



Update on the Problem

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Overview

- Data on the NC uninsured
- Addressing Common Misconceptions
- The Geography of the Problem



Uninsured: Impact on Health

- Uninsured are:
 - More likely to report access barriers obtaining needed health services
 - Less likely to get preventive screenings or care for ongoing chronic conditions
- More likely to be diagnosed with severe health conditions (e.g., late stage cancers)
 - More likely to be hospitalized for preventable conditions
 - Less likely to receive major health interventions

Source: Hadley J. Sicker and Poorer: The Consequences of Being Uninsured. Kaiser Commission on Medicaid and the Uninsured. May 2002. Institute of Medicine. Care without Coverage: Too Little, Too Late. May 2002.



Data on the NC Uninsured

- Focus on population below age 65
 - Medicare nearly universal in 65 and older population
- Most statistics come from Current Population Survey (U.S. Census)
 - Approximately 4000 North Carolinians asked about coverage in prior year



Changes in Health Insurance Coverage (NC): 2000-2006

- More than 1.5 million nonelderly (19.5%) were uninsured in NC in 2005-2006.
 - Approximately the population of the Charlotte metro area
- Between 1999-2000 and 2005-06:
 - North Carolina experienced DOUBLE the increase in the percentage of nonelderly who were uninsured than nationally (NC: 25%, US: 12% increase)
 - North Carolinians lost employer-sponsored insurance at nearly DOUBLE the national rate (NC: 11%, US: 6% decrease)

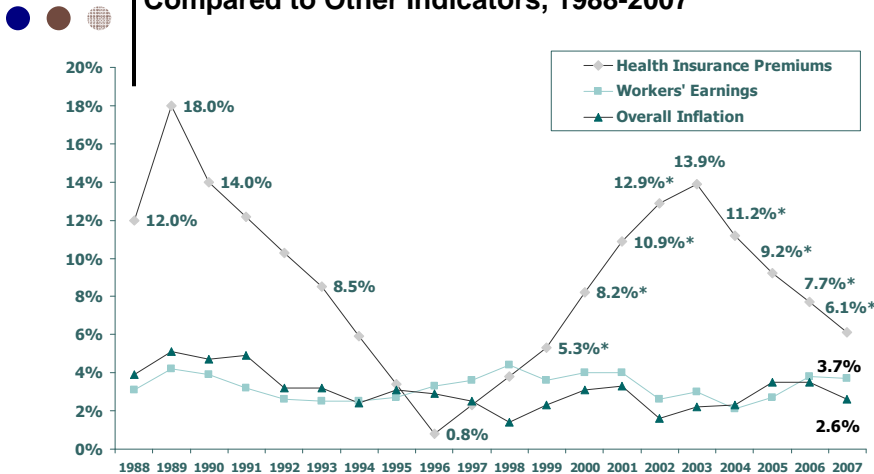


Health Insurance Premium Increases: US

- **The primary cause of the increase in the numbers of uninsured is rising premiums**
 - Premiums increased 13.9% in 2003, and 11.2% in 2004, 9.2% in 2005
 - Increase tempered in recent years – but still above wage increases
 - **Since 2000, premiums increased 114% compared with inflation (24%) or wage growth (29%)**
- Healthcare expenditures increasing due to:
 - Greater utilization of services
 - Increased costs of services
 - Growth in population
 - Increases in overall disease prevalence

Kaiser Family Foundation and Health Research and Education Trust. Employer Health Benefits: 2005 Summary of Findings. Cherner M et. al. Increasing Health Insurance Costs and the Decline in Insurance Coverage. Health Serv Research 40(4):1021-39.

