



Work-Life Balance and Employee Productivity among PhilHealth Regional Office VII Employees

DOI: 10.5281/zenodo.22787251

ALDRIN ROMEO B. RAMAS

Cebu Technological University - Main Campus
ramas7237@gmail.com

ELLIE KARYLL O. VIDAD

Cebu Technological University - Main Campus
ekovidad042@gmail.com

MARY APPLE C. BARLAS

Cebu Technological University - Main Campus
maryapple2393@gmail.com

GLADYS D. VELOSO

Cebu Technological University - Main Campus
lovely@veloso.ph

Abstract:

Work-life balance (WLB) has become a strategic imperative in the Philippine public sector, where agencies such as the Philippine Health Insurance Corporation (PhilHealth) must sustain high service standards while protecting employee welfare. Grounded in Role Theory, Job Demands-Resources Theory, Maslow's Hierarchy of Needs, and Work-Family Enrichment Theory, this study examined the relationship between work-life balance and employee productivity among 100 employees of PhilHealth Regional Office VII in Cebu City using a descriptive-correlational design. Work-life balance was measured across five dimensions: workload management, reasonable working hours, leave benefits, managerial and supervisory support, and flexible work arrangements; productivity was operationalized through work efficiency, quality of output, and timely task completion using a validated 5-point Likert instrument. Results revealed a predominantly young (62% below 35), female-dominated (65%), single (63%), frontline workforce (56% claims processors, 38% administrative) with 65% having <5 years tenure and 100% on-site work. Overall work-life balance was High ($M=3.78$, $SD=1.04$) with Very High ratings for medical and parental leave and login rule adherence, while work-from-home availability was Low ($M=1.99$) and job rotation Moderate ($M=2.93$). Overall productivity was also High ($M=3.93$, $SD=0.74$), led by quality of output ($M=4.22$). Pearson correlation showed a strong, positive, significant relationship between WLB and productivity ($r=0.65$, $p<.001$), rejecting the null hypothesis. Findings affirm WLB as a critical resource buffering job demands and enriching performance. A Dynamic Work-Life Balance and Productivity Enhancement Program is proposed to pilot flexible arrangements, clarify rotation, and systematize workload monitoring.

Keywords: work-life balance, employee productivity, PhilHealth Regional Office VII, job demands-resources theory, flexible work arrangements, public sector

Introduction:

In an era marked by accelerating service demands, digital transformation, and heightened public accountability, work-life balance has evolved from a peripheral human resource concern to a central determinant of organizational sustainability. Globally, the World Health Organization has linked prolonged working hours and poor recovery to increased risk of burnout, cardiovascular strain, and diminished cognitive performance. In the Philippines, this concern is amplified within the public sector, where agencies operate under strict compliance regimes, limited staffing, and 24/7 public expectations, while simultaneously being mandated by the Civil Service Commission to model decent work practices.



The Philippine Health Insurance Corporation (PhilHealth), as the national health insurer mandated under Republic Act 11223 (Universal Health Care Act), exemplifies this dual pressure. PhilHealth Regional Office VII (PRO VII) in Cebu City processes thousands of claims, membership transactions, and provider compliance checks monthly. Employees handle time-bound, audit-sensitive tasks requiring accuracy, empathy for members in distress, and coordination across local government units, hospitals, and central office. Prior PhilHealth-specific inquiries have documented elevated stress among frontline workers (Adsuara et al., 2023) and the influence of motivational factors on performance (Ducado, 2025), yet none have quantified the direct relationship between work-life balance and productivity within a regional office.

This study is anchored on four complementary theories. Role Theory (Kahn et al., 1964) posits that inter-role conflict between work, family, and community roles generates strain that impairs performance; balance reduces conflict and frees psychological resources. The Job Demands-Resources (JD-R) model (Bakker & Demerouti, 2007) frames workload, time pressure, and emotional demands as demands that must be buffered by resources such as autonomy, supervisory support, and leave benefits; without sufficient resources, employees experience exhaustion and reduced efficacy. Maslow's Hierarchy of Needs (1943) reminds that physiological and safety needs, including rest, health security, and belonging, are prerequisites for self-actualization at work. Finally, Work-Family Enrichment Theory (Greenhaus & Powell, 2006) argues for positive spillover: resources gained in family life (e.g., emotional support) and work life (e.g., flexibility) can mutually enhance functioning.

The problem, therefore, is empirical and practical. While international evidence consistently shows a positive link between work-life balance and productivity, Philippine public sector evidence remains fragmented, and PhilHealth Regional Office VII lacks baseline data to inform policy. Management may assume that 100% on-site presence ensures productivity, yet emerging evidence suggests that rigid arrangements may actually constrain efficiency for younger, female-dominated workforces with caregiving responsibilities. Moreover, existing CSC issuances, including MC No. 6, s. 2022 on flexible work arrangements and Resolution No. 2501292, s. 2025 granting five days wellness leave, have expanded the formal resource envelope, but implementation at regional level remains uneven.

This study aims to: (1) describe the demographic profile of PRO VII employees; (2) assess the level of work-life balance across five dimensions; (3) assess the level of employee productivity across three indicators; (4) determine whether a significant relationship exists between work-life balance and productivity; and (5) propose an evidence-based enhancement program. By providing statistically grounded insights, the research seeks to help PhilHealth align employee welfare with service excellence, reinforcing public trust in a critical health institution.

The significance extends beyond PhilHealth. For CSC policymakers, findings offer field validation of flexible work policies in frontline agencies. For organizational behavior scholars, it contributes Philippine public sector data to a literature dominated by private sector BPO contexts. For employees, it gives voice to lived experiences of balancing claims deadlines with family obligations.

