

Finding and Filling the Gaps: Developing a Strategic Plan to Cover all Kansans

The Kansas Health Insurance Study

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PREFACE

Preface

From the most informal discussions among family, friends and neighbors, to formal public policy debates at the state and federal levels, health care issues occupy a central place in America's national conversation. There is little doubt that "The Health Insurance Question" is among the most enduring elements of this debate.

At the national level, about 40 million Americans are without health insurance of any kind, and millions more have coverage that is inadequate to meet any but the most minimal of medical care needs. And health insurance really matters. For patients, there is clear evidence that those without insurance are less likely to obtain medical care. They are also more likely to describe their health as poor or fair, and less likely to perceive their health as good or excellent. Health insurance also matters for doctors, hospitals, and other providers of care. If their patients are uninsured, they are unlikely to be paid for their services.

In the current environment, government initiatives to increase the number of people covered by health insurance are incremental, often based on specific information about defined segments of the uninsured population. The most dramatic recent example of this trend occurred in 1997 when the federal government enacted legislation to provide funding for the State Children's Health Insurance Program (SCHIP). Subsequently, virtually all states have established the independent programs or Medicaid expansions allowed by that law. Kansas is frequently cited as a successful example of state activities in this regard. Extension of the SCHIP model (perhaps to the parents of eligible children) is currently under discussion.

Programs and other interventions that target specific parts of the larger problem require relatively precise information regarding the populations of interest—the smaller the target, the more important it is to have a good aim. Unfortunately, most studies of the uninsured have focused on estimating total numbers at the state or national level. When those data sources are used to explore differences among specific communities, or ethnic groups, or occupational sectors, the resulting estimates are frequently based on very small numbers of cases and have large margins of error. Nowhere has this been more apparent than in the use of national data from the Current Population Survey (CPS) to create estimates for states or other population groups. In fact, the SCHIP programs mentioned previously are required to use estimates based on the CPS, to the considerable frustration of many states.

Recognizing these issues, the State of Kansas took steps to apply for federal grant support to assess the health insurance status of Kansans and establish a plan for reducing the number Kansas residents who are without health insurance coverage. The application was prepared and submitted by the Kansas Insurance Department under the leadership of Kathleen Sebelius, Commissioner of Insurance. The project was entitled "Finding and Filling the Gaps: Developing a Strategic Plan to Cover All Kansans."

A major focus of the project during the year 2001 has been a telephone survey, designed to resolve some of the measurement problems noted previously, especially differing rates of insurance coverage among various geographic and demographic subdivisions within Kansas. That survey and the resultant findings are described here. Throughout the remainder of this volume, the telephone survey is frequently referred to as “the Kansas Health Insurance Study” or KHIS. This is intended to distinguish the telephone survey from the larger project.

The telephone survey has been completed by a team composed of individuals and organizations with a variety of skills. Although the full project is located in and managed by the Kansas Insurance Department, oversight responsibility for many of the analytic questions falls under the leadership of Dr. Barbara Langner, Principal Investigator, Dr. Cynthia Haddock and their research team. The survey design (including sample design) and core data analysis tasks were subcontracted to a University of Florida team that included faculty and staff from the Department of Health Services Administration, and the Division of Biostatistics. The interviews were conducted by the Center for Survey Research at the University of Florida Bureau of Economic and Business Research.

INTRODUCTION

Introduction

Policymakers and others interested in health insurance issues have frequently been frustrated by the lack of statistically sound estimates of the number and characteristics of people who are without coverage. For example, in the early 1980s, considerable effort was directed to the idea of reducing the number of people without health insurance by “linking” some form of health insurance coverage to unemployment insurance. After extensive discussion about how this might be accomplished, an analysis of survey data resulted in the rather inconvenient finding that relatively few uninsured people are unemployed, and even fewer are receiving unemployment insurance benefits. Hence, providing health insurance to unemployed people through the unemployment insurance mechanism would have very little impact on the health insurance problem *per se*. Similarly, the 1996 debates that ultimately gave rise to the State Children’s Health Insurance Program (SCHIP) engendered substantial, sometimes acrimonious, discussion centered on the number, attributes and location of uninsured children.

This problem of incomplete information is not due to an absence of studies. Even a cursory review of the health services research literature reveals numerous published articles and reports that describe or analyze a wide variety of health insurance issues. Indeed, the question is of such significance that the U.S. Census Bureau devotes a significant component of the March Supplement of the Current Population Survey to a series of health insurance questions. Private foundations have sponsored studies, the federal government has carried out several well-known inquiries, and studies at the state or local level are too numerous to count.

But what the existing body of research lacks is detailed information about insurance coverage among geographic, occupational, economic and ethnic subgroups within states. Rural and agricultural areas are very different from the urban context of large cities. There is considerable evidence that income, race, ethnicity and a variety of occupational factors are associated with health insurance coverage. If we are to continue an incremental, targeted approach to solving this problem, it is imperative that we learn more about health insurance coverage in various parts of the states, and for various population segments.

For the most part, research about health insurance is based on telephone surveys. As a methodological approach, the telephone survey is an extraordinarily powerful tool for estimating the numbers of people who have specified characteristics. It does, however, have limitations, three of which are especially salient in the area of health insurance studies.

First, health insurance issues are subtle and often complex. People do not always know, or care, or want to discuss their health insurance status. Those with coverage are frequently unclear as to the exact benefits, covered services, deductibles and the like. Many who purchase health insurance at work do not distinguish accurately between the employer’s share of the costs and those paid by the employee. For some people, a

failure to purchase health insurance is seen as a failure of familial responsibility, so there may be an inclination to claim one has insurance even if that is not true. For these and many comparable issues, telephone survey research in this area requires very carefully designed and worded questions that are known to elicit the information being sought.

Second, telephone surveys reach only households, families and individuals who have telephones. Nationally, the “telephone coverage” rate of households is about 95%, and the State of Kansas enjoys coverage in about 95.6% of all households, but it is well understood that the families least likely to have telephones are those who are very poor. To whatever extent poverty and health insurance coverage are related, telephone surveys that underrepresent those without telephones will tend to underestimate the number of people without insurance.

Third, the power of the telephone survey method combined with statistical sampling is the capacity to make estimates for an entire population based on a relatively small number of interviews. When the events or characteristics of interest are rare and our objective is to determine their frequency within various smaller subsets of a sample, confidence intervals (margins of error) around specific estimates expand rapidly as the number of cases declines. This problem can best be described by an example. Assume that we are interested in the relationships among age, race and health insurance coverage in a particular state. If the race and age distributions of the state’s population are comparable to the nation, one might expect about 12% of a simple random sample of the state to be African American. In a total sample of 2500 persons, this would translate to about 300 cases. If African Americans are uninsured at a rate similar to all Americans, we would expect about 50 of the sample members to be uninsured African Americans. If we are then interested in comparing the rate of uninsurance among black children to that of white children, we would be making that comparison on the basis of a few dozen cases (at most) with consequently large margins of error.

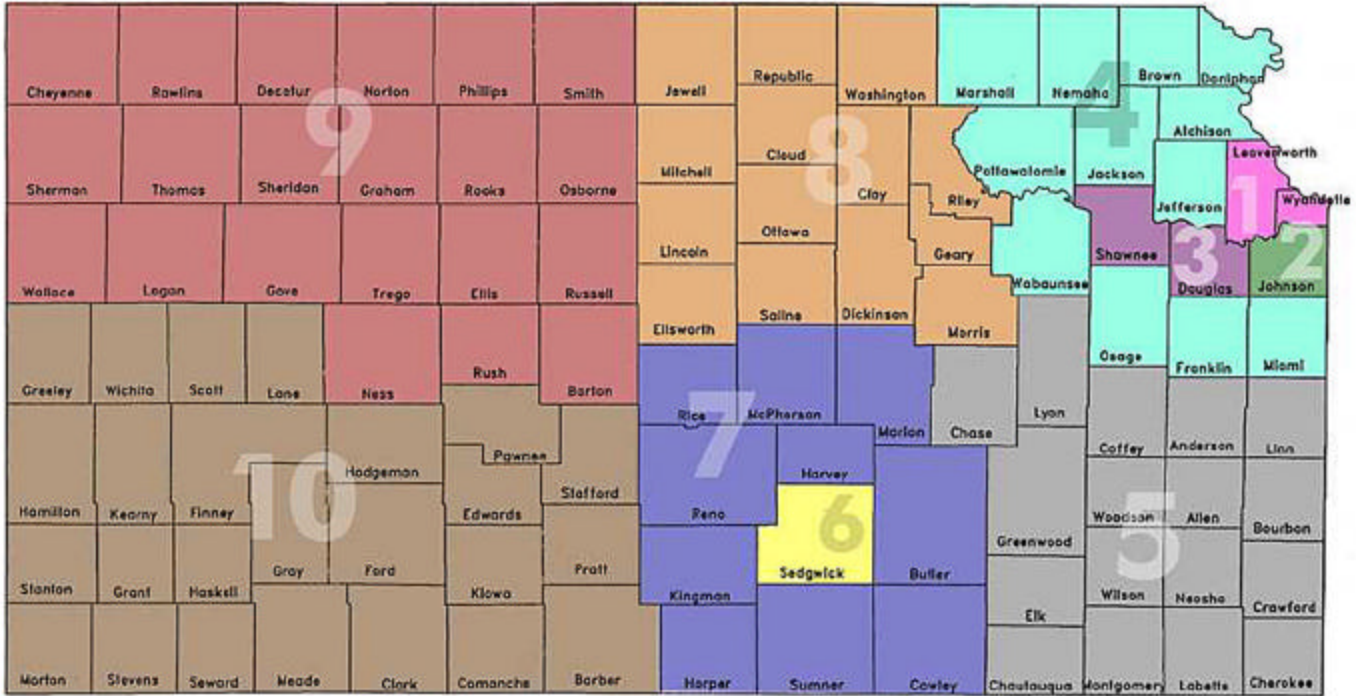
It is, however, precisely this kind of specific comparison that is necessary if the policy process is to be an informed and rational one.

The Kansas Health Insurance Study was specifically designed to address these challenges within time and budget constraints. The basic methodological approach is described in the following section of this report and thorough descriptions of technical issues are provided as Appendices B through F.

The objectives of the telephone survey are as follows:

1. To provide current and accurate estimates of the percentage of Kansas residents under age 65 who are uninsured.
2. To provide estimates of the percentage of Kansas residents under age 65 who are uninsured by several demographic and economic categories, including age, race, gender, income, employment status, marital status, ethnic identification, industry of employment, and size of employer.

3. To provide estimates of the number and percentage of Kansas residents under age 65 who are uninsured among specified sub-population groups of interest, including people eligible for Medicaid and children.
4. To provide estimates of the percentage of uninsured persons under age 65 in each of 10 geographic subdivisions within Kansas, as identified in the map provided below.



METHODOLOGY

Instrumentation

The telephone survey instrument used for the Kansas study was based on a questionnaire designed at the University of Florida for use in the Florida Health Insurance Study (FHIS). Subsequent modifications had been made for use in Indiana in 2000, and additional questions were added to meet the specific needs of Kansas.

The questionnaire included a full enumeration of each member of the household, as well as questions or items about various sources of insurance coverage, employment, income, demographics, health care access and utilization, and health status. The instrument was designed such that the interview would be conducted with the adult member of the household who was the “most knowledgeable about the family’s healthcare and health insurance.”

Whenever possible, question wording was chosen to be consistent with questions in existing national and state surveys. This was an effort to (1) generate results that are directly comparable to existing data sources, and (2) use questions and responses that have been widely tested and found to be both valid and reliable. This was true both for the questions used in the Florida study, as well as the new questions added for Kansas. Specifically, questions were drawn from the Current Population Survey, the Survey of Income and Program Participation, the Medical Expenditure Panel Survey, the Health Insurance Supplements to the National Health Interview Survey, the Behavioral Risk Factor Surveillance System, the 1993 RAND household survey and the Consumer Assessment of Health Plans.

A preliminary instrument was pretested in February 2001, and final changes were made based on that experience.

The instrument translated the study goals into questions that were easily understandable and asked only about one concept at a time. The time frame of reference was also defined, such as, “In the last year...”

In general, the questionnaire was effective. Interviewers were able to proceed through the questionnaire without difficulties in question order, response categories or comparable problems. Similarly, respondents were able to select and articulate answers that were consistent with the structure and format of the questions and response codes.

A copy of the questionnaire is provided in Appendix B.

Data Collection

The telephone fieldwork was conducted by the Bureau of Economic and Business Research (BEBR) at the University of Florida at Gainesville under the direction of Dr. Chris McCarty.

The fieldwork began on March 7, 2001 and was completed by June 10, 2001. A total of 8,004 interviews were conducted. The average length of the interview was just over 15 minutes. Approximately 180 interviews were conducted in Spanish.

The center used a computer-assisted telephone interviewing (CATI) system to speed the delivery of clean, machine-readable data following completion of the fieldwork. Most interviewers were undergraduate students. Interviewers represented a wide range of ethnicity, gender and race categories.

More information on the data collection process is found in Appendix C.

Sample Design

The goal of the KHIS was to estimate the statewide percent of nonelderly Kansas residents without health insurance within a one percent margin of error, and the proportion of uninsured Kansas residents for each of the 10 geographic regions within a three percent margin of error. While there is no guarantee that such results can be achieved, an appropriate sampling plan helps maximize the likelihood of attaining such goals.

In addition to providing a means for estimating the proportion of Kansas residents who are uninsured for the state as a whole and within each district, the sampling plan was intended to accomplish other goals. At the state level, for example, we sought the capacity to examine cross-tabulations of the proportion of uninsured Kansas residents by various demographic characteristics, such as race, ethnicity, poverty level, and employment status.

Beyond these state-level analyses, the sampling plan was intended to allow similar tabulations of the proportion uninsured by various demographic characteristics within each district. Specifically, within each of the 10 regions, it was designed to allow estimation of the proportion uninsured for three race/ethnicity categories (African American, Hispanic, and Non-Hispanic White) and for key levels of income as a percentage of the Federal Poverty Level (FPL).

To achieve the specified goals, we designed a stratified random sample. In stratified random sampling, various strata are defined around key population characteristics. In addition, we disproportionately sampled within each stratum. Generally speaking, larger samples are taken from strata with larger proportions of key population characteristics and smaller samples are taken from strata with small proportions of such characteristics. As a result, we are able to make more precise estimates of insurance coverage within key populations while retaining the ability to produce meaningful statewide estimates.

Since the major characteristic of interest was the lack of health insurance coverage, strata were defined using population groups that are most likely to lack health insurance: African Americans, persons of Hispanic origin, and those with low incomes.

For this purpose, “ low income” persons were defined as those individuals whose family income was below \$25,000 per year. Since this was a telephone survey, we chose the telephone exchange as the geographic basis of our strata.

Eight strata within each of the 10 geographic regions within Kansas were created by categorizing telephone exchanges as to whether they were above or below the state medians for (1) percent African American (2) percent Hispanic and (3) percent low income. This resulted in a maximum of 80 sampling strata statewide. Applying the criterion that a stratum must contain a minimum of 2,000 households left 36 strata in our final design.

Existing public and proprietary data from the Census Bureau and other sources were used to allocate the sample across the specified sampling strata. The sample was allocated across strata using Neyman-optimal allocation rules designed to minimize the variability of estimates, as explained in Appendix D-1.

The sample was designed to support multivariate analyses at the state level. That is, for the state of Kansas (but NOT for each region) the sample allowed us to estimate the proportion uninsured among groups simultaneously representing several of the sociodemographic attributes of interest. At this level, for example, we sought to be able to estimate the proportion uninsured among employed African Americans with a specified income level. Similarly, we wished to be able to pursue analyses comparing the proportion of White children who are uninsured with the proportion of Black children who are uninsured, controlling for income level.

The implementation of the sampling design proceeded as planned. The allocation of our sample across strata went smoothly. The sample is representative of the population of interest.

A total of 8,004 households completed our survey, well within our anticipated range of the total sample. These households contained a total of 22,690 individuals. The number of individuals in our sample in each of the 10 geographic regions is presented in Appendix D-1.

A Note on Estimation Procedures and Limitations

Survey research methods allow us to make estimates about a population based on information gathered from a sample. In this case, the population of interest is defined as “Kansas Residents under age 65” and the sample is the 22,691 individual members of the 8,004 households in which interviews were conducted.

While contemporary statistical inference provides a basis for great confidence in the estimates derived from a sample of this size, it is crucial that all estimates be understood as just that – estimates. As such, they contain an inherent (but small) level of imprecision. An example may serve to clarify this situation. In the Kansas Health Insurance Study, we find that 10.5 percent of the subjects in our sample are uninsured.

And we are confident that the actual percentage of uninsured Kansas residents is well within the planned interval of ± 1.0 percentage points of the estimate (between 9.5 percent and 11.5 percent.) In fact, for the specific statewide estimate of the percent uninsured, we are 95% confident that our estimate is within $\pm .6$ percentage points of the actual proportion uninsured.

It is cumbersome, of course, and sometimes confusing to report all findings in the form of intervals. Whether it is a political poll reported on the evening television news or a detailed report from the Centers for Disease Control, convention and convenience have led us to abbreviate by reporting the specific point estimates. But a cautious and thoughtful approach to all estimates derived from a sample always emphasizes that the estimates really refer to an interval – the specific number plus or minus some margin of error.

This margin of error should not be seen as a flaw. It reflects the simple reality that all estimates have limitations. A recent publication of The Access Project, a national initiative of the Robert Wood Johnson Foundation, notes that “There are no perfect data on the uninsured.” The report advises that policy participants not let their understandable preference for exact (“perfect”) numbers—which don’t exist—prevent the appropriate use of the best available estimates.

In some instances, it is necessary to abbreviate findings even further, especially when they are being presented to a general audience and the objective is to impart basic conclusions rather than specific details. In such cases, estimated numbers are rounded for ease of presentation. In the present document, all percentages are rounded to the nearest tenth of one percent.

Similarly, when a telephone survey is conducted, not every respondent answers every question, creating what researchers refer to as “missing data.” Sometimes respondents cannot or will not give information about some household members for a particular item. The practical consequence of this is that all cases are not included in all tables. Readers should not expect that estimated numbers will travel exactly from one table to another.

A third area of imprecision must be acknowledged. Surveys, especially telephone surveys, tend to slightly underestimate the number of people in disadvantaged population groups. Very poor people are less likely to have telephones and thus are less likely to be included in surveys. In the case of health insurance studies, there is considerable evidence that Medicaid recipients are likely to be underrepresented in telephone samples. Furthermore, those Medicaid recipients who are included in telephone samples may be unaware that they are on Medicaid or may be unwilling to acknowledge their participation in that program. Taken together, these issues frequently result in an underestimation of the number of people on Medicaid (and probably an underestimation of the number of people without any insurance). As recently indicated by the Director of Survey Research at the University of Minnesota, after completing three statewide

surveys, "...we consistently underestimate Medicaid participation" in telephone surveys. The Kansas Health Insurance Study is no exception to this general pattern.

Despite the inherent imprecision of survey estimates, the Kansas Health Insurance Study is unusually thorough, and our confidence in the estimates is very high. Standard errors are provided in Appendix D-4.

PRINCIPAL FINDINGS

Principal Findings

This chapter contains the principal findings from the telephone survey component of the Kansas Health Insurance Study. The findings are provided in the form of statistical tables, charts, and graphs. In general the tables speak for themselves. Brief explanatory or summary comments are provided for many of the charts and graphs.

As noted previously, the telephone survey was conducted with a sample of the residents of Kansas. Thus, all findings are estimates that should be viewed with the degree of caution appropriate to all estimates. Standard errors are presented in Appendix D-4. These allow the user to associate a level of confidence with the estimates. All findings are based on weighted data. That is, they take into account the sample design decisions noted previously, as well as statistical adjustments for such things as a lack of telephone coverage, multiple telephone lines within one household, etc.

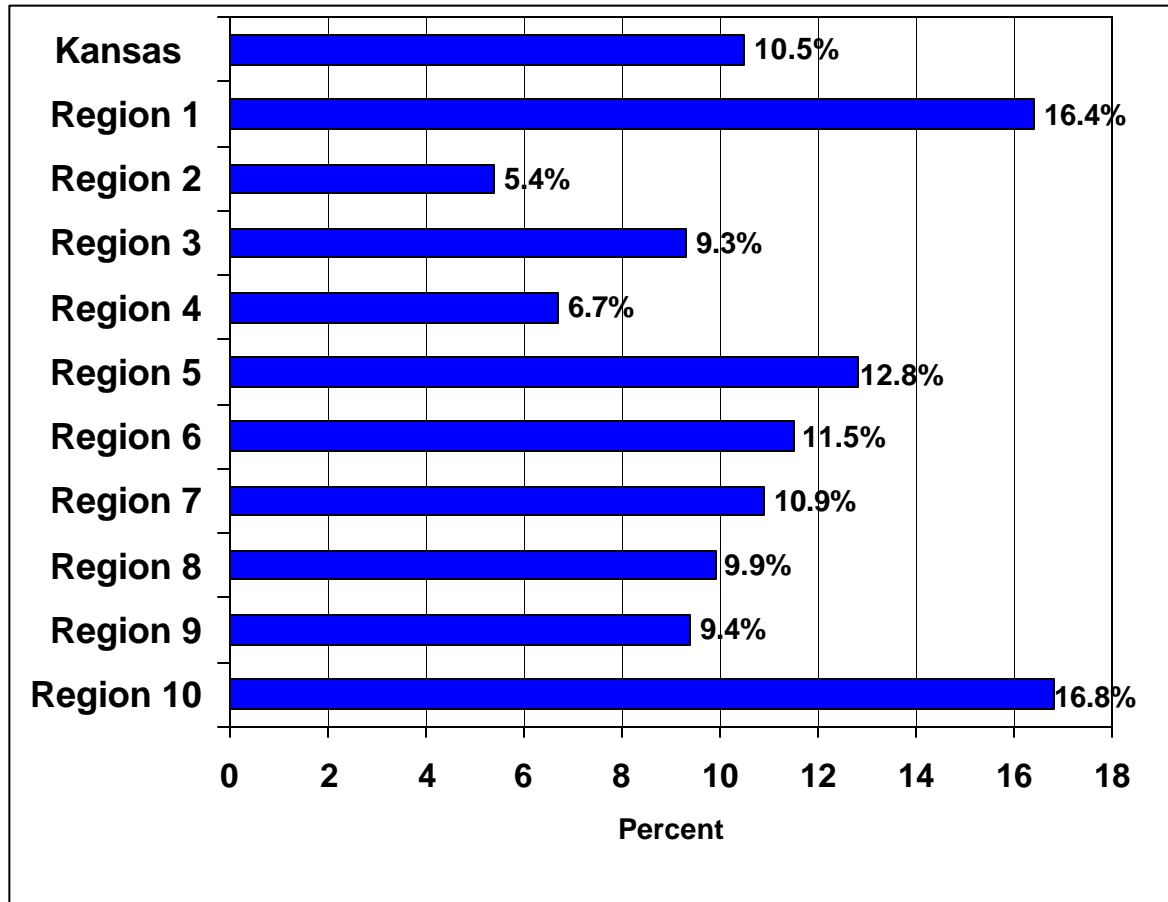
For the most part, findings are presented as percentages of Kansas residents under age 65 who are uninsured by various characteristics of interest. Extrapolation of such percentages to the analogous number of Kansas residents is accomplished by taking the percentage estimate from the KHIS survey data and applying it to the most current available estimate of the relevant population. For this purpose, it is estimated that Kansas's resident, non-institutionalized population under age 65 was 2,332,189 at the time of the survey. That is the population to which the KHIS refers. The population estimate was derived from the most recent estimate published by the Bureau of the Census.

In some instances, the findings are derivative of other calculations. For example, the findings include tables that array health insurance status by family income, with the latter measured in terms of the Federal Poverty Level (FPL). Determining FPL requires a calculation that takes family income and family size into account. Details on all such calculations are provided in the appropriate appendices.

Section 1

Uninsurance

Figure 1-1. Uninsured Kansans under Age 65, Statewide and by Region

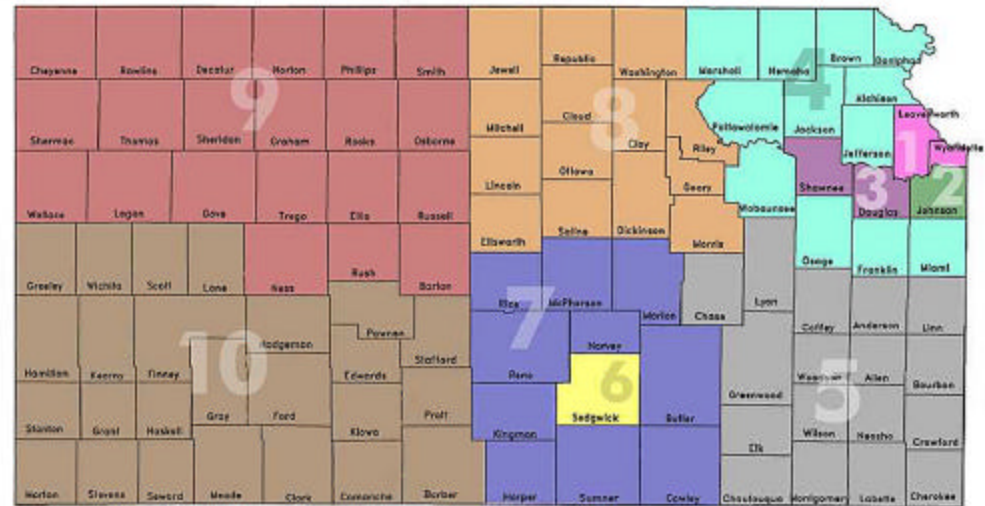


The study found that 10.5% of Kansans under age 65 are without health insurance. Rates of uninsurance vary substantially across the state, ranging from a high of 16.8% in Region 10 to a low of 5.4% in Region 2.

Sample size for this figure = 22,479 individuals

Table 1-1. Uninsured Kansans under Age 65, Statewide and by Region
Corresponds to Figure 1-1

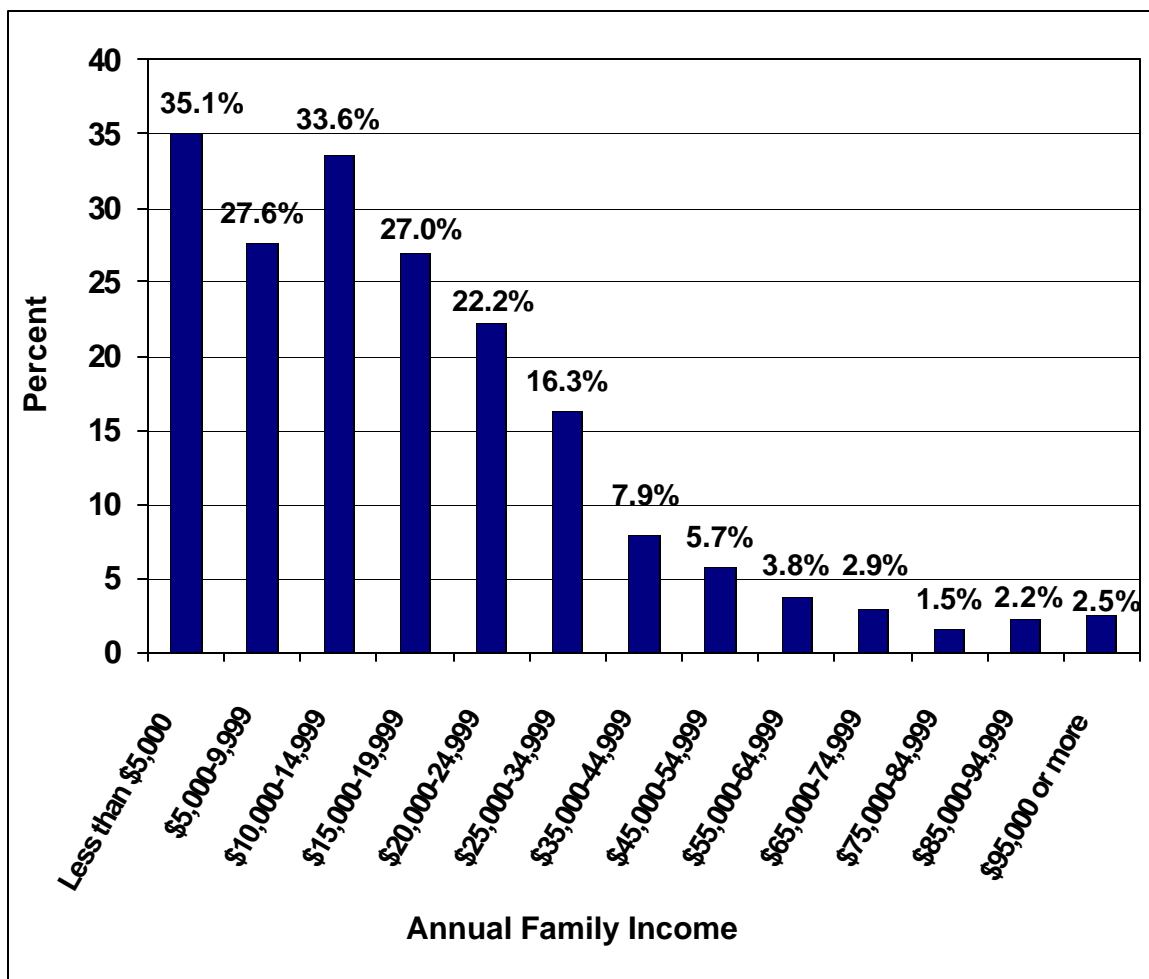
	Percent Uninsured
Kansas	10.5
Region 1	16.4
Region 2	5.4
Region 3	9.3
Region 4	6.7
Region 5	12.8
Region 6	11.5
Region 7	10.9
Region 8	9.9
Region 9	9.4
Region 10	16.8



Sample size for this table = 22,479 individuals

Note: Percentages reflect the proportion of Kansans under age 65 who are without health insurance, and do not sum to meaningful totals.

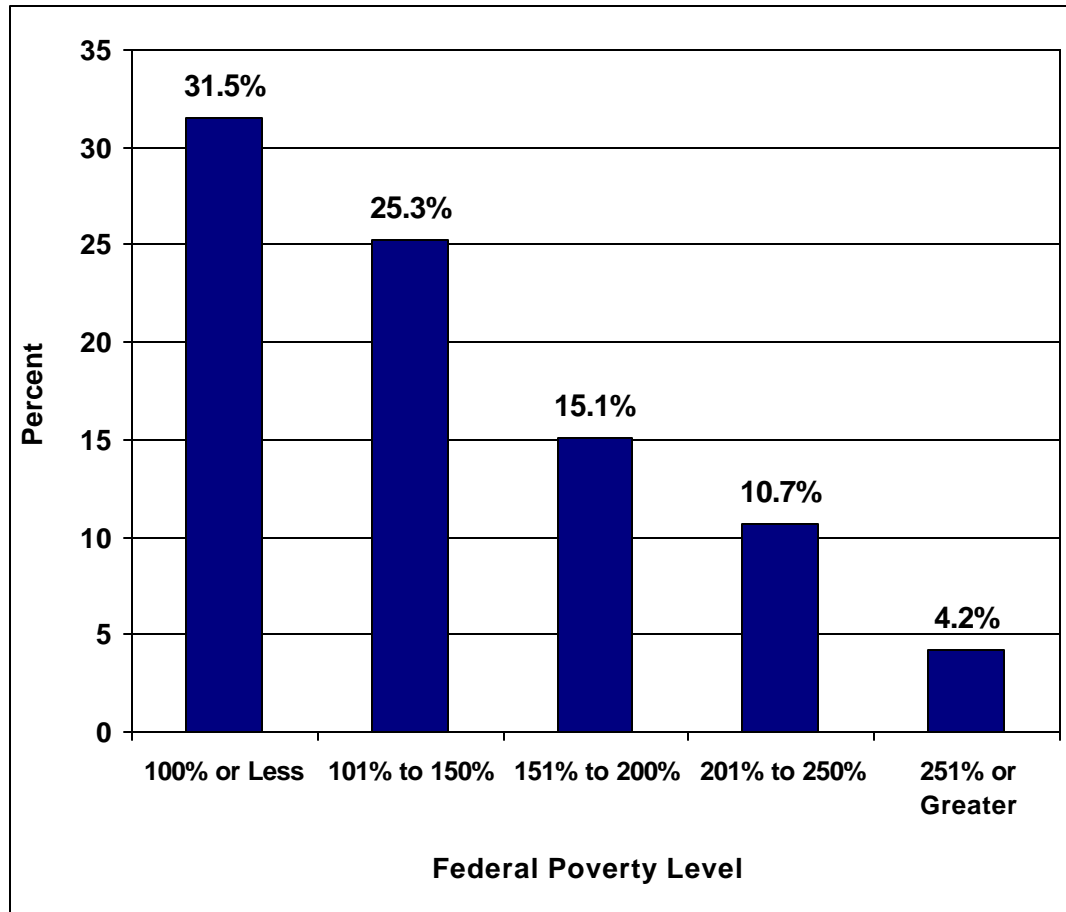
Figure 1-2. Percent of Kansans under Age 65 Who Are Uninsured by Annual Family Income



Sample size for this figure = 19,927 individuals

Individuals in families with lower incomes are more likely to be uninsured: 35.1% of individuals in families earning less than \$5,000 per year are uninsured, while only 1.5% of individuals in families earning \$75,000-84,999 per year lack insurance.

Figure 1-3. Uninsured Kansans under Age 65 by Income as a Percent of Federal Poverty Level (FPL)



Sample size for this figure = 19,927 individuals

Statewide, 31.5% of Kansans with family income 100% or less of FPL are uninsured. However, there is significant variation within the state in this category, from a low of 18.0% in Region 8 to a high of 45.9% in Region 1. Uninsured Kansans with family income between 101% and 150% of the FPL have a lower rate of 25.3%. About 15.1% of those with incomes between 151 to 200% of FPL are uninsured; that drops to 10.7% of those with incomes of 201 to 250% of FPL. 4.2% of Kansans with family income 251% of FPL or greater are uninsured.

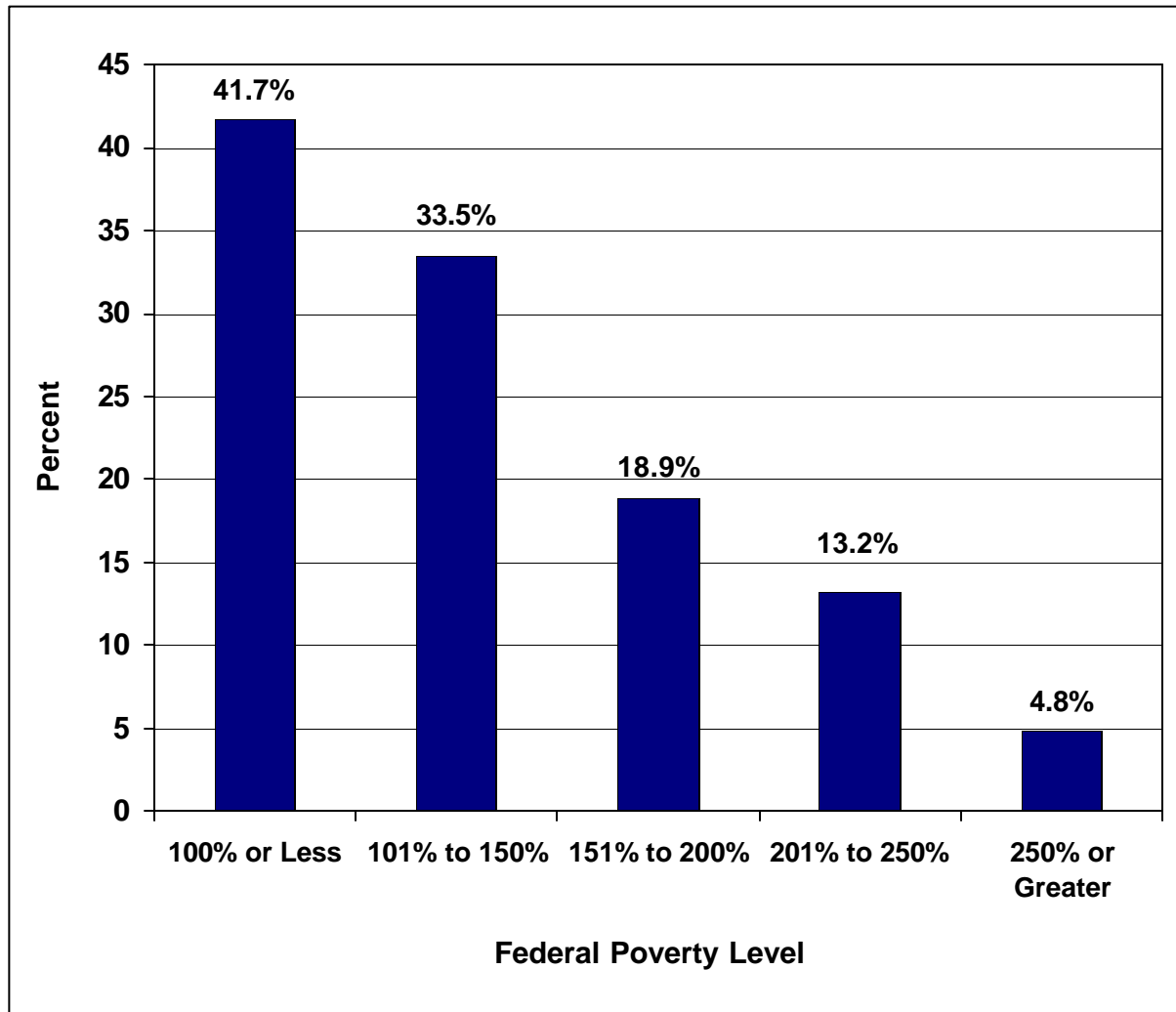
Table 1-2. Uninsured Kansans under Age 65 by Income as a Percent of Federal Poverty Level (FPL), Statewide and by Region *Corresponds to Figure 1-3*

	100%FPL or Less	101%FPL to 150%FPL	151%FPL to 200%FPL	201%FPL to 250%FPL	251%FPL or Greater
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	31.5	25.3	15.1	10.7	4.2
Region 1	45.9	37.0	16.9	14.2	5.5
Region 2	30.7	42.5	17.5	2.1	2.9
Region 3	31.9	16.9	13.0	16.3	3.1
Region 4	23.8	15.9	8.3	5.0	3.2
Region 5	30.6	30.5	7.4	11.2	5.2
Region 6	31.3	18.7	19.7	12.0	5.3
Region 7	28.0	34.9	20.5	9.8	4.1
Region 8	18.0	21.5	13.3	12.1	4.6
Region 9	23.5	13.4	13.7	12.1	5.0
Region 10	38.5	25.0	14.4	11.5	6.2

Sample size for this table = 19,927 individuals

Note: Percentages reflect the proportion of Kansans under age 65 in each FPL grouping who are without health insurance and do not sum to meaningful totals.

Figure 1-4. Uninsured Kansans Age 19-64 by Income as a Percent of Federal Poverty Level (FPL)



Uninsurance rates for adults decline as income rises. Statewide, 41.7% of those living at or below 100% of the FPL are uninsured, compared to only 4.8% of those with income at 250% of the FPL or greater. There is some variation among regions of the state: only 24.2% of the poorest Kansans are uninsured in Region 8, but fully 59.8% lack insurance in Region 1.

Sample size for this figure = 13,119 individuals

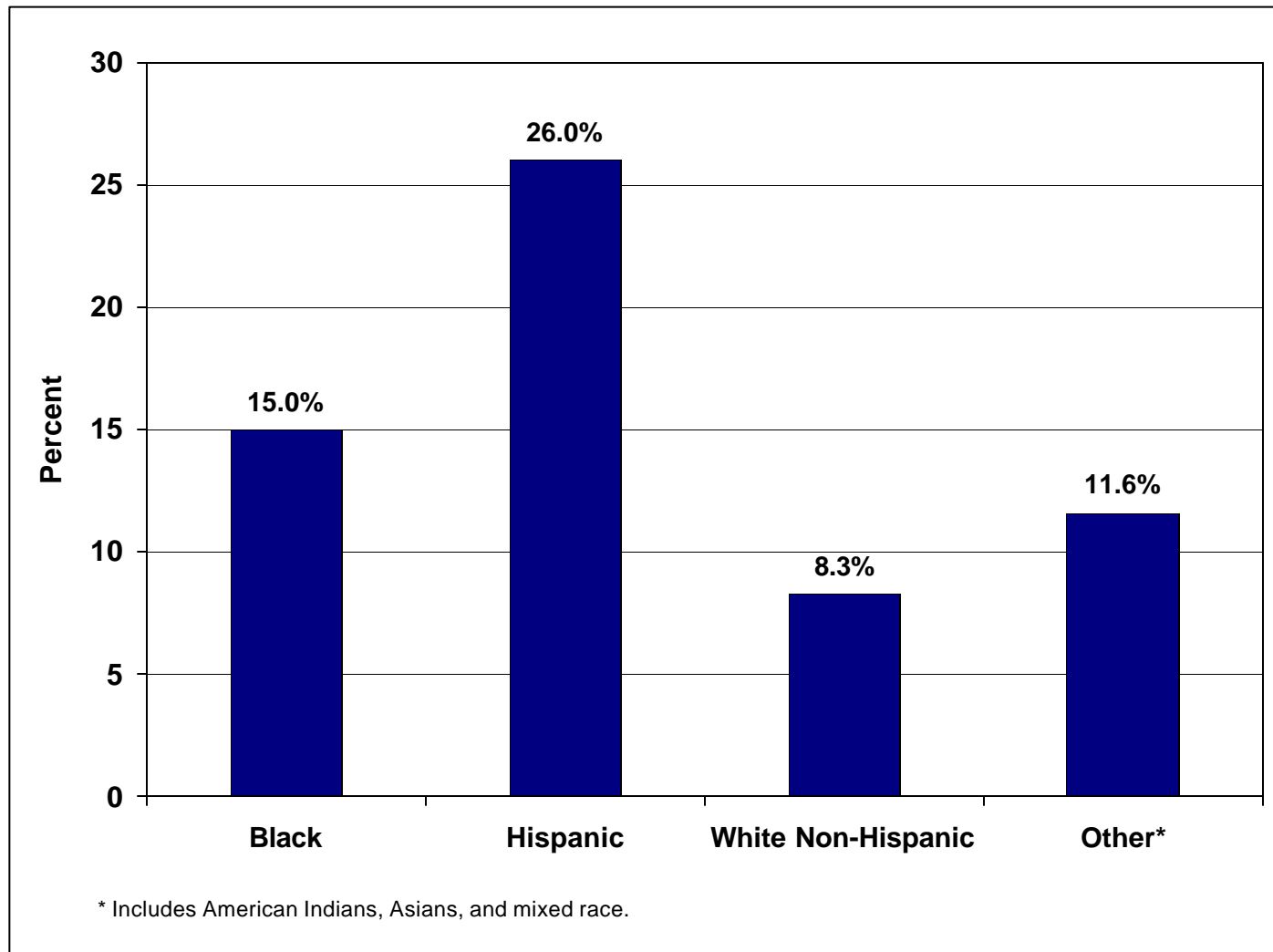
Table 1-3. Uninsured Kansans Age 19-64 by Income as a Percent of Federal Poverty Level (FPL), Statewide and by Region *Corresponds to Figure 1-4*

	100%FPL or Less	101%FPL to 150%FPL	151%FPL to 200%FPL	201%FPL to 250% FPL	251%FPL or Greater
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	41.7	33.5	18.9	13.2	4.8
Region 1	59.8	42.0	22.7	16.2	6.7
Region 2	31.9	47.2	20.9	3.1	3.5
Region 3	42.4	25.2	16.9	17.9	3.3
Region 4	33.5	24.5	12.4	8.5	3.5
Region 5	48.4	35.5	8.2	12.0	5.7
Region 6	42.1	27.5	24.4	16.1	5.9
Region 7	42.6	46.2	23.4	12.7	5.0
Region 8	24.2	27.1	14.7	13.3	5.0
Region 9	35.6	20.0	19.0	14.4	5.5
Region 10	46.0	41.3	21.9	14.7	6.5

Sample size for this table = 13,119 individuals

Note: Percentages reflect the proportion of Kansans age 19-64 in each FPL grouping who are without health insurance, and do not sum to meaningful totals.

Figure 1-5. Uninsured Kansans under Age 65 by Race and Ethnicity



Statewide, Hispanics have the highest rate of uninsurance at 26.0%, compared to 15.0% for Blacks, 8.3% for White non-Hispanics and 11.6% for other races. There is significant variation in uninsurance rates within the state, particularly for Blacks and Hispanics.

Sample size for this table = 22,121 individuals

Table 1-4. Uninsured Kansans under Age 65 by Race and Ethnicity, Statewide and by Region
Corresponds to Figure 1-5

	White Non-Hispanic	Black	Hispanic	Other*
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	8.3	15.0	26.0	11.6
Region 1	11.9	16.8	31.7	#
Region 2	4.6	7.3	23.9	0.9
Region 3	7.6	10.2	18.5	19.0
Region 4	6.7	#	7.5	#
Region 5	12.5	23.4	12.5	11.3
Region 6	8.4	16.5	27.7	11.2
Region 7	9.5	#	16.8	31.0
Region 8	9.8	6.1	6.8	23.5
Region 9	7.9	#	36.1	#
Region 10	8.8	#	32.5	19.9

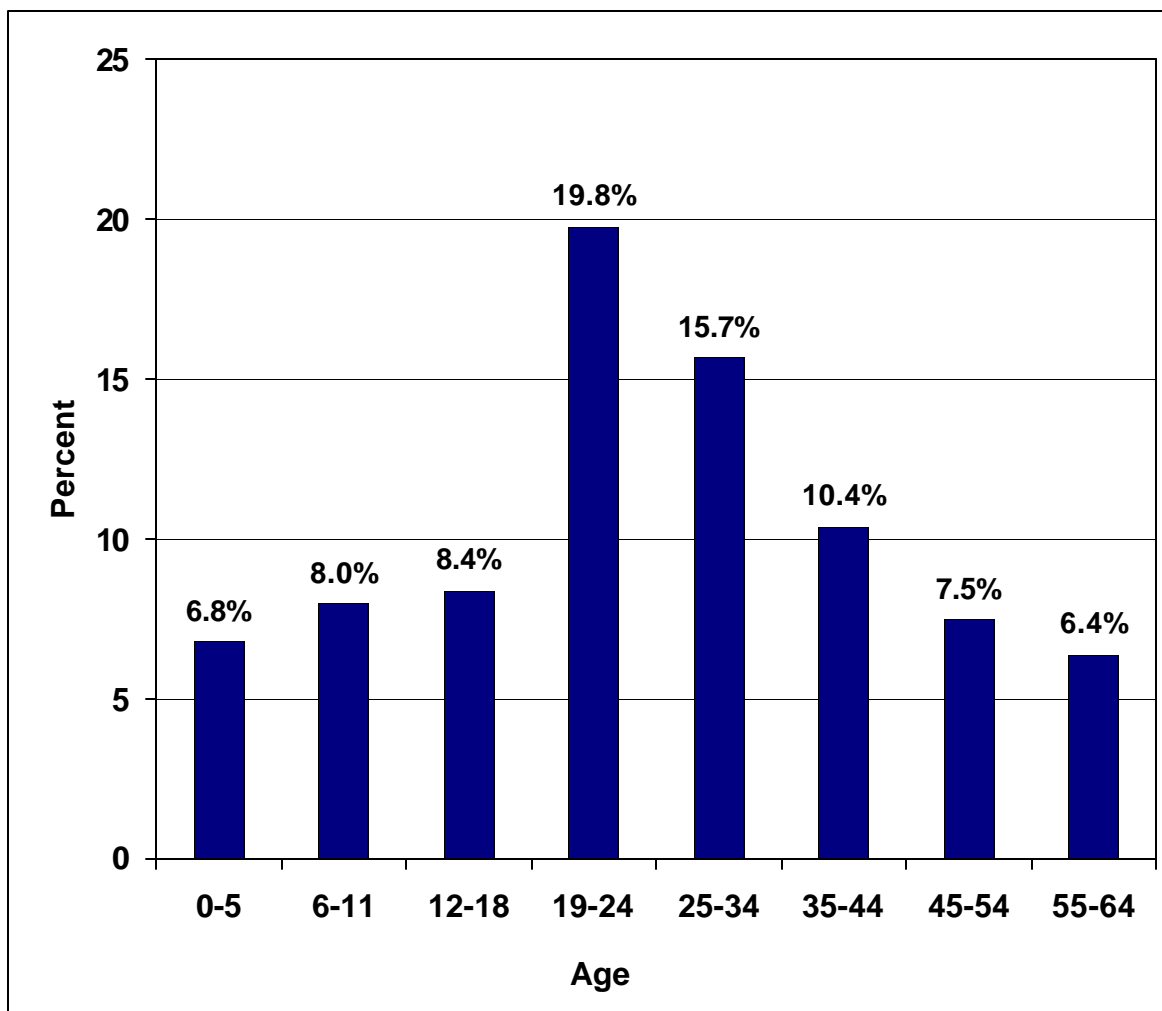
Sample size for this table = 22,121 individuals

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*Includes American Indians, Asians and mixed race.

