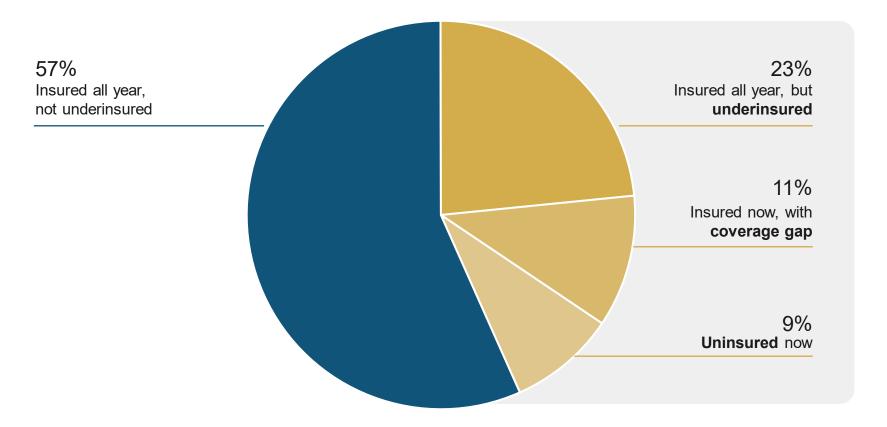
#### More than two of five working-age adults are inadequately insured.

Percentage of adults ages 19-64, by insurance coverage status within the past 12 months

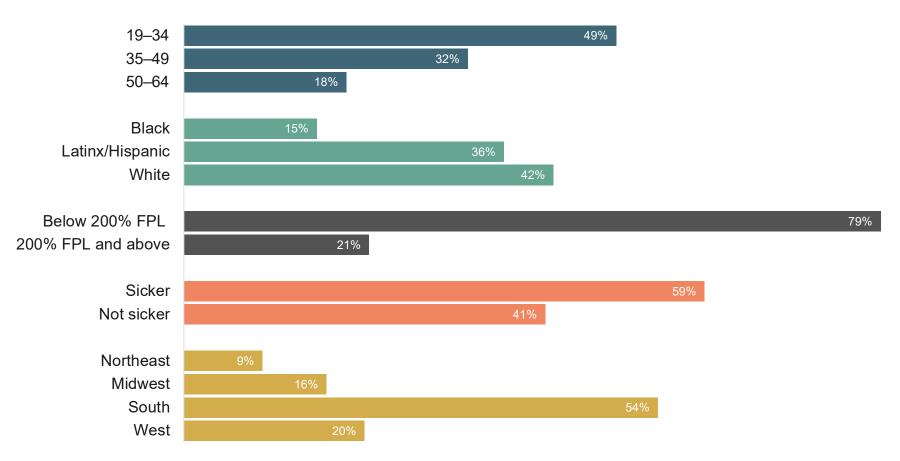


Notes: "Insured all year, but underinsured" refers to adults who were insured all year but experienced one of the following: out-of-pocket costs, excluding premiums, equaled 10% or more of household income; out-of-pocket costs, excluding premiums, equaled 5% or more of household income if low-income (<200% of poverty); or deductibles equaled 5% or more of household income. "Insured now, with coverage gap" refers to adults who were insured at the time of the survey but were uninsured at any point in the 12 months prior to the survey field date. "Uninsured now" refers to adults who reported being uninsured at the time of the survey.



## People who were uninsured for a year or longer were disproportionately young, Latinx/Hispanic, poor, sicker, and living in the South.

