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THE FUTURE COST OF HEALTH CARE IN CANADA, 2000 TO 2020

Balancing Affordability and Sustainability

333-01 Detailed Findings • By Glenn G. Brimacombe, Pedro Antunes and Jane McIntyre

HIGHLIGHTS

- Public health expenditures are projected to rise from 31 per cent in 2000 to 42 per cent by 2020 as a share of total provincial and territorial government revenues.
- The proportion of Canadians over the age of 55 will rise from 22 per cent of the population to 32 per cent by the year 2020.
- Public health care costs will post an average annual growth of 5.2 per cent over the 2000 to 2020 period. Of this growth, 1.7 percentage points can be attributed to demographics (0.9 per cent due to the ageing population, and 0.8 per cent due to population growth). Private health care costs will increase, on average, by 5.0 per cent over the same period.
- Adjusting for inflation, public per capita spending on health care is projected to increase by 58 per cent, while public per capita spending on all other government services will increase by 17 per cent over the forecast period.

Understanding the Strategic Environment

Economic Analysis

Business and Society

Policy Analysis

Organizational Response

Improving Organizational Effectiveness

Managing Human Resources

Managing Innovation and Technology



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The Conference Board of Canada is an independent, not-for-profit research organization with affiliates in the United States and Europe. Our mission is to help our members anticipate and respond to the increasingly changing global economy. We do this through the development and exchange of knowledge about organizational strategies and practices, emerging economic and social trends and key public policy issues. Since 1954, the Board has been committed to researching innovative practices, designing new strategies and providing our members with the most up-to-date information, analysis and expertise to help them excel in Canada and around the world.

About the Leaders' Roundtable on Health, Health Care and Wellness

The Roundtable was established in June 2000. It's mission is to encourage a constructive dialogue on health, health care and wellness issues among principal stakeholders in the business community, health-related sectors, governments, health research organizations and other groups closely associated with Canada's health system. The mandate of the Roundtable is to take a multi-stakeholder approach over a three-year period to initiate and examine available research and explore issues and options related to the financing and structure of Canada's health system.

The Leaders' Roundtable also focuses on the important role that employers play in terms of their ongoing financial contributions through which they seek to improve the health status of their employees.

About the Business Research Group and Health Programs

Under the auspices of the Business Research Group, the Conference Board recently established health, health care and wellness as a new knowledge area. The objective is to develop the capacity to provide the public and private sectors with knowledge and insight on key issues and trends in the areas of health system funding and structure, in addition to the important relationships between employer wellness programs and their contributions to employee health.

A Conference Board of Canada publication from the Business Research Group

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THE FUTURE COST OF HEALTH CARE IN CANADA, 2000 TO 2020

Balancing Affordability and Sustainability

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Canada's health care system is no stranger to headlines or discussion. It stood bravely in the face of fiscal retrenchment in the 1990s, and now, in the new millennium, it finds itself at the centre of an ongoing policy debate regarding the complex and connected issues of its funding and structure. In simplified form, the fundamental questions underlying this debate are: how much money is required, for what specific structural purpose is it intended, and what impact will it have on the health of Canadians?

This debate is all the more pertinent in light of the fact that Canada's population is ageing. This fact, probably more than any other, has brought The Conference Board of Canada into the discussion. Given that Canada's population will continue to grow and age over the next 20 years, the Conference Board has identified two research questions. First, what impact will Canada's ageing population have on total public and private spending on health over the next 20 years? Second, assuming that the current architecture of the health system and fiscal regime is held constant, what proportion of provincial and territorial government revenues will be allocated to health care over the next 20 years?

Clearly, questions around the relationship between ageing and future health care expenditures are important, particularly when one considers that in 2001 the proportion of those over the age of 55 is 22 per cent, and this will increase to 32 per cent by the year 2020—an increase of 10 percentage points. Furthermore, while our society continues to age, we need to have a clearer understanding of the relationship between our ageing population and public and private health care expenditures. For example, total per capita expenditures for those currently aged 55 to 64 are expected to double over the next two decades.

To meet this demand and others that will be placed upon the health care system, the Conference Board found that, as a share of total provincial and territorial government revenues, public health care expenditures in Canada will increase from 31.1 per cent in 2000 to 42.0 per cent in 2020.

To understand the context of the second research question that the Conference Board has identified, it is important to remember that, under the Constitution,

responsibility for health care rests with the provinces and territories. Thus, the study's focus is to estimate provincial and territorial government health care expenditures relative to its future public revenue stream. As a result, expenditures by municipal governments, workers' compensation boards, and federal direct government spending are excluded from the analysis. However, federal cash transfers (e.g., the Canada Health and Social Transfer) are included as a component of provincial and territorial government revenues.

This study breaks new ground. While other studies have undertaken projection analyses of future health care expenditures, and/or in relation to overall economic activity as measured by Gross Domestic Product (GDP), the Conference Board has taken the additional step of estimating how future economic growth translates into a public revenue stream for all provinces and territories.

This is an essential feature of the analysis—and it is one that no one else has explicitly addressed in the Canadian context. Framed this way, the study considers the future financial requirements for health care within an expenditure and revenue function approach. In other words, projected expenditures must be considered in relation to future public revenues.

In the aggregate, total provincial and territorial public and private health expenditures as a percentage of GDP are projected to increase from 8.7 per cent to 10.2 per cent over the forecast period. If one were to look at public health spending in relation to GDP only, one would observe that, on a national basis, public health spending as a share of GDP is expected to increase from 6.0 per cent in 2000 to 7.1 per cent in 2020. At the same time, private health spending as a share of GDP would increase from 2.7 per cent to 3.1 per cent.

On this basis alone, one could argue that future increases in health care expenditures are manageable in relation to overall economic growth. However, given the manner in which our tax system is constructed, there is no one-to-one relationship between nominal economic growth and the public revenue dollars that accrue to governments. This means that some of our tax structures, such as excise and property taxes, are not as responsive

to economic growth. In addition, an ageing population will tend to consume less and save more, reducing the government's revenue from some indirect taxes, such as retail sales taxes. As a result, the overall share of government revenues relative to GDP is expected to decline over the next 20 years. Furthermore, it is likely that there will be continued international pressure on Canada to re-examine its fiscal regime. Therefore, what may appear to be manageable in the context of overall GDP is less manageable when compared to the growth in public revenues.

This point is underscored given that provincial and territorial public health care expenditures are expected to increase by 5.2 per cent over the forecast period, and public revenues are projected to increase by 3.6 per cent from 2000 to 2010, and 3.8 per cent from 2011 to 2020.

In addition, while health care is clearly a fundamental service, other sectors in society also have a legitimate

claim on the public purse. With health care expenditures expected to rise over the next 20 years, governments will have a difficult balancing act in terms of collecting public revenues and then allocating them among competing social programs and other important public initiatives.

If the status quo is not sustainable, then the study serves to underscore the need for further research and discussion when it comes to looking at the system's structure, and how and at what level it should be financed.

Finally, it is also important to understand that the impact of a growing and ageing population washing onto the shores of the health care system will not happen overnight. In fact, it would appear that we have time to think carefully about the policy issues and develop a course of action so that we can structure the health care system to meet the objective of timely access to quality care within an affordable financial structure.

Overall Approach

Underpinning this analysis is a series of assumptions about the structure of the health care system. As a starting point, the overall delivery structure of the health care system—both public and private—is held constant, and other than tracking changes in per capita spending patterns, no changes in treatment protocols are incorporated into the model.

The health expenditure analysis is based on the historical record of changes in nominal and inflation-adjusted (i.e., real) public and private per capita health care spending for each of 18 age–sex cohorts. From this point, total public and private health expenditures are projected forward from the most recent year to 2020 based on these real per capita expenditures and the changing distribution of the population.

For the purposes of the analysis, the data are presented in both nominal (current) and real (constant) dollars. Nominal public and private health expenditures give the reader a sense of the actual dollar amounts that are projected over the next 20 years. Presented in real dollars (with 1992 as the base year), an adjustment is made to account for price inflation. As a result, changes in real public and private health expenditures capture overall movements in the level or volume of services provided.

The report also includes econometric projection analyses that focus on how future economic growth translates into public revenues. The Conference Board of Canada's National Forecasting Model provides the long-term economic outlook for Canada.

The outlook provides a forecast for GDP, personal income and corporate profits, price inflation and transfers from the federal government to provincial and territorial governments. Combined, these factors contribute to the future public revenue stream for provincial and territorial governments.

Limitations to the Analysis

The report recognizes that the world of health policy is more likely grey than black and white. As a consequence, there are limitations to this analysis. In particular, health care systems are dynamic and evolve over time. As a result, some will argue that we have overestimated future health care expenditures and some will argue the reverse.

However, a number of important policy issues that have been identified in this paper suggest that the projected cost of health care in relation to public revenues could well be a “floor,” rather than a ceiling:

- No adjustment to either the cost of salaries of health care staff, or fees paid to physicians is beyond 2.2 per cent a year. If this is too modest, especially in the current period and over the next few years, then the cost will be an underestimate. However, the level of service provided will remain the same.
- There is no assumption about the expansion of public funding for home care or pharmacare programs. In other words, the “boundaries” of Medicare as we know it, in relation to private health spending, are held constant.
- There is no adjustment to the range of services that were either no longer covered or added under Medicare. This would take us into the discussion around medically necessary services and comprehensiveness. This discussion is important, given the pressures to expand coverage that will likely flow from the introduction of new technologies, such as the human genome project, diagnostics and therapeutics, and/or new reproductive technologies.
- In the next decade, we can expect an increased ability to “design” drugs for individuals. We do not know, however, how expensive this will be. We can expect that there will be public pressure to have these modalities covered under the current approach to health care. As we look at the costs of drugs, which are growing rapidly, we are reminded of the impact of technology and what can be done on the frontiers of science. Whether state-of-the-art diagnoses and treatments will be included immediately under Medicare will be debated. We made no assumptions about these types of changes.
- Net international migration (immigration and returning Canadians less emigration) will increase to 294,000 by 2020. This is important, for if immigration levels are weaker, they will have an impact on employment, income generation and tax revenues and will therefore increase the proportion of government revenues devoted to health care.
- Tax rates are held at current levels throughout the analysis. The constraint on public spending will be bound much more by what government revenues can be in the future, within the current tax regime. That being

Health care systems are dynamic and evolve over time.

said, governments are continually being pressured to lower the tax burden on Canadians—on both individuals and businesses.

- Governments continue to achieve a slight surplus over most of the forecast period and will be reluctant to return to the days of deficit financing.
- Finally, we assume no recession in the forecast. If there is an unanticipated short-term decline in economic activity and public revenues, this could have an effect on resources that are allocated to the health care system over the short-to-medium term.

Combined, these eight points reinforce the notion that we have taken a cautious approach to the question of forecasting health care expenditures and government revenues. In sum, it would appear that while we have fundamentally left the structure of the health care system and fiscal regime unchanged, quite large increases in public health expenditures as a share of government revenues will be needed.

That having been said, several factors that are not addressed in this paper could lead to a more efficient, affordable and cost-effective health care system.

- There are possibilities for further system efficiencies to be achieved in the system. While a number of

important pilot projects are underway, such as new models of delivering primary health care and the introduction of new health information technologies, we incorporated no assumptions about the financial impact of such structural changes.

- While the projections are based on the recent historical record in real per capita expenditures, we assume no quantum changes in how health care is delivered or how patients would either increase or decrease their “consumption” of health care services.
- Although it would appear that we are on the verge of reaping benefits from new technologies, we make no judgements about any net savings that would accrue to the system by virtue of their introduction.
- Finally, the analysis assumes that there are no quantum positive or negative changes in economic activity or the tax regime that could generate a significant increase or decrease in public revenues, or a reallocation of public revenues away from or to health care.

This overall approach informs this paper, which is the first of three that focus on the future financial sustainability of the health care system.

Introduction

As we edge deeper into the new millennium, Canada has a number of policy roads it may choose to follow when it comes to the future of the health care system. In contemplating which roads to take, our collective values will play a crucial role in defining “The Canadian Way.”¹ This is a particularly important point when one considers that the future of Canada’s health care system stands as the most important public policy challenge identified by Canadians.²

While values are an essential ingredient in the discussion, there is a larger strategic policy context that Canadians will have to consider, as well. For each additional public dollar that we choose to allocate to health care, there is one less dollar for education, social services, debt reduction and other important public initiatives, given the current fiscal regime. Although health care is clearly a fundamental service, we must also remember that other important sectors in society have a legitimate claim on the public purse.

After a decade marked largely by fiscal retrenchment of the health care system, it is now time to focus attention on the complex and connected policy issues of funding and structure. In its simplified form, the policy equation seeks to answer the following questions: how much money is required, for what specific structural purpose is it intended, and what impact will it have on the health of Canadians?

In many respects, The Conference Board of Canada has entered this policy discussion in an effort to better understand what kind of resources will be required given that Canada’s population will continue to grow and age over the next 20 years. In undertaking research into this subject, the Board asked two research questions:

- What impact will Canada’s ageing population have on total provincial and territorial public and private spending on health over the next 20 years?
- Assuming that the current architecture of the health system and fiscal regime remains constant, what proportion of provincial and territorial government revenues will be allocated to health care over the next 20 years?

The former concerns an important issue—the relationship between ageing and future health care expenditures. This is a particularly critical subject when one considers that, in a period of less than 20 years, the proportion of those over the age of 55—currently 22 per cent—will increase to 32 per cent by the year 2020. Furthermore,

while our society continues to age, we need to have a clearer understanding of the relationship between our ageing population and public and private health care expenditures. When one examines age–sex health care expenditure patterns, one sees that for the 55–64 age group, total per capita expenditures are approximately \$3,239 for males and \$3,222 for females. These expenditures are expected to double over the next two decades.

While the analysis is intended to provide a better understanding of the possible trends in future public and private health care expenditures, it also takes the unique and important step of placing health care expenditure growth within the context of available public revenues that accrue to governments.

This is an essential feature of the analysis and it is one that no one else has explicitly addressed in the Canadian context. Framed this way, the study considers the future health care resource requirements within an expenditure and revenue function approach.

Thus, in considering future health care expenditures, part of the study is a projection analysis. At the same time, however, in calculating how economic growth translates into future public revenues, the model also captures a number of behavioural relationships in an economic context.

When undertaking econometric-based projection analyses, the models are embedded with a series of assumptions. While the assumptions are explicit in the report, they do not allow for changes in any of the specified relationships. As a result, this report (Phase 1) should be considered as a “baseline” case.

This is the first of a three-phase study that examines the future financial sustainability of the health care system. Phase 2 of the project is intended to examine public and private health care expenditure growth over the next 20 years. However, it will focus on the impact by category of expenditure (e.g., hospitals, physicians, prescription drugs) rather than on the changing age–sex distribution and health consumption patterns of the population.

Perhaps more importantly, Phase 3 will vary a number of the assumptions contained in Phase 1 of the project. In effect, by adopting sensitivity analysis,³ this stage will consider several scenarios and their impact on health care expenditures and their relationship to public revenues.

Combined, the three phases of this report will address more than the issue of funding of the health care system. They will also consider the funding implications, should a

number of structural changes be introduced into the system.

This report is divided into five sections. Following the introduction and policy context is a section that describes the methodology used to determine the Canadian health expenditure and economic forecast. Included in this section are the data sources and a description of the model used to forecast public and private health expenditures, in addition to economic growth. Finally, the key assumptions used in the analysis are discussed.

The results of the study are presented in the next section. Initially, the discussion centres on the national long-term economic outlook to 2020. This leads to a review of the forecasted provincial and territorial government's public accounts over the same period. The section also

presents the outlook for public and private health care expenditures. A summary of the results and the study's conclusions are contained in the final section.

To complete the analysis, two appendices are attached. The first summarizes the key assumptions that were part of the economic forecast and health expenditure projection. The second includes a series of data tables containing the detailed results from the study. These tables display data on key economic indicators, public finance, demographics and public and private health expenditures.

It should be noted that this is not the first study that has been undertaken by the Conference Board in this area. It prepared a similar exercise for the provinces of British Columbia and Ontario.⁴

1 The concept of "The Canadian Way" was articulated by The Conference Board of Canada in its 1998 publication *Performance and Potential*. It reflects (1) our values and how we choose to manage social policy in health, education and social services; (2) the balance between individual and collective responsibility; and (3) the size and role of government in business and society.

2 Stephen Vail, *A Synthesis of Canadians' Values and Attitudes on the Canadian Health Care System* (Ottawa: The Conference Board of Canada, 2001).

3 Sensitivity analysis is a methodology that considers the financial impact of introducing different scenarios with certain assumptions altered.

4 Pedro Antunes, Mario Lefebvre and Jane McIntyre, *The Future Cost of Health Care in British Columbia* (Ottawa: The Conference Board of Canada, May 2000). Pedro Antunes, Graeme Clinton, Mario Lefebvre and Peter Lok, *The Future Cost of Health Care in Ontario* (Ottawa: The Conference Board of Canada, November 2000).

Policy Context

As with other Western countries, Canada faces the difficult and ongoing policy challenge of ensuring the future financial sustainability or integrity of its health care system.

While the term “sustainability” can refer to a number of structural features within the health care system (such as health human resources, technological endowment, and physical infrastructure, to name a few), many of the proffered solutions often depend on the requirement for additional funding.¹ In this regard, a number of health organizations and governments are giving deeper strategic thought to defining the parameters of financial sustainability and how it can be achieved.²

When considering the magnitude of future financial requirements for the health care system, the literature can be separated into two broad categories. The first category takes the approach of projecting future public health care expenditures in isolation.³ The second builds on this analysis by examining public health care expenditures in relation to economic growth, measured by GDP.⁴

In a simplified form, the two approaches have been undertaken in order to gain a better understanding of the fundamental question of what level of public spending will we, as a society, allocate to health care. In addition, the latter approach seeks to define the relationship between the growth of overall public expenditures and future economic growth.

The approach developed by The Conference Board of Canada builds on the recent literature by projecting future health care expenditures in relation to public revenues that accrue to provincial and territorial governments as

a product of economic growth. In this regard, given the Conference Board’s econometric modelling capacity, the analysis is more detailed in terms of taking an additional step that translates economic growth into a public revenue stream for governments.

This is an important distinction due to the very nature of how public revenues respond to increases in economic growth. Specifically, given the manner in which our tax system is constructed, there is no one-to-one relationship between economic growth and the public revenue dollars that accrue to governments. Some of our taxes are not proportionately responsive to economic growth, such as excise taxes and property taxes. In addition, an ageing population will tend to consume less and save more, reducing the government’s revenue from certain indirect taxes, such as retail sales taxes.

As a consequence, where future increases in public health care expenditures appear to be manageable in relation to overall economic growth, they translate into a difficult balancing act in terms of collecting public revenues and then allocating them among competing social programs.

In addition to projecting future public health expenditures, the analysis extends to projecting future private health expenditures. Combined, these two estimates provide a more complete picture with regard to future movements in total health spending and how it breaks down along public and private lines.

If the status quo is not sustainable, the study serves to underscore the need for further research and discussion when it comes to looking at the system’s structure, and how and at what level it should be financed.

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- 1 The *Webster’s II New Riverside University Dictionary* defines sustainable as “... using a resource so that the resource is not depleted or permanently damaged ...”
 - 2 The Canadian Healthcare Association, *CHA’s Framework for a Sustainable Healthcare System in Canada*, November 1999. The Canadian Medical Association, *In Search of Sustainability: Prospects for Canada’s Health Care System*, August 2000. Provincial and Territorial Ministers of Health, *Understanding Canada’s Health Care Costs—Final Report*, August 2000.
 - 3 Organization for Economic Co-operation and Development, *Ageing in OECD Countries: A Critical Policy Challenge*, (Paris: OECD, 1996). D. Baxter, A. Ramlo, *Healthy Choices: Demographic and Health Spending in Canada, 1980 to 2035* (Vancouver: Urban Futures Institute, 1998). *Understanding Canada’s Health Care Costs—Final Report*. Provincial and Territorial Ministers of Health, August 2000. Canadian Institute for Health Information, *Provincial and Territorial Government Health Expenditure by Age and Sex*, National Health Expenditure Series, December 2000. Health Canada, *Health Policy Research Bulletin*, March 2001.
 - 4 Department of Finance Canada, *Federal/Provincial Study on the Cost of Government and Expenditure Management*, 1992. F.T. Denton and B.G. Spencer, “Demographic

Change and the Cost of Publicly Funded Health Care,” *Canadian Journal on Aging*, vol. 16, no. 3. 1996. D. Roseveare, W. Leibfritz, D. Fore, E. Wurzel, *Ageing Populations, Pension Systems and Government Budgets: Simulations for 20 OECD Countries*, Economics Department Working Paper No. 168, (Paris: Organisation for Economic Co-operation and Development, 1996). Canadian Institute of Actuaries, *Health Care Financing: Task Force on Health Care Financing*, 1996. Auditor General for Canada, *Population Aging and Information for Parliament: Understanding the Choices*, Chapter 6 (Ottawa: The Government of Canada, 1998). D. Baxter, J. Smerdon, *Without Care? Demographics and Health Spending in British Columbia, 1999 to 2040* (Vancouver: Urban Futures Institute, 1999). Pedro Antunes, Mario Lefebvre, Jane McIntyre, *The Future Cost of Health Care in British Columbia* (Ottawa: The Conference Board of Canada, May 2000). Pedro Antunes, Graeme Clinton, Mario Lefebvre and Peter Lok, *The Future Cost of Health Care in Ontario* (Ottawa: The Conference Board of Canada, October 2000). W.P.B. Robson, *Will the Baby Boomers Bust the Health Budget? Demographic Change and Health Care Financing Reform* (Toronto: C.D. Howe Institute, February 2001).

Methodology

This section presents the methodology used in determining current and future provincial, territorial and private health care expenditures, and the fiscal outlook between 2000 and 2020. The first section discusses the various data that were used, along with the sources of these data. Next, the health expenditure models are presented as well as the critical assumptions used in the analysis.

The Data

Data Sources

Data were obtained from four principal sources:

- Statistics Canada;
- The Canadian Institute for Health Information (CIHI);
- Health Care System Division, Health Canada; and
- The Conference Board of Canada.

The majority of the historical data used by the Conference Board's national forecasting model comes from Statistics Canada. For this study, the Canadian Institute for Health Information (CIHI) provided total provincial and territorial public and private health care expenditures, and the Health Care System Division of Health Canada was the source of data for provincial and territorial public and private health care expenditures by age and gender cohort.¹

Statistics Canada also provided historical data on the provinces' and territories' public accounts. This was obtained from the Canadian System of Government Financial Management Statistics (FMS) databank. Finally, data from the Conference Board's national long-term forecast were used to provide the underlying economic assumptions for Canada over the next 20 years.

Data Processing

Since an important objective of this study is to examine health expenditures by age and gender cohorts, a number of transformations had to be performed on the source data. The first task was to ensure that the age and gender cohorts of the demographic data matched the age and gender cohorts of the health expenditure data from Health Canada. The next step was to allocate total public and private health expenditures supplied by CIHI using

Health Canada's data on the share of health expenditures by age and gender cohort. This resulted in a new data series representing the level of health expenditures by age and gender cohort, which was then used to obtain the per capita health expenditures for each age and gender cohort, for both public and private expenditures that were required for the analysis.

As a last step in the data-gathering process, provincial and territorial public accounts data were converted to a calendar year basis from a fiscal year basis. This was done to make the fiscal data compatible with both the model and data from other sources.

An important point in the analysis is the distinction between nominal (or current dollar) expenditures and real (or constant dollar) expenditures. Increased health care expenditures can be, in part, attributed to general price inflation. One purpose of this exercise is to identify increases in consumption due to demographic changes and real (net of inflation) increases in consumption (or the volume of health services provided). Thus, health expenditures on a per capita basis are modelled in real terms by adjusting for inflation. This is done simply by dividing current dollar expenditures by a price index, which in our case is indexed to 1992=\$1.00. As a result, real expenditures are measured in 1992 dollars. Once the forecast results are obtained, estimates of real expenditures are converted back to current dollars (simply by multiplying by the price index) for comparisons with current dollar government revenues and GDP.

Finally, the historical data on health expenditures by age and gender cohort are available only for the period from 1980 to 1999. Therefore, patterns of health expenditures by age and gender were established over this 20-year period.²

The Models

Forecasting models were built to project public and private health expenditures, provincial and territorial government revenues and other government expenditures over the next 20 years. These models use inputs from the demographic projection and the Conference Board's long-term economic outlook. The health expenditures model and the public accounts model are presented in Table 1. The health expenditures model allows us to forecast public and private health expenditures for 18 age and gender cohorts. The public accounts model allows a forecast of the overall provincial and territorial fiscal situation.

A detailed summary of the assumptions underlying the models is contained in Appendix A.

Table 1
The Forecasting Tools

Demographic Projections	
Assumptions	Output
<ul style="list-style-type: none"> • International migration • Mortality rates • Fertility rates 	<ul style="list-style-type: none"> • Population projections by age and gender cohorts
Long-Term Economic Outlook	
Assumptions	Output
<ul style="list-style-type: none"> • The economy reaches its potential in the medium term and remains in line with potential output growth. 	<ul style="list-style-type: none"> • Components of aggregate demand (GDP) • Price inflation • Federal transfers
Public Accounts Model	
Assumptions	Output
<ul style="list-style-type: none"> • Tax rates remain unchanged. • Having reached a surplus by 2000, a slight surplus will be maintained over most of the forecast period. 	<ul style="list-style-type: none"> • Government revenue • Government expenditures, excluding health • Government surplus/deficit • Stock of government debt
Health Expenditures Model	
Assumptions	Output
<ul style="list-style-type: none"> • Historical trends in the growth of real (inflation adjusted) public and private per capita health expenditures will continue. • These trends capture both changes in the level of access and increases in real consumption due to technology. 	<ul style="list-style-type: none"> • Health price index • Per capita health expenditures (public and private) • Total health expenditures (public and private)

Source: The Conference Board of Canada.

Demographic Projections Model

The Conference Board obtained projections of population by age and gender cohort from Statistics Canada. In order for Statistics Canada to develop these projections, however, assumptions regarding a number of key demographic parameters were required. These parameters include:

- **International migration.** By 2020, net international migration (as mentioned in the Overall Approach section, this means immigration and returning Canadians less emigration) will help fuel the slow but steady rise in Canadian population growth. Total immigration levels are expected to rise from current levels to the top of the government's target range, which is between 200,000 and 225,000 immigrants per year by 2008. After this point, the ageing population will start to

give way to labour shortages, making it necessary to increase immigration levels. The age and sex structure for the immigrant population is in line with historical averages. International migration is forecast to rise to 294,000 by 2020.

- **Birth rate.** The Natural Rate of Increase—or the number of births minus the number of deaths—is forecast to decline steadily over the long term. This is due, in part, to a gradual decline in the birth rate, which is projected to fall to 10 per 1,000 by the end of the forecast, down from 12 per 1,000 in 1997. The birth rate is largely influenced by two major factors: the number of women of child-bearing age and fertility rates.

Baby boomers—those born between 1947 and 1966—represent approximately one-third of the total Canadian population. They will greatly influence the direction that our population structure takes over the forecast period. As the boomers get older, a larger proportion of the population will be concentrated in the older age cohorts. The last of the baby boomers are now moving out of their child-bearing years. As a result, the number of women of child-bearing age will remain low throughout the medium term. Annual births have been declining since the end of the “baby-boom echo” in 1990 and are forecast to continue declining until 2005. After that point, however, the number of births will increase slowly as the “echo boomers”—the children of the baby boomers—reach their child-bearing years.

In the past, the fertility rate, defined as the average number of births that a woman will have over her lifetime, has been influenced by a host of different factors, including health, birth control, changing income levels, and education. The Conference Board predicts that income growth will be stable over the forecast period, and will therefore have little effect on fertility levels. In addition, the forecast assumes that labour force and post-secondary education levels are peaking for young women, who will be of child-bearing age in the coming years. This should help prevent further declines in the fertility rate over the forecast period.

Thus, we are assuming that the fertility rate will remain constant to the year 2020, at 1.55 children per woman. Note that this is well below the long-term replacement rate of 2.1, which represents the rate that is needed, excluding immigration, to keep the population stable.

- **Death rate.** The other half of the natural rate equation—the death rate—is expected to rise in Canada over the next 20 years. The number of deaths is largely linked to three important factors: the economic well-being of Canadians, access to health care and the age structure of the population. The first two factors have greatly improved over time. Before the 1930s, life expectancy was approximately 60 years for both males

and females. Advances in medicine, combined with better nutrition and public health, have contributed to a significant increase in life expectancy. Latest estimates suggest that the average Canadian male is now expected to live 75.7 years, while the average Canadian female is expected to live 81.5 years. Mortality rates are expected to remain at historical levels throughout the forecast period.

Still, the ageing of Canada's population will lead to a steady rise in the number of deaths. It is expected that the death rate will reach 8.7 deaths per 1,000 population by 2020, up from its 2000 level of 7.3 deaths per 1,000.

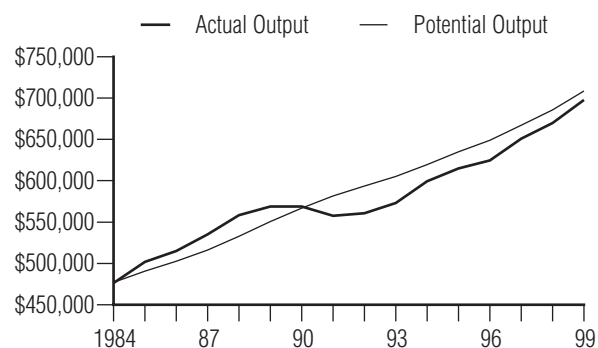
The output from the population projection model is a forecast of population for Canada and the provinces and territories by age and gender cohort to the year 2020. This forecast is key to the long-term economic outlook for the provinces and territories as well as to the estimates of provincial and territorial health expenditures for the next 20 years. The overall population of Canada is expected to rise, albeit slowly, over the long term. Population growth will slow from an annual growth rate of 0.84 per cent in 2000 to 0.78 per cent by 2020. With this information, we can calculate that our population is expected to reach 35.7 million in 2020, an increase of 5 million persons over the next 20 years.

Long-Term Economic Outlook

The Conference Board's National Forecasting Model provides the long-term economic outlook for Canada. There are a number of important inputs into this model, including the population forecast provided by Statistics Canada. The outlook provides us with a forecast of the components of aggregate demand (GDP), personal income and corporate profits, price inflation and transfers from the federal government to provincial and territorial governments.

In the early 1990s, the Canadian economy languished as a recession took hold. Overall real economic growth averaged only 1.5 per cent annually, more than one percentage point lower than in the previous decade. The gap between what the economy was actually producing and its potential output, often referred to as the "output gap," peaked in 1992 at 5.6 per cent.³ By 1996, this gap had narrowed to 4 per cent and the economy was starting to turn around. Real growth then averaged 3.6 per cent from 1997 to 1999, boosted by strong consumer demand and an improving fiscal situation. As a result, by 1999, the gap between potential and actual output had narrowed to 1.8 per cent (see Chart 1). The latest estimates from both The Conference Board of Canada and the Bank of Canada in its *Monetary Policy Report* suggest that this gap was fully closed by the end of 2000.⁴

Chart 1
Actual Output vs. Potential Output
(\$ 1992)



Sources: Statistics Canada; The Conference Board of Canada.

