

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

**TWENTIETH CONGRESS**  
Second Regular Session

House Bill No. 10162



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**INTRODUCED BY REP. PATRICK MICHAEL “PM” D. VARGAS**

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**AN ACT**  
**INSTITUTIONALIZING A FREE MEDICINE ASSISTANCE PROGRAM FOR**  
**THE POOR, ESTABLISHING ACCESS SITES IN ALL CITIES AND**  
**MUNICIPALITIES OF THE COUNTRY, AND PROVIDING FUNDS**  
**THEREFOR**

**EXPLANATORY NOTE**

The World Health Organization has observed that the major causes of death in low-income countries can be treated effectively with simple essential medicines. However, the medicines are often not available, not accessible or not affordable.

Recent evidence indicates that limited access to affordable and essential medicines remains a persistent challenge in the Philippine health system. A Philippine Institute for Development Studies (PIDS) assessment found that only 2 in 10 hospitals have a complete set of essential medicines, forcing many patients to procure medicines outside health facilities at their own expense.<sup>1</sup>

The Department of Health (DOH) has an ongoing free medicine program for indigents called Medical Assistance Program (MAP), a program intended to provide medical assistance to patients seeking consultation, rehabilitation, examination, or otherwise confined in government hospitals.

On the other hand, the Department of Social Welfare and Development (DSWD) also provide medical assistance to indigent patients in its Assistance to Individuals in Crisis Situations (AICS).<sup>2</sup>

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<sup>1</sup> Philippine Institute for Development Studies (PIDS), *Assessment of the Service Capability and Readiness of Philippine Hospitals to Provide High-Quality Health Care* (2021)

<sup>2</sup> DSWD Memorandum Circular No. 14, series of 2016.

While the government has expanded access through programs such as PhilHealth's outpatient medicine benefits (e.g., the YAKAP Program), availability remains uneven, and facilities are required to maintain sufficient stocks of covered medicines to ensure continuity of care.

This bill seeks to improve Filipinos' access to essential medicines by institutionalizing a free medicine assistance program for the poor and marginalized, and by establishing accessible distribution sites in all cities and municipalities nationwide. Through these measures, it aims to enhance survival rates among underserved populations suffering from treatable conditions, thereby contributing to improved overall public health outcomes in the country.

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



**REP. PATRICK MICHAEL "PM" D. VARGAS**

Fifth District, Quezon City

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*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 Medicine for the Poor Act.*”

**SECTION 2. Declaration of Policy.** – It is hereby declared the policy of the State to protect and promote the right to health and well-being of every Filipino and to adopt a system of implementing the delivery of free basic medicines to those who have less in life in all health facilities in the country, giving priority to the underprivileged, ailing, malnourished, elderly, women, children, disabled, and the poorest of the poor.

**SECTION 3. Objectives.** – This Act pursues the following objectives:

- a) To promote optimal health and well-being of every Filipino by improved access to medicines; and
- b) To address the health needs of the marginalized sectors such as the poor, malnourished, elderly, women, children, and the disabled through the establishment of a Free Basic Medicine Assistance Program in all government health facilities nationwide.

**SECTION 4. Establishment of Free Medicine Assistance Program.** – There shall be established a Free Medicine Assistance Program, hereinafter referred

to as the “Libreng Gamot Program,” to be administered by the Department of Health (DOH) through government district hospitals, local health units, and barangay health centers in all cities and municipalities, in coordination with the Department of Social Welfare and Development (DSWD).

**SECTION 5. *Eligible Beneficiaries.*** – The Libreng Gamot Program shall be restricted to qualified poor recipients as certified by the barangay and the DSWD officials.

**SECTION 6. *Availment of Free Medicines.*** – Free medicines shall be made available in all government district hospitals, local health units, and barangay health centers. These health facilities shall account for all the medicines released to qualified beneficiaries through the submission of quarterly reports to the DOH.

**SECTION 7. *Appropriations.*** – The amount needed for the initial implementation of this Act shall be charged against the appropriations of the DOH. Thereafter, such sums as may be necessary for the continued implementation of this Act shall be included in the annual General Appropriations Act.

**SECTION 8. *Implementing Rules and Regulations.*** – The DOH, in coordination with the DSWD and in consultation with the Philippine Medical Association (PMA), shall promulgate the necessary rules and regulations to effectively implement the provisions of this Act within six (6) months of the effectivity hereof.

**SECTION 9. *Separability Clause.*** – If any part or provision of this Act shall be held unconstitutional or invalid, other provisions hereof which are not affected thereby shall continue to be in full force and effect.

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

**SECTION 11. *Effectivity.*** – This Act shall take effect fifteen (15) days after its publication in the *Official Gazette* or in a newspaper of general circulation.

*Approved,*