

KANTAR



# Health Insurance Authority

A review of Private Health Insurance in Ireland 2021

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# A review of Private Health Insurance in Ireland in 2021 – Background & Methodology

## Background

Since 2002, the HIA has commissioned a consumer survey, which takes place every two years, looking at the public's attitudes and perceptions to health insurance in Ireland. In this report, results for the years 2011 to 2021 are included.

Specific questions were asked depending on the person's health insurance status (i.e., those currently holding health insurance versus those who do not), with some questions being asked of the entire sample. Topics included:

- Incidence of, and attitudes towards, Health Insurance
- Reasons for having or not having health insurance, and the likelihood of taking out health insurance in the future
- Awareness and attitudes towards Lifetime Community Rating
- The number of adults and children on the policy and duration of being insured
- Switching behaviour and attitudes towards switching
- Perceptions of cost
- Level of satisfaction with health insurance
- Awareness of the Health Insurance Authority (HIA).

## Methodology

This year, there has been a change in methodology, primarily due to Government restrictions on Covid-19. As a result of this, we have migrated from a Face-to-Face methodology to an Online methodology. The sample is representative of those aged 18+ on online panels. Whilst the panel mirrors the population aged 18+, the attitudinal and behavioural profile of panellists may be slightly different to the overall population. Therefore, it is important to be mindful of this change in methodology when making comparisons to previous years.

As in previous years, a nationally represented sample of 2,000 interviews were conducted online. Fieldwork took place during September and October 2021, mirroring the timing of the survey previously undertaken in 2019. To ensure a representative sample of the adult population in the Republic of Ireland (aged 18+), quotas were set around gender, social class and region. Data was weighted at the analysis stage to reflect the known population.

The margin of error for a sample of 2,000 is +/- 2.2%. For a sub sample such as the number of respondents with health insurance (1,083 of the sample) the margin of error is +/- 3.0%, and the margin of error for those without health insurance (917) is +/- 3.2%.

# 1 Executive Summary



# Executive Summary

## Who has health insurance?

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Health insurance coverage continues to grow. 53% of respondents have health insurance according to the survey (HIA data show that 47% of the resident population, including children, have health insurance).

The social profile of people with health insurance continues to be largely people from the white collar/ professional socio-economic group (ABC1s).

Over one third (34%) have dependent children, whilst just under seven in ten policy holders are married or co-habiting.

Meanwhile, 36% used to have health insurance but relinquished it. Those who relinquished it are more likely to be female, aged 35 to 44, living in Leinster, or from the blue collar/manual socio-economic group/receiving a welfare payment (C2DEs).

Health insurance coverage is increasing amongst 25 to 34 year olds. However, uptake of health insurance continues to under index among younger adults (those under the age of 35). Whilst they account for 29% of the adult population, only 23% have cover.

## The PHI landscape: Health insurers, work schemes and premiums

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32% are part of a work scheme. There is little choice as to which health insurer is offered.

VHI remains the largest provider of health insurance and is chosen by 45% of those claiming to have health insurance.

While still decreasing, the rate of decline has slowed considerably compared to several years ago (HIA data shows VHI has 49% market share).

The average perceived price paid in 2021 stands at 1,778 euros (this figure includes everybody who is covered on the policy and possibly reflects covid 19 related refunds).

As in previous years, the cost of policies (or level of cover) increases with age, with those aged 55 and older paying an average of 2,389 euros.

# Executive Summary

## Attitudes towards health insurance

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There is a growing belief amongst all respondents that health insurance is a necessity, and not a luxury.

There is some softening of the opinion that having health insurance allows people to skip queues and a better level of care and service.

Only 27% of the overall population see health insurance as good value for money.

Most respondents have not heard of Lifetime Community Rating (LCR), with half stating that LCR will not entice them to take out health insurance.

Interestingly, in the main the pandemic has not changed the general public's view on health insurance.

## Reasons for taking out health insurance and barriers to entry

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Among those with health insurance, the main reasons given for having insurance are the lack of access to public services, longer waiting lists, and the associated costs for treatment and accommodation.

Unsurprisingly, these reasons become more important for older age cohorts.

Among those without health insurance, price considerations are the greatest barrier.

Even among those without health insurance, for many there is a strong recognition (46%) that health insurance is a necessity and not a luxury. This suggests that if they could afford it, they would.

# Executive Summary

## Levels of satisfaction with health insurance

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People with health insurance cited greatest dissatisfaction with the level of out-patient/ non-hospital cover on their plan.

There was also some dissatisfaction with the decrease in the level of cover this year and the quality of information and advice regarding cover and benefits.

The proportion believing that premium increases are not justified by the cost of treatments and services shows a significant increase (48%) and returns to the levels previously seen in 2011.

People with health insurance expressed most satisfaction with the customer service they receive from their health insurer.

## Switching behaviour

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The majority (61%) have never switched health insurance providers. Over one in three (35%) have ever switched.

Of those who have ever switched, over half (56%) have only done so once, with the bulk moving from VHI, similar to previous years. Among those that have not switched, over one in four have considered doing so.

There has been a significant increase in the perception of it being difficult to switch among those who have chosen not to switch health insurance. Other reasons for not switching include that it is too much hassle to switch, that it is too difficult to compare plans, and simply being satisfied with their current provider.

Among those who have switched, cost considerations dominate again in 2021 with 56% of switchers mentioning price as a factor.

Given that the average number of years for having a health insurance policy is 18 years and the average number of years with their current provider is 13 years (for people with health insurance), it is not surprising that over half of people with health insurance have kept their level of cover the same and plan to stick with this for the next year

# Executive Summary

## Awareness of HIA

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Over one in four nominated the HIA as a source of advice if they had a problem with their health insurance provider.

Encouragingly, those that claim to have heard of the HIA has increased but there is a sense of not being quite sure what the HIA do.

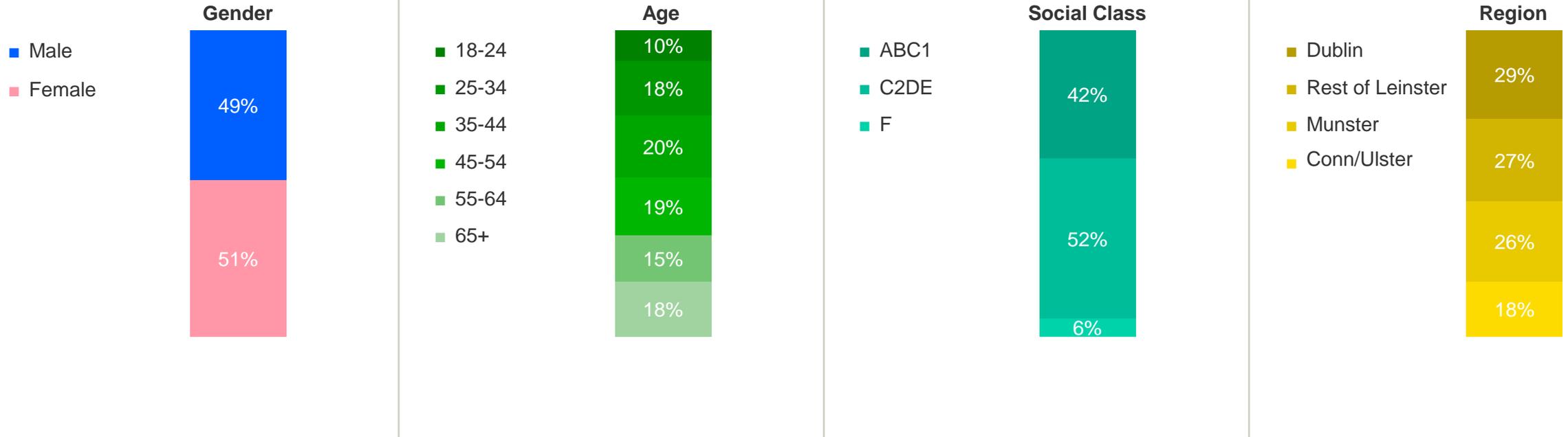
Looking at the supports and service that the HIA provides, the majority have not made use of the HIA comparison tool. For those that have used the tool, high levels of satisfaction are expressed.

## 2 Sample Profile



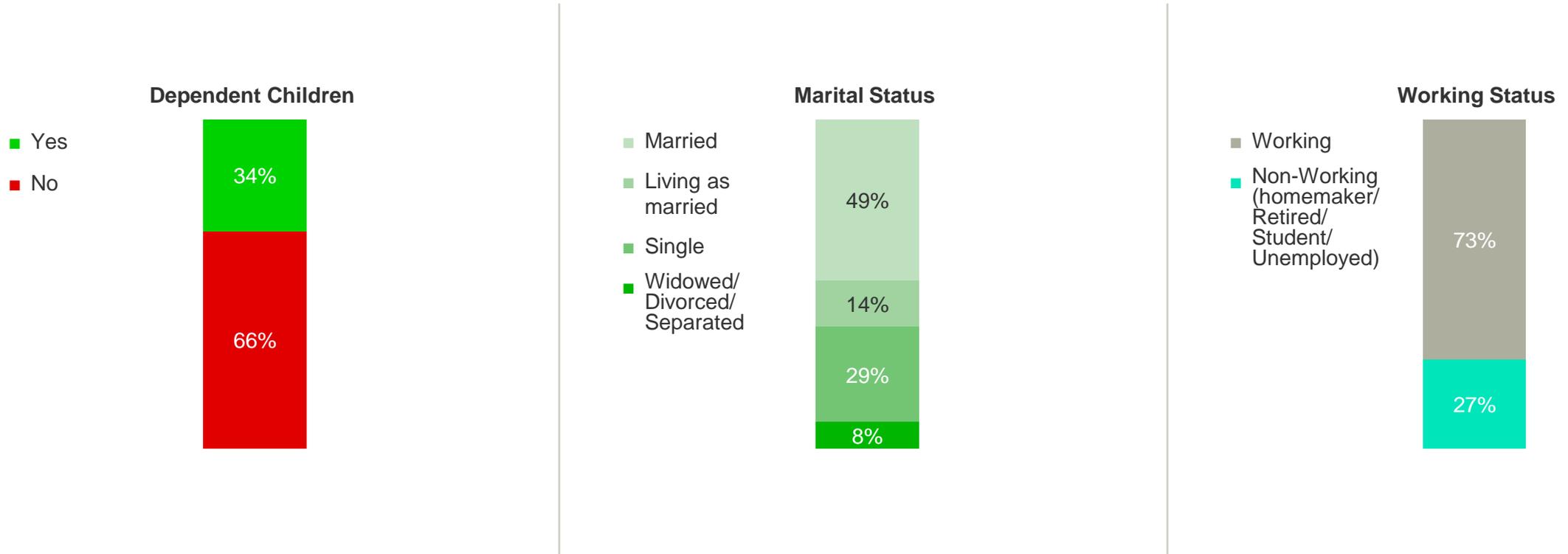
# Demographic Sample Profile

The sample reflects the known population profile of adults aged 18+ in the Republic of Ireland and is based on the latest CSO data.



## Demographic Sample Profile (Cont'd): Family, Marital and working status.

The sample reflects the known population profile of adults aged 18+ in the Republic of Ireland and is based on the latest CSO data.



3  
Some context before we  
start



# Statements about Health Insurance

PHI is now seen as a necessity rather than a luxury, up versus 2019. Some softening of the opinion that having PHI allows people to skip queues and guarantees a better level of service.

						Mean	Net agree					
	Disagree Strongly	Disagree	Neither	Agree Slightly	Agree Strongly		2021	2019	2017	2015	2013	2011
Health insurance is a necessity not a luxury	6%	13%	19%	34%	28%	3.63	61%	58%	58%	56%	56%	59%
Having health insurance means you can skip the queues	7%	13%	21%	36%	22%	3.53	58% ▼	64%	59%	58%	65%	62%
Having health insurance means always getting a better level of health care service	6%	13%	22%	37%	21%	3.53	58% ▼	62%	57%	56%	55%	62%
Health insurance is only for the wealthy	12%	19%	23%	30%	16%	3.19	46%	45%	44%	44%	46%	43%
I will always have Health Insurance	19%	15%	25%	19%	22%	3.11	41%	40%	39%	36%	34%	38%
There is adequate information to enable me to compare plans on offer from different health insurers	11%	20%	36%	24%	9%	3.01	33% ▼	38%	39%	34%	39%	44%
*There is no need for health insurance if Sláintecare is implemented in full	9%	15%	48%	19%	9%	3.04	28%					
Health insurance is good value for money	19%	26%	28%	20%	7%	2.7	27% ▼	35%	30%	25%	22%	31%
*Consumers are adequately protected in the health insurance market in Ireland	12%	24%	40%	20%	5%	2.82	25%	38%	36%	37%	36%	43%
There is no need for health insurance in Ireland, public services are adequate	36%	27%	22%	11%	4%	2.21	15% ▼	22%	22%	23%	19%	20%
Only old people and sick people need health insurance	43%	25%	19%	8%	5%	2.08	13% ▼	17%	18%	18%	15%	15%

Note: \*New statement in 2021

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All Adults Aged 18+ (n=2,000)

Q.54 We would now like to show you a number of statements people have made about health insurance, and we would like you to say to what extent you agree or disagree with each statement.....

# Impact of COVID-19 on views on health insurance

Three in five claim the pandemic has not changed views on health insurance. Surprisingly this view is more acute for those aged over 65. The youngest cohort (18-24) are now more likely to take out health insurance.

