HEALTH INSURANCE POLICY — A NATIONAL SNAPSHOT

“The United States healthcare system is on the verge of potential, dynamic change.” – DANIEL PELINO, GLOBAL MANAGER, IBM

OVERVIEW
This project gathers data that can be used in more in-depth studies on health insurance policy and its impact. It will highlight a series of characteristics of the uninsured and other factors, such as poverty, which could explain coverage differences. Some of the featured maps also show federally supported resources or programs in the form of grants and health centers that can ameliorate the conditions of the uninsured.

COVERAGE CONCERNS
The US Census shows that 46 million people are uninsured. Another 25 million are underinsured, with insufficient benefits for their needs, according to a recent study by the Commonwealth Fund, a health care policy foundation in New York. The sum of these groups suggests that nearly one fourth of Americans have inadequate health benefits.

MARKET-RELATED ISSUES
Larger employer insurance pools are overseen by federal laws. The small-group insurance market is overseen by the states. Beyond these two employment-related categories, the individual health-insurance market, also overseen by the states, is a prime example of market-related issues. Risk selection, where insurers cover the least expensive people to insure and reject those most in need of coverage, is rampant in this sector. Some speculate that a result of a lack of coverage and under coverage is that many people turn to emergency rooms as their source of medical care.

LIMITATIONS
This snapshot gives analysts the tools to start the process of analyzing health insurance and other related topics. However, there were limitations in the analysis because of variations in the data. For example, the poverty data is from the 2000 US Census while the health insurance coverage data was created in 2005 and 2007.

PEOPLE

COVERAGE

POLICY

RESOURCES

OVERVIEW

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