

Health Status, Health Insurance, and Health Services Utilization: 2001

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Household Economic Studies

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This report presents health service utilization rates by economic and demographic characteristics, health insurance coverage status, and health status.¹ The health service utilization rates are measured by the frequencies of visits to service providers, such as doctors, dentists, and hospitals, and by whether or not people are taking prescription medicine. Self-reported health status is measured on a scale ranging from 1 to 5, where 1 is “excellent” and 5 is “poor.”

While a majority of people have private health insurance, employment-based or self-purchased, and others have government-provided free health insurance, some remain without health insurance.² According to the Annual Social and Economic Supplement (ASEC) to the Current Population Survey (CPS), 60.4 percent of people in 2003 had employment-based health insurance, 26.6 percent had government health insurance, and 15.6 percent were without health insurance for the entire year.³

According to the Survey of Income and Program Participation’s (SIPP) 1996 panel,

¹ The data presented in this report were collected from October 2001 through January 2002 in the third wave of the 2001 Survey of Income and Program Participation. The population presented is the civilian noninstitutionalized population living in the United States. All comparisons made in this report have undergone statistical testing and are significant at the 90-percent confidence level unless otherwise noted.

² An employer offering health insurance may be the respondent’s own employer or another person’s employer.

³ DeNavas-Walt, Carmen, Bernadette Proctor, and Robert Mills (2004), *Income, Poverty, and Health Insurance Coverage in the United States: 2003*, U.S. Census Bureau: <www.census.gov/prod/2004pubs/p60-226.pdf>.

The SIPP— A Longitudinal Survey

The SIPP is a longitudinal survey in which respondents are interviewed every 4 months for 36 to 48 months. Respondents provide monthly information on several core areas, such as income, employment, program participation, and general demographic characteristics. In addition, respondents provide information on many other topics included in different modules known as wave interviews. The SIPP’s 1996 panel was a 12-wave panel covering 48 months, and the SIPP’s 2001 panel was a 9-wave panel covering 36 months.

8.3 percent of people were without health insurance coverage for the entire 1997 calendar year.⁴ Another 13.3 percent of people were covered during some part of 1997, but they lacked coverage for at least 1 month.⁵ Among the 98 million people who worked for an employer offering health insurance to their employees, 13 million eligible workers chose not to participate in their employers’ plans in 1997; 3 million cited cost as one of the reasons, and 10 million had coverage

⁴ The CPS estimate of uninsured for 1997 was 16.1 percent. The variation between the SIPP and CPS estimates is due to differences in the survey techniques used by the two surveys.

⁵ Bhandari, Shailesh and Robert Mills (2003), *Dynamics of Economic Well-Being: Health Insurance 1996-1999*, U.S. Census Bureau: <www.census.gov/prod/2003pubs/p70-92.pdf>.

Current Population Reports

By
Shailesh Bhandari

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through another source.⁶ Others were denied or were ineligible for health insurance coverage.⁷

This report uses data from the SIPP 2001 panel, Wave 3, administered between October 2001 and January 2002.⁸ While most data are contained in the topical module on medical expenses and utilization, information on demographic characteristics and health insurance coverage come from the core data.⁹ In the SIPP core survey, respondents provide monthly information about their health insurance status as well as other information for a 4-month period.¹⁰ In this topical module, respondents provide information for all 12 months prior to the interview. For more information on the SIPP, see the text box “The SIPP—A Longitudinal Survey.”

⁶ Respondents could cite several reasons for choosing no coverage. Therefore, the two groups are not mutually exclusive.

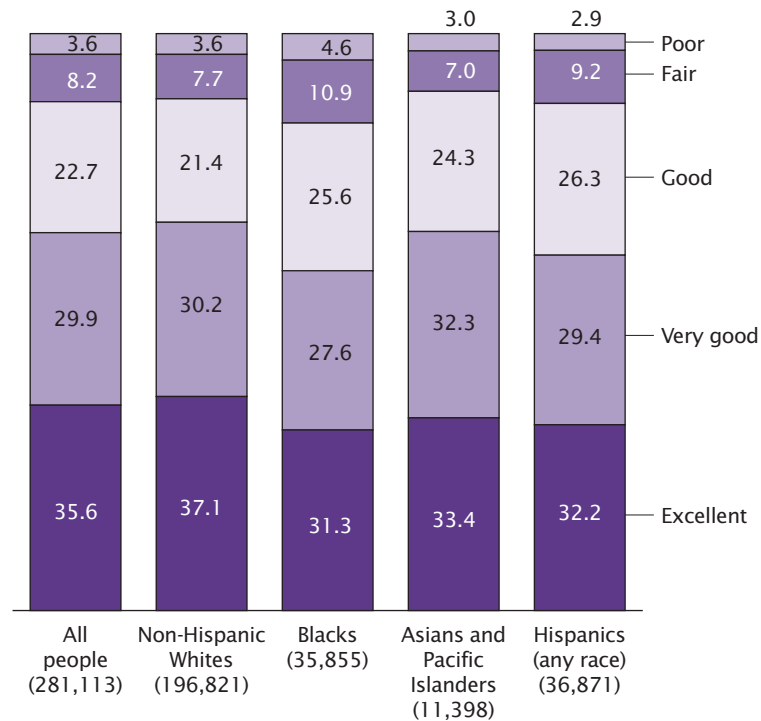
⁷ Bhandari, Shailesh (2002), *Employment-Based Health Insurance: 1997*, U.S. Census Bureau: <www.census.gov/prod/2003pubs/p70-81.pdf>.

⁸ For the 2001 SIPP Panel, approximately 40,500 housing units were in sample for Wave 1. Of the 40,500 eligible units, 35,100 were interviewed. In Wave 2, an approximate 15 percent sample cut was implemented due to budget constraints. In Wave 2, 28,100 interviews were obtained from 30,500 eligible units. In Wave 3, 27,500 interviews were obtained from 30,900 eligible units. In Wave 4, 27,200 interviews were obtained from 31,100 eligible units. In Wave 5, 26,800 interviews were obtained from 31,300 eligible units. In Wave 6, 26,600 interviews were obtained from 31,400 eligible units. In Wave 7, 26,500 interviews were obtained from 31,500 eligible units. In Wave 8, 26,000 interviews were obtained from 31,600 eligible units. In Wave 9, 25,500 interviews were obtained from 31,700 eligible units.

⁹ The same topical module was administered in Waves 6 and 9.

¹⁰ Although SIPP is essentially a survey designed to measure the social and economic characteristics of low-income households, its large sample size makes it a reliable data source for medical expense and service utilization analysis. A brief comparison of SIPP with the Medical Expenditure Panel Survey is presented in the appendix.

