MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Senator Susan Wagle at 1:30 p.m. on February 4, 2003 in Room 231-N of the Capitol.

All members were present except:

Committee staff present:

Ms. Emalene Correll, Kansas Legislative Research Department

Mr. Norm Furse, Revisor of Statutes

Ms. Margaret Cianciarulo, Administrative Assistant

Conferees appearing before the committee: Dr. Lorne Phillips, PhD,

Director of the Center for Health and Environmental Statistics, KDHE

Ms. Janet Schlansky, Secretary of Social Rehabilitation

Statistics

Others attending:

See attached guest list

Approval of Minutes

Upon calling the meeting to order, the Minutes of January 21, 22, and 23 were distributed to the Committee. Chairperson Wagle asked that the Committee call Ms. Cianciarulo with their comments and if none are received by the February 11, 2003 Committee meeting, the above minutes would stand approved.

Introduction of Bills

The next order of business was bill presentation. The Chair recognized Senator Jim Barnett who asked that the Committee introduce legislation for the American Heart Association regarding automated external defibrillators. Senator Barnett then made a motion to introduce the proposed legislation and Senator Salmans seconded the motion. The motion carried.

The Chair then recognized Senator Salmans who asked that the Committee introduce previous legislation that had passed the Senate but has not made it thru the House pertaining to the licensure of drug alcohol counselors. Senator Salmans then made a motion to introduce the proposed legislation and Senator Barnett seconded the motion. The motion carried.

Mr. John Peterson, representing Kansas Speech and Hearing Association was next to be recognized. He asked that the Committee introduce legislation creating a narrow additional exception to the Hearing Aid Dealers Licensing Act. A copy of the proposed amendment is (Attachment 1) attached hereto and incorporated into the Minutes by reference. Senator Salmans made a motion to hear the proposed legislation. Senator Haley seconded the motion and the motion carried.

The last to present a bill request was Mr. Bud Burke, regarding the physical therapists licensure . \underline{A} motion was made by Senator Jordan to hear the proposed legislation. Senator Brungardt seconded the motion and the motion carried.

Distribution of Handouts

The Chair then called the Committee's attention to a hand out she received from Ms. Correll, Legislative Research. A copy of this handout is (Attachment 2) attached hereto and incorporated into the Minutes by reference.

CONTINUATION SHEET

MINUTES OF THE SENATE PUBLIC HEALTH AND WELFARE at on February 4, 2003 in Room 231-N of the Capitol. Page 2

Annual Report of Health Care Data Governing Board

The Chair then introduced Dr. Lorne Phillips, Ph.D., Chair, Health Care Data Governing Board and Director, Center for Health and Environmental Statistics, Kansas Department of Health and Environment to present the Health Care Data Governing Board's 2002 Annual Report as required. Dr. Phillips presented highlights of the work of the Board which included:

- Legislative issues, ex. Mental Health Parity;
- Informational Initiatives, ex. Supported the works of HARK (HIPAA Awareness & Readiness for Kansas);
- Bioterrorism, ex. Data collection was expanded to enhance the Health Alert Network;
- Data Partnerships, ex. State Trauma Registry Database coordination;
- Publications, official and contributions;
- Data Requests, ex. More than 106,000 successful website hits recorded through the Information Network of Kansas; and
- Presentations, ex. Project Access: A Study of the Uninsured in Sedgwick County.

A copy of his presentation is (<u>Attachment 3</u>) attached hereto and incorporated into the Minutes as referenced. A copy of the Health Care Data Governing Board's 2002 Annual Report has been filed in Chairperson Susan Wagle's office.

Overview of the Kansas Department of Social and Rehabilitation Services

As there were no questions from the Committee for Dr. Phillips, the Chair then introduced Ms. Janet Schlansky, Secretary, Kansas Department of Social and Rehabilitation Services, who presented an overview of the SRS Agency. Highlights of her presentation included:

- The mission, principles, and vision of the SRS;
- New leadership team introductions;
- Expenses by category, revenue, and summary of expenditures and persons assisted;
- SRS employee count downsizing overview;
- Highlights for 2003/4 sessions (including proposals and budgets); and
- Emerging issues (including adjustments in Governor's budget recommendations).

A copy of her presentation is (<u>Attachment 4</u>) attached hereto and incorporated into the Minutes as referenced.

Adjournment

As it was going on 2:30 p.m., the Chair announced they would try to visit with Ms. Schlansky at a later date to answer any questions the Committee might have.

The next meeting is scheduled for February 5, 2003.

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: _2/04/03

NAME	DEDDECENTING
	REPRESENTING
LORNE A. THILLIPS	KUHB
Lana Howard	SRS
Janet Schalansky	SRS
Marianne Deaple!	8RS
Lois Weeks	SRS
Waril Docodo	SRS
Soft Brunner	Doz
Sysan Fetsch	Se1f
Tashel Sind Alaan	KDHZ
Lou Sard	10045
LUNGA LUKENSKO	KS Home Carp Ussoc
Lim Myllin	Inter Hal
Jennifer Crow	Sour noi à office
DAVID OWEN	HOMELESS COME HOME
Elise J. Miller	Ass. to Sev. Salamons
J. M. Byrnes	ASS Sen. DARRAGES
Coesage J. Vega	SRS
John C. Peterson	Ks Sport langung + Heing Asn
Larrie Ann Lower	ICATIP

74-5810

Chapter 74.--STATE BOARDS, COMMISSIONS AND AUTHORITIES Article 58.--BOARD OF EXAMINERS FOR HEARING AIDS

74-5810. Same; certain persons exempt from act. (a) This act shall not apply to:

- (1) a person while he <u>such person</u> is engaged in the practice of fitting hearing aids if his <u>such person</u>'s practice is part of the academic curriculum of an accredited institution of higher education or part of a program conducted by a public, charitable institution or nonprofit organization, which is primarily supported by voluntary contributions <u>provided</u>, <u>such</u> organization does not sell hearing aids or accessories thereto <u>and such person performing the fitting in this section does not specifically charge the person fitted a fee for such services; or</u>
- (2) a licensed audiologist employed by a publicly funded school district, a special education cooperative or an education service center while serving preschool through high school age students, provided, such organization does not sell hearing aids or accessories thereto and such person performing the fitting in this section does not specifically charge the person fitted a fee for such services.
- (b) If such person exempt from this act pursuant to subsection (a) is a licensee of another state agency and a complaint is filed against such person with such agency regarding conduct covered by this act, such agency shall consult with the board of examiners for hearing aids regarding such complaint.
- (c) This act shall not be construed to prevent or limit any person who is a practitioner of the healing arts licensed by the state board of healing arts in treatment of any kind or in fitting hearing aids to the human ear.

History: L. 1968, ch. 164, §§ 10; July 1.

Senate Aublic Health Welfue Committee Nate: February 4, 2003 Attachment 191

lik

Health Insurance Coverage: 2001

Consumer Income

Issued September 2002

P60-220

Reversing 2 years of falling uninsured rates, the share of the population without health insurance rose in 2001. An estimated 14.6 percent of the population or 41.2 million people were without health insurance coverage during the entire year in 2001, up from 14.2 percent in 2000, an increase of 1.4 million people.

The estimates in this report are based on the 2002 Current Population Survey (CPS) Annual Demographic Supplement, conducted by the U.S. Census Bureau. Respondents provide answers to the best of their ability, but as with all surveys, the estimates may differ from the actual values. A copy of the CPS Supplement questionnaire is available electronically at http://www.census.gov/apsd/techdoc/cps/cps-main.html.

Highlights:1

 The number and percentage of people covered by employment-based health insurance dropped in 2001, from 63.6 percent to 62.6 percent, the foundation

¹ Confidence intervals for estimates are provided in Table 1. These measures of sampling error should be used when comparing estimates.

NEW POPULATION CONTROLS AND EXPANDED SAMPLE

The estimates in this report are based on the 2000, 2001, and 2002 Current Population Survey Annual Demographic Supplements (CPS ADS) and provide information for calendar years 1999, 2000, and 2001, respectively. These estimates use population estimates based on Census 2000. Earlier reports presenting data for calendar years 1993 through 2000 used population estimates based on the 1990 census.

In 2001, the Census Bureau tested a sample expansion of 28,000 households to the CPS ADS. The sample expansion was officially implemented in the estimates presented here. It is primarily designed to improve the reliability of state estimates of children's health insurance coverage, but the larger sample size also improves the reliability of national estimates of other topics.

Because results presented in this report from the 2001 survey have been recalculated based on the expanded sample and the Census 2000-based weights, they may differ slightly from earlier estimates that did not incorporate the sample expansion and were based on the 1990 census. Appendix B presents more detail on the introduction of the sample expansion and new population controls based on Census 2000.

All statements in this report have undergone statistical testing, and all comparisons are significant at the 90-percent confidence level. Further information on the source and accuracy of the estimates is at www.bls.census.gov/cps/ads/2002/ssrcacc.htm.

Current Population Reports

By Robert J. Mills

Demographic Programs

USCENSUSBUREAU

Helping You Make Informed Decisions •1902-2002

U.S. Department of Commerce Economics and Statistics Administration U.S. CENSUS BUREAU

Senate Rublic dealth and Welfare Committle Dicte: February 4, 2003 attuchment 2-1 of the overall decrease in health insurance coverage.

- The number and percentage of people covered by government health insurance programs rose in 2001, from 24.7 percent to 25.3 percent, largely from an increase in the number and percentage of people covered by medicaid (from 10.6 percent to 11.2 percent).
- The proportion of uninsured children did not change, remaining at 8.5 million in 2001, or 11.7 percent of all children.
- Although medicaid insured 13.3 million poor people, 10.1 million poor people still had no health insurance in 2001, representing 30.7 percent of the poor, unchanged from 2000.
- Hispanics (66.8 percent) were less likely than non-Hispanic Whites (90.0 percent) to be covered by health insurance.² The coverage rate for Blacks in 2001 (81.0 percent) did not differ from the coverage rate for Asians and Pacific Islanders (81.8 percent).
- American Indians and Alaska
 Natives were less likely to have health insurance than other racial groups, based on 3-year averages (1999-2001) 72.9 percent, compared with 80.8 percent of Blacks, 81.5 percent of Asians and Pacific Islanders, and 90.2

percent of non-Hispanic Whites. However, American Indians and Alaska Natives were more likely to have insurance than were Hispanics (67.0 percent).

- Among the entire population 18 to 64 years old, workers (both full- and part-time) were more likely to have health insurance (83.0 percent) than nonworkers (75.3 percent), but among the poor, workers were less likely to be covered (51.3 percent) than nonworkers (63.2 percent).
- Compared with 2000, the proportion who had employment-based policies in their own name fell for workers employed by firms with fewer than 25 employees, but was unchanged for those employed by larger firms.
- Young adults (18 to 24 years old) were less likely than other age groups to have health insurance coverage — 71.9 percent in 2001, compared with 83.3 percent of those 25 to 64 and, reflecting widespread medicare coverage, 99.2 percent of those 65 years and over.

More people did not have health insurance in 2001.

The number of people without health insurance coverage rose to 41.2 million (14.6 percent of the population) in 2001, up 1.4 million from the previous year, when 14.2 percent of the population lacked coverage (see Table 1). Interestingly, the number of people covered by health insurance also increased in 2001, up 1.2 million to 240.9 million (85.4 percent of the population). Both increases can be attributed in part to an overall population growth from 2000 to 2001.

A decline in employmentbased insurance prompted the decrease in insurance coverage rates.³

Most people (62.6 percent) were covered by a health insurance plan related to employment for some or all of 2001, a decrease of 1.0 percentage point from the previous year. The 1.1 percentage point decline in private health insurance coverage, to 70.9 percent in 2001, largely reflects the decrease in employment-based insurance (see Figure 1).

Although it did not offset the overall decline, health insurance coverage provided by the government increased between 2000 and 2001. This increase largely reflects the increase in medicaid coverage, which rose by 0.6 percentage points to 11.2 percent in 2001.4 Among the entire population, 25.3 percent had government insurance, including medicare (13.5 percent), medicaid (11.2 percent), and military health care (3.4 percent). Many people carried coverage from more than one plan during the year; for example, 7.6 percent of people were covered by both private health insurance and medicare.

² Because Hispanics may be of any race, data in this report for Hispanics overlap slightly with data for the Black population and the Asian and Pacific Islander population. About 10.9 percent of White households, 3.0 percent of Black households, 2.0 percent of Asian and Pacific Islander households, and 13.1 percent of American Indian and Alaska Native households are maintained by a person of Hispanic origin.

³ Employment-based health insurance is coverage offered through one's own employment or a relative's.

