

Uninsured Workers— Demographic Characteristics, 1996

Estimates for U.S. Civilian Noninstitutionalized Workers Ages 16-64

Introduction

For most Americans, health insurance obtained through the workplace is the primary source of private coverage. Data from the 1996 Medical Expenditure Panel Survey (MEPS), conducted by the Agency for Health Care Policy and Research (AHCPR), indicate that nearly two-thirds of Americans under 65 years of age obtained job-related health insurance during the first half of 1996 (data not shown). However, employment does not necessarily lead to health insurance coverage for many working Americans. Nearly a fifth (18 percent) of working Americans ages 16-64 (approximately 23 million people) were uninsured during the first half of 1996. These workers represented half (51 percent) of the total uninsured population. MEPS data also indicate that certain demographic characteristics such as age, race/ethnicity, sex, and health status have significant effects on workers' health insurance status.

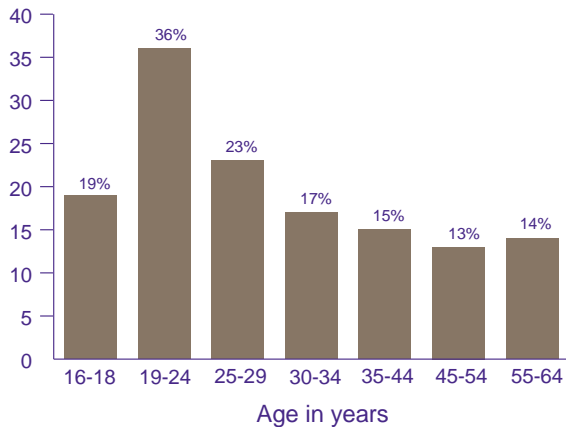
Findings

Age plays a key role in whether or not a worker has health insurance. Young adults ages 19-24 were more at risk of being uninsured than any other age group (Figure 1). Although these young workers represented only 12 percent of all workers under age 65, they composed 23 percent of the uninsured

Briefly stated:

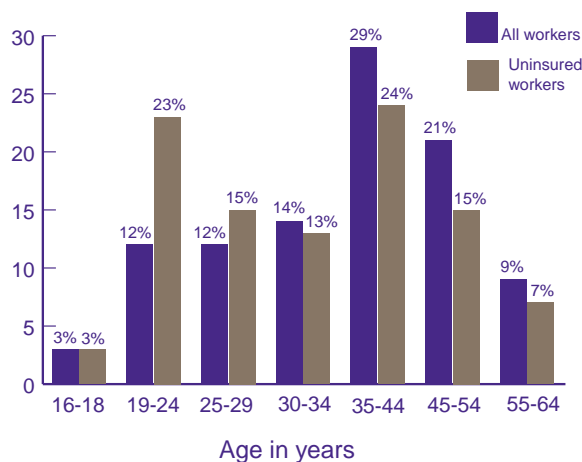
- Workers with the following demographic characteristics were most likely to be uninsured: young adults ages 19-24, Hispanic males, and those with poor or fair health status.
- More than a third of young adult workers ages 19-24 were uninsured. Workers age 35 and over had a lower risk of being uninsured than all workers in general.
- Black and Hispanic workers were much more likely than white workers to lack any type of health insurance coverage. Hispanic males were far more at risk than any other group, with 44 percent uninsured.
- Workers in poor or fair health were more likely to be uninsured than those in excellent or very good health.
- Women workers were more likely than male workers to be insured.

Figure 1. Percent uninsured by age for workers ages 16-64: First half of 1996



▲ Young workers ages 19-24 were the age group most likely to be uninsured. More than a third of them (36 percent) lacked health insurance during the first half of 1996.

Figure 2. Age comparison of all workers and uninsured workers ages 16-64: First half of 1996



▲ Young workers ages 19-24 were disproportionately represented among uninsured workers.

working population (Figure 2). Workers age 35 and over had a lower risk of being uninsured.

Minority workers were substantially more likely than white workers to lack health insurance. Approximately 38 percent of Hispanic workers were uninsured, compared to 26 percent of black workers and 15 percent of white workers (data not shown). As a result, minority workers were disproportionately represented among the working uninsured. For example, Hispanic workers represented 9 percent of all workers but 19 percent of uninsured workers; black workers represented 11 percent of all workers but 15 percent of uninsured workers (Figure 3).