Figure 1.
Percentage Distribution of Perceived Health Status by Race and Hispanic Origin: 2001



Note: Numbers below bars represent the total number of people in thousands.

Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

HEALTH STATUS

In 2001, close to two-thirds of people reported either excellent or very good health, with the majority of those two-thirds reporting excellent health (Figure 1). About 12 percent of people reported fair or poor health. Men reported better health than women did. A higher proportion of women than men reported fair or poor health, 13 percent and 11 percent, respectively, and a lower proportion reported excellent health, 34 percent and 37 percent, respectively (Table 1).¹¹ A higher proportion of non-Hispanic Whites than Blacks, Hispanics, or Asians

¹¹ The percentages of men and women reporting very good health were not statistically different.

and Pacific Islanders reported excellent health; the proportion reporting poor health was lower for Hispanics than for non-Hispanic Whites.¹²

The estimates in this report are based on responses from a sample of the population. As with all surveys, estimates may vary from the actual values because of sampling

¹² Hispanics may be any race. As a result, estimates for Hispanics in this report overlap slightly with estimates for the Black population and the Asian and Pacific Islander population. Based on Wave 3 of the SIPP's 2001 panel, 6.3 percent of Blacks and 4.3 percent of Asians and Pacific Islanders were Hispanic. Statistically, the percentages of Blacks and Hispanics reporting excellent health were not different; percentages of non-Hispanic Whites and of Asian and Pacific Islanders were not different for very good, good, fair, or poor health-status groups; and the percentages of Hispanics and of Asians and Pacific Islanders reporting poor health were not different.

Table 1.
Perceived Health Status by Selected Characteristics: 2001

(Numbers in thousands)

Characteristic	Total number	Health status (percent)				
		Excellent	Very good	Good	Fair	Poor
All people.....	281,113	35.6	29.9	22.7	8.2	3.6
Sex						
Men	137,361	37.4	30.1	21.8	7.4	3.4
Women	143,752	33.9	29.7	23.5	9.0	3.8
Race and Hispanic Origin						
Non-Hispanic White	196,821	37.1	30.2	21.4	7.7	3.6
Black	35,855	31.3	27.6	25.6	10.9	4.6
Asian and Pacific Islander.....	11,398	33.4	32.3	24.3	7.0	3.0
Hispanic (any race).....	36,871	32.2	29.4	26.3	9.2	2.9
Age						
Under 18 years	72,659	56.5	27.2	13.8	2.1	0.4
18 to 24 years	27,022	43.7	32.5	19.2	3.9	0.8
25 to 44 years	82,980	34.8	34.2	22.5	6.5	2.0
45 to 64 years	64,710	23.0	31.2	28.0	11.9	5.9
65 years and over.....	33,742	10.5	20.5	34.7	22.3	12.1
Family Income-to-Poverty Ratio						
Less than 100 percent	40,230	28.9	26.8	24.8	12.8	6.7
100 percent to less than 150 percent.....	26,309	29.3	26.2	25.5	12.6	6.5
150 percent to less than 200 percent.....	27,770	31.1	28.4	25.7	10.5	4.4
200 percent to less than 250 percent.....	27,999	33.7	29.5	24.1	8.8	3.9
250 percent or higher.....	158,423	39.5	31.6	20.9	5.9	2.1

Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

variation or other factors. Further information on the source and accuracy of the estimates is available at <www.sipp.census.gov/sipp/sourceac/S&A01_w1tow6_cross_puf.pdf>.

Data suggest that aging is associated with diminishing perceived health status. For example, 57 percent of people under 18 reported having excellent health (Table 1). Among older age groups, the percentage of people reporting excellent health was lower and the percentage reporting good, fair, or poor health was higher than for the younger age groups reporting the same health conditions, respectively.

There was no direct relationship between income and perceived health status unless the income was at least 250 percent of the poverty line—people living in a family with

income at least 250 percent of their poverty threshold had better health status than other income groups. People in families with incomes less than 100 percent of the poverty threshold had the same health status as those in families with incomes of 100 to 149 percent of the poverty threshold.¹³ The second income group (100 to 149 percent of the poverty threshold) and the third income group (150 to 199 percent of the poverty threshold) in Table 1 had statistically the same percentages of people with excellent health, very good health, or good health. The third income group and the fourth income group (200 to 250 percent of poverty threshold) had similar distributions

¹³ For definitions and a detailed discussion of poverty and poverty thresholds, see DeNavas-Walt, Proctor, and Mills (2004) <www.census.gov/prod/2004pubs/p60-226.pdf>.

of people with very good health, good health, or poor health.

HEALTH STATUS AND MEDICAL SERVICES UTILIZATION¹⁴

The way people report their health status is directly related to their use of medical services, which include visits to doctors or dentists, hospital stays, and prescription medicine. For example, compared with other health-status groups, those in progressively better health-status categories visited doctors less frequently, stayed fewer nights in hospitals, and took prescription medicine less frequently (Table 2). However, no clear evidence links reported health status and visits to the dentist.

¹⁴ Since the institutionalized population is not part of the SIPP sample, this analysis does not include service utilization by that population.

Table 2.
Health Services Utilization Rates by Health Status: 2001

(Numbers in thousands)

