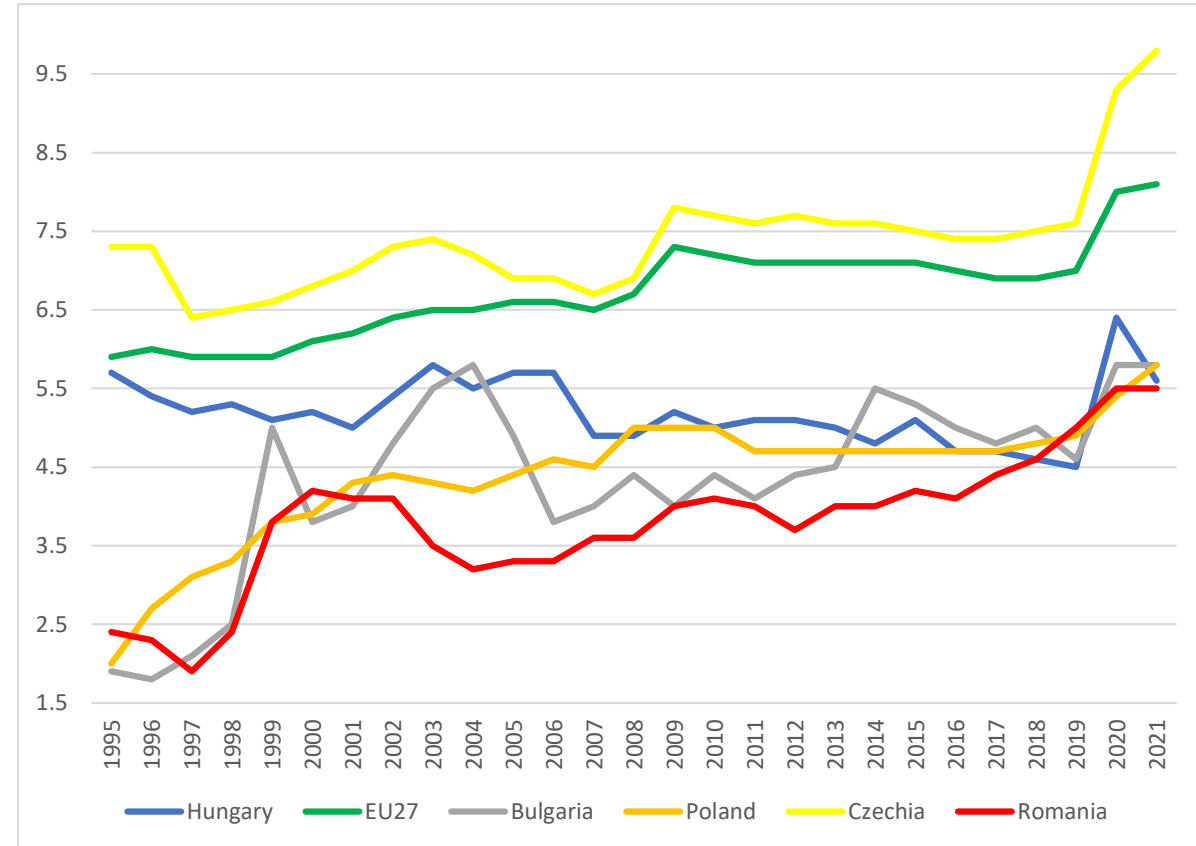
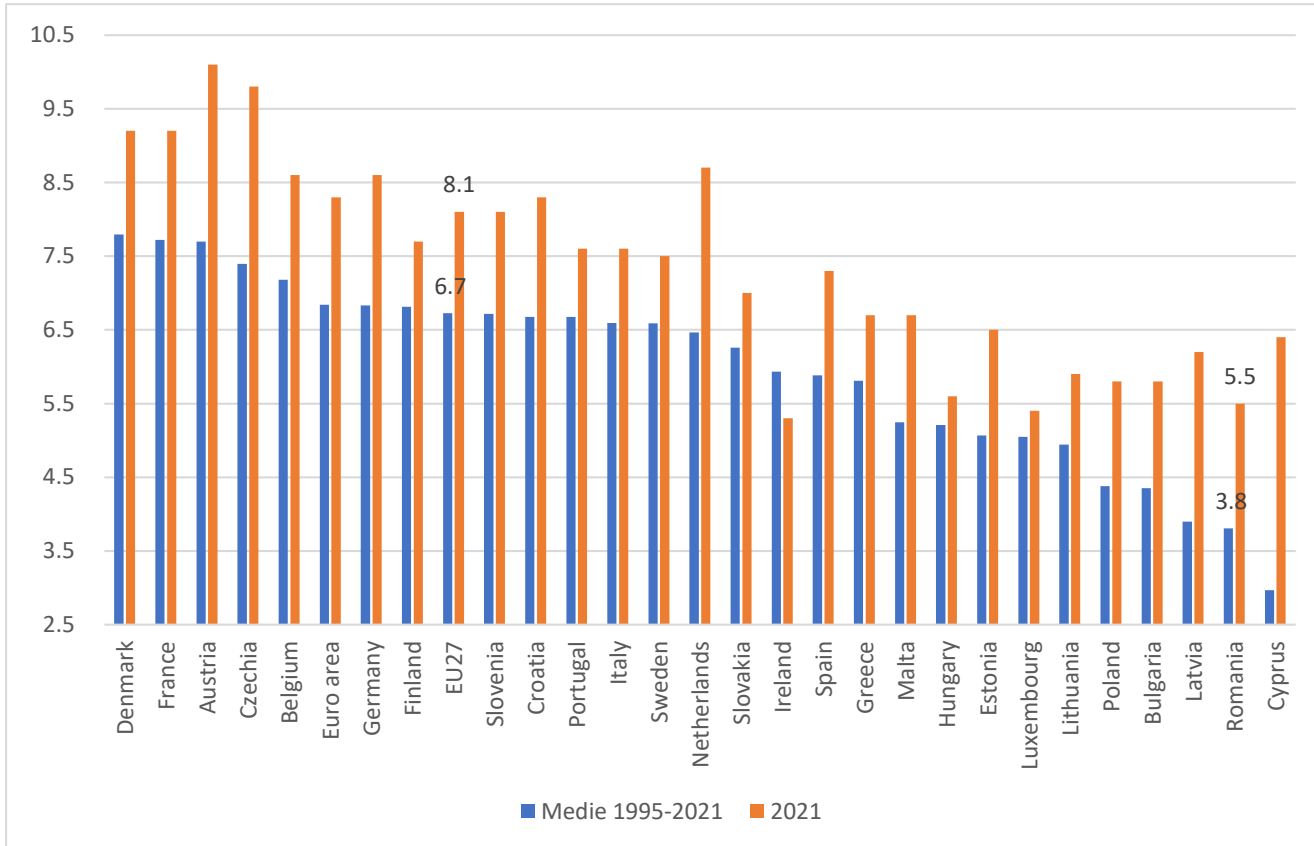


# **Resurse vs rezultate in sanatate – perspectiva economica**

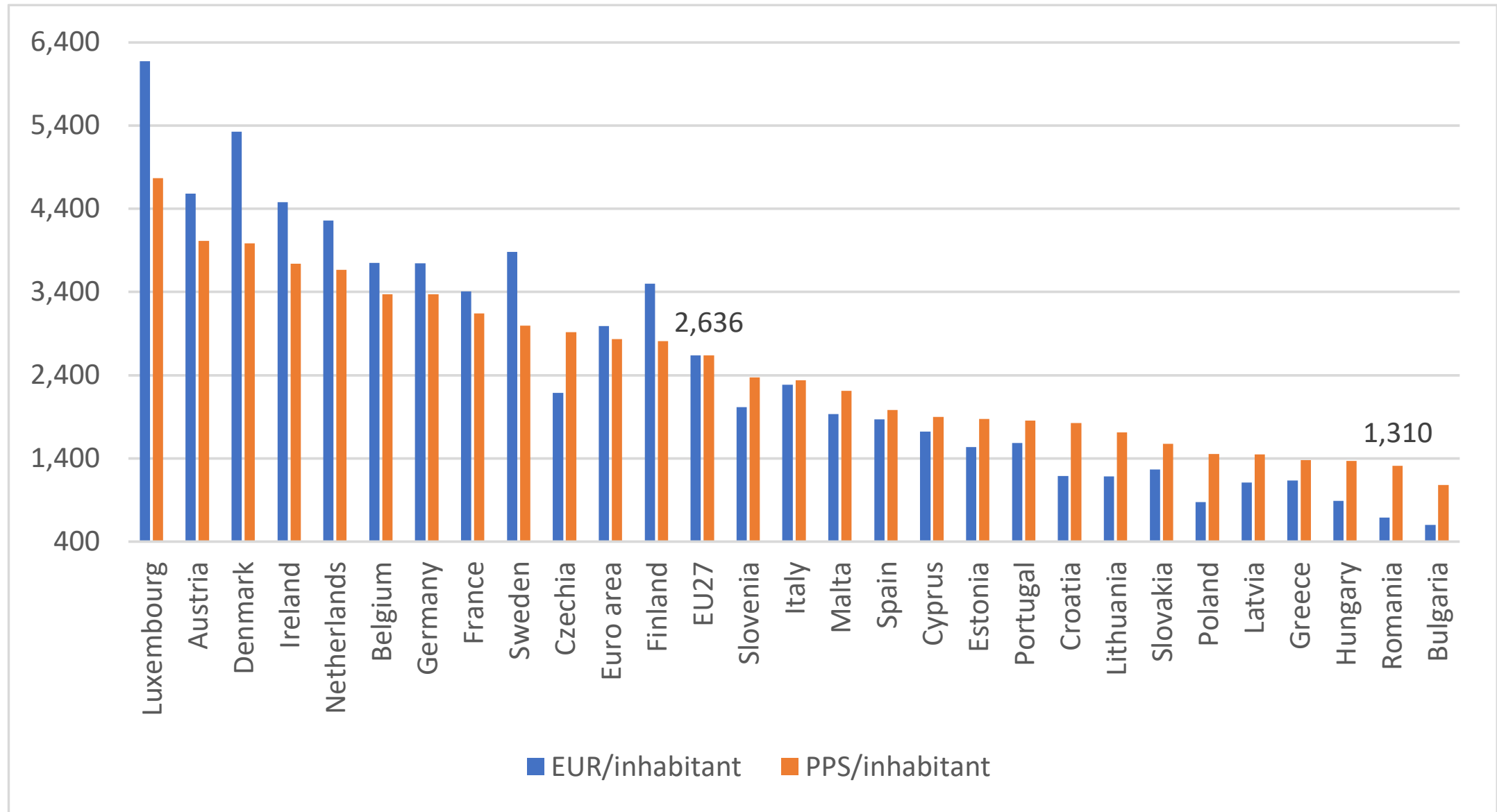
Ionut Dumitru

Iulie 2023

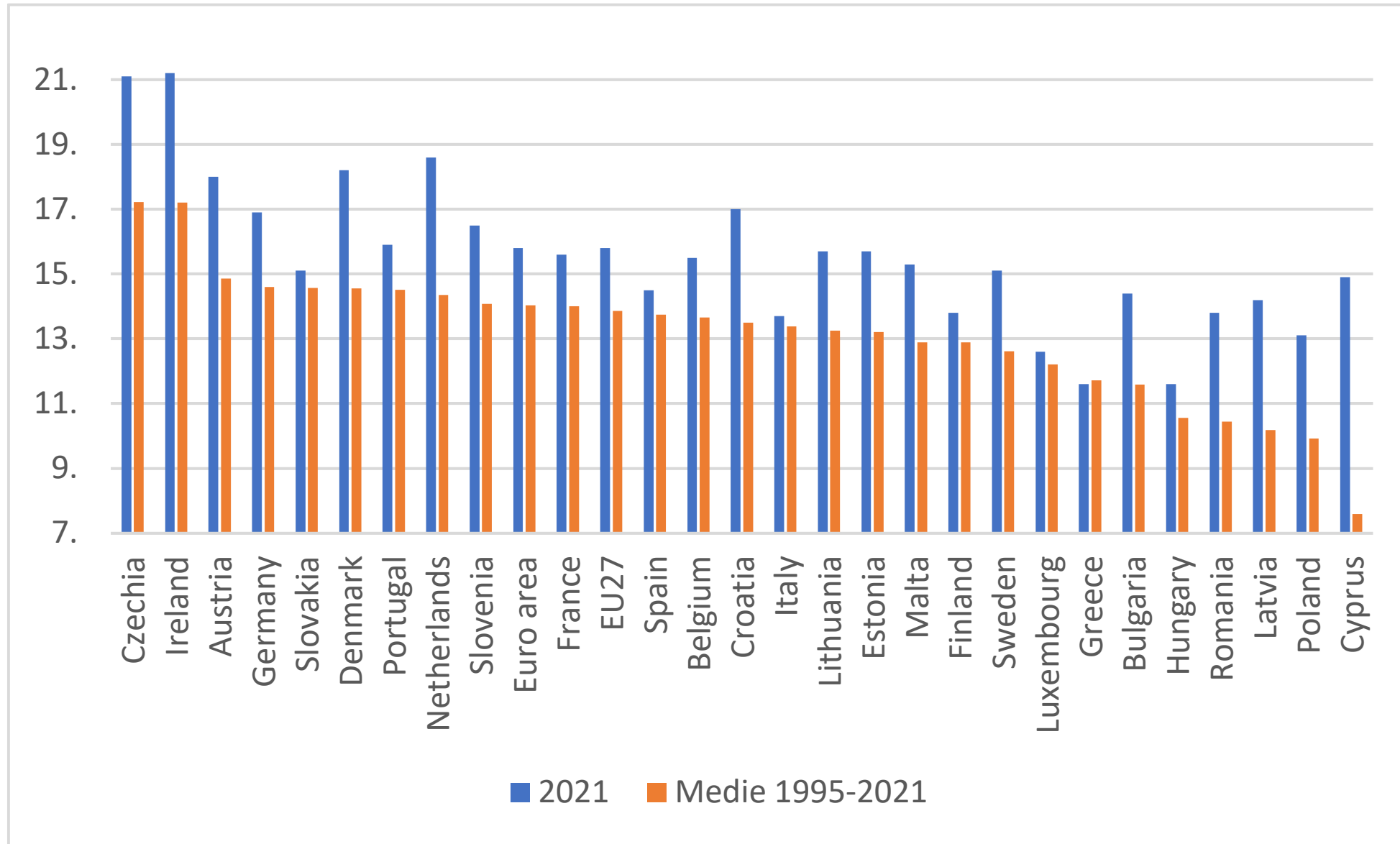
# Cheltuieli publice cu sanatatea, % din PIB



