

HEALTH POLICY BRIEF

RHODE ISLAND DEPARTMENT OF HEALTH

Disparities in Health Insurance Coverage among Adults in Rhode Island

March 2002
Issue No. 02 - 1

Safe and Healthy Lives in Safe and Healthy Communities

PATRICIA A. NOLAN, M.D., M.P.H., DIRECTOR OF HEALTH

Rhode Island Department of Health
Office of Health Statistics
3 Capitol Hill
Providence, Rhode Island 02908

*Change service requested
(401) 222-2550*

PRSRT_STD
U.S. Postage
PAID
Providence R.I. 02904
Permit No. 1286

The national *Healthy People 2010* (HP2010) initiative and the state-wide *Healthy Rhode Islanders 2010* initiative have 2 overarching goals: to increase quality and years of healthy life and to eliminate health disparities.^{1,2} HP2010 selected a core set of ten topics of major public health concern to provide a snapshot of the overall health of all Americans:¹

- | | |
|-------------------------------|-------------------------|
| ◆ Physical Activity | ◆ Mental Health |
| ◆ Overweight and Obesity | ◆ Injury and Violence |
| ◆ Tobacco Use | ◆ Environmental Quality |
| ◆ Substance Abuse | ◆ Immunization |
| ◆ Responsible Sexual Behavior | ◆ Access to Health Care |

The leading health indicators (LHIs) are being used to monitor the health of Rhode Islanders.² Objective 1-1 on health insurance coverage is one of the measures for the LHI on access to health care.

**1-1 Increase the proportion of people with health insurance.
Target: 100 percent of people under age 65 years.**

Identifying the uninsured population and eliminating disparities among select population groups at highest risk for inadequate access to health care could have a beneficial impact upon objectives in several other focus areas.

Nationwide, uninsured persons have limited access to preventive and primary medical care, which can result in a worsened overall health status. Almost one out of six (16.1%) Americans ages 18-64 years have no health insurance coverage.³ In 1998-2000, the proportion of people of all ages who lacked health insurance coverage in Rhode Island was the lowest rate among all 50 states and the District of Columbia.⁴

The uninsured rate in Rhode Island is decreasing among women and increasing among men.

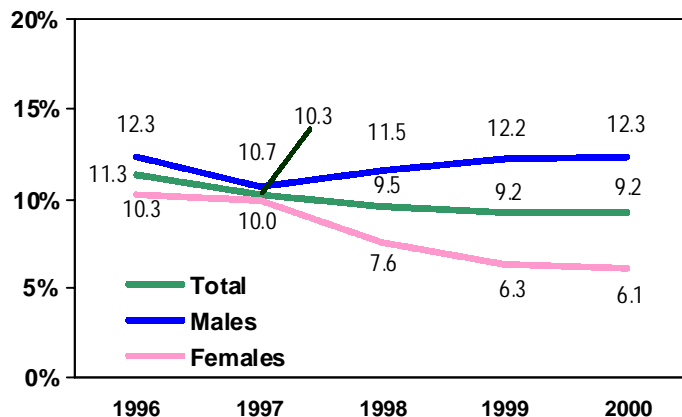


Figure 1. Percent of Uninsured Persons 18-64 Years in Rhode Island by Gender, 1996-2000.

The decrease in the uninsured in Rhode Island is due to the nearly 40-percent decline in rates among females from 1997 to 2000. Uninsured rates among men have remained higher than female rates and have increased 19 percent during that same period (Fig. 1). The difference in rates between females and males has increased from 0.3 percentage points in 1997 to 6.2 percentage points in 2000.

The poor and near-poor are more likely to be uninsured.

Lack of health insurance coverage is highest among people with annual household incomes under \$20,000. The uninsured rate among people with annual household incomes of \$15,000-19,999 is almost four times higher than for people with incomes of \$50,000 or higher (Fig. 2).

