

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges

Gasto Nacional en Salud en América Latina y el Caribe: Tendencias y Desafíos Macroeconómicos y Fiscales

Rubén M. Suárez-Berenguela
Asesor Principal, Economía y Financiamiento en Salud
Área de Sistemas de Salud
OPS- Washington DC.
suarezru@paho.org
Washington D.C.

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges

Global/Regional Economic Outlook

- World Economic Outlook
October 2012: *Coping with High Debt and Sluggish Growth*

Projected global growth, at 3.3 and 3.6 percent in 2012 and 2013: (weaker than in the July 2012 WEO which was in turn lower than in the April 2012:

1 in 6 chance of global growth falling below 2 percent (recession)

Unemployment is likely to stay elevated in many parts of the world.

Financial conditions will remain fragile

Medium term outlook...2013-2015

- Setbacks: uncertainty about the recovery:
- Policies in advanced economies have not rebuilt confidence:
 - Viability of the euro area (The crisis in the euro area remains the most obvious threat to the global outlook).
 - Major U.S. fiscal policy mistakes – fiscal cliff
- China? In emerging markets: how to calibrate policies in the face of major external downside risks?

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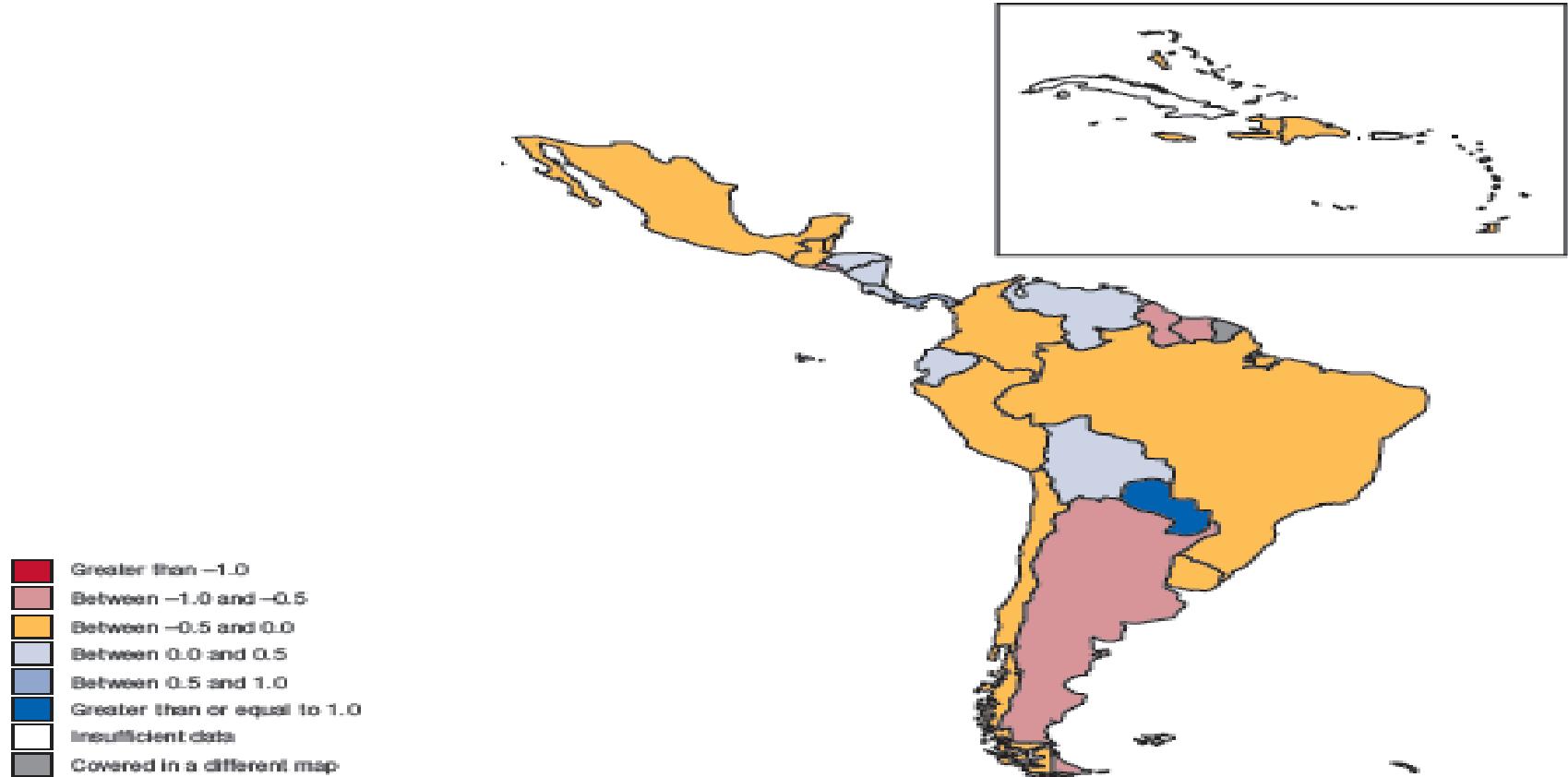
Table 1.1. Overview of the World Economic Outlook Projections

(Percent change unless noted otherwise)

	Year over Year						Q4 over Q4				
			Projections		Difference from July 2012 WEO Update		Estimates	Projections			
			2010	2011	2012	2013		2011	2012	2013	
World Output¹			5.1	3.8	3.3	3.6	-0.2	-0.3	3.2	3.0	4.0
Advanced Economies			3.0	1.6	1.3	1.5	-0.1	-0.3	1.3	1.1	2.1
United States			2.4	1.8	2.2	2.1	0.1	-0.1	2.0	1.7	2.5
Euro Area			2.0	1.4	-0.4	0.2	-0.1	-0.5	0.7	-0.5	0.8
Germany			4.0	3.1	0.9	0.9	0.0	-0.5	1.9	0.9	1.4
France			1.7	1.7	0.1	0.4	-0.2	-0.5	1.2	0.0	0.8
Italy			1.8	0.4	-2.3	-0.7	-0.4	-0.4	-0.5	-2.3	0.0
Spain			-0.3	0.4	-1.5	-1.3	-0.1	-0.7	0.0	-2.3	0.2
Japan			4.5	-0.8	2.2	1.2	-0.2	-0.3	-0.6	1.6	2.1
United Kingdom			1.8	0.8	-0.4	1.1	-0.6	-0.3	0.6	0.0	1.2
Canada			3.2	2.4	1.9	2.0	-0.2	-0.2	2.2	1.7	2.2
Other Advanced Economies ²			5.9	3.2	2.1	3.0	-0.4	-0.4	2.4	2.8	3.6
Newly Industrialized Asian Economies			8.5	4.0	2.1	3.6	-0.6	-0.6	3.0	3.2	3.5
Emerging Market and Developing Economies³			7.4	6.2	5.3	5.6	-0.3	-0.2	5.7	5.5	6.2
Central and Eastern Europe			4.6	5.3	2.0	2.6	0.1	-0.2	3.6	1.9	3.3
Commonwealth of Independent States			4.8	4.9	4.0	4.1	-0.1	0.0	4.3	2.9	4.8
Russia			4.3	4.3	3.7	3.8	-0.3	-0.1	4.6	2.5	4.8
Excluding Russia			6.0	6.2	4.7	4.8	0.2	0.2
Developing Asia			9.5	7.8	6.7	7.2	-0.4	-0.3	6.9	7.2	7.4
China			10.4	9.2	7.8	8.2	-0.2	-0.2	8.9	7.9	8.1
India			10.1	6.8	4.9	6.0	-1.3	-0.6	5.0	5.5	5.9
ASEAN-5 ⁴			7.0	4.5	5.4	5.8	0.0	-0.3	2.8	7.2	6.6
Latin America and the Caribbean			6.2	4.5	3.2	3.9	-0.2	-0.3	3.7	3.0	4.6
Brazil			7.5	2.7	1.5	4.0	-1.0	-0.7	1.4	2.9	3.8
Mexico			5.6	3.9	3.8	3.5	-0.1	-0.2	3.9	3.2	4.1

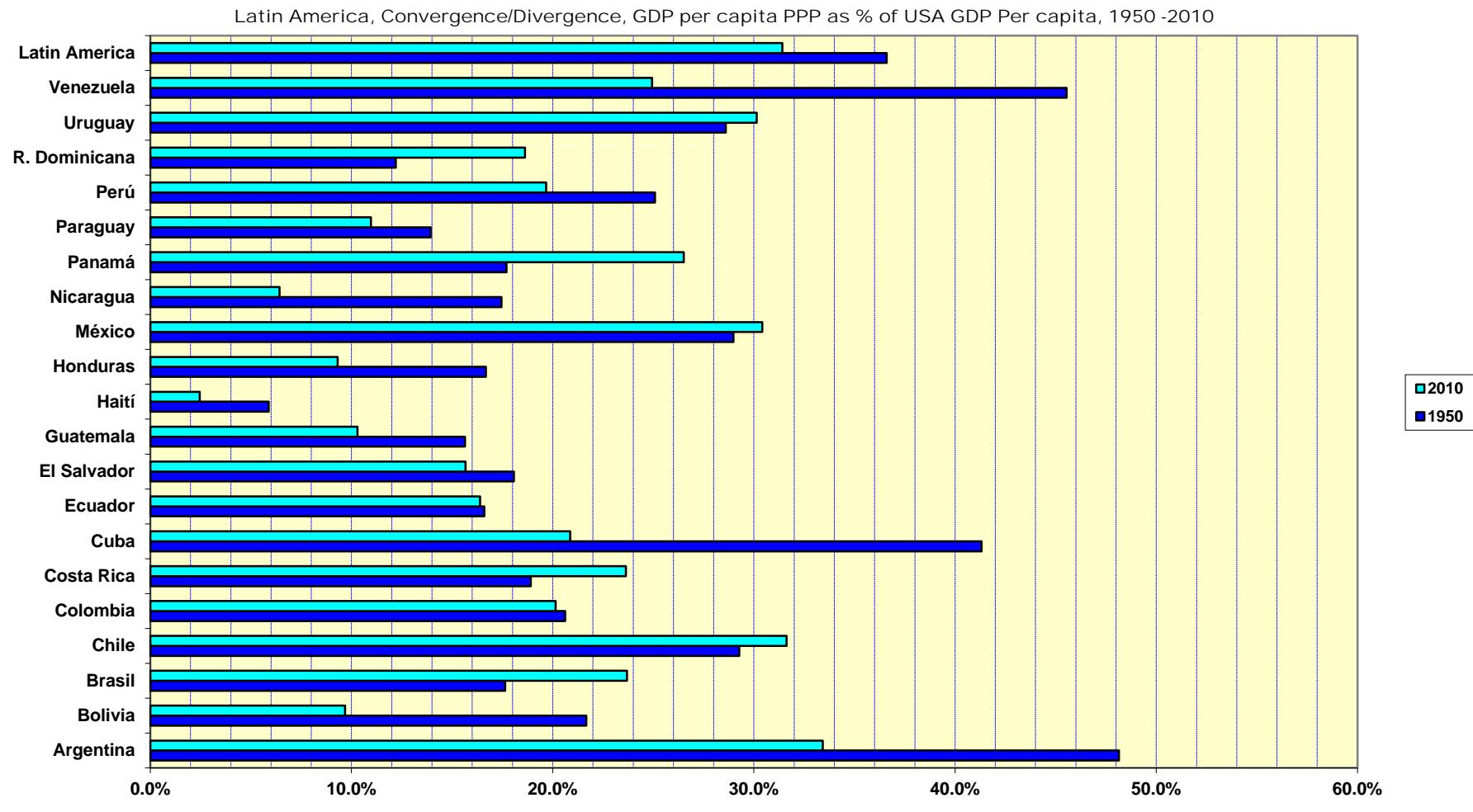
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Figure 2.10. Latin America and the Caribbean: Revisions to 2013 GDP Growth Forecasts
(Change in percentage points from April 2012 WEO projections)



