

## Extent of health care coverage

In addition to the share of the population entitled to core health services, the extent of health care coverage is defined by the range of services included in a publicly-defined benefit package and the proportion of costs covered. Figure 7.6 assesses the extent of coverage for key health care goods and services, by computing the share of expenditure covered under government schemes or compulsory health insurance. Differences across countries in the extent of coverage can be the result of specific goods and services being included or excluded in the publicly-defined benefit package, different cost-sharing arrangements or some services only being covered for specific population groups in a country.

Across EU countries, more than three-quarters of all health care costs were covered by government or compulsory health insurance schemes in 2020 (see indicator “Financing of health expenditure” in Chapter 5), but financial protection is not uniform across all types of health care services, and the variation across countries is considerable. In nearly all EU countries, inpatient services in hospitals are more comprehensively covered than any other type of care. Across the EU, 91% of all inpatient costs were borne by government or compulsory insurance schemes in 2020. In many countries, access to acute inpatient care is free or subject to very limited cost-sharing. As a result, coverage rates were near 100% in Sweden, Estonia, Romania, the Czech Republic, Germany and France. In Greece on the other hand, financial coverage for the cost of inpatient care was only around two-thirds of total costs.

More than three-quarters (78%) of spending on outpatient medical care across the EU was borne by government and compulsory insurance schemes in 2020. Coverage ranged from less than 60% in Malta, Bulgaria and Latvia to over 90% in the Slovak Republic, Denmark, the Czech Republic and Sweden. In some countries, outpatient primary and specialist care are generally free at the point of service, but some out-of-pocket payments may still apply for specific services or if patients consult non-contracted private providers.

Public coverage for dental care costs is far more limited across EU countries due to restricted service packages (frequently limited to children) and high levels of cost-sharing. On average, only one-third of total costs are borne by government schemes or compulsory insurance. More than 60% of dental spending is covered in only two EU countries (Germany and France). In Cyprus, Greece, Romania and Spain, the level of compulsory coverage is very low. Voluntary health insurance may play an important role in providing financial protection when dental care is not comprehensively covered in the benefit package – this is the case for adults in the Netherlands, for example.

Coverage for pharmaceuticals is also typically less comprehensive than for inpatient and outpatient care. Across the EU, around 59% of pharmaceutical costs are financed by government or compulsory insurance schemes. The most generous coverage can be found in Cyprus, Germany, France and Ireland (above 80%). On the other hand, this share is less than 40% in Bulgaria and Poland.

Finally, therapeutic appliances such as glasses and other eye products, hearing aids and other medical devices are typically covered to a lesser extent than other health care goods and services, with the exception of dental care. Government and compulsory insurance schemes cover more than 50% of these expenses in only four EU countries.

