
Experiences of Members on Philhealth Services

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Abstract— PhilHealth Services are essential in providing health insurance needs for every Filipino. Among all risk pools in the nation, PhilHealth boasts the broadest network of accredited facilities and personnel. As a result, PhilHealth's policies have a wide and possibly substantial impact on how healthcare is provided. This therefore led the researchers to determine the experiences of members regarding the Universal Health Care Services of PhilHealth in Tuguegarao City, Cagayan, along with their memberships, contributions, and benefits. Through this, PhilHealth itself will gain better understanding about its members' information needs, medical needs, views, and opinions. This will provide as an avenue for further improvements and regulations in the services they provide. The researchers used purposive sampling method, thereby recruiting 30 informants who are permanent residents of Tuguegarao City, Cagayan. This study used a self-made interview guide and open-ended questionnaires. Braun and Clarke's Six-Process Thematic Analysis was used to analyze the gathered data. Five major themes were deduced from the verbalizations of the informants which were summarized in the following: (a) PhilHealth Contribution, (b) Lack of Awareness of the Changes in PhilHealth during the Implementation of UHC Law, (c) Availing PhilHealth Benefits, (d) Problems Encountered in Claiming PhilHealth Benefits, (e) Satisfaction with the Services of PhilHealth. Thus, the study showed that there are more positive than negative experiences and satisfaction with PhilHealth. It is also evident that PhilHealth has the capability of delivering high-quality services and significantly lowering the cost of treatment options for these people. It can also be observed that PhilHealth made it simple for its members to join, pay, and receive benefits.

Keywords— *PhilHealth, health financing, health insurance*

I. INTRODUCTION

The Philippine Medical Care Program was established in 1971 as a result of the 1969 Philippine Medical Care Act (The LawPhil Project, 2022). The Philippine Medical Care Commission (PMCC) had to be established as a result. The public health insurance system significantly improved in 1990 as a result of bills that were passed. "The National Health Insurance Act of 1995," also known as Republic Act 7875, was created from House Bill 14225 and Senate Bill 01738,

respectively. In order to provide universal healthcare in the Philippines, the Philippine Health Insurance Corporation (PhilHealth) was approved by President Fidel Ramos and founded on February 14, 1995. It is a Philippine GOCC that is tax-exempt, owned by the government, and part of the Department of Health. (RA 7875, Philippine Congress, 1995; PhilHealth, 2022).

For practically of the whole population, PhilHealth offers six main membership categories. Employees of public and commercial businesses as well as other institutions are counted as belonging to the (1) "Formal" sector. (2) Through the National Household Targeting System for Poverty Reduction, "Indigents" (also known as "PhilHealth Ng Masa") are supported by the federal government. (3) "Sponsored Members" receive funding from the local governments in each of their respective areas (LGU). (4) "Lifetime" (non-paying) members are retired people and pensioners who have already paid dues for 120 months of membership. (5) Senior Citizens are entitled for free PhilHealth coverage if they are 60 years of age or older (under RA 10645) (6) The "Informal Economy" is made up of Filipinos with dual citizenship, self-employed individuals, organized groups, and natural-born citizens. Although they are considered separately, migrant workers and the Overseas Filipino Workers (OFW) program are both a part of the informal economy. Whether they are based on land or the sea (for seafarers), migrant workers are divided into different categories (Cabalfin, 2016; PhilHealth, 2022).

The establishment of PhilHealth was to guarantee that all Filipino citizens would have access to reasonably priced, acceptable, readily available, and health care services. It will act as a way for the well-off to assist in covering the costs of the sick, and for the wealthy to support the underprivileged. Programmes I and II, or Medicare, will be the foundation of this programme, which will gradually grow to include a single universal health insurance plan for the whole populace. A sustainable system of fund creation, collection, management, and disbursement will be incorporated into the programme to finance the provision of health insurance benefits to a gradually increasing segment of the population, including a basic

minimum package and several supplemental packages. The program's funding is designated solely for reimbursing eligible beneficiaries' medical expenses. It strictly prohibits direct provision of medical care, the purchase and distribution of medications, hiring of doctors and other healthcare professionals for direct care, and any ownership or investment in healthcare facilities (PhilHealth, 2022).