	Total	Age						Gender		Region				Social Class		
		18-24	25-34	35-44	45-54	55-64	65+	Male	Female	Dublin	Leinster	Munster	Conn/Ulster	ABC1	C2DE	F
	Base: 2,000	202	381	427	399	320	271	847	1145	582	518	542	358	977	972	51
It has not changed my view at all	62%	31%	45%	58%	62%	77%	87%	66%	57%	56%	63%	67%	62%	60%	63%	64%
I am more likely to take out health insurance	24%	42%	37%	26%	22%	14%	9%	21%	26%	29%	24%	20%	20%	27%	22%	20%
I am less likely to take out health insurance	4%	11%	6%	4%	5%	3%	1%	3%	5%	5%	4%	2%	7%	4%	4%	7%
Don't know	10%	17%	13%	12%	11%	7%	3%	9%	11%	10%	9%	11%	10%	9%	11%	9%

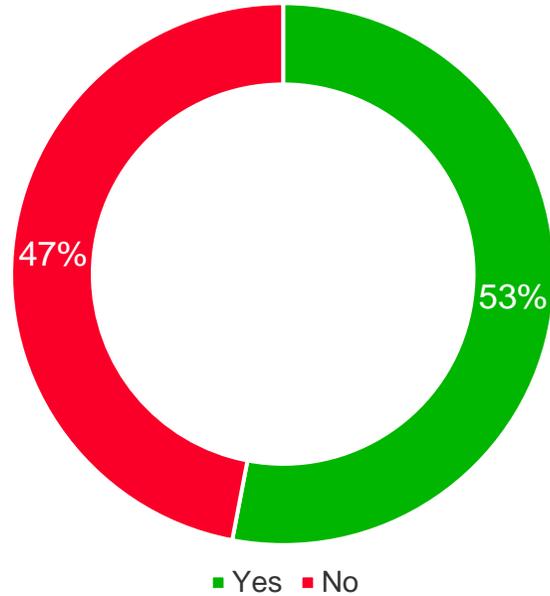
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# Incidence of Health Insurance



# Incidence of Health Insurance

The penetration for those who have PHI continues to build.



Incidence of having PHI policies in previous years

2019	2017	2015	2013	2011
48%	43%	41%	40%	43%

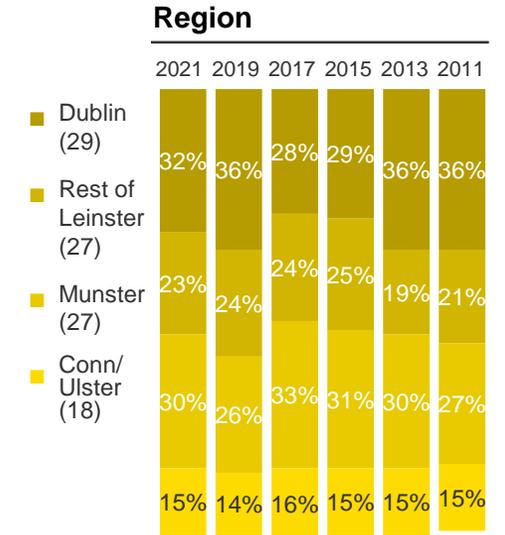
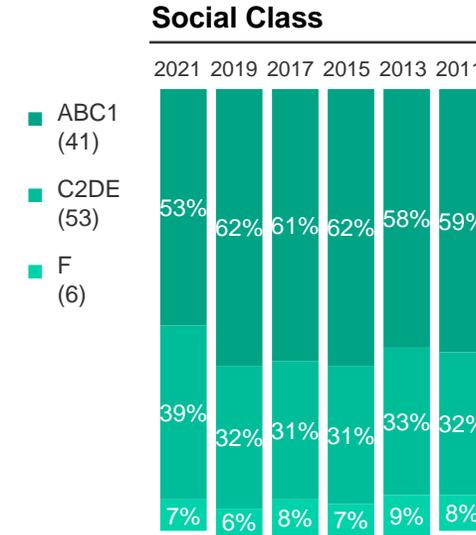
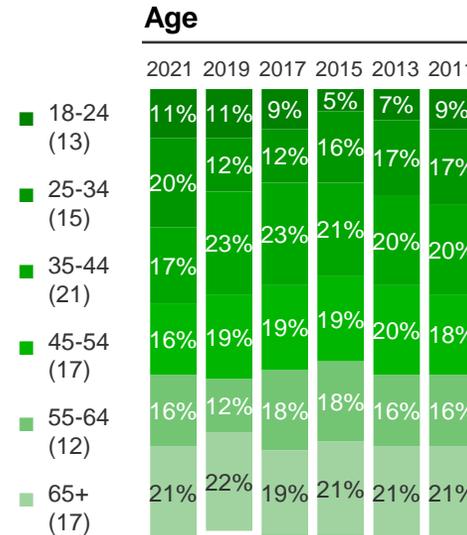
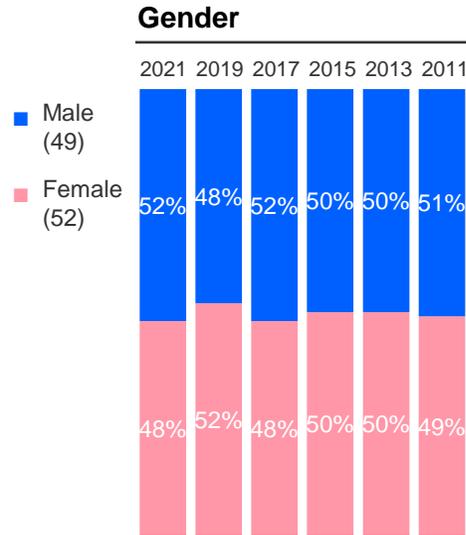


# Profile of people with Health Insurance

Those with PHI are more likely to be white collar workers (ABC1s) or living in Dublin. Penetration is building among the 25-34 year olds.



All with PHI

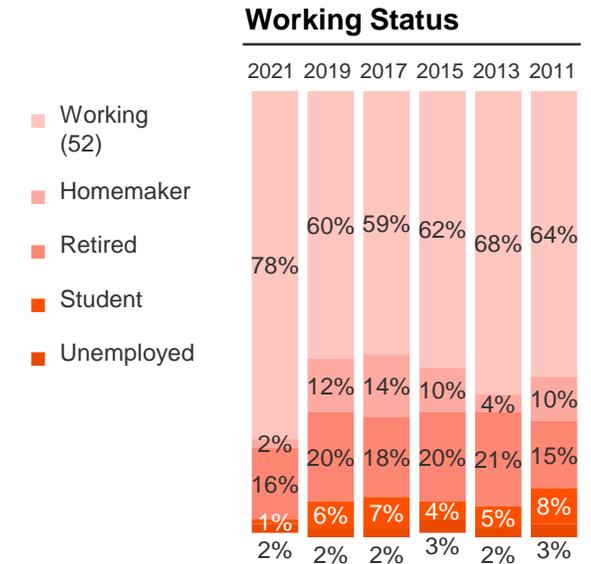
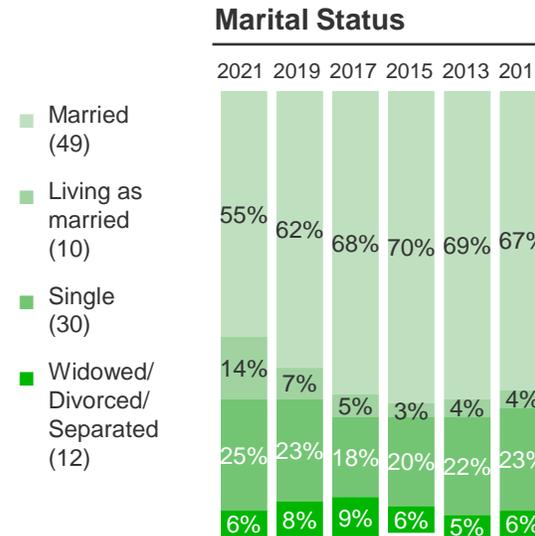
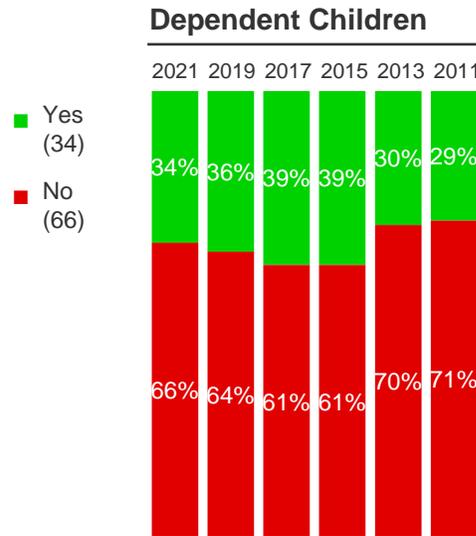


# Profile of people with Health Insurance

Those with dependent children are marginally more likely to have PHI and are much more likely to be working.



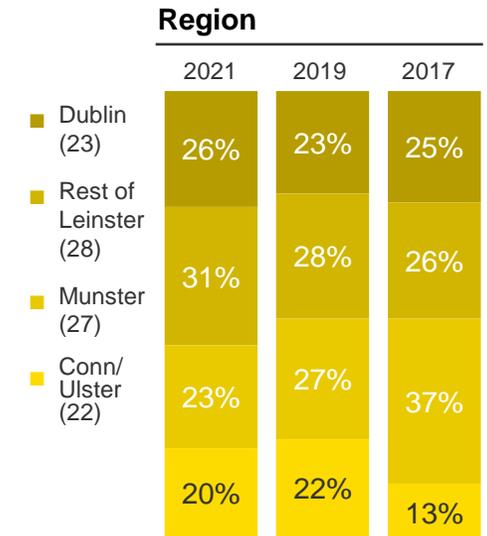
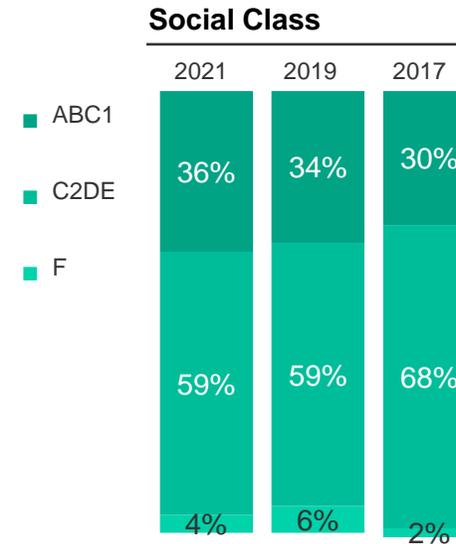
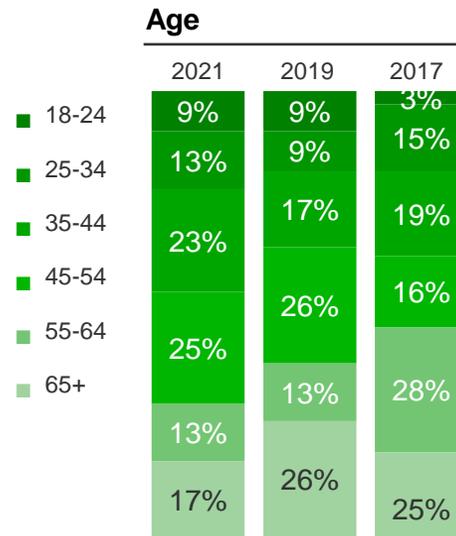
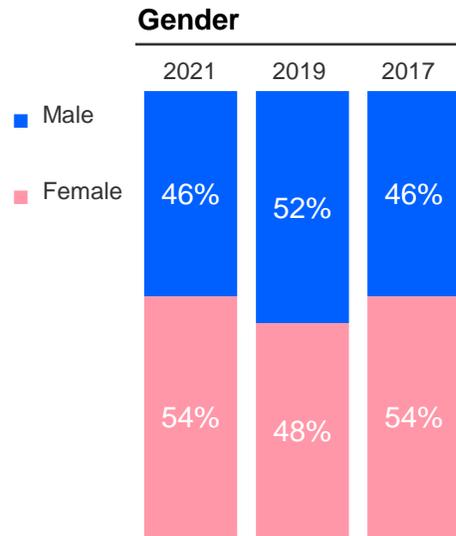
All with PHI



# Demographic Sample Profile – Those who used to have PHI but have relinquished it:

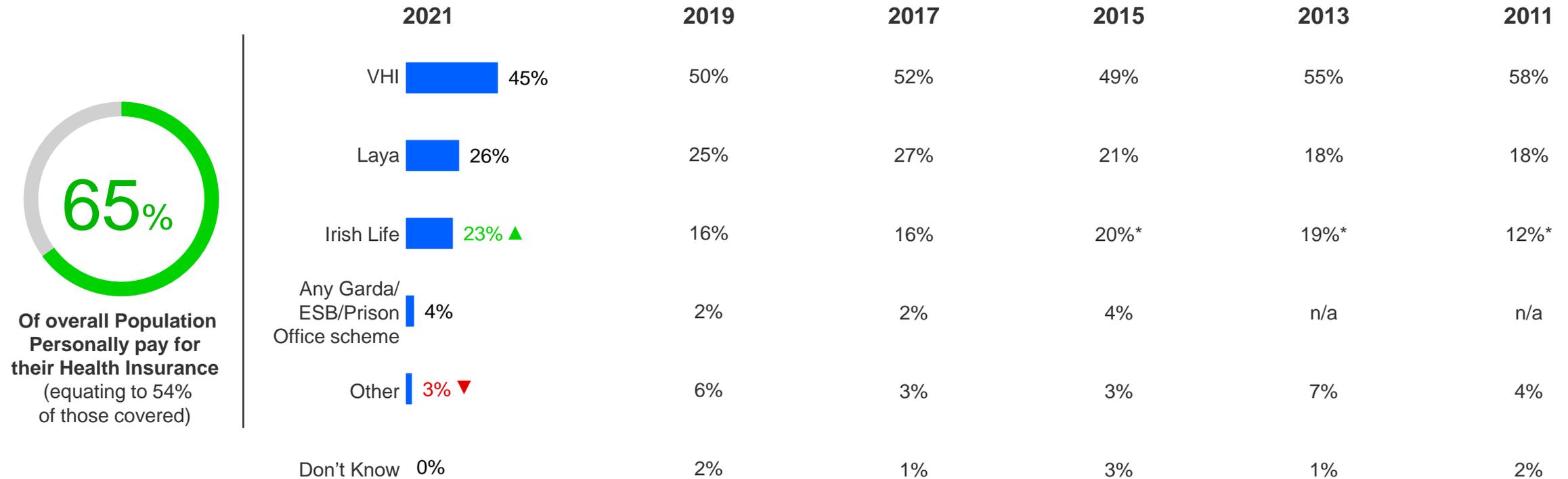


All who used to have PHI



# Current Health Insurance Provider

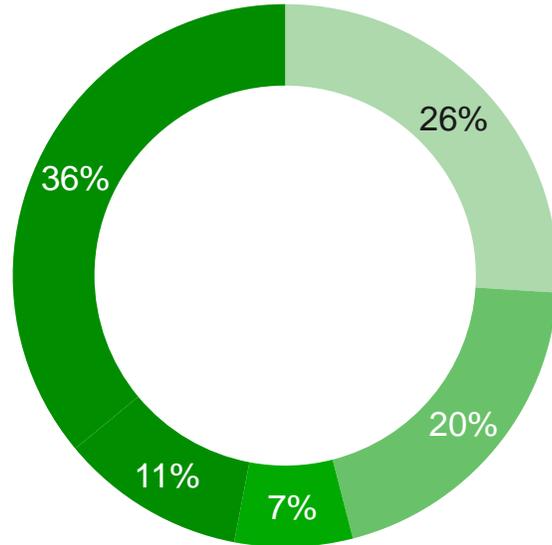
Among those who personally pay for health insurance, VHI continues to be the most widely used PHI provider. Laya stays flat this year with Irish Life gaining good ground with a significant increase.