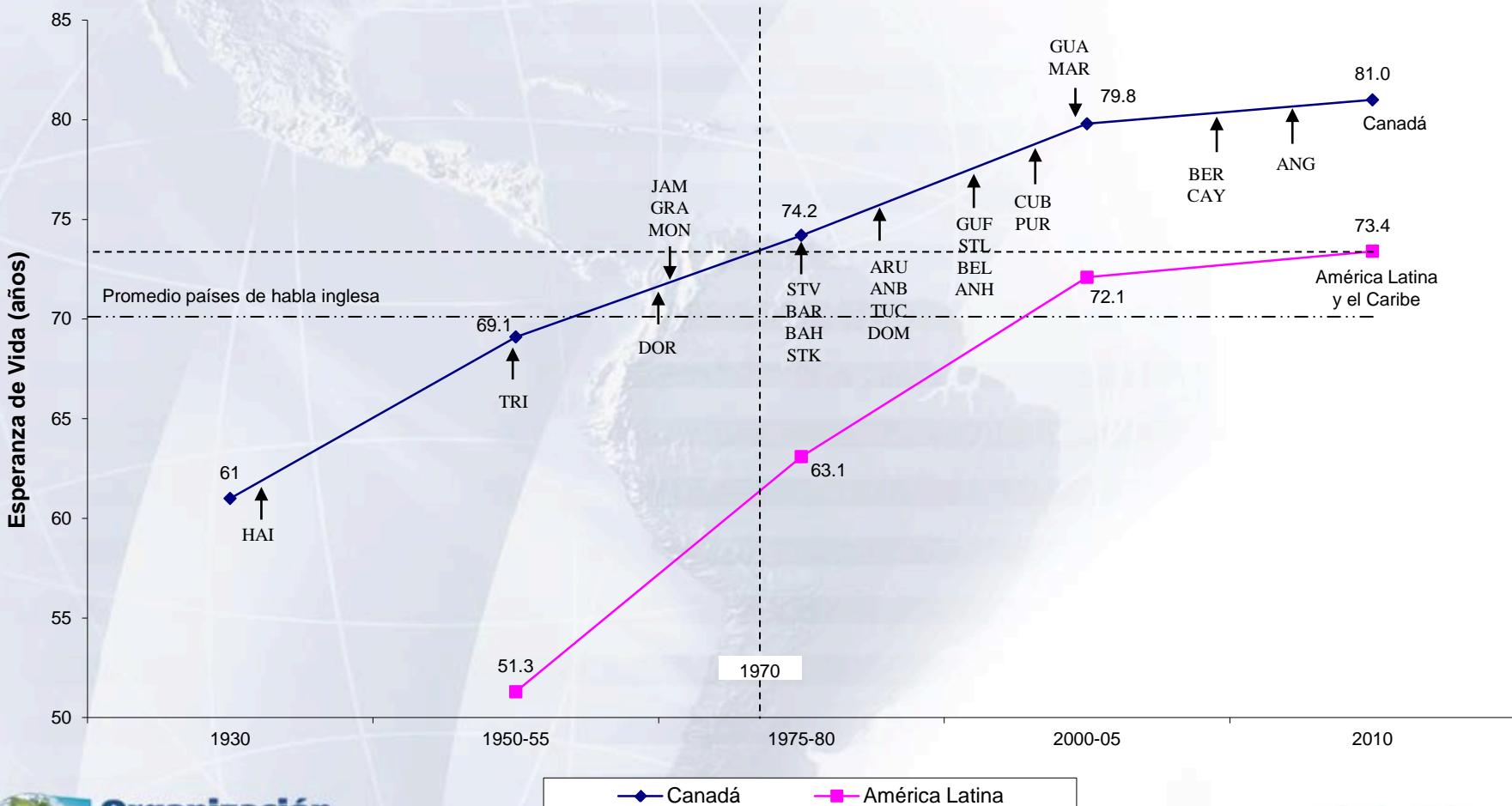
Source: IMF staff estimates.

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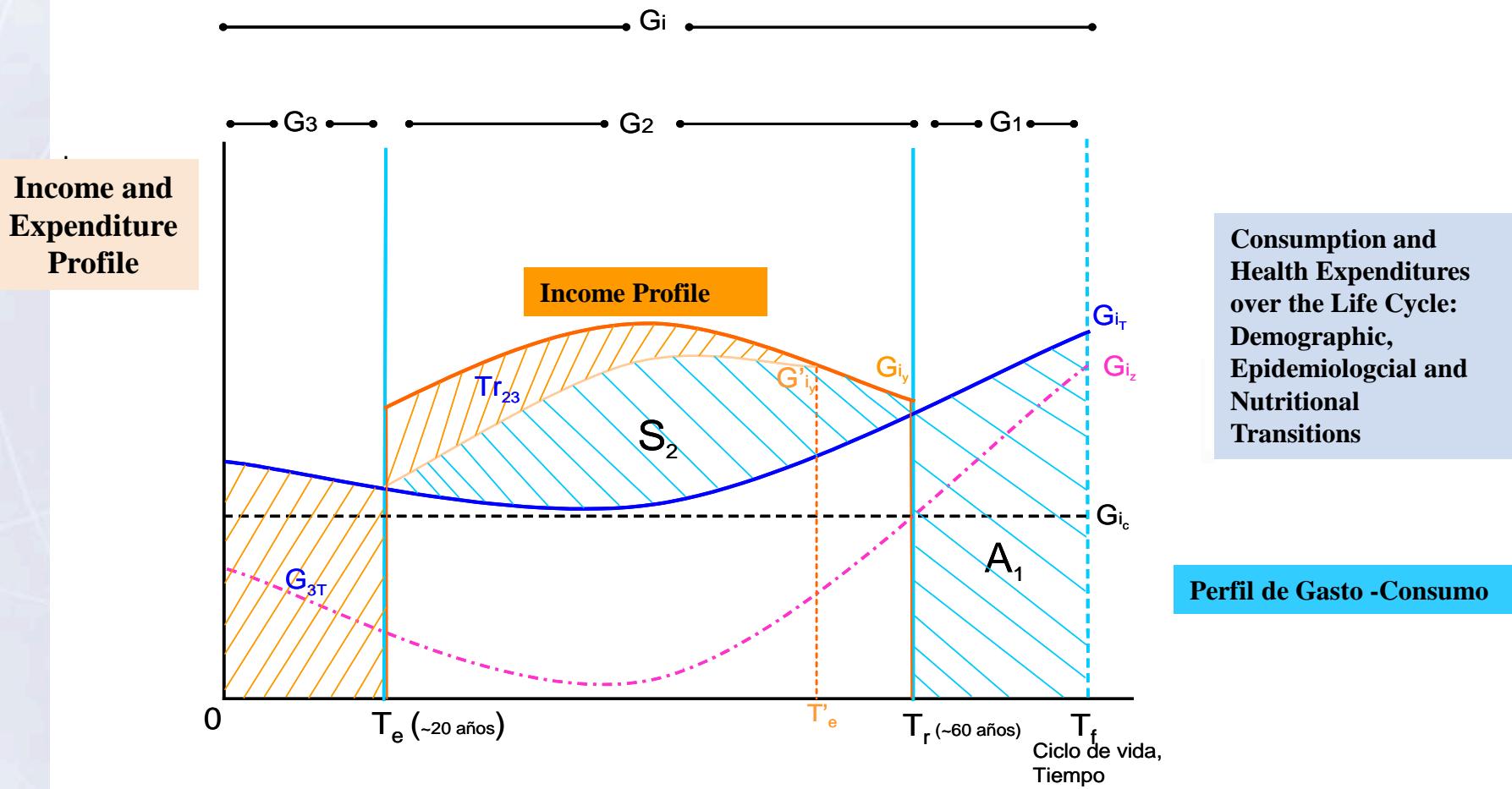


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Esperanza de Vida: Promedio de América Latina y el Caribe 1950-2010; y, países del Caribe 2010 en relación a la evolución de la esperanza de vida en Canadá 1930-2010

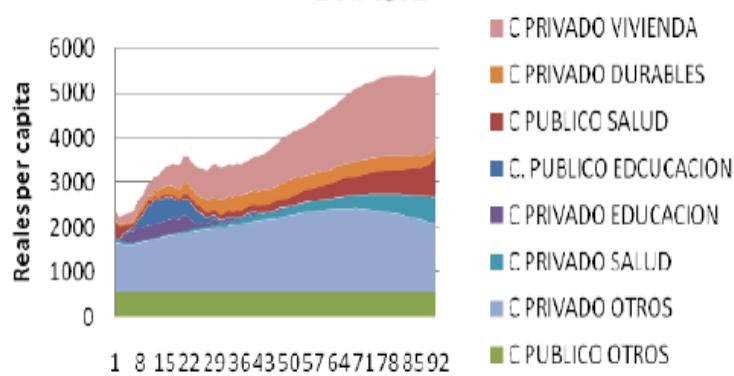


National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Demographic and Epidemiological Transitions

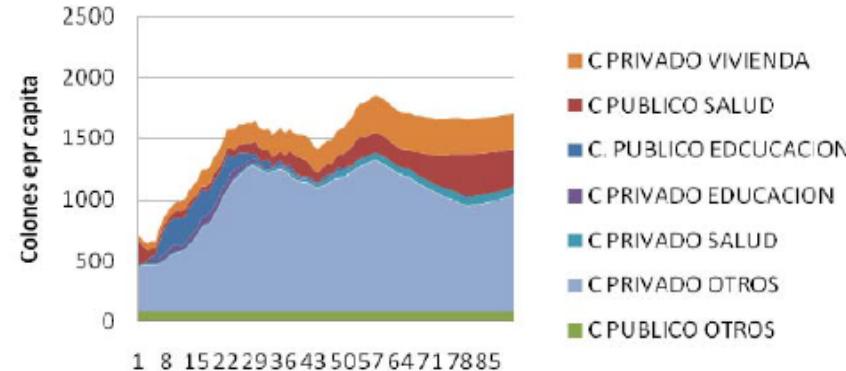


National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Nutritional transition

