

## HEALTH EXPENDITURE

In most OECD countries, spending on health is a large and growing share of both public and private expenditure. Health spending as a share of GDP varies widely across countries, reflecting the relative priority assigned to health as well as the diverse financing and organisational structures of the health system in each country.

### Definition

Total expenditure on health measures the final consumption of health goods and services plus capital investment in health care infrastructure. It includes spending by both public and private sources (including households) on medical goods and services, on public health and prevention programmes, and on administration.

### Overview

Trends in the health spending to GDP ratio are the result of the combined effect of changes in GDP and health expenditure. In most OECD countries, health spending grew more quickly than GDP between 2000 and 2009. As a result, the average share of GDP allocated to health across OECD countries climbed to 9.6% up from 7.8% in 2000. This ratio dropped slightly to 9.5% of GDP in 2010. This decrease was mainly driven by slower or negative growth in public spending in the wake of the 2008 financial and economic crises. Many countries, including Ireland, Iceland, Estonia and Greece implemented a range of measures to reduce government health spending as part of broader efforts to reduce large budgetary deficits and public debt.

There remain large variations in how much OECD countries spend on health as a share of GDP. In 2010, the share of GDP allocated to health was the largest by far in the United States (17.6%), followed by the Netherlands (12.0%), France and Germany (11.6%). Estonia, Mexico and Turkey spent less than 6.5% of their GDP on health.

China and India spent 5.1% and 4.1% of their GDP on health respectively in 2010, while South Africa and Brazil allocated 8.9% and 9.0% of GDP to health, close to the OECD average (9.5%).

The share of public expenditure on health to GDP also varies among OECD countries from below 4.5% in Chile, Korea and Mexico to more than or equal to 8.5% in Denmark, France, Germany and the United States.

In 2010, public spending was the main source of financing of health expenditure in all OECD countries with the exception of Mexico, Chile and the United States. Private health spending was also the dominant financing source in India, South Africa and Brazil.

For a more comprehensive assessment of health spending, the health spending to GDP ratio should be considered together with per capita health spending. Countries having a relatively high health spending to GDP ratio might have relatively low health expenditure per capita, while the converse also holds.

### Comparability

OECD countries are at varying stages of reporting health expenditure data according to the definitions proposed in the 2011 manual *A System of Health Accounts (SHA)*. While the comparability of health expenditure data has improved recently, some limitations do remain, in particular on the measurement of long-term care expenditure.

In the Netherlands, it is not possible to clearly distinguish the public and private share for the part of health expenditure related to investments. In Belgium, total expenditure excludes investments. Estonia, Israel and Poland report expenditure financed from the rest of the world which are reported under private financing in the chart. In Luxembourg, health expenditure is for the insured population rather than the resident population.

### Sources

- OECD (2012), *OECD Health Statistics*, OECD Publishing.
- For non-OECD member countries: World Health Organization (WHO) (2012), (database).

### Further information

#### Analytical publications

- OECD (2010), *Value for Money in Health Spending*, OECD Health Policy Studies, OECD Publishing.
- Scherer, P. and M. Devaux (2010), "The Challenge of Financing Health Care in the Current Crisis: An Analysis Based on the OECD Data", *OECD Health Working Papers*, No. 49.

#### Statistical publications

- OECD (2011), *Government at a Glance 2011*, OECD Publishing.
- OECD (2011), *Health at a Glance*, OECD Publishing.

#### Methodological publications

- OECD, Eurostat, WHO (2011), *A System of Health Accounts*, OECD Publishing.

#### Online databases

- *OECD Health Statistics*.

#### Websites

- *OECD Health Data (supplementary material)*, [www.oecd.org/health/healthdata](http://www.oecd.org/health/healthdata).



