

**Arizona Public Health Association**  
**RESOLUTION**  
**ACCESS TO HEALTH FOR THE UNINSURED**  
September 6, 2007

**Who Are the Uninsured in Arizona?**

Lack of health insurance coverage is a pressing issue and the number of uninsured people in Arizona is at an all-time high, with nearly 1,072,000 people lacking public or private health insurance in 2006. The state ranks 6<sup>th</sup> among all states for the highest percentage of people with no health insurance. During the period from 2004-2005, the U.S. Census reported that 18% of Arizonans lacked health insurance compared to 15.1% for the US population.<sup>1 2</sup>

The U.S. health care system is fragmented and often confusing. For instance, most seniors 65 years and older are covered by Medicare. Medicaid, by contrast, is generally for low-income persons under 65 years. Medicare doesn't pay for nursing home care; but Medicaid will. The people who are most likely to need nursing home care are seniors, eligible for Medicare.

Private coverage is largely employer-based, but employer-sponsored coverage is shrinking and below the national average in Arizona. Between 2000 and 2004, the percentage of non-elderly Arizonans (less than 65 years) covered by employer-sponsored insurance fell 7.3%. Nationwide, 62% of women have employee-sponsored insurance, while only 55% of Arizona women are covered, the fourth lowest among the 50 states and District of Columbia.

Additional key indicators include:

<b>Indicator</b>	<b># AZ*</b>	<b>% AZ</b>	<b>% US</b>	<b>Rank*</b>
Uninsured – total population	1,072,000	18%	15%	6 ↑
Uninsured children 0 – 18 years	264,000	16%	11%	4↑
Uninsured poor children living in poverty (< 100% FPL)	119,000	26%	21%	7↑
Uninsured near poor children (100 – 199% FPL)	76,000	20%	17%	8↑
Uninsured non-elderly adults 19 – 64 years	797,000	23%	20%	9↑
Uninsured non-elderly Hispanic	583,000	55%	31%	3↑
Uninsured non-elderly female	485,000	19%	16%	6 ↑
Uninsured with at least one person employed full-time	763,000	18%	15%	5 ↑
Employer-sponsored coverage of the total population	2,760,000	47%	54%	48↓

\* NOTE: numbers rounded to nearest thousand. ↑ = highest. ↓ = lowest. Rank among the 50 states and the District of Columbia. All data from Kaiser Family Foundation State Health Facts ([www.statehealthfacts.org](http://www.statehealthfacts.org)) for 2004-2005 using data from the US Census Bureau.

Low-income Arizonans with family incomes below 200% of the Federal Poverty Level (FPL) stand the greatest risk of having no insurance. There are gaps in coverage among the following groups:<sup>3</sup>

- Adults without children
- Low-wage workers employed by small businesses: 80% of the uninsured live in working families with at least one full- or part-time worker
- 19-29 year olds are the largest age group with no coverage

The Arizona Health Care Cost Containment System (AHCCCS) is the Arizona Medicaid Program. KidsCare is Arizona's State Children's Health Insurance Program (SCHIP), a program that covers the near poor children. Yet simply being eligible for coverage is not sufficient. "In Arizona, we face a serious challenge in terms of uninsured children. The challenge consists of finding and enrolling the estimated 130,000 uninsured children who are eligible for current health coverage such as KidsCare, not to mention retaining the 65,000 children already enrolled in KidsCare."<sup>4</sup>

### **Benefits of Health Insurance Coverage**

Health insurance provides access to appropriate and continuous care for people. Evidence from large medical research studies reveals that people without health insurance experience adverse health outcomes. They use fewer preventive services, delay or forgo needed care, receive fewer therapeutic services including medications, are four times more likely than insured patients to require emergency care and avoidable hospitalizations, and have higher mortality and disability rates.<sup>5</sup>

The Institute of Medicine recommends that by 2010, everyone in the United States should have health insurance. IOM provides the following set of guiding principles for reform: health care coverage should be universal, continuous and affordable to individuals and families. The insurance agency should be affordable and sustainable for society. Health insurance should enhance health and well being by promoting access to high quality care that is effective, efficient, safe, timely, patient-centered and equitable.<sup>6</sup>

### **Arizona's Safety Net for People without Insurance**

Arizona's safety net consists of a patchwork of programs for primary episodic or emergency care and many of these resources are not available in rural areas of the state, such as:

- Community Health Centers: 87 community health centers provide low-cost or free primary care to 400,000 people in 13 of the 15 counties. Clients include the working poor, low-income families, immigrants, tribal members, the elderly and homeless. Funding: Federal, state, partnerships, fees.
- Healthcare Group: a state-sponsored health plan for small businesses. Nearly 27,000 members were enrolled in managed care plans by July 2007. This program could grow to 100,000 enrollees but enrollment is currently frozen.
- School-based clinics: 95 schools sites in Arizona are staffed with part-time physician assistants and nurse practitioners. Funding: partnerships in the community.
- Hospital emergency care: by law, hospitals must treat patients regardless of citizenship status or ability to pay. Asthmatics in particular receive fragmented care if they rely on emergency room care and do not get linked to an ongoing outpatient system of comprehensive care.
- Academic programs for nurses and medical residents: medical colleges, hospital-based residency training programs, and nursing schools offer a variety of primary care in clinics in urban areas.
- Medical Home Project: school nurses can refer uninsured children who do not qualify for AHCCCS or KidsCare to MD's willing to accept \$5-\$10 fee as payment per visit. The American Academy of Pediatrics sponsors the program and provides free laboratory tests and medications. 850 schools and 144 physicians participate, providing over 835 primary care and specialty appointments each month for eligible children.
- Free medications: Major pharmaceutical companies offer free medications to low-income patients who meet eligibility criteria for coverage.

- County Health Departments
- ISTU/Tribal/Urban Programs
- Behavioral Health Providers

**Recommendations:**

Therefore, the Arizona Public Health Association, Inc. recommends the following incremental steps to improve access to health for uninsured Arizonans:

1. Support policies which promote continuous, affordable access to health care for all Arizonans
2. Improve surveillance and monitoring of health and disease and use the data to design new systems which can improve access to care
3. Support outreach efforts to increase enrollment for public insurance programs like AHCCCS and KidsCare
4. Explore strategies to increase eligibility and simplify enrollment for public insurance
5. Collaborate with partner organizations to promote “access to care initiatives” among businesses, providers, health plans, universities, public health agencies and foundations
6. Explore feasibility of adopting “best practices” that other states have developed to improve access to health insurance in Arizona

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<sup>1</sup> Arizona Population by Primary Insurance Market Segment, 2006. St. Luke’s Health Initiatives, Phoenix, AZ, [www.slhi.org/policy\\_data/primary\\_insurance\\_market\\_segment\\_2006.shtml](http://www.slhi.org/policy_data/primary_insurance_market_segment_2006.shtml).

<sup>2</sup> Income, Poverty and Health Insurance Coverage in the United States: 2004. Figure D-3. US Census Bureau, Washington DC.

<sup>3</sup> State Health Facts. Kaiser Family Foundation. [www.statehealthfacts.org](http://www.statehealthfacts.org)

<sup>4</sup> AHCCCS Today, August 2007, Notes from Tony Rodgers, AHCCCS Director.

<sup>5</sup> Care Without Coverage: Too Little, Too Late. Institute of Medicine of the National Academics. 2002. [www.nap.edu](http://www.nap.edu)

<sup>6</sup> Insuring America’s Health: Principles and Recommendations. Institute of Medicine, January 14, 2004. [www.iom.edu/report.asp?id-17632](http://www.iom.edu/report.asp?id-17632)