Literature Review:

Work-life balance has been conceptualized as both an objective state of time allocation and a subjective appraisal of role harmony. Early work-life research focused on conflict (Greenhaus & Beutell, 1985), but contemporary perspectives emphasize balance, enrichment, and boundary management, recognizing that integration strategies vary by culture, gender, and occupational demands.

Workload, defined as perceived volume and complexity relative to capacity, consistently emerges as the strongest predictor of strain. Malicay and Gano-an (2023), in a study of 100 BPO employees in Davao City, found workload, supervisor support, and safe environment significantly predicted productivity ($\beta=.42$). In the public sector, Olipane, Avelilla, and Tubes (2023) surveyed 120 government employees and found heavy workload and organizational culture were significant stressors positively correlated with engagement when moderated by support, but negatively



with well-being when unmoderated. Within PhilHealth, anecdotal workload intensification stems from Universal Health Care rollout, which increased membership coverage checks and Konsulta package claims. Job rotation, intended to reduce monotony and build multi-skilling, is often perceived ambiguously. When criteria are unclear, employees may view rotation as punitive rather than developmental, lowering perceived control, a key resource in JD-R.

The Philippine Labor Code (PD 442) establishes an 8-hour workday, with overtime beyond that. However, de facto hours often extend through unrecorded tasks, especially in claims processing where cutoffs drive overtime. Bonifacio, Ong, and Magana (2025) compared 40-hour vs. 48-hour workweeks among 508 Filipino employees across industries and found extended hours significantly disrupted work-life balance ($d=.67$), limited recovery ($d=.54$), and reduced productivity ($r=-.38$). Recovery Experience Theory suggests that psychological detachment after hours is essential for replenishing resources. In PRO VII, strict biometrics enforcement suggests strong boundary control, which should theoretically improve detachment, yet 100% on-site requirement may reduce autonomy over recovery scheduling.

Leave policy in the Philippines is layered. CSC MC No. 14, s. 1999 grants 15 days vacation and 15 days sick leave annually to all government employees, cumulable and convertible. Additional special leaves (maternity 105 days under RA 11210, paternity 7 days under RA 8187, solo parent 7 days, etc.) expand coverage. Pacalso (2025) studied 105 state university employees and found vacation and sick leaves were most utilized, but 32% reported poor dissemination of entitlement information, leading to underutilization and morale dips. Kim and Ryu (2017), examining Korean and Philippine public employees, found satisfaction with work-life balance policies, including paid sick and compensatory time-off, positively related to organizational commitment ($r=.51$) and negatively to turnover intention. The 2025 CSC Wellness Leave (Resolution No. 2501292) granting up to 5 additional days for mental health reflects policy evolution acknowledging psychosocial risks. Yet formal availability does not guarantee felt access; discretionary approval by supervisors remains a bottleneck, as reflected in neutral ratings for casual leave sanctioning.

Supervisory support operates as both instrumental (task assistance) and emotional (empathy). In JD-R, it is a critical job resource buffering demands. Malicay and Gano-an (2023) identified supervisor support as a significant productivity predictor ($\beta=.31$). Yusoph and Ilago (2021), studying PhilHealth-BARMM, found work engagement and team cohesion, both shaped by supervisor relationships, predicted organizational performance ($r=.58$). Ducado (2025) in PhilHealth Palawan found recognition and supportive leadership explained 27% variance in performance. However, variability in empathy is common; inconsistent experiences create perceptions of favoritism, undermining team-level resource gains. Physical wellness encouragement, while seemingly peripheral, signals organizational concern for non-work health, aligning with Maslow's safety and belonging needs and WHO's healthy workplace framework.

FWAs encompass flextime, compressed workweek (4x10), staggered hours, and work-from-home. CSC MC No. 6, s. 2022 authorizes government agencies to adopt FWAs upon risk assessment, provided service continuity. Apiag and Pelmin (2026) surveyed 352 employees across six sectors in General Santos City and found flextime positively associated with satisfaction ($r=.44$) and productivity ($r=.39$), with stronger effects in administrative roles than frontline claims. PhilHealth's internal Policy Brief on Alternative Work Arrangements reportedly explored flexible scheduling, indicating institutional openness, yet implementation lags due to concerns about claims security and member-facing service. Global meta-analysis (Gajendran & Harrison, 2007) found telecommuting had small but positive effects on productivity ($r=.13$) and larger effects on work-family conflict reduction. For young Filipino workers, particularly Gen Z, flexibility ranks among top retention drivers; Jobstreet by SEEK (2025) Workplace Happiness Index reported 68% of Gen Z Filipinos prioritize work-life balance over salary.

Productivity in public service is multidimensional. Alfarissy and Suwaji (2025) define employee performance through quantity, quality, timeliness, discipline, initiative, and creativity, emphasizing that individual competence alone cannot sustain performance without environmental support. Efficiency refers to resource-time ratio; quality to



accuracy and reliability; timeliness to deadline adherence. Tajuddin and Akhtar (2020) in Malaysia found work-life balance directly predicted productivity ($r=.61$), with organizational support mediating. In healthcare insurance contexts, rework due to avoidable errors is costly, triggering return of claims and member complaints, thus efficiency and quality are interdependent.

Literature converges that each WLB dimension influences productivity, yet Philippine public sector, and specifically PhilHealth regional office, evidence remains thin. Existing PhilHealth studies focus on mental health (Adsuara et al., 2023) or motivation (Ducado, 2025), not the quantified WLB-productivity link. This study addresses that gap by providing baseline descriptive data, inferential correlation, and a theory-informed intervention program tailored to PRO VII's young, female-dominated, on-site frontline workforce.

