Access to Health Care

Session Objectives

- Understand the nature of access problem
- Understand the characteristics of uninsured and partially insured
- Understand the economic impact of access problem
- Review global access issue and response

Access to Health Care: Snapshot

- Over 47 million people have no health insurance
- Another 40+ million have inadequate coverage
- Number of uninsured has increased by 6 million since 2000
- Over 27 million workers are uninsured
- This is the picture of the wealthiest nation on earth!
Uninsured Children

Uninsured Children by Age

- Under 6 years: 32%
- 6 to 11 years: 30%
- 12 to 17 years: 38%

Source of coverage for children

Source of coverage for children (age 0 to 17)

Covered by:
- Employment-based
- Own employment-based
- Direct-purchased insurance
- Government health plan
- Other

Young Adults

Source of coverage for young adults (age 18 to 24)

Covered by:
- Employment-based
- Own employment-based
- Direct-purchased insurance
- Government health plan
- Other

Overlap

- Covered by Employment-based: 0.3
- Covered by Own employment-based: 5.9
- Covered by Direct-purchased insurance: 34.8
- Covered by Government health plan: 7.8
- Other: 26.4
- Employment-based and Own employment-based: 23.5

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Source of coverage for adults (age 55 to 64)

Source of coverage for elderly adults (65+)

Covered through employment
Coverage through self-employment

Covered by Own Employment based

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Coverage %</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>26.4%</td>
</tr>
<tr>
<td>25-34</td>
<td>63.7%</td>
</tr>
<tr>
<td>35-44</td>
<td>59.9%</td>
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<tr>
<td>45-54</td>
<td>60.5%</td>
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</tbody>
</table>

Covered by public plan

Covered by government health plan

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Coverage %</th>
</tr>
</thead>
<tbody>
<tr>
<td>18-24</td>
<td>0.3%</td>
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<tr>
<td>25-34</td>
<td>14.0%</td>
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<tr>
<td>35-44</td>
<td>15.7%</td>
</tr>
<tr>
<td>45-54</td>
<td>17.3%</td>
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Health Insurance Coverage

Private Insurance Coverage in the U.S. - 1986 to 2006

<table>
<thead>
<tr>
<th>Year</th>
<th>Coverage %</th>
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<tbody>
<tr>
<td>1986</td>
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<tr>
<td>1987</td>
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<td>1988</td>
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<td>2003</td>
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<tr>
<td>2004</td>
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<tr>
<td>2005</td>
<td>0.0%</td>
</tr>
<tr>
<td>2006</td>
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</tbody>
</table>
Health Insurance Premiums

Average Monthly Worker Premium Contribution, 1988-2005

Percentage of Premium Paid by Covered Workers, 1988-2005

Out-of-Pocket Spending on Health Services

Average Annual Deductibles for Employee-Only Coverage in PPO and POS Plans, 1996-2005
Benefits of providing the uninsured with coverage

- Economic value of forgone health of the uninsured
  - (2004 dollars) = $103 Billion

- Perspective (estimated 2004):
  - Medicare program cost ($266.4 billion)
  - Medicaid program cost ($280.7 billion)
  - Tax subsidy for private ($188.5 billion)

Access to the safety net

- Federal safety net spending per uninsured person fell from $546 to $498 during the 2000-2004 period.
- After adjusting for inflation, total federal spending for care for the uninsured increased by 1.3% from 2001-2004 while the number of uninsured increased by 11.2%.
- These trends resulted in an 8.9% decline in spending by the federal government per uninsured person.
- Increased federal support for community health centers (50%)

Source: Kaiser Family Foundation (KFF)

Responsiveness of health care systems: Global View

Source: World Health Organization (WHO) studies
Rich countries spend more

Total expenditure on health, Per capita US$ PPP

Components of responsiveness

1. Dignity
2. Autonomy
3. Confidentiality
4. Prompt attention
5. Quality of basic amenities
6. Choice of care provider
7. Access to social care supports

Several questions asked on each component

1. How often are patients provided with information on alternative treatment options?
2. How often are patients consulted about their preferences on different treatment options?
3. How often is patient consent sought before testing or starting treatment?

Never/Sometimes/Usually/Always
Position and score on responsiveness

1 United States  8.10
2 Switzerland  7.44
5 Germany  7.10
16 France  6.82
20 Singapore  6.70
26 United Kingdom  6.51
108 India  5.02
191 Somalia  3.69

Those who experience low responsiveness

- Old
- Women
- Ethnic minorities
- Indigenous populations
The most “disempowered” consumers

- Prisoners
- Substance abusers
- Sex workers
- Learning disabled
- Asylum seekers
- Homeless
- Travelers

Availability of Health Care

Access to care

Physicians per 1000 people

[Graph showing comparison among countries like Turkey, Korea, Mexico, Japan, United Kingdom, Canada, New Zealand, Poland, Ireland, Australia, Luxembourg, United States, Hungary, Norway, Sweden, Finland, Austria, Portugal, France, Germany, Netherlands, Spain, Czech Republic, Denmark, Iceland, Switzerland, Slovak Republic, Belgium, Italy, Greece]
Health Care Facilities Per 1000 People

Legend

Dentists per 1000 people

Legend
Conclusions

- Relationship between patients and providers
- Poverty correlates with poor access to health care and responsiveness
- Technology is changing access to health information
- Insurance status matters
- Geographic variability