

The Uninsured Across the OECD Countries and U.S. States

By Jennifer Gilbert

1) What are the uninsurance rates for major, wealthy countries (e.g., in the OECD)?

A clean table with this data from 2008 is available in [OECD Health Working Paper 50](#). Mexico's percent uninsured has drastically dropped since then, as has Turkey's. Despite the data in this chart, the economic crisis in Europe has likely led to more uninsured in some of these countries since the end of 2008. [This article describes](#) the thousands of uninsured in Greece who lost health care with their jobs in 2013. Also, [a book by the OECD in 2014](#) states that Bulgaria, Greece, and Cypress are the exceptions to the near-universal health coverage in the EU countries, though it doesn't go into the details of why.

**Table 1. Characteristics of basic primary health coverage (end 2008) (Q1)
(% of population)**

Country	Automatic coverage	Compulsory coverage	Voluntary coverage	Other	Not insured
Australia	100	0	0	0	0
Austria	0	98.7	0	0	1.3
Belgium	0	99	0	0	1
Canada	100	0	0	0	0
Czech Republic	0	100	0	0	0
Denmark	100	0	0	0	0
Finland	100	0	0	0	0
France	2.5	97.5	0	0	0
Germany	0.5	83.3	15.2	1	0
Greece	0	100	0	0	0
Hungary	0	100	0	0	0
Iceland	100	0	0	0	0
Ireland	100	0	0	0	0
Italy	100	0	0	0	0
Japan	0	98.8	0	1.2 ^(a)	0
Korea	0	100	0	0	0
Luxembourg	0	96.8	1.1	0	2.1
Mexico	0	59	22.5	1	17.5
Netherlands	0	100	0	0	0
New Zealand	100	0	0	0	0
Norway	100	0	0	0	0
Poland	0	99	0	0	1
Portugal	100	0	0	0	0
Slovak Republic	55.7	44.3	0	0	0
Spain	100	0	0	0	0
Sweden	100	0	0	0	0
Switzerland	0	100	0	0	0
Turkey	0 ⁽ⁱ⁾	58.6 ⁽ⁱ⁾	8.6 ⁽ⁱ⁾	0 ⁽ⁱ⁾	32.8 ⁽ⁱ⁾
United Kingdom	100	0	0	0	0

Note: (a) Public Assistance; (i) Secretariat's estimates.

Source: OECD Survey on health system characteristics 2008-2009 and OECD (2008), Review of Health Systems Turkey; OECD (2009), "Improving the performance of the public health care system" in OECD Economic Surveys: Greece.

[Page 139 of this OECD 2013 report](#) gives bar graphs on Health insurance coverage for a core set of services in 2011. [From OECD](#), "All OECD countries have universal (or quasi-universal) health coverage for a core set of health services and goods, except Mexico and the United States. Following the 2004 reforms in Mexico, the proportion of the population

covered has grown rapidly to reach nearly 90%. In the United States, where 15% of the population was still uninsured in 2011, the Affordable Care Act will further expand health insurance coverage, from January 2014."

At the beginning of 2015, [a Gallup poll](#) found the rate of insured adults in the US had dropped to 12.9%— down from 17.1% in 2013.

2) For each country, who are the few percent who don't have coverage?

[The Commonwealth Fund's Biennial Health Insurance Survey](#) has a lot of data on the amount of insured, their reasons for being uninsured and the care they did not access due to cost since 2001.

[According to ASPE from the US DHHS](#), the main reason Americans give for being uninsured or avoiding care is cost. In 2012, 32% of uninsured adults said they did not get medical care or delayed it because of cost, compared to 27% on public insurance. Compared to people in other countries, Americans with below-average incomes were less likely to visit a doctor if they were sick, get a recommended test, treatment, or follow-up, fill out a prescription, or see a dentist.

[AFL-CIO](#) has reported that of the 48 million Americans who were uninsured in 2012, 63% were either working full-time or in a family where at least one other member was working full-time. They also note that minorities and children had disproportionately higher odds of being uninsured. In 2012, 11.1% of Caucasians, 15.1% of Asians, 19% of Blacks, and 29.1% of Hispanics were uninsured. [According to the Kaiser Family Foundation](#), around 80% of the uninsured are US citizens.

