Figure 1. Communities that have the highest medical cost burdens have high uninsured rates as well as large numbers of insured residents with high medical costs.

* Difference with high-burden communities is statistically significant at the .05 confidence level.

** Underinsured is defined as having some type of insurance but still incurring out-of-pocket expenditures exceeding 5% of family income for individuals with incomes below 200% of the federal poverty level and greater than 10% of family income for those at or above 200% of poverty.

Source: 2003 Community Tracking Study Household Survey.
Figure 2. Rates of employer-sponsored insurance coverage are considerably lower in communities where medical cost burdens are high.

* Difference with high-burden communities is statistically significant at the .05 confidence level.

Source: 2003 Community Tracking Study Household Survey.
Figure 3. Compared with workers in communities where medical cost burdens are low, workers in high-burden communities are twice as likely to have low-wage jobs.

- Percent of workers in small firms (<25 workers):
  - High-burden communities: 32.7%
  - Low-burden communities: 27.8% (* statistically significant at the .05 confidence level)

- Percent of workers in low-wage jobs (<$10/hour):
  - High-burden communities: 33.6%
  - Low-burden communities: 17.5% (* statistically significant at the .05 confidence level)

Source: 2003 Community Tracking Study Household Survey.
Figure 4. High uninsured rates in communities with high medical cost burdens often reflect lower levels of public coverage for low-income people.

Coverage among nonelderly low-income people (<200% of poverty level)

- **Percent uninsured**: 37.6% in high-burden communities vs. 23.1% in low-burden communities (*p < .05*).
- **Percent with private insurance**: 35.3% in high-burden communities vs. 39.5% in low-burden communities.
- **Percent in Medicaid or other state public program**: 24.1% in high-burden communities vs. 35.2% in low-burden communities (*p < .05*).

*Source: 2003 Community Tracking Study Household Survey.*
Figure 5. In communities where medical cost burdens are high, the proportion of residents who are low-income is more than twice that of low-burden communities.

* Difference with high-burden communities is statistically significant at the .05 confidence level. 
Source: 2003 Community Tracking Study Household Survey.
Figure 6. In communities where cost burdens are high, insured people, regardless of income, are more likely to have high out-of-pocket and premium costs.

Percent insured with high costs relative to income

- **High-burden communities**
  - <100% of poverty: 56.2%
  - 100%-200% of poverty: 60.5%
  - 200%-400% of poverty: 50.8%
  - 400% of poverty and higher: 12.6%

- **Low-burden communities**
  - <100% of poverty: 32.4%
  - 100%-200% of poverty: 28.1%
  - 200%-400% of poverty: 21.3%
  - 400% of poverty and higher: 7.9%

* Difference with high-burden communities is statistically significant at the .05 confidence level.

Source: 2003 Community Tracking Study Household Survey.
Figure 7. Among the privately insured, out-of-pocket health spending is about one-quarter higher in communities where medical cost burdens are high.

Average annual out-of-pocket expenses for services among privately insured

<table>
<thead>
<tr>
<th>Out-of-pocket expenses for health care services</th>
<th>High-burden communities</th>
<th>Low-burden communities</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0</td>
<td>$997*</td>
<td>$775*</td>
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</tbody>
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* Difference with high-burden communities is statistically significant at the .05 confidence level.
Source: 2003 Community Tracking Study Household Survey.