

The Uninsured

Around the world, millions of people lack health insurance. In many countries, insurance is not offered. In others, such as the U.S., it may be unavailable or unaffordable for some people.

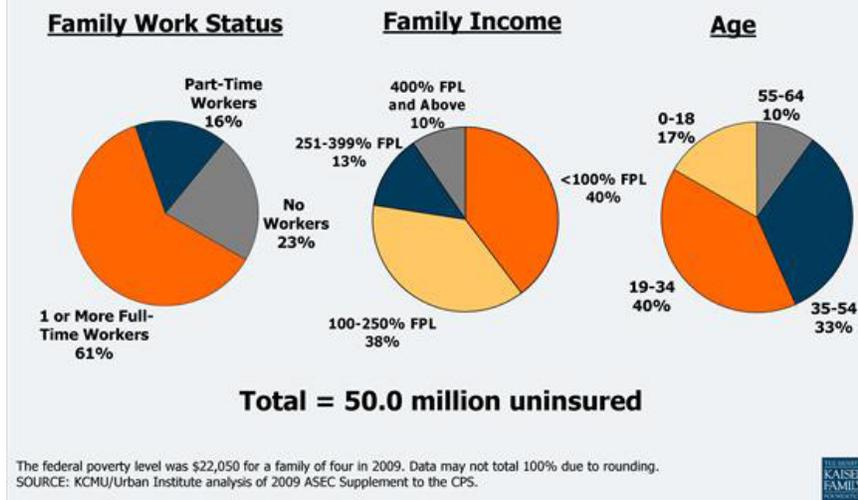
With the Affordable Care Act in March 2010, the U.S. took important steps to extend quality health care to more citizens. Beginning in 2014, uninsured Americans can be covered through expanded private health insurance (exchanges) and expanded government programs (Medicaid). Medicaid will provide very low cost health care for families earning less than 133% FPL, federal poverty level (\$29,400 annual income for a family of four in 2010). Health insurance purchased through the exchanges will be subsidized for families between 133% and 200% FPL (up to \$88,200 annual income for a family of four in 2010). The Congressional Budget Office estimates by 2019 approximately 32 million more Americans will be covered, reducing the number of uninsured to 22 million.

In the U.S. today, however, 50 million people lack health insurance.¹ They include working people without employer-sponsored coverage, healthy young people who choose to go without health insurance and people who cannot afford health insurance.

Eight in ten uninsured people in the U.S. are in working families, more than 70% from families with one or more full time workers. Many of these workers are employed at organizations that do not offer health insurance or they are not eligible for it.

About two-thirds of the uninsured are poor or near-poor, with annual incomes of less than \$44,100 for a family of four. More than one-third of the uninsured are 19-34 years old, most of the rest of non-elderly adults but about one-fifth are children. Larger percentages of minorities are uninsured than Caucasians, with one quarter of blacks and one-third of Hispanics having no insurance.

Characteristics of the Uninsured, 2009



Studies have shown that the uninsured receive lower quality health care compared to patients who have private health insurance.¹ Often, the uninsured don't have consistent health care or even a long-term primary doctor or health care provider. They receive care only when they're sick rather than consistently over their lives, and the resulting breaks in care can contribute to poor health.

This can be especially harmful to people with more than one health problem or doctor, for whom coordinated care is essential to good health outcomes. It can also lead to a reduced ability to follow the doctor's recommendations. Often, uninsured people rely on low-cost community health clinics for their basic health care needs. Some may rely on hospital emergency facilities for ongoing care.

6 Congressional Budget Office, Letter to the Honorable Nancy Pelosi, March 18, 2010.

1 Hadley, J. Sicker and Poorer: The Consequences of Being Uninsured: A Review of the Research on the Relationship between Health Insurance, Health, Work, Income, and Education. Washington: Kaiser Commission on Medicaid and the Uninsured, May 2002. Available at: <http://www.kff.org/uninsured/20020510-index.cfm>.

1 Institute of Medicine. Care Without Coverage: Too Little, Too Late. Washington: National Academy Press, 2002. Available at http://www.nap.edu/catalog.php?record_id=10367.

4 Institute of Medicine. A Shared Destiny: Community Effects of Uninsurance. Washington: National Academy Press, 2003. Available at http://www.nap.edu/catalog.php?record_id=10602.



Because people who don't have health insurance typically pay for health care themselves out of their own pocket, they often put off going to a doctor. This means they're often sicker and have more complications when they finally seek medical care. As a result, their care often costs much more when they finally do see a doctor.²

Additionally, U.S. government regulations that restrict how insurance is provided, for example, in the U.S., can make purchasing health insurance too expensive for small businesses and the self-employed. Several provisions of the new health reform law address many of these restrictions and make it easier for people to buy affordable health insurance.

There are numerous programs to aid the uninsured in accessing the medicines they may need. The Johnson & Johnson Patient Assistance Foundation, Inc. (JJPfAF), assists patients without adequate financial resources and prescription coverage obtain free products donated by the Johnson & Johnson operating companies. Over the past 24 months, JJPfAF provided more than 1.7 million units of medicine to more than 300,000 uninsured patients. For more information on our patient assistance programs, please visit www.jjpaf.org or call 1-800-652-6227 to speak with a patient assistance program specialist.

For more information on our Access2Wellness™ program, please visit www.access2wellness.com.

For information on the Partnership for Prescription Assistance – which provides access to more than 475 public and private assistance programs offering more than 2,500 prescription medicines, as well as information on nearly 10,000 free health clinics throughout the U.S. – please visit www.pparx.org.

² Hadley, J. "Sicker and Poorer—The Consequences of Being Uninsured: A Review of the Research on the Relationship between Health Insurance, Medical Care Use, Health, Work, and Income." *Medical Care Research and Review* (60:2), June 2003. Available at http://mcr.sagepub.com/cgi/content/abstract/60/2_suppl/3S.