

### 55. Equity in access to health care

Reducing inequalities in access to health care remains an important policy goal for governments, regardless of different health care systems' designs. Most OECD governments seek to reduce potential barriers to access to health care which can be financial; geographic; racial; cultural and informational; or time-related.

Health insurance coverage promotes access to health care goods and services and provides financial security against unexpected or serious illness. Most OECD countries have achieved universal coverage of health care for a core set of services, with the exception of Mexico, Turkey, the United States and Chile. Mexico has recently introduced reforms to provide coverage for the poor or uninsured, and the United States has recently passed legislation that will mandate health insurance coverage for almost everyone.

Despite having insurance, patients may be asked to pay some costs directly when consulting a doctor or being hospitalised, or when they purchase pharmaceutical drugs. Such direct costs may lead some households to delay or even forgo medical care. On average, out-of-pocket expenditures for health care represented 3.3% of final household consumption in 2008, ranging from 6% in Switzerland to less than 1.5% in the Netherlands, Luxembourg and France. The distribution of out-of-pocket expenditures across income groups can vary considerably within countries as well. While many countries have put in place exemptions and caps on out-of-pocket expenditures for lower-income groups to protect health care access, poorer households often allocate a higher proportion of their income or their consumption to pay health care than high-income households (Banthin *et al.*, 2008; De Graeve and Van Ourti, 2003; Westert *et al.*, 2008).

Regional inequities in access to health care can also exist within countries. In general, there are greater numbers of physicians in urban areas than in rural regions, where a shortage of physicians can lead to delayed treatment or larger distances travelled to get care.

#### Methodology and definitions

Data are derived from OECD *Health Data 2010* which are based on official national statistics. Population coverage is the percentage of the population receiving a defined set of health care goods and services (typically including consultations with doctors, hospitalisation, the purchase of prescribed pharmaceutical drugs and dental care) under public programmes or private insurance. Public coverage refers to government programmes (generally financed by taxation) and social health insurance (generally financed by payroll taxes). Uptake of private insurance is often voluntary, although in some countries it may be compulsory by law. Coverage includes individuals as well as their dependents.

Out-of-pocket payments are expenditures borne directly by a patient where insurance does not cover the full cost of the health goods or services. They include cost-sharing, self-medication and other expenditures paid directly by private households. In some countries they may also include estimations of informal payments to health care providers.

The number of physicians includes general practitioners and specialists actively practicing medicine in a region in both public and private institutions. The geographical classification used to measure the number of physicians is TL2 which for the most part corresponds to national administrative regions.

#### Further reading

OECD (2009), *Health at a Glance 2009: OECD Indicators*, OECD Publishing, Paris.

OECD (2011), *Regions at a Glance 2011*, OECD Publishing, Paris.

#### Figure notes

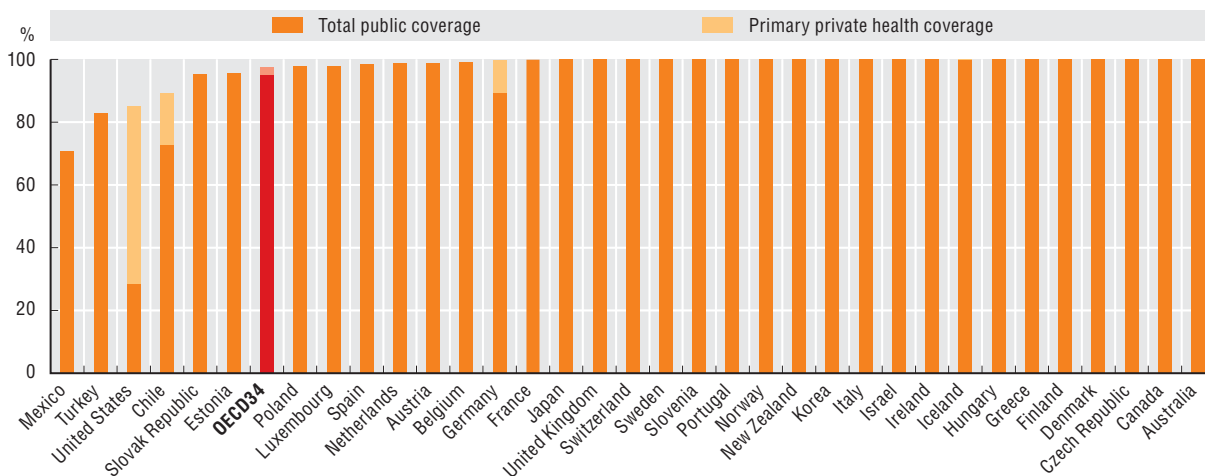
55.1: Coverage as percentage of the population for a core set of services. Data for Australia, Luxembourg and Japan refer to 2007. Data for Spain refer to 2006. Data for Turkey are from OECD *Health Data 2011* to be released June 2011.

55.2: Data for Turkey, Japan, Australia and Denmark refer to 2007. Data for Luxembourg and Portugal refer to 2006. Data for Greece are estimated.

55.3: Data are not available at regional level for Turkey.

Information on data for Israel: <http://dx.doi.org/10.1787/888932315602>.

