WORKING PAPER

HEALTH AND SOCIAL CARE ACCOUNTS

1998 - 2003

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Explanation of legend:

* = preliminary figure

 $= \overline{\text{nil}}$

blank = a figure is logically not possible 1998-2000 = 1998 until and including 2000

In case of rounding, it is possible that the sum of the totals is not completely corresponding to the added sum of the data.

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Summary

In addition to the regular working programme, Statistics Netherlands is working on the execution of a strategic research programme, in which additional attention is paid to a number of selected subjects. One of these subjects concerns statistics in the field of health and social care. The main objective of this partial programme, named Strategic Project Care, is the development of a complete, coherent and consistent statistical picture of the money flows, the care providers, the users of care and the health and welfare status of the population. To realise this main objective four partial projects are created.

In February 2002 as a first concrete result of the Strategic Project Care a study report of the new statistics, "Health and Social Care Accounts" (hereafter Care Accounts) became available. This new statistics is the successor of the yearly statistics "Cost and Financing of Health Care". In this report, titled "Working Paper Health and Social Care Accounts 1998-2000", emphasis is put on the description of the goals, the methodology and the intended results of the statistics on health and social care.

In the reports "Health and Social Care Accounts 1998-2001" and "Health and Social Care Accounts 1998-2002" published in previous years, account is given on the results and further development of the construction of this statistics. This account relates primarily to the addition of data on the development of prices and quantities and data on employment (number of people working and manpower). Furthermore, a quantitative understanding is presented in the links between the data in the Care Accounts and the data on care in the National Accounts. The results presented in these reports relate also to a quantitative insight in the links between the expenditure on care as presented in the Care Accounts and the similar data in the Care Statement of the Ministry of Health, Welfare and Sports.

In this publication, "Health and Social Care Accounts 1998-2003", only for the international requested information new developments are presented. For the first time the complete System of (Health) Accounts is presented. This means that data are available on the interlinked system of providers by financing sources and functions both for the totality of activities as well as health care activities. Also the mode of production of the providers of (health) care is presented in detail.

In the methodology improvements are introduced relating to the calculation of constant prices (developments of quantities of services) and employment. Furthermore, the reporting period in is expanded with the year 2003.

Data are presented on the years 1998, 1999, 2000 and 2001 (definite data), 2002 (nearly definite data) and 2003 (preliminary data). Due to the revision of the National Accounts for the reporting year 2001 some times series are changed as well.

The results on the care expenditure for the period 1998 until 2003 are emphasising the main users of the statistics. These data are distinguished by 21 (clusters of) actors. In this context, actors can be described as (groups of) independent organisational units that perform activities in the health and social care field, like hospitals, general practitioners, nursing homes and home health institutions. The expenditure on health and social care are specified by the most important sources of financing and by functions (clusters of activities).

It is attempted that by the end of the year 2005, the statistics Care Accounts will be available as a complete product (in terms of the description of the complete field of health and social care and of all the intended types of data).

The most important new elements of the statistics Care Accounts published so far relate to:

- A distinction in four main user goals of the statistics: an integrated description of the complete area of health and social care (Care Accounts), a description in institutional terms (National Accounts), a description according to the division in the Care Statement and a description according to the division in the OECD/Eurostat classifications,
- The completeness of the description of the area of health care: added are among others practices for alternative health care treatment, private clinics and practices of psychologists and psychotherapists,
- The completeness of the description of the area of social care: added are among others homes for the elderly, family replacement homes, day centres for the handicapped, day nurseries and institutions for social work. Although not yet the complete area of social care is described in terms used by Statistics Netherlands, the coverage of the "care area" in political and societal relevant sense is complete,
- The specialisation of the totality of the expenditure of health and social care by the sources of primary financing: until now financing was only partly presented,
- The specialisation of the totality of the expenditure of health and social care by functions: until now no data were created on the (clusters of) activities within the health and social care process,
- The presentation of the connecting links with National Accounts: the differences between the production value of health and social care in the National Accounts and the care expenditure as presented in the Care Accounts are determined,
- A specification of the development of the care expenditure in prices and quantities, and
- Employment in the area of care: insight is presented in the employment expressed in terms of numbers of people (employees and self-employed) as well as full-time equivalents.
- A quantitative overview of the differences in expenditure between the statistics of the Care Accounts and the Care Statement as produced by the Ministry of Health, Welfare and Sports in the Netherlands.

Core data on Health and Social Care, 1998-2003*

	1998	1999	2000	2001	20 02	2 003*	1999	2000	200 1	2 002	2003*
	million eu ro						percenta ge cha	a nge			
Ex pen diture / Cost											
Health care expenditure	23 32 7	24 963	26 555	29 742	33 2 10	35 774	7,0	6,4	12,0	11,7	7,7
So d al care e xpe nditure	12 06 9	12 906	14 092	15 538	17677	19 445	6,9	9,2	10,3	13,8	10,0
Cost of ad min istration organisations	1 45 9	1 519	1 525	1 644	1719	1 741	4,1	0,4	7,8	4,6	1,3
Care expenditure	36 85 5	39 387	42 173	46 923	52606	56 960	6,9	7,1	11,3	12,1	8,3
So urc es of fina ncing											
Government and Social security	25 70 5	27 037	29 030	32 005	36 0 10	39 210	5,2	7,4	10,2	12,5	8,9
Pri vate insurance	4 79 6	5 199	5 294	6 044	7087	7 691	8,4	1,8	14,2	17,3	8,5
Other sou rœs of finan d ng	6 35 4	7 152	7 849	8 874	9508	10 059	12,5	9,7	13,1	7,1	5,8
Care expenditure	36 85 5	39 387	42 173	46 923	52606	56 960	6,9	7,1	11,3	12,1	8,3
Division in functions											
Curative care	7 46 0	7 911	8 348	9 261	10651	11 766	6,0	5,5	10,9	15,0	10,5
Med ical care	7 03 1	7 583	8 217	9 468	10 4 04	10 880	7,8	8,4	15,2	9,9	4,6
Med ical goods	6 63 2	7 118	7 609	8 356	8998	9 629	7,3	6,9	9,8	7,7	7,0
So dial care	8 35 1	8 989	9 905	10 683	12437	13 688	7,6	10,2	7,9	16,4	10,1
Other a divities	7 38 1	7 787	8 094	9 155	10 1 16	10 996	5,5	3,9	13,1	10,5	8,7
Care expenditure	36 85 5	39 387	42 173	46 923	52606	56 960	6,9	7,1	11,3	12,1	8,3
	euro										
Care expenditure per capita	2 34 6	2 491	2 648	2 924	3258	3 510	6,2	6,3	10,4	11,4	7,8
	%										
Care expenditure as a percentage of Gross											
Dome stic Product (GDP)	10,4	10,5	10,5	10,9	11,8	12,5					
Index data as some	(1998=100)										
In dex data on care											
Health care expenditure	100	107	114	128	142	153					
So dial care expenditure	100	107	117	129	146	161					
Po pulation in the Netherlands	100	101	101	102	1 03	103					
Expen diture p er capi ta	100	106	113	125	1 39	150					
Care expenditure in constant prices	100	102	104	109	1 14	120					
Man power (in FTE)	100	103	107	112	1 17	120					

So urce: Statistics Netherlands

1. Introduction

In February 2002 Statistics Netherlands produced, within the larger framework of the Strategic Project Care, the study report "Working Paper on Health and Social Care 1998-2000". In this report, much attention was given on, amongst others, the goals, the methodology, the results aimed at and the phased approach of the new statistics on Care Accounts. In this report, also the results of the construction of this statistics are presented. It concerns data on care expenditure from the years 1998 until 2000. The care expenditure is concentrating on the user goals of this statistics. For the Care Accounts these data are distinguished in 21 (clusters of) actors. In this context, actors can be described as (groups of) independent organisational units that perform activities in the health and social care field, like hospitals, general practitioners, nursing homes and home health institutions. Furthermore, expenditure is differentiated by the most important sources of financing and by functions (clusters of activities). Finally, a (predominantly qualitative) insight is presented in the links between the data in the Care Accounts and the data in the Care Statement of the Ministry of Health, Welfare and Sports (VWS). An overview is also presented on the links with the data in the old statistics "Cost and Financing of Health Care".

In the reports of previous years — Working Paper Health and Social Care Accounts 1998-2001 and Working Paper Health and Social Care Accounts 1998-2002 — account is given on the results of the construction of Care Accounts. This account relates to the addition of data on the development of prices and quantities and data on employment (in terms of persons employed and manpower) in the care area. Furthermore, a quantitative link is presented between the data in the Care Accounts and the data on care in the National Accounts. These results relate to the presentation of an overview in quantitative terms of the links between the care expenditure as presented in the Care Accounts and the similar data in the Care Statement of the Ministry of Health, Welfare and Sports of the Netherlands. Finally, the reporting period is expanded with the year 2002.

In the report at hand – Working Paper Health and Social Care Accounts 1998-2003 – new developments for the international requested information are presented. For the first time the complete System of (Health) Accounts is presented according to the classifications of the ICHA. This means that data are available on the complete system of providers by financing sources and functions both for the totality of activities as well as health care activities separately. Also the expenditure by the mode of production of the providers of (health) care is presented in detail.

No other new subjects are presented. Improvements have been introduced in the methodology used for the calculation methods of data in constant prices (calculation of quantities of goods and services supplied) of the care branch. The methodology for the calculation of the employment data are improved as well. Finally, due to the revision of the National Accounts in the Netherlands (for the reporting year 2001) time series needed to be adapted. 2001 Is the revision year of National Accounts.

Furthermore the reporting period is enlarged with results on 2003. Now data are presented on the years 1998, 1999, 2000 and 2001 (definite data), 2002 (nearly definite data) and 2003 (preliminary data).

National results on the statistics are also presented in Statline, the statistical database of Statistics Netherlands (http://www.cbs.nl/statline).

The area of care described in this publication did not change compared to the previous one. This means that the Care Accounts comprise the area of health care and large parts of the social care, like nursing homes and homes for the elderly, home care institutions, general public social care, social pedagogical services, day nurseries and relief homes. The parts of social care not yet included in the Care Accounts concern public social care for specific groups of the population, social care for the elderly, institutions supplying social advice and information, social care for the youth, social emancipation and integration and other social supervision. This implies that the area that is described in the Care Accounts contains the complete area as presented in the Care Statement of the Ministry of Health, Welfare and Sports, supplemented by amongst others day nurseries and occupational health organisations.

Of the various types of actors, only the providers of care and the administration and management units are taken into account. The other types of actors are not yet included (for a specification see annex 4).

Furthermore, only the differentiation of the functions on the area of health care is included. In the area of social care, no functions are distinguished at this moment. All activities related to social care are assigned to the function of social care.

Finally, the financing data as presented only relate to the primary financing institutions (organisations/patients/clients directly paying the actors).

In view of the importance, the goals and the methodology of the statistics Care Accounts are presented again, before the results are dealt with in detail. For more detailed information on the products, the introductory path and sources used, we refer to the "Working Paper on Health and Social Care Accounts 1998-2000". In the original project planning it was envisaged that at the end of 2003 (with the finalisation of phase 3) the complete statistics on the Care Accounts would be available, in terms of the area described and all types of variables. During 2003 it became more and more obvious that the work to be done in phase 3 was so all encompassing and complex, that the original planning was far too optimistic. It is planned, however, that the Care Accounts will be finished by the end of 2005.

2. Objectives

The objectives that are aimed at with the development of the new statistics Care Accounts can be described more precisely as follows:

- To provide a complete, coherent, consistent and integrated statistical description of the area of care. The functional approach takes the lead in this description.
- To present a view on the connection with the data supplied in the coordinated framework of National Accounts of Statistics Netherlands (more precisely the Care Module that is going to be developed in this context) and the Labour Accounts, insofar the data relate to the area of care. In these integrated frameworks, the institutional approach takes the lead.
- To present a view on the connection with the data presented in the policy reports of the Ministry of Health, Welfare and Sports, taking into account both the area and the terminology used by the Ministry.
- To supply data for the relevant international (integrated) frameworks in the area of care, in which cross-country comparability of the data takes priority.

3. Methodology

An important starting point in the construction of the new statistics Care Accounts is the System of Health Accounts, which was developed by the OECD and endorsed by Eurostat. Fur the purposes of the statistics Care Accounts this concept is enlarged to a "System of Care Accounts", which includes social care. Central in the "System of Care Accounts" is the description of all activities in the area of health and social care. In the Care Accounts it concerns activities within the boundaries of the International Standard Industrial Classification of All Economic Activities or the European equivalent i.e. the Statistical Classification of Economic Activities in the European Union (ISIC/NACE). The relevant groups are ISIC/NACE classes 85.1 (health care) and 85.3 (social care). These activities are supplemented by care activities performed in other ISIC/NACE classes (e.g. retail trade in medical goods and transport of patients) and relevant supporting activities in the areas of health and social care (like policy, administration and management, fund raising, advice and information, training education and research). Data included in such a system describe the area of health and social care in a functional way.

In this report care is being described in the following way:

Care (health and social care) concerns the supply of goods and services in the area of medical, paramedical, and nursing care as well as on areas of caring and social-cultural activities. These goods and services:

- are provided for people suffering from diseases, disabilities or limitations of a physical and/or mental nature, are provided to promote the ability to cope and the (social and cultural) participation of people and are aimed at a positive influence of the general well-being of the population,
- are related to prevention, diagnostics, treatment and medical nursing/caring as well as to non-medical caring, stimulation, support, recreation and education,
- are provided by trained experts and/or companies (or parts of companies) set up for this purpose, or
- are provided by consumption households.

Care also includes the activities of management, control and care supportive organisations, which activities are aimed at the functioning of the system of health and social care.

A list of actors in the field of care is composed for the Netherlands (see Annex 1). For every actor (of the approximately 95 actors in total) a file is created in which all available information is included.

The first step in the creation of every actor file is the determination of the production in terms of expenditure on care, followed by a specialisation of this expenditure by source of finance and by function.

The expenditure related to health and social care providers are defined as the totality of the receipts of these actors in the execution of their activities. These expenditure can be seen as the total gross turnover and include receipts generated by (wage) subsidies and possibly black market activities, receipts out of financial transactions, the receipts of retail trade activities in the area of care and receipts generated by supplying goods and services to the rest of the world. The gross turnover is measured at accrual basis.

It is important to note that the totality of expenditure as described here is not the same as the contents of the term "production value" in National Accounts. The differences between these two terms are explained in the section, "Connecting tables Care Accounts – National Accounts" in the previous report on Health and Social Care Accounts.

The expenditure of the organisations in the area of administration and management are defined as the cost these organisations make in the execution of their tasks in the health and social care area.

After the determination of the expenditure of an actor, these data were confronted with external sources on financing data and results of research on additional data sources (amongst others concerning government payments and out-of-pocket payments). This process of integration leads to realisation of the final actor file, which (in aggregated form) produced the data that could be published. The totality

of these actor files is the integrated basic database, which is the foundation of the statistics Care Accounts. The integrated database is the source to realise the aforementioned objectives (a schematic picture is presented in Annex 2).

Within the System of Care Accounts three kinds of classifications are distinguished:

- A classification of actors: actors are to be interpreted in a wide sense, including not only care providers, but also actors linked to the process of care like administration and management organisations and other supporting units.
- A classification of sources of finance: this classification not only relates to primary financing units but also to ultimately financing units.
- A classification of functions: functions can be defined as clusters of related activities

These classifications are to be used first and for all in the national situation, but they should also be linked to internationally developed classifications, for purposes of supplying data for international use and for international comparability. Right now, the international classifications developed by the OECD and endorsed by Eurostat offer the best possible starting points. To be used internationally, a connection with the first digit of these (concept) classifications is minimally necessary.

Annex 3 contains an overview of the classifications of providers of care, sources of financing and functions that were used in the Care Accounts. The differences between the classification of functions developed by the OECD and the one used in the Netherlands relate to the purity of the distinguished functions. In the Care Accounts all medical care connected to a treatment (cure) is separated from the function Cure. Furthermore, all supporting services and all medical goods offered as a part of a treatment are isolated and separately presented in distinct functions. In the classification of functions of the OECD, all these activities are included in the functions these activities are connected to.

For clarification purposes the definitions of functions used in the Care Account are presented in Annex 5. The links between the internationally used classification of functions and the Dutch derivative are guaranteed.

The central questions that need to be answered by the System of Care Accounts relate initially to the following subjects:

- 1. Who pays (initially and ultimately) the care that is supplied?
- 2. Whom (which producer of services /actor) is being paid for the care supplied and how much?
- 3. Which activities/functions are being paid for?

These questions can be answered globally (on the condition that enough information is available) by creating the following matrices (in principal at the actor level):

Matrix A: expenditure by source of finance.

Matrix B: expenditure by function.

Matrix C: the crossing between source of finance and function.

The matrix containing the expenditure by source of finance can be created by knowledge on the origins of the financial data. Because it is not always clear, based on the financial information available, which actor is the ultimate recipient of the money (especially in cases of personal budgets and subsidies) the necessity rose to use a distributive key in a (limited) number of cases. These distributive keys were derived from the results of the confrontation of various sources in the integration process.

The matrix on expenditure by function can be constructed using the knowledge on activities performed in various production processes distinguishable at the actor level. In this phase of the creation of the Care Accounts the division of the expenditure over the various functions is largely made using information available in the EUCOMP-project, supplemented by distributive keys resulting from "expert guesses".

The matrix containing the expenditure by source of financing and function is a crossing table providing knowledge on the way functions are financed. In this first phase, no attention is paid to these crossing tables.

4. Development in Prices and Quantities

The development of the expenditure on care (expressed as values) as presented in this working paper contains a price and a quantity component. There is a large interest in society to gain insight in especially the development of quantities. Therefore, a study was started to fulfil this need. In this study, possibilities for progress were investigated together with the department of National Accounts. As far as possible, the directives of Eurostat on the measurement of prices and quantities in the field of care were followed (see the Report of the Task Force "Prices and Volumes for Health" of September 1998 and the Report of the Task Force Health II "Volumes Measures for Health" of November 2000).

In the measurement of the development of prices and quantities, Eurostat distinguishes between so-called A, B and C methods. The A method approaches the ideal measurement of quantities of output to the highest level possible and takes into account the changes in quantity and quality. Quantity must enclose all services (amongst others complete treatments) and quality should cover changes in the characteristics of products and changes in the product-mix. This method offers possibilities to analyse changes in productivity. The B method is a reasonable approach of the ideal measurement of quantities and takes into account quantitative changes in output. Changes, caused by quality changes in the product-mix need to be accounted for. This method makes it possible to estimate changes in productivity.

The C method contains in principle all other methods of measurement of quantities and is not considered acceptable as a proxy for the ideal measurement of quantity changes. In the near future, this method will not be allowed any more. Against this background, an approach was chosen in which every actor file was enriched with a module on price and quantity changes. In this module, information is included on the relevant activities of the actor and the corresponding services and products. These products and services are linked to prices and tariffs. For every product and service in principle, a price index is determined. By deflating the expenditure in running prices with this price index for each product and service, a quantity index is calculated. Finally, for every actor the development of quantities is determined as a weighted average of these partial quantity indexes, in which the weights are the relative shares in the care expenditure for 1998.

This approach was not possible for every actor in the system, partly because not enough insight was available on the services and products supplied, partly because no information was present on prices or tariffs. Usually in these cases, proxy prices were used (prices of related types of services). In exceptional cases, input prices were used. For non-market producers of care a measurement of volumes is used in line with international guidelines.

Finally approximately for 50 actors an A or B method is applied and for the time being for about 45 actors a C method. The A method however is only used occasionally. Expressed in values in terms of care expenditure for about 25 per cent a C method was used. The share of the C method is considerably lower compared to the share presented in the previous edition. The most important actors, measured in expenditure, for which a C method was used are the general, university and specialised hospitals. Total expenditure of these actors is about 25 per cent of the total care expenditure. For the various types of hospitals a weighted average quantity index was calculated based on the number of amongst others clinical admissions, day treatments, outpatient visits, surgical procedures and laboratory examinations. Because the quantity data could not be distinguished by disease, this type of calculation was considered a C method according to Eurostat guidelines. In a separate strategic project on the measurement of prices and quantities in the framework of the National Accounts data on volumes are now available based on a method in which "total treatment" of the patient is central in the method used. For the time being "total treatment" is described as the as the treatment in hospital in a clinical setting and in day treatment. The newly developed method can be regarded as a B method. The results relate to the item "hospital care" as defined in the National Accounts. "Hospital care" is described as the sum of general, university and specialised hospitals including all activities of self-employed and employed specialists. This new method is now included in the methods used in the Care Accounts. Moreover, for a number of other actors improvements in the calculation of quantities or prices are introduced.

The description of the approaches, especially the division across the various methods, makes clear that the results of the investigations need to be treated with caution. In spite of that, a large qualitative increase is reached in relation to previously presented data on prices and quantities. The reasons are that now the single actor is the starting point, that for every actor more services and products are distinguished and finally that a uniform technique is followed as far as

possible, which is more and more in accordance with existing international guidelines.

The calculations for the development of prices and quantities were executed for the years 1998 until 2003.

The following text-table supplies the data of the calculations for the health and social care.

Text-table 1: Expenditure Care Accounts in constant prices (1998=100)

	1998	1999	2000	2001	20 02	2003*	1999	2000	20 01	2002	20 03*	
	min euro percentage change											
Expenditure of Care	36 855	37 747	3 8 505	40 209	42 040	44 096	2,4	2,0	4,4	4,6	4,9	
o.w. Health Care	23 327	23 881	2 4 257	25 194	26 200	27 553	2,4	1,6	3,9	4,0	5,2	
Social Care	12 069	12 391	1 2 821	13 539	14 354	15 079	2,7	3,5	5,6	6,0	5,0	

Source: Statistics Netherlands

The expenditure on care in constant prices increased by 4.9 per cent in 2003 compared to 2002, a little bit over the growth rates in the years 2001 and 2002. Remarkable is that in 2003 the increase of expenditure in constant prices for the health care area (5.2 per cent) is higher than the increase in social care expenditure (5.0 per cent). In the years 1999 through 2002 exactly the opposite was the case. In these years additional financial sources were devoted for the elimination of waiting lists, which became predominantly available for nursing homes, home care institutions and institutions for the handicapped.

In table 6 the expenditure on care in constant prices is presented for 21 clusters of actors. General, university and specialised hospitals, as well as independent specialists, which were previously reported as single clusters of actors, are now regrouped in a new cluster. This regrouping was necessary following the new method of calculation.

5. Employment

In the report "Working Paper Health and Social Care Accounts 1998-2001" for the first time data on employment were presented according to the classifications used in the Care Accounts. In this report not only the data is updated, but also the methodology used is adapted in some areas. However, the data keep a provisional character. Two reasons can be mentioned. Firstly the data on employment are not yet available at the level of actors as defined in this study, which makes it difficult to guarantee a perfect match to the financial data. Secondly, a revision is taking place at the National Accounts which includes the Labour Accounts. This revision will undoubtedly result in revised time series. The Care Accounts aim to link the data on employment to data in Labour Accounts (in the same way the financial data are linked to the National Accounts). The revision of National Accounts will have consequences for the data on employment in the Care Accounts.

After revision, the Labour Accounts will be using the Social Statistical Database (Sociaal Statistisch Bestand, SSB) of Statistics Netherlands (see Monthly Bulletin

on Social Economic Statistics, 2002, 12). In these databases (based among others on data of the tax service and social security organisations) data on wages and employment are included of all jobs of employed and self-employed persons. Using these data makes it possible – at least in theory – to determine the employment data at the actor level.

In this study employment on the area of care is described in terms of the number of persons employed (employees and self-employed) and manpower (full-time equivalents, FTE). Employees and self-employed persons are recalculated in manpower using FTEs. The data are presented for health and social care separately. The data are not yet constructed using the separate actor files, but deduced from larger integrative statistics.

Starting points for the data on employees on the area of care are the Labour Accounts and the Enquiry into Employment and Wages.

The Labour Accounts (being the integration framework of employment data) are a part of National Accounts and for that reason an institutional statistics. In the Labour Accounts data on employment and wages, originating in various sources, are compared and integrated. Data in the Labour Accounts relate to the number of employees and the number of self-employed persons. This information is available on the 2nd digit of the ISIC/NACE classification, which is ISIC/NACE 85. At this moment the data on employment are definite for the years 1998 to 2001 and preliminary for the years 2002 and 2003.

The Enquiry into Employment and Wages is a sample survey, in which the population is derived from the Business Register. This implies that data in this survey have institutional characteristics as well. The survey is one of the building blocks of the Labour Accounts. The data in the survey relate to the number of jobs of employees. This information is available on the 5th digit of the ISIC/NACE, meaning e.g. general hospitals, practices of general practitioners and nursing homes. In this study, this source is mainly used to determine the development of health and social care separately.

Only the data presented in the Enquiry into Employment and Wages and the Labour Accounts related to the Care area as described in this publication are included. This means on the one hand that not all jobs included in ISIC/NACE 85 are included. The Care Accounts still do not cover the whole ISICNACE 85. On the other hand, data are included that are part of the care area but are included in other ISIC/NACE categories. Added are data of pharmacies, dental technician's shops, tax companies and the like, performing activities in health and social care.

The data on employees are created according the following method:

- 1. The starting point in the calculation is the number of jobs in the Enquiry into Employment and Wages at the end of the year of all people in the health and social care area.
- 2. The number of jobs is recalculated in the number of persons using a transformation factor. This transformation factor is defined as the quotient of the number of employees and the number of jobs in the Labour Accounts. However, this factor is only available at a high level of aggregation (ISIC 2nd digit).

3. The number of employees is recalculated into FTE using the quotient of the FTE numbers and number of employees according to the Labour Accounts at the three digit level (ISIC/NACE 85.1 and ISIC/NACE 85.3).

The data on self-employed persons are constructed in the following manner:

- 1. The number of self-employed persons working in ISIC/NACE 85 for the years 1998 to 2002 is derived from the Social Statistical Database of Statistics Netherlands. Definitive data on self-employed persons are only available with a large delay in time. For that reason data used are preliminary. To create data for 2003, the statistical trend of the period 1998 to 2002 was extrapolated. The number of self-employed working in health and social care, but outside ISIC/NACE 85 is estimated using the number of companies excluding limited liability companies in the relevant branches.
- 2. The number of self-employed persons is recalculated in FTE using a "part-time share" derived from the Labour Force Survey (EBB). Based on low level information in the ISIC/NACE branches 85.1 and 85.3, available in this enquiry a part-time share for self-employed persons is calculated for the years 1998 to 2002. The part-time share ranges between 80 and 85 per cent.

Adding these (calculated) numbers on employees and self-employed persons provides an understanding of the number of persons in the area of health and social care. Adding the FTE number of employed and self-employed provides a view of the total number of FTE (labour volume) in care.

