





Department of Statistics

Health Insurance in Jordan

Analytical paper prepared according to the results of General Population and Housing Census 2015

Introduction

In view of the importance of comprehensive health insurance for the Jordanian citizens, also in view of the concern of successive governments to expand the umbrella and coverage of all citizens with health insurance, in order to ensure the health of individuals and access to full health care and improve obtaining and accessing health services throughout the Kingdom and various groups of society, hence this research prepared based on the results of the General Population and Housing Census 2015. The main objective of this study is to provide a clear picture of the health insurance situation in Jordan in terms of coverage rates, types of health insurance for insured individuals besides knowing some features related to insured and non-insured, as well as to identify the most important sources of duplication in health insurance.

This research was prepared in cooperation with the Higher Health Council, hence we would like to thank the participants for their efforts and contribution to the success of this national effort beside their role in highlighting the main policies related to the health insurance umbrella in Jordan, which serves decision and policy makers, researchers and data users.

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Executive summary

Health sector attention is a priority for development services and human capacity building in Jordan. For this purpose, part of the Population and Housing Census was allocated in 2015 as a direct question about the state of health insurance in terms of inclusiveness in the health insurance umbrella and the type of health insurance obtained by individuals .The results were as follows:

- Approximately 56% of the Kingdom population is covered by health insurance (53% for males versus 58.2% for females), while about 44% are not covered by health insurance.
- •About 69% of the Jordanian is health insured (about 70% for females versus 68% for males)
- 86.6% of the Jordanian population in rural areas is health insured compared to 66.3% of the Jordanian population in urban areas.
- The majority of Ajloun and Tafileh governorates inhabitants are health insured, with a percentage of about 86%, followed by the governorates of Ma'an and Jerash by about 80%.
- All children under 6 are health insured by the Ministry of Health (Civil Health Insurance).
- About a quarter of the non-Jordanian population was health insured by 25.3%, representing about 14% of the total number of insured.
- The vast majority of health insured population (98.8) has one source of health insurance.
- The government sector covered 71% of the health insurance burden and the private sector contributed 14%. UNRWA and other sectors contributed 4.2% and 10% respectively.
- Ministry of Health Insurance is the most prevalent insurance among members of the Jordanian society by about 42%.
- The vast majority of Ajloun Governorate population is health insured by the Royal Medical Services by about 70%.
- About 38% of the non-Jordanian population is health insured under special arrangements for Syrian refugees in terms of their health insurance under special arrangements between the UNHCR and the Ministry of the Interior.
- Approximately 1.3% of Jordanians have more than one health insurer.
- 90% of the health insured in more than one aspect was health insured by at least one government agency.

- By age group, the lowest rate of health insurance was in the age group (15-34), which was about 60%.
- The data indicate that the percentage of health insured workers- belonging to families headed by an individual working in temporary or seasonal work compared to family members with permanent employers -has fallen to about one-third for the first against second category.
- Individuals with a bachelor's degree or higher who are 13 years of age or older are among the most covered by health insurance, with a coverage rate of 72% to 86%.
- Two-thirds of married people are currently covered by health insurance, a rate of about 66%.

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Chapter One: Introduction

1.1 Background

Health insurance is a basic requirement in all societies. It must include all segments of society to facilitate access to appropriate and timely health care to protect them from high or unexpected health care costs when the disease occurs. Health care is a priority for development services and human capacity building in Jordan. It is worth noting that the Royal Initiative in the field of health provides free health care to those who cannot afford it, especially the poor. It has already been translated through the inclusion of all children under the age of six in the free comprehensive health insurance and the elderly with free insurance optional for a nominal amount. Successive governments have sought to expand health insurance coverage to include all Jordanians.

The governmental health sector suffers from some problems, the most important of which is the growing demand for health services and the increasing cost of health services and forced migration to Jordan, which reached 1305350 refugees living in Jordan, including those who came to the Kingdom after 2011 as a result of the armed conflict in Syria and some other countries, as the results of the General Population and Housing Census 2015.

According to the Ministry of Health, persons who do not have any health insurance and carry a national number may receive an optional health insurance in return for payment of fees paid according to the following age groups:

- 6 years less than 19 years compared to 50 dinars annually.
- 19 years less than 45 years 75 dinars per year.
- 45 years _ less than 60 years 115 dinars per year.

As for the age group 60 years or more, the value of the contribution is 150 dinars annually, where the country bears the value of 78 dinars, while the individual pays the remaining part of 72 dinars, so they can benefit from health services in hospitals and government centers of the Ministry of Health, If there is no service, specialization or diagnosis in hospitals or medical centers the case transfer into Royal Medical Services.

The Ministry of Health provides health services through 675 health centers throughout the Kingdom, as well as 31 hospitals with a capacity of 5105 beds, representing about 38.3% of the total hospital beds in the Kingdom. It is worth to mention that the Royal Medical Services has (2269) beds constitute about (18.2%) of the total hospital beds in the Kingdom.

2.1 Importance of research:

The importance of this research is that it provides accurate, up-to-date and detailed information about health insured and non-insured, whether from Jordanian citizens or non-Jordanians residing in the Kingdom for any reason.

This research also helps to highlight the potential gaps for the most needy and non-covered categories, as well as in linking the demographic, economic and social characteristics.

This research will therefore help policymakers and decision-makers to include non-insured and reform the health insurance system in Jordan to become more equitable and inclusive to provide greater social protection and exposure to financial risks when the disease occurs.

3.1 Research Objectives:

The main objective of this research is to provide comprehensive, accurate and up-to-date statistical information on the status of health insurance in Jordan in terms of its umbrella, gaps and characteristics related to health insurance in terms of coverage and non-coverage through the formulation of national policies in this area. The objectives of this paper can be summarized as follows:

- Coverage of health insurance for Jordanians and non-Jordanians.
- Rates of duplication between different insurance companies.
- Identify the demographic, social and economic characteristics of health insured and non-insured in Jordan.

4.1 Research Methodology:

This study will follow the descriptive analytical approach and make comparisons between different population groups, including geographical distribution by governorates, by analyzing the data provided by the General Population and Housing Census 2015 on health insurance. In addition, special tables have been prepared to reflect the various issues related to health insurance, both at the individual and household level or the geographical and administrative distributions to highlight the disparities in different social groups.

5.1 Definitions:

- Health Insurance:

There are several definitions of health insurance, the most prominent of which are:

Health insurance is an agreement between two parties in which the first party incurs the expenses incurred for the treatment services provided to the second party (individual or group) for a specified amount, paid in lump sum or in installments.

