



Children (0-19) and Young Adults (19 to 35)
American Indians & Alaska Natives
Population and Insurance
Estimates from October 18, 2018 release of the
American Community Survey Estimates

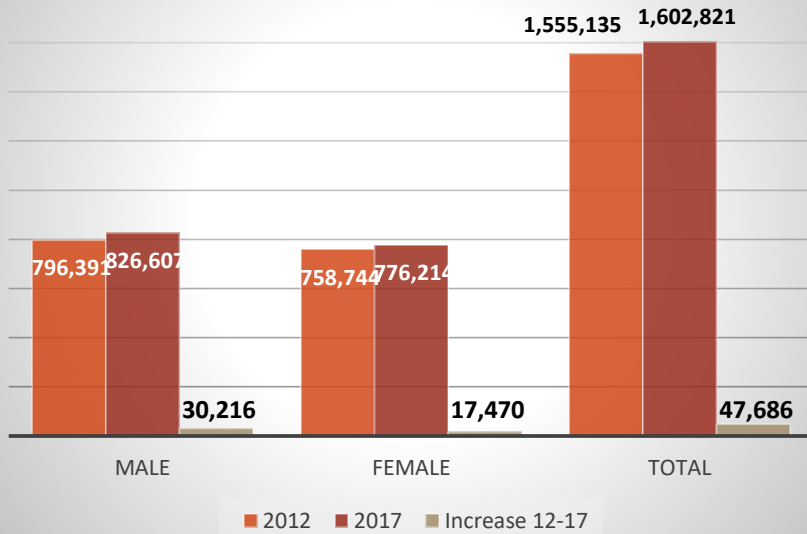
National Tribal Health Conference
September 18, 2019





