

Sri Lanka Health Accounts National Health Expenditure

1990-2019

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Colombo, Sri Lanka**

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Any enquiries about or comments on this publication should be directed to:

Health Accounts Unit
Institute for Health Policy
72 Park Street, Colombo 2
Tel: (011) 231-4041/2/3
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Institute for Health Policy

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IHP's Health Accounts Unit is recognized as the leading centre in the region for health accounts development and estimation. Its staff were responsible for designing and developing Sri Lanka's health accounts system starting in 1998 and, in addition to maintaining that system ever since, have provided technical advice and support to the development of health accounts systems in a range of other countries throughout Asia and Europe. The core activities of the unit include maintenance and updating of the Sri Lanka Health Accounts system and development of its applications and new analytical extensions.

Contents

List of tables.....	vii
List of boxes.....	vii
List of figures	viii
Preface	ix
Acknowledgements.....	x
Abbreviations and symbols.....	xi
Highlights.....	xii
1. Background	1
About this report.....	2
Structure of the health sector and flow of funds.....	2
Revision process	4
2. Current Health Expenditure.....	5
2.1 Trends in current expenditure on health.....	6
2.2 Health expenditure in relation to GDP.....	6
2.3 Total health expenditure	6
2.4 Health expenditure per person	6
2.5 Provisional 2019 estimates	7
3. Financing of health expenditure	11
3.1 General trends	12
3.2 Government financing.....	12
3.3 Private financing.....	16
3.4 External donor financing.....	16
3.5 Financing of capital expenditure	17
3.6 Provisional 2019 estimates	17
4. Health expenditure by function	21
4.1 Current expenditure.....	22
Inpatient and outpatient care services	22
Distribution of medicines and medical goods to outpatients.....	22
Preventive care	22
4.2 Pharmaceutical expenditure.....	27
5. Health expenditure by providers	29
5.1 Current expenditure.....	30
5.2 Hospital spending	30
Hospital spending by source of financing	30
5.3 Non-hospital spending.....	33
6. Health expenditure by province and district	37
6.1 Trends in current and government provincial spending.....	38
6.2 Provincial expenditure by source.....	41
6.3 Hospital expenditure by province	44
6.4 District expenditure	44
7. Revenues of health care financing	49
7.1 Trends in revenues of financing	50
8. International comparisons	53
8.1 Comparability of Sri Lanka health accounts estimates.....	54
8.2 Current health expenditure and sources of financing	54
8.3 Composition of spending by function and providers	56

9. Primary care spending	59
9.1 Trends in primary care spending	60
9.2 International comparison of primary care spending	60
9.3 Primary care spending by source of financing	62
10. Technical notes	65
10.1 General	66
Definitions	66
Current health expenditure (CHE)	66
Financing sources	66
Functions	67
Providers	67
Revenues of financing	67
Data sources	68
General	68
Central government.....	68
Provincial and local governments	68
Private sector spending.....	68
Methods used	68
Government spending	68
Fees paid to government healthcare institutions	69
Private hospital spending.....	69
Sales of medicines from pharmacies.....	69
Private dental practitioners.....	69
Employer medical benefits.....	69
Private health insurance expenditure.....	69
Private practitioners and other miscellaneous items of household expenditure	69
11. Appendix A: SHA 1.0 standard tables showing health expenditure in Sri Lanka by financing source, provider and function for selected years	71
12. Appendix B: SHA 2011 standard tables showing health expenditure in Sri Lanka by financing source, provider and function for selected years	93
13. Glossary	119
14. Bibliography	121

List of tables

Table 1: Current, capital and total expenditure on health, nominal and real values (2018 prices), 1990–2019	7
Table 2: Current and total health expenditure, GDP, annual growth rates and share of health on GDP, 1990–2019.....	9
Table 3: Per capita current, total health expenditure and GDP, 1990–2019	10
Table 4: Current health expenditure by financing source, 1990–2019	13
Table 5: Public current expenditure on health by financing source, 1990–2019	15
Table 6: Private current expenditure on health by financing source, 1990–2019	18
Table 7: Capital expenditure on health by financing source, 1990–2019	20
Table 8: Current health expenditure by function (Rs. million), 1990–2019.....	24
Table 9: Share of health expenditure by function (%), 1990–2019	25
Table 10: Shares of health expenditure for each function by source of financing (%), 1990–2019.....	26
Table 11: Current health expenditure by provider, 1990–2019	32
Table 12: Current health expenditure at hospitals by financing source (%), 1990–2019.....	33
Table 13: MOH and PDOH current expenditure on institutions (Rs. million), 1990–2019.....	34
Table 14: MOH and PDOH current expenditure on institutions (%), 1990–2019	35
Table 15: Current health expenditure by province (Rs. million), 1990–2019	39
Table 16: Public current health expenditure per capita by province (Rs.), 1990–2019	40
Table 17: Shares of current health expenditure by province and financing source (%), 1990–2019	42
Table 18: Public current health expenditure per capita by district (Rs.), 1990, 1995, 2000, 2005, 2010 and 2016–2019	45
Table 19: Current expenditure by revenues of financing schemes, 1990–2019	51
Table 20: General economic indicators and health expenditure for selected countries in the Asia-Pacific region	54
Table 21: Current health expenditure by financing agent for selected countries in the Asia-Pacific region (%)	55
Table 22: Current health expenditure by function (mode of production) for selected countries in the Asia-Pacific region (%)	58
Table 23: Current health expenditure by provider for selected countries in the Asia-Pacific region (%)	58
Table 24: Primary care expenditure, 1990–2019	63
Table 25: Primary care spending financed by public sources, 1990–2019	64

List of boxes

Box 1: Basis for geographical distribution of expenditure	38
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List of figures

Figure 1:	The flow of funds in the Sri Lankan health care system, 2019	3
Figure 2:	Current expenditure on health in real values (2018 prices), 1990–2019	6
Figure 3:	Ratio of current health expenditure to GDP (%), 1990–2019	8
Figure 4:	Per capita current and total health expenditure (Rs.), 1990–2019	8
Figure 5:	Share of public and private funding (%), 1990–2019.....	12
Figure 6:	Public and private funding as a share of GDP (%), 1990–2019	14
Figure 7:	Government current health expenditure by financing source (%), 1990–2019.....	14
Figure 8:	Government current health expenditure by financing source (%), 2018.....	16
Figure 9:	Private current health expenditure by financing source (%), 1990–2019	17
Figure 10:	Private current health expenditure by financing source (%), 2018	19
Figure 11:	Capital expenditure by financing source (%), 2018.....	19
Figure 12:	Current health expenditure by function (%), 1990–2019	23
Figure 13:	Current health expenditure by function (%), 2018	23
Figure 14:	Flow of expenditure on medicines in the health sector, 2018.....	27
Figure 15:	Current expenditure by provider (%), 2018	30
Figure 16:	Current health expenditure by provider, 1990–2019	31
Figure 17:	Current health expenditure at hospitals by financing source (%), 1990–2019.....	31
Figure 18:	Current health expenditure by province (Rs. million), 1990–2019	41
Figure 19:	Current health expenditure by financing source and province (% of total), 2018	43
Figure 20:	Per capita health expenditure by financing source (Rs.), 2018	46
Figure 21:	Current public health expenditure per capita by province (Rs.), 2018	46
Figure 22:	Expenditure at public and private hospitals by location of facility and province (Rs. million), 2018.....	47
Figure 23:	Public health expenditure per capita by district (Rs.), 2018	47
Figure 24:	Expenditure at private hospitals by location of facility and district (Rs. million), 2018.....	48
Figure 25:	Expenditure on pharmaceutical purchases at pharmacies and other retail outlets by location of beneficiary and district (Rs. million), 2018	48
Figure 26:	Current health expenditure by revenues of financing (%), 1990–2019.....	50
Figure 27:	Log of per capita health expenditure (PPP\$) vs log of per capita GDP (PPP\$)	55
Figure 28:	Current health expenditure by financing agent for selected Asia-Pacific countries and territories (%) ...	56
Figure 29:	Current health expenditure by function for selected Asia-Pacific countries and territories (%)....	57
Figure 30:	Current health expenditure by provider for selected Asia-Pacific countries and territories (%) ...	57
Figure 31:	Different measures of primary care spending as a share of current health expenditure (%), 1990–2019....	61
Figure 32:	Primary care spending as defined by OECD for Sri Lanka and OECD countries as a share of current health expenditure (%), latest available year	61
Figure 33:	Primary care spending as defined by WHO for Sri Lanka and selected countries as a share of current health expenditure (%), latest available year	62
Figure 34:	Share of primary care spending financed by public sources (%), 1990–2019	62

Preface

Regular tracking and reporting of health expenditure flows is vital to understanding and monitoring Sri Lanka's health system. Such statistics need to show the level and changes in the volume and proportion of economic resources allocated to the production and consumption of health goods and services which, in turn, contribute to the health and well being of the nation. The original Sri Lanka Health Accounts (SLHA) system and Sri Lanka National Health Accounts (SLNHA) framework were designed by IHP staff, led by Ravi P. Rannan-Eliya, working under the direction of the Ministry of Health Management Development and Planning Unit and with the funding support of World Bank during 1998–1999. IHP researchers have updated these on a continuous basis since then to ensure that the SLHA system remains compliant with evolving national needs and the latest international standards and recommendations.

This publication presents estimates for Sri Lanka health expenditure based on the System of Health Accounts 2011 (SHA 2011), which has been endorsed for international reporting by WHO, OECD and Eurostat. For these estimates, IHP updated its SLHA system, which was designed to be compliant with the earlier System of Health Accounts 1.0 (SHA 1.0) standard, to also report statistics according to the new international standard. The revised SLHA system can now report estimates according to all three SHA 2011, SHA 1.0 and SLNHA frameworks.

In this new release, we report estimates in the Appendix Tables according to both the SHA 1.0 or SHA 2011 standards to facilitate comparisons with other estimates. Readers should note that the main difference in the two standards is that SHA 2011 focuses on reporting Current Expenditure on Health, which excludes capital expenditures, in contrast to SHA 1.0 which focuses on reporting of Total Expenditure on Health. However, during development of the new SLHA estimates it was determined that the aggregate value of Current Expenditure on Health was the same in both SHA 1.0 and SHA 2011 formats. IHP plans to continue releasing estimates in both SHA 1.0 and SHA 2011 formats in the foreseeable future, and will update earlier estimates accordingly with each new release.

National Health Expenditure Sri Lanka 1990–2019 is the seventh printed release of the SLHA estimates, updating the previous IHP publication *National Health Expenditure Sri Lanka 1990–2016*. This update incorporates a number of improvements and enhancements since the last release. Responding to interest in primary care, we report for the first time estimates of primary care spending according to four different international definitions. The improvements include several changes in the underlying data sources and revisions to estimation methods in order to increase accuracy and ensure improved compliance with past and emerging international standards. With the refinement and improvement of methods and data sources, estimates of expenditure for all previously reported years have been revised to ensure consistency. This publication thus provides new, updated estimates for all years since 1990, to ensure full comparability of the SLHA estimates across different years. Comparisons of Sri Lankan health expenditure over time should accordingly be based on this publication, rather than on earlier published estimates.

An electronic version of this report as well as the previous reports and additional detailed data are available online at <http://www.ihp.lk/slha>

As the SLHA estimates are continuously updated, there is potential for revisions of data after publication of this report, and readers are advised to refer to the online version for the most up to date statistics. The IHP website also provides information and results from the other analyses linked to the Sri Lanka Health Accounts.

Acknowledgements

The development of Sri Lanka Health Accounts has only been possible with the support of countless individuals and agencies over more than twenty years. Without being exhaustive, we wish to express our sincere thanks to many who have made significant contributions towards this endeavour.

For the work that went into this publication we greatly appreciate the support of successive Director Generals of Health Services, Secretaries of Health, Director Generals, Department of State Accounts, Ministry of Finance and Planning, Directors, Department of State Accounts, Ministry of Finance and Planning, Staff of Department of National Budget, Ministry of Finance and Planning, Mr. U.H Palihakkara (former Chairman, Finance Commission), Mr. A.T.M.U.D.B Thennakoon (Secretary, Finance Commission), Mr. M.L.A Chandradasa (Director, Finance Commission), the chief secretaries and staff of Provincial Councils, the directors and staff of Provincial Departments of Health, staff of the Finance Commission, and the staff of Management, Planning and Development Unit at the Ministry of Health, Local Government authorities, colleagues in the Department of Census and Statistics (DCS), Central Bank of Sri Lanka (CBSL), and other government agencies for facilitating the collection of data. A special note of appreciation is extended to the many individuals and organisations in the private sector who have cooperated over the years in providing data when requested including the management of the insurance companies in Sri Lanka, respondents in private hospitals, laboratories, ambulance companies, and other private sector companies including banks and other statutory bodies. We also acknowledge the continuing support of IQVIA, formerly IMS-Health, (Sri Lanka) who have continued to make their data available to IHP to support this activity. We also express our appreciation for the support and cooperation given by donor agencies and non-profit organisations.

Authors wish to thank Dr. Reggie Perera (former Secretary, Ministry of Health and Senior Fellow, IHP) for his valuable advice, Dr A.T.P.L Abeykoon (former Director, Ministry of Health and Senior Fellow, IHP), Dr. Sarath Samarage (former Deputy Director-General Planning, Ministry of Health and Senior Fellow, IHP) for support and guidance over the years in compilation of the accounts, Sanil de Alwis, Tharanga Fernando, Rehana Thowfeek, Mr. M. Balasubramanium and J.M.H. Jayasundara who made significant contributions to earlier work. We thank Peter Christian and the other support staff at IHP for their contribution to the process of data collection, analysis and reporting.

Finally, we wish to express our sincere appreciation to the Neelan Tiruchelvam Trust for providing financial support to finalize and print this publication.

The collection and analysis of data and writing of this publication was done by Sarasi Amarasinghe, Sachini Fonseka, Dr. K.C.S. Dalpatadu and Dr. Ravindra P. Rannan-Eliya. The graphic design and desktop publishing was by Harees Hashim.

Abbreviations and symbols

AIDS	Acquired Immune Deficiency Syndrome
APNHAN	Asia-Pacific National Health Accounts Network
CBSL	Central Bank of Sri Lanka
CHE	Current Health Expenditure
CIGAS	Computer Integrated Government Accounting System
DCS	Department of Census and Statistics
ETF	Employees Trust Fund
FHB	Family Health Bureau
GDP	Gross Domestic Product
HIES	Household Income and Expenditure Survey
HIV	Human Immunodeficiency Virus
IHP	Institute for Health Policy
MOH	Ministry of Health
MOOH	Medical Officer of Health
OECD	Organization for Economic Cooperation and Development
PDOH	Provincial Department of Health
PDHS	Provincial Directors of Health Services
PPP	Purchasing Power Parity
SHA	System of Health Accounts
SLHA	Sri Lanka Health Accounts
SLPA	Sri Lanka Pharmaceutical Audit
UN	United Nations
UNICEF	United Nations Children's Fund
WHO	World Health Organization

Highlights



Current Health Expenditure

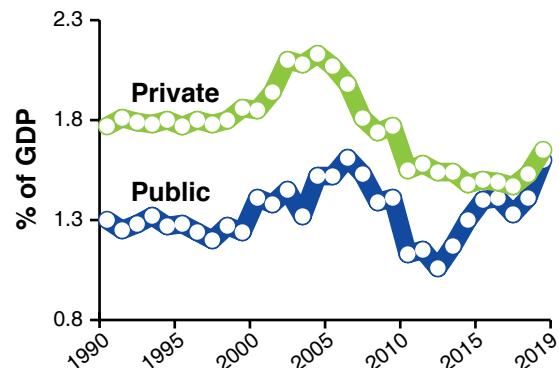
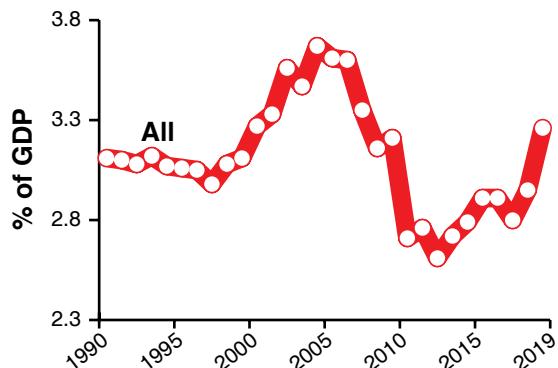
2.9% of GDP
Rs. 423 billion
Rs. 19,772 per person
USD 122 per person

Total Health Expenditure*

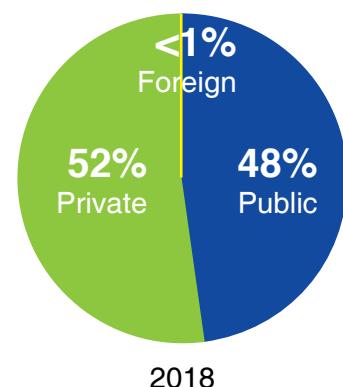
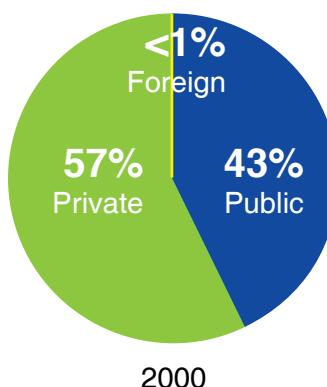
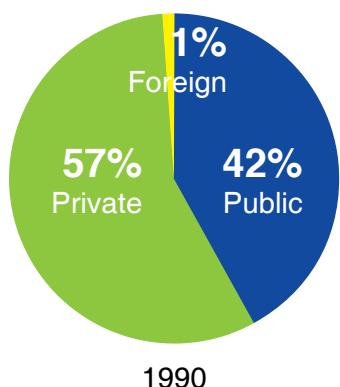
3.4% of GDP
Rs. 481 billion
Rs. 22,485 per person
USD 138 per person

*includes capital investment.

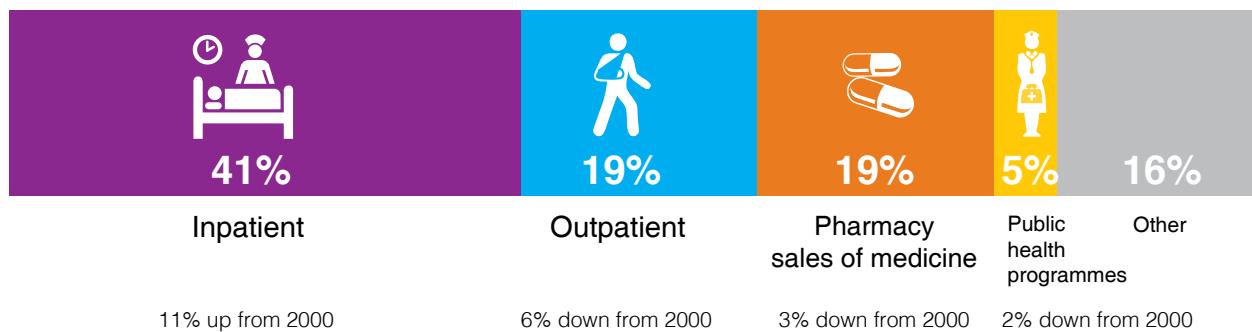
How has current expenditure changed?



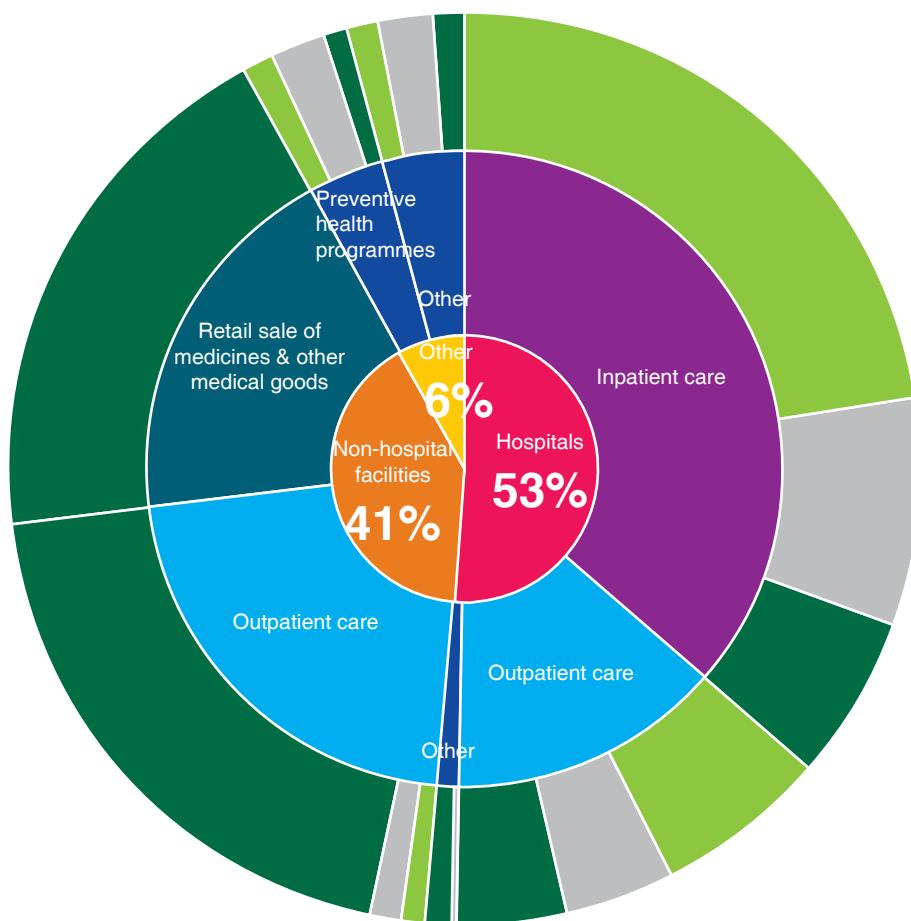
Who paid for it?



What was it spent on?



Current spending on health - where, what and by whom



Institutions

- Hospitals
- Non-hospital facilities
- Other

Services

- Inpatient care
- Outpatient care
- Retail sale of medicines and other medical goods
- Other

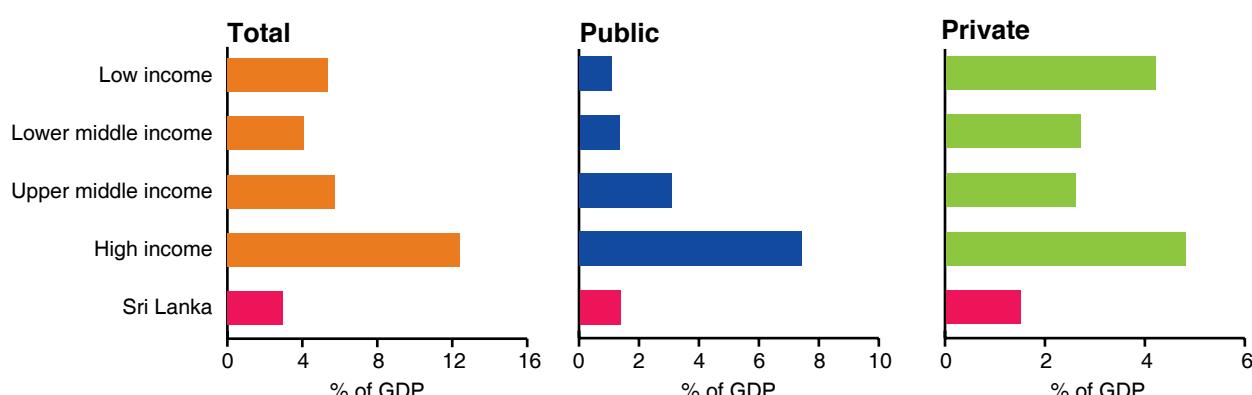
Financing sources

- Central government
- Provincial and local authorities
- Private

Notes

1. Non-hospital facilities include ambulatory care providers (e.g. clinics of private physicians), ancillary service providers, pharmacies and other retail outlets of medical goods.
2. Central government refers to Ministry of Health, other government ministries, departments and agencies.

How does current health expenditure compare with other countries?



1. Background

About this report

This report presents estimates of health spending in Sri Lanka for the period 1990–2018, with preliminary estimates for 2019. This extends our previously published estimates, which covered 1990–2016.

Expenditure is reported by sources of funding, function of care, type of provider and revenues of financing primarily according to the System of Health Accounts 2011 standard, but additional data are provided to derive estimates according to the older SHA 1.0 standard. It should be noted that the Current Expenditure on Health amounts are the same whether measured according to either SHA 2011 or SHA 1.0 standards: the main differences between the two standards relate to how this total is further classified. Further disaggregation by province and district is also presented for certain components of expenditure. The report also presents estimates on the level of spending and cross tabulates expenditure by source, function and provider to profile the mix of funding flows.

The tables and figures in this publication present expenditure in terms of current and constant prices. Constant price expenditure adjusts for the effects of inflation using the implicit GDP deflator provided by the Central Bank of Sri Lanka. Thus, the constant price estimates indicate what expenditure would have been if the 2018 prices has prevailed in all years.

The section on international comparisons of expenditure is made with a selection of territories in the Asia-Pacific region, drawing on the work of Asia-Pacific National Health Accounts Network (APNhan), WHO and OECD.

The final chapter provides technical details on how the estimates were produced. These cover definitions, data sources and methods used. The appendix then presents more detailed estimates and statistical tables. These include selected tables in both SHA 1.0 and SHA 2011 formats for selected years to aid international comparison.

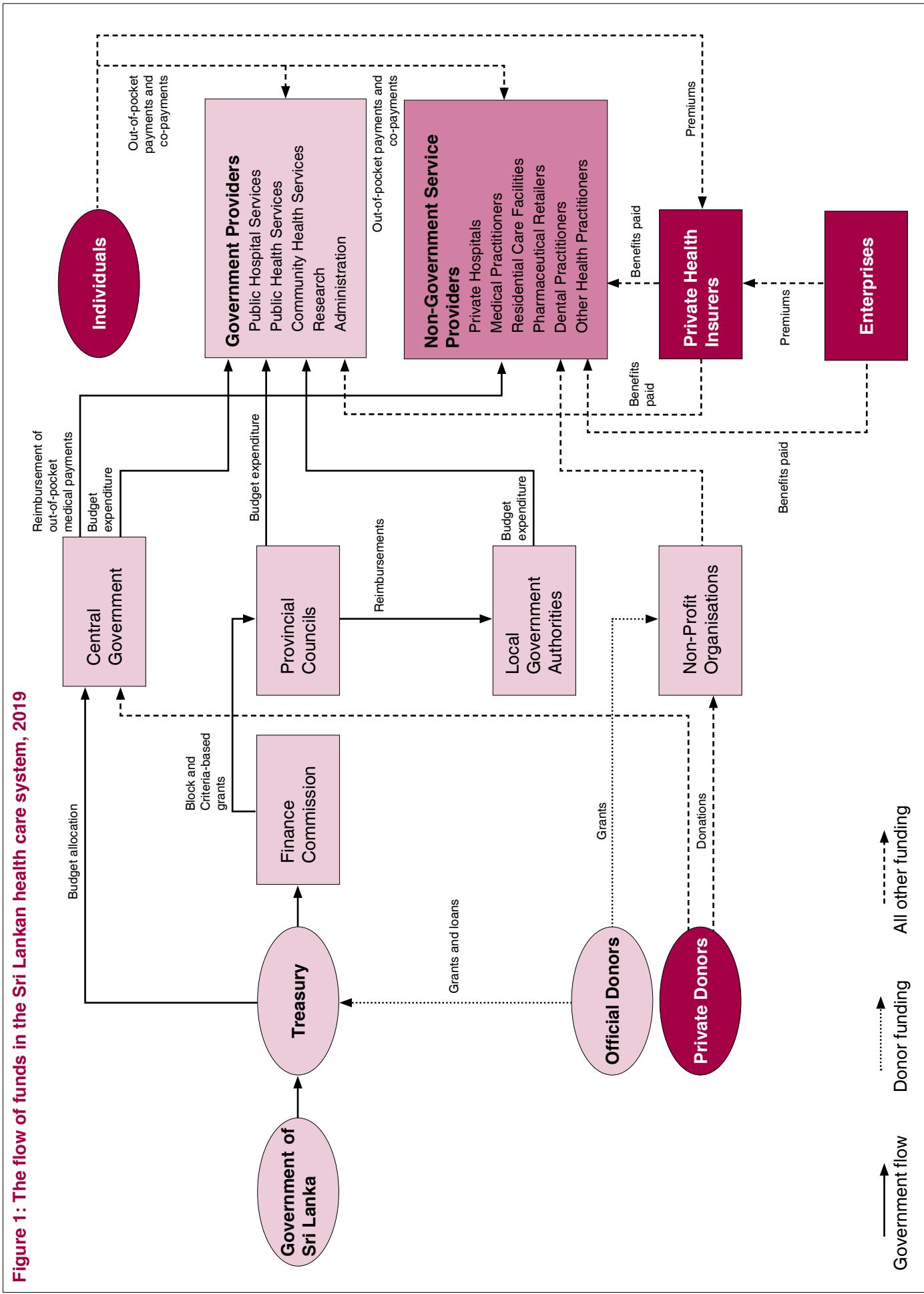
Electronic versions of all tables and figures in this publication and SHA 1.0 SHA 2011 tables for all the years are provided online at:
<http://www.ihp.lk/slha>

Structure of the health sector and flow of funds

Health care in Sri Lanka is provided by the government, private sector and to a limited extent by the non-profit sector. The government sector is predominantly financed from general revenue taxation, while private sector financing is through out-of-pocket spending, private insurance, enterprise direct payments, insurance paid for by enterprises, and contributions from non-profit organizations. Donor financing is largely channelled through the government sector and in certain instances through non-profit organisations. Figure 1 provides a diagrammatic representation of the flow of funds in the health system, and Appendix B provides a presentation of funding flows from revenue sources to financing schemes according to the SHA 2011 format.

Public sector healthcare is universally accessible to the entire population of Sri Lanka and is almost wholly free of charge. A few public hospitals accommodate one or two pay wards, where patients are charged additional fees, but their turnover is negligible in comparison to the rest of public sector delivery. Two revenue-generating, public sector hospitals also operate autonomously under the supervision of their own boards, namely the Sri Jayewardenepura Hospital and the Vijaya Kumaratunga Hospital. In mid 2008, the controlling stake in the private sector Apollo Hospital (presently Lanka Hospitals) in Colombo was transferred to a government-owned commercial enterprise. However, as this hospital still operates as a market enterprise, the SLHA continues to treat it as a private sector entity.

The government sector comprises the central government, the Provincial Councils, and local governments, consisting of municipal councils, urban councils and Pradeshiya Sabhas. The central government provides budgetary funding to the Ministry of Health (MOH), which delivers services directly through its own programmes and the hospitals that are under the purview of the ministry. Some of these central programmes also support and operate through the programmes administered by lower levels of government. The bulk of donor funding is channelled through the Treasury, while some donor funds are disbursed directly through the relevant programmes or projects.



The provincial government financing and services are administered by the Provincial Directors of Health Services (PDHS) offices, which in turn deliver services through the provincial, base, district and divisional hospitals, maternity homes, primary medical care units and Medical Officer of Health (MOOH) units. Most Provincial Council funds are sourced from the Treasury and channelled through the Finance Commission.

The expenditure of local governments is mainly financed from their own revenue but approximately 70% or more of salary costs is reimbursed by Provincial Councils. Local governments have their own service mandates and mainly deal with preventive and outpatient care.

detailed expenditure components using our three decades time series of SLHA estimates and other macro-indicators. Validation of this approach using historical data indicates that it works well, and we are likely to make more use of this approach in future years.

We report our first estimates of primary care spending in this publication. There is no universally agreed definition of primary care, or how to define spending on it. OECD proposes three different proxy measures (Mueller and Morgan 2018) and WHO proposes another extended measure (WHO 2019) for primary care spending. This publication presents estimates for all four proxy measures of primary care spending proposed by OECD and WHO.

Revision process

IHP updates the SLHA estimates on a continuous, annual basis, and the results presented in this publication incorporate revisions to the previous set of published estimates, Sri Lanka Health Accounts: National Health Expenditures 1990–2016. The statistics presented here were current as of April 2021. This comprises revised estimates for 1990–2018 and provisional estimates of national health expenditure in 2019.

Our estimates are produced to be compliant with the SHA 2011 (OECD, Eurostat, and WHO 2011) statistical framework. Since 2015, IHP also reports estimates according to two other frameworks: the original MOH approved Sri Lanka NHA (SLNHA) framework (Institute of Policy Studies and Ministry of Health 2003), and the OECD SHA 1.0 (OECD 2000) framework for the full time series from 1990.

Several methodological improvements are reflected in this update, following the introduction of new data sources and the development of new methods. Estimates of local authority expenditure are now more robust due to improved coverage and response rates in the 2019 IHP survey of local government authorities. We also now use Monte Carlo-based bootstrap estimators to project estimates for the latest year when actual data are not available for some expenditure items. This was in response to Covid-19 lockdowns in 2020 that hindered usual operations of all government and private institutions and obstructed data collection efforts during the year. The approach involves forecasting

2. Current Health Expenditure

2.1 Trends in current expenditure on health

Current expenditure on health goods and services in Sri Lanka in 2018 is estimated as Rs. 423 billion (Table 1). This represents an increase of Rs. 50 billion on the preceding year, and a 13% increase in nominal terms. Spending in 2019 is provisionally estimated to have increased by 16% in nominal terms to Rs. 489 billion. Overall, current health expenditure (CHE) quadrupled in real terms between 1990 and 2018 (Figure 2).

2.2 Health expenditure in relation to GDP

The ratio of CHE to GDP is estimated as 2.9% in 2018 and 3.3% in 2019, and it fluctuated between 2.6% and 3.7% during 1990–2019 (Figure 3). Both GDP and CHE grew in nominal terms in each year from 1990 to 2019 but the trend in the ratio of current health spending to GDP has not been smooth, as seen in Figure 3. It fluctuated between 3.0% and 3.3% pre-2001, then stabilized at approximately 3.6% till 2006, after which it declined and reached at 3.3% in 2019.

2.3 Total health expenditure

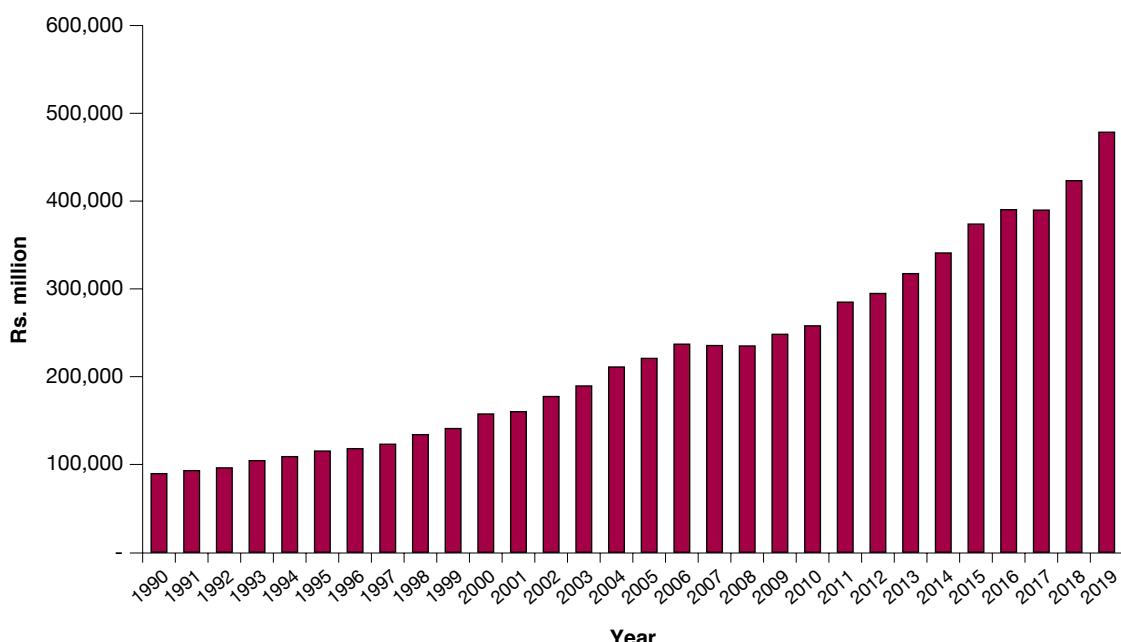
Total expenditure on health goods and services and capital formation in Sri Lanka in 2018 is estimated as Rs. 481 billion (Table 1). This represented an increase of Rs. 58 billion over the preceding year, which is a 14% increase in nominal terms. Total expenditure on health in 2019 is provisionally estimated to have been Rs 541 billion.

The ratio of total health expenditure to GDP provides an indication of the proportion of overall economic activity contributed by the health sector. It is estimated that total expenditure on health accounted for 3.4% of GDP in 2018, which is a drop from the level of 3.7% of GDP in 1990 (Table 2). In the years 2002–2006 the health to GDP ratio reached its highest levels ever, peaking at around 4%.

2.4 Health expenditure per person

As the population grows, health expenditure will also increase at the same rate, if the average expenditure on healthcare for each person in the community remains constant. This means it is essential to examine

Figure 2: Current expenditure on health in real values (2018 prices), 1990–2019



Notes

1. Real values are expressed in terms of 2018 prices.
2. 2019 estimates are provisional.

Source: Table 1.

health expenditure on a per person basis, thereby removing the influence of changes in the overall size of the population from the analysis. During 2018, the estimated per person current health expenditure was Rs. 19,772 or US\$ 122 while per person total health expenditure was Rs. 22,485 or US\$ 138. Provisional estimates indicate that current health expenditure increased to Rs. 22,657 or US\$ 127 per capita in 2019, and per person total health expenditure to Rs. 25,058 or US\$ 140 (Table 3).

2.5 Provisional 2019 estimates

Provisional estimates for 2019 suggest that current expenditure on health increased substantially to Rs 489 billion, with the ratio to GDP increasing from 2.9% to 3.3% year on year. This would have raised current expenditure on a per capita basis to Rs. 23,000 or US\$ 130 per person. These estimates are provisional and more likely to be subject to significant change.

Table 1: Current, capital and total expenditure on health, nominal and real values (2018 prices), 1990–2019

Year	Nominal (Rs. million)			Real ^(a) (Rs. million)		
	Current expenditure on health	Capital formation	Total health expenditure	Current expenditure on health	Capital formation	Total health expenditure
1990	10,010	1,833	11,844	89,525	16,397	105,922
1991	11,539	1,282	12,820	92,956	10,326	103,282
1992	13,114	2,193	15,308	96,115	16,075	112,190
1993	15,584	1,642	17,227	104,345	10,995	115,340
1994	17,801	1,661	19,463	108,907	10,163	119,070
1995	20,416	2,342	22,758	115,241	13,221	128,462
1996	23,436	3,031	26,467	118,000	15,262	133,261
1997	26,560	3,064	29,623	123,025	14,191	137,216
1998	31,338	5,945	37,283	133,946	25,409	159,355
1999	34,448	5,442	39,890	140,899	22,258	163,157
2000	41,067	5,663	46,731	157,482	21,717	179,199
2001	46,930	5,689	52,619	160,090	19,406	179,496
2002	56,368	5,781	62,149	177,382	18,191	195,574
2003	63,275	7,722	70,997	189,412	23,116	212,527
2004	76,686	10,341	87,027	210,991	28,451	239,442
2005	88,640	10,346	98,986	220,832	25,776	246,608
2006	105,862	11,590	117,451	237,001	25,946	262,947
2007	119,900	12,141	132,041	235,451	23,842	259,293
2008	139,207	15,524	154,731	234,968	26,202	261,170
2009	155,362	15,221	170,584	248,254	24,322	272,576
2010	173,592	16,837	190,428	257,903	25,014	282,917
2011	199,048	18,170	217,217	284,879	26,004	310,884
2012	228,266	21,157	249,423	294,773	27,321	322,094
2013	261,148	31,604	292,752	317,373	38,409	355,782
2014	288,635	38,542	327,178	340,905	45,522	386,427
2015	318,567	51,277	369,844	373,802	60,168	433,970
2016	348,634	49,750	398,384	390,169	55,677	445,846
2017	373,541	49,816	423,357	389,718	51,973	441,691
2018	423,219	58,070	481,289	423,219	58,070	481,289
2019 ^(b)	488,918	51,802	540,720	478,464	50,694	529,159

(a) Real values are expressed in terms of 2018 prices.

