



MESYUARAT JAWATANKUASA PEMANDU MNHA

16 NOVEMBER 2023

NOTE



Malaysia National Health Accounts (MNHA) publishes National Health Expenditure time-series data based on the duration of the 3 most recent RMK cycles.

This year's report will consist of data covering the years for RMK-10, RMK-11 & RMK-12. The finalized data will be published soon as "Malaysia National Health Accounts: Health Expenditure Report 2011-2022".

For further information, please contact us at mnha@moh.gov.my.

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National Health Accounts | MNHA Framework |
Methodology

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National Health Expenditure

Total Expenditure on Health 2011-2022
(MNHA Framework)

03

Out of Pocket Expenditure

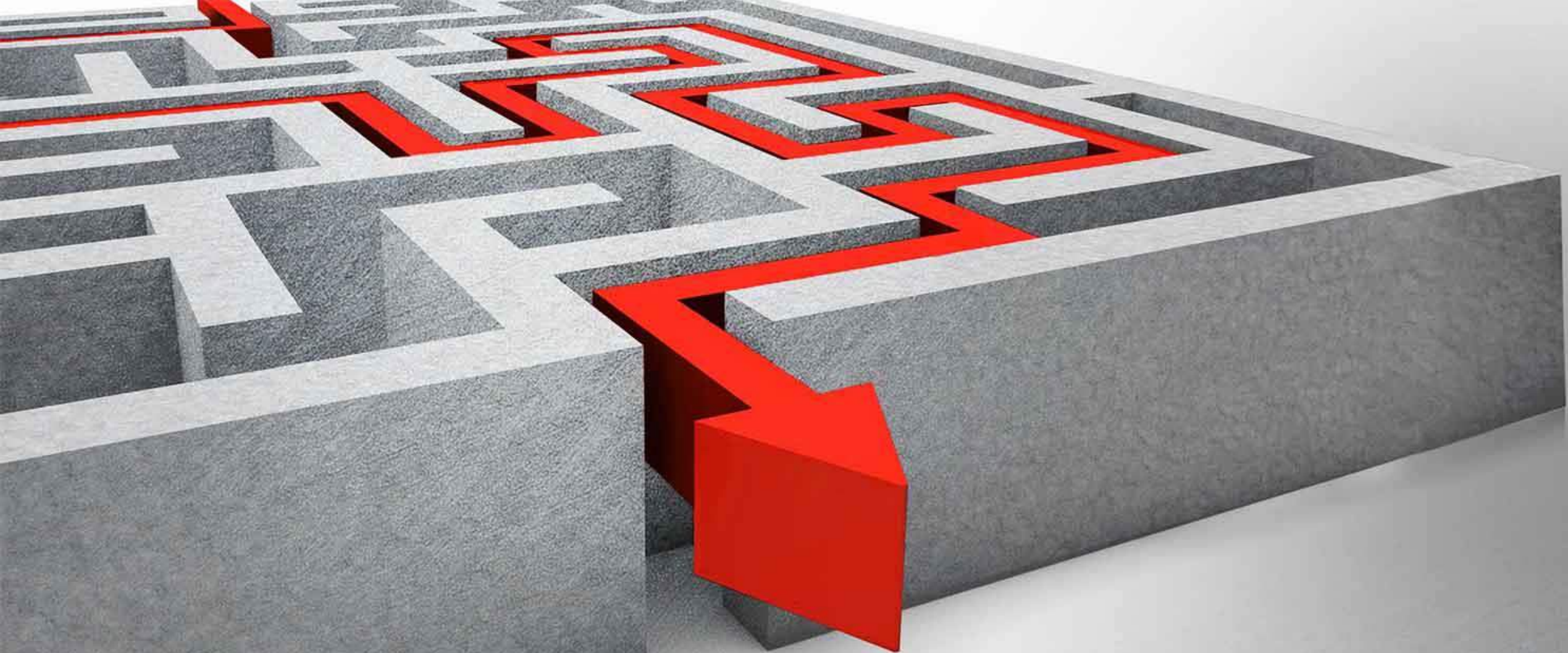
2011-2022

04

International Comparison

Current Health Expenditure
(International SHA Framework)



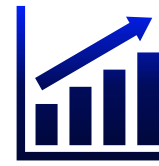


INTRODUCTION

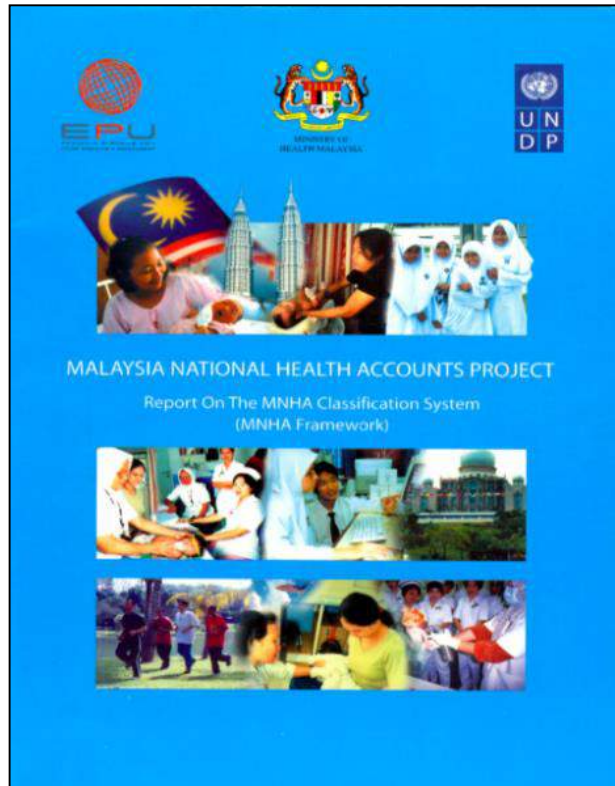
NATIONAL HEALTH ACCOUNTS



Tool to demonstrate how a country's health resources are **spent**, on what **services**, and **who pays** for them.



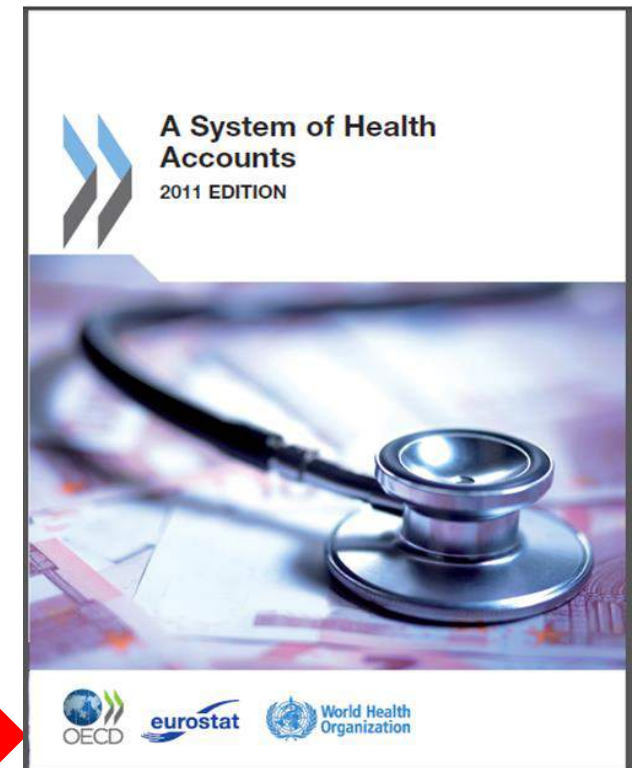
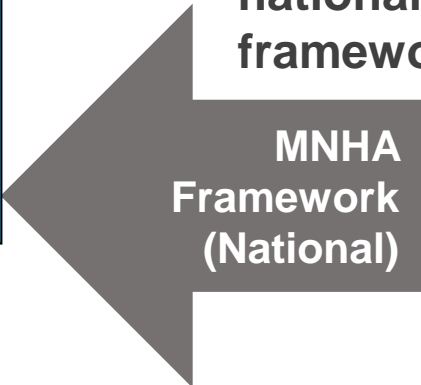
Captures the flow of funds in the Health System to monitor estimated health expenditure patterns.



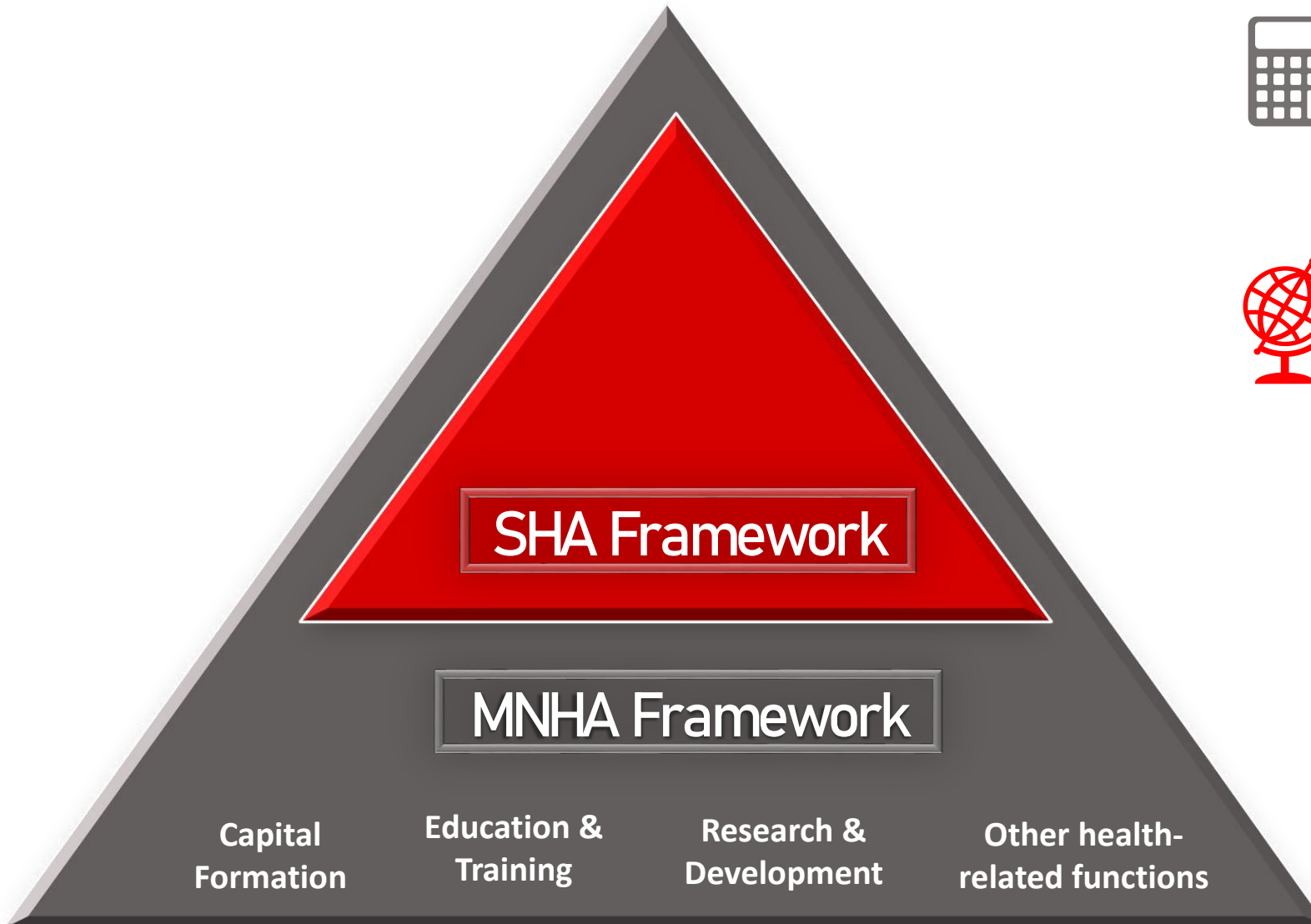
MALAYSIA NATIONAL HEALTH ACCOUNTS (MNHA)

Established under Planning Division of MOH in September 2005.

Produces aggregate health expenditure **macrodata** using estimation methods based on national and international framework & guidelines.



INTRODUCTION



26 years time-series of NHA data produced using a standardized, globally recognized methodology.



Internationally accepted expenditure estimations based on NHA principles as described in SHA reference documents.

TEH

Total Expenditure on Health

MNHA Framework

National framework based on SHA Framework, but boundaries are tailored to Malaysia's health system.

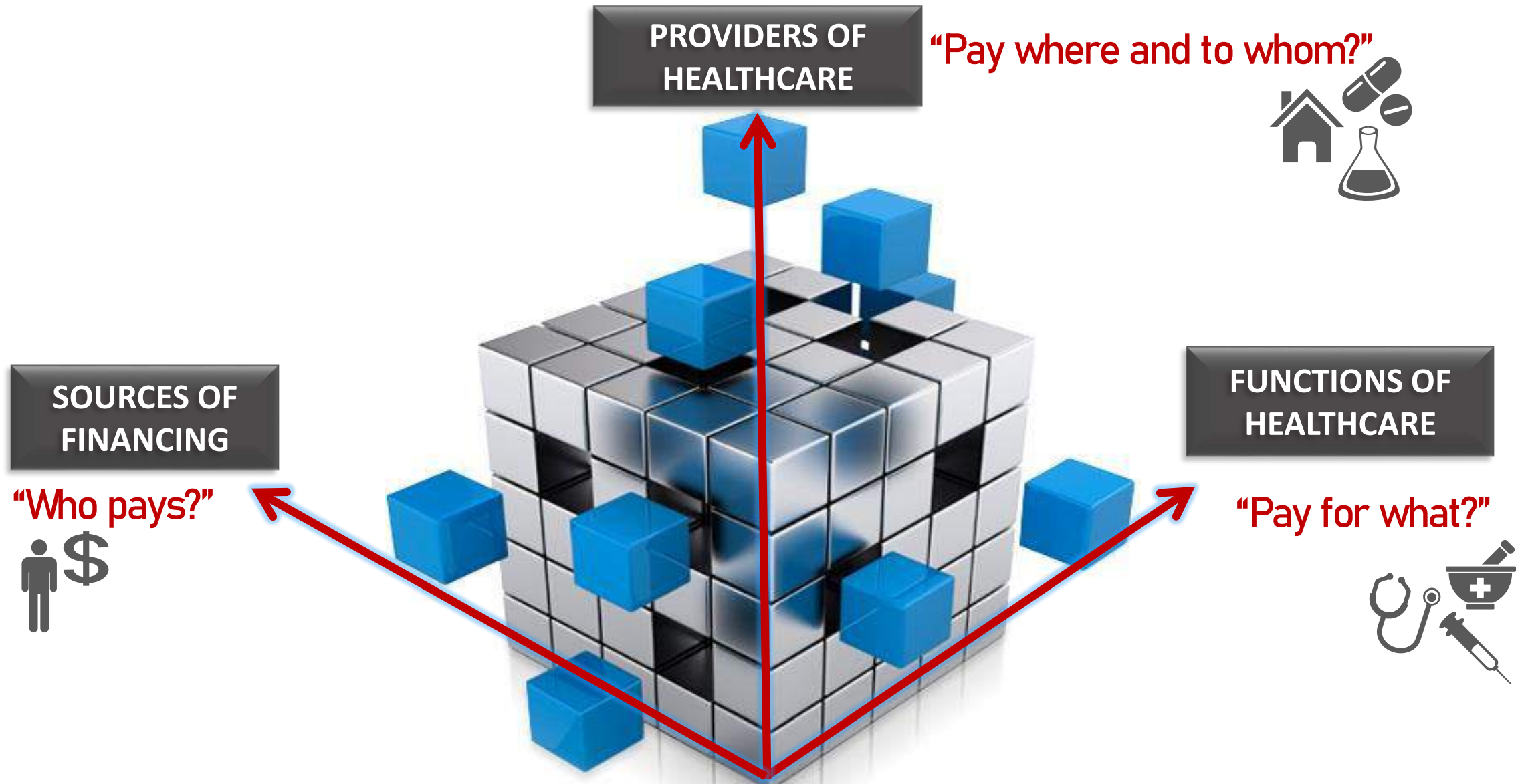
CHE

Current Health Expenditure

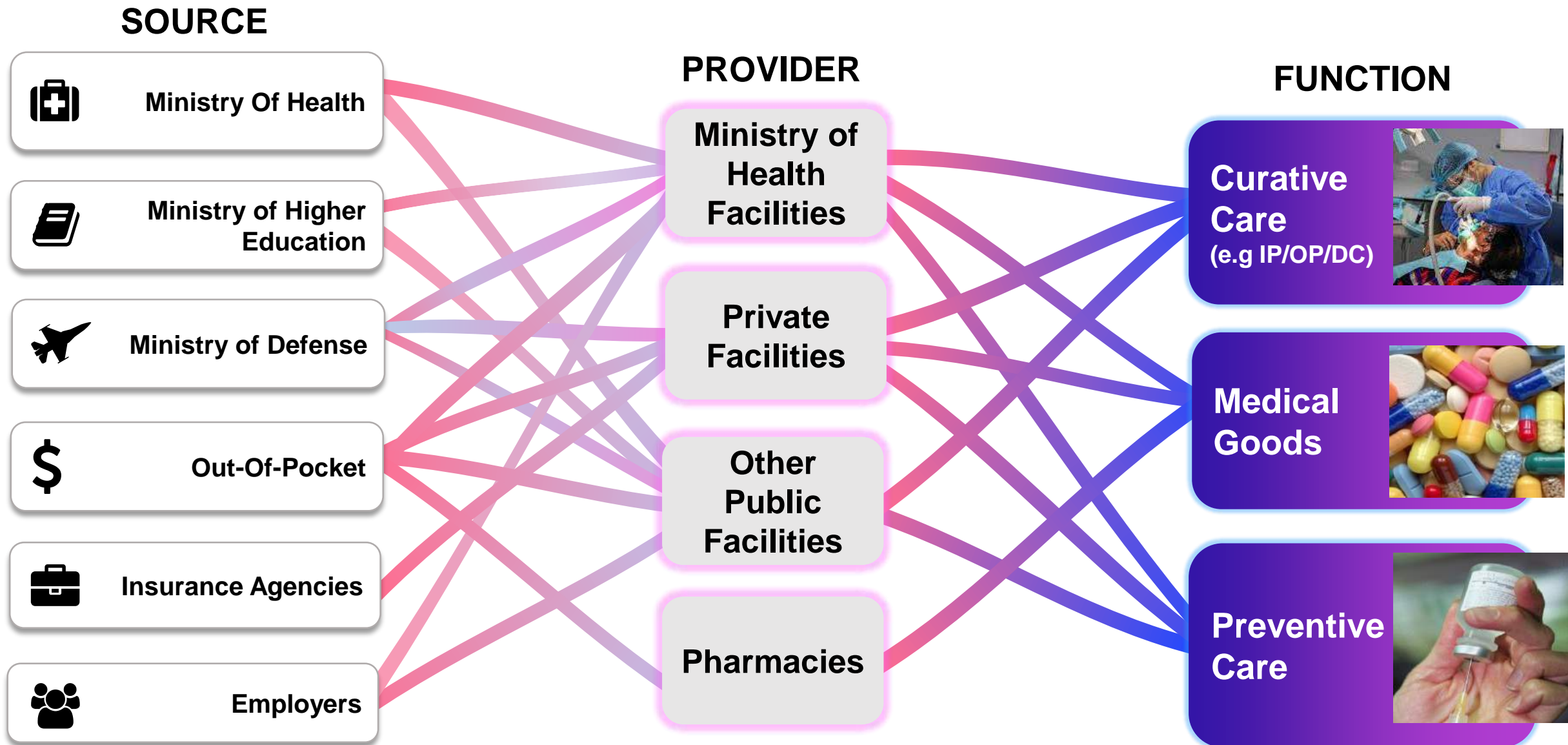
SHA 2011 Framework

Global framework for producing national health accounts (collaborative effort between The OECD, WHO and Eurostat)

MNHA FRAMEWORK



FLOW OF HEALTH FUNDS



Note: Diagram is for illustration purpose only and does not represent actual interconnections which is much more complex



METHODOLOGY

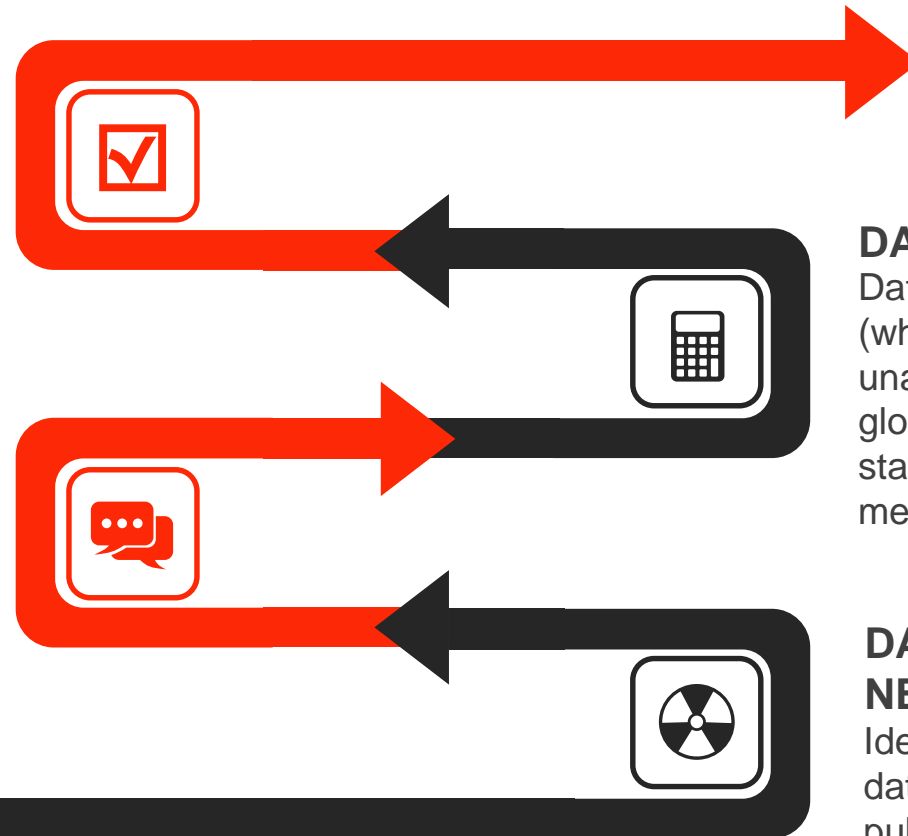
METHODOLOGY

DATA VERIFICATION AND VALIDATION

Multiple levels:
OIC of Agency
OIC of Compilation
OIC of Final Database
MNHA Technical
Advisory Committee
MNHA Steering
Committee

DATA COLLECTION

Collection of both
primary and secondary
data from all identified
agencies in both public
& private sectors.