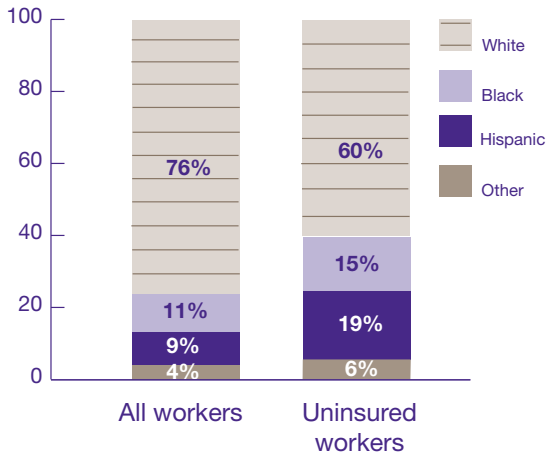
Working women within each racial/ethnic group—Hispanic, black, and white—were less likely than their male counterparts to be uninsured (Figure 4). Although minority female workers were less likely than minority male workers to be uninsured, they still were much more likely than employed white females to be uninsured. Among female workers, 30 percent of Hispanics and 22 percent of blacks were uninsured, compared to 13 percent of whites.

About 28 percent of workers who were in fair health and 25 percent of workers who were in poor health were uninsured (Figure 5). However, lack of insurance was much less common among workers in excellent or very good health (16 percent for each group).

About MEPS

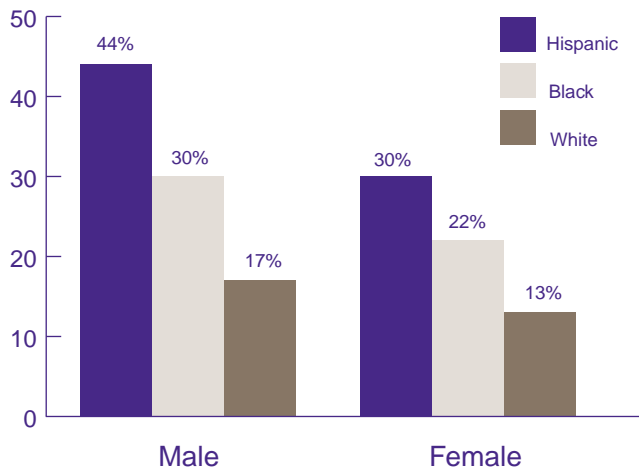
The Medical Expenditure Panel Survey (MEPS) collects nationally representative data on health care use, expenditures, source of payment, and insurance coverage for the U.S. civilian noninstitutionalized population. MEPS is cosponsored by the Agency for Health Care Policy and Research (AHCPR) and the National Center for Health Statistics (NCHS). This *Highlights* summarizes data concerning the characteristics of the working uninsured population in the United States during the first half of 1996, as derived from the MEPS Household Component, Round 1. For more information about MEPS, see the sources listed on the back page.

Figure 3. Race/ethnicity comparison of all workers and uninsured workers ages 16-64: First half of 1996



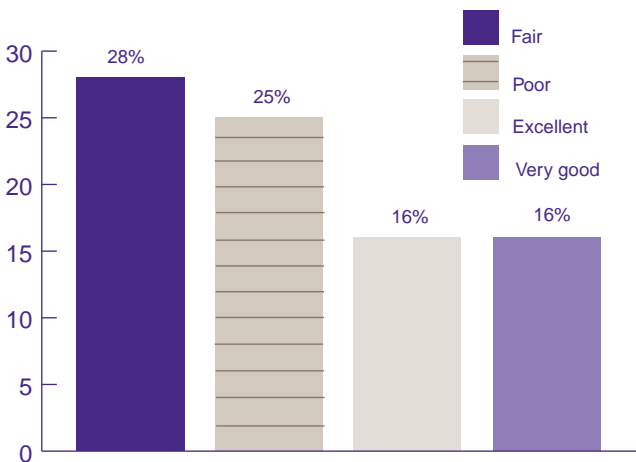
Hispanics and blacks were disproportionately represented among the working uninsured.

Figure 4. Percent uninsured by race/ethnicity and sex for workers ages 16-64: First half of 1996



Hispanic male workers were far more likely to be uninsured than other workers.

Figure 5. Percent uninsured by health status for workers ages 16-64: First half of 1996



Fair or poor health status was directly associated with a lack of health care coverage.

DATA SOURCE: 1996 Medical Expenditure Panel Survey Household Component, Round 1.

MEPS HIGHLIGHTS

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For more information about MEPS, call the MEPS information coordinator at AHCPR (301-594-1406) or visit the MEPS section of the AHCPR Web site at

<http://www.ahcpr.gov/>

For a detailed description of the MEPS survey design, sample design, and methods used to minimize sources of nonsampling error, see the following publications:

Cohen J. Design and methods of the Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 1*. AHCPR Pub. No. 97-0026.

Cohen S. Sample design of the 1996 Medical Expenditure Panel Survey Household Component. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Methodology Report No. 2*. AHCPR Pub. No. 97-0027.

The estimates in this *Highlights* are based on the following, more detailed publication:

Monheit AC, Vistnes JP. Health insurance status of workers and their families: 1996. Rockville (MD): Agency for Health Care Policy and Research; 1997. *MEPS Research Findings No. 2*. AHCPR Pub. No. 97-0065.

These publications are available from the AHCPR Clearinghouse (800-358-9295) and on the AHCPR Web site.



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