Meanwhile, achieving Universal Health Coverage (UHC) is currently a top priority for health policy in many nations, and National Health Insurance (NHI) programs are frequently utilized to achieve this. The UHC's goal is to make sure that all Filipinos had a right to PhilHealth benefits, which included all-inclusive outpatient care. With UHC, PhilHealth will be in charge of paying for all individual-based services, including the supplies, medications, and commodities, as well as the upkeep and running costs of medical facilities (Sigua et al., 2020). Moreover, UHC Law foresees that there will be a significant change in terms of leadership and governance, financing, service delivery structure, access to medical products, health workforce, and health information system. To successfully implement the Kalusugan Pangkalahatan (KP) program, purchasing health services is especially important. PhilHealth, the nation's social health insurance, has prioritized growing its membership, but as its population coverage approaches 75–85 percent, its focus should switch to growing the reimbursement rate so that health insurance lowers households' risks of going into poverty due to illness. To accomplish this, PhilHealth must take the following actions related to purchasing health services: identifying the services that members need, accrediting providers, determining the cost of services, negotiating a fair price with providers, and paying them quickly with little out-of-pocket expense from members (Picazo et al., 2016).

PhilHealth has launched an expanded PhilHealth Member Portal as part of its commitment to bring service closer to members. This is an updated version of the membership request functionality on the PhilHealth website. This new online software tool allows members to access their membership and dues records online. Members can now view and verify the accuracy of member profile information, including complete and correct spellings of names, dates of birth, addresses, names of employers, dependents, and other relevant information (PhilHealth, 2020).

Thus, the goal of the current study is to perform a thorough descriptive evaluation of the various PhilHealth programs and identify the general experiences of those who are currently enrolled in the program

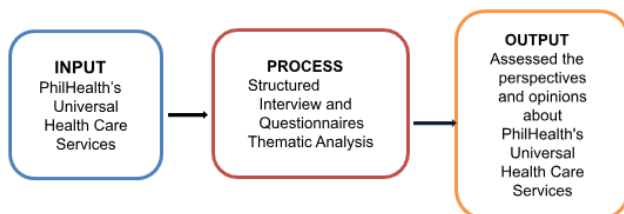


Fig. 1. Research Paradigm

II. METHODS

F. Research Design

The researchers used qualitative research specifically descriptive research design that described the experiences of members regarding the health care services of PhilHealth in Tuguegarao City, Cagayan.

G. Locale and Respondents

The research study was conducted in Tuguegarao City, Cagayan. The researchers used a purposive sampling method, they recruited 30 respondents who are permanent residents of Tuguegarao City, Cagayan. The study was conducted in Tuguegarao City, Cagayan, and the informants in the study are members of PhilHealth who are more than 21 years old and less than 59 years old and have availed of at least 1 PhilHealth benefit package not later than the years 2019 and 2020. This approach is done through the manifestation of respondents' willingness to participate in the study.

H. Instrument

In order to assess PhilHealth's universal health care services in Tuguegarao City, the researchers used qualitative research, whereas the researchers utilized an interview guide to gather data as well as open-ended questions and record their answers. The open-ended questionnaires assessed the level of their knowledge and their experiences regarding the PhilHealth's Health Care Services. In addition to this, the researchers also utilized an interview guide to identify the respondents' views and opinions regarding the PhilHealth's Universal Health Care Services.

I. Data Analysis

To begin the data analysis, the researchers gathered and transcribed the data onto paper. The thematic analysis adapted from Braun and Clarke (2006), prominently known as the 6 step-by-step thematic analysis, was used to describe the experiences of PhilHealth members regarding the health care services of PhilHealth in Tuguegarao City. First is the familiarization of the data in which the researchers read the transcript of verbalizations repeatedly. Second is coding or generating the initial codes, the researchers grouped the commonalities of the informants' verbalizations and assign initial codes per interview question. Afterwards, the researchers looked for initial themes based on the codes that clearly fit together in a theme. Next, the researchers refined and developed thematic categories and verified that the data supported these themes. Then the researchers classified and named the major themes that were identified based on the data gathered, and determined the essence of what each theme is all about. Lastly, the researchers wrote a report with the data gathered while translating the data gathered from Tagalog to English and after doing so, they correlated these to the themes developed by the researchers.