PUBLICATION

DATA ANALYSIS

Data estimations
(whenever raw data is
unavailable) using
globally recognized,
standardized estimation
methods.

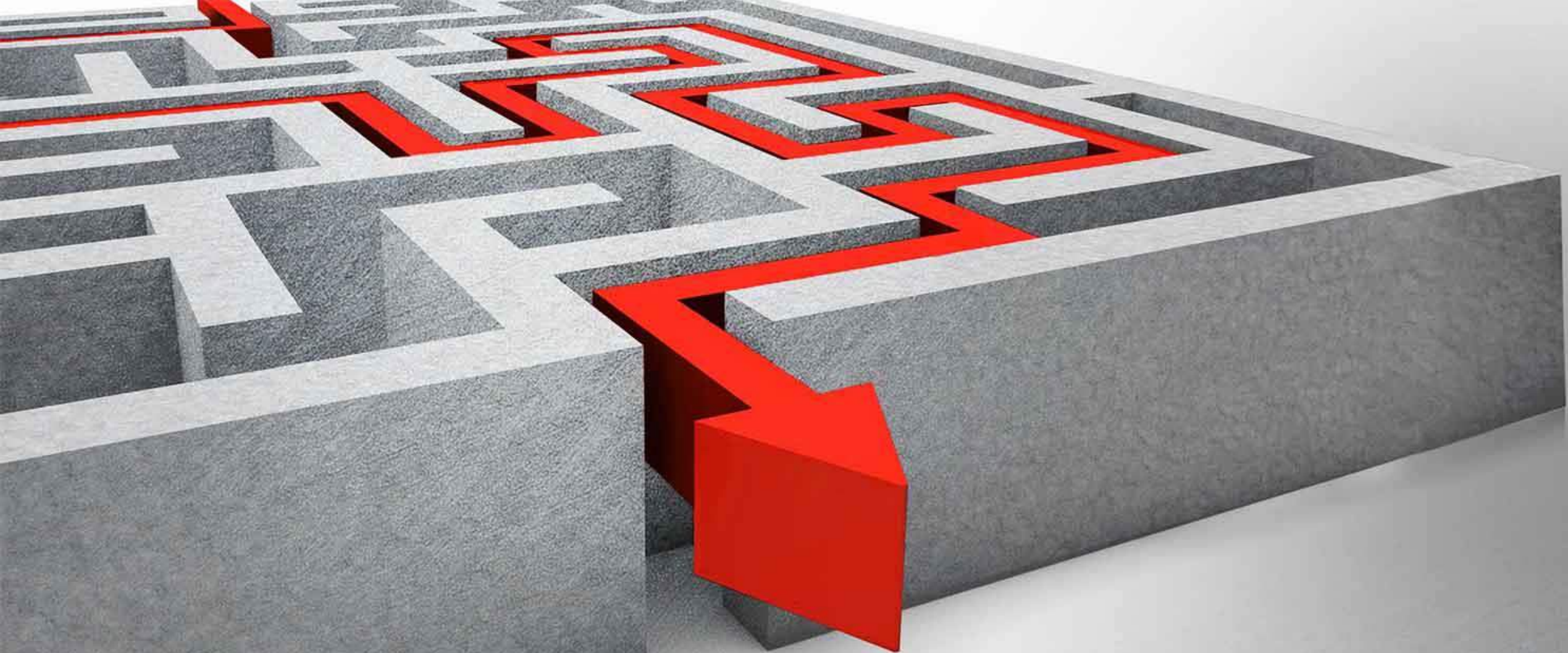
DATA SOURCE NETWORKING

Identify list of potential
data sources both in
public & private sectors.



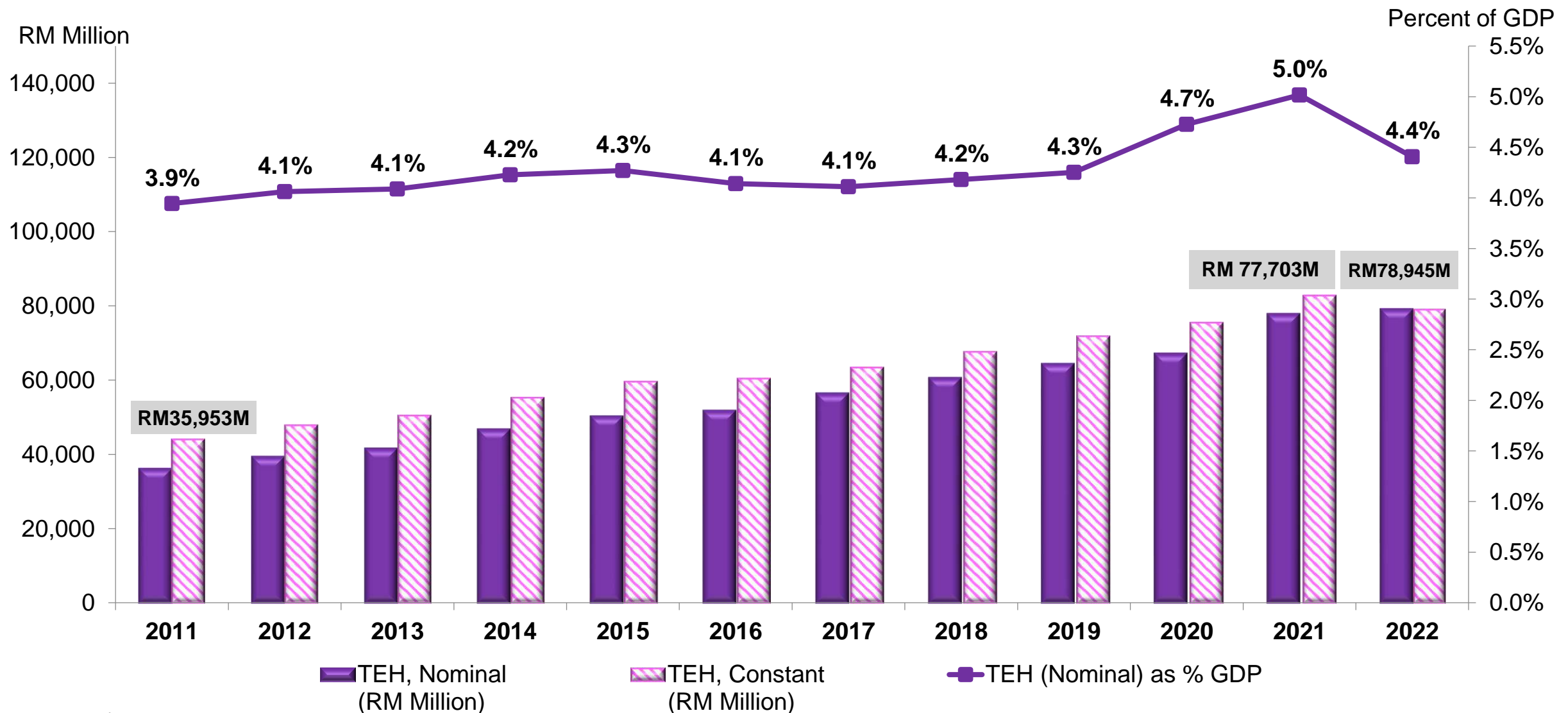
PUBLICATIONS





TOTAL EXPENDITURE ON HEALTH 2011-2022

Total Expenditure on Health [TEH] & TEH as percentage of GDP, 2011-2022



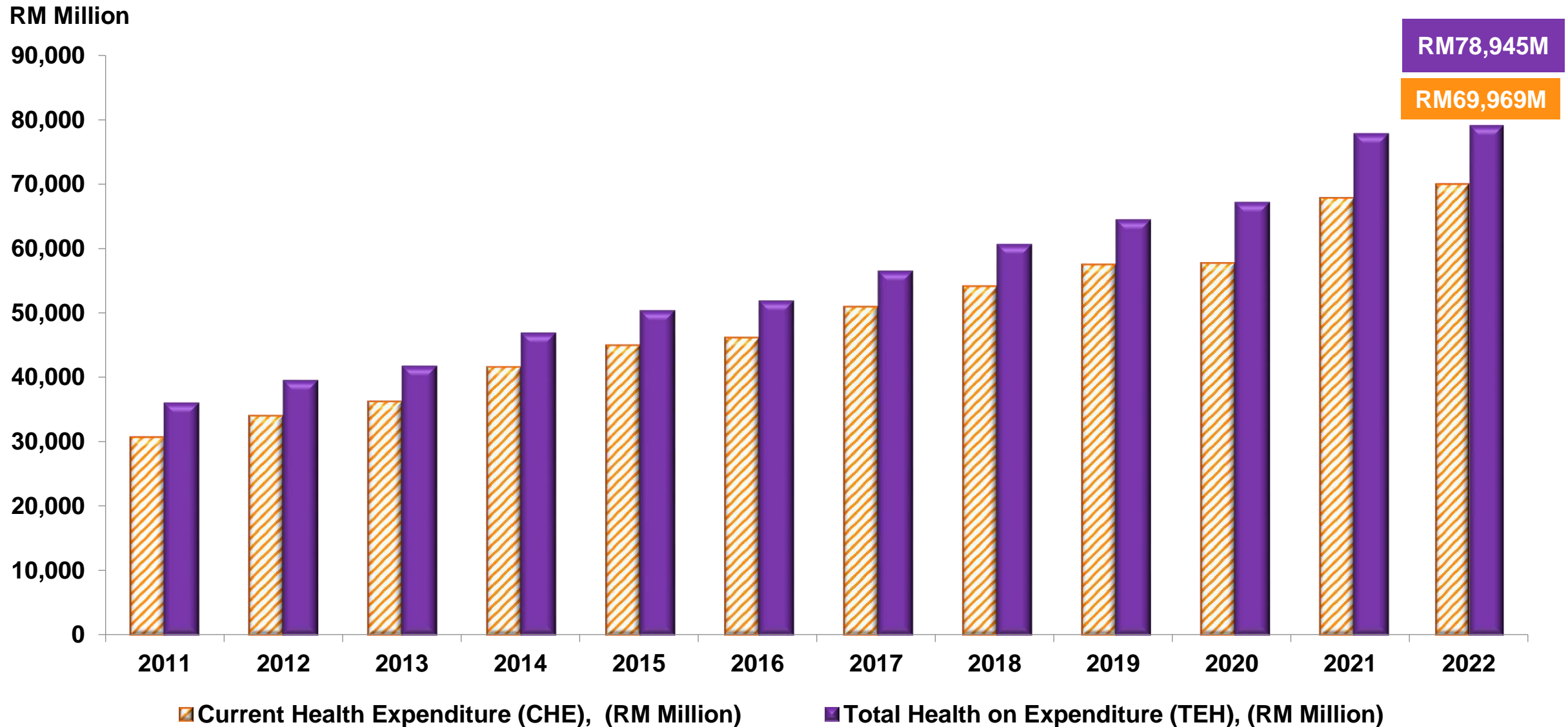
Total Expenditure on Health [TEH] & TEH as percentage of GDP, 2011-2022

Year	TEH, Nominal (RM Million)	TEH, Constant (RM Million)*	Total GDP, Nominal (RM Million)*	THE, Nominal as %GDP
2011	35,953	44,029	911,733	3.9%
2012	39,448	47,831	971,252	4.1%
2013	41,647	50,410	1,018,614	4.1%
2014	46,780	55,259	1,106,443	4.2%
2015	50,256	59,583	1,176,941	4.3%
2016	51,756	60,360	1,249,698	4.1%
2017	56,404	63,386	1,372,310	4.1%
2018	60,528	67,598	1,447,760	4.2%
2019	64,336	71,800	1,512,738	4.3%
2020	67,051	75,447	1,418,491	4.7%
2021	77,703	82,712	1,548,898	5.0%
2022	78,945	78,945	1,791,358	4.4%

Source: * Department of Statistics Malaysia

Seksyen MNHA, Bahagian Perancangan – 2023

Total Expenditure on Health & Current Health Expenditure, 2011-2022 (RM Million, Nominal)

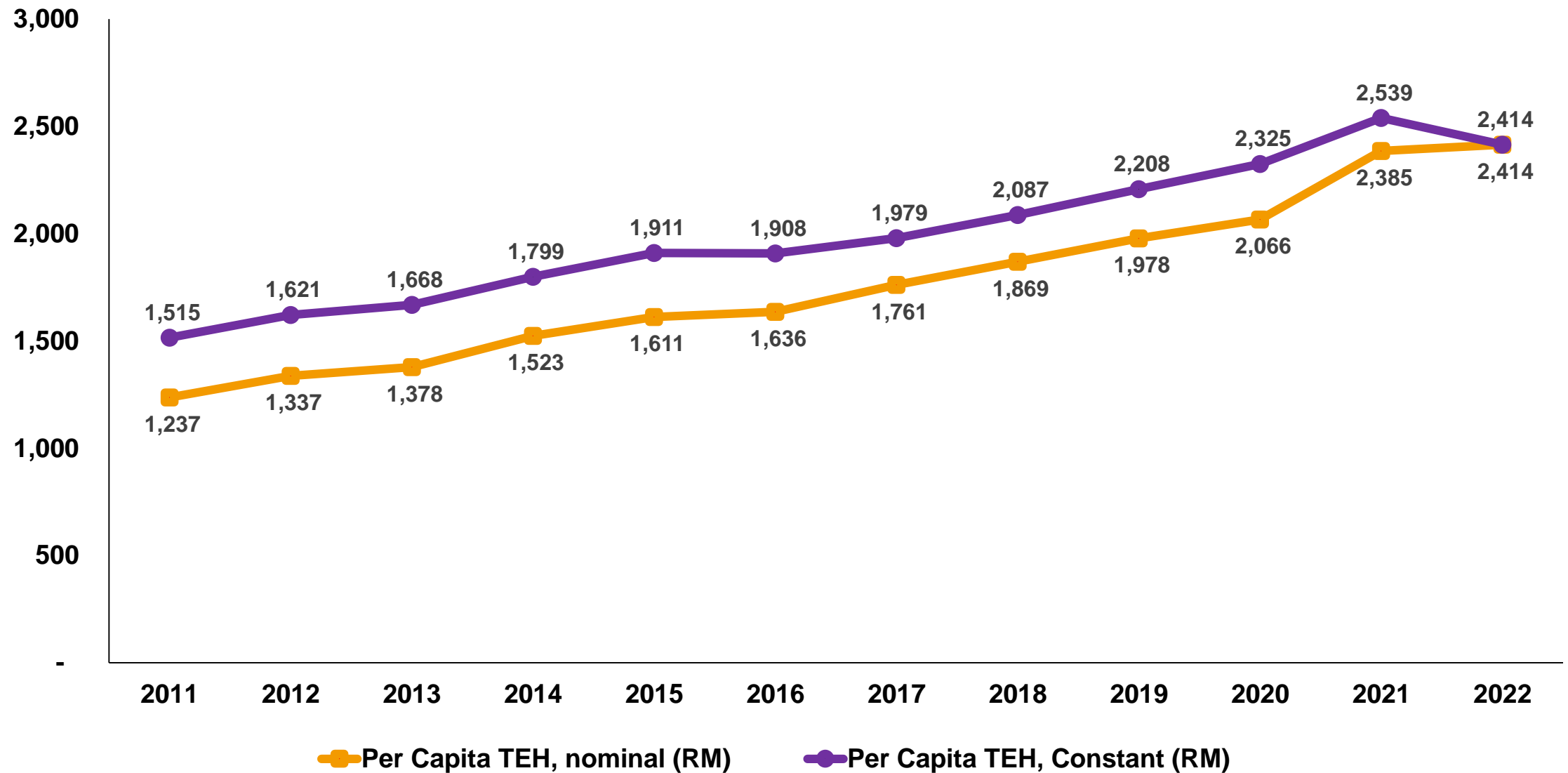


Total Expenditure on Health & Current Health Expenditure, 2011-2022 (RM Million, Nominal)

Year	CHE, Nominal (RM Million)	TEH, Nominal (RM Million)
2011	30,649	35,953
2012	34,062	39,448
2013	36,290	41,647
2014	41,636	46,780
2015	44,983	50,256
2016	46,190	51,756
2017	50,975	56,404
2018	54,143	60,528
2019	57,502	64,336
2020	57,735	67,051
2021	67,821	77,703
2022	69,969	78,945

Source: * Department of Statistics Malaysia

Per Capita Expenditure on Health, 2011-2022 (RM, Nominal & Constant)



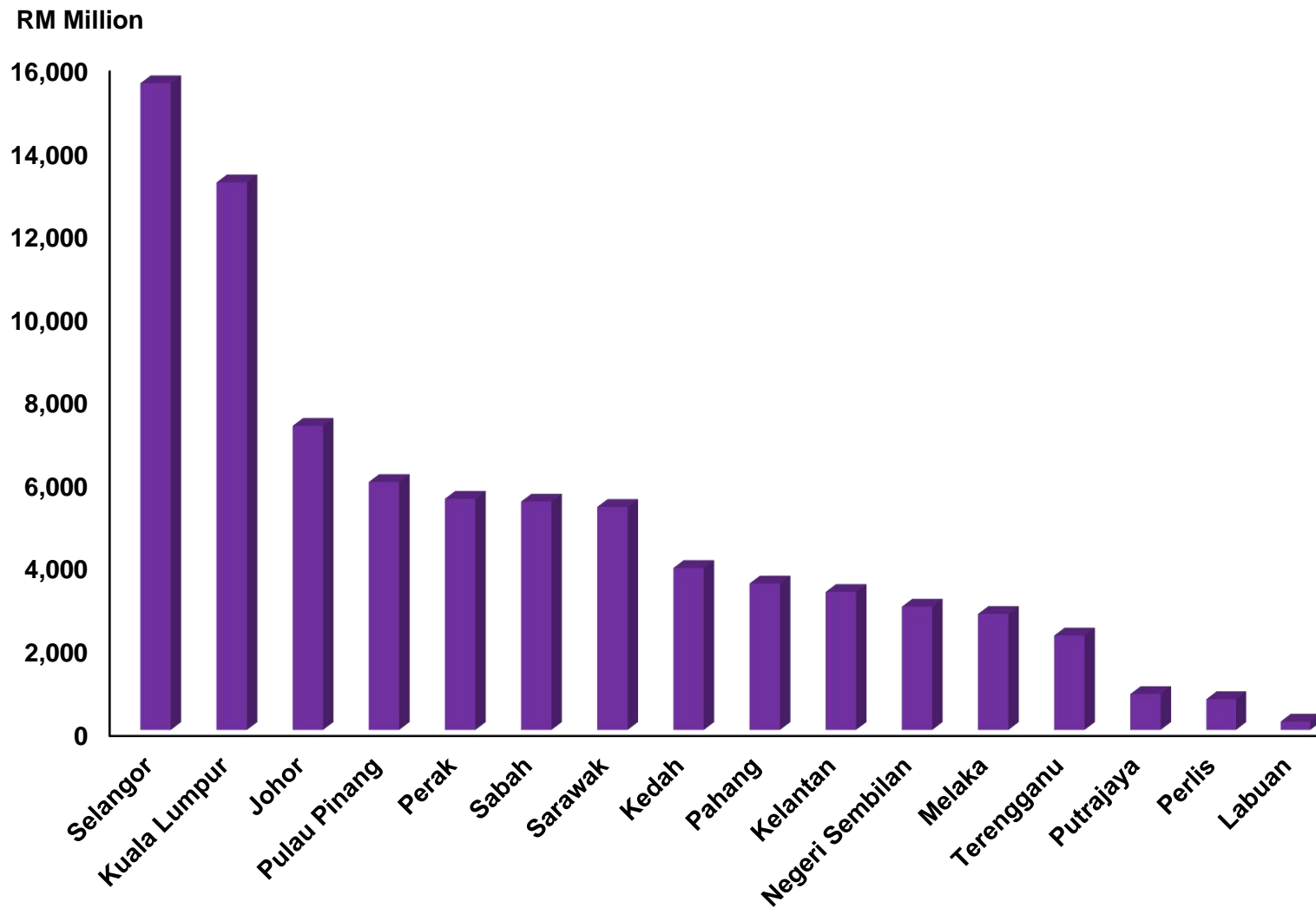
Per Capita Expenditure on Health, 2011-2022

