

UDC 364.3:61

DOI: 10.25140/2411-5215-2018-2(14)-109-117

*Olena Panchenko, Olena Bazilinska, Yuliia Krasnianska***MEDICAL INSURANCE IN THE FINANCIAL PROVISION
OF PUBLIC MEDICAL SERVICE***Олена Панченко, Олена Базилінська, Юлія Краснянська***МЕДИЧНЕ СТРАХУВАННЯ В СИСТЕМІ ФІНАНСОВОГО ЗАБЕЗПЕЧЕННЯ
МЕДИЧНОГО ОБСЛУГОВУВАННЯ НАСЕЛЕННЯ***Елена Панченко, Елена Базилинская, Юлия Краснянская***МЕДИЦИНСКОЕ СТРАХОВАНИЕ В СИСТЕМЕ ФИНАНСОВОГО
ОБЕСПЕЧЕНИЯ МЕДИЦИНСКОГО ОБСЛУЖИВАНИЯ НАСЕЛЕНИЯ**

This article reveals the necessity of the development of medical insurance in Ukraine in order to provide citizens with access to high-quality medical care. The features of its financial support are determined on the basis of the current state diagnostics of the healthcare sector, as well as the level of development of the medical insurance services. The prospects of the widespread implementation of medical insurance are analyzed. In addition, the financial indicators of the healthcare sector of the EU member states are presented to predict the potential consequences of accelerating the development of the health insurance market in Ukraine.

Keywords: medical insurance; healthcare; financing of healthcare; insurance premiums; medical insurance programs.

Fig.: 4. Table: 1. References: 26.

У статті розкрито необхідність розвитку медичного страхування в Україні для забезпечення доступу громадян до якісного медичного обслуговування. На основі діагностики сучасного стану сфери охорони здоров'я за основними індикаторними показниками визначено особливості її фінансового забезпечення, а також досліджено рівень розвитку медичних страхових послуг на страховому ринку та проаналізовано перспективи їх широкого впровадження. Крім цього, наведено фінансові показники сфери охорони здоров'я держав-членів ЄС з метою прогнозування потенційних наслідків активізації розвитку ринку медичного страхування в Україні.

Ключові слова: медичне страхування; охорона здоров'я; фінансування сфери охорони здоров'я; страхові внески; медичні страхові програми.

Рис.: 4. Табл.: 1. Бібл.: 26.

В статье раскрывается необходимость развития медицинского страхования в Украине для обеспечения доступа граждан к качественному медицинскому обслуживанию. На основе диагностики современного состояния сферы здравоохранения по основным индикаторным показателям определены особенности ее финансового обеспечения, а также исследован уровень развития медицинских страховых услуг на страховом рынке и проанализированы перспективы их широкого внедрения. Кроме этого, приведены финансовые показатели здравоохранения государств-членов ЕС с целью прогнозирования потенциальных последствий активизации развития рынка медицинского страхования в Украине.

Ключевые слова: медицинское страхование, здравоохранение, финансирование здравоохранения, страховые взносы, медицинские страховые программы.

Рис.: 4. Табл.: 1. Библ.: 26.

JEL Classification: I13

Formulation of the problem. The problems of the social welfare system of the nation rises as one of the challenges in the process of integration of Ukraine into the European Union (EU). One of the components of the social welfare system is the healthcare. The availability and quality of healthcare are important indicators of the socio-economic development of the country. However, healthcare provides adequate social welfare of the citizens, only given a sufficient level of financial support. In its modern state, the healthcare system of Ukraine is in an unsatisfactory state, which hinders the processes of integration of Ukraine into the European community.

The economic resources of the healthcare system are limited, which makes it impossible to support normal operation and development of the system. In October 2017, the Verkhovna Rada adopted the Law of Ukraine No. 6327 "On State Financial Guarantees for the Provision of Medical Services and Medicine", which stipulates that in 2018, the structure of payment for medical services will change. Primary (services of the GP), palliative (in the last days of life) and emergency medical services shall be sponsored by the Budget of Ukraine. Services of specialized professionals shall be partly covered by the state budget and partly by the patient, but the ratio between the sources of payment is not specified yet. Dental care, services of a plastic surgeon and treatment without referral by a doctor shall be paid by patients in full.

It is expected that the budget will sponsor the basic package of the healthcare services for the citizens of the country. All other types of healthcare services shall be paid by the citizens. Then, the budget is capable to support only current expenditures, and no funds for sponsoring the renewal of the healthcare sector are expected.

Thus, in the process of reforming the healthcare sector, the problem of the formation of the optimal mechanism for financing the development of the sector is not the only one. Another sizable problem is giving the citizens of the country the opportunity to enjoy paid healthcare services. The solution to these problems may be the more widespread use of public services of voluntary medical insurance, which may be one of the most important sources of financing public healthcare.

It is important to assess the current state of financing of healthcare, understand the state of the market of the medical insurance, as well as study the experience of the leading countries in reforming their respective healthcare systems. A detailed study will allow to create the theoretical and practical foundation for the active implementation of the medical insurance. It will also help to further improve the mechanism of financing the public healthcare by means of the active implementation of the medical insurance.