Percentage distribution of adults ages 19–64 who were uninsured for one or more years, by age, race, income, health status, and region^

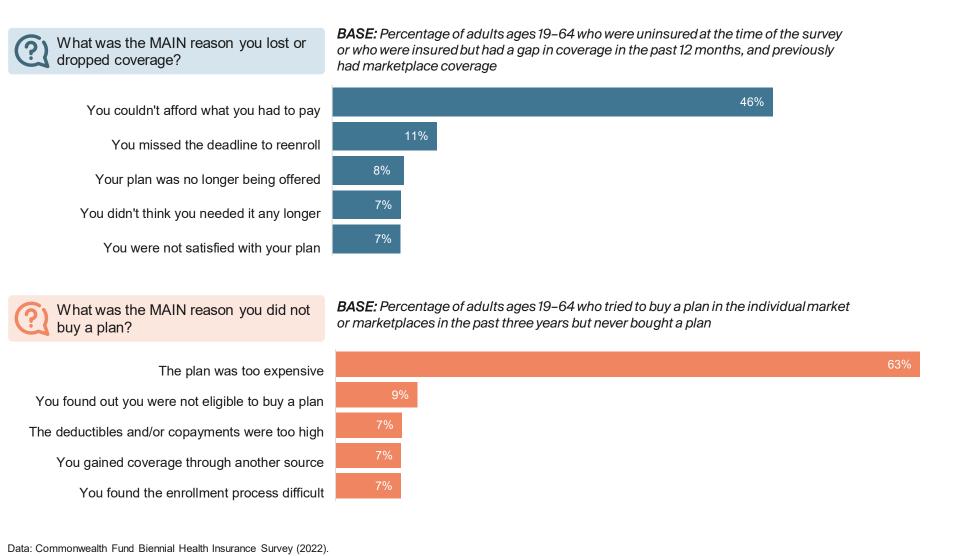


<sup>^</sup> Base: Adults ages 19-64 who were insured but had a gap in coverage in the past year or were uninsured at the time of the survey.

Notes: FPL = federal poverty level. "Sicker" includes respondents with fair or poor health status, or at least one of the following chronic health conditions: hypertension or high blood pressure; heart failure or heart attack; diabetes; asthma, emphysema, or lung disease; or high cholesterol.



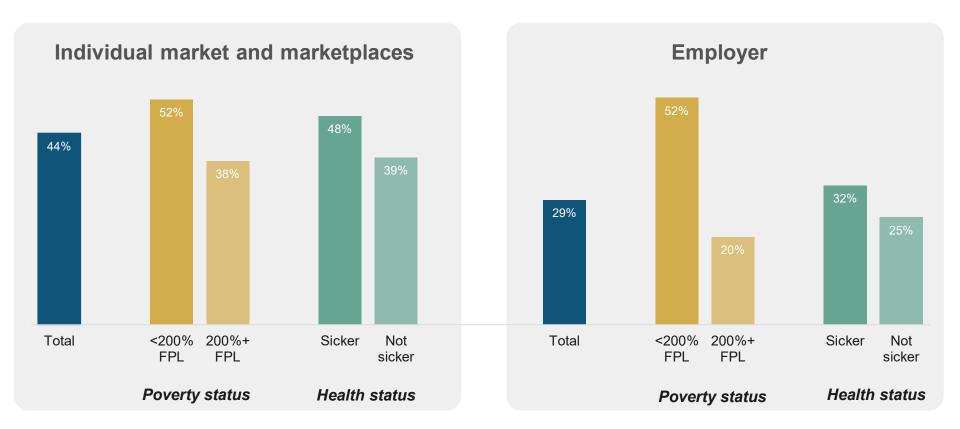
#### Premium costs are the main reason people give for not buying marketplace or individual market coverage or for dropping their coverage.





Two of five people enrolled in individual-market or marketplace plans and three of 10 in employer plans were underinsured; people with low income and health problems were most at risk.

Percentage of adults ages 19–64 insured all year who were underinsured^



<sup>^</sup> Base: Adults ages 19–64 who were insured all year and had individual market coverage (including marketplace plans) or employer-sponsored insurance at the time of the survey.