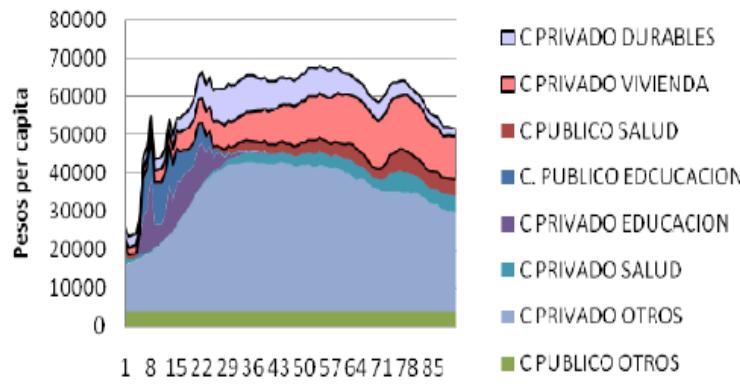
BRASIL



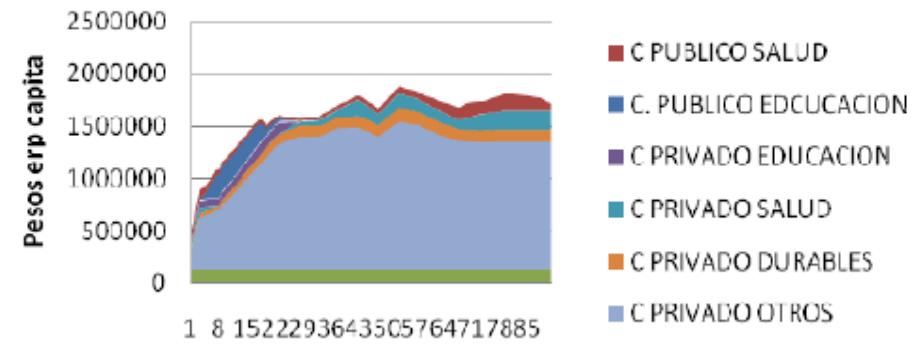
COSTA RICA



Estructura del Consumo en MEXICO

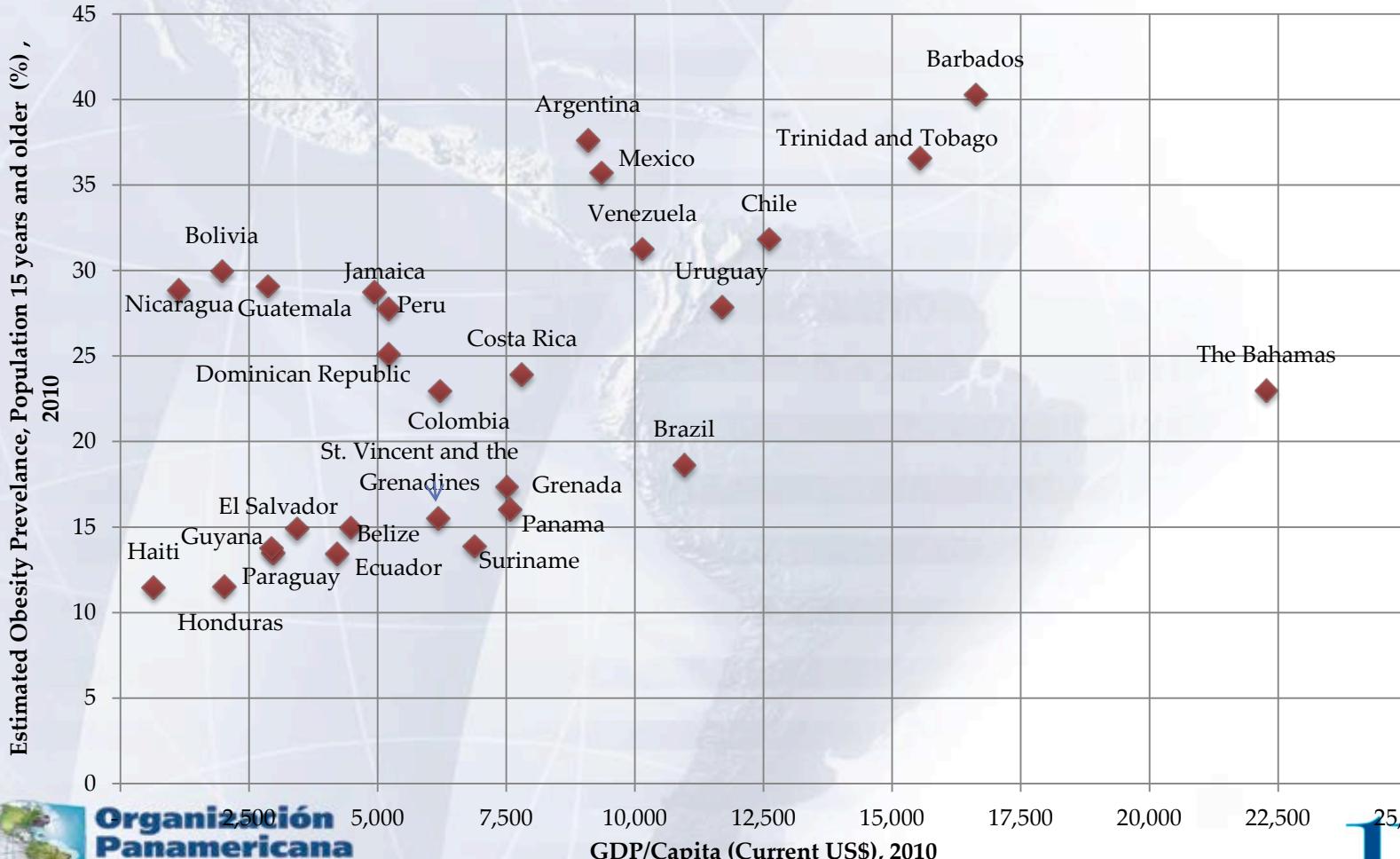


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LAC: Income and Prevalence of Obesity, Population 15 years and older (%), 2010

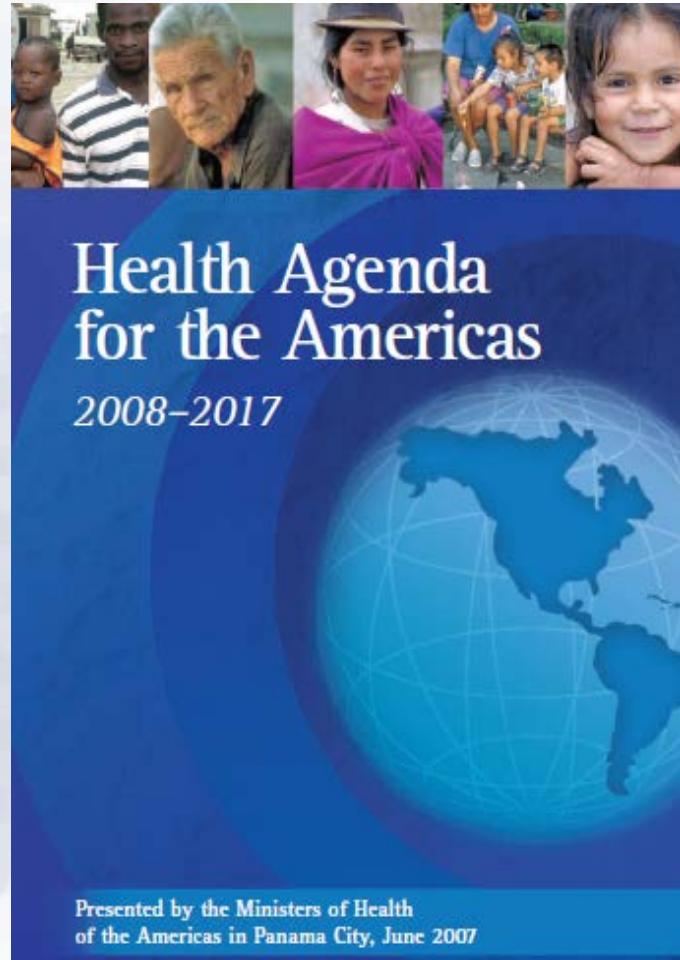
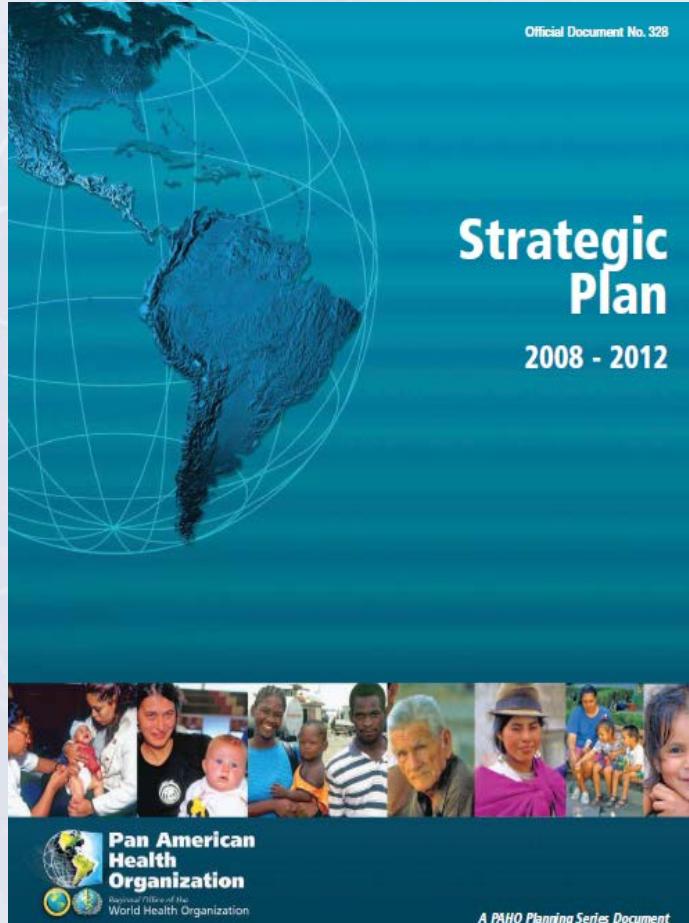


National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Nutritional transition

Summary Table: The Costs of Obesity, Diabetes and Hypertension in Latin America and the Caribbean, 2010

Region /Sub-Region	Total Population (all ages), 2010	Total Population (ages 15+), 2010	Male and Female (ages 15+), latest available year		
			Obese Population	Hypertensive Population	Diabetic Population
Latin America and the Caribbean	583,586,852	421,567,670	107,825,080	159,488,959	35,980,133
<i>Prevalence Rate, Population 15 years and older (%)</i>			25.6%	37.8%	8.5%
Annual Total Costs , Millions of US\$				\$ 71,770.03	\$ 23,387.09
of which attributable to obesity				\$ 31,578.81	\$ 14,032.25
Costs of Diab & Hype as % o fTotal NHEXp					21.2%
Costs of Diab & Hype attributable to Obesity as % ofTotal NHEXp					9.3%
Costs of Diab & Hypert as % of GDP					1.5%
					6.9%
					4.2%
					0.5%
 Non Latin Caribbean	 7,082,101	 4,884,472	 1,307,965	 2,339,699	 811,298
<i>Prevalence Rate, Population 15 years and older</i>			26.8%	47.9%	16.6%
Average Annual Treatment Costs					450
Annual Total Costs , Millions of US\$				\$ 1,052.9	\$ 527.3
Attributable to Obesity				\$ 463.26	\$ 316.41
Costs of Diab & Hype as % of Total NHEXp					30.0%
Costs of Diab & Hype attributable to Obesity as % ogfTotal NHEXp					13.2%
GDP					1.8%
					0.01%

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STRATEGIC OBJECTIVE 14

To extend social protection through fair, adequate and sustainable financing

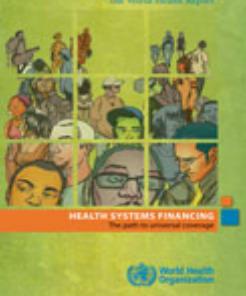
Scope

This Strategic Objective (SO) will focus on sustainable collective financing of the health system and social protection, and safeguarding households against catastrophic health expenditures. The principles set out in resolution WHA58.33 and PAHO Resolution CSP26.R19 in 2002, "Extension of Social Protection in Health: Joint PAHO-ILO Initiative," will guide this SO.

Indicators and Targets

- Increase the percentage of population covered by any type of social protection scheme in the Region. Baseline: 46% in 2003. Target: 60% by 2013.
- Increase in the percentage of public expenditure for health, including primary health care expenditure for the countries where this information is available. Baseline: 3.1% in 2006. Target: 5% by 2013.
- Decrease in the out-of-pocket expenditures in health as percentage of the total health expenditure for those countries where this information is available. Baseline: 52% of the national expenditure in health in 2006. Target: 40% by 2013 (the Organization for Economic Cooperation and Development's [OECD] average for industrialized countries is 20%).



