

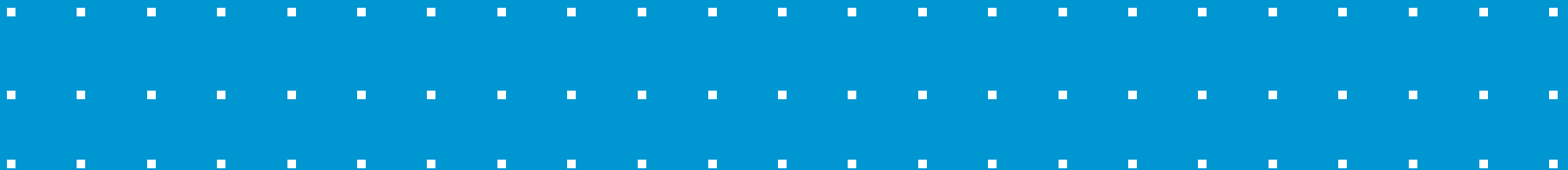


# A Profile of Virginia's Uninsured in 2021

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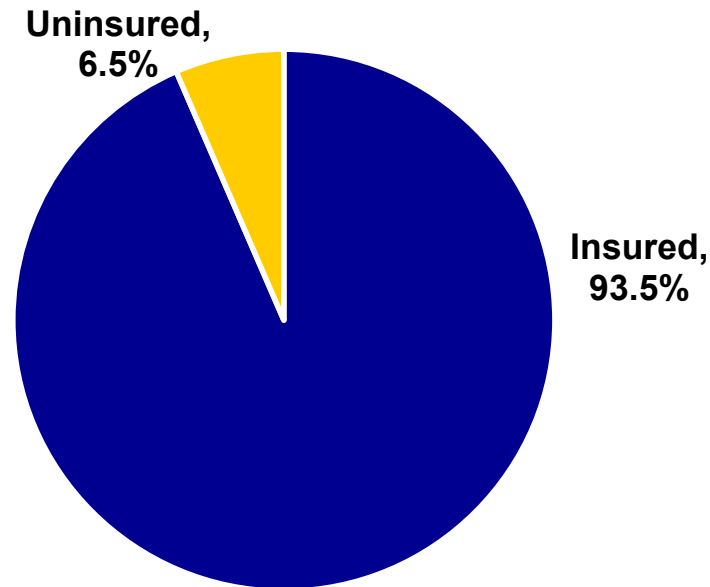
# Main Takeaways for 2021

- There were about 455,000 nonelderly (ages 0-64) uninsured in Virginia in 2021.
- In 2021 the uninsured rate in Virginia (6.5%) was lower than the national uninsured rate (10.9%).
- The uninsured rate for the nonelderly in Virginia decreased from 2017 (11.3%) to 2021 (6.5%) with the state's expansion of Medicaid to include low-income nonelderly adults and policy responses to the COVID public health emergency. In contrast, the national uninsured rate for the nonelderly *increased* from 2017 (10.0%) to 2021 (10.9%).
- The uninsured rate for children (ages 0-18) in Virginia decreased between 2017 (5.5%) and 2021 (2.1%). Approximately 41,000 children were uninsured in 2021. Nationwide, the uninsured rate for children increased from 5.4% in 2017 to 6.1% in 2021.
- In 2020\*, uninsured adult Virginians were much more likely than insured adults to have unmet health needs and less likely to receive preventive services.

\* Estimate is from the 2020 BRFSS; the 2021 BRFSS is not yet available. Please see the Methods slide at the conclusion of this chartbook for more information about definitions and data sources.

