

How many Americans are uninsured?

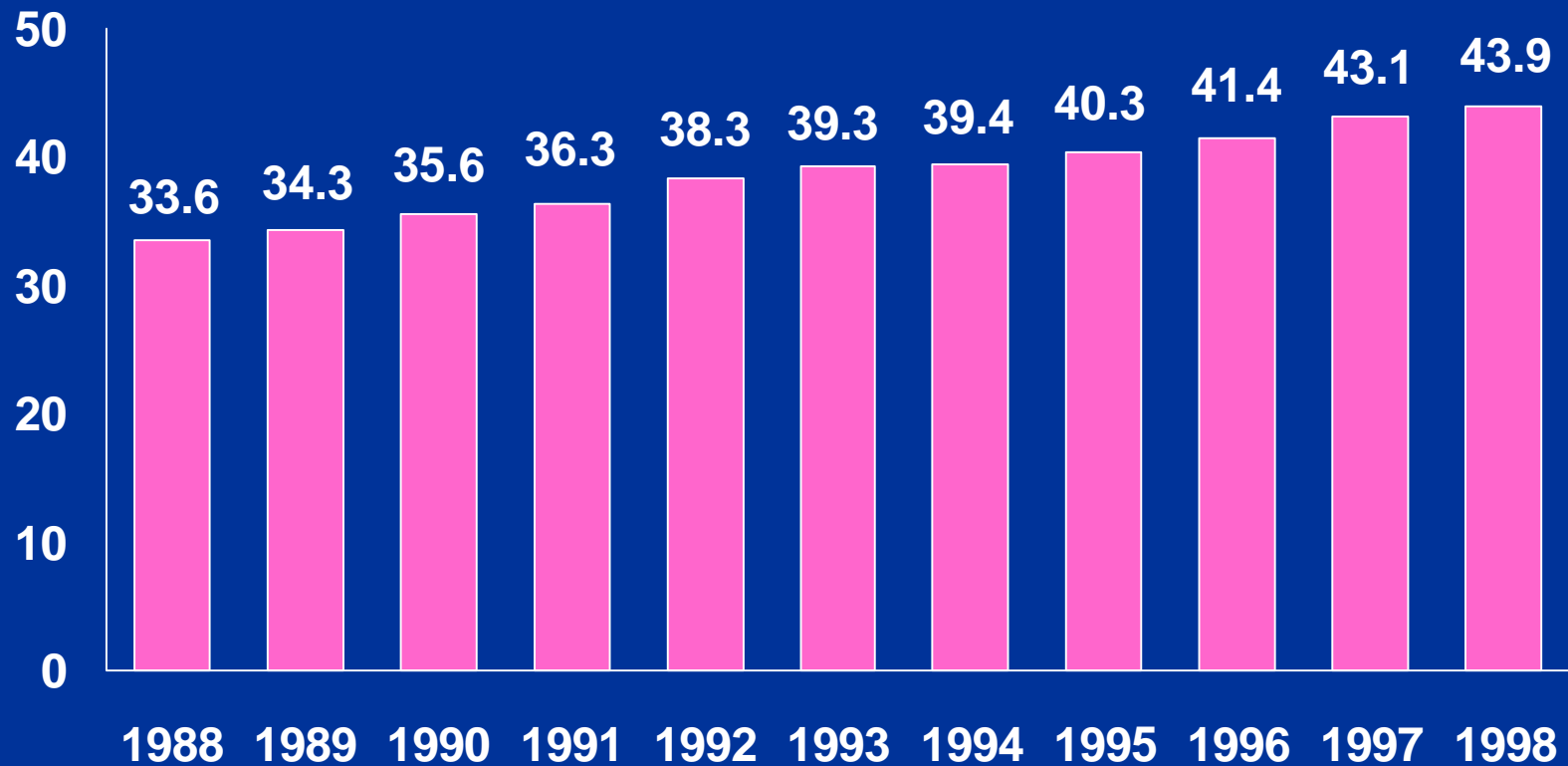
How many Americans are uninsured?

- The number of uninsured continues to grow--- 44 million Americans were uninsured in 1998. (Figure 1)
- Erosion of employer-based coverage was offset in part by Medicaid expansions in the 1990s; in today's robust economy, employer-based coverage has stabilized, but Medicaid coverage is now declining. (Figure 2 and Figure 3)

Figure 1

Growth in the Number of Uninsured Americans, 1988-1998

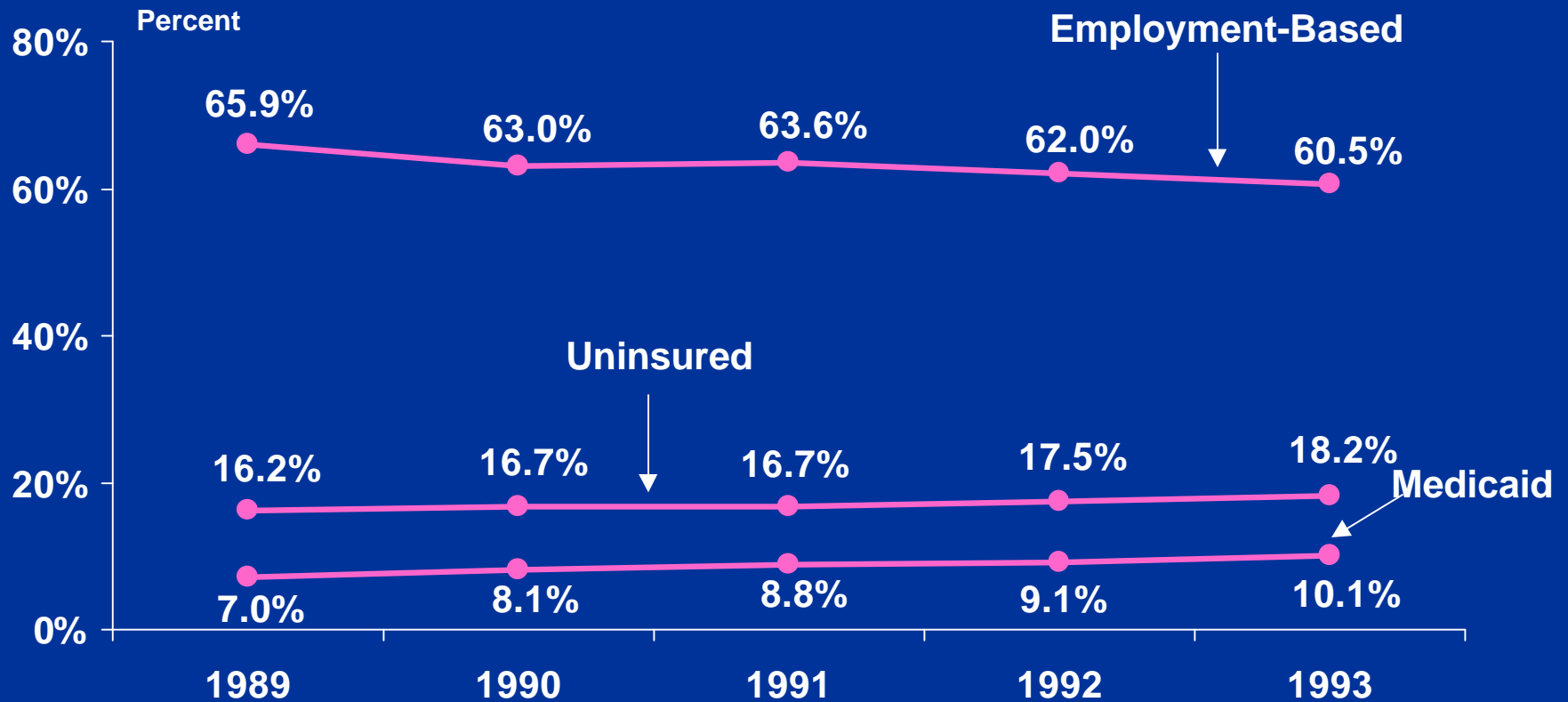
Millions of Nonelderly Uninsured



SOURCE: Employee Benefits Research Institute, *EBRI Notes*, 1999.
Data: Current Population Surveys (March).

Figure 2

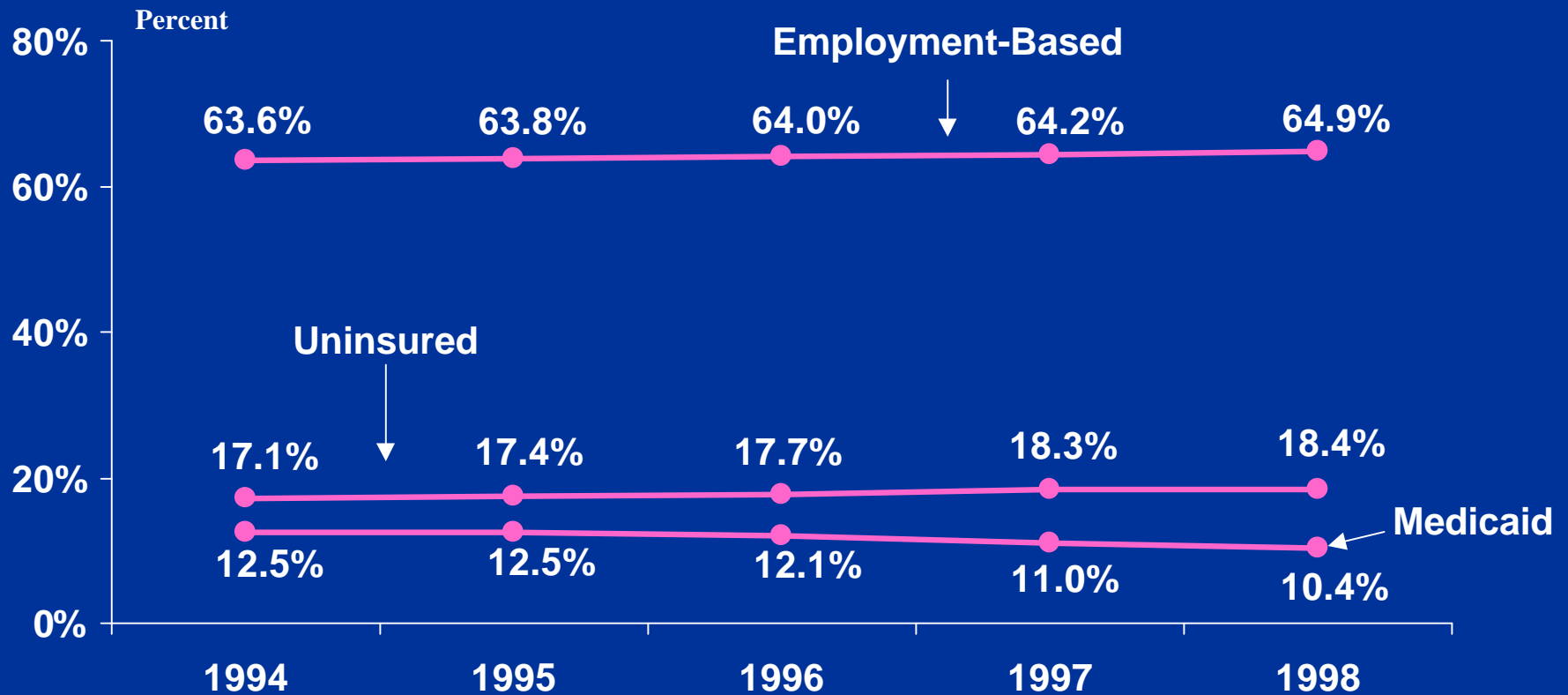
Trends in Coverage for the Nonelderly Population, 1989-1993



