Founded 1898

## The Manila Times

## CCT, health programs benefit poor Pinoy kids

## by Anna Leah E. Gonzales – April 4, 2018 http://www.manilatimes.net/cct-health-programs-benefit-poor-pinoykids/390367/

Poor Filipino children under the government's conditional cash transfer (CCT) and health care programs now have better acess to health care, the Philippine Institute for Development Studies (PIDS) said.

In a study, the state think tank said the Pantawid Pamilyang Pilipino Program (4Ps) had a positive impact on these children, as it enrolled them in the country's social health insurance program, and required preventive checkups for five-years-olds and younger.

In their discussion paper, study authors and PIDS Senior Research Fellow Michael Abrigo and Visiting Research Fellow Vicente Paqueo said "the social health insurance and the CCT program, jointly, were able to induce greater hospital visits for both preventive and curative care, and lower out-of-pocket expenditures."

Access to health care in developing countries is challenging, PIDS noted, saying that in the Philippines, efforts to provide it went back as early as the 1970s.

These underwent various improvements, especially after the establishment of the Philippine Health Insurance Corp. (PHIC) in 1995, it added.

According to the study, insured Filipino children are 8.7 percent to 12.8 percent more likely to visit a health care facility than those who are not.

Insured children who fall ill and who are healthy are more likely to visit such a facility by about 18 percent to 30 percent and 5.9 percent to 8.3 percent, respectively.

The authors noted the limited impact on preventive health care based on 2013 data, saying the PHIC's benefit packages for primary care checkups of sponsored members were "neither as extensive [and]generous, nor as well-established" as those for inpatient care.

The study found a significant reduction in out-of-pocket spending, saying "insured children are 9.2 percent to 38.6 percent less likely to" shell out money than non-insured ones, "depending on specification."

While there is a general increase in healthcare demand, insured poor Filipino children are less inclined to show "that they were satisfied with the service they had received during confinement," it added.

They were more likely to cite uncaring or rude staff or unfair treatment as reasons, as well as unavailable or insufficient medicines, equipment, and staff.

Insurance coverage alone is not enough to improve access to health care, and income, price, and information spillover should converge in designing better social health insurance programs, the authors said.