Episode 19: No Healthcare Insurance – What Are Your Options?



Note: This is a machine transcription. Please excuse any punctuation or other weirdness:)

Intro:

Susan is a single Mom, with two beautiful daughters Zoe 5 and Emelia 3. She is rolling the dice and going without healthcare insurance praying everyday she and her girls are kept safe. She simply can't afford a monthly premium of \$875 a month with a \$8000 deductible and she doesn't qualify for Medicaid.

One incident requiring an ER visit with an extended stay in a hospital could easily result in a \$10,000 - \$15,000 dollar bill leaving her forced to file for bankruptcy or worse not being able to get the care she needs.

Why should any family be faced with this scenario? Yet this is the reality many families face...

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Are you tired of the high cost of healthcare? Are you overwhelmed trying to navigate a complicated healthcare system?

Welcome to Get Savvy...Demystifying Healthcare weekly podcast where we take complicated healthcare topics and make them simple.

Imagine if you could stop feeling paralyzed with fear and frustration and instead be empowered to make smart healthcare decisions for you and your family.

Get Savvy with your host, Sandy Kibling, a healthcare professional changing how healthcare knowledge is shared.

Podcast

Hello everyone and welcome to Episode 19, No Healthcare Insurance...What Are Your Options? In 2021, roughly 30 million people did not have health insurance in the U.S.

This number includes all age groups, but nonelderly adults have the highest uninsured rate. 2022 data is still being calculated, but I believe that number will likely reach 42 million based on articles I have read.

What we will discuss:

- 1. Why Do People Go Uninsured?
- 2. What Are the Risks You Take If You Don't Have Healthcare Insurance?
- 3. Options To Consider If You Are Uninsured.

Let's get started.

Why Do People Go Without Healthcare Insurance?

About half of U.S. adults say they have **difficulty affording** health care costs. About four in ten U.S. adults say they have delayed or gone without medical care in the last year due to cost, with dental services being the most common type of care adults report putting off.

Substantial shares of **adults 65** or older report difficulty paying for various aspects of health care, especially services not generally covered by Medicare, such as hearing services, dental and prescription drug costs.

Even if they wanted to seek care the sad fact is, a lot of **dental providers don't take** commercial insurance or Medicare stating they are often underpaid or have to deal with the hassle of unpaid or disputed claims with the health insurance companies. This makes it administratively burdensome and not worth it to take insurance and forcing dental providers to go out of network. This puts seniors in a position to pay higher cost for care.

The **cost of health care** often prevents people from getting **needed care** or filling prescriptions. About a quarter of adults say they or a family member in their household have not filled a prescription, cut pills in half, or skipped doses of medicine in the last year because of the costs.

They simply cannot meet their monthly household bills and the **ever-increasing healthcare** expenses and they have to choose between paying an electric bill or purchasing their blood pressure medication.

Those who are covered by health insurance are not immune to the **burden of health care** costs. About one-third of insured adults worry about affording their monthly health insurance premium, and 44% worry about affording their deductible before health insurance kicks in.

An average plan for 2023 for individual health insurance for a 40-year-old on a silver plan is \$560 — a 4% increase from the 2022 plan year.

One of the **primary factors in individual health insurance costs** is your location, as prices will vary depending on the state and county in which you live. Here are just a couple of examples of states and increases for 2023.

- North Carolina showed a 18.9% increase.
- New York a 38.54% increase
- South Dakota a 41.40% increase.

I will add a link in the show notes to this article so you can view where your state lands in terms of increase or decrease in healthcare costs.

Health care **debt is a burden for a large share** of Americans. About four in ten adults (41%) report having debt due to medical or dental bills including debts owed to credit cards, collections agencies, family and friends, banks, and other lenders to pay for their health care costs, with disproportionate shares of Black and Hispanic adults, women, parents, those with low incomes, and uninsured adults saying they have health care debt.