SOURCE: Urban Institute, 1999; unpublished
DATA: CPS, March 1990-1994

Figure 3

Trends in Coverage for the Nonelderly Population, 1994-1998



SOURCE: Urban Institute, 1999; unpublished
DATA: CPS, March 1995-1999

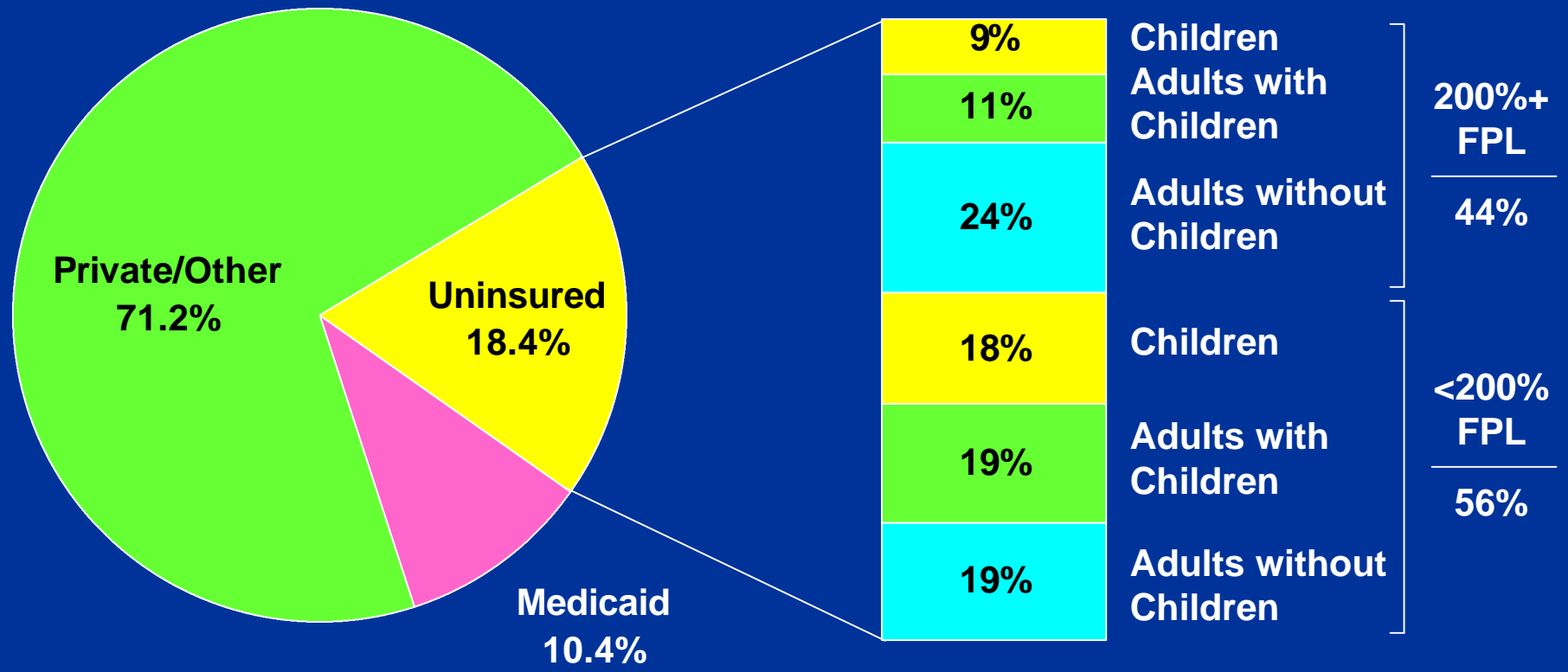
Who are the uninsured?

Who are the uninsured?

- 18% of nonelderly Americans under age 65 are uninsured---over half have incomes below 200% of poverty, or \$32,900 for a family of four in 1998. (Figure 4)
- Low-income Americans have the greatest risk of being without insurance; one in three poor Americans are uninsured. (Figure 5)
- Over half (56%) of the uninsured have low-incomes (below \$32,900 for a family of four in 1998) (Figure 6), yet 3 out of 4 of America's uninsured live in families with one or more full-time workers. (Figure 7)
- Nearly half of the 44 million uninsured are racial or ethnic minorities--over a third of Hispanics and nearly a quarter of blacks and Native Americans are uninsured. (Figure 8)

Figure 4

Insurance Coverage of the Non-Elderly Population, 1998

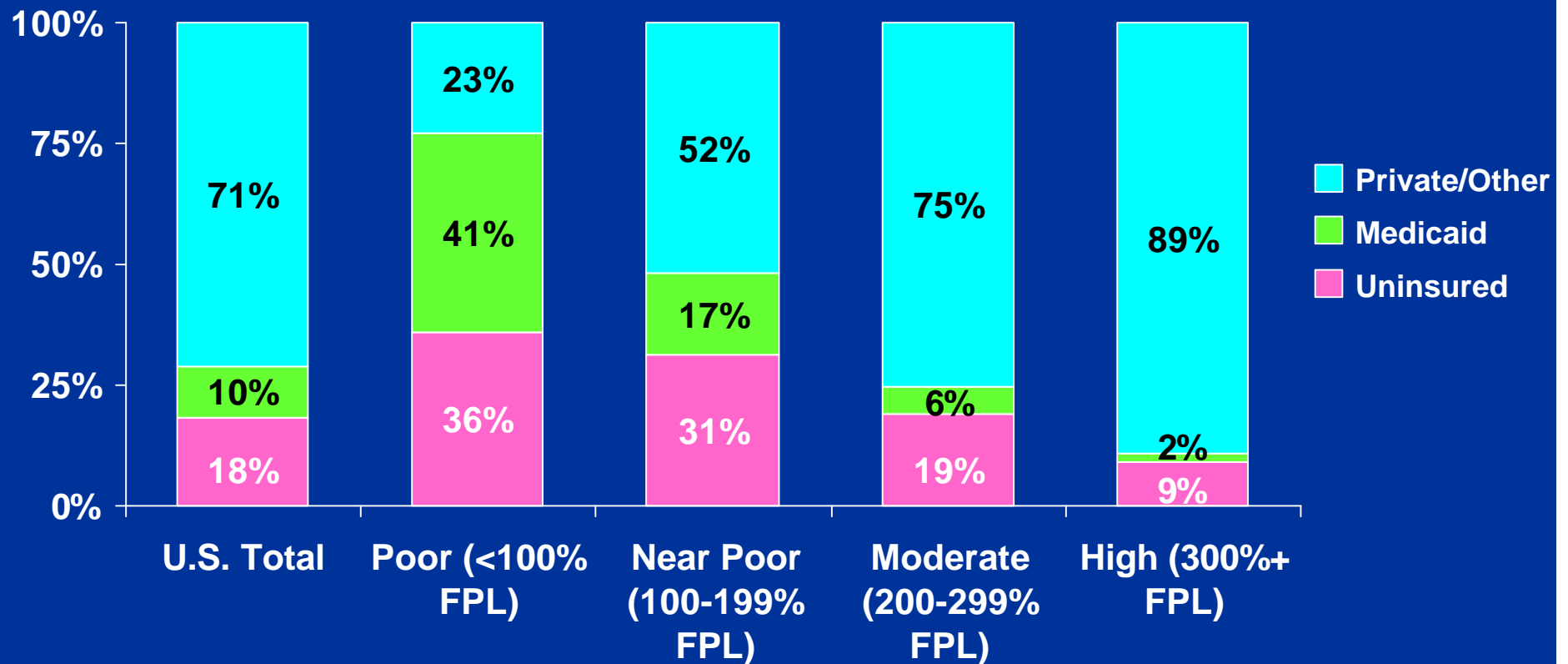


Total = 239 million

SOURCE: Urban Institute, 1999; unpublished
DATA: Current Population Survey, March 1999

Figure 5

Health Insurance Coverage by Poverty Level, 1998



Note: The federal poverty level for a family of three in 1998 was \$13,650.

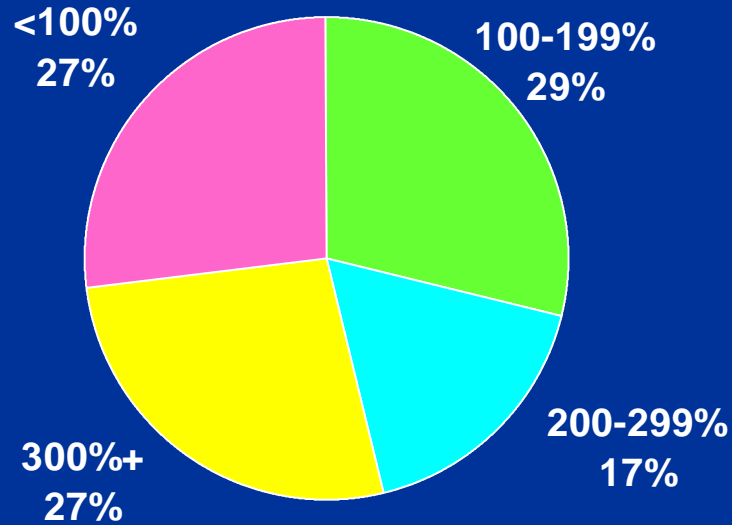
SOURCE: Urban Institute, 1999; unpublished

DATA: Current Population Survey, March 1999

Figure 6

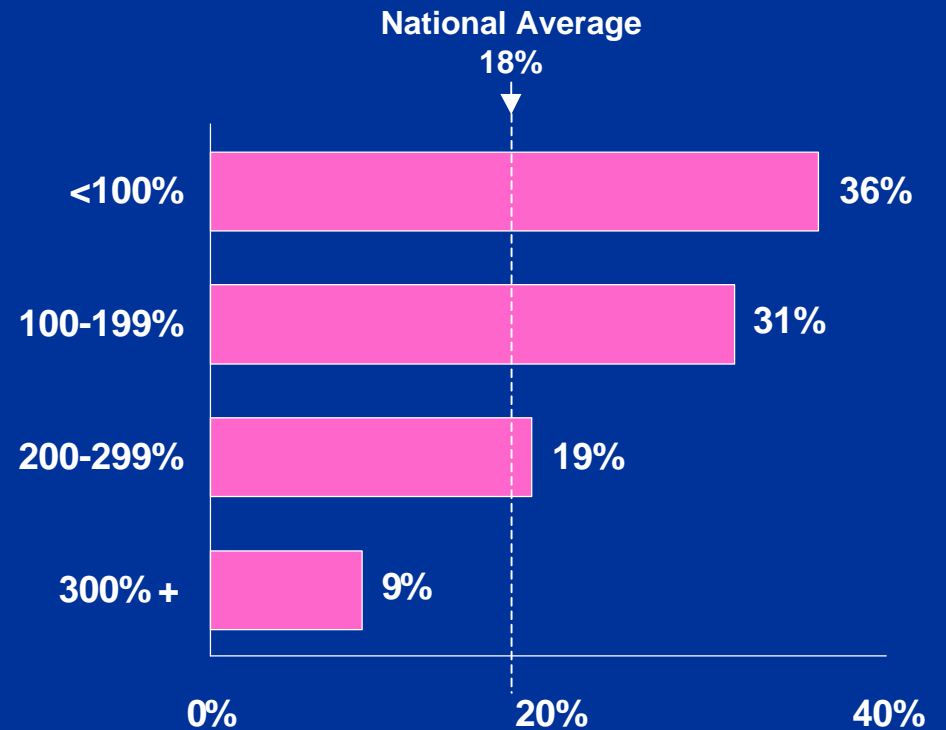
The Nonelderly Uninsured, by Poverty Level, 1998

Distribution by Poverty Level



Total = 44 Million

Risk of Being Uninsured

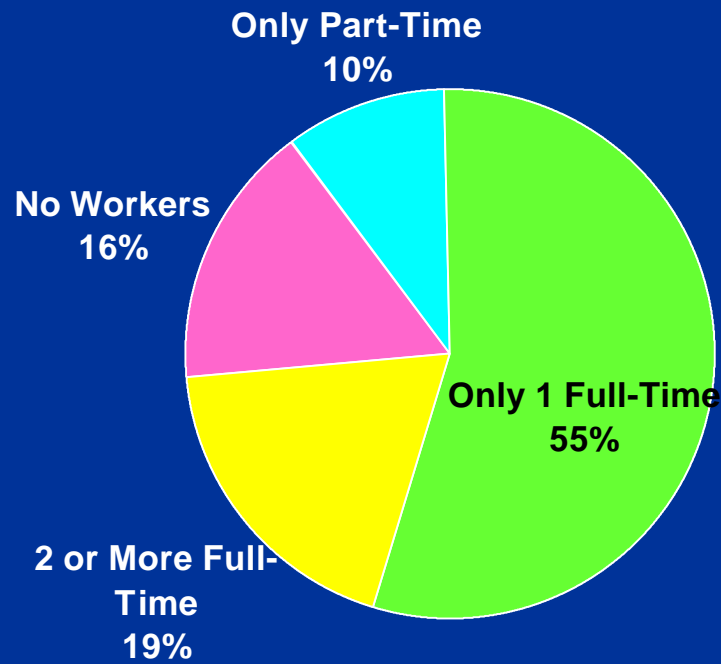


Note: The 1998 federal poverty level for a family of 3 was \$13,650
SOURCE: Urban Institute, 1999; unpublished
Data: Current Population Survey, March 1998

