

Healthcare Coverage for the Uninsured

President Obama signed the Patient Protection and Affordable Health Care Act into law on March 23, 2010. Almost immediate changes to health insurance coverage include (a) children are allowed to stay on their parents insurance policies until age 26, (b) people should not be dropped by their insurance plans (rescission of coverage), and (c) by the end of 2010, people should be able to find coverage in high-risk pools.

Lack of insurance or inadequate healthcare coverage adversely impacts health on multiple levels. The uninsured are less likely to receive preventive care and more likely to receive inadequate or delayed treatment and die prematurely than people with health insurance coverage. They often lack a regular source of care for primary and chronic conditions and require costly “crisis” care in emergency departments or hospitals for those conditions. In addition, the uninsured often face costly medical bills when they do seek care. Paying for more than one-third of their care out-of-pocket and often being charged higher amounts for care than the insured pay. Medical bills can cause large levels of debt, which is difficult to afford as most of the uninsured have low or moderate incomes and have little, if any, savings (Kaiser Commission on Medicaid and the Uninsured, 2008).

Of serious concern is that the uninsured access and use routine cancer screening and early-detection tests and services less frequently than their insured counterparts. According to “The Coverage Gap: A State-by-State Report on Access to Care,” prepared for the Robert Wood Johnson Foundation (2006).

- Almost 51% of women without health insurance did not have a screening mammogram in the prior two years, compared with 22.8% with health insurance.
- Approximately 25% of women without health insurance had not had a Pap test in the past three years, compared with 12.2% of women with health insurance.
- An estimated 76% of men aged 40–64 without health insurance had not had a prostate-specific antigen test in the prior two years, compared with 52.2% of insured men.
- 74.2% of adults ages 50–64 without health insurance never have had a colonoscopy, compared to 50.5% of adults with health insurance.
- The number of uninsured individuals in America has reached crisis levels.
- The U.S. Census Bureau (2009) reported that the number of people without health insurance coverage rose from 45.7 million in 2007 to 46.3 million in 2008, while the percentage remained unchanged at 15.4 percent.
- Adults age 30 and older comprise more than half (52%) of the uninsured (Kaiser Commission on Medicaid and the Uninsured, 2008).
- Four out of five of the uninsured are in working families (Kaiser Commission on Medicaid and the Uninsured, 2008).

Many factors contribute to the increase and high number of uninsured, including the following.

- Between 2007 and 2008, the number of people covered by private health insurance decreased from 202 million to 201 million, while the number covered by employment-based health insurance declined from 177.4 million to 176.3 million. Although the number of people covered by government programs did increase, the number of uninsured continued to rise (U.S. Census Bureau, 2009).
- Patients with cancer and survivors often are unable to find adequate and affordable coverage in the individual market (American Cancer Society, 2009).

Although the United States is the world leader in healthcare spending, it is the only industrialized nation that does not ensure that every citizen has healthcare coverage. The Patient Protection and Affordable Health Care Act will require most Americans have health insurance, adding 16 million people to Medicaid and providing subsidies for low- and middle-income people. As a result, coverage will be expanded to 32 million Americans who are uninsured. Healthcare reform includes provisions that eliminate preexisting condition barriers by 2014 and denial of coverage to patients with cancer.

It Is the Position of ONS That

- Every American citizen has healthcare coverage by 2014 and the U.S. Congress and president act promptly to establish and implement an explicit plan to meet that goal.
- Healthcare coverage is accessible and affordable and includes consumer choice and control.
- Healthcare coverage is continuous and not interrupted by changes in health, employment, income, age, or personal circumstances, nor does coverage exclude preexisting conditions or history of cancer.
- Healthcare coverage is comprehensive and includes prevention and screening, mental health services, prescription medications, access to evidence-based treatments and

- scientifically sound clinical trials, hospice and end-of-life care, and inpatient hospital and outpatient medical care.
- Healthcare coverage includes reimbursement for services provided by RNs and advanced practice nurses.
 - Healthcare coverage and plans encourage individuals to use health care responsibly and seek appropriate and recommended cancer preventive, early detection and screening, or risk reduction services and care.
 - Healthcare coverage and plans are not exempt from state mandates or regulations, ensuring coverage of certain benefits and services (e.g., mammography, clinical trials).

Approved by the ONS Board of Directors, 3/07; revised 4/10.



References

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