⁴ Some of this increased medicaid coverage may be due to expansions in the State Children's Health Insurance Program. For further discussion, see Charles T. Nelson and Robert J. Mills; U.S. Census Bureau; "The Characteristics of People Reporting State Children's Health Insurance Program Coverage in the March 2001 Current Population Survey;" August 2002; at www.census.gov/hhes/hlthins/asa02.pdf.

Table 1.

People Without Health Insurance for the Entire Year by Selected Characteristics: 2000 and 2001

		20	01			200	00		Difference, 2001 less 2000 ¹			
Oh a sa aka da ka			Uninsured			1	Uninsured		į	Uninsured		
Characteristic	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Number	Per- cent	Percent 90-pct C.I. (±)	
People Total	282,082	41,207	14.6	0.2	279,517	39,804	14.2	0.2	*1,403	*0.4	0.1	
Sex Male Female	137,871 144,211	21,722 19,485	15.8 13.5	0.2 0.2	136,559 142,958	20,791 19,013	15.2 13.3	0.2 0.2	*931 *472	*0.5 *0.2	0.2 0.2	
Race and Ethnicity White	230,071 194,822 36,023 12,500	31,193 19,409 6,833 2,278	13.6 10.0 19.0 18.2	0.2 0.2 0.3 0.7	228,208 193,931 35,597 12,693	30,075 18,683 6,683 2,287	13.2 9.6 18.8 18.0	0.2 0.2 0.3 0.7	*1,118 *726 150 –9	*0.4 *0.3 0.2 0.2	0.1 0.1 0.5 0.8	
Hispanic ²	37,438	12,417	33.2	0.3	36,093	11,883	32.9	0.3	*534	0.2	0.4	
Age Under 18 years 18 to 24 years 25 to 34 years 35 to 44 years 45 to 64 years 65 years and over	72,628 27,312 38,670 44,284 65,419 33,769	8,509 7,673 9,051 7,131 8,571 272	11.7 28.1 23.4 16.1 13.1 0.8	0.2 0.5 0.3 0.3 0.2	72,314 26,815 38,865 44,566 63,391 33,566	8,617 7,406 8,507 6,898 8,124 251	11.9 27.6 21.9 15.5 12.8 0.7	0.2 0.5 0.3 0.3 0.2	-108 *267 *544 *233 *447 21	-0.2 0.5 *1.5 *0.6 *0.3 0.1	0.2 0.6 0.4 0.4 0.3	
Nativity Native Foreign born Naturalized citizen Not a citizen	249,629 32,453 11,962 20,491	30,364 10,843 2,060 8,782	12.2 33.4 17.2 42.9	0.2 0.5 0.7 0.7	247,706 31,811 11,785 20,026	29,529 10,275 1,930 8,345	11.9 32.3 16.4 41.7	0.2 0.5 0.7 0.7	*835 *568 *131 *437	*0.2 *1.1 *0.9 *1.2	0.1 0.6 0.8 0.8	
Region Northeast. Midwest. South. West.	53,300 63,779 100,652 64,351	6,399 6,840 16,712 11,257	12.0 10.7 16.6 17.5	0.2 0.2 0.2 0.3	53,046 63,631 99,420 63,420	6,372 6,703 16,000 10,728	12.0 10.5 16.1 16.9	0.2 0.2 0.2 0.3	27 136 *712 *528	0.2 *0.5 *0.6	0.3 0.2 0.3 0.3	
Household Income Less than \$25,000. \$25,000 to \$49,999. \$50,000 to \$74,999. \$75,000 or more.	62,209 76,226 58,114 85,532	14,474 13,516 6,595 6,623	23.3 17.7 11.3 7.7	0.3 0.2 0.2 0.2	61,792 77,084 59,089 81,553	14,094 13,385 6,513 5,812	22.8 17.4 11.0 7.1	0.3 0.2 0.2 0.2	*380 131 81 *811	*0.5 *0.4 *0.3 *0.6	0.4 0.3 0.3 0.2	
Education (18 years and older) Total No high school diploma High school graduate only Some college, no degree Associate degree Bachelor's degree or higher	209,454 35,423 66,682 40,282 16,183 50,884	32,698 9,776 11,618 5,815	15.6 27.6 17.4 14.4 10.8 7.3	0.2 0.5 0.3 0.3 0.5	207,203 34,994 66,327 40,298	31,186 9,406 11,137 5,400 1,721	15.1 26.9 16.8 13.4 10.7 7.1	0.2 0.5 0.3 0.3 0.5 0.2	*1,512 *370 *481 *415 34 *212	*0.6 *0.7 *0.6 *1.0 0.1 0.2	0.2 0.5 0.3 0.4 0.5	
Work Experience (18 to 64 years old) Total Worked during year. Worked full-time Worked part-time Did not work	175,685 142,474 118,776 23,698 33,211	32,426 24,230 19,014 5,216 8,197	18.5 17.0 16.0 22.0 24.7	0.2 0.2 0.2 0.5 0.5	173,638 142,447 119,067 23,381	30,935 23,525 18,707 4,818	17.8 16.5 15.7 20.6 23.8	0.2 0.2 0.2 0.5 0.5	*1,491 *704 307 *398	*0.6 *0.5 *0.3 *1.4 *0.9	0.2 0.2 0.3 0.7 0.6	

^{*}Statistically significant at the 90-percent confidence level. - Represents zero or rounds to zero.

Source: U.S. Census Bureau, Current Population Survey, 2001 and 2002 Annual Demographic Supplements.

3

¹All numbers are derived from unrounded numbers. Some numbers and percentages may therefore appear to be slightly higher or lower than those computed with rounded figures from other columns.

²Hispanics may be of any race.

The uninsured rates for the poor and the near poor did not change between 2000 and 2001.

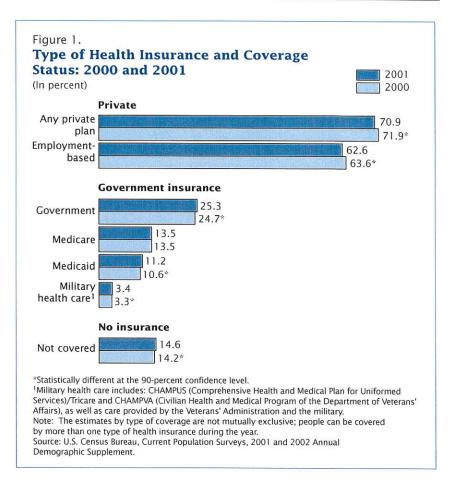
Despite the medicaid program, 10.1 million poor people, or 30.7 percent of the poor, had no health insurance of any kind during 2001. This percentage — more than double the rate for the total population — did not change significantly from the previous year. The uninsured poor comprised 24.5 percent of all uninsured people (see Table 2).

Medicaid was the most widespread type of health insurance among the poor, with 40.5 percent (13.3 million) of those in poverty covered by medicaid for some or all of 2001. This percentage did not change from the previous year.⁵

Among the near poor (those with a family income greater than or equal to, but less than 125 percent of, the poverty level), 26.5 percent (3.3 million people) lacked health insurance in 2001, unchanged from 2000. Although private health insurance coverage among the near poor declined in 2001 — from 40.3 percent to 37.8 percent — their rate of government health insurance coverage did not change from 2000 (it was 47.1 percent in 2001).

Key demographic factors affect health insurance coverage.

Age - People 18 to 24 years old were less likely than other age groups to have health insurance coverage, with 71.9 percent covered for some or all of 2001. Because of medicare, almost all people 65 years and over (99.2 percent) had health insurance in 2001. For other age groups, health insurance coverage ranged from 76.6 percent to 88.3 percent (see Figure 2).



Among the poor, people 18 to 64 years old had a markedly lower health insurance coverage rate (57.7 percent) in 2001 than either people under 18 (78.7 percent) or 65 years and over (97.3 percent).

Race and Hispanic origin - While the uninsured rate rose in 2001 for non-Hispanic Whites — from 9.6 percent to 10.0 percent — the uninsured rates among Blacks (19.0 percent) and among Asians and Pacific Islanders (18.2 percent) did not change from 2000.⁷ The uninsured

⁶ The health insurance coverage rates of poor people 18-64 years old and poor people 35-44 years old were not different.

rate among Hispanics (33.2 percent in 2001) also did not change from 2000 (see Table 1).8

The CPS Annual Demographic Supplement, the source of these data, obtained interviews from 78,000 households nationwide but is not large enough to produce reliable annual estimates for American Indians and Alaska Natives. However, Table 3 displays 3-year averages of the number of American Indians and Alaska Natives, their uninsured rate, and 3-year-average uninsured rates for other race groups. The 3-year average (1999-2001) shows that 27.1 percent of American Indians

⁵ Changes in year-to-year medicaid estimates should be viewed with caution. For more information, see the Technical Note on page 12.

⁷ Data users should exercise caution when interpreting aggregate results for the Asian and Pacific Islander (API) population because the API population consists of many distinct groups that differ in socio-economic characteristics, culture, and recency of immigration. In addition, the CPS does not use separate population controls for weighting the API sample to national totals.

⁸ Data users should exercise caution when interpreting aggregate results for the Hispanic population because this population consists of many distinct groups that differ in socio-economic characteristics, culture, and recency of immigration.

Poor People Without Health Insurance for the Entire Year by Selected Characteristics: 2000 and 2001

		20	001			20	00		Difference, 2001 less 2000¹			
Chara staristic			Uninsured)	Uninsured		1	Uninsured		
Characteristic	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Number	Per- cent	Percent 90-pct C.I. (±)	
People Total	32,907	10,093	30.7	1.0	31,581	9,548	30.2	1.0	*545	0.4	1.0	
Sex Male Female	14,327 18,580	4,854 5,239	33.9 28.2	1.5 1.3	13,536 18,045	4,461 5,086	33.0 28.2	2.1 1.3	*393 152	0.9	2.0 1.3	
Race and Ethnicity White	22,739 15,271 8,136 1,275 7,997	7,206 3,893 2,131 489 3,496	31.7 25.5 26.2 38.3 43.7	1.2 1.3 1.8 5.1 2.1	21,645 14,366 7,982 1,258 7,747	6,804 3,576 2,038 464 3,356	31.4 24.9 25.5 36.8 43.3	1.2 1.3 1.8 5.1 2.1	*402 *316 93 25	0.3 0.6 0.7 1.5	1.3 1.4 1.9 5.4 1.8	
Age Under 18 years 18 to 24 years 25 to 34 years 35 to 44 years 45 to 64 years 65 years and over	11,733 4,449 4,255 3,822 5,234 3,414	2,497 2,025 2,108 1,703 1,669 91	21.3 45.5 49.5 44.6 31.9 2.7	1.3 1.8 1.8 1.8 1.5	11,587 4,036 4,087 3,660 4,887 3,323	2,602 1,793 1,968 1,568 1,527 88	22.5 44.4 48.1 42.8 31.2 2.7	1.3 1.8 1.8 2.0 1.5 0.7	-106 *232 *140 *135 *142 2	-1.2 1.1 1.4 1.7 0.6	1.3 1.9 1.9 2.0 1.6 0.7	
Nativity Native Foreign born Naturalized citizen Not a citizen	27,698 5,209 1,186 4,023	7,223 2,870 377 2,493	26.1 55.1 31.8 62.0	1.0 3.0 5.8 3.3	26,680 4,901 1,060 3,841	6,904 2,643 349 2,294	25.9 53.9 32.9 59.7	1.0 3.1 6.3 3.5	318 227 28 199	0.2 1.2 –1.1 2.2	1.1 3.2 6.3 3.5	
Region Northeast. Midwest South West.	5,687 5,966 13,515 7,739	1,504 1,546 4,366 2,677	26.4 25.9 32.3 34.6	2.1 2.0 1.6 2.3	5,474 5,916 12,705 7,485	1,255 1,573 4,183 2,537	22.9 26.6 32.9 33.9	2.0 2.1 1.6 2.3		*3.5 -0.7 -0.6 0.7	2.2 2.2 1.7 2.4	
Education (18 years and older) Total No high school diploma High school graduate only Some college, no degree Associate degree Bachelor's degree or higher	21,174 8,033 7,029 3,392 886 1,832	7,596 2,992 2,523 1,194 314 574	35.9 37.2 35.9 35.2 35.4 31.3	1.3 2.0 2.1 3.1 6.1 4.1	19,994 7,865 6,536 3,040 870 1,684	6,945 2,841 2,282 1,022 266 534	34.7 36.1 34.9 33.6 30.6 31.7	1.3 2.0 2.3 3.3 5.9 4.3	150 *241 *172 48	1.1 1.0 1.6 4.8 –0.4	1.3 2.1 2.3 3.3 6.3 4.4	
Work Experience (18 to 64 years old) Total Worked during year. Worked full-time Worked part-time Did not work	17,760 8,172 5,121 3,051 9,588	7,506 3,978 2,575 1,403 3,528	42.3 48.7 50.3 46.0 36.8	1.5 2.1 2.6 3.5 1.8	16,671 8,100 5,088 3,012 8,571	6,857 3,692 2,485 1,208 3,165	41.1 45.6 48.8 40.1 36.9	1.5 2.1 2.6 3.5 2.0	*286 90 *195	1.1 *3.1 1.5 *5.9 –0.1	1.5 2.2 2.8 3.6 2.0	

⁻ Represents zero or rounds to zero.