Health insurance is primarily based on the distribution concept of the expected risk that the individual may face, thus reducing the burden and costs involved in treating the insured cases. This is a social system based on cooperation and interdependence among individuals to bear what one person cannot afford and Insurance companies regulate the use of risk distribution for a known fee.

Health insurance is also defined as the system that deals with the risks of individual health conditions, against loss of disease, by compensating for the medical costs resembled by costs of examination, diagnosis and treatment beside compensation instead of the interruption of work for a period of time or permanent disability, thus reducing the burden and the costs involved in addressing the pathological conditions experienced by insured individuals.

- Medical Exemptions:

Any Jordanian who holds a national number and health non-insured can obtain a medical exemption for short periods of time. This exemption is not considered a health insurance from the health non-insured Patients Unit of the Royal Court, which covers the expenses of his treatment in all the medical sectors operating in the Kingdom.

- Special Arrangements:

Insurance according to special arrangements: There is a special case for health insurance, which is called special arrangements. It includes all those who hold Syrian nationality and the reason for their coming to Jordan is the armed conflict in their country. In this case they are treated by the UNHCR to pay the treatment costs to those who have done these processes in accordance with special arrangements with the Ministry of the Interior.

- Duplication of Health Insurance

Generally the citizen holds two or more health insurance at the same time or more in both private and public sectors. This is a problem that in itself has great effects on the health insurance fund in terms of the amount of medicine consumed and the medical staff working. The Ministry of Health has worked to end this problem through Comprehensive health insurance.

6.1 Data Sources

The Department of Statistics continuously seeks to provide accurate information to decision and policy makers, researchers, scholars and development partners in the public and private sectors, civil society and in various fields.

It should also be noted that health insurance issues that the General Department of Statistics has covered in all previous censuses in order to ensure the importance of health insurance in the development and building of human capacities.

The Census of Population and Housing 2015 questionnaire included the subject of health insurance to provide comprehensive and detailed statistical data on health insurance. The census is comprehensive for all households in the Kingdom, which gives the opportunity to provide data on all members of these families. This paper contains some detailed tables of results related to this subject, which include data on the prevalence of health insurance umbrella, hoping that the information contained in this paper will benefit all interested in this sector.

The Census of Population and Housing 2015 questionnaire included direct question of individuals whether the individual has health insurance and the name of agency who is providing insurance, hence it is possible to disclose whether the individual has more than one source of health insurance so that we can, based on this question extract number and percentages of health insured and linking these percentages with general characteristics of individuals and the extraction of indicators that help in the formulation of policies for health insurance.

The types of health insurance were detailed as follows:

- -Ministry of Health.
- -Royal Medical Services.
- University Hospitals.
- -UNRWA.
- Special Arrangements.
- -Private Sector.
- -Outside Jordan.

The classification was done by special symbols that allow highlighting the multiplicity of health insurance sources by source in order to highlight the population with more than one source and their characteristics.

7.1 Research Organization

This analytical paper contains four chapters, the first chapter contained introduction, which included general background on health insurance in Jordan, the importance of this paper and its objectives, the methodology used in the analysis beside the main terms of this paper were also clarified and the data sources used in this analysis.

The second chapter included the definition of health insurance elements and problems related to it in addition to the detailed talk about coverage of health insurance for all residents, Jordanians and non-Jordanians and arrangements for the coverage of all children under six years health insurance and aspects who have borne the burden of health insurance in Jordan and highlighted individuals not covered by health insurance.

The third chapter includes the definition of health insurance duplication and the percentage of individuals who have more than one health insurance and the health insurance agencies.

The fourth chapter also deals with some of the characteristics associated with health insurance for individuals who are insured and non-insured, such as age, the working condition of the household head, gender, educational status and marriage.

Chapter 2: Coverage of health insurance

1.2 Elements and policies of health insurance in Jordan

The first party is the insurance institution, which may be government such as the Ministry of Health, Royal Medical Services, university hospitals or private health insurance companies such as the profitability or international such as the United Nations Relief and Works Agency for Palestine Refugees in the Near East (UNRWA).

The second party is the beneficiary; the individual may be in person when he participates in insurance, or with his family. The contract may be in a larger company or institution and public sector employees are required to participate in health insurance on a mandatory basis in the health insurance regulations and indicate the amount and basis of the insurance deductible, which may be fixed monthly, Medical procedure when it occurs, including diseases covered by treatment and covered procedures.

A health care provider may be governmental institutions of the government as centers and hospitals of the Ministry of Health. Private health institutions may be private hospitals. This depends on the contract signed between the parties.

Sources of financing health insurance

- The insured individual, where the monthly salary is deducted as a premium, in addition to what is paid as some fees and contributions when receiving the service (Co-Payments).
- The government, as it covers the costs of insurance, usually from tax funds, may also fully cover the costs of individuals who do not have to pay their personal allowance of health insurance as poor people.
- Private institutions, as they may pay part of the health insurance costs of their employees, while they pay the remaining.

- International organizations, for example, the United Nations Relief and Works Agency (UNRWA) pays for the treatment of Palestinian refugees.
- -Grants that may be from individuals or institutions, and may be cash or kind.

2.2 Problems related to health insurance

Health insurance in Jordan suffers from a number of problems and difficulties, the most prominent are summarized as follows:

- coverage Lack of health insurance for all community members leads to the exposure of this excluded category of health insurance to the risk of destitution and illness because of the cost of treatment and increases the risk of developing the disease because of its inability to pay for treatment, which may deprive them of treatment and may lead to the aggravation of the disease and this may lead to death.
- Increasing the burden on public or private health insurance funds due to high costs of treatment and insufficient funding.
- Increase financial pressure on individuals as a result of increased financial deductions from their income for health insurance.
- Lack of transparency can lead to poor distribution and management of health insurance resources. This may be linked to corruption, exacerbated by the lack of effective control systems, mechanisms of legal accountability and the lack of appropriate legislation.
- Misuse of health insurance by insured individuals, such as counterfeiting bills, treatments or treating an uninsured person on a health insurance card, thus placing an additional burden on the insurance fund. Preventing this requires a proper control and audit system.
- Armed conflicts in neighboring areas lead to influx of refugees, increasing the pressure on health resources in Jordan, and the spread of diseases and epidemics due to lack of hygiene standards in refugee communities and camps leads to increased cash pressure and lack of resources to deal with the situation.
- The continuous increase in the size and proportion of older persons and the increasing incidence of chronic diseases associated with this age group in society as a result of the high age of people and the consequent increase in the cost of care for elderly people and diseases such as diabetes, respiratory and cardiovascular diseases. This also increases the pressure on health insurance due high care costs of such diseases.

