



# Profiling North Carolina's **Uninsured:**

How **EXPANDING MEDICAID** Can Make a Difference

By BRENDAN RILEY, *Policy Analyst*



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**WITH ONE OF THE LARGEST UNINSURED POPULATIONS IN THE COUNTRY**, North Carolina is home to far too many people who lack the regular health care access and financial security that comprehensive health care coverage provides. In an economic landscape in which employers consider health outcomes in their location and expansion decisions, North Carolina's 10.7 percent uninsured rate—the 10th highest in the

nation—makes us less competitive. Moreover, it limits the ability of our residents to thrive. After all, having health insurance improves the health and economic security of individuals and communities. When people have coverage, they are more likely to have a source of regular health care, get the quality care they need, and report better health outcomes.<sup>1</sup> When uninsured people gain coverage, they are less likely to face high out-of-pocket costs and less likely to incur medical debt, giving them a better shot at prospering in today's economy.<sup>2</sup>

In this report, we use the Census Bureau's American Community Survey data to provide an updated profile of the uninsured in North Carolina. The uninsured include men and women of all ages and backgrounds in all parts of the state. Many of these

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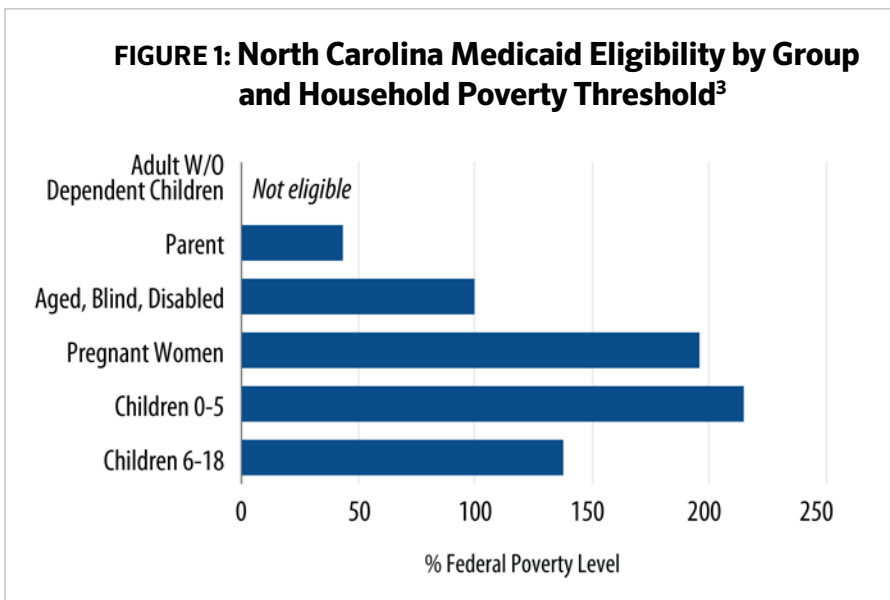
individuals work in critical industries like construction and food service, and for small businesses that don't offer health coverage to their employees. Hundreds of thousands of these uninsured North Carolinians are stuck in a coverage gap because they don't qualify for Medicaid

under North Carolina's current eligibility rules, but they earn too little to qualify for subsidies to afford their own private plan.

By adopting Medicaid expansion, North Carolina can vastly reduce the uninsured population, thereby putting more money into the pockets of North Carolina households and improving health outcomes in our communities.

## Who's Currently Eligible for Medicaid in North Carolina (and Who's Left Out?)

To qualify for Medicaid today, a North Carolinian must both earn a limited income and fall into one of several narrow eligibility groups (shown in Figure 1 below). Because North Carolina Medicaid uses this restrictive eligibility, only some non-elderly adults with limited means can qualify.



