



Department of Budget and Management
Department of Health



Joint Circular No. 2, s. 2020
November 25, 2020

TO : Heads of Departments, Bureaus, Offices, and Agencies of the National Government, and Government-Owned or -Controlled Corporations (GOCCs); Local Government Units (LGUs); and All Others Concerned

SUBJECT : Guidelines on the Grant of the COVID-19 Special Risk Allowance to Public and Private Health Workers

1.0 Background

- 1.1 Administrative Order (AO) No. 36¹ dated November 16, 2020 authorizes the grant of a **COVID-19 Special Risk Allowance (SRA)** not exceeding **P5,000 per month** to public and private health workers (HWs) who are directly catering to or are in contact with COVID-19 patients in recognition of the heroic and invaluable contributions of HWs throughout the country who bravely and unselfishly risk their lives and health by being at the forefront of the national effort to address the public health emergency.
- 1.2 AO No. 36 is in line with Republic Act (RA) No. 11494 or the "Bayanihan to Recover as One Act", which affirmed the existence of a continuing national emergency in view of the unabated spread of the COVID-19 virus and the ensuing economic disruption therefrom.

Among others, Section 4(h) of RA No. 11494 authorized the national government to grant SRA to all public and private HWs directly catering to or in contact with COVID-19 patients for every month that they are serving during the state of national emergency as declared by the President.

In the case of the public HWs, the SRA shall be in addition to the Hazard Pay granted under RA No. 7305 or the "Magna Carta of Public Health Workers" and the COVID-19 Active Hazard Duty Pay provided under AO No. 35.

Moreover, the SRA for the public and private HWs shall be exempt from income tax.



¹ Authorizing the Grant of COVID-19 Special Risk Allowance to Private and Public Health Workers Directly Catering to or in Contact With COVID-19 Patients During the State of National Emergency

2.0 Purpose

This Joint Circular is issued to prescribe the guidelines on the grant of the COVID-19 SRA pursuant to AO No. 36.

3.0 Definition of Public and Private HW

For purposes of the grant of the COVID-19 SRA, the public and private HWs, as defined under Section 1 of AO No. 36, shall refer to medical, allied-medical, and other personnel who directly provide treatment and support care to COVID-19 patients.

4.0 Guidelines and Conditions on the Grant of the COVID-19 SRA

The grant of the COVID-19 SRA to qualified public and private HWs shall be subject to the following guidelines and conditions:

4.1 The public HWs are either:

- (i) civilian employees occupying regular, contractual, or casual positions, whether full-time or part-time; or
- (ii) workers engaged through contract of service (COS) or job order (JO) basis, including duly accredited and registered Barangay Health Workers (BHWs).

In the case of LGUs, the list of public HWs, including BHWs, shall be determined by their respective local health boards.

4.2 The public HWs are assigned in hospitals, laboratories, or medical and quarantine facilities.

4.3 The private HWs are assigned in the designated COVID-19 units of hospitals, laboratories, or medical and quarantine facilities as certified by the DOH.

4.4 The public and private HWs provide critical and urgent services to respond to the public health emergency during the state of national emergency.

4.5 The public and private HWs physically report for work at their assigned work stations on the prescribed official working hours, as authorized by the head of agency/office, during the state of national emergency, which place them in direct contact with COVID-19 patients.

4.6 The grant of the COVID-19 SRA shall be pro-rated based on the number of days that public and private HWs physically report for work in a month, as certified by the head of hospital, laboratory, or medical and



quarantine facility, or his/her authorized representative, reckoned September 15, 2020 until December 19, 2020, as follows:

$$\text{COVID-19 SRA} = \frac{\text{P5,000}}{22 \text{ days}} \times \text{Number of Days Physically Reporting for Work During the Month}$$

- 4.7 For purposes of rationalizing the grant of the COVID-19 SRA, one (1) day shall be equivalent to eight (8) working hours.

Hence, for facilities adopting a 12-hour or 24-hour shift as their prescribed official working hours for the duration of the state of national emergency, the computation of the COVID-19 SRA shall be adjusted proportionately, subject further to Item 4.6 hereof.

- 4.8 The COVID-19 SRA of personnel hired on part-time basis in one or more agencies shall be in direct proportion to the services rendered, provided that the total COVID-19 SRA received from all sources shall not exceed P5,000 per month.

- 4.9 The COVID-19 SRA of an employee on detail to another government agency shall be granted by the parent agency.

- 4.10 A compulsory retiree, on service extension, may be granted the COVID-19 SRA, subject to the pertinent conditions and guidelines under this Joint Circular.

5.0 **Exclusion from the Grant of the COVID-19 SRA to Public HWs**

Those engaged without employer-employee relationship and funded from non-Personnel Services appropriations/budgets are excluded from the grant of the COVID-19 SRA, except as authorized in Item 4.0 of this Joint Circular, namely:

- 5.1 Consultants and experts engaged for a limited period to perform specific activities or services with expected outputs;
- 5.2 Laborers engaged through job contracts (*pakyaw*) and those paid on piecework basis;
- 5.3 Student workers and apprentices; and
- 5.4 Individuals and group of individuals whose services are engaged through COS or JO, including BHWs, who are not assigned in hospitals, laboratories, or medical and quarantine facilities.

