



6. ACCESSIBILITY OF CARE

6.1. Health insurance status of the population (A-1)

6.1.1. Documentation sheet

Description	Health insurance status of the population (% of population)
Calculation	Number of insured persons divided by Belgian population affiliated with a sickness fund, end-of-year situation (= insured / insured and uninsured people affiliated with a sickness fund, mid-year situation)
Rationale	Belgium has a compulsory public health insurance system, in principle covering the entire population (employees, self-employed, civil servants, unemployed, pensioners, minimum income recipients, disabled, students, foreign nationals, as well as all of their dependents) and a wide range of services. The services that are covered by compulsory health insurance are described in the nationally established fee schedule. Services not included in the fee schedule are not reimbursable. The percentage of insured persons is an indicator of accessibility of health care.
Data source	Number of insured individuals: RIZIV – INAMI (web application: https://applstst2.riziv.fgov.be/analytics/FR/Portal/mainUnchallenged.do?unchallenged=yes)
Technical definitions and limitations	An uninsured person is defined as someone who is not entitled to compulsory health insurance. The main reason is that administrative and/or financial requirements are not fulfilled. This does not mean that “uninsured people” have no right to necessary medical care. They can be covered by the public municipal welfare centres (OCMW – CPAS). People covered by another system (e.g. foreign people working at the European commission) are not considered (not affiliated to a sickness fund).
International comparability	International comparability is possible. For the international comparison, the indicator “Government/social health insurance coverage (% of total population)” was used (OECD data). It should nevertheless be noted that health insurance coverage is a partial indicator of accessibility, since the range of services covered and the degree of cost sharing applied to those services can vary across countries.
Dimension	Accessibility of care
Related indicators	performance Out-of-pocket payments



6.1.2. Results

Based on data provided by the National Institute for Health and Disability Insurance (RIZIV – INAMI), almost the whole population (99%) is covered for a core set of services. The percentage of uninsured persons was stable between 2009 and 2017 at about 1% (see Table 34).

Table 34 – Percentage of the population covered by public health insurance by year (2009-2017)

Variable	Category	Number of insured persons (mid-year) (N)	Number of persons affiliated to a sickness fund (mid-year) (A)	Rate N/A
Year	2009	10 546 590	10 650 480	99.0%
	2010	10 632 028	10 735 039	99.0%
	2011	10 715 356	10 823 976	99.0%
	2012	10 785 206	10 904 425	98.9%
	2013	10 851 160	10 969 707	98.9%
	2014	10 906 348	11 028 464	98.9%
	2015	10 954 981	11 073 971	98.9%
	2016	11 009 531	11 131 460	98.9%
	2017	11 069 759	11 184 208	99.0%

Analysis by demographic characteristics and by region and province

However, there are some differences in coverage rates (2017) between regions, men and women and between age categories (see). Men are slightly less covered than women (98.7% vs 99.3%). The percentage of uninsured persons is higher in Brussels (1.9%) than in Flanders (0.5%) or Wallonia (0.7%). Possible explanations for the lower coverage rates of persons aged 25-40 are related to the family and work situation. At the age of 25 or when people start working, they are no longer insured as a dependent person of their parents but become insured in their own name. Moreover, when two individuals who are affiliated with a different sickness fund start living together, they often choose one of the sickness funds. These changes present some paperwork to be done or contributions to be paid.

International comparison

According to the OECD Health Statistics 2018, all EU-15 countries had government/social health insurance coverage rates between 99 and 100% in 2015, except for 3 countries: Greece (86%), Germany (89.2%) and Luxembourg (95.2%). However, some differences in methodologies between countries are not to exclude (e.g. it is possible that countries with a 100% coverage rate do not report persons who do not fulfill administrative and/or financial requirements).

Greece has the lowest population coverage in EU-15 (below 90%). This could be explained by the effect of the economic crisis (they reduced health insurance coverage among the long-term unemployed and self-employed workers¹). European measures have been taken to maintain accessibility of care and since 2014, under certain conditions, uninsured people are



covered for prescribed pharmaceuticals, emergency services in public hospitals, and for non-emergency hospital care.² In Germany, all residents are legally required since January 2009 to have health insurance but those

earning above a threshold may choose to remain with social health insurance or take out private health insurance.³

Table 35 – Percentage of the population covered by public health insurance, by year and patient characteristics (2017)

Variable	Category	Number of insured persons (mid-year) (N)	Number of persons affiliated to a sickness fund (mid-year) (A)	Rate N/A
Age (years)	00-04	608 009	611 668	99.4%
	05-09	652 494	656 858	99.3%
	10-14	619 967	623 186	99.5%
	15-19	613 536	616 495	99.5%
	20-24	644 922	654 574	98.5%
	25-29	703 948	722 391	97.4%
	30-34	698 342	716 449	97.5%
	35-39	718 420	733 373	98.0%
	40-44	702 626	714 780	98.3%
	45-49	756 699	766 906	98.7%
	50-54	790 433	797 970	99.1%
	55-59	760 821	765 507	99.4%
	60-64	682 991	685 447	99.6%
	65-69	608 680	609 691	99.8%
	70-74	497 476	497 820	99.9%
	75-79	375 405	375 641	99.9%
80+	634 990	635 452	99.9%	
Gender	Female	5 643 133	5 684 516	99.3%
	Male	5 426 626	5 499 692	98.7%
Province	Antwerp	1 793 836	1 803 111	99.5%
	Flemish Brabant	1 098 310	1 103 694	99.5%
	Walloon Brabant	386 024	388 397	99.4%
	West Flanders	1 172 141	1 176 462	99.6%
	East Flanders	1 479 541	1 485 894	99.6%
	Hainaut	1 296 499	1 306 009	99.3%
	Liège	1 061 303	1 068 156	99.4%
	Limburg	832 513	838 501	99.3%
	Luxembourg	218 306	219 740	99.3%
Namur	482 859	485 937	99.4%	



	Brussels-Capital	1 069 456	1 089 980	98.1%
	Abroad	168 946	203 201	83.1%
	Unknown	10 025	15 126	66.3%
Region	Brussels	1 069 456	1 089 980	98.1%
	Flanders	6 376 341	6 407 662	99.5%
	Wallonia	3 444 991	3 468 239	99.3%
	Abroad	168 946	203 201	83.1%
	Unknown	10 025	15 126	66.3%

Source: RIZIV – INAMI

Key points

- **The percentage of uninsured persons (affiliated with a sickness fund) in Belgium is about 1% but in Brussels and for age categories 25-40 years this percentage amounts to more than 2%.**
- **All EU-15 countries have a government/social health insurance coverage rate between 99 and 100% (except for Greece (86%), Germany (89.2%) and Luxembourg (95.2%)).**

References

1. OECD. Health at a Glance 2017: OECD Indicators. Paris: 2017. Available from: http://dx.doi.org/10.1787/health_glance-2017-en
2. Eurofound. Access to healthcare in times of crisis. Luxembourg: 2014.
3. Busse R, Blümel M. Germany: Health System Review. 2014. Health Systems in Transition Vol 16 N°2 Available from: http://www.euro.who.int/_data/assets/pdf_file/0008/255932/HiT-Germany.pdf?ua=1