In this exercise, the employment related to activities performed by government (ISIC / NACE 75.1 and 75.2) and households is not quantified. The same is true for the contribution in employment by stand-by workers, trainees, persons not on the payroll and voluntary workers. Subsidised jobs (like Melkert jobs) however are included.

All these calculations were executed for the years 1998 until 2003. In the text-tables below, the data on employment and manpower are presented.

Text-table 2 Employment in the Care Accounts: number of persons, 1998-2003 *

	19 98	1999	2000	20 01	2002	2003*	19 99	2000	2001	20 02	20 03*
	x 10 00					ı	oercentage cha	nge			
Employ ees	836,1	863,3	894,6	940,8	976,8	1016,6	3,3	3,6	5, 2	3,8	4,1
Self-employed	47,5	48,2	51,2	54,2	55,5	57,7	1,3	6,4	5, 8	2,4	4,0
Total employment	883,6	911,5	945,8	995,0	1032,3	1074,3	3,2	3,8	5, 2	3,7	4,1
O.W.											
Health Care	408,4	425,7	446,7	474,4	491,9	50 5, 2	4,2	4,9	6, 2	3,7	2,7
Sodal Care	475,2	485,8	499, 1	520,6	540,4	569,1	2,2	2,8	4, 3	3,8	5,3

Source: Statistics Net herlands

The number of persons employed in the care area amounts to over 1 074 000 in 2003. In health care in that same year 505 000 people were working and in the social care some 569 000. In 2002 and 2003, the number of people in the social

care area grows faster than the number of people employed in the health care area. In the preceding years 2000 and 2001 an opposite movement was visible.

Text-table 3 Employment in the Care Accounts: number of FTE, 1998-2003*

	1998	199 9	20 00	20 01	2 002	20 03*	19 99	2 000	2001	20 02	2 00 3*
x 10	00					ретс	entage chang	е			
Employ ees	5 86, 1	6 02 ,9	626,4	65 9,7	68 6,5	7 03 ,4	2,9	3,9	5,3	4,1	2,5
Self-employed	4 0,6	41,2	42,6	44,5	46,5	48,3	1,6	3,4	4,5	4,3	4,0
Tot all employment	6 26, 6	6 44 ,1	669,0	70 4,2	73 2,9	7 51 ,8	2,8	3,9	5,3	4,1	2,6
0 .W.											
He alt h Ca re	3 14, 7	3 19 ,7	335,4	35 8,1	37 5,7	9, 08 3	1,6	4,9	6,8	4,9	1,4
So cial C are	3 11, 9	3 24 ,4	333 ,6	34 6,2	35 7,2	370,9	4,0	2,8	3,8	3,2	3,8

Source: Statistics Netherlands

Manpower in the care area, expressed in numbers of FTE, amounts to 752 000 in 2003. In the health care area some 381 000 FTE are employed and in the social care over 371 000. Manpower expands faster in health care in the years 2000 to 2002 compared to social care. In 2003, however, the manpower in social care grows faster than in health care.

Connecting Labour Accounts and Health and Social Care Accounts.

The difference between the data on employment according the Care Accounts and the Labour Accounts of National Accounts are compared for ISIC/NACE 85, using the data on the number of FTE in 2001.

Text-table 4: Comparison of Health and Social Care Accounts and Labour Accounts in numbers of FTE, 2001

	NumberofFTE	(x 1000)
	e mpl oyee s	se If-empl oyed
Health and Social Care Accounts	6 60) 45
Differences in the area described		
Add: ISIC IN ACE 85 items not included in the Health and Social Care Accounts	18	0
Add: ISIC 85/NACE 85.2 Veterinary services	3	0
Substract Health and Social Care Accounts items outside ISIC 85	41	5
Health and Social Care Accounts recalculated for differences in area	639	9 40
La bour Accounts	6.55	5 54
Difference	-16	- 14

Source: Statistics Netherlands

Also after compensating for the differences in the area covered a difference remains between the two sources. This difference is caused by the following facts:

1. The number of self-employed persons measured in FTE is considerably lower than in the Labour Accounts. The data in the Labour Accounts are

based on the LFS. The data in the Care Accounts are based on the Social Statistical database. In future the Labour Accounts will also use the Social Statistical Database as a starting point. It is expected that the number of self-employed persons will be downsized considerably.

- 2. The data as presented in the Labour Accounts are adapted in various ways, adaptations that are not executed in the Health and Social Care Accounts:
 - In the Labour Accounts an additional calculation is made for the number of very small jobs, which are not included in the Enquiry into Employment and Wages. For the Care Accounts this addition has not been executed
 - Inn the Labour Accounts, for consistency reasons the following relation is made identical in for every ISIC/NACE group: sum of wages (based on social security) is to be identical to the number of jobs (according to the Enquiry into Employment and Wages) multiplied by the average annual wage sum (according to the Enquiry into Employment and Wages). The sum of wages (based on social security sources) is regarded as the best information and is hardly ever adapted. This can result in a small change in the number of jobs.
 - If administrative changes are observed in the population of economic units (e.g. in case a wrongly classified unit is reclassified in its correct ISIC/NACE group) the related jobs are reclassified in the Enquiry into Employment and Wages. In the Labour Accounts a reclassification does not take place, for time consistency reasons. The situation in the base year (now 1995) is retained.
 - The results of the Labour Accounts are also confronted with the Make and Use tables in the National Accounts. The remuneration of employment needs to be identical in both sections of the accounting system.

Labour productivity

Comparing the data on the quantity development of the expenditure on care and the data on the development of manpower for the whole area of health and social care makes it possible to present the development of labour productivity in the care area. The following restrictions have to be mentioned:

- The explanation on the construction of the manpower data makes clear that these data are not yet part of the integrated consistent basic data files. This is to say that these data are derived from global integrative frameworks and not from the individual actor files. It is expected that a construction based on actor files will improve the quality of the employment information considerably. Furthermore, in the calculation of the number of people employed and the corresponding manpower a number of assumptions was used.
- The explanation on the calculation of the data on the quantity development in the expenditure on care shows also that necessary improvements need to be carried out. Especially the share of the so-called C method in the calculations of the quantities needs to be reduced considerably. Again, the remarks of Eurostat on volume measurement are mentioned in this respect.

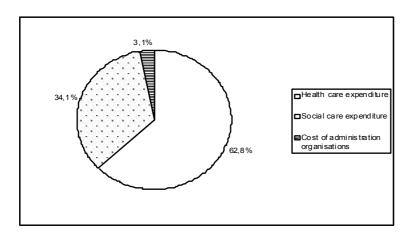
Eurostat poses that the measurement (or a reasonable approach) of the labour productivity is only possible by utilising an A or a B method.

These restrictions imply that statements regarding the development of labour productivity based on the data presented need to be carefully worded. Only after the realisation of the improvements mentioned, data on the development of labour productivity will be presented (expected by the end of 2005).

6. National results

It is apparent from the core data that the preliminary expenditure on care amount to \in 57.0 billion in the year 2003. Of this total amount, \in 35.8 billion (63 per cent) is related to health care, \in 19.4 billion (34 per cent) to social care and the remaining \in 1.7 billion (or 3 per cent) to administration and management institutions (see graph 1).

Graph 1 Expenditure on Care by main area in 2003*



Government and social security together finance the largest part of this expenditure: in 2003, almost \in 39.2 billion (corresponding to 69 per cent of the expenditure). Private insurance companies pay about \in 7.7 billion (14 per cent), while other financing units (especially consumer households, other care institutions and companies) contribute about \in 10.1 billion (18 per cent) of the total amount of expenditure on care.

Of the total amount of expenditure in 2003 about \in 11.7 billion (equivalent to 21 per cent) can be attributed to the function curative care (diagnostics and treatment). Almost the same amount, \in 10.9 billion, ends up in medical care. For medical goods, some \in 9.6 billion is spent (17 per cent). On the function social care \in 13.8 billion or 24 per cent is spent in 2003. In this phase, the function social care is not yet distinguished in various sub-functions of social care. Finally, around \in 11.0 billion (19 per cent) is paid for the other care functions, being amongst others ancillary services, preventive care and administration and management.

Total expenditure on health and social care per capita amounts to € 3 510 in 2003. Total expenditure on health and social care expressed as a percentage of Gross Domestic Product (GDP) at market prices amounts to 12.5 per cent.

Expenditure on care per capita has grown by 7.8 per cent in 2003. In 2001 and 2002 the growth rate was over 10 per cent. The share of the expenditure in GDP expanded in this period (1998 to 2003) from 10.4 per cent to 12.5 per cent in 2003.

Expenditure on care expressed in constant prices increased by 20 per cent in the period 1998-2003. Manpower expressed in FTE increased in this period by 20 per cent as well.

In the Care Accounts, four user groups are explicitly distinguished. In table 1 the expenditure on health and social care are presented for these four specific user groups. For every type of user group, a separate block containing aggregated data is presented. The first block in table 1 relates to the functional description of care, in which description the actors (being providers of care and administration and management organisations) are the focal point. In the second and the third block the same set of functional determined data is rearranged according to the classification of activities used in the National Accounts (classification by ISIC / NACE classes) and according to the divisions of care presented in the Care Statement respectively. It is probably superfluous to mention that the data presented in these blocks are not identical to the data presented by National Accounts on the topic of health and social care, because National Accounts is an institutional framework based on production value. The data are not equal to the data presented in the Care Statement either, because the area described and the terminology used are not identical to these used in the Care Accounts. The differences between the data in the Care Accounts and the National Accounts are described in a so-called connecting table (see section "Connecting table Care Accounts – National Accounts" in the previous publication, "Working Paper on Health and Social Care Accounts 1998-2002". In a connecting table in the previous publication, also the differences between the data in the Care Accounts and the data in the Care Statement (of the Ministry of Health, Welfare and Sports) are presented (see section "Connecting table Care Accounts – Care Statement"). Finally, in the fourth block of table 1 the data according to the classifications used by the OECD and Eurostat are presented.

In the tables 2 to 5 more detailed data are presented for every of the four user groups that are distinguished. The discussion of the results will be limited to table 2. This table contains the data on the expenditure on health and social care separated in 21 (clusters of) actors. Of this total amount, 14 (clusters of) actors relate to health care, 6 relate to social care and 1 is related to organisations in administration and management.

Within health care, the largest amount in 2003 is spent on general hospitals (\in 9.0 billion), followed at a distance by the suppliers of pharmaceuticals (in total \in 5.1 billion), university hospitals (\in 4.0 billion) and providers of mental health care (\in 3.5 billion). On practices of general practitioners, specialists, dentists, midwives and on paramedical practices a total amount of \in 6.8 billion is attributed. In the smallest cluster of actors distinguished (which are the providers of ancillary services) about \in 0.6 billion is spent.

The divergence in the amounts of money spent in 2003 is much smaller in the clusters concerning social care. The nursing homes, homes for the elderly and the home care institutions receive about \in 4.0 billion each. Providers of care to the handicapped receive \in 4.7 billion, on providers of day nursery \in 1.4 billion is spent in 2003.

The cost of institutions providing administration and management in 2003 amount to over € 1.7 billion.

The development of the expenditure on health and social care, divided in health care, social care and administration and management, is presented in the text-table below.

Text-table 5: Health and Social Care expenditure, 1998-2003* (value amounts)

	1998	1999	2000	2001	2002	2003*	1999	2000	2001	2002	2003*
	m In euro					pe	rcentage char	nge			
Health care expenditure	23 327	24 963	26 555	29 742	33 210	35 774	7,0	6,4	12,0	11,7	7,7
Social care expenditure Cost of administration organisations	12 069 1 459	12 906 1 519	14 092 1 525	15 538 1 644	17 677 1 719	19 445 1 741	6,9 4,1	9,2 0,4	10,3 7,8	13,8 4,6	10,0
Care expenditure	36 855	39 387	42 173	46 923	52 606	56 960	6,9	7,1	11,3	12,1	8,3

Source: Statistics Netherlands

The expenditure on health and social care are around 8.3 per cent larger in 2003 compared to 2002. In 2001 and 2000, the growth was much higher, 11.3 per cent and 12.1 per cent respectively.

Striking is the fact that the growth rate in health care expenditure in 2003 (7.7 per cent) is lower than the growth rate in social care (10.0 per cent). In 2000, this was also the case. The difference in the growth rates of health care and social care can be largely explained by the fact that additional amounts of money in 2002 devoted to the redress of waiting lists turned up at the nursing homes, the institutions of home care and the institutions providing care to the (physical and mental) handicapped.

Table 6 shows the development of the expenditure on care in constant prices of 18 clusters of actors for the period 1998-2003. Contrary to previous editions of this publication the number of clusters of actors is reduced for the calculation of expenditure in constant prices. The general, university and specialised hospitals are comprised into one cluster in which also the independent specialist's practices are included. The reasons are presented in section 4 "Development in Prices and Quantities".

Expenditure on health care in constant prices grows by 18 per cent in this period. Within health care the expenditure on hospitals and independent specialist's practices are increasing by 16 per cent, while the expenditure on municipal health services, occupational health care services and providers of ancillary supportive services show increases of 28 per cent or more. The increase in the expenditure on the practices differs between over 8 per cent for general practitioner's practices and 20 per cent for dentists.

The expenditure in constant prices on the social care area increase in this period with 25 per cent. Within social care, the institutions for day nursery show the largest increase with 52 per cent. The increase in the institutions for home care and for institutions for the mentally deficient is around 35 per cent.

From the data presented in tables 2 and 6, it can be derived that the price development in the health and social care amounted to 29 per cent in the period 199 to 2003. The price development in health care in these years is around the same order of magnitude.

In tables 7A through 7F the data on the expenditure of care (according to the classifications of the Care Accounts) are presented for the (clusters of) actors and the primary sources of financing, for the years 1998 through 2003 respectively. In the year 2003, almost \in 19.5 billion of the total expenditure of \in 35.8 billion on health care is paid by social security (54 per cent) and some \in 7.6 billion by private insurance companies (amounting to 21 per cent). The out-of-pocket expenditure on health care amount to \in 3.8 billion (equivalent to 11 per cent). The remaining 14 per cent is contributed by government, other institutions, companies and the rest of the world (see graph 2).

8,6%

10,7%

So cial security

Private insurance

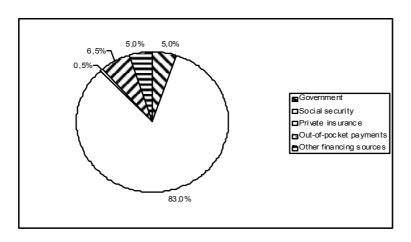
Out-of-poc ket payments

Other financing sources

Graph 2 Health Care expenditure by source of financing, 2003*

The financing of social care shows a different picture. Of the total amount of expenditure of \in 19.4 billion 83 per cent is financed by social security funds. The out-of-pocket payments for social care amount to \in 1.3 billion (which is 7 per cent). Government and the cluster consisting of other institutions, private companies and the rest of the world contribute 5 per cent each in the payments for social care. Private care insurance companies do not play a role in the financing of social care, with the exception of the institutions for home care (see graph 3).

Graph 3 Social Care expenditure by source of financing, 2003*



In table 8 the data on the development of the primary financing of the expenditure on (health and social) care are presented for the years 1998 to 2003, specified by source of financing in both health care and social care separately.

The development of the expenditure by source of finance (text-table 6) provides the following picture.

Text-table 6: Health and Social Care expenditure by source of primary financing, 1998-2003

	1998	1999	2000	2001	2002	2003*	1999	2000	2001	2002	2003*
	mln euro					Þ	percentage d	nange			
Government	1 797	1 916	2 0 18	2 260	2 519	2 942	6,6	5,3	12,0	11,5	16,8
Social security	23 908	25 121	27 012	29 745	33 492	36 268	5,1	7,5	10,1	12,6	8,3
Private insurance	4 796	5 199	5 294	6 044	7 087	7 691	8,4	1,8	14,2	17,3	8,5
Out-of-pocket payments	3 575	3 972	4 3 16	4 684	4 858	5 101	11,1	8,7	8,5	3,7	5,0
Other institutions, other companies and restof the world	2 779	3 179	3 532	4 190	4 650	4 958	14,4	11,1	18,6	11,0	6,6
Care expenditure	36 855	39 387	42 173	46 923	52 606	56 960	6,9	7,1	11,3	12,1	8,3

Source: Statistics Netherlands

All financing sources present large increases in 2003, varying from 5 per cent for out-of-pocket payments to almost 17 per cent for government. The relative large increase in financing by government in 2003 is largely explained by a change in the financing of the care for the parents and children. Until 2002 the payments were a part of the Exceptional Medical Expenses Act, since 2003 these services are paid out of the government budget. The relative large increase in financing by private insurance companies in 2001 and 2002 is partly caused by a large inflow of privately insured persons. The number of privately insured people decreased in 2000, due to the inclusion in the public insurance funds of owners of small companies by January 1st of 2000. To repair the original ratios between the number of insurance fund insured and privately insured persons an additional influx of privately insured persons is realised in 2001 and in 2002.

The increase in payments by other institutions, companies and the rest of the world is largely caused by a large increase on the expenditure on occupational health care and day nursery.

In tables 9A to 9F, the expenditure of care (according to the Care Accounts) is presented by cluster of actors and by function, for the years 1998 through 2003. For the sake of clarity, it must be mentioned again that all social care of providers of health and social care is included in just one function, the function of social care. In this phase of the project, no distinction of the social care function in separate clusters of activities is made.

Of the total of over \in 35.8 billion spent on health care in 2003, \in 11.5 billion is spent on curative care (equivalent to 32 per cent). On medical goods, \in 9.4 billion is spent (being 26 per cent) and on medical care about \in 5.6 billion (16 per cent). For ancillary services \in 3.6 billion and for preventive care \in 2.1 billion is spent, which is equivalent to 10 per cent and 6 per cent respectively.

The expenditure on social care divided by function presents a different picture. Of the total expenditure of \in 19.4 billion in 2002 about \in 12.9 billion is spent on social care (which amounts to 66 per cent). For the function medical care \in 5.3 billion is available, equivalent to 27 per cent. The other functions are relatively small

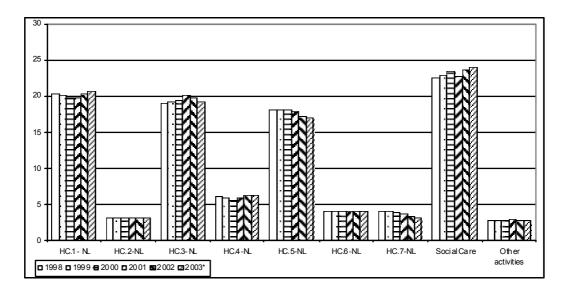
Table 10 presents an overview of the development of the expenditure on health and social care by function in the years 1998 to 2003. In text-table 7 the development of the expenditure is shown.

Tex ttable 7: Health and Social Care by function, 1998-200 3*

-	1998	1 999	2000	2001	2002	200 3*	1999	2000	20 01	2002	2003*
	mln euro					n	erœ ntag e ch	a nge			
Curative care	7 460	7 911	8 34 8	9 261	10 651	11766	6,0	5,5	10,9	15,0	10,5
Me dical care	7 031	7 583	8217	9 468	10 404	10880	7,8	8,4	15,2	9,9	4,6
Me dical goods	6 632	7 118	7609	8 356	8 998	9629	7,3	6,9	9,8	7,7	7,0
So dial care	8 351	8 989	9 90 5	10 683	12 437	13688	7,6	10,2	7,9	16,4	10,1
Other activities	7 381	7 787	8094	9 155	10 116	10996	5,5	3,9	13,1	10,5	8,7
Care expenditure	36 855	39 387	42173	46 923	52 606	56960	6,9	7,1	11,3	12,1	8,3

So urce: Statistics Netherlands

The increase in expenditure on curative care in this period is almost equal to the development in total expenditure on care. The growth in expenditure of medical care and social care is clearly higher than the growth in total expenditure; the increase in expenditure on medical goods and in other activities lags clearly behind total expenditure growth. This picture is consistent with the developments as presented in text-table 1. Because of the increase in financial means for the reduction of waiting lists, the expenditure on social care increased faster than the expenditure on health care. The relative large increase in social care was also caused by the large increase in day nurseries (see graph 4).



Graph 4 Expenditure in Care Accounts by function, 1998-2003*

7. Care Accounts and the OECD System of Health Accounts (SHA)

The results of the Dutch Health and Social Care Accounts can also be presented using the classifications as proposed in the SHA of the OECD. This means that the tri-axial system as proposed by the International Classification of Health Accounts (ICHA) can be followed.

The adaptations in the data needed to conform to these classifications – the Classification of Health Care Providers (HP), the Classification of Financing Institutions (HF) and the Classification of Functions (HC) - are described below.

- First of all the area described in the Care Accounts in the Netherlands is not limited to the area of health care as described by the International Classification of Health Care Providers (ICHA-HP). All providers in the Dutch Care Accounts not performing health activities are separately presented. The code representing these institutions is HP.0: Providers outside the HP-classification. However, non-health care activities of providers of health care are also included in the expenditure data of health care providers. In the sections on health care expenditure of health care providers, the expenditure of these non-health care activities are deleted from the data.
- Concerning the classification of financing institutions, the adaptations are very limited, compared to the distinctions used in the Dutch presentation of the data. The only difference is that the distinction in HF 2.1. Private Social Insurance and HF 2.2 All Other Private Insurance Schemes is not yet made in the Dutch Care Accounts. This distinction has to be introduced to comply totally with the Classification of Financing Institutions.
- In the third axis (the Classification of Functions), the differences between the Dutch Care Accounts and the OECD-SHA are more substantial, because it concerns the 'purity' of the functions used. In the Dutch data functions separately distinguished cannot be an intrinsic part of other also

distinguished functions. This means that medical goods being a separate function in the classification cannot be an intrinsic part of the function medical cure or rehabilitation. In the OECD Classification of Functions, this possibility is explicitly present, because these activities are intrinsic parts of other functions. For the data the consequences are that the functions on medical care (HC.3-NL), ancillarly services (HC.4-NL) and medical goods (HC.5-NL) have to be split up in separately provided functional parts and functional parts intrinsically belonging to cure, care or rehabilitation. Moreover, the OECD classification on functions only includes health care and health care related functions. All non-health activities have to be separated in the data.

Additional to the use of the standard classifications of the OECD SHA manual the expenditure data can also be presented using the various modes of production (for a description of the production modes see Annex 6).

In the first section below (section 8) the expenditure data by financing sources in the Care Accounts are shown using the provider classification (ICHA-HP) and the classification of financing sources (ICHA-HF).

8. Expenditure data on Care and Health Care by Financing sources

In this section of the working paper on the Dutch Care Accounts, the preliminary results of the year 2003 are presented from the point of view of the OECD System of Health Accounts. This year for the first time we decided to present the majority of the data on the provider classification on the 2nd digit level. Due to consistency reasons and lack of enough robust data, the classification items of HP.7 and HP.9 are added and presented together. In the tables of this publication the majority of the expenditure information is presented on the HP 2nd digit level; in the text-tables the 1st digit level is chosen for presentation.

In table 5 on page 41, the data on expenditure are already presented using the OECD classification on providers on a detailed level. In text-table 8 in this section, providing data on 2003, the level of detail is reduced to the first digit of the classification. Table 11A through 11F provides data by financing unit for the years 1998 through 2003. Of the total amount of expenditure in 2003 of \in 56 960 million presented in this text-table just \in 2 529 million is attributed to providers outside of health care. This leaves \in 54 431 million to be accounted for by sources of financing and by health care providers.

Text-table 8 Care expenditure by source of financing according to the OECD/Eurost at ICHA-HF1) classification, 2003

		HF1			HF.2					HF.3	Total a I	
		Gener al gover nment	HF 1.1 Ce ntral governmen t	HF1.2 Social security	Private sec-	HF .2.1 Private social h s	HF.2 .2 Othe r private ins.	HF2.3 Households	HF .2.4 + HF .2.5 NP ISH, Corporations ²	ROW ³	sources	
		min eu ro										
HP1	Hospitals	1214	8 11	65 109	2 459	9 16	26 16	61 21	4 109	8	25	1 6772
HP2	Nur sin g and residen ta I ca re facilities	1255	2	15 125	8 34	0	0	0 10	7 23:	3	25	1 2917
HP3	Provider s of ambulator yh ealth care	838	9 3	22 80	8 457	5 6	68 21	89 132	2 39	3	9	1 2973
HP4	Retail sale and other providers of medical goods	339	4	0 33	4 396	3 7	12 7	21 225	4 27	7	22	7 379
HP5	Provision and administration of p ublich ealth prog rammes	54	6 4	12 1:	4 24	2	19	14 3	3 17	5	0	788
HP6	Ge neral health administration and in su rance	83	7 1	87 6	0 90	4	3	3	0 89	В	0	1 741
HP7	Establishments as providers of occupational health care and											
HP9	Rest of the World	66	7 1	74 4	3 119	4	28	46 3	5 108	6	0	1 861
	Car e expenditure of Health Care pro vide rs	3853	3 22	75 362	9 1581	8 30	5 6 46	34 396	4 416	3	80	5 4431
HP.0	Provider's outside HP-classification ⁴	67	6 6	67	9 185	2	0	0 113	7 71	5	0	2 529
	Car e Expenditu re of Care p roviders	3921	0 29	42 362	8 1767	0 30	5 6 46	34 510	1 487	8	80	5 6960

¹⁾ ICHAHF: Internation all Classification of Health Accounts - Health care Sources of Funding

Source: StatisticsNethe rlands

The picture of the health care expenditure differentiated by financing institutions in accordance with the OECD classification is not deviating much from the picture as described in paragraph 6. Of total care expenditure of health care providers of \in 54 431 million, almost 71 per cent is financed by central government and social security. The private sector (including the Rest of the World) accounts for \in 15 898 million, equivalent to 29 per cent.

Since the start of the OECD System of Health Accounts a deep need has been felt to provide information not only on the totality of the activities and providers but also on the subsection of health care activities of health care providers. In this publication for the first time all the constituent parts of the SHA are presented both for all activities performed by all providers and for health care activities performed by health care providers.

Basically having all the information available, it is possible to construct the system of health accounts dealing only with health care activities. This means the provider table can be limited to those providers providing health care (starting point of the system of care accounts as well). Also possible is the presentation of health care expenditure of health care providers (also nothing new). Having all the information makes it also possible to present expenditure on health care by source of financing. To make these tables the financing sources of all the functions distinguished in the system of care accounts needed to be known.

To be able to present the data on financing or on functions excluding the all non-health care activities the following steps need to be taken into consideration.

