



Healthcare Readiness Index 2022



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Published in November 2023

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Introduction

The ripple effects of the COVID-19 pandemic are still being felt across the globe, revealing stark realities about healthcare systems and the intricate links between health and the broader global economy. The past several years have illustrated that healthcare isn't just a standalone sector but forms the backbone of entire economies. As trade, industry, and services were paralyzed, the pandemic showed that a nation's economic health is as vital as the health of its citizens.

Financial muscle, however, did not necessarily equate to better pandemic management. The relative efficiency and adaptability of healthcare systems and their emphasis on public health rather all played a major role. As is evident from the Nordic countries, streamlined healthcare mechanisms and a focus on innovation particularly provided an edge in responding to COVID-19.

While the ramifications of the pandemic were profound throughout the world, the Central and Eastern European (CEE) region bore a particularly heavy brunt. Our research from the previous year highlighted a disturbing trend: 10 CEE nations were responsible for an astonishing 65% of excess deaths per capita within the EU since the onset of the pandemic in 2020. More alarmingly, out of the 10 countries at the bottom of the EU's healthcare performance during the pandemic, 8 hailed from the CEE region. Italy and Greece, though outside the CEE bloc, joined them with this unfortunate distinction.

It is also essential, nevertheless, to extend our focus beyond the CEE countries to identify benchmark standards and derive valuable insights on healthcare readiness. Through the Healthcare Readiness Index (HRI) 2022 update, therefore, our scope expanded to encompass all EU nations, alongside Great Britain and Norway. This broadened perspective offered a more comprehensive understanding of healthcare

infrastructure, management strategies, and resilience across different European landscapes.

The HRI's primary goal has remained unchanged. We aim to provide a holistic overview of the preparedness of healthcare systems – both within the CEE region and beyond – as they face impending healthcare challenges. By creating a unified composite index, the HRI serves as a crucial tool for stakeholders. It facilitates straightforward country comparisons, identifies best practices, and tracks progress over specific periods. By leveraging such a data-driven approach, policymakers, health professionals, and administrators can glean actionable insights, refine strategies, and ensure that their respective healthcare systems are robustly equipped to address future challenges.

What is the Healthcare Readiness Index?

To assess the readiness of countries to cope with healthcare challenges, such as the COVID-19 pandemic or the increasing rate of aging and multimorbid patients, a variety of factors need to be considered. These variables range from basic indicators of health investment and expenditure to complex composite indicators such as DALYs/QALYs. Each indicator portrays some specific aspects of readiness. To have a complete picture, is vital to consider two perspectives. While some indicators measure the readiness of the system to address present challenges (e.g., avoidable mortalities), other indicators measure readiness towards or impact on future readiness (e.g., incidence of disease or spending on preventive measures). The Healthcare Readiness Index, consequently, analyses two groups of indicators: (1) factors that define readiness today and (2) those that are likely to influence the readiness of systems in the future.

1. Readiness today is focused primarily on assessing current health outcomes and healthcare status. It hence analyses current inputs (resources) into systems and provided outputs (health state) but offers only limited outlook into the future. For example, avoidable mortality is one of the key indicators of the quality of healthcare systems even though this rate may bear no relevance to outcomes three, five, or ten years into the future. As a balance sheet value that is vital, but of limited value for countries preparing to face future challenges. Similarly, some indicators of capacity (e.g., figures on the number of doctors and nurses) are vital since they define the overall capacity of respective healthcare systems and can be seen as a sign of readiness to deal with future challenges. Its impact on the future is however in most cases a subject to other resources

or reforms and are hence evaluated in the “readiness today” part.

2. Readiness tomorrow measures factors that will drive demand for care in the future and assesses the ability of countries to react. Future demand for healthcare services is a function of a variety of factors, e.g. incidence of diseases, risk factors, and the implementation of preventive measures in place and many others. These are the factors that have a dominant impact on quantity of care demanded in the future. Readiness tomorrow is not only about future demand for services - it is also about flexibility of countries to adapt to change. This component, therefore, also scrutinises factors that serve as a proxy for access to innovation, resources, and/or the stability of governance in the sector.

Together, these two sets of indicators provide a complex picture of the readiness of particular countries to face challenges that could emerge in the future (as visually depicted in the following figure) and can be used as a single composite indicator ranking all EU countries. The healthcare readiness index is therefore split into two parts, readiness today and readiness tomorrow.

Readiness Today: Current Health Status and Outcomes

Readiness Today gives a snapshot of the present healthcare landscape, capturing essential details about the current system while focusing primarily on immediate health outcomes and the existing state of healthcare. This component of the index includes:

Indicator	Code	Measure	Weight	ASC/DESC	Source
Does supply of care meet demand?					
Avoidable mortality	1.1.1	Population proportion	0,078	DESC	EUROSTAT
Disease burden (DALY)	1.1.2	Population proportion	0,078	DESC	IHME
Infant mortality	1.1.3	Population proportion	0,078	DESC	OECD
Incidence/prevalence of all types of cancers	1.1.4	Population proportion	0,078	DESC	WHO
Life expectancy females at age 65	1.1.5	Years	0,026	ASC	OECD
Life expectancy males at age 65	1.1.5	Years	0,026	ASC	OECD
Life expectancy total population at birth	1.1.5	Years	0,026	ASC	OECD
Capacity of the system					
Practising nurses	1.2.1	Headcount per 1000 pop	0,061	ASC	OECD/WB
Practising physicians	1.2.1	Headcount per 1000 pop	0,061	ASC	OECD/WB
Computed Tomography scanners	1.2.2	Population proportion	0,020	ASC	EUROSTAT
Gamma cameras	1.2.2	Population proportion	0,020	ASC	EUROSTAT
Magnetic Resonance Imaging units	1.2.2	Population proportion	0,020	ASC	EUROSTAT
Mammographs	1.2.2	Population proportion	0,020	ASC	EUROSTAT
Positron Emission Tomography scanners	1.2.2	Population proportion	0,020	ASC	EUROSTAT
Radiation therapy equipment	1.2.2	Population proportion	0,020	ASC	EUROSTAT
Rate of availability of medicines	1.2.3	Percentage from # of EMA approvals	0,122	ASC	EFPIA
Availability of finances	1.2.4	Average of 3 years of overall spending per capita	0,122	ASC	Eurostat
UHC index	1.2.5	UHC service coverage index	0,122	ASC	World Bank

Though invaluable in providing insights into current system performance, the component offers only limited foresight into future challenges and needs.

Readiness Tomorrow: Prospective Evaluation of Future Healthcare

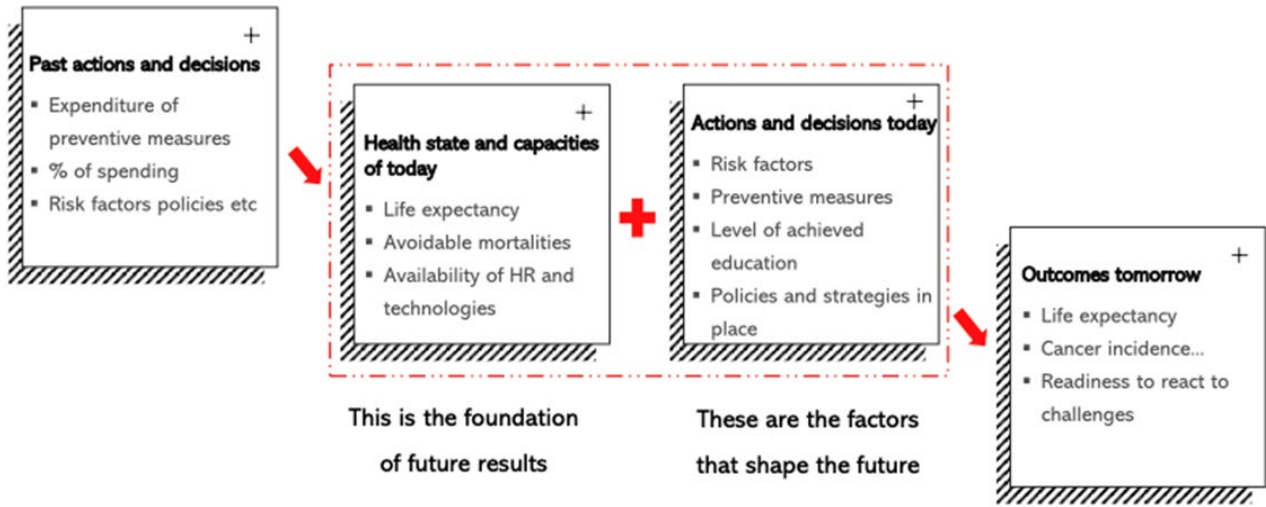
Readiness Tomorrow, meanwhile, takes a forward-looking approach by analysing factors that will likely influence healthcare systems in the future. This part of the index delves into:

Indicator	Code	Measure	Weight	ASC/DESC	Source
Future demand for healthcare					
Estimated relative change of incidence from 2020 to 2040	2.1.1.	Population proportion	0,075	DESC	EC
Alcohol consumption	2.1.1.	Litres per capita (15+)	0,013	DESC	OECD
Fruits consumption	2.1.1.	Kilos per capita per year	0,013	ASC	OECD
Obesity	2.1.1.	Population proportion	0,013	DESC	EUROSTAT
Pollution index	2.1.1.	PM2,5 [ug/m3]	0,013	DESC	AQLI
Smoking	2.1.1.	Population proportion	0,013	DESC	EUROSTAT
Vegetables consumption	2.1.1.	Kilos per capita per year	0,013	ASC	EC
Expenditure on preventive measures	2.1.1.	Per capita	0,075	ASC	OECD
HPV vaccination rate	2.1.1.	Population proportion	0,075	ASC	UNICEF
Tertiary education 25_34	2.1.2.	Population proportion	0,075	ASC	EUROSTAT
Tertiary education 55_64	2.1.2.	Population proportion	0,075	ASC	EUROSTAT
Demographic dependency ratios	2.1.2.	Population proportion	0,150	DESC	World Bank
Ability to predict and adopt to changes					
Average time to availability of medicines	2.2.1.	Days	0,050	DESC	EFPIA
Does a country have an HTA agency with clear and transparent decision rules?	2.2.1.	Separate analysis	0,050	ASC	Multiple sources
Does a country have any type of innovation fund / scheme?	2.2.1.	Separate analysis	0,025	ASC	Multiple sources
Does a country have early access scheme?	2.2.1.	Separate analysis	0,025	ASC	Multiple sources
Does a country have an investment strategy in the health sector?	2.2.2.	Separate analysis	0,075	ASC	NLoM
Average life span of a minister of health	2.2.2.	Days	0,075	ASC	Multiple sources
Ability to sustain future challenges					
Proportion of OOP spending on all expenditure types	2.3.2.	% on total HE	0,050	DESC	OECD
Self-reported unmet needs for medical examination	2.3.3.	Population proportion	0,050	ASC	EUROSTAT

The methodology assigns a relative score to each country, with the top scorer receiving a value of 100. To ensure fairness and accuracy, each indicator within a group is assigned equal weight.

However, the overall HRI score is weighted to reflect the more critical focus on future readiness. Indicators of readiness today are assigned a weight of 25% while a more substantial 75% weight is placed on the readiness tomorrow indicators.

Composite Index: Combining Readiness Today and Tomorrow



The two indicator sets comprise the composite Healthcare Readiness Index, which provides a nuanced picture of the readiness of different countries to face both imminent and future health challenges. By dividing the index into readiness today and readiness tomorrow, it bridges the gap between the present state of healthcare and prospective needs.

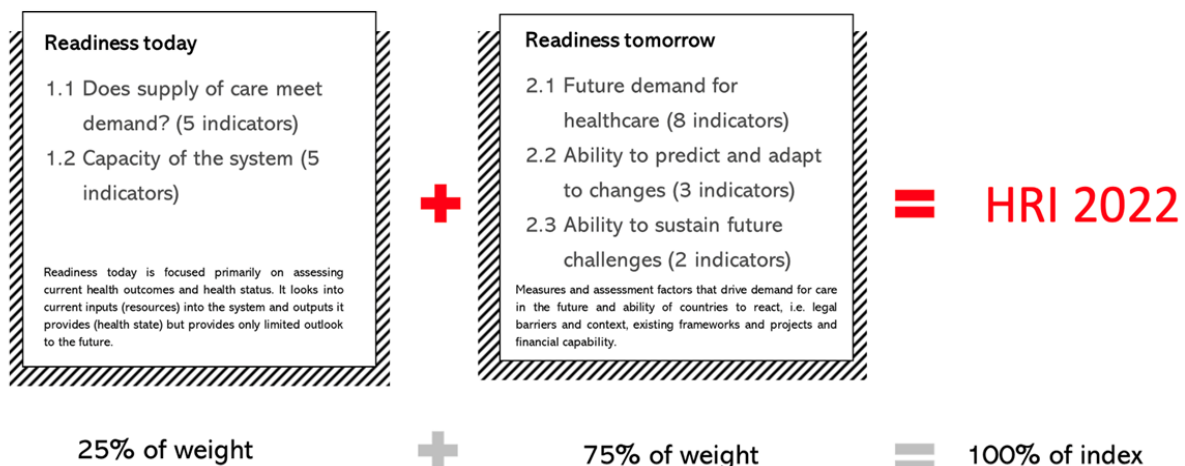
The visual representation of this methodology (as depicted in the figure below) allows for an intuitive understanding of complex data and presents a robust framework for evaluating and comparing healthcare readiness across various EU countries.

Given a scale of 0 to 100, where 0 represents a country that is least likely to face impending

challenges and 100 a country that is most prepared to do so, it is essential to understand that these metrics are relative.

In this context, a score of 100 does not equate to a “perfect” country but merely suggests that, in comparison to its peers, that nation is better equipped in certain metrics that determine future readiness. Conversely, a score close to 0 does not brand a country as wholly ill-prepared but puts a spotlight on areas in need of significant improvement.

For policymakers and stakeholders, these scores serve as an analytical tool, guiding their attention to issues requiring intervention and highlighting systems or policies that might be emulated for



better outcomes. However, it is critical to delve deeper into what these indicators entail and the specifics of what they measure as relative measurements.

The Healthcare Readiness Index’s careful blend of current evaluation and future outcomes paves the way for better strategic planning, resource

allocation, and policy formulations. It provides decision-makers, healthcare providers, researchers, and stakeholders with actionable insights to enhance healthcare resilience, adaptability, and preparedness in an ever-changing global health landscape.

Methodological Adjustments

In comparison to the previous HRI, several methodological adjustments were made to improve the index, primarily:

1. Utilization of Eurostat Data

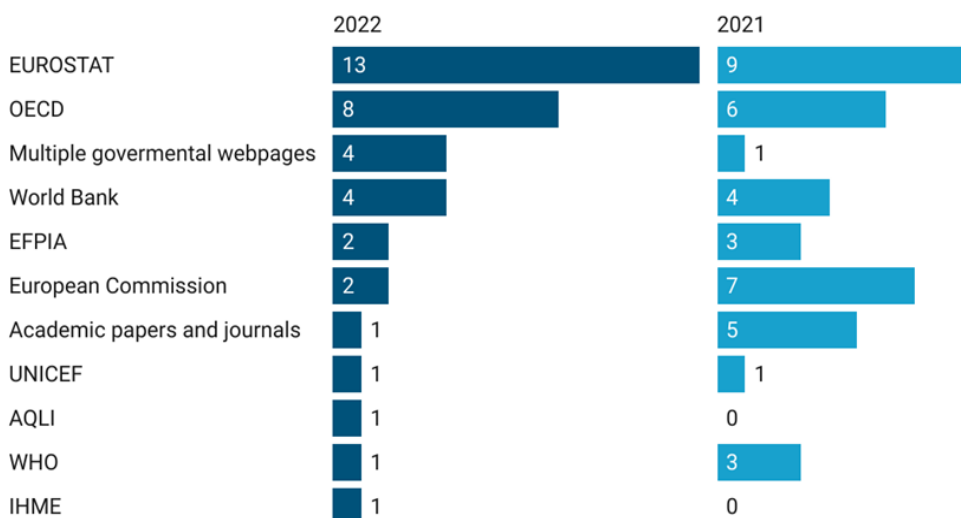
In extending the data to encompass the whole European Union (EU), an essential alteration was made in the source of information. The research discovered that the reporting methodologies were more robust when using Eurostat data. Unlike the prior data sets, Eurostat offered a broader range of applicable information, with similar standardisation and collection methodologies. Thus, the HRI 2022, to a greater extent, relies on Eurostat data, marking a significant departure from the 2021 version of the index.

This shift towards Eurostat data further ensures that the HRI maintains a consistent and reliable framework for evaluating healthcare readiness across all EU countries.

2. Adjustment of Weights

With the expanded sample, comprising all EU countries, the existing weights used for different indicators presented unexpected challenges. The larger sample size had a significant impact by creating data clusters that distorted the proportions of individual indicators. For example, in the case of unmet needs, many countries clustered in the range of 99,9-99,0% of the population, followed by several countries in the 99,0-95% range.

Comparison of used data



This clustering effect necessitated a careful reassessment of the weights assigned to different indicators. The methodology was adapted to ensure that the relative importance of each factor accurately reflected the current and future readiness levels, avoiding undue emphasis on specific variables. The adjusted weights are designed to compensate for the sample change, offering a more balanced and representative picture.

These methodological adjustments reflect a pivotal enhancement in the HRI 2022. By aligning with Eurostat data and recalibrating the weights, the index has attained a greater level of precision, robustness, and relevance. The modifications

in data sourcing and weighting do not merely represent a technical refinement; they reflect a commitment to maintaining the integrity and effectiveness of the HRI as a tool for understanding, evaluating, and planning healthcare readiness across the EU.

As healthcare landscapes continue to evolve, the HRI must remain agile, adapting to new information, contexts, and challenges. The adjustments made for the 2022 version ensure that the index remains a pertinent and powerful instrument in shaping healthcare policy, resource allocation, and strategic decision-making, tailored to the unique and complex needs of the EU's diverse member states.

Limitations and caveats

The Healthcare Readiness Index (HRI) for 2022 faced several challenges in data collection and interpretation, emphasizing the inherent complexities of creating comprehensive indices. These include:

1. **Temporal Data Gaps:** Although the aim was to gather data for 2022, most of the information was sourced from 2020/2021. This lag arises because of a gap between year-end and the time it takes to compile, validate, and publish comprehensive data sets.
2. **Use of Historical Data:** For some indicators, particularly those for which recent data is unavailable, older datasets were utilized. For instance, Slovakia's most recent oncological data dates back to 2012. While some sources used might be dated as of 2021, extrapolation methods applied to age-old data might not capture the current reality accurately.
3. **Subjectivity in Data Collection:** Not all indicators are purely quantitative. Some, like 'unmet needs', rely on questionnaire responses, introducing a degree of subjectivity. People's perceptions and interpretations can vary and their responses can be influenced by personal experiences, biases,

or misunderstandings. As such, these indicators might not always offer a fully objective picture.

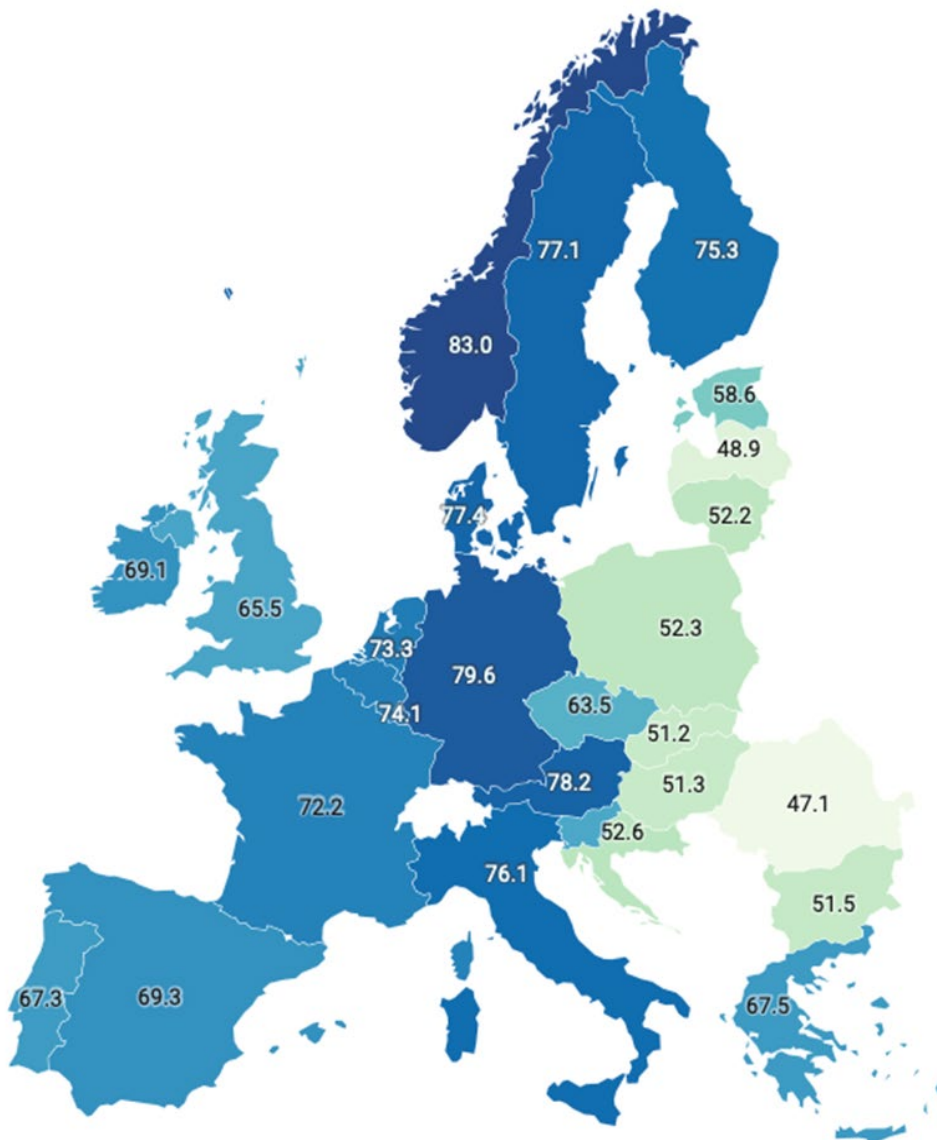
4. **Qualitative Criteria Ambiguities:** The HRI also includes qualitative metrics that come with designated cut-off points and implicit subjectivity. The determination of these thresholds can be subjective and different experts might set these differently based on their own assessments or criteria.
5. **Weightage Dilemma:** One of the perennial challenges of composite indicators is the weighting system. The HRI has aimed to remain neutral in assigning weights to various indicators. However, these weights might not always resonate with the actual impact each factor has on a country's readiness. Balancing neutrality while ensuring representational accuracy is challenging.

