



Module 8: Access to Health Services

Part 2: Health Insurance Coverage

Okay, I'd like to talk about health insurance coverage now. The truth is that most healthcare providers will not see you without some form of health insurance. That's why under Healthy People 2020 it's very important for those to measure which percent of the American people have insurance and those who don't have insurance.

In addition as mentioned earlier, not all insurance is accepted equally. And so the acceptability of insurance is also an important issue for us. And the types of benefits that you can provide under health insurance is also important. For example if some benefits are not offered for your health condition that could be a significant barrier to access to healthcare.

Fortunately, the Affordable Care Act changes many of these issues so that under the Affordable Care Act there's something called minimum, creditable coverage. And what that means is that each health insurance plan has to offer a fairly comprehensive package of benefits that is going to be considered the standard benefit package or essential benefit package for all Americans.

Well, if you don't get access to care through your health care provider then your other alternative choice than going to an emergency room, where you are often triage, stabilized, and then frequently sent home. This is less desirable and it's probably the most expensive way of getting access to health care. And so one of the important measure for us as a society is to try to minimize the use of emergency rooms except for true emergencies. And to instead have people who can be seen as an outpatient, seen through their health care provider on an appointment basis.

If you look at the number of people without health insurance you can see that the general trend is one where the number of people without insurance has increased over time. There have been episodes where we've been more successful in reducing the number. But the overall trend is one of increasing numbers of without insurance.

Fortunately and hopefully all of this will change with the Affordable Care Act. One of the significant challenges though is that we have something like 48 million people right now without health insurance and we are trying to do whatever we can with the Affordable Care Act to reduce these numbers.

Having no health insurance is in its own right a significant cause of mortality. In fact, a study done at Harvard shows that some 45,000 US deaths are linked simply for the lack of having health insurance. So consider the fact that so many people do die in this country for something that we as a society could do a better job of providing care for more Americans.

In addition, if we were to study those people without health insurance we could see that disproportionately those between the ages of 19 and 34 represent a larger share of those without health insurance than their representation in the population. The other significant part of this graphs shows that elderly people, those who are over 65 only 1% of them are without health insurance even though they represent 13% of the population. What is the reason for that? It's



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because we offer Medicare for those who are over 65 years of age. And that Medicare is a significant and important insurance safety net for the elderly and disabled in our country.

You also can notice the minorities, have an increasing risk of being without health insurance compared to the white population. In particular African Americans and Hispanics have a much higher rate of being without health insurance. This is a significant issue because these systemic chronic inability to get health insurance leads to things like health disparities.

The hypothesis would be that income should not matter for whether you get health insurance or not. It turns out in America it makes a big difference. So those who make \$75,000 a year or more, only 7.8% of them have no health insurance. Contrast that to those who are poor, who make less than \$25,000 a year, where more than a quarter of them are without health insurance. And of course with the recession these are exacerbated.

One of the great myths about the uninsured is that they don't work. But in fact more than three-quarters of those without health insurance either work part-time or full-time. So in fact, they had the misfortune of working for an employer who does not provide health insurance for them. And yet even though they may pay taxes which fund other programs they, themselves do not benefit from that. If you were to plot the percent uninsured across the 48 states, you can see that the southern states and some of the western states have much higher percentages with people without health insurance.

An interesting study that was done by researchers who called up pediatric specialty offices trying to make an appointment for their patients, a fictitious patient, one with private insurance, and one on Medicaid. And if we believe the health insurance should make no difference at all, we would say that you would have an equal chance of actually making that first appointment. But in fact, it makes a big difference. Those with private insurance had a much easier chance of making an appointment to see a pediatric specialist than those who had Medicaid insurance. Even though Medicaid insurance, is what we'll talk about later, still is an important safety net for Americans.

This all goes to show that the acceptability of insurance varies across providers. And it brings us to the first of our Healthy People 2020 goals which is that we want to increase the proportions of person with medical insurance so that by the year 2020, 100% of Americans have health insurance. In development are similar goals for dental insurance, prescription drug plans, and those who need clinic preventative services.

So we can summarize our health insurance coverage this way by saying that insurance coverage is an important factor in our ability to get access to health care providers. Unfortunately there are millions of people in America without health insurance. The uninsured are higher in those who are young, the working poor, minorities and those who live in southern and western states. Not all insurance is accepted equally by providers. And these coverage gaps can and do lead to health disparities.