Average Percentage Increase in Health Insurance Premiums Compared to Other Indicators, 1988-2007



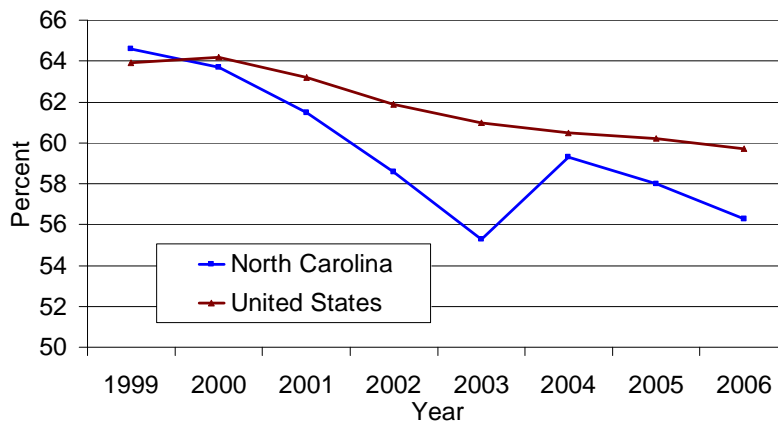
*Estimate is statistically different from estimate for the previous year shown (p<.05). No statistical tests are conducted for years prior to 1999.

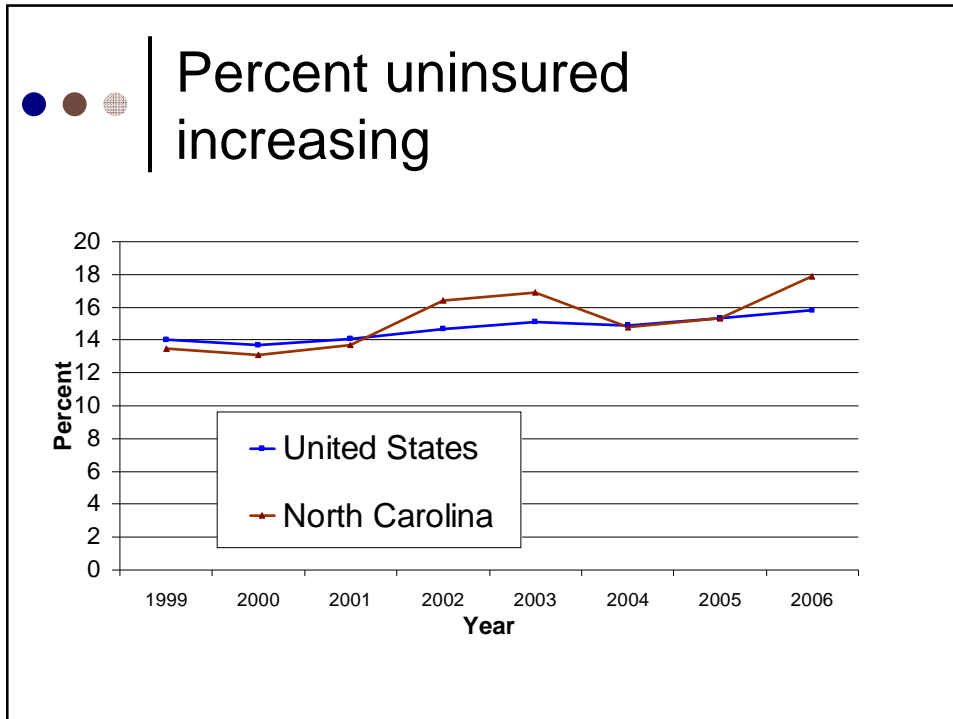
Note: Data on premium increases reflect the cost of health insurance premiums for a family of four. The average premium increase is weighted by covered workers.

Source: Kaiser/HRET Survey of Employer-Sponsored Health Benefits, 1999-2007; KPMG Survey of Employer-Sponsored Health Benefits, 1993, 1996; The Health Insurance Association of America (HIAA), 1988, 1989, 1990; Bureau of Labor Statistics, Consumer Price Index, U.S. City Average of Annual Inflation (April to April), 1988-2007; Bureau of Labor Statistics, Seasonally Adjusted Data from the Current Employment Statistics Survey, 1988-2007 (April to April).