In summary, while the HRI serves as a valuable tool for comparing healthcare readiness across countries, these caveats underline the importance of using it judiciously. Policymakers and stakeholders should always consider these nuances when interpreting results and drawing conclusions.

Results of the Healthcare Readiness Index

The HRI is a comprehensive rating system from 0 to 100, derived from both “readiness today” and “readiness tomorrow” indicators. This sophisticated approach provides insights not only into current healthcare effectiveness but also into future resilience and adaptability.

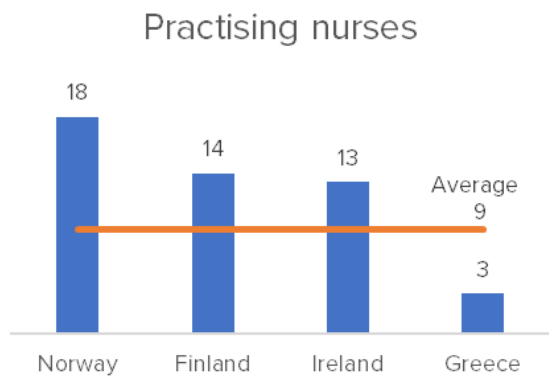
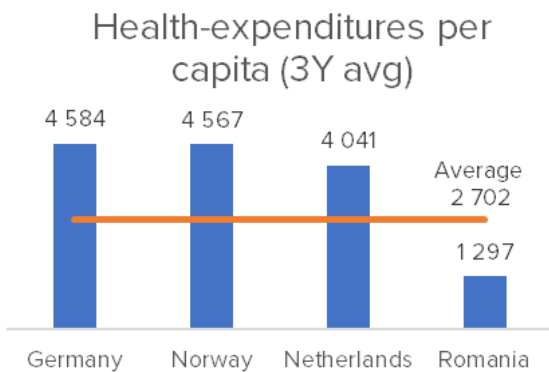
Health Readiness Index 2022 - Readiness Today



Readiness Today: Nordic Countries and Germany Set the Pace

The state of healthcare readiness across countries can provide insight into their preparedness towards addressing current and future health challenges. Breaking down the results for the EU, Norway, Great Britain, and the Central and Eastern Europe (CEE) region:

Norway Leading the Pack: With a score of 83, Norway emerges as the best-prepared country in terms of healthcare readiness. Norway’s longstanding focus on stable human resources (especially nurses – ranking no.1 among all countries) and overall healthcare expenditure (ranking no.2 among all countries) especially stand out.



- **Lagging Behind - Romania:** At the other end of the spectrum, Romania scores a mere 47, making it the least prepared country in this group. HRI Today results show significant gaps in healthcare infrastructure and extreme

challenges in healthcare financing. Out of 23 indicators in HRI Today, Romania ranks in the bottom 3 countries across 12 of the metrics.

- **The Average Scenario:** With an average score of 66, the collective performance of this group is above average. This suggests that most countries have reasonably good healthcare systems, but there’s room for improvement, especially in countries that are pulling this average down.

Central and Eastern Europe (CEE):

Turning the focus to the CEE region:

- **Slovenia at the Forefront:** Slovenia tops the CEE list with a score of 65. Its commitment to enhancing its healthcare system, possibly through effective policy implementation and investments in healthcare technology, positions it ahead of its regional peers. Slovenia’s healthcare system showcases remarkable strength, particularly evident in its top rankings (among CEE) for metrics like low Disease Burden (DALY), Infant Mortality, and Life Expectancy across various categories. Additionally, the nation excels in terms of the availability of healthcare workforce, particularly practicing nurses, and has robust healthcare infrastructure including radiation therapy equipment and mammographs. Financially, Slovenia stands strong, ranking second in the availability of budgetary resources behind the Czech Republic. However, certain areas demand more attention: while its ranking in healthcare imaging infrastructure is respectable, there is potential for further progress.

- **Romania’s Struggles:** Romania again finds itself at the bottom, echoing the challenges it faces in the broader EU context. This emphasizes the

need for significant reforms and interventions to uplift its healthcare scenario.

- **Regional Average:** With an average score of 54, the CEE region trails behind the broader EU, Norway, and Great Britain group. This suggests that while some countries in the CEE region like Slovenia are making commendable progress, others require more concerted efforts to bolster their healthcare readiness.

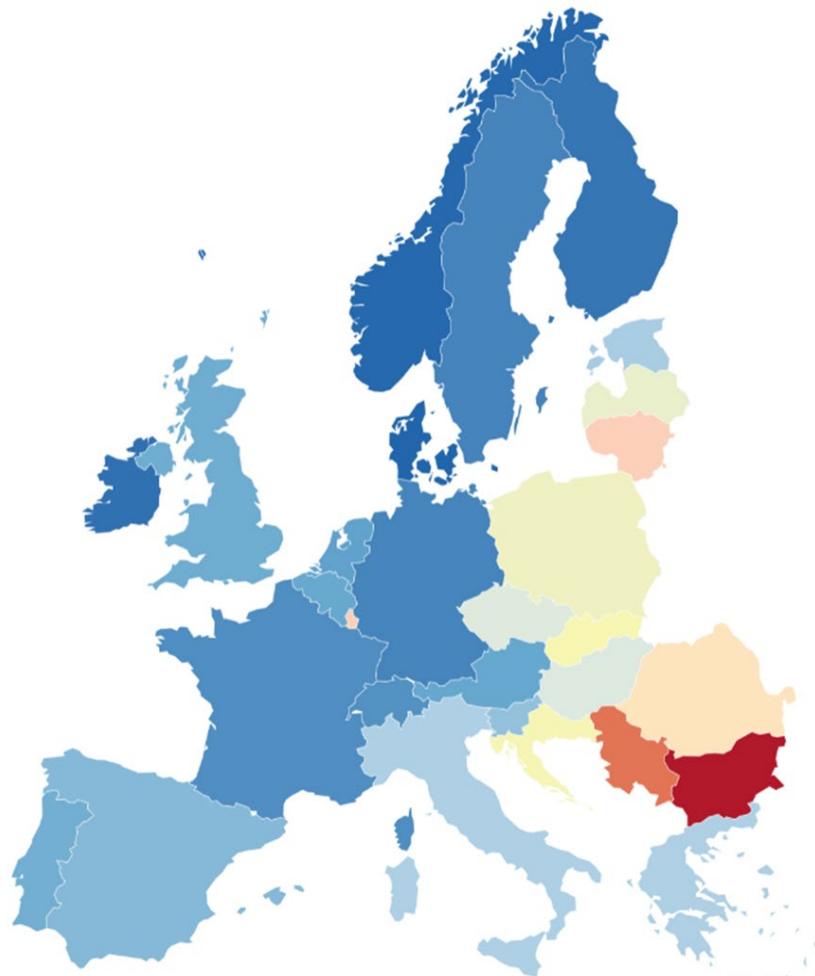
These scores provide a snapshot of healthcare readiness across different regions in Europe. They distinctly correlate with COVID-19 excess mortality rates, mirroring outcomes observed during the pandemic. Countries that boasted high readiness were demonstrably more resilient in the face of the health crisis, showcasing the effectiveness of their

healthcare systems. On the other side, those with lower preparedness scores grappled with elevated excess deaths. The correlation between our findings and the real-world pandemic responses reaffirms the validity of the HRI methodology. It underscores that our results are not just theoretical or speculative; they were, in fact, manifested in real-time during the global health emergency, making them less of a surprise for those who closely followed the trajectory of the pandemic. It also demonstrates the importance of continued investments and policy revisions in the ever-evolving domain of healthcare.

In the landscape of healthcare readiness, certain countries stand head and shoulders above the rest. At the forefront of this global vanguard are

Excess mortality per capita since covid-19 outbreak

low medium high



World in data (2022)

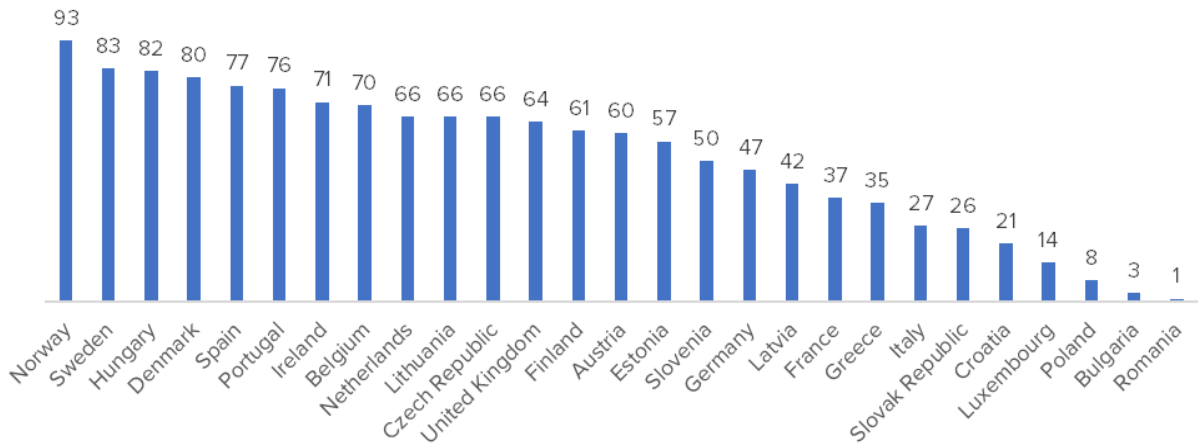
the Nordic countries (Denmark, Finland, Iceland, Norway, and Sweden) along with Germany. Their health systems are paragons of innovation and accessibility, ensuring their populations benefit from

some of the highest standards of care in the world, especially when looking at healthcare expenditures as investments not as costs.

Several factors contribute to this satisfactory performance:

1. Public Healthcare Systems: The UK, BENELUX, Nordics and Germany have a strong foundation of public healthcare, as is evident from various indicators (e.g., preventive measures expenditures or HPV vaccination rates as illustrated in the charts below). This ensures a broad accessibility, reducing disparities in care across the populations. The strength of these systems, importantly, lies not merely in coverage, but also the uniform high quality of care delivered.

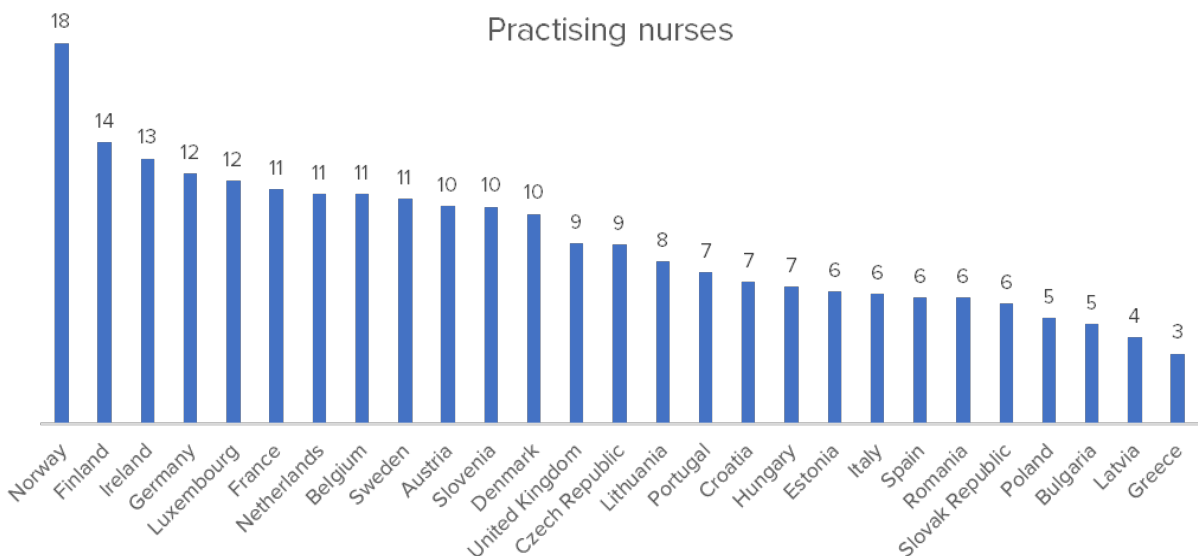
HPV vaccination rates



Source: UNICEF 2021 estimates (women up to 16 years as a %)

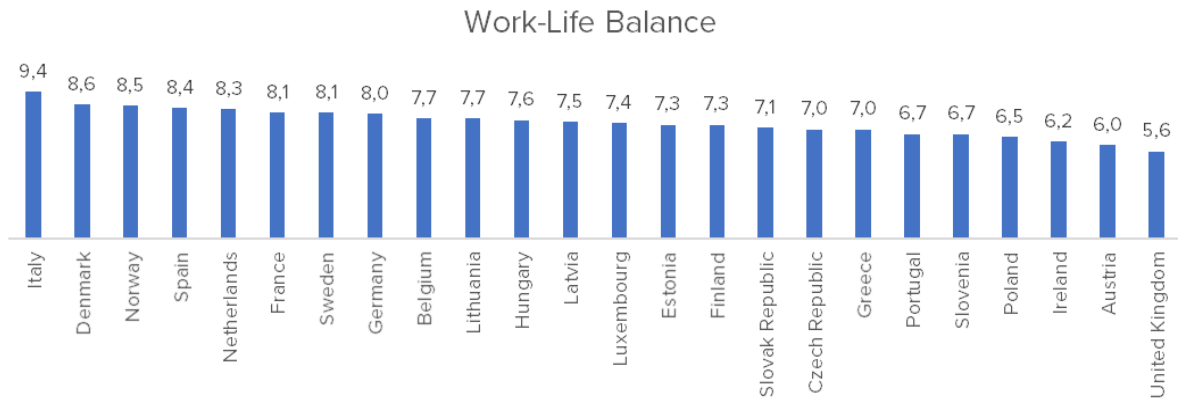
2. Investments in Health Infrastructure: Physical and logistical health infrastructure - from hospitals to clinics and specialized care centres - is top-notch. These investments are complemented by a high density of trained medical professionals, especially practicing nurses, ensuring that citizens have ready access to expertise when needed.

Practising nurses



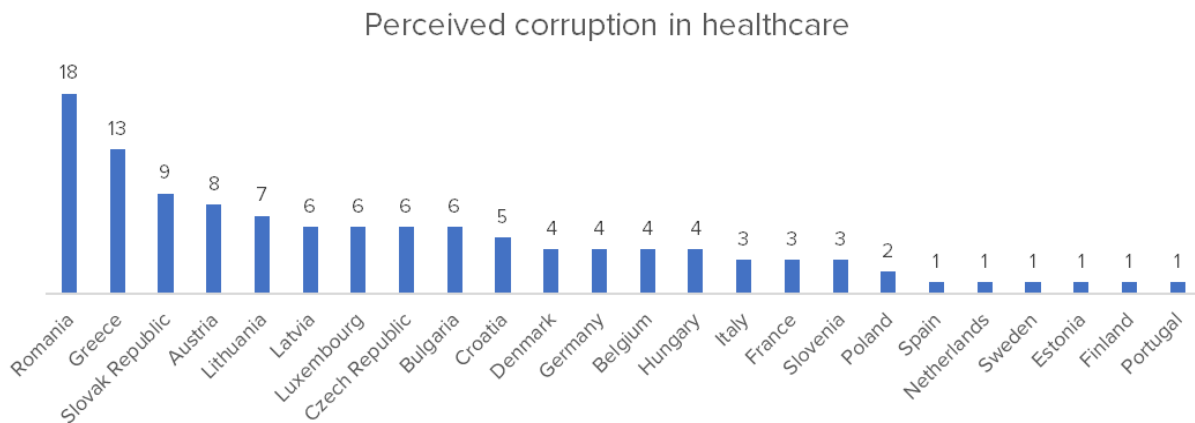
Source: OECD Database (Density per 1000 population - head counts)

- 3. Holistic Well-being: Apart from medical care, there is a strong societal focus on well-being in these countries. This encompasses mental health, work-life balance, and a general emphasis on quality of life, which indirectly boosts overall health outcomes. For example, In Norway, full-time workers devote 65% of their day on average, or 15,7 hours, to personal care (eating, sleeping, etc...) and leisure (socialising with friends and family and/or spending time on hobbies, games, computer, and television use, etc...) – more than the OECD average of 15 hours.



Source: OECD Better Life Index (2023)

- 4. Transparent and Accountable Systems: The Nordics are known for their transparent healthcare systems, as is apparent also in the Special Eurobarometer on “Corruption” from March-April 2022 (see chart below). This transparency contributes to enhanced accountability, ensuring that any gaps or inefficiencies are promptly addressed.



Source: Special Eurobarometer 523 March-April 2022 “Corruption” (Apart from official fees did you have to give an extra payment or a valuable gift to a nurse or a doctor, or make a donation to the hospital? -%)

Germany, with its combination of public and private healthcare and a meticulous approach to medical care, often sets benchmarks in healthcare delivery. The Nordic countries, with their collaborative and citizen-centric approaches, generally serve as models for public healthcare systems globally.

offers useful best practices. Their approach, characterized by a blend of proactive policies, technology adoption, and citizen-centric care, sets a gold standard for health systems globally.

In conclusion, as the world grapples with evolving healthcare challenges, the current readiness displayed by the Nordic countries and Germany

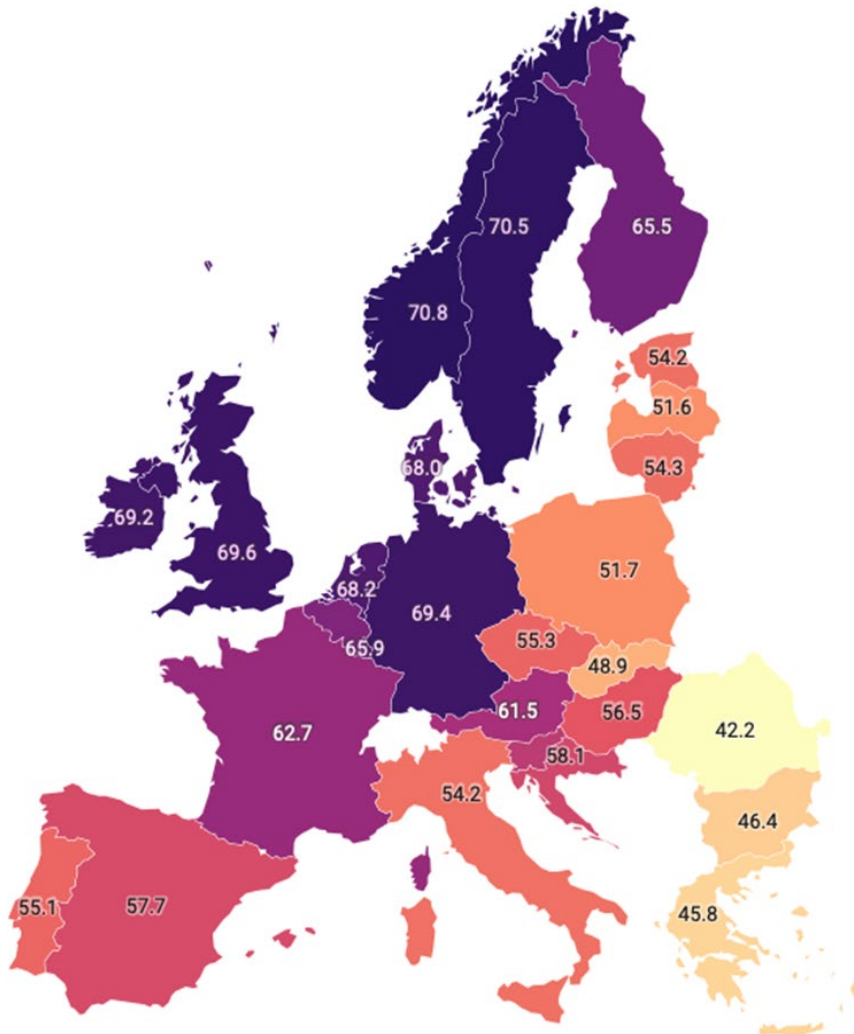
Readiness Tomorrow: Norway and Slovenia lead the way

Strong baseline is vital starting point to ensure that a healthcare of a country is ready to face future challenges. Readiness today might however be just temporary or insufficient to tackle future challenges and upcoming demands for care and a variety of issues. It is, therefore, also vital to consider and analyse these elements that impact readiness for tomorrow.

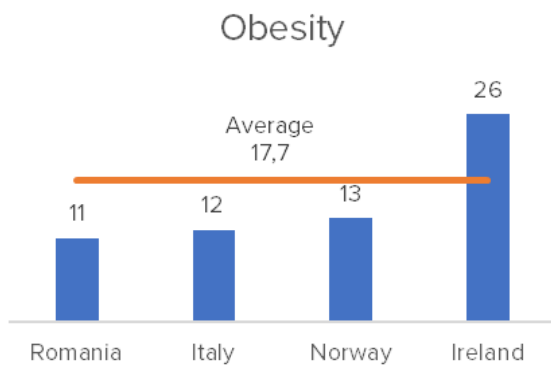
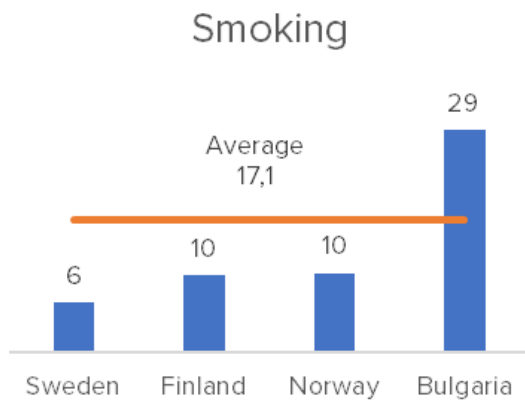
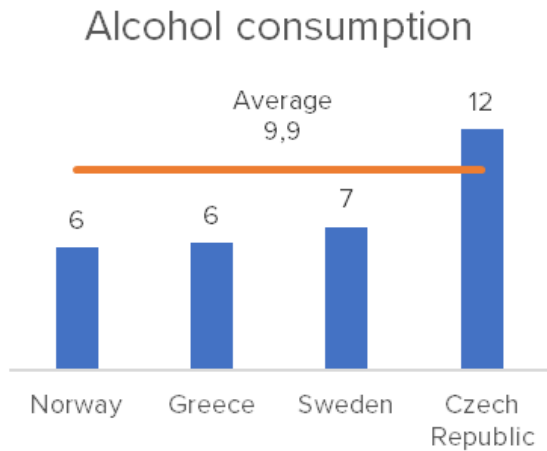
- Norway in the Lead: With a score of 71, Norway continues to position itself as the model for healthcare preparedness, it indicates a robust system that looks ahead. The country excels in many areas, especially in terms of health

determinants and risk factors, ranking first on low alcohol consumption and third on obesity and smoking. Its focus on pursuing a clear investment strategy in the health sector, presence of a transparent HTA agency, establishment of an innovation fund, and highest HPV vaccination rate achievement are also major ingredients to the success. Its commitment to a cleaner environment is also evident with its top rank in the pollution index.

