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Without Bold Congressional Action, Major Losses in Health Coverage Will Accelerate the Spread of Untreatable, Deadly COVID-19

COVID-19's spread throughout the United States and the resulting economic collapse have moved with blinding speed. The first American died of COVID-19 on March 1. By May 1— just two months later — 63,000 had lost their lives.[1] During that same period, 33 million people lost their jobs and filed unemployment insurance claims.[2] They represented more than one in five of the 159 million people who were employed during February 2020,[3] the final month before COVID-19 hit America in force.

Many who lost their jobs are simultaneously losing health insurance. Coverage losses obstruct our country's path out of the current crisis. Without insurance, people are much less likely to seek care when they first feel sick. The resulting delays in diagnosis and treatment increase the unchecked spread of COVID-19, putting families and communities at heightened risk.

The Urban Institute recently estimated the range of likely coverage losses in the coming months.[4] Here, we use those results to show the risks that each state will run if Congress fails to take effective action to limit insurance losses. Table 1 (page 3) shows how many people will be uninsured in each state under two scenarios:

- 20% unemployment, with coverage effects analyzed using American Community Survey (ACS) data from 2008–2018, which tend to produce relatively conservative estimates of coverage losses; and
- 25% unemployment, with coverage effects analyzed using National Health Insurance Survey (NHIS) data from 1998–2018, which Urban Institute researchers characterize as providing a "reasonable, high-end estimate of … potential coverage changes."*

Nationally, between 7.3 million people and 15.8 million people are likely to lose their health insurance in the coming months according to this analysis. As a result, the proportion of non-elderly residents without the basic access to diagnosis and treatment furnished by health coverage could rise to 16.5%. **Put differently, nearly one in six people under age 65 could soon be uninsured, putting them at elevated risk of untreated COVID-19 illness and transmission that endangers themselves, their families, and their communities.**

*Each data source has advantages in estimating the relationship between unemployment levels and coverage. TThe ACS-based estimates control for individual-level characteristics that shift over time, but the NHIS-based estimates cover a much longer time period with multiple business-cycle changes. The Urban Institute's use of both sources, in conjunction with several plausible unemployment rates that our country could experience in the coming months, provides a reasonable range of estimated coverage losses if Congress fails to act.

Table 2 (page 6) ranks the states in order of risk. Heading the list is Texas, where a staggering 30.5% of non-elderly residents could become uninsured, serving as higher-risk vectors of potential pandemic spread. The resulting community danger is severe. Almost as gravely affected are Oklahoma and Georgia, where more than one in four residents (25.2% and 25.1%, respectively) could become uninsured; Florida, where 24.2% could soon lack coverage; and Mississippi (22.5%), Wyoming (22.0%), Nevada (20.5%), and South Carolina (20.1%), where more than one in five non-elderly residents could soon lack the basic access to affordable diagnosis and treatment furnished by health insurance.

Table 3 (page 8) ranks the states in order of potential coverage losses. Again heading the list is Texas, where 2.5 million people could soon see their health insurance end. Other states where more than a million residents could join the ranks of the uninsured are California (1.4 million) and Florida (1.3 million). Coverage losses of roughly half a million or more threaten Georgia (778,000), New York (605,000), North Carolina (592,000), Illinois (541,000), and Pennsylvania (493,000).

To help residents in every state, Congress must protect workers' and families' health insurance in the next COVID-19 package, including the following specific steps, many of which were part of H.R. 6379, the Taking Responsibility for Workers and Families Act:

- A $600 million annual investment in individualized consumer assistance is essential for workers overwhelmed by job loss to obtain health insurance from our country's complex system of multiple health coverage programs.
- Premium tax credits for the purchase of private insurance need to be increased substantially to make coverage truly affordable for struggling families.
- Premiums for COBRA coverage for laid-off workers must be fully subsidized, preserving continuity of care for millions of families.
- Federal financial assistance in health insurance exchanges should extend to uninsured low-income adults who are ineligible for Medicaid because their states have refused to implement expanded coverage.
- Medicaid optional coverage for COVID-19 testing, with full federal funding, should expand to encompass treatment, with all uninsured people qualifying for help regardless of their immigration status.
- Federal matching rates for the Medicaid program should increase substantially, with robust maintenance of effort requirements that continue Medicaid's service as our country's bedrock health coverage system for struggling families, with funding assured for the duration of the economic downturn.

Nearly one in six people under age 65 could soon be uninsured, putting them at elevated risk of untreated COVID-19 illness and transmission that endangers themselves and their communities.