Health service	Total number	Health status				
		Excellent	Very good	Good	Fair	Poor
Population under 18 years	72,659	41,029	19,787	10,036	1,554	253
Percent Distribution						
Doctor visit	100.0	100.0	100.0	100.0	100.0	100.0
No visit	34.4	35.3	33.5	35.3	19.2	13.0
Visited once	18.3	21.1	16.4	12.6	6.8	0.0
Visited twice	18.2	18.4	19.4	15.5	14.1	15.4
More than twice	29.2	25.2	30.6	36.7	59.9	71.6
Dentist visit	100.0	100.0	100.0	100.0	100.0	100.0
No visit	45.5	42.8	47.4	51.9	51.2	37.4
Visited once	17.9	18.2	17.0	17.4	19.5	28.9
Visited twice	25.6	27.8	24.7	19.5	19.5	19.8
More than twice	11.1	11.1	10.9	11.2	9.9	14.0
Hospital stay	100.0	100.0	100.0	100.0	100.0	100.0
No hospital stay	94.7	95.4	95.3	93.5	83.2	70.8
1 to 7 nights	4.7	4.4	4.4	5.4	12.0	15.7
8 to 30 nights	0.5	0.2	0.3	1.0	3.9	5.5
31 to 90 nights	0.1	0.0	0.0	0.0	0.8	3.6
91 nights or more ¹	0.0	0.0	0.0	0.1	0.0	4.5
Prescription medicine	100.0	100.0	100.0	100.0	100.0	100.0
Never taken	64.7	69.5	62.6	55.6	28.6	19.4
Ever taken, not always	25.2	24.1	26.5	27.4	23.5	24.2
Taken whole year	10.2	6.4	11.0	17.1	47.9	56.3
Population 18 years and over	208,454	59,065	64,241	53,701	21,622	9,826
Percent Distribution						
Doctor visit	100.0	100.0	100.0	100.0	100.0	100.0
No visit	24.2	32.0	25.2	22.2	13.0	6.7
Visited once	17.0	24.3	19.0	13.6	6.6	3.0
Visited twice	15.7	18.4	18.0	14.7	9.1	4.9
More than twice	43.0	25.4	37.8	49.6	71.3	85.5
Dentist visit	100.0	100.0	100.0	100.0	100.0	100.0
No visit	40.0	31.7	35.9	44.6	53.6	61.6
Visited once	20.1	22.9	21.0	19.0	15.5	13.0
Visited twice	25.7	32.0	27.9	22.0	16.3	13.6
More than twice	14.3	13.4	15.3	14.5	14.6	11.8
Hospital stay	100.0	100.0	100.0	100.0	100.0	100.0
No hospital stay	90.1	95.4	93.7	90.0	78.4	60.8
1 to 7 nights	7.9	4.4	5.9	8.4	15.3	22.8
8 to 30 nights	1.7	0.2	0.4	1.5	5.1	12.8
31 to 90 nights	0.3	0.0	0.0	0.1	1.0	2.8
91 nights or more ¹	0.1	0.0	0.0	0.0	0.2	0.7
Prescription medicine	100.0	100.0	100.0	100.0	100.0	100.0
Never taken	45.2	62.2	48.7	39.4	18.6	9.6
Ever taken, not always	14.1	15.3	17.1	13.2	8.5	3.9
Taken whole year	40.8	22.5	34.2	47.4	72.8	86.5

¹ The universe for the SIPP excludes the institutionalized population, so this table underestimates the percentage of the total population with long hospital stays.

Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

Figure 2.
Percentage Distribution of Frequency of Doctor Visits Over the Previous 12 Months by Selected Characteristics: 2001



Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

Among children (individuals under 18 years old), 25 percent of those with excellent health status visited a doctor more than twice in the previous 12 months. The corresponding figures for those with very good health, good health, fair health, and poor health were 31 percent, 37 percent, 60 percent, and 72 percent, respectively. Among adults (those 18 and older), 25 percent of those reporting excellent health visited a doctor more than twice. The corresponding figures were higher for those reporting very good health (38 percent), good

health (50 percent), fair health (71 percent), and poor health (86 percent). People with excellent health had the lowest proportion of people reporting more than two visits to doctors.

About 95 percent of people with excellent or very good health did not spend any nights as a patient in a hospital in the 12 months prior to the interview. The corresponding numbers were successively lower for other health-status groups. The corresponding figures for good health, fair health, and poor health

groups were 94 percent, 83 percent, and 71 percent, respectively, among children; and 90 percent, 78 percent, and 61 percent, respectively, among adults. The chances of a hospital stay were successively higher for those in each lower health-status group.

Sixty-five percent of children and 45 percent of adults did not take prescription medicine over the previous 12 months. The rates were highest for people with excellent health (69 percent among children and 62 percent among adults), and successively lower for other health-status groups. They were lowest among those with poor health status (19 percent of children and 10 percent of adults with poor health did not take prescription medicine).

Ten percent of children and 41 percent of adults took prescription medicine for the entire 12 months. The rates were lowest for people reporting excellent health (6 percent among children and 23 percent among adults); they were successively higher for other health-status groups and highest among those with poor health status (56 percent among children and 87 percent among adults).

MEDICAL SERVICES UTILIZATION BY CHARACTERISTIC

Doctor Visits

The frequency of visits to doctors or dentists depends on, among other things, health status, health insurance status, and the economic status of the individuals. It also varies by age, income, and other characteristics of individuals (Figure 2). Among all people, 27 percent never saw a doctor in the past 12 months, while 31 percent of people visited doctors more than three times (Table 3).

Table 3.
Medical Services Utilization Rates by Selected Characteristics: 2001

(Numbers in thousands)

Characteristic	Total number	Doctor visits		Dentist visits		Hospital nights		Prescription medicine	
		0	More than 3	0	More than 3	0	More than 30	Never	Regularly
All people	281,113	26.9	30.5	41.4	8.2	91.3	0.3	50.2	32.9
Sex									
Men.....	137,361	32.5	25.0	44.2	7.5	93.1	0.3	56.2	27.1
Women.....	143,752	21.4	35.6	38.7	8.8	89.6	0.3	44.5	38.4
Race and Hispanic Origin									
Non-Hispanic White.....	196,821	22.5	33.4	36.1	9.3	91.0	0.3	44.6	37.4
Black.....	35,855	33.0	26.1	53.1	5.0	91.2	0.2	59.1	26.8
Asian and Pacific Islander.....	11,398	33.5	23.7	43.8	7.6	93.1	0.1	62.7	21.5
Hispanic (any race).....	36,871	43.0	21.1	58.5	5.2	92.5	0.2	67.8	17.4
Age									
Under 18 years.....	72,659	34.4	20.4	45.5	7.2	94.7	0.1	64.7	10.2
18 to 24 years.....	27,022	35.3	21.4	43.1	5.6	92.6	0.1	65.9	16.9
25 to 44 years.....	82,980	29.6	26.5	39.8	6.8	92.2	0.1	56.0	25.2
45 to 64 years.....	64,710	20.5	36.4	35.4	11.1	90.9	0.3	37.7	50.9
65 years and over.....	33,742	9.3	57.7	46.6	9.9	81.3	1.2	16.3	78.6
Family Income-to-Poverty Ratio									
Less than 100 percent.....	40,230	35.9	28.4	58.4	4.7	88.9	0.4	56.3	28.3
100 percent to less than 150 percent.....	26,309	32.4	31.4	57.0	5.9	89.4	0.3	52.3	32.7
150 percent to less than 200 percent.....	27,770	31.8	29.4	51.6	5.8	90.1	0.5	52.0	32.1
200 percent to less than 250 percent.....	27,999	27.5	29.2	46.3	7.5	91.1	0.3	51.5	32.2
250 percent or higher.....	158,423	22.6	31.3	31.8	9.9	92.4	0.2	47.7	34.3

Note: Subtracting the columns representing “zero” or “never” from 100 percent will produce a new category called “at least once.”

Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

A higher proportion of women than men reported poor health as well as visits to doctors—21 percent of women never saw a doctor in the previous 12 months, while 36 percent visited doctors more than three times in the same period. Compared with women, a larger proportion of men did not see a doctor (33 percent) and a smaller proportion visited doctors more than three times (25 percent).

Non-Hispanic Whites had the highest and Hispanics had the lowest doctor-visit rates. During the 12 months prior to the interview, 23 percent of non-Hispanic Whites never visited a doctor. The corresponding rates for Blacks, Asians and Pacific Islanders, and Hispanics were 33 percent, 34 percent, and

43 percent, respectively.¹⁵ About 33 percent of non-Hispanic Whites visited doctors more than three times, which was higher than the rates of Blacks (26 percent), Asians and Pacific Islanders (24 percent), and Hispanics (21 percent). The difference in doctor-visit rates between Blacks and Hispanics is consistent with their reported health status—while equal proportions of them reported excellent health, a lower proportion of Hispanics than Blacks reported fair or poor health.

Compared with younger people, older people reported not only

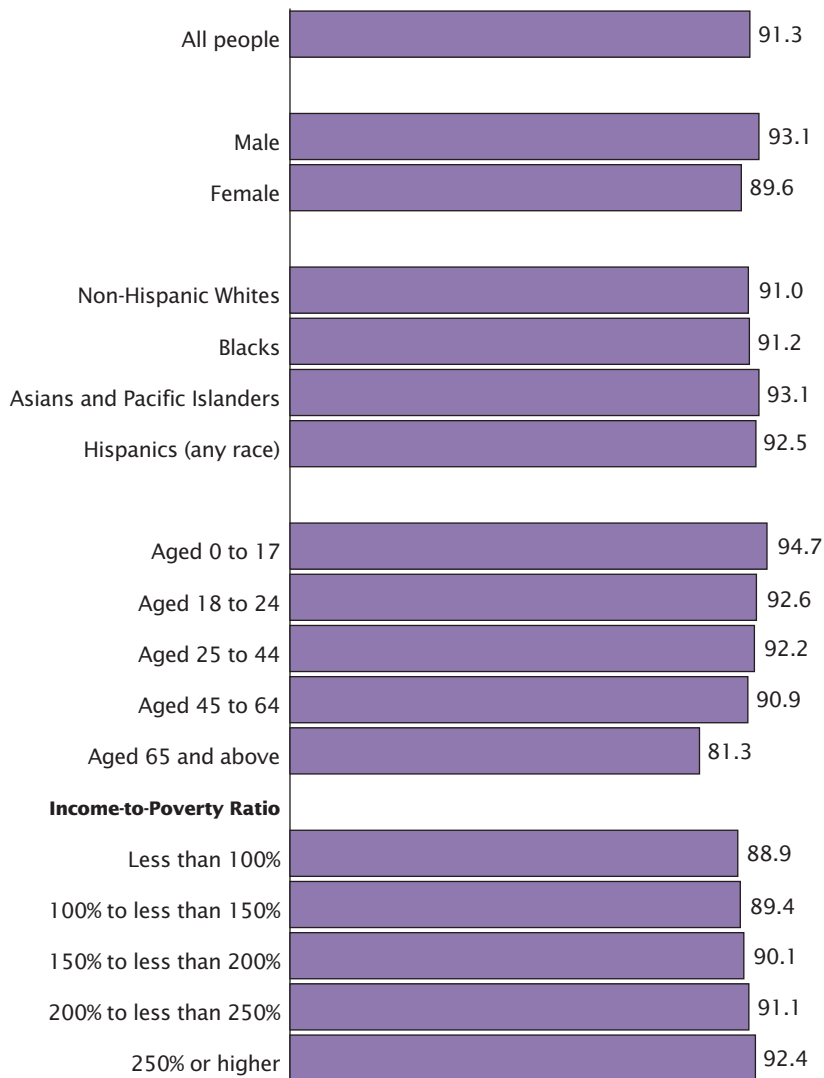
¹⁵ The percentages of Blacks and of Asians and Pacific Islanders reporting zero visits to a doctor were not statistically different.

worse health but also greater frequencies of doctor visits.¹⁶ About 35 percent of those under 25, 30 percent of those 25 to 44, 21 percent of those 45 to 64, and 9 percent of people aged 65 and over never visited a doctor during the 12 months prior to the survey. In the same age groups, about 20 percent, 27 percent, 36 percent, and 58 percent, respectively, visited doctors more than three times over the same period.

Income played a role in the percentage with at least one doctor visit but did not play a role in the percentage with more than three

¹⁶ The doctor-visit rates of people aged 0 to 17 years and 18 to 24 years were not statistically different and are combined to show the population under 25 years.

Figure 3.
Percentage With No Hospital Stays Over the Previous 12 Months by Selected Characteristics: 2001



Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

visits.¹⁷ Dividing the population into five categories based on their income-to-poverty ratio reveals that people in higher-income groups were less likely not to have

¹⁷ Proportions of people with family income of 100 to 150 percent and 150 to 199 percent of poverty thresholds who did not visit a doctor were not statistically different. The percentage who reported at least one doctor visit was derived by subtracting from 100 the percentage who had zero doctor visits.

visited a doctor during the 12 months. People with higher incomes did not differ from people with lower incomes in visiting doctors more than three times, although they had a higher rate of at least one visit.

Dentist Visits

Dentist-visit rates varied by sex, race, Hispanic origin, age, and income (Table 3). Over the previous

12 months, 39 percent of women and 44 percent of men never saw a dentist; and another 9 percent of women visited dentists more than three times compared with 8 percent of men. Non-Hispanic Whites visited a dentist the most, based on more than three visits, and Hispanics visited a dentist the least, based on zero visits.

People under 18 and those aged 65 and over visited a dentist at least once in equal proportions—about 54 percent of both groups visited a dentist at least once over the last 12 months. For other age groups, a higher proportion of older people than younger ones visited a dentist at least once. People aged 45 to 64 had the highest proportions who visited dentists at least once and more than three times. The lowest proportions of people who visited a dentist more than three times were those under 45.

Dentist-visit rates were directly related to family income. People living in families with incomes less than 150 percent of their poverty threshold had the lowest rate of at least one visit to a dentist.¹⁸ For other income groups, as the income-to-poverty ratio increased, so did the rates of at least one visit or more than three visits to a dentist. Those with a 250 percent or higher income-to-poverty ratio had the highest proportions of people with at least one visit or more than three visits to dentists.

