INTERNATIONAL HEALTH COST COMPARISON REPORT

2022 REPORT

July, 2022
International Federation of Health Plans ("iFHP") and Health Care Cost Institute ("HCCI") are pleased to publish this latest claims cost comparison report, a joint study published every 2 years.

The current report compares international claims cost prices across several inpatient treatments, outpatient treatments and prescribed drugs in 2019. 2019 represents the most complete and recent non-pandemic affected dataset.

The drugs and treatments were chosen for the high cumulative cost they represent for health funds in total claims over the course of one year.

Participating funds provided median costs as paid in actual claims during the year. In jurisdictions where more than one fund participated, the average of their medians is represented. Further information was supplied by iFHP partners to complete the data.

Representing 70 private and statutory health insurers in more than 24 countries on six continents, iFHP supports equitable access to healthcare for all populations across the world and the sustainability of the private and statutory health insurance industry. Its members insure the health of more than 250 million lives.

The mission of HCCI is to get to the heart of the key issues impacting the U.S. health care system — by using the best data to get the best answers. HCCI stands for truth and consensus around the most important trends in health care, particularly those economic issues that are critical to a sustainable, high-performing health system.

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July 2022.
In the following section iFHP and HCCI compared the cost of 15 drugs in 2019 across nine countries. The drugs were chosen for the relative cumulative cost they represent as a proportion of the overall drug expenditure to private health funds. Prices represent the median cost per drug.

The objective of this study is to highlight cost disparities as a basis for further research into the contributing factors to those disparities. The costs are taken from claims data and as such they are influenced by both list price and confidential contractual agreements or rebates.

List prices will be influenced by production and supply chain considerations, and these may differ between countries. List prices may also justifiably differ for ethical reasons, for example to ensure equal access to drugs by high-income, middle-income and low-income countries. Contractual agreements and rebates may be influenced by volumes, and those again may differ between countries and health funds.

While iFHP supports the validity of cost disparities due to the above considerations, some cost disparities may not be so easily explained. In general, higher drug prices tends to prevail where patents and exclusivity apply. While generics and biosimilars exert a deflationary influence over the drug price market, in essence their presence does little to alter the systemic structures that give rise to the big international cost disparities we note. A payers’ power of negotiation is constrained by many factors including regulatory requirements that may cover some, most or nearly all drugs, and the volume of their market and its demographic make-up, amongst others.
Representing a very changed picture from the last iteration of this report, where the USA consistently presented the highest costs for drugs. Generics are changing that reality radically.
These figures represent median costs of Harvoni (Ledipasivir 90mg/Sofosbuvir 400mg) – 1 month supply.*

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs of Herceptin (Trastuzumab) – 450mg injection*.

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs of Enbrel Sureclick 50mg/ml – 4 syringes.*

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs of Descovy (Emtricitabine 200mg / Tenofovir alafenamide 25mg) – 30 pills.*

* Swiss costs are list prices prior to any discount payers may receive.
Drugs

These figures represent median costs of Humalog Kwikpen U-100 (Insulin Lispro 3mL 100 IU) 5 syringes.*

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs of Xarelto (Rivaroxaban 20mg) – 30 pills.*

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs Eliquis (Apixaban 5mg) – 60 pills.*

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These figures represent median costs Eliquis (Apixaban 5mg) – 60 pills.*

* Swiss costs are list prices prior to any discount payers may receive.
Drugs

These figures represent median costs Advair or Serevent Diskus (Salmeterol) – 60 dose powder inhaler.*

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs of Vyvanse or Elvanse (Lisdexamfetamine 40mg) 30 pills.*

* Swiss costs are list prices prior to any discount payers may receive.
These figures represent median costs of Atorvastatin (generic Lipitor 20mg) – 30 pills.*  **

* Swiss costs are list prices prior to any discount payers may receive. Swiss price is not exclusively generic but contains branded pricing too.

** German prices include both the branded and generic drug.
These figures represent median costs of Escitalopram (generic Lexapro 10mg) – 30 pills.*  **

* Swiss costs are list prices prior to any discount payers may receive. Swiss price is not exclusively generic but contains branded pricing too.

** German prices include both the branded and generic drug.
Drugs

Sertraline (generic Zoloft 100mg) - 30 pills

These figures represent median costs of Sertraline (generic Zoloft 100mg) – 30 pills.**

* Swiss costs are list prices prior to any discount payers may receive. Swiss price is not exclusively generic but contains branded pricing too.

** German prices include both the branded and generic drug.
These figures represent median costs of Lisinopril (generic Qbrelis, Zestril or Prinivil 10 mg) – 30 pills.*

* Swiss costs are list prices prior to any discount payers may receive. Swiss price is not exclusively generic but contains branded pricing too.
Inpatient treatments

In the following section iFHP and HCCI compared the median claims cost of nine inpatient treatments in 2019 across several countries worldwide.

There is significant variability in the costs charged across countries. Some of the variability can be explained by variations in the number of days a patient will stay in the hospital.
The picture remains in essence unchanged from our last report, with the USA presenting consistently the highest costs for inpatient treatments.
Inpatient

Definition used: Coronary bypass with cardiac catheterization without, bypass coronary artery, one site to left internal mammary, open approach. Note that the number of hospital days covered by insurers ranges from 18 days to 10 days. These figures represent median costs of this procedure.
Definition used: spinal fusion except cervical without major complication or comorbidity. We did not measure spinal fusion in our previous report. Note that the number of hospital days covered by insurers ranges from 21 days to 4 days. These figures represent median costs of this procedure.
Inpatient

Definition used: Percutaneous cardiovascular procedure with drug-eluting stent without complications with overnight hospital admission, dilation of coronary artery, one site with drug-eluting intraluminal device, percutaneous approach. Note that the number of hospital days covered by insurers ranges from 1 day to 7 days. These figures represent median costs of this procedure.
Definition used: Hip joint replacement without complications, with overnight hospital admission (uni), replacement of right hip joint with ceramic on polyethylene synthetic substitute, uncemented, open approach. Note that the number of hospital days covered by insurers ranges from 14 days to 3 days. These figures represent median costs of this procedure.
Definition used: Knee joint replacement without complications, with overnight hospital admission (uni), replacement of right knee joint with synthetic substitute, cemented, open approach. Note that the number of hospital days covered by insurers ranges from 14 days to 4 days. These figures represent median costs of this procedure.
Definition used: laparoscopic cholecystectomy without common bile duct exploration (c.d.e) without complication or comorbidity, excision of gallbladder, percutaneous endoscopic approach. Note that the number of hospital days covered by insurers ranges from 8 days to 1 day. These figures represent median costs of this procedure.
Definition used: Appendectomy without complications with overnight hospital admission, resection of appendix, percutaneous endoscopic approach inpatient. Note that the number of hospital days covered by insurers ranges from 6 days to 1.5 days. These figures represent median costs of this procedure.
Definition used: Cesarean Section without complications, with overnight hospital admission. Note that the number of hospital days covered by insurers ranges from 7 days to 3 days. These figures represent median costs of this procedure.
Inpatient

Definition used: vaginal delivery without complicating diagnosis. Note that the number of hospital days covered by insurers ranges from 5 days to 3 days. These figures represent median costs of this procedure.
In the following section iFHP and HCCI compared the median cost of ten outpatient treatments in 2019 across several countries worldwide.

The treatments were chosen for the relative cumulative cost they represent as a proportion of the overall treatment costs expensed by private health insurance companies.

The objective of this study is to highlight price disparities internationally. Due to the differences in billing practices, it is not always possible to provide an exact match between what is measured in each claim per country. Where a treatment included additional or fewer constituent parts in a given country, this is indicated in the explanatory note below each graph.
Outpatient/Office Procedures - Percent of US Prices in 2019

The picture shows signs of shifting since our last report, when US costs significantly outstripped other countries' costs in all but one category (cataract). In 2019, US data trends much more towards the middle.
Definition used: Laparoscopy, surgical; repair initial inguinal hernia. The New Zealand price includes 6 weeks’ follow-up. The Greek cost represents some open surgery as well as laparoscopic surgery. In Kazakhstan this surgery is done inpatient, and the cost includes 3-5 days hospital stay. We found no material differences in what was being measured across all other countries. These figures represent median costs of this procedure.
Outpatient/Office

Definition used: Removal of cataract with insertion of lens, with no hospital admission/overnight stay; includes all ancillary services; extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique. The New Zealand cost includes a 6-week follow-up period. We found no material differences in what was being measured across all countries. These figures represent median costs of this procedure.
Definition used: Diagnostic examination and biopsy of large bowel using an endoscope; includes all ancillary services; flexible colonoscopy proximal to splenic flexure with biopsy. The Kazakhstan cost does not include biopsy/polypectomy whereas elsewhere this is included. We found no material differences in what was being measured across all other countries. These figures represent median costs of this procedure.
Definition used: Upper gastrointestinal endoscopy including oesophagus, stomach, and either the duodenum and/or jejunum as appropriate; with biopsy, single or multiple. Some variation in the cost may be due to the treatment location (hospital, specialist’s office, ..). The Kazakhstan cost does not include biopsy/polypectomy. The German cost does not include polypectomy. Elsewhere both are included. We found no material differences in what was being measured across all other countries. These figures represent median costs of this procedure.
Definition used: Mohs micrographic technique, including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and histopathologic preparation including routine stain. The cost in New Zealand includes a 6-week follow-up period. We found no material differences in what was being measured across all other countries. These figures represent median costs of this procedure.
Definition used: MRI scan without contrast of leg joint. We found no material difference to what is included in this data for each country. These figures represent median costs of this procedure.
Definition used: CT of abdomen with contrast | CPT: 74160 - Computed tomography, abdomen, with contrast material. We found no material difference to what is included in this data for each country. These figures represent median costs of this procedure.
Definition used: Excision, benign lesion including margins, except skin tag, trunk, arms or legs. The cost in New Zealand includes a 6 week follow-up period. Some minor variability may be due to what is captured in the data, such as the inclusion or not of anaesthesia. Costs may be influenced by the diameter of the excision or the number of excisions per visit. These figures represent median costs of this procedure.
Definition used: X-ray chest 2 views. We found no material difference to what is included in this data for each country. These figures represent median costs of this procedure.
Definition used: Complete Blood Count, with differential WBC, automated. Includes measuring a blood specimen for levels of hemoglobin (Hgb), hematocrit (Hct), red blood cells (RBC), white blood cells (WBC), and platelets. Also, a differential white blood cell (WBC) count measures the percentages of different types of white blood cells. We found no material difference to what is included in this data for each country. These figures represent median costs of this procedure.