

In 2016 expenditure on healthcare per capita in the Basque Country reached 2,839 euros, an increase of 2.9%

Healthcare expenditure by the public administrations compared to their total expenditure stood at 16.1% in 2016, almost one percentage point higher than in 2005.

Current expenditure on healthcare, calculated in accordance with the System of Health Accounts (SHA 2011) methodology of the OECD, reached 6,172 million euros in 2016, which represented 8.7% of Basque GDP, according to Eustat data.

Healthcare expenditure measures the final consumption of goods and services for health, that is, current expenditure. The financing of this expenditure includes, as a whole, the public administrations and mandatory insurance, systems of voluntary healthcare payments and payments by Households.

In 2005-2016, the annual average variation in expenditure by the public administrations as a whole was 4%, whilst the variation in payments by households and voluntary insurance was 5%. In 2016, the contribution of the public administrations to current expenditure was 4,337 million euros, that is 70.3%, and the contribution by households and voluntary healthcare payments systems was 29.7%, 1,835 million euros.

Table 1: Main data and indicators of the Health Account of the Basque Country. 2005-2016

					Variation rate (%)	
					Average annual	2016/2005
	2005	2010	2015	2016	2016/2015	2016/2005
CURRENT EXPENDITURE ON HEALTH (thousands of euros)	3.891.427	5.641.786	5.994.752	6.171.538	2,9	4,3
Government/compulsory schemes	2.817.631	4.190.948	4.233.033	4.336.919	2,5	4,0
Voluntary schemes/household out-of-pocket payments	1.073.796	1.450.838	1.761.719	1.834.619	4,1	5,0
Health expenditure per inhabitant (euros)	1.844	2.598	2.759	2.839	2,9	4,0
Health expenditure in % GDP	6,7	8,5	8,8	8,7	-0,1 (*)	4,9 (*)
Health spending by government schemes and compulsory health insurance as share of total government expenditure (%)	15,2	15,4	16,0	16,1	0,1 (*)	:

(:) data not available

(*) Differences in percentage points

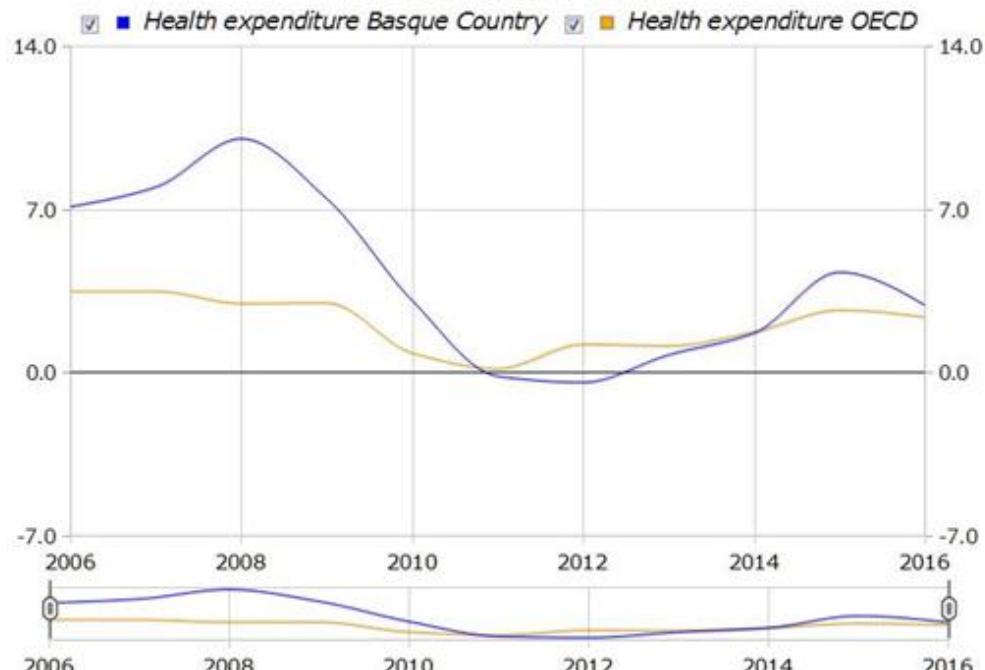
Source: EUSTAT. Health account

The variation in healthcare expenditure per capita from 2006 to 2016 in the Basque Country has followed an evolution, as observed in Graph 1, which shows a very similar profile to that of the average for countries in the OECD, although in the case of the Basque Country greater variations are registered and there are also negative rates at some points. Thus, the variation in healthcare expenditure per capita in the Basque Country experienced very high growth in the period 2006-2009, reaching growth of 10%, and started to decrease from 2009 onwards.

The average annual variation of countries in the OECD experienced the same trend but more moderately; in the period 2006-2009 growth was around 3%, in 2011 there was

less growth, 0.2%, and over subsequent years it continued to rise until in 2016 the variation was 2.4%, five tenths lower than that registered for the Basque country.