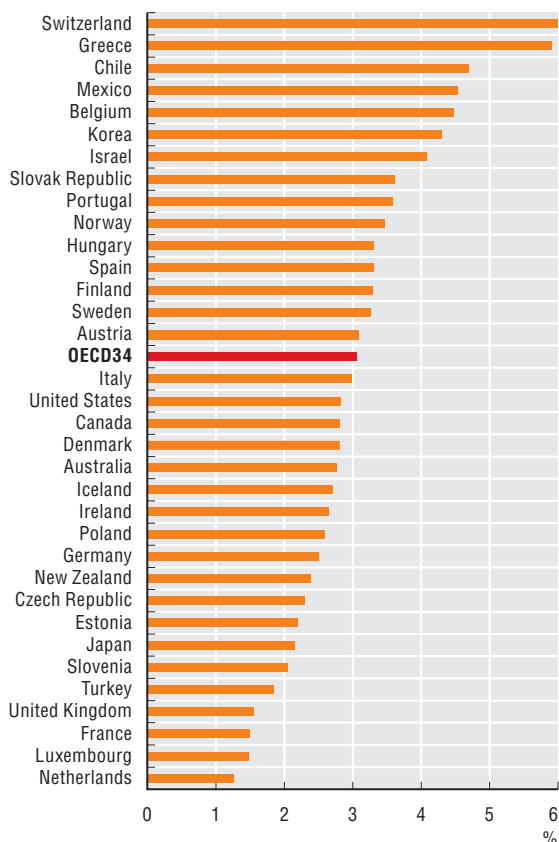
55.1 Health insurance coverage (2008)



Source: OECD Health Data 2010.

StatLink <http://dx.doi.org/10.1787/888932391602>

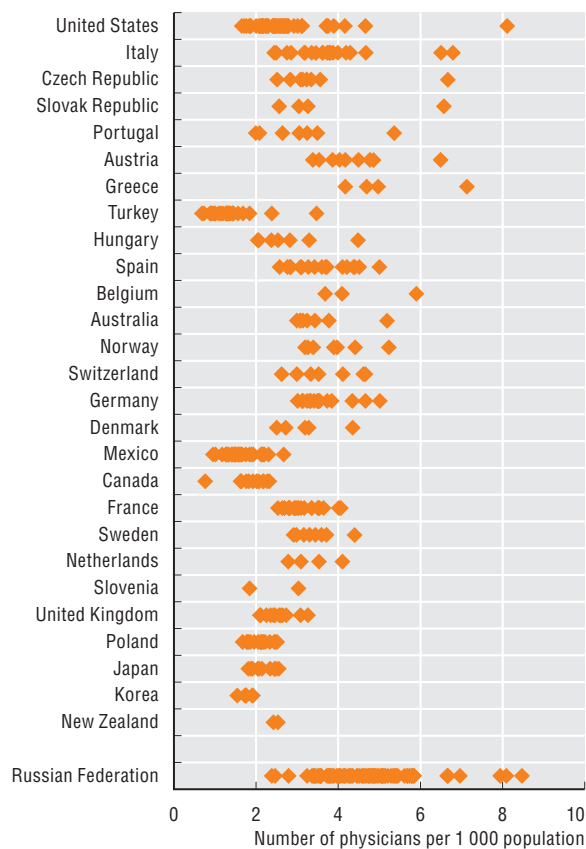
55.2 Out-of-pocket health expenditure as a share of final household consumption (2008)



Source: OECD Health Data 2010.

StatLink <http://dx.doi.org/10.1787/888932391621>

55.3 Inter-regional disparities in physician density for each TL2 region (2008)



Source: Regions at a Glance 2011.

StatLink <http://dx.doi.org/10.1787/888932391640>



**From:**  
**Government at a Glance 2011**

**Access the complete publication at:**  
[https://doi.org/10.1787/gov\\_glance-2011-en](https://doi.org/10.1787/gov_glance-2011-en)

**Please cite this chapter as:**

OECD (2011), "Equity in access to health care", in *Government at a Glance 2011*, OECD Publishing, Paris.

DOI: [https://doi.org/10.1787/gov\\_glance-2011-61-en](https://doi.org/10.1787/gov_glance-2011-61-en)

This work is published under the responsibility of the Secretary-General of the OECD. The opinions expressed and arguments employed herein do not necessarily reflect the official views of OECD member countries.

This document and any map included herein are without prejudice to the status of or sovereignty over any territory, to the delimitation of international frontiers and boundaries and to the name of any territory, city or area.

You can copy, download or print OECD content for your own use, and you can include excerpts from OECD publications, databases and multimedia products in your own documents, presentations, blogs, websites and teaching materials, provided that suitable acknowledgment of OECD as source and copyright owner is given. All requests for public or commercial use and translation rights should be submitted to [rights@oecd.org](mailto:rights@oecd.org). Requests for permission to photocopy portions of this material for public or commercial use shall be addressed directly to the Copyright Clearance Center (CCC) at [info@copyright.com](mailto:info@copyright.com) or the Centre français d'exploitation du droit de copie (CFC) at [contact@cfcopies.com](mailto:contact@cfcopies.com).