Health Readiness Index 2022 - Readiness Tomorrow



Comparison of top three performers vs the worst on risk factors



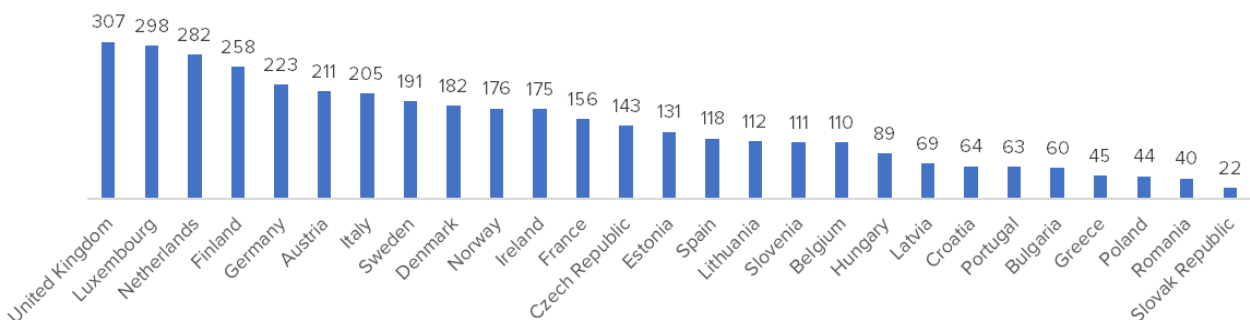
Source: OECD (latest available data)

Norway, nevertheless, falls short of a top tier position in some areas, such as the average time it takes for medicine to become available (414 days compared to 133 days in Germany - rank 8) and expenditure on preventive measures (176 EUR per capita compared to the UK's 307 EUR - rank 10). Despite these challenges, Norway's overall healthcare landscape reflects a robust system.

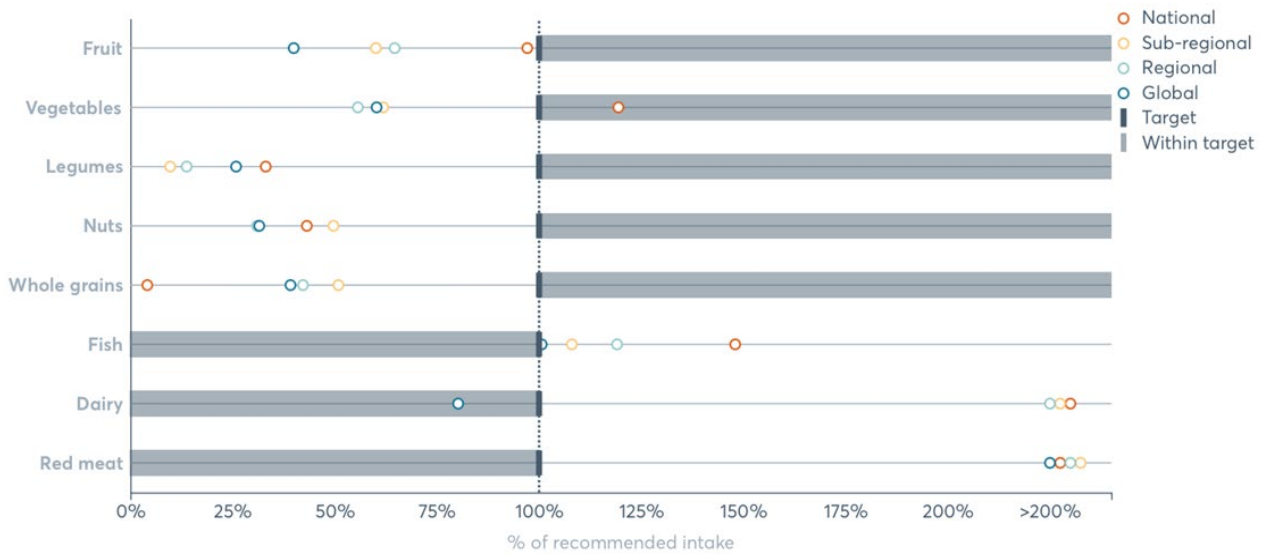
- a. Focus on Preventive Care: Rather than waiting for diseases to manifest and subsequently treating them, these countries place an emphasis on preventive measures. Regular screenings, health education, and community health programmes are staples of their approach. Norway, however, as the overall leader lags behind here, ranking 10th behind most Western European countries.
- Romania's Shortcomings: Scoring just 42, Romania continues to be an area of concern, as it faces substantial gaps in its preparedness to face future healthcare challenges. This necessitates a deeper examination of its infrastructure, policy framework, and healthcare strategies.

Romania's healthcare indicators suggest a mixed picture. On the positive side, the nation appears to hold healthy dietary habits, ranking 4th on fruit consumption and 3rd on vegetable intake, underscoring the population's inclination towards healthy nutritional behaviour. That said, Romania's success in achieving dietary targets does not translate to all nutritional areas.

Expenditures on preventive measures



Source: OECD Database (Per capita, current prices, current PPPs)



Source: Global Nutrition Report.org (2023)

The dietary intake of key foods and nutrients in adults aged 20 years and over compared against minimum and maximum targets set by the Global Nutrition Report

The demographic dependency ratio places Romania in a commendable 6th position, suggesting a fairly balanced age distribution. However, challenges loom in other areas. The country ranks 27th regarding the average tenure of its minister of healthcare at just 0.77 years, implying frequent policy shifts. Moreover, with an HPV vaccination rate at a mere 1% of women above the age of 16, Romania finds itself at the bottom of the list, reflecting potential healthcare vulnerabilities.

- **General Average:** The average score of 59 across the EU, Norway, and Great Britain suggests that while these regions generally maintain above-average standards, there's an evident need for further improvement. Adapting to emerging health challenges will require these countries to stay agile and make strategic shifts in healthcare investments.

Central and Eastern Europe (CEE):

- **Slovenia's Commitment:** Leading the CEE group with a score of 60, Slovenia's healthcare system showcases resilience and future-focused strategies. Slovenia's health and related indicators show a mix of strengths and challenges when set against comparative values. For instance, in areas of strategic importance, Slovenia excels. Boasting an established investment strategy in the health sector, it additionally stands out through its support of an innovation fund or scheme.

However, challenges are present in areas like alcohol consumption, where Slovenia's value of 11.1 litres per capita puts it in 21st place and significantly surpasses the ideal of Norway's 6.1 litres per capita. Obesity, a rising concern globally, stands at 19.4% of the population in Slovenia (19th in the index), almost double Romania's best in class 10.5%. Moreover, the average term of ministers of health in Slovenia is 1.68 years, a stark contrast to the ideal of Belgium's 5.08 years, suggesting potential volatility in healthcare leadership and policy direction although it is important to note that the COVID-19 pandemic put unprecedented pressure on health systems and governments globally.

In nutritional habits, while the country ranks 7th with a fruit consumption of 95.6 kgs per capita

annually, it lags on vegetable consumption at 88.3 kgs per capita, resulting in an 18th rank compared to the optimal 287.8 kgs in Croatia. The HPV vaccination rate is another area that could see more improvement with a score of 50% compared to the top feat of 93% (Norway), placing Slovenia 16th. Overall, while Slovenia showcases exemplary practices in some domains, it requires focused attention in others to optimise the health and well-being of its citizens.

- **Romania's Dual Challenge:** Ranking lowest in both the broader European and CEE contexts, Romania's score of 42 accentuates the urgency for comprehensive reforms. Addressing both present and future challenges requires a multi-faceted strategy, ranging from policy shifts to international collaborations.
- **CEE's Collective Performance:** With an average score of 53, the CEE region seems to be slightly lagging behind the broader European average. This discrepancy underscores the need for more consistent efforts across the region, with countries sharing best practices and pushing the envelope in healthcare innovation.

While Norway and Slovenia emerge as leaders in their respective contexts, setting benchmarks in healthcare readiness for the future, Romania's challenges serve as a reminder of the disparities that exist. For Europe, both as individual nations and collective entities, the goal should be to push these averages higher, ensuring a brighter and healthier future for all its citizens.

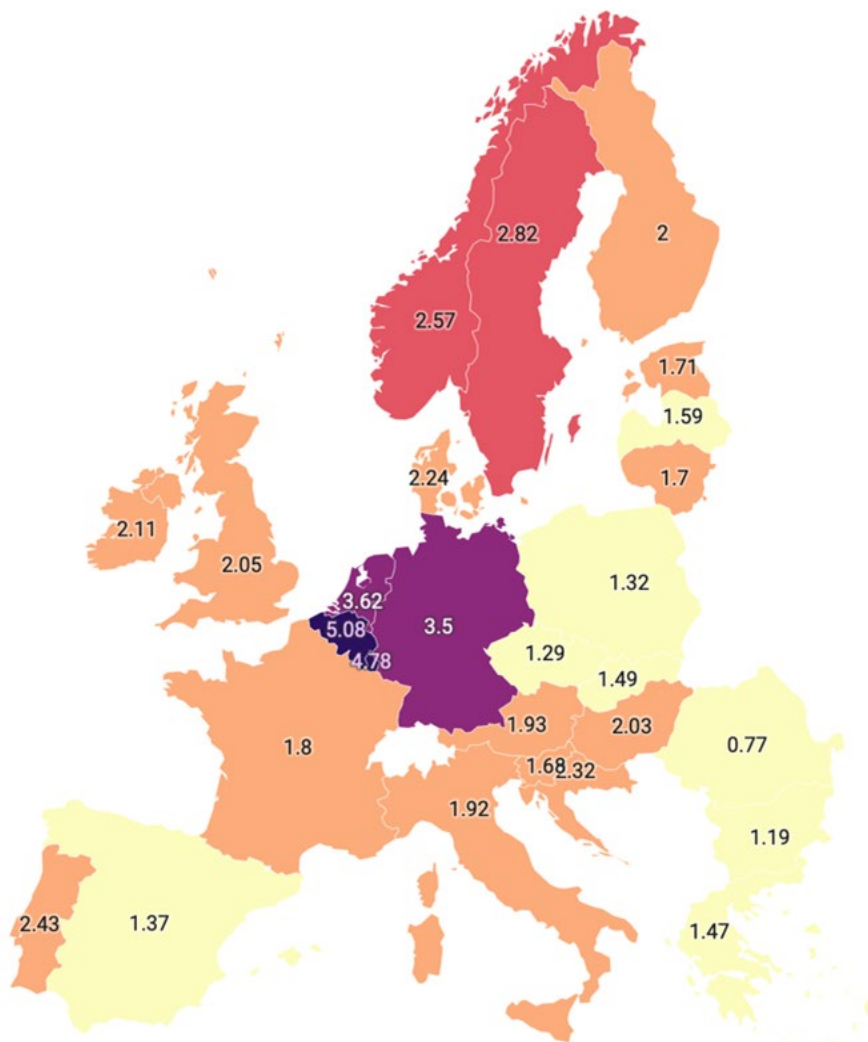
Is a minister of health an endangered species?

The tenure of service of ministers of health can influence countries' future readiness in healthcare. Long-serving ministers can provide policy stability, accumulate valuable institutional memory, and foster strong relationships within the health sector both at the national and international levels. Such consistency can promote more cohesive and informed strategies aimed at addressing health challenges. However, the flip side is potential complacency, stagnation, or reduced innovative approaches if there's no fresh perspective. Moreover, political factors often influence ministerial tenures and thus longevity in office doesn't always correlate with efficacy.

The average tenure of a minister in various European countries reveals interesting insights into

their political stability and possibly the challenges each nation faces. Belgium leads with the most extended ministerial tenure, clocking in at 5.1 years, followed closely by Luxembourg at 4.8 years. Northern and Western European countries like the Netherlands, Germany, and Sweden generally see ministers serving terms of more than 2.5 years. This variation across countries can reflect differences in political systems, governance structures, or even the current socio-political climate. While the tenure of a minister of health can play a role in a country's readiness for future challenges, it is one of many factors. The broader political context, ministerial competence, countries' health infrastructure, and other socio-economic determinants will also significantly impact readiness.

Average tenure of Minister of Health



The role of health ministers became more central and visible during the COVID-19 pandemic, as they were at the forefront of national responses, making critical decisions on lockdowns, testing regimes, and vaccine rollouts. In Europe, the performance of these ministers and by extension the governments they represented came under intense scrutiny. Many health ministers in Europe faced significant

public and political pressure due to the pandemic's challenges. Some were replaced or resigned on account of perceived mishandlings of the crisis, disagreements with national strategy, or other related controversies. This turnover likely reduced the average time in office for health ministers during the pandemic.

Overall Rankings and Insights

The Healthcare Readiness Index (HRI) illuminates the disparities in healthcare preparedness and effectiveness across European countries.

In 2022, Norway maintained its position at the front of the pack, indicating its commitment to future-proofing its healthcare system. Several countries, including Sweden, Ireland, and Germany, also have notable results, indicating strong preparedness for future challenges. Slovenia saw a promising rise in its score, moving from 0.53 in 2021 to 0.60 in 2022.

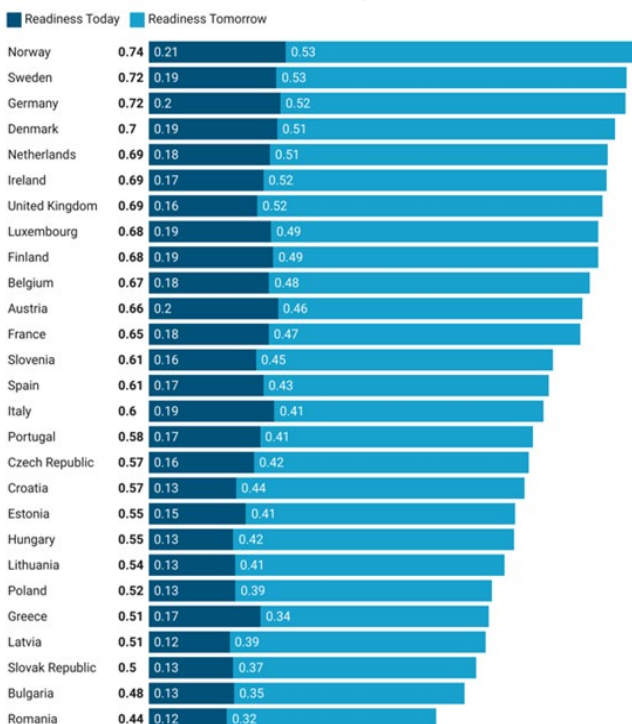
Conversely, countries like Greece and Italy have relatively lower scores, suggesting potential areas for improvement in their readiness to face challenges ahead. Remarkably, a few nations, notably Estonia,

Latvia, Lithuania, and Hungary, witnessed impressive growth in their scores from 2021 to 2022 (especially in Readiness Tomorrow). This progress reflects proactive measures taken to enhance the future readiness of their healthcare systems.

On the other hand, Romania and Bulgaria are at the tail end, though an upward trend in their scores underscores their endeavours to catch up with the rest.

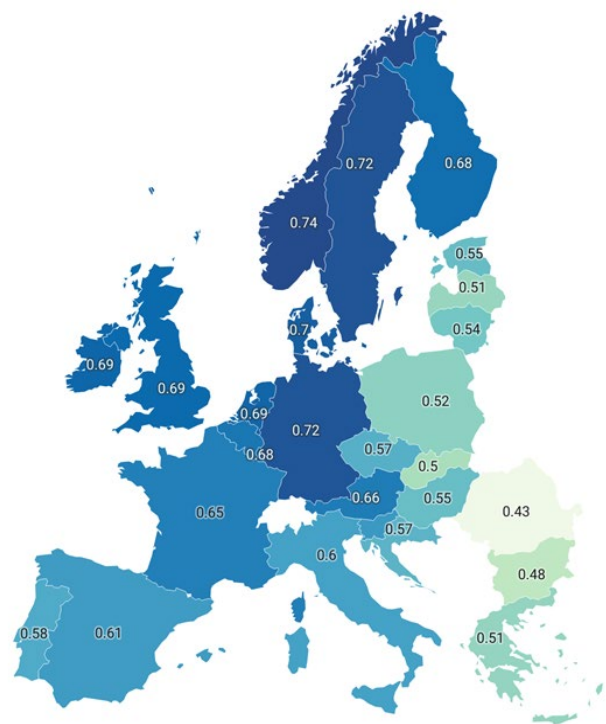
This data spotlights the proactive and adaptive measures countries are taking, highlighting the importance of constant evolution to ensure their healthcare systems are robust and prepared for future challenges.

Health Readiness Index 2022 composition



Created with Datawrapper

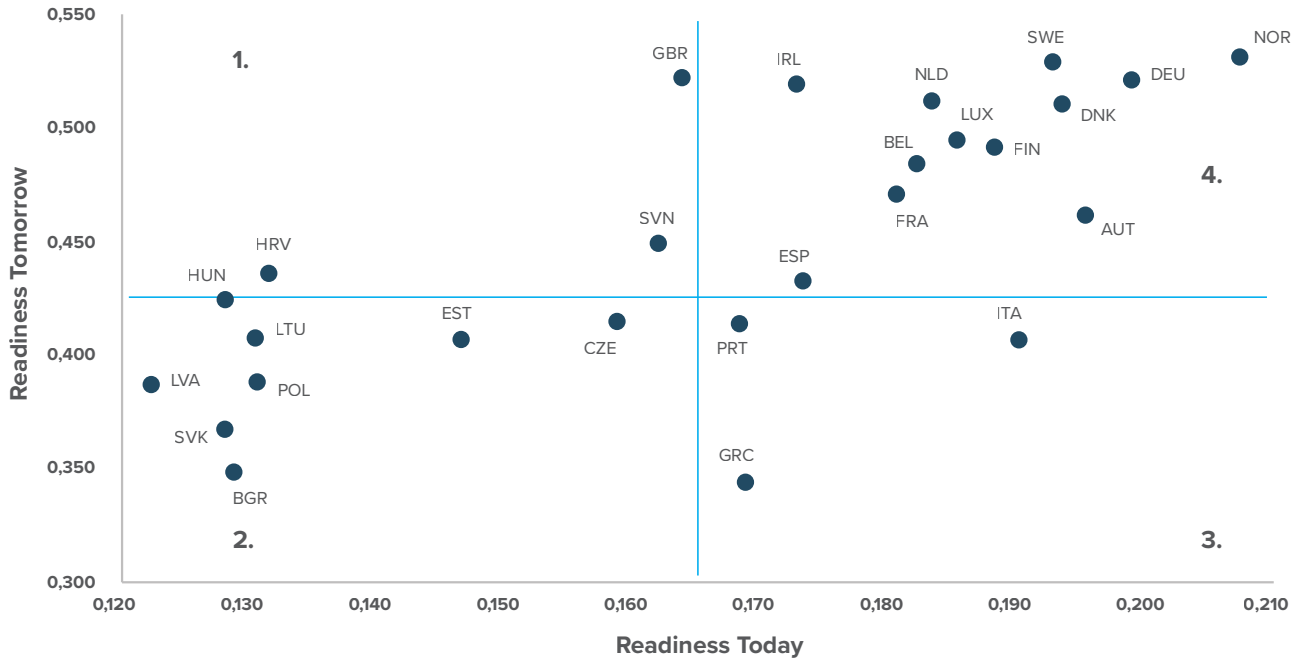
Health Readiness Index 2022



Created with Datawrapper

Quadrant Analysis

Readiness Today and Tomorrow distribution

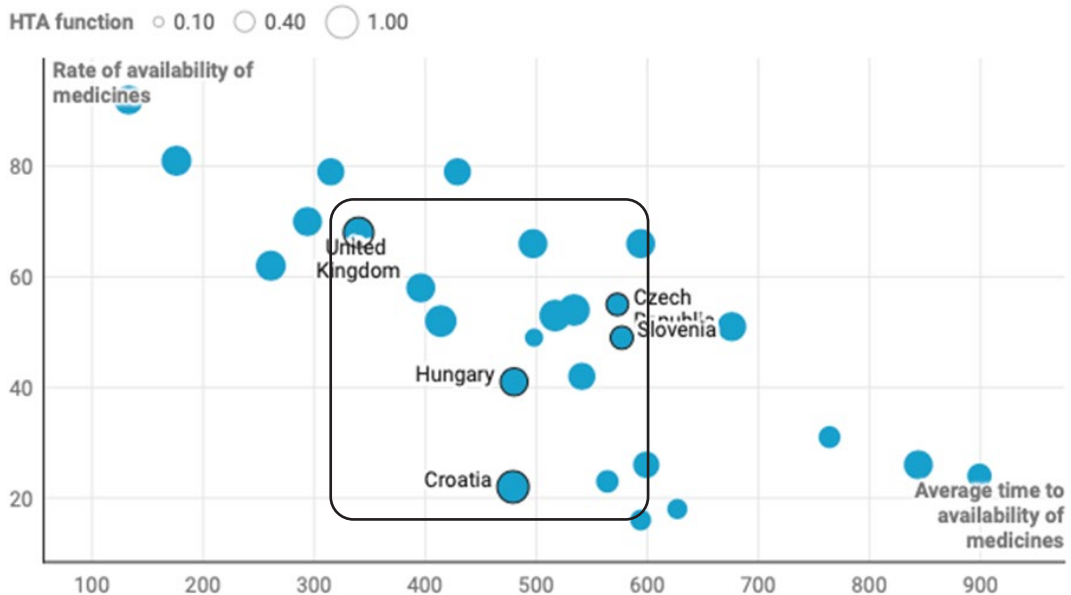


The analysis further segments countries into four distinct quadrants, each characterized by specific features:

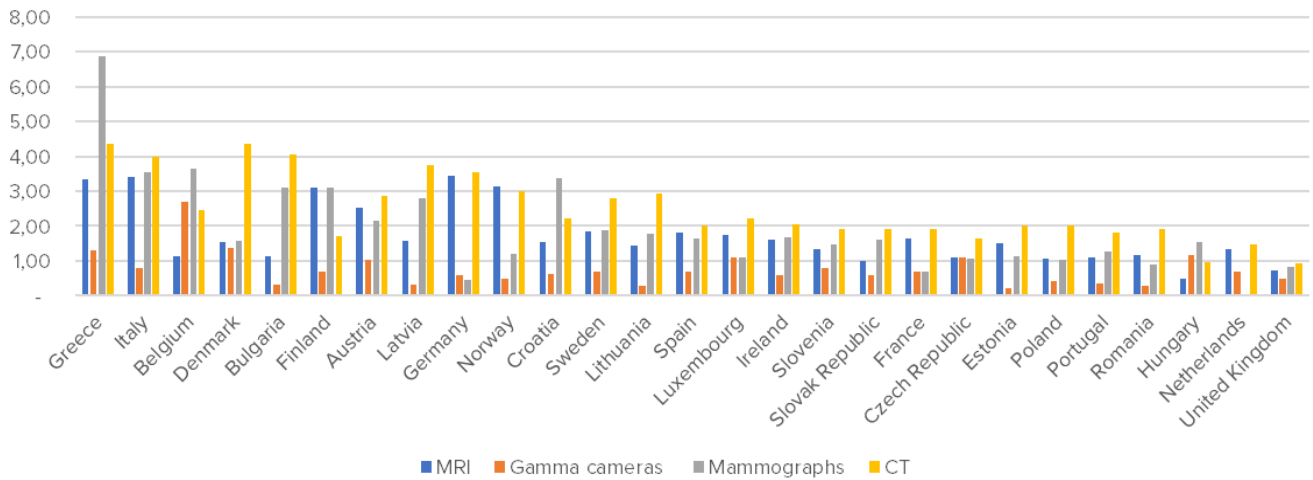
1. Quadrant - Proactive but lacking sufficient infrastructure and resources

Countries in this quadrant display an intriguing paradox: while they have managed to ensure commendable levels of access to medicine, possibly due to forward-thinking policies or

Availability of medicines



Number of units per 100,000 pop



Source: OECD (latest available data)

international collaborations, they falter significantly in providing crucial diagnostic equipment. This presents a unique challenge.