¹⁸ The percentages of people with family income of less than 100 percent of their poverty threshold and 100 to 149 percent of their poverty threshold visiting a dentist at least once were statistically not different and were combined for the comparison. The percentages of people with family income of 100 to 149 percent of their poverty threshold and 150 to 199 percent of their poverty threshold visiting a dentist more than three times were statistically not different.

Hospital Stays

While 91 percent of all people did not spend any nights in a hospital as a patient, the proportion for people aged 65 and over was 81 percent (Figure 3).¹⁹ People under 18 years had the highest, and those aged 65 and over had the lowest proportions of people with zero nights in a hospital.

The likelihood of at least one night in a hospital varied across sex, race, and Hispanic origin. However, the likelihood of more than 30 nights of hospital-stay was uniform across those characteristics. While a higher proportion of women than men spent at least one night in the hospital, an equal proportion of them spent more than 30 nights. A lower proportion of Asians and Pacific Islanders than non-Hispanic Whites, Blacks, and Hispanics spent at least one night in a hospital.²⁰ However, about equal proportions of all groups spent more than 30 nights in hospitals.

Older people had higher rates than younger ones of at least one night of hospital-stay. People 65 years and older had the highest proportions who spent at least one night or over 30 nights in a hospital.²¹ Except for people aged 65 and over, other age groups showed no differences in the proportions of people staying more than 30 nights in the hospital.

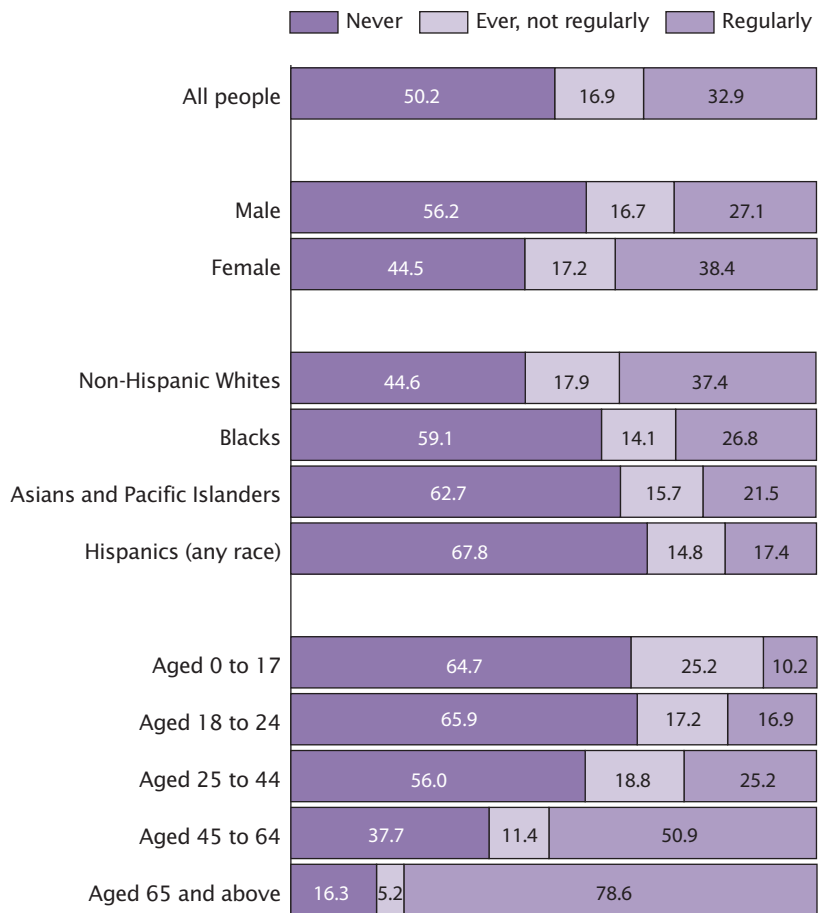
¹⁹ People in institutions, which include nursing homes, are not included in the SIPP. Therefore, this analysis does not represent their service utilization.

²⁰ The percentage of non-Hispanic Whites staying zero nights in a hospital was not statistically different from that of Blacks; and the percentage of Asians and Pacific Islanders staying zero nights was not different from that of Hispanics.

²¹ The percentage of people aged 18 to 24 staying zero nights in a hospital was not different from that of people aged 25 to 44.

Figure 4.

Percentage Distribution of Frequency of Prescription Medicine Over the Previous 12 Months by Selected Characteristics: 2001



Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

Prescription Medicine

One-half of all people never took prescription medicines, while another one-third regularly took prescription medicines over the previous 12 months (Figure 4). A higher proportion of women than men took prescription medicine at least once (56 percent compared with 44 percent) or during the entire 12 months (38 percent compared with 27 percent).²²

²² The percentage who reported taking prescription medication at least once was derived by subtracting from 100 the percentage who

reported never taking prescription medicine. In Figure 4, at least once is the sum of ever, not regularly and regularly.

Table 4.
Health Insurance Coverage Rates by Health Status and Selected Characteristics: 2001

(Numbers in thousands. Health insurance type [percent])

