# Philippine National Health Account

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### Outline of Presentation

- Background
- Definition
- Historical DevelopmentSystem of Health Accounts (SHA) Framework
- Policy Uses
- Data Sources
- 2023 Results









### Role of the agency in Economic Accounting

The Philippine Statistics Authority (PSA) is primarily responsible for all national censuses and surveys, sectoral statistics, community-based statistics, consolidation of selected administrative recording systems, and compilation of national accounts.















Business

Other Sectors

# What is Philippine National Health Accounts (PNHA)?

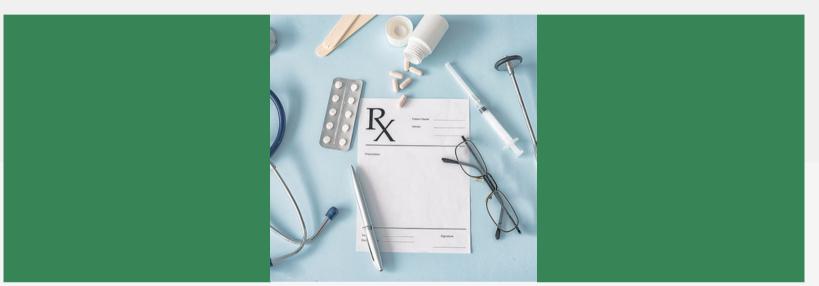
- One of the satellite accounts being produced by PSA.
- Presents data on the country's health spending, health financing, and health management over a defined period of time.

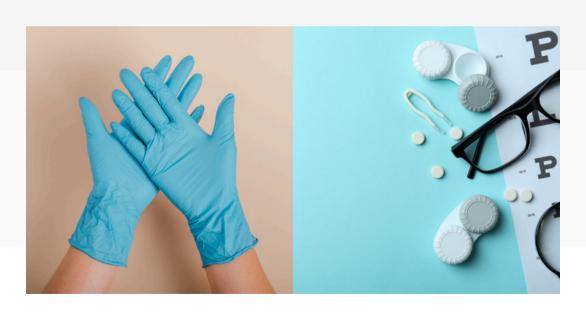












### Health care boundary

All activities with the primary purpose of improving, maintaining, and preventing the deterioration of the health status of persons, and mitigating the consequences of ill-health through the application of qualified health knowledge.









### **Historical Development**

Initial PNHA framework was developed through the Health Finance Development Project (HFDP) with the NHA Technical Working Group

1993

1995-97

Official release of the PNHA for 1991 – 1997

1999

PNHA
methodology was
approved through
PSA Board
Resolution No. 01
Series of 2017-170

2011

Official release of the 2014 to 2016 estimates of PNHA-SHA

2016 2017

2020



Early 90's

















1991 PNHA estimates was reported

Conduct of NHA training and preparation of the PNHA series Approval of
System of Health
Accounts (SHA)
2011 by
International
Health Accounts
Team (IHAT)\*

The SHA 2011 was adopted by the PSA for health accounts compilation

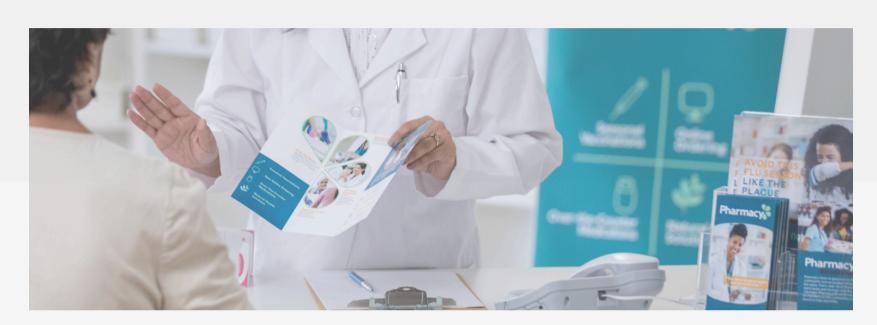
Release of the Revised Series 2014 to 2018







