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UNITED NATIONS
DEPARTMENT OF ECONOMIC AND SOCIAL AFFAIRS
STATISTICS DIVISION

**Meeting of the Technical Subgroup for the
Classification of Individual Consumption According to Purpose
New York, 4-6 April 2017**

Comments received on the new revised COICOP

Division 06 HEALTH

Includes a new proposal for Division 06

The global consultation was launched on September 2016 with deadline for answer of 15th October. The consultation was really successful with answers received from 89 countries and 14 international organizations. The 89 countries that have replied so far represent 92% of the global GDP and 75% of the world population. The on-line questionnaire had the following structure:

- A set of general questions on the draft revised COICOP
- A set of common questions for each division on the level of detail, the correct scope of the division and the terminology
- Some specific questions to each division

As a reminder, WHO proposed the following structure for health:

WHO revised COICOP division 06							
COICOP Code/	Medicines and health products	06.2	Outpatient services	06.3	Inpatient care services	06.4 Diagnostic and patient emergency transportation services	06.5 Preventive care services
06.1.1	Medicines, vaccines and other pharmaceutical preparations	06.2.1	Outpatient curative and rehabilitative services (excluding dental services)	06.3.1	Inpatient Curative and rehabilitative services	06.4.1 Services of diagnostic imaging and laboratories	06.5.1 Immunization services
06.1.2	Medical products (medical equipment and single use medical devices) for personal use	06.2.2	Outpatient Dental services (S)	06.3.2	Inpatient Long term care services	06.4.2 Patient emergency transportation services and emergency rescue	06.5.2 Early disease detection (excluding self-examination)
06.1.2.1	Medical diagnostic products for personal use						
06.1.2.2	Prevention and protective devices						
06.1.2.3	Treatment devices for personal use						
06.1.3	Assistive products	06.2.3	Outpatient Long-term care services				06.5.3 Healthy condition monitoring programs
06.1.3.1	Assistive products for vision, hearing and communication						
06.1.3.2	Assistive products for mobility, cognition, daily living						
06.1.4.	Repair, rental and maintenance of medical and assistive products						

Concerning WHO proposal:

- Countries consider it good in theory but difficult to apply in practice. This classification will mainly be used to collect information at household level and this represents specific challenges.
- Terminology was an issue for several countries
- Explanatory notes will need to be drafted in the same style of the rest of COICOP.
- Several countries consider that Preventive care services are not easily distinguishable from outpatient services. Furthermore it is difficult to ask in the households questions about chronic or long-term versus sporadic
- In general the information requested is difficult to ask in household surveys because either it's not known or touch sensitive questions.
- The borderlines between the different classes are in general blur.
- The terminology was considered to be too complicated for the average household.

In the rest of the document a summary of the answers received is provided. Following a general feedback, these have been grouped by division for each relevant WHO's unit/department consideration. Proposed answers where relevant are included. Taking into account these comments, a revised proposal is submitted at the end of this document with explanatory notes tentatively written in the same style of the rest of COICOP.

Overall comments

- 47.1% agree or strongly agree in general with the proposed new structure for this division
22.5% disagree or strongly disagree with the proposal which together with the division 01 is the highest disapproval rate for any individual division.
- Only 48% consider this proposal to have the correct level of detail. 46.0% considering it too detailed, which is the second highest value of all divisions.
- The terminology used is in general considered understandable by the average household by 83.9% of the countries. Which is however the lowest value for all divisions. Therefore, a lot more has to be done to make this division more understandable for the normal household.
- The terminology should be aligned with CPC and ISIC.

