



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

Twentieth Congress
First Regular Session

HOUSE BILL NO. 4670



Introduced by Representatives Ferdinand Martin G. Romualdez, Yedda Marie K. Romualdez, Andrew Julian K. Romualdez, and Jude A. Acidre

**AN ACT
ESTABLISHING A STANDARD OF CARE AND TREATMENT
CENTERS FOR PERSONS WITH BLEEDING DISORDERS, AND
APPROPRIATING FUNDS THEREFOR**

EXPLANATORY NOTE

In the Philippines, approximately 10,000 Filipinos have hemophilia and around 1% of the population is affected by bleeding disorders like Von Willebrand Disease. Despite these numbers, only about 1,500 hemophilia patients are registered with the Philippine Hemophilia Foundation, and fewer than 20 individuals with Von Willebrand Disease are documented.¹

Bleeding disorders result from a deficiency or absence of blood-clotting proteins, leading to life-threatening spontaneous bleeding, especially when vital organs are affected. While there is no cure, timely treatment can prevent severe complications and improve the quality of life. However, many Filipinos with these conditions struggle with limited access to care due to the high cost of clotting products and the scarcity of specialized treatment centers. Further, many individuals with bleeding disorders, especially those outside major urban centers, face inadequate treatment, resulting in frequent hospitalizations and, in severe cases, fatal complications due to delayed or insufficient care. The lack of standardized treatment further worsens regional disparities, leaving patients vulnerable.

¹ Rare but Real: The Struggles of Hemophilia Warriors – <https://capitolmedical.com.ph/articles-and-blogs/national-hemophilia-awareness-month/>

This bill aims to standardize care by establishing dedicated treatment centers equipped to provide comprehensive diagnostic services and continuous care. By ensuring that blood clotting products are available at no cost to those who need them, the measure will reduce the financial burden on families and improve health outcomes. Establishing these centers will provide patients with consistent, high-quality care, regardless of their location or financial situation.

In addition to improving patient care, the bill will help reduce long-term healthcare costs by preventing complications that arise from untreated or under-treated bleeding disorders. By focusing on prevention and early intervention, it aims to reduce hospitalizations and mitigate the economic strain on the public health system.

This bill represents a crucial step toward ensuring equitable healthcare for Filipinos with bleeding disorders. By standardizing care, improving access to treatment, and alleviating financial burdens, it will create a more inclusive healthcare system where no one is left behind.

Initially filed during the 17th Congress and refiled in both the 18th and 19th Congresses, this measure remains critical to addressing the needs of patients across the country.

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



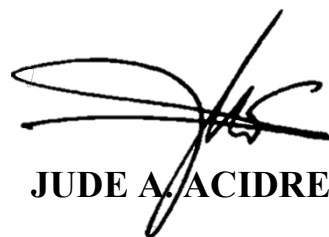
FERDINAND MARTIN G. ROMUALDEZ



YEDDA MARIE K. ROMUALDEZ



ANDREW JULIAN K. ROMUALDEZ



JUDE A. ACIDRE



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

Twentieth Congress
First Regular Session

HOUSE BILL NO. 4670

Introduced by Representatives Ferdinand Martin G. Romualdez, Yedda Marie K. Romualdez, Andrew Julian K. Romualdez, and Jude A. Acidre

**AN ACT
ESTABLISHING A STANDARD OF CARE AND TREATMENT
CENTERS FOR PERSONS WITH BLEEDING DISORDERS, AND
APPROPRIATING FUNDS THEREFOR**

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 “*Bleeding Disorder Standards of Care Act.*”

Section 2. *Declaration of Policy.* – It is hereby declared the policy of the State to ensure the adequate treatment of hemophilia at the lowest possible cost and endeavor to make them available for free to indigent patients, to ensure the establishment of treatment centers in public hospitals and to establish a standard of care so that patients with severe bleeding disorders can receive necessary and appropriate medical care.

Section 3. *Definition of Terms.* As used in this Act, the terms:

(a) “*Bleeding Disorder*” shall refer to a medical condition characterized by a severe deficiency or absence of one or more essential blood clotting proteins in the human blood, often called factors, including all forms of hemophilia, von Willebrand disease, and other bleeding disorders which result in uncontrolled bleeding or abnormal blood clotting;

(b) “*Blood Clotting product*” shall mean an intravenously administered medicine manufactured from human plasma, recombinant biotechnology techniques and other processes, approved for distribution by the Food and Drug Administration (FDA) and which is used for the treatment and prevention of symptoms associated with bleeding disorders. The term includes, but is not limited to:

(1) Factor VIIa, Factor VIII and Factor IX products;

(2) Von Willebrand Factor products;

(3) Prothrombin complex concentrates;

(4) Activated prothrombin complex concentrates; and

(5) Other products approved by the FDA for the treatment of bleeding disorders and associated inhibitors.

(c) “*Indigent Patient*” shall mean any patient deemed unable to pay for services or medical treatment, laboratory testing of blood and/or

coagulation studies, or blood coagulating product and/or ancillary infusion equipment;

(d) “*DOH*” shall refer to the Department of Health;

(e) “*FDA*” shall refer to the Food and Drug Administration;

(f) “*Hemophilia*” shall refer to a human bleeding disorder caused by a hereditary deficiency of the Factor VIII, Factor XI or Factor XI blood clotting protein in human blood; and

(g) “*von Willebrand disease*” shall refer to a human bleeding disorder caused by a hereditary deficiency or abnormality of the von Willebrand Factor in human blood.

Section 4. *State Treatment Facilities.* – The State shall establish hemophilia treatment facilities in key cities and regions nationwide in designated hospitals with Cancer and Hematology Departments.

Each Hemophilia Treatment Facility shall provide to all hemophilia patients:

(a) Care by qualified hematologists and medical doctors and shall also provide, free of charge, the necessary blood clotting products and ancillary infusion equipment necessary for the infusion of such blood clotting products;

(b) A room exclusively for hemophilia patients; and,

- (c) A clinical coagulation laboratory for the screening, diagnosis, provisional diagnosis, and treatment of bleeding disorders or suspected bleeding disorders and such services shall be provided free of charge to all indigent patients.

Section 5. *Appropriations.* – The amount necessary for the initial implementation of this Act shall be sourced from the current budget of the Department of Health. Thereafter, the funds necessary for the continuous implementation of this Act in the ensuing years shall be included in the General Appropriations Act.

The treatment facilities are allowed to use five percent (5%) of the amount given to it for the maintenance of the rooms that will be used exclusively for hemophilia patients. However, ninety percent (90%) of the amount shall be used exclusively for necessary blood clotting products and ancillary infusion equipment necessary for the infusion of such blood clotting products to hemophilia patients. The remaining five percent (5%) shall be used for blood screening of hemophilia patients.

Each treatment facility shall submit an annual report to the DOH on how the amount given to it is used.

Section 6. *Implementing Rules and Regulations.* – Within sixty (60) days from the approval of this Act, the Department of Health (DOH) shall, in consultation with hemophilia groups, promulgate the Implementing Rules and Regulations (IRR) to carry out the provisions of this Act.

Section 7. *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 8. *Repealing Clause.* – All laws, presidential decrees, executive orders, presidential proclamations, rules and regulations or parts thereof contrary to or inconsistent with this Act are hereby repealed or modified accordingly.

Section 9. *Effectivity.* – This Act shall take effect fifteen (15) days after its publication in the *Official Gazette* or in at least two (2) newspapers of general circulation.

Approved,