### Two Main Aggregates of Health Accounts





# Current Health Expenditure (CHE)

refers to final consumption of health care goods and services by households, government and non-profit institutions

# Health Capital Formation (HK)

refers to the demand of capital goods by health providers



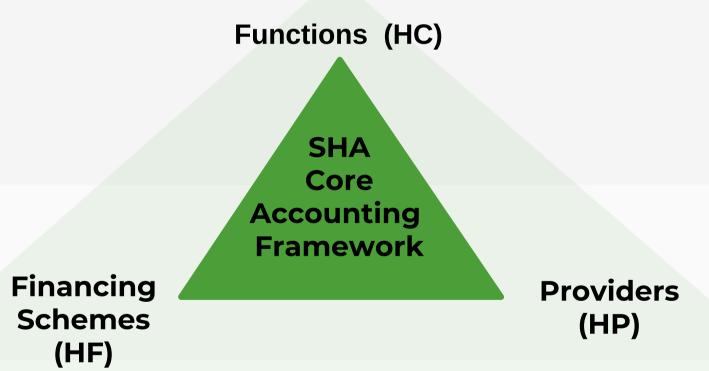




### System of Health Accounts (SHA) 2011 Framework

 provides a standard for classifying health expenditures according to the three (3) axes of consumption, provision, and financing. Beneficiary characteristics (Age, Sex, Income, Region)

**Consumer health interface** 



Financing Sources (FS)

Financing interface

Financing Agents (FA)

the general concepts and principles are consistent with the System of National Accounts

Gross capital formation (HK)

**Provision interface** 

Factors of provision (FP)

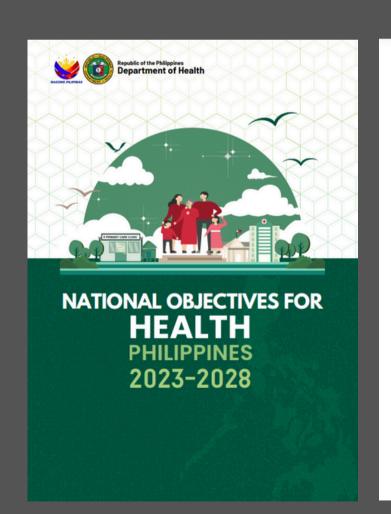




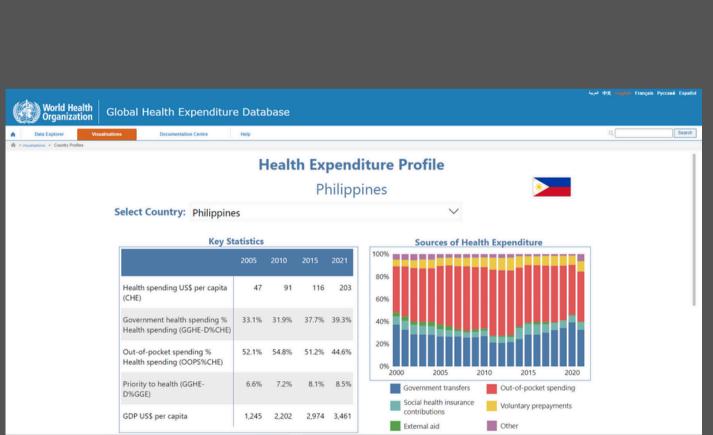


### **Policy Uses**

• Provides data input to national reports, publications, and international database.















### Meetings/Engagements

- Annual WHO-OECD Health Experts' Meeting
- IAC on Health and Nutrition Statistics
- IAC on Macroeconomic Accounts Statistics









### Philippine Health System

- Philippines adopted decentralized health governance, introduced a social health insurance programme – PhilHealth – in 1995, and has actively pursued universal health coverage since 2010.
- There have been widespread efforts to improve health service delivery in the country, but regional and socioeconomic disparities in the availability and accessibility of resources are prominent.
- The country has a mixed health system with an expanding private sector. There is no effective mechanism to regulate private for-profit health-care providers.







