



COVER THE UNINSURED

Expanding Coverage Helps Communities of Color

The gaps in our health insurance system affect people of all ages, races and ethnicities, and income levels; however, those with the lowest incomes face the greatest risk of being uninsured. People without insurance coverage have worse access to care than people who are insured.

One in ten uninsured people (3 million) fall into the coverage gap due to their state’s decision not to expand Medicaid, and 15% of the uninsured (4.9 million) are undocumented immigrants who are ineligible for ACA coverage under federal law. Nationally, 44% of uninsured adults in the coverage gap are White non-Hispanics, 30% are Hispanic, and 22% are Black.



Because people of color are more likely than Whites to lack insurance coverage and are families with low incomes, they are disproportionately represented among people in the coverage gap. This puts people of color at risk of persistent health inequities. Even after insurance levels the playing field, other factors remain, including deep-seated historical inequities and pervasive cultural barriers.

People of color make up 56% of those in the “Coverage Gap”



44% white 22% black
30% hispanic 4% other

Blacks and Hispanics are also more likely to lack the usual source of care – a primary care physician, for example – and go without care because of cost. This has been shown to be an important link to primary and preventive care services and better health outcomes, according to the Commonwealth Fund.

<http://www.lhihouston.org/>

What are the Impacts of the Gap?

The decisions about Medicaid expansion have a large impact on eligibility for coverage among uninsured **Blacks**. In expansion states, 70% of uninsured Blacks are eligible for coverage.

- In contrast, in non-expansion states only 15% of uninsured Blacks are eligible for Medicaid while 32% fall into the coverage gap.

Nearly half of uninsured **Hispanics** are eligible for assistance in expansion states compared to 33% in non-expansion states.

- This difference is not as large as those observed for uninsured Blacks and Whites since significantly larger shares remain ineligible due to immigration status.

Women account for more than half (53%) of adults in the coverage gap, even though women are more likely than men to qualify for Medicaid in states not expanding their programs. This pattern occurs because women make up the majority of poor uninsured adults in states not expanding their programs.

- Over 2 million women between the ages of 19 and 44 who do not have insurance could gain health coverage if all states expanded their Medicaid programs.

Expanding coverage means that **children** in some of the nation's poorest families will have insured parents and are more likely to end up insured and have access to care. It would cover low-income parents and children because:

- Covering parents means that more eligible children will enroll.
- Covering parents means that children are more likely to stay enrolled.
- Covering parents makes it more likely that children receive needed care like preventive care and other health care services.
- Parents' health can affect children's health and well-being.

Lesbian, gay, bisexual, transgender, and queer (**LGBTQ**) individuals can experience worse health outcomes as they often face challenges and barriers to accessing needed health services.

- Expanding coverage would provide access to health insurance coverage for LGBTQ persons, and includes specific protections related to sexual orientation and gender identity.

Expanding coverage would mean more **veterans, students, and people living with HIV** would get the care they need.

Uninsured Eligible for Coverage

