

DESCRIPTION

Health insurance is one of the best known and most common means used to obtain access to health care. Increasingly, the evidence points to harmful health and economic consequences related to being uninsured. These consequences may extend beyond the uninsured individual to the family and community, the health care system and society as a whole.¹ Uninsured people receive less medical care and less timely care, they have worse health outcomes, and lack of insurance is a fiscal burden for them and their families.² Low levels of insurance in an area can also burden medical providers because of higher demand for free or reduced-cost care. Safety-net care from hospitals and clinics improves access to care but does not fully substitute for health insurance.² Some may believe that people always have access to medical care because they can simply go to an emergency room. But even areas with well supported safety net care do not remove barriers to access to the same extent as having health insurance.¹ The Institute of Medicine estimated that lack of coverage was associated with about 18,000 extra deaths per year among uninsured adults.³

HOW WE ARE DOING

During 2013 to 2015, Ramsey County's uninsurance rate decreased from 10.6 percent in 2013 to 4.7 percent due to the implementation of the federal health reform legislation under the Patient Protection and Affordable Care Act (ACA). But according to the 2017 Minnesota Health Access Survey, uninsurance rates in Ramsey County increased from 4.8 percent in 2015 to 6.2 percent in 2017.⁴

Health insurance coverage can come from various sources including public coverage, group coverage and individual coverage. In Ramsey County, the greatest source of insurance in 2017 came from group coverage.⁴ Group coverage is provided by employers to employees and their spouses and dependents. The second greatest source of coverage in Ramsey County is public insurance.⁴ The percentage of individuals who are covered through a Minnesota public insurance program increased from 29 percent in 2013 to 40.1 percent in 2017.⁴

BENCHMARK INDICATOR

Healthy People 2020⁵: Increase the proportion of persons with medical insurance.
U.S. Target: 100 percent

DISPARITIES

Significant disparities in health insurance coverage continue in Ramsey County, especially by race, ethnicity, education, income and geography. According to the Minnesota Health Access Survey, Hispanic residents continue to have highest uninsurance rate in Ramsey County, with 17.1 percent uninsured in 2017.⁴ Health insurance coverage also varies by educational attainment. Individuals with a high school degree or less reported a 12 percent uninsurance rate in Ramsey County in 2017.⁴ In comparison, only 2.6 percent of individuals with college or postgraduate degrees were without insurance in 2017.⁴ In suburban Ramsey County, the uninsured rate decreased between 2015 and 2017 (3.7 percent to 2.9 percent) yet increased for City of St. Paul residents (5.6 percent to 8.5 percent).⁴

Information to note

- In Ramsey County, the uninsurance rate increased from 4.8% in 2015 to 6.2% in 2017.
- Hispanic residents continue to have the highest uninsurance rates in Ramsey County.
- Ramsey County residents living below 100% of the Federal Poverty Level are more likely to be uninsured than higher income residents.

¹ Institute of Medicine. Coverage Matters: Insurance and Health Care. The National Academies of Sciences, Engineering, and Medicine. 2001. <http://www.nationalacademies.org/hmd/~/media/Files/Report%20Files/2003/Coverage-Matters-Insurance-and-Health-Care/Uninsurance8pagerFinal.pdf>. Published September 2001. Accessed July 2018.

² Bovbjerg T, Hadley J. Why is health insurance important? The Urban Institute. 2007. DC-SPC no. 1. <https://www.urban.org/sites/default/files/publication/46826/411569-Why-Health-Insurance-is-Important.PDF>. Published November 2007. Accessed July 2018.

³ Institute of Medicine. Care without Coverage: Too Little, Too Late. The National Academies of Sciences, Engineering, and Medicine. 2002. <http://www.nationalacademies.org/hmd/~/media/Files/Report%20Files/2003/Care-Without-Coverage-Too-Little-Too-Late/Uninsured2FINAL.pdf>. Published May 2002. Accessed July 2018.

⁴ Minnesota Department of Health. Minnesota Health Access Survey. Personal communication from MDH Health Economics Division. July 2018.

⁵ Access to Health Services. Healthy People 2020. <https://www.healthypeople.gov/2020/topics-objectives/topic/Access-to-Health-Services>. Accessed July 2018.

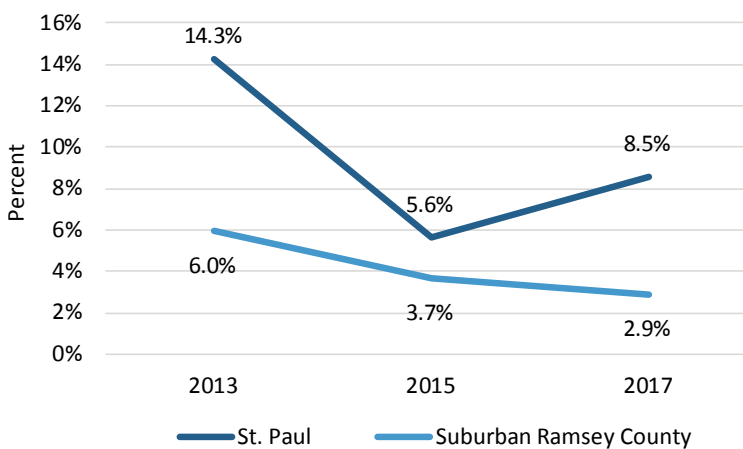
RISK FACTORS

There is an association between poverty and lack of health insurance. Individuals in Ramsey County with incomes below 100 percent of the federal poverty level have the highest rates of uninsurance.⁶