Recent estimates of potential output have been revised upwards because of information technology investment so that real GDP could expand at a strong pace over the next few years without putting upward pressure on inflation.⁵ These revisions have come about due to technological advances and the rapid growth in capital stock. After 2007, a general slowing in the rate of technological advance (as the high-tech sector matures and the pace of investment decelerates accordingly) combined with an easing of labour force growth will lead to average annual GDP growth of 2.5 per cent.

This pattern of growth will leave real GDP at its potential throughout the forecast period (see Section 3 for a more detailed description of potential output). Once the economy reaches its potential output, there are no business cycles—a common assumption for long-term economic forecasts.⁶

The Public Accounts Model

The public accounts model is used to project the combined fiscal situation of all of the provinces and territories over the next 20 years. A key assumption is that tax rates remain at current levels and reflect those incorporated in recent provincial and territorial budgets.

Government revenues have been estimated as a function of key determinants available from the Conference Board's long-term economic forecast. For instance, direct taxes are a function of personal income growth and corporate profits. Indirect taxes are based on consumer spending, while other revenues are a function of overall economic activity. The final component of government revenues, transfers from the federal government, had to be forecasted as well. Since 1996, federal cash transfers to health care, post-secondary education and social services have been allocated through the Canada Health and Social Transfer (CHST).⁷

In general, most medium-term forecasts for provincial and territorial government expenditures on goods and services are based on budget documents. However, in this study, a model was developed in order to determine a detailed long-term profile of health care expenditures (see The Health Expenditures Model section for a more detailed description). Meanwhile, the fiscal model also determines debt servicing charges and total taxpayer-supported debt because these costs have an impact on the available monies that could be allocated to health care.

In order to obtain a clear picture of public accounts, we need to provide an assumption on the level of the remaining expenditures that exclude health and debt servicing charges. In keeping with the assumption that the provincial and territorial governments' budgets are left with a slight surplus in almost every year from 2001 onwards,⁸ other expenditures (which include spending categories such as social services, education, transportation and economic development) are adjusted accordingly.

The key outputs provided by the public accounts model include:

- provincial and territorial government revenue by source;
- interest payments on the public debt;
- government balance; and
- stock of overall government debt.

The Health Expenditures Model

By using historical movements in provincial and territorial public health care expenditures by age and gender cohort, projections of per capita health expenditures have been obtained over the forecast period. Total provincial and territorial health expenditures are obtained by multiplying the population projections in each year.

All of the per capita public health care spending equations were estimated in real terms (inflation adjusted) as a function of federal cash transfers apportioned to health and a time trend variable to capture increases in per capita spending over and above inflation.⁹ The estimated trends capture both the change in the overall volume of health care services and the introduction of new technologies that lead to the provision of additional services. In principle, advances in technology should help to lower real per capita expenditures (e.g., a new drug treatment that reduces the requirement for surgery). However, in medicine, the development of new treatments for a previously untreatable condition can lead to increases in health expenditures. This is particularly true if the technology is expensive to develop and acquire.

The statistical results reveal some interesting conclusions:

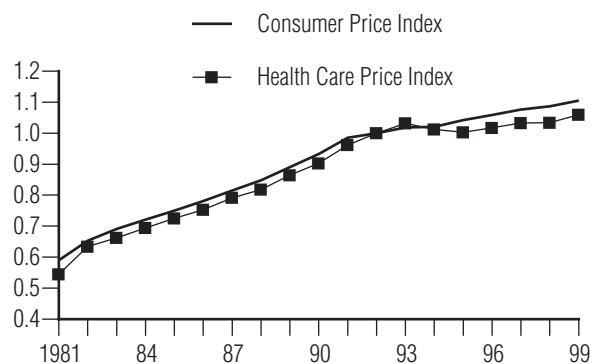
- Real per capita health care expenditures by age and gender cohort have been rising.

- The trend growth¹⁰ may be different between gender cohorts of the same age.
- The trend growth is much stronger among older cohorts (55–74).
- For the over-75 age cohorts, the trend growth falls.

For private health spending, a similar methodology was used. Per capita private health care spending equations were estimated in real terms as a function of a time trend variable to capture increases in spending over and above inflation. Again, the estimated trends capture anticipated changes in the volume of private health care services provided and increases in real consumption of health care. Once per capita private health care spending data are generated for the forecast period, these estimates are multiplied by population projections, resulting in estimates of overall private health spending.

An important component of the health expenditure model is a price index for health care spending. This index was estimated in consultation with Statistics Canada since a price index for public health expenditures does not currently exist. Public health care expenditures are composed primarily of wages and salary costs.¹¹ For this reason, a price index was created using data regarding health and social services spending on salaries, as well as employment in the health and social services fields. The price index represents the average salary in the health and social services industry.

Chart 2
Consumer Price Index versus Health Care Price Index, Canada
(1992=1.0)



Sources: Statistics Canada; The Conference Board of Canada.

History reveals that the health care price index (HPI) moves in line with the overall consumer price index (CPI). Therefore, in this analysis the HPI forecast is tied to the long-term forecast of Canada's CPI as estimated by the Conference Board in its long-term national forecast.¹² This analysis also assumes that the price deflators

are equal for both public and private expenditures. Estimates of private health care inflation are available from Statistics Canada as a component of the overall CPI. Historically, private health care inflation has not been significantly different than the constructed HPI.

This means that over the forecast period, the public-private distribution of health care expenditures

is not held explicitly constant. Rather, both sectors experienced similar rates of growth based on historical movements of the CPI, HPI and private health care inflation.

Details on the statistical history and outlook for the provincial and territorial public accounts and health expenditures are found in Appendix B.

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- 1 Since the objective of this study is to estimate the impact of provincial and territorial governments' health care costs relative to provincial and territorial governments' revenue collection, public spending refers to that of provincial and territorial governments only. Therefore, federal government direct spending and spending by municipal governments are excluded from the total public health care spending numbers.
 - 2 Others have challenged the notion that health care expenditures must necessarily increase over time for an ageing population. See Fries, "Aging and Natural Death, and the Compression of Morbidity," *New England Journal of Medicine*, vol. 303, no. 3 (1980), pp. 130–35. R.G. Evans et al, *Apocalypse No: Population Aging and the Future of the Health Care System* (Vancouver: University of British Columbia Centre for Health Services and Policy Research, March 2001). N.G. Levinsky et al, "Influence of Age on Medicare Expenditures and Medical Care in the Last Year of Life," *Journal of the American Medical Association*, vol. 26, no. 11 (September 2001).
 - 3 In the first half of the 1990s, growth in potential output averaged 2.3 per cent annually due to the slower pace of labour force growth and lower overall capital formation. Potential output growth in the second half of the decade averaged 2.7 per cent per year as both factors recovered.
 - 4 The Bank of Canada, *Monetary Policy Report* (Ottawa: The Bank of Canada, November 2000).
 - 5 Pedro Antunes, Mario Lefebvre, Jane McIntyre and Pascal Cormier, *IT and the New Economy: The Impact of Information Technology on Productivity and Growth* (Ottawa: The Conference Board of Canada, November 2000).
 - 6 It should be noted, however, that over the long term, the introduction of one or more recessions into the forecasting scenario would not significantly alter the average growth in output over the entire forecast period. This is due to an acceleration of economic growth following a recession, which offsets the period of slower growth.
 - 7 Glenn G. Brimacombe, *The First Ministers' Accord on Health Care—Can the Discussion Move to Structure from Money?* (Ottawa: The Conference Board of Canada, May 2001).
 - 8 In the aggregate, the surplus for the provinces and territories amounts to no more than 2.3 per cent of government revenues throughout the forecast period.
 - 9 As of April 1, 1996, federal cash transfers for health, education and social services were amalgamated under the Canada Health and Social Transfer (CHST), thereby making it difficult, if not impossible, to isolate cash transfers to health. Nonetheless, a historical series was constructed tying health transfers (pre-1996) to the CHST. This series also includes federal tax points that were transferred to the provinces. The level of the constructed federal health transfers data is not as important as its changes over time, allowing the constructed series to reflect policy decisions by the federal government. This is an important explanatory variable since government reductions (or strong cash transfers) will affect the supply of health care services in a way that is not necessarily related to public demand for health services. Thus, it is assumed that adding federal government transfers into the estimations will help to determine more accurately historical patterns in the demand for health care by age and gender cohort.
 - 10 Trend growth represents the average historical rate of change of a variable.
 - 11 According to the 1998/99 Annual Hospital Survey conducted by the Canadian Institute for Health Information, 70 per cent of health care costs are allocated for wages and salaries.
 - 12 The HPI and CPI are co-integrated, thus, an error correction model was used to tie the HPI to the CPI.

Results

In order to understand the long-term outlook for health care expenditures, we first look at some of the inputs that have gone into the models. Included in this section is a description of the long-term economic outlook for Canada, followed by a discussion of the forecast for the overall fiscal position of the provinces and territories. The section is then rounded out with the presentation of the results from the model simulations of public and private health expenditures by age and gender.

Long-Term Economic Outlook

Overview

Real growth in the Canadian economy, at least until 2002, should remain relatively strong at 3.5 per cent annually.¹ This follows a period of even stronger growth, which averaged 4.2 per cent per year between 1997 and 2000, and served to close the output gap (as discussed in the previous section). This economic strength was spurred on by a significant increase in the penetration of digital technology that is unprecedented and has fundamentally altered the structure of our economy.

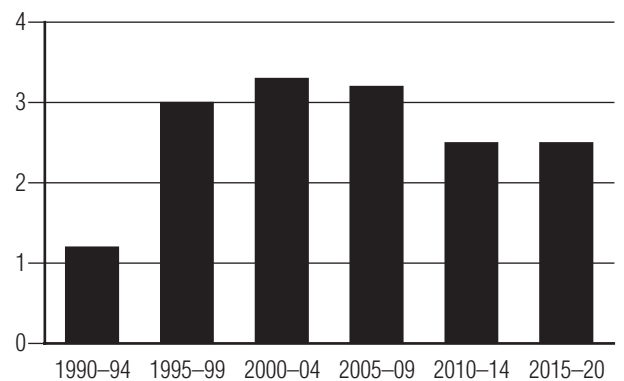
Take, for example, imports of office equipment. In 1994, these imports stood at \$12 billion in real terms. By 2000, they had grown to almost \$66 billion, becoming the largest component of imports. Machinery and equipment investment has also been significant: real private expenditures increased to \$91 billion, up from \$40 billion in 1994.

This change in the structure of the Canadian economy has implications for growth over the next 20 years. It allows for stronger potential output growth, stronger growth in labour productivity and downward pressure on the cost structure. However, there is a point at which current growth rates of machinery and equipment begin to generate absurd results. The forecast assumes that physical limits will impose a maturing of computer technology by 2008, and similarly a maturing of applications by 2014. In other words, there will come a point at which growth rates will level off. Growth in many other important categories of aggregate demand, such as consumption and investment, will return to trend levels over this period, as well.

This ageing population will contribute to slower labour force growth and lower rates of consumer spending. The slower labour force growth will keep real GDP growth in check over the latter part of the long-term forecast. This downward pressure will become most severe after 2005 as

baby boomers pass the age of 55. Consumer spending growth is expected to average 2.0 per cent annually from 2006 onwards, nearly a full percentage point lower than over the medium term. This is largely due to the fact that with a higher percentage of the population in older age cohorts, there will be less demand for new housing, and, in turn, less demand for purchases such as furniture and other durable consumer goods.

Chart 3
Real Growth in Gross Domestic Product
(average compound annual growth, percentage)



Sources: Statistics Canada; The Conference Board of Canada.

Overall, real GDP growth will therefore slow over the long term, falling from an average 3.2 per cent annually over the 2005-09 period to 2.5 per cent for the remainder of the forecast (see Chart 3).

Demographic Projection

From the assumptions set out in Section 2, three important trends emerged with respect to demographic patterns in Canada over the long term:

- The population is ageing.
- There is a slowing of the natural rate of population increase.
- There is an offsetting increase in international migration.

The final result of these trends is that Canada's population is expected to increase slowly over the long term, from an annual growth rate of 0.84 per cent in 2000 to 0.78 per cent by 2020. And, as mentioned, the result will

be that 5 million people will be added to our population over the next 20 years.

The Canadian population outlook results from the expected changes in the birth and death rates, as well as net migration flows. The natural level of population increase, defined as the excess number of births over deaths, is expected to fall sharply during the forecast period as the population ages. In 2020, this level is expected to be 52,000, which is less than one half of its current level (114,000 in the year 2000).

As mentioned earlier in the report, this change will occur for two reasons. Not only is the birth rate forecast to decline over the coming years, but also the death rate is likely to climb steadily due to the high number of baby boomers moving into the older age cohorts. In fact, by 2020, close to 25 per cent of our population will be in the 55–74 year age group (compared with 16 per cent in 2000). This will contribute to a substantial increase in the number of deaths.

The fall in the birth rate then only compounds the effects of this rising death rate. The birth rate is forecast to decline slowly for two reasons. First, the ageing population will exert downward pressure on the birth rate. Women who are currently in their child-bearing years will be past their peak fertility zone by the end of the forecast period. Since this group includes baby boomers, the group of child-bearing women that follows will be much smaller. Second, the fertility rate will remain steady at 1.55. These two factors will lower the number of births throughout the forecast period.

Net international migration will significantly contribute to population growth over the long term. By 2008, total immigration is expected to rise from its current level of approximately 200,000 per year to 225,000 per year. Increased labour shortages in the latter part of the forecast period, due to the ageing population, will make it necessary for Canada to increase immigration levels further. It is expected, therefore, that international migration will reach 294,000 people per year by 2020.

Labour Force

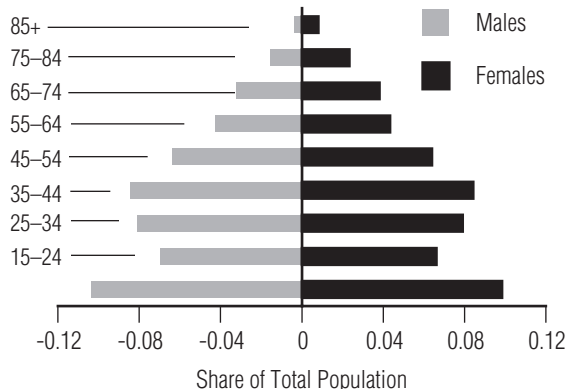
The ageing of the population will cause a slowdown in labour force growth for Canada over the forecast period. In the 1960s, the massive number of baby boomers entering the job market caused an explosion in labour force growth. However, this group's lower fertility rates are now contributing to the upcoming slowdown.

Participation rates² have been increasing as more women have been entering the workforce. But this trend is expected to slow over the coming years as female participation rates catch up to male participation rates. In addition, there will be a greater share of people in the higher age cohorts, which typically have lower

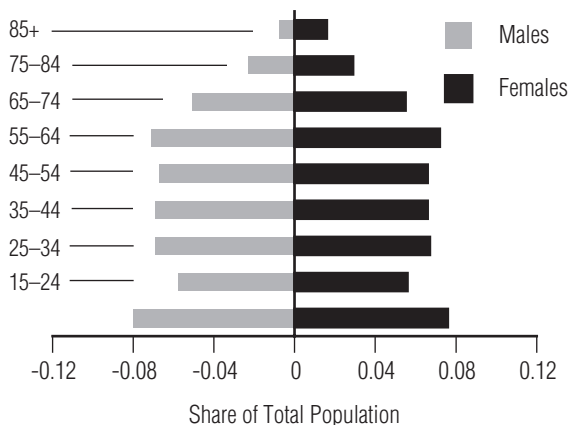
participation rates. These two factors combined will lead to a levelling off of the participation rate by the middle of this decade.

Chart 4
The Ageing of Canada's Population
(share of total population by age and gender cohort)

2000



2020



Sources: Statistics Canada; The Conference Board of Canada.

Thereafter, the ageing population alone could dominate the growth pattern of the overall participation rate, causing a decrease to 0.637 by 2020. However, it is assumed that labour shortages, also brought about by the ageing population, will push up real wages by 2007, thus keeping the participation rate steady at 0.655. This would lead to a stable unemployment rate over most of the long term, close to its natural rate of 5 per cent.³ However, it will not be enough to keep labour force growth steady for the forecast period. It is assumed that labour force growth will slow from 1.8 per cent per year in the current period to just 0.5 per cent annually by 2020.

Potential Output

Potential output represents the highest level of output that an economy can attain without surpassing capacity

limits and placing upward pressure on inflation. As such, it represents the measure of economic activity that can be sustained over a long period of time if all of the factors of production are fully and efficiently employed. We must remember, however, that potential output is a concept, and thus, it cannot be directly observed.

We therefore have to estimate potential output. To do so, we must assume that what an economy can produce is determined by the available labour force and the output that each worker can generate for a given capital stock. Therefore, potential output is estimated by the growth rate of the labour force and the capital stock, as well as the growth in productivity. The difference between real GDP and the potential output of an economy is often referred to as the "output gap." The recession of the early 1990s resulted in a substantial output gap for Canada.⁴ Fortunately, real growth has exceeded potential since 1992, and the gap was fully closed by the end of 2000. Future growth is now assumed to be limited to potential growth, so that inflationary pressures are not ignited. This means that the long-term growth forecast for Canada is now essentially set by the potential output growth.

The current decade is expected to see a rise in potential output growth, as the pace of high-tech investment growth continues to drive up capital stock. As mentioned earlier, this sector should reach maturity by 2008, with a resulting slowdown in the pace of capital stock investment thereafter. This factor, combined with a decline in annual labour force growth, will cause potential output growth to slow over the long term, as well. The pace of potential output growth should fall after 2005, to average just 2.5 per cent in the period from 2015 to 2020.

Fiscal Outlook

Overview

The fiscal situation in Canada today is vastly improved from that of a decade ago. Following the 1990–91 recession, total public debt reached 100 per cent of nominal GDP. This prompted all levels of government to respond with unprecedented spending reductions. As a result, by 1999 overall public spending as a share of nominal GDP had declined by more than 10 per cent from its peak of 52.4 per cent in 1992. These cuts, combined with renewed economic growth over the past few years, have resulted in a surplus situation, giving most governments some flexibility to increase spending and/or cut taxes, and/or pay down debt.

It is expected that the provinces and territories will remain in a slight surplus situation throughout the forecast period. Given this fact, debt as a share of current dollar GDP will continue to shrink. In 2000, provincial and territorial

debt represented 24.6 per cent of GDP. By 2020, this debt-to-GDP ratio will decline to 8.9 per cent. With an increasing population, provincial debt will also decline on a per capita basis, falling from \$8,284 in 2000 to \$5,972 in 2020.

Public Revenues

Provincial and territorial government revenues are composed mainly of direct and indirect taxes and transfer payments from the federal government. The taxes collected include personal and corporate income taxes, and indirect taxes such as provincial sales taxes. It is assumed for the purpose of this study that only those tax changes that have already been announced in budget documents will be included in the outlook.

The federal government provides cash transfers to the provinces and territories for several reasons, one being to assist them in financing health care services. Funds are provided through the CHST, which supports provincial programs in the areas of health, post-secondary education and social services. In September 2000, the federal government and the provinces and territories reached an agreement that would see cash transfers for health care rise sharply over the next couple of years. In specific terms, the CHST will provide to all provinces a total of \$18.3 billion in 2001–02, \$19.1 billion in the following year and then reach \$21.0 billion by 2005–06. These amounts have been incorporated into this study's forecast and are reflected in the provincial and territorial revenue estimates (see footnote 9, p.11).

The revenue growth expected from the increase in transfers over the next couple of years is being partially offset by lower tax revenues due to recently announced tax cuts in some provinces. Thus, over the next 10 years, average annual growth in total provincial and territorial government revenues will be marginally weaker than over the last decade of the forecast horizon. In current dollars, growth in total revenues will average 3.6 per cent annually between 2000 and 2010, before reaching 3.8 per cent annually between 2011 and 2020.

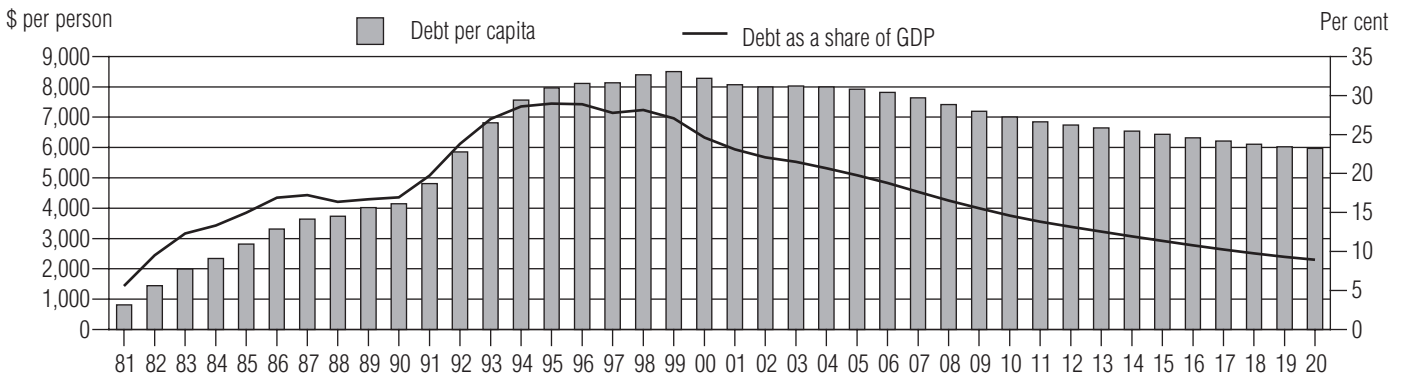
Public Expenditures

For the purposes of this forecasting exercise, provincial and territorial government expenditures have been divided into three categories:

- debt servicing charges;
- expenditures on other goods and services; and
- expenditures on health care.

Debt Servicing Charges

As mentioned previously, it is assumed that the provincial and territorial governments, already in an overall

Chart 5**Provincial/Territorial Debt: Per Capita and as a Share of Gross Domestic Product**

Sources: The Conference Board of Canada; Statistics Canada's Canadian System of Government Financial Management Statistics.

surplus situation, will maintain a slight surplus over most of the forecast period. This means that the stock of debt remains relatively flat in nominal terms over the forecast period. With interest rates held flat as well, debt charges, in current dollars, will also remain stable over the long term, thus debt charges as a share of total public expenditures are expected to fall from 14.7 per cent in 1999 to 6.2 per cent in 2020.

Expenditures on Other Goods and Services

Government expenditures on other goods and services include all monies spent by provincial and territorial governments that are not directed towards health care or servicing the public debt. This means that all provincial and territorial government expenditures on education, social services, transportation, corrections and administration are included in this expenditure category.

Expenditures on all other goods and services have been adjusted over the forecast period under the assumption of the provincial and territorial governments' slight surplus over most of the 20-year period. Thus, if health expenditures increase over the forecast period, expenditures on other goods and services are adjusted by the amount necessary to maintain this surplus.

Owing to their solid financial footing at the start of the forecast, it is expected that provincial and territorial governments will continue to have the flexibility to increase real per capita expenditures on all other goods and services, despite the increased allocation to health care.

In the aggregate, total current public expenditures on other goods and services are projected to increase from \$101.7 billion in 2000 to \$207.6 billion by 2020, with an average growth rate of 3.6 per cent over the forecast period.

In current dollar terms, expenditures on other goods and services are expected to rise from \$3,307 per person in 2000 to \$5,081 per person by 2020—an increase of 53.6 per cent. On a real per capita basis, expenditures on other goods and services are projected to increase to \$3,497 per person in 2020, up from \$2,981 per person in 2000—an increase of 17.3 per cent. Despite this increase, spending on other goods and services remains below pre 1990–91 recession levels in real per capita terms, suggesting that there have been restrictions on the level of public spending available for other goods and services.

Expenditures on Health Care

Expenditures on health care are determined by the health expenditures model and are described in Section 2. Keeping in mind that the report focuses on provincial and territorial health expenditures and revenue growth over the forecast period, expenditures by municipal governments and Workers' Compensation Boards, as well as federal government direct spending, have been excluded from the analysis. As of 2000, these categories of spending accounted for 8.3 per cent of total public spending and 4.9 per cent of total health spending in Canada.⁵

Health Expenditures Outlook

Our results show that the ageing population and the rising costs associated with it combine to increase total provincial and territorial nominal public and private health spending from \$89.5 billion in 2000 to \$243.8 billion in 2020. Of the total, 70 per cent (\$170.1 billion) comes from the public sector and the remaining 30 per cent (\$73.7 billion) from the private sector. Of note, the distribution

between the public and private sectors is expected to remain stable over the 20-year period. This reflects the similar rates of growth that each sector is expected to experience over the next two decades, rather than assuming that the current public-private distribution will remain constant.

Adjusted for inflation, total health spending is projected to increase from \$80.7 billion in 2000 to \$147.0 billion in 2020. Real provincial and territorial government health care expenditures are expected to increase from \$55.9 billion in 2000 to \$102.5 billion in 2020. This will lead to close to an approximate doubling (83 per cent) of real health care costs over the next 20 years.

This number becomes more important when one considers that, over the same time period, real growth in public expenditures on other goods and services will rise by 36.5 per cent. That is, allocations to health care outpace other expenditures by more than a 2:1 ratio. Similarly, over the same time frame, real private health spending is anticipated to increase from \$24.8 billion to \$44.5 billion—an increase of 79 per cent.

Likewise, we see that on a per capita basis, total public and private health care costs will rise as well. This is due, in part, to the fact that as people age, their health care consumption patterns become more expensive.

In 2000, total nominal per capita health expenditures stood at \$2,913—it is expected that this figure will grow to \$6,812 by 2020. Over the same period of time, public per capita spending will increase from \$2,017 to \$4,750, and private per capita spending from \$896 to \$2,062.

Adjusting for inflation, total per capita spending will increase from \$2,625 in 2000 to \$4,107 in 2020. Real public per capita health care expenditures will rise from \$1,818 in 2000 to \$2,864 in 2020, an increase of approximately \$1,000 per person, or 57.5 per cent. For the same period, real private per capita health spending will increase by 54 per cent, from \$807 to \$1,243.

Trends in Public Per Capita Health Care Expenditures

The Conference Board points to at least two critical factors

that will contribute to the rise in overall provincial and territorial health care expenditures:

- the significant rise in the number of seniors; and
- more than 50 per cent of a person's lifetime health care expenditures occur after the age of 65.

These factors reflect the growth in provincial and territorial real per capita health expenditures, which averaged 1.5 per cent annually between 1982 and 2000. This compares to an expected average annual growth of 2.3 per cent over the period 2001 to 2020.

The data also reveal an interesting trend when public per capita health care costs for men and women are compared. Specifically, women account for a greater portion of health care expenditures than men in five of the nine age cohorts in 1999, and six of the nine in 2020 (see Table 2). Women's health costs tend to be greater than men's during two general periods: their child-bearing years and later in life. The greatest differences in costs tend to exist in the child-bearing period, but they are nonetheless significant after age 85 as well. Therefore, the fact that women tend to live longer than men will

Table 2
Total Nominal (Real) Public Per Capita Health Expenditures, by Age and Sex

Age Cohort	1999		2020	
	Male	Female	Male	Female
All Ages	1,635 (1,543)	2,147 (2,026)	4,126 (2,487)	5,364 (3,233)
0–14	912 (861)	779 (735)	1,579 (952)	1,392 (839)
15–24	793 (748)	1,235 (1,166)	1,779 (1,072)	2,675 (1,612)
25–34	784 (740)	1,611 (1,521)	1,429 (862)	2,853 (1,720)
35–44	824 (778)	1,164 (1,098)	1,473 (888)	1,963 (1,183)
45–54	1,173 (1,107)	1,388 (1,310)	2,169 (1,308)	2,876 (1,734)
55–64	2,148 (2,028)	2,136 (2,017)	3,932 (2,370)	4,354 (2,625)
65–74	4,881 (4,607)	4,578 (4,321)	10,652 (6,421)	9,801 (5,908)
75–84	8,514 (8,036)	8,087 (7,633)	18,754 (11,305)	18,444 (11,118)
85+	15,238 (14,383)	16,157 (15,250)	28,655 (17,273)	34,352 (20,707)

Note: Real expenditures are in 1992 dollars. Total public health expenditures exclude direct federal, municipal and Workers' Compensation Board spending.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

likely contribute to increasing provincial and territorial health expenditures.

Furthermore, it is important to observe that for age cohorts from 45 to 54 onwards, nominal and real public health care expenditures for both men and women nearly double in each passing decade.

Not unexpectedly, the most important group to focus on is the baby boomers, as they constitute a large share of the overall population. Over the next 20 years, ageing baby boomers will boost the share of older age cohorts in the total population. By the end of the forecast period, baby boomers will fall between the ages of 55 and 74. Individuals over the age of 65 will make up 18.1 per cent of the Canadian population by 2020, compared to only 12.6 per cent in 2000.

The cost of treating baby boomers today (2000) is \$1,063 per person in real public terms (in 1992 dollars). At the same time, the cost of treating the current 55–74 year-old age cohort—where the baby boomers will be in 20 years—is about \$3,100. Looking ahead to 2020, we find that including technological change,⁶ but excluding inflation, the older age cohort would cost \$4,049 per person—nearly four times what each boomer costs today. If we further account for the impact of inflation, the cost of treating the baby boomers in 2020 will climb to \$6,718 per person.

Not only will the cost of treating baby boomers rise, but also there will be a rise in per capita public health expenditures over and above normal price inflation. This refers to the mix and level of health care services that are provided to an ageing population. While there can be an overall increase in the level of health services provided, there also can be the same level or volume of services, but this might be more costly to provide.

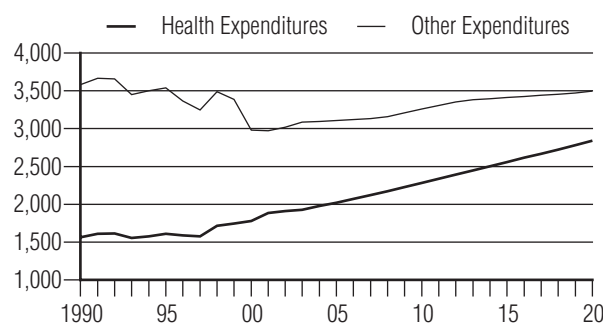
In principle, advances in technology should contribute to lowering real per capita expenditures (e.g., a new drug treatment that reduces the requirement for surgery, or new surgical techniques that reduce the length of hospital stay). However, in health care, the development of new treatments for a previously untreatable condition can lead to increases in health expenditures. This is particularly true if the technology is expensive to develop and acquire.⁷

Throughout the 1990s, moderate increases in government spending (federal, provincial and territorial) have caused provincial and territorial real per capita health expenditures to remain fairly stagnant (and even fall in some years) over the period from 1990 to 1998. That having been said, over the forecast period, a number of factors will contribute to the strong growth in real provincial and territorial health care spending, including:

- the ageing of the baby boomers;
- an increase in federal cash transfers; and
- technological progress.