Figure 7

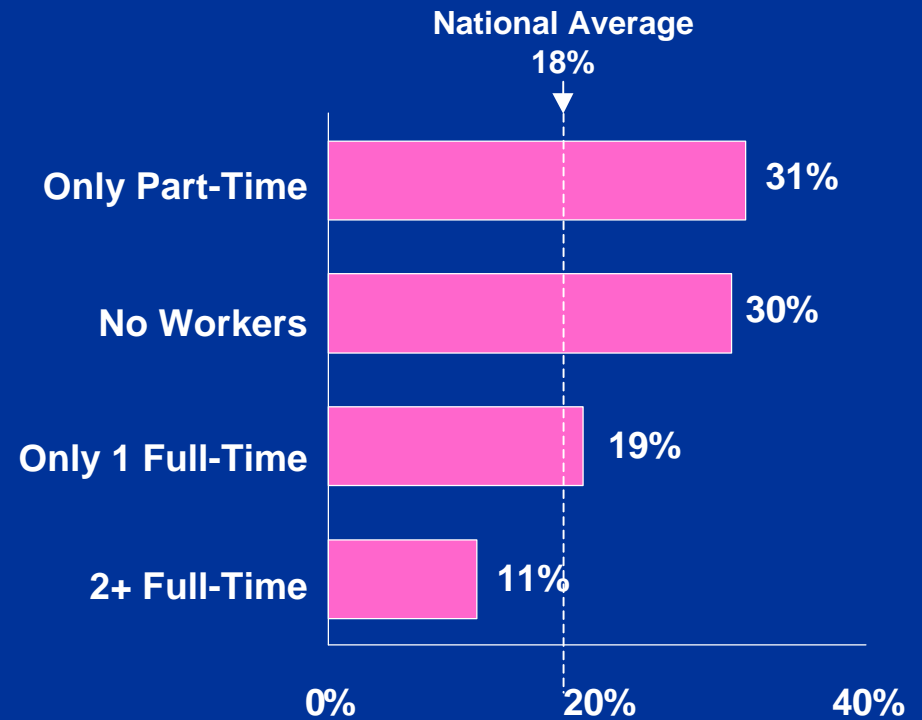
The Nonelderly Uninsured, by Family Work Status, 1998

Distribution by Family Work Status



Total = 44 Million

Risk of Being Uninsured

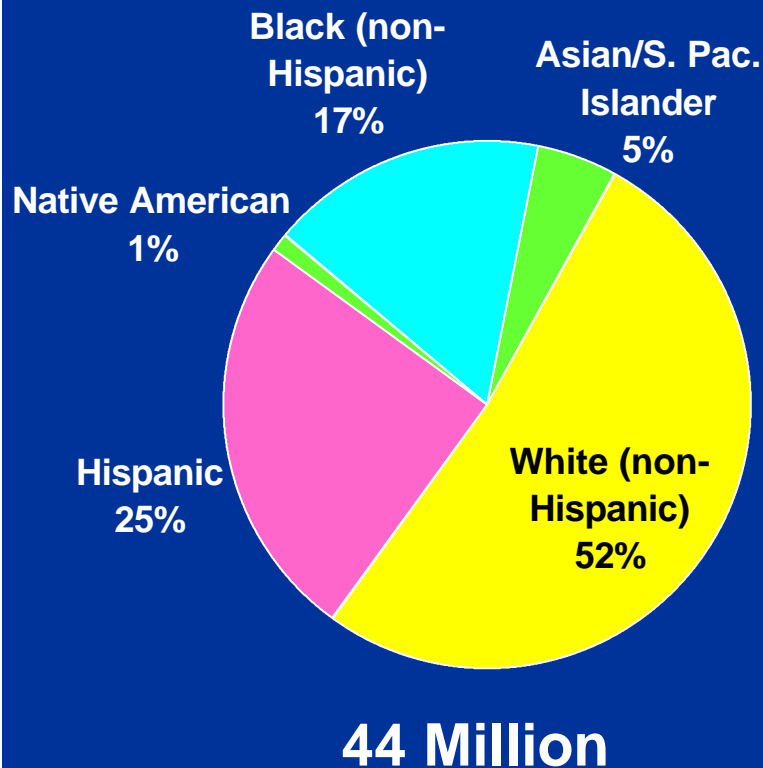


SOURCE: Urban Institute, 1999; unpublished
Data: Current Population Survey, March 1998

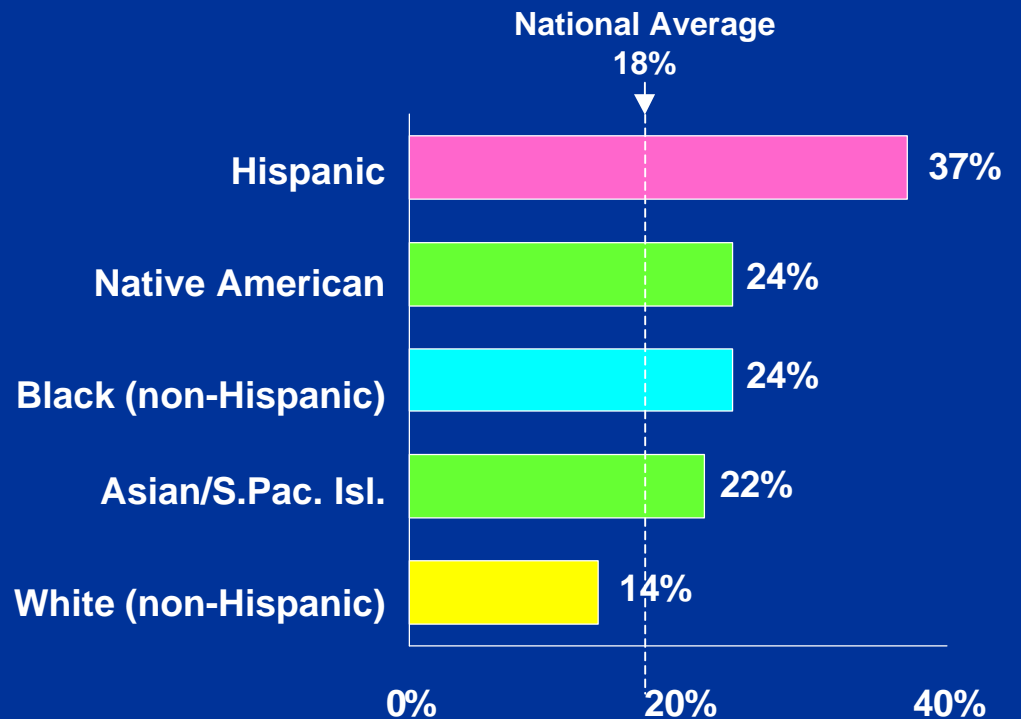
Figure 8

The Nonelderly Uninsured, by Race/Ethnicity, 1998

Distribution by Race/Ethnicity



Risk of Being Uninsured



SOURCE: Urban Institute, 1999; unpublished Data: Current Population Survey, March 1998

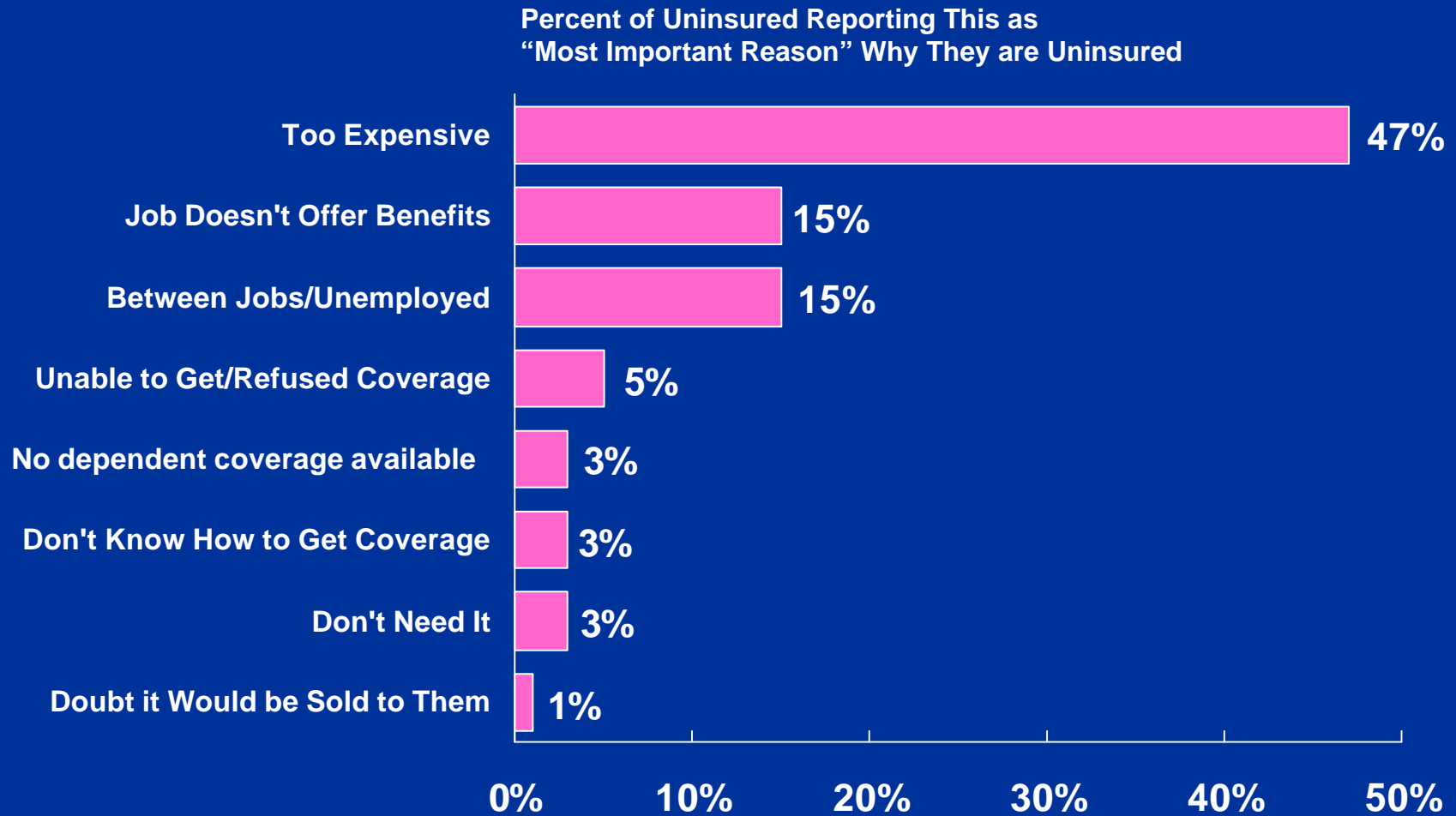
Why don't they have health insurance?

Why don't they have health insurance?

