

Asian Women's Access to Health Insurance Increases but Varies by Subgroup

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Overview

Data released by the U.S. Census Bureau show that, since the Affordable Care Act (ACA) was implemented, significant health insurance gains have been made for Asian women.¹ Asian women now have the highest rates of insurance coverage of any racial/ethnic minority group in the United States, but there is substantial variation across the Asian population in insurance coverage, with some subgroups such as Burmese, Nepalese and Indonesian women having much higher uninsured rates.

The ACA began to correct gaps in access to insurance coverage for women by expanding Medicaid coverage, establishing marketplaces to shop for insurance and providing financial assistance to make coverage affordable. The ACA also guaranteed coverage for a robust scope of benefits, including maternity care, preventive care, mental health services, prescription drugs and more.

Nonetheless, as the data show, more needs to be done to ensure that all women have affordable health coverage. Although Asian women tend to be healthier and have the longest life expectancy of any racial group, there is variation across subgroups, with some groups reporting higher rates of diabetes, cancer and Hepatitis B.² Evidence shows that people with health insurance are more likely to have a personal physician, receive routine checkups, preventative care and chronic illness treatment, than those without coverage.³ Therefore, health insurance provides access to the care Asian women need to get and stay healthy.

Key Findings

- Roughly 9 percent of Asian women are uninsured, a rate similar to that of white women, of whom roughly 8 percent are uninsured.⁴
- One in four low-income Asian women is uninsured, compared to nearly one in six low-income white women.
- Asian women in the South have the lowest rates of health insurance coverage among all Asian women.

Health Coverage Rates for Asian Women

Overall, 91 percent of Asian women (age 18-64) in the United States had health insurance in 2017; this rate is comparable to the rate for white. Coverage rates vary by age group; the oldest and youngest Asian women have the highest rates of coverage.

- Ninety-five percent of Asian girls (age 0-17) have health insurance coverage.
- Ninety-eight percent of Asian women age 65 and older have health insurance coverage.

Asian women of reproductive age (15-44) face big disparities in coverage. Insurance coverage for women of reproductive age is especially critical.⁵ Women need access to preventive health care, such as birth control, to maintain their health and choose when and whether to become a parent.

For women who choose to become a parent or expand their families, health coverage leads to healthier pregnancies. Pregnant women who lack coverage often delay or forgo prenatal care in the first trimester,⁶ and inadequate prenatal care is associated with higher rates of infant and maternal mortality.⁷

- Ninety-one percent of Asian women of reproductive age (age 15-44) have health insurance.

Asian women enroll in health insurance through a variety of sources, including commercial insurers and Medicaid. Most Asian women (18-64) are covered through one or more of the following three sources:

- Sixty-four percent have insurance through an employer.
- Fifteen percent are covered by Medicaid.
- Twenty percent purchase their own insurance on the individual market (most through the ACA health insurance marketplace).

Asian women with low incomes are less likely to have health insurance than white women with low incomes. In fact, 24 percent of Asian women in households that make less than \$25,000 per year do not have the financial security of knowing they will be covered if they get sick or need to see a doctor. This is compared to 16 percent of white women.

Medicaid Coverage for Asian Women

Medicaid is vital to the health of millions of women throughout their lives. Medicaid helps Asian women with low incomes access essential preventive care, family planning, maternal health services, nursing home care and more.

- Almost one million Asian women, or 15 percent nationally, are covered by Medicaid.

- Twenty-eight percent of Asian girls (age 0-17) are covered by Medicaid.

Asian Women's Health Coverage by State

Insurance rates vary across the United States. The uninsured rate for Asian women is highest in the South, where most states did not expand Medicaid coverage.⁸

- Eleven percent of Asian women in the South do not have health insurance.
- Nine percent of Asian women in the Midwest do not have health insurance.
- Eight percent of Asian women in the Northeast do not have health insurance.
- Eight percent of Asian women in the West do not have health insurance.

Insurance coverage also differs from state to state. For example, Colorado, Florida, Georgia, Hawaii, North Dakota, South Dakota, Texas and Utah all have uninsured rates at 20 percent or higher for Black women, leaving too many women without insurance coverage and threatening their health and economic security.