This suggests that other public programs, such as education, welfare, infrastructure and administration, are not likely to receive as great a dollar share of provincial and territorial revenues as they do today. This sets the stage for considerable tension during budget debates (see Chart 6).⁸ Still, with provincial and territorial governments on their current solid footing, they are expected to be able to increase, on a real per capita basis, expenditures on other goods and services throughout the 20-year period.

Chart 6
Real Public Per Capita Spending on Health and Other Goods and Services
(1992 dollars per person)



Sources: The Conference Board of Canada; Ontario Treasury; Health Canada; Canadian Institute for Health Information.

Public Health Expenditures as a Share of Total Government Revenues

Canada's ageing population will certainly have an impact on public and private health expenditures over the next 20 years. And this stark fact leads us to a second issue: the growth of public expenditures in relation to future public revenues. An in-depth examination is necessary in order to help determine both the financial affordability and the long-term sustainability of provincial and territorial health care systems.

As a first step, we converted real per capita expenditures to total current dollar expenditures by accounting for demographic change and price inflation. Thus, overall public expenditures on health are expected to post an average annual growth of 5.2 per cent over the period 2001 to 2020. Of this growth, 2.1 percentage points per year can be attributed to inflation, 1.4 percentage points to real increases in the volume of services provided, and 1.7 percentage points to demographics.

The 1.7 percentage-point contribution attributed to demographic movements can be broken down in terms of two contributing factors: an ageing population (0.9 per cent), and population growth (0.8 per cent).

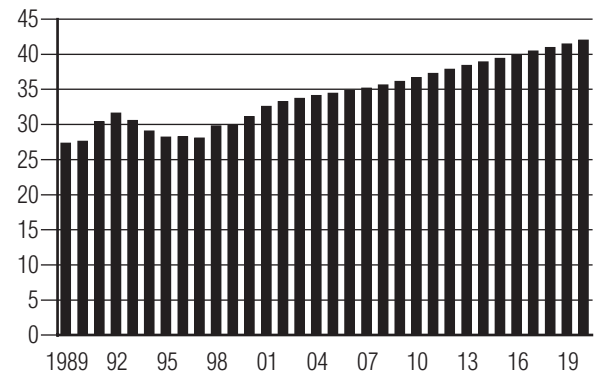
Overall expenditures on health care can be compared to total provincial and territorial revenues (both of which are measured in current dollar terms). As a share of total revenue, health expenditures are projected to increase from 31.1 per cent in 2000 to 42.0 per cent in 2020. This means that 42 cents of every tax and federal transfer dollar obtained by provincial and territorial governments will be allocated to health care in 2020.

Framed in a different context, in the aggregate, total provincial and territorial health expenditures as a percentage of GDP are projected to increase from 8.7 per cent to 10.2 per cent. If one were to look at public health spending in relation to GDP only, one would observe that on a national basis provincial and territorial, public health spending as a share of GDP is expected to increase from 6.0 per cent in 2000 to 7.1 per cent in 2020. At the same time, private health spending as a share of GDP would increase from 2.7 per cent to 3.1 per cent.

On this basis alone, one could argue that future increases in health care expenditures are manageable in relation to overall economic growth. However, given the manner in which our tax system is constructed, there is no one-to-one relationship between nominal economic growth and the public revenue dollars that accrue to governments. This means that some of our taxes, such as excise and property taxes, are not as responsive to economic growth. In addition, an ageing population will tend to consume less and save more, reducing the government's revenue stream on some indirect taxes, such as retail sales taxes. As a result, the overall share of government revenues relative to GDP is expected to decline over the next 20 years.

Therefore, what may appear to be manageable in the context of overall GDP is less manageable when compared to overall public revenues. Furthermore, while health care is clearly a fundamental service, other sectors in society also have a legitimate claim on the public purse. With health care expenditures expected to rise over the next 20 years, the government will have a difficult balancing act in terms of collecting public revenues and then allocating them among competing social programs and other important public initiatives.

Chart 7
Provincial and Territorial Health Expenditures as a Share of Total Government Revenues
(per cent)



Sources: The Conference Board of Canada; Ontario Treasury; Health Canada; Canadian Institute for Health Information.

Table 3
Total Nominal (Real) Private Per Capita Health Expenditures, by Age and Sex

Age Cohort	1999		2020	
	Male	Female	Male	Female
All Ages	775 (732)	944 (891)	1,901 (1,146)	2,220 (1,338)
0–14	552 (521)	564 (533)	1,276 (769)	1,320 (796)
15–24	563 (532)	578 (546)	1,621 (977)	1,655 (997)
25–34	492 (464)	602 (568)	739 (446)	972 (587)
35–44	637 (601)	754 (712)	1,257 (758)	1,531 (923)
45–54	770 (727)	948 (895)	1,563 (942)	2,039 (1,229)
55–64	1,091 (1,030)	1,086 (1,025)	2,771 (1,670)	2,725 (1,642)
65–74	1,639 (1,547)	1,835 (1,732)	3,253 (1,961)	3,292 (1,985)
75–84	1,912 (1,805)	2,271 (2,143)	4,116 (2,481)	4,275 (2,577)
85 +	3,191 (3,012)	4,047 (3,820)	6,073 (3,661)	7,665 (4,621)

Note: Real expenditures are in 1992 dollars.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Trends in Private Per Capita Health Care Expenditures

A growing and ageing population will also play a key role in contributing to private health care expenditures. Historical trends indicate that real private per capita expenditures have been rising steadily over time across most age cohorts. Once aggregated, these trend increases are not significantly different from those for the public sector. Therefore, as we move forward, the mix of public and private health care spending is not expected to change significantly, remaining at roughly 30 per cent for the private sector over the entire horizon of the 20-year forecast.⁹

The historical data do reveal some noteworthy points about private real per capita health expenditures. As with

public per capita data, trends for men and women in the same cohorts are quite similar. The data also reveal significant increases in private health care expenditures for the 65–74 and 75–84 age cohorts over the period 1992 to 2000. These increases mirror the declines witnessed in real public per capita expenditures for the same cohorts.

In the aggregate, real private per capita health expenditures were \$807 in 2000. By 2020, they are expected to reach \$1,243 per person, representing an average growth rate of 2.2 per cent over the forecast period. This growth rate is slightly lower than that estimated for per capita public expenditures (see Table 3).

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- 1 Given the events of September 11, 2001, the Conference Board has released a revised short-term forecast.
 - 2 The participation rate (or labour force participation rate) is defined as the proportion of those employed and unemployed relative to the population aged 15 and over.
 - 3 The natural rate of unemployment is when the economy is at full-employment equilibrium; that is, there is only voluntary (as opposed to involuntary) unemployment. While short-term rates of unemployment may differ, it is the rate to which it would tend to over the long run.
 - 4 The output gap is estimated to have peaked at 5.7 per cent of potential output in 1992.
 - 5 The Canadian Institute for Health Information, *National Health Expenditure Trends, 1975–2000*, (Ottawa: The Canadian Institute for Health Information, 2000).
 - 6 This is defined as a residual of the increase in the volume of services that cannot be attributed to specific factors. While the structure of the health care system is held constant for the purposes of the analysis, it is recognized that technological innovation can have an impact on how and at what level services are provided.

- 7 The long-term trends in per capita health expenditures were estimated using statistical methods over the historical period. Results indicate that, in general, real per capita health expenditures have risen significantly due to technological change and increases in the level of access to health care.
- 8 This issue is discussed in more detail in The Conference Board of Canada's publication *Performance and Potential, 2001–02*, Chapter 6, "Canada's Fiscal Strength Allows Social Policy Choices," and Chapter 7 "Finding a Future for Canada's Health Care System."
- 9 These results are based on the assumption that there are no structural changes to the method of delivery of health care and that consumption patterns remain in line with those observed in the past.

Conclusions

While others have undertaken projections of future health care expenditures in Canada, and/or in relation to GDP, the Conference Board has taken the additional step of estimating how overall economic growth translates into a public revenue stream for all provinces. At the same time, it has also incorporated projections of private health spending into the model.

This is an essential feature of the analysis and one that no one else has explicitly addressed in the Canadian context. Framed this way, the study considers the future health care resource requirements within an expenditure and revenue function approach.

Based on its analysis, The Conference Board of Canada determined that, as a share of provincial and territorial government spending, health care expenditures in Canada are projected to increase from 31.1 per cent in 2000 to 42.0 per cent in 2020.

At the same time, the analysis shows that while real public per capita spending on health will increase from \$1,818 in 2000 to \$2,864 (an increase of 58 per cent), real public per capita spending on other goods and services will increase by approximately \$500 (or 17 per cent).

Perhaps provincial and territorial governments will feel compelled to use the savings that accrue from reduced debt servicing requirements to meet the additional demands that will be placed on the health care system by a growing and ageing population. In any case, we can expect escalating tensions between those seeking more dollars for health care versus those seeking additional resources for all the other services funded by government. This will challenge the financial sustainability of what the provincial and territorial governments currently provide, notwithstanding the possibilities of expanding public coverage under Medicare.

Not unexpectedly, a loud voice in the debate over resource allocation will be that of the baby-boom generation. Given their influence in the political arena, baby

boomers will likely be successful in demanding additional funding for health care, or they will push to have their needs met by private delivery mechanisms.

Another interesting point to keep in mind is that this report covers only the period to 2020. At that time, those at the tail end of the baby boom, who represent the largest portion of this cohort, will just be reaching their most expensive health care years. Obviously, the strains and competition for resources will not end in 2020. In fact, perhaps the biggest problems will be seen after the current forecast period ends.

Although there are defined limitations to this analysis, and no one has the ability to predict the future with complete accuracy, it appears that the projected cost of health care in Canada could well be an underestimate. Clearly, more research in this area is warranted.

It is also important to emphasize that forecasting models are built on a number of assumptions and economic relationships. This point is raised because when one undertakes projections about future public spending on health and its relationship to government revenues, the question is not necessarily one of whether the analysis is “right,” but more importantly, whether it will serve to inform the policy debate and influence current behaviour.

If the status quo is not sustainable, then the study serves to underscore the need for further research and discussion when it comes to looking at the system’s structure, and how and at what level it should be financed.

Finally, it is also important to understand that the impact of a growing and ageing population washing onto the shores of the health care system will not happen overnight. In fact, it would appear that we have time to think carefully about the policy issues and develop a course of action so that we can structure the health care system to meet the objective of timely access to quality care within an affordable financial structure.

Economic Assumptions

Demographic Projections

- Net international immigration levels will rise from the current range of 200,000–225,000 per year to 294,000 by 2020.
- The age and sex structure of the immigrant population is in line with recent historical averages.
- The overall fertility rate is held constant at 1.55 births per woman, and the number of births by age is held in line with recent historical averages.
- Mortality rates and their patterns are also held in line with recent historical averages.

Economic Projections

- Population growth and age/gender composition play a key role in determining potential output and consumption patterns.
- The economy will reach potential output over the next few years, and economic growth will remain in line with potential thereafter.
- With resources “fully employed,” the unemployment rate will stabilize at just over its natural rate of 5.0 per cent.

- Interest rates will remain stable over the forecast period.
- Inflation will remain in check, averaging 2.1 per cent annually over the forecast period.
- The fiscal regimes (at the federal, provincial and territorial levels) will remain unchanged from what has already been announced.
- In the aggregate, provincial and territorial budgets will maintain a slight surplus throughout the forecast period. This is done by adjusting expenditures on other government goods and services, excluding health care spending and debt servicing (which are determined within the models).

Health Expenditure Projections

- Historical patterns in real per capita increases in health care consumption (by age and gender cohort) were examined for the period 1980 to 1999. These spending patterns were maintained over the following 20-year forecast period.
- Price inflation is roughly equal across all sectors of the economy, including health care delivery in both the public and private sectors.

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Table 1a
Key Economic Indicators

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Gross Domestic Product at Factor Cost (millions of constant \$ 1992)	483,350 3.0	469,034 -3.0	480,971 2.5	508,010 5.6	534,324 5.2	548,405 2.6	569,537 3.9	594,891 4.5	607,564 2.1	609,231 0.3	600,004 -1.5	604,282 0.7	618,423 2.3
Gross Domestic Product at Market Prices (millions of current \$)	360,494 14.4	379,734 5.3	411,160 8.3	449,249 9.3	485,139 8.0	511,796 5.5	558,106 9.0	611,785 9.6	656,190 7.3	678,135 3.3	683,239 0.8	698,544 2.2	724,960 3.8
Implicit Deflator for GDP at Factor Cost	0.654 11.0	0.710 8.5	0.748 5.3	0.773 3.4	0.792 2.5	0.814 2.8	0.853 4.7	0.892 4.5	0.933 4.6	0.961 3.1	0.987 2.7	1.000 1.3	1.014 1.5
Consumer Price Index (1992 = 1.00)	0.589 12.4	0.653 10.8	0.691 5.9	0.721 4.3	0.750 4.0	0.781 4.2	0.815 4.3	0.848 4.0	0.890 5.0	0.933 4.8	0.985 5.6	1.000 1.5	1.018 1.9
Consumer Price Index – Health (1992 = 1.00)	0.545	0.634 16.4	0.662 4.5	0.694 4.8	0.725 4.4	0.753 3.8	0.792 5.1	0.818 3.3	0.864 5.6	0.902 4.4	0.962 6.6	1.000 4.0	1.032 3.2
Personal Income (millions of current \$)	290,909 16.9	321,897 10.7	339,180 5.4	367,516 8.4	398,025 8.3	426,001 7.0	458,025 7.5	502,777 9.8	546,569 8.7	586,875 7.4	605,432 3.2	621,007 2.6	633,774 2.1
Personal Disposable Income (millions of current \$)	239,290 16.0	264,174 10.4	276,336 4.6	300,066 8.6	323,889 7.9	341,395 5.4	363,367 6.4	396,406 9.1	434,080 9.5	458,913 5.7	473,918 3.3	485,139 2.4	497,209 2.5
Personal Savings Rate	17.4	20.1	16.8	16.6	15.7	13.4	11.9	12.2	13.0	12.9	13.2	13.0	11.9
Before Tax Corporate Profits (millions of current \$)	35,549 -7.4	26,357 -25.9	36,369 38.0	45,244 24.4	49,246 8.8	44,631 -9.4	57,253 28.3	64,060 11.9	58,807 -8.2	43,988 -25.2	32,101 -27.0	31,978 -0.4	39,996 25.1
Population (000s)	24,820 1.2	25,117 1.2	25,367 1.0	25,608 0.9	25,843 0.9	26,101 1.0	26,450 1.3	26,798 1.3	27,286 1.8	27,701 1.5	28,031 1.2	28,377 1.2	28,703 1.2
Employment (000s)	11,294 3.0	10,951 -3.0	11,025 0.7	11,300 2.5	11,619 2.8	11,978 3.1	12,319 2.8	12,710 3.2	12,986 2.2	13,085 0.8	12,852 -1.8	12,758 -0.7	12,859 0.8
Unemployment Rate	7.6	11.0	12.0	11.3	10.7	9.7	8.8	7.8	7.6	8.1	10.3	11.2	11.4

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada.

Table 1b
Key Economic Indicators

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Gross Domestic Product at Factor Cost (millions of constant \$ 1992)	645,957 4.5	663,082 2.7	673,090 1.5	700,807 4.1	721,005 2.9	750,470 4.1	783,061 4.3	809,530 3.4	835,557 3.2	857,606 2.6	884,276 3.1	911,444 3.1	942,782 3.4
Gross Domestic Product at Market Prices (millions of current \$)	767,506 5.9	807,088 5.2	833,070 3.2	877,921 5.4	901,805 2.7	957,911 6.2	1,034,876 8.0	1,083,506 4.7	1,132,389 4.5	1,175,777 3.8	1,228,838 4.5	1,282,243 4.3	1,340,774 4.6
Implicit Deflator for GDP at Factor Cost	1.026 1.1	1.049 2.3	1.067 1.6	1.077 1.0	1.071 -0.6	1.088 1.6	1.122 3.2	1.137 1.3	1.150 1.2	1.162 1.1	1.177 1.2	1.190 1.2	1.203 1.1
Consumer Price Index (1992 = 1.00)	1.020 0.2	1.042 2.2	1.059 1.6	1.076 1.6	1.086 1.0	1.105 1.7	1.134 2.6	1.155 1.8	1.172 1.5	1.192 1.7	1.215 1.9	1.238 1.9	1.261 1.8
Consumer Price Index – Health (1992 = 1.00)	1.012 -1.9	1.003 -0.9	1.017 1.4	1.032 1.5	1.034 0.1	1.059 2.5	1.109 4.7	1.131 2.0	1.149 1.6	1.170 1.8	1.193 2.0	1.217 2.0	1.240 1.9
Personal Income (millions of current \$)	646,684 2.0	672,423 4.0	687,708 2.3	714,643 3.9	745,919 4.4	776,120 4.0	821,932 5.9	852,370 3.7	886,631 4.0	920,951 3.9	959,650 4.2	1,000,291 4.2	1,043,486 4.3
Personal Disposable Income (millions of current \$)	503,471 1.3	521,409 3.6	529,788 1.6	546,788 3.2	567,960 3.9	590,608 4.0	628,273 6.4	656,427 4.5	686,990 4.7	712,913 3.8	743,170 4.2	775,135 4.3	815,769 5.2
Personal Savings Rate	9.4	9.2	7.0	4.7	4.5	3.6	4.4	4.6	5.0	4.7	4.9	4.9	5.7
Before Tax Corporate Profits (millions of current \$)	64,118 60.3	75,309 17.5	79,135 5.1	86,512 9.3	81,671 -5.6	101,032 23.7	128,626 27.3	137,889 7.2	144,360 4.7	145,199 0.6	149,832 3.2	150,372 0.4	157,078 4.5
Population (000s)	29,036 1.2	29,354 1.1	29,672 1.1	29,987 1.1	30,247 0.9	30,491 0.8	30,747 0.8	30,998 0.8	31,244 0.8	31,487 0.8	31,728 0.8	31,967 0.8	32,205 0.7
Employment (000s)	13,110 2.0	13,358 1.9	13,464 0.8	13,774 2.3	14,139 2.6	14,533 2.8	14,893 2.5	15,102 1.4	15,328 1.5	15,503 1.1	15,769 1.7	16,027 1.6	16,293 1.7
Unemployment Rate	10.4	9.4	9.7	9.1	8.3	7.6	6.9	7.2	7.0	7.1	6.6	6.2	5.8

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada.

Table 1c
Key Economic Indicators

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Gross Domestic Product at Factor Cost (millions of constant \$ 1992)	975,953 3.5	1,005,214 3.0	1,032,659 2.7	1,060,295 2.7	1,087,182 2.5	1,114,613 2.5	1,142,538 2.5	1,171,155 2.5	1,201,024 2.6	1,231,564 2.5	1,261,958 2.5	1,293,768 2.5	1,327,064 2.6	1,361,466 2.6
Gross Domestic Product at Market Prices (millions of current \$)	1,404,812 4.8	1,464,912 4.3	1,524,879 4.1	1,588,461 4.2	1,653,384 4.1	1,722,467 4.2	1,795,706 4.3	1,871,080 4.2	1,949,927 4.2	2,032,223 4.2	2,114,283 4.0	2,203,627 4.2	2,297,057 4.2	2,393,274 4.2
Implicit Deflator for GDP at Factor Cost	1.217 1.2	1.233 1.3	1.250 1.4	1.269 1.5	1.290 1.6	1.311 1.7	1.334 1.7	1.357 1.7	1.380 1.7	1.404 1.7	1.427 1.6	1.451 1.7	1.476 1.7	1.501 1.7
Consumer Price Index (1992 = 1.00)	1.284 1.8	1.308 1.9	1.333 1.9	1.359 2.0	1.388 2.1	1.417 2.1	1.446 2.1	1.476 2.1	1.507 2.1	1.538 2.1	1.571 2.1	1.604 2.1	1.640 2.2	1.676 2.2
Consumer Price Index – Health (1992 = 1.00)	1.264 1.9	1.288 1.9	1.314 2.0	1.340 2.0	1.369 2.1	1.398 2.1	1.428 2.1	1.458 2.1	1.489 2.1	1.521 2.1	1.553 2.1	1.587 2.2	1.623 2.2	1.659 2.2
Personal Income (millions of current \$)	1,088,325 4.3	1,133,491 4.2	1,178,297 4.0	1,224,775 3.9	1,273,959 4.0	1,325,780 4.1	1,380,338 4.1	1,438,028 4.2	1,497,993 4.2	1,558,639 4.0	1,623,064 4.1	1,691,614 4.2	1,763,549 4.3	1,837,806 4.2
Personal Disposable Income (millions of current \$)	853,685 4.6	889,788 4.2	925,485 4.0	962,067 4.0	1,000,828 4.0	1,041,489 4.1	1,084,779 4.2	1,130,049 4.2	1,177,143 4.2	1,224,885 4.1	1,276,129 4.2	1,329,900 4.2	1,386,178 4.2	1,444,373 4.2
Personal Savings Rate	5.7	5.6	5.7	5.9	6.0	6.2	6.5	6.6	6.7	6.6	6.6	6.7	6.7	6.7
Before Tax Corporate Profits (millions of current \$)	164,607 4.8	168,714 2.5	173,532 2.9	179,917 3.7	182,661 1.5	189,586 3.8	197,509 4.2	203,765 3.2	210,888 3.5	220,070 4.4	224,416 2.0	231,551 3.2	239,491 3.4	247,626 3.4
Population (000s)	32,444 0.7	32,683 0.7	32,923 0.7	33,167 0.7	33,414 0.7	33,663 0.7	33,916 0.8	34,172 0.8	34,432 0.8	34,696 0.8	34,963 0.8	35,234 0.8	35,509 0.8	35,787 0.8
Employment (000s)	16,599 1.9	16,819 1.3	16,984 1.0	17,122 0.8	17,256 0.8	17,386 0.8	17,507 0.7	17,637 0.7	17,767 0.7	17,877 0.6	18,007 0.7	18,142 0.8	18,280 0.8	18,392 0.6
Unemployment Rate	5.1	4.8	4.9	5.0	5.2	5.4	5.5	5.6	5.5	5.6	5.5	5.3	5.0	4.9

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada.

Table 2a
Provincial and Territorial Government Revenues and Expenditures
(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Revenues									132,492	141,664	142,688	144,954	150,598
Personal Income Tax									33,544	38,385	39,239	37,397	39,781
Corporate Income Tax									6,445	5,730	5,127	4,455	4,918
Indirect Tax									29,823	30,508	31,205	31,768	32,839
Revenues from Other Sources									36,893	39,790	39,341	40,497	42,636
Total Expenditures									135,725	147,013	161,943	170,698	172,067
Expenditures Excluding Debt Servicing									118,887	128,591	142,238	149,618	148,283
Expenditures on Health									36194.1	39,061	43,313	45,787	46,011
As a Share of Total Revenues									27.3	27.6	30.4	31.6	30.6
As a Share of Total Expenditures									26.7	26.6	26.7	26.8	26.7
Other Expenditures									82,693	89,530	98,925	103,832	102,272
Debt Servicing									16,838	18,422	19,705	21,079	23,784
Surplus (deficit)	20,037	36,142	50,630	59,819	72,720	86,383	96,211	100,098	(3,233)	(5,349)	(19,255)	(25,744)	(21,470)
Taxpayer Supported Debt	-5.0	80.4	40.1	18.1	21.6	18.8	11.4	4.0	9.4	4.8	17.4	23.4	17.7
Debt Per Capita (\$ per person)	807	1,439	1,996	2,336	2,814	3,310	3,637	3,735	4,015	4,143	4,807	5,859	6,817
	-6.2	78.2	38.7	17.0	20.5	17.6	9.9	2.7	7.5	3.2	16.0	21.9	16.4
Debt as a Share of GDP	5.6	9.5	12.3	13.3	15.0	16.9	17.2	16.4	16.7	16.9	19.7	23.8	27.0

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada, Statistics Canada's Canadian System of Government Financial Management Statistics (converted to calendar year).

Table 2b
Provincial and Territorial Government Revenues and Expenditures
(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Revenues	159,073	167,922	169,738	173,601	179,880	188,656	194,795	202,776	206,177	210,592	219,279	228,338	237,151
	5.6	5.6	1.1	2.3	3.6	4.9	3.3	4.1	1.7	2.1	4.1	4.1	3.9
Personal Income Tax	40,598	42,362	44,888	46,401	48,808	50,795	52,541	51,469	51,545	53,019	55,435	57,991	60,454
	2.1	4.3	6.0	3.4	5.2	4.1	3.4	-2.0	0.1	2.9	4.6	4.6	4.2
Corporate Income Tax	6,621	8,492	9,612	11,351	11,847	11,712	11,901	12,267	12,655	12,748	13,102	13,664	14,230
	34.6	28.3	13.2	18.1	4.4	-1.1	1.6	3.1	3.2	0.7	2.8	4.3	4.1
Indirect Tax	34,585	36,412	37,179	38,559	41,399	43,537	45,156	47,076	49,006	50,941	52,966	55,112	57,360
	5.3	5.3	2.1	3.7	7.4	5.2	3.7	4.3	4.1	3.9	4.0	4.1	4.1
Revenues from Other Sources	46,427	48,736	50,212	52,134	50,340	54,015	56,783	57,818	58,663	60,064	62,219	64,589	66,551
	8.9	5.0	3.0	3.8	-3.4	7.3	5.1	1.8	1.5	2.4	3.6	3.8	3.0
Total Expenditures	175,096	178,672	176,734	176,112	190,523	193,943	190,321	198,397	205,688	213,490	220,436	227,884	235,325
	1.8	2.0	-1.1	-0.4	8.2	1.8	-1.9	4.2	3.7	3.8	3.3	3.4	3.3
Expenditures Excluding Debt Servicing	149,191	151,533	149,565	149,203	162,688	165,681	162,285	170,213	177,047	184,629	191,979	199,396	207,152
	0.6	1.6	-1.3	-0.2	9.0	1.8	-2.0	4.9	4.0	4.3	4.0	3.9	3.9
Expenditures on Health	46,240.1	47,386.2	47,940.3	48,714.1	53,607.3	56,300.1	60,601.9	66,024.0	68,581.4	71,010.8	74,781.7	78,595.5	82,601.8
	0.5	2.4	1.3	1.6	10.0	5.0	7.6	8.9	3.9	3.5	5.3	5.1	5.1
As a Share of Total Revenues	29.1	28.2	28.2	28.1	29.8	29.8	31.1	32.6	33.3	33.7	34.1	34.4	34.8
As a Share of Total Expenditures	26.4	26.5	27.1	27.7	28.1	29.0	31.8	33.3	33.3	33.3	33.9	34.5	35.1
Other Expenditures	102,951	104,197	101,624	100,489	109,081	109,381	101,683	104,189	108,465	113,619	117,197	120,801	124,550
	0.7	1.2	-2.5	-1.1	8.5	0.3	-7.0	2.5	4.1	4.8	3.1	3.1	3.1
Debt Servicing	25,904	27,139	27,169	26,909	27,835	28,263	28,036	28,184	28,641	28,861	28,457	28,487	28,173
	(16,023)	(10,750)	(6,996)	(2,511)	(10,643)	(5,287)	4,474	4,379	489	(2,899)	(1,157)	454	1,826
Surplus (deficit)							254,696	250,317	249,828	252,727	253,884	253,430	251,604
Taxpayer Supported Debt							-1.7	-1.7	-0.2	1.2	0.5	-0.2	-0.7
Debt Per Capita (\$ per person)	7,562	7,961	8,114	8,133	8,394	8,500	8,284	8,075	7,996	8,026	8,002	7,928	7,813
	10.9	5.3	1.9	0.2	3.2	1.3	-2.5	-2.5	-1.0	0.4	-0.3	-0.9	-1.5
Debt as a Share of GDP	28.6	29.0	28.9	27.8	28.2	27.1	24.6	23.1	22.1	21.5	20.7	19.8	18.8

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada's Canadian System of Government Financial Management Statistics (converted to calendar year).

Table 2c
Provincial and Territorial Government Revenues and Expenditures
(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Revenues	246,966 4.1	256,706 3.9	266,584 3.8	276,828 3.8	287,055 3.7	297,765 3.7	308,974 3.8	320,667 3.8	332,963 3.8	345,666 3.8	358,298 3.7	372,048 3.8	386,489 3.9	401,225 3.8
Personal Income Tax	63,258 4.6	66,237 4.7	69,205 4.5	72,282 4.4	75,402 4.3	78,841 4.6	82,507 4.7	86,320 4.6	90,245 4.5	94,197 4.4	98,482 4.5	103,014 4.6	107,779 4.6	112,704 4.6
Corporate Income Tax	15,014 5.5	15,598 3.9	16,242 4.1	17,002 4.7	17,557 3.3	18,387 4.7	19,300 5.0	20,135 4.3	21,044 4.5	22,096 5.0	22,861 3.5	23,806 4.1	24,814 4.2	25,847 4.2
Indirect Tax	59,702 4.1	61,971 3.8	64,168 3.5	66,326 3.4	68,544 3.3	70,785 3.3	73,088 3.3	75,489 3.3	78,107 3.5	80,822 3.5	83,690 3.5	86,697 3.6	89,891 3.7	93,177 3.7
Revenues from Other Sources	68,607 3.1	70,414 2.6	72,180 2.5	73,861 2.3	75,588 2.3	77,365 2.4	79,212 2.4	81,290 2.6	83,448 2.7	85,728 2.7	87,932 2.6	90,446 2.9	93,003 2.8	95,460 2.6
Total Expenditures	242,999 3.3	251,381 3.4	261,229 3.9	272,176 4.2	283,634 4.2	295,694 4.3	307,502 4.0	318,999 3.7	330,887 3.7	343,258 3.7	356,311 3.8	370,171 3.9	385,068 4.0	401,034 4.1
Expenditures Excluding Debt Servicing	215,399 4.0	224,517 4.2	235,037 4.7	246,476 4.9	258,237 4.8	270,471 4.7	282,394 4.4	294,037 4.1	306,105 4.1	318,652 4.1	331,755 4.1	345,591 4.2	360,382 4.3	376,181 4.4
Expenditures on Health	86,880.5 5.2	91,467.0 5.3	96,306.1 5.3	101,478.3 5.4	106,964.5 5.4	112,661.9 5.3	118,584.2 5.3	124,729.8 5.2	131,195.4 5.2	137,953.9 5.2	144,866.4 5.0	152,319.4 5.1	160,240.5 5.2	168,577.1 5.2
As a Share of Total Revenues	35.2	35.6	36.1	36.7	37.3	37.8	38.4	38.9	39.4	39.9	40.4	40.9	41.5	42.0
As a Share of Total Expenditures	35.8	36.4	36.9	37.3	37.7	38.1	38.6	39.1	39.6	40.2	40.7	41.1	41.6	42.0
Other Expenditures	128,519 3.2	133,050 3.5	138,731 4.3	144,998 4.5	151,272 4.3	157,809 4.3	163,810 3.8	169,307 3.4	174,910 3.3	180,698 3.3	186,889 3.4	193,272 3.4	200,142 3.6	207,604 3.7
Debt Servicing	27,600	26,864	26,191	25,699	25,398	25,223	25,108	24,962	24,781	24,607	24,556	24,579	24,686	24,853
Surplus (deficit)	3,967	5,325	5,355	4,652	3,420	2,072	1,472	1,668	2,077	2,407	1,987	1,878	1,420	191
Taxpayer Supported Debt	247,637 -1.6	242,312 -2.2	236,957 -2.2	232,305 -2.0	228,885 -1.5	226,813 -0.9	225,341 -0.6	223,673 -0.7	221,596 -0.9	219,189 -1.1	217,201 -0.9	215,323 -0.9	213,903 -0.7	213,712 -0.1
Debt Per Capita (\$ per person)	7,633 -2.3	7,414 -2.9	7,197 -2.9	7,004 -2.7	6,850 -2.2	6,738 -1.6	6,644 -1.4	6,545 -1.5	6,436 -1.7	6,317 -1.8	6,212 -1.7	6,111 -1.6	6,024 -1.4	5,972 -0.9
Debt as a Share of GDP	17.6	16.5	15.5	14.6	13.8	13.2	12.5	12.0	11.4	10.8	10.3	9.8	9.3	8.9

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada's Canadian System of Government Financial Management Statistics (converted to calendar year).