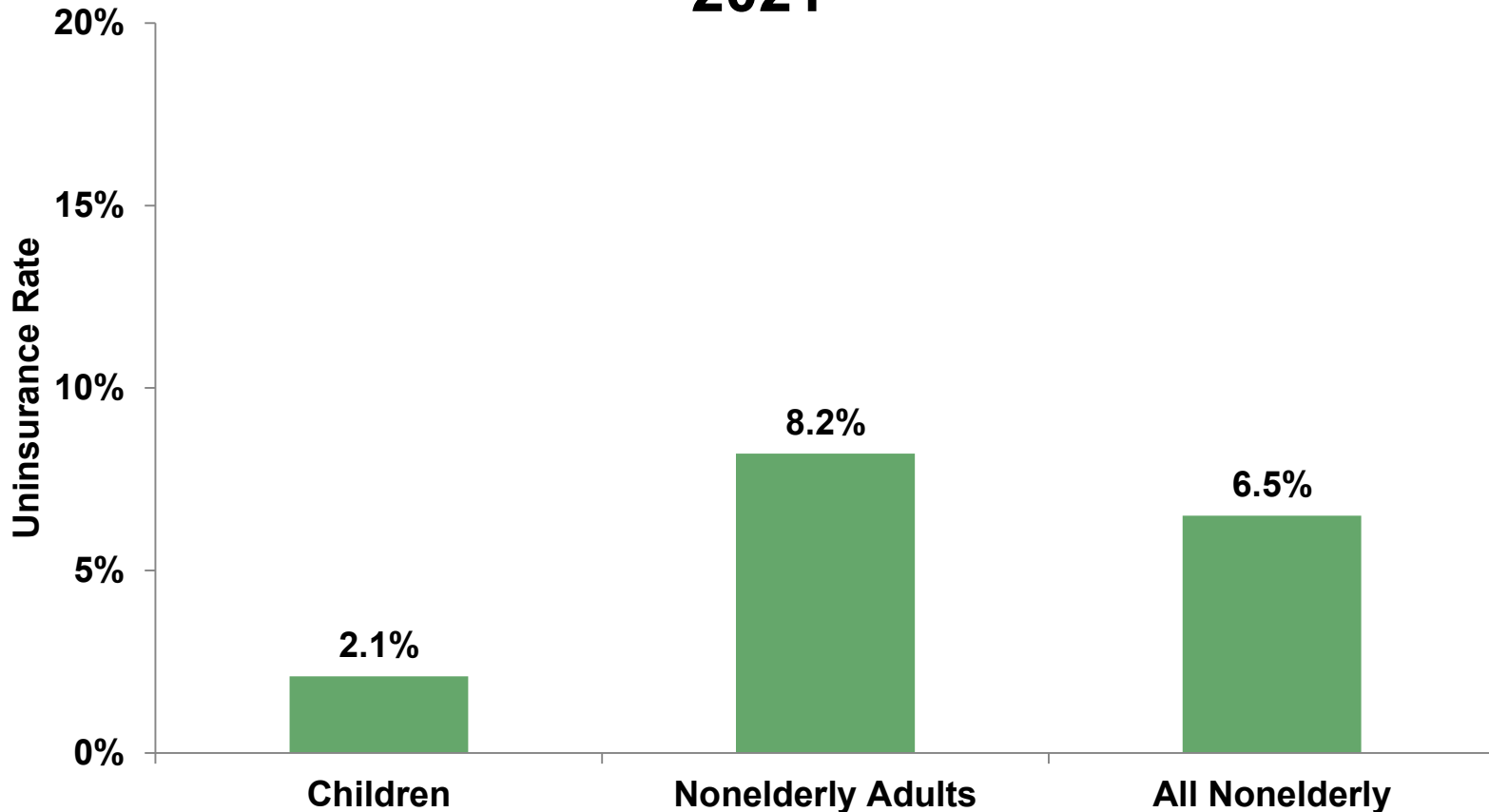
# 455,000 nonelderly Virginians (0 – 64) lacked health insurance in 2021

## Total Nonelderly Virginians



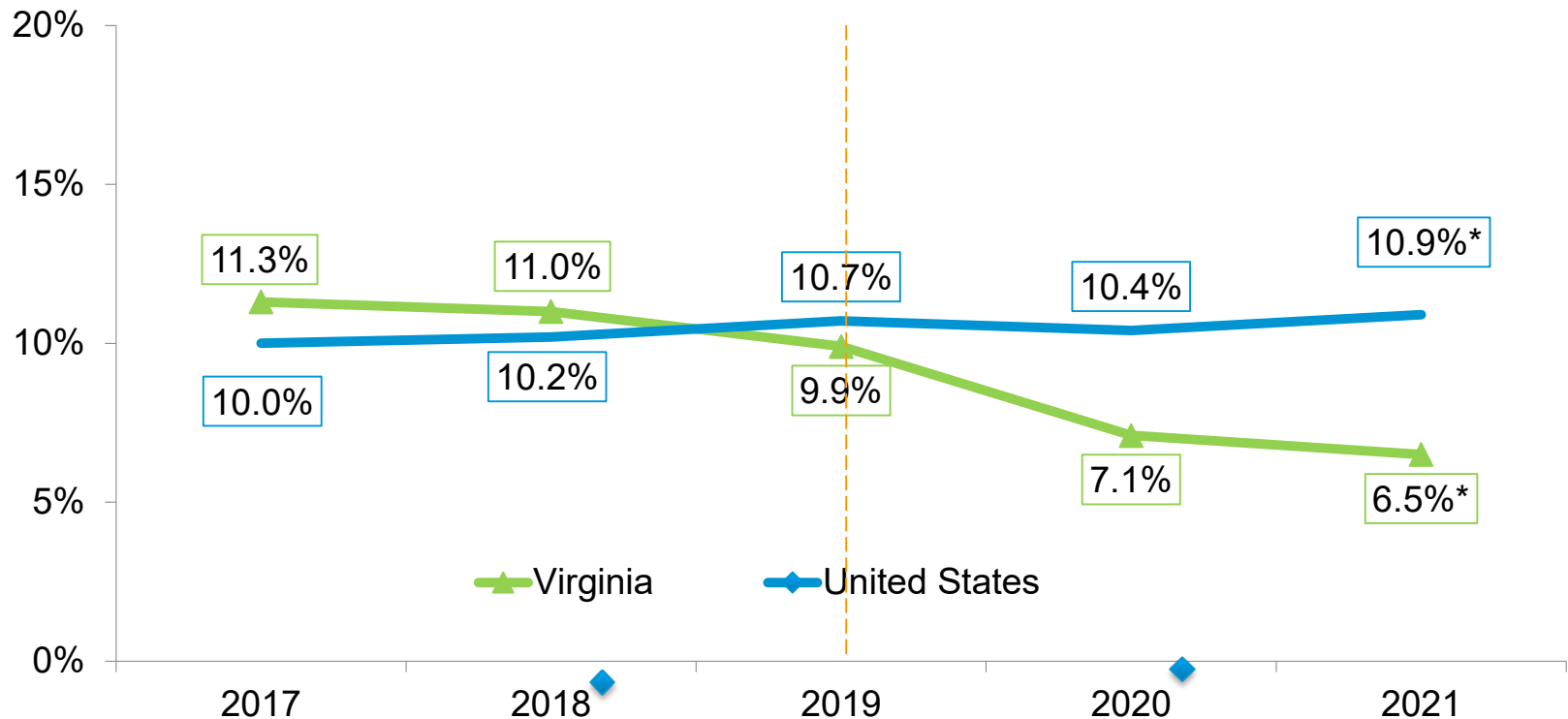
Source: Urban Institute, May 2022. Based on the March 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

# Nonelderly adult Virginians (19-64) were 4 times more likely to be uninsured than Virginia children in 2021



Source: Urban Institute, May 2022. Based on the March 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