Year-on-year variation rates of the per capita health expenditure. (%)



Source: Eustat. Health Account and OECD. Health Statistic

The indicator of contributions from public administrations, in other words, expenditure on healthcare compared to the total expenditure by the Public Administrations in the Basque Country stood at 16.1% in 2016, 0.8 percentage points higher than the OECD average, which stood at 15.3%, one percentage point and two tenths above that of Spain (14.9%).

Table 2. Indicators of Health expenditure by country. 2016

	Public expenditure in % GDP	Public expenditure in % Total expenditure	Health spending by government schemes and compulsory health insurance as share of total government expenditure (1)	Total expenditure in % GDP	Total expenditure per inhabitant (PPP, US\$)	GDP per inhabitant (PPP (\$))
OECD 35 ⁽¹⁾	6,5	72,5	15,3	9,0	4.003	:
Germany	9,4	84,6	21,4	11,1	5.452	48.943
Austria	7,7	74,1	15,1	10,4	5.273	50.522
Belgium	7,9	78,8	19,1	10,0	4.660	46.417
Canada	7,4	70,3	18,3	10,5	4.722	44.820
Denmark	8,7	84,1	15,8	10,4	5.075	49.029
Spain	6,4	71,2	14,9	9,0	3.257	36.305
United States	14,0	81,8	22,1	17,1	9.832	57.589
Finland	7,1	74,5	12,3	9,5	4.118	43.378
France	9,6	82,9	15,3	11,5	4.773	41.363
Ireland	5,3	72,1	18,4	7,4	5.267	71.389
Iceland	6,8	81,5	16,4	8,3	4.208	50.746
Italy	6,7	74,5	13,4	8,9	3.429	38.380
Norway	8,9	85,1	17,5	10,5	6.175	58.808
United Kingdom	7,8	79,5	18,4	9,8	4.164	42.656
Sweden	9,1	83,5	18,3	10,9	5.348	48.905
Switzerland	7,7	62,8	22,8	12,2	7.824	63.882
Basque Country	6,1	70,3	16,1	8,7	4.283	49.445

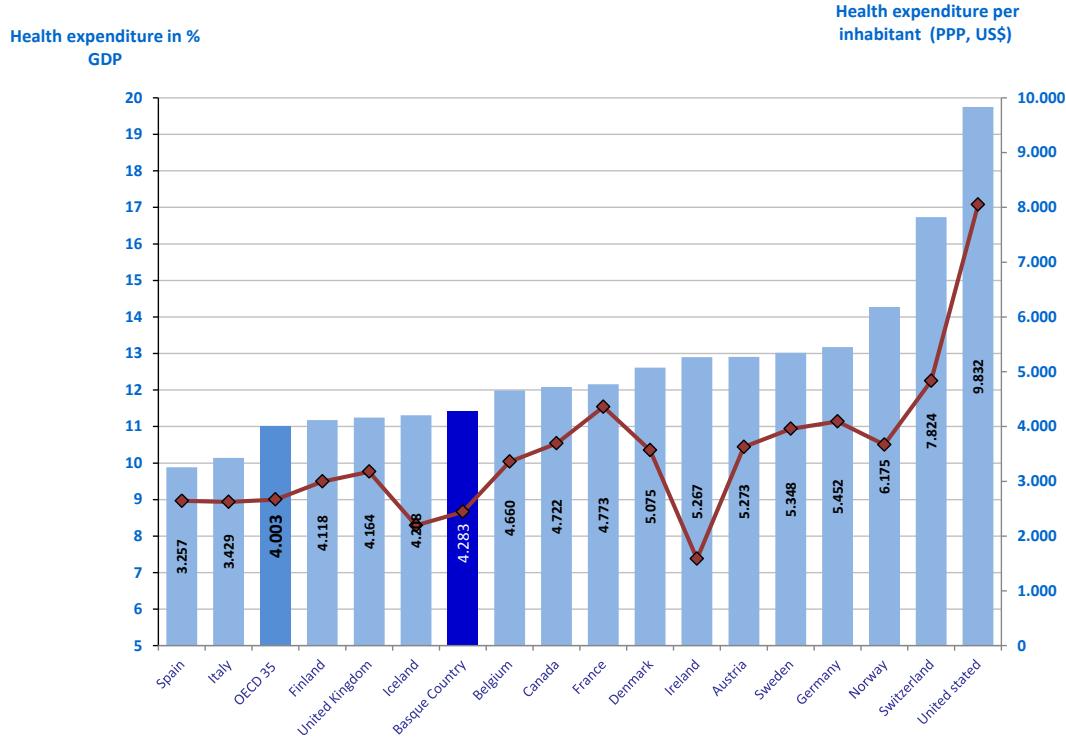
PPP: Purchasing Power Parity

(1) source: Health at a Glance 2017, according to Health Statistics 2017

Source: EUSTAT, Health Account and OECD Health Statistics 2018 (nov2018)

The **international comparison** of other indicators provided by the OECD shows that **expenditure as a percentage of GDP** for the Basque Country places it below the OECD average, as in the Basque Country it is 8.7% whereas the OECD achieves 9.0%. However, **healthcare expenditure per capita at PPP** (Purchasing Power Parity in \$) reached **4,283** in the Basque Country, placing it above the OECD average of 4,003 and countries such as Finland (4,118) and Spain (3,257). At the very top of the table is Switzerland with 7,824, and Norway, with 6,175.

