

# **LEGISLATIVE BRIEF**

# **TENNESSEANS WITHOUT HEALTH INSURANCE**

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October 2022

# Introduction

The Tennessee Comptroller's Office of Research and Education Accountability (OREA) was asked to investigate the number of Tennesseans without health insurance. In response to the request, OREA examined four different external sources and their respective methodologies to understand differences in reported numbers.

## Key Takeaway

Four external sources were reviewed. All but one resource pulls survey response data directly from the United States Census Bureau's publicly available American Community Survey, Current Population Survey, and/or the Annual Social and Economic Supplement. Variations in survey and reporting methodology produce estimates that range from 8.3 percent to 12.2 percent of Tennesseans without health insurance. Comparisons of reported numbers are presented in the table below.

Source	Number	Percent	Margin of Error	Margin of Error
U.S. Census Bureau – SAHIE (2020) <sup>A</sup>	674,659	12.2%	19,584	0.40%
SHADAC (2021) <sup>B</sup>	783,683	11.4%	N/A	1.60%
Kaiser Family Foundation (2021) <sup>c</sup>	783,700	11.4%	N/A	N/A
Boyd Center (2021) <sup>D</sup>	564,452	8.3%	N/A	N/A

Note that one source reports fewer uninsured Tennesseans at a greater percentage of the population while others report more uninsured Tennesseans at a lesser percentage of the population. In addition to those sources reporting different survey data in different ways, this discrepancy is likely due to frequently fluctuating population estimates.

## **Review of Sources and Results**

## United States Census Bureau's Small Area Health Insurance Estimate (SAHIE)

The United States Census Bureau's Small Area Health Insurance Estimate (SAHIE) uses the Census Bureau's American Community Survey (ACS) as the basis for its estimates of county and state health insurance coverage. Prior to 2008, SAHIE used the Annual Social and Economic Supplement to the Current Population Survey (CPS ASEC) but elected to use the ACS moving forward because the sample size of addresses is larger. In 2019, the ACS sample contained over 2 million households, while the CPS ASEC contained approximately 94,000 households. The ACS also allows single-year direct survey estimates for counties with a population of at least 65,000 and three-year estimates for counties with a population of at least 20,000.

<sup>&</sup>lt;sup>A</sup> Small Area Health Insurance Estimate, via the American Community Survey

<sup>&</sup>lt;sup>B</sup> The State Health Access Data Assistance Center (SHADAC) is a program of the Robert Wood Johnson Foundation and a part of the Health Policy and Management Division of the School of Public Health at the University of Minnesota.

<sup>&</sup>lt;sup>C</sup>The Kaiser Family Foundation is a nonprofit, non-partisan organization focusing on national health issues and health policy.

<sup>&</sup>lt;sup>D</sup> The Boyd Center for Business and Economic Research at the University of Tennessee (formerly referred to as CBER) is under contract with the Tennessee Department of Finance and Administration.

ACS *includes* civilian institutionalized persons while CPS ASEC *omits* civilian institutionalized persons. Examples of these populations include:

- active-duty military;
- persons in correctional institutions or juvenile institutions; and
- persons in nursing homes, skilled nursing facilities, and facilities for the disabled.

Active-duty military are automatically insured, while persons in correctional or juvenile institutions, nursing homes, skilled nursing facilities, and facilities for the disabled may or may not have private or public insurance.

In the ACS, a respondent is considered insured if they are currently covered at the time of response by any of the following types of health insurance or coverage plans:

- insurance through a current or former employer or union (of this person or another family member);
- insurance purchased directly from an insurance company (by this person or another family member);
- Medicare, for people 65 and older or people with certain disabilities;
- Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability;
- TRICARE or other military health care;
- Indian Health Services;<sup>E</sup>
- Veterans Affairs; or
- any other type of user-specified insurance or health coverage plan.

SAHIE does not report insurance rates for people over the age of 65, citing that 98 percent of people over 65 are insured. In addition to the ACS, SAHIE's aggregated sources include:

- demographic population estimates,
- aggregated federal tax returns,
- Supplemental Nutrition Assistance Program (SNAP) participation records,
- Children's Health Insurance Program (CHIP) participation records,
- Medicaid enrollment records,
- 2010 Census, and
- County Business Patterns.<sup>F</sup>

<sup>&</sup>lt;sup>E</sup> Respondents who report coverage solely from Indian Health Services are not considered fully insured, thus they are included in the uninsured category. <sup>F</sup> County Business Patterns is an annual series that provides subnational economic data by industry, including number of establishments, employment numbers, and payroll data.