# Cheltuieli publice cu sanatatea (per capita, 2021)



# Cheltuieli publice cu sanatatea, % din total cheltuieli publice

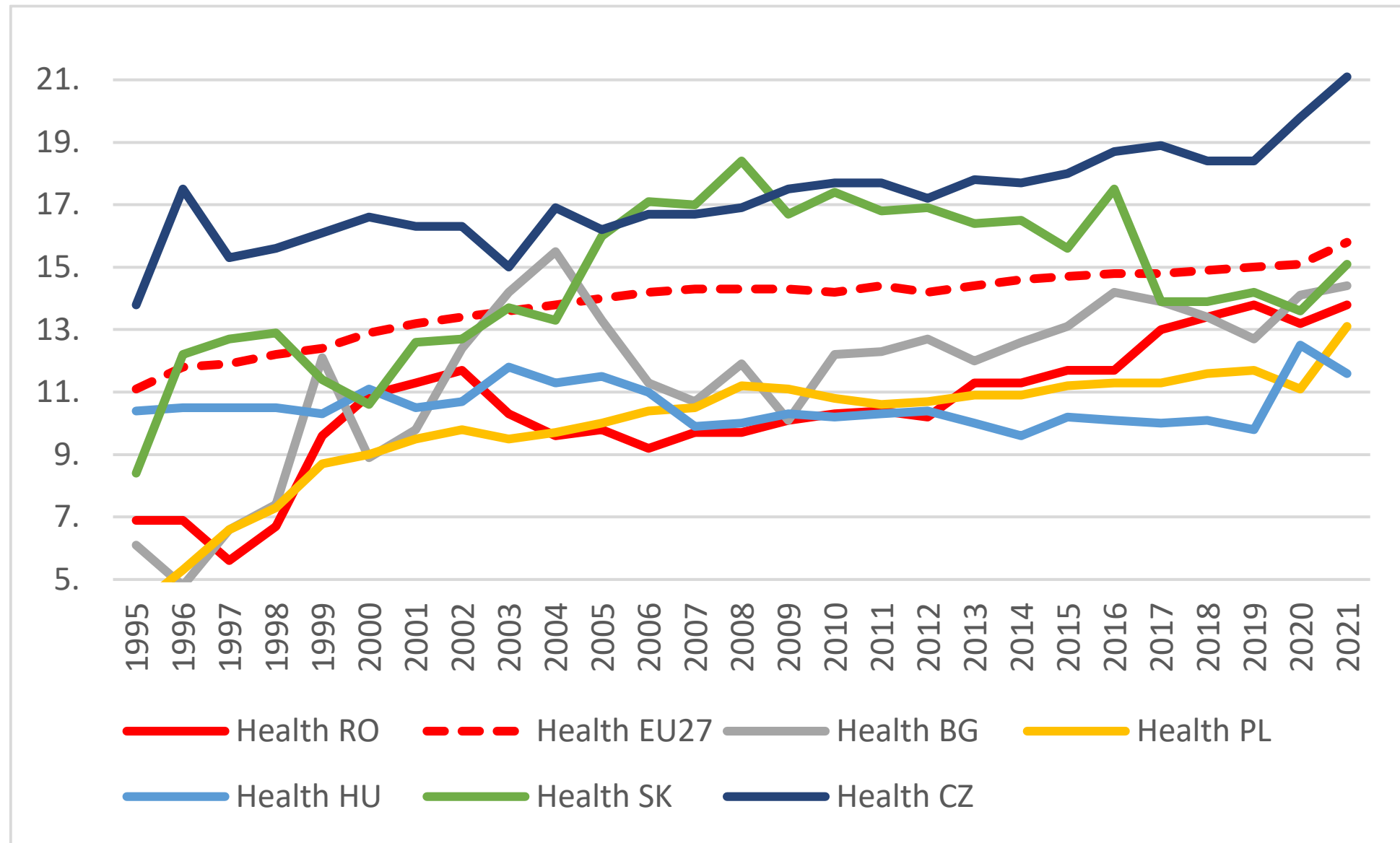


# Cheltuieli publice pe principalele domenii, % din total cheltuieli publice

1995-2021	General public services	Defence	Public order and safety	Economic affairs	Environmental protection	Housing and community amenities	Health	Recreation, culture and religion	Education	Social protection
<b>EU27</b>	<b>15.0</b>	<b>2.7</b>	<b>3.5</b>	<b>9.9</b>	<b>1.6</b>	<b>1.6</b>	<b>13.9</b>	<b>2.4</b>	<b>10.0</b>	<b>39.4</b>
<b>Romania</b>	<b>13.9</b>	<b>4.8</b>	<b>5.4</b>	<b>16.9</b>	<b>1.3</b>	<b>4.1</b>	<b>10.4</b>	<b>2.5</b>	<b>9.6</b>	<b>31.0</b>
Bulgaria	16.6	4.5	6.2	13.3	2.3	2.3	<b>11.6</b>	2.0	10.0	31.2
Czechia	10.4	2.8	4.4	17.3	2.3	2.3	<b>17.2</b>	3.2	10.7	29.4
Hungary	19.9	2.2	4.0	14.1	1.5	1.7	<b>10.6</b>	4.1	10.7	31.3
Poland	13.2	3.9	5.0	11.0	1.4	2.2	<b>9.9</b>	2.5	12.5	38.5
Slovakia	13.4	2.5	6.3	14.1	2.3	1.6	<b>14.6</b>	2.4	9.1	33.7

2021	General public services	Defence	Public order and safety	Economic affairs	Environmental protection	Housing and community amenities	Health	Recreation, culture and religion	Education	Social protection
<b>EU27</b>	<b>11.7</b>	<b>2.5</b>	<b>3.4</b>	<b>12.3</b>	<b>1.6</b>	<b>1.2</b>	<b>15.8</b>	<b>2.3</b>	<b>9.4</b>	<b>39.9</b>
<b>Romania</b>	<b>12.6</b>	<b>4.8</b>	<b>5.8</b>	<b>14.6</b>	<b>1.7</b>	<b>2.8</b>	<b>13.8</b>	<b>2.3</b>	<b>8.1</b>	<b>33.6</b>
Bulgaria	8.6	4.0	6.6	16.5	1.9	2.4	<b>14.4</b>	2.2	10.6	32.9
Czechia	10.0	2.1	4.2	16.2	2.0	1.3	<b>21.1</b>	2.9	10.9	29.3
Hungary	16.6	2.3	3.8	19.0	1.5	1.6	<b>11.6</b>	6.2	10.4	27.1
Poland	9.4	3.6	4.9	13.7	1.3	1.1	<b>13.1</b>	2.7	11.2	39.2
Slovakia	12.8	2.9	4.9	14.7	2.0	1.0	<b>15.1</b>	2.3	9.4	35.0

# Cheltuieli publice cu sanatatea, % din total cheltuieli publice

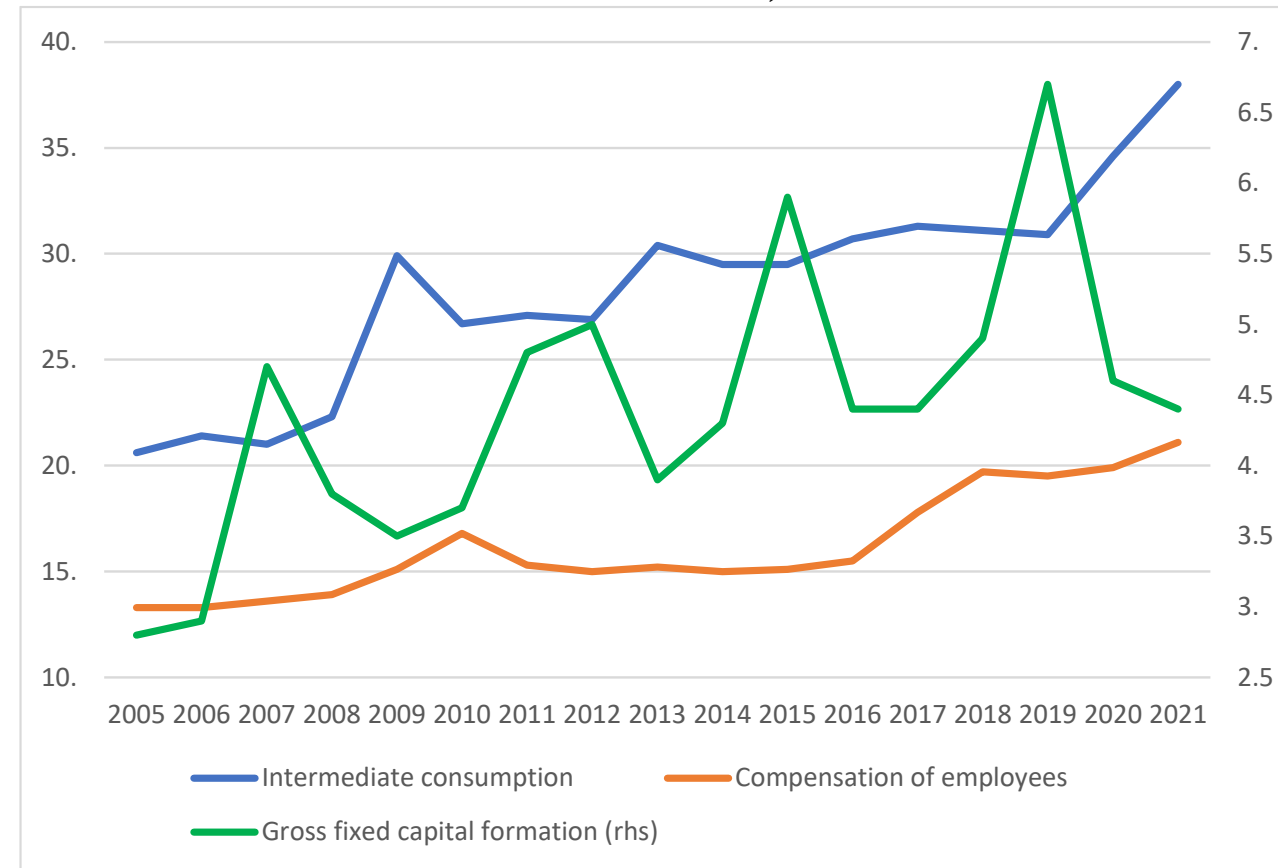


# Cheltuieli publice cu sanatatea - consum intermediar, salarii si investitii (% din total)

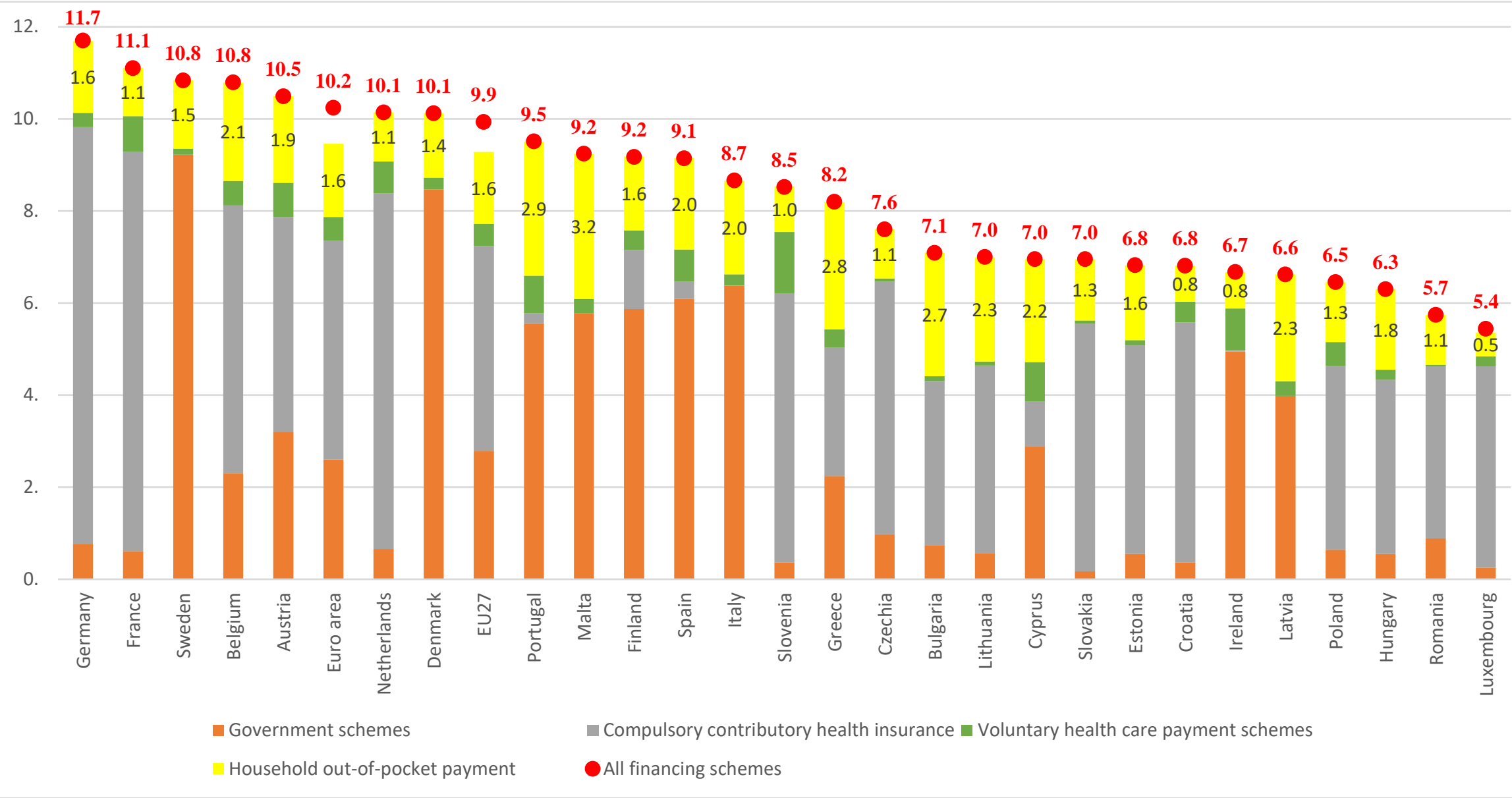
2021	Intermediate consumption	Compensation of employees	Gross fixed capital formation
EU27	24.2	17.1	7.5
Bulgaria	22.0	15.2	7.8
Czechia	25.3	21.9	7.8
Hungary	20.3	17.6	4.2
Poland	31.8	15.7	7.5
Romania	38.0	21.1	4.4
Slovakia	21.1	13.4	7.4