² NPI SH: Non-profit in stitu to ns serving households

³ ROW: Re st of the World

Among other's expenditure on day nursery, public social care and social relief

Text-table 9 C are expenditure of care providers and Health care expenditure of Health care providers, 2003*

	2003*
	million euro
Care expenditure of Care providers	56960
Providers outside HP-classification 1)	2529
Care expenditure of Health Care providers	54431
Expenditure of Non-health care activities	12062
Health Care expenditure of Health Care providers	42369

¹⁾ Among others expenditure on day nursery, public social care and social relief

Source: Statistics Netherlands

The expenditure relating to provisions outside the health care provider classification excluded from the data (lowering the total expenditure by \in 2 529 million). Also expenditure relating to activities not belonging to health care functions are excluded. This last action lowers the total expenditure amount with \in 12 062 million, leaving \in 42 369 million to be divided over the various health care functions.

T ext-table 10 Health care expenditure by so urce of financing according to the OE CD/E uro stat ICHA HF 19 classification, 2003 and 19 classification, 2003 and 2004 and 2004

		HF 1			HF.2						HF.3	Tota I al	
		Ge neral	HF 1.1 Central government	HF 1.2 Social security	Private sec-	HF .2.1 Private social ins.	HF.2.2 Other private ins.	HF 2.3 Househo	d's	HF.2.4 + HF.2.5 NPISH, Cor porations 2)	ROW 3)	sources	
		mh euro	g				p 30 mo.						
HP1	Hospitals	11838	975	10863	4219	9 1	1626	1661	214	718	3	13	1 6071
HP2	Nursing and residential care facilities	4618	3 0	4618	86	3	0	0	4	83	3	0	4704
HP3	Provider so f ambulatory hea th oa re	5944	229	5715	4389	9	667	2176	1244	302	2	9	1 0342
HP4	Retail sale and other providers of medical goods	3394	0	3394	364	7	712	721	1969	245	5	22	7062
HP5	Provision and a dmh str ation of public health programme s	546	412	134	242	2	19	14	33	175	5	0	788
HP6	Gen eral health ad min istration and insura nce	837	187	650	904	1	3	3	0	898	3	0	1741
HP7	E stablishments as provider s of occupational health car e and												
HP9	Rest of th e Wo rld	638	156	482	1024	1	26	45	33	92	I	0	1661
	Health Car e expenditure of Health Car e providers	27815	5 1 959	25856	1 451	1 3	3053	4620	3496	3342	2	43	4 2369

¹⁾ ICHAHF: I nternational Classification of Health Account s- He alth care Sources of Funding

Source: Statistics Nether lands

Text-table 10 provides the information on health care expenditure of health care providers by source of financing for the year 2003. This means that the expend tire relating to non-health care activities are deleted. In tables 12A through 12F the data on health care expenditure by financing sources are presented for the years 198 to 2003.

In totality \in 42 369 million is financed on health care activities. Of this total amount, \in 27 815 is financed by government sources including social security (equivalent to 66 per cent). Private sources (including the Rest of the World) are responsible for 34 per cent or \in 14 544 million.

² NPISH Non-p rofit institutions serving hou seh olds

³ ROW: Rest of the World

9. Expenditure data on Health Care by Function

In the first section of this publication it was mentioned that the expenditure on care in the Netherlands amounted to \in 3 510 in 2003. Measured in GDP a share 12.5 per cent is attributable to care. Eliminating all providers outside the health care branch and all the non-health activities form the expenditure data, it can be concluded that around \in 2 611 per capita is spent on health care, which is equivalent to 9.3 per cent of GDP.

In the following text-table (text-table 11) the health care expenditure of the health care providers are differentiated by function. The detailed information on the functional specification according to the international classification of functions is presented in table 13A through 13F for the separate years 1998 through 2003. In the functional specification of the OECD compared to the one used in the Netherlands in the Care Accounts, the differences are much larger.

Text table 1.1 Health care expenditure by function according to the OECD/Euro stat ICHA HC1) classification, 2 003

		HC 1	HC 2	HC 3	HC 4	HC 5	HC 6	HC 7	HCR 1	Total a I
		Services of	Services of	Ser vices of	Ancillary	Me dical	Pre vention	Health a d-	Health - h	he alth car e
		cur ative car e	r ehab lita tive	long-term	service s to	go ods dis-	a nd pu blic	ministra tion	re lated f	fu nctions
			ca re	nursin g care	heath care	pensed to	h ealth se r-	and h ealth	fun ctions	
						ou t-pat ients	vice s	insura nce		
		mln euro								
HP1	Ho spitals	14971	34 7	73		4	0 0	11	664	1607 1
HP2	Nu rsing a nd re sidential oa re fa cilities	582	38 0	36 74		0	0 0	0	68	470 4
HP3	Pro viders of ambulatory health care	6199	101 4	12 23	64	14 28	9 930	31	10	1034 1
HP4	Re tail sale and oth er providers of me dical goods	C	0	0		0 7062	2 0	0	0	706 2
HP5	Pro vision and admin ist ration of public health pro grammes	3	0	0	16	33	0 622	0	0	78 8
HP6	G ener al health admin ist ration and in suran ce	C	0	0		0	0 0	1 741	0	174 1
HP7	Estab lish ments a s pro vid ers o f occupa tional he alth car e an d									
HP9	Re st of the World	279	17 1	123	23	39 86	7 63	0	0	166 1
	Total health oare expenditure	22034	191 3	50 92	105	51 7437	23 15	1 783	743	4236 9

¹⁾ ICHA-HC Internation al Classification of Health Accounts - He alth care functions

Source: Statistics Netherlands

Of the total amount spent on health care \in 42 369 million, \in 22 034 million (i.e. 52 per cent) ends up in the services of curative care (HC.1), followed by the function medical goods dispensed to out patients (HC.5) amounting to \in 7 437 million (18 per cent). The third important function is the function of services of long-term nursing care (HC.3) with an amount of \in 5 092 million or 12 per cent of total health care expenditure. The remaining functions (HC.2: Rehabilitative care, HC.4: Ancillary services, HC.6: Preventive services, HC.7: Administration and HC.R: Health Care Related services) amount to \in 7 805 million equivalent to 18 per cent.

10. Care and Health Care Expenditure by Mode of Production

For quite some time a demand is present on expenditure of the Care Accounts by mode of production. Mode of production can be described as the way the provider of care organises the production of goods and services supplied to the patients or consumers. In the OECD System of Health Accounts (SHA) four modes of production are distinguished. These four modes are In-patient care, Day care, Out patient care and Home Care. In the Dutch Care Accounts these four modes are

redefined and supplemented by a fifth one, which is the production mode "not relevant" or "not applicable". This last mode of production is used in cases where production is dealing with services not directly supplied to patients. In Annex 6 the descriptions of the various modes of production used in the Dutch Care Accounts is presented.

In the OECD SHA the modes of production are introduced as a specification of the classification of functions. In our opinion the mode of production is a producer characteristic and should be linked to providers in the care system. In the Dutch Care Accounts the mode of production is going to be treated as a separate axis in the system of accounting. This means that now after completion of the system data can be presented of providers (HP) and functions (HC) by mode of production.

A first attempt to provide expenditure according to provider by mode of production was presented in the previous edition of the Working Paper on Health and Social Care 1998-2002. In theory it is also possible, based on the information used, to present tables on the production mode by function and by source of financing. The starting point in this exercise is the data on providers as presented in the basic information system of the Care Accounts. The information on production quantities (or proxies for production) is the keys for the calculation of shares in the expenditure by production modes.

Because of the starting point it is possible to make a distinction in HP-codes, which means that providers outside health care (HP.0) can be separately listed. Furthermore it is possible to present the information on the expenditure by mode of production for the totality of the care (including non-health care activities of health care providers) as well as for health care activities of health care providers. This is possible because the information on production mode of non-health care activities is known as well.

Like in the tables in the section on data according to the OECD SHA the majority of the data is presented by HP code on the 2nd digit level. For the provider group general administration (HP.6) a production mode is not applicable. For some specific actors providing ancillary services (like Euro transplant) or supportive services (like dispatchers of ambulance services) a production mode is not relevant either and the production mode in those cases is set to NA (not applicable or not relevant).

Text-table 12 Expenditure of Care providers by Mode of production according to the OECD / Eurostati CHA-HP 1), 2003

		In-patient	Day cases	Outpatient	Care athome	NA ²	Total care expenditure
		millioneuro					
HP1	Hosp ital s	11 92 4	6 17	4231	0	0	16772
HP2	Nursing and residential care facilities	11 97 3	944	0	0	0	12917
HP3	Providers of ambulatory health care	1343	344	7209	38 14	11	12973
HP4	Retail sale and other providers of medical goods	0	0	7 15 3	226	0	7379
HP5	Provision and administration of public health programmes	122	0	625	0	41	788
HP6	General healthad ministration and insurance	0	0	0	0	1741	1741
HP7	Establishments as providers of occupation allhealth care and						
HP9	Rest of the World	166	0	1329	111	256	1861
	Total care expenditure of health care providers	25 52 8	19 05	20 54 6	41 51	2050	54 4 31
HP.0	Providers outside HP-classification 3)	218	21 59	152	0	0	2529
	Care Expenditure of Care providers	25746	40 65	20697	41 51	2050	56960

¹⁾ ICH A-HP: International Classification of Health Accounts - Health care Providers

In text-table 12 the expenditure of the care providers and the health care providers are presented by mode of production for 2003. Information on the care expenditure by mode of production of the providers by HP classification (majority on the 2^{nd} digit level) is presented in tables 14A to 14F for the complete period 1998-2003. Of the total amount on care expenditure of health care providers of ε 54 431 million, ε 25 528 million or 47 per cent is spent in in-patient production. In out patient production mode around ε 20 546 (38 per cent) is spent. Care at home, growing in importance since 1998, is now responsible for ε 4 151 million or 8 per cent. Production in day treatment is still a small proportion, equivalent to 4 per cent.

Having all the information available makes it also possible to present the expenditure of health care providers on health care by the various modes of production. In text-table 13 these data are shown. The detailed tables on health care expenditure iof health care oproviders by mode of production are available in tabel 15A to 15F for 1998 to 2003.

Text-table 13 Health care Expenditure of Health Care providers by Mode of production according to the OEC D/ Eurostat ICHA -HP 1), 2003

		In-patient	Day cases	Outpatient	Care athome	NA 2)	Total care expenditure
		millioneuro					
HP1	Hospital s	11 45 8	573	4039	0	0	16071
HP2	Nursing and residential care facilities	4413	292	0	0	0	4704
HP3	Providers of ambulatory health care	1332	259	6962	1777	11	10341
HP4	Retail sale and other providers of medical goods	0	0	6849	213	0	7062
HP5	Provision and administration of public health programmes	122	0	625	0	41	788
HP6	General healthadministration and insurance	0	0	0	0	1741	1741
HP7	Establishments as providers of occupation allhealth care and						
HP9	Rest of the World	166	0	1 14 5	1 11	239	1661
	Total health care expenditure	17489	11 24	19620	21 02	2033	42369

ICHA-HP: International Classification of Health Accounts - Health care Providers

2) NA: Mode of production is not applicable or not avail

Source: Statistics Netherlands

²⁾ NA: Mode of production is not applicable or not available

³⁾ Among others expenditure on day nursery, public social care and social relief

Of the total amount of \in 42 369 million spent on health care by health care providers, \in 17 489 million is spent in in-patient mode. This is equivalent to 42 per cent. The most important production mode in health care, however, is out patient. In this mode \in 19 620 million is spent or 46 percent. Some 5 per cent of the production is created at the home of the patients.

Text-table 14: Health Care expenditure by Mode of Production, 1998-2003*

	1998	2003*	19 98- 200 3*
	milli on eu ro		ind ex 1998 = 100
Total Health Care Expenditure Mode of Production	279 40	4 236 9	151,6
In -pa ti ent	11469	17489	152,5
Day cases	630	1124	178,4
Out patient	129 36	19620	151,7
Car e at home	12 59	2102	167,0
NA	1647	2033	123,5

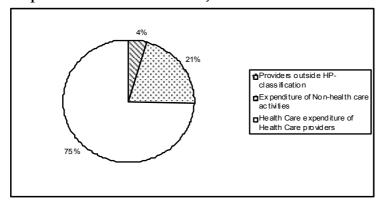
Source: Statistics Netherlands

Since 1998 (the first year for which the new system of care accounts was created) the health care expenditure of health care providers has grown by over 50 per cent. Day treatment, although still relative small, showed the largest increase with 78 per cent in the period 1998-2003Care supplied at home is the mode of production that shows the second largest increase with 67 per cent during this period.

11. Care and Health Care compared

Finally after having presented and described both datasets based on the Dutch System of Care Accounts, it is also possible to make a comparison of the two datasets. This section deals with this comparison.

Graph 5: Care and Health Care, 2003*



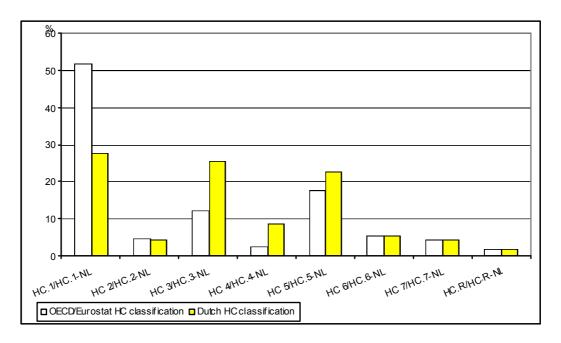
In graph 5 the division of the expenditure of care is shown. The largest part of care deals with health care (around 75 per cent). Remarkable is the share of non-

health activities of health care providers, amounting to 21 per cent of total care expenditure.

First expenditure data according to the functional classifications will be compared. Next data on financing source will be compared. Finally the data by mode of production will be shown.

As can be expected the relative shares following the OECD functional classification supplies a different picture than the one presented based on the Dutch variant of this classification, presented in the previous paragraph on the results (see graph 6).

Graph 6: Expenditure by function: OECD and Dutch functional classification compared, 2003*



The differences resulting from inclusion or exclusion of activities of ancillary services and nursing care as well as delivery of medical goods from the functions cure, care and to a lesser extent rehabilitative care is prominently presented in this graph.

Text- table 15 Expenditure of providers by Financing sources compared, 2003 *

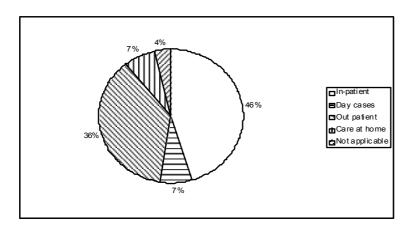
		Care expenditure	Care expenditure		
		care providers	health care	providers	health care providers
		m illi on euro			
Total exp	end iture	56 96	0	544 31	42369
HF.1	Government	3921	0	385 33	27815
HF.2	Private sources	1767	0	158 18	14511
HF.3	Rest of the World	8	0	80	43

Source: Statistics Netherlands

Comparing the major sources of financing for care and health care provide the following picture. Government finances 69 per cent of total care expenditure, but only 66 of health care expenditure. The private sector including the rest of the world finances 31 per cent of care and 34 per cent of health care.

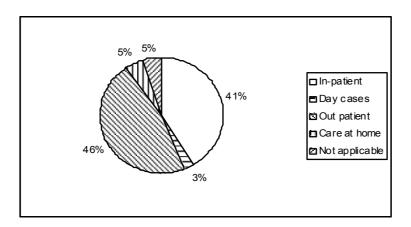
A graphical representation of the relative importance of the modes of production for all health care providers in the Care Accounts is given in graph 7. Health care providers are providers classified in the classes HP.1 to HP.9. Classification code HP.0 providers of social care are excluded in this graph.

Graph 7: Health and Social Care Accounts expenditure of care providers by mode of production, 2003*



As could be expected in-patient care (46 per cent) and out patient care (36 per cent) are the most important modes of production in the Netherlands, when dealing with the expenditure on care. Day cases (or day treatment) and Care supplied at the home of the patient/client are very small modes of production.

Graph 8: Health and Social Care Accounts health care expenditure of health care providers by mode of production, 2003*



Remarkable is the difference in the change in importance between the expenditure on care and the expenditure on health care. Taking into account health care expenditure of health care providers the most important mode of production is no longer in-patient care but out patient care.

Statistics Netherlands, January 2005

Tables produced

Table 1: Health and Social Care expenditure by main user group of statistics, 1998-2003*

	1998	1999	2000	20 01	20 02	200 3*
m	ıln euro					
Health and Social Care Accounts						
Providers of health care	23 32 7	24 963	26 555	29 742	33 2 10	35 77 4
Providers of social care	12 06 9	12 90 6	14 092	15 538	17 677	19 44 5
Administration and management institutions	1 459	1 51 9	1 525	1 644	1 7 19	1 741
Care expenditure	36 85 5	39 387	42 173	46 923	52 6 06	56 96 0
Classification according to National Accounts						
ISIC/NACE 85.1 Health care	17 82 6	19 013	20 142	22 614	25 5 52	27 48 2
ISIC/NACE 85.3 Social care	11 48 6	12 253	13 363	14 748	16 8 19	18 53 2
Other ISIC/NACE groups	6 65 7	7 14 6	7 560	8 3 4 9	8 9 32	9 4 92
Not in clu ded in production 1)	886	976	1 108	1 2 13	1 3 0 4	1 4 54
Care expenditure	36 85 5	39 387	42 173	46 923	52 6 06	56 96 0
Division according to Care Statement,						
Ministry of Health, Welfare & Sports						
Curative somatic care	14 07 1	14 944	15 814	17 817	20 1 59	21 54 6
Medical care, care for the elderly	7 63 1	8 02 1	8 652	9 5 36	10 7 93	11 968
Oth er care activities	11 843	13 036	13 861	15 297	16 9 07	18 35 2
Not in cluded in Care Statement 2)	3 31 0	3 38 6	3 846	4 272	4 7 47	5 0 93
Care expenditure	36 85 5	39 387	42 173	46 923	52 6 06	56 96 0
Division according to OECD / Eurostat						
HP 1 & HP 2: Hospitals, Nursing and residential ca	re					
facilities	18 75 0	19 954	21 349	23 169	26 2 96	28 193
HP 3 & HP 4: Providers of a mbul atory health care,	Retail					
sale and other providers of medical goods	13 69 1	14 61 6	15 538	17 893	19 8 49	21 847
Other HP	2 98 6	3 188	3 364	3 7 0 1	4 0 42	4 3 90
	1 429	1 62 9	1 922	2 1 60	2 4 19	2 5 2 9
Providers outside HP-classification 3)	1 429	1023	1 022	2 100	2410	2 020

¹⁾ Among others production by consumers households and providers in the rest of the world $\,$

²⁾ Among others providers of day nursery, occupational health care and alternative health care treatment

³⁾ Among others providers of day nursery, general public social care and relief homes

Table 2: He alith and Social Care expenditure by (cluster of) actors, 1998-2003*

	1998	1999	2000	2001	2 002	2003*	19 99	200 0	2001	2 002	2003
	mineuro					pe	rcentage cha	ng e			
Providers of health care											
1 G en er al h ospitals	6 11 2	6 36 5	6 74 5	7 738	8 550	8 969	4 ,1	6,0	14, 7	10,5	4,9
2 Un ive rsit y ho spit als	2 22 9	2 48 0	2 66 6	3 10 3	3 752	3 998	11,2	7,5	16, 4	20,9	6,6
3 Specialised hospitals	397	420	458	51 4	587	641	5,6	9,3	12, 1	14, 2	9,3
4 Providers of mental health care	2 27 8	2 47 9	2 59 0	2 85 7	3 199	3 535	8,9	4,5	10, 3	12,0	1 0,5
5 Practices of general practitioners	1 29 9	1 35 5	1 463	1 584	1 820	1 994	4,3	0,8	8, 3	14,9	9,6
6 Practices of medical specialists	1 31 3	1 39 0	1 36 1	1 43 5	1 617	1 761	5,9	-2,1	5, 5	12,7	8,9
7 Practices of dentists	1 191	1 23 5	1 323	1 45 9	1 671	1 826	3,7	7,2	10, 3	14,5	9,3
8 Practices of midwifes and paramedical professionals	784	88 2	92 1	1 01 9	1 092	1 182	12,4	4,4	10, 7	7, 2	8,2
9 Municipal Health Services	395	418	452	532	628	720	5,8	8,0	17, 8	18,0	14,6
10 Occupation allhealths ervices	64.5	726	828	899	1 011	1 110	12,4	14 ,1	8, 6	12,4	9,8
11 Suppliers of pharma ceuticals	3 28 1	3 567	3 867	4 32 2	4 705	5 072	8,7	8,4	11, 8	8, 9	7,8
12 Suppliers of the rapeutic appliances	1 66 2	1 786	1 89 3	2 06 8	2 156	2 307	7,5	6,0	9, 2	4, 2	7,0
13 Providers of an cillary services	359	40 5	407	452	509	554	12,9	0,3	11, 1	12,7	8,9
14 Other providers of health care	1 38 0	1 456	1 58 1	1 760	1 913	2 104	5,5	8,6	11, 4	8, 7	1 0,0
Total of health care providers	23 32 7	24 963	26 55 5	29 742	33 210	35 774	7,0	6,4	12, 0	11,7	7,7
Providers of social care											
15 Nursing homes	2 92 8	3 04 3	3 24 2	3 65 8	4 058	4 409	3,9	6,5	12, 8	10,9	8,6
16 Homes for the elderly	2 69 2	2 84 2	2 99 2	3 09 4	3 536	3 762	5,6	5,3	3, 4	14,3	6,4
17 Home care institutions	2 01 5	2 14 4	2 42 5	2 79 1	3 202	3 775	6,4	13,1	15, 1	14,7	17,9
18 Providers of care for the handicapped	2 84 4	3 06 9	3 33 7	3 65 5	4 264	4 732	7,9	8,7	9, 5	16,7	1 1,0
19 Providers of daynursery	649	769	956	1 11 5	1 292	1 357	18,4	24,3	16, 7	15,9	5,0
20 Other providers of social care	941	1 03 8	1 140	1 22 4	1 325	1 411	10,3	9,8	7, 4	8, 2	6,5
Total of social care providers	12 06 9	12 90 6	14 09 2	15 538	17 677	19 445	6,9	9,2	10, 3	13,8	1 0,0
Ad ministration and managementinstitutions											
21 Ad min istration and management in stitutions	1 459	1 51 9	1 52 5	1 644	1 719	1 741	4,1	0,4	7, 8	4, 6	1,3
Care expenditure	36 85 5	39 38 7	42 173	46 92 3	52 606	56 960	6,9	7,1	11, 3	12, 1	8,3

Table 3: Expenditure a ccording to the classification of National Accounts by ISIC/NACE, 1998-2003*

	1998	1999	2000	2001	20 02	2003*
	mln euro					
ISIC/NACE 85.1 Health care						
85.11 Hospitals	10 620	11 372	1 2 157	13 915	15774	16 803
85.12 Medical practices	2 503	2 642	2707	2 890	3292	3 593
85.13 Den tal practices	1 342	1 388	1 491	1 640	1876	2 051
85.14 Paramedical practices and midwifes	1 415	1 535	1 615	1 756	1888	2 026
Other units in ISIC/NACE 85.1	1 947	2 075	2 172	2 412	2722	3 010
Total ISIC/NACE 85.1 Health care	17 826	19 013	20142	22 614	25 5 52	27 482
ISIC/NACE 85.3 Social care						
85.31 Social care with accomodation	8 208	8 669	9 289	9 357	10637	11 514
85.32 Non-medical day tre atment	2 466	2 633	2 909	4 038	4622	5 365
85.33 Day care and other so dial care	812	952	1 165	1 353	1560	1 653
Total ISIC/NACE 85.3 Social care	11 486	12 253	1 3 363	14 748	16819	18 532
Other ISIC/NACE groups						
52 Pharmacies, retail trade medical goods	4 634	5 029	5 422	6 010	6442	6 913
75 Government	975	997	977	1 024	1032	1 047
Other ISIC/NACE groups supplying health and so dal care	1 049	1 119	1 160	1 314	1 4 58	1 532
Total other ISIC/NACE groups	6 657	7 146	7 560	8 349	8932	9 492
Not included production						
Not included production 1)	886	976	1 108	1 213	1304	1 454
Care expenditure	36 855	39 387	42173	46 923	52 6 06	56 960

¹⁾ Among others production by consumer households and providers in the rest of the world

Table 4: Expenditure according to the division of the Care Statement of the Ministry of Health, Welfare and Sports by area of care, $1998-2003^*$

	1998	1 999	20 00	200 1	2 002	200 3*
	mIn euro					
He alth pro motion and protection	333	354	384	459	552	628
Curative somatic care	14 07 1	14 944	15 8 14	17 81 7	20 159	21 546
Pha rma ceuti cal servi ces	3 28 1	3 567	3 8 6 7	4 32 2	4 705	5 07 2
Mental health, care for the addicted and social relief	2 42 5	2 644	2 7 66	3 04 4	3 401	3 753
Care for the handicapped and therapeutic appliances	4 33 2	4 940	5 3 0 5	5 79 9	6 504	7 130
Medical care, care for the elderly	7 63 1	8 021	8 6 52	9 53 6	10 793	11 9 68
Administration of care in surances	1 47 2	1 532	1 5 39	1 67 3	1 744	1 768
Not in clud ed in Care Statement 1)	3 31 0	3 386	3 8 4 6	4 27 2	4 747	5 093
Care expenditure	36 85 5	3 9 387	42 173	46 923	52 606	56 9 60

¹⁾ Among others providers of day nursery, occupational health care and alternative health care treatment

T able 5: Expenditure according to OECD / Eurostat by ICH A-HP 1), 1998-2003*

		1998	1999	2000	2001	2002	2003
		min euro					
HP1	Hospitals						
HP1.1	General hospitals (ind uding university hospitals)	8 342	8 845	9 41 2	10 840	12 302	12 96
HP1.2	Mental health and substance abuse hospitals	1 846	2 06 1	2 250	2 520	2 827	3 12
HP1.3	Speciality hospitals	432	455	496	553	628	684
	Total HP 1 Hospitals	10 620	11 361	12 158	13 913	15 756	16 772
HP2	Nursing and residential care facilities						
HP2.1	Nursing homes	2 928	3 043	3 242	3 658	4 058	4 40
HP2.2	Residential mental retardation, mental health and substance abuse facilities	2 44 0	2 634	2 876	2 40 2	2 827	3 11
HP2.3	Community care facilities for the elderly	2 692	2 842	2 99 2	3 094	3 53 6	3 76
HP2.9	All other residential care facilities	70	74	81	101	119	13
	Total HP 2 Nursing and residential care facilities	8 130	8 593	9 191	9 256	10 540	11 42
HP3	Providers of ambulatory health care						
HP3.1	Offices of physicians	2 654	2 796	2 87 5	3 07 1	3 497	3 81
HP3.2	Offices of dentists	1 191	1 235	1 323	1 459	1 67 1	1 82
HP3.3	Offices of other health practitioners	1 41 5	1 535	1 61 5	1 756	1 888	2 02
HP3.4	Out-patient care centres	1 040	1 067	1 048	1 850	2 07 5	2 30
HP3.5	Medical and diagnostic laboratories	138	169	176	193	204	22
HP3.6	Providers of home health care services	2 01 5	2 144	2 425	2 791	3 202	3 77
HP3.9	All other providers of ambulatory health care	296	318	317	384	451	49
	Total HP 3 Providers of ambulatory health care	8 748	9 263	9778	11 504	12 988	14 469
HP4	Retail sale and other providers of medical goods	4 943	5 353	5 760	6 390	6 861	7 37 9
HP5	Provision and administration of public health programmes	436	466	501	580	690	788
HP6	Health administration and insurance	1 459	1 519	1 525	1 644	1 719	1 74
HP7 and	d Other industries (rest of the economy)						
HP9	and Rest of the world	1 090	1 203	1 338	1 477	1 633	1 86
	Provi ders outsi de HP-classi ficati on 2)	1 429	1 629	1 922	2 160	2 419	2 52
	Care expenditure	36 855	39 387	42 173	46 923	52 60 6	56 96

