

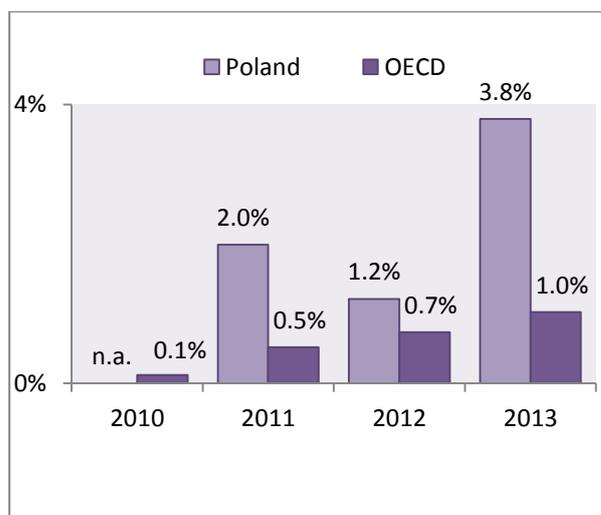
OECD Health Statistics 2015



OECD Health Statistics 2015 is the most comprehensive source of comparable statistics on health and health systems across the 34 OECD countries. Covering the period 1960 to 2014, this interactive database can be used for comparative analyses on health status, risk factors to health, health care resources and utilisation, as well as health expenditure and financing. OECD Health Statistics 2015 is available in OECD.Stat, the statistics portal for all OECD databases.

- ▶ **Growth:** Per capita health spending in Poland continues to outpace the OECD average but remains below growth rates prior to the financial and economic crisis.
- ▶ **Share of GDP:** The share of GDP allocated to health spending (excluding capital expenditure) in Poland was 6.4% in 2013, compared with an OECD average of 8.9%. This was slightly up from 2012 but remains below the high of 6.6% in 2009.
- ▶ **Per capita spending:** Poland spent the equivalent of USD 1530 per person on health in 2013, compared with an OECD average of USD 3453. Public sources accounted for 71% of overall health spending, just below the OECD average.

Figure 1. Annual health spending growth*, 2010-2013



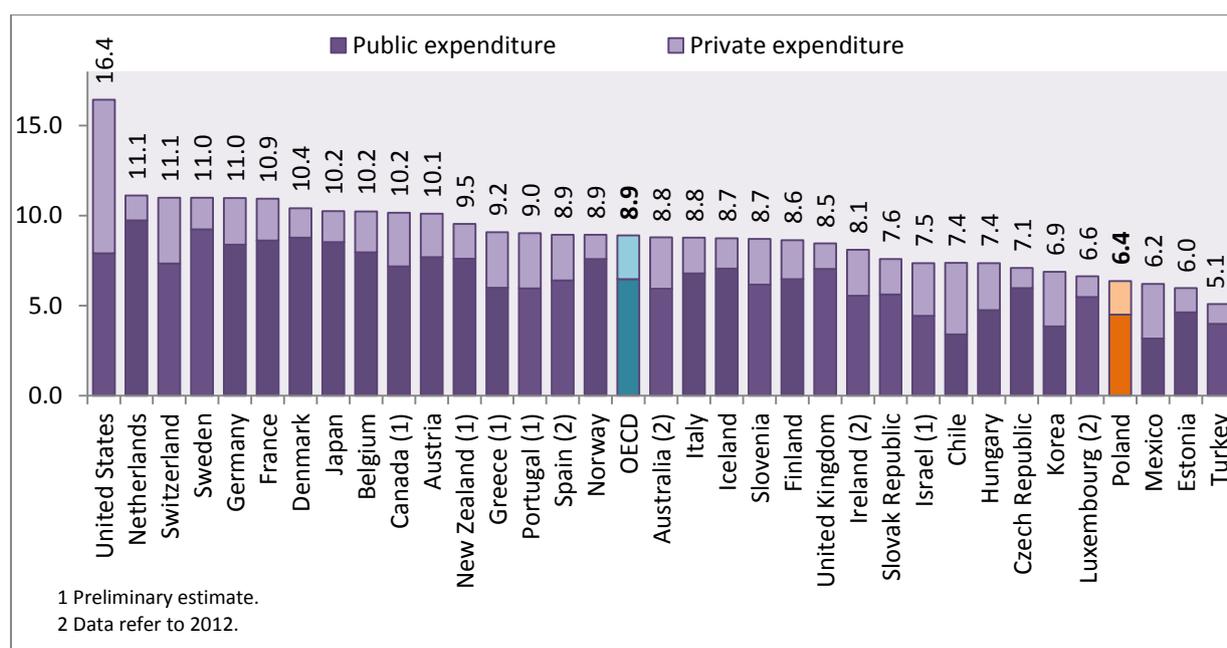
* Per capita spending in real terms.
Source: OECD Health Statistics 2015

Health spending in Poland continues to grow faster than in most OECD countries

In 2013, per capita health spending in Poland has increased by a strong 3.8% in real terms, far above the average growth across OECD countries (1.0%). Despite slowing down during the economic and financial crisis, health spending growth rates in Poland have been much stronger than in most OECD countries over the last decade.

Overall health spending growth has slowed down in recent years in particular by a decline in pharmaceutical spending. With a drop of 7% compared to the previous year, the deepest reduction in expenditure for medicines occurred in 2012. This was partly the result of legal changes introducing maximum margins for wholesalers and retailers and capping pharmaceutical spending within the budget of Social Health Insurance. Spending for inpatient care and outpatient care, on the other hand, has accelerated recently, increasing by around 4% in 2013.

Figure 2. Health spending* as a share of GDP, 2013



* Excluding capital expenditure.
Source: OECD Health Statistics 2015

Health spending as a share of GDP in Poland remains well below the OECD average

Health spending in Poland (excluding investment expenditure in the health sector) was 6.4% of GDP in 2013 (Figure 2), well below the OECD average of 8.9%. This has increased by about 0.5 percentage point since 2004, as a result of high health spending growth over this ten-year period.

The share of the economy allocated to health spending is slightly below that of neighbouring countries such as the Czech Republic (7.1%) and the Slovak Republic (7.6%), but well below the levels of France and Germany (10.9% and 11.0% respectively).

The share of government spending in Poland as a share of total spending on health has remained relatively constant over the last decade at around 71%. This

is slightly below the OECD average of 73%. Among OECD countries, only the United States and Chile report public spending on health below 50%.

The share of out-of-pocket spending has dropped by about 4 percentage points over the last decade and stood at 24% in 2013, still well above the average in OECD countries (19%). The share remains similar to Hungary (28%) and the Slovak Republic (23%) but is above some western European countries such as France (7%) or the United Kingdom (10%).

In per capita terms (adjusted for different price levels using economy-wide purchasing power parities), Poland spent USD 1530 per head in 2013. This compares with an OECD average of USD 3453.

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Further Reading

Focus on health spending:
www.oecd.org/health/health-systems/Focus-Health-Spending-2015.pdf

OECD Health Statistics 2015:
www.oecd.org/health/health-data.htm

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