Source: U.S. Census Bureau, Current Population Survey, 2001 and 2002 Annual Demographic Supplements.

^{*}Statistically significant at the 90-percent confidence level.

¹All numbers are derived from unrounded numbers. Some numbers and percentages may therefore appear to be slightly higher or lower than those computed with rounded figures from other columns.

²Hispanics may be of any race.

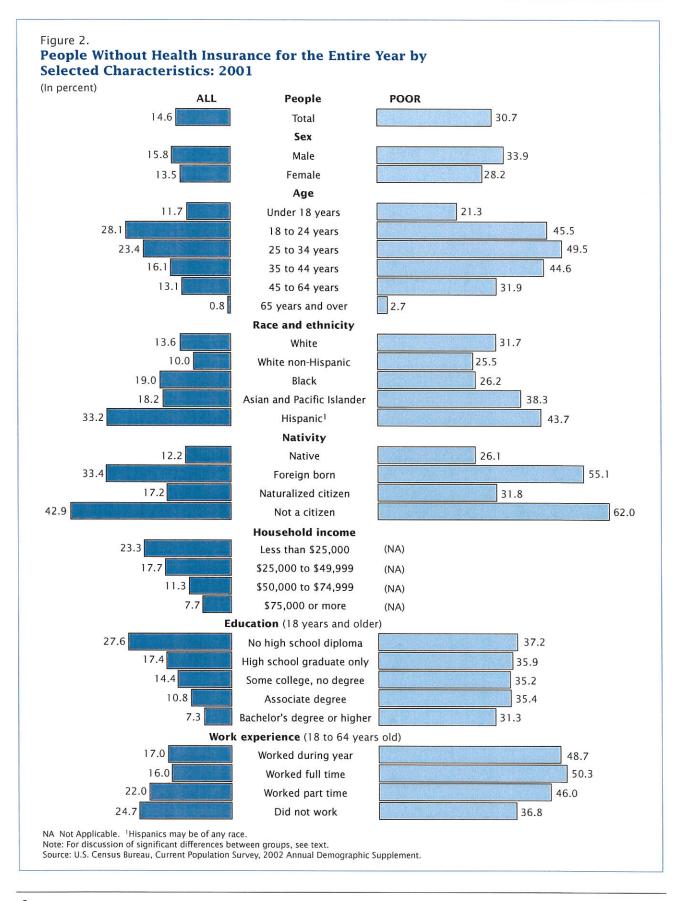


Table 3.

People Without Health Insurance Coverage for the Entire Year by Race and Ethnicity (3-Year Average): 1999 to 2001

Characteristic	3-year at 1999-2		Average 20	000-2001	Average 19	99-2000	Difference, 2000-2001 less 1999-2000 ¹	
Characteristic	Value	90-pct C.I. (±)	Value	90-pct C.I. (±)	Value	90-pct C.I. (±)	Value	90-pct C.I. (±)
PERCENT								
All races	14.5	0.1	14.4	0.1	14.4	0.1	0.0	0.1
White	13.3	0.1	13.4	0.1	13.2	0.1	*0.2	0.1
Non-Hispanic	9.8	0.1	9.8	0.1	9.7	0.1	0.1	0.1
Black	19.2	0.3	18.9	0.3	19.3	0.4	*-0.4	0.3
American Indian and Alaska Native	27.1	1.1	25.5	1.2	27.7	1.4	*-2.2	1.3
Asian and Pacific Islander	18.5	0.5	18.1	0.5	18.6	0.6	-0.5	0.6
Hispanic ²	33.0	0.3	33.0	0.3	32.9	0.4	0.1	0.4
NUMBER								
All races	40,413	243	40,506	261	40,016	301	*490	278
White	30,378	215	30,634	231	29,970	266	*664	246
Non-Hispanic	18,998	174	19,046	187	18,792	216	*254	199
Black	6,878	106	6,758	114	6,901	132	*-143	124
American Indian and Alaska Native	872	42	831	44	856	52	-25	50
Asian and Pacific Islander	2,286	66	2,283	71	2,290	82	-7	76
Hispanic ²	11,921	117	12,150	125	11,673	142	*478	124

^{*}Statistically significant at the 90-percent confidence level.

Source: U.S. Census Bureau, Current Population Survey, 2000, 2001, and 2002 Annual Demographic Supplements.

and Alaska Natives were without coverage, higher than the 19.2 percent for Blacks, 18.5 percent for Asians and Pacific Islanders, and 9.8 percent for non-Hispanic Whites.⁹ However, the 3-year-average uninsured rate for Hispanics (33.0 percent) was higher than the uninsured rate for American Indians and Alaska Natives.

Comparisons of 2-year moving averages (1999-2000 and 2000-2001) show that while the uninsured rate fell for American Indians and Alaska Natives from 27.7 percent to 25.5 percent and for Blacks from 19.3 percent to 18.9 percent, uninsured rates among non-Hispanic Whites, Asians and Pacific Islanders, and Hispanics did not change.

Nativity - In 2001, the proportion of the foreign-born population without health insurance (33.4 percent) was more than double that of the native population (12.2 percent).¹⁰ Among the foreign born,

noncitizens were much more likely than naturalized citizens to lack coverage — 42.9 percent compared with 17.2 percent.

Educational attainment - Among all adults, the likelihood of being insured increased as the level of education rose. Compared with the previous year, coverage rates decreased for those with no high school diploma, those who are high school graduates only, and those with some college education but no degree. Coverage rates did not change from 2000 to 2001 for adults with an associate degree or higher.

Economic status affects health insurance coverage.

Income - The likelihood of being covered by health insurance rises with income. Among households with annual incomes of less than

¹As a result of rounding, some differences may appear to be slightly higher or lower than the difference of the reported rates. ²Hispanics may be of any race.

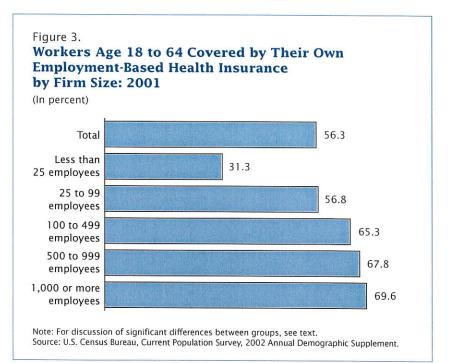
⁹ Data users should exercise caution when interpreting aggregate data for American Indians and Alaska Natives (AIAN) because the AIAN population consists of groups that differ in economic characteristics. Data from the 1990 census show that economic characteristics of those American Indians and Alaska Natives who live in American Indian and Alaska Native areas differ from the characteristics of those who live outside these areas. In addition, the CPS does not use separate population controls for weighting the AIAN samples to national totals. See Accuracy of Estimates on page 11 for a further discussion of CPS estimation procedures.

Natives are people born in the United States, Puerto Rico, or an outlying area of the United States, such as Guam or the U.S. Virgin Islands, and people who were born in a foreign country but who had at least one parent who was a U.S. citizen. All other people born outside the United States are foreign born.

\$25,000, the percentage with health insurance was 76.7 percent; the level rises to 92.3 percent for those with incomes of \$75,000 or more (see Figure 2). Compared with the previous year, coverage rates decreased at every level of household income.

Work experience - Of those 18 to 64 years old in 2001, full-time workers were more likely to be covered by health insurance (84.0 percent) than part-time workers (78.0 percent), and part-time workers were more likely to be insured than nonworkers (75.3 percent). However, among the poor, nonworkers (63.2 percent) were more likely to be insured than part-time workers (54.0 percent), who were more likely to be insured than full-time workers (49.7 percent).

Firm size - Of the 142.6 million workers in the United States who were 18 to 64 years old, 56.3 percent had employment-based health insurance policies in their own name (see Figure 3). The proportion increased with the size of the employing firm from 31.3 percent for firms with fewer than 25 employees to 69.6 percent for firms with 1000 or more employees. (These estimates do not reflect the fact that some workers were covered by another family member's employment-based policy). Compared with the previous year, the proportion who had employment-based policies in their own name decreased for workers employed by firms with fewer than 25 employees, but was unchanged for those employed by larger firms.



The uninsured rate for children did not change between 2000 and 2001.

The percentage of children (people under 18 years old) without health insurance did not change in 2001 (see Table 1), remaining at 8.5 million or 11.7 percent. A decline in employment-based health insurance coverage of children was offset by an increase in coverage by medicaid or the State Children's Health Insurance Program.

Among poor children, 21.3 percent (2.5 million children) had no health insurance during 2001, unchanged from the previous year (see Table 2). For this group, employment-based coverage decreased from 20.1 percent to 18.6 percent, while government health insurance coverage increased from 60.9 percent to 63.3 percent. Poor children made up 29.3 percent of all uninsured children in 2001.

Among near-poor children (those in families whose income was greater than or equal to, but less than 125 percent of, the poverty level),

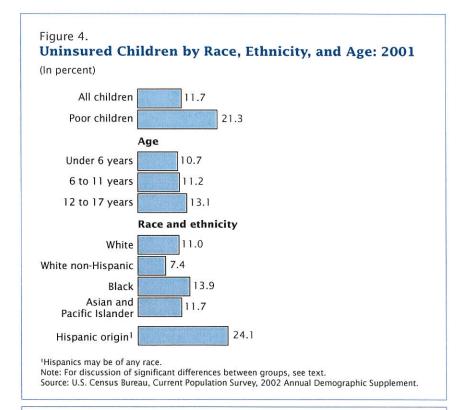
21.6 percent (0.9 million children) were without health insurance in 2001, unchanged from 2000. For this group, private health insurance coverage decreased from 39.8 percent to 36.4 percent, but government health insurance coverage did not change.

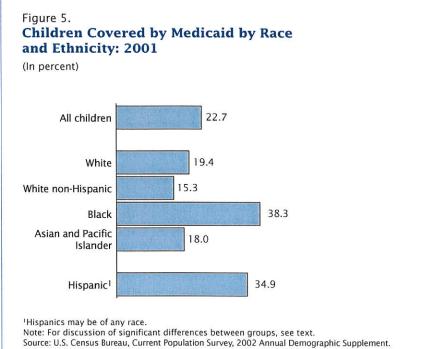
The likelihood of health insurance coverage varies among children.

- Children 12 to 17 years old were more likely to be uninsured than those under 12 — 13.1 percent compared with 11.0 percent.
- The uninsured rate declined in 2001 for Hispanic children from 25.3 percent to 24.1 percent. The uninsured rates for non-Hispanic White children (7.4 percent), Black children (13.9 percent), and Asian and Pacific Islander children (11.7 percent)

[&]quot;Workers were classified as part time if they worked fewer than 35 hours per week in the majority of the weeks they worked in 2001.

¹² The health insurance coverage rates of poor children and near-poor children were not different.





were unchanged from 2000 (see Figure 4).

- While most children (68.4 percent) were covered by an employment-based or privately purchased health insurance plan in 2001, nearly 1 in 4 (22.7 percent) was covered by medicaid.
- Black children had a higher rate of medicaid coverage in 2001 than children of any other racial or ethnic group 38.3 percent, compared with 34.9 percent of Hispanic children, 18.0 percent of Asian and Pacific Islander children, and 15.3 percent of non-Hispanic White children (see Figure 5).
- Children living in single-parent families in 2001 were less likely to be insured than children living in married-couple families — 84.3 percent compared with 90.4 percent.

Some states had higher uninsured rates than others.

The proportion of people without health insurance ranged from 7.2 percent in Rhode Island to 23.2 percent in New Mexico, based on 3-year averages for 1999, 2000, and 2001 (see Table 4). Although the data presented suggest that New Mexico had the highest uninsured rate, its rate was not statistically different from the rate for Texas. Similarly, although the data suggest that Rhode Island had the lowest uninsured rate, its rate was not statistically different from the rate for Minnesota.