SOURCE: "Understanding Medicaid and Its Impact in North Carolina." North Carolina Justice Center, Budget & Tax Center. March 2017

Whereas Medicaid covers roughly two in five North Carolina children, Medicaid is only available to adults in our state who are elderly, blind, pregnant, living with a Social Security-certified disability, or living with dependent children.<sup>4,5</sup>

While Medicaid does provide time-limited coverage to pregnant women, the scope of coverage is "limited to treatment for conditions that affect the pregnancy."<sup>6</sup> That means

that pregnant women may not be able to get coverage for all necessary care unrelated to the pregnancy through Medicaid for Pregnant Women. Moreover, a better way to invest in maternal and child health is to ensure that women of reproductive age can access health care before they become pregnant—currently, 15.9 percent of adult women of reproductive age are uninsured in our state<sup>7</sup>—and that mothers stay covered after delivery, as Medicaid for Pregnant Women only lasts until 60 days post-partum.<sup>8</sup>

Thus, for non-elderly adults to qualify for full Medicaid in North Carolina, they must either have a qualifying disability or dependent children in the house. Even then, the income eligibility threshold for parents—\$8,004/year for a family of three, which is less than half of the poverty line—is so low that many uninsured parents in poverty cannot qualify.<sup>9</sup>

For all other adults, Medicaid coverage is unavailable regardless of how low their incomes are. As a result, hundreds of thousands of North Carolinians living in and near poverty cannot qualify for health coverage through Medicaid and instead go uninsured.

As of January 2019, Medicaid covered 294,878 enrollees based on a qualifying disability.<sup>10</sup> However, not all non-elderly North Carolinians who have a disability and limited incomes can qualify for Medicaid, and there is a significant population of uninsured North Carolinians living with disabilities.

There are several reasons why some people with disabilities near poverty may be uninsured and uncovered by Medicaid in our state: (1) not all people with disabilities or chronic illnesses meet the strict Supplemental Security Income disability standard used by Medicaid; (2) the income eligibility threshold for this category is set at 100 percent of the Federal Poverty Level (FPL); and (3) Medicaid requires otherwise eligible people with disabilities to meet an asset test, so a modest life insurance policy or savings account can disqualify them.

After Michigan expanded Medicaid, it found that 23 and 20 percent of expansion enrollees had functional impairments related to a physical disability or a mental disability, respectively.<sup>11</sup>

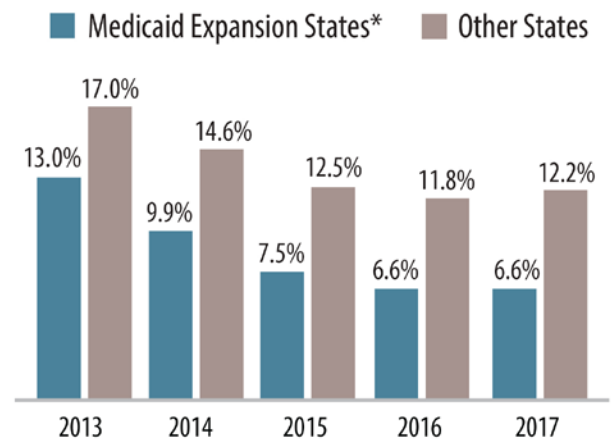
### Who Would Benefit from Medicaid Expansion in North Carolina

While estimates suggest North Carolina saw health coverage gains of roughly 509,000 since the implementation of the Affordable Care Act,<sup>12</sup> the state's progress in reducing its uninsured population and uninsured rate has lagged behind other states that have expanded Medicaid.

By moving Medicaid eligibility up to 138 percent of the federal poverty level for people ages 19 to 64, North Carolina can drastically reduce its uninsured rate and cover hundreds of thousands of people in need of quality health coverage. This would create a more comprehensive health care coverage system for North Carolinians, thereby improving the well-being of our state.

FIGURE 2

### Uninsured Rate Gap Between Medicaid Expansion States and Others Widening<sup>13</sup>



\*The Affordable Care Act gave states the option to expand Medicaid to adults with income up to 138 percent of the poverty line. Analysis reflects states' expansion decisions as of January 2017.

Source: CBPP analysis using Census Bureau data.