¹⁾ ICHA-HP: International Classification of Health Accounts - Health care Providers

²⁾ Among others expenditure on day nursery, public social care and social relief

Table 6: Expenditure Care Accounts in constant prices, 1998-2003*

	19 98	2003*	19 98- 200 3*
	mln euro		ind ex (199 8= 100)
Providers of health care			
1,2,3,6 Hosp itals, Practices of medical specialists	10 0 52	11 64 1	115,8
4 Providers of mental health care	2 2 7 8	2 60 2	114,2
5 Practices of general practitioners	1 2 9 9	1 40 2	108,0
7 Practices of dentists	1 191	1 433	120,4
8 Practices of mid wifes and paramedical professionals	784	866	110,3
9 Municipal Health Services	395	508	128,4
10 Occupational health services	645	857	132,8
11 Suppliers of pharmaceuticals	3 281	4 07 0	124,1
12 Suppliers of therapeuticappliances	1 6 62	1 984	119,3
13 Providers of ancillary services	3 59	464	129,2
14 Other providers of health care	1 3 80	1 727	125,2
Total of health care providers	23 3 27	27 55 3	118,1
Providers of social care			
15 Nursing homes	2 9 28	3 44 7	117,7
16 Homes for the elderly	2 6 92	2 96 3	110,0
17 Home care institutions	2 0 15	2 72 0	135,0
18 Providers of care for the handicapped	2 8 4 4	3 812	134,1
19 Providers of day nursery	649	988	152,2
20 Other providers of social care	941	1 149	122,1
Total of social care providers	12 0 69	15 07 9	124,9
Administration and management institutions			
21 Administration and management in stitutions	1 4 59	1 464	100,3
Car e expenditure	36 8 55	44 09 6	119,6

Table 7A: Health and Social Care Accounts by (clusters of) actors and source of primary financing, 1998

	HF 1.1	HF 1.2	HF 2.1 en HF 2.2	HF 2.3	HF 2.4, 2.5 and HF 3.0
	mln e uro				
Providers of health care					
1 General hospitals	63	4 2 9 4	1 4 14	82	259
2 University hospitals	421	1 1 46	446	18	198
3 Specialised hospitals	0	277	94	5	22
4 Providers of mental health care	204	2 0 52	C	8	14
5 Practices of general practitioners	0	873	272	99	55
6 Practices of medical specialists	0	798	430	62	23
7 Practices of dentists	0	331	584	253	23
8 Practices of mid wifes and para medical professionals	0	4 43	285	5 44	13
9 Municipal Health Services	236	74	17	27	41
10 Occupational health services	70	0	C	0	576
11 Suppliers of pharmaceuticals	0	1 8 43	755	6 66	16
12 Sup pliers of therap eutic appliances	0	450	1 59	878	175
13 Providers of ancillary services	0	137	48	3 4	171
14 Other providers of health care	54	471	236	5 547	71
Total of health care providers	1 048	13 189	4 7 39	2 6 9 2	1 658
Providers of social care					
15 Nursing homes	0	2 8 60	C	31	37
16 Homes for the elderly	11	2 5 92	C	43	45
17 Home care institutions	40	1 7 63	54	112	46
18 Providers of care for the handicapped	2	2 7 7 7	C	3	61
19 Providers of day nursery	218	0	C	145	286
20 Other providers of social care	312	66	C	548	15
Total of social care providers	583	10 0 58	54	883	491
Administration and management institutions					
21 Administration and management institutions	166	661	3	3 0	630
Care expenditure	1 7 97	23 9 08	4 7 96	3 5 7 5	2 7 7 9

HF 1.1: Government

HF 1.2: Social security

HF 2.1 and HF 2.2: Private insurance

HF 2.3: Out-of-pocket payments

HF 2.4, 2.5 and 3: Other sources of financing

Table 7 B: He alth and Social Care Accounts by (clusters of) actors and source of primary financing, 1999

	HF 1.1	HF 1.2	HF 2.1 en HF 2.2	HF 2.3	HF 2.4, 2.5 and HF 3.0
	mln e uro				
Providers of health care					
1 General hospitals	72	4 3 32	1 5 35	1 58	269
2 University hospitals	466	1 2 13	483	89	228
3 Spe cial ised hosp itals	0	287	1 00	11	22
4 Providers of mental health care	2 14	2 2 17	0	11	39
5 Practices of general practitioners	0	906	290	103	56
6 Practices of medical specialists	0	842	462	62	24
7 Practices of dentists	0	341	6 17	2 5 2	24
8 Practices of mid wifes and para medical professionals	0	501	3 19	47	15
9 Municipal Health Services	250	74	21	31	43
10 Occupational health services	79	0	0	0	647
11 Suppliers of pharma ceuticals	0	1 991	840	7 18	17
12 Suppliers of therapeutic appliances	0	447	180	974	184
13 Providers of ancillary services	0	1 59	59	4	183
14 Other providers of health care	53	478	241	608	76
Total of health care providers	1 134	13 786	5 147	3 0 69	1 827
Providers of social care					
15 Nursing homes	0	2 9 7 0	0	35	38
16 Homes for the elderly	8	2 7 36	0	49	49
17 Home care institutions	39	1 9 56	48	46	55
18 Providers of care for the handicapped	2	2 9 24	0	3	139
19 Providers of day nursery	2 29	0	0	167	373
20 Other providers of social care	334	83	0	603	19
Total of social care providers	612	10 6 69	48	904	673
Administration and management institutions					
21 Administration and management in stitutions	170	6 66	4	. 0	680
Care expenditure	1 9 16	25 1 21	5 199	3 972	3 179

HF 1.1: Government

HF 1.2: Social security

HF 2.1 and HF 2.2: Private insurance

HF 2.3: Out-of-pocket payments

HF 2.4, 2.5 and 3: Other sources of financing

Table 7 C: He alth and Social Care Accounts by (clusters of) actors and source of primary financing, 2000

	HF 1.1	HF 1.2	HF 2.1 en HF 2.2	HF 2.3	HF 2.4, 2.5 and HF 3.0
	mln e uro				
Providers of health care					
1 General hospitals	73	4 671	1 5 57	1 25	3 17
2 University hospitals	516	1 371	528	51	201
3 Special ised hospitals	0	3 13	1 09	9	28
4 Providers of mental health care	196	2 3 30	0	10	54
5 Practices of general practitioners	0	976	287	1 09	91
6 Practices of medical specialists	0	906	369	62	24
7 Practices of dentists	0	367	663	267	26
8 Practices of mid wifes and para medical professionals	0	536	321	48	15
9 Municipal Health Services	268	75	22	35	52
10 Occupational health services	90	0	0	0	738
11 Suppliers of pharmaceuticals	0	2 1 26	876	842	24
12 Suppliers of therapeutic appliances	0	467	195	1 0 37	194
13 Providers of ancillary services	0	167	63	4	173
14 Other providers of health care	46	539	253	6 62	82
Total of health care providers	1 189	14 844	5 243	3 2 6 1	2 0 19
Providers of social care					
15 Nursing homes	0	3 1 50	0	43	50
16 Homes for the elderly	10	2 8 83	0	52	47
17 Home care institutions	35	2 2 3 2	47	50	61
18 Providers of care for the handicapped	2	3 1 79	0	3	1 52
19 Providers of day nursery	257	0	0	216	482
20 Other providers of social care	355	75	0	690	20
Total of social care providers	6 59	11 5 19	47	1 0 55	8 12
Administration and management institutions					
21 Administration and management institutions	170	650	4	. 0	701
Care expenditure	2 0 18	27 0 12	5 2 9 4	4 3 16	3 5 3 2

HF 1.1: Government

HF 1.2: Social security

HF 2.1 and HF 2.2: Private insurance

HF 2.3: Out-of-pocket payments

HF 2.4, 2.5 and 3: Other sources of financing

Table 7 D: Health and Social Care Accounts by (clusters of) actors and source of primary financing, 2001

	HF 1.1	HF 1.2	HF 2.1 en HF 2.2	HF 2.3	HF 2.4, 2.5 and HF 3.0
	mln e uro				
Providers of health care					
1 General hospitals	79	5 271	1 8 32	148	4 07
2 University hospitals	615	1 4 8 1	629	60	318
3 Specialised hospitals	0	349	120	10	35
4 Providers of mental health care	241	2 5 3 6	0) 15	64
5 Practices of general practitioners	0	1 0 90	3 33	1 15	46
6 Practices of medical specialists	0	940	402	2 68	25
7 Practices of dentists	0	3 93	732	3 06	29
8 Practices of mid wifes and para medical professionals	0	584	365	5 53	17
9 Municipal Health Services	312	88	3 21	24	87
10 Occupational health services	98	C	0	0	802
11 Suppliers of pharmaceuticals	0	2 3 7 1	965	9 52	! 34
12 Suppliers of therapeutic appliances	0	527	2 19	1 1 0 6	216
13 Providers of ancillary services	0	175	69) 4	204
14 Other providers of health care	49	633	291	674	113
Total of health care providers	1 3 94	16 4 38	5 9 7 8	3 5 3 5	2 3 96
Providers of social care					
15 Nursing homes	0	3 5 63	0) 44	51
16 Homes for the elderly	11	2 9 7 2	. 0	54	56
17 Home care institutions	6	2 6 0 7	61	46	71
18 Providers of care for the handicapped	2	3 4 22	. 0) 4	227
19 Providers of day nursery	299	C	0	249	567
20 Other providers of social care	375	76	6 0	752	. 21
Total of social care providers	694	12 640	61	1 149	994
Administration and management institutions					
21 Administration and managementinstitutions	172	667	5	5 0	800
Care expenditure	2 2 6 0	29 7 45	6 0 44	4 6 8 4	4 1 90

HF 1.1: Government

HF 1.2: Social security

HF 2.1 and HF 2.2: Private insurance

HF 2.3: Out-of-pocket payments

HF 2.4 , 2.5 and 3: Other sources of financing

Table 7 E: Health and Social Care Accounts by (clusters of) actors and source of primary financing, 2002

	HF 1.1	HF 1.2	HF 2.1 en HF 2.2	HF 2.3	HF 2.4, 2.5 and HF 3.0
	mln e uro				
Providers of health care					
1 General hospitals	85	5 7 7 4	2 131	1 18	443
2 University hospitals	6 63	1 7 7 0	793	75	451
3 Spe cial ised hosp itals	0	371	172	8	36
4 Providers of mental health care	309	2 8 12	0	11	68
5 Practices of general practitioners	0	1 248	427	97	48
6 Practices of medical specialists	0	1 0 63	460	65	29
7 Practices of dentists	0	4 56	847	3 35	33
8 Practices of mid wifes and para medical professionals	0	619	399	57	18
9 Municipal Health Services	3 56	84	31	29	128
10 Occupational health services	1 09	0	0	0	901
11 Suppliers of pharma ceuticals	0	2 5 4 6	1 0 84	1 0 38	38
12 Suppliers of therapeutic appliances	0	576	252	1 0 94	234
13 Providers of ancillary services	0	192	73	5	240
14 Other providers of health care	53	712	3 39	6 96	112
Total of health care providers	1 5 76	18 222	7 0 0 7	3 6 2 7	2 7 7 8
Providers of social care					
15 Nursing homes	0	3 9 53	0	51	54
16 Homes for the elderly	12	3 4 30	0	45	48
17 Home care institutions	2	3 0 6 1	76	30	33
18 Providers of care for the handicapped	0	4 0 82	0	4	179
19 Providers of day nursery	347	0	0	288	657
20 Other providers of social care	401	89	0	812	23
Total of social care providers	762	14 6 14	76	1 231	994
Administration and management institutions					
21 Administration and management in stitutions	181	6 5 5	5	0	878
Care expenditure	2 5 19	33 4 92	7 0 87	4 8 58	4 6 50

HF 1.1: Government

HF 1.2: Social security

HF 2.1 and HF 2.2: Private insurance

HF 2.3: Out-of-pocket payments

HF 2.4, 2.5 and 3: Other sources of financing

Table 7 F Health and Social Care Accounts by (clusters of) actors and source of primary financing, $20\,03^*$

	HF 1.1	HF 1.2	HF 2.1 en HF 2.2	HF 2.3	HF 2.4, 2.5 and HF 3.0
	mln e uro				
Providers of health care					
1 General hospitals	89	6 0 09	2 2 4 6	124	501
2 University hospitals	748	1 8 0 4	8 56	81	509
3 Special ised hospitals	0	406	185	5 9	42
4 Providers of mental health care	3 50	3 0 99	C) 10	75
5 Practices of general practitioners	0	1 3 4 8	497	1 12	. 37
6 Practices of medical specialists	0	1 1 44	523	63	31
7 Practices of dentists	0	477	935	378	36
8 Practices of mid wifes and para medical professionals	0	6 56	443	63	19
9 Municipal Health Services	410	98	34	33	145
10 Occupational health services	120	0	C	0	989
11 Suppliers of pharmaceuticals	0	2 7 53	1 1 50	1 1 2 8	40
12 Suppliers of therapeutic appliances	0	640	283	1 1 2 6	258
13 Providers of ancillary services	0	207	81	5	261
14 Other providers of health care	56	844	357	7 06	141
Total of health care providers	1 7 7 4	19 4 85	7 5 90	3 8 3 9	3 0 86
Providers of social care					
15 Nursing homes	0	4 2 9 5	C	56	58
16 Homes for the elderly	13	3 6 52	C	47	50
17 Home care institutions	172	3 4 84	94	19	6
18 Providers of care for the handicapped	0	4 5 83	C) 4	146
19 Providers of day nursery	3 64	0	C	3 03	690
20 Other providers of social care	431	120	0	834	25
Total of social care providers	980	16 1 33	94	1 2 6 3	975
Administration and management institutions					
21 Administration and managementinstitutions	187	650	6	0	8 98
Care expenditure	2 942	36 2 68	7 691	5 101	4 9 58

HF 1.1: Government

HF 1.2: Social security

HF 2.1 and HF 2.2: Private insurance

HF 2.3: Out-of-pocket payments

HF 2.4, 2.5 and 3: Other sources of financing

Table 8: Expenditure Care Accounts by source of primary financing, 1998-2003 *

		1 998	1999	2000	2 001	20 02	200 3*
		mln euro					
HF 1.1	Govern me nt	1 797	1 9 16	2 01 8	2 260	2 5 19	2 9 42
HF 1.2	Social security	23 908	25 1 21	27 01 2	29 745	33 4 92	36 26 8
HF 2.1,							
HF 2.2	Private insurance	4 796	5 1 99	5 29 4	6 044	7 0 87	7 6 9 1
HF 2.3	Out-of-pocket payments	3 575	3 9 7 2	4 31 6	4 684	4 8 58	5 1 01
HF 2.4,							
2.5, 3	Oth er sources of fin ancing	2 779	3 179	3 53 2	4 190	4 6 50	4 9 58
	Care expenditure	36 855	39 3 87	42 173	46 923	52 6 06	56 96 0
among w	hich:						
	He alth care expenditure						
HF 1.1	Govern ment	1 048	1 1 34	1 189	1 394	1 5 7 6	1 7 7 4
HF 1.2	Social security	13 189	13 7 86	14 84 4	16 438	18 2 22	19 48 5
HF 2.1,							
HF 2.2	Private insurance	4 739	5 1 4 7	5 24 3	5 978	7 0 07	7 5 90
HF 2.3	Out-of-pocketp ayments	2 692	3 0 69	3 26 1	3 535	3 6 2 7	3 8 39
HF 2.4,							
2.5, 3	Oth er sources of fin ancing	1 658	1 827	2 01 9	2 396	2 7 7 8	3 0 86
	Social care expenditure						
HF 1.1	Govern ment	583	612	659	694	762	980
HF 1.2	Social security	1 0 058	10 6 69	11 51 9	12 64 0	14 6 14	16 133
HF 2.1,							
HF 2.2	Private insurance	54	48	47	61	76	94
HF 2.3	Out-of-pocket payments	883	904	1 05 5	1 149	1 2 3 1	1 2 6 3
HF 2.4,							
2.5, 3	Oth er source s of fin ancing	491	673	812	994	994	975

Table 9A: Health and Social Care Accounts by (clusters of) actors and function, 1998

	HC 1 NL	HC 2 NL	HC 3 NL	HC 4 NL	HC 5 NL	HC 6 NL	HC 7 NL	Social		All other
	m In euro									
Providers of health care										
1 General hospitals	2 018		0 285	82	5 239	9 0)	4	175	0
2 University hospitals	713		0 420	39	242	2 0)	1	0	462
3 Speciali sed hospitals	84	10	8 116	6	2 17	7 0)	0	10	0
4 Providers of mental health care	1 357		0 347	,	314	1 8	3	0	167	85
5 Practices of general practitioners	790		0 (9	3 289	93	3	1	0	2
6 Practices of medical special ists	894		0 () 21	7 174	1 11		0	0	17
7 Practices of dentists	494		0 () 1:	2 226	3 435	;	0	0	23
8 Practices of midwifes and paramedical professionals	91	64	4 ()	33	3 5	i	0	0	12
9 Municipal Health Services	3		0 (9	3 (299)	0	0	0
10 Occupational heal th services	0	9	5 ()) () 441		0	76	33
11 Suppliers of pharmaceuticals	0		0 ()	3 106	3 0)	0	0	175
12 Suppliers of therapeutic appliances	0		0 ()	1 61	1 0)	0	0	51
13 Providers of and llary services	51		0 (269	9 (31		0	0	8
14 Other providers of health care	761	2	5 14	28	5 198	3 0) 2	:0	69	8
Total of health care providers	7 256	87	1 3749	2 24	6 450) 1324	5	7	497	876
Providers of social care										
15 Nursing homes	142	23	6 240	1	0 87	7 0)	0	41	21
16 Homes for the el defly	0		0 1	1) () ()	0	2 645	37
17 Home care institutions	0		4 662	2	5-	1 166	;	0	1 115	14
18 Providers of care for the handicapped	42	! 1	8 154	1	37	7 0)	0	2 542	50
19 Providers of day nursery	0		0 ()) () ()	0	649	0
20 Other providers of social care	20		0 56	3	1 ;	3 0)	0	862	O
Total of social care providers	204	25	8 3283	3	1 18	1 166	;	0	7 854	122
Ad mi nistration and management i nstitutions										
21 Administration and management institutions	-		-	-	-		1 45	9	-	
Care expenditure	7 460	1 12	9 703	2 24	8 6 632	2 1490	1 51	6	8 351	998

HC 1 NL: Curative care

HC 2 NL: Rehabilitation

HC 3 NL: Medical care

HC 4 NL: Ancil lary services

HC 5 NL: Medical goods

HC 6 NL: Preventive care

HC 7 NL: Administration, management and control, insurance

Table 9B: Health and Social Care Accounts by (clusters of) actors and function, 1999

	HC 1 NL	HC 2 NL	HC3NL	HC 4 NL	HC 5 NL	HC 6 NL	HC 7 NL	Social care	All other activities
	mln euro								
Providers of health care									
1 General hospitals	2 113	(3 035	5 79:	2 24	3 () 4	17	9 0
2 University hospitals	820	(508	41	4 26	6 () 1		0 471
3 Specialised hospitals	89	113	3 134	5	6 1	3 (0	1	0 0
4 Providers of mental health care	1 428		384		0 33	5 10	0	21	3 104
5 Practices of general practitioners	818	() (9	6 30	98	31		0 2
6 Practices of medical special ists	945	() (23:	3 18	2 11	0		0 18
7 Practices of dentists	538	() () 1:	2 22	6 434	0		0 24
8 Practices of midwifes and paramedical professionals	100	72	7 ()	0 3	7 5	. 0		0 14
9 Municipal Health Services	2	() (9:	5	321	0		0 0
10 Occupational heal th services	0	10	7 ()	0	99	0	8	6 34
11 Suppliers of pharmaceuticals	0	() ()	0 3 37	3 (0		0 189
12 Suppliers of therapeutic appliances	0	() ()	0 1 73	2 (0		0 54
13 Providers of and llary services	55	() (31	0	32	. 0		0 8
14 Other providers of health care	791	2	5 15	309	9 21	6 (19	7	1 9
Total of health care providers	7 698	972	2 4 076	3 231	7 6 94	1 1411	56	56	4 928
Providers of social care									
15 Nursing homes	148	24	5 2493	3	0 8	7 (0	4	7 24
16 Homes for the elderly	0	(0 12	2	0) (0	279	1 39
17 Home care institutions	0		5 709)	0 5	3 182	! 0	118	0 15
18 Providers of care for the handicapped	45	19	9 233	3	0 34	4 (0	2 68	4 54
19 Providers of day nursery	0	() ()	0) (0	76	9 0
20 Other providers of social care	20	() 60		1 :	3 (0	95	4 0
Total of social care providers	213	269	9 3 507	•	1 17	7 182	! 0	8 42	5 131
Ad mi nistration and management i nstitutions									
21 Administration and management institutions	-				-		1 519		
Care expenditure	7 911	1 24	1 7 583	2 3 1	9 7 11	3 1 593	1 575	8 98	9 1 059

HC 1 NL: Curative care

HC 2 NL: Rehabilitation

HC 3 NL: Medical care

HC 4 NL: Ancil lary services

HC 5 NL: Medical goods

HC 6 NL: Preventive care

HC 7 NL: Administration, management and control, insurance

Table 9C: Health and Social Care Accounts by (clusters of) actors and function, 2000

	HC 1 NL	HC 2 NL	HC 3 NL	HC 4 NL	HC 5 NL	HC 6 NL	HC 7 NL	Social	All other activities
	m In euro								
Providers of health care									
1 General hospitals	2 2 1 0)	0 3 297	81	1 230	0		,	192 0
2 University hospitals	892	2	0 558	43	5 290	0	1		0 490
3 Speciali sed hospitals	98	3 11	9 153	5 50	6 20	0	()	12 0
4 Providers of mental health care	1 470)	0 422	2 (355	6) 2	232 106
5 Practices of general practitioners	865	5	0 (102	2 325	104	66	3	0 2
6 Practices of medical special ists	932	2	0 (218	3 181	11	()	0 18
7 Practices of dentists	618	3	0 () 1	1 239	429	()	0 26
8 Practices of midwifes and paramedical professionals	115	75	0 () (38	5)	0 14
9 Municipal Health Services	2	2	0 (100) (349	()	0 0
10 Occupational heal th services	0	12	2 () () (570	()	98 38
11 Suppliers of pharmaceuticals	0)	0 () (3 667	0	()	0 200
12 Suppliers of therapeutic appliances	0)	0 () (1 835	0	()	0 58
13 Providers of and llary services	58	3	0 (308	3 (34)	0 7
14 Other providers of health care	861	2	3 20	329	5 239	0	25	5	76 11
Total of health care providers	8 121	1 01	4 4450	2 366	5 7 418	1 508	97		611 971
Providers of social care									
15 Nursing homes	157	26	0 2650) (0 89	0	()	57 28
16 Homes for the elderly	0)	0 3	3 () (0	(29	952 37
17 Home care institutions	0) - ,	2 809) (0 64	189	() 13	344 21
18 Providers of care for the handicapped	48	3 2	1 240) (34	0	(29	935 58
19 Providers of day nursery	0)	0 () () (0	() 9	956 0
20 Other providers of social care	21		0 65	;	1 3	0	() 10	050 0
Total of social care providers	227	27	9 3767	, .	1 191	189		92	294 144
Ad mi nistration and management institutions									
21 Administration and management institutions	-		-				1 525	5	-
Care expenditure	8 348	1 29	2 8 217	2 368	3 7 609	1 697	1 622	9 9	905 1 115

HC 1 NL: Curative care

HC 2 NL: Rehabilitation

HC 3 NL: Medical care

HC 4 NL: Ancil lary services

HC 5 NL: Medical goods

HC 6 NL: Preventive care

HC 7 NL: Administration, management and control, insurance

Table 9D: Health and Social Care Accounts by (clusters of) actors and function, 2001

	HC 1 NL	HC 2 NL	HC3NL	HC 4 NL	HC 5 NL	HC 6 NL	HC 7 NL	Social care	All other activities
	mIn euro								
Providers of health care									
1 General hospitals	2 526	i	0 3809	927	7 237	0	7	23	3 0
2 University hospitals	1 013	;	0 608	582	2 298	3 0	2		599
3 Speciali sed hospitals	104	13	9 175	60	2	0	0	19	5 0
4 Providers of mental health care	1 583	;	0 467	, (398	3 4	0	25	5 151
5 Practices of general practi tioners	994		0 () 117	7 344	110	18		0 2
6 Practices of medical special ists	948	+	0 (252	2 204	12	0		0 19
7 Practices of dentists	707	•	0 () 12	2 25	461	0		0 29
8 Practices of midwifes and paramedical professionals	133	82	4 () (0 42	2 5	0	(0 15
9 Municipal Health Services	2	!	0 (102	2 (428	0	(0 0
10 Occupational health services	0	13	3 () () (619	0	10	7 41
11 Suppliers of pharmaceuticals	0)	0 () (0 4 098	3 0	0		0 224
12 Suppliers of therapeutic appliances	0)	0 () (2 006	5 0	0		0 62
13 Providers of and llary services	62	!	0 (362	2 () 29	0		0 9
14 Other providers of health care	938	2	5 23	396	3 266	3 0	24	79	9 10
Total of health care providers	9 010	1 12	0 508	2 798	8 164	1 668	51	688	8 1 161
Providers of social care									
15 Nursing homes	177	29	2 3 0 1 8	3 (0 84	0	0	58	3 29
16 Homes for the elderly	0)	0 3	3 () (0	0	3 04	6 45
17 Home care institutions	0)	0 934		72	2 212	0	1 534	4 39
18 Providers of care for the handicapped	52	. 2	5 366	5 (33	3 0	0	3 10	9 69
19 Providers of day nursery	0)	0 () () (0	0	1 11	5 0
20 Other providers of social care	22	!	0 65	i 2	2 3	3 0	0	1 13:	2 0
Total of social care providers	251	31	7 4387		2 192	2 212	0	9 99	5 182
Ad mi nistration and management institutions									
21 Administration and management institutions	-		-		= .	-	1 644		-
Care expenditure	9 261	1 43	7 9468	2 800	8 356	1 880	1 695	10 68	3 1 343