ACS response rates declined due to the COVID-19 pandemic. In 2019, the ACS response rate was 86 percent while in 2020 it was 71.2 percent.<sup>G</sup> The most recent estimates from SAHIE on the number of uninsured include data from survey responses collected in 2020. Based on the most recent data collected by SAHIE, there were 674,659 uninsured Tennesseans in 2020, which amounts to 12.2 percent of the population.<sup>H</sup>

### State Health Access Data Assistance Center (SHADAC)

The State Health Access Data Assistance Center (SHADAC) is a program of the Robert Wood Johnson Foundation and a part of the Health Policy and Management Division of the School of Public Health at the University of Minnesota. SHADAC describes itself as "a multidisciplinary health policy research center with a focus on state policy [that] collects and applies health policy data to inform and evaluate health policy decisions."

The Robert Wood Johnson Foundation provides funding for SHADAC to provide technical assistance to policymakers in their use of state, local, and federal data on health insurance coverage, monitor data on the number and characteristics of the uninsured, and evaluate and work to improve the quality of state-level data on coverage.

SHADAC publishes state health profiles called State Health Compare on its website. State Health Compare normally provides annual updates based on single-year data from the U.S. Census Bureau's ACS. Due to the decline in ACS response rates noted above, SHADAC's most recent State Health Compare production uses CPS ASEC data.

However, the CPS ASEC survey response rate also declined in 2020. In March 2019 the response rate was 80 percent, while in March 2020 the response rate was 73 percent. In addition, the differences between respondents and nonrespondents were greater in 2019 and 2020 compared to previous years. Respondents in 2020 and 2021 were more likely than nonrespondents to have relatively higher income and be more educated.

In CPS ASEC surveys, a respondent is considered insured if they were covered at any point in the past year. In other words, if a person had coverage at some point during the past year but is currently uninsured, they are counted as insured.

Estimates of the uninsured represent the percent of people who were uninsured for the entirety of the past year. Based on the most recent data collected by SHADAC, there were 783,683 uninsured Tennesseans in 2020, amounting to 11.4 percent of the state's population.

#### Kaiser Family Foundation

The Kaiser Family Foundation (KFF) is a nonprofit, non-partisan organization focusing on national health issues and health policy. KFF develops its own policy analysis, journalism, and communications programs, sometimes in partnership with major news organizations. KFF is not associated with Kaiser Permanente or Kaiser Industries, nor is it a foundation. A list of KFF's external funders can be found <u>here</u>.

<sup>&</sup>lt;sup>G</sup> U.S. Census Bureau American Community Survey Response Rates

<sup>&</sup>lt;sup>H</sup> Estimates are adjusted before rounding, so county estimates sum to state totals and state totals sum to national ACS totals of insured and uninsured. The most recent data from SAHIE comes from its 2021 report, which reports data for 2020.

Citing CPS ASEC response rate concerns and a one-time delay of the ACS data release by the Census Bureau in 2020, KFF utilizes CPS ASEC data in its Health Insurance Coverage data tool and, due to the low response rate in 2020, excludes those responses. The data in KFF's tool also exclude a number of people with private coverage of an unknown source.

Based on the most recent data collected by KFF, there were 783,700 uninsured Tennesseans in 2020, amounting to 11.4 percent of the state's population.

#### The Boyd Center for Business and Economic Research at the University of Tennessee

The Boyd Center for Business and Economic Research at the University of Tennessee (the Boyd Center), under contract with the Tennessee Department of Finance and Administration, surveyed Tennessee residents between May and July 2021 to ascertain insurance status, use of medical facilities, and level of satisfaction with the TennCare program in *The Impact of TennCare: A Survey of Recipients, 2021*.

TennCare provided the University of Tennessee Social Work Office of Research and Public Service (SWORPS) with 10,000 phone numbers to reach TennCare households. It is unclear if the phone numbers were randomly selected from the entire state population or if they were randomly selected from TennCare participants. SWORPS conducted the survey in conjunction with Wilkins Research Services, an independent quantitative and qualitative data collection firm based in Chattanooga, Tennessee. The survey consisted of land-line telephone calls, cell phone calls, and web panel participation.

Surveys must be completed by the head of household. 2,728 surveys were completed via land-line telephone, 826 surveys were completed via cell phone, and 1,880 surveys were completed via web panel, producing a sample size of 5,434 head of household respondents.<sup>1</sup> The Boyd Center does not specify the reference period of coverage asked for in the survey.

Statewide estimates of health insurance coverage status are extrapolated from the sample, which is weighted and adjusted to reflect demographic and economic characteristics found in the ACS.

Based on the most recent data collected by the Boyd Center, there were 564,452 uninsured Tennesseans in 2021, amounting to 8.3 percent of the state's population.

<sup>&</sup>lt;sup>1</sup>The Boyd Center notes a significant decline in land-line telephone response rate from 2020 to 2021.

## Office of Research and Education Accountability

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