



# How much countries spend on health:

Health expenditure fact sheets for  
the Western Pacific Region (2003-2013)



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## Context

Tracking health expenditure data is critical to monitoring universal health coverage (UHC) and helps inform health policy development. UHC is the foundation for the health-related Sustainable Development Goals (SDGs) and contributes to achieving the other SDGs. The Health Accounts (HA) fact sheets provide concise information and a basic overview of health financing indicators for each of the 27 countries in the Western Pacific Region that have available data on health expenditures from the WHO Global Health Expenditure Database. The 27 countries are: Australia, Brunei Darussalam, Cambodia, China, Cook Islands, Fiji, Japan, Kiribati, the Lao People's Democratic Republic, Malaysia, the Marshall Islands, the Federated States of Micronesia, Mongolia, Nauru, New Zealand, Niue, Palau, Papua New Guinea, the Philippines, the Republic of Korea, Samoa, Singapore, Solomon Islands, Tonga, Tuvalu, Vanuatu and Viet Nam. Latest available data are from 2013.

Each of the country HA fact sheets outlines key health financing and health outcome indicators and features six figures on trends over time (2003–2013) for the country's total health expenditure (THE) and its components, the government health budget, per capita health expenditures, out-of-pocket health expenditures and external funding.

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## Definitions

**General government health expenditure (GGHE)** is the sum of outlays for health maintenance, restoration or enhancement paid for in cash or supplied in kind by government entities, such as the Ministry of Health, other ministries, parastatal organizations and social security agencies, without double-counting government transfers to social security and to extra-budgetary funds. It includes transfer payments to households to offset medical care costs and extra-budgetary funds to finance health services and goods. The revenue base of these entities may comprise multiples sources, including external funds.

**General government expenditure (GGE)** corresponds to the consolidated outlays of all levels of government, territorial authorities (central/federal government, provincial/regional/state/district authorities, municipal/local governments), social security institutions and extra-budgetary funds, including capital outlays.<sup>1</sup>

**Private health expenditure (PvtHE)** is the sum of outlays for health by private entities, such as commercial or mutual health insurance, households, non-profit institutions serving households, resident corporations and quasi-corporations with a health services or financing function not controlled by government.

**Total health expenditure (THE)** is the funds mobilized by the system. In other words, the sum of general government (social security funds and government line ministries) and private expenditures (out-of-pocket expenditures and private insurance) on health in a given year.

**External resources** is the sum of resources channelled towards health by all non-resident institutional units that enter into transactions with residents units, or have other economic links with residents units, explicitly labelled or not to health, to be used as the mean of payments of health goods and services by financing agents in the government or private sectors. It includes donations and loans, cash and in-kind resources. External resources can be included in general government health spending or private health expenditures when funding is channelled to nongovernmental organizations and civil society groups.

**Out-of-pocket (OOP)** expenditures are spending on health by households as direct payments for medical services including medicines and consultation fees, but excludes transportation spending, insurance payments and reimbursements. A household is an individual or a group of persons sharing the same living accommodations that pool some or all of their income and wealth and that consume certain types of goods and services collectively, mainly housing and food.

**Other private expenditures** are spending on private health insurance institutions and non-profit institutions serving households (NPISHs). Private insurance enrolment may be contractual or voluntary, and conditions and benefits or baskets of benefits are agreed upon on a voluntary basis between the insurance agent and the beneficiaries. They are not controlled by government units for the purpose of providing social benefits to members. Expenditures by NPISHs on health are not predominately financed and controlled by government. NPISHs provide goods or services to households free or at prices that are not economically significant.<sup>2</sup>

**Government line ministries' expenditure** are spending on health (e.g. taxes and external resources) by central, state and local governments, which includes spending by ministries of health and other ministries.

**Social security funds (SSF)** are expenditures on health by social security institutions. Social security or national health insurance schemes are imposed and controlled by government units for the purpose of providing social benefits to members of the community as a whole, or to particular segments of the community. It is comprised of direct outlays to medical care providers and to suppliers of medical goods, as well as reimbursements to households and the supply of services in kind to the enrollees.