Comparisons of 2-year moving averages (1999-2000 and 2000-2001) show that the proportion of

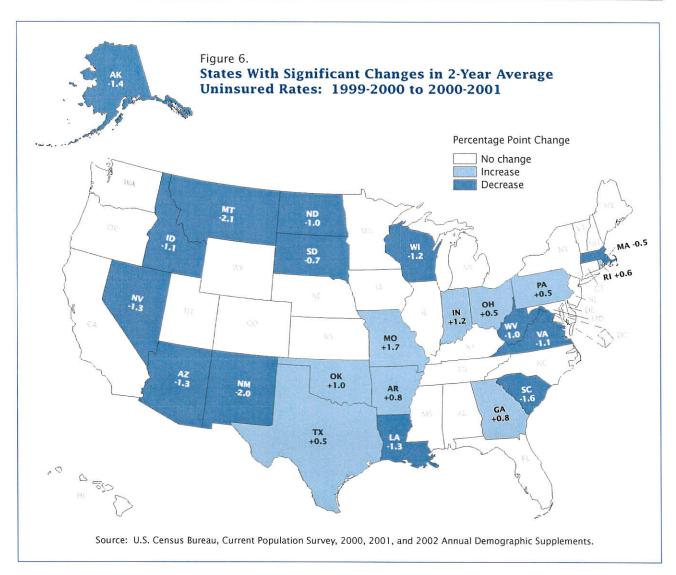
Table 4.

Percent of People Without Health Insurance Coverage for the Entire Year by State (3-Year Average): 1999 to 2001

Chair	3-year a 1999-2		Average 20	00-2001	Average 19	99-2000	Difference, 2000-2001 less 1999-2000 ¹		
State	Percent	90-pct. C.I. (±)	Percent	90-pct. C.I. (±)	Percent	90-pct. C.I. (±)	Percent	90-pct. C.I. (±)	
United States	14.5	0.2	14.4	0.2	14.4	0.1	-	0.2	
Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware District of Columbia	13.2 17.7 18.4 15.0 19.2 15.1 9.7 9.5 13.6	0.7 0.7 0.8 0.7 0.3 0.7 0.5 0.7	13.2 17.3 17.3 15.2 19.0 14.9 10.0 9.2 13.4	0.7 0.7 0.8 0.8 0.3 0.7 0.5 0.7	13.3 18.6 18.6 14.4 19.0 14.9 9.4 9.6 14.1	0.8 0.9 0.9 0.9 0.4 0.8 0.7 0.8	-0.1 *-1.4 *-1.3 *0.8 - 0.6 -0.4 -0.7	0.8 0.8 0.8 0.3 0.3 0.7 0.7	
Florida Georgia Hawaii. Idaho. Illinois Indiana Iowa Kansas Kentucky Louisiana Maine	15.8 15.3 9.7 16.5 13.6 10.8 8.0 11.4 13.0 19.7	0.7 0.7 0.7 0.7 0.5 0.5 0.5 0.7 0.7	15.5 9.5 15.7 13.7 11.5 8.2 11.1 13.0 18.7 10.6	0.5 0.7 0.7 0.8 0.5 0.5 0.5 0.7 0.7	14.7 9.8 16.8 13.6 10.3 8.2 11.4 13.4 19.9 10.8	0.5 0.8 0.8 0.9 0.5 0.7 0.6 0.8 1.0	-0.7 -0.4 *0.8 -0.3 *-1.1 0.2 *1.2 -1.2 -0.2 -0.4 *-1.3 -0.2	0.8 0.5 0.7 0.8 0.5 0.7 0.7 0.7 0.8 1.0	
Maryland Massachusetts Michigan. Minnesota Mississippi Missouri Montana Nebraska Nevada New Hampshire	11.3 8.7 9.9 7.8 15.2 8.8 16.0 9.6 17.2	0.7 0.5 0.3 0.5 0.7 0.5 0.8 0.5	11.3 8.5 9.8 8.1 15.0 9.9 15.2 9.3 16.5 8.9	0.7 0.5 0.5 0.5 0.8 0.5 0.8 0.7	10.8 9.0 9.7 7.8 14.6 8.1 17.3 9.6 17.7 8.7	0.8 0.5 0.5 0.6 0.9 0.6 1.0 0.7 0.9	0.5 *-0.5 0.1 0.3 0.4 *1.7 *-2.1 -0.3 *-1.3	0.7 0.5 0.5 0.5 0.8 0.7 0.8 0.7	
New Jersey New Mexico New York North Carolina North Dakota Ohio Oklahoma Oregon Pennsylvania Rhode Island	12.5 23.2 15.8 14.2 10.9 10.8 17.9 13.1 8.7 7.2	0.5 0.8 0.3 0.5 0.7 0.3 0.7 0.7 0.3 0.5	12.6 22.4 15.9 14.0 10.5 11.2 18.6 12.7 9.0 7.6	0.5 1.0 0.3 0.5 0.7 0.5 0.8 0.7 0.3	12.1 24.4 15.9 14.0 11.5 10.7 17.7 13.3 8.5 6.9	0.5 1.1 0.4 0.6 0.8 0.5 0.9 0.8 0.4	0.5 *-2.0 - -0.1 *-1.0 *0.5 *1.0 -0.6 *0.5 *0.6	0.5 1.0 0.3 0.7 0.7 0.5 0.8 0.8 0.3	
South Carolina South Dakota Tennessee Texas Utah Vermont Virginia Washington West Virginia Wisconsin Wyoming	13.3 10.4 10.8 23.0 13.6 9.7 11.9 13.5 14.2 8.5	0.7 0.5 0.7 0.5 0.7 0.7 0.7 0.7 0.7 0.5 0.7	12.2 10.2 11.1 23.2 13.7 9.1 11.3 13.3 13.6 7.6 15.8	0.7 0.5 0.7 0.5 0.7 0.5 0.7 0.7 0.7 0.5	13.8 10.9 10.6 22.7 13.0 9.8 12.4 13.7 14.7 8.9 15.4	0.9 0.7 0.8 0.6 0.8 0.8 0.8 0.8 0.8	*-1.6 *-0.7 0.5 *0.5 0.7 -0.7 *-1.1 -0.4 *-1.0 *-1.2	0.8 0.7 0.7 0.5 0.7 0.8 0.7 0.8 0.7	

⁻Represents zero. *Statistically significant at the 90-percent confidence level.

¹As a result of rounding, some differences may appear to be slightly higher or lower than the difference of the reported rates. Source: U.S. Census Bureau, Current Population Survey, 2000, 2001, and 2002 Annual Demographic Supplements.



people without coverage fell in 14 states: Alaska, Arizona, Idaho, Louisiana, Massachusetts, Montana, Nevada, New Mexico, North Dakota, South Carolina, South Dakota, Virginia, West Virginia, and Wisconsin.

Meanwhile, the proportion of people without coverage rose in nine states: Arkansas, Georgia, Indiana, Missouri, Ohio, Oklahoma, Pennsylvania, Rhode Island, and Texas (see Figure 6).

Accuracy of the Estimates

Statistics from surveys are subject to sampling and nonsampling

error. All comparisons presented in this report take sampling error into account and meet the Census Bureau's standards for statistical significance. Nonsampling errors in surveys may be attributed to a variety of sources, such as how the survey was designed, how respondents interpret questions, how able and willing respondents are to provide correct answers, and how accurately answers are coded and classified. The Census Bureau employs quality control procedures throughout the production process - including the overall design of surveys, the wording of questions,

review of the work of interviewers and coders, and statistical review of reports.

The Current Population Survey weighting procedure uses ratio estimation whereby sample estimates are adjusted to independent estimates of the national population by age, race, sex, and Hispanic origin. This weighting partially corrects for bias due to undercoverage, but biases may still be present when people who are missed by the survey differ from those interviewed in ways other than age, race, sex, and Hispanic

origin. How this weighting procedure affects other variables in the survey is not precisely known. All of these considerations affect comparisons across different surveys or data sources.

For further information on statistical standards and the computation and use of standard errors, contact Jeffrey Stratton of the Demographic Statistical Methods Division on the Internet at dsmd.source.and .accuracy@census.gov.

Technical Note

This report presents data on the health insurance coverage of people in the United States during the 2001 calendar year. The data, which are shown by state and selected demographic and socioeconomic characteristics, were collected in the 2002 Annual Demographic Supplement to the Current Population Survey (CPS).

Treatment of major federal health insurance programs

The Current Population Survey (CPS) underreports medicare and medicaid coverage compared with enrollment and participation data from the Centers for Medicare and Medicaid Services (CMS), formerly the Health Care Financing Administration (HCFA).13 A major reason for the lower CPS estimates is that the CPS is not designed primarily to collect health insurance data; instead, it is largely a labor force survey. Consequently, interviewers receive less training on health insurance concepts. Additionally, many people may not be aware that they or their children are covered by a health insurance program if they have not used covered services recently and therefore fail to report coverage. CMS data, on the other hand, represent the actual number of people who enrolled or participated in these programs and are a more accurate source of coverage levels.

Changes in medicaid coverage estimates from one year to the next should be viewed with caution.
Because many people who are covered by medicaid do not report that coverage, the Census Bureau assigns coverage to those who are generally regarded as "categorically eligible" (those who received some other benefits, usually public

assistance payments, that make them eligible for medicaid). Since the number of people receiving public assistance has been dropping, the relationship between medicaid and public assistance has changed, so that the imputation process has introduced a downward bias in the most recent medicaid estimates.

After consulting with health insurance experts, the Census Bureau modified the definition of the population without health insurance in the March 1998 Current Population Survey, which collected data about coverage in 1997. Previously, people with no coverage other than access to the Indian Health Service were counted as part of the insured population. Beginning with the 1997 Health Insurance Coverage report, however, the Census Bureau counted these people as uninsured. The effect of this change on the overall estimates of health insurance coverage was negligible.

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¹³ CMS is the federal agency primarily responsible for administering the medicare and medicaid programs at the national level.

Appendix A: **DETAILED TABLES**

 $^{\text{Table A-1}}.$ Health Insurance Coverage Status and Type of Coverage by Race and Ethnicity: $1987\ to\ 2000$

(Numbers in thousands. People as of March of the following year)

			Covere	d by private or	governmen	t health ins	urance		
666			Private he	alth insurance	Gov	ernment he	ealth insurar	nce	
Year	Total people	Total	Total	Employment- based	Total	Medicaid	Medicare	Military health care ¹	Not covered
ALL RACES									
Numbers	1					A com sesses			
2001. 2000° 20008 19997 1999 1998 19976 1996 1995 1994 ⁵ 1993 ⁴ 1992 ³ 19992 1991	282,082 279,517 276,540 274,087 274,087 271,743 269,094 266,792 264,314 262,105 259,753 256,830 251,447 248,886	240,875 239,714 237,857 231,533 227,462 225,646 225,077 223,733 222,387 220,040 218,189 216,003 214,167	199,860 201,060 200,249 197,523 194,599 190,861 188,532 187,395 185,881 184,318 182,351 181,466 181,375 182,135	176,551 177,848 177,286 174,093 172,023 168,576 165,091 163,221 161,453 159,634 148,318 148,796 150,077	71,295 69,037 66,935 66,582 66,176 66,685 69,000 69,776 70,163 68,554 66,244 63,882 60,965	31,601 29,533 28,613 28,221 27,890 27,854 28,956 31,451 31,645 31,749 29,416 26,880 24,261	38,043 37,740 37,028 36,109 36,066 35,887 35,590 35,227 34,655 33,901 33,097 33,230 32,907 32,260	9,552 9,099 8,334 8,564 8,530 8,747 8,527 8,712 9,375 11,165 9,560 9,510 9,820 9,922	41,207 39,804 38,683 39,280 42,554 44,281 43,448 41,716 40,582 39,713 38,641 35,445 34,718
1989	246,191 243,685 241,187	212,807 211,005 210,161	183,610 182,019 182,160	151,644 150,940 149,739	57,382 56,850 56,282	21,185 20,728 20,211		9,870 10,105 10,542	33,38 32,68 31,02
2001	100.0	85.4 85.8 86.0 85.7 84.5 83.7 83.9 84.4 84.6 84.8 85.0 85.9 86.1 86.4	72.4 72.1 71.0 70.2 70.1 70.3 70.3 70.2 70.7 72.1 73.2 74.6 74.7	63.6 64.1 63.5 62.8 62.0 61.4 61.2 61.1 60.9 57.1 57.9 60.4 61.6 61.6	24.7 24.2 24.3 24.1 24.3 24.8 25.9 26.4 25.8 25.4 4 24.5 6 23.3 23.3	10.6 10.3 10.3 10.2 10.3 10.8 11.8 12.1 12.1 12.5 11.5 10.5 10.8 11.8 10.7 10.8 11.8 10.8 11.8 10.8 10.8 10.8 10.8	13.5 13.4 13.2 13.2 13.2 13.2 13.2 13.1 12.9 12.7 12.9 7 13.1 17 13.0 13.2 12.9 12.7 13.1 14.9 15.0 16.1 17.0 18.0 18.0 18.0 18.0 18.0 18.0 18.0 18	3.3 3.0 3.1 3.1 3.2 3.2 3.3 3.5 4.3 3.7 3.7 3.9 4.0 4.0	13.