Notes: "Underinsured" refers to adults who were insured all year but experienced one of the following: out-of-pocket costs, excluding premiums, equaled 10% or more of household income; out-of-pocket costs, excluding premiums, equaled 5% or more of household income if low-income (<200% of poverty); or deductibles equaled 5% or more of household income. Coverage type given at time of survey; respondent was insured all year but may not have had same insurance for full year. FPL = federal poverty level. "Sicker" includes respondents with fair or poor health status, or at least one of the following chronic health conditions: hypertension or high blood pressure; heart failure or heart attack; diabetes; asthma, emphysema, or lung disease; or high cholesterol.

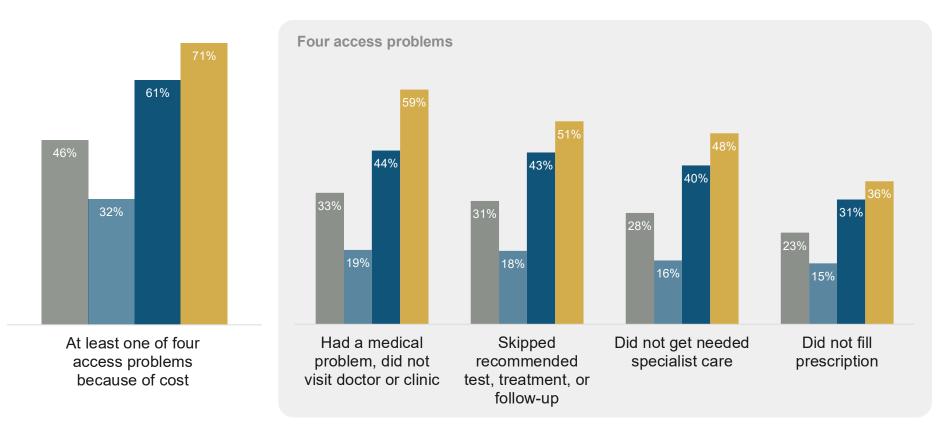
Data: Commonwealth Fund Biennial Health Insurance Survey (2022).



## Cost-related problems getting needed care were reported at the highest rates by adults who were underinsured or lacked continuous coverage.

Percentage of adults ages 19–64 who in the past year had any of four problems accessing care because of cost

■ Total ■ Insured all year, not underinsured ■ Insured all year, underinsured ■ Uninsured any time in the past year



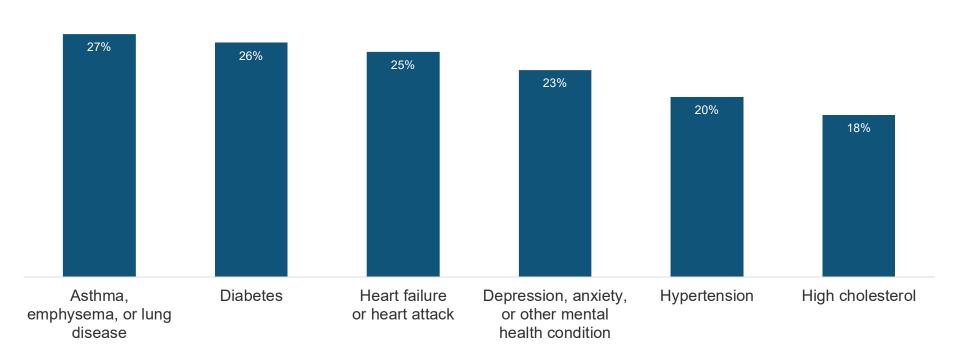
Notes: "Underinsured" refers to adults who were insured all year but experienced one of the following: out-of-pocket costs, excluding premiums, equaled 10% or more of household income; out-of-pocket costs, excluding premiums, equaled 5% or more of household income if low-income (<200% of poverty); or deductibles equaled 5% or more of household income. "Uninsured any time in the past year" refers to adults who were either uninsured at the time of the survey or were insured but spent some time uninsured in the past year.

Data: Commonwealth Fund Biennial Health Insurance Survey (2022).