Characteristic	Total number	Health status				
		Excellent	Very good	Good	Fair	Poor
All people.....	281,113	100,094	84,028	63,736	23,176	10,079
Covered by any health insurance.....	85.3	87.1	85.1	82.5	84.4	87.7
Covered by private health insurance.....	72.0	78.0	75.1	68.0	55.9	47.8
Covered by government health insurance.....	25.3	15.1	19.5	31.2	53.6	71.1
Not covered by any health insurance.....	14.8	12.9	14.9	17.5	15.6	12.3
Sex						
Men.....	137,361	51,307	41,286	29,930	10,218	4,620
Covered by any health insurance.....	83.8	85.6	83.6	80.7	83.1	86.4
Covered by private health insurance.....	71.7	77.1	74.5	67.7	56.8	45.4
Covered by government health insurance.....	22.7	14.0	17.5	28.0	51.1	70.3
Not covered by any health insurance.....	16.2	14.4	16.4	19.3	16.9	13.6
Women.....	143,752	48,787	42,742	33,806	12,958	5,459
Covered by any health insurance.....	86.7	88.7	86.5	84.1	85.5	88.8
Covered by private health insurance.....	72.2	78.9	75.7	68.2	55.3	49.8
Covered by government health insurance.....	27.7	16.4	21.4	34.1	55.6	71.8
Not covered by any health insurance.....	13.4	11.3	13.5	15.9	14.5	11.2
Race and Hispanic Origin						
Non-Hispanic White.....	196,821	73,016	59,420	42,155	15,220	7,010
Covered by any health insurance.....	89.7	90.9	89.6	88.0	88.4	90.0
Covered by private health insurance.....	79.9	85.0	82.5	76.7	65.3	56.4
Covered by government health insurance.....	23.8	12.1	18.2	32.3	56.0	72.9
Not covered by any health insurance.....	10.3	9.1	10.4	12.0	11.6	10.1
Black.....	35,855	11,231	9,894	9,182	3,900	1,647
Covered by any health insurance.....	80.7	83.0	79.5	78.4	80.7	84.6
Covered by private health insurance.....	55.3	61.7	60.5	54.6	37.9	26.3
Covered by government health insurance.....	33.4	27.0	25.3	33.8	55.2	72.9
Not covered by any health insurance.....	19.3	17.0	20.5	21.7	19.3	15.4
Asian and Pacific Islander.....	11,398	3,801	3,686	2,766	800	344
Covered by any health insurance.....	83.5	84.1	83.8	80.8	87.0	87.9
Covered by private health insurance.....	71.0	75.5	73.5	69.8	54.7	43.3
Covered by government health insurance.....	19.5	13.4	16.3	21.3	42.1	54.4
Not covered by any health insurance.....	16.5	15.9	16.2	19.2	13.0	12.1
Hispanic (any race).....	36,871	11,881	10,846	9,693	3,384	1,068
Covered by any health insurance.....	66.3	69.0	65.3	61.9	69.0	78.8
Covered by private health insurance.....	45.7	51.5	48.4	41.7	34.5	25.1
Covered by government health insurance.....	26.3	23.1	21.6	25.9	41.4	64.3
Not covered by any health insurance.....	33.7	31.0	34.7	38.1	31.0	21.3
Family Income-to-Poverty Ratio						
Incomes less than 100 percent of poverty threshold.....	40,230	11,634	10,773	9,969	5,165	2,689
Covered by any health insurance.....	70.1	73.7	67.0	65.8	72.1	79.2
Covered by private health insurance.....	32.6	41.7	36.0	29.0	20.2	16.6
Covered by government health insurance.....	45.2	38.3	38.1	45.2	61.2	72.4
Not covered by any health insurance.....	29.9	26.3	33.0	34.2	27.9	20.9
Incomes 100 to 199 percent of poverty threshold.....	54,080	16,320	14,769	13,831	6,227	2,932
Covered by any health insurance.....	76.8	76.7	74.4	74.3	82.1	89.8
Covered by private health insurance.....	55.9	60.6	57.3	54.2	47.7	48.0
Covered by government health insurance.....	36.5	24.1	28.8	39.5	61.7	77.8
Not covered by any health insurance.....	23.2	23.4	25.6	25.7	17.9	10.2
Incomes 200 or more percent of poverty threshold.....	186,803	72,141	58,485	39,936	11,784	4,459
Covered by any health insurance.....	91.0	91.6	91.1	89.5	91.0	91.5
Covered by private health insurance.....	85.1	87.8	86.8	82.5	75.9	66.4
Covered by government health insurance.....	17.7	9.4	13.7	24.9	46.0	66.0
Not covered by any health insurance.....	9.0	8.4	8.9	10.5	9.0	8.5

Note: Some people are covered by more than one source of health insurance. Therefore, the percentage covered by private health insurance and that by government health insurance add up to more than any coverage. Any coverage may easily be obtained by subtracting from 100 the "not covered."

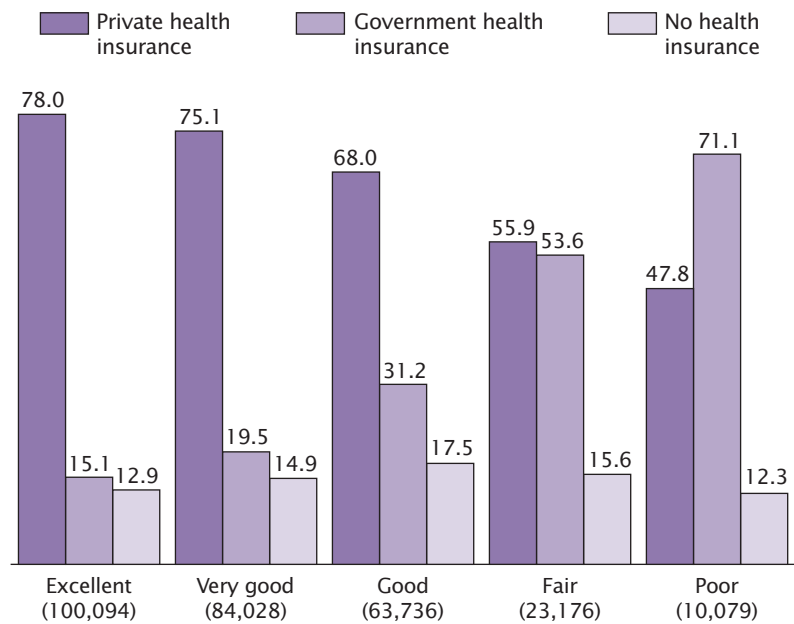
Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

Whites took prescription medicine regularly during the entire previous 12-month period, 27 percent of Blacks, 17 percent of Hispanics, and 22 percent of Asians and Pacific Islanders did so.

By age, people under 18 years had the lowest proportion and those aged 65 and over had the highest proportion of people taking prescription medicine at least once or regularly during the entire 12 months prior to the interview. About 35 percent of people under 25 years and 84 percent of those aged 65 and over took prescription medicine at least once. In the age groups 25 to 44 years and 45 to 64 years, the percentages taking prescription medicine regularly for the entire 12 months prior to the interview were about one-fourth and one-half, respectively.

People with family incomes of less than 100 percent of their poverty thresholds had the lowest and those with at least 250 percent of their poverty threshold had the highest proportions of people taking prescription medicine at least once or regularly for the entire 12 months prior to the interview. Among people with family incomes of less than 100 percent of their poverty thresholds, 44 percent took prescription medicine at least once and 28 percent took prescription medicine regularly for the entire 12 months. Among those with incomes at least 250 percent of the poverty threshold, 52 percent took prescription medicine at least once and 34 percent took prescription medicine regularly for the entire 12 months. Among those with family incomes 100 to 250 percent of the poverty threshold, about one-half took prescription medicine at least once, and

Figure 5.
Health Insurance Coverage for All People by Health Status: 2001



Note: Numbers below the bars represent the total number of people in thousands. Percentages add to more than 100 percent because of overlaps in coverage.
Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

one-third took it regularly for the entire 12 months.²³

HEALTH STATUS AND HEALTH INSURANCE COVERAGE²⁴

People with excellent health had the highest rate of private health insurance and the lowest rate of having government-provided health insurance coverage (Table 4). An estimated 78 percent of people with excellent health were covered by private health insurance and

²³ The consumption rates of prescription medicine were not statistically different among the three income-to-poverty ratio groups: 100 to 149 percent, 150 to 199 percent, and 200 to 249 percent of the poverty line.

