

## Fields and subfields of Health Economics for 2025 Congress

Primary fields	Sub-fields
1. Health, its valuation, distribution and economic consequences	1.1 Valuation of health (including human capital, labor market outcomes, wellbeing) 1.2 Values (preferences, market values) 1.3 Health outcome measurement 1.4 Non-health outcome measurement (including capability, wellbeing) 1.5 Equity in health outcomes 1.6 The economic burden of disease
2. Health beyond the health system	2.1 Social determinants of health (e.g. gender, education, income, wealth, employment, relative deprivation, financial crises, cultural shocks) 2.2 Environmental determinants of health (e.g. pollution, natural disasters) 2.3 Family economics and social interaction 2.4 Risky health behaviors (alcohol, tobacco, illegal drugs, opioids, risky sexual behaviors, poor nutrition, etc.) 2.5 Health enhancing behaviors (exercise, sleep, stress management, etc.) 2.6 Interventions and policies targeting health behaviors 2.7 Other non-medical health promotion interventions and policies
3. Demand & utilization of health services	3.1 Demand for health insurance, including for long-term care 3.2 Demand for health & health care, including for specific services 3.3 Influences on utilization (including gender, insurance coverage, out-of-pocket payments) 3.4 Barriers to access (including informational, financial, gender issues, behaviour biases, preferences)
4. Supply and regulation of health services and products	4.1 Health care labor markets (including education, agency relationships) 4.2 Care setting (including community-based and other primary care, hospitals, long-term care, integrated care, mental health services, hospice, dental services) 4.3 Public/population health services 4.4 Pharmaceutical products and medical devices 4.5 Digital health (ehealth / mhealth / telehealth) 4.6 Genomics and precision medicine 4.7 Efficient provision of health services 4.8 Competition and market failure in health care supply

	<p>4.9 Service delivery organization (including private for-profit, not-for-profit, public, mixed, vertical integration)</p> <p>4.10 Regulation</p> <p>4.11 Quality of care</p> <p>4.12 Rationing (including waiting lists) and priority setting</p>
5. Health care financing & expenditures	<p>5.1 Voluntary health insurance, including competition, moral hazard, selection effects, risk variation and regulation</p> <p>5.2 Mandatory health insurance, including risk-equalization and pool integration</p> <p>5.3 Fiscal space for government funding of health care</p> <p>5.4 Financing for Universal Health Coverage, including financial risk protection and reducing pool fragmentation</p> <p>5.5 Strategic purchasing, including benefits design, contracting, provider payment mechanisms (including pay-for performance), drug pricing</p> <p>5.6 National health accounts and health care spending trends</p>
6. Economic evaluation of health and related care interventions	<p>6.1 Cost effectiveness analysis</p> <p>6.2 Cost benefit analysis</p> <p>6.3 Resource use and costing</p> <p>6.4 Equity in economic evaluation</p>
7. Evaluation of policy, programs and health system performance	<p>7.1 Efficiency at the health system level</p> <p>7.2 Equity in financing, access, and quality of care</p> <p>7.3 Distributional aspects of health policy and programs (socio-economic, gender, geographic, etc.)</p> <p>7.4 Impact assessment of system wide policy change or large programs</p>