## Data Sources:

**Global Health Expenditure Database.** Health expenditure indicators, including Figs. 1–6

**World Health Statistics and Global Health Observatory.** Health outcome indicators: DTP3 immunization coverage (%) among 1 year olds; births attended by skilled health personnel (%) (2011); Under-5 mortality rate (per 1000 live births); infant mortality rate (dying before age 1 per 1000 live births); maternal mortality ratio per 100 000 live births

**World Bank and United Nations Data.** Gross domestic product (GDP) per capita (current US\$); GDP annual growth

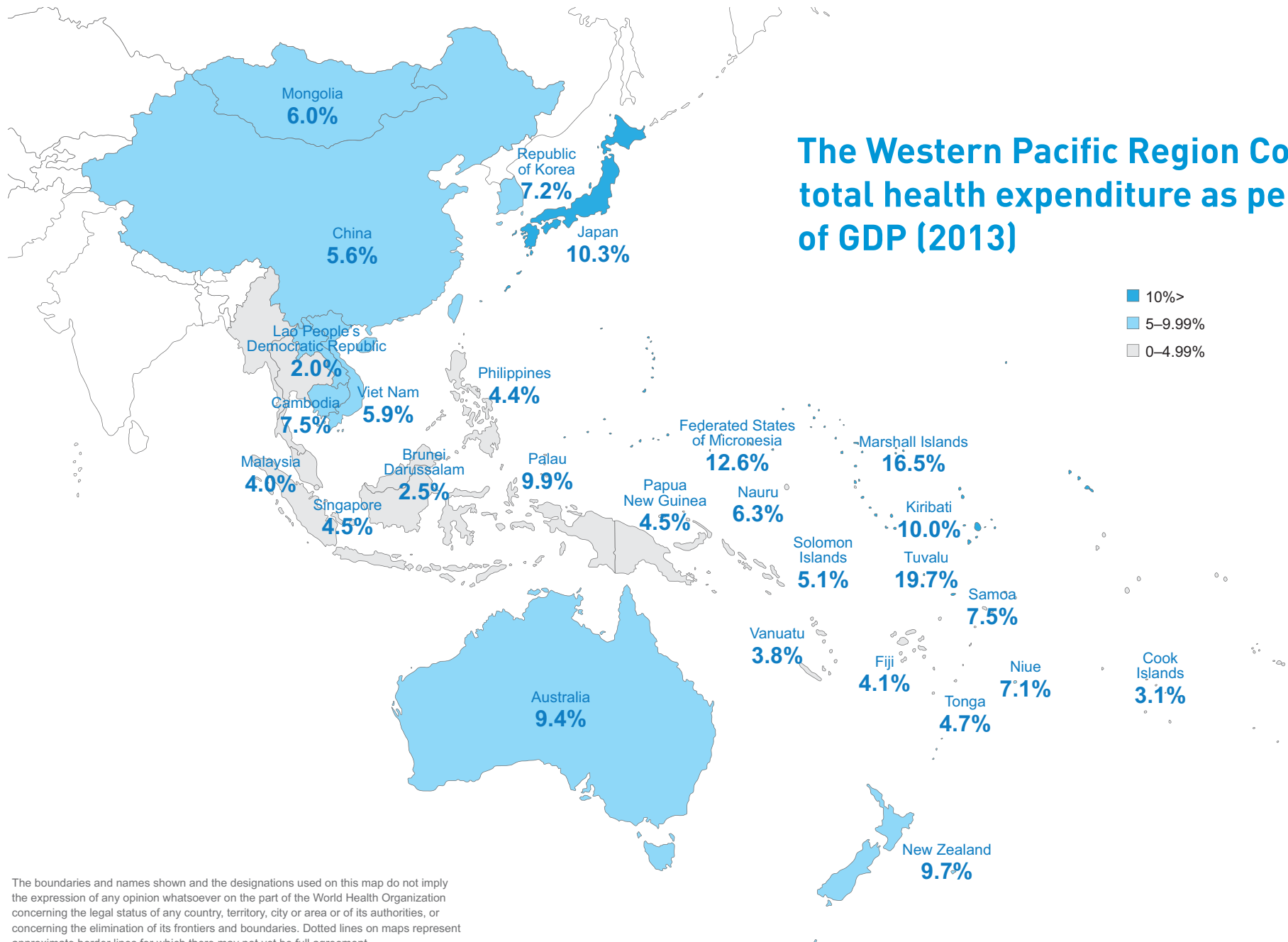
<sup>1</sup> Glossary of terms for Global Health Expenditure Database. World Health Organization; 2011. ([http://apps.who.int/nha/glossary/glossary\\_english.pdf?ua=1](http://apps.who.int/nha/glossary/glossary_english.pdf?ua=1), accessed 8 October 2015).

<sup>2</sup> Glossary of statistical terms. Organization for Economic Co-operation and Development; 2001. (<https://stats.oecd.org/glossary/detail.asp?ID=1827>, accessed 8 October 2015).