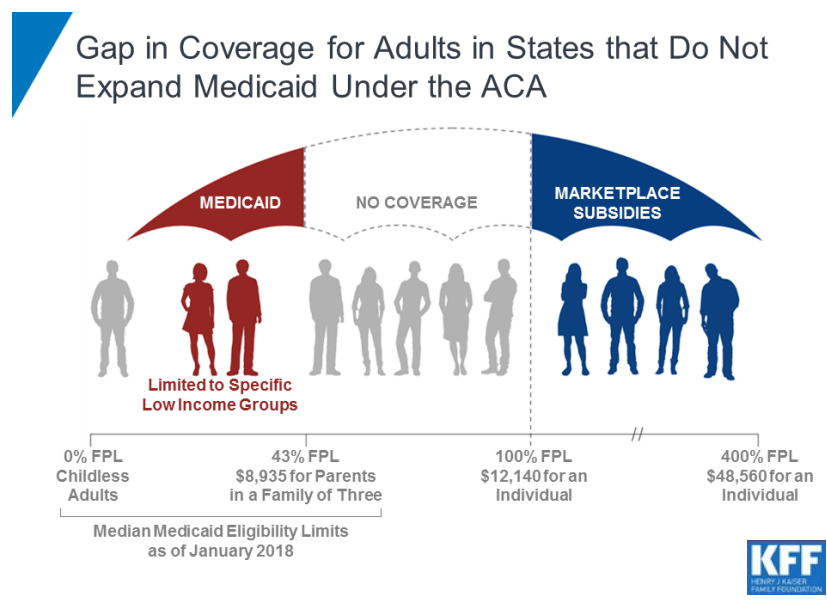
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## CLOSING THE COVERAGE GAP

Currently, North Carolina and the few remaining states that have not expanded Medicaid have a coverage gap. Many residents remain uninsured because they earn too much to qualify for Medicaid (or cannot qualify at all) but earn too little to qualify for financial assistance through the private market. Financial assistance is available only to those with incomes at or above the federal poverty level, so adults living below the poverty line are at risk of falling in the gap. By expanding Medicaid up to 138 percent FPL for non-elderly adults, North Carolina can eliminate the coverage gap and prevent folks from falling through the cracks as they do today.

**FIGURE 3: The Coverage Gap, per Kaiser Family Foundation**



SOURCE: "The Coverage Gap: Uninsured Poor Adults in States that Do Not Expand Medicaid." Kaiser Family Foundation. June 12, 2018.

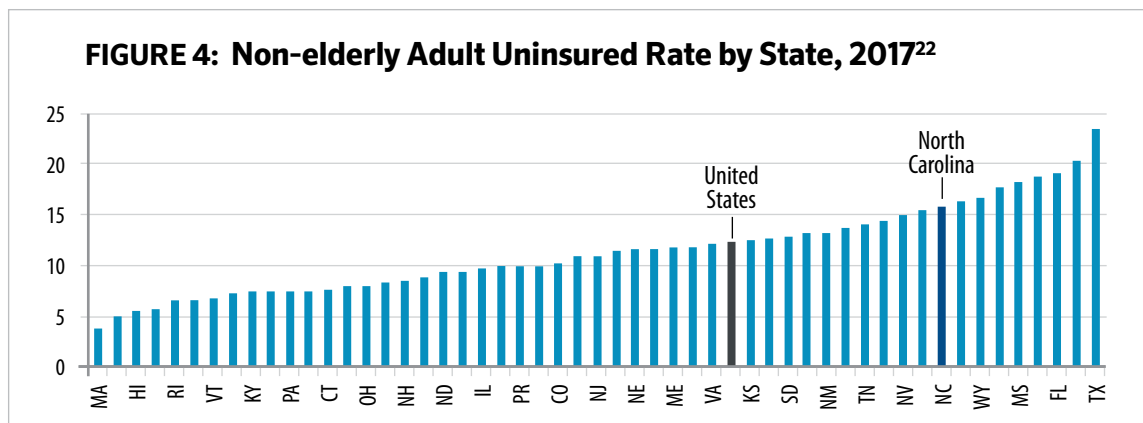
New data from the American Community Survey give us a very rough estimate of the uninsured in North Carolina who may benefit from Medicaid expansion. Nearly one out of every three North Carolinians ages 19-64 with income below 138 percent of the poverty line was uninsured in 2017,<sup>14</sup> amounting to a total of 391,635 uninsured non-elderly adults with low incomes.<sup>15</sup> This figure includes those who may already be eligible for some form of health insurance but not enrolled, as well as some populations who may not be eligible for Medicaid expansion. On the other hand, it does not capture those underinsured adults who will gain access to more affordable, comprehensive coverage under Medicaid, or the eligible but unenrolled children who will gain coverage when their parents become eligible for Medicaid.<sup>16</sup> All in all, this figure illustrates a significant problem that our state leaders must solve.