Table 1. Projected Increases in the Number of Uninsured Due to COVID-19 Recession, By State and Degree of Potential Coverage Losses: 2020

State	2018 Uninsured Under Age 65		Projected Coverage Losses, By Scenario		Resulting Uninsured, By Scenario			
					Moderate losses		Heavy losses	
	#	%	Moderate losses	Heavy losses	#	%	#	%
Alabama	518,000	12.7%	128,000	276,000	646,000	15.9%	794,000	19.5%
Alaska	89,000	13.6%	19,000	41,000	108,000	16.6%	130,000	19.9%
Arizona	794,000	13.4%	173,000	377,000	967,000	16.4%	1,171,000	19.8%
Arkansas	267,000	10.6%	61,000	131,000	328,000	13.1%	398,000	15.9%
California	2,835,000	8.4%	649,000	1,405,000	3,484,000	10.3%	4,240,000	12.5%
Colorado	444,000	9.1%	120,000	257,000	564,000	11.5%	701,000	14.3%
Connecticut	186,000	6.3%	56,000	121,000	242,000	8.2%	307,000	10.4%
Delaware	55,000	7.0%	17,000	37,000	72,000	9.2%	92,000	11.7%
District of Columbia	23,000	3.8%	6,000	14,000	29,000	4.7%	37,000	6.0%
Florida	2,838,000	16.8%	581,000	1,254,000	3,419,000	20.2%	4,092,000	24.2%
Georgia	1,494,000	16.5%	360,000	778,000	1,854,000	20.5%	2,272,000	25.1%
Hawaii	58,000	5.0%	18,000	37,000	76,000	6.5%	95,000	8.2%
Idaho	196,000	13.3%	31,000	66,000	227,000	15.4%	262,000	17.8%
Illinois	894,000	8.3%	250,000	541,000	1,144,000	10.6%	1,435,000	13.4%
Indiana	573,000	10.2%	172,000	372,000	745,000	13.2%	945,000	16.8%
Iowa	157,000	6.0%	52,000	112,000	209,000	8.0%	269,000	10.3%
Kansas	256,000	10.4%	82,000	174,000	338,000	13.8%	430,000	17.5%
Kentucky	259,000	6.9%	65,000	140,000	324,000	8.7%	399,000	10.7%

Table 1. Projected Increases in the Number of Uninsured Due to COVID-19 Recession, By State and Degree of Potential Coverage Losses: 2020, Continued

State	2018 Uninsured Under Age 65		Projected Coverage Losses, By Scenario		Resulting Uninsured, By Scenario			
					Moderate losses		Heavy losses	
	#	%	Moderate losses	Heavy losses	#	%	#	%
Louisiana	393,000	10.0%	86,000	186,000	479,000	12.2%	579,000	14.7%
Maine	105,000	9.8%	24,000	51,000	129,000	12.1%	156,000	14.6%
Maryland	358,000	7.0%	114,000	246,000	472,000	9.2%	604,000	11.8%
Massachusetts	188,000	3.3%	61,000	131,000	249,000	4.3%	319,000	5.5%
Michigan	554,000	6.7%	155,000	335,000	709,000	8.6%	889,000	10.7%
Minnesota	246,000	5.2%	90,000	193,000	336,000	7.1%	439,000	9.3%
Mississippi	389,000	15.5%	81,000	177,000	470,000	18.7%	566,000	22.5%
Missouri	586,000	11.5%	175,000	375,000	761,000	15.0%	961,000	18.9%
Montana	86,000	10.0%	23,000	48,000	109,000	12.7%	134,000	15.6%
Nebraska	163,000	10.0%	54,000	115,000	217,000	13.4%	278,000	17.1%
Nevada	344,000	13.4%	83,000	180,000	427,000	16.7%	524,000	20.5%
New Hampshire	72,000	6.5%	29,000	62,000	101,000	9.1%	134,000	12.1%
New Jersey	654,000	8.8%	214,000	460,000	868,000	11.6%	1,114,000	14.9%
New Mexico	199,000	11.5%	36,000	79,000	235,000	13.6%	278,000	16.1%
New York	1,032,000	6.3%	282,000	606,000	1,314,000	8.0%	1,638,000	10.0%
North Carolina	1,116,000	12.8%	276,000	592,000	1,392,000	16.0%	1,708,000	19.6%
North Dakota	57,000	8.9%	20,000	42,000	77,000	12.0%	99,000	15.4%
Ohio	780,000	8.0%	217,000	468,000	997,000	10.3%	1,248,000	12.9%

