

Expenditure on primary health care

Effective primary health care is the cornerstone for efficient, people-centred, and equitable health systems. The COVID-19 pandemic has shown that for health systems to be resilient in the face of health crises, strong primary and community health care – the frontline of all health systems – is essential.

In 2020, primary health care accounted for around 13% of all health spending on average across EU countries, ranging from 8% in Romania to around 18% in Lithuania (Figure 5.11). In most EU countries, primary health care spending as a share of total health spending remained relatively constant between 2015 and 2019 suggesting expenditure growth was in line with overall health spending. Yet, there was a slight drop in this proportion in 2020 as a result of strong growth in spending on inpatient care and a widespread reduction in dental care spending.

Analysing the composition of primary care spending reveals that around half of it refers to general outpatient care services on average across EU countries. A further 36% is related to dental care. Prevention services (9%) make up most of the remaining part. Looking at specific country examples, the share of general outpatient care in ambulatory settings is particularly high in Poland and Cyprus, reaching 13% of all health spending. In Germany, Austria, Romania and Luxembourg, spending on general outpatient care is much lower in relative terms, accounting for less than 5% of total health spending (Figure 5.11).

While only accounting for a moderate share of overall health spending, spending on prevention and public health increased significantly in some EU countries with the onset of the COVID-19 crisis (see indicator “Health expenditure by type of good and service”). Yet, even after the strong one-off growth in 2020 – mainly related to COVID-19 public health management, extensive testing to detect the virus, pandemic surveillance and emergency co-ordination, spending on preventive measure still only accounts for around 3% of overall health spending (Figure 5.12). While there is some variation in this proportion across EU countries – ranging from more than 5% in Italy, Finland and Luxembourg to around 1% in the Slovak Republic – it is generally perceived to be insufficient. An important lesson of the COVID-19 pandemic is that the health status of populations needs to be improved to make people more resilient against future health system emergencies. Cross-country analysis has shown that countries where the population was less obese and less likely to smoke generally had better health outcomes during the pandemic (OECD, forthcoming^[1]).

Definition and comparability

The OECD has developed a methodological framework based on the System of Health Accounts to estimate primary health care spending on which the results presented here are based (Mueller and Morgan, 2018^[2]).

The following functions are identified as basic care services: (i) General outpatient curative care (e.g. routine visits to a GP or nurse for acute or chronic treatment); (ii) Dental outpatient curative care (e.g. regular control visits as well as more complex oral treatment); (iii) Home-based curative care (mainly referring to home visits by GPs or nurses); (iv) Preventive care services (e.g. immunisation or health check-ups).

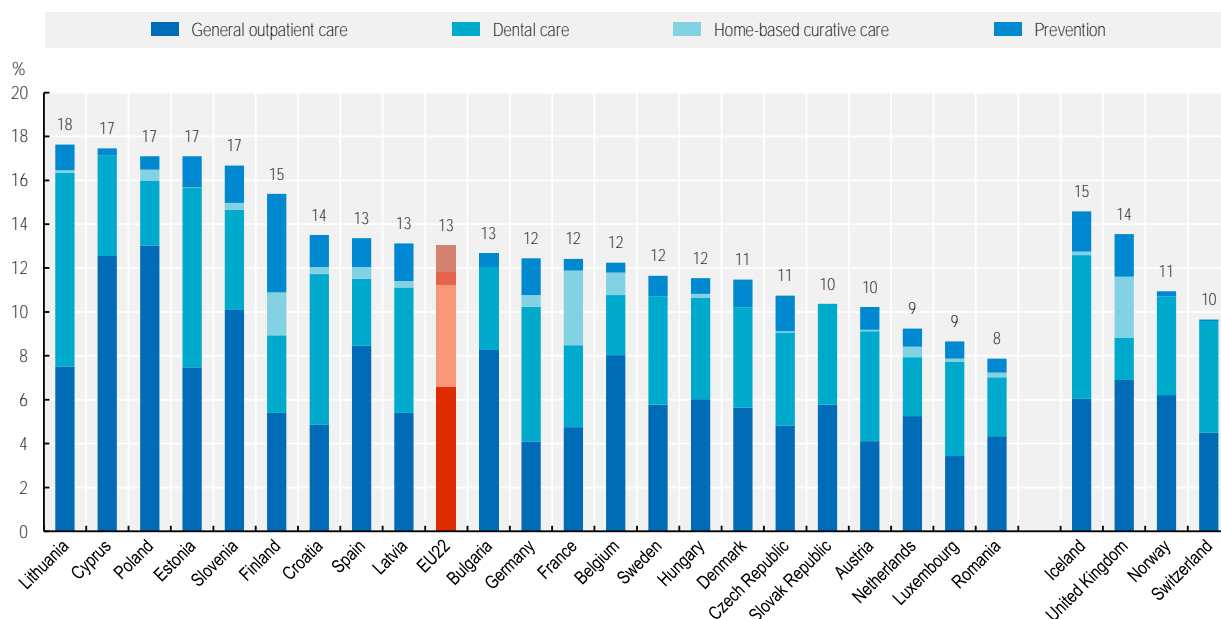
Where basic care services are provided by ambulatory health care providers such as medical practitioners, dentists, ambulatory health care centres and home health care service providers, this may be considered a proxy for primary health care. Yet primary health care is a complex concept and no definitive consensus exists on which services or providers should be included.