(RM, Nominal)

Year	TEH, Nominal (RM Million)	TEH, Constant (RM Million)	Total Population*	Per Capita, Nominal (RM)	Per Capita, Constant (RM)
2011	35,953	44,029	29,062,000	1,237	1,515
2012	39,448	47,831	29,510,000	1,337	1,621
2013	41,647	50,410	30,213,700	1,378	1,668
2014	46,780	55,259	30,708,500	1,523	1,799
2015	50,256	59,583	31,186,100	1,611	1,911
2016	51,756	60,360	31,633,500	1,636	1,908
2017	56,404	63,386	32,022,600	1,761	1,979
2018	60,528	67,598	32,382,300	1,869	2,087
2019	64,336	71,800	32,523,000	1,978	2,208
2020	67,051	75,447	32,447,400	2,066	2,325
2021	77,703	82,712	32,576,300	2,385	2,539
2022	78,945	78,945	32,698,100	2,414	2,414

Source: * Department of Statistics Malaysia

Expenditure on Health by States, 2022 (RM Million)



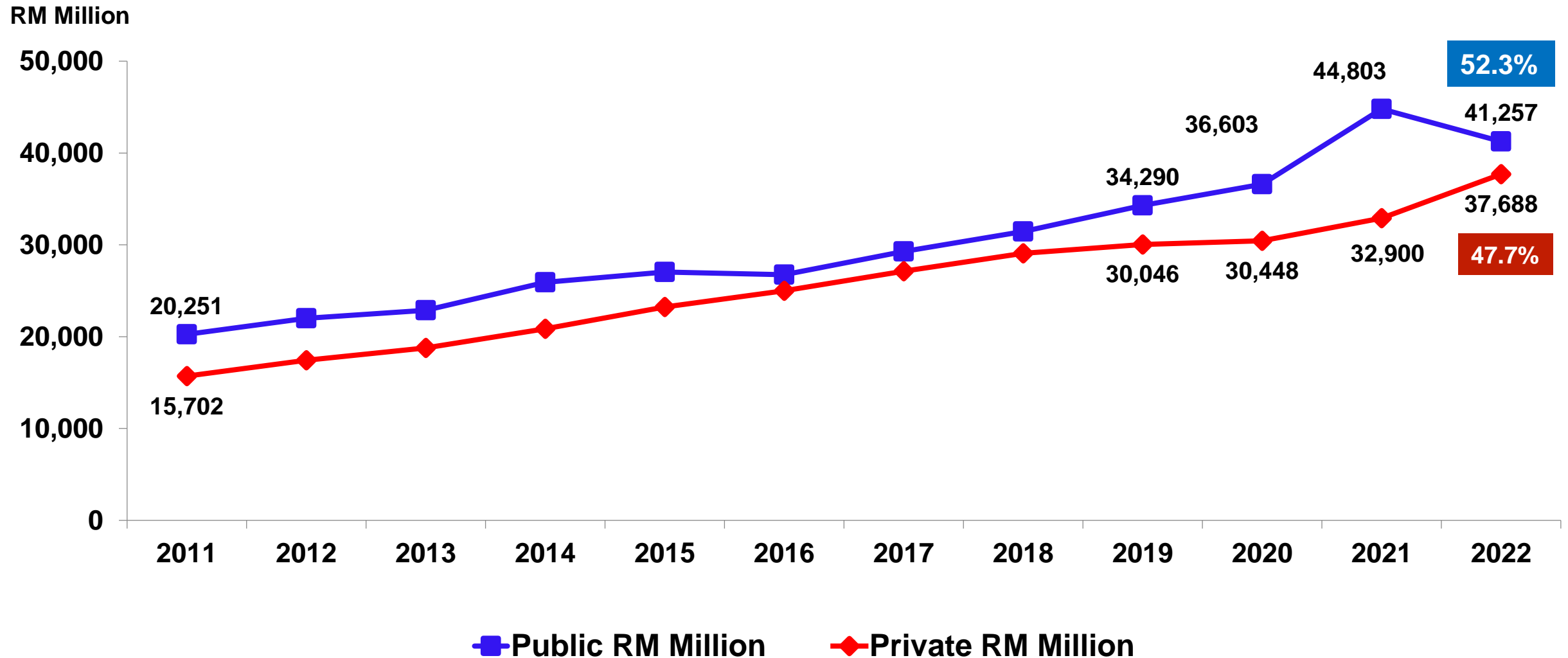
* Values include health expenditure that cannot be allocated to states (mainly expenditure by Private Insurance, MOH HQ, DOSH etc.), which has been re-proportioned to each state.

State	Health Expenditure* (RM Million)
Selangor	15,569
FT Kuala Lumpur	13,180
Johor	7,313
Pulau Pinang	5,962
Perak	5,557
Sabah	5,490
Sarawak	5,361
Kedah	3,889
Pahang	3,515
Kelantan	3,312
Negeri Sembilan	2,957
Melaka	2,781
Terengganu	2,263
FT Putrajaya	860
Perlis	737
FT Labuan	199



TEH 2011-2022 SOURCES OF FINANCING

Total Expenditure on Health by Public & Private Sources of Financing, 2011-2022 (RM Million)

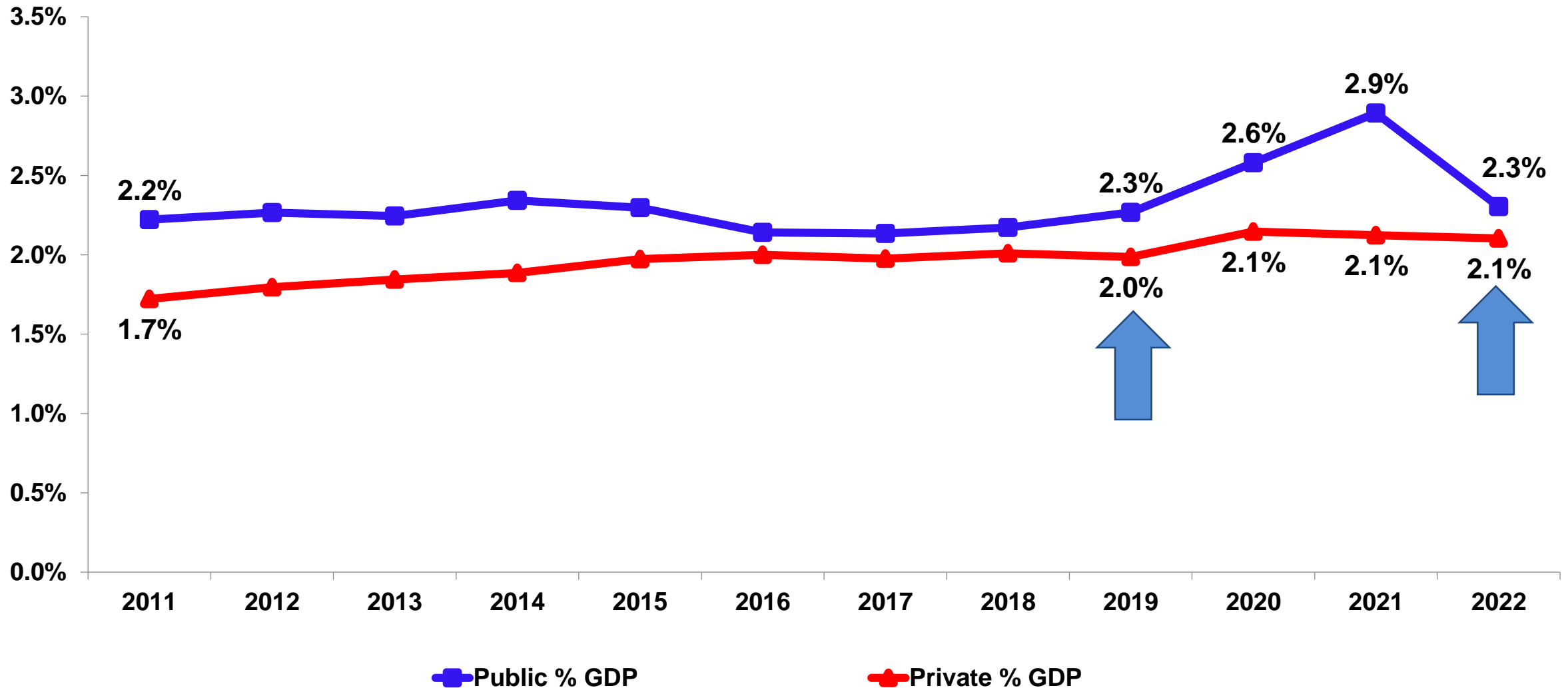


Total Expenditure on Health by Public & Private Sources of Financing, 2011–2022 (RM Million)

Year	PUBLIC SECTOR		PRIVATE SECTOR	
	RM Million	Public % TEH	RM Million	Private % TEH
2011	20,251	56.3%	15,702	43.7%
2012	22,007	55.8%	17,442	44.2%
2013	22,868	54.9%	18,780	45.1%
2014	25,921	55.4%	20,859	44.6%
2015	27,034	53.8%	23,222	46.2%
2016	26,754	51.7%	25,001	48.3%
2017	29,283	51.9%	27,121	48.1%
2018	31,444	51.9%	29,084	48.1%
2019	34,290	53.3%	30,046	46.7%
2020	36,603	54.6%	30,448	45.4%
2021	44,803	57.7%	32,900	42.3%
2022	41,257	52.3%	37,688	47.7%

TEH by Public & Private Sources of Financing as Percentage of GDP, 2011-2022

Percentage of GDP

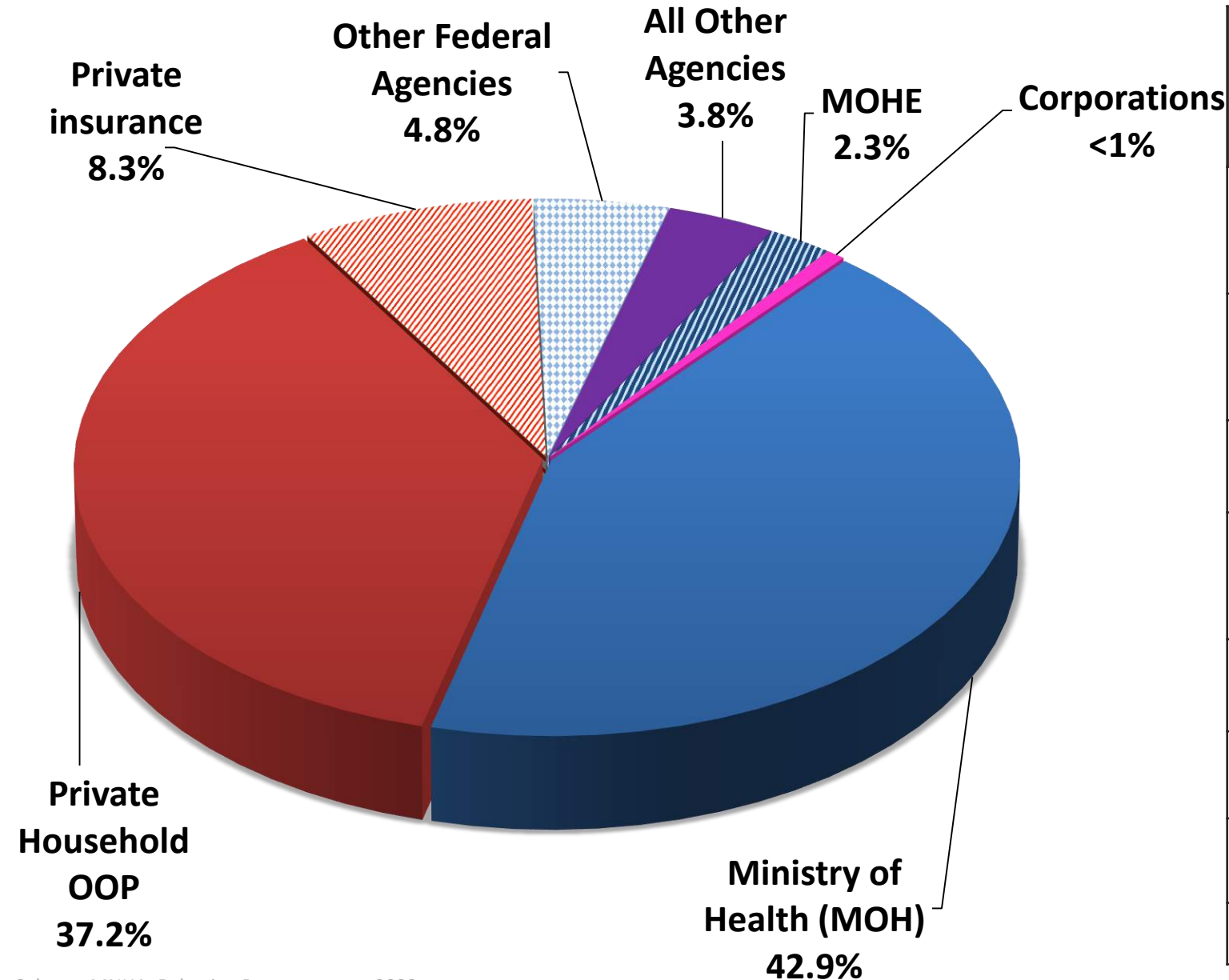


TEH by Public & Private Sources of Financing as Percentage of GDP, 2011-2022

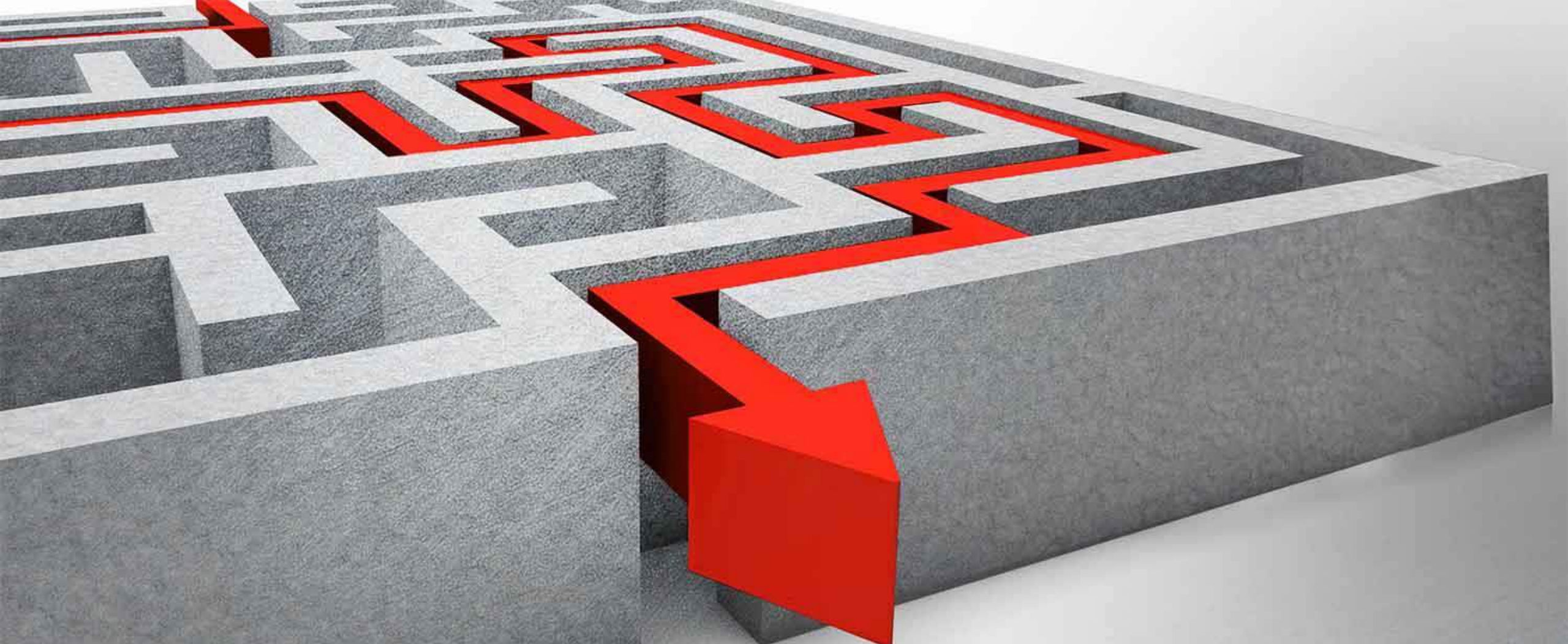
Year	Total GDP, Nominal (RM Million)*	PUBLIC SECTOR		PRIVATE SECTOR	
		RM Million	Public % GDP	RM Million	Private % GDP
2011	911,733	20,251	2.2%	15,702	1.7%
2012	971,252	22,007	2.3%	17,442	1.8%
2013	1,018,614	22,868	2.2%	18,780	1.8%
2014	1,106,443	25,921	2.3%	20,859	1.9%
2015	1,176,941	27,034	2.3%	23,222	2.0%
2016	1,249,698	26,754	2.1%	25,001	2.0%
2017	1,372,310	29,283	2.1%	27,121	2.0%
2018	1,447,760	31,444	2.2%	29,084	2.0%
2019	1,512,738	34,290	2.3%	30,046	2.0%
2020	1,418,491	36,603	2.6%	30,448	2.1%
2021	1,548,898	44,803	2.9%	32,900	2.1%
2022	1,791,358	41,257	2.3%	37,688	2.1%

* Source: Department of Statistics Malaysia

TEH by Sources of Financing, 2022

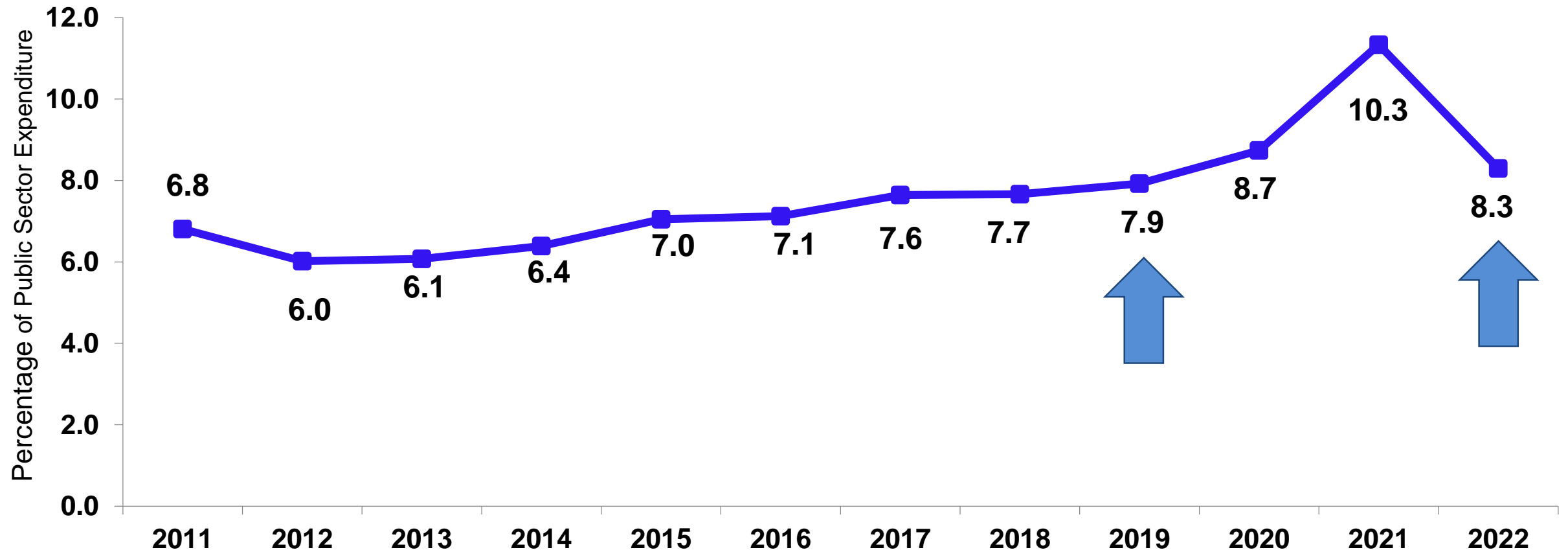


Sources of Financing	2021	2022
	RM Million	RM Million
Ministry of Health (MOH)	38,487	33,863 ↓ 12%
Private Household OOP	24,688	29,381 ↑ 19%
Private insurance	5,533	6,535
Other Federal Agencies	2,833	3,796
All Other Agencies	3,051	3,026
Ministry of Higher Education(MOHE)	1,721	1,807
Corporations	1,391	537
Total	77,703	78,945