Table 1. Projected Increases in the Number of Uninsured Due to COVID-19 Recession, By State and Degree of Potential Coverage Losses: 2020, Continued

State	2018 Uninsured Under Age 65		Projected Coverage Losses, By Scenario		Resulting Uninsured, By Scenario			
					Moderate losses		Heavy losses	
	#	%	Moderate losses	Heavy losses	#	%	#	%
Oklahoma	553,000	16.6%	133,000	285,000	686,000	20.6%	838,000	25.2%
Oregon	306,000	8.9%	77,000	166,000	383,000	11.1%	472,000	13.7%
Pennsylvania	758,000	7.2%	228,000	493,000	986,000	9.4%	1,251,000	11.9%
Rhode Island	43,000	5.0%	13,000	27,000	56,000	6.4%	70,000	8.0%
South Carolina	547,000	13.1%	136,000	293,000	683,000	16.3%	840,000	20.1%
South Dakota	82,000	11.2%	24,000	52,000	106,000	14.4%	134,000	18.2%
Tennessee	710,000	12.5%	172,000	371,000	882,000	15.6%	1,081,000	19.1%
Texas	5,146,000	20.5%	1,162,000	2,510,000	6,308,000	25.1%	7,656,000	30.5%
Utah	291,000	10.3%	61,000	130,000	352,000	12.5%	421,000	15.0%
Vermont	24,000	4.8%	7,000	15,000	31,000	6.2%	39,000	7.7%
Virginia	736,000	10.2%	160,000	341,000	896,000	12.5%	1,077,000	15.0%
Washington	489,000	7.7%	137,000	292,000	626,000	9.8%	781,000	12.3%
West Virginia	118,000	8.2%	27,000	59,000	145,000	10.1%	177,000	12.3%
Wisconsin	334,000	6.9%	120,000	256,000	454,000	9.4%	590,000	12.2%
Wyoming	63,000	13.1%	20,000	43,000	83,000	17.2%	106,000	22.0%
USA	29,457,000	10.7%	7,336,000	15,812,000	36,793,000	13.4%	45,269,000	16.5%

Sources: American Community Survey data, 2018, analyzed by the National Center for Coverage Innovation at Families USA using IPUMS USA, University of Minnesota, www.ipums.org; Garrett, Bowen, and Anuj Gangopadhyaya. "How the COVID-19 Recession Could Affect Health Insurance Coverage." Urban Institute, May 4, 2020. https://www.urban.org/sites/default/files/publication/102157/how-the-covid-19-recession-could-affect-health-insurance-coverage_0.pdf. Note: The moderate coverage loss scenario involves a projected 20% unemployment rate with methods for estimating coverage losses that rely on 2008–2018 data from the American Community Survey. The heavy coverage loss scenario assumes a 25% unemployment rate and Urban Institute estimation methods that rely on National Health Interview Survey data from 1998–2018. The number of uninsured at the start of 2020 may have differed from the number in 2018, which is the most recent period for which data are available.

Table 2. States at Greatest Risk of Coverage Gaps That Accelerate the Spread of COVID-19: 2020

Rank	State	Percentage of Uninsured Residents Under Age 65 If Heavy Coverage Losses Occur
1	Texas	30.5%
2	Oklahoma	25.2%
3	Georgia	25.1%
4	Florida	24.2%
5	Mississippi	22.5%
6	Wyoming	22.0%
7	Nevada	20.5%
8	South Carolina	20.1%
9	Alaska	19.9%
10	Arizona	19.8%
11	North Carolina	19.6%
12	Alabama	19.5%
13	Tennessee	19.1%
14	Missouri	18.9%
15	South Dakota	18.2%
16	Idaho	17.8%
17	Kansas	17.5%
18	Nebraska	17.1%
19	Indiana	16.8%
20	New Mexico	16.1%
21	Arkansas	15.9%
22	Montana	15.6%
23	North Dakota	15.4%
24	Virginia	15.0%
25	Utah	15.0%
26	New Jersey	14.9%
27	Louisiana	14.7%
28	Maine	14.6%
29	Colorado	14.3%

Table 2. States at Greatest Risk of Coverage Gaps That Accelerate the Spread of COVID-19: 2020, Continued