Overview of recent research and publications. Both domestic and foreign scientists investigate problems of modern models of financing healthcare, as well as the formation and introduction of mechanisms of provision of the medical insurance in Ukraine. Foreign concepts of medical insurance and prospects for their implementation in Ukraine are highlighted in scientific works by Janul I. E. [1], Marchenko O. V. [2], Mnyha M. V. [7] and many other scholars. The state of the healthcare system in Ukraine, its financing and the development of the market of medical insurance services are discussed in the works of Bidnyk N. B., Ilchuk O. O. [3], Marchenko S. K. [4], Bilyk O. I. [5], Boldova A. A. [6], etc.

Selection of previously under researched aspects of the general problem. Despite a large number of scientific works devoted to the mechanisms of financing Ukraine's healthcare, the condition of the healthcare sector remains unsatisfactory. Many aspects of the system are not sufficiently investigated and require further research. In order to identify the main problems, one should have a comprehensive diagnosis of the modern healthcare system in relation to the level of economic support it receives in Ukraine and compare the key indicators with the EU member states. It is important to systemize the experience of the leading countries that have successfully implemented reforms of healthcare, especially with the use of medical insurance.

The aim of the article. The aim of this research is to study the modern system of financial support of healthcare in Ukraine in terms of various economic indicators, compare the system with the data from the members of the EU, and develop practical recommendations for solving the problems of the financial system for supporting the healthcare system of Ukraine, based on the leading European countries, which have well-formed systems of provision of medical insurance.

Content. The comparison of selected indicators of provision of healthcare in Ukraine and the EU member states indicates the poor state of the healthcare system in Ukraine (Table). The life expectancy and mortality rates are inextricably linked to the quality and accessibility of healthcare services, which directly affect the proportion of people who are ill, a causative factor in these indicators. In 2017, when compared the EU member states, Ukraine had the lowest life expectancy and the highest mortality rate.

In 2015, in Ukraine the number of hospital beds per 1,000 people was 7.8. The number of doctors per 1,000 people increased to the value of 4.37. Consequently, Ukraine has a larger number of hospital beds and the density of doctors per 1,000 people than most EU Member States. However, these indicators, although at a high level, do not indicate a satisfactory level of public healthcare.

Asking for medical assistance requires significant for ordinary citizens financial expenses (payment of benefits of operating expenses, purchase of medicine), therefore, people with below average income often refuse to receive specialized medical services and choose self-medication. Healthcare services are of low quality: no organized system for choosing the doc-

tor for admittance of the patient exists, hence one cannot rely on the qualification of a specialist to provide medical services. In addition, medical institutions use outdated medical equipment and methods of treatment.

Table

Indicators of healthcare systems in Ukraine and selected members of EU

Country	Life expectancy in 2017	Mortality rate in 2015	Number of hospital beds (per 1000 people) in 2014	Number of doctors (per 1000 people) in 2014
Ukraine	70	15	7.9	4.35
Finland	80	10	4.5	3.02*
Sweden	82	9	2.5	4.12*
Norway	81	8	3.8	4.43
Denmark	80	9	2.7	3.65*
Germany	81	11	8.2	4.11
Poland	77	10	6.6	2.31
Slovakia	77	10	5.8	3.39*
Czech Republic	78	11	6.5	3.69*
Austria	81	10	7.6	5.05
Hungary	76	13	7.0	3.32
Switzerland	82	8	4.6	4.13
Italy	82	11	3.3	3.88
France	82	9	6.2	3.12
Belgium	80	10	6.2	2.97
Netherlands	81	9	-	2.86
Luxembourg	80	7	4.9	2.86
Spain	82	9	3.0	3.80
Portugal	79	11	3.3	4.43
Bulgaria	75	15	7.1	3.99
Ireland	81	6	2.6	2.81
United Kingdom	81	9	2.7	2.79
Estonia	75	12	5.0	3.31
Latvia	74	14	5.7	3.22
Lithuania	77	14	7.2	4.31
Romania	75	13	6.7	2.70
Slovenia	78	10	4.5	2.77
Greece	81	11	4.2	6.26

Notes: * – the last update of the data by the results of 2013.

Source: compiled by the author on the basis of [8-14].

Starting from 2018, the government of Ukraine plans to improve the quality of medical services by giving the possibility of signing a contract with an independent qualified physician and transformation of the methods of financing the public healthcare. The current material and technical base in hospitals remains obsolete, and medical services do not correspond to modern European standards. The development of the scientific and practical base of the healthcare services and its modernization is impossible due to inadequate financial support.

According to the State Statistics Service of Ukraine, the main sources of financial support for the healthcare sector in Ukraine in 2015 were 1) funds of individuals, business entities and non-profit organizations, which correspond to 50.9 % of the total amount of financing; 2) funds from the state and local budgets, as well as the Social Insurance Fund, 48.7 %; 3) other sources, up to 0.4 % [15].