J. Ethical Considerations

Ethics Clearance from University of Saint Louis- Research Ethics Board (USLREB) was obtained prior to the implementation of the data collection procedure of this research to ensure that it is carried out in a responsible and ethically accountable manner.

III. RESULTS AND DISCUSSION

This study's results were gathered from 30 residents of Tuguegarao City, Cagayan who had previously joined in the PhilHealth program. To maintain anonymity, the researchers assigned alphanumeric codes to each respondent/informant. After collecting the necessary data for the study, the researchers transcribed the statements and translated them into English to better comprehend the meaning of each verbalization.

All similar responses were grouped to form cohesive themes. The researchers identified five main themes: (1) Perceptions of PhilHealth's Universal Health Care Program, (2) Impact of Digitalization on PhilHealth Services, (3) Perceptions of Changes in PhilHealth Benefits, (4) Observed Increase in PhilHealth Contributions, and (5) Overall Satisfaction with Current PhilHealth Services.

K. Perceptions of PhilHealth's Universal Health Care Program

Ten out of Thirty participants (10 of 30) mentioned that they have some knowledge about the universal health care program of PhilHealth. The informants mentioned that the universal health care program of PhilHealth has been helpful in ensuring that members will not have difficulty in paying their hospital bills. Most of the informants further believed that PhilHealth's health care services are means to provide health insurance for the people which can be used when availing medical or hospital services. Some of the verbalizations of the informants are as follows:

Informant 4: "Ang alam ko sa Universal Healthcare eh parang ito yung law na nakakatulong sa mga tao para hindi sila mahirapan sa pagbabayad at times na mahospital sila ganun."

(What I know about Universal Healthcare is that it seems like this is the law that helps people so that they do not have difficulty paying at times that they end up in the hospital like that.)

Informant 5: "Yung alam ko na relation nila is PhilHealth kinocover niya yung mga medical services kapag nahospital gamit yung mga contributions na binibigay yearly which is under sa UHC law."

(What I know is that their relationship is, PhilHealth, it covers the medical services when hospitalized using the contributions that are given annually which is under the UHC law.)

Informant 6: "Siyempre ito ay nakakatulong sa pamilya, halimbawa pag punupunta tayo sa hospital and if ever wala tayong pambayad eh kung may meron tayong PhilHealth pwede natin siyang magamit tapos pwede ding half na bayad namin o kaya kalahati eh sa Philhealth, yun lang naman po yung pagkakaintindi ko."

(Of course, this helps the family, for example when we go to the hospital and if ever, we do not have anything to pay for, if we have PhilHealth, we can use it and then we can pay half or PhilHealth pays half, that is my only understanding.)

Informant 7: "Tumutulong sa mga mahihirap gaya ng mga di kayang bayaran ang mga babayarin sa hospital ganon po"
(Helping the poor like those who cannot afford the hospital bills like that.)

Informant 28: "Mas pinalawak pa ng Universal Health Care Law ang sakop nito sa mga taong nangangailangan pagdating sa tulong medikal"
(The Universal Health Care Law further expands its coverage to people in need when it comes to medical assistance.)

Firstly, the study revealed that 10 out of 30 participants mentioned having some knowledge about PhilHealth's universal health care program. While this indicates a moderate level of awareness within the sample, it also suggests that a significant portion of the population may still lack detailed information about the program. Understanding the factors influencing awareness levels could be crucial for designing effective communication strategies to reach a broader audience (Nisperos & Ornos, 2022; Ong & Dayrit, 2020). The participants who were aware of PhilHealth generally viewed it positively. They emphasized its role in alleviating financial burdens associated with medical expenses, particularly hospital bills. This perception aligns with the intended purpose of universal health care programs, which aim to provide financial protection and improve access to health services for all citizens. The acknowledgment of PhilHealth as a means of health insurance underscores its perceived importance in mitigating healthcare costs (Balan et al., 2021; Bredenkamp et al., 2020). The study highlights the importance of assessing public perceptions and understanding regarding health care programs like PhilHealth. Positive perceptions can contribute to higher acceptance and utilization rates among the population. However, it is equally crucial to address any misconceptions or gaps in knowledge that may exist, as these could undermine trust and participation in the program (Obermann et al., 2018; Ricamata & Tandang, 2017).

