



EQUAL HEALTH:

Monthly Informer

MAY 2006

INSURANCE FOR HEALTH

Lack of adequate health insurance can be a major barrier to needed health care to Blacks and Hispanics in the U.S.

Uniformed Services University of the Health Sciences
Center for Health Disparities Research & Education
Community Outreach & Information Dissemination Core

Centers of EXcellence in Partnerships for Community Outreach, Research on Health Disparities, and Training program (Project EXPORT)

The Uninsured

What is Health Insurance?

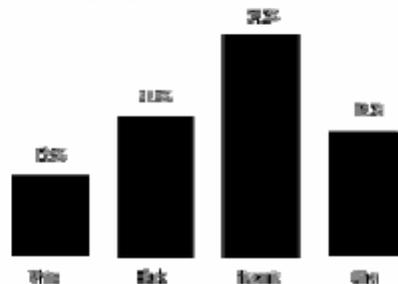
Health insurance is similar to other forms of insurance familiar to you. The most familiar type of insurance is car insurance. Car insurance protects you or a victim of a car accident against the resulting costs of damages and losses resulting from it. IN every state, it is required to have some level of car insurance coverage. If you don't have the state required level of car insurance you can not register your car and legally operate almost any motor vehicle in the state. The major difference between car insurance and health insurance is that you are not required by law to have any level of Health or medical insurance! Health insurance providers, including the federal government provide different levels of health insurance coverage to purchase. In this issue of the monthly health informer we provide basic information about health insurance and the role it may play in racial and ethnic health disparities.

Health insurance among Blacks, Hispanics and Whites

In the United States, lack of insurance is more common among Blacks of all ethnic origins and Hispanics of all races than among non-Hispanic Whites.

In 2003, the overall rates of adults living in the United States without health insurance, grouped by race and ethnicity, were 12.9 percent of non-Hispanic Whites, 21.0 percent of non-Hispanic Blacks, and 34.3 percent of Hispanics. This is shown in the following figure.

Black and Hispanic Americans that are uninsured are at higher risk of health and health care disparities. How come? Because not having health insurance and not having money to pay for health care out of pocket prevent people from seeking medical attention when they are concerned about a possible health problem. For example, Studies repeatedly show that Black and Hispanic Americans develop cardiovascular diseases when they are younger and experience severe complications more frequently, including disability and death. The exact reason for this difference is unknown, but according by some experts, generally Blacks and Hispanics in the United States do not seek medical attention until they feel very ill. This delay in seeking health care is related to the lack of health insurance. Although health insurance is important, other social and cultural factors also influence this behavior. Scientific studies are now being funded to help discover, analyze and understand the underlying causes of the delay in health seeking behavior of persons who need medical attention.



You can help reduce health disparities whether you have health insurance or not.

Having regular physical examinations, learning which risk factors may be relevant to you and your family

because of family history of illnesses and causes of death of relatives who died young are important for protection of your health and reduce your risks of experiencing health disparities in your own racial and ethnic group.

Even if you don't feel ill a proper medical examination can help discover early signs of certain conditions, make an early diagnosis and start early treatment which can be life saving. Early treatment can reduce the complications of many conditions more frequent among Black and Hispanic persons in the United States.

For example, high blood pressure (HBP) is a risk factor for diseases of the health and arteries. If you are diagnosed early you may learn how changes in the foods you eat and more physical activity may help you reduce your blood pressure and delay the need for with medications. Early treatment and control of hypertension helps prevent damage to your heart, the kidneys, the walls of arteries and the brain. Keeping these organs healthy helps prevent heart attacks, kidney disease, stroke and loss of your physical function.

When medications are needed they will be prescribed by a physician but you're a licensed health care providers may help you learn more about your illness, your medicines and your care plan. Periodic medical visits and occasional laboratory tests may also be part of the long term management of your condition. These will vary in frequency and in the kinds of laboratory tests. Preventing disease is less expensive than paying for medical care during severe acute illnesses. Insurance companies are just recently starting to take this into account when establishing benefits under their health plans.

Can you tell if you are at risk of health disparities?

Yes, by knowing your family history of illnesses, diseases, disabilities and early deaths.

- Learn the disease which are disproportionately represented among people of your same ethnic heritage and race.
- Pay attention to announcements of health fairs in your community and volunteer for free screening which is often available at these activities.
- Visit your health care provider at least once a year for a physical examination and ask him or staff at his or her office to explain to you the meaning of your test results and anything information related to your health condition that you don't understand clearly.

Understand that your physician can't to do all this alone. He may designate someone at his office to sit with you to answer your questions.

Who pays for health insurance?

- In the United States the large employers are the primary buyers of health insurance. They include the federal, state and local governments as well as medium and large private corporations and non-for

MEDICARE HEALTH INSURANCE

1-800-MEDICARE (1-800-633-4227)

NAME OF BENEFICIARY
JANE DOE

MEDICARE CLAIM NUMBER
000-00-0000-A

SEX
FEMALE

IS ENTITLED TO
HOSPITAL (PART A) 07-01-1986
MEDICAL (PART B) 07-01-1986

SIGN HERE → Jane Doe

- profit businesses such as foundations, colleges, universities and hospitals.
- Because of the rising costs of health care employers have started to limit health benefits they are willing to pay for and expect their employees to help pay more toward the payment of their health insurance plans.
 - The federal government provides health insurance through the Medicare Program which is available to persons who qualify and are eligible for benefits because of disability or advanced age (65 years or older).
 - Federal and state governments jointly pay for health insurance for persons with low income through the Medicaid health insurance program.
 - Many states and local governments offer additional health insurance programs, primarily to persons with low income and their children. Information is generally available from the local or state health departments and the internet.

Who gets health insurance?

The employees of these organizations that buy health insurance receive health insurance as an employment benefit. Unions and other organized groups negotiate with these employers for the best possible health coverage possible for its members.

How do you find about your health insurance benefits from work?

The departments of human resources or personnel are generally responsible for the employee health benefits plans. One or more persons are designated to inform employees about the different plans available and the benefits covered under each plan. It is important that you to become familiar with the kind of benefits covered by the insurance plan you select or receive from your employer.

Medicare and Medicaid require special qualifications for insurance and information is available at a local or state health department.

Information is also available by phone, usually through a 'hot line' and the Internet. Keep in mind that many local libraries have computers available and can help you to access the Internet for finding information about almost anything that might interest you, including your health.

Types of health insurance

The following are some examples of health insurance plans that are available in the United States:

1. Private health insurance: Fee for service plans and Managed Care or HMOs.
2. Federally funded entitlement programs to persons who meet specific criteria for eligibility: Medicare for the elderly and disabled and Medicaid for low income families.

To learn more about health insurance

Health insurance made simple. Brief article on the 360 Degrees of Financial Literacy Web Site at:

<http://www.360financialliteracy.org/Life+Stages/Career/Articles/Health+Care+and+Health+Insurance/Health+insurance+made+simple.htm>

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