**TEH 2011-2022
PUBLIC SOURCES OF
FINANCING**

Public Sector Health Expenditure (PSHE) as Percentage of Public Sector Expenditure (PSE), 2011-2022

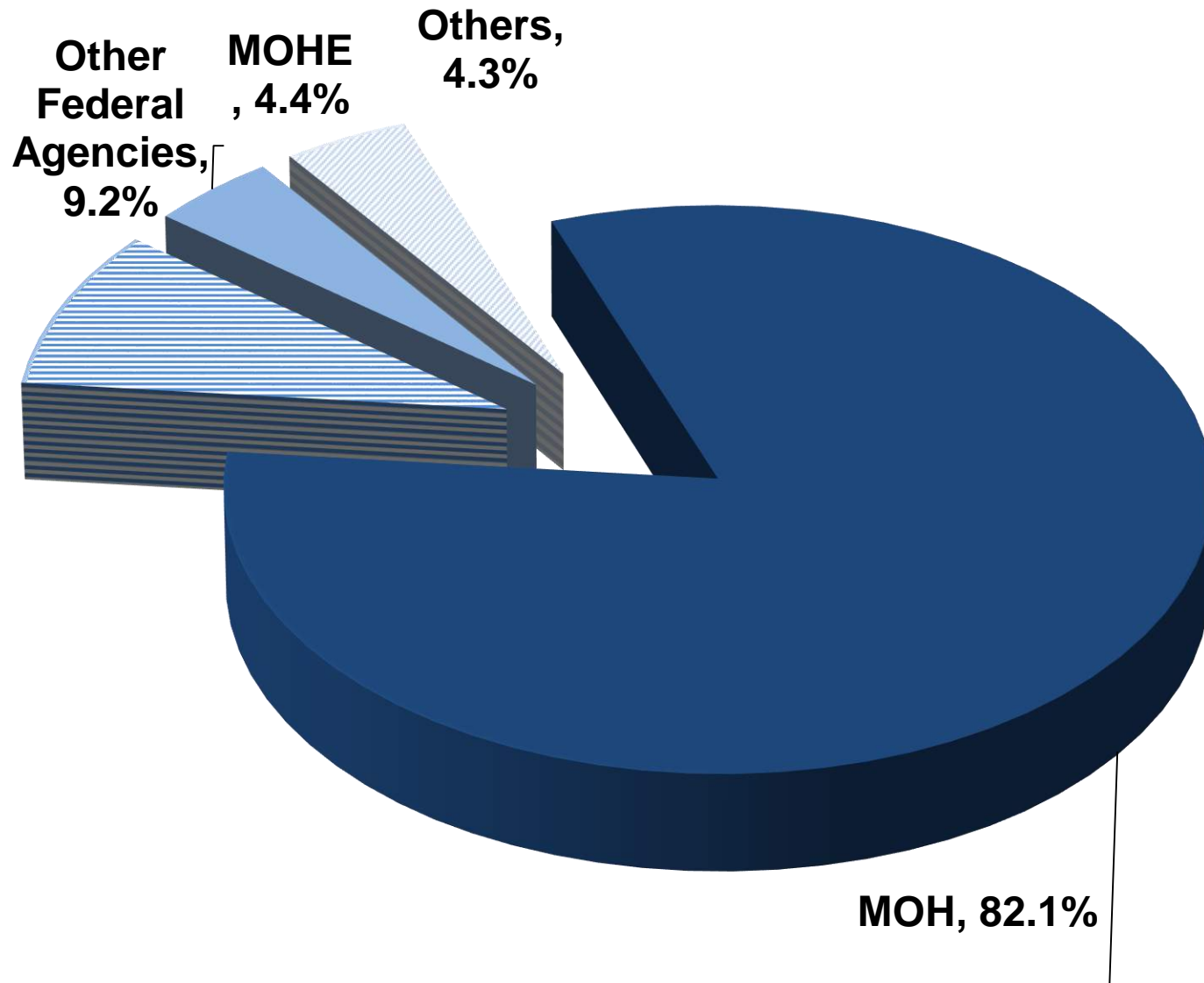


Public Sector Expenditure – Health vs General, 2011-2022

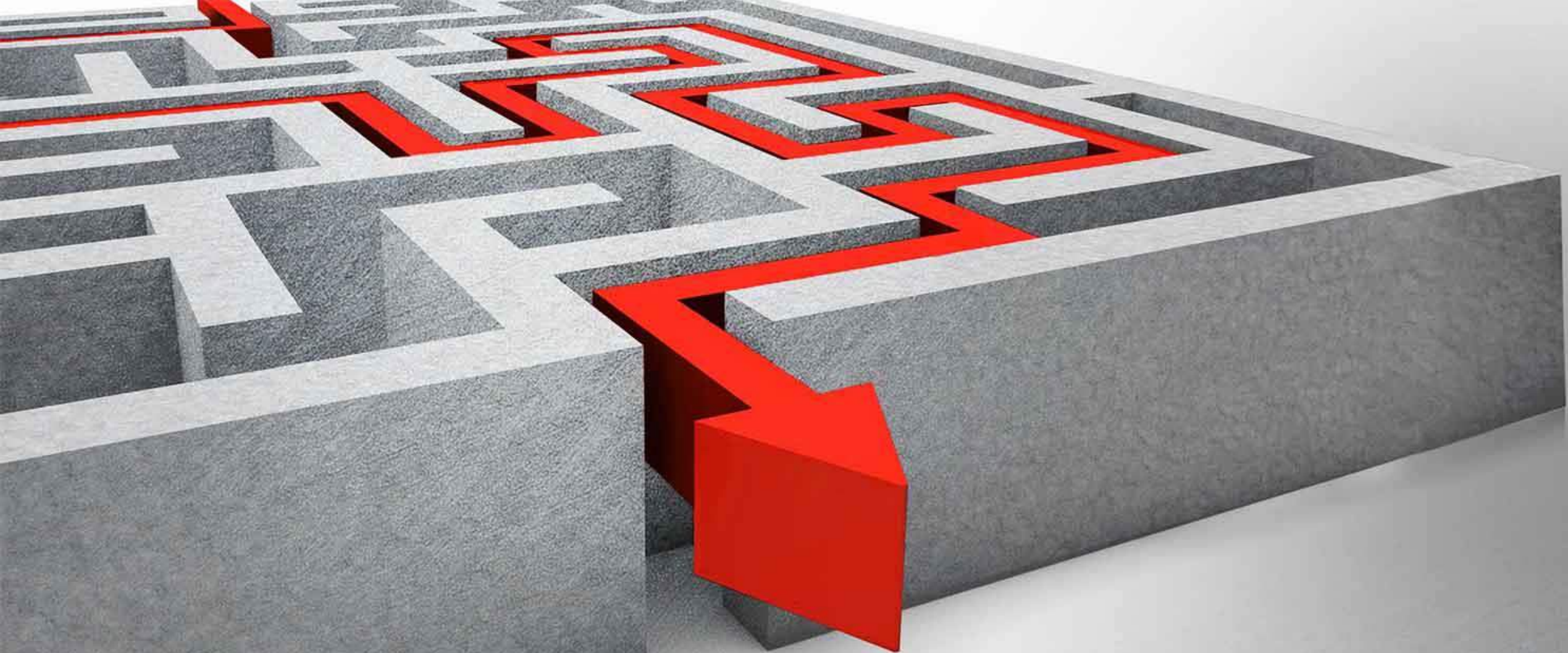
Year	PSHE (RM, Million)	PSE * (RM, Million)	PSHE as % PSE
2011	20,251	297,382	6.8
2012	22,007	365,600	6.0
2013	22,868	376,374	6.1
2014	25,921	405,788	6.4
2015	27,034	383,727	7.0
2016	26,754	375,489	7.1
2017	29,283	383,280	7.6
2018	31,444	410,482	7.7
2019	34,290	432,697	7.9
2020	36,603	418,949	8.7
2021	44,803  22%	433,056  3%	10.3
2022	41,257  8%	497,306  15%	8.3

* Source: Bank Negara Malaysia

Health Expenditure by Public Sources of Financing, 2022

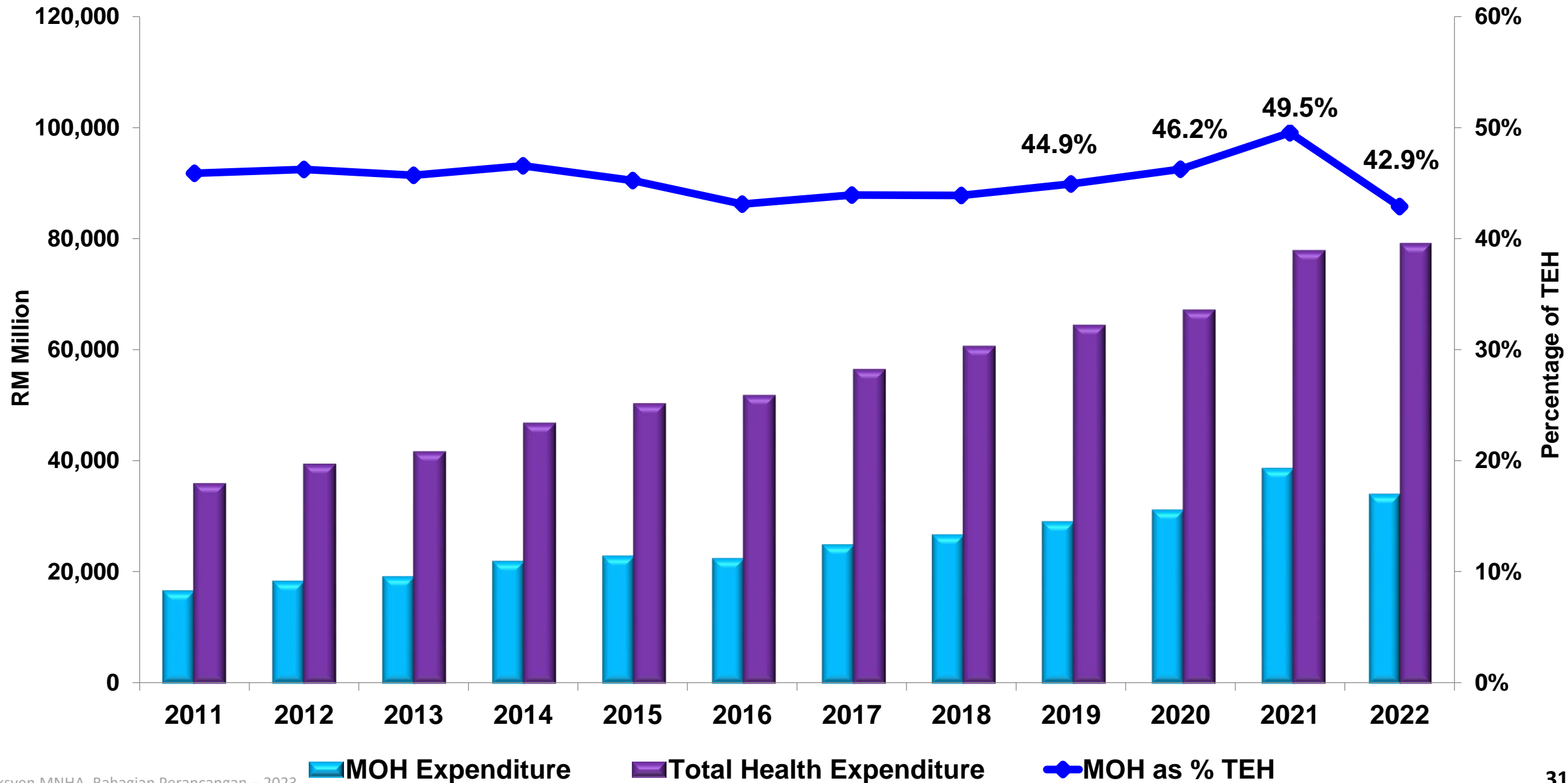


Public Sources of Financing	2021	2022
	RM Million	RM Million
Ministry of Health (MOH)	38,487	33,863 ↓ 12%
Other federal agencies	2,833	3,796 ↑ 34%
Ministry of Higher Education (MOHE)	1,721	1,807
All others	1,762	1,791
TOTAL	44,803	41,257



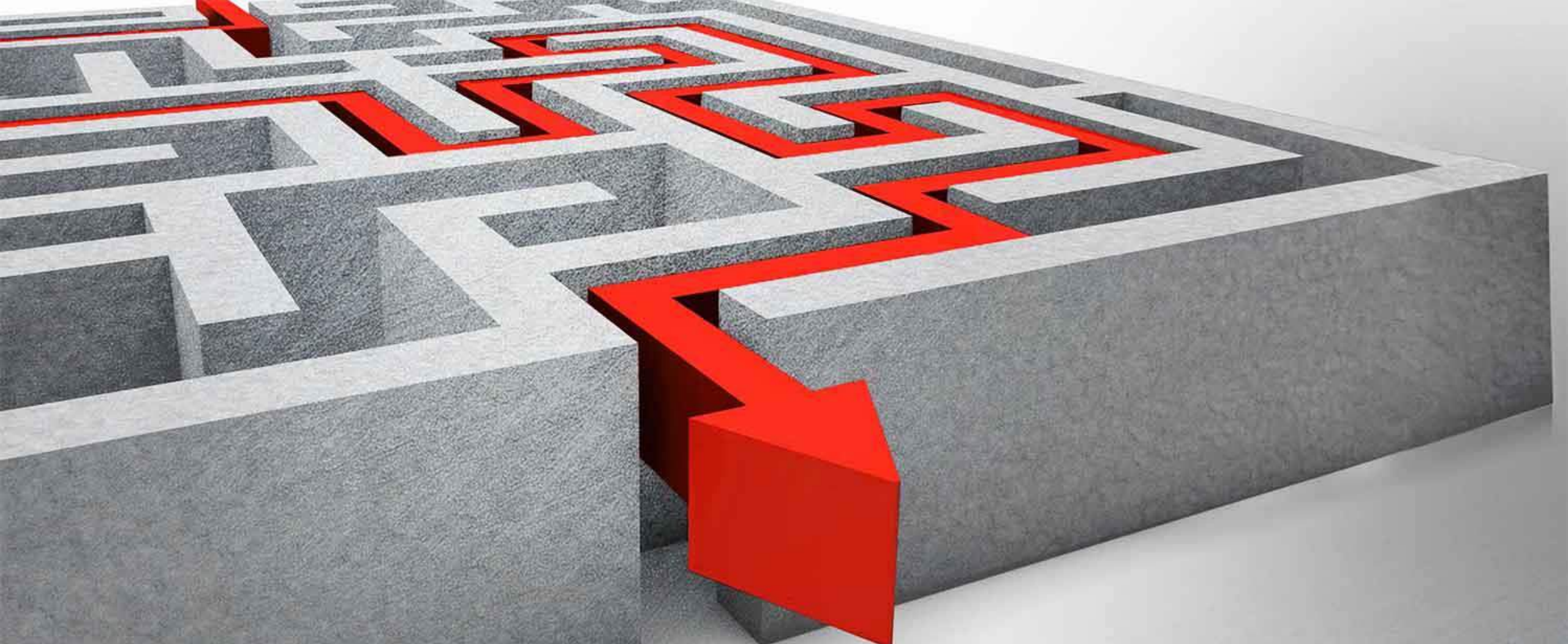
TEH 2011-2022
MINISTRY OF HEALTH

MOH Share of TEH, 2011-2022



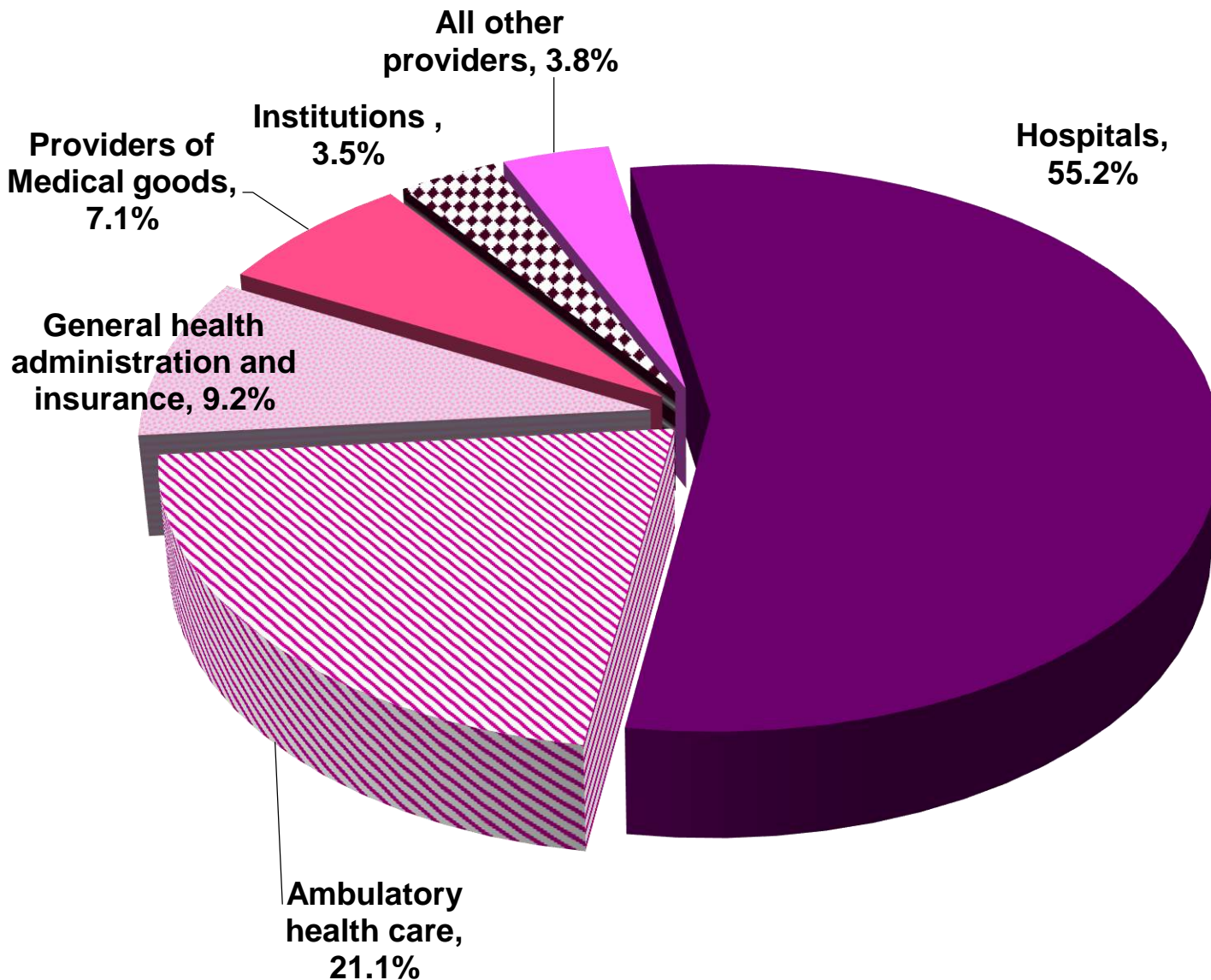
MOH Share of TEH, 2011-2022

Year	MOH Expenditure (RM Million)	Total Health Expenditure (RM Million)	MOH as % THE
2011	16,496	35,953	45.9%
2012	18,239	39,448	46.2%
2013	19,038	41,647	45.7%
2014	21,782	46,780	46.6%
2015	22,737	50,256	45.2%
2016	22,315	51,756	43.1%
2017	24,775	56,404	43.9%
2018	26,561	60,528	43.9%
2019	28,903	64,336	44.9%
2020	31,011	67,051	46.2%
2021	38,487	77,703	49.5%
2022	33,863	78,945	42.9%