Consequently, there is a paradoxical situation: the national system of healthcare, which is modelled to be supported by the budget, is increasingly financed by private funds. It leads to the inability of the state, due to the existing level of expenditures for this sector, to provide proper public healthcare services. Military action in the East of Ukraine, worsening economic and political crises led to a reduction in the share of money allocated to the healthcare in the total expenditures of the consolidated budget in recent years (Fig. 1).

Following data from 2016, 16.51 % of the expenditure budget of Ukraine for the healthcare sector came from the State budget, the rest was allocated from local budgets.

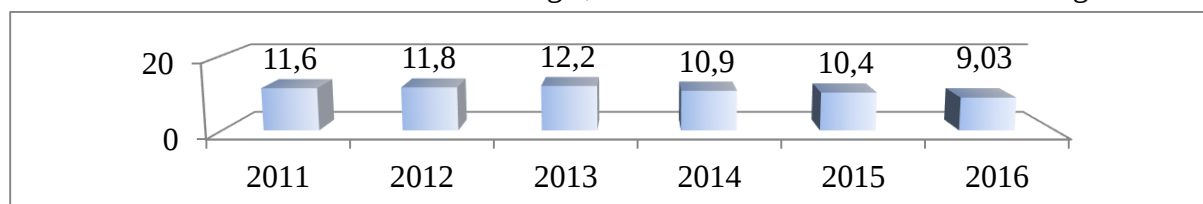


Fig. 1. Dynamics of the share of expenditures for healthcare in the consolidated budget of Ukraine, in %

Source: compiled by the author on the basis of [16].

In 2015, 90.1 % of the total Consolidated Budget expenditures of Ukraine were current expenditures, the largest share of which was directed to the payment to personnel (55.9 %) and the use of goods and services (40.9 %): medical products, payment for utilities and energy carriers, procurement items and inventory, expenses for business trips, etc. Consolidated capital expenditures in the budget account for only 9.9 % of all expenditures [17], indicating a slow recovery of medical institutions, including the introduction of innovative therapies, scientific research, etc. As a result, on the basis of 2014, the share of expenditure on healthcare in Ukraine, as a percentage of GDP, is lower than in the members of the EU (Fig. 2).