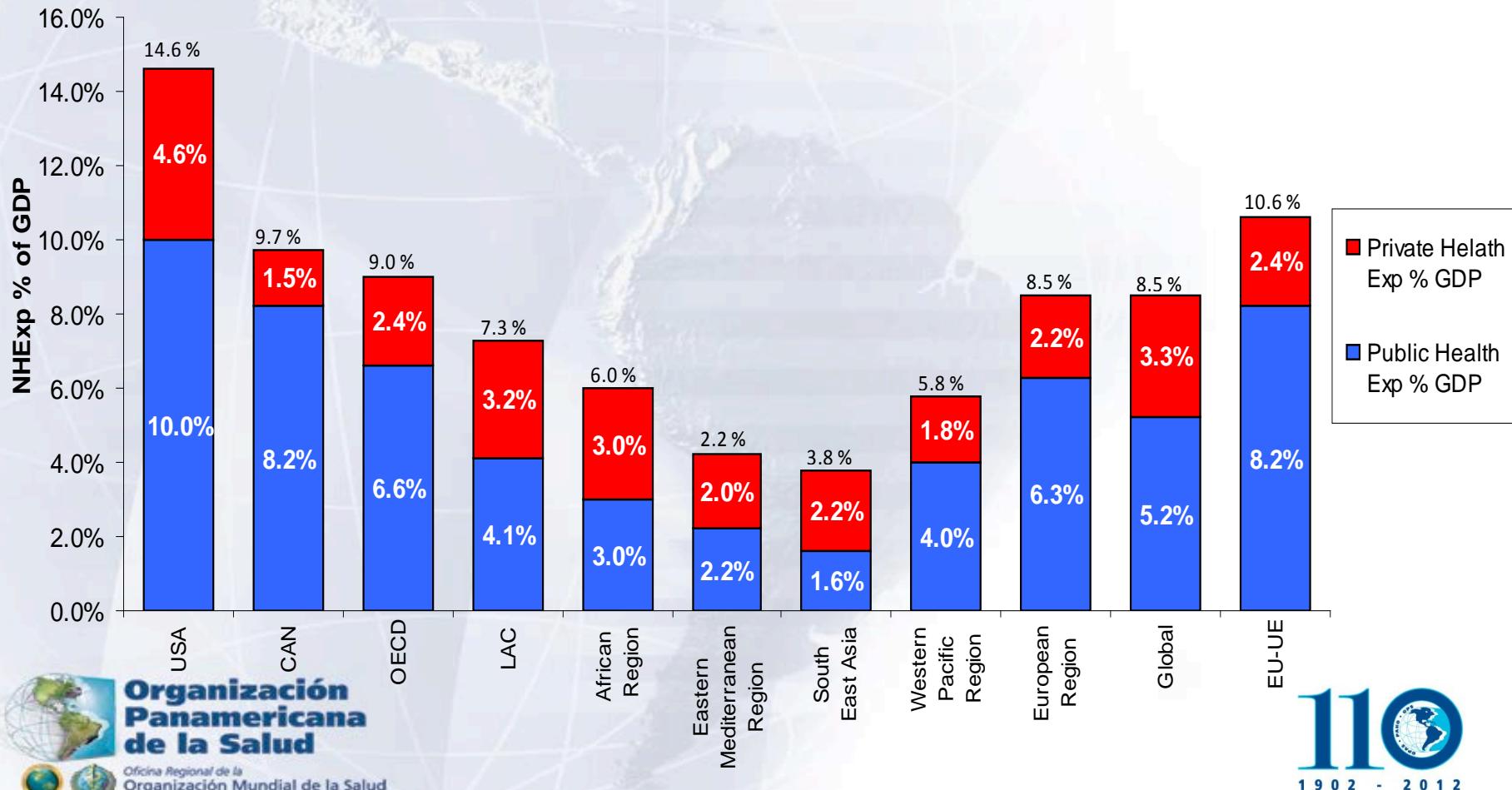


National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Sufficiency

Long-term goals should be to lower the level of direct payments to below 15–20% of total health expenditure and to increase the proportion of combined government and compulsory insurance expenditure in GDP to about 5–6%. Reaching these targets will take time in some countries, which might set themselves more achievable short-term goals. The transition may seem daunting but great strides have recently been made by many countries, including countries with limited resources.

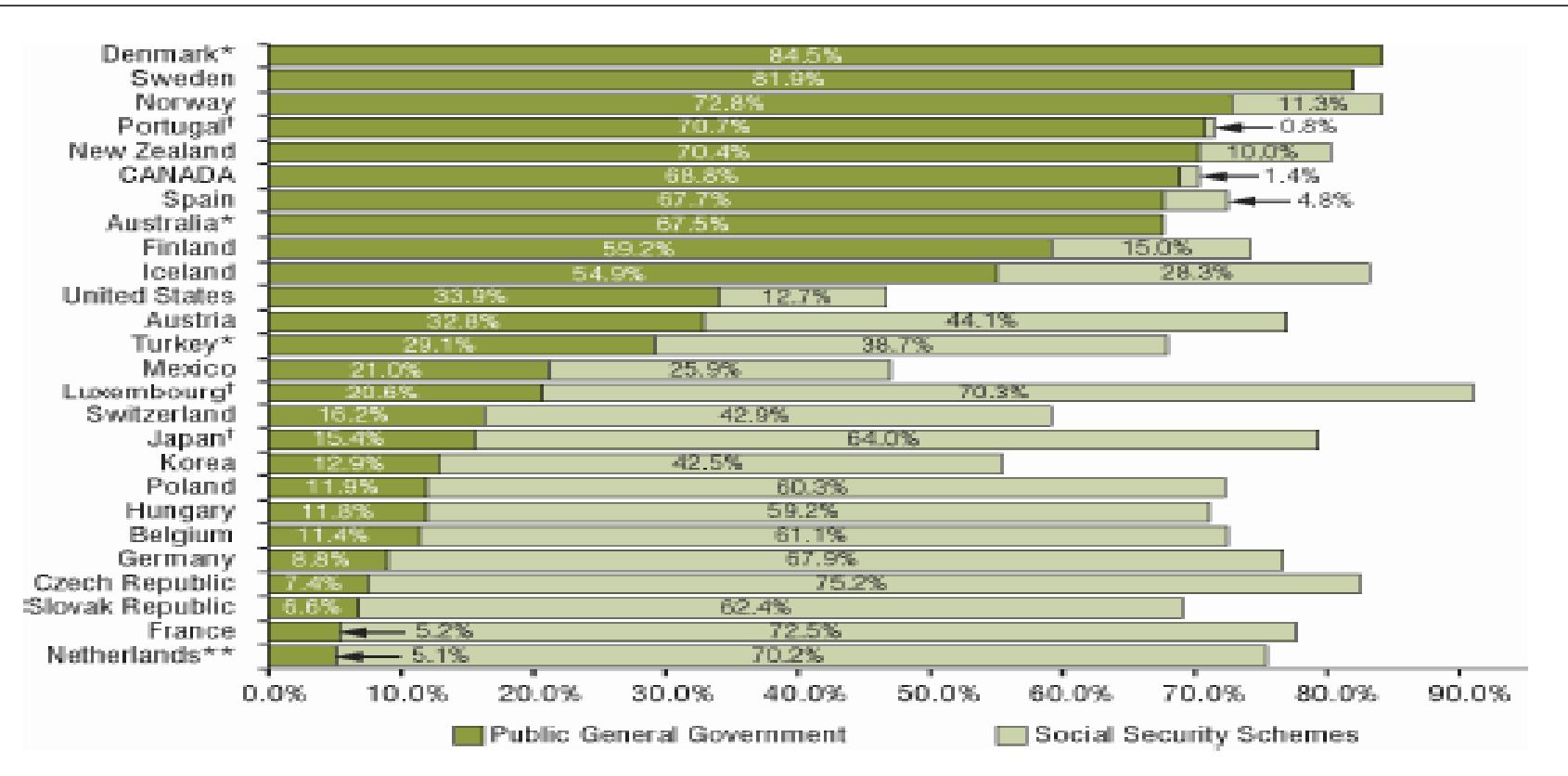
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Public-Private Health Expenditure % of GDP 2010



National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Sufficiency

Figure 49: Percentage of Total Health Expenditure Financed by the Public Sector, by Source of Finance, 26 Selected Countries, 2008



Notes:

* Data for 2007.

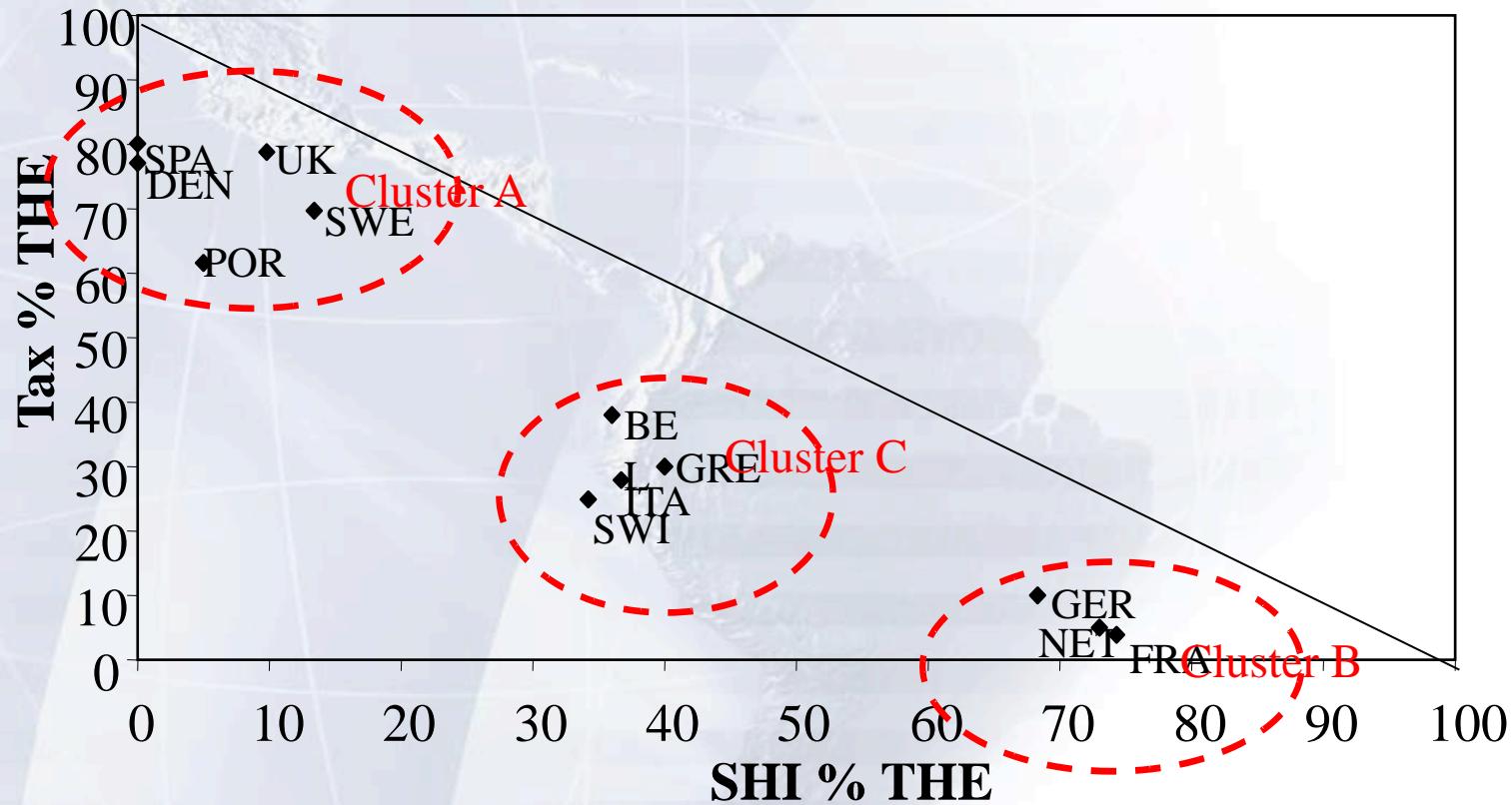
† Data for 2006. (The percentages for Japan do not add up to the total in Figure 48 because capital expenditure financed by the public sector could not be distributed between the two sources of finance.)