Affording gasoline and transportation costs is now a **top worry for Americans** followed by unexpected medical bills. While worry over gasoline and transportation costs has risen significantly since 2020, many adults still say they are worried about affording medical costs such as unexpected bills, deductibles, and long-term care services for themselves or a family member.

The bottom line is this when a family is sitting at the table paying monthly bills and making hard decisions of should I pay for my son's soccer dues and uniforms, or do I call the electric company to see if I can make payments on my electric bill or do I pay for healthcare...this is the unfortunate reality many families face and why all too often they go without health insurance.

What Are the Risks You Take If You Don't Have Health insurance?

Higher charges for the same services

Without health insurance you may get charged much more for care that would otherwise be covered by your plan. This is because no one—usually the insurance company—will be subsidizing your cost of care. As a result, you may have to pay higher charges for the same services. You will have to pay for everything out of pocket, and if you cannot afford the cost of care, the hospital or medical practice could take legal action against you.

Not to be all doom and gloom as I believe there are many medical practices that understand the struggle patients are having and may offer a payment plan or percentage discount if you are choosing to self pay. More on this in Episode 11: Pricing Your Procedure & Tips for Reducing Medical Costs

Medical Debt

Since you might be charged out-of-pocket full price for any healthcare you receive while not having insurance, you may find that you're quickly drowning in medical bills. Medical debt can become quickly overwhelming for many individuals and affect other aspects of their finances. Carrying extra debt could make it harder for you to apply for a student loan, a mortgage, or a car loan.

State Tax Penalties

While the individual mandate was repealed and no longer applies from 2019 on at the federal level, there are states with their own health insurance penalties. If you don't have health insurance, you could end up paying a penalty.

As of this recording there are 6 states that still apply a penalty: Massachusetts, New Jersey, Vermont, California, Rhode Island and District of Columbia (Washington D.C.)

I will add a link to the reason why these states still mandate this penalty in the show notes. Postponing or neglecting health care

Because you may not be able to afford medical care, you may end up postponing necessary doctor's visits. This could include visits to the dentist, the eye doctor, or the primary care doctor. According to the KFF report, three in 10 uninsured adults went without medical care they needed due to the high cost of uninsured healthcare. By hesitating to put your health first, you run the risk of health issues becoming worse over time.

Inability to afford medication

Because of rising prescription drug prices due to the unregulated pharmaceutical industry in the US, many prescription drugs are incredibly expensive, especially without a health insurance plan to help out. As such, some people without health insurance forgo medications they need to manage acute and chronic medical issues, often leading to worsening conditions and higher long-term medical costs.

Now if that isn't all out depressing, here is the good news, there many healthcare disruptors on the horizon. Healthcare Disruptors are defined as people, and or technology creating options for you to access care more affordably, and efficiently.

Examples of this include Walmart Supercenters deliver primary care, behavioral health and dental services. The big box retailer opened health clinics in Georgia, Illinois, Arkansas, Florida, and Texas. As of this recording, they have 24 health supercenters operating and plans to have 4000 clinics by 2029. The clinics charge a flat fee for services regardless of insurance. Sometimes that price is below what a patients copay amount would be if they had insurance.

The clinics offer on-site services such as lab testing, behavioral health, wellness and eye care. They can also make referrals for specialist care but may offer some specialty services in the future.

There are many other companies and individuals providing options for access to affordable care. I cover this in detail in <u>Episode 3: Healthcare Disruptors...Changing How You Access and</u> Afford Healthcare Needs

Options To Consider If You Are Uninsured

If you find yourself in this situation you can consider the following options.

