



## NEWS RELEASE

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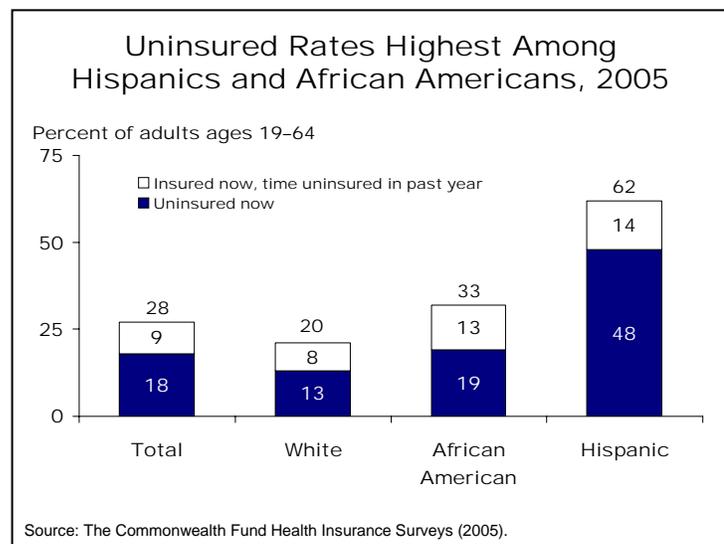
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### **Hispanic and African American Adults Are Uninsured at Rates One-and-a Half to Three Times Higher Than White Adults**

#### *Sixty-Two Percent of Working-Age Hispanics Were Uninsured During Year*

New York, NY, August 1, 2006—Hispanic and African American working-age adults in the U.S. are at greater risk of experiencing gaps in insurance coverage, lacking access to health care, and facing medical debt than white working-age adults, according to a new report from The Commonwealth Fund.

Sixty-two percent of Hispanic adults ages 19 to 64—an estimated 15 million adults—were uninsured at some point during the year, a rate more than three times as high as that for white working-age adults (20%). Uninsured rates for working-age African-American adults are also high, with one-third (33%)—more than 6 million adults—uninsured or experiencing a gap in coverage during the year.



Uninsured rates for low-income Hispanics are exceptionally high: three-quarters (76%) of Hispanic adults with incomes below 200% of the federal poverty level had a time uninsured, compared to 44% of African Americans and 46% of whites with low incomes. Disparities persist across income levels—forty percent of Hispanic adults with incomes over 200% of poverty were uninsured during the year, compared to about one-quarter (23%) of African American adults and 12 percent of white adults in that income group.

The report, [\*Health Care Disconnect: Gaps in Coverage and Care for Minority Adults\*](#), by Commonwealth Fund researchers Michelle M. Doty and Alyssa Holmgren, analyzes data from the Commonwealth Fund 2005 Biennial Health Insurance Survey.

“These findings are extremely troubling, and indicate missed opportunities to ensure a healthy and productive workforce,” said Commonwealth Fund President Karen Davis. “Minority Americans face persistent disparities in rates of health care coverage, as well as cost and access barriers to care even when they do have health insurance.”

Survey results reveal that a high proportion of Hispanics are disconnected from the health system, and uninsured Hispanic adults are at especially high risk for not getting needed care. More than one-fourth (27%) of uninsured Hispanic adults with health problems had no doctor’s visit in the past year, compared to 17 percent of African American and white adults.

Hispanics are also least confident about being able to self-manage chronic diseases or health problems. Thirty-one percent of uninsured Hispanic adults with health problems said they were not too or not at all confident about managing health problems, compared to 16 percent of African American adults and 17 percent of white adults with health problems.

African American adults have higher rates of health problems among both lower and higher income groups. Sixty-three percent of African American adults under 200% of poverty reported they had one of four chronic diseases (hypertension, heart disease, diabetes or asthma) or a disability, compared to half of low-income whites and 39 percent of low-income Hispanic adults. Forty-five percent of African American adults over 200% of poverty report health problems, compared to 32 percent of whites and 23 percent of Hispanics in the higher income group.

Sixty-one percent of African American adults who were uninsured during the year reported medical bill or debt problems, compared to 56% of uninsured white adults and 35% of uninsured Hispanic adults.

Other key findings include:

- About one-third (36%) of African American adults visited an emergency room for a condition that could have been treated by a regular doctor if one had been available, compared to 19% of Hispanics and 19% of whites.
- Just three-quarters of Hispanic adults had their blood pressure checked in the past year, compared to 94 % of African American adults and 90% of white adults.
- Half (51%) of Hispanic adults had a dental exam in the past year, compared to 60% of African American adults and 65% of white adults.

The authors conclude that “insurance plays an important role in reducing racial and ethnic disparities in access to care. However, expanding insurance coverage among African Americans and Hispanics, alone, will not ensure equal access and equal care. Policies that

seek to improve the availability of on-going care relationships with health care providers and promote continuity in care would also benefit minority Americans and improve access and quality of 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 non-elderly adults ages 19 to 64 and includes 1,677 non-Hispanic whites, 673 African Americans, and 764 respondents who identified themselves as Latino or Hispanic.

**The Commonwealth Fund is a private foundation supporting independent research on health and social issues.**