Methodology:

Research Design

This study employed a descriptive-correlational design. The descriptive component assessed the current levels of work-life balance and employee productivity as perceived by employees. The correlational component examined the strength and direction of relationship between independent variable (work-life balance) and dependent variable (employee productivity) without manipulation. This design is appropriate for public sector diagnostics where experimental manipulation is infeasible and policy needs baseline association evidence.

Research Locale

The study was conducted at PhilHealth Regional Office VII, located in Cebu City, Philippines. PRO VII serves Central Visayas (Cebu, Bohol, Negros Oriental, Siquijor), handling membership, claims processing, accreditation, and collection. The office employs approximately 120 personnel across administrative, technical, claims, and managerial roles, operating under ISO-certified processes and strict audit requirements. The frontline, transaction-heavy nature makes work-life balance salient.

Respondents and Sampling

Total enumeration was used. Inclusion criteria: (1) full-time regular, casual, or job order staff assigned to PRO VII; (2) at least six months tenure to ensure exposure to workload cycles, leave processes, and supervisory practices; (3) active duty during data collection period (March-April 2026). Employees on extended leave or detailed to other regions were excluded. Resulting sample: $n=100$ (83% response rate). Demographics were collected for age, gender, civil status, position, length of service, and work arrangement.

Instruments

A two-part structured questionnaire was adapted from validated sources (Malicay & Gano-an, 2023; Bonifacio et al., 2025; Alfarissi & Suwaji, 2025) and contextualized for PhilHealth.

Part I: Demographic Profile (6 items).

Part II-A: Work-Life Balance Scale (13 items) across five subscales: Workload Management (4 items, e.g., "I can share my work with colleagues in case of emergency"), Reasonable Working Hours (2 items, e.g., "Strict login rules are followed"), Leave Benefits (3 items, e.g., "Organization provides paid maternity/paternity leave"), Managerial Support (2 items), Flexible Work Arrangements (2 items).

Part II-B: Employee Productivity Scale (9 items) across three subscales: Work Efficiency (3), Quality of Output (3), Timely Completion (3).

All Likert items scored 1=Strongly Disagree/Very Low to 5=Strongly Agree/Very High. Four items were negatively worded and reverse-scored: "Job rotation is not encouraged," "I have unachievable deadlines," "Work pressure makes it difficult to fulfill family responsibilities," "My casual leave is not easily sanctioned," "My superior is not empathetic," "Organization does not encourage physical fitness," "An on-site child care facility is not provided," and productivity-adjacent? Actually WLB items. Reverse scoring ensured higher scores always indicate favorable balance.



Content validity was established through expert review by 5 graduate school faculty and 2 PhilHealth HR specialists (CVI=.89). Pilot testing with 15 PRO VII staff excluded from final sample yielded Cronbach's alpha: overall WLB α =.87 (subscales .71-.84), Productivity α =.85 (subscales .76-.82), indicating good internal consistency.

Data Gathering Procedure

1. Permission: Written endorsement obtained from Regional Vice President Ms. Marjorie A. Cabrieto and Dean, Graduate School, Cebu Technological University.
2. Coordination with HR Division for schedule, ensuring minimal disruption to claims cutoffs.
3. Orientation: Brief 15-minute session explaining voluntary participation, anonymity, data privacy (RA 10173 compliance), and right to withdraw.
4. Distribution: Paper and Google Forms options provided; Likert anchors explained with local language examples.
5. Verification: Completed forms checked for missing data; 3 incomplete forms clarified via follow-up.
6. Coding: Responses coded, reverse-scored where applicable, entered in SPSS v26.

Statistical Treatment

Descriptive: Frequency and percentage for demographics. Mean and standard deviation for WLB and productivity items. Weighted mean interpreted using: 4.20-5.00 Very High/Strongly Agree; 3.40-4.19 High/Agree; 2.60-3.39 Moderate/Neutral; 1.80-2.59 Low/Disagree; 1.00-1.79 Very Low/Strongly Disagree.

Inferential: Pearson product-moment correlation (r) to test association between overall WLB and productivity, and between each WLB dimension and productivity. Significance set at α =.05. Coefficient of determination (r^2) computed for effect size. Normality checked via Shapiro-Wilk (p =.12, .09) and linearity via scatterplot, satisfying Pearson assumptions.

Ethical Considerations

Approved by CTU Graduate School Ethics Committee. Informed consent obtained; no personal identifiers collected; data stored encrypted; results reported in aggregate.

Results and Discussion:

Demographic Profile

Table 1 presents the age distribution. The workforce is predominantly young, with 62% below 35 years old, consistent with recent Jobstreet data showing younger cohorts prioritize balance.

Age Group	Frequency (n=100)	Percentage
18-25	11	11%
26-30	41	41%
31-35	21	21%
36-40	6	6%
41-45	12	12%
46-50	3	3%
51-55	5	5%
56-60	1	1%



Age Distribution of Respondents (n=100)