Glossary of terms for Global Health Expenditure Database. World Health Organization; 2011. ([http://apps.who.int/nha/glossary/glossary\\_english.pdf?ua=1](http://apps.who.int/nha/glossary/glossary_english.pdf?ua=1), accessed 8 October 2015).

Lu, Chunling, Brian Chin et al., Limitations of methods for measuring out-of-pocket and catastrophic private health expenditures. World Health Organization bulletin; 2008. (<http://www.who.int/bulletin/volumes/87/3/08-054379/en/>, accessed 8 October 2015).

## The Western Pacific Region Countries' total health expenditure as percentage of GDP (2013)



The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the elimination of its frontiers and boundaries. Dotted lines on maps represent approximate border lines for which there may not yet be full agreement.  
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# Australia

## Health Financing 2013

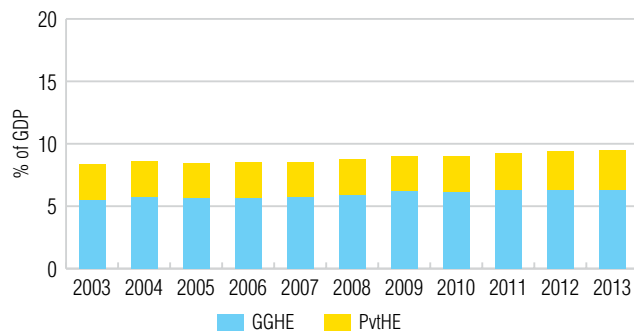
Capital	Canberra
GDP per capita (current US\$)	67 473
GDP annual growth (%)	2.5
DTP3 immunization coverage (%) among 1 year olds	91
Births attended by skilled health personnel (%)*	99.1
Under-5 mortality rate (per 1000 live births)	4.0
Infant mortality rate (dying before age 1 per 1000 live births)	3.4
Maternal mortality ratio per 100 000 live births	6

Total health expenditure (current US\$) per capita	6109
General government health expenditure (current US\$) per capita	4069
General government health expenditure as % of GDP	6.3
Total health expenditure as % of GDP	9.4
Out-of-pocket payments as % of total health expenditure	19.1
External resources on health as % of total health expenditure	0
Social security funds as % of total health expenditure	0
Private prepaid insurance as % of total health expenditure	8.5

\* most recent data

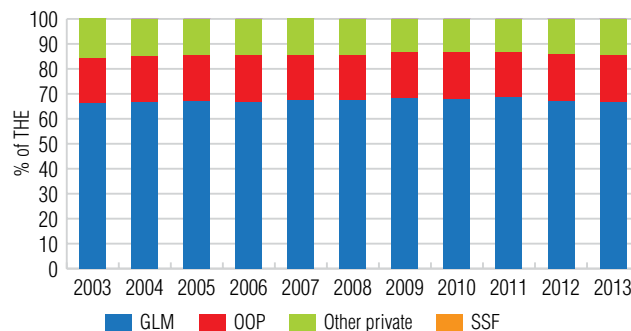
### How much is spent on health?

Fig. 1. Total health expenditure (THE) as a % of GDP (2003–2013)



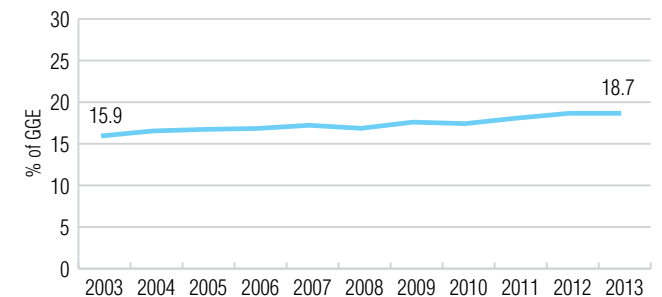
### What are the components of health expenditure?

Fig. 2. Structure of the total health expenditure (%) (2003–2013)



### How big is the Government health budget?

Fig. 3. GGHE as a % of General Government expenditure, or GGE (2003–2013)



### How much is spent per person on health?

Fig. 4. THE, GGHE, OOP per capita in US\$ (2003–2013)

### What is the share of OOP expenditure?

Fig. 5. Out-of-pocket expenditure as % of THE (2003–2013)

### How much of health is funded by donors?

Fig. 6. External resources as % of THE (2003–2013)

预览已结束，完整报告链接和二维码如下：

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