



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



TWENTIETH CONGRESS
First Regular Session

House Bill No. 8548

Introduced by **Representative GIRLIE E. VELOSO**

EXPLANATORY NOTE

The 1987 Constitution mandates the State to promote the general welfare, make social services accessible, responsive, and equitable, and adopt an integrated and comprehensive approach to health development for the benefit of the people. It likewise declares that public office is a public trust and that public officers and employees must serve with utmost responsibility, integrity, loyalty, and efficiency. These constitutional imperatives are reinforced by Republic Act No. 11032, or the Ease of Doing Business and Efficient Government Service Delivery Act of 2018, which directs government offices to review, simplify, and reengineer their systems in order to eliminate redundant steps and burdensome requirements in the delivery of public services.

Yet for many Filipinos, access to government financial assistance remains far more difficult than the law intends. The problem is not confined to a single office or a single program. It cuts across the broader public assistance system that families rely upon in times of illness, confinement, treatment, diagnostics, medicines, transport, and even burial. The scale of that system is already undeniable. Under the General Appropriations Act for Fiscal Year 2026, the national government allocated approximately ₱51.6 billion for the Department of Health's Medical Assistance to Indigent and Financially-Incapacitated Patients (MAIFIP) and ₱63.9 billion for the Department of Social Welfare and Development's Assistance to Individuals in Crisis Situations (AICS), demonstrating that direct financial assistance for Filipinos in crisis has become a major and continuing public expenditure priority.¹ PhilHealth, for its part, reported that in the first semester of 2025 alone, it paid 9,396,020 claims amounting to ₱139.31 billion², while the Philippine Charity Sweepstakes Office (PCSO) reported in its 2025 year-end accomplishment report that its Medical Assistance Program extended ₱943.57 million to beneficiaries for hospitalization, diagnostics, and

¹ Department of Budget and Management, General Appropriations Act for Fiscal Year 2026, <https://www.dbm.gov.ph>

² Philippine Health Insurance Corporation, Stats and Charts: January–June 2025, reporting 9,396,020 claims amounting to ₱139.31 billion. https://www.philhealth.gov.ph/about_us/statsncharts/SNC_2025_1stSem_v1.pdf

treatment³. Official DSWD reporting also shows that in 2025, the AICS program served more than 8.2 million Filipinos nationwide⁴. These figures confirm that government financial assistance is no longer a marginal or occasional intervention. It is a nationwide, high-volume, multi-agency frontline service mechanism used by millions of Filipinos and supported by very substantial public resources.

However, while appropriations and program utilization have grown, the process for accessing assistance remains unnecessarily difficult for many citizens. Families in crisis still encounter inconsistent checklists depending on the office they approach, repeated submission of substantially similar documents, shifting local practices, and delays that are incompatible with medical discharge, treatment schedules, or burial timelines. In practice, this means that a person who is already poor, sick, grieving, or financially distressed must often overcome administrative friction before receiving aid that government has already funded and agencies are already mandated to deliver. This kind of documentary burden is not a minor inconvenience as it can delay treatment, prolong hospital stays, worsen financial stress, and erode trust in public institutions precisely when government must be most responsive. The need for procedural simplification is also consistent with broader evidence from public administration research, which has identified documentation gaps, duplicative compliance requirements, and procedural inconsistencies as recurring weaknesses in Philippine government processes⁵.

This bill seeks to address these barriers by establishing a simplified, standardized, and more predictable framework for availing government financial assistance. It defines a limited set of documentary requirements for medical, burial, and similar forms of aid, reduces room for arbitrary or shifting checklists across offices, and compels more streamlined processing of requests upon submission of complete requirements. It likewise strengthens institutional accountability by requiring coordination with the Anti-Red Tape Authority and supports the use of digital systems, including the eGov PH Super App and other appropriate platforms, to facilitate requests for assistance. The measure does not create a new subsidy, a new entitlement, or a new bureaucracy. Rather, it improves the delivery architecture of assistance programs that government is already funding at scale and that Filipino families are already heavily relying upon.

