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Abstract

The financial burden of healthcare among the unprivileged in Austria: Evidence from the EU-SILC 2017 and 2022 data

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Financial protection is the only health system goal not covered yet by the Austrian health system performance assessment (HSPA, known in Austria also as the ‘Outcome Messung’). While nearly the entire population has access to public healthcare, the out-of-pocket payments persistently remain at a level above the European Union average and are likely to further rise in view of the increasing shortage of contracted physicians. In 2017, over one-third of the EU-SILC respondents reported that the expenses for medical care, dental care and medicines were a heavy or some burden on their households. This share is certainly higher in some population groups.

This paper provides evidence on the extent of socioeconomic differences in the financial burden of healthcare in Austria. To this aim, we use the 2017 and, once available, the 2022 EU-SILC data containing the special module on health. Using the three variables denoting the financial burden of medical care, dental care and medicines, we construct a composite indicator of financial burden of healthcare. We include it as an outcome variable in multinomial logistic regression models to estimate the probability of reporting financial burden of healthcare by the socially and economically unprivileged group as opposed to the rest of the population when controlling for demographic variables (e.g. age, gender, migration background, place of living, etc.). We define the group of socially and economically unprivileged using the composite indicator of population at-risk-of-poverty or social exclusion and the self-assessed state of health. Currently, the analysis covers only the year 2017 but our goal is to include the 2022 data as soon as they become available, and to explore whether the socioeconomic differences in the perceived financial burden of healthcare have changed over time.