3.2 Coverage and Inclusiveness of Health Insurance

Health insurance Coverage for the entire population

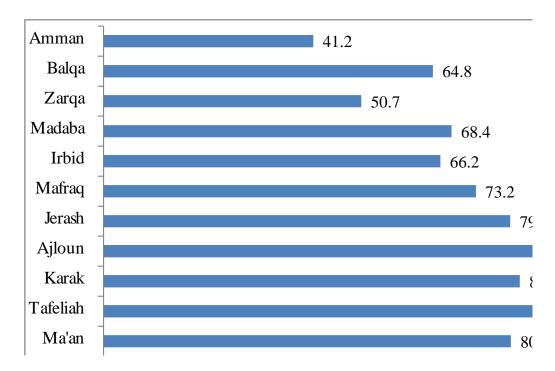
The results in Table 1 show that about 56% of the population of the Kingdom is covered by health insurance, while this percentage is close to two thirds among Jordanians (about 69%). These percentages vary between the governorates at the total level and the Jordanians. On the total and Jordanian level, the governorates of Tafileh, Ajloun, Karak and Ma'an recorded the highest ratios (80%), while the lowest percentages were Amman and Zarqa by (41%) and (51%) Respectively.

At the level of Jordanians, there are six governorates where the percentage of health insured increased from (80%), as follows: Ajloun, Tafileh, Karak, Jarash, Ma'an and Mafraq governorates. The percentage ranged between (84% -92%). This contributed to the reason that most of them their source of insurance at medical services or the Ministry of Health, as the vast majority of those covered by health insurance are under the umbrella of public sector insurance, including the Jordanian armed forces, while the lowest rates recorded at Amman and Zarqa governorates.

Table 1: Percentage of population with health insurance by governorate, 2015

Governorate	Jordanian	Total
Amman	55.2	41.2
Balqa	76.2	64.8
Zarqa	60.6	50.7
Madaba	78.4	68.4
Irbid	80.0	66.2
Mafraq	84.3	73.2
Jarash	86.9	79.9
Ajloun	91.9	85.7
Karak	90.0	81.8
Tafielah	90.6	86.1
Ma'an	86.2	80.1
Aqaba	77.5	62.9
Total	68.7	55.5



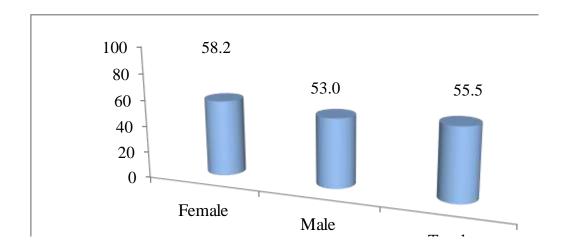


The percentage of health insurance coverage varies between males and females in the Kingdom and governorates, where the results indicated that the coverage rate for females is higher than that of males in the Kingdom and in all governorates. The difference was clearer in Aqaba Governorate (11%), Balqa (9%) and Karak (8%). In contrast, the gap was narrower in Jerash and Mafraq governorates (3%). (table 2 figure 2).

Table 2: Percentage of total population with health insurance by sex and governorate, 2015

Governorate	Males	Females
Amman	39.0	43.8
Balqa	60.5	69.6
Zarqa	48.8	52.8
Madaba	65.2	72.0
Irbid	64.5	68.1
Mafraq	71.7	74.8
Jarash	78.5	81.5
Ajloun	83.6	87.9
Karak	78.1	85.9
Tafeilah	82.8	89.7
Ma'an	77.1	83.3
Aqaba	58.0	69.1
Total	53.0	58.2

Figure 2: Percentage of all health insured population by sex, 2015.



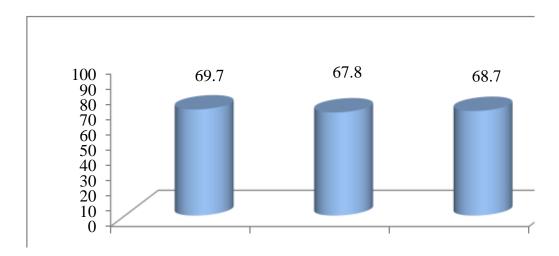
Health insurance coverage for Jordanians

As mentioned previously, the percentage of health insured Jordanians was 68.7%. Given the disparities among Jordanians, similar patterns of the differences between the total population are observed, as the gender gap tends to females favor, but the size of this gap does not exceed 3% (Table 3 and Figure 3).

Table 3: Percentage of Jordanian population with health insurance by sex and governorate, 2015

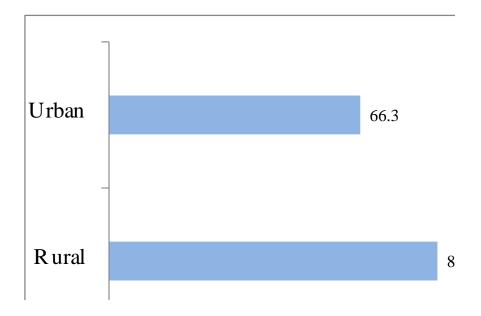
Governorate	Males	Females
Amman	54.5	55.9
Balqa	75.2	77.2
Zarqa	59.7	61.5
Madaba	77.2	79.7
Irbid	78.5	81.5
Mafraq	83.6	85.0
Jarash	86.1	87.8
Ajloun	90.5	93.4
Karak	88.8	91.2
Tafeilah	89.0	92.3
Ma'an	84.7	87.8
Aqaba	76.4	78.7
Total	67.8	69.7

Figure 3: Percentage of health insured Jordanians by sex, 2015



Given the health insured of Jordanians population according to their place of residence, it is noted that the rural population is the vast majority in obtaining health insurance. About 87% of them are health insured, compared to 66% of the urban population. Figure (4).

Figure 4: Proportion of health insured Jordanians by urban and rural areas, 2015



4.2 Special arrangements for children under six

All Jordanian children under the age of 6 are health insured by the Ministry of Health. The results indicate that all Jordanian children under the age of six are covered by the civil health insurance as a result of the Jordanian government's directives to include all children in this age group. It should be noted that the number of children in this category amounted to 312,000 children according to the results of the General Population and Housing Census, 2015.