** Share of current health expenditure.

Source:

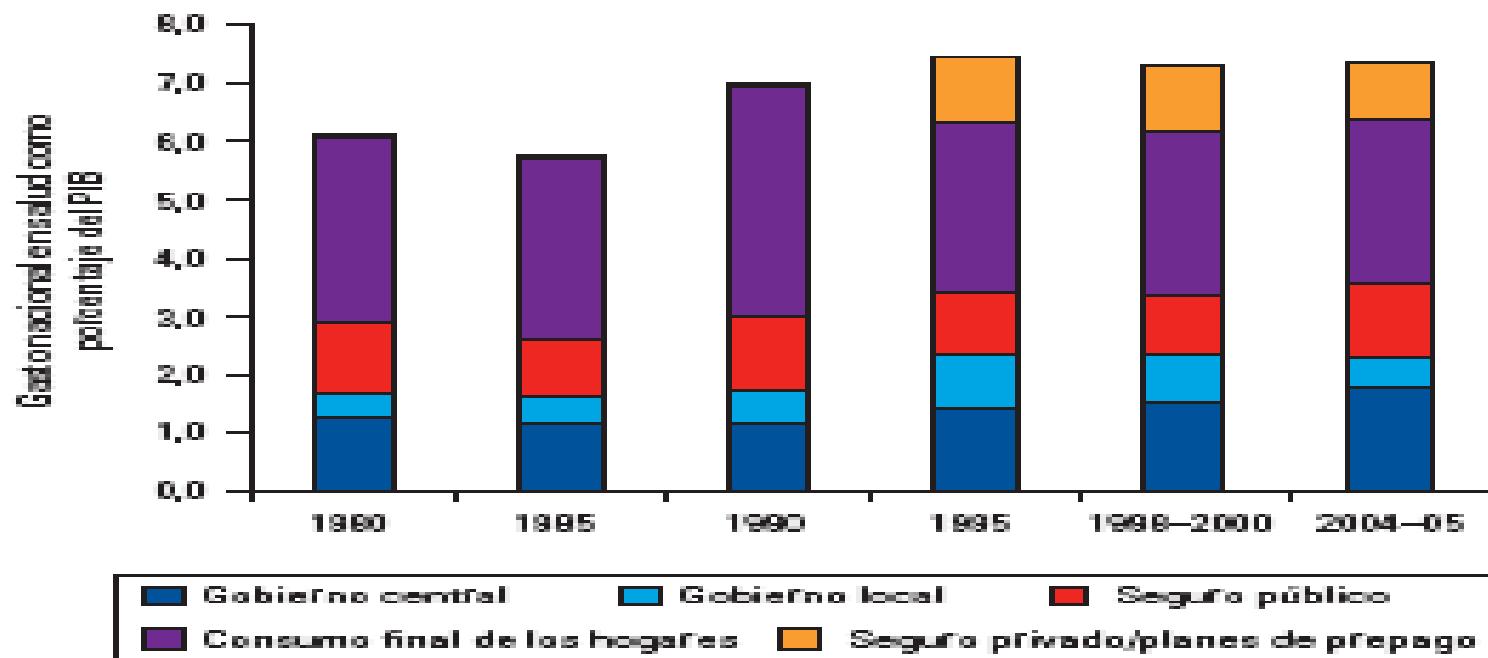
Organisation for Economic Co-operation and Development, *OECD Health Data 2010* (June edition) (Paris, France: OECD, 2010).

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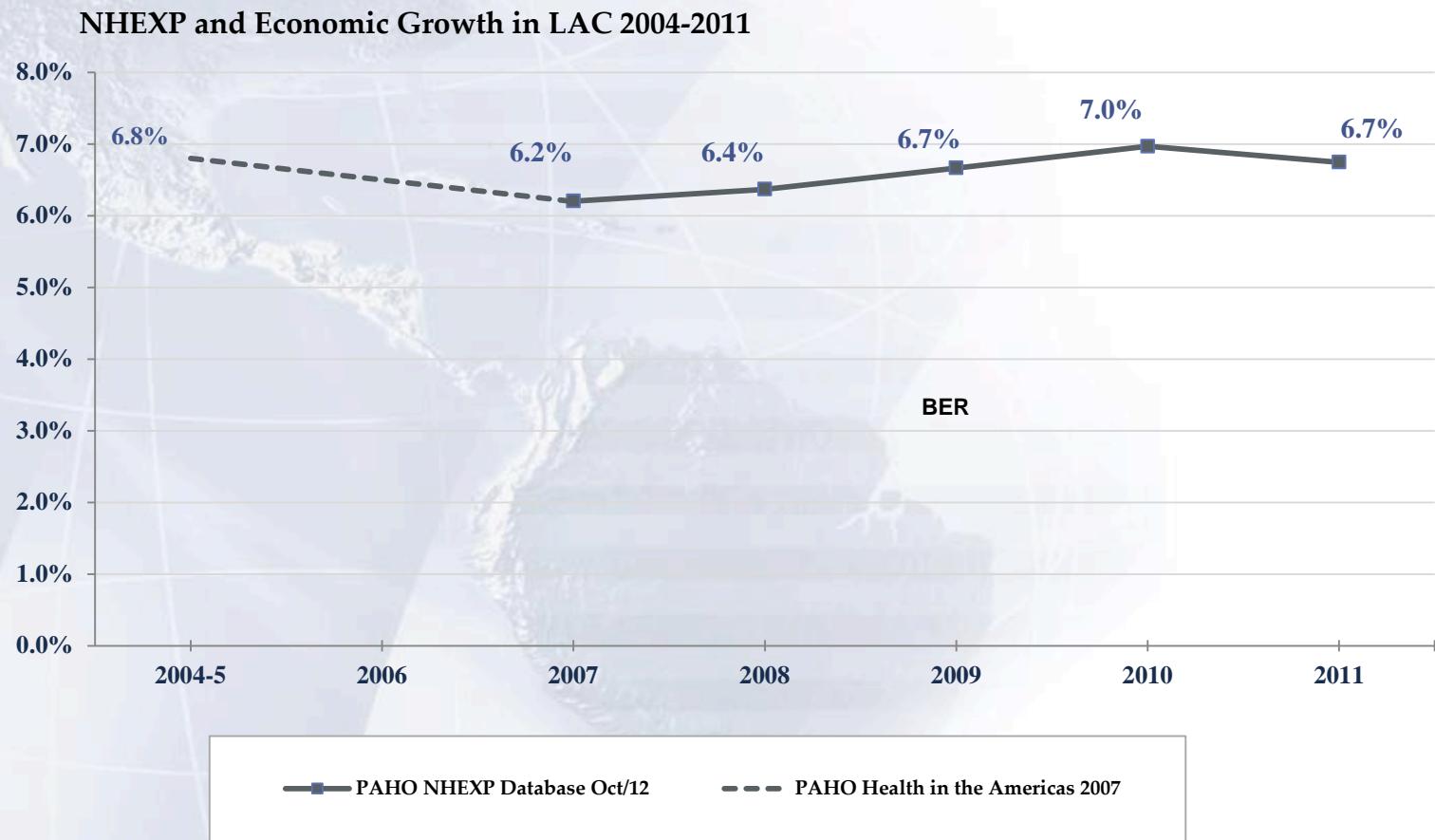
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FIGURA 1. Cambios en la composición del gasto nacional en atención de salud a través del tiempo, América Latina y el Caribe, 1980–2005.



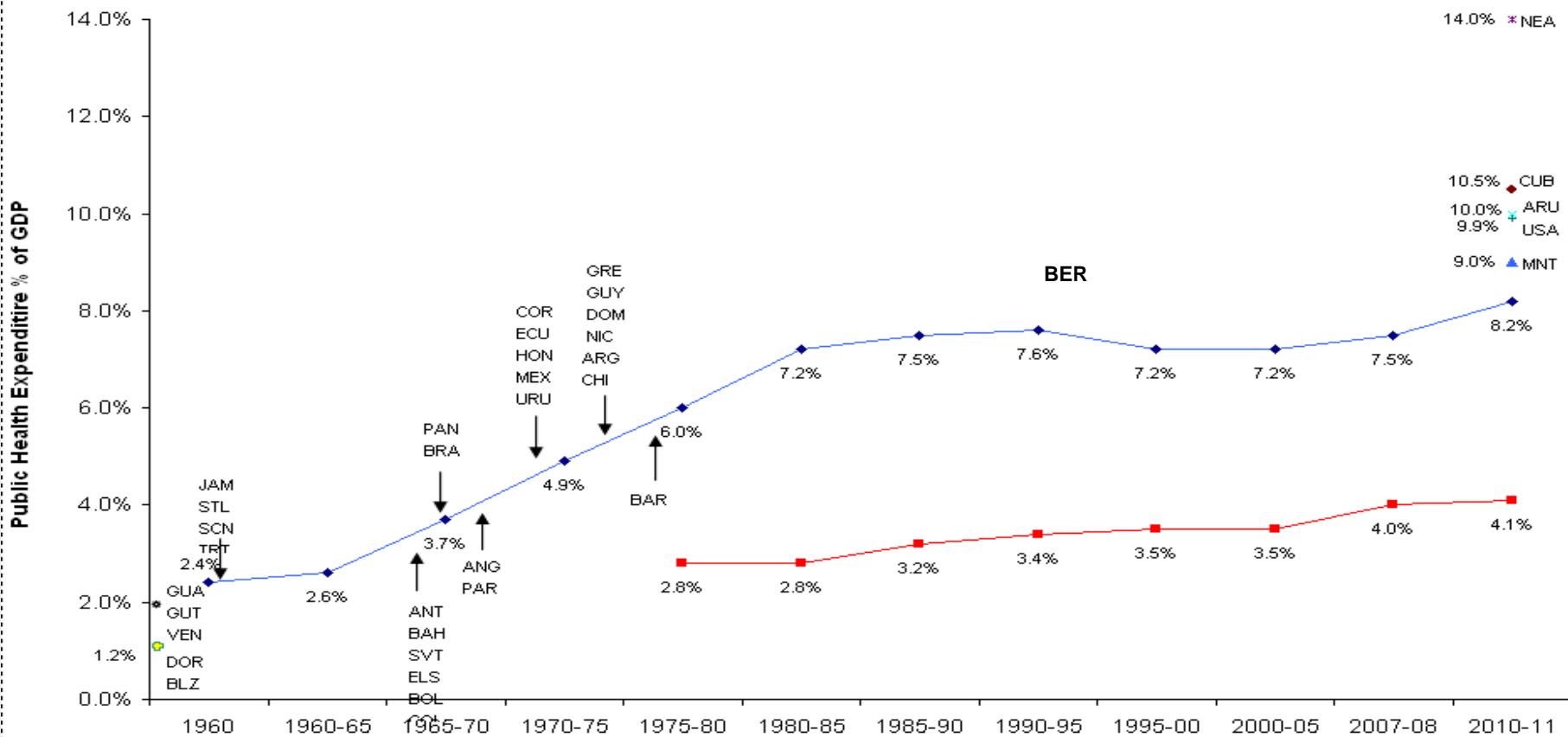
Fuente: Organización Panamericana de la Salud, Área de Fortalecimiento de Sistemas de Salud. Base de datos de gasto nacional en salud.

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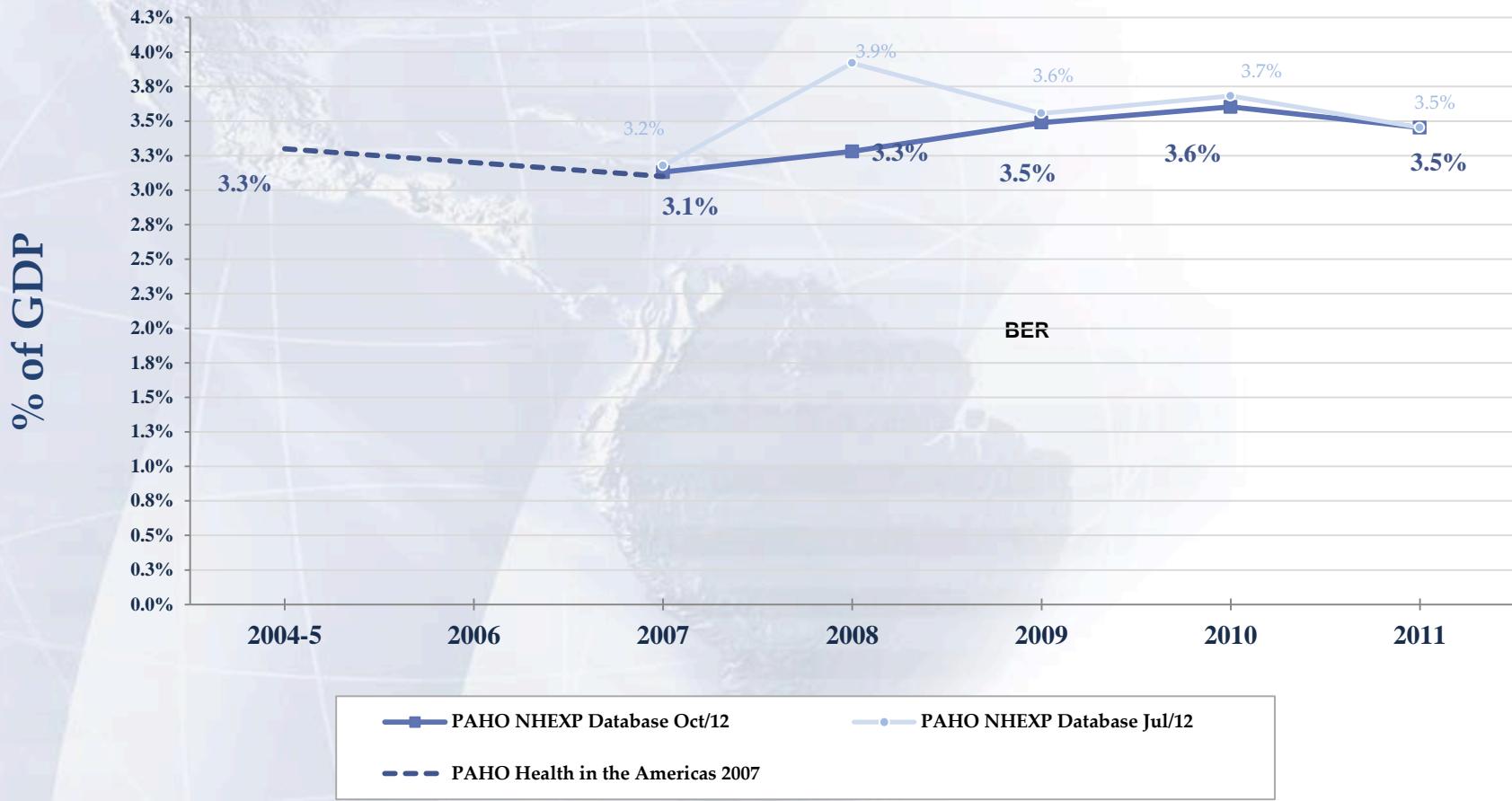
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Public Health Expenditure in LAC and 2010-11 in relation to trends in Public Health Expenditure in Canada 1960 - 2010-11