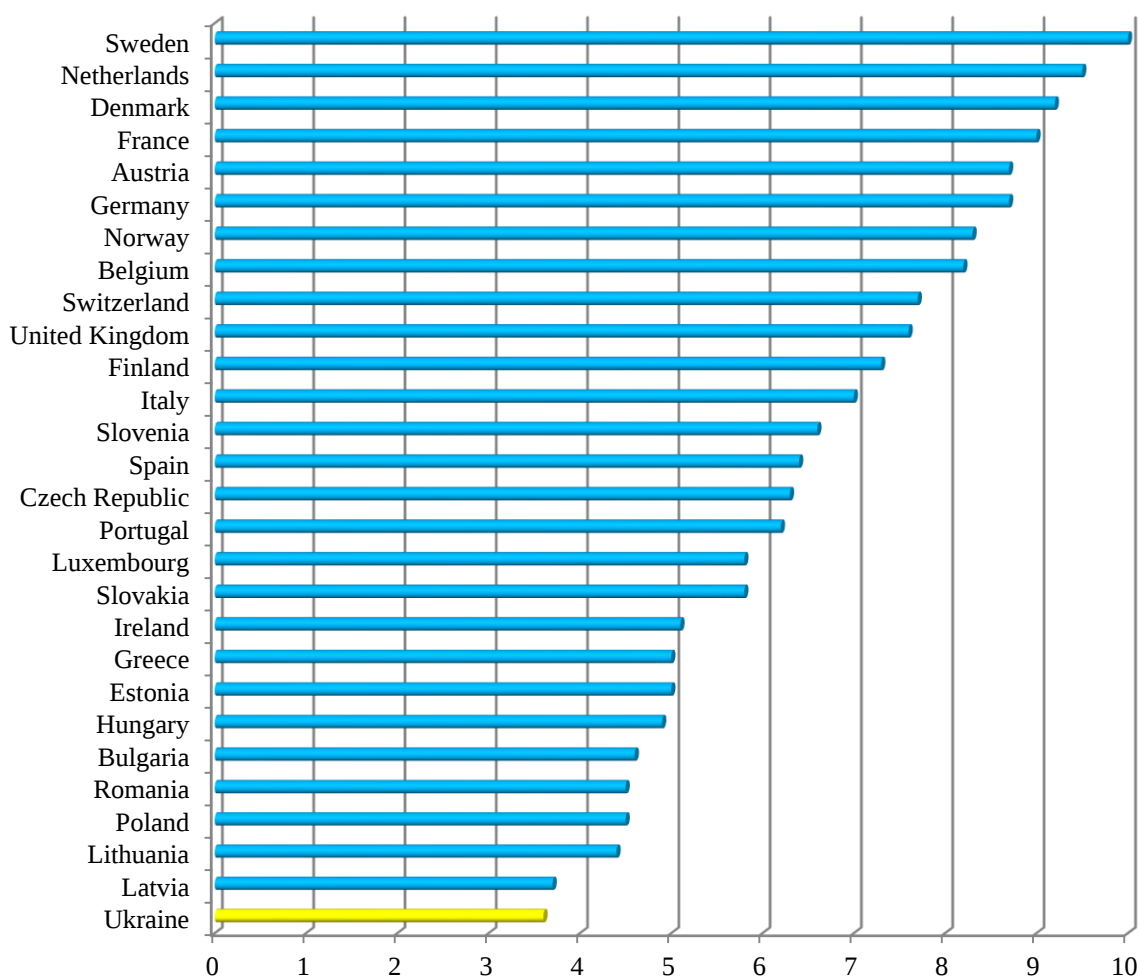


Fig. 2. Public expenditure on healthcare in 2014, in % of GDP

Source: compiled by author on the basis of [18].

The population of Ukraine, a significant proportion of which is not ready to pay higher taxes or health insurance premiums, spends large sums of its income for medical care, but sporadically and unorganized. Based on data from 2015, the average amount of expense of a household was 4,952 UAH, of which healthcare counted for an average amount of 3.7 % of the total amount, which is 183.22 UAH [19].

In current conditions of the healthcare industry, such costs are not documented, so they are labelled as “pocket expenses”. This term is used by the World Bank in the field of healthcare to indicate any direct or indirect personal or in-kind contributions of citizens, which are informal, i.e. “in envelope” fees to doctors and expenses on pharmaceutical suppliers. According to the World Bank, the amount of “pocket expenses” for healthcare costs in the expenditure of an average Ukrainian citizen is higher than in the majority of the members of the EU (Fig. 3).

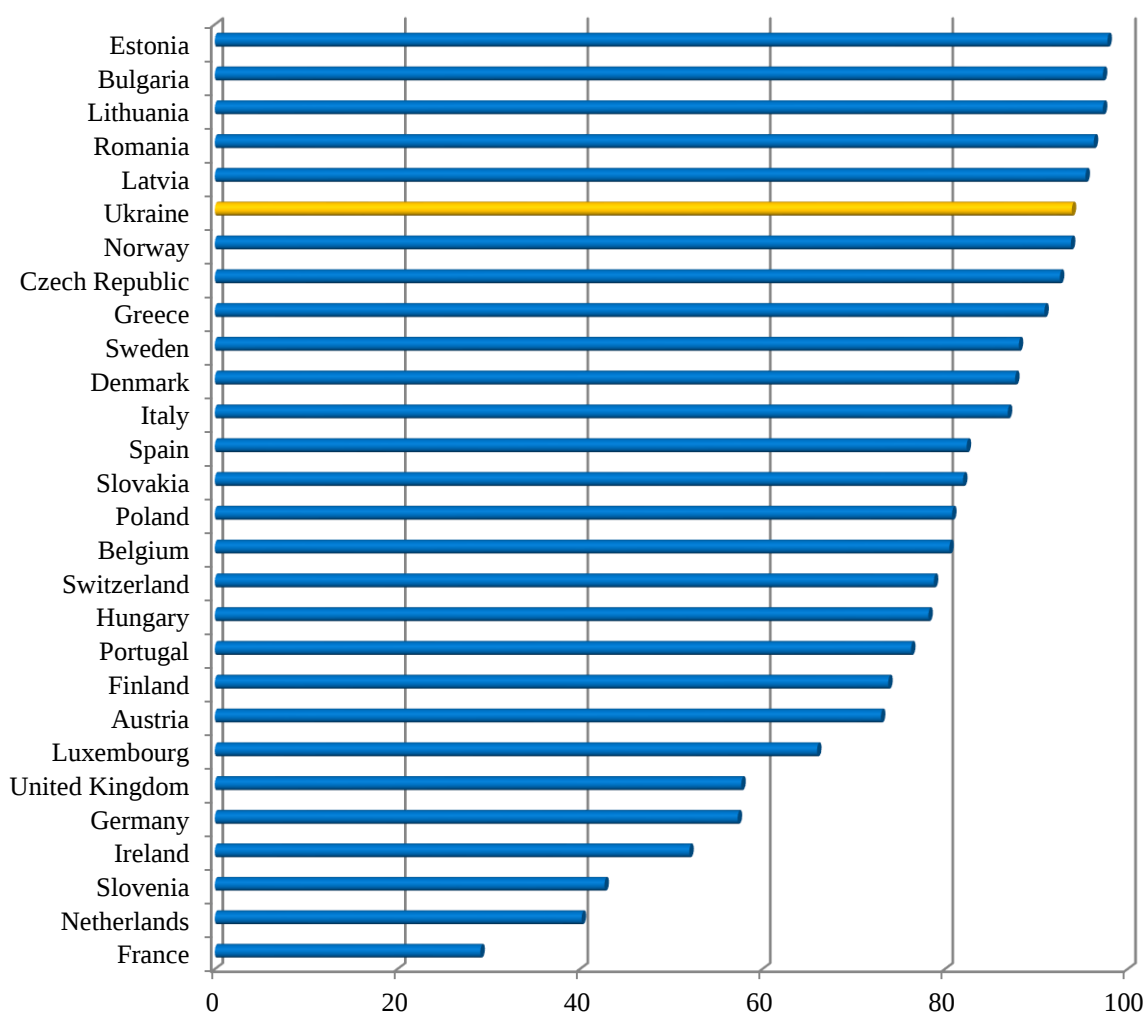


Fig. 3. Amount of “pocket expenses”, as a portion of total spending on healthcare, in %
Source: compiled by the author on the basis of [20].