Rank	State	Percentage of Uninsured Residents Under Age 65 If Heavy Coverage Losses Occur
30	Oregon	13.7%
31	Illinois	13.4%
32	Ohio	12.9%
33	California	12.5%
34	West Virginia	12.3%
35	Washington	12.3%
36	Wisconsin	12.2%
37	New Hampshire	12.1%
38	Pennsylvania	11.9%
39	Maryland	11.8%
40	Delaware	11.7%
41	Michigan	10.7%
42	Kentucky	10.7%
43	Connecticut	10.4%
44	Iowa	10.3%
45	New York	10.0%
46	Minnesota	9.3%
47	Hawaii	8.2%
48	Rhode Island	8.0%
49	Vermont	7.7%
50	District of Columbia	6.0%
51	Massachusetts	5.5%

Sources: American Community Survey data, 2018, analyzed by the National Center for Coverage Innovation at Families USA using IPUMS USA, University of Minnesota, www.ipums.org; Garrett, Bowen, and Anuj Gangopadhyaya. "How the COVID-19 Recession Could Affect Health Insurance Coverage." Urban Institute, May 4, 2020. https://www.urban.org/sites/default/files/publication/102157/how-the-covid-19-recession-could-affect-health-insurance-coverage_0.pdf. Note: The percentages shown here assume a 25% unemployment rate and Urban Institute estimation methods that rely on National Health Interview Survey data from 1998–2018.

Table 3. States With the Largest Potential Health Coverage Losses: 2020

Rank	State	Number Who Will Become Uninsured If Heavy Coverage Losses Occur
1	Texas	2,510,000
2	California	1,405,000
3	Florida	1,254,000
4	Georgia	778,000
5	New York	606,000
6	North Carolina	592,000
7	Illinois	541,000
8	Pennsylvania	493,000
9	Ohio	468,000
10	New Jersey	460,000
11	Arizona	377,000
12	Missouri	375,000
13	Indiana	372,000
14	Tennessee	371,000
15	Virginia	341,000
16	Michigan	335,000
17	South Carolina	293,000
18	Washington	292,000
19	Oklahoma	285,000
20	Alabama	276,000
21	Colorado	257,000
22	Wisconsin	256,000
23	Maryland	246,000
24	Minnesota	193,000
25	Louisiana	186,000
26	Nevada	180,000
27	Mississippi	177,000
28	Kansas	174,000
29	Oregon	166,000
30	Kentucky	140,000

Table 3. States With the Largest Potential Health Coverage Losses: 2020, Continued

Rank	State	Number Who Will Become Uninsured If Heavy Coverage Losses Occur
31	Arkansas	131,000
32	Massachusetts	131,000
33	Utah	130,000
34	Connecticut	121,000
35	Nebraska	115,000
36	Iowa	112,000
37	New Mexico	79,000
38	Idaho	66,000
39	New Hampshire	62,000
40	West Virginia	59,000
41	South Dakota	52,000
42	Maine	51,000
43	Montana	48,000
44	Wyoming	43,000
45	North Dakota	42,000
46	Alaska	41,000
47	Delaware	37,000
48	Hawaii	37,000
49	Rhode Island	27,000
50	Vermont	15,000
51	District of Columbia	14,000

Sources: American Community Survey data, 2018, analyzed by the National Center for Coverage Innovation at Families USA using IPUMS USA, University of Minnesota, www.ipums.org; Garrett, Bowen, and Anuj Gangopadhyaya. "How the COVID-19 Recession Could Affect Health Insurance Coverage." Urban Institute, May 4, 2020. https://www.urban.org/sites/default/files/publication/102157/how-the-covid-19-recession-could-affect-health-insurance-coverage_0.pdf. Note: The numbers shown here assume a 25% unemployment rate and Urban Institute estimation methods that rely on National Health Interview Survey data from 1998–2018.

Endnotes

[1] Roser, Max, Hannah Ritchie, Esteban Ortiz-Ospina, and Joe Hasell. "Coronavirus (COVID-19) Deaths." Our World in Data, May 7, 2020. https://ourworldindata.org/covid-deaths?country=USA.

[2] Cohen, Patricia, and Tiffany Hsu. "For Workers, No Sign of 'What Normal Is Going to Look Like.'" *New York Times*. May 7, 2020. https://www.nytimes.com/2020/05/07/business/economy/coronavirus-unemployment-claims.html.

[3] United States Department of Labor, U.S. Bureau of Labor Statistics. "Table A-1. Employment status of the civilian population by sex and age." *Economic News Release*. April 3, 2020. https://www.bls.gov/news.release/empsit.t01.htm.

[4] Garrett, Bowen, and Anuj Gangopadhyaya. "How the COVID-19 Recession Could Affect Health Insurance Coverage." Urban Institute, May 4, 2020. https://www.urban.org/sites/default/files/publication/102157/how-the-covid-19-recession-could-affect-health-insurance-coverage_0.pdf.

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