L. Impact of Digitalization on PhilHealth Services

Majority (20 of 30) of the informants agreed that they were able to observe any significant change in PhilHealth services, however those informants who were able to observe changes mentioned that the transactions such as membership, claiming of benefits, etc. are easier or faster because of the digitalization or availability of these services online. Moreover, the informants mentioned that it is more convenient for them because they do not need to go to the PhilHealth offices to process their transactions or the services they need to avail. One informant also mentioned about the automatic membership of those who are unable to make their monthly payments like senior citizens or indigent individuals. Some of the verbalizations of the informants are as follows:

Informant 1: "Kasi prior eh ngayon digital na eh. Ako kasi naghandle ng PhilHealth ng company so ako nagrereport online so ako din nagrereport sa kanila so dati kapag naconfine ang member namen pupunta pa ako sa PhilHealth ... So, sa system nila ngayon, generally mas okay siya unlike

before nung mga naunang panahon. Pinaka eaviest ngayon eh kapag kinailangan ng member eh kasi upon confinement lang yan eh, hindi na nila kailangang pumunta sa office.” (It is now made digital. Since I handle the PhilHealth transactions of our company, I report to them online and remit to them online. So, their system, generally, is better now than before. It is easier now because when a member is confined, they do not need to go to the office anymore to inform me that, “Ma’am, someone is confined”, instead, they just need to provide their PhilHealth number to an accredited PhilHealth hospital and they process it automatically.)

Informant 3: “Yung changes na na-observe ko kapag mag-member ka ng PhilHealth is mabilis na siya di gaya noon kasi meron nang online application ngayon na ginagamit para maging member ng PhilHealth. Madali na lang siya. Di mo na kailangang pumunta at makipila.” (The changes that I have observed when you become a member of PhilHealth is that it is faster than before because there is now an online application that is used to become a member of PhilHealth. It is easy. You do not have to go and stand in line.)

Informant 6: “Mas okay na siya ngayon kasi pwede ng online”. (It is better now since we it can be processed online.)

Informant 11: “Siguro yung online, pwede na siya by online na parang mas pinadali na ngayon kasi hindi na pwedeng pumila pa”. (Online, it is doable online which seems to be easier now because you will no longer stand in line.)

Informant 12: “Ang napansin ko lang ngayon sir mas bumilis siya, dahil yung anak ko rin bago lang nag apply, mabilis naman naproseso lahat di tulad nung sakin noon nag pila pa ako ng pagkahaba haba.” (The only thing I noticed now, sir, is that it is faster, because my son also just applied, everything was processed quickly, unlike mine before, when I was standing in line for a long time.)

A significant number of informants (20 out of 30) reported observing changes in PhilHealth services, attributing these improvements to digitalization. Specifically, they noted that processes such as membership registration, claiming benefits, and accessing services have become easier and faster due to the availability of online platforms. This shift towards digital services aligns with global trends in healthcare administration, aiming to streamline operations and enhance user convenience (Oranje & Mathauer, 2024). Participants expressed appreciation for the convenience brought about by digital platforms. By eliminating the need to visit physical PhilHealth offices for transactions, individuals can now manage their healthcare-related tasks remotely. This convenience not only saves time but also reduces the logistical challenges associated with in-person visits, particularly for those residing in remote areas or with limited mobility (Ricamata & Tandang, 2017).

An interesting aspect highlighted by one informant was the automatic membership feature for senior citizens and indigent individuals who may struggle to make regular payments. This policy adjustment reflects efforts to ensure inclusivity and expand healthcare coverage to vulnerable populations, thereby addressing equity concerns within the healthcare system (Valverde et al., 2022). The positive feedback regarding digitalization underscores its potential to enhance the efficiency and effectiveness of PhilHealth services. Moving forward, policymakers could consider further integrating advanced technologies such as artificial intelligence and blockchain to enhance security, transparency, and speed of transactions. Despite the benefits, it is essential to acknowledge potential challenges associated with digitalization, such as digital literacy barriers among certain demographics or concerns regarding data privacy and cybersecurity. Addressing these challenges through targeted education initiatives and robust cybersecurity measures will be crucial to maintaining trust and maximizing the benefits of digital healthcare services (Obermann et al., 2018; Querri et al., 2018).