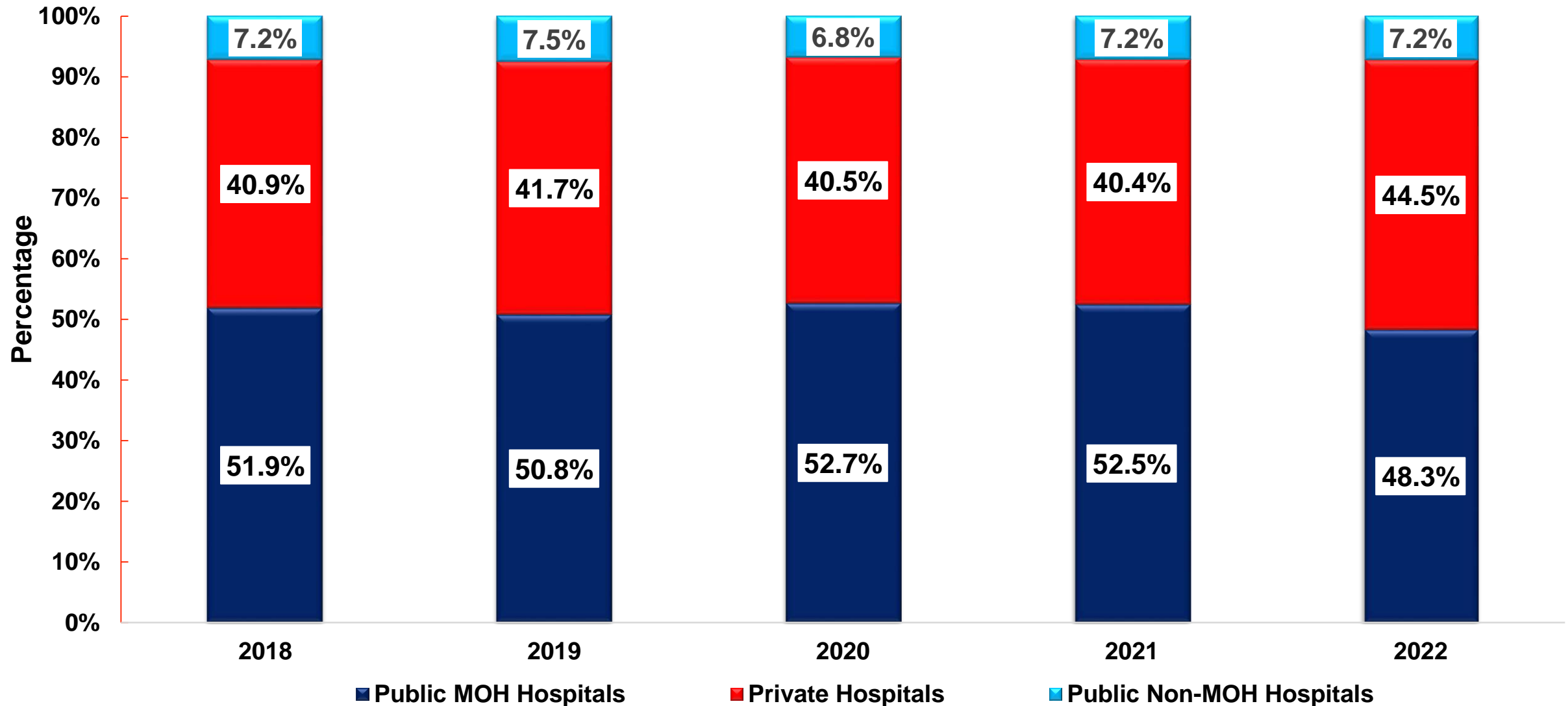
TEH 2011-2022 PROVIDERS OF HEALTH CARE

TEH to Providers of Healthcare, 2022



Providers of healthcare	2021	2022
	RM Million	RM Million
Hospitals	39,316	43,575 ↑ 11%
Ambulatory health care providers	19,618	16,676 ↓ 15%
General health administration & insurance providers	7,082	7,281
Medical goods providers	4,807	5,616 ↑ 17%
Institutions	3,052	2,775
All other providers	3,828	3,021
Total	77,703	78,945

Expenditure on Health to Hospitals Providers over 5 years, 2018-2022

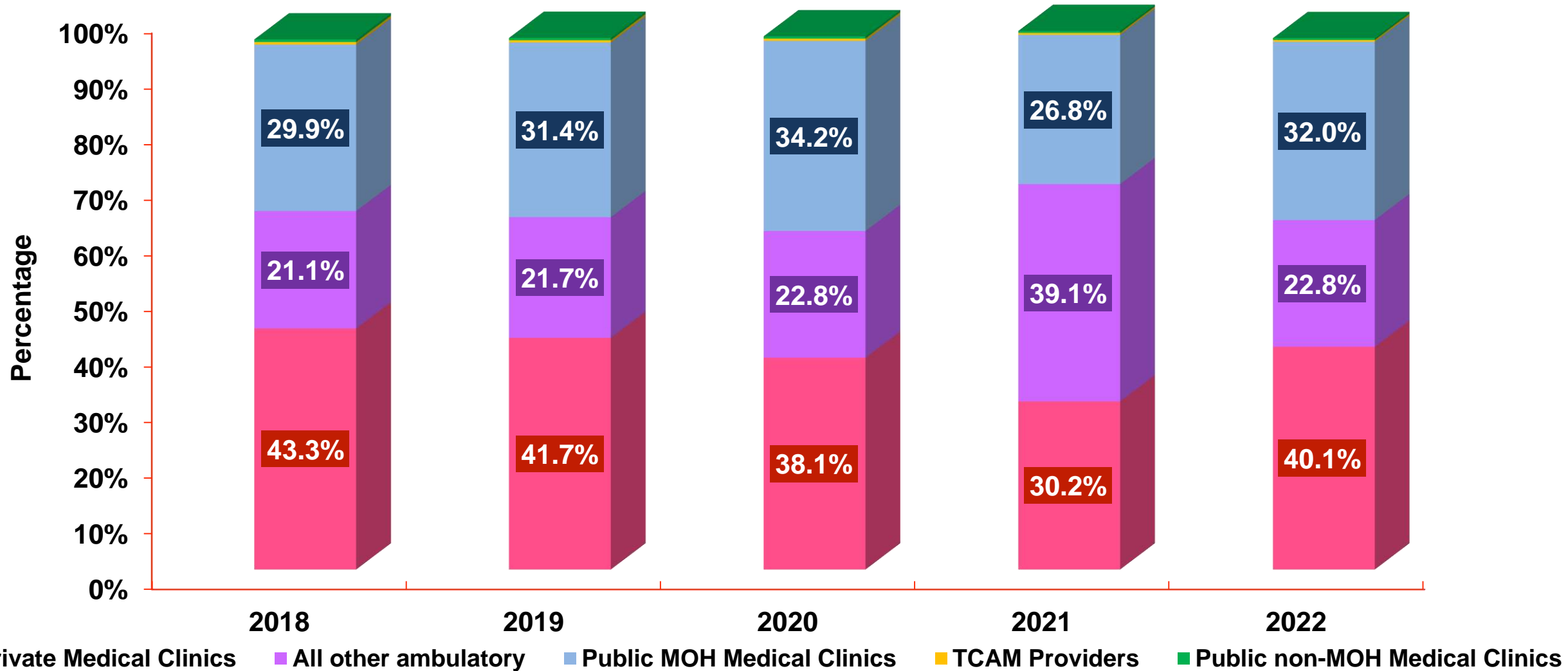


Expenditure on Health to Hospitals Providers over 5 years, 2018-2022 (RM million)

Hospitals Providers	Public MOH Hospitals	Private Hospitals	Public Non-MOH Hospitals	Total
2018	16,995	13,408	2,364	32,767
2019	18,110	14,883	2,681	35,675
2020	18,901	14,528	2,452	35,881
2021	20,623	15,876	2,817	39,316
2022	21,039	19,381	3,156	43,575

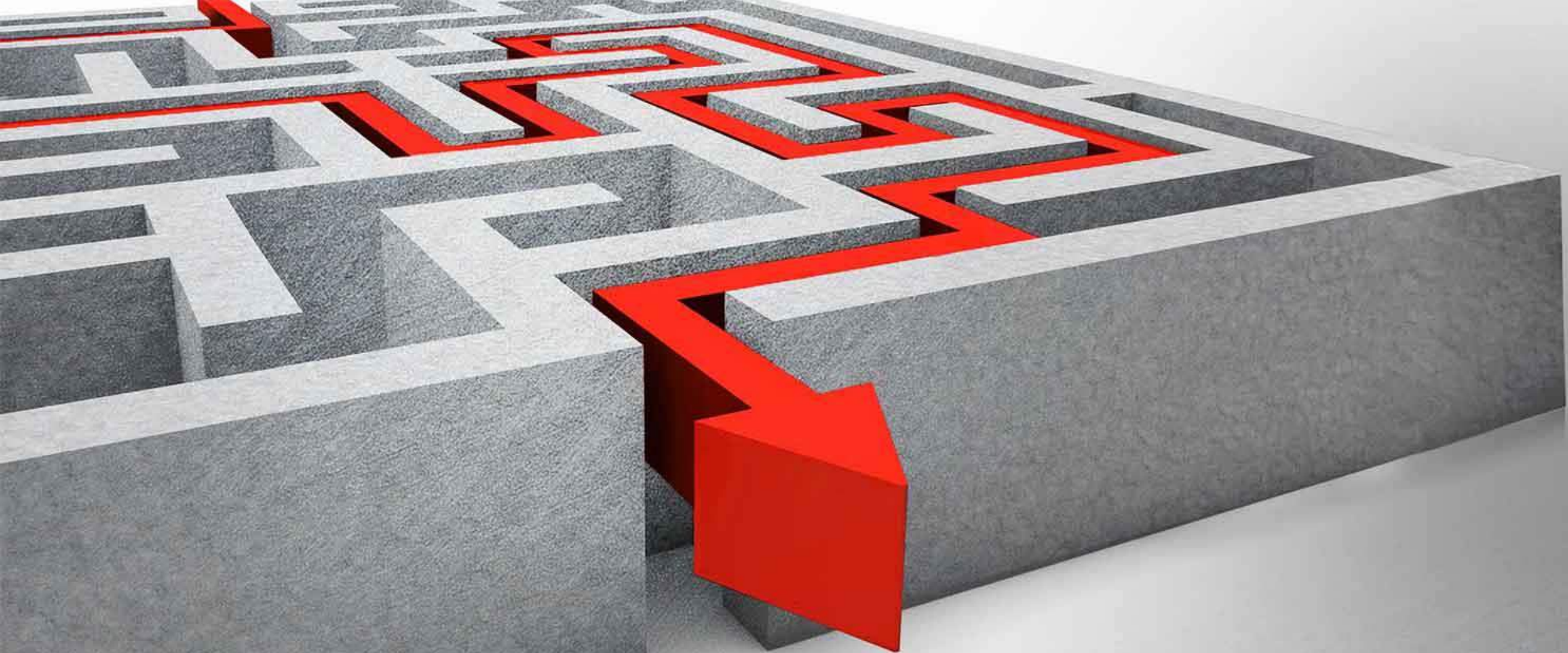
Expenditure on Health to Ambulatory Healthcare Providers* over 5 years, 2018-2022

*Comprises establishments primarily engaged in providing health care services directly to outpatients who do not require inpatient services



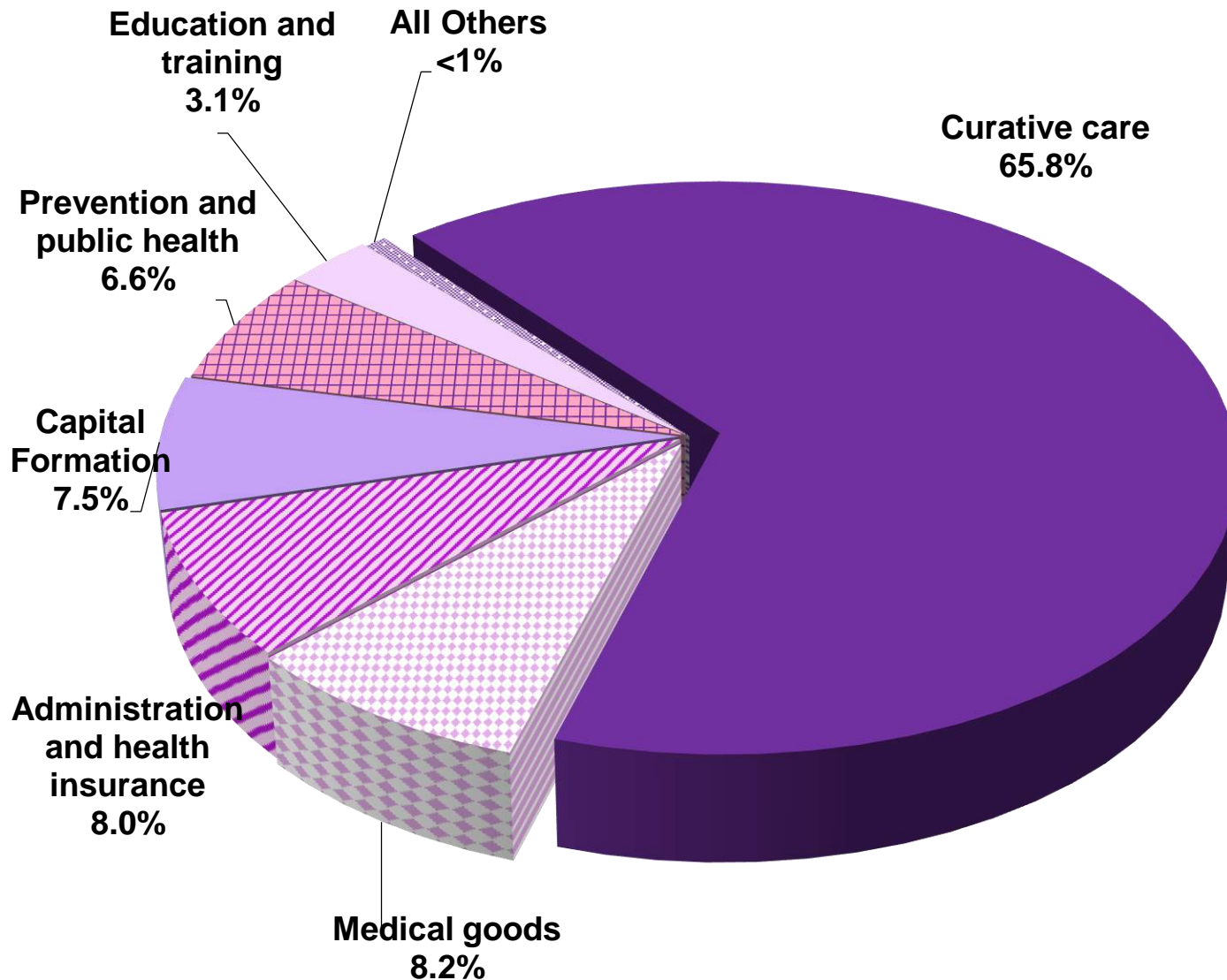
Expenditure on Health to Ambulatory Healthcare Providers over 5 years , 2018-2022 (RM Million)

Year	Private Medical Clinics	Public MOH Medical Clinics	Public non-MOH Medical Clinics	TCAM Providers	All other ambulatory	Total
2018	5,630	3,888	60	667	2,744	12,987
2019	5,775	4,355	57	667	3,010	13,864
2020	5,282	4,744	56	627	3,163	13,872
2021	5,930	5,266	68	686	7,667	19,618
2022	6,680	5,345	55	795	3,802	16,676