# Virginia had a significantly lower uninsured rate than the United States among the nonelderly in 2021.

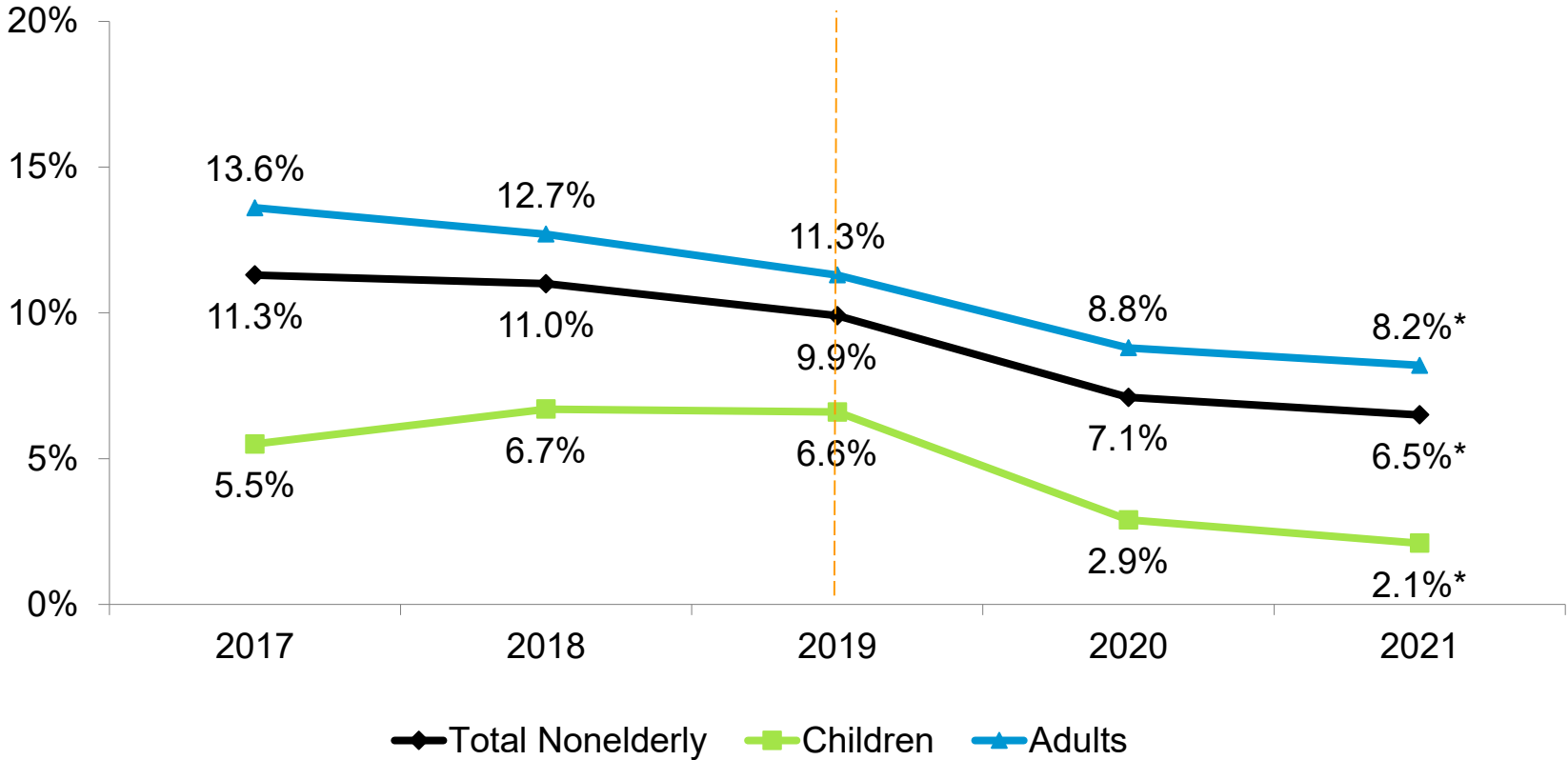


Source: Urban Institute, May 2022. Based on the March 2017, 2018, 2019, 2020, and 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

Notes: Orange dashed line indicates implementation of Virginia's Medicaid expansion (2019). 2020 estimates should be interpreted with caution due to a lower-than-normal CPS-ASEC survey response rate related to the COVID-19 pandemic. For more information about national changes in insurance between 2019-2021, see Urban Institute's brief <https://www.urban.org/research/publication/bolstered-recovery-legislation-health-insurance-safety-net-prevented-rise>

\* Denotes 2021 estimate is significantly different from 2017 estimate at the  $p < 0.1$  level.