## The Uninsured in North Carolina: Selected Demographic Characteristics

### Age and Sex

According to latest survey data, an estimated 1,075,983 people—10.7 percent of the population—in our state were uninsured in 2017.<sup>17</sup> Like the rest of the country, North Carolina’s children and seniors enjoy higher rates of coverage due largely to public coverage available through Medicaid and Medicare for those populations. The vast majority—88.3 percent—of the state’s uninsured population is made up of non-elderly adults (people ages 19 to 64). The non-elderly adult uninsured rate is 15.8 percent, three points higher than the national average (Figure 4).<sup>18</sup>

Over one-third of the uninsured are young adults aged 19-34, roughly one-fifth are between 35 and 44, and another 30 percent are between the ages of 45 and 64.<sup>19</sup> While a majority of the uninsured population is male, many women in our state lack coverage, including nearly 280,000 adult women of reproductive age (19-44).<sup>20,21</sup>



SOURCE: American Community Survey, 2017, U.S. Census Bureau, Table S2701.

### Disability Status

Among all non-elderly adults with disabilities in North Carolina, 14.5 percent—98,200 people—are uninsured.<sup>23</sup> While Medicaid and Medicare both provide coverage to some North Carolinians with qualifying disabilities, many fall through the cracks of this patchwork system for reasons described on page 4.

### Race and Ethnicity

The racial demographics of the uninsured mirror the demographics of the state’s overall population in some ways: 68.9 percent of the state’s population is white, compared to 61.7 percent of the uninsured, while 21.4 percent of the population is Black or African-American (compared to 21.9 percent of the uninsured). When



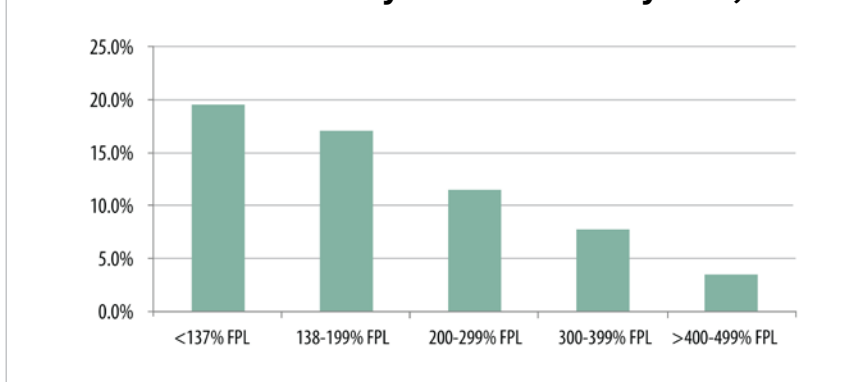
accounting for ethnicity, some of these dynamics change: while Latinx North Carolinians account for 9.4 percent of the state population, they make up 26.5 percent of the uninsured.<sup>24</sup> When comparing uninsured rates within racial and ethnic groups to one another, racial and ethnic disparities become more evident. Among White North Carolinians, the uninsured rate is 9.6 percent; among Black/African-American North Carolinians, 11.0 percent; and among Latinx North Carolinians of any race, the uninsured rate is 30.3 percent.<sup>25</sup> Today’s disparities in health insurance coverage result from years of policies and systems that have unequally distributed opportunities for gainful employment, limited access to jobs that offer health benefits, and unequally provided access to health care services and facilities, among other factors.<sup>26</sup>

The ethnic disparities in coverage also reflect the fact that North Carolina’s non-citizen population is disproportionately Latinx,<sup>27</sup> and non-citizens face stricter eligibility rules for programs like Medicaid. In fact, undocumented immigrants cannot qualify for Medicaid at all due to their status. While eligibility for the Marketplace allows a broader spectrum of non-citizens to participate, the vast majority of undocumented immigrants are also ineligible for Marketplace participation.

### Household Income

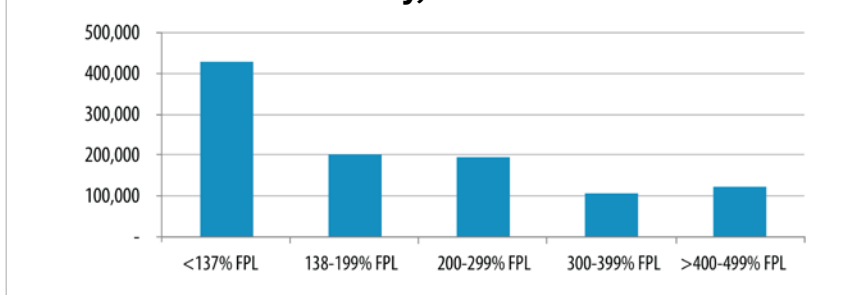
The higher a household’s income, the more likely the household members are to be insured. More than one-fifth of our state’s population lives at incomes below 138 percent of the poverty line,<sup>28</sup> which amounts to an annual income of \$17,236 for a single household or \$29,435 for a family of three. However, of all uninsured people in our state, North Carolinians with incomes below 138 percent of the poverty line make up 40.5 percent. As demonstrated in Figure 5, uninsured rates are much higher among North Carolinians with lower incomes than among their higher-income neighbors.<sup>29</sup>