American Indian and Alaska Native Population under 19 years old

Population of Children under 19

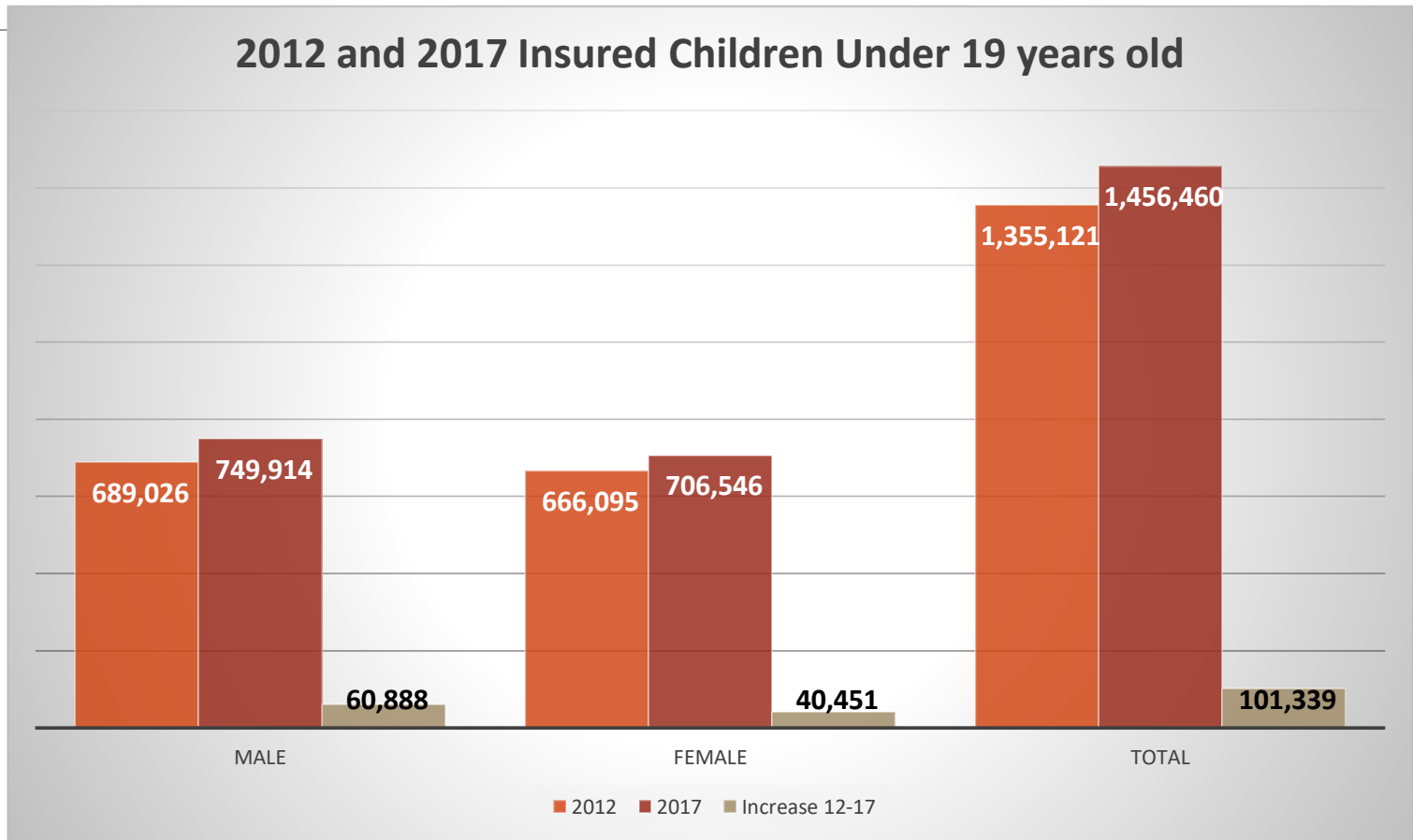


	2012	2017	Increase 2012-2017
Male	796,391	826,607	30,216
Female	758,744	776,214	17,470
Total	1,555,135	1,602,821	47,686
% Male	51%	52%	63%
% Female	49%	48%	37%

