

Why It Matters: Health Care Coverage Means Better Health Care

Lack of health care coverage is harmful both for the patient and for society as a whole. Research shows that families without health insurance often put off getting care for health problems. When symptoms can no longer be ignored, uninsured families often end up in hospital emergency rooms. Not only is emergency room care more expensive, but delaying care often makes health care problems much harder to treat. The result? Impaired health, increased health care costs and lost economic productivity.

Where We Stand: The Number of Minnesotans Without Health Insurance Increasing Steadily

Over the last five years, the number of Minnesotans without health care coverage has increased. The number of Minnesotans with employer-offered health care coverage has dropped. And large disparities between racial groups in Minnesota continue, with Hispanic and black Minnesotans much more likely to be uninsured than whites.

Five years after the 2001 recession, 71,600 fewer Minnesotans had health care coverage. This brings the total proportion of uninsured Minnesotans from 7.5 percent in 2000-01 to 8.6 percent in 2005-06. Shockingly, nearly one in 10 full-time workers in Minnesota does not have health insurance. Although Minnesota continues to have a lower uninsured rate than the national average, we have still experienced a decline relative to our previous levels.

Many of the uninsured in Minnesota are children. At the start of this decade, one in 20 children in Minnesota did not have health insurance. By 2005-06, that proportion had increased to one in 14 children. That represented an increase of about 27,900 uninsured children – nearly equivalent to the total number of full-time undergraduates at the University of Minnesota. Nationally, the number of children without health insurance jumped to 8.7 million, or 11.7 percent in 2006 – an increase of 600,000 children.

Stark disparities in insured rates between racial and ethnic groups persist in Minnesota. Not surprisingly, most people without health insurance in Minnesota are white, since whites make up the majority of the population of the state. However, a person of color in Minnesota is much more likely to be uninsured than a white person, and there has been no improvement in the rate of uninsured among people of color since the start of the decade. In fact, the number of Hispanics without health insurance has substantially increased: from 51,500 in 2000-01 to more than 86,400 in 2005-06. By 2005-06, Hispanics were six times more likely to be uninsured than whites.

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What Our Federal Delegation Can Do: Support Federal Legislation That Will Help Minnesota Extend Health Care Coverage

The Minnesota delegation should support federal legislation that will expand health care for all Minnesotans:

- In 2009, Congress will once again consider expanding the State Children's Health Insurance Program (SCHIP). Our Minnesota delegation should support establishing a stable, predictable and adequate SCHIP funding stream for states, and oppose any efforts to limit states' ability to provide health care coverage to the uninsured, or shift more costs onto states.
- Congress should provide adequate funding to Medicaid, which provides health care to vulnerable populations such as the elderly, people with disabilities and low-income families.