State	Asian Women (18-64)				White Women (18-64)				All People (18-64)			
	Insured		Uninsured		Insured		Uninsured		Insured		Uninsured	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Totals	6,033,363	91.0%	594,793	9%	55,093,951	92.0%	4,799,783	8.0%	174,178,287	87.9%	23,935,142	12.1%
AL	15,589	77.4%	4,555	22.6%	856,505	86.6%	132,837	13.4%	2,488,636	83.7%	485,323	16.3%
AK	13,400	80.3%	3,296	19.7%	113,695	92.4%	9,382	7.6%	377,242	84.5%	69,206	15.5%
AZ	101,196	96.0%	4,223	4.0%	1,002,203	93.5%	69,885	6.5%	3,579,502	87.0%	534,717	13.0%
AR	--	--	--	--	559,761	87.6%	79,247	12.4%	1,480,316	85.4%	252,220	14.6%
CA	1,838,376	91.4%	172,419	8.6%	4,232,463	93.6%	291,691	6.4%	22,007,083	89.4%	2,620,659	10.6%
CO	64,252	94.8%	3,547	5.2%	1,098,278	90.7%	112,090	9.3%	3,083,380	87.3%	447,682	12.7%
CT	49,409	90.0%	5,504	10.0%	674,054	93.1%	49,802	6.9%	1,998,305	92.5%	162,964	7.5%
DE	16,188	92.2%	1,361	7.8%	163,079	90.5%	17,061	9.5%	538,237	88.7%	68,307	11.3%
DC	14,431	90.8%	1,462	9.2%	92,196	94.6%	5,249	5.4%	441,671	93.0%	33,021	7.0%
FL	136,558	77.5%	39,707	22.5%	2,832,417	84.8%	506,825	15.2%	10,317,196	82.5%	2,189,097	17.5%
GA	143,734	91.2%	13,810	8.8%	1,542,467	88.7%	196,306	11.3%	5,309,758	82.5%	1,122,746	17.5%
HI	163,684	93.1%	12,115	6.9%	70,165	92.9%	5,325	7.1%	787,137	91.6%	72,405	8.4%
ID	12,032	82.1%	2,624	17.9%	365,313	86.8%	55,367	13.2%	869,644	85.1%	152,802	14.9%
IL	243,477	89.0%	29,968	11.0%	2,198,640	93.2%	161,618	6.8%	6,972,233	89.4%	823,113	10.6%
IN	45,604	92.9%	3,511	7.1%	1,578,882	95.1%	81,720	4.9%	3,641,261	92.2%	308,888	7.8%

IA	--	--	--	--	775,626	97.4%	20,836	2.6%	1,766,312	96.8%	58,393	3.2%
KS	17,991	85.3%	3,107	14.7%	554,507	89.4%	65,887	10.6%	1,424,048	85.3%	245,351	14.7%
KY	10,351	83.4%	2,061	16.6%	1,096,213	96.8%	35,837	3.2%	2,484,343	94.2%	153,206	5.8%
LA	34,092	87.9%	4,693	12.1%	751,175	90.0%	83,121	10.0%	2,349,321	85.4%	403,183	14.6%
ME	--	--	--	--	339,991	91.5%	31,665	8.5%	703,081	87.8%	97,820	12.2%
MD	116,361	90.5%	12,166	9.5%	910,269	95.1%	46,641	4.9%	3,405,971	92.2%	289,575	7.8%
MA	194,798	93.8%	12,823	6.2%	1,539,106	97.3%	42,963	2.7%	4,307,096	96.5%	155,481	3.5%
MI	126,381	90.6%	13,157	9.4%	2,158,222	93.6%	147,506	6.4%	5,492,248	91.5%	509,659	8.5%
MN	--	--	--	--	1,312,495	95.3%	65,335	4.7%	3,203,637	93.8%	213,549	6.2%
MS	--	--	--	--	418,717	85.5%	70,950	14.5%	1,479,614	83.3%	297,405	16.7%
MO	31,827	89.3%	3,799	10.7%	1,344,373	93.4%	95,013	6.6%	3,215,171	89.5%	377,695	10.5%
MT	2,607	73.3%	948	26.7%	246,604	91.8%	21,966	8.2%	544,246	89.8%	61,649	10.2%
NE	15,320	80.7%	3,672	19.3%	379,563	89.9%	42,585	10.1%	931,580	85.3%	160,616	14.7%
NV	57,831	86.4%	9,130	13.6%	402,467	91.4%	37,839	8.6%	1,565,488	86.3%	248,213	13.7%
NH	17,697	93.4%	1,253	6.6%	344,663	93.1%	25,445	6.9%	776,546	91.2%	74,607	8.8%
NJ	263,366	94.5%	15,453	5.5%	1,455,634	95.2%	73,209	4.8%	4,950,604	90.2%	534,898	9.8%
NM	11,012	92.0%	962	8.0%	211,041	92.7%	16,530	7.3%	1,040,690	85.4%	177,519	14.6%
NY	645,190	91.5%	59,853	8.5%	3,207,929	94.7%	178,885	5.3%	11,429,108	92.5%	926,450	7.5%
NC	104,871	97.0%	3,238	3.0%	1,728,068	90.8%	175,435	9.2%	5,505,024	85.9%	903,224	14.1%