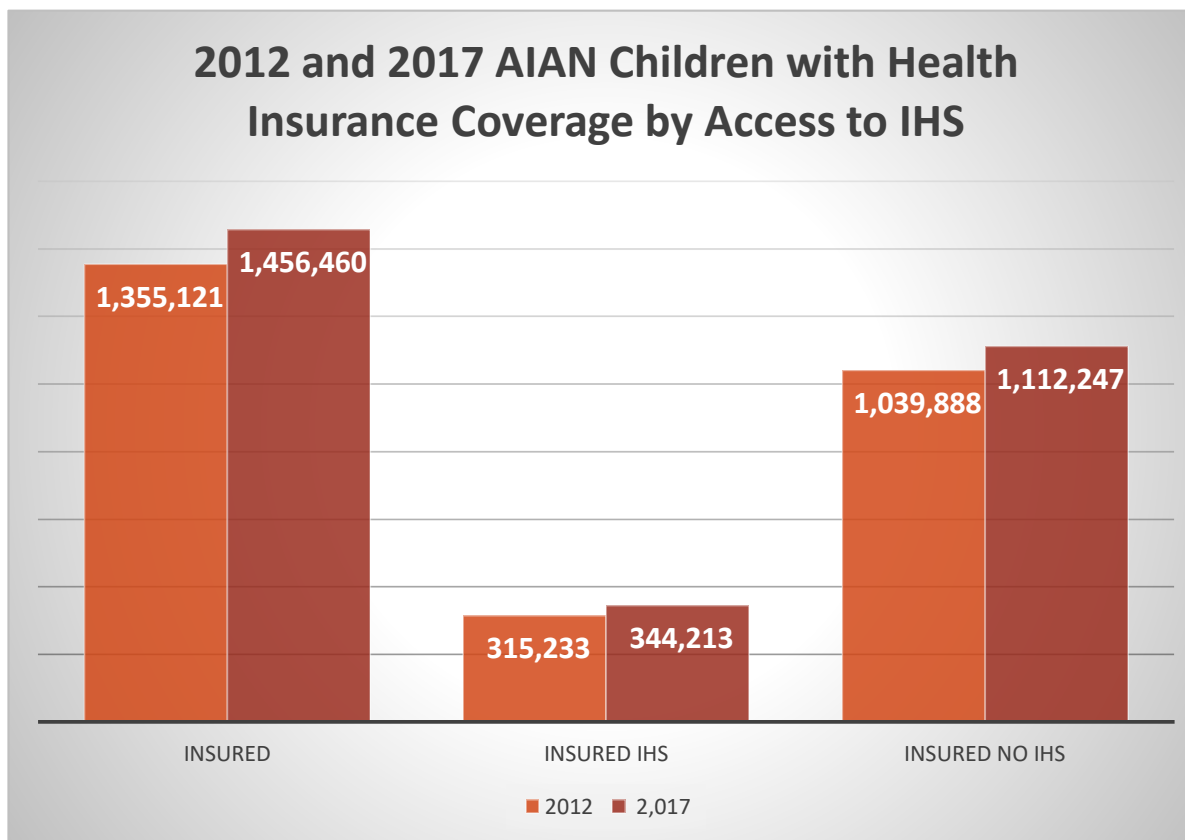




2017: 91% of American Indian and Alaska Native children are insured

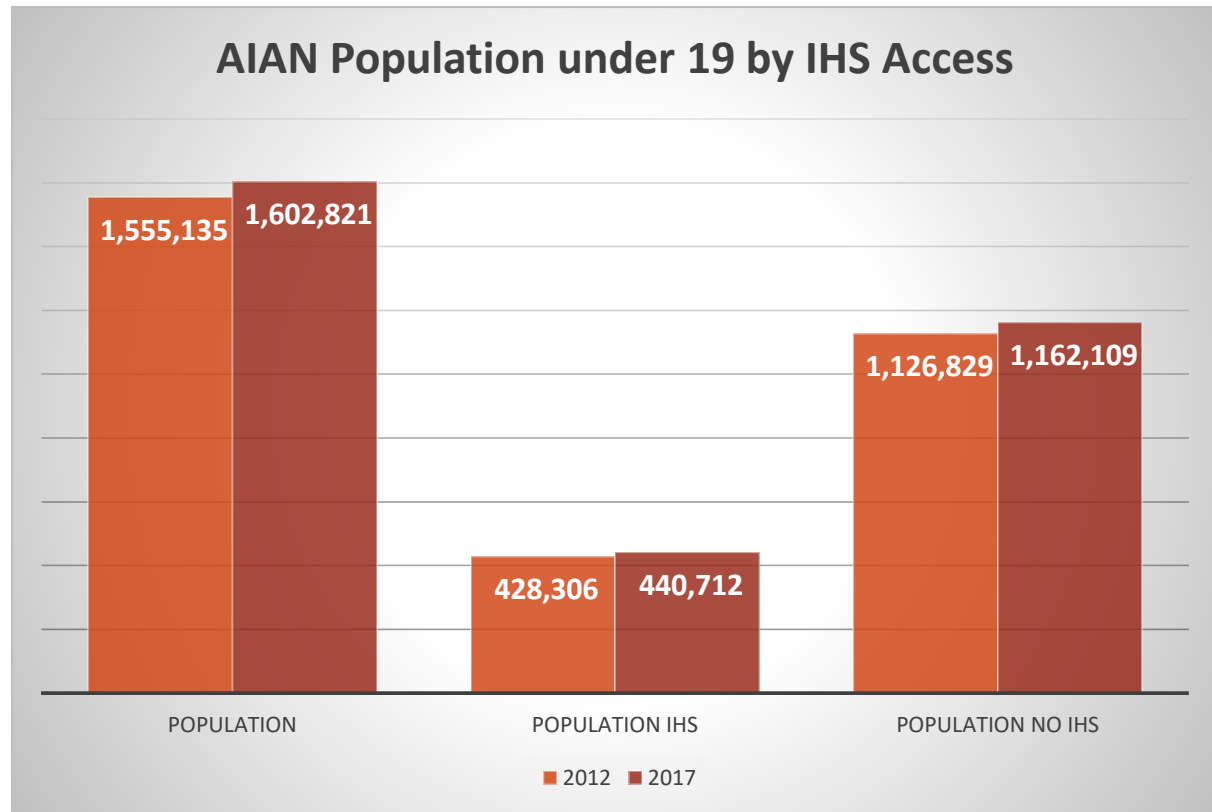


American Indian and Alaska Native

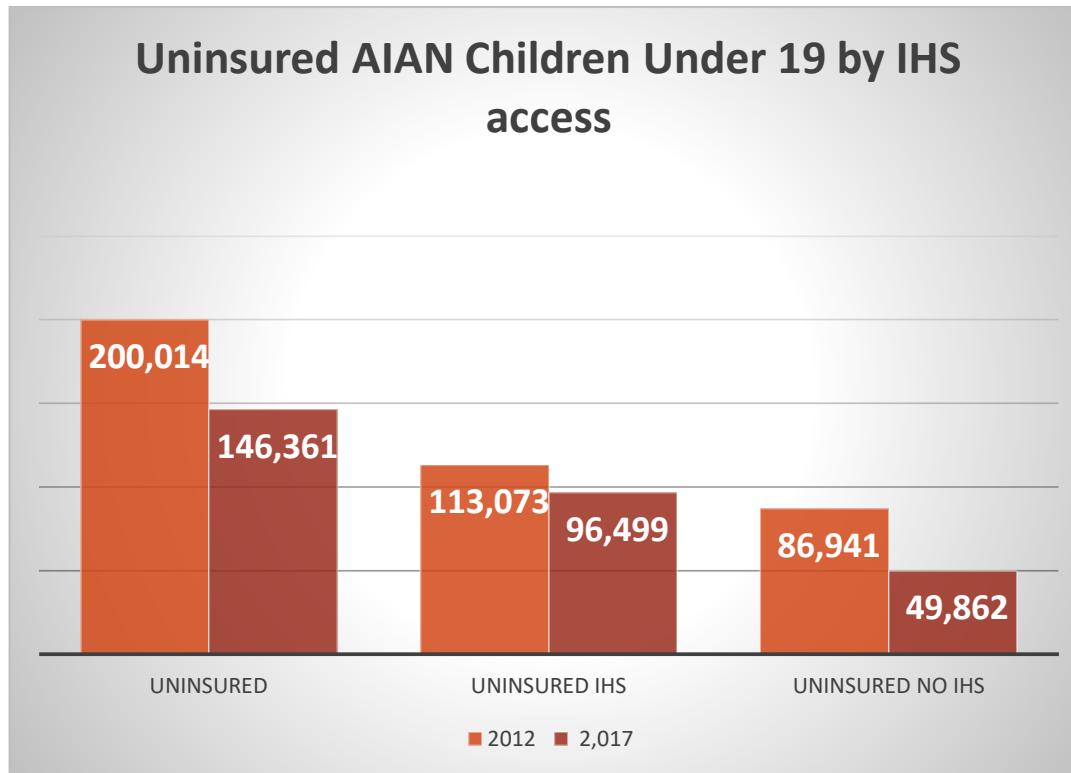