- 1) The Affordable Care Act (ACA) created the Health Insurance Marketplace or Exchange where you can shop for and enroll in private health insurance coverage. Most Marketplace consumers are eligible for help paying the cost of their Marketplace plan. Depending on their household income, Marketplace consumers may be eligible for premium tax credits (PTCs) to help pay the costs of their monthly premiums and cost-sharing reductions (CSRs) for help paying their health care costs. Under the ACA, individuals with household incomes between 100 percent and 400 percent of the federal poverty level (FPL) may be eligible for PTCs.
- 2) Catastrophic Coverage Through the Marketplace Catastrophic health insurance plans generally have low monthly premiums and high deductibles. Only consumers who are under the age of 30 or who are of any age with a hardship exemption or an affordability exemption are eligible to purchase Catastrophic coverage. If you qualify you can do so through the Marketplace. Monthly premiums are usually low, but consumers are not eligible for subsidies for Catastrophic coverage.

Like other plans, Catastrophic plans cover certain preventive services at no cost. They also cover at least three primary care visits per year before consumers meet their deductible.

3) Medicaid and the Children's Health Insurance Program (CHIP)

Medicaid and CHIP provide free or low-cost health coverage to millions of Americans, including low-income adults, families and children, pregnant women, older adults, and people with disabilities. Federal and state governments run both programs jointly, and eligibility requirements and covered benefits vary between states.

Federal law makes additional federal funding available to states to expand their Medicaid programs to cover certain adults younger than 65 so check out your state Medicaid open to see which options may be available to you.

CHIP is a joint federal and state program that provides health coverage to uninsured children in families with incomes too high to qualify for Medicaid but too low to afford private coverage.

- States have the flexibility to adopt their own coverage standards, but they must adhere to
 these conditions: A child must be under 19 years of age; uninsured (determined ineligible
 for Medicaid and not covered through a group health plan or creditable health insurance); a
 U.S. citizen or have satisfactory immigration status; a resident of the state; and eligible
 within the state's CHIP income range based on family income and any other state- specified
 rules, such as requiring a period of uninsurance up to 90 days, in the CHIP state plan.
- States also have the option to provide coverage, such as prenatal, delivery, and postpartum care, to uninsured targeted low-income pregnant women under the CHIP state plan.

Other Options To Consider

- <u>Contact your state or local social services</u> agencies to find out if you qualify for any health care programs in your area. I will make sure and put a link to this in the show notes and all other options I am mentioning.
- <u>Community clinics</u> offer free or low-cost medical services including prenatal care. I will add a link that allows you to search by zip code to find a community clinic near you. Find a community clinic
- Contact research institutes like the <u>National Cancer Institute</u> and the <u>National Institutes of</u> <u>Health</u>. They often list clinical trials seeking participants for research on medical conditions.

- Find out how you may be able to lower the cost of your <u>prescription drugs and medical devices</u>. All these resources are on USA.gov and again I will link to it for you.
- There are additional support programs that help uninsured patients who cannot afford to pay their medical bills and do not qualify for government aid. The patient services department of your providers office or hospital can help you find out if you're eligible. Reach out to that department before your medical service and explain your situation. If you do not qualify, the providers office or hospital may offer you a payment plan.
- Learn about dental coverage options for people with limited incomes from:
 - **Local and state health programs
 - **Government insurance plans
 - **Dental schools
 - **Dental clinical trials
- You may qualify for <u>financial assistance programs</u> to help with eye exams, surgery, prescriptions, or glasses.

If you are uninsured or underinsured and must seek emergency medical treatment:

• The <u>Emergency Medical Treatment and Labor Act (EMTALA)</u> guarantees you can get an emergency medical evaluation even if you cannot pay. Hospitals that get Medicare funding and provide emergency services must evaluate anyone who requests treatment. If your exam confirms that you have an emergency, including labor, they must stabilize you.

We all struggle and with inflation and the constant increases just buying food at the grocery story can be challenging. So knowing your options is essential. If you are in a position where you are having to go without health insurance it is important to know your options and make sure you leverage these key resources.

In our next episode we will look in depth at another alternative options for healthcare like the Direct Primary Care model that is not dependent on health insurance and offers alternative and more affordable options for consumers. We will look at who is it good for and who is it not.

Until next time Get Savvy