Note: Percentages reflect the proportion of Kansans under age 65 in each racial group who are without health insurance, and do not sum to meaningful totals.

Figure 1-6. Uninsured Kansans under Age 65 by Specific Age Category



Sample size for this figure = 22,180 individuals

Statewide, the highest rate of uninsurance (19.8%) is among young adults aged 19-24. Children have relatively lower rates of uninsurance: 6.8% for infants and toddlers through age 5; about 8.0% for those aged 6-11; and approximately 8.4% for those aged 12-18. This is probably due in part to the emphasis placed on covering children through SCHIP and/or traditional Medicaid. For adults, uninsurance declines with age, with those aged 55-64 years having the lowest rate at 6.4%.

Table 1-5. Uninsured Kansans under Age 65 by Specific Age Category, Statewide and by Region

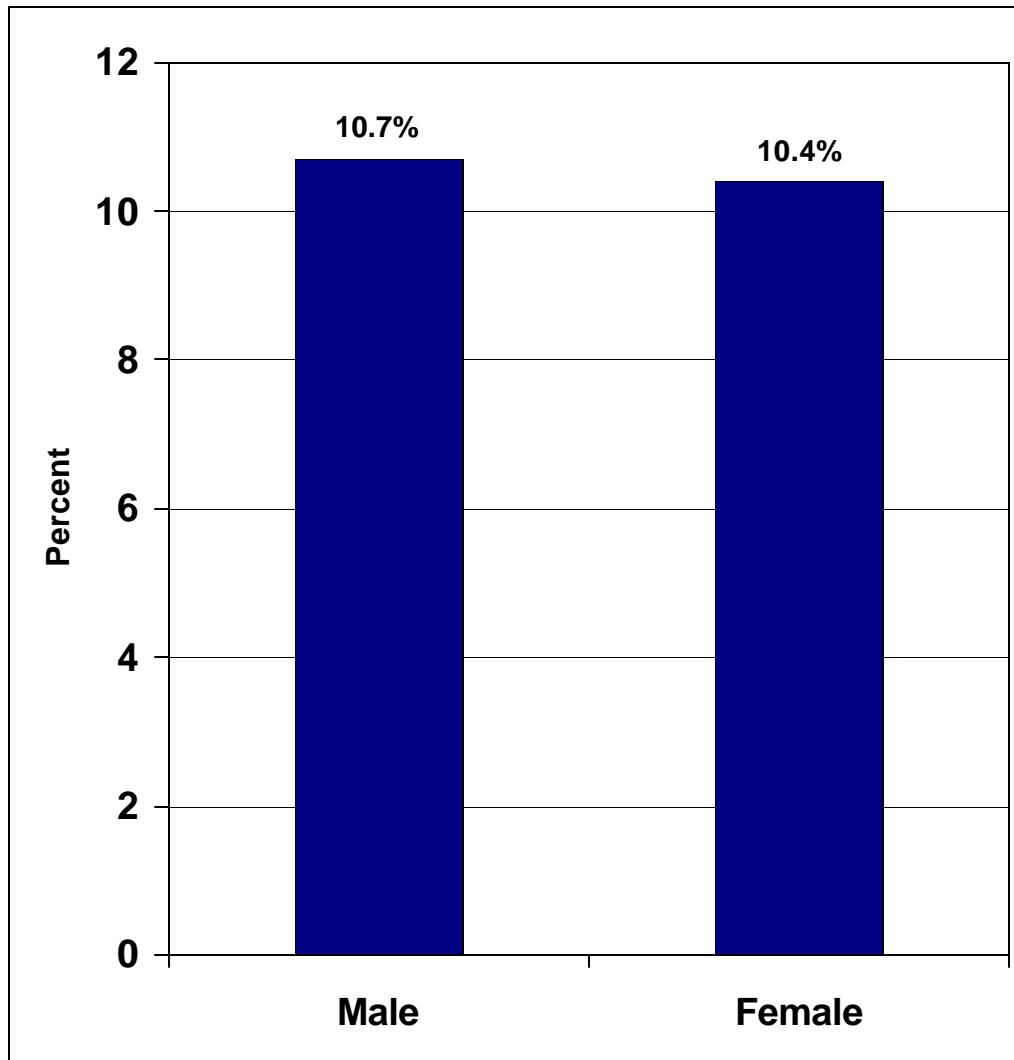
Corresponds to Figure 1-6

	0-5 Years	6-11 Years	12-18 Years	19-24 Years	25-34 Years	35-44 Years	45-54 Years	55-64 Years
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	6.8	8.0	8.4	19.8	15.7	10.4	7.5	6.4
Region 1	11.8	12.7	17.4	22.4	23.2	15.4	14.9	9.0
Region 2	4.0	6.3	5.3	15.5	8.1	4.4	2.6	1.1
Region 3	6.0	5.8	5.1	16.5	11.3	13.1	6.6	3.5
Region 4	1.2	2.5	3.7	18.2	8.2	7.6	5.6	8.4
Region 5	8.8	9.3	11.1	21.7	21.0	12.0	9.2	10.9
Region 6	5.4	9.5	9.6	24.0	15.2	13.5	8.3	4.6
Region 7	8.6	7.9	7.1	20.9	19.3	10.7	8.7	6.6
Region 8	6.9	5.5	7.9	14.3	16.2	10.1	6.0	7.7
Region 9	2.7	5.8	5.4	18.6	19.6	6.8	7.5	6.0
Region 10	11.7	11.8	11.8	26.2	30.5	12.3	10.4	16.6

Sample size for this table = 22,180 individuals

Note: Percentages reflect the proportion of Kansans under age 65 in each age category who are without health insurance, and do not sum to meaningful totals.

Figure 1-7. Uninsured Kansans under Age 65 by Gender



Male and female Kansans under age 65 have virtually the same rates of health insurance coverage. The statewide uninsurance rate is 10.7% for males and 10.4% for females, but this difference is so small as to be statistically insignificant. There is some regional variation, with males in Region 2 having the lowest rate of uninsurance at 6.2% and those in Region 10 having the highest at 16.6%. Females in Region 2 have the lowest uninsurance rate at 4.8%, while those in Region 1 have the highest uninsurance rate at 18.4%.

Sample size for this figure = 22,431 individuals

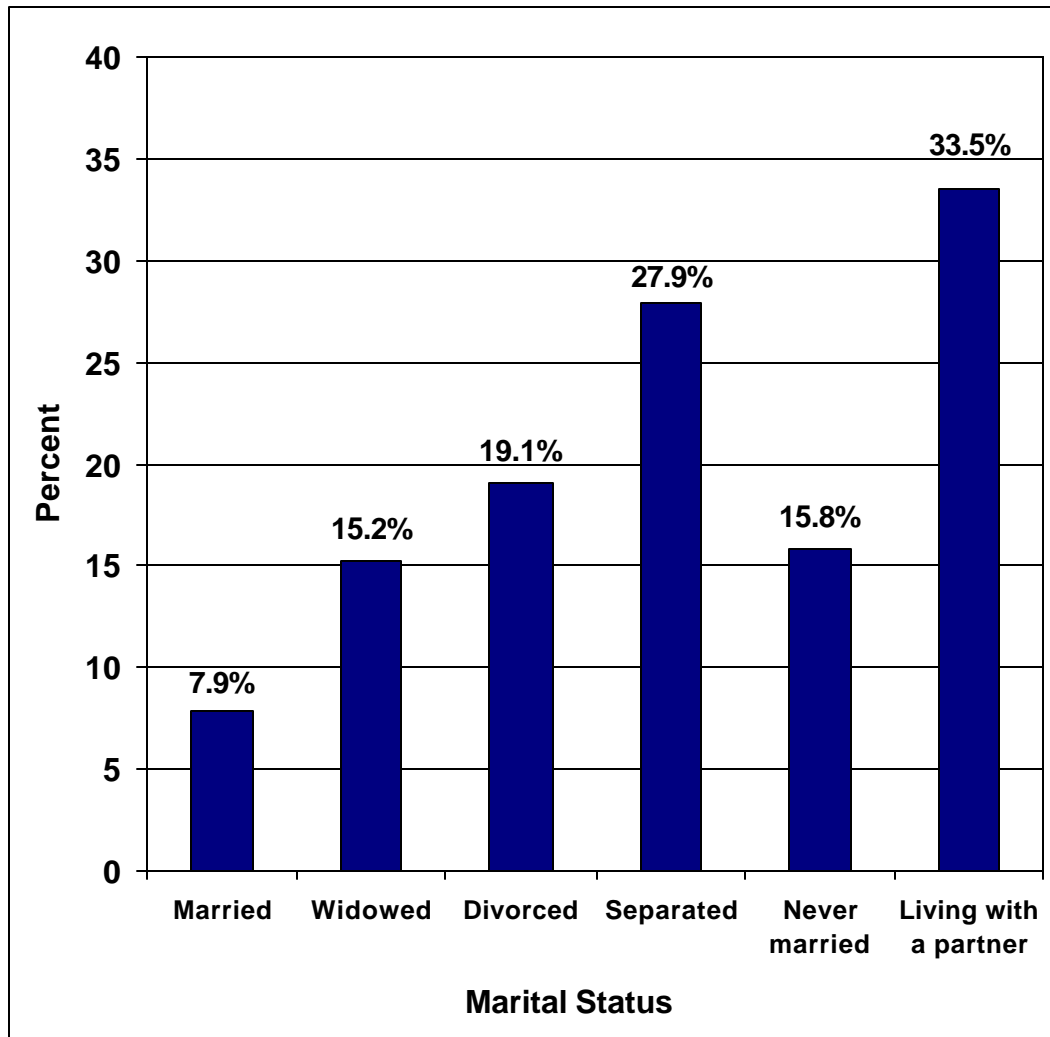
Table 1-6. Uninsured Kansans under Age 65 by Gender, Statewide and by Region
Corresponds to Figure 1-7

	Male	Female
	Percent Uninsured	Percent Uninsured
Kansas	10.7	10.4
Region 1	14.6	18.4
Region 2	6.2	4.8
Region 3	9.2	9.5
Region 4	7.2	6.2
Region 5	13.1	12.4
Region 6	11.6	11.4
Region 7	10.9	10.9
Region 8	10.6	9.1
Region 9	10.4	8.3
Region 10	16.6	17.0

Sample size for this table = 22,431 individuals

Note: Percentages reflect the proportion of Kansans under age 65 in each gender category who are without health insurance, and do not sum to meaningful totals.

Figure 1-8. Percent of Uninsured Kansans Age 16-64 by Marital Status



Married individuals have an uninsurance rate of only 7.9%. By contrast, those living with a partner have a strikingly higher rate of 33.5%. Those who are widowed, divorced, separated, and never married have rates ranging from 15.2% to 27.9%.

Sample size for this figure = 16,247 individuals

Table 1-7. Percent of Uninsured Kansans Age 16-64 by Marital Status, Statewide and by Region *Corresponds to Figure 1-8*

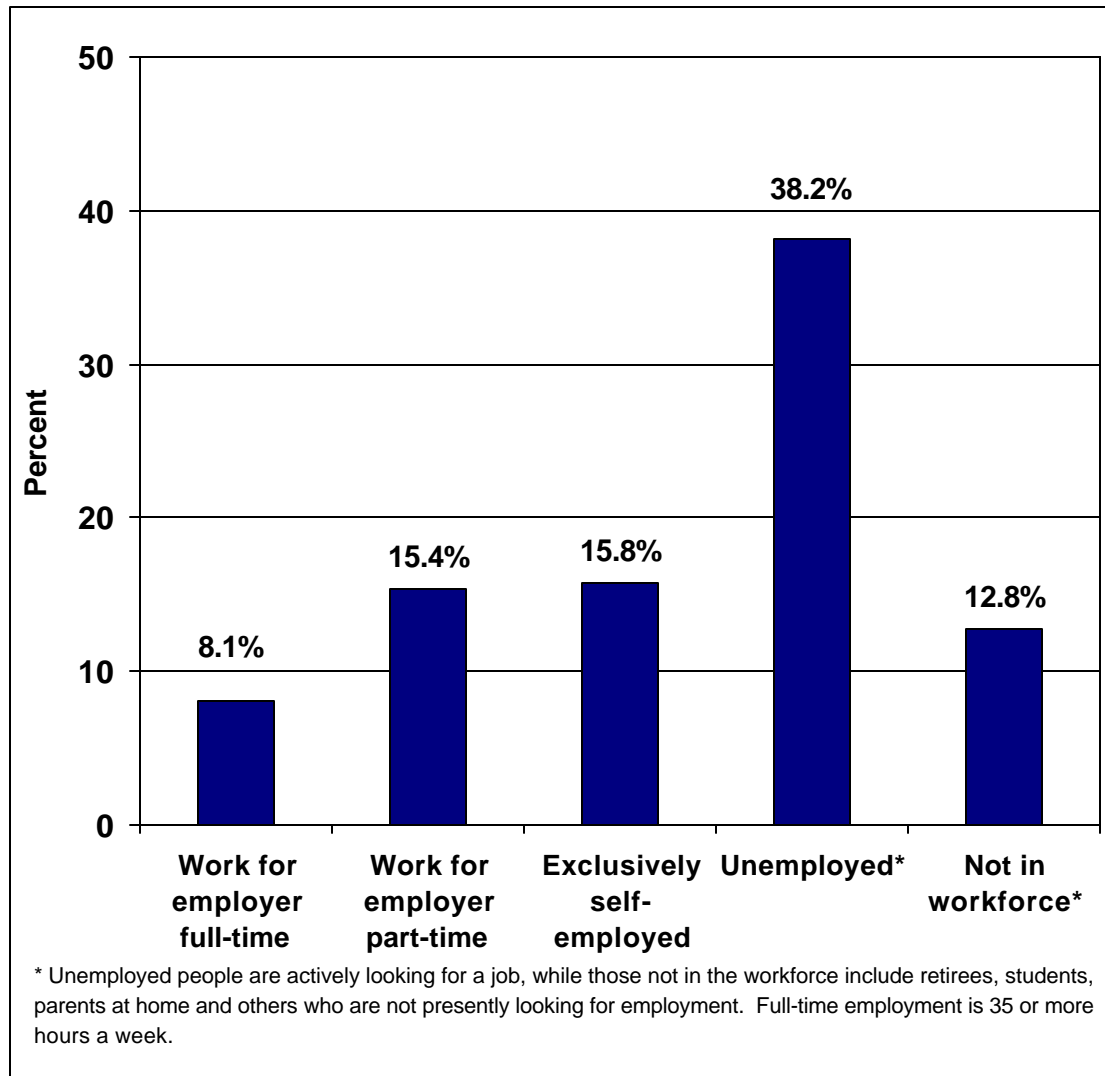
	Married	Widowed	Divorced	Separated	Never Been Married	Living With a Partner
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	7.9	15.2	19.1	27.9	15.8	33.5
Region 1	13.2	#	25.3	#	19.7	#
Region 2	2.6	8.5	9.4	#	10.3	27.5
Region 3	6.8	18.1	15.8	30.0	14.2	19.7
Region 4	5.3	#	13.9	#	14.5	#
Region 5	11.1	15.2	30.3	#	15.7	#
Region 6	8.0	8.7	19.4	23.5	20.0	33.4
Region 7	8.8	22.9	20.8	#	13.9	52.6
Region 8	7.7	#	22.7	#	11.3	#
Region 9	6.3	#	24.9	#	16.4	#
Region 10	15.1	#	20.3	#	24.9	#

Sample size for this table = 16,247 individuals

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Note: Percentages reflect the proportion of Kansans age 16-64 in each marital category who are without health insurance, and do not sum to meaningful totals.

Figure 1-9. Uninsured Kansans Age 18-64 by Employment Status



Sample size for this figure = 15,329 individuals

The insurance status of adult Kansans is associated with their employment circumstances:

- a. The lowest rate of uninsurance is among those who work for an employer full-time: 8.1%. Those who work for an employer part-time have an uninsurance rate of 15.4%.
- b. The highest uninsurance rate is for the unemployed at 38.2%.
- c. About 15.8% of those who are exclusively self-employed lack insurance, while 12.8% of those not in the workforce are without coverage.

There exists some geographic variation, with uninsurance rates for full-time employees varying from a low of 4.8% in Region 2 to a high of 14.0% in Region 10. Among the exclusively self-employed, those in Region 2 had an uninsurance rate of 5.7% while those in Region 1 had a rate almost seven times that (39.1%).

Table 1-8. Uninsured Kansans Age 18-64 by Employment Status, Statewide and by Region
Corresponds to Figure 1-9

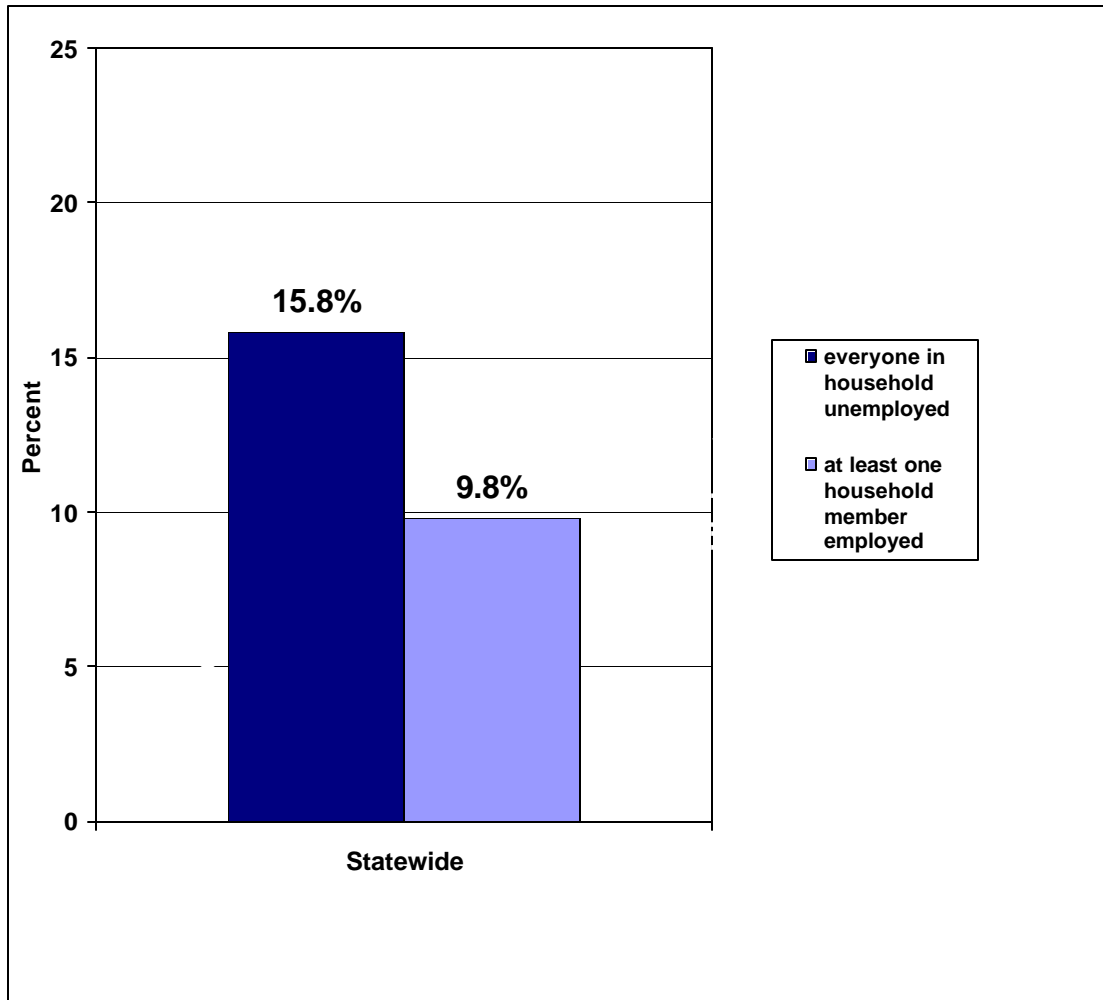
	Work for Employer Full-time*	Work for Employer Part-time	Exclusively Self-employed	Unemployed*	Not in the Workforce*
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	8.1	15.4	15.8	38.2	12.8
Region 1	9.7	12.7	39.1	51.0	21.3
Region 2	4.8	7.8	5.7	17.0	5.3
Region 3	6.3	20.4	21.0	31.1	11.1
Region 4	5.1	7.6	11.0	45.0	10.6
Region 5	9.9	24.5	19.8	39.6	14.2
Region 6	9.1	19.6	21.4	42.8	12.1
Region 7	9.0	14.8	16.5	35.3	14.3
Region 8	8.3	15.8	16.5	28.2	9.7
Region 9	9.6	8.2	9.4	34.2	13.3
Region 10	14.0	16.8	16.0	53.7	27.2

Sample size for this table = 15,329 individuals

* Unemployed people are actively looking for a job, while those not in the workforce include retirees, students, parents at home and others who are not presently looking for employment. Full-time employment is 35 or more hours a week.

Note: Percentages reflect the proportion of Kansans age 18-64 in each employment status category who are without health insurance, and do not sum to meaningful totals.

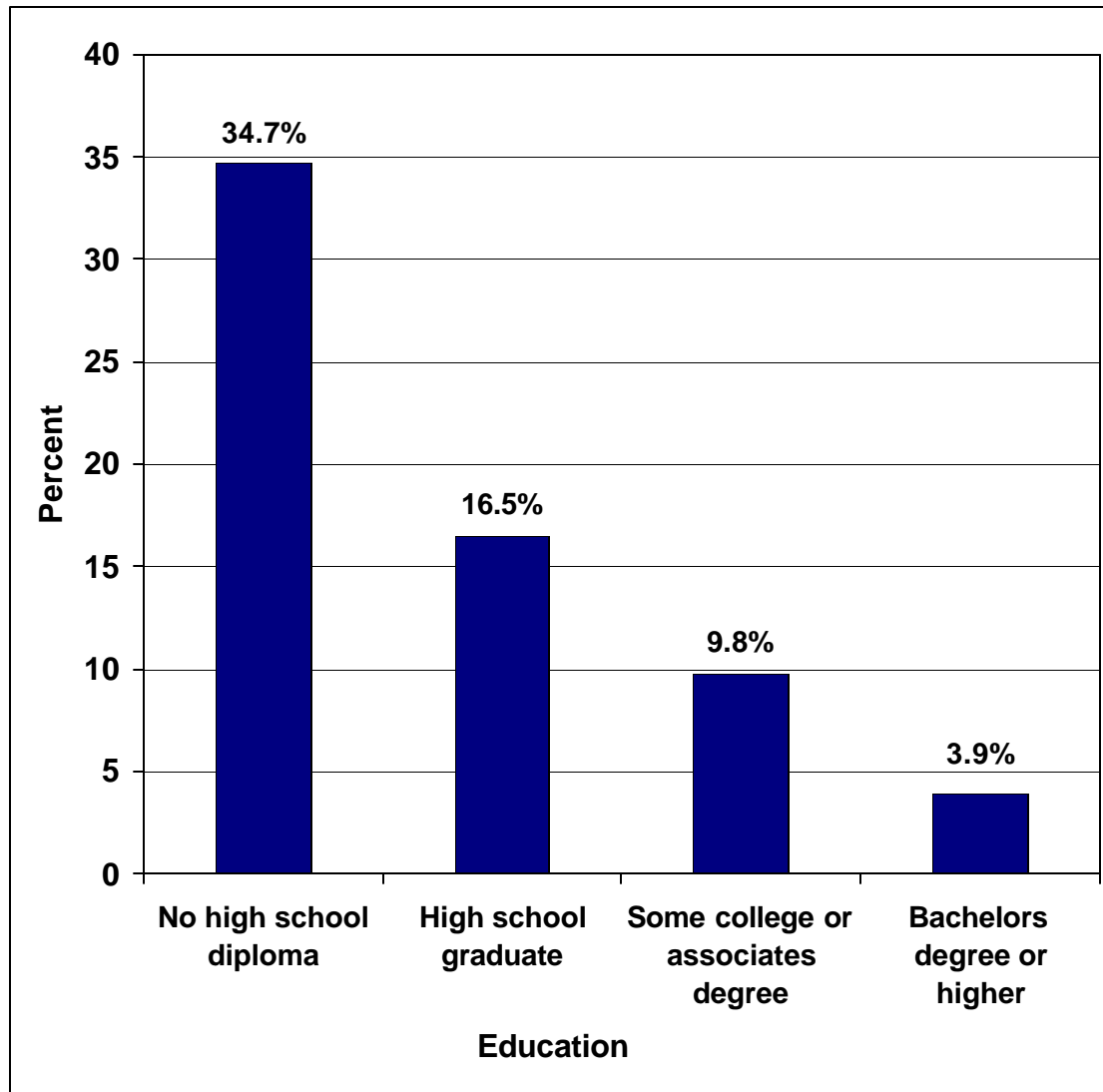
Figure 1-10. Percent of Uninsured Kansans under Age 65 by the Employment Status of Household Members Age 18-64



Sample size for this figure = 21,953 individuals

In Kansas, employment and insurance coverage go hand in hand. Statewide, among those who live in households where at least one adult is employed, 9.8% of individuals lack insurance. Among Kansans living in households in which all adults are unemployed, 15.8% of people are without health insurance.

Figure 1-11. Uninsured Kansans Age 18-64 by Education



Sample size for this figure = 15,209 individuals

The rate of uninsurance declines as education level increases. Adults with less than a high school diploma have the highest rate of uninsurance at 34.7%, while adults with a bachelor’s degree or higher have the lowest rate (3.9%). Uninsurance rates for those without a high school diploma vary from a low of 17.3% in Region 4 to a high of 46.9% in Region 3.

Table 1-9. Uninsured Kansans Age 18-64 by Education, Statewide and by Region

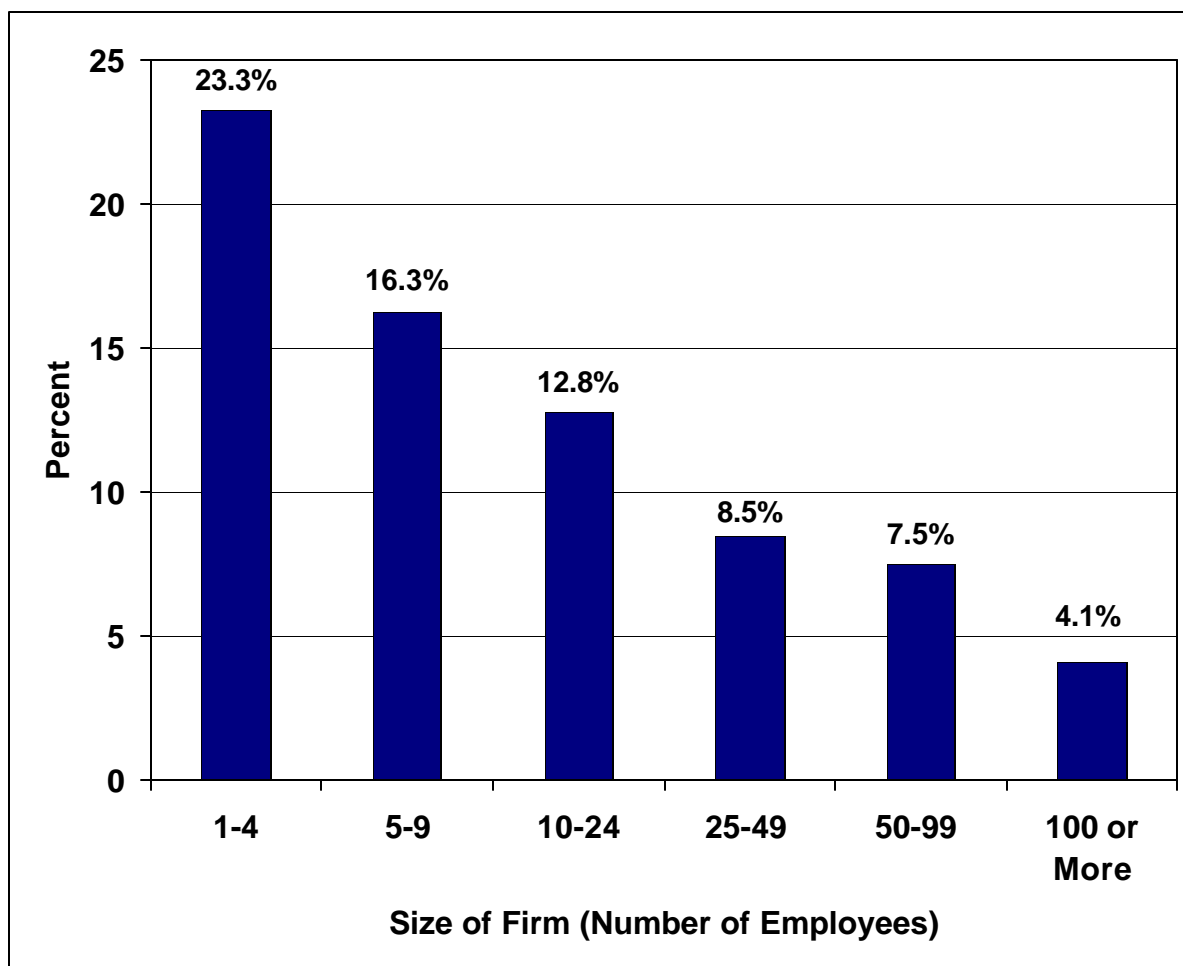
Corresponds to Figure 1-11

	No High School Diploma	High School Graduate	Some College or Associates Degree	Bachelors Degree or Higher
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	34.7	16.5	9.8	3.9
Region 1	35.8	20.6	13.4	4.5
Region 2	25.2	14.7	5.6	2.0
Region 3	46.9	14.5	7.3	5.9
Region 4	17.3	9.9	7.7	4.9
Region 5	30.0	17.4	12.4	6.4
Region 6	40.6	17.4	11.4	3.9
Region 7	36.7	16.2	10.2	4.2
Region 8	25.3	15.1	9.3	5.8
Region 9	18.8	16.5	10.0	4.7
Region 10	41.8	22.5	12.7	2.2

Sample size for this table = 15,209 individuals

Note: Percentages reflect the proportion of Kansans age 18-64 in each education grouping who are without health insurance, and do not sum to meaningful totals.

Figure 1-12. Uninsured Full-Time Employed Kansans Age 18-64 by Size of Firm



Among full-time employed Kansans aged 18-64 years, rates of uninsurance decline as the size of the employment firm increases. About 23.3% of full-time employed Kansans who work for firms of 1-4 employees are uninsured. By contrast, only 4.1% of full-time employees who work for firms with 100 or more employees are uninsured.

Employees of large firms had the lowest rates of uninsurance across the state. There was considerable geographic variation in the rates for employees at smaller firms.

Sample size for this figure = 7,395 individuals

Note: Does not include exclusively self-employed

Table 1-10. Uninsured Full-Time Employed Kansans Age 18-64 by Size of Firm, Statewide and by Region *Corresponds to Figure 1-12*

	1-4 Employees	5-9 Employees	10-24 Employees	25-49 Employees	50-99 Employees	100 or More Employees
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	23.3	16.3	12.8	8.5	7.5	4.1
Region 1	#	16.4	16.2	12.3	3.3	5.1
Region 2	#	18.9	4.0	6.7	7.8	2.5
Region 3	#	#	10.6	8.5	14.4	3.4
Region 4	#	14.8	6.0	#	7.5	1.1
Region 5	30.9	10.7	17.4	4.7	11.3	4.2
Region 6	23.1	28.6	22.8	7.2	9.3	4.5
Region 7	25.2	24.1	14.3	8.7	4.9	3.7
Region 8	29.2	11.4	14.8	11.1	6.0	4.6
Region 9	25.6	7.5	12.0	7.9	#	4.0
Region 10	26.3	9.2	11.2	17.5	6.4	13.0

Sample size for this table = 7,395 individuals

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Note: Does not include exclusively self-employed. Percentages reflect the proportion of Kansans age 18-64 in each category who are without health insurance, and do not sum to meaningful totals.

Table 1-11. Uninsured Full-Time and Part-Time Workers by Income as a Percent of Federal Poverty Level (FPL)

FPL	Full-Time	Part-Time
	Percent Uninsured	Percent Uninsured
All Incomes	8.1	15.4
100% FPL or Less	37.1	39.0
101% FPL to 150% FPL	30.6	34.2
151% FPL to 200% FPL	16.2	17.7
201% FPL to 250% FPL	9.1	9.6
251% FPL or Greater	3.5	5.4

Sample size for this table = 8,457 individuals (full-time), 1,132 individuals (part-time)

Note: Does not include exclusively self-employed. Percentages reflect the proportion of Kansans under age 65 in each FPL grouping who are without health insurance, and do not sum to meaningful totals.

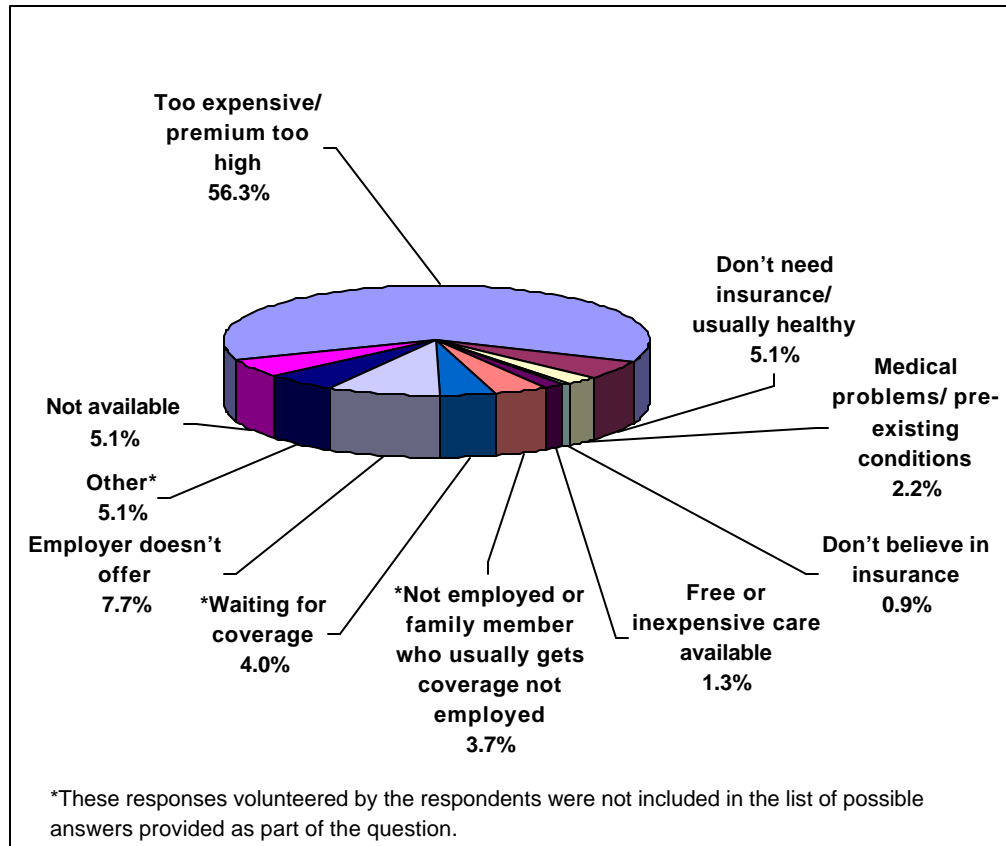
Table 1-12. Uninsured Kansans Who Work for an Employer that Offers Insurance by Income as a Percent of Federal Poverty Level (FPL)

FPL	Full-Time	Part-Time
	Percent Uninsured	Percent Uninsured
100% FPL or Less	29.6	26.6
101% FPL to 150% FPL	19.3	26.4
151% FPL to 200% FPL	9.3	10.9
201% FPL to 250% FPL	5.2	7.1
251% FPL or Greater	1.6	4.2

Sample size for this table = 6,745 individuals (full-time), 739 individuals (part-time)

Note: Does not include exclusively self-employed. Percentages reflect the proportion of Kansans under age 65 in each FPL grouping who are without health insurance, and do not sum to meaningful totals.

Figure 1-13. Reported “Main Reason” for Not Having Health Insurance, Uninsured Kansans under Age 65



By far the most commonly cited answer to the question, “What is the MAIN reason that you do not have health insurance?” was “Too expensive/can’t afford it/premium too high.” This reason was given for more than half of those without insurance (56.3%). About 7.7% of respondents volunteered that the main reason for being without health insurance was the uninsured person’s employer doesn’t offer it, while 5.1% reported that they either did not need insurance, or were usually healthy and another 5.1% indicated that health insurance was not available. 3.7% alluded to unemployment as the main reason, and another 4.0% said they were waiting for coverage.

Sample size for this figure = 2,235 individuals

Table 1-13. Reported “Main Reason” for Not Having Health Insurance, Uninsured Kansans under Age 65

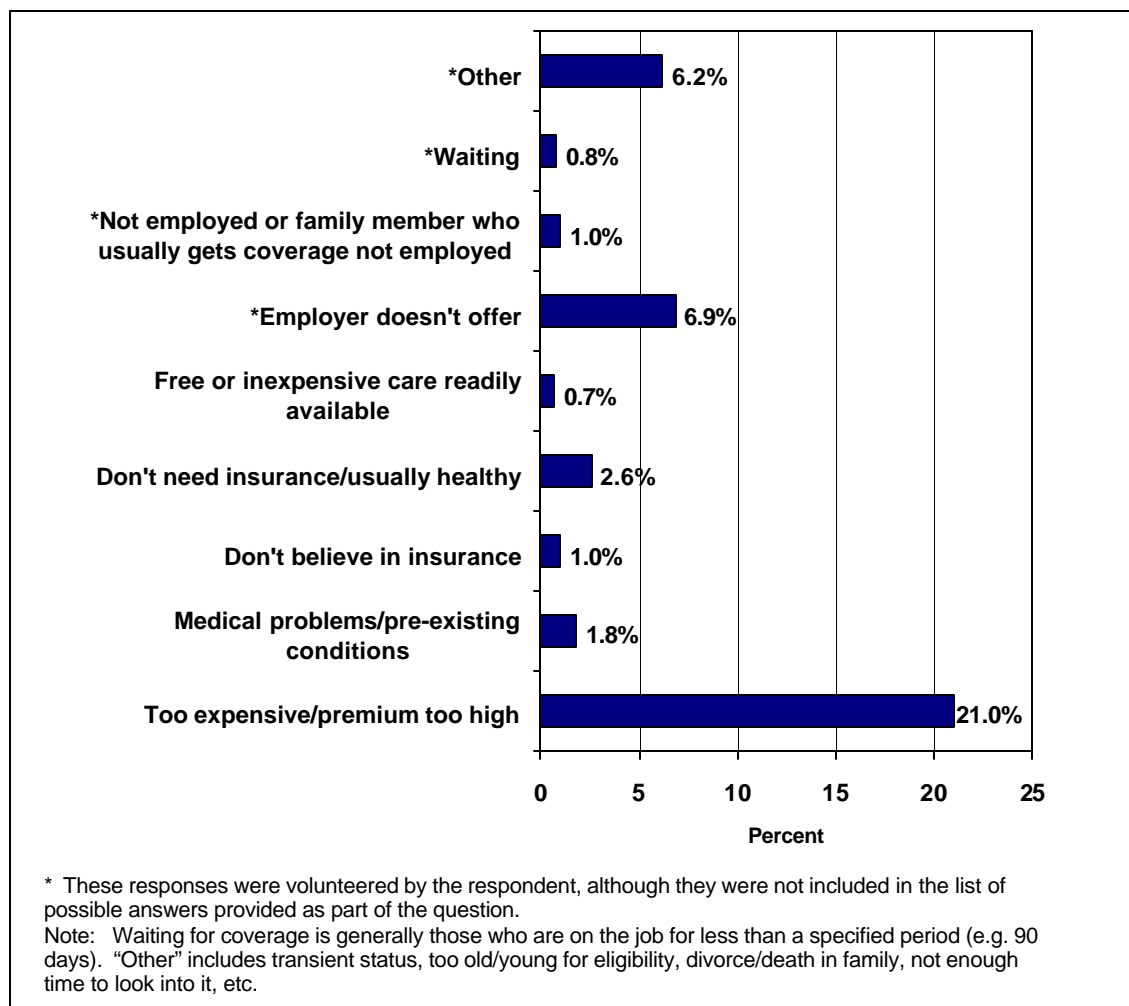
Corresponds to Figure 1-13

Main Reason	Percent Uninsured
Too expensive/premium too high	53.6
Medical problems/pre-existing conditions	2.2
Don’t believe in insurance	0.9
Don’t need insurance/usually healthy	5.1
Free or inexpensive care available	1.3
*Employer doesn’t offer	7.7
*Not employed or family member who usually gets coverage not employed	3.7
*Waiting for coverage (e.g., less than 90 days on job)	4.0
*Other (various reasons including transient status, too old/young for eligibility, divorce/death in family, not enough time to look into it)	5.1
Not Available	5.1

Sample size for this table = 2,345 individuals

* These responses were volunteered by the respondent, although they were not included in the list of possible answers provided as part of the question

Figure 1-14. Other Reasons for Not Having Health Insurance, Uninsured Kansans under Age 65



Sample size for this table = 2,203 individuals

The most common “other reason” for not having health insurance is that it is too expensive or the premium was too high (21.0%). About 6.9% report that their employer does not offer health insurance coverage, while 6.2% have other reasons.

Table 1-14. Other Reasons for Not Having Health Insurance, Uninsured Kansans under Age 65

Corresponds to Figure 1-14

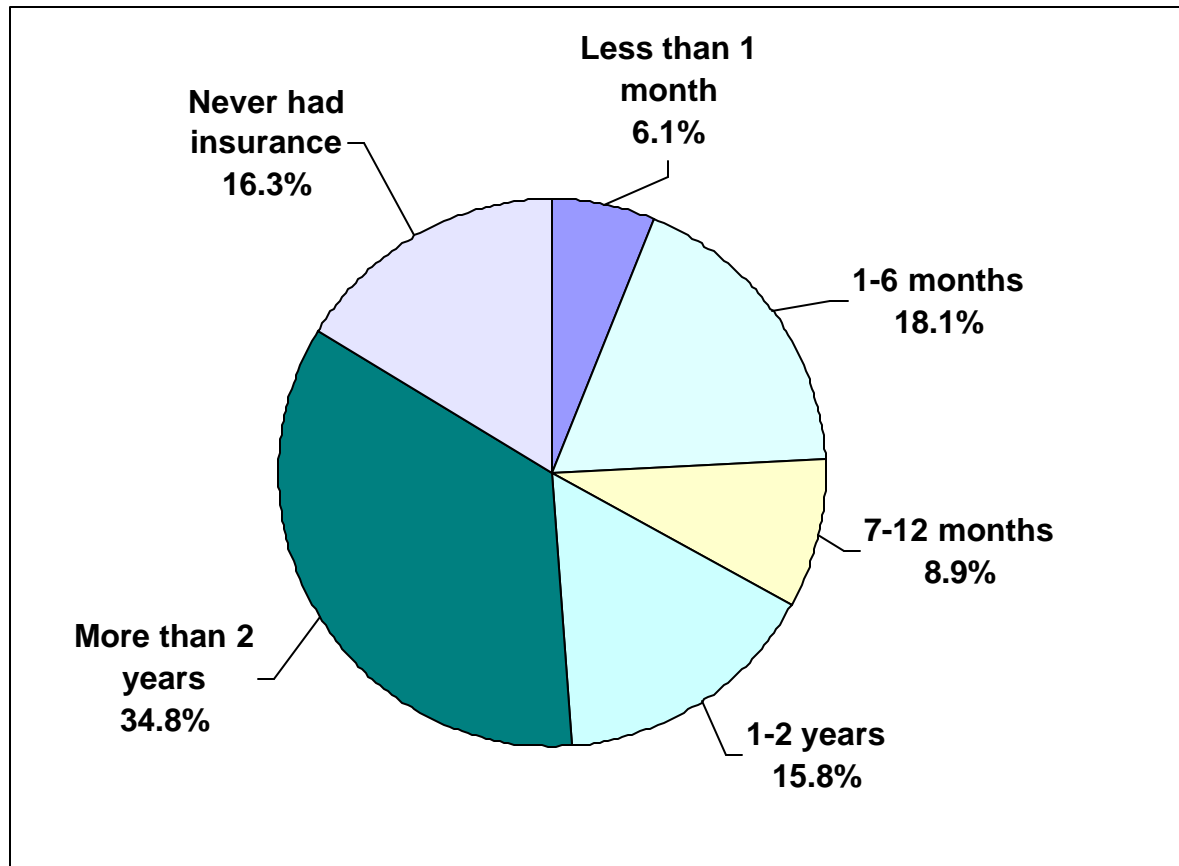
Reason Given	Percent Uninsured
Too expensive/premium too high	21.0
Medical problems/pre-existing conditions	1.8
Don't believe in insurance	1.0
Don't need insurance/usually healthy	2.6
Free or inexpensive care available	0.7
*Employer doesn't offer	6.9
*Not employed or family member who usually gets coverage not employed	1.0
*Waiting for coverage (e.g., less than 90 days on job)	0.8
*Other (various reasons including transient status, too old/young for eligibility, divorce/death in family, not enough time to look into it)	6.2

Sample size for this table = 2,203 individuals

* The responses were volunteered by the respondent, although they were not included in the list of possible answers provided as part of the question.

Note: Waiting for coverage is generally those who are on the job for less than a specified period (e.g. 90 days). "Other" includes transient status, too old/young for eligibility, divorce/death in family, not enough time to look into it, etc.

Figure 1-15. Length of Time Without Health Coverage, Uninsured Kansans under Age 65



Among uninsured Kansans under 65 years old, about a third have been without coverage for less than a year: 6.1% for less than a month, 18.1% for 1-6 months and 8.9% for 7-12 months. About 15.8% have been without health insurance for between 1-2 years, and 34.8% have been without health insurance for more than 2 years. 16.3% of uninsured Kansans under age 65 have never had health insurance.