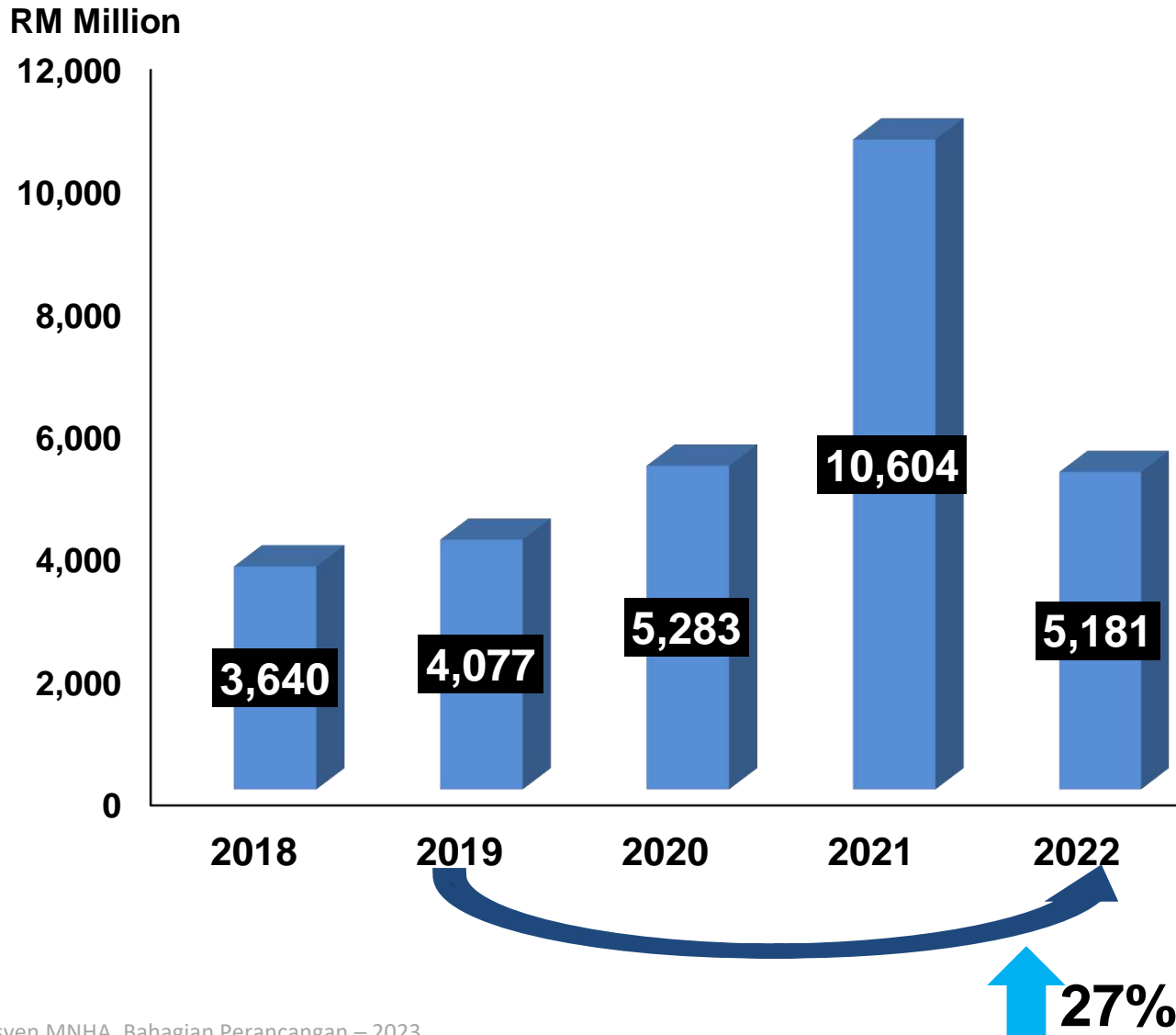
TEH 2011-2022 FUNCTIONS OF HEALTH CARE

TEH for Functions of Healthcare, 2022



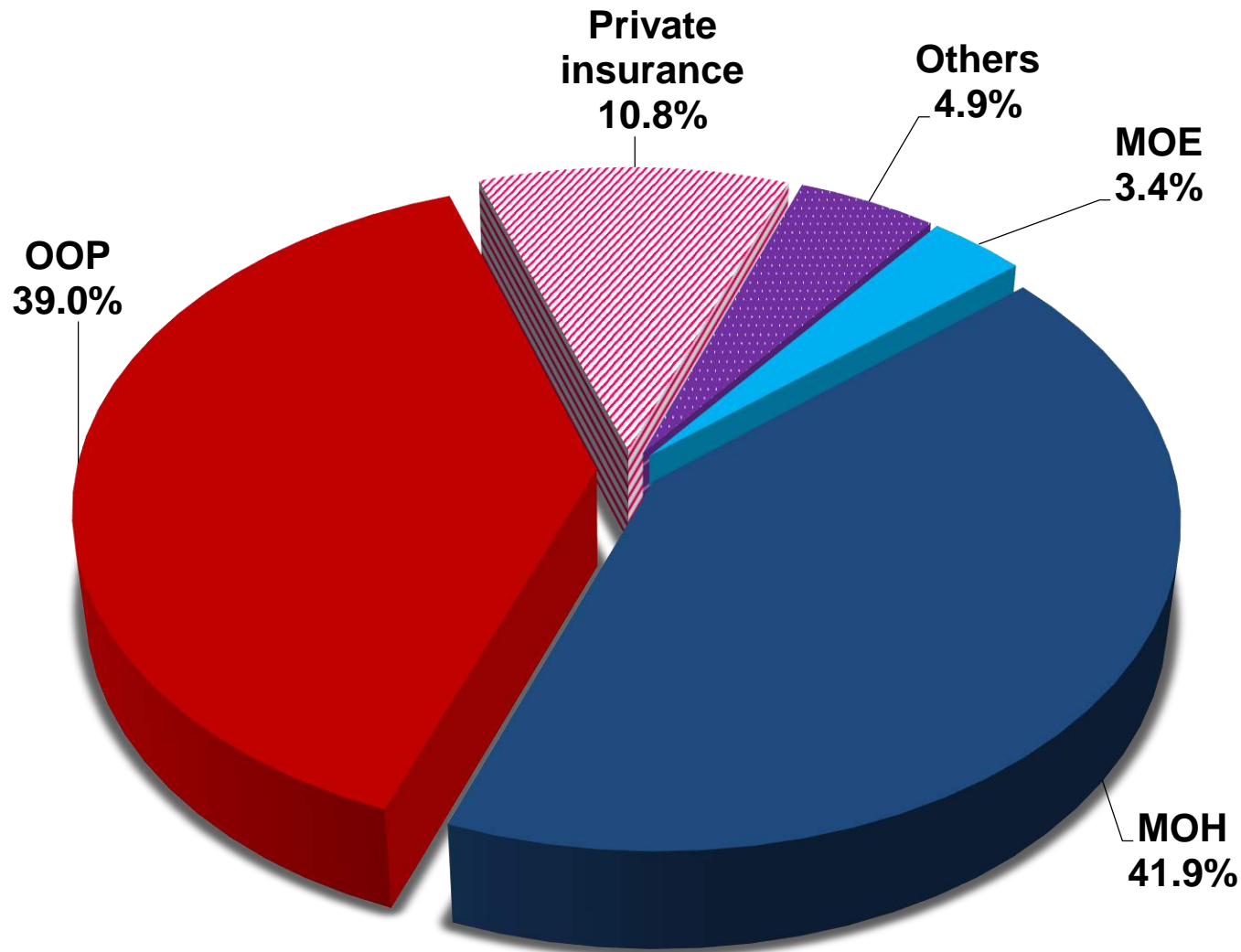
Functions of Health care	2021	2022
	RM Million	RM Million
Curative care	45,287	51,930 ↑15%
Medical goods	5,565	6,502 ↑17%
Administration and health insurance	6,424	6,351
Capital formation	6,919	5,912
Prevention and public health	10,604	5,181 ↓50%
Education and training	2,319	2,465
All Other Functions	585	604
Total	77,703	78,945

Preventive Care Expenditure over 5 years, 2018-2022

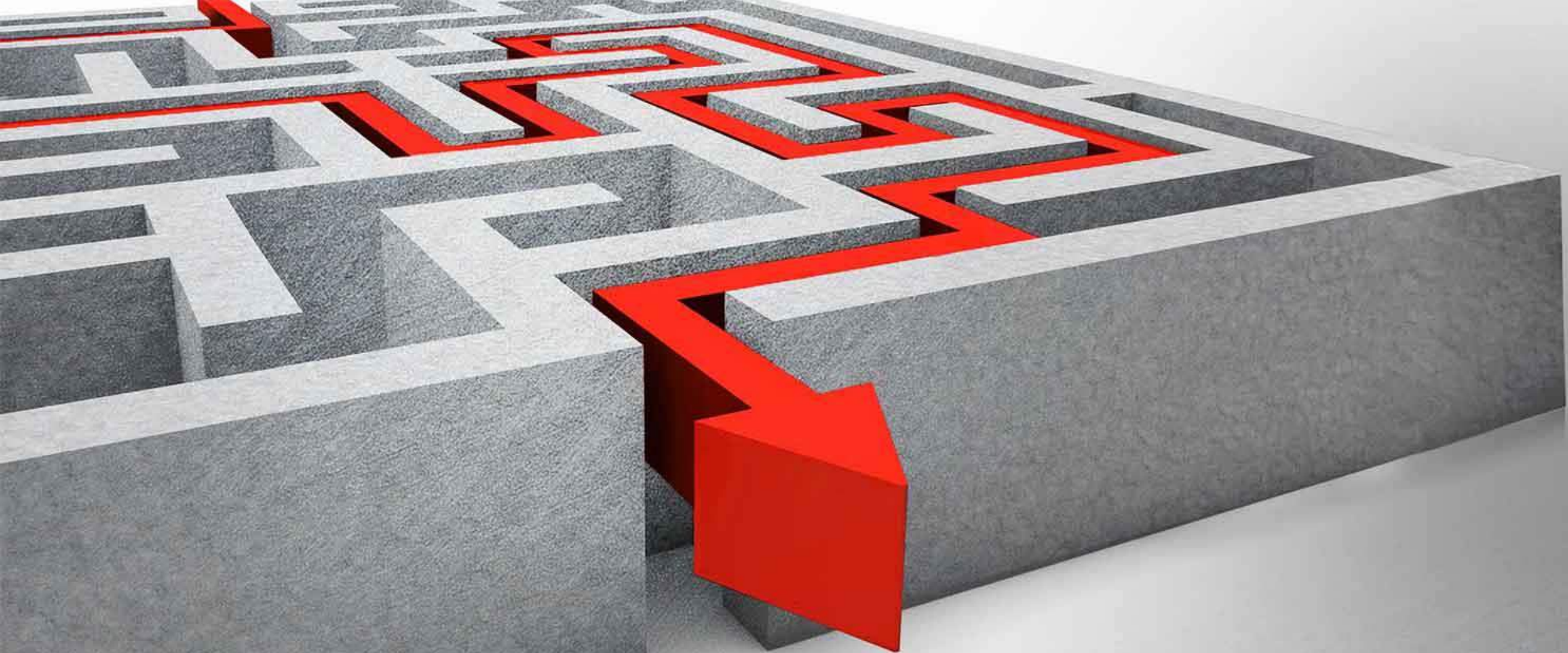


Year	Preventive care expenditure (RM Million)	Percent of TEH
2018	3,640	6.0%
2019	4,077	6.3%
2020	5,283	7.9%
2021	10,604	13.6%
2022	5,181	6.6%

Curative Care by Sources of Financing, 2022



Sources of financing for Curative Care	2021	2022
	RM Million	RM Million
Ministry of Health (MOH)	19,926	21,747 ↑ 9%
Out-of-pocket (OOP)	16,613	20,259 ↑ 22%
Private insurance	4,191	5,629 ↑ 34%
Ministry of Education (MOE)	1,692	1,766
Others	2,865	2,528
Total	45,287	51,930



OUT-OF-POCKET HEALTH EXPENDITURE- METHODOLOGY

Introduction

Health expenditure reflects the government as well as household capacity and willingness to spend on health

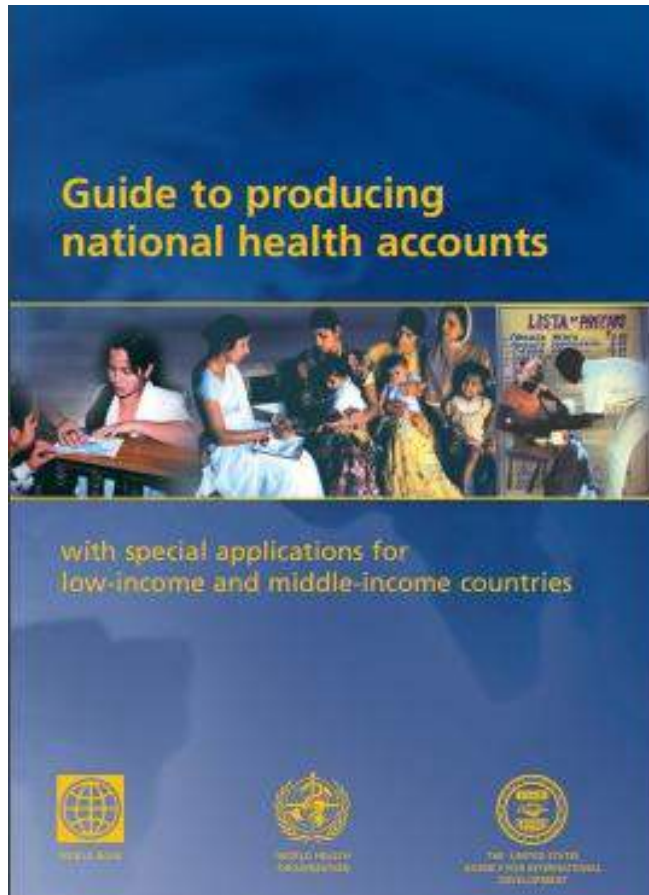
National health expenditure can be separated by public and private spending.

Government expenditure on health includes central and local governments' spending from general taxation, payroll taxes etc.

Private health expenditure in most countries is dominated by out-of-pocket payments

By tracking national out-of-pocket health expenditure, policymakers, researchers, and public health officials can gain insights into the affordability and accessibility of healthcare services within a country.

Definition



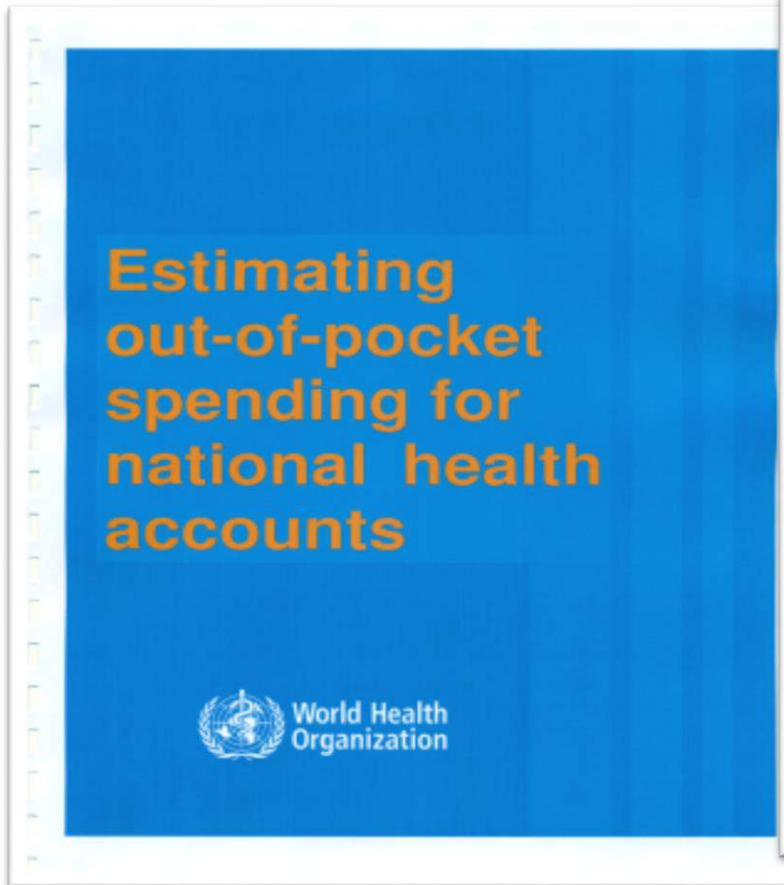
OOP health expenditures

- Spending made by individuals for their own or another individual, who could be a family or a household member,
- For the purchases of health care services or products
- Without the benefit of insurance or third-party reimbursement.

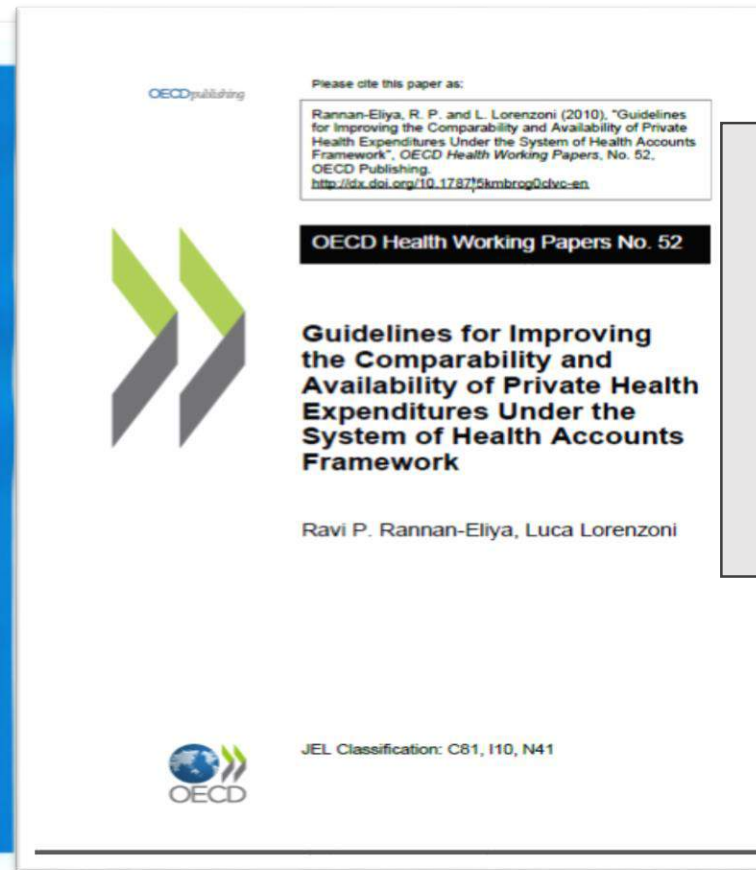
MNHA under the Planning Division of the Ministry of Health (MOH)

- Uses the **Integrative Approach** when estimating the national OOP health expenditure
- Guided by the internationally accepted NHA framework and guidelines
- Method has been validated by WHO consultants.

OOP Estimation International Reference



WHO, Geneva, 2010



OECD Health Working Papers, No. 52, 2010

There are several methods to estimate OOP Expenditure

MNHA OOP Estimation

Four potential approaches has been identified from the 2010 WHO document , titled “Estimating Out-Of-Pocket Spending for National Health Accounts”

1. Financing perspective

- Estimations using data from the financing sources e.g., Private health insurance schemes, household surveys

2. Provider perspective

- Estimations using data from the providers e.g., industry survey of hospitals and pharmacies, administrative data of providers, tax claims of physicians, etc.

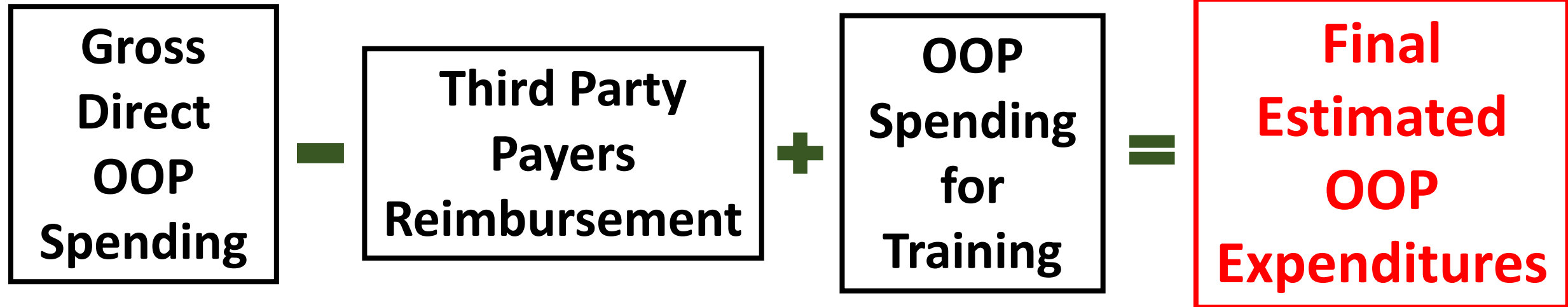
3. Consumer perspective

- Estimations using data obtained on the consumption of services e.g., composition of household spending on particular goods or services, survey data on the distribution of providers providing a particular service to household

4. Integrative approach

- Combination of first two or three approaches with necessary adjustments

MNHA OOP Estimation



Third Party Payer Reimbursement

- Estimating OOP health expenditure becomes challenging when reimbursement occurs.
- Reimbursement can occur through multiple channels.
- This reimbursed expenses if reported as OOP pose a risk of overestimation.
- To mitigate this, the recommended best practice is to conduct third-party deduction (TPD) during analysis.



Employer Provident Fund (EPF)



Private Insurance Enterprises



Private Corporations



State Statutory Agencies

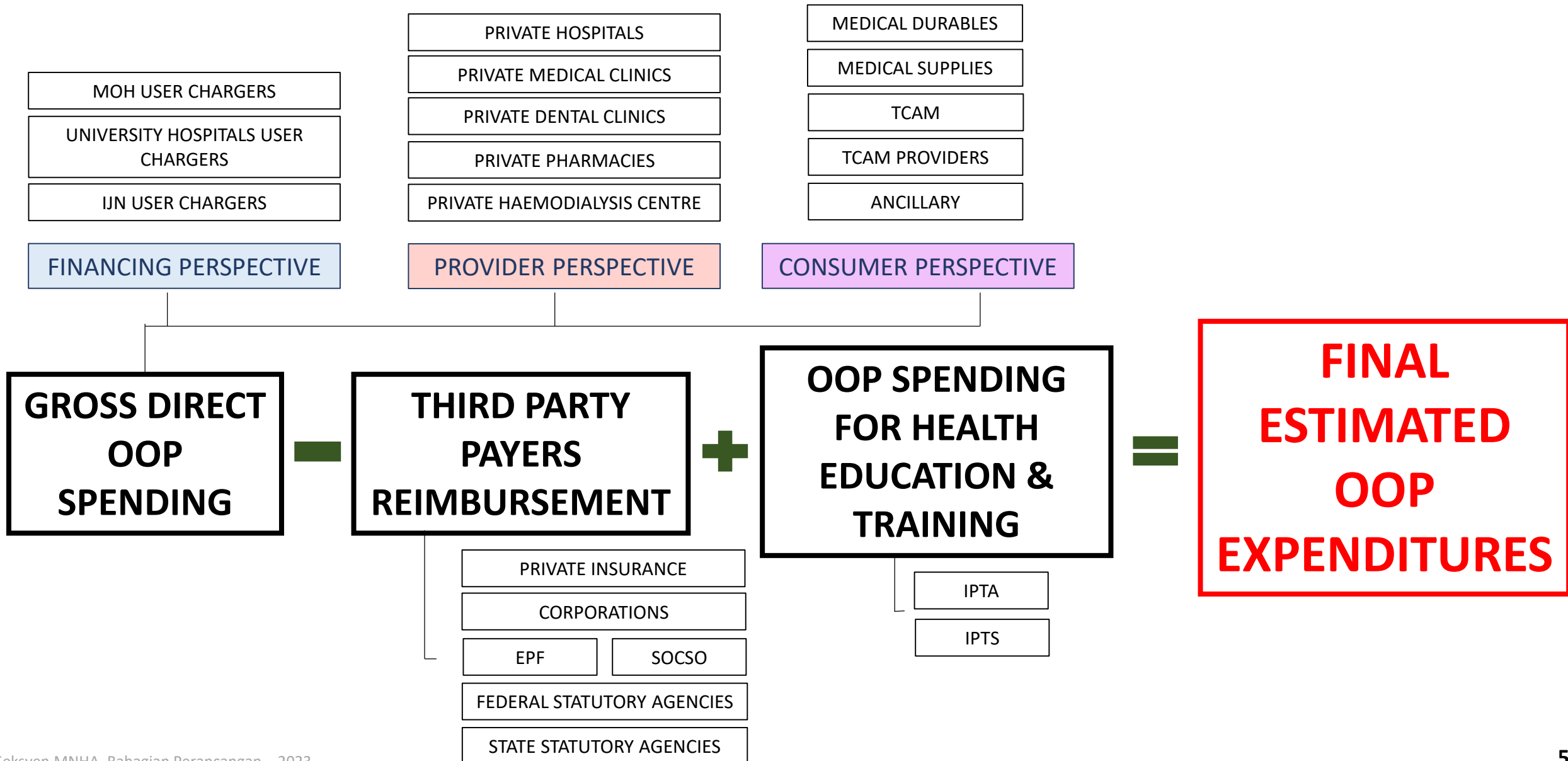


Federal Statutory Agencies



Social Security Organization (SOCSSO)