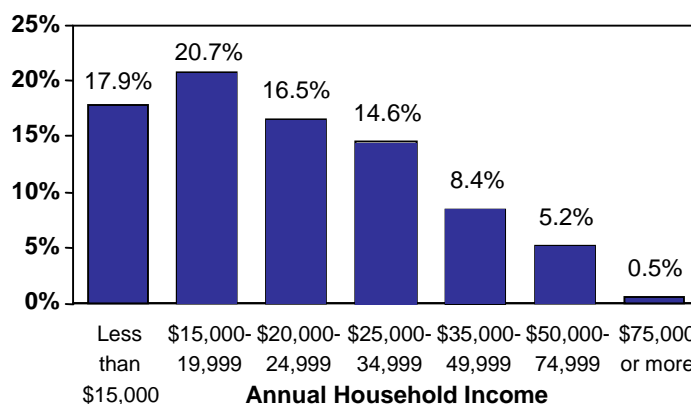


Figure 2. Percent of Uninsured Persons 18-64 Years in Rhode Island by Income, 2000.

Unemployed persons are more likely to be uninsured than employed persons.

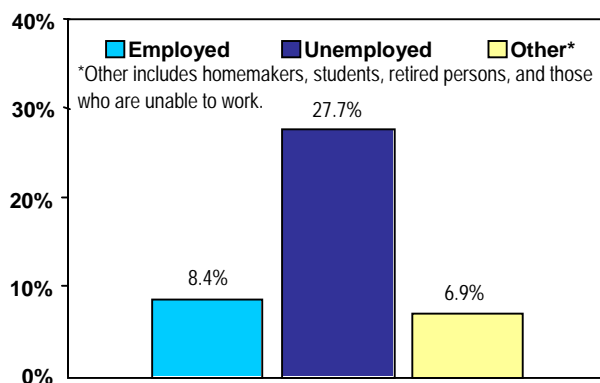


Figure 3. Percent of Uninsured Persons 18-64 Years in Rhode Island by Employment Status, 2000.

In 2000, the unemployed population is 3.5 times more likely to be uninsured than those who are employed (Fig. 3). Only 8 percent of employed persons lack health insurance while 28 percent of unemployed persons are uninsured. Almost 7 percent of persons largely dependent on employed persons or Medicare for coverage (homemakers, students, retired persons and those unable to work) lack health insurance coverage.

Young adults are most likely to lack health insurance.

Lack of health insurance is highest among young adults (18-24 years) and lowest among the elderly (65 years and older), because of Medicare. The uninsured rate for persons 18-24 years is three times higher than the uninsured rate for persons 35-64 years.

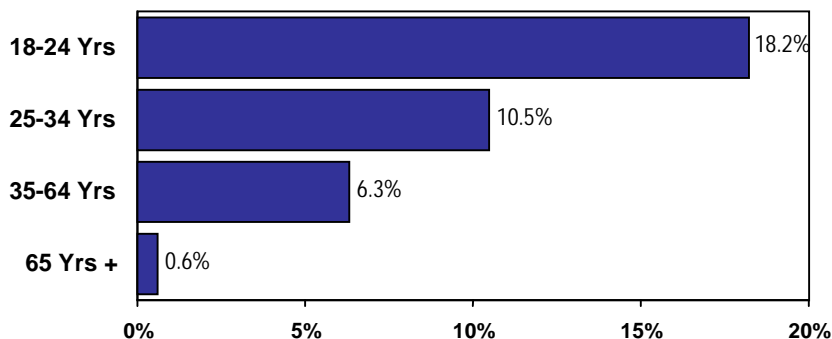


Figure 4. Percent of Uninsured Persons in Rhode Island by Age, 2000.

Select racial/ethnic groups are less likely to have health insurance coverage.