See footnotes at end of table.

Table A-1. **Health Insurance Coverage Status and Type of Coverage by Race and Ethnicity: 1987 to 2000**—Con.

			Covered	d by private or	governmen	t ricami ma	araricc		
			Private hea	alth insurance	Gov	ernment he	alth insurar	nce	
Year	Total people	Total	Total	Employment- based	Total	Medicaid	Medicare	Military health care ¹	No covered
VHITE									
Numbers									
2001	230,071	198,878	169,180	148,371	56,200	21,535	33,006	7,788	31,19
20009	228,208	198,133	170,071	149,364	54,287	19,889	32,695	7,158	30,07
20008	226,401	197,153	169,752	149,313	52,790	19,448	32,048	6,540	29,24
19997	224,806	195,421	168,415	147,460	52,433	18,910	31,450	6,877	29,38
1999	224,806	192,943	166,191	145,878	52,139	18,676	31,416	6,848	31,86 33,58
1998	223,294	189,706	163,690	143,705	51,690	18,247	31,174 31,108	7,140 6,994	33,24
1997 ⁶	221,650	188,409	161,682	140,601	52,975	19,652	30,919	6,981	31,72
1996	220,070	188,341	161,806	139,913	54,004	20,856 20,528	30,580	7,656	31,10
1995	218,442	187,337	161,303	139,151	54,141		29,978	8,845	30,30
1994 ⁵	216,751	186,447	160,414	137,966	54,288 53,222	20,464	29,376	7,689	30,48
19934	215,221	184,732	158,586	128,855	51,195	18.659	29,341	7,556	29.71
1992 ³	213,198	183,479	158,612	129,685 131,646	49.699	17,058	28,940	7,867	27,12
1991	210,257	183,130 181,795	159,628 160,146	131,836	47,589	15,078	28,530	8,022	26.95
1990	208,754		160,146	132,882	44,868	12,779	27,859	8,116	25,85
1989	206,983	181,126 180,122	160,753	133,050	44,477	12,504	27,293	8,305	25,21
1988	205,333 203,745	179,845	161,338	132,264	44,028	12,163	27,044	8,482	23,90
Percents	,								
2001	100.0	86.4	73.5	64.5	24.4				13
20009	100.0	86.8	74.5				1		13
2000 ⁸	100.0	87.1	75.0	100000000000000000000000000000000000000					12
19997	100.0	86.9	74.9			7	1 10 10 10 10 10 10 10 10 10 10 10 10 10		13 14
1999	100.0	85.8	73.9	100000000000000000000000000000000000000					15
1998	100.0	85.0		T 590 00					15
19976	100.0	85.0			25 50000	(CA) (CA)			14
1996	100.0	85.6	0.00		S 2000	914 F		S. 1	14
1995	100.0	85.8		1	100000	8 N 10 10 10 10 10 10 10 10 10 10 10 10 10			14
1994 ⁵	100.0	86.0				199			14
19934	100.0	85.8						80 BERESTA	13
1992 ³	100.0	86.1			· I			3 () () () () () () () () () (12
1991	100.0	87.1 87.1	7.00 m 23.00 (2.00)				100000000000000000000000000000000000000	11 (A.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	12
1990	100.0	87.5			0.00	1	200000000		12
1989	100.0 100.0	87.7						30 1	12
1988	100.0	88.3							11
WHITE NON-HISPANIC									
Numbers									
0004	104 900	175 /11	152,82	133,29	47,66	1 15,035	30,811	7,144	19,4
2001	194,822	175,412							
20009		175,247						15	
20008	194,196	175,319							
1999 ⁷	193,633								
1999	193,633 193,074						TO 10 1000 1000 1000 1000 1000 1000 1000		
			C. C. S.				1800 M		24 No. 10 10 10 10 10 10 10 10 10 10 10 10 10
1997 ⁶		169,699				400 mg 2000 mg	[100] [1] [10] [10] [10] [10] [10] [10]		
1996	191,791	169,03		245					
1995 1994 ⁵	191,271	170,54							1 100000
1994 ³	192,771								
1993	191,087			경기를 가는 그 그 사람들이 있었다.		(8)			
1992 ³	189,113				49 TO 10 TO			- B	
1991									
1990					111 DELLE				
1989		The second secon	5.0	7/2 27/2/2		1985 B			
1988	. 186,047 . 185,044								

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Table A-1. Health Insurance Coverage Status and Type of Coverage by Race and Ethnicity: 1987 to 2000—Con.

		Covered by private or government health insurance								
V			Private he	alth insurance	Gov	ernment he	alth insurar	ice		
Year	Total people	Total	Total	Employment- based	Total	Medicaid	Medicare	Military health care ¹	No covered	
VHITE NON-HISPANIC—Con.										
Percents										
2001	100.0	90.0	78.4	68.4	24.5	7.7	15.8	3.7	10.	
90009	100.0	90.4	79.3	69.2	23.9 23.2	7.1 7.0	15.8 15.4	3.4	9. 9.	
000 ⁸	100.0 100.0	90.3	79.4 79.2	69.5 69.1	23.2	6.9	15.2	3.3	9.	
999	100.0	89.0	78.3	68.4	23.1	6.8	15.2	3.3	11.	
998	100.0	88.1	77.6	67.8	23.2	6.7	15.1	3.5	11.	
1997 ⁶	100.0	88.0	77.2	66.8	23.8	7.3	15.2	3.4	12.	
996	100.0	88.5	77.8	66.9	24.4	7.9	15.2	3.4	11.	
995	100.0	88.5	78.3	67.1 66.7	24.3 24.6	7.5 7.8	15.1 14.8	3.7 4.3	11. 11.	
1994 ⁵	100.0 100.0	88.5 88.1	77.9 77.3	62.7	24.0	7.8	14.5	3.8	11.	
1993°	100.0	88.5	78.2	63.7	23.6	7.1	14.7	3.8	11.	
1991	100.0	89.2	79.2	65.1	23.4	6.7	14.6	3.9	10	
1990	100.0	89.3	79.8	65.5	22.7	6.1	14.5	4.0	10	
1989	100.0	89.7	80.9	66.4	21.7	5.2	14.3	4.0	10	
1988	100.0	89.8	81.2	67.0	21.6	5.1	14.1	4.2	10	
1987 ²	100.0	90.2	82.0	67.0	21.5	4.9	14.1	4.3	9	
BLACK										
Numbers			20.000	40.075	11.010	7 004	3,783	1,192	6,83	
2001	36,023	29,190	20,363	18,975 18,922	11,616 11,579	7,994 7,735	3,763	1,192	6,68	
2000 ⁹	35,597 35,919	28,915 29,295	20,485 21,182	19,562	11,116		3,808	1,380	6,62	
1999 ⁷	35,509	28,546	20,304	18,730	11,251	7,570		1,203	6,96	
1999	35,509	27,973	19,805	18,363	11,165	7,495		1,198	7,53	
1998	35,070	27,274	18,663		11,524	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	200 Carina (2000)	1,111	7,79	
19976	34,598	27,166	18,544		11,157			1,100	7,43	
1996	34,218	26,799	17,718		12,074 12,465			1,357 1,171	7,4° 7,10	
1995	33,889	26,781 26,928	17,106 17,147		12,403			1,683	6.60	
1994 ⁵	33,531 33,040	26,279	16,590		12,588		41 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1,331	6,7	
1992 ³	32,535	25,967	15,994		12,464			1,459	6,50	
1991	31,439	24,932	15,466		11,776	8,352	3,248	1,482	6,5	
1990	30,895	24,802	15,957		11,150	6 5 6 7 6		1,402	6,0	
1989	30,392	24,550	16,520		10,443	10000			5,8	
1988		24,029	15,818		10,415		- 2000	1,385 1,497	5,8 5,8	
1987 ²	29,417	23,555	15,358	13,055	10,380	7,040	2,310	1,437	3,0	
Percents	100.0	01.0	56.5	52.7	32.2	22.2	10.5	3.3	19	
2001		81.0 81.2	57.5	4. SHAME	100000000000000000000000000000000000000				18	
2000 ⁸	12002200000	81.6	59.0		100,000,000,000			1	18	
1999 ⁷		80.4	57.2		31.7			3.4	19	
1999	7.00 P. S.	78.8	55.8	51.7			10.1		2	
1998	100.0	77.8	53.2						22	
1997 ⁶	100.0	78.5	53.6		73000 TO 100	2000000	(A. 14)		2	
1996		78.3	51.8	1 A C C C			S 10 300000		2	
1995		79.0	50.5	772 12		30 BASSE 10	36 10 36 36 36 36 36 36 36 36 36 36 36 36 36		19	
1994 ⁵		80.3 79.5	1			2011	No. 18. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15	27. P. S.	20	
1992 ³		79.5				111		(C)	1	
1991		79.3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5.04		1	- COO 100		100	
1990		80.3	70 m		2		1			
1989		80.8		10		4 23.4	4 10.0			
1988	100.0	80.4	52.9		0.1	CC 10000007				
1987 ²		80.1	52.2	2 44.4	35.3	3 24.0	9.9	5.1	1	

Table A-1. Health Insurance Coverage Status and Type of Coverage by Race and Ethnicity: 1987 to 2000—Con.

			Covere	d by private or	governmen	t health ins	urance	1	
Year			Private he	alth insurance	Gov	ernment he	ealth insurar	nce	
rear	Total people	Total	Total	Employment- based	Total	Medicaid	Medicare	Military health care ¹	Not covered
ASIAN AND PACIFIC ISLANDER									
Numbers									
2001	12,500	10,222	8,643	7,684	2,312	1,257	949	414	2,278
20009	12,693	10,405	8,916	8,104	2,249	1,288	886	443	2,287
20008	11,332	9,295	7,909	7,114	2,093	1,301	856	290	2,037
1999 ⁷	10,925 10,925	8,845	7,467	6,692	2,038	1,097	829	412	2,080
1998	10,925	8,653 8,596	7,285 7,202	6,588 6,511	2,023 2,113	1,087 1,201	825 819	412	2,272
1997 ⁶	10,492	8,320	7,100	6,290	1,877	1,093	700	351 334	2,301 2,173
1996	10,071	7,946	6,718	5,888	1,768	1,071	667	275	2,175
1995	9,653	7,671	6,347	5,576	2,075	1,272	586	424	1,982
1994 ⁵	6,656	5,312	4,267	3,774	1,551	883	501	426	1,344
19934	7,444	5,927	5,026	3,970	1,408	802	474	345	1,517
1992 ³	7,782 7,193	6,230 5,886	5,202 4,917	4,207 3,995	1,460	823 727	507	314	1,552
1990	7,193	5,832	4,887	3,883	1,451 1,410	771	560 463	347 364	1,307
1989	6,679	5,532	4,615	3,661	1,414	792	444	322	1,191 1,147
1988	6,447	5,329	4,392	3,599	1,353	763	401	322	1,118
19872	6,326	5,440	4,468	3,691	1,394	702	357	475	886
Percents									
2001	100.0	81.8	69.1	61.5	18.5	10.1	7.6	3.3	18.2
2000 ⁹	100.0	82.0	70.2	63.8	17.7	10.1	7.0	3.5	18.0
20008	100.0	82.0	69.8	62.8	18.5	11.5	7.6	2.6	18.0
1999 ⁷	100.0	81.0	68.3	61.3	18.7	10.0	7.6	3.8	19.0
1998	100.0 100.0	79.2 78.9	66.7	60.3	18.5	9.9	7.5	3.8	20.8
19976	100.0	79.3	66.1 67.7	59.8 60.0	19.4 17.9	11.0 10.4	7.5 6.7	3.2	21.1 20.7
1996	100.0	78.9	66.7	58.5	17.6	10.4	6.6	2.7	20.7
1995	100.0	79.5	65.8	57.8	21.5	13.2	6.1	4.4	20.5
1994 ⁵	100.0	79.8	64.1	56.7	23.3	13.3	7.5	6.4	20.2
19934	100.0	79.6	67.5	53.3	18.9	10.8	6.4	4.6	20.4
1992 ³	100.0	80.1	66.8	54.1	18.8	10.6	6.5	4.0	19.9
1991	100.0	81.8 83.0	68.4 69.6	55.5 55.3	20.2 20.1	10.1 11.0	7.8 6.6	4.8	18.2
1989	100.0	82.8	69.1	54.8	21.2	11.9	6.6	5.2 4.8	17.0 17.2
1988	100.0	82.7	68.1	55.8	21.0	11.8	6.2	5.0	17.2
19872	100.0	86.0	70.6	58.3	22.0	11.1	5.6	7.5	14.0
HISPANIC									
Numbers									
2001	37,438	25,021	17,322	15,965	9,227	7,074	2,295	704	12,417
20009	36,093	24,210	17,114	15,893	8,566	6,552	2,141	682	11,883
2000 ⁸	33,862	23,035	16,257	15,128	8,215	6,273	2,192	543	10,827
1999 ⁷	32,804	22,238 21,853	15,775	14,481	7,919	5,978	2,054	594	10,566
1998	32,804 31,689	20,493	15,424 14,377	14,214 13,310	7,875 7,401	5,946 5,585	2,047 2,026	589	10,951
19976	30,773	20,239	13,751	12,790	7,718	5,970	1,974	503 526	11,196 10,534
1996	29,703	19,730	13,151	12,140	7,784	6,255	1,806	474	9,974
1995	28,438	18,964	12,187	11,309	8,027	6,478	1,732	516	9,474
1994 ⁵	27,521	18,244	11,743	10,729	7,829	6,226	1,677	630	9,277
19934	26,646	18,235	12,021	9,981	7,873	6,328	1,613	530	8,411
1992 ³	25,682	17,242	11,330	9,786	7,099	5,703	1,578	523	8,441
1991	22,096	15,128	10,336	8,972	5,845	4,597	1,309	522	6,968
1990	21,437 20,779	14,479 13,846	10,281	8,948	5,169	3,912	1,269	519	6,958
1988	20,779	13,846	10,348 10,188	8,914 8,831	4,526 4,414	3,221 3,125	1,180 1,114	595 594	6,932 6,391
	-0,010	10,004			7.71.7	0.123	1.114		0.391
1987 ²	19,428	13,456		2002 0 00 00 00	4,482	3,214		631	5,972

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Table A-1. Health Insurance Coverage Status and Type of Coverage by Race and Ethnicity: 1987 to 2000—Con.