1995-2021	Intermediate consumption	Compensation of employees	Gross fixed capital formation
EU27	17.	15.7	7.1
Bulgaria	19.7	13.	8.2
Czechia	19.9	18.1	7.1
Hungary	19.4	15.1	7.6
Poland	20.	12.2	7.4
Romania	25.6	16.3	6.2
Slovakia	15.6	13.3	7.4

Consum intermediar, salarii si investitii in sectorul sanitar (% din total cheltuieli publice cu sanatatea in Romania)



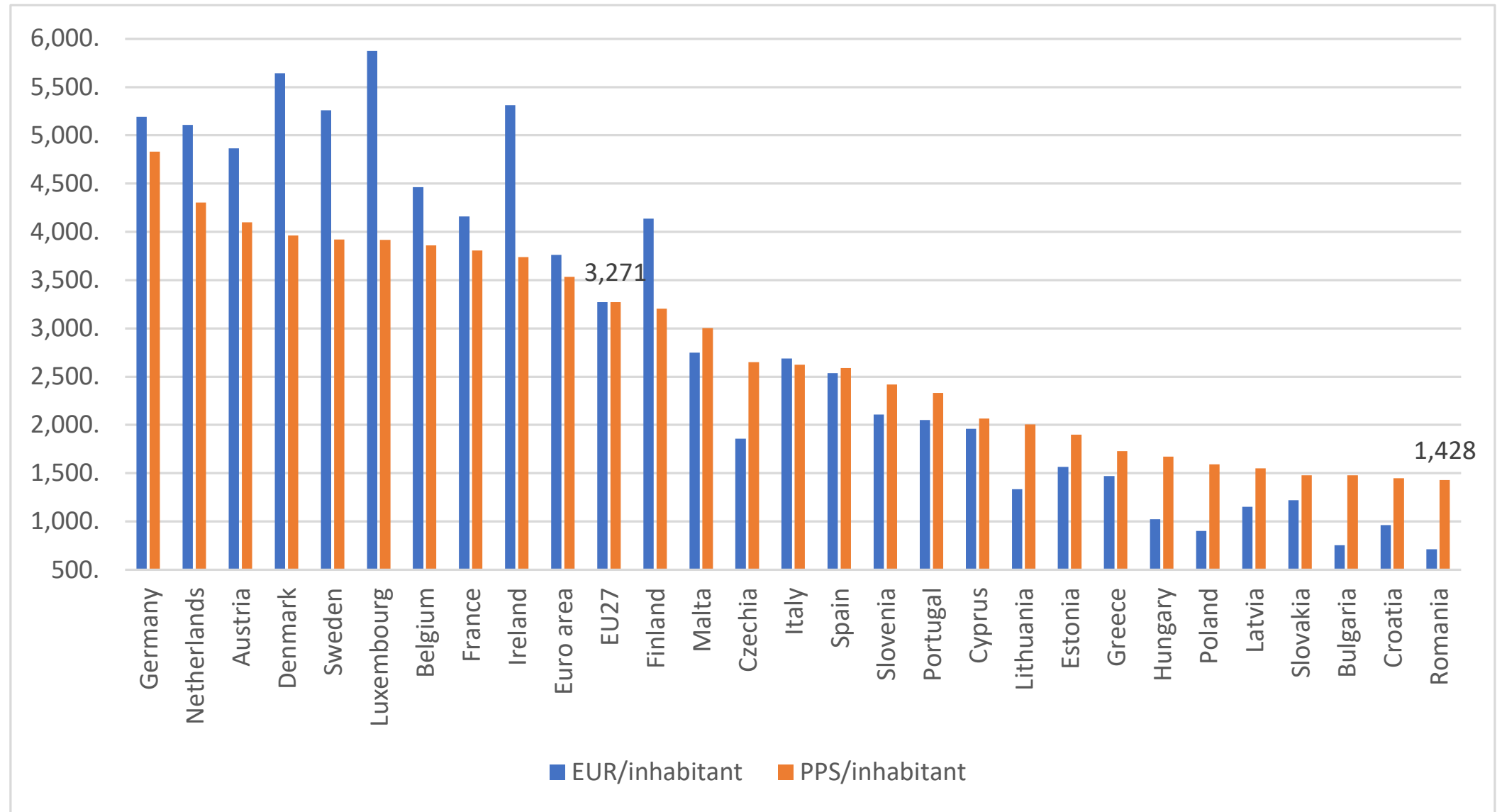
# Cheltuieli totale (publice si private) cu sanatatea (% din PIB, 2019)



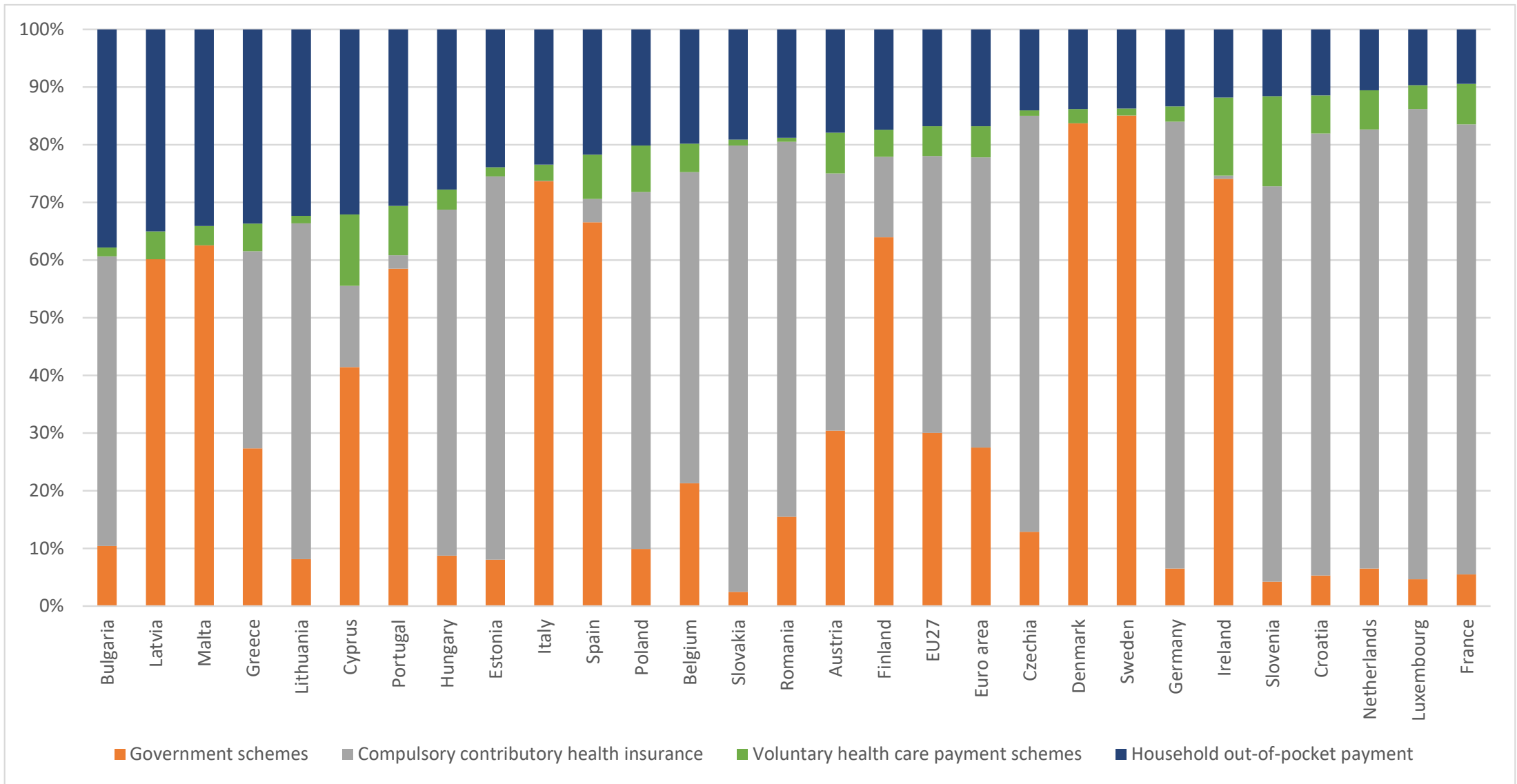
Sursa: Eurostat



# Cheltuieli totale (publice si private) cu sanatatea (per capita, 2020)



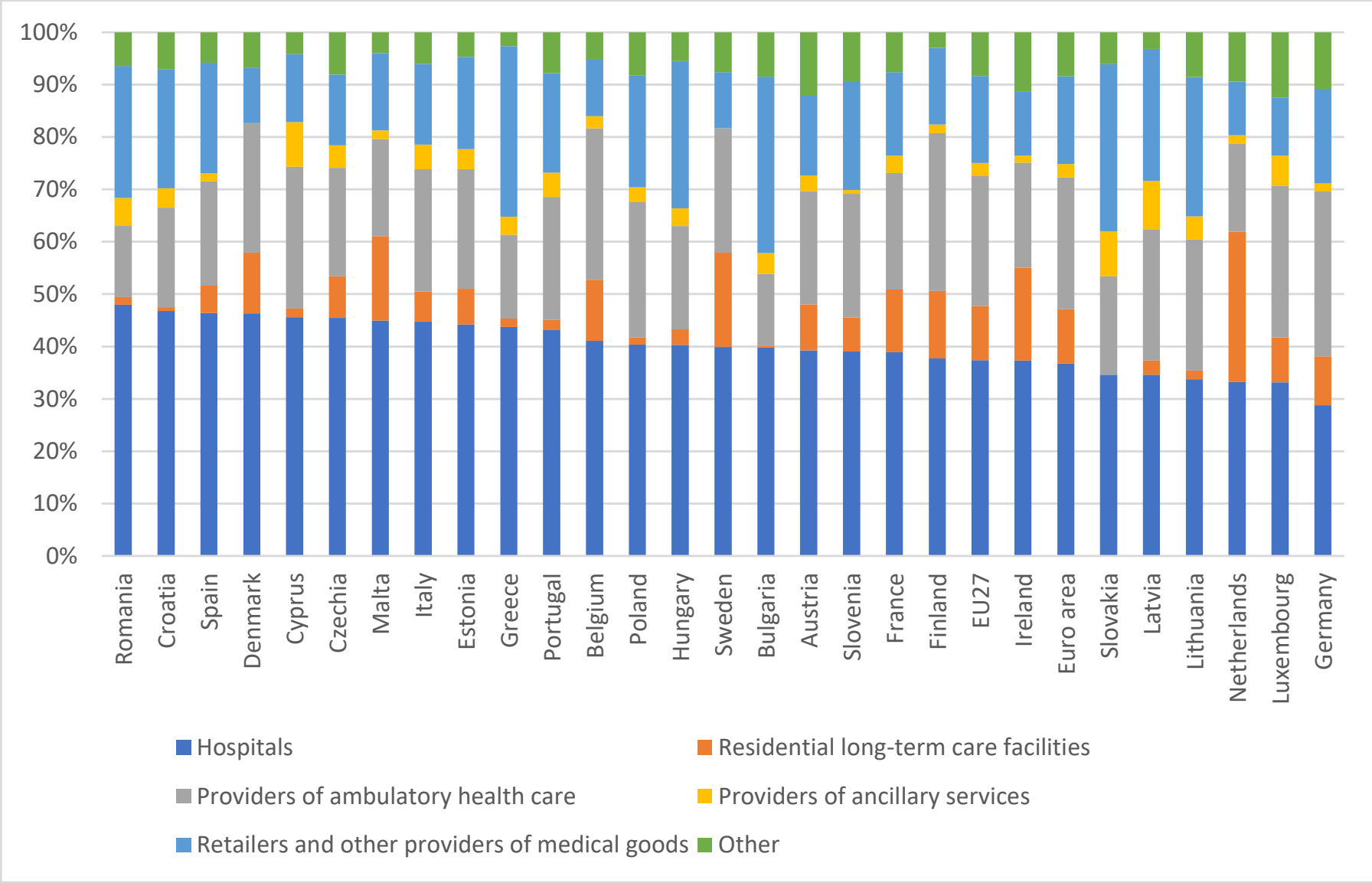
# Cheltuieli totale (publice si private) cu sanatatea pe surse de finantare (% din total, 2019)



