



NEWS RELEASE

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**New Survey Finds Rising Numbers of Uninsured
In Moderate and Middle Income American Families**

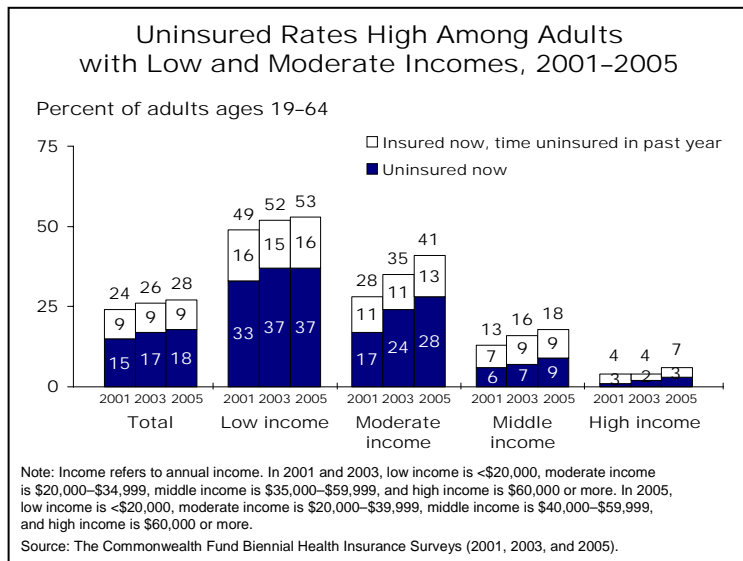
One of Five Working-Age Adults Is Paying Off Medical Debt

*Nearly Sixty Percent of Uninsured Adults with Chronic Illness Skip Pills Due to Cost,
Many End Up in ER or Hospital*

New York, NY, April 26th, 2006—Two of five (41%) working-age Americans with incomes between \$20,000 and \$40,000 a year were uninsured for at least part of the past year—a dramatic and rapid increase from 2001 when just over one-quarter (28%) of those with moderate incomes were uninsured, according to a new report from The Commonwealth Fund, *Gaps in Health*

Insurance: An All-American Problem, prepared for the Fund’s Commission on a High Performance Health System.

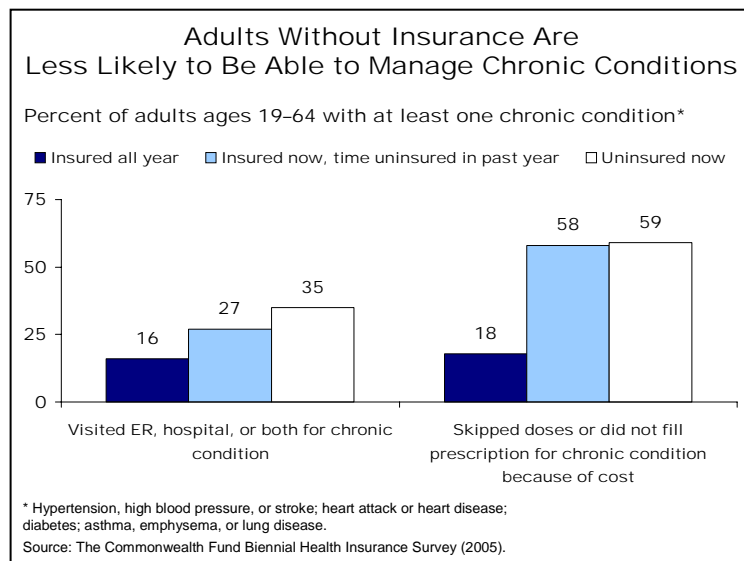
Lower-income adults were still the most likely to be uninsured. The vast majority of the uninsured are in working families: of the estimated 48 million working-age Americans uninsured during the year, 67% were in families where at least one person was working full-time.



