

Republic of the Philippines
HOUSE OF REPRESENTATIVES
Quezon City, Metro Manila

TWENTIETH (20th) CONGRESS
FIRST REGULAR SESSION

House Bill No. **2061**



Introduced by
Rep. ROBERT NAZAL

AN ACT
ESTABLISHING A CANCER MEDICINE AND TREATMENT ASSISTANCE
FUND FOR INDIGENT AND UNDERPRIVILEGED FILIPINOS

EXPLANATORY NOTE

Cancer remains a pressing public health concern in the Philippines, driven by the high cost of treatment and the limited accessibility of specialized care. As a disease that weakens the immune system and often leads to life-threatening complications, cancer affects individuals across all socioeconomic groups, with low- and middle-income populations bearing the heaviest burden. Globally recognized as one of the leading causes of mortality, cancer demands urgent, sustained, and coordinated public health intervention, especially in countries where access to timely and affordable healthcare remains inadequate.

In the Philippine context, while a small number of patients with financial means may seek treatment abroad, the vast majority must depend on the overstretched local healthcare system. Many are diagnosed at late stages of the disease, where curative options are severely limited. This is often due to a combination of factors, including genetic predisposition, lack of awareness, and the absence of systematic screening and early detection programs.

Multiple studies highlight the critical need for a comprehensive and inclusive cancer care framework, one that not only extends survival but also improves the quality of life for patients and their families. To this end, this bill proposes to institutionalize evidence-based, patient-centered interventions that strengthen cancer prevention, early detection, diagnosis, treatment, rehabilitation, and palliative care within the public health system.

This legislative measure reaffirms the State's commitment to upholding every Filipino's right to health by promoting equitable access to cancer care and ensuring the efficient and strategic allocation of healthcare resources. It also acknowledges the progress

made in recent years in enhancing the delivery of essential medical services, and seeks to build upon these gains through sustained government engagement and the consideration of diverse health determinants, whether social, economic, and environmental, that shape health outcomes.

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



Rep. ROBERT NAZAL
Bagong Henerasyon Party-List

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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 “Cancer Medicine and Treatment Fund for Filipinos Act.”

SECTION 2. DECLARATION OF POLICY.

It is hereby declared the policy of the State to protect and promote the right to health of all Filipinos, particularly the indigent and underprivileged. To this end, the State shall adopt and implement a responsive, equitable, and sustainable system for the delivery of free cancer treatment and access to essential medicines for cancer patients who lack the financial means to afford care. The government shall prioritize interventions that improve survival rates, ensure quality of life, and prevent financial hardship among affected individuals and families.

SECTION 3. DEFINITION OF TERMS.

As used in this Act, the following terms shall mean:

- A. Cancer – refers to a broad group of diseases involving abnormal cell growth with the potential to invade or spread to other parts of the body. Common types include breast, lung, liver, colorectal, and cervical cancer

- B. Cancer Treatment Program – refers to the government-administered system of providing medical services, medicines, and financial assistance to indigent and underprivileged cancer patients under this Act
- C. Cancer Fund – refers to the Ten Billion Peso (PhP 10,000,000,000.00) fund established under this Act to support the diagnosis, treatment, and care of qualified cancer patients
- D. Indigent Patients – refer to individuals or families who have been assessed by the DSWD as lacking the financial resources to pay for necessary healthcare services, and who are enrolled in or eligible for social welfare programs
- E. Underprivileged Patients – refer to individuals who are economically disadvantaged or vulnerable due to unemployment, underemployment, or other conditions resulting in limited access to healthcare
- F. PhilHealth – refers to the Philippine Health Insurance Corporation, the government agency mandated to implement the National Health Insurance Program
- G. Accredited Government Hospital – refers to any national, regional, or provincial public healthcare facility recognized and authorized by PhilHealth to deliver services under this Act
- H. Essential Cancer Medicines – refer to drugs listed by the Department of Health as critical for the prevention, diagnosis, treatment, and management of cancer and its complications
- I. Medical Practitioners – refer to duly licensed physicians and allied health professionals authorized to assess, treat, and monitor cancer patients, including oncologists, hematologists, radiologists, and attending physicians
- J. Health District – refers to a geographic or administrative area, typically aligned with congressional districts, where PhilHealth-accredited government hospitals serve as implementing centers for the Program

SECTION 4. ESTABLISHMENT OF A CANCER FUND AND FREE MEDICINE ASSISTANCE PROGRAM.

There is hereby established a Cancer Fund in the amount of Ten Billion Pesos (PhP 10,000,000,000.00) to provide financial support for the treatment and medication of indigent and underprivileged cancer patients. For this purpose, a Cancer Treatment and Free Medicine Assistance Program, hereinafter referred to as the Program, is hereby created.

The Program shall be administered by the Philippine Health Insurance Corporation (PhilHealth) through its network of accredited government hospitals located within each congressional district, hereinafter referred to as health districts.

Eligibility for assistance under the Program shall be limited to indigent and underprivileged cancer patients, who shall be identified by PhilHealth in close coordination with the Department of Social Welfare and Development (DSWD), Department of Health (DOH), and the Department of the Interior and Local Government (DILG).

Within six (6) months from the effectivity of this Act, PhilHealth, in coordination with the DSWD, DOH, DILG, and relevant stakeholders, including associations of hospitals, professional medical organizations, and patient advocacy groups, shall promulgate the implementing rules and regulations necessary to carry out the objectives of this Act..

SECTION 5. INVOLVEMENT OF MEDICAL PRACTITIONERS.

Qualified medical practitioners from accredited public and private healthcare institutions shall play an essential role in the implementation of the Program. Their responsibilities shall include the clinical assessment, recommendation, treatment planning, and monitoring of patients eligible for assistance under this Act.

The participation of medical professionals shall be guided by standards and protocols developed by the Department of Health (DOH) and the Philippine Medical Association (PMA) to ensure quality, ethical, and patient-centered care.

The following healthcare professionals shall be recognized under this Act for their role in the delivery of cancer care services:

- A. Oncologists
- B. Hematologists
- C. Radiologists
- D. Attending Physicians
- E. Supporting Medical Professionals (e.g., nurses, nutritionists, palliative care specialists)

SECTION 6. QUALITY STANDARDS OF DIALYSIS SERVICES.

All hospitals and dialysis centers shall comply with the prescribed safety and quality standards for dialysis and transplant services as issued by the Department of Health (DOH). The Health Facilities and Services Regulatory Bureau (HFSRB) of the DOH, in coordination with the Philippine Health Insurance Corporation (PhilHealth), shall be responsible for the regular monitoring, evaluation, and enforcement of these standards to ensure the delivery of safe, effective, and patient-centered renal care.

SECTION 7. APPROPRIATIONS.

The amount of Ten Billion Pesos (PhP 10,000,000,000.00) is hereby appropriated for the initial implementation of this Act. Thereafter, the necessary funds for the sustained operation of the Program shall be included in the annual General Appropriations Act (GAA) under the budget of the Department of Health (DOH).

SECTION 8. SEPARABILITY CLAUSE.

If any provision of this Act is declared invalid or unconstitutional, the provisions not affected thereby shall remain in full force and effect.

SECTION 9. REPEALING CLAUSE.

All laws, executive orders, proclamations, rules, regulations, and other issuances or parts inconsistent with the provisions of this Act are hereby repealed or amended accordingly.

SECTION 10. EFFECTIVITY.

This Act shall take effect fifteen (15) days following its complete publication in the Official Gazette or a newspaper of general circulation.

Approved,