# Length of time being covered by Health Insurance

Among those with health insurance the average number of years for having a PHI policy is 18 years. Similar level to 2017.

### Number of years health insurance is held

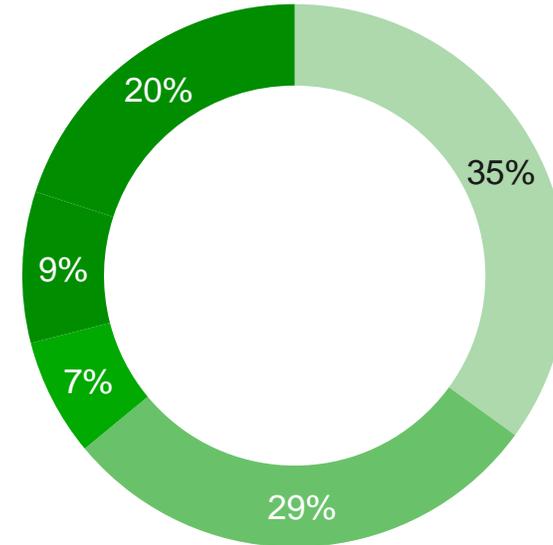


0 - 4 years 5 - 10 years 11 - 15 years 16 - 20 years 21+ years

**Average**

18 yrs.

### Number of years with current health insurance provider



0 - 4 years 5 - 10 years 11 - 15 years 16 - 20 years 21+ years

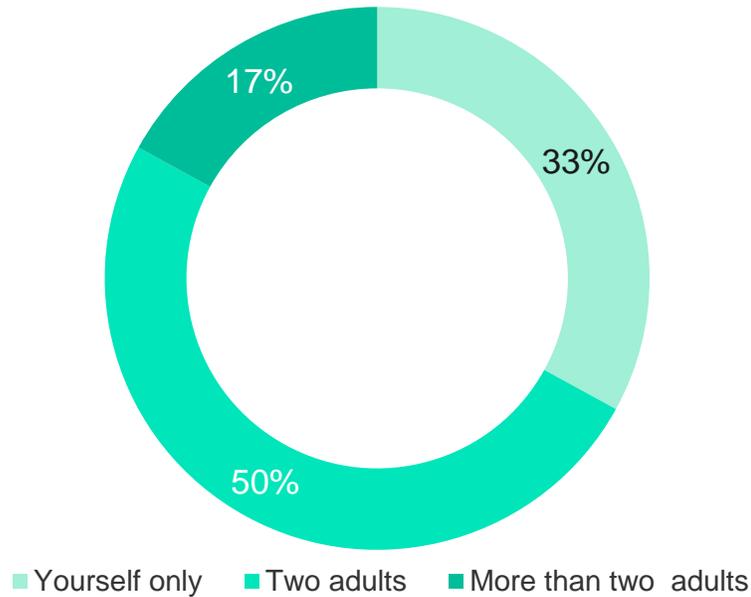
**Average**

13 yrs.

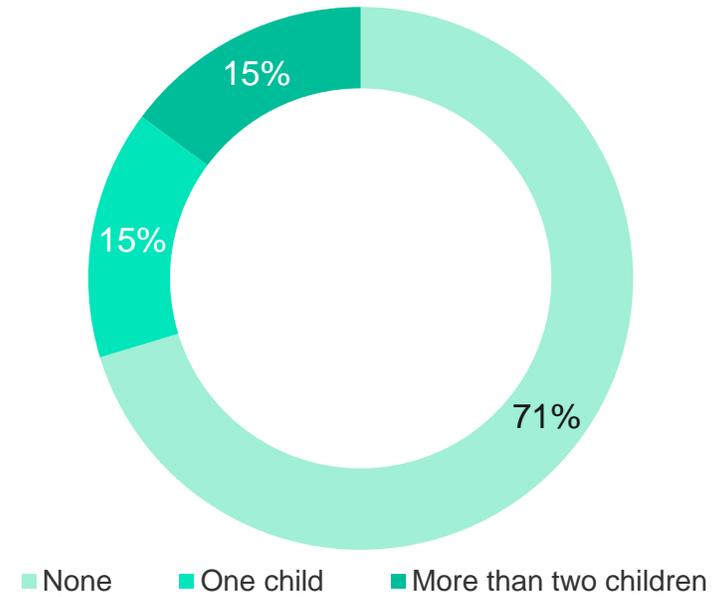
# Number of people covered on insurance policy

The majority of policies cover singular policy holders or two adults.

## Number of adults covered by policy



## Number of children covered by policy



5  
Drivers and Satisfaction  
Levels Among  
those with Health  
Insurance



## Key Driver for having Health Insurance – Main reason

The primary reason for having PHI is the perceived lack of access to public service and long waiting lists, plus the associated costs for treatment and accommodation. There is also an impression of inadequate standard of public services available.

Main Reason	2019	2017	2015	2013	2011
**Lack of access to public services/longer waiting lists  28%	n/a	n/a	n/a	n/a	n/a
Cost of medical treatment/accommodation is very high  22%	14%	26%	20%	18%	17%
Inadequate standard of public services  14%	14%	15%	16%	18%	19%
Offered with employment (fully/partially paid by employer)  7%	14%	3%	4%	7%	8%
I am getting older  7%	5%	3%	n/a	n/a	n/a
Have (or plan to have) children  5%	5%	3%	6%	6%	7%
My parents included me on their policy  4%	11%	7%	6%	3%	2%
I can afford it  3%	6%	7%	8%	12%	8%
Offered with employment (paid for by employee)  3%	2%	11%	15%	13%	16%
I had a health scare  2%	2%	1%	2%	n/a	n/a
Spouse/partner/friend recommended it  1%	6%	7%	5%	6%	5%
I took it out because of the Lifetime Community Rating (LCR)  1%	1%	0%	2%	n/a	n/a
*I came / returned to Ireland from abroad, and realised the Health Service wasn't as good  1%	n/a	n/a	n/a	n/a	n/a
I became pregnant -	1%	1%	1%	n/a	n/a
Don't know / Can't remember *	1%	1%	8%	9%	6%

Note: \*New statement in 2021 | \*\* Statement combined in 2021

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All with Health Insurance (n=1,083)

Q.16 For what reason(s) do you have health insurance?

Q.17 What is the main reasons why you have health insurance?

# Other Key Drivers for having Health Insurance

Other reasons continues to remain focussed on unavailability of public services, waiting lists. The high costs for treatment and hospital stays also on the rise.

	Main Reason	Any Reason	2019	2017	2015	2013	2011
**Lack of access to public services/longer waiting lists	28%	39%	n/a	n/a	n/a	n/a	n/a
Cost of medical treatment/accommodation is very high	22%	39%	31%	40%	31%	32%	24%
Inadequate standard of public services	14%	30%	28%	30%	27%	29%	24%
I am getting older	7%	23%	16%	14%	n/a	n/a	n/a
I can afford it	3%	21%	18%	16%	12%	13%	13%
Offered with employment (fully/partially paid by employer)	7%	18%	16%	13%	17%	17%	17%
Have (or plan to have) children	5%	14%	11%	7%	8%	12%	9%
My parents included me on their policy	4%	9%	13%	8%	5%	8%	8%
Offered with employment (paid for by employee)	3%	8%	4%	6%	7%	7%	5%
Spouse/partner/friend recommended it	1%	7%	13%	14%	12%	10%	8%
I had a health scare	2%	3%	7%	7%	8%	n/a	n/a
*I came / returned to Ireland from abroad, and realised the Health Service wasn't as good	1%	3%	n/a	n/a	n/a	n/a	n/a
I took it out because of the Lifetime Community Rating (LCR)	1%	3%	2%	1%	1%	n/a	n/a
I became pregnant	-	*	2%	2%	1%	n/a	n/a
Don't know / Can't remember	*	2%	2%	1%	10%	n/a	n/a

Note: \*New statement in 2021 | \*\* Statement combined in 2021

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All with Health Insurance (n=1,083)

Q.16 For what reason(s) do you have health insurance?

Q.17 What is the main reasons why you have health insurance?

# Total Reasons for having Health Insurance by Age

Life stage is critical in determining reasons for having PHI.

Any Reason	18-34	35-54	55+
**Lack of access to public services/longer waiting lists	27%	33%	56%
Cost of medical treatment/accommodation is very high	33%	34%	49%
Inadequate standard of public services	20%	27%	42%
I am getting older	8%	24%	35%
I can afford it	20%	17%	24%
Offered with employment (fully/partially paid by employer)	23%	26%	7%
Have (or plan to have) children	17%	20%	5%
My parents included me on their policy	24%	4%	2%
Offered with employment (paid for by employee)	6%	8%	8%
Spouse/partner/friend recommended it	8%	8%	5%
I had a health scare	5%	4%	2%
*I came / returned to Ireland from abroad, and realised the Health Service wasn't as good	5%	3%	3%
I took it out because of the Lifetime Community Rating (LCR)	3%	4%	1%
I became pregnant *	*	*	*
Don't know / Can't remember	3%	2%	2%

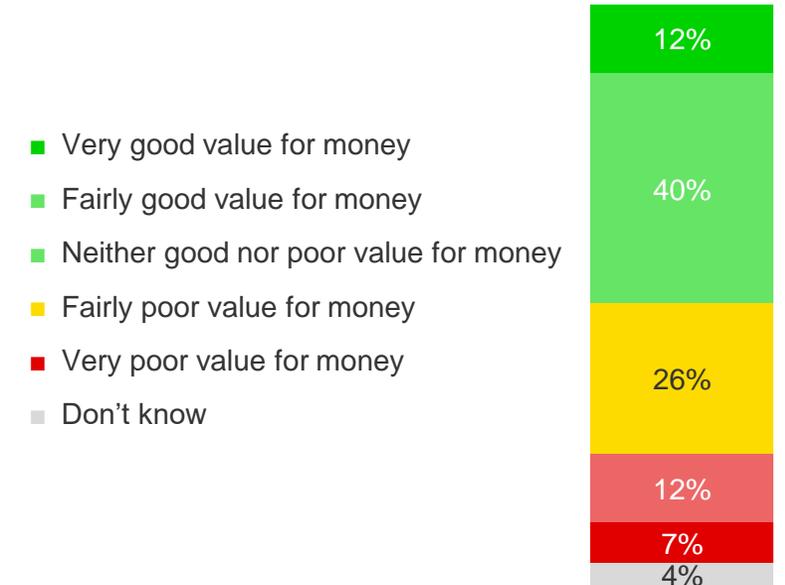
# Main reasons for first taking out Health Insurance

The top cited reasons for having PHI are “long waiting lists and access to public service and the associated costs with medical treatments and hospital stays”. Among the older age cohort (55+) this is key. Just over half believe that having PHI is very good or fairly good value for money .

## Main Reasons

	18-34	35-54	55+
**Lack of access to public services/longer waiting lists	13%	23%	28%
Cost of medical treatment/accommodation is very high	17%	18%	24%
Inadequate standard of public services	11%	17%	23%
My parents included me on their policy	32%	9%	6%
Offered with employment (fully/partially paid by employer)	12%	17%	12%
I am getting older	9%	17%	14%
I can afford it	10%	12%	10%
Offered with employment (paid for by employee)	7%	10%	11%
Spouse/partner/friend recommended it	10%	9%	12%
Have (or plan to have) children	6%	9%	7%
*I came / returned to Ireland from abroad, and realised the Health Service wasn't as good	5%	4%	3%
I had a health scare	5%	4%	3%
I took it out because of the Lifetime Community Rating (LCR)	4%	4%	1%
I became pregnant	3%	3%	1%
Don't know	4%	4%	4%

## Value for money



Note: \*New statement in 2021 | \*\* Statement combined in 2021

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All with Health Insurance (n=1,083)

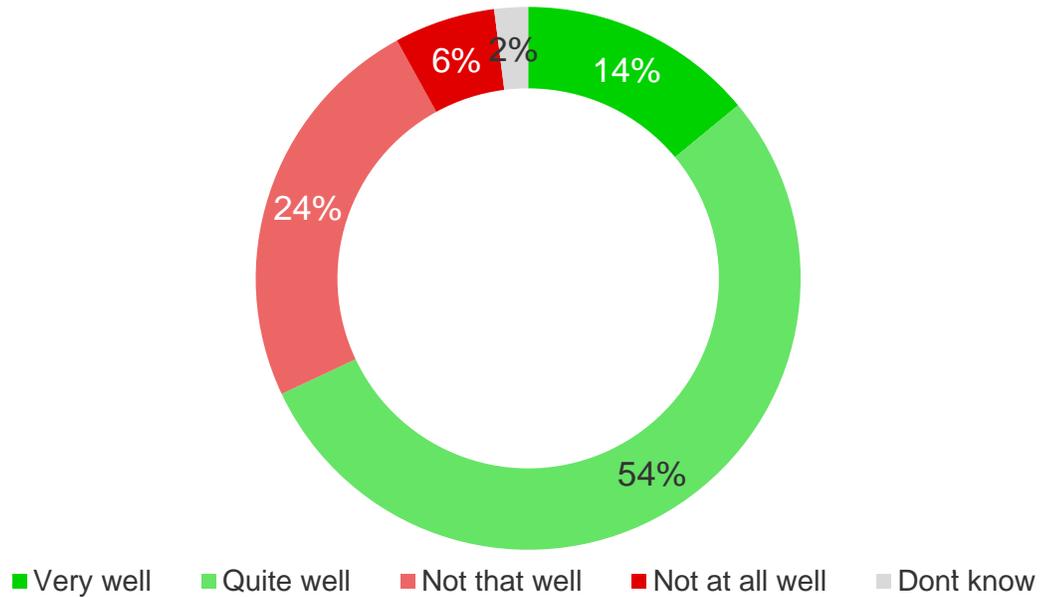
Q.17b Thinking about the first time you decided to take out Health Insurance, what were the main reasons you decided to do so?