Percent covered by employer falling



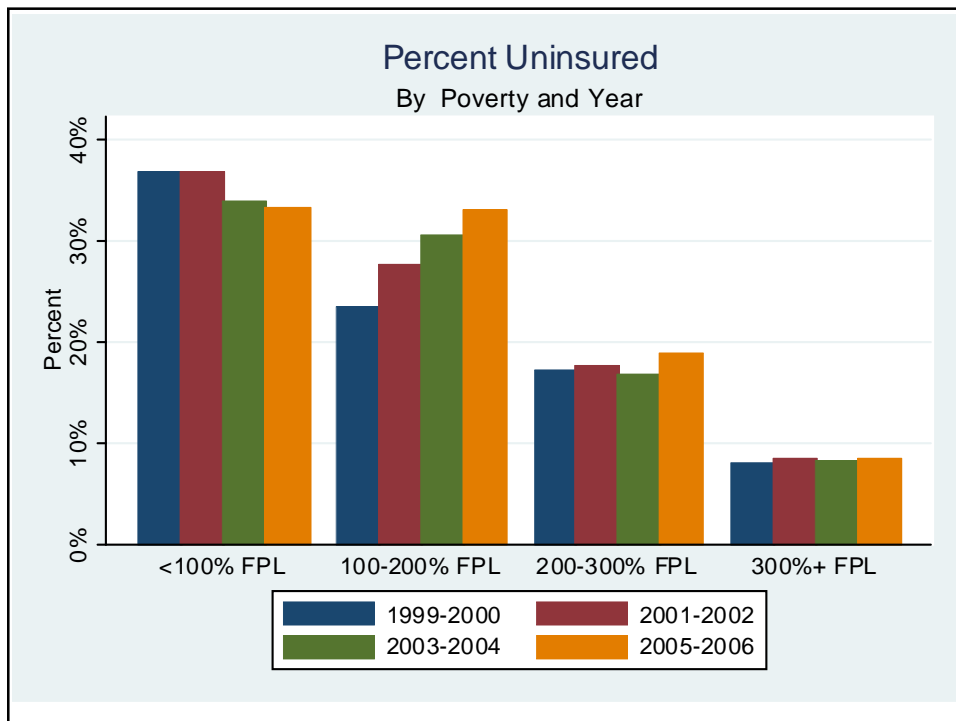


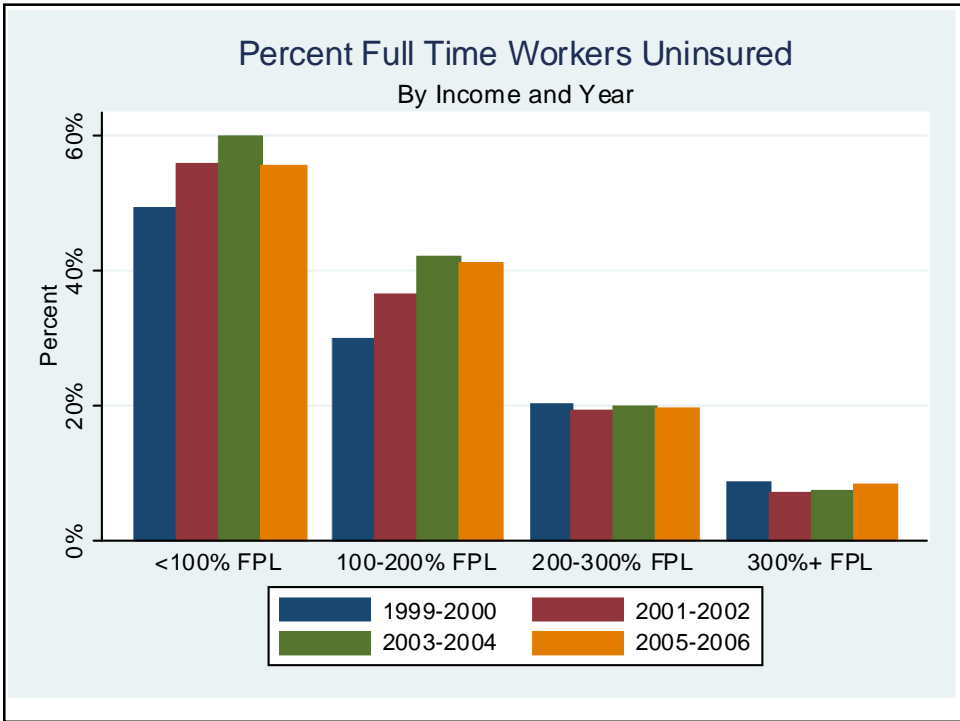
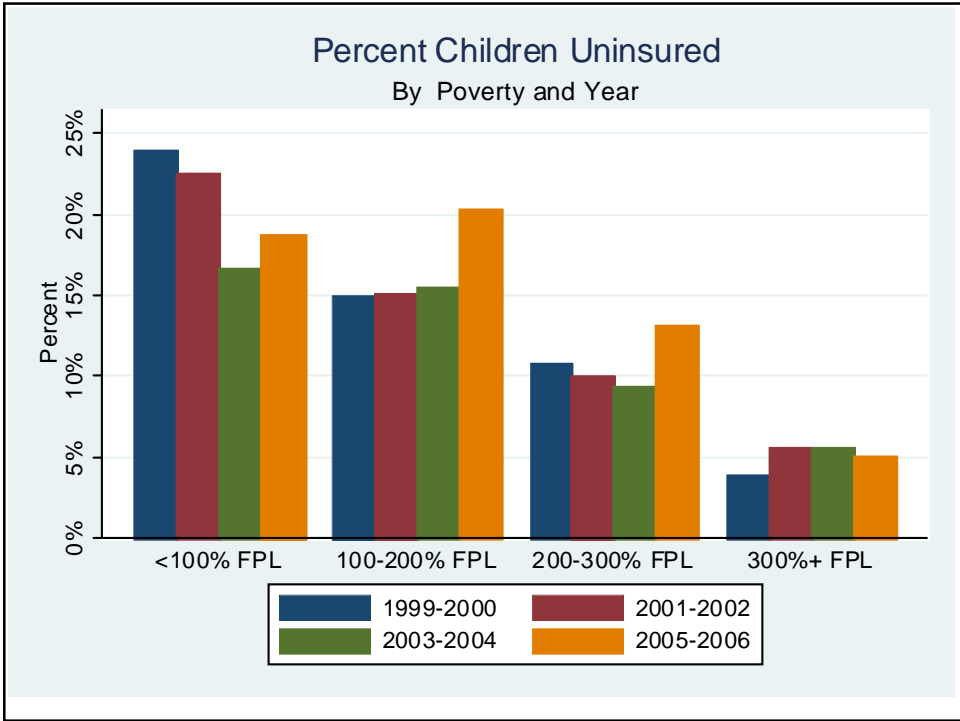
- ## Uninsured in North Carolina: Summary
- 78% of the uninsured in North Carolina are either:
 - Employed by, or in the family of someone employed by a small employer with <25 employees (41%)
 - Have low family incomes (e.g., <200% of the federal poverty guidelines) (58%)
 - Also at higher risk of being uninsured if:
 - Racial or ethnic minority
 - Live in rural area
 - Have preexisting health problems