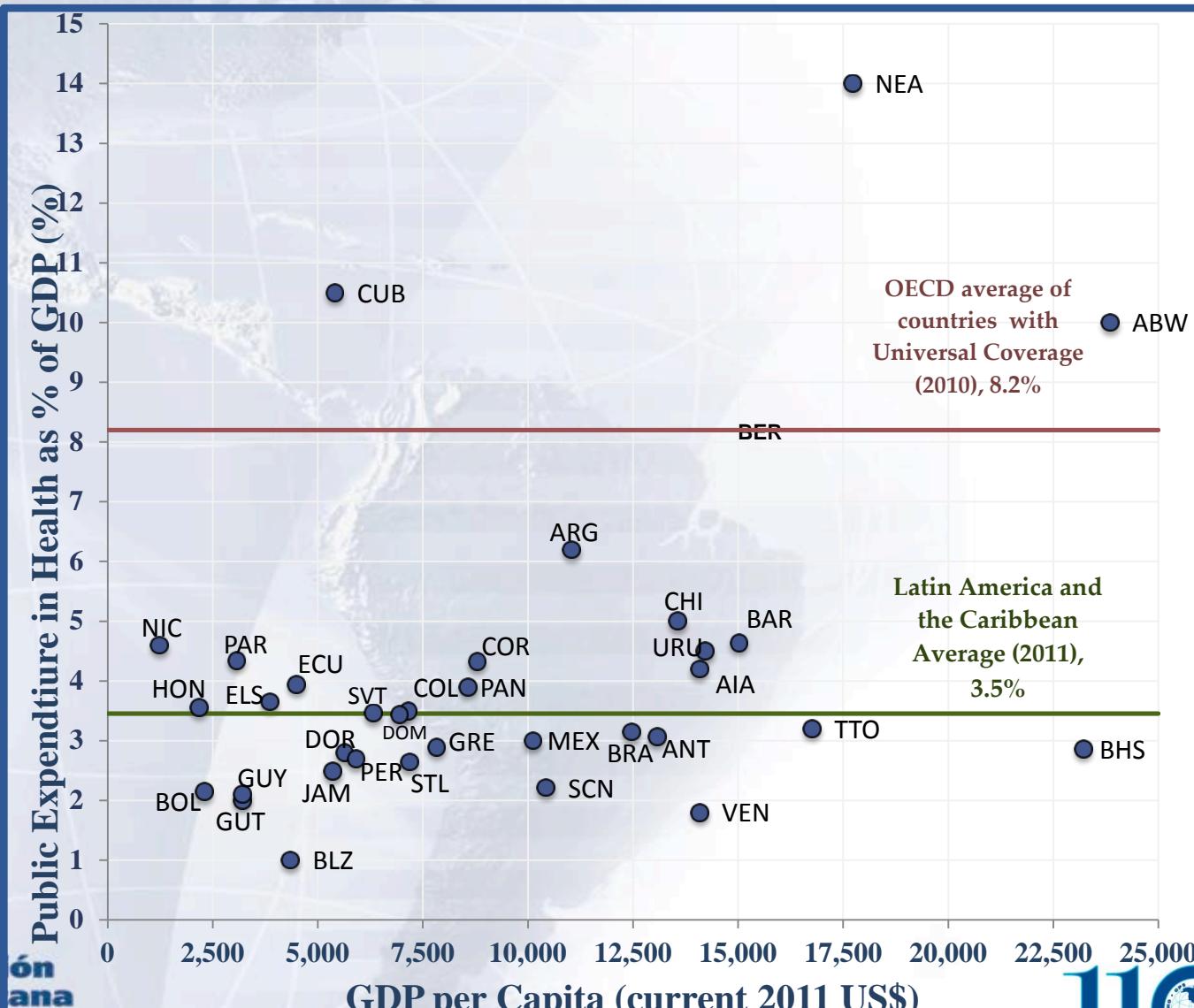


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Public Expenditure in Health LAC 2004-2011

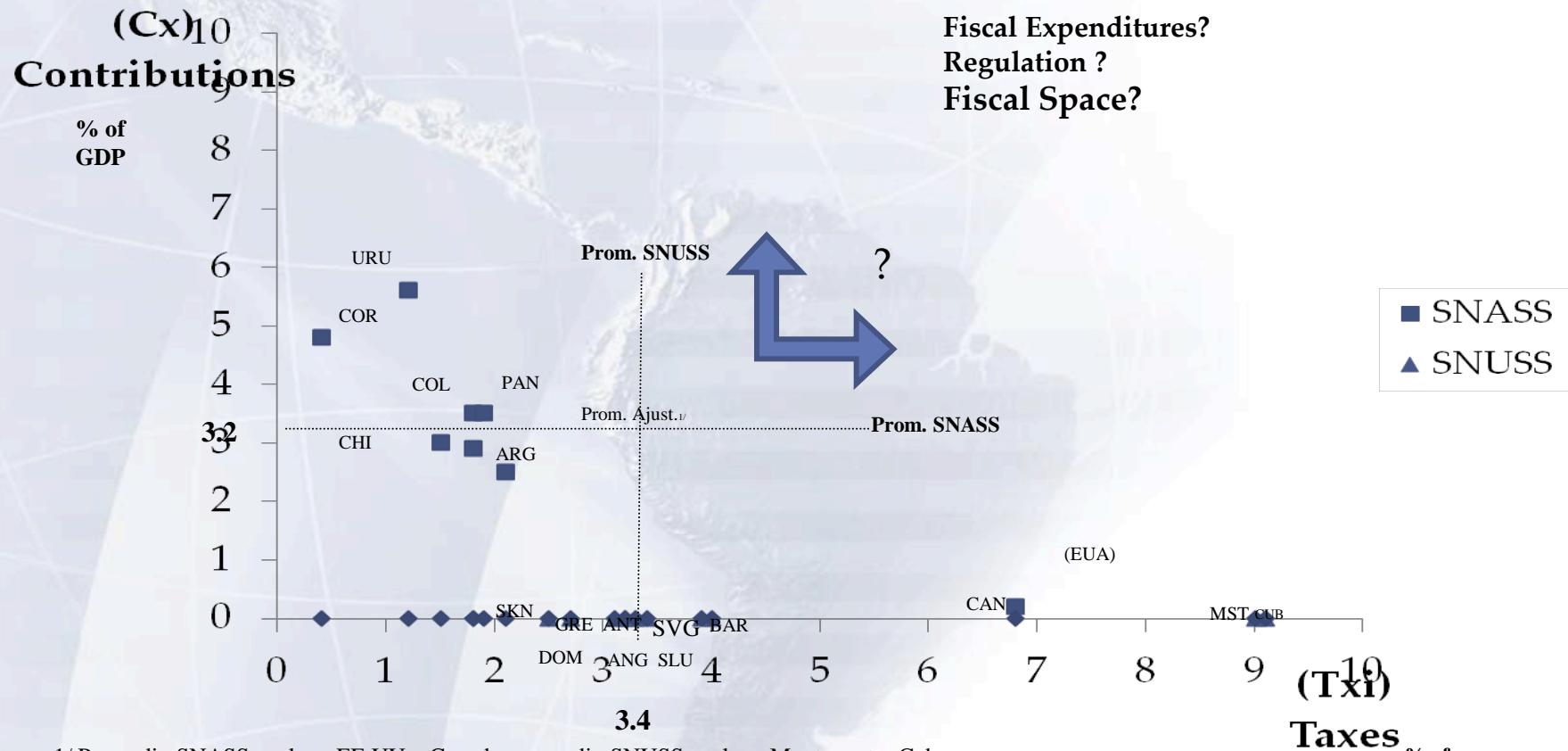


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National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Sufficiency

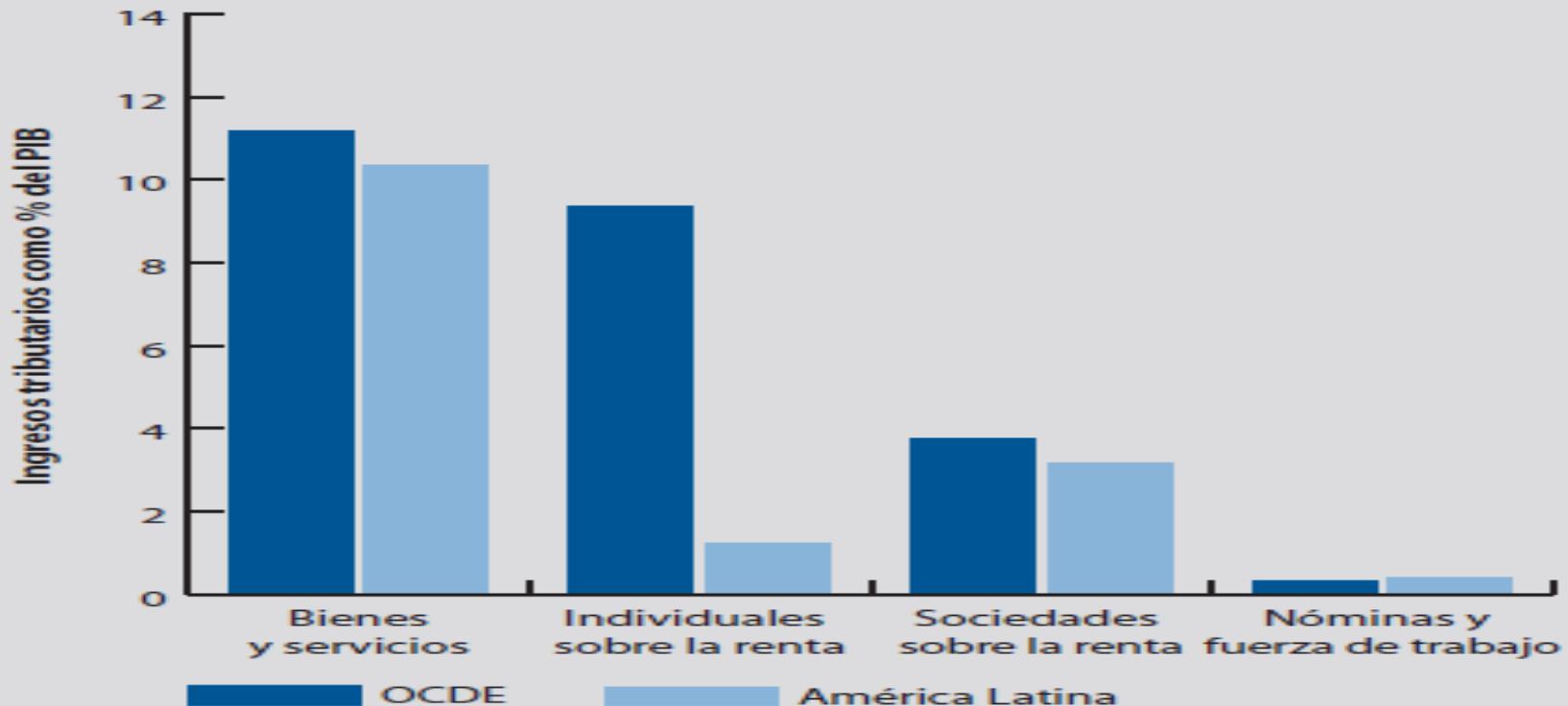
Sistemas Nacionales de Salud:
Gasto y Financiamiento de Sistemas Publicos de Salud –
Hacia la Cobertura Universal : El Triangulo del Financiamiento



1/ Promedio SNASS excluye EE UU y Canada, promedio SNUSS excluye Montserrat y Cuba.