[The European Foundation for the Improvement of Living and Working Conditions](#) has a great report on all of these themes, and found that in Greece and Slovenia, people with debts to public authorities or health insurers have been left without insurance coverage, and about half of the patients at a clinic in Athens for the uninsured were self-employed who lost insurance from tax or debts to public authorities or health insurers. The uninsured population has grown in Bulgaria due to rising unemployment and less income for those who do not qualify for public insurance (including the unemployed). Many of these uninsured are also Roma. The same trends follow in Slovenia—people in countries such as Slovenia can lose insurance due to debt to public authorities or health insurers. In Luxemburg, health insurance is transferred from an employer to the government automatically when one loses employment, but gains public health coverage. That coverage requires a long process and initial premium payments, and is only available to residents, so illegal immigrants and people who aren't aware of how to navigate the process are at higher risk of losing coverage. The report shows that Roma are also much more likely to be uninsured in Romania, although a large effect of this is thought to come from socioeconomic status.

Major characteristics of the American uninsured population are [also listed on page two of this Johnson & Johnson report](#) in chart images. [Also, from a report on the uninsured in Europe \(by the Commonwealth Fund\)](#), "An estimated 6.7 million—or 57 percent—of the 11.8 million undocumented migrants in the United States lacked health insurance in 2007, accounting for 14.6 percent of the nation's 46 million uninsured."

As for other countries, undocumented migrants seem to make up a major percentage. From [the same report by the Commonwealth Fund on European uninsured populations](#), "Recent European studies show that policies in most countries provide for no more than emergency services for undocumented migrants. Smaller numbers of countries provide more services or allow undocumented migrants who meet certain requirements access to the same range of services as nationals."

For Germany in particular, [the WHO reports](#) that 0.2% of the residents had no prepaid coverage, and the uninsured are mainly self-employed (both rich and poor) or people who previously failed to pay contributions to the statutory insurance or premiums to the private health insurance.

In 2007, 1-2% of the Polish population was uninsured. [A WHO report](#) describes how they are typically Poles experiencing extreme poverty. There is some safety-net coverage for them, but they must apply for it. Other commonly uninsured Poles [described by the UNHCR](#) include people with drug and alcohol addictions and those with communicable and mental

illnesses. The report also noted that ethnically Roma adults were 7% less likely to be insured than non-Roma adults. According to a representative from the Helsinki Foundation for Human Rights (HFHR), a human rights protection NGO, Roma were less likely to receive health insurance because they were more likely to have prolonged unemployment, which disqualified them from the “official status of an unemployed person” required to access public insurance. However, this view was not confirmed by other sources.

[An Austrian case study](#) states that approximately 2% of the Austrian population is uninsured, and the majority of these people have “precarious” employment, psychiatric illnesses, or are unemployed (a group which is disproportionately female). Migrants without legal status are also uninsured in Austria.

[MSF](#) reports that only a few cantons (states) in Switzerland require insurer to cover illegal migrants, so the vast majority of Swiss migrants who are not in the country legally are uninsured.

[The CBO](#) expects that 26-27 million people will be left uninsured under the ACA during the next decade. [According to a 2013 piece in Health Affairs by Rachel Nardin and David Himmelstein](#), 30 million Americans won’t have coverage under the ACA, 80% of whom are US citizens. The US citizens who do not get coverage will be the ones whose states do not decide to expand Medicaid or delay a decision. Most uninsured Americans will be from ages 18-44. [The Washington Post](#) did an article featuring the work of Nardin and Himmelstein on this topic as well.

State-by-state data on proportion uninsured via [statehealthfacts.org](#) is in the table below. The site also says uninsured immigrants make up about 13% of the uninsured here. 21% of the uninsured have incomes above the limit for premium tax subsidies or have an affordable offer through their employer and are thus ineligible for financial assistance.

