ Technical Management Committee (TMC). The TWG/TMC, created under the Local Health Board. shall assist the board in matters pertaining to health. Its functions shall include:

- a. Initiate participatory health needs assessment and integrated network planning for both hospital and Rural Health Units/Health Centers;
- b. Supervise navigation, coordination, and referrals across component facilities and ensure compliance with the referral system protocols;
 - Recommend localized legislations/policies, standards, and guidelines for the establishment, operations, and sustainability of management support systems such as, but not limited to 1) strategic and investment planning; 2) human resources for health management and development system; 3) integrated information management system, including implementation of interoperable EMR systems and routine provision of telemedicine services among health care providers, and compliance with cross-cutting implementation requirements; 4) epidemiology and surveillance system; 5) logistics and supply chain management; 6) functional two-way patient navigation and referral system; 7) DRRM-H system; and 8) implementation of proactive and effective health promotion programs and campaigns;
 - d. Advocate the approval of funds for the provision of health services;
 - e. Submit necessary reports and health data to the PHO;
- f. Supervise, monitor, and evaluate the integration of public health and hospital services within the sub-provincial health system (SPHS).

ARTICLE IV

SECTION 12. Provincial Government. The Provincial Government of Pangasinan, shall sustain the implementation of the following:

- a. Managerial and financial integration and the provision of the needed resources and support mechanisms to make the integration sustainable by striving to implement recommended strategies and activities, such as but not limited to, operational guidelines, baseline studies, training assessment, evidenced-informed development of local investment plan for health, and organization of the local health board and its support unit;
- b. Ensure the commitment of the local health system stakeholders including patients and residents and their representatives, health care workers, the academe, development partners, and other national government agencies, that they may endeavor to integrate the LGUmanaged health offices, primary care facilities, hospitals, and providers to constitute the integrated province-wide health system;
- c. Issue executive instruments or local legislations that shall facilitate the realization of the objectives described in this Ordinance;



MARINOR B. DE GUZMAN

Sangguniang Panlalawigan Member

JERRY AGERICO B. ROSARIO

NICHOLI JAN ADUE Q. SISON

CAROLYN D. SISON

rovincial Councilor League Representative

VERNAT. NAVA-PEREZ

Secretary t

he Sanggunian

JEVA, JR.

ROLES AND RESPONSIBILITIES



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IARK DONAYD DG. LAMBINO Vice Governor/Presiding Officer

RAMON V. GUICO III

- SHIELA MARIE R BANIQUED Sanaguniang Panlalaw gan Member (Presiding Officer Dro Tempore)
- APOILLON C. PONTELERA JR. Sangguniang Panlalawigan Member (Floot Leader)
 - NOPL C. BINCE Sangguniang Panlalawigan Member (Assistant Floor Leader)

APOLONIA DE BACAY Sangguniang Panlalay gaa Member

PHILIP THEODORE E. CRUZ Sangguniang Panlalawigan Member

HAIDEE S. PACHECO

Sangguniang Panlalawia

VICI M SENTANCLA

MARINOR B. DE GUZMAN Sangguniang Panlalawigan Member

JERBY AGERICO B. ROSARIO

COSARY LEAVING THREZ-TAKAB

NICHOLI JAN NOLLE Q. SISON Sangguniang Pandawigan Member

SALV UND PARA JR. Sanggunian Panlalawigan Member

CAROLYN D. SISON
'rovincial Councilor League Representative

JOYCE T. FERNANDEZ Sangguniang Kabataan Depresentative

KAUL R. SABANGAN
Liga ng mga Barangay Interim Presiding Officer

VERNAT. AVA-PEREZ Secretary by the Sanggunian

- d. Implement incremental creation of positions to hire the required healthcare professionals and healthcare workers based on the standards;
- e. Strengthen the leadership and management capacities and competencies of the provincial government through any means available, which may include, among others, participation of the local leaders and health systems managers in activities promoting good governance and management practices, and engaging developing partners to provide technical assistance in similar areas; and
- f. Strive to sustain the institutionalization and functionality of the integrated province-wide health system, where applicable, and health care provider networks in terms of attainment of the national objectives for health;

SECTION 13. The Municipal and Component City Government, as a member of the Province-Wide Health System, shall be responsible for the following:

- a. Strictly observe the terms and conditions stipulated in the Inter-LGU Memorandum of Agreement (MOA) regarding the operationalization of the PWHS.
- b. Formulate and implement a municipal/ component city health plan within the framework of the provincial/ sub-provincial health plan and considering the local health situation, based on the analysis of collected relevant information, among others;
- Implement programs and projects of the integrated health plan that apply to the municipality and component city;
- d. Implement and adhere to the management support systems established for PWHS, as duly approved by PHB.
- Implement the regulatory measures formulated at the national and provincial level, and propose and implement whatever other needed regulatory measures for the municipality/component city;
- f. Manage and finance the Municipal Health Office, Rural Health Centers, and Barangay Health Stations (BHS), including hospitals owned by them, to meet the licensing and accreditation requirements of DOH and PhilHealth; and to construct, repair, or renovate such facilities as necessary;
- g. Registration of all PWHS constituents (including indigents) to Primary Care Providers.
- Promote coordination among health-related sectors in activities for health promotion and protection at the municipal and component city level, including the private sector and non-government organizations; and
- i. Improve and maintain the road network to facilitate access/referral to and from the BHS, RHU, and the core referral hospital, and when necessary, provide existing transport and communication facilities.





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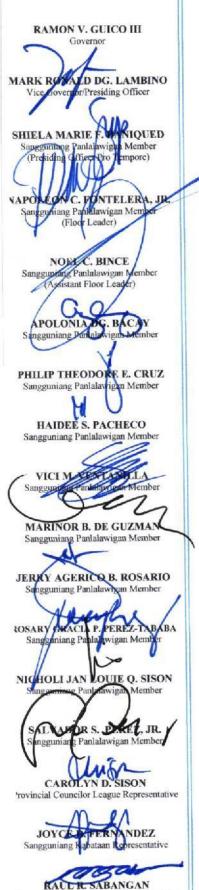
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ARTICLE V FINANCIAL MANAGEMENT AND SUSTAINABILITY

SECTION 14. Financial Management. The PHB shall assume full responsibility for the management of the Special Health Fund (SHF) created by the province under Resolution No. 1-A, Series of 2024 in accordance with the DOH-DBM-DOF-DILG-PhilHealth Joint Memorandum Circular (JMC) No. 2021-0001 on Guidelines on the Allocation, Utilization, and Monitoring of, and Accountability for, the Special Health Fund, such as that:

- a. The SHF shall be used to augment LGUs fund for health expenditure items and allocated as follows:
 - 1. Population-based health services
 - 2. Individual-based health services
 - 3. Capital investment, such as but not limited to, infrastructure, equipment, and information and communications technology
 - 4. Health systems operating cost
 - 5. Remuneration of additional health workers, and
 - Incentives for all workers in accordance with RA No. 7305 (Magna Carta for PHWs), RA No. 7883 (BHW Benefits and Incentives Act), PD 1569 (Strengthening Barangay Nutrition Program), RA 11148 (Kalusugan at Nutrisyon ng Mag-Nanay Act) and other relevant laws.
- b. Funds pooled to the SHF shall be deemed automatically appropriated for programs, projects, and activities on health pursuant to the allowable expenses chargeable against the SHF, and based on the approved work and financial plans to be prepared.
- c. Each member LGU of the PWHS, shall create a sub-ledger in their existing Trust Fund Account for Health for funds that will be allocated or transferred from the SHF. The mechanism, amount, or percentages to be allocated or transferred to component LGUs can be discussed in a PHB meeting and issued as a resolution.
- d. The Provincial Government shall comply with the submission of required data on its use of the SHF.
- e. The Provincial Government shall adhere to the guidelines on the allocation and utilization of the SHF as may be issued by the national government agencies.
- f. Planning and Budgeting. The PHB with the assistance of its MSU shall facilitate the planning and budgeting process of the SHF as identified in JMC No. 2020-0001
- g. Disbursement and Utilization of the SHF. All disbursement and utilization from the SHF shall be in accordance with the guidelines set in JMC No. 2021-0001 and on the following:
 - 1. Allowable expenses chargeable against the SHF
 - Approved Local Investment Plan for Health (LIPH) and its Annual Operation Plan (AOP)



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3. A contractual agreement between the Local Health Board and the following entities, DOH, PhilHealth, CSO/NGOs, and International Health Partners, as applicable.

h. Monitoring and Evaluation. All processes and strategies to regularly monitor and evaluate the allocation and utilization of the SHF shall be based on JMC No. 2020-0001 and related issuances by DOH, PhilHealth, and other agencies.