# Cheltuieli totale (publice si private) cu sanatatea - Romania vs EU27 (% din PIB)

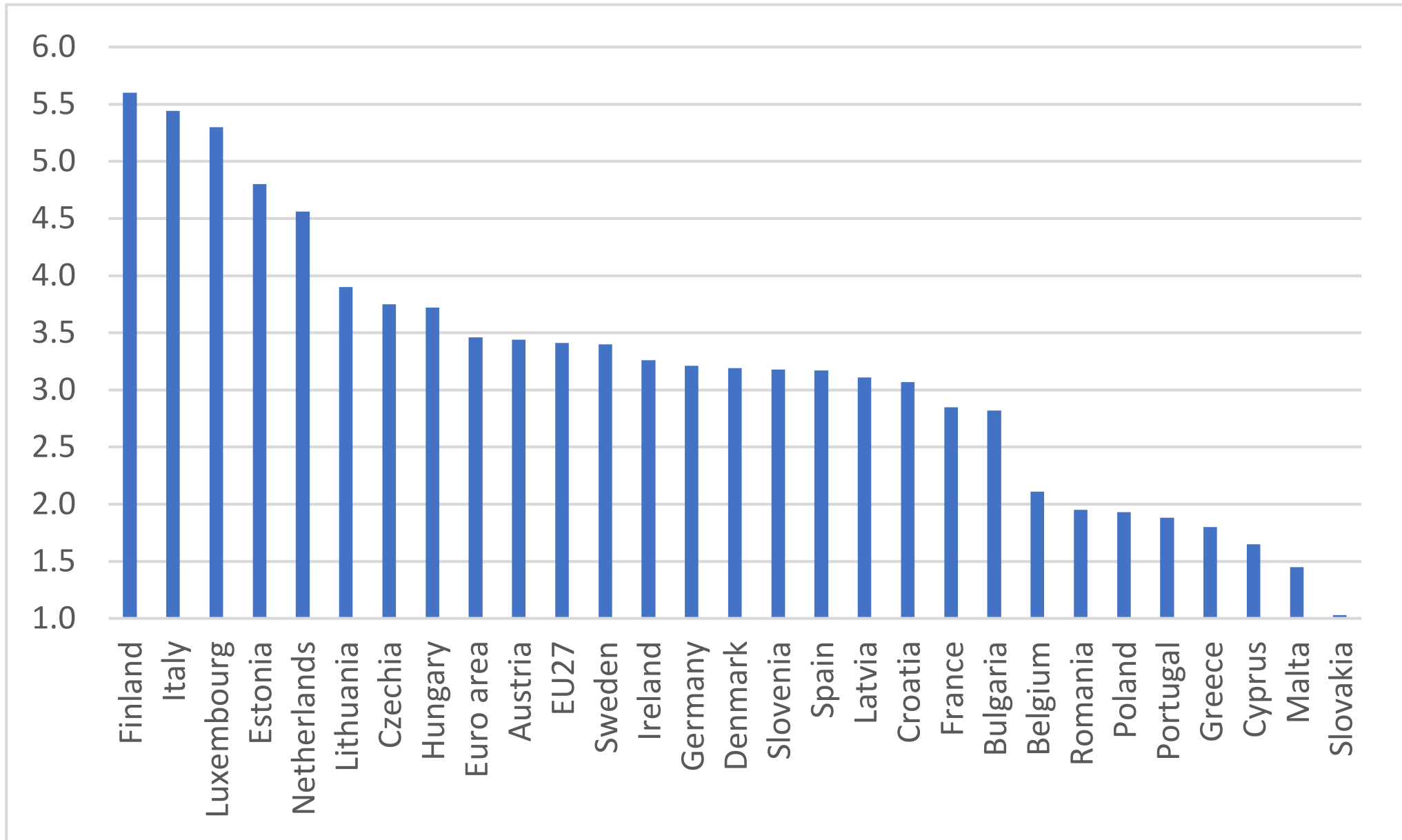
	ROMANIA				EU27			
	All financing schemes	Voluntary health care payment schemes	Household out-of-pocket payment	Government and compulsory schemes	All financing schemes	Voluntary health care payment schemes	Household out-of-pocket payment	Government and compulsory schemes
2011	4.7	0.02	1.1	3.5				
2012	4.7	0.03	1.1	3.6				
2013	5.2	0.03	1.1	4.1				
2014	5.0	0.03	1.0	4.0	10.0	0.49	1.6	7.9
2015	5.0	0.03	1.1	3.9	10.0	0.48	1.6	7.9
2016	5.0	0.05	1.0	3.9	10.0	0.48	1.6	7.9
2017	5.2	0.04	1.1	4.1	9.9	0.48	1.6	7.8
2018	5.6	0.05	1.1	4.4	9.9	0.48	1.6	7.9
2019	5.7	0.04	1.1	4.6	9.9	0.48	1.6	7.9
2020	6.3	0.04	1.2	5.0	10.9	0.48	1.6	8.8

# Cheltuielile cu sanatatea dupa furnizorul de servicii (2020, % din total)

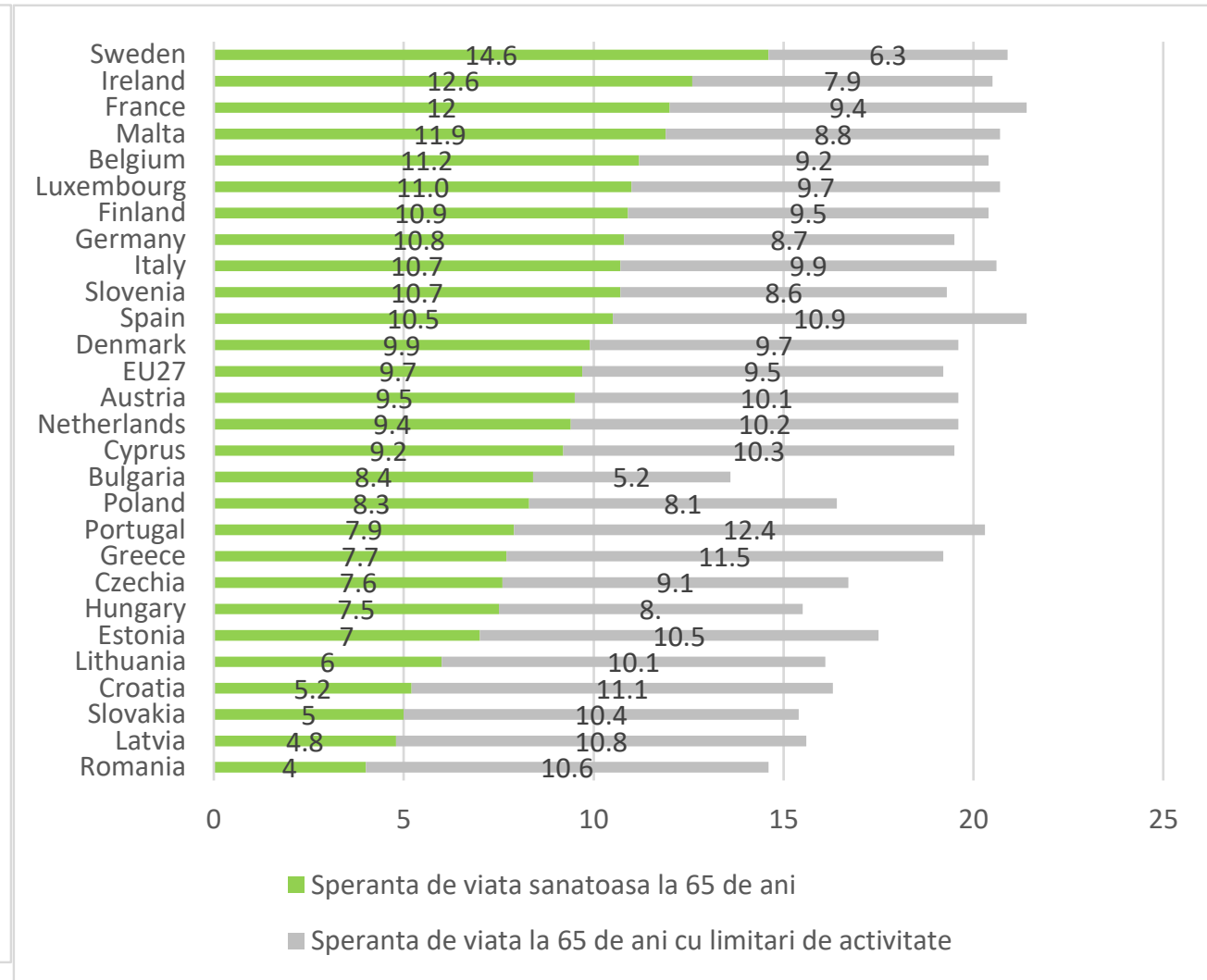
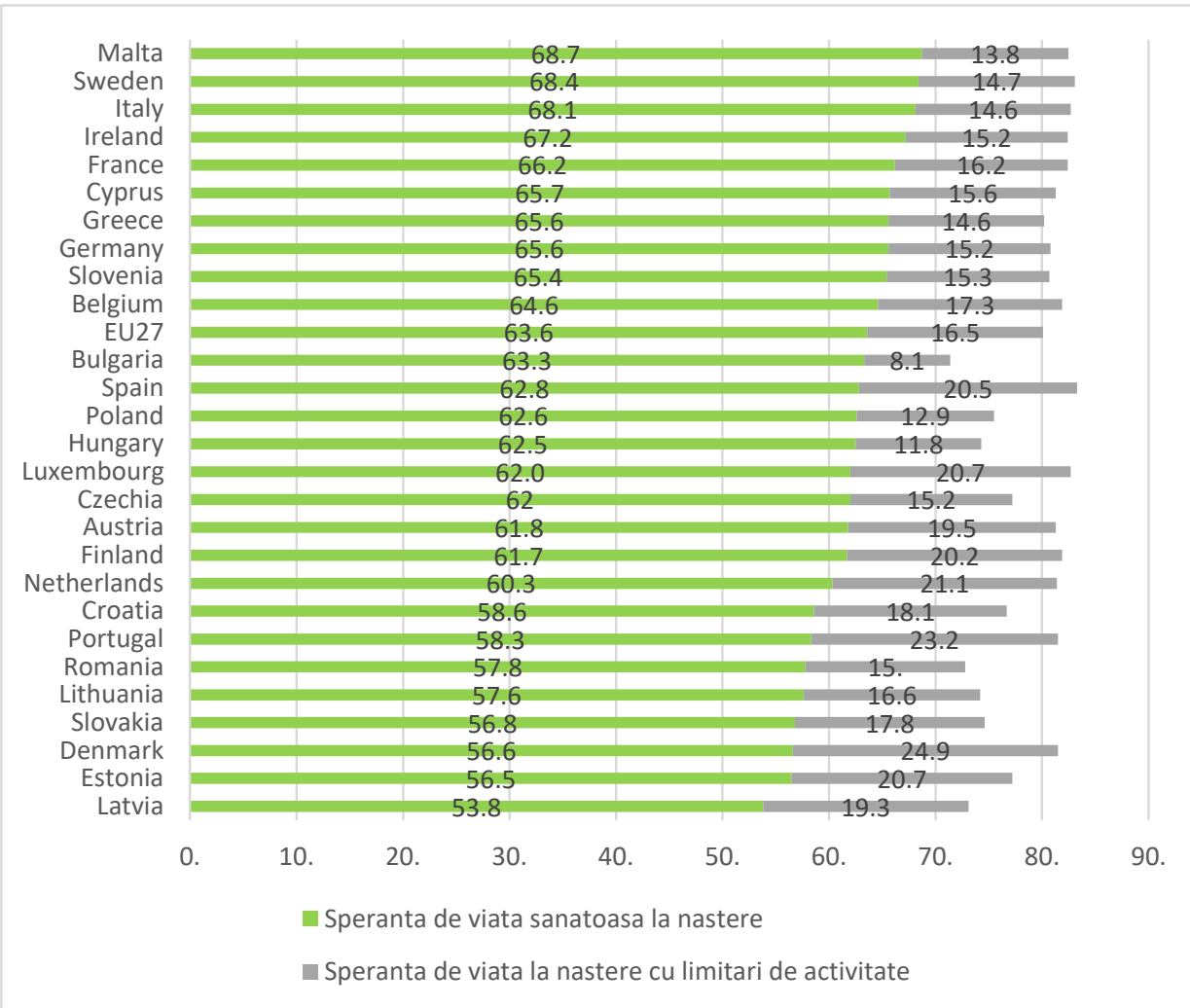


Sursa: Eurostat

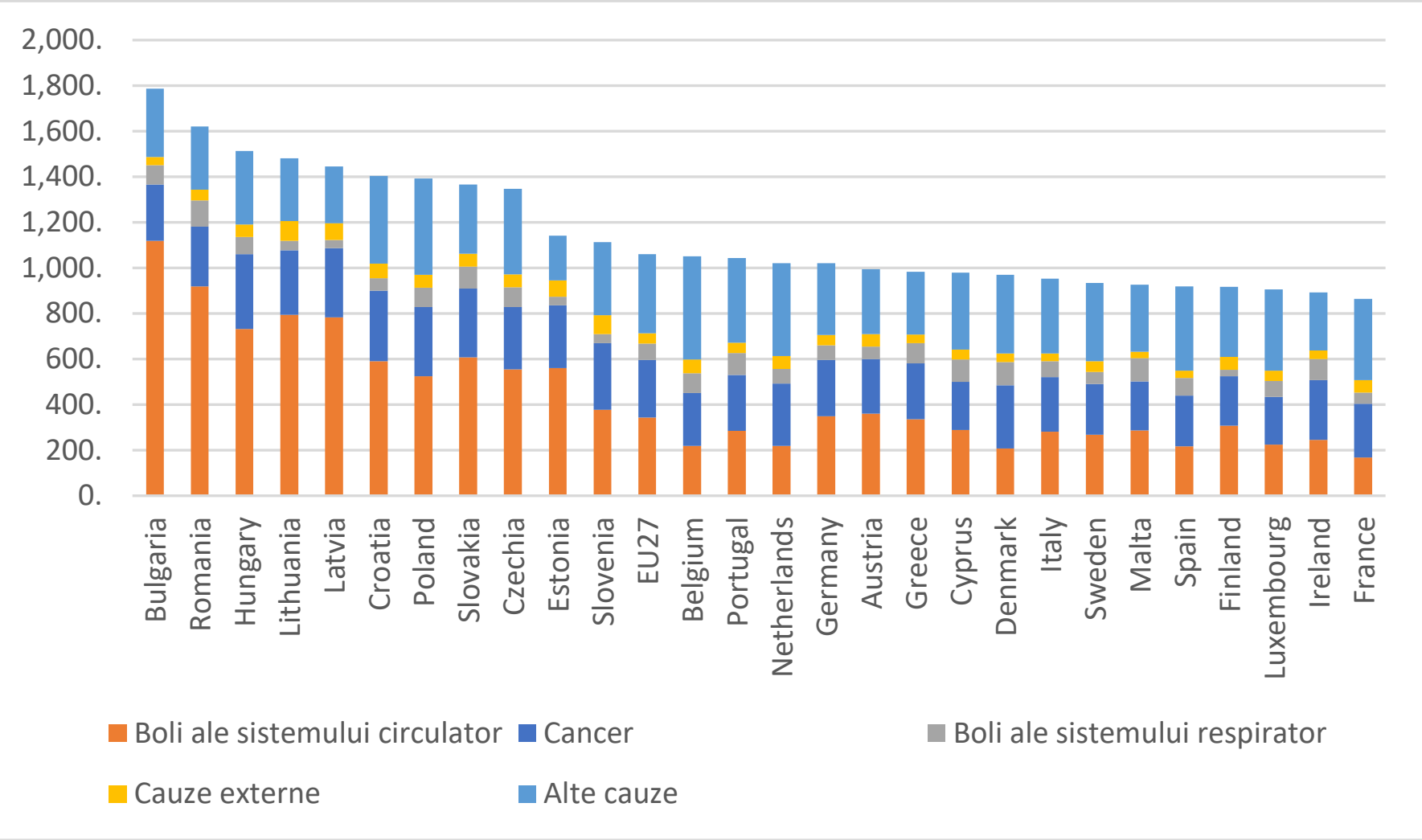
# Ponderea cheltuielilor cu preventia in total cheltuieli cu sanatatea, 2020