M. Perceptions of Changes in PhilHealth Benefits

Majority of the informants (22 of 30) verbalized that they were not able to observe any change in the benefits provided by PhilHealth from the year 2019 to 2020. The informants further mentioned that although there are no significant changes observed, the benefits they received did not necessarily worsen or become lower. However, those who were able to observe changes in the benefits mentioned positive changes or improvements in the benefits specifically in the packages that were given for specific diseases. Some of the verbalizations of the informants are as follows:

Informant 2: “Sa benefits I think wala naman. Kasi ganun parin naman kunwari kapag na hospital ako eh automatic may nadededuct sa hospital bills ko. Di naman siya nabago.” (In terms of benefits, I think there are none. Because it is the same, when I get confined at the hospital, it is automatically deducted from my hospital bills. It has not changed.)

Informant 10: “Ok naman siya, kasi ilang beses ko na siyang nagamit. First baby tapos naospital yung anak ko sa private tapos second baby na na CS ako at nagamit ko talaga siya” (It is ok. I have used it for several time, on my first baby, then when my child was hospitalized in a private hospital, then on my second baby via Ceasarian section, I was able to use it.)

Informant 12: “Sa packages, parang wala naming nag bago basta mag bayad ka lang ng tuloy tuloy – tapos pag na hospital ka may discount ka naman na.” (In packages, it seems like nothing has changed, just pay your contributions continuously – then when being hospitalized, you will get some discounts.)

Informant 14: “Wala akong napansin sir, kasi pag nahospital ako ang importante may discount.” (I did not observe anything sir, because

when I get hospitalized, what is important is that I get discounts.)

Informant 30: "Wala naman, discounted mga hospital bills parin." (Nothing, hospital bills are still discounted.)

The majority of informants (22 out of 30) reported that they did not observe any significant changes in the benefits provided by PhilHealth during a specified period. This perception of stability suggests that, from the informants' perspectives, the benefits they received remained consistent in terms of coverage and quality. Importantly, they emphasized that despite the lack of noticeable changes, there was no indication that benefits had deteriorated or become less comprehensive. Conversely, a smaller group of informants who did observe changes in PhilHealth benefits noted positive improvements, particularly in the packages offered for specific diseases. This positive feedback highlights targeted enhancements that may have been implemented to improve coverage for critical healthcare needs. Such improvements are crucial as they directly impact the quality of care individuals receive, potentially leading to better health outcomes and increased satisfaction among beneficiaries (Oranje & Mathauer, 2024; Ricamata & Tandang, 2017).

While stability in benefits may be perceived positively in terms of consistency, it can also lead to complacency or missed opportunities for innovation and adaptation. Addressing this requires a balance between maintaining reliable service delivery and fostering continuous improvement in healthcare coverage (Obermann et al., 2018; Querri et al., 2018).

N. Observed increase in PhilHealth contributions

All the informants agreed that the contributions they are paying to PhilHealth have increased. Some mentioned that there is a yearly increase in the PhilHealth deductions which the informants have observed. However, one informant mentioned that the increase in deductions is justifiable in order to cover the services of PhilHealth especially for those non-paying members. Some of the verbalizations of the informants are as follows:

Informant 3: "Tumaas yung contribution dati 200 lang tapos ngayon naging 400 plus na. Wala tayong magagawa, yun ang patakaran eh. Di bale na basta ang importante eh nagagamit ko ang benefits ng PhilHealth." (Contribution have increased from 200 to 400 plus. We cannot do anything about it since it is the rule. It does not matter, what is important is I can use the benefits of PhilHealth.)

Informant 4: "Sa contributions naman I think yung pagtaas niya yearly. Pero wala tayong magagawa, yun yung bagong policy eh kaya sumunod na lang. Yung pagtaas naman I think useful and beneficial naman siya in the future just in case na may mangyari satin." (In contributions, I think it increases yearly. But we cannot do anything about it, that is the new policy so we just need to follow. For the increase,

I think it is useful and beneficial for the future in case something happens to us.)