- The cost of insurance (often in excess of \$5000 a year for a nongroup family policy) is a major contributor to the lack of insurance. (Figure 9)
- Even when offered coverage in the workplace, workers bear a substantial share (on average, one quarter) of the premium. (Figure 10)
- Low-wage workers are less likely to be offered coverage in the workplace than higher-wage workers-- 45% are not offered insurance vs. 4% for higher-wage workers. (Figure 11)
- Where one works is also a factor in coverage; small firms are less likely to offer coverage to employers than large firms. (Figure 12)
- The nature of employment also matters; construction and agricultural workers are less likely to be insured than government and white-collar employees. (Figure 13)
- Residence matters because states have different economies affecting insurance coverage; in 11 states, more than 20% of the nonelderly population is uninsured. (Figure 14)
- Medicaid provides a limited safety net for working adults, but low-income eligibility levels leave adults working at minimum wage ineligible in 32 states. (Figure 15)

Figure 9

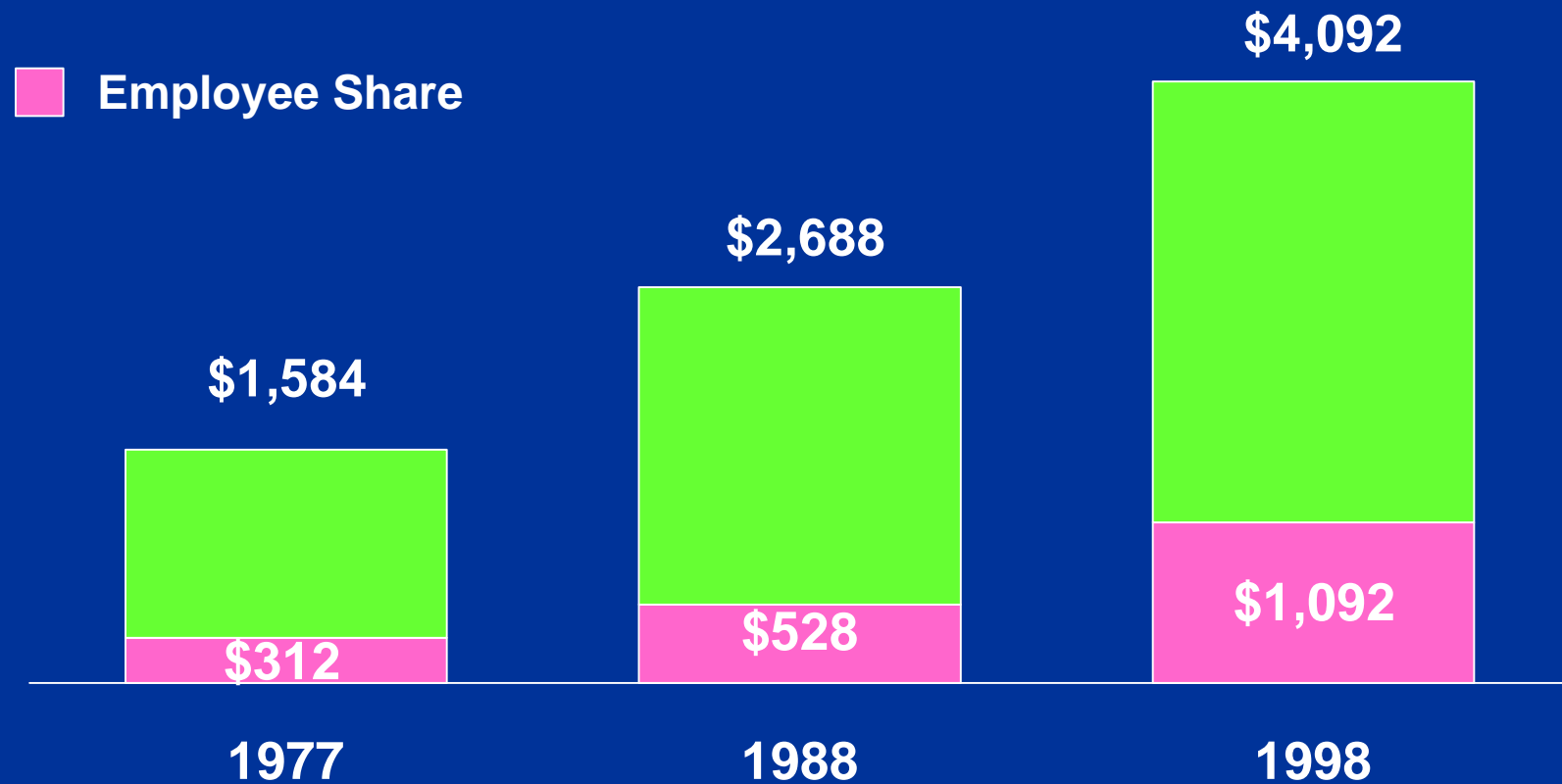
Primary Reason for Not Having Health Insurance, 2000



SOURCE: NewsHour with Jim Lehrer/Kaiser Family Foundation National Survey on the Uninsured, March 2000.

Figure 10

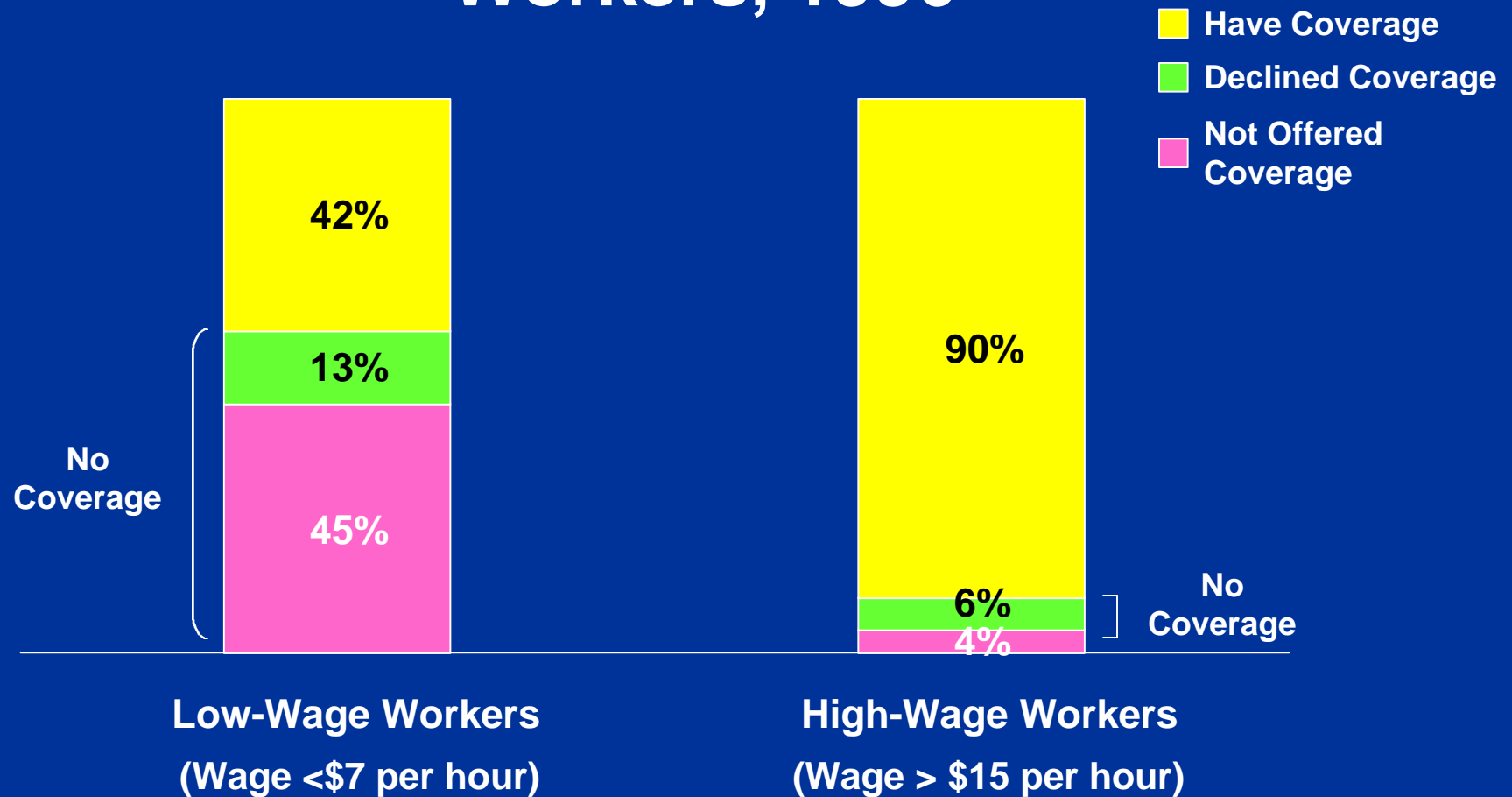
Average Annual Premium Cost Per Worker, 1977, 1988 and 1998 (In 1998 Dollars)



SOURCE: Gabel, J. 1999. "Job-Based Health Insurance, 1977-1998: The Accidental System Under Scrutiny," *Health Affairs* 18(6):62-74.

Figure 11

Access to Employer-Based Health Coverage, for Low and High Wage Workers, 1996

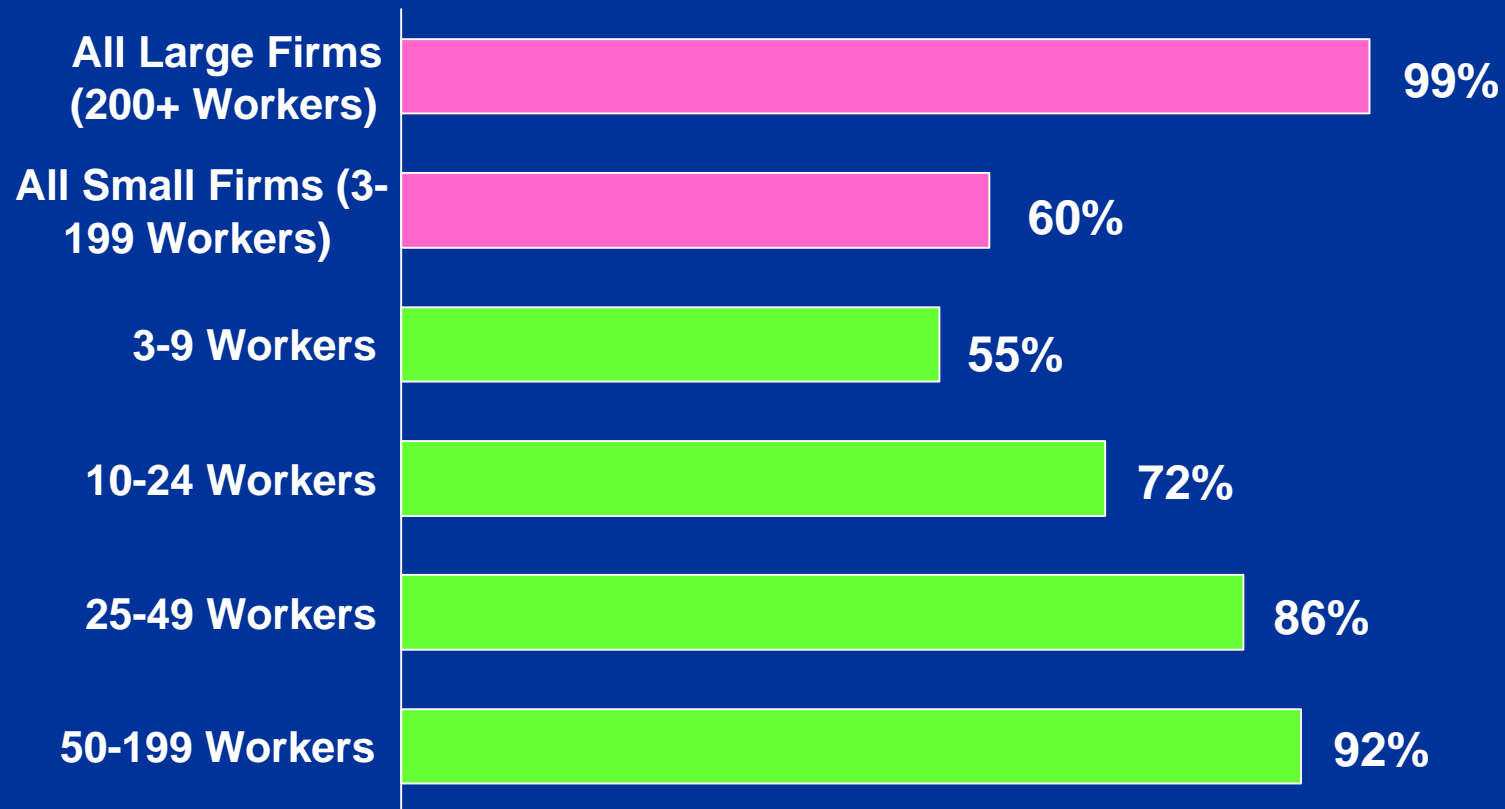


Note: Workers offered coverage from own or family member's employer.

SOURCE: O'Brien and Feder. "How Well Does the Employer-Based Health Insurance System Work for Low-Income Families." Kaiser Commission on Medicaid and the Uninsured, September 1998. Calculations based on Cooper and Schone, 1997.