Q.17d Do you believe that the amount of money that you spend on your Health Insurance policy represents good value for money?

# Overall Satisfaction with level of understanding of current health insurance cover

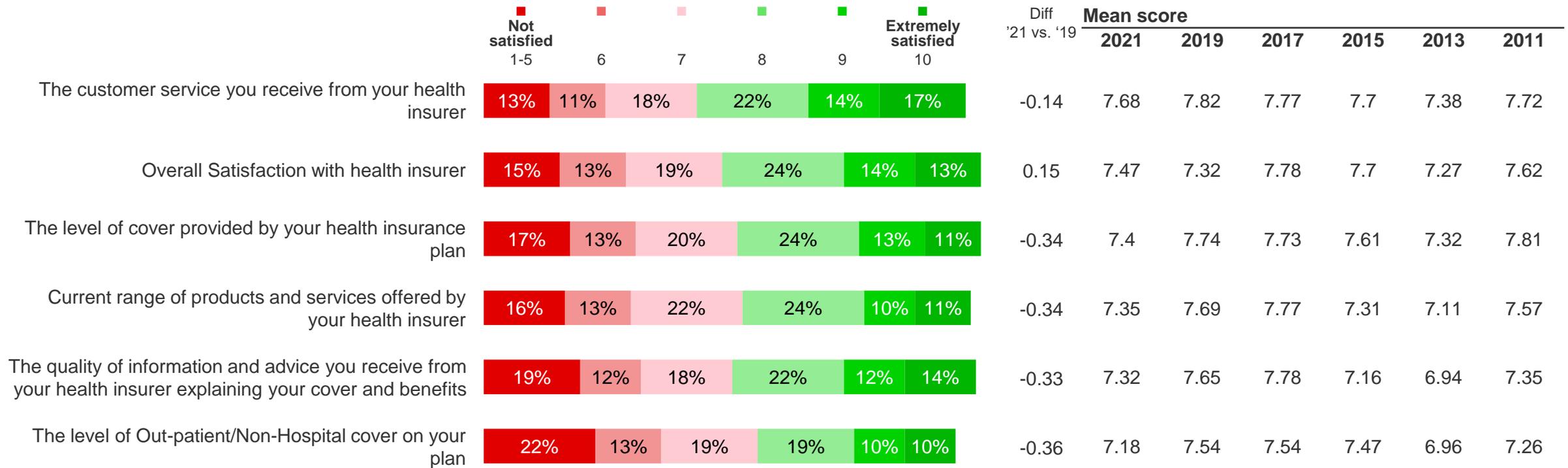
Just over two thirds claim to understand their level of insurance cover very/quite well.

## Number of adults covered by policy



# Level of satisfaction with aspects of health insurance

Elements of PHI where policy holders are happiest are around customer service (a slight drop versus 2019) and level of overall satisfaction which has a marginal increase in 2021.



▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All with Health Insurance (n=1,083)

Q.31 On scale of 1 to 10 where 1 means not at all satisfied and 10 means extremely satisfied, how satisfied or dissatisfied are you with the following?

Q.32 Taking everything into consideration, how satisfied or dissatisfied are you overall with your current health insurance provider?

# Level of satisfaction with aspects of health insurance by age

Older policy holders continue to be the more satisfied.

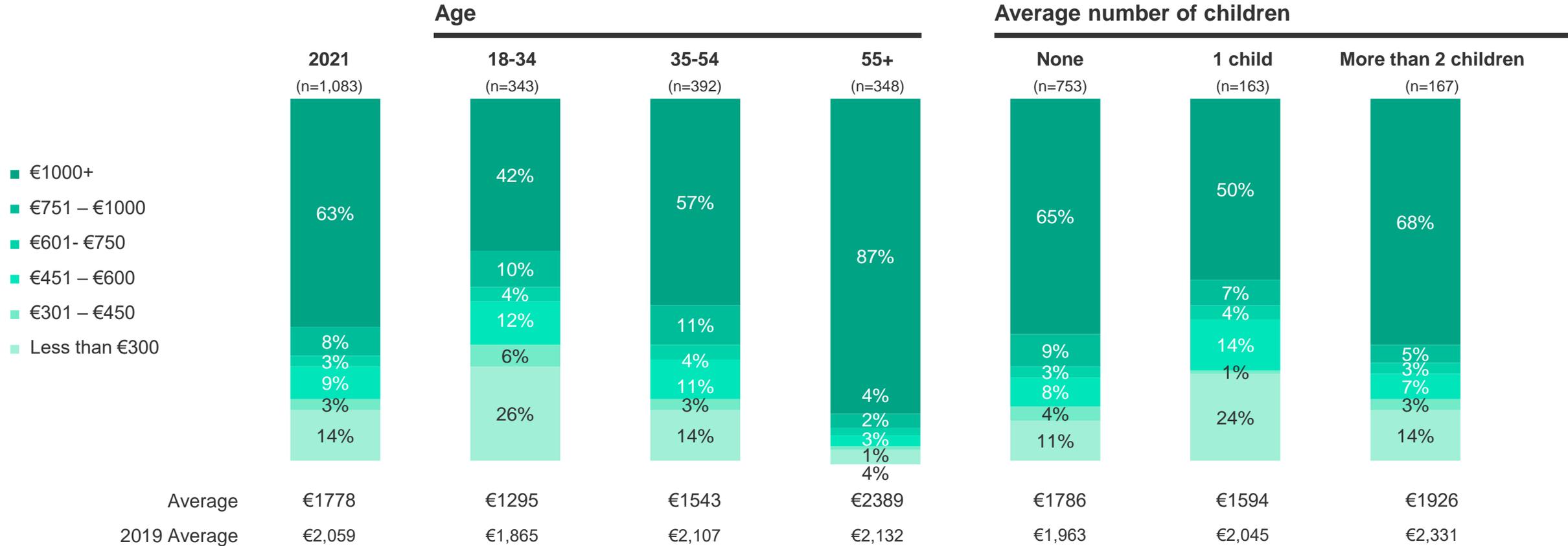
		Current range of products and services offered by PHI provider	The level of cover provided by PHI plan	The customer service you receive from your PHI provider	The quality of information & advice you receive from your PHI provider	The level of out patient/non hospital cover on your plan
<b>Total</b>		<b>7.35</b>	<b>7.4</b>	<b>7.68</b>	<b>7.32</b>	<b>7.18</b>
<b>AGE</b>	18-34	7.27	7.32	7.45	7.07	7.15
	35-54	7.25	7.28	7.6	7.21	7.11
	55+	7.51	7.56	7.95	7.64	7.26

6  
Cost



# Cost of Policy

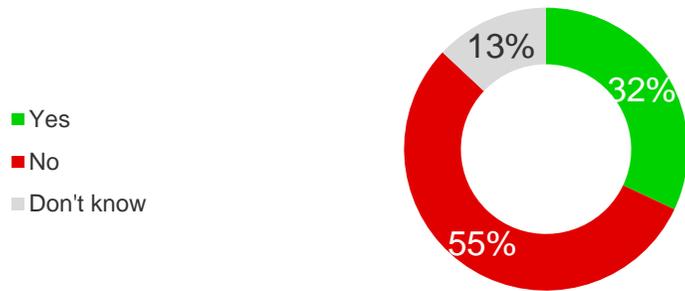
The average perceived cost of policies has reduced this year. The steepest price rise is among the under 35-54 year olds in 2021. As in previous years, the cost of policies (or level of cover) increases with age.



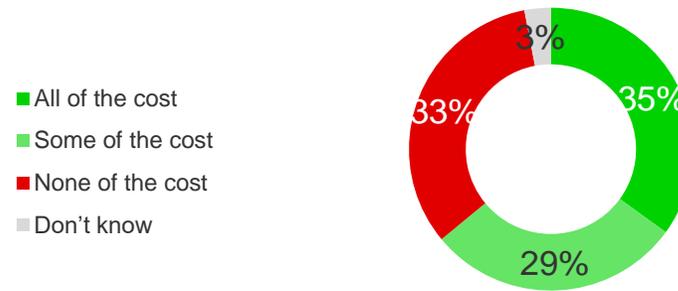
# Membership of scheme

Just over half are not part of a work scheme. For the minority that are in a work scheme, just over a third of the contribution are paid by the employer with just slightly under a third paying some of the cost. There appears to be little choice as to which health insurer is offered. Three in five claim there has been no reductions made to the amount paid by the employer.

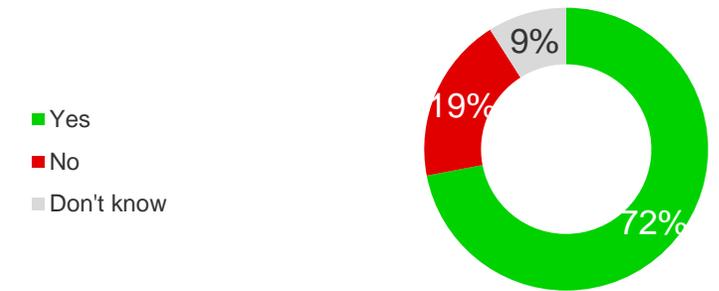
## Health insurance policy part of a work group scheme



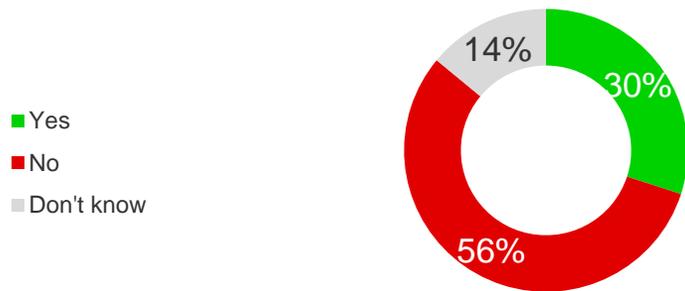
## Level of contribution



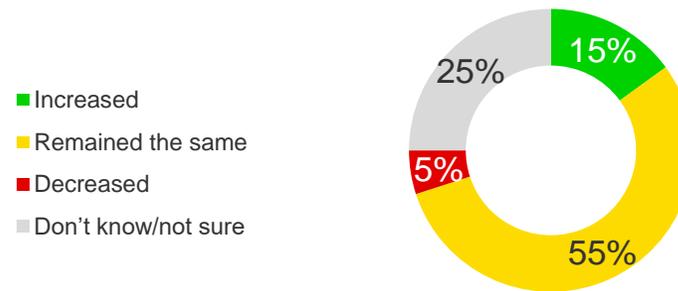
## Employer organises payment of health insurance premium through a payroll deduction system



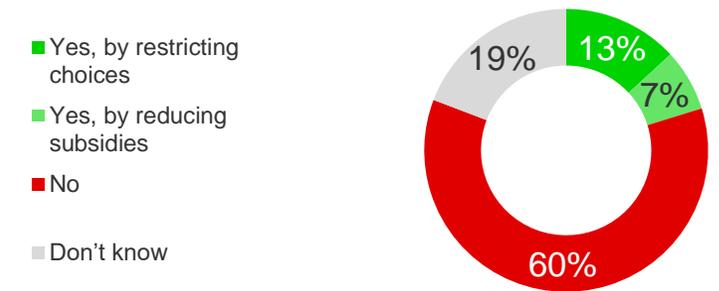
## Employer offer a choice of health insurer



## Has your employer increased or decreased the choice of Health Insurers

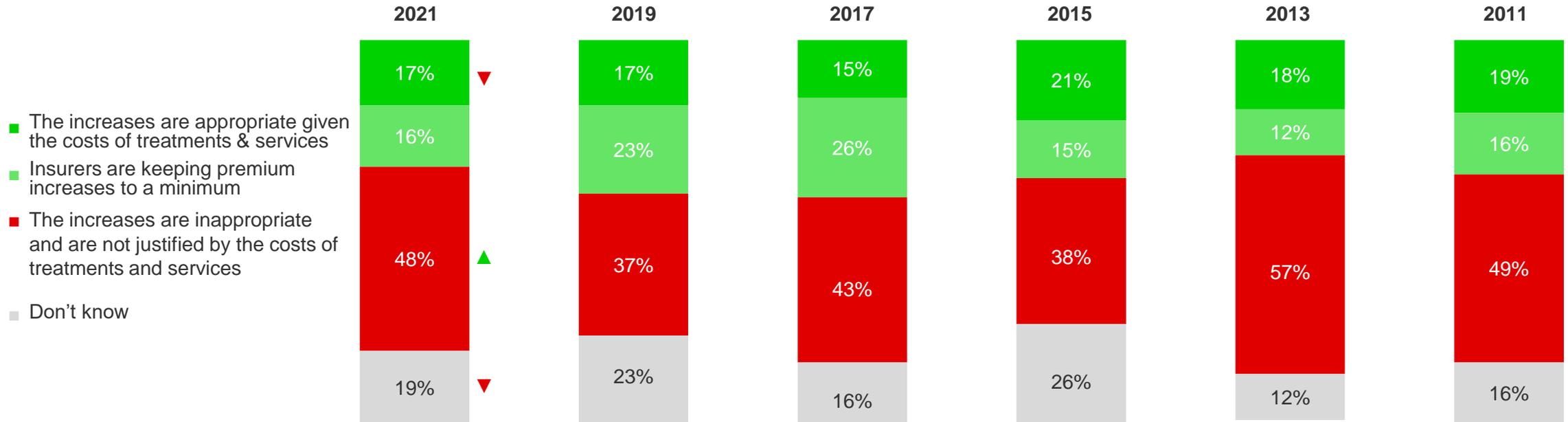


## Has your employer reduced the amount that they are prepared to pay for your health insurance



# Attitude to Premium Increases

There has been a significant decrease this year for those that believe that the increases are appropriate. The proportion believing that premium increases are unjustified shows a significant increase and returns to the levels seen in 2011.