“The jump in uninsured among those with modest incomes is alarming, particularly at a time when our economy has been improving,” said Commonwealth Fund President and study co-author Karen Davis. “If we don’t act soon to expand coverage to the uninsured, the health of the U.S. population, the productivity of our workforce, and our economy are at risk.”

The study finds a startling number of adults are now grappling with medical debt—unpaid medical bills. One of five (21%) adults, including insured and uninsured, currently has medical debt they are paying off over time, and one-third (34%) either had medical bill problems in the past year or were paying off accrued medical debt. The survey of adults ages 19 to 64 reveals that medical debt is not an issue for the uninsured alone. Nearly two-thirds (62%) of adults with medical bills or debt problems said that they or their family member were insured when they incurred the debt.

The survey looked at the medical consequences families face when they go without health care coverage. Researchers found that an alarmingly high proportion—59 percent—of adults with a time uninsured in the past year with chronic illnesses, such as diabetes and asthma, went without or skipped their medications because they couldn't afford them. This



same group was also more likely to go to an emergency room or hospital for chronic conditions than those with insurance. One-third (35%) of uninsured adults with chronic conditions visited an ER, or stayed in the hospital overnight, or did both, compared to 16% of those insured all year with a chronic condition.

Americans without health insurance were also more likely to go without recommended cancer, cholesterol, and blood pressure screenings. According to the report, only 18% of adults ages 50 to 64 who were uninsured at the time of the survey had a colon cancer screening in the past five years compared to 56% of insured adults. Similarly, fewer than half (48%) of women ages 50 to 64 who were uninsured at the time of the survey had a mammogram in the past two years, compared to three-fourths of insured women. An analysis of the health care experiences of adults released today by the Robert Wood Johnson Foundation confirms similar trends in every state. Information on this new study is available at www.covertheuninsured.org.

“These findings paint a disturbing picture of the day-to-day impact of being uninsured on the physical as well as financial health of millions of Americans,” said Sara Collins, Commonwealth Fund Senior Program Officer, and the study’s lead author. “The uninsured

are more likely to go without preventive care or screening tests that could prevent more serious and costly health problems. For an uninsured person who is unlucky enough to get sick, it is easy to see how quickly they can fall into a downward spiral of debt, forgone care, and poorer health.”

Researchers also found that being uninsured exacerbates existing problems with efficiency in health care. The uninsured are less likely than the insured to have a regular doctor, and are more likely to endure the effects of our fragmented health care system as they move from one place of care to another. Nearly one-quarter (23%) of adults who are currently uninsured or had a time uninsured reported that test results or records were not available at the time of a doctor’s appointment, compared with 15% of insured adults. Nearly one-fifth (19%) of uninsured adults had duplicate tests ordered, compared with 10 percent of insured adults.

Other key survey findings include:

- More than two of five (44%) of all working-age adults with medical debt reported it was \$2,000 or more.
- More than 4 of 5 (82%) uninsured adults had been uninsured for one year or more.
- 63% of working uninsured adults were solo business owners or were working for firms with fewer than 100 employees.
- More than half (51%) of uninsured adults reported medical debt or bill problems. Of those, nearly half (49%) used up all their savings to pay their bill, and two of five were unable to pay for basic necessities like food, heat, or rent because of medical bills.
- Only 35% of uninsured adults had a dental exam in the past year, half the rate of adults with medical insurance.
- Just 41% of uninsured adults had a regular doctor or other health care professional compared with 86% of insured adults.
- 37% of all working-age adults reported cost-related problems or delays in getting medical care. The uninsured are particularly vulnerable, with 60% reporting problems or delays in getting medical care.

Methodology

The Commonwealth Fund Biennial Health Insurance Survey was conducted by Princeton Survey Research Associates International from August 18, 2005 through January 5, 2006. The survey consisted of 25-minute telephone interviews in either English or Spanish and was conducted among a random, nationally representative sample of 4,350 adults age 19 and older living in the continental United States. This analysis focuses on the U.S. population ages 19 to 64.