This situation shows the necessity to transform the mechanisms of financing the healthcare system of Ukraine. A desirable direction for the reform is the introduction of the medical insurance as an important source of funding for the healthcare system.

The market for the medical insurance services in Ukraine today is based only on individual or collective voluntary agreements and develops at a slow pace (Fig. 4).

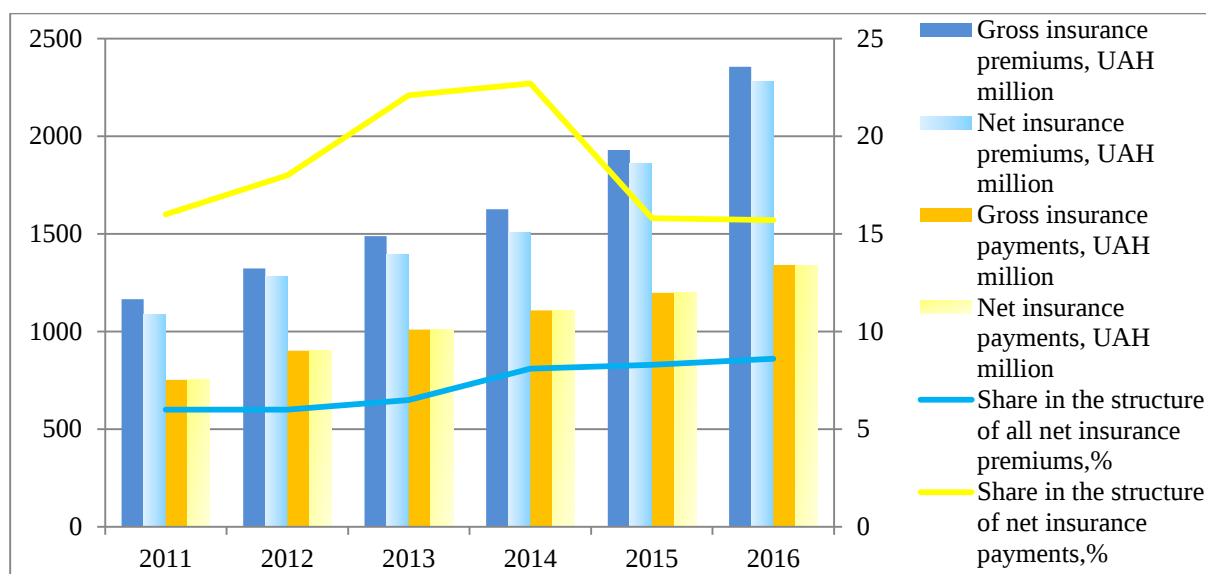


Fig. 4. Indicators of the development of the market of medical insurance

Source: compiled by the author on the basis of [21].

There is a clear tendency to increase gross and net insurance premiums for this type of insurance. The share of net insurance premiums of medical insurance in the total insurance premiums increased slightly during the period, and in 2016 it amounted to 8.6 %. Gross and net insurance premiums for medical insurance became larger as well. However, the share of net insurance premiums of medical insurance in the total payments for all types of insurance in 2014 reached 22.7 %, and in 2016 this figure decreased to 15.7 %. The level of gross insurance premiums for medical insurance was the highest of all types of insurance and amounted to 56.9 %.

According to the results of the first quarter of 2017, the growth of net insurance premiums for medical insurance in comparison with the same period of the previous year was 10.7 %, which indicates a slow tendency of increase of voluntary purchase of medical insurance. The share of net insurance premiums for this type of insurance in the total amount of insurance premiums for all types of insurance was 11.2 %. Net benefits from medical insurance grew faster (increase during the first quarter of 2017 was 25.9 %) than net premiums, which resulted in the increase in the level of net claims for this type of insurance to 57.2 % [21].

Hence, medical insurance is characterized by a high level of payments, which affects the size of insurance rates. Thus, the medical insurance is expensive. For example, the insurance provider PROVIDNA (“ПРОВІДНА”), which during 2016 was at the first place in the rating of insurance companies by the size of bonuses for this type of insurance [22], offers a service Fairytale care (“КАСКОва ТУРБОТА”) that includes a wide coverage, this year costs from 6,250 UAH to 8,620 UAH for one year of coverage.

Special packages also exist: Corporate (“Корпоративна”, for coverage of not fewer than for 5 employees of a firm) with the cost of 1,200–6,000 UAH per year; Care about the collective (“ТУРБОТА про колектив”) with the cost of 600–1,500 UAH per year, etc.