Table 1: Eligibility for Coverage Under the ACA Among those Uninsured Prior to 2014

	Total Uninsured	Medicaid-Eligible Adult	Medicaid/CHIP Eligible Child	Tax credit eligible	In the Coverage Gap	Ineligible for Financial Assistance
United States Total	47,601,000	18%	11%	27%	10%	34%
Implementing the Medicaid Expansion in 2014 (27 states, including DC)						
Arizona	1,140,000	30%	11%	22%	-	37%
Arkansas	510,000	46%	9%	22%	-	23%
California	6,993,000	32%	11%	20%	-	38%
Colorado	737,000	34%	12%	22%	-	33%
Connecticut	286,000	28%	10%	25%	-	38%
Delaware	92,000	28%	13%	22%	-	37%
District of Columbia	50,000	48%	6%	10%	-	36%
Hawaii	102,000	46%	11%	18%	-	25%
Illinois	1,772,000	36%	10%	21%	-	34%
Iowa	301,000	38%	10%	24%	-	29%
Kentucky	647,000	45%	9%	22%	-	23%
Maryland	756,000	26%	13%	20%	-	40%
Massachusetts	242,000	25%	12%	20%	-	43%
Michigan	1,111,000	38%	7%	26%	-	29%

Minnesota	462,000		41%	16%	11%	-	33%
Nevada	621,000		33%	16%	20%	-	31%
New Hampshire	158,000		45%	9%	22%	-	23%
New Jersey	1,251,000		27%	10%	26%	-	37%
New Mexico	422,000		36%	12%	23%	-	29%
New York	2,221,000		32%	11%	24%	-	33%
North Dakota	70,000		33%	7%	31%	-	30%
Ohio	1,460,000		40%	10%	26%	-	23%
Oregon	559,000		38%	8%	23%	-	30%
Rhode Island	126,000		35%	7%	24%	-	33%
Vermont	47,000		28%	9%	36%	-	28%
Washington	948,000		37%	10%	23%	-	30%
West Virginia	267,000		42%	11%	23%	-	23%
Total (Expansion States)	23,351,000		34%	11%	22%	-	33%

Not Moving Forward with the Medicaid Expansion at this Time (24 states)

Alabama	660,000		4%	12%	30%	29%	25%
Alaska	129,000		10%	12%	36%	13%	29%
Florida	3,867,000		2%	9%	33%	20%	36%
Georgia	1,849,000		4%	13%	28%	22%	33%
Idaho	258,000		2%	12%	34%	21%	31%
Indiana	801,000		3%	14%	35%	23%	25%
Kansas	369,000		4%	11%	30%	21%	33%
Louisiana	866,000		4%	11%	34%	28%	22%
Maine	130,000		3%	5%	45%	18%	28%
Mississippi	454,000		4%	12%	34%	30%	19%
Missouri	834,000		4%	18%	33%	23%	23%
Montana	178,000		4%	12%	38%	22%	24%
Nebraska	234,000		3%	13%	32%	14%	38%
North Carolina	1,593,000		2%	8%	32%	20%	37%
Oklahoma	632,000		3%	8%	33%	23%	33%
Pennsylvania	1,426,000		3%	13%	34%	20%	31%
South Carolina	765,000		4%	13%	32%	25%	25%
South Dakota	110,000		5%	11%	36%	23%	26%
Tennessee	850,000		9%	9%	34%	19%	29%

Texas	6,167,000		2%	12%	28%	17%	40%
Utah	407,000		2%	13%	31%	14%	39%
Virginia	1,021,000		3%	7%	34%	19%	37%
Wisconsin	566,000		25%	11%	34%	-	30%
Wyoming	93,000		2%	8%	38%	18%	33%
Total (Non-Expansion States)	24,250,000		4%	11%	32%	20%	34%

Notes: Those ineligible for financial assistance include people with an offer of ESI, individuals eligible to purchase unsubsidized Marketplace coverage, and individuals ineligible for coverage due to documentation status. “-” In states expanding their Medicaid programs, there is no coverage gap population.

Source: Kaiser Family Foundation analysis based on 2014 Medicaid eligibility levels and 2012-13 Current Population Survey.