**FIGURE 5: Uninsured Rate by Household Poverty in NC, 2017<sup>30</sup>**



SOURCE: American Community Survey, 2017, U.S. Census Bureau, Table B27016.

**FIGURE 6: Number of Uninsured North Carolinians by Household Poverty, 2017<sup>31</sup>**



SOURCE: American Community Survey, 2017, U.S. Census Bureau, Table B27016.

**Military Veteran Status**

Also among the uninsured in North Carolina are veterans and their family members. An estimated 30,000 North Carolina military veterans and 23,000 veteran family members have no health insurance.<sup>32</sup> Many veterans lack access to health care at a VA clinic due to inaccessibility, ineligibility, or other factors, and only those in active duty and veterans who retire after an entire career qualify for military insurance known as TriCare.<sup>33</sup> As a result,

*Among all non-elderly adults with disabilities in North Carolina, 14.5 percent—98,200 people—are uninsured.*

tens of thousands of North Carolinians who served our country wind up uninsured and ineligible for coverage. Among these uninsured veterans, an estimated 12,000 currently fall

in the coverage gap and would become eligible for coverage if North Carolina expanded Medicaid.<sup>34</sup>

**Working Families Not Covered Through Jobs: Small Business, Self-Employed, Part-Time, Seasonal, and Temporary Workers**

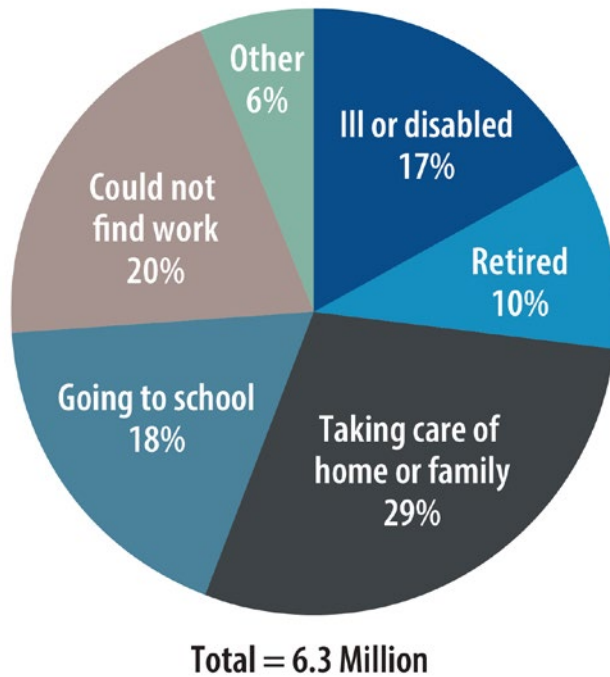
The vast majority—86 percent—of the non-elderly uninsured in our state belong to working families.<sup>38,39</sup> Over 600,000 North Carolinian adults are employed yet uninsured.<sup>40</sup> Of those not in working families, national data finds that many are not working due to caregiving work, which is often unpaid (see Figure 7). Other uninsured North Carolinians not in working families are living with a chronic illness or disability, attending school, or retired, or simply having trouble finding work in their community.<sup>41</sup>

Many workers do not have coverage through their employer because large employers aren't required to provide health benefits to seasonal, part-time, and temporary workers, and because small business workers and entrepreneurs rarely have access to job-related health coverage.

