

Assessing universal healthcare coverage in Mexico

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Abstract

Background: Efforts towards universal healthcare coverage, since the beginning of the 21st century, gave rise to a number of reforms to expand the Mexican health system that culminated with the implementation of the *Seguro Popular de Salud* (SPS) or Popular Health Insurance, a financial protection mechanism that intends to guarantee the constitutional right for healthcare for every individual. The new health system would eventually offer protection to 50 million uninsured individuals with the aim of attaining universality of healthcare coverage.

Objective: The objective of this study is to evaluate the effects of *SPS* on access to healthcare and on the health status of affiliates.

Methodology: Taking advantage of a natural experiment created by the programme's progressive roll-out as an identification strategy, we implemented different specifications of a difference-in-differences approach to evaluate treatment effects. The data are taken from Mexican Family Life Survey (MxFLS), a panel survey that spans the temporal and special roll-out of SPS. As the programme targets the uninsured population, eligible individuals are those who are not affiliated to social security. The treated population is defined as those individuals living in a municipality where the programme was already implemented at the time of the survey, and who are eligible for the programme. The controls are the same individuals before the implementation of the programme in their municipalities of residence.

Results: Results show that the programme had the effect of reducing the blood pressure of individuals. Depending on the model specification, systolic blood pressure decreases between 2.3 mm Hg and 3.4 mm Hg; diastolic blood pressure decreases between 0.7 mm Hg to 1.9 mm Hg. Self-reported health also improves. Individuals perceive their health from 3% to 7% better on average depending on the model specification; and 6% of our sample expect their health to be better the following year. We did not find a clear effect of the programme on utilisation of health care.

Conclusions: Our results suggest an improvement on affiliates' health status given the many chronic health conditions associated with high blood pressure like heart attack, stroke, aneurysm, among others. We did not find moral hazard effect associated with the programme as there is no conclusive evidence indicating increasing risky behaviours among the affiliates as a consequence of being insured.

Keywords: Seguro Popular, evaluation of healthcare programs, Mexico, difference-in-differences, social protection in health

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