HC 1 NL: Curative care

HC 2 NL: Rehabilitation

HC 3 NL: Medical care

HC 4 NL: Ancil lary services

HC 5 NL: Medical goods

HC 6 NL: Preventive care

HC 7 NL: Administration, management and control, insurance

Table 9E: Health and Social Care Accounts by (clusters of) actors and function, 2002

	HC 1 NL	HC 2 NL	HC3NL	HC 4 NL	HC 5 NL	HC 6 NL	HC 7 NL	Social	All other activities
	mIn euro								
Providers of health care									
1 General hospitals	2 879		0 4 125	1 036	232	. 0		6 2	72 0
2 University hospitals	1 302	: (0 827	699	334	0		2	0 588
3 Speciali sed hospitals	122	20	7 103	116	21	0		1	16 0
4 Providers of mental health care	1 751		0 520	0	444	. 6		0 2	86 192
5 Practices of general practitioners	1 167		0 (137	376	120	1	7	0 2
6 Practices of medical special ists	1 066		0 (284	232	13		0	0 22
7 Practices of dentists	872	: (0 (12	281	474		0	0 33
8 Practices of midwifes and paramedical professionals	144	88	0 0	0	45	6		0	0 16
9 Municipal Health Services	3		0 (115	0	510		0	0 0
10 Occupational health services	0	14	9 (0	0	695		0 1	20 47
11 Suppliers of pharmaceuticals	0		0 0	0	4 466	0		0	0 239
12 Suppliers of therapeutic appliances	0		0 0	0	2 096	0		0	0 60
13 Providers of and llary services	61		0 0	400	0	39		0	0 10
14 Other providers of health care	1 006	2	6 26	449	283	0	2	5	88 10
Total of health care providers	10 374	1 26	2 5 601	3 248	8 810	1 862	5	1 7	82 1 219
Providers of social care									
15 Nursing homes	193	32	0 3 3 5 9	0	84	0		0	68 34
16 Homes for the elderly	0		0 4	0	0	0		0 34	92 40
17 Home care institutions	0		0 1 041	0	67	228		0 18	47 20
18 Providers of care for the handicapped	60	2	9 323	0	34	0		0 37	35 83
19 Providers of day nursery	0		0 (0	0	0		0 12	92 0
20 Other providers of social care	24		0 76	2	3	0		0 12	20 0
Total of social care providers	277	34	8 4802	2	188	228		0 116	55 177
Ad mi nistration and management i nstitutions									
21 Administration and management institutions	-					. <u>-</u>	1 71	9	-
Care expenditure	10 651	1 61	0 10 404	3 249	8 998	2 090	1 77	0 124	37 1 396

HC 1 NL: Curative care

HC 2 NL: Rehabilitation

HC 3 NL: Medical care

HC 4 NL: Ancil lary services

HC 5 NL: Medical goods

HC 6 NL: Preventive care

HC 7 NL: Administration, management and control, insurance

Table 9F: Health and Social Care Accounts by (clusters of) actors and function, 2003 *

	HC 1 NL	HC 2 NL	HC 3 NL	HC 4 NL	HC 5 NL	HC 6 NL			Allother activities
	mln euro								
Providers of health care									
1 General hospitals	3 233	0	4 059	1 139	227	0	7	304	0
2 University hospitals	1 429	0	796	789	318	0	3	0	664
3 Specialised hospitals	122	246	111	123	3 21	0	1	17	0
4 Providers of mental health care	1 913	0	595) 486	7	0	321	214
5 Practices of general practitioners	1 319	0	(155	386	129	4	0	2
6 Practices of medical specialists	1 160	0		310	253	14	0	0	24
7 Practices of dentists	964	0		12	309	505	0	0	36
8 Practices of midwifes and paramedical professionals	156	952) 48	3 7	0	0	18
9 Munid pal Health Services	3	0		131	. 0	586	0	0	0
10 O cupational health services	0	163) 0	763	0	132	52
11 Suppliers of pharmaceuticals	0	0			4 817	0	0	0	255
12 Suppliers of therapeutic appliances	0	0			2 2 4 5	. 0	0	0	62
13 Providers of and llary services	64	0		439	9 0	41	0	0	10
14 Other providers of health care	1 104	26	31	490	320	0	27	95	11
Total of health care providers	11 466	1 388	5 592	3 589	9 430	2 051	42	869	1 348
Providers of social care									
15 Nursing homes	210	348	3 655		84	0	0	74	37
16 Homes for the elderly	0	0	. 4) 0	0	0	3 716	41
17 Home care institutions	0	0	1 218	() 77	264	0	2 198	17
18 Providers of care for the handicapped	66	32	300		35	0	0	4 204	95
19 Providers of day nursery	0	0) 0	0	0	1 357	0
20 Other providers of social care	25	0	111	2	2 3	0	0	1 270	0
Total of social care providers	301	380	5 288	. 2	2 199	264	0	12 820	191
Administration and management institutions									
21 Administration and maragement institutions	-					-	1 741	-	-
Care expend ture	11 766	1 768	10 880	3 590	9 629	2 3 1 5	1 783	13 688	1 539

HC 1 NL: Ourative care

HC 2 NL: Rehabil itation

HC 3 NL: Medical care

HC 4 NL: Ancillary services

HC 5 NL: Medical goods

HC 6 NL: Preventive care

HC 7 NL: Administration, management and control, insurance

Table 10: Expenditure Care Accounts by function, 1998-2003*

		1998	1999	20 00	2 001	2002	20 03*
		ml n e uro					
HC 1 NL	Curative care	7460	7 911	8 3 48	9 261	1 0 651	11 766
HC 2 NL	Re habi li tatio n	1129	1 241	1 2 9 2	1 437	1 610	1 768
HC 3 NL	Medical care	7031	7 583	8 2 17	9 468	10 404	10 880
HC 4 NL	Anci lla ry servi œ s	2248	2 319	2 3 68	2 800	3 249	3 590
HC 5 NL	Medi cal go ods	6632	7 118	7 6 09	8 356	8 998	9 629
HC 6 NL	Preventive care	1490	1 593	1 6 97	1 880	2 090	2 315
HC 7 NL	Admin istration, man agement and control, insurance	1516	1 575	1 6 22	1 695	1 770	1 783
	Social care	8351	8 989	9 9 0 5	10 683	12 437	13 688
	Other a civitie s	9 98	1 059	1 1 15	1 343	1 396	1 539
	Care expenditure	36855	39 387	42 173	46 923	52 606	56 960

 $Table \ 11A \ Expenditure \ of Care \ providers \ by source \ of \ financing \ according \ to \ the \ OECD \ / \ Eurostat \ I \ CHA-HF^1), \ 1998$

		Total expenditure	HF.1		HF.	.2				HF	F.3
		experiatale	ŀ	F.1.1 H	⊩F. 1. 2	Н	= 2.1 H	IF.2.2 H		F.2.4 + F.2.5	
		million euro									
HP 1	Ho spitals										
HP 1.1	General hospit als (including university hospitals)	8342		485	5440	2396	872	988	100	436	21
HP 1.2	Mental health and substance abuse hospitals	1846		130	1702	13	0	0	0	13	0
HP 1.3	Speciality hos pitals	432	311	27	285	121	44	50	5	21	1
HP. 1	Hospitals	10620	8068	642	7427	2530	916	1038	105	471	22
<i>HP 2</i> HP 2 1	Nu sing and residential care facilities Nursing homes	2928	2860	0	2860	53	0	0	31	22	15
HP 22	Residential mental retardation, mental health and substance abuse facilities	2440		4	2386	50	0	0	3	47	0
HP 23	Community care facilities for the elderly	2692		11	2592	89	0	0	43	45	d
HP 29	All other residential care facilities	70		2	67	1	0	0	0	1	ď
HP.2	Nursing and residential care facilities	8130	7922	17	7905	193	0	0	78	115	15
нр з	Providers of ambulatory health care										
HP 3.1	Offices of physicians	2654	1710	0	1710	937	244	458	163	71	6
HP 3.2	Offices of dentists	1191	331	0	331	860	55	528	253	23	Ċ
HP 3.3	Offices of other health practitioners	1415	477	0	477	939	73	336	515	15	0
HP 3.4	Out-patient care centres	1040		147	777	114	17	28	54	14	3
HP 3.5	Medical and diagnostic laboratories	138		0	93	44	16	28	0	0	(
HP 3.6	Providers of home health care services	2015		40	1763	212	2	52	112	46	0
HP 3.9	All other providers of ambulatory health care	296	91	1	91	204	12	12	8	172	O
HP.3	Providers of ambulatoryhealth care	8748	5429	188	5241	3310	421	1442	1105	342	9
HP 4	Retails ale and other providers of medical goods	4943	2293	0	2293	2638	403	511	1545	180	11
HP 5	Provision and administration of public health programmes	436		237	102	98	9	8	27	54	0
HP 6	Health administration and insurance	1459	826	166	661	633	1	2	0	630	0
HP 7 and	Other industries (rest of the economy)										
HP 9	and Restof the world	1090	394	123	271	696	17	29	23	628	0
	Care expenditure of Health Care providers	35427	25271	1372	23899	10098	1767	3030	2882	2420	58
HP.0	Providers outside HP-dassification 2)	1429	434	425	9	995	0	0	694	301	0
	Care expenditure of Care providers	36855	25705	1797	23908	11093	1767	3030	3575	2721	58

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expenditure on day nursery, public social care and social relief

 $Table \, 11B \, \text{Expend ture} \, \, \text{of Care providers by source} \, \, \text{of financing} \, \, \text{acc} \\ \text{ording to the OECD} \, / \text{EurostatICHA-HF}^{\, 1)}, \, 1999 \, \, \text{ording to the OECD} \, / \, \text{EurostatICHA-HF}^{\, 1)}, \, 1999 \, \, \text{expenditure} \, \, \text{ording to the OECD}^{\, 1} \, / \, \text{expenditure} \, \, \text{ording to the OECD}^{\, 1} \, / \, \text{expenditure} \, \, \text{expenditure} \, \, \text{ording to the OECD}^{\, 1} \, / \, \text{expenditure} \, \, \text{expenditure} \, \, \text{ording to the OECD}^{\, 1} \, / \, \text{expenditure} \, \, \text{expenditure} \, \, \text{ording to the OECD}^{\, 1} \, / \, \text{expenditure} \, \, \text{expenditure$

		Total expenditure	HF.1		Н	IF.2				H	IF.3
		experio die	ŀ	-F.1.1	HF.1.2	н	IF.2.1 H	-IF.22 ⊦		F.24+ F.25	
		million euro									
HP 1	Hospitals										
HP 1.1	General hospitals (induding university hospitals)	884	5 6082	538	5544	2743	977	1041	248	478	19
HP 1.2	Mental health and substance abuse hospitals	206		141	1883	36	0	0	0	36	0
HP 1.3	Speciality hospital s	45	5 322	27	295	133	49	52	11	22	0
HP.1	Hospitals	1 136	1 8429	707	7722	2913	1025	1093	258	536	19
HP 2	Nursing and residential care facilities										
HP 21	Nursing homes	304		0	2970	59	0	0	35	24	14
HP 22	Residential mental retardation, mental health and substance abuse facilities	263		4	2507	123	0	0	.3	120	0
HP 23	Community care fad lities for the elderly	284		8	2736	98	0	0	49	49	0
HP 29	All other residential care facilities	7	4 73	2	70	2	0	0	0	2	0
HP.2	Nursing and residential care facilities	859	3 8297	14	8283	282	0	0	88	194	14
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	279		0	1796	994	273	478	169	74	6
HP 3.2	Offices of dentists	123		0	341	894	61	556	252	24	0
HP 3.3	Offices of other health practitioners	153		0	520	1015	83	348	568	16	0
HP 3.4	Out-patient care centres	106		146	786	133	19	31	63	20	3
HP 3.5 HP 3.6	Medical and diagnostic laboratories Providers of home health care services	16 214		0 39	114 1956	55 149	23 3	32 45	0 46	0 55	0
HP 3.9	All other providers of ambulatory health care	31		0	93	224	16	14	9	185	0
	· ·			_					-		_
HP.3	Providers of ambulatory health care	926	3 5791	186	5605	3464	477	1505	1107	374	8
HP 4	Retail sale and other providers of medical goods	535	3 2438	0	2438	2904	461	560	1693	190	11
HP 5	Provision and administration of public health programmes	46		252	102	111	11	10	31	60	0
HP 6	Health administration and insurance	151	9 836	170	666	683	2	2	0	680	0
HP 7 and	Other industries (rest of the economy)										
HP 9	and Rest of the world	120	3 425	130	294	778	17	36	25	699	0
	Care expenditure of Health Care providers	3775	8 26569	1458	25111	11135	1993	3206	3202	2734	53
HP.0	Providers outside HP-classification 2)	162	9 468	458	10	1162	0	0	770	392	0
	Care expenditure of Care providers	3938	7 27037	1916	25121	12297	1993	3206	3972	3126	53

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expenditure on daynursery, public social care and social relief

Table 11C Expenditure of Care providers by source of financing according to the OECD / Eurostat ICHA HF $^{1)}$, 2000

		Total expenditure	HF.1		HF.	2					HF.3
			н	F.1.1 H	F. 1.2	н	F.2.1 H	F22 H		IF.2.4 + IF.2.5	
		million euro									
HP 1	Ho spitals										
HP 1.1	General hospitals (including university hospitals)	9412	6631	589	6042	2759	1032	1054	176	497	22
HP 1.2	Mental health and substance abuse hospitals	2250	2198	131	2067	52	0	0	0	52	(
HP 1.3	Speciality hospitals	496	350	29	321	146	54	55	9	28	
HP. 1	Hospitals	12158	9180	750	8430	2956	1086	1109	185	576	2
HP 2	Nursing and residential care facilities										
HP 21	Nursing homes	3242	3150	0	3150	75	0	0	43	32	1
HP 22	Residential mental retardation, mental health and substance abuse facilities	2876	2741	. 1	2740	135	0	0	_3	131	
HP 23	Community care facilities for the elderly	2992	2893	10	2883	99	0	0	52 0	47	
HP 29	All other residential care facilities	81	79	2	77	2	0	0	Ü	2	
HP.2	Nursing and residential care facilities	9191	8863	14	8849	311	0	0	98	212	1
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	2875		0	1929	939	240	416	174	109	
HP 3.2	Offices of dentists	1323	367	0	367	956	63	600	267	26	
HP 3.3 HP 3.4	Offices of other health practitioners	1615	558	0	558	1057	85	349	607	17	
1P 3.4 1P 3.5	Out-patient care centres	1048	892	143	749	154	22	35	76	21	
1P 3.5 1P 3.6	Medical and diagnostic laboratories Providers of home health care services	176 2425	118 2266	0 35	118 2232	57 159	24 3	33 44	0 50	0 61	
1P 3.9	All other providers of am bulatory health care	317	100	0	99	217	18	14	10	174	
	·										
HP.3	Providers of ambulatory health care	9778	6231	178	6053	3539	455	1491	1185	409	
HP 4	Retails ale and other providers of medical goods	5760	2593	0	2593	3151	518	553	1879	201	1
HP 5	Provision and administration of public health programmes	501	374	269	105	127	12	9	35	71	
HP 6	Health administration and insurance	1525	819	170	650	706	2	2	0	701	
HP 7 and	Other industries (restof the economy)										
1P 9	and Restof the world	1338	457	134	323	880	19	38	28	796	1
	Care expenditure of Health Care providers	40250	28516	1514	27002	11670	2091	3203	3410	2967	64
1P.0	Providers outside HP-dassification 2)	1922	514	503	10	1409	0	0	907	502	(
	Care expenditure of Care providers	42173	29030	2018	27012	13079	2091	3203	4316	3469	64

 $^{^{1)}}$ ICHA-HF: International Gassification of Health Accounts - Health care Sources of Funding $^2)$ Among others expendture on day nursery, public social care and social relief

Table 11D Expenditure of Care providers by source of financing according to the OE CD / Eurostat I CHA-HF 1 , 2001

		Total F expenditure	IF.1		HF	.2				H	HF.3
		experiorate	НЕ	=.1.1 H	F.1.2	н	F.2.1 HI	F.22 H		F.24+ F.25	
		mi llion euro									
HP 1	Hospitals										
HP 1.1	General hospitals (including university hospitals)	10840	7446	694	6752	3372	1218	1244	208	702	23
HP 1.2	Ment al heal th and substance abuse hospit als	2520	2464	203	2261	56	0	0	0	56	0
HP 1.3	Specialityhospitals	553	388	31	357	165	59	61	10	35	1
HP.1	Hospitals	13913	10297	927	9370	3593	1277	1304	218	793	23
HP 2	Nursing and residential care facilities										
HP 21	Nursing homes	3658	3563	0	3563	79	0	0	44	35	16
HP 22	Residential mental retardation, mental health and substance abuse facilities	3565	3335	3	3333	230	0	0	_4	226	0
HP 23	Community care facilities for the elderly	3094	2984	11	2972	1 10	0	0	54	56	0
HP 29	All other residential care facilities	101	98	2	96	3	0	0	0	3	0
HP.2	Nursing and residential care facilities	10419	9981	16	9964	423	0	0	102	321	16
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	3071	2079	0	2079	987	269	466	186	65	6
HP 3.2	Offices of dentists	1459	393	0	393	1066	74	658	306	29	Q
HP 3.3	Offices of other health practitioners	1756	628	0	628	1129	100	396	614	19	0
HP 3.4 HP 3.5	Out-patient care centres	686	528	1 19	408	157	24	42	85	6	2
HP 3.5 HP 3.6	Med cal and diagnostic laboratories Providers of home health care services	193 2791	130 2613	0 6	130 2607	63 178	27 3	36 58	0 46	0 71	C
HP 3.9	All other providers of ambulatory health care	384	128	0	127	256	19	15	11	211	d
	•	304	120		127	2.00	13	15		211	·
HP.3	Providers of ambulatory health care	10340	6497	125	6372	3835	516	1671	1248	400	8
HP 4	Retail sale and other providers of medical goods	6390	2898	0	2898	3473	574	610	2058	231	19
HP 5	Provision and administration of public health programmes	580	427	314	113	154	12	9	24	108	0
HP 6	Health administration and insurance	1644	839	172	667	805	2	3	0	800	0
HP 7 and	Other industries (rest of the economy)										
HP 9	and Rest of the world	1477	496	145	351	981	19	48	33	882	0
	Care expend ture of Health Care providers	44763	31434	1700	29734	13263	2400	3644	3683	3536	66
HP.0	Providers outside HP-dassification 2)	2160	571	560	11	1589	0	0	1001	588	0
	Care expenditure of Care providers	46923	32005	2260	29745	14852	2400	3644	4684	4124	66

 $^{^{9}\}text{ICHA-HF};$ International Classification of Health Accounts - Health care Sources of Funding $^{2}\text{)}$ Among others expenditure on day nursery, public social care and social relief

Table 11E Expenditure of Care providers by source of financing according to the OECD / Eurostat I CHA-HF $^{1)}$, 2002

		Total expenditure	HF.1		HF.	.2				H	HF.3
		ефеницие	н	F.1.1 H	F. 1.2	н	F.2.1 H	IF.2.2 H		F.2.4 + F.2.5	
		million euro									
HP 1	Ho spitals										
HP 1.1	General hospitals (induding university hospitals)	12302	8291	748	7544	3985	1446	1477	193	868	2
IP 1.2	Mental health and substance abuse hospitals	2827	2762	264	2499	64	0	0	0	64	
HP 1.3	Speciality hos pi tals	628	411	32	379	216	85	87	8	36	
HP. 1	Hospitals	15756	11465	1044	10421	4265	1532	1564	201	968	27
HP 2	Nu sing and residential care facilities										
HP 21	Nursing homes	4058	3953	0	3953	88	0	0	51	36	18
IP 22	Residential mental retardation, mental health and substance abuse facilities	4158	3976	-4	3980	182	0	0	4	179	
IP 23	Community care facilities for the elderly	3536	3442	12	3430	93	0	0	45	48	
IP 29	All other residential care facilities	119	115	0	115	4	0	0	0	4	
1P.2	Nursing and residential care facilities	1 1870	11486	8	11478	367	0	0	100	267	1
HP 3	Providers of ambulatory health care										
IP 3.1	Offices of physicians	3497	2367	0	2367	1123	325	562	166	69	
IP 3.2	Offices of dentists	1671	456	0	456	1215	74	773	335	33	
IP 3.3	Offices of other health practitioners	1888	677	0	677	1211	111	432	649	20	
IP 3.4	Out-patient care centres	745	582	139	443	161	27	53	81	0	
IP 3.5	Medical and diagnostic laboratories	204	137	0	137	67	28	38	0	0	
IP 3.6	Providers of home health care services	3202		2	3061	139	4	72	30	33	
IP 3.9	All other providers of ambulatory health care	451	150	0	149	301	26	21	6	248	
HP.3	Providers of ambulatoryhealth care	1 1657	7432	142	7290	4217	596	1950	1267	403	!
IP 4	Retails ale and other providers of medical goods	6861	3121	0	3121	3719	662	674	2131	251	2
IP 5	Provision and administration of public health programmes	690	476	358	118	213	18	13	29	154	
IP 6	Health administration and insurance	1719	836	181	655	883	2	2	0	878	
IP 7 and IP 9	Other industries (restof the economy) and Restof the world	1633	555	160	395	1078	25	49	30	975	
	Care expenditure of Health Care providers	50187	35372	1893	33478	14741	2835	4252	3758	3896	7-
IP.0	Providers outside HP-dassification 2)	2419	639	626	13	1780	0	0	1100	680	(
	Care expenditure of Care providers	52606	36010	2519	33492	16522	2835	4252	4858	4577	74

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expenditure on day nursery, public social care and social relief

 $Table \ 11FExpendture \ of \ Care \ providers \ by \ source \ of \ financing \ according \ to \ the \ OECD \ / Eurostat \ ICHA-HF^{1)}, \ 2003^*$

		Total I expenditure	IF.1		HF	.2				ı	HF.3
		experioritie	НЕ	:1.1 HI	F.1.2	н	F.2.1 HI	F.22 H		IF.24+ IF.25	
		mi llion euro									
HP 1	Hospitals										
HP 1.1	General hospitals (induding university hospitals)	12967	8650	837	7813	4292	1534	1567	205	985	2
IP 1.2	Ment all health and substance abuse hospitals	3121	3050	294	2756	71	0	0	0	71	
IP 1.3	Specialityhospitals	684	448	34	414	236	92	94	9	42	
HP. 1	Hospitals	16772	12148	1165	10982	4599	1626	1661	214	1098	2
HP 2	Nursing and residential care facilities										
IP 21	Nursing homes	4409	4295	0	4295	90	0	0	56	34	2
IP 22	Residential mental retardation, mental health and substance abuse facilities	4610	4461	2	4459	149	0	0	.4	145	
HP 23	Community care facilities for the elderly	3762	3664	13	3652	97	0	0	47	50	
IP 29	All other residential care facilities	136	132	0	132	4	0	0	0	4	
IP.2	Nursing and residential care facilities	12917	12552	15	12538	340	0	0	107	233	2
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	3818	2552	0	2552	1260	375	644	178	62	
IP 3.2	Offices of dentists	1826	477	0	477	1350	74	862	378	36	
IP 3.3	Offices of other health practitioners	2026	750	0	750	1276	126	472	656	21	
IP 3.4	Out-patient care centres	806	636	149	487	168	29	55	84	0	
1P 3.5 1P 3.6	Medical and diagnostic laboratories Providers of home health care services	227 3775	153 3656	0 172	153 3484	75 1 18	31 4	43 90	0 19	1 6	
1P 3.9	All other providers of ambulatory health care	496	166	1	166	329	29	23	7	271	
	,										
IP.3	Providers of ambulatory health care	12973	8389	322	8068	4575	668	2189	1322	396	
IP 4	Retail sale and other providers of medical goods	7379	3394	0	3394	3963	712	721	2254	277	2
HP 5	Provision and administration of public health programmes	788	546	412	134	242	19	14	33	175	
HP 6	Health administration and insurance	1741	837	187	650	904	3	3	0	898	
IP 7 and	Other industries (rest of the economy)										
IP 9	and Rest of the world	1861	667	174	493	1194	28	46	35	1086	
	Care expenditure of Health Care providers	54431	38533	2275	36259	15818	3056	4634	3964	4163	8
IP.0	Providers outside HP-dassification 2)	2529	676	667	9	1852	0	0	1137	715	
	Care expenditure of Care providers	56960	39210	2942	36268	17670	3056	4634	5101	4878	8

 $^{^{9}\}text{ICHA-HF};$ International Classification of Health Accounts - Health care Sources of Funding $^{2}\text{)}$ Among others expenditure on day nursery, public social care and social relief

Table 12A Health Care Expenditure of Health Care providers by source of financing according to the OECD / Eurostat ICHA-HF $^{1)}$, 1998

		Total Health care Hi expenditure —	1		HF.:	2					F .3
			HF	:.1.1 HF	1.2	HF	2.1 H	F.2.2 H		F.2.4 + F.2.5	
		million euro									
HP 1	Ho spitals										
HP 1.1	General hospitals (including university hospitals)	8167	5924	485	5440	2232	872	988	100	272	10
HP 1.2	Mental health and substance abuse hospitals	1700	1700	52	1648	0	0	0	0	0	0
HP 1.3	Speciality hos pi tals	412	301	16	285	111	44	50	5	12	0
HP. 1	Hospitals	10279	7925	553	7373	2343	916	1038	105	285	10
<i>HP 2</i> HP 2 1	Nu sing and residential care facilities Nursing homes	2866	2860	0	2860	6	0	0	0	6	0
пг 2 I НР 22	Residential mental retardation, mental health and substance abuse facilities	172	172	0	172	0	0	0	0	0	0
HP 23	Community care facilities for the elderly	11	8	0	8	2	0	0	2	0	0
HP 29	All other residential care facilities	49	48	2	47	1	0	0	0	1	Č
HP.2	Nursing and residential care facilities	3098	3089	2	3087	9	0	0	2	7	0
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	2635	1710	0	1710	918	244	458	163	52	6
HP 3.2	Offices of dentists	1167	331	0	331	836	55	528	253	0	0
HP 3.3	Offices of other health practitioners	1346	475	0	475	871	73	326	469	3	C
HP 3.4 HP 3.5	Out-patient care centres	517 138	428 93	67 0	361 93	87 44	17 16	28 28	41 0	0	3
HP 3.5 HP 3.6	Medical and diagnostic laboratories Providers of home health care services	138 886	770	3	93 767	116	2	28 46	47	22	(
HP 3.9	All other providers of ambulatory health care	296	91	1	91	204	12	12	8	172	0
	•	290	31	•	91	204	12	12	0	112	
HP.3	Providers of ambulatory health care	6984	3898	71	3828	3077	420	1427	981	249	9
HP 4	Retails ale and other providers of medical goods	4717	2293	0	2293	2413	403	511	1333	166	11
HP 5	Provision and administration of public health programmes	436	339	237	102	98	9	8	27	54	0
HP 6	Health administration and insurance	1459	826	166	661	633	1	2	0	630	0
HP 7 and	Other industries (restof the economy)										_
HP 9	and Restof the world	967	374	112	261	593	16	28	21	529	0
	Health Care expenditure of Health Care providers	27942	18744	1140	17604	9167	1765	3013	2469	1920	31
HP.0	Providers outside HP-dassification 2)	0	0	0	0	0	0	0	0	0	0
	Health Care expenditure of Care providers	27942	18744	1140	17604	9167	1765	3013	2469	1920	31