(b) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

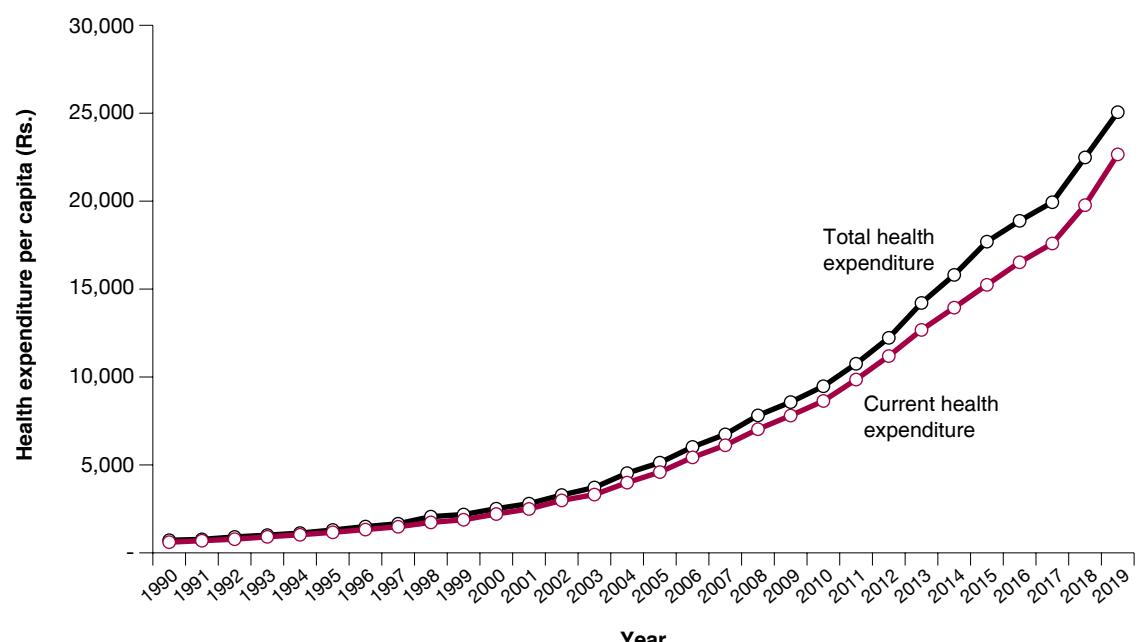
Figure 3: Ratio of current health expenditure to GDP (%), 1990–2019*Note:* 2019 estimates are provisional.*Source:* Table 2.**Figure 4: Per capita current and total health expenditure (Rs.), 1990–2019***Note:* 2019 estimates are provisional.*Source:* Table 3.

Table 2: Current and total health expenditure, GDP, annual growth rates and share of health on GDP, 1990–2019

Year	Current health expenditure			Total health expenditure			GDP		Ratio of current health expenditure to GDP (%)		Ratio of total health expenditure to GDP (%)
	Amount (Rs. million)	Nominal growth rate (%)	Amount (Rs. million)	Nominal growth rate (%)	Amount (Rs. million)	Nominal growth rate (%)	Amount (Rs. million)	Nominal growth rate (%)	Amount (Rs. million)	Nominal growth rate (%)	
1990	10,010	-	11,844	-	321,784	-	3.1	3.7			
1991	11,539	15	12,820	8	372,345	16	3.1	3.4			
1992	13,114	14	15,308	19	425,283	14	3.1	3.6			
1993	15,584	19	17,227	13	499,565	17	3.1	3.4			
1994	17,801	14	19,463	13	579,084	16	3.1	3.4			
1995	20,416	15	22,758	17	667,772	15	3.1	3.4			
1996	23,436	15	26,467	16	768,128	15	3.1	3.4			
1997	26,560	13	29,623	12	890,272	16	3.0	3.3			
1998	31,338	18	37,283	26	1,017,986	14	3.1	3.7			
1999	34,448	10	39,890	7	1,105,963	9	3.1	3.6			
2000	41,067	19	46,731	17	1,257,636	14	3.3	3.7			
2001	46,930	14	52,619	13	1,407,398	12	3.3	3.7			
2002	56,368	20	62,149	18	1,581,885	12	3.6	3.9			
2003	63,275	12	70,997	14	1,822,468	15	3.5	3.9			
2004	76,686	21	87,027	23	2,090,841	15	3.7	4.2			
2005	88,640	16	98,986	14	2,454,782	17	3.6	4.0			
2006	105,862	19	117,451	19	2,938,680	20	3.6	4.0			
2007	119,900	13	132,041	12	3,578,688	22	3.4	3.7			
2008	139,207	16	154,731	17	4,410,682	23	3.2	3.5			
2009	155,362	12	170,584	10	4,835,293	10	3.2	3.5			
2010	173,592	12	190,428	12	6,413,668	33	2.7	3.0			
2011	199,048	15	217,217	14	7,219,106	13	2.8	3.0			
2012	228,266	15	249,423	15	8,732,463	21	2.6	2.9			
2013	261,148	14	292,752	17	9,592,125	10	2.7	3.1			
2014	288,635	11	327,178	12	10,361,151	8	2.8	3.2			
2015	318,567	10	369,844	13	10,950,621	6	2.9	3.4			
2016	348,634	9	398,384	8	11,996,083	10	2.9	3.3			
2017	373,541	7	423,357	6	13,328,103	11	2.8	3.2			
2018	423,219	13	481,289	14	14,366,103	8	2.9	3.4			
2019 ^(a)	488,918	16	540,720	12	15,016,142	5	3.3	3.6			
Average annual growth rate											
1991–2000		15					15				15
2001–2019		14					14				14
1991–2019		14					14				14

(a) Provisional.
Source: IHP Sri Lanka Health Accounts Database.

Table 3: Per capita current, total health expenditure and GDP, 1990–2019

Year	Current health expenditure per capita			Total health expenditure per capita			GDP per capita				
	Nominal (Rs.)	Real (Rs.) ^(a)	Nominal (USD)	Real growth rate (%)	Nominal (Rs.)	Real (Rs.) ^(a)	Nominal (USD)	Real growth rate (%)	Nominal (Rs.)	Real (Rs.) ^(a)	Nominal (USD)
1990	607	5,426	15	-	718	6,420	18	-	19,502	174,410	487
1991	691	5,566	17	2.6	768	6,185	19	-3.7	22,296	179,617	539
1992	776	5,687	18	2.2	906	6,638	21	7.3	25,165	184,431	574
1993	911	6,102	19	7.3	1,007	6,745	21	1.6	29,214	195,604	605
1994	1,029	6,295	21	3.2	1,125	6,883	23	2.0	33,473	204,784	677
1995	1,167	6,585	23	4.6	1,300	7,341	25	6.7	38,158	215,390	745
1996	1,324	6,667	24	1.2	1,495	7,529	27	2.6	43,397	218,504	785
1997	1,484	6,873	25	3.1	1,655	7,666	28	1.8	49,736	230,377	843
1998	1,731	7,400	27	7.7	2,060	8,804	32	14.9	56,242	240,391	871
1999	1,882	7,699	27	4.0	2,180	8,916	31	1.3	60,435	247,190	859
2000	2,208	8,467	29	10.0	2,512	9,634	33	8.1	67,615	259,285	892
2001	2,496	8,515	28	0.6	2,799	9,548	31	-0.9	74,862	255,371	838
2002	2,982	9,385	31	10.2	3,288	10,348	34	8.4	83,698	263,386	875
2003	3,313	9,917	34	5.7	3,717	11,127	39	7.5	95,417	285,628	989
2004	3,994	10,989	39	10.8	4,533	12,471	45	12.1	108,898	299,618	1,076
2005	4,593	11,442	46	4.1	5,129	12,778	51	2.5	127,191	316,876	1,266
2006	5,429	12,154	52	6.2	6,023	13,484	58	5.5	150,702	337,387	1,450
2007	6,117	12,013	55	-1.2	6,737	13,229	61	-1.9	182,586	358,550	1,651
2008	7,031	11,867	65	-1.2	7,815	13,190	72	-0.3	222,762	375,999	2,056
2009	7,807	12,475	68	5.1	8,572	13,697	75	3.8	242,980	388,258	2,114
2010	8,636	12,831	76	2.9	9,474	14,075	84	2.8	319,088	474,065	2,822
2011	9,854	14,103	89	9.9	10,753	15,390	97	9.3	357,381	511,488	3,232
2012	11,190	14,450	88	2.5	12,227	15,789	96	2.6	428,062	552,781	3,355
2013	12,677	15,406	98	6.6	14,211	17,271	110	9.4	465,637	565,890	3,607
2014	13,944	16,469	107	6.9	15,806	18,668	121	8.1	500,539	591,183	3,634
2015	15,242	17,885	112	8.6	17,696	20,764	130	11.2	523,953	614,799	3,854
2016	16,523	18,491	113	3.4	18,881	21,130	130	1.8	568,535	636,269	3,905
2017	17,592	18,354	115	-0.7	19,938	20,802	131	-1.6	627,700	654,884	4,117
2018	19,772	19,772	122	7.7	22,485	22,485	138	8.1	671,158	671,158	4,129
2019 ^(b)	22,657	22,173	127	12.1	25,058	24,522	140	9.1	695,876	680,998	3,892
Average annual growth rate											
1991–2000	4.6										
2001–2019	4.6										
1991–2019	5.0										
											4.8

(a) Real values are expressed in terms of 2018 prices.

(b) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

3. Financing of health expenditure

3.1 General trends

In 2018, government financing of health expenditure was Rs. 203 billion, compared with Rs. 220 billion from private sources (Table 4). This represented 48% of total financing in the health sector in that year. Preliminary estimates indicate that government financing increased to Rs. 241 billion and 50% of total financing in 2019.

During 1990–2019 the relative shares of public and private financing remained similar (Figure 5) with private financing consistently, but modestly, higher than the public contribution over the entire period.

Public sector financing of health was 1.3% of GDP in 1990 while private sector financing was 1.8%. Public sector financing fluctuated between

1.1–1.6% of GDP during 1990–2019 (Figure 6) while private sector financing fluctuated between 1.5–2.1%.

3.2 Government financing

Table 5 and Figure 7 show that the MOH share of total government financing has increased from 39% in 1990 to 61% in 2019. During 1993–2019, MOH accounted for the largest share and Provincial Departments of Health (PDOH) for the second largest share of government financing. In 2018, the MOH share of public sector financing was 60%, while the provincial governments financed 32%. Local government financing was 2% and the Employees Trust Fund and Suraksha student insurance scheme, which is a form of social security, contributed 0.3% (Figure 8).

Figure 5: Share of public and private funding (%), 1990–2019



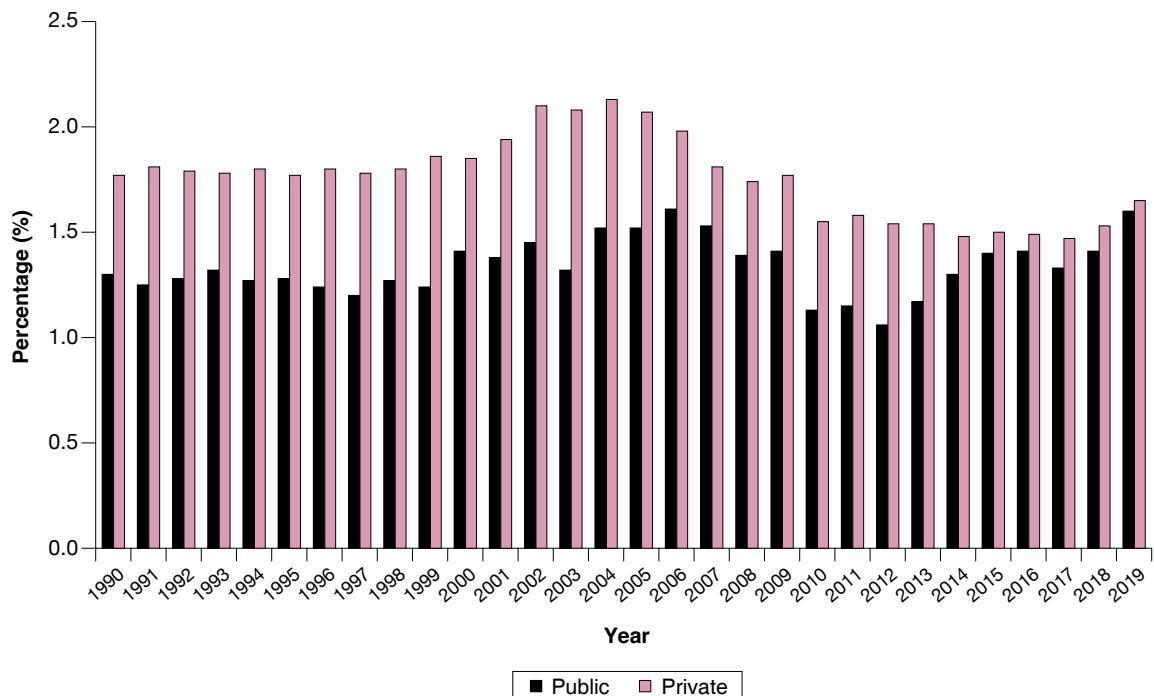
Note: 2019 estimates are provisional.
Source: Table 4.

Table 4: Current health expenditure by financing source, 1990–2019

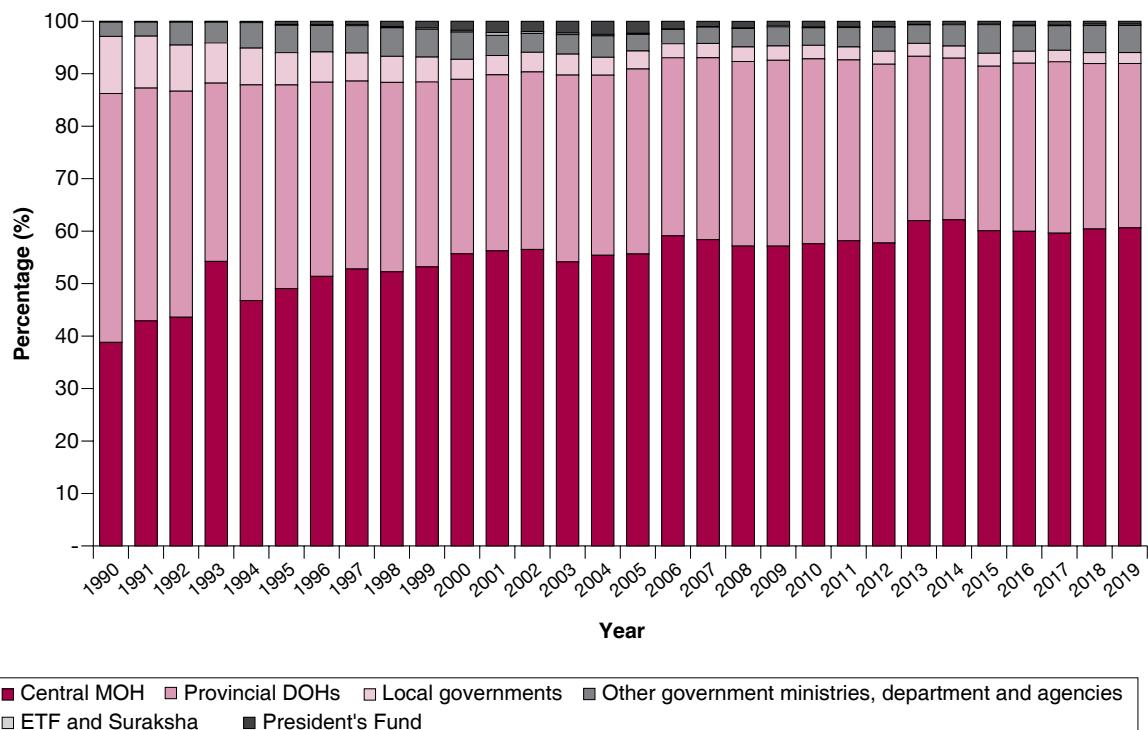
Year	Current health expenditure (Rs. million)			Share of current health expenditure (%)			Current health expenditure as a share of GDP (%)			Total Donors
	Public	Private	Donors	Public	Private	Donors	Total	Public	Private	
				1990	4,194	5,702	114	42	57	1
1991	4,672	6,742	125	40	58	1	100	1.3	1.8	0.0
1992	5,444	7,599	72	42	58	1	100	1.3	1.8	0.0
1993	6,599	8,914	72	42	57	0	100	1.3	1.8	0.0
1994	7,337	10,414	51	41	59	0	100	1.3	1.8	0.0
1995	8,525	11,839	52	42	58	0	100	1.3	1.8	0.0
1996	9,553	13,842	41	41	59	0	100	1.2	1.8	0.0
1997	10,644	15,889	27	40	60	0	100	1.2	1.8	0.0
1998	12,935	18,289	114	41	58	0	100	1.3	1.8	0.0
1999	13,764	20,558	126	40	60	0	100	1.2	1.9	0.0
2000	17,732	23,214	101	43	57	0	100	1.4	1.8	0.0
2001	19,478	27,283	169	42	58	0	100	1.4	1.9	0.0
2002	22,976	33,201	191	41	59	0	100	1.5	2.1	0.0
2003	24,086	37,939	1,250	38	60	2	100	1.3	2.1	0.1
2004	31,734	44,501	452	41	58	1	100	1.5	2.1	0.0
2005	37,367	50,904	369	42	57	0	100	1.5	2.1	0.0
2006	47,406	58,274	182	45	55	0	100	1.6	2.0	0.0
2007	54,591	64,910	399	46	54	0	100	1.5	1.8	0.0
2008	61,391	76,719	1,097	44	55	1	100	1.4	1.7	0.0
2009	68,209	85,532	1,621	44	55	1	100	1.4	1.8	0.0
2010	72,663	99,517	1,411	42	57	1	100	1.1	1.6	0.0
2011	83,291	114,110	1,647	42	57	1	100	1.2	1.6	0.0
2012	92,293	134,295	1,678	40	59	1	100	1.1	1.5	0.0
2013	112,123	147,523	1,501	43	56	1	100	1.2	1.5	0.0
2014	134,375	152,976	1,284	47	53	0	100	1.3	1.5	0.0
2015	153,533	164,194	840	48	52	0	100	1.4	1.5	0.0
2016	168,625	179,278	731	48	51	0	100	1.4	1.5	0.0
2017	177,305	195,420	816	47	52	0	100	1.3	1.5	0.0
2018	202,554	219,580	1,084	48	52	0	100	1.4	1.5	0.0
2019 ^(a)	240,748	247,230	940	50	50	0	100	1.6	1.6	0.0

(a) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Figure 6: Public and private funding as a share of GDP (%), 1990–2019

Note: 2019 estimates are provisional.
Source: Table 4.

Figure 7: Government current health expenditure by financing source (%), 1990–2019

Note: 2019 estimates are provisional.
Source: Table 5.

Table 5: Public current expenditure on health by financing source, 1990–2019

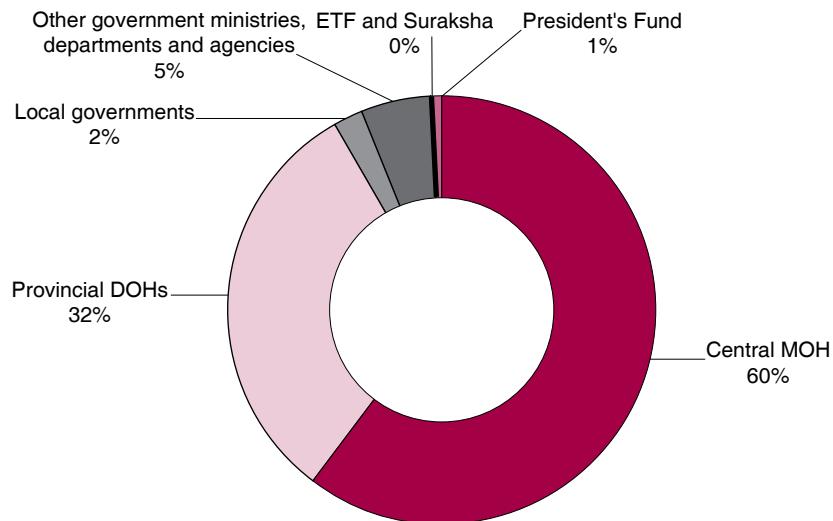
Year	Central MOH		Provincial DOHs		Local governments		Other government ministries, departments and agencies		ETF and Suraksha ^(a)		President's Fund		Public current spending	
	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Ratio ^(b) (%)
1990	1,627	39	1,989	47	456	11	114	3	0	0	7	0	4,194	42
1991	2,004	43	2,073	44	463	10	125	3	1	0	7	0	4,672	40
1992	2,373	44	2,345	43	478	9	237	4	2	0	8	0	5,444	42
1993	3,579	54	2,242	34	506	8	260	4	1	0	11	0	6,599	42
1994	3,431	47	3,015	41	515	7	357	5	4	0	15	0	7,337	41
1995	4,182	49	3,308	39	525	6	445	5	10	0	55	1	8,525	42
1996	4,908	51	3,535	37	551	6	482	5	8	0	68	1	9,553	41
1997	5,618	53	3,812	36	570	5	555	5	15	0	75	1	10,644	40
1998	6,759	52	4,669	36	642	5	706	5	25	0	135	1	12,935	41
1999	7,320	53	4,853	35	651	5	731	5	42	0	167	1	13,764	40
2000	9,886	56	5,901	33	676	4	922	5	58	0	310	2	17,752	43
2001	10,958	56	6,532	34	718	4	747	4	101	1	423	2	19,478	42
2002	12,984	57	7,772	34	860	4	828	4	78	0	454	2	22,976	41
2003	13,037	54	8,577	36	961	4	897	4	72	0	542	2	24,086	38
2004	17,581	55	10,891	34	1,081	3	1,299	4	87	0	795	3	31,734	41
2005	20,796	56	13,172	35	1,283	3	1,186	3	75	0	855	2	37,367	42
2006	28,023	59	16,083	34	1,269	3	1,288	3	30	0	712	2	47,406	45
2007	31,870	58	18,919	35	1,491	3	1,706	3	46	0	559	1	54,591	46
2008	35,087	57	21,599	35	1,702	3	2,163	4	52	0	788	1	61,391	44
2009	38,974	57	24,161	35	1,862	3	2,488	4	76	0	648	1	68,209	44
2010	41,853	58	25,597	35	1,872	3	2,436	3	84	0	823	1	72,663	42
2011	48,462	58	28,692	34	2,060	2	3,033	4	87	0	908	1	83,291	42
2012	53,288	58	31,444	34	2,281	2	4,237	5	79	0	964	1	92,293	40
2013	69,520	62	35,117	31	2,757	2	3,965	4	93	0	671	1	112,123	43
2014	83,542	62	41,371	31	3,099	2	5,474	4	83	0	806	1	134,375	47
2015	92,245	60	48,135	31	3,770	2	8,380	5	111	0	893	1	153,533	48
2016	101,122	60	54,010	32	3,838	2	8,185	5	194	0	1,277	1	168,625	48
2017	105,694	60	57,929	33	3,872	2	8,311	5	160	0	1,340	1	177,305	47
2018	122,364	60	63,871	32	4,210	2	10,447	5	537	0	1,125	1	202,554	48
2019 ^(c)	145,955	61	75,407	31	5,001	2	12,436	5	638	0	1,311	1	240,748	50

(a) The only form of social security financing in Sri Lanka was the Employees Trust Fund until 2016. In 2017 government introduced Suraksha student insurance scheme for school children.

(b) Ratio of total public spending to GHE.

(c) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Figure 8: Government current health expenditure by financing source (%), 2018

Source: Table 5.

3.3 Private financing

Figure 9 and Table 6 show that the bulk of private sector financing consists of household out-of-pocket expenditure, which averaged at 87% of private expenditure throughout the entire period under review. Expenditure by companies to provide healthcare and medical benefits to their employees has been the next largest source of private financing (5–9%).

The contribution from private health insurance as a share of private financing substantially increased from a low level of 1% in 1990 to reach 5% by 2007, which it has maintained until 2014 and increased to 10% by 2019. From a level of 1% in 1990, it reached 10% by 2019, making it one of the most rapidly increasing sources of healthcare financing. The non-profit sector has maintained its share of private financing at 1–3% throughout.

A small share of private financing is by healthcare providers themselves from their own resources, principally for new capital investment in hospital services. The funding on CHE by providers' own resources remained less than 0.5% during 1990–2019.

Figure 10 shows the overall composition of private financing in 2018. Out-of-pocket spending by households remains the predominant element at 81% of total private financing, followed by employers at 9% and insurance with 9%.

3.4 External donor financing

External donors in Sri Lanka largely comprise official multilateral or United Nations (UN) agencies, such as the World Bank, WHO and the Global Fund to Fight AIDS, Tuberculosis and Malaria, and official bilateral agencies from countries such as Japan and Korea. Much smaller flows of external financing are also contributed by non-governmental and other private organizations.

Health sector financing from external donors in Sri Lanka consists mostly of grants and to a lesser extent loans, and is channelled in two ways. Funds from most major donors, such as World Bank and the Japanese International Corporation Agency, are passed through the Treasury, while the rest is sent directly to the programme or institution that administers the funds. Financing from donors that is channelled through the Treasury is not classified as external financing in the SLHA estimates of spending by financing source, and is reported instead as government financing. This reflects the fact that this expenditure is incorporated into the government budget and is reported as such by the government. It is also important to note that foreign loans from agencies, such as the World Bank, must ultimately be paid back from general revenue taxation, and so the ultimate source of financing remains the government, and by extension Sri Lankan households through taxation.

As noted, the external donor financing reported in the SLHA estimates of spending by financing source consists only of amounts that have not been channelled through the Treasury, and instead have been transferred directly from external donor agencies to healthcare providers. These have remained less than 2% of CHE during the time period covered in the SLHA (Table 4). These funds mostly comprised financing received from agencies such as WHO and United Nations Children's Fund (UNICEF). However, even if external donor financing channelled through the Treasury is included, total donor funding of CHE has typically accounted for less than 3% of total spending during the period. Details of this additional financing is given in Chapter 7 and in Appendix B in the tables of flows from revenue sources to financing sources.

3.5 Financing of capital expenditure

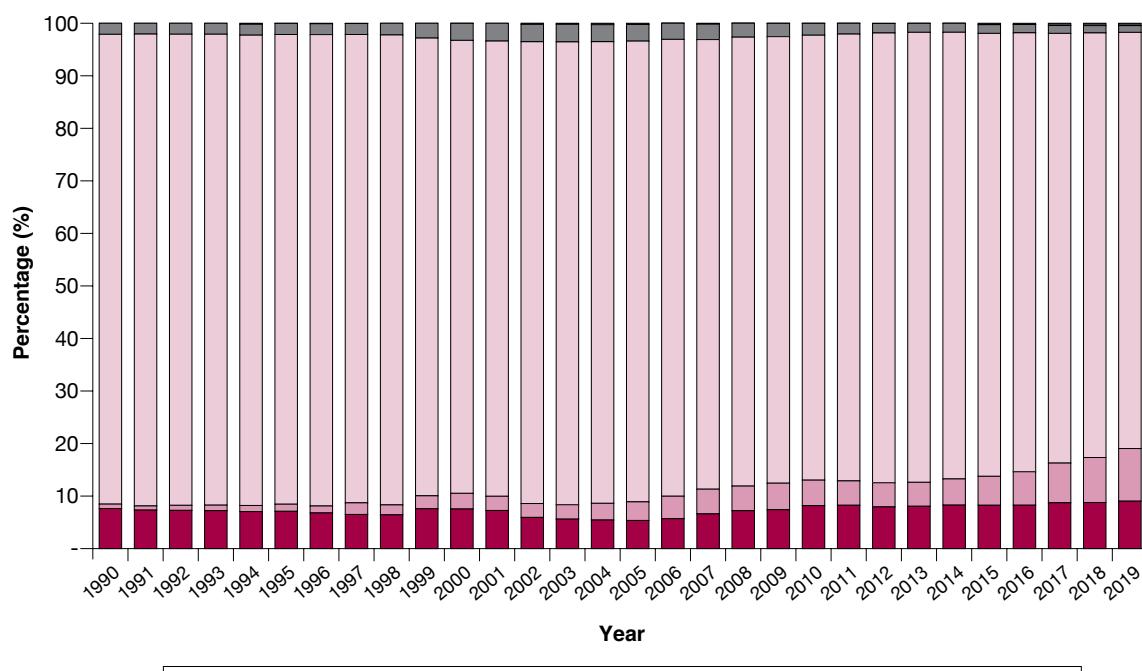
Expenditure for capital formation is allocated largely to building and improving hospitals and purchasing plant and equipment. Much of

the expenditure in the health sector is by the government and a significant part of this is financed by donor funding that is channelled through the Treasury for infrastructure projects in the health sector. However, there has been a growing level of spending by private hospitals, as a result of which expenditure by healthcare providers increased from 6% in 1990 to 12% in 2018: over 10% of total capital expenditure for the last nineteen years. This is accounted for mainly by a number of large, new private hospital investments and extensions of existing private hospitals (Table 7).

3.6 Provisional 2019 estimates

Preliminary data suggest a substantial increase in public spending during 2019, which may be related to it being an election year. Provisional estimates indicate this increased public expenditure from 1.4% of GDP in 2018 to 1.6% in 2019—the highest level since 2007, and raised the public share of financing of current expenditure on health to 50%, the highest it would have been in three decades.

Figure 9: Private current health expenditure by financing source (%), 1990–2019



Note: 2019 estimates are provisional.
Source: Table 6.

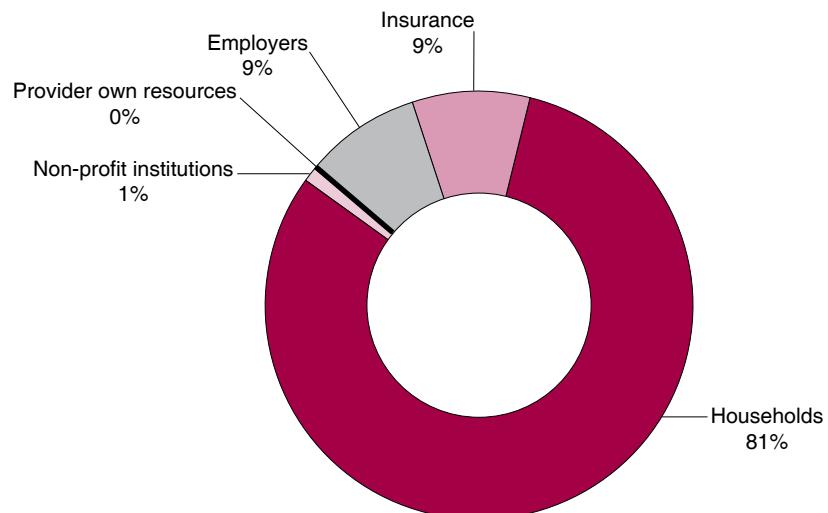
Table 6: Private current expenditure on health by financing source, 1990–2019

Year	Employers (Rs. million)	Insurance		Households		Non-profit institutions		Provider own resources		Total private spending (Rs. million)	Ratio ^(a) (%)
		Amount (Rs. million)	Share (%)								
1990	435	8	48	1	5,099	89	120	2	-	5,702	57
1991	494	7	53	1	6,055	90	139	2	-	6,742	58
1992	553	7	73	1	6,814	90	159	2	-	7,569	58
1993	644	7	92	1	7,990	90	186	2	-	8,914	57
1994	734	7	120	1	9,323	90	216	2	20	10,414	59
1995	840	7	160	1	10,586	89	249	2	4	11,839	58
1996	940	7	182	1	12,420	90	287	2	12	13,882	59
1997	1,033	7	351	2	14,165	89	332	2	8	15,889	60
1998	1,176	6	345	2	16,360	89	408	2	-	18,289	58
1999	1,561	8	505	2	17,912	87	581	3	-	20,558	60
2000	1,750	8	691	3	20,016	86	753	3	4	23,214	57
2001	1,981	7	737	3	23,640	87	925	3	0	27,283	58
2002	1,972	6	876	3	29,182	88	1,097	3	73	33,201	59
2003	2,127	6	1,041	3	33,426	88	1,270	3	76	37,939	60
2004	2,419	5	1,417	3	39,103	88	1,442	3	119	44,501	58
2005	2,727	5	1,801	4	44,643	88	1,614	3	119	50,904	57
2006	3,320	6	2,486	4	50,676	87	1,787	3	6	58,274	55
2007	4,290	7	3,054	5	55,548	86	1,908	3	110	64,910	54
2008	5,536	7	3,591	5	65,552	85	2,038	3	6	76,719	55
2009	6,341	7	4,313	5	72,702	85	2,162	3	14	85,532	55
2010	8,138	8	4,829	5	84,284	85	2,249	2	17	99,517	57
2011	9,415	8	5,298	5	97,046	85	2,338	2	13	114,110	57
2012	10,665	8	6,171	5	114,979	86	2,429	2	52	134,295	59
2013	11,888	8	6,730	5	126,349	86	2,521	2	35	147,523	56
2014	12,668	8	7,615	5	130,059	85	2,616	2	19	152,976	53
2015	13,549	8	9,047	6	138,436	84	2,721	2	441	164,194	52
2016	14,816	8	11,426	6	149,790	84	2,829	2	417	179,278	51
2017	17,056	9	14,753	8	159,826	82	2,939	2	846	195,420	52
2018	19,267	9	18,820	9	177,463	81	3,051	1	979	219,580	52
2019 ^(b)	21,708	9	24,027	10	197,217	79	3,133	1	1,145	247,230	50

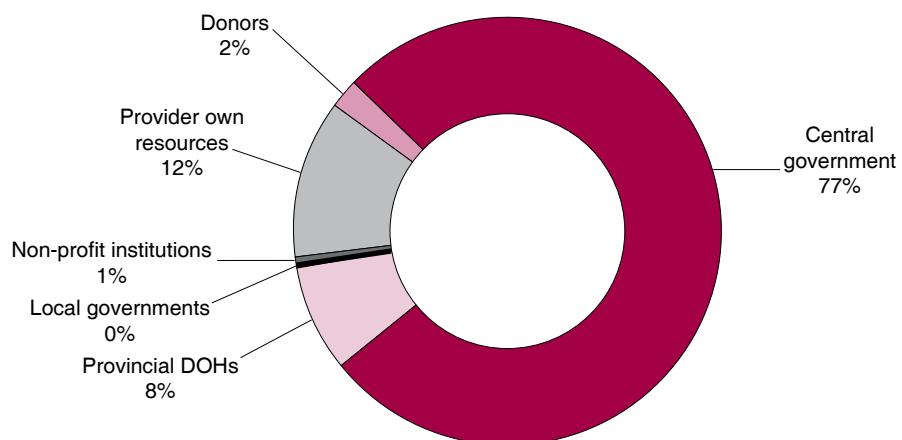
(a) Ratio of total private spending to Current Expenditure on Health (CHE).

(b) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Figure 10: Private current health expenditure by financing source (%), 2018

Source: Table 6.

Figure 11: Capital expenditure by financing source (%), 2018

Source: Table 7.

Table 7: Capital expenditure on health by financing source, 1990–2019

Year	Central government		Provincial DOHs		Local governments		Non-profit institutions		Provider own resources		Donors		Total capital expenditure (Rs. million)
	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	
1990	1,449	79	234	13	24	1	16	1	111	6	-	-	1,833
1991	827	64	255	20	24	2	18	1	154	12	4	0	1,282
1992	1,688	77	284	13	24	1	21	1	148	7	29	1	2,193
1993	1,168	71	240	15	21	1	24	1	182	11	6	0	1,642
1994	1,097	66	294	18	23	1	28	2	220	13	0	0	1,661
1995	1,496	64	530	23	30	1	33	1	253	11	-	-	2,342
1996	1,894	62	758	25	38	1	38	1	29	10	13	0	3,031
1997	1,974	64	683	22	26	1	44	1	330	11	9	0	3,064
1998	4,597	77	903	15	32	1	54	1	330	6	29	0	5,945
1999	3,808	70	1,152	21	29	1	76	1	376	7	1	0	5,442
2000	3,635	64	1,142	20	32	1	99	2	526	9	229	4	5,663
2001	3,336	59	1,278	22	39	1	121	2	901	16	14	0	5,689
2002	3,042	53	807	14	71	1	144	2	1,703	29	13	0	5,781
2003	4,718	61	681	9	40	1	167	2	2,105	27	12	0	7,722
2004	7,645	74	754	7	40	0	189	2	1,285	12	427	4	10,341
2005	6,899	67	1,352	13	44	0	212	2	1,344	13	496	5	10,346
2006	7,588	65	2,172	19	64	1	234	2	1,247	11	284	2	11,590
2007	8,592	71	1,595	13	75	1	250	2	1,258	10	372	3	12,141
2008	9,154	59	2,502	16	131	1	267	2	2,025	13	1,446	9	15,524
2009	7,504	49	2,733	18	182	1	284	2	2,712	18	1,807	12	15,221
2010	9,212	55	3,929	23	219	1	295	2	2,241	13	942	6	16,837
2011	11,052	61	1,916	11	278	2	307	2	3,394	19	1,223	7	18,170
2012	15,646	74	1,476	7	106	0	319	2	3,087	15	524	2	21,157
2013	25,153	80	2,311	7	230	1	331	1	3,412	11	169	1	31,604
2014	31,493	82	2,474	6	241	1	343	1	3,873	10	118	0	38,542
2015	39,887	78	4,196	8	202	0	357	1	5,721	11	914	2	51,277
2016	35,151	71	5,397	11	65	0	371	1	7,731	16	1,035	2	49,750
2017	33,266	67	6,480	13	161	0	386	1	8,220	17	1,303	3	49,816
2018	44,636	77	4,521	8	221	0	400	1	7,030	12	1,263	2	58,070
2019 ^(a)	38,519	74	3,731	7	231	0	418	1	7,584	15	1,320	3	51,802

(a) Provisional.
Source: IHP Sri Lanka Health Accounts Database.

4. Health expenditure by function

4.1 Current expenditure

The SLHA systematically classifies the purposes or functional uses of health expenditure (Table 8). Current expenditure is used for a range of functional purposes, while capital expenditure is used to invest in new capital infrastructure and equipment. For the most part current expenditure as reported by the government is equivalent to what the SLHA terms current expenditure.

Inpatient and outpatient care services

The largest part of health spending is for curative care (that is the combination of inpatient and outpatient care services). This was around 53% of CHE in 1990, and rose to 60% by 2018 (Table 9 and Figure 12). Of the curative care expenditure of 53% of CHE in 1990, 29% of it was outpatient care and 24% inpatient care. During the subsequent years, the inpatient share has increased steadily. By 2018, inpatient spending accounted for 41% of CHE, and outpatient spending 19% (Figure 13). In the provisional estimates for 2019, the inpatient share is 42% and outpatient share is 18%.

Inpatient care is mainly financed by the public sector, which accounted for 82% of expenditure in 1990 (Table 10). In 2018, this dropped to 74%. Outpatient care was mainly financed by the private sector, which was around 82% in 1990 but by 2018 decreased to 66%.