Health Insurance for Non - Jordanians

The data in Table (4) indicate that about a quarter of the non-Jordanian population is covered by health insurance by 25.3%, while the percentage of females is 28.1% compared with 23.2% among males. These rates vary among the governorates as they reached the highest percentages in Jerash Governorate by (63.4%). This may be due to the presence of the Gaza camp in this governorate, as the UNRWA covers the health insurance of its members. Followed by Mafraq governorate by(58.9%) due to the presence of the Za'tari refugee camp in Syria.

This increase was accompanied by a rise in the male and female levels in both governorates. The lowest percentage of health insured non-Jordanian population was between 16.4% and 16.8% in both Amman and Balqa governorates. The same applies to males and females ,the ratios of both males and females varies between governorates.

Table 4: Percentage of non-Jordanian population with health insurance by sex and governorate, 2015

Governorate	Males	Females	Total
Amman	15.2	18.1	16.4
Balqa	13.7	23.0	16.8
Zarqa	28.4	33.0	30.4
Madaba	17.5	25.1	20.4
Irbid	25.3	27.2	26.2
Mafraq	56.6	61.3	58.9
Jarash	61.5	65.5	63.4
Ajloun	31.8	38.3	34.7
Karak	25.6	41.7	31.4
Tafeilah	17.8	26.3	20.3
Ma'an	27.8	34.2	30.1
Aqaba	22.4	29.5	24.6
Total	23.2	28.1	25.3

Figure (5) shows that about 14% of all those with health insurance are non-Jordanians.

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Figure 5: Percentage distribution of all health-insured population by nationality, 2015

6.2 Health insurance entities:

The vast majority of health insured (98.8%) have one source of health insurance, with no significant difference between Jordanians.

The public health insurance coverage includes the Ministry of Health and Royal Jordanian Medical Services (RJMS) and the university hospitals, which are funded mainly from the country Treasury. The public sector therefore bears the largest burden of covering all citizens with health insurance. The coverage rate is 71% from one source.

In view of the contribution of government sector components to health insurance, the Ministry of Health covers approximately one-third (36%) of the total health insurance costs. It should be noted that the participation rate of the Ministry of Health has been recalculated after all children under the age of 6 years. The Royal Medical Services is also responsible by 33.3% of health insurance burden, the private sector covers about 14% of the remaining burdens, UNRWA accounts 4.3%, while the other sectors cover about 10%.

In view of the percentage of health insurance by sex, it is noted that the ratios are close between males and females, as Table (5) shows.

Table 5: Percentage distribution of population with one health insurance by health insurance agency and gender, 2015.

	Population		Jordanian			
Insurance agencies	Males	Females	Total	Males	Females	Total
*Ministry of Health	34.8	37.3	36.0	40.6	43.0	41.8
Royal Medical Services	33.4	33.1	33.3	39.1	38.2	38.6
University Hospitals	2.7	2.3	2.5	2.2	2.2	2.2
UNRWA	4.4	4.1	4.3	2.2	2.2	2.2
Private insurance	15.0	13.3	14.1	13.0	11.6	12.3
**Special Arrangements	5.1	5.4	5.3	0.0	0.0	0.0
other	3.6	3.9	3.7	2.4	2.6	2.5
Outside Jordan	1.1	0.6	0.8	0.5	0.2	0.4
Total	100.0	100.0	100.0	100.0	100.0	100.0
Total Number of health insured	2664453	2606357	5270810	2282162	2262609	4544771
Proportion of those with one health insurance out of the total *** number of health insured	98.9	98.7	98.8	98.7	98.6	98.7
Proportion of health insured of the total population	53	58.2	55.5	67.8	69.7	68.7

^{*} Jordanian children aged 0-5 are free of charge health insured: All Jordanian children in the Kingdom who are under the age of 6 years have the right to obtain free health services, although they have no insurance and their number is about 312,000 children.

Health insurance agencies of Jordanians

According to the data presented in Table (6), 4 out of 10 Jordanian individuals are health insured in the Civil Health Insurance Fund of the Ministry of Health and the Royal Medical Services covers (38.6%). The private sector accounts for 12% of the total Jordanian population. The results also indicate that UNRWA covers 2.2% of all health insured Jordanians. UNRWA services in Jordan focus on primary health-care services and Palestinian refugees (Figure 6).

^{**} Special arrangements: Insurance by special arrangement: A special case of insurance is a special arrangement that includes all those who hold Syrian nationality and the reason for their coming to Jordan is the armed conflict in their country. In this case, they are therapeutic handling by the UNHCR for reimbursement, the treatment of the parties that carried out such treatments in accordance with special arrangements with the Ministry of the Interior.

^{***} Does not include those who have more than one health insurance.

Table 6: Percentage Distribution of Jordanian Population with One Health Insurance by Health Insurance agency and Gender, 2015

Haalth in annan an again sins	Jordanian			
Health insurance agencies	Males	Females	Total	
Ministry of Health	40.6	43.0	41.8	
Royal Medical Services	39.1	38.2	38.6	
University Hospitals	2.2	2.2	2.2	
UNRWA	2.2	2.2	2.2	
Private insurance	13.0	11.6	12.3	
Others	2.4	2.6	2.5	
Outside Jordan	0.5	0.2	0.4	
Total	100.0	100.0	100.0	

Figure 6: Percentage distribution of Jordanian population with one health insurance by health insurance agency, 2015

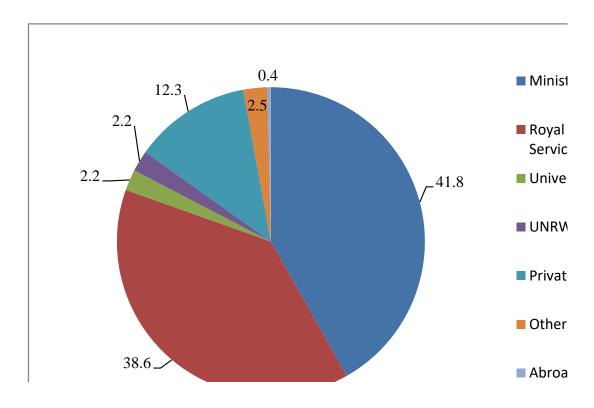


Table (7) shows that the Ministry of Health covers approximately half (50%) of the Jordanian population, while the coverage rate in the Royal Medical Services is about 47% and about 2.7% in the university hospitals (Figure 7).