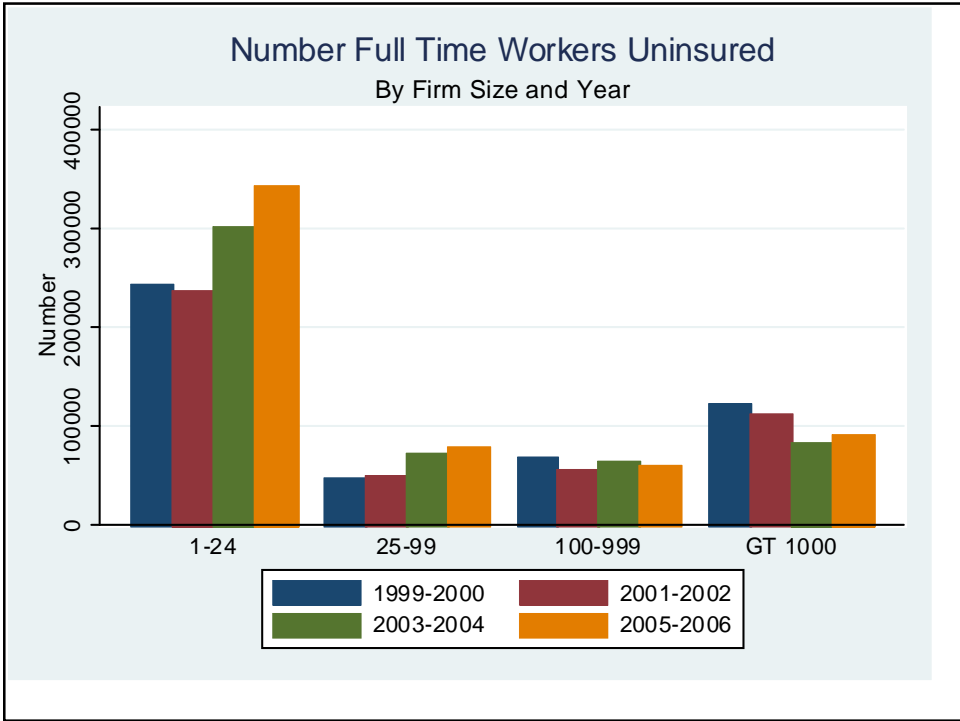


Recent trends

- Increase in rate among near-poor; some recent movement in 200-300% FPG
- Similar increase in children, more pronounced in 200-300%
- Rapid increase in number full-time workers in firms less than 25 employees





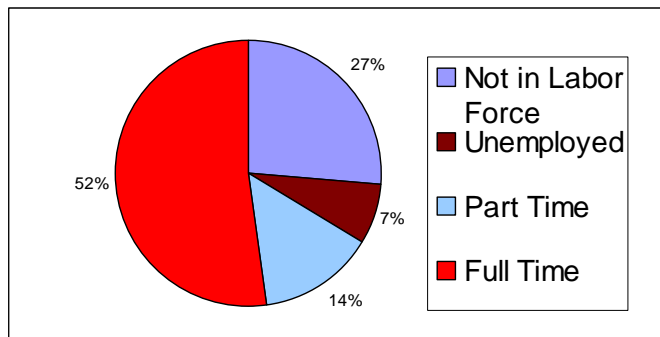


● ● ● | Addressing Some Common Misconceptions



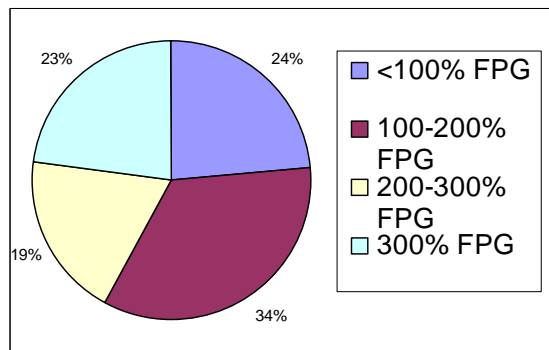
Addressing Some Common Misconceptions

- **Most uninsured adults have some connection to the workforce**
 - **Over half work full time**



Addressing Some Common Misconceptions

- **Some members of higher income families are uninsured**
 - **Almost a quarter have incomes above 300% FPG (\$60,000 for family of 4)**





Addressing Some Common Misconceptions

- A “transforming North Carolina economy” is not a major cause
 - Although NC has lost jobs in traditionally high-coverage industries, only about a third of the decreased insurance coverage can be explained by this trend. Insurance coverage has fallen in almost every industry.



Addressing Some Common Misconceptions

- “Immigrants” and/or Latinos are not a major cause of the decreased coverage
 - Although immigrants and Latinos are both at higher risk of being uninsured, and we have had a rapid increase in these populations, other factors are more important in explaining NC’s uninsured
 - Article in May/June 2006 *NC Medical Journal* (<http://www.ncmedicaljournal.com>)



Addressing Some Common Misconceptions

- **The Uninsured can typically NOT obtain all their necessary healthcare from a safety net provider**
 - *“We have universal coverage now. Nobody gets denied at the hospital. So we have, in effect, a system that is working.”*
 - NC IOM Task Force on the NC Healthcare Safety Net found that only 25 percent of the uninsured receive care from the safety net (more info below)