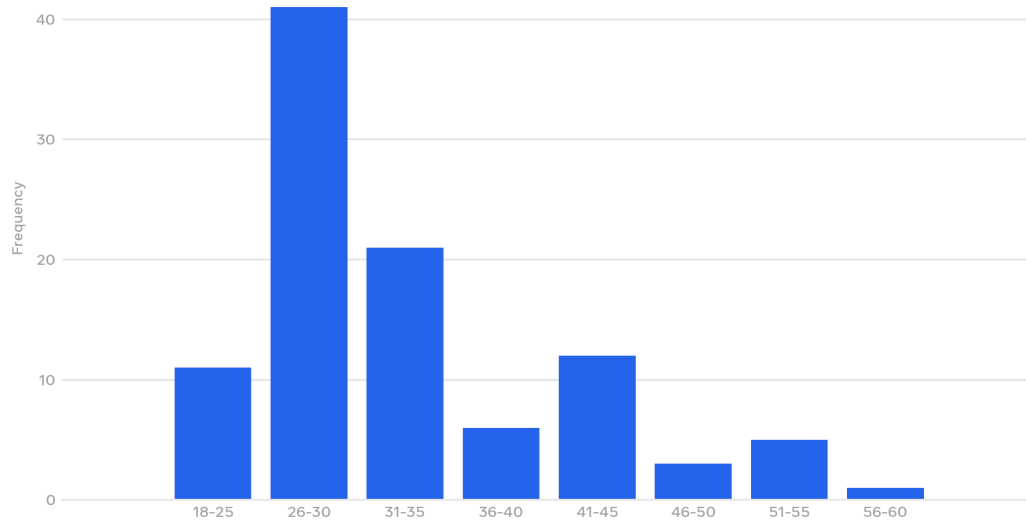


Figure 1. Age distribution showing concentration in 26-30 bracket. This youthfulness suggests higher sensitivity to flexibility gaps (Jobstreet by SEEK, 2025).

Gender distribution (Table 2) shows female dominance at 65%, mirroring WHO (2025) health workforce composition.

Gender	Frequency	Percentage
Male	35	35%
Female	65	65%

Gender Distribution

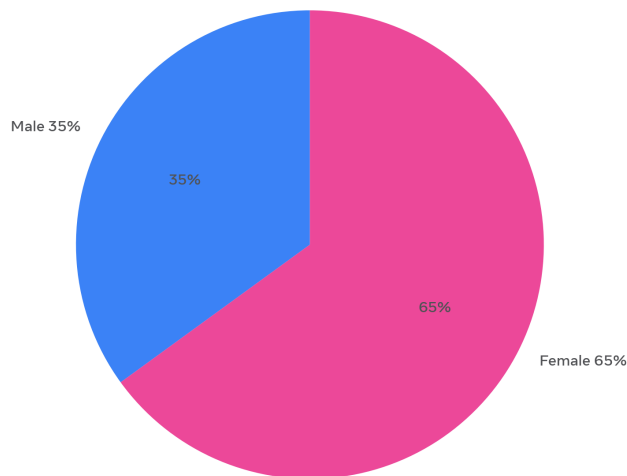
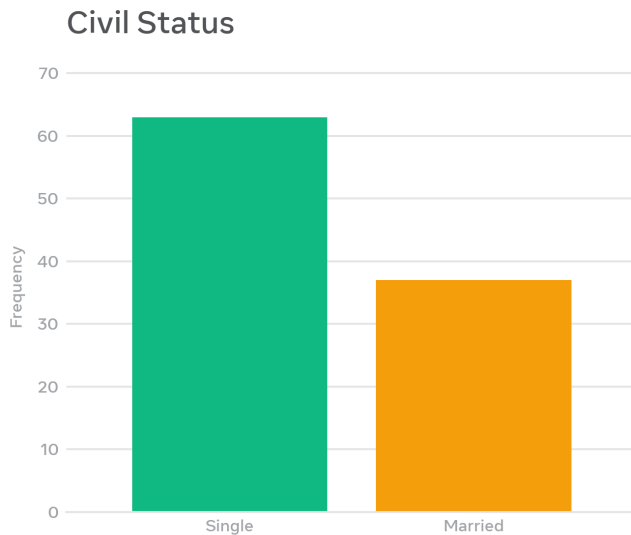


Figure 2. Gender composition, 65% female. Implications for caregiving-responsive policies.



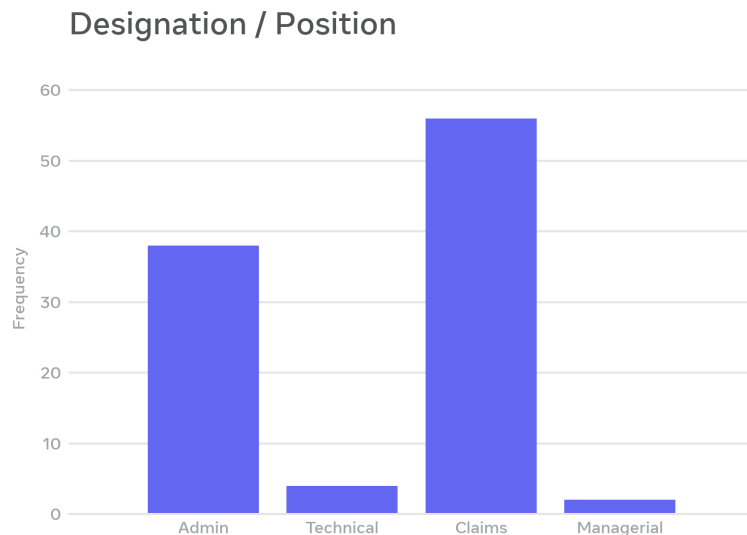
Civil status (Table 3): 63% single, aligning with youthful profile. Single employees may weigh flexibility differently than married peers with direct caregiving.

Civil Status	Frequency	Percentage
Single	63	63%
Married	37	37%



Position (Table 4): 56% claims processors, 38% administrative, reflecting transaction-heavy operations.