By country

General comments

- Totally too detailed (Finland)
- Specific terms or expressions need to be simplified / clarified by professional medic, not easily understandable by the average household. (Armenia)
- Explanations for products and services included/excluded should be more succinct because they are too long and the meaning is not clearly understandable (Latvia)

- All "excludes" need to identify where the product should be classified. (Australia)
- The current proposal is good in theory but difficult in practice (South Africa)
- Health care services are in general free of charge or paid by the state so it might be very difficult to obtain relevant information. (Poland)
- Division 6 (Health) treats health expenses differently from education expenses in Division 10 (Education). Division 6 covers all expenses related to health, i.e: health services, health products, and health transportation. (Indonesia)
- 5th digit is missing for some classes (Eurostat)
- Up to now we have not felt the need of a possible harmonization with the International Classification for Health Accounts (ICHA). It might be difficult to differentiate between curative / rehabilitative and preventive services, differentiating according to the place of the service is more important for us. (Hungary)
- We do not expect good HBS data Quality for these categories. (Germany)
- Propose not to change the present structure of division 06 (06.1, 06.2, 06.3) (Slovak Republic)

About the structure

Products

- The issue and classification of traditional, complementary and alternative medical/health products and services (including traditional Chinese medicine, acupuncture, herbs with said health benefits, other wellness products) has not been adequately addressed in the proposed COICOP. (Singapore)

Services

- For elderly and disabled persons, where should costs for ADL be included? In COICOP 06 or COICOP 13? (Regarding the statement that the new structure allows alignment of COICOP with ICHA) (Sweden)
- It is not well understood the difference between what services are included in 06.2.3 Outpatient Long-term care services versus 06.5.3 Healthy condition monitoring services. (Chile)
- Difficulty in classifying items into 06.2 Outpatient, 06.4 Diagnostic and 06.5 Preventive care service, e.g. mammogram (Singapore)
- In general, it would be difficult to unbundle preventive care services (06.5) from out-patient services and in-patient services. For example, vaccination services are regularly provided in out-patient medical services. In practice, it would be difficult to unbundle vaccination services from other health services provided in out-patient medical services. (Singapore)
- In general, the distinction between curative/rehabilitative and preventive services might be difficult. For example, some diagnostic tests can be classified both in the class 06.4.1 and the class 06.5.2. (Italy)

- The Group 06.5 Preventive Care services: It will be very difficult to distinguish preventive care from outpatient care. (How to classify e. g. routine check-up during which the doctor finds the problem and solves it immediately?) (Czech Republic)
- Not easy to differentiate between early disease detection service and health monitor service (Cyprus)
- It is difficult to identify differences between type of treatment, chronic or long-term versus sporadic. It is difficult to obtain, since it would involve modifying questionnaires and ask sensitive issues in households. At administrative records, is also complex incorporate this distinction. (Chile)
- The issue and classification of traditional, complementary and alternative medical/health products and services (including traditional Chinese medicine, acupuncture, herbs with said health benefits, other wellness products) has not been adequately addressed in the proposed COICOP. (Singapore)
- There is no split by healthcare provider (e.g. no separate category for primary care, no separate categorisation to distinguish hospital Specialist Outpatient Clinics from specialist clinics), so the new classification does not allow for cross-comparisons with other countries at the provider levels. (Singapore)
- The surgery even if cosmetic surgery for other purposes than reconstructive surgery should be classified in the Division 06 (within both outpatient and inpatient care). Often it is difficult to distinguish the purpose of the surgery - both are carried out by medical doctors in hospitals and the like. (Czech Republic)

Comments by proposed group

06.1 Medicines and health products

06.1.1 Medicines, vaccines and other pharmaceutical preparations

06.1.2 Medical products (medical equipment and single use medical devices) for personal use

06.1.3 Assistive products

- Class 06.1.2 is too detailed (Latvia)
- Assistive products should not be combined into one Sub-class (06.1.3.1) as they are meant for different purposes (Latvia)
- Private households cannot differentiate between categories 06.1.2.1 - 06.1.2.3 (Germany)
- 06.1.1.0 Medicines, vaccines and other pharmaceutical preparations should exclude Herbal medicines and homeopathic products. Split 06.1.1 into 06.1.1.1 Medicines, vaccines and other pharmaceutical preparations and 06.1.1.2 Herbal medicines and homeopathic products. For our users in health research, homeopathic remedies and other alternate remedies would be better placed under a different class. (Australia)
- 06.1.2.1 Medical diagnostic products for personal use should be worded "All diagnostic equipment for self-test" as it includes internet purchases (Australia)