Distribution of medicines and medical goods to outpatients

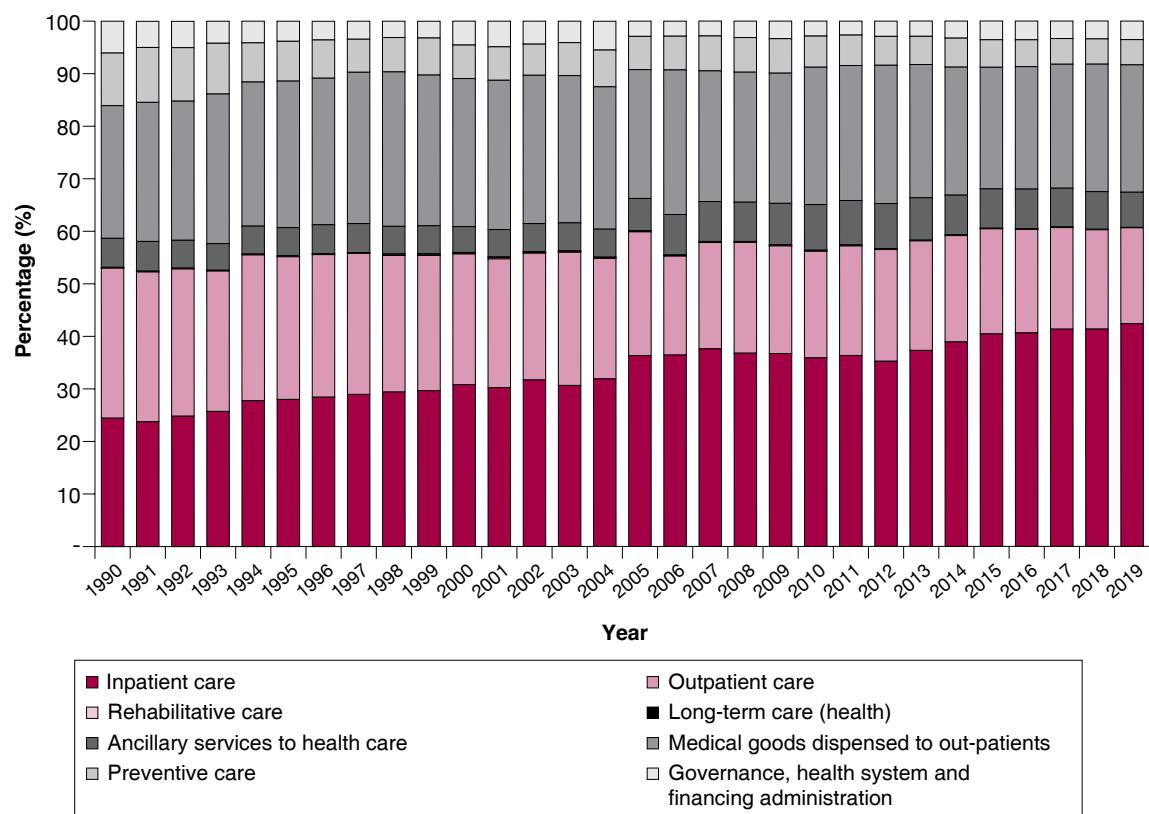
The second major component of spending on personal medical services is on medical goods dispensed to outpatients, which was around 24% of CHE in 2018. This category comprises not only sales of medicines and other medical goods from pharmacies and other retailers, but also medicines and other medical goods provided to outpatients in the public sector. Overall, about 84% of the expenditure to supply medicines and other medical goods to outpatients was privately financed, mostly by household out-of-pocket spending.

This category accounts only for a portion of overall expenditure on medicines in Sri Lanka's health sector. Following international reporting standards, the SLHA reports expenditure on medicines and medical supplies used for inpatient care at hospitals within inpatient care.

Preventive care

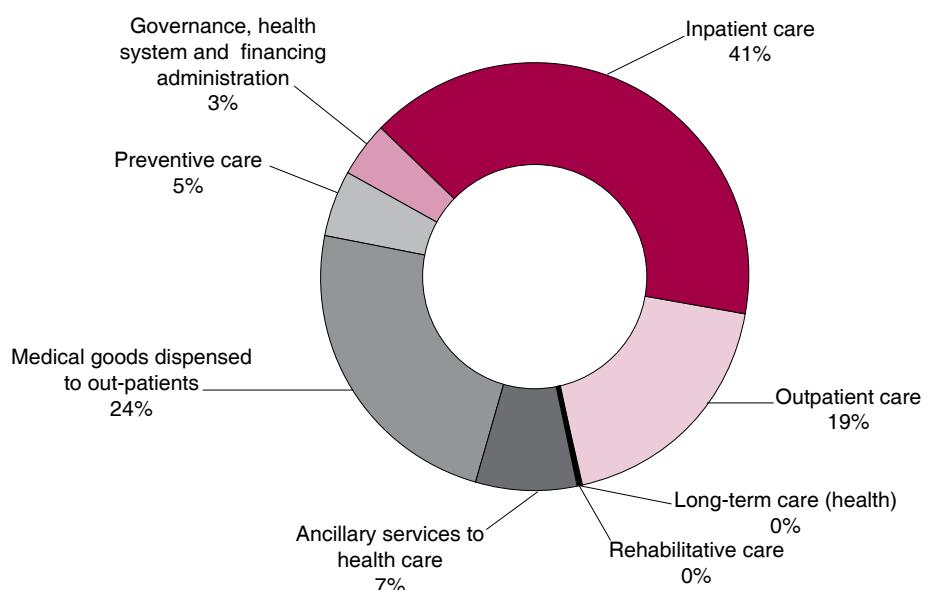
Preventive care expenditure decreased as a share from about 10% of CHE in 1990 to about 5% in 2018. The decline in the share of preventive care in CHE was due solely to a decline in central MOH expenditure. This in turn was largely explained by a decline of more than 80% in malaria control expenditure, and a more modest reduction in Family Health Bureau (FHB) expenditure during the late 1990s. The decline in malaria control expenditure was due to adoption by the health ministry of a more efficient vector-control strategy in accordance with WHO recommendations, and thus represents a productivity improvement. Overall performance of the malaria control programme was maintained, hence reflected in declining caseloads throughout the decade and effective elimination of local transmission of malaria at the end of 2012. The reasons for the decline in FHB spending are unclear, but again available data on outcomes do not indicate that this resulted in deterioration in performance. Despite the declining share, it must be noted that overall expenditure in rupee terms did not fall.

Preventive care is mainly financed by the public sector, but its share fluctuated between 71% and 91% during 1990–2018.

Figure 12: Current health expenditure by function (%), 1990–2019

Note: 2019 estimates are provisional.

Source: Table 9

Figure 13: Current health expenditure by function (%), 2018

Source: Table 9.

Table 8: Current health expenditure by function (Rs. million), 1990–2019

Year	Inpatient care	Outpatient care	Rehabilitative care	Long-term care (health)	Ancillary services to health care ^(a)	Medical goods dispensed to out-patients	Preventive care	Governance, and health system and financing administration	Current health expenditure (Rs. million)
1990	2,448	2,858	10	6	553	2,527	1,003	607	10,010
1991	2,743	3,288	12	7	654	3,055	1,205	575	11,539
1992	3,256	3,675	14	8	697	3,473	1,385	657	13,114
1993	4,009	4,162	15	9	790	4,439	1,506	652	15,584
1994	4,947	4,934	17	11	949	4,883	1,326	735	17,801
1995	5,718	5,543	20	12	1,101	5,694	1,548	780	20,416
1996	6,664	6,360	23	14	1,297	6,536	1,707	835	23,436
1997	7,691	7,126	27	16	1,470	7,648	1,670	911	26,560
1998	9,218	8,144	70	20	1,651	9,213	2,048	975	31,338
1999	10,224	8,864	76	29	1,844	9,880	2,483	1,099	34,448
2000	12,661	10,208	82	37	2,020	11,571	2,619	1,868	41,067
2001	14,195	11,499	131	46	2,439	13,338	2,980	2,292	46,930
2002	17,871	13,604	112	54	3,010	15,913	3,342	2,462	56,368
2003	19,401	16,039	102	63	3,380	17,729	3,971	2,590	63,275
2004	24,472	17,587	114	72	4,083	20,785	5,368	4,206	76,686
2005	32,212	20,874	128	80	5,430	21,732	5,614	2,569	88,640
2006	38,575	19,937	143	89	8,159	29,137	6,794	3,029	105,862
2007	45,119	24,238	153	95	9,109	29,816	7,975	3,395	119,900
2008	51,213	29,346	161	101	10,403	34,447	9,178	4,358	139,207
2009	57,058	31,812	174	107	12,312	38,498	10,195	5,206	155,362
2010	62,305	35,234	232	112	15,095	45,384	10,289	4,940	173,592
2011	72,355	41,505	226	116	16,881	51,135	11,545	5,285	199,048
2012	80,460	48,532	193	121	19,694	60,088	12,552	6,626	228,266
2013	97,421	54,449	200	125	21,092	66,222	14,033	7,606	261,148
2014	112,327	58,419	208	130	21,897	70,328	15,939	9,388	288,635
2015	128,820	63,735	216	135	23,881	73,717	16,692	11,371	318,567
2016	141,672	68,709	225	140	26,368	81,253	17,804	12,464	348,634
2017	154,473	72,203	233	146	27,626	88,152	18,254	12,453	373,541
2018	175,050	79,979	242	151	30,298	102,721	20,355	14,422	423,219
2019 ^(b)	207,258	89,242	249	155	32,720	118,554	23,491	17,250	488,918

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

(b) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Table 9: Share of health expenditure by function (%), 1990–2019

Year	Inpatient care	Outpatient care	Rehabilitative care	Long-term care (health)	Ancillary services to health care ^(a)	Medical goods dispensed to out-patients	Preventive care	Governance, and health system and financing administration	Total
1990	24.4	28.5	0.1	0.1	5.5	25.2	10.0	6.1	100
1991	23.8	28.5	0.1	0.1	5.7	26.5	10.4	5.0	100
1992	24.8	28.0	0.1	0.1	5.3	26.5	10.2	5.0	100
1993	25.7	26.7	0.1	0.1	5.1	28.5	9.7	4.2	100
1994	27.8	27.7	0.1	0.1	5.3	27.4	7.4	4.1	100
1995	28.0	27.2	0.1	0.1	5.4	27.9	7.6	3.8	100
1996	28.4	27.1	0.1	0.1	5.5	27.9	7.3	3.6	100
1997	29.0	26.8	0.1	0.1	5.5	28.8	6.3	3.4	100
1998	29.4	26.0	0.2	0.1	5.3	29.4	6.5	3.1	100
1999	29.7	25.7	0.2	0.1	5.4	28.7	7.1	3.2	100
2000	30.8	24.9	0.2	0.1	4.9	28.2	6.4	4.5	100
2001	30.2	24.5	0.3	0.1	5.2	28.4	6.4	4.9	100
2002	31.7	24.1	0.2	0.1	5.3	28.2	5.9	4.4	100
2003	30.7	25.3	0.2	0.1	5.3	28.0	6.3	4.1	100
2004	31.9	22.9	0.1	0.1	5.3	27.1	7.0	5.5	100
2005	36.3	23.5	0.1	0.1	6.1	24.5	6.3	2.9	100
2006	36.4	18.8	0.1	0.1	7.7	27.5	6.4	2.9	100
2007	37.6	20.2	0.1	0.1	7.6	24.9	6.7	2.8	100
2008	36.8	21.1	0.1	0.1	7.5	24.7	6.6	3.1	100
2009	36.7	20.5	0.1	0.1	7.9	24.8	6.6	3.4	100
2010	35.9	20.3	0.1	0.1	8.7	26.1	5.9	2.8	100
2011	36.4	20.9	0.1	0.1	8.5	25.7	5.8	2.7	100
2012	35.2	21.3	0.1	0.1	8.6	26.3	5.5	2.9	100
2013	37.3	20.8	0.1	0.0	8.1	25.4	5.4	2.9	100
2014	38.9	20.2	0.1	0.0	7.6	24.4	5.5	3.3	100
2015	40.4	20.0	0.1	0.0	7.5	23.1	5.2	3.6	100
2016	40.6	19.7	0.1	0.0	7.6	23.3	5.1	3.6	100
2017	41.4	19.3	0.1	0.0	7.4	23.6	4.9	3.3	100
2018	41.4	18.9	0.1	0.0	7.2	24.3	4.8	3.4	100
2019 ^(b)	42.4	18.3	0.1	0.0	6.7	24.2	4.8	3.5	100

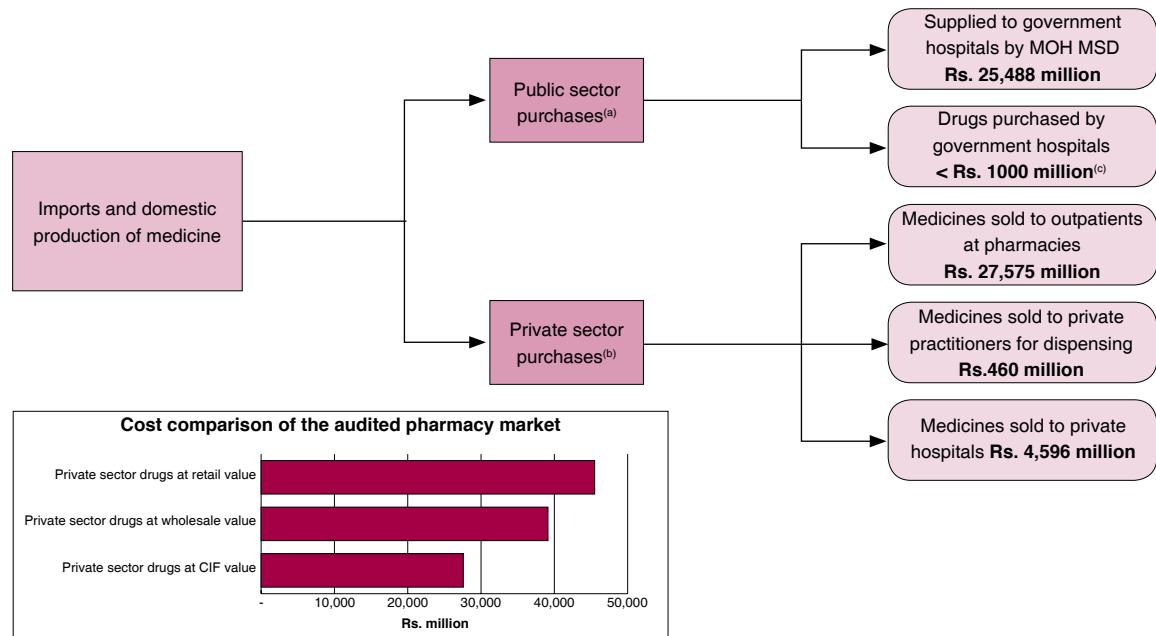
(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.
 (b) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Table 10: Shares of health expenditure for each function by source of financing (%), 1990–2019

Year	Inpatient care		Outpatient care		Medical goods dispensed to outpatients		Preventive care		All other functions of health care	
	Public		Private		Public		Private		Public	
	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private
1990	82	18	18	82	5	95	90	10	56	44
1991	81	19	17	83	8	92	91	9	50	50
1992	80	20	17	83	11	89	90	10	49	51
1993	81	19	15	85	18	82	90	10	43	57
1994	82	18	17	83	13	87	87	13	42	58
1995	81	19	17	83	15	85	87	13	41	59
1996	80	20	16	84	13	87	86	14	39	61
1997	79	21	17	83	14	86	84	16	37	63
1998	79	21	19	81	16	84	84	16	36	64
1999	76	24	19	81	14	86	80	20	34	66
2000	77	23	21	79	18	82	77	23	46	54
2001	76	24	22	78	14	86	74	26	47	53
2002	73	27	23	77	13	87	72	28	43	57
2003	70	30	22	78	13	87	71	29	42	58
2004	70	30	23	77	13	87	77	23	47	53
2005	72	28	24	76	12	88	76	24	29	71
2006	74	26	31	69	16	84	78	22	25	75
2007	75	25	30	70	14	86	80	20	25	75
2008	74	26	28	72	14	86	80	20	26	74
2009	73	27	31	69	13	87	80	20	26	74
2010	74	26	29	71	11	89	80	20	22	78
2011	74	26	28	72	11	89	81	19	21	79
2012	73	27	26	74	10	90	82	18	21	79
2013	73	27	26	74	14	86	84	16	24	76
2014	75	25	29	71	17	83	86	14	27	73
2015	75	25	32	68	17	83	86	14	29	71
2016	75	25	32	68	17	83	87	13	29	71
2017	73	27	33	67	16	84	87	13	28	72
2018	74	26	34	66	16	84	87	13	29	71
2019 ^(a)	74	26	36	64	16	84	89	11	31	69

(a) Provisional.
Source: IHP Sri Lanka Health Accounts Database.

Figure 14: Flow of expenditure on medicines in the health sector, 2018

(a) Public sector purchases are mostly made by the Ministry of Health Medical Supplies Division (MSD) and then distributed to government health institutions.

(b) Private sector expenditure at CIF (cost, insurance and freight) prices.

(c) This refers to the small quantities of medicines that some government hospitals are permitted to self-purchase from their own budgets.

Note: Public sector expenditure is valued in terms of actual purchase prices paid by MOH and MOH institutions. Private sector expenditure is valued in terms of wholesale prices, which are the prices normally paid by retailers to obtain their stocks. Actual retail prices paid by pharmacy customers are higher, as illustrated in the inset box. Wholesale prices are in turn higher than CIF (cost, insurance and freight) prices which are what imported medicines costs when landed at the port.

Source: IHP staff estimates using data from a numerous sources, including MOH and IQVIA formerly IMS-Health (Sri Lanka).

4.2 Pharmaceutical expenditure

The category of expenditure reported by the SLHA as “Medical goods dispensed to outpatients” includes expenditure on providing medicines to outpatients as well as expenditure on providing other medical goods, such as eye-glasses or wheelchairs. Much of this reported expenditure involves purchases by households at pharmacies and other retail outlets. In the government sector, they include mostly spending on providing medicines distributed at outpatient dispensaries, and some other medical goods and supplies distributed from outpatient facilities. They should not be interpreted as being equivalent only to expenditure for medicines.

Furthermore, it is important to note that the expenditure on medicines included in this category only accounts for a proportion of overall expenditure on medicines in Sri Lanka’s health sector. Following international reporting standards, the SLHA does not separate out expenditure on medicines and medical supplies used for inpatient care in public and private hospitals, and this expenditure is included in the category of inpatient expenditure.

This is illustrated in Figure 14, which provides an overview of the overall expenditure on medicines in Sri Lanka’s health sector in 2018. As can be seen, other than the supplies of medicines to outpatients by pharmacies and government outpatient departments, the use of medicines by public and private hospitals and dispensing doctors is substantial. Public financing dominates the financing of medicines used in inpatient care. The expenditure by government on supplying medicines to inpatients is far greater than the amount it spends on outpatient medicines, and also greater than the amount spent on inpatients in the private sector. In considering expenditure on medicines in the private sector, it is worth noting that the flow of medicines in the private sector can be valued in different ways, depending on whether the cost is taken at the point of importation, or at the wholesalers, or at the point of sale to patients (see inset chart in Figure 14). The latter price in the case of pharmacies also includes the mark-up on medicines, which is used to cover the operating costs of running pharmacies. When making comparisons between public sector and private sector purchases, it is probably better to use the values of expenditure at wholesale prices in the private sector. The SLHA itself reports pharmacy sales at retail prices in the functional category referred to as “pharmaceuticals and other medical non-durables”.

5. Health expenditure by providers

5.1 Current expenditure

The institutions and organizations where current health expenditure is incurred in order to deliver healthcare services and goods are systematically classified by provider type in the SLHA (Figure 15). This classification is based on that prescribed in the SHA system, with appropriate modification to the Sri Lankan context.

Four major categories of providers accounted for much of the current expenditure in 2018: hospitals (53%), providers of ambulatory health care (16%), providers of ancillary services (5%) and retailers involved in the sale and distribution of medical goods (19%). Ambulatory care providers consist mainly of the clinics of private physicians and dentists, and government outpatient facilities such as MOOH units and dispensaries. Retail distributors are predominantly private pharmacies. Expenditure at hospitals has become the largest spending component, with its share increasing from 31% in 1990 to 53% in 2018 (Figure 16 and Table 11). The trend was largely at the expense of spending at ambulatory care providers, where the share decreased from 27% to 16%. Spending at pharmacies ranged between 18% to 24% and was 19% in 2018.

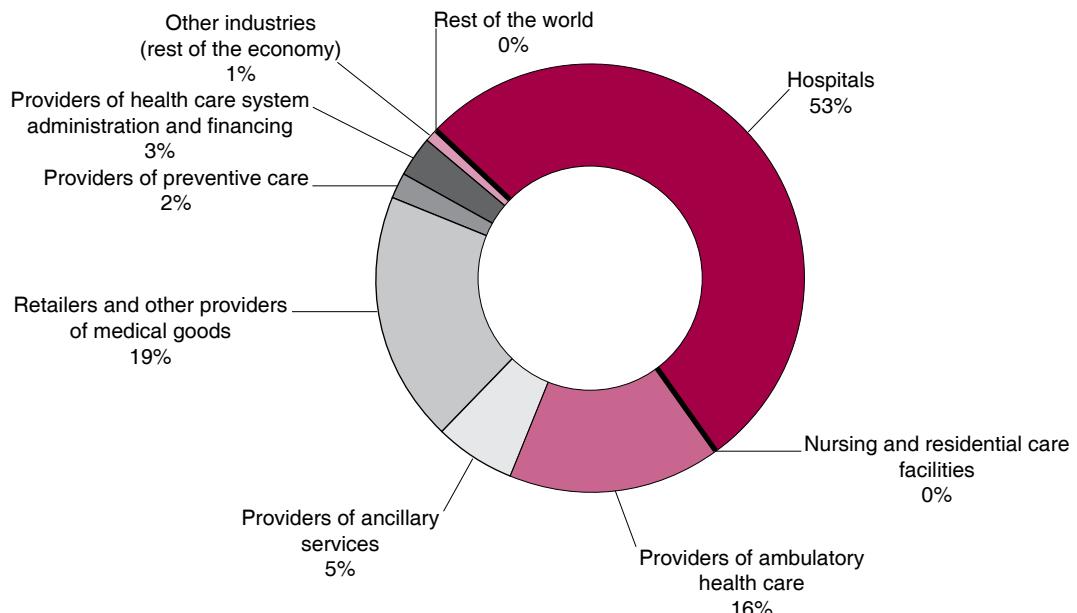
5.2 Hospital spending

Hospital spending by source of financing

Hospital expenditure is mostly financed by public sources, but public sector financing of hospitals has shown some reduction from 85% in 1990 to 78% of the total by 2018 (Table 12 and Figure 17). Private sector financing on the other hand has increased from 15% to 22% during the same period, largely owing to increases in the turnover at private hospitals, which are exclusively financed by private expenditure (household out-of-pocket spending and private health insurance).

Government expenditure at hospitals is almost exclusively by MOH and PDOHs, and is spent at hospitals operated by them. Over time, an increasing proportion of government hospital spending has come from MOH (Table 13 and Table 14). This is partly due to transfers of hospitals from PDOH control to MOH control, and partly owing to faster rates of increase in spending at higher-level government hospitals, which are more likely to fall under MOH responsibility.

Figure 15: Current expenditure by provider (%), 2018



Source: Table 11.

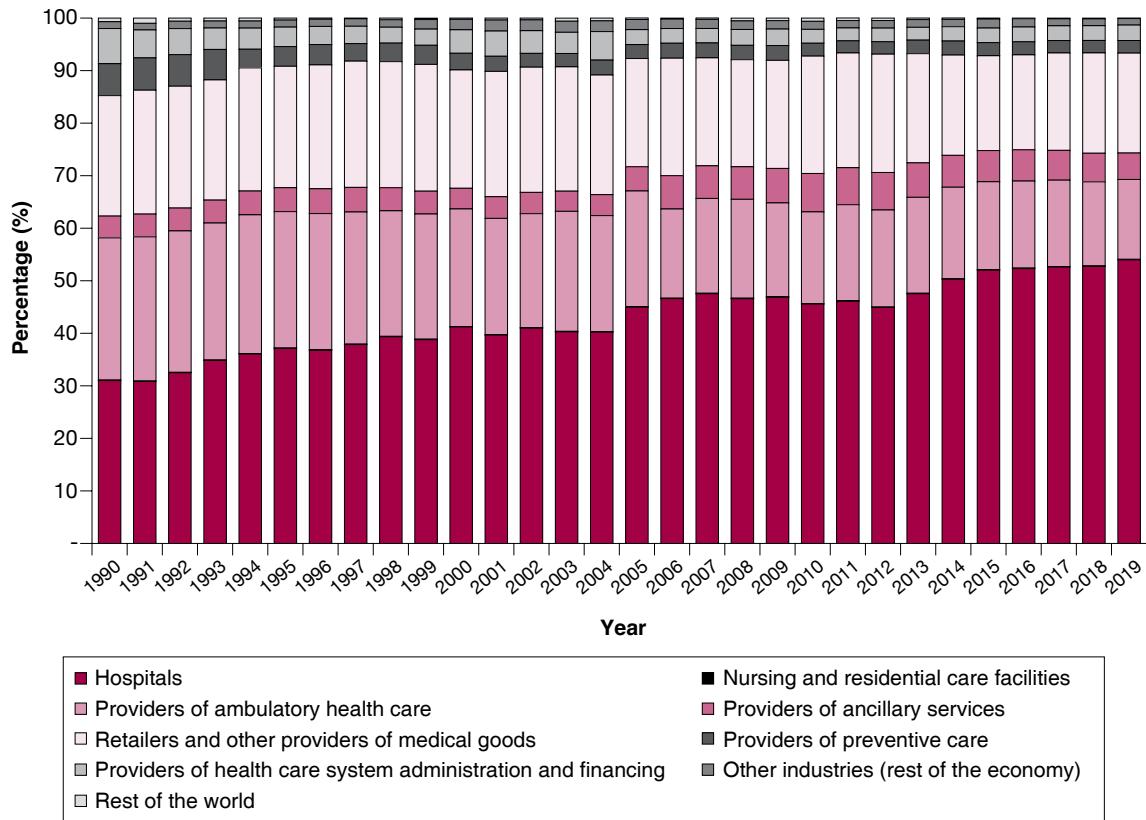
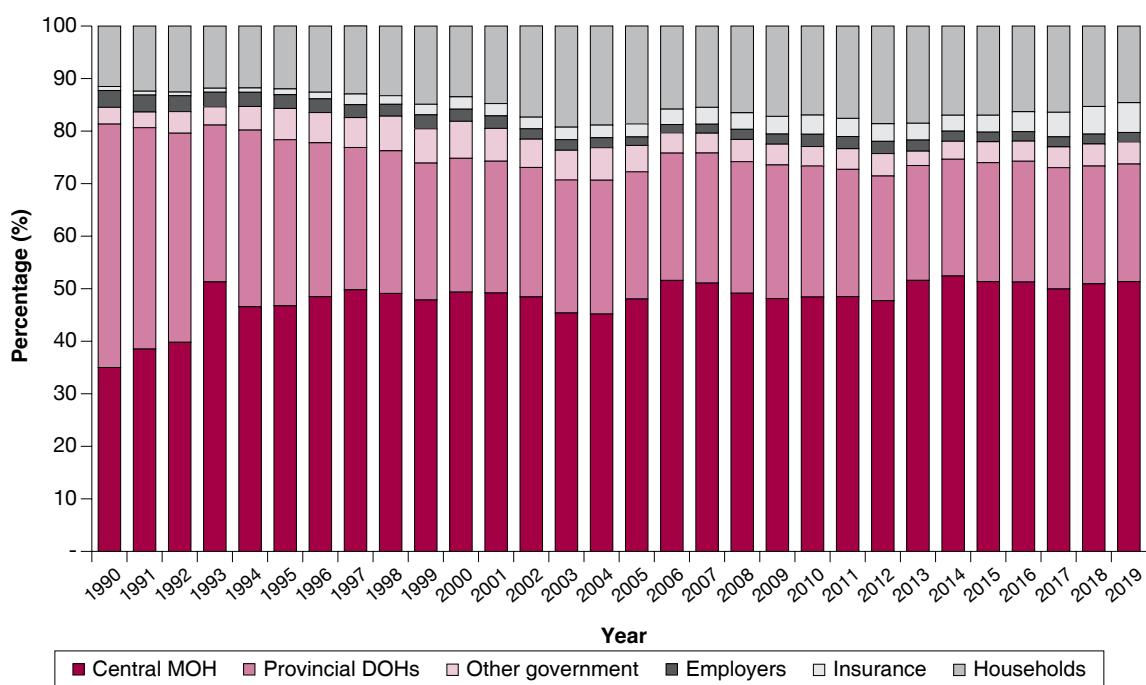
Figure 16: Current health expenditure by provider, 1990–2019**Figure 17: Current health expenditure at hospitals by financing source (%), 1990–2019**

Table 11: Current health expenditure by provider, 1990–2019

Year	Hospitals		Nursing and residential care facilities		Providers of ambulatory health care		Providers of ancillary services ^(a)		Retailers and other providers of medical goods		Providers of preventive care		Providers of health care system administration and financing		Other industries (rest of the economy)		Rest of the world		Current health expenditure (Rs. million)		Total (%)	
		Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)
1990	3,103	31	10	0	2,709	27	416	4	2,295	23	608	6	670	7	130	1	69	1	10,010	100	10,010	100
1991	3,556	31	11	0	3,166	27	500	4	2,721	24	710	6	614	5	146	1	115	1	11,539	100	11,539	100
1992	4,261	32	11	0	3,531	27	570	4	3,041	23	788	6	650	5	184	1	79	1	13,114	100	13,114	100
1993	5,427	35	13	0	4,064	26	680	4	3,566	23	903	6	636	4	207	1	88	1	15,584	100	15,584	100
1994	6,418	36	18	0	4,699	26	806	5	4,172	23	632	4	715	4	239	1	102	1	17,801	100	17,801	100
1995	7,574	37	19	0	5,301	26	930	5	4,718	23	765	4	758	4	273	1	78	0	20,416	100	20,416	100
1996	8,618	37	25	0	6,072	26	1,105	5	5,526	24	906	4	808	3	320	1	55	0	23,436	100	23,436	100
1997	10,053	38	25	0	6,680	25	1,242	5	6,381	24	888	3	876	3	380	1	35	0	26,560	100	26,560	100
1998	12,330	39	25	0	7,491	24	1,377	4	7,520	24	1,102	4	948	3	444	1	101	0	31,338	100	31,338	100
1999	13,363	39	32	0	8,209	24	1,495	4	8,314	24	1,256	4	1,062	3	627	2	91	0	34,448	100	34,448	100
2000	16,922	41	31	0	9,195	22	1,612	4	9,253	23	1,303	3	1,834	4	817	2	100	0	41,067	100	41,067	100
2001	18,611	40	40	0	10,386	22	1,937	4	11,191	24	1,350	3	2,254	5	986	2	175	0	46,930	100	46,930	100
2002	23,100	41	50	0	12,231	22	2,285	4	13,430	24	1,483	3	2,433	4	1,163	2	193	0	56,388	100	56,388	100
2003	25,486	40	60	0	14,451	23	2,430	4	14,980	24	1,608	3	2,548	4	1,337	2	375	1	63,275	100	63,275	100
2004	30,845	40	51	0	16,954	22	3,060	4	17,459	23	2,176	3	4,165	5	1,566	2	410	1	76,686	100	76,686	100
2005	39,858	45	73	0	19,537	22	4,082	5	18,255	21	2,354	3	2,517	3	1,707	2	256	0	88,640	100	88,640	100
2006	49,333	47	89	0	17,980	17	6,707	6	23,676	22	3,019	3	2,968	3	1,904	2	187	0	105,862	100	105,862	100
2007	56,984	48	106	0	21,639	18	7,445	6	24,634	21	3,402	3	3,295	3	2,070	2	326	0	119,900	100	119,900	100
2008	64,854	47	126	0	26,204	19	8,634	6	28,369	20	3,804	3	4,205	3	2,276	2	735	1	139,207	100	139,207	100
2009	72,788	47	150	0	27,766	18	10,189	7	31,939	21	4,383	3	4,884	3	2,487	2	757	0	155,362	100	155,362	100
2010	79,064	46	154	0	30,331	17	12,690	7	38,786	22	4,253	2	4,591	3	2,648	2	1,076	1	173,592	100	173,592	100
2011	91,736	46	173	0	36,433	18	14,005	7	43,464	22	4,611	2	4,858	2	2,799	1	968	0	199,048	100	199,048	100
2012	102,505	45	207	0	42,164	18	16,290	7	51,416	23	5,405	2	5,915	3	3,283	1	1,081	0	228,266	100	228,266	100
2013	124,131	48	225	0	47,680	18	17,127	7	54,288	21	6,705	3	6,385	2	3,826	1	782	0	261,148	100	261,148	100
2014	145,088	50	253	0	50,338	17	17,507	6	55,088	19	7,704	3	7,878	3	4,013	1	767	0	288,635	100	288,635	100
2015	165,721	52	309	0	53,293	17	18,893	6	57,500	18	7,963	2	8,824	3	5,489	2	575	0	318,567	100	318,567	100
2016	182,369	52	364	0	57,752	17	20,728	6	62,982	18	8,694	2	9,814	3	5,504	2	427	0	348,634	100	348,634	100
2017	196,534	53	362	0	61,425	16	21,186	6	69,252	19	8,824	2	10,489	3	4,979	1	489	0	373,541	100	373,541	100
2018	223,139	53	419	0	67,770	16	23,028	5	80,846	19	10,034	2	11,911	3	5,497	1	575	0	423,219	100	423,219	100
2019 ^(b)	263,920	54	500	0	74,300	15	24,583	5	92,990	19	11,727	2	14,355	3	6,038	1	504	0	488,918	100	488,918	100

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

(b) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

5.3 Non-hospital spending

Much of non-hospital spending occurs at ambulatory providers such as physician clinics and pharmacies. Both of these have shown some decline in share, as spending on curative services has shifted to hospitals (Table 11). Of the remaining non-hospital spending, the largest components are spending by agencies involved in providing and administering public health services, which are almost exclusively MOH programmes and units, and those involved in health administration (3% in 2018). Spending by agencies providing public health services has halved as a share of total current spending (from 6% in 1990 to 2% in 2018), in line with the overall slow increase in spending on public and preventive health services by the government. Government departments account for the large part of those

agencies providing health administration, but this category also includes a significant amount of expenditure by private health insurance companies to administer private health insurance firms.

Table 12: Current health expenditure at hospitals by financing source (%), 1990–2019

Year	Public			Private			Total
	Central MOH	Provincial DOHs	Other Government	Employers	Insurance	Households	
1990	35	46	3	3	1	12	100
1991	39	42	3	3	1	12	100
1992	40	40	4	3	1	13	100
1993	51	30	3	3	1	12	100
1994	47	34	4	3	1	12	100
1995	47	32	6	3	1	12	100
1996	48	29	6	3	1	13	100
1997	50	27	6	2	2	13	100
1998	49	27	7	2	2	13	100
1999	48	26	7	3	2	15	100
2000	49	25	7	2	2	13	100
2001	49	25	6	2	2	15	100
2002	48	25	5	2	2	17	100
2003	45	25	6	2	2	19	100
2004	45	25	6	2	2	19	100
2005	48	24	5	2	2	19	100
2006	52	24	4	2	3	16	100
2007	51	25	4	2	3	15	100
2008	49	25	4	2	3	17	100
2009	48	25	4	2	3	17	100
2010	48	25	4	2	4	17	100
2011	48	24	4	2	3	18	100
2012	48	24	4	2	3	19	100
2013	52	22	3	2	3	19	100
2014	52	22	3	2	3	17	100
2015	51	23	4	2	3	17	100
2016	51	23	4	2	4	16	100
2017	50	23	4	2	5	16	100
2018	51	22	4	2	5	15	100
2019 ^(a)	51	22	4	2	6	15	100

(a) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Table 13: MOH and PDOH current expenditure on institutions (Rs. million), 1990–2019

Year	MOH expenditure				PDOH expenditure			
	Teaching and special hospitals	Provincial and base hospitals	Divisional hospitals	Primary medical care units	MOOH units	Provincial and base hospitals	Divisional hospitals	Primary medical care units
1990	1,086	6	4	0	98	507	833	97
1991	1,342	33	5	0	138	521	879	99
1992	1,661	32	13	0	146	619	966	111
1993	2,014	443	315	24	181	605	912	104
1994	2,323	391	267	17	173	813	1,208	131
1995	2,839	409	291	19	218	899	1,347	147
1996	3,396	458	324	20	197	983	1,390	148
1997	4,102	468	429	25	123	923	1,623	172
1998	4,795	562	673	49	147	1,032	2,091	226
1999	5,322	521	543	41	234	1,279	1,972	231
2000	6,793	815	710	63	160	1,771	2,251	288
2001	7,633	762	732	66	197	1,893	2,449	327
2002	9,583	805	749	66	154	2,426	2,860	386
2003	9,605	798	815	71	118	2,633	3,163	470
2004	12,227	929	710	67	601	3,852	3,428	547
2005	17,535	1,048	513	65	656	5,225	3,726	671
2006	20,705	2,830	1,807	188	712	5,834	5,323	795
2007	25,541	2,090	1,378	143	1,031	6,864	6,268	951
2008	27,359	2,926	1,439	268	971	8,894	5,928	1,417
2009	30,308	3,186	1,377	294	1,338	9,927	6,971	1,599
2010	34,609	2,575	1,062	178	1,082	11,134	7,131	1,446
2011	40,279	2,964	1,216	193	1,579	12,617	8,149	1,461
2012	44,502	3,084	1,279	192	1,483	13,885	8,888	1,519
2013	57,420	4,679	1,854	281	1,809	15,605	9,850	1,666
2014	66,324	6,915	2,645	406	2,483	18,824	11,440	1,961
2015	75,469	6,683	2,630	400	2,666	21,801	13,282	2,343
2016	83,141	7,141	2,920	430	2,666	24,087	15,124	2,611
2017	87,492	7,189	2,976	431	2,609	26,005	16,357	2,823
2018	101,284	8,322	3,445	499	3,020	28,670	18,033	3,113
2019 ^(a)	120,810	9,926	4,109	596	3,602	33,848	21,290	3,675

(a) Provisional.

Notes

1. Excludes all military health provider institutions.
2. District Hospitals, Peripheral Units and Rural Hospitals have been re-classified as Divisional Hospital A, B and C under the revised MOH classification of government health care facilities.
3. Central Dispensaries and Maternity Homes have been re-classified as Primary Medical Care Units under the revised MOH classification of government health care facilities.

Source: IHP Sri Lanka Health Accounts Database.

Table 14: MOH and PDOH current expenditure on institutions (%), 1990–2019

Year	Total (Rs. million)	Teaching and special hospitals	Provincial and base hospitals	Divisional hospitals	Primary medical care units	MOOH units
1990	2,814	39	18	30	3	10
1991	3,208	42	17	28	3	10
1992	3,765	44	17	26	3	10
1993	4,805	42	22	26	3	8
1994	5,610	41	21	26	3	8
1995	6,474	44	20	25	3	8
1996	7,254	47	20	24	2	7
1997	8,225	50	17	25	2	6
1998	10,013	48	16	28	3	6
1999	10,598	50	17	24	3	6
2000	13,379	51	19	22	3	5
2001	14,671	52	18	22	3	6
2002	17,741	54	18	20	3	5
2003	18,449	52	19	22	3	5
2004	23,417	52	20	18	3	7
2005	30,671	57	20	14	2	6
2006	39,613	52	22	18	2	5
2007	45,900	56	20	17	2	6
2008	51,013	54	23	14	3	5
2009	56,900	53	23	15	3	6
2010	61,214	57	22	13	3	5
2011	70,655	57	22	13	2	5
2012	77,251	58	22	13	2	5
2013	95,799	60	21	12	2	5
2014	113,943	58	23	12	2	5
2015	128,696	59	22	12	2	5
2016	142,041	59	22	13	2	5
2017	149,963	58	22	13	2	4
2018	170,885	59	22	13	2	4
2019 ^(a)	203,168	59	22	13	2	4

(a) Provisional.

Notes

1. Excludes all military health provider institutions.

2. District Hospitals, Peripheral Units and Rural Hospitals have been re-classified as Divisional Hospital A, B and C under the revised MOH classification of government health care facilities.

3. Central Dispensaries and Maternity Homes have been re-classified as Primary Medical Care Units under the revised MOH classification of government health care facilities.

Source: IHP Sri Lanka Health Accounts Database.

6. Health expenditure by province and district

6.1 Trends in current and government provincial spending

The Sri Lanka health accounts disaggregate health expenditure by province wherever possible, for all years since 1990. This report provides district estimates for public per person expenditure for 1990, 1995, 2000, 2005, 2010 and 2016–2019. The basis on which expenditure is assigned to a province or a district is given in Box 1, and users should apply appropriate caution when interpreting or using these statistics.

Excluding expenditure spent on national collective services and all-island wide personal medical services, 92% of current expenditure in 2018 can be located by province. Of these, the Western Province incurred the highest volume of expenditure, while the Northern Province incurred the lowest (Table 15). For years prior to 2005, the Eastern and Northern Provinces are treated as one unit for reporting purposes but, as indicated by the statistics for 2005–2019, spending in the Eastern Province was greater in those years than in the Northern Province.

Much of these differences in the volume of spending by province can be explained by the differences in population of each province. Table 16 presents the trends in per capita government health expenditure by province. This shows that the public per capita health expenditure was lower in the Sabaragamuwa Province than in the rest of the country. However, it should be noted that much of the government expenditure in the Western Province is at teaching and specialized hospitals where a significant but unquantifiable percentage of patients are referred from other provinces.

Owing to deterioration in the availability and quality of data from conflict areas during previous years, the estimates of public per capita spending in the Northern and Eastern Provinces are subject to considerable uncertainty and lack of reliability. The major reason for this is the lack of reliable and accurate population estimates for most districts in these two provinces during the past two decades. These statistics, especially those for per capita spending, should be used with caution.

