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Cameron Sikavi
University of Vermont

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Health Insurance Coverage and Young Adults

Assessing Methods of Outreach to Connecticut's Largest Demographic of Uninsured Citizens

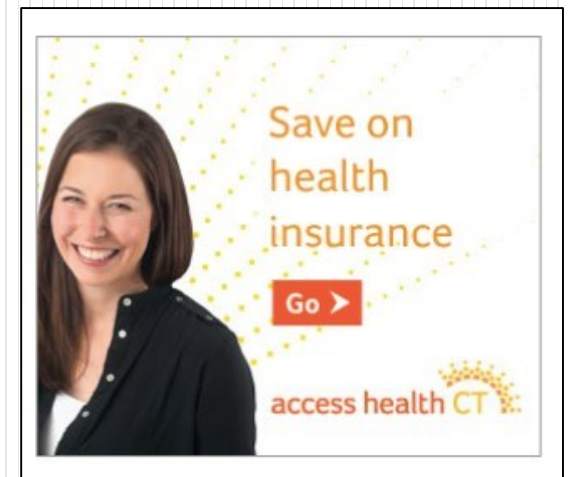


Cameron Sikavi

Danbury, CT

March 2014

Mentor: Dr. Robert Mascia



Problem (2A)

- Young adults have the largest percentage of uninsured citizens of any age group in the United States
 - According to the CDC, 38.4% of the uninsured population in 2013 was between the ages of 19 – 34
 - This equates to 27.2% of 19 – 34 year-olds in 2013 not having health insurance.
- In Connecticut, 18-34 year-olds represent by far the largest demographic of those uninsured, at 43.3% , more than double the rate of the second highest uninsured demographic (45 – 54 year olds, with an uninsured rate of 19.2%).
 - Unfortunately, this remains significantly higher than the national average.
- Danbury in particular has a total uninsured population of 34.0%, which represents the fourth highest percentage of uninsured citizens of all cities in the state.

Problem (2B)

- What are the barriers to health insurance coverage among young adults?
 - The cost of health insurance plans is often perceived by young adults as being unnecessary for a relatively healthy population
 - Unfortunately, these issues exist for the uninsured as well. In 2013, nearly half of uninsured 18 – 34 year olds reported problems paying medical bills.
 - Perception of low health risk deters young adults from enrollment
 - Among the youngest adults (18-24), 66% responded that they believe they are less at risk for a major illness or medical condition than the average American.
 - However, one in six young adults has a chronic illness, such as cancer, diabetes, or asthma.
 - Dissatisfaction with the Affordable Care Act
 - A 2013 Harvard University poll suggested that 57 percent of young adults disapproved of the ACA. In the poll of 18-to 29-year-olds, fewer than 3 in 10 who were uninsured said they definitely or probably would enroll.
- Despite the efforts to expand coverage to all citizens, little has been done to target the needs of this specific demographic of uninsured citizens.
 - From 2012 to 2013, the percentage of 18 – 34 year-old uninsured citizens in Connecticut paradoxically increased from 43.1% to 43.3%

The Societal Cost of the Uninsured (3A)

- **The Affordable Care Act depends on young adults to cross-subsidize older adults**
 - The U.S. Congressional Budget Office has determined that 40% of new enrollees in the new health insurance marketplaces must be young adults in order for the cross-subsidy to be sufficient
 - If enrollment of young adults falls short, insurers may raise premiums higher to compensate for the cost of total health care expenses of enrollees, plus administrative overhead and profit.
- **The cost of covering the uninsured places a large financial burden on the state of Connecticut**
 - The Connecticut Center for Economic Analysis found in 2013 that the state loses between \$584 million and \$1.164 billion in increased morbidity and mortality because of preventable illness in the uninsured.
 - Connecticut health care providers delivered an estimated \$377 million in uncompensated care that includes reduced cost care, care at no charge, and bad debt.

The Societal Cost of the Uninsured (3B)

- **The uninsured population has and will continue to suffer as a result of a lack of health insurance**
 - The Connecticut Office of Health Care Access (OHCA) found that those in CT without health insurance are **9 times less likely to get emergency care** when they need it in comparison to the insured.
 - The vast majority of young adults surveyed addressed fear of being able to cover the cost as the main deterrent to receiving care.
- **The cost of outreach to the young adult population of Connecticut is miniscule in comparison to the socioeconomic burden of the lack of health insurance.**
 - Outreach to young adults will only require a fraction of the \$4.2 million that will be used by Access Health CT in 2014 for purposes of “Outreach and Education.”
- **The lack of health insurance is both a significant detriment to the state economy, as well as the well-being of the 145,995 18 – 34 year-old Connecticut residents who are uninsured.**