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Sufficiency

Gráfico 2: Recaudaciones tributarias como % del PIB, por región, 2005

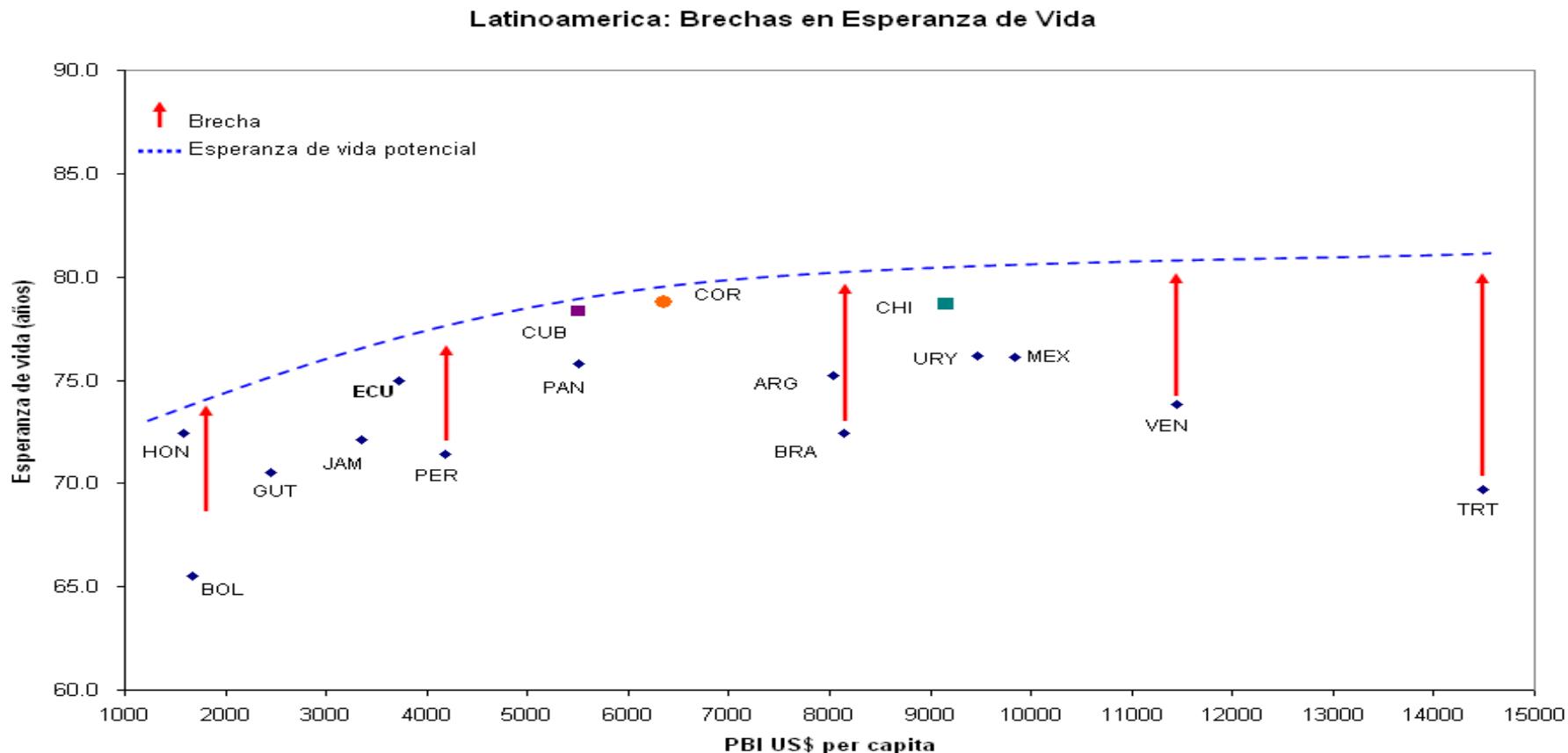


Fuente: Adaptado de la OCDE, *Perspectivas Económicas de América Latina 2009*, Gráficas 4.1 y 4.5, pp. 139-140.

See: Puryear and Malloy (2010) Inter-American Dialogue. Síntesis # 3; June.

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Efficiency

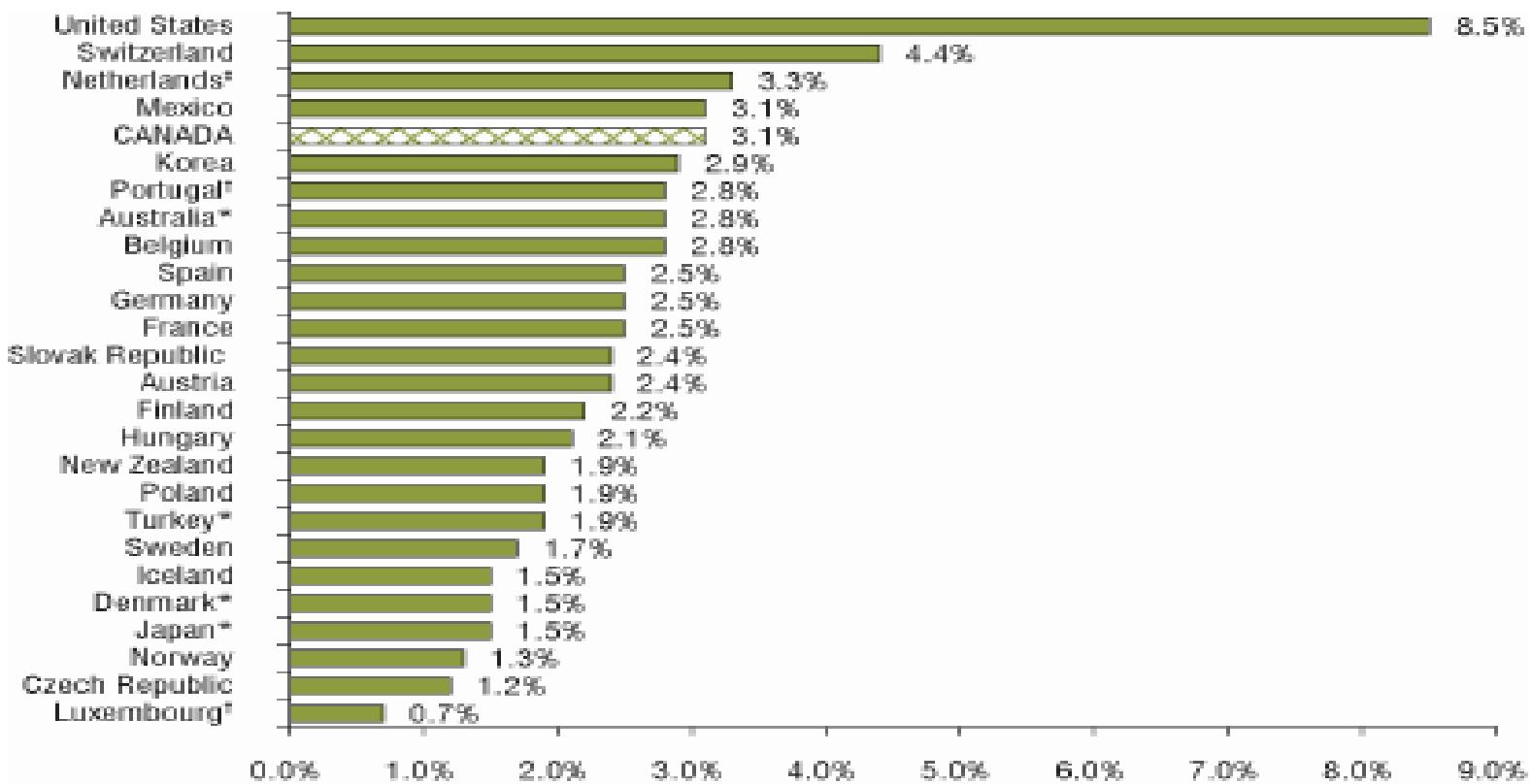
La mayoría de los países están por debajo del nivel de esperanza de vida potencial; la esperanza de vida que podría lograrse con el nivel de desarrollo económico alcanzado (PIB Per capita) ...



Fuente: Banco Mundial; OMS Tablas de vida; CEPAL, indicadores sociales; OPS, Indicadores Basicos 2009

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Equity

Figure 41: Private-Sector Health Expenditure as a Percentage of GDP, 26 Selected Countries, 2008



Notes:

* Data for 2007.

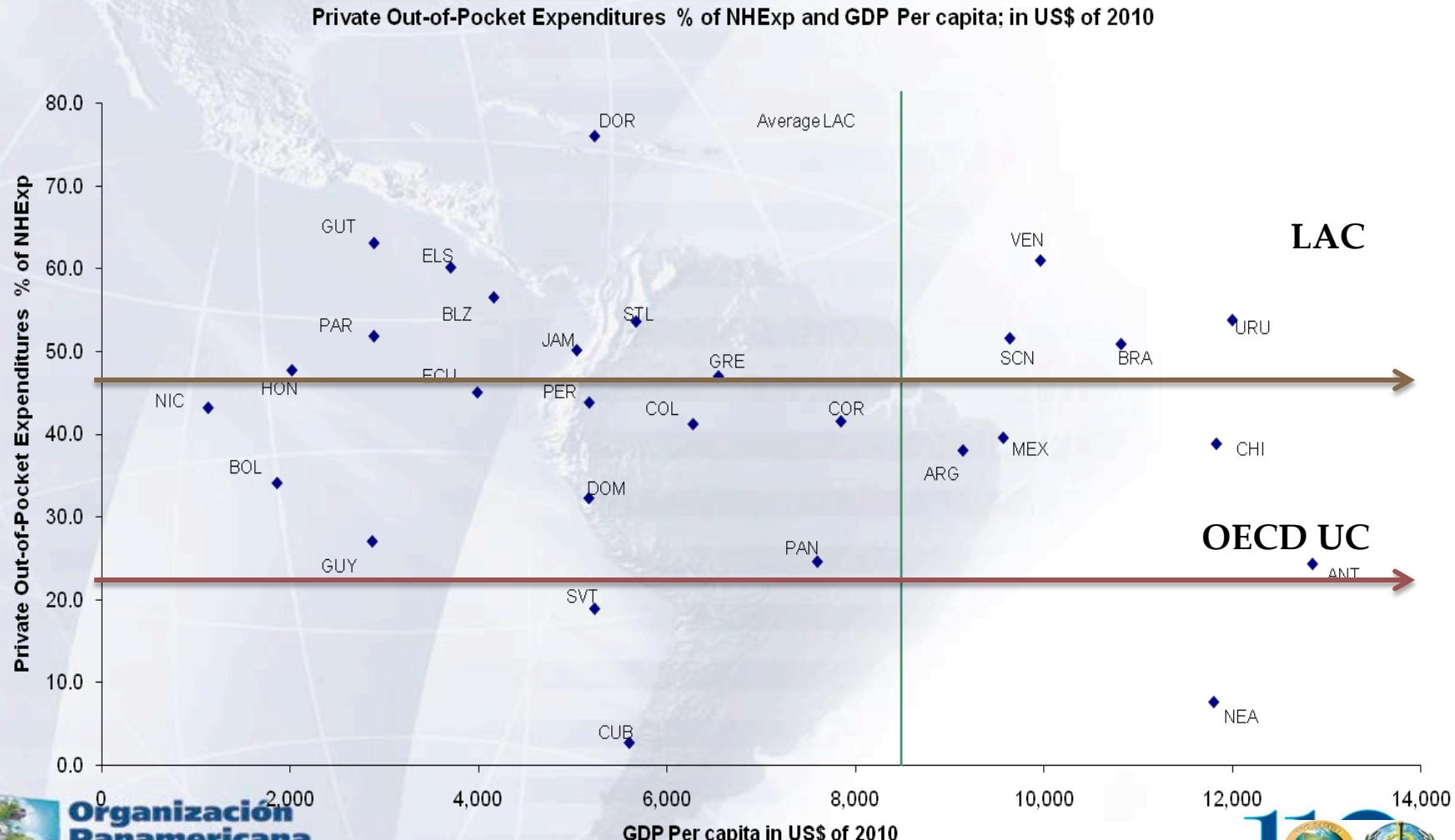
† Data for 2006.