Overall MNHA OOP Estimation

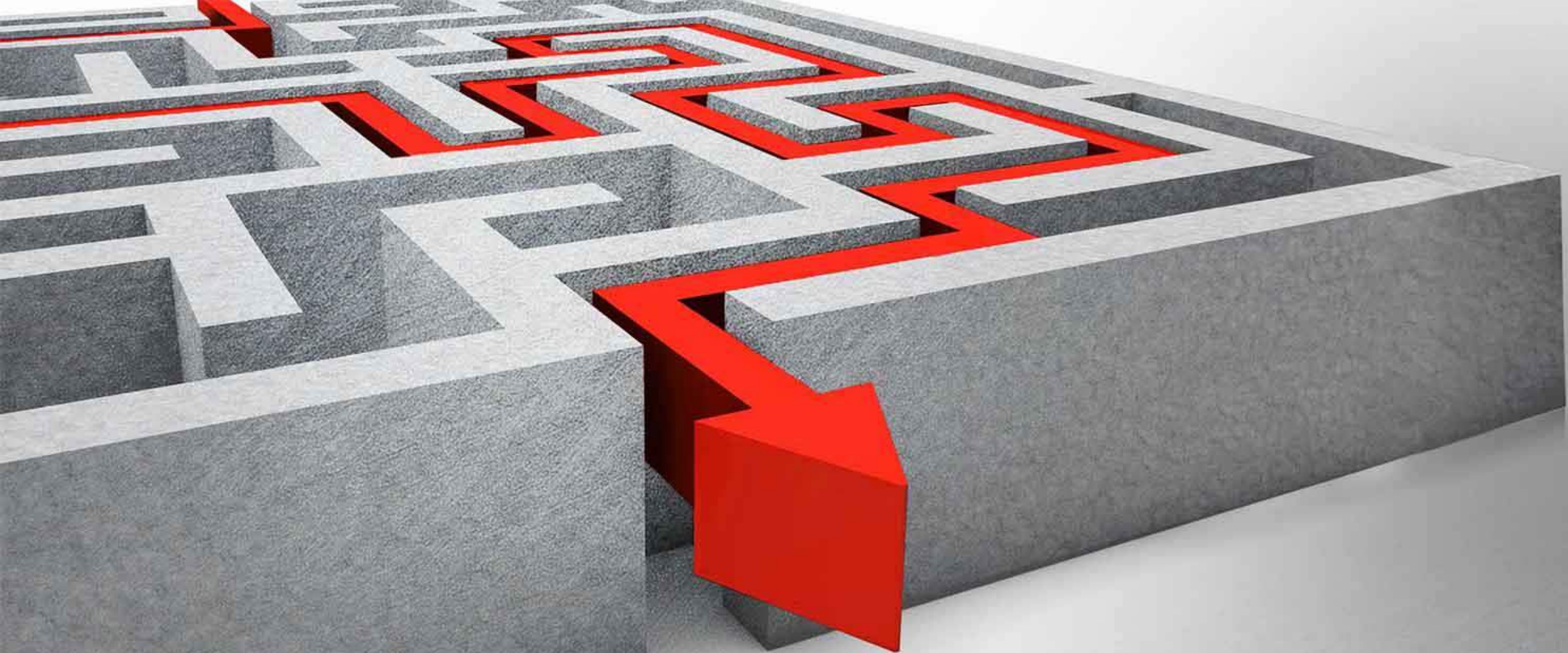


Gross Direct OOP Expenditures – Data Sources (1)

Data sources for Gross OOP Expenditure		Purposes
MNHA Surveys	MNHA National Heart Institute Survey	<ul style="list-style-type: none"> National Heart Institute User Chargers
	MNHA University Hospital Survey	<ul style="list-style-type: none"> University Hospital User Chargers
	MNHA Private Hospital Survey	<ul style="list-style-type: none"> Relevant statistics for mapping function in Private Hospitals
	MNHA Private Haemodialysis Centre Survey	<ul style="list-style-type: none"> Private haemodialysis centre - relevant statistics for mapping function
	MNHA FOMEMA Survey	<ul style="list-style-type: none"> FOMEMA expenditure in private clinic estimation
Accountant General MOH data		<ul style="list-style-type: none"> MOH Facility User Chargers
IQVIA Malaysia Sdn. Bhd. (formerly IMS)		<ul style="list-style-type: none"> Total pharmaceutical expenditure
Pharmacy Services Division, MOH data		<ul style="list-style-type: none"> Relevant allocation statistics for pharmacy centres

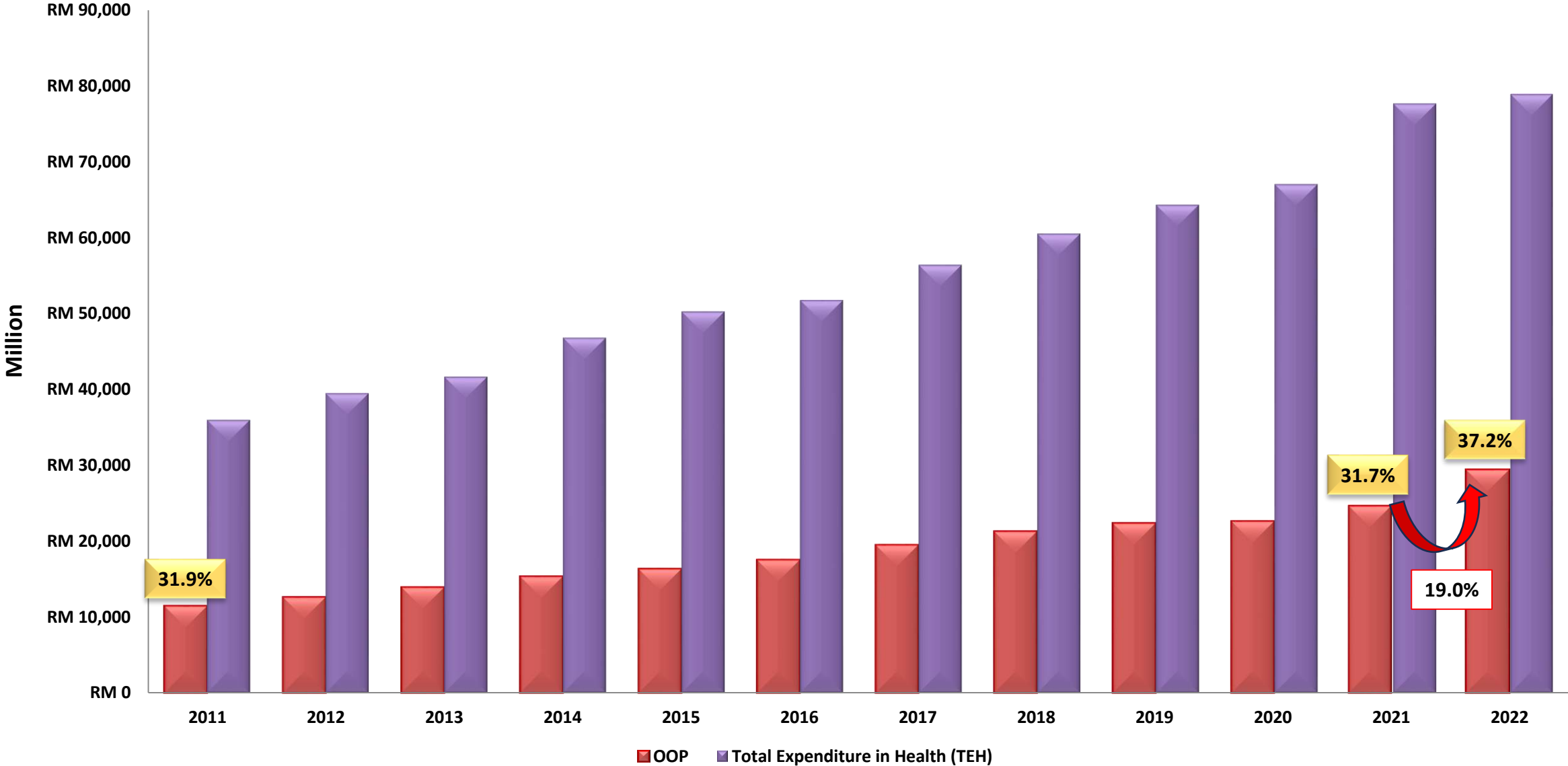
Gross Direct OOP Expenditures – Data Sources (2)

Data sources for Gross OOP Expenditure		Purposes
Department of Statistics (DOSM) (aggregated data)	National Economic Census (formerly Professional & Industrial (PNI) Survey)	<ul style="list-style-type: none"> • Private hospital revenue • Private medical clinic revenue • Private dental clinic revenue • State proportion for private hospitals • Relevant statistics & state proportion for private medical clinic • Relevant statistics & state proportion for private dental clinic
	Economic Indicators (GDP, GDP Deflators)	<ul style="list-style-type: none"> • Base indicators during Interpolation and extrapolation (log linear) imputation technique for missing data
	Household Expenditure Survey (HES)	<ul style="list-style-type: none"> • Relevant statistics for Medical Supplies Expenditure Estimation • Relevant statistics for Medical Durables / Prosthesis / Equipment Expenditure Estimation • Relevant statistics for Ancillary Services Expenditure Estimation • Relevant statistics for Traditional Medicine Expenditure Estimation • Relevant statistics for Traditional Treatment Provider Expenditure Estimation



**OUT-OF-POCKET
HEALTH EXPENDITURE-
RESULT**

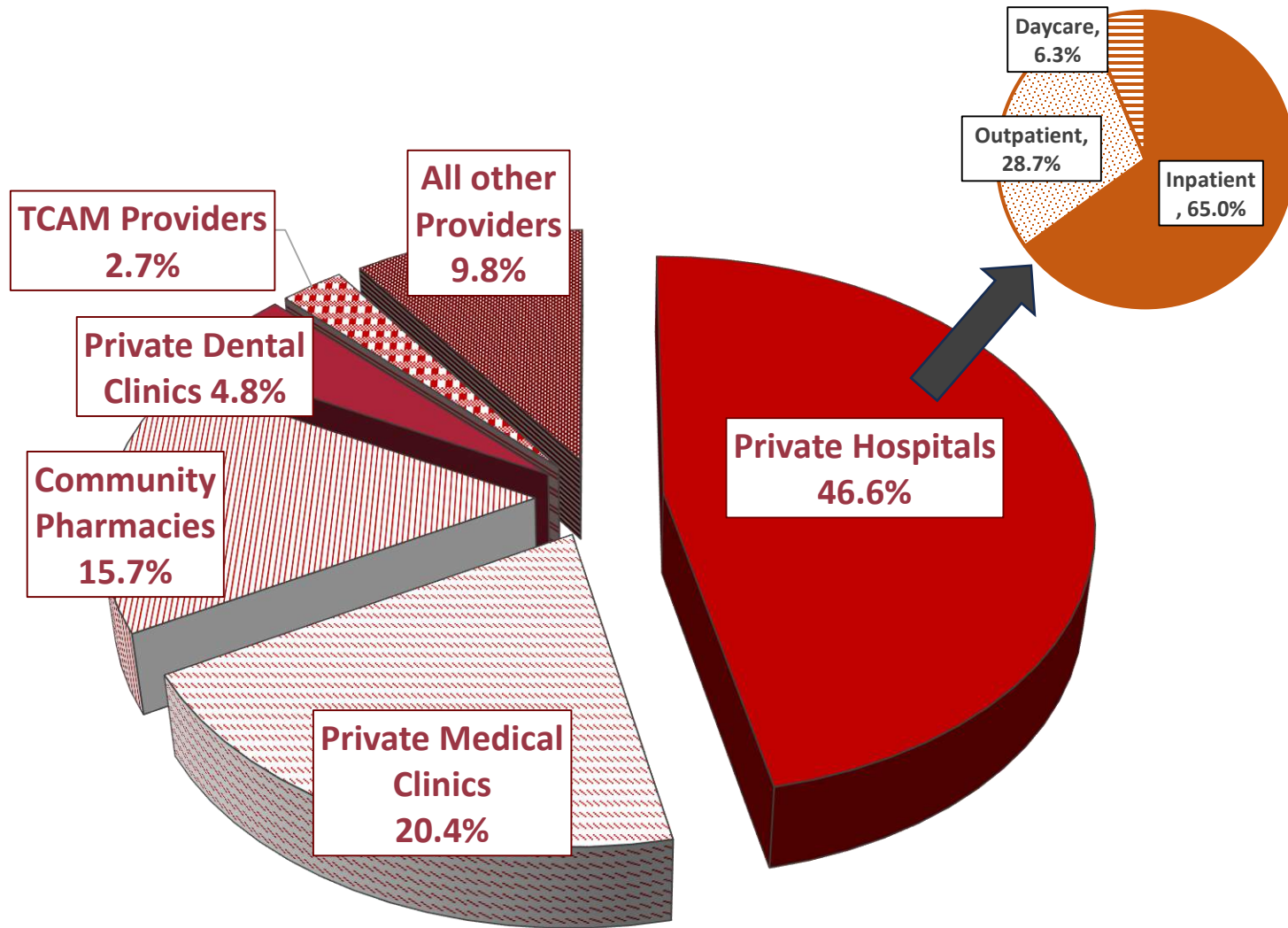
OOP Share of Total Expenditure in Health (TEH) 2011-2022



OOP Share of Total Expenditure in Health (TEH) 2011-2022

Year	OOP Health Expenditure (RM Million)	Total GDP (RM Million)	OOP as % GDP	TEH (RM Million)	OOP as % TEH
2011	11,466	911,733	1.26	35,953	31.9
2012	12,649	971,252	1.30	39,448	32.1
2013	13,933	1,018,614	1.37	41,647	33.5
2014	15,373	1,106,443	1.39	46,780	32.9
2015	16,349	1,176,941	1.39	50,256	32.5
2016	17,555	1,249,698	1.40	51,756	33.9
2017	19,518	1,372,310	1.42	56,404	34.6
2018	21,302	1,447,760	1.47	60,528	35.2
2019	22,382	1,512,738	1.48	64,336	34.8
2020	22,648	1,418,491	1.60	67,051	33.8
2021	24,688	1,548,898	1.59	77,703	31.7
2022	29,381	1,791,358	1.64	78,945	37.2

OOP Expenditure to Providers of Healthcare, 2022

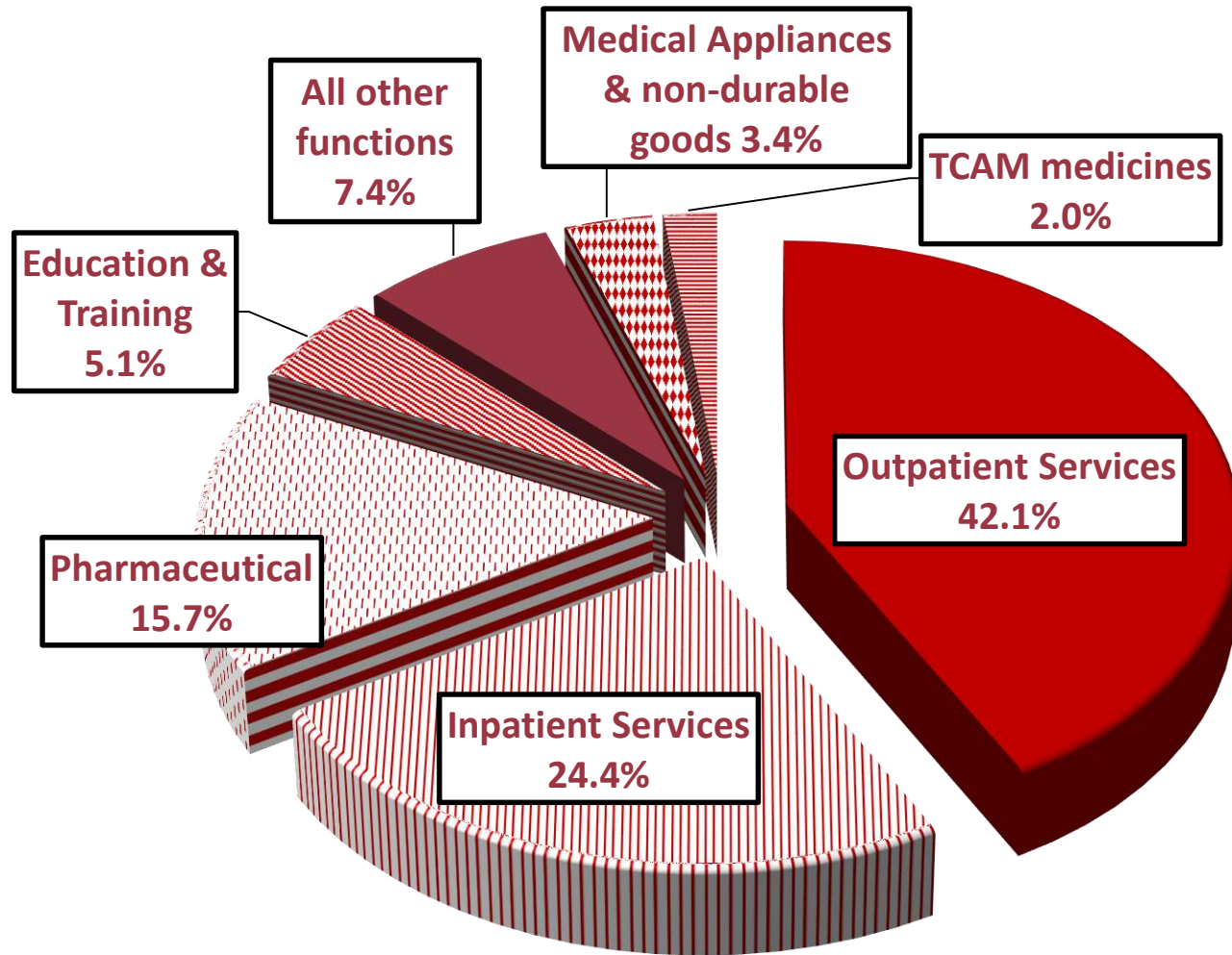


Providers of Healthcare	2021	2022
	RM Million	RM Million
Private Hospitals	11,436	13,696
Private Medical Clinics	4,782	5,995
Community Pharmacies	3,955	4,599
All other providers	2,622	2,880
Private Dental Clinics	1,207	1,416
TCAM Providers	686	795
Total	24,688	29,381

OOP Expenditure to Providers of Healthcare, 2011-2022 (RM Million)

Year	Private Hospitals	Private Medical Clinics	Community Pharmacies	Private Dental Clinics	TCAM Providers	All other providers	Total
2011	5,359	2,272	1,407	509	394	1,526	11,466
2012	5,613	2,654	1,580	560	412	1,830	12,649
2013	5,736	3,055	1,842	592	424	2,284	13,933
2014	6,034	3,767	2,360	646	452	2,115	15,373
2015	6,801	3,237	2,625	851	534	2,301	16,349
2016	7,411	3,308	2,749	914	624	2,550	17,555
2017	8,512	3,804	2,922	1,017	658	2,605	19,518
2018	9,216	4,011	3,734	1,086	667	2,590	21,302
2019	10,093	4,487	3,292	1,152	667	2,690	22,382
2020	10,265	4,474	3,392	1,096	627	2,795	22,648
2021	11,436	4,782	3,955	1,207	686	2,622	24,688
2022	13,696	5,995	4,599	1,416	795	2,880	29,381