440,700 of 1.16 million American Indian and Alaska Native Children have Access to IHS

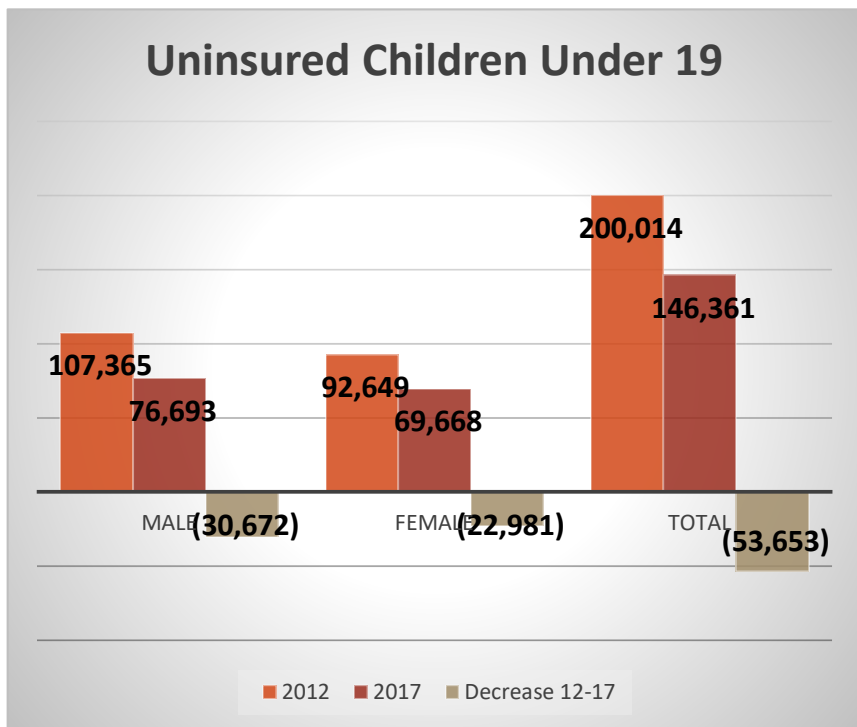


66% of Uninsured are American Indians and Alaska Native Children with Access to IHS





26% Decline in number of American Indian and Alaska Native children Uninsured 2012-2016