Informant 23: "Since Philhealth is generating its funds from the contributions of members, it is my personal opinion that it is reasonable for them to increase the premiums/amount of contribution to prevent the depletion of their funds since the benefits are far higher than the amount of contributions being paid by the members knowing that if not all, most of the patients being discharged from hospitals are covered by PhilHealth."

The unanimous agreement among all informants regarding the increase in PhilHealth contributions provides significant insights into how these changes are perceived among beneficiaries. This discussion aims to explore these perceptions, the reasons behind them, and their implications for healthcare financing and public opinion. All informants acknowledged a noticeable increase in the contributions they are paying to PhilHealth. This unanimity underscores the widespread impact of these changes on individuals' financial obligations and highlights the importance of understanding their perspectives (Obermann et al., 2018; Picazo et al., 2015). Several informants specifically noted that they have observed yearly increments in PhilHealth deductions. This observation suggests that the incremental nature of the increases has been noticeable over time, potentially influencing how beneficiaries perceive the affordability and fairness of these contributions (Abrigo, 2020). Interestingly, despite concerns over increased financial burdens, one informant expressed a perspective on the justifiability of these deductions. This viewpoint suggests an understanding of the need for additional funding to sustain and enhance PhilHealth services, particularly for non-paying members who rely on subsidized healthcare (Uy et al., 2023).

These findings, however, have several implications for healthcare policy and public perception. Increased contributions may pose a financial burden on beneficiaries, especially those with limited income or resources. Understanding these impacts is crucial for policymakers to ensure contributions remain affordable while adequately funding healthcare services (Abrigo, 2020; Uy et al., 2023). Enhancing transparency in how PhilHealth contributions are used and communicating the rationale behind increases can help mitigate concerns and build trust among beneficiaries. Balancing the need for increased funding with ensuring equitable access to healthcare services is essential. Policies should consider the impact on vulnerable populations and explore mechanisms to protect them from undue financial strain (Oranje & Mathauer, 2024; Ricamata & Tandang, 2017). Managing perceptions around increased contributions is vital for maintaining public trust in PhilHealth. Efforts to demonstrate the value and impact of these contributions through improved service delivery, efficiency gains, and expanded coverage can enhance beneficiary satisfaction and support (Ong et al., 2022).

O. Overall satisfaction in current PhilHealth services.

All of the informants agreed that they are satisfied with the current services provided by PhilHealth. This is a result primarily of easier transactions and a more responsive service provided by the institution. The informants mentioned that PhilHealth is able to address their needs and concerns in a timely manner. Moreover, the informants are satisfied that they are able to fully utilize the benefits when they or a family member is hospitalized. Some of the verbalizations of the informants are as follows:

Informant 1: "Wala akong masabe sa services nila. Okay sila kasi kapag kailangan namin ng assistance agad agad naman silang nakakapagprovide eh. Yun ang kagandahan lalo na kapag kailangan ng member namin yung mga empleyado namin so pagpunta naman don may designated person naman na i-aassist ka so far so okay naman sa mga experiences ko." (I have nothing bad to say about their services. They are okay because when we need assistance, they can provide immediately. That is the beauty, especially when our members need our employees, so when you go there, there is a designated person who will assist you, so far, it is okay in my experience.)

Informant 4: "Maganda talaga ang services ng PhilHealth kasi nagagamit mo talaga siya once na nahospital ka- mapa opera man yan, lab tests, rooms, or maging yung bayad ng doctors eh lahat lahat yan nacocover ng PhilHealth. Total package na siya, wala na akong masabe." (PhilHealth's services are good because you can really use them once you are hospitalized- whether it is surgery, lab tests, rooms, or even doctors' fees, all of that is covered by PhilHealth. It is a total package, I have nothing more to say.)

Informant 5: "Okay po yung services ng PhilHealth, mas gumanda po siya ngayon tska dahil nakakalibre siya sa lahat ng mga members o di kaya malaki yung nababawas. Nakakatulong talaga siya kapag na hospital ka." (PhilHealth's services are okay, they are better now because all members experience free benefits or the deduction is big. He really helps when you are in the hospital.)

Informant 7: "Maganda siya kasi sobrang nakakatulong po sa amin na mahihirap." (It is good because it is helpful to us who are poor.)

Informant 23: "The services are improving since more people are being given insurance coverage which reduces the burden of patients and their families in paying huge amount of hospital bills."