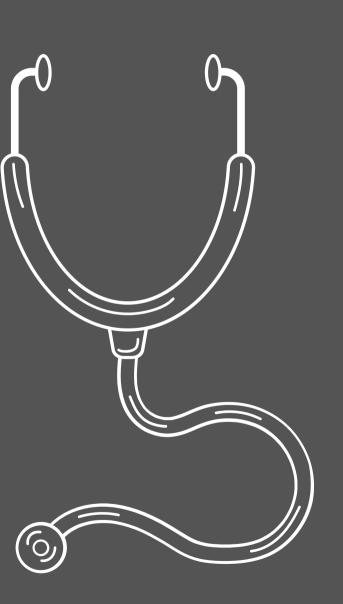


### **General Methodology**

## The health accounts boundary is determined based on the following criteria:

- (a) primary purpose,
- (b) use of qualified health knowledge,
- (c) expenditure for resident persons (spatial boundary),
- (d) expenditure incurred in a specified year (time boundary), and
- (e) transacted (produced and paid for).

Health expenditure in the PNHA is compiled by **component**. Components generally correspond to financing agents (FA) or subcategories of FAs.



### **Data Sources**







#### 01 Commission on Audit

- Annual Financial Reports (AFR)
- Financial Statements (FS)

#### **02** Department of Budget and Management

- National Expenditure Program
- General Appropriations Act (GAA)
- Budget of Expenditures and Sources of Financing (BESF)

#### 03 Department of Health

• Profile and Status of FAPs

### **04** Department of Economy, Planning, and Development

 ODA Availments by Implementing Agency

#### **05** Department of Finance

- Statement of Receipts and Expenditures (SREs)
- Health, Nutrition and Population Control by LGU Level

#### **O6** Philippine Health Insurance Corporation

- Statement of Financial Position
- Claims Database



#### **Government Service Insurance System 07**

 Benefit claims of SSS and GSIS that are for medical and rehabilitation services purposes

#### **Employees' Compensation Commission** 08

• Employees Compensation Insurance Fund

#### **Insurance Commission** 09

- Annual Report on Insurance Companies
- Financial data on insurance operations and health benefit payments

#### Philippine Charity Sweepstakes Office 10

Health expenditure data

### Philippine Amusement and Gaming Corporation

• Health expenditure data

### Association of Health Maintenance 17 Organizations of the Philippines, Inc.

FS of HMOs

#### **Philippine Statistics Authority** 13

- National Accounts of the Philippines (NAP)
- Supply and Use Tables (SUT)
- 2014 study of Racelis on private establishments health spending for employees