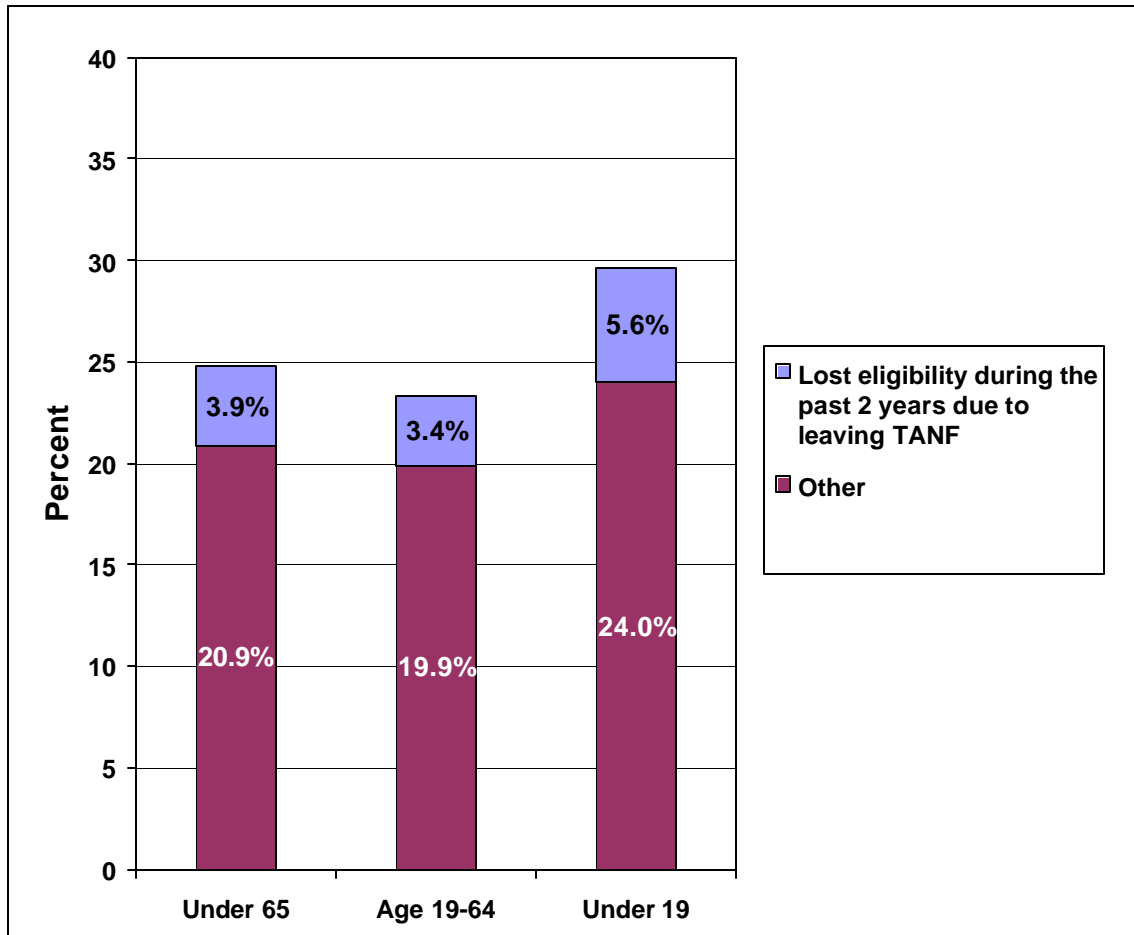
Sample size for this table = 2,114 individuals.

Table 1-15. Length of Time Without Health Coverage, Uninsured Kansans under Age 65
Corresponds to Figure 1-15

Length of Time	Percent Uninsured
Less than 1 month	6.1
1-6 months	18.1
7-12 months	8.9
1-2 years	15.8
More than 2 years	34.8
Never had health insurance	16.3

Sample size for this table = 2,114 individuals.

Figure 1-16. Percent of Uninsured Kansans under Age 65 Who Have Ever Been Enrolled in Medicaid and Those Who Lost Eligibility Due to Leaving TANF



Sample size for this figure = 2,105 individuals

Almost a quarter (24.8%) of the uninsured have ever been on Medicaid, with the highest percentage, about 29.6%, among children under age 19.

A small percentage of the uninsured have lost their Medicaid coverage in the past two years because they no longer receive Temporary Assistance for Needy Families (TANF).

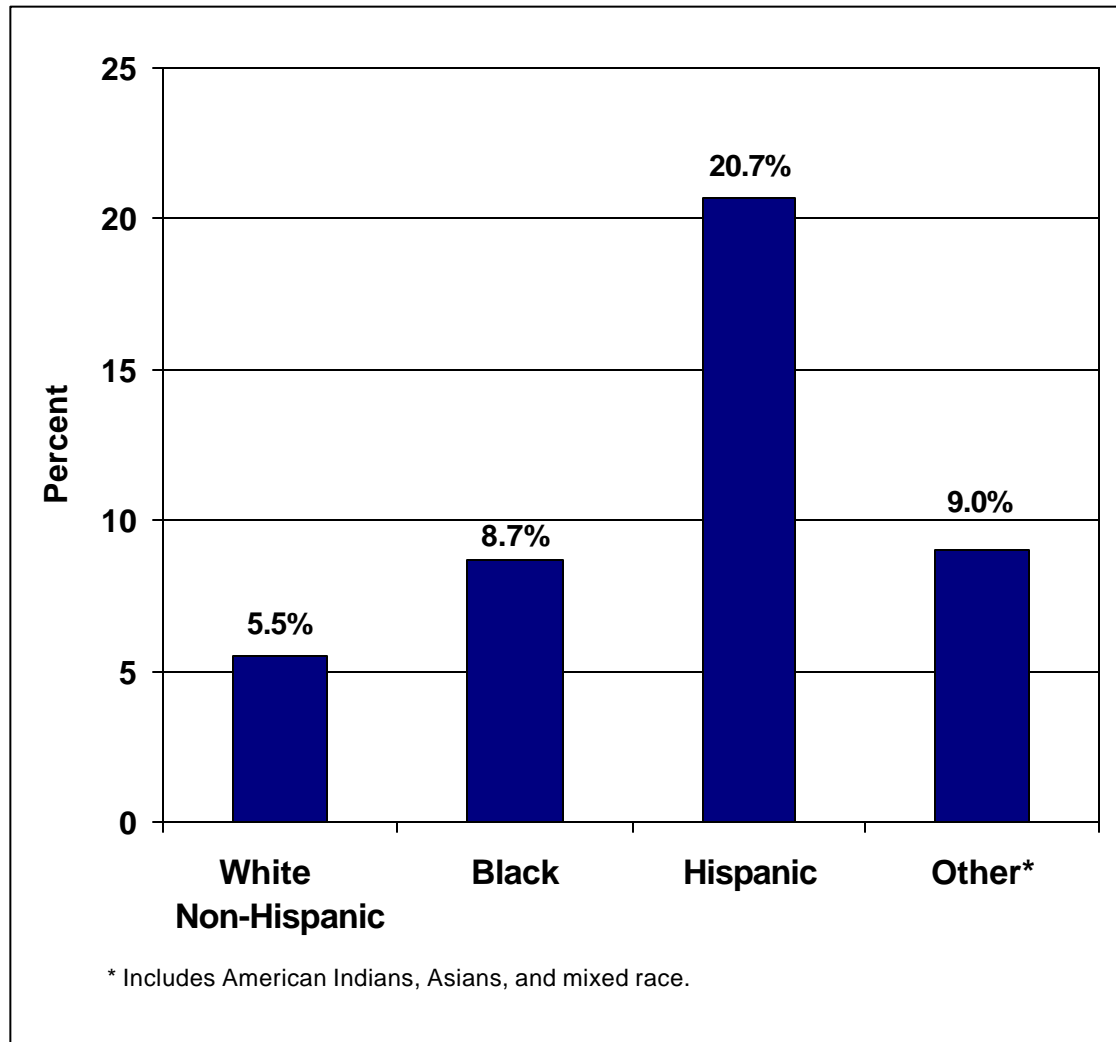
Table 1-16. Percent of Uninsured Adults in Households With Children Who Are Enrolled in Medicaid by Income as a Percent of Federal Poverty Level (FPL)

FPL	Percent Uninsured
All Incomes	41.6
100% FPL or Less	46.6
101% FPL to 150% FPL	47.4
151% FPL to 200% FPL	34.4
201% FPL to 250% FPL	34.1
251% FPL or Greater	23.7

Sample size for this table = 1,031 individuals

Note: Percentages reflect the proportion of adults with children with Medicaid in each FPL grouping who are without health insurance, and do not sum to meaningful totals.

Figure 1-17. Uninsured Kansas Children under Age 19 by Race and Ethnicity



Sample size for this figure = 7,366 individuals

Among children (less than 19 years old) the highest rate of uninsurance is 20.7%, found among the Hispanic racial category. The “Other” racial category that includes American Indians, Asians and mixed race has an uninsurance rate of 9.0%. Blacks have an uninsurance rate of 8.7%, followed by White non-Hispanics at 5.5%. All of the rates for children are less than comparable uninsurance rates for adults in the same category.

Table 1-17. Uninsured Kansas Children under Age 19 by Race and Ethnicity, Statewide and by Region

Corresponds to Figure 1-17

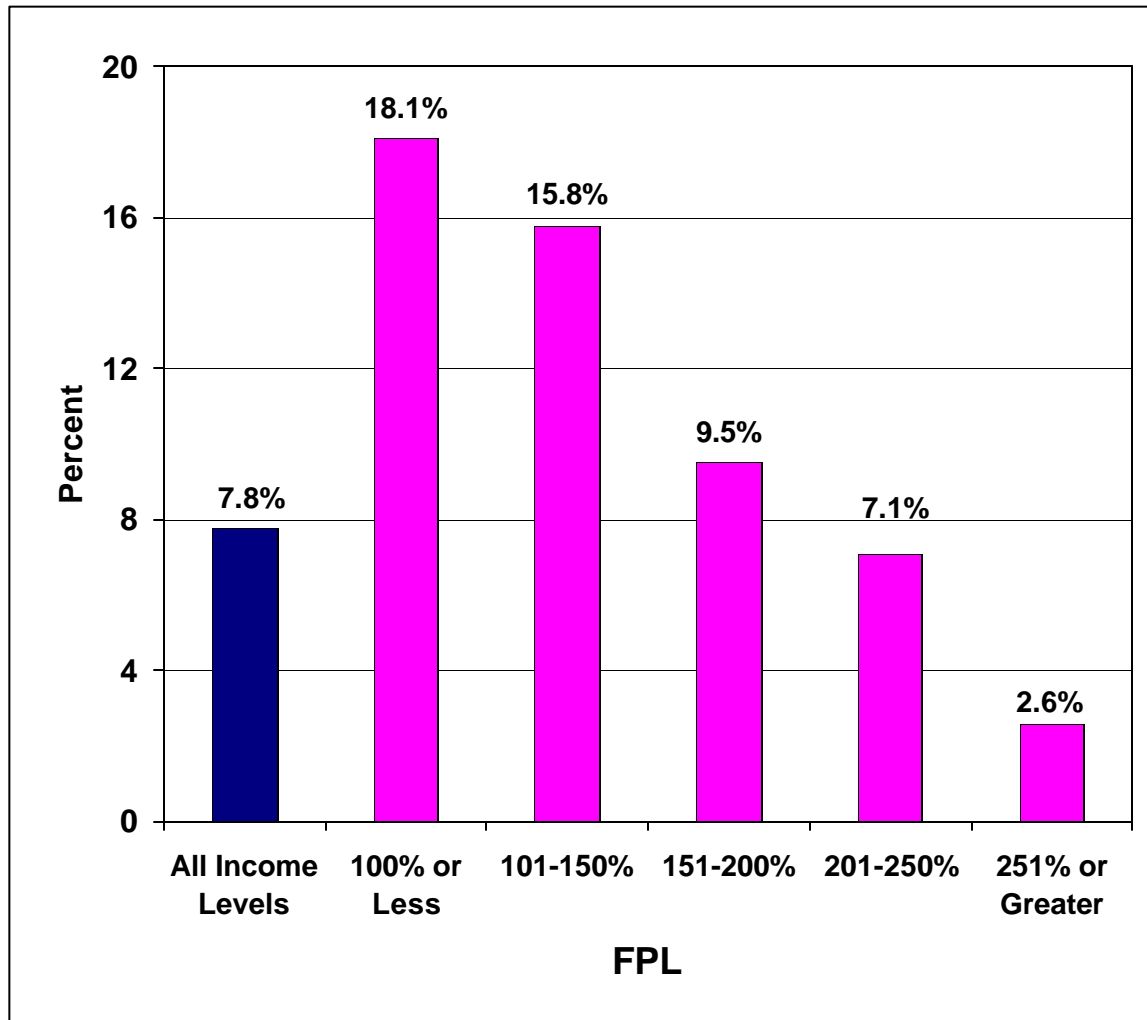
	White Non-Hispanic <19	Black < 19	Hispanic <19	Other* <19
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
Kansas	5.5	8.7	20.7	9.0
Region 1	10.0	8.7	30.2	#
Region 2	3.8	9.7	26.3	#
Region 3	4.2	4.6	11.2	#
Region 4	2.6	#	#	#
Region 5	9.0	#	13.0	#
Region 6	5.1	8.9	20.4	8.3
Region 7	6.5	#	7.8	#
Region 8	6.9	#	3.7	#
Region 9	3.4	#	#	#
Region 10	4.5	#	22.3	#

Sample size for this table = 7,366

Insufficient number of observations in this cell

*Includes American Indians, Asians and mixed race

Figure 1-18. Percent of Uninsured Kansas Children under Age 19 by Income as a Percent of Federal Poverty Level (FPL)



Among Kansas children (less than 19 years old) the highest rate of uninsurance is 18.1% among those in families living at or below 100% FPL. Uninsurance declines as income increases from that point, with only 2.6% of children lacking health insurance at incomes of 251% FPL or greater.

Sample size for this figure = 6,761 individuals

Table 1-18. Percent of Uninsured Kansas Children under Age 19 by Age Group and Federal Poverty Level (FPL)

FPL	0-5 yrs	6-11 yrs	12-18 yrs	All Children (< Age 19)
	Percent Uninsured	Percent Uninsured	Percent Uninsured	Percent Uninsured
All Income Levels	6.6	7.9	8.4	7.8
100% FPL or Less	15.2	16.7	21.1	18.1
101% FPL to 150% FPL	12.7	15.1	18.6	15.8
151% FPL to 200% FPL	5.9	7.1	13.2	9.5
201% FPL to 250%	5.6	7.0	8.0	7.1
251% FPL or Greater	2.5	3.1	2.3	2.6

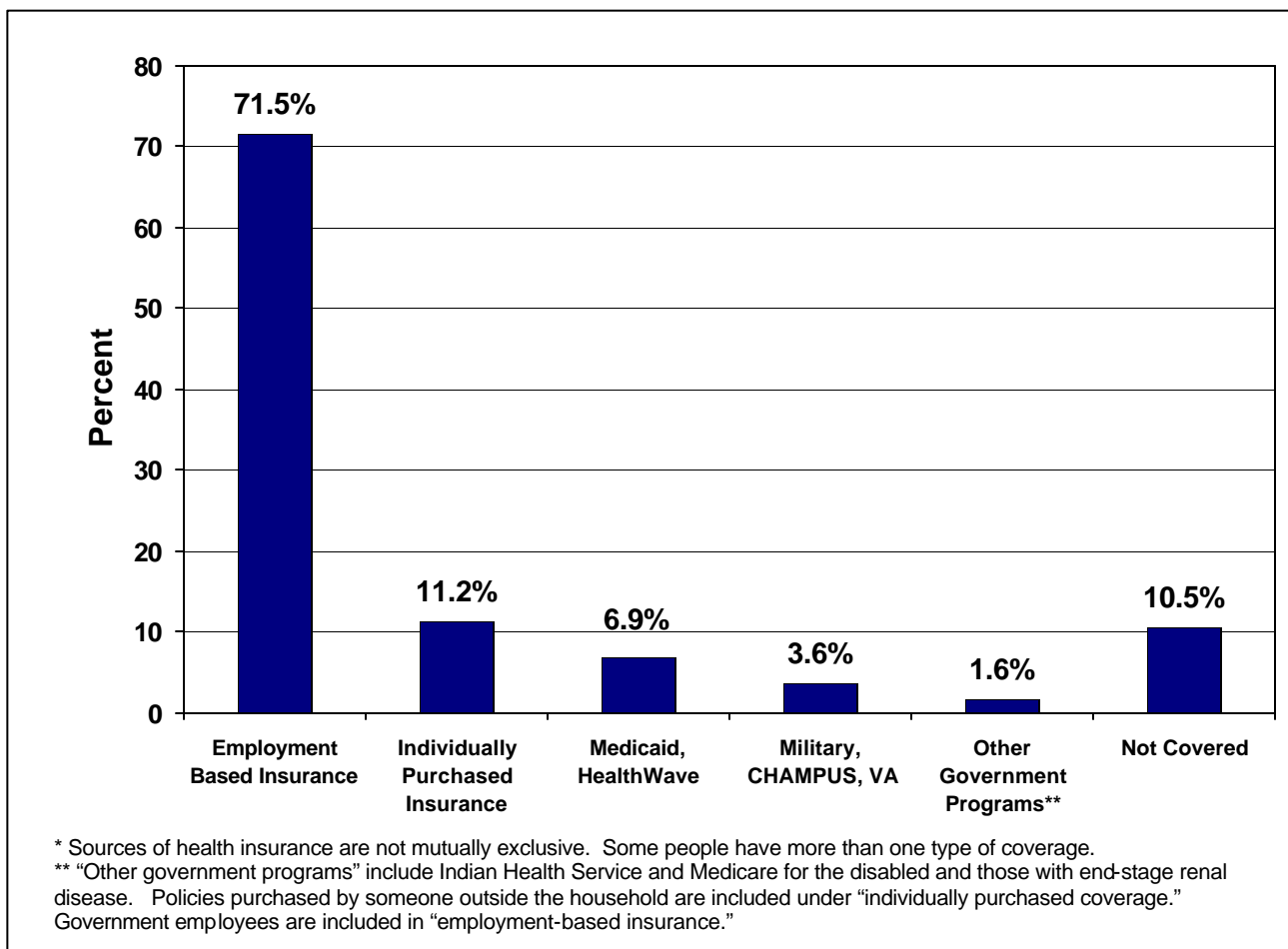
Sample size for this table = 6,726 individuals

Note: Percentages reflect the proportion of children in each cell who are without health insurance, and do not sum to meaningful totals.

Section 2

Source of Coverage

Figure 2-1. Kansans under Age 65 by Source of Health Insurance*



Sample size for this figure = 22,479 individuals

Kansans with health insurance by source:

- a) 71.5% of Kansans report that they have health insurance coverage through a current or former employer or union (other than the military).
- b) 11.2% of Kansans report that they have health insurance coverage purchased on their own and not through an employer or union.
- c) 6.9% of Kansans report that they have health insurance coverage through Medicaid or HealthWave.
- d) 3.6% of Kansans report that they have health insurance coverage through the military, CHAMPUS or VA.
- e) 1.6% of Kansans report that they are insured through other government programs (e.g., Indian Health Service, Medicare for the disabled and end-stage renal disease populations).

Table 2-1. Kansans under Age 65 by Source of Health Insurance*, Statewide and by Region
Corresponds to Figure 2-1

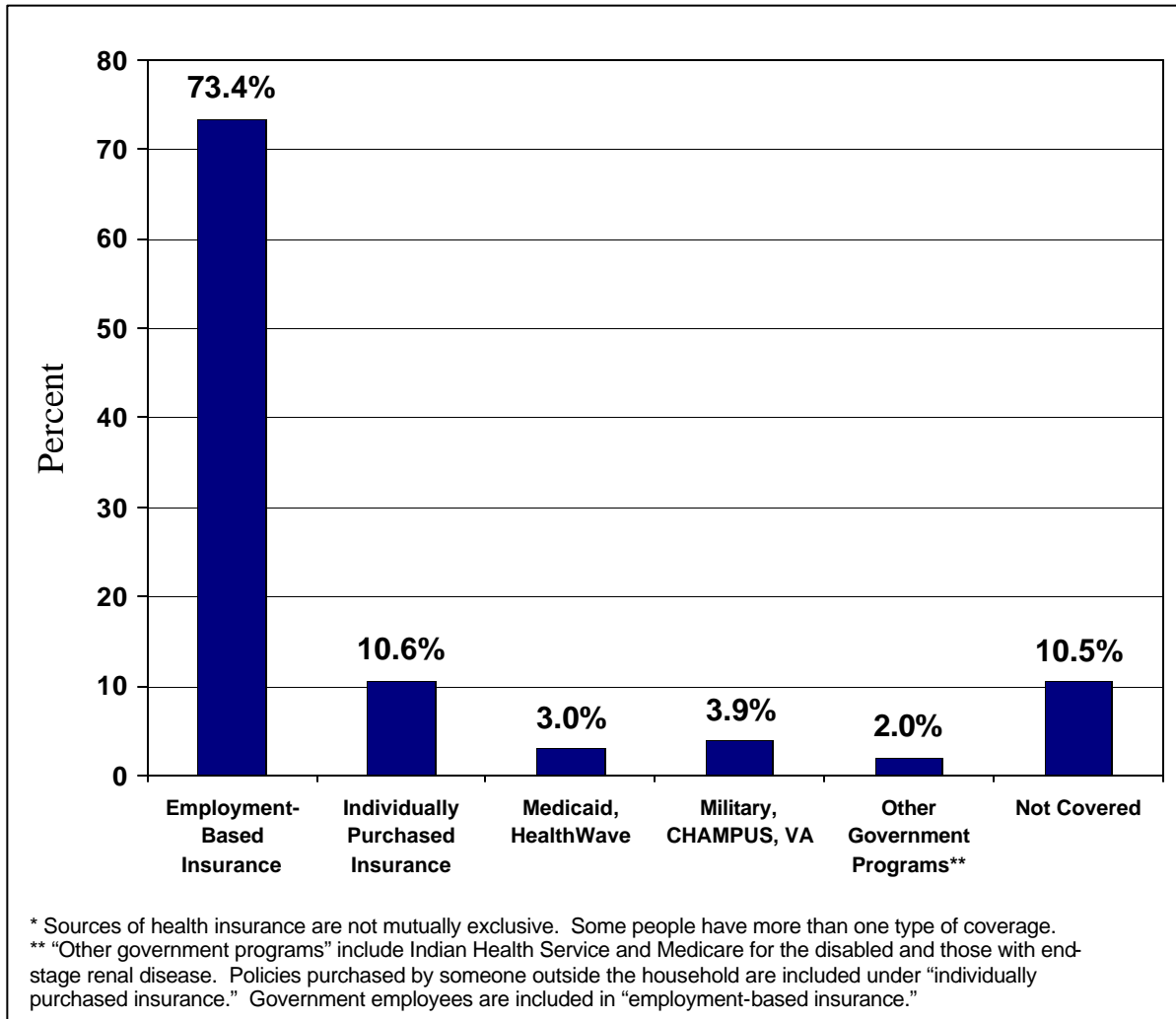
	Employment Based Insurance	Individually Purchased Insurance	Medicaid, HealthWave	Military, CHAMPUS, VA	Other Government Programs	Not Covered
	Percent	Percent	Percent	Percent	Percent	Percent
Kansas	71.5	11.2	6.9	3.6	1.6	10.5
Region 1	62.3	7.1	10.2	8.6	1.4	16.4
Region 2	84.4	8.3	2.6	0.9	1.4	5.4
Region 3	72.8	11.7	7.5	2.2	2.5	9.3
Region 4	73.0	14.3	6.3	3.5	1.1	6.7
Region 5	68.8	10.4	10.0	1.6	2.5	12.8
Region 6	72.9	9.6	6.6	4.5	1.2	11.5
Region 7	72.4	10.8	7.1	2.0	1.9	10.9
Region 8	58.7	17.5	5.7	12.8	2.1	9.9
Region 9	64.8	20.6	6.9	1.5	2.6	9.4
Region 10	63.4	13.0	10.9	1.0	0.6	16.8

Sample size for this table = 22,479 individuals

*Sources of health insurance are not mutually exclusive. Some people have more than one type of coverage.

NOTE: Other government programs include Indian Health Service and Medicare for the disabled and those with end-stage renal disease. Government workers are included in “employment-based insurance.” Policies purchased by someone outside the household are included under “individually purchased insurance.”

Figure 2-2. Kansans Age 19-64 by Source of Health Insurance*



About three-quarters of Kansas adults age 19-64 (73.4%) report that they have health insurance through a current or former employer or union (other than the military). 10.6% have individually purchased insurance. A few (3.0%) have coverage through Medicaid or HealthWave, while 2.0% are covered through other government programs.

Sample size for this figure = 14,913 individuals

Table 2-2. Kansans Age 19-64 by Source of Health Insurance*, Statewide and by Region
Corresponds to Figure 2-2

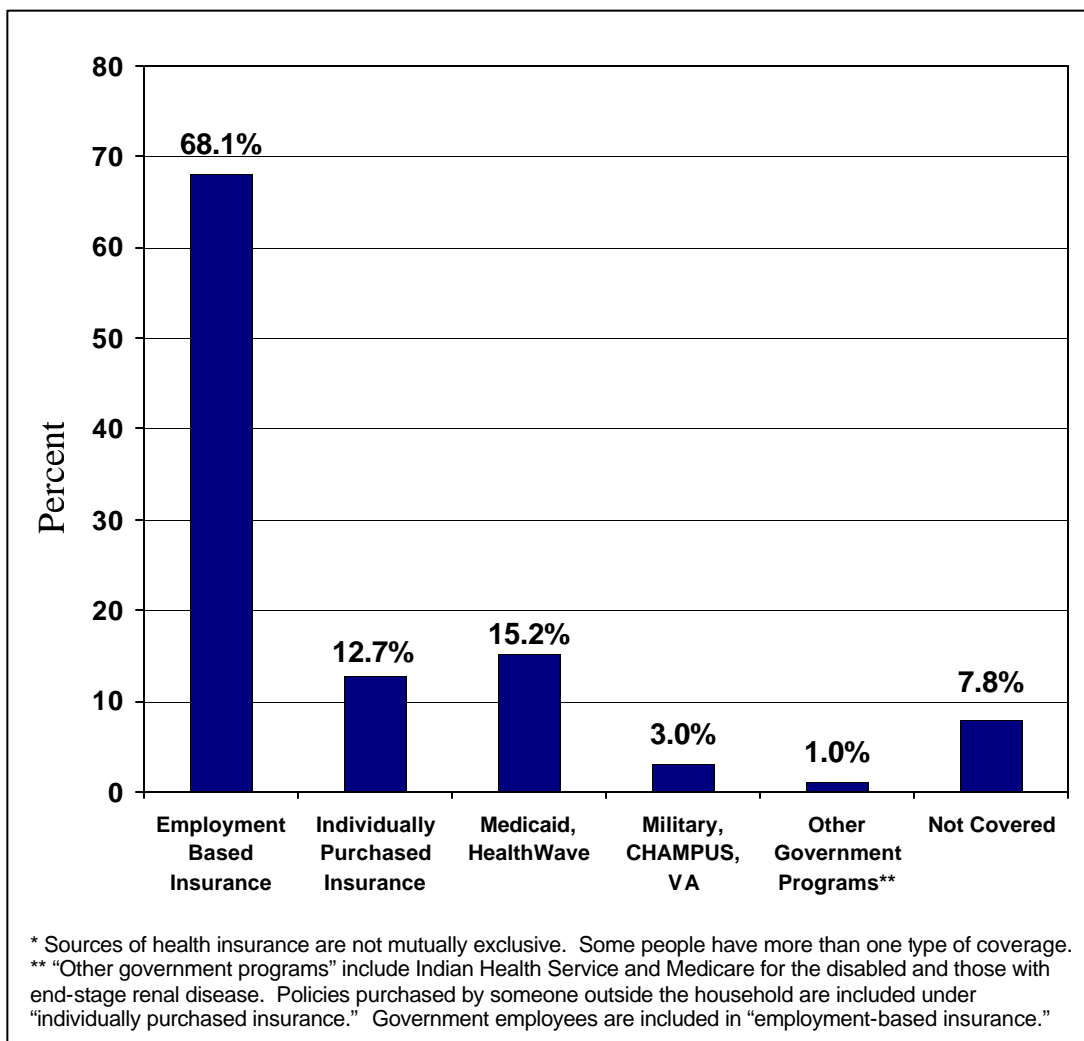
	Employment Based Insurance	Individually Purchased Insurance	Medicaid, HealthWave	Military, CHAMPUS, VA	Other Government Programs	Not Covered
	Percent	Percent	Percent	Percent	Percent	Percent
Kansas	73.4	10.6	3.0	3.9	2.0	11.8
Region 1	67.5	6.1	4.6	8.8	1.7	17.4
Region 2	85.0	7.8	1.1	1.2	1.5	5.7
Region 3	74.2	11.4	3.7	2.8	3.1	10.7
Region 4	74.6	13.1	2.9	3.6	1.2	8.5
Region 5	71.4	10.0	4.4	1.9	2.6	14.3
Region 6	74.4	8.1	3.3	5.0	1.6	13.3
Region 7	75.3	9.8	2.1	2.4	2.2	12.4
Region 8	60.4	17.6	2.6	12.3	2.5	11.0
Region 9	65.1	21.0	2.9	1.5	3.2	11.3
Region 10	65.2	12.7	3.8	1.2	0.9	19.6

Sample size for this table = 14,913 individuals

*Sources of health insurance are not mutually exclusive. Some people have more than one type of coverage.

NOTE: Other government programs include Indian Health Service and Medicare for the disabled and those with end-stage renal disease. Government workers are included in "employment-based insurance." Policies purchased by someone outside the household are included under "individually purchased insurance."

Figure 2-3. Kansas Children under Age 19 by Source of Health Insurance*



Sample size for this figure = 7,500 individuals

Kansas children (under 19) are covered by employment-based coverage at a rate slightly lower than that of all non-elderly Kansas residents: 68.1%. Region 2 has the highest rate of children with employment-based coverage at 83.5%, while Region 1 has the lowest rate at 52.4%. But participation in Medicaid and HealthWave among children is three times the rate as the general population, at 15.2%.

Table 2-3. Kansas Children under Age 19 by Source of Health Insurance*, Statewide and by Region

Corresponds to Figure 2-3

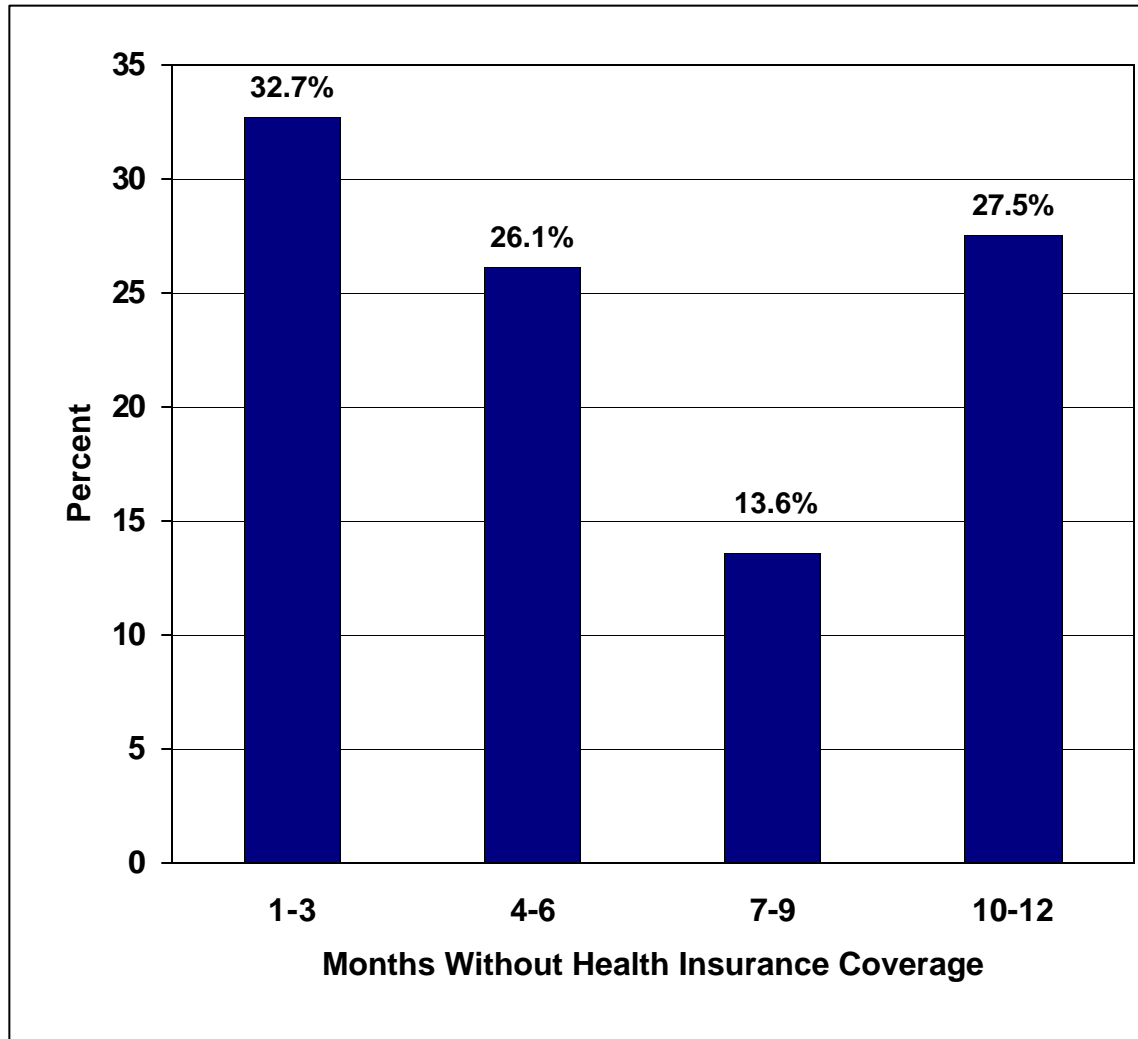
	Children <19 Employment Based Insurance Percent	Children <19 Individually Purchased Insurance Percent	Children <19 Medicaid, HealthWave Percent	Children <19 Military, CHAMPUS, VA Percent	Children <19 Other Government Programs** Percent	Children <19 Not Covered Percent
Kansas	68.1	12.7	15.2	3.0	1.0	7.8
Region 1	52.4	9.1	21.7	8.3	0.6	14.4
Region 2	83.5	9.5	5.9	0.4	1.3	5.1
Region 3	70.4	12.5	16.4	1.0	1.1	6.2
Region 4	69.7	17.1	14.0	3.4	0.7	2.6
Region 5	64.1	11.4	21.3	0.8	2.3	9.8
Region 6	70.6	12.4	13.1	3.1	0.4	8.1
Region 7	68.4	12.9	17.2	1.1	1.4	7.7
Region 8	55.1	17.5	13.3	14.4	1.3	6.9
Region 9	64.6	19.6	16.7	1.4	1.2	4.8
Region 10	60.8	13.8	23.2	0.7	#	11.9

Sample size for this table = 7,500 individuals

*Sources of health insurance are not mutually exclusive. Some people have more than one type of coverage.

NOTE: Other government programs include Indian Health Service and Medicare for the disabled and those with end-stage renal disease. Government workers are included in “employment-based insurance.” Policies purchased by someone outside the household are included under “individually purchased insurance.”

Figure 2-4. Percent Distribution of Months Without Health Insurance Coverage for Currently Insured Kansans Who Lacked Continuous Coverage Over the Past 12 Months



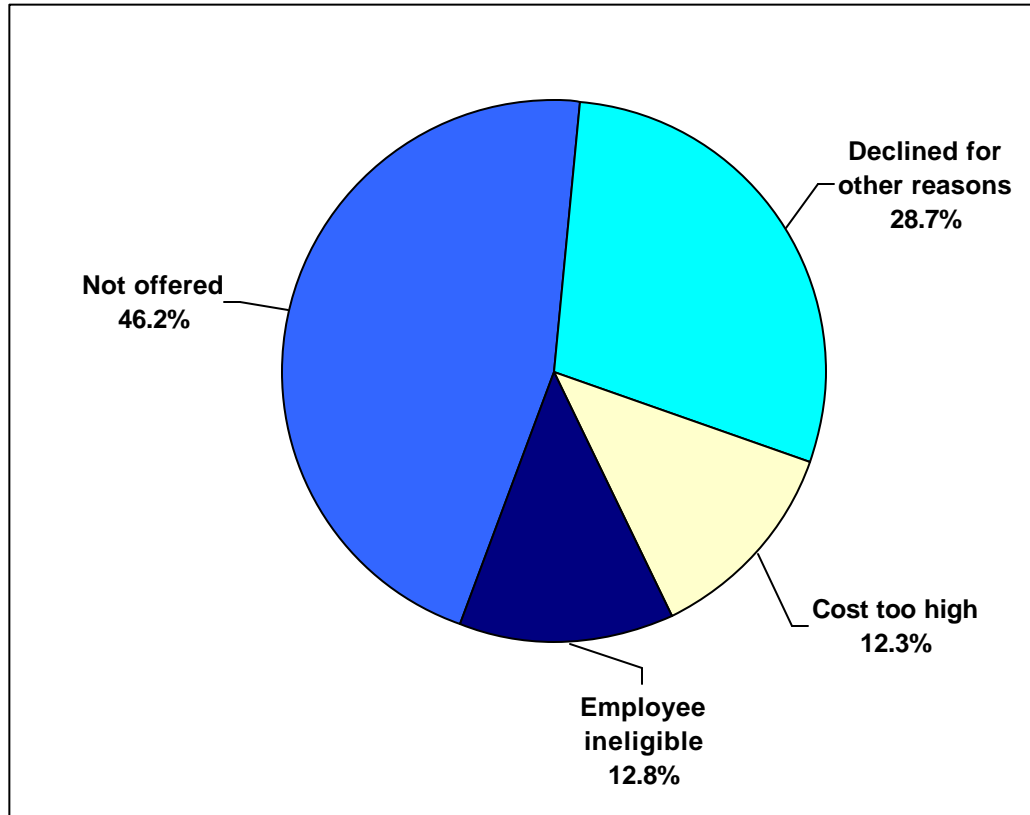
Among currently insured Kansans who did not have continuous health insurance coverage over the past year, approximately 32.7% were uninsured for three months or less. 26.1% were uninsured for between four and six months. Only 13.6% were uninsured for between seven and nine months, while 27.5% were uninsured for between ten and twelve months.

Sample size for this figure = 773 individuals

Section 3

Employment-Based Health Insurance

Figure 3-1. Availability of Employment-Based Health Insurance for Uninsured Employed Kansans Age 18-64



About 46.2% of uninsured employed Kansans age 18-64 years have employers who do not offer health insurance. 12.8% report that their employers offer health insurance, but indicate that they are not eligible for that coverage. 12.3% report that their employer offers insurance and that they are eligible, but that the employee premium is too high.

Sample size for this figure = 1,124 individuals

Table 3-1. Availability of Employment-Based Health Insurance for Uninsured Employed Kansans Age 18-64, Statewide and by Region

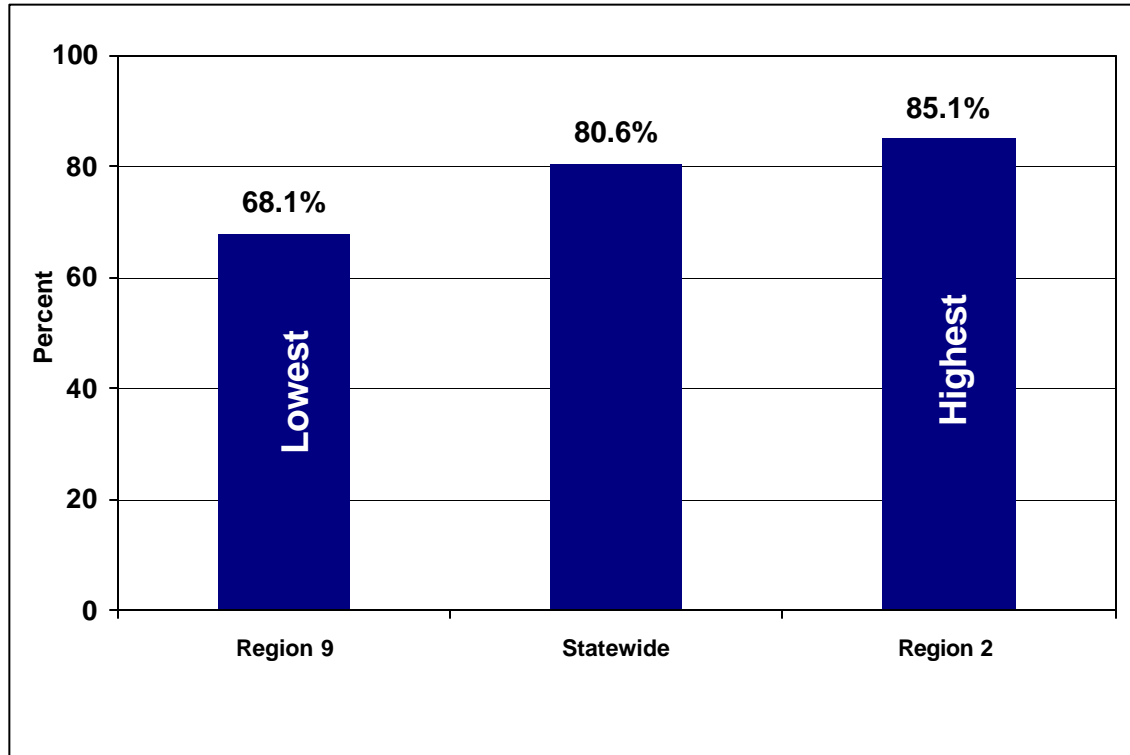
Corresponds to Figure 3-1

	Not Offered by Employer	Employer Offers; Employee Ineligible	Employer Offers; Cost of Employee Share Too High	Employer Offers; Other Reason to Decline
	Percent	Percent	Percent	Percent
Kansas	46.2	12.8	12.3	28.7
Region 1	49.3	9.9	14.6	26.3
Region 2	34.1	14.2	5.6	46.1
Region 3	44.2	19.3	9.1	27.4
Region 4	56.1	11.8	11.6	20.5
Region 5	50.8	13.3	11.7	24.2
Region 6	44.2	12.5	15.9	27.4
Region 7	50.2	8.8	16.5	24.5
Region 8	45.4	19.9	12.0	22.7
Region 9	51.3	4.6	8.4	35.8
Region 10	44.6	11.2	11.4	32.8

Sample Size for this table = 1,124

Note: Percentages reflect the proportion of employees in each group who reported offers coverage or not, and do not sum to meaningful totals.

Figure 3-2. Percent of Employed Kansans Age 18-64 Who Report that Their Employer Offers Health Insurance Coverage



Across the state, 80.6% of employed Kansans report that their employer offers health insurance coverage. This ranges from a low of 68.1% in Region 9 to a high of 85.1% in Region 2.

Sample size of this graph = 10,852 individuals

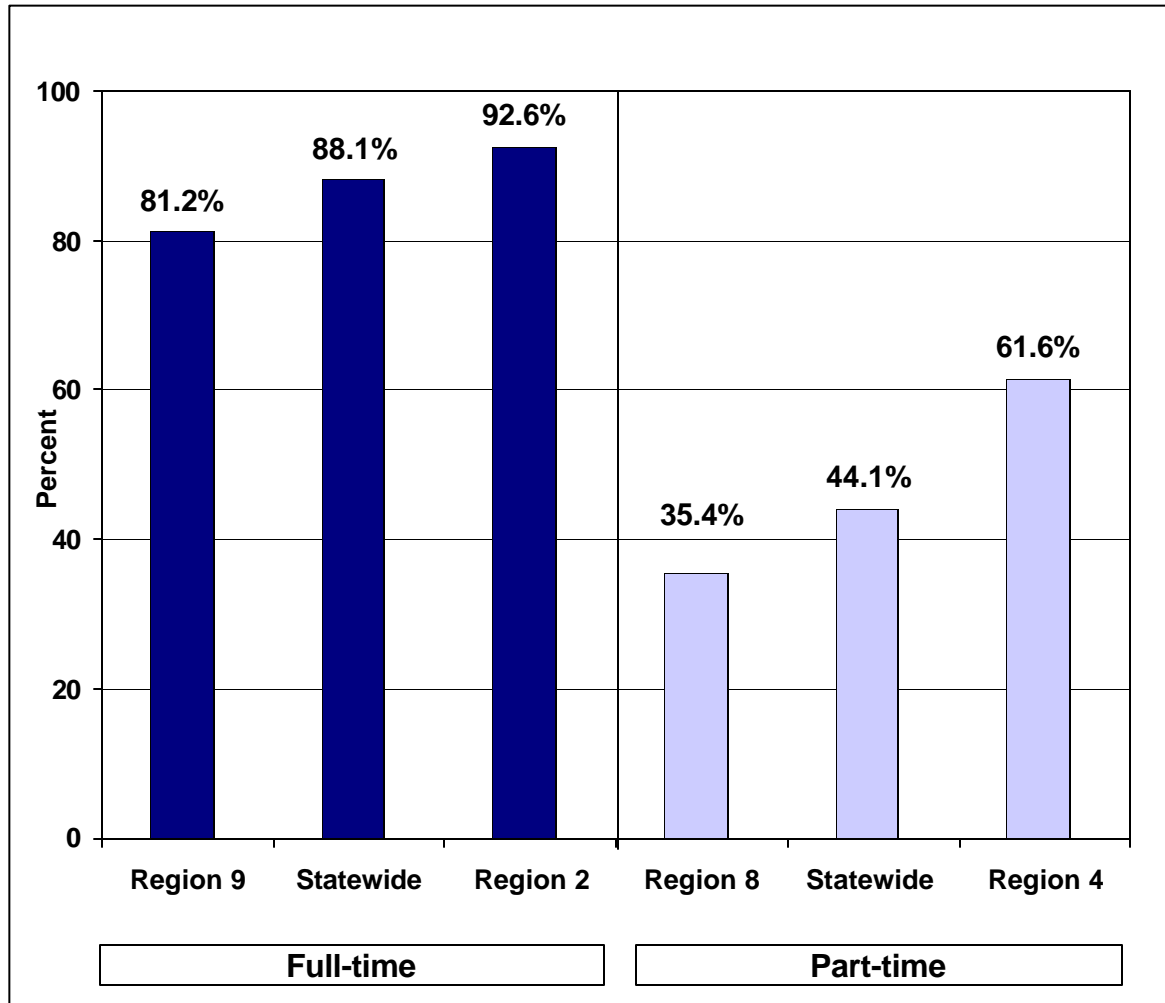
Table 3-2. Percent of Employed Kansans Age 18-64 Who Report that Their Employer Offers Health Insurance Coverage, Statewide and by Region

Employer Offers Coverage	
Percent	
Kansas	80.6
Region 1	81.6
Region 2	85.1
Region 3	83.5
Region 4	79.2
Region 5	77.5
Region 6	83.9
Region 7	80.5
Region 8	78.0
Region 9	68.1
Region 10	72.5

Sample size for this table = 10,852 individuals

Note: Percentages reflect the proportion of employed Kansas residents age 18-64 in each group who reported that their employer offers coverage, and do not sum to meaningful totals.