Box 1: Basis for geographical distribution of expenditure

In the SLHA framework, expenditure is allocated geographically according to the area in which the benefiting individuals reside. If a person receives healthcare treatment in a district outside the one where he/she normally lives, the expenditure should be allocated to the district where he/she originates. However, only for a few expenditure items does the available data readily identify the area of residence of those receiving services. In practice, for most of the expenditure items assumptions are necessary in order to estimate the relevant areas and, in many cases, owing to the scarcity of data, the expenditure can only be allocated to the district in which the services are provided. The latter is particularly the case with expenditure at government health facilities and private hospitals, where the current SLHA estimates assume that those using the services at any facility reside in the same district. This is an approximation, since for example many patients at government hospitals in Colombo come from other districts. Such limitations in the methods should be borne in mind when using these statistics.

Sometimes, not all health expenditure can be directly or usefully assigned to a province or district. This is particularly the case for expenditure on public or collective health services, which benefit large numbers of people, and not specific individuals, and for expenditure to treat patients from certain populations such as the military. Consequently, the SLHA geographical estimates are based on the following principles:

- (i) Expenditure that is for the benefit of individuals or the population residing in a specific province is classified as expenditure in that province.
- (ii) Expenditure for programmes with the specific purpose of providing personal medical services to individuals employed in the armed forces or police or individuals resident in prison institutions are classified as national level expenditure (as these individuals cannot be regarded as part of the normal population of a province and because it is not practical to make such disaggregation).
- (iii) Expenditure that is for the collective benefit of national or provincial populations is classified as national or provincial-level collective expenditure. Examples include the cost of maintaining the MOH headquarters and certain national or provincial-level public health programmes such as health education for HIV/AIDS.

Table 15: Current health expenditure by province (Rs. million), 1990–2019

Year	Western	Central	Southern	Northern ^(a)	Eastern ^(a)	North-Western	North-Central	Uva	Sabaragamuwa
1990	4,003	961	1,206	553	811	569	377	586	
1991	4,736	1,096	1,361	597	919	631	411	661	
1992	5,489	1,265	1,513	668	1,034	699	454	742	
1993	6,583	1,467	1,797	852	1,229	822	542	883	
1994	7,602	1,739	2,097	941	1,481	985	654	1,062	
1995	8,730	1,995	2,312	1,100	1,661	1,093	695	1,233	
1996	10,087	2,254	2,708	1,244	1,872	1,199	779	1,407	
1997	11,506	2,543	3,130	1,417	2,217	1,303	852	1,605	
1998	13,486	2,977	3,541	1,834	2,553	1,623	1,055	1,869	
1999	14,939	3,243	3,863	1,882	2,870	1,677	1,113	2,034	
2000	17,336	3,772	4,403	2,329	3,400	1,959	1,322	2,353	
2001	19,922	4,348	5,064	2,675	3,840	2,172	1,541	2,691	
2002	24,438	5,158	6,079	3,235	4,596	2,479	1,984	3,176	
2003	27,366	5,832	6,743	3,631	4,952	2,628	2,234	3,666	
2004	34,915	6,433	7,655	4,013	5,860	3,096	2,535	4,048	
2005	39,319	8,361	9,454	2,299	3,073	7,136	3,029	3,210	4,976
2006	45,006	10,183	11,263	2,833	4,110	8,861	4,102	4,051	6,026
2007	50,957	11,701	12,770	3,258	5,004	9,864	5,050	4,544	6,730
2008	59,327	13,516	14,847	3,659	6,008	11,538	5,826	5,179	7,819
2009	65,965	14,871	16,853	4,236	6,921	12,693	6,506	5,782	8,423
2010	74,751	16,764	19,382	4,684	7,749	14,225	6,827	6,407	9,342
2011	86,025	18,962	22,280	5,524	8,723	16,325	7,987	7,323	10,506
2012	100,146	21,296	25,545	6,400	9,651	18,334	9,049	8,322	11,929
2013	113,834	23,953	28,813	7,693	10,426	21,540	10,666	10,046	13,942
2014	124,149	27,584	31,339	9,365	12,074	23,341	12,004	10,814	14,823
2015	136,054	29,239	33,520	10,152	14,557	25,875	13,456	12,227	16,814
2016	148,144	32,946	37,768	11,728	16,089	28,245	14,790	13,259	18,201
2017	160,182	35,398	40,548	12,507	16,543	30,120	15,626	13,840	19,400
2018	180,806	40,339	45,839	14,051	18,731	34,240	17,656	15,505	21,796
2019 ^(b)	208,100	46,784	52,487	16,419	21,976	39,292	20,557	18,088	25,236

(a) Prior to 2007, the Northern and Eastern Provinces functioned as a single administrative unit; the North-East Provincial Council. Consequently, many administrative data sources only reported expenditure for the two provinces combined, and currently it is not feasible to estimate the distribution of spending between the two provinces for earlier years. Consequently, the table displays the expenditure as estimated for both provinces combined for years prior to 2005.

(b) Provisional.

Note: The total of all the provincial spending reported in this table does not equate to CHe, as spending on all-island wide personal medical services and national collective services are not included.

Source: IHP Sri Lanka Health Accounts Database.

Table 16: Public current health expenditure per capita by province (Rs.), 1990–2019

Year	Western	Central	Southern	Northern ^(a)	Eastern ^(a)	North-Western	North-Central	Uva	Sabaragamuwa
1990	261	209	206	180	186	177	256	206	147
1991	297	231	217	186	183	263	212	152	
1992	357	269	241	204	202	290	233	167	
1993	437	305	298	268	240	348	284	202	
1994	475	365	354	283	302	436	353	252	
1995	540	418	372	327	329	477	359	302	
1996	592	452	438	358	343	490	391	332	
1997	643	499	519	396	424	511	410	376	
1998	766	598	578	508	476	718	538	447	
1999	789	642	615	498	536	705	547	477	
2000	958	777	713	638	677	894	671	574	
2001	1,022	877	776	695	717	958	772	635	
2002	1,206	1,044	931	827	858	1,066	1,038	745	
2003	1,235	1,183	982	825	855	1,082	1,147	891	
2004	1,895	1,235	1,052	910	1,042	1,320	1,270	927	
2005	1,948	1,860	1,535	1,642	1,268	1,405	1,122	1,296	
2006	2,261	2,355	1,903	2,043	1,816	1,859	1,836	2,218	1,639
2007	2,610	2,753	2,160	2,298	2,313	2,046	2,486	2,474	1,864
2008	2,856	3,124	2,426	2,570	2,727	2,320	2,834	2,747	2,158
2009	3,076	3,444	2,695	2,902	3,134	2,482	3,191	3,069	2,293
2010	3,245	3,724	2,952	3,190	3,501	2,547	3,135	3,259	2,413
2011	3,637	4,133	3,439	3,794	3,881	2,889	3,686	3,720	2,739
2012	3,928	4,463	3,714	4,336	4,221	2,978	4,087	4,153	3,021
2013	4,726	5,124	4,477	5,397	4,687	3,892	5,158	5,318	3,849
2014	5,745	6,326	5,243	6,866	5,722	4,458	6,096	5,851	4,262
2015	6,340	6,649	5,657	7,399	7,162	5,178	7,001	6,822	5,154
2016	6,759	7,551	6,560	8,587	7,906	5,558	7,660	7,396	5,557
2017	6,950	8,011	6,948	9,021	7,987	5,775	7,964	7,636	5,853
2018	7,888	9,083	7,819	10,095	8,992	6,494	8,952	8,555	6,564
2019 ^(b)	9,306	10,736	9,214	11,940	10,540	7,642	10,506	10,081	7,738

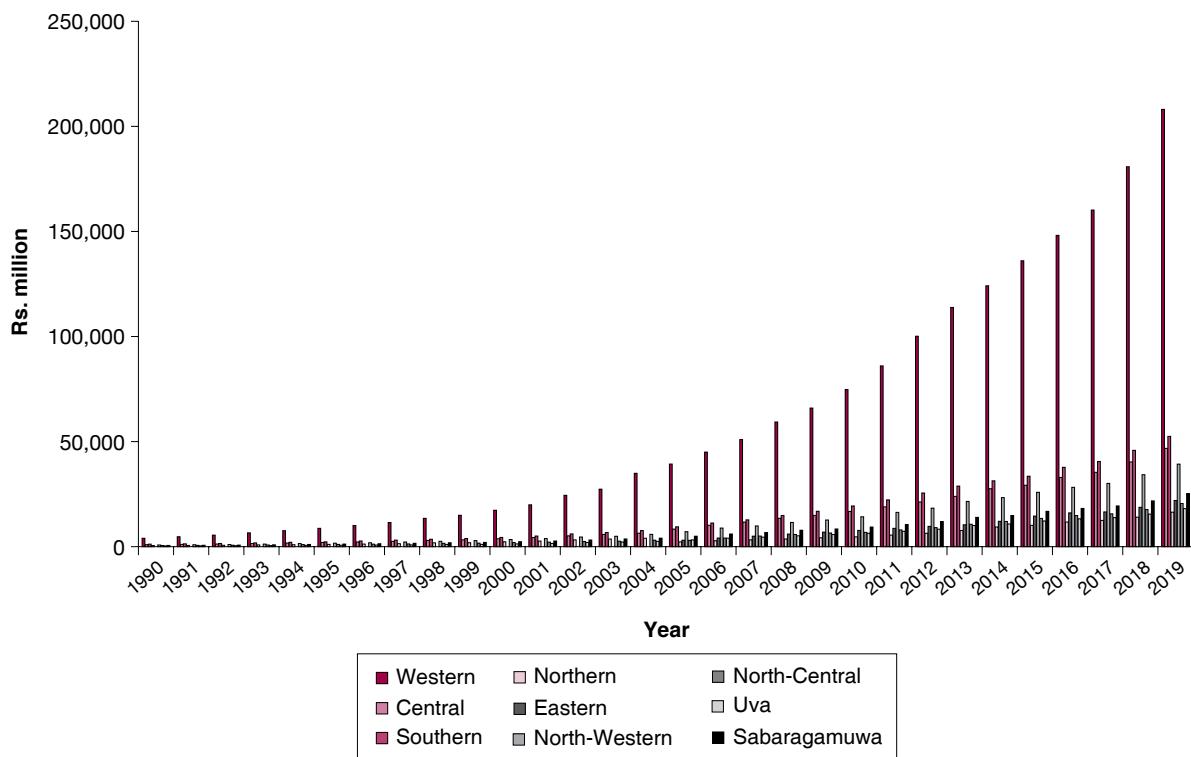
(a) Prior to 2007, the Northern and Eastern Provinces functioned as a single administrative unit: the North-East Provincial Council. Consequently, many administrative data sources only reported expenditure for the two provinces combined, and currently it is not feasible to estimate the distribution of spending between the two provinces for earlier years. Consequently, the table displays the expenditure as estimated for both provinces combined for years prior to 2005.

(b) Provisional.

Notes

1. Population figures used for provincial calculations were derived as follows: Census data for mid year population was used for 1981, 2001 and 2012. Time series from 1981 to 2012 was estimated based on population growth for inter-census years.
2. The total of all the provincial spending reported in this table does not equate to CHe, as spending on all-island wide personal medical services and national collective services are not included
3. Per capita estimates for the Northern and Eastern Provinces are not reliable due to large uncertainties in the statistics for provincial populations.

Source: IHP Sri Lanka Health Accounts Database.

Figure 18: Current health expenditure by province (Rs. million), 1990–2019**Notes**

1. Northern and Eastern Provinces are represented as a merged province for the years prior to 2005. Therefore, the column representing the Northern Province is in fact the merged province of North and East for the years prior to 2005.

2. 2019 estimates are provisional.

Source: Table 15.

6.2 Provincial expenditure by source

Financing from private sources accounted for the bulk of expenditure in the Western, Southern and North-Western Provinces (Table 17 and Figure 19). Most of this variation is explained by private spending for outpatient care and medical goods dispensed to outpatients. Spending in the Uva Province was mostly public, while in the Central, North-Central and Sabaragamuwa Provinces it was mostly private in the early 1990s, and became more public towards the end of the time period under review.

In the Western Province, the share of private spending has increased over time, reaching 73% by 2018, while the share of private spending fell from 52% in 1990 in the Central Province to 40%. A similar decline is observed in the North-Central Province where the private share decreased from 57% to 31% during the same period.

It can be seen from Figure 20 that per capita spending by private sources in 2018 was comparatively high

in the Western, Southern and North-Western Provinces. The highest total per capita private spending in 2018 was estimated at Rs. 21,505 in the Western Province. Figure 21 shows that public sector health expenditure on a per capita basis was highest in the Northern Province, while the North-Western Province had the lowest level.

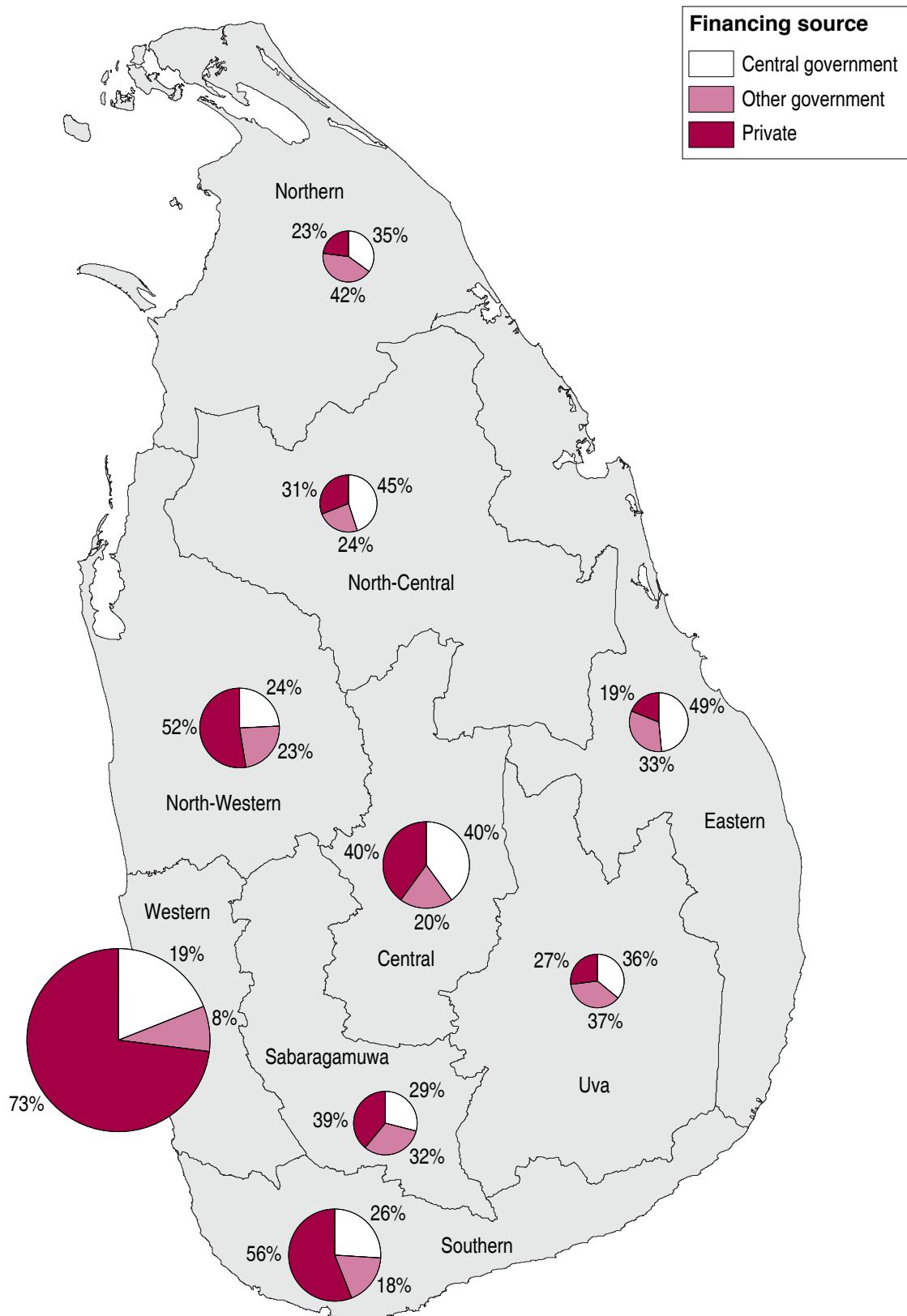
Table 17: Shares of current health expenditure by province and financing source (%), 1990–2019

Year	Western		Central		Southern		Northern ^(a)		Eastern ^(a)		North-Western		North-Central		Uva		Sabaragamuwa	
	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private	Public	Private
1990	29	71	48	52	35	65	72		28	42	58	43	57	56	44	41	59	59
1991	29	71	47	53	33	67	70		30	38	62	40	60	54	46	37	63	63
1992	30	70	48	52	33	67	69		31	38	62	41	59	54	46	37	63	63
1993	32	68	47	53	35	65	72		28	39	61	42	58	56	44	38	62	62
1994	30	70	48	52	36	64	70		30	41	59	45	55	58	42	40	60	60
1995	30	70	48	52	35	65	70		30	40	60	45	55	56	44	42	58	58
1996	29	71	46	54	35	65	68		32	37	63	42	58	56	44	40	60	60
1997	28	72	46	54	36	64	67		33	40	60	41	59	54	46	41	59	59
1998	29	71	47	53	36	64	68		32	39	61	47	53	58	42	42	58	58
1999	28	72	47	53	36	64	65		35	40	60	46	54	56	44	41	59	59
2000	29	71	49	51	37	63	67		33	43	57	50	50	59	41	44	56	56
2001	28	72	49	51	35	65	65		35	41	59	49	51	59	41	42	58	58
2002	27	73	49	51	35	65	64		36	41	59	48	52	62	38	42	58	58
2003	25	75	50	50	34	66	61		39	38	62	47	53	61	39	44	44	56
2004	30	70	47	53	32	68	59		41	40	60	49	51	60	40	42	58	58
2005	28	72	55	45	38	62	75	25	60	40	44	56	43	57	64	36	48	52
2006	28	72	58	42	40	60	76	24	65	35	48	52	53	47	67	33	51	49
2007	29	71	59	41	40	60	76	24	68	32	47	53	59	41	67	33	52	48
2008	27	73	58	42	39	61	75	25	68	32	46	54	59	41	65	35	52	48
2009	27	73	59	41	39	61	75	25	69	31	46	54	60	40	66	34	52	48
2010	25	75	57	43	37	63	74	26	69	31	42	58	57	43	64	36	49	51
2011	25	75	56	44	38	62	74	26	69	31	42	58	58	42	64	36	50	50
2012	23	77	54	46	36	64	73	27	69	31	39	61	58	42	63	37	49	51
2013	25	75	55	45	39	61	75	25	71	29	43	57	62	38	68	32	54	46
2014	28	72	60	40	42	58	78	22	76	24	46	54	66	34	70	30	56	44
2015	28	72	60	40	43	57	78	22	80	20	49	51	69	31	72	28	60	40
2016	28	72	60	40	45	55	79	21	81	19	49	51	69	31	73	27	61	39
2017	26	74	60	40	44	56	78	22	80	20	48	52	69	31	73	27	60	40
2018	27	73	60	40	44	56	78	22	81	19	48	52	69	31	73	27	61	39
2019 ^(b)	28	72	62	38	46	54	79	21	82	18	49	51	71	29	74	26	62	38

(a) Prior to 2007, the Northern and Eastern Provinces functioned as a single administrative unit; the North-East Provincial Council. Consequently, many administrative data sources only reported expenditure for the two provinces combined, and currently it is not feasible to estimate the distribution of spending between the two provinces for earlier years. Consequently, the table displays the expenditure as estimated for both provinces combined for years prior to 2005.

(b) Provisional.

Note: Shares computed excluding donor spending.
Source: IHP Sri Lanka Health Accounts Database.

Figure 19: Current health expenditure by financing source and province (% of total), 2018**Notes**

1. Excludes expenditure on all-island wide personal medical services and national collective services (See Box 1).
2. The size of the pies are representative of the value of CHE.

6.3 Hospital expenditure by province

Figure 22 presents expenditure on hospitals in public and private sectors for each province. Expenditure at private hospitals was highest in the Western Province as would be expected due to the high concentration of hospitals in Colombo, followed by the Central and Southern Provinces.

6.4 District expenditure

IHP continues to work on disaggregating the SLHA estimates by district, but this remains a work in progress owing to continuing data limitations. As in previous reports, this publication provides estimates of public expenditures by district (Table 18). The Northern and Eastern Provinces were administered as one unit for earlier years with a single provincial council administration. Consequently, many administrative data sources only reported expenditure for the two provinces combined, and it is not currently feasible to estimate the distribution of spending between the two provinces for the years prior to 2005. Disaggregation of spending at district level in the Northern and Eastern Provinces remains difficult, partly due to uncertainties over the size of district populations, and so for these provinces estimates are made only at provincial level. On a per capita basis, the highest government spending was in Mannar followed by Mullaitivu (Figure 23).

District-level estimates for private expenditure have been prepared on an experimental basis and are published in this report for the year 2018. Estimates of expenditure at private hospitals and expenditure on pharmaceutical purchases at pharmacies and other retail outlets are presented in Figure 24 and Figure 25.

Expenditure at private hospitals was assigned to the district where the facility is located, assuming that those using the services reside in the same district. Current SLHA district allocation of expenditure at government health facilities and private hospitals is based on this assumption owing to scarcity of data on actual residence of beneficiary. The highest expenditure at private hospitals was in Colombo followed by Gampaha and Kandy. The lowest levels of expenditure were in Mullaitivu, Killinochchi, Mannar, Kegalle, Matale and Nuwara-Eliya districts, which have either no private hospitals or a low number.

District-level estimates of private expenditure on pharmaceutical purchases at pharmacies and other retail outlets are presented in Figure 25. District allocation of expenditure was computed based on the information available at the household level using the HIES conducted by DCS. The highest level of expenditure was in Gampaha and Colombo while the second highest level was in Kalutara. Other than the districts in Northern and Eastern Provinces, Moneragala and Polonnaruwa also showed the lowest level of expenditure on pharmaceutical purchases at pharmacies and other retail outlets in 2018.

Table 18: Public current health expenditure per capita by district (Rs.), 1990, 1995, 2000, 2005, 2010 and 2016–2019

Province	District	Year								
		1990	1995	2000	2005	2010	2016	2017	2018	2019 ^(c)
Western		261	540	958	1,948	3,245	6,759	6,950	7,888	9,306
	Colombo	330	693	1,402	2,941	4,785	10,002	10,295	11,828	14,046
	Gampaha	128	268	547	1,075	1,973	4,308	4,484	5,020	5,895
	Kalutara	154	351	524	1,138	2,125	4,370	4,459	4,977	5,829
Central		209	418	777	1,860	3,724	7,551	8,011	9,083	10,736
	Kandy	222	500	1,079	2,577	5,014	10,084	10,765	12,246	14,475
	Matale	128	226	570	1,345	2,688	5,240	5,430	5,994	7,030
	Nuwara Eliya	100	169	358	861	1,955	4,166	4,364	4,962	5,881
Southern		206	372	713	1,535	2,952	6,560	6,948	7,819	9,214
	Galle	184	362	873	1,891	3,560	7,942	8,319	9,399	11,098
	Matara	138	275	556	1,328	2,446	5,242	5,572	6,273	7,406
	Hambantota	134	212	639	1,171	2,556	5,911	6,399	7,132	8,355
North-East ^(a)		180	274	449	—	—	—	—	—	—
Northern		—	—	—	1,642	3,190	8,587	9,021	10,095	11,940
	Jaffna ^(b)	—	—	—	—	—	8,810	9,322	10,474	12,312
	Mannar ^(b)	—	—	—	—	—	11,722	12,555	14,458	17,767
	Vavuniya ^(b)	—	—	—	—	—	6,719	6,851	7,314	8,544
	Mullaithivu ^(b)	—	—	—	—	—	11,253	11,865	13,539	16,425
	Killinochchi ^(b)	—	—	—	—	—	5,937	6,147	6,922	8,273
Eastern		—	—	—	1,268	3,501	7,906	7,987	8,992	10,540
	Batticaloa ^(b)	—	—	—	—	—	8,549	8,986	10,251	12,117
	Ampara ^(b)	—	—	—	—	—	8,358	8,174	9,171	10,762
	Trincomalee ^(b)	—	—	—	—	—	6,353	6,441	7,169	8,304
North-Western		177	329	677	1,405	2,547	5,558	5,775	6,494	7,642
	Kurunegala	126	256	753	1,562	2,831	6,172	6,363	7,149	8,406
	Puttalam	112	191	519	1,079	1,948	4,238	4,510	5,080	5,986
North-Central		256	477	894	1,122	3,135	7,660	7,964	8,952	10,506
	Anuradhapura	185	352	817	1,026	3,571	7,846	8,119	9,106	10,679
	Polonnaruwa	188	367	1,055	1,324	2,214	7,264	7,631	8,620	10,134
Uva		206	359	671	1,705	3,259	7,396	7,636	8,555	10,081
	Badulla	158	303	693	1,949	3,532	8,209	8,448	9,497	11,224
	Moneragala	145	228	626	1,240	2,760	5,970	6,221	6,927	8,122
Sabaragamuwa		147	302	574	1,296	2,413	5,557	5,853	6,564	7,738
	Rathnapura	126	280	606	1,332	2,485	5,662	6,095	6,829	8,050
	Kegalle	95	180	537	1,258	2,384	5,487	5,607	6,286	7,411

(a) Prior to 2007, the Northern and Eastern Provinces functioned as a single administrative unit: the North-East Provincial Council. Consequently, many administrative data sources only reported expenditure for the two provinces combined, and currently it is not feasible to estimate the distribution of spending between the two provinces for earlier years. The table displays the expenditure as estimated for both provinces combined for years prior to 2005.

(b) District level per capita estimates of the Northern and Eastern Provinces for 2005–2011 are not reliable due to large uncertainties in the statistics for district populations. These limitations mean that it is not possible to provide individual district estimates for the Northern and Eastern Provinces for 2005–2011. District level estimates of Northern and Eastern Provinces in 2012 were computed based on 2012 census data on mid year population.

(c) Provisional.

Notes

1. Population figures used for provincial calculations were derived as follows: Census data for mid year population was used for 1981, 2001 and 2012. Time series from 1981 to 2012 was estimated based on population growth for inter-census years.

2. The total of all the district spending reported in this table does not equate to CHe, as spending on all-island wide personal medical services and national collective services are not included.

3. “—” represents that an estimate is not available for the year.

Source: IHP Sri Lanka Health Accounts Database.

Figure 21: Current public health expenditure per capita by province (Rs.), 2018

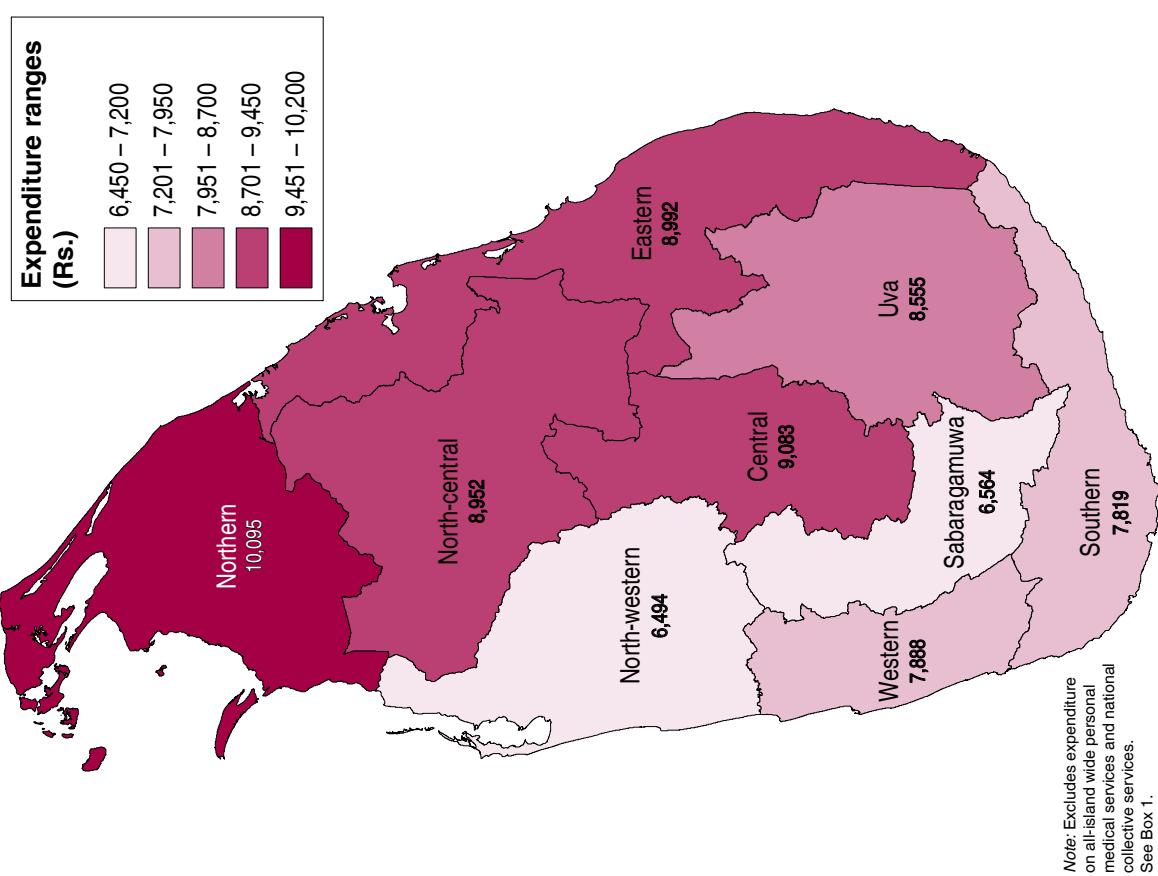


Figure 20: Per capita health expenditure by financing source (Rs.), 2018

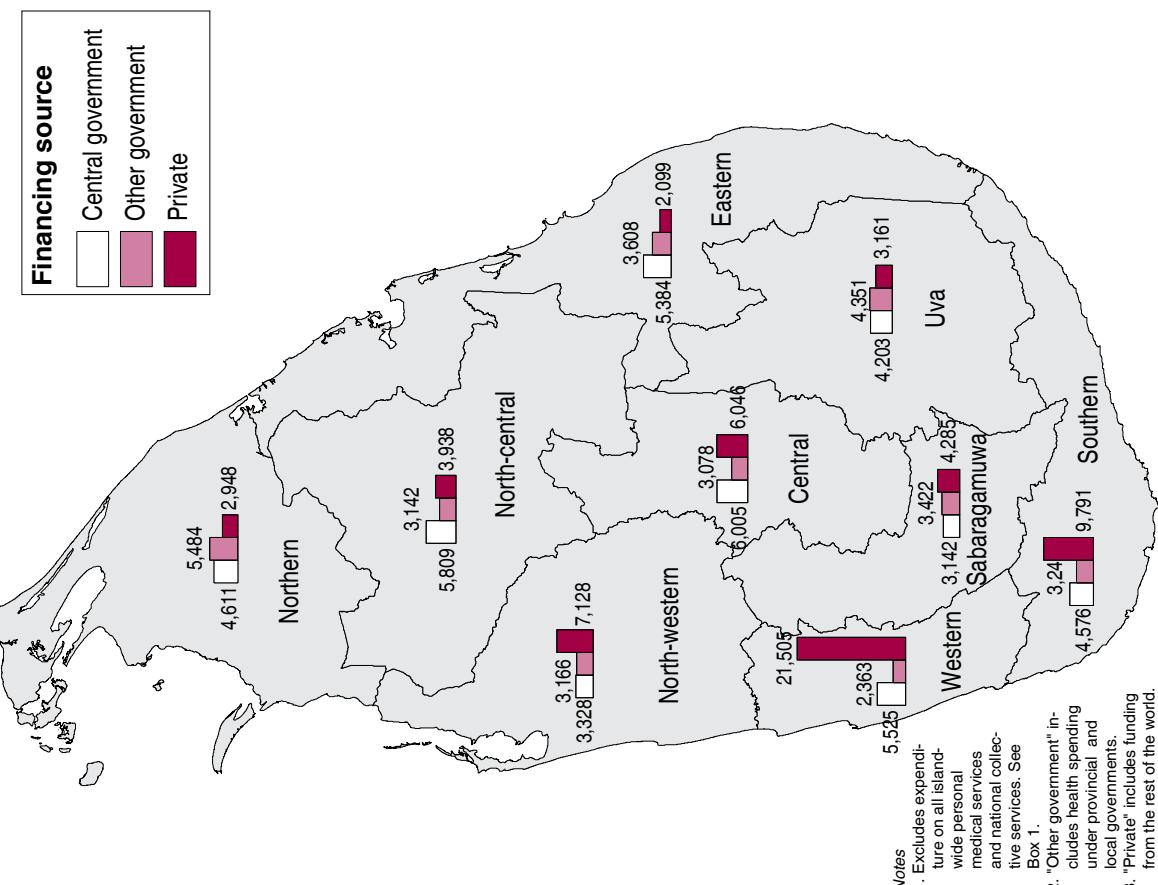


Figure 22: Expenditure at public and private hospitals by location of facility and province (Rs. million), 2018

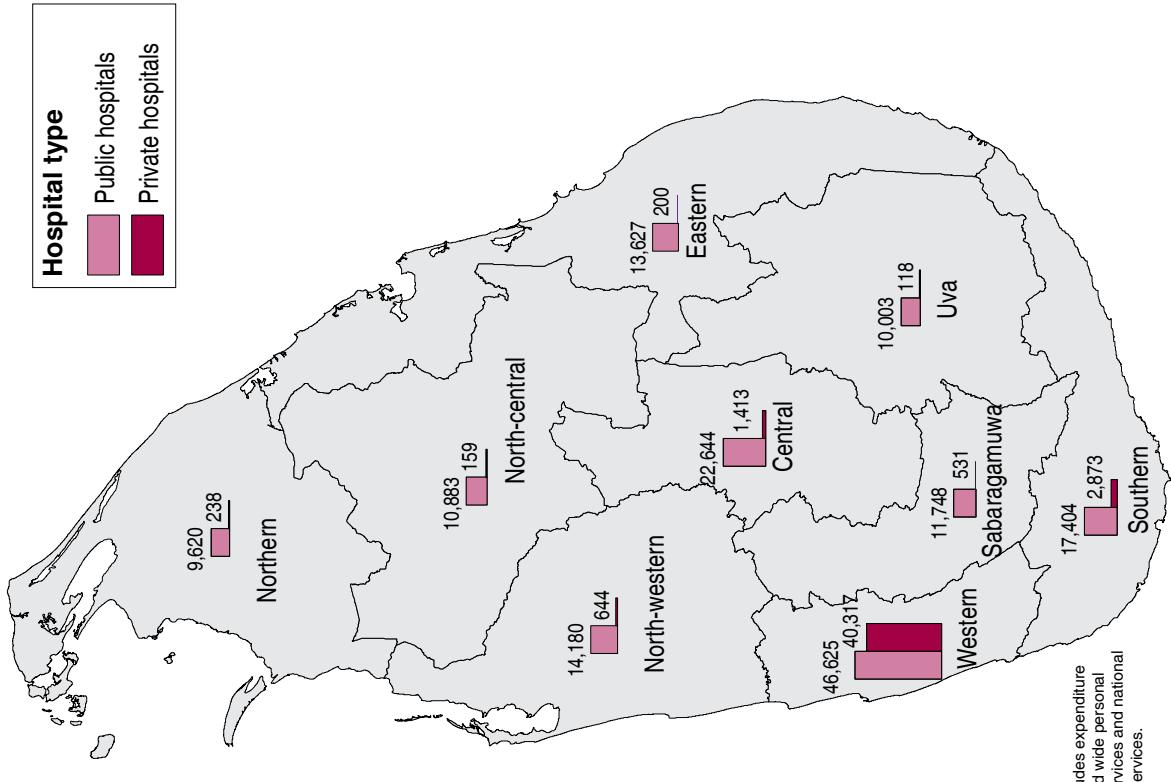


Figure 23: Public health expenditure per capita by district (Rs.), 2018

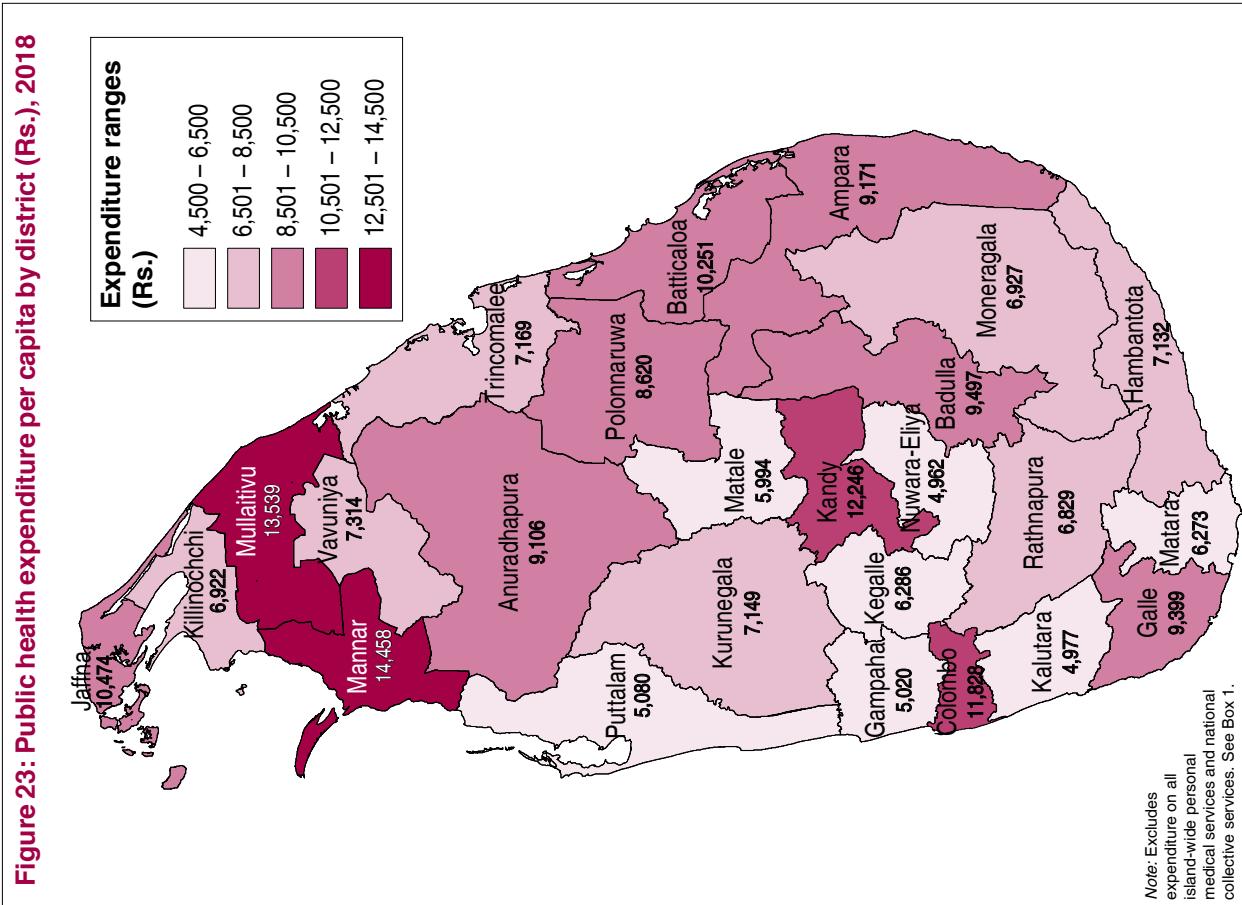
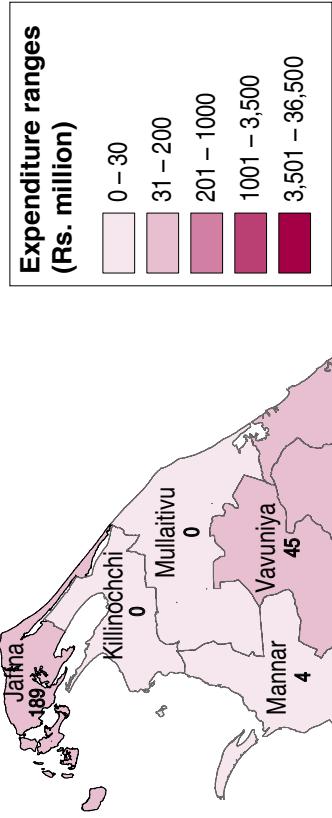
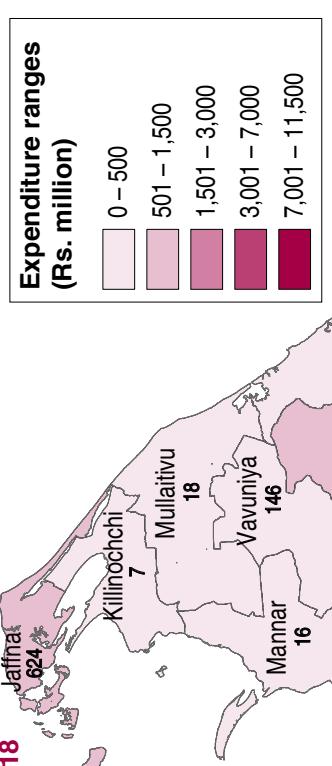


Figure 24: Expenditure at private hospitals by location of facility and district (Rs. million), 2018



Note: Expenditure was assigned to the district in which the facility is located. See Box 1.