The second-ranking company NAFTAGAZSTRAKH (“НАФТАГАЗСТРАХ”) offers medical insurance with an annual premium of 3,000–16,000 UAH depending on the service. The third-ranking company AXA Insurance works only with corporate clients and determines individual contributions.

The company Unika (“Уніка”) provides three types of health insurance. However, no information in the public domain exists. Some insurance companies included in the top ten list offer specialized coverage, such as “Accident” (“Нещасний випадок”), “Easy Help” (“Легка допомога”), etc.

The company INGO Ukraine (“ІНГО Україна”) offers a social package for 4,680 UAH per year for an adult younger than 60 years of age. The individual approach to clients is offered by the company Rarytet (“Раритет”). The company offers coverage to corporate clients with coverage of at least 3 people; as the number of insured individuals increases, the cost of the premium decreases. The price also depends on how large of a proportion such employees from in relation to the total number of employees, as well as the gender structure of the team.

On the basis of the study of gender distribution in the labor market of Ukraine in 2011 [23] and the distribution of business entities by size [24], the average insurance coverage is 2,829 UAH per year [25]. Moreover, this coverage under the program “Integrated medical care A+C+D” (“Комплексна медична допомога A+C+D”) includes services of a polyclinic with medicines, in-patient care and emergency care.

In connection with an increase of the average wage to 5,887.70 UAH in 2017 and introduction of paid medical services by specialists as a result of the reform of the medical sector, conditions for the expansion of the client base of insurance companies were created. Paid services of specialists, according to preliminary calculations, will cost the population not less than insurance premiums proposed by insurance companies. In addition, because of the increase of the income of population, the use of medical insurance may become more widespread, as evidenced by foreign practice.

Conclusions and suggestions for future work. The conducted studies indicate that the existing healthcare system in Ukraine does not meet current requirements. It needs an immediate reform. The infrastructure indicators do not meet the quality requirements of medical services in a competitive economy, as evidenced by social indicators. The current model of financing the healthcare system of Ukraine is ineffective and inefficient. This situation requires immediate attention, especially during the period of integration of Ukraine into the European Community.

The reform of the healthcare industry would involve the reduction of the «pocket expenses» and legalization of the maximum payment for medical services. The medical insurance may be an important tool to ensure the access of the public to specialized healthcare professionals.

References

1. Yanul, I. Ie. (2011). Medychne strakhuvannia Ukraini: problem ta perspektyvy [Health Insurance in Ukraine: Problems and Prospects]. *Visnyk Kyivskoho natsionalnoho universytetu imeni Tarasa Shevchenka - Bulletin of the Taras Shevchenko National University of Kyiv*, 126, 30–33 [in Ukrainian].
2. Ponomarenko, K. A. & Marchenko, O. V. (2014). Suchasnyi stan ta perspektyvy medychnoho strakhuvannia v Ukraini [Current state and prospects of health insurance in Ukraine]. *Naukovyi visnyk Khersonskoho derzhavnoho universytetu - Scientific Bulletin of Kherson State University*, 5 (1), 326–331 [in Ukrainian].
3. Bidnyk, N. B. & Ilchuk, O. O. (2014). Rozvytok dobrovolnoho medychnoho strakhuvannia v Ukraini [Development of voluntary medical insurance in Ukraine]. *Hlobalni ta natsionalni problemy ekonomiky – Global and national problems of the economy*, 2, 1025–1029 [in Ukrainian].
4. Marchenko, S. K., Lysenko, V. O. (n.d.). Stan, problemy ta perspektyvy rozvytku medychnoho strakhuvannia v Ukraini [Status, problems and prospects for the development of health insurance in Ukraine]. Retrieved from http://www.rusnauka.com/11_NPE_2012/Economics/3_107749.doc.htm.
5. Bilyk, O. I. & Kachmarchyk S. A. (2013). Perevahytanodolikyvvedenniaoboviazkovoiformymedychnohostrakhuvannia v Ukraini [Benefits and drawbacks of the introduction of compulsory medical insurance in Ukraine]. *Visnyk Natsionalnoho universytetu «Lvivska politekhnika». Menedzhment ta pidpriemnytstvo v Ukraini: etapy stanovlennia i problemy rozvytku – Bulletin of the National University «Lviv Polytechnic». Management and Entrepreneurship in Ukraine: Stages of Development and Development Issues*, 767, 270–276 [in Ukrainian].
6. Boldova, A. A. & Moiko, Yu. (2012). Osoblyvosti medychnoho strakhuvannia v Ukraini [Features of Medical Insurance in Ukraine]. *Zbirnyk naukovykh prats Natsionalnoho universytetu derzhavnoi podatkovoi sluzhby Ukrainy – Collection of scientific works of the National University of State Tax Service of Ukraine*, 2, 33–39 [in Ukrainian].