Table 7: Percentage Distribution of Jordanian Population with One Health Insurance in the Public Sector by Insurance agency and Gender, 2015

Insurance agency	Males	Females	Total
Ministry of Health	49.6	51.6	50.6
Medical services	47.7	45.8	46.7
University hospitals	2.7	2.6	2.7
Totals	100.0	100.0	100.0

Figure 7: Percentage distribution of the Jordanian population with one health insurance in the government sector by insurance agency and gender, 2015.

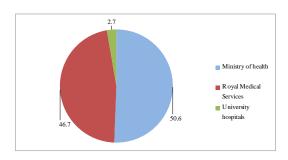


Table (8) shows the distribution of Jordanians who have one health insurance according to governorates and insurance agency. The table shows that the largest percentage of health insurance coverage in all governorates was for the government sector represented by the Ministry of Health and Jordanian Royal Medical Services and University Hospitals. The rates

of coverage between the Ministry of Health and Jordanian Royal Medical Services in all governorates varied as follows:

The Ministry of Health insurance represented the largest percentage of health insurance in Amman governorate by 47.4%, followed by Zarqa and Balqa governorate with a percentage of 46.8% and 46.4% respectively. While the largest prevalence of Royal Medical Services in Ajloun governorate was (70.2%) followed by Jerash governorate (60.9%) and Mafraq (57.9%).

The private sector has the highest value in Aqaba, where the percentage exceeded the quarter by (28.7%) being an economic zone followed by Amman governorate by (22.1%).

Table 8: Percentage of Jordanians with one health insurance by health insurance agency and governorate, 2015.

Governorate	Ministry of Health	Royal Medical Services	University Hospitals	UNRWA	Private insurance	Outside Jordan	Others	Total
Amman	47.4	23.3	2.8	2.1	22.1	0.7	1.6	31.0
Balqa	46.4	31.8	2.9	5.2	10.8	2.6	0.2	6.7
Zarqa	46.8	32.1	1.3	5.0	12.8	0.2	1.8	12.3
Madaba	44.2	45.6	1.0	0.2	6.9	0.1	2.0	2.7
Irbid	36.7	49.4	3.2	2.0	4.5	0.3	3.8	23.2
Mafraq	35.0	57.9	1.2	0.2	3.3	0.1	2.4	5.8
Jarash	30.1	60.9	1.2	2.5	3.1	0.1	2.1	3.2
Ajloun	24.6	70.2	1.0	0.1	2.0	0.1	2.1	3.2
Karak	37.4	50.1	0.8	0.1	8.3	0.1	3.3	5.4
Tafeilah	36.5	47.3	1.3	0.0	12.9	0.1	2.0	1.8
Ma'an	44.5	41.6	1.0	0.1	8.8	0.1	3.9	2.4
Aqaba	44.4	21.5	0.6	0.2	28.7	0.1	4.5	2.3
Total	41.8	38.6	2.2	2.2	12.2	0.4	2.5	100.0

Health insurance agencies for non-Jordanians

Table 9 shows the largest distribution of non-Jordanian health insurance under the special arrangements category. This may be attributed to the fact that the refugee category belongs to this entity. This entity has ensured special arrangements between the UNHCR and the

Ministry of Interior. This category includes the population in insurance and health care, the percentage of insurance within this body is about (38%). This ratio varied between males and females by about 5% for females.

About one-quarter of non-Jordanians with health insurance were insured by the private sector by (25.6%) while UNRWA covered 17%.

Table 9: Percentage of non-Jordanian population with one health insurance by health insurance agency and sex, 2015.

Insurance Agency	Males	Females	Total
University Hospitals	5.4	3.0	4.3
UNRWA	17.3	16.7	17.0
Private insurance	26.9	24.3	25.7
Special Arrangements	35.4	40.9	38.0
Outside Jordan	4.4	3.3	3.9
Others	10.6	11.8	11.2
Total	100.0	100.0	100.0

By governorate Table (10) shows, the highest percentage of non-Jordanian health insurance by special arrangements was in Ajloun Governorate (76%) followed by Mafraq and Irbid governorates (61% and 60% respectively).

Table 10: Percentage of non-Jordanian population with one health insurance by health insurance agency and governorate, 2015.

Governorate	University Hospitals	UNRWA	Private Insurance	Special arrangements	Outside Jordan	Others	Total
Amman	7	11.8	41.4	15.4	6.8	17.5	31.9
Balqa	1.9	21.3	21.8	27.7	3.5	23.8	2.2
Zarqa	0.6	33	9.8	45.8	1.4	9.4	18.1
Madaba	1.1	6.1	21.4	45.5	7.3	18.6	0.9
Irbid	10.6	5.9	11.5	60.1	3.3	8.5	16.4
Mafraq	0.3	1.8	32.1	60.9	2.6	2.3	19
Jarash	0.2	86.9	4.1	4.8	0.4	3.6	6

Ajloun	0.1	0.5	9.7	75.9	3.6	10.2	0.9
Karak	1	1.8	26.7	44.7	5.5	20.3	1.9
Tafeilah	0.7	1.3	43.6	17.6	5.4	31.5	0.2
Ma'an	0.4	4.9	18.5	57.2	4.4	14.6	0.7
Aqaba	0.4	7	55.6	5.6	2.8	28.5	1.8
Total	4.3	17	25.7	38	3.9	11.2	100

7.2 Not covered by health insurance

Table (11) shows that (44.5%) of the total population of the Kingdom are not covered by health insurance, while the percentage drops to about one-third (31.2%) for Jordanians and these percentages vary for the total population and Jordanian males and females, Where the proportion of males was higher than females at total population level by a difference (5%) and the level of Jordanians by a difference (2%).

The percentage of those not covered by health insurance for the total population at the urban and rural levels varies by a clear difference. The percentage of those who are not covered by health insurance in urban areas is more than double that of rural areas (47%) and urban (20.7%). Among Jordanians, 33.7% and 13.4% were not covered by urban and rural health insurance, respectively.

Table 11: Percentage of population not covered by health insurance by urban, rural and gender, 2015.

Schuci, 2015.						
	Jordanian			Total		
	Females	Males	Total	Females	Males	Total
Kingdom	30.3	32.2	31.2	41.7	46.9	44.5
Urban	32.7	34.7	33.7	44.4	49.4	47
Rural	12.5	14.2	13.4	17.5	23.7	20.7

Chapter III: Duplication in Health Insurance

1.3 Definition of double health insurance

A double health insurance means that the citizen holds two or more health insurance at the same time in both the private and public sectors. This is a problem that has significant implications for health insurance funds in terms of increasing costs, use of health facilities and services, amount of consumed medicine and medical staff working .For example the government is working with the Ministry of Health to end this problem through computing and comprehensive health insurance.