Community Perspective (4)

- ***Name Withheld*, Director of Public & Government Relations at the Western CT Health Network:**
 - “Outreach to the younger population in the Danbury area has been one of the more difficult aspects of enrollment since the Access Health CT website opened on October 1, 2013.”
 - “Younger individuals are less likely to have a desire to enroll because a majority do not have health issues that require emergency medical care.”
 - “I think that it is in the best interest of the younger population to have a peer-to-peer educational initiative with representatives in their age group instructing them about the importance of acquiring health insurance, and of the changes that have been put in place by the Affordable Care Act.”
- ***Name Withheld*, Northwest CT Area Health Education Center Representative**
 - “I believe that we need to address the problem of lack of health insurance among younger adults with platforms that they enjoy using. That means using social media outlets like Facebook and Instagram, or using iPhone applications, to get the word across. It is one thing if a celebrity ‘tweets’ about signing up for health insurance, but I think that it would be much better if we had young leaders from the Connecticut community reaching out to other young people that they know (via social media) to get them to sign up.”
 - “I think that having someone in the same age group as our younger residents without health insurance go out and give presentations about how health insurance can benefit their specific age group – that would be phenomenal! The younger populations needs to hear about how health insurance can benefit them from someone in the same situation as them. Hearing it from someone older won’t really allow them to relate.”

Proposed Intervention/Methodology (5A)

- Present to a group of young pre-health professionals on changes to the healthcare system, new health insurance options afforded to them by the Affordable Care Act, and the benefits of coverage.
- Design and distribute an easy-to-understand pamphlet outlining the different options they have for insurance coverage, and the benefits/pitfalls of each option as they pertain specifically to young adults.
- Demonstrate the “Obamacare 411” iPhone application and the Access Health CT website to the students.
- Using an anonymous survey, assess their level of understanding of health insurance options both prior to and after the presentation.
- Assess how effective they find the pamphlet and presentation, in addition to how effective they would find other means of outreach (i.e. social media, Access Health CT website, “Obamacare 411” iPhone application)
- Determine their level of willingness to reach out to the local Danbury community to educate other young adults on the advantages of health insurance.

Distributed Pamphlet (5B)



College Students and the Affordable Care Act: What Are Your Options?

Problem: Young adults represent the largest population of uninsured individuals of any age group in the United States. According to the CDC, 38.4% of the uninsured population in 2013 was between the ages of 19 – 34. This equates to 27.2% of those between the ages of 19 and 34 being uninsured. **In Connecticut, 18-34 year-olds represent by far the largest age demographic of those uninsured, at 43.3% , more than double the rate of the second highest uninsured demographic (45 – 54 year olds, with an uninsured rate of 19.2%).** Danbury in particular has a total uninsured population of 34.0%, which is the fourth highest of any city in the state.

Individuals who choose to go without health care are subject to an annual fee that will rise steadily in the coming years.

What Options Do You Have For Health Insurance?

1. Health Care Coverage Provided by Your University:

- The Affordable Care Act (ACA) will make sure that SHPs (student health plans) comply with regulations that do not allow providers to deny coverage based on pre-existing health conditions.
- SHPs must be held to the same standard as private insurance companies, meaning that they must provide no-cost preventative screening, prescription coverage, and higher maximum coverage levels than those that have existed in the past.
 - Other services include: ambulatory services, therapeutic services, vision, rehabilitation services, and services related to chronic illness

2. Health Care Coverage Provided by your Parent's Plan:

- One beneficial change afforded by the ACA for college students is that they now have the option to stay on their parent's policy until the age of 26, if your parents have health insurance that offers coverage for family members. This took effect in 2010.
- This includes those who are financially independent, or married.
- Some plans now charge an additional premium for family members that are added to the plan.
- One issue for college students is that many plans require that you use a

• What are your options? •
COLLEGE STUDENTS AND THE AFFORDABLE CARE ACT



3. The "Catastrophic Plan":

- One option for young adults under the age of 30 (which began January 1, 2014) is to enroll in a "catastrophic plan," which has a lower monthly rate but a higher deductible for routine care. The main benefit is that you are protected from paying a high deductible for an unforeseen emergency, such as emergent surgery for appendicitis.
- This plan still covers preventative services and three primary care visits.
- Appeals to the "young invincible" who is healthy and unwilling to pay high prices for health insurance.