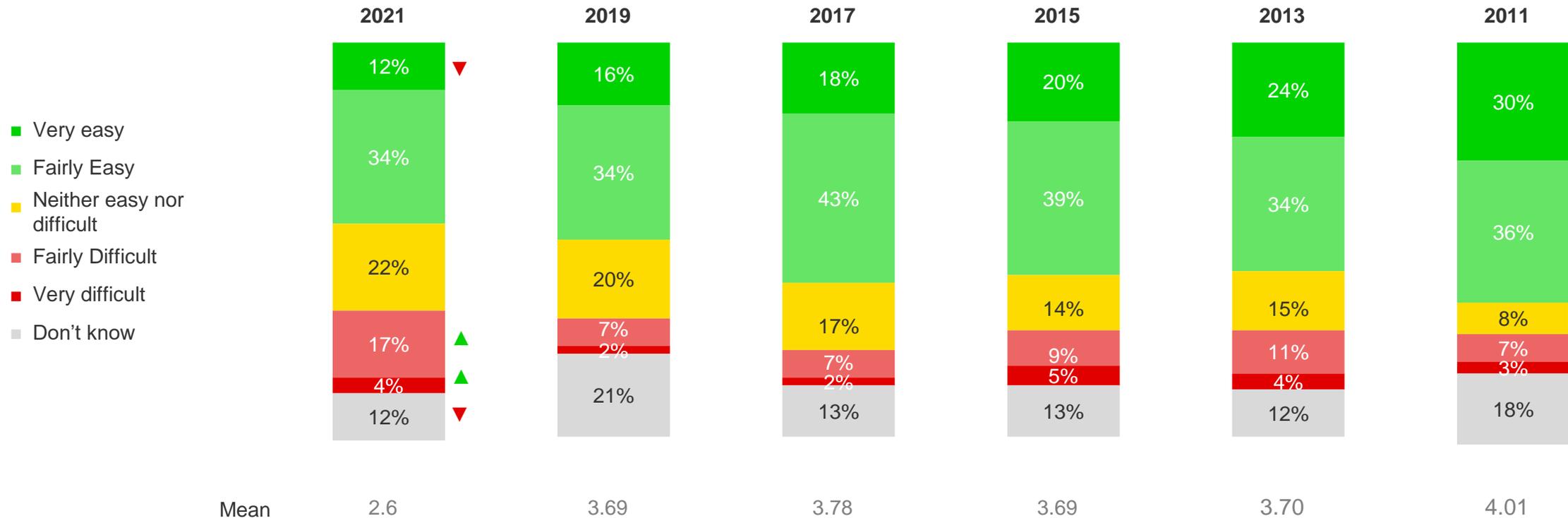


# 7 Switching and Discontinuation



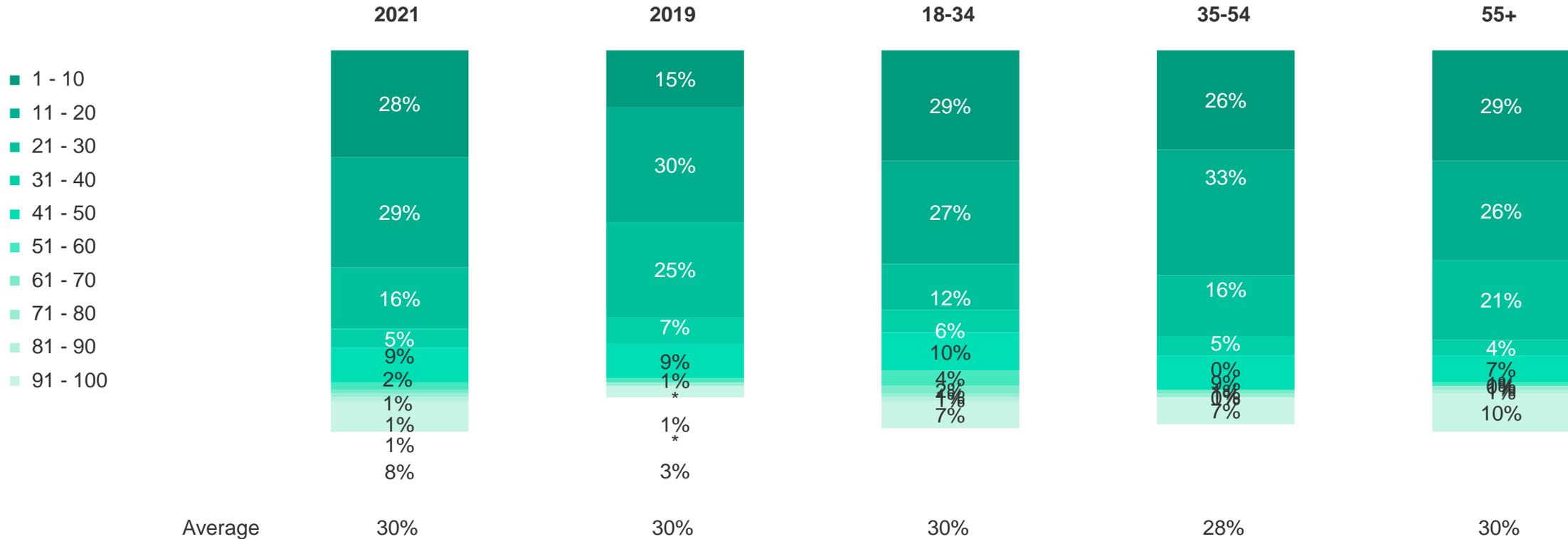
# Perception of Ease of Switching

Among those that have PHI, there has been a significant increase among those that say it is both 'fairly difficult' and 'very difficult' to switch.



# Savings made that would encourage you to switch

On average, savings of 30% are required to encourage consideration to switch, in line with previous years.



▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

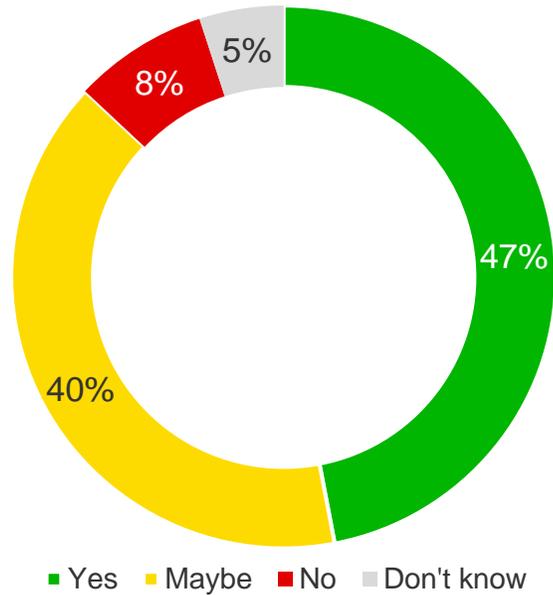
Base: All with Health Insurance (n=1,083)

Q.45 How much actual saving, in percentage do you think would be needed to encourage you to switch, to a comparable plan, with another health insurance provider?

# Incidence of considering switching from current insurer for financial or benefit gains

Both financial gains and benefits whet the appetite for switching.

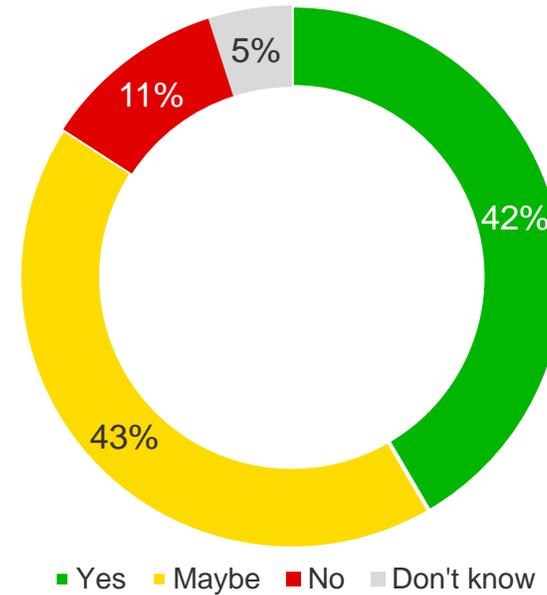
## Financial Gains



### Yes considered switching

Year	Percentage
2019	24%
2017	32%

## Benefit Gains



### Yes considered switching

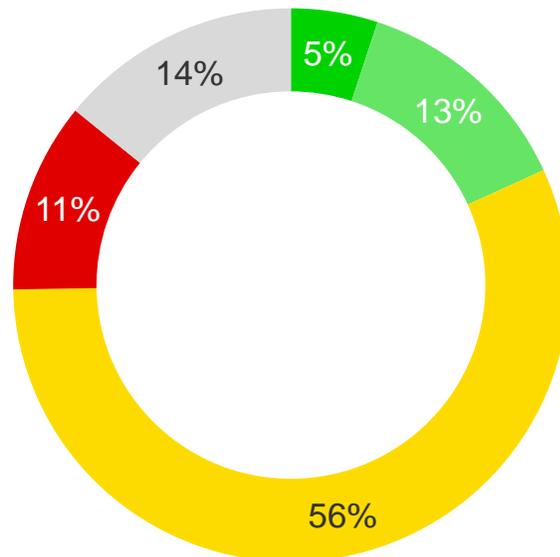
Year	Percentage
2019	23%
2017	33%

# Health Insurance: Past Action vs. Future Plans

Over half have kept their level of cover consistent and plan to stick with this for the next year.

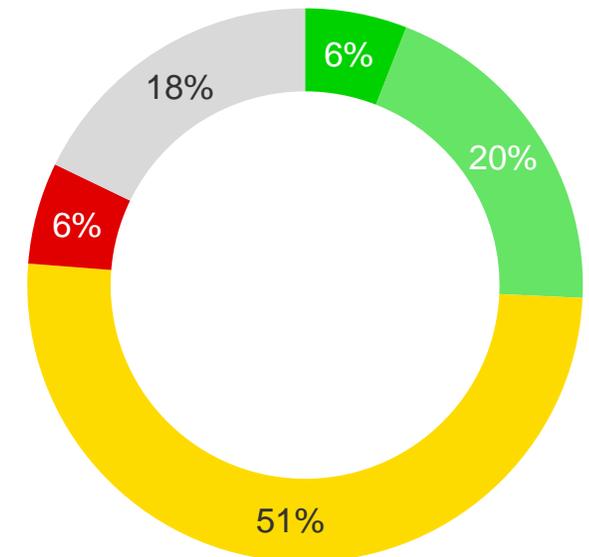
## What have consumers done in the past two years?

- Have taken out a more expensive plan with more benefits
- Have taken out a cheaper plan with the same benefits
- Have left the level of cover the same
- Have taken out a cheaper plan with less benefits
- Don't Know



## What will consumers do in the next year?

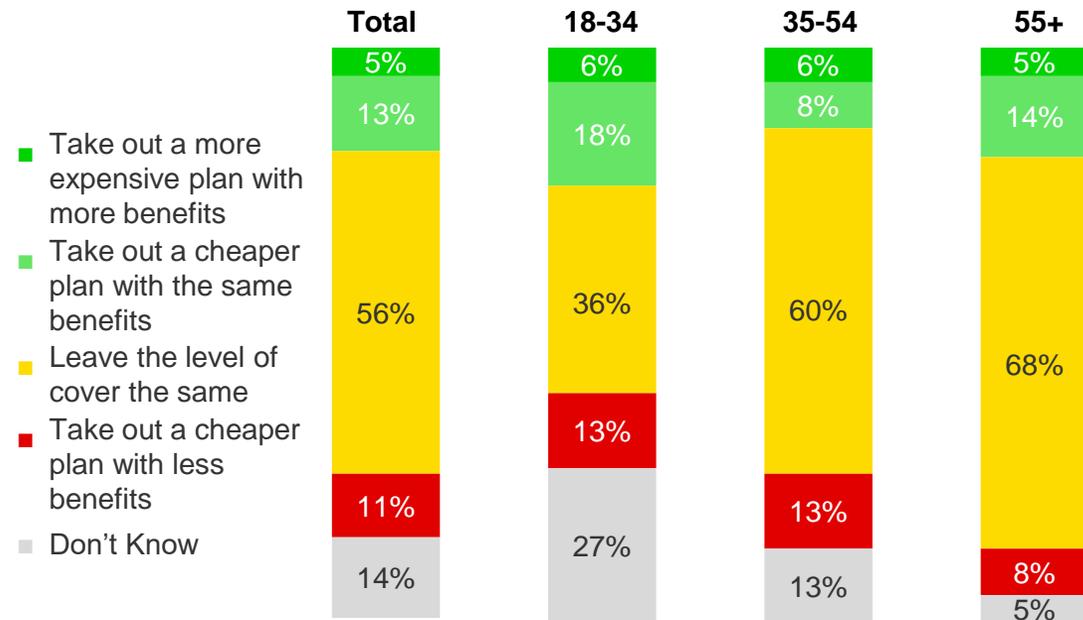
- Have taken out a more expensive plan with more benefits
- Have taken out a cheaper plan with the same benefits
- Have left the level of cover the same
- Have taken out a cheaper plan with less benefits
- Don't Know



