KEY FINDINGS

- The quality of care in Norway is generally excellent, as illustrated by the survival rates of patients admitted to the hospital following a heart attack (AMI) or stroke, or after diagnosis for different types of cancer.

- Norway does much less well on waiting times for elective surgery – Norwegians have to wait longer than in many other countries to get hip or knee replacements, or cataract surgery.

- Norway remains one of the biggest health spenders in the OECD; in 2013, Norway spent more public money on health than any other OECD country.

While quality of care is generally excellent, timely access is more of a concern

Generally, the Norwegian health system excels in saving the lives of patients with potentially fatal conditions. Norway is a top-performer on breast and cervical cancer survival, as well as on survival for patients admitted to hospital following a heart attack (AMI) or stroke. Colorectal cancer survival is less impressive, but nonetheless remains above the OECD average.

So-called ‘avoidable’ hospital admissions, for asthma, COPD and diabetes, are used as indicators of the quality of primary care; when primary care systems are working well to manage chronic diseases in the community, ‘avoidable’ admissions should be low. In this sense, these indicators reflect fairly well on the Norwegian primary care sector, even if room for improvement remains.

How Norway compares with other OECD countries on selected indicators of quality of care and waiting times (2013 or nearest year)

Note: The closest the dot is to the center “target”, the better the country performs. The countries in the inner circle are in the top quintile among the best performing OECD countries, while those in the outer circle are in the bottom quintile.

Source: OECD Health at a Glance 2015 (chart design: Laboratorio MeS).
Where Norway lags behind other OECD countries is in waiting times for elective surgery. Despite Norway’s resource-rich health system, Norwegians still wait longer to access hip or knee replacements, or cataract survey than their peers in the Netherlands, Denmark and the United Kingdom. The Norwegian Patients’ Rights Act gives all citizens the right to choose in which hospital they want to be treated. To enable citizens to exercise this right, information on waiting times and quality is available on a public website (www.frittsykehusvalg.no/english).

Impressive health system performance still comes at a cost in Norway

Impressive health system performance still comes at a cost in Norway, with the country remaining one of the biggest spenders in the OECD in 2013. Total spending on health was 5 862 USD per capita (adjusted for purchasing power parity), well above the OECD average of 3 453 USD. Norway also had the highest per capita public spending of OECD countries; just 15% of all health expenditure in Norway comes from private sources, compared to an average 27% OECD-wide.

Health expenditure per capita, USD PPP, 2013 (or nearest year)

Note: Expenditure excludes investments, unless otherwise stated.
1. Includes investments.
2. Data refers to 2012.

Health at a Glance 2015 provides international comparisons of health status, risk factors to health, health expenditure, access to care and quality of care. For the first time in 2015, the publication also includes a set of dashboard indicators summarising the comparative performance of OECD countries on these different dimensions of population health status and health system performance.


For more information on OECD’s work on Norway, please visit http://www.oecd.org/norway.