As the benefits of the proposed measure are practical, immediate, and systemic, it will reduce avoidable delays for patients and families seeking help for hospitalization, medicines, procedures, or burial expenses. It will lessen uncertainty for beneficiaries who must otherwise navigate multiple desks and varying documentary demands across agencies and localities. It will also promote a more uniform national standard for service delivery, improve administrative discipline in the handling of public assistance, and better align actual frontline practice with the constitutional and statutory mandate of efficient, humane, and responsive governance. In a setting where billions of pesos in public funds are already devoted to health and crisis-related financial assistance, it is both

³ Philippine Charity Sweepstakes Office, *Accomplishment Report 2025 Fourth Quarter / Year-End*, reporting ₱943.57 million released under the Medical Assistance Program. <https://www.pcsso.gov.ph/pcsofiles/transparency/12/Accomplishment%20Report%202025%204Q.pdf>

⁴ Department of Social Welfare and Development, “DSWD serves over 8.2M in-crisis Filipinos in 2025.” <https://www.dswd.gov.ph/dswd-serves-over-8-2m-in-crisis-pinoys-in-2025-expects-to-help-more-clients-this-year/>

⁵ Imasa, D.A., & Campos, K., *Issues in Philippine Public Procurement: A Content Analysis of Commission on Audit Annual Audit Reports* (2024). <https://journal2.unusa.ac.id/index.php/CDI/article/view/6577>

reasonable and necessary to ensure that the process for accessing such assistance is simpler, clearer, and more consistent for the Filipino people.

This measure is therefore both a social protection reform and a governance reform. It recognizes that in moments of illness, death, and crisis, bureaucracy must not become a second burden imposed on the citizen. By simplifying documentary requirements and streamlining access across the government's financial assistance system, the bill helps ensure that aid intended for the people is delivered in a manner that is timely, accessible, efficient, and dignified.

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


REP. GIRLIE E. VELOSO
Malasakit@Bayanhan Party-List



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

TWENTIETH CONGRESS
First Regular Session

House Bill No. **8548**

Introduced by **Representative GIRLIE E. VELOSO**

AN ACT
SIMPLIFYING AND STANDARDIZING THE DOCUMENTARY
REQUIREMENTS FOR ACCESSING GOVERNMENT FINANCIAL ASSISTANCE
AND FOR OTHER PURPOSES

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

1 **SECTION 1. Short Title.** — This Act shall be known as the “Direkta at Agad na Lingap
2 at Interbensyon (DALI) Act.”

3 **SECTION 2. Declaration of Policy.** — It is the policy of the State to promote the
4 general welfare of the Filipino people by ensuring that individuals and families in difficult situations
5 are provided timely and accessible financial assistance. Toward this end, the State shall simplify
6 and standardize documentary requirements, streamline procedures, and ensure that government
7 social services are delivered in an accessible, responsive, and equitable manner.

8 **SECTION 3. Scope and Coverage.** — This Act shall apply to all national government
9 agencies, local government units, and government instrumentalities responsible for administering
10 medical, burial, housing, and other crisis-related financial assistance programs, including the
11 Department of Social Welfare and Development (DSWD), Department of Health (DOH),
12 Philippine Charity Sweepstakes Office (PCSO), Philippine Health Insurance Corporation
13 (PhilHealth), National Housing Authority (NHA), and other government entities implementing
14 similar assistance programs.

15 **SECTION 4. Standardized Requirements.** — To avail of immediate financial
16 assistance, beneficiaries shall be required to submit only the following documents:

- 1 (a) Valid government-issued identification (ID);
2 Provided, That in cases where a beneficiary is unable to present a valid government-
3 issued identification due to poverty, displacement, illness, disability, or other reasonable
4 circumstances, alternative proof of identity such as a barangay certification or other
5 equivalent document as may be prescribed in the implementing rules and regulations
6 may be accepted;
7 (b) Billing statement from the hospital, clinic, funeral parlor, or other related service
8 entities; and
9 (c) Original or certified true copy of a medical certificate or medical abstract issued by a
10 licensed physician indicating the date of issuance and the physician's name, signature,
11 and license number, or a death certificate issued by the hospital or the city or municipal
12 health office, whichever is applicable.