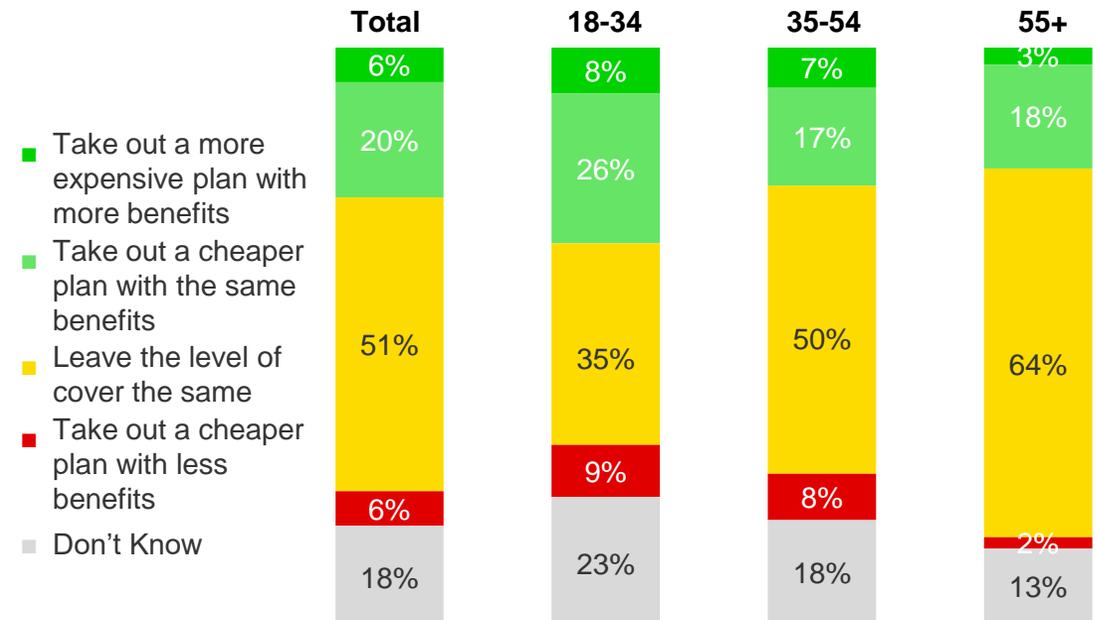
# Health Insurance: Future Plans vs Past Actions

Not unexpectedly, those aged over 55 plan to remain with the level of cover they currently have and this is in keeping with their past behaviour.

## Policy over the previous two years



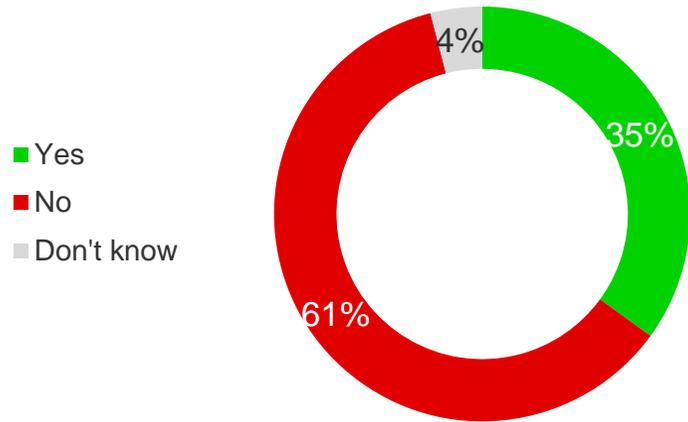
## Policy over the next year



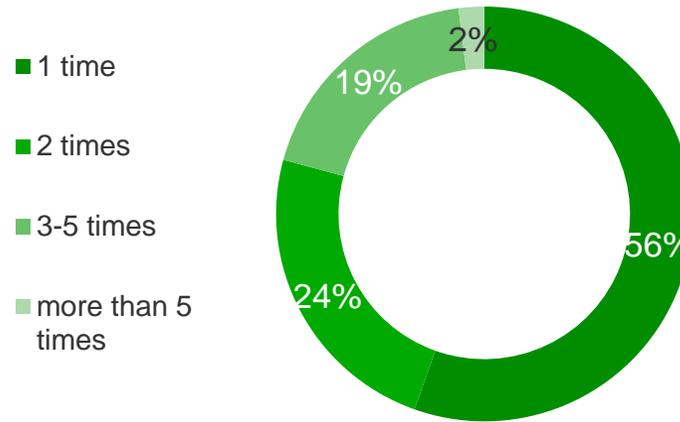
# Incidence of Ever Switching

Over one in three claim to have (ever) switched provider, higher than in recent years. Most just switch once with the bulk moving from the VHI, a similar pattern to previous years.

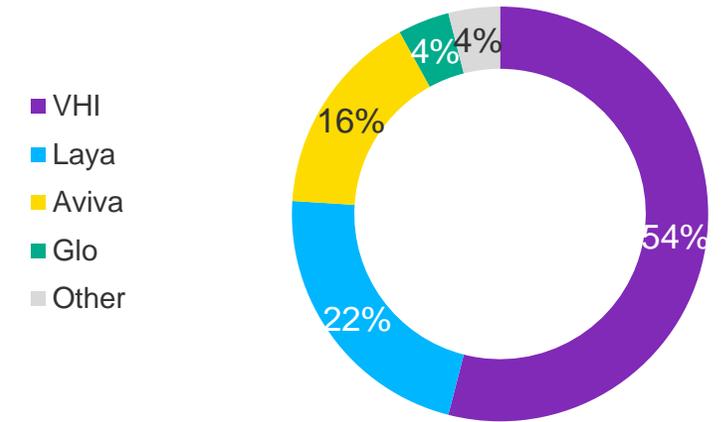
**Ever switched Providers**



**Number of times Switched**



**Most recently switched from**



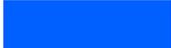
**Incidence of Switching**

2019	2017	2015	2013	2011
19%	22%	24%	20%	23%

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%  
 Base: All with Health Insurance (n=1,083) | Base: All Switchers (n=380)  
 Q.34 Have you ever switched from one health insurer in Ireland to another health insurer in Ireland?  
 Q.35 How many times have you switched private health insurers?  
 Q.36 Which insurance provider did you switch from (most recently)?

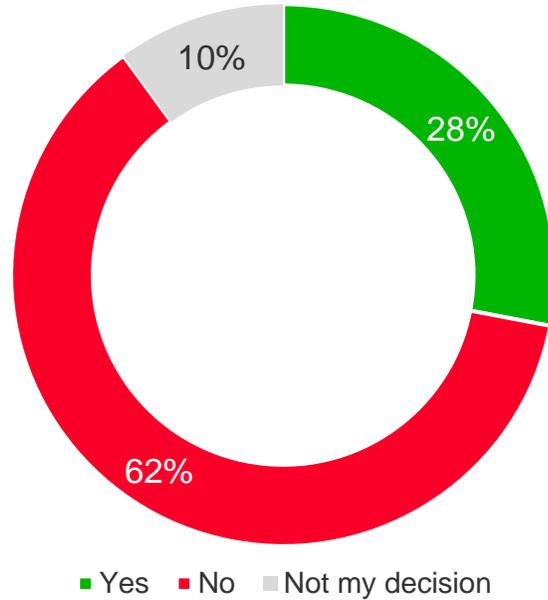
# Reasons for Switching Health Insurance Provider

Similar to previous years, cost savings are the key driver for switching along with perceived better levels of cover and service. There has been an increase this year for group scheme switches/changes.

	2021	2019	2017	2015	2013	2011
New insurer was cheaper /Cost savings	 56%	66%	54%	65%	69%	62%
**Level of cover was better/new insurer had a better product/service range	 32%	n/a	n/a	n/a	n/a	n/a
Group scheme switched	 12%	8%	8%	8%	5%	7%
*Unhappy with previous insurer	 10%	n/a	n/a	n/a	n/a	n/a
**Recommendation by friend/family member/somebody else	 9%	n/a	n/a	n/a	n/a	n/a
Changed employer	 8%	7%	2%	3%	3%	1%
Level of information and advice better	 7%	1%	8%	2%	4%	2%
**No Choice/Not my decision/Don't know	 3%	n/a	n/a	n/a	n/a	n/a
Employer no longer pays for all/some of the cost	 2%	2%	1%	1%	1%	*
Other	 2%	n/a	n/a	n/a	n/a	n/a

# Incidence of having considered switching from current PHI provider to another

Among those that have never switched, over one in four have considered doing so.



## Incidence of having Considered Switching

2019	2017	2015	2013	2011
10%	10%	13%	20%	20%

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%  
 Base: All who have never switched Health Insurance Provider (n=703)  
 Q.40 Have you ever considered switching from your current health insurance provider to another?

# Reasons for not Switching PHI Provider

In line with 2019, satisfaction with their current provider is a key driver. The lack of notable cost savings are similar to levels seen in 2017. There is also a perception that it is too much hassle to switch, and there is a fear of the complexity concerning comparing plans.

	2021	2019	2017	2015	2013	2011
Satisfied with current provider	29%	28%	46%	40%	38%	44%
No significant cost savings	19% ▼	24%	17%	23%	n/a	n/a
*I fear that I may lose some of the benefits currently offered by my provider	18% ▲	n/a	n/a	n/a	n/a	n/a
Too much hassle/paperwork	17% ▲	13%	13%	15%	n/a	n/a
Too difficult to compare plans	17% ▲	7%	6%	8%	9%	4%
Concerned that coverage would not be the same	14% ▲	6%	7%	5%	7%	n/a
Feel loyal to my current provider	13%	8%	8%	8%	10%	4%
Level of cover no better	12% ▼	18%	14%	14%	15%	13%
Work/employer looks after it	12%	9%	7%	6%	7%	8%
Concerned about waiting periods	11%	n/a	3%	-	n/a	n/a
Not my decision	11% ▼	16%	15%	9%	9%	6%
Couldn't be bothered	10%	12%	10%	11%	12%	8%
Range of products/services no better	9%	9%	11%	7%	10%	9%
Lack of information	8%	n/a	1%	1%	n/a	n/a
Still considering it/Have not made up my mind	6% ▲	1%	2%	1%	n/a	n/a
I was persuaded not to switch by my current insurer	4%	n/a	1%	-	n/a	n/a
Just joined the current policy	3%	n/a	1%	*	n/a	n/a
*Other insurer wouldn't want me/am too high risk	2%	n/a	n/a	n/a	n/a	n/a

Note: \*New statements in 2021

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All who have never switched Health Insurance Provider (n=703)

Q.42 Are there any particular reasons why you have never switched insurance provider?

8

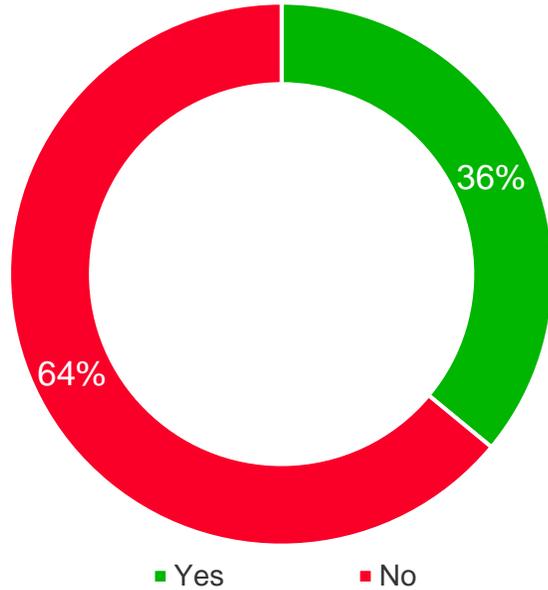
A closer look at those  
without  
Health Insurance



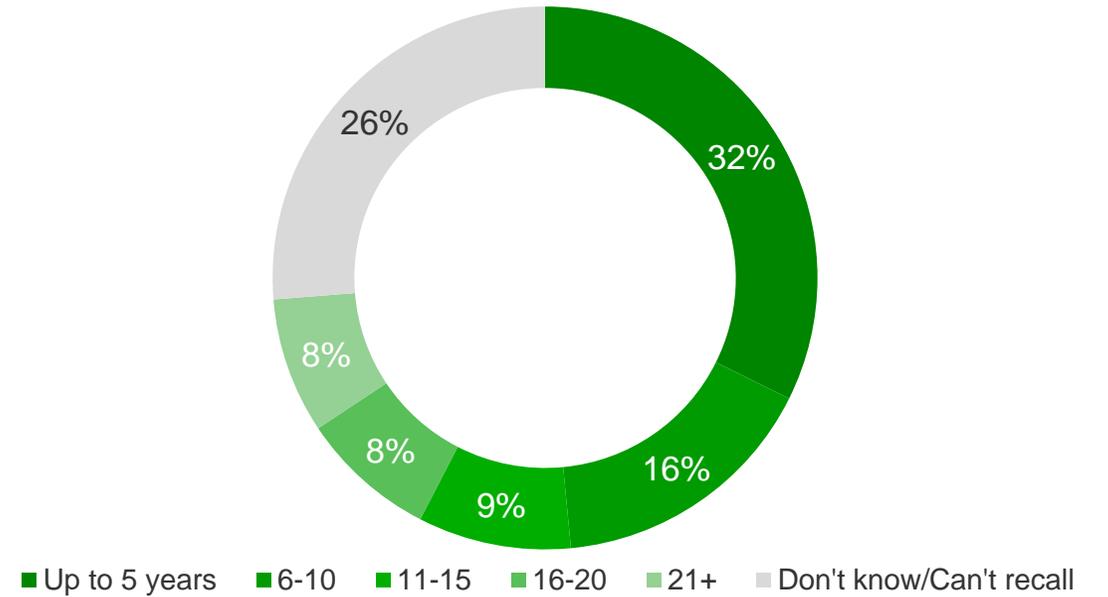
# Incidence of lapsed policies

Just over three in ten claim they previously held health insurance. Among those that did have PHI just under one in three had their PHI for up to five years, with the average duration being ten years.

**Incidence of ever being covered by Health Insurance Policy**



**Number of years Previously Held Healthy Insurance**



**Average**  
10 years

Year	2019	2017	2015	2013	2011
Percentage	14%	14%	17%	22%	22%

# Reasons for no longer having health insurance

Cost remains the most widely cited reason for people to no longer have PHI. In addition, there has been an increase in the possession of a medical card. Changes in employment status also feature.

