**Source:**

Organisation for economic co-operation and development (2018). Health expenditure and financing: Expenditure functions, providers and measures. OECD Publishing, Paris. Retrieved from <https://stats.oecd.org/Index.aspx?DataSetCode=SHA>. Accessed on September 10, 2018.

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**Overview:**

The organization for economic co-operation and development provides a cumulative data set with details regarding the health expenditure and financing based on various factors such as financing schemes, health expenditure functions, healthcare providers and the measure of these expenditures for a list of countries. The data set provides an insight on the health expenditure on functions such as curative healthcare and rehabilitative care, inpatient and outpatient curative care, day care and home based curative care, long term care, medical goods and preventive care. The data set can also be filtered based on health care providers and the country wise expenditure on these providers. We can also analyze the expenditure on different financing schemes such as government/ compulsory schemes and voluntary schemes. If we look at the data, the expenditure on inpatient curative and rehabilitative care in countries like Latvia, Iceland and Estonia have decreased majorly whereas the same expenditure has increased for Poland from 29% to 34% from the year 2004 to 2016 which can give us an insight on the positive health conditions of the people in countries like Latvia, Iceland and Estonia where the inpatient curative and rehabilitative cure expenditure has decreased whereas the health conditions of people in Poland aren’t faring so well. Similarly, the expenditure on outpatient curative and rehabilitative cure has decreased for countries like Spain and Italy whereas countries like Portugal see a growth in the expenditure from 2000 to 2016. A large number of people in various countries invest in long term health care plans provided by hospitals. Countries like Korea, Czech Republic and Australia has seen an expenditure growth on long term health care plan where Iceland has seen a decrease on the same from 2003 to 2016. Similarly, the data set can provide valuable insights on a number of factors for the expenditure on health care functions such ambulatory services and medical goods.

**Potential Data users and decision makers for this data:**

Government Health care organizations: The data can be used by various government health care organizations to analyze and improve the health care systems in their respective countries to make healthcare more affordable, easily available and can also make an informed decision on the funding requirements too. They can analyze the pattern of growth and decrease in various types of health care facilities and identify the possible causes for the same too.

Healthcare firms: The data set can be used by health care firms to analyze the trend of expenditure on various types of services such as inpatient and outpatient curative and rehabilitative cure , home based curative and long term health care, medical goods and other such frequently used services provided by hospitals, providers of ambulatory care, retailers and other providers of medical goods to better understand the needs and affordability of the population.

**Three questions this data might help to answer:**

1. How are the expenditures on various types of healthcare services trending?
2. Which are the healthcare services on which the out of pocket expenditure has increased over a period of years?
3. Looking at the expenditure on healthcare services, which countries are becoming increasingly conscious about health care?

Word Count: 666