Table 3a
Real and Current Dollar Health Expenditures (Public* and Private)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Health Expenditures (millions of current \$)	24,992 17.6	29,317 17.3	32,471 10.8	35,034 7.9	37,953 8.3	41,314 8.9	44,562 7.9	48,593 9.0	53,501 10.1	58,028 8.5	63,005 8.6	66,369 5.3	68,105 2.6
Total Health Expenditures (millions of 1992 \$)	45,891	46,261 0.8	49,030 6.0	50,468 2.9	52,347 3.7	54,875 4.8	56,292 2.6	59,403 5.5	61,910 4.2	64,301 3.9	65,507 1.9	66,369 1.3	66,009 -0.5
Public Health Expenditures (millions of current \$)	18,658 18.1	22,004 17.9	24,512 11.4	26,247 7.1	28,206 7.5	30,505 8.1	32,828 7.6	35,798 9.0	39,316 9.8	42,451 8.0	46,110 8.6	48,271 4.7	48,543 0.6
Public Health Expenditures (millions of 1992 \$)	34,260	34,723 1.3	37,013 6.6	37,811 2.2	38,904 2.9	40,518 4.1	41,470 2.3	43,761 5.5	45,496 4.0	47,040 3.4	47,941 1.9	48,270 0.7	47,050 -2.5
Private Health Expenditures (millions of current \$)	6,334 16.1	7,312 15.4	7,959 8.8	8,786 10.4	9,747 10.9	10,809 10.9	11,734 8.6	12,795 9.1	14,184 10.9	15,577 9.8	16,895 8.5	18,099 7.1	19,561 8.1
Private Health Expenditures (millions of 1992 \$)	11,631	11,539 -0.8	12,017 4.1	12,657 5.3	13,443 6.2	14,357 6.8	14,822 3.2	15,642 5.5	16,414 4.9	17,261 5.2	17,566 1.8	18,098 3.0	18,960 4.8
Per Capita Health Expenditures (current \$ per person)	1,007 16.2	1,167 15.9	1,280 9.7	1,368 6.9	1,469 7.3	1,583 7.8	1,685 6.4	1,813 7.6	1,961 8.1	2,095 6.8	2,248 7.3	2,339 4.1	2,373 1.4
Per Capita Health Expenditures (1992 \$ per person)	1,849	1,842 -0.4	1,933 4.9	1,971 2.0	2,026 2.8	2,102 3.8	2,128 1.2	2,217 4.2	2,269 2.4	2,321 2.3	2,337 0.7	2,339 0.1	2,300 -1.7
Per Capita Public Health Expenditures (current \$ per person)	752 16.7	876 16.5	966 10.3	1,025 6.1	1,091 6.5	1,169 7.1	1,241 6.2	1,336 7.6	1,441 7.9	1,532 6.4	1,645 7.3	1,701 3.4	1,691 -0.6
Per Capita Public Health Expenditures (1992 \$ per person)	1,380	1,382 0.2	1,459 5.5	1,477 1.2	1,505 2.0	1,552 3.1	1,568 1.0	1,633 4.2	1,667 2.1	1,698 1.8	1,710 0.7	1,701 -0.5	1,639 -3.6
Per Capita Private Health Expenditures (current \$ per person)	255 14.7	291 14.1	314 7.8	343 9.4	377 9.9	414 9.8	444 7.1	477 7.6	520 8.9	562 8.2	603 7.2	638 5.8	682 6.9
Per Capita Private Health Expenditures (1992 \$ per person)	469	459 -2.0	474 3.1	494 4.3	520 5.2	550 5.7	560 1.9	584 4.2	602 3.1	623 3.6	627 0.6	638 1.8	661 3.6

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada; Health Canada; Canadian Institute for Health Information (CIHI).

Table 3b
Real and Current Dollar Health Expenditures (Public* and Private)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Health Expenditures (millions of current \$)	69,485 2.0	70,499 1.5	71,394 1.3	74,614 4.5	79,207 6.2	83,966 6.0	89,567 6.7	96,468 7.7	100,459 4.1	104,434 4.0	109,876 5.2	115,450 5.1	121,271 5.0
Total Health Expenditures (millions of 1992 \$)	68,660 4.0	70,309 2.4	70,209 -0.1	72,267 2.9	76,632 6.0	79,255 3.4	80,732 1.9	85,279 5.6	87,413 2.5	89,272 2.1	92,095 3.2	94,890 3.0	97,811 3.1
Public Health Expenditures (millions of current \$)	48,976 0.9	48,937 -0.1	49,025 0.2	50,818 3.7	54,101 6.5	57,727 6.7	62,028 7.5	67,450 8.7	70,008 3.8	72,437 3.5	76,208 5.2	80,022 5.0	84,028 5.0
Public Health Expenditures (millions of 1992 \$)	48,395 2.9	48,805 0.8	48,211 -1.2	49,219 2.1	52,342 6.3	54,488 4.1	55,910 2.6	59,627 6.6	60,916 2.2	61,921 1.6	63,876 3.2	65,771 3.0	67,773 3.0
Private Health Expenditures (millions of current \$)	20,509 4.8	21,562 5.1	22,369 3.7	23,797 6.4	25,106 5.5	26,239 4.5	27,539 5.0	29,017 5.4	30,452 4.9	31,996 5.1	33,668 5.2	35,428 5.2	37,243 5.1
Private Health Expenditures (millions of 1992 \$)	20,265 6.9	21,504 6.1	21,998 2.3	23,048 4.8	24,290 5.4	24,767 2.0	24,823 0.2	25,652 3.3	26,497 3.3	27,351 3.2	28,220 3.2	29,119 3.2	30,038 3.2
Per Capita Health Expenditures (current \$ per person)	2,393 0.9	2,402 0.4	2,406 0.2	2,488 3.4	2,619 5.2	2,754 5.2	2,913 5.8	3,112 6.8	3,215 3.3	3,317 3.2	3,463 4.4	3,612 4.3	3,766 4.3
Per Capita Health Expenditures (1992 \$ per person)	2,365 2.8	2,395 1.3	2,366 -1.2	2,410 1.8	2,534 5.1	2,599 2.6	2,626 1.0	2,751 4.8	2,798 1.7	2,835 1.3	2,903 2.4	2,968 2.3	3,037 2.3
Per Capita Public Health Expenditures (current \$ per person)	1,687 -0.3	1,667 -1.2	1,652 -0.9	1,695 2.6	1,789 5.5	1,893 5.8	2,017 6.6	2,176 7.9	2,241 3.0	2,301 2.7	2,402 4.4	2,503 4.2	2,609 4.2
Per Capita Public Health Expenditures (1992 \$ per person)	1,667 1.7	1,663 -0.2	1,625 -2.3	1,641 1.0	1,731 5.4	1,787 3.3	1,818 1.8	1,924 5.8	1,950 1.4	1,967 0.9	2,013 2.4	2,057 2.2	2,104 2.3
Per Capita Private Health Expenditures (current \$ per person)	706 3.6	735 4.0	754 2.6	794 5.3	830 4.6	861 3.7	896 4.1	936 4.5	975 4.1	1,016 4.3	1,061 4.4	1,108 4.4	1,156 4.3
Per Capita Private Health Expenditures (1992 \$ per person)	698 5.7	733 5.0	741 1.2	769 3.7	803 4.5	812 1.1	807 -0.6	828 2.5	848 2.5	869 2.4	889 2.4	911 2.4	933 2.4

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada; Health Canada; Canadian Institute for Health Information (CIHI).

Table 3c
Real and Current Dollar Health Expenditures (Public* and Private)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Health Expenditures (millions of current \$)	127,441 5.1	134,008 5.2	140,919 5.2	148,274 5.2	156,084 5.3	164,220 5.2	172,677 5.2	181,450 5.1	190,659 5.1	200,283 5.0	210,167 4.9	220,767 5.0	232,001 5.1	243,789 5.1
Total Health Expenditures (millions of 1992 \$)	100,853 3.1	104,026 3.1	107,280 3.1	110,641 3.1	114,036 3.1	117,472 3.0	120,945 3.0	124,446 2.9	128,038 2.9	131,698 2.9	135,316 2.7	139,106 2.8	142,984 2.8	146,955 2.8
Public Health Expenditures (millions of current \$)	88,307 5.1	92,893 5.2	97,733 5.2	102,905 5.3	108,391 5.3	114,088 5.3	120,011 5.2	126,156 5.1	132,622 5.1	139,380 5.1	146,293 5.0	153,746 5.1	161,667 5.2	170,003 5.2
Public Health Expenditures (millions of 1992 \$)	69,884 3.1	72,110 3.2	74,403 3.2	76,787 3.2	79,192 3.1	81,611 3.1	84,057 3.0	86,524 2.9	89,063 2.9	91,651 2.9	94,190 2.8	96,876 2.9	99,637 2.8	102,477 2.9
Private Health Expenditures (millions of current \$)	39,134 5.1	41,115 5.1	43,186 5.0	45,369 5.1	47,693 5.1	50,131 5.1	52,667 5.1	55,293 5.0	58,037 5.0	60,903 4.9	63,875 4.9	67,021 4.9	70,334 4.9	73,786 4.9
Private Health Expenditures (millions of 1992 \$)	30,969 3.1	31,916 3.1	32,877 3.0	33,854 3.0	34,845 2.9	35,861 2.9	36,889 2.9	37,923 2.8	38,975 2.8	40,047 2.8	41,126 2.7	42,230 2.7	43,348 2.6	44,478 2.6
Per Capita Health Expenditures (current \$ per person)	3,928 4.3	4,100 4.4	4,280 4.4	4,471 4.4	4,671 4.5	4,878 4.4	5,091 4.4	5,310 4.3	5,537 4.3	5,773 4.2	6,011 4.1	6,266 4.2	6,534 4.3	6,812 4.3
Per Capita Health Expenditures (1992 \$ per person)	3,109 2.4	3,183 2.4	3,258 2.4	3,336 2.4	3,413 2.3	3,490 2.2	3,566 2.2	3,642 2.1	3,719 2.1	3,796 2.1	3,870 2.0	3,948 2.0	4,027 2.0	4,106 2.0
Per Capita Public Health Expenditures (current \$ per person)	2,722 4.3	2,842 4.4	2,968 4.4	3,103 4.5	3,244 4.6	3,389 4.5	3,538 4.4	3,692 4.3	3,852 4.3	4,017 4.3	4,184 4.2	4,364 4.3	4,553 4.3	4,750 4.3
Per Capita Public Health Expenditures (1992 \$ per person)	2,154 2.4	2,206 2.4	2,260 2.4	2,315 2.4	2,370 2.4	2,424 2.3	2,478 2.2	2,532 2.2	2,587 2.2	2,642 2.1	2,694 2.0	2,749 2.1	2,806 2.1	2,864 2.1
Per Capita Private Health Expenditures (current \$ per person)	1,206 4.3	1,258 4.3	1,312 4.3	1,368 4.3	1,427 4.3	1,489 4.3	1,553 4.3	1,618 4.2	1,686 4.2	1,755 4.1	1,827 4.1	1,902 4.1	1,981 4.1	2,062 4.1
Per Capita Private Health Expenditures (1992 \$ per person)	955 2.3	977 2.3	999 2.3	1,021 2.2	1,043 2.2	1,065 2.2	1,088 2.1	1,110 2.0	1,132 2.0	1,154 2.0	1,176 1.9	1,199 1.9	1,221 1.9	1,243 1.8

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada; Health Canada; Canadian Institute for Health Information (CIHI).

Table 4a
Population by Age Cohort
(thousands of people)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Population	24,820 1.2	25,117 1.2	25,367 1.0	25,608 0.9	25,843 0.9	26,101 1.0	26,450 1.3	26,798 1.3	27,286 1.8	27,701 1.5	28,031 1.2	28,377 1.2	28,703 1.2
Aged 0 to 14	5,533 -0.8	5,525 -0.1	5,523 -0.1	5,517 -0.1	5,503 -0.3	5,485 -0.3	5,525 0.7	5,576 0.9	5,656 1.4	5,733 1.3	5,790 1.0	5,870 1.4	5,925 0.9
Aged 15 to 24	4,846 0.1	4,787 -1.2	4,698 -1.9	4,607 -1.9	4,517 -2.0	4,434 -1.8	4,322 -2.5	4,203 -2.8	4,126 -1.8	4,063 -1.5	4,016 -1.2	4,000 -0.4	3,986 -0.4
Aged 25 to 34	4,335 2.6	4,417 1.9	4,498 1.8	4,580 1.8	4,667 1.9	4,762 2.0	4,873 2.3	4,968 2.0	5,080 2.3	5,120 0.8	5,089 -0.6	5,036 -1.1	4,968 -1.3
Aged 35 to 44	3,039 3.7	3,200 5.3	3,345 4.5	3,476 3.9	3,607 3.7	3,735 3.6	3,875 3.7	4,014 3.6	4,182 4.2	4,344 3.9	4,474 3.0	4,557 1.8	4,660 2.3
Aged 45 to 54	2,515 0.2	2,523 0.3	2,529 0.2	2,543 0.6	2,555 0.5	2,581 1.0	2,631 1.9	2,707 2.9	2,805 3.6	2,902 3.5	3,016 3.9	3,183 5.5	3,343 5.0
Aged 55 to 64	2,176 2.2	2,224 2.2	2,275 2.3	2,319 1.9	2,345 1.1	2,366 0.9	2,385 0.8	2,403 0.8	2,411 0.3	2,419 0.3	2,428 0.4	2,436 0.3	2,451 0.6
Aged 65 to 74	1,487 2.8	1,519 2.2	1,545 1.7	1,574 1.9	1,622 3.1	1,673 3.1	1,731 3.4	1,776 2.6	1,824 2.7	1,870 2.5	1,923 2.8	1,965 2.2	2,009 2.2
Aged 75 to 84	695 3.5	720 3.6	746 3.7	775 3.8	804 3.7	832 3.5	866 4.1	900 3.9	937 4.2	975 4.0	1,006 3.3	1,031 2.5	1,052 2.0
Aged 85 and Over	196 3.8	203 3.6	208 2.8	216 3.5	224 3.8	232 3.6	243 4.7	252 4.0	264 4.8	276 4.5	288 4.3	299 3.8	310 3.8
Aged 65 and Over	2,377 3.1	2,442 2.7	2,499 2.4	2,565 2.6	2,650 3.3	2,737 3.3	2,839 3.7	2,928 3.1	3,026 3.3	3,121 3.1	3,217 3.1	3,296 2.4	3,371 2.3

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada.

Table 4b
Population by Age Cohort
(thousands of people)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Population	29,036 1.2	29,354 1.1	29,672 1.1	29,987 1.1	30,247 0.9	30,491 0.8	30,747 0.8	30,998 0.8	31,244 0.8	31,487 0.8	31,728 0.8	31,967 0.8	32,205 0.7
Aged 0 to 14	5,961 0.6	5,977 0.3	5,992 0.3	5,985 -0.1	5,957 -0.5	5,917 -0.7	5,880 -0.6	5,842 -0.7	5,806 -0.6	5,772 -0.6	5,725 -0.8	5,662 -1.1	5,600 -1.1
Aged 15 to 24	3,991 0.1	4,001 0.3	4,024 0.6	4,054 0.8	4,084 0.7	4,122 0.9	4,149 0.7	4,174 0.6	4,194 0.5	4,213 0.5	4,239 0.6	4,273 0.8	4,306 0.8
Aged 25 to 34	4,900 -1.4	4,828 -1.5	4,746 -1.7	4,663 -1.8	4,553 -2.4	4,452 -2.2	4,380 -1.6	4,346 -0.8	4,337 -0.2	4,337 0.0	4,345 0.2	4,355 0.2	4,370 0.3
Aged 35 to 44	4,769 2.3	4,885 2.4	5,002 2.4	5,112 2.2	5,207 1.9	5,270 1.2	5,301 0.6	5,295 -0.1	5,249 -0.9	5,186 -1.2	5,121 -1.3	5,051 -1.4	4,976 -1.5
Aged 45 to 54	3,496 4.6	3,647 4.3	3,788 3.9	3,931 3.8	4,066 3.4	4,211 3.5	4,364 3.6	4,496 3.0	4,587 2.0	4,687 2.2	4,794 2.3	4,904 2.3	5,013 2.2
Aged 55 to 64	2,479 1.1	2,505 1.0	2,539 1.4	2,584 1.8	2,650 2.6	2,729 3.0	2,812 3.1	2,915 3.6	3,075 5.5	3,227 4.9	3,369 4.4	3,510 4.2	3,646 3.9
Aged 65 to 74	2,045 1.8	2,070 1.2	2,090 1.0	2,110 0.9	2,126 0.7	2,130 0.2	2,138 0.3	2,148 0.5	2,158 0.5	2,172 0.7	2,195 1.0	2,216 1.0	2,249 1.5
Aged 75 to 84	1,073 2.0	1,109 3.3	1,147 3.4	1,191 3.8	1,229 3.2	1,265 3.0	1,301 2.8	1,339 3.0	1,374 2.6	1,410 2.6	1,440 2.1	1,462 1.6	1,483 1.4
Aged 85 and Over	322 3.6	333 3.5	345 3.5	358 3.8	375 4.9	395 5.3	422 6.8	444 5.1	463 4.5	482 4.0	502 4.2	531 5.8	562 5.7
Aged 65 and Over	3,440 2.1	3,512 2.1	3,582 2.0	3,658 2.1	3,730 1.9	3,791 1.6	3,861 1.8	3,931 1.8	3,996 1.7	4,064 1.7	4,136 1.8	4,210 1.8	4,294 2.0

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada.

Table 4c
Population by Age Cohort
(thousands of people)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Population	32,444 0.7	32,683 0.7	32,923 0.7	33,167 0.7	33,414 0.7	33,663 0.7	33,916 0.8	34,172 0.8	34,432 0.8	34,696 0.8	34,963 0.8	35,234 0.8	35,509 0.8	35,787 0.8
Aged 0 to 14	5,542 -1.0	5,494 -0.9	5,455 -0.7	5,419 -0.6	5,389 -0.6	5,385 -0.1	5,395 0.2	5,412 0.3	5,433 0.4	5,457 0.5	5,486 0.5	5,518 0.6	5,552 0.6	5,587 0.6
Aged 15 to 24	4,340 0.8	4,363 0.5	4,378 0.3	4,389 0.2	4,399 0.2	4,389 -0.2	4,372 -0.4	4,338 -0.8	4,289 -1.1	4,239 -1.2	4,190 -1.2	4,149 -1.0	4,115 -0.8	4,084 -0.8
Aged 25 to 34	4,398 0.6	4,434 0.8	4,476 0.9	4,510 0.8	4,542 0.7	4,570 0.6	4,598 0.6	4,633 0.8	4,677 1.0	4,720 0.9	4,765 1.0	4,801 0.7	4,829 0.6	4,853 0.5
Aged 35 to 44	4,892 -1.7	4,795 -2.0	4,704 -1.9	4,644 -1.3	4,620 -0.5	4,622 0.0	4,633 0.2	4,651 0.4	4,674 0.5	4,701 0.6	4,741 0.9	4,789 1.0	4,843 1.1	4,891 1.0
Aged 45 to 54	5,110 1.9	5,201 1.8	5,266 1.3	5,300 0.7	5,300 0.0	5,284 -0.7	5,210 -1.0	5,155 -1.1	5,096 -1.1	5,032 -1.2	4,961 -1.4	4,876 -1.7	4,799 -1.6	4,751 -1.0
Aged 55 to 64	3,779 3.6	3,907 3.4	4,047 3.6	4,194 3.6	4,323 3.1	4,414 2.1	4,513 2.3	4,619 2.3	4,728 2.4	4,836 2.3	4,933 2.0	5,024 1.8	5,091 1.3	5,130 0.8
Aged 65 to 74	2,291 1.9	2,355 2.8	2,431 3.2	2,510 3.2	2,605 3.8	2,752 5.7	2,892 5.1	3,022 4.5	3,151 4.3	3,275 3.9	3,397 3.7	3,516 3.5	3,645 3.7	3,780 3.7
Aged 75 to 84	1,500 1.1	1,515 1.0	1,523 0.5	1,532 0.6	1,544 0.8	1,556 0.8	1,572 1.0	1,594 1.4	1,616 1.4	1,648 1.9	1,687 2.4	1,743 3.3	1,806 3.6	1,871 3.6
Aged 85 and Over	591 5.3	618 4.5	644 4.2	668 3.8	691 3.4	711 2.9	731 2.8	748 2.4	768 2.6	787 2.5	804 2.2	818 1.8	829 1.3	841 1.4
Aged 65 and Over	4,383 2.1	4,488 2.4	4,598 2.4	4,710 2.4	4,840 2.8	5,020 3.7	5,194 3.5	5,364 3.3	5,536 3.2	5,710 3.2	5,888 3.1	6,077 3.2	6,280 3.3	6,492 3.4

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Statistics Canada.

Table 5a
Population by Age and Sex (Share of Total Population)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Males	22.29	22.00	21.77	21.55	21.29	21.01	20.89	20.81	20.73	20.69	20.66	20.68	20.64
Females	77.71	78.00	78.23	78.45	78.71	78.99	79.11	79.19	79.27	79.31	79.34	79.32	79.36
Aged 0 to 14	30.38	29.77	29.12	28.48	27.85	27.23	26.53	25.83	25.23	24.75	24.40	24.17	23.94
Males	19.53	19.06	18.52	17.99	17.48	16.99	16.34	15.68	15.12	14.67	14.33	14.10	13.89
Females	10.86	10.71	10.60	10.49	10.38	10.25	10.19	10.14	10.10	10.09	10.07	10.08	10.06
Aged 15 to 24	27.07	26.95	26.81	26.69	26.59	26.53	26.39	26.20	26.01	25.65	25.16	24.63	24.09
Males	17.46	17.59	17.73	17.89	18.06	18.25	18.42	18.54	18.62	18.48	18.16	17.75	17.31
Females	9.61	9.36	9.08	8.80	8.53	8.29	7.97	7.66	7.40	7.17	7.00	6.89	6.78
Aged 25 to 34	20.93	21.50	22.02	22.48	22.95	23.38	23.79	24.17	24.54	24.84	24.96	24.85	24.80
Males	12.24	12.74	13.19	13.58	13.96	14.31	14.65	14.98	15.33	15.68	15.96	16.06	16.24
Females	8.69	8.75	8.83	8.91	8.99	9.07	9.14	9.19	9.22	9.16	8.99	8.79	8.57
Aged 35 to 44	16.14	16.30	16.46	16.63	16.78	16.97	17.21	17.54	17.91	18.30	18.73	19.24	19.76
Males	10.13	10.04	9.97	9.93	9.89	9.89	9.95	10.10	10.28	10.48	10.76	11.22	11.65
Females	6.00	6.26	6.49	6.70	6.90	7.08	7.26	7.44	7.63	7.82	7.97	8.03	8.12
Aged 45 to 54	13.79	13.83	13.91	13.98	13.98	13.98	13.96	13.98	13.94	13.93	14.00	14.16	14.34
Males	8.77	8.85	8.97	9.05	9.07	9.06	9.02	8.97	8.84	8.73	8.66	8.58	8.54
Females	5.02	4.97	4.94	4.92	4.90	4.91	4.94	5.01	5.10	5.20	5.34	5.58	5.80
Aged 55 to 64	10.57	10.67	10.77	10.86	10.99	11.10	11.19	11.23	11.20	11.19	11.25	11.27	11.32
Males	5.99	6.05	6.09	6.15	6.28	6.41	6.54	6.63	6.69	6.75	6.86	6.93	7.00
Females	4.58	4.62	4.68	4.71	4.71	4.69	4.65	4.60	4.52	4.44	4.39	4.35	4.32
Aged 65 to 74	6.07	6.17	6.28	6.41	6.57	6.73	6.90	7.03	7.13	7.25	7.37	7.44	7.50
Males	2.80	2.87	2.94	3.03	3.11	3.19	3.27	3.36	3.44	3.52	3.59	3.63	3.66
Females	3.27	3.31	3.34	3.38	3.46	3.55	3.62	3.67	3.70	3.73	3.78	3.80	3.83
Aged 75 to 84	2.47	2.53	2.59	2.66	2.74	2.81	2.90	2.97	3.05	3.12	3.20	3.25	3.30
Males	0.79	0.81	0.82	0.84	0.87	0.89	0.92	0.94	0.97	1.00	1.03	1.05	1.08
Females	1.68	1.72	1.77	1.82	1.87	1.93	1.98	2.03	2.08	2.13	2.17	2.20	2.22
Aged 85 and Over	10.11	10.27	10.42	10.60	10.85	11.10	11.37	11.58	11.76	11.96	12.19	12.35	12.50
Males	9.58	9.72	9.85	10.02	10.25	10.49	10.73	10.93	11.09	11.27	11.48	11.61	11.74
Females	0.53	0.55	0.56	0.58	0.60	0.62	0.64	0.65	0.67	0.69	0.71	0.74	0.76
Aged 65 and Over	5.48	5.58	5.67	5.79	5.94	6.09	6.24	6.35	6.45	6.55	6.66	6.74	6.80
Males	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Females	5.48	5.58	5.67	5.79	5.94	6.09	6.24	6.35	6.45	6.55	6.66	6.74	6.80

For each indicator, the share is based on the total population.

Sources: The Conference Board of Canada; Statistics Canada.

Table 5b
Population by Age and Sex (Share of Total Population)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Males	20.53	20.36	20.19	19.96	19.70	19.41	19.12	18.85	18.58	18.33	18.04	17.71	17.39
Females	79.47	79.64	79.81	80.04	80.30	80.59	80.88	81.15	81.42	81.67	81.96	82.29	82.61
Aged 0 to 14	23.75	23.55	23.40	23.24	23.10	22.97	22.81	22.65	22.48	22.31	22.15	21.99	21.84
Males	13.75	13.63	13.56	13.52	13.50	13.52	13.49	13.47	13.42	13.38	13.36	13.37	13.37
Females	10.00	9.92	9.84	9.72	9.59	9.45	9.32	9.18	9.05	8.93	8.79	8.63	8.47
Aged 15 to 24	23.59	23.10	22.62	22.15	21.64	21.20	20.83	20.59	20.43	20.30	20.22	20.15	20.09
Males	16.88	16.45	15.99	15.55	15.05	14.60	14.24	14.02	13.88	13.77	13.69	13.62	13.57
Females	6.71	6.65	6.62	6.60	6.59	6.60	6.58	6.57	6.55	6.53	6.52	6.53	6.52
Aged 25 to 34	24.77	24.77	24.76	24.73	24.65	24.50	24.28	24.01	23.65	23.26	22.89	22.52	22.14
Males	16.42	16.64	16.86	17.05	17.21	17.28	17.24	17.08	16.80	16.47	16.14	15.80	15.45
Females	8.35	8.13	7.91	7.69	7.44	7.22	7.04	6.93	6.85	6.79	6.75	6.71	6.69
Aged 35 to 44	20.25	20.74	21.19	21.62	22.03	22.42	22.77	23.00	23.04	23.08	23.13	23.19	23.24
Males	12.04	12.42	12.77	13.11	13.44	13.81	14.19	14.51	14.68	14.89	15.11	15.34	15.57
Females	8.21	8.32	8.42	8.51	8.58	8.61	8.58	8.50	8.35	8.19	8.02	7.85	7.67
Aged 45 to 54	14.55	14.75	14.95	15.18	15.50	15.87	16.26	16.68	17.20	17.71	18.19	18.67	19.12
Males	8.54	8.53	8.56	8.62	8.76	8.95	9.15	9.40	9.84	10.25	10.62	10.98	11.32
Females	6.01	6.22	6.39	6.57	6.74	6.92	7.12	7.28	7.36	7.46	7.57	7.69	7.80
Aged 55 to 64	11.36	11.37	11.38	11.40	11.47	11.53	11.60	11.70	11.91	12.11	12.31	12.51	12.73
Males	7.04	7.05	7.04	7.04	7.03	6.99	6.95	6.93	6.91	6.90	6.92	6.93	6.98
Females	4.32	4.32	4.33	4.37	4.44	4.54	4.64	4.78	5.00	5.21	5.39	5.58	5.75
Aged 65 to 74	7.54	7.61	7.68	7.76	7.83	7.87	7.92	7.99	8.05	8.12	8.18	8.22	8.28
Males	3.70	3.78	3.87	3.97	4.06	4.15	4.23	4.32	4.40	4.48	4.54	4.57	4.61
Females	3.84	3.83	3.81	3.79	3.76	3.72	3.69	3.67	3.65	3.64	3.64	3.65	3.67
Aged 75 to 84	3.35	3.42	3.50	3.59	3.69	3.79	3.92	4.03	4.12	4.20	4.28	4.36	4.45
Males	1.11	1.13	1.16	1.19	1.24	1.30	1.37	1.43	1.48	1.53	1.58	1.66	1.74
Females	2.24	2.29	2.34	2.40	2.45	2.50	2.55	2.59	2.63	2.67	2.69	2.70	2.70
Aged 85 and Over	12.62	12.76	12.89	13.04	13.20	13.34	13.52	13.69	13.84	14.00	14.17	14.36	14.57
Males	11.85	11.96	12.07	12.20	12.33	12.43	12.56	12.68	12.79	12.91	13.04	13.17	13.33
Females	0.77	0.79	0.81	0.84	0.87	0.90	0.96	1.01	1.05	1.09	1.13	1.19	1.24
Aged 65 and Over	6.86	6.91	6.97	7.02	7.08	7.13	7.20	7.27	7.33	7.40	7.46	7.53	7.62
Males	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Females	6.86	6.91	6.97	7.02	7.08	7.13	7.20	7.27	7.33	7.40	7.46	7.53	7.62

For each indicator, the share is based on the total population.