	Main Reason	Any Reason	2019	2017	2015	2013	2011	18-34	35-54	55+
Too expensive/ Premiums too high/Can't afford it	42%	51%	51%	63%	53%	n/a	n/a	31%	54%	61%
Have a medical card	19%	33%	15%	18%	12%	12%	10%	13%	30%	53%
*Left job where employer paid insurance	6%	12%	n/a	n/a	n/a	n/a	n/a	15%	14%	8%
No longer represented value for money	8%	11%	21%	17%	11%	21%	8%	2%	11%	17%
I lost my job and had to cancel it	6%	10%	9%	15%	6%	8%	16%	7%	12%	10%
No longer provided through work	3%	9%	10%	15%	12%	6%	11%	4%	9%	12%
No longer covered by my parent's insurance	1%	7%	16%	8%	16%	n/a	n/a	20%	6%	-
Satisfied with public services	1%	6%	9%	8%	5%	3%	5%	6%	6%	6%
I have a GP Visit Card	2%	6%	5%	7%	2%	n/a	n/a	4%	4%	9%
I went abroad	2%	6%	1%	1%	n/a	n/a	n/a	15%	4%	2%
I'm healthy/Don't need it	5%	4%	4%	4%	5%	3%	5%	13%	3%	1%
Will get it when I'm older	2%	4%	3%	1%	2%	n/a	n/a	9%	2%	2%
Haven't thought about it	-	2%	1%	2%	3%	2%	4%	1%	2%	1%
Don't approve of it	-	1%	1%	1%	1%	n/a	n/a	1%	1%	-
Other, please specify	1%	1%	9%	7%	12%	10%	6%	1%	-	1%
Don't know	2%	1%	1%	1%	1%	n/a	n/a	1%	1%	-

Note: \*New statement in 2021

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

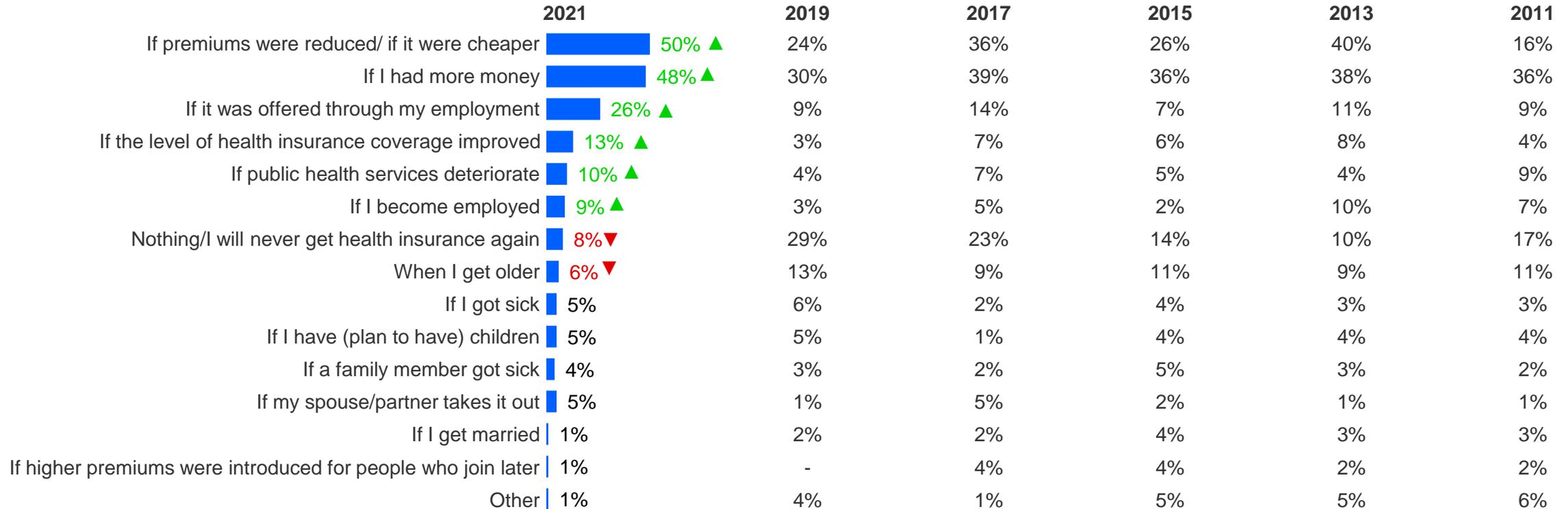
Base: All who were previously covered by Health Insurance (n=337)

Q.6 What are the reasons why you no longer have health insurance?

Q.7. And what is the main reason why you no longer have health insurance?

# Drivers to take out Health Insurance again

Unsurprisingly, decreasing premiums or reduced costs would drive consideration up.



▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%

Base: All who were previously covered by Health Insurance (n=337)

Q.8 What factors, if any, would lead you to take out private health insurance again?

# Reasons for never having health insurance

As with those that indicate that cost is the main reason for not restoring their PHI, this is also the key reason among those that say they have never had PHI. The availability of a medical card is another driver up significantly this year.

	Main Reason	Any Reason	2019	2017	2015	2013	2011	18-34	35-54	55+
Too expensive/ Premiums too high/Can't afford it	52%	60% ▼	66%	64%	59%	67%	54%	51%	65%	60%
Have a medical card	23%	37% ▲	31%	27%	31%	29%	25%	26%	34%	52%
Satisfied with public services	5%	12%	12%	16%	12%	12%	11%	9%	12%	16%
Haven't thought about it	5%	12% ▼	19%	16%	13%	15%	16%	19%	13%	3%
I'm healthy/Don't need it	6%	6% ▼	9%	9%	6%	9%	7%	9%	6%	*
Will get it when I'm older	2%	5% ▼	11%	15%	12%	16%	10%	9%	7%	-
Don't approve of it	3%	3%	2%	1%	2%	2%	n/a	4%	2%	2%
Other	2%	1%	2%	2%	n/a	n/a	n/a	1%	*	2%
Don't know	2%	2%	3%	2%	4%	2%	6%	3%	2%	-

▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%  
 Base: All who have never held Health Insurance (n=580)  
 Q.9a Are there any reasons why you do not have health insurance?  
 Q.9b What is the main reason why you do not have health insurance?

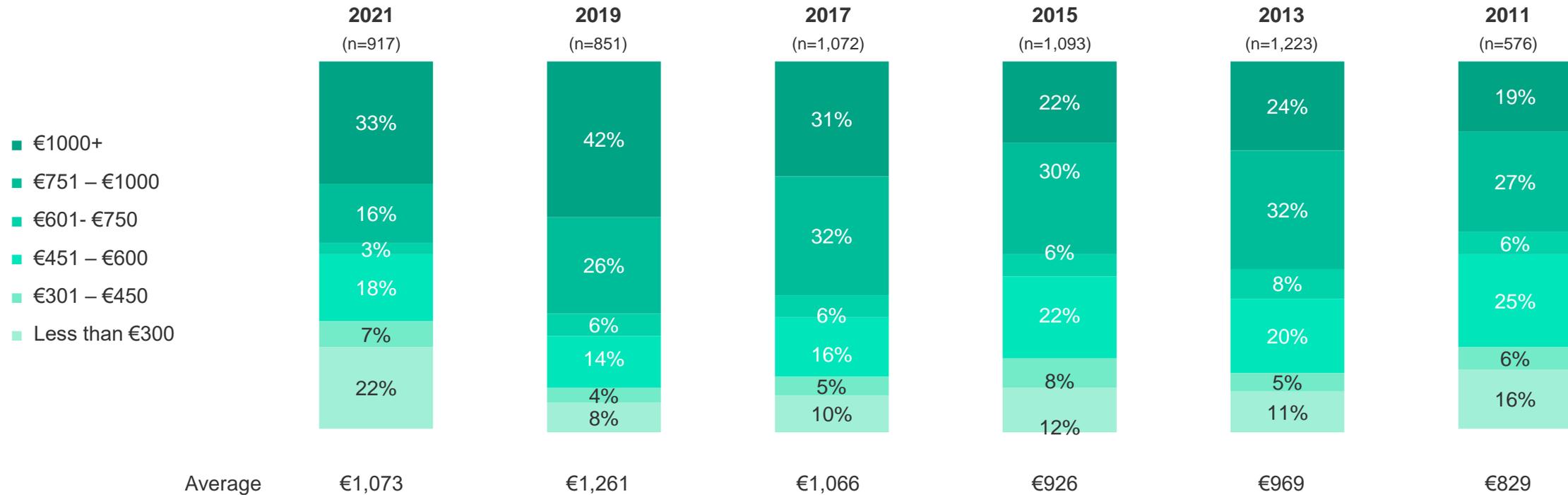
# Factors that would encourage those who never had PHI to opt for it

Access to additional finance and lower premiums would entice this group. The proportion of those who will never consider health insurance has decreased.

	2021	2019	2017	2015	2013	2011
If I had more money	31%	36%	27%	28%	31%	27%
If premiums were reduced/ if it were cheaper	28% ▲	20%	24%	18%	22%	22%
Nothing/I will never get health insurance again	7% ▼	21%	23%	19%	17%	20%
If it was offered through my employment – and my employer was going to pay for it	6% ▼	12%	9%	3%	6%	5%
If it was offered through my employment, and my employer was going to part fund it	5% ▼	6%	6%	3%	4%	n/a
When I get older	5%	15%	16%	16%	15%	17%
If public health services deteriorate	4% ▼	7%	9%	6%	8%	4%
If I become employed	3%	5%	6%	3%	6%	n/a
If I got sick	2% ▼	7%	4%	7%	11%	6%
Other,	1% ▼	3%	1%	2%	2%	3%
Don't know	8%	n/a	n/a	n/a	n/a	n/a

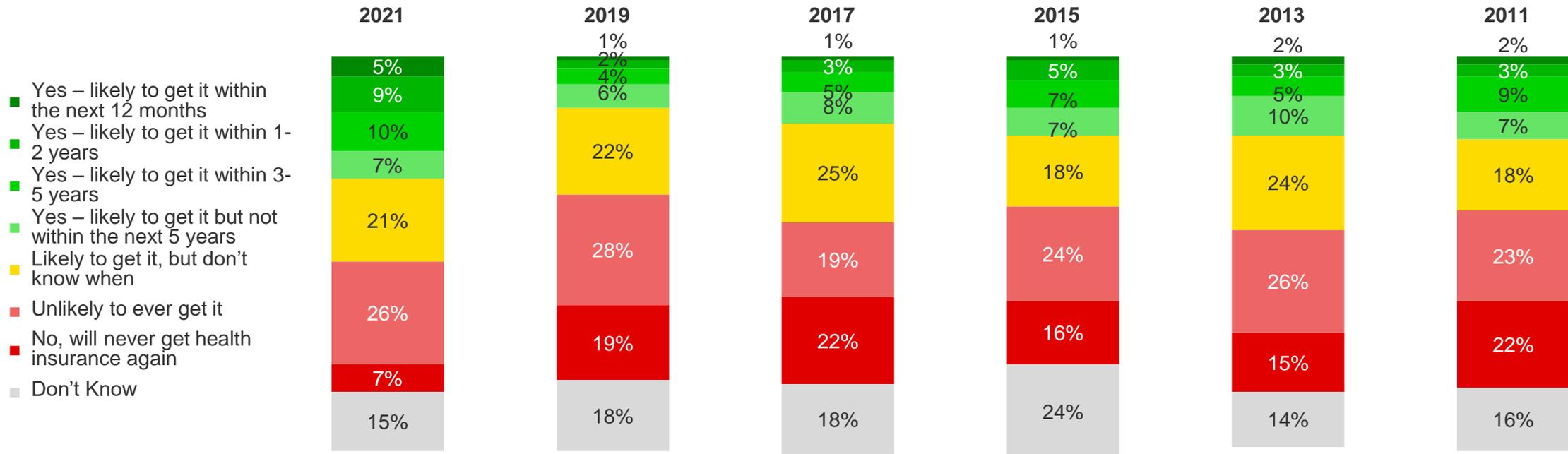
▲ ▼ Significantly Higher/Lower vs Previous Year Same Period at 95%  
 Base: All who have never held Health Insurance (n=580)  
 Q.10 What, if anything, would encourage you to get health insurance?

# Perception of annual cost of health insurance per adult (among those without PHI)



# Future intentions for Health Insurance

There appears to be an increased appetite to purchase PHI within the medium to short term (5 years). Those 'sitting on the fence' ('likely but don't know when') remains steady this year.

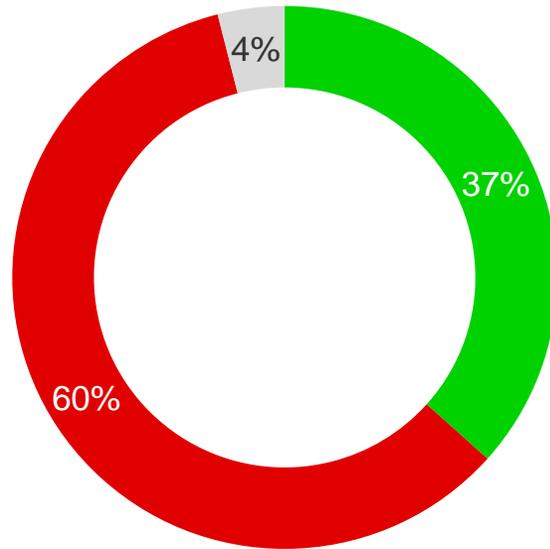


# Awareness of Lifetime Community Rating

Just under four in ten claim to have heard of Lifetime Community Rating, with half saying that Lifetime Community Rating will not entice them to take out health insurance.

