Background

- Croatian population is experiencing a trend of progressive ageing (20.1% in 2018, 19.7% EU average respectively)
- Costs for Long-Term Care (LTC) are becoming a challenge for all Member States (MS) and the aim of this analysis is to explore expenditure for health component of LTC in Croatia

Material & Methods

- Health expenditure data for LTC in Croatia in 2017, classified according to System of Health Accounts (SHA) methodology
- Expenditures for health’s LTC including palliative care were analysed according to financing schemes and according to providers which covered the costs.

Results

- Total expenditures for health component of LTC in Croatia in 2017: 3.1% of current health expenditures (761 million HRK)

LTC’s health care expenditures according to the financing schemes:

- public expenditures (including government and social insurance): 94.7%
- out-of-pocket expenditures: 4.3%
- voluntary health insurances 1.0%

Conclusion

- Population trend in Croatia indicates progressive ageing and future rising of LTC expenditures.
- The public expenditure for health component of LTC is only part of the full costs of LTC, without social beneficiaries, out-of-pocket for ADL and/or IADL and informal care costs.
- Unpaid informal care is not included in the fiscal sustainability analysis in the SHA.
- Older people with similar LTC needs can face significantly different out-of-pocket costs, depending on which MS they live in.