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DOES CONVERGENCE OF CONDITIONAL CASH TRANSFER AND SOCIALIZED HEALTH INSURANCE INDUCE OUTPATIENT CARE UTILIZATION FOR ILLNESS/INJURY? PHILIPPINE CASE

Mel Lorenzo Mabazza Accad. *Economics, University of the Philippines, School of Economics, Quezon City, Philippines*

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Background The importance of looking on the convergence of two social protection programs is to see if the impact of only one program coverage (rather than with two programs coverage) would already suffice to effectively induce beneficiaries to utilize outpatient care for illness/injury.

Objectives This study investigates whether there's considerable impact from complemented/converged Conditional Cash Transfer (which is Pantawid Pamilyang Pilipino Program or 4Ps) and Socialized Health Insurance (which is PhilHealth Sponsored Program (SP)) than compared to having 4Ps alone or SP alone on the outpatient care utilization for illness/injury of beneficiaries.

Methods To tease out the impact of each of the two programs, we first compared the outpatient utilization of those with both SP and 4Ps against those with SP alone; then, we compared the outpatient utilization of those with both SP and 4Ps against those with 4Ps alone. In this stages, we computed the Average Treatment Effects on the Treated (ATT's) using propensity score matching (PSM) methods to address the endogeneity of the treatment variable arising from the non-random selection of beneficiaries and using post-intervention observational data, which is the Family Health Survey 2011. Ordinary least squares (OLS) is also applied on the resulting matched samples to further confirm technique-robustness of the estimates.

Result The findings show statistically significant and techniques-robust positive impact on outpatient care utilization for illness/injury from the convergence of 4Ps and SP compared to 4Ps alone or SP alone.

Conclusion The results suggest that there's income effect from 4Ps, price effect from SP, in addition to information spillover from 4Ps Family Development Sessions and health grant requirements for the beneficiaries to utilize outpatient care for illness/injury.

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