2023 PNHA







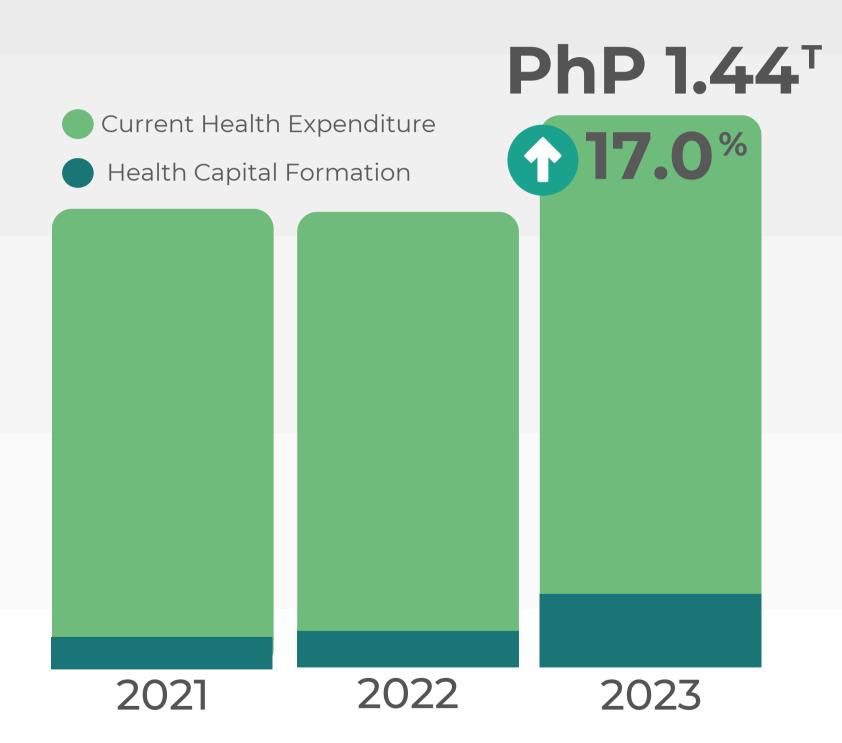








### **Total Health Expenditure**



In 2023, the Total Health Expenditure reached **PhP 1.44 trillion,** an increase of 17.0 percent from 2022.

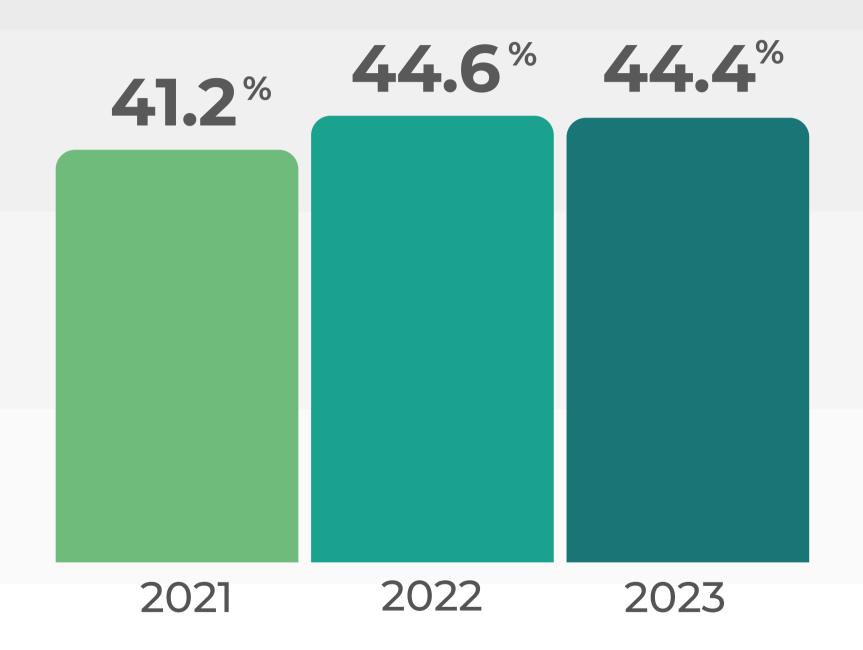
Health Capital Formation Expenditure shared 13.7 percent to THE, while 86.3 percent came from Current Health Expenditure.







### **Share of OOP to CHE**





The share of OOP health spending to CHE was lower at **44.4 percent** in 2023 compared to 44.6 percent in 2022.