Sources: The Conference Board of Canada; Statistics Canada.

Table 5c
Population by Age and Sex (Share of Total Population)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Males	17.08	16.81	16.57	16.34	16.13	16.00	15.91	15.84	15.78	15.73	15.69	15.66	15.63	15.61
Females	82.92	83.19	83.43	83.66	83.87	84.00	84.09	84.16	84.22	84.27	84.31	84.34	84.37	84.39
Aged 0 to 14	21.69	21.53	21.36	21.19	21.01	20.83	20.63	20.40	20.14	19.87	19.62	19.40	19.20	19.01
Males	13.38	13.35	13.30	13.23	13.16	13.04	12.89	12.70	12.46	12.22	11.98	11.78	11.59	11.41
Females	8.32	8.18	8.07	7.95	7.85	7.79	7.74	7.71	7.68	7.65	7.64	7.62	7.61	7.60
Aged 15 to 24	20.08	20.08	20.08	20.05	20.02	19.94	19.85	19.75	19.66	19.57	19.48	19.37	19.25	19.13
Males	13.56	13.57	13.59	13.60	13.59	13.58	13.56	13.56	13.58	13.60	13.63	13.63	13.60	13.56
Females	6.53	6.51	6.49	6.46	6.43	6.36	6.29	6.19	6.08	5.96	5.85	5.75	5.65	5.57
Aged 25 to 34	21.76	21.35	20.98	20.70	20.52	20.41	20.34	20.29	20.27	20.25	20.28	20.31	20.34	20.35
Males	15.08	14.67	14.29	14.00	13.83	13.73	13.66	13.61	13.57	13.55	13.56	13.59	13.64	13.67
Females	6.68	6.68	6.70	6.69	6.69	6.69	6.68	6.68	6.69	6.70	6.72	6.72	6.70	6.69
Aged 35 to 44	23.63	23.87	23.98	23.95	23.77	23.43	23.01	22.59	22.16	21.71	21.23	20.71	20.22	19.86
Males	15.75	15.91	15.99	15.98	15.86	15.64	15.36	15.09	14.80	14.50	14.19	13.84	13.51	13.28
Females	7.88	7.96	7.99	7.97	7.91	7.79	7.65	7.51	7.36	7.21	7.05	6.87	6.71	6.58
Aged 45 to 54	19.53	19.91	20.28	20.62	20.84	20.90	20.96	21.02	21.09	21.15	21.15	21.13	21.04	20.92
Males	11.65	11.95	12.29	12.65	12.94	13.11	13.31	13.52	13.73	13.94	14.11	14.26	14.34	14.33
Females	7.88	7.96	7.99	7.97	7.91	7.79	7.65	7.51	7.36	7.21	7.05	6.87	6.71	6.58
Aged 55 to 64	12.98	13.28	13.63	13.99	14.37	14.83	15.28	15.70	16.11	16.50	16.85	17.18	17.50	17.79
Males	7.06	7.21	7.38	7.57	7.80	8.18	8.53	8.84	9.15	9.44	9.72	9.98	10.26	10.56
Females	5.92	6.08	6.25	6.43	6.57	6.66	6.75	6.86	6.96	7.06	7.14	7.20	7.23	7.22
Aged 65 to 74	8.34	8.42	8.50	8.59	8.71	8.91	9.10	9.29	9.48	9.68	9.90	10.15	10.44	10.73
Males	4.62	4.63	4.63	4.62	4.62	4.62	4.64	4.66	4.69	4.75	4.83	4.95	5.09	5.23
Females	3.71	3.79	3.88	3.97	4.09	4.29	4.46	4.63	4.79	4.93	5.07	5.21	5.36	5.51
Aged 75 to 84	4.52	4.58	4.62	4.67	4.71	4.75	4.79	4.83	4.88	4.95	5.01	5.10	5.18	5.27
Males	1.82	1.89	1.96	2.01	2.07	2.11	2.15	2.19	2.23	2.27	2.30	2.32	2.34	2.35
Females	2.70	2.69	2.67	2.65	2.64	2.63	2.63	2.64	2.65	2.68	2.72	2.78	2.85	2.92
Aged 85 and Over	14.81	15.07	15.35	15.63	15.95	16.39	16.82	17.22	17.62	18.02	18.41	18.83	19.27	19.72
Males	13.51	13.73	13.96	14.20	14.49	14.91	15.32	15.70	16.08	16.46	16.84	17.25	17.68	18.14
Females	1.30	1.34	1.39	1.42	1.46	1.48	1.51	1.52	1.54	1.56	1.57	1.58	1.58	1.58
Aged 65 and Over	7.71	7.82	7.93	8.05	8.19	8.40	8.60	8.79	8.98	9.17	9.36	9.57	9.79	10.01
Males	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Females	7.71	7.82	7.93	8.05	8.19	8.40	8.60	8.79	8.98	9.17	9.36	9.57	9.79	10.01

For each indicator, the share is based on the total population.

Sources: The Conference Board of Canada; Statistics Canada.

Table 6a
Total Health Expenditures by Age Cohort (Males) *
(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Health Expenditures	24,992	29,317	32,471	35,034	37,953	41,314	44,562	48,593	53,501	58,028	63,005	66,369	68,105
Males	17.6	17.3	10.8	7.9	8.3	8.9	7.9	9.0	10.1	8.5	8.6	5.3	2.6
	10,836	12,677	14,004	15,051	16,282	17,707	19,070	20,795	22,877	24,831	26,943	28,338	29,036
	18.4	17.0	10.5	7.5	8.2	8.8	7.7	9.0	10.0	8.5	8.5	5.2	2.5
Aged 0 to 14	1,603	1,844	1,984	2,083	2,208	2,420	2,550	2,714	3,030	3,210	3,444	3,528	3,537
	13.7	15.0	7.6	5.0	6.0	9.6	5.4	6.4	11.6	5.9	7.3	2.4	0.3
Aged 15 to 24	971	1,087	1,167	1,231	1,332	1,422	1,495	1,587	1,759	1,918	2,059	2,210	2,258
	16.2	11.9	7.4	5.5	8.2	6.7	5.1	6.2	10.8	9.0	7.4	7.3	2.1
Aged 25 to 34	1,174	1,371	1,508	1,586	1,706	1,772	1,886	2,030	2,236	2,411	2,565	2,700	2,700
	18.7	16.8	10.0	5.2	7.5	3.9	6.4	7.7	10.2	7.8	6.4	5.3	0.0
Aged 35 to 44	968	1,150	1,301	1,434	1,533	1,677	1,808	2,018	2,226	2,520	2,773	2,861	2,905
	20.2	18.8	13.1	10.2	6.9	9.4	7.8	11.6	10.3	13.2	10.0	3.2	1.5
Aged 45 to 54	1,073	1,229	1,341	1,409	1,511	1,627	1,707	1,870	2,079	2,256	2,492	2,691	2,816
	16.4	14.5	9.1	5.1	7.2	7.7	4.9	9.5	11.1	8.5	10.5	8.0	4.6
Aged 55 to 64	1,384	1,624	1,823	1,961	2,113	2,340	2,479	2,680	2,906	3,073	3,291	3,423	3,462
	18.6	17.3	12.2	7.6	7.8	10.8	5.9	8.1	8.4	5.8	7.1	4.0	1.1
Aged 65 to 74	1,652	1,962	2,206	2,374	2,596	2,862	3,163	3,454	3,838	4,198	4,588	4,876	5,160
	19.3	18.8	12.4	7.6	9.4	10.2	10.5	9.2	11.1	9.4	9.3	6.3	5.8
Aged 75 to 84	1,346	1,605	1,798	2,006	2,217	2,439	2,710	3,028	3,329	3,629	3,981	4,216	4,323
	17.6	19.2	12.1	11.6	10.5	10.0	11.1	11.7	10.0	9.0	9.7	5.9	2.5
Aged 85 and Over	666	806	875	965	1,066	1,149	1,272	1,414	1,474	1,616	1,750	1,832	1,875
	33.8	21.0	8.6	10.3	10.5	7.8	10.7	11.2	4.2	9.6	8.3	4.7	2.3
Aged 65 and Over	3,663	4,372	4,880	5,346	5,879	6,450	7,145	7,896	8,641	9,442	10,318	10,925	11,358
	21.1	19.4	11.6	9.6	10.0	9.7	10.8	10.5	9.4	9.3	9.3	5.9	4.0

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 6b
Total Health Expenditures by Age Cohort (Males) *
(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Health Expenditures	69,485	70,499	71,394	74,614	79,207	83,966	89,567	96,468	100,459	104,434	109,876	115,450	121,271
Males	29,882	30,094	30,557	32,129	34,260	36,404	38,770	41,685	43,366	45,053	47,368	49,740	52,224
Aged 0 to 14	3,876	3,789	3,749	3,961	4,206	4,443	4,593	4,815	4,892	4,966	5,087	5,189	5,289
Aged 15 to 24	2,416	2,409	2,450	2,587	2,700	2,861	3,051	3,284	3,426	3,568	3,759	3,959	4,166
Aged 25 to 34	2,828	2,696	2,643	2,700	2,772	2,871	2,918	3,028	3,065	3,108	3,192	3,276	3,364
Aged 35 to 44	3,142	3,153	3,181	3,405	3,642	3,865	4,031	4,235	4,292	4,327	4,405	4,473	4,534
Aged 45 to 54	3,045	3,158	3,251	3,520	3,807	4,080	4,394	4,764	4,970	5,183	5,467	5,760	6,063
Aged 55 to 64	3,591	3,584	3,600	3,816	4,092	4,353	4,716	5,162	5,562	5,975	6,463	6,965	7,477
Aged 65 to 74	5,231	5,358	5,477	5,691	6,096	6,485	6,898	7,402	7,654	7,904	8,292	8,678	9,110
Aged 75 to 84	4,045	4,163	4,338	4,528	4,890	5,245	5,732	6,314	6,686	7,071	7,558	8,028	8,509
Aged 85 and Over	1,707	1,784	1,867	1,920	2,054	2,200	2,437	2,680	2,818	2,951	3,145	3,412	3,713
Aged 65 and Over	10,982	11,305	11,683	12,140	13,041	13,931	15,068	16,397	17,158	17,926	18,994	20,118	21,332
	-3.3	2.9	3.3	3.9	7.4	6.8	8.2	8.8	4.6	4.5	6.0	5.9	6.0

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 6c
Total Health Expenditures by Age Cohort (Males) *
(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Health Expenditures	127,441	134,008	140,919	148,274	156,084	164,220	172,677	181,450	190,659	200,283	210,167	220,767	232,001	243,789
Males	54,868	57,700	60,694	63,898	67,320	70,931	74,711	78,645	82,788	87,128	91,609	96,425	101,548	106,933
Aged 0 to 14	5,397	5,519	5,655	5,803	5,965	6,150	6,357	6,580	6,815	7,063	7,319	7,594	7,886	8,190
Aged 15 to 24	2,0	2,3	2,5	2,6	2,8	3,1	3,4	3,5	3,6	3,6	3,6	3,8	3,8	3,9
Aged 25 to 34	4,384	4,606	4,829	5,058	5,295	5,520	5,736	5,936	6,118	6,297	6,476	6,673	6,886	7,108
Aged 35 to 44	3,467	3,582	3,708	3,837	3,970	4,099	4,230	4,370	4,524	4,684	4,847	5,010	5,173	5,335
Aged 45 to 54	3,0	3,3	3,5	3,5	3,5	3,3	3,2	3,3	3,5	3,5	3,5	3,4	3,3	3,1
Aged 55 to 64	4,588	4,633	4,681	4,762	4,883	5,033	5,199	5,379	5,568	5,768	5,987	6,228	6,490	6,755
Aged 65 to 74	1,2	1,0	1,1	1,7	2,6	3,1	3,3	3,5	3,5	3,6	3,8	4,0	4,2	4,1
Aged 75 to 84	6,370	6,691	6,999	7,284	7,534	7,733	7,901	8,066	8,229	8,381	8,514	8,632	8,759	8,937
Aged 85 and Over	5,1	5,0	4,6	4,1	3,4	2,6	2,2	2,1	2,0	1,9	1,6	1,4	1,5	2,0
Aged 65 to 74	8,013	8,570	9,179	9,850	10,527	11,144	11,797	12,489	13,228	13,997	14,764	15,567	16,348	17,062
Aged 75 to 84	9,607	10,223	10,932	11,712	12,613	13,781	15,018	16,280	17,607	18,969	20,368	21,828	23,425	25,159
Aged 85 and Over	5,4	6,4	6,9	7,1	7,7	9,3	9,0	8,4	8,1	7,7	7,4	7,2	7,3	7,4
Aged 65 and Over	9,008	9,516	10,010	10,530	11,088	11,646	12,240	12,894	13,589	14,375	15,250	16,326	17,548	18,867
Aged 75 and Over	5,9	5,6	5,2	5,2	5,3	5,0	5,1	5,4	5,4	5,8	6,1	7,1	7,5	7,5
Aged 85 and Over	4,035	4,360	4,701	5,063	5,442	5,825	6,234	6,651	7,110	7,594	8,084	8,568	9,034	9,519
Aged 65 and Over	8,7	8,1	7,8	7,7	7,5	7,0	7,0	6,7	6,9	6,8	6,4	6,0	5,4	5,4
Aged 65 and Over	22,649	24,099	25,643	27,305	29,144	31,253	33,491	35,825	38,305	40,938	43,702	46,722	50,007	53,545
Aged 65 and Over	6,2	6,4	6,4	6,5	6,7	7,2	7,2	7,0	6,9	6,9	6,8	6,9	7,0	7,1

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 7a
Total Health Expenditures by Age Cohort (Females) *

(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Population	24,992 17.6	29,317 17.3	32,471 10.8	35,034 7.9	37,953 8.3	41,314 8.9	44,562 7.9	48,593 9.0	53,501 10.1	58,028 8.5	63,005 8.6	66,369 5.3	68,105 2.6
Females	14,156 17.0	16,640 17.6	18,467 11.0	19,983 8.2	21,671 8.4	23,606 8.9	25,492 8.0	27,798 9.0	30,623 10.2	33,197 8.4	36,063 8.6	38,031 5.5	39,069 2.7
Aged 0 to 14	1,433 13.1	1,652 15.3	1,762 6.7	1,858 5.5	1,973 6.2	2,197 11.3	2,285 4.0	2,459 7.6	2,716 10.4	2,895 6.6	3,090 6.7	3,212 4.0	3,223 0.3
Aged 15 to 24	1,459 15.8	1,654 13.4	1,775 7.4	1,861 4.8	1,943 4.4	2,034 4.7	2,128 4.6	2,260 6.2	2,503 10.8	2,658 6.2	2,841 6.9	2,999 5.6	3,014 0.5
Aged 25 to 34	1,880 17.8	2,186 16.3	2,458 12.5	2,676 8.9	2,803 4.8	3,006 7.2	3,173 5.6	3,405 7.3	3,778 10.9	4,008 6.1	4,193 4.6	4,377 4.4	4,316 -1.4
Aged 35 to 44	1,238 18.2	1,467 18.5	1,662 13.3	1,829 10.0	2,003 9.6	2,241 11.9	2,416 7.8	2,592 7.3	2,953 13.9	3,275 10.9	3,557 8.6	3,684 3.6	3,782 2.7
Aged 45 to 54	1,150 15.4	1,315 14.4	1,444 9.9	1,562 8.2	1,694 8.4	1,833 8.2	1,979 8.0	2,160 9.2	2,385 10.4	2,650 11.1	2,874 8.4	3,129 8.9	3,310 5.8
Aged 55 to 64	1,399 18.6	1,617 15.5	1,800 11.3	1,940 7.8	2,108 8.6	2,307 9.5	2,452 6.3	2,639 7.6	2,842 7.7	3,048 7.2	3,271 7.3	3,459 5.8	3,481 0.6
Aged 65 to 74	1,826 18.2	2,157 18.2	2,429 12.6	2,645 8.9	2,901 9.7	3,267 12.6	3,523 7.8	3,871 9.9	4,263 10.1	4,670 9.5	5,069 8.5	5,355 5.7	5,852 9.3
Aged 75 to 84	2,136 15.8	2,594 21.4	2,914 12.4	3,176 9.0	3,494 10.0	3,872 10.8	4,288 10.7	4,737 10.5	5,239 10.6	5,649 7.8	6,366 12.7	6,793 6.7	6,948 2.3
Aged 85 and Over	1,635 20.2	1,999 22.3	2,222 11.2	2,435 9.6	2,752 13.0	2,850 3.6	3,248 14.0	3,674 13.1	3,943 7.3	4,344 10.2	4,803 10.6	5,022 4.6	5,142 2.4
Aged 65 and Over	5,597 17.8	6,750 20.6	7,565 12.1	8,257 9.1	9,147 10.8	9,989 9.2	11,059 10.7	12,282 11.1	13,446 9.5	14,662 9.0	16,237 10.7	17,170 5.7	17,942 4.5

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 7b
Total Health Expenditures by Age Cohort (Females) *
(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Population	69,485 2.0	70,499 1.5	71,394 1.3	74,614 4.5	79,207 6.2	83,966 6.0	89,567 6.7	96,468 7.7	100,459 4.1	104,434 4.0	109,876 5.2	115,450 5.1	121,271 5.0
Females	39,603 1.4	40,406 2.0	40,836 1.1	42,485 4.0	44,947 5.8	47,562 5.8	50,797 6.8	54,783 7.8	57,094 4.2	59,381 4.0	62,508 5.3	65,710 5.1	69,047 5.1
Aged 0 to 14	3,567 10.7	3,475 -2.6	3,410 -1.9	3,541 3.9	3,709 4.7	3,871 4.4	4,002 3.4	4,197 4.9	4,275 1.8	4,350 1.8	4,465 2.6	4,563 2.2	4,660 2.1
Aged 15 to 24	3,274 8.6	3,236 -1.2	3,217 -0.6	3,341 3.9	3,464 3.7	3,646 5.2	3,884 6.5	4,176 7.5	4,339 3.9	4,502 3.7	4,730 5.1	4,966 5.0	5,208 4.9
Aged 25 to 34	4,613 6.9	4,465 -3.2	4,367 -2.2	4,487 2.7	4,658 3.8	4,870 4.5	4,978 2.2	5,184 4.1	5,237 1.0	5,295 1.1	5,435 2.6	5,576 2.6	5,725 2.7
Aged 35 to 44	4,092 8.2	4,155 1.5	4,269 2.8	4,510 5.6	4,764 5.6	5,035 5.7	5,237 4.0	5,495 4.9	5,554 1.1	5,587 0.6	5,673 1.6	5,746 1.3	5,811 1.1
Aged 45 to 54	3,625 9.5	3,809 5.1	3,987 4.7	4,293 7.7	4,608 7.3	4,930 7.0	5,333 8.2	5,812 9.0	6,097 4.9	6,389 4.8	6,772 6.0	7,168 5.8	7,575 5.7
Aged 55 to 64	3,638 4.5	3,682 1.2	3,680 -0.1	3,924 6.6	4,196 6.9	4,463 6.4	4,849 8.6	5,331 9.9	5,767 8.2	6,219 7.8	6,753 8.6	7,301 8.1	7,861 7.7
Aged 65 to 74	5,957 1.8	6,187 3.9	6,246 1.0	6,461 3.4	6,874 6.4	7,283 5.9	7,647 5.0	8,117 6.1	8,332 2.6	8,556 2.7	8,930 4.4	9,309 4.2	9,740 4.6
Aged 75 to 84	6,361 -8.4	6,637 4.3	6,794 2.4	6,965 2.5	7,423 6.6	7,892 6.3	8,577 8.7	9,397 9.6	9,881 5.2	10,358 4.8	10,953 5.7	11,490 4.9	12,015 4.6
Aged 85 and Over	4,475 -13.0	4,759 6.3	4,866 2.3	4,964 2.0	5,251 5.8	5,571 6.1	6,291 12.9	7,073 12.4	7,611 7.6	8,126 6.8	8,797 8.3	9,592 9.0	10,452 9.0
Aged 65 and Over	16,793 -6.4	17,583 4.7	17,906 1.8	18,390 2.7	19,548 6.3	20,746 6.1	22,515 8.5	24,587 9.2	25,824 5.0	27,039 4.7	28,680 6.1	30,391 6.0	32,206 6.0

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 7c
Total Health Expenditures by Age Cohort (Females) *

(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Population	127,441	134,008	140,919	148,274	156,084	164,220	172,677	181,450	190,659	200,283	210,167	220,767	232,001	243,789
Females	5.1	5.2	5.2	5.2	5.3	5.2	5.2	5.1	5.1	5.0	4.9	5.0	5.1	5.1
	72,573	76,309	80,224	84,375	88,764	93,288	97,966	102,804	107,871	113,154	118,558	124,342	130,453	136,857
	5.1	5.1	5.1	5.2	5.2	5.1	5.0	4.9	4.9	4.9	4.8	4.9	4.9	4.9
Aged 0 to 14	4,763	4,879	5,008	5,148	5,297	5,473	5,666	5,873	6,092	6,322	6,561	6,817	7,089	7,372
	2.2	2.4	2.6	2.8	2.9	3.3	3.5	3.7	3.7	3.8	3.8	3.9	4.0	4.0
Aged 15 to 24	5,466	5,726	5,988	6,260	6,545	6,803	7,054	7,285	7,496	7,700	7,901	8,125	8,370	8,627
	5.0	4.8	4.6	4.5	4.6	3.9	3.7	3.3	2.9	2.7	2.6	2.8	3.0	3.1
Aged 25 to 34	5,900	6,098	6,314	6,535	6,766	6,993	7,225	7,472	7,741	8,016	8,299	8,583	8,867	9,154
	3.0	3.4	3.5	3.5	3.5	3.4	3.3	3.4	3.6	3.6	3.5	3.4	3.3	3.2
Aged 35 to 44	5,871	5,920	5,976	6,068	6,210	6,383	6,576	6,786	7,014	7,254	7,516	7,808	8,125	8,444
	1.0	0.8	0.9	1.5	2.3	2.8	3.0	3.2	3.4	3.4	3.6	3.9	4.1	3.9
Aged 45 to 54	7,986	8,408	8,812	9,193	9,535	9,813	10,060	10,295	10,524	10,745	10,946	11,127	11,325	11,581
	5.4	5.3	4.8	4.3	3.7	2.9	2.5	2.3	2.2	2.1	1.9	1.7	1.8	2.3
Aged 55 to 64	8,451	9,073	9,751	10,492	11,239	11,918	12,631	13,391	14,199	15,036	15,865	16,715	17,535	18,295
	7.5	7.4	7.5	7.6	7.1	6.0	6.0	6.0	6.0	5.9	5.5	5.4	4.9	4.3
Aged 65 to 74	10,245	10,868	11,590	12,377	13,287	14,467	15,708	16,976	18,300	19,654	21,043	22,504	24,095	25,806
	5.2	6.1	6.6	6.8	7.4	8.9	8.6	8.1	7.8	7.4	7.1	6.9	7.1	7.1
Aged 75 to 84	12,525	13,054	13,558	14,103	14,700	15,315	15,983	16,737	17,543	18,461	19,493	20,754	22,202	23,752
	4.2	4.2	3.9	4.0	4.2	4.2	4.4	4.7	4.8	5.2	5.6	6.5	7.0	7.0
Aged 85 and Over	11,366	12,283	13,228	14,199	15,186	16,123	17,063	17,989	18,964	19,966	20,934	21,909	22,844	23,825
	8.7	8.1	7.7	7.3	6.9	6.2	5.8	5.4	5.4	5.3	4.8	4.7	4.3	4.3
Aged 65 and Over	34,136	36,204	38,375	40,679	43,173	45,905	48,755	51,702	54,807	58,081	61,470	65,166	69,142	73,383
	6.0	6.1	6.0	6.0	6.1	6.3	6.2	6.0	6.0	6.0	5.8	6.0	6.1	6.1

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 8a
Provincial and Territorial Government Health Expenditures by Age Cohort (Males)
(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Health Expenditures	18,658 18.1	22,004 17.9	24,512 11.4	26,247 7.1	28,206 7.5	30,505 8.1	32,828 7.6	35,798 9.0	39,316 9.8	42,451 8.0	46,110 8.6	48,271 4.7	48,543 0.6
Males	7,935 18.7	9,332 17.6	10,376 11.2	11,051 6.5	11,849 7.2	12,794 8.0	13,736 7.4	14,958 8.9	16,405 9.7	17,717 8.0	19,230 8.5	20,072 4.4	20,171 0.5
Aged 0 to 14	1,066 12.7	1,229 15.2	1,344 9.4	1,404 4.4	1,446 3.0	1,562 8.0	1,623 3.9	1,708 5.2	1,910 11.8	2,001 4.8	2,150 7.5	2,150 0.0	2,110 -1.8
Aged 15 to 24	741 16.0	823 11.1	887 7.8	929 4.7	991 6.7	1,037 4.7	1,062 2.4	1,097 3.4	1,194 8.8	1,277 6.9	1,346 5.4	1,411 4.8	1,398 -0.9
Aged 25 to 34	704 19.3	831 18.1	940 13.2	977 3.9	1,058 8.4	1,095 3.5	1,167 6.5	1,256 7.6	1,391 10.8	1,507 8.3	1,611 7.0	1,682 4.4	1,655 -1.6
Aged 35 to 44	585 21.5	706 20.7	797 12.9	854 7.1	908 6.3	1,001 10.2	1,069 6.8	1,193 11.7	1,300 8.9	1,485 14.2	1,637 10.2	1,652 0.9	1,627 -1.5
Aged 45 to 54	716 16.2	818 14.3	893 9.2	915 2.5	972 6.2	1,045 7.5	1,079 3.2	1,178 9.2	1,307 11.0	1,413 8.1	1,576 11.5	1,702 8.0	1,728 1.5
Aged 55 to 64	1,034 19.0	1,220 18.1	1,369 12.2	1,446 5.6	1,522 5.3	1,660 9.0	1,748 5.3	1,885 7.8	2,031 7.8	2,125 4.6	2,271 6.9	2,338 2.9	2,313 -1.1
Aged 65 to 74	1,364 20.0	1,630 19.5	1,846 13.2	1,984 7.5	2,154 8.6	2,356 9.4	2,606 10.6	2,849 9.3	3,169 11.2	3,454 9.0	3,773 9.2	3,995 5.9	4,119 3.1
Aged 75 to 84	1,158 18.6	1,386 19.6	1,550 11.8	1,719 10.9	1,889 9.9	2,063 9.2	2,301 11.5	2,584 12.3	2,847 10.2	3,089 8.5	3,386 9.6	3,588 6.0	3,640 1.5
Aged 85 and Over	567 31.7	689 21.5	749 8.6	824 10.0	909 10.3	976 7.4	1,081 10.8	1,207 11.6	1,255 4.0	1,366 8.8	1,480 8.3	1,555 5.1	1,582 1.7
Aged 65 and Over	3,090 21.5	3,705 19.9	4,145 11.9	4,526 9.2	4,951 9.4	5,395 9.0	5,989 11.0	6,641 10.9	7,271 9.5	7,909 8.8	8,638 9.2	9,138 5.8	9,341 2.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 8b
Provincial and Territorial Government Health Expenditures by Age Cohort (Males)

(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Health Expenditures	48,976 0.9	48,937 -0.1	49,025 0.2	50,818 3.7	54,101 6.5	57,727 6.7	62,028 7.5	67,450 8.7	70,008 3.8	72,437 3.5	76,208 5.2	80,022 5.0	84,028 5.0
Males	20,599 2.1	20,385 -1.0	20,525 0.7	21,466 4.6	23,032 7.3	24,693 7.2	26,492 7.3	28,748 8.5	29,784 3.6	30,773 3.3	32,333 5.1	33,909 4.9	35,571 4.9
Aged 0 to 14	2,394 13.5	2,287 -4.5	2,246 -1.8	2,382 6.0	2,571 7.9	2,768 7.6	2,891 4.4	3,046 5.4	3,062 0.5	3,068 0.2	3,121 1.7	3,160 1.2	3,197 1.2
Aged 15 to 24	1,504 7.6	1,449 -3.6	1,448 -0.1	1,511 4.3	1,564 3.5	1,673 7.0	1,790 7.0	1,936 8.2	1,996 3.1	2,051 2.7	2,145 4.6	2,241 4.5	2,341 4.5
Aged 25 to 34	1,771 7.0	1,647 -7.0	1,612 -2.1	1,630 1.1	1,679 3.0	1,764 5.1	1,825 3.4	1,922 5.3	1,943 1.1	1,964 1.1	2,023 3.0	2,081 2.8	2,142 2.9
Aged 35 to 44	1,796 10.4	1,747 -2.7	1,733 -0.8	1,865 7.6	2,024 8.5	2,181 7.8	2,309 5.8	2,454 6.3	2,471 0.7	2,468 -0.1	2,505 1.5	2,534 1.1	2,559 1.0
Aged 45 to 54	1,869 8.2	1,898 1.6	1,919 1.1	2,080 8.4	2,274 9.3	2,463 8.3	2,674 8.6	2,928 9.5	3,037 3.7	3,140 3.4	3,303 5.2	3,467 5.0	3,638 4.9
Aged 55 to 64	2,393 3.5	2,333 -2.5	2,324 -0.4	2,469 6.3	2,680 8.5	2,887 7.7	3,116 7.9	3,421 9.8	3,641 6.4	3,865 6.2	4,155 7.5	4,445 7.0	4,740 6.6
Aged 65 to 74	4,093 -0.6	4,123 0.7	4,154 0.7	4,265 2.7	4,564 7.0	4,855 6.4	5,193 7.0	5,625 8.3	5,810 3.3	5,986 3.0	6,287 5.0	6,584 4.7	6,917 5.0
Aged 75 to 84	3,357 -7.8	3,424 2.0	3,546 3.6	3,684 3.9	3,985 8.2	4,283 7.5	4,684 9.3	5,190 10.8	5,488 5.7	5,790 5.5	6,193 6.9	6,579 6.2	6,974 6.0
Aged 85 and Over	1,421 -10.2	1,478 4.0	1,543 4.4	1,581 2.4	1,693 7.1	1,819 7.5	2,011 10.6	2,225 10.6	2,336 5.0	2,440 4.4	2,600 6.6	2,818 8.4	3,064 8.8
Aged 65 and Over	8,872 -5.0	9,025 1.7	9,243 2.4	9,530 3.1	10,241 7.5	10,958 7.0	11,889 8.5	13,041 9.7	13,634 4.5	14,217 4.3	15,080 6.1	15,981 6.0	16,955 6.1

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 8c
Provincial and Territorial Government Health Expenditures by Age Cohort (Males)

