

Republic of the Philippines
House of Representatives
Quezon City

SEVENTEENTH CONGRESS
First Regular Session

HOUSE BILL NO. 5355



INTRODUCED BY CONGRESSMAN ALFRED VARGAS

EXPLANATORY NOTE

Bleeding disorders, which includes Hemophilia and von Willebrand disease, are genetic and debilitating blood clotting conditions where the patient's blood lacks the ability to clot normally. This may lead to severe and spontaneous bleeding episodes even for just minor injuries.

According to the World Federation of Hemophilia, approximately 100,000 Filipinos are suffering from bleeding disorders. However, only around 1,200 patients are properly identified and have been registered with the Philippine Hemophilia Foundation. Most bleeding disorder patients in the country are left undiagnosed due to lack of awareness of the symptoms by both patients and health professionals.

Another problem that patients face is the lack of access to medical care. First, the cost of treating bleeding disorders is very expensive. As cited by the Hemophilia Advocates Philippines, the case of mild bleeding in the joints can cost Php 30,000.00 to Php 50,000.00 per treatment. Treating severe bleeding can cost hundreds of thousands of pesos, if not millions. Also, there are hardly any treatment facilities catering to thousands of hemophilia patients from all over the Philippine archipelago. Given that the families can afford the treatment, patients from far-flung provinces are forced to travel to Metro Manila to have them admitted to the Philippine Blood Center in Quezon City.

Thus, there is an urgent need for the State to include hemophilia care in the national health agenda.

This bill provides for the establishment of hemophilia treatment facilities in key cities and regions in the Philippines. These treatment centers are expected to provide necessary and adequate medical care to bleeding disorder patients at the lowest possible costs.

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


ALFRED VARGAS

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AN ACT

PROVIDING A STANDARD OF CARE FOR THE TREATMENT OF PERSONS WITH BLEEDING DISORDERS, ESTABLISHING TREATMENT CENTERS 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 of 2017.”

SEC. 2. *Declaration of Policy.* – It is hereby declared the policy of the State:

- (1) To ensure the adequate treatment of hemophilia at the lowest possible cost and endeavor to make them available for free to indigent patients;
- (2) To ensure the establishment of treatment centers in public hospitals; and
- (3) To establish a standard of care so that patients with severe bleeding disorders can receive necessary and appropriate medical care.

SEC. 3. *Definitions.* – For the purposes of this Act:

- (1) ***Bleeding Disorder*** refers to a medical condition characterized by 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 uncontrollable bleeding or abnormal blood clotting.
- (2) ***Blood Clotting Product*** refers to an intravenously-administered medicine manufactured from human plasma, recombinant biotechnology techniques and other processes, approved for distribution by the Bureau of Food and Drugs (BFAD) and which is used for the treatment and prevention of symptoms associated with bleeding disorders. This term includes, but is not limited to:
 - a. Factor VIIa, Factor VII and Factor IX products;
 - b. Von Willebrand Factor products;
 - c. Prothrombin complex concentrates;
 - d. Activated prothrombin complex concentrates;

- e. Other products approved by the BFAD for the treatment of bleeding disorders and associated inhibitors.
- (3) **Indigent Patient** refers to any patient deemed unable to pay for services and or medical treatment, laboratory testing of blood and/or coagulation studies, or blood coagulating products and/or ancillary infusion equipment.
- (4) **DOH** refers to the Department of Health.
- (5) **BFAD** refers to the Bureau of Food and Drugs.
- (6) **Hemophilia** refers to a human bleeding disorder caused by a hereditary deficiency of the Factor VIII, Factor IX or Factor XI blood clotting protein in human blood.
- (7) **Von Willebrand Disease** refers to a human bleeding disorder caused by a hereditary deficiency or abnormality of the von Willebrand Factor in the human blood.

Sec. 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:

- (1) 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;
- (2) A room exclusively for hemophilia patients; and
- (3) 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.

Sec. 5. Funding. – 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 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 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 is used.

Sec. 6. Regulations. – Within sixty (60) days from the approval of this Act, the Department of Health (DOH) shall, in consultation with hemophilia advocacy groups, promulgate the implementing rules and regulations (IRR) to carry out the provisions of this Act.

Sec. 7. Separability Clause. – If for any reason, any provision of this Act is declared unconstitutional or invalid, the other parts of provisions hereof which are not affected thereby shall continue to be in full force and effect.

Sec. 8. Effectivity Clause. – This Act shall take effect on the fifteenth day following its publication in at least two (2) daily papers of national circulation.

Approved,