Indicators of Health expenditure by country. 2016



A more detailed analysis of the data on the Health Accounts of the Basque Country for 2016 shows that in the distribution of **expenditure by functions**, the largest section is Curative healthcare, which in 2016 accounted for 54.7% of current expenditure and was up 1.1% compared to 2015. The second most important function corresponds to Medical Products (pharmaceutical products, prostheses etc.), which accounted for 17.6% of total spending and increased by 8.2% compared to 2015. Expenditure on long-stay healthcare provision accounted for 16.6% of current expenditure and was up 3.7% compared to 2015.

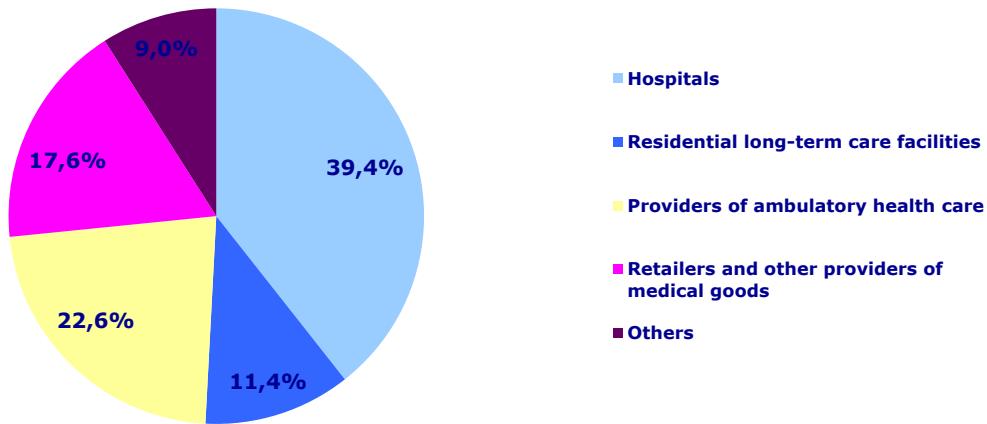
Table 3. Expenditure on Health by function in the Basque Country (thousands euros). 2016

FUNCTION	2010	2014	2015	2016	% of Total Health Expenditure		Variation rate (%)	
					2010	2016	2015/2014	2016/2015
HC.1 Curative care	2.986.866	3.174.484	3.339.386	3.377.200	52,9	54,7	5,2	1,1
HC.2 Rehabilitative care	95.767	112.301	117.576	115.411	1,7	1,9	4,7	-1,8
HC.3 Long-term care (health)	903.024	964.919	989.420	1.026.111	16,0	16,6	2,5	3,7
HC.4 Ancillary services (non-specified by function)	341.665	280.808	291.227	302.873	6,1	4,9	3,7	4,0
HC.5 Medical goods (non-specified by function)	1.057.622	960.301	1.002.500	1.084.860	18,7	17,6	4,4	8,2
HC.6 Preventive care	75.203	79.771	81.486	85.488	1,3	1,4	2,1	4,9
HC.7 Governance and health system and financing administration	181.639	176.667	173.157	179.595	3,2	2,9	-2,0	3,7
CURRENT EXPENDITURE ON HEALTH (All functions)	5.641.786	5.749.251	5.994.752	6.171.538	100,0	100,0	4,3	2,9

Source: EUSTAT. Health account

A more detailed breakdown of each function, which details the type of healthcare (inpatient, outpatient and in the home), revealed that in the 2005-2016 series, expenditure on inpatient care grew an average of 3.3%, whilst expenditure on outpatient care (external appointments and day patients) increased by 5.2% and long-stay healthcare by 6.6% (this function includes expenditure destined for the healthcare of dependents). Furthermore, healthcare in the home (curative and rehabilitative) grew an average of 10.6% in the period 2005-2016, going from 2.2% of current expenditure in 2005 to accounting for 4.1% in 2016.

Distribution of expenditure on health by provider. 2016



Source: EUSTAT. Health account

The structure of **expenditure by provider** was similar to that of previous periods; the greater part of spending was on hospitals (39.4%) and the second biggest spending was on providers of outpatient care, with 22.6%. Long stay residential establishments accounted for 11.4% of current expenditure. Expenditure on Retailers and suppliers of medical products accounted for 17.6% of current expenditure and saw the highest growth compared to 2015, 8.3%.

The remaining expenditure corresponded to Providers of auxiliary services (healthcare transport, laboratories); administration of the healthcare system and the rest of the economy, this latter includes households as providers of home care.

For further information:

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