## HEALTH EXPENDITURE

### Public and private expenditure on health

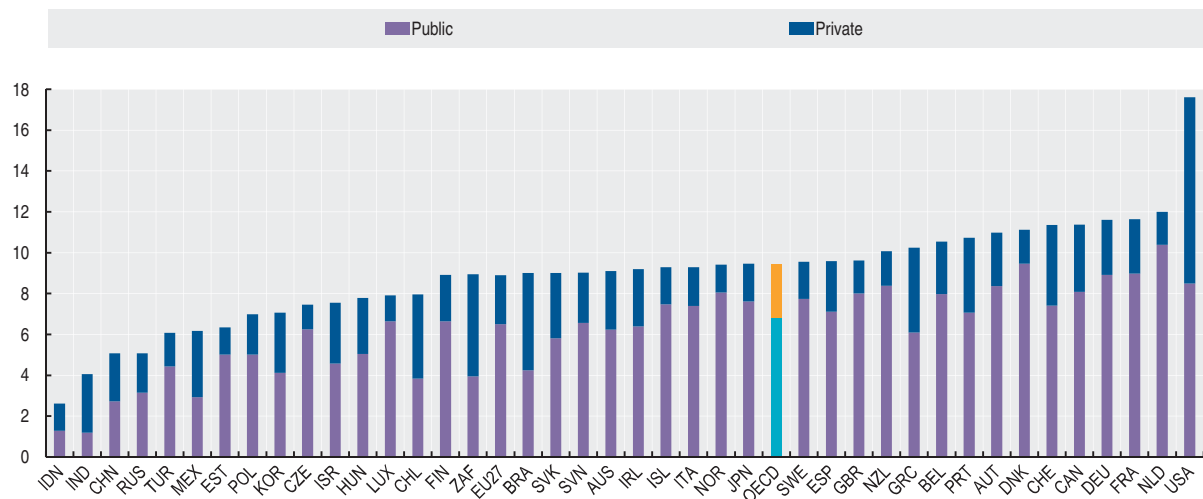
As a percentage of GDP

	Public expenditure				Private expenditure				Total			
	1980	1990	2000	2010 or latest available year	1980	1990	2000	2010 or latest available year	1980	1990	2000	2010 or latest available year
Australia	3.8	4.5	5.4	6.2	2.3	2.3	2.7	2.9	6.1	6.7	8.0	9.1
Austria	5.1	6.1	7.6	8.4	2.3	2.3	2.4	2.6	7.4	8.4	10.0	11.0
Belgium	..	..	6.1	8.0	..	..	2.1	2.6	6.3	7.2	8.1	10.5
Canada	5.3	6.6	6.2	8.1	1.7	2.3	2.6	3.3	7.0	8.9	8.8	11.4
Chile	..	..	3.4	3.8	..	..	3.2	4.1	..	..	6.6	8.0
Czech Republic	..	4.4	5.7	6.3	..	0.1	0.6	1.2	..	4.5	6.3	7.5
Denmark	7.9	6.9	7.3	9.5	1.1	1.4	1.4	1.7	8.9	8.3	8.7	11.1
Estonia	..	..	4.1	5.0	..	..	1.2	1.3	..	..	5.3	6.3
Finland	5.0	6.3	5.1	6.6	1.3	1.5	2.1	2.3	6.3	7.7	7.2	8.9
France	5.6	6.4	8.0	9.0	1.4	2.0	2.1	2.7	7.0	8.4	10.1	11.6
Germany	6.6	6.3	8.3	8.9	1.8	2.0	2.1	2.7	8.4	8.3	10.4	11.6
Greece	3.3	3.6	4.8	6.1	2.6	3.1	3.2	4.2	5.9	6.7	8.0	10.2
Hungary	..	..	5.1	5.0	..	..	2.1	2.7	..	..	7.2	7.8
Iceland	5.5	6.8	7.7	7.5	0.7	1.0	1.8	1.8	6.3	7.8	9.5	9.3
Ireland	6.7	4.3	4.6	6.4	1.5	1.7	1.5	2.8	8.2	6.0	6.1	9.2
Israel	..	..	4.7	4.6	..	..	2.6	2.8	7.7	7.1	7.5	7.5
Italy	..	6.1	5.8	7.4	..	1.6	2.2	1.9	..	7.7	8.0	9.3
Japan	4.5	4.5	6.1	7.6	1.8	1.3	1.5	1.8	6.4	5.8	7.6	9.5
Korea	0.8	1.5	2.2	4.1	2.9	2.5	2.3	3.0	3.7	4.0	4.5	7.1
Luxembourg	4.8	5.0	6.4	6.6	0.4	0.4	1.1	1.3	5.2	5.4	7.5	7.9
Mexico	..	1.8	2.4	2.9	..	2.6	2.7	3.3	..	4.4	5.1	6.2
Netherlands	5.1	5.4	5.0	..	2.3	2.6	2.9	..	7.4	8.0	8.0	12.0
New Zealand	5.1	5.6	5.9	8.4	0.7	1.2	1.7	1.7	5.8	6.8	7.6	10.1
Norway	5.9	6.3	6.9	8.1	1.0	1.3	1.5	1.4	7.0	7.6	8.4	9.4
Poland	..	4.4	3.9	5.0	..	0.4	1.7	1.9	..	4.8	5.5	7.0
Portugal	3.3	3.7	6.2	7.1	1.8	2.0	3.1	3.7	5.1	5.7	9.3	10.7
Slovak Republic	..	..	4.9	5.8	..	..	0.6	3.2	..	..	5.5	9.0
Slovenia	..	..	6.1	6.6	..	..	2.1	2.5	..	..	8.3	9.0
Spain	4.2	5.1	5.2	7.1	1.1	1.4	2.0	2.5	5.3	6.5	7.2	9.6
Sweden	8.2	7.4	6.9	7.7	0.7	0.8	1.2	1.8	8.9	8.2	8.2	9.6
Switzerland	..	4.3	5.6	7.4	..	3.9	4.5	3.9	7.4	8.2	10.2	11.4
Turkey	0.7	1.6	3.1	4.4	1.8	1.1	1.8	1.6	2.4	2.7	4.9	6.1
United Kingdom	5.0	4.9	5.5	8.0	0.6	1.0	1.5	1.6	5.6	5.9	7.0	9.6
United States	3.7	4.9	5.9	8.5	5.3	7.5	7.8	9.1	9.0	12.4	13.7	17.6
EU 27	..	..	..	6.5	..	..	..	2.4	..	..	..	9.0
OECD	4.8	5.0	5.5	6.7	1.7	1.9	2.2	2.7	6.6	6.9	7.8	9.5
Brazil	..	..	2.9	4.2	..	..	4.3	4.8	..	..	7.2	9.0
China	..	..	1.8	2.7	..	..	2.9	2.4	..	..	4.6	5.1
India	..	..	1.1	1.2	..	..	3.3	2.9	..	..	4.4	4.1
Indonesia	..	..	0.7	1.3	..	..	1.2	1.3	..	..	2.0	2.6
Russian Federation	..	..	3.2	3.2	..	..	2.2	1.9	..	..	5.4	5.1
South Africa	..	..	3.4	3.9	..	..	5.0	5.0	..	..	8.5	8.9

