

# WHO IS USING PHILHEALTH?

Using segmentation  
to track social health insurance resources  
to broad patient populations

## Background

In light of the passage of the Universal Health Care (UHC) Law in the Philippines in early 2019, policy actors must understand the heterogeneous demands for care among Filipinos in order to deepen financial coverage. This segmentation study was conducted in order to gain an initial understanding of the populations utilizing the PhilHealth fund and characterize the groups to be targeted for preventive action.

## Method

A **k-means cluster analysis** was performed on a patient-level transformation of the 2016 PhilHealth claims database, grouping patients together based on age, number of days spent in inpatient admission, and payouts for broad categories of conditions and procedures. Cluster analysis was done separately for maternal beneficiaries.

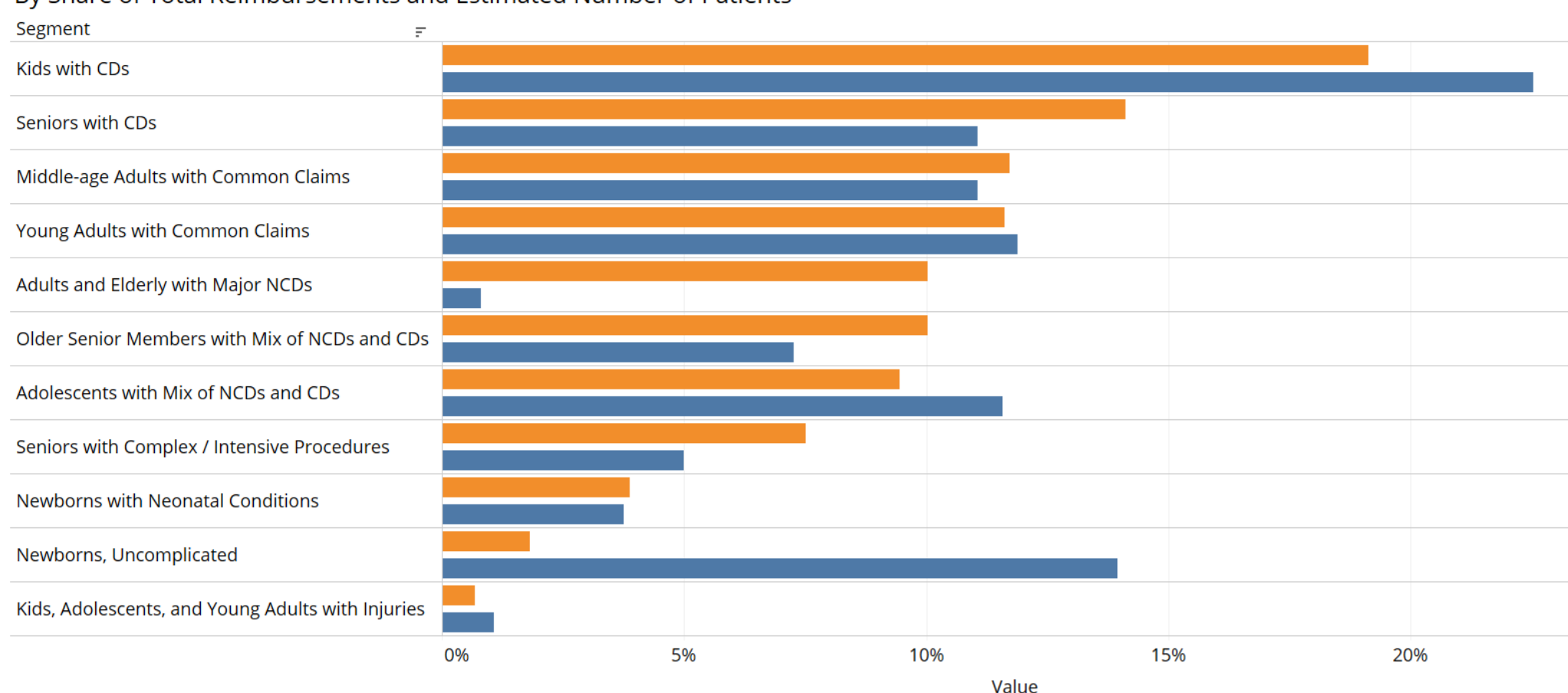
## Findings

More than 7.2 million patients were estimated to have utilized PhilHealth benefits in 2016, 39.6% of whom were indigent. Twelve segments across seven age groups were identified for the 6 million non-maternal beneficiaries.

Among these, the largest segment in both beneficiaries and payouts was of children below 10 years of age, 70% of whom had claims for communicable diseases. The segment with the greatest average payouts per patient was for adults and elderly utilizing either hemodialysis or chemotherapy packages, a group comprising only 0.6% of all beneficiaries but 8.7% of total payouts. It is also the only group where indigents are the minority. For the 1.27 million maternal beneficiaries, a higher-cost segment was composed of mothers who had availed of c-sections.

Segments of PhilHealth Beneficiaries who Utilized Benefits in 2016

By Share of Total Reimbursements and Estimated Number of Patients



## Recommendations

It is recommended that PhilHealth share its store of information with the DOH to improve upon existing evidence for preventive efforts across all segments, with focus on children with communicable diseases and patients at risk of cancers and kidney diseases. PhilHealth should collect actual diagnoses and further sociodemographic data on its members to facilitate deeper understanding of these beneficiary groups.