

Executive Summary

A Report on the Uninsured and Underinsured in South Carolina

August 2009

The lack of health insurance coverage and the resulting impact on access to medical care have been issues for those residing in South Carolina and others across the United States for many years. As a result of the escalating cost of health care and the current recession-driven increase in unemployment, the numbers of uninsured and underinsured Americans and South Carolinians have risen to historic levels.

Healthcare reform has once again become a focus of national political debate, and it is growing increasingly likely that the United States will see significant reform implemented within a few years. To most effectively apply national health care reform on a state level and develop state policies and programs to enhance access to care and reverse the trend of diminishing rates of insured South Carolinians, detailed information on our uninsured and underinsured populations is needed.

Background

The Robert Wood Johnson (RWJ) Foundation study, *At the Brink: Trends in America's Uninsured*,¹ revealed that the percent of uninsured persons under the age of 65 in the United States has increased significantly since the mid-1990s. The rate of increase in South Carolina has been particularly high. The study drew its conclusions from data analysis of the Current Population Survey (CPS) conducted by the U.S. Census Bureau and showed that in 1994 and 1995 in South Carolina, 15.4% of the population under the age of 65 years lacked insurance; by 2006 and 2007, it was 18.5%. The average across the nation was 16.0% uninsured in 1994 and 1995 and 17.5% uninsured by 2006 and 2007. This represents a 20.1% change in rate for South Carolina, compared to a 9.3% change in rate on the national level. The change in rate for South Carolina means that between the mid-1990s and the mid-2000s, an additional 185,177 people under age 65 went without health insurance.

Health care coverage has been a national and state problem for decades and with unemployment rates increasing, so are the ranks of the uninsured. Because South Carolina has experienced record high rates of unemployment, our state has also experienced record rates in the number of uninsured citizens. From an examination of Free Clinic data,² it is understood that more and more people are without insurance every day. Physicians have reported that patient volumes have shrunk due to patients losing their jobs and, therefore, losing their insurance.³

The Challenge

Up-to-date primary research is needed to develop a full understanding of the uninsured and underinsured in South Carolina. Timely data with larger

sample sizes must be obtained in order to provide the depth of understanding needed.⁴ Specifically, subpopulation and county-level analysis is needed to inform policy development and to evaluate the effectiveness of any policy that aims to expand coverage.⁵

Many states have developed and implemented their own survey instruments to measure the uninsured and fill in the gaps in the data provided at the national level. This type of research is typically funded by state governments or through foundations.⁶ Benefits of this research activity include larger sample sizes and sample designs that allow estimates for subpopulations. Additionally, states can tailor the survey instrument to their particular information needs, control the data and its analysis, and synchronize reporting with the legislative calendar and process.⁷

Call to Action

Part of the mission of the South Carolina Public Health Institute (SCPHI) is to bring together gov-

ernmental and community-based stakeholders around issues important to the health and well-being of South Carolinians. As part of this mission, SCPHI recommends that a partnership be convened to perform

thorough primary research to assess the size and scope of the uninsured and underinsured populations in South Carolina. Once this research is performed, resources dedicated to enhancing coverage and access to care can be maximized and these efforts can be evaluated once implemented.

Specifically, it is recommended that a task force be developed to 1) determine the specific information needs of policy makers related to the uninsured and underinsured, 2) design research to best respond to these information needs, 3) raise the funds to support such research, 4) conduct

the research activity, and 5) communicate the results of the research to state policy makers. SCPHI offers itself as a convener and a coordinator of these activities.

The mission of the South Carolina Public Health Institute (SCPHI) is to promote evidence-based policies, strategic prevention efforts and effective leadership designed to improve the public's health now and in the future. As part of its mission, SCPHI examines public health challenges facing our state and communicates evidence-based information on issues affecting the public's health.

ENDNOTES

¹ *At the Brink: Trends in America's Uninsured. A State by State Analysis.* Robert Wood Johnson Foundation and the State Health Access Data Assistance Center (SHADAC), March 2009.

² South Carolina Office of Research and Statistics, July 2009.

³ Liv Osby, "Fewer people going to doctor," *The Greenville News*, March 23, 2009.

⁴ Blewett, Lynn A. and Davern, Michael, "Meeting the Need for State-Level Estimates of Health Insurance Coverage: Use of State and Federal Survey Data," *Health Services Research* 41:3, Part I (June 2006).

⁵ Blewett, Lynn A. and Davern, Michael, "Meeting the Need for State-Level Estimates of Health Insurance Coverage: Use of State and Federal Survey Data," *Health Services Research* 41:3, Part I (June 2006).

⁶ Blewett, Lynn A. and Davern, Michael, "Meeting the Need for State-Level Estimates of Health Insurance Coverage: Use of State and Federal Survey Data," *Health Services Research* 41:3, Part I (June 2006).

⁷ Blewett, Lynn A. and Davern, Michael, "Meeting the Need for State-Level Estimates of Health Insurance Coverage: Use of State and Federal Survey Data," *Health Services Research* 41:3, Part I (June 2006).