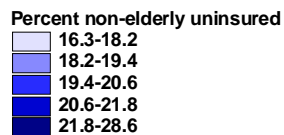
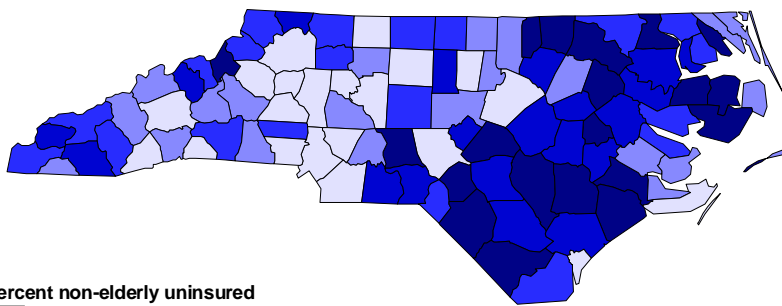
The Geography of the Problem



Creating county-level estimates

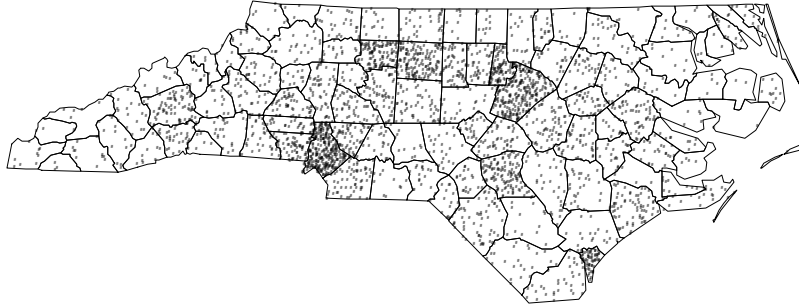
- Uninsured rates can vary considerably across the state.
- Little data on local rates – use population characteristics to create county-level estimates based on averages
- 2005-2006 estimates released today

Percent of Non-elderly Without Health Insurance 2006



Produced by North Carolina Institute of Medicine. <http://www.nciom.org>
Estimates based on Annual Social and Economic Supplement to the Current Population Survey.

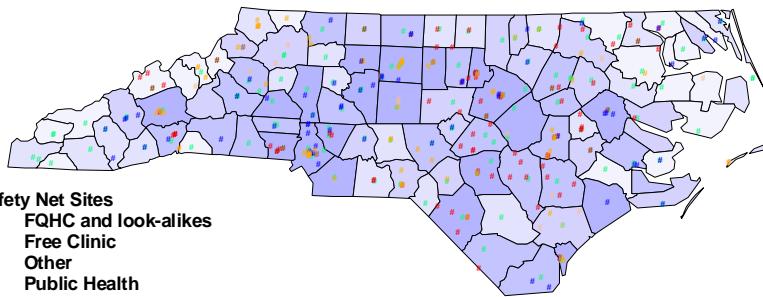
Number of Uninsured Non-elderly



Number uninsured non-elderly
 1 Dot = 500

Produced by North Carolina Institute of Medicine. <http://www.nciom.org>
 Estimates based on Annual Social and Economic Supplement to the Current Population Survey.
 Dots placed at random locations within the county.

Number of Uninsured Non-elderly and Safety Net Delivery Sites Included in the nhealthcarehelp.org database



Safety Net Sites
 ■ FGHC and look-alikes
 ■ Free Clinic
 ■ Other
 ■ Public Health
 ■ Rural Health Clinic

Number uninsured non-elderly
 ■ 1072 - 3696
 ■ 3998 - 7056
 ■ 7302 - 11092
 ■ 11288 - 22854
 ■ 23975 - 141706

Produced by North Carolina Institute of Medicine. <http://www.nciom.org>
 Estimates based on Annual Social and Economic Supplement to the Current Population Survey.



Summary

- The NC uninsured is a microcosm of the NC population
- Low income and employees of small firms are more likely to be uninsured
- Uninsured rates vary across the state, but counties with high *percent* uninsured not always the same as those with high *numbers* of uninsured



More information

- NC IOM website <http://www.nciom.org>
 - Data Snapshot on uninsured data
 - County-level estimates
- NC State Center for Health Statistics
 - More county-level data
 - Uninsured & health conditions