Figure 3-3. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Full-Time and Part-Time Employment, Statewide and by Range of Geographic Variability

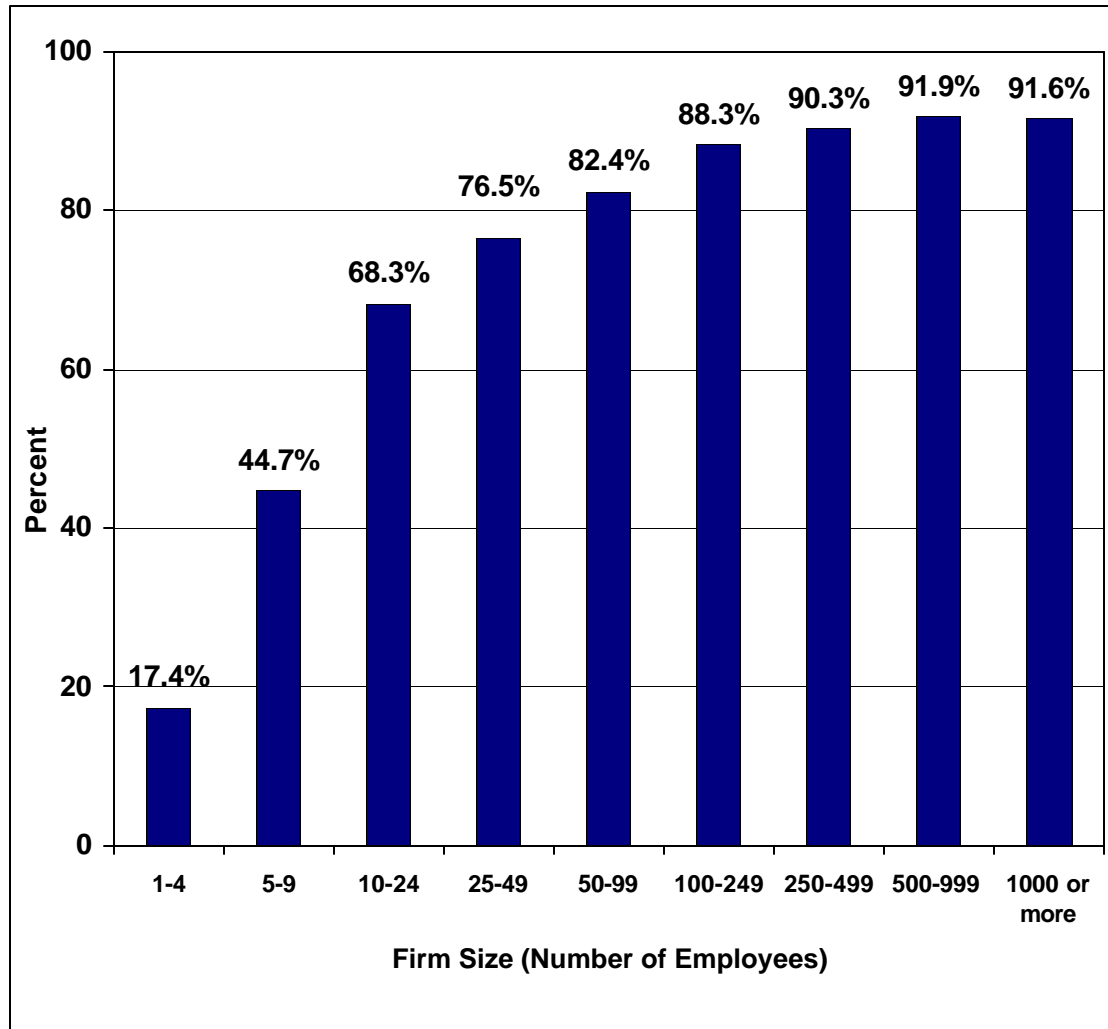


Across the state, 88.1% of persons employed full-time (35 or more hours per week) report that their employer or union offers a health insurance plan to at least some of their employees. This rate varies only from 81.2% in Region 9 to 92.6% in Region 2.

About 44.1% of persons employed less than full-time (less than 35 hours per week) report that their employer or union offers a health insurance plan to at least some of their employees. This ranges from a low of 35.4% in Region 8 to a high of 61.6% in Region 4.

Sample size for this figure = 8,238 full-time workers, 1,177 part-time workers

Figure 3-4. Percent of Employed Kansans Age 18-64 Offered Employment-Based Health Insurance, by Their Employer's Firm Size



Sample size for this figure = 9,705 individuals

Employees of larger employers are more likely to be offered health insurance than those who work for smaller firms. Statewide, 91.6% of individuals who work for firms with 1,000 or more employees report that their employer offers health insurance to at least some of their employees. By contrast, only 17.4% of those in firms with four or fewer employees report that their employer offers health insurance to at least some of their employees. The percent rises with increasing firm size, with the percentage topping 90% for firms with 250 or more employees.

Table 3-3. Percent of Employed Kansans Age 18-64 Offered Employment-Based Health Insurance, by Their Employer's Firm Size, Statewide and by Region

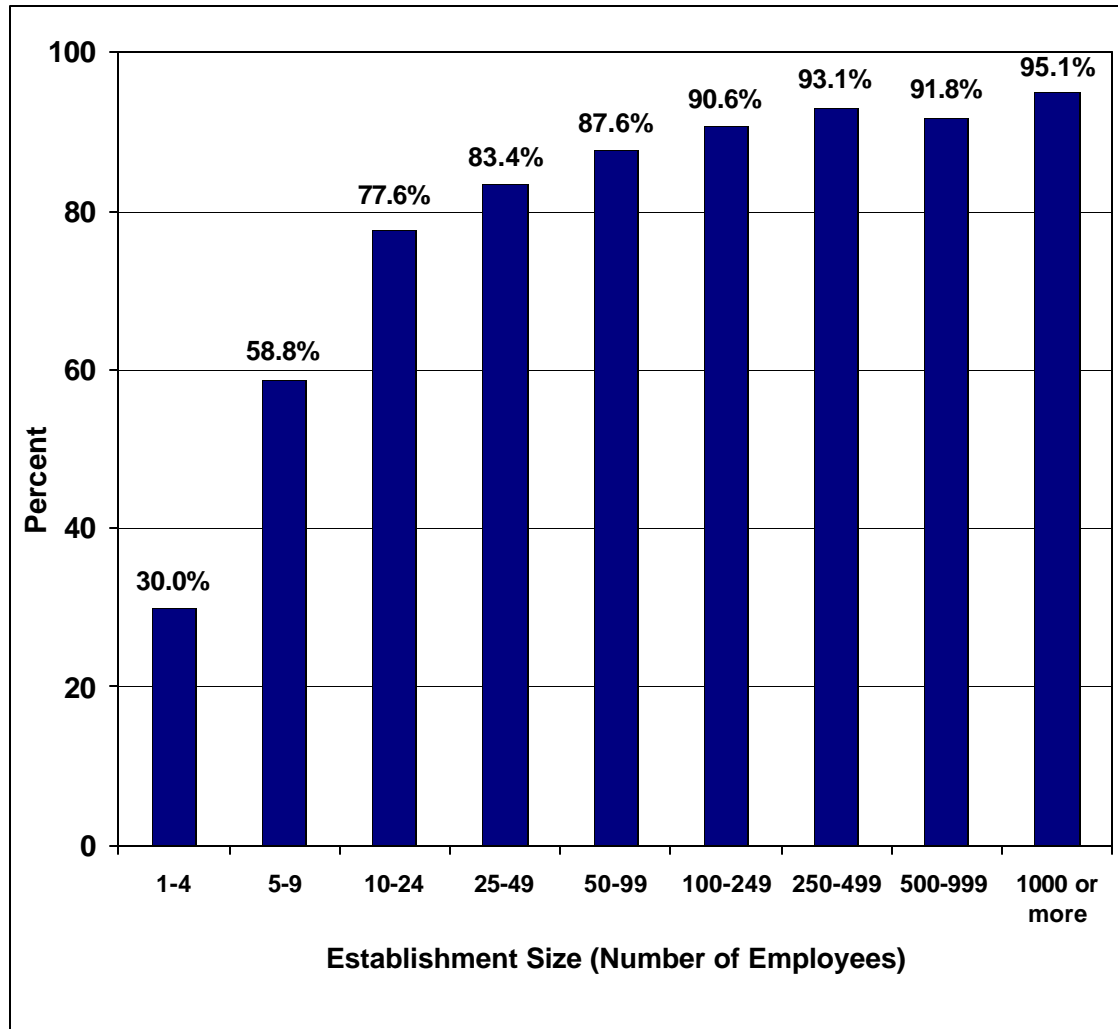
Corresponds to Figure 3-4

	1-4 Percent	5-9 Percent	10-24 Percent	25-49 Percent	50-99 Percent	100-249 Percent	250- 499 Percent	500- 999 Percent	1000 or more Percent
Kansas	17.4	44.7	68.3	76.5	82.4	88.3	90.3	91.9	91.6
Region 1	25.0	38.3	68.3	79.5	76.1	85.2	95.2	91.9	92.8
Region 2	17.8	46.5	75.8	75.7	86.4	87.7	90.1	93.4	94.9
Region 3	19.2	55.7	58.4	77.8	82.0	84.8	94.5	94.9	88.6
Region 4	17.7	38.1	80.3	79.3	80.8	93.3	96.9	95.5	93.9
Region 5	14.2	53.1	65.6	74.9	79.0	85.4	85.6	95.1	92.4
Region 6	15.3	41.3	59.4	75.8	81.6	91.5	93.8	91.0	92.5
Region 7	19.5	40.5	73.1	81.1	82.8	92.4	89.4	87.9	90.5
Region 8	15.3	49.4	73.6	77.2	82.4	81.8	80.3	86.6	84.8
Region 9	15.8	43.0	59.5	72.8	79.1	89.2	96.2	89.7	84.5
Region 10	17.4	44.5	65.6	70.1	89.9	87.9	80.3	87.1	87.3

Sample size for this table = 9,705 individuals

Note: Percentages reflect the proportion of employed Kansas residents age 18-64 in each category who were offered insurance by their employer, and do not sum to meaningful totals.

Figure 3-5. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer, by Their Employer's Establishment Size



Sample size for this graph = 10,164 individuals

Employees of larger employers are more likely to be offered insurance than those who work for smaller establishments. Statewide, 95.1% of individuals who work for establishments with 1,000 or more employees report that their employer offers health insurance to at least some of their employees. By contrast, only 30% of those in establishments with four or fewer employees report that their employer offers health insurance to at least some of their employees. The percentage rises with increasing establishment size, with the percentage topping 90% for establishments with 100 or more employees.

Table 3-4. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer, by Their Employer's Establishment Size, Statewide and by Region

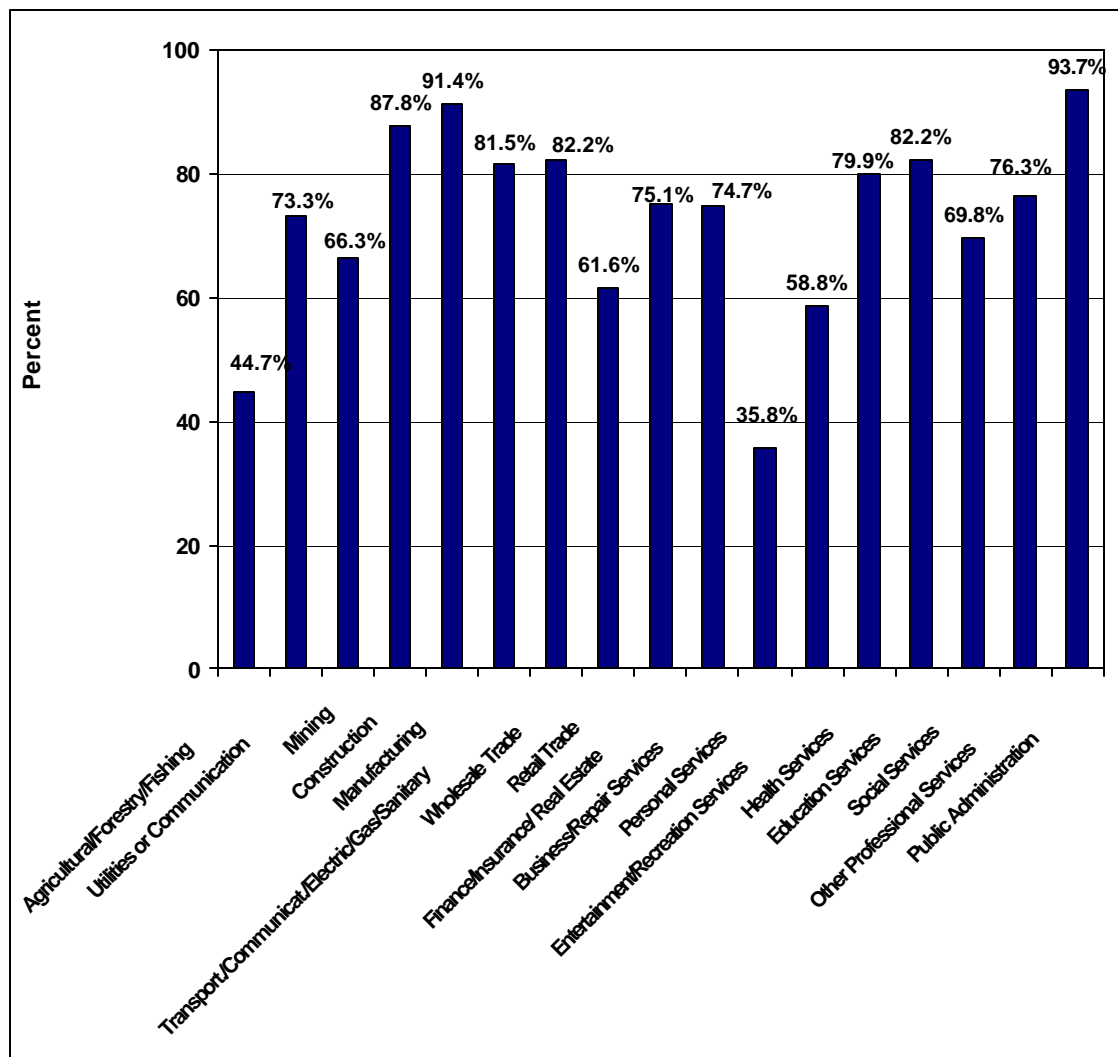
Corresponds to Figure 3-5

Number of Employees	1-4	5-9	10-24	25-49	50-99	100-249	250- 499	500- 999	1000 or more
	Percent	Percent	Percent	Percent	Percent	Percent	Percent	Percent	Percent
Kansas	30.0	58.8	77.6	83.4	87.7	90.6	93.1	91.8	95.1
Region 1	33.4	43.3	81.0	92.4	82.0	90.6	96.3	95.8	96.0
Region 2	32.4	58.5	80.1	90.0	92.9	89.8	96.0	95.5	93.4
Region 3	35.3	63.5	67.1	81.0	87.6	88.2	97.8	85.6	93.3
Region 4	23.1	63.8	88.6	84.5	85.9	94.7	99.1	94.8	100.0
Region 5	25.1	67.9	77.0	86.1	82.1	89.4	92.0	93.9	94.3
Region 6	30.0	57.2	74.2	78.7	89.9	94.1	86.7	92.2	97.7
Region 7	33.1	55.6	82.7	82.2	85.0	90.8	89.9	87.4	95.4
Region 8	27.9	61.2	78.9	79.3	87.2	83.9	77.1	89.6	94.7
Region 9	25.4	58.2	73.0	74.7	90.7	95.7	92.0	85.1	80.6
Region 10	33.7	56.3	74.1	81.0	86.5	90.0	100.0	88.8	87.4

Sample size for this table = 10,164 individuals

Note: Percentages reflect the proportion of employed Kansas residents age 18-64 in each category who were offered insurance by their employer, and do not sum to meaningful totals.

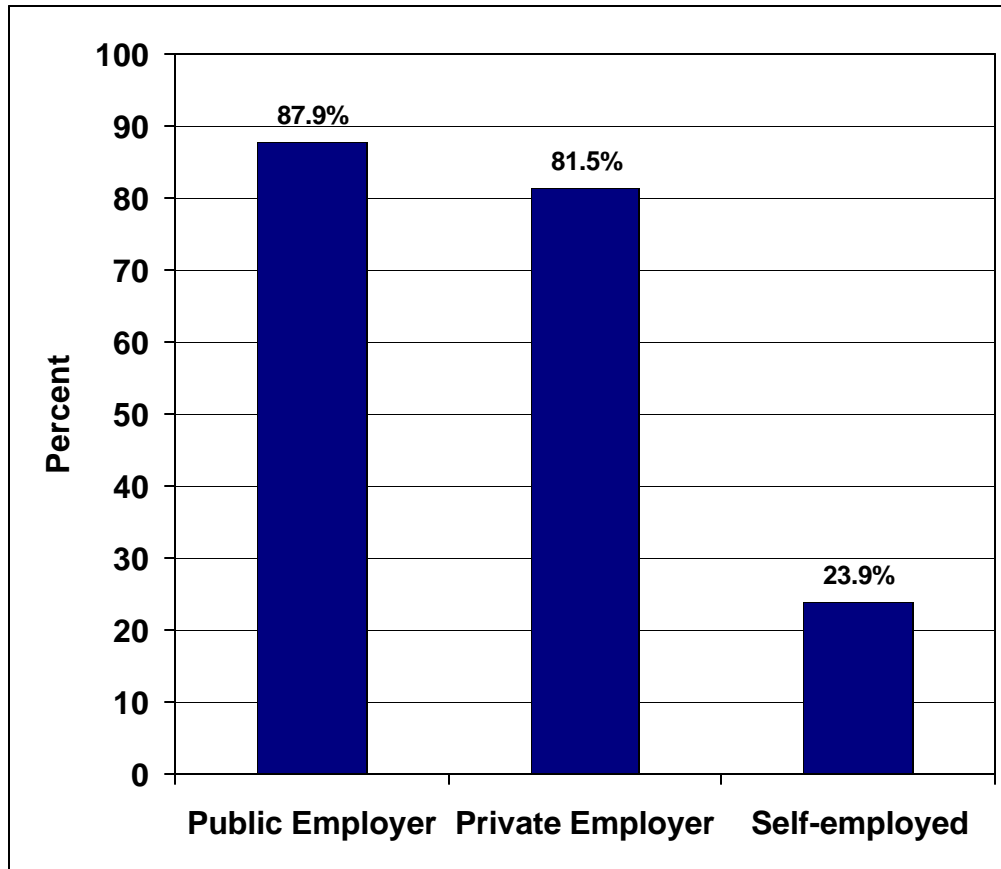
Figure 3-6. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Type of Industry



Employees in Personal Services (barbers, child care, dry cleaners, etc.) are least likely to report that their employer offers health insurance (35.8%), in part because these sectors have many self-employed people and those working part-time. The highest rates were found in Public Administration (93.7%), Manufacturing (91.4%), and Construction (87.8%). On the other hand, workers in Agriculture (44.7%), Entertainment and Recreation Services (58.8%) and Retail Trade (61.6%) report relatively low offers of employment-based health insurance.

Sample size for this graph = 10,730 individuals

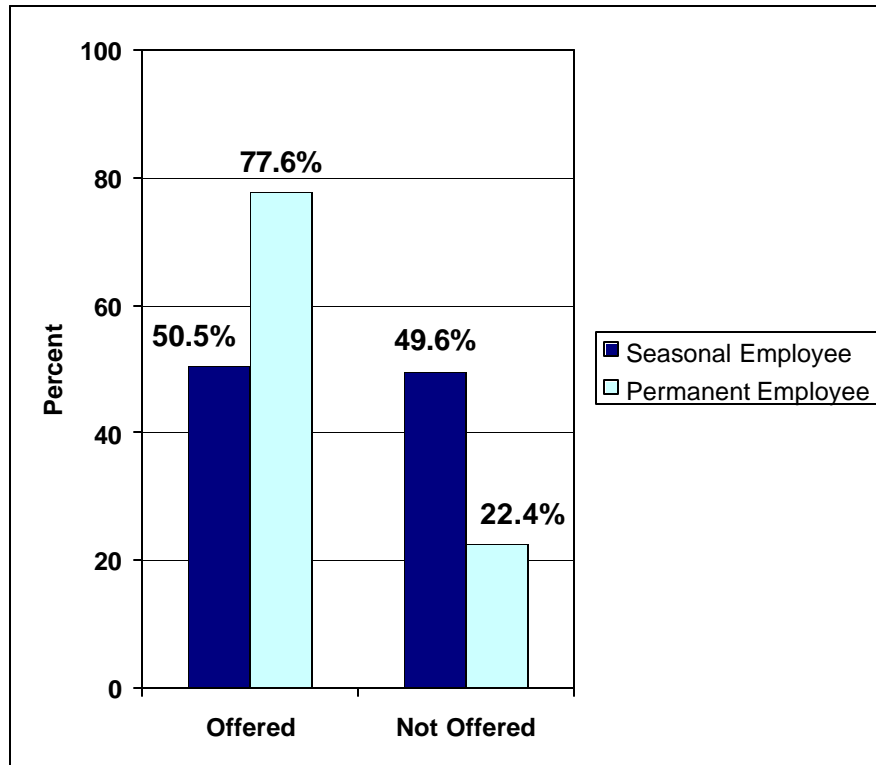
Figure 3-7. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Employer Sector



Employees who work for public employers are more likely to report that their employer offers health insurance (87.9%) than employees who work for private employers (81.5%). Less than a quarter of those who are self-employed report that they have health insurance through their businesses.

Sample size for this figure = 10,546 individuals

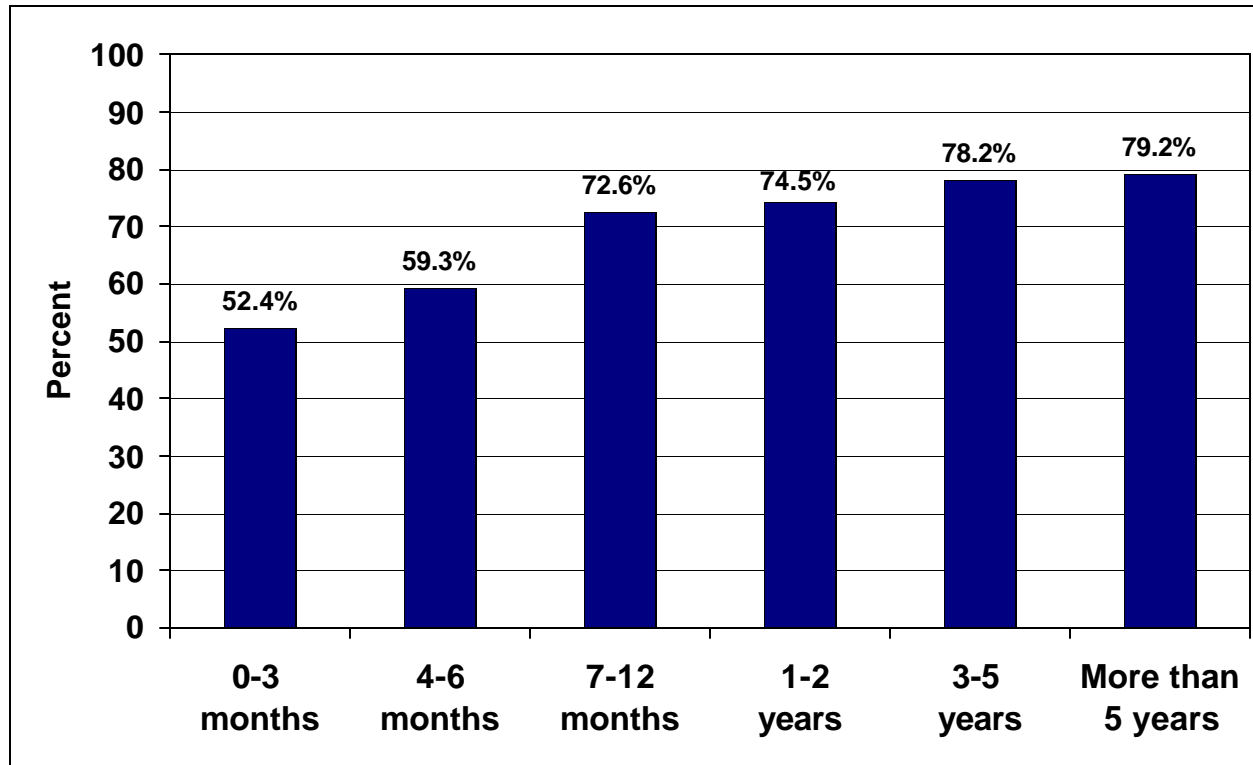
Figure 3-8. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Employment Seasonal Status



Sample size for this figure is 10,784 individuals

Permanent employees are more likely to report that they are offered health insurance by their employer (77.6%) than seasonal employees (employees whose jobs get filled only during certain parts of the year). About half of seasonal employees (49.6%) are likely to report that they are not offered health insurance by employers.

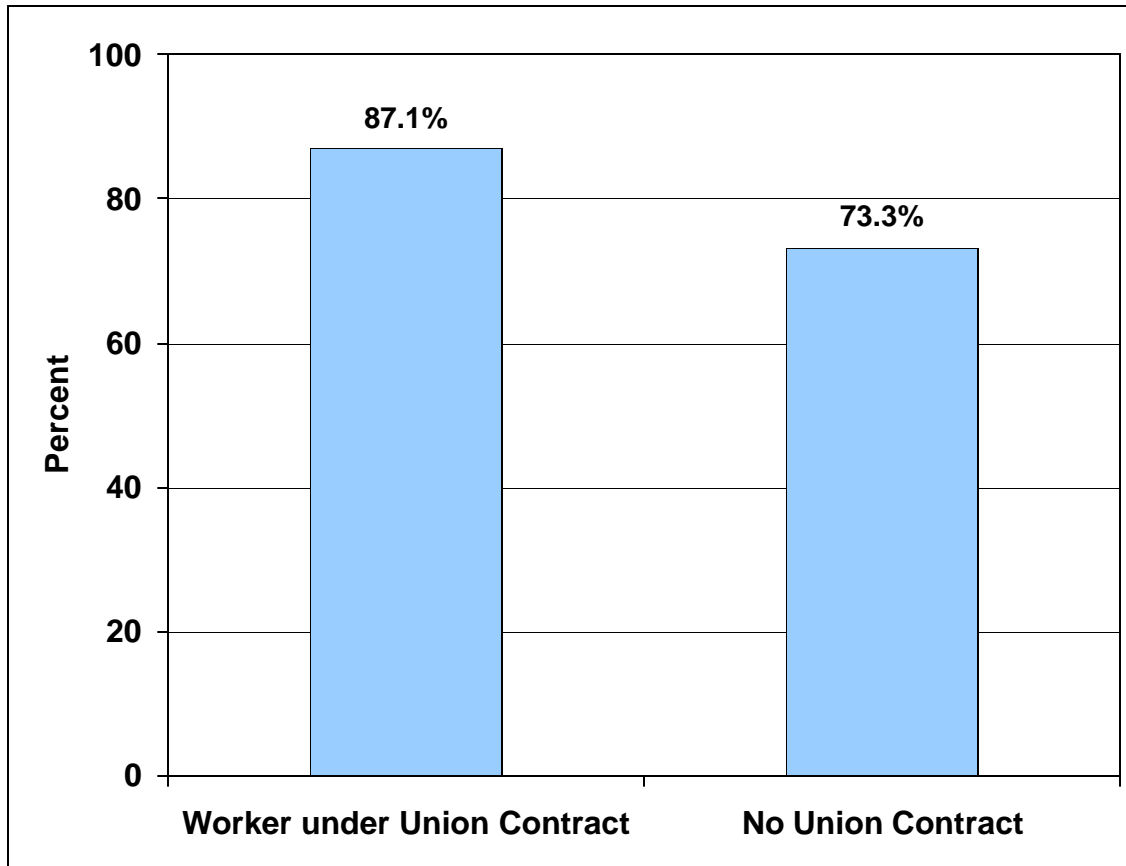
Figure 3-9. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Length of Employment



Sample size for this figure = 10,747 individuals

Employees who have been on the job longer are more likely to report that they have been offered health insurance than those who have less tenure. Over 70% of Kansans who have been employed for more than seven months report that they have been offered health insurance by their employer.

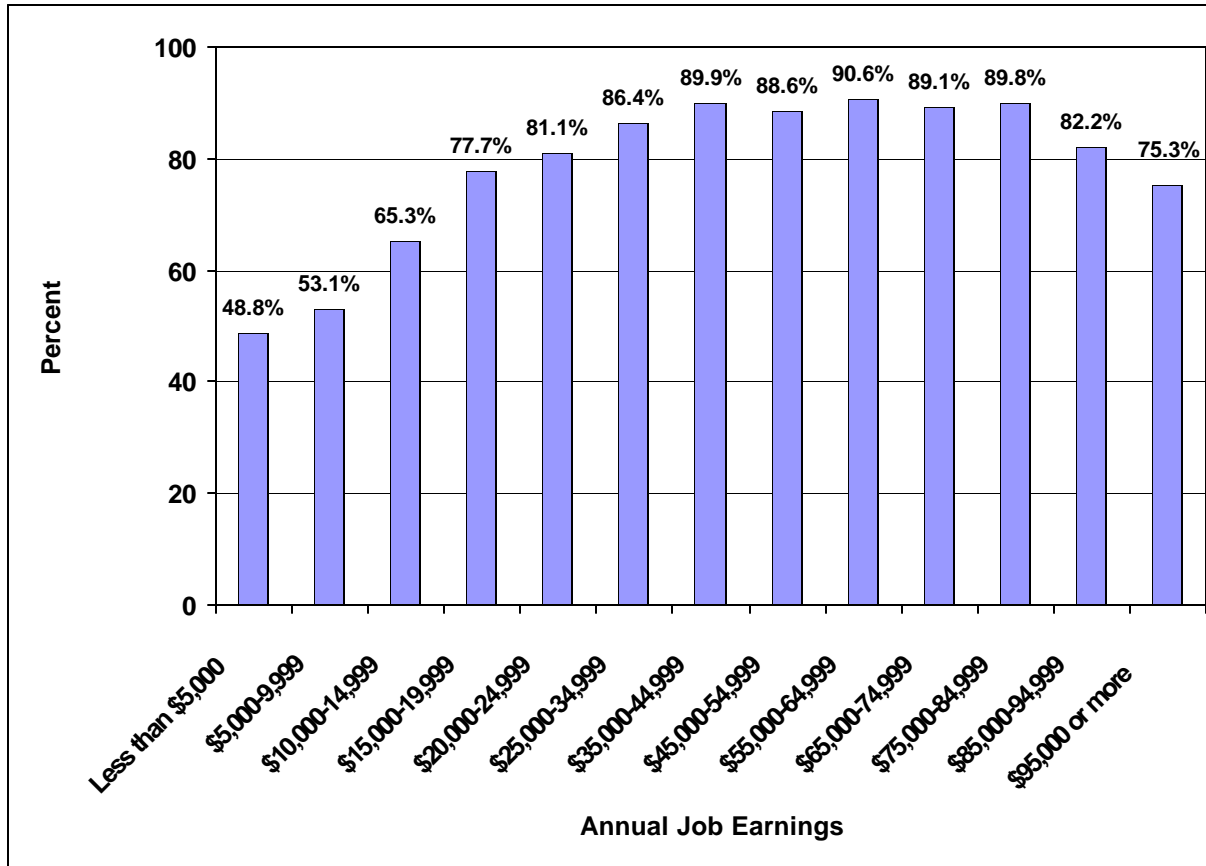
Figure 3-10. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Union Contract



Kansans employed under union contract are more likely to report that their employers offer some health insurance (87.1%) than employees without a union contract (73.3%).

Sample size for this figure = 10,456 individuals

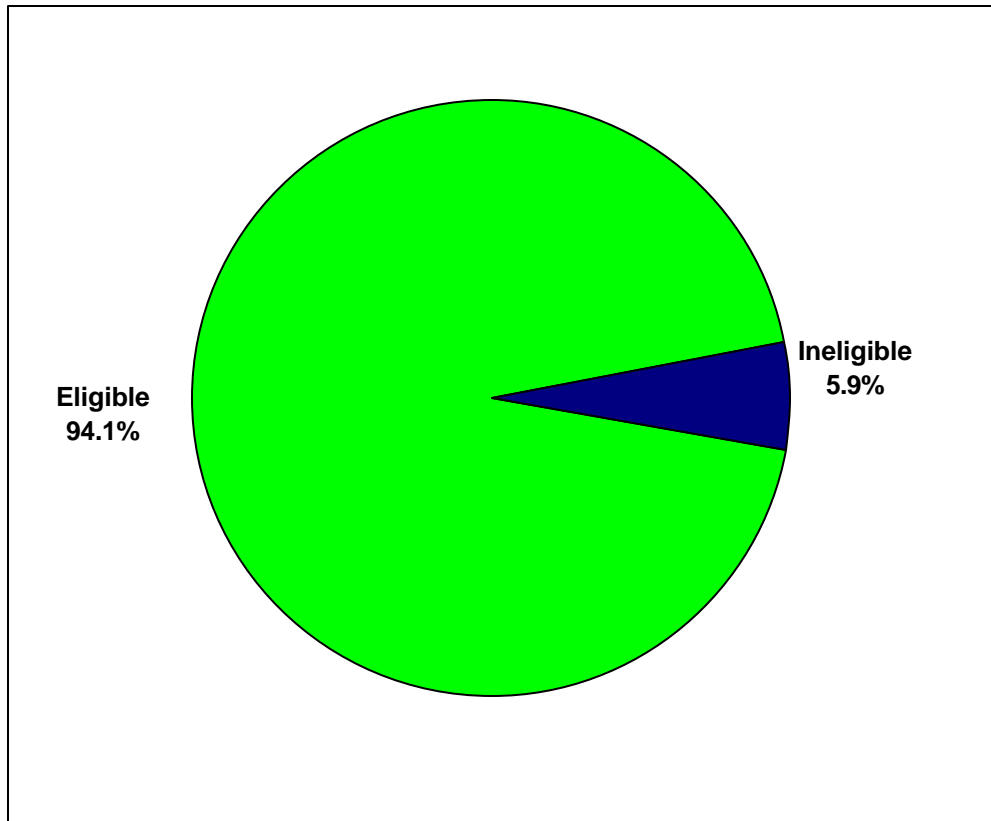
Figure 3-11. Percent of Employed Kansans Age 18-64 Whose Employer Offers Health Insurance to At Least Some of Their Employees, by Job Earnings



In general, workers with higher job earnings are more likely to report that their employers offer health insurance. 48.8% of those earning under \$5,000 annually report that their employers offer health insurance, while 81.1%-90.6% of employees earning between \$20,000 and \$94,999 a year said that their employers offer health insurance coverage to some of their employees. It is interesting to note that 75.3% of workers earning above \$95,000 report that their employers offer health insurance.

Sample size for this figure = 8,651 individuals

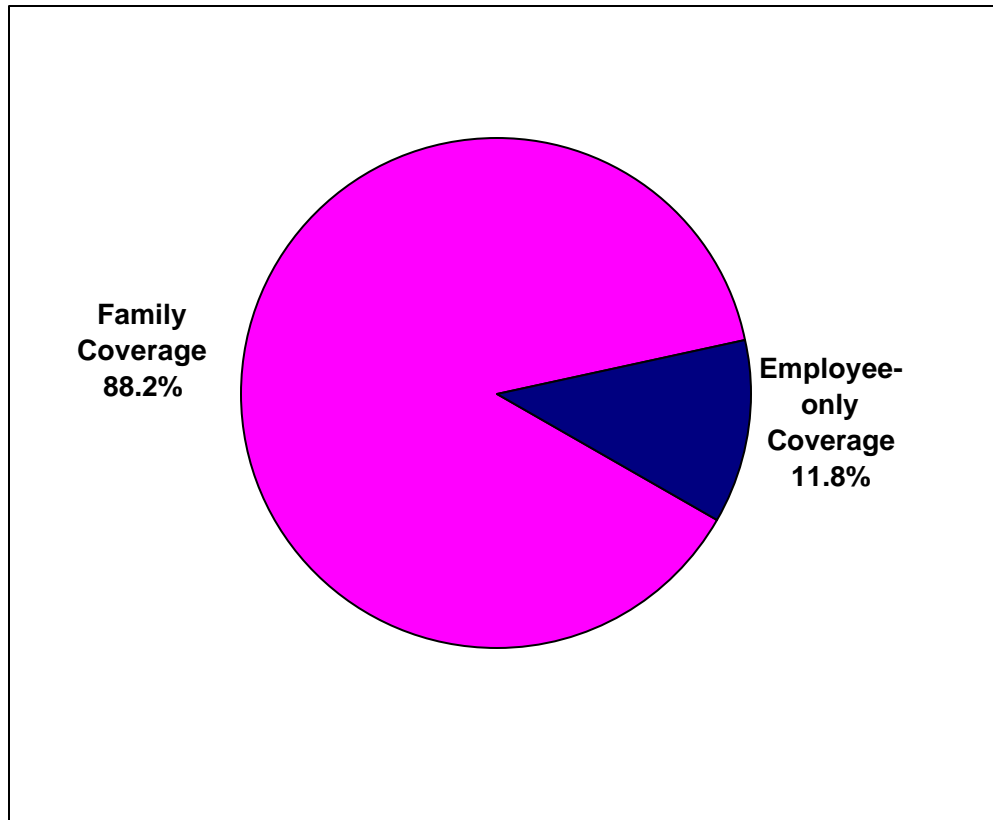
Figure 3-12. Eligibility for Health Insurance Coverage among Kansans Age 18-64 Whose Employer Offers Health Insurance



It would appear that almost all of those employers who offer health insurance to any of their employees offer it to all of their employees. The vast majority (94.1%) of survey participants whose employers offer health insurance to at least some of their employees are eligible to enroll in this insurance. Only 5.9% report that they are ineligible for such insurance.

Sample size for this figure = 8,589 individuals

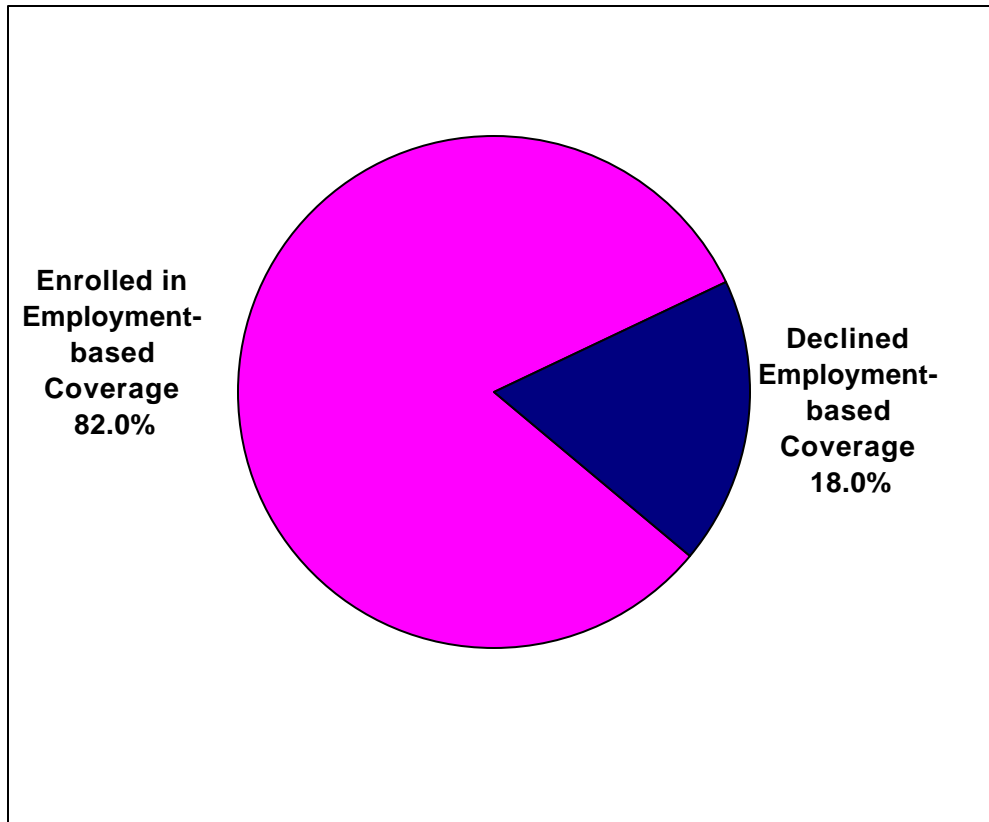
Figure 3-13. Offers of Employment-Based Health Insurance Coverage: Family Coverage vs. Employee-Only Coverage



Among Kansas residents eligible for employment-based insurance, 88.2% report that this coverage is family coverage while 11.8% report that this coverage is employee-only coverage.

Sample size for this figure = 7,939 individuals

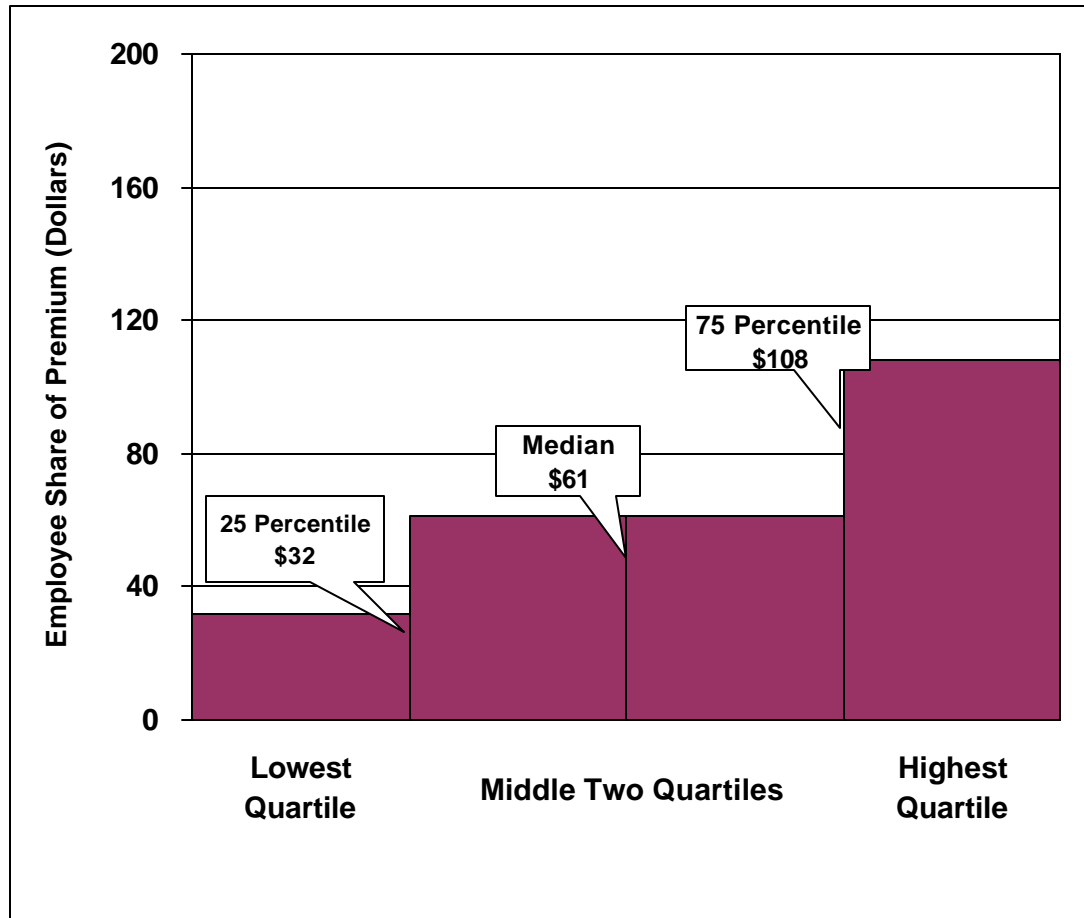
Figure 3-14. Enrollment of Employed Kansans Age 18-64 Who Are Eligible for Employment-Based Insurance



Sample size for this figure = 10,602 individuals

Among Kansas residents age 18-64 eligible for employment-based insurance, 82.0% report they are enrolled in employment-based coverage while 18.0% report that they declined employment-based coverage.

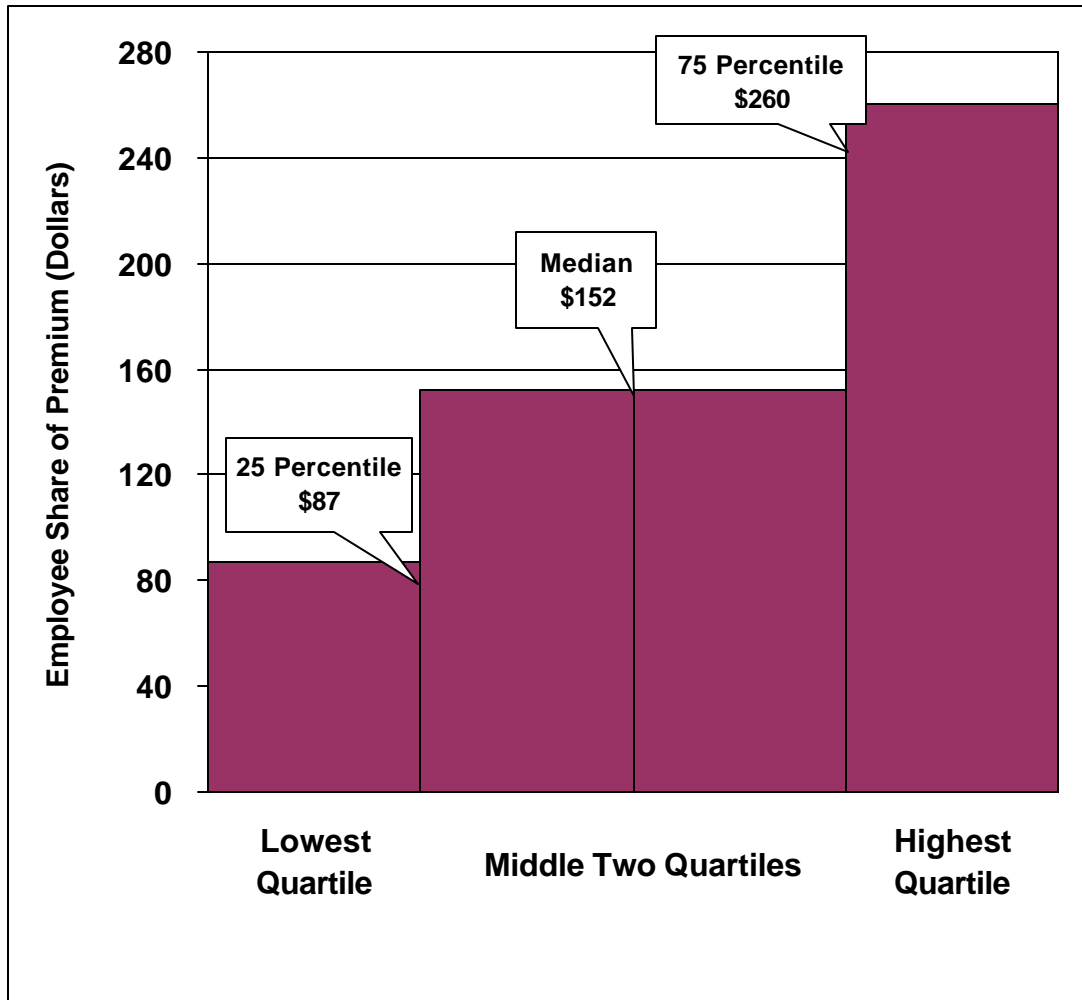
Figure 3-15. Monthly Employee Share of Premiums for Self-only Employment-Based Health Insurance Coverage



Sample size for this figure = 964 individuals

The median employee share of self-only health insurance premiums is \$61 per month, with a mean of \$173. Ranking employees by the amount of their share of employment-based premiums shows that the 25% of employees who pay the most spend over \$108 per month for coverage. The 25% of employees who pay the least spend \$32 or less per month.