# Speranta de viata sanatoasa, ani, 2021

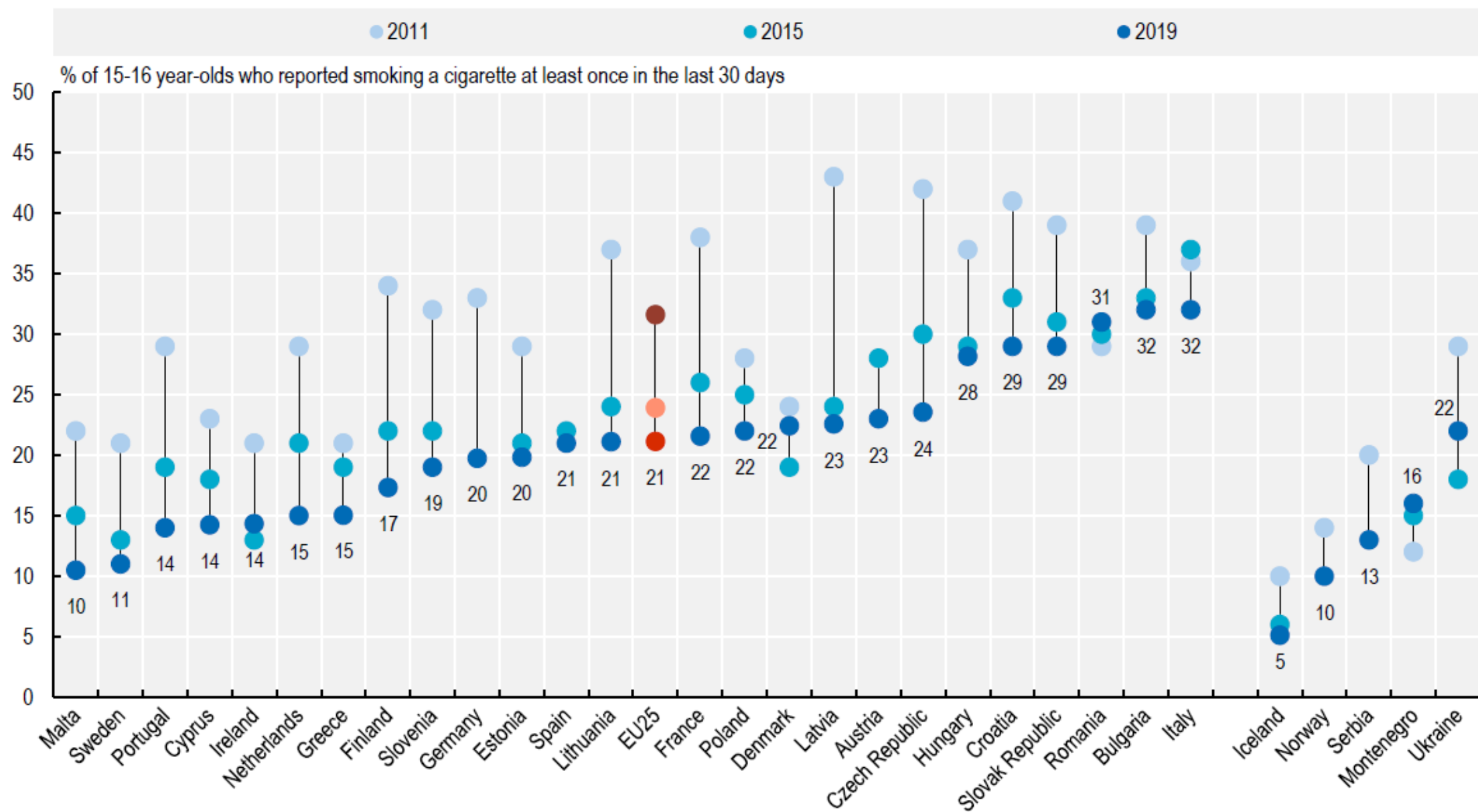


# Principalele cauze de mortalitate (standardizate la 100000 de locuitori)



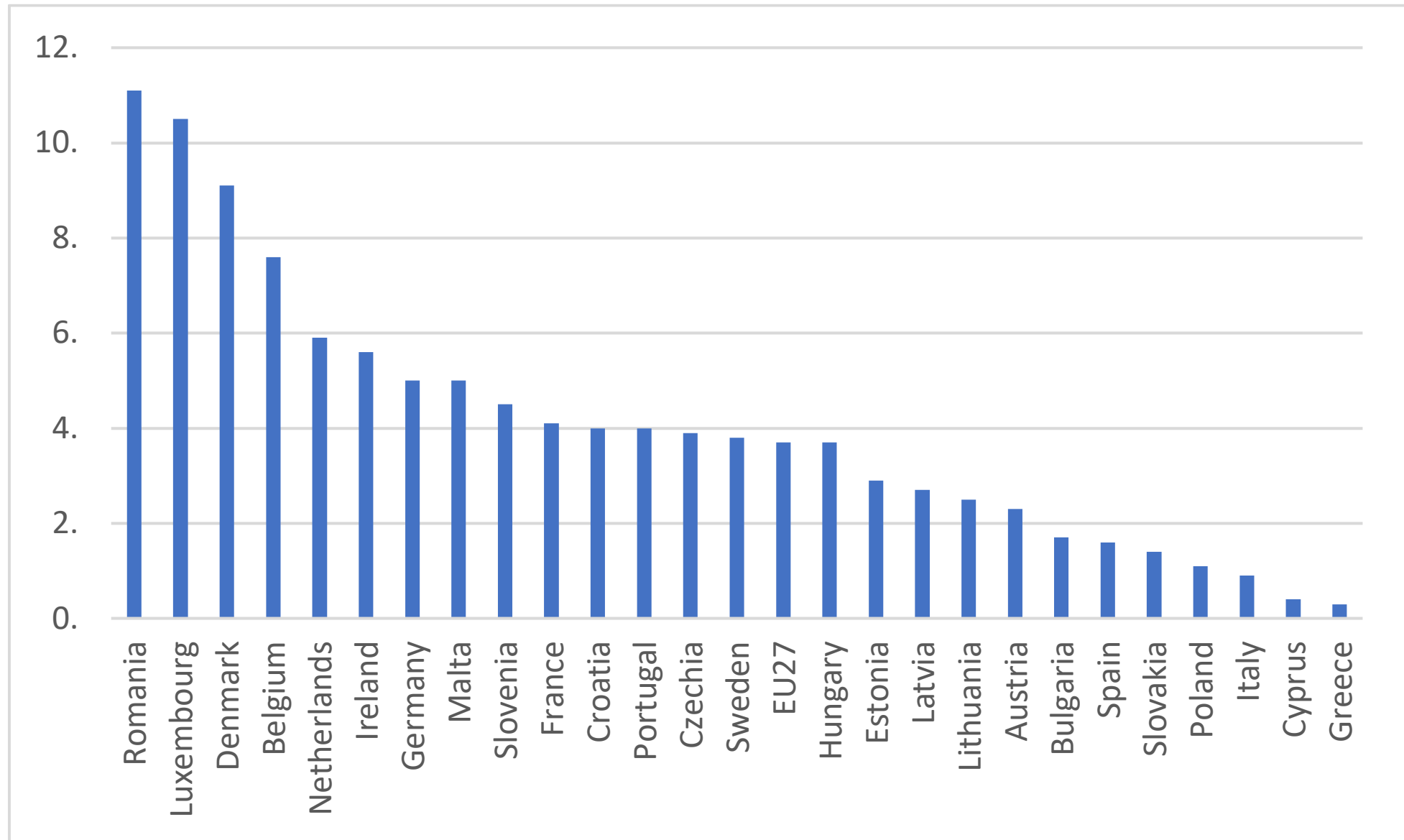
Sursa: Eurostat

Figure 4.1. Tobacco smoking rates among 15-16 year-olds, 2011, 2015 and 2019

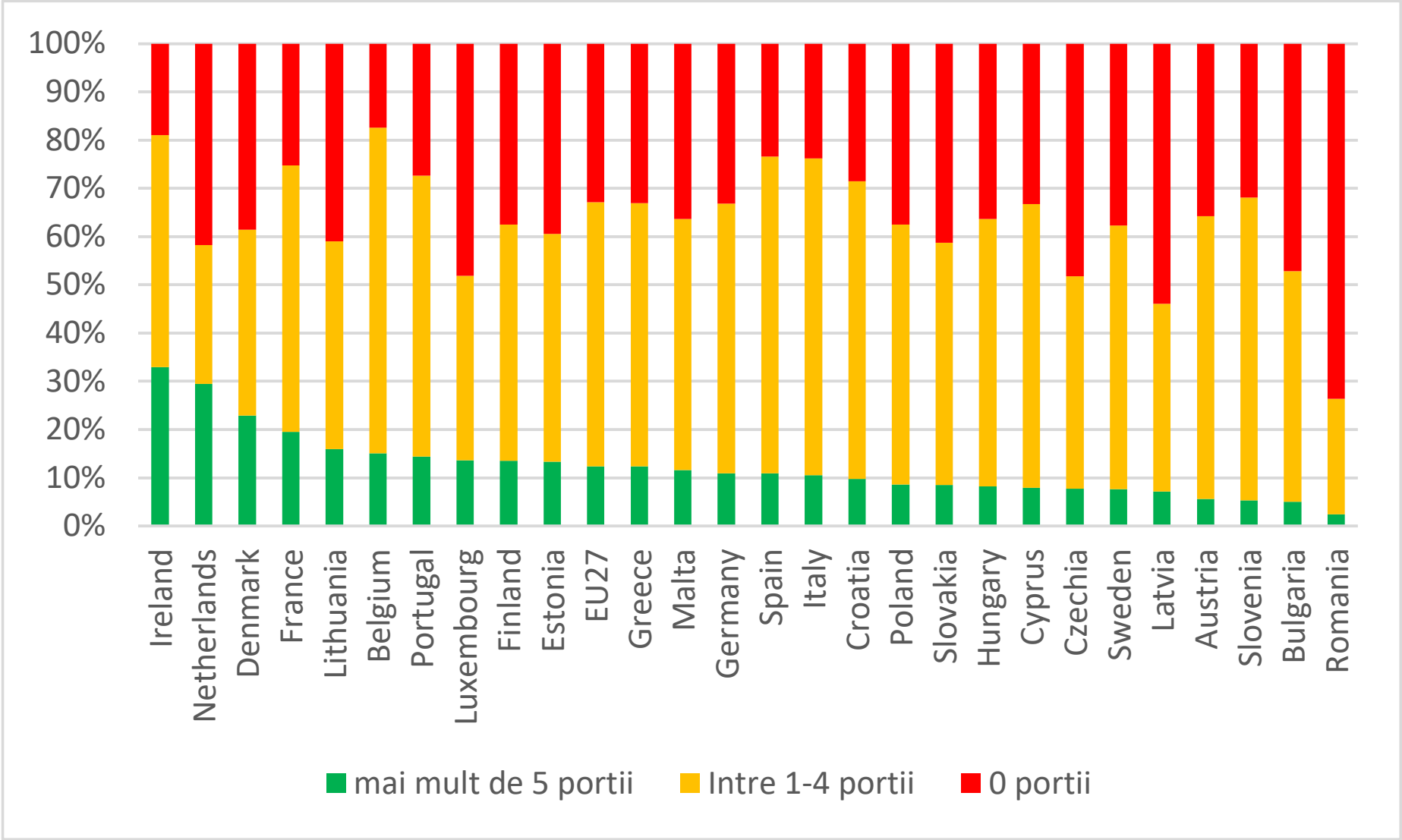




# Frequency of heavy episodic drinking at least once a week, 2019

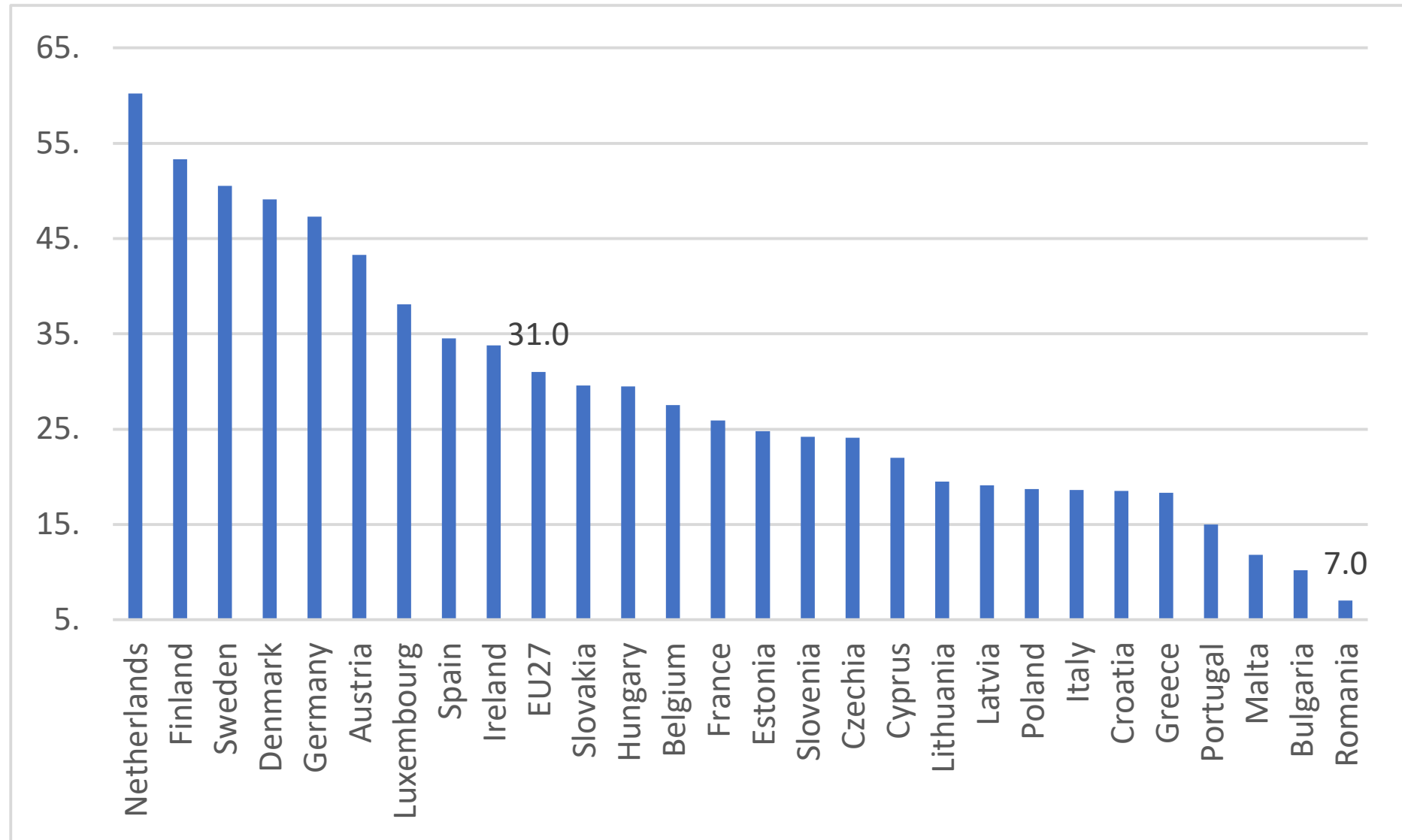


# Ponderea populatiei care consuma fructe si legume (% din total, 2019)

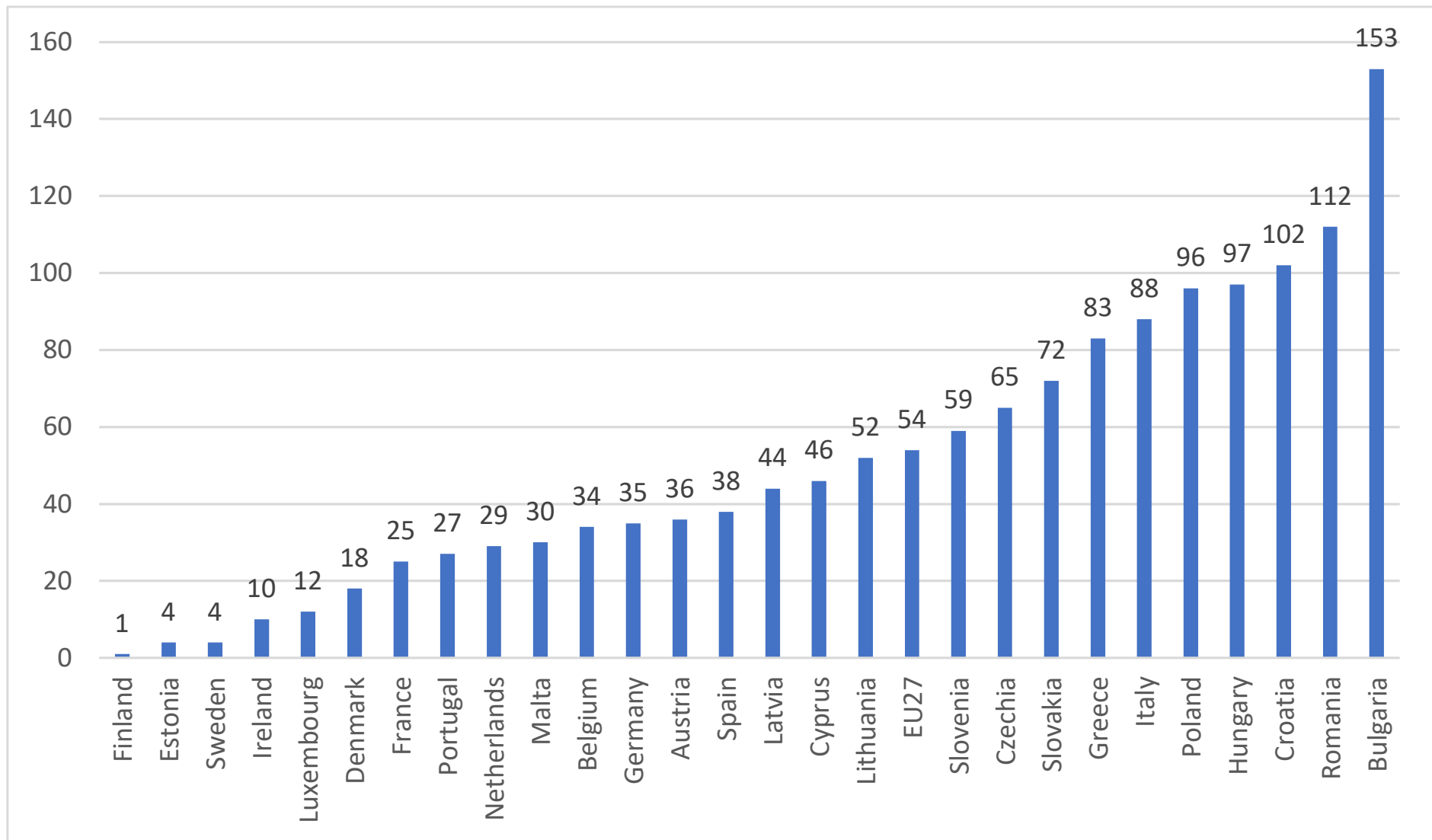


Sursa: Eurostat

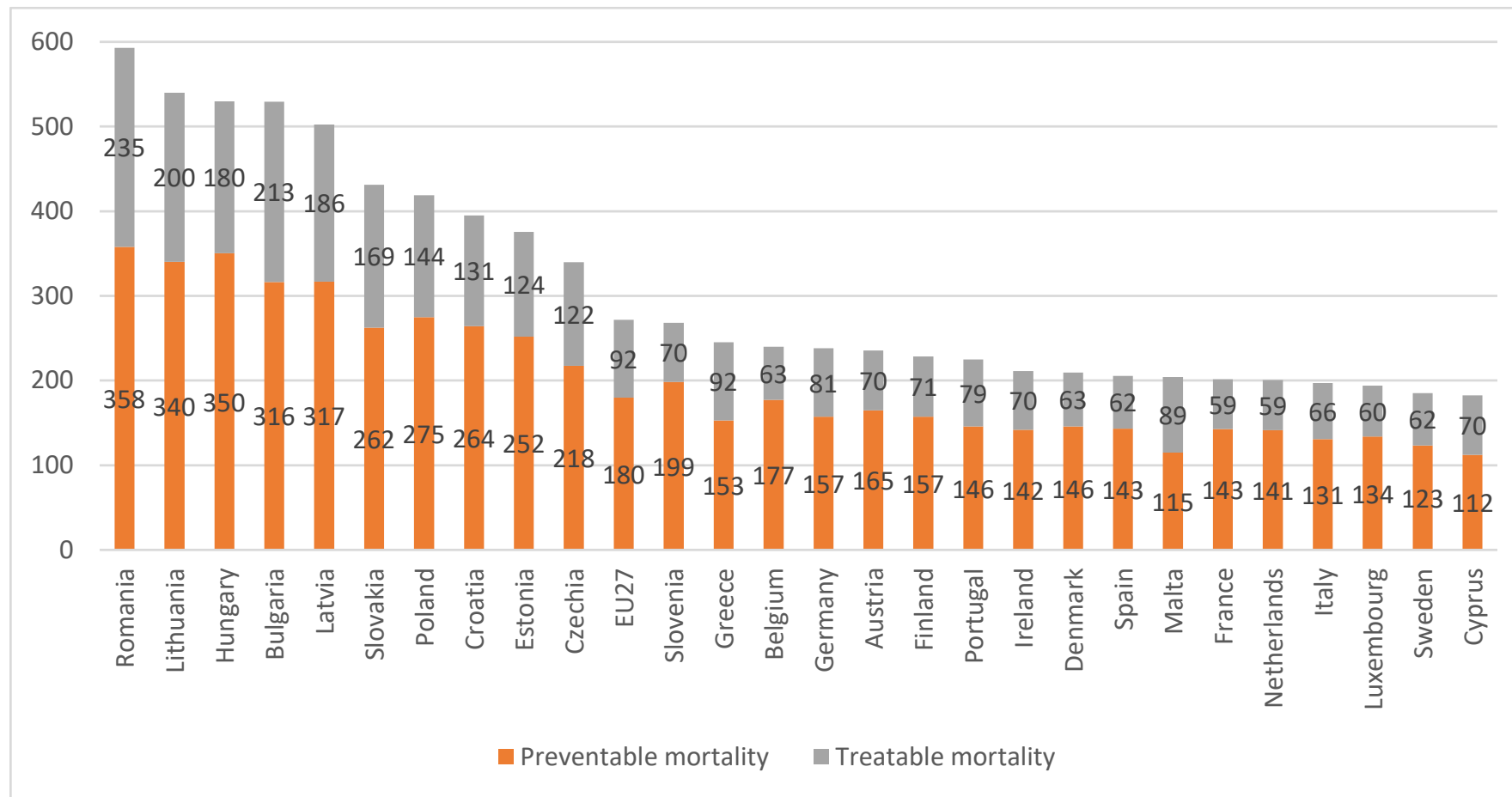