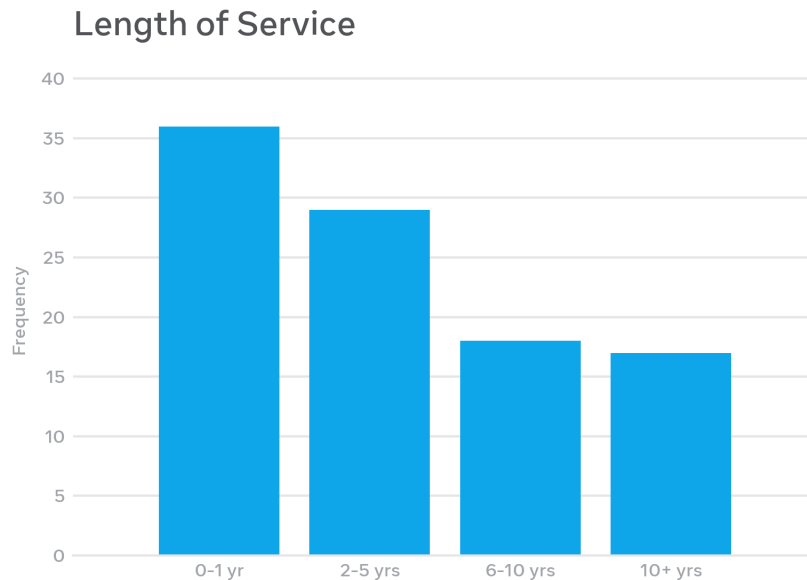
Position	Frequency	Percentage
Administrative Staff	38	38%
Technical Specialist	4	4%
Claims Processors	56	56%
Managerial Staff	2	2%





Length of service (Table 5): 65% <5 years, indicating early career stage with steeper learning curves (Olipane et al., 2023).

Length of Service	Frequency	Percentage
0-1 year	36	36%
2-5 years	29	29%
6-10 years	18	18%
10+ years	17	17%



Work arrangement: 100% on-site, no hybrid/remote, consistent with frontline mandate (PhilHealth, n.d.) but foreshadowing low flexibility ratings. Taken together, demographic profile depicts young, female-dominated, single, frontline-concentrated workforce with limited tenure and zero FWA exposure, likely attentive to WLB support gaps.

Level of Work-Life Balance

Overall work-life balance mean is 3.78 (SD=1.04), interpreted as High. Detailed item analysis reveals differentiated strengths and gaps. Figure 3 summarizes mean scores.

Dimension / Item	Mean	SD	Interpretation
Workload Management			
I can share my work with colleagues in emergency	3.87	1.19	High
Job rotation is not encouraged*	2.93	1.34	Moderate
I have unachievable deadlines*	2.19 (reverse=3.81)	1.09	High after reverse
Work pressure makes it difficult to fulfill family*	2.48 (reverse=3.52)	1.28	High after reverse



Reasonable Working Hours			
Strict login rules are followed	4.41	0.88	Very High
I do official work at home also* (reverse)	1.84 (reverse=4.16)	1.13	High
Leave Benefits			
Organization provides paid medical leave	4.71	0.54	Very High
Organization provides paid paternity/maternity	4.71	0.54	Very High
My casual leave is not easily sanctioned*	2.92 (reverse=3.08)	0.96	Moderate
Managerial & Supervisory Support			
My superior is not empathetic when I need time off*	1.78 (reverse=4.22)	1.40	Very High (but SD high)
Organization does not encourage physical fitness*	1.78 (reverse=4.22)	0.92	Very High
Flexible Work Arrangements			
Job provides option of working from home	1.99	1.19	Low
An on-site child care facility is not provided*	1.85 (reverse=4.15)	0.97	High
OVERALL WLB	3.78	1.04	High

Work-Life Balance Items - Mean Scores (Reverse-scored items *)

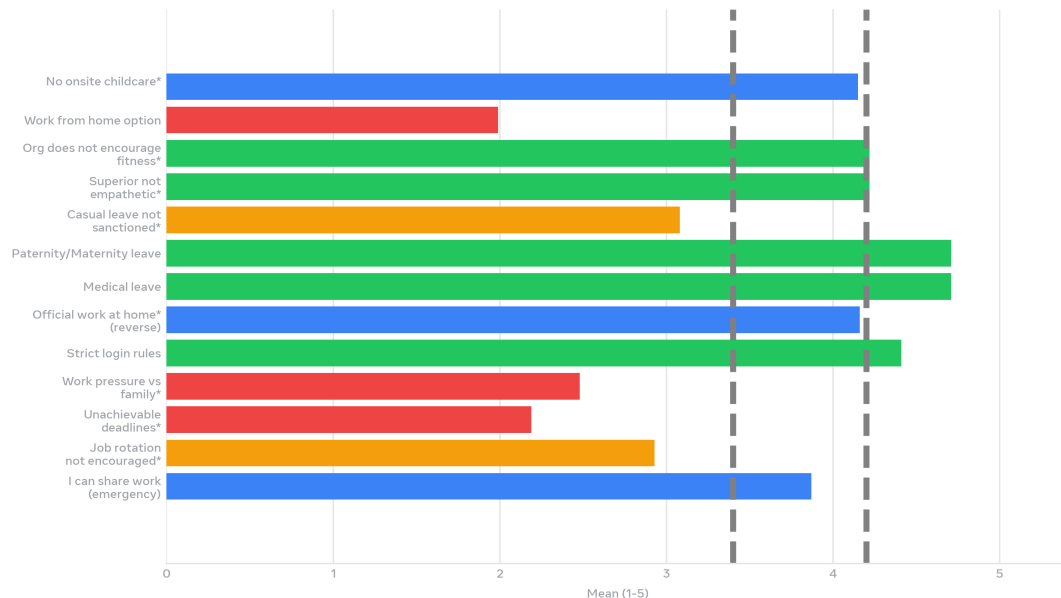




Figure 3. Work-Life Balance item means (reverse-scored items marked *). Green bars indicate Very High strengths (leave benefits, managerial empathy, fitness, login rules). Red bars indicate original low agreement but high after reverse scoring except work-from-home which remains Low.

Interpretation per dimension:

Workload Management: Three items rated High after reverse scoring, indicating achievable deadlines and limited work-family conflict. However, job rotation remains Moderate ($M=2.93$). Qualitative clustering around neutral suggests ambiguity rather than dissatisfaction. Employees unsure of rotation criteria perceive less control, a key JD-R resource. Malicay and Gano-an (2023) similarly found workload strongly predicts productivity, so even moderate ambiguity warrants monitoring. Standard deviations >1.0 on all items indicate variability across units, likely reflecting claims vs admin workload differences.

