

National health reform discussions have been steadily progressing since the election of President Barack Obama some 13 months ago—and may come to a head in the Senate this week. While the politics of health reform can oftentimes get quite nasty, there exist several health disparities, backed by solid evidence, that plague the current state of the U.S. health system that cannot be ignored. One that has been particularly present is the elevated mortality the uninsured experience compared to those with public or private insurance. Mortality findings should refocus reform discussions away from heavily politicized issues that carry comparatively miniscule weight and back toward the central issue of health reform that seeks to cover the nation’s estimated 48 million uninsured and California’s nearly 7 million uninsured—a life or death piece of legislation for one in five Californians and one in seven Americans. Summarized below are several recent notable studies that have shone light on the increased risk of death associated with uninsurance.

In 2002, the Institute of Medicine set out to find the number of deaths attributable to uninsurance. Two long-term longitudinal studies were performed: one from 1971 to 1987 utilizing National Health and Nutrition Examination Survey data and the other using Current Population Survey (CPS) numbers from 1982 to 1986. Both studies came to the same conclusion: uninsurance leads to a 25% increase in mortality risk for working age adults.<sup>1</sup> Using the same methodology and updating these findings, researchers at Urban Institute estimated the number of deaths attributable to uninsurance from 2000 to 2006 at 137,000.<sup>2</sup> Though the author himself cautions against taking this figure as a precise body count, this figure represents a “reasonable indicator of the general magnitude of excess mortality that results from uninsurance.” In fact, the number is likely higher and depends on the formula used; an alternate calculation yielded 165,000 deaths over the same period. Though a 25% increase in mortality of the uninsured could be debated, even a 15% increase would yield 101,000 excessive deaths to this cohort. The significance of these findings may be downplayed, but the take home message is shocking: a significant number of Americans die each day because they lack health insurance.

One aspect of health reform upon which many can agree is the importance of covering children. Kids are not only much less expensive to cover, but early life coverage can set up healthy behaviors for the rest of a child’s life. Even if everything else is debated, preventative care for children, such as immunizations, are hard to debate; in fact, they have been proven to be among the most important medical break-throughs in the past 100 years. So, how does insurance status for kids affect their mortality rates? Among 23 million hospitalizations of children in the U.S. over a 15-year time span, uninsured

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<sup>1</sup> Institute of Medicine. (2002). *Care Without Coverage: Too Little, Too Late*. Washington, DC: National Academy Press.

<sup>2</sup> Dorn S. Uninsured and Dying Because of It: Updating the Institute of Medicine Analysis on the Impact of Uninsurance on Mortality. *Urban Institute* 2008 January.

children were found to have a 60% increased mortality risk compared to insured kids.<sup>3</sup> This is a shocking and significant disparity that, over the duration of the study, equated to the deaths of over 16,000 children. Though federal efforts have been bolstered to cover children through SCHIP, these data suggest a disturbing trend that must not continue. Coverage for every American child ought to be a no-brainer.

Insurance status correlates to increased risk of death even in unexpected patient populations like trauma patients—those who are often treated before ability to pay is determined. A recent study found that trauma patients presenting with no health insurance had an 80% increase in their rates of death.<sup>4</sup> In fact, after adjustments for most other risk factors, leaving only the younger trauma patients (healthier cohort), the risk of death of uninsured trauma patients in this group is 90% higher compared to insured trauma patients. Trauma patients must be treated regardless of ability to pay, so how could this be? Laws and regulations, such as the Emergency Medical Treatment and Active Labor Act, require hospital emergency departments to assess and treat all patients in genuine need of emergency care. After stabilization of the patient's condition, though, the hospital's obligation ends; hospitals can transfer patients out of the facility. This is one of the more plausible explanations for the increase in death of uninsured trauma patients. The lack of adequate follow-up care, care delays and the denial of necessary but no longer “emergency” treatment can and do compromise the continuity of care. This can lead to a decline in the critically ill or injured patient's condition and avoidable deaths.

As the health reform debate has raged on, some issues have been polluted to the point where we oftentimes need to stop and get back to the fundamental breakdowns in the health system in the U.S. We constantly hear about the high and rising cost of health care for the insured in this country as we should, but there is a deadly price to pay for and by the uninsured; the evidence of increased mortality due to uninsurance is irrefutable.

The Senate health reform bill may be voted on this week. It is not a moment too soon, as it would cover 94% of all Americans, while the House bill would cover 96% of all Americans. The passage of this important legislation could prove to be a long-needed holiday present for millions and millions of American families. The enactment and implementation of this bill will close the sorry chapter of a century's worth of our nation's shameful inability to cover every American while every other major industrialized nation has already done so, beginning with Germany in the 1890s. Let's try to prevent some deaths during this holiday season of love, family, and generosity by expressing our views to our elected representatives about health coverage for all American families.

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<sup>3</sup> Abdullah F, Zhang Y, *et al.* Analysis of 23 million US hospitalizations: uninsured children have higher all-cause in-hospital mortality. *J Public Health* 2009 Oct 29 [Epub ahead of print].

<sup>4</sup> Rosen H, Saleh F, *et al.* Downwardly Mobile: the Accidental Cost of Being Uninsured. *Arch Surg* 2009; 144(11): 1006-1011.