StatLink <http://dx.doi.org/10.1787/888932710992>

### Public and private expenditure on health

As a percentage of GDP, 2010 or latest available year



StatLink <http://dx.doi.org/10.1787/888932711011>



**From:**  
**OECD Factbook 2013**  
Economic, Environmental and Social Statistics

**Access the complete publication at:**  
<https://doi.org/10.1787/factbook-2013-en>

**Please cite this chapter as:**

OECD (2013), "Health expenditure", in *OECD Factbook 2013: Economic, Environmental and Social Statistics*, OECD Publishing, Paris.

DOI: <https://doi.org/10.1787/factbook-2013-103-en>

This work is published under the responsibility of the Secretary-General of the OECD. The opinions expressed and arguments employed herein do not necessarily reflect the official views of OECD member countries.

This document and any map included herein are without prejudice to the status of or sovereignty over any territory, to the delimitation of international frontiers and boundaries and to the name of any territory, city or area.

You can copy, download or print OECD content for your own use, and you can include excerpts from OECD publications, databases and multimedia products in your own documents, presentations, blogs, websites and teaching materials, provided that suitable acknowledgment of OECD as source and copyright owner is given. All requests for public or commercial use and translation rights should be submitted to [rights@oecd.org](mailto:rights@oecd.org). Requests for permission to photocopy portions of this material for public or commercial use shall be addressed directly to the Copyright Clearance Center (CCC) at [info@copyright.com](mailto:info@copyright.com) or the Centre français d'exploitation du droit de copie (CFC) at [contact@cfcopies.com](mailto:contact@cfcopies.com).