4. Access Health Connecticut:

- Access Health CT is Connecticut's official health insurance marketplace
- Refer to pamphlets provided for more information.
- *Note: You may be eligible as a student for subsidized coverage using Access Health CT. However, you will not be subsidized for health insurance offered by your school. For next year, make sure to look at policies available on the new exchanges to see if you may have a less expensive plan available than what is offered by your university.*

5. Medicaid:

- Traditionally, Medicaid coverage has been limited to children, pregnant women, and the disabled. Under the Affordable Care Act, certain states (including Connecticut) are expanding coverage to include low-income adults.
- Medicaid will cover any individual with incomes below 133 percent of the federal poverty guidelines.
- The ACA extends "Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)" services to all Medicaid beneficiaries
 - EPSDT provides comprehensive and preventive healthcare services.

6. What if you're left out?

- If you are below the age of 65, ineligible for Medicaid or parent-based insurance, and don't want to go without care, the government provides you with tax credit subsidy opportunities when shopping for health insurance plans under the ACA
- Essentially, this means that you can save money on whichever individual plan you choose to buy, so long as you meet the annual income and age requirements.

• What are your options? •
COLLEGE STUDENTS AND THE AFFORDABLE CARE ACT

Results/Data (6)

- **Methods:** I presented to 13 Western Connecticut State University pre-health students on the ACA, and different health insurance options available to them (University plan, Parent's plan, "Catastrophic" plans, CT health exchange, Medicaid). We also visited the "Access Health CT" website and reviewed the "Obamacare 411" iPhone application. The average age of the participants was 20.23, and ages ranged from 18 to 25.
- According to the survey prior to the presentation:
 - The average level of knowledge of the changes resulting from the Affordable Care Act was rated as **2.84**
 - The average level of awareness of the options of health insurance available to young adults was rated as **3.23**
- According to the survey following the presentation:
 - The average level of knowledge of the changes resulting from the Affordable Care Act was now rated as **8.62**
 - The average level of effectiveness of the presentation was rated as **9.15**
 - The average level of effectiveness of the pamphlet outlining the different options for health insurance was rated as **9.15**
 - The average level of effectiveness of the "Obamacare 411" iPhone application was rated as **8.50**
 - The average level of effectiveness of social media platforms (i.e. Facebook and Instagram) for outreach to young adults was rated as **8.85**
 - The average level of effectiveness of the "Access Health CT" website was rated as **6.73**
 - When asked, on a scale of 1 to 10, how willing they would be to present the information they learned today to the uninsured young adult population of the Danbury area, the average rating was **8.69**

Evaluation of Effectiveness (7A)

- This study demonstrates that pre-health university students have little reported knowledge of health insurance options and the changes to our healthcare system resulting from the Affordable Care Act. Considering their education level and interest in medicine, it is likely that others in their age group would have even less reported understanding of the healthcare system and insurance plans available.
- Students believed that a brief, peer-to-peer intervention was an effective means of explaining the major changes and health insurance options available to young adults, in addition to increasing the reported awareness of changes caused by the ACA.
- This study demonstrates that young adults find iPhone applications, social media platforms, and a concise pamphlet on health insurance options as effective means of outreach to their peers. The “Access Health CT” website was rated as a less effective platform for outreach, with many stating that it “did not provide adequate information explaining to young adults why health insurance is a necessity.” Some mentioned that they “would be scared away by price figures on the website without having known about subsidies and other options that may be available to them based on their income.”
- Students at WCSU demonstrated enthusiasm and willingness to perform similar outreach to their uninsured peers in the Danbury community.

Limitations (7B)

- According to Andrea Rynn, there are approximately 20,000 undocumented individuals that are uninsured in the Greater Danbury area. One of the limitations of this study includes finding a means to reach out to the young adults in this underserved population.
- Considering the magnitude of the problem that Connecticut has with the enrollment of young adults, larger scale measures are required than are possible with such a study. However, it is likely that presentations such as this one, in combination with utility of social media platforms and technology commonly used by young adults, can help increase awareness of health insurance options to the local Danbury population.

Future Direction (8)

- I will provide the pamphlet that I created to both Dr. Mascia and Andrea Rynn to distribute to young adults if they find it as an informative means of outreach to their patient populations.
- Dr. Anne Roberts, Biochemistry professor and Director of the Public Health Student Interest Group at Western Connecticut Health University, has expressed interest in helping her students to develop similar interactive presentations to uninsured young adults in the Danbury area. I will continue to work with some of the students that are interested to develop presentations.
- Two of the students at my discussion have expressed interest in translating the pamphlet into Spanish to better serve some of the uninsured populations in the area. We also discussed creating a version for the large Portuguese-speaking population in this region.
- I encouraged students to brainstorm creative, culturally-conscious ways of educating minority residents of Danbury on health insurance options, and of measures that may encourage them to enroll.

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