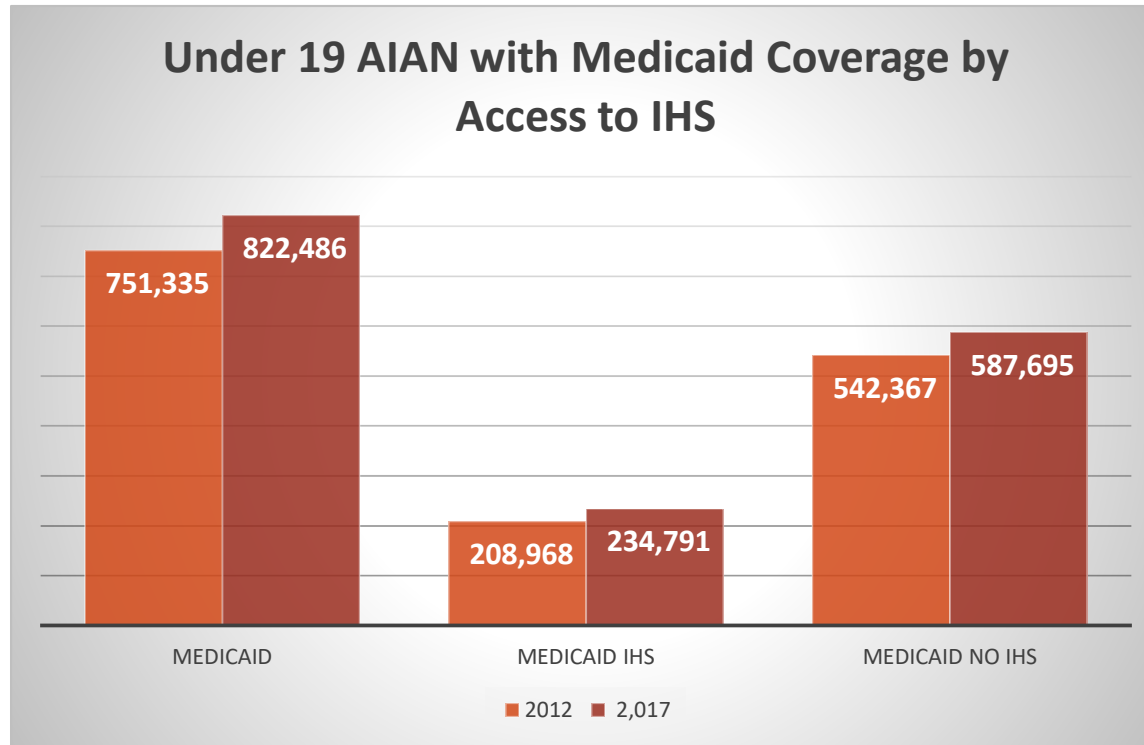


Uninsured 10% in 2017			
	2012	2017	Decrease 2012-17
Male	107,365	76,693	(30,672)
Female	92,649	69,668	(22,981)
Total	200,014	146,361	(53,653) 26% decline
% Male	54%	52%	57%
% Female	46%	48%	43%





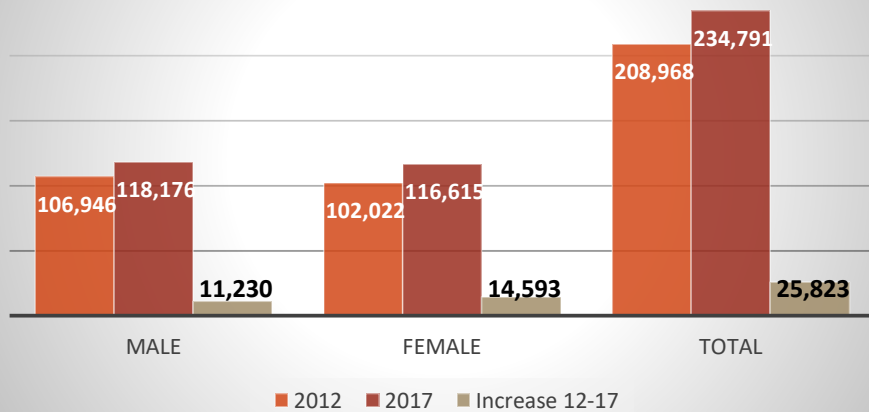
53% of American Indian and Alaska Native Children with Access to IHS have Medicaid Coverage (vs. 51% who do not have IHS access)





