

Health Care Access and Quality Index and Financing of Health Care Systems

Mindaugas Stankunas, PhD,^{1,2} Mark Avery, MBus(Res),²
Richard Olley, MHA,² and Gaery Barbary, PhD²

THE GBD 2016 HEALTHCARE ACCESS AND QUALITY COLLABORATORS GROUP has introduced the Healthcare Access and Quality (HAQ) index and ranked 195 countries and territories based on this index methodology.¹ We have measured the link between health care system performance and financing. The Pearson correlation (r) was calculated between the HAQ index and current health expenditure per capita in purchasing power parity international dollars. Data for the latter were obtained from the Global Health Observatory.² We observed a strong and statistically significant correlation ($r=0.775$, $P<0.001$) between financing of health care systems and their performance (data are available from the authors upon request).

This result demonstrates that there is clear evidence that more financial resources mean greater health. Globally, the literature is full of calls for increased health care funding to improve outcomes in some specialties and subspecialties.³ However, we must remember that there are almost 200 health systems in the world, all operating with different political ideologies, policy frameworks, funding and regulatory arrangements, and business drivers, which in turn gives rise to different organizational designs and service delivery models. These differences can cause varied possibilities for access, use, and performance of health services.⁴ The ongoing agenda for health leaders is, in part, supply side funding provision with allocative efficacy using proportionate economic levers that affect access and equity without inhibiting health status, as well as strong use of data to understand and control major costs; developing models and modes of care delivery; and quality and risk improvement to achieve sustainable health systems.⁵

Author Disclosure Statement

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Address correspondence to:
Mindaugas Stankunas, PhD
Department of Health Management
Lithuanian University of Health Sciences
A. Mickeviciaus 9
Kaunas LT-44307
Lithuania

E-mail: mindaugas.stankunas@lsmuni.lt

¹Department of Health Management, Lithuanian University of Health Sciences, Kaunas, Lithuania.

²Health Services Management, School of Medicine, Griffith University, South Brisbane, Australia.