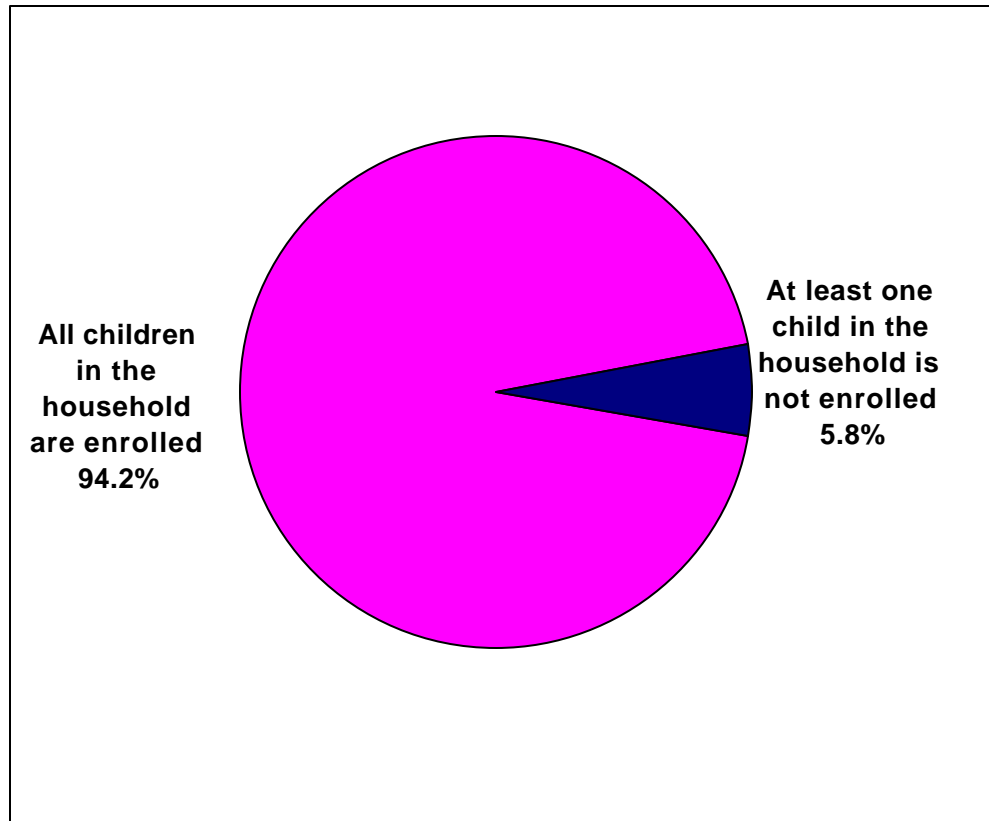
Figure 3-16. Monthly Employee Share of Premiums for Employment-Based Family Health Insurance Coverage



The median employee share of health insurance premiums for family coverage is \$152 per month with a mean of \$225. Ranking employees by the amount of their share of employment-based premiums reveals that the 25% of employees who pay the most spend over \$260 per month for coverage. The 25% of employees who pay the least spend \$87 or less per month.

Sample size for this figure = 2,858 individuals

Figure 3-17. Percent of Kansans Age 18-64 Eligible for Employment-Based Family Coverage Who Enroll All Children in the Household under this Coverage



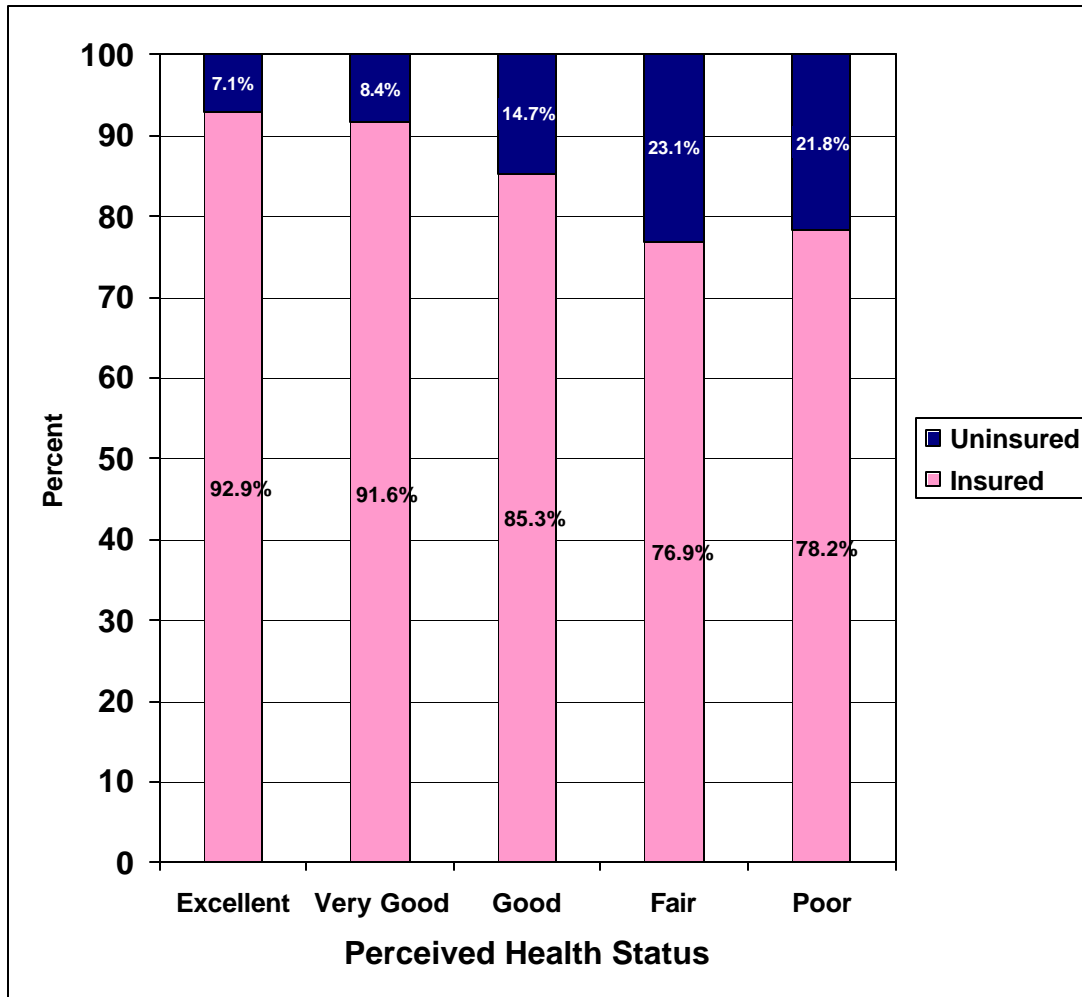
Among Kansas residents eligible for employment-based family coverage, 94.2% report that all children in the household are enrolled under this coverage.

Sample size for this figure = 2,885 individuals

Section 4

Health Care Utilization

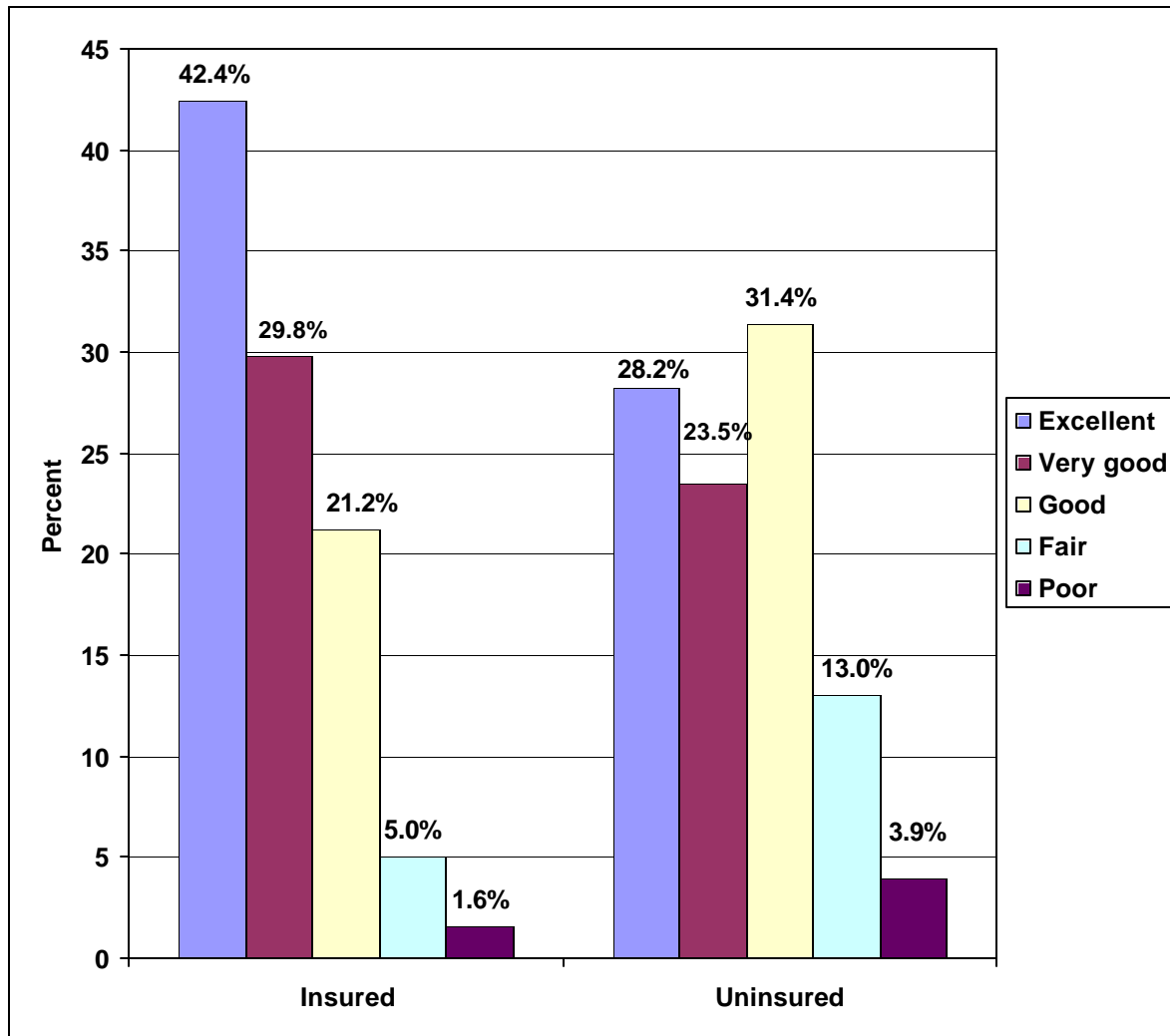
Figure 4-1. Health Insurance Status by Perceived Health Status, Kansans under Age 65



Sample size for this figure = 22,405 individuals

People in better health are more likely to have health insurance. While it is impossible to ascribe causality to this relationship, 92.9% of Kansans whose health is rated as “excellent” have some form of health insurance. By contrast, among people with “fair” or “poor” health status, 76.9-78.2% of individuals have some form of health insurance.

Figure 4-2. Perceived Health Status and Insurance Status of Kansans under Age 65



In general, people with health insurance tend to be in better health than people without health insurance. About 42.4% of insured Kansans under age 65 were reported to be in excellent health. By contrast, only 28.2% of uninsured Kansans under age 65 were reported to be in excellent health. At the opposite end of the health scale, 16.9% of uninsured Kansans were reported in fair or poor health, while 6.6% of insured Kansans reported fair or poor health.

Sample size for this figure = 22,405 individuals

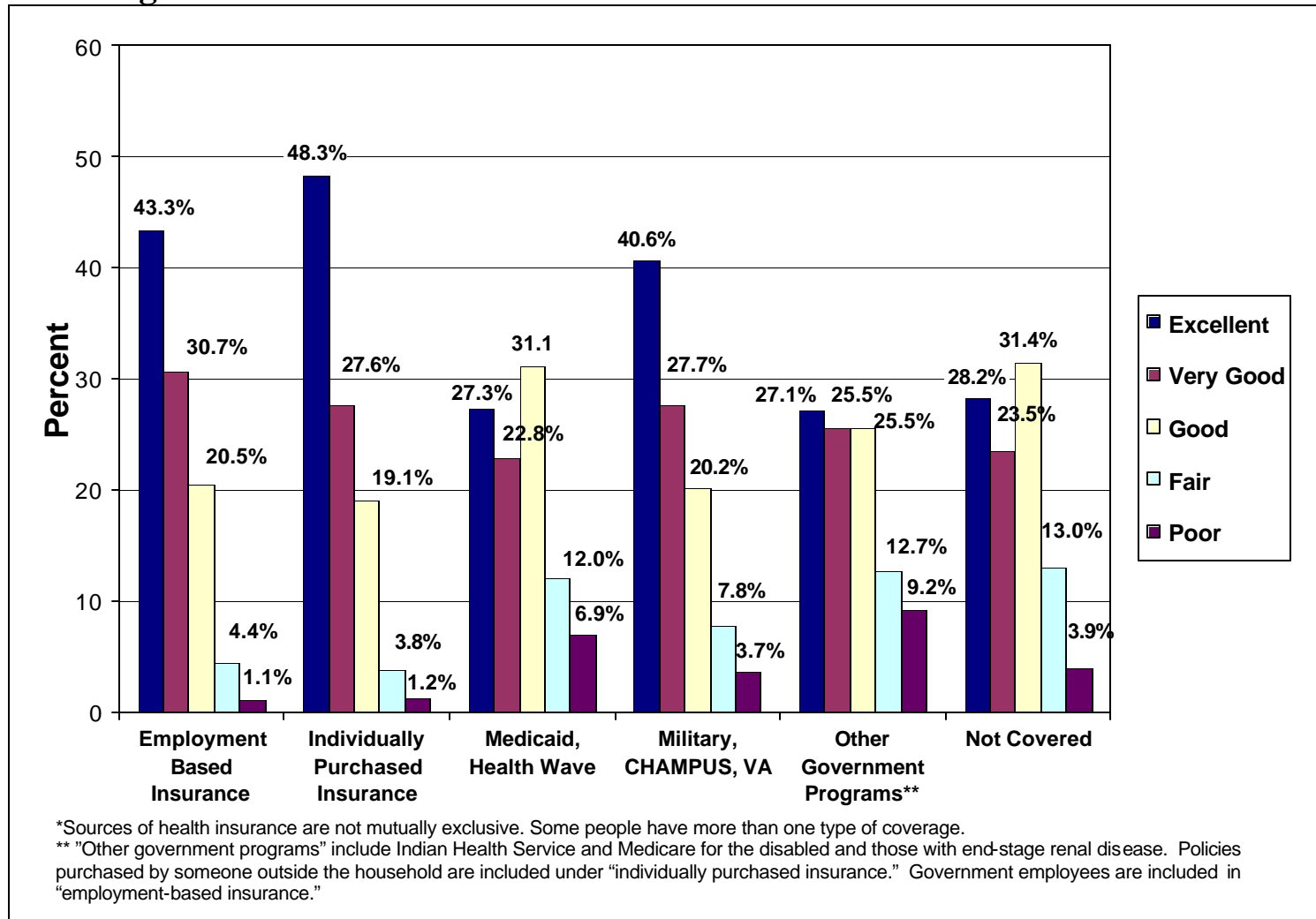
Table 4-1. Perceived Health Status of Uninsured Kansans under Age 65, Statewide and by Region

Corresponds to Figure 4-2

Uninsured Kansans					
	Excellent	Very Good	Good	Fair	Poor
	Percent	Percent	Percent	Percent	Percent
Kansas	28.2	23.5	31.4	13.0	3.9
Region 1	26.3	16.1	34.3	19.2	4.0
Region 2	34.7	24.8	26.5	12.9	1.1
Region 3	34.4	19.7	31.4	10.2	4.3
Region 4	35.1	26.3	28.2	8.7	1.7
Region 5	26.2	31.1	29.1	8.1	5.4
Region 6	24.9	17.4	35.3	15.8	6.6
Region 7	25.3	36.2	25.8	10.4	2.4
Region 8	33.0	31.3	26.4	7.6	1.7
Region 9	29.5	25.5	29.3	13.0	2.6
Region 10	24.0	17.6	38.3	16.1	4.1

Sample size for this table = 22,405 individuals

Figure 4-3. Perceived Health Status and Source of Coverage* for Kansans under Age 65



Different sources of health insurance demonstrate different enrollee health status profiles. The modal self-perceived health status among enrollees in employment-based insurance and individually purchased health insurance is "Excellent." By contrast, a relatively low percent of enrollees in Medicaid and other government programs report themselves to be in excellent health.

Sample size for this figure = 22,450

Table 4-2. Perceived Health Status and Source of Coverage* for Kansans under Age 65

Corresponds to Figure 4-3

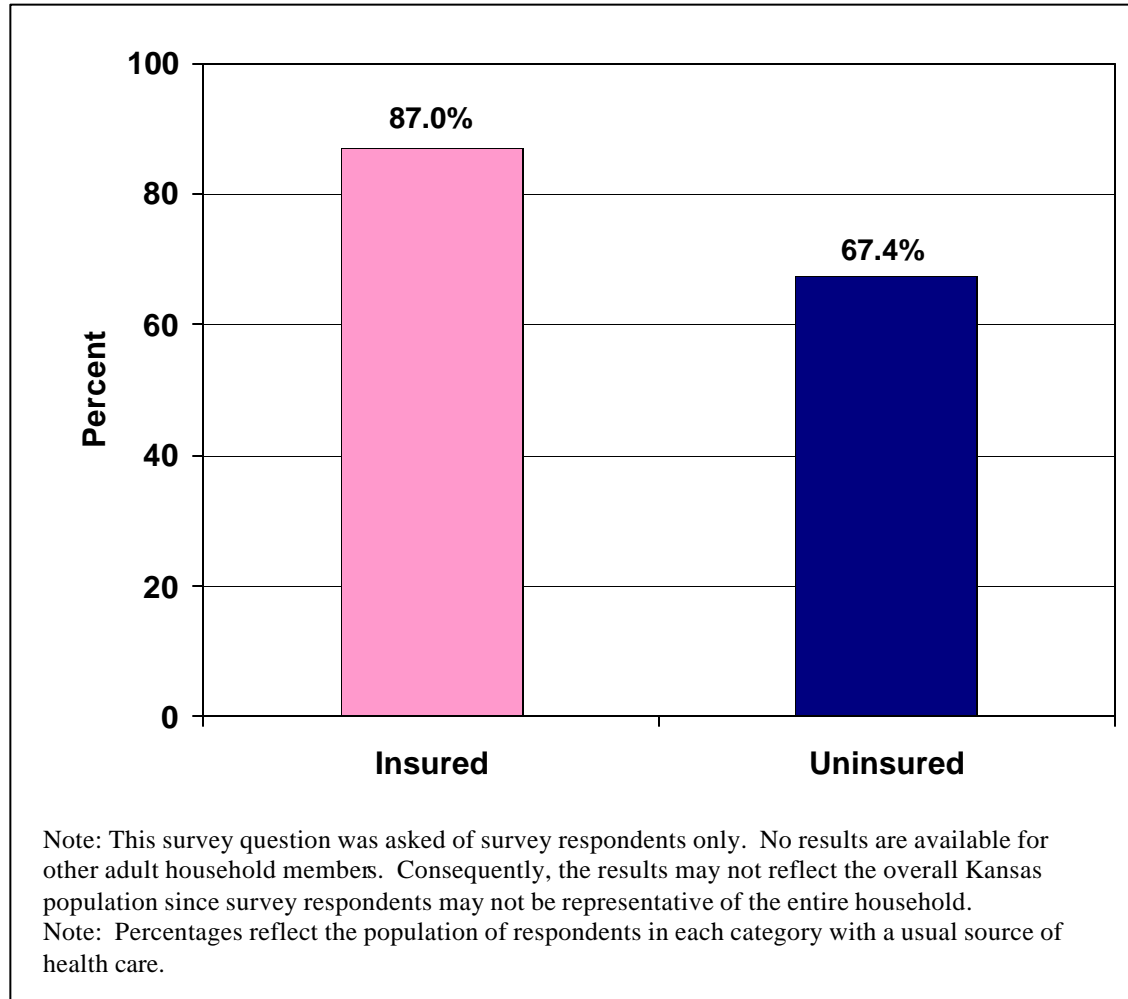
Perceived Health Status	Employment Based Insurance Percent	Individually Purchased Insurance Percent	Medicaid, HealthWave Percent	Military, CHAMPUS, VA Percent	Other Government Programs Percent	Not Covered Percent
Excellent	43.3	48.3	27.3	40.6	27.1	28.2
Very Good	30.7	27.6	22.8	27.7	25.5	23.5
Good	20.5	19.1	31.1	20.2	25.5	31.4
Fair	4.4	3.8	12.0	7.8	12.7	13.0
Poor	1.1	1.2	6.9	3.7	9.2	3.9

Sample size for this table = 22,405 individuals

* Some people have more than one source of coverage.

Note: Other government programs include Indian Health Service and Medicare for the disabled and those with end-stage renal disease. Government employees are included in employment-based insurance. Policies purchased by someone outside the household are included under “individually purchased insurance.”

Figure 4-4. Percent of Respondents Age 18-64 with a Usual Source of Health Care by Insurance Status



Individuals who have health insurance are more likely to have a usual source of health care. 87.0% of insured Kansans report that they have a usual source of care (a particular clinic, hospital, health center, or doctor's office). By contrast, only 67.4% of uninsured Kansans report that they have a usual source of care.

Sample size for this figure = 7,771 individuals

Table 4-3. Percent of Respondents Age 18-64 with a Usual Source of Health Care by Insurance Status, Statewide and by Region

Corresponds to Figure 4-4

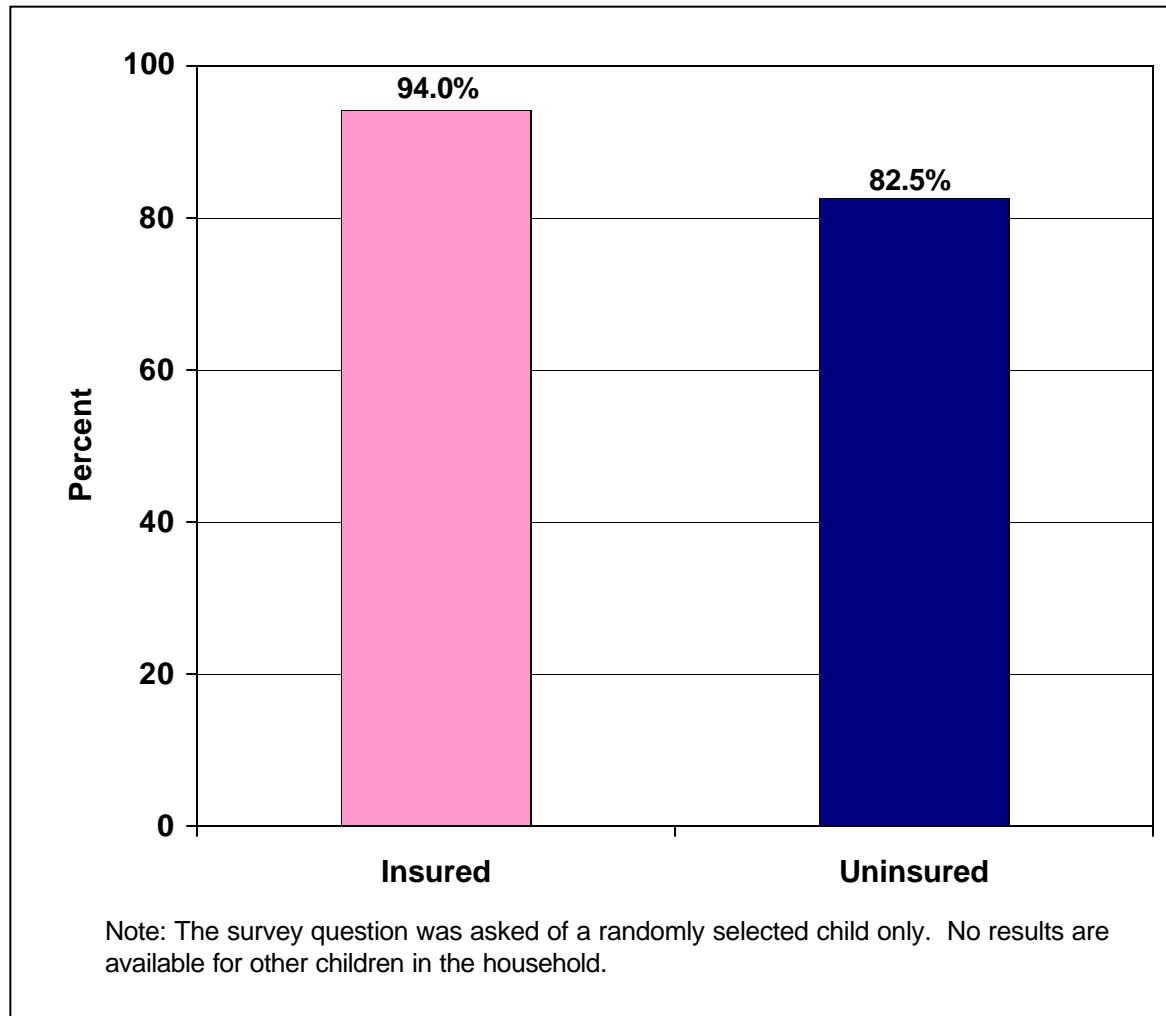
	Insured	Uninsured
	Percent	Percent
Kansas	87.0	67.4
Region 1	88.9	68.4
Region 2	83.8	60.1
Region 3	86.0	72.0
Region 4	88.0	61.3
Region 5	88.5	69.1
Region 6	88.3	70.7
Region 7	91.0	75.9
Region 8	86.4	61.0
Region 9	87.9	62.1
Region 10	83.8	62.1

Sample size for this table = 7,771 individuals

Note: This survey question was asked of survey respondents only. No results are available for other adult household members. Consequently, the results may not reflect the overall Kansas population since survey respondents may not be representative of the entire household.

Note: Percentages reflect the population of respondents in each category with a usual source of health care, and do not sum to a meaningful total.

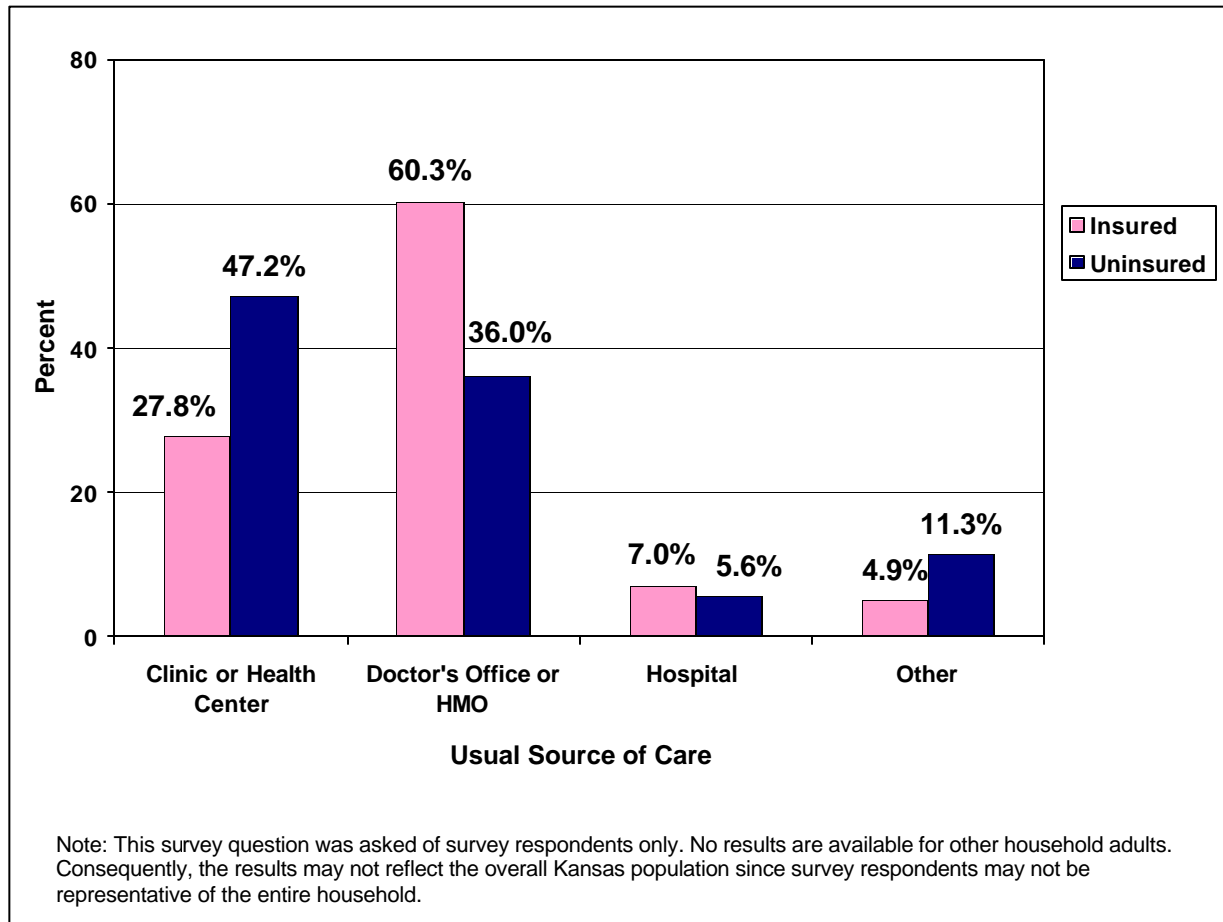
Figure 4-5. Percent of Children under Age 19 with a Usual Source of Health Care by Insurance Status



About 94% of Kansas respondents who have insured children report that their child has a usual source of care (a particular clinic, hospital, health center, or doctor's office) while 82.5% of uninsured Kansas children are reported to have a usual source of care.

Sample size for this figure = 3,690 individuals

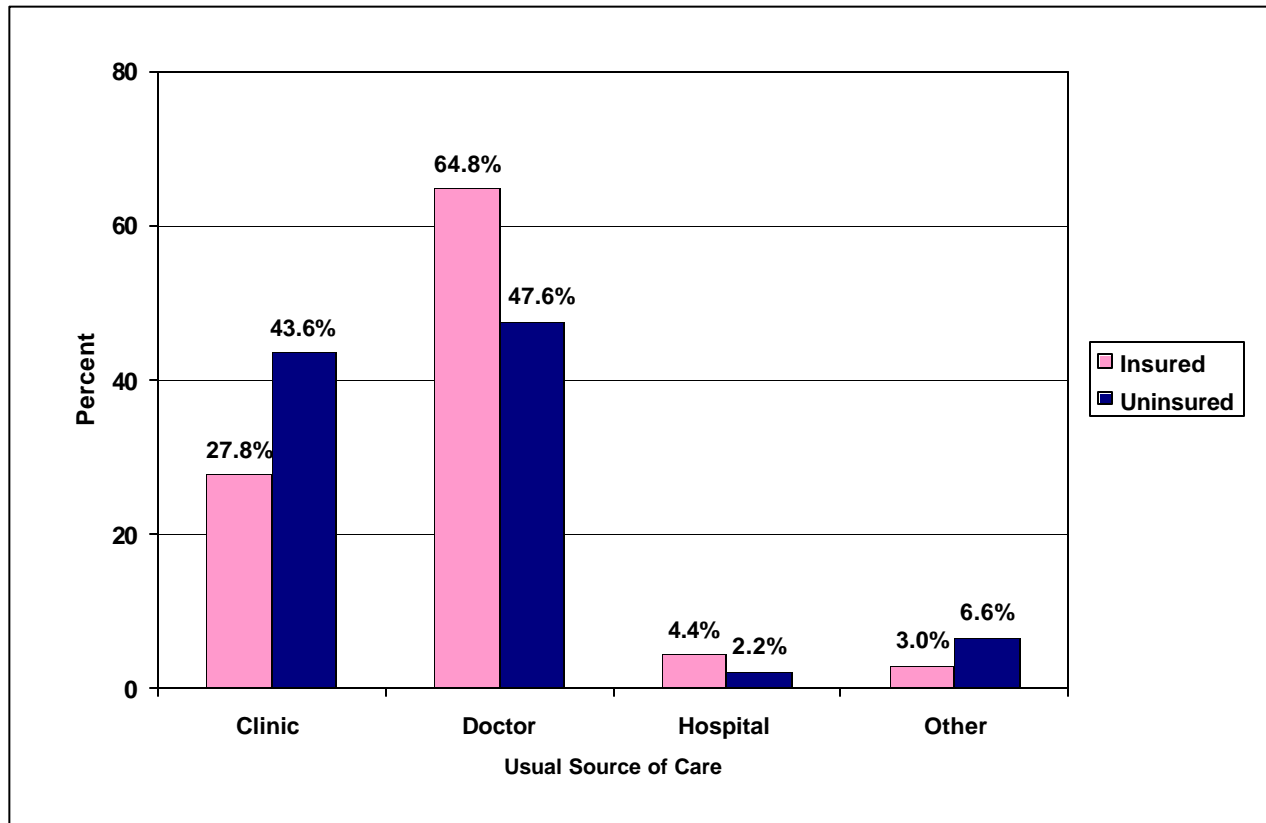
Figure 4-6. Locations of Usual Source of Care by Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64



Sample size for this figure = 6,651 individuals

Among Kansans who report that they have a usual source of care, the particular source differs by insurance status. A doctor's office or HMO is the reported usual source of care for 60.3% of insured Kansans, compared to 36.0% of uninsured residents. Uninsured Kansans are more likely than insured Kansans to rely upon clinics or health centers for their usual source of care (47.2% versus 27.8%).

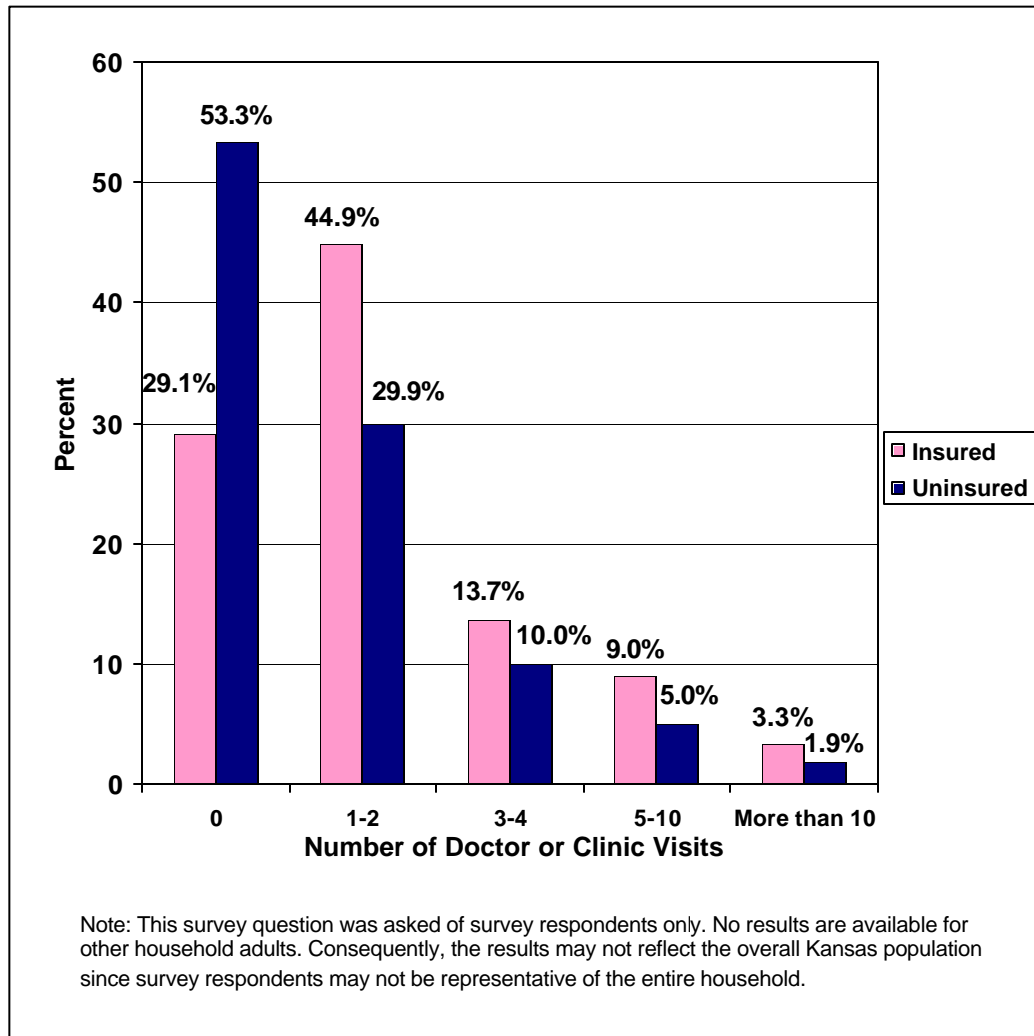
Figure 4-7. Locations of Usual Source of Care by Insurance Status of Kansas Children Under Age 19



Among Kansas respondents who have children in their household and report that their children have a usual source of care, 64.8% of insured children use a doctor's office as their usual source of care. 47.6% of uninsured children use a doctor's office for their usual source of care. By contrast, uninsured children are more likely than insured children to rely upon clinics for their usual source of care (43.6% versus 27.8%).

Sample size for this figure = 3,442 individuals

Figure 4-8. Doctor or Clinic Visits in the Last 6 Months and Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64



Sample size for this figure = 7,744 individuals

People with insurance were more likely to have a doctor or clinic visit in the last 6 months than people without insurance. 53.3% of uninsured respondents reported that they did not have any doctor or clinic visits in the last 6 months, compared to 29.1% of insured respondents.

Table 4-4. Doctor or Clinic Visits in the Last 6 Months and Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64

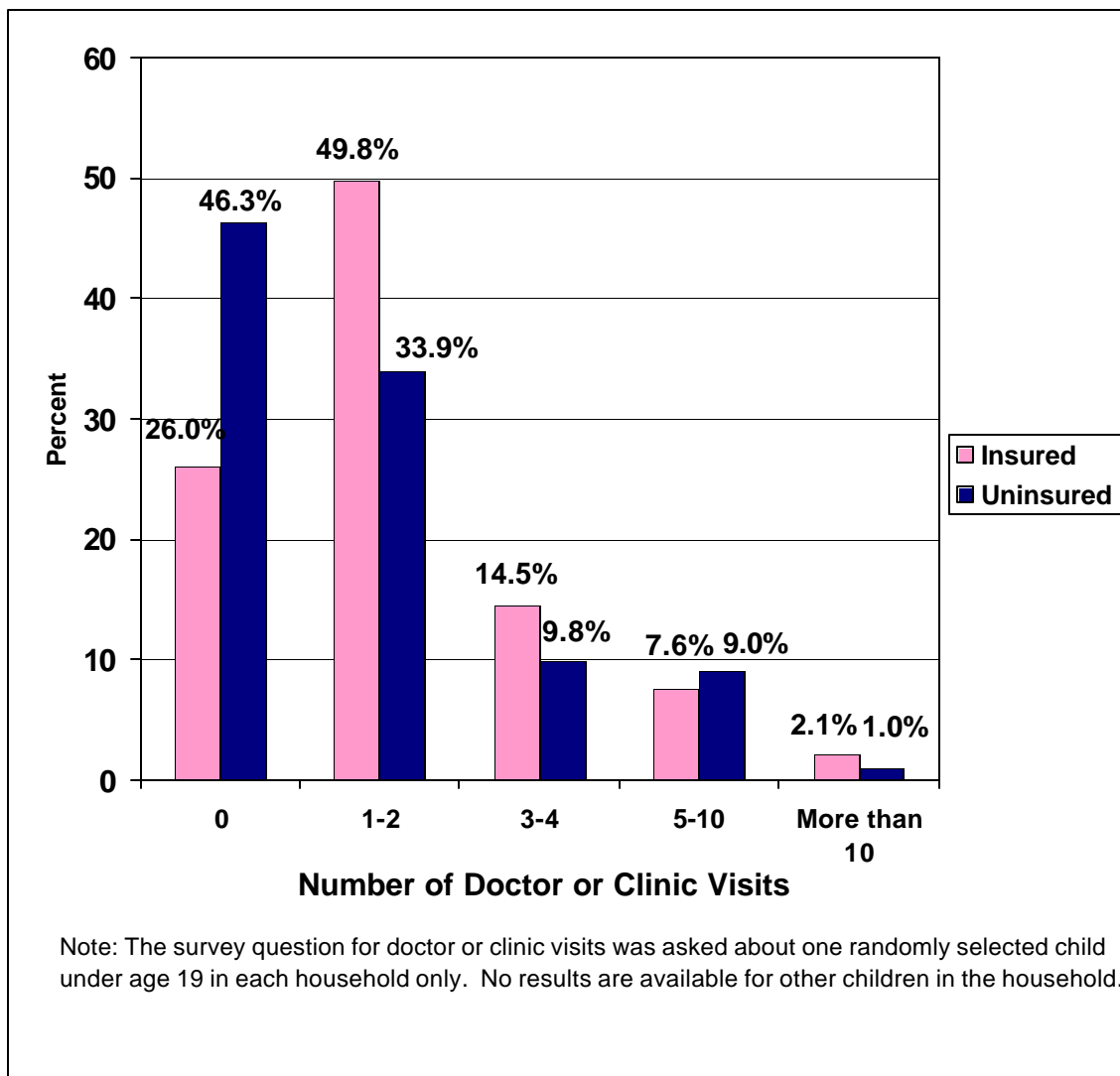
Corresponds to Figure 4-8

Number of Visits	Insured	Uninsured
	Percent	Percent
0	29.1	53.3
1-2	44.9	29.9
3-4	13.7	10.0
5-10	9.0	5.0
More than 10	3.3	1.9

Sample size for this table = 7,744 individuals

Note: The survey question for doctor visits was asked of survey respondents only. No results are available for other household adults. Consequently, the results in this table may not reflect the overall Kansas population since survey respondents may not be representative of the entire household.

Figure 4-9. Doctor or Clinic Visits in the Last 6 Months and Insurance Status of Kansas Children Less Than 19 Years Old



Kansas children who have health insurance coverage were more likely than uninsured children to make at least one doctor or clinic visit in the last six months. 74.0% of insured children were reported as having at least one doctor or clinic visit in the last six months, while 53.7% of uninsured children were reported to have one or more doctor visits in the last six months.

Sample size for this figure = 3,673 individuals

Table 4-5. Doctor or Clinic Visits in the Last 6 Months and Insurance Status of Kansas Children Less Than 19 Years Old

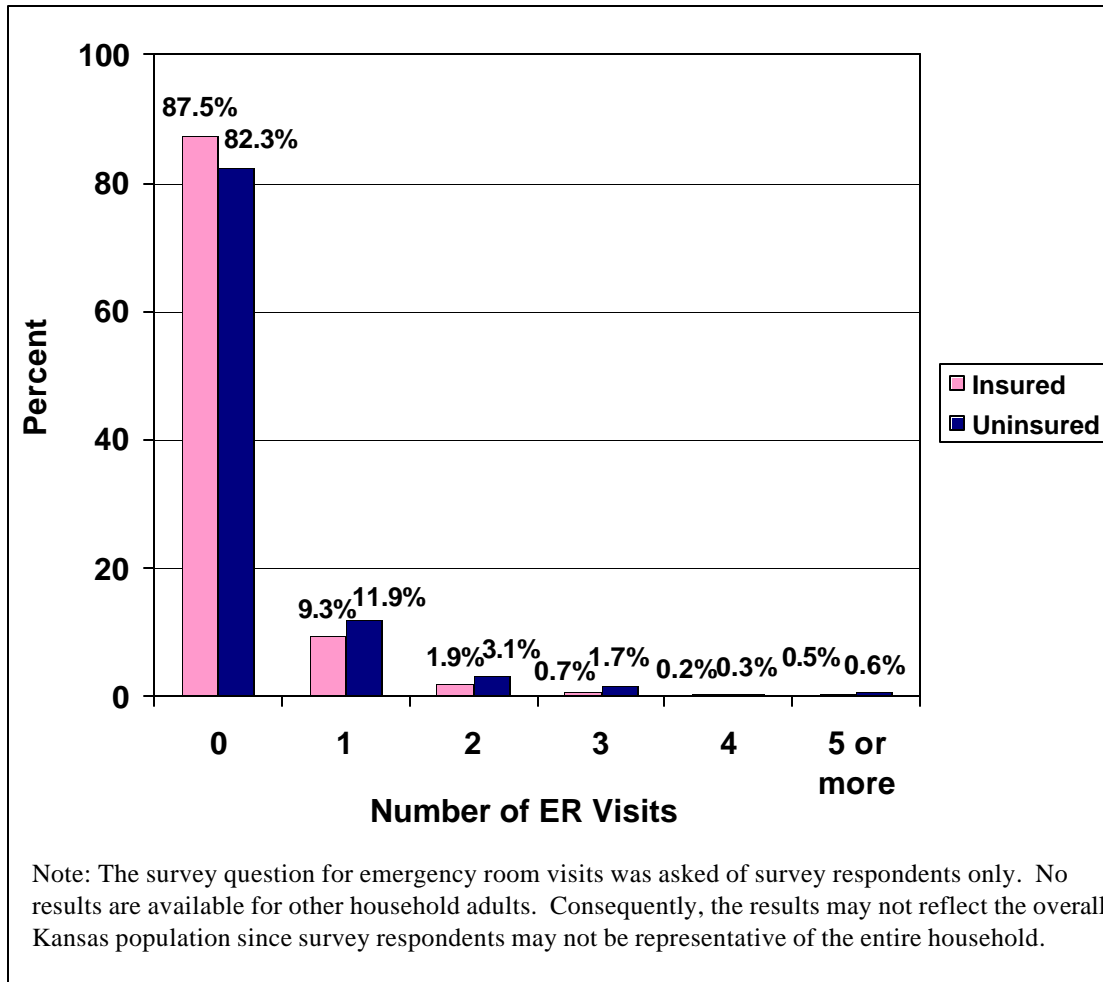
Corresponds to Figure 4-9

Number of Visits	Insured	Uninsured
	Percent	Percent
0	26.0	46.3
1-2	49.8	33.9
3-4	14.5	9.8
5-10	7.6	9.0
More than 10	2.1	1.0

Sample size for this table = 3,673 individuals

Note: The survey question for doctor or clinic visits was asked of a randomly selected child only. No results are available for other children in the household.

Figure 4-10. Emergency Room Visits in the Last 6 Months and Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64



Sample size for this figure = 7,779 individuals

Uninsured respondents were more likely to have at least one emergency room visit in the last 6 months than insured respondents. 17.7% of uninsured respondents reported that they had at least one emergency room visit in the last 6 months, while 12.5% of insured respondents had at least one emergency room visit.