(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Health Expenditures	88,307 5.1	92,893 5.2	97,733 5.2	102,905 5.3	108,391 5.3	114,088 5.3	120,011 5.2	126,156 5.1	132,622 5.1	139,380 5.1	146,293 5.0	153,746 5.1	161,667 5.2	170,003 5.2
Males	37,355 5.0	39,282 5.2	41,326 5.2	43,524 5.3	45,871 5.4	48,348 5.4	50,943 5.4	53,647 5.3	56,503 5.3	59,497 5.3	62,577 5.2	65,906 5.3	69,461 5.4	73,212 5.4
Aged 0 to 14	3,240 1.3	3,292 1.6	3,352 1.8	3,420 2.0	3,494 2.2	3,578 2.4	3,674 2.7	3,778 2.8	3,889 2.9	4,005 3.0	4,124 3.0	4,252 3.1	4,387 3.2	4,529 3.2
Aged 15 to 24	2,447 4.6	2,557 4.5	2,667 4.3	2,781 4.3	2,897 4.2	3,005 3.7	3,107 3.4	3,200 3.0	3,284 2.6	3,363 2.4	3,440 2.3	3,526 2.5	3,621 2.7	3,719 2.7
Aged 25 to 34	2,212 3.3	2,292 3.6	2,380 3.8	2,472 3.9	2,566 3.8	2,657 3.5	2,748 3.4	2,846 3.5	2,952 3.8	3,063 3.8	3,175 3.6	3,289 3.6	3,403 3.5	3,516 3.3
Aged 35 to 44	2,582 0.9	2,601 0.7	2,622 0.8	2,660 1.4	2,718 2.2	2,791 2.7	2,873 2.9	2,962 3.1	3,057 3.2	3,157 3.3	3,264 3.4	3,383 3.7	3,513 3.8	3,645 3.8
Aged 45 to 54	3,813 4.8	3,996 4.8	4,173 4.4	4,338 4.0	4,482 3.3	4,592 2.5	4,682 2.0	4,768 1.8	4,852 1.8	4,929 1.6	4,993 1.3	5,049 1.1	5,109 1.2	5,194 1.7
Aged 55 to 64	5,047 6.5	5,367 6.3	5,716 6.5	6,100 6.7	6,487 6.3	6,833 5.3	7,192 5.2	7,569 5.3	7,971 5.3	8,388 5.2	8,797 4.9	9,224 4.8	9,637 4.5	10,009 3.9
Aged 65 to 74	7,299 5.5	7,772 6.5	8,319 7.0	8,925 7.3	9,620 7.8	10,509 9.2	11,461 9.1	12,436 8.5	13,461 8.2	14,513 7.8	15,589 7.4	16,715 7.2	17,942 7.3	19,273 7.4
Aged 75 to 84	7,384 5.9	7,804 5.7	8,215 5.3	8,647 5.3	9,109 5.3	9,569 5.1	10,057 5.1	10,594 5.3	11,164 5.4	11,807 5.8	12,521 6.0	13,396 7.0	14,393 7.4	15,472 7.5
Aged 85 and Over	3,330 8.7	3,600 8.1	3,882 7.8	4,182 7.7	4,497 7.5	4,814 7.0	5,151 7.0	5,495 6.7	5,872 6.9	6,271 6.8	6,674 6.4	7,072 6.0	7,457 5.4	7,855 5.3
Aged 65 and Over	18,013 6.2	19,177 6.5	20,416 6.5	21,754 6.6	23,226 6.8	24,892 7.2	26,668 7.1	28,525 7.0	30,497 6.9	32,591 6.9	34,784 6.7	37,183 6.9	39,792 7.0	42,600 7.1

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 9a
Provincial and Territorial Government Health Expenditures by Age Cohort (Females)

(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Population	18,658 18.1	22,004 17.9	24,512 11.4	26,247 7.1	28,206 7.5	30,505 8.1	32,828 7.6	35,798 9.0	39,316 9.8	42,451 8.0	46,110 8.6	48,271 4.7	48,543 0.6
Females	10,722 17.7	12,672 18.2	14,137 11.6	15,197 7.5	16,358 7.6	17,711 8.3	19,093 7.8	20,840 9.2	22,911 9.9	24,735 8.0	26,881 8.7	28,198 4.9	28,372 0.6
Aged 0 to 14	909 11.5	1,051 15.6	1,138 8.3	1,195 5.0	1,227 2.7	1,355 10.4	1,380 1.8	1,472 6.7	1,621 10.1	1,714 5.7	1,828 6.7	1,853 1.4	1,813 -2.2
Aged 15 to 24	1,144 15.6	1,293 13.0	1,398 8.1	1,457 4.3	1,510 3.6	1,572 4.0	1,614 2.7	1,684 4.3	1,842 9.4	1,923 4.4	2,031 5.6	2,102 3.5	2,072 -1.5
Aged 25 to 34	1,350 18.0	1,575 16.7	1,775 12.7	1,901 7.1	1,996 5.0	2,166 8.5	2,286 5.6	2,461 7.7	2,743 11.5	2,913 6.2	3,051 4.7	3,162 3.6	3,071 -2.9
Aged 35 to 44	841 19.3	1,011 20.2	1,145 13.3	1,236 7.9	1,336 8.1	1,487 11.4	1,591 7.0	1,692 6.3	1,919 13.4	2,128 10.9	2,306 8.4	2,350 1.9	2,352 0.1
Aged 45 to 54	794 14.8	906 14.1	993 9.5	1,052 6.0	1,127 7.1	1,206 7.1	1,295 7.4	1,408 8.7	1,545 9.8	1,727 11.8	1,875 8.6	2,045 9.1	2,087 2.1
Aged 55 to 64	1,019 19.3	1,183 16.1	1,330 12.5	1,425 7.2	1,518 6.5	1,632 7.5	1,727 5.8	1,850 7.1	1,976 6.8	2,105 6.6	2,257 7.2	2,372 5.1	2,326 -2.0
Aged 65 to 74	1,475 19.0	1,752 18.8	1,988 13.5	2,159 8.6	2,348 8.8	2,629 12.0	2,835 7.8	3,130 10.4	3,454 10.4	3,781 9.4	4,107 8.6	4,326 5.3	4,566 5.6
Aged 75 to 84	1,822 17.4	2,220 21.8	2,499 12.5	2,721 8.9	2,979 9.5	3,277 10.0	3,640 11.1	4,045 11.1	4,486 10.9	4,812 7.3	5,416 12.6	5,782 6.8	5,820 0.6
Aged 85 and Over	1,368 22.2	1,681 22.9	1,871 11.3	2,050 9.6	2,316 13.0	2,386 3.0	2,724 14.2	3,098 13.8	3,325 7.3	3,633 9.3	4,010 10.4	4,206 4.9	4,266 1.4
Aged 65 and Over	4,665 19.3	5,654 21.2	6,358 12.4	6,930 9.0	7,644 10.3	8,292 8.5	9,199 10.9	10,273 11.7	11,266 9.7	12,226 8.5	13,533 10.7	14,314 5.8	14,652 2.4

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 9b
Provincial and Territorial Government Health Expenditures by Age Cohort (Females)

(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Population	48,976 0.9	48,937 -0.1	49,025 0.2	50,818 3.7	54,101 6.5	57,727 6.7	62,028 7.5	67,450 8.7	70,008 3.8	72,437 3.5	76,208 5.2	80,022 5.0	84,028 5.0
Females	28,378 0.0	28,552 0.6	28,500 -0.2	29,351 3.0	31,069 5.9	33,033 6.3	35,536 7.6	38,703 8.9	40,224 3.9	41,664 3.6	43,875 5.3	46,113 5.1	48,458 5.1
Aged 0 to 14	2,105 16.1	1,998 -5.1	1,937 -3.1	1,999 3.2	2,118 5.9	2,245 6.0	2,343 4.4	2,472 5.5	2,489 0.7	2,498 0.4	2,546 1.9	2,582 1.4	2,616 1.3
Aged 15 to 24	2,288 10.4	2,223 -2.8	2,190 -1.5	2,257 3.0	2,336 3.5	2,483 6.3	2,646 6.6	2,855 7.9	2,938 2.9	3,015 2.6	3,148 4.4	3,283 4.3	3,422 4.2
Aged 25 to 34	3,339 8.7	3,200 -4.2	3,129 -2.2	3,205 2.5	3,349 4.5	3,545 5.9	3,663 3.3	3,850 5.1	3,881 0.8	3,910 0.8	4,017 2.7	4,122 2.6	4,233 2.7
Aged 35 to 44	2,569 9.2	2,547 -0.8	2,594 1.8	2,715 4.7	2,870 5.7	3,055 6.4	3,213 5.2	3,400 5.8	3,410 0.3	3,396 -0.4	3,434 1.1	3,459 0.7	3,480 0.6
Aged 45 to 54	2,273 8.9	2,324 2.3	2,381 2.4	2,541 6.7	2,727 7.3	2,930 7.4	3,198 9.2	3,524 10.2	3,679 4.4	3,827 4.0	4,050 5.8	4,276 5.6	4,510 5.5
Aged 55 to 64	2,429 4.4	2,424 -0.2	2,388 -1.5	2,550 6.8	2,752 7.9	2,959 7.5	3,211 8.5	3,549 10.5	3,802 7.1	4,062 6.8	4,393 8.2	4,727 7.6	5,068 7.2
Aged 65 to 74	4,524 -0.9	4,623 2.2	4,562 -1.3	4,642 1.7	4,918 6.0	5,199 5.7	5,509 6.0	5,917 7.4	6,072 2.6	6,225 2.5	6,513 4.6	6,802 4.4	7,129 4.8
Aged 75 to 84	5,209 -10.5	5,356 2.8	5,401 0.8	5,474 1.3	5,809 6.1	6,162 6.1	6,728 9.2	7,440 10.6	7,826 5.2	8,198 4.8	8,692 6.0	9,138 5.1	9,573 4.8
Aged 85 and Over	3,642 -14.6	3,857 5.9	3,918 1.6	3,968 1.3	4,190 5.6	4,455 6.3	5,026 12.8	5,695 13.3	6,127 7.6	6,534 6.6	7,083 8.4	7,726 9.1	8,426 9.1
Aged 65 and Over	13,375 -8.7	13,836 3.4	13,882 0.3	14,084 1.5	14,918 5.9	15,816 6.0	17,262 9.1	19,052 10.4	20,025 5.1	20,957 4.7	22,288 6.4	23,666 6.2	25,128 6.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 9c
Provincial and Territorial Government Health Expenditures by Age Cohort (Females)

(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Population	88,307 5.1	92,893 5.2	97,733 5.2	102,905 5.3	108,391 5.3	114,088 5.3	120,011 5.2	126,156 5.1	132,622 5.1	139,380 5.1	146,293 5.0	153,746 5.1	161,667 5.2	170,003 5.2
Females	50,952 5.1	53,612 5.2	56,406 5.2	59,381 5.3	62,520 5.3	65,741 5.2	69,067 5.1	72,509 5.0	76,119 5.0	79,883 4.9	83,716 4.8	87,840 4.9	92,206 5.0	96,791 5.0
Aged 0 to 14	2,655 1.5	2,702 1.8	2,756 2.0	2,817 2.2	2,881 2.3	2,956 2.6	3,040 2.8	3,130 3.0	3,227 3.1	3,328 3.1	3,431 3.1	3,542 3.2	3,660 3.3	3,783 3.4
Aged 15 to 24	3,572 4.4	3,724 4.3	3,877 4.1	4,037 4.1	4,202 4.1	4,350 3.5	4,491 3.2	4,619 2.9	4,734 2.5	4,843 2.3	4,946 2.1	5,064 2.4	5,193 2.6	5,330 2.6
Aged 25 to 34	4,364 3.1	4,514 3.4	4,679 3.6	4,849 3.6	5,026 3.6	5,198 3.4	5,374 3.4	5,560 3.5	5,763 3.6	5,971 3.6	6,182 3.5	6,396 3.5	6,611 3.3	6,827 3.3
Aged 35 to 44	3,501 0.6	3,516 0.4	3,535 0.5	3,575 1.1	3,642 1.9	3,725 2.3	3,818 2.5	3,922 2.7	4,035 2.9	4,154 3.0	4,282 3.1	4,427 3.4	4,585 3.6	4,743 3.5
Aged 45 to 54	4,748 5.3	4,994 5.2	5,231 4.8	5,457 4.3	5,659 3.7	5,820 2.9	5,960 2.4	6,090 2.2	6,217 2.1	6,337 1.9	6,443 1.7	6,539 1.5	6,642 1.6	6,776 2.0
Aged 55 to 64	5,426 7.1	5,805 7.0	6,217 7.1	6,668 7.3	7,123 6.8	7,532 5.8	7,955 5.6	8,402 5.6	8,878 5.7	9,369 5.5	9,851 5.1	10,343 5.0	10,817 4.6	11,253 4.0
Aged 65 to 74	7,512 5.4	7,983 6.3	8,531 6.9	9,132 7.1	9,823 7.6	10,704 9.0	11,644 8.8	12,608 8.3	13,615 8.0	14,646 7.6	15,700 7.2	16,811 7.1	18,019 7.2	19,317 7.2
Aged 75 to 84	10,000 4.5	10,444 4.4	10,871 4.1	11,331 4.2	11,832 4.4	12,346 4.3	12,900 4.5	13,524 4.8	14,192 4.9	14,948 5.3	15,794 5.7	16,824 6.5	18,010 7.0	19,283 7.1
Aged 85 and Over	9,174 8.9	9,930 8.2	10,710 7.9	11,514 7.5	12,332 7.1	13,109 6.3	13,887 5.9	14,654 5.5	15,459 5.5	16,287 5.4	17,087 4.9	17,893 4.7	18,669 4.3	19,479 4.3
Aged 65 and Over	26,686 6.2	28,357 6.3	30,111 6.2	31,978 6.2	33,987 6.3	36,159 6.4	38,431 6.3	40,785 6.1	43,266 6.1	45,881 6.0	48,581 5.9	51,528 6.1	54,698 6.2	58,079 6.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 10a
Private Health Expenditures by Age Cohort (Males)
(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Health Expenditures	6,334 16.1	7,312 15.4	7,959 8.8	8,786 10.4	9,747 10.9	10,809 10.9	11,734 8.6	12,795 9.1	14,184 10.9	15,577 9.8	16,895 8.5	18,099 7.1	19,561 8.1
Males	2,901 17.4	3,344 15.3	3,629 8.5	4,000 10.2	4,433 10.8	4,913 10.8	5,334 8.6	5,838 9.4	6,472 10.9	7,114 9.9	7,713 8.4	8,266 7.2	8,865 7.2
Aged 0 to 14	536 15.7	615 14.7	640 4.1	679 6.1	763 12.3	858 12.5	927 8.1	1,007 8.6	1,121 11.3	1,209 7.9	1,294 7.0	1,378 6.5	1,427 3.6
Aged 15 to 24	230 16.7	264 14.6	280 6.2	302 8.1	342 13.0	385 12.8	433 12.4	490 13.0	565 15.3	641 13.5	713 11.3	800 12.1	860 7.6
Aged 25 to 34	470 17.7	540 14.8	568 5.2	609 7.3	647 6.2	676 4.5	719 6.3	774 7.7	845 9.1	905 7.1	954 5.4	1,018 6.7	1,045 2.7
Aged 35 to 44	383 18.2	444 15.9	504 13.5	580 15.1	625 7.7	676 8.1	739 9.4	824 11.5	926 12.3	1,035 11.8	1,136 9.8	1,209 6.4	1,278 5.7
Aged 45 to 54	358 16.8	411 15.0	448 9.0	494 10.3	539 8.9	582 8.0	628 8.0	692 10.2	772 11.5	843 9.2	916 8.8	989 7.9	1,088 10.0
Aged 55 to 64	351 17.3	404 15.1	453 12.3	515 13.5	590 14.7	680 15.3	731 7.4	795 8.8	874 10.0	949 8.5	1,020 7.5	1,085 6.4	1,149 5.9
Aged 65 to 74	287 16.1	332 15.4	360 8.4	390 8.6	442 13.3	507 14.5	557 9.9	604 8.6	669 10.7	744 11.2	815 9.5	881 8.1	1,041 18.2
Aged 75 to 84	188 11.9	219 16.6	249 13.7	288 15.7	328 13.9	375 14.5	409 9.0	443 8.4	482 8.7	540 12.0	595 10.2	629 5.7	683 8.6
Aged 85 and Over	98 46.8	117 18.4	127 8.8	142 11.8	158 11.4	173 9.8	191 10.1	207 8.6	219 5.7	249 13.9	270 8.3	277 2.6	293 5.7
Aged 65 and Over	573 18.9	667 16.3	735 10.2	820 11.6	928 13.2	1,055 13.7	1,156 9.6	1,255 8.5	1,370 9.2	1,533 11.9	1,680 9.6	1,787 6.4	2,017 12.9

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 10b
Private Health Expenditures by Age Cohort (Males)
(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Health Expenditures	20,509 4.8	21,562 5.1	22,369 3.7	23,797 6.4	25,106 5.5	26,239 4.5	27,539 5.0	29,017 5.4	30,452 4.9	31,996 5.1	33,668 5.2	35,428 5.2	37,243 5.1
Males	9,283 4.7	9,708 4.6	10,032 3.3	10,662 6.3	11,228 5.3	11,711 4.3	12,278 4.8	12,937 5.4	13,582 5.0	14,280 5.1	15,035 5.3	15,831 5.3	16,654 5.2
Aged 0 to 14	1,481 3.8	1,502 7.4	1,503 0.1	1,580 5.1	1,635 3.5	1,676 2.5	1,702 1.6	1,769 3.9	1,831 3.5	1,898 3.7	1,966 3.6	2,029 3.2	2,092 3.1
Aged 15 to 24	913 6.1	960 5.2	1,002 4.4	1,076 7.4	1,136 5.6	1,189 4.6	1,262 6.1	1,348 6.8	1,430 6.1	1,517 6.1	1,614 6.4	1,718 6.5	1,825 6.2
Aged 25 to 34	1,057 1.2	1,049 -0.8	1,031 -1.7	1,070 3.7	1,093 2.2	1,107 1.2	1,093 -1.2	1,106 1.2	1,122 1.5	1,144 1.9	1,169 2.2	1,195 2.2	1,222 2.3
Aged 35 to 44	1,346 5.3	1,406 4.5	1,448 2.9	1,540 6.4	1,618 5.1	1,684 4.1	1,722 2.3	1,781 3.4	1,821 2.3	1,858 2.0	1,900 2.2	1,939 2.1	1,975 1.8
Aged 45 to 54	1,177 8.1	1,260 7.1	1,333 5.8	1,440 8.0	1,533 6.5	1,616 5.4	1,720 6.4	1,836 6.8	1,933 5.3	2,043 5.7	2,164 5.9	2,292 5.9	2,425 5.8
Aged 55 to 64	1,198 4.3	1,251 4.4	1,276 2.0	1,347 5.5	1,412 4.9	1,467 3.8	1,600 9.1	1,742 8.9	1,921 10.3	2,110 9.9	2,309 9.4	2,520 9.2	2,737 8.6
Aged 65 to 74	1,138 9.3	1,235 8.6	1,324 7.2	1,427 7.8	1,533 7.4	1,630 6.4	1,705 4.6	1,777 4.2	1,844 3.8	1,918 4.0	2,005 4.5	2,093 4.4	2,194 4.8
Aged 75 to 84	688 0.7	739 7.4	792 7.3	844 6.5	905 7.3	962 6.2	1,048 9.0	1,124 7.2	1,198 6.6	1,281 6.9	1,365 6.6	1,449 6.2	1,536 5.9
Aged 85 and Over	286 -2.6	306 7.2	324 5.8	340 4.8	362 6.4	381 5.4	426 11.8	455 6.9	482 5.9	510 5.9	544 6.6	595 9.2	648 9.1
Aged 65 and Over	2,111 4.6	2,280 8.0	2,440 7.0	2,610 7.0	2,800 7.3	2,973 6.2	3,179 6.9	3,356 5.6	3,524 5.0	3,709 5.3	3,914 5.5	4,137 5.7	4,378 5.8

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 10c
Private Health Expenditures by Age Cohort (Males)
(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Health Expenditures	39,134 5.1	41,115 5.1	43,186 5.0	45,369 5.1	47,693 5.1	50,131 5.1	52,667 5.1	55,293 5.0	58,037 5.0	60,903 4.9	63,875 4.9	67,021 4.9	70,334 4.9	73,786 4.9
Males	17,513 5.2	18,418 5.2	19,368 5.2	20,374 5.2	21,449 5.3	22,584 5.3	23,768 5.2	24,998 5.2	26,285 5.1	27,631 5.1	29,033 5.1	30,519 5.1	32,088 5.1	33,720 5.1
Aged 0 to 14	2,157 3.1	2,228 3.3	2,303 3.4	2,383 3.5	2,470 3.7	2,571 4.1	2,683 4.3	2,802 4.4	2,926 4.4	3,057 4.5	3,196 4.5	3,343 4.6	3,498 4.7	3,661 4.7
Aged 15 to 24	1,937 6.1	2,049 5.8	2,162 5.5	2,278 5.3	2,398 5.3	2,515 4.9	2,629 4.5	2,736 4.1	2,835 3.6	2,934 3.5	3,036 3.5	3,146 3.6	3,266 3.8	3,389 3.8
Aged 25 to 34	1,254 2.6	1,289 2.8	1,327 2.9	1,365 2.8	1,404 2.9	1,443 2.7	1,482 2.7	1,525 2.9	1,572 3.1	1,621 3.1	1,672 3.1	1,721 3.0	1,770 2.9	1,819 2.8
Aged 35 to 44	2,006 1.6	2,032 1.3	2,060 1.4	2,102 2.1	2,165 3.0	2,242 3.5	2,326 3.8	2,417 3.9	2,511 3.9	2,612 4.0	2,723 4.3	2,845 4.5	2,977 4.6	3,110 4.5
Aged 45 to 54	2,557 5.5	2,695 5.4	2,826 4.9	2,946 4.2	3,053 3.6	3,141 2.9	3,219 2.5	3,298 2.5	3,377 2.4	3,452 2.2	3,521 2.0	3,583 1.8	3,650 1.9	3,742 2.5
Aged 55 to 64	2,965 8.3	3,203 8.0	3,464 8.1	3,750 8.3	4,040 7.8	4,311 6.7	4,606 6.8	4,920 6.8	5,256 6.8	5,609 6.7	5,967 6.4	6,343 6.3	6,711 5.8	7,053 5.1
Aged 65 to 74	2,308 5.2	2,451 6.2	2,613 6.6	2,788 6.7	2,993 7.4	3,272 9.3	3,557 8.7	3,844 8.1	4,146 7.9	4,456 7.5	4,779 7.2	5,113 7.0	5,483 7.2	5,885 7.3
Aged 75 to 84	1,623 5.7	1,711 5.4	1,795 4.9	1,883 4.9	1,979 5.1	2,077 4.9	2,183 5.1	2,301 5.4	2,425 5.4	2,568 5.9	2,730 6.3	2,930 7.3	3,155 7.7	3,395 7.6
Aged 85 and Over	705 8.7	760 7.9	819 7.7	880 7.5	945 7.4	1,011 7.0	1,083 7.1	1,156 6.7	1,237 7.0	1,323 6.9	1,410 6.6	1,495 6.0	1,577 5.5	1,665 5.5
Aged 65 and Over	4,636 5.9	4,922 6.2	5,226 6.2	5,551 6.2	5,918 6.6	6,361 7.5	6,823 7.3	7,301 7.0	7,808 6.9	8,347 6.9	8,919 6.9	9,539 7.0	10,215 7.1	10,945 7.1

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 11a
Private Health Expenditures by Age Cohort (Females)
(millions of current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Population	6,334 16.1	7,312 15.4	7,959 8.8	8,786 10.4	9,747 10.9	10,809 10.9	11,734 8.6	12,795 9.1	14,184 10.9	15,577 9.8	16,895 8.5	18,099 7.1	19,561 8.1
Females	3,433 15.0	3,968 15.6	4,330 9.1	4,786 10.5	5,313 11.0	5,896 11.0	6,399 8.5	6,958 8.7	7,712 10.8	8,463 9.7	9,182 8.5	9,833 7.1	10,696 8.8
Aged 0 to 14	524 16.0	601 14.7	624 3.8	663 6.3	746 12.4	841 12.9	905 7.6	987 9.0	1,095 11.0	1,181 7.9	1,262 6.8	1,359 7.7	1,410 3.7
Aged 15 to 24	315 16.7	361 14.7	378 4.7	403 6.7	432 7.2	462 6.9	514 11.2	576 12.1	661 14.7	735 11.3	810 10.1	896 10.7	943 5.2
Aged 25 to 34	530 17.2	611 15.4	683 11.8	775 13.5	808 4.2	840 4.0	887 5.6	944 6.5	1,035 9.6	1,095 5.8	1,142 4.3	1,215 6.4	1,246 2.6
Aged 35 to 44	398 16.2	457 14.9	517 13.1	592 14.7	668 12.7	754 12.9	825 9.5	901 9.1	1,034 14.9	1,147 10.9	1,251 9.0	1,334 6.7	1,431 7.2
Aged 45 to 54	355 16.6	408 14.9	452 10.6	510 13.0	567 11.2	626 10.4	683 9.1	752 10.0	840 11.7	924 10.0	999 8.1	1,084 8.5	1,223 12.8
Aged 55 to 64	380 17.0	434 14.1	469 8.2	515 9.7	590 14.5	675 14.5	725 7.4	789 8.8	867 9.9	943 8.8	1,015 7.6	1,087 7.1	1,155 6.2
Aged 65 to 74	351 14.6	405 15.4	441 8.9	487 10.3	553 13.6	638 15.4	688 7.8	741 7.8	809 9.2	889 9.9	962 8.2	1,029 7.0	1,286 24.9
Aged 75 to 84	314 7.1	373 18.9	415 11.3	455 9.4	514 13.1	595 15.6	647 8.9	692 6.9	753 8.8	837 11.1	950 13.5	1,010 6.4	1,128 11.7
Aged 85 and Over	267 10.8	318 19.2	351 10.5	386 9.8	436 13.0	464 6.6	525 13.1	576 9.7	619 7.4	711 14.9	793 11.5	817 3.0	876 7.2
Aged 65 and Over	932 10.9	1,096 17.6	1,208 10.2	1,327 9.9	1,503 13.3	1,697 12.9	1,860 9.6	2,009 8.0	2,181 8.5	2,437 11.7	2,704 11.0	2,856 5.6	3,289 15.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 11b
Private Health Expenditures by Age Cohort (Females)
(millions of current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Population	20,509 4.8	21,562 5.1	22,369 3.7	23,797 6.4	25,106 5.5	26,239 4.5	27,539 5.0	29,017 5.4	30,452 4.9	31,996 5.1	33,668 5.2	35,428 5.2	37,243 5.1
Females	11,226 4.9	11,854 5.6	12,337 4.1	13,134 6.5	13,878 5.7	14,528 4.7	15,261 5.0	16,080 5.4	16,870 4.9	17,717 5.0	18,633 5.2	19,597 5.2	20,590 5.1
Aged 0 to 14	1,462 3.7	1,477 1.1	1,473 -0.3	1,542 4.7	1,591 3.2	1,626 2.2	1,659 2.0	1,725 4.0	1,786 3.5	1,852 3.7	1,919 3.6	1,982 3.3	2,044 3.1
Aged 15 to 24	987 4.7	1,013 2.6	1,026 1.4	1,085 5.7	1,128 4.0	1,163 3.1	1,237 6.4	1,321 6.7	1,401 6.1	1,487 6.1	1,582 6.4	1,683 6.4	1,786 6.1
Aged 25 to 34	1,275 2.3	1,266 -0.7	1,238 -2.1	1,281 3.5	1,309 2.2	1,325 1.2	1,315 -0.7	1,334 1.5	1,357 1.7	1,385 2.1	1,418 2.4	1,455 2.6	1,492 2.6
Aged 35 to 44	1,523 6.5	1,607 5.5	1,676 4.3	1,795 7.1	1,894 5.5	1,980 4.5	2,024 2.2	2,095 3.5	2,144 2.4	2,191 2.2	2,240 2.2	2,287 2.1	2,331 1.9
Aged 45 to 54	1,352 10.6	1,485 9.8	1,606 8.2	1,751 9.0	1,881 7.4	2,001 6.4	2,135 6.7	2,288 7.2	2,418 5.7	2,562 6.0	2,722 6.2	2,892 6.2	3,065 6.0
Aged 55 to 64	1,208 4.6	1,258 4.1	1,292 2.7	1,374 6.4	1,444 5.1	1,504 4.1	1,637 8.9	1,782 8.9	1,965 10.3	2,157 9.8	2,360 9.4	2,574 9.1	2,794 8.5
Aged 65 to 74	1,433 11.5	1,565 9.2	1,684 7.6	1,819 8.0	1,956 7.5	2,084 6.5	2,138 2.6	2,200 2.9	2,260 2.7	2,331 3.1	2,417 3.7	2,507 3.7	2,611 4.2
Aged 75 to 84	1,152 2.1	1,281 11.2	1,393 8.7	1,491 7.1	1,614 8.3	1,730 7.2	1,849 6.9	1,957 5.8	2,055 5.0	2,160 5.1	2,261 4.7	2,353 4.1	2,442 3.8
Aged 85 and Over	834 -4.8	902 8.2	948 5.1	997 5.1	1,060 6.4	1,116 5.2	1,266 13.4	1,378 8.9	1,484 7.7	1,592 7.3	1,714 7.6	1,866 8.9	2,026 8.6
Aged 65 and Over	3,419 3.9	3,748 9.6	4,024 7.4	4,306 7.0	4,630 7.5	4,930 6.5	5,253 6.5	5,535 5.4	5,800 4.8	6,083 4.9	6,392 5.1	6,725 5.2	7,078 5.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 11c
Private Health Expenditures by Age Cohort (Females)
(millions of current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Population	39,134 5.1	41,115 5.1	43,186 5.0	45,369 5.1	47,693 5.1	50,131 5.1	52,667 5.1	55,293 5.0	58,037 5.0	60,903 4.9	63,875 4.9	67,021 4.9	70,334 4.9	73,786 4.9
Females	21,620 5.0	22,697 5.0	23,818 4.9	24,995 4.9	26,244 5.0	27,548 5.0	28,899 4.9	30,296 4.8	31,752 4.8	33,271 4.8	34,842 4.7	36,502 4.8	38,246 4.8	40,065 4.8
Aged 0 to 14	2,108 3.1	2,177 3.3	2,252 3.4	2,331 3.5	2,416 3.6	2,517 4.2	2,626 4.3	2,743 4.4	2,865 4.5	2,994 4.5	3,131 4.5	3,275 4.6	3,429 4.7	3,589 4.7
Aged 15 to 24	1,894 6.1	2,002 5.7	2,111 5.4	2,223 5.3	2,342 5.4	2,453 4.7	2,563 4.5	2,666 4.0	2,762 3.6	2,857 3.5	2,955 3.4	3,061 3.6	3,177 3.8	3,297 3.8
Aged 25 to 34	1,535 2.9	1,583 3.1	1,635 3.3	1,686 3.1	1,740 3.2	1,795 3.1	1,851 3.1	1,912 3.3	1,978 3.5	2,046 3.4	2,117 3.5	2,187 3.3	2,256 3.2	2,327 3.1
Aged 35 to 44	2,370 1.7	2,404 1.4	2,440 1.5	2,493 2.2	2,568 3.0	2,659 3.5	2,757 3.7	2,864 3.9	2,979 4.0	3,100 4.1	3,234 4.3	3,381 4.6	3,540 4.7	3,701 4.5
Aged 45 to 54	3,238 5.6	3,414 5.4	3,581 4.9	3,736 4.3	3,876 3.7	3,993 3.0	4,100 2.7	4,205 2.5	4,307 2.4	4,408 2.3	4,503 2.2	4,588 1.9	4,683 2.1	4,805 2.6
Aged 55 to 64	3,025 8.3	3,268 8.0	3,535 8.1	3,824 8.2	4,116 7.6	4,385 6.5	4,676 6.6	4,989 6.7	5,321 6.7	5,667 6.5	6,014 6.1	6,372 5.9	6,718 5.4	7,042 4.8
Aged 65 to 74	2,733 4.7	2,885 5.6	3,059 6.1	3,244 6.1	3,464 6.8	3,763 8.6	4,065 8.0	4,369 7.5	4,686 7.3	5,008 6.9	5,343 6.7	5,693 6.5	6,076 6.7	6,489 6.8
Aged 75 to 84	2,525 3.4	2,610 3.4	2,687 2.9	2,772 3.2	2,868 3.5	2,969 3.5	3,083 3.8	3,213 4.2	3,351 4.3	3,513 4.8	3,699 5.3	3,930 6.2	4,192 6.7	4,469 6.6
Aged 85 and Over	2,192 8.2	2,353 7.4	2,518 7.0	2,685 6.6	2,854 6.3	3,014 5.6	3,176 5.4	3,335 5.0	3,504 5.1	3,678 5.0	3,847 4.6	4,016 4.4	4,175 4.0	4,347 4.1
Aged 65 and Over	7,449 5.2	7,848 5.3	8,264 5.3	8,701 5.3	9,185 5.6	9,746 6.1	10,324 5.9	10,917 5.7	11,541 5.7	12,199 5.7	12,889 5.7	13,638 5.8	14,444 5.9	15,304 6.0