Persons of select racial or ethnic groups are at an increased risk of being uninsured (Fig. 5). Black non-Hispanic adults are twice as likely to be uninsured for the period 1998-2000 as white, non-Hispanic adults. Asians experience uninsured rates that are over 60 percent higher than the white non-Hispanic population. According to the 2000 Census, both the non-white and Hispanic populations comprise 18.1 percent of the Rhode Island population, a 77-percent increase over 1990 Census estimates.^{5,6}

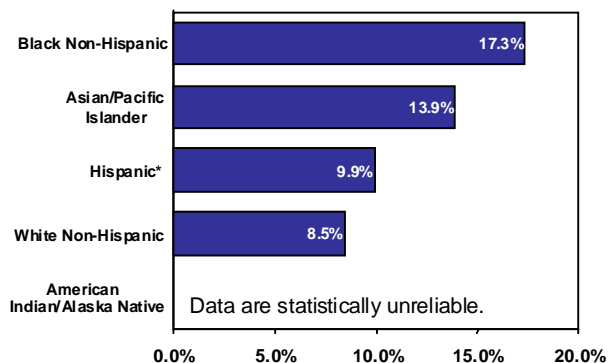


Figure 5. Percent of Uninsured Persons 18-64 Years in Rhode Island by Race and Ethnicity, 1998-2000.

* See data source description for more information on revised definition of health insurance coverage and its impact on estimates for the Hispanic population.

Achieving universal health care coverage In Rhode Island will be difficult.

Even with a strong base to build upon, achieving universal health insurance coverage in Rhode Island will be faced with economic and structural challenges. In the short term, a slow economy is likely to erode employer-based coverage and government's ability to subsidize coverage for low-income residents. In the longer term, the expected population growth in the state is among racial/ethnic groups with relatively low rates of coverage. Under such conditions, a piecemeal approach may fall short of the objective, and a true solution may await comprehensive reform at the federal level.

Data Source: Behavioral Risk Factor Surveillance System, Rhode Island Department of Health.

The Behavioral Risk Factor Survey (BRFS) is a telephone survey of a representative sample of Rhode Island adults (ages 18 years and older), excluding those living in group quarters, institutions, or households with no telephone. The survey has been performed annually since 1984 with funding from the federal Centers for Disease Control and Prevention (CDC). Sampling and telephone interviewing are done by a professional survey organization under contract to the Department of Health, with a sample size of 3,544 respondents in 2000. The BRFS has included questions on basic health insurance coverage since 1991. Starting in 1996, more detailed questions on health insurance status were included to acquire more accurate estimates. The revised methodology (used to derive the estimates presented in this report) results in many fewer Hispanic respondents being assigned to the uninsured group. We are continuing to investigate the possible reasons for this finding. Data from the 2000 BRFS are available on the HEALTH website (<http://www.health.state.ri.us/chic/statistics/brsf2000.pdf>)

For more information on health insurance coverage or the Behavioral Risk Factor Surveillance System please contact Jay Buechner, Ph.D., Jana Hesser, Ph.D., or Colleen M. Ryan, M.P.H. at the Office of Health Statistics, 401-222-2550; visit the HEALTH website at: <http://www.healthri.org>; or visit the CDC BRFS website: <http://www.cdc.gov/nccdphp/brfss>.

References

- ¹ U.S. Department of Health and Human Services. Healthy People 2010, 2nd ed. With Understanding and Improving Health and Objectives for Improving Health. <http://www.health.gov/healthypeople/document/tableofcontents.htm> 2 vols. Washington DC: U.S. Government Printing Office. November 2000.
- ² Rhode Island Department of Health. Healthy Rhode Islanders 2010: Draft Objectives and Targets. <http://www.healthri.org/chic/healthypeople/2010draft.pdf> August 2001.
- ³ Eberhardt MS, Ingram DD, Makuc DM, et al. Urban and Rural Health Chartbook, Health, United States, 2001. <http://www.cdc.gov/nchs/products/pubs/hus/hus.htm>. Hyattsville, Maryland: National Center for Health Statistics. 2001.
- ⁴ Mills RJ. Health Insurance Coverage: 2000. <http://www.census.gov/prod/2001pubs/p60-215.pdf> U.S. Census Bureau. Current Population Reports (P60-215). September 2001.
- ⁵ U.S. Census Bureau. Profiles of General Demographic Characteristics, 2000 Census of Population and Housing: Rhode Island. <http://www.census.gov/prod/cen2000/dp1/2kh44.pdf>.
- ⁶ Hesser JE. Diversity in Rhode Island: Census 2000. Diversity Dialogues: A Data Symposium for the Elimination of Health Disparities in Rhode Island. Rhode Island Department of Health. October 29, 2001.