‡ Data for 2002.

Source:

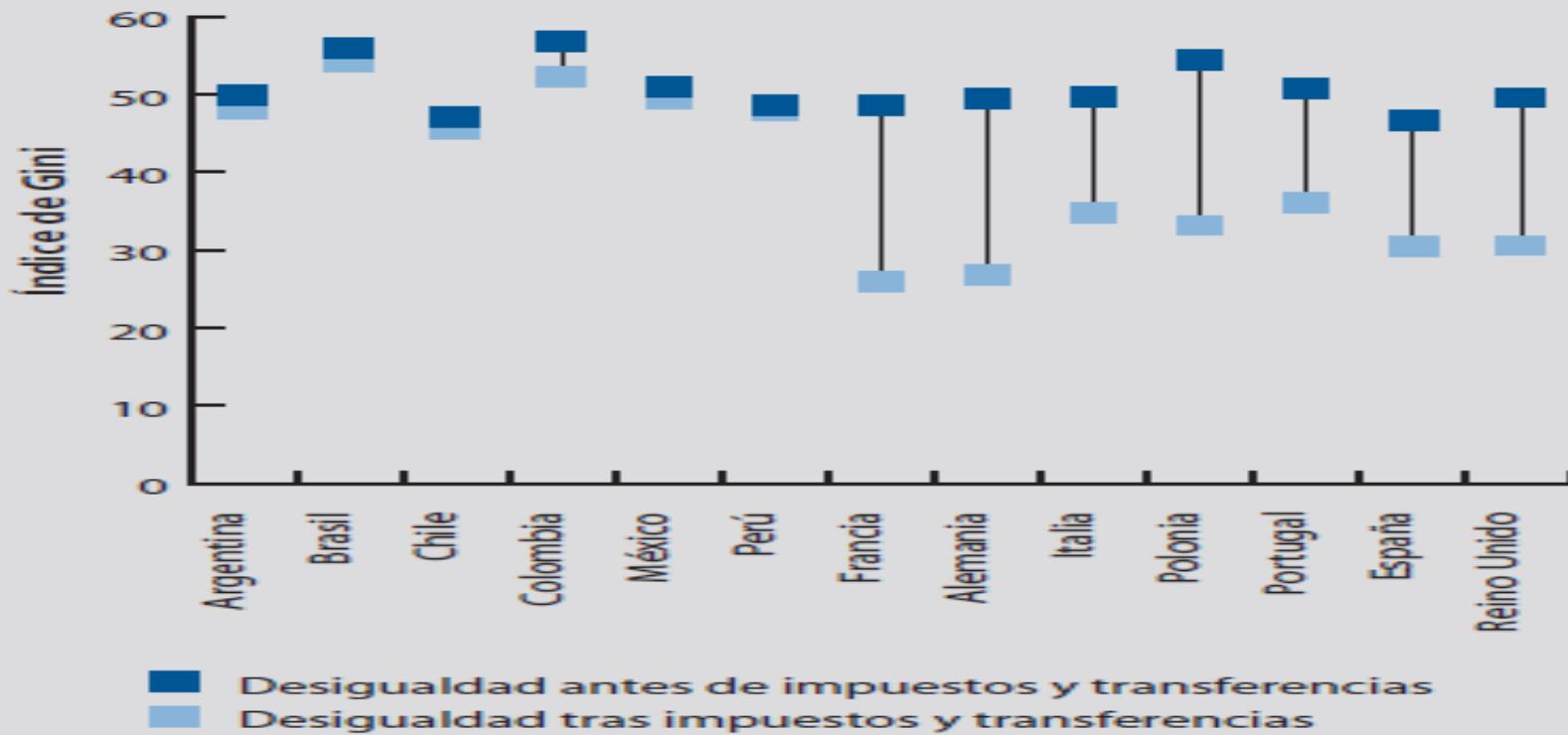
Organisation for Economic Co-operation and Development, *OECD Health Data 2010* (June edition) (Paris, France: OECD, 2010).

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Equity



National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Equity

Gráfico 1: Impacto de impuestos y transferencias en la desigualdad, países latinoamericanos y europeos, 2008



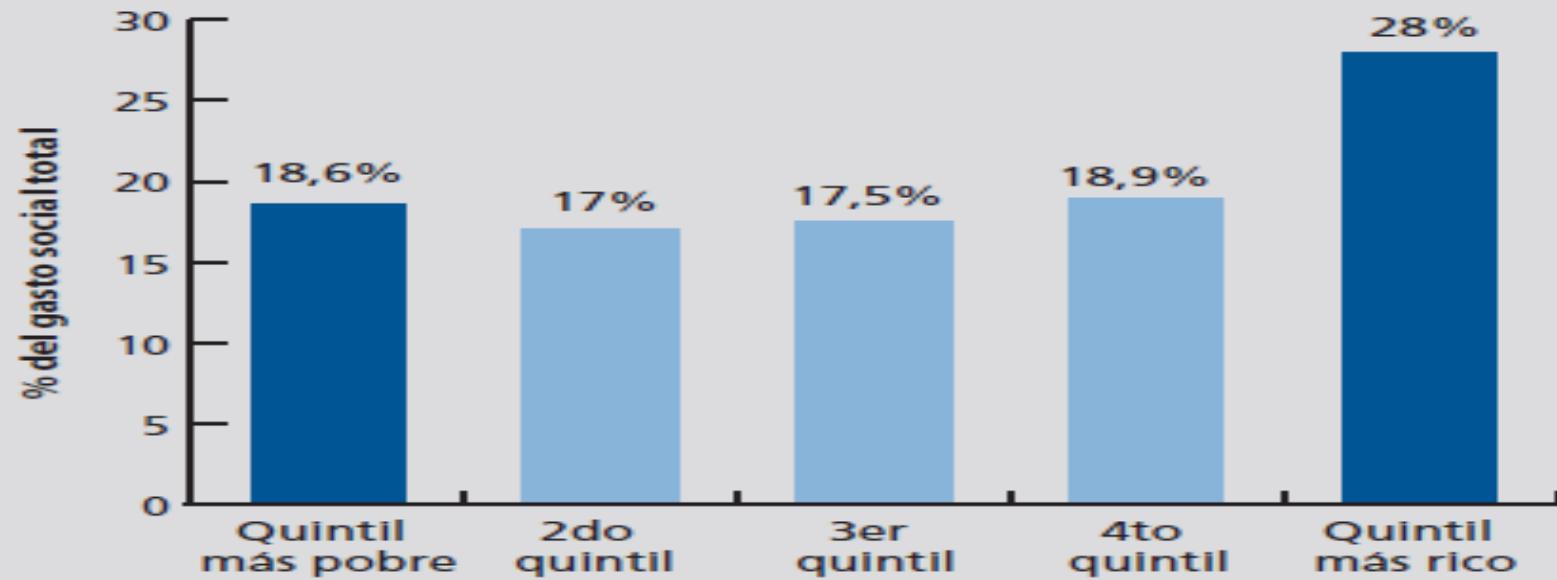
Fuente: Adaptado de la OCDE, *Perspectivas Económicas de América Latina 2009*, Gráfica 4.1, p. 130.

See: Puryear and Malloy (2010) Inter-American Dialogue. Síntesis # 3; June.

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Equity

Crear una política fiscal a favor de los pobres o re-distributiva será duramente resistida por aquellos que se benefician del status quo.....

Gráfico 3: Proporción del gasto social recibido por distintos grupos de ingreso, América Latina, 1997-2004

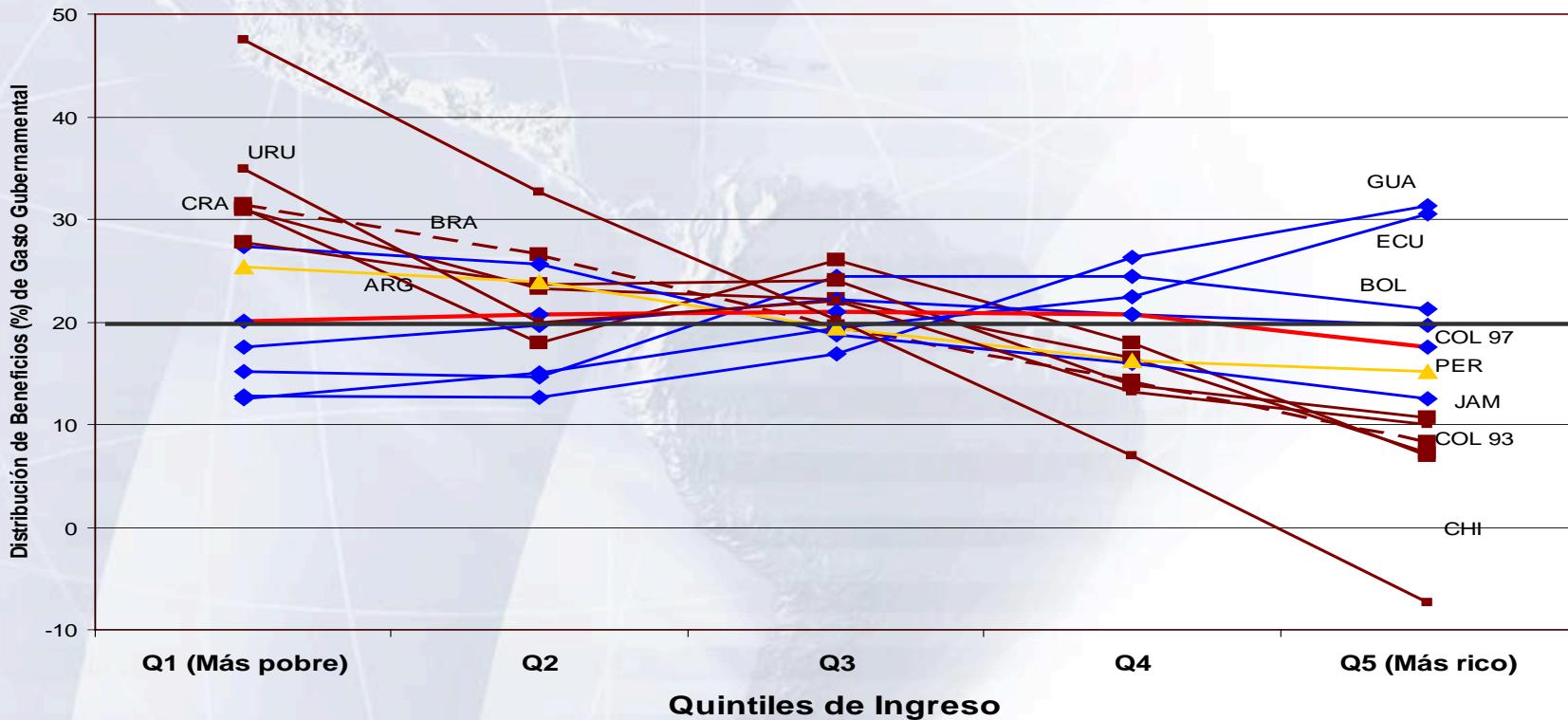


Fuente: Adaptado de CEPAL, *Panorama social de América Latina 2007*, Gráfica II.11, p. 117.

National Health Care Expenditures in Latin America and the Caribbean: Trends, Macroeconomic and Fiscal Challenges: Equity

Los sistemas públicos están fallando en tener un impacto significativo en favorecer a los pobres y reducir las desigualdades

Impacto Distributivo del Gasto Público Según Tipo de Sistemas de Salud



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Asesor Principal, Economía y Financiamiento en Salud
Área de Sistemas de Salud
OPS- Washington DC.
suarezru@paho.org
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