# Pondereaza populației care face exerciții fizice (aerobic), 2019



# Premature deaths due to air pollution PM2.5, 2019, rate per 100000 population

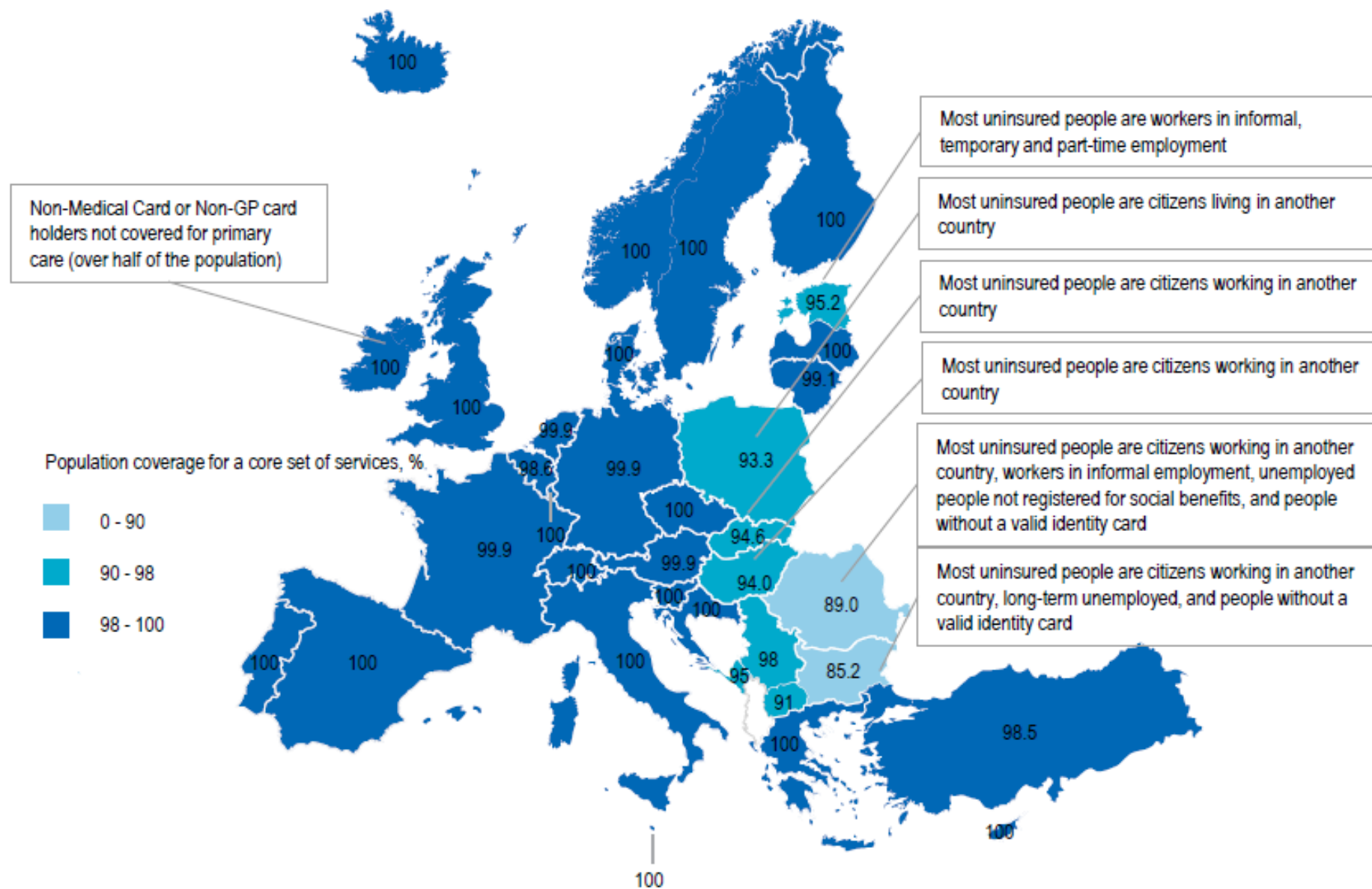


# 1 din 3 decese ar putea fi prevenite sau tratate in Romania (2020, cifre la 100000 populatie)



107,392; 64,826; 42,565. Total 298258

Figure 7.4. Population coverage for a core set of services, 2020 (or nearest year)



Note: Data include public coverage and primary voluntary health insurance coverage.

Source: OECD Health Statistics 2022; European Observatory Health Systems in Transition (HiT) Series for non-OECD countries.