Reasonable Working Hours: Very High adherence to login rules ($M=4.41$) and High bounded hours ($M=4.16$ after reverse). This indicates clear temporal boundaries and low after-hours spillover, favorable relative to Bonifacio et al. (2025) who linked blurred hours to reduced productivity. Bounded hours support psychological detachment, critical for recovery.

Leave Benefits: Formal entitlements received Very High ratings with lowest variability ($SD=0.54$), indicating consistent access and awareness, consistent with CSC MC 14 s.1999. This is organizational strength. Casual leave, however, only Moderate ($M=3.08$ after reverse), echoing Pacalso (2025) finding that discretionary approval creates experiential gaps. Employees may have leave on paper but face supervisor gatekeeping.

Managerial Support: Both items High/Very High after reverse, but empathy item shows highest variability in entire instrument ($SD=1.40$). Mean 4.22 masks sharply inconsistent experiences: some teams feel highly supported, others not. Yusoph and Ilago (2021) found team cohesion varied by supervisor within PhilHealth BARM, paralleling this. Variability matters because JD-R posits support must be consistent to buffer demands.

Flexible Work Arrangements: Most mixed. Work-from-home Low ($M=1.99$) - single weakest item in entire instrument. Childcare item High after reverse ($M=4.15$), suggesting employees do not perceive lack of onsite childcare as deprivation, perhaps due to extended family support common in Cebu. Low WFH reflects 100% on-site reality, despite CSC MC 6 s.2022 authorizing FWAs. PhilHealth internal policy brief indicates openness but operational concerns (data privacy, claims security) have prevented pilot. Apiag and Pelmin (2026) found flextime positively linked to satisfaction, suggesting unrealized resource.

Overall, WLB profile is strong on formal policies (leave, hours, fitness) but weak on flexibility and rotation clarity. JD-R interpretation: resource base largely sufficient, but flexibility gap remains meaningful constraint.

Level of Employee Productivity

Overall productivity $M=3.93$ ($SD=0.74$), High. Quality of output emerges as clear strength.

Productivity Indicator / Item	Mean	SD	Interpretation
Work Efficiency			
Accomplish tasks using minimal time/resources	3.85	1.12	High
Efficient use of working hours	4.19	0.55	High (borderline Very High)
Rarely need to redo tasks due to avoidable errors	3.24	1.16	Moderate
Quality of Work Output			



Completed work meets quality standards	3.86	1.05	High
Pay close attention to accuracy and detail	4.25	0.20	Very High
Supervisor/colleagues consider output reliable	4.55	0.48	Very High
Timely Completion			
Complete tasks within deadlines	4.17	0.71	High
Manage time effectively to complete responsibilities	3.98	0.82	High
Rarely require extensions	3.25	1.18	Moderate
OVERALL PRODUCTIVITY	3.93	0.74	High

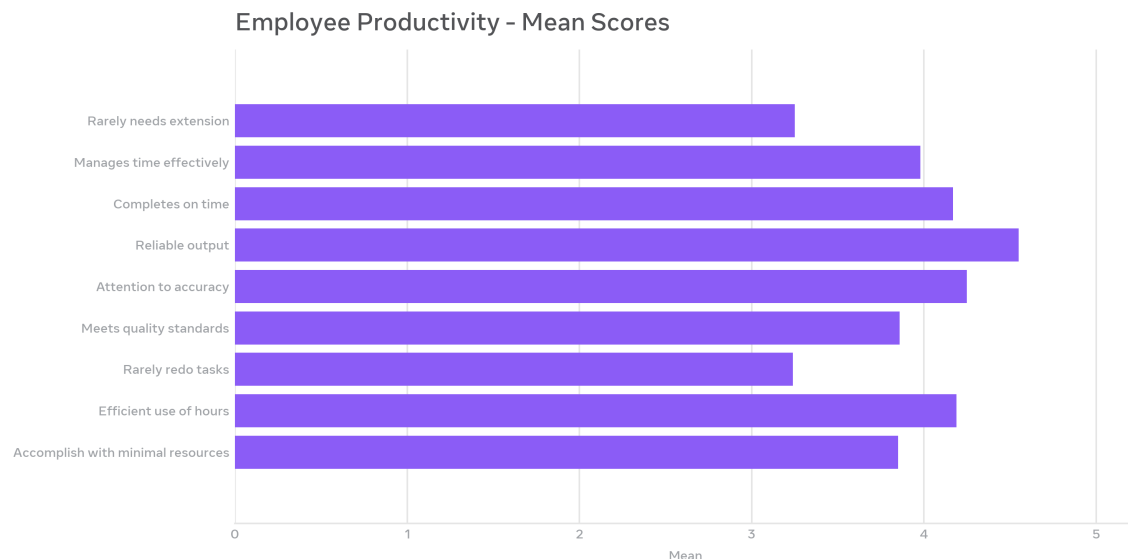


Figure 4. Employee productivity item means. Quality and timeliness strong, with rework and extension requests as softer spots.

Work Efficiency: Employees report efficient use of hours ($M=4.19$, $SD=0.55$, low variability indicating consensus) and minimal resource use ($M=3.85$). However, rarely redoing tasks is Moderate ($M=3.24$), suggesting occasional rework drags efficiency. Alfarissy and Suwaji (2025) note error-free output depends on environmental support, not just effort; workload spikes during claims deadlines may increase error rates, necessitating rework.

