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Health care expenditures, age, proximity to death and morbidity: implications for an ageing population.

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Abstract

This paper uses Hospital Episode Statistics, English administrative data, to investigate the growth in admitted patient health care expenditures and the implications of an ageing population. We use two samples of around 40,000 individuals who a) used inpatient health care in the financial year 2005/06 and died by 2011/12 and b) died in 2011/12 and had some hospital utilisation since 2005/06. We use a panel structure to follow individuals over seven years of this administrative data, containing estimates of inpatient health care expenditures (HCE), information regarding individuals' age, time-to-death (TTD), morbidities at the time of an admission, as well as the hospital provider, year and season of admission. We show that HCE is principally determined by proximity to death rather than age, and that proximity to death is itself a proxy for morbidity.

JEL codes: H51; J11; I19.

Keywords: health care expenditures, ageing, time-to-death, morbidity.

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