Though medication might be available, without the right diagnostic tools, the risk is that diseases could be identified too late or misdiagnosed altogether, diminishing the impact of these treatment options.

This disparity could stem from a skewed investment focus to a lack of expertise in the diagnostic field. To truly harness their proactive stance on medicine, these countries need to aggressively invest in building a robust diagnostic infrastructure, perhaps taking cues from global best practices or seeking partnerships that bridge this diagnostic gap.

Key characteristics of this quadrant:

- Countries in this quadrant feature various combinations of rate and average times for the availability of medicine, which at the end demonstrates adequate accessibility to medicine, possibly due to policy decisions (e.g., the presence of a functional HTA agency with a broader mandate) allowing early access.
- Significant gaps in diagnostic infrastructure like MRIs, CT scans, and mammographs.

Implications:

- While these countries will be able to treat diseases, the delay in diagnosis might lead to late interventions, thereby reducing treatment efficacy.

Possible Reasons:

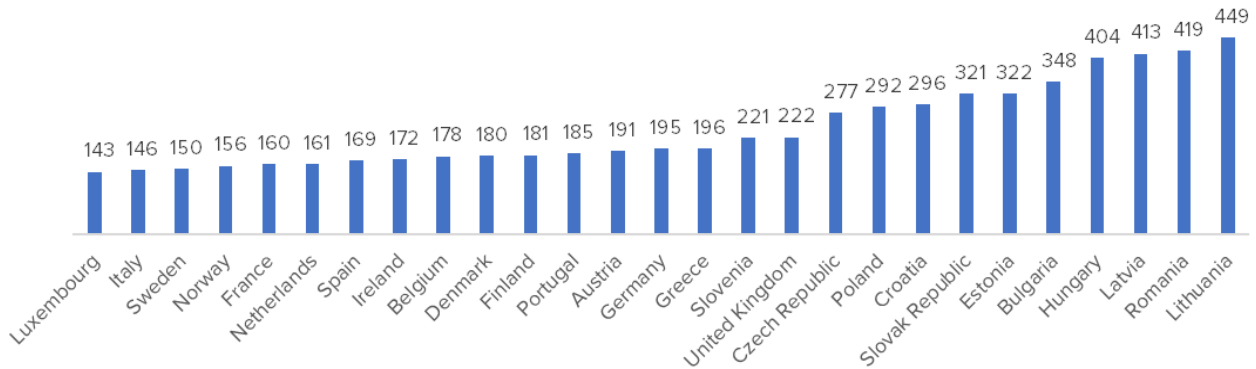
- Limited investment in medical infrastructure.
- Prioritisation of access to medicine over diagnostic capabilities.
- Inadequate training or expertise in diagnostic fields.

Recommendations:

- Increase investments in overall infrastructure.
- Collaborate with countries in the Resilient Quadrant for knowledge and technology transfer.
- Introduce training programmes to enhance diagnostic expertise.

Case study of the quadrant: Hungary as a surprise guest

Avoidable mortality



Source: OECD Database (latest available data)

In 2019, with 404 avoidable deaths per 100,000 people, Hungary stood in the top 5 of the EU. These figures are more than mere statistics; they reflect deep-rooted societal and health system challenges that need urgent redress.

The predominant causes of these deaths give further insight into the situation, with lung cancer standing out as the prime culprit, an indicator of a pervasive smoking habit among Hungarians. Ischemic heart disease follows closely behind, signifying poor dietary habits, a lack of exercise, and potentially genetic predispositions. Alcohol-related diseases further underscore the prevalence

of behavioural and societal issues tied to substance abuse.

Hungary’s historical approach to healthcare has tended more towards reactive than preventive measures, as highlighted by the decline in preventive care spending from 3.9% to 3.2% of total health expenditures between 2010 and 2019. However, acknowledging the bleak health statistics and the benefits of early intervention, the Minister of Human Capacities introduced five national health programmes in 2019 to run through 2022. These initiatives - emphasising paediatric health, circulatory diseases, mental health, musculoskeletal disorders, and cancer - reflect a strategic pivot



Note: The overall number of deaths related to these risk factors is lower than the sum of each one taken individually, because the same death can be attributed to more than one risk factor. Dietary risks include 14 components such as low fruit and vegetable intake, and high sugar-sweetened beverages consumption. Air pollution refers to exposure to PM_{2.5} and ozone. Sources: IHME (2020), Global Health Data Exchange (estimates refer to 2019).

towards holistic and pre-emptive healthcare. While this lifecycle approach to health is commendable, ensuring effective implementation, adequate funding, and inclusivity of these programmes is crucial.

The shift towards a more preventative approach to health is further underscored by the expansion of the Public Health Product Tax to include items like alcopops. This is in conjunction with a significant planned investment of HUF 83.5 billion (EUR 229 million) directed towards sports facilities. These initiatives indicate Hungary's multi-pronged strategy to promote healthier lifestyles by both discouraging unhealthy consumption and encouraging physical activity among its citizens. Combining policy measures targeting consumption with investments in sports infrastructure can potentially have a synergistic effect in fostering a healthier population in the long run.

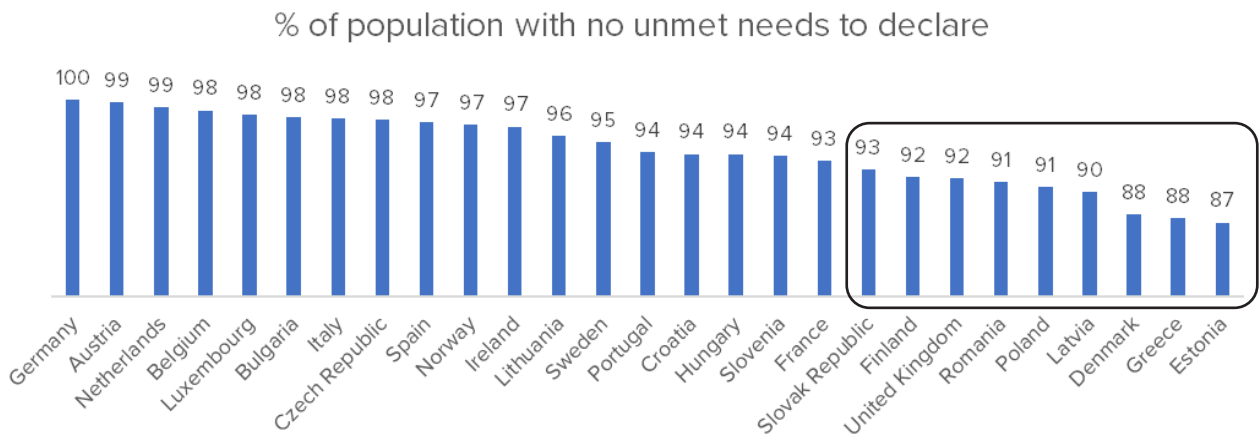
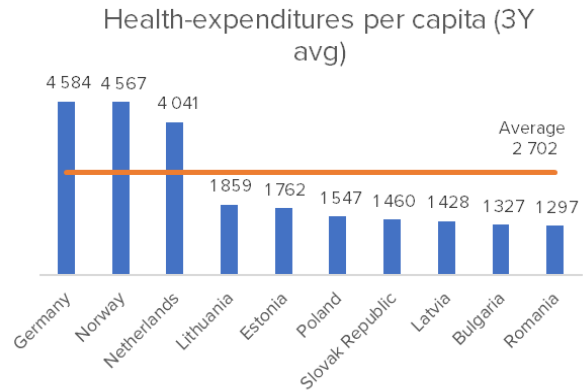
The "Three Generations for Health" initiative stands out as a pivotal step, incorporated within Hungary's national health programmes spanning the 2019-22 period. This initiative equips GP clusters, practices, and municipalities with a substantial financial boost, ranging from HUF 50 million to 90 million (equivalent to EUR 159,000 to 286,000), earmarked specifically for public health and preventive services. An impressive sum of nearly HUF 6 billion (or EUR 16.5 million) has been allocated for this initiative alone. The primary thrust of the activities funded under the initiative revolves around promoting a healthy diet, emphasising regular physical activity, and championing smoking cessation policies. An illustrative example of the initiative's adaptability was seen during the COVID-19 pandemic when participating GPs were motivated to intensify preventive care, especially for patients with diabetes.

2. Quadrant - Least developed healthcare systems in the EU

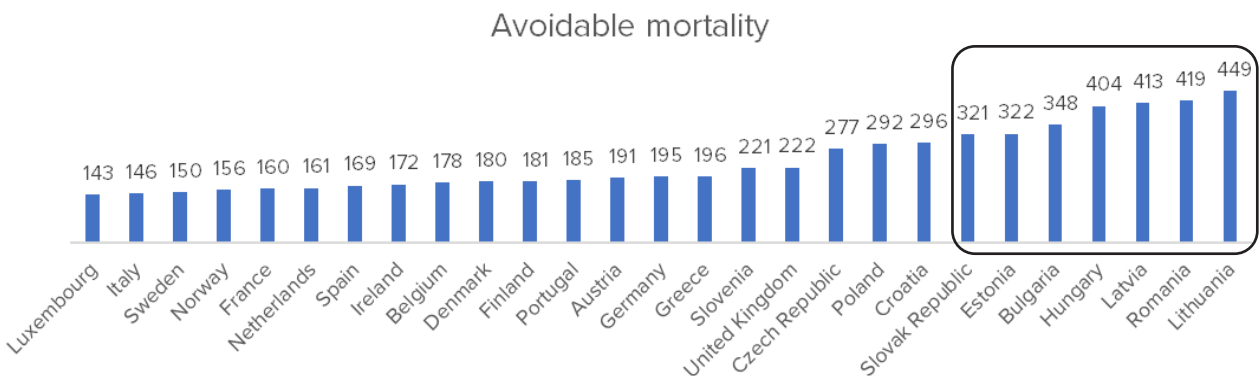
Countries in this quadrant face the harshest realities in the healthcare spectrum. With a limited emphasis on preventive care and infrastructure that seems ill-equipped to handle even the current demand for care underline the stark reality of the healthcare landscape. A lack of innovative care further exacerbates this, leading to a significant proportion of the population grappling with unmet health needs. Especially looking at the Baltics and post-communist countries.

The root causes of these shortcomings appear to span a gamut of issues, from constrained budgets and political instability to systemic neglect of

healthcare as a priority. To navigate the quagmire, it is essential for these countries to actively seek out international collaborations, prioritise preventive care to reduce long-term healthcare burdens, and realign their strategies with an emphasis on holistic healthcare development.

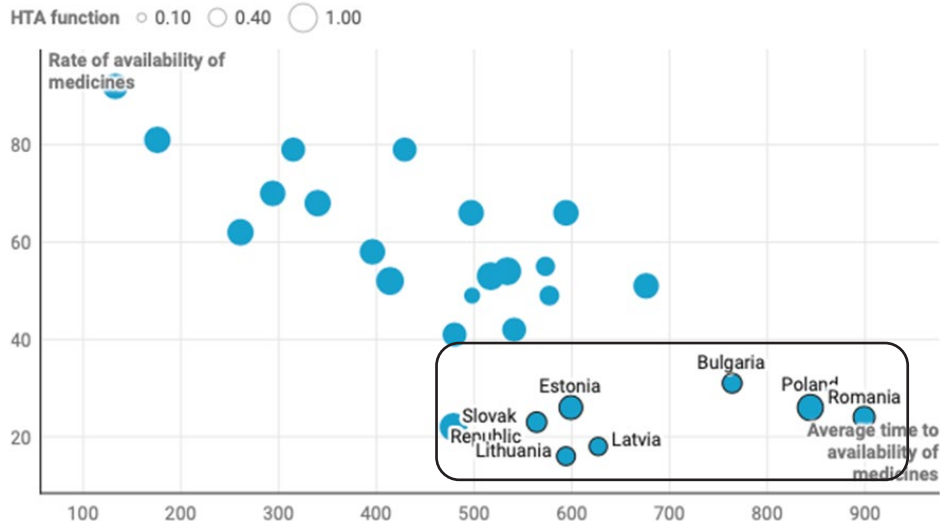


Source: Eurostat (latest available data)

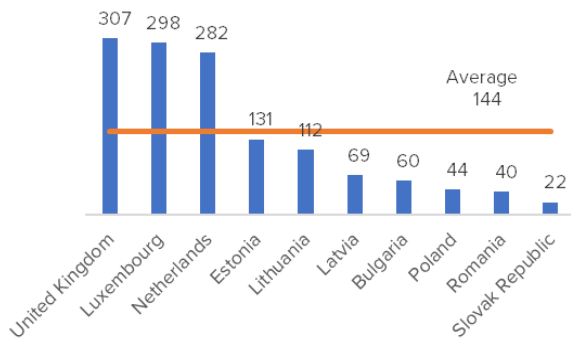


Source: OECD (latest available data)

Availability of medicines



Expenditures on preventive measures



Source: OECD (latest available data)

Key characteristics of this quadrant:

- Limited focus on preventive care.
- Insufficient infrastructure to tackle basic health determinants.

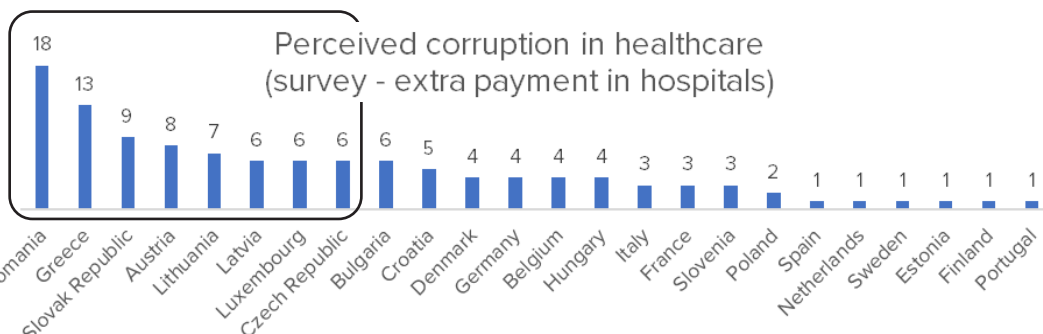
- Poor access to innovative care and treatments.

Implications:

- These countries are more likely to face higher morbidity and mortality rates.
- Their health systems might be constantly overwhelmed.
- The general populations of these countries may face frequent health crises.

Possible Reasons:

- Limited health budget allocations.
- Lack of emphasis on healthcare in national policies.
- External factors like political instability, economic crises, or corruption.



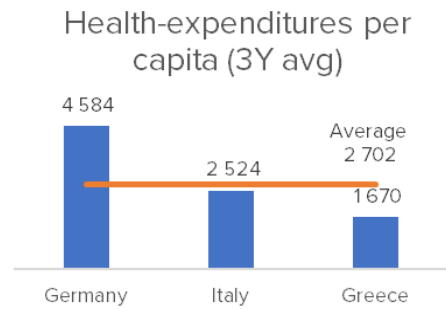
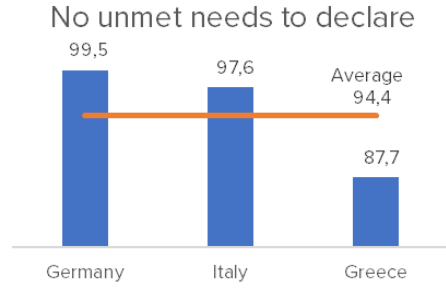
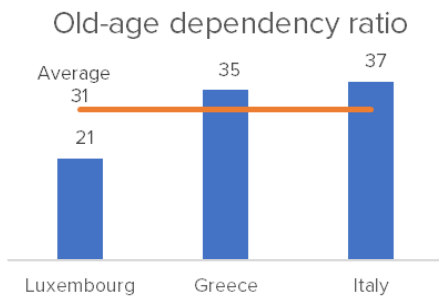
Source: Special Eurobarometer 523 March-April 2022 "Corruption" (Apart from official fees did you have to give an extra payment or a valuable gift to a nurse or a doctor, or make a donation to the hospital? -%)

Recommendations:

- Seek international aid and collaborations to bolster healthcare infrastructure.
- Prioritise preventive care to reduce long-term costs.
- More target-oriented financing and budgetary schemes are strongly needed.

3. Quadrant - The Greek-Italian Anomaly

This quadrant, dominated by Greece and Italy, presents confounding cases. Despite being among the leading countries in medical innovation, these nations appear to be struggling to grapple with delivering basic healthcare services to their populations. Such discrepancies might stem from larger structural and economic issues, coupled with the pressures of aging populations that are placing greater demand on their healthcare systems.



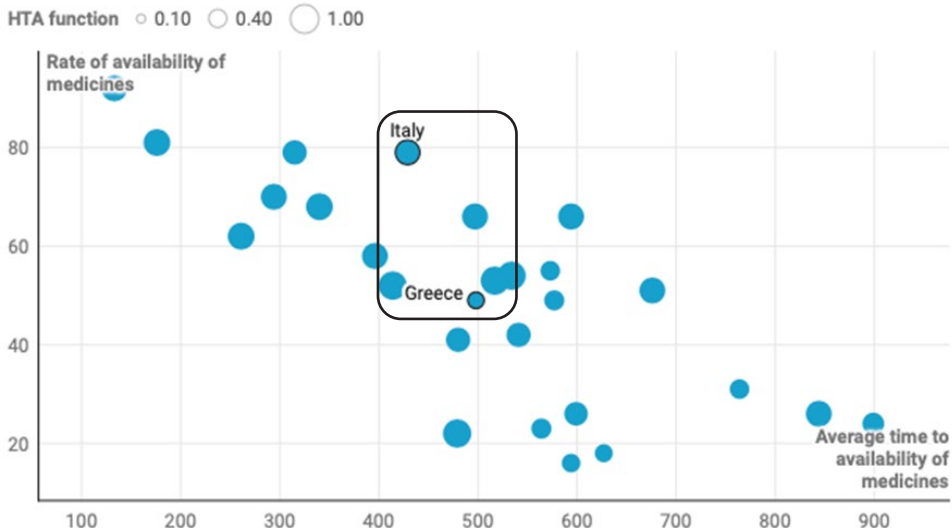
Source: World Bank, Eurostat, OECD (latest available data)

The evident high volume of unmet health needs in Greece suggests a significant disconnect between what is available in terms of innovation and what is accessible to the average citizen. For these countries, the path forward might lie in restructuring their healthcare delivery mechanisms, bolstering community-based health initiatives, and ensuring that innovations in healthcare are not just acquired but effectively integrated into the health system.

Key characteristics of this quadrant:

- Despite their broad access to medical innovations, they suffer from a lack of basic healthcare services.

Availability of medicines



- High reported unmet health needs.

Implications:

- A mismatch between medical innovations and their actual deployment in healthcare services.
- High dissatisfaction among the population due to unmet health needs.

Possible Reasons:

- Economic challenges and debt crises affecting public spending on health.
- Structural inefficiencies in the health sector.
- Aging population leading to increased demand.

Recommendations:

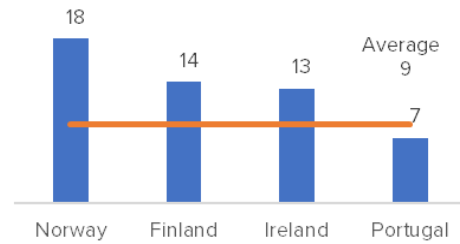
- Restructure healthcare delivery for better efficiency.
- Explore public-private partnerships to bridge gaps.
- Launch community health initiatives.

4. Quadrant - Resilient

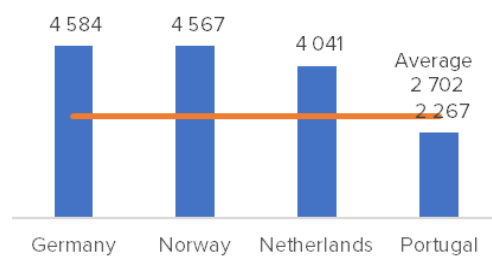
This quadrant encompasses a large number of countries, which evokes the need for a separate analysis. This paper, however, aims to shed light primarily on the top and worst performing countries of the grouping.