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 12a
Total Per Capita Health Expenditures by Age Cohort (Males) *
(current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Per Capita Health Expenditures	1,007 16.2	1,167 15.9	1,280 9.7	1,368 6.9	1,469 7.3	1,583 7.8	1,685 6.4	1,813 7.6	1,961 8.1	2,095 6.8	2,248 7.3	2,339 4.1	2,373 1.4
Males	877 17.0	1,015 15.7	1,111 9.4	1,183 6.5	1,269 7.3	1,367 7.7	1,453 6.3	1,565 7.7	1,691 8.1	1,808 6.9	1,939 7.2	2,015 3.9	2,042 1.3
Aged 0 to 14	565 14.6	650 15.2	700 7.7	736 5.1	783 6.3	861 10.0	901 4.6	950 5.5	1,045 10.0	1,092 4.5	1,161 6.3	1,172 1.0	1,164 -0.7
Aged 15 to 24	394 16.0	446 13.1	487 9.2	523 7.4	577 10.2	626 8.6	675 7.8	738 9.3	834 13.1	924 10.7	1,003 8.6	1,081 7.7	1,107 2.4
Aged 25 to 34	539 15.9	618 14.7	668 8.1	690 3.3	728 5.5	740 1.6	768 3.8	810 5.5	872 7.6	933 7.0	999 7.0	1,062 6.4	1,076 1.3
Aged 35 to 44	625 15.8	706 13.0	766 8.5	815 6.3	840 3.2	888 5.7	925 4.2	999 8.0	1,060 6.0	1,158 9.2	1,238 6.9	1,255 1.4	1,247 -0.7
Aged 45 to 54	846 15.9	966 14.1	1,051 8.8	1,099 4.5	1,174 6.8	1,252 6.7	1,290 3.0	1,372 6.4	1,471 7.2	1,543 4.9	1,641 6.4	1,682 2.5	1,679 -0.2
Aged 55 to 64	1,333 16.0	1,528 14.7	1,674 9.6	1,763 5.3	1,873 6.2	2,049 9.4	2,145 4.7	2,290 6.8	2,464 7.6	2,588 5.0	2,750 6.3	2,847 3.5	2,860 0.4
Aged 65 to 74	2,444 16.5	2,850 16.6	3,162 10.9	3,352 6.0	3,570 6.5	3,827 7.2	4,094 7.0	4,356 6.4	4,710 8.1	5,012 6.4	5,312 6.0	5,504 3.6	5,680 3.2
Aged 75 to 84	4,852 14.1	5,588 15.2	6,050 8.3	6,509 7.6	6,943 6.7	7,401 6.6	7,919 7.0	8,516 7.5	8,990 5.6	9,414 4.7	9,991 6.1	10,336 3.5	10,409 0.7
Aged 85 and Over	10,385 31.9	12,431 19.7	13,397 7.8	14,452 7.9	15,567 7.7	16,352 5.0	17,229 5.4	18,385 6.7	18,273 -0.6	19,167 4.9	19,943 4.0	20,248 1.5	20,024 -1.1
Aged 65 and Over	3,601 18.1	4,203 16.7	4,602 9.5	4,935 7.2	5,272 6.8	5,620 6.6	6,011 7.0	6,444 7.2	6,826 5.9	7,223 5.8	7,644 5.8	7,891 3.2	8,013 1.5

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 12b
Total Per Capita Health Expenditures by Age Cohort (Males) *
 (current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Per Capita Health Expenditures	2,393 0.9	2,402 0.4	2,406 0.2	2,488 3.4	2,619 5.2	2,754 5.2	2,913 5.8	3,112 6.8	3,215 3.3	3,317 3.2	3,463 4.4	3,612 4.3	3,766 4.3
Males	2,078 1.8	2,070 -0.4	2,080 0.5	2,163 4.0	2,287 5.7	2,410 5.4	2,546 5.6	2,716 6.7	2,804 3.2	2,891 3.1	3,017 4.3	3,144 4.2	3,277 4.2
Aged 0 to 14	1,268 8.9	1,236 -2.5	1,220 -1.3	1,290 5.7	1,376 6.7	1,464 6.3	1,523 4.0	1,607 5.5	1,643 2.2	1,677 2.1	1,732 3.3	1,786 3.1	1,841 3.0
Aged 15 to 24	1,183 6.9	1,176 -0.6	1,190 1.2	1,247 4.8	1,291 3.6	1,356 5.0	1,435 5.9	1,536 7.0	1,595 3.9	1,654 3.7	1,732 4.7	1,810 4.5	1,890 4.4
Aged 25 to 34	1,142 6.1	1,104 -3.3	1,101 -0.3	1,145 3.9	1,204 5.2	1,275 5.9	1,317 3.3	1,377 4.6	1,396 1.4	1,414 1.3	1,449 2.5	1,483 2.3	1,517 2.3
Aged 35 to 44	1,318 5.7	1,291 -2.1	1,271 -1.5	1,331 4.7	1,395 4.9	1,461 4.7	1,514 3.6	1,592 5.1	1,626 2.2	1,659 2.0	1,710 3.0	1,759 2.9	1,809 2.8
Aged 45 to 54	1,741 3.6	1,733 -0.4	1,720 -0.8	1,794 4.3	1,876 4.6	1,943 3.5	2,020 4.0	2,126 5.2	2,174 2.3	2,218 2.0	2,287 3.1	2,354 3.0	2,423 2.9
Aged 55 to 64	2,932 2.5	2,898 -1.2	2,874 -0.8	2,996 4.3	3,133 4.6	3,239 3.4	3,406 5.1	3,599 5.7	3,676 2.2	3,764 2.4	3,901 3.6	4,033 3.4	4,169 3.4
Aged 65 to 74	5,630 -0.9	5,668 0.7	5,709 0.7	5,839 2.3	6,174 5.7	6,520 5.6	6,882 5.6	7,322 6.4	7,516 2.6	7,697 2.4	7,982 3.7	8,265 3.5	8,547 3.4
Aged 75 to 84	9,562 -8.1	9,525 -0.4	9,584 0.6	9,615 0.3	10,038 4.4	10,426 3.9	11,059 6.1	11,797 6.7	12,115 2.7	12,415 2.5	12,911 4.0	13,397 3.8	13,884 3.6
Aged 85 and Over	17,618 -12.0	17,848 1.3	18,104 1.4	17,926 -1.0	18,201 1.5	18,428 1.2	19,351 5.0	20,516 6.0	20,902 1.9	21,239 1.6	21,862 2.9	22,366 2.3	22,958 2.6
Aged 65 and Over	7,579 -5.4	7,627 0.6	7,710 1.1	7,818 1.4	8,215 5.1	8,614 4.9	9,151 6.2	9,778 6.9	10,063 2.9	10,329 2.6	10,743 4.0	11,166 3.9	11,591 3.8

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 12c
Total Per Capita Health Expenditures by Age Cohort (Males) *
 (current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Per Capita Health Expenditures	3,928 4.3	4,100 4.4	4,280 4.4	4,471 4.4	4,671 4.5	4,878 4.4	5,091 4.4	5,310 4.3	5,537 4.3	5,773 4.2	6,011 4.1	6,266 4.2	6,534 4.3	6,812 4.3
Males	3,417 4.3	3,567 4.4	3,725 4.4	3,892 4.5	4,070 4.6	4,256 4.6	4,448 4.5	4,647 4.5	4,854 4.5	5,069 4.4	5,288 4.3	5,522 4.4	5,769 4.5	6,027 4.5
Aged 0 to 14	1,898 3.1	1,958 3.2	2,020 3.2	2,087 3.3	2,156 3.3	2,225 3.2	2,295 3.2	2,368 3.2	2,444 3.2	2,521 3.2	2,599 3.1	2,681 3.2	2,766 3.2	2,855 3.2
Aged 15 to 24	1,973 4.4	2,061 4.5	2,154 4.5	2,250 4.5	2,352 4.5	2,456 4.4	2,562 4.3	2,672 4.3	2,785 4.3	2,901 4.2	3,018 4.0	3,140 4.0	3,268 4.1	3,400 4.0
Aged 25 to 34	1,553 2.4	1,592 2.5	1,632 2.5	1,676 2.7	1,722 2.7	1,768 2.7	1,814 2.6	1,860 2.6	1,908 2.6	1,957 2.6	2,006 2.5	2,058 2.6	2,113 2.7	2,169 2.7
Aged 35 to 44	1,862 2.9	1,918 3.0	1,976 3.0	2,035 3.0	2,097 3.0	2,159 3.0	2,223 3.0	2,289 3.0	2,358 3.0	2,428 3.0	2,498 2.9	2,572 3.0	2,649 3.0	2,730 3.0
Aged 45 to 54	2,496 3.0	2,573 3.1	2,655 3.2	2,742 3.3	2,834 3.4	2,927 3.3	3,021 3.2	3,114 3.1	3,211 3.1	3,310 3.1	3,409 3.0	3,515 3.1	3,623 3.1	3,732 3.0
Aged 55 to 64	4,310 3.4	4,460 3.5	4,614 3.4	4,776 3.5	4,951 3.7	5,131 3.6	5,307 3.4	5,488 3.4	5,673 3.4	5,864 3.4	6,059 3.3	6,263 3.4	6,479 3.5	6,703 3.5
Aged 65 to 74	8,843 3.5	9,148 3.4	9,473 3.6	9,825 3.7	10,186 3.7	10,524 3.3	10,904 3.6	11,303 3.7	11,711 3.6	12,129 3.6	12,548 3.4	12,989 3.5	13,440 3.5	13,905 3.5
Aged 75 to 84	14,399 3.7	14,947 3.8	15,528 3.9	16,131 3.9	16,756 3.9	17,387 3.8	18,020 3.6	18,662 3.6	19,334 3.6	20,003 3.5	20,672 3.3	21,357 3.3	22,095 3.5	22,870 3.5
Aged 85 and Over	23,618 2.9	24,347 3.1	25,090 3.1	25,877 3.1	26,704 3.2	27,528 3.1	28,342 3.0	29,193 3.0	30,037 2.9	30,908 2.9	31,790 2.9	32,741 3.0	33,739 3.1	34,728 2.9
Aged 65 and Over	12,030 3.8	12,466 3.6	12,912 3.6	13,381 3.6	13,853 3.5	14,264 3.0	14,712 3.1	15,186 3.2	15,680 3.2	16,192 3.3	16,710 3.2	17,262 3.3	17,828 3.3	18,410 3.3

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 13a
Total Per Capita Health Expenditures by Age Cohort (Females)*
(current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Total Per Capita Health Expenditures	1,007	1,167	1,280	1,368	1,469	1,583	1,685	1,813	1,961	2,095	2,248	2,339	2,373
	16.2	15.9	9.7	6.9	7.3	7.8	6.4	7.6	8.1	6.8	7.3	4.1	1.4
Females	1,135	1,318	1,448	1,551	1,666	1,795	1,913	2,058	2,226	2,377	2,551	2,657	2,698
	15.5	16.1	9.8	7.1	7.4	7.8	6.5	7.6	8.2	6.8	7.3	4.2	1.5
Aged 0 to 14	532	614	655	691	736	821	848	905	985	1,036	1,094	1,124	1,117
	13.9	15.4	6.7	5.5	6.4	11.6	3.2	6.7	8.9	5.2	5.6	2.7	-0.6
Aged 15 to 24	612	703	771	826	881	940	1,009	1,101	1,240	1,338	1,447	1,534	1,549
	15.8	15.0	9.6	7.1	6.7	6.7	7.4	9.1	12.6	7.9	8.2	6.0	0.9
Aged 25 to 34	872	994	1,097	1,173	1,206	1,269	1,313	1,383	1,502	1,580	1,663	1,754	1,755
	14.6	14.0	10.4	6.9	2.9	5.2	3.4	5.4	8.6	5.2	5.3	5.5	0.0
Aged 35 to 44	831	933	1,009	1,066	1,124	1,213	1,258	1,300	1,419	1,512	1,592	1,617	1,623
	14.0	12.3	8.1	5.6	5.5	7.9	3.7	3.3	9.2	6.5	5.3	1.6	0.4
Aged 45 to 54	922	1,052	1,153	1,240	1,337	1,429	1,514	1,607	1,714	1,841	1,919	1,977	1,987
	15.3	14.1	9.6	7.5	7.8	6.9	5.9	6.2	6.6	7.5	4.2	3.0	0.5
Aged 55 to 64	1,231	1,393	1,516	1,608	1,732	1,885	1,994	2,140	2,307	2,476	2,657	2,805	2,807
	16.0	13.1	8.9	6.0	7.7	8.9	5.8	7.3	7.8	7.3	7.3	5.6	0.1
Aged 65 to 74	2,250	2,596	2,868	3,055	3,241	3,531	3,677	3,937	4,225	4,523	4,786	4,982	5,319
	14.6	15.4	10.5	6.5	6.1	8.9	4.1	7.1	7.3	7.1	5.8	3.7	7.2
Aged 75 to 84	5,121	5,994	6,489	6,805	7,214	7,705	8,185	8,707	9,238	9,585	10,470	10,894	10,919
	11.4	17.1	8.3	4.9	6.0	6.8	6.2	6.4	6.1	3.8	9.2	4.1	0.2
Aged 85 and Over	12,431	14,507	15,542	16,358	17,725	17,650	19,253	20,954	21,469	22,642	23,966	24,079	23,720
	14.5	16.7	7.1	5.2	8.4	-0.4	9.1	8.8	2.5	5.5	5.8	0.5	-1.5
Aged 65 and Over	4,115	4,816	5,257	5,573	5,961	6,285	6,700	7,214	7,640	8,084	8,695	8,983	9,186
	13.8	17.0	9.1	6.0	7.0	5.4	6.6	7.7	5.9	5.8	7.6	3.3	2.3

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 13b
Total Per Capita Health Expenditures by Age Cohort (Females)*
 (current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Total Per Capita Health Expenditures	2,393 0.9	2,402 0.4	2,406 0.2	2,488 3.4	2,619 5.2	2,754 5.2	2,913 5.8	3,112 6.8	3,215 3.3	3,317 3.2	3,463 4.4	3,612 4.3	3,766 4.3
Females	2,703 0.2	2,727 0.9	2,726 0.0	2,807 3.0	2,944 4.9	3,091 5.0	3,273 5.9	3,500 7.0	3,618 3.4	3,734 3.2	3,900 4.5	4,069 4.3	4,244 4.3
Aged 0 to 14	1,228 10.0	1,193 -2.8	1,168 -2.2	1,215 4.0	1,278 5.2	1,343 5.1	1,397 4.0	1,475 5.6	1,511 2.5	1,547 2.4	1,602 3.5	1,655 3.3	1,709 3.3
Aged 15 to 24	1,681 8.5	1,657 -1.4	1,637 -1.2	1,688 3.1	1,738 3.0	1,813 4.3	1,919 5.8	2,051 6.9	2,121 3.4	2,189 3.2	2,286 4.4	2,381 4.2	2,478 4.1
Aged 25 to 34	1,904 8.5	1,871 -1.7	1,862 -0.5	1,947 4.6	2,070 6.3	2,213 6.9	2,300 3.9	2,415 5.0	2,446 1.3	2,475 1.2	2,538 2.5	2,598 2.4	2,659 2.4
Aged 35 to 44	1,716 5.7	1,701 -0.9	1,708 0.4	1,767 3.4	1,835 3.8	1,918 4.5	1,985 3.5	2,086 5.1	2,128 2.0	2,167 1.8	2,230 2.9	2,291 2.7	2,353 2.7
Aged 45 to 54	2,076 4.5	2,088 0.6	2,102 0.7	2,180 3.7	2,262 3.7	2,336 3.3	2,437 4.3	2,577 5.8	2,650 2.8	2,719 2.6	2,818 3.7	2,916 3.5	3,016 3.4
Aged 55 to 64	2,901 3.3	2,904 0.1	2,861 -1.5	2,995 4.7	3,122 4.2	3,222 3.2	3,396 5.4	3,601 6.0	3,692 2.5	3,794 2.8	3,945 4.0	4,093 3.8	4,245 3.7
Aged 65 to 74	5,337 0.3	5,501 3.1	5,524 0.4	5,692 3.0	6,039 6.1	6,413 6.2	6,735 5.0	7,139 6.0	7,310 2.4	7,469 2.2	7,726 3.4	7,981 3.3	8,235 3.2
Aged 75 to 84	9,783 -10.4	9,876 0.9	9,785 -0.9	9,677 -1.1	10,011 3.5	10,358 3.5	10,959 5.8	11,684 6.6	12,013 2.8	12,323 2.6	12,822 4.0	13,312 3.8	13,803 3.7
Aged 85 and Over	19,918 -16.0	20,430 2.6	20,144 -1.4	19,794 -1.7	20,003 1.1	20,204 1.0	21,249 5.2	22,602 6.4	23,160 2.5	23,696 2.3	24,545 3.6	25,313 3.1	26,138 3.3
Aged 65 and Over	8,434 -8.2	8,663 2.7	8,664 0.0	8,734 0.8	9,125 4.5	9,545 4.6	10,169 6.5	10,908 7.3	11,272 3.3	11,610 3.0	12,109 4.3	12,618 4.2	13,129 4.0

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 13c
Total Per Capita Health Expenditures by Age Cohort (Females)*
(current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Total Per Capita Health Expenditures	3,928	4,100	4,280	4,471	4,671	4,878	5,091	5,310	5,537	5,773	6,011	6,266	6,534	6,812
Females	4.3	4.4	4.4	4.4	4.5	4.4	4.4	4.3	4.3	4.2	4.1	4.2	4.3	4.3
	4,428	4,623	4,825	5,037	5,261	5,489	5,722	5,960	6,208	6,464	6,722	6,997	7,285	7,584
	4.3	4.4	4.4	4.4	4.4	4.3	4.2	4.2	4.2	4.1	4.0	4.1	4.1	4.1
Aged 0 to 14	1,765	1,824	1,886	1,951	2,020	2,088	2,158	2,230	2,304	2,381	2,458	2,539	2,624	2,712
	3.3	3.3	3.4	3.5	3.5	3.4	3.3	3.3	3.3	3.3	3.2	3.3	3.4	3.3
Aged 15 to 24	2,581	2,690	2,803	2,923	3,048	3,177	3,307	3,442	3,582	3,723	3,865	4,014	4,169	4,329
	4.1	4.2	4.2	4.3	4.3	4.2	4.1	4.1	4.1	3.9	3.8	3.8	3.9	3.9
Aged 25 to 34	2,723	2,792	2,864	2,943	3,026	3,107	3,189	3,273	3,358	3,446	3,533	3,627	3,725	3,825
	2.4	2.5	2.6	2.8	2.8	2.7	2.6	2.6	2.6	2.6	2.5	2.7	2.7	2.7
Aged 35 to 44	2,418	2,488	2,560	2,634	2,710	2,787	2,867	2,949	3,034	3,120	3,207	3,298	3,394	3,494
	2.8	2.9	2.9	2.9	2.9	2.8	2.9	2.9	2.9	2.9	2.8	2.8	2.9	2.9
Aged 45 to 54	3,122	3,234	3,352	3,477	3,609	3,742	3,877	4,014	4,154	4,298	4,443	4,597	4,755	4,915
	3.5	3.6	3.6	3.7	3.8	3.7	3.6	3.5	3.5	3.5	3.4	3.5	3.4	3.4
Aged 55 to 64	4,402	4,569	4,740	4,922	5,116	5,317	5,514	5,716	5,924	6,138	6,357	6,586	6,828	7,079
	3.7	3.8	3.8	3.8	4.0	3.9	3.7	3.7	3.6	3.6	3.6	3.6	3.7	3.7
Aged 65 to 74	8,502	8,780	9,074	9,394	9,722	10,028	10,374	10,735	11,105	11,485	11,863	12,262	12,671	13,094
	3.2	3.3	3.4	3.5	3.5	3.1	3.4	3.5	3.4	3.4	3.3	3.4	3.3	3.3
Aged 75 to 84	14,322	14,864	15,440	16,035	16,654	17,275	17,902	18,537	19,203	19,867	20,531	21,216	21,946	22,718
	3.8	3.8	3.9	3.9	3.9	3.7	3.6	3.5	3.6	3.5	3.3	3.3	3.4	3.5
Aged 85 and Over	27,025	27,993	28,988	30,047	31,160	32,283	33,402	34,552	35,710	36,893	38,093	39,355	40,688	42,017
	3.4	3.6	3.6	3.7	3.7	3.6	3.5	3.4	3.4	3.3	3.3	3.3	3.4	3.3
Aged 65 and Over	13,654	14,171	14,693	15,238	15,776	16,229	16,709	17,206	17,722	18,254	18,782	19,336	19,899	20,479
	4.0	3.8	3.7	3.7	3.5	2.9	3.0	3.0	3.0	3.0	2.9	2.9	2.9	2.9

* Excludes expenditures by municipal governments, Workers' Compensation Boards and federal government direct spending.

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 14a
Provincial and Territorial Government Per Capita Health Expenditures by Age Cohort (Males)
 (current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Per Capita Health Expenditures	752	876	966	1,025	1,091	1,169	1,241	1,336	1,441	1,532	1,645	1,701	1,691
	16.7	16.5	10.3	6.1	6.5	7.1	6.2	7.6	7.9	6.4	7.3	3.4	-0.6
Males	642	747	823	869	923	988	1,047	1,125	1,212	1,290	1,384	1,427	1,418
	17.4	16.3	10.1	5.6	6.3	7.0	6.0	7.5	7.7	6.4	7.3	3.1	-0.6
Aged 0 to 14	376	433	474	496	512	556	573	598	659	681	725	714	694
	13.6	15.4	9.4	4.6	3.3	8.5	3.2	4.3	10.2	3.4	6.4	-1.5	-2.8
Aged 15 to 24	301	338	370	395	429	457	480	510	566	615	655	690	685
	15.9	12.3	9.6	6.6	8.6	6.5	5.0	6.4	11.0	8.6	6.6	5.2	-0.6
Aged 25 to 34	323	375	416	425	452	457	475	501	543	583	627	662	660
	16.5	16.0	11.2	2.0	6.3	1.3	3.9	5.5	8.3	7.5	7.6	5.5	-0.4
Aged 35 to 44	378	434	469	485	498	530	547	591	619	682	731	725	698
	17.1	14.8	8.2	3.3	2.6	6.5	3.2	8.1	4.7	10.2	7.1	-0.8	-3.7
Aged 45 to 54	564	643	700	713	755	805	815	864	925	966	1,037	1,064	1,030
	15.7	13.9	8.9	1.9	5.9	6.6	1.3	6.0	7.0	4.5	7.4	2.5	-3.1
Aged 55 to 64	995	1,148	1,258	1,300	1,350	1,454	1,513	1,611	1,723	1,789	1,898	1,944	1,911
	16.5	15.4	9.6	3.4	3.8	7.7	4.1	6.5	6.9	3.8	6.1	2.4	-1.7
Aged 65 to 74	2,019	2,369	2,647	2,801	2,962	3,150	3,373	3,594	3,889	4,124	4,369	4,510	4,534
	17.2	17.3	11.7	5.8	5.7	6.4	7.1	6.5	8.2	6.0	5.9	3.2	0.5
Aged 75 to 84	4,176	4,826	5,213	5,576	5,916	6,262	6,725	7,269	7,689	8,014	8,498	8,795	8,764
	15.1	15.6	8.0	7.0	6.1	5.8	7.4	8.1	5.8	4.2	6.0	3.5	-0.3
Aged 85 and Over	8,850	10,633	11,456	12,330	13,261	13,884	14,643	15,690	15,557	16,207	16,863	17,184	16,893
	29.9	20.1	7.7	7.6	7.6	4.7	5.5	7.1	-0.8	4.2	4.0	1.9	-1.7
Aged 65 and Over	3,038	3,562	3,909	4,178	4,440	4,701	5,038	5,420	5,744	6,050	6,400	6,601	6,590
	18.5	17.3	9.8	6.9	6.3	5.9	7.2	7.6	6.0	5.3	5.8	3.1	-0.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 14b
Provincial and Territorial Government Per Capita Health Expenditures by Age Cohort (Males)

(current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Per Capita Health Expenditures	1,687	1,667	1,652	1,695	1,789	1,893	2,017	2,176	2,241	2,301	2,402	2,503	2,609
	-0.3	-1.2	-0.9	2.6	5.5	5.8	6.6	7.9	3.0	2.7	4.4	4.2	4.2
Males	1,432	1,402	1,397	1,445	1,537	1,635	1,740	1,873	1,926	1,975	2,059	2,144	2,232
	1.0	-2.1	-0.4	3.5	6.4	6.3	6.4	7.7	2.8	2.5	4.3	4.1	4.1
Aged 0 to 14	783	746	731	776	841	912	958	1,017	1,028	1,036	1,063	1,088	1,113
	12.8	-4.7	-2.0	6.1	8.4	8.4	5.1	6.1	1.1	0.8	2.6	2.4	2.3
Aged 15 to 24	736	708	703	728	748	793	842	905	929	951	988	1,024	1,062
	7.4	-3.9	-0.6	3.5	2.7	6.0	6.2	7.5	2.6	2.3	4.0	3.6	3.6
Aged 25 to 34	715	675	672	691	729	784	824	874	885	894	918	942	966
	8.4	-5.7	-0.4	2.9	5.5	7.5	5.1	6.1	1.2	1.0	2.8	2.6	2.6
Aged 35 to 44	753	715	693	729	775	824	867	922	936	947	972	996	1,021
	7.9	-5.1	-3.1	5.2	6.4	6.3	5.2	6.4	1.5	1.1	2.7	2.5	2.5
Aged 45 to 54	1,068	1,042	1,015	1,060	1,121	1,173	1,229	1,306	1,328	1,344	1,382	1,417	1,454
	3.7	-2.5	-2.6	4.5	5.7	4.7	4.8	6.3	1.7	1.2	2.8	2.6	2.6
Aged 55 to 64	1,954	1,886	1,855	1,939	2,052	2,148	2,250	2,385	2,407	2,435	2,507	2,574	2,642
	2.3	-3.5	-1.7	4.5	5.8	4.7	4.8	6.0	0.9	1.2	3.0	2.6	2.7
Aged 65 to 74	4,406	4,362	4,329	4,375	4,622	4,881	5,181	5,564	5,705	5,829	6,052	6,272	6,489
	-2.8	-1.0	-0.7	1.1	5.6	5.6	6.2	7.4	2.5	2.2	3.8	3.6	3.5
Aged 75 to 84	7,936	7,834	7,834	7,824	8,179	8,514	9,037	9,697	9,944	10,166	10,578	10,978	11,379
	-9.4	-1.3	0.0	-0.1	4.5	4.1	6.1	7.3	2.5	2.2	4.1	3.8	3.7
Aged 85 and Over	14,669	14,784	14,961	14,755	14,998	15,238	15,970	17,032	17,328	17,565	18,077	18,469	18,949
	-13.2	0.8	1.2	-1.4	1.6	1.6	4.8	6.7	1.7	1.4	2.9	2.2	2.6
Aged 65 and Over	6,123	6,088	6,100	6,137	6,451	6,776	7,220	7,777	7,996	8,192	8,529	8,870	9,212
	-7.1	-0.6	0.2	0.6	5.1	5.0	6.6	7.7	2.8	2.4	4.1	4.0	3.9