Figure 25: Expenditure on pharmaceutical purchases at pharmacies and other retail outlets by location of beneficiary and district (Rs. million), 2018



Note: District allocation of expenditure was computed based on the information available at the household level using the HES conducted by DCS.

7. Revenues of health care financing

7.1 Trends in revenues of financing

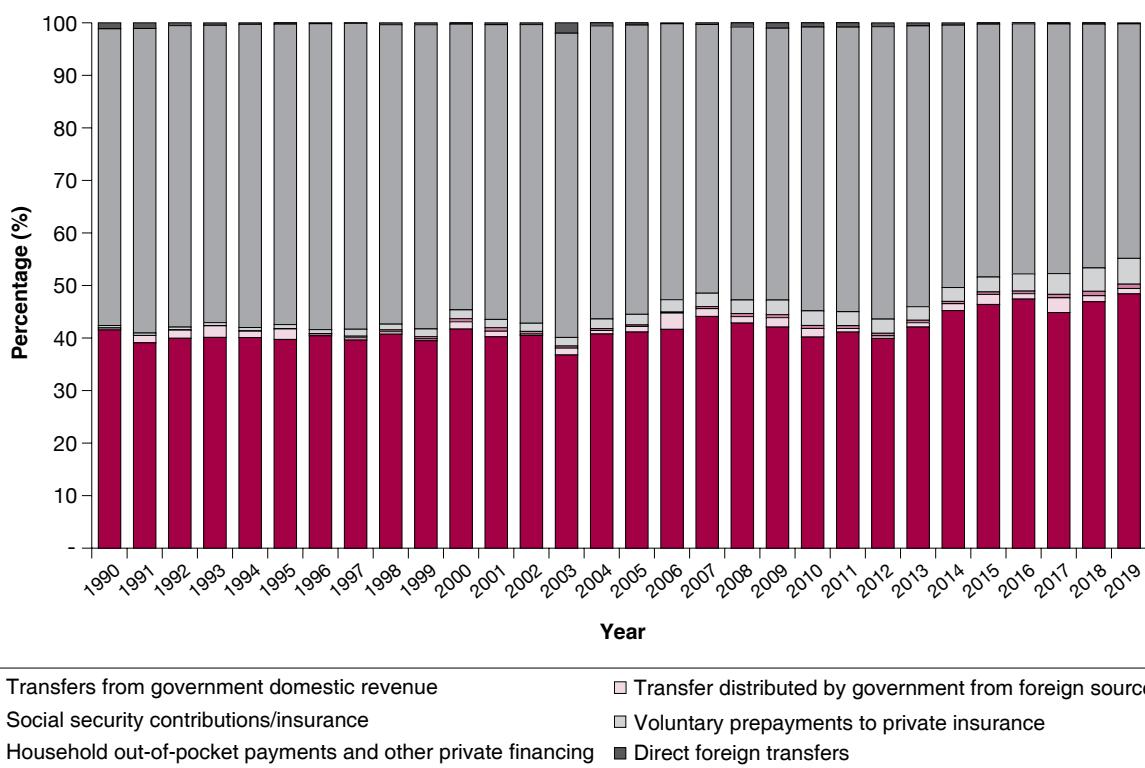
SLHA is extended to show from which sources financing schemes and institutions obtain their funding. These are classified as revenues of financing following the SHA 2011 framework. This presentation shows how much revenue is collected in different ways and through which entities that revenue or financing is channelled.

Transfers from government domestic revenue refers to government health financing that is funded from taxation; this includes taxes and other non-tax revenues of government at all levels, including central, provincial and local. Transfers distributed by government from foreign sources refers to grants provided by foreign entities, such as development partners, that are used by any level of government to finance the health sector. This category of spending does not include loans taken by government for financing health, which ultimately have to be paid back by government using its tax resources. Social security contributions refer to all compulsory payments that provide an entitlement to receive future social benefit. In Sri Lanka these consist of reimbursements of health care payments made through Employees Trust Fund, Suraksha

student insurance scheme for school children, Agrahara insurance, enterprise direct payments and reimbursements for health. Voluntary prepayments to private insurance consist of premiums paid by companies and households to insurance companies to obtain medical insurance coverage. Household out-of-pocket payments and other private financing refer to household, and non-profit sector payments. Direct foreign transfers refers to grants provided by foreign entities, such as development agencies or NGOs, that are provided directly to financing schemes or institutions without passing through government. In Sri Lanka these mainly consist of funding provided by official multilateral or UN agencies and official bilateral agencies from countries such as Japan and Korea.

Transfers from government domestic revenue accounted for 47% of current health expenditure in 2018, predominantly general tax revenue collected by central government. Transfers distributed by government from foreign sources was 1% while direct foreign transfers was less than 1% in 2018 (Table 19). Household out-of-pocket payments and other private financing were 46% and voluntary prepayments for private insurance were 4% of current expenditure on health in 2018.

Figure 26: Current health expenditure by revenues of financing (%), 1990–2019



Note: 2019 estimates are provisional.
Source: Table 19.

Table 19: Current expenditure by revenues of financing schemes, 1990–2019

Year	Transfers from government domestic revenue			Transfers distributed by government from foreign sources			Social security contributions/ insurance ^(a)			Voluntary prepayments to private insurance			Household out-of-pocket payments and other private financing			Direct foreign transfers		
	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)	Amount (Rs. million)	Share (%)
1990	4,158	42	36	0	0	0	0	0	48	0	5,654	56	114	1				
1991	4,510	39	161	1	1	0	53	0	6,688	58	125	1						
1992	5,239	40	203	2	2	0	73	1	7,526	57	72	1						
1993	6,253	40	345	2	1	0	92	1	8,821	57	72	0						
1994	7,137	40	216	1	4	0	120	1	10,274	58	51	0						
1995	8,111	40	408	2	10	0	160	1	11,675	57	52	0						
1996	9,472	40	84	0	8	0	182	1	13,647	58	41	0						
1997	10,520	40	116	0	79	0	351	1	15,467	58	27	0						
1998	12,764	41	147	0	106	0	345	1	17,863	57	114	0						
1999	13,604	39	119	0	150	0	505	1	19,945	58	126	0						
2000	17,126	42	572	1	242	1	691	2	22,335	54	101	0						
2001	18,879	40	498	1	321	1	737	2	26,326	56	169	0						
2002	22,817	40	153	0	287	1	876	2	32,042	57	191	0						
2003	23,265	37	825	1	254	0	1,041	2	36,641	58	1,250	2						
2004	31,262	41	504	1	265	0	1,417	2	42,787	56	452	1						
2005	36,470	41	941	1	250	0	1,801	2	48,809	55	369	0						
2006	44,096	42	3,285	3	205	0	2,486	2	55,608	53	182	0						
2007	52,882	44	1,773	1	462	0	3,054	3	61,330	51	399	0						
2008	59,636	43	1,709	1	824	1	3,591	3	72,349	52	1,097	1						
2009	65,373	42	2,774	2	894	1	4,313	3	80,386	52	1,621	1						
2010	69,746	40	2,850	2	983	1	4,829	3	93,772	54	1,411	1						
2011	81,860	41	1,358	1	1,066	1	5,298	3	107,820	54	1,647	1						
2012	91,148	40	1,119	0	1,087	0	6,171	3	127,064	56	1,678	1						
2013	109,913	42	2,153	1	1,230	0	6,730	3	139,621	53	1,501	1						
2014	130,528	45	3,784	1	1,279	0	7,615	3	144,147	50	1,284	0						
2015	147,773	46	6,090	2	1,502	0	9,047	3	153,315	48	840	0						
2016	165,273	47	3,575	1	1,709	0	11,426	3	165,920	48	731	0						
2017	167,518	45	10,474	3	2,467	1	14,753	4	177,513	48	816	0						
2018	198,548	47	4,807	1	3,554	1	18,820	4	196,405	46	1,084	0						
2019 ^(b)	236,657	48	5,025	1	4,015	1	24,027	5	218,254	45	940	0						

(a) Reimbursements of health care payments financed by Employees Trust Fund, Suraksha student insurance scheme for school children, Agrahara insurance and employers are considered as social security forms.

(b) Provisional.
Source: IHP Sri Lanka Health Accounts Database.

8. International comparisons

8.1 Comparability of Sri Lanka health accounts estimates

The Sri Lanka health accounts framework is designed to be consistent with the OECD SHA standards, and so the SLHA expenditure estimates are directly comparable with other SHA-based estimates of spending in other countries and territories. The Institute for Health Policy is a member of APNAN and, through this network, IHP collaborated with OECD, WHO and other similar agencies in the region to compile comparable data on health spending in regional countries and territories. This section uses this data to compare health spending in Sri Lanka with other economies. In all the tables and figures, Sri Lanka and other economies are arranged in order of increasing per capita GDP so as to further aid comparison.

8.2 Current health expenditure and sources of financing

Current expenditure on health in Sri Lanka at 2.9% of GDP in 2018 is comparable to spending levels in other middle-income economies in the region (Table 20). It is same as in Bangladesh (2.9%) but

lower than Thailand (3.7%) and Malaysia (3.8%). In general, levels of aggregate health spending in economies are closely linked to income levels, with spending per capita increasing with income levels. Figure 27 shows how the relationship between log of per capita health spending and log of per capita GDP is quite consistent and linear between economies at different income levels in Asia. The figure also indicates that spending in Sri Lanka is actually a little less than might be predicted for its income level.

In general, the share of public financing in total financing increases with increasing income (Table 21). The 48% share in Sri Lanka is much higher than in poorer Asian economies such as Bangladesh (21%), but at the same time much less than in more developed economies such as Japan (84%), Thailand (74%) and Australia (65%). However, the sources of public financing differ between economies such as Japan, Korea and Taiwan, relying significantly on social insurance in addition to general government financing (essentially from taxation). It is worth noting that the overall pattern of financing in Sri Lanka, with its predominant reliance on general government financing with no social insurance and a mix of out-of-pocket and employer spending, most resembles that in Malaysia and Hong Kong (Figure 28).

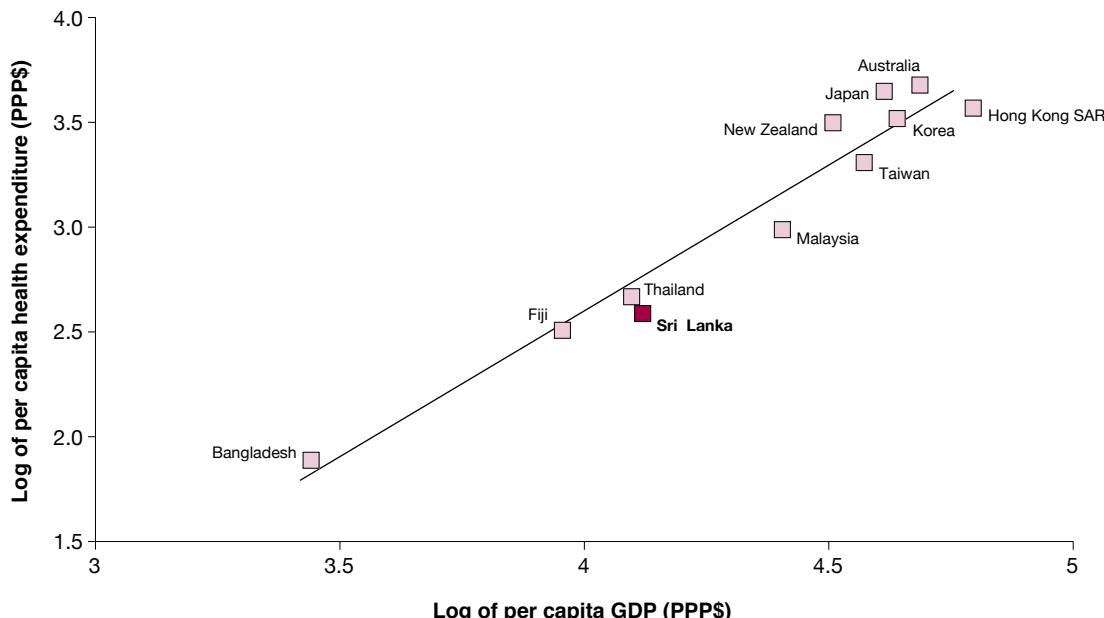
Table 20: General economic indicators and health expenditure for selected countries in the Asia-Pacific region

Territory	Year	GDP per capita (US\$)	GDP per capita (PPP\$)	Current expenditure on health (US\$ million)	Per cap health expenditure (US\$)	Per cap health expenditure (PPP\$)	Current health expenditure (% GDP)
Bangladesh	2012	859	2,764	3,717	24	77	2.9
Sri Lanka	2018	4,081	13,178	2,605	120	388	2.9
Thailand	2010	4,782	12,508	11,794	177	463	3.7
Fiji ^(a)	2015	4,922	9,028	156	174	320	3.5
Malaysia	2014	11,184	25,437	13,003	430	978	3.8
Taiwan	2011	15,786	37,396	25,521	866	2,052	6.2
Korea ^(a)	2018	33,423	43,679	130,160	2,522	3,296	7.5
New Zealand	2011	37,897	32,283	16,400	3,741	3,187	9.9
Japan ^(a)	2017	38,387	41,094	525,443	4,144	4,437	10.8
Hong Kong SAR ^(a)	2019	48,713	62,496	21,698	2,890	3,708	5.9
Australia ^(a)	2017	54,028	48,633	130,514	5,305	4,775	9.7

(a) SHA 2011 estimates.

Note: Data for all subsequent tables in this refer to the year mentioned in the above table for each country.

Source: WHO Global Health Expenditure Database, OECD Health expenditure and Financing data, OECD Korea Policy Centre-APNAN regional health accounts data collection 2012–2015, country NHA reports and World Bank Development Indicators 2021.

Figure 27: Log of per capita health expenditure (PPP\$) vs log of per capita GDP (PPP\$)

Source: Table 20.

Table 21: Current health expenditure by financing agent for selected countries in the Asia-Pacific region (%)

Territory	Current expenditure on health (US\$ million)	HF.1.1	HF.1.2	HF.2.1 + HF.2.2	HF.2.3		
		General government (excl. social insurance)	Social Insurance	Private insurance	Private household out-of-pocket payments	Other	Total
Bangladesh	3,717	21.0	-	0.1	67.6	11.3	100
Sri Lanka	2,605	47.7	0.1	9.0	41.9	1.2	100
Thailand	11,794	66.4	7.9	8.2	14.2	3.2	100
Fiji ^(a)	156	63.1	-	6.6	21.0	9.3	100
Malaysia	13,003	51.9	0.7	7.9	37.7	1.8	100
Taiwan	25,521	5.2	55.0	0.5	39.2	0.1	100
Korea ^(a)	130,160	10.1	48.3	7.9	32.5	1.2	100
New Zealand	16,400	74.9	7.8	4.8	10.9	1.6	100
Japan ^(a)	525,443	8.4	75.8	2.3	12.7	0.9	100
Hong Kong SAR ^(a)	21,698	50.3	-	16.8	31.6	1.2	100
Australia ^(a)	130,514	65.4	-	14.3	17.9	2.4	100

(a) SHA 2011 estimates.

Source: WHO Global Health Expenditure Database, OECD Health expenditure and Financing data, OECD Korea Policy Centre-APNAN regional health accounts data collection 2012–2015, country NHA reports.

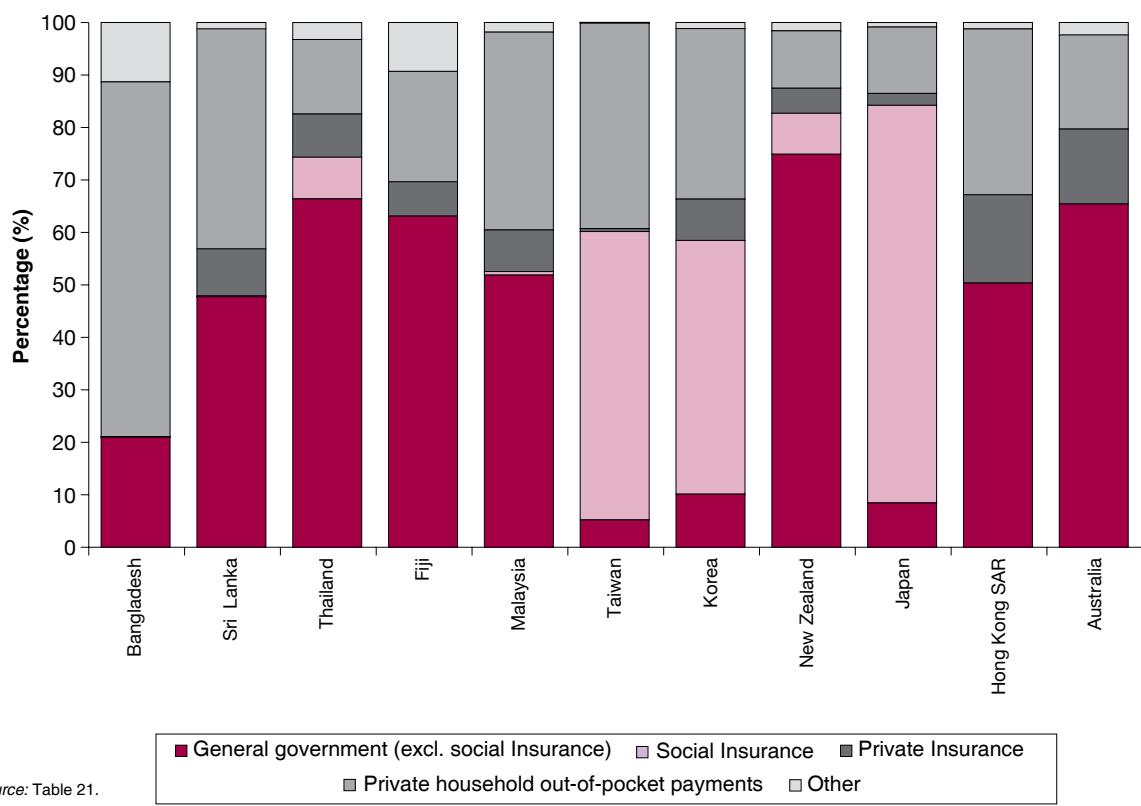
8.3 Composition of spending by function and providers

Figure 29 and Table 22 provide details of the distribution of spending by functions in Sri Lanka compared with other regional economies. The share of spending that is for inpatient care in Sri Lanka is higher than in Bangladesh and Taiwan but otherwise similar to the proportions seen in wealthier economies such as Australia and Hong Kong. The share of spending accounted for by sales of medicines by pharmacies is significantly less than in Bangladesh, but comparable to the levels seen in countries such as Japan and Korea. However it must be noted that in economies such as Hong Kong and Taiwan, a much larger volume of medicines are distributed by dispensing physicians

than is the case in Sri Lanka. In the case of preventive health spending, the share in Sri Lanka of 5% is again somewhere in between the poorer economies such as Bangladesh where it is 14% and more developed economies such as Korea and Australia, where it is around 2–4% of total spending.

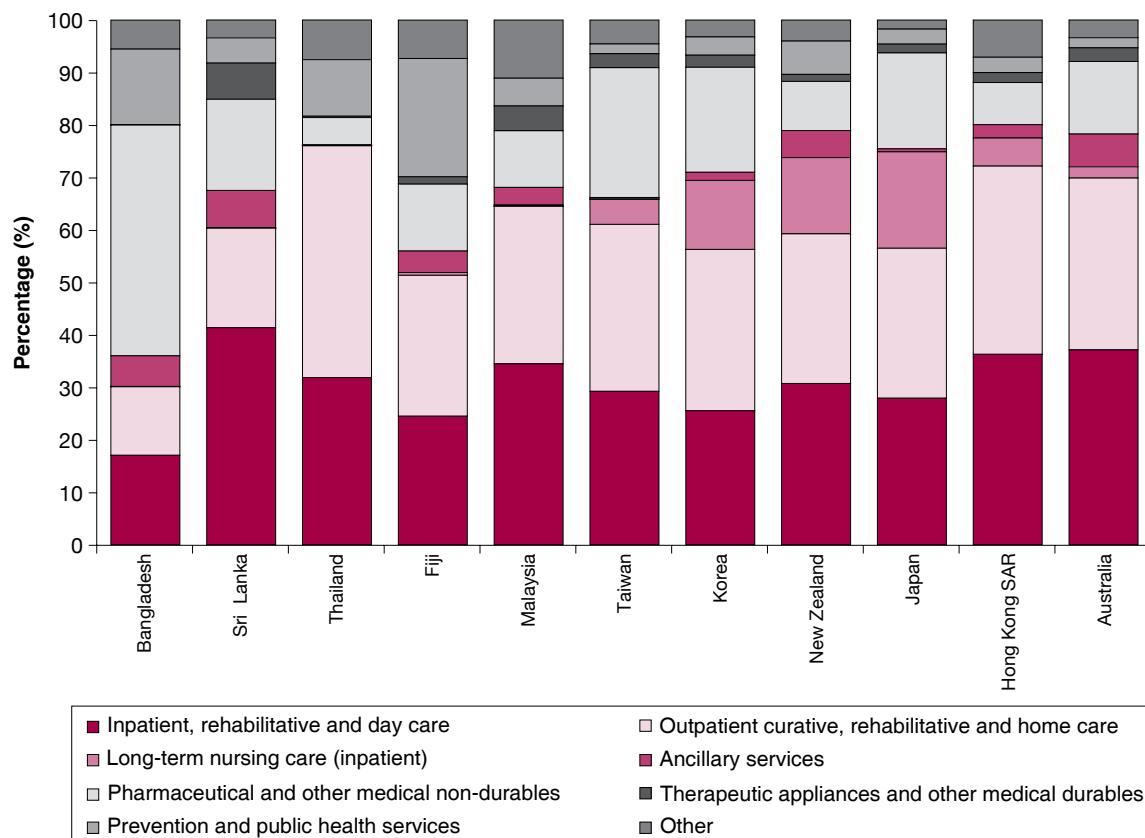
Figure 30 and Table 23 provide details of the distribution of spending by providers in Sri Lanka compared with other regional economies. Again, the spending patterns in Sri Lanka resemble the more developed economies in the region such as Korea, New Zealand and Hong Kong, with comparable proportions of spending taking place in hospitals, outpatient and ambulatory care providers, and retailers of medical goods.

Figure 28: Current health expenditure by financing agent for selected Asia-Pacific countries and territories (%)



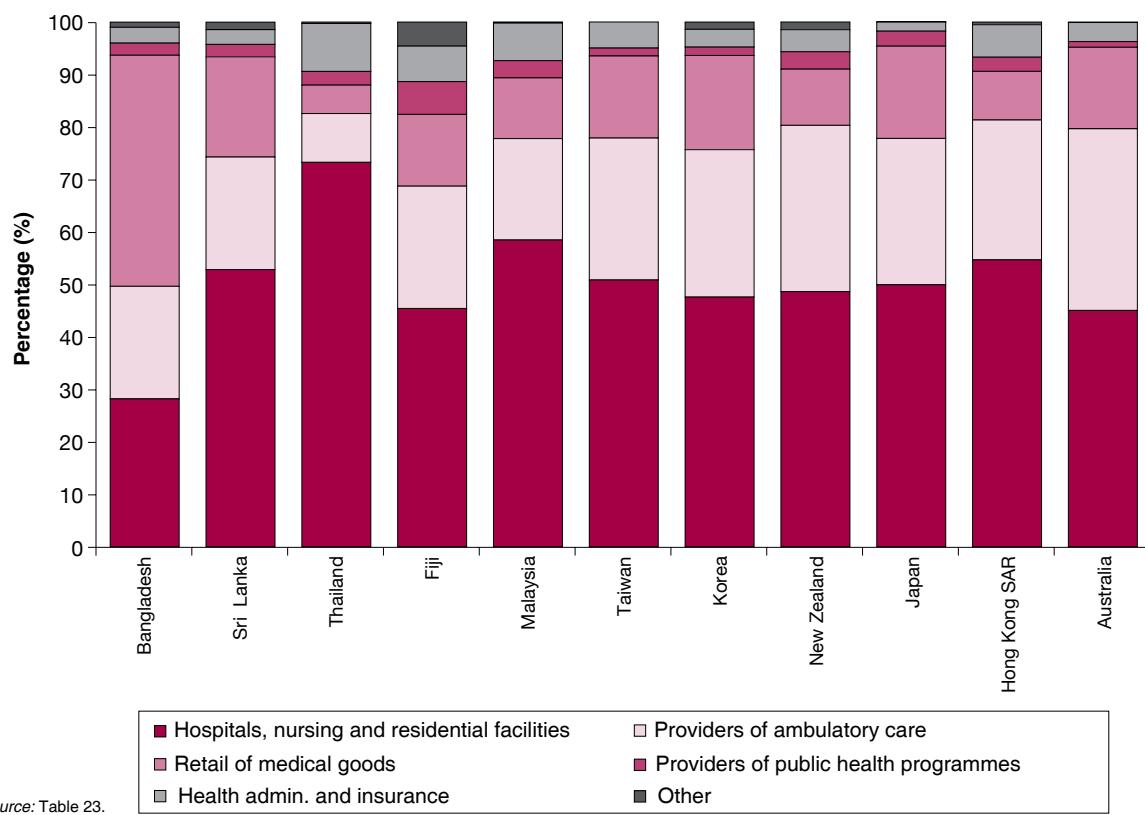
Source: Table 21.

Figure 29: Current health expenditure by function for selected Asia-Pacific countries and territories (%)



Source: Table 22.

Figure 30: Current health expenditure by provider for selected Asia-Pacific countries and territories (%)



Source: Table 23.

Table 22: Current health expenditure by function (mode of production) for selected countries in the Asia-Pacific region (%)

Territory	Current expenditure on health care (US\$ million)	HC.1.1;2.1+HC.1.2;2.2		HC.1.3;2.3+HC.1.4;2.4		HC.3		HC.4		HC.5.1		HC.5.2		HC.6	
		Inpatient, rehabilitative and day care	Outpatient curative, rehabilitative and home care (inpatient)	Long-term nursing care (inpatient)	Ancillary services	Pharmaceutical and other medical non-durables	Therapeutic appliances and other medical durables	Prevention and public health services	Other	HC.5.1	HC.5.2	HC.6	HC.6	HC.6	
Bangladesh	3,717	17.0	13.1	0.1	5.9	44.0	0.1	14.4	5.5	100	100	100	100	100	
Sri Lanka	2,605	41.4	19.0	0.0	7.2	17.4	6.9	4.8	3.4	100	100	100	100	100	
Thailand	11,794	31.9	44.2	0.0	0.1	5.2	0.3	10.8	7.6	100	100	100	100	100	
Fiji ^(a)	156	24.5	26.9	0.5	4.1	12.8	1.4	22.5	7.3	100	100	100	100	100	
Malaysia	13,003	34.5	30.0	0.2	3.4	10.8	4.7	5.3	11.1	100	100	100	100	100	
Taiwan	25,521	29.2	31.8	4.8	0.3	24.8	2.7	1.9	4.6	100	100	100	100	100	
Korea ^(a)	130,160	25.5	30.7	13.2	1.5	20.0	2.3	3.5	3.2	100	100	100	100	100	
New Zealand	16,400	30.7	28.5	14.5	5.2	9.4	1.3	6.4	4.0	100	100	100	100	100	
Japan ^(a)	525,443	27.9	28.6	18.4	0.6	18.3	1.7	2.9	1.7	100	100	100	100	100	
Hong Kong SAR ^(a)	21,698	36.3	35.9	5.4	2.5	8.0	1.9	2.9	7.1	100	100	100	100	100	
Australia ^(a)	130,514	37.1	32.7	2.2	6.2	13.8	2.6	1.9	3.4	100	100	100	100	100	

(a) SHA 2011 estimates.

Source: WHO Global Health Expenditure Database, OECD Health expenditure and Financing data, OECD Korea Policy Centre-APNHN regional health accounts data collection 2012–2015, country NHA reports.

Table 23: Current health expenditure by provider for selected countries in the Asia-Pacific region (%)

Territory	Current expenditure on health care (US\$ million)	HP.1+HP.2		HP.3		HP.4		HP.5		HP.6		HP.7+HP.9	
		Hospitals, nursing and residential facilities	Providers of ambulatory care	Retail of medical goods	Providers of public health programmes	Health admin. and insurance	Other	Total	HP.6	HP.7+HP.9	Total	HP.6	HP.7+HP.9
Bangladesh	3,717	28.2	21.5	44.0	2.3	3.0	1.0	100	100	100	100	100	100
Sri Lanka	2,605	52.8	21.5	19.1	2.4	2.8	1.4	100	100	100	100	100	100
Thailand	11,794	73.3	9.3	5.4	2.6	9.1	0.3	100	100	100	100	100	100
Fiji ^(a)	156	45.4	23.3	13.7	6.3	6.8	4.6	100	100	100	100	100	100
Malaysia	13,003	58.5	19.3	11.6	3.3	7.2	0.2	100	100	100	100	100	100
Taiwan	25,521	50.8	27.1	15.6	1.5	5.0	-	100	100	100	100	100	100
Korea ^(a)	130,160	47.6	28.1	18.0	1.6	3.4	1.4	100	100	100	100	100	100
New Zealand	16,400	48.6	31.7	10.7	3.3	4.2	1.5	100	100	100	100	100	100
Japan ^(a)	525,443	49.9	27.9	17.6	2.9	1.7	0.0	100	100	100	100	100	100
Hong Kong SAR ^(a)	21,698	54.7	26.7	9.3	2.7	6.2	0.5	100	100	100	100	100	100
Australia ^(a)	130,514	45.0	34.6	15.5	1.1	3.6	0.1	100	100	100	100	100	100

(a) SHA 2011 estimates.

Source: WHO Global Health Expenditure Database, OECD Health expenditure and Financing data, OECD Korea Policy Centre-APNHN regional health accounts data collection 2012–2015, country NHA reports.

9. Primary care spending

9.1 Trends in primary care spending

Strengthening primary care is a key national priority in the health sector, and so tracking spending on primary care is of interest to many. However, there is no universally agreed definition of what constitutes primary care, or how to define spending on it. Although there is international consensus about certain characteristics of primary care, such as it being the first point of contact of patients, being accessible, coordinated and comprehensive, no consensus exists about what activities constitute primary care, or how to distinguish primary care providers from secondary care and other non-primary care providers.

During 2016–2018, the OECD undertook an international consultation process, which IHP also provided input into, to come to some consensus about possible ways to define and measure primary care spending. This process led OECD to propose three proxy measures for primary care spending based on the SHA 2011 framework (Mueller and Morgan 2018):

- (i) **Basic services**—This includes all expenditure on outpatient-based care by all healthcare providers, defined as spending within the functions general outpatient curative care (HC.1.3.1), outpatient dental care (HC.1.3.2), home-based curative care (HC.1.4) and the preventive services HC.6.1 to HC.6.4.
- (ii) **Basic services and pharmaceuticals**—This combines expenditure on “basic services” with expenditure for prescribed pharmaceuticals (HC.5.1.1) and over-the-counter medicines (HC.5.1.2) at all health care providers.
- (iii) **Basic services provided by providers of ambulatory care**—This is similar to the definition for spending on “basic services”, but restricts the scope only to spending ambulatory health care providers (HP.3).

The OECD reported that in a survey of OECD nations basic services was almost exclusively provided by ambulatory providers, but this survey did not cover all countries, such as Japan. Nevertheless, based on this finding, OECD proposed that the last proxy measure be the preferred measure for primary care spending.

However, for Sri Lanka, where a significant part of first contact, routine care is provided by hospital based clinics, including divisional hospitals and primary care units with beds, the OECD preferred primary care spending measure will substantially under-estimate primary care spending. Further, because in the private sector, primary care doctors frequently prescribe medicines, which patients must purchase from retail pharmacies, actual primary care spending could be considered as including some part of spending at pharmacies.

Given these complications, we report here primary care spending using all three OECD proxy measures, plus a fourth more expansive definition proposed by the WHO (WHO 2019). This fourth WHO definition is similar to the OECD’s second measure (basic services + pharmaceuticals), but it also includes home-based curative care (HC.1.4), outpatient long-term care (HC.3.3), home-based long-term care (HC.3.4), preventive care (all HC.6.), and 80% of health system administration and governance (HC.7) expenditures, whilst excluding 20% of medical goods expenditure (HC.5).

Figure 31 presents trends in primary care spending as a share of current health expenditure in Sri Lanka measured using the four different OECD and WHO definitions. Expenditure on basic services and pharmaceuticals has declined from 50% in 1990 to 37% by 2019. Similar trends can be seen for the other aggregates, with expenditure according to the WHO definition falling from 60% to 43% during 1990–2019 (Figure 31 and Table 24).

9.2 International comparison of primary care spending

Basic care spending was 21% of CHE in Sri Lanka in 2018, compared with the OECD average 17% in 2016 (Figure 32). Spending on basic care by ambulatory care providers, OECD’s preferred primary care measure, was 9% of CHE in Sri Lanka compared to the OECD average of 14%, but as we note this probably substantially under-estimates primary care spending in Sri Lanka’s health system. Spending on basic care and pharmaceuticals dispensed to outpatients was 37% of CHE in Sri Lanka in 2018, compared to the OECD average of 33% in 2016 (Figure 32).

Comparison of primary care spending as defined by WHO is presented in Figure 33. Estimated spending was 43% of CHE for Sri Lanka in 2018, less

than the overall country average of 54% reported by WHO, the ratio was much higher in many other developing countries.

Figure 31: Different measures of primary care spending as a share of current health expenditure (%), 1990–2019

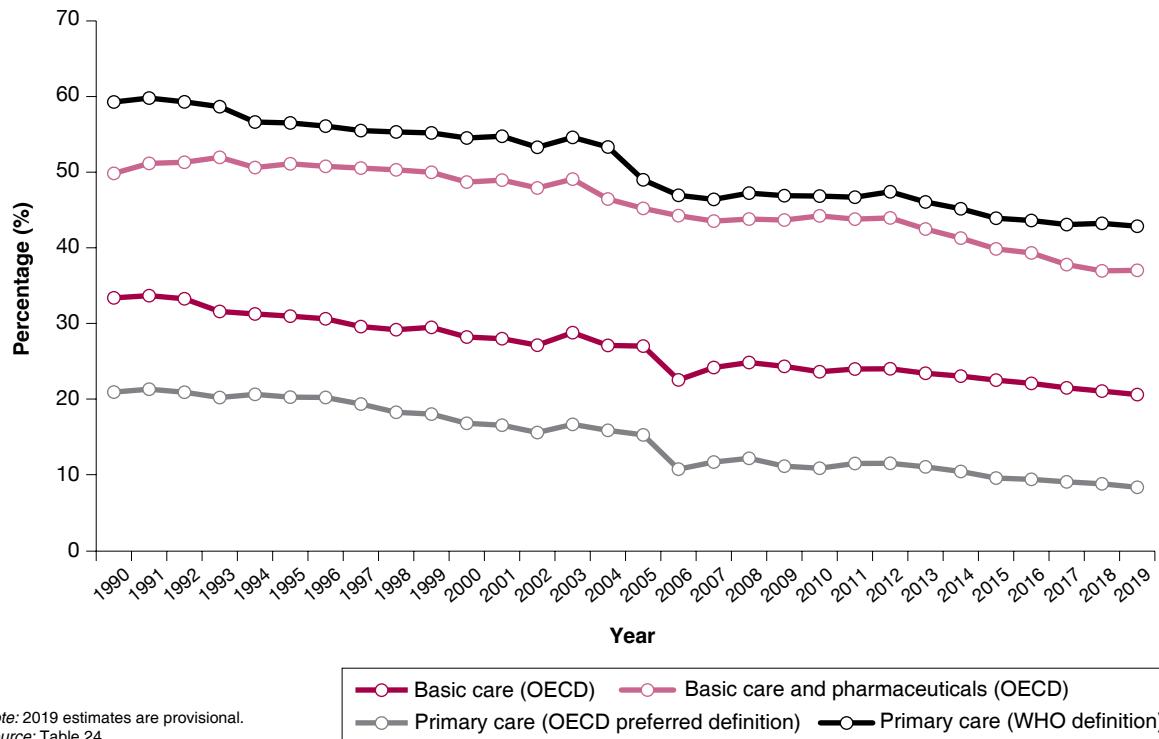
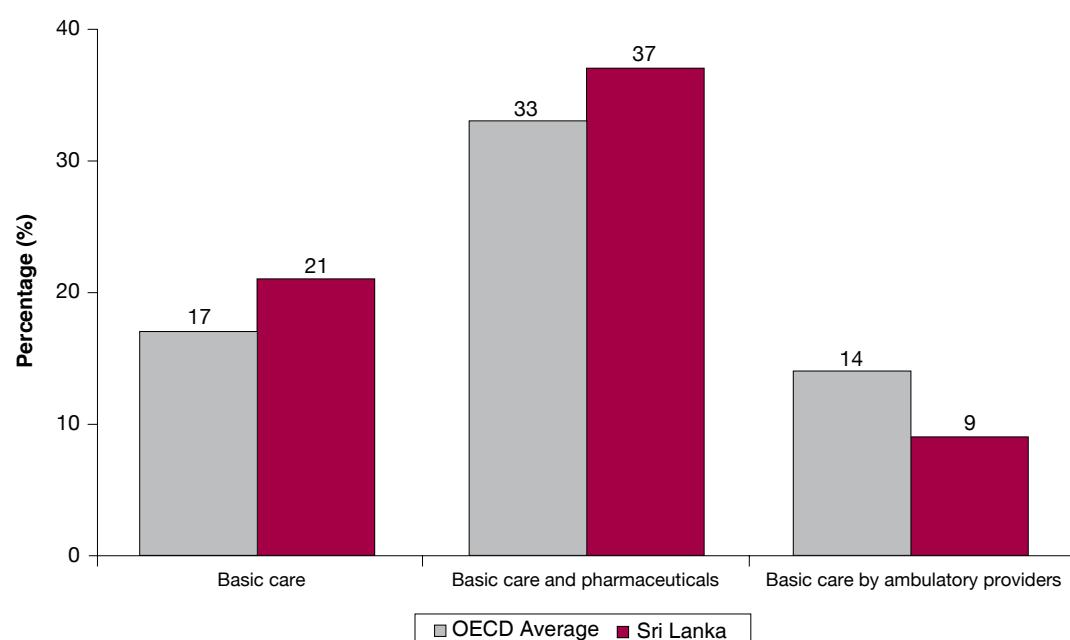


Figure 32: Primary care spending as defined by OECD for Sri Lanka and OECD countries as a share of current health expenditure (%), latest available year

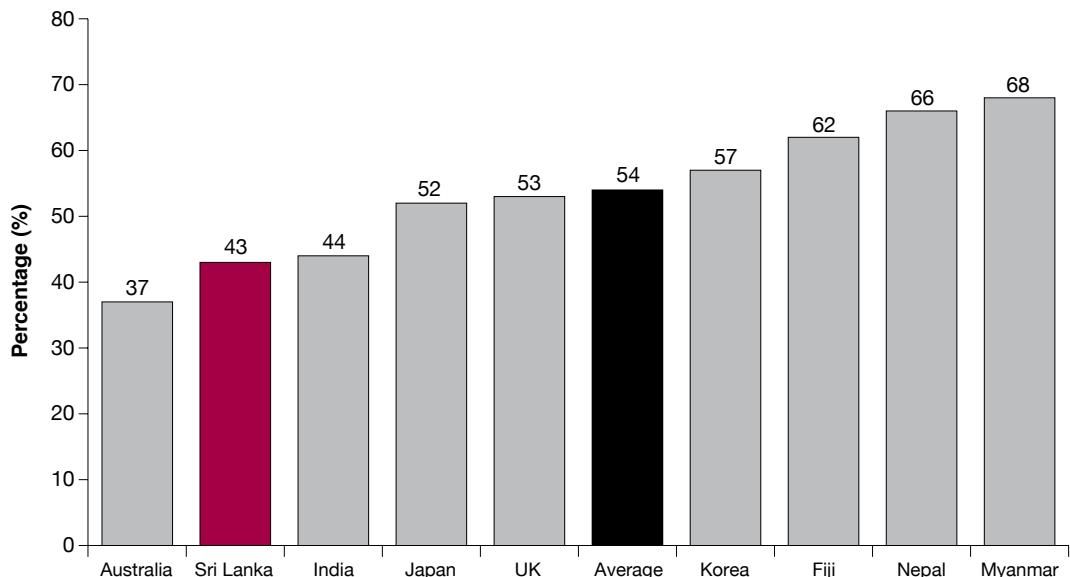


9.3 Primary care spending by source of financing

Public share of basic care spending was 48% in 2018 and basic care by ambulatory care providers, OECD's preferred primary care measure, funded by public financing was 20% in 2018 (Figure 34). Basic care by ambulatory care providers does not capture 80–90% of outpatient

visits in the government sector which are happening at outpatient care departments at public hospitals. Public share of basic services and pharmaceuticals was 38% in 2018. Public share primary care spending as defined by WHO was 36% in 2018. Share of public spending of primary care measured using the four different OECD and WHO definitions have increased modestly over time during 1990–2019 (Figure 34 and Table 25).