Epitomising healthcare readiness, countries in this quadrant serve as beacons of what is achievable when health is prioritised at every level. Through robust financing, a plethora of human resources, and visions that prioritise determinants of health and preventive care, they have managed to create systems that are not just effective for addressing current challenges but are also future-ready.

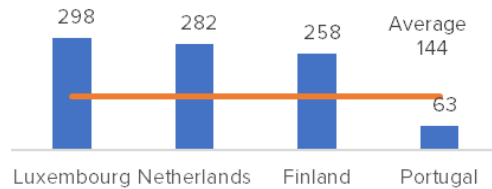
Practising nurses - Top 3 vs the worst in cluster



Health-expenditures per capita (3Y avg)



Expenditures on preventive measures - top3 vs the worst in cluster

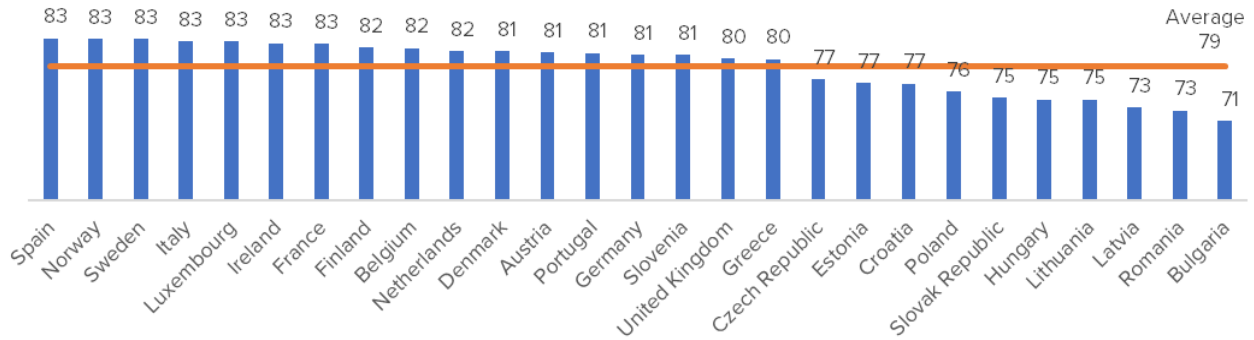


Source: OECD, World Bank (latest available data)

Their achievements, though commendable, still come with the responsibility to continuously engage in introspection to stay ahead and an obligation to share their expertise with countries that are still striving to improve. By investing in research, fostering international health collaborations, and continuously recalibrating their strategies, they can ensure they remain at the forefront of global health excellence.

In terms of access to innovations and medicine, most of these countries rank among the top performers within the cluster. With few exceptions (e.g., Portugal and Ireland), the availability of medicine rates are high, which is a pivotal aspect of modern healthcare systems in enabling

Life expectancy at birth



Source: OECD (latest available data)

timely patient access to the latest therapeutic advancements.

Key characteristics of this quadrant:

- Robust financial mechanisms supporting healthcare services.
- Ample human resources and facilities to provide quality care.
- Strong emphasis on preventive care.
- Stability in healthcare leadership and the overall policy direction.

Implications:

- These countries likely enjoy better health outcomes and life expectancies.
- They are best prepared for unforeseen health challenges.

Possible Reasons:

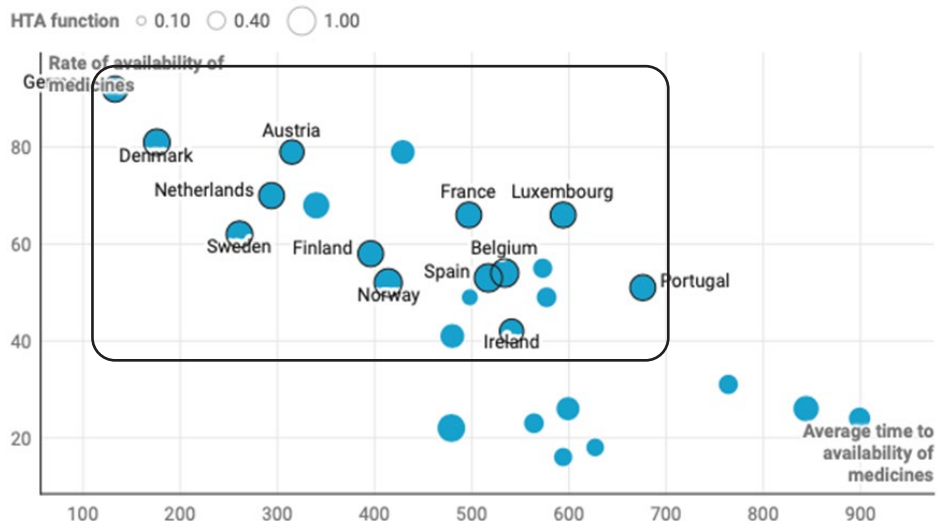
- Strong emphasis on health in national policies.
- Efficient health systems management.
- Active collaboration with global health entities.

Recommendations:

- Maintain momentum and continuously review health strategies.
- Share expertise and collaborate with countries in the other quadrants.
- Invest in research to stay ahead on healthcare innovation.

In conclusion, understanding the positioning of countries within these quadrants can contribute to better targeted interventions, collaborations, and policy modifications and ultimately aiming for universal health coverage and better health outcomes for all citizens.

Availability of medicines



Summary

The Health Readiness Index is a comprehensive tool designed to evaluate a country's preparedness to face health crises. It assesses various indicators, from infrastructure and policy to health behaviours, providing a holistic view of health system readiness. Countries are ranked based on their scores, allowing for comparative study and the development of insights into areas for improvement. By understanding their HRI ranking, countries can make informed decisions to strengthen the ability of their health systems to respond to future challenges.

Here are the key insights:

1. **Dominance of the West and North:** Western European and Scandinavian countries, led by Norway, exhibit superior readiness in healthcare. Their historical advantage in terms of economic stability, healthcare infrastructure, and policies is reflected in their rankings in the top tier of countries.
2. **Drivers of Excellence:** The leading countries owe their top positions to:
 - **Innovation Adoption:** These nations have been quick to adopt and integrate innovative technologies into their healthcare ecosystems.
 - **Financing Prowess:** Through robust financing mechanisms, these countries ensure that their healthcare systems have consistent inflow, leading to quality care and research.
 - **Holistic Healthcare Network:** Efficient coordination among providers, high standards of care, and a patient-centric approach are evident.
 - **Preventive Measures:** Recognising that prevention is better than treatment, there is a pronounced emphasis on addressing determinants of health, such as lifestyle choices.
3. **Challenges in the East:** Countries ranked lower in the HRI predominantly come from Central and Eastern Europe. Their challenges are multi-faceted:

- **Policy Inconsistencies:** Frequent changes in health policies can lead to systemic inefficiencies and can deter long-term planning.
- **Workforce Instability:** The frequent turnover in healthcare professionals, driven by migration for better job opportunities or dissatisfaction, can lead to gaps in service delivery.
- **Inefficient Spending:** Despite potential high expenditures, the spending may not always be directed towards areas of maximum impact, like preventive healthcare.
- **Participation Gaps:** The lack of adoption of newer and more effective payment mechanisms hinder the development of an integrated, efficient system.

In summary, while Western European and Scandinavian nations enjoy the cumulative benefits of consistent policies, stable financing, and advanced infrastructure, their Eastern counterparts are grappling with systemic issues. Addressing these challenges would require a concerted effort, greater policy consistency, and perhaps learning from the successes of their western neighbours.

The Healthcare Readiness Index offers a nuanced perspective on healthcare systems across Europe, highlighting both strengths and weaknesses. It serves as a critical guide for policymakers, healthcare providers, and stakeholders to make informed decisions and invest strategically. The differences in readiness today versus readiness tomorrow indicators provide essential insights into not only the current state but also the future trajectory of healthcare systems. By recognising these variations and understanding the underlying factors behind them, countries can take targeted actions to improve their readiness for both present and future healthcare challenges.

This comprehensive assessment is instrumental in fostering collaboration, innovation, and strategic planning to ensure that healthcare systems across the region are robust, resilient, and responsive to the ever-evolving healthcare landscape.

Looking Ahead

Health readiness is not a static concept; it requires ongoing attention, investment, and evolution. The lessons drawn from the HRI 2022 illuminate not just the present status of healthcare readiness across different countries but also the vital elements that constitute a resilient system.

The dynamics of healthcare readiness are intricate and continually changing. The current index ranking can swiftly change, with countries either progressing or declining contingent on their political will, policy decisions, and investments in healthcare. The HRI serves as a timely reminder that constant vigilance, thoughtful planning, and strategic action are essential to safeguarding the health and well-being of populations.

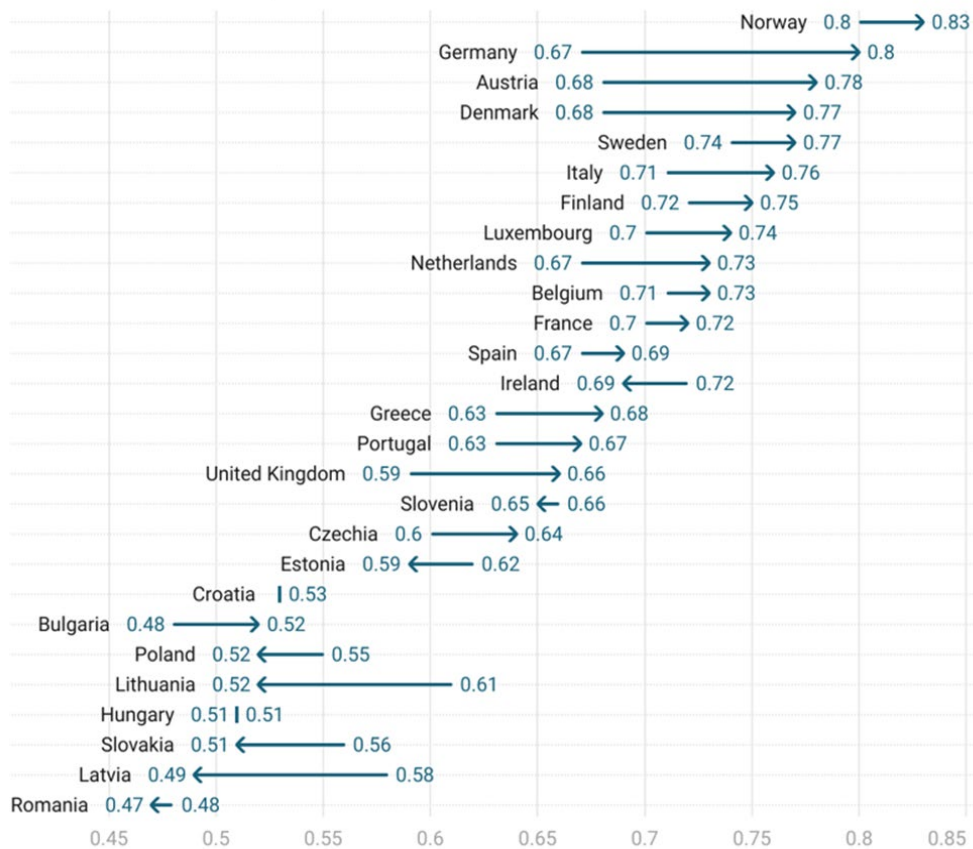
In conclusion, the Healthcare Readiness Index 2022 offers a comprehensive and nuanced perspective that is instrumental for policymakers, healthcare providers, and stakeholders. It fosters a broader understanding and facilitates targeted interventions to build a health system that is intended to not just be robust today but resilient for the challenges of tomorrow.

Annexes

Annex 1: Comparison to 2021

Readiness Today

Readiness Today - 2022 vs 2021



Created with Datawrapper

The readiness of the healthcare systems of various countries can be gauged based on the aggregated data from 2021 and 2022. This data offers valuable insight into the improvement or regression that countries have experienced within a year.

Key takeaways:

1. Most Improved:

- Germany has seen the most significant jump in its readiness, moving from 0.67 in 2021 to 0.80 in 2022.

- Austria and Denmark also recorded notable improvements in their scores.

2. Some Declines Noted:

- Estonia experienced a drop from 0.62 in 2021 to 0.59 in 2022.
- Ireland and Latvia too experienced a decrease in their readiness scores over the past year.

3. Consistent Performers:

- Hungary maintained a steady HRI score across both years, indicating that there

have been no significant changes in its healthcare readiness over the period.

4. New Entries:

- Croatia was not listed in the 2021 index but has entered the 2022 index with a score of 0.53.

5. Leading the Pack:

- Norway, already at the forefront in 2021, further increased its lead in 2022, reaffirming its consistent and commendable emphasis on healthcare preparedness.

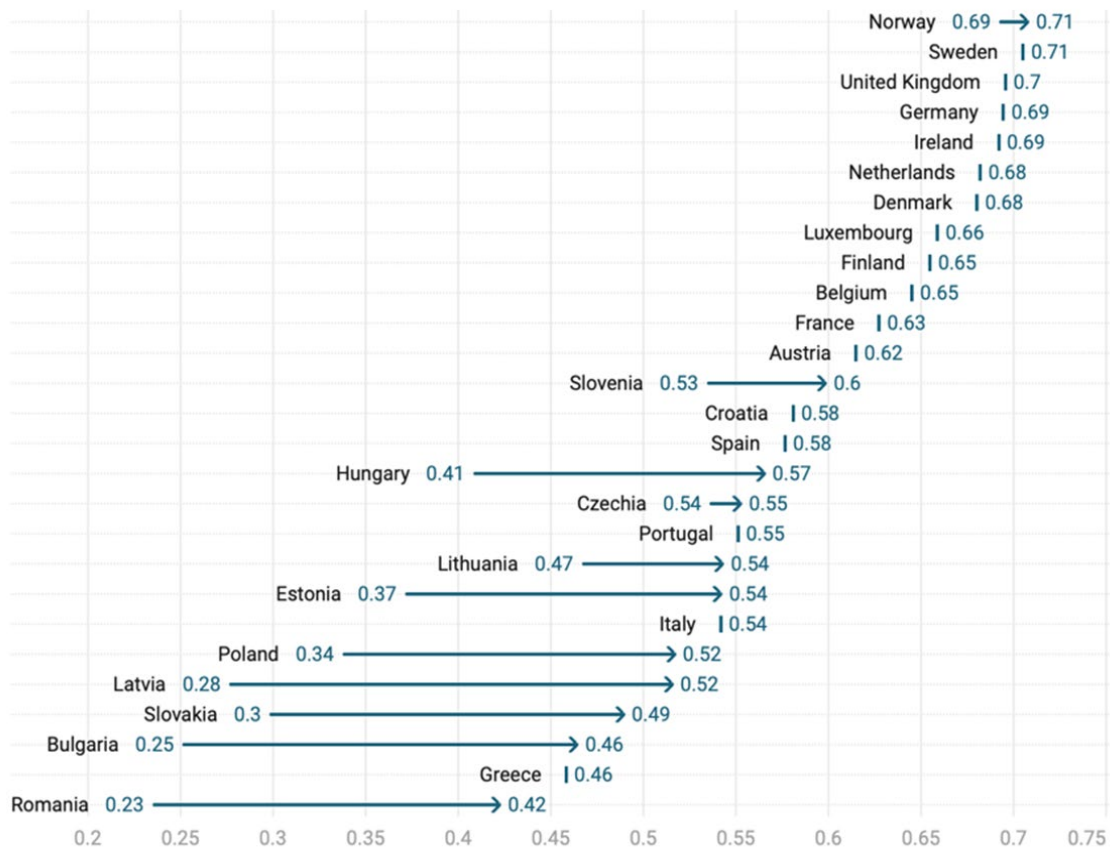
6. Laggards:

- Romania and Bulgaria remain at the lower end of the scale, though Bulgaria showed incremental progress in its score in 2022.

This data underscores the dynamic nature of healthcare systems, influenced by policy changes, investments, innovations, and external challenges. Monitoring such indices can help nations identify gaps, learn from high-performers, and implement strategies to enhance their healthcare readiness for future challenges.

Readiness Tomorrow

Readiness Tomorrow - 2022 vs 2021



In 2021, the Readiness Tomorrow index was prepared only for several selected countries, therefore a year-over-year analysis of this component is only partially possible.

Key takeaways from the available data for selected countries for 2021 and 2022:

1. Steadfast Leadership:

- Norway continues to set a benchmark, maintaining a high score for both 2021 and 2022.

2. Major Progress Makers:

- Slovenia has experienced a noticeable jump, moving closer to the lead.

- Estonia and Latvia have demonstrated impressive growth, with their scores rising significantly from 2021 to 2022.
- 3. Consistent Performers:**
 - The Czech Republic maintains a stable score, reflecting a consistent healthcare readiness approach.
 - 4. Emerging Improvements:**
 - Several countries, including Lithuania, Slovakia, Poland, Hungary, and Bulgaria, have witnessed growth in their scores, indicating a forward-moving trajectory in their healthcare systems.
 - 5. Rapid Recovery:**
 - Though Romania started at a lower base, its upward movement signals efforts towards boosting its future healthcare readiness.
 - 6. Overall Insight:**
 - While variation in the scores is apparent, the upward trend observed across most countries emphasises their commitment to enhancing healthcare preparedness to face forthcoming challenges.

Annex 2: Detailed overview of indicators

1. Readiness today

1.1 Does supply of care meet demand?

Every high-performance health system is characterized by its ability to ensure it meets all healthcare demands in a time manner that minimises potential health risks to the population. Risks are most often associated with insufficient system capacity, which can generate increased demand and, in the worst cases, system overload.

To adequately estimate the level of demand for healthcare, we need to look at a few basic factors. The core parameter for monitoring both the performance and the demand side of the system primarily concerns avoidable mortality. The DALY indicator complements life expectancy and figures on premature deaths with a metric examining lost quality years of life (now a necessary part of any measurement of health system performance).

1.1.1 Avoidable mortality

The COVID-19 pandemic has underlined the importance of vaccination and accompanying

benefits such as improved avoidable mortality. This variable is a reflection of the prior actions of countries affecting their present or future public health outcomes. EUROSTAT's population standardised avoidable mortality data was used for this composite index where lower values suggest better healthcare quality.

1.1.2 Disease burden (DALYs)

As mortality falls short in revealing a complete picture of disease borne by individuals, a disability-adjusted life year (DALY) metric was also included in the analysis. This time-based measure combines number of years lost to premature mortality and years of healthy life lost due to disability. The World Health Organization (WHO) measures these index values and shares them publicly where lower values indicate better scores.

1.1.3 Infant mortality

The probability of dying between birth and 1 year of age is an index calculated as a percentage per 1000 live births by the United Nations (UN) and published by the World Bank. There is no dispute that this measure is a very strong reflection of the current state of healthcare and widely impactful on the future of countries.

1.1.4 Prevalence of cancer

This indicator is partly a result of present and past governmental regulations in public health. The inclusion of all types of cancer ensures that all factors were taken into account. The source data, which came from the WHO, is expressed as a quantity per 100 000 inhabitants where lower values are more favourable.

1.1.5 Life expectancy at birth and at age 65

This is a commonly used indicator to assess the quality of life in countries - it combines multiple variables but mainly population health status. We combined multiple data sources from OECD and partly from EUROSTAT to obtain data for all CEE countries. A higher number of expected life years equates to better quality of life.

1.2 Capacity of the system

For demand to meet supply, the healthcare delivery system must be sufficiently secure in terms of human resources, therapies, equipment, finances, and processes. If a system is malnourished, it will not be possible for it to meet all the requirements of the population, which will have a major impact on the key parameters listed in the previous section.

1.2.1 Availability of HR (physicians and nurses)

A sufficiently sized and qualified healthcare workforce is a key element for ensuring that high-quality services are provided to patients. We included this in our composite index expressed as the number of doctors/nurses per 1000 inhabitants and hypothesised that greater numbers of personnel results in better provision of services. The data is available on the World Bank website.

1.2.2 Availability of equipment (CT, MR, linear accelerators, gamma cameras, mammographs, and other radiation therapy equipment)

The availability of equipment is essential to ensuring excellent care for patients. The timely diagnosis of severe illness can indeed be a determining factor towards saving the lives of patients. The amount of medical equipment per 1 000 000 inhabitants (based on OECD data) was used.

1.2.3 Availability of medicines (Rate of availability of medicines)

After diagnosing illness or disease comes treatment. Availability of newest and potentially the best medicines improve chances of successful treatment of patient. The number of approved/ categorized medicines, consequently, was used to determine the preparedness of healthcare systems. The scores were derived from data collected by the European Federation of Pharmaceutical Industries and Associations (EFPIA) and expressed as the number of approved medicines per 1 000 000 inhabitants.

1.2.4 Availability of finances (Overall spending per capita)

Without proper financing of healthcare, government cannot be expected to provide high-quality care. This indicator is expressed as a 3-year average of overall spending per capita. We obtained this data from OECD and EUROSTAT where a higher amount spent is presumed essential for better care of patients.

1.2.5 The Universal Health Coverage index

The UHC effective coverage index is comprised of 23 indicators drawn across a range of health service areas and is meant to represent healthcare needs over the life course. The Institute for Health Metrics and Evaluation calculates index values and this data is published by the Global Health Data Exchange (GHDE) with higher index scores more favourable.

2. Readiness tomorrow

2.1 Future demand for healthcare

This component analyses factors that are expected to have an impact on the quantity and type of care demanded in the future. Since countries that have following factors under control might not need that many resources and therefore could easily be ready for all requirements.

The basic factors influencing the future demand for health care primarily pertain to behaviour and depend mostly on the current age and educational structures.

The extent to which people are attentive to their own health today most fundamentally affects their healthcare needs in the future. At the same time, however, societies must enjoy conditions conducive for optimising their health to the maximum. For instance, preventive examinations and vaccination options are an essential tool in the fight against the excessive demands that could be placed on health systems in the future.

2.1.1 Determinants of future need

2.1.1.1 Incidence and estimates of selected diseases (all cancers)

As opposed to the previous cancer prevalence indicator this variable focuses on future prevalence estimated up to 2040 by the WHO. The same applies for this indicator as the prior one though - it is better to keep these rates lower as expressed as a number per 100 000 inhabitants.

2.1.1.2 Risk factors (% consumption of alcohol, % of daily smokers, kg of sugar; obesity, fruits/vegetables consumption and pollution index)

The European Commission collects data on these risk factors. The fruit and vegetable consumption figures are expressed as kilos consumed per capita with higher values more desirable. Obesity and smoking, meanwhile, are expressed as a share of

the population, pollution as ambient particulate matter pollution per cubic meter, followed by average country BMI. The World Bank data was used alcohol consumption, expressed as litres of pure alcohol, projected estimates, 15+ years of age.