SECTION 15. Financial Sustainability. To ensure financial sustainability, the Provincial Government and its component LGUs shall adhere to the following:

- a. Appropriate mandatory counterpart funding to finance health programs, projects, and activities based on the approved LIPH and its corresponding AOP, particularly for personnel services, capital outlay, and maintenance and operations of their health facilities and services. The SHF shall only serve as an augmentation fund for health expenditures.
- b. The PHB, shall ensure funding for effective health operations and conduct of activities such as, but not limited to, capacity building, research, and health promotion consistent with the national guidelines and based on the approved Local Investment Plan for Health and its Annual Operation Plan.
- c. The sources of the SHF shall include the following:
 - 1. Income from the PhilHealth Konsulta Capitation payments;
 - 2. Financial grants and subsidies from the national government;
 - Donations and financial grants from non-government organizations and official development assistance from International Health Partners (IHPs);
 - 4. Other fund sources may include, among others, the provincial budget for health.
- d. To the terms and conditions set by the national government agencies and to the following requirements to facilitate the flow of funds from each fund source to the SHF:
 - 1. Contractual agreements with PhilHealth
 - 2. Terms of Partnership (TOP) with DOH for financial grants and subsidies
 - 3. Memorandum of Agreements with NGOs and IHPs for donations and financial grants
- e. Government budgeting, accounting, and auditing rules and regulations shall guide the disbursement, liquidation, utilization, and accounting of funds transferred between or among national government agencies, CSOs, and LGUs.

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(Festing Officers to Tempore) NTELERA, JR. lalawigan Member (Floor Leader) NOEL C. BINCE ng Panlalawigan Me (Assistant Floor Feader) APOLOMA DO BACA Sangguniang PHILIP THEODORR E. CRUZ Sangguniang Panlalawigan Member

HAIDEE S. PACHECO Sangguniang Panlalawigan Monber

MARINOR B. DE GUZMAN

n Member

Sangguniang Panlalawigan Member

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NICHOLI JAN (DUIE Q. SISON

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RAUL R. SABANGAN
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VERNAT. AVA-PEREZ Secretary to the Sanggunian



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RAMON V. GUICO III
Governor

MARK RONALD DG. LAMBINO
Vice Governor/Presiding Officer

SHIELA MARUE FLAANIQUED
Sangunhar Panlabay gan Member
(Predicit Officery to Company)

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VICI M EN ANULA Sangguniang Bandan gan Member

MARINOR B. DE GOZMAN Sangguniang Panlalawigan Member

JERRY AGERICO B. ROSARIO Sameguniang Pandlawigan Member

OSARA/GRACIA P. HEREZ-MABABA Sangguniang Panlal Jurigan Member

NICHOLI JAN OUIF O. SISON Sangamiang Panla wigan Member

SALVADOK S. TEHEZ, IR. J ngguniang Panlalawigan Member

CAROLYN D. SISON

JOYCE D. P. RNANDEZ Sangguniang Kapadan Representative

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Liga ng mga Barangay Interim Presiding Officer

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f. The SHF shall be treated as a separate type of Special Fund and is deemed automatically appropriated for health expenditures only.

ARTICLE VI IMPLEMENTING RULES AND REGULATIONS

SECTION 16. Formulation of the IRR. To sustain the implementation of the local health systems integration reforms as embodied under the UHC Act of 2019, the formulation and/or updates of the implementing rules and regulations, policies, and technical and operational guidelines/manuals shall be directed to the PHB, through the PHO.

ARTICLE VII APPROPRIATION

SECTION 17. Appropriations. The funds necessary to carry out the provisions of this Ordinance shall be included in the 2024 Annual Budget, and shall be increased in the subsequent years of implementation subject to the availability of funds.

ARTICLE VII MISCELLANEOUS PROVISIONS

Sections 18. Separability Clause. If any part, section, or provision of this ordinance is held invalid and unconstitutional, the other parts, sections, or provisions not affected thereby remain in full force and effect.

SECTION 19. Repealing Clause. All prior ordinances, resolutions, executive orders, administrative orders, rules, and regulations, or parts thereof that are contrary to or inconsistent with the provisions of this ordinance are hereby repealed, amended, or modified accordingly.

SECTION 20. Effectivity Clause. This Ordinance shall take effect in accordance with the provision of Republic Act No. 7160, also known as the Local Government Code of 1991, as amended.

CERTIFIED BY

VERNA T/NAVA-PEREZ Secretary to the Sanggunian

ATTESTED.

MARK BONALD DG. LAMBINO

Vice Governor (Presiding Officer)

APPROVED:

RAMON V. GUICO III

Governo