²⁴ Health insurance status in this section is that in the fourth month of the reference period.

15 percent were covered by government health insurance. The lower health-status groups had successively lower private health insurance coverage rates and higher government health insurance rates. People reporting poor health status had the lowest private health insurance coverage rates and the highest government health insurance coverage rates.

When the two types of coverage are considered together, people with excellent health and those with poor health had health insurance coverage rates that were not statistically different (nearly 88 percent). Similarly, people with very good health and those with fair health had health insurance coverage rates that were not statistically different

Table 5.
Percentage of People Seeking Health Services Without Health Insurance by Health Status: 2001

(Numbers in thousands)

Health service	Total number	Health status				
		Excellent	Very good	Good	Fair	Poor
All people	281,113	100,094	84,028	63,736	23,176	10,079
Uninsured at least 1 month of 4 previous months ¹	46,468	14,910	14,077	12,174	3,947	1,359
Visited doctor/dentist while uninsured	21.4	12.0	18.3	25.4	41.6	63.2
Received service (out of those who visited)	75.3	59.7	70.7	75.3	90.2	93.8
Received free (out of those who received service)	33.2	52.5	30.0	31.7	23.4	37.6
Received discount (out of those who received service)	29.2	31.1	27.2	32.4	30.2	20.5
Did not receive service (out of those who visited)	24.7	40.3	29.3	24.7	9.8	6.2
Visited hospital while uninsured	2.6	0.9	1.5	3.5	6.2	15.7
Visited emergency room while uninsured	3.3	1.3	2.7	4.1	8.6	8.6
Obtained routine check-ups	10.2	6.2	8.5	11.8	17.0	36.2
People in poverty	40,230	11,634	10,773	9,969	5,165	2,689
Uninsured at least 1 month of 4 previous months ¹	13,079	3,448	3,884	3,640	1,492	615
Visited doctor/dentist while uninsured	23.3	12.3	17.8	27.2	39.1	58.4
Received service (out of those who visited)	76.7	59.4	68.9	74.6	89.6	97.2
Received free (out of those who received service)	40.2	61.3	39.4	42.9	23.8	45.2
Received discount (out of those who received service)	34.2	28.6	26.0	42.9	41.3	20.8
Did not receive service (out of those who visited)	23.3	40.6	31.1	25.4	10.4	2.8
Visited hospital while uninsured	3.6	1.0	1.5	4.6	7.4	16.3
Visited emergency room while uninsured	3.8	1.1	2.1	4.5	9.7	10.9
Obtained routine check-ups	10.5	6.6	8.0	12.3	13.2	31.4
People with incomes 100 to 199 percent of poverty threshold	54,080	16,320	14,769	13,831	6,227	2,932
Uninsured at least 1 month of 4 previous months ¹	13,723	4,309	4,096	3,771	1,231	316
Visited doctor/dentist while uninsured	21.3	11.1	18.2	25.4	41.8	72.3
Received service (out of those who visited)	78.9	65.0	74.7	80.4	89.7	91.5
Received free (out of those who received service)	25.0	41.9	23.8	20.6	19.8	30.3
Received discount (out of those who received service)	28.8	40.9	31.3	28.8	21.1	21.0
Did not receive service (out of those who visited)	21.1	35.0	25.3	19.6	10.3	8.5
Visited hospital while uninsured	2.1	0.4	1.3	3.1	4.7	12.8
Visited emergency room while uninsured	3.7	1.4	3.2	5.6	5.8	7.9
Obtained routine check-ups	9.7	5.1	7.8	11.0	21.5	36.9

¹ The 4 months included are the four preceding the interview month, which range from June to September 2001, through September to December 2001.

Source: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002.

(85 percent). People with good health (the middle category) had the highest percentage of people without any health insurance coverage, at 18 percent (Table 4 and Figure 5).²⁵

²⁵ Some people are covered by more than one source of health insurance. Therefore, the percentage covered by private health and that by government health insurance add up to more than any coverage. Any coverage may easily be obtained by subtracting from 100 the no coverage.

Men and women who reported good health had the highest uninsured rates of all health-status groups—19 percent of men and 16 percent of women reporting good health had no health insurance (Table 4).²⁶ In almost all health-status groups, compared

²⁶ The uninsured rates among women with good health and fair health were not statistically different.

with men, women had higher rates of any kind of health insurance coverage as well as of government health insurance coverage.²⁷ Private health insurance coverage rates

²⁷ Among those with poor health status, the government health insurance coverage rates were not statistically different for men and women; among the poor health-status group, the overall health insurance coverage rates were not statistically different for men and women.

among men and women were generally not statistically different.²⁸

Non-Hispanic Whites had the highest overall health insurance coverage rates as well as private health insurance rates in all health-status groups. Even among those with good health status (the most uninsured group), 12 percent of non-Hispanic Whites, 22 percent of Blacks, 38 percent of Hispanics, and 19 percent of Asians and Pacific Islanders lacked health insurance. Among non-Hispanic Whites and Blacks, nearly 73 percent of those with poor health, about 56 percent of those with fair health, and about 33 percent of those with good health had government health insurance.²⁹ Asians and Pacific Islanders had lower government coverage rates—20 percent overall and 54 percent of those with poor health.³⁰

Compared with people in poverty (those with incomes less than 100 percent of the poverty threshold), a larger proportion of people with higher incomes had some kind of health insurance. Those in poverty had higher proportions of people with government health insurance and a lower proportion with private health insurance coverage than those not in poverty.

UTILIZING HEALTH SERVICES WITHOUT HEALTH INSURANCE COVERAGE

Among people with at least 1 month of no health insurance coverage in the 4 months preceding

²⁸ Among those with excellent health status, women had a higher private health insurance coverage rate than men.

²⁹ Among people reporting good, fair, or poor health, the government health insurance rates for non-Hispanic Whites and Blacks were not statistically different.

³⁰ The proportions of Asians and Pacific Islanders with poor health status had government health insurance rates not statistically different from that of Hispanics.

the interview, 21 percent had visited a doctor or a dentist while they were uninsured (Table 5). Of those who visited, three-fourths received services. Among those who received services, nearly one-third received the service free of cost. Among uninsured people, those in poverty and those with incomes 100 to 199 percent of their poverty threshold had statistically the same proportions of people who visited a doctor or a dentist, received service, and got a discounted price for the service. A higher proportion of people in poverty than the latter group received that service for free.