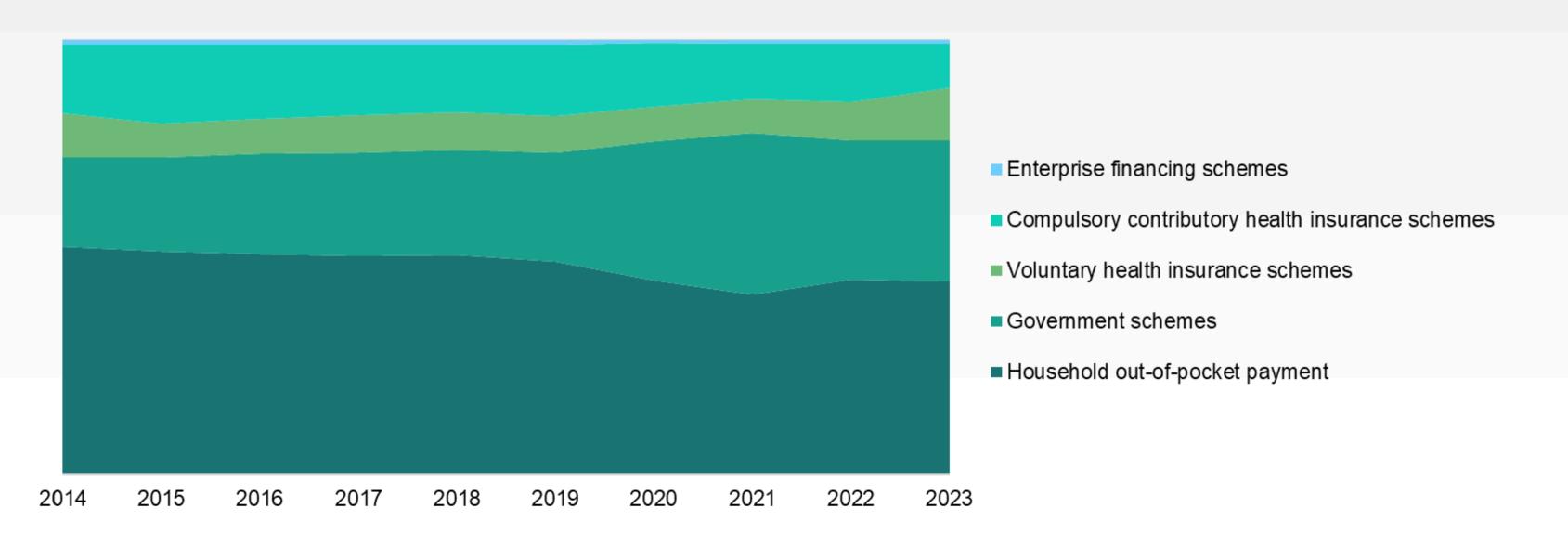




### **Current Health Expenditure**

By Health Care Financing Scheme, 2014-2023

The share of Government schemes and voluntary health insurance schemes were relatively higher than the pre-pandemic period. Meanwhile, the share of household out-of-pocket payments was relatively lower than the pre-pandemic period.





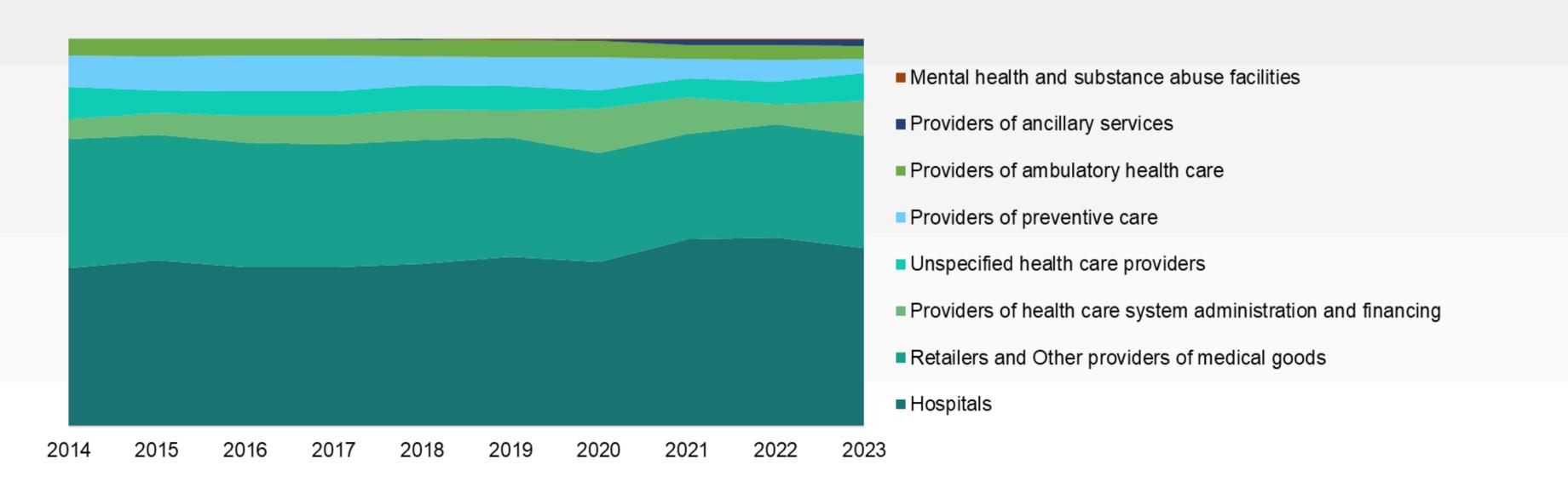




### **Current Health Expenditure**

By Health Care Provider, 2014-2023

Hospitals consistently had the largest share as health care provider, which recorded 46.1 percent of the total CHE in 2023.





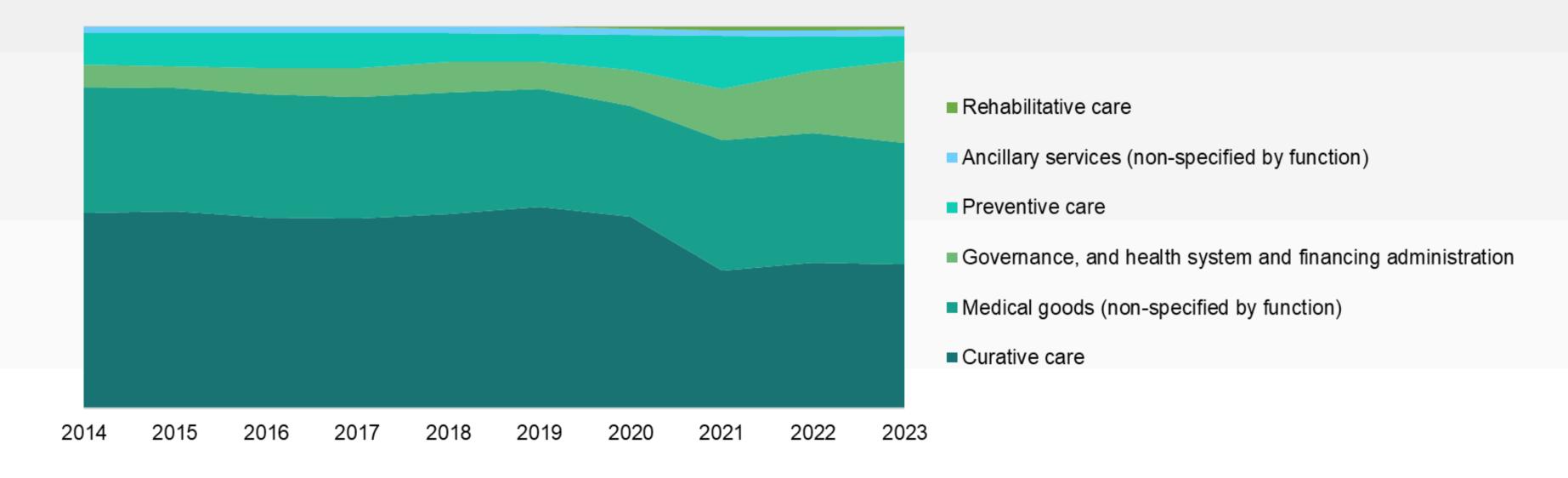




### **Current Health Expenditure**

By Health Care Function, 2014-2023

Curative care remained to have the bulk of health spending by health care function during the period.









### Health Capital Formation Expenditure, 2023

In 2023, the Infrastructure spending reached **PhP 129.53 billion,** an increase of 122.0 percent from 2022.