According to the informants, satisfaction with PhilHealth services is primarily attributed to easier transactions and a more responsive service framework. The availability of online platforms and streamlined processes have significantly improved the convenience of accessing and utilizing PhilHealth benefits. This enhancement in service efficiency is crucial as it reduces bureaucratic hurdles and simplifies the overall healthcare experience for beneficiaries. Another key factor

contributing to satisfaction is the institution's ability to promptly address the needs and concerns of beneficiaries. Informants reported positive experiences in receiving timely assistance and support from PhilHealth, which reinforces trust and confidence in the organization's commitment to customer service excellence (Oranje & Mathauer, 2024; Ricamata & Tandang, 2017).

Informants also expressed satisfaction with their ability to fully utilize PhilHealth benefits, particularly during hospitalizations for themselves or their family members. This highlights the perceived effectiveness of PhilHealth in providing financial protection and ensuring access to essential healthcare services without significant out-of-pocket expenses (Brendenkamp et al, 2017). PhilHealth can leverage feedback from satisfied beneficiaries to identify best practices and areas for further improvement in service delivery. Enhancing user experience through continuous quality improvement initiatives can sustain and enhance satisfaction levels. Maintaining transparent communication about available benefits, eligibility criteria, and procedural updates can further enhance beneficiary satisfaction and trust in PhilHealth. Ensuring equitable access to high-quality healthcare services remains paramount. PhilHealth's role in supporting vulnerable populations and expanding coverage should be reinforced to address disparities in healthcare access (Picazo et al., 2017). Despite the positive feedback, challenges such as maintaining service consistency across different regions and addressing potential disparities in service delivery may arise. Continuous monitoring, evaluation, and adaptation of strategies will be essential to meet evolving healthcare needs and maintain high satisfaction levels among beneficiaries (Herrera, 2014; Querri et al., 2018).

IV. CONCLUSION

After the collection of pertinent data for this study, the researchers conclude that, there is a need to increase the level of awareness of the people in the community about the universal health care program of PhilHealth along with the general health care services that it offers. Moreover, there should be a continuous program in every community to increase the knowledge of the community people about its benefits and services. Additionally, PhilHealth's members should be educated more on why there is an annual increase in their contribution for them to understand the benefits that this provides on the quality of health care and medical services that they can avail in the future. Lastly, it can be concluded that there are more positive feedbacks than negative ones and that the satisfaction rate of the members of PhilHealth has drastically increased due to its quality performance

V. RECOMMENDATIONS

This research is about the health care services of PhilHealth as well as its universal health care program. Therefore, this study talked about PhilHealth's membership, contributions, benefits, experiences, challenges, and satisfaction. The informants of this study were from Tuguegarao City, Cagayan who are also currently enrolled in PhilHealth. To improve

knowledge of this topic, the researchers would like to recommend the following:

- Explore the factors that contribute to varying levels of awareness about PhilHealth among different demographic groups. This could include socioeconomic status, educational background, and geographic location.
- Conduct a longitudinal study to assess the actual impact of PhilHealth on healthcare affordability and accessibility. This would provide empirical evidence on its effectiveness in achieving its objectives.
- Develop and test communication strategies aimed at enhancing awareness and understanding of PhilHealth among the general population. This could involve targeted campaigns through various media channels.
- Investigate participants' perceptions regarding the quality of healthcare services provided through PhilHealth. Understanding satisfaction levels and areas for improvement could inform policy adjustments. Furthermore, the findings of this study could be used to provide vital information to PhilHealth authorities for them to improve and regulate the services they provide.

IV. ACKNOWLEDGEMENT

The researchers would like to express their deepest gratitude to the various people who have continued to strengthen them and provided motivations in accomplishing their research. To the School of Health and Allied Sciences faculty teachers, whom the researchers got recommendations and improving remarks, the researchers would like to express all their gratitude for their cooperation. To the officials of the PhilHealth Regional Office of Tuguegarao City, Cagayan, and the people of Tuguegarao City, Cagayan, who warmly helped the researchers gather all the data needed in the study. Without their heartfelt concern and approval, this study would not be completed. Finally, to the Almighty Father, who had been with them since the start of their research and for giving them hope and inspiration..

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