# Uninsurance in Virginia decreased among both **nonelderly adults** and **children** from 2017 to 2021

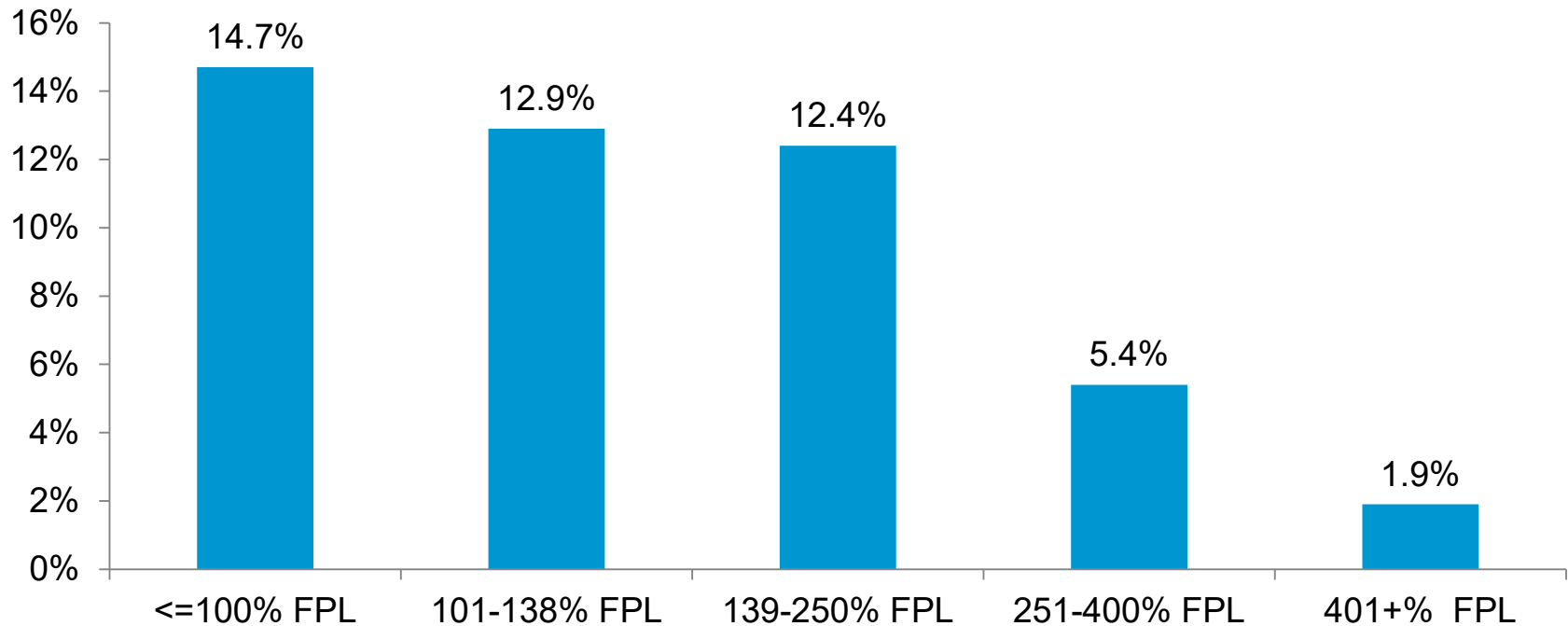


Source: Urban Institute, May 2022. Based on the March 2017, 2018, 2019, 2020, and 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

Notes: Orange dashed line indicates implementation of Virginia’s Medicaid expansion (2019). 2020 estimates should be interpreted with caution due to a lower-than-normal CPS-ASEC survey response rate related to the COVID-19 pandemic. For more information about national changes in insurance between 2019-2021, see Urban Institute’s brief <https://www.urban.org/research/publication/bolstered-recovery-legislation-health-insurance-safety-net-prevented-rise>

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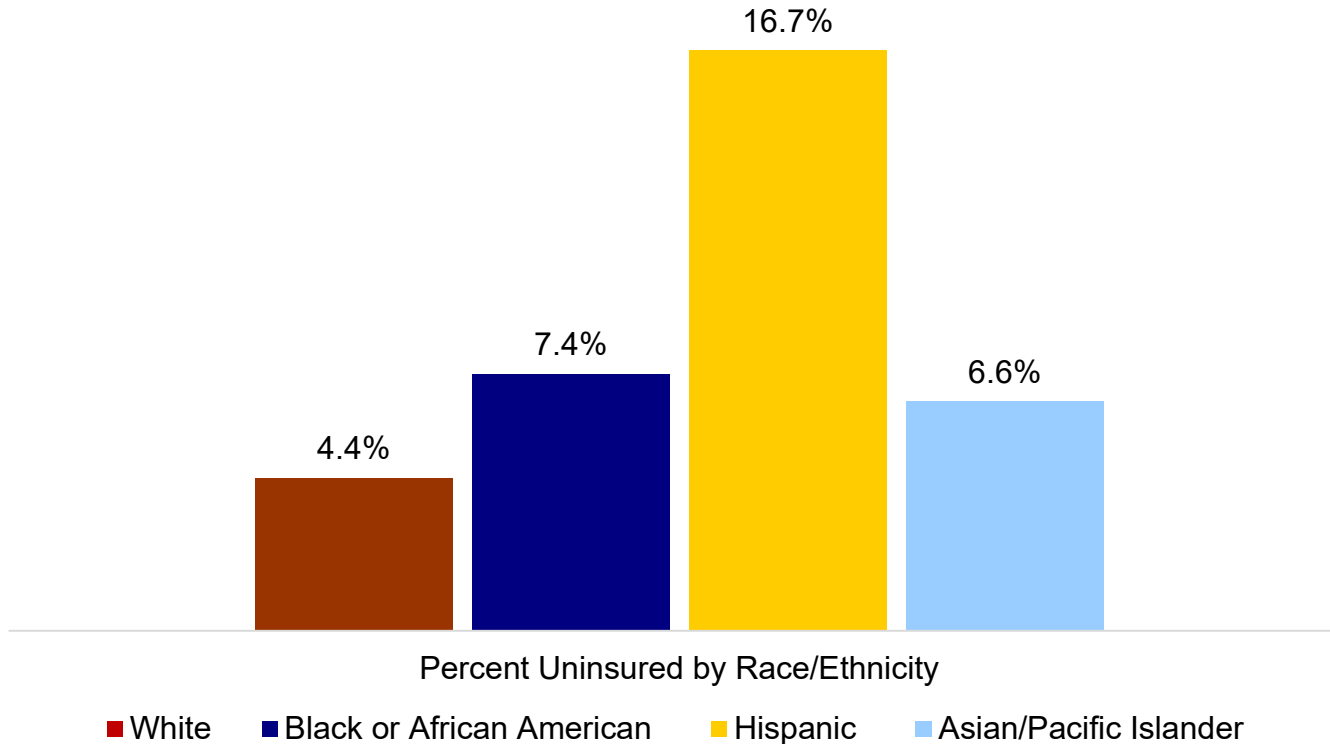
# Nonelderly Virginians with family income $\leq 100\%$ FPL were more than 7 times as likely to be uninsured as Virginians with family income $401+\%$ FPL in 2021



Source: Urban Institute, May 2022. Based on the March 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

Notes: Poverty level estimates are based on health insurance unit Modified Adjusted Gross Income (MAGI) and use the 2020 Federal Poverty Levels (FPLs) defined by the US Department of Health and Human Services.

