Health Insurance Coverage and Working Immigrant Latinos in California, 2001: An Analysis of the Impact of Years of U.S. Residency on Latinos' Take-Up of Health Insurance

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Introduction & Background

- Secondary Data Analysis using Greenwald's survey (Greenwald, 2001;
 Health insurance coverage among working Latinos in California, 2001.)
- Latino Population in California was selected because of size of population and availability of dataset
- Latinos are the fastest growing ethnic minority population in the US with some of the greatest socio-economic and health-related challenges faced by any other segment of the US population
- Latinos represent approximately 15% of the US population (in California approximately 35% of the population)
- Latinos still represented approximately one-third of the 41.2 million US uninsured even though they only represent about 15% of the overall US population in 2001

Introduction & Background

- □ Socio-economic and health related challenges include:
 - Lack of health insurance coverage
 - High rates of poverty
 - Lower levels of educational attainment
 - Employment in jobs or industries that are less likely to offer health insurance coverage and more likely to pose a threat to their overall health and well-being
 - When compared to non-Latino whites, Latinos are more likely to experience lack adequate access to health care, be unemployed and/or underemployed, and have little-to-no health insurance coverage

Introduction & Background

- Cultural and language barriers also exist which prevent them from receiving culturally-appropriate and linguistically accurate health care services when needed
 - Healthcare professionals inability to communicate with Latino patients
 - Healthcare professionals lack of understanding of Latino patients' cultural and spiritual aspects of health and healing
- According to the IOM (2003), the lack of health insurance is the single most significant barrier to accessing health care more so than any other demographic or economic factor combined.
- Some factors that contribute to this include:
 - Working in industries and occupations that do not offer health insurance benefits
 - The type of employment status Latinos are granted (i.e., part-time, half-time, seasonal, day labor, etc.)

Data Sources

- The data for the study are from the Health Insurance Coverage Among Working Latinos in California (Greenwald, 2001).
- The purpose of the study was to understand why Latinos in California frequently lack health insurance coverage.
- The survey asked about respondents' health status, access to health care, health insurance coverage and utilization of health care services.
- The survey measured insured respondents' satisfaction with current health insurer and collected data about plan type, length of coverage with the plan, and the health plan's co-pays and deductibles.
- Demographic and socioeconomic characteristics of the respondents were gathered

Data Sources

- Uninsured respondents were asked why they did not have health insurance, whether or not their employer offered health insurance coverage and what they anticipated paying for their health insurance coverage.
- Respondents' attitudes were assessed concerning control of one's fate, the interest in obtaining routine health check-ups, and health insurance coverage as good versus poor value for the money invested to purchase such coverage.
- A telephone survey of 1,000 working California, Latino residents was conducted during the first quarter of 2001 by a random-digit dialing (RDD) (Greenwald, 2001).

Sample Description

- Approximately 70% of the Sample possessed some form of health insurance coverage (employer-sponsored, government-sponsored, or self-purchased).
- □ Approximately 58% of the respondents were U.S. Citizens
- □ Approximately 60% of the respondents were high school graduate or less
- □ 62.8% of the Sample was male, primarily between the ages of 26 45 years of age
- Approximately 50% of the sample was married
- □ Approximately 57% of the sample worked in the following 2-industries:
 - Retail Trades (36.4%)
 - Manufacturing (20.6%)

Purpose of Study

- The purpose of the study was:
 - To investigate the relationship between years of U.S. residency and health insurance coverage type among working Latinos in California
 - To investigate the impact years of U.S. residency has in determining the take-up of public and private health insurance coverage among working Latinos in California.
 - Other important independent variables included: demographic, economic, and cultural.

Measures

Dependent Variable:

The primary dependent variable is health insurance coverage type. Health insurance coverage type was categorized as employersponsored, self-purchased, government/military-sponsored, other source or no insurance (uninsured).