13 No government agency shall require additional documentary requirements beyond those
14 provided under this section, except for reasonable and program-specific requirements that are
15 strictly necessary and directly related to the evaluation of the eligibility or amount of assistance
16 being applied for, as may be provided under the implementing rules and regulations: Provided,
17 That no document shall be required if the information may be obtained from existing government
18 records or databases.

19 Hospitals, clinics, and other authorized medical facilities issuing such medical certificates
20 or medical abstracts shall, in coordination with the Department of Health (DOH), ensure that the
21 foregoing information is clearly indicated therein.

22 Where the request for assistance is made through a representative, such representative shall
23 present an authorization letter duly signed by the beneficiary or, where the beneficiary is unable to
24 sign due to age, illness, disability, or illiteracy, such other reasonable proof of authorization as may
25 be prescribed by the implementing rules and regulations, together with a valid government-issued
26 ID of both the beneficiary and the representative.

27 The authorized representative must be a relative of the beneficiary within the fourth degree
28 of consanguinity or affinity, or a legal guardian: Provided, That no individual shall act as a
29 representative for more than two (2) beneficiaries.

30 **SECTION 5. Digital Requests for Government Aid.** — The Department of
31 Information and Communications Technology (DICT) shall be primarily tasked to develop and
32 utilize the eGov PH Super App or other appropriate digital systems or platforms, as may be
33 prescribed in the implementing rules and regulations, as a mechanism for Filipinos to avail of aid
34 from government agencies.

35 The online or mobile application shall be utilized to facilitate requests for medical, burial,
36 and similar forms of financial assistance.

1 The digital platform shall allow applicants to submit requests, track the status of their
2 applications, and receive notifications regarding the approval, denial, or release of assistance.

3 **SECTION 6. Streamlined Process.** — All concerned government agencies shall process
4 requests for assistance within the day, subject to the availability of funds: Provided, That complete
5 documentary requirements are submitted during official working hours.

6 For purposes of this section, processing shall include the evaluation of the request and the
7 approval or denial of the application for assistance.

8 Requests submitted on weekends, holidays, or outside official working hours shall be
9 processed on the next working day.

10 **SECTION 7. Coordination with the Anti-Red Tape Authority.** — All covered
11 government agencies shall coordinate with the Anti-Red Tape Authority (ARTA) to ensure
12 compliance with Republic Act No. 11032, otherwise known as the “Ease of Doing Business and
13 Efficient Government Service Delivery Act of 2018.”

14 ARTA shall assist in addressing complaints involving delays, excessive requirements, or
15 other violations of the streamlined procedures established under this Act.

16 **SECTION 8. Implementing Rules and Regulations.** — Within sixty (60) days from
17 the effectivity of this Act, the Department of Social Welfare and Development (DSWD), in
18 coordination with the Anti-Red Tape Authority (ARTA), Department of Health (DOH),
19 Philippine Charity Sweepstakes Office (PCSO), Philippine Health Insurance Corporation
20 (PhilHealth), National Housing Authority (NHA), Department of Information and
21 Communications Technology (DICT), and the Department of the Interior and Local Government
22 (DILG), and other concerned government agencies, in consultation with local government units,
23 shall promulgate the necessary rules and regulations for the effective implementation of this Act.

24 **SECTION 9. Appropriations.** — The implementation of this Act shall be charged
25 against the existing appropriations of the concerned agencies.

26 **SECTION 10. Separability Clause.** — If, for any reason, any section of this Act shall be
27 deemed unconstitutional or invalid, the other sections or provisions shall not be affected and shall
28 remain in force and in effect.

29 **SECTION 11. Repealing Clause.** — All laws, decrees, executive orders, rules and
30 regulations, or parts thereof inconsistent with the provisions of this Act are hereby repealed or
31 modified accordingly.

32 **SECTION 12. Effectivity Clause.** — This Act shall take effect after fifteen (15) days
33 from its publication in the Official Gazette or in at least two (2) newspapers of general circulation,
34 whichever comes earlier.

1 Approved.