65.7<sup>%</sup> 21.8<sup>%</sup> 12.5<sup>%</sup>







### Ways Forward

- Interagency coordination: Continuous conduct of meetings/consultations with data partner agencies to improve data reporting, coverage, and classification.
- **Updating of questionnaires:** Inclusion of survey questions in existing instruments to update the parameters on health spending of private establishments.
- Estimation of Primary Health Care Account: This allows better understanding of the frontline health systems, where preventive, promotive, curative, and rehabilitative services are delivered.
- Cross-tabulations of 2011 SHA Classifications: Examining the intersections of different classifications such as health care functions, providers, factors of health care provision, and financing schemes.

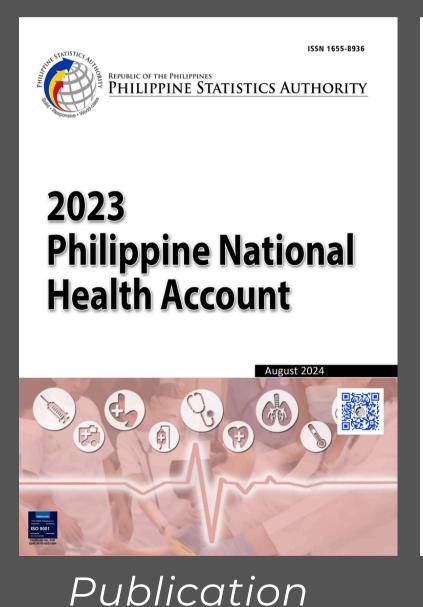


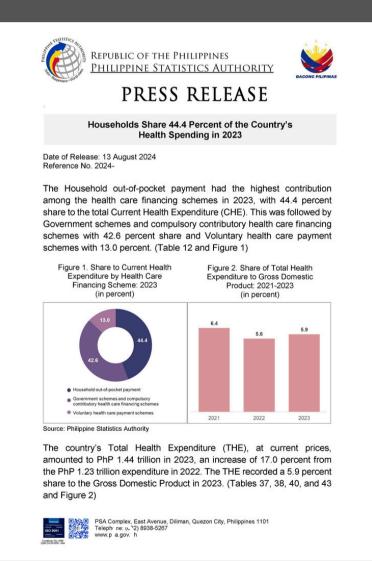




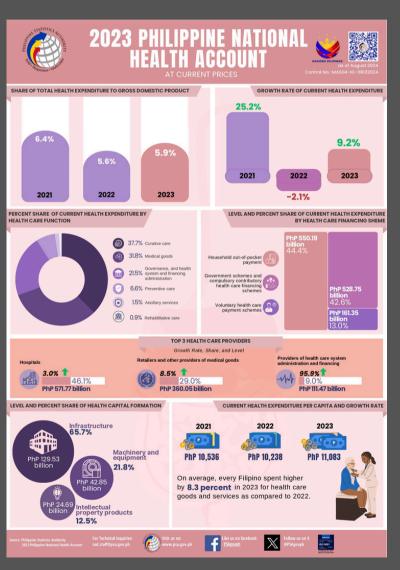
### 2024 PNHA Results

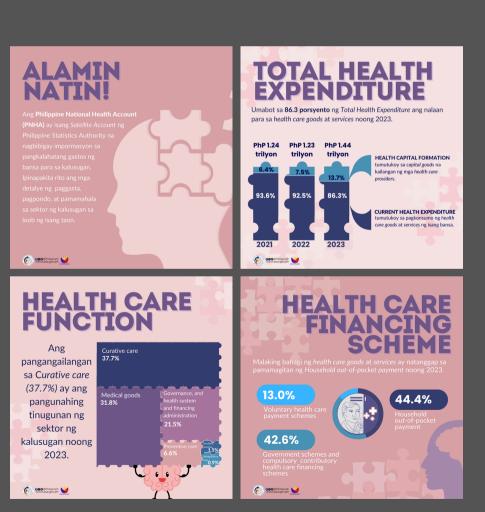
Web Release on 24 July 2025 with Statistical Tables and PX-Files





Release





Infographics

Social Cards



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