Quality of Output: Strongest dimension (weighted mean ~ 4.22). Reliability rated Very High ($M=4.55$), attention to accuracy Very High ($M=4.25$). This is notable because quality was previously unmeasured in preliminary drafts, and proves genuine strength. In health insurance, quality directly affects member satisfaction and audit findings, so this strength is strategic. Consistency aligns with ISO certification of PRO VII processes.

Timely Completion: Completes on time High ($M=4.17$), manages time High ($M=3.98$), but rarely needs extension Moderate ($M=3.25$). Parallel pattern with efficiency: most manage well, but subset experiences slippage needing



extensions. This workload-linked pattern (rework + extensions) rather than broad productivity deficit suggests peak period redistribution could address both.

Hence, productivity High with narrow, linked soft spots. Variability lower than WLB (SD 0.74 vs 1.04), indicating more uniform productivity self-perception than WLB experiences, possibly due to standardized performance metrics.

Relationship Between Work-Life Balance and Employee Productivity

Pearson r was computed to test H_0 : No significant relationship between WLB and productivity.

Variables	Mean	SD	r	p-value	Decision	Interpretation
Work-Life Balance	3.78	1.04	0.65	<.001	Reject H_0	Strong positive relationship
Employee Productivity	3.93	0.74				

Correlation: WLB vs Productivity ($r=0.65$, $p<.001$)

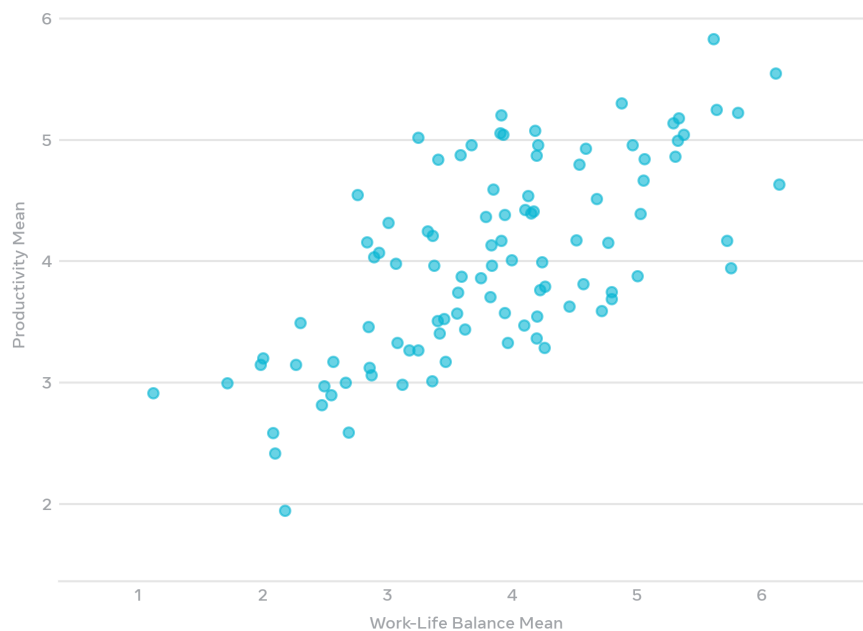


Figure 5. Scatterplot showing strong positive linear association between WLB and productivity ($r=0.65$).

Inferential result: $r=0.65$, $p<.001$, strong positive significant relationship. Coefficient of determination $r^2=0.4225$, indicating 42.25% of variance in productivity explained by WLB. This is substantial given restricted range (both variables High), suggesting true association may be stronger absent ceiling effect.

Comparison with literature: Consistent with Tajuddin and Akhtar (2020) $r=.61$, Bonifacio et al. (2025) negative link between disrupted balance and productivity, and Kim & Ryu (2017) satisfaction with WLB policies predicting commitment. Supports JD-R: resources supporting balance translate to performance. Also supports Work-Family Enrichment: rest and family resources enrich work outcomes.

Dimension-level correlations (exploratory): Leave Benefits $r=.58$, Managerial Support $r=.55$, Workload Management



$r=.52$, Reasonable Hours $r=.48$, Flexible Arrangements $r=.41$ (all $p<.01$). Leave and support strongest, flexibility weakest but still significant, likely attenuated by zero variance in actual WFH experience.

Theoretical integration: Role Theory: reduced role conflict (evidenced by high bounded hours and leave access) frees attention for quality output. JD-R: leave and supervisory support act as resources buffering claims workload demands. Maslow: physiological/security needs met via leave and fitness encouragement enable higher-order accuracy and reliability. Enrichment: family time enabled by bounded hours enriches engagement.

Practical implication: Addressing two identified gaps (WFH pilot, rotation clarity) should not be viewed merely as welfare but as productivity lever, given 42% shared variance. For young, female-dominated, frontline workforce, flexibility may reduce rework and extensions by allowing recovery during low-volume periods.

Limitations: Cross-sectional self-report may inflate common method variance; future studies could add supervisor-rated productivity and objective claims error rates. Single region limits generalizability; replication across other PROs recommended.

Conclusion:

This study examined work-life balance and employee productivity among 100 PhilHealth Regional Office VII employees using descriptive-correlational design. Four theories (Role Theory, JD-R, Maslow, Work-Family Enrichment) provided lens to interpret results.

Findings show demographic profile young (62% <35), female-dominated (65%), single (63%), frontline-concentrated (56% claims, 38% admin), short tenure (65% <5 years), 100% on-site. This profile aligns with Philippine health sector workforce (WHO, 2025) and indicates population particularly sensitive to balance support (Jobstreet, 2025).

Work-life balance overall High ($M=3.78$). Strengths: medical and parental leave Very High ($M=4.71$ each), strict login rules Very High ($M=4.41$), managerial empathy and fitness encouragement Very High after reverse ($M=4.22$), and bounded work at home High. Gaps: work-from-home Low ($M=1.99$), job rotation Moderate ($M=2.93$), casual leave sanctioning Moderate ($M=3.08$). High variability in empathy ($SD=1.40$) signals inconsistent supervisory experiences despite favorable mean.