# Out of pocket spending on health as share of final households consumption

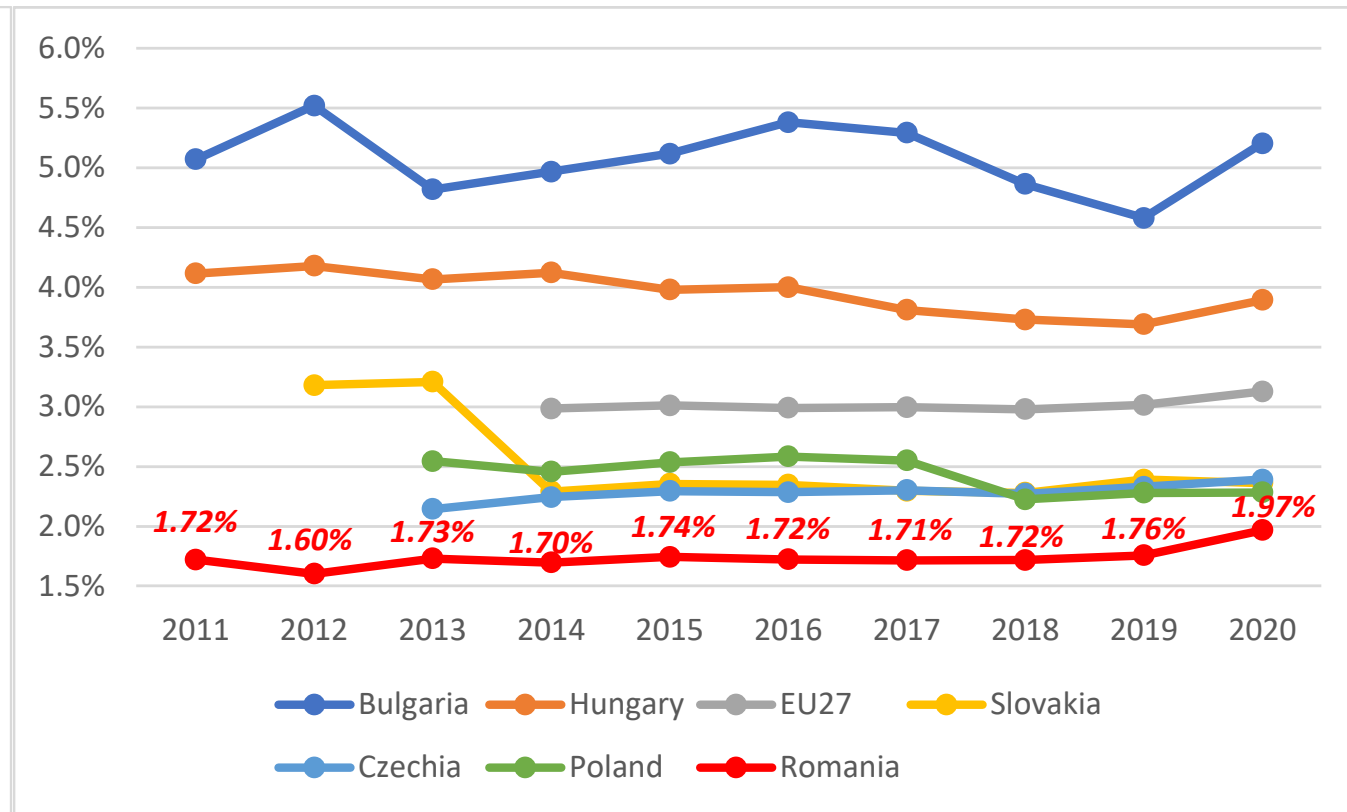
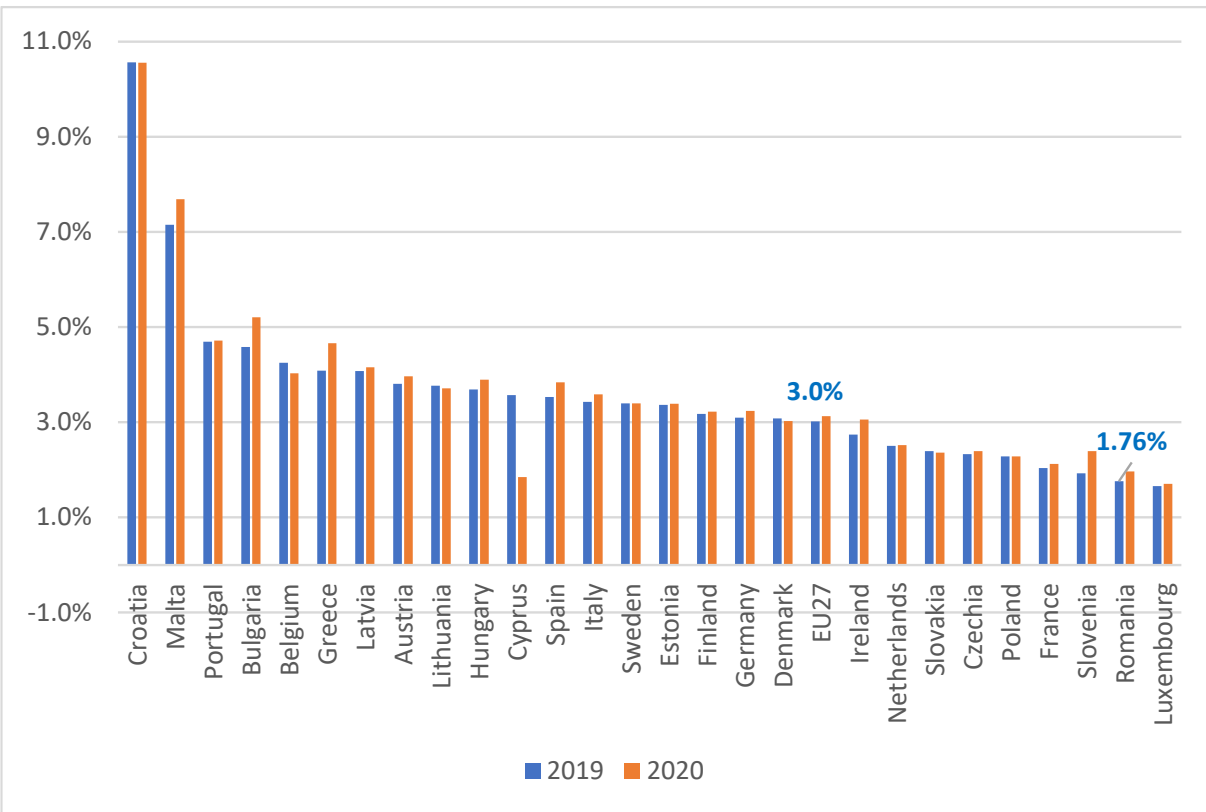
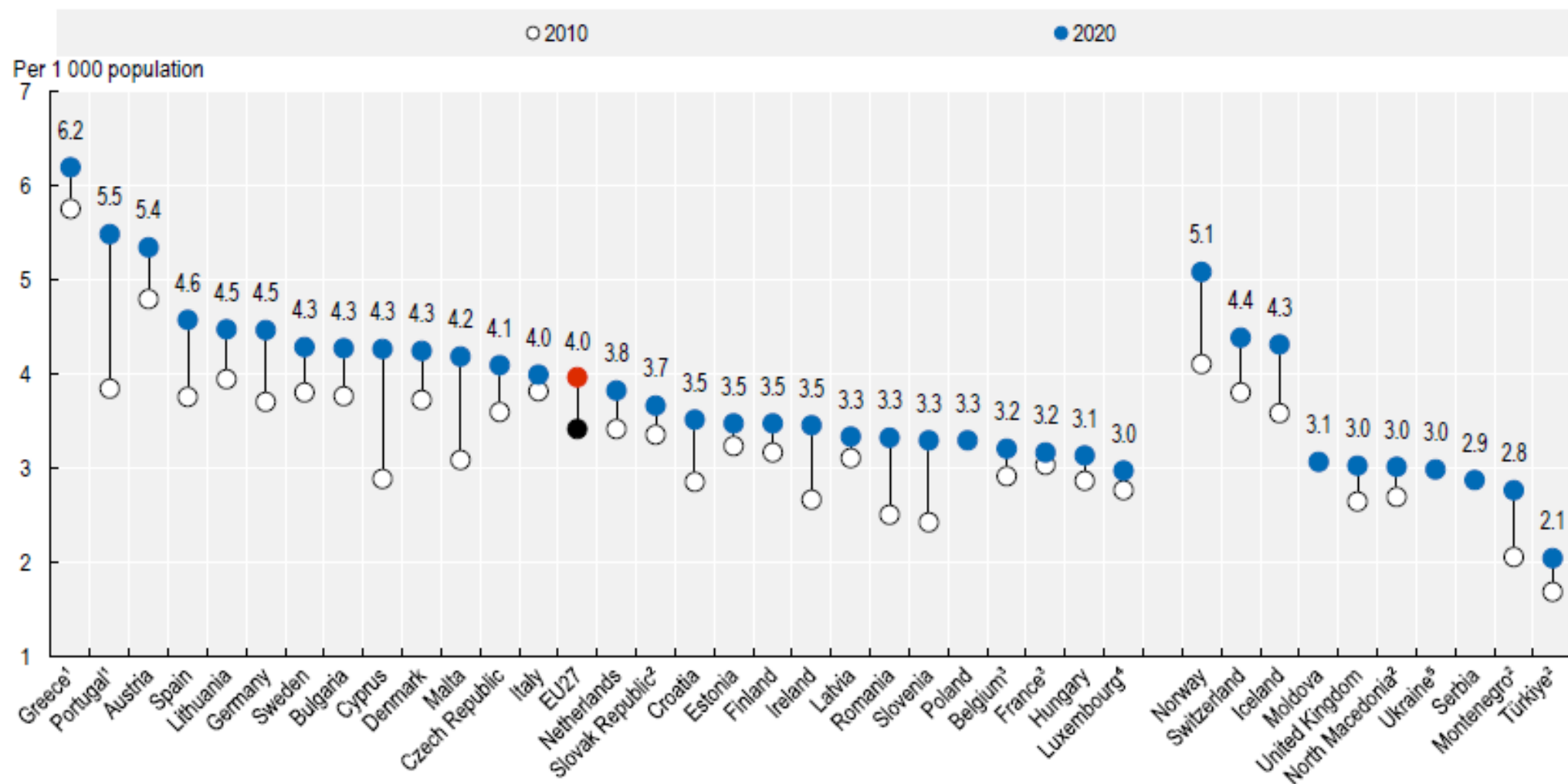


Figure 7.10. Practising doctors per 1 000 population, 2010 and 2020 (or nearest year)

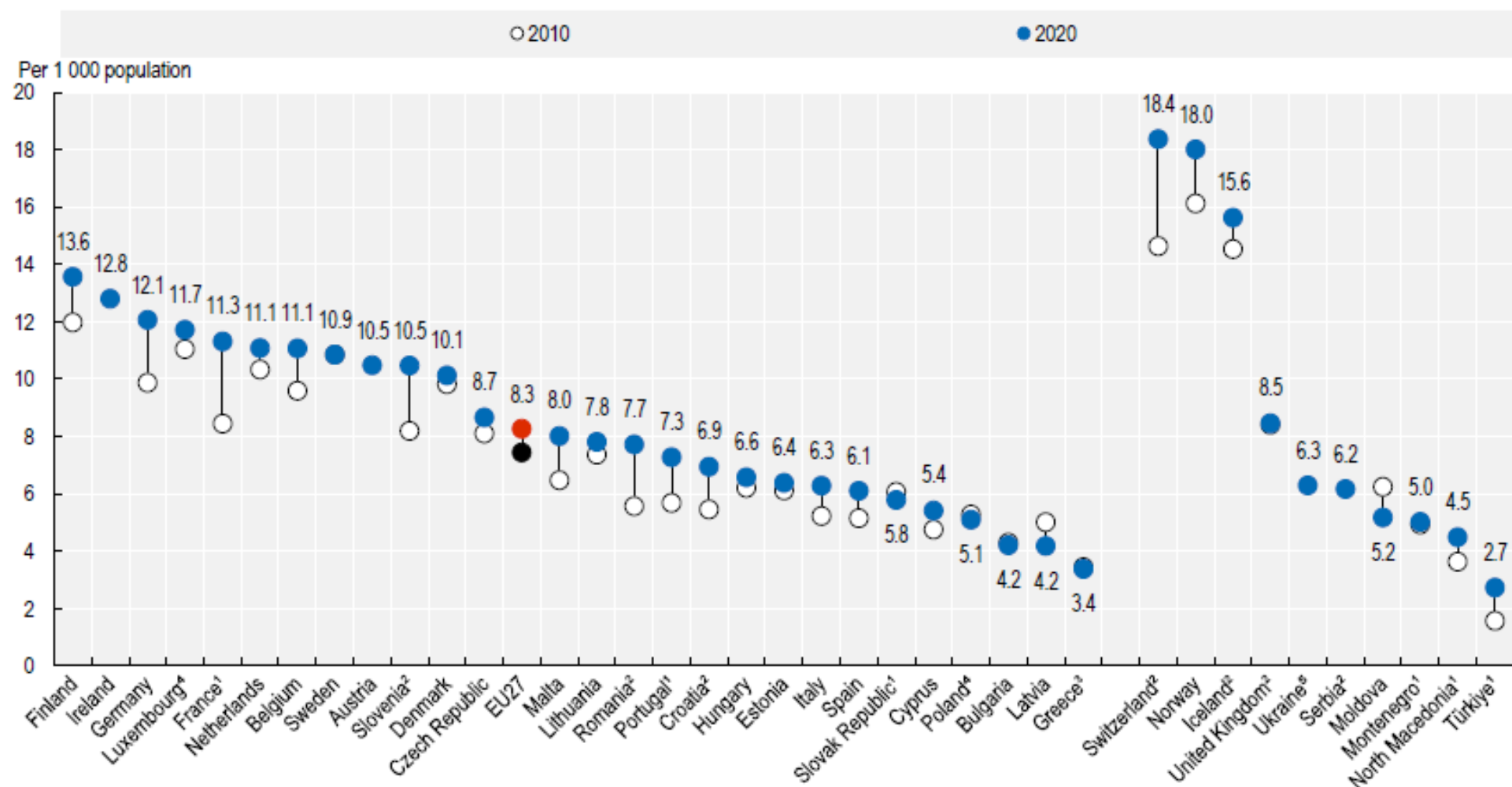


Note: The EU average is unweighted. 1. Data refer to all doctors licensed to practice, resulting in a large over-estimation of the number of practising doctors (e.g. of around 30% in Portugal). 2. Data include not only doctors providing direct care to patients, but also those working in the health sector as managers, educators, researchers, etc. (adding another 5-10% of doctors). 3. Medical interns and residents are not included. 4. The latest data refer to 2017 only. 5. The latest data refer to 2014 only.

Source: OECD Health Statistics 2022; Eurostat Database; WHO National Health Workforce Accounts for Moldova and Ukraine.