Comparability for this indicator is still limited and depends on countries’ capacity and methods used to distinguish between general outpatient and specialist services.

References

- Mueller, M. and D. Morgan (2018), “Deriving preliminary estimates of primary care spending under the SHA 2011 framework”, OECD, Paris, <https://www.oecd.org/health/health-systems/Preliminary-Estimates-of-Primary-Care-Spending-under-SHA-2011-Framework.pdf>. [2]
- OECD (forthcoming), *Ready for the Next Crisis? Investing in Resilient Health Systems*, OECD Health Policy Studies, OECD Publishing, Paris. [1]

Figure 5.11. Spending on primary health care services as share of current health expenditure, 2020

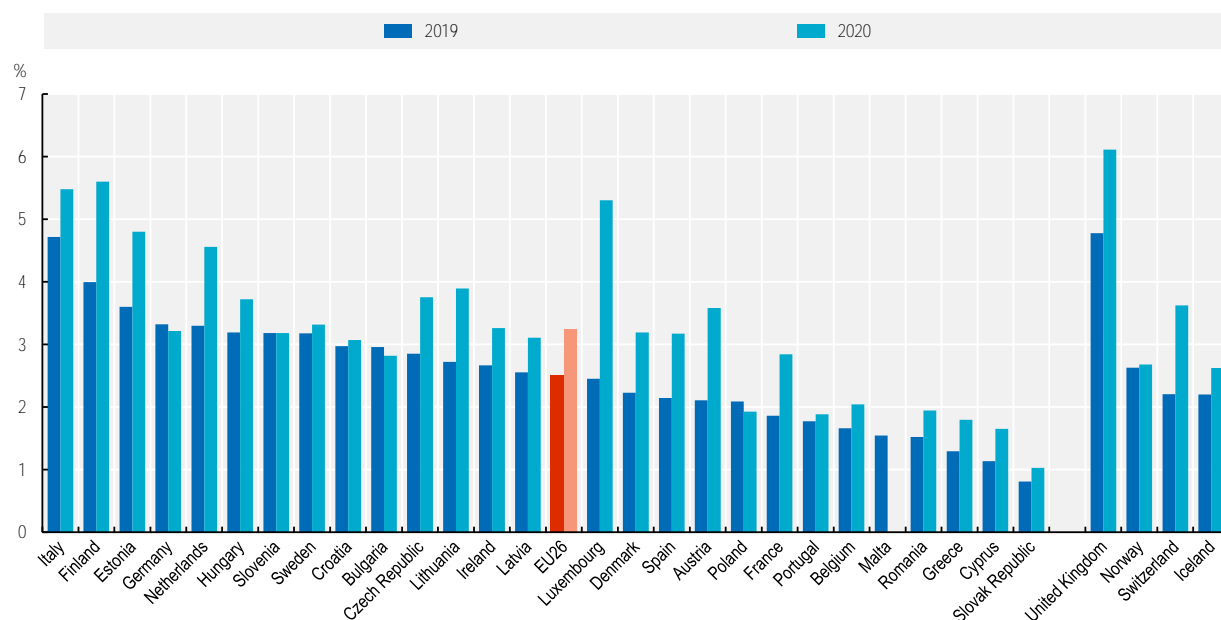


Note: The EU average is unweighted.

Source: OECD Health Statistics 2022.

StatLink  <https://stat.link/dk6iu1>

Figure 5.12. Share of spending on prevention in current health expenditure, 2019-20



Note: The EU average is unweighted.

Source: OECD Health Statistics 2022.

StatLink  <https://stat.link/drk3lz>



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