OOP Expenditure for Functions of Healthcare, 2022

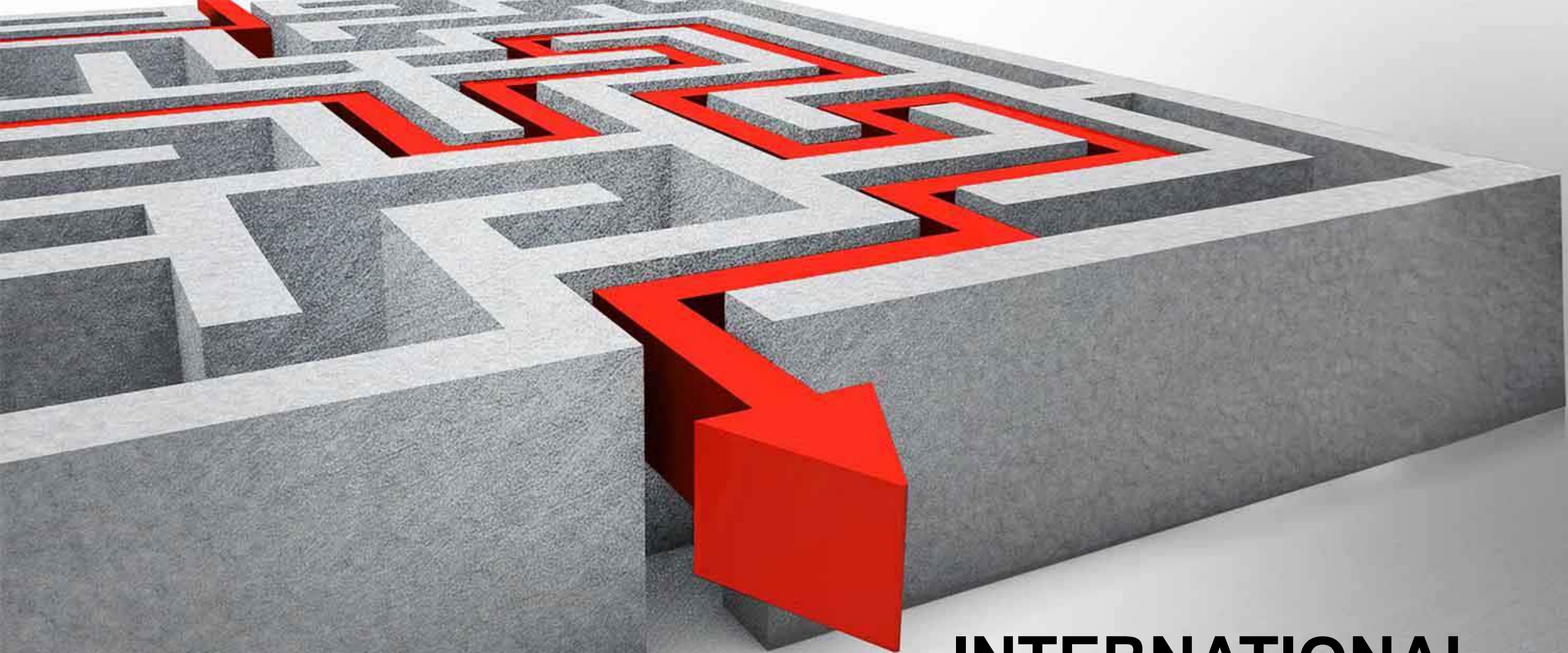


Functions of Healthcare	2021	2022
	RM Million	RM Million
Outpatient Services	10,177	12,364
Inpatient Services	5,846	7,158
Pharmaceutical	3,955	4,599
Education & Training	1,368	1,498
All other functions	1,974	2,175
Med Appliances & non-durable goods	849	985
TCAM medicines	519	601
Total	24,688	29,381

OOP Expenditure for Functions of Healthcare, 2011-2022

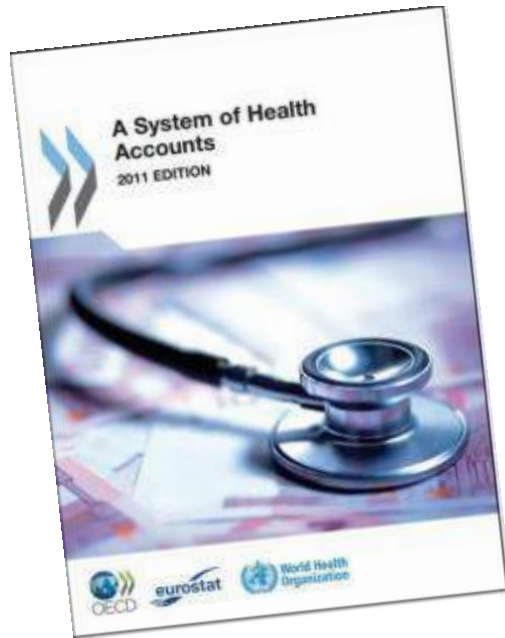
(RM Million)

Year	Outpatient Services	Inpatient Services	Pharmaceutical	Medical Appliances & Non-durable goods	TCAM medicines	Education & Training	All other functions	Total
2011	5,145	2,786	1,407	384	298	789	657	11,466
2012	5,709	2,831	1,580	394	310	1,066	760	12,649
2013	6,206	2,976	1,842	398	317	1,424	770	13,933
2014	7,067	3,056	2,360	413	335	1,244	898	15,373
2015	6,922	3,454	2,625	599	407	1,325	1,016	16,349
2016	7,171	3,866	2,749	712	489	1,427	1,141	17,555
2017	8,137	4,458	2,922	771	513	1,452	1,265	19,518
2018	8,621	4,484	3,734	801	513	1,451	1,698	21,302
2019	9,406	4,897	3,292	824	507	1,491	1,964	22,382
2020	9,269	5,181	3,392	776	476	1,558	1,977	22,648
2021	10,177	5,846	3,955	849	519	1,368	1,974	24,688
2022	12,364	7,158	4,599	985	601	1,498	2,175	29,381



INTERNATIONAL DATA OF HEALTH ACCOUNTS

Introduction – System of Health Accounts (SHA) 2011



SHA 2011 Framework

Internationally recognized methodology

Tracks all health spending in a given country over a defined period of time

Ensures comparability of health expenditure across countries and over time

Purpose

To provide a framework for international comparisons of health expenditures and health systems analysis using harmonized boundaries

To provide a tool, expandable by any country, which can produce useful data in the monitoring and analysis of the health system

WHO-GHED

- It is important to recognize that every member country, like Malaysia, may produce their own NHA reporting based on local needs.
- As such MNHA Framework with different boundaries of definitions is more important in the national context especially for policy makers, researchers and other interested parties.
- Malaysia submits data to GHED annually based on SHA framework.

WHO uploads NHA data onto GHED database as the international health expenditure data of the member countries.

These WHO estimations for member countries allow standardization in NHA reporting and ensure better cross-country comparability.

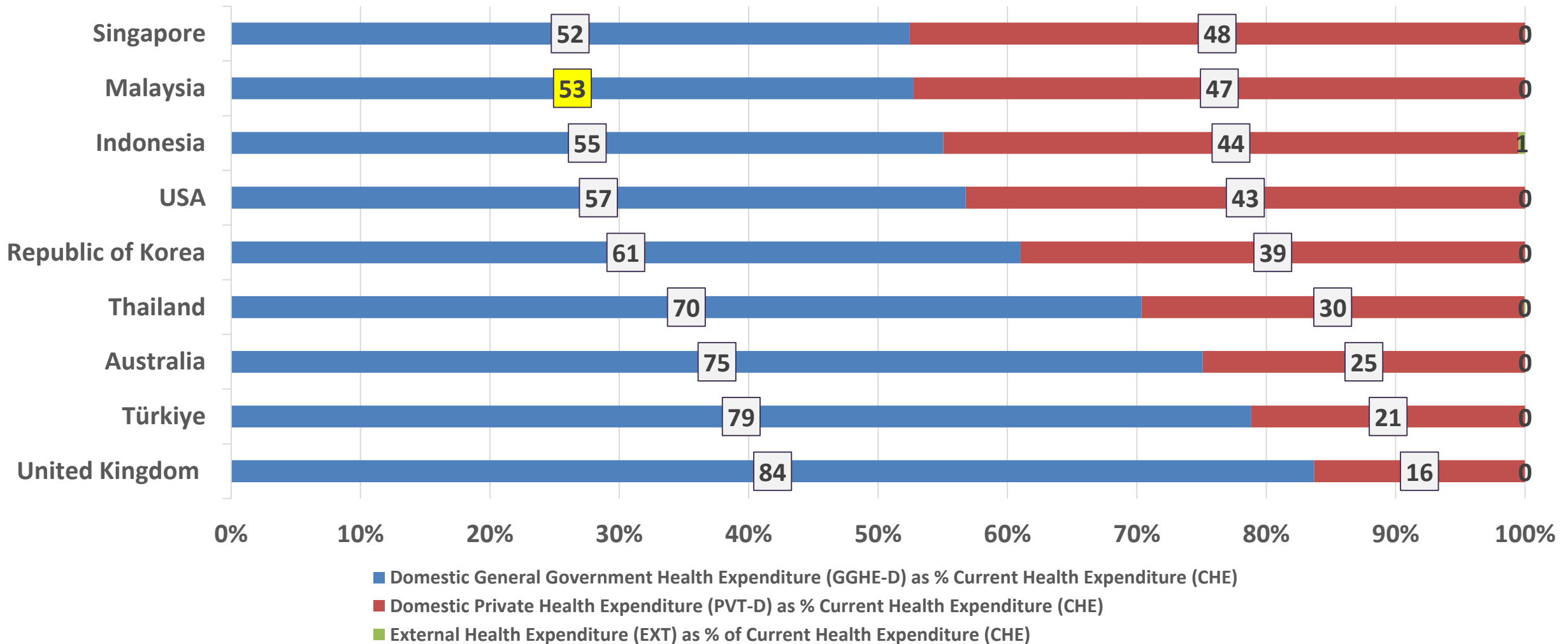
Current Health Expenditure (CHE) as % of GDP, 2020

Selected Country Comparison*



Source: International data from Global Health Expenditure Database, WHO NHA Oct 2023

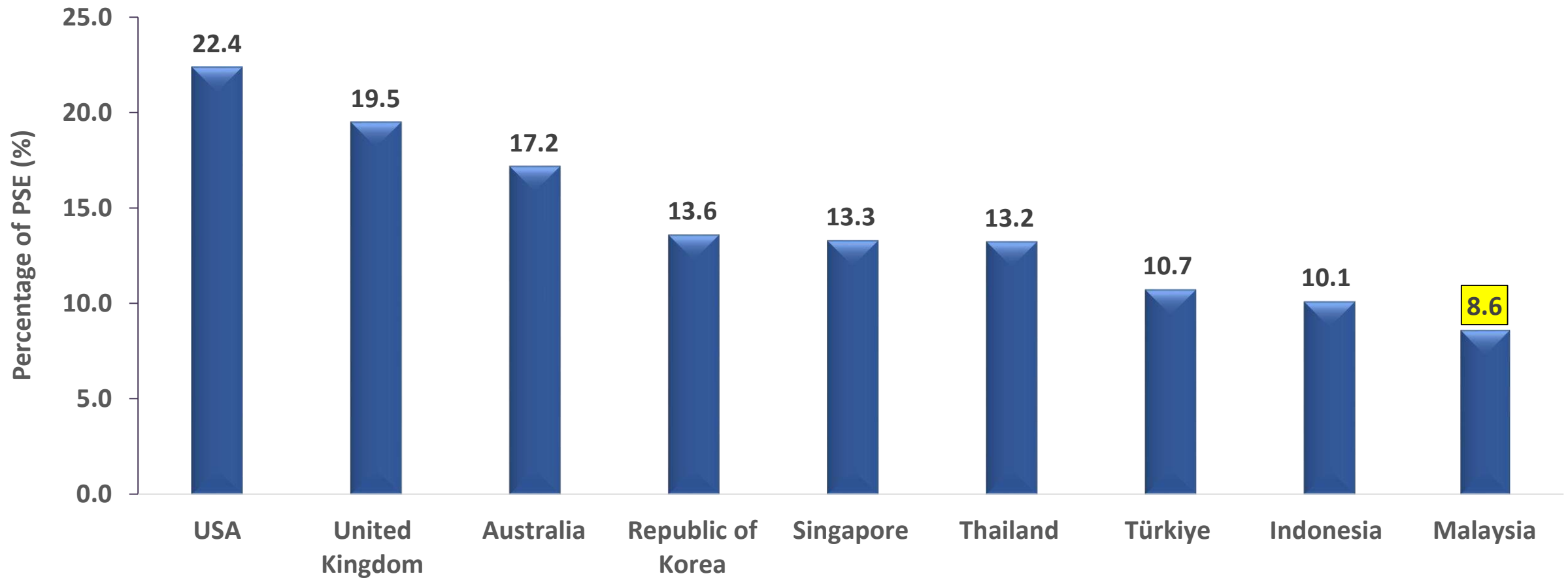
Selected Country Comparison of Public-Private Share in Health Expenditure, 2020 (%)



Source: International data from Global Health Expenditure Database, WHO NHA Oct 2023

Public Sector Health Expenditure (PSHE) as % of Public Sector Expenditure (PSE), 2020

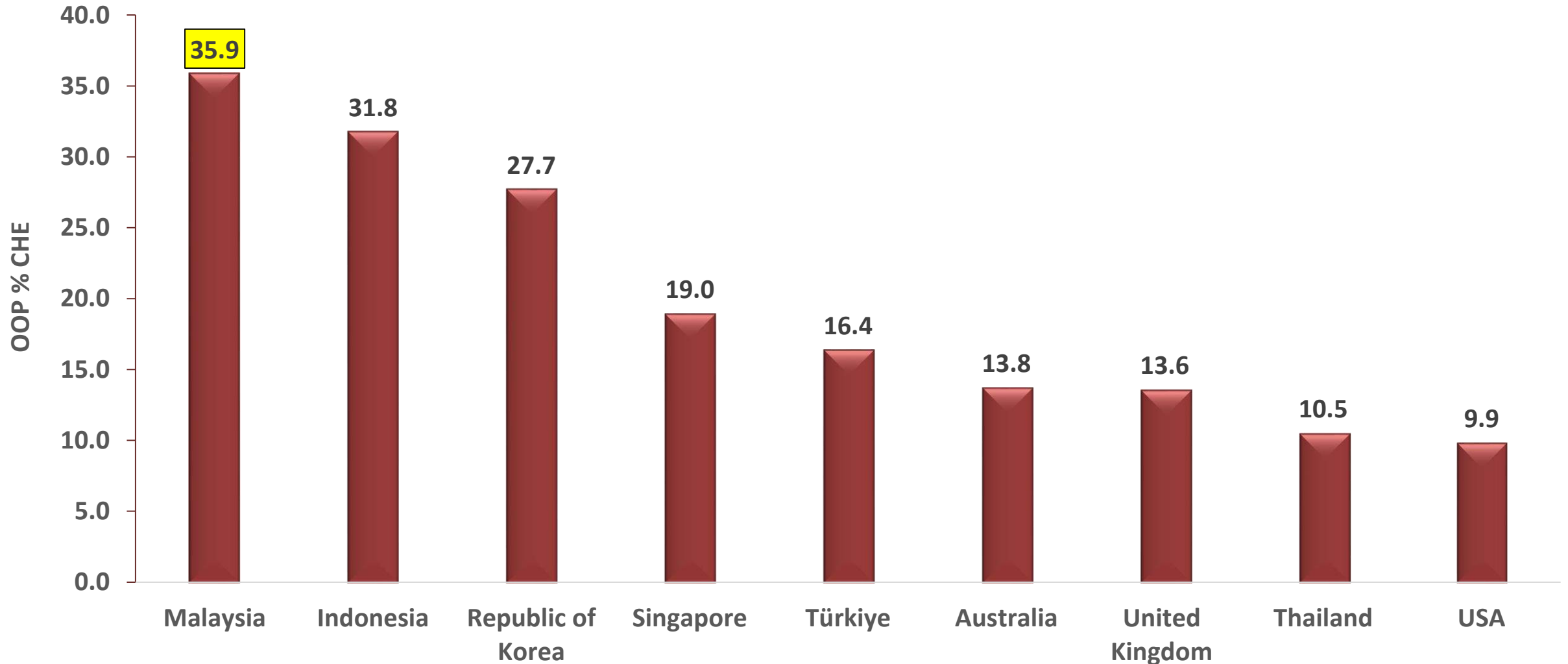
Selected Country Comparison*



Source: International data from Global Health Expenditure Database, WHO NHA Oct 2023

OOP Expenditure as % of CHE, 2020

Selected Country Comparison*



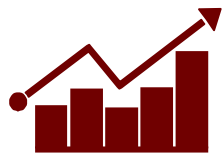
Source: International data from Global Health Expenditure Database, WHO NHA Oct 2023

✓ SUMMARY OF 2022

TEH

Total Expenditure of Health

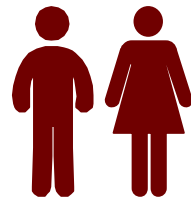
RM 78,945 m



TEH as % of GDP

Total Expenditure of Health as percentage of Gross Domestic Product

4.4 %



TEH Per-Capita

Total Expenditure of Health per capita

RM2,414



OOP % of TEH

Out of pocket percentage per Total Expenditure of Health

37.2%

Who paid for it?

SOURCE

Public
52.3%
RM41,257million

MOH 42.9%

Other Government Agencies

Private
47.7%

OOP 37.2%

Other Private Agencies

Where was it spent?

PROVIDER

Hospital
55.2%
RM43,575million

MOH+ Non-MOH 55.5%

Private 44.5%

Ambulatory Provider

Other Providers

What was it spent on?

FUNCTION

Curative Care
65.8%
RM51,929million

Inpatient 49.0%

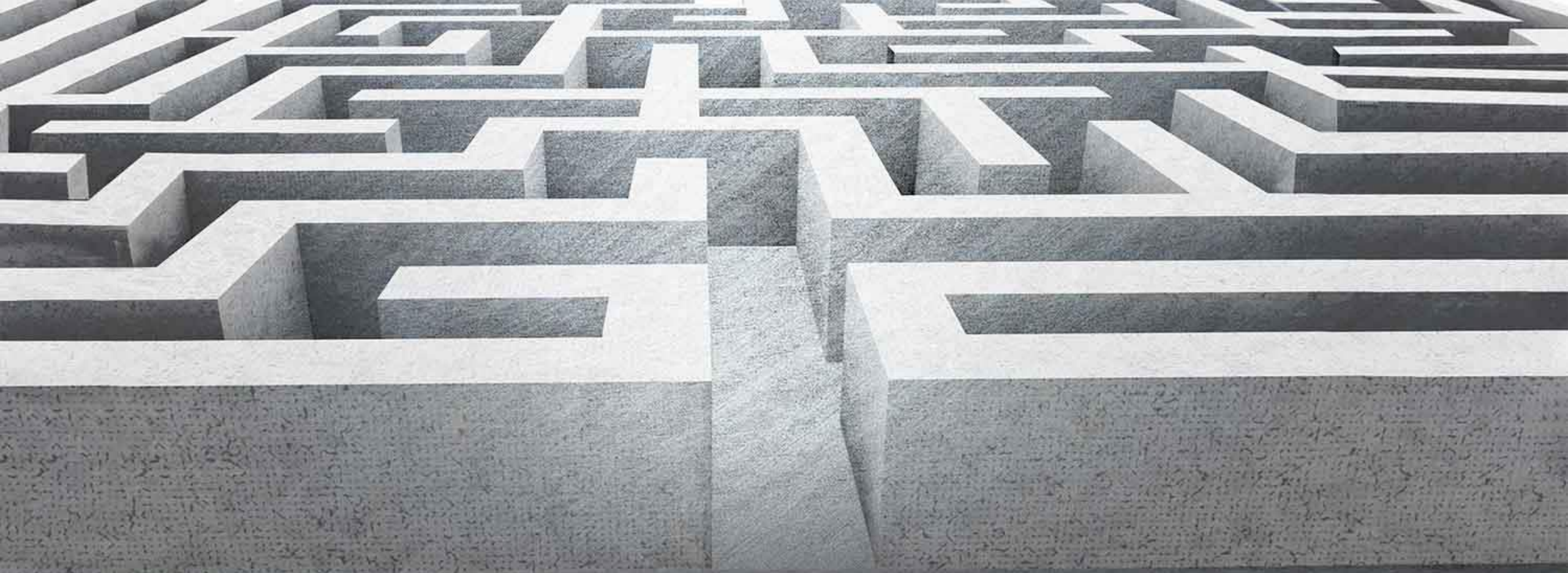
Outpatient 43.9%

Daycare 7.1%

Other Functions

✓ SUMMARY OF 2022

TEH	RM78,945 million
CHE	RM69,969 million
TEH as % of GDP	4.4%
CHE as %of GDP	3.9%
Per Capita Expenditure on Health	RM2,414
Public Sector Health Expenditure as % of Public Sector Expenditure	8.3%
TEH by Public Sources of Financing	RM41,257 million or 52.3% of TEH
TEH by Private Sources of Financing	RM37,688 million or 47.7% of TEH
MOH expenditure on Health	RM33,863 million or 42.9% of TEH
All hospitals expenditure on health was highest for TEH by Providers of Healthcare	RM43,575 million or 55.2% of TEH
Curative care services expenditure on health was highest for TEH by Functions of Healthcare	RM51,929 million or 65.8% of TEH
Private household out-of-pocket expenditures (OOP)	RM29,381 million or 37.2% of TEH
OOP expenditure was highest at private hospitals for OOP by Providers of Healthcare	RM13,696 million or 46.6% of total OOP expenditure
OOP expenditure was highest for outpatient service for OOP by Functions of Healthcare	RM12,364 million or 42.1% of total OOP expenditure



THANK YOU

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