Figure 12

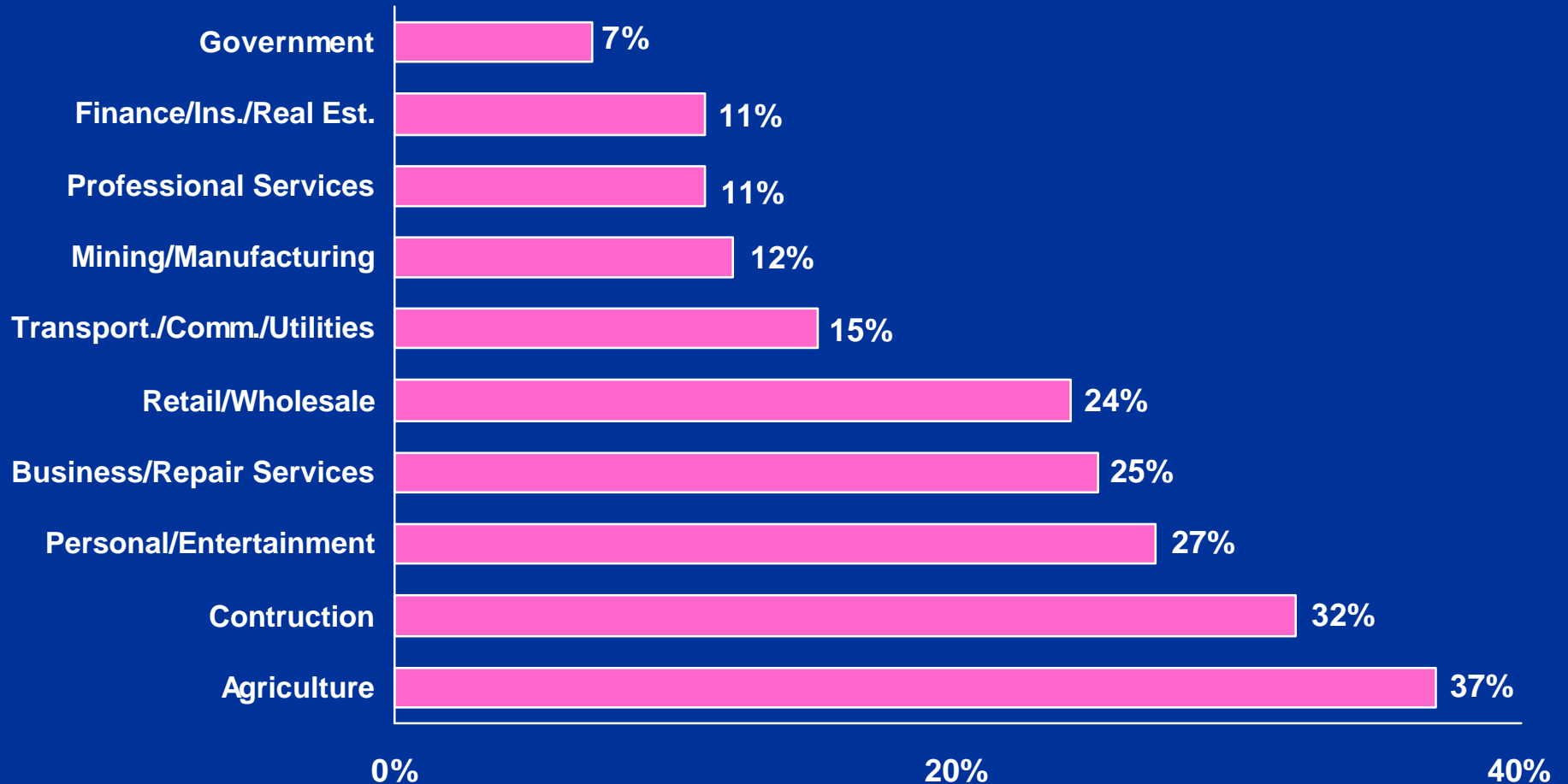
Percent of Businesses Offering Health Benefits by Size, 1999



SOURCE: KFF/HRET, 1999. *Employer Health Benefits*.
DATA: 1999 Annual Employer Health Benefits Survey

Figure 13

The Risk of Being Uninsured for Workers by Industry, 1998



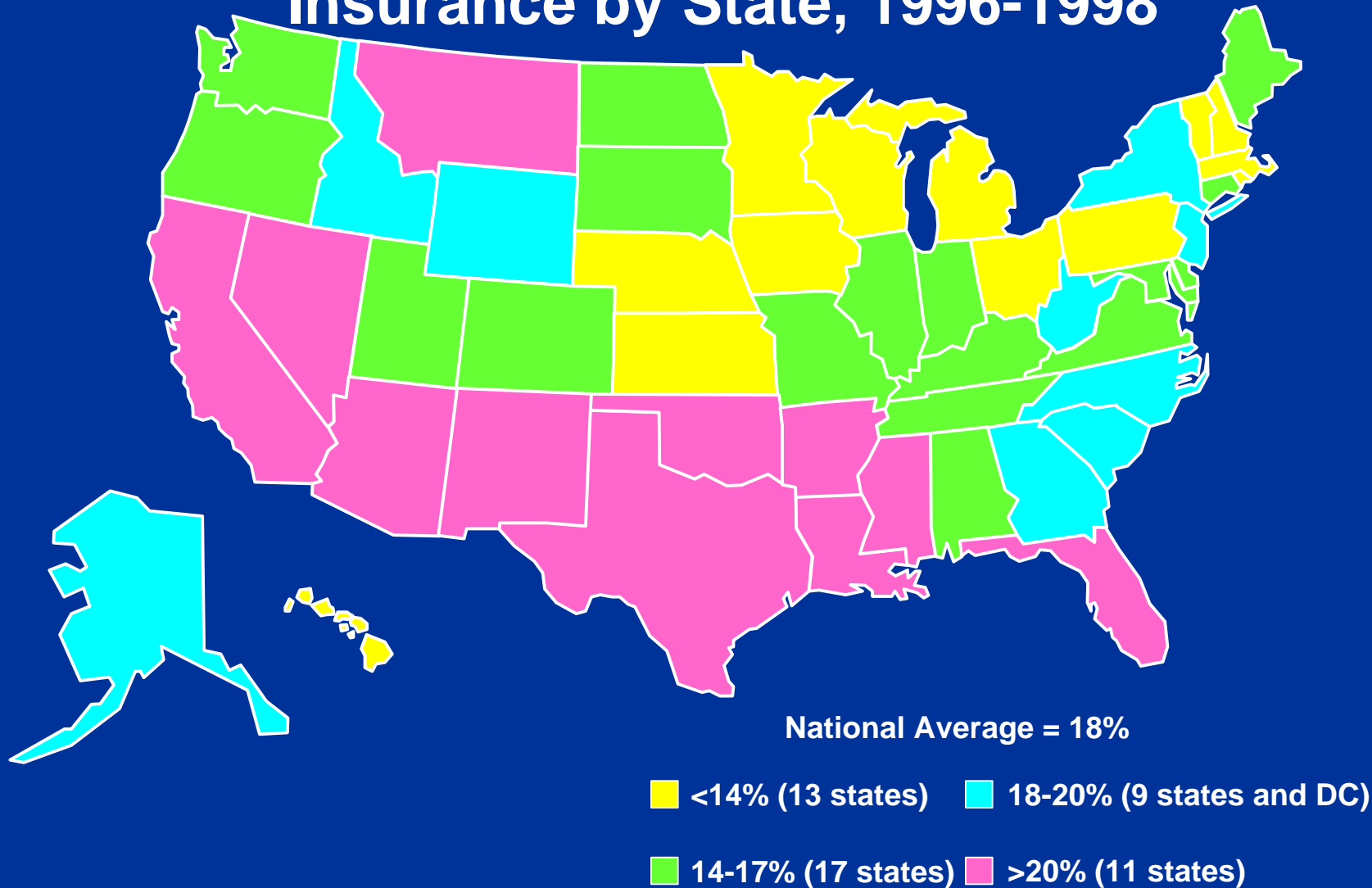
Note: Percentages may not total to 100 due to rounding.

SOURCE: Urban Institute, 1999; unpublished

Data: Current Population Survey, March 1999

Figure 14

Percent of Nonelderly Population with No Health Insurance by State, 1996-1998

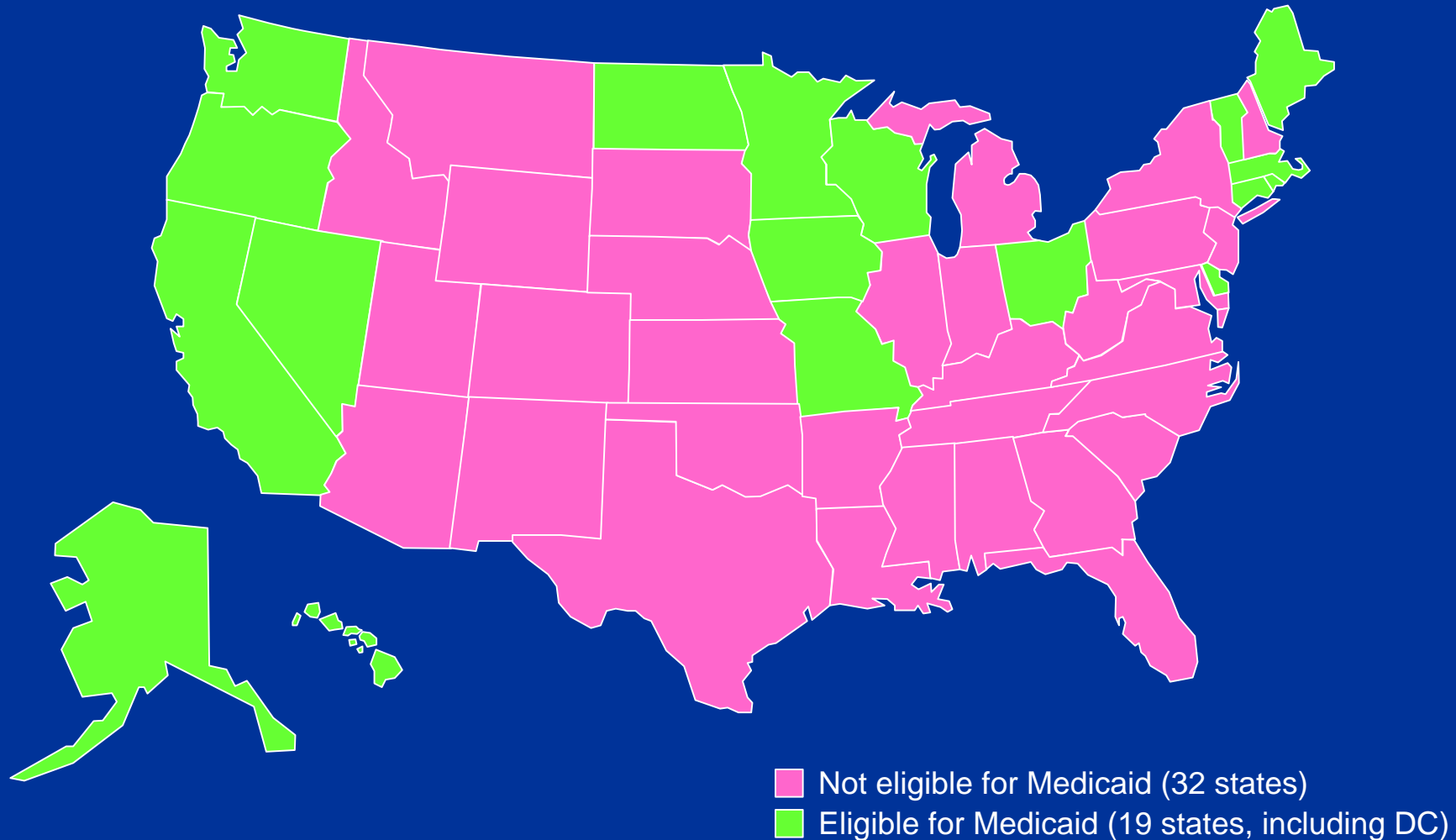


SOURCE: Urban Institute, 1999; unpublished

DATA: 3 year-pooled data from March 1997, 1998, and 1999 CPS data

Figure 15

Parents Working Full-Time for Minimum Wage Income-Ineligible for Medicaid in Most States



NOTE: Based on a family of 3 with one wage earner, working full-time for the federal minimum wage (\$5.15/hour, or about \$10,700/year).

SOURCE: Center on Budget and Policy Priorities, 1999.