Among people with at least 1 month not covered by health insurance, those reporting excellent health had the lowest rates of visiting a doctor, a dentist, a hospital, or an emergency room during the uninsured month. In addition, the proportion of people receiving routine check-ups during uninsured months was lowest among the excellent-health group. The lower health-status groups generally had successively higher rates of obtaining routine check-ups and visiting a doctor, a dentist, a hospital, or an emergency room when not insured.³¹ There was no clear pattern regarding the relationship between health status and receiving free health service from a doctor or a dentist.

SOURCE OF THE DATA

The population represented (the population universe) in the 2001 SIPP is the civilian noninstitutionalized population living in the United States. The SIPP is a longitudinal survey conducted at 4-month intervals. The data used in this report

³¹ The percentages of emergency room visits by people in the fair health group were not statistically different from those of people in the poor health group.

were collected from February through May 2003. For the 2001 SIPP panel, approximately 40,500 housing units were in sample for Wave 1. Of those 40,500 eligible units, 35,100 were interviewed. In Wave 3, 27,500 interviews were obtained from 30,900 eligible units. The institutionalized population, which is excluded from the population universe, is composed primarily of the population in correctional institutions and nursing homes (91 percent of the 4.1 million institutionalized population in Census 2000).

ACCURACY OF THE ESTIMATES

Statistics from surveys are subject to sampling and nonsampling errors. All comparisons presented in this report have taken sampling error into account and are significant at the 90-percent confidence level unless otherwise noted. This means the 90-percent confidence interval for the difference between the estimates being compared does not include zero. Nonsampling errors in surveys may be attributed to a variety of sources, such as how the survey is designed, how respondents interpret questions, how able and willing respondents are to provide correct answers, and how accurately the answers are coded and classified. The U.S. Census Bureau employs quality control procedures throughout the production process, including the overall design of surveys, the wording of questions, review of the work of interviewers and coders, and statistical review of reports to minimize these errors.

The SIPP weighting procedure uses ratio estimation, whereby sample estimates are adjusted to independent estimates of the national population by age, race, sex, and Hispanic origin. This weighting

partially corrects for bias due to undercoverage, but biases may still be present when people who are missed by the survey differ from those interviewed in ways other than age, race, sex, and Hispanic origin. How this weighting procedure affects other variables in the survey is not precisely known. All of these considerations affect comparisons across different surveys or data sources.

For further information on statistical standards and the computation and use of standard errors, go to <www.sipp.census.gov/sipp/sourceac/S&A-2_SIPP2001_w1tow9_20050214.pdf>

or contact Dennis Sissel of the Census Bureau's Demographic Statistical Methods Division via email <charles.d.sissel@census.gov>.

Additional information on the SIPP can be found at the following Web sites: <www.sipp.census.gov/sipp/> (main SIPP Web site), <www.sipp.census.gov/sipp/workpapr/wp230.pdf> (SIPP Quality Profile), and <www.sipp.census.gov/sipp/usrguide/sipp2001.pdf> (SIPP User's Guide).

MORE INFORMATION

The report is available on the Internet at <www.census.gov>.

Search for health insurance data by clicking on the "Subjects A-Z" link and selecting "health insurance data" under "H." Additional tables presenting health insurance information from the SIPP are also available on the Internet site.

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APPENDIX

Comparative Description of the Survey of Income and Program Participation and the Medical Expenditure Panel Survey

The Survey of Income and Program Participation (SIPP) and the Medical Expenditure Panel Survey (MEPS) are both longitudinal surveys. The two surveys have different scopes and techniques, but they cover some areas in common, such as health insurance and health service utilization. SIPP is broader in nature than MEPS, which is primarily designed to collect data on usage and cost of health services.

The SIPP core (the questions asked during every interview) collects information on sources and amount of income, labor force participation, program participation, health insurance coverage, and general demographic characteristics.

Additionally, SIPP topical modules (with questions that vary among the interview waves) collect information on several topics, such as personal history, child care, child support, wealth, disability, health service utilization, school enrollment, and so forth. On the other hand, MEPS is designed to collect data only about health care use and costs in the United States. MEPS consists of four components: a household component, a nursing home component, a medical provider component, and an insurance component.

Due to their differences in scope and techniques, the two surveys sometimes provide divergent estimates for similar concepts. Table A shows some comparable statistics from the surveys. For more detailed comparisons on the two surveys, including sample design, operational issues, and statistics, readers may visit their respective

Table A.

Percentage Distribution of Selected Characteristics in the Survey of Income and Program Participation (SIPP) and the Medical Expenditure Panel Survey (MEPS): 2001

Characteristic	SIPP	MEPS
All people	100.0	100.0
Sex		
Male	48.9	48.8
Female	51.1	51.2
Age		
Under 18 years	25.8	25.7
18 to 24 years	9.6	9.6
25 to 44 years	29.5	29.2
45 to 64 years	23.0	23.0
65 years and over	12.0	12.6
Perceived Health Status		
Not ascertained	¹ NA	0.1
Excellent	35.6	29.9
Very good	29.9	34.1
Good	22.7	25.5
Fair	8.2	7.6
Poor	3.6	2.8
Not Covered by Any Health Insurance		
All people	6.8	11.7
Not ascertained	¹ NA	19.4
Excellent	5.4	10.1
Very good	6.5	11.1
Good	9.0	13.9
Fair	8.2	13.6
Poor	6.4	9.6
Never Visited Doctors		
All people	26.2	27.5
Not ascertained	¹ NA	52.9
Excellent	33.2	33.7
Very good	26.1	27.9
Good	23.5	25.3
Fair	13.1	14.8
Poor	6.6	8.7
Never Visited Dentists		
All people	40.3	57.4
Not ascertained	¹ NA	97.6
Excellent	34.6	53.8
Very good	37.4	54.7
Good	44.8	60.1
Fair	53.2	67.7
Poor	60.7	73.4

¹ SIPP does not have this category since it imputes for nonresponse.

Sources: SIPP: U.S. Census Bureau, Survey of Income and Program Participation, October 2001–January 2002; MEPS: Agency for Healthcare Research and Quality, 2001 Full Year Consolidated Data File (HC-060). Released May 2004. Medical Expenditure Panel Survey.

Web sites: <www.meps.ahrq.gov/whatismeeps/overview.htm> and

<www.sipp.census.gov/sipp/overview.html>.

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