- 06.1.2 Fix up sentence "From a thermometer blood glucose meters, to nebulizers, that are by individuals, usually out of the hospitals". Doesn't make sense. (New Zealand)
- Herbal medicines" which are included in 06.1.1 (Medicines, vaccines and other pharmaceutical preparations) should be defined for better clarity. (Singapore)
- Scales and baby scales are in 06.1.2.1 and 13.1.2 (Eurostat)

The following goods or services within this division were proposed to be moved to a different division:

- Move pill organizers from 06.1.3.2 (Assistive products) to 13.2.2 (Other personal effects). Pill organizers may be used for purposes other than to organise pills. (Singapore)
- Assistive products for Cognition (e.g. GPS locators, PDAs, Personal emergency alarm systems, time management products including digital calendar, watch with pre-programmed task reminders, etc.) should not be included in Health. These products are used for non-health related purposes as well. They should be classified under 08 (Information and Communication) instead. (Jamaica, Singapore)
- Classify Aromatherapy products and slimming and beauty enhancing creams, outside of Health, under 13.1 Personal Care (outside of Health) (Singapore)
- Why protective glasses are in 06.1.3.1? They belong with safety equipment like water boots and ear plugs. Not an "assistive product" (Jamaica)

Some products or services were mentioned as missing in this division. In most cases they just need to be included in the list of examples. The following products or services were mentioned:

- Where to classify dental prosthesis? (Poland)
- Rental of medical alarms for in-home use (New Zealand)
- Topical pain relievers e.g. Voltaren (Jamaica)
- Move sunglasses from 13.2.2 to 06.1.3.1 (Poland, Australia) Aren't sun glasses primarily protection and should be included in 06.1.3.1 - we understand they are also a fashion accessory but primarily they protect the eyes from the sun (Australia, Poland)

The terminology was considered to be too complicated and too technical by some countries. The following terms were considered needing clarifications:

- 06.1.3 Assistive products should have more accurate title because otherwise it can be confusing (Latvia)
- Perhaps 06.1.3.1 Hearing and communication should be renamed as Division 08 is also on communication. (Switzerland)
- The word 'spectacles' is a bit dated (Jamaica)
- Do PDAs still exist? (Jamaica)

06.2 Outpatient services

06.2.1 Outpatient curative and rehabilitative services (excluding dental services)

06.2.2 Outpatient Dental services (S)

06.2.3 Outpatient Long-term care services

- Class 06.2.1 should have two Sub-classes 06.2.1.1 General practice and 06.2.1.2 Specialist practice. (Latvia)
- Rehabilitative care can be separated from curative care as the rehabilitative care services may be big enough to warrant a separate category on its own. (Singapore)
- Too detailed in 06.2 (Russia, Norway, Montenegro)
- The difference between 13.3.0 and 06.2.3 about services for old people is not clear. The type of medical services that distinguish the 2 classes have to be better explained (Austria)

Some products or services were mentioned as missing in this division. In most cases they just need to be included in the list of examples. The following products or services were mentioned:

- In 6.2.3, add “dialysis” as an example of outpatient long term care (World Bank, Singapore)
- Dental work requiring overnight stay (e.g. removal of wisdom teeth) (Australia)
- Alternative medicine services such as shiatsu, homeopathy, acupuncture, healing, etc. (Israel)
- Pharmaceutical services eg . Fees to dispense medicine (South Africa)
- Propose to cover all costs concerning dentures (not only fitting cost) into 06.2.2 (Slovak Republic)
- It is not possible to distinguish 06.3.1 and 06.3.2. Propose to merge those classes (Czech Republic)
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The terminology was considered to be too complicated and too technical by some countries. The following terms were considered needing clarifications:

- Outpatient - is it related to treatment at hospitals (not overnight) or for all outpatient medical services provided in facilities including those in the home? (Australia)

06.3 Inpatient care services

06.3.1 Inpatient Curative and rehabilitative services

06.3.2 Inpatient Long term care services

- Rehabilitative care can be separated from curative care as the rehabilitative care services may be big enough to warrant a separate category on its own. (Singapore)
- Too detailed in 06.3 (Russia, Norway, Montenegro)
- 06.3.2 Inpatient Long term care services should specifically exclude retirement villages without inpatient medical services (12.4) (Australia)