Independent Variables:

- Years of US Residency
- U.S. Citizenship
- Hispanic Ancestry
- Educational Level
- Marital Status
- Household Income
- Employment Industry
- Hours Worked per Week
- Union Membership/Affiliation

Statistical Analysis

- Descriptive statistics were calculated using Mantel-Haenszel Chi-Square.
- Multinomial logistic regression was employed to analyze the relationships between the independent variables and the dependent variable across the categories of the dependent variable: employer-sponsored, self-purchased, government/military-sponsored, other source or no insurance (uninsured).
- Sample weights were applied for analysis.
- All analyses will be performed using Version 15 of the SPSS systems for Windows (SPSS, Inc.).

Results

- The study's findings demonstrate the Latino immigrants in California who lived in the U.S. fewer than 5-years are less likely to be enrolled in government-sponsored heath insurance coverage compared to Latino immigrants who have lived in the U.S. for more than 5-years.
- The findings support the argument that Latino immigrants who have less years of U.S. residency are less likely to be insured. They are also less likely to be enrolled in publicly-funded health insurance coverage programs compared to those who are more acculturated and have resided in the U.S. for more than 5-years.
- The findings are consistent with other research that demonstrates that as immigrants acculturate into U.S. culture their consumption of government-subsidized health and welfare programs approximates mainstream U.S. practices regarding the take-up and use of such programs.

Results

- Analysis demonstrates that there are significant associations between employment industry and health insurance coverage type. Within two of the major industries that employ Latinos construction and retail trades these employees were approximately 42% and 53%, respectively, as likely to possess employer-sponsored coverage compared to those Latinos who were employed in the manufacturing industry.
- Results demonstrate that one of the largest industries that employs Latino laborers manufacturing had the highest rates of employer-sponsored health insurance compared to the other employment industries in this study. However, still approximately one-third of employees in this industry remained uninsured.
- Results demonstrate that there is a significant association between union membership and health insurance coverage. Latino employees who were union members were 2.75-times more likely to hold employer-sponsored coverage. Approximately 14% of the respondents indicated they held some form of union affiliation.

Results

- Results indicate that there is a significant association between hours worked per week and health insurance coverage type. This association is consistent with other research that demonstrates that the fewer hours per week a Latino employee works actually precludes them from participating in employer-sponsored coverage.
- The study also examined Latino employees' take-up of self-purchased health insurance coverage. Analysis revealed a significant correlation between years of residency and self-purchased health insurance coverage. The greater the years of residency a Latino employee lived in the U.S. the greater the likelihood he/she possessed self-purchased health insurance coverage.

Implications for Policy & Practice

- Expansion of Employer-Sponsored Health Insurance Coverage.
 - Health reform is needed to expand Latinos' access to employer-sponsored coverage by providing employers, especially those industries (construction, manufacturing, and retail trade) that are more likely to employ immigrant Latinos, incentives to offer health insurance benefits to their employees.
 - Such reform should include tax incentives to expand coverage to less than fulltime employees
- Incentivize Small Business Employers to Offer Coverage.
 - Health reforms targeting the small business sector should contain provisions that make it viable for small businesses to offer affordable health insurance coverage programs to their employees.
 - Such reforms should provide subsidies to small employers in an effort to assist them with providing health insurance coverage for their lower wage earning employees, who typically go without coverage because of the cost.

Implications for Policy & Practice

Government Programs.

Policies that expand government-funded health insurance programs and provide greater access to community-based clinics and other healthrelated venues for undocumented Latino employees would also help to alleviate the high rates of uninsured Latinos in the U.S.

■ Lower-Cost Health Insurance Coverage Options.

- Health reform should include provisions for providers of lowercost/minimum health insurance coverage options
 - Tiers
 - Incorporation of community based and safety-net providers
- We believe that immigrants should be covered. If they are not, it becomes even more important to support the safety-net providers

Implications for Policy & Practice

- □ Enhance Culturally-relevant and Linguistically-accurate Health Insurance Coverage Information, Programs and Services.
 - Health insurers should also provide in-language, culturally-relevant educational tools, programs, resources and services for employers and consumers who purchase their products.

Presenter Disclosures

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Thank you!/¡Gracias!