

**NEWS RELEASE** 

Embargoed for release: 12:01 a.m., Monday, May 11, 2009 For further information, contact: Mary Mahon: (212) 606-3853 / mm@cmwf.org / cell (917) 225-2314 Amanda Jo Greep: (212) 606-3826 / ajg@cmwf.org Sara Knoll: (301) 652-1558, sknoll@burnesscommunications.com

## Seven of 10 Women Are Uninsured or Underinsured, Have Medical Bill or Debt Problems, or Problems Accessing Care Because of Cost, New Study Finds

#### Women Particularly at Health and Economic Risk

New York, NY, May 11, 2009—Women are more likely than men to feel the pinch of rising health costs and eroding health benefits, with about half (52%) of working-age women reporting problems accessing needed care because of costs, compared to 39 percent of men, a new Commonwealth Fund study finds. Women who are insured but have inadequate coverage are especially vulnerable: 69 percent of underinsured women have problems accessing care because of costs, compared to half (49%) of underinsured men.

The study, Women at Risk: Why Many Women Are Forgoing Needed Health *Care*, by Commonwealth Fund researchers Sheila Rustgi, Michelle Doty, and Sara Collins finds that overall, seven of 10 working-age women, or an estimated 64 million women, have no health insurance coverage or inadequate coverage, medical bill or debt problems, or problems accessing needed health care because of cost.



"More families are making difficult choices between needed health care, making payments on mortgages or credit card debt, and purchasing basic necessities," said Commonwealth Fund President Karen Davis. "This study underscores the need for affordable universal health coverage and protection against catastrophic financial losses not only for women—who are more likely to be at risk for high premiums and medical bills—but for all Americans." Women are more affected by high health care costs because they have lower average incomes but higher out-of-pocket health costs than men, and use the health care system more frequently.

The study is based on data from the Commonwealth Fund's 2007 Biennial Health Insurance Survey, and is therefore likely to understate the scope of the problem since unemployment and loss of insurance coverage have increased during the current economic recession, the researchers say.

"Although similar proportions of women and men were uninsured for at least part of the year or were underinsured, we found that women were more affected by exposure to health care costs," said Michelle Doty, Director of Survey Research at the Commonwealth Fund.

The study found:

- 52 percent of women had any one of four problems getting needed health care because of cost compared to 39 percent of men: did not fill a prescription; did not see a specialist when needed; skipped a recommended medical test, treatment, or follow-up; or had a medial problem but did not visit a doctor or clinic.
- 45 percent of women accrued medical debt or reported problems with medical bills in 2007, compared to 36 percent of men.
- Women were also more likely to skip tests and screenings: almost half of women (45%) delayed or did not receive a cancer screening or dental care because of costs, compared to 36 percent of men.

The authors note that while the majority of Americans receive health insurance through their employers, many employers, particularly small employers, are sharing more of their costs with their employees, or eliminating coverage altogether. The severe downturn in the economy has undoubtedly accelerated this trend and left millions of people unemployed and without health benefits.

#### Women Across the Income Distribution Are Increasingly Exposed to Rising Health Care Costs

The share of women spending high proportions of their incomes on health care costs and premiums has risen significantly. In 2007, more than one-third of women spent 10 percent of more of their income on out-of-pocket costs and premiums, up from one-quarter in 2001. Women with low incomes were most affected with more than half (55%) of those with incomes under \$20,000 spending 10 percent or more of their income on health care, compared to 29 percent in 2001. However, women with higher incomes are also spending more of their income on health care costs and reporting problems with medical bills and getting needed care:

- The proportion of women earning \$40,000 \$60,000 who spent more than 10 percent of their income on out-of-pocket health costs increased from 21 to 41 percent between 2001 and 2007; 17 percent of women with income over \$60,000 had high out-of-pocket costs in 2007.
- About one-third (34%) of women with incomes of \$60,000 or more reported problems getting needed care because of cost, as did 23 percent of men with similar incomes.
- Six in ten women with moderate incomes (between \$20,000 and \$40,000) report being unable to pay medical bills, being contacted by a collection agency for unpaid medical bills, changing their way of life to pay medical bills or paying off medical debt over time, as did almost half (46%) of middle-income women. About 50 percent of men with moderate incomes and 32 percent with middleincomes reported medical bill problems.

### Methodology

Data are from the Commonwealth Fund 2007 Biennial Health Insurance Survey, conducted by Princeton Survey Research Associates International from June 6 through October 24, 2007. The survey consisted of 25-minute telephone interviews in either English or Spanish with a random, national sample of 3,501 adults, ages 19 and older, living in telephone households in the continental United States. This issue brief is based on 2,616 adults ages 19 to 64. To represent the adult population, the data are weighted by age, sex, race/ethnicity, education, household size, and geographic region, using the U.S. Census Bureau's 2006 Annual Social and Economic Supplement. The survey achieved a 45 percent response rate (calculated according to the standards of the American Association for Public Opinion Research) and has an overall margin of sampling error of +/- 2 percentage points at the 95 percent confidence level.

# The Commonwealth Fund is a private foundation supporting independent research on a high performance health system.