Table 4-6. Emergency Room Visits in the Last 6 Months and Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64

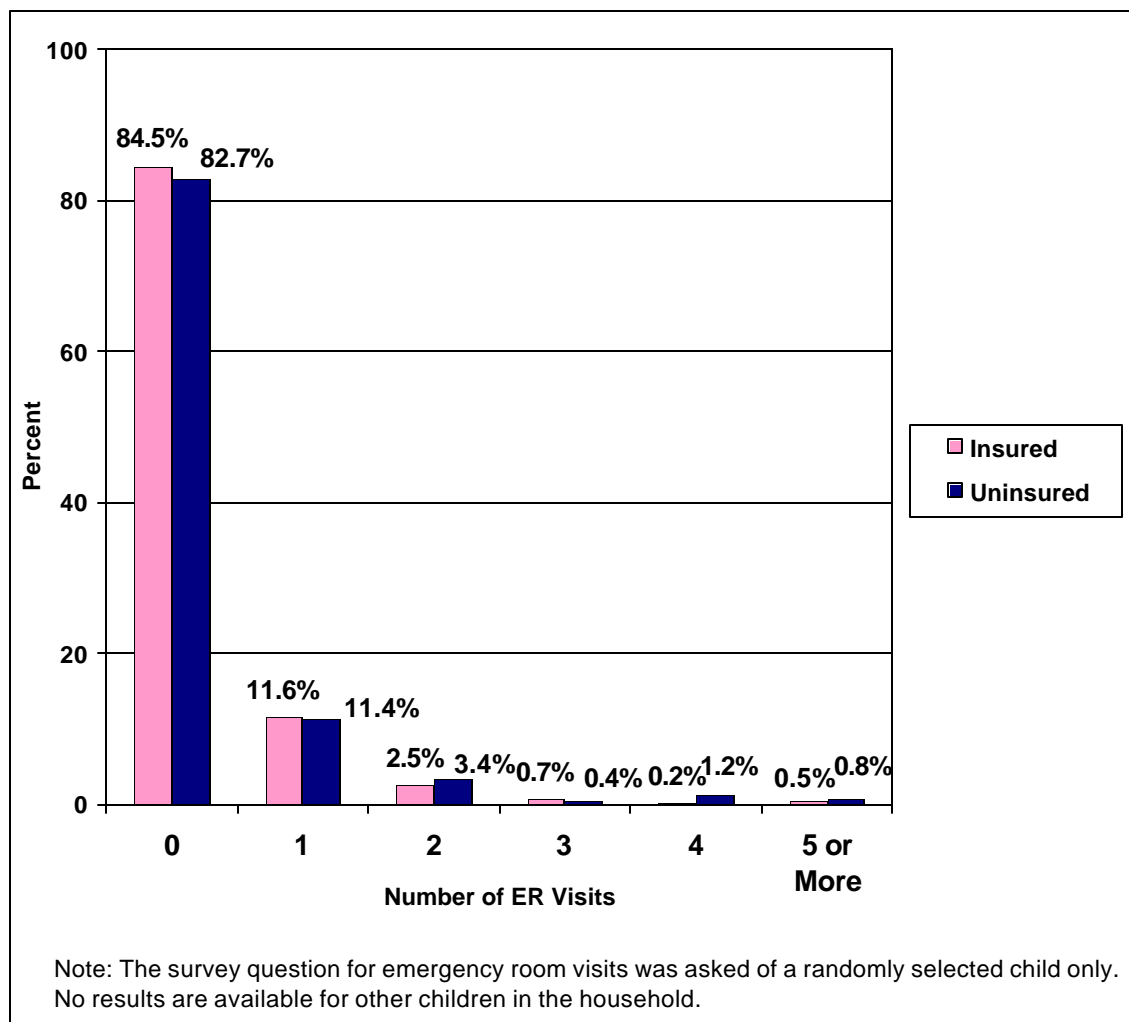
Corresponds to Figure 4-10

Number of Visits	Insured	Uninsured
	Percent	Percent
0	87.5	82.3
1	9.3	11.9
2	1.9	3.1
3	0.7	1.7
4	0.2	0.3
5 or More	0.5	0.6

Sample size for this table = 7,779 individuals

Note: The survey question for emergency room visits was asked of survey respondents only. No results are available for other household members. Consequently, the results in this table may not reflect the overall Kansas population since survey respondents may not be representative of the entire household.

Figure 4-11. Emergency Room Visits in the Last 6 Months and Insurance Status of Kansas Children Less Than 19 Years Old



Uninsured Kansas children are more likely to have had at least one emergency room visit in the last 6 months. About 84.5% of insured Kansas children had no emergency room visits in the last 6 months, compared to 82.7% of uninsured children.

Sample size for this figure = 3,691 individuals

Table 4-7. Emergency Room Visits in the Last 6 Months and Insurance Status of Kansas Children Less Than 19 Years Old

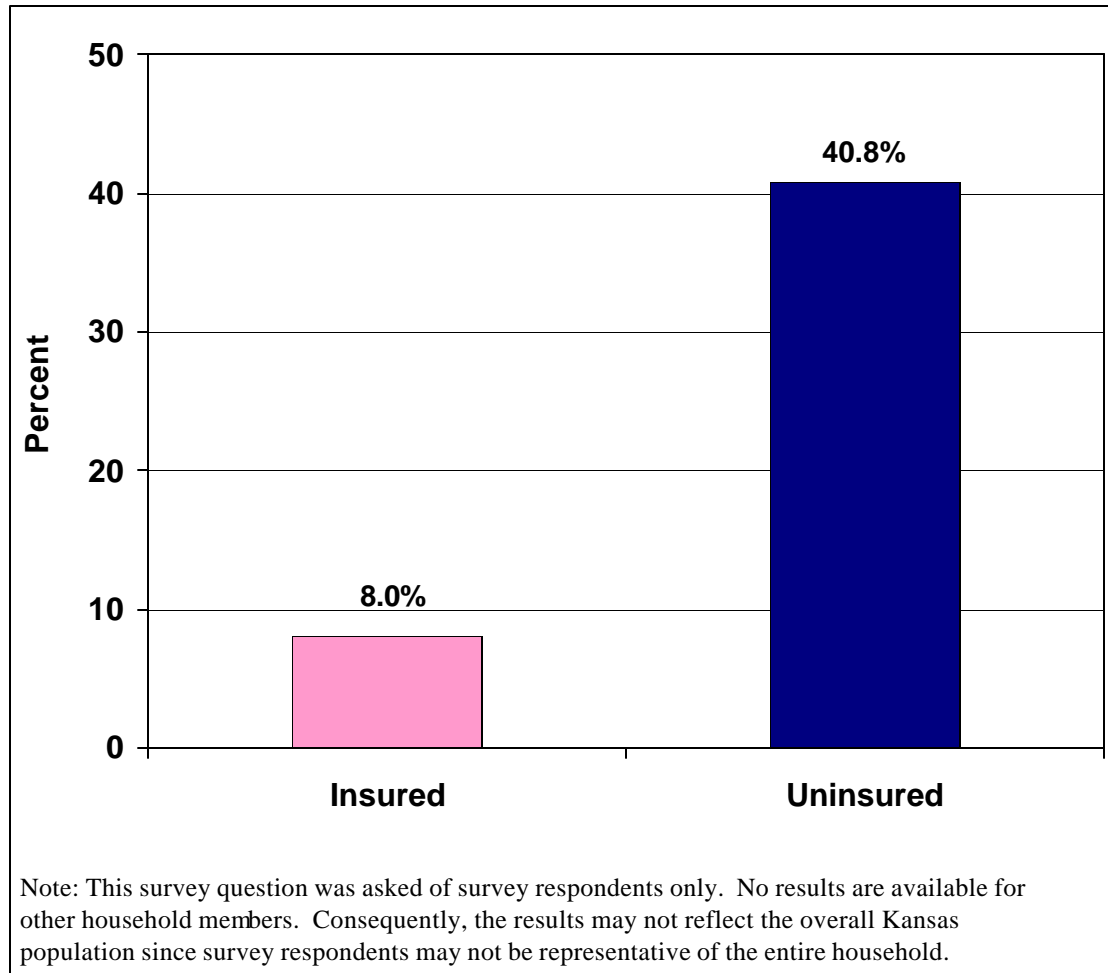
Corresponds to Figure 4-11

Number of Visits	Insured	Uninsured
	Percent	Percent
0	84.5	82.7
1	11.6	11.4
2	2.5	3.4
3	0.7	0.4
4	0.2	1.2
5 or More	0.5	0.8

Sample size for this table = 3,691 individuals

Note: The survey question for emergency room visits was asked of a randomly selected child only. No results are available for other children in the household.

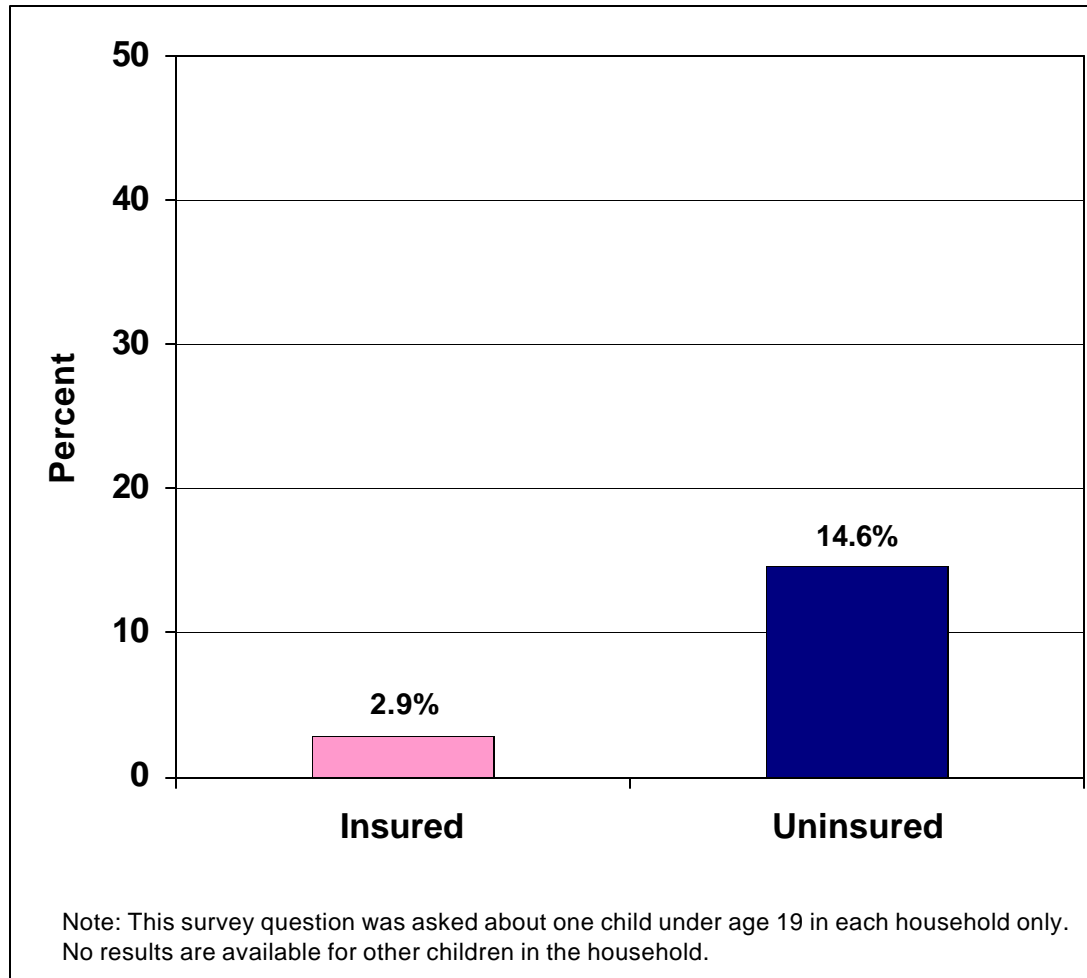
Figure 4-12. Percent of Respondents Delaying or Not Obtaining Needed Medical Care Within the Last 12 Months Because They Could Not Afford It, by Insurance Status



Uninsured Kansas respondents were much more likely to delay needed care within the last 12 months due to financial barriers than insured respondents. 40.8% of uninsured Kansas respondents reported that they delayed needed care within the last 12 months because they could not afford it. By contrast, only 8.0% of insured respondents indicated that they delayed needed care due to financial reasons.

Sample size for this figure = 7,777 individuals

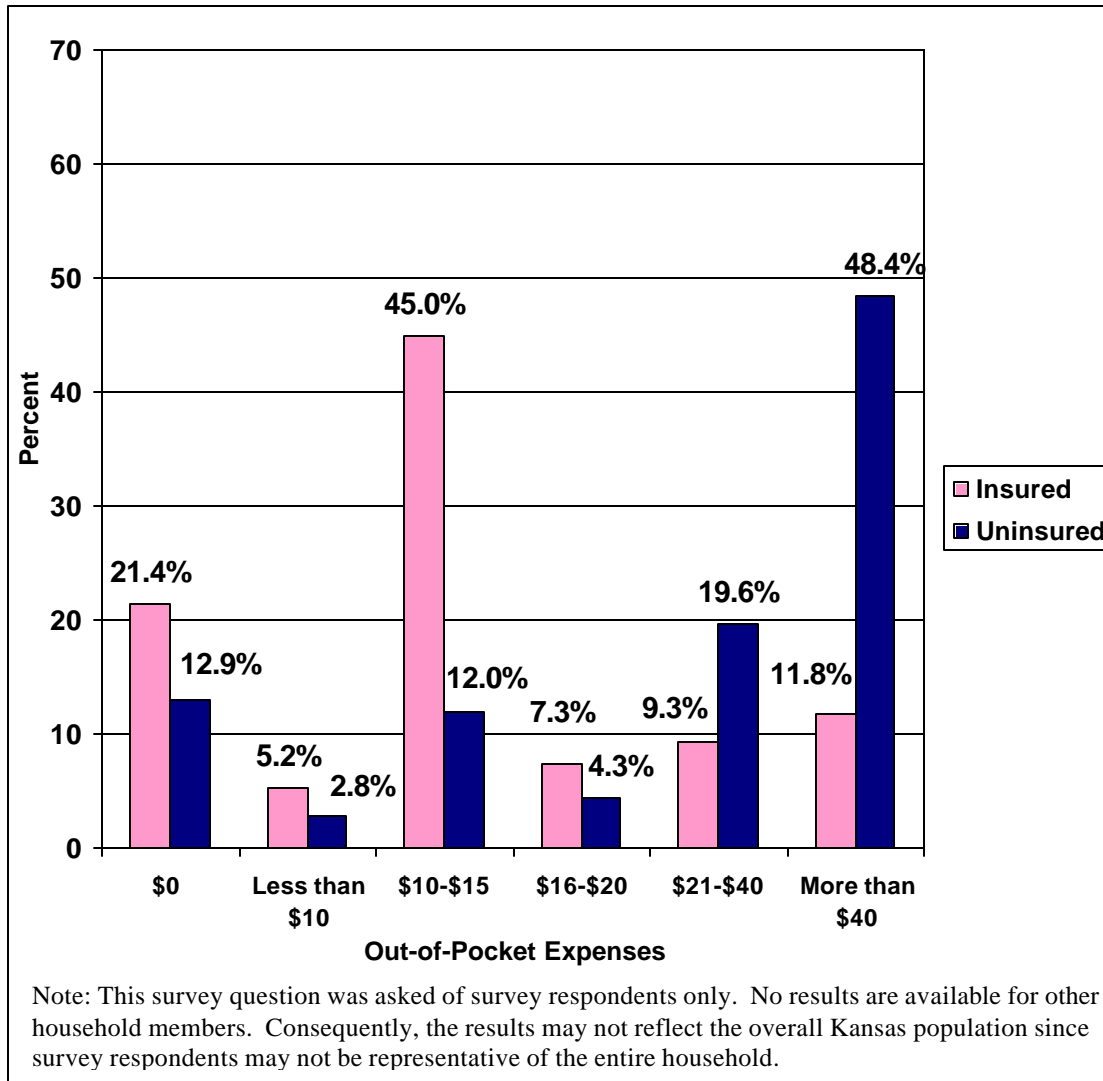
Figure 4-13. Percent of Children for Whom Needed Medical Care Is Delayed or Not Obtained Within the Last 12 Months Because Their Family Could Not Afford It, by Insurance Status



Sample size for this figure = 3,696 individuals

Kansas respondents report that health insurance coverage removes financial barriers for their children to receive needed medical care. In families with health insurance, needed medical care was delayed or not obtained within the last 12 months for only 2.9% of the children because their family could not afford it. By contrast, about 14.6% of Kansas families with uninsured children reported such deferrals.

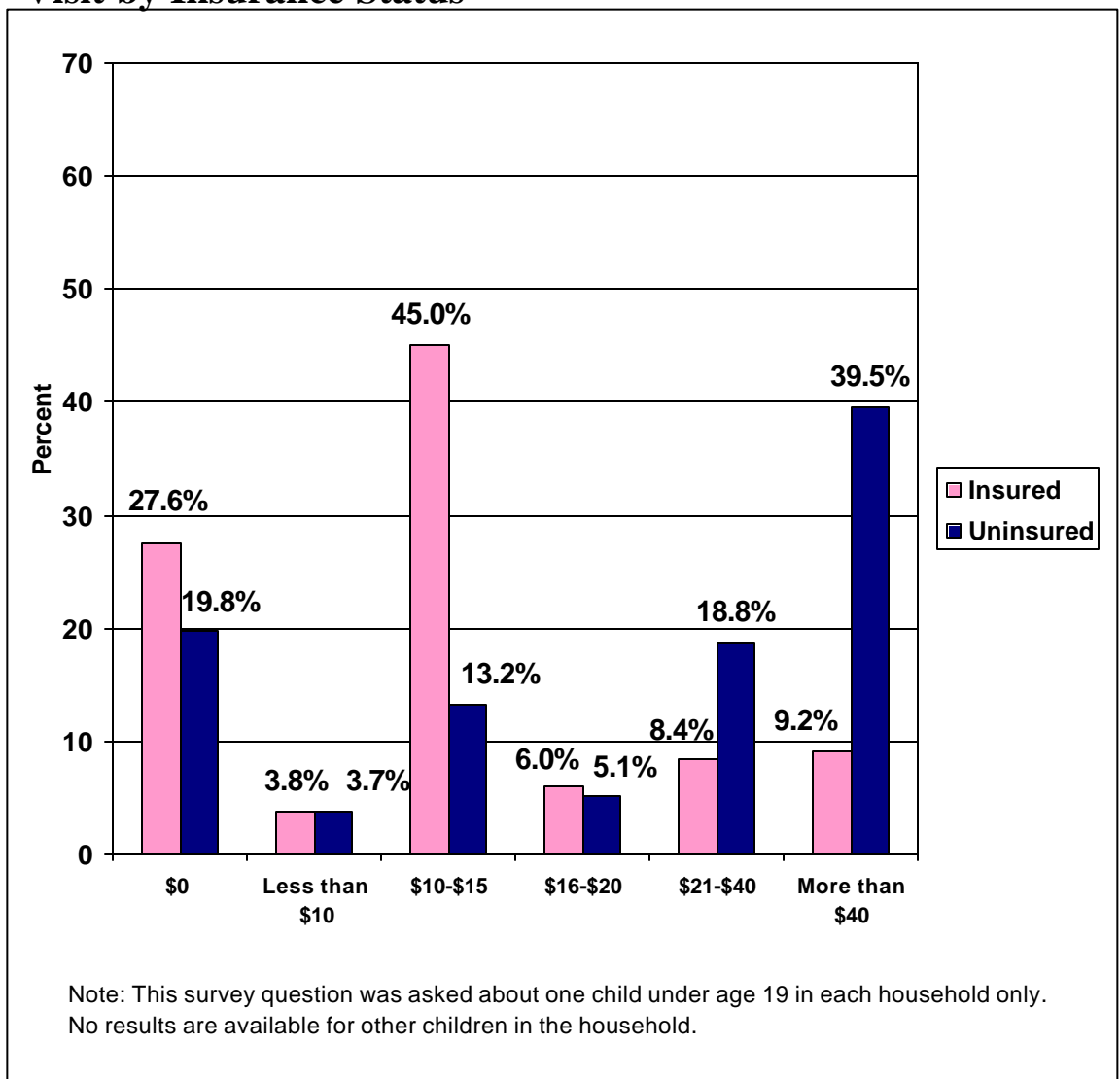
Figure 4-14. Reported Out-of-Pocket Expenses for a Respondent's Doctor Visit by Insurance Status



Sample size for this figure = 7,294 individuals

As expected, the patient's cost at the time of the doctor visit is much higher for the uninsured than for the insured. 48.4% of the uninsured Kansas respondents report costs per visit greater than \$40 while only 11.8% of the insured report such high costs. Most insured respondents (45.0%) report that they pay \$10 to \$15 for a doctor visit.

Figure 4-15. Reported Out-of-Pocket Expenses for a Child’s Doctor Visit by Insurance Status



Households with insured children most frequently report that they spend \$10 to \$15 for an insured child’s doctor office visit; about 45.0% of Kansas respondents indicated that the cost of a doctor visit for their insured children is in that range, while another 27.6% pay nothing at the time of visit. For families of uninsured children 39.5% reported spending more than \$40 for a doctor visit.

Sample size for this figure = 3,573 individuals

Appendix A

Acknowledgements

Appendix A

The telephone survey component of the Kansas Health Insurance Study was conceived and has been implemented by a team. We are very grateful for the efforts and contributions of numerous organizations and individuals.

The Kansas Team

Central participants on the Kansas team included Barbara Langner (Principal Investigator) and Cynthia Haddock. Both approached the challenges of managing the telephone survey with energy and enthusiasm. Their direct contributions to substantive issues of sample size, regional subdivisions, question wording and the like were invaluable. Project management was accomplished in a collaborative, collegial manner.

Drs. Langner and Haddock also managed the process through which Commissioner of Insurance Kathleen Sebelius, Matthew All and other members of the project steering committee provided input. In addition, they transmitted valuable suggestions from Robert Lee, Peter Budetti and others.

The University of Florida Team

The core participants on the University of Florida team are identified in the authorship of this report. Others, however, contributed in significant degree to the successful design and implementation of the telephone survey that was the focal area of UF effort.

Elizabeth Shenkman, Director of Health Services Research and Evaluation at the Institute for Child Health Policy provided valuable consultation in designing the questionnaire that constitutes the core data collection instrument.

Several individuals in the Division of Biostatistics at the University of Florida provided assistance. Specifically, Youngju Pak worked on data analysis and programming.

In the Department of Health Services Administration, additional support was provided by Kezia Awadzi and Teresa Davis.

The Survey Laboratory

The Center for Survey Research in the Bureau of Economic and Business Research at the University of Florida conducted the fieldwork for the study. We are grateful for the flexibility and responsiveness displayed by Dr. Chris McCarty and his staff, including Scott Richards, who managed the project for them.

Appendix B
Survey Instrument
(English Version)

Appendix B Instrument

KANSAS HEALTH INSURANCE STUDY

	Interview Number:
Survey Research	Date of Interview: / /
STUDY: Kansas Health Insurance Study	Interviewer Name:
Start Time (use military time):_____	End Time (use military time): _____
Respondent County:	Respondent Phone Number:

(HELLO) Hello, this is _____, calling for the University of Kansas.
 INTERVIEWER: PRESS 1 TO CONTINUE WITH SURVEY
 PRESS CTRL/END TO TERMINATE CALL

Hello, this is _____ for the University of Kansas. We started an interview a few days ago about health care and health insurance and I'm calling back to complete that interview. May we begin?

(HOME) We are conducting research so that state leaders can better develop health care programs for people in Kansas and we need the input of your household. We would like to ask you some questions.

Have I reached you on your HOME phone?
 (USE AS NECESSARY –
 *This is not a sales call, we are only interested in your opinion
 *YOU CAN TELL THEM YOU ARE WORKING FOR THE UNIVERSITY OF
 FLORIDA'S BUREAU OF ECONOMIC AND BUSINESS RESEARCH
 WHICH WAS HIRED BY THE STATE OF KANSAS)

INTERVIEWER: IF YES, PRESS 1 TO CONTINUE (*go to ADLT*)
 IF NO, PRESS 2

(LIVE) Does anyone LIVE there?
 INTERVIEWER:
 IF YES, ASK TO SPEAK WITH THAT PERSON AND PRESS 1
 IF NO, PRESS CTRL/END AND ASSIGN APPROPRIATE CODE

(ADLT) First, I need to know if you are (under 18 years old or) 18 years old or older.

- 1 YES, 18 YEARS OLD OR OLDER (*go to MOD3*)
- 2 NO, UNDER 18 YEARS OLD

(ADLTB) May I speak to someone 18 years old or older who lives there?

INTERVIEWER: PRESS 1 IF INFORMANT PASSES PHONE TO ELIGIBLE ADULT

IF NO ELIGIBLE ADULTS, PRESS CTRL/END AND CODE AS "NO ELIGIBLE RESPONDENT"

IF ELIGIBLE ADULT IS NOT HOME, PRESS CTRL/END AND CODE AS CALLBACK

(MOD3) Is anyone in the household under 65 years of age?

- PRESS 1 IF Yes (*go to KNOW*)
PRESS 0 IF No

(NoThank) Thank you for talking to me. Right now we are only talking to families who are not eligible for Medicare, so I do not have any other questions.

PRESS ANY KEY TO CONTINUE

(KNOW) Are you the most knowledgeable person in your household about the family's healthcare and health insurance?

- PRESS 1 IF Yes (*go to PROCEED*)
PRESS 0 IF No

(KNOW2) May I speak to the person who is most knowledgeable?

- PRESS 1 IF Yes (*continue*)
IF THEY REFUSE, THANK THEM FOR THEIR TIME, QUIT OR HIT CTRL/END AND CODE AS A REFUSAL.

(PROCEED) Before we begin, let me tell you that your phone number was selected at random by computer, and only your first name or initials will be used to ensure confidentiality. You do not have to answer any question you do not wish to answer. This interview should take approximately 15 minutes to complete.

USE IF NECESSARY:

"This study is sponsored by the State of Kansas who hired the University of Florida's Bureau of Economic and Business Research to conduct the survey. The results will be used to help state leaders develop better health care programs for people in Kansas."

(May we proceed?)

- IF NO, QUIT OR HIT CTRL/END AND CODE AS REFUSAL
IF Yes PRESS 1 to continue

Section 1 Household Listing and Health Insurance

(HHL D) To begin, what are the first names (or initials) of the people who are living or staying there? Begin with yourself and then include all other people in the household. To ensure your confidentiality, only first names will be used.

INTERVIEWER: SOME FAMILIES MAY BE RELUCTANT TO PROVIDE NAMES. TELL RESPONDENT THAT WE WANT THE FIRST NAME BECAUSE YOU WILL BE ASKING ABOUT THE HEALTH CARE OF EACH PERSON IN THE HOUSEHOLD. TELL THEM THAT THEY CAN GIVE YOU INITIALS IF THAT WOULD MAKE THEM MORE COMFORTABLE. MAKE SURE THEY ARE *UNIQUE* INITIALS. IF NOT USE RELATIONSHIPS, LIKE "DAUGHTER1" OR "SON2."

- 1 MEMBER --RESPONDENT (CSR: We allow 12 characters for each name)
- 2 MEMBER
- 3 MEMBER
- 4 MEMBER
- 5 MEMBER
- 6 MEMBER
- 7 MEMBER
- 8 MEMBER

(NAMCHK) So the people in your household include...(READ NAMES BELOW)

DISPLAY NAME
DISPLAY NAME
DISPLAY NAME...

Is this correct?

MAKE SURE THIS IS CORRECT BECAUSE YOU WILL NOT BE ABLE TO CHANGE/ADD MEMBERS ONCE YOU BEGIN ASKING ABOUT AGES.

HIT 1 TO GO BACK AND ADD/FIX NAMES
HIT 2 IF EVERYTHING IS GOOD

(MISSCHCK) Have I missed any babies or small children, or anyone who usually lives here but is traveling, in school, in a hospital, or any foster children, lodgers, boarders, and roommates?

INTERVIEWER: WE ARE INCLUDING STUDENTS WHO ARE UNDER 22 YEARS OLD AND AWAY AT SCHOOL, REGARDLESS OF WHETHER THEY LIVE IN A DORM OR AN OFF-CAMPUS APARTMENT.

!!!MAKE SURE YOU HAVE ALL THE NAMES BECAUSE YOU WILL NOT BE ABLE TO ADD OR CHANGE MEMBERS' NAMES ONCE YOU GO PAST THIS QUESTION!!!

PRESS 1 FOR YES TO RETURN AND ADD THOSE MISSING
IF NO ONE MISSING AND EVERYTHING CORRECT, PRESS 2.

(AGE) Now I am going to ask you some questions about each household member, such as their age, whether they are male or female, and their relationship to you.

INTERVIEWER: BABIES NOT YET 1 YEAR OLD SHOULD BE CODED AS 0.

IF RESPONDENT IS RELUCTANT TO GIVE AGE INFO, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE IN DIFFERENT AGE GROUPS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

What is your age?

(0-110) (*go to SEX*)

-8 Don't know

-9 Not available

(AGERNG) Would you say:

INTERVIEWER: READ CHOICES...

1 Birth to five years?

2 5-17 years?

3 18-54 years?

4 55-64 years?

5 or over 65?

-8 Don't know

-9 Not available

(SEX) SEX OF HOUSEHOLD MEMBERS--
CODE W/O ASKING, IF KNOWN

INTERVIEWER: IF RESPONDENT IS RELUCTANT, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE IN DIFFERENT GROUPS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

INTERVIEWER: FILL IN RESPONDENT'S SEX

- 1 Male
- 2 Female
- 8 DON'T KNOW
- 9 NOT AVAILABLE

(MAR) (*For those 16 or older*) MARITAL STATUS

INTERVIEWER: IF RESPONDENT IS RELUCTANT, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE WITH DIFFERENT MARITAL STATUS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

What is your marital status?

INTERVIEWER: READ LIST. Say, "Is it...?"

- 1 Married
- 2 Widowed
- 3 Divorced
- 4 Separated
- 5 Never married
- 6 Living with a partner
- 8 DON'T KNOW
- 9 NOT AVAILABLE

(AGE) INTERVIEWER: BABIES NOT YET 1 YEAR OLD SHOULD BE CODED AS 0.

IF RESPONDENT IS RELUCTANT TO GIVE AGE INFO, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE IN DIFFERENT AGE GROUPS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

What is the age of (NAME HH MEMBER NUMBER 2)?

(0-110) (*go to SEX*)

-8 Don't know

-9 Not available

(AGERNG) Would you say....

1 Birth to five years?

2 5-17 years?

3 18-54 years?

4 55-64 years?

5 or over 65?

-8 Don't know

-9 Not available

(SEX) SEX OF HOUSEHOLD MEMBERS--
CODE W/O ASKING, IF KNOWN

INTERVIEWER: IF RESPONDENT IS RELUCTANT, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE IN DIFFERENT GROUPS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

(IF NOT KNOWN) What is the sex of (NAME HH MEMBER NUMBER 2)?

1 Male

2 Female

-8 DON'T KNOW

-9 NOT AVAILABLE

(MAR) (For those 16 or older) MARITAL STATUS

INTERVIEWER: IF RESPONDENT IS RELUCTANT, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE WITH DIFFERENT MARITAL STATUS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

What is (NAME HH MEMBER NUMBER 2)'s marital status?

INTERVIEWER: READ LIST. Say, "Is it ...?"

- 1 Married
- 2 Widowed
- 3 Divorced
- 4 Separated
- 5 Never married
- 6 Living with a partner
- 8 DON'T KNOW
- 9 NOT AVAILABLE

(REL) RELATIONSHIP TO RESPONDENT

INTERVIEWER: IF RESPONDENT IS RELUCTANT, TELL THEM THAT THIS INFORMATION IS USED TO UNDERSTAND DIFFERENCES IN HEALTH CARE FOR PEOPLE IN DIFFERENT AGE GROUPS AND TO UNDERSTAND THE HEALTH CARE NEEDS OF ALL PEOPLE IN THE HOUSEHOLD.

(IF NOT KNOWN) What is (NAME HH MEMBER NUMBER 2)'s relationship with you?

1. HUSBAND
2. WIFE
3. CHILD (OWN, ADOPTED , STEP)
4. FOSTER CHILD
5. GRANDCHILD
6. PARENT
7. BROTHER/SISTER
8. SON-IN-LAW/DAUGHTER-IN-LAW
9. MOTHER-IN-LAW/FATHER-IN-LAW
10. OTHER RELATIVE
11. NON-RELATIVE
12. UNMARRIED PARTNER
- 8 Don't know
- 9 Not Available

Surveyer: Repeat, age, gender, marital status and relationship to respondent for each person in the household.

(FAMCHECK) Please let me verify everyone that you have mentioned. The members of your household include:

NAME	AGE	SEX	RELATIONSHIP
_____	_____	_____	_____

INTERVIEWER: READ EACH MEMBER OF HH (NAME, AGE, SEX, RELATIONSHIP) ONE BY ONE AND VERIFY IF IT IS CORRECT. IF YOU NEED TO CHANGE AN AGE, RELATIONSHIP, OR SEX PRESS 1

IF CORRECT, PRESS 2.

TEST: If age 16 or older and less than 22, go to STUDCHCK; else go to TEST before MARCHECK.

(STUDCHCK) Is NAME a full-time student?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not available

Repeat for all who meet test.

TEST: If any person is age 16 or older and MAR = married (1) and relationship is not husband (1) or wife (2), go to MARCHECK; else go to TEST after MARRIAGE.

(MARCHECK) Is NAME married to anyone living there?

INTERVIEWER: CODE "NO" FOR COHABITEE

- 1 Yes
- 2 No (*go to next person or next test*)
- 8 Don't know
- 9 Not available

(MARRIAGE) To whom is NAME married?

- 1 NAME
DON'T KNOW/NO MORE

TEST: Verify that spouses are opposite sexes and at least 16 years of age. Also there should be only one husband or wife in the household, but this may not always be the case.

Repeat TEST, MARCHECK, MARRIAGE for each person age 16 and older.

TEST: If any person is 18 and younger and relationship to respondent is not equal to (3) and person is not married then go to GUARDCHK; else go to COVINT.

(GUARDCHK) Is anyone who lives there the parent or guardian of NAME?

- 1 Yes
- 2 No (*go to next child or next test*)
- 8 Don't Know
- 9 Not Available

(GUARDIAN) Who is NAME's parent or guardian?

INTERVIEWER: IF MORE THAN ONE GUARDIAN, CHOOSE MOTHER/FEMALE GUARDIAN.

- 1. DISPLAY NAME
- 2. DISPLAY NAME
- 3. DISPLAY NAME.....
- 8. Don't know
- 9. Not Available

Repeat for others meeting the test.

(COVINT) Now I will list several types of health insurance or health coverage obtained through jobs, purchased directly, or from government programs.

For each one, please tell me if anyone is currently covered by that type of plan.

PRESS 1 TO CONTINUE

(COV1) Are (you/is anyone) who lives there covered by a health insurance plan from a CURRENT employer or union, other than the military? (This includes insurance from family members' employment.)

INTERVIEWER: REMEMBER WE ARE NOT INCLUDING MILITARY COVERAGE HERE. DO NOT INCLUDE INSURANCE PLANS PURCHASED THROUGH A PROFESSIONAL ASSN. OR TRADE GROUP. DO NOT INCLUDE PLANS THAT PROVIDE EXTRA CASH WHILE IN THE HOSPITAL OR PLANS THAT PAY ONLY FOR ONE TYPE OF SERVICE, SUCH AS DENTAL CARE, VISION CARE, NURSING HOME CARE, OR ACCIDENTS.

- 1 Yes
- 2 No (*go to COVID*)
- 8 Don't know
- 9 Not available

(COV1C) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

(COV1D) Are (you/is anyone) covered by a health insurance plan from a PAST employer or union, other than the military?

INTERVIEWER: *INCLUDE COBRA AND RETIREMENT PLANS.

REMEMBER WE ARE NOT INCLUDING MILITARY COVERAGE HERE. DO NOT INCLUDE INSURANCE PLANS PURCHASED THROUGH A PROFESSIONAL ASSN. OR TRADE GROUP. DO NOT INCLUDE PLANS THAT PROVIDE EXTRA CASH WHILE IN THE HOSPITAL OR PLANS THAT PAY ONLY FOR ONE TYPE OF SERVICE, SUCH AS DENTAL CARE, VISION CARE, NURSING HOME CARE, OR ACCIDENTS.

- 1 Yes
- 2 No (*go to COV2A*)
- 8 Don't know
- 9 Not available

(COV1E) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

(COV2A) Are (you/is anyone) covered by a health insurance plan bought on their own and not through an employer or union?

INTERVIEWER: * NO MILITARY COVERAGE HERE.
* INCLUDE HEALTH INSURANCE PLANS PROVIDED BY COLLEGES AND UNIVERSITIES TO STUDENTS.
* INCLUDE COVERAGE BOUGHT THROUGH A PROFESSIONAL ORGANIZATION

DO NOT INCLUDE PLANS THAT PROVIDE EXTRA CASH WHILE IN THE HOSPITAL OR PLANS THAT PAY ONLY FOR ONE TYPE OF SERVICE, SUCH AS DENTAL CARE, VISION CARE, NURSING HOME CARE, OR ACCIDENTS.

- 1 Yes
- 2 No (*go to COV3A*)
- 8 Don't know
- 9 Not available

(COV2C) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

(COV3A) Are (you/is anyone) covered by a health insurance plan held in the name of someone who does not live in the household?

INTERVIEWER: * NO MILITARY COVERAGE HERE
* INCLUDE MEDICAID IN SOMEONE ELSE'S NAME

DO NOT INCLUDE PLANS THAT PROVIDE EXTRA CASH WHILE IN THE HOSPITAL OR PLANS THAT PAY ONLY FOR ONE TYPE OF SERVICE, SUCH AS DENTAL CARE, VISION CARE, NURSING HOME CARE, OR ACCIDENTS.

- 1 Yes
- 2 No (*go to test before COV4A*)
- 8 Don't know
- 9 Not available

(COV3C) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

Please ask COV4A only if someone is 65 years of age or older.

(COV4A) Are (you/is anyone) age 65 or older covered by Medicare, the health insurance plan for people 65 years old or older or persons with certain disabilities?

INTERVIEWER: REMEMBER WE ARE NOT INCLUDING MILITARY COVERAGE HERE.

INCLUDE COVERAGE IF BY AN HMO AS WELL AS TRADITIONAL MEDICARE.
INCLUDE PART A AND PART B.

- 1 Yes
- 2 No (*go to TEST C4*)
- 8 Don't know
- 9 Not available

(COV4C) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

TEST C4: If person in household is 65 and not covered by Medicare, go to (COV5A); else go to (COV5SUP).

(COV5A) I noticed that NAME PERSON is older than 64, but is not covered by Medicare. Is that correct?

- 1 Yes (*go to COV6D*)
- 2 No, they should be added to Medicare (*go to COV4A*)
- 3 No, they are younger than 65
- 8 Don't Know
- 9 Not Available

(COV5B) What is the correct age?

- (0-64)
- 8 Don't Know
- 9 Not Available

Repeat for all household members age 65 and older and not covered by Medicare

(COV5SUP) Does NAME have any supplemental MediGap policies that assists with any medical care costs that are not covered by the main Medicare coverage?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not available

Repeat the question about supplemental MediGap coverage for all of those in household who have Medicare.

Ask COV6A if there are children under age 19 in the household; otherwise, go to COV9A.

(COV6A) Are any of the children covered by HealthWave or CHIP?

INT: IF THEY SAY THEY HAVE FAMILY HEALTH PARTNERS OR FIRST GUARD, CODE "YES"

- 1 Yes
- 2 No (*go to COV10A*)
- 8 Don't know
- 9 Not available

(COV6C) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

(COV6D) Are (you/is anyone) covered by Medicaid or an SRS medical card? These are government-sponsored health insurance programs.

(INT: IF THEY SAY THEY HAVE HEALTH CONNECT, PRIMECARE OR FIRST GUARD, CODE YES.)

- 1 Yes
- 2 No (*go to COV10A*)
- 8 Don't know
- 9 Not available

(COV6E) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

(COV9A) Are (you/is) anyone covered by CHAMPUS, CHAMP-VA, TRICARE, VA or some other type of military health insurance?

- 1 Yes
- 2 No (*go to COV10A*)
- 8 Don't know
- 9 Not available

(COV9C) Who is covered?

Interviewer selects the names of those who are covered.

- 1 NAME
- 2 NAME
- 3 NAME
- 4 NAME
- 5 NAME
- 6 NAME
- 7 NAME
- 8 NAME

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

(COV10A) Are (you/is anyone) covered by a state-sponsored or public health insurance program that I have not mentioned?

INT: THIS MAY INCLUDE MEDICARE FOR THE DISABLED, INDIAN HEALTH SERVICE OR HIGH RISK POOL.

- 1 Yes
- 2 No (*go to TESTC1C2, before NOPLAN*)
- 8 Don't know
- 9 Not available

(COV10C): Who is covered by this program?

Interviewer selects the names of those who are covered.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

INTERVIEWER: AFTER THEY ANSWER, SAY "Are there any others?"

Interviewer selects the names of those who are covered, selects "NO MORE" to move to next question.

- 1 NAME
 - 2 NAME
 - 3 NAME
 - 4 NAME
 - 5 NAME
 - 6 NAME
 - 7 NAME
 - 8 NAME
- NO MORE

TEST C1C2 If a household member is not covered under some plan, go to NOCHECK; Else go to CONTCOV.

(NOCHECK) According to the information I have, NAME, does not have health care coverage of any kind. Does NAME have health insurance or coverage through a plan that I might have missed?

INTERVIEWER: REPEAT IF NECESSARY

- 0 No, not covered by any plan
- 1 Health insurance from a current employer/union
- 2 Health insurance from a past employer/union
- 3 Health insurance bought on your own
- 4 A plan bought by someone who does not live in household
- 5 Medicare
- 6 HealthWave (also Family Health Partners, First Guard)
- 7 Medicaid or SRS medical card (also Health Connect, Primecare, First Guard)
- 8 CHAMPUS/CHAMP-VA, TRICARE, VA, Other Military
- 9 Other government plan (includes Medicare for disabled, Indian Health Services, High Risk Pool)
- 8 Don't Know
- 9 Not Available

Repeat test for each uninsured person

Once CATI has confirmed who is uninsured, ask the following questions for each household member who is uninsured:

(NINSREA): What is the main reason that (NAME) does not have health insurance?

READ LIST

- 1 Medical problems/pre-existing condition
- 2 Too expensive/can't afford it/premium too high
- 3 Don't believe in insurance
- 4 Don't need insurance/usually healthy
- 5 Free or inexpensive care is readily available
- 6 Employer doesn't offer it
- 7 Other (specify _____)
- 8 Don't Know
- 9 Not available

(NINSR2) Are there any other reasons that (NAME) does not have health insurance? Anything else?

DO NOT READ LIST

(CHECK ALL THAT APPLY)

- 1 Medical problems/pre-existing condition
- 2 Too expensive/can't afford it/premium too high
- 3 Don't believe in insurance
- 4 Don't need insurance/usually healthy
- 5 Free or inexpensive care is readily available
- 6 Employer doesn't offer it
- 7 Other (specify _____)
- 8 No other reasons
- 8 Don't Know
- 9 Not available

(LONGU) About how long have you (has NAME) been without health coverage? Has it been...(READ CHOICES)

- 1 Less than one month
- 2 One to six months
- 3 Seven to twelve months
- 4 One to two years
- 5 More than two years
- 6 Never had health insurance
- 8 Don't Know
- 9 Not available

(EVER) Have you (has NAME) ever been covered by Medicaid or an SRS medical card?

- 1 Yes
- 2 No (*go to test before HEAR1*)
- 8 Don't Know (*go to test before HEAR1*)
- 9 Not available (*go to test before HEAR1*)

(LOST) In the past two years, have you (has NAME) lost Medicaid coverage due to losing cash assistance?

INT: THEY ALSO MIGHT REFER TO THIS AS CASH GRANT BENEFIT, AFDC, OR TANF. IF DUE TO LOSING ANY OF THOSE, IT IS "YES."

- 1 Yes
- 2 No
- 8 Don't Know
- 9 Not available

Go to HLTHCR

(CONTCOV) Since February of 2000, was NAME OF INSURED continuously covered by health insurance?

- 1 Yes (*Go to test before HEARI*)
- 2 No
- 3 Continuously covered, but less than 1 Yr. (FOR INFANTS ONLY)
- 8 Don't Know
- 9 Not available

For each person coded 2 to CONTCOV, ask CONMNTH:

(CONMNTH) For how many months was NAME not covered by some type of health insurance plan?

- (1-12)
- 8 Don't know
- 9 Not available

Repeat CONTCOV and CONMONTH for all who are insured.

Section 2 Health Care

(HLTHCR) Now I am going to ask about the health care of people who live there.

PRESS 1 TO CONTINUE

For each person:

(HLTH) Would you say that NAME's health in general is excellent, very good, good, fair, or poor?

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair
- 5 Poor
- 8 Don't know
- 9 Not available

*Surveyer: The next set of questions will be about the respondent. We **are not** asking about everyone in the household at this point.*

(USRCE) INTERVIEWER: THE NEXT FEW QUESTIONS ARE ONLY ABOUT THE PERSON ON THE PHONE

Is there a particular clinic, hospital, health center or doctor's office that NAME usually goes to if sick or needs advice about his/her health?

- 1 Yes (*ask KPLACE*)
- 2 No (*skip to ERUSE*)
- 8 Don't know (*skip to ERUSE*)
- 9 Not applicable (*skip to ERUSE*)

(KPLACE) What kind of place is it?—a clinic, a hospital, a hospital emergency room, a doctor's office, or some other place?

INTERVIEWER: DO NOT READ LIST. IF NOT SURE WHICH RESPONSE FITS, CODE #7 AND ENTER TEXT

- 1 CLINIC OR HEALTH CENTER
- 2 URGENT CARE/WALK-IN CLINIC
- 3 DOCTOR'S OFFICE OR HMO (HEALTH MAINTENANCE ORGANIZATION/PREPAID GROUP)
- 4 HOSPITAL EMERGENCY ROOM
- 5 HOSPITAL OUTPATIENT CLINIC
- 6 MILITARY OR VA HEALTHCARE FACILITY, or
- 7 ANOTHER TYPE OF PLACE (specify_____)
- 8 Don't know
- 9 Not available

(ERUSE) In the last 6 months, how often did you go to the emergency room to get care for yourself?

(INTERVIEWER: RECORD HOW MANY TIMES)

- (0-999) times
- 8 Don't know
- 9 Not available

(DRUSE) In the last 6 months, not counting emergency room visits, how many times did you go to the doctor's office or clinic to get care for yourself?

- (0-999) times
- 8 Don't know
- 9 Not Applicable

(DELAY) In the past 12 months, was there any time when you needed medical care, but delayed or did not get it because you couldn't afford it?

INTERVIEWER: THIS DOES NOT INCLUDE DENTAL CARE. IF THEY SAY DENTAL CARE, PROBE BY ASKING, "OTHER THAN DENTAL CARE...?" AND REPEAT THE QUESTION IF NECESSARY.

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not available

(COST) When you go to the doctor, how much do you pay on average at the time of the visit?

READ LIST IF NECESSARY

- 1 Nothing
- 2 Less than \$10
- 3 \$10 to \$15
- 4 \$16 to \$20
- 5 \$21 to \$40
- 6 More than \$40
- 8 Don't know
- 9 Not available

*If no child of respondent in household, go to test before WORK. The next set of questions will be about one child (age 18 or under) who is the respondent's child, foster child or for whom the respondent is child's guardian. We **are not** asking about everyone in the household at this point.*

If more than one child fits this test, randomly select one child to ask about based on a random digit number.

STORE THE NAME OF THE CHILD SO WE CAN CONNECT THE DATA LATER

(USRCEC) These next few questions will be about (NAME)

Is there a particular clinic, hospital, health center or doctor's office that NAME usually goes to if sick or in need of advice about (NAME)'s health?

- 1 Yes (*ask KPLACEC*)
- 2 No (*skip to ERC*)
- 8 Don't know (*skip to ERC*)
- 9 Not applicable (*skip to ERC*)

(KPLACEC) What kind of place is it?—a clinic, a hospital, a hospital emergency room, a doctor's office, or some other place?