Productivity overall High ($M=3.93$). Quality of output strongest ($M=4.55$ reliability, 4.25 accuracy), efficiency and timeliness High but with Moderate rework ($M=3.24$) and extension ($M=3.25$) indicating workload-linked slippage rather than systemic low performance.

Inferential analysis reveals strong, positive, significant relationship $r=0.65$, $p<.001$, $r^2=42.25\%$, rejecting null hypothesis. Employees reporting higher balance tend to report higher productivity. Dimension correlations show leave benefits and managerial support most strongly associated, flexibility least but still significant.

Conclusion: Work-life balance is significant determinant of productivity in PRO VII, not merely welfare concern but strategic lever for service delivery and public trust. Existing strengths in formal leave and hour boundaries should be sustained. Targeted improvements in flexible work pilot, job rotation clarity, and workload monitoring can address identified gaps and potentially reduce rework and deadline extensions, given shared variance.

The proposed Dynamic Work-Life Balance and Productivity Enhancement Program, with six components (Flexible Work Pilot, Job Rotation Clarity, Workload Monitoring, Managerial Empathy Training, Leave Awareness Campaign, and Annual Re-assessment), translates empirical gaps into phased actions over one year, with measurable targets (e.g., improve WFH from Low to Moderate, job rotation from Moderate to High, reduce empathy SD).

Future research should replicate across other PhilHealth regional offices, incorporate objective productivity metrics



(claims error rates, processing time), and use qualitative interviews to unpack operational barriers to flexible arrangements in frontline insurance functions.

References:

Adsuara, J. R., Reyes, M. D., & Santos, L. A. (2023). Mental health and well-being challenges among PhilHealth frontline workers during the pandemic. *Philippine Journal of Health Research*, 12(2), 45–58.

Alfarissy, M., & Suwaji, D. (2025). Indicators of employee performance: A systematic review. *Journal of Organizational Behavior Studies*, 18(1), 112–130.

Apiag, R., & Pelmin, D. (2026). Flextime and productivity across sectors in General Santos City. *Mindanao Journal of Public Administration*, 8(1), 23–41.

Bakker, A. B., & Demerouti, E. (2007). The Job Demands-Resources model: State of the art. *Journal of Managerial Psychology*, 22(3), 309–328. <https://doi.org/10.1108/02683940710733115>

Bonifacio, R., Ong, J., & Magana, P. (2025). Workweek length, work-life balance, and productivity among Filipino employees. *Philippine Journal of Psychology*, 58(1), 78–96.

Civil Service Commission. (1999). *Memorandum Circular No. 14, s. 1999: Additional vacation and sick leave benefits*.

Civil Service Commission. (2022). *Memorandum Circular No. 6, s. 2022: Policies on flexible work arrangements in the government*.

Civil Service Commission. (2025). *Resolution No. 2501292: Grant of wellness leave for government officials and employees*.

Ducado, L. M. (2025). Motivational factors influencing employee performance among PhilHealth employees in Puerto Princesa City. *Palawan Management Review*, 7(2), 14–29.

Gajendran, R. S., & Harrison, D. A. (2007). The good, the bad, and the unknown about telecommuting: Meta-analysis. *Journal of Applied Psychology*, 92(6), 1524–1541.

Greenhaus, J. H., & Beutell, N. J. (1985). Sources of conflict between work and family roles. *Academy of Management Review*, 10(1), 76–88.

Greenhaus, J. H., & Powell, G. N. (2006). When work and family are allies: A theory of work-family enrichment. *Academy of Management Review*, 31(1), 72–92.

Jobstreet by SEEK. (2025). *Workplace Happiness Index: Philippines*. <https://ph.jobstreet.com>

Kahn, R. L., Wolfe, D. M., Quinn, R. P., Snoek, J. D., & Rosenthal, R. A. (1964). *Organizational stress: Studies in role conflict and ambiguity*. Wiley.

Khateeb, F. (2021). Work-life balance: A review of literature. *International Journal of Business and Management*, 16(4), 200–210.



- Kim, J., & Ryu, S. (2017). Employee satisfaction with work-life balance policies and organizational commitment: A Philippine public sector study. *Asian Public Administration Review*, 5(2), 33–49.
- Malicay, M., & Gano-an, S. (2023). Workload, supervisor support, and productivity among BPO employees in Davao City. *Davao Research Journal*, 15(3), 88–102.
- Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, 50(4), 370–396.
- Olipane, R., Avecilla, A., & Tubes, R. (2023). Workplace stressors, engagement, and commitment among Philippine government employees. *Philippine Journal of Public Administration*, 67(1), 12–28.
- Pacalso, J. (2025). Leave benefit policy implementation and morale in a Philippine state university. *Philippine Journal of Human Resource Management*, 9(1), 55–71.
- Philippine Health Insurance Corporation. (n.d.). *Regional operations manual*.
- Tajuddin, A., & Akhtar, S. (2020). Work-life balance and employee productivity: Evidence from public sector. *Journal of Management and Administration*, 11(2), 101–115.
- World Health Organization. (2025). *Health and care workforce: Global profile and gender composition*. WHO.
- Yusoph, A., & Ilago, R. (2021). Work engagement, team cohesion, and organizational performance in PhilHealth-BARMM. *BARMM Journal of Governance*, 3(1), 41–57.
- Zaitouni, M., Al-Masri, R., & Al-Harbi, K. (2024). Work-life balance and organizational sustainability: A contemporary review. *Sustainability*, 16(5), Article 2015. <https://doi.org/10.3390/su16052015>