Figure 33: Primary care spending as defined by WHO for Sri Lanka and selected countries as a share of current health expenditure (%), latest available year



Source: WHO Global Health Expenditure Database and IHP Sri Lanka Health Accounts Database.

Figure 34: Share of primary care spending financed by public sources (%), 1990–2019

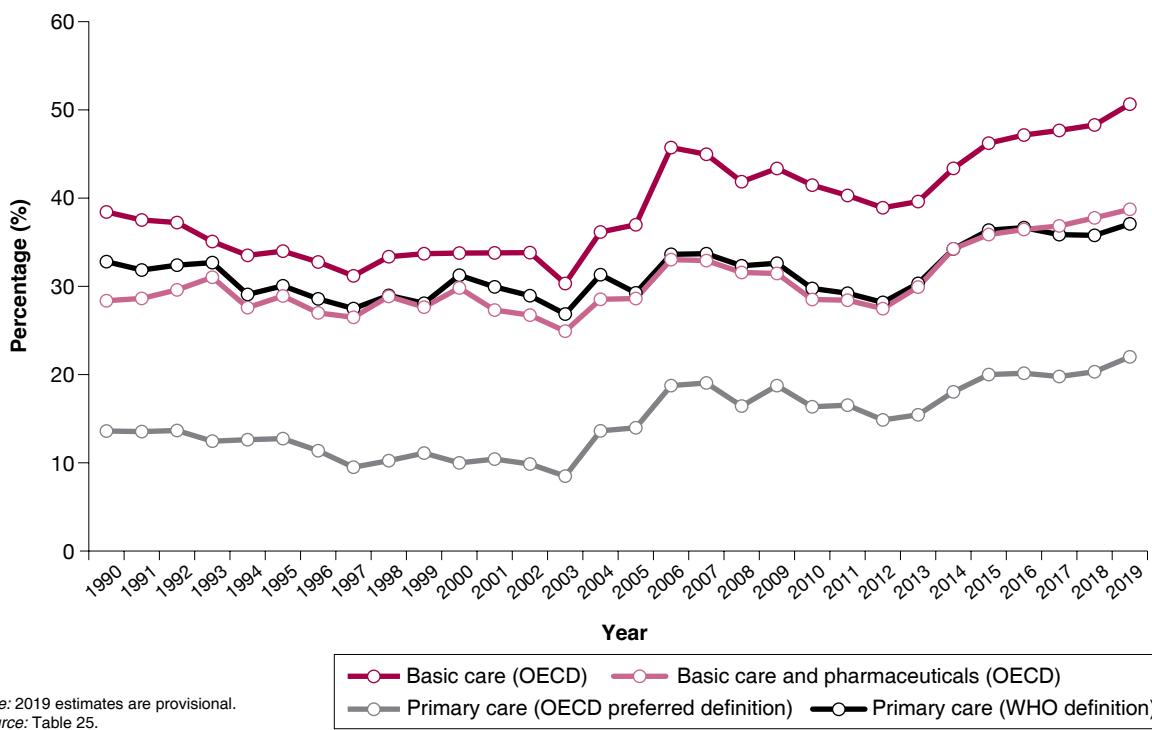


Table 24: Primary care expenditure, 1990–2019

Year	Basic care (OECD)	Primary care expenditure (Rs. million)			Share of current health expenditure (%)		
		Basic care and pharmaceuticals (OECD)	Primary care (OECD preferred definition)	Primary care (WHO definition)	Basic care (OECD)	Basic care and pharmaceuticals (OECD)	Primary care (OECD preferred definition)
1990	3,342	4,989	2,095	5,934	33	50	21
1991	3,886	5,903	2,458	6,900	34	51	60
1992	4,362	6,729	2,740	7,777	33	51	59
1993	4,921	8,098	3,149	9,141	32	52	59
1994	5,564	9,009	3,670	10,080	31	51	57
1995	6,321	10,435	4,133	11,537	31	51	57
1996	7,173	11,898	4,737	13,145	31	51	56
1997	7,856	13,422	5,137	14,741	30	51	56
1998	9,142	15,766	5,721	17,338	29	50	55
1999	10,156	17,217	6,205	19,013	29	50	55
2000	11,580	19,994	6,895	22,390	28	49	55
2001	13,132	22,970	7,763	25,692	28	49	55
2002	15,285	27,006	8,775	30,040	27	48	53
2003	18,208	31,057	10,533	34,549	29	49	55
2004	20,778	35,622	12,164	40,898	27	46	53
2005	23,936	40,076	13,523	43,427	27	45	49
2006	23,853	46,846	11,358	49,695	23	44	47
2007	28,978	52,192	13,990	55,632	24	44	46
2008	34,567	60,970	16,929	65,747	25	44	47
2009	37,791	67,847	17,270	72,846	24	44	47
2010	40,976	76,770	18,833	81,316	24	44	47
2011	47,709	87,169	22,848	92,930	24	44	47
2012	54,785	100,332	26,261	108,227	24	44	47
2013	61,146	110,934	28,792	120,291	23	42	46
2014	66,458	119,155	30,087	130,337	23	41	45
2015	71,683	126,939	30,437	139,871	23	40	44
2016	76,955	137,066	32,701	152,056	22	39	44
2017	80,246	141,124	33,819	160,870	21	38	43
2018	89,084	156,379	37,212	182,959	21	37	43
2019 ^(a)	100,654	180,980	40,724	209,490	21	37	43

(a) Provisional
Source: IHP Sri Lanka Health Accounts Database.

Table 25: Primary care spending financed by public sources, 1990–2019

Year	Basic care (OECD)		Basic care and pharmaceuticals (OECD)		Primary care (OECD preferred definition)		Primary care (WHO definition)	
	Amount (Rs. million)	Public share (%)	Amount (Rs. million)	Public share (%)	Amount (Rs. million)	Public share (%)	Amount (Rs. million)	Public share (%)
1990	1,284	38	1,415	28	285	14	1,947	33
1991	1,458	38	1,690	29	333	14	2,198	32
1992	1,624	37	1,992	30	374	14	2,520	32
1993	1,726	35	2,513	31	392	12	2,988	33
1994	1,864	34	2,486	28	463	13	2,932	29
1995	2,149	34	3,017	29	527	13	3,468	30
1996	2,350	33	3,212	27	539	11	3,757	29
1997	2,451	31	3,556	26	488	10	4,050	27
1998	3,050	33	4,550	29	586	10	5,022	29
1999	3,422	34	4,760	28	689	11	5,338	28
2000	3,911	34	5,961	30	689	10	7,000	31
2001	4,438	34	6,273	27	809	10	7,691	30
2002	5,169	34	7,222	27	865	10	8,694	29
2003	5,521	30	7,740	25	894	8	9,280	27
2004	7,514	36	10,162	29	1,657	14	12,809	31
2005	8,851	37	11,470	29	1,889	14	12,707	29
2006	10,907	46	15,472	33	2,130	19	16,715	34
2007	13,031	45	17,181	33	2,666	19	18,745	34
2008	14,468	42	19,251	32	2,781	16	21,255	32
2009	16,385	43	21,344	31	3,238	19	23,762	33
2010	16,992	41	21,888	29	3,079	16	24,204	30
2011	19,226	40	24,783	28	3,776	17	27,153	29
2012	21,319	39	27,557	27	3,902	15	30,494	28
2013	24,221	40	33,192	30	4,445	15	36,490	30
2014	28,821	43	40,806	34	5,427	18	44,631	34
2015	33,138	46	45,538	36	6,088	20	50,866	36
2016	36,288	47	49,951	36	6,588	20	55,726	37
2017	38,249	48	52,008	37	6,689	20	57,680	36
2018	43,017	48	59,054	38	7,562	20	65,456	36
2019 ^(a)	50,982	51	70,088	39	8,965	22	77,676	37

(a) Provisional.

Source: IHP Sri Lanka Health Accounts Database.

10. Technical notes

10.1 General

The Institute for Health Policy reports health expenditure domestically using the Sri Lanka Health Accounts (SLHA) framework. The first version of this framework was originally developed during 1998–99 for the Ministry of Health by a team led by Rannan-Eliya and Somanathan, and it was designed to be compliant with pre-publication versions of the OECD SHA. The SHA was later published in 2000, and since then the health accounts team at IHP has continuously revised and updated the framework to ensure compliance with the SHA standards, which is the approach endorsed by WHO for international reporting of health expenditure statistics. A revision of the SHA standard was released in 2011, and IHP started releasing estimates consistent with the new SHA 2011 format since 2015.

The SLHA framework, in line with the SHA approach, classifies all health spending according to three dimensions: sources of financing, providers and functions. In addition, the most recent version of the SLHA framework also classifies expenditure geographically, both by province and by district. For the three core dimensions, SLHA categorizes all spending according to classification systems which are based on the relevant SHA classifications, but with appropriate modification and revisions to ensure relevance and applicability to the country's health system. When revisions to the SLHA framework are made, IHP always revises earlier estimates to be compliant with the revised framework to ensure consistency in reporting of expenditure for different years.

A key design element of the SLHA framework and its classifications is that they correspond in a defined way to the parallel elements of the SHA framework. This means that IHP is able to report health expenditure in Sri Lanka simultaneously using both the national SLHA framework and also according to the OECD SHA frameworks. In the main part of this report, expenditure has been reported according to the SLHA framework and classifications. However, to aid international comparison, the statistics used in Section 8 for Sri Lanka are based on the SHA definitions so as to ensure overall comparability. The Appendix of this report provides a full set of tables showing health expenditure in Sri Lanka using both SHA formats (SHA 1.0 and SHA 2011) for selected years between 1990 and 2019.

10.2 Definitions

Current health expenditure (CHE)

The term 'health expenditure' refers to expenditure on health goods and services and health-related investment. Health goods and services expenditure includes expenditure on health services (medical treatments and diagnosis), health goods (medications, aids and appliances), and other health services such as expenditure on public health, research and administration. This expenditure is collectively termed 'current expenditure'. Health-related investment is also referred to as 'capital formation' or 'capital expenditure'. The SLHA definition of health expenditure is fully consistent and comparable with that in the OECD SHA standards.

CHE, as reported in the SLHA estimates, is equivalent to CHE as defined by the SHA 2011, and is only a subset of all health and health-related expenditure. Current health expenditure includes only direct health expenditure, and excludes health-related expenditure such as research and training.

Current health expenditure for Sri Lanka as currently estimated and reported in the SLHA estimates is slightly underestimated, as certain categories of spending are not currently measured in full. These principally consist of expenditure by non-profit institutions, for which there are no comprehensive data sources and so are partially estimated, and expenditure by households on long-term care, which are not estimated at all. This expenditure, which is not included, may represent 1–2% of total spending.

The SLHA framework requires that health expenditure be measured on an accrual basis, consistent with the recommendations of the SHA. However, in practice data limitations mean that several major elements of spending are in fact measured and reported on a cash base. These include all government health expenditure and some parts of household out-of-pocket expenditure.

Financing sources

Institutions that pool health resources collected from different sources, as well as entities (such as households and firms) that pay directly for health

care using these resources are called financing sources. They are classified in the SLHA into public and private financing sources, and those which are outside the country. The major financing source categories are:

- Government, comprising central government, Provincial Councils, local governments and social security institutions such as the Employees Trust Fund (ETF)
- Employers, who directly finance or reimburse healthcare services for their employees
- Insurance schemes that pay for healthcare
- Households that pay directly out-of-pocket for healthcare goods and services
- Non-profit institutions (both domestic and foreign)
- Providers who use their own resources to finance healthcare activities.

Functions

Functions are the purposes for which healthcare expenditure are used. The SLHA classifies expenditure according to function, distinguishing between direct health expenditure and health-related expenditure. Health-related expenditure includes capital expenditure, as well as expenditure on training, environmental health and research. Only direct health expenditure included in the definition of CHE.

The major functional categories of direct health expenditure consist of:

- Inpatient and day care
- Outpatient curative
- Services of rehabilitative and long-term nursing care
- Ancillary services to health care, comprising laboratory and other diagnostic services and patient transport
- Medical goods dispensed to outpatients, comprising medicines and other medical goods and supplies
- Prevention and public health services, which are services intended to improve or promote the health of the population or groups within the population, including maternal and child health programmes, immunization programmes and health education activities
- Health administration and health insurance administration

Providers

Providers are the entities that engage in the production and delivery of healthcare goods, services and activities.

The major provider categories used in the SLHA framework consist of:

- Hospitals, which are institutions that treat inpatients
- Nursing and residential care facilities
- Providers of ambulatory care, comprising facilities of physicians, dentists and other health professionals which deliver care only on an outpatient basis
- Retail sale and other providers of medical goods, comprising retail pharmacies, shops and other providers who distribute medicines and other medical goods and supplies
- Provision and administration of public health programmes, comprising agencies involved in delivering public health functions and activities
- General health administration and insurance, comprising agencies responsible for health administration, and administration of health insurance schemes.

Revenues of financing

Revenues of financing are the sources from which financing schemes and institutions obtain their funding. The major categories are:

- Transfers from government domestic revenue
- Transfers distributed by government from foreign sources
- Social security contributions/insurance, including reimbursements of health care payments made through Employees Trust Fund, Suraksha student insurance scheme for school children, Agrahara insurance, enterprise direct payments and reimbursements for health
- Voluntary prepayments to private insurance
- Household out-of-pocket payments and non-profit sector payments
- Direct foreign transfers

10.3 Data sources

General

IHP continuously collects information from a wide range of government and private sources in order to compile the SLHA estimates. IHP also conducts regular surveys of the health sector in order to augment these data sources. The information collected is then analysed in assisting the development of the final estimates that are published. A variety of estimation techniques are used to do this, with different methods being used to estimate different elements of spending.

"Guidelines for Improving the Comparability and Availability of Private Health Expenditure Under the System of Health Accounts Framework" (Rannan-Eliya and Lorenzoni 2010). These guidelines were in fact based on work carried out in Sri Lanka and have been adopted by OECD statisticians. A variety of data sources are used to estimate private spending, with different sources being used for specific elements. Major data sources include national surveys of household expenditure by the Department of Census and Statistics and by the Central Bank, surveys of private hospitals and other providers conducted on a regular basis by IHP, and data obtained from various industries.

Central government

Overall spending by central government ministries and departments is based on the audited actual accounts of the Government of Sri Lanka as reported by the government's Computer Integrated Government Accounting System (CIGAS). Data on expenditure by other central agencies, including the armed forces, Police, ETF and the President's Fund are obtained directly by contact with the relevant authority.

Provincial and local governments

In the past, the spending of Provincial Councils was estimated from the Financial Statements of each Provincial Council and other data provided by the Finance Commission. These provided information on actual expenditure with a two-year delay. Now, with the adoption by the provincial councils of CIGAS-type electronic accounts systems, IHP can make use of electronic accounts data. This has made it possible to reduce the previous time lag of 2–3 years in reporting Provincial Council expenditure to 1–2 years. Expenditure by local governments is based on data collected by IHP in an annual survey of local government health expenditure. The methodology and design of this survey was substantially revised during 2009–10.

Private sector spending

Private expenditure is estimated using the best practice methods recommended by OECD, in its

10.4 Methods used

Government spending

Data on aggregate government spending is obtained from CIGAS. These differentiate expenditure by different departments and ministry programs. However, for the detailed analysis of expenditure by institutions and functions, a variety of other data sources and methods are necessary. These include:

- The detailed allocation of spending on activities of central programmes is based on additional data and information provided by the directors and staff of each programme, for example, the Family Health Bureau.
- The allocation of hospital expenditure by type of hospital and by function is principally based on analysis of data from cost surveys of government hospitals, which were conducted in 1991, 1997 and 2006. The most recent of these was the IHP-MOH Public Health Facility Survey 2006, which collected detailed data on costs and activities in a representative sample of over 70 government health institutions.
- The allocation of expenditure on medicines and supplies to different institutions and regions, and functions within hospitals, is based partly on data collected in hospitals by the IHP-MOH Public Health Facility Survey 2006, and partly on data provided by the Medical Supplies Division of MOH.

Fees paid to government healthcare institutions

Collections of official fees paid to government hospitals and facilities are reported in the CIGAS accounts and Provincial Council financial statements. In addition, the revenues of autonomous board-run hospitals are obtained from their annual reports.

Private hospital spending

The estimates of private hospital spending are based on data obtained in regular surveys of private hospital institutions conducted by IHP, supplemented with information extracted from the published financial accounts of a number of hospitals.

Sales of medicines from pharmacies

Expenditure on the distribution of medicines by retail outlets, primarily pharmacies, is based on data reported in the Sri Lanka Pharmaceutical Audit (SLPA) conducted by IQVIA formerly IMS-Health Sri Lanka. Adjustments are made to these data to account for gaps in the survey coverage of SLPA.

Private dental practitioners

Estimates of spending at private dental practitioners are based on the national accounts estimates of the Department of Census and Statistics and the National Oral Health Surveys. These are considered to be underestimates, but data are currently lacking to improve the numbers.

Employer medical benefits

This expenditure is estimated using data from occasional sample surveys of large employers in the

country. The survey data used distinguishes between employer direct financing of medical benefits for their employees and payments to insurance companies to provide medical insurance. The latter is deducted in order to arrive at the final estimates. The methodology and design of this survey was substantially revised in 2013.

Private health insurance expenditure

This expenditure is based on regular IHP surveys conducted on the activities of commercial health insurance schemes. These provide data on aggregate expenditure, as well as their allocation to different types of healthcare goods and services.

Private practitioners and other miscellaneous items of household expenditure

Payments to private practitioners are estimated from a variety of data sources. These include occasional surveys of private doctors, including the Sri Lanka Private Clinic Survey 2000, and household surveys of out-of-pocket expenditure, including the Central Bank Consumer Finance Surveys 1996/97 and 2003/2004, and the Department of Census and Statistics Household Income and Expenditure Surveys. Various adjustments are made to these data in order to derive estimates that are consistent with all the available information.

Other items of household expenditure are estimated mainly from data of various national household surveys. Such items include household expenditure at indigenous medical practitioners, for laboratory and diagnostic services, and purchases of optical glasses and other medical durables. These data are adjusted during estimation for known biases in survey reporting.

11. Appendix A:

SHA 1.0 standard tables showing health expenditure in Sri Lanka by financing source, provider and function for selected years

Table A1. Current expenditure on health by function of care and provider industry (Rs. million), 1990

	ICHA-HC code (SHA 1.0)	Health care by function	Health care provider industry (SHA 1.0)										Rest of the world												
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.3.6	HP.3.9	HP.4	HP.4.1	HP.4.2-4.9	HP.5	HP.6	HP.6.1	HP.6.2	HP.6.3	HP.6.4	HP.6.9	HP.7	HP.9	
		Hospitals																							
		Total current health expenditure	2,448	2,251	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	
		HC.1.1; 2.1	Curative and rehabilitative care	2,448	2,251	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.3.1	Long-term nursing care	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.1.2; 2.2	Services of day-care	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.3.2	Curative and rehabilitative care	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Outpatient care																							
		HC.1.3; 2.3	Outpatient curative and rehabilitative care	2,866	604	2	2,244	2,149	43	-	53	-	-	-	-	-	0	0	-	-	-	-	-	-	
		HC.2.768	Basic medical and diagnostic services	2,768	561	2	2,201	2,149	-	-	53	-	-	-	-	-	0	0	-	-	-	-	-	-	
		HC.1.3.2	Outpatient dental care	87	44	0	43	-	43	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.1.3.3	All other specialised health care	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.1.3.9	All other out-patient care	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		Home care																							
		HC.1.4; 2.4	Curative and rehabilitative care	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.3.3	Long-term nursing care	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
		HC.4	Ancillary services to health care	553	68	0	416	-	-	-	-	378	-	38	-	-	-	-	19	19	-	-	-	50	-
		HC.5	Medical goods dispensed to out-patients	2,527	173	1	-	-	-	-	-	-	-	-	-	2,295	1,676	619	-	53	53	-	-	4	2
		HC.5.1	Pharmaceut. and other medical non-durables	2,079	173	1	-	-	-	-	-	-	-	-	-	1,851	1,676	175	-	53	53	-	-	1	-
		HC.5.2	Therap. appliances and other med. durables	448	-	-	-	-	-	-	-	-	-	-	-	444	-	444	-	-	-	-	-	3	2
		Total expenditure on personal health care	8,401	3,097	10	2,843	2,382	43	-	53	378	-	38	2,295	1,676	619	-	72	72	-	-	-	24	59	
		Prevention and public health services	HC.6	1,003	6	0	282	-	-	-	-	-	-	-	-	-	-	608	-	-	-	-	-	97	10
		Health administration and health insurance	HC.7	607	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	14	9	
		Total current health expenditure	10,010	3,103	10	3,125	2,382	43	-	334	378	-	38	2,295	1,676	619	608	670	657	-	14	-	130	69	

Notes

- Zero values represent decimal points.
- “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A2. Current expenditure on health by function of care and provider industry (Rs. million), 2000

ICHA-HC code (SHA 1.0)	Health care by function	Total current health expenditure	Health care provider industry (SHA 1.0)																					
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.3.6	HP.3.9	HP.4	HP.4.1	HP.4.2-4.9	HP.5	HP.6	HP.6.1	HP.6.2	HP.6.3	HP.6.4	HP.6.9		
	Inpatient care																							
	Curative and rehabilitative care	HC.1;1;2;1	12,661	11,469	23	1,142	1,142	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Long-term nursing care	HC.3;1	37	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	27	
	Services of day-care		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Curative and rehabilitative care	HC.1;2;2;2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Long-term nursing care	HC.3;2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Outpatient care																							
	Outpatient curative and rehabilitative care	HC.1;3;2;3	10,260	2,757	7	7,364	7,008	242	-	113	-	-	-	-	-	0	-	-	-	-	-	-	-	
	Basic medical and diagnostic services	HC.1;3;1	9,749	2,558	7	7,121	7,008	-	-	113	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Outpatient dental care	HC.1;3;2	443	198	0	242	-	242	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	All other specialised health care	HC.1;3;3	7	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-	-	-	
	All other out-patient care	HC.1;3;9	10	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Home care																0	-	-	-	-	-	-	-
	Curative and rehabilitative care	HC.1;4;2;4	30	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Long-term nursing care	HC.3;3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Ancillary services to health care	HC.4	2,020	408	0	1,612	-	-	-	-	1,374	-	238	-	-	-	-	-	-	-	-	-	-	
	Medical goods dispensed to out-patients	HC.5	11,571	2,287	1	-	-	-	-	-	-	-	9,253	6,729	2,523	0	-	-	-	-	-	-	-	
	Pharmaceut. and other medical non-durables	HC.5;1	9,375	2,287	1	-	-	-	-	-	-	-	7,074	6,729	345	-	-	-	-	-	-	-	-	
	Therap. appliances and other med. durables	HC.5;2	2,196	-	-	-	-	-	-	-	-	-	2,179	-	2,179	-	-	-	-	-	-	-	-	
	Total expenditure on personal health care		36,580	16,921	31	10,118	8,151	242	-	113	1,374	-	238	9,253	6,729	2,523	0	-	-	-	-	-	-	98
	Prevention and public health services	HC.6	2,619	1	0	690	-	-	-	689	-	0	-	-	-	-	-	-	-	-	-	-	-	
	Health administration and health insurance	HC.7	1,868	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Total current health expenditure		41,067	16,922	31	10,808	8,151	242	-	802	1,374	-	239	9,253	6,729	2,523	1,303	1,834	1,707	-	127	-	817	100

Notes

1. Zero values represent decimal points.

2. “.” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A3. Current expenditure on health by function of care and provider industry (Rs. million), 2010

		Health care provider industry (SHA 1.0)												Rest of the world											
		HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.3.6	HP.3.9	HP.4	HP.4.1	HP.4.2-4.9	HP.5	HP.6	HP.6.1	HP.6.2	HP.6.3	HP.6.4	HP.6.9	HP.7	HP.9		
ICHA-HC code (SHA 1.0)		Total current health expenditure																							
Health care by function		Hospitals	Providers of ambulatory health care and residential care facilities												Health care provider industry (SHA 1.0)		Rest of the world								
Inpatient care			Curative and rehabilitative care	HC.1.1;2.1	62,305	55,028	115	7,150	7,150	7,150	-	-	-	All other providers of ambula-tory health care providers of ambula-tory providers of home health care services	Dispensing chemists	Provision and public health treatment and administration	General health administration	Governmental administration of health	Social security funds	Other social insurance	All other health administration	All other industries	-	12	
			Long-term nursing care	HC.3.1	112	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
			Services of day-care		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
			Curative and rehabilitative care	HC.1.2;2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
			Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Outpatient care			Outpatient curative and rehabilitative care	HC.1.3;2.3	35,389	15,133	35	19,933	18,390	1,342	-	290	-	-	-	-	0	-	-	-	-	-	251	36	
			Basic medical and diagnostic services	HC.1.3.1	32,959	14,256	34	18,590	18,300	-	-	290	-	-	-	-	-	-	-	-	-	-	42	36	
			Outpatient dental care	HC.1.3.2	2,226	877	2	1,342	-	1,342	-	-	-	-	-	-	-	-	-	-	-	-	5	-	
			All other specialised health care	HC.1.3.3	20	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-	20	-	
			All other out-patient care	HC.1.3.9	30	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30	-	
Home care			Curative and rehabilitative care	HC.1.4;2.4	78	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-	24	54	
			Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
			Ancillary services to health care	HC.4	15,095	2,382	1	12,690	-	-	-	11,201	-	1,489	-	-	-	23	-	-	-	-	-	82	-
			Medical goods dispensed to out-patients	HC.5	45,384	6,513	3	-	-	-	-	-	-	-	38,786	31,182	7,604	-	-	-	-	-	-	29	-
			Pharmaceut. and other medical non-durables	HC.5.1	38,549	6,513	3	-	-	-	-	-	-	-	32,004	31,182	822	-	-	-	-	-	-	52	-
			Therap. appliances and other med. durables	HC.5.2	6,834	-	-	-	-	-	-	-	-	-	6,782	-	6,782	-	-	-	-	-	-	-	
			Total expenditure on personal health care		158,362	79,056	154	39,773	25,450	1,342	-	290	11,201	-	1,489	38,786	31,182	7,604	23	-	-	-	-	468	102
Prevention and public health services			Health administration and health insurance	HC.6	10,289	7	0	3,248	-	-	0	3,248	-	-	-	-	-	-	-	-	-	-	1,819	957	
			Total current health expenditure	HC.7	4,940	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	360	17	

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A4. Current expenditure on health by function of care and provider industry (Rs. million), 2016

ICHA-HC code (SHA 1.0)	Health care by function	Total current health expenditure	Health care provider industry (SHA 1.0)																					
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.3.6	HP.3.9	HP.4	HP.4.1	HP.4.2-4.9	HP.5	HP.6	HP.6.1	HP.6.2	HP.6.3	HP.6.4	HP.6.9	HP.7	HP.9
	Inpatient care																							
	Curative and rehabilitative care	HC.1.1;2.1	141,672	125,459	272	15,932	15,932	-	-	-	-	-	0	-	-	-	-	-	-	-	-	-	7	
	Long-term nursing care	HC.3.1	140	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	140	-	
	Services of day-care												-	-	-	-	-	-	-	-	-	-	-	
	Curative and rehabilitative care	HC.1.2;2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Outpatient care												-	-	-	-	-	-	-	-	-	-	-	
	Outpatient curative and rehabilitative care	HC.1.3;2.3	68,903	33,235	71	35,230	30,696	4,071	-	463	-	-	-	-	-	-	-	-	-	-	-	-	316	16
	Basic medical and diagnostic services	HC.1.3.1	62,676	31,345	67	31,159	30,696	-	-	463	-	-	-	-	-	-	-	-	-	-	-	-	53	16
	Outpatient dental care	HC.1.3.2	5,971	1,891	4	4,071	-	4,071	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	All other specialised health care	HC.1.3.3	25	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	6	-
	All other out-patient care	HC.1.3.9	37	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	25	-
	Home care												-	-	-	-	-	-	-	-	-	-	-	37
	Curative and rehabilitative care	HC.1.4;2.4	31	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30	
	Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Ancillary services to health care	HC.4	26,368	5,639	1	20,728	-	-	-	17,410	-	3,318	-	-	-	-	-	-	-	-	-	-	-	
	Medical goods dispensed to our-patients	HC.5	81,253	17,992	19	-	-	-	-	-	-	-	62,982	45,843	17,139	0	-	-	-	-	-	-	259	
	Pharmaceut. and other medical non-durables	HC.5.1	65,716	17,992	19	-	-	-	-	-	-	-	47,515	45,843	1,672	-	-	-	-	-	-	-	191	
	Therap. appliances and other med. durables	HC.5.2	15,536	1	-	-	-	-	-	-	-	-	15,467	-	15,467	0	-	-	-	-	-	-	68	
	Total expenditure on personal health care		318,367	182,326	364	71,890	46,629	4,071	-	463	17,410	-	3,318	62,982	45,843	17,139	35	-	-	-	-	-	745	24
	Prevention and public health services	HC.6	17,804	43	0	6,590	-	-	-	6,590	-	0	-	-	8,659	49	49	-	-	-	-	-	2,278	
	Health administration and health insurance	HC.7	12,464	-	-	-	-	-	-	-	-	-	-	-	-	9,764	8,098	-	1,667	-	2,480	219	-	
	Total current health expenditure		348,634	182,369	364	78,480	46,629	4,071	-	7,053	17,410	-	3,318	62,982	45,843	17,139	8,694	9,814	8,147	-	1,667	-	5,504	427

Notes

1. Zero values represent decimal points.

2. “.” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A5. Current expenditure on health by function of care and provider industry (Rs. million), 2017

		Health care provider industry (SHA 1.0)												Rest of the world												
		HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.3.6	HP.3.9	HP.4	HP.4.1	HP.4.2-4.9	HP.5	HP.6	HP.6.1	HP.6.2	HP.6.3	HP.6.4	HP.6.9	HP.7	HP.9			
Health care by function		Total current health expenditure																								
Hospitals		Nursing and residential care facilities																								
Inpatient care		Curative and rehabilitative care	HC.1.1;2.1	154,473	136,355	270	17,847	17,847	-	-	0	-	-	-	-	-	-	-	-	-	-	-	-	-		
Long-term nursing care		HC.3.1	146	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Services of day-care		HC.1.2;2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Curative and rehabilitative care		HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Long-term nursing care		Outpatient care	HC.1.3;2.3	72,405	35,030	76	36,887	32,536	3,872	-	480	-	-	-	-	-	-	71	-	-	-	-	-	-	-	
Outpatient curative and rehabilitative care		HC.1.3.2	32,994	72	33,015	32,536	-	-	-	-	480	-	-	-	-	-	-	71	-	-	-	-	-	-	-	
Basic medical and diagnostic services		HC.1.3.1	66,220	5,918	2,035	4	3,872	-	3,872	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	
Outpatient dental care		HC.1.3.3	26	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
All other specialised health care		HC.1.3.9	39	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
All other out-patient care		Home care	HC.1.4;2.4	32	-	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-	-	-	
Curative and rehabilitative care		HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Long-term nursing care		HC.4	27,626	6,439	2	21,186	-	-	-	-	17,469	-	3,717	-	-	-	-	-	-	-	-	-	-	-	-	
Ancillary services to health care		HC.5	88,152	18,694	14	-	-	-	-	-	-	-	69,252	46,053	23,199	0	-	-	-	-	-	-	187	5	-	
Medical goods dispensed to out-patients		HC.5.1	66,578	18,694	14	-	-	-	-	-	-	-	47,753	46,053	1,700	-	-	-	-	-	-	-	-	116	-	
Pharmaceut. and other medical non-durables		HC.5.2	21,575	-	-	-	-	-	-	-	-	-	21,499	-	21,499	0	-	-	-	-	-	-	-	71	5	
Therap. appliances and other med. durables		Total expenditure on personal health care	342,834	196,517	362	75,920	50,383	3,872	-	480	17,469	-	3,717	69,252	46,053	23,199	72	-	-	-	-	-	-	-	692	19
Prevention and public health services		HC.6	18,254	17	0	6,691	-	-	-	6,691	-	0	-	-	-	-	8,753	118	-	-	-	-	-	-	2,367	307
Health administration and health insurance		HC.7	12,453	-	-	-	-	-	-	-	-	-	-	-	-	-	10,371	8,540	-	1,831	-	1,919	-	163	-	
Total current health expenditure			373,541	196,534	362	82,611	50,383	3,872	-	7,171	17,469	-	3,717	69,252	46,053	23,199	8,824	10,489	8,658	-	1,831	-	4,979	489	-	

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A6. Current expenditure on health by function of care and provider industry (Rs. million), 2018

		Health care provider industry (SHA 1.0)																										
		HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.3.6	HP.3.9	HP.4	HP.4.1	HP.4.2-4.9	HP.5	HP.6	HP.6.1	HP.6.2	HP.6.3	HP.6.4	HP.6.9	HP.7	HP.9					
ICHA-HC code (SHA 1.0)	Health care by function	Total current health expenditure												Rest of the world														
		Hospitals	Nursing and residential care facilities	Providers of ambulatory health care	Offices of physicians	Offices of dentists	Offices of other health practitioners	Out-patient care centres	Medical and diagnostic laboratories	Other health care providers of ambulato-	All other providers of home health care services	General health administration and programmes	Retail sale and other providers of medical goods	Dispensing chemists	All other sales of medical goods	General health administration and programmes	Retail sale and other providers of medical goods	General health administration and programmes	Retail sale and other providers of medical goods	General health administration and programmes	Retail sale and other providers of medical goods	General health administration and programmes	Retail sale and other providers of medical goods	General health administration and programmes				
	Inpatient care																											
	Curative and rehabilitative care	HC.1.1;2.1	175,050	154,914	313	19,822	19,822	-	-	-	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Long-term nursing care	HC.3.1	151	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Services of day-care		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Curative and rehabilitative care	HC.1.2;2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Outpatient care																											
	Outpatient curative and rehabilitative care	HC.1.3;2.3	80,188	39,294	87	40,427	35,527	4,385	-	515	-	-	-	-	-	-	-	24	-	-	-	-	-	-	-	-	-	
	Basic medical and diagnostic services	HC.1.3.1	73,246	37,024	83	36,042	35,527	-	-	515	-	-	-	-	-	-	-	23	-	-	-	-	-	-	-	-	-	
	Outpatient dental care	HC.1.3.2	6,666	2,269	5	4,385	-	4,385	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	All other specialised health care	HC.1.3.3	28	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	
	All other out-patient care	HC.1.3.9	40	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Home care																	0	-	-	-	-	-	-	-	-	-	-
	Curative and rehabilitative care	HC.1.4;2.4	33	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Ancillary services to health care	HC.4	30,298	7,268	2	23,028	-	-	-	18,900	-	4,128	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Medical goods dispensed to out-patients	HC.5	102,721	21,644	17	-	-	-	-	-	-	-	-	-	-	80,846	49,856	30,990	0	-	-	-	-	-	-	-	-	
	Pharmaceut. and other medical non-durables	HC.5.1	73,507	21,644	17	-	-	-	-	-	-	-	-	-	-	51,708	49,856	1,852	-	-	-	-	-	-	-	-	-	
	Therap. appliances and other med. durables	HC.5.2	29,213	-	-	-	-	-	-	-	-	-	-	-	-	29,137	-	29,137	0	-	-	-	-	-	-	-	-	
	Total expenditure on personal health care		388,442	223,119	419	83,277	55,349	4,385	-	515	18,900	-	4,128	80,846	49,856	30,990	25	-	-	-	-	-	-	-	-	738	19	
	Prevention and public health services	HC.6	20,355	20	0	7,521	-	-	-	7,521	-	0	-	-	-	-	10,010	85	85	-	-	-	-	-	-	-	2,458	263
	Health administration and health insurance	HC.7	14,422	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11,827	9,559	-	2,268	-	-	-	-	2,302	294	
	Total current health expenditure		423,219	223,139	419	90,798	55,349	4,385	-	8,035	18,900	-	4,128	80,846	49,856	30,990	10,034	11,911	9,644	-	2,268	-	-	-	-	5,497	575	

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A7. Current expenditure on health by function of care and provider industry (Rs. million), 2019

Notes

1 Zero values represent decimal points

- 1. Zero values represent decimal points.
- 2. “_” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database

Table A8. Current expenditure on health by provider industry and source of funding (Rs. million), 1990

Health care goods and services by provider industry	CHA-HP code (SHA 1.0)	Total current health expenditure	Source of funding (SHA 1.0)						Rest of the world				
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9
Hospitals	HP.1	3,103	2,623	2,623	0	480	-	123	99	24	-	357	-
Nursing and residential care facilities	HP.2	10	10	10	-	-	-	-	-	-	-	-	-
Providers of ambulatory health care	HP.3	3,125	334	334	-	2,790	251	241	10	2,559	-	-	-
Offices of physicians	HP.3.1	2,332	-	-	-	2,332	188	179	10	2,143	-	-	-
Offices of dentists	HP.3.2	43	-	-	-	43	-	-	-	43	-	-	-
Offices of other health practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-
Out-patient care centres	HP.3.4	334	334	334	-	-	378	63	63	-	-	315	-
Medical and diagnostic laboratories	HP.3.5	378	-	-	-	-	-	-	-	-	-	-	-
Providers of home health care services	HP.3.6	-	-	-	-	-	38	-	-	-	-	38	-
Other providers of ambulatory health care	HP.3.9	38	-	-	-	-	-	-	-	-	-	-	-
Retail sale and other providers of medical goods	HP.4	2,295	0	0	0	2,295	95	94	1	2,200	-	-	-
Dispensing chemists	HP.4.1	1,676	0	0	0	1,676	95	94	1	1,581	-	-	-
All other sales of medical goods	HP.4.2-4.9	619	-	-	-	619	0	-	0	619	-	-	-
Provision and administration of public health programmes	HP.5	608	608	608	-	-	-	-	-	-	-	-	-
General health administration and insurance	HP.6	670	601	601	-	17	14	-	14	3	-	-	53
Government (excluding social insurance)	HP.6.1	657	601	601	-	3	-	-	-	3	-	-	53
Social security funds	HP.6.2	-	-	-	-	-	-	-	-	-	-	-	-
Other social insurance	HP.6.3	-	-	-	-	-	-	-	-	-	-	-	-
Other (private) insurance	HP.6.4	14	-	-	-	14	14	-	14	-	-	-	-
All other providers of health administration	HP.6.9	-	-	-	-	-	-	-	-	-	-	-	-
Other industries (rest of the economy)	HP.7	130	10	10	-	120	-	-	-	-	120	-	-
Occupational health care	HP.7.1	0	0	0	-	-	-	-	-	-	-	-	-
Private households	HP.7.2	-	-	-	-	-	-	-	-	-	-	-	-
All other secondary producers	HP.7.9	130	10	10	-	120	-	-	-	-	120	-	-
Rest of the world	HP.9	69	8	8	-	-	-	-	-	-	-	-	61
Total current health expenditure		10,010	4,194	4,194	0	5,702	483	435	48	5,099	120	-	114

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A9. Current expenditure on health by provider industry and source of funding (Rs. million), 2000

	ICHA-HP code (SHA 1.0)	Health care goods and services by provider industry	Source of funding (SHA 1.0)							Rest of the world HF.3			
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9
Total current health expenditure													
General Government													
Social security funds (excl. general government)													
Private Sector													
Private insurance													
Other private insurance													
Private household out-of-pocket payments													
Non-profit organizations (other than social insur.)													
Corporate foundations (other than health insur.)													
Provider Own Resources													
Rest of the world													
Total current health expenditure	41,067	17,752	17,694	58	23,214	2,442	1,750	691	20,016	753	4	101	

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A10. Current expenditure on health by provider industry and source of funding (Rs. million), 2010

	ICHA-HP code (SHA 1.0)	Total current health expenditure	Source of funding (SHA 1.0)						Rest of the world				
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9
Health care goods and services by provider industry													
Hospitals	HP.1	79,064	60,905	60,824	81	18,154	4,730	1,848	2,681	13,407	-	-	5
Nursing and residential care facilities	HP.2	154	154	154	-	-	38,484	5,385	4,224	1,161	34,099	-	-
Providers of ambulatory health care	HP.3	43,021	3,370	3,370	-	-	25,450	4,208	3,047	1,161	21,242	-	-
Offices of physicians	HP.3.1	25,450	-	-	-	-	-	-	-	-	-	-	167
Offices of dentists	HP.3.2	1,342	-	-	-	-	1,342	-	-	-	-	-	-
Offices of other health practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-
Out-patient care centres	HP.3.4	3,538	3,369	3,369	-	2	-	-	-	2	-	-	167
Medical and diagnostic laboratories	HP.3.5	11,201	-	-	-	-	11,201	1,177	1,177	-	10,024	-	-
Providers of home health care services	HP.3.6	-	-	-	-	-	-	-	-	-	-	-	-
Other providers of ambulatory health care	HP.3.9	1,489	0	0	-	1,489	-	-	-	-	1,489	-	-
Retail sale and other providers of medical goods	HP.4	38,786	3	-	3	38,783	1,993	1,952	41	36,790	-	-	-
Dispensing chemists	HP.4.1	31,182	3	-	3	31,179	1,806	1,765	41	29,373	-	-	-
All other sales of medical goods	HP.4.2-4.9	7,604	-	-	-	7,604	187	187	0	7,417	-	-	-
Provision and administration of public health programmes	HP.5	4,253	4,139	4,139	-	0	-	-	-	0	-	-	114
General health administration and insurance	HP.6	4,591	3,683	3,683	-	848	860	115	745	(12)	-	-	61
Government (excluding social insurance)	HP.6.1	3,846	3,683	3,683	-	102	-	-	-	102	-	-	61
Social security funds	HP.6.2	-	-	-	-	-	-	-	-	-	-	-	-
Other social insurance	HP.6.3	-	-	-	-	-	-	-	-	-	-	-	-
Other (private) insurance	HP.6.4	745	-	-	-	745	860	115	745	(115)	-	-	-
All other providers of health administration	HP.6.9	-	-	-	-	-	-	-	-	-	-	-	-
Other industries (rest of the economy)	HP.7	2,648	391	391	-	2,249	-	-	-	-	2,249	-	8
Occupational health care	HP.7.1	21	21	21	-	-	-	-	-	-	-	-	-
Private households	HP.7.2	2,627	370	370	-	2,249	-	-	-	-	2,249	-	8
All other secondary producers	HP.7.9	1,076	19	19	-	-	-	-	-	-	-	-	-
Rest of the world	HP.9	173,592	72,663	72,579	84	99,517	12,967	8,138	4,829	84,284	2,249	-	1,057
Total current health expenditure												17	1,411

Notes

- Zero values represent decimal points.
- "—" represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A11. Current expenditure on health by provider industry and source of funding (Rs. million), 2016

	ICHA-HP code (SHA 1.0)	Health care goods and services by provider industry	Source of funding (SHA 1.0)						Rest of the world HF.3				
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9
Total current health expenditure													
General Government													
Social security funds (excl. general government)													
Private Sector													
Private insurance													
Other private insurance													
Private households out-of-pocket payments													
Non-profit organizations (other than social insur.)													
Corporate foundations (other than health insur.)													
Provider Own Resources													
Rest of the world													
Total current health expenditure	348,634	168,825	168,431	194	179,278	26,242	14,816	11,426	149,790	2,829	-	417	731

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A12. Current expenditure on health by provider industry and source of funding (Rs. million), 2017

ICHA-HP code (SHA 1.0)		Health care goods and services by provider industry		Source of funding (SHA 1.0)										Rest of the world	
				HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9	
Total current health expenditure		General Government	Hospitals	196,534	150,658	150,503	155	45,852	12,872	3,756	9,117	32,133	-	846	25
		Nursing and residential care facilities	HP.2	362	362	362	-	-	-	-	-	-	-	-	-
		Providers of ambulatory health care	HP.3	82,611	7,169	7,169	-	75,442	12,531	8,857	3,674	62,912	-	-	-
		Offices of physicians	HP.3.1	50,383	-	-	-	50,383	10,059	6,385	3,674	40,324	-	-	-
		Offices of dentists	HP.3.2	3,872	-	-	-	-	3,872	-	-	3,872	-	-	-
		Offices of other health practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-
		Out-patient care centres	HP.3.4	7,171	7,169	7,169	-	-	2	-	-	2	-	-	-
		Medical and diagnostic laboratories	HP.3.5	17,469	-	-	-	-	17,469	2,472	2,472	-	14,997	-	-
		Providers of home health care services	HP.3.6	-	-	-	-	-	-	-	-	-	-	-	-
		Other providers of ambulatory health care	HP.3.9	3,717	0	0	-	-	3,717	-	-	3,717	-	-	-
		Retail sale and other providers of medical goods	HP.4	69,252	5	-	5	69,246	4,299	4,168	131	64,947	-	-	-
		Dispensing chemists	HP.4.1	46,053	5	-	5	46,048	3,837	3,708	130	42,211	-	-	-
		All other sales of medical goods	HP.4.2-4.9	23,199	-	-	-	23,199	462	461	1	22,737	-	-	-
		Provision and administration of public health programmes	HP.5	8,824	8,572	8,572	-	0	-	-	0	-	-	-	253
		General health administration and insurance	HP.6	10,489	8,486	8,486	-	1,940	2,107	276	1,831	(167)	-	-	64
		Government (excluding social insurance)	HP.6.1	8,658	8,486	8,486	-	109	-	-	-	109	-	-	64
		Social security funds	HP.6.2	-	-	-	-	-	-	-	-	-	-	-	-
		Other social insurance	HP.6.3	-	-	-	-	-	-	-	-	-	-	-	-
		Other (private) insurance	HP.6.4	1,831	-	-	-	-	1,831	2,107	276	1,831	(276)	-	-
		All other providers of health administration	HP.6.9	-	-	-	-	-	-	-	-	-	-	-	-
		Other industries (rest of the economy)	HP.7	4,979	2,040	2,040	-	-	2,939	-	-	-	2,939	-	-
		Occupational health care	HP.7.1	71	71	71	-	-	-	-	-	-	-	-	-
		Private households	HP.7.2	-	-	-	-	-	-	-	-	-	-	-	-
		All other secondary producers	HP.7.9	4,908	1,969	1,969	-	-	2,939	-	-	-	2,939	-	-
		Rest of the world	HP.9	489	14	14	-	-	-	-	-	-	-	-	475
		Total current health expenditure		373,541	177,305	177,145	160	195,420	31,809	17,056	14,753	159,826	2,939	846	816

Notes

1. Zero values represent decimal points.

2. “_” represents

Source: IHP Sri Lanka Health Accounts Database.

Table A13. Current expenditure on health by provider industry and source of funding (Rs. million), 2018

	ICHA-HP code (SHA 1.0)	Health care goods and services by provider industry	Source of funding (SHA 1.0)							Rest of the world HF.3			
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9
Total current health expenditure													
General Government													
Social security funds													
Private Sector													
Private insurance													
Other private insurance													
Private households out-of-pocket payments													
Non-profit organisations (other than social insur.)													
Corporate foundations (other than health insur.)													
Provider Own Resources													
Rest of the world													
Total current health expenditure	423,139	172,286	172,050	236	50,845	15,846	4,168	11,678	34,020	-	-	979	8
Nursing and residential care facilities	HP.2	419	419	-	-	-	-	-	-	-	-	-	-
Providers of ambulatory health care	HP.3	90,798	8,187	8,034	154	82,611	14,550	9,844	4,706	68,060	-	-	-
Offices of physicians	HP.3.1	55,349	92	-	92	55,257	11,765	7,059	4,706	43,492	-	-	-
Offices of dentists	HP.3.2	4,395	-	-	-	4,385	-	-	-	4,385	-	-	-
Offices of other health practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-
Out-patient care centres	HP.3.4	8,035	8,033	-	2	-	-	-	-	-	2	-	-
Medical and diagnostic laboratories	HP.3.5	18,900	61	-	61	18,838	2,785	2,785	-	16,053	-	-	-
Providers of home health care services	HP.3.6	-	-	-	-	-	-	-	-	-	-	-	-
Other providers of ambulatory health care	HP.3.9	4,128	0	0	-	4,128	-	-	-	4,128	-	-	-
Retail sale and other providers of medical goods	HP.4	80,846	96	-	96	80,750	5,020	4,852	168	75,730	-	-	-
Dispensing chemists	HP.4.1	49,856	96	-	96	49,760	4,344	4,178	166	45,416	-	-	-
All other sales of medical goods	HP.4.2-4.9	30,990	-	-	30,990	30,990	676	674	2	30,314	-	-	-
Provision and administration of public health programmes	HP.5	10,034	9,537	9,537	0	-	-	-	0	-	-	497	-
General health administration and insurance	HP.6	11,911	9,566	9,515	51	2,324	2,671	403	2,268	(347)	-	-	21
Government (excluding social insurance)	HP.6.1	9,644	9,515	-	107	-	-	-	-	107	-	-	21
Social security funds	HP.6.2	-	-	-	-	-	-	-	-	-	-	-	-
Other social insurance	HP.6.3	-	-	-	-	-	-	-	-	-	-	-	-
Other (private) insurance	HP.6.4	2,268	51	-	51	2,216	2,671	403	2,268	(455)	-	-	-
All other providers of health administration	HP.6.9	-	-	-	-	-	-	-	-	-	-	-	-
Other industries (rest of the economy)	HP.7	5,497	2,446	2,446	-	3,051	-	-	-	-	3,051	-	-
Occupational health care	HP.7.1	85	85	-	-	-	-	-	-	-	-	-	-
Private households	HP.7.2	-	-	-	-	-	-	-	-	-	-	-	-
All other secondary producers	HP.7.9	5,412	2,361	2,361	-	3,051	-	-	-	3,051	-	-	-
Rest of the world	HP.9	575	17	17	-	-	-	-	-	-	558	-	558
Total current health expenditure		423,219	202,554	202,018	537	219,580	38,087	19,267	18,020	177,463	3,051	-	979
Notes													1,084

1. Zero values represent decimal points.
 2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A14. Current expenditure on health by provider industry and source of funding (Rs. million), 2019

ICHA-HP code (SHA 1.0)		Total current health expenditure		Source of funding (SHA 1.0)						Rest of the world			
				HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + HF.2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5
Health care goods and services by provider industry													
Hospitals	HP.1	263,920	204,849	204,568	281	59,064	19,605	4,696	14,909	38,313	-	1,145	7
Nursing and residential care facilities	HP.2	500	500	500	-	-	-	-	-	-	-	-	-
Providers of ambulatory health care	HP.3	98,883	9,708	9,525	183	89,175	17,100	11,022	6,008	72,076	-	-	-
Offices of physicians	HP.3.1	60,129	110	-	110	60,020	13,962	7,953	6,008	46,058	-	-	-
Offices of dentists	HP.3.2	4,644	-	-	-	4,644	-	-	-	4,644	-	-	-
Offices of other health practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-
Out-patient care centres	HP.3.4	9,527	9,525	9,525	-	2	-	-	-	-	2	-	-
Medical and diagnostic laboratories	HP.3.5	20,211	73	-	73	20,138	3,138	3,138	-	17,000	-	-	-
Providers of home health care services	HP.3.6	-	-	-	-	-	-	-	-	-	-	-	-
Other providers of ambulatory health care	HP.3.9	4,372	1	1	-	4,371	-	-	-	4,371	-	-	-
Retail sale and other providers of medical goods	HP.4	92,990	114	-	114	92,876	5,681	5,467	214	87,196	-	-	-
Dispensing chemists	HP.4.1	60,126	114	-	114	60,012	4,919	4,707	212	55,093	-	-	-
All other sales of medical goods	HP.4.2-4.9	32,864	-	-	-	32,864	761	759	2	32,103	-	-	-
Provision and administration of public health programmes	HP.5	11,727	11,297	11,297	-	0	-	-	0	-	-	-	430
General health administration and insurance	HP.6	14,355	11,355	11,294	61	2,982	3,349	454	2,895	(368)	-	-	18
Government (excluding social insurance)	HP.6.1	11,426	11,294	11,294	-	114	-	-	-	114	-	-	18
Social security funds	HP.6.2	-	-	-	-	-	-	-	-	-	-	-	-
Other social insurance	HP.6.3	-	-	-	-	-	-	-	-	-	-	-	-
Other (private) insurance	HP.6.4	2,929	61	-	61	2,868	3,349	454	2,895	(481)	-	-	-
All other providers of health administration	HP.6.9	-	-	-	-	-	-	-	-	-	3,133	-	-
Other industries (rest of the economy)	HP.7	6,038	2,906	2,906	-	3,133	-	-	-	-	-	-	-
Occupational health care	HP.7.1	101	101	101	-	-	-	-	-	-	-	-	-
Private households	HP.7.2	-	-	-	-	-	-	-	-	-	-	-	-
All other secondary producers	HP.7.9	5,937	2,805	2,805	-	3,133	-	-	-	3,133	-	-	-
Rest of the world	HP.9	504	20	20	-	-	-	-	-	-	-	-	484
Total current health expenditure		488,918	240,748	240,110	638	247,230	45,735	21,708	24,027	197,217	3,133	1,145	940

Notes

1. Zero values represent decimal points.

Source: IIP Civil and Health Accounts Database

Table A15. Current expenditure on health by function of care and source of funding (Rs. million), 1990

				Source of funding (SHA 1.0)											
				HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + 2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9	HF.3
				Provider Own Resources											
				Corporate institutions (other than health insurance)	Non-profit institutions (other than social insurance)	Private household out-of-pocket payments	Other private insurance scheme	Private social insurance scheme	Private insurance	Social security funds	General government (exc.)	General government (exc.)	Non-profit institutions (other than social insurance)	Corporate institutions (other than health insurance)	Rest of the world
				-	-	-	-	-	-	-	-	-	-	-	-
Current expenditure on health care		CHA-HC CODE (SHA 1.0)		Total current health expenditure	5,321	2,537	2,536	0	2,784	312	278	34	2,452	21	-
Personal health care services		HC.1-HC.3		Inpatient services	2,454	2,014	2,013	0	440	106	75	31	328	6	-
				Day care services	-	-	-	-	-	-	-	-	-	-	-
				Outpatient services	2,866	523	523	-	2,343	205	203	3	2,124	13	-
				Home care services	1	-	-	-	1	-	-	-	1	-	-
Ancillary services to health care		HC.4		Medical goods dispensed to out-patients	553	40	40	0	463	63	63	-	401	-	-
		HC.5		Pharmaceuticals and other medical non-durables	2,527	131	131	0	2,341	95	94	1	2,244	3	-
		HC.5.1		Therapeutic appliances and other medical durables	2,079	131	131	0	1,895	95	94	1	1,800	0	-
Personal health care services and goods		HC.1 - HC.5		Prevention and public health services	448	-	-	-	447	0	-	0	444	3	-
		HC.6		Health administration and health insurance	8,401	2,708	2,708	0	5,589	470	435	35	5,096	23	-
Total current health expenditure		10,010			4,194	4,194	0	5,702	483	435	48	5,099	120	-	114

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A16. Current expenditure on health by function of care and source of funding (Rs. million), 2000

	ICHA-HC CODE (SHA 1.0)	Total current health expenditure	Source of funding (SHA 1.0)						HF.3			
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + 2.2	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9
Current expenditure on health care											Rest of the world	
Personal health care services	HC.1-HC.3	22,989	11,905	11,848	57	11,019	1,614	1,055	559	9,272	129	-
Inpatient services		12,699	9,778	9,721	57	2,921	859	321	558	2,023	37	-
Day care services		-	-	-	-	-	-	-	-	-	-	-
Outpatient services		10,260	2,127	2,127	-	8,090	755	734	21	7,250	84	-
Home care services		30	0	0	-	8	-	-	-	-	8	-
Ancillary services to health care											-	-
Medical goods dispensed to out-patients	HC.4	2,020	83	83	-	1,936	248	248	-	1,688	-	-
Pharmaceuticals and other medical non-durables	HC.5	11,571	2,051	2,050	1	9,520	427	422	6	9,075	17	-
Therapeutic appliances and other medical durables	HC.5.2	9,375	2,050	2,050	1	7,324	378	372	6	6,946	1	-
Personal health care services and goods	HC.1 - HC.5	2,196	1	1	-	2,196	50	50	0	2,129	17	-
Prevention and public health services	HC.6	36,580	14,040	13,982	58	22,476	2,289	1,725	565	20,036	147	-
Health administration and health insurance	HC.7	2,819	1,976	1,976	-	607	-	-	-	1	606	-
Total current health expenditure		41,067	17,752	17,694	58	23,214	2,442	1,750	691	20,016	753	4
<i>Notes</i>												
1. Zero values represent decimal points.												
2. “-” represents a zero value.											36	
Source: IHP Sri Lanka Health Accounts Database.											-	

Notes
 1. Zero values represent decimal points.
 2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A17. Current expenditure on health by function of care and source of funding (Rs. million), 2010

		Source of funding (SHA 1.0)						Rest of the world					
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + 2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9	HF.3
Current expenditure on health care	CHA-HC CODE (SHA 1.0)												
Personal health care services	HC.1-HC.3	97,884	56,087	56,005	81	41,709	8,938	4,895	4,043	32,368	387	-	17
Inpatient services		62,417	45,897	45,816	81	16,515	5,694	1,803	3,891	10,701	112	-	8
Day care services		-	-	-	-	-	-	-	-	-	-	-	5
Outpatient services		35,389	10,190	10,190	-	25,170	3,244	3,092	152	21,667	251	-	8
Home care services		78	0	0	-	24	-	-	-	-	24	-	54
Ancillary services to health care	HC.4	15,095	410	410	-	14,662	1,177	1,177	-	13,485	-	-	23
Medical goods dispensed to out-patients	HC.5	45,384	4,898	4,895	3	40,485	1,993	1,952	41	38,441	52	-	-
Pharmaceuticals and other medical non-durables	HC.5.1	38,549	4,896	4,893	3	33,653	1,806	1,765	41	31,846	2	-	-
Therapeutic appliances and other medical durables	HC.5.2	6,834	2	2	-	6,832	187	187	0	6,595	50	-	-
Personal health care services and goods	HC.1 - HC.5	158,362	61,395	61,311	84	96,857	12,107	8,023	4,084	84,294	438	-	17
Prevention and public health services	HC.6	10,289	7,253	7,253	-	1,812	-	-	-	2	1,811	-	-
Health administration and health insurance	HC.7	4,940	4,015	4,015	-	848	860	115	745	(12)	-	-	77
Total current health expenditure		173,592	72,663	72,579	84	99,517	12,967	8,138	4,829	84,284	2,249	-	17
													1,411

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A18. Current expenditure on health by function of care and source of funding (Rs. million), 2016

	ICHA-HC CODE (SHA 1.0)	Total current health expenditure	Source of funding (SHA 1.0)						HF.3					
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + 2.2	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9	HF.3	
Current expenditure on health care											Rest of the world			
Personal health care services	HC.1-HC.3	210,746	128,325	189	82,162	18,637	8,977	9,660	62,622	486	-	417	69	
Inpatient services		141,812	106,459	106,270	189	35,346	12,733	3,436	9,297	22,122	140	-	351	6
Day care services		-	-	-	-	-	-	-	-	-	-	-	-	
Outpatient services		68,903	22,055	22,055	-	46,785	5,904	5,541	363	40,500	316	-	66	63
Home care services		31	0	0	-	30	-	-	-	30	-	-	-	
Ancillary services to health care	HC.4	26,368	891	891	-	25,477	2,154	2,154	-	23,323	-	-	-	
Medical goods dispensed to out-patients	HC.5	81,553	13,668	13,664	4	67,584	3,641	3,542	99	63,378	65	-	1	
Pharmaceuticals and other medical non-durables	HC.5.1	65,716	13,663	13,659	4	52,054	3,329	3,231	98	48,723	2	-	-	
Therapeutic appliances and other medical durables	HC.5.2	15,536	5	5	-	15,530	312	311	1	15,155	63	-	1	
Personal health care services and goods	HC.1 - HC.5	318,867	143,073	142,880	194	175,223	24,432	14,672	9,759	149,923	551	-	417	70
Prevention and public health services	HC.6	17,804	15,082	15,082	-	2,280	-	-	2	2,278	-	-	442	
Health administration and health insurance	HC.7	12,464	10,470	10,470	-	1,775	1,811	144	1,667	(35)	-	-	219	
Total current health expenditure		348,634	168,625	168,431	194	179,278	26,242	14,816	11,426	149,790	2,829	-	417	731

Notes

- Zero values represent decimal points.
- “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A19. Current expenditure on health by function of care and source of funding (Rs. million), 2017

		Source of funding (SHA 1.0)						Rest of the world					
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + 2.2	HF.2.1	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9	HF.3
Current expenditure on health care	ICHA-HC CODE (SHA 1.0)												
Personal health care services	HC.1-HC.3	227,055	136,899	136,744	155	90,061	22,931	10,140	12,791	65,778	505	-	846
Inpatient services	154,619	113,107	112,952	155	41,512	16,299	3,989	12,310	24,336	146	-	730	-
Day care services	-	-	-	-	-	-	-	-	-	-	-	-	-
Outpatient services	72,405	23,792	23,792	-	48,517	6,632	6,151	4,81	41,442	328	-	116	95
Home care services	32	0	0	-	32	-	-	-	-	32	-	-	-
Ancillary services to health care	HC.4	27,626	959	959	-	26,667	2,472	-	-	24,195	-	-	-
Medical goods dispensed to out-patients	HC.5	88,152	13,764	13,759	5	74,383	4,299	4,168	131	70,017	68	-	5
Pharmaceuticals and other medical non-durables	HC.5.1	66,578	13,758	13,753	5	52,819	3,837	3,708	130	48,980	2	-	-
Therapeutic appliances and other medical durables	HC.5.2	21,575	5	5	-	21,564	462	461	1	21,037	66	-	5
Personal health care services and goods	HC.1 - HC.5	342,634	161,622	151,462	160	191,111	28,702	16,781	12,922	159,990	573	-	846
Prevention and public health services	HC.6	18,254	15,333	15,333	-	2,368	-	-	-	2	2,366	-	553
Health administration and health insurance	HC.7	12,453	10,350	10,350	-	1,940	2,107	276	1,831	(167)	-	-	163
Total current health expenditure		373,541	177,305	177,145	160	195,420	31,809	17,056	14,753	159,826	2,939	-	846
													816

Notes

1. Zero values represent decimal points.
2. “_” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A20. Current expenditure on health by function of care and source of funding (Rs. million), 2018

	ICHA-HC CODE (SHA 1.0)	Total current health expenditure	Source of funding (SHA 1.0)						HF.3					
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1 + 2.2	HF.2.2	HF.2.3	HF.2.4	HF.2.5	HF.2.9	HF.3	
Current expenditure on health care											Rest of the world			
Personal health care services	HC.1-HC.3	255,423	156,439	156,111	328	98,952	27,611	11,227	16,385	69,837	525	-	979	32
Inpatient services		175,202	129,577	129,303	274	45,625	20,279	4,511	15,769	24,348	151	-	846	-
Day care services		-	-	-	-	-	-	-	-	-	-	-	-	
Outpatient services		80,188	26,862	26,808	54	53,295	7,332	6,716	6,16	45,489	340	-	134	32
Home care services		33	0	0	-	33	-	-	-	-	33	-	-	
Ancillary services to health care														
Medical goods dispensed to out-patients	HC.4	30,298	1,129	1,067	61	29,170	2,785	2,785	-	26,884	-	-	-	
Pharmaceuticals and other medical non-durables	HC.5	102,721	16,043	15,947	96	86,676	5,020	4,852	168	81,587	70	-	-	
Therapeutic appliances and other medical durables	HC.5.1	73,507	16,036	15,941	96	57,471	4,344	4,178	166	53,125	2	-	-	
Personal health care services and goods	HC.5.2	29,213	6	6	-	29,205	676	674	2	28,462	68	-	-	
HC.1 - HC.5		388,442	173,610	173,125	486	214,798	35,416	18,864	16,552	177,908	595	-	979	33
Prevention and public health services	HC.6	20,355	17,140	17,140	-	2,458	-	-	-	2	2,456	-	-	
Health administration and health insurance	HC.7	14,422	11,804	11,753	51	2,324	2,671	403	2,268	(347)	-	-	757	
Total current health expenditure		423,219	202,554	202,018	537	219,580	38,087	19,267	18,820	177,463	3,051	-	979	1,084

Notes

- Zero values represent decimal points.
- "." represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table A21. Current expenditure on health by function of care and source of funding (Rs. million), 2019

Notes

1. Zero values represent decimal points.
 2. “_” represents a zero value.

3. **P**l8v18h1.

12. Appendix B:

SHA 2011 standard tables showing health expenditure in Sri Lanka by financing source, provider and function for selected years

Table B1. Current expenditure on health by function of care and provider industry (Rs. million), 1990

Health care by function	ICHA-HC code (SHA 2011)	Health care provider industry (SHA 2011)																				
		HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.4 ^(a)	HP.5	HP.5.1	HP.5.2-5.9	HP.6	HP.7	HP.7.1	HP.7.2	HP.7.3	HP.7.9	HP.8	HP.9	
Inpatient care																						
Curative and rehabilitative care	HC.1.1; 2.1	2,448	2,251	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.3.1	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Services of day-care	HC.1.2; 2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Curative and rehabilitative care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.1.3; 2.3	2,866	604	-	2,244	2,149	43	-	53	-	-	-	-	-	0	0	0	0	0	-	13	2
Outpatient care																						
Outpatient curative and rehabilitative care	HC.1.3.1	2,770	561	2	2,201	2,149	-	53	-	-	-	-	-	-	0	0	-	-	-	-	4	2
General curative care	HC.1.3.2	87	44	0	43	-	43	-	-	-	-	-	-	-	-	-	-	-	-	-	0	-
Outpatient dental care	HC.1.3.3	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-
All other specialised health care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.4	553	68	0	-	-	-	-	-	-	416	-	-	-	-	-	19	19	-	-	-	-
Home care	HC.1.4; 2.4	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Curative and rehabilitative care	HC.3.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.5	2,527	173	1	-	-	-	-	-	-	-	2,295	1,676	619	-	53	53	-	-	-	4	2
Ancillary services to health care	HC.4	2,079	173	1	-	-	-	-	-	-	-	1,851	1,676	175	-	53	53	-	-	-	1	-
Medical goods	HC.5.2	448	-	-	-	-	-	-	-	-	-	444	-	444	-	-	-	-	-	-	3	2
Pharmaceutical and other medical non-durables	HC.5.2	8,401	3,097	10	2,427	2,332	43	-	53	-	416	2,295	1,676	619	-	72	72	-	-	-	24	59
Therap. appliances and other med. durables	HC.6	1,003	6	0	282	-	-	-	-	-	-	-	-	-	608	-	-	-	-	-	97	10
Total expenditure on personal health care	HC.7	607	-	-	-	-	-	-	-	-	-	-	-	-	-	598	584	-	14	-	9	-
Preventive care																				14	-	
Health system and financing administration																				130	69	
Total current expenditure on health care																						
		10,010	3,103	10	2,709	2,332	43	-	334	-	416	2,295	1,676	619	608	670	657	-	14	-	130	69

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP-Sri Lanka Health Accounts Database.

Table B2. Current expenditure on health by function of care and provider industry (Rs. million), 2000

Health care by function	ICHA-HC code (SHA 2011)	Total Current health expenditure	Health care provider industry (SHA 2011)									Rest of the world											
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.4 (e)	HP.5	HP.5.1	HP.5.2-5.9	HP.6	HP.7	HP.7.1	HP.7.2	HP.7.3	HP.7.9	HP.8	HP.9	
Inpatient care																							
Curative and rehabilitative care	HC.1.1; 2.1	12,661	11,469	-	23	1,142	-	-	-	-	-	-	0	-	-	-	-	-	-	-	27	-	
Long-term nursing care	HC.3.1	37	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	37	-	
Services of day-care																							
Curative and rehabilitative care	HC.1.2; 2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Outpatient care																							
Outpatient curative and rehabilitative care	HC.1.3; 2.3	10,260	2,757	7	7,364	7,008	242	-	-	113	-	-	-	-	0	-	-	-	-	-	84	49	
General curative care	HC.1.3.1	9,759	2,558	7	7,121	7,008	-	-	-	113	-	-	-	-	-	-	-	-	-	-	24	49	
Outpatient dental care	HC.1.3.2	443	198	0	242	-	242	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	
All other specialised health care	HC.1.3.3	7	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-	7	-	
Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Home care																							
Curative and rehabilitative care	HC.1.4; 2.4	30	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-	8	22	
Long-term nursing care	HC.3.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Ancillary services to health care	HC.4	2,020	408	0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0	-	
Medical goods	HC.5	11,571	2,287	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	30	-	
Pharmaceut. and other medical non-durables	HC.5.1	9,375	2,287	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13	-	
Therap. appliances and other med durables	HC.5.2	2,196	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	17	-	
Total expenditure on personal health care		36,580	16,921	31	8,506	8,151	242	-	113	-	1,612	9,253	6,729	2,523	0	-	-	-	-	-	160	98	
Preventive care	HC.6	2,619	1	0	689	-	-	-	-	689	0	-	-	-	-	-	-	-	-	-	623	2	
Health system and financing administration	HC.7	1,868	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	34	-	
Total current expenditure on health care			41,067	16,922	31	9,195	8,151	242	-	802	-	1,612	9,253	6,729	2,523	1,303	1,834	1,707	-	127	-	817	100

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

Notes

1. Zero values represent decimal points.
2. "—" represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B3. Current expenditure on health by function of care and provider industry (Rs. million), 2010

			Health care provider industry (SHA 2011)										Rest of the world									
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.4 (a)	HP.5	HP.5.1	HP.5.2-5.9	HP.6	HP.7	HP.7.1	HP.7.2	HP.7.3	HP.7.9	HP.8	HP.9
Health care by function																						
Inpatient care																						
Curative and rehabilitative care	HC.1.1;2.1	62,305	55,028	115	7,150	-	-	-	-	-	0	-	-	-	-	-	-	-	-	-	12	-
Long-term nursing care	HC.3.1	112	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	112	-	-
Services of day-care																						
Curative and rehabilitative care	HC.1.2;2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Outpatient care																						
Outpatient curative and rehabilitative care	HC.1.3;2.3	35,389	15,133	35	19,933	18,300	1,342	-	-	290	-	-	-	-	0	-	-	-	-	251	36	-
General curative care	HC.1.3.1	32,988	14,256	34	18,590	18,300	-	-	-	290	-	-	-	-	-	-	-	-	-	72	36	-
Outpatient dental care	HC.1.3.2	2,226	877	2	1,342	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	-
All other specialised health care	HC.1.3.3	20	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	20	-	-
Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Home care																						
Curative and rehabilitative care	HC.1.4;2.4	78	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	24	54	-
Long-term nursing care	HC.3.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ancillary services to health care																						
Medical goods	HC.4	15,095	2,382	1	-	-	-	-	-	-	12,690	-	-	-	23	-	-	-	-	-	-	-
Pharmaceutical and other medical non-durables	HC.5	45,384	6,513	3	-	-	-	-	-	-	38,786	31,182	7,604	-	-	-	-	-	-	82	-	-
Therapeutic appliances and other med. durables	HC.5.1	38,549	6,513	3	-	-	-	-	-	-	32,004	31,182	822	-	-	-	-	-	-	29	-	-
Total expenditure on personal health care																						
Preventive care	HC.6	10,289	7	0	3,248	-	-	-	-	290	-	0	-	-	-	-	28	-	-	1,819	957	-
Health system and financing administration	HC.7	4,940	-	-	-	-	-	-	-	-	-	-	-	-	0	4,563	3,818	-	745	-	360	17
Total current expenditure on health care											12,690	38,786	31,182	7,604	4,253	4,591	3,846	-	745	-	2,648	1,076

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B4. Current expenditure on health by function of care and provider industry (Rs. million), 2016

Health care by function	ICHA-HC code (SHA 2011)	Total Current health expenditure	Health care provider industry (SHA 2011)																					
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.4 (a)	HP.5	HP.5.1	HP.5.2-5.9	HP.6	HP.7	HP.7.1	HP.7.2	HP.7.3	HP.7.9	HP.8	HP.9		
Inpatient care																								
Curative and rehabilitative care	HC.1.1; 2.1	141,672	125,459	-	272	15,932	-	15,932	-	-	0	-	-	-	-	-	-	-	-	-	7	-		
Long-term nursing care	HC.3.1	140	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	140	-		
Services of day-care																								
Curative and rehabilitative care	HC.1.2; 2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Outpatient care																								
Outpatient curative and rehabilitative care	HC.1.3; 2.3	68,903	33,235	71	35,230	30,696	4,071	-	-	463	-	-	-	-	-	-	35	-	-	-	-	-		
General curative care	HC.1.3.1	62,713	31,345	67	31,159	30,696	-	-	-	463	-	-	-	-	-	-	35	-	-	-	-	-		
Outpatient dental care	HC.1.3.2	5,971	1,891	4	4,071	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	-		
All other specialised health care	HC.1.3.3	25	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Home care																	0	-	-	-	-	30		
Curative and rehabilitative care	HC.1.4; 2.4	31	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Long-term nursing care	HC.3.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Ancillary services to health care	HC.4	26,368	5,639	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
Medical goods	HC.5	81,253	17,982	19	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	259		
Pharmaceut. and other medical non-durables	HC.5.1	65,716	17,992	19	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	191		
Therap. appliances and other med. durables	HC.5.2	15,536	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	68		
Total expenditure on personal health care	318,367	182,326	364	51,162	46,629	4,071	-	463	-	20,728	62,982	45,843	17,139	35	-	-	-	-	-	-	745	24		
Preventive care	HC.6	17,804	43	0	6,590	-	-	6,590	-	0	-	-	-	-	-	-	8,659	49	49	-	-	2,278		
Health system and financing administration	HC.7	12,464	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9,764	8,098	-	1,667	-	2,480		
Total current expenditure on health care				348,634	182,369	364	57,752	46,629	4,071	-	7,053	-	20,728	62,982	45,843	17,139	8,694	9,814	8,147	-	1,667	-	5,504	427

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B5. Current expenditure on health by function of care and provider industry (Rs. million), 2017

		Health care provider industry (SHA 2011)									Rest of the world												
		HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.4 ^(a)	HP.5	HP.5.1	HP.5.2-5.9	HP.6	HP.7	HP.7.1	HP.7.2	HP.7.3	HP.7.9	HP.8	HP.9		
		Total Current health expenditure									Other administration agencies												
Health care by function		Pharmacies	Retail sale and other providers of ancillary services	Providers of preventive care	Providers of health administration and financing	Government health administration agencies	Social health insurance agencies	Private health insurance administration agencies	Other administration agencies	All other sales of medical goods	Health care provider industry (SHA 2011)												
Inpatient care		Curative and rehabilitative care	HC.1.1;2.1	154,473	136,355	270	17,847	17,847	0	-	-	-	-	-	-	-	-	-	-	-	-	-	
Long-term nursing care		HC.3.1	146	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	146	-	
Services of day-care		Curative and rehabilitative care	HC.1.2;2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Long-term nursing care		HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Outpatient care		Outpatient curative and rehabilitative care	HC.1.3;2.3	72,405	35,030	76	36,887	32,536	3,872	-	480	-	-	-	-	71	-	-	-	-	328	13	
General curative care		HC.1.3.1	66,259	32,984	72	33,015	32,536	-	-	-	480	-	-	-	-	71	-	-	-	-	94	13	
Outpatient dental care		HC.1.3.2	5,918	2,035	4	3,872	-	3,872	-	-	-	-	-	-	-	-	-	-	-	-	6	-	
All other specialised health care		HC.1.3.3	26	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	26	-	
Long-term nursing care		HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Home care		Curative and rehabilitative care	HC.1.4;2.4	32	-	-	-	-	-	-	-	-	-	-	-	-	0	-	-	-	-	32	-
Long-term nursing care		HC.3.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Ancillary services to health care		HC.4	27,626	6,439	2	-	-	-	-	-	21,186	-	-	-	-	-	-	-	-	-	-	-	
Medical goods		HC.5	88,152	18,694	14	-	-	-	-	-	69,252	46,053	23,199	0	-	-	-	-	-	-	187	5	
Pharmaceutical and other medical non-durables		HC.5.1	66,578	18,694	14	-	-	-	-	-	47,753	46,053	1,700	-	-	-	-	-	-	-	116	-	
Therap. appliances and other med. durables		HC.5.2	21,575	-	-	-	-	-	-	-	21,499	-	21,499	0	-	-	-	-	-	-	71	5	
Total expenditure on personal health care		342,834	196,517	362	54,734	50,383	3,872	-	480	-	21,186	69,252	46,053	23,199	72	-	-	-	-	-	692	19	
Preventive care		HC.6	18,254	17	0	6,691	-	-	-	6,691	0	-	-	-	-	8,753	118	-	-	-	2,367	307	
Health system and financing administration		HC.7	12,453	-	-	-	-	-	-	-	-	-	-	-	-	10,371	8,540	-	1,831	-	1,919	163	
Total current expenditure on health care		373,541	196,534	362	61,425	50,383	3,872	-	7,171	-	21,186	69,252	46,053	23,199	8,824	10,489	8,658	-	1,831	-	4,979	489	

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B6. Current expenditure on health by function of care and provider industry (Rs. million), 2018

Health care by function	ICHA-HC code (SHA 2011)	Total Curative health expenditure	Health care provider industry (SHA 2011)																				
			HP.1	HP.2	HP.3	HP.3.1	HP.3.2	HP.3.3	HP.3.4	HP.3.5	HP.4 (a)	HP.5	HP.5.1	HP.5.2-5.9	HP.6	HP.7	HP.7.1	HP.7.2	HP.7.3	HP.7.9	HP.8	HP.9	
Inpatient care																							
Curative and rehabilitative care	HC.1.1; 2.1	175,050	154,914	313	19,822	-	19,822	-	-	-	-	0	-	-	-	-	-	-	-	-	-	-	1
Long-term nursing care	HC.3.1	151	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	151
Services of day-care																							
Curative and rehabilitative care	HC.1.2; 2.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.3.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Outpatient care																							
Outpatient curative and rehabilitative care	HC.1.3; 2.3	80,188	39,294	87	40,427	35,527	4,385	-	515	-	-	-	-	-	-	-	24	-	-	-	-	-	-
General curative care	HC.1.3.1	73,286	37,024	83	36,042	35,527	-	515	-	-	-	-	-	-	-	-	23	-	-	-	-	-	-
Outpatient dental care	HC.1.3.2	6,666	2,269	5	4,385	-	4,385	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-
All other specialised health care	HC.1.3.3	28	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Home care																	0	-	-	-	-	-	33
Curative and rehabilitative care	HC.1.4; 2.4	33	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Long-term nursing care	HC.3.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ancillary services to health care	HC.4	30,298	7,288	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Medical goods	HC.5	102,721	21,644	17	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	213
Pharmaceut. and other medical non-durables	HC.5.1	73,507	21,644	17	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	139
Therap. appliances and other med. durables	HC.5.2	29,213	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Total expenditure on personal health care		388,442	223,119	419	60,249	55,349	4,385	-	515	-	23,028	80,846	49,856	-	25	-	-	-	-	-	-	-	738
Preventive care	HC.6	20,355	20	0	7,521	-	-	-	-	7,521	-	0	-	-	-	-	10,010	85	85	-	-	-	2,458
Health system and financing administration	HC.7	14,422	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11,827	9,559	-	2,268	-	2,302
Total current expenditure on health care		423,219	223,139	419	67,770	55,349	4,385	-	8,035	-	23,028	80,846	49,856	30,990	10,034	1,911	9,644	-	2,268	-	-	5,497	575

(a) Ancillary services to health care include provision of laboratory and imaging services, as well as patient transport.

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B7. Current expenditure on health by function of care and provider industry (Rs. million), 2019

(a) And
Notes

1. Zero values represent decimal points.
2. " " represents a zero value

2. ... represents a zero value.
 3. Provisional.

Table B8. Current expenditure on health by provider industry and source of funding (Rs. million), 1990

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Source of funding (SHA 2011)				HF.3	HF.4		
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	
Hospitals	HP.1	3,103	2,623	2,623	0	123	24	99	357
Residential long-term care facilities	HP.2	10	10	10	-	-	-	-	-
Providers of ambulatory health care	HP.3	2,709	334	334	-	188	10	179	2,186
Medical practices	HP.3.1	2,332	-	-	-	188	10	179	2,143
Dental practices	HP.3.2	43	-	-	-	-	-	43	-
Other health care practitioners	HP.3.3	-	-	-	-	-	-	-	-
Ambulatory health care centers	HP.3.4	334	334	334	-	-	-	-	-
Providers of home health care services	HP.3.5	-	-	-	-	-	-	-	-
Providers of ancillary services	HP.4	416	-	-	-	63	-	63	353
Retail sale and other providers of medical goods	HP.5	2,295	0	0	0	95	1	94	2,200
Pharmacies	HP.5.1	1,676	0	0	0	95	1	94	1,581
All other sales of medical goods	HP.5.2-5.9	619	-	-	-	0	0	619	-
Providers of preventive care	HP.6	608	608	608	-	-	-	-	-
Providers of health care system administration and financing	HP.7	670	601	601	-	14	14	3	53
Government health administration agencies	HP.7.1	657	601	601	-	-	-	3	53
Social health insurance agencies	HP.7.2	-	-	-	-	-	-	-	-
Private health insurance administration agencies	HP.7.3	14	-	-	-	14	14	-	-
Other administration agencies	HP.7.4	-	-	-	-	-	-	-	-
Rest of the economy	HP.8	130	10	10	-	120	-	-	-
Private households	HP.8.1	130	10	10	-	120	-	-	-
All other secondary producers	HP.8.2	-	-	-	-	-	-	-	-
Rest of the world	HP.9	69	8	8	-	-	-	61	61
Total current expenditure on health care		10,010	4,194	4,194	0	603	48	120	435
									5,099
									114

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B9. Current expenditure on health by provider industry and source of funding (Rs. million), 2000

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Source of funding (SHA 2011)				HF.3	HF.4					
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3	HF.4		
Total current expenditure on health		16,922	13,872	13,733	79	771	398	-	373	2,279		
Government schemes and compulsory contributions to health care financing		31	31	-	-	-	-	-	-	-		
Compulsory contributions to health care financing		9,195	834	802	32	792	161	-	632	7,569		
Government schemes		8,151	32	-	32	792	161	-	632	7,326		
Government contribution to voluntary health care pay-out		242	-	-	-	-	-	-	-	242		
Voluntary health insurance schemes		HP.1	13,872	13,733	79	771	398	-	373	2,279		
NPISs financing schemes		HP.2	31	31	-	-	-	-	-	-		
Voluntary health insurance schemes		HP.3	834	802	32	792	161	-	632	7,569		
Enterprise financing schemes		HP.3.1	32	-	32	792	161	-	632	7,326		
Health insurance contribution schemes		HP.3.2	-	-	-	-	-	-	-	-		
Other health care practitioners		HP.3.3	-	-	-	-	-	-	-	-		
Ambulatory health care centers		HP.3.4	802	802	802	-	-	-	-	1		
Providers of home health care services		HP.3.5	-	-	-	-	-	-	-	-		
Providers of ancillary services		HP.4	1,612	22	1	22	226	-	226	1,364		
Retail sale and other providers of medical goods		HP.5	9,253	83	-	83	345	6	339	8,825		
Pharmacies		HP.5.1	6,729	33	-	33	345	6	339	6,351		
All other sales of medical goods		HP.5.2-5.9	2,523	50	-	50	0	0	-	2,474		
Providers of preventive care		HP.6	1,303	1,269	1,269	-	-	-	-	-		
Providers of health care system administration and financing		HP.7	1,834	1,728	1,702	26	127	127	-	(21)		
Government health administration agencies		HP.7.1	1,707	1,702	-	-	-	-	-	5		
Social health insurance agencies		HP.7.2	-	-	-	-	-	-	-	-		
Private health insurance administration agencies		HP.7.3	127	26	-	26	127	127	-	(26)		
Other administration agencies		HP.7.4	-	-	-	-	-	-	-	-		
Rest of the economy		HP.8	817	64	64	-	753	-	-	-		
Private households		HP.8.1	817	64	64	-	753	-	-	-		
All other secondary producers		HP.8.2	-	-	-	-	-	-	-	-		
Rest of the world		HP.9	100	34	34	-	-	-	-	67		
Total current expenditure on health care			41,067	17,936	17,694	242	3,015	691	753	1,570	20,016	101

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B10. Current expenditure on health by provider industry and source of funding (Rs. million), 2010

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Total current expenditure on health	Source of funding (SHA 2011)					HF.3	HF.4	
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2		
Hospitals	HP.1	79,064	61,025	60,824	201	4,627	2,881	-	1,746	13,407
Residential long-term care facilities	HP.2	154	154	154	-	-	-	-	-	5
Providers of ambulatory health care	HP.3	30,331	3,549	3,369	179	4,029	1,161	-	2,868	22,586
Medical practices	HP.3.1	25,450	179	-	179	4,028	1,161	-	2,868	21,242
Dental practices	HP.3.2	1,342	-	-	-	-	-	-	1,342	-
Other health care practitioners	HP.3.3	-	-	-	-	-	-	-	-	-
Ambulatory health care centers	HP.3.4	3,538	3,369	3,369	-	-	-	-	-	2
Providers of home health care services	HP.3.5	-	-	-	-	-	-	-	-	167
Providers of ancillary services	HP.4	12,690	120	0	120	1,057	-	-	1,057	-
Retail sale and other providers of medical goods	HP.5	38,786	369	-	369	1,627	41	-	1,586	36,790
Pharmacies	HP.5.1	31,182	182	-	182	1,627	41	-	1,586	29,373
All other sales of medical goods	HP.5.2-5.9	7,604	187	-	187	0	0	-	7,417	-
Providers of preventive care	HP.6	4,253	4,139	4,139	-	-	-	-	0	114
Providers of health care system administration and financing	HP.7	4,591	3,797	3,683	115	745	745	-	(12)	61
Government health administration agencies	HP.7.1	3,846	3,683	3,683	-	-	-	-	102	61
Social health insurance agencies	HP.7.2	-	-	-	-	-	-	-	(115)	-
Private health insurance administration agencies	HP.7.3	745	115	-	115	745	745	-	-	-
Other administration agencies	HP.7.4	-	-	-	-	-	-	-	-	-
Rest of the economy	HP.8	2,648	391	391	-	2,249	-	2,249	-	8
Private households	HP.8.1	2,648	391	391	-	2,249	-	2,249	-	8
All other secondary producers	HP.8.2	-	-	-	-	-	-	-	-	-
Rest of the world	HP.9	1,076	19	19	-	-	-	-	-	1,057
Total current expenditure on health care		173,592	73,562	72,579	983	14,334	4,829	2,249	7,256	84,284
										1,411

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B11. Current expenditure on health by provider industry and source of funding (Rs. million), 2016

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Source of funding (SHA 2011)				Household out-of-pocket payment	Enterprises financing schemes	NPISHs financing schemes	Voluntary health insurance schemes	Compulsory contributionary health care financing schemes	Government schemes and compulsory contributionary health care financing schemes	Total current expenditure on health	HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3	HF.4	
		HF.2	HF.2.1	HF.2.2	HF.2.3																	
Hospitals	HP.1	182,369	142,264	141,832	401	10,389	6,886	-	-	-	-	3,504	29,666	50	-	-	-	-	-	-	-	
Residential long-term care facilities	HP.2	364	364	364	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Providers of ambulatory health care	HP.3	57,752	7,369	7,051	318	8,134	2,775	-	-	-	-	5,360	42,249	-	-	-	-	-	-	-	-	-
Medical practices	HP.3.1	46,629	318	-	318	8,134	2,775	-	-	-	-	5,360	38,176	-	-	-	-	-	-	-	-	-
Dental practices	HP.3.2	4,071	-	-	-	-	-	-	-	-	-	-	-	4,071	-	-	-	-	-	-	-	-
Other health care practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ambulatory health care centers	HP.3.4	7,053	7,051	7,051	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Providers of home health care services	HP.3.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
HP.4	20,728	212	0	212	1,942	-	-	-	-	-	-	1,942	18,574	-	-	-	-	-	-	-	-	-
Retail sale and other providers of medical goods	HP.5	62,982	633	-	633	3,012	99	-	-	-	-	2,913	59,337	-	-	-	-	-	-	-	-	-
Pharmacies	HP.5.1	45,843	322	-	322	3,011	98	-	-	-	-	2,913	42,510	-	-	-	-	-	-	-	-	-
All other sales of medical goods	HP.5.2-5.9	17,139	311	-	311	1	1	-	-	-	-	-	16,827	-	-	-	-	-	-	-	-	-
Providers of ancillary services	HP.6	8,694	8,429	8,429	-	-	-	-	-	-	-	-	0	266	-	-	-	-	-	-	(35)	-
HP.7	9,814	8,182	8,038	8,038	144	1,667	1,667	-	-	-	-	-	108	-	-	-	-	-	-	-	-	-
Providers of preventive care	HP.7.1	8,147	8,038	8,038	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Social health insurance agencies	HP.7.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Private health insurance administration agencies	HP.7.3	1,667	144	-	-	144	1,667	-	-	-	-	-	-	(144)	-	-	-	-	-	-	-	-
Other administration agencies	HP.7.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Rest of the economy	HP.8	5,504	2,675	2,675	-	-	2,675	-	-	-	-	2,675	2,829	-	-	-	-	-	-	-	-	-
Private households	HP.8.1	5,504	2,675	-	-	-	2,675	-	-	-	-	2,675	2,829	-	-	-	-	-	-	-	-	-
All other secondary producers	HP.8.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Rest of the world	HP.9	427	12	12	-	-	-	-	-	-	-	-	-	415	-	-	-	-	-	-	-	-
Total current expenditure on health care		348,634	170,140	168,431	-1,709	27,973	11,426	2,829	13,718	149,790	149,790	731	731									

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B12. Current expenditure on health by provider industry and source of funding (Rs. million), 2017

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Total current expenditure on health	Source of funding (SHA 2011)				HF.3	HF.4	
			HF.1	HF.1.1	HF.1.2	HF.2			
Hospitals	HP.1	196,534	150,972	150,503	469	13,404	9,117	-	
Residential long-term care facilities	HP.2	362	362	362	-	-	-	4,287	
Providers of ambulatory health care	HP.3	61,425	7,640	7,169	471	9,587	3,674	-	
Medical practices	HP.3.1	50,383	471	-	471	9,587	3,674	5,913	
Dental practices	HP.3.2	3,872	-	-	-	-	-	44,198	
Other health care practitioners	HP.3.3	-	-	-	-	-	-	40,324	
Ambulatory health care centers	HP.3.4	7,171	7,169	7,169	-	-	-	3,872	
Providers of home health care services	HP.3.5	-	-	-	-	-	-	-	
Providers of ancillary services	HP.4	21,186	315	0	314	2,158	-	2	
Retail sale and other providers of medical goods	HP.5	69,252	937	-	937	3,367	131	18,714	
Pharmacies	HP.5.1	46,053	476	-	476	3,366	130	3,236	
All other sales of medical goods	HP.5.2-5.9	23,199	461	-	461	1	1	42,211	
Providers of preventive care	HP.6	8,824	8,572	-	-	-	-	22,737	
Providers of health care system administration and financing	HP.7	10,489	8,762	8,486	276	1,831	1,831	0	
Government health administration agencies	HP.7.1	8,658	8,486	8,486	-	-	-	(167)	
Social health insurance agencies	HP.7.2	-	-	-	-	-	-	109	
Private health insurance administration agencies	HP.7.3	1,831	276	-	276	1,831	1,831	(276)	
Other administration agencies	HP.7.4	-	-	-	-	-	-	-	
Rest of the economy	HP.8	4,979	2,040	2,040	-	2,939	-	-	
Private households	HP.8.1	4,979	2,040	2,040	-	2,939	-	-	
All other secondary producers	HP.8.2	-	-	-	-	-	-	-	
Rest of the world	HP.9	489	14	14	-	-	-	475	
Total current expenditure on health care		373,541	179,613	177,145	2,467	33,286	14,753	2,939	15,595
									159,826
									816

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B13. Current expenditure on health by provider industry and source of funding (Rs. million), 2018

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Source of funding (SHA 2011)				Household out-of-pocket payment	Enterprises financing schemes	NPISs financing schemes	Voluntary health insurance schemes	Compulsory contributionary health care financing schemes	Government schemes and compulsory contributionary health care financing schemes	Total current expenditure on health	HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3	HF.4		
		HF.2	HF.2.1	HF.2.2	HF.2.3																		
Hospitals	HP.1	223,139	172,746	172,050	696	16,386	11,678	-	-	-	-	4,687	34,020	8	-	-	-	-	-	-	-		
Residential long-term care facilities	HP.2	419	419	419	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Providers of ambulatory health care	HP.3	67,770	8,815	8,033	782	11,075	4,706	-	-	-	-	6,369	47,879	-	-	-	-	-	-	-	-	-	
Medical practices	HP.3.1	55,349	782	-	782	11,075	4,706	-	-	-	-	6,369	43,492	-	-	-	-	-	-	-	-	-	
Dental practices	HP.3.2	4,385	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Other health care practitioners	HP.3.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Ambulatory health care centers	HP.3.4	8,035	8,033	8,033	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Providers of home health care services	HP.3.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
HP.4	23,028	522	0	521	2,326	-	-	-	-	-	-	2,326	20,181	-	-	-	-	-	-	-	-	-	
Retail sale and other providers of medical goods	HP.5	80,846	1,459	-	1,459	3,656	168	-	-	-	-	3,488	75,730	-	-	-	-	-	-	-	-	-	
Pharmacies	HP.5.1	49,856	785	-	785	3,654	166	-	-	-	-	3,488	45,416	-	-	-	-	-	-	-	-	-	
All other sales of medical goods	HP.5.2-5.9	30,990	674	-	674	2	2	-	-	-	-	-	30,314	-	-	-	-	-	-	-	-	-	
Providers of ancillary services	HP.6	10,034	9,537	9,537	-	-	-	-	-	-	-	-	0	497	-	-	-	-	-	-	-	-	
HP.7	11,911	9,970	9,515	-	-	455	2,268	2,268	-	-	-	-	(347)	21	-	-	-	-	-	-	-	-	
Providers of preventive care	HP.7.1	9,644	9,515	9,515	-	-	-	-	-	-	-	-	-	107	21	-	-	-	-	-	-	-	-
Social health insurance agencies	HP.7.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Private health insurance administration agencies	HP.7.3	2,268	455	-	-	455	2,268	2,268	-	-	-	-	-	(455)	-	-	-	-	-	-	-	-	-
Other administration agencies	HP.7.4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Rest of the economy	HP.8	5,497	2,446	2,446	-	3,051	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Private households	HP.8.1	5,497	2,446	2,446	-	3,051	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
All other secondary producers	HP.8.2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Rest of the world	HP.9	575	17	17	-	-	-	-	-	-	-	-	-	558	-	-	-	-	-	-	-	-	-
Total current expenditure on health care		423,219	205,930	202,018	3,913	38,742	18,820	3,051	16,871	177,463	1,084												

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B14. Current expenditure on health by provider industry and source of funding (Rs. million), 2019

Health care goods and services by provider industry	ICHA-HP code (SHA 2011)	Source of funding (SHA 2011)						HF.4
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	
Hospitals	HP.1	263,920	205,367	204,568	799	20,233	14,909	-
Residential long-term care facilities	HP.2	500	500	500	-	-	-	5,323
Providers of ambulatory health care	HP.3	74,300	10,411	9,525	886	13,195	6,008	-
Medical practices	HP.3.1	60,129	886	-	886	13,185	6,008	7,176
Dental practices	HP.3.2	4,644	-	-	-	-	-	50,704
Other health care practitioners	HP.3.3	-	-	-	-	-	-	46,058
Ambulatory health care centers	HP.3.4	9,527	9,525	9,525	-	-	-	4,644
Providers of home health care services	HP.3.5	-	-	-	-	-	-	-
Providers of ancillary services	HP.4	24,583	591	1	591	2,620	-	2
Retail sale and other providers of medical goods	HP.5	92,990	1,650	-	1,650	4,145	214	21,372
Pharmacies	HP.5.1	60,126	891	-	891	4,142	212	87,196
All other sales of medical goods	HP.5.2-5.9	32,884	759	-	759	2	2	3,930
Providers of preventive care	HP.6	11,727	11,297	11,297	-	-	-	55,093
Providers of health care system administration and financing	HP.7	14,355	11,810	11,294	515	2,895	2,895	-
Government health administration agencies	HP.7.1	11,426	11,294	11,294	-	-	-	32,103
Social health insurance agencies	HP.7.2	-	-	-	-	-	-	0
Private health insurance administration agencies	HP.7.3	2,929	515	-	515	2,895	2,895	(368)
Other administration agencies	HP.7.4	-	-	-	-	-	-	430
Rest of the economy	HP.8	6,038	2,906	2,906	-	3,133	-	18
Private households	HP.8.1	6,038	2,906	2,906	-	3,133	-	-
All other secondary producers	HP.8.2	-	-	-	-	-	-	-
Rest of the world	HP.9	504	20	20	-	-	-	-
Total current expenditure on health care		488,918	244,551	240,110	4,441	46,210	24,027	3,133
								19,050
								197,217
								940

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.
3. Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Table B15. Current expenditure on health by function of care and source of funding (Rs. million), 1990

	ICHA-HC code (SHA 2011)	Total current expenditure on health	Source of funding (SHA 2011)				Rest of the world HF.4				
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3	HF.4
Current expenditure on health											
Personal health care services	HC.1-HC.3	5,321	2,537	2,536	0	332	34	21	278	2,452	-
Inpatient services	2,454	2,014	2,013	0	112	31	6	75	328	-	-
Day care services	-	-	-	-	-	-	-	-	-	-	-
Outpatient services	2,866	523	523	-	219	3	13	203	2,124	-	-
Home care services	1	-	-	-	1	-	1	-	-	-	-
Ancillary services to health care	HC.4	553	40	40	0	63	-	-	63	401	50
Medical goods dispensed to out-patients	HC.5	2,527	131	131	0	98	1	3	94	2,244	55
Pharmaceuticals and other medical non-durables	HC.5.1	2,079	131	131	0	95	1	0	94	1,800	53
Therapeutic appliances and other medical durables	HC.5.2	448	-	-	3	0	3	-	444	444	2
Personal health care services and goods	HC.1 - HC.5	8,401	2,708	2,708	0	493	35	23	435	5,096	104
Prevention and public health services	HC.6	1,003	896	896	-	97	-	97	-	-	-
Health administration and health insurance	HC.7	607	590	590	-	14	14	-	-	3	10
Total current expenditure on health care		10,010	4,194	4,194	0	603	48	120	435	5,099	114

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B16. Current expenditure on health by function of care and source of funding (Rs. million), 2000

	ICHA - HC code (SHA 2011)	Total current expenditure on health	Source of funding (SHA 2011)				Household out-of-pocket payment	Rest of the world		
			HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3
Current expenditure on health										
Personal health care services	HC.1-HC.3	22,989	11,959	11,848	111	1,683	559	129	1,005	9,272
Inpatient services	12,699	9,805	9,721	84	871	538	37	-	296	2,023
Day care services	-	-	-	-	-	-	-	-	-	-
Outpatient services	10,260	2,154	2,127	27	814	21	84	709	7,250	42
Home care services	30	0	0	-	8	-	8	-	-	22
Ancillary services to health care	HC.4	2,020	105	83	22	226	-	-	226	1,688
Medical goods dispensed to out-patients	HC.5	11,571	2,133	2,050	83	363	6	17	339	9,075
Pharmaceuticals and other medical non-durables	HC.5.1	9,375	2,083	2,050	33	346	6	1	339	6,946
Therapeutic appliances and other medical durables	HC.5.2	2,196	50	1	50	17	0	17	-	2,129
Personal health care services and goods	HC.1 - HC.5	36,580	14,198	13,982	216	2,282	565	147	1,570	20,036
Prevention and public health services	HC.6	2,619	1,976	1,976	-	606	-	606	-	1
Health administration and health insurance	HC.7	1,868	1,763	1,737	26	127	127	-	-	(21)
Total current expenditure on health care		41,067	17,936	17,694	242	3,015	691	753	1,570	20,016

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B17. Current expenditure on health by function of care and source of funding (Rs. million), 2010

		Source of funding (SHA 2011)				Household out-of-pocket payments	Rest of the world	
		HF.1	HF.1.1	HF.1.2	HF.2			
Current expenditure on health	ICHA-HC code (SHA 2011)	Total current expenditure on health						
Personal health care services	HC.1-HC.3	97,884	56,385	56,005	380	9,042	4,043	387
Inpatient services	HC.4	62,417	46,074	45,816	258	5,637	3,891	112
Day care services	HC.5	-	-	-	-	-	-	-
Outpatient services	HC.6	35,389	10,311	10,190	122	3,382	152	251
Home care services	HC.7	78	0	0	-	24	-	24
Ancillary services to health care	HC.8	15,095	530	410	120	1,057	-	-
Medical goods dispensed to out-patients	HC.9	45,384	5,264	4,895	369	1,679	41	52
Pharmaceuticals and other medical non-durables	HC.10	38,549	5,075	4,893	182	1,628	41	2
Therapeutic appliances and other medical durables	HC.11	6,834	189	2	187	51	0	50
Personal health care services and goods	HC.12	158,362	62,180	61,311	668	11,778	4,084	438
Prevention and public health services	HC.13	10,289	7,253	7,253	-	1,811	-	1,811
Health administration and health insurance	HC.14	4,940	4,130	4,015	115	745	745	-
Total current expenditure on health care		173,592	73,562	72,579	983	14,334	4,829	2,249
							7,256	84,294
								1,411

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B18. Current expenditure on health by function of care and source of funding (Rs. million), 2016

	ICHA-HC code (SHA 2011)	Total current expenditure on health	Source of funding (SHA 2011)				HF.3	HF.4
			HF.1	HF.1.1	HF.1.2	HF.2		
Current expenditure on health								
Personal health care services	HC.1-HC.3	210,746	128,045	128,325	719	19,010	9,660	486
Inpatient services	HC.1	141,812	106,797	106,270	528	12,886	9,297	140
Day care services	HC.2	-	-	-	-	-	-	-
Outpatient services	HC.3	68,903	22,247	22,055	192	6,094	363	316
Home care services	HC.4	31	0	0	-	30	-	30
Ancillary services to health care	HC.4	26,368	1,103	891	212	1,942	-	1,942
Medical goods dispensed to out-patients	HC.5	81,253	14,297	13,664	633	3,077	99	65
Pharmaceuticals and other medical non-durables	HC.5.1	65,716	13,981	13,659	322	3,013	98	2
Therapeutic appliances and other medical durables	HC.5.2	15,536	316	5	311	64	1	63
Personal health care services and goods	HC.1 - HC.5	318,367	144,444	142,880	1,565	24,029	9,759	551
Prevention and public health services	HC.6	17,804	15,082	15,082	-	2,278	-	2,278
Health administration and health insurance	HC.7	12,464	10,613	10,470	144	1,667	1,667	-
Total current expenditure on health care		348,634	170,140	168,431	1,709	27,973	11,426	2,829
							13,718	149,750
								731

Notes

1. Zero values represent decimal points.

2. “” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B19. Current expenditure on health by function of care and source of funding (Rs. million), 2017

	ICHA-HC code (SHA 2011)	Source of funding (SHA 2011)				HF.3	HF.4
		HF.1	HF.1.1	HF.1.2	HF.2		
Current expenditure on health							
Personal health care services	HC.1-HC.3	227,055	137,685	136,744	940	23,497	10,201
Inpatient services	HC.4	154,619	113,614	112,932	662	16,688	4,213
Day care services	HC.5	-	-	-	-	-	-
Outpatient services	HC.6	72,405	24,071	23,792	278	6,797	4,442
Home care services	HC.7	32	0	0	-	32	-
Ancillary services to health care	HC.8	27,626	1,273	959	314	2,158	2,158
Medical goods dispensed to out-patients	HC.9	88,152	14,696	13,759	937	3,435	3,236
Pharmaceuticals and other medical non-durables	HC.10	66,578	14,230	13,753	476	3,368	3,236
Therapeutic appliances and other medical durables	HC.11	21,575	466	5	461	67	66
Personal health care services and goods	HC.12	342,834	153,654	151,462	2,192	29,089	15,595
Prevention and public health services	HC.13	18,254	15,333	15,333	-	2,366	-
Health administration and health insurance	HC.14	12,453	10,626	10,350	276	1,831	1,831
Total current expenditure on health care		373,541	179,613	177,145	2,467	33,296	15,595
							159,826
							816

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B20. Current expenditure on health by function of care and source of funding (Rs. million), 2018

		Source of funding (SHA 2011)						Rest of the world		
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3	HF.4
Current expenditure on health										
ICHA-HC code (SHA 2011)										
Personal health care services	HC.1 - HC.3	255,423	157,588	156,111	1,478	27,966	16,385	525	11,057	69,837
Inpatient services	HC.5,1	175,202	130,322	129,303	1,019	20,532	15,769	151	4,612	24,348
Day care services	HC.5,2	-	-	-	-	-	-	-	-	-
Outpatient services	HC.5,3	80,188	27,267	26,808	459	7,401	616	340	6,445	45,489
Home care services	HC.5,4	33	0	0	-	33	-	33	-	32
Ancillary services to health care	HC.4	30,298	1,588	1,067	521	2,326	-	-	2,326	26,384
Medical goods dispensed to out-patients	HC.5	102,721	17,406	15,947	1,459	3,726	168	70	3,488	81,587
Pharmaceuticals and other medical non-durables	HC.5,1	73,507	16,726	15,941	785	3,667	166	2	3,488	53,125
Therapeutic appliances and other medical durables	HC.5,2	29,213	680	6	674	70	2	68	-	28,462
Personal health care services and goods	HC.1 - HC.5	388,442	176,583	173,125	3,458	34,018	16,552	595	16,871	177,808
Prevention and public health services	HC.6	20,355	17,140	17,140	-	-	-	-	-	33
Health administration and health insurance	HC.7	14,422	12,208	11,753	455	2,456	-	2,456	-	757
Total current expenditure on health care		423,219	205,930	202,018	3,913	38,742	18,820	3,051	16,871	177,463
										1,084

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B21. Current expenditure on health by function of care and source of funding (Rs. million), 2019

	ICHA-HC code (SHA 2011)	Source of funding (SHA 2011)				Household out-of-pocket payments	Rest of the world			
		HF.1	HF.1.1	HF.1.2	HF.2	HF.2.1	HF.2.2	HF.2.3	HF.3	HF.4
Current expenditure on health										
Personal health care services	HC.1 - HC.3	296,904	187,270	185,585	1,685	33,956	20,918	559	12,500	75,651
Inpatient services	HC.4	207,413	154,971	153,806	1,165	25,519	20,131	155	5,232	26,924
Day care services	HC.5	-	-	-	-	-	-	-	-	-
Outpatient services	HC.6	89,487	32,299	31,778	520	8,403	786	349	7,267	48,727
Home care services	HC.7	34	0	0	-	34	-	34	-	-
Ancillary services to health care	HC.8	32,720	1,853	1,282	591	2,620	-	-	2,620	28,246
Medical goods dispensed to out-patients	HC.9	118,554	20,650	19,001	1,650	4,217	214	72	3,930	93,685
Pharmaceuticals and other medical non-durables	HC.10	87,573	19,883	18,993	891	4,145	212	2	3,930	63,545
Therapeutic appliances and other medical durables	HC.11	30,981	767	8	759	72	2	70	-	30,141
Personal health care services and goods	HC.12	448,177	209,773	205,848	3,926	40,783	21,132	611	19,050	197,582
Prevention and public health services	HC.13	23,491	20,310	20,310	-	2,522	-	2,522	-	2
Health administration and health insurance	HC.14	17,250	14,468	13,952	515	2,895	2,895	-	(368)	656
Total current expenditure on health care		488,918	244,551	240,110	4,441	46,210	24,027	3,133	19,050	197,217
										940

Notes

1. Zero values represent decimal points.
2. “-” represents a zero value.
3. Provisional.

Source: IHP Sri Lanka Health Accounts Database.

Table B22. Current expenditure on health by source of funding and revenues of financing (Rs. million), 1990

Current expenditure on health	ICHA- HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
			Transfers from government domestic revenue	Transfers distributed by government from foreign origin	Social insurance contributions	Compulsory prepayment (other than social insurance)	Voluntary prepayments to private insurance	Household out-of-pocket payments and other private financing	Direct foreign transfers
Government schemes and compulsory contributory health care financing schemes	HF.1	4,194	4,158	36	0	-	-	-	-
Government schemes	HF.1.1	4,194	4,158	36	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	0	-	-	0	-	-	-	-
Voluntary health care payment schemes	HF.2	603	-	-	-	-	48	555	-
Voluntary health insurance schemes	HF.2.1	48	-	-	-	-	48	-	-
NPISHs financing schemes	HF.2.2	120	-	-	-	-	-	120	-
Enterprises financing schemes	HF.2.3	435	-	-	-	-	-	435	-
Household out-of-pocket payment	HF.3	5,099	-	-	-	-	-	5,099	-
Rest of the world	HF.4	114	-	-	-	-	-	-	114
Total current expenditure on health care		10,010	4,158	36	0	-	48	5,654	114

Notes

1. Zero values represent decimal points.

2. "-" represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B23. Current expenditure on health by source of funding and revenues of financing (Rs. million), 2000

Current expenditure on health	ICHA- HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
			Transfers from government domestic revenue	Transfers distributed by government from foreign origin	Social insurance contributions	Compulsory prepayment (other than social insurance)	Voluntary prepayments to private insurance	Household out-of-pocket payments and other private financing	Direct foreign transfers
Government schemes and compulsory contributory health care financing schemes	HF.1	17,936	17,122	572	242	-	-	-	-
Government schemes	HF.1.1	17,694	17,122	572	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	242	-	-	242	-	-	-	-
Voluntary health care payment schemes	HF.2	3,015	4	-	-	-	691	2,319	-
Voluntary health insurance schemes	HF.2.1	691	-	-	-	-	691	-	-
NPISHs financing schemes	HF.2.2	753	-	-	-	-	-	753	-
Enterprises financing schemes	HF.2.3	1,570	4	-	-	-	-	1,567	-
Household out-of-pocket payment	HF.3	20,016	-	-	-	-	-	20,016	-
Rest of the world	HF.4	101	-	-	-	-	-	-	101
Total current expenditure on health care		41,067	17,126	572	242	-	691	22,335	101

Notes

1. Zero values represent decimal points.

2. "-" represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B24. Current expenditure on health by source of funding and revenues of financing (Rs. million), 2010

Current expenditure on health	ICHA- HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
Government schemes and compulsory contributory health care financing schemes	HF.1	73,562	69,729	2,850	983	-	-	-	-
Government schemes	HF.1.1	72,579	69,729	2,850	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	983	-	-	983	-	-	-	-
Voluntary health care payment schemes	HF.2	14,334	17	-	-	-	4,829	9,488	-
Voluntary health insurance schemes	HF.2.1	4,829	-	-	-	-	4,829	-	-
NPISHs financing schemes	HF.2.2	2,249	-	-	-	-	-	2,249	-
Enterprises financing schemes	HF.2.3	7,256	17	-	-	-	-	7,239	-
Household out-of-pocket payment	HF.3	84,284	-	-	-	-	-	84,284	-
Rest of the world	HF.4	1,411	-	-	-	-	-	-	1,411
Total current expenditure on health care		173,592	69,746	2,850	983	-	4,829	93,772	1,411

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B25. Current expenditure on health by source of funding and revenues of financing (Rs. million), 2016

Current expenditure on health	ICHA- HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
Government schemes and compulsory contributory health care financing schemes	HF.1	170,140	164,857	3,575	1,709	-	-	-	-
Government schemes	HF.1.1	168,431	164,857	3,575	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	1,709	-	-	1,709	-	-	-	-
Voluntary health care payment schemes	HF.2	27,973	417	-	-	-	11,426	16,130	-
Voluntary health insurance schemes	HF.2.1	11,426	-	-	-	-	11,426	-	-
NPISHs financing schemes	HF.2.2	2,829	-	-	-	-	-	2,829	-
Enterprises financing schemes	HF.2.3	13,718	417	-	-	-	-	13,301	-
Household out-of-pocket payment	HF.3	149,790	-	-	-	-	-	149,790	-
Rest of the world	HF.4	731	-	-	-	-	-	-	731
Total current expenditure on health care		348,634	165,273	3,575	1,709	-	11,426	165,920	731

Notes

1. Zero values represent decimal points.

2. “-” represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B26. Current expenditure on health by source of funding and revenues of financing (Rs. million), 2017

Current expenditure on health	ICHA- HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
Transfers from government domestic revenue	Transfers distributed by government from foreign origin	Social insurance contributions	Compulsory prepayment (other than social insurance)	Voluntary prepayments to private insurance	Household out-of-pocket payments and other private financing	Direct foreign transfers			
Government schemes and compulsory contributory health care financing schemes	HF.1	179,613	166,672	10,474	2,467	-	-	-	-
Government schemes	HF.1.1	177,145	166,672	10,474	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	2,467	-	-	2,467	-	-	-	-
Voluntary health care payment schemes	HF.2	33,286	846	-	-	-	14,753	17,688	-
Voluntary health insurance schemes	HF.2.1	14,753	-	-	-	-	14,753	-	-
NPISHs financing schemes	HF.2.2	2,939	-	-	-	-	-	2,939	-
Enterprises financing schemes	HF.2.3	15,595	846	-	-	-	-	14,749	-
Household out-of-pocket payment	HF.3	159,826	-	-	-	-	-	159,826	-
Rest of the world	HF.4	816	-	-	-	-	-	-	816
Total current expenditure on health care		373,541	167,518	10,474	2,467	-	14,753	177,513	816

Notes

1. Zero values represent decimal points.

2. "-" represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B27. Current expenditure on health by source of funding and revenues of financing (Rs. million), 2018

Current expenditure on health	ICHA- HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
Transfers from government domestic revenue	Transfers distributed by government from foreign origin	Social insurance contributions	Compulsory prepayment (other than social insurance)	Voluntary prepayments to private insurance	Household out-of-pocket payments and other private financing	Direct foreign transfers			
Government schemes and compulsory contributory health care financing schemes	HF.1	205,930	197,569	4,807	3,554	-	-	-	-
Government schemes	HF.1.1	202,018	197,210	4,807	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	3,913	359	-	3,554	-	-	-	-
Voluntary health care payment schemes	HF.2	38,742	979	-	-	-	18,820	18,942	-
Voluntary health insurance schemes	HF.2.1	18,820	-	-	-	-	18,820	-	-
NPISHs financing schemes	HF.2.2	3,051	-	-	-	-	-	3,051	-
Enterprises financing schemes	HF.2.3	16,871	979	-	-	-	-	15,891	-
Household out-of-pocket payment	HF.3	177,463	-	-	-	-	-	177,463	-
Rest of the world	HF.4	1,084	-	-	-	-	-	-	1,084
Total current expenditure on health care		423,219	198,548	4,807	3,554	-	18,820	196,405	1,084

Notes

1. Zero values represent decimal points.

2. "-" represents a zero value.

Source: IHP Sri Lanka Health Accounts Database.

Table B28. Current expenditure on health by source of funding and revenues of financing (Rs. million), 2019

Current expenditure on health	ICHA-HF code (SHA 2011)	Total current expenditure on health	Revenues of financing (SHA 2011)						
			FS.1	FS.2	FS.3	FS.4	FS.5	FS.6	FS.7
Government schemes and compulsory contributory health care financing schemes			Transfers from government domestic revenue	Transfers distributed by government from foreign origin	Social insurance contributions	Compulsory prepayment (other than social insurance)	Voluntary prepayments to private insurance	Household out-of-pocket payments and other private financing	Direct foreign transfers
Government schemes	HF.1.1	240,110	235,085	5,025	-	-	-	-	-
Compulsory contributory health insurance schemes	HF.1.2	4,441	426	-	4,015	-	-	-	-
Voluntary health care payment schemes	HF.2	46,210	1,145	-	-	-	24,027	21,038	-
Voluntary health insurance schemes	HF.2.1	24,027	-	-	-	-	24,027	-	-
NPISHs financing schemes	HF.2.2	3,133	-	-	-	-	-	3,133	-
Enterprises financing schemes	HF.2.3	19,050	1,145	-	-	-	-	17,905	-
Household out-of-pocket payment	HF.3	197,217	-	-	-	-	-	197,217	-
Rest of the world	HF.4	940	-	-	-	-	-	-	940
Total current expenditure on health care		488,918	236,657	5,025	4,015	-	24,027	218,254	940

Notes

1. Zero values represent decimal points.

2. "-" represents a zero value.

3. Provisional.

Source: IHP Sri Lanka Health Accounts Database.

13. Glossary

All-island wide personal medical services	Expenditure for programmes providing personal medical services benefiting individuals employed in the armed forces, police or resident in prison institutions. These individuals are not regarded as part of the normal population in each province. Furthermore, it is not practical to make such disaggregation.
Capital formation	The sum of expenditure on fixed assets (e.g. new buildings and equipment with a useful life extending over a number of years).
Current Expenditure	Expenditure incurred by organisations on a recurring basis for the provision of health services, excluding capital expenditure, but including indirect expenditure.
Employer medical benefits	Health expenditure paid for/reimbursed directly by the employer to the employee.
Employees Trust Fund (ETF)	A form of social security for persons in paid employment, where the employer pays 3% of the gross salary to the fund on behalf of the employee, which can be withdrawn by the beneficiaries at retirement or prematurely for specific reasons, including some types of medical expense.
Gross domestic product	A statistic that refers to the total market value of goods and services produced within a given period, after deducting the cost of goods and services used up in the process of production, but before deducting allowances for consumption of fixed capital.
Implicit price deflator	A GDP price deflator that is calculated by dividing its nominal GDP component by the chain volume measure of real GDP.
Inflation	The increase in the price level of goods and services in the economy
Inpatient	Care for a patient who is formally admitted (or ‘hospitalised’) to an institution for treatment and/or care, and stays for a minimum of one night in the hospital or other institution providing in-patient care.
Medical goods dispensed to outpatients	This item comprises medical goods dispensed to outpatients and the services connected to dispensing such as retail trade, fitting, maintaining and renting of medical goods and appliances. Services of public pharmacies, opticians, sanitary shops, and other specialized or non-specialized retail traders are included here. For the most part, this item consists of the retail sale of medicines by pharmacies.
Outpatient	A patient who is not an inpatient (not hospitalized), but instead is cared for elsewhere – as in a doctor’s office, clinic, or day surgery centre. Outpatient care is also called ambulatory care.
Public health	Services that are aimed at protecting and promoting the health of the whole population or specified population subgroups, and/or preventing illness, injury and disability in the whole population or specified population subgroups. Public health services do not include treatment services. In the SLHA, public health services include: maternal and child health programmes, family planning, preventive health programmes, school health services and nutritional activities with a primary health purpose.
Real expenditure	Expenditure expressed in terms, which have been adjusted for inflation. This enables comparisons to be made between expenditure in different years.
System of health accounts (SHA)	A standardized framework for reporting and classifying health expenditure developed by the OECD and endorsed by WHO for the purposes of international reporting by countries.

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- at the aggregate or total level
- as a proportion of gross domestic product
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Institute for Health Policy

72, Park Street, Colombo 2, Sri Lanka.

Tel: +94-11-231-4041/2/3

Fax: +94-11-2314040

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