



Republic of the Philippines
House of Representatives
Quezon City, Metro Manila

NINETEENTH CONGRESS
First Regular Session

HOUSE BILL No. 4435



Introduced by HONORABLE ERNESTO "ERNIX" M. DIONISIO, JR.

EXPLANATORY NOTE

The World Health Organization (WHO) ranked renal or kidney diseases as one of the top ten causes of mortality in the Philippines.¹ During the lockdown, the lack of nephrology clinics that could support the demand for their services clearly became apparent. It was reported that government outpatient nephrology clinics stopped operations as most resources were focused on the containment and treatment of COVID-19 patients.² Some dialysis centers had to close due to depleted funds and the resignation of nurses who feared the virus.³

According to the Philippine Society of Nephrology (PSN), there are only ninety-two (92) dialysis centers in the Philippines. We can therefore conclude that there is difficulty in accessing life-saving procedures. And in every difficulty, the hardest hit is surely the marginalized sector of our society. The 1987 Constitution emphasized on the obligation of the State in providing accessible health services to Filipinos. Art. II, Section 15 provides that "The State shall protect and promote the right to health of the people and instill health consciousness among them." Art. XIII also 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 an affordable cost; that there shall be a priority for the needs of the underprivileged, sick, elderly, disabled, women, and children; and that the State shall endeavor to provide free medical care to paupers.

In accordance with these State policies and due to the dire situation faced by Filipinos with renal or kidney disease, a bill seeking to increase the accessibility of dialysis centers to cater to indigent Filipinos and indigent senior citizens, is highly necessary.

¹ <https://mb.com.ph/2022/03/08/kidney-health-for-all/>

² [https://www.kireports.org/article/S2468-0249\(21\)01342-5/fulltext](https://www.kireports.org/article/S2468-0249(21)01342-5/fulltext)

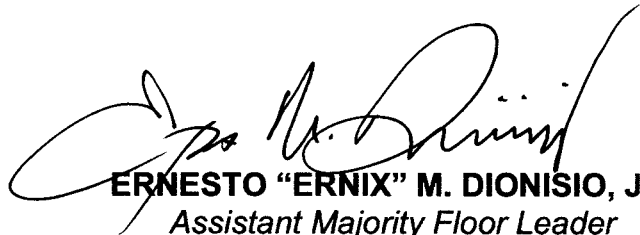
³ <https://mb.com.ph/2020/07/20/nkti-seeks-relief-from-covid-19-overcapacity/>



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ERNESTO "ERNIX" M. DIONISIO, JR.
Assistant Majority Floor Leader
Congressman
First Congressional District of Manila



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Introduced by **HONORABLE ERNESTO “ERNIX” M. DIONISIO, JR.**

AN ACT
REQUIRING ALL NATIONAL, REGIONAL, AND PROVINCIAL GOVERNMENT
HOSPITALS TO ESTABLISH, OPERATE AND MAINTAIN DIALYSIS WARDS OR
UNITS AND PROVIDING FREE DIALYSIS TREATMENT TO INDIGENT PATIENTS
AND INDIGENT SENIOR CITIZEN PATIENTS

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

SECTION 1. Short Title. – This Act shall be known as the “Free Dialysis Act of 2022.”

SECTION 2. Declaration of Policy. – It is the declared policy of the State to protect and promote the right to health of the people, and to 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. Further, it is also the policy of the State that priority be given to the health needs of the underprivileged, sick, elderly, disabled, women, and children.

SECTION 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) *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 Thirty Thousand Pesos (PhP/30,000.00) annually.
- f) *Senior Patient* – shall refer to a patient who is at least sixty (60) years old;



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SECTION 4. Establishment, Operation and Maintenance of a Dialysis Ward or Unit. – Within two (2) years from the effectivity of this Act, all national, regional, and provincial government hospitals are hereby required to establish, operate, and maintain a dialysis ward or unit in their hospitals. The dialysis ward or unit shall be equipped with complete dialysis machines, equipment, and supplies.

SECTION 5. Free Dialysis Treatment to Indigent Patients and Indigent Senior Patients. – Dialysis treatment in all national, regional, and provincial government hospitals shall be provided free of charge to indigent patients as defined in Section 3 (e) and (f) thereof.

SECTION 6. 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 (PhP/50,000.00) but not more than One Hundred Thousand Pesos (PhP/100,000.00).

SECTION 7. Implementing Rules and Regulations. – The Secretary shall promulgate the rules and regulations necessary for the effective implementation of this Act.

SECTION 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.

SECTION 9. Separability. – 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.

SECTION 10. Repealing Clause. – All laws, decrees, orders, rules and regulations, or parts thereof inconsistent with the provisions of this Act are hereby deemed repealed or modified accordingly.



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SECTION 11. Effectivity. – This Act shall take effect fifteen (15) days after its full publication in the Official Gazette or in at least two (2) newspapers of general circulation.