			Covere	d by private or	governmen	t health ins	urance		
V			Private he	alth insurance	Gov	ernment he	ealth insura	nce	
Year	Total people		Total	Employment- based	Total	Medicaid	Medicare	Military health care ¹	Not covered
HISPANIC—Con.									
Percents					-	_			
2001	100.0	66.8	46.3	42.6	24.6	18.9	6.1	1.9	33.2
2000 ⁹	100.0	67.1	47.4	44.0	23.7	18.2	5.9	1.9	32.9
2000 ⁸	100.0	68.0	48.0	44.7	24.3	18.5	6.5	1.6	32.0
1999 ⁷	100.0	67.8	48.1	44.1	24.1	18.2	6.3	1.8	32.2
1999	100.0	66.6	47.0	43.3	24.0	18.1	6.2	1.8	33.4
1998	100.0	64.7	45.4	42.0	23.4	17.6	6.4	1.6	35.3
1997 ⁶	100.0	65.8	44.7	41.6	25.1	19.4	6.4	1.7	34.2
1996	100.0	66.4	44.3	40.9	26.2	21.1	6.1	1.6	33.6
1995	100.0	66.7	42.9	39.8	28.2	22.8	6.1	1.8	33.3
1994 ⁵	100.0	66.3	42.7	39.0	28.4	22.6	6.1	2.3	33.7
19934	100.0	68.4	45.1	37.5	29.5	23.7	6.1	2.0	31.6
1992 ³	100.0	67.1	44.1	38.1	27.6	22.2	6.1	2.0	32.9
1991	100.0	68.5	46.8	40.6	26.5	20.8	5.9	2.4	31.5
1990	100.0	67.5	48.0	41.7	24.1	18.2	5.9	2.4	32.5
1989	100.0	66.6	49.8	42.9	21.8	15.5	5.7	2.9	33.4
1988	100.0	68.2	50.7	44.0	22.0	15.6	5.5	3.0	31.8
1987 ²	100.0	69.3	50.7	43.7	23.1	16.5	5.3	3.2	30.7

¹Includes CHAMPUS (Comprehensive Health and Medical Plan for Uniformed Services)/Tricare, Veterans, and military health care.

Source: U.S. Census Bureau, Current Population Survey, 1988-2002 Annual Demographic Supplements.

²Implementation of a new March CPS processing system.

³Implementation of 1990 census population controls.

⁴Data collection method changed from paper and pencil to computer-assisted interviewing.

⁵Health insurance questions were redesigned. Increases in estimates of employment-based and military health care coverage may be partially due to questionnaire changes. Overall coverage estimates were not affected.

⁶ Beginning with the March 1998 CPS, people with no coverage other than access to Indian Health Service are no longer considered covered by health insurance; instead, they are considered to be uninsured. The effect of this change on the overall estimates of health insurance coverage is negligible; however, the decrease in the number of people covered by medicaid may be partially due to this change.

⁷Estimates reflect the results of follow-up verification questions. ⁸ Based on a **November 2001** weighting correction.

⁹Implementation of Census 2000 based population controls. Sample expanded by 28,000 households.

Table A-2. Health Insurance Coverage Status for the Entire Year and Type of Coverage by Selected Characteristics: 2001

(Numbers in thousands)

			Covered b	y private or	governme	ent health ir	nsurance		
Characteristic			Private insura		Gov	ernment he	ealth insurar	nce	
Characteristic	Total people	Total	Total	Employ- ment based	Total	Medicaid	Medicare	Military health care ¹	Not covered
NUMBERS									
People Total	282,082	240,875	199,860	176,551	71,295	31,601	38,043	9,552	41,207
Sex Male	137,871 144,211	116,149 124,726	98,150 101,709	87,960 88,591	31,764 39,531	13,769 17,832	16,360 21,683	5,118 4,434	21,722 19,485
Race and Ethnicity White	230,071 194,822 36,023	198,878 175,412 29,190	169,180 152,821 20,363	148,371 133,295 18,975	56,200 47,661 11,616	21,535 15,035 7,994	33,006 30,811 3,783	7,788 7,144 1,192	31,193 19,409 6,833
Asian and Pacific Islander	12,500 37,438	10,222 25,021	8,643 17,322	7,684 15,965	2,312 9,227	1,257 7,074	949 2,295	414 704	2,278 12,41
Age Under 18 years 8 to 24 years 55 to 34 years 55 to 44 years 56 to 64 years	72,628 27,312 38,670 44,284 65,419	64,118 19,640 29,619 37,153 56,848	49,647 17,012 26,905 34,315 51,230	46,439 13,766 25,306 32,386 47,008	18,822 3,642 3,653 4,003 8,558	16,502 2,831 2,587 2,532 3,878	860 3,633	2,381 742 817 1,066 2,390 2,156	8,50 7,67 9,05 7,13 8,57 27
55 years and over	33,769 249,629 32,453 11,962 20,491	33,498 219,265 21,610 9,902 11,708	20,751 182,556 17,303 7,844 9,459	11,645 161,168 15,383 6,892 8,491	32,618 65,204 6,091 3,270 2,821	28,522 3,079 1,086	34,577 3,466 2,480	9,032 520 337 183	30,36 10,84 2,06 8,78
Region Northeast. Midwest South West	53,300 63,779 100,652 64,351	46,902 56,940 83,940 53,094	39,086 49,634 67,976 43,163	43,666 60,037	13,851 14,811 26,899 15,733	5,759 11,559	8,958 13,930	997 1,351 4,766 2,438	6,39 6,8 16,7 11,2
PERCENTS									
People Total	100.0	85.4	70.9	62.6	25.3	3 11.2	13.5	3.4	14
Sex Vlale Female	100.0 100.0	84.2 86.5			23.0 27.4				1:
Race and Ethnicity White Non-Hispanic Black	100.0	90.0 81.0	78.4 56.5	68.4 52.7	24.5 32.5	7. 2 22.	7 15.8 2 10.5	3.7	
Asian and Pacific Islander Hispanic ²	1				2000000				
Age Under 18 years	. 100.0	71.9	62.3	50.4	13.	3 10.	4 0.7	7 2.7	2
25 to 34 years	100.0	83.9	77.9	73.1 71.9	9.	0 5. 1 5.	7 1.9 9 5.6	2.4 6 3.7	1
Nativity Native Foreign born Naturalized citizen Not a citizen	. 100.0	66.6	53.3 65.6	3 47.4 6 57.6	1 18. 5 27.	8 9. 3 9.	.5 10.1 .1 20.	7 1.6 7 2.8	6 3 8 1
Region Northeast	. 100.0	88.0	73. 77.	3 65.9 8 68.5	26.	0 12 9	.0 14.	0 2.	1 1
Northeast. Midwest. South West.	. 100.0	89.3	3 77. 4 67.	8 68.5 5 59.6	23 26 26	.2 9 .7 11	.0 14. .5 13.	8 4.7	7

See footnotes at end of table.

Table A-2. Health Insurance Coverage Status for the Entire Year and Type of Coverage by Selected Characteristics: 2001—Con.

(Numbers in thousands)

			Covered	by private of	or governme	ent health in	surance		
Characteristic			Private insura	A. A. CHICAGO & S. CO. CO.	Go	vernment he	ealth insuran	ce	
	Total people	Total	Total	Employ- ment based	Total	Medicaid	Medicare	Military health care ¹	Not covered
NUMBERS									
Household Income Less than \$25,000 . \$25,000 to \$49,999 \$50,000 to \$74,999 \$75,000 or more	62,209 76,226 58,114 85,532	47,735 62,711 51,520 78,909	24,280 51,729 47,855 75,955	15,964 44,966 44,206 71,385	33,484 21,131 8,421 8,259	18,081 8,621 2,819 2,080	17,876 11,492 4,246 4,429	1,927 2,962 2,129 2,534	14,474 13,516 6,595 6,623
Education (18 years and older) Total No high school diploma. High school graduate only Some college, no degree Associate degree Bachelor's degree or higher	209,454 35,423 66,682 40,282 16,183 50,884	176,757 25,647 55,064 34,467 14,429 47,150	150,213 15,592 45,779 30,800 13,181 44,861	130,112 12,118 39,195 26,465 11,903 40,431	52,473 15,350 18,595 8,102 2,817 7,610	15,099 6,035 5,144 2,183 696 1,040	37,620 11,418 13,400 5,183 1,791 5,827	7,171 799 2,323 1,837 650 1,562	32,698 9,776 11,618 5,815 1,754 3,734
Work Experience (18 to 64 years old) Total Worked during year Worked full-time Worked part-time Did not work PERCENTS	175,685 142,474 118,776 23,698 33,211	143,259 118,245 99,762 18,483 25,014	129,462 112,923 96,385 16,538 16,538	118,467 104,739 90,920 13,819 13,728	19,855 9,146 6,425 2,721 10,709	11,829 5,065 3,211 1,854 6,763	5,162 758 359 400 4,403	5,015 3,654 3,012 642 1,361	32,426 24,230 19,014 5,216 8,197
Household Income Less than \$25,000 . \$25,000 to \$49,999 \$50,000 to \$74,999 \$75,000 or more.	100.0 100.0 100.0 100.0	76.7 82.3 88.7 92.3	39.0 67.9 82.3 88.9	25.7 59.0 76.1 83.5	53.8 27.7 14.5 9.7	29.1 11.3 4.9 2.4	28.7 15.1 7.3 5.2	3.1 3.9 3.7 3.0	23.3 17.7 11.3 7.7
Education (18 years and older) Total No high school diploma. High school graduate only Some college, no degree Associate degree Bachelor's degree or higher	100.0 100.0 100.0 100.0 100.0	84.4 72.4 82.6 85.6 89.2 92.7	71.7 44.0 68.7 76.5 81.4 88.2	62.1 34.2 58.8 65.7 73.6 79.5	25.1 43.3 27.9 20.1 17.4 15.0	7.2 17.0 7.7 5.4 4.3 2.0	18.0 32.2 20.1 12.9 11.1 11.5	3.4 2.3 3.5 4.6 4.0 3.1	15.6 27.6 17.4 14.4 10.8 7.3
Work Experience (18 to 64 years old) Total Worked during year Worked full-time Worked part-time Did not work	100.0 100.0 100.0 100.0 100.0	81.5 83.0 84.0 78.0 75.3	73.7 79.3 81.1 69.8 49.8	67.4 73.5 76.5 58.3 41.3	11.3 6.4 5.4 11.5 32.2	6.7 3.6 2.7 7.8 20.4	2.9 0.5 0.3 1.7 13.3	2.9 2.6 2.5 2.7 4.1	18.5 17.0 16.0 22.0 24.7

¹Includes CHAMPUS (Comprehensive Health and Medical Plan for Uniformed Services)/Tricare, Veterans', and military health care. ²Hispanics may be of any race.

Source: U.S. Census Bureau, Current Population Survey, 2002 Annual Demographic Supplement.

Appendix B.

SAMPLE EXPANSION AND INTRODUCTION OF CENSUS 2000-BASED POPULATION CONTROLS

The 2001 Current Population Survey (CPS) served as a tool for testing a sample expansion of the Annual Demographic Supplement and as a bridge to introduce new Census 2000-based population controls. The following section discusses the effects these methodological changes had on health insurance coverage rates.

