

Uninsured Rate Dipped Lower in 2007, to 15.3%

BY MARY ELLEN SCHNEIDER
New York Bureau

The number of Americans without health insurance coverage dropped to 45.7 million in 2007, down from 47 million in 2006, mainly because of increased enrollment in government-funded health insurance programs, according to new data from the U.S. Census Bureau.

The percentage of uninsured Americans fell from 15.8% in 2006 to 15.3% in 2007.

The Census data also showed that fewer U.S. children went without health insurance in 2007. The number of uninsured children fell from 8.7 million in 2006 (11.7%) to 8.1 million in 2007 (11%).

The new figures, which were released by the Census Bureau, come from the Annual Social and Economic Supplement to the Current Population Survey.

While Census officials are still researching why the number of uninsured Americans has decreased, the data points toward increased enrollment in government-funded health insurance programs.

For example, the number of Americans covered by private health insurance stayed about the same at 202 million, but the number of individuals covered by government health insurance program rose to 83 million from 80.3 million in 2006.

There were statistically significant increases in the percentage of people covered by both Medicare and Medicaid.

The number of people with Medicare coverage increased from 40.3 million (13.6%) in 2006 to 41.4 million (13.8%) in 2007, and the number enrolled in Medicaid increased from 38.3 million (12.9%) in 2006 to 39.6 million (13.2%) in 2007.

"The expansion in public coverage is really what's driving this

reduction," said Len Nichols, Ph.D., an economist and director of the health policy program at the New America Foundation, a nonpartisan public policy institute.

As the economy has weakened, more people who previously could not afford private coverage became eligible for public programs, he said. The good news is that the public programs safety net has caught these individuals, Dr. Nichols said, but the downside is that more and more people will drift into government-sponsored coverage if the government remains stalled on health care reform.

A careful analysis of the Census figures shows that the private health insurance system in the United States is "hanging on by its fingernails," Dr. Nichols said, and is in need of reform.

There are worrisome trends in

the Census data that could cause the number of uninsured Americans to go back up in the near future, said Mark A. Goldberg, se-



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DR. NICHOLS

nior vice president for policy and strategy at the National Coalition on Health Care. The organization is a nonpartisan coalition focused on achieving coverage for all Americans.

Even though the number of uninsured Americans declined in 2007, the percentage of individuals who were able to obtain either employer-based or individual coverage also dropped. If the current economic downturn continues, safety net programs like

Medicaid will be vulnerable to state-level budget cuts, he said, and could be unable to keep up with demand.

The latest uninsured figures highlight the need to shore up the employer-based health insurance system, said Karen Davis, Ph.D., president of the Commonwealth Fund.

Policy makers need to find ways to make coverage more affordable for employers who want to offer it to their workers and for individuals purchasing their own, she said.

Leaders should consider the range of options for expanding coverage under a mixed public-private system, whether it is requiring employers to offer coverage or contribute to it, or requiring individuals to obtain coverage and offering assistance to pay for it, she said.

"The problem is real and the public wants their leaders to do something about it," Dr. Davis said. ■

More Than 40% of Working-Aged Adults Struggle With Medical Bills

BY MARY ELLEN SCHNEIDER
New York Bureau

A growing number of working-age Americans are struggling to pay their medical bills, according to a new report from the Commonwealth Fund.

In 2007, 41% of U.S. adults aged younger than 65 years reported having medical bill problems or medical debt, compared with 34% in 2005. The problem is growing across all income groups but is most common among low- and moderate-income individuals, where more than half reported being unable to pay their medical bills, being contacted by a collection agency about an unpaid medical bill, significantly changing their way of life to pay a medical bill, or paying off medical debt over time.

As health care costs have risen, employers have struggled to provide employee health insurance, leading some to drop coverage or increase employee cost sharing, said Sara R. Collins, Ph.D., lead author of the report and assistant vice president at the Commonwealth Fund. At the same time, most Americans are facing relatively stagnant wages and rising prices for other necessities such as food and gas, Dr. Collins

said during a press briefing to release the report.

The findings are based on the Commonwealth Fund Biennial Health Insurance Survey, a nationally representative telephone survey conducted in 2001, 2003, 2005, and 2007. The 2007 data come from an analysis of survey responses from 2,616 adults aged under 65 obtained between June and October 2007.

Of the 28% of working-age adults who were paying off medical debt over time in 2007, nearly a quarter of them owed \$4,000 or more. About 34% of adults who were uninsured at the time of the survey reported owing \$4,000 or more in medical bills, compared with 20% of those who were insured.

Both insured and uninsured Americans are spending more out of pocket for their care, according to the report. For example, in 2007, 48% of Americans aged 19-64 years spent 5% or more of their income annually on out-of-pocket costs and premiums, up from 41% in 2001. And 33% of working-age Americans spent 10% or more annually on these out-of-pocket medical expenses, compared with 21% in 2001. ■

The report is available at www.commonwealthfund.org.

Low Socioeconomic Status Patients Willing to E-Mail

BY ROBERT FINN
San Francisco Bureau

HONOLULU — The "digital divide" separating society's haves and have-nots may not be as deep as many fear, according to a study of 120 parents of adolescent patients and the patients themselves.

In a survey, more than 60% of parents and adolescents of low socioeconomic status (SES) from one Boston pediatric practice indicated a willingness to contact physicians via e-mail if given the option, according to Dr. Tarissa Mitchell of Boston Medical Center.

Among survey respondents, 66% stated that they had access to e-mail and/or computers at home. But only 19% of the parents had their health care provider's e-mail address, and only 3% had ever used e-mail to contact their provider.

Dr. Mitchell and Dr. Shikha G. Anand of the Whittier Street Health Center, Roxbury, Mass., conducted a convenience sample survey of 120 parents of adolescent patients and the adolescent patients who were above the age of 13 at an urban community health center in Boston over a 4-month period. At that center, five pediatric providers serve 3,876 low SES children, 84% of whom are publicly insured and 82% of whom self-identify as black or Hispanic.

Compared with respondents without e-mail availability at home,

those with home e-mail availability were significantly more willing to contact their physicians: 77% vs. 33%. And respondents who used e-mail more frequently also were significantly more willing to contact their provider this way.

For example, among respondents whose e-mail was always on, 89% were willing to e-mail their physicians. This declined to 60% among respondents who used e-mail only weekly and to 43% of those who used e-mail monthly or less frequently than that, Dr. Mitchell and Dr. Anand wrote in a poster presented at the annual meeting of the Pediatric Academic Societies.

Only 13% of the respondents stated that they would never use e-mail to communicate with their provider. The most common reason given was a desire to telephone the office, but they also cited lack of access to e-mail, difficulty with the English language, concerns over bothering the doctor with e-mails, and an expectation of slower response time.

In addition, 33% of the entire survey population expressed concern that e-mail may not be private and could be reviewed by individuals other than their health care provider.

Dr. Mitchell and Dr. Anand disclosed that they had no conflicts of interest related to this presentation. ■

UPCOMING MEETINGS

European Society for Dermatological Research

International Society for Dermatologic Surgery

Skin Disease Education Foundation's Women's and
Pediatric Dermatology Seminar