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Healthcare Disparities: Unaffordable Health Insurance's Impact on the Lower Class

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Healthcare Disparities: Unaffordable Health Insurance's Impact on the Lower Class

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Objectives:

- Analyze the relationship between income and health.
- Demonstrate how the lack of affordable health insurance and the changes in healthcare policies alter the well-being of low-income individuals.

Key Facts:

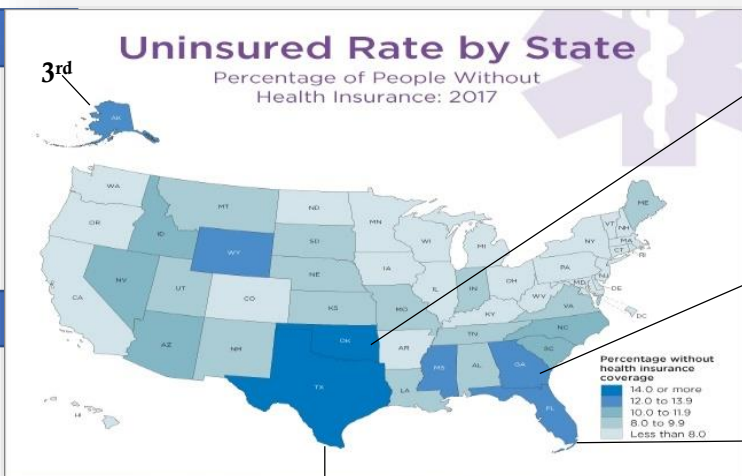
The federal minimum wage per hour in the US is **\$7.25**, and **\$8.60** in NJ = **NOT** enough for quality lifestyle.

In 2017, there were **39.7 million** people in poverty.

28.5 million did not have health insurance at any point during 2017.

Poor adults are **five times** more likely than those with high incomes to report being in poor health.

In 2017, uninsured nonelderly adults were over **twice** as likely than those insured to have problems paying medical bills, turning into medical debt.

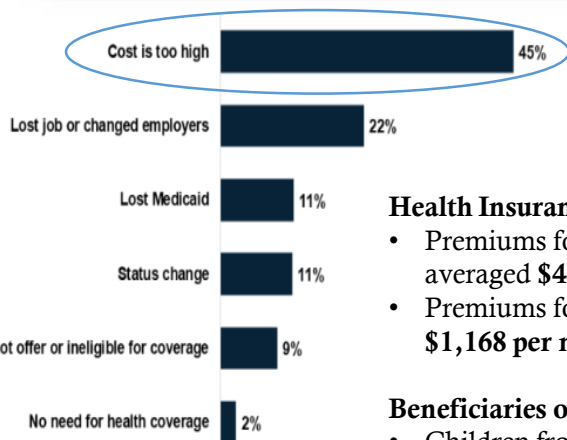


Texas #1. Highest rate of uninsured children in the US

OK has 1 in 6 living below the poverty line and 2nd highest rate of uninsured residents.

GA has the 4th highest rate of uninsured residents.

FL is ranked 5th for people living without health insurance.

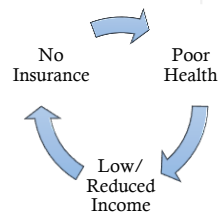


Health Insurance Cost without Subsidy:

- Premiums for individual coverage averaged **\$440 per month**
- Premiums for family plans averaged **\$1,168 per month**

Beneficiaries of Medicaid/Medicare:

- Children from low income families (Children's Health Insurance Program)
- People with disabilities
- Pregnant women
- People living with HIV/AIDS
- Older adults



Policy Changes	Results/Affects
\$26 million is being eliminated in funding for grassroots groups that help individuals sign up for healthcare through ACA.	Drop of insurance coverage can result in a rise in healthcare costs if fewer people pay premium, making it an unreachable cost for lower class.
The Tax Cuts and Jobs Act (TCJA) cuts Obamacare taxes on people who don't get insurance.	<ol style="list-style-type: none"> 13 million people are estimated to drop coverage – Health insurance will be left with the sicker people. Lower class will be less likely to receive preventive care and services for major health conditions and chronic diseases.
The "American Patients First" plan challenges Medicare Part D beneficiaries.	Senior citizens are at risk of losing coverage for certain medications used to treat depression, cancer and HIV.



"To have an insurance that is decent, I have to pay \$400 a month and it still doesn't cover exams I need for my pre-existing condition." – G.E (30 Year Old Female)

"As a medical professional, I've had multiple patients refuse diagnostic exams due to their financial cost of not having insurance." – H.D (25 Year Old Male)

"As an immigrant, I can't afford insurance because of my monthly income and expenses. I also don't want to pay for poor services because it's all I can afford. I pray for good health everyday." – R.R (58 Year Old Male)

"As a per-diem RN, I work 12 hour shifts and many times full time. I still don't receive medical coverage or health insurance. This is a personal issue because I currently need surgery and will be paying out of pocket." – D.G (23 Year Old Female)