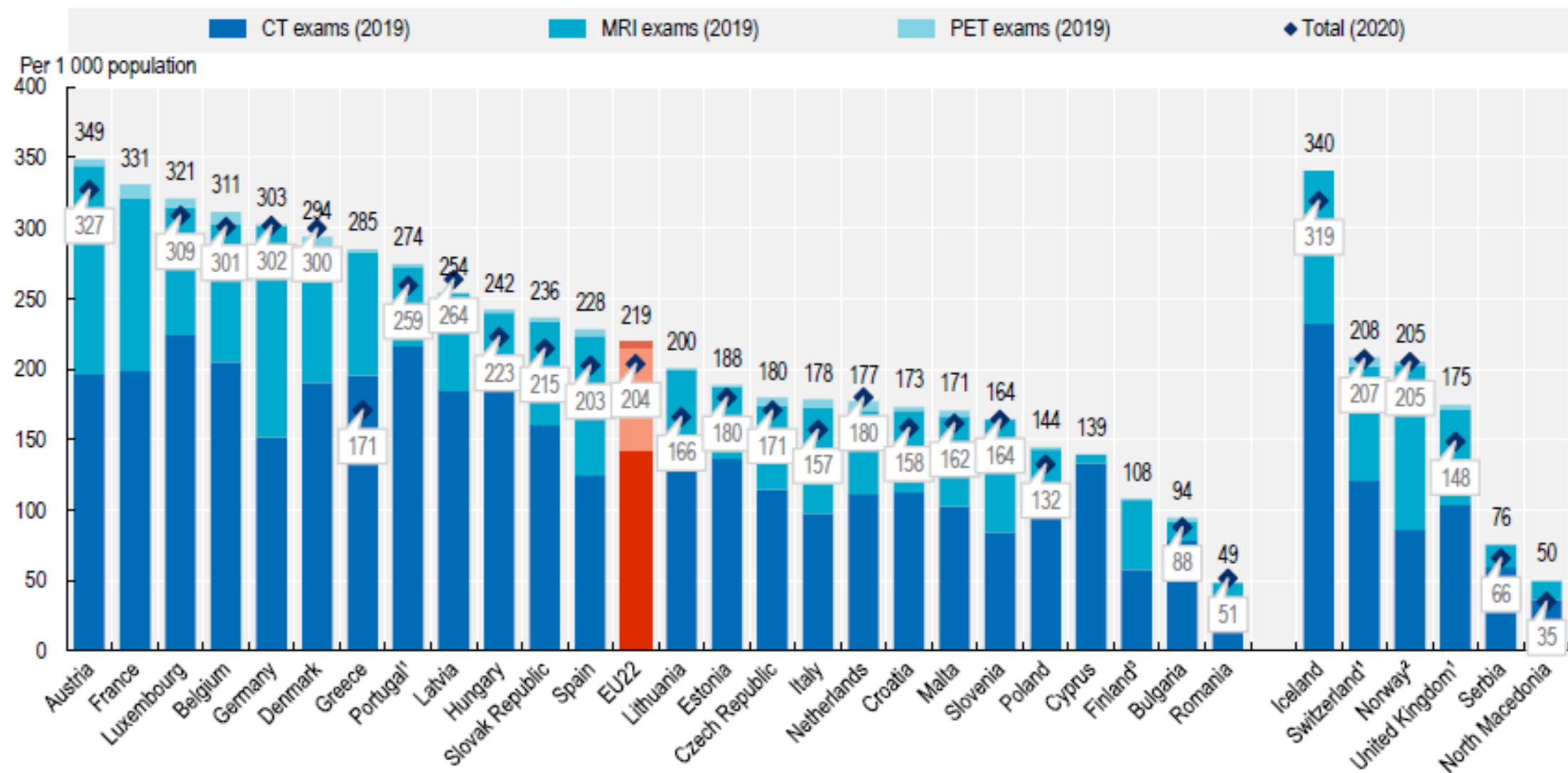
Figure 7.16. Practising nurses per 1 000 population, 2010 and 2020 (or nearest year)



Note: The EU average is unweighted. 1. Data include not only nurses providing direct care to patients, but also those working in the health sector as managers, educators, researchers, etc. 2. Associate professional nurses with a lower level of qualifications make up 70% or more of nurses in Croatia, Romania and Serbia; about 60% in Slovenia; about 33% in Switzerland and Iceland; and about 20% in the United Kingdom. In Switzerland, most of the growth since 2010 has been in this category. 3. Greece reports only nurses employed in hospitals. 4. The latest data refer to 2017 only. 5. The latest data refer to 2014 only.

Source: OECD Health Statistics 2022; Eurostat Database; WHO National Health Workforce Accounts for Moldova and Ukraine.

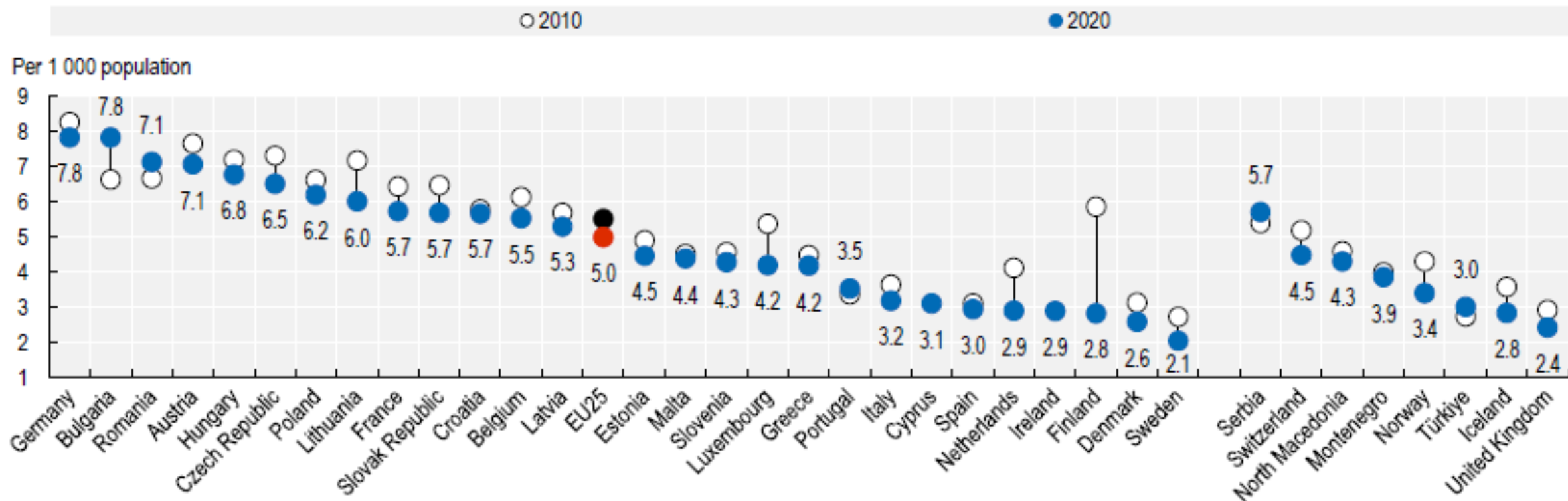
Figure 7.21. CT, MRI and PET exams per 1 000 population, 2019 and 2020



Note: The EU average is unweighted. 1. Any exams outside hospital are not included in Portugal, Switzerland and the United Kingdom. 2. Any exams in hospital are not included in Norway. 3. The data for Finland relate to 2018.

Source: OECD Health Statistics 2022; Eurostat Database.

Figure 7.23. Hospital beds per 1 000 population, 2010 and 2020 (or nearest year)



Note: The EU average is unweighted.

Source: OECD Health Statistics 2022; Eurostat Database.

# Disponibilitatea medicamentelor inovative (1)

## Rate of availability (2016-2019)

The **rate of availability**, measured by the number of medicines available to patients in European countries as of 2020. For most countries this is the point at which the product gains access to the reimbursement list<sup>†</sup>, including products with limited availability.

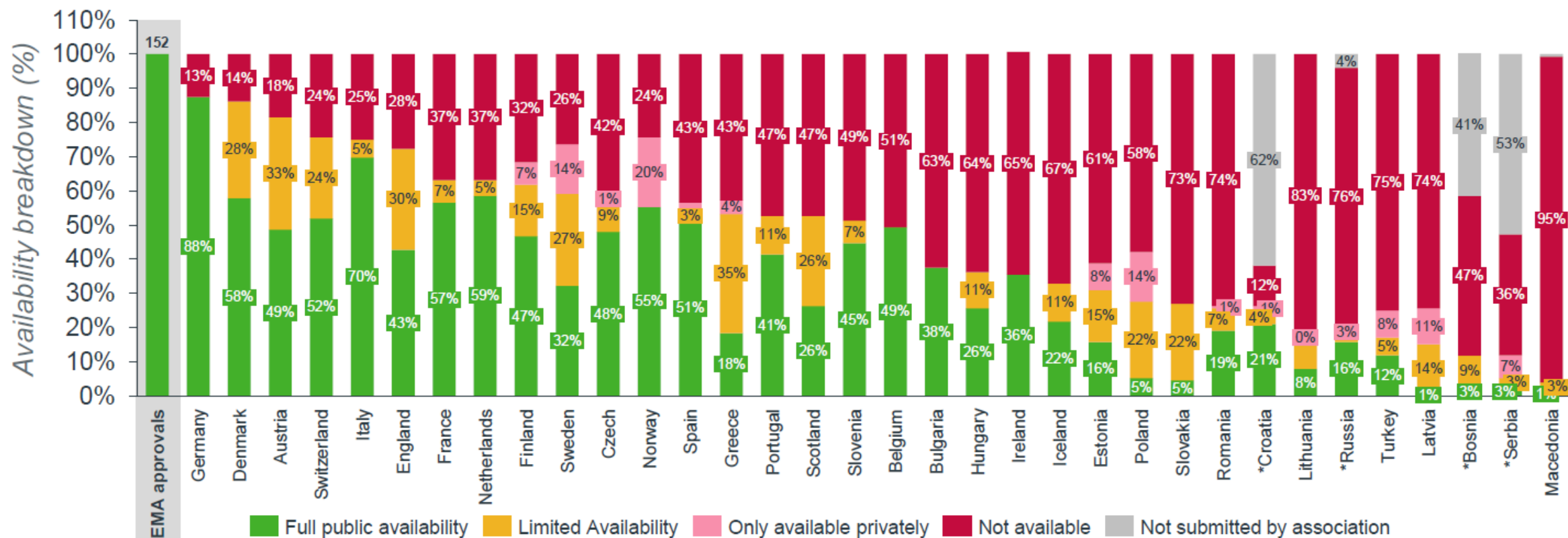


European Union average: 74 products available (49%) (excludes data from Cyprus, Malta, and Luxembourg as these countries are not included in the study) <sup>†</sup>In most countries availability equates to granting of access to the reimbursement list, except in DK, FI, NO, SE some hospital products are not covered by the general reimbursement scheme. \*Countries with asterisks did not complete a full dataset and therefore availability may be unrepresentative.

# Disponibilitatea medicamentelor inovative (2)

## Rate of availability (% , 2016 – 2019)

The **rate of availability** is the number of medicines available to patients in European countries (for most countries this is the point at which the product gains access to the reimbursement list<sup>†</sup>). This includes all medicines status to provide a complete picture of the availability of the cohort of medicines studied.



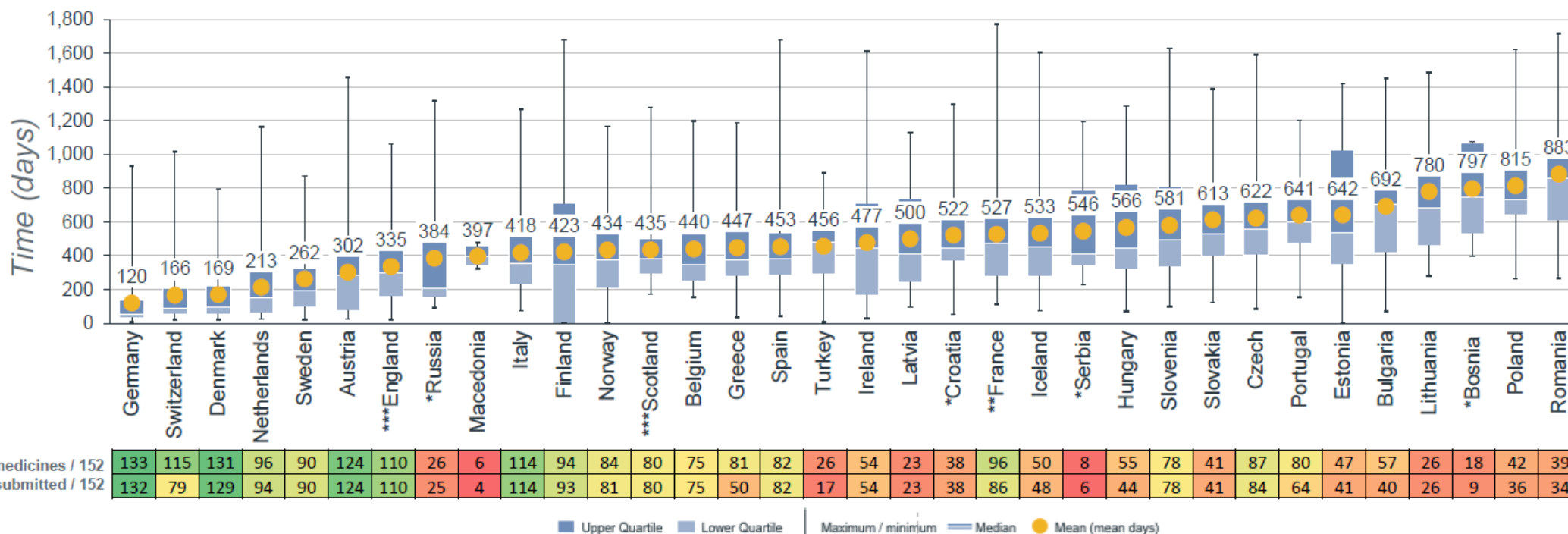
European Union average: 74 products available (49%) (excludes data from Cyprus, Malta, and Luxembourg as these countries are not included in the study). EU averages: 12% of the study cohort is subject to limited availability; 30% of available products have limited availability across EU countries. Ireland and Norway did not submit information on restrictions to available medicines meaning LA\* is not captured in these countries. As Ireland has been included in the EU average calculations, the EU average number of products with limited availability may be understated. <sup>†</sup>In most countries availability equates to granting of access to the reimbursement list, except in DK, FI, NO, SE some hospital products are not covered by the general reimbursement scheme. \*Countries with asterisks did not complete a full dataset and therefore availability may be unrepresentative.



# Disponibilitatea medicamentelor inovative (3)

## Time to availability (2016-2019)

The **time to availability** (previously known as length of delay) is the days between marketing authorisation and the date of availability to patients in European countries (for most this is the point at which products gain access to the reimbursement list<sup>†</sup>).



European Union average: 504 days (mean %) (excludes data from Cyprus, Malta, and Luxembourg as these countries are not included in the study) †In most countries availability equates to granting of access to the reimbursement list, except in DK, FI, NO, SE some hospital products are not covered by the general reimbursement scheme. \*Countries with asterisks did not complete a full dataset and therefore availability may be unrepresentative. \*\*For France, the time to availability (527 days, n=86 dates submitted) includes products under the ATU system for which the price negotiation process is usually longer. If one considers that products under the ATU system are directly available (time to availability = 0), the average time to availability is 257 days. For products which do not benefit from ATU system (n=48 dates submitted), the average delay is 488 days. \*\*\*In the UK, MHRA's Early Access to Medicines Scheme provides access prior to marketing authorisation but is not included within this analysis, and would reduce the overall days for a small subset of medicines.

# Serviciile de sanatate in Romania - resurse reduse, rezultate slabe