## Up to one-quarter of people with chronic health problems said they had not filled a prescription in the past year for their health condition because of the cost.

Percentage of adults ages 19-64 with a chronic health condition who skipped or didn't fill a prescription in the past year because of the cost^

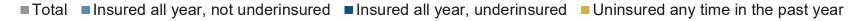


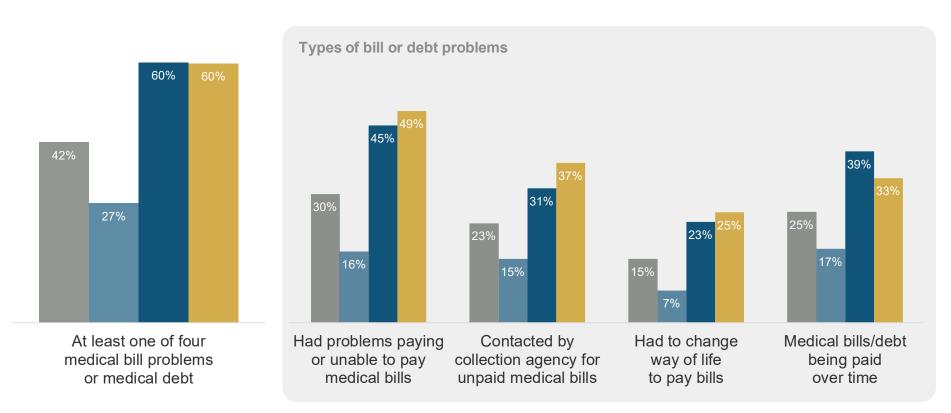
<sup>^</sup> Base: Adults ages 19-64 with a chronic health condition.



## Medical bill problems or debt were reported at the highest rates by adults who were underinsured or lacked continuous coverage.

Percentage of adults ages 19-64 who had medical bill or debt problems in the past year





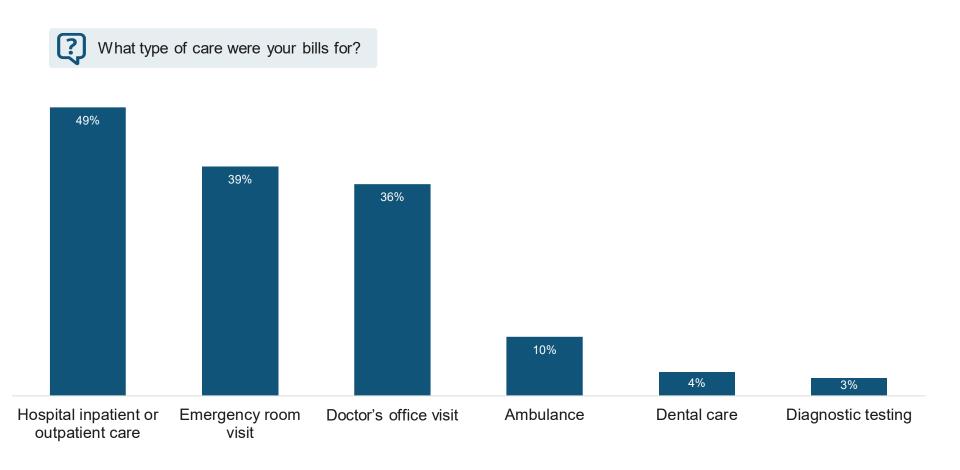
Notes: "Underinsured" refers to adults who were insured all year but experienced one of the following: out-of-pocket costs, excluding premiums, equaled 10% or more of household income; out-of-pocket costs, excluding premiums, equaled 5% or more of household income if low-income (<200% of poverty); or deductibles equaled 5% or more of household income. "Uninsured any time in the past year" refers to adults who were either uninsured at the time of the survey or were insured but spent some time uninsured in the past year.

Data: Commonwealth Fund Biennial Health Insurance Survey (2022).