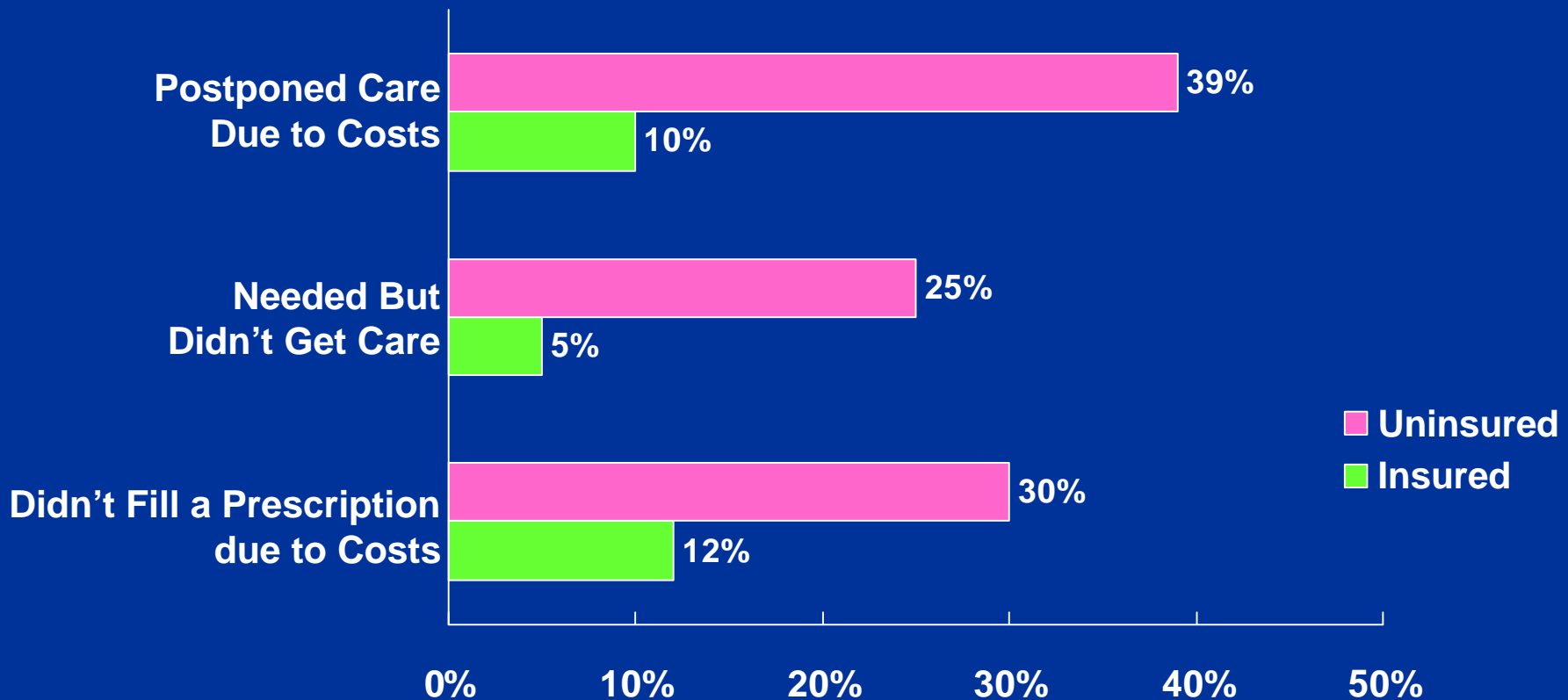
**What difference does health insurance
make?**

What difference does health insurance make?

- Uninsured adults are more likely than those with insurance to delay or forego needed health services. (Figure 16)
- The uninsured are less likely to have a usual source for routine care, and when they do, are less likely to use an office-based provider than the insured. (Figure 17)
- Lack of coverage also places financial burdens on the uninsured-- 17% have to significantly change their lives to pay medical bills. (Figure 18)
- The uninsured receive less care than the insured-- for example, uninsured children are less likely than the insured to receive care for treatable conditions (Figure 19), and uninsured pregnant women are less likely to receive recommended prenatal care. (Figure 20)
- When a person gains health insurance after being uninsured, their access to care improves. (Figure 21)
- Poor access to care has serious health consequences for the uninsured. The uninsured are more likely to be diagnosed at a more advanced stage of cancer than the insured (Figure 22), and uninsured women are more likely to die from breast cancer than insured women. (Figure 23)

Figure 16

Problems with Access to Care in the Past Year Among Nonelderly Adults, by Health Insurance Status, 2000

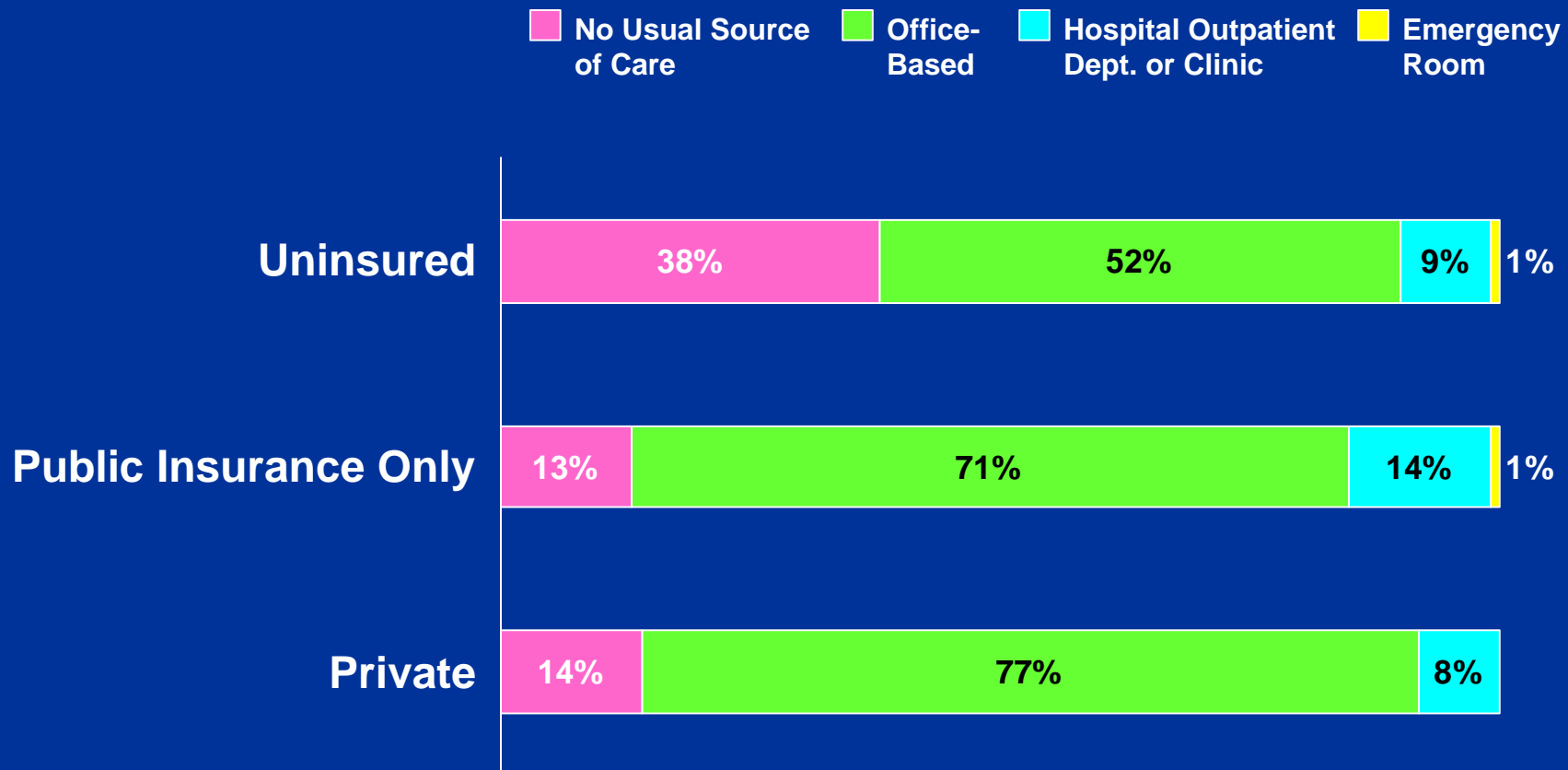


Note: Percent reporting problem during the year before the survey.

SOURCE: NewsHour with Jim Lehrer/Kaiser Family Foundation National Survey on the Uninsured, March 2000

Figure 17

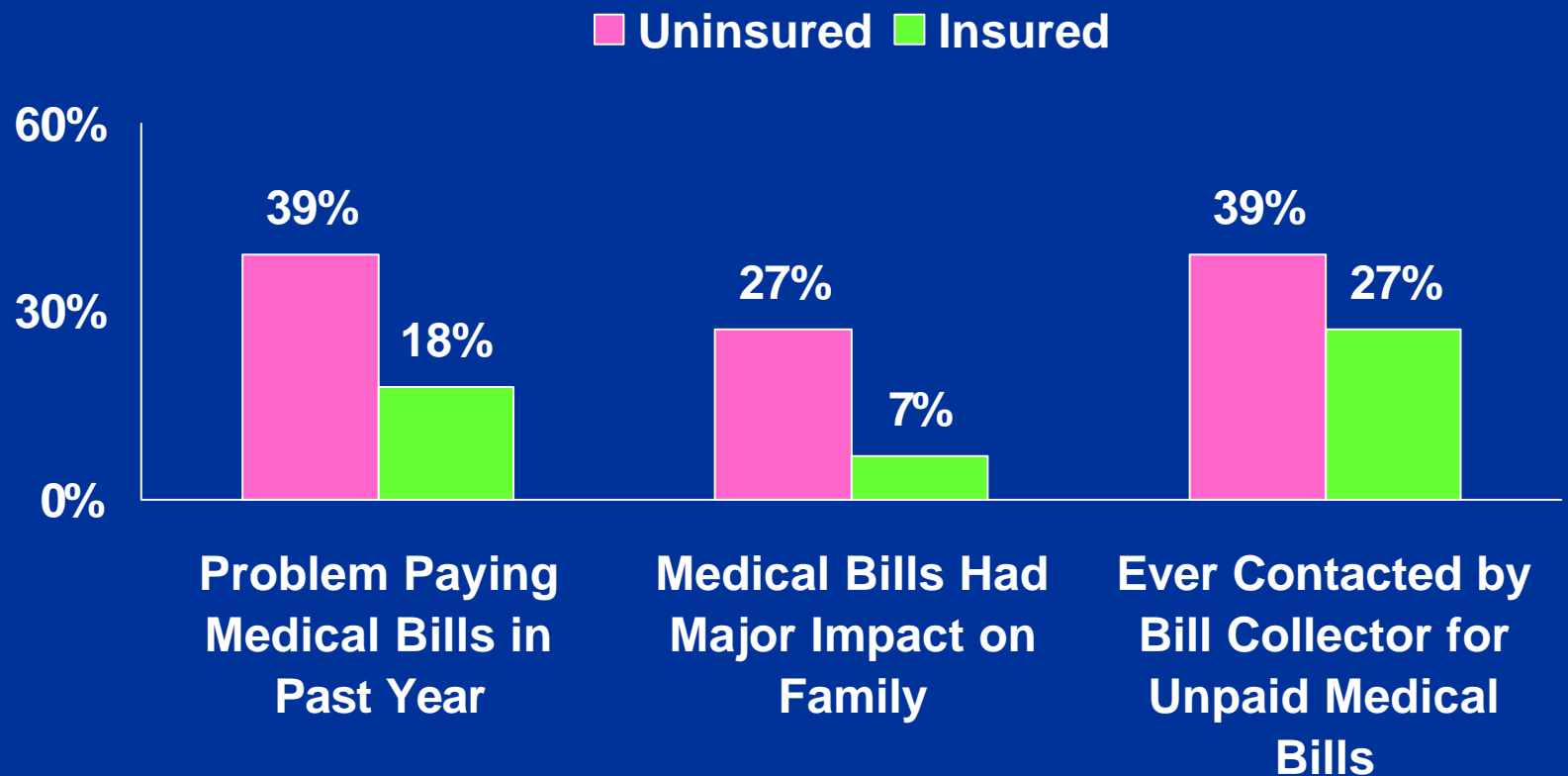
Usual Sources of Health Care for the Nonelderly by Insurance Status, 1996



SOURCE: Weinick RM, et. al., Access to Health Care -- Sources and Providers, 1996. AHCPR, 1997. MEPS Research Findings No. 3.
DATA: Medical Expenditures Panel Survey