**Substance Use And Mental Health Disorders**

The federal government estimated in a 2016 report that 256,000 uninsured non-elderly adults in our state experienced either a mental illness or a substance use disorder.<sup>35</sup> Substance use disorders are not a challenge facing the uninsured alone, but without insurance, many North Carolinians are unable to access appropriate medical and behavioral health that can help treat or prevent a disorder. State and federal estimates suggest that between 144,000 and 150,000 uninsured North Carolinians with behavioral health or substance use disorders have incomes below 138 percent of the poverty line.<sup>36,37</sup>

**FIGURE 7:**  
**Main Reasons for Not Working Among Uninsured Adults who Could Gain Medicaid Coverage, per Kaiser Family Foundation<sup>42</sup>**



SOURCE: Kaiser Family Foundation analysis of March 2014 Current Population Survey.

Under federal law, most large businesses must offer health insurance to their full-time employees. While nearly three out of every four uninsured non-elderly adults worked in 2017, nearly one in two of those workers worked either less than year-round or less than full-time.<sup>43</sup> Employers commonly do not offer coverage to part-time, seasonal, or temporary workers. However, 11.5 percent of non-elderly adult North Carolinians who did work full-time, year-round in 2017 were still uninsured.<sup>44</sup>

Compared to other states, fewer North Carolinian workers are employed by companies that offer

health insurance. Of workers in our state, only 79.1 percent work for an establishment that offers health coverage to some of its employees, which is the 8th lowest rate in the nation.<sup>45</sup> Unlike large businesses, small establishments are not required to provide coverage to their employees. When considering only establishments with fewer than 50 employees, only 33.6 percent of small business employees have an employer that offers coverage, the third lowest rate in the nation and nearly 15 points below the national average.<sup>46</sup>

Additionally, 9.5 percent of North Carolina’s workforce consists of self-employed workers,<sup>47,48</sup> but they account for 14.9 percent of uninsured workers.<sup>49,50</sup> In order to get health insurance, entrepreneurs must directly purchase coverage on the individual market, or seek coverage through a public program or a family member’s job-based coverage if applicable. If their incomes are too low, they may not be able to qualify for premium tax credits to purchase a private plan. Given that the mean household

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income for self-employed North Carolinians is \$30,068—less than half of the mean household income of their peers with traditional salaries and wages—the self-employed are more likely to fall into the coverage gap in our state.<sup>51</sup> The self-employed make up a significant portion of the North Carolina workforce in several industries (as demonstrated in Figure 8 below).

**FIGURE 8: Industries with High Concentrations of Self-Employed Workers, North Carolina, 2017<sup>52, 53</sup>**

	Share of Industry Workforce Occupied by Self-Employed
Agriculture, forestry, fishing and hunting, and mining	33.2%
Construction	24.8%
Professional, scientific, and management, and administrative and waste management services	18.8%
Finance and insurance, and real estate and rental and leasing	11.4%

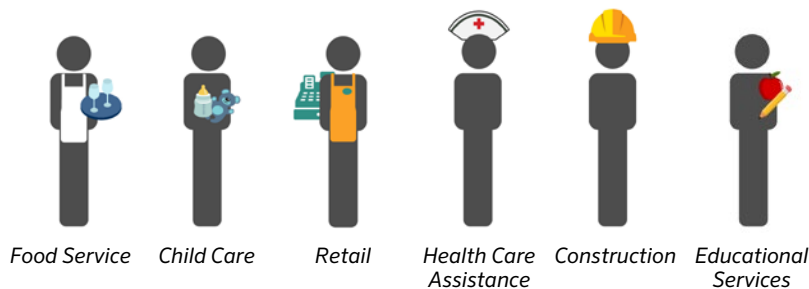
SOURCE: American Community Survey, 2017, U.S. Census Bureau, Table S2407.

### NC Industries with Heavily Uninsured Workforces

The kinds of jobs and industries the working uninsured occupy are numerous and varied, though employees in the following jobs and industries make up over 60 percent of the total working uninsured population: food

preparers and servers, construction workers, home health care aids, early childhood educators, cashiers, among others in the retail, accommodation, arts, and entertainment fields.<sup>54,55</sup>

**FIGURE 9: Industries with the Greatest Numbers of Uninsured Workers**



SOURCE: American Community Survey, 2017, U.S. Census Bureau, Table S2702.