Children with Access to IHS and Medicaid Coverage: 234,700 in 2017

Medicaid: Children Under 19



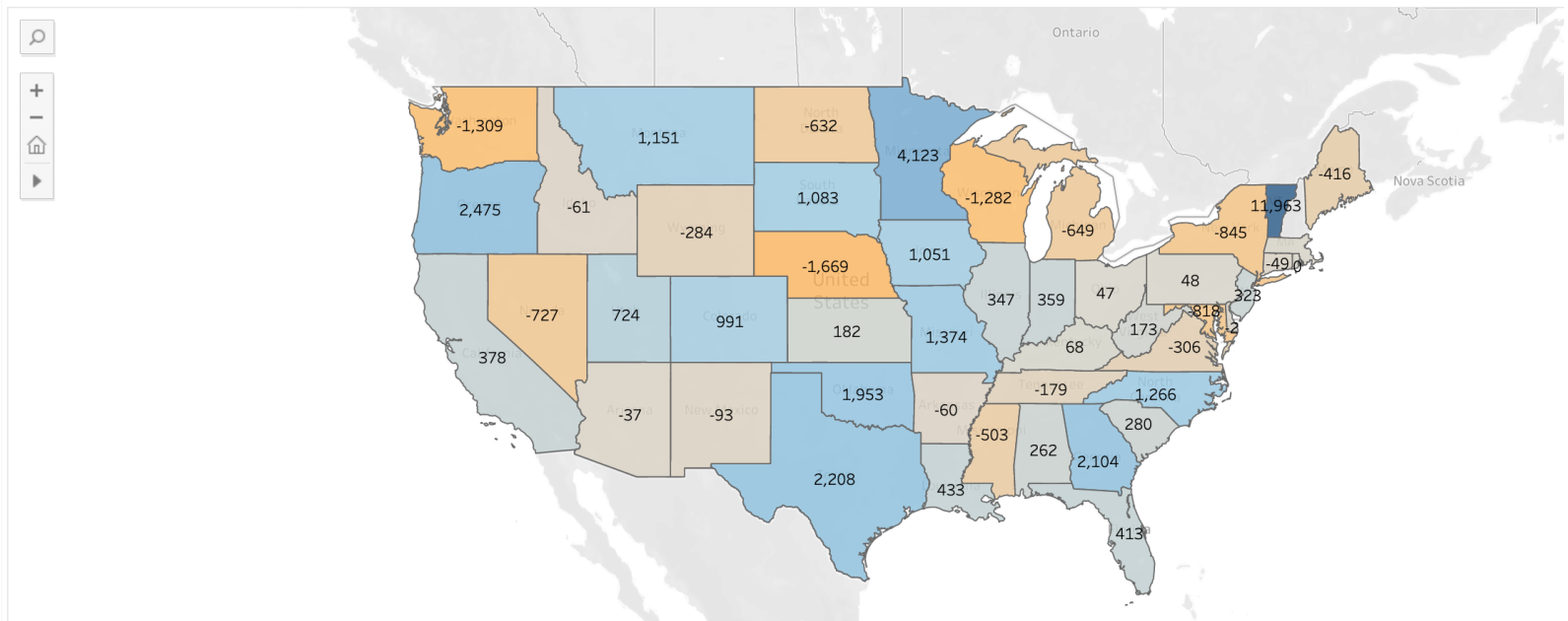
Medicaid	2012	2017	Increase 2012-2017
Male	106,946	118,176	11,230
Female	102,022	116,615	14,593
Total	208,968	234,791	25,823 (12%)
% Male	51%	50%	43%
% Female	49%	50%	57%





More AI/AN children uninsured in 2018

Increase or Decrease in Uninsured AIAN Children (0 to 19 years old). 158,000 in 2016 increased 12,000 to 170,000 in 2017. Nat'l Uninsured Rate rose from 8.9% to 9.6% (Vermont has US totals)





Conclusions about under 19 yr olds.

Children's Health Insurance Program (CHIP) success pre-ACA meant high levels of insurance for this age group

Nonetheless, Enrollment Increased by 12%.

25,800 newly enrolled in Health insurance.

91% are now insured.

Only 38% of American Indian and Alaska Native children have access to IHS, but they make up 66% of the Uninsured (96,500 of 146,000 uninsured have access to IHS).





Did enrollment in Medicaid increase for 19 to 35 yr olds?

50-states: American Indian and Alaska Natives 19 to 35 Years Old with Medicaid: 2012 and 2016				
	2012	2016	Change	% Change
Total Medicaid	242,942	342,319	99,377	40.9%
Male with Medicaid	91,674	140,798	49,124	53.6%
Female with Medicaid	151,268	201,521	50,253	33.2%

Yes, nationally Medicaid enrollment for young adults increased from about 242,000 to 342,000; 100,000-person (41%) increase.

Male enrollment increased by 54% and female enrollment by 33%.

Male enrollment, as expected, increased with the expansion of eligibility to 'childless adults' in both expansion and non-expansion states.

