

Republic of the Philippines
House of Representatives
Quezon City

EIGHTEENTH CONGRESS
First Regular Session

0532

HOUSE BILL NO. _____



Introduced by Rep. JOSEPH STEPHEN S. PADUANO

EXPLANATORY NOTE

The Philippines is one of the countries with a high risk population when it comes to renal disease because of numerous cases of diabetes, high blood pressure and other hereditary diseases, all of which can lead to kidney malfunction. According to the National Kidney Transplant Institute (NKTI), kidney diseases are already the 7th leading cause of death among Filipinos with one Filipino developing chronic renal failure every hour or about 120 Filipinos per million population per year. In 2013, Dr. Antonio Paraiso of the Department of Health's (DOH) Philippine Network for Organ Sharing reported that close to 23,000 patients were undergoing dialysis treatment compared to the 4,000 patients in 2004. He also noted that glomerulonephritis used to be the primary cause of kidney failure until it was overtaken by diabetes and hypertension.

The cost of medical treatment for kidney disease is really very expensive, beyond the reach of ordinary patients. It was reported that in 2007, only 73% of Filipino patients with kidney failure were able to afford necessary treatment. A 2013 research by Dr. Romina Danguilan placed the average monthly income of chronic kidney disease (CKD) patients at P4,838.16 compared to the cost of treatment of P2,250 to be paid to the health care institution and P350 for the professional fee which has risen to P350 for the professional fee and to P700 in January 2016. A study by the Philippine Society of Nephrology (PSN) showed that 60 percent of CKD patients are the so-called service patients who badly needed state subsidy to get the life-saving treatment. And most of them usually reach out to politicians, foundations, state agencies, the Philippine Charity Sweepstakes Office (PCSO), among others.

Article XIII, Section 11 of the 1987 Philippine Constitution provides 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 affordable cost. There shall be priority for the needs of the underprivileged sick, elderly, disabled, women, and children. The State shall endeavor to provide free medical care to paupers."

Despite the efforts of the government — through the DOH, together with its specialty and regional hospitals and accredited dialysis clinics, PCSO and Philhealth — in addressing the problem, still the occurrence of renal diseases in the country is on the rise. More and more CKD patients facing economic difficulties who cannot afford the cost of the necessary treatment available as well as the cost of transportation to the available hospital/clinic tend to forego the treatment.

Hence, providing a dialysis machine to national, regional and provincial government hospitals will help CKD patients, especially from rural areas, to get the necessary treatment near their places of abode. A dialysis machine costs around P400,000.00 and this will not burden the government if the provision of the machine to DOH hospitals is done on a staggered basis. What is important is CKD patients from the rural areas can avail of the treatment near their homes.

In consonance with the constitutional mandate to make health services available to all the people at affordable cost, this bill requires all national, regional and provincial government hospitals to establish, operate and maintain a dialysis service facility in their respective hospital in order that dialysis treatment will be available and accessible to the people especially those in the rural areas in a cost effective manner. This bill further requires that dialysis treatment should be provided to indigent patients, free of charge. Moreover, the bill also requires that the dialysis service facility to disseminate the necessary information to prevent the occurrence of kidney malfunction and CKD.

For more efficient delivery of health care services to the Filipino people, the immediate approval of this proposed measure is earnestly sought.



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Introduced by **Rep. JOSEPH STEPHEN S. PADUANO**

AN ACT
REQUIRING ALL NATIONAL, REGIONAL, AND PROVINCIAL GOVERNMENT
HOSPITALS TO ESTABLISH, OPERATE AND MAINTAIN A DIALYSIS
SERVICE FACILITY IN THEIR RESPECTIVE HOSPITAL AND PROVIDING
FREE DIALYSIS TREATMENT TO INDIGENT PATIENTS

*Be 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 Service Facility for Indigents 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) "Dialysis Service Facility" shall refer to a facility that provides treatment for chronic kidney disease to indigent patients and disseminate information on its prevention,
- b) "National Government Hospital" shall refer to a hospital operated and maintained either partially or wholly by the national government or by any department, division, board or other agency thereof.
- c) "Regional Government Hospital" shall refer to a hospital operated and maintained either partially or wholly by the national government or by any department division, board or other agency thereof.
- d) "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.
- e) "Indigent Patient" shall refer to a patient whose combined annual family

income does not exceed Fifty Thousand (P50,000.00) annually,

SEC. 4. *Establishment, Operation and Maintenance of a Dialysis Service Facility.* Within two (2) years from the effectivity of this Act, all national, provincial, and regional government hospitals are hereby required to establish, operate and maintain a dialysis service facility in their hospital. It shall have a dialysis service area compliant with the Licensing Requirements imposed by the Department of Health (DOH) for private dialysis clinics. It shall further be provided with the necessary personnel and equipped with complete dialysis machine, equipment and supplies as provided for in the same DOH-issued Licensing Requirements for private dialysis clinics.

The Dialysis Service Facility shall further have a as well as a nontreatment area which shall serve as a waiting area for CKD patients and a business area for information service that shall give importance on information dissemination on the prevention of CKD.

SEC. 5. *Free Dialysis Service Treatment to Indigent Patients.* Indigent patients, as defined in Section 3 (e) hereof, shall be provided dialysis treatment in all national, provincial and regional hospitals.

SEC. 6. *Penalty.* Any hospital chief, administrator or officer-in-charge who fails to comply with this Act shall be meted with a fine of Fifty Thousand Pesos (P50,000.00) but not more than One Hundred Thousand Pesos (P100,000.00).

SEC. 7. *Implementing Rules and Regulations.* The DOH Secretary shall promulgate the necessary rules and regulations to implement the provisions of this Act.

SEC. 8. *Appropriations.* Such amount as may be necessary to implement the provisions of this Act is hereby authorized to be appropriated from the National Treasury. Thereafter, the amount necessary for the continuous implementation of this Act shall be included in the government hospital's annual appropriations.

SEC. 9. *Separability Clause.* If any provision or part hereof is held invalid or unconstitutional, the remainder of the law or the provision not otherwise affected shall remain valid and subsisting.

SEC. 10. *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. 11. *Effectivity.* This Act shall take effect fifteen (15) days after its publication in at least two (2) newspapers of general circulation.

Approved,