# Hospital inpatient and outpatient care were the primary source of people's medical bill problems.

Percentage of adults ages 19-64 who had medical bill or debt problems^

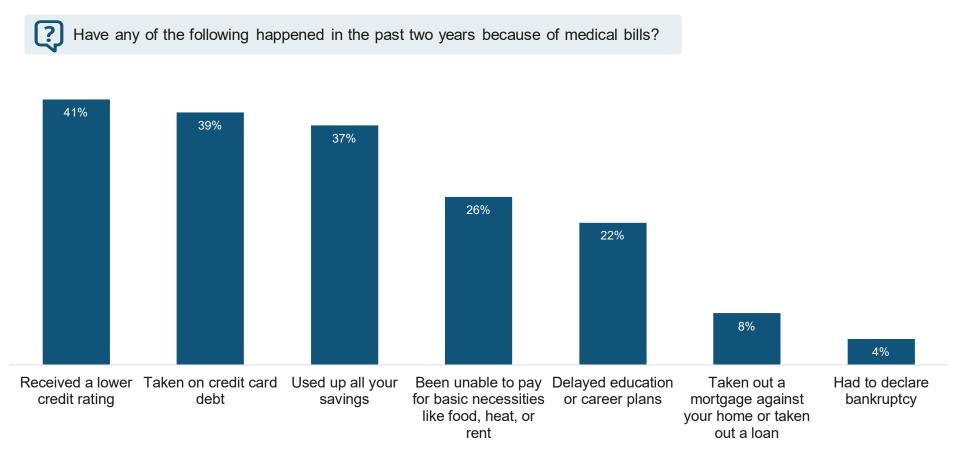


<sup>^</sup> Base: Respondents who reported at least one of the following medical bill problems in the past 12 months: had problems paying medical bills, contacted by a collection agency for unpaid bills, had to change way of life in order to pay medical bills, or has outstanding medical debt.



# People who had problems paying medical bills or were paying off medical debt experienced long-term financial consequences.

Percentage of adults ages 19-64 who had medical bill or debt problems^



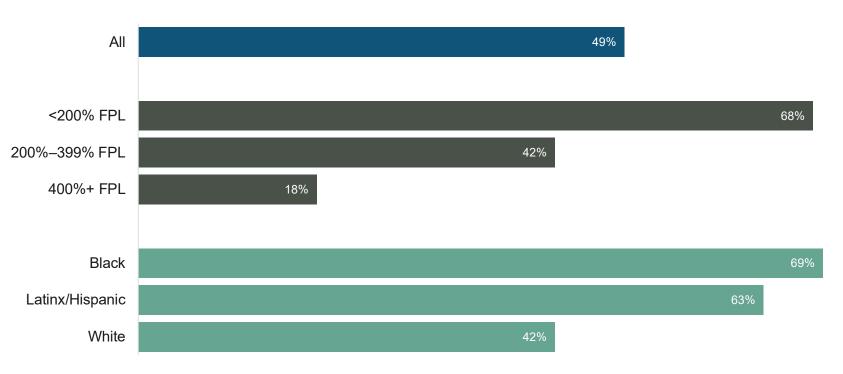
A Base: Respondents who reported at least one of the following medical bill problems in the past 12 months: had problems paying medical bills, contacted by a collection agency for unpaid bills, had to change way of life in order to pay medical bills, or has outstanding medical debt.

Data: Commonwealth Fund Biennial Health Insurance Survey (2022).



#### Half of adults would not be able to cover an unexpected \$1,000 medical bill within 30 days; people of color and people with low income were the least likely to have funds.

Percentage of adults ages 19–64 who said they would be unable to pay an unexpected medical bill of \$1,000 within 30 days, by income and race/ethnicity



Note: FPL = federal poverty level.



#### The public is divided along partisan lines on what should be the top health care priorities for the president and Congress, but there is more agreement on lowering health care costs.

Percentage of adults ages 19-64 who said each health care issue should be a top priority