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 14c
Provincial and Territorial Government Per Capita Health Expenditures by Age Cohort (Males)
(current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Per Capita Health Expenditures	2,722 4.3	2,842 4.4	2,968 4.4	3,103 4.5	3,244 4.6	3,389 4.5	3,538 4.4	3,692 4.3	3,852 4.3	4,017 4.3	4,184 4.2	4,364 4.3	4,553 4.3	4,750 4.3
Males	2,327 4.2	2,429 4.4	2,536 4.4	2,651 4.5	2,773 4.6	2,901 4.6	3,033 4.6	3,170 4.5	3,313 4.5	3,461 4.5	3,612 4.4	3,774 4.5	3,946 4.6	4,126 4.6
Aged 0 to 14	1,139 2.4	1,167 2.5	1,197 2.6	1,230 2.7	1,263 2.7	1,295 2.5	1,327 2.5	1,360 2.5	1,395 2.6	1,430 2.5	1,464 2.4	1,501 2.5	1,539 2.6	1,579 2.6
Aged 15 to 24	1,101 3.7	1,144 3.9	1,189 3.9	1,237 4.0	1,287 4.0	1,337 3.9	1,388 3.8	1,440 3.8	1,495 3.8	1,550 3.6	1,603 3.5	1,659 3.5	1,718 3.5	1,779 3.5
Aged 25 to 34	991 2.6	1,019 2.8	1,048 2.9	1,080 3.0	1,113 3.1	1,145 2.9	1,178 2.9	1,211 2.8	1,245 2.8	1,280 2.8	1,314 2.7	1,351 2.8	1,390 2.9	1,429 2.9
Aged 35 to 44	1,048 2.6	1,077 2.8	1,107 2.8	1,137 2.7	1,167 2.7	1,197 2.6	1,228 2.6	1,261 2.6	1,294 2.7	1,329 2.6	1,362 2.5	1,397 2.6	1,434 2.7	1,473 2.7
Aged 45 to 54	1,494 2.8	1,537 2.8	1,583 3.0	1,633 3.2	1,686 3.2	1,738 3.1	1,790 3.0	1,841 2.8	1,893 2.8	1,946 2.8	1,999 2.7	2,056 2.8	2,113 2.8	2,169 2.6
Aged 55 to 64	2,715 2.7	2,793 2.9	2,873 2.8	2,958 3.0	3,051 3.1	3,146 3.1	3,235 2.8	3,326 2.8	3,419 2.8	3,514 2.8	3,610 2.7	3,711 2.8	3,819 2.9	3,932 3.0
Aged 65 to 74	6,719 3.5	6,955 3.5	7,209 3.7	7,487 3.9	7,769 3.8	8,025 3.3	8,321 3.7	8,635 3.8	8,953 3.7	9,280 3.6	9,604 3.5	9,946 3.6	10,294 3.5	10,652 3.5
Aged 75 to 84	11,804 3.7	12,260 3.9	12,744 4.0	13,247 3.9	13,765 3.9	14,286 3.8	14,806 3.6	15,332 3.5	15,884 3.6	16,429 3.4	16,972 3.3	17,524 3.3	18,122 3.4	18,754 3.5
Aged 85 and Over	19,493 2.9	20,101 3.1	20,721 3.1	21,378 3.2	22,067 3.2	22,749 3.1	23,418 2.9	24,119 3.0	24,810 2.9	25,524 2.9	26,244 2.8	27,026 3.0	27,848 3.0	28,655 2.9
Aged 65 and Over	9,567 3.9	9,919 3.7	10,280 3.6	10,661 3.7	11,040 3.6	11,361 2.9	11,715 3.1	12,092 3.2	12,484 3.2	12,891 3.3	13,300 3.2	13,738 3.3	14,186 3.3	14,647 3.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 15a
Provincial and Territorial Government Per Capita Health Expenditures by Age Cohort (Females)
(current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Per Capita Health Expenditures	752	876	966	1,025	1,091	1,169	1,241	1,336	1,441	1,532	1,645	1,701	1,691
	16.7	16.5	10.3	6.1	6.5	7.1	6.2	7.6	7.9	6.4	7.3	3.4	-0.6
Females	860	1,004	1,108	1,179	1,257	1,347	1,432	1,543	1,666	1,771	1,902	1,970	1,959
	16.1	16.7	10.4	6.4	6.6	7.1	6.4	7.7	7.9	6.3	7.4	3.6	-0.5
Aged 0 to 14	337	391	423	445	458	507	512	542	588	613	648	648	628
	12.3	15.8	8.4	5.1	3.0	10.7	1.1	5.7	8.6	4.3	5.6	0.1	-3.1
Aged 15 to 24	480	550	607	647	685	726	766	820	913	968	1,035	1,076	1,064
	15.5	14.6	10.4	6.6	5.9	6.1	5.4	7.2	11.2	6.0	6.9	4.0	-1.0
Aged 25 to 34	626	716	792	833	859	915	946	1,000	1,090	1,149	1,210	1,268	1,248
	14.8	14.4	10.6	5.2	3.1	6.5	3.4	5.7	9.1	5.3	5.4	4.7	-1.5
Aged 35 to 44	564	643	695	720	750	805	828	848	922	982	1,032	1,032	1,009
	15.0	13.9	8.2	3.6	4.0	7.4	2.9	2.4	8.7	6.5	5.1	-0.1	-2.2
Aged 45 to 54	637	725	793	835	889	941	991	1,048	1,110	1,200	1,252	1,292	1,253
	14.8	13.8	9.3	5.3	6.5	5.8	5.4	5.7	6.0	8.0	4.4	3.2	-3.0
Aged 55 to 64	896	1,019	1,121	1,181	1,247	1,333	1,405	1,500	1,604	1,710	1,833	1,924	1,876
	16.6	13.6	10.0	5.4	5.6	6.9	5.4	6.8	6.9	6.6	7.2	4.9	-2.5
Aged 65 to 74	1,818	2,109	2,347	2,493	2,624	2,841	2,959	3,183	3,423	3,662	3,878	4,008	4,151
	15.4	16.0	11.3	6.2	5.3	8.3	4.1	7.6	7.5	7.0	5.9	3.4	3.6
Aged 75 to 84	4,368	5,132	5,564	5,831	6,152	6,522	6,949	7,435	7,910	8,166	8,908	9,274	9,146
	13.0	17.5	8.4	4.8	5.5	6.0	6.6	7.0	6.4	3.2	9.1	4.1	-1.4
Aged 85 and Over	10,403	12,201	13,087	13,769	14,919	14,774	16,142	17,669	18,101	18,935	20,010	20,164	19,681
	16.4	17.3	7.3	5.2	8.4	-1.0	9.3	9.5	2.4	4.6	5.7	0.8	-2.4
Aged 65 and Over	3,430	4,034	4,417	4,677	4,981	5,217	5,573	6,034	6,401	6,741	7,247	7,488	7,502
	15.2	17.6	9.5	5.9	6.5	4.7	6.8	8.3	6.1	5.3	7.5	3.3	0.2

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 15b
Provincial and Territorial Government Per Capita Health Expenditures by Age Cohort (Females)
(current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Per Capita Health Expenditures	1,687	1,667	1,652	1,695	1,789	1,893	2,017	2,176	2,241	2,301	2,402	2,503	2,609
Females	-0.3	-1.2	-0.9	2.6	5.5	5.8	6.6	7.9	3.0	2.7	4.4	4.2	4.2
	1,937	1,927	1,903	1,939	2,035	2,147	2,290	2,473	2,549	2,620	2,738	2,856	2,979
	-1.1	-0.5	-1.3	1.9	5.0	5.5	6.7	8.0	3.1	2.8	4.5	4.3	4.3
Aged 0 to 14	725	686	663	686	730	779	818	869	880	888	913	936	959
	15.4	-5.3	-3.3	3.4	6.4	6.7	5.0	6.2	1.3	1.0	2.8	2.5	2.5
Aged 15 to 24	1,174	1,138	1,115	1,140	1,172	1,235	1,308	1,402	1,436	1,466	1,521	1,574	1,629
	10.3	-3.1	-2.1	2.3	2.8	5.4	5.9	7.3	2.4	2.1	3.8	3.5	3.5
Aged 25 to 34	1,378	1,341	1,334	1,391	1,488	1,611	1,692	1,794	1,813	1,828	1,876	1,920	1,966
	10.4	-2.7	-0.5	4.3	7.0	8.2	5.1	6.0	1.1	0.8	2.6	2.4	2.4
Aged 35 to 44	1,077	1,043	1,038	1,064	1,105	1,164	1,218	1,291	1,307	1,317	1,349	1,379	1,409
	6.7	-3.2	-0.5	2.5	3.9	5.3	4.6	6.0	1.2	0.8	2.5	2.2	2.2
Aged 45 to 54	1,301	1,274	1,255	1,291	1,338	1,388	1,461	1,563	1,599	1,628	1,685	1,740	1,796
	3.9	-2.1	-1.5	2.9	3.7	3.7	5.3	6.9	2.3	1.8	3.5	3.2	3.2
Aged 55 to 64	1,937	1,912	1,857	1,946	2,047	2,136	2,249	2,397	2,434	2,478	2,567	2,650	2,736
	3.3	-1.3	-2.9	4.8	5.2	4.4	5.3	6.6	1.5	1.8	3.6	3.3	3.2
Aged 65 to 74	4,053	4,110	4,034	4,090	4,321	4,578	4,852	5,205	5,327	5,434	5,635	5,832	6,028
	-2.4	1.4	-1.8	1.4	5.7	5.9	6.0	7.3	2.4	2.0	3.7	3.5	3.4
Aged 75 to 84	8,012	7,970	7,779	7,605	7,834	8,087	8,596	9,250	9,515	9,753	10,175	10,587	10,998
	-12.4	-0.5	-2.4	-2.2	3.0	3.2	6.3	7.6	2.9	2.5	4.3	4.0	3.9
Aged 85 and Over	16,208	16,559	16,220	15,820	15,964	16,157	16,974	18,199	18,643	19,053	19,763	20,389	21,072
	-17.6	2.2	-2.0	-2.5	0.9	1.2	5.1	7.2	2.4	2.2	3.7	3.2	3.4
Aged 65 and Over	6,717	6,817	6,717	6,689	6,964	7,277	7,797	8,452	8,741	8,998	9,410	9,826	10,244
	-10.5	1.5	-1.5	-0.4	4.1	4.5	7.1	8.4	3.4	2.9	4.6	4.4	4.3

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 15c
Provincial and Territorial Government Per Capita Health Expenditures by Age Cohort (Females)
(current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Per Capita Health Expenditures	2,722 4.3	2,842 4.4	2,968 4.4	3,103 4.5	3,244 4.6	3,389 4.5	3,538 4.4	3,692 4.3	3,852 4.3	4,017 4.3	4,184 4.2	4,364 4.3	4,553 4.3	4,750 4.3
Females	3,109 4.4	3,248 4.5	3,392 4.5	3,545 4.5	3,706 4.5	3,868 4.4	4,034 4.3	4,204 4.2	4,381 4.2	4,563 4.2	4,746 4.0	4,943 4.1	5,149 4.2	5,364 4.2
Aged 0 to 14	984 2.6	1,010 2.7	1,038 2.7	1,068 2.9	1,099 2.9	1,128 2.6	1,158 2.6	1,188 2.7	1,221 2.7	1,253 2.7	1,285 2.6	1,319 2.7	1,355 2.7	1,392 2.7
Aged 15 to 24	1,686 3.5	1,749 3.7	1,815 3.8	1,885 3.8	1,957 3.8	2,031 3.8	2,105 3.6	2,182 3.7	2,262 3.7	2,341 3.5	2,420 3.4	2,501 3.4	2,587 3.4	2,675 3.4
Aged 25 to 34	2,014 2.5	2,067 2.6	2,123 2.7	2,184 2.9	2,248 2.9	2,310 2.8	2,372 2.7	2,435 2.7	2,500 2.7	2,567 2.7	2,632 2.5	2,703 2.7	2,777 2.7	2,853 2.7
Aged 35 to 44	1,442 2.3	1,478 2.5	1,514 2.5	1,552 2.5	1,589 2.4	1,626 2.3	1,665 2.4	1,704 2.4	1,745 2.4	1,787 2.4	1,827 2.2	1,870 2.3	1,915 2.4	1,963 2.5
Aged 45 to 54	1,856 3.4	1,921 3.5	1,990 3.6	2,064 3.7	2,142 3.8	2,220 3.6	2,297 3.5	2,374 3.4	2,454 3.4	2,535 3.3	2,616 3.2	2,702 3.3	2,789 3.2	2,876 3.1
Aged 55 to 64	2,827 3.3	2,923 3.4	3,022 3.4	3,128 3.5	3,243 3.7	3,361 3.6	3,473 3.3	3,586 3.3	3,704 3.3	3,825 3.3	3,947 3.2	4,075 3.3	4,212 3.4	4,354 3.4
Aged 65 to 74	6,234 3.4	6,449 3.4	6,679 3.6	6,932 3.8	7,188 3.7	7,420 3.2	7,689 3.6	7,972 3.7	8,262 3.6	8,558 3.6	8,851 3.4	9,160 3.5	9,476 3.4	9,801 3.4
Aged 75 to 84	11,435 4.0	11,892 4.0	12,380 4.1	12,884 4.1	13,405 4.0	13,926 3.9	14,449 3.8	14,978 3.7	15,535 3.7	16,087 3.6	16,635 3.4	17,199 3.4	17,802 3.5	18,444 3.6
Aged 85 and Over	21,814 3.5	22,631 3.7	23,470 3.7	24,365 3.8	25,304 3.9	26,249 3.7	27,184 3.6	28,146 3.5	29,112 3.4	30,096 3.4	31,093 3.3	32,142 3.4	33,252 3.5	34,352 3.3
Aged 65 and Over	10,674 4.2	11,099 4.0	11,529 3.9	11,979 3.9	12,419 3.7	12,784 2.9	13,170 3.0	13,573 3.1	13,991 3.1	14,420 3.1	14,844 2.9	15,289 3.0	15,742 3.0	16,208 3.0

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 16a
Private Per Capita Health Expenditures by Age Cohort (Males)
(current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Per Capita Health Expenditures	255 14.7	291 14.1	314 7.8	343 9.4	377 9.9	414 9.8	444 7.1	477 7.6	520 8.9	562 8.2	603 7.2	638 5.8	682 6.9
Males	235 16.0	268 14.0	288 7.5	314 9.3	346 9.9	379 9.8	407 7.2	439 8.0	478 8.9	518 8.3	555 7.2	588 5.9	623 6.0
Aged 0 to 14	189 16.6	217 14.8	226 4.1	240 6.3	270 12.6	305 13.0	328 7.3	352 7.5	386 9.7	411 6.4	436 6.0	458 5.0	470 2.6
Aged 15 to 24	93 16.5	108 15.8	117 8.0	129 10.0	148 15.1	170 14.8	196 15.3	228 16.4	268 17.7	309 15.2	347 12.5	391 12.5	422 7.9
Aged 25 to 34	216 15.0	243 12.8	252 3.4	265 5.4	276 4.2	282 2.2	293 3.7	309 5.6	330 6.6	350 6.3	371 6.0	400 7.9	417 4.0
Aged 35 to 44	247 13.9	273 10.3	297 8.9	330 11.0	343 3.9	358 4.5	378 5.6	408 7.9	441 7.9	475 7.9	507 6.7	530 4.6	549 3.4
Aged 45 to 54	282 16.3	323 14.6	351 8.7	385 9.7	418 8.6	448 7.0	475 6.0	508 7.0	546 7.5	576 5.5	603 4.7	618 2.5	649 5.0
Aged 55 to 64	338 14.7	380 12.5	416 9.6	463 11.1	523 13.1	596 13.9	632 6.1	679 7.4	741 9.1	799 7.8	852 6.7	903 5.9	949 5.1
Aged 65 to 74	425 13.4	482 13.3	515 7.0	551 7.0	608 10.3	677 11.4	721 6.4	762 5.8	821 7.7	888 8.2	943 6.2	994 5.4	1,146 15.3
Aged 75 to 84	676 8.5	762 12.6	836 9.8	933 11.6	1,026 10.0	1,139 10.9	1,194 4.9	1,247 4.4	1,301 4.4	1,400 7.6	1,493 6.7	1,541 3.2	1,645 6.7
Aged 85 and Over	1,535 44.8	1,798 17.1	1,940 7.9	2,122 9.4	2,305 8.6	2,468 7.1	2,586 4.8	2,695 4.2	2,715 0.7	2,960 9.0	3,080 4.0	3,084 -0.5	3,131 2.2
Aged 65 and Over	564 16.0	641 13.7	693 8.1	757 9.2	832 10.0	920 10.5	973 5.8	1,024 5.3	1,082 5.7	1,173 8.3	1,244 6.1	1,291 3.7	1,423 10.3

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 16b
Private Per Capita Health Expenditures by Age Cohort (Males)
(current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Per Capita Health Expenditures	706	735	754	794	830	861	896	936	975	1,016	1,061	1,108	1,156
	3.6	4.0	2.6	5.3	4.6	3.7	4.1	4.5	4.1	4.3	4.4	4.4	4.3
Males	645	668	683	718	749	775	806	843	878	916	958	1,001	1,045
	3.5	3.5	2.3	5.1	4.4	3.5	4.0	4.5	4.2	4.3	4.5	4.5	4.4
Aged 0 to 14	485	490	489	515	535	552	564	590	615	641	669	699	728
	3.2	1.1	-0.2	5.2	4.0	3.2	2.2	4.6	4.1	4.3	4.4	4.4	4.2
Aged 15 to 24	447	469	487	519	543	563	594	630	666	703	744	785	828
	5.9	4.9	3.8	6.6	4.8	3.7	5.4	6.2	5.6	5.7	5.7	5.6	5.4
Aged 25 to 34	427	430	430	454	475	492	493	503	511	520	531	541	551
	2.5	0.7	0.0	5.6	4.7	3.5	0.4	1.9	1.6	1.8	2.0	2.0	1.9
Aged 35 to 44	565	576	578	602	620	637	647	669	690	713	737	763	788
	3.0	1.9	0.5	4.0	3.0	2.7	1.6	3.5	3.1	3.3	3.5	3.4	3.3
Aged 45 to 54	673	692	705	734	756	770	791	819	845	874	905	937	969
	3.6	2.8	1.9	4.1	3.0	1.9	2.7	3.6	3.2	3.4	3.6	3.5	3.4
Aged 55 to 64	978	1,011	1,019	1,057	1,081	1,091	1,156	1,214	1,270	1,329	1,393	1,459	1,526
	3.1	3.4	0.7	3.8	2.3	0.9	5.9	5.1	4.6	4.7	4.8	4.7	4.6
Aged 65 to 74	1,224	1,307	1,380	1,464	1,552	1,639	1,701	1,758	1,811	1,868	1,930	1,994	2,058
	6.8	6.7	5.6	6.1	6.0	5.6	3.8	3.3	3.0	3.2	3.3	3.3	3.2
Aged 75 to 84	1,626	1,690	1,750	1,791	1,859	1,912	2,023	2,100	2,171	2,248	2,332	2,419	2,505
	-1.2	4.0	3.6	2.3	3.7	2.9	5.8	3.8	3.4	3.6	3.7	3.7	3.6
Aged 85 and Over	2,949	3,065	3,142	3,171	3,204	3,191	3,382	3,484	3,574	3,674	3,784	3,897	4,010
	-5.8	3.9	2.5	0.9	1.0	-0.4	6.0	3.0	2.6	2.8	3.0	3.0	2.9
Aged 65 and Over	1,457	1,538	1,611	1,681	1,764	1,838	1,931	2,001	2,067	2,137	2,214	2,296	2,378
	2.4	5.6	4.7	4.4	4.9	4.2	5.0	3.7	3.3	3.4	3.6	3.7	3.6

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 16c
Private Per Capita Health Expenditures by Age Cohort (Males)
(current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Per Capita Health Expenditures	1,206 4.3	1,258 4.3	1,312 4.3	1,368 4.3	1,427 4.3	1,489 4.3	1,553 4.3	1,618 4.2	1,686 4.2	1,755 4.1	1,827 4.1	1,902 4.1	1,981 4.1	2,062 4.1
Males	1,091 4.4	1,139 4.4	1,189 4.4	1,241 4.4	1,297 4.5	1,355 4.5	1,415 4.4	1,477 4.4	1,541 4.3	1,607 4.3	1,676 4.2	1,748 4.3	1,823 4.3	1,901 4.3
Aged 0 to 14	759 4.2	790 4.2	823 4.1	857 4.1	893 4.2	930 4.2	969 4.1	1,008 4.1	1,049 4.0	1,091 4.0	1,135 4.0	1,180 4.0	1,227 4.0	1,276 4.0
Aged 15 to 24	872 5.3	917 5.2	964 5.1	1,013 5.1	1,065 5.1	1,119 5.0	1,174 5.0	1,231 4.9	1,291 4.8	1,352 4.7	1,415 4.7	1,481 4.7	1,550 4.7	1,621 4.6
Aged 25 to 34	562 1.9	573 2.0	584 2.0	596 2.0	609 2.1	622 2.1	635 2.1	649 2.1	663 2.1	677 2.2	692 2.2	707 2.2	723 2.3	739 2.3
Aged 35 to 44	814 3.3	841 3.3	869 3.3	898 3.4	930 3.5	962 3.5	995 3.4	1,028 3.4	1,063 3.4	1,099 3.4	1,136 3.4	1,175 3.4	1,215 3.4	1,257 3.4
Aged 45 to 54	1,002 3.4	1,036 3.4	1,072 3.4	1,109 3.5	1,148 3.6	1,189 3.5	1,231 3.5	1,273 3.5	1,318 3.5	1,363 3.4	1,410 3.4	1,459 3.5	1,510 3.5	1,563 3.5
Aged 55 to 64	1,595 4.5	1,667 4.5	1,741 4.4	1,818 4.4	1,900 4.5	1,985 4.5	2,072 4.4	2,162 4.3	2,254 4.3	2,350 4.2	2,449 4.2	2,552 4.2	2,660 4.2	2,771 4.2
Aged 65 to 74	2,124 3.2	2,193 3.2	2,264 3.2	2,339 3.3	2,417 3.4	2,499 3.4	2,583 3.4	2,669 3.3	2,758 3.3	2,849 3.3	2,944 3.3	3,043 3.4	3,146 3.4	3,253 3.4
Aged 75 to 84	2,595 3.6	2,688 3.6	2,784 3.6	2,884 3.6	2,991 3.7	3,101 3.7	3,214 3.6	3,330 3.6	3,450 3.6	3,573 3.6	3,700 3.6	3,833 3.6	3,972 3.6	4,116 3.6
Aged 85 and Over	4,125 2.9	4,245 2.9	4,369 2.9	4,499 3.0	4,637 3.1	4,779 3.1	4,925 3.0	5,074 3.0	5,227 3.0	5,384 3.0	5,546 3.0	5,714 3.0	5,891 3.1	6,073 3.1
Aged 65 and Over	2,462 3.5	2,546 3.4	2,632 3.4	2,720 3.4	2,813 3.4	2,903 3.2	2,997 3.2	3,095 3.3	3,196 3.3	3,301 3.3	3,410 3.3	3,524 3.3	3,642 3.3	3,763 3.3

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 17a
Private Per Capita Health Expenditures by Age Cohort (Females)

(current \$)

	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993
Per Capita Health Expenditures	255 14.7	291 14.1	314 7.8	343 9.4	377 9.9	414 9.8	444 7.1	477 7.6	520 8.9	562 8.2	603 7.2	638 5.8	682 6.9
Females	275 13.5	314 14.2	339 8.0	371 9.4	408 10.0	448 9.8	480 7.1	515 7.3	561 8.8	606 8.1	650 7.2	687 5.8	739 7.5
Aged 0 to 14	194 16.9	223 14.9	232 3.9	247 6.4	278 12.6	315 13.2	336 6.8	363 8.1	397 9.4	423 6.5	447 5.7	475 6.4	489 2.8
Aged 15 to 24	132 16.7	154 16.4	164 6.9	179 9.1	196 9.5	214 9.0	244 14.1	281 15.2	328 16.6	370 13.0	413 11.4	459 11.2	484 5.6
Aged 25 to 34	246 14.1	278 13.1	305 9.7	340 11.4	348 2.3	355 2.1	367 3.4	383 4.5	411 7.3	432 4.9	453 5.0	487 7.5	506 4.0
Aged 35 to 44	267 12.0	291 8.9	314 8.0	345 10.1	375 8.5	408 8.8	430 5.3	452 5.1	497 10.0	530 6.6	560 5.7	586 4.6	614 4.8
Aged 45 to 54	285 16.6	327 14.7	361 10.4	405 12.3	448 10.6	489 9.1	523 7.0	560 7.0	603 7.8	642 6.4	667 4.0	685 2.7	734 7.1
Aged 55 to 64	335 14.4	374 11.7	396 5.8	427 7.9	484 13.5	552 13.9	589 6.9	640 8.5	703 10.0	766 8.9	824 7.6	881 6.9	931 5.6
Aged 65 to 74	433 11.2	488 12.6	521 6.8	562 7.9	618 9.9	689 11.6	718 4.1	754 5.0	802 6.4	861 7.4	908 5.5	954 5.0	1,169 22.5
Aged 75 to 84	752 3.1	862 14.6	925 7.3	974 5.3	1,062 9.0	1,183 11.4	1,236 4.4	1,272 2.9	1,328 4.4	1,420 6.9	1,562 10.0	1,620 3.7	1,773 9.4
Aged 85 and Over	2,028 5.5	2,306 13.7	2,455 6.5	2,590 5.5	2,807 8.4	2,876 2.5	3,111 8.2	3,285 5.6	3,368 2.5	3,707 10.0	3,955 6.7	3,915 -1.0	4,039 3.2
Aged 65 and Over	685 7.1	782 14.1	839 7.3	895 6.7	979 9.4	1,068 9.0	1,127 5.5	1,180 4.7	1,239 5.0	1,344 8.4	1,448 7.8	1,494 3.2	1,684 12.7

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 17b
Private Per Capita Health Expenditures by Age Cohort (Females)
(current \$)

	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Per Capita Health Expenditures	706	735	754	794	830	861	896	936	975	1,016	1,061	1,108	1,156
	3.6	4.0	2.6	5.3	4.6	3.7	4.1	4.5	4.1	4.3	4.4	4.4	4.3
Females	766	800	824	868	909	944	983	1,027	1,069	1,114	1,163	1,214	1,266
	3.7	4.4	2.9	5.4	4.8	3.9	4.1	4.5	4.1	4.2	4.4	4.4	4.3
Aged 0 to 14	503	507	504	529	548	564	579	606	631	659	688	719	750
	3.0	0.8	-0.6	4.9	3.7	2.9	2.6	4.7	4.2	4.3	4.5	4.4	4.3
Aged 15 to 24	506	518	522	548	566	578	611	649	685	723	764	807	850
	4.6	2.4	0.8	4.9	3.3	2.1	5.7	6.1	5.5	5.6	5.7	5.5	5.3
Aged 25 to 34	526	530	528	556	582	602	608	621	634	647	662	678	693
	3.9	0.8	-0.5	5.3	4.7	3.5	0.9	2.3	2.0	2.1	2.3	2.3	2.3
Aged 35 to 44	639	658	670	703	729	754	767	795	821	850	880	912	944
	4.0	3.0	1.9	4.9	3.7	3.4	1.7	3.7	3.3	3.4	3.6	3.6	3.5
Aged 45 to 54	774	814	847	890	923	948	976	1,015	1,051	1,090	1,133	1,176	1,221
	5.5	5.1	4.0	5.0	3.8	2.7	3.0	4.0	3.6	3.7	3.9	3.9	3.7
Aged 55 to 64	963	992	1,004	1,049	1,075	1,086	1,147	1,204	1,258	1,316	1,379	1,443	1,508
	3.5	3.0	1.2	4.4	2.4	1.0	5.6	5.0	4.5	4.6	4.8	4.7	4.5
Aged 65 to 74	1,284	1,391	1,489	1,602	1,719	1,835	1,883	1,935	1,983	2,035	2,091	2,149	2,208
	9.9	8.3	7.1	7.6	7.2	6.8	2.6	2.7	2.5	2.6	2.8	2.8	2.7
Aged 75 to 84	1,772	1,907	2,006	2,071	2,177	2,271	2,363	2,434	2,499	2,569	2,647	2,726	2,805
	-0.1	7.6	5.2	3.3	5.1	4.3	4.1	3.0	2.7	2.8	3.0	3.0	2.9
Aged 85 and Over	3,710	3,871	3,924	3,974	4,040	4,047	4,275	4,403	4,517	4,643	4,782	4,924	5,066
	-8.2	4.4	1.4	1.3	1.7	0.2	5.6	3.0	2.6	2.8	3.0	3.0	2.9
Aged 65 and Over	1,717	1,846	1,947	2,045	2,162	2,268	2,373	2,455	2,531	2,612	2,699	2,792	2,886
	1.9	7.5	5.5	5.0	5.7	4.9	4.6	3.5	3.1	3.2	3.3	3.5	3.3

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.

Table 17c
Private Per Capita Health Expenditures by Age Cohort (Females)

(current \$)

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Per Capita Health Expenditures	1,206 4.3	1,258 4.3	1,312 4.3	1,368 4.3	1,427 4.3	1,489 4.3	1,553 4.3	1,618 4.2	1,686 4.2	1,755 4.1	1,827 4.1	1,902 4.1	1,981 4.1	2,062 4.1
Females	1,319 4.2	1,375 4.2	1,432 4.2	1,492 4.2	1,555 4.2	1,621 4.2	1,688 4.1	1,756 4.1	1,827 4.0	1,901 4.0	1,975 3.9	2,054 4.0	2,136 4.0	2,220 4.0
Aged 0 to 14	781 4.2	814 4.2	848 4.2	884 4.2	921 4.3	960 4.2	1,000 4.2	1,041 4.1	1,084 4.1	1,128 4.0	1,173 4.0	1,220 4.0	1,269 4.0	1,320 4.0
Aged 15 to 24	894 5.2	940 5.2	988 5.1	1,038 5.0	1,091 5.1	1,145 5.0	1,202 4.9	1,260 4.8	1,320 4.8	1,382 4.7	1,445 4.6	1,512 4.6	1,582 4.6	1,655 4.6
Aged 25 to 34	709 2.3	725 2.3	742 2.3	759 2.4	778 2.5	797 2.5	817 2.5	837 2.5	858 2.5	879 2.5	901 2.5	924 2.5	948 2.6	972 2.6
Aged 35 to 44	976 3.5	1,010 3.5	1,045 3.5	1,082 3.5	1,121 3.6	1,161 3.6	1,202 3.6	1,245 3.5	1,288 3.5	1,333 3.5	1,380 3.5	1,428 3.5	1,479 3.6	1,531 3.5
Aged 45 to 54	1,266 3.7	1,313 3.7	1,362 3.7	1,413 3.7	1,467 3.8	1,523 3.8	1,580 3.8	1,639 3.7	1,700 3.7	1,763 3.7	1,828 3.7	1,895 3.7	1,966 3.7	2,039 3.7
Aged 55 to 64	1,576 4.5	1,646 4.4	1,718 4.4	1,794 4.4	1,874 4.5	1,956 4.4	2,042 4.4	2,129 4.3	2,220 4.3	2,313 4.2	2,410 4.2	2,510 4.2	2,616 4.2	2,725 4.2
Aged 65 to 74	2,268 2.7	2,330 2.8	2,395 2.8	2,463 2.8	2,534 2.9	2,608 2.9	2,684 2.9	2,763 2.9	2,843 2.9	2,926 2.9	3,012 2.9	3,102 3.0	3,195 3.0	3,292 3.0
Aged 75 to 84	2,887 2.9	2,972 2.9	3,060 3.0	3,151 3.0	3,249 3.1	3,349 3.1	3,453 3.1	3,559 3.1	3,668 3.1	3,780 3.1	3,896 3.1	4,017 3.1	4,144 3.2	4,275 3.2
Aged 85 and Over	5,212 2.9	5,363 2.9	5,519 2.9	5,682 3.0	5,856 3.1	6,035 3.1	6,218 3.0	6,406 3.0	6,599 3.0	6,797 3.0	7,001 3.0	7,213 3.0	7,436 3.1	7,665 3.1
Aged 65 and Over	2,980 3.3	3,072 3.1	3,164 3.0	3,259 3.0	3,356 3.0	3,446 2.7	3,538 2.7	3,633 2.7	3,732 2.7	3,834 2.7	3,938 2.7	4,047 2.7	4,157 2.7	4,271 2.7

For each indicator, the first line is the level and the second line is the annual percentage change (unless indicated otherwise). Grey areas indicate forecasts.

Sources: The Conference Board of Canada; Health Canada; Canadian Institute for Health Information.



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