INTERVIEWER: DO NOT READ LIST. IF NOT SURE WHICH RESPONSE FITS, CODE #7 AND ENTER TEXT

- 1 CLINIC OR HEALTH CENTER
- 2 URGENT CARE/WALK-IN CLINIC
- 3 DOCTOR'S OFFICE OR HMO (HEALTH MAINTENANCE ORGANIZATION/PREPAID GROUP)
- 4 HOSPITAL EMERGENCY ROOM
- 5 HOSPITAL OUTPATIENT CLINIC
- 6 MILITARY OR VA HEALTHCARE FACILITY, or
- 7 ANOTHER TYPE OF PLACE (specify_____)
- 8 Don't know
- 9 Not Applicable

(ERUSEC) In the last 6 months, how often did you go to the emergency room to get care for NAME?

(INTERVIEWER: RECORD HOW MANY TIMES)

- (0-999) times
- 8 Don't know
- 9 Not Applicable

(DRUSEC) In the last 6 months, not counting emergency room visits, how many times did you go to the doctor's office or clinic to get care for NAME?

- (0-999) times
- 8 Don't know
- 9 Not Applicable

(DELC) In the past 12 months, was there any time when NAME needed medical care, but delayed or did not get it because you couldn't afford it?

INTERVIEWER: THIS DOES NOT INCLUDE DENTAL CARE. IF THEY SAY DENTAL CARE, PROBE BY ASKING, "OTHER THAN DENTAL CARE...?" AND REPEAT THE QUESTION IF NECESSARY.

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not Applicable

(COSTC) When you take NAME to the doctor, how much do you pay on average at the time of the visit?

READ LIST IF NECESSARY

- 1 Nothing
- 2 Less than \$10
- 3 \$10 to \$15
- 4 \$16 to \$20
- 5 \$21 to 40
- 6 More than \$40
- 8 Don't know
- 9 Not Applicable

Go to demographic section

Section 3 Demographics

(WORKINT) The next series of questions is about jobs and earnings. Answers to these questions are very important because they help to explain whether or not people can afford the health care they need. I want to emphasize this information is confidential and will be used for statistical purposes only. We will be asking about family members 18 years and older in your household.

TEST: for each person in the household 18 years and older or married ask:

(WORK) Is NAME now employed at a job or business?

INTERVIEWER: IF RESPONDENT HAS A JOB BUT IS HOME BECAUSE OF AN ILLNESS, VACATION, OR STRIKE, TYPE 1 FOR YES

- 1 Yes (*go to TEST before WRK1*)
- 2 No (*go to WRK3*)
- 8 DON'T KNOW (*go to WRK3*)
- 9 Not available (*go to WRK3*)

TEST: if REL=0, 1, 2 or 12 go to WRK2, else go to WRK1.

(WRK1) Do NAME's earnings from this job contribute to the family income?

- 1 Yes (*go to WRK2*)
- 2 No (*go to EDUCAT*)
- 8 DON'T KNOW (*go to EDUCAT*)
- 9 Not available (*go to EDUCAT*)

(WRK2) Is NAME working for an employer, self-employed or both?

- 1 Working for employer (*go to PLWK*)
- 2 Self-employed only (*go to PLWK*)
- 3 Working for an employer and self-employed (*go to PLWK*)
- 8 DON'T KNOW (*go to WRK3*)
- 9 Not available (*go to WRK3*)

(WRK3) Is NAME unemployed but looking for work, not looking for work or is NAME retired?

- 1 Unemployed but looking for work (*go to EDUCAT*)
- 2 Not looking (*go to EDUCAT*)
- 3 Retired (*go to EDUCAT*)
- 8 Don't know (*go to EDUCAT*)
- 9 Not available (*go to EDUCAT*)

(PLWK) What kind of place does NAME work for?

INTERVIEWER- PROBE IF NEEDED: What kind of company/What is their primary job?

****HIT THE F1 KEY TO SEE DEFINITION OF THE JOB TYPES****

- 1 AGRICULTURAL, FORESTRY OR FISHING (e.g., farms, orchards, nurseries, timber, tree farms, fish hatcheries)
- 2 MINING (e.g., coal, rock quarry, oil/gas extraction)
- 3 UTILITIES OR COMMUNICATION (e.g., electric, gas, telephone, cable, water resources, wastewater, waste management)
- 4 CONSTRUCTION (e.g., general contractors, heavy construction, repair of structures including plumbing, heating)
- 5 MANUFACTURING (e.g., meat packing, food processing, pet foods, aircraft, avionics, chemicals, petroleum/gas refining, glass, metal, wood products)
- 6 TRANSPORTATION (e.g., railroads, trucking, airlines, storage, pipeline distribution, distribution centers, post office, courier services, highway maintenance)
- 7 WHOLESALE TRADE (items sold to manufacturers or retailers)
- 8 RETAIL TRADE (items for personal or household use, home furnishings, gas stations, clothing stores, food and beverage stores, restaurants and bars)
- 9 FINANCE, INSURANCE OR REAL ESTATE (e.g., Realtors, stockbrokers, property maintenance, credit services, banking, tax services)
- 10 BUSINESS AND REPAIR SERVICES (e.g., advertising, credit reports, commercial art, data processing, news syndicates, temp services)
- 11 PERSONAL SERVICES (e.g., laundry, beauty/barber, funeral, child care)
- 12 ENTERTAINMENT AND RECREATION SERVICES (e.g., museum, movie theater, hotel)
- 13 HEALTH SERVICES (e.g., hospital, doctor's office, HMOs, dental/health clinics, mental health)
- 14 EDUCATIONAL SERVICES
- 15 SOCIAL SERVICES (e.g., nonprofit agencies, churches, youth agencies)
- 16 OTHER PROFESSIONAL SERVICES (e.g., law offices, engineering firms, management consultants)
- 17 PUBLIC ADMINISTRATION
- 18 OTHER (please describe PLACE_____)
- 8 Don't know
- 9 Not Available

(SECTOR) Is that job for the government, private industry, or is NAME self-employed?

- 1 Government
- 2 Private Industry (*go to BEPNUMB*)
- 3 Self-employed (*go to BEPNUMB*)
- 8 Don't know (*go to BEPNUMB*)
- 9 Not available (*go to BEPNUMB*)

(STATE) Is NAME employed by the State of Kansas?

- 1 Yes
- 2 No
- 8 Don't Know
- 9 Not available

(BEMPNUMB) Counting all locations where this business operates, what is the total number of persons who work for this business?

INTERVIEWER: THIS INCLUDES ALL THE EMPLOYEES WHO WORK FOR THIS BUSINESS, NOT JUST THOSE AT A PARTICULAR LOCATION.

PROBE IF NEEDED: Could you give me a specific number? Your best estimate is fine.

- 1 – 4 employees
- 5 – 9 employees
- 10-24 employees
- 25-49 employees
- 50-99 employees
- 100-249 employees
- 250-499 employees
- 500-999 employees
- Or are there 1,000 employees or more?
- Don't Know
- Not Available

(EST) Thinking about the particular location or facility where you work, how many people are employed there, full or part time?

- 1 – 4 employees
- 5 – 9 employees
- 10-24 employees
- 25-49 employees
- 50-99 employees
- 100-249 employees
- 250-499 employees
- 500-999 employees
- Or are there 1,000 employees or more?
- Don't Know
- Not Available

(WORKHRS) How many hours per week does NAME usually work at this job?

IF PERSON NORMALLY WORKS OVERTIME INCLUDE THOSE HOURS

(1-80) (*go to SEASON*)

-8 Don't know

-9 Not available

(HRSRNG) Would you say the job is full-time or part-time?

1 Full-time

2 Part-time

-8 Don't know

-9 Not available

(SEASON) Is this job a seasonal job? (Is this a job that only gets filled during certain parts of the year?)

1 Yes

2 No (*go to LENGT*)

-8 Don't know (*go to LENGT*)

-9 Not available (*go to LENGT*)

(WEEKS) How many weeks during the year does NAME usually work at this job? Include vacation and sick leave as work time.

(1-52)

-8 Don't know

-9 Not available

(LENGT) How many years has NAME been working for this employer?

(1-80) (*go to WORK2*)

-7 GIVE MONTHS IF ANSWER GIVEN IN MONTHS

-8 Don't know (*go to WORK2*)

-9 Not available (*go to WORK2*)

(LENGT2)

INTERVIEWER: ENTER MONTHS

(1-36) months

(WORK2) Is NAME paid by the hour on his/her main job?

- 1 Yes (*go to PAY1*)
- 2 No (*go to PAY2*)
- 8 Don't Know
- 9 Not Available

(PAY1) How much does NAME make per hour?
Include Overtime, Tips, Bonuses.

- (1.00 - 100.00)
- 8 Don't know
- 9 Not available

INTERVIEWER: REMIND PERSON IF HESITANT THAT THIS IS
CONFIDENTIAL, STATISTICAL INFORMATION ONLY AND WILL HELP
PROVIDE INFORMATION TO DEVELOP AFFORDABLE HEALTH CARE PLANS.

Go to UNION after this question.

(PAY2) How much does NAME usually earn at this job ANNUALLY before deductions?

Include overtime, tips, bonuses.

- (1-500000)
- 8 Don't know
- 9 Not available

INTERVIEWER: REMIND PERSON IF HESITANT THAT THIS IS
CONFIDENTIAL, STATISTICAL INFORMATION ONLY AND WILL HELP
PROVIDE INFORMATION TO DEVELOP AFFORDABLE HEALTH CARE PLANS.
INCLUDE OVERTIME, TIPS, BONUSES.

(UNION) On this job, is NAME working under a union contract or collective agreement?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not available

(PAY4) Does NAME have any other jobs besides the primary one that we just talked about?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not available

(PAY4A) How much does NAME usually earn at this job ANNUALLY before deductions?

Include overtime, tips, bonuses.

(1-500000)

- 8 Don't know
- 9 Not available

INTERVIEWER: REMIND PERSON IF HESITANT THAT THIS IS CONFIDENTIAL, STATISTICAL INFORMATION ONLY AND WILL HELP PROVIDE INFORMATION TO DEVELOP AFFORDABLE HEALTH CARE PLANS. INCLUDE OVERTIME, TIPS, BONUSES.

*TESTWRK: If WORK =1 then ask EMP2 through PREM4; else go to EDUCAT.
(If wrk1 = 2 (no), -8(DK), or- 9(RF), skip to EDUCAT)*

Surveyer please note that the question sequence beginning with EMP2 and ending with PREM4 will be asked of each household member who is WORK=1. Please ask this sequence of ALL WORK=1 before going on to next question sequence that begins with EDUCAT.

(EMP2) Does NAME'S current employer or union offer a health insurance plan to any of its employees?

- 1 Yes
- 2 No (*go to next person who is WORK=1*)
- 8 Don't know (*go to next person who is WORK=1*)
- 9 Not available (*go to next person who is WORK=1*)

(EMP3) Is NAME eligible to enroll in this health insurance plan?

- 1 Yes
- 2 No (*go to next person who is WORK=1*)
- 8 Don't know (*go to next person who is WORK=1*)
- 9 Not available (*go to next person who is WORK=1*)

(EMP3A) Is the insurance that NAME is eligible for...
INTERVIEWER: READ CHOICES

- 1 Employee coverage only
- 2 Family coverage
- 8 Don't know
- 9 Not available

(EMP4) Is NAME enrolled in this health insurance plan?

- 1 Yes
- 2 No (*go to W1*)
- 8 Don't know (*go to PLNCHIL*)
- 9 Not available(*go to PLNCHIL*)

(EMP5) Is NAME enrolled in employee coverage only or family coverage?
(*If person was only eligible for employee coverage (emp3a=1), store "1" for response below and skip to PREMI*)

- 1 Employee coverage only (*if EMP3A=1, go to PREMI; if EMP3A=2, and there are no children under 22 in the household, go to PREMI; if EMP3A=2 and there are children under 22 in the household, go to W2*)
(*Those 22 & younger who are married are not included*)
- 2 Family coverage (*go to PLNCHIL*)
- 8 Don't know (*go to PLNCHIL*)
- 9 Not available (*go to PLNCHIL*)

(W1) Why is NAME not covered through his or her employer?

INTERVIEWER: READ EACH ONE AND INDICATE ALL THAT APPLY

- 1. Covered through other family member
 - 2. Covered through a public program
 - 3. Too expensive
 - 4. Didn't like the benefit package
 - 5. Didn't like the doctors in the plan
 - 6. Don't believe in health insurance
 - 7. OTHER REASON: (Specify_____)
 - 8 Don't know
 - 9 Not Available
- NO MORE

Go to EDUCAT

Test: Only ask plnchil if there are children 22 years of age or younger and not married in the house.

(PLNCHIL) Let me confirm, are ALL the children 22 years of age or younger covered by this plan?

INTERVIEWER: IF NO, ASK "Are there ANY children covered by this plan?" IF NO, TYPE 3.

- 1 Yes all the children are covered (*go to PREM2*)
- 2 No, NOT ALL OF the children are covered (*go to W2*)
- 3 NO, NONE OF THE CHILDREN ARE COVERED (*go to W2*)
- 8 Don't know (*go to PREM2*)
- 9 Not available (*go to PREM2*)

(W2) Why are the children not covered through NAME's employer?

INTERVIEWER: READ EACH LIST ITEM AND CHOOSE ALL THAT APPLY

- 1. Covered through another family member
 - 2. Covered through a public program
 - 3. Too expensive
 - 4. Didn't like the benefit package
 - 5. Didn't like the doctors in the plan
 - 6. Don't believe in health insurance
 - 7. OTHER--ASK IF THERE ARE REASONS: Other: Specify _____
 - 8 Don't know
 - 9 Not available
- NO MORE

(PREM1 for employee-only, PREM2 for family coverage) About how much does NAME have to pay out of each paycheck for his/her share to get insurance through his/her employer? Your best guess is fine.

INTERVIEWER: GET AMOUNT IN DOLLARS PER PAYCHECK. CLARIFY THIS BY ASKING: "IS THIS FOR ONE PAY PERIOD?"

\$ (0-5000) PER PAYCHECK

- 8 Don't know
- 9 Not available

(PREM3) How often is NAME paid? Once every month, every two weeks, every week or something else?

1. Every month
2. Every two weeks
3. Every week
4. Other—specify_____
- 8 Don't know
- 9 Not available

(PREM4) How confident are you that your estimate is within \$20.00 of the actual employee share of the premium?

INTERVIEWER: READ CHOICES

- 1 Very confident (You looked at the pay stub)
- 2 Confident
- 3 Somewhat confident
- 4 Not confident at all
- 8 Don't know
- 9 Not available

Repeat starting at TESTWK for all hh members 18 and older or married

(EDUCAT) What is the highest level of school NAME has ever completed?

- 1 Less than high school
- 2 Completed high school
- 3 Some college or associates degree
- 4 Completed four years of college
- 5 Some graduate education
- 6 Graduate degree
- 8 Don't know
- 9 Not available

Repeat for all hh members 18 and older or married

For each hh member who is 18 years of age or older or married

(HISP)

(IF NECESSARY: The next questions may be sensitive. We are asking so that we can better understand differences in health care problems and needs.)

Is NAME of Spanish or Hispanic origin?

- 1 Yes (*go to RACE*)
- 2 No (*go to RACE*)
- 8 Don't Know
- 9 Not Available

(RACE) What race does NAME consider him/herself to be?

- 1 White
- 2 Black
- 3 Native American Indian/Eskimo
- 4 Asian/Pacific Islander
- 5 Other Specify _____
- 8 Don't Know
- 9 Not Available

Repeat for all 18 years of age or older or married

(HHINCOME). For everyone who lives there that is related to you by blood, marriage or adoption...from all sources, what is the gross (before taxes) yearly FAMILY income. Your best guess is fine.

- 1. Less than \$4,999
- 2. \$5,000 to \$9,999
- 3. \$10,000 to \$14,999
- 4. \$15,000 to \$19,999
- 5. \$20,000 to \$24,999
- 6. \$25,000 to \$34,999
- 7. \$35,000 to \$44,999
- 8. \$45,000 to \$54,999
- 9. \$55,000 to \$64,999
- 10. \$65,000 to \$74,999
- 11. \$75,000 to \$84,999
- 12. \$85,000 to \$94,999
- 13. \$95,000 or more
- 8 Don't Know
- 9 Not Available

(PHONE1) In the last 12 months, was there any time that you did not have a working telephone for two weeks or more?

- 1 Yes (go to PHONE2)
- 2 No (go to OTHPHN)
- 8 Don't know (go to OTHPHN)
- 9 Not available (go to OTHPHN)

(PHONE2) For how many weeks in the last 12 months did you not have a working telephone for two weeks or more?

(2-52)

-8 Don't know

-9 Not available

(OTHPHN) Are there any other telephone numbers in this household besides (FILL IN PHONE NUMBER) that people receive calls on?

1 Yes

2 No (go to ZIPCD)

-8 Don't know (go to ZIPCD)

-9 Not available (go to ZIPCD)

(OTHPHN2) How many?

(1-99)

-8 Don't Know

-9 Not Applicable

(1) go to OTHPHN3

(2-99) go to OTHPHN4

(OTHPHN3) Is this line used for business purposes only?

1 Yes (go to ZIPCD)

2 No (go to ZIPCD)

-8 Don't know (go to ZIPCD)

-9 Not available (go to ZIPCD)

(OTHPHN4) How many of these lines are used for business purposes?

(1-99)

-8 Don't know

-9 Not applicable

(ZIPCD) What is your zip code?

(60000-75000)

-8 Don't Know

-9 Not Available

(COUNTY) In what county in Kansas do you live?

OFFER LIST OF COUNTIES WITH NUMERIC CODE

(HLTHIMP) Is there something that I haven't asked you about your family's health care that you think is important for us to know?

INTERVIEWER: RECORD ANSWER WORD FOR WORD AS CLOSELY AS POSSIBLE.

(CALLBACK) And finally, we might like to call you back in a year to ask additional questions about your family's health care. May I keep your first name and phone number so that we could call you back?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Not available

(THANKYOU) Thank you for your time. Your responses will help us to develop better health insurance plans for families in Kansas.

Appendix C

Data Collection Details

Appendix C

Data Collection Details

The University of Florida Bureau of Economic and Business Research used Sawtooth WinCATI software. The interviewing stations consist of a computer and telephone in a carrel lined with sound-absorbing material. Most interviewers wear telephone headsets so that hands are free for operating the computer.

In order to assure confidentiality of survey participants, each telephone number in the sample was identified by a unique identification number. The software scheduled cases for an appropriate calling time. When an interviewer signaled readiness for a case, either because they had just started a shift or had finished a previous case, the computer dialed the number automatically. The telephone number appeared on the screen as it was dialed.

When someone answered the telephone, the interviewer went through an introduction and screening process before a respondent could be interviewed. The interviewer introduced themselves and their affiliation with the University, explained the voluntary nature of the survey and offered a brief description of the study. A script was provided, but interviewers were also encouraged to understand the purposes of the survey so that they could offer a convincing explanation in their own words to respondents who had questions.

There are several advantages to using CATI, including the following:

1. Eliminating data entry. With pen-and-paper questionnaires, responses must be entered into the computer before data analysis can begin. CATI allows interviewers to enter data directly into the computer, eliminating errors in transcription and facilitating a faster turnaround time from interview to data.

2. Minimizing inappropriate answers. CATI specifies the range of answers for a given question, and will not allow an interviewer to enter an inappropriate response. CATI will tell the interviewer to "TRY AGAIN." (For example, when asking how many weeks during the past year respondents were without telephone service, numbers greater than 52 could not be entered.)

3. Automatic execution of skip patterns. Electronic questionnaires can be complex, because CATI automatically gives the interviewer the next question, based on previous responses which have been entered. The problem of interviewers following an incorrect path of questioning—a real challenge in pen-and-paper surveys—never happens with CATI. The branching point for a question is not limited to response from the preceding item. CATI is able to "remember" earlier answers and incorporate them into the decision. For example, our survey asked about the age of household members at the beginning of the survey. Toward the end of the interview, we asked about employment status only for adults. CATI was able to use the earlier responses in assessing whether the employment question should be asked or skipped.

4. Simplification of wording. Pen-and-paper questionnaires often require interviewers to ask questions like, "How long has he/she rented/owned this house/apartment?" With a paper instrument, the interviewer has to remember earlier information, or ask an awkward question. With CATI, wording can be tailored to the exact situation, based on earlier responses. For our survey, CATI appropriately asked about "your health" or "John's health," automatically filling in the appropriate name.

Each question in the electronic questionnaire is flashed up on the screen, with numbers next to each choice. The cursor appears at the bottom of the screen, and the interviewer enters the appropriate number. A typical CATI question looks like this:

REGCALL
In the last 6 months, did you call a doctor's office or clinic during regular office hours to get help or advice for yourself?
1 Yes
2 No
-8 Don't know
-9 Not available
<input type="text"/>

With CATI, the act of entering data is not irrevocable. By using certain commands, the interviewer could jump back and forth within the questionnaire, and change answers as appropriate. When an answer was changed the skip pattern may have been altered, but CATI automatically took the case to the next appropriate question.

At most steps along the way, the interviewer entered a numerical answer into the computer. But for many questions in the instrument, respondents could also give an "other—specify" response if their answer didn't fit the predefined categories. Interviewers simply typed the text of the respondent's answer. Later, survey administrators examined all answers for that item and grouped the responses into categories, with each category designated by a number. Then coders went through each case and assigned the appropriate number to every open-ended response.

Interviews were conducted during as many as four 3-hour shifts on each day of the week. Interviewing was never done earlier than 9 a.m. or later than 9 p.m., respondents' local time.

Interviewers received several hours of instruction, and observed another interviewer for a shift as part of the training process.

To enhance the response rate, procedures included multiple callbacks for phone numbers that were busy or no answer. Each case was dialed at least eight times, including calls at different times of the day. Additionally, callback appointments could be scheduled for a future time that was more convenient for the respondent.

During each shift, at least one interviewer was monitored. Without prior notice, a supervisor listened in from a reception-only phone line in another room. The supervisor noted the interviewer's performance and met with the interviewer afterward, offering suggestions for improvement if needed. A schedule for monitoring was planned in advance so that all interviewers were monitored on a regular basis.

Performance records were maintained for each interviewer, so that administrators could ensure that each interviewer met standards of performance. These statistics included productivity (interviews per hour), refusals, and refusal conversions.

Even the very best interviewers get some refusals. Some people just hang up the phone at the introduction. Limiting the number of refusals is a crucial component of survey research. Not only do refusals decrease the response rate, but they can skew the representativeness of the sample, since refusals may not occur randomly across the population. Refusers are more likely to be older than 30, married and middle-income.

For the Kansas Health Insurance Study, refusals were minimized through an aggressive program of prevention and conversion. Special interviewer training was devoted to handling reluctant respondents. All refusal cases were called back a second time, if possible on a different day of the week, at a different time, by an interviewer of a different gender than the original caller.

**Appendix D-1
Sample Design
and
Implementation**

Appendix D-1

Sample Design and Implementation

In order to conduct a telephone survey of Kansas residents about their health insurance status, it was necessary to develop an appropriate sampling design that would enable us to achieve the specified goals of the KHIS. Moreover, a sampling design that was carefully constructed and appropriately implemented would achieve the maximum possible statistical precision given the sample size allowed by our research budget. In this way, we could make the most precise statements possible about insurance coverage in Kansas by reducing the degree of uncertainty inherent in any study involving sampling.

The most straightforward probabilistic sampling design would involve simple random sampling. With simple random sampling, every phone number in Kansas would have an equal likelihood of receiving a call from one of our interviewers. The major advantage of this design is its simplicity. Such a design is easy to understand and the data produced by such a design can be analyzed using standard statistical tools.

Unfortunately, simple random sampling has a major drawback when applied to our study. The characteristic of interest in our study (lack of health insurance) is distributed broadly across the population, but is known to be concentrated in particular sociodemographic groups (i. e., low income, African American and Hispanic). In addition, the characteristic of uninsurance is relatively rare, generally present in less than 20 percent of the overall population. Given these circumstances, simple random sampling requires an unusually large sample size to achieve a desirable level of statistical precision for the characteristic of interest.

To ensure that the primary parameters of interest could be estimated with the anticipated margins of error, we faced two major challenges: (1) the nonrandom distribution across the state of the characteristics of major interest (insurance status, race, and poverty), and (2) the relative paucity of existing data on the precise distributions of these characteristics. While these challenges were addressed in part by drawing a relatively large sample, other techniques were also employed.

To meet these challenges, we proposed and executed a stratified random sampling design. Stratification produces a gain in precision of the parameter estimates. By dividing a heterogeneous population into relatively homogeneous subpopulations, a precise estimate of any stratum proportion can be obtained from relatively small samples in that stratum. This approach simultaneously preserved our ability to (1) obtain probabilistic results for the sample as a whole, and (2) oversample key groups of interest (Black, Hispanic and low-income residents) to obtain more precise estimates for these groups.

By weighting the different strata in our sample, we calculated estimates for the various geographic subdivisions (Regions) and the state as a whole, and specified the statistical precision of the estimates. Detailed technical information on the sample weighting procedures is contained in Appendix D-3.

The stratified random sampling design was built on the relationship of telephone exchanges to geographic areas. A telephone exchange consists of the area code and the first three numbers of a 7-digit phone number. Each of the 10-geographic regions covering Kansas corresponds¹ to a group of telephone exchanges. For each telephone exchange, the number of telephone households within that exchange was known. Also known were the percent of Black residents, percent of Hispanic residents, the percent of White residents, and the percent of low-income residents. Low income was defined to be a household income of less than \$25,000 per year. The necessary data were obtained from the GENESYS Sampling Systems database.²

This information about the demographics of the population served by various telephone exchanges was used to classify telephone exchanges within each region into eight mutually exclusive and exhaustive strata. These strata were based on whether the exchange was above or below the state median for proportion Black, proportion Hispanic, and proportion low-income. For each region, the strata were enumerated as follows:

Stratum	Median Percent Black In State	Median Percent Hispanic In State	Median Percent Low Income In State
Stratum 1	Above	Above	Above
Stratum 2	Above	Above	Below
Stratum 3	Above	Below	Above
Stratum 4	Above	Below	Below
Stratum 5	Below	Above	Above
Stratum 6	Below	Above	Below
Stratum 7	Below	Below	Above
Stratum 8	Below	Below	Below

With eight strata for each of 10 geographical regions, a theoretical maximum of 80 strata existed. In particular regions, the number of listed telephone households falling within particular strata was sufficiently small so as to warrant combining strata. A minimum of 2,000 listed telephone households was required to form an individual stratum. A stratum with fewer than 2,000 listed households was combined with the most similar stratum. This process for forming strata produced 36 final strata in the sample design.

The next task was to allocate the available sample size across the 30 strata. To optimize our allocation, we applied a procedure developed in 1934 by statistician Jerzy Neyman.

¹ The correspondence of telephone exchanges to the specified groups, while not exact, provides a sound basis for this sampling technique.

² GENESYS is a commercial database. GENESYS data are based on the 1990 Census updated using the most recent Current Population Survey data.

Neyman's procedure dictates that a larger sample should be taken if the stratum is large and/or the stratum has more internal variability. For estimating the proportion of uninsured residents, higher uninsurance rates (approaching 50 percent) correspond to large variances; thus, strata with a high uninsurance rate (as estimated from the data sources described below) received a larger allocation of the available sample.

The allocation was based on estimating variance in health insurance coverage by using prior information from available sources. Specifically, we used data on health insurance and socioeconomic characteristics in the nation from the March 2000 Supplement to the Current Population Survey (CPS). While this is not ideal for our purposes, the CPS estimates constitute the best information available for sample allocation.

The sampling implementation followed a modified replicate approach³ where representative subsamples were released and worked to final disposition by BEBR interviewers. This approach avoided a major pitfall of simple quota sampling where interviewing stops when the stratum quota is reached. Under quota sampling, there is a danger of interviewing only those individuals who are easiest to reach by telephone. Since the characteristics of such individuals may differ from the overall population, bias may be introduced. Pursuing a replicate approach reduced such opportunities for bias.

Early in the data collection period, larger subsamples were released. Subsequently, as strata began to approach their target sample sizes, smaller subsamples were released to minimize the cost of target sample overruns. Since each released case is worked to final disposition, the final sample size was an uneven number slightly greater than our goal of 8,000 interviews.

Our final sample yielded 8,004 households and 22,690 individuals statewide. The distribution of individuals across geographic regions is presented in Table 2.

Number of Individuals in Each Geographic Region	
Statewide	22,690
Region 1	1706
Region 2	3278
Region 3	2215
Region 4	1588
Region 5	2422
Region 6	3693
Region 7	2574
Region 8	2094
Region 9	1304
Region 10	1816

³ Replicates are systematically nth-selected subsets of the sample itself. Individual replicates are released and worked to final disposition before moving on to the next replicate in order to ensure a representative sample.

Appendix D-2
Cooperation
and
Response Rates

Appendix D-2

Response Rates

After the allocation of the sample to the 36 strata formed from telephone exchanges (see appendix D-1), phone numbers were randomly selected in each stratum using a list-assisted RDD (random digit dialing) methodology. The list-assisted RDD method looks at all telephone “banks” (if a phone number is (XXX)YYY-ABCD, a “bank” is the set of all possible numbers beginning with (XXX) YYY-AB). If there is at least one published residential number in the bank, then the bank is called a “working bank.” Phone numbers for the study were selected randomly from working banks. Information about working banks in Kansas was provided by GENESYS Sampling Systems of Fort Washington, Pennsylvania.

Interviewers called each selected phone number and assigned a final disposition code to each “case.” These disposition codes were then categorized into the following groups for the purpose of cooperation and response rate calculations:

Eligible respondents (ER) were defined to be those whose telephone number is a residential service line, whose household includes at least one household member who is under age 65, and who completed at least through the insurance question sequence.

Eligible non-respondents (ENR) included those who terminated the interview before the end of the insurance sequence, refusals, those who were physically or mentally disabled for survey participation, and those who were unable to complete the survey because of language barriers.

Non-working numbers (NWRK) included technical phone problems, disconnected numbers, and changed numbers.

Non-residential numbers (NRES) included businesses, FAX lines, cell phones, group quarters, and institutions.

Ineligible for survey (IN) consisted of households where all members were 65 years of age and older.

In cases where there was any ambiguity about disposition category assignment, the decision rule was to assign the phone number to the “eligible non-respondent” category. In this way, the cooperation and response rates would be most conservatively calculated.

Final disposition categories are given with corresponding symbols used in formulas:

<i>Formula Symbol</i>	<i>Final Disposition Category</i>	<i>Number</i>
ER	Eligible respondents	8,004
ENR	Eligible non-respondents	7,054
URS	Non-contact (no answer and busy) with residential status undetermined	3,586
UE	Non-contact (answering machine) with residential status determined	921
NWRK	Non-working numbers	3,600
NRES	Non-residential numbers	2,488
IN	Ineligible for survey	3,586
	<i>Total</i>	29,175

The cooperation rate of a survey is the proportion of all cases interviewed over all eligible units ever contacted. To determine the cooperation rate for the KHIS survey, we divide the number of eligible respondents by the sum of the eligible respondents and non-respondents. The cooperation rate formula is given by:

$$\mathbf{COOP} = \mathbf{ER} / (\mathbf{ER} + \mathbf{ENR}),$$

where **ER** is the number of eligible respondents and **ENR** is the number of eligible non-respondents. The cooperation rate (**COOP**) is calculated to be 53.2 percent.

The response rate is the number of complete interviews with reporting units divided by the number of eligible reporting units in the sample. There are many formulas for determining the response rate of a survey that depend on varying assumptions about the eligibility status of non-contacted phone numbers. The response rate calculation uses a formula that estimates the proportion of residences and the proportion of eligible residences. These estimated proportions are applied to cases of undetermined eligibility status and undetermined residential status. The number of eligible reporting units in the sample is then calculated as the sum of known eligible units, the estimated eligible proportion of undetermined eligible residences, and the estimated eligible proportion of units which have undetermined residential status.

The response rate formula is given by:

$$\mathbf{RR} = \mathbf{ER} / (\mathbf{ER} + \mathbf{ENR} + \mathbf{pe} * \mathbf{UE} + \mathbf{pe} * \mathbf{pr} * \mathbf{URS}),$$

where **pe** is the estimated proportion of eligible respondents, **UE** is the number of residences with undetermined eligibility, **pr** is the estimated proportion of residences, and **URS** is the number of units with undetermined residential status. The formulas for **pe** and **pr** are given by:

$$\mathbf{pe} = (\mathbf{ER} + \mathbf{ENR}) / (\mathbf{ER} + \mathbf{ENR} + \mathbf{IN}),$$

$$\mathbf{pr} = (\mathbf{ER} + \mathbf{ENR} + \mathbf{UE} + \mathbf{IN}) / (\mathbf{ER} + \mathbf{ENR} + \mathbf{UE} + \mathbf{IN} + \mathbf{NWRK} + \mathbf{NRES}),$$

The response rate (**RR**) is calculated to be 44.4 percent.

Appendix D-3

Weighting

Appendix D-3

Weighting

Our survey responses need to be weighted because of our complex sampling design. Had we chosen to use a simple random sampling design, weights would not have been necessary. In a simple random sample, each household carries an equal probability of selection and hence contributes an equal amount of information to the overall sample, making data analysis relatively straightforward. Unfortunately, simple random sampling may miss important population groups, such as the uninsured, that are scattered throughout the population but concentrated in economically disadvantaged groups. In order to obtain a sufficient number of cases in such a hard-to-reach population using random sampling, the overall sample size may need to be so large as to make the survey prohibitively costly.

Fortunately, we can use disproportionate random sampling within strata to obtain an adequate number of cases among the uninsured while keeping costs to a minimum. We sampled disproportionately among demographic groups that were known to lack health insurance: African Americans, Hispanics, and the poor. In so doing, we ensured that we would have enough cases to make meaningful inferences about the uninsured. However, this benefit was obtained at the cost of making our sample unrepresentative of the overall Kansas population. As a result of our disproportionate sampling, our sample over-represented African Americans, Hispanics, and the poor, while under-representing Kansas residents who did not fall into these groups.

By weighting our sample, we are able to make our disproportionate sample resemble the overall Kansas population. We do this by decreasing the relative weight on African Americans, Hispanics, and the poor in order to compensate for their over-representation in our sample. In addition, we increase the relative weight on observations in our sample that fall outside these groups in order to compensate for their under-representation in our sample. In this way, we are able to achieve the twin goals of making reliable inferences about the uninsured and ensuring the representativeness of our overall sample.

Analytical weights were used to:

- a) achieve accurate representation of households by adjusting to accommodate the survey design,
- b) adjust for over-representation of households with multiple phone numbers,
- c) adjust for under-representation of households experiencing interruption of telephone service in the past year,
- d) compensate for differential nonresponse due to stratifying variables, and
- e) reduce potential bias of estimates by using auxiliary population distributions (i.e., poststratification).

The analytical weights are the product of *expansion weights*, *multiline adjustment weights*, *interrupted telephone service weights*, and a *poststratification adjustment*. An adjustment is made to compensate for nonresponse within each strata. Relative weights are computed by dividing the nonresponse adjusted expansion weight by the mean expansion weight. Details of computation for each component of the analytic weight are given below.

The first stage in the weighting process is the construction of *expansion weights*. The expansion weight for a sample unit is constructed as the inverse of the sampling fraction. The sampling fraction is the probability of selection and depends on the occurrence of the following events:

- a) a phone number must be selected from a working bank (see Appendix D-2 for explanation of a working bank),
- b) household status is determined,
- c) household eligibility status is determined (i.e., at least one household member is under the age of 65), and
- d) the eligible resident chooses to participate in the survey.

Thus the probability of household and respondent inclusion in the survey is the probability that all four events above occur. To elucidate weight formula construction, let **SEL** denote the probability that a phone number is selected, **HH** denote the event that the selected phone number's residential status is determined, **ELG** denote the event that a household's eligibility status is determined, and **RSP** denote the event that the eligible resident chooses to participate in the survey. The probability of survey inclusion is then given by

$P[\mathbf{SEL} \text{ and } \mathbf{HH} \text{ and } \mathbf{ELG} \text{ and } \mathbf{RSP}]$,

which is equivalent to

$P[\mathbf{SEL}] * P[\mathbf{HH} | \mathbf{SEL}] * P[\mathbf{ELG} | \mathbf{HH} \text{ and } \mathbf{SEL}] * P[\mathbf{RSP} | \mathbf{ELG} \text{ and } \mathbf{HH} \text{ and } \mathbf{SEL}]$.

An expansion weight (the sampling fraction inverse) was computed for each of the 30 strata, then divided by the stratum response rate (to adjust for the differential nonresponse). Relative weights were then constructed by computing the mean of the response rate adjusted expansion weights and dividing each weight by this mean. A **multiline adjustment weight** was computed based on a survey question which asked if there were other phone lines in the house on which calls were received. An adjustment was also made for possible interruption in telephone service. The **interrupted service adjustment weight** was calculated to be 52 divided by the number of weeks of uninterrupted service.

The product of the relative weight, multiline adjustment weight, and interrupted service adjustment weight was computed. A 1% trimming procedure was used to limit extreme values. The final stage of analytic weight development was the poststratification adjustment. Population marginals in each of the 10 regions were computed based on age, sex and race distributions obtained from 2000 Census estimates. Ratios were constructed by comparing the population marginal percentages with the sample marginal percentages. The analytic weight for each case was then computed by multiplying the poststratification ratio and the trimmed weight.

Appendix D-4

Variance Estimation

Appendix D-4

Confidence Intervals

The sample design includes stratification, clustering, and disproportionate sampling. This complex sample design may result in serious departures from the assumptions of simple random sampling. Furthermore, the sampling weights reflect differential adjustments for survey nonresponse and poststratification. These survey design and estimation complexities require special consideration with regard to variance estimation. To obtain accurate estimates of the standard errors associated with estimates, the survey design complexities need to be taken into account. STATA (STATA 5.0) software has the capability of estimating standard errors in the case of clustered and weighted data and was used for all estimates of standard errors in this report.

Standard errors for each chart in this report are given in the following tables.

Appendix D-4—Standard Errors for the Figures and Tables

Figure 1-1 and Table 1-1. Uninsured Kansans under Age 65, Statewide and by Region

	Pct	Std Err
Kansas	10.5	0.3
Region 1	16.4	1.6
Region 2	5.4	0.7
Region 3	9.3	1.0
Region 4	6.7	1.0
Region 5	12.8	1.1
Region 6	11.5	0.9
Region 7	10.9	1.1
Region 8	9.9	1.0
Region 9	9.4	1.2
Region 10	16.8	1.6

Figure 1-2. Kansans under Age 65 Who are Uninsured by Annual Family Income

	Less than \$5,000		\$5,000-9,999		\$10,000-14,999		\$15,000-19,999		\$20,000-24,999	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	35.1	5.1	27.6	3.1	33.6	2.7	27.0	2.2	22.2	1.9
	\$25,000-34,999		\$35,000-44,999		\$45,000-54,999		\$55,000-64,999		\$65,000-84,999	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	16.3	1.2	7.9	0.8	57.3	0.8	37.9	0.7	2.9	0.7
	\$75,000-84,999		\$85,000-94,999		\$95,000 or More					
	Pct	Std Err	Pct	Std Err	Pct	Std Err				
Kansas	1.5	0.5	2.2	0.8	2.5	0.5				

Appendix D-4—Standard Errors for the Figures and Tables

Table 1-2 and Figure 1-3. Uninsured Kansans under Age 65 by Income as a Percent of Federal Poverty Level (FPL), Statewide and by Region

	100%FPL or Less		101%FPL to 150%FPL		151%FPL to 200%FPL		201%FPL to 250% FPL		251%FPL or Greater	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	31.5	1.9	25.3	1.8	15.1	1.3	*10.5	1.2	4.2	0.3
Region 1	45.9	6.3	37.0	7.7	16.9	3.8	14.2	5.7	5.5	1.0
Region 2	30.7	10.2	42.5	9.6	17.5	6.0	2.1	1.2	2.9	0.5
Region 3	31.9	5.8	16.9	3.8	13.0	3.8	16.3	4.6	3.1	0.7
Region 4	23.8	6.7	15.9	5.3	8.3	3.3	5.0	2.9	3.2	0.9
Region 5	30.6	4.4	30.5	4.8	7.4	2.5	11.2	3.6	5.2	1.0
Region 6	31.3	4.9	18.7	3.5	19.7	3.5	12.0	3.2	5.3	0.7
Region 7	28.0	5.1	34.9	5.8	20.5	5.4	9.8	3.0	4.1	0.8
Region 8	18.0	3.5	21.5	4.9	13.3	4.1	12.1	3.6	4.6	0.9
Region 9	23.5	6.8	13.4	3.5	13.7	3.9	12.1	5.2	5.0	1.1
Region 10	38.5	6.2	25.0	4.5	14.4	3.8	11.5	4.5	6.2	1.5

Table 1-3 and Figure 1-4. Uninsured Kansans Age 19-64 by Income as a Percent of Federal Poverty Level (FPL), Statewide and by Region

	100% FPL or Less		101%FPL to 150%FPL		151%FPL to 200%FPL		201%FPL to 250% FPL		251%FPL or Greater	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	41.7	2.2	33.5	2.0	18.9	1.5	13.2	1.4	4.8	0.3
Region 1	59.8	7.0	42.0	7.5	22.7	4.6	16.2	4.9	6.7	1.2
Region 2	31.9	9.9	47.2	10.0	20.9	6.0	3.1	2.0	3.5	0.5
Region 3	42.4	6.1	25.2	5.4	17.0	4.7	17.9	4.8	3.3	0.7
Region 4	33.5	8.7	24.5	7.1	12.4	5.0	8.5	4.8	3.5	0.9
Region 5	48.4	5.6	35.5	4.9	8.2	2.8	12.0	3.6	5.7	1.1
Region 6	42.1	5.3	27.5	4.4	24.4	4.3	16.1	3.8	5.9	0.8
Region 7	42.6	6.4	46.2	6.4	23.4	5.5	12.7	3.7	5.0	1.0
Region 8	24.2	5.1	27.1	5.7	14.7	3.6	13.3	3.5	5.0	1.0
Region 9	35.6	9.9	20.0	5.5	19.0	4.6	14.4	5.1	5.5	1.2
Region 10	46.0	6.6	41.3	6.5	21.9	5.2	14.7	5.3	6.5	1.4

Appendix D-4—Standard Errors for the Figures and Tables

Table 1-4 and Figure 1-5. Uninsured Kansans under Age 65 by Race and Ethnicity, Statewide and by Region

	White Non-Hispanic		Black		Hispanic		Other	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	8.3	0.3	15.0	1.7	26.0	1.8	11.6	1.9
Region 1	11.9	1.7	16.8	2.8	31.7	5.6	3.2	3.3
Region 2	4.6	0.7	7.3	5.8	23.9	6.6	0.9	0.8
Region 3	7.6	0.9	10.2	3.7	18.5	5.4	19.0	6.8
Region 4	6.7	1.0	23.5	15.8	7.5	5.2	0.0	0.0
Region 5	12.5	1.2	23.4	13.7	12.5	4.9	11.3	4.2
Region 6	8.4	0.8	16.5	3.6	27.7	4.0	11.2	4.1
Region 7	9.5	1.0	44.8	14.5	16.8	5.4	31.0	10.7
Region 8	9.8	1.0	6.1	3.5	6.8	3.1	23.5	8.7
Region 9	7.9	1.0	0.0	0.0	36.1	11.4	42.8	20.9
Region 10	8.8	1.3	25.3	14.1	32.5	3.7	19.9	11.9

Table 1-5 and Figure 1-6. Uninsured Kansans under Age 65 by Specific Age Category, Statewide and by Region

	0-5 Years		6-11 Years		12-18 Years		19-24 Years		25-34 Years		35-44 Years		45-54 Years		55-64 Years	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	6.8	0.7	8.0	0.8	8.4	0.7	19.8	1.1	15.7	0.8	10.4	0.6	7.5	0.5	6.4	0.6
Region 1	11.8	2.9	12.7	3.1	17.4	4.1	22.4	4.2	23.2	3.3	15.4	2.5	14.9	2.7	9.0	2.5
Region 2	4.0	1.5	6.3	1.9	5.3	1.7	15.5	2.9	8.1	1.5	4.4	1.0	2.6	0.8	1.1	0.6
Region 3	6.0	2.0	5.8	2.1	5.1	1.7	16.5	2.9	11.3	2.0	13.1	2.3	6.6	1.6	3.5	1.3
Region 4	1.2	0.9	2.5	1.5	3.7	1.4	18.2	4.2	8.2	2.4	7.6	1.8	5.6	1.9	8.4	2.8
Region 5	8.8	2.4	9.25	2.4	11.1	2.2	21.7	3.6	21.0	3.0	12.0	2.0	9.2	1.7	10.9	2.2
Region 6	5.4	1.5	9.5	2.3	9.6	2.0	24.0	2.9	15.2	1.8	13.5	1.7	8.3	1.4	4.6	1.6
Region 7	8.6	2.9	7.9	2.1	7.1	2.0	20.9	3.8	19.3	3.0	10.7	1.8	8.7	1.8	6.6	1.8
Region 8	6.9	3.2	5.5	2.1	7.9	2.1	14.3	2.7	16.2	2.6	10.1	1.9	6.0	1.5	7.7	2.1
Region 9	2.7	1.9	5.8	2.4	5.4	2.2	18.6	3.5	19.6	4.2	6.8	2.0	7.5	1.8	6.0	2.2
Region 10	11.7	2.8	11.8	3.1	11.8	2.6	26.2	3.8	30.5	3.9	12.3	2.4	10.4	2.3	16.6	3.5

Appendix D-4—Standard Errors for the Figures and Tables

Table 1-6 and Figure 1-7. Uninsured Kansans under Age 65 by Gender, Statewide and by Region

	Male		Female	
	Pct	Std Err	Pct	Std Err
Kansas	10.7	0.4	10.4	0.4
Region 1	14.5	1.7	18.4	1.9
Region 2	6.1	0.8	4.8	0.8
Region 3	9.2	1.3	9.5	1.1
Region 4	7.1	1.2	6.1	1.1
Region 5	13.1	1.3	12.4	1.3
Region 6	11.6	1.0	11.4	1.0
Region 7	10.9	1.2	10.9	1.2
Region 8	10.6	1.4	9.1	1.1
Region 9	10.4	1.5	8.3	1.3
Region 10	16.6	1.8	17.0	1.8

Table 1-7 and Figure 1-8. Uninsured Kansans Age 16-64 by Marital Status, Statewide and by Region

	Married		Widowed		Divorced		Separated		Never Been Married		Living With a Partner	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	7.9	0.4	15.2	2.4	19.1	1.2	27.9	3.9	15.8	0.7	33.5	3.6
Region 1	13.2	1.8	14.2	9.2	25.3	3.9	20.6	9.9	19.7	3.0	59.8	11.2
Region 2	2.6	0.6	8.5	4.6	9.4	2.3	17.7	7.8	10.3	1.7	27.5	9.2
Region 3	6.7	1.1	18.1	8.1	15.8	3.4	30.0	10.7	14.2	1.9	19.7	10.7
Region 4	5.3	1.2	8.3	5.7	13.9	3.8	#	#	14.5	2.8	42.4	18.1
Region 5	11.1	1.3	15.2	6.5	30.3	4.6	41.9	14.3	15.7	2.1	26.7	11.4
Region 6	8.0	1.0	8.7	4.8	19.4	2.8	23.5	8.1	20.0	1.9	33.4	7.6
Region 7	8.8	1.2	22.9	8.2	20.8	3.5	28.4	12.1	13.9	2.3	52.6	9.9
Region 8	7.7	1.2	26.9	10.4	22.7	3.7	31.5	18.7	11.3	1.9	26.3	8.5
Region 9	6.3	1.3	4.1	4.1	24.9	5.8	#	#	16.4	2.7	20.2	9.0
Region 10	15.1	1.8	38.7	12.2	20.3	5.2	45.7	12.0	24.9	3.4	28.2	12.0