# Hispanic Virginians were more likely to be uninsured than Virginians of other races/ethnicities in 2021

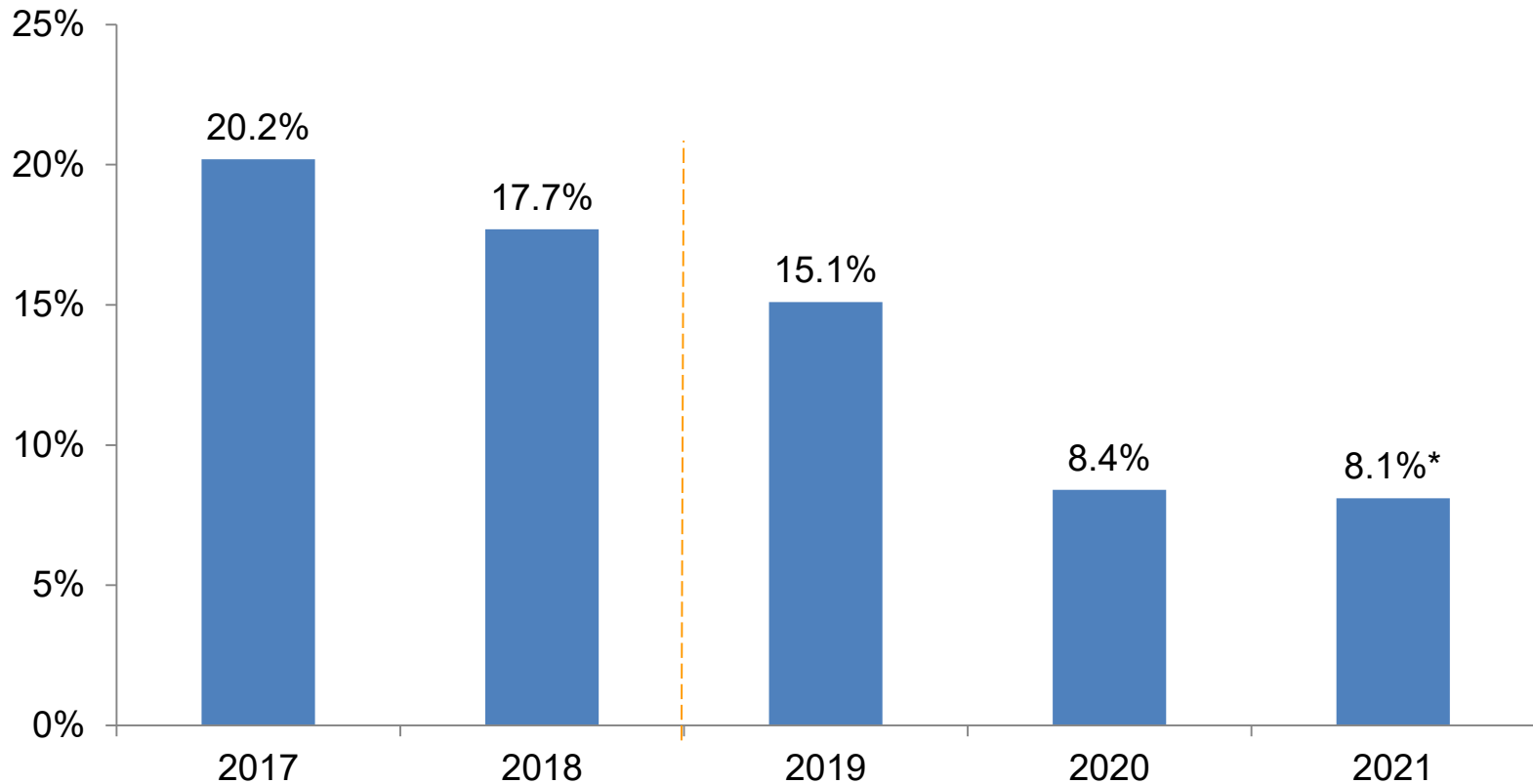


Source: Urban Institute, May 2022. Based on the March 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

Notes: Estimates for non-Hispanic residents who are other races or more than one race are not shown.



