

Household expenditures on medications:



Analysis of the Israeli Household Expenditure Survey (2018)

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Background and aims

- Medication copayment may decrease healthcare accessibility and equity.
- The Ministry of Health addressed this issue by setting copayment capping and discount mechanisms.
- We evaluated household out-of-pocket expenditures (OOPE) for medications (prescription and non-prescription drugs).

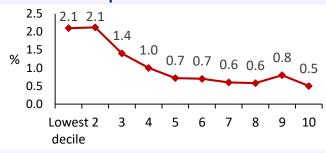
Methods

Data from the 2018 Israeli Household Expenditure Survey (8,792 households representing the general Israeli population), analyzed at two levels: (1) factors associated with the likelihood of reporting any OOPE for medications; (2) factors associated with the level of expenditure among those with any OOPE.

Results

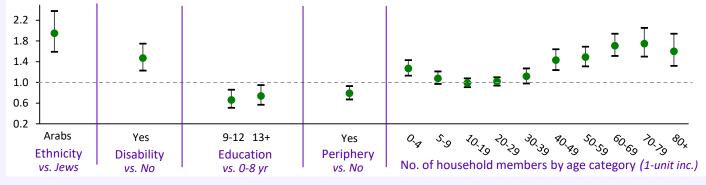
A quarter of Israeli households reported OOPE for medications, with a median monthly expenditure of 332 NIS, accounting for 37% of their total health expenditure.

The average expenditure on medications out of net income*, by deciles of standard capita net income

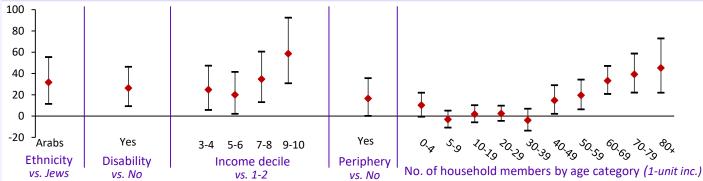


^{*} Including work, property, pensions, interest or dividends and allowances, after deducting compulsory payments. The burden of OOPE for medications is higher in the lower income deciles.

Factors associated with having any OOPE for medications – ORs (95% CI) *



Factors associated with the level of OOPE for medications – % change (95% CI) *



^{*} Normalized weights applied, adjusted for socio-demographic characteristics

Conclusions and recommendations

The burden of OOPE for medications is regressive and greater among vulnerable populations, such as the elderly, peripheral residents, Arabs, people with disability and those with lower education. A reassessment of medication pricing and reimbursement policies in Israel is needed, along with measures to improve economic accessibility for these target groups.