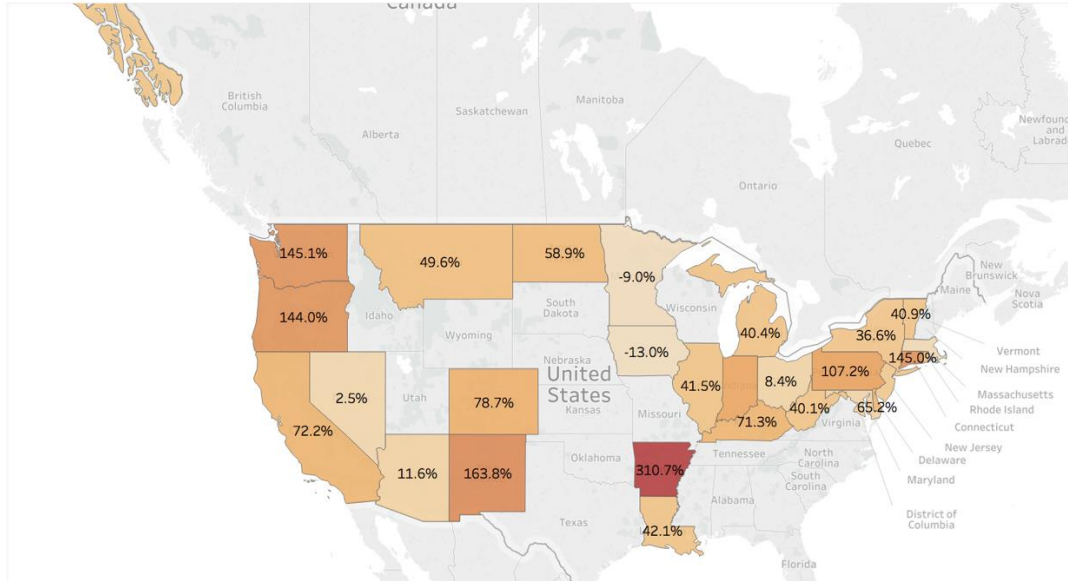




Visualization by
National Indian Health Board

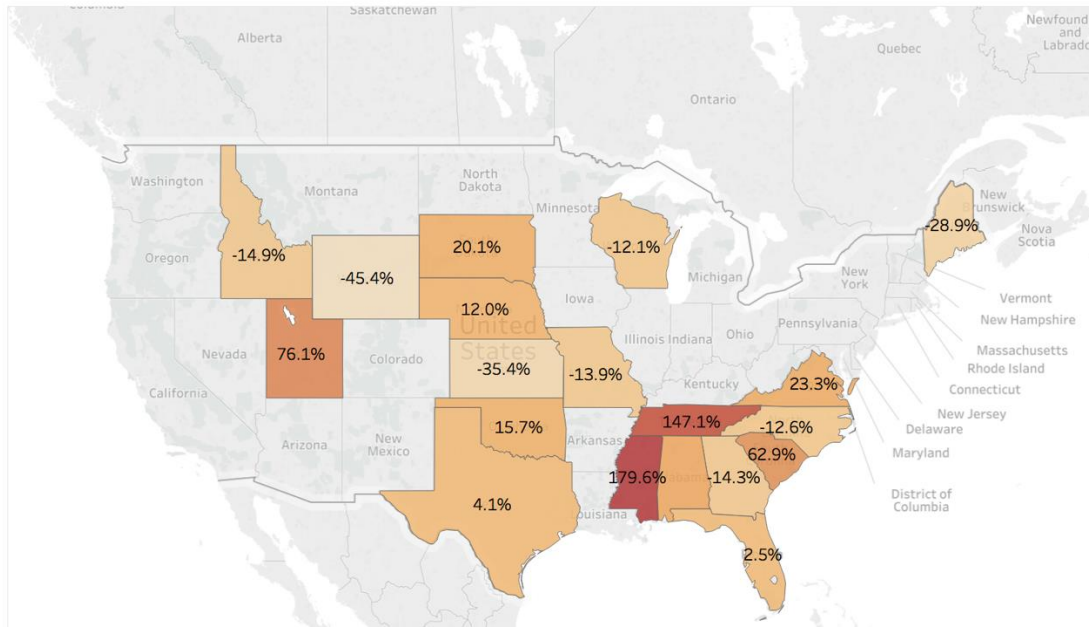
United States Census Bureau
American Community Survey
How It Works for Your Community

19 to 35 year old AIANs in Medicaid Expansion States: Increase in Medicaid 2012 to 2016 (VT is US 40.9%)





19 to 35 year old AIANs Medicaid Enrollment in States that did not Expand Medicaid: Increase in Medicaid 2012 to 2016





19 to 35 Year Old American Indian and Alaska Natives

Visualization by
National Indian Health Board

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How It Works for Your Community