Comprehensive health insurance:

It aims at alleviating the enormous pressure in the number of patients in the public sector hospitals due to the large number of health insured patients and the increase in population, which automatically leads to the improvement of health services provided to citizens in health institutions in the public and private sectors.

Benefit from the large numbers of private doctors, medical staff and the expertise available to them without the need to appoint these competencies in the Ministry of Health, especially that the public sector suffers from a shortage of doctors because of the conversion of these qualifications to work in the private sector either because of retirement or obtaining competence certificates and termination of the required training, including those who leave the country.

Reducing the burden of transition, distance, and dates of surgery and reviews.

2.3 Health insurance coverage from more than one source

The proportion of health insured Jordanians in more than one agency is (1.3%) of the total health insured. Table (12,13).

Table 12: Proportion of population with more than one health insurance by the insurance agency and sex, 2015.

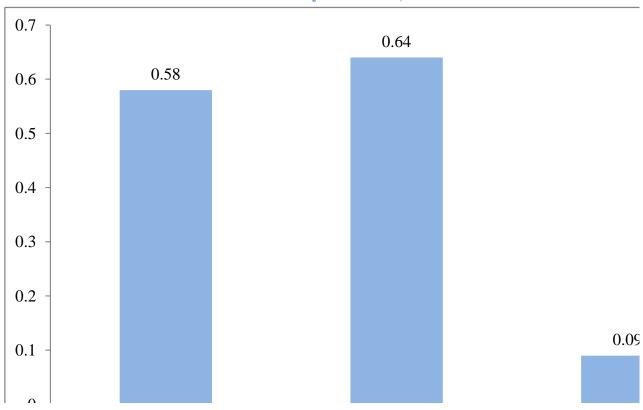
Insurance agencies	Males	Females	Total
Ministry of Health+ Royal Medical Services	0.241	0.382	0.312
Ministry of Health + University Hospitals	0.149	0.168	0.158
Ministry of Health + UNRWA	0.187	0.195	0.191
Ministry of Health + Private insurance	0.164	0.174	0.169
Ministry of Health + Others	0.034	0.022	0.028
Ministry of Health + Outside Jordan	0.019	0.014	0.016
Royal Medical Services + University Hospitals	0.105	0.117	0.111
Royal Medical Services + UNRWA	0.045	0.05	0.048
Royal Medical Services + Private insurance	0.096	0.098	0.097
Royal Medical Services+ Others	0.014	0.01	0.012
Royal Medical Services + Outside Jordan	0.018	0.014	0.016
University Hospitals + UNRWA	0.01	0.011	0.011
University Hospitals + Private insurance	0.047	0.043	0.045
University Hospitals + Others	0.005	0.003	0.004
University Hospitals + Outside Jordan	0.003	0.001	0.002
UNRWA + Private insurance	0.042	0.035	0.039

UNRWA + Others	0.006	0.007	0.007
UNRWA + Outside Jordan	0.001	0.001	0.001
Private insurance + Others	0.019	0.014	0.017
Private insurance + Outside Jordan	0.014	0.01	0.012
Others + Outside Jordan	0.004	0.003	0.003
Total	1.224	1.372	1.299

Table 13: Percentage of the Jordanian population with more than one source of health insurance by insurance agency and sex, 2015.

Insurance Agency	Males	Females	Total
More than one insurance in the government sector	0.5	0.67	0.58
Insurance in the government sector + an entity outside the government sector	0.64	0.64	0.64
More than one insurance in the non- governmental sectors	0.08	0.07	0.09
Total	1.22	1.38	1.31

Figure 8: Percentage of the Jordanian population with more than one source of health insurance by the insurer, 2015.

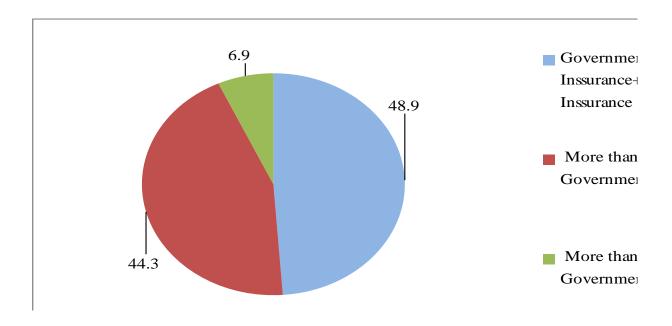


The relative distribution of Jordanian individuals who are health insured in more than one sector shows that the government sector is one of the most prominent insurers. More than 90% of those who have more than one insurance company were health insured by at least one government agency, thus increasing the burden on the state treasury.), Table (14) Figure (9).

Table 14: Percentage distribution of Jordanian population with more than one source of health insurance by source and gender, 2015.

Insurance Agency	Males	Females	Total
More than one insurance in the government sector	41.0	48.6	44.3
Insurance in the government sector + an entity outside the government sector	52.5	46.4	48.9
More than one insurance in the non- governmental sectors	6.6	5.1	6.9
Total	100.0	100.0	100.0

Figure 9: Percentage distribution of Jordanian population with more than one source of health insurance agency by source, 2015.



Chapter 4: Health insurance-related properties

1.4 Health insurance by age group and sex

Table 15 shows that all children under the age of 6 are covered by health insurance, with 100% health insurance coverage. This confirms the country's policies and plans to include all children in this age group with health insurance.

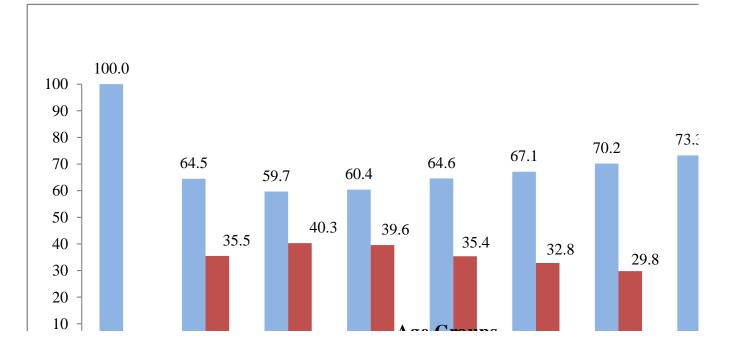
The highest percentage of health insurance coverage was the age group 65 years and over, where the percentage was about 73%, followed by the insurance rate for the age group (55-64) with a rate of (70.2%).