ND	--	--	--	--	171,277	91.9%	15,132	8.1%	410,845	88.8%	51,888	11.2%
OH	53,835	83.4%	10,697	16.6%	2,695,329	94.2%	166,800	5.8%	6,429,788	91.7%	580,102	8.3%
OK	29,043	89.6%	3,365	10.4%	650,923	87.5%	93,256	12.5%	1,885,458	82.6%	396,931	17.4%
OR	59,141	93.1%	4,356	6.9%	907,020	95.4%	44,125	4.6%	2,366,755	91.8%	210,473	8.2%
PA	171,095	90.1%	18,757	9.9%	2,713,517	93.2%	196,889	6.8%	6,922,128	91.2%	670,896	8.8%
RI	10,506	78.2%	2,921	21.8%	234,061	94.8%	12,891	5.2%	622,466	91.0%	61,933	9.0%
SC	--	--	--	--	881,235	89.9%	98,656	10.1%	2,508,096	85.2%	434,327	14.8%
SD	5,683	91.3%	544	8.7%	176,384	93.1%	13,169	6.9%	434,012	86.5%	67,547	13.5%
TN	45,343	93.2%	3,311	6.8%	1,379,532	90.0%	153,447	10.0%	3,514,116	85.8%	581,401	14.2%
TX	434,139	89.7%	49,629	10.3%	3,153,687	86.9%	474,901	13.1%	13,362,355	77.7%	3,828,296	22.3%
UT	19,810	79.3%	5,161	20.7%	651,109	90.9%	65,488	9.1%	1,591,536	86.3%	253,184	13.7%
VT	--	--	--	--	166,583	94.9%	9,044	5.1%	355,631	94.0%	22,899	6.0%
VA	178,296	86.4%	28,064	13.6%	1,379,454	89.7%	158,203	10.3%	4,526,298	87.5%	643,750	12.5%
WA	299,095	93.4%	21,112	6.6%	1,442,206	94.4%	85,613	5.6%	4,350,756	92.4%	360,289	7.6%
WV	--	--	--	--	448,762	89.1%	54,856	10.9%	957,078	87.8%	133,583	12.2%
WI	40,092	94.6%	2,295	5.4%	1,358,190	94.0%	87,279	6.0%	3,184,521	89.9%	359,378	10.1%
WY	2,282	93.2%	167	6.8%	127,902	87.7%	17,936	12.3%	290,721	86.2%	46,622	13.8%

¹ Asian women refers to Census definition as women who have origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. For this analysis, Asian women do not include women of Hispanic ethnicity. U.S. Census Bureau. (2018, January). Race. Retrieved 1 April 2019, from <https://www.census.gov/topics/population/race/about.html>

² U.S. Department of Health and Human Services Health Resources and Service Administration. (2013, January). Women's Health USA 2012. Retrieved 1 April 2019, from <https://mchb.hrsa.gov/whusa12/more/downloads/pdf/whusa12.pdf>

³ McMorow, S., & Polsky, D. (December 2016). Insurance Coverage and Access to Care Under the Affordable Care Act. Retrieved 30 March 2019, from <https://ldi.upenn.edu/brief/insurance-coverage-and-access-care-under-affordable-care-act>; Sommers, B. D., Gawande, A. A., & Baicker, K. (2017, August). Health Insurance Coverage and Health – What the Recent Evidence Tells Us. *The New England Journal of Medicine*. 377, 586-593.

⁴ Data reflects analysis by the National Partnership for Women & Families using the 2017 Current Population Survey, Annual Social and Economic Supplement.

⁵ National Center for Health Statistics. (2017, June). Health, United States, 2015: With Special Feature on Racial and Ethnic Health Disparities. Retrieved on March 22, 2019, from [https://www.cdc.gov/nchs/data/15.pdf](https://www.cdc.gov/nchs/data/hus/15.pdf)

⁶ Egarter, S., Braveman, P., & Marchi, K. (2002). Timing of insurance coverage and use of prenatal care among low-income women. *American Journal of Public Health*, 92(3), 423-427. Retrieved 27 March 2018, from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447093/>

⁷ U.S. Centers for Disease Control and Prevention. Prenatal Care. Retrieved 4 April 2018, from <https://www.cdc.gov/healthcommunication/toolstemplates/entertainment/tips/PregnancyPrenatalCare.html>

⁸ Regions are based on the U.S. Census Bureau's division of the fifty states. The regions are defined as: Northeast (CT, ME, MA, NH, NJ, NY, PA, RI, and VT); Midwest (IL, IN, MI, OH, WI, IA, KS, MN, NE, ND, SD); South (AL, AR, DE, D.C., FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV); and West (AK, AZ, CA, CO, HI, ID, MT, NV, NM, OR, UT, WA).

The National Partnership for Women & Families is a nonprofit, nonpartisan advocacy group dedicated to promoting fairness in the workplace, reproductive health and rights, access to quality, affordable health care and policies that help all people meet the dual demands of work and family. More information is available at NationalPartnership.org.

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