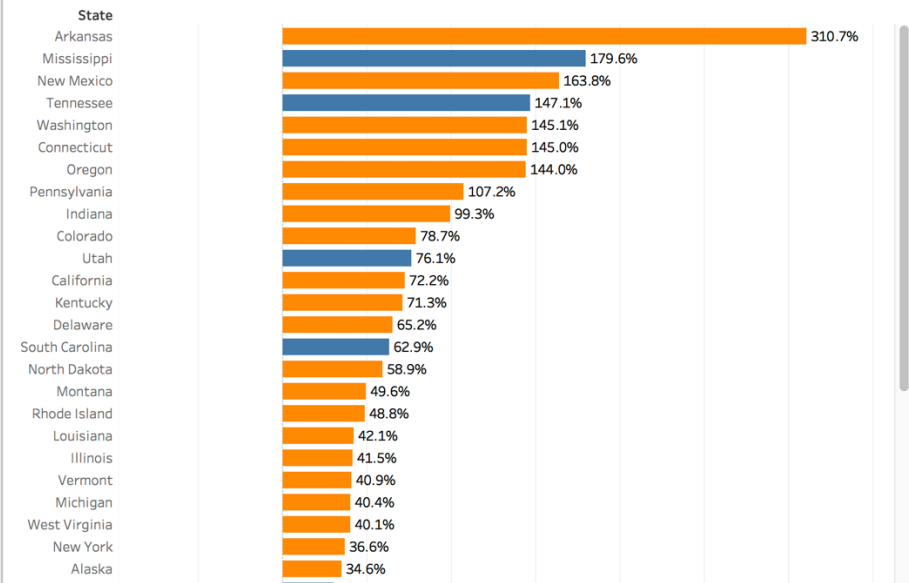
Medicaid Expansion?

- (All)
- no
- yes

Medicaid Expansion?

- no
- yes

19 to 35 Year Old AIANs Change in Medicaid Enrollment 2012 to 2016 (VT is US total)





Conclusion

1. Since 2012 the age group 19 to 35 with the highest pre-ACA uninsurance rate has made substantial gains in coverage in Medicaid.
2. An overall 41% increase in coverage between 2012 and 2016 means an additional 100,000 young adults now have access to comprehensive health care services. Since this age group is generally healthy the increase in expenditures may not be large on a per-capita or total expenditure basis.
3. However, for the subset of this population that struggles with addictions or substance use disorder (including opioid use disorder) Medicaid coverage is the difference between access to medically assisted treatment (and increasingly culture-based treatment) and no access to health care services.
4. Healthier young adults will be better able to enter adulthood ready for further education, for employment and ready to contribute to their communities.





Estimating Insurance Coverage

It is now possible, using US Census ACS survey to obtain health insurance coverage estimates for American Indians and Alaska Natives

Additional variables including income and age and whether a household has 'access to Indian Health Service' are available.

1. Estimating number eligible for insurance (Medicaid or Exchange)
2. Measuring change over time (success with enrollment)
3. Targeting enrollment efforts to locations, age or income groups
4. Interactive Visualizations allow analysis of data





Questions on the ACS

The health insurance question asks the respondent to give a separate answer for each member of household regarding health insurance coverage.

1. Employer Sponsored Insurance (ESI)
2. Private, paid by individual
3. Medicare
4. Medicaid
5. Tricare, Health care insure for military and families
6. VA, Veteran's Administration
7. IHS coverage-not used to compute rates of insurance

Question on insurance is 'point in time' or 'current coverage' not the coverage in the 'past year' asked in some surveys.





ACS questions on insurance coverage

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Is this person **CURRENTLY** covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.

- | | Yes | No |
|---|--------------------------|--------------------------|
| a. Insurance through a current or former employer or union (of this person or another family member) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Insurance purchased directly from an insurance company (by this person or another family member) | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Medicare, for people 65 and older, or people with certain disabilities | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability | <input type="checkbox"/> | <input type="checkbox"/> |
| e. TRICARE or other military health care | <input type="checkbox"/> | <input type="checkbox"/> |
| f. VA (including those who have ever used or enrolled for VA health care) | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Indian Health Service | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Any other type of health insurance or health coverage plan – <i>Specify</i> ↘ | <input type="checkbox"/> | <input type="checkbox"/> |





Limitations of ACS data

Estimates are based on survey samples:

- Note error rates sometimes report to inform the range of uncertainty in the estimates
- Sampling error increases; the more one divides the sample into smaller subgroups the higher the error rate;
- Non sampling error is also a known issue for certain questions and responses.
- One example of importance is the variable created by the insurance coverage question: Is ...person currently covered by any of the following types of health insurance or health coverage plans?
 - Once choice is Indian Health Service
 - In most states respondents seem to include both Tribal and IHS in their answer as if they are the same, but in Arizona there is evidence to suggest respondents underreport access to both Tribal and IHS.