Health insurance rates for the rest groups varied by no more than 5% in the maximum gaps, where the lowest rate of health insurance was among the youth in the two age groups (15-24 years) and (25-34) years with a percentage of about (60%) of the two categories compared with about one-third of these two categories are not health insured by About 40%. Fig (10).

Table 15: Percentage of health insured and non-insured Jordanian population by age group, 2015.

Age group	Health insured	Non-health insured
0-5	100	0
6-14	64.5	35.5
15-24	59.7	40.3
25-34	60.4	39.6
35-44	64.6	35.4
45-54	67.1	32.8
55-64	70.2	29.8
65+	73.3	26.7

Figure 10:Percentage of health insured and non-insured Jordanian population by age group, 2015.



2.4 Health insurance according to the head of household economic activity

In the distribution of Jordanian population with health insurance according to the head of household type of work and sex, it was found that about two-fifths of health-insured individuals belong to families headed by an individual who works permanently. This proportion is close to those of individuals who are headed by an individual who has no work and does not seek work, beside it may be due to the fact that heads of households are either retired or have income from sources other than work.

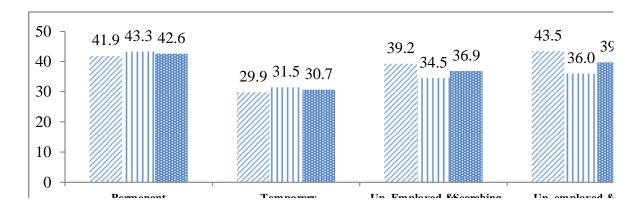
Data also indicate a decline in the proportion of health insured workers belonging to families headed by an individual who works in temporary or seasonal work, reaching about one-third. According to the head of the household gender, the results indicate variation in the percentage of health insured, where the chance of the individual who belongs to a family headed by a female and working in permanent or temporary work is about 1% higher than that of households headed by males, With slightly higher proportions in favor of male headed households who had no work, is looking for work, has no work or is not looking for work. (Table 16), (Figure 11).

Table 16: Percentage of Jordanian Individuals with Health Insurance by Economic Status of Household Head and Sex, 2015.

	work (temporary / (seasonal / irregular	He has no work and is looking for work	Not working and Not looking for work
--	---	---	--

Male	41.9	29.9	39.2	43.5
Female	43.3	31.5	34.5	36
Total	42.6	30.7	36.9	39.7

Figure 11: Percentage of Jordanian Individuals with Health Insurance by Economic Status and gender of Household Head, 2015.



In view of details for health insured according to the economic activity and gender of the household head as in Table 17, it is noted that the greatest opportunity to obtain health insurance is for individuals belonging to families headed by male and working in a permanent job, where it exceeded more than half against quarter for individuals belonging to families headed by male with no and doesn't seek work , (11%) for individuals belonging to families headed by male and working in temporary or seasonal work and about (5%) for individuals belonging to families headed by male and has no work but is looking for work.

As for households headed by female, the largest opportunity for individuals belonging to these families, who have no work and are not looking for work, where they exceeded four-fifths by about (84%).

This may be due to the fact that this group obtains health insurance from various sources such as retirement of the female household head, obtaining insurance from any member of the working family member, from deceased spouses or from any insurance agency other than the work. (11%) compared to 2% for individuals who belong to families headed by females and who work in temporary or seasonal work.

The percentage of health insured individuals belonging to female-headed households and working permanently is about 11% against (2%) for individuals belonging to female headed household who is working temporarily or seasonally, (3%) for individuals belonging to families headed by a female who has no work or still looking for work.

Table 17: Percentage Distribution of Health insured Jordanians by Economic Status and gender of Household Head, 2015.

work	(temporary / seasonal / (irregular	work and is looking for work	and Not looking for work 26.1
10.8	1.9	3.1	84.2
	58.1	(irregular) 58.1 10.6	(irregular work 58.1 10.6 5.1

Table 18 shows the relative distribution of non-insured individuals according to the head of household gender. The largest proportion of non-insured belonging to a male-headed family was found in individuals belonging to a family headed by a male working in a permanent job by (about 49%),

against a quarter of individuals belonging to a family headed by a male who has no work and is not looking for work, about (21%) of individuals belonging to a family headed by a male with temporary or seasonal work and about 7% belong to families headed by a male who has no work and is looking for work. As for female-headed households, the percentage of non-insured for individuals belonging to these families varied according to the state of economic activity as follows:

The highest percentage of non-insured individuals in female-headed households who has no job and does not seek employment by (87%) versus 6%, 3%, and 4% for non-insured individuals who belong to families headed by a female who has permanent, temporary or seasonal work, She does not have a job and is looking for a job.

Table 18: Percentage Distribution of non-insured Jordanian Individuals by Economic Activity and Gender of the Household Head, 2015.

Household gender	Permanent work	Work (temporary / seasonal / (irregular	He has no work and is looking for work	Not working and Not looking for work	Total
Male					
	48.6	21.4	6.9	23.2	100.0

Female					
	6.0	2.6	3.9	87.4	100.0

3.4 Health insurance by educational status of individuals

Health insured Jordanian by educational status

The results in Table (19) show that individuals with a Bachelor's degree or higher who are 13 years of age or above are the most covered by health insurance, where their health coverage varied between (72% - 85.9%). The percentage of illiterate people was 66%. Figure 15. shows that, with the exception of illiterate, the higher level of education from basic education into higher level, Health insurance coverage is higher, Figure (14). Viewing of these individuals gender, we notice that females covered with health insurance more than males at different levels of education, except for secondary, higher diploma and doctorate, were higher in males. Figure (12).

Table 19: Percentage of Jordanians aged 13 years and over who have one health insurance by educational status and gender, 2015.

Educational status	Males	Females	Total
Illiterate	59.0	70.1	66.3
Conversant (read& write)	56.8	59.0	57.9
Primary	57.2	61.7	59.4
Preparatory	58.0	58.8	58.4
Basic	52.6	56.4	54.1
Professional apprenticeship	47.7	54.5	48.9
Secondary	62.4	59.4	61.0
Intermediate diploma	64.2	67.0	65.9
B.A.	69.3	74.7	72.0
Higher diploma	84.9	84.8	84.9

M.A.	79.7	80.8	80.1
Ph.D.	85.9	85.8	85.9

Figure 12: Percentage of Jordanians aged 13 and over who have one health insurance by educational status and gender, 2015.

