



## *Health at a Glance 2011: OECD Indicators*

### **KEY FINDINGS: GERMANY**

The OECD's latest edition of *Health at a Glance* shows that medical care is improving in OECD countries, although there is room in to improve the prevention and treatment of chronic diseases and to reduce costs.

#### **QUALITY OF CARE**

*Germany does well in preventing hospital admissions from asthma, but could improve the treatment of chronic obstructive pulmonary disease and diabetes outside hospitals.*

Details:

- Avoidable hospital admissions for asthma complications are much lower in Germany than the OECD average, whereas admission rates for COPD and uncontrolled diabetes are close to average. For asthma admissions, the rate in Germany was 21 per 100 000 adults in 2009, less than half the OECD average of 52. For COPD, Germany's rate was 201, and the OECD average was 198. For uncontrolled diabetes, hospital admission in Germany was 50 per 100 000 adults, the same as the OECD average.

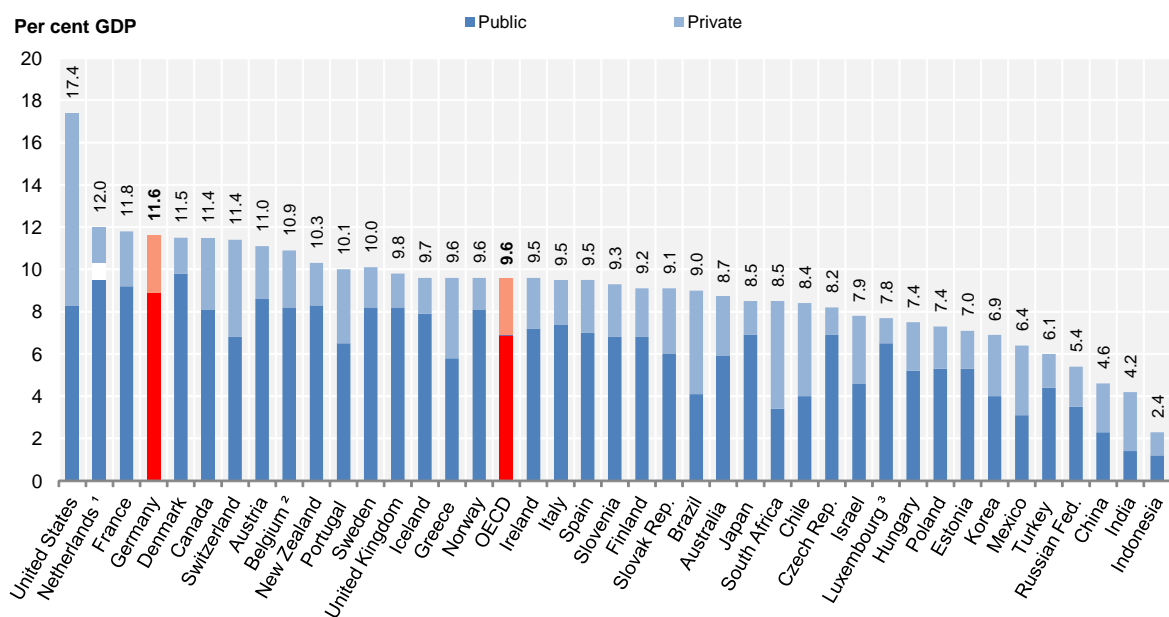
#### **HEALTH EXPENDITURE**

*Germany spent 11.6% of GDP on health in 2009, two percentage points more than the OECD average of 9.6%. Spending per person is also one third higher than the OECD average. However, the growth of health spending over 2000-2009 was one of the lowest of all OECD countries.*

Details:

- Total health spending accounted for 11.6% of GDP in Germany in 2009, compared with an average of 9.6% across OECD countries. The United States (17.4%), the Netherlands (12.0%) and France (11.8%) had a higher share.
- Germany's spending on health per person is 30% higher than the OECD average, with spending of USD 4218 in 2009, adjusted for purchasing power parity. The average was USD 3233. Per capita health spending over 2000-2009 grew in real terms by 2.0% in Germany, much less than the OECD average of 4.0%.
- In Germany, 77% of health spending was funded by public sources in 2009, higher than the average of 72% for OECD countries, and about equal to the share in France. However, the share of direct out-of-pocket spending by patients in Germany is higher than in France (13% versus 7%) because complementary private health insurance plays a lesser role. Still, the share of out-of-pocket spending in Germany remains well below the OECD average of 19%.

## Health expenditure as a share of GDP, 2009 (or nearest year)



1. In the Netherlands, it is not possible to clearly distinguish the public and private share related to investments. 2. Total expenditure excluding investments. 3. Health expenditure is for the insured population rather than the resident population.

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

Source: OECD Health Data 2011; WHO Global Health Expenditure Database.

- Journalists are invited to contact the OECD's Media Relations Division (tel.: 33 1 45 24 97 00 or [news.contact@oecd.org](mailto:news.contact@oecd.org)) to obtain a copy of *Health at a Glance 2011*.
- For further information about the content of *Health at a Glance 2011*, please contact Mark Pearson (tel. 33 1 45 24 92 69 or [mark.pearson@oecd.org](mailto:mark.pearson@oecd.org)) or Gaétan Lafortune (tel. 33 1 45 24 92 67 or [gaetan.lafortune@oecd.org](mailto:gaetan.lafortune@oecd.org)) in the OECD Health Division.
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