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expenditure on day nursery, public social care and social relief

 $Table \ 12B \ Health \ Care \ Expenditure \ of \ Health \ Care \ providers \ by source of \ financing \ according to the OECD / Eurostat \ ICHA-HF^{-1}, \ 1999$

		Total Health care H expenditure	F.1		HF	2				н	F.3
		ospona dio	HF	.1.1 HI	F.1.2	Н	F.2.1 H	F.22 H		F.24+ F.25	
		million euro									
HP 1	Hospitals										
HP 1.1	General hospitals (including university hospitals)	8666	6082	538	5544	2565	977	1041	248	299	19
HP 1.2	Mental health and substance abuse hospitals	1867	1867	57	1810	0	0	0	0	0	
HP 1.3	Speciality hospitals	434	311	16	295	123	49	52	11	12	
HP.1	Hospitals	10967	8260	611	7649	2688	1025	1093	258	312	19
HP 2	Nursing and residential care facilities										
IP 21	Nursing homes	2972	2970	0	2970	3	0	0	0	3	
HP 2.2	Residential mental retardation, mental health and substance abuse facilities	244	177	0	177	66	0	0	0	66	
HP 23	Community care facilities for the elderly	12	8	0	8	3	0	0	3	0	
HP 29	All other residential care facilities	52	51	2	49	1	0	0	0	1	
HP.2	Nursing and residential care facilities	3280	3206	2	3205	73	0	0	3	70	
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	2775	1796	0	1796	974	273	478	169	54	
HP 3.2	Offices of dentists	1210	341	0	341	869	61	556	252	0	
HP 3.3 HP 3.4	Offices of other health practitioners	1463	519	0	519	944	82	338	521	3	
	Out-patient care centres	494	395 114	66 0	329 114	97 55	19	31 32	47 0	0	
1P 3.5 1P 3.6	Med cal and diagnostic laboratories Providers of home health care services	169 949	846	4	842	103	23 3	32 45	28	28	
HP 3.9	All other providers of ambulatory health care	318	94	0	93	224	16	14	9	185	
	·			_					-		
HP.3	Providers of ambulatory health care	7379	4103	70	4033	3267	476	1495	1027	269	
IP 4	Retail sale and other providers of medical goods	5110	2438	0	2438	2661	461	560	1465	175	1
1P 5	Provision and administration of public health programmes	466	354	252	102	111	11	10	31	60	
HP 6	Health administration and insurance	1519	836	170	666	683	2	2	0	680	
HP 7 and	Other industries (rest of the economy)										
IP 9	and Rest of the world	1058	392	119	273	666	16	35	24	591	
	Health Care expenditure of Health Care providers	29778	19589	1223	18367	10150	1991	3195	2807	2157	3
HP. 0	Providers outside HP-classification 2)	0	0	0	0	0	0	0	0	0	(
	Health Care expenditure of Care providers	29778	19589	1223	18367	10150	1991	3195	2807	2157	3

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expenditure on daynursery, public social care and social relief

 $Table 12C \ Health \ Care \ Expenditure \ of \ Health \ Care \ providers \ by source \ of \ financing \ according to the OECD / Eurostatl CHA-HF \ ^{1)}, \ 2000$

		Total Health care H expenditure	F.1		HF.	2				H	-IF.3
		ехрепасие	HF	.1.1 HF	1.2	н	=.2.1 H	F.2.2 H		F.2.4 + F.2.5	
		million euro									
4P 1	Ho spitals										
HP 1.1	General hospitals (including university hospitals)	9219	6631	589	6042	2577	1032	1054	176	315	1
IP 1.2	Mental health and substance abuse hospitals	2032	2032	53 18	1979 321	0	0 54	0 55	0	0 16	
IP 1.3	Speciality hospitals	472	338	18	321	134	54	55	9	16	
IP. 1	Hospitals	11723	9002	659	8342	2711	1086	1109	185	331	1
IP 2	Nursing and residential care facilities										
P 2 1	Nursing homes	3157	3150	0	3150	7	0	0	0	7	
IP 22	Residential mental retardation, mental health and substance abuse facilities	257	186	0	186	71	0	0	0	71	
IP 23	Community care facilities for the elderly	3	0	0	0	3	0	0	3	0	
IP 29	All other residential care facilities	57	55	2	54	2	0	0	0	2	
P. 2	Nursing and residential care facilities	3474	3392	2	3390	83	0	0	3	79	
IP 3	Providers of ambulatory health care										
IP 3.1	Offices of physicians	2855	1929	0	1929	919	240	416	174	89	
IP 3.2	Offices of dentists	1297	367	0	367	930	63	600	267	0	
IP 3.3	Offices of other health practitioners	1538	557	0	557	981	83	338	556	3	
IP 3.4	Out-patient care centres	462	344	61	283	117	22	35	60	0	
IP 3.5 IP 3.6	Medical and diagnostic laboratories Providers of home health care services	176 1060	118 952	0	118 949	57 107	24 3	33 44	0 32	0 28	
1P 3.9	All other providers of am bulatory health care	317	100	0	99	217	18	14	10	174	
	All other povicers oranimatably realth care	317	100	Ü	33	217	10		10	17-4	
IP.3	Providers of ambulatoryhealth care	7703	4367	65	4302	3328	453	1481	1100	294	
IP 4	Retailsale and other providers of medical goods	5501	2593	0	2593	2893	518	553	1637	185	1
IP 5	Provision and administration of public health programmes	501	374	269	105	127	12	9	35	71	
IP 6	Health administration and insurance	1525	819	170	650	706	2	2	0	701	
IP 7 and	Other industries (restof the economy)						_				
P 9	and Restof the world	1189	435	120	315	754	17	37	26	673	
	Health Care expenditure of Health Care providers	31617	20981	1285	19696	10601	2089	3191	2987	2334	3
P.0	Providers cutside HP-dassification 2)	0	0	0	0	0	0	0	0	0	
	Health Care expenditure of Care providers	31617	20981	1285	19696	10601	2089	3191	2987	2334	3

 $^{^{1)}}$ ICHA-HF: International Gassification of Health Accounts - Health care Sources of Funding $^2)$ Among others expendture on day nursery, public social care and social relief

Table 12D Health Care Expenditure of Health Care providers by source of financing according to the OECD /Eurostat ICHA-HF 1), 2001

		Total Health care H expenditure	F.1		HF	2				н	F.3
			НЕ	F.1.1 HI	F.1.2	н	F.2.1 HI	F.22 H		F.24+ F.25	
		mi llion euro									
HP 1	Hospitals										
HP 1.1	General hospitals (including university hospitals)	10607	7446	694	6752	3150	1218	1244	208	481	11
HP 1.2	Ment al heal th and substance abuse hospit als	2246	2246	81	2164	. 0	_0	0	.0	_0	(
HP 1.3	Specialityhospitals	526	376	19	357	150	59	61	10	20	(
HP. 1	Hospitals	13379	10067	793	9274	3300	1277	1304	218	501	11
HP 2	Nursi ng and residential care facilities										
IP 21	Nursing homes	3571	3563	0	3563	7	0	0	0	7	(
HP 22	Residential mental retardation, mental health and substance abuse facilities	379	198	0	198	181	0	0	0	181	
HP 23	Community care facilities for the elderly	3	0	0	0	3	0	0	3	0	
IP 29	All other residential care facilities	71	69	2	67	2	0	0	0	2	
1P.2	Nursing and residential care facilities	4024	3830	2	3828	194	0	0	3	191	(
HP 3	Providers of ambulatory health care										
HP 3.1	Offices of physicians	3050	2079	0	2079	965	269	466	186	44	
1P 3.2	Offices of dentists	1430	393	0	393	1037	74	658	306	0	
1P 3.3	Offices of other health practitioners	1675	626	0	626	1049	98	385	563	3	
IP 3.4	Out-patient care centres	476	340	37	303	134	24	42	63	5	
IP 3.5 IP 3.6	Medical and diagnostic laboratories Providers of home health care services	193 1218	130 1105	0	130 1 102	63 1 13	27 3	36 58	0 30	0 23	
1P 3.9	All other providers of ambulatory health care	384	128	0	127	256	19	15	11	211	
11 29	All diffe providers d'ambulatoryfreatitricale	304	120	U	127	230	19	15	11	211	,
HP.3	Providers of ambulatory health care	8426	4801	41	4760	3617	515	1660	1158	285	8
IP 4	Retail sale and other providers of medical goods	6104	2898	0	2898	3187	574	610	1798	206	19
1P 5	Provision and administration of public health programmes	580	427	314	113	154	12	9	24	108	
HP 6	Health administration and insurance	1644	839	172	667	805	2	3	0	800	
IP 7 and	Other industries (rest of the economy)										
IP 9	and Rest of the world	1315	472	130	341	843	17	47	31	748	(
	Health Care expenditure of Health Care providers	35472	23333	1452	21881	12101	2397	3632	3232	2839	38
HP. 0	Providers outside HP-dassification 2)	0	0	0	0	0	0	0	0	0	(
	Health Care expenditure of Care providers	35472	23333	1452	21881	12101	2397	3632	3232	2839	38

 $^{^{9}\}text{ICHA-HF};$ International Classification of Health Accounts - Health care Sources of Funding $^{2}\text{)}$ Among others expenditure on day nursery, public social care and social relief

Table 12E Health Care Expenditure of Health Care providers by source of financing according to the OECD / Eurostat ICHA-HF 1), 2002

		Total Health care H expenditure	F.1		HF.	2				Н.	F.3
		одолика	НЕ	:.1.1 HI	F.1.2	Н	F.21 H	F.22 H		IF.2.4 + IF.2.5	
		million euro									
IP1	Hospitals										
IP1.1	General hospitals (including university hospitals)	12030	8291	748	7544	3725	1446	1477	193	608	
IP1.2	Mental health and substance abuse hospitals	2495	2495	105	2390	0	0	0	0	0	
IP1.3	Speciality hospitals	599	398	19	379	201	85	87	8	20	
IP.1	Hospitals	15124	11185	873	10312	3926	1532	1564	201	629	
IP2	Nursing and residential care facilities										
P2.1	Nursing homes	3955	3953	0	3953	2	0	0	0	2	
P2.2	Residential mental retardation, mental health and substance abuse facilities	335	216	0	216	119	0	0	0	119	
P2.3	Community care facilities for the elderly	4	0	0	0	4	0	0	4	0	
P2.9	All other residential care facilities	83	80	0	80	3	0	0	0	3	
P2	Nursing and residential care facilities	4377	4249	0	4249	127	0	0	4	124	
IP3	Providers of ambulatory health care										
IP3.1	Offices of physicians	3473	2367	0	2367	1099	325	562	166	45	
IP3.2	Offices of dentists	1638	456	0	456	1182	74	773	335	0	
IP3.3	Offices of other health practitioners	1800	676	0	676	1125	110	420	592	3	
IP3.4 IP3.5	Out-patient care centres Medical and diagnostic laboratories	512 204	367 137	50 0	31 7 13 7	143 67	27 28	53 38	ස 0	0	
1P3.5	Providers of home health care services	1335	1225	1	1223	111	4	72	26	9	
IP3.9	All other providers of ambulatory health care	451	150	0	149	301	26	21	6	248	
	·										
P.3	Providers of ambulatory health care	9413	5377	52	5325	4027	595	1938	1189	306	
P4	Retail sale and other providers of medical goods	6562	3121	0	3121	3420	662	674	1861	223	
P5	Provision and administration of public health programmes	690	476	358	118	213	18	13	29	154	
P6	Health administration and insurance	1719	836	181	655	883	2	2	0	878	
IP7 and	Other industries (rest of the economy)										
P9	and Rest of the world	1450	527	144	383	922	23	47	28	824	
	Health Care expenditure of Health Care providers	39334	25773	1608	24165	13518	2831	4239	3310	3138	
P.0	Providers outside HP-dassification 2)	0	0	0	0	0	0	0	0	0	
	Health Care expenditure of Care providers	39334	25773	1608	24165	13518	2831	4239	3310	3138	

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expenditure on day rursery, public social care and social relief

 $Table 12F Health. Care Expenditure of. Health Care providers by source of financing according to the OECD / Eurostat I CHA-HF \ ^{1}), 2003* \ ^{1}$

		Total Health care HF expenditure	1		HF.	2				HF	=.3
			HF	.1.1 HF	1.2	Н	F.2.1 H	F.2.2 H		IF.2.4 + IF.2.5	
		m illion euro									
HP1	Hospitals										
IP1.1	General hospitals (including university hospitals)	12663	8650	837	7813	4001	1534	1567	205	693	13
HP1.2 HP1.3	Mental health and substance abuse hospitals Speciality hospitals	2754 653	2754 434	118 20	2637 414	0 219	0 92	0 94	0 9	0 25	(
IF 1.3	Specially rospitals	w3	434	20	414	2 15	52	34	9	25	
IP.1	Hospitals	16071	1 1838	975	10863	4219	1626	1661	214	718	13
IP2	Nursing and residential care facilities										
IP2.1	Nursing homes	4297	4295	0	4295	3 77	0	0	0	3 77	
IP2.2 IP2.3	Residential mental retardation, mental health and substance abuse facilities Community care facilities for the elderly	307 4	230	0	230 0	4	0	0	4	0	
IP2.3	All other residential care facilities	96	92	0	92	3	0	0	0	3	(
IP.2	Nursing and residential care facilities	4704	4618	0	4618	86	0	0	4	83	
IP3	Providers of ambulatory health care										
IP3.1	Offices of physicians	3791	2552	0	2552	1233	375	644	178	35	7
IP3.2	Offices of dentists	1790	477	0	477	1314	74	862	378	0	
IP3.3	Offices of other health practitioners	1929	748	0 55	748	1181	124	460	594	4	
IP3.4 IP3.5	Out-patient care centres Medical and diagnostic laboratories	549 227	397 153	55 0	343 153	149 75	29 31	55 43	65 0	0	
IP3.6	Providers of home health care services	1559	1451	173	1278	108	4	90	22	-8	·
IP3.9	All other providers of ambulatory health care	496	166	1	166	329	29	23	7	271	Ċ
IP.3	Providers of ambulatory health care	10342	5944	229	5715	4389	667	2176	1244	302	9
IP4	Retail sale and other providers of medical goods	7062	3394	0	3394	3647	712	721	1969	245	22
P5 P6	Provision and administration of public health programmes Health administration and insurance	788 1741	546 837	412 187	134 650	242 904	19 3	14 3	33 0	175 898	
P7 and	Other industries (rest of the economy)										
P9	and Rest of the world	1661	638	156	482	1024	26	45	33	921	
	Health Care expenditure of Health Care providers	42369	27815	1959	25856	14511	3053	4620	3496	3342	43
P.0	Providers outside HP-classification 2)	0	0	0	0	0	0	0	0	0	(
	Health Care expenditure of Care providers	42369	27815	1959	25856	14511	3053	4620	3496	3342	43

 $^{^{1)}}$ ICHA-HF: International Classification of Health Accounts - Health care Sources of Funding $^2)$ Among others expend ture on daynursery, public social care and social relief

Table 13A Expenditure of Care providers by function according to the OECD/ Eurostat ICHA-HC $^{1)}$, 1998

		Total expenditure	HC.1 HC.	2 HC	.3 H C.4	HC. 5	5 HC	.6 H C.7	н	IC.R	Healthcare functions		Other activities
		million euro											
HP 1	Hospi ta Is												
IP 1.1	General hospitals (including university hospitals)	83 41	7676	0	18	6	0	0	5	462		17.5	
IP 1.2	Mental health and substance abuse hospitals	18 46	1691	0	9	0	0	0	0	0		61	
IP 1.3	Spe cia lity hos pita Is	432	21 1	200	0	0	0	0	0	0	412	20	,
P.1	Ho spit als	1 06 20	9578	200	28	6	0	0	5	462	10279	256	3
P 2	Nursing and residential care facilities												
21	Nursing homes	29 28	349	236	22 81	0	0	0	0	0		41	
22	Residentialmental retardation, mental heath and substance abuse facilities	24 40	86	4	81	0	0	0	0	0		2253	
P 23	Community care facilities for the elderly	26 92	0	0	11	0	0	0	0	0 35		2645	
P 29	All other residential carefacilities	70	0	14	0	0	0	U	0	35	49	21	
P. 2	Nursing and residential care facilities	81 30	435	254	23 73	0	0	0	0	35	3097	4960)
P 3	Providers of ambulatory health care												
P 3.1	Offices of physicians	26 54	2500	0	0	0	0	104	31	0		0	
3.2	Office s of dentists	11 91	732	0	0	0	0	4 35	0	0		0	
P 3.3	Offices of other health practitioners	14 15	664	675	3	0	0	5	0	0		57	
P 3.4	Out-patient care centres	10 40	33.4	17	0	0	1 38	8	20	0		51 5	
P 3.5	Medical and diagnostic laboratories	138	42	0	0	95	0	0	0	0		0	
P 3.6	Providers of home health care services	20 15	0	4	662	_0	54	166	0	0		1115	
P 3.9	All other providers of a mbulatory health care	296	9	0	0	275	0	4	0	8	296	0	,
P. 3	Providers of a mbulatory he aith care	87 48	4 28 1	695	665	370	192	722	51	8	6984	1687	7
P 4	Retail sale and other providers of medical goods	4943	0	0	0	0	47 17	0	0	0		0	
P 5	Provision and administration of public health programmes	436	3	0	0	106	0	327	0	0		0	
P 6	Health administration and insurance	14 59	0	0	0	0	0	0	1459	0	1459	0	1
P 7and	Other industries (restof the economy)												
P 9	and Restofthe world	10 90	163	103	57	160	43	441	0	0	967	90)
	Care expenditure of Health Care providers	3 54 27	14 46 0	12 52	31 22	642	49 53	14 90	1516	505	27940	6993	3 4
P. 0	Providers outside HP-classification 2)	14 29	0	0	0	0	0	0	0	0	0	1429)
	Care expenditure of Care providers	36855	14 46 0	12.52	31 22	642	49 53	14 90	1516	50.5	27 94 0	8421	1 4

 $^{^{1)}}$ ICH A-HC: International Classification of Health Accounts - Health care functions 2) Among others expenditure on day nursery, publics ocial care and social relief

Table 13B Expenditure of Care providers by function according to the OECD / Eurostat IC HA-H C $^{1)}$, 1999

		Total expenditure	HC.1	HC. 2	H C.3	HC .4	HC.	5 HC	.6 HC	.7	HC.R	Healthcare S functions C		Other activities
		millioneuro												
P 1	Hospitals													
2 1.1	Ge ne rall hosp itals (in cluding univer sity hospitals)			8 15 7	0	27	6	0	0	5	471		179	
1.2	Men tal health and substance abuse hospitals		061	1856	0	10	0	0	0	0	(91	
1.3	Spe cialty hospitals	4	155	223	2 12	0	0	0	0	0	(0 434	21	
P. 1	Ho spit als	1 13	361	10 23 6	2 12	37	6	0	0	5	471	1 10967	29 1	
2	Nursing and residential carefacilities													
21	Nursing homes		143	359	245	2368	0	0	0	0	(47	
2.2	Resident all mental retardation, mental health and substance abuse facilities		34	87	4	152	0	0	0	0	(2372	
2.3	Community care facilities for the elderly	28	342	0	0	12	0	0	0	0	(2791	
29	All ot herres idential care facilities		74	0	15	0	0	0	0	0	37	7 52	22	
2	Nursing and residential care facilities	85	593	446	264	2532	0	0	0	0	37	7 3280	5233	
3	Providers of ambulatory health care													
3.1	Offices of physicians		796	2634	0	0	0	0	110	31	(0	
3.2	Of fice s of dentists		235	776	0	0	0	0	434	0	(0	
3.3	Offices of other health practitioners	15	535	694	761	3	0	0	5	0	(0 1463	59	
3.4	Out-patient care centres	10	67	295	17	0	0	152	10	19	1	1 494	564	
3.5	Medical and diagnostic laboratories		169	44	0	0	1 24	0	0	0	(0	
3.6	Providers of home health care services		1 44	0	5	709	0	53	182	0	(1 18 0	
3.9	All of her providers of ambulatory health care	3	3 18	11	0	0	296	0	4	0	8	8 318	0	
. 3	Providers of ambulatory health care	92	263	4454	783	713	420	206	744	51	8	8 7379	1803	
4	Retails ale and other providers of medical goods	53	3 53	0	0	0	0	5110	0	0	(5110	0	
5	Provision and administration of public health programmes	4	166	2	0	0	1 14	0	350	0	(0 466	0	
6	He alth administration and insurance	15	5 19	0	0	0	0	0	0	15 19	(0 1519	0	
7 and	Other in dustries (rest of the economy)													
9	and Restofthe world	12	201	165	1 15	60	170	46	499	0	(0 1056	11 1	
	Care expendture of Health Care providers	377	756	15 30 4	13 74	3342	7 11	5361	1593	1575	5 16	6 29776	7438	
0	Providers outside HP-classification 2)	16	629	0	0	0	0	0	0	0	(0 0	1629	
	Care expendture of Care providers	393		15304	13.74	3342	7 11	5361	1593	1575	5 16	6 29776	9067	

¹⁾ ICH AHC: International Classification of Health Accounts - Health care functions 2) Amono others excenditure on day nursery, public social care and social relief

Table 13 C Expenditure of C are providers by function according to the OECD / Euros tat ICHAHC $^{1)}$, 2000

		Total expenditure	HC.1	HC .2	HC. 3	HC.4	HC .	5 HC	C.6 H	0.7	H C.R	Health care functions		Other activities
		million euro												
HP 1	Ho spit al s													
HP 1.1	Ge ne rall hospitals (including university hospitals)	941			0	26	6	0	0	6	49			
HP 1.2	Men tal he alth and substance abuse hospitals	2.25			0	12	0	0	0	0		0 2032		
HP 1.3	Spe ciality hosp itals	49	96 2	51	221	0	0	0	0	0		0 472	24	1
HP. 1	Ho spit als	12 15	8 109	62	221	38	6	0	0	6	49	0 11724	33 0) 10
HP 2	Nursing and residential care facilities													
HP 21	Nursing homes	324	12 3	79	260	25 18	0	0	0	0		0 3157		
HP 2.2	Residential mental retard at ion, mental health and substance abusefacilities	287		90	5	162	0	0	0	0		0 257		
HP 23	Community care facilities for the elderly	299		0	0	3	0	0	0	0		0 3		
HP 29	All other residential carefacilities	8	31	0	16	0	0	0	0	0	4	1 57	24	1
HP.2	Nursing and residential care facilities	9 19	91 4	69	281	26 84	0	0	0	0	4	1 3474	5633	3 8
HP 3	Providers of ambulatory health care													
HP 3.1	Offices of physicians	287	5 26	74	0	0	0	0	1 15	66		0 2855	0	
HP 3.2	Office s of dentists	132		68	0	0	0	0	429	0		0 1297		
HP 3.3	Of fices of other health practitioners	1 61	5 7	45	785	3	0	0	5	0		0 1537	64	1 '
HP 3.4	Out-patient care centres	104	8 2	49	17	0	0	165	6	25		2 462	577	7
IP 3.5	Medical and diagnostic laboratories	17		45	0	0	13 1	0	0	0		0 176		
HP 3.6	Providers of home health care services	242		0	-2	8 09	0	64	189	0		0 1060		
HP 3.9	All other providers of ambulatory health care	31	7	13	0	0	292	0	4	0		7 317	0)
HP.3	Providers of ambulatory health care	977	8 45	93	799	8 12	423	2 28	748	91		9 7703	1985	5 9
HP 4	Retail sale and other providers of medical goods	576	0	0	0	0	0	5501	0	0		0 5501		
HP 5	Provision and administration of public health programmes	50		2	0	0	120	0	379	0		0 501		
HP 6	He alth a dminis tration and in sur ance	1 52	25	0	0	0	0	0	0	15 25		0 1525	0)
HP 7 and	Other in dustries (rest of the economy)													
HP 9	and Restofthe world	133	38 1	85	129	69	179	57	570	0		0 1189	11 1	1 3
	Care expenditure of Health Care providers	40 25	0 162	11 1	430	36 03	728	5786	16 97	16 22	54	0 31617	8058	57
IP. 0	Providers outside HP-classification 2)	192	22	0	0	0	0	0	0	0		0 0	1922	2
	Care expenditure of Care providers	42 17	3 162	11 1	430	36 03	728	5786	16.97	16 22	54	0 31617	9980) 57

¹⁾ ICH A-HC: International Classification of Health Accounts - Health care functions 2) Amono others excenditure on day nursery, public social care and social relef

Table 13D Expenditure of C are providers by function according to the OECD/ Eurostat ICHA-HC † , 2001