2.1.1.3 Expenditure on preventive measures

Similar to the availability of finances indicator, OECD data was used – this time with an emphasis on preventive measures such as expenditures on primary care prevention, vaccination, etc... The indicator is expressed as a 3-year average of overall spending per capita for preventive measures.

2.1.1.4 Vaccination rate (HPV)

HPV is one of the most common viruses circulating in populations – it is well documented that it can cause potentially deadly cervical cancer. UNICEF collects HPV vaccination rates, which can help authorities improve decision making in this area.

2.1.2 Socio-demographic resilience

2.1.2.1 Level of achieved education (tertiary education)

More time and effort invested into the education of kids results in better overall quality of life. For this reason, this metric was included in the index, with an emphasis on tertiary education since it is not compulsory. The EUROSTAT database (proportion of the population who reached tertiary education) was used.

2.1.2.2 Dependency ratio (old age dependency ratio, 65+/20-64)

The old-age dependency ratio in the EU has increased markedly over the last 20 years. In 2001 the dependency ratio stood at 25.9% and in beginning of 2020 it was 34.8% with estimation of 56.7% by 2050. EUROSTAT data (expressed as a share of the population) was used for this metric, with lower values more favourable.

2.2 Ability to predict and adopt to changes

For the countries to be able to deal with the pitfalls of the future, which are mainly based on insufficient resources and growing demand, it must look for various solutions, especially solutions in innovations and innovative approaches to treatment, resp. to healthcare provision as a whole but also funding schemes and the ability of systems to financially meet all the evolving health needs of their respective populations.

In this case, however, we must look largely, but not exclusively, at qualitative rather than quantitative metrics, with three areas the main focal points. One concerns the opportunity/possibility for bringing in innovation, either in the form of innovative approaches and early access schemes or through agencies that can accelerate the innovation process. A second pertains to ensuring stability, which is most often developed based on long-term funding rules and the existence of investment strategies, which in case of many EU countries aren't usually present.

The resources needed to meet all future needs can also be sought outside public finances. However, the basic premise stands that these resources not be overused already. At the same time, it is crucial that, in the event of high usage, the population does not experience a high degree of uncertainty in ensuring their own health security. Hence, the selected indicators are:

2.2.1 “Innovation index”

2.2.1.1 Median time to availability of medicines

EFPIA, with IQVIA, conducted a survey focused on the availability of medicines with a focus on waiting times until final approval. The findings pinpointed the fact that more advanced countries take less time to authorise new drugs for use. For example, the median wait time in Germany is 50 days compared to Romania's 859 days. The findings

of this survey were used in our composite index, where values were expressed as days between marketing authorization and date of availability.

2.2.1.2 Does a country have an HTA agency with clear and transparent decision rules?

Independent institutions should always be included in decision making process. We have collected data from government webpages to see if the presence of an HTA that exerts positive effects on public healthcare. This indicator is represented as a Boolean variable where 1 represents evidence that such an agency exists and 0 where it does not.

2.2.1.3 Does a country have flexible conditions for innovative solutions?

Does a country have early access schemes / special conditions for innovative solutions? Does a country have any type of innovation fund / scheme?

As we know with innovation population cannot thrive. That's why we also focused on innovations in healthcare to see if countries are investing in their own futures. Numerous research articles and documents were examined to discern whether sufficient evidence exists for such visionary approaches in different countries. This variable, like the previous factor, is expressed in Boolean terms under the same rules.

2.2.2 Stability index

2.2.2.1 Does a country conduct long-term budgeting?

(horizontal scanning, ageing analysis, long-term forecasts)

This indicator was included to assess if there is stability in investments in healthcare which can mitigate risks from changes in government. This data was collected from multiple government sources and represented in the form of a Boolean variable.

2.2.2.2 Does a country have an investment strategy in the health sector?

As the name of this indicator suggests, we were looking for indications concerning whether countries are pursuing any investment strategies in the health sector. This factor was included given that long-term strategies mostly affect future readiness. Like previous qualitative indicators, this one was thoroughly researched to assess the existence of such an investment strategy, with 1 representing its presence and 0 its absence.

2.2.2.3 Average tenure of ministers of health

Without continuity in ministers, it may prove difficult for them to deliver on their visions. This variable, therefore, reflects the stability of the health sector. We calculated the number of days that ministers were in office from data available on Wikipedia.

2.3 Ability to sustain future challenges

(Focused primarily on financial resources)

2.3.1 Proportion of OOP spending

This indicator estimates how much households in each country spend on health directly out of pocket as a share of total current health expenditures. The indicator estimates are sourced from a PwC analysis for EFPIA and are available online.

2.3.2 Self-reported unmet needs

Self-reported unmet needs concern individuals' own assessments regarding their need for medical examinations or treatment and the subsequent ability to fulfil it or not based on factors such as financial resources, distance, or waiting times. This variable serves as a proxy concerning how populations judge the quality of their healthcare. EUROSTAT regularly collects this data, with lower values more favourable in this case.

Annex 3: Country profiles

AUSTRIA



READINESS TODAY

0,78

READINESS TOMORROW

0,62

HEALTH READINESS INDEX 2022

0,66

READINESS TODAY	Year	Value	Best Value	Austria ranking
Availability of finances	2020	3 976,09	4 583,76	4
Avoidable mortality	2020	191,00	143,00	13
Computed Tomography scanners	2020	2,85	4,37	9
Disease burden (DALY)	2019	19 104,09	18 033,38	8
Gamma cameras	2020	1,02	2,69	7
Infant mortality	2020	3,10	1,40	12
Life expectancy females at age 65	2021	21,20	23,50	12
Life expectancy males at age 65	2021	18,00	19,80	12
Life expectancy total population at birth	2021	81,30	83,30	12
Magnetic Resonance Imaging units	2020	2,53	3,45	6
Mammographs	2020	2,16	6,88	8
Positron Emission Tomography scanners	2020	0,26	0,87	7
Practising nurses	2020	10,48	18,37	10
Practising physicians	2021	5,45	6,30	3
Radiation therapy equipment	2020	0,57	1,84	20
Rate of availability of medicines	2021	79,00	92,00	3
UHC index	2019	82,00	88,00	15
Incidence / prevalence of all types of cancers	2020	255,70	247,10	2

READINESS TOMORROW	Year	Value	Best Value	Austria ranking
Alcohol consumption	2019	11,60	6,10	25
Average life span of a minister of health	2023	1,93	5,08	14
Demographic dependency ratios	2022	29,38	21,26	7
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,72	1,00	15
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	210,74	306,76	6
Fruits consumption	2019	92,80	144,00	8
HPV vaccination rate	2020	60,00	93,00	14
Average time to availability of medicines	2021	315,00	133,00	5
Obesity	2019	16,60	10,50	12
Pollution index	2020	9,65	3,79	15
Proportion of OOP spending on all expenditure types	2020	16,80	8,42	15
Self-reported unmet needs for medical examination	2021	99,20	99,50	2
Smoking	2019	20,20	6,40	21
Tertiary education 25_34	2021	89,40	95,80	12
Tertiary education 55_64	2021	82,00	97,60	13
Vegetables consumption	2019	90,90	287,80	14
Estimated relative change of incidence from 2020 to 2040	2022	0,28	0,01	20

BELGIUM



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,73

0,65

0,67

READINESS TODAY	Year	Value	Best Value	Belgium ranking
Availability of finances	2020	3 754,40	4 583,76	8
Avoidable mortality	2018	178,00	143,00	9
Computed Tomography scanners	2021	2,46	4,37	11
Disease burden (DALY)	2019	20 170,42	18 033,38	15
Gamma cameras	2020	2,69	2,69	1
Infant mortality	2020	3,30	1,40	16
Life expectancy females at age 65	2021	22,20	23,50	5
Life expectancy males at age 65	2021	18,60	19,80	9
Life expectancy total population at birth	2021	81,90	83,30	9
Magnetic Resonance Imaging units	2021	1,14	3,45	21
Mammographs	2020	3,64	6,88	2
Positron Emission Tomography scanners	2021	0,29	0,87	5
Practising nurses	2018	11,07	18,37	8
Practising physicians	2020	3,21	6,30	23
Radiation therapy equipment	2017	1,84	1,84	1
Rate of availability of medicines	2021	54,00	92,00	12
UHC index	2019	85,00	88,00	8
Incidence / prevalence of all types of cancers	2020	349,20	247,10	24

READINESS TOMORROW	Year	Value	Best Value	Belgium ranking
Alcohol consumption	2019	9,20	6,10	7
Average life span of a minister of health	2023	5,08	5,08	1
Demographic dependency ratios	2022	30,39	21,26	10
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	1,00	1,00	3
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	110,38	306,76	18
Fruits consumption	2019	99,10	144,00	6
HPV vaccination rate	2021	70,00	93,00	8
Average time to availability of medicines	2021	534,00	133,00	15
Obesity	2018	15,90	10,50	9
Pollution index	2020	7,91	3,79	13
Proportion of OOP spending on all expenditure types	2020	16,04	8,42	13
Self-reported unmet needs for medical examination	2022	98,40	99,50	4
Smoking	2019	14,60	6,40	8
Tertiary education 25_34	2021	87,40	95,80	17
Tertiary education 55_64	2021	71,50	97,60	21
Vegetables consumption	2019	135,90	287,80	4
Estimated relative change of incidence from 2020 to 2040	2022	0,28	0,01	19

BULGARIA



READINESS TODAY

0,52

READINESS TOMORROW

0,46

HEALTH READINESS INDEX 2022

0,48

READINESS TODAY	Year	Value	Best Value	Bulgaria ranking
Availability of finances	2020	1 327,43	4 583,76	26
Avoidable mortality	2019	348,00	143,00	23
Computed Tomography scanners	2020	4,05	4,37	3
Disease burden (DALY)	2019	29 375,15	18 033,38	27
Gamma cameras	2020	0,32	2,69	23
Infant mortality	2020	5,10	1,40	25
Life expectancy females at age 65	2021	15,60	23,50	27
Life expectancy males at age 65	2021	11,70	19,80	27
Life expectancy total population at birth	2021	71,40	83,30	27
Magnetic Resonance Imaging units	2020	1,15	3,45	20
Mammographs	2020	3,09	6,88	5
Positron Emission Tomography scanners	2020	0,12	0,87	19
Practising nurses	2018	4,80	18,37	25
Practising physicians	2018	4,21	6,30	10
Radiation therapy equipment	2020	1,00	1,84	7
Rate of availability of medicines	2021	31,00	92,00	20
UHC index	2019	70,00	88,00	26
Incidence / prevalence of all types of cancers	2020	247,10	247,10	1

READINESS TOMORROW	Year	Value	Best Value	Bulgaria ranking
Alcohol consumption	2019	11,20	6,10	23
Average life span of a minister of health	2023	1,19	5,08	26
Demographic dependency ratios	2022	35,26	21,26	24
Does a country have an investment strategy in the health sector?	2023	0,00	1,00	24
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,44	1,00	23
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	59,83	306,76	23
Fruits consumption	2019	61,70	144,00	21
HPV vaccination rate	2021	3,00	93,00	26
Average time to availability of medicines	2021	764,00	133,00	25
Obesity	2019	13,20	10,50	4
Pollution index	2020	17,99	3,79	27
Proportion of OOP spending on all expenditure types	2020	35,53	8,42	27
Self-reported unmet needs for medical examination	2022	97,70	99,50	6
Smoking	2019	28,70	6,40	27
Tertiary education 25_34	2021	82,70	95,80	24
Tertiary education 55_64	2021	82,30	97,60	12
Vegetables consumption	2019	97,20	287,80	9
Estimated relative change of incidence from 2020 to 2040	2022	0,01	0,01	1

CROATIA



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,53

0,58

0,57

READINESS TODAY	Year	Value	Best Value	Croatia ranking
Availability of finances	2020	1 382,26	4 583,76	25
Avoidable mortality	2019	296,00	143,00	20
Computed Tomography scanners	2020	2,22	4,37	12
Disease burden (DALY)	2019	21 885,58	18 033,38	19
Gamma cameras	2020	0,62	2,69	15
Infant mortality	2020	4,00	1,40	23
Life expectancy females at age 65	2021	18,20	23,50	22
Life expectancy males at age 65	2021	14,40	19,80	20
Life expectancy total population at birth	2021	76,80	83,30	20
Magnetic Resonance Imaging units	2020	1,53	3,45	14
Mammographs	2020	3,39	6,88	4
Positron Emission Tomography scanners	2020	0,12	0,87	19
Practising nurses	2019	6,85	18,37	17
Practising physicians	2019	3,52	6,30	16
Radiation therapy equipment	2020	0,64	1,84	17
Rate of availability of medicines	2021	22,00	92,00	25
UHC index	2019	73,00	88,00	22
Incidence / prevalence of all types of cancers	2020	290,80	247,10	11

READINESS TOMORROW	Year	Value	Best Value	Croatia ranking
Alcohol consumption	2019	9,60	6,10	9
Average life span of a minister of health	2023	2,32	5,08	8
Demographic dependency ratios	2022	34,39	21,26	19
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	1,00	1,00	1
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	63,88	306,76	21
Fruits consumption	2019	73,00	144,00	17
HPV vaccination rate	2022	20,80	93,00	23
Average time to availability of medicines	2021	479,00	133,00	10
Obesity	2019	22,60	10,50	24
Pollution index	2020	13,70	3,79	24
Proportion of OOP spending on all expenditure types	2020	10,45	8,42	4
Self-reported unmet needs for medical examination	2021	94,10	99,50	15
Smoking	2019	21,80	6,40	23
Tertiary education 25_34	2021	95,10	95,80	2
Tertiary education 55_64	2021	78,40	97,60	14
Vegetables consumption	2019	287,80	287,80	1
Estimated relative change of incidence from 2020 to 2040	2022	0,09	0,01	5

CZECH REPUBLIC



READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,64

0,55

0,57

READINESS TODAY	Year	Value	Best Value	Czech Republic ranking
Availability of finances	2020	2 383,00	4 583,76	15
Avoidable mortality	2020	277,00	143,00	18
Computed Tomography scanners	2020	1,63	4,37	24
Disease burden (DALY)	2019	21 153,29	18 033,38	18
Gamma cameras	2020	1,10	2,69	5
Infant mortality	2020	2,30	1,40	5
Life expectancy females at age 65	2021	18,70	23,50	19
Life expectancy males at age 65	2021	14,70	19,80	18
Life expectancy total population at birth	2021	77,40	83,30	18
Magnetic Resonance Imaging units	2020	1,10	3,45	22
Mammographs	2020	1,06	6,88	21
Positron Emission Tomography scanners	2020	0,17	0,87	14
Practising nurses	2020	8,66	18,37	14
Practising physicians	2020	4,10	6,30	12
Radiation therapy equipment	2020	0,77	1,84	13
Rate of availability of medicines	2021	55,00	92,00	11
UHC index	2019	78,00	88,00	17
Incidence / prevalence of all types of cancers	2020	292,60	247,10	13

READINESS TOMORROW	Year	Value	Best Value	Czech Republic ranking
Alcohol consumption	2019	11,90	6,10	27
Average life span of a minister of health	2023	1,29	5,08	25
Demographic dependency ratios	2022	32,19	21,26	16
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,44	1,00	23
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	142,86	306,76	13
Fruits consumption	2019	55,70	144,00	24
HPV vaccination rate	2020	65,80	93,00	11
Average time to availability of medicines	2021	573,00	133,00	18
Obesity	2019	19,30	10,50	18
Pollution index	2020	11,87	3,79	19
Proportion of OOP spending on all expenditure types	2020	11,53	8,42	6
Self-reported unmet needs for medical examination	2021	97,50	99,50	8
Smoking	2019	19,30	6,40	18
Tertiary education 25_34	2021	92,90	95,80	7
Tertiary education 55_64	2021	93,50	97,60	3
Vegetables consumption	2019	77,00	287,80	24
Estimated relative change of incidence from 2020 to 2040	2022	0,24	0,01	15

DENMARK



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,77

0,68

0,70

READINESS TODAY	Year	Value	Best Value	Denmark ranking
Availability of finances	2020	3 820,56	4 583,76	6
Avoidable mortality	2018	180,00	143,00	10
Computed Tomography scanners	2021	4,37	4,37	1
Disease burden (DALY)	2019	19 929,47	18 033,38	13
Gamma cameras	2021	1,37	2,69	2
Infant mortality	2020	3,20	1,40	14
Life expectancy females at age 65	2021	20,90	23,50	14
Life expectancy males at age 65	2021	18,30	19,80	11
Life expectancy total population at birth	2021	81,40	83,30	11
Magnetic Resonance Imaging units	2009	1,54	3,45	13
Mammographs	2021	1,59	6,88	14
Positron Emission Tomography scanners	2021	0,87	0,87	1
Practising nurses	2019	10,13	18,37	12
Practising physicians	2019	4,25	6,30	9
Radiation therapy equipment	2021	1,22	1,84	2
Rate of availability of medicines	2021	81,00	92,00	2
UHC index	2019	85,00	88,00	8
Incidence / prevalence of all types of cancers	2020	351,10	247,10	26

READINESS TOMORROW	Year	Value	Best Value	Denmark ranking
Alcohol consumption	2019	9,50	6,10	8
Average life span of a minister of health	2023	2,24	5,08	9
Demographic dependency ratios	2022	31,89	21,26	14
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,89	1,00	7
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	181,70	306,76	9
Fruits consumption	2019	59,70	144,00	22
HPV vaccination rate	2021	80,00	93,00	4
Average time to availability of medicines	2021	176,00	133,00	2
Obesity	2021	18,50	10,50	15
Pollution index	2020	6,94	3,79	8
Proportion of OOP spending on all expenditure types	2020	12,83	8,42	10
Self-reported unmet needs for medical examination	2021	88,10	99,50	25
Smoking	2019	11,70	6,40	6
Tertiary education 25_34	2021	84,60	95,80	21
Tertiary education 55_64	2021	76,20	97,60	17
Vegetables consumption	2019	96,40	287,80	11
Estimated relative change of incidence from 2020 to 2040	2022	0,21	0,01	12

ESTONIA



READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022**0,59****0,54****0,55**

READINESS TODAY	Year	Value	Best Value	Estonia ranking
Availability of finances	2020	1 762,00	4 583,76	19
Avoidable mortality	2020	322,00	143,00	22
Computed Tomography scanners	2020	2,03	4,37	15
Disease burden (DALY)	2019	23 061,01	18 033,38	21
Gamma cameras	2020	0,23	2,69	27
Infant mortality	2020	1,40	1,40	1
Life expectancy females at age 65	2021	19,70	23,50	18
Life expectancy males at age 65	2021	14,50	19,80	19
Life expectancy total population at birth	2021	76,90	83,30	19
Magnetic Resonance Imaging units	2020	1,50	3,45	15
Mammographs	2020	1,13	6,88	19
Positron Emission Tomography scanners	2020	0,23	0,87	10
Practising nurses	2020	6,38	18,37	19
Practising physicians	2020	3,48	6,30	17
Radiation therapy equipment	2020	0,53	1,84	23
Rate of availability of medicines	2021	26,00	92,00	21
UHC index	2019	78,00	88,00	17
Incidence / prevalence of all types of cancers	2020	278,50	247,10	9

READINESS TOMORROW	Year	Value	Best Value	Estonia ranking
Alcohol consumption	2019	10,40	6,10	12
Average life span of a minister of health	2023	1,71	5,08	17
Demographic dependency ratios	2022	32,25	21,26	17
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,67	1,00	19
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	131,01	306,76	14
Fruits consumption	2019	75,40	144,00	15
HPV vaccination rate	2021	57,00	93,00	15
Average time to availability of medicines	2021	599,00	133,00	22
Obesity	2020	20,50	10,50	21
Pollution index	2020	5,16	3,79	6
Proportion of OOP spending on all expenditure types	2020	21,44	8,42	21
Self-reported unmet needs for medical examination	2021	87,30	99,50	27
Smoking	2019	18,90	6,40	17
Tertiary education 25_34	2021	88,20	95,80	15
Tertiary education 55_64	2021	92,20	97,60	4
Vegetables consumption	2019	80,80	287,80	21
Estimated relative change of incidence from 2020 to 2040	2022	0,16	0,01	7

FINLAND



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,75

0,65

0,68

READINESS TODAY	Year	Value	Best Value	Finland ranking
Availability of finances	2020	3 110,40	4 583,76	11
Avoidable mortality	2019	181,00	143,00	11
Computed Tomography scanners	2020	1,70	4,37	23
Disease burden (DALY)	2019	19 569,47	18 033,38	11
Gamma cameras	2021	0,70	2,69	11
Infant mortality	2020	1,80	1,40	3
Life expectancy females at age 65	2021	22,20	23,50	5
Life expectancy males at age 65	2021	18,70	19,80	8
Life expectancy total population at birth	2021	82,00	83,30	8
Magnetic Resonance Imaging units	2021	3,09	3,45	5
Mammographs	2020	3,09	6,88	5
Positron Emission Tomography scanners	2021	0,34	0,87	4
Practising nurses	2018	13,57	18,37	2
Practising physicians	2018	3,48	6,30	17
Radiation therapy equipment	2020	1,03	1,84	6
Rate of availability of medicines	2021	58,00	92,00	10
UHC index	2019	83,00	88,00	12
Incidence / prevalence of all types of cancers	2020	271,20	247,10	7

READINESS TOMORROW	Year	Value	Best Value	Finland ranking
Alcohol consumption	2019	8,20	6,10	5
Average life span of a minister of health	2023	2,00	5,08	13
Demographic dependency ratios	2022	37,11	21,26	26
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	14
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	257,82	306,76	4
Fruits consumption	2019	73,10	144,00	16
HPV vaccination rate	2019	61,00	93,00	13
Average time to availability of medicines	2021	396,00	133,00	7
Obesity	2020	23,00	10,50	25
Pollution index	2020	4,10	3,79	2
Proportion of OOP spending on all expenditure types	2020	16,41	8,42	14
Self-reported unmet needs for medical examination	2022	91,80	99,50	20
Smoking	2019	9,90	6,40	2
Tertiary education 25_34	2021	90,30	95,80	10
Tertiary education 55_64	2021	85,20	97,60	7
Vegetables consumption	2019	85,10	287,80	19
Estimated relative change of incidence from 2020 to 2040	2022	0,21	0,01	13