WHAT RAMSEY COUNTY GOVERNMENT IS DOING

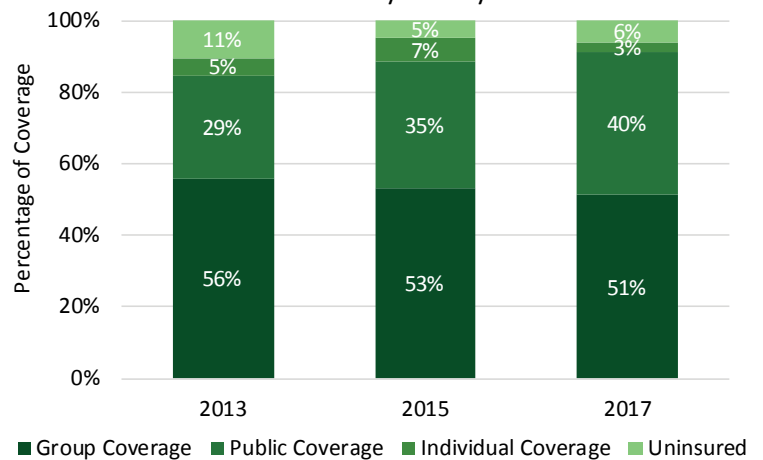
Saint Paul – Ramsey County Public Health and Ramsey County Financial Services provide referrals and/or assistance to uninsured clients to help them obtain health care coverage through Medical Assistance, MinnesotaCare, and specialty programs such as the Minnesota Family Planning Program or SAGE program for cancer screening for women. Ramsey County provides funding to five Ramsey County community clinics to help off-set the cost of medical and dental services provided to uninsured and underinsured clients. Saint Paul – Ramsey County Public Health maintains a disease surveillance role, monitoring the level of insured/uninsured status among Ramsey County residents.

Uninsured Rate, St. Paul vs. Suburbs, Ramsey County



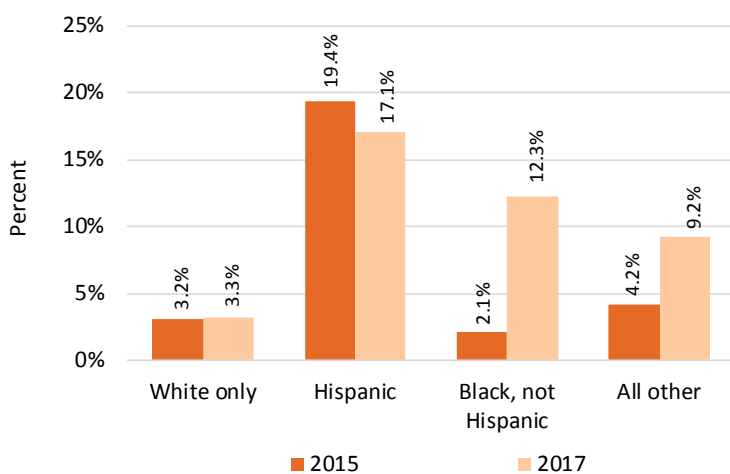
Source: Minnesota Health Access Survey.⁶

Sources of Health Insurance Coverage Over Time, Ramsey County



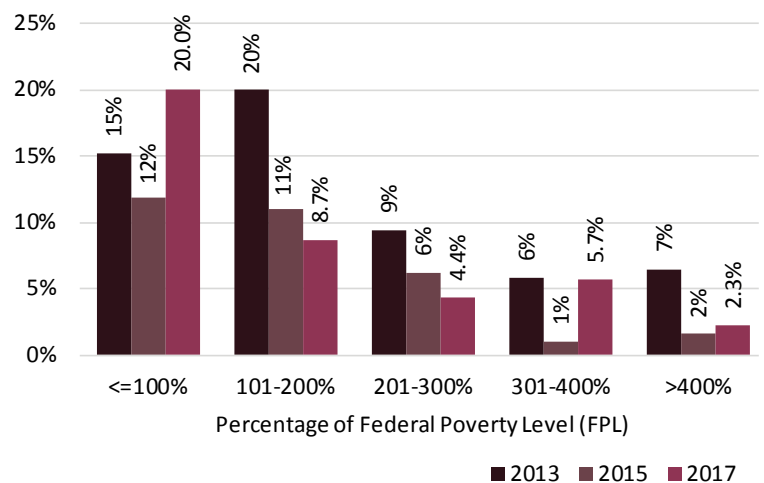
Source: Minnesota Health Access Survey.⁶

Uninsured by Race/Ethnicity, Ramsey County



Source: Minnesota Health Access Survey.⁶

Uninsurance Rate by Income, Ramsey County



Source: Minnesota Health Access Survey.⁶

⁶ Minnesota Department of Health. Minnesota Health Access Survey. Personal communication from MDH Health Economics Division. July 2018.