		Total expendture	HC.1	HC.2	HC.3	HC.4	H C.5	HC.	6 H	C.7 F	H C.R	Healthcare S functions (Other activities
		mllion euro												
P 1	Ho spit al s													
P 1.1	Ge ne rall hospitals (includin quiniversity hospitals)	108	40 99 65	0	2	9	5	0	0	9	599	10607	233	
P 1.2	Mental health and substance abuse hospitals	25				9	0	0	0	0	(124	1
P 1.3	Spe cia lity h osp ita ls	5	53 266	260		0	0	0	0	0	(526	27	
P. 1	Ho spit als	139	13 1 24 57	260	4	9	5	0	0	10	599	13 37 9	385	15
IP 2	Nursing and residential care facilities													
P 21	Nursin a homes	36	58 409	292	286	9	0	0	0	0	(3571	58	
P 22	Residential mental retardation, mental health and substance abuse facilities	35	65 94	. 5	28	0	Ó	Ó	Ó	Ó	Ċ	379	3167	
P 23	Community care facilities for the elderly	30	94 0	0		3	O	Ó	Ó	Ó	Ċ) 3	3046	
P 29	All other resident at care facilities	1	01 0	20		0	0	0	0	0	51	71	30	
P. 2	Nursing and residential care facilities	104	19 503	317	3 15	3	0	0	0	0	51	4024	6302	
P 3	Providers of ambulatory health care													
P 3.1	Office s of physician s	30	71 29 10	0		0	0	0	1 22	18	(3050	0	
P 3.2	Office s of dentists	14				0	0	0	461	0	(0	
P 3.3	Offices of other health practitioners	17	56 804	862		4	0	0	6	0	(1675	66	
P 3.4	Out-patient care centres	6	86 249	17		0	0	182	4	24	(476	200	
3.5	Medical and diagnostic laboratories	1	93 50	0		0	143	0	0	0	(193	0	
P 3.6	Providers of home health care services	27	91 0	0	93	4	0	72	2 12	0	(1218	1534	
P 3.9	All other providers of a mbulatory health care	3	84 12	0		0	3 58	0	4	0	9	384	0	
P. 3	Providers of ambulatory health care	103	40 49 95	879	93	8	501	253	8 09	42	9	8426	1800	1
P 4	Retail sale and other providers of medical goods	63				0	0	6104	0	0	(6 10 4	0	2
P 5	Provision and administration of public health programmes	5	80 2	. 0		0	125	0	4 53	0	(580	0	
P 6	He alth a dminis tration and in sur ance	16	44 C	0		0	0	0	0	16 44	(1644	0	
7and	Other industries (rest of the economy)													
9	and Restofthe world	14	77 211	14 0	7	1	211	64	6 19	0	(1315	120	
	Care expenditure of Health Care providers	4 47	63 18168	1596	421	0	841	6421	18 80	1695	65 9	35472	8607	6
P. 0	Providers outside HP-classification 2)	21	60 C	0		0	0	0	0	0	(0	2160	
	Care expenditure of Care providers	469	23 18168	1596	421	0	841	6421	18 80	1695	659	35472	10767	6

¹⁾ ICH A HC: International Classification of Health Accounts - Health care functions 2) Amono others excenditure on day nursery, public social care and social relief

Table 13 Expenditure of Care providers by function according to the OECD/ Euros tat ICHAHC $^{1)}$, 2002

		Total expenditure	HC.1 HC.	2 HC	.3 H C.4	HC. 5	5 HC	.6 HC.	7 Н	C.R	Health care functions		Other activities
		million euro											
IP 1	Hospi tals												
IP 1.1	General hospitals (including university hospitals)	12302	11409	0	21	4	0	0	9	588			
IP 1.2	Mental health and substance abuse hospitals	28 27	2469	0	27	0	0	0	0	0			
IP 1.3	Spe ciality hos pitals	628	299	299	0	0	0	0	1	0	599	29	9
IP. 1	Ho spit als	1 57 56	14 17 6	299	48	4	0	0	10	588	15 12 4	44 2	2 1
IP 2	Nursing and residential care facilities												
IP 21	Nursing homes	40 58	440	3 20	31 96	0	0	0	0	0			
P 22	Residential mental retard at ion, mental heath and substance abuse facilities	41 58	104	5	226	0	0	0	0	0			
P 23	Community care facilities for the elderly	35 36	0	0	4	0	0	0	0	0			
P 29	All other residential carefacilities	1 19	0	24	0	0	0	0	0	59	83	36	3
P. 2	Nursing and residential care facilities	1 18 70	544	348	34 25	0	0	0	0	59	4377	7394	4 1
IP 3	Providers of ambulatory health care												
P 3.1	Offices of phy sicians	34 97	3323	0	Ö	0	0	133	17	0	3473	(0
P 3.2	Office s of dentists	1671	1 16 5	0	Ö	0	0	474	0	0	1638	(3
P 3.3	Offices of other health practitioners	18 88	868	921	4	0	0	6	0	0			
3.4	Out-patient care centres	745	266	18	0	0	197	6	25	0			
3.5	Medical and diagnostic laboratories	204	46	0	0	158	0	0	0	0			
3.6	Providers of home health careservices	32 02	0	0	10 41	0	67	2 28	0	0			
3.9	All other providers of a mbu lat ory he alt h c are	451	15	0	0	422	0	5	0	10	451	()
P. 3	Providers of ambulatory health care	1 16 57	5683	939	10 45	580	264	8 51	42	10	9413	2 14 1	1 1
P 4	Retail sale and other providers of medical goods	68 61	0	0	0	0	6562	0	0	0			0 2
- 5	Provision and administration of public health programmes	690	3	0	0	142	0	545	0	0			
6	He alth a dmin is tration and in surance	17 19	0	0	0	0	0	0	1719	0	1719	(0
7and	Other industries (rest of the economy)												
9	and Restofthe world	16 33	22.2	156	84	22.8	64	695	0	0	1450	136	3
	Care expenditure of Health Care providers	5 01 87	20628	17 44	46 02	954	68 90	20 90	1770	657	39334	10 11 3	3 7
0.0	Providers outside HP-classification 2)	24 19	0	0	0	0	0	0	0	0	0	2419	9
	Care expenditure of Care providers	52606	20628	17 44	46 02	954	68 90	20 90	1770	657	39334	12 53 2	2

 $^{^{1)}}$ ICH A-HC: International Classification of Health Accounts - Health care functions 2) Among others expenditure on day nursery, publics ocial care and social relief

Table 13F Expenditure of Care providers by function according to the OECD / Eurostat IC HA-H C $^{1)}$, 2003*

		Total expendture	HC.1 H.C	2 HC	.3 HC.4	HC.	.5 HC	C. 6 HC	2.7 H	HC.R	Healthcare S functions (Other activities
		mllion euro											
HP 1	Ho spit al s												
HP 1.1	Ge ne rall hospitals (including university hospitals)	12967	1 19 69	0	17	4	0	0	10	664		304	
HP 1.2	Men tal he alth and substance a buse hospitals	31 21	26 98	0	56	0	0	0	0	(155	
HP 1.3	Spe ciality hosp itals	684	305	347	0	0	0	0	1	(653	31	
HP.1	Ho spit als	16772	14971	347	73	4	0	0	11	664	16 07 1	489	21
HP 2	Nursing and residential care facilities												
HP 21	Nursing homes	44 09	471	348	3478	0	0	0	0	(74	
HP 2.2	Residential mental retardation, mental health and substance abuse facilities	46 10	1 11	5	192	0	0	0	0	(4274	
HP 23	Community care facilities for the elderly	37 62	0	0	4	0	0	0	0	(3716	
HP 29	All other residential care facilities	136	0	27	0	0	0	0	0	68	3 96	41	
HP. 2	Nursing and residential care facilities	1 29 17	582	380	3674	0	0	0	0	68	3 4704	8 10 6	10
HP 3	Providers of ambulatory health care												
HP 3.1	Offices of physicians	38 18	36 45	0	0	0	0	142	4	(0	
HP 3.2	Office s of dentist s	18 26	12.85	0	0	0	0	505	0		1790	0	
HP 3.3	Offices of other health practitioners	20 25	921	996	4	0	0	7	0	(1929	79	
HP 3.4	Out-patient care centres	806	284	18	0	0	212	7	27	(549	246	
IP 3.5	Medical and diagnostic laboratories	2.27	50	0	0	177	0	0	0	(0	
HP 3.6	Providers of home health care services	37 75	0	0	1218	0	77	264	0	(2198	
HP 3.9	All other providers of a mbu latory he alth care	496	14	0	0	4 67	0	5	0	10	9 496	0	1
HP. 3	Providers of ambulatory health care	1 29 72	61 99	1014	1223	644	289	9 30	31	10	10 34 1	2522	10
HP 4	Retail sale and other providers of medical goods	73 79	0	0	0	0	7062	0	0	(7062	0	
HP 5	Provision and administration of public health programmes	7 88	3	0	0	163	0	622	0		788	0	
HP 6	He alth a dminis tration and in sur ance	17 41	0	0	0	0	0	0	17 41	(1741	0	ı
HP 7and	Otherindustries (rest of the economy)												
HP 9	and Restofthe world	1861	279	17 1	123	239	86	763	0	(1661	148	
	Care expenditure of Health Care providers	54431	2 20 34	1913	5092	10 51	7437	23 15	17 83	743	3 42369	11 26 6	79
IP. 0	Providers outside HP-classification 2)	25 29	0	0	0	0	0	0	0	(0	2529	
	Care expenditure of Care providers	5 69 59	2 20 34	1913	5092	10.51	7437	23 15	17 83	743	3 42369	13795	79

¹⁾ ICH A HC: International Classification of Health Accounts - Health care functions 2) Amono others excenditure on day nursery, public social care and social relief

 $Table 14A \, Expend \, itu \, re \, of \, Care \, providers \, by \, \, Mod \, e \, of \, production \, according \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, to \, \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, ICHA-HP \, ^{1)}, \, 1998 \, decording \, the \, \, OECD \, / \, Eurostat \, Eurostat \, Decording \, the \, \, OECD \, / \, Eurostat \, Eurostat \, Decording \,$

		Total expenditure	In-patient	Day cases	Out patient	Care at home	NA ²⁾
		mill ion euro					
HP1	Hospi ta Is						
HP 1.1	Gene ral hospitals (including university hospitals)	8342	6109	186	2046	0	0
HP 1.2	Men tal he alth and substance a buse hospitals	1846	1162	130	554	0	0
HP 1.3	Speciality hospitals	432	367	13	53	0	0
HP.1	Hospitals	10620	7638	329	2653	0	0
HP2	Nurs ing and residential carefacilities						
HP2.1	Nursing homes	2928	2784	145	0		0
HP2.2	Residential mental retardation, mental health and substance abuse facilities	244 0	2412	27	0	0	0
HP2.3	Community care facilities for the elderly	269 2	2692		0	0	0
HP2.9	All other residential care facilities	70	70	0	0	0	0
HP.2	Nursing and residential care facilities	8130	7958	172	0	0	0
HP3	Providers of ambulatory health care						
HP3.1	Offices of physicians	2654	831	28	1557	238	0
HP3.2	Offices of dentists	1191	0	0	1191	0	0
HP3.3	Offices of other health practitioners	141 5	23	23	1343		0
HP3.4	Out-patient care centres	1040	0	523	517	0	0
HP3.5	Medical and diagnostic laboratories	138	0	42	88	8	0
HP 3.6	Providers of home health care services	2015	0	0	187	1827	0
HP3.9	All other providers of ambula tory health care	296	102	0	188	0	6
HP.3	Providers of ambula tory health care	8748	955	616	5071	2099	6
HP4	Retail sale and other providers of medical goods	4943	0	0	4796	147	0
HP5	Provision and administration of public health programmes	436	85	0	330	0	21
HP6	Health administration and insurance	1459	0	0	0	0	1459
HP7 and	Other industries (rest of the economy)						
HP9	and Rest of the world	1090	81	0	780	57	172
	Care expenditure of Health Care providers	35427	16718	1117	13630	2304	1658
H P.0	Provi ders o utsid e H P-cla ssi fi cati on 3)	1429	147	1176	106	0	0
	Care expenditure of Care providers	3685 5	16865	2293	13736	2304	1658

¹⁾ ICHA-HP: Intern ational Classification of Health Accounts - Health care Providers ²⁾ NA: Mode of production is not applicable or not available ³) Among others expenditure on day nursery, public social care and social relief

Table 14 B Expenditure of C are providers by Mode of production a \cos rd ing to the OECD / Eurosta t ICH A·HP $^{1)}$, 1999

		Total expenditure	In -p ati ent	Day cases	Out patient	Care at home N	A2)
		milli on euro					
HP1	Hospitals						
HP 1.1	General ho spitals (including university hospitals)	8845	6465	197	2183	0	0
HP 1.2	Mental health and substance abuse hospitals	2061	1245	1 97	618	0	0
HP 1.3	Spe d ality hosp ita Is	455	373	13	69	0	0
HP.1	Hospitals	11361	8084	4 07	2870	0	0
HP2	Nursing and residential care facilities						
HP 2.1	Nursing homes	3043	2871	172			0
HP2.2	Residential mental retardation, mental health and substance abuse facilities	2634	2600	34			0
HP2.3	Community care facilities for the elderly	2842	2842				0
HP2.9	All other residential care facilities	74	74	0	0	0	0
HP.2	Nursing and residential care facilities	8593	8387	206	0	0	0
HP3	Providers of am bulatory health care						
HP3.1	Offices of p hysicians	2796	882	29	16 50	234	0
HP3.2	Offices of dentists	1235	0	0	1235	0	0
HP3.3	Offices of other health practitioners	1535	24	24			0
HP3.4	Out-patient care centres	1067	0	5 69			0
HP3.5	Medi cal and diagnostic laboratories	169	0	44			0
HP 3.6	Providers of home health care services	2144	0	0			0
HP 3.9	All other providers of ambulatory health care	318	110	0	202	0	6
HP.3	Providers of a mbulatory he alth care	9263	1016	6 66	53 65	2210	6
HP4	Retail sale and other providers of medical goods	5353	0	0	51 90	163	0
HP5	Provision and a dministration of public health programmes	466	91	0	3 52	0	23
HP6	Health a dministration and insurance	1519	0	0	0	0	1519
	Oth er industries (rest of the e conomy)						
HP9	and Rest of the world	1203	85	0	8 62	73	182
	C are expenditure of Health Care providers	37758	17662	1280	146 39	2447	1731
HP.0	Providers outside HP-classification 3)	1629	164	13 48	1 17	0	0
	C are expenditure of Care providers	39387	1 7826	26 28	147 56	2447	1731

ICHA-HP: In ternational Classification of He alth Accounts - Health care Providers
 NA: Mode of production is not applicable or not availble
 Among others expenditure on day nursery, public so dal care and so cial relief

 $Table 14C \, \text{Expe} \, \text{nditure of Care providers} \, \text{by Mo} \, \text{de of production according to the OECD} \, / \, \text{Eurostat IC HA-HP}^{\, 1)}, \, 2000$

		Total expenditure	I	n-patient	Day cases	Out patient	Care at home NA	.2)
		mi llio n e uro						
HP1	H osp ita Is							
HP 1.1	General hospitals (including university hospitals)	g	412	68 60	210	2341	0	
HP 1.2	Men tal he alth and su bstance ab use hospitals	2	250	13 56	219	675	0	
1P 1.3	Spe ciality ho spitals		496	4 09	14	73	0	
1P.1	Hospitals	12	2 158	86 26	443	3089	0	
1P2	Nursing and residential care facilities							
IP 2.1	Nursing homes	3	3242	3041	201	0	0	
1P 2.2	Residential mental retardation, mental health and substance abuse facilities		2876	28 30	46	0	-	
IP 2.3	Community care facilities for the elderly	2	992	29 92		0	-	
HP 2.9	All other residential care facilities		81	81	0	0	0	
1P.2	Nursing and residential carefacilities	g	9 191	89 44	247	0	0	
IP3	Providers of a mbu la tory health care							
1P3.1	Offices of physicians		2875	849	28	1731		
IP 3.2	Offices of dentists	1	323	0	0	1323		
1P3.3	Offices of other health practitioners	1	l 615	30	30	1526		
1P3.4	Out-patient care centres		1 048	0	582	466		
1P3.5	Med ical and diagnostic la boratories		176	0	45	122		
1P3.6	Providers of home health care services		2425	0	0	214		
IP 3.9	All other providers of ambulatory health care		3 17	1 15	0	194	0	
1P.3	Providers of ambulatory health care	9	778	994	685	5576	251 5	
P4	Retail sale and other providers of medical goods		760	0	0	5584		
IP5	Provision and administration of public health programmes		501	95	0	381		2
IP6	Health administration and insurance	1	l 525	0	0	0	0	152
IP7 and	Other industries (rest of the economy)							
IP9	and Rest of the world	1	338	1 04	0	976	65	19
	Care expenditure of Health Care providers	40	250	187 64	1375	15607	2756	174
IP.0	Providers outside HP-classification 3)	1	922	176	1621	126	0	
	Care expenditure of Care providers	43	2 173	189 40	2996	15733	2756	174

¹⁾ ICHA-HP: In terna ti onal Classification of Health Accounts - Health care Providers NA: Mode of production is not applicable or not availble on the sexpenditure on day nursery, public social care and social relief

Table 14D Expenditure of Care providers by Mode of production according to the OECD / Eurostat ICHA-HP $^{1)}$, 2001

		Total Ir e xp enditure	n-patien t	Da y cases	Out patient	Care at home NA	12)
		mil lion euro					
HP1	H osp ita Is						
HP 1.1	General hospitals (including university hospitals)	1 0840	7917	242	268 1	0	C
HP 1.2	Men tal he alth and sub stance abuse hospitals	2520	1 514	249	756	0	(
HP 1.3	Spe ciality ho spitals	553	462	15	77	0	C
HP.1	Hospitals	1 3913	9 893	507	3514	0	C
HP2	Nursing and residential care facilities						
HP 2.1	Nursing homes	3658	3 4 2 1	238	0	0	C
1P 2.2	Residential mental retardation, mentalhealth and substance abuse facilities	3565	3 060	50 5	0	0	(
1P 2.3	Community care facilities for the elderly	3094	3 094	0	0		(
HP 2.9	All other residential carefacilities	101	101	0	0	0	C
1P.2	Nursing and residential carefacilities	1 0419	9677	743	0	0	(
HP3	Providers of a mbu la tory he alth c are						
1P3.1	Offices of physicians	3071	896	30	1867	279	(
IP 3.2	Offices of dentists	1459	0	0	1459		(
1P3.3	Offices of other health practitioners	1756	35	35	1649		(
1P3.4	Out-patient care centres	686	0	198	488		(
1P 3.5	Med ical and diagnostic la boratories	193	0	50	134		(
1P3.6	Providers of home health care services	2791	0	0	240		(
1P3.9	All other providers of a mbulatory he alth care	384	149	0	224	0	10
1P.3	Providers of ambulatory health care	1 0340	1 080	313	606 1	2875	10
IP4	Retail sale and other providers of medical goods	6390	0	0	6196		(
IP5	Provision and administration of public health programmes	580	95	0	455	0	30
IP6 IP7 and	Health administration and insurance Other industries (rest of the economy)	1644	0	0	0	0	164
IP9	and Rest of the world	1477	120	0	1067	65	22
	C are expenditure of Health C are providers	4 4763	20 864	1562	17293	3134	1909
IP.0	Providers outside HP-classification 3)	2160	187	1840	133	0	(
	C are expenditure of Care providers	4 6923	21 051	3402	17426	3134	1909

¹⁾ ICHA-HP: In terna tio nal Classification of Health Accounts - He alth care Provide is 4) NA: Mode of production is not applicable or not availible 3) Among others expenditure on day nuisery, public social care and social relief

Table 14E Expenditure of Care providers by Mode of production according to the OECD / Eurostat I CHA-HP $^{1)}$, 2002

		Total expenditure	In-patient	Day cases	Out pa tien t	Care at home NA	(2)
		mil lion euro					
HP 1	Hos pitals						
HP 1.1	Gen eral hospitals (in duding university hospitals)	1 2302			3 042		0
HP 1.2	Mental he alth and substance ab use hospitals	2827		280	848		0
HP 1.3	Speciality hospitals	628	524	17	87	0	0
HP.1	Hospitals	1 5756	11207	573	3 9 7 6	0	0
HP 2	Nursing and residential care facilities						
HP 2.1	Nursing homes	4058		270	0		0
HP 2.2	Residential mental retardation, mental he alth and substance abuse facilities	4158			0		0
HP 2.3 HP 2.9	Community care facil ities for the elderly All other residential care facilities	3536 119			0		0
⊓P 2.9	All other residential care lacrities	119	119	U	U	U	U
HP.2	Nursing and residential care facilities	1 1870	11020	850	0	0	0
HP 3	Providers of ambulatory health c are						
HP 3.1	Offices of physicians	3497	1009	34	2 171	284	0
HP 3.2	Offices of denti sts	1671					0
HP 3.3 HP 3.4	Offices of other health practition ers	1888		38 211	1 774 301		0
HP 3.4 HP 3.5	Out-patient care centres	745	-				0
HP 3.5 HP 3.6	Medical and diagno stic laboratories Providers of home he alth care services	204 3202		46 0	149 275		0
HP 3.9	All other providers of ambulatory he alth care	451			261		10
HP.3	Providers of ambulatory health care	1 1657	1226	329	6 601	3259	10
111 .0	1 Towards of ambalatory floater care	1 1007	1220	020	0001	0200	
HP 4	Retail sale and other providers of medical goods	6861	0	0	6 651	210	0
HP 5	Provision and administration of public health programmes	690	107	0	547	0	36
HP 6	Health administration and in surance	1719	0	0	0	0	1719
HP 7and		4000	400	0	4.407	70	045
HP 9	and Rest of the world	1633	126	0	1 187	76	245
	Care expenditure of Health Care providers	5 0 1 8 7	23686	1751	18 963	3545	2009
HP.0	Providers outside HP-dassification 3)	2419	202	2075	142	0	0
	Care expenditure of Care providers	5 2606	23888	3826	19 105	3545	2009

¹⁾ ICHA-HP: International Classification of Health Accounts - Health care Providers ²⁾ NA: Mode of production is not applicable or not available ³) Among others expenditure on day nursery, public social care and social relief

Table 14F Expenditure of Care providers by Mode of p io duction according to the OECD / Eurostat IC HA-HP $^{1)}$, 2003*

		Total expenditure	In-pa tien t	Day cases	Out patient	Care at home	NA 2)
		million euro					
HP 1	Hospitals						
HP 1.1	Gene ra I ho sp ital s (including u niversity hospitals)	12967					0
HP 1.2	Mental health and substance abuse hospitals	3121	1 876				0
HP 1.3	Speciality hospi tals	684	578	18	88	0	0
HP.1	Hospitals	1677 2	11 924	6 17	4231	0	0
HP 2	Nur sin g and res idential care facilities						
HP 2.1	Nursing homes	4409	4 115	294	0	0	0
HP 2.2	Residential mental retardation, mental health and substance abuse facilities	4610	3 960	6 50	0	0	0
HP 2.3	Community care facilities for the el derly	3762	3 762				0
HP 2.9	All other residential care facilities	136	136	0	0	0	0
HP.2	Nursing and residential carefacilities	1291 7	11 973	944	0	0	0
HP 3	Providers of ambulatory he alth care						
HP 3.1	Offices of physicians	3818	1 098	36	2373	311	0
HP 3.2	Offices of de ntists	1826	0	0	1826	0	0
HP 3.3	Offices of other health practitioners	2026	41	41	1902	42	0
HP 3.4	Out-patient care œntres	806	0	2 17	338	0	0
HP 3.5	Medical and diagnostic laboratories	227					0
HP 3.6	Pro viders of home health care services	3775	0				0
HP 3.9	All other providers of ambulatory heal th care	496	205	0	279	0	11
HP.3	Providers of ambulatory health care	12973	1 343	344	7209	3814	11
HP 4	Retail sale and other providers of medical goods	7379	0	0	7153	226	0
HP 5	Pro vision and administration of public health programmes	788	122	0	625	0	41
HP 6	Health administration and insurance	1741	0	0	0	0	174 1
HP 7and	Other industries (rest of the e co nomy)						
HP 9	and Rest of the world	1861	166	0	1329	111	256
	Care expenditure of Health Care providers	5443 1	25 528	19 05	20546	4151	2050
HP.0	Providers outside HP-classification 3)	2529	218	21 59	152	0	0
	Care expenditure of Care p to viders	5696 0	25 746	40 65	20697	4151	2050

 $^{^{1)}}$ ICHA-HP: Internation al Classification of He alth Accounts - Health care Providers $^{2)}$ NA: Mode of production is not applicable or not availble 3) Among others expenditure on day nursery, public social care and social relief

Table 15A: Health Care Expenditure of Care providers by Mode of production according to the OECD / Eurostat ICHA-HP $^{1\lambda}$ 1998

		Tota Health care In expenditure	ı-pati ent	Day cases	Out patient	Care at home N	NA 2)
		mill ion euro					
HP 1	Hospitals						
HP 1.1	General hospitals (in du ding uni versity hospitals)	8167	5983	182	2002	0	0
HP 1.2	Mental health and substance abuse hospitals	1700	1070	120		0	0
HP 1.3	Speciality hospitals	412	349	12	50	0	0
HP.1	Hospitals	10279	7402	314	2562	0	0
HP 2	Nursing and residential care facilities						
HP 2.1	Nursing homes	2866	2725	142	0	0	0
HP 2.2	Residential mental retardation, mental health and substance abuse facilities	171	169	2	0	0	0
HP 2.3	Community care facilities for the elderly	11	11	0	0	0	0
HP 2 .9	All other residential care facilities	49	49	0	0	0	0
HP.2	Nursing and residential care fad lities	3097	2954	143	0	0	0
HP 3	Providers of ambulatory health care						
HP 3.1	Offices of physicians	2635	823	27	1547	237	0
HP 3.2	Offices of dentists	1167	0	0	1167	0	0
HP 3.3	Offices of other health practitioners	1346	23	23		27	0
HP 3.4	Out-patient care centres	517	0	80	437	0	0
HP 3.5	Medical and dia gnostic laboratories	138	0	42		8	0
HP 3.6	Providers of home health care services	886	0	0		793	0
HP 3 .9	All other providers of ambulatory health care	296	102	0	188	0	6
HP.3	Providers of ambulatory health care	6984	947	172	4794	1065	6
HP 4	Retail sale and other providers of medical goods	4717	0	0	4579	138	0
HP 5	Provision and administration of public health programmes	436	85	0	330	0	21
HP 6	Health administration and insurance	1459	0	0	0	0	1459
HP 7 and		0	0	0	0	0	0
HP 9	and Rest of the world	967	81	0	670	56	160
	Health Care expenditure of Health Care providers	27940	11469	630	12936	1259	1647
HP.0	Providers outside HP-dassification 3)	0	0	0	0	0	0
	Health Care expend iture of Care providers	27940	11469	630	12936	1259	1647

ICHA-HP. International Classification of Health Accounts - Health care Providers
 NA: Mode of production is not applicable or not available
 Among others expenditure on day nursery, public social care and social relief

Table 15B: Health Care Expenditure of Care providers by Mode of production according to the OECD / Eurostat ICHA-HP 1), 1999