### Definition and comparability

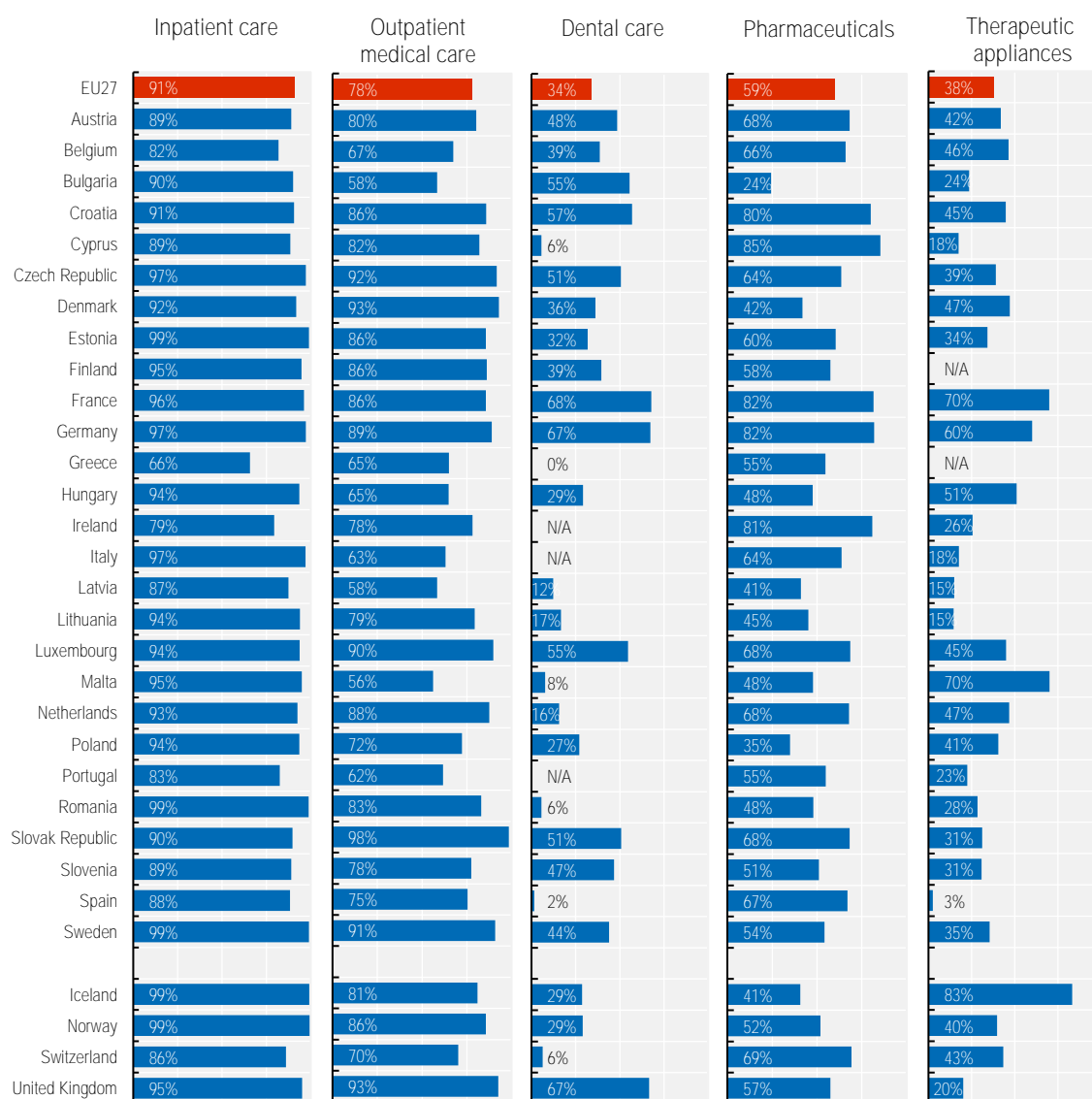
Health care coverage is defined by the share of the population entitled to services, the range of services included in a benefit package and the proportion of costs covered by government schemes and compulsory insurance schemes. Coverage provided by voluntary health insurance and other voluntary schemes such as charities or employers is not considered. The core functions analysed here are based on definitions in the *System of Health Accounts 2011* (OECD/Eurostat/WHO, 2017<sup>[1]</sup>).

### References

OECD/Eurostat/WHO (2017), *A System of Health Accounts 2011: Revised edition*, OECD Publishing, Paris, [1]  
<https://doi.org/10.1787/9789264270985-en>.

Figure 7.6. Health care coverage for selected goods and services, 2020 (or nearest year)

Government and compulsory insurance spending as proportion of total health spending by type of service



Note: Outpatient medical services mainly refer to services provided by generalists and specialists in the outpatient sector. Pharmaceuticals include prescribed and over-the-counter medicines as well as medical non-durables. Therapeutic appliances refer to vision products, hearing aids, wheelchairs and other medical devices. N/A means data not available. The EU average is unweighted.

Source: OECD Health Statistics 2022.

StatLink  <https://stat.link/rit7h6>



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