- It was stated that 06.3.1 (Inpatient curative and rehabilitative services) excludes "services of medical analysis laboratories and imaging centres separately invoiced from the inpatient care services not received during the overnight stay". The statement is confusing. Why would services which were not provided during inpatient care services/overnight stay be billed along with inpatient care services? (Singapore)
- 06.3 Need to include 'dental'. (New Zealand)

The following goods or services within this division were proposed to be moved to a different division:

- In 06.3.2 what is mentioned in "Includes" should be part of 13.3 Social protection. Most of the payments made in this case are for the living in the institutional household, like in retirement homes 13.3.0.2. Payments for curative care (The Netherlands)

06.4 Diagnostic and patient emergency transportation services

06.4.1 Services of diagnostic imaging and laboratories

06.4.2 Patient emergency transportation services and emergency rescue

- Too detailed in 06.4 (Russia, Norway, Montenegro)
- 06.4.1 – it should be stated precisely what kind of screenings are expected to be classified here, provided that laboratory and imaging services performed for early detection of diseases are excluded from this grouping. Should this grouping include medical examination commissioned in 06.2? (Poland)

Some products or services were mentioned as missing in this division. In most cases they just need to be included in the list of examples. The following products or services were mentioned:

- To mention blood and urine tests in 06.4.1 - Services of diagnostic imaging and laboratories (Brazil)

06.5 Preventive care services

06.5.1 Immunization services

06.5.2 Early disease detection (excluding self-examination)

06.5.3 Healthy condition monitoring programs

- 06.5 Preventive care services is considered too detailed or not needed to identify separately (Myanmar, Lithuania, Belarus, Mauritius, Canada, Peru, Belgium)
- In our experience it would be difficult to separate "Preventive care services" from "outpatient services". In general, the preventive case is made by a routine visit to a

physician's private office. If necessary it will be requested specific exams. Also, either the patient has a health insurance plan or uses clinics/hospitals administrated by the government. so, except from the immunization services, the group 06.5 06.4 and 06.5 should be included within 06.2 (Slovenia, UK, Germany, Brazil, Colombia)

- Private households cannot differentiate between categories 06.5.1 - 06.5.3 (Germany)
- Too detailed in 06.5 (Russia, Norway, Montenegro)
- Information to be collected on 06.5 touches upon "sensitive data" and respondents might be reluctant to disclose this kind of information. (Poland)

The terminology was considered to be too complicated and too technical by some countries. The following terms were considered needing clarifications:

- The breakdown of grouping 06.5 into 06.5.1, 06.5.2, 06.5.3 is not clear enough. (Poland)

Other relevant comments are:

- It is difficult to distinguish between preventive medicine and preliminary tests such as vaccines, ultrasound, etc. because most of the services are received under the arrangement public and private insurance. (Israel)

WHO revised proposal for division 06

06 Health

06.1 Medicines and Health Products

06.1.1 Medicines, vaccines and other pharmaceutical preparations

06.1.1.0 Medicines, vaccines and other pharmaceutical preparations

06.1.2 Medical products (medical equipment and single use medical devices) for personal use

06.1.2.1 Medical diagnostic products for personal use

06.1.2.2 Prevention and protective devices

06.1.2.3 Treatment devices for personal use

06.1.3 Assistive products

06.1.3.1 Assistive products for vision

06.1.3.2 Assistive products for hearing and communication

06.1.3.3 Assistive products for mobility, cognition, daily living

06.1.4. Repair, rental and maintenance of medical and assistive products

06.1.4.0 Repair, rental and maintenance of medical and assistive products

06.2 Outpatient care Services

06.2.1 Preventive care services

06.2.2 Outpatient dental services

06.2. 3 Outpatient services (excluding preventive and dental services)

06.2.3.1 Outpatient curative and rehabilitative services (excluding dental services)

06.2.3.2 Outpatient long-term care services

06.2.9 Other health services

06.2.9.1 Services of diagnostic imaging and laboratories

06.2.9.2 Patient emergency transportation services and emergency rescue

06.3 Inpatient care services

06.3.1 Inpatient curative and rehabilitative services (including inpatient dental medical services)

06.3.2 Inpatient long term care services