Appendix D-4—Standard Errors for the Figures and Tables

Figure 1-9 and Table 1-8. Uninsured Kansans Age 18-64 by Employment Status, Statewide and by Region

	Work for Employer Full-time		Work for Employer Part-time		Exclusively Self-employed		Unemployed		Not in the Workforce	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	8.1	0.3	15.4	1.2	15.8	1.1	38.2	2.0	12.8	0.8
Region 1	9.7	1.3	12.7	3.7	39.1	6.4	51.0	6.2	21.3	3.1
Region 2	4.8	0.7	7.8	2.2	5.7	2.2	17.0	4.5	5.3	1.3
Region 3	6.3	0.9	20.4	3.5	21.0	4.5	31.1	6.3	11.1	2.3
Region 4	5.1	1.0	7.6	5.1	11.0	3.6	45.0	8.6	10.6	2.7
Region 5	9.9	1.2	24.5	4.0	19.8	3.8	39.6	5.8	14.2	2.5
Region 6	9.1	0.9	19.6	3.7	21.4	3.7	42.7	4.8	12.1	1.8
Region 7	9.0	1.0	14.8	3.5	16.5	3.4	35.3	5.3	14.1	2.6
Region 8	8.3	1.1	15.8	3.5	16.5	3.5	28.2	5.8	9.7	2.3
Region 9	9.5	1.4	8.2	3.7	9.4	2.7	34.2	8.5	13.3	3.2
Region 10	14.0	1.9	16.8	4.4	16.0	3.8	53.7	6.7	27.2	3.7

Figure 1-10. Uninsured Kansans under Age 65 by the Employment Status of Household Members Age 18-64

	Everyone in Household Unemployed		At Least One Household Member Employed	
	Pct	Std Err	Pct	Std Err
Kansas	15.8	1.8	9.8	0.3

Table 1-9 and Figure 11. Uninsured Kansans Age 18-64 by Education, Statewide and by Region

	No High School Diploma		High School Graduate		Some College or Associates Degree		Bachelors Degree or Higher	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	34.7	1.8	16.5	0.7	9.8	0.5	3.9	0.3
Region 1	35.8	5.0	20.6	2.3	13.4	2.2	4.5	1.4
Region 2	25.2	6.2	14.7	2.5	5.6	1.1	2.0	0.5
Region 3	46.9	6.8	14.5	2.4	7.3	1.3	5.9	1.2
Region 4	17.3	6.9	9.9	1.8	7.7	1.8	4.9	1.7
Region 5	30.0	4.5	17.4	2.0	12.4	1.6	6.4	1.5
Region 6	40.6	4.3	17.4	1.8	11.4	1.3	3.9	0.9
Region 7	36.7	5.6	16.2	2.0	10.2	1.6	4.2	1.2
Region 8	25.3	5.2	15.1	2.1	9.3	1.4	5.8	1.6
Region 9	18.8	6.1	16.5	2.6	10.0	2.0	4.7	1.6
Region 10	41.8	4.7	22.5	2.9	12.7	2.1	2.2	1.1

Appendix D-4—Standard Errors for the Figures and Tables

Figure 1-12 and Table 1-10. Uninsured Full-Time Employed Kansans Age 18-64 by Size of Firm, Statewide and by Region

	1-4 Employees		5-9 Employees		10-24 Employees		25-49 Employees		50-99 Employees		100 or More Employees	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	23.3	2.7	16.3	2.7	12.8	1.5	8.5	1.3	7.5	1.2	4.1	0.3
Region 1	35.0	12.0	16.4	7.9	16.2	7.0	12.3	5.3	3.3	3.2	5.1	1.3
Region 2	8.3	5.9	18.9	11.4	4.0	2.3	6.7	3.3	7.8	3.7	2.5	0.6
Region 3	9.9	9.3	10.2	5.8	10.6	4.9	8.5	4.1	14.4	5.2	3.4	1.0
Region 4	7.3	5.1	14.8	7.0	6.0	4.4	#	#	7.5	3.4	1.1	0.5
Region 5	30.9	9.2	10.7	5.1	17.4	5.0	4.7	3.2	11.3	3.8	4.2	1.1
Region 6	23.1	8.1	28.6	8.0	22.8	5.5	7.2	3.2	9.3	3.4	4.5	0.8
Region 7	25.2	7.0	24.1	7.5	14.3	4.6	8.7	3.4	4.9	2.8	3.7	1.0
Region 8	29.2	8.3	11.4	6.2	14.8	4.5	11.1	4.1	6.0	4.4	4.6	1.4
Region 9	25.6	7.6	7.5	5.1	12.0	5.3	7.9	4.4	#	#	4.0	1.4
Region 10	26.3	8.3	9.2	5.1	11.2	4.3	17.5	6.1	6.4	3.8	13.0	2.7

Table 1-11. Uninsured Full-Time and Part-Time Workers by Income as a Percent of Federal Poverty Level (FPL)

FPL	Full-Time		Part-Time	
	Pct	Std Err	Pct	Std Err
All Incomes	8.1	0.3	15.4	1.2
100% FPL or Less	37.1	3.2	39.0	4.7
101% to 150% FPL	30.6	2.7	34.2	4.6
151% FPL to 200% FPL	16.2	1.6	17.7	4.3
201% FPL to 251% FPL	9.1	1.2	9.6	3.1
251% FPL or Greater	3.5	0.3	5.4	1.0

Table 1-12. Uninsured Persons Who Work for an Employer that Offers Insurance by Income as a Percent of Federal Poverty Level (FPL)

FPL	Full-Time		Part-Time	
	Pct	Std Err	Pct	Std Err
100% FPL or Less	29.6	4.1	26.6	5.7
101% to 150% FPL	19.3	2.5	26.4	5.7
151% FPL to 200% FPL	9.3	1.4	10.9	4.6
201% FPL to 250% FPL	5.2	1.0	7.1	3.2
251% FPL or Greater	1.6	0.2	4.2	1.1

Appendix D-4—Standard Errors for the Figures and Tables

Table 1-13 and Figure 1-13. Reported “Main Reason” for Not Having Health Insurance, Uninsured Kansans under Age 65

Main Reason	Percent	Std Err
Too expensive/premium too high	56.3	1.6
Medical problems/pre-existing conditions	2.2	0.3
Don't believe in insurance	0.9	0.2
Don't need insurance/usually healthy	5.1	0.7
Free or inexpensive care readily available	1.3	2.5
Employer doesn't offer	7.7	0.7
Not employed or family member who usually gets coverage not employed	3.7	0.6
Waiting for coverage (e.g., less than 90 days on job)	4.0	0.6
Other (various reasons including transient status, too old/young for eligibility, divorce/death in family, not enough time to look into it)	5.1	0.7
Not Available	5.1	0.8

Table 1-14 and Figure 1-14. Other Reasons for Not Having Health Insurance, Uninsured Kansans under Age 65

Reason Given	Percent	Std Err
Too expensive/premium too high	21.0	1.3
Medical problems/pre-existing conditions	1.8	0.3
Don't believe in insurance	1.0	0.3
Don't need insurance/usually healthy	2.6	0.5
Free or inexpensive care readily available	0.7	0.2
Employer doesn't offer	6.9	0.7
Not employed or family member who usually gets coverage not employed	1.0	0.3
Waiting for coverage (e.g., less than 90 days on job)	0.8	0.3
Other (various reasons including transient status, too old/young for eligibility, divorce/death in family, not enough time to look into it)	6.2	0.7

Appendix D-4—Standard Errors for the Figures and Tables

Figure 1-15 and Table 1-15. Length of Time Without Health Coverage, Uninsured Kansans under Age 65

Length of Time	Pct	Std Err
Less than 1 month	6.1	0.8
1-6 months	18.1	1.3
7-12 months	8.9	1.0
1-2 Years	15.8	1.1
More than 2 years	34.8	1.5
Never had health insurance	16.3	1.3

Figure 1-16. Percent of Uninsured Kansans Under Age 65 Who Have Ever Been Enrolled in Medicaid and Those Who Lost Eligibility Due to Leaving TANF

	Kansans Under 65		Adults 19-64		Children <19	
	Pct	Std Err	Pct	Std Err	Pct	Std Err
Lost due to leaving TANF	3.9	0.5	3.4	0.5	5.6	1.4
Lost other reasons	20.9	1.2	19.9	1.2	24.0	2.8

Table 1-16. Percent of Uninsured Adults in Households With Children Who Are Enrolled in Medicaid by Income as a Percent of Federal Poverty Level (FPL)

FPL	Pct	Std Err
All Incomes	41.6	2.0
100% or Less FPL	46.6	3.5
101% to 150% FPL	47.4	3.9
151% to 200% FPL	34.4	5.0
201% to 250% FPL	34.1	6.5
250% FPL or Greater	23.7	5.4

Appendix D-4—Standard Errors for the Figures and Tables

Figure 1-17 and Table 1-17. Uninsured Kansas Children under Age 19 by Race and Ethnicity, Statewide and by Region

	White Non-Hispanic <19		Black <19		Hispanic <19		Other <19	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	5.5	0.5	8.7	2.4	20.7	2.3	9.0	2.9
Region 1	10.0	3.1	8.7	4.2	30.2	7.1	#	#
Region 2	3.8	1.1	9.7	9.2	26.3	8.7	#	#
Region 3	4.2	1.2	4.6	3.3	11.2	7.4	14.9	9.9
Region 4	2.6	1.1	#	#	9.1	9.1	#	#
Region 5	9.0	1.8	26.5	20.9	13.0	7.1	6.9	5.1
Region 6	5.1	1.1	8.9	4.1	20.4	5.2	8.3	6.2
Region 7	6.5	1.4	27.3	23.3	7.8	6.3	35.2	17.7
Region 8	6.9	1.6	#	#	3.7	3.7	25.6	17.8
Region 9	3.4	1.3	#	#	30.7	13.1	#	#
Region 10	4.5	1.5	#	#	22.3	4.2	17.0	16.8

Figure 1-18 and Table 1-18. Uninsured Kansas Children under Age 19 by Age Group and Federal Poverty Level (FPL)

FPL	0-5 Years		6-11 Years		12-18 Years		All Children (< Age 19)	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
All Incomes	6.6	0.7	7.9	0.8	8.4	0.7	7.8	0.5
100% FPL or Less	15.2	2.8	16.7	4.0	21.1	3.3	18.1	2.4
101% FPL to 150% FPL	12.7	2.9	15.1	2.7	18.6	3.8	15.8	2.2
151% FPL to 200% FPL	5.9	2.2	7.1	2.1	13.2	3.1	9.5	1.7
201% FPL to 250% FPL	5.6	1.9	7.0	1.8	8.0	2.0	7.1	1.4
251% FPL or Greater	2.5	0.6	3.1	0.7	2.3	0.5	2.6	0.4

Appendix D-4—Standard Errors for the Figures and Tables

Figure 2-1 and Table 2-1. Kansans under Age 65 by Source of Health Insurance, Statewide and by Region

	Employment Based Insurance		Individually Purchased Insurance		Medicaid, Healthwave		Military, CHAMPUS, VA		Other Government Programs	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	71.5	0.6	11.2	0.3	6.9	0.3	3.6	0.2	1.6	0.1
Region 1	62.3	2.2	7.1	1.0	10.2	1.2	8.6	1.3	1.4	0.3
Region 2	84.4	1.1	8.3	0.8	2.6	0.5	0.9	0.2	1.4	0.4
Region 3	72.8	1.6	11.7	1.1	7.5	0.9	2.2	0.4	2.5	0.5
Region 4	73.0	2.1	14.3	1.6	6.3	1.1	3.5	0.8	1.1	0.4
Region 5	68.8	1.8	10.4	1.0	10.0	1.0	1.6	0.3	2.5	0.6
Region 6	72.9	1.4	9.6	0.8	6.6	0.7	4.5	0.6	1.2	0.3
Region 7	72.4	1.6	10.8	1.0	7.1	0.8	2.0	0.4	1.9	0.5
Region 8	58.7	1.9	17.5	1.4	5.7	0.8	12.8	1.3	2.1	0.6
Region 9	64.8	2.3	20.6	1.9	6.9	1.1	1.5	0.6	2.6	0.7
Region 10	63.4	2.2	13.0	1.4	10.9	1.3	1.0	0.4	0.6	0.2
	Not Covered									
	Pct	Std Err								
Kansas	10.5	0.3								
Region 1	16.4	1.6								
Region 2	5.4	0.7								
Region 3	9.3	1.0								
Region 4	6.7	1.0								
Region 5	12.8	1.1								
Region 6	11.5	0.9								
Region 7	10.9	1.1								
Region 8	9.9	1.0								
Region 9	9.4	1.2								
Region 10	16.8	1.6								

Appendix D-4—Standard Errors for the Figures and Tables

Figure 2-2 and Table 2-2. Kansans Age 19-64 by Source of Health Insurance, Statewide and by Region

	Employment Based Insurance		Individually Purchased Insurance		Medicaid, HealthWave		Military, CHAMPUS, VA		Other Government Programs	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	73.4	0.5	10.6	0.3	3.0	0.2	3.9	0.2	2.0	0.1
Region 1	67.5	2.0	6.1	0.9	4.6	0.7	8.8	1.2	1.7	0.4
Region 2	85.0	1.0	7.8	0.7	1.1	0.3	1.2	0.3	1.5	0.3
Region 3	74.2	1.5	11.4	1.1	3.7	0.6	2.8	0.5	3.1	0.6
Region 4	74.6	1.9	13.1	1.5	2.9	0.6	3.6	0.9	1.2	0.4
Region 5	71.4	1.6	10.0	1.0	4.4	0.7	1.9	0.4	2.6	0.5
Region 6	74.4	1.2	8.1	0.7	3.3	0.4	5.0	0.6	1.6	0.3
Region 7	75.3	1.5	9.8	1.0	2.1	0.4	2.4	0.5	2.2	0.5
Region 8	60.4	1.8	17.6	1.4	2.6	0.5	12.3	1.3	2.5	0.7
Region 9	65.1	2.2	21.0	1.9	2.9	0.6	1.5	0.5	3.2	0.7
Region 10	65.2	2.0	12.7	1.3	3.8	0.8	1.2	0.3	0.9	0.3

Not Covered

	Pct	Std Err
Kansas	11.8	0.4
Region 1	17.4	1.6
Region 2	5.7	0.6
Region 3	10.7	1.1
Region 4	8.5	1.2
Region 5	14.3	1.2
Region 6	13.3	0.9
Region 7	12.4	1.1
Region 8	11.0	1.1
Region 9	11.3	1.4
Region 10	19.6	1.7

Appendix D-4—Standard Errors for the Figures and Tables

Figure 2-3 and Table 2-3. Kansas Children under Age 19 by Source of Health Insurance, Statewide and Region

	Children <19 Employment Based Insurance		Children <19 Individually Purchased Insurance		Children <19 Medicaid HealthWave, CHIP		Children <19 Military, CHAMPUS, VA		Children <19 Other Government Programs	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	68.1	0.9	12.7	0.6	15.2	0.7	3.0	0.3	1.0	0.2
Region 1	52.4	3.4	9.1	1.7	21.7	2.9	8.3	1.9	0.6	0.4
Region 2	83.5	1.9	9.5	1.3	5.9	1.2	0.4	2.5	1.3	0.9
Region 3	70.4	2.9	12.5	2.0	16.4	2.5	1.0	4.9	1.1	0.5
Region 4	69.7	3.3	17.1	2.6	14.0	2.6	3.4	1.1	0.7	0.5
Region 5	64.1	2.9	11.4	1.7	21.3	2.5	0.8	0.5	2.3	1.1
Region 6	70.6	2.2	12.4	1.4	13.1	1.6	3.1	0.7	0.4	0.3
Region 7	68.4	2.5	12.9	1.7	17.2	2.1	1.1	0.4	1.4	0.7
Region 8	55.1	3.2	17.5	2.2	13.3	2.3	14.4	2.1	1.3	0.7
Region 9	64.6	3.8	19.6	3.2	16.7	3.4	1.4	1.2	1.2	0.9
Region 10	60.8	3.2	13.8	2.0	23.2	2.6	0.7	0.7	#	#

Children < 19 Not Covered

	Pct	Std Err
Kansas	7.8	0.5
Region 1	14.4	2.5
Region 2	5.1	1.1
Region 3	6.2	1.4
Region 4	2.6	1.0
Region 5	9.8	1.8
Region 6	8.1	1.3
Region 7	7.7	1.5
Region 8	6.9	1.6
Region 9	4.8	1.5
Region 10	11.9	2.0

Appendix D-4—Standard Errors for the Figures and Tables

Figure 2-4. Distribution of Months Without Health Insurance Coverage for Kansans Who Lacked Continuous Coverage over the Past 12 Months

	1-3 Months		4-6 Months		7-9 Months		10-12 Months	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	32.7	2.6	26.1	2.4	13.6	1.7	27.5	2.4

Figure 3-1 and Table 3-1. Availability of Employment-Based Health Insurance for Uninsured Employed Kansans Age 18-64, Statewide and by Region

	Not Offered By Employer		Employer Offers; Employee Ineligible		Employer Offers; Cost of Employee Share Too High		Employer Offers; Other Reason to Decline	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	46.2	1.7	12.8	1.1	12.3	1.1	28.7	1.5
Region 1	49.3	5.3	9.9	3.4	14.6	4.0	26.3	4.7
Region 2	34.1	6.4	14.2	4.2	5.6	2.4	46.1	6.4
Region 3	44.2	5.1	19.3	4.3	9.1	2.8	27.4	4.2
Region 4	56.1	7.3	11.8	4.3	11.6	5.2	20.5	5.4
Region 5	50.8	4.6	13.3	3.2	11.7	3.0	24.2	4.0
Region 6	44.2	3.9	12.5	2.3	15.9	3.0	27.4	3.3
Region 7	50.2	4.7	8.8	2.6	16.5	3.4	24.5	4.4
Region 8	45.4	5.3	19.9	5.0	12.0	3.3	22.7	4.6
Region 9	51.3	6.6	4.6	2.6	8.4	3.3	35.8	6.1
Region 10	44.6	5.6	11.2	2.9	11.4	3.4	32.8	5.1

Figure 3-2. Percent of Employed Kansans Age 18-64 Who Report that Their Employer Offers Health Insurance Coverage

	Offered by Employer	
	Pct	Std Err
Kansas	80.6	0.4
Region 2	85.1	1.0
Region 9	68.1	2.0

Appendix D-4—Standard Errors for the Figures and Tables

Table 3-2. Percent of Employed Kansans Age 18-64 Who Report that Their Employer Offers Health Insurance Coverage, Statewide and by Region

	Employer Offers	
	Pct	Std Err
Kansas	80.6	0.4
Region 1	81.6	1.6
Region 2	85.1	1.0
Region 3	83.5	1.3
Region 4	79.2	1.7
Region 5	77.5	1.4
Region 6	83.9	1.0
Region 7	80.5	1.2
Region 8	78.0	1.4
Region 9	68.1	2.0
Region 10	72.5	1.8

Figure 3-3. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Full-Time and Part-Time Employment, Statewide and by Range of Geographic Variability

	Full-Time		Part-Time	
	Pct	Std Err	Pct	Std Err
Kansas	88.1	0.4	44.1	1.6
Region 2	92.6	0.9	45.3	4.2
Region 4	87.3	1.4	61.6	7.4
Region 8	86.1	1.4	35.4	4.3
Region 9	81.2	2.0	49.3	6.0

Appendix D-4—Standard Errors for the Figures and Tables

Table 3-3. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer, by Their Employer’s Firm Size, Statewide and by Region

	1-4 Employees		5-9 Employees		10-24 Employees		25-49 Employees		50-99 Employees	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	17.4	1.2	44.7	2.3	68.3	1.9	76.5	1.8	82.4	1.5
Region 1	25.0	6.0	38.3	7.8	68.3	8.6	79.5	6.1	76.1	7.5
Region 2	17.8	3.5	46.5	6.7	75.8	4.6	75.7	5.3	86.4	4.3
Region 3	19.2	4.4	55.7	7.9	58.4	6.5	77.8	5.6	82.0	5.9
Region 4	17.7	4.3	38.1	7.6	80.3	6.0	79.3	6.4	80.8	4.4
Region 5	14.2	2.9	53.1	6.7	65.6	5.2	74.9	6.2	79.0	4.6
Region 6	15.3	3.4	41.3	6.7	59.4	5.5	75.8	5.5	81.6	4.2
Region 7	19.5	3.2	40.5	6.4	73.1	5.2	81.1	4.5	82.8	4.2
Region 8	15.3	3.4	49.4	8.3	73.6	5.0	77.2	5.2	82.4	4.7
Region 9	15.8	3.2	43.0	7.0	59.5	7.0	72.8	6.9	79.1	5.8
Region 10	17.4	3.3	44.5	7.5	65.6	5.7	70.1	6.2	89.9	4.0

	100-249 Employees		250-499 Employees		500-999 Employees		1000 or more Employees	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	88.3	1.1	90.3	1.3	91.9	1.2	91.6	0.5
Region 1	85.2	5.2	95.2	3.3	91.9	3.9	92.8	2.0
Region 2	87.7	3.1	90.1	3.8	93.4	2.6	94.9	0.8
Region 3	84.8	3.9	94.5	3.1	94.9	2.9	88.6	1.9
Region 4	93.3	2.9	96.9	2.3	95.5	3.2	93.9	1.7
Region 5	85.4	3.5	85.6	3.7	95.1	2.3	92.4	1.8
Region 6	91.5	2.5	93.8	2.7	91.0	3.3	92.5	1.0
Region 7	92.4	2.4	89.4	3.8	87.9	4.5	90.5	1.8
Region 8	81.8	4.3	80.3	6.4	86.6	6.1	84.8	2.2
Region 9	89.2	4.1	96.2	2.7	89.7	7.0	84.5	4.0
Region 10	87.9	4.0	80.3	7.1	87.1	6.7	87.3	2.9

Appendix D-4—Standard Errors for the Figures and Tables

Table 3-4. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer, by Their Employer's Establishment Size, Statewide and by Region

	1-4 Employees		5-9 Employees		10-24 Employees		25-49 Employees		50-99 Employees	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	30.0	1.2	58.8	1.8	77.6	1.2	83.4	1.2	87.7	1.1
Region 1	33.4	5.5	43.3	7.3	81.0	4.5	92.4	3.1	82.0	5.3
Region 2	32.4	3.6	58.5	5.7	80.1	3.0	90.0	2.5	92.9	2.0
Region 3	35.3	4.8	63.5	6.0	67.1	4.5	81.0	4.5	87.6	3.3
Region 4	23.1	4.2	63.8	5.8	88.6	3.3	84.5	4.1	85.9	3.7
Region 5	25.1	3.3	67.9	4.7	77.0	3.1	86.1	3.5	82.1	3.6
Region 6	30.0	3.6	57.2	5.0	74.2	3.6	78.7	3.6	89.9	2.5
Region 7	33.1	3.3	55.6	5.4	82.7	3.2	82.2	3.4	85.0	3.4
Region 8	27.9	3.4	61.2	5.6	78.9	3.7	79.3	3.9	87.2	3.1
Region 9	25.4	3.4	58.2	5.1	73.0	4.6	74.7	5.2	90.7	4.5
Region 10	33.7	3.6	56.3	5.7	74.1	4.2	81.0	4.5	86.5	4.4

	100-249 Employees		250-499 Employees		500-999 Employees		1000 or more Employees	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	90.6	0.9	93.1	1.0	91.8	1.2	95.1	0.7
Region 1	90.6	3.4	96.3	2.6	95.8	2.7	96.0	2.2
Region 2	89.8	2.2	96.0	1.8	95.5	1.9	93.4	1.6
Region 3	88.2	2.8	97.8	1.6	85.6	4.3	93.3	2.6
Region 4	94.7	2.4	99.1	0.9	94.8	3.7	100.0	1.0
Region 5	89.4	2.9	92.0	2.9	93.9	3.0	94.3	3.7
Region 6	94.1	1.7	86.7	3.3	92.2	3.0	97.7	0.9
Region 7	90.8	2.6	89.9	3.6	87.4	4.5	95.4	1.9
Region 8	83.9	3.4	77.1	7.1	89.6	5.6	94.7	3.3
Region 9	95.7	2.5	92.0	5.4	85.1	9.9	80.6	1.2
Region 10	90.0	3.7	100.0	#	88.8	7.5	87.4	5.4

Appendix D-4—Standard Errors for the Figures and Tables

Figure 3-5. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer, by Their Employer's Establishment Size

	1-4		5-9		10-24		25-49		50-99		100-249		250-499		500-999	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	30.0	1.2	58.8	1.8	77.6	1.2	83.4	1.2	87.6	1.1	90.6	0.9	93.1	1.0	91.8	1.2
	1000 or more															
	Pct	Std Err														
Kansas	95.1	0.7														

Figure 3-6. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer, by Type of Industry

	Agriculture		Utilities/ Communication		Mining		Construction		Manufacturing		Transport		Wholesale Trade		
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	
Kansas	44.7	2.4	73.3	5.8	66.3	2.1	87.8	1.5	91.4	0.8	81.5	1.7	82.2	3.1	
	Retail Trade		Financial/ Real Estate		Business Services		Personal Services		Entertainment/ Recreation		Health Services		Education Services		
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	
Kansas	61.6	1.7	75.1	1.9	74.7	2.0	35.8	2.5	58.8	4.1	79.9	1.2	82.2	1.2	
	Social Services		Other Professional		Public Administration										
	Pct	Std Err	Pct	Std Err	Pct	Std Err									
Kansas	69.8	2.8	76.3	2.5	93.7	0.9									

Appendix D-4—Standard Errors for the Figures and Tables

Figure 3-7. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Employer Sector

	Public		Private		Self-Employed	
	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	87.9	0.8	81.5	0.5	23.9	1.3

Figure 3-8. Percent of Employed Kansans Aged 18-64 Offered Health Insurance by Their Employer By Seasonal Employment Status

	Seasonal				Permanent			
	Offered		Not Offered		Offered		Not Offered	
	Pct	Std Err	Pct	Std Err	Std Err	Pct	Std Err	Pct
Kansas	50.5	2.0	49.5	2.0	77.6	0.5	22.4	0.5

Figure 3-9. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Length of Employment

	0-3 Months		4-6 Months		7-12 Months		1-2 Years		3-5 Years		More than 5 Years	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	52.4	2.7	59.3	2.7	72.6	2.4	74.5	1.0	78.2	0.9	79.2	0.6

Figure 3-10. Percent of Employed Kansans Age 18-64 Offered Health Insurance by Their Employer by Union Contract

	Under Union Contract		No Union Contract	
	Pct	Std Err	Pct	Std Err
Kansas	87.1	0.9	73.3	0.5

Appendix D-4—Standard Errors for the Figures and Tables

Figure 3-11. Percent of Employed Kansans Age 18-64 Whose Employer Offers Health Insurance to At Least Some of Their Employees, by Job Earnings

	<\$5,000		\$5,000-9,999		\$10,000-14,999		\$15,000-19,999		\$20,000-24,999		\$25,000-34,999		\$35,000-44,999	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	48.8	3.7	53.1	2.8	65.3	1.9	77.7	1.5	81.1	1.3	86.4	0.9	89.9	0.8
	\$45,000-54,999		\$55,000-64,999		\$65,000-74,999		\$75,000-84,999		\$85,000-94,999		\$95,000 or more			
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	88.6	1.1	90.6	1.5	89.1	2.1	89.8	2.0	82.2	4.7	75.3	2.3		

Figure 3-12. Eligibility for Health Insurance Coverage among Kansans Age 18-64 Whose Employer Offers Health Insurance

	Eligible		Ineligible	
	Pct	Std Err	Pct	Std Err
Kansas	94.1	0.3	5.9	0.3

Figure 3-13. Offers of Employment-Based Health Insurance Coverage: Family Coverage vs. Employee-Only Coverage

	Family Coverage		Employee-Only Coverage	
	Pct	Std Err	Pct	Std Err
Kansas	88.2	0.4	11.8	0.4

Figure 3-14. Enrollment of Employed Kansans Age 18-64 Who Are Eligible for Employment-Based Insurance

	Enrolled in Employment-based Coverage		Declined Employment-based Coverage	
	Pct	Std Err	Pct	Std Err
Kansas	82.0	0.4	18.0	0.4

Appendix D-4—Standard Errors for the Figures and Tables

Figure 3-15. Monthly Employee Share of Premiums for Self-Only Employment-Based Health Insurance Coverage

	Mean	Std Err
Employer-based premiums	172.6	26.0

Figure 3-16. Monthly Employee Share of Premiums for Employment-Based Family Health Insurance Coverage

	Mean	Std Err
Employer-based premiums	224.9	9.2

Figure 3-17. Percent of Kansans Age 18-64 Eligible for Employment-Based Family Coverage Who Enroll All Children in the Household under this Coverage

	All children in the household are enrolled		At least one child in the household is not enrolled	
	Pct	Std Err	Pct	Std Err
Kansas	94.2	0.5	5.8	0.5

Figure 4-1. Health Insurance Status by Perceived Health Status, Kansans under Age 65

	Excellent		Very Good		Good		Fair		Poor	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Uninsured	7.1	0.4	8.4	0.5	14.7	0.8	23.1	1.6	21.8	2.6
Insured	92.9	0.4	91.6	0.5	85.3	0.8	76.9	1.6	78.2	2.6

Figure 4-2. Perceived Health Status and Insurance Status of Kansans under Age 65

	Excellent		Very Good		Good		Fair		Poor	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Uninsured	28.2	1.5	23.5	1.3	31.4	1.4	13.0	1.0	3.9	0.5
Insured	42.4	0.6	29.8	0.5	21.2	0.4	5.0	0.2	1.6	0.1

Appendix D-4—Standard Errors for the Figures and Tables

Table 4-1. Perceived Health Status of Uninsured Kansans under Age 65, Statewide and by Region

	Excellent		Very Good		Good		Fair		Poor	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Kansas	28.2	1.5	23.5	1.3	31.4	1.4	13.0	1.0	3.9	0.5
Region 1	26.3	4.4	16.1	3.3	34.3	4.6	19.2	3.3	4.0	1.3
Region 2	34.7	5.9	24.8	4.6	26.5	5.5	12.9	4.0	1.1	0.8
Region 3	34.4	4.6	19.7	3.8	31.4	4.2	10.2	2.7	4.3	1.8
Region 4	35.1	7.0	26.3	6.8	28.2	5.8	8.7	2.9	1.7	1.2
Region 5	26.2	4.0	31.1	4.2	29.1	4.0	8.1	2.2	5.4	1.7
Region 6	24.9	3.5	17.4	2.2	35.3	3.4	15.8	2.8	6.6	1.7
Region 7	25.3	4.1	36.2	4.8	25.8	3.5	10.4	2.4	2.4	1.1
Region 8	33.0	4.7	31.3	4.6	26.4	4.0	7.6	2.1	1.7	1.0
Region 9	29.5	6.0	25.5	4.5	29.3	5.6	13.0	3.8	2.6	1.9
Region 10	24.0	3.8	17.6	3.5	38.3	4.6	16.1	3.3	4.1	1.8

Figure 4-3 and Table 4-2. Perceived Health Status and Source of Coverage for Kansans under Age 65

	Employment-based Insurance		Individually Purchased Insurance		Medicaid, HealthWave		Military, CHAMPUS, VA		Other Government Programs		
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	
Excellent	43.3	0.6	48.3	1.4	27.3	1.7	40.6	2.6	27.1	3.8	
Very Good	30.7	0.6	27.6	1.3	22.8	1.5	27.7	2.3	25.5	3.3	
Good	20.5	0.5	19.1	1.1	31.1	1.8	20.2	1.9	25.5	3.1	
Fair	4.4	0.2	3.8	0.4	12.0	1.0	7.8	1.4	12.7	1.9	
Poor	1.1	0.1	1.2	0.2	6.9	0.8	3.7	0.7	9.2	1.7	
Not Covered											
	Pct	Std Err									
Excellent	28.2	1.5									
Very Good	23.5	1.3									
Good	31.4	1.4									
Fair	13.0	1.0									
Poor	3.9	0.5									

Appendix D-4—Standard Errors for the Figures and Tables

Figure 4-4 and Table 4-3. Percent of Respondents Age 18-64 with a Usual Source of Health Care by Insurance Status, Statewide and by Region

	Insured		Uninsured	
	Pct	Std Err	Pct	Std Err
Kansas	87.0	0.4	67.4	1.7
Region 1	88.9	1.5	68.4	4.9
Region 2	83.8	1.2	60.1	7.0
Region 3	86.0	1.4	72.0	5.2
Region 4	88.0	1.6	61.3	8.8
Region 5	88.5	1.2	69.1	4.8
Region 6	88.3	1.1	70.7	3.8
Region 7	91.0	1.1	75.9	4.7
Region 8	86.4	1.5	61.0	5.8
Region 9	87.9	1.7	62.1	8.0
Region 10	83.8	1.9	62.1	5.2

Figure 4-5. Percent of Children under Age 19 with a Usual Source of Health Care by Insurance Status

	Pct	Std Err
Insured	94.0	0.5
Uninsured	82.5	2.4

Figure 4-6. Locations of Usual Source of Care by Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64

	Clinic		Doctor's Office		Hospital		Other	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	27.8	0.6	60.3	0.7	7.0	0.4	4.9	0.3
Uninsured	47.2	2.2	36.0	2.1	5.6	1.0	11.3	1.4

Appendix D-4—Standard Errors for the Figures and Tables

Figure 4-7. Locations of Usual Source of Care by Insurance Status of Kansas Children Under Age 19

	Clinic		Doctor		Hospital		Other	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	27.8	0.8	64.8	0.9	4.4	0.4	3.0	0.3
Uninsured	43.4	3.5	47.6	3.6	2.2	1.0	6.6	1.8

Figure 4-8 and Table 4-4. Doctor or Clinic Visits in the Last 6 Months and Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64

	0 Visits		1-2 Visits		3-4 Visits		5-10 Visits		More than 10 Visits	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	29.1	0.6	44.9	0.6	13.7	0.4	9.0	0.4	3.3	0.2
Uninsured	53.3	1.8	29.9	1.7	10.0	1.1	5.0	0.8	1.9	0.5

Figure 4-9 and Table 4-5. Doctor or Clinic Visits in the Last 6 Months and Insurance Status of Kansas Children Less Than 19 Years Old

	0 Visits		1-2 Visits		3-4 Visits		5-10 Visits		More than 10 Visits	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	26.0	0.8	49.8	0.9	14.5	0.7	7.6	0.5	2.1	0.3
Uninsured	46.3	3.2	33.9	3.1	9.8	1.9	9.0	1.9	1.0	0.6

Figure 4-10 and Table 4-6. Emergency Room Visits in the Last 6 Months and Insurance Status of Kansas Health Insurance Study Respondents, Age 18-64

	0 Visits		1 Visit		2 Visits		3 Visits		4 Visits		5 or more Visits	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	87.5	0.4	9.3	0.4	1.9	0.2	0.7	0.1	0.2	0.1	0.5	0.1
Uninsured	82.3	1.4	11.9	1.2	3.1	0.7	1.7	0.5	0.3	0.2	0.6	0.3

Appendix D-4—Standard Errors for the Figures and Tables

Figure 4-11 and Table 4-7. Emergency Room Visits in the Last 6 Months and Insurance Status of Kansas Children Less Than 19 Years Old

	0 Visits		1 Visit		2 Visits		3 Visits		4 Visits		5 or more Visits	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	84.5	0.7	11.6	0.6	2.5	0.3	0.7	0.1	0.2	0.1	0.5	0.1
Uninsured	82.7	2.4	11.4	2.0	3.4	1.1	0.4	0.4	1.2	0.8	0.8	0.5

Figure 4-12. Percent of Respondents Delaying or Not Obtaining Needed Medical Care Within the Last 12 Months Because They Could Not Afford It, by Insurance Status

	Pct	Std Err
Insured	8.0	0.3
Uninsured	40.8	1.8

Figure 4-13. Percent of Children For Whom Needed Medical Care is Delayed or Not Obtained Within the Last 12 Months Because Their Family Could Not Afford It, by Insurance Status

	Pct	Std Err
Insured	2.9	0.3
Uninsured	14.6	2.3

Figure 4-14. Reported Out-of-Pocket Expenses for a Respondent's Doctor Visit by Insurance Status

	\$0		Less Than \$10		\$10-\$15		\$16-\$20		\$21-\$40		More than \$40	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	21.4	0.5	5.2	0.3	45.0	0.7	7.3	0.3	9.3	0.4	11.8	0.4
Uninsured	12.9	1.3	2.8	0.7	12.0	1.3	4.3	0.9	19.6	1.6	48.4	2.0

Figure 4-15. Reported Out-of-Pocket Expenses for a Child's Doctor Visit by Insurance Status

	\$0		Less Than \$10		\$10-\$15		\$16-\$20		\$21-\$40		More than \$40	
	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err	Pct	Std Err
Insured	27.6	0.8	3.8	0.3	45.0	0.9	6.0	0.4	8.4	0.5	9.2	0.5
Uninsured	19.8	2.7	3.7	1.3	13.2	2.3	5.1	1.5	18.8	2.8	39.5	3.3

Appendix E

**Generating Population
Estimates**

Appendix E

Generating Population Estimates of Uninsured People from Sample Percentages:

Step 1—Define the Population and Select the Sample

	1	2
Hypothetical Category	Category Population <65	Number in Sample
Category A	2000	250
Category B	4000	600
Category C	6000	900

This process can be used for various kinds of categories. They might be geographic, where each of the categories is a geographic region on the state map. They might be demographic, where each of the categories is an age range or race classification. They might be economic, with various levels of family income in relation to the Federal Poverty Level.

A survey is conducted, with varying numbers of interviews completed in each category.

Category Population under 65 years old comes from the most up-to-date population projections available for the state of Kansas. Preferably, these should use the same source of population estimates as is used in official state projections.

Number in sample is the actual number of interviews conducted in that category.

Generating Population Estimates of Uninsured People from Sample Percentages:

Step 2—Determine the Insurance Status of People in the Sample

	1	2	3	4
Hypothetical Category	Category Population <65	Number in Sample	Number of Uninsured People in Sample	Number of Insured People in Sample
Category A	2000	250	50	200
Category B	4000	600	100	500
Category C	6000	900	200	700

The **Numbers of Uninsured and Insured in the Sample** are actual counts of the number of individuals in our sample households who are classified as being insured or uninsured as a result of responses given in the interview. (Actually, we do some weighting here to bring the sample in line with the population, but for purposes of this demonstration, let's ignore weighting.)

Generating Population Estimates of Uninsured People from Sample Percentages:

Step 3—Calculate the Percent Uninsured

	1	2	3	4	5	6
Hypothetical Category	Category Population <65	Number in Sample	Number of Uninsured People in Sample	Number of Insured People in Sample	Calculating Percent Uninsured in Sample	Percent Uninsured in Sample
Category A	2000	250	50	200	50/250	20%
Category B	4000	600	100	500	100/600	16.6%
Category C	6000	900	200	700	200/900	22.2%

Percent Uninsured is calculated by putting the Number Uninsured in Sample (column 3) in the numerator, Number in Sample (column 2) in the denominator, and dividing.

This percent is the number given in most tables in the report—the percent of people in that particular category who are uninsured.

Generating Population Estimates of Uninsured People from Sample Percentages:

Step 4—Estimate the Number of Uninsured People in each Category

	1	2	3	4	5	6	7	8
Hypothetical Category	Category Population <65	Number in Sample	Number of Uninsured People in Sample	Number of Insured People in Sample	Calculating Percent Uninsured in Sample	Percent Uninsured in Sample	Calculating Estimated Uninsured in Category	Estimated Number of Uninsured People in Category (Point Estimate)
Category A	2000	250	50	200	50/250	20%	20% x 2000	400
Category B	4000	600	100	500	100/600	16.6%	16.6% x 4000	664
Category C	6000	900	200	700	200/900	22.2%	22.2% x 6000	1332

Estimated Uninsured in Category, Point Estimate is calculated by multiplying the Percent Uninsured in Sample (column 6) by the Estimated Category Population of those under Age 65 (column 1).

Generating Population Estimates of Uninsured People from Sample Percentages:

Step 5—Place a Margin of Error (Confidence Interval) around the Estimated Number of Uninsured People

	1	2	3	4	5	6	7	8	9	10
Hypothetical Category	Category Population <65	Number in Sample	Number of Uninsured People in Sample	Number of Insured People in Sample	Calculating Percent Uninsured in Sample	Percent Uninsured in Sample	Calculating Estimated Uninsured in Category	Estimated Number of Uninsured People in Category (Point Estimate)	Margin of Error, Plus or Minus	Estimated Number of Uninsured People in Category (Range Estimate)
Category A	2000	250	50	200	50/250	20%	20% x 2000	400	3.0%	388-412
Category B	4000	600	100	500	100/600	16.6%	16.6% x 4000	664	2.5%	647-680
Category C	6000	900	200	700	200/900	22.2%	22.2% x 6000	1332	2.0%	1305-1359

Estimated Uninsured in Category, Range Estimate is calculated by applying the appropriate Margin of Error (column 9) to each point estimate (column 8). For example, for Category A, 3% of 400 is 12, so the interval is 400 ± 12 , or 388 to 412.

Any estimate based on a sampling methodology has a **Margin of Error** (expressed as plus or minus some number) which indicates a range within which the true value is probably found. For example, for Hypothetical Category A, the range estimate (388-412) means that the true number of uninsured in Category A probably falls between 388 and 412. The margin of error is a function of the sample size, with larger samples having smaller margins of error. Since numbers in sample vary from category to category, the margins of error also vary.

Estimating the Number of Uninsured People in the State

	1	2	3	4	5	6	7	8	9	10
Hypothetical Category	Estimated Category Population <65	Number in Sample	Number of Uninsured People in Sample	Number of Insured People in Sample	Calculating Percent Uninsured in Sample	Percent Uninsured in Sample	Calculating Estimated Uninsured in Category	Estimated Number of Uninsured People in Category (Point Estimate)	Margin of Error, Plus or Minus	Estimated Number of Uninsured People in Category (Range Estimate)
Category A	2000	250	50	200	50/250	20%	20% x 2000	400	3.0%	388-412
Category B	4000	600	100	500	100/600	16.6%	16.6% x 4000	664	2.5%	647-680
Category C	6000	900	200	700	200/900	22%	22% x 6000	1332	2.0%	1305-1359

The next step would be to calculate a statewide estimate of uninsurance. This is done by repeating Steps 1-5 at the statewide level, as shown below:

	1	2	3	4	5	6	7	8	9	10
	Estimated Statewide Population <65	Number in Sample	Number Uninsured in Sample	Number Insured in Sample	Calculating Percent Uninsured in Sample	Percent Uninsured in Sample	Calculating Estimated Uninsured Statewide	Estimated Uninsured Statewide (Point Estimate)	Margin of Error, Plus or Minus	Estimated Uninsured Statewide (Range Estimate)
Statewide	12000	1750	350	1400	350/1750	20%	20% x 12000	2400	1.5%	2364-2436

Columns 1-4 are simply sums of the columns in the table above. But for the Estimated Uninsured Statewide Point Estimate (column 8) we do not use a sum of the numbers from Column 8 in the table above, because the summation operation does not distribute across multiplication and division. Instead, we follow through the same steps outlined above, resulting in a point estimate of uninsured persons of 2400, instead of the 2396 that would result from a simple summation of the category estimates.

Thus the individual category numbers represent the best estimates of the number of uninsured persons at the category level. Similarly, the overall statewide calculation in the second table represents the best estimate of the number of uninsured persons at the state level.

Appendix F

Glossary

Appendix F

Glossary of Key Terms

Term	Conceptual Definition	Operational Definition
Coverage	The presence of a third party entity that pays some of the costs of an individual's health care expenses. The payment might be provided by a private insurance company, an HMO, a government program, or an employer, and some people have more than one source of coverage.	Assessed by the COV and NOCHECK series of questions.
Household	All persons identified by the respondent as living at the particular residence in which the sampled telephone number is located.	This is collected in HHLID.
Respondent	The person in the household who actually participates in the interview and answers the survey questions. In this study, the respondent also provided proxy responses about other individuals in the household.	
Insured	All persons who are reported to have at least one source of health insurance coverage.	At least one yes answer for that person in the COV and NOCHECK series of questions.
Uninsured	All persons NOT reported to have at least one source of health insurance coverage.	No positive answers for that person in the COV and NOCHECK series of questions.
Employer-based Coverage	Coverage through a current job, including self-employment and civilians at governmental agencies.	Measured in EMP4.
Sample Size	Number of responses. This varies slightly from item to item since not every question is asked about every individual, and the respondent may not be willing or able to answer every question. The sample size also depends on whether the item is an individual level variable (e.g., race, sex) or refers to the entire household (e.g., number of phone lines serving the household).	

Group	For sample design purposes, the state was divided into eight groups, geographic subdivisions split along county lines. Lake and Marion counties are single-county groups, while the other counties are aggregated according to similar characteristics and geographic proximity.	
Family	Group of people related by blood, marriage or adoption.	Familial groups are formed according to the information collected in REL with supplementary information from MARCHECK and GUARDCHK.
Race	Race concerns physical traits and self-definition. It is distinguished from language groups and ethnicity, which encompasses cultural characteristics.	Race was determined by asking the question RACE for every adult household member. In ambiguous cases or those where some "Other" response was given, interviewers and coders were trained to follow the current racial category guidelines of the U.S. Office of Management and Budget.
Resident	Someone who considers the phone number to be their "home phone."	Determined by the question HOME.
Employed	Working for pay.	Measured by the question WORK.
Unemployed	Someone who is out of work and looking for a new job.	Someone who reports being "unemployed but looking for work" in WRK3.
Job Earnings	Income from employment.	Recorded in PAY1 or PAY2 and PAY4A.
Type of Industry	This is the kind of business for which the person works, not their occupation per se; for example, a doctor on a cruise ship works in the entertainment industry. The classification used in this questionnaire is based on Standard Industrial Classification (SIC) codes used by the Bureau of Labor Statistics.	Measured in question PLWK.

Premium	Cost of coverage.	We collect information on premiums for employment-based coverage in PREM1 and PREM2.
Out-of-Pocket Expenses	Health care costs not paid for by insurance.	We ask about out-of-pocket costs at the time of a doctor visit in questions COST (for respondent) and COSTC (for a child).
Income	Money received into the family from all sources.	Measured in HHINCOME.
Federal Poverty Level (FPL)	Guidelines issued by the U.S. Department of Health and Human Services, based on family size and income, designed for use in determining financial eligibility for certain federal programs and functionally serving as a standardization of measures of poverty.	This report used the guidelines for 2001, which are available at http://aspe.hhs.gov/poverty/01poverty.htm Examples are given below.

Family Size	100% FPL	150% FPL	200% FPL	250% FPL
1	\$ 8,509	\$ 12,764	\$ 17,018	\$ 21,273
2	\$ 11,610	\$ 17,415	\$ 23,220	\$ 29,025
3	\$ 14,630	\$ 21,945	\$ 29,260	\$ 36,575
4	\$ 17,650	\$ 26,475	\$ 35,300	\$ 44,125
5	\$ 20,670	\$ 31,005	\$ 41,340	\$ 51,675
6	\$ 23,690	\$ 35,535	\$ 47,380	\$ 59,225
7	\$ 26,710	\$ 40,065	\$ 53,420	\$ 66,775
8	\$ 29,730	\$ 44,595	\$ 59,460	\$ 74,325