6.0 **Roles and Responsibilities**

6.1 **Department of Health (DOH)**

- 6.1.1 The DOH Central Office, through the Administrative Service-Personnel Administrative Division of the Administration and Financial Management Team (AFMT), shall:



- a. Prepare and release guidelines for the sub-allotment or transfer of funds for the COVID-19 SRA to Centers for Health Development (CHDs), Ministry of Health-Bangsamoro Autonomous Region in Muslim Mindanao (MOH-BARMM), DOH hospitals, specialty hospitals, and the Philippine General Hospital (PGH); and
- b. Consolidate the reports received from CHDs, MOH-BARMM, DOH hospitals, specialty hospitals, and the PGH.

6.1.2 The DOH CHDs shall:

- a. Coordinate with LGUs, other government health facilities, and the Regional Offices (ROs) of the Department of Labor and Employment (DOLE) for private health facilities within their jurisdiction;
- b. Enter into a Memorandum of Agreement (MOA) with LGUs and other health facilities for the transfer of funds and the payment of the COVID-19 SRA to eligible HWs;
- c. Evaluate and process claims for the grant of the COVID-19 SRA to eligible public and private HWs;
- d. Submit reports to the DOH-AFMT on the number of the COVID-19 patients attended to, and list of eligible HWs indicating their positions, amount of the COVID-19 SRA, and days physically present;
- e. Submit to the DOH-AFMT a certification attesting to the truthfulness of the contents of the report and adequate consent for sharing of data has been obtained from the HWs involved. The certification must be signed by the head of human resource or personnel division (if such division is in the structure) and the head of health facility, clearly indicating his/her designation of position; and
- f. Submit to the DOH-AFMT the financial and accomplishment reports for monitoring, in accordance with pertinent accounting and auditing rules and regulations.

6.2 **MOH-BARMM**

- a. Coordinate with LGUs, other government health facilities, and the ROs of the DOLE for private health facilities within its jurisdiction;
- b. Enter into a MOA with LGUs and other health facilities for the transfer of funds and the payment of the COVID-19 SRA to eligible HWs;
- c. Evaluate and process claims for the grant of the COVID-19 SRA to eligible public and private HWs;
- d. Submit reports to the DOH-AFMT on the number of the COVID-19 patients attended to, and list of eligible HWs indicating their positions, amount of SRA, and days physically present;
- e. Submit to the DOH-AFMT a certification attesting to the truthfulness of the contents of the report and adequate consent for sharing of data has been obtained from the HWs involved. The certification must be signed by the head of human resource or personnel division



- (if such division is in the structure) and the head of health facility, clearly indicating his/her designation of position; and
- f. Submit to the DOH-AFMT the financial and accomplishment reports for monitoring, in accordance with pertinent accounting and auditing rules and regulations.

6.3 DOH Hospitals, Specialty Hospitals, Drug Treatment and Rehabilitation Centers, and the PGH shall:

- a. Facilitate the payment of the COVID-19 SRA to eligible public and private HWs;
- b. Submit to the DOH-AFMT reports on the number of the COVID-19 patients attended to, and list of eligible health workers indicating their positions, amount of SRA, and days physically present;
- c. Submit to the DOH-AFMT a certification attesting to the truthfulness of the contents of the report and adequate consent for sharing of data has been obtained from the HWs involved. The certification must be signed by the head of human resource or personnel division (if such division is in the structure) and the head of agencies/operations, clearly indicating his/her designation or position; and
- d. Submit to the DOH-AFMT the financial and accomplishment reports for monitoring, in accordance with pertinent accounting and auditing rules and regulations.

6.4 LGUs and Other Health Facilities concerned shall:

- a. Facilitate the payment of the COVID-19 SRA to eligible public and private HWs;
- b. Submit to the DOH-CHD reports on the number of the COVID-19 patients attended to, and list of eligible health workers indicating their positions, compensation/s entitled to, and days physically present;
- c. Submit to the DOH-CHD a certification attesting to the truthfulness of the contents of the report and adequate consent for sharing of data has been obtained from the personnel involved. The certification must be signed by the head of human resource or personnel division (if such division is in the structure) and the head of health facility, clearly indicating his/her designation or position; and
- d. Submit to the DOH-CHD the financial and accomplishment reports for monitoring, in accordance with pertinent accounting and auditing rules and regulations.



6.5 Department of Budget and Management (DBM)

Upon request, the DBM shall issue corresponding fund release documents to the DOH to implement the grant of COVID-19 SRA to public and private HWs, pursuant to RA No. 11494, in accordance with the existing government budgeting, accounting and auditing rules and regulations.

7.0 Funding Source

Funds for the implementation of this Joint Circular shall be sourced from identified savings pursuant to Section 4 (pp), (qq), (rr), (ss), (sss) and (ttt), in relation to Sections 10 and 11 of RA No. 11494, subject to the availability of funds.

8.0 Reporting

The DOH, in coordination with DBM, shall submit periodic reports to the Office of the President on the implementation of this Joint Circular, including, but not limited to, the number of health workers provided with compensation and amount utilized for this purpose.

9.0 Responsibilities of Agencies

Agencies shall be responsible for the proper implementation of the provisions of this Joint Circular. The responsible officers shall be held liable for any payment not in accordance with the provisions hereof without prejudice to the refund by the employees concerned of any excess or unauthorized payments.

10.0 Resolution of Cases

Cases not covered by the provisions of this Joint Circular shall be referred to the DBM or the DOH, as appropriate, for resolution.

Conversely, all issues arising from the grant of COVID-19 SRA to private HWs shall be resolved exclusively by the DOH.

11.0 Effectivity

This Joint Circular shall take effect immediately.

WENDEL E. AVISADO
Secretary

Department of Budget and Management



FRANCISCO T. DUQUE III
Secretary
Department of Health