# The uninsurance rate for young adult Virginians (19-26) continued to decrease after Medicaid expansion

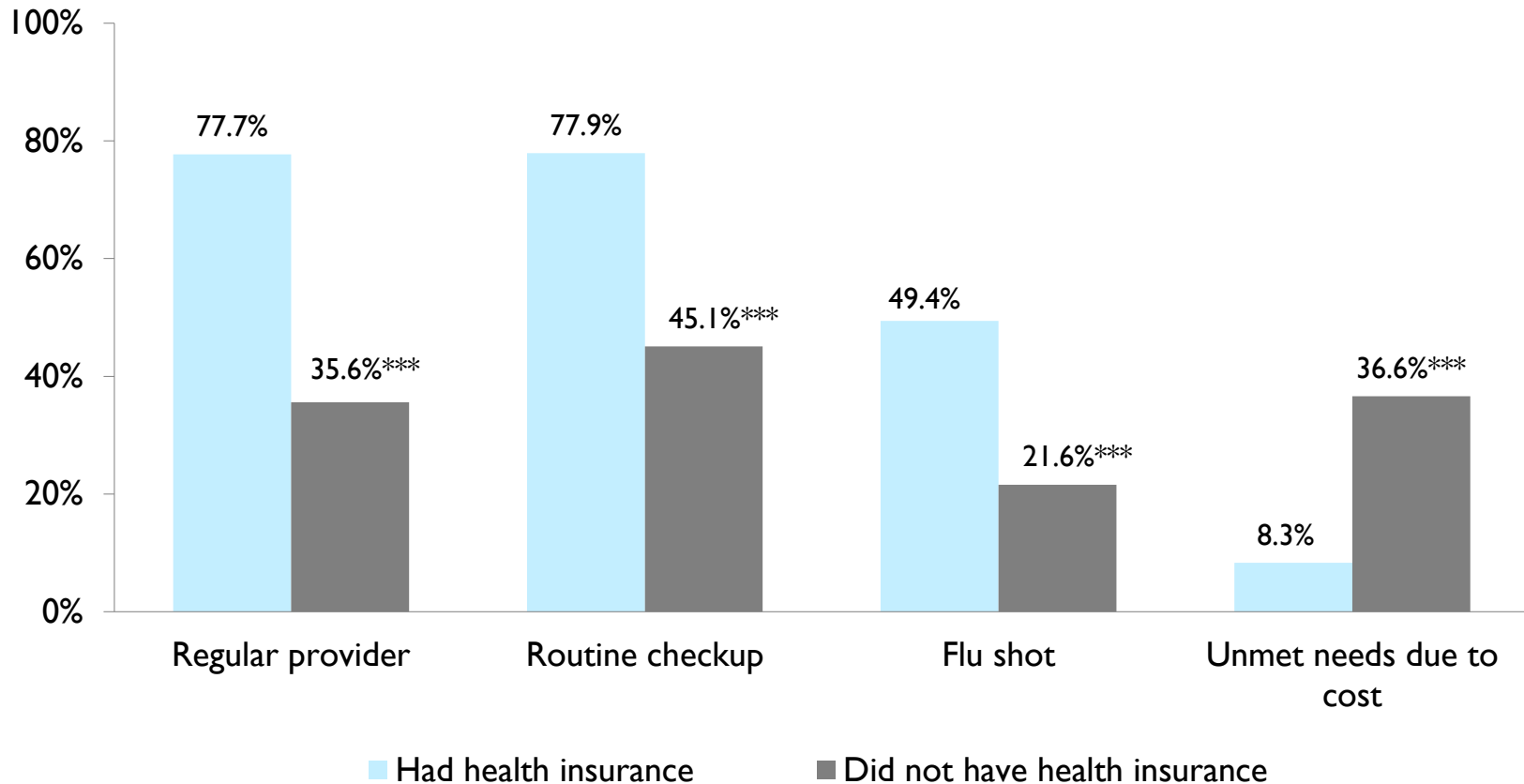


Source: Urban Institute, May 2022. Based on the March 2021 Current Population Survey Annual Social and Economic Supplement (CPS-ASEC).

Notes: Young adults ages 19 to 26 can remain on their parents' health insurance plan as of September 23, 2010. Orange dashed line indicates implementation of Virginia's Medicaid expansion (2019). 2020 estimates should be interpreted with caution due to a lower-than-normal CPS-ASEC survey response rate related to the COVID-19 pandemic.

\* Denotes 2021 estimate is significantly lower than the 2017 estimate at the  $p < 0.1$  level.

# Among nonelderly Virginians, uninsured adults were less likely than insured adults to receive care in 2020



Source: Urban Institute, March 2022. Based on the 2020 Behavioral Risk Factor Surveillance System.

Notes: \*/\*\*/\*\* Denotes estimate is significantly different from estimate for insured at the 0.1/0.05/0.01 percent level. Adults are age 18-64. Measures refer to access or utilization over the past 12 months.

# Methods

- All data are from the Current Population Survey Annual Social and Economic Supplement (CPS-ASEC) conducted by the US Census Bureau and Bureau of Labor Statistics in 2021 and the Behavioral Risk Factor Surveillance System (BRFSS) conducted by the Centers for Disease Control and Prevention in 2020.
- Pandemic-related data collection challenges necessitated a shift to the CPS-ASEC from the American Community Survey (ACS) used in previous *Profiles*. Comparisons of trends over time should use a consistent data source and methodology. As a result, estimates in this chartbook should not be compared to estimates in other *Profiles of Virginia's Uninsured*.
- CPS uninsurance estimates reflect coverage reported at the time of the survey, with most data collection occurring in March. This is in contrast to the ACS, which also collects information on coverage status at the time survey data are collected, though it is fielded continuously throughout the year.
- The family structures and corresponding income and employment estimates presented in the CPS analyses are based on “health insurance units,” or groups of individuals whose income would likely be counted together for the purposes of eligibility for Medicaid/CHIP or the Marketplace. Health insurance units are generally smaller than Census-reported families, and their income is generally lower than the Census estimates of family-based income. *As a result, the CPS estimates of the number of uninsured by income may not match those from other sources that are based on other family and income units.*
- In 2019, Virginia expanded Medicaid to adults (19 – 64) with family income  $\leq 138\%$  FPL. The policy response to the COVID-19 pandemic also included provisions to protect access to health insurance through Medicaid/CHIP and the Marketplaces, so very few people were disenrolled, starting in March 2020.