Republic of the Philippines HOUSE OF REPRESENTATIVES Quezon City

Eighteenth Congress First Regular Session

House Bill No. 1190



Introduced by Representative Gerardo J. Espina, Jr.

EXPLANATORY NOTE

The bill seeks to establish a dialysis unit in every province nationwide as well as to provide free dialysis treatment for poor patients suffering from end-stage renal disease (ESRD) or the last stage of Chronic Kidney Disease (CKD).

This is pursuant to the Constitutional mandate of the State to protect and promote the right to health of the people and instill health consciousness among them. Article XIII, Section 11 of the 1987 Philippine Constitution declares 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 the people at an affordable cost.

The increasing number of cases of kidney failure in the Philippines is quite alarming. It is 7th leading cause of death among the Filipinos According to the National Kidney and Transplant Institute, One Filipino develops **chronic renal failure** every hour or about 120 Filipinos per million population per year. More than 5,000 Filipino **patients** are presently undergoing dialysis and approximately 1.1 million people worldwide are on **renal** replacement therapy.

It is a financial burden of Filipinos afflicted with ESRD. In 2016, Philhealth declared that CKD affects more than ten percent (10%) of the world's population. Majority of end-stage renal disease (ESRD) among Filipinos is secondary to complications of diabetes, hypertension and chronic glomerulonephritis. While most patients with end-stage renal failure need kidney transplantation, renal replacement therapy with adequate dialysis helps replace sufficient kidney function for a patient to survive. Their household income suffers when they struggle with out-of-pocket spending, especially when the annual benefit limit provided by the agency is used up given that ESRD patients also need to combat-related complications, such as anemia and infections that further aggravate their situation when they are hospitalized for these. Patients then cope by reducing the frequency of dialysis sessions prescribed to them, thereby compromising their need for adequate dialysis.

Majority of end-stage renal disease among Filipinos is secondary to complications of diabetes, hypertension and chronic glomerulonephritis. As of 2013, there are about 23,000 dialysis patients and only about 300 to 500 kidney transplants are performed annually. There are 7,000 estimated cases of End Stage Renal Disease (ESRD) waiting for a transplant and still escalating every year.

The optimum frequency of dialysis is three times a week, but due to its being costly and inaccessibility mainly in the provinces, patients compromise their health conditions. The cost of a kidney operation ranges from Php600,000 to 1 million pesos while a session of dialysis will cost a patient more or less Php4,000.00. PhilHealth records show that in 2014, hemodialysis posted the most number of filed claims among procedures at 691,489, with a total benefit payment amounting to Php 4,666,806,642.

With the high cost and inaccessibility of the dialysis treatment centers in the province to cater marginalized patients suffering from end-stage renal disease (ESRD) or the last stage of Chronic Kidney Disease (CKD), it is high time for the government to provide a dialysis ward procedure free of charge for every provincial hospitals throughout the entire country.

In view of the foregoing, the approval of this bill is earnestly sought.

HON. GERARDO J. ESPINA, JR.

Representative Lone District of Biliran

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AN ACT

PROVIDING FOR THE ESTABLISHMENT OF A DIALYSIS TREATMENT CENTER IN EVERY PROVINCE NATIONWIDE, APPROPRIATING FUNDS THEREOF AND FOR OTHER PURPOSES

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

- Section 1. Short Title. This Act shall be known as the "Dialysis Center Act of 2019."
- Sec 2. Declaration of Policy. It is the declared policy of the State to improve the delivery of health care services to the people and to ensure hospital facilities are available, affordable and accessible to the people.
 - Sec 3. *Definition of Terms.* For purposes of this Act, the following terms shall mean:
- a) "Secretary" shall refer to the Secretary of the Department of Health;
- b) "Provincial Government Hospital" shall refer to a hospital operated and maintained either partially or wholly by the provincial government or other political subdivision, or by any department division, board or other agency thereof; and
- c) "Indigent Patient" shall refer to a patient whose combined annually family incomes does not exceed One Hundred Thousand Pesos (\$\mathbb{P}\$100,000.00) annually.
- Sec. 4. Identification of Provincial Government Hospitals. The Department of Health is hereby authorized to identify one provincial government hospital in every province that shall establish and maintain a dialysis unit. The DOH shall consider the status and capability of the hospital including its area and facilities for the establishment of the said dialysis unit.
- Sec. 5. Establishment, Operation and Maintenance of a Dialysis Unit. Within eighteen (18) months from the effectivity of this Act, the identified provincial government hospital in every province is hereby required to establish, operate and maintain a dialysis unit

in its hospital. The dialysis unit shall be equipped with complete dialysis machine, equipment and supplies to be managed by qualified medical personnel.

- Sec. 6. Free Dialysis Treatment to Poor Patients. Dialysis treatment in the identified government hospital in every province and/or region shall be provided free of charge to indigent patients as defined in Section 3 (c) hereof.
- Sec 7. *Penalty.* Any hospital chief, administrator or officer-in-charge who fails to comply with this Act shall be punished with a fine of Fifty Thousand Pesos (₱50,000.00) but not more than One Hundred Thousand Pesos (₱100,000.00).
- Sec 8. Implementing Rules and Regulations. The Secretary shall promulgate the necessary rules and regulations to implement the provisions of this Act
- Sec 9. Appropriations. -Such amount as may be necessary to implement the provisions of this Act shall be included in the national government hospital's annual appropriations.
- Sec 10. Separability Clause. If any provision of part hereof is held invalid of unconstitutional, the remainder of the law or the provision not otherwise affected shall remain valid and subsisting.
- Sec 11. Repealing Clause. Any law, presidential decree or issuance, executive order, letter of instruction, administrative order, rule or regulation contrary to or inconsistent with the provisions of this Act are hereby repealed, modified or amended accordingly.
- Sec 12. Effectivity. This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation

Approved,