FRANCE



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,72

0,63

0,65

READINESS TODAY	Year	Value	Best Value	France ranking
Availability of finances	2020	3 674,77	4 583,76	9
Avoidable mortality	2017	160,00	143,00	5
Computed Tomography scanners	2020	1,90	4,37	20
Disease burden (DALY)	2019	18 781,51	18 033,38	6
Gamma cameras	2020	0,69	2,69	12
Infant mortality	2021	3,60	1,40	19
Life expectancy females at age 65	2021	23,40	23,50	2
Life expectancy males at age 65	2011	19,30	19,80	4
Life expectancy total population at birth	2021	82,50	83,30	7
Magnetic Resonance Imaging units	2020	1,63	3,45	10
Mammographs	2018	0,70	6,88	25
Positron Emission Tomography scanners	2020	0,27	0,87	6
Practising nurses	2020	11,30	18,37	6
Practising physicians	2020	3,17	6,30	25
Radiation therapy equipment	2018	1,11	1,84	5
Rate of availability of medicines	2021	66,00	92,00	7
UHC index	2019	84,00	88,00	10
Incidence / prevalence of all types of cancers	2020	341,90	247,10	23

READINESS TOMORROW	Year	Value	Best Value	France ranking
Alcohol consumption	2019	11,40	6,10	24
Average life span of a minister of health	2023	1,80	5,08	16
Demographic dependency ratios	2022	34,78	21,26	22
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	8
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	1,00	1,00	1
Expenditure on preventive measures	2020	155,60	306,76	12
Fruits consumption	2019	91,20	144,00	9
HPV vaccination rate	2021	37,00	93,00	19
Average time to availability of medicines	2021	497,00	133,00	12
Obesity	2019	14,40	10,50	6
Pollution index	2020	7,20	3,79	10
Proportion of OOP spending on all expenditure types	2020	8,94	8,42	2
Self-reported unmet needs for medical examination	2021	93,40	99,50	18
Smoking	2019	17,80	6,40	13
Tertiary education 25_34	2021	88,10	95,80	16
Tertiary education 55_64	2021	72,90	97,60	20
Vegetables consumption	2019	96,30	287,80	12
Estimated relative change of incidence from 2020 to 2040	2022	0,24	0,01	14

GERMANY



READINESS TODAY

0,80

READINESS TOMORROW

0,69

HEALTH READINESS INDEX 2022

0,72

READINESS TODAY	Year	Value	Best Value	Germany ranking
Availability of finances	2020	4 583,76	4 583,76	1
Avoidable mortality	2020	195,00	143,00	14
Computed Tomography scanners	2018	3,53	4,37	6
Disease burden (DALY)	2019	20 075,12	18 033,38	14
Gamma cameras	2019	0,58	2,69	17
Infant mortality	2020	3,10	1,40	12
Life expectancy females at age 65	2020	21,20	23,50	12
Life expectancy males at age 65	2020	18,00	19,80	12
Life expectancy total population at birth	2021	80,90	83,30	14
Magnetic Resonance Imaging units	2018	3,45	3,45	1
Mammographs	2019	0,47	6,88	26
Positron Emission Tomography scanners	2020	0,20	0,87	11
Practising nurses	2020	12,06	18,37	4
Practising physicians	2021	4,53	6,30	6
Radiation therapy equipment	2019	0,47	1,84	25
Rate of availability of medicines	2021	92,00	92,00	1
UHC index	2019	86,00	88,00	3
Incidence / prevalence of all types of cancers	2020	313,20	247,10	19

READINESS TOMORROW	Year	Value	Best Value	Germany ranking
Alcohol consumption	2019	10,60	6,10	14
Average life span of a minister of health	2023	3,50	5,08	4
Demographic dependency ratios	2022	34,66	21,26	21
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	8
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	223,03	306,76	5
Fruits consumption	2019	75,50	144,00	14
HPV vaccination rate	2021	47,00	93,00	17
Average time to availability of medicines	2021	133,00	133,00	1
Obesity	2019	18,50	10,50	15
Pollution index	2020	8,02	3,79	14
Proportion of OOP spending on all expenditure types	2020	12,44	8,42	7
Self-reported unmet needs for medical examination	2021	99,50	99,50	1
Smoking	2020	22,00	6,40	24
Tertiary education 25_34	2021	85,40	95,80	20
Tertiary education 55_64	2021	85,00	97,60	9
Vegetables consumption	2019	88,50	287,80	17
Estimated relative change of incidence from 2020 to 2040	2022	0,19	0,01	11

GREECE



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,68

0,46

0,51

READINESS TODAY	Year	Value	Best Value	Greece ranking
Availability of finances	2020	1 669,84	4 583,76	20
Avoidable mortality	2019	196,00	143,00	15
Computed Tomography scanners	2020	4,37	4,37	1
Disease burden (DALY)	2019	20 200,90	18 033,38	16
Gamma cameras	2020	1,30	2,69	3
Infant mortality	2020	3,20	1,40	14
Life expectancy females at age 65	2021	20,80	23,50	15
Life expectancy males at age 65	2021	17,80	19,80	15
Life expectancy total population at birth	2021	80,30	83,30	17
Magnetic Resonance Imaging units	2020	3,35	3,45	3
Mammographs	2020	6,88	6,88	1
Positron Emission Tomography scanners	2020	0,13	0,87	18
Practising nurses	2019	3,38	18,37	27
Practising physicians	2019	6,30	6,30	1
Radiation therapy equipment	2020	0,67	1,84	15
Rate of availability of medicines	2021	49,00	92,00	16
UHC index	2019	78,00	88,00	17
Incidence / prevalence of all types of cancers	2020	264,70	247,10	5

READINESS TOMORROW	Year	Value	Best Value	Greece ranking
Alcohol consumption	2019	6,30	6,10	2
Average life span of a minister of health	2023	1,47	5,08	22
Demographic dependency ratios	2022	35,48	21,26	25
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,28	1,00	27
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	44,64	306,76	24
Fruits consumption	2019	144,00	144,00	1
HPV vaccination rate	2020	35,00	93,00	20
Average time to availability of medicines	2021	498,00	133,00	13
Obesity	2019	16,40	10,50	10
Pollution index	2020	11,18	3,79	18
Proportion of OOP spending on all expenditure types	2020	33,44	8,42	26
Self-reported unmet needs for medical examination	2021	87,70	99,50	26
Smoking	2019	23,60	6,40	26
Tertiary education 25_34	2021	92,90	95,80	7
Tertiary education 55_64	2021	65,20	97,60	24
Vegetables consumption	2019	150,20	287,80	2
Estimated relative change of incidence from 2020 to 2040	2022	0,18	0,01	9

HUNGARY



READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,51

0,57

0,55

READINESS TODAY	Year	Value	Best Value	Hungary ranking
Availability of finances	2020	1 541,41	4 583,76	22
Avoidable mortality	2019	404,00	143,00	24
Computed Tomography scanners	2020	0,96	4,37	26
Disease burden (DALY)	2019	24 500,11	18 033,38	23
Gamma cameras	2017	1,16	2,69	4
Infant mortality	2020	3,40	1,40	17
Life expectancy females at age 65	2021	17,50	23,50	24
Life expectancy males at age 65	2021	13,40	19,80	22
Life expectancy total population at birth	2021	74,50	83,30	23
Magnetic Resonance Imaging units	2020	0,49	3,45	27
Mammographs	2017	1,53	6,88	15
Positron Emission Tomography scanners	2020	0,10	0,87	22
Practising nurses	2021	6,59	18,37	18
Practising physicians	2021	3,28	6,30	22
Radiation therapy equipment	2017	0,47	1,84	24
Rate of availability of medicines	2021	41,00	92,00	19
UHC index	2019	73,00	88,00	22
Incidence / prevalence of all types of cancers	2020	338,20	247,10	22

READINESS TOMORROW	Year	Value	Best Value	Hungary ranking
Alcohol consumption	2019	10,70	6,10	15
Average life span of a minister of health	2023	2,03	5,08	12
Demographic dependency ratios	2022	31,40	21,26	12
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,72	1,00	15
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,00	1,00	26
Expenditure on preventive measures	2020	89,39	306,76	19
Fruits consumption	2019	71,80	144,00	18
HPV vaccination rate	2021	82,00	93,00	3
Average time to availability of medicines	2021	480,00	133,00	11
Obesity	2019	23,90	10,50	26
Pollution index	2020	12,81	3,79	22
Proportion of OOP spending on all expenditure types	2020	25,52	8,42	22
Self-reported unmet needs for medical examination	2021	94,10	99,50	15
Smoking	2019	19,30	6,40	18
Tertiary education 25_34	2021	86,80	95,80	18
Tertiary education 55_64	2021	83,60	97,60	11
Vegetables consumption	2019	92,80	287,80	13
Estimated relative change of incidence from 2020 to 2040	2022	0,11	0,01	6

IRELAND



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,69

0,69

0,69

READINESS TODAY	Year	Value	Best Value	Ireland ranking
Availability of finances	2020	3 547,34	4 583,76	10
Avoidable mortality	2018	172,00	143,00	8
Computed Tomography scanners	2021	2,04	4,37	14
Disease burden (DALY)	2019	19 401,42	18 033,38	10
Gamma cameras	2020	0,58	2,69	17
Infant mortality	2020	3,00	1,40	11
Life expectancy females at age 65	2020	21,90	23,50	8
Life expectancy males at age 65	2020	19,40	19,80	3
Life expectancy total population at birth	2020	82,60	83,30	6
Magnetic Resonance Imaging units	2018	1,60	3,45	11
Mammographs	2018	1,68	6,88	11
Positron Emission Tomography scanners	2021	0,18	0,87	13
Practising nurses	2021	12,80	18,37	3
Practising physicians	2021	4,05	6,30	13
Radiation therapy equipment	2021	1,00	1,84	7
Rate of availability of medicines	2021	42,00	92,00	18
UHC index	2019	83,00	88,00	12
Incidence / prevalence of all types of cancers	2020	372,80	247,10	27

READINESS TOMORROW	Year	Value	Best Value	Ireland ranking
Alcohol consumption	2019	10,80	6,10	16
Average life span of a minister of health	2023	2,11	5,08	10
Demographic dependency ratios	2022	22,72	21,26	2
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,72	1,00	15
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	175,32	306,76	11
Fruits consumption	2019	68,40	144,00	19
HPV vaccination rate	2021	71,00	93,00	7
Average time to availability of medicines	2021	541,00	133,00	16
Obesity	2019	26,00	10,50	27
Pollution index	2020	4,56	3,79	3
Proportion of OOP spending on all expenditure types	2020	10,50	8,42	5
Self-reported unmet needs for medical examination	2021	96,80	99,50	11
Smoking	2019	13,80	6,40	7
Tertiary education 25_34	2021	94,80	95,80	3
Tertiary education 55_64	2021	74,60	97,60	18
Vegetables consumption	2019	80,20	287,80	22
Estimated relative change of incidence from 2020 to 2040	2022	0,57	0,01	26

ITALY

READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022**0,76****0,54****0,60**

READINESS TODAY	Year	Value	Best Value	Italy ranking
Availability of finances	2020	2 524,16	4 583,76	13
Avoidable mortality	2017	146,00	143,00	2
Computed Tomography scanners	2021	4,00	4,37	4
Disease burden (DALY)	2019	18 185,86	18 033,38	3
Gamma cameras	2021	0,80	2,69	9
Infant mortality	2020	2,40	1,40	6
Life expectancy females at age 65	2021	22,30	23,50	3
Life expectancy males at age 65	2021	19,00	19,80	7
Life expectancy total population at birth	2021	82,90	83,30	4
Magnetic Resonance Imaging units	2021	3,42	3,45	2
Mammographs	2021	3,53	6,88	3
Positron Emission Tomography scanners	2021	0,38	0,87	3
Practising nurses	2021	6,26	18,37	20
Practising physicians	2021	4,13	6,30	11
Radiation therapy equipment	2021	0,76	1,84	14
Rate of availability of medicines	2021	79,00	92,00	3
UHC index	2019	83,00	88,00	12
Incidence / prevalence of all types of cancers	2020	292,60	247,10	13

READINESS TOMORROW	Year	Value	Best Value	Italy ranking
Alcohol consumption	2019	7,70	6,10	4
Average life span of a minister of health	2023	1,92	5,08	15
Demographic dependency ratios	2022	37,19	21,26	27
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,72	1,00	15
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	1,00	1,00	1
Expenditure on preventive measures	2020	205,31	306,76	7
Fruits consumption	2019	123,00	144,00	3
HPV vaccination rate	2020	27,00	93,00	21
Average time to availability of medicines	2021	429,00	133,00	9
Obesity	2020	11,50	10,50	2
Pollution index	2020	12,69	3,79	20
Proportion of OOP spending on all expenditure types	2020	21,28	8,42	20
Self-reported unmet needs for medical examination	2021	97,60	99,50	7
Smoking	2019	16,50	6,40	11
Tertiary education 25_34	2021	76,80	95,80	26
Tertiary education 55_64	2021	50,60	97,60	26
Vegetables consumption	2019	99,60	287,80	8
Estimated relative change of incidence from 2020 to 2040	2022	0,19	0,01	10

LATVIA



READINESS TODAY

0,49

READINESS TOMORROW

0,52

HEALTH READINESS INDEX 2022

0,51

READINESS TODAY	Year	Value	Best Value	Latvia ranking
Availability of finances	2020	1 427,94	4 583,76	24
Avoidable mortality	2020	413,00	143,00	25
Computed Tomography scanners	2020	3,74	4,37	5
Disease burden (DALY)	2019	26 015,57	18 033,38	25
Gamma cameras	2020	0,32	2,69	23
Infant mortality	2020	3,50	1,40	18
Life expectancy females at age 65	2021	17,70	23,50	23
Life expectancy males at age 65	2021	12,80	19,80	25
Life expectancy total population at birth	2021	73,40	83,30	25
Magnetic Resonance Imaging units	2020	1,58	3,45	12
Mammographs	2020	2,79	6,88	7
Positron Emission Tomography scanners	2020	0,11	0,87	21
Practising nurses	2020	4,18	18,37	26
Practising physicians	2020	3,34	6,30	19
Radiation therapy equipment	2018	0,57	1,84	20
Rate of availability of medicines	2021	18,00	92,00	26
UHC index	2019	72,00	88,00	24
Incidence / prevalence of all types of cancers	2020	301,50	247,10	17

READINESS TOMORROW	Year	Value	Best Value	Latvia ranking
Alcohol consumption	2019	11,60	6,10	25
Average life span of a minister of health	2023	1,59	5,08	20
Demographic dependency ratios	2022	34,44	21,26	20
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,36	1,00	26
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	69,23	306,76	20
Fruits consumption	2019	49,00	144,00	26
HPV vaccination rate	2021	42,00	93,00	18
Average time to availability of medicines	2021	627,00	133,00	23
Obesity	2017	21,60	10,50	23
Pollution index	2020	11,16	3,79	17
Proportion of OOP spending on all expenditure types	2020	31,87	8,42	25
Self-reported unmet needs for medical examination	2022	90,30	99,50	24
Smoking	2019	22,10	6,40	25
Tertiary education 25_34	2021	91,50	95,80	9
Tertiary education 55_64	2021	95,10	97,60	2
Vegetables consumption	2019	88,90	287,80	16
Estimated relative change of incidence from 2020 to 2040	2022	0,02	0,01	3

LITHUANIA



READINESS TODAY

0,52

READINESS TOMORROW

0,54**HEALTH READINESS INDEX 2022****0,54**

READINESS TODAY	Year	Value	Best Value	Lithuania ranking
Availability of finances	2020	1 859,28	4 583,76	18
Avoidable mortality	2020	449,00	143,00	27
Computed Tomography scanners	2021	2,93	4,37	8
Disease burden (DALY)	2019	25 648,26	18 033,38	24
Gamma cameras	2020	0,29	2,69	25
Infant mortality	2020	2,80	1,40	10
Life expectancy females at age 65	2021	18,30	23,50	21
Life expectancy males at age 65	2021	13,20	19,80	24
Life expectancy total population at birth	2021	74,50	83,30	23
Magnetic Resonance Imaging units	2020	1,43	3,45	16
Mammographs	2021	1,79	6,88	10
Positron Emission Tomography scanners	2021	0,07	0,87	25
Practising nurses	2020	7,81	18,37	15
Practising physicians	2020	4,48	6,30	7
Radiation therapy equipment	2021	0,79	1,84	11
Rate of availability of medicines	2021	16,00	92,00	27
UHC index	2019	70,00	88,00	26
Incidence / prevalence of all types of cancers	2020	293,40	247,10	15

READINESS TOMORROW	Year	Value	Best Value	Lithuania ranking
Alcohol consumption	2019	11,10	6,10	21
Average life span of a minister of health	2023	1,70	5,08	18
Demographic dependency ratios	2022	32,06	21,26	15
Does a country have an investment strategy in the health sector?	2023	0,00	1,00	24
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,39	1,00	25
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	112,28	306,76	16
Fruits consumption	2019	47,30	144,00	27
HPV vaccination rate	2021	66,00	93,00	9
Average time to availability of medicines	2021	594,00	133,00	20
Obesity	2019	18,30	10,50	14
Pollution index	2020	10,06	3,79	16
Proportion of OOP spending on all expenditure types	2020	28,69	8,42	24
Self-reported unmet needs for medical examination	2021	95,90	99,50	12
Smoking	2019	18,40	6,40	14
Tertiary education 25_34	2021	93,90	95,80	4
Tertiary education 55_64	2021	97,60	97,60	1
Vegetables consumption	2019	96,50	287,80	10
Estimated relative change of incidence from 2020 to 2040	2022	0,01	0,01	2

LUXEMBOURG



READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,74

0,66

0,68

READINESS TODAY	Year	Value	Best Value	Luxembourg ranking
Availability of finances	2020	3 806,75	4 583,76	7
Avoidable mortality	2019	143,00	143,00	1
Computed Tomography scanners	2021	2,21	4,37	13
Disease burden (DALY)	2019	18 634,22	18 033,38	5
Gamma cameras	2021	1,10	2,69	5
Infant mortality	2020	4,50	1,40	24
Life expectancy females at age 65	2021	22,30	23,50	3
Life expectancy males at age 65	2021	19,10	19,80	5
Life expectancy total population at birth	2021	82,80	83,30	5
Magnetic Resonance Imaging units	2021	1,73	3,45	9
Mammographs	2021	1,10	6,88	20
Positron Emission Tomography scanners	2021	0,16	0,87	15
Practising nurses	2016	11,72	18,37	5
Practising physicians	2017	2,98	6,30	27
Radiation therapy equipment	2021	0,95	1,84	9
Rate of availability of medicines	2021	66,00	92,00	7
UHC index	2019	86,00	88,00	3
Incidence / prevalence of all types of cancers	2020	291,90	247,10	12

READINESS TOMORROW	Year	Value	Best Value	Luxembourg ranking
Alcohol consumption	2019	11,00	6,10	18
Average life span of a minister of health	2023	4,78	5,08	2
Demographic dependency ratios	2022	21,26	21,26	1
Does a country have an investment strategy in the health sector?	2023	0,00	1,00	24
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	12
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	298,50	306,76	2
Fruits consumption	2019	86,80	144,00	10
HPV vaccination rate	2019	14,00	93,00	24
Average time to availability of medicines	2021	594,00	133,00	20
Obesity	2019	16,50	10,50	11
Pollution index	2020	7,19	3,79	9
Proportion of OOP spending on all expenditure types	2020	8,42	8,42	1
Self-reported unmet needs for medical examination	2021	98,00	99,50	5
Smoking	2019	10,50	6,40	4
Tertiary education 25_34	2021	89,00	95,80	13
Tertiary education 55_64	2021	69,00	97,60	23
Vegetables consumption	2019	90,00	287,80	15
Estimated relative change of incidence from 2020 to 2040	2022	0,61	0,01	27

NETHERLANDS



READINESS TODAY

0,73

READINESS TOMORROW

0,68

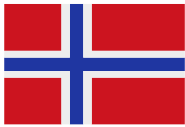
HEALTH READINESS INDEX 2022

0,69

READINESS TODAY	Year	Value	Best Value	Netherlands ranking
Availability of finances	2020	4 041,26	4 583,76	3
Avoidable mortality	2020	161,00	143,00	6
Computed Tomography scanners	2020	1,47	4,37	25
Disease burden (DALY)	2019	18 887,72	18 033,38	7
Gamma cameras	2020	0,69	2,69	12
Infant mortality	2020	3,80	1,40	22
Life expectancy females at age 65	2021	20,80	23,50	15
Life expectancy males at age 65	2021	18,40	19,80	10
Life expectancy total population at birth	2021	81,50	83,30	10
Magnetic Resonance Imaging units	2020	1,34	3,45	17
Mammographs	0	0,00	6,88	27
Positron Emission Tomography scanners	2020	0,48	0,87	2
Practising nurses	2020	11,08	18,37	7
Practising physicians	2020	3,83	6,30	14
Radiation therapy equipment	2014	0,78	1,84	12
Rate of availability of medicines	2021	70,00	92,00	5
UHC index	2019	86,00	88,00	3
Incidence / prevalence of all types of cancers	2020	349,60	247,10	25

READINESS TOMORROW	Year	Value	Best Value	Netherlands ranking
Alcohol consumption	2019	8,20	6,10	5
Average life span of a minister of health	2023	3,62	5,08	3
Demographic dependency ratios	2022	30,91	21,26	11
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	8
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	281,61	306,76	3
Fruits consumption	2019	101,60	144,00	5
HPV vaccination rate	2021	66,00	93,00	9
Average time to availability of medicines	2021	294,00	133,00	4
Obesity	2020	13,40	10,50	5
Pollution index	2020	7,82	3,79	12
Proportion of OOP spending on all expenditure types	2020	9,32	8,42	3
Self-reported unmet needs for medical examination	2022	98,70	99,50	3
Smoking	2019	14,60	6,40	8
Tertiary education 25_34	2021	89,80	95,80	11
Tertiary education 55_64	2021	70,10	97,60	22
Vegetables consumption	2019	71,10	287,80	26
Estimated relative change of incidence from 2020 to 2040	2022	0,29	0,01	21