Figure 18

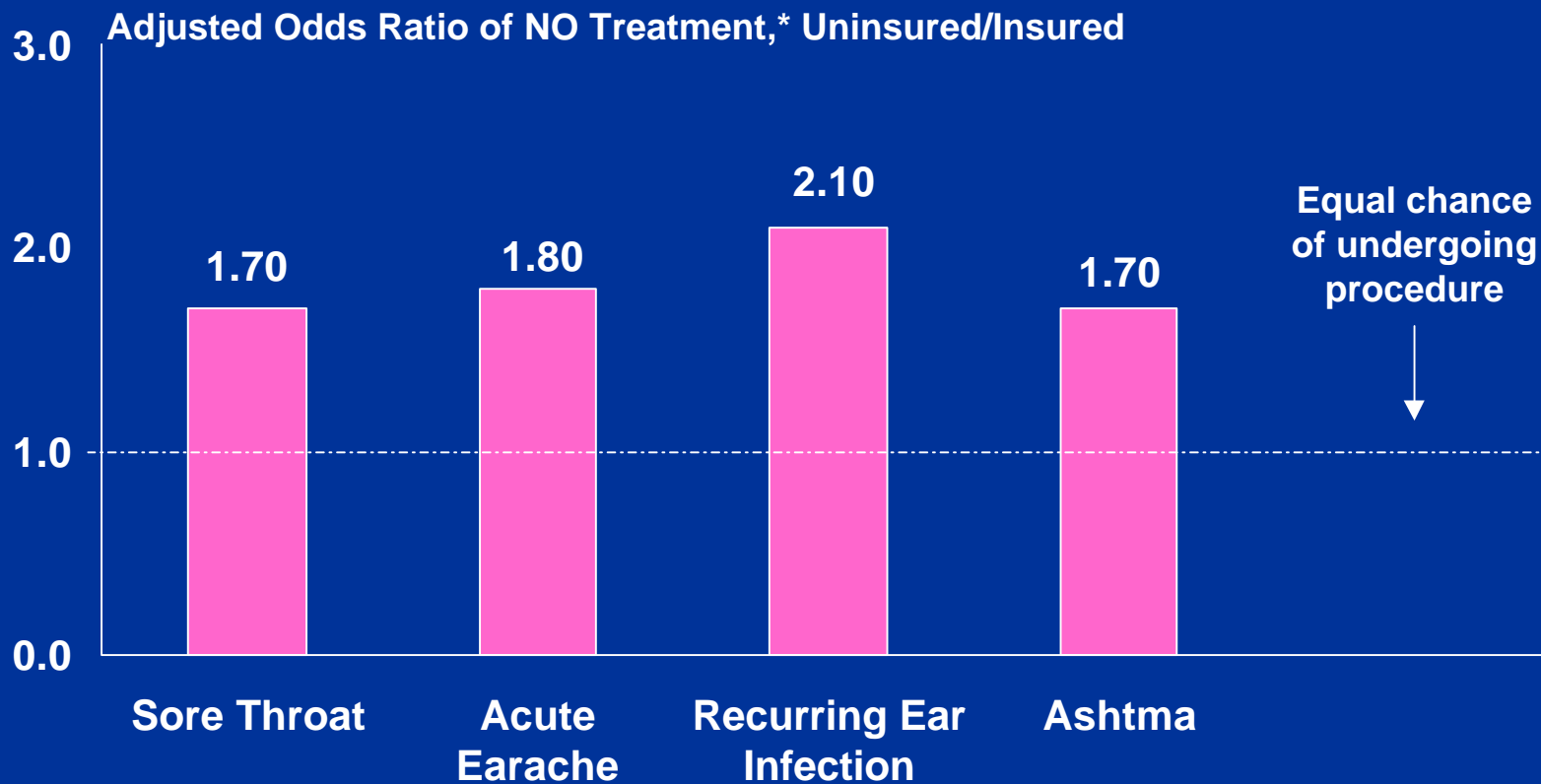
Percent of Nonelderly Adults with Problems Paying Medical Bills by Insurance Status, 2000



SOURCE: NewsHour with Jim Lehrer/Kaiser Family Foundation National Survey on the Uninsured, March 2000

Figure 19

Chances of Uninsured Children NOT Receiving Medical Care When Sick Compared to Insured Children, 1987



Ratios > 1.0 indicate uninsured more likely than insured NOT to be treated

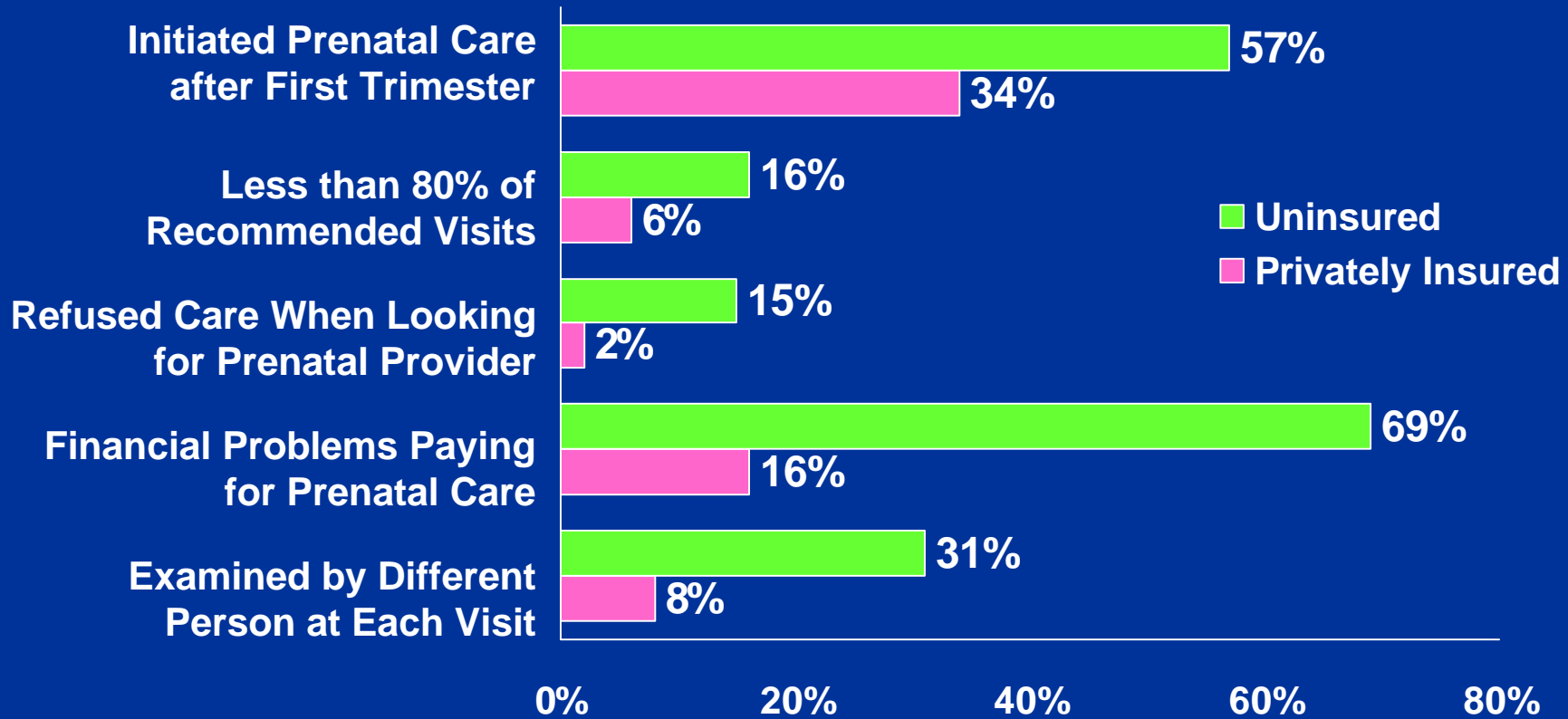
*Ratios were adjusted for the effects of age, sex, family size, race/ethnicity, income, region, and urban/rural residence.

SOURCE: Stoddard JJ, et. al., "Health Insurance Status and Ambulatory Care for Children," NEJM 1994; 330(20): 1421-1425.

Data: National Medical Expenditures Survey 1987

Figure 20

Prenatal Care by Health Insurance Status

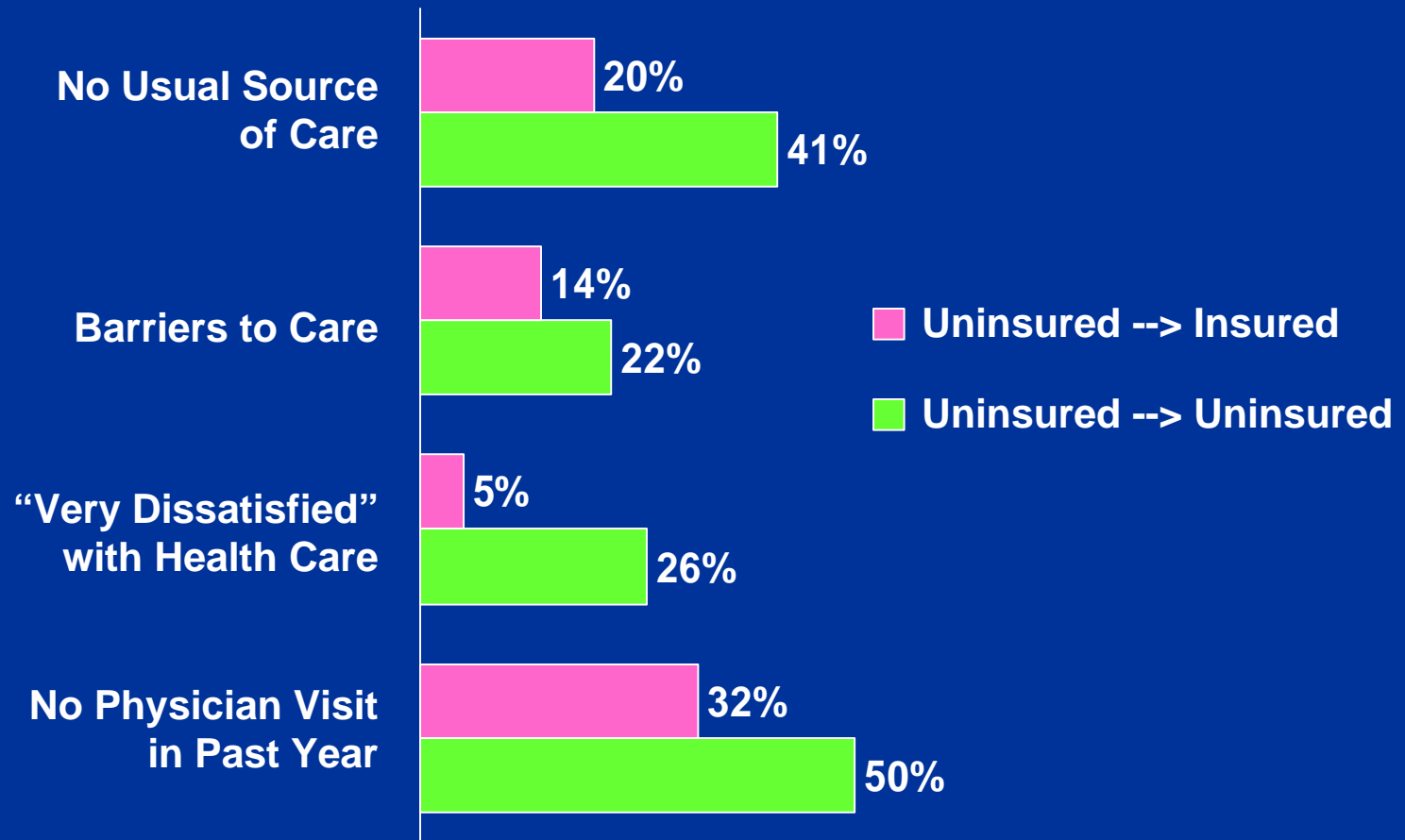


SOURCE: Oberg, C et. al., 1991. "Prenatal Care Use and Health Insurance Status," *Journal of Health Care for the Poor and Underserved*, 2 (2): 270-92.

DATA: Random sample of 149 recently delivered women from 6 Minneapolis hospitals in 1988.

Figure 21

Effects of Gaining Health Insurance on Access to Care, 1995-1997



Note: Coverage (either Medicaid or private) may have been gained in either 1996 or 1997. For those who did not gain coverage, the second measure was in 1996, or if missing, 1997.