ФІНАНСОВІ РЕСУРСИ: ПРОБЛЕМИ ФОРМУВАННЯ ТА ВИКОРИСТАННЯ

7. Mnykh, M. V. (2006). Medychne strakhuvannia za kordonom ta mozhlyvosti yoho realizatsii v Ukraini [Medical Insurance Abroad and the Possibilities of Its Implementation in Ukraine]. *Derzhava i ekonomika – State and Economics*, 11, 39–41 [in Ukrainian].

8. The World: Life Expectancy (2017). Retrieved from <http://www.geoba.se/population.php?pc=world&type=015&page=3>.

9. Death rate, crude (per 1,000 people). Retrieved from http://data.worldbank.org/indicator/SP.DYN.CDRT.IN?year_high_desc=true.

10. Hospital beds. Retrieved from <http://ec.europa.eu/eurostat/tgm/table.do?tab=table&init=1&language=en&pcode=tps00046&plugin=1>.

11. Zaklady okhorony zdorovia [Healthcare facilities]. Retrieved from <http://www.ukrstat.gov.ua>.

12. PHYSICIANS DENSITY / CENTRAL INTELLIGENCE AGENCY. Retrieved from <https://www.cia.gov/library/publications/the-world-factbook/fields/2226.html>.

13. Medychni kadry [Medical shots]. Retrieved from <http://www.ukrstat.gov.ua>.

14. Practising physicians. Retrieved from <http://ec.europa.eu/eurostat/tgm/table.do?tab=table&init=1&language=en&pcode=tps00044&plugin=1>.

15. NROZ Ukrainy u 2015 rotsi [NRO of Ukraine in 2015]. Retrieved from <http://www.ukrstat.gov.ua>.

16. Biudzhet [Budget]. Retrieved from <http://www.minfin.gov.ua/news/bjudzhet>.

17. Biudzhet Ukrainy 2015 [The 2015 budget of Ukraine]. Retrieved from [http://www.minfin.gov.ua/uploads/redactor/files/Budget%20of%20Ukraine%202015%20\(with%20cover\).pdf](http://www.minfin.gov.ua/uploads/redactor/files/Budget%20of%20Ukraine%202015%20(with%20cover).pdf).

18. Health expenditure, public (% of GDP). Retrieved from <http://data.worldbank.org/indicator/SH.XPD.PUBL.ZS>.

19. Struktura skupnykh vytrat [Structure of Total Expenses]. Retrieved from <http://www.ukrstat.gov.ua>.

20. Out-of-pocket health expenditure (% of private expenditure on health). Retrieved from <http://data.worldbank.org/indicator/SH.XPD.OOPC.ZS>.

21. Informatsiia pro stan i rozvytok strakhovoho rynku v Ukraini [Information on the state and development of the insurance market in Ukraine / National Commission that carries out state regulation in the field of financial services markets]. Retrieved from <https://nfp.gov.ua/content/informaciya-pro-stan-i-rozvitok.html>.

22. Reitynh strakhovykh kompanii po DMS 2016: premii [Rating of insurance companies by LCS 2016: Prizes]. Retrieved from <http://med-insurance.com.ua/ratings/24>.

23. Dopovid «Henderni aspekty rynku pratsi v Ukraini» [Report «Gender Aspects of the Labor Market in Ukraine»]. Retrieved from <http://www.ukrstat.gov.ua>.

24. Pokaznyky strukturnoi statystyky po subiektakh hospodariuvannia z rozpodilom za yikh rozmiramy [Indicators of structural statistics on business entities with distribution by size]. Retrieved from <http://www.ukrstat.gov.ua>.

25. SK «Rarytet» [IC «Rarity»]. Retrieved from <http://raritet.net.ua/complex-acd-2>.

26. Zatverdzheno pokaznyk serednoi zarplaty [Approved indicator of middle profit]. Retrieved from http://www.pfu.gov.ua/pfu/control/uk/publish/article?art_id=253488&cat_id=95535.

References (in language original)

1. Януль І. Є. Медичне страхування в Україні: проблеми та перспективи. *Вісник Київського національного університету імені Тараса Шевченка*. 2011. № 126. С. 30–33.

2. Пономаренко К. А., Марченко О. В. Сучасний стан та перспектив медичного страхування в Україні. *Науковий вісник Херсонського державного університету*. 2014. Вип. 5. Т 1. С. 326–331.

3. Бідник Н. Б., Ільчук О. О. Розвиток добровільного медичного страхування в Україні. *Глобальні та національні проблеми економіки*. 2014. № 2. С. 1025–1029.

4. Марченко С. К., Лисенко В. О. Стан, проблеми та перспективи розвитку медичного страхування в Україні. URL: http://www.rusnauka.com/11_NPE_2012/Economics/3_107749.doc.htm.

5. Білик О. І., Качмарчик С. А. Переваги та недоліки введення обов'язкової форми медичного страхування в Україні. *Вісник Національного університету «Львівська політехніка». Менеджмент та підприємництво в Україні: етапи становлення і проблеми розвитку*. 2013. № 767. С. 270–276.

6. Болдова А. А., Мойко В. Ю.. Особливості медичного страхування в Україні. *Збірник наукових праць Національного університету державної податкової служби України*. 2012. № 2. С. 33–39.