NORWAY



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,83

0,71

0,74

READINESS TODAY	Year	Value	Best Value	Norway ranking
Availability of finances	2020	4 566,58	4 583,76	2
Avoidable mortality	2016	156,00	143,00	4
Computed Tomography scanners	2021	3,00	4,37	7
Disease burden (DALY)	2019	18 460,99	18 033,38	4
Gamma cameras	2021	0,50	2,69	19
Infant mortality	2020	1,60	1,40	2
Life expectancy females at age 65	2021	21,80	23,50	9
Life expectancy males at age 65	2020	19,80	19,80	1
Life expectancy total population at birth	2021	83,20	83,30	2
Magnetic Resonance Imaging units	2021	3,12	3,45	4
Mammographs	2021	1,19	6,88	18
Positron Emission Tomography scanners	2021	0,24	0,87	8
Practising nurses	2021	18,37	18,37	1
Practising physicians	2021	5,18	6,30	4
Radiation therapy equipment	2021	1,17	1,84	3
Rate of availability of medicines	2021	52,00	92,00	14
UHC index	2019	86,00	88,00	3
Incidence / prevalence of all types of cancers	2020	327,50	247,10	21

READINESS TOMORROW	Year	Value	Best Value	Norway ranking
Alcohol consumption	2019	6,10	6,10	1
Average life span of a minister of health	2023	2,57	5,08	6
Demographic dependency ratios	2022	27,87	21,26	4
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	1,00	1,00	1
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	176,33	306,76	10
Fruits consumption	2019	77,20	144,00	13
HPV vaccination rate	2021	93,00	93,00	1
Average time to availability of medicines	2021	414,00	133,00	8
Obesity	2019	13,00	10,50	3
Pollution index	2020	3,79	3,79	1
Proportion of OOP spending on all expenditure types	2020	13,90	8,42	12
Self-reported unmet needs for medical examination	2020	97,00	99,50	10
Smoking	2019	10,20	6,40	3
Tertiary education 25_34	2021	83,00	95,80	23
Tertiary education 55_64	2021	78,10	97,60	15
Vegetables consumption	2019	74,80	287,80	25
Estimated relative change of incidence from 2020 to 2040	2022	0,42	0,01	25

POLAND



READINESS TODAY

0,52

READINESS TOMORROW

0,52

HEALTH READINESS INDEX 2022

0,52

READINESS TODAY	Year	Value	Best Value	Poland ranking
Availability of finances	2020	1 547,39	4 583,76	21
Avoidable mortality	2019	292,00	143,00	19
Computed Tomography scanners	2020	2,01	4,37	16
Disease burden (DALY)	2019	22 749,21	18 033,38	20
Gamma cameras	2020	0,42	2,69	21
Infant mortality	2020	3,60	1,40	19
Life expectancy females at age 65	2021	18,40	23,50	20
Life expectancy males at age 65	2021	14,10	19,80	21
Life expectancy total population at birth	2021	75,60	83,30	21
Magnetic Resonance Imaging units	2020	1,05	3,45	24
Mammographs	2020	1,03	6,88	22
Positron Emission Tomography scanners	2020	0,10	0,87	22
Practising nurses	2017	5,10	18,37	24
Practising physicians	2019	3,30	6,30	20
Radiation therapy equipment	2020	0,60	1,84	19
Rate of availability of medicines	2021	26,00	92,00	21
UHC index	2019	74,00	88,00	21
Incidence / prevalence of all types of cancers	2020	267,30	247,10	6

READINESS TOMORROW	Year	Value	Best Value	Poland ranking
Alcohol consumption	2019	11,00	6,10	18
Average life span of a minister of health	2023	1,32	5,08	24
Demographic dependency ratios	2022	28,63	21,26	5
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	8
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	44,05	306,76	25
Fruits consumption	2019	61,80	144,00	20
HPV vaccination rate	2014	7,50	93,00	25
Average time to availability of medicines	2021	844,00	133,00	26
Obesity	2019	18,50	10,50	15
Pollution index	2020	14,97	3,79	26
Proportion of OOP spending on all expenditure types	2020	19,54	8,42	18
Self-reported unmet needs for medical examination	2021	90,80	99,50	23
Smoking	2019	18,40	6,40	14
Tertiary education 25_34	2021	93,00	95,80	6
Tertiary education 55_64	2021	90,40	97,60	6
Vegetables consumption	2019	124,20	287,80	6
Estimated relative change of incidence from 2020 to 2040	2022	0,25	0,01	18

PORTUGAL



READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,67

0,55

0,58

READINESS TODAY	Year	Value	Best Value	Portugal ranking
Availability of finances	2020	2 266,81	4 583,76	17
Avoidable mortality	2018	185,00	143,00	12
Computed Tomography scanners	2019	1,80	4,37	22
Disease burden (DALY)	2019	19 673,92	18 033,38	12
Gamma cameras	2019	0,34	2,69	22
Infant mortality	2020	2,40	1,40	6
Life expectancy females at age 65	2021	21,70	23,50	10
Life expectancy males at age 65	2021	17,80	19,80	15
Life expectancy total population at birth	2021	81,20	83,30	13
Magnetic Resonance Imaging units	2019	1,09	3,45	23
Mammographs	2019	1,27	6,88	17
Positron Emission Tomography scanners	2019	0,09	0,87	24
Practising nurses	2020	7,30	18,37	16
Practising physicians	2019	5,50	6,30	2
Radiation therapy equipment	2019	0,45	1,84	26
Rate of availability of medicines	2021	51,00	92,00	15
UHC index	2019	84,00	88,00	10
Incidence / prevalence of all types of cancers	2020	261,80	247,10	3

READINESS TOMORROW	Year	Value	Best Value	Portugal ranking
Alcohol consumption	2019	10,40	6,10	12
Average life span of a minister of health	2023	2,43	5,08	7
Demographic dependency ratios	2022	35,20	21,26	23
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,83	1,00	12
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	1,00	1,00	1
Expenditure on preventive measures	2020	63,10	306,76	22
Fruits consumption	2019	131,70	144,00	2
HPV vaccination rate	2021	76,00	93,00	6
Average time to availability of medicines	2021	676,00	133,00	24
Obesity	2019	16,90	10,50	13
Pollution index	2020	5,02	3,79	5
Proportion of OOP spending on all expenditure types	2020	27,80	8,42	23
Self-reported unmet needs for medical examination	2021	94,30	99,50	14
Smoking	2019	11,50	6,40	5
Tertiary education 25_34	2021	83,30	95,80	22
Tertiary education 55_64	2021	36,70	97,60	27
Vegetables consumption	2019	132,40	287,80	5
Estimated relative change of incidence from 2020 to 2040	2022	0,17	0,01	8

ROMANIA



READINESS TODAY

0,47

READINESS TOMORROW

0,42

HEALTH READINESS INDEX 2022

0,43

READINESS TODAY	Year	Value	Best Value	Romania ranking
Availability of finances	2020	1 297,33	4 583,76	27
Avoidable mortality	2019	419,00	143,00	26
Computed Tomography scanners	2020	1,91	4,37	18
Disease burden (DALY)	2019	26 043,59	18 033,38	26
Gamma cameras	2020	0,28	2,69	26
Infant mortality	2020	5,60	1,40	27
Life expectancy females at age 65	2021	16,50	23,50	26
Life expectancy males at age 65	2021	12,70	19,80	26
Life expectancy total population at birth	2021	72,90	83,30	26
Magnetic Resonance Imaging units	2020	1,18	3,45	19
Mammographs	2020	0,89	6,88	23
Positron Emission Tomography scanners	2020	0,07	0,87	25
Practising nurses	2016	6,10	18,37	21
Practising physicians	2017	2,98	6,30	26
Radiation therapy equipment	2020	0,39	1,84	27
Rate of availability of medicines	2021	24,00	92,00	23
UHC index	2019	71,00	88,00	25
Incidence / prevalence of all types of cancers	2020	263,10	247,10	4

READINESS TOMORROW	Year	Value	Best Value	Romania ranking
Alcohol consumption	2019	11,00	6,10	18
Average life span of a minister of health	2023	0,77	5,08	27
Demographic dependency ratios	2022	29,09	21,26	6
Does a country have an investment strategy in the health sector?	2023	0,00	1,00	24
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,56	1,00	20
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	39,91	306,76	26
Fruits consumption	2019	107,10	144,00	4
HPV vaccination rate	2020	1,00	93,00	27
Average time to availability of medicines	2021	899,00	133,00	27
Obesity	2019	10,50	10,50	1
Pollution index	2020	13,80	3,79	25
Proportion of OOP spending on all expenditure types	2020	19,03	8,42	17
Self-reported unmet needs for medical examination	2021	91,30	99,50	22
Smoking	2019	18,70	6,40	16
Tertiary education 25_34	2021	80,90	95,80	25
Tertiary education 55_64	2021	78,10	97,60	15
Vegetables consumption	2019	141,50	287,80	3
Estimated relative change of incidence from 2020 to 2040	2022	0,08	0,01	4

SLOVAK REPUBLIC



READINESS TODAY

READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,51

0,49

0,50

READINESS TODAY	Year	Value	Best Value	Slovak Republic ranking
Availability of finances	2020	1 459,85	4 583,76	23
Avoidable mortality	2019	321,00	143,00	21
Computed Tomography scanners	2020	1,91	4,37	18
Disease burden (DALY)	2019	23 351,55	18 033,38	22
Gamma cameras	2020	0,59	2,69	16
Infant mortality	2020	5,10	1,40	25
Life expectancy females at age 65	2021	17,30	23,50	25
Life expectancy males at age 65	2021	13,40	19,80	22
Life expectancy total population at birth	2021	74,80	83,30	22
Magnetic Resonance Imaging units	2020	0,99	3,45	25
Mammographs	2020	1,61	6,88	13
Positron Emission Tomography scanners	2020	0,15	0,87	16
Practising nurses	2020	5,80	18,37	23
Practising physicians	2021	3,70	6,30	15
Radiation therapy equipment	2020	1,14	1,84	4
Rate of availability of medicines	2021	23,00	92,00	24
UHC index	2019	77,00	88,00	20
Incidence / prevalence of all types of cancers	2020	296,80	247,10	16

READINESS TOMORROW	Year	Value	Best Value	Slovak Republic ranking
Alcohol consumption	2019	10,30	6,10	11
Average life span of a minister of health	2023	1,49	5,08	21
Demographic dependency ratios	2022	25,76	21,26	3
Does a country have an investment strategy in the health sector?	2023	0,50	1,00	12
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,47	1,00	21
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,00	1,00	26
Expenditure on preventive measures	2020	21,90	306,76	27
Fruits consumption	2019	51,60	144,00	25
HPV vaccination rate	2020	26,00	93,00	22
Average time to availability of medicines	2021	564,00	133,00	17
Obesity	2019	19,40	10,50	19
Pollution index	2020	12,88	3,79	23
Proportion of OOP spending on all expenditure types	2020	18,75	8,42	16
Self-reported unmet needs for medical examination	2021	92,50	99,50	19
Smoking	2019	20,40	6,40	22
Tertiary education 25_34	2021	93,70	95,80	5
Tertiary education 55_64	2021	91,60	97,60	5
Vegetables consumption	2019	67,20	287,80	27
Estimated relative change of incidence from 2020 to 2040	2022	0,30	0,01	22

SLOVENIA

READINESS TODAY

0,65

READINESS TOMORROW

0,60**HEALTH READINESS INDEX 2022****0,61**

READINESS TODAY	Year	Value	Best Value	Slovenia ranking
Availability of finances	2020	2 274,92	4 583,76	16
Avoidable mortality	2020	221,00	143,00	16
Computed Tomography scanners	2021	1,90	4,37	20
Disease burden (DALY)	2019	19 134,73	18 033,38	9
Gamma cameras	2021	0,81	2,69	8
Infant mortality	2020	2,20	1,40	4
Life expectancy females at age 65	2021	21,30	23,50	11
Life expectancy males at age 65	2021	17,20	19,80	17
Life expectancy total population at birth	2021	80,90	83,30	14
Magnetic Resonance Imaging units	2021	1,33	3,45	18
Mammographs	2021	1,47	6,88	16
Positron Emission Tomography scanners	2021	0,14	0,87	17
Practising nurses	2020	10,47	18,37	11
Practising physicians	2020	3,30	6,30	20
Radiation therapy equipment	2021	0,66	1,84	16
Rate of availability of medicines	2021	49,00	92,00	16
UHC index	2019	80,00	88,00	16
Incidence / prevalence of all types of cancers	2020	309,00	247,10	18

READINESS TOMORROW	Year	Value	Best Value	Slovenia ranking
Alcohol consumption	2019	11,10	6,10	21
Average life span of a minister of health	2023	1,68	5,08	19
Demographic dependency ratios	2022	31,88	21,26	13
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,47	1,00	21
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	110,52	306,76	17
Fruits consumption	2019	95,60	144,00	7
HPV vaccination rate	2021	50,00	93,00	16
Average time to availability of medicines	2021	577,00	133,00	19
Obesity	2019	19,40	10,50	19
Pollution index	2020	12,80	3,79	21
Proportion of OOP spending on all expenditure types	2020	12,47	8,42	8
Self-reported unmet needs for medical examination	2021	93,90	99,50	17
Smoking	2019	16,60	6,40	12
Tertiary education 25_34	2021	95,80	95,80	1
Tertiary education 55_64	2021	85,10	97,60	8
Vegetables consumption	2019	88,30	287,80	18
Estimated relative change of incidence from 2020 to 2040	2022	0,25	0,01	17

SPAIN



READINESS TODAY

0,69

READINESS TOMORROW

0,58

HEALTH READINESS INDEX 2022

0,61

READINESS TODAY	Year	Value	Best Value	Spain ranking
Availability of finances	2020	2 491,43	4 583,76	14
Avoidable mortality	2020	169,00	143,00	7
Computed Tomography scanners	2020	2,00	4,37	17
Disease burden (DALY)	2019	18 033,38	18 033,38	1
Gamma cameras	2020	0,68	2,69	14
Infant mortality	2020	2,60	1,40	9
Life expectancy females at age 65	2021	23,50	23,50	1
Life expectancy males at age 65	2021	19,10	19,80	5
Life expectancy total population at birth	2021	83,30	83,30	1
Magnetic Resonance Imaging units	2020	1,82	3,45	8
Mammographs	2020	1,66	6,88	12
Positron Emission Tomography scanners	2020	0,19	0,87	12
Practising nurses	2020	6,10	18,37	21
Practising physicians	2020	4,58	6,30	5
Radiation therapy equipment	2020	0,54	1,84	22
Rate of availability of medicines	2021	53,00	92,00	13
UHC index	2019	86,00	88,00	3
Incidence / prevalence of all types of cancers	2020	277,20	247,10	8

READINESS TOMORROW	Year	Value	Best Value	Spain ranking
Alcohol consumption	2019	10,80	6,10	16
Average life span of a minister of health	2023	1,37	5,08	23
Demographic dependency ratios	2022	30,16	21,26	9
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	1,00	1,00	3
Does a country have any type of innovation fund / scheme?	2023	0,00	1,00	18
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	117,90	306,76	15
Fruits consumption	2019	86,20	144,00	11
HPV vaccination rate	2021	77,00	93,00	5
Average time to availability of medicines	2021	517,00	133,00	14
Obesity	2020	14,90	10,50	8
Pollution index	2020	6,69	3,79	7
Proportion of OOP spending on all expenditure types	2020	19,62	8,42	19
Self-reported unmet needs for medical examination	2021	97,20	99,50	9
Smoking	2019	19,70	6,40	20
Tertiary education 25_34	2021	72,30	95,80	27
Tertiary education 55_64	2021	52,60	97,60	25
Vegetables consumption	2019	119,20	287,80	7
Estimated relative change of incidence from 2020 to 2040	2022	0,33	0,01	24

SWEDEN



READINESS TODAY
READINESS TOMORROW

HEALTH READINESS INDEX 2022

0,77

0,71

0,72

READINESS TODAY	Year	Value	Best Value	Sweden ranking
Availability of finances	2020	3 868,12	4 583,76	5
Avoidable mortality	2018	150,00	143,00	3
Computed Tomography scanners	2020	2,80	4,37	10
Disease burden (DALY)	2019	18 069,16	18 033,38	2
Gamma cameras	2019	0,71	2,69	10
Infant mortality	2020	2,40	1,40	6
Life expectancy females at age 65	2021	22,20	23,50	5
Life expectancy males at age 65	2019	19,60	19,80	2
Life expectancy total population at birth	2021	83,20	83,30	2
Magnetic Resonance Imaging units	2020	1,85	3,45	7
Mammographs	2019	1,87	6,88	9
Positron Emission Tomography scanners	2020	0,23	0,87	9
Practising nurses	2019	10,85	18,37	9
Practising physicians	2019	4,29	6,30	8
Radiation therapy equipment	2020	0,64	1,84	18
Rate of availability of medicines	2021	62,00	92,00	9
UHC index	2019	87,00	88,00	2
Incidence / prevalence of all types of cancers	2020	288,60	247,10	10

READINESS TOMORROW	Year	Value	Best Value	Sweden ranking
Alcohol consumption	2019	7,10	6,10	3
Average life span of a minister of health	2023	2,82	5,08	5
Demographic dependency ratios	2022	32,33	21,26	18
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,89	1,00	5
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	0,50	1,00	5
Expenditure on preventive measures	2020	190,87	306,76	8
Fruits consumption	2019	59,30	144,00	23
HPV vaccination rate	2021	83,00	93,00	2
Average time to availability of medicines	2021	261,00	133,00	3
Obesity	2020	14,40	10,50	6
Pollution index	2020	4,56	3,79	3
Proportion of OOP spending on all expenditure types	2020	13,03	8,42	11
Self-reported unmet needs for medical examination	2021	95,30	99,50	13
Smoking	2019	6,40	6,40	1
Tertiary education 25_34	2021	88,90	95,80	14
Tertiary education 55_64	2021	83,80	97,60	10
Vegetables consumption	2019	83,90	287,80	20
Estimated relative change of incidence from 2020 to 2040	2022	0,25	0,01	16

SWITZERLAND



READINESS TODAY

0,00

READINESS TOMORROW

0,00

HEALTH READINESS INDEX 2022

0,00

READINESS TODAY	Year	Value	Best Value	Switzerland ranking	READINESS TOMORROW	Year	Value	Best Value	Switzerland ranking
Availability of finances		-	4 583,76	28	Alcohol consumption		-	6,10	1
Avoidable mortality		-	143,00	1	Average life span of a minister of health		-	5,08	28
Computed Tomography scanners		-	4,37	28	Demographic dependency ratios		-	21,26	1
Disease burden (DALY)		-	18 033,38	1	Does a country have an investment strategy in the health sector?		-	1,00	28
Gamma cameras		-	2,69	28	Does a country have an HTA agency with clear and transparent decision rules?		-	1,00	28
Infant mortality		-	1,40	1	Does a country have any type of innovation fund / scheme?		-	1,00	28
Life expectancy females at age 65		-	23,50	28	Does a country have early access scheme?		-	1,00	28
Life expectancy males at age 65		-	19,80	28	Expenditure on preventive measures		-	306,76	28
Life expectancy total population at birth		-	83,30	28	Fruits consumption		-	144,00	28
Magnetic Resonance Imaging units		-	3,45	28	HPV vaccination rate		-	93,00	28
Mammographs		-	6,88	28	Average time to availability of medicines		-	133,00	1
Positron Emission Tomography scanners		-	0,87	28	Obesity		-	10,50	1
Practising nurses		-	18,37	28	Pollution index		-	3,79	1
Practising physicians		-	6,30	28	Proportion of OOP spending on all expenditure types		-	8,42	1
Radiation therapy equipment		-	1,84	28	Self-reported unmet needs for medical examination		-	99,50	28
Rate of availability of medicines		-	92,00	28	Smoking		-	6,40	1
UHC index		-	88,00	28	Tertiary education 25_34		-	95,80	28
Incidence / prevalence of all types of cancers		-	247,10	1	Tertiary education 55_64		-	97,60	28
					Vegetables consumption		-	287,80	28
					Estimated relative change of incidence from 2020 to 2040	2022	-	0,01	1

UNITED KINGDOM



READINESS TODAY

0,66

READINESS TOMORROW

0,70**HEALTH READINESS INDEX 2022****0,69**

READINESS TODAY	Year	Value	Best Value	United Kingdom ranking
Availability of finances	2019	2 991,08	4 583,76	12
Avoidable mortality	2020	222,00	143,00	17
Computed Tomography scanners	2014	0,95	4,37	27
Disease burden (DALY)	2019	20 956,61	18 033,38	17
Gamma cameras	2019	0,49	2,69	20
Infant mortality	2020	3,60	1,40	19
Life expectancy females at age 65	2020	20,60	23,50	17
Life expectancy males at age 65	2020	18,00	19,80	12
Life expectancy total population at birth	2020	80,40	83,30	16
Magnetic Resonance Imaging units	2014	0,72	3,45	26
Mammographs	2019	0,82	6,88	24
Positron Emission Tomography scanners	2020	0,04	0,87	27
Practising nurses	2021	8,68	18,37	13
Practising physicians	2021	3,18	6,30	24
Radiation therapy equipment	2018	0,81	1,84	10
Rate of availability of medicines	2021	68,00	92,00	6
UHC index	2019	88,00	88,00	1
Incidence / prevalence of all types of cancers	2020	319,90	247,10	20

READINESS TOMORROW	Year	Value	Best Value	United Kingdom ranking
Alcohol consumption	2019	9,70	6,10	10
Average life span of a minister of health	2023	2,05	5,08	11
Demographic dependency ratios	2019	29,83	21,26	8
Does a country have an investment strategy in the health sector?	2023	1,00	1,00	1
Does a country have an HTA agency with clear and transparent decision rules?	2023	0,89	1,00	5
Does a country have any type of innovation fund / scheme?	2023	1,00	1,00	1
Does a country have early access scheme?	2023	1,00	1,00	1
Expenditure on preventive measures	2020	306,76	306,76	1
Fruits consumption	2019	78,80	144,00	12
HPV vaccination rate	2020	64,00	93,00	12
Average time to availability of medicines	2021	340,00	133,00	6
Obesity	2017	21,00	10,50	22
Pollution index	2020	7,24	3,79	11
Proportion of OOP spending on all expenditure types	2020	12,54	8,42	9
Self-reported unmet needs for medical examination	2018	91,70	99,50	21
Smoking	2020	15,40	6,40	10
Tertiary education 25_34	2019	86,10	95,80	19
Tertiary education 55_64	2019	74,40	97,60	19
Vegetables consumption	2019	79,30	287,80	23
Estimated relative change of incidence from 2020 to 2040	2022	0,30	0,01	23