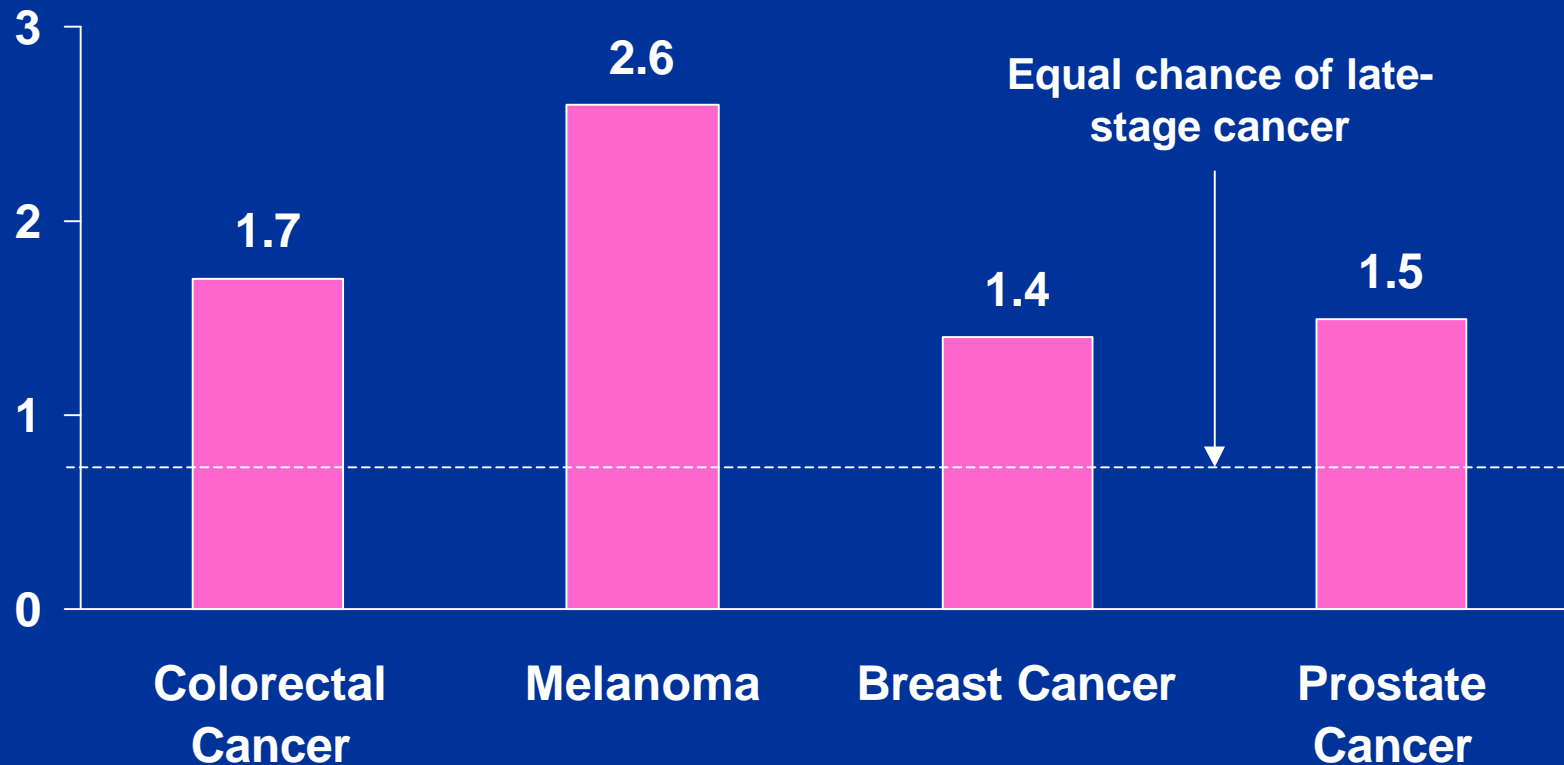
SOURCE: J. Kasper, unpublished data, 1999

DATA: Kaiser Survey of Family Health Experiences

Figure 22

Diagnosis of Late-Stage Cancer, Uninsured Compared to Privately Insured, 1994

Adjusted Ratios of Late-Stage Cancer (Uninsured/Insured)



Notes: Privately insured all had commercial indemnity plans. Differences adjusted for age, race, sex, marital status (when appropriate), education, income and comorbidity.

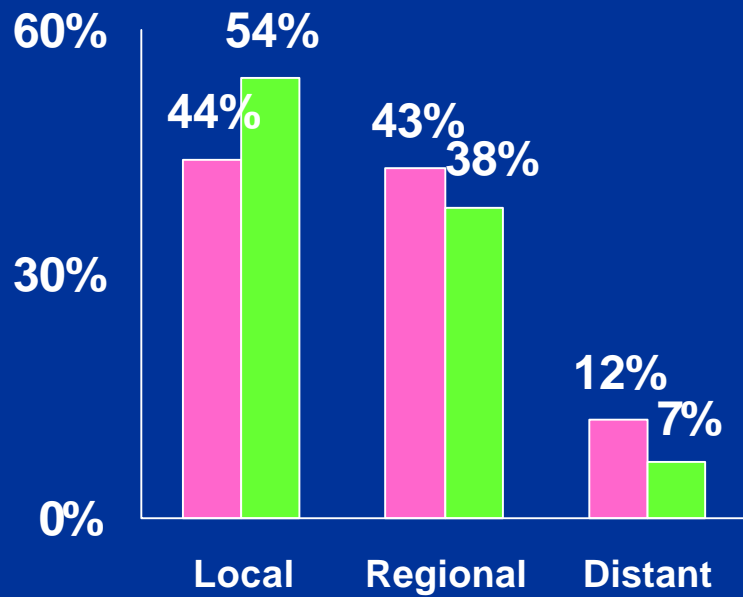
SOURCE: Roetzheim RG, et. al., "Effects of Health Insurance and Race on Early Cancer Detection." *J. Natl. Cancer Institute* 1999; 91:1409-15.

Figure 23

Stage of Breast Cancer at Time of Diagnosis by Insurance Status

Distribution of Women with Breast Cancer by Disease Stage at Time of Diagnosis

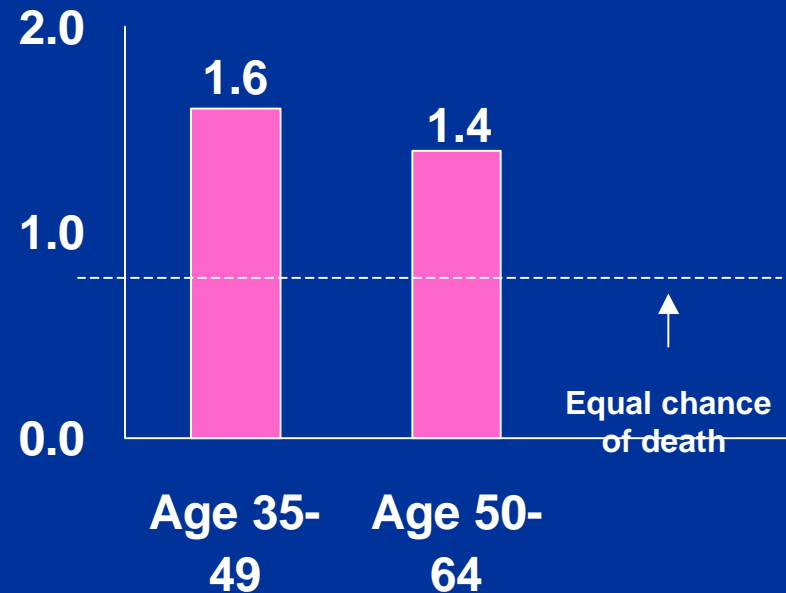
■ Uninsured ■ Privately Insured



Stages of Disease

Relative Risk of Death from Breast Cancer by Age and Insurance Status

Adjusted Relative Risk of Death* Uninsured/Insured



Ratios > 1.0 indicate uninsured more likely than insured to die from breast cancer

Note: Distant stage is most advanced disease.

* Adjusted for age, race, marital status, income, and number of co-existing diagnoses.

SOURCE: Ayanian JZ, Kohler BA, Abe T, Epstein AM, "The Relationship Between Health Insurance Coverage and Clinical Outcomes Among Women with Breast Cancer," *NEJM* 1993; 329 (5): 326-331. DATA: NJ Hospital Discharge Data and Cancer Registry, 1985-1987.

How do different proposals target the uninsured population?

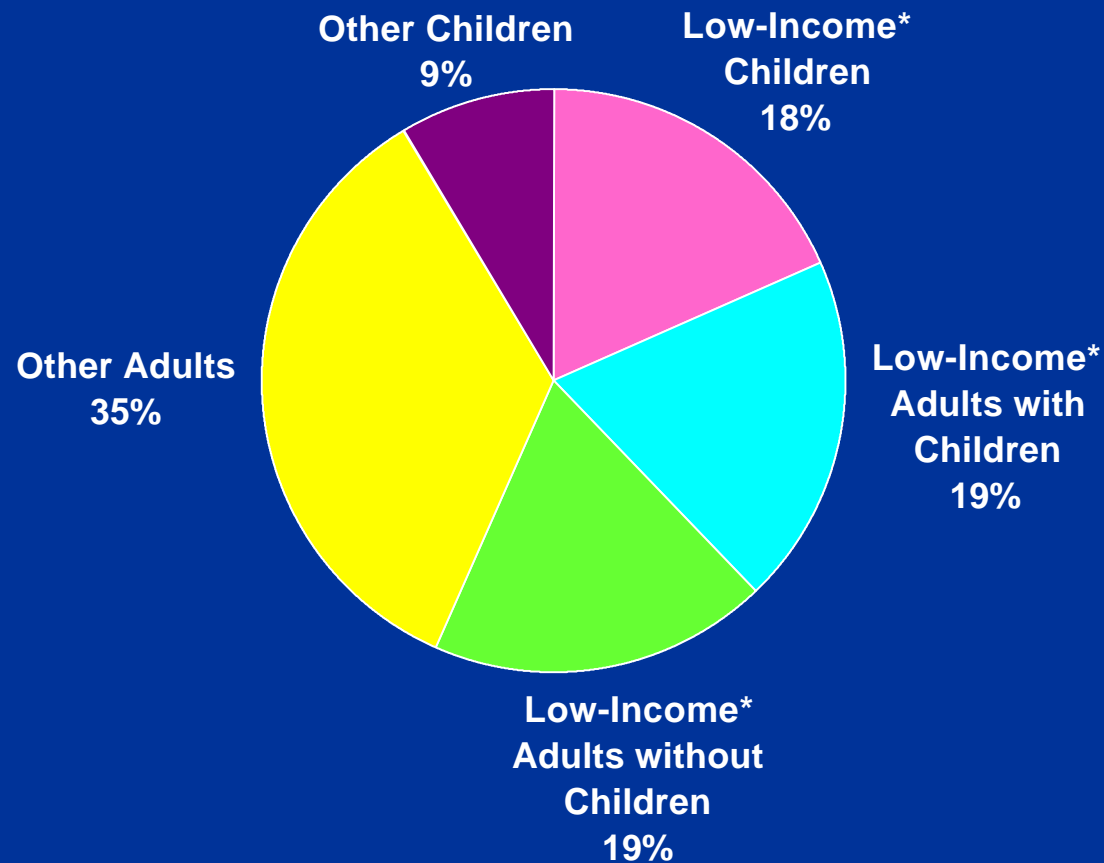
How do different proposals target the uninsured population?

(Figure 24)

- **FOCUSING ON LOW-INCOME CHILDREN**
 - Many proposals start by focusing on covering low-income children (18% of the uninsured population).
- **FOCUSING ON LOW-INCOME ADULTS**
 - Proposals to extend coverage to low-income adults with children target 19% of the uninsured.
 - Extending coverage to low-income childless couples and single adults would cover an additional 19% of the uninsured population.
- **FOCUSING ON MODEST- AND HIGHER-INCOME CHILDREN & ADULTS**
 - Proposals that cover children regardless of income would cover an additional 9% of the uninsured population.
 - By including modest- and higher-income adults in the target population, proposals would extend coverage to the final 35% of the uninsured.

Figure 24

The Uninsured Population, 1998



44 million

* Low-income is defined as below 200% FPL., or \$32,900 for a family of four in 1998.

SOURCE: SOURCE: Urban Institute, 1999; unpublished

Data: Current Population Survey, March 1999.