Health Insurance and Coverage among Low-Wage, Female Workers of Reproductive Age in San Francisco. Descriptive Analysis of the American Community Survey (ACS)

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INTRODUCTION

Preventive health care for women before pregnancy promotes preconception health and timely prenatal care, which help prevent pregnancy, birth, postpartum, and infant health problems.

Do San Francisco women lack health insurance or coverage?

Lack of health insurance or coverage is a major barrier to accessing preventive health services for women. It is not clear, however, whether availability of health care can explain local gaps in preconception health care.

Do uninsured adults irrespective of the person's employment status, immigration status or pre-existing medical conditions.

Prevalence of uninsurance among sub-groups of women SF has not been known.

The Affordable Care Act (ACA) presents a new opportunity to increase the number of low-income women who receive preventive preconception care for low-income women.

STUDY OBJECTIVES

The goal of this analysis was to describe uninsurance for sub-groups of women of reproductive age in San Francisco, to help understand lack of health insurance among young women as a possible barrier to preconception and prenatal care in San Francisco.

Specific aims:
- Estimate the prevalence of uninsurance by SES group
- Identify population sub-groups with lower rates of health insurance or coverage
- Test for SES disparities in uninsurance that parallel SES disparities in preconception health and prenatal care

STUDY METHODS

Study design:
- Cross-sectional analysis

Data source:
- American Community Survey, Public Use Microdata 2010

Lack of health insurance or coverage was defined as "no" to the question:

- Is this person currently covered by any of the following types of health insurance or health coverage plans?
- Insurance through a current or former employer
- Insurance purchased directly from an insurance company
- Medicare, for people 65 and older
- Medicaid, Medical Assistance or any kind of government assistance plan
- TRICARE or military health care
- VA
- Indian Health Service
- Any other type of health insurance or coverage plan

Survey participants:
- 1,475 women age 19-44, representing an estimated 178,089 women

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Statistics:
- Weighted prevalence estimates were generated for SES groups represented by at least 15 survey participants using Stata software
- Analyses were stratified by age, race/ethnicity, income level, residential area, employment status, and type of job
- Unadjusted logistic regression models were used to compare the relative odds of uninsurance between groups and test for significantly greater odds of uninsurance for lower income and minority women relative to higher income and White women (p-value<0.05)

STUDY RESULTS

Lack of insurance by age:
- 24,867 women 19-44 years old (14%) reported no health insurance or coverage. This rate of uninsurance was twice the rate for adolescent females and older adults.
- Young women 19-24 years (22%) had significantly higher rates of uninsurance than all other age groups

Lack of insurance by race/ethnicity:
- Minority women were significantly more likely to not have health insurance than white women.
- In 3 Latina women reported no health insurance.

Lack of insurance by income level:
- Women with lower income were significantly more likely to not have health insurance than higher income women.
- More than 1 in 4 women below 300% of the Federal Poverty Line reported no health insurance. They were 5 times more likely to be uninsured than women earning 300%+ FPL.

Lack of insurance by residential area:
- Women living in the southeast portion of the city are significantly more likely to lack health insurance or coverage.

EMPLOYMENT STATUS OF UNINSURED WOMEN

- Nearly half of the uninsured women work 20+ hrs/week.
- Of women working 20+hrs/week, 16% work in 10 job classifications (food preparation, cook, water, food concession, retail salesperson, housekeeper, childcare worker, janitor, hairdresser, cashier) that account for 53% of the uninsured.
- Women in these ten jobs were 8 times more likely to be uninsured than women in other jobs.

CONCLUSIONS

Despite the availability of Healthy San Francisco, women of reproductive age have significantly lower rates (14%) of health insurance or coverage than girls 18-18 years and older women.

Uninsurance disproportionately affects women of reproductive age who are: 19-24 years old, non-white, <300% of FPL, live in Southeast San Francisco, and work in 10 specific types of jobs.

The groups of women that lack health insurance/coverage for preconception and inter-conception health services coincide with the groups that have lower rates of timely prenatal care and worse outcomes in pregnancy, birth, and infant health.

Local Program and Policy Implications:
- Leveraging the ACA to develop programs and policies that improve health insurance rates of young women who are non-white and/or living in southeast portion of the city may improve preventive health care access, preconception health status, prenatal care and ultimately birth and infant health.
- Improving health insurance options in a few, key job sectors (restaurants, janitorial, childcare, retail, and beauty) might efficiently improve health care access.