ФІНАНСОВІ РЕСУРСИ: ПРОБЛЕМИ ФОРМУВАННЯ ТА ВИКОРИСТАННЯ

7. Мних М. В. Медичне страхування та необхідність його запровадження в Україні. *Економіка та держава*. 2006. Вип. 11. С. 39–41.
8. The World: Life Expectancy (2017). URL: <http://www.geoba.se/population.php?pc=world&type=015&page=3>.
9. Death rate, crude (per 1,000 people). URL: http://data.worldbank.org/indicator/SP.DYN.CDRT.IN?year_high_desc=true.
10. Hospital beds. URL: <http://ec.europa.eu/eurostat/tgm/table.do?tab=table&init=1&language=en&pcode=tps00046&plugin=1>.
11. Заклади охорони здоров'я [Healthcare facilities]. URL: <http://www.ukrstat.gov.ua>.
12. PHYSICIANS DENSITY / CENTRAL INTELLIGENCE AGENCY. URL: <https://www.cia.gov/library/publications/the-world-factbook/fields/2226.html>.
13. Медичні кадри [Medical shots]. URL: <http://www.ukrstat.gov.ua>.
14. Practising physicians. URL: <http://ec.europa.eu/eurostat/tgm/table.do?tab=table&init=1&language=en&pcode=tps00044&plugin=1>.
15. НРОЗ України у 2015 році. URL: <http://www.ukrstat.gov.ua>.
16. Бюджет [Budget]. URL: <http://www.minfin.gov.ua/news/bjudzhethet>.
17. Бюджет України 2015. URL: [http://www.minfin.gov.ua/uploads/redactor/files/Budget%20of%20Ukraine%202015%20\(with%20cover\).pdf](http://www.minfin.gov.ua/uploads/redactor/files/Budget%20of%20Ukraine%202015%20(with%20cover).pdf).
18. Health expenditure, public (% of GDP). URL: <http://data.worldbank.org/indicator/SH.XPD.PUBL.ZS>.
19. Структура сукупних витрат. URL: <http://www.ukrstat.gov.ua>.
20. Out-of-pocket health expenditure (% of private expenditure on health). URL: <http://data.worldbank.org/indicator/SH.XPD.OOPC.ZS>.
21. Інформація про стан і розвиток страхового ринку в Україні. URL: <https://nfp.gov.ua/content/informaciya-pro-stan-i-rozvitok.html>.
22. Рейтинг страхових компаній по ДМС 2016. URL: <http://med-insurance.com.ua/ratings/24>.
23. Доповідь «Гендерні аспекти ринку праці в Україні». URL: <http://www.ukrstat.gov.ua>.
24. Показники структурної статистики по суб'єктах господарювання з розподілом за їх розмірами. URL: <http://www.ukrstat.gov.ua>.
25. СК «Раритет». URL: <http://raritet.net.ua/complex-acd-2/>.
26. Затверджено показник середньої зарплати. URL: http://www.pfu.gov.ua/pfu/control/uk/publish/article?art_id=253488&cat_id=95535.

Panchenko Olena – PhD in Economics, Associate Professor, Associate Professor of Department of Finance, Banking and Insurance, Chernihiv National University of Technology (95 Shevchenko Str., 14035 Chernihiv, Ukraine).

Панченко Олена Іванівна – кандидат економічних наук, доцент, доцент кафедри фінансів, банківської справи та страхування, Чернігівський національний технологічний університет (вул. Шевченка 95, м. Чернігів, 14035, Україна).

Панченко Елена Ивановна – кандидат экономических наук, доцент, доцент кафедры финансов, банковского дела и страхования, Черниговский национальный технологический университет (ул. Шевченко 95, г. Чернигов, 14035, Украина).

E-mail: pan68@ukr.net

Bazilinska Olena – PhD in Economics, Associate Professor of the Department of the Finance, National University «Kyiv-Mohyla Academy» (2 G. Skovoroda Str., 04655 Kyiv, Ukraine).

Базилінська Олена Яківна – кандидат економічних наук, доцент кафедри фінансів, Національний університет «Києво-Могилянська академія» (вул. Г. Сковороди, 2, м. Київ, 04655, Україна).

Базилинская Елена Яковлевна – кандидат экономических наук, доцент кафедры финансов, Национальный университет «Києво-Могилянская академия» (ул. Г. Сковороды, 2, г. Киев, 04655, Украина).

E-mail: bazilio17@rambler.ru

Krasnianska Yuliia – student, Chernihiv National University of Technology (95 Shevchenka Str., 14035 Chernihiv, Ukraine).

Краснянська Юлія Валеріївна – студент, Чернігівський національний технологічний університет (вул. Шевченка, 95, м. Чернігів, 14035, Україна).

Краснянская Юлия Валерьевна – студент, Черниговский национальный технологический университет (ул. Шевченко, 95, г. Чернигов, 14035, Украина).

E-mail: krasnyanskaya.yulia@gmail.com