		Total He alth care expend itu re	In-patient	Day cases O	ut patient	Care at home N	IA 2)
		milli on euro					
HP1	Hospitals						
HP 1.1	General hospitals (including university hospitals)	8666	6 3 3 6	193	2137		0
HP 1.2	Mental health and substance abuse ho spitals	1867	1 128	179	560		0
HP 1.3	Specia lity hospitals	434	356	12	66	0	0
HP.1	Hospitals	1 0967	7 820	384	2763	0	0
HP2	Nursing and residential care facilities						
HP 2.1	Nursin g ho mes	2972	2804	168	0	0	0
HP 2.2	Residential mental retardation, mental health and substance abuse facilities	244	240	3	0	0	0
HP2.3	Community care facilities for the elderly	12	12	0	0		0
HP2.9	All other residential care facilities	52	52	0	0	0	0
HP.2	Nursing and residential care facilities	3280	3 108	172	0	0	0
HP3	Providers of ambulatory health care						
HP3.1	Offices of physicians	2775	873	29	1639	234	0
HP3.2	Offices of dentists	1210	0	0	1210	0	0
HP3.3	Offices of other health practitioners	1463	24	24	1387	28	0
HP3.4	Out-pa tie nt care ce ntres	494	0	88	406		0
HP3.5	Medical and diagnostic laboratories	169	0	44	116		0
HP3.6	Providers of home health care services	949	0	0	102		0
HP3.9	All other providers of ambulatory he alth care	318	110	0	202	0	6
HP.3	Providers of ambul atory health care	7379	1 007	185	5063	11 18	6
HP4	Retail sale and other providers of medical goods	5110	0	0	4956	153	0
HP5	Provision and administration of public health programmes	466	91	0	352	0	23
HP6	Health administration and insurance	1519	0	0	0	0	1519
HP7 and	Other industries (rest of the economy)	0	0	0	0	0	0
HP9	and Rest of the world	1056	85	0	742	60	170
	Care expenditure of Health Care providers	2 9776	12 110	74 1	1 3876	13 32	1719
HP.0	Providers outside HP-classification 3)	0	0	0	0	0	0
	Care expen diture of Care providers	2 9776	12 110	74 1	1 3876	13 32	1719

 ¹⁾ ICHAHP. International Classification of Health Accounts - Health care Providers
 2) NA: Mode of production is not applicable or not a vailble
 3) Among others expenditure on day nursery, public social care and social relief

Table 15 C: Health Care Expenditure of Care providers by Mode of production according to the OEC D/ Eurostat ICHA-HP 1), 2000

Total Health care In-patient Day cases Out patient Care at home NA 2) expenditure mill ion euro *HP1* HP1.1 Hospitals General hospitals (in duding university hospitals) HP 1.2 Mental health and substance abuse hospitals HP 1.3 Speciality hospitals HP.1 Ho spita Is HP2 Nursing and residential care facilities HP 2.1 Nursing homes HP 2.2 HP 2.3 Re sidential mental retardation, mental health and substance abuse facilities Community care facilities for the elderly 0 HP 2.9 All other residential care facilities HP.2 Nursing and residential care facilities HP3 Providers of ambulatory health care Offices of physicians Offices of dentists HP3.1 HP3.2 HP3.3 Offices of other health practitioners n Out-patient care centres HP3.5 Medi cal and diagno stic labo ra tori es HP3.6 Providers of home he alth care services 7 HP3.9 All other providers of ambulatory health care HP.3 Providers of a mb ulatory health care HP4 Re tail sale and other providers of medical goods HP5 Provision and a dministration of public health programmes HP6 He alth a dministration and insurance
HP7 and Other in dustries (rest of the economy) HP9 and Rest of the world Care expenditure of Health Care providers Providers outside HP-classification 3) 1 2794 Care expenditure of Care providers

¹⁾ ICHA-HP: Internation al Classification of Health Accounts - Health care Providers

²⁾ NA: Mode of p to duction is not applicable or not available

³⁾ Among others expe nditure on day nursery, public so cial care and so dal relief

Table 15 D: Health Care Expenditure of Care providers by Mode of production according to the OECD / Eurostat IC HA-HP 1), 2001

Total Health care In-patient Day cases Out patient Care at home NA 2) expend itu re milli on euro HP1 Hospitals HP 1.1 General hospitals (including university hospitals) HP 1.2 Mental health and substance abuse hospitals HP 1.3 Specia lity hospi tal s HP.1 Ho spitals HP2 Nursing and residential carefacilities HP 2.1 Nursing homes HP 2.2 HP 2.3 Residential mental retard ation, mental health and substance a buse facilities Community carefacilities for the elderly 3 0 HP2.9 All other residential care facilities HP.2 Nursing and residential care facilities HP3 Providers of ambulatory health care Offices of physicians Offices of dentists HP3.1 HP3.2 **HP33** Offices of other health practitioners n HP 3.4 Out-patient care centres HP3.5 Medical and diagnostic laboratories Providers of home health care services 119 HP 3.6 HP3.9 All other providers of ambulatory health care HP3 Providers of ambulatory health care HP4 Re tail sale and other providers of medical goods Ω Provision and administration of public health programmes HP5 HP6 He alth ad ministration and insurance
HP7 and Other in dustries (rest of the economy) HP9 and Rest of the world Care expenditure of Health Care providers 167 1 HP.0 Providers outside HP-classification 3) Care expenditure of Care providers

¹⁾ ICHA-HP: International Classification of Health Accounts - Health care Providers

²⁾ NA: Mode of production is not applicable or not availble 3) Among others expenditure on day nursery, public social care and social relief

Table 15 E: Health Care Expenditure of Care providers by Mode of production according to the OECD / Eurostat IC HA-H P 1), 2002

Total Health care In-patient Day cases Out patient Care at home NA 2) expenditure mill ion euro *HP1* HP1.1 Hospitals General hospitals (in duding university hospitals) 12030 87 87 270 2973 0 0 HP 1.2 Mental health and substance abuse hospitals 2495 1500 247 749 0 0 HP 1.3 Speciality hospitals 5 99 500 16 82 0 0 HP.1 Ho spita Is 151 24 107 87 533 3804 0 0 HP2 Nursing and residential care facilities HP 2.1 39 55 36 92 0 263 0 0 Nursing homes HP 2.2 HP 2.3 Re sidential mental retardation, mental health and substance abuse facilities Community care facilities for the elderly 3 35 3 28 0 6 0 HP 2.9 All other residential care facilities 83 83 0 0 0 0 0 HP.2 Nursing and residential care facilities 4377 41 07 270 0 0 HP3 Providers of ambulatory health care Offices of physicians Offices of dentists HP3.1 3473 998 33 2158 284 0 HP3.2 1638 1638 **HP33** Offices of other health practitioners 18.00 38 38 1685 39 n Out-patient care centres 512 0 131 381 0 HP3.5 Medi cal and diagno stic labo ra tori es 204 0 46 149 9 0 HP3.6 125 Providers of home he alth care services 1335 0 0 1210 0 HP3.9 All other providers of ambulatory health care 180 10 HP.3 Providers of a mb ulatory health care 94 13 12 16 248 6398 1542 10 HP4 Re tail sale and other providers of medical goods 6562 0 0 6364 198 0 0 0 0 HP5 1 07 Provision and a dministration of public health programmes 6.90 0 547 36 HP6 He alth a dministration and insurance
HP7 and Other in dustries (rest of the economy) 17 19 0 0 0 0 0 HP9 and Rest of the world 1020 76 228 14 50 126 0 Care expenditure of Health Care providers 393 34 16342 1050 18133 1816 1993 0 Providers outside HP-classification 3) 0 0 0 0 0 393 34 16342 1050 18133 1816 1993 Care expenditure of Care providers

¹⁾ ICHA-HP: Internation all Classification of Health Accounts - Health care Providers

²⁾ NA: Mode of p to duction is not applicable or not available

³⁾ Among others expe nditure on day nursery, public so cial care and so dal relief

Table 15F: Health Care Expenditure of Care providers by Mode of production a ∞ ording to the OECD / Eurostat ICHA-HP $^{1)}$, 200 3*

		Total Health c.In expenditure	-patient Da	ay cases Ou	t patient Car	re at home NA	(2)
		mill ion euro					
HP 1	Hospitals						
HP 1.1	General hospitals (in duding university hospitals)	12663	9250	284	3129	0	0
HP 1.2	Mental health and substance abuse hospitals	2754	165 5	273	826	0	0
HP 1.3	Specia lity hospita Is	653	552	17	84	0	0
HP.1	Hospitals	16071	11458	573	4039	0	0
HP 2	Nursing and residential care facilities						
HP 2.1	Nursing homes	4297	401 1	286	0	0	0
HP 2.2	Residential mental retardation, mental health and substance abuse facilities	307	302	5	0	0	0
HP 2.3	Community care facilities for the elderly	4	4	0	0	0	0
HP 2.9	All other residential care facilities	96	96	0	0	0	0
HP.2	Nursing and residential care facilities	4704	4413	292	0	0	0
HP 3	Pro viders of ambulatory health care						
HP 3.1	Offices of physicians	3791	1086	36	2359	311	0
HP 3.2	Offices of dentists	1790	0	0	1790	0	0
HP 3.3	Offices of oth er heal th practitioners	1929	41	41	1806	42	0
HP 3.4	Out-patient care centres	549	0	132	416	0	0
HP 3.5	Medical and diagnostic laboratories	227	0	50	167	10	0
HP 3.6	Providers of home he alth care services	1559	0	0	145	141 5	0
HP 3.9	All other providers of ambulatory health care	496	205	0	279	0	11
HP.3	Providers of ambulatory health care	10341	1332	259	6962	1777	11
HP 4	Retail sale and other providers of medical goods	7062	0	0	6849	213	0
HP 5	Provision and administration of public health programmes	788	122	0	625	0	41
HP 6	Health admini stration and insurance	1741	0	0	0	0	17 41
HP 7 and	Oth er indu stries (rest of the economy)						
HP 9	and Rest of the world	1661	166	0	1145	111	239
	Care expenditure of Health Care providers	42369	17489	1124	1 9620	2102	20 33
HP.0	Providers outside HP-dassification 3)	0	0	0	0	0	0
	Care expenditure of Care providers	42369	17489	1124	1 9620	2102	20 33

ICHA-HP: International Classification of Health Accounts - Health care Provide is
 NA: Mode of production is not applicable or not available
 Among others expenditure on day nursery, public social care and social relief

Table 16 Care expenditure of Care providers and Health care expenditure of Health Care providers, 1998-2003 *

	1 998	1999	2000	2001	2002	20 03*
	mill ion e uro					
Care expenditure of Care providers	36 855	393 87	42 173	46 923	5 260 6	569 60
Providers outside HP-classification 1) Care expenditure of Health Care providers Ex penditure of Non-health care activities	1 429 35 427 7 486	16 29 377 58 79 80	1 922 40 250 8 634	2 160 44 763 9 291	2419 50187 10853	2 529 544 31 120 62
Health Care expenditure of Health Care providers	27 940	29778	31617	35 472	39334	423 69

 $^{^{\}rm 1})$ Among others expenditure on day nursery, public social care and social relief

Table 17 Health Care expenditure by Mode of Production, 1998-2003*

	1998	1999	2 000	2001	2002	200 3*
	mill ion euro					
Total Health Care Expenditure Mode of Production	27940	29776	3 1617	35472	39334	4 2369
In-patien t	11469	12110	1 2794	14607	16342	17489
Day cases Out patient	630 12936	741 13876	826 1 4773	950 16349	1050 1813 3	1124 1 9620
Care at home	1259	1332	1 488	1671	1816	2102
NA	1647	1719	1736	1895	1993	2033

 ${\sf Table \ 18 \ Total \, Expenditure \ and \, He \, alth \ Care \ Expenditure \ by \, Mode \, of \, Production \ of \, Care \, providers, \, 2003*}$

	Total	In-patient	Day cases	Out patient	Care at home	IA 1)
	mill ion euro					
Car e exp end iture of Care providers	56959	2574 6	4065	2 0927	4172	20 50
Providers ou tside HP-classification 2)	2529	218	2159	152	0	0
Care expenditure of Health Care providers	54431	25528	1905	2 0775	4172	20 50
Non-he alth care a divities	12062	8039	781	1154	207 1	17
Health Care expenditure of Health Care providers	42369	17489	1124	1 9620	2102	20 33
	%					
Health Care expenditure in total expenditure	74,4	67,9	27,7	93,8	50,4	99,2

NA: Mode of Production is Not applicable or Not relevant
 Among others expenditure on day nursery, public social care and social relief

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Annexes

Annex 1 List of providers of care and organisations of administration and management

Concerning the providers of care a distinction is made between providers of health care and providers of social care. It concerns 96 actors (see bulleted items). The data presented relate to 21 (clusters of) actors.

Health care

- 1. General hospitals
 - General hospitals
 - Ambulance services of hospitals
 - Prison hospitals
- 2. University hospitals
- 3. Specialised hospitals
 - Rehabilitation clinics
 - Other specialised hospitals
- 4. Providers of mental health care
 - Integrated institutions for mental health care
 - Psychiatric hospitals
 - Regional institutes for ambulatory mental health care
 - Regional institutes for sheltered dwelling
 - Centres for alcohol and drug abuse
 - Practices of psychiatrists
- 5. Practices of general practitioners
- 6. Practices of medical specialists
 - Practices of orthodontists
 - Practices of jaw surgeons
 - Practices of other medical specialists
- 7. Practices of dentists
- 8. Practices of paramedical professionals and midwives
 - Practices of physiotherapists
 - Practices of speech therapists
 - Practices of movement therapists Cesar
 - Practices of movements therapists Mensendieck
 - Practices of podotherapists
 - Practices of ergonomic therapists
 - Practices of dieticians
 - Practices of dental hygienists
 - Practices of midwives
- 9. Municipal Health Services
 - Municipal Health Services
 - Ambulance services of Municipal Health Services
 - Ambulance services of Municipalities
 - Central administrations of ambulance services of Municipal Health Services

10. Occupational health care providers

- Occupational health services (independent)
- Occupational health services (in-company services)
- Occupational health services (other)

11. Suppliers of pharmaceuticals

- Pharmacies
- Drugstores / Supermarkets

12. Suppliers of therapeutic appliances

- Pharmacies
- Drugstores / Supermarkets
- Optician's shops
- Orthopaedic shoemakers
- Retail trade in orthopaedic articles
- Dental technician's laboratories
- Retail trade in home care articles
- Retail trade in other therapeutic appliances

13. Providers of ancillary services

- Centres for genetic examination
- Thrombosis services
- Medical laboratories
- Laboratories of General practitioners
- Institutes for oncological treatment and radiotherapy
- Eurotransplant
- Sanguine foundation (blood banks)
- Medical sports examination and advice offices
- Offices for sexually transmitted diseases
- Audiological centres
- Institutes for breast cancer examinations
- Institutes for cervix cancer examinations

14. Other providers of health care

- Practices for alternative health care treatment
- Practices of psychologists and psychotherapists
- Practices of nurses
- Medical services of the military and defence personnel
- Asthma clinic Davos
- Abortion clinics
- Private health care clinics
- Institutions for rehabilitation day treatment
- State institute for Public Health and Environment
- Institutes providing guide dogs for the blind
- Consumption households (transport of patients)
- Health centres
- Providers of care in the rest of the world
- Ambulance services
- Taxi companies
- Central administrations of ambulance services (independent)
- Central administrations of ambulance services (co-operating)

Social care

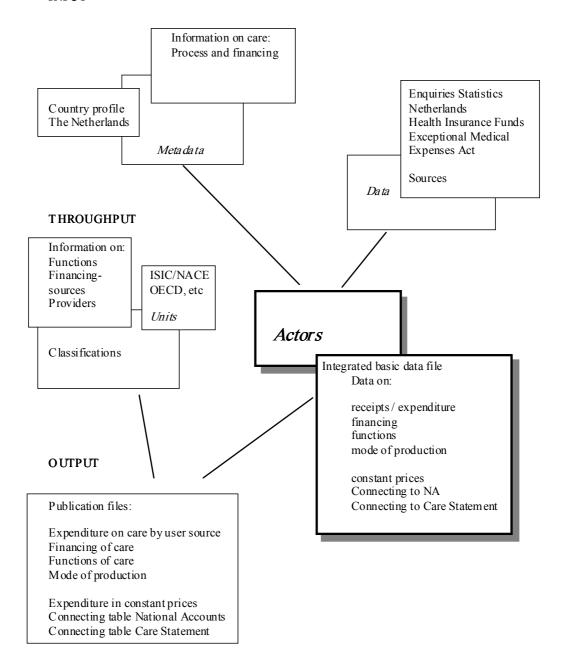
- 15. Nursing homes
- 16. Homes for the elderly
- 17. Home care institutions
 - Institutions providing home care services
 - Home care articles shops
- 18. Providers of care for the handicapped
 - Institutions for the mentally deficient
 - Family replacement homes (until 2000)
 - Day centres for the handicapped (until 2000)
 - Family replacement homes and day centres (starting 2001)
 - Social pedagogical services
 - Institutions for the sensorially handicapped
 - Large dwelling units
- 19. Providers of day nursery
 - Play grounds for toddlers
 - Other providers of day nursery
- 20. Other providers of social care
 - Consumption households (social care)
 - Institutions for public social care
 - Relief homes
 - Medical children's homes
 - Nurseries for toddlers under medical supervision
 - Institutions providing deaf interpreters

21. Administration and management institutions

- Board of Care Insurance Health Insurance Fund
- Board of Care Insurance Exceptional Medical Expenses Act
- Private health and social care insurance companies
- Other institutions in the area of administration and management

Annex 2 Schematic presentation care Accounts

INPUT



Annex 3 Classifications of financing sources, functions and providers

Classificat Code Health	
(HP)	Description
	• • •
HP1	Hospitals
HP 2	Nursing and residential care facilities
HP3	Providers of ambulatory health care
HP4	Retail sale and other suppliers of medical goods
HP5	Provisions and administration of public health programmes
HP6	Health administration and insurance
HP7	Other industries (rest of the economy)
HP9	Rest of the world

Classification of financing institutions				
Code Health care Funding (HF)	Description			
HF 1.1	Covernment evaluation engint ecourity			
	Government, excluding social security			
HF 1.2	Social security: Exceptional Medical Expenses Act (including income dependent contributions by consumer households) and Health Insurance Fund Act			
HF 2.1	Private health care social insurance companies: insurances for public servants, as well as the policies covered by Law governing the Access of Health Care Insurance			
HF 2.2	Private health care insurance companies: the general health insurances			
115.0.0	company policies and the supplementary insurance			
HF 2.3	Consumer households: additional contributions and out-of-pocket payments			
HF 2.4	Non-profit institutions (largely care institutions)			
HF 2.5	Other companies			
HF 3	Rest of the world			

Classification	Classification of functions (just now limited to health care)			
Code Health Care function (HC)	Description			
HC 1 HC 2 HC 3 short HC 3 dependent HC 4 connected HC 4 HC 5 connected	Curative care (diagnosis and treatment) Rehabilitation (recovery of functions) Medical care connected to curative care Medical care in which a dependency relation exists between provider and patient Ancilary services produced by the institution or practice itself Ancilary services produced by independent institutions created for this purpose Medical goods supplied as an integrated part of curative care, medical care or rehabilitation Medical goods separately supplied to the patient			
HC 6 HC 7	Prevention. Included are the separate prevention programmes, as well as recognisable and separately paid preventive parts of health care provisions Administration, manangement and control, and insurances			
	Social care Other activities			

The parts HC.3 short, HC.4 linked and HC.5 linked, are not separately presented in the OECD classification of functions. These functions are part of the functions these items are connected with.

Annex 4 Classification of actors by type in the Care sector:

Providers of health and social care Management and control organisations

Other organisations

amongst which: advice and information organisations

training and education centres

patient organisations umbrella organisations

evaluation and supervising committees

associations of health and social care budget holders

study centres

institutes for research and development

fund raising organisations

Annex 5 Definitions of functions of health care

Definitions of functions

HC.1: Curative care

This functions contains medical and paramedical services supplied during a period of medical treatment. These services aim at providing a diagnosis and a treatment of physical and mental affections. These services are supplied to patients either in an in-patient or day case setting, in practices of health care professionals, like medical specialists, general practitioners, dentists, midwives and paramedical professionals, institutions without accommodation, or at the patient's home.

The administering or use of the intermediate consumption goods and services mentioned below is not included in this function:

- Provision of medical goods (which is HC.5 linked),
- Medical care (which is HC.3 short),
- Separately recognisable preventive care programs (HC.6).
- Ancillary services like imaging diagnostics, radiotherapy, laboratory examinations, clinical chemistry, medical microbiology, nuclear medicine and pathological anatomy (which are HC.4 linked).

The use of other non-medical materials and techniques are accounted for in this function.

HC.2 Rehabilitation

Rehabilitation contains medical and paramedical services provided to patients, which services are aimed at the improvement of the functional levels of the persons treated and for which patients the functional limitations are caused by a single disease or injury or a continuous change (improvement or deterioration) of this disease or injury.

These services are aimed at the redress of a physical or mental affection or the improvement of the physical or mental functionality of the patient. Normally rehabilitative care is more intensive than medical care (nursing) and less acute than curative care. The services are supplied to patients in an in-patient or day case setting, in practices of professionals, like paramedical professionals, in institutions for out patient treatment like centres for rehabilitation day treatment and at the patient's home.

The administering or use of medical goods and ancillary services provided as a part of the process are not included. These services are part of HC.5 linked and HC.4 linked respectively.

HC.3 short: Medical care (nursing)

This function concerns medical nursing care directly linked to the functions of curative care and rehabilitation in an in-patient setting.

HC.3 dependent: Medical care (nursing)

This function contains medical care of patients (like the ill, handicapped or the elderly) that need continuous support caused by chronic physical and mental injuries and a diminished level of the ability to cope, in general daily activities. It concerns medical care in which a dependent relationship exists between care provider and patient. These services can be supplied to patients inside institutions for an in-patient or day case setting or at the patient's home.

Not included in this function are the administering or use of medical goods as part of medical care (which are HC.5 linked).

HC.4 linked: Ancillary services

This function concerns supportive services provided by medical and paramedical technical personnel (with or without direct supervision of a physician or dental doctor) in institutions for an in-patient or day case setting, practices of health care professionals like general practitioners or dentists. Examples are imaging diagnostics, radiotherapy, laboratory examinations, clinical chemistry, medical microbiology, nuclear medicine, pathological anatomy and transport of patients.

HC.4 independent: Ancillary services

This function concerns supportive services provided by medical and paramedical technical personnel (with or without direct supervision of a physician or dental doctor) in independent institutes especially created for this purpose. Examples are ambulance services, thrombosis services, blood banks, medical laboratories and laboratories of general practitioners.

HC.5 linked: Medical goods

This function concerns the supply of medical goods to patients, as well as the services connected to the supply of these goods as a part of (or directly connected to) the medical treatment in institutions for an in-patient or day case setting and practices of health care professionals like general practitioners, dentists and medical specialists.

HC.5 independent supply: Medical goods

This function contains the separate supply to patients of medical goods as well as the services connected to this supply. This separate supply is prescribed or not prescribed and executed by pharmacies, dispensing general practitioners, hospital pharmacies or other pharmacies of institutions and providers of therapeutic appliances like home care shops and retail trade of therapeutic goods.

HC.6 Preventive care

Comprised in this function (prevention and public health) are services aimed at the promotion and protection of the health situation of the population, in other words aimed at the prevention of physical and mental ailments. Included are the independent programs and not all those activities performed as an integral part of a regular normal treatment. It consists of programs like vaccination of the young, against infectious diseases, flew vaccination, mother and child care, cervix cancer screening and breast cancer screening. Also (large parts of) the activities of Municipal Health Services and Occupational health services are included, as well as recognisable separate preventive activities being part of cure like preventive dental treatment.

HC.7: Administration, management and control, insurance

Administration and management and care insurance contain all the activities of private care insurance companies and central or local government as well as social security institutions.

This function relates to the following activities:

- formulating and executing government policy in the area of health and social care, among which the determination of the rules for budgets of institutions and tariffs of independent professionals,
- the financial control over the Health Insurance Fund Act and the Exceptional Medical Expenses Act (collecting the premiums of consumption households and the division of the premiums among the care providers),
- the supervision of the execution of the Health Insurance Fund Act and Exceptional Medical Expenses Act by execution boards and institutions, and
- the supervision on the administration and execution of private care insurance by insurance companies.

Connections with the OECD System of Health Accounts

The supply of medical goods and the provision of ancillary services to patients as part of a medical treatment, rehabilitation or medical care (nursing) are not attributed to the functions medical goods and ancillary services by the OECD, but are attributed to the functions curative care, rehabilitation and medical nursing care. Furthermore, the nursing care linked to curative care is not listed as medical care (nursing) but listed in the function curative care or rehabilitation.

The Dutch classification presented above is completely linkable to the OECD classification, if the following sub-aggregates are distinguished in the functional divisions:

Medical nursing care:

- Nursing care short
- Nursing care independent

Medical goods:

- Independent provision to patients
- Provision to patients as part of curative care
- Provision to patients as part of rehabilitation
- Provision to patients as part of medical care (nursing)

Ancillary services:

- Independent ancillary services
- Ancillary services as part of curative care
- Ancillary services as part of rehabilitation

Annex 6 Descriptions of modes of production

The descriptions of the modes of production as used in the Dutch Care Accounts are derived from the descriptions presented in the OECD System of Health Accounts (SHA), chapter 9. The principles as laid down in chapter 9 are the starting point in the descriptions, but these principles needed to be expanded to include the features of the social care area. The Dutch Care Accounts comprise both the health and the social care area. Furthermore the descriptions are geared to the actual use in the Dutch system. This means for example that the term "Home Care" used in the OECD manual is replaced by the term Care supplied at home. Moreover the four modes of production mentioned in the SHA are supplemented by a fifth one: the production mode "Not relevant".

Below a first description of the contents of the five modes of production as distinguished in the Dutch Care Accounts is presented:

In-patient

Production of in-patient care deals with treatment and care of patients/clients formally admitted or registered into an institution of care. The patient/client stays for a minimum of 24 hours. A bed is required in an in-patient treatment process or setting.

Day case

Day cases comprise all care (medical and social) delivered to patients/clients provided for a part of the day (less than 24 hours). A day case can comprise both a part of the day or a part of the night. No formal admittance is necessary. In general a bed (for clients in the social area usual referred to as a place to stay) is necessary in the treatment process.

Out patient

Out patient comprises all care supplied to patients and clients who visit the provider of care for consultation or treatment for a limited amount of time (usually less than one hour). Consultation or treatment include social contact visits as well.

Care supplied at home

This mode of production implies that care is provided at the home of the patient/client. Provision of services to patients/clients of institutions in case these services are supplied by the institution (or its employees) is not treated as Care supplied at home. However services supplied by external providers to patients/clients in aninstitution is listed as Care supplied at home.

Mode of production" not applicable" or "not relevant"

The production mode "not applicable" or "not relevant" relates to services of health and social care which are not directly supplied to patients or clients, or services for which origin of the production is not determined.