Sample Expansion

In 2001, the Census Bureau tested an expansion in the sample for the CPS Annual Demographic Supplement. The original sample size of approximately 50,000 interviewed households increased to approximately 78,000 households. The primary goal of the sample expansion was to produce more reliable state estimates of the number of low-income children without health insurance to use in the funding formula for the State Children's Health Insurance Program (SCHIP), through reduced variances. Although the SCHIP sample expansion was specifically targeted toward producing better children's health insurance estimates at the state level, other state estimates, as well as national estimates, improved.

The effect of the sample expansion on major national and state uninsured estimates in 2000 was minimal. Nationally, the difference between the original and expanded samples in the estimated percentage of people without health insurance is not statistically significant (see Table B-1). There are also no significant differences between

original and expanded sample uninsured rates by age or by major race and ethnic groups, except for Blacks, whose expanded sample rate (18.9 percent) is significantly higher than the original sample rate (18.4 percent).

For most states and the District of Columbia, the uninsured rates for the expanded sample are not statistically different from the original sample (see Table B-2). Although health insurance coverage estimates were significantly different in 21 states, the differences were moderate (no state had a change greater than 2 percentage points). The uninsured rate increased in 7 states and decreased in 14 states, with differences extending from a 1.8 percentage point increase for Connecticut to a 2.0 percentage point decrease for Vermont.

Further information on the effects of the CPS ADS sample expansion on health insurance estimates is available at www.bls.census.gov/cps/ads

Introduction of Census 2000-Based Population Controls

/adsmain.htm.

The procedure used in developing estimates for the entire civilian non-institutionalized population from the Current Population Survey (CPS) involves the weighting of sample results to independent estimates of the population by sex, age, race, and Hispanic/non-Hispanic categories. These independent estimates are developed by using civilian noninstitutional population counts from the decennial censuses

and projecting them forward to current years using data on births, deaths, and net migration.
Beginning with the 2002 CPS
Annual Demographic Supplement, the independent estimates used as control totals for the CPS are based on civilian noninstitutional population benchmarks established by Census 2000.

Table B-3 shows two sets of data for 2000 to show the effect of introducing new population controls — one using new Census 2000-based population controls and the other using controls based on the 1990 census. Following is a brief discussion of the effects of the new population controls on health insurance uninsured rates.

The effect of new population controls on major national uninsured estimates in 2000 was minimal. Nationally, the difference between the Census 2000-based and the Census 1990-based samples in the estimated percentage of people without health insurance is not statistically significant. Use of the new Census 2000-based controls raised the uninsured rate for males by 0.3 percent, but the rate for females did not change. While the new controls left the uninsured rate for most of the major race and ethnic groups unchanged, the uninsured rate for Whites rose by 0.2 percent and the uninsured rate for Hispanics increased by 0.8 percent. Similarly, while the uninsured rate for most age groups did not change, the percentage of uninsured people 18 to 24 or 25 to 34 years old each increased by 0.7 percent.

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Table B-1.
People Without Health Insurance for the Entire Year by Selected Characteristics: 2000

	Expanded sample				Original sample				Difference ¹		
	Uninsured			Uninsured				Uninsured			
Characteristic	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Number	Per- cent	Percent 90-pct C.I. (±)
People Total	276,567	38,871	14.1	0.1	276,540	38,683	14.0	0.2	188	0.1	0.1
Male	135,255 141,312	20,162 18,709	14.9 13.2	0.2 0.2	135,245 141,295	20,149 18,535	14.9 13.1	0.2 0.2	13 174	0.1	0.1 0.1
Race and Ethnicity White	226,360 194,120 35,924 11,535 33,875	29,340 18,906 6,805 2,046 10,862	13.0 9.7 18.9 17.7 32.1	0.1 0.1 0.4 0.7	226,401 194,196 35,919 11,332 33,862	29,248 18,877 6,623 2,037 10,827	12.9 9.7 18.4 18.0 32.0	0.2 0.2 0.6 1.0	92 29 *182 9	*0.5 -0.2 0.1	0.1 0.1 0.4 0.7
Age Under 18 years 18 to 24 years 25 to 34 years 35 to 44 years 45 to 64 years 65 years and over	72,540 26,980 37,479 44,752 62,079 32,736	8,520 7,249 7,962 6,930 7,950 260	11.7 26.9 21.2 15.5 12.8 0.8	0.2 0.5 0.4 0.3 0.2	72,553 26,965 37,440 44,780 61,824 32,978	8,405 7,350 7,926 6,938 7,819 245	11.6 27.3 21.2 15.5 12.7 0.7	0.3 0.7 0.5 0.4 0.3 0.1	115 -101 36 -8 *131	0.2 -0.4 0.1 -0.2 0.1	0.2 0.4 0.3 0.3 0.2 0.1
Nativity Native Foreign born Naturalized citizen Not a citizen	246,646 29,921 11,240 18,681	29,404 9,467 1,823 7,644	11.9 31.6 16.2 40.9	0.1 0.5 0.7 0.7	246,629 29,912 11,378 18,534	29,219 9,464 1,805 7,659	11.9 31.6 15.9 41.3	0.2 0.8 1.0 1.0	3 18	0.1 0.4 -0.4	0.1 0.5 0.6 0.6
Region Northeast. Midwest. South. West.	51,880 63,160 98,384 63,143	6,151 6,615 15,656 10,450	11.9 10.5 15.9 16.6	0.2 0.2 0.2 0.3	52,331 63,739 96,919 63,552	5,967 6,864 15,267 10,586	11.4 10.8 15.8 16.7	0.3 0.3 0.3 0.4	*-249 *389	*0.5 *-0.3 0.2 -0.1	0.2 0.2 0.2 0.2
Household Income Less than \$25,000. \$25,000 to \$49,999. \$50,000 to \$74,999. \$75,000 or more	60,720 76,090 58,593 81,164	13,803 13,074 6,330 5,665	22.7 17.2 10.8 7.0	0.3 0.2 0.2 0.2	61,067 75,378 59,311 80,784	13,889 12,758 6,502 5,534	22.7 16.9 11.0 6.9	0.4 0.3 0.3 0.2	*316 *-172	*0.3 -0.2 0.1	0.3 0.2 0.2 0.1
Education (18 years and older) Total No high school diploma High school graduate only Some college, no degree Associate degree Bachelor's degree or higher.		8,976 10,934 5,323 1,690	14.9 26.3 16.7 13.3 10.7 7.0	0.1 0.4 0.3 0.3 0.4 0.2	33,948 65,839 40,070 15,703	9,025 10,816 5,369 1,620	14.8 26.6 16.4 13.4 10.3 7.1	0.6 0.4 0.4 0.6	-49 118 -46 3 *70	-0.3 *0.3 -0.1 0.3 -0.1	0.1 0.4 0.2 0.3 0.4 0.2
Work Experience (18 to 64 years old) Total Worked during year Worked full-time Worked part-time Did not work	117,339 23,293	22,878 18,129 4,749	15.5 20.4	0.2 0.2 0.6	140,408 117,483 22,925	22,806 18,056 4,750	16.2 15.4 20.7	0.2 0.3 0.7	72 73 7 –1	- 0.1 -0.3 0.1	0.1 0.1 0.2 0.4 0.4

⁻ Represents zero or rounds to zero.

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^{*}Statistically significant at the 90-percent confidence level.

¹As a result of rounding, some differences may appear to be slightly higher or lower than the difference of the reported rates.

²Hispanics may be of any race.

Source: U.S. Census Bureau, Current Population Survey 2001 Annual Demographic Supplement, 1990-based controls.

Table B-2.

People Without Health Insurance for the Entire Year by State: 2000

	Expanded sample				Original sample				Difference ¹		
		Uninsured				ι	Jninsured		Uninsured		
Characteristic	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Number	Per- cent	Percen 90-pc C.I. (±
United States	276,567	38,871	14.1	0.1	276,540	38,683	14.0	0.2	188	0.1	0.2
Alabama	4,396	591	13.4	0.8	4,450	600	13.5	1.3	-9	-0.1	0.8
Alaska	626	116	18.5	1.0	647	125 793	19.3 16.1	1.5 1.3	*-9 19	-0.8 0.1	1.0 0.9
Arizona	4,999 2,597	812 374	16.2 14.4	1.0 1.0	4,917 2,625	364	13.9	1.3	10	0.1	0.
rkansas	34,329	6,189	18.0	0.5	34,735	6,281	18.1	0.7	-92	-0.1	0.
Colorado	4,213	583	13.8	0.8	4,228	563	13.3	1.3	20	0.5	0.
Connecticut	3,284	319	9.7	0.7	3,319	263	7.9	1.2	*56	*1.8	0
Delaware	768	72	9.4	0.8	787	82	10.4	1.3	*-10	*-1.0	0
District of Columbia	513	72	14.1	1.0	506	73	14.4	1.5	-1	-0.3	1
Florida	15,493	2,703	17.4	0.7	15,157	2,620	17.3	8.0	*83	0.1	0
Georgia	8,007	1,147	14.3 9.5	0.8 0.8	7,773 1,156	1,135 117	14.6 10.1	1.2 1.3	12 -5	-0.3 -0.6	0
ławaii	1,182 1,289	112 198	15.4	1.0	1,150	196	15.6	1.3	2	-0.2	Ö
llinois	12,159	1,651	13.6	0.5	12,286	1,659	13.5	0.8	-8	0.1	Ö
ndiana	5,944	673	11.3	0.7	5,818	701	12.1	1.2	-28	-0.8	1
owa	2,824	251	8.9	0.7	2,863	248	8.7	1.2	3	0.2	C
(ansas	2,648	286	10.8	0.7	2,607	301	11.5	1.3	-15	-0.7	C
Centucky	4,011	548	13.7	0.8	3,975	513	12.9	1.3	*35	8.0	0
ouisiana	4,380	797	18.2	1.0	4,233	810	19.1	1.5 1.3	-13	*-0.9	0
Maine	1,257	138	10.9	0.7	1,266	145	11.5 9.8	1.3	-7 33	-0.6 0.4	1
Maryland	5,258 6,176	534 535	10.2 8.7	0.7 0.7	5,119 6,256	501 595	9.5	0.8	*-60	*-0.8	(
Michigan	9,876	901	9.1	0.5	9,946	982	9.9	0.7	*-81	*-0.8	Č
Minnesota	4,809	384	8.0	0.7	4,784	430	9.0	1.0	*-46	*-1.0	C
Mississippi	2,811	384	13.6	1.0	2,789	364	13.1	1.3	20	0.5	(
Missouri	5,458	519	9.5	0.7	5,516	586	10.6	1.2	*-67	*-1.1	(
Montana	898	150	16.7	1.0	876	162	18.5	1.5		*-1.8	(
Nebraska	1,653	150	9.1	0.7	1,658	164 311	9.9 15.6	1.2	*-14	*-0.8 0.9	(
Nevada New Hampshire	1,934 1,217	318 102	16.5 8.4	0.8	1,991 1,240	85	6.8	1.3	O Programme Communication of the Communication of t	*1.6	(
New Jersey		979	11.9	0.7	8,306	1,049	12.6	0.8	*-70	*-0.7	(
New Mexico	Fig. 500 (100 (100 (100 (100 (100 (100 (100	422	23.7	1.3	1,793	427	23.8	1.5	-5	-0.1	(
New York	18,363	2,932	16.0	0.5	18,409	2,802	15.2	0.7		*0.8	(
North Carolina	7,776	1,037	13.3	0.7	7,521	980	13.0	0.000	1 - 1	0.3	(
North Dakota	615	69	11.2	0.8		69	11.3		1 I	-0.1	
Ohio	11,170	1,249	11.2	0.5	11,539		10.9 19.3	1,000		0.3 -0.4	
Oklahoma	3,378 3,377	638 423	18.9 12.5	1.0		H 1000000000000000000000000000000000000	13.7	1000000	8	*-1.2	
Oregon	12.70	1,022	8.7	0.5			7.6		10.00	*1.1	
Rhode Island	978		7.4				5.9		_ 75 E C ()	*1.5	(
South Carolina	3,948	481	12.2	0.8	3,769	448	11.9	1.3		0.3	
South Dakota		79	10.9	E 25500		1	11.8			*-0.9	(
Tennessee	W. C.		10.9				10.3	1	1 1	0.6	
Texas		4,607	22.3				21.5		2.22	*0.8	1
Utah			12.3				13.4 10.7			*-1.1 *-2.0	
Vermont	1 2 2 2 2 2		8.7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		The second State of	10.7			*-1.1	1.0
Virginia			11.6 13.4				13.3			0.1	
Washington	3000000	256	14.2				14.3		5.14	-0.1	
West Virginia			7.6		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7.1		01.10 marks	0.5	
AA IOOOLIOILI	483	1	15.7		7000000		14.4			*1.3	

⁻ Represents zero or rounds to zero. *Statistically significant at the 90-percent confidence level.