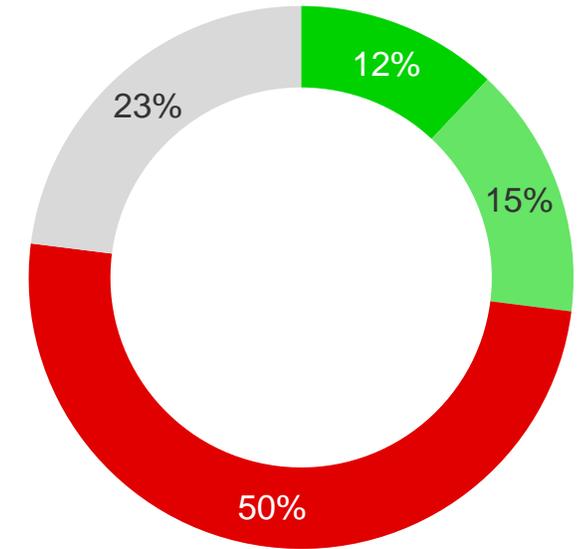
## Heard of the Lifetime Community Rating

- Yes, have heard of it
- No, have not heard of it
- Don't know



## Likelihood of take out health insurance

- Yes, will make me much more likely to take out health insurance
- Yes, will make me a little more likely to take out health insurance
- No, will make no difference
- Don't know/no opinion

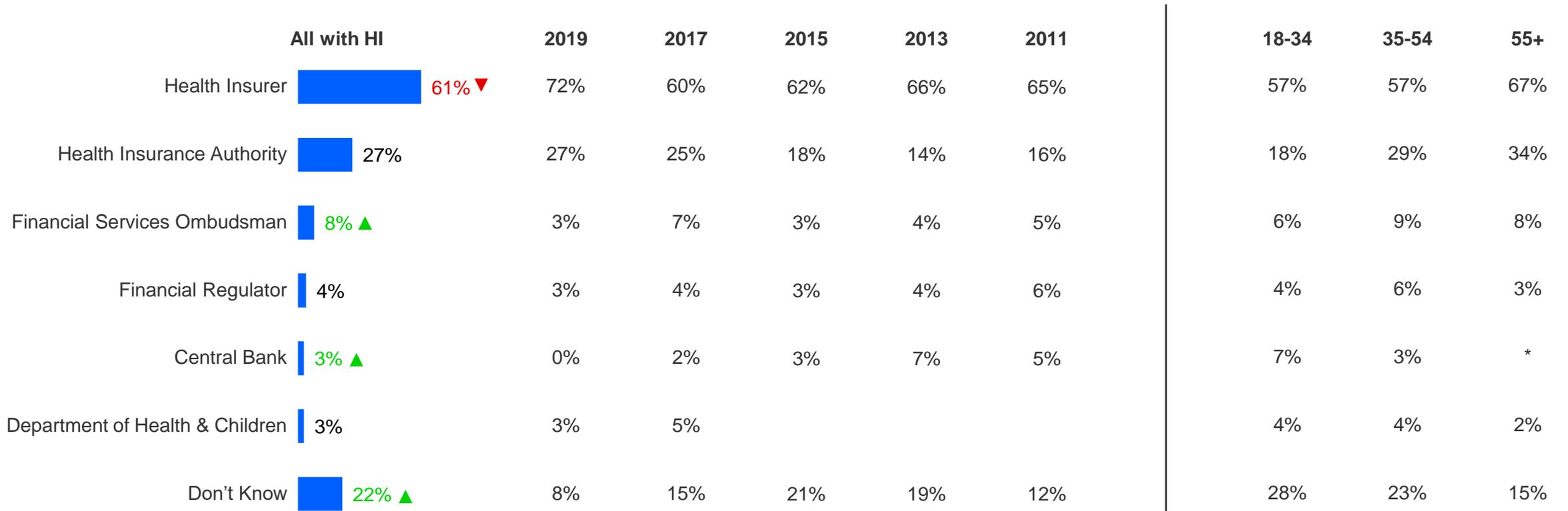


9  
Health Insurance  
Authority



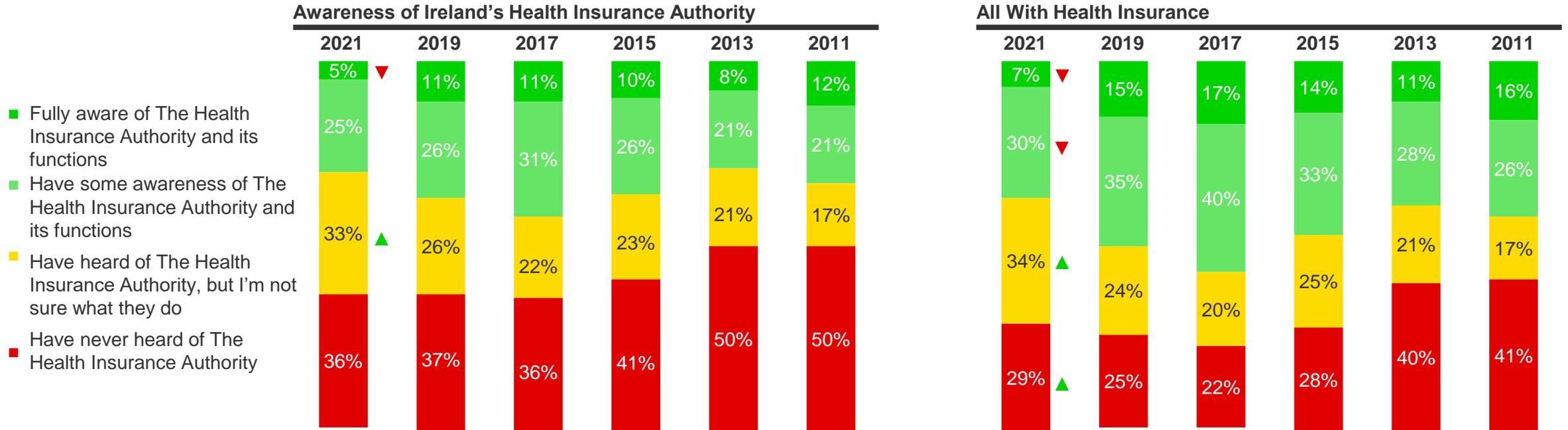
# Who to approach to seek advice or help if a problem with health insurance occurs

Health insurers remain the first point of call for problems albeit with a significant decline this year. Those claiming they would seek help from the HIA remains steady since 2019, particularly for the over 55's. We see more reliance on the Financial Services Ombudsman, albeit off a small base.



# Awareness of Ireland's Health Insurance Authority

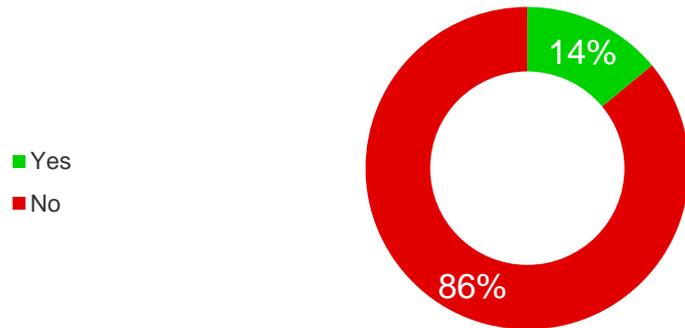
Level of awareness is lower ('fully aware') than the last measure. There is an increase among those who say they have heard of the Health Insurance Authority but they are not sure what they do. Among those with health insurance there is a decline in awareness of the HIA's function.



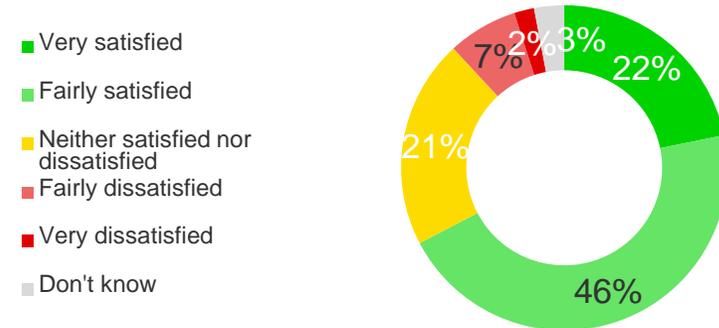
# Use of Health Insurance Authority's comparison tool & Website, helpline

The majority have not used the HIA comparison tool. Among users, high levels of satisfaction are reported with the tool (68% T2B). Just over one in three are 'extremely likely' or 'very likely' to view the website for information and just over a quarter are extremely/very likely to consider using the HIA helpline.

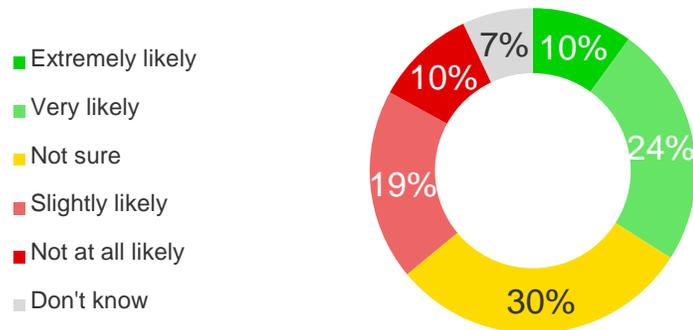
**Used the Health Insurance Authority's comparison tool**



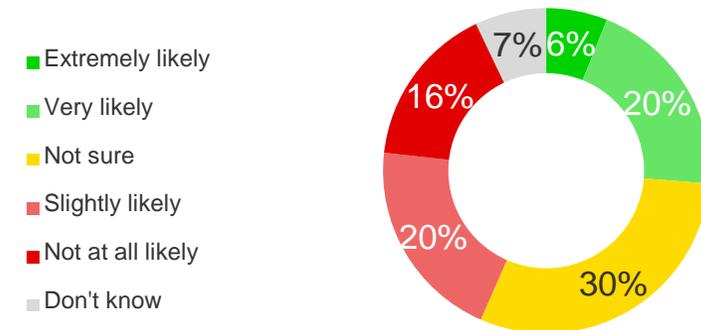
**Satisfaction with the comparison tool**



**Likelihood to consult the HIA website for consumer information**



**Likelihood to consult the HIA consumer helpline**



# 10 Appendix



# Agreement with statements about health insurance by demographics

Even among those without Private Health Insurance, there is a strong recognition (46%) that PHI is a necessity and not a luxury, suggesting that if they could afford it, they would purchase it.

		PHI is a necessity not a luxury	Having PHI means always getting better level of health care service	Having PHI means you can skip the queues	Consumers are adequately protected in the PHI market in Ireland	PHI is only for the wealthy
	<b>Total Agree %</b>	<b>61%</b>	<b>58%</b>	<b>58%</b>	<b>25%</b>	<b>46%</b>
<b>GENDER</b>	Male	61%	61%	59%	27%	42%
	Female	62%	56%	58%	22%	49%
<b>AGE</b>	18-24	59%	54%	42%	29%	39%
	25-34	56%	52%	54%	23%	47%
	35-44	55%	58%	57%	25%	51%
	45-54	60%	56%	61%	22%	49%
	55-64	65%	58%	66%	24%	45%
	65+	73%	69%	64%	26%	40%
<b>SOCIAL CLASS</b>	ABC1	64%	59%	59%	27%	44%
	C2DE	59%	57%	59%	23%	49%
	F	63%	66%	51%	26%	34%
<b>Total Policy Holders</b>		<b>75%</b>	<b>63%</b>	<b>53%</b>	<b>31%</b>	<b>31%</b>
<b>PEOPLE WITH PHI</b>	18-34	66%	54%	47%	31%	35%
	35-54	70%	61%	55%	30%	33%
	55+	87%	71%	58%	32%	24%
<b>Total Non-Policy Holders</b>		<b>46%</b>	<b>54%</b>	<b>64%</b>	<b>18%</b>	<b>63%</b>
<b>PEOPLE WITHOUT PHI</b>	18-34	44%	52%	53%	18%	55%
	35-54	47%	54%	62%	19%	64%
	55+	45%	54%	76%	15%	68%

Base: All Adults Aged 18+ (n=2,000) |

Q.54 I am now going to read out a number of statements people have made about health insurance, and I would like you to say to what extent you agree or disagree with each statement...

# Agreement with statements about health insurance by demographics

		There is adequate information to enable me to compare plans on offer from different health insurers	I will always have PHI	There is no need for PHI in Ireland, public services are adequate	PHI is good value for money	Only old people and sick people need PHI	There is no need for health insurance if Sláintecare is implemented in full
	<b>Total Agree %</b>	<b>33%</b>	<b>41%</b>	<b>15%</b>	<b>27%</b>	<b>13%</b>	<b>28%</b>
<b>GENDER</b>	Male	34%	44%	16%	28%	15%	31%
	Female	32%	38%	15%	26%	11%	26%
<b>AGE</b>	18-24	39%	42%	23%	41%	21%	27%
	25-34	30%	42%	15%	27%	13%	23%
	35-44	36%	33%	17%	25%	14%	27%
	45-54	30%	33%	15%	22%	10%	28%
	55-64	34%	44%	12%	26%	9%	31%
	65+	33%	57%	13%	28%	13%	33%
<b>SOCIAL CLASS</b>	ABC1	35%	52%	15%	32%	12%	27%
	C2DE	32%	31%	17%	23%	13%	28%
	F	34%	53%	9%	22%	19%	36%
<b>Total Policy Holders</b>		<b>39%</b>	<b>74%</b>	<b>12%</b>	<b>42%</b>	<b>14%</b>	<b>28%</b>
<b>PEOPLE WITH PHI</b>	18-34	38%	66%	17%	43%	19%	26%
	35-54	40%	68%	14%	41%	12%	30%
	55+	38%	86%	6%	41%	13%	27%
<b>Total Non-Policy Holders</b>		<b>27%</b>	<b>4%</b>	<b>19%</b>	<b>10%</b>	<b>11%</b>	<b>29%</b>
<b>PEOPLE WITHOUT PHI</b>	18-34	28%	10%	19%	17%	13%	23%
	35-54	27%	4%	18%	9%	13%	25%
	55+	26%	1%	22%	7%	8%	41%

Base: All Adults Aged 18+ (n=2,000) |

Q.54 I am now going to read out a number of statements people have made about health insurance, and I would like you to say to what extent you agree or disagree with each statement...



Thank You

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