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EUROPEAN EXPERIENCE OF MEDICAL INSURANCE AND OPPORTUNITIES FOR ITS APPLICATION IN UKRAINE

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Medical insurance as a tool for ensuring the financial stability of the healthcare system, reducing individuals' out-of-pocket medical expenses, and maintaining the social and financial security of the state [1] plays a significant role in guaranteeing universal access to medical services and in providing social protection for citizens. Health insurance functions on the principles of solidarity and shared responsibility [2], whereby the population's contributions are accumulated in specialized funds from which healthcare expenditures are financed.

In most European countries, the financial sustainability of health insurance systems is ensured through a combination of mandatory insurance contributions and public funding. Thus, the budgetary model of healthcare financing relies primarily on state resources, while the insurance-based model draws mainly on contributions from employers and employees. The first model guarantees universal access to medical services, whereas the second creates incentives for the efficient use of financial resources and the development of competition among healthcare providers.

In addition to compulsory social insurance, in many European Union countries, voluntary or private health insurance (VHI/PHI) plays an important complementary role in the overall structure of healthcare financing. It supplements public resources and provides additional coverage for services not fully financed by the state. Studies show that VHI markets across the EU are highly heterogeneous, largely depending on the characteristics of the basic public healthcare financing system and the extent to which it ensures population coverage [3].

The experience of European Union countries demonstrates that compulsory social health insurance remains the most stable and sustainable mechanism for ensuring the accessibility and quality of medical care. The models of Germany, France, and the Netherlands, despite structural differences, combine high levels of healthcare sector financing with effective systems of state regulation (Table 1), which together ensure a balance between social justice and market incentives.

Table 1. Indicators of Health Insurance Systems in EU Countries in 2024

| Country | Health Expenditure, % of GDP | Health Expenditure per Capita, USD PPP | Public Financing Share, % |
|-------------|---------------------------------|---|------------------------------|
| Germany | 12,7 | 8011 | 78 |
| France | 12,1 | 6630 | 79 |
| Netherlands | 10,0 | 7100 | 83 |

Continuation of table 1

| Country | Health Expenditure, % of GDP | Health Expenditure per Capita, USD PPP | Public Financing Share, % |
|----------------|---------------------------------|---|------------------------------|
| Sweden | 10,7 | 6438 | 87 |
| Spain | 10,7 | 4368 | 74 |
| Italy | 6,2 | 3740 | 83 |
| Czech Republic | 9,5 | 4249 | 85 |
| Poland | 6,7 | 2973 | 73 |

Sources: OECD Health at a Glance: Europe 2024 [4]; Eurostat [5]; WHO European Observatory on Health Systems [6]

Healthcare insurance systems in Europe operate within the framework of relatively high levels of social expenditure, a significant role of public or mandatory funding, and considerable variation in efficiency and resource availability between countries. Comparative indicators demonstrate the diversity of approaches to the organization and financing of healthcare systems across European states, shaped by the historical, socio-economic, and institutional features of each country's development. In most cases, a high level of healthcare financing – ranging from 6% to 13% of GDP [4] – is maintained, which guarantees access to medical services for all segments of the population. The stability of healthcare revenues is achieved through a combination of mandatory contributions, state budget allocations, and mechanisms of solidarity-based resource redistribution.

In countries where healthcare is financed mainly through taxation, the focus remains on universal access and social equality, while in those with well-developed compulsory insurance systems, the key principle is solidarity among insured population groups [3]. Despite the differences in financing structures, most EU member states demonstrate a high proportion of public expenditure – over 70–80% – which confirms the strategic role of the state in ensuring the provision of healthcare services and monitoring the effectiveness of resource utilization.

The opportunities for applying the European experience of health insurance in Ukraine are primarily determined by the necessity of building a financially stable and socially oriented healthcare system [7]. The experience of European countries confirms that an effective health insurance model must rely on the principles of solidarity, mandatory contributions, and government control over the allocation of funds. In Ukraine, this could be achieved through the gradual expansion of the role of the National Health Service as the central coordinator of financial flows, the improvement of medical service procurement mechanisms, and the introduction of a unified information system for expenditure control. An equally important component is increasing public trust in the insurance system [8], which requires transparency in the use of funds and greater accountability of healthcare institutions.

Furthermore, the adaptation of European experience requires the creation of a balanced model of partnership between the state, employers, and citizens in the financing of healthcare. Taking into account Ukraine's socio-economic realities [9], the most appropriate direction is the gradual introduction of a mandatory health insurance system that guarantees a basic package of services, supplemented by voluntary insurance programs. This would not only strengthen the financial stability of the

healthcare sector but also ensure a more equitable distribution of resources according to population needs.

In general, for Ukraine, it is advisable to develop an adapted model that combines solidarity-based financing principles with transparent governance mechanisms and regulated competition in the provision of medical services. This approach would contribute to the gradual alignment of the Ukrainian healthcare system with the social policy standards of the European Union. The application of best European practices in the management, financing, and quality monitoring of healthcare services will provide a foundation for Ukraine's integration into the common European social policy space and for enhancing the efficiency of the national healthcare system.

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