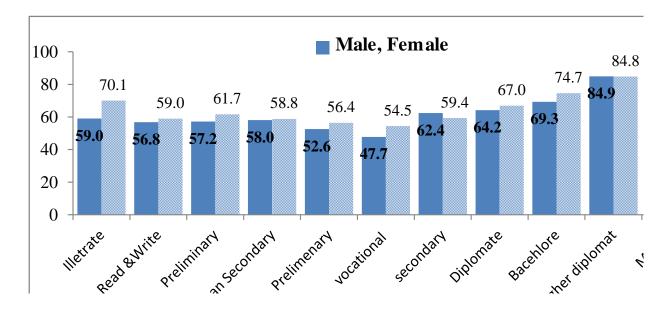
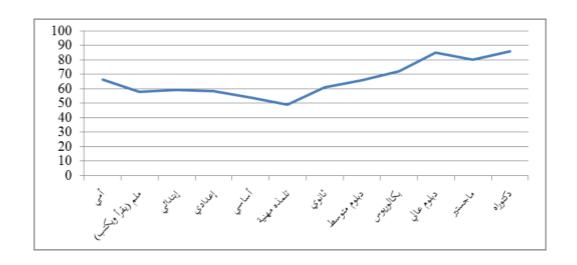


Figure 13: Percentage of Jordanians aged 13 years and above who have one health insurance by educational status, 2015.



(ملاحظة: صورة)

Non - insured Jordanians by educational status

The results of health non-insured by educational status, as shown in Table (20) indicate that the highest percentage of non-insured is those whose educational level is secondary or less. Where the highest percentage of health non-insured in the educational level apprenticeship, about half in this category are health non-insured health followed by individuals at the basic level of education by about (46%).

It is noted that the percentage of health non-insured decreases with the high level of education which confirms the previously stated that the proportion of health insured rises with the high educational level. The percentage of health non-insured males and females at the educational levels bachelor degree and less varied slightly, where the percentage of males was lower than that of females in obtaining health insurance. This may be due to the fact that the female has the opportunity to obtain health insurance through using health insurance of the household head or any other breadwinner.

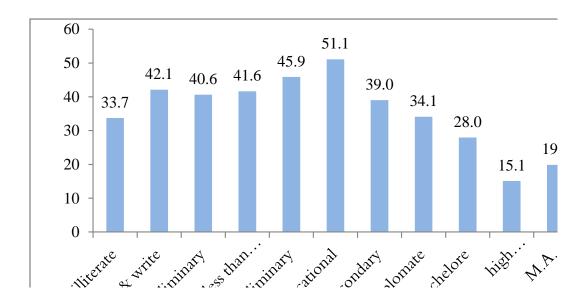
The percentage of health non-insured males was higher than that of females by a maximum of 10% and the lowest (1%), except for secondary education the percentage of health non-insured females was 3% higher than that of males. The educational levels are higher than those of the Bachelor. The ratio is equal except of the Master's level, where the percentage of health non-insured is higher than that of females by (1%), Table (20), Figure (14).

Table 20: Percentage of Jordanians aged 13 and over who do not have health insurance by educational status and gender, 2015.

Educational status	Males	Females	Total
Illiterate	41.0	29.9	33.7
Conversant (read& write)	43.2	41.0	42.1
Primary	42.8	38.3	40.6
Preparatory	42.0	41.2	41.6
Basic	47.4	43.6	45.9
Professional apprenticeship	52.3	45.5	51.1
Secondary	37.6	40.6	39.0
Intermediate	35.8	33.0	34.1

diploma			
B.A.	30.7	25.3	28.0
Higher diploma	15.1	15.2	15.1
M.A.	20.3	19.2	19.9
Ph.D.	14.1	14.2	14.1

Figure 14: Percentage of Jordanians aged 13 years or over who do not have health insurance by educational status, 2015.



4.4 Health insurance by marital status Health insured by marital status

Table (21) shows that two-thirds of married people are currently covered by health insurance, at a rate of about 66%, which is the highest percentage of health insurance coverage followed by the category of those who ever married before by (63.6%). The lowest Health insurance coverage were among single males by (60%).

These percentages vary between males and females in different categories. The gender gap in the currently married group tends to males favor by 1.2%. In the single and pre-married categories, this gap tended to females favor by a clear difference of 7%. Shapes (15,16).

Table 21: Percentage of Jordanians aged 13 years and over who have one health insurance by marital status and gender, 2015.

Marital status	Males	Females	Total
Single	57.2	64.1	60.2
Married	66.8	65.6	66.2
Ever married	57.0	64.8	63.6

Figure 15: Percentage of Jordanians aged 13 years and above who have one health insurance by marital status, 2015.

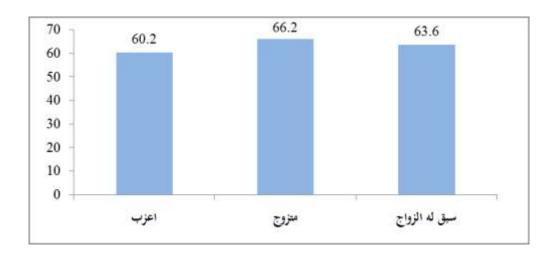
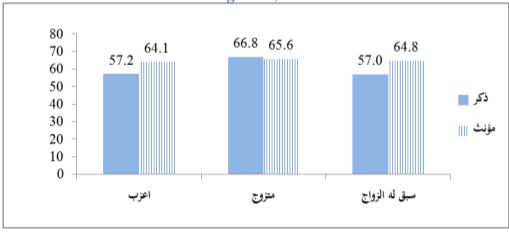


Figure 16: Percentage of Jordanians aged 13 and over who have health insurance by marital status and gender, 2015.



Jordanians who are not health insured according to marital status

The results in Table 22 show that 39.3% of Jordanians aged 13 years and over in singles category who do not have health insurance. The same percentage of those who have ever married has a similar rate of 39.1%, while the percentage of those who are currently married is 33.8%. According to gender, the percentage of health non-insured varied between males and females and it was highest among males in both categories of bachelors and those who had ever married by about 7%. But the current married population constituted the highest difference among females by (1%).

Table 22: Percentage of Jordanians 13 years and over who do not have health insurance by marital status and gender, 2015.

Marital status	Males	Females	Total
Single	42.8	35.9	39.3
Married	33.2	34.4	33.8
Ever married	43.0	35.2	39.1

Figure 17: Percentage of Jordanians aged 13 and over who do not have health insurance by marital status and gender, 2015.