Despite the national economic expansion, the labor market is not delivering enough high-quality jobs in North Carolina, and even the existing jobs are not distributed evenly across the state. The vast majority of the state's job growth is concentrated in just three urban counties—Wake, Durham, and Mecklenburg—and in 87 out of 100 counties across the state there are more jobless workers than there are job openings.<sup>56</sup>

In this context, it is not surprising that wages are not growing and that the majority of jobs in the state pay too little or offer too few or irregular hours for people to make ends meet.<sup>57</sup> These same jobs often fail to provide health care coverage. The potential benefit of closing the coverage gap to workers, employers, and communities across the state will go a long way to stabilizing household budgets, strengthening connections to the labor force, and boosting local economies.

## **Conclusion**

North Carolina has the 10th highest uninsured rate in the country, limiting the potential of our state and communities to thrive. The latest Census Bureau data indicate that the uninsured in our state include many include workers, veterans, and people with disabilities, among others. Because uninsured North Carolinians are disproportionately non-elderly adults with low incomes, expanding Medicaid eligibility to 138 percent of the poverty line would allow North Carolina to vastly reduce its uninsured rate. By closing the coverage gap, North Carolina stands to reap the broad-based benefits of higher health care coverage rates, healthier populations, and stronger communities.

## End Notes

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19. “Selected Characteristics of Health Insurance Coverage In The United States, 2017 American Community Survey 1-Year Estimates,” Table S2701.
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  43. 73.4% of non-elderly adult uninsured North Carolinians were reported as having worked either full-time, year-round or less than full-time, year-round in 2017. Of those reported as working, 45.8% worked less than full-time, year-round. Source: “Selected Characteristics of Health Insurance Coverage In The United States, 2017 American Community Survey 1-Year Estimates,” Table S2701.
  44. 377,737 uninsured North Carolinians reported working full-time, year-round in 2017. Source: “Selected Characteristics of Health Insurance Coverage In The United States, 2017 American Community Survey 1-Year Estimates,” Table S2701. See also: “Health Insurance Coverage Status And Type By Work Experience, Universe: Civilian noninstitutionalized population 19 to 64 years, 2017 American Community Survey 1-Year Estimates,” Table C27012.
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  48. Note: This figure represents the combined share of workforce accounted for by the self-employed in their own incorporated businesses and those who are not. The American Community Survey divides the self-employed into two categories: Self-employed in own incorporated business workers, which account for 3.7% of the North Carolina workforce, and Self-employed in own not incorporated business workers, which account for 5.8%.
  49. Health Advocacy Project analysis of “Selected Characteristics Of The Uninsured In The United States, 2017 American Community Survey 1-Year Estimates,” Table S2702.
  50. The uninsured rate among the self-employed in their own incorporated businesses is 3.4%, while the uninsured rate among the self-employed not in their own incorporated businesses is 11.5%.
  51. Mean income for households with self-employment income is \$30,068, whereas mean income for the employed with wages or salary income was \$74,436. Source: “Mean Income In The Past 12 Months (In 2017 Inflation-Adjusted Dollars), 2017 American Community Survey 1-Year Estimates,” Table S1902.
  52. “Industry By Class Of Worker For The Civilian Employed Population 16 Years And Over, 2017 American Community Survey 1-Year Estimates,” Table S2407.
  53. Note: As mentioned in previous endnotes, the American Community Survey includes two classes of Self-Employed workers: (1) Self-employed in own incorporated business workers and (2) Self-employed in own not incorporated business workers. According to the Census Bureau, the self-employed in own not incorporated business workers “includes people who worked for profit or fees in their own unincorporated business, profession, or trade, or who operated a farm. This class is often tabulated together with the following group, unpaid family workers.” Unpaid family workers include “people who worked without pay in a business or on a farm operated by a relative.” In the preceding estimates of uninsured rates among the self-employed and the share of the state workforce accounted for by the self-employed, we combined the two categories of self-employed workers but did not include unpaid family workers, which represent a smaller fraction of both the uninsured and the workforce. However, the American Community Survey data presented in this table do not exclude unpaid family workers. See United States Census Bureau, “Industry and Occupation: Class of Worker”, <https://www.census.gov/topics/employment/industry-occupation/about/class-of-worker.html> for more on the definitions used by the American Community Survey.

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54. Note: the following industries, as grouped and defined by the American Community Survey, compose the respective portions of the working uninsured population: Construction (18.3%); Arts, entertainment, and recreation, accommodation and food services (17.5%); Educational services, health care and social assistance (10.4%); and Retail trade (12.7%). See “Selected Characteristics Of The Uninsured In The United States, 2017 American Community Survey 1-Year Estimates,” Table S2702.
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