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¹As a result of rounding, some differences may appear to be slightly higher or lower than the difference of the reported rates. Source: U.S. Census Bureau, Current Population Survey 2001 Annual Demographic Supplement, 1990-based controls.

Table B-3.

People Without Health Insurance for the Entire Year by Selected Characteristics: 2000

	Census 2000 controls				Census 1990 controls				Difference ¹		
Oleman de l'artic	Uninsured			Uninsured				Uninsured			
Characteristic	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Total	Number	Per- cent ¹	Percent 90-pct C.I. (±)	Number	Per- cent	Percent 90-pct C.I. (±)
People Total	279,517	39,804	14.2	0.2	276,567	38,871	14.1	0.1	*933	0.1	0.2
Sex Male Female	136,559 142,958	20,791 19,013	15.2 13.3	0.2 0.2	135,255 141,312	20,162 18,709	14.9 13.2	0.2 0.2	*629 304	*0.3 0.1	0.2 0.2
Race and Ethnicity White	228,208 193,931 35,597 12,693	30,075 18,683 6,683 2,287	13.2 9.6 18.8 18.0	0.2 0.2 0.3 0.7	226,360 194,120 35,924 11,535	29,340 18,906 6,805 2,046	13.0 9.7 18.9 17.7 32.1	0.1 0.4 0.7 0.4	*735 -223 -122 *241 *1,021	*0.2 -0.1 -0.1 0.3 *0.8	0.2 0.2 0.6 0.9
Hispanic ²	36,093 72,314 26,815 38,865 44,566 63,391 33,566	8,617 7,406 8,507 6,898 8,124 251	32.9 11.9 27.6 21.9 15.5 12.8 0.7	0.3 0.2 0.5 0.3 0.3 0.2 0.1	33,875 72,540 26,980 37,479 44,752 62,079 32,736	8,520 7,249 7,962 6,930 7,950 260	11.7 26.9 21.2 15.5 12.8 0.8	0.2 0.5 0.4 0.3 0.2 0.1	97 157 *545 -32 174 -9	0.2 *0.7 *0.7 -0.1	0.6 0.3 0.7 0.5 0.4 0.3 0.1
Nativity Native Foreign born Naturalized citizen Not a citizen	247,706 31,811 11,785 20,026	29,529 10,275 1,930 8,345	11.9 32.3 16.4 41.7	0.2 0.5 0.7 0.7	246,646 29,921 11,240 18,681	29,404 9,467 1,823 7,644	11.9 31.6 16.2 40.9	0.1 0.5 0.7 0.7	125 *808 107 *701	0.7 0.2 0.8	0.2 0.7 1.0 1.0
Region Northeast. Midwest South West.	53,046 63,631 99,420 63,420	6,372 6,703 16,000 10,728	12.0 10.5 16.1 16.9	0.2 0.2 0.2 0.3	51,880 63,160 98,384 63,143	6,151 6,615 15,656 10,450	11.9 10.5 15.9 16.6	0.2 0.2 0.2 0.3	*344	0.1 - 0.2 0.3	0.3 0.3 0.4
Household Income Less than \$25,000	61,792 77,084 59,089 81,553		22.8 17.4 11.0 7.1	0.3 0.2 0.2 0.2	60,720 76,090 58,593 81,164	6,330	22.7 17.2 10.8 7.0	0.3 0.2 0.2 0.2	*311 183	0.1 0.2 0.2 0.1	0.4 0.3 0.3 0.2
Education (18 years and older) Total No high school diploma High school graduate only Some college, no degree Associate degree Bachelor's degree or higher.	207,203 34,994 66,327 40,298 16,075 49,510	1,721	15.1 26.9 16.8 13.4 10.7 7.1	0.2 0.5 0.3 0.3 0.5 0.2	34,086 65,330 40,066 15,866	10,934 5,323 1,690	14.9 26.3 16.7 13.3 10.7 7.0	0.4 0.3 0.3 0.4	*430 203 77 31	*0.2 0.6 0.1 0.1	0.2 0.6 0.4 0.2 0.6 0.3
Work Experience (18 to 64 years old) Total Worked during year. Worked full-time Worked part-time Did not work	119,067	23,525 18,707 4,818	17.8 16.5 15.7 20.6 23.8	0.2 0.2 0.5	140,632 117,339 23,293	22,878 18,129 4,749	17.6 16.3 15.5 20.4 23.5	0.2 0.2 0.6	*647 *578 69	*0.2 0.2 0.2 0.2 0.3	0.3 0.3 0.4 0.4

⁻ Represents zero or rounds to zero.

Source: U.S. Census Bureau, Current Population Survey 2001 Annual Demographic Supplement, expanded sample.

^{*}Statistically significant at the 90-percent confidence level.

¹As a result of rounding, some differences may appear to be slightly higher or lower than the difference of the reported rates.

²Hispanics may be of any race.



RODERICK L. BREMBY, SECRETARY

DEPARTMENT OF HEALTH AND ENVIRONMENT

KATHLEEN SEBELIUS, GOVERNOR

Testimony Presented to the Senate Public Health and Welfare Committee

Health Care Data Governing Board Annual Report
by Lorne A. Phillips, Ph.D.
Director and State Registrar
Center for Health and Environmental Statistics, KDHE
Chair
Health Care Data Governing Board

February 4, 2003

I am proud to present to this committee the Health Care Data Governing Board's 2002 Annual Report as required by KSA 65-6807. This document summarizes the work of the Health Care Data Governing Board for the year. Highlights include work related to:

✓ Legislative issues--Mental Health Parity: Data were provided to key legislators that facilitated the debate and ultimate passage of this insurance provision.

✓ Informational Initiatives-- The Governing Board supported the work of HARK (HIPAA Awareness and Readiness for Kansas) as it offered a HIPAA Awareness Summit and conducted informational tours for health care professionals in partnership with the Centers for Medicare and Medicaid Services

Bioterrorism: Data collection was expanded to enhance the Health Alert Network to address the need for rapid notification to health care professionals regarding a public health event. The Governing Board approved the collection of e-mail Addresses, pager numbers for the acquisition of e-mail addresses, fax and telephone numbers of participating professionals. Partners on this project include the Kansas Board of Healing Arts, the Kansas Medical Society and the Kansas Association of Osteopathic Medicine and KDHE.

CENTER FOR HEALTH AND ENVIRONMENTAL STATISTICS
CURTIS STATE OFFICE BUILDING, 1000 SW JACKSON ST., STE. 110, TOPEKA, KS 66612-2221
Voice 785-296-1415 Fax 785-296-8869 http://www.kdhe.state.ks.us

Constable Health & Welfore Committee Nutr'. February 4, 2003 attachment 3-1

- ✓ Data Partnerships--The Governing Board encourages data partnerships with government agencies to improve efficiency and maximize health information resources. Partnerships established include assistance with the:
 - --State Trauma Registry Database coordination
 - -- Child Support Enforcement (CSE) program
 - --Workers Compensation Medical Fee Schedule Database
 - -- Kansas Insurance Department Statistical Plan
 - --State Child Death Review Board database support
- ✓ Publications—Official publications and contributions to the Center for Health and Environmental Statistics (CHES) quarterly <u>Kansas Health Statistical Report</u> represent some of the ways data are disseminated from the Health Care Database. Publications released in 2002 include:
- -- The Kansas Primary Care Physician FTE Report by County 2001
- -- Kansas All Dentists and Dental Hygienists, and Primary Care Dentists by County, 2000
- --Hospital Discharges Among Older Kansas Residents, 1995-1999
- -- Review of Kansas Emergency Medical Service Professional Data 1998-2001 Trends
- -- Review of the Kansas Behavioral Science Regulatory Board Professional Data 2000
- -Review of the Kansas Dental Board Professional Data 2000
- --Review of Kansas Pharmacy Professional and Business Data 2000 and
- -- Kansas Health Statistics Report articles are:

Kansas HIPAA Awareness Efforts Underway Falls Among Older Kansans: Fatalities and Hip Fractures Medicaid Evaluates Cost Drivers Childhood Asthma in Kansas Dental Staffing in Kansas Evaluated

- ✓ Data Requests from the Health Care Database—tailored data products is another way information is disseminated from the Health Care Database. Over 213 specialized data requests were fulfilled in 2002. Over 30% of the data requested were from businesses, 50% from governmental entities and the remaining 20% were local and educational entities. In addition, over 106,000 successful website hits were recorded through the Information Network of Kansas (INK). Information about nurses is the most frequently requested data.
- ✓ Health Information Presentations Hosted by the Governing Board--The Governing Board hosted a number of presentations:
- Project Access: A Study of the Uninsured in Sedgwick County
- Asthma Hospitalizations in Kansas

- Privacy, IRBs and How to Conduct Health Research Under HIPAA
- Medicare Quality Improvement 7th Contract Update
- Update on Kansas Medicaid Program
- The Role of the Public Health Laboratory in Bioterrorism and Disease Surveillance
- Kansas ElderCount Project
- Educational Capacity in Kansas: Implications for the Health Care Workforce
- Update on Workforce Measurement Issues, Nursing Surplus: The HRSA Determination

The common theme throughout these efforts and the work of the Governing Board is to assure that good health information is made available to bodies such as this committee and other policy makers so that informed decisions can be made. Please remember the Health Care Data Governing Board establishes for you the forum through which health information issues can be discussed and recommendations made. Its structure, with its experienced members and associates is conducive to convening the necessary experts in Kansas that can make informed, relevant recommendations for you.

I'd like to take a moment to ask if you have any questions that come to mind that the Governing Board and its colleagues could address or prepare for in the future.

Thank you for your time.

Kansas Department of

Social and Rehabilitation Services

Janet Schalansky, Secretary

Senate Public Health & Welfare Committee 231-N February 4, 2003

SRS Overview

Office of the Secretary
Janet Schalansky, Secretary
(785) 296-3271

For additional information contact:

Office of Planning and Policy Coordination

Marianne Deagle, Director

Docking State Office Building 915 SW Harrison, 6th Floor North Topeka, Kansas 66612-1570 phone: 785.296.3271

fax: 785.296.4685 www.srskansas.org

Enate Public Health and Wolfer Committee Dete: February 4, 2003 Ottachmens 4-1

Kansas Department of Social and Rehabilitation Services



Agency Overview
For
Senate Public Health and Welfare
Committee

Janet Schalansky, Secretary February 4, 2003 1:30 p.m. Room 231-N



SRS Mission and Vision



Mission: To Protect Children and Promote Adult Self-Sufficiency

Vision: Partnering to connect Kansans with supports and services to improve lives

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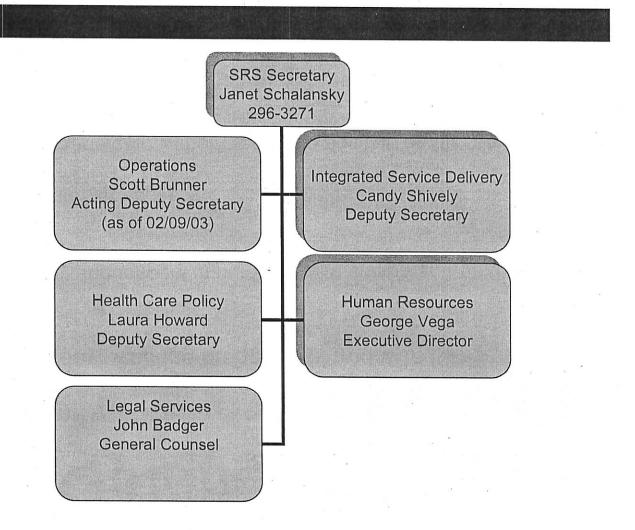


SRS Guiding Principles

All of us, every	day, working	on behalf of	f and with	Kansans a	are guided b	y these
principles:						-

- □Act with integrity and respect in our work with customers, partners, and each other
- ☐ Champion customer success
- Demonstrate leadership without regard to position or title; embrace responsibility, take risks, make decisions and act to overcome challenges
- ☐ Strive for continuous improvement
- ☐ Demonstrate passion for our mission
- □ Recognize the value of partnerships both within the agency and with community partners to stretch capacity and achieve extraordinary results

Kansas Department Of Social And Rehabilitation Services



SRS Expenditures by Category



FY 2004 Budget –Governor's Budget Recommendation (in Millions)

Direct Service Delivery

Administration

Capital Improvements

Direct Assistance

Cash Assistance \$67.1
Child Care & Employment \$73.2
Medical Assistance \$1,098.1
Substