

New study: Average outpatient visit in US approaching \$500

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The average outpatient visit in the United States costs nearly \$500, according to a new scientific study.

In addition, the average inpatient stay had a price tag in 2016 of more than \$22,000. Both of these dollar amounts underscore a common understanding in the health profession: The US exceeds every other nation in total health care costs.

These findings by the Institute for Health Metrics and Evaluation (IHME) at the University of Washington were part of a larger study on funding and services needed for [universal health coverage](#) (UHC) in every country.

"To achieve UHC, [health officials](#) in the government, private, and nonprofit sectors need to expand services to accommodate population growth and aging, as well as expand [insurance coverage](#)," said Professor Marcia R. Weaver of IHME. "Not surprisingly, we found both overutilization and underutilization of services among inpatient and outpatient facilities. More importantly, we identified countries like the Netherlands, Portugal, and Thailand that have the right amount of each."

Between 1990 and 2016, inpatient admissions globally increased by more than two-thirds, while outpatient visits increased by more than half. In countries such as China, Indonesia, Thailand, and Turkey, policies that expanded coverage were associated with increased patient visits and admissions, while in certain sub-Saharan African countries,

most of the increase resulted from population growth.

The study estimates that UHC for all nations, one of the United Nations' Sustainable Development Goals for 2030, would cost \$576 billion and would require a 49% increase in admissions and 27% increase in visits.

"For many countries, expanded coverage could be a source of new jobs," said Weaver.

"The study reveals some of the remaining challenges in determining a UHC standard for utilization and the costs of reaching this standard," according to a commentary by Dr. Simon Wieser and Dr. Klaus Eichler of the Winterthur Institute of Health Economics at the Zurich University of Applied Sciences. "The quality of health care services is likely to differ substantially between countries, and inefficiencies in current [health](#) care systems should be considered when calculating UHC costs."

Both the study and commentary were published in *The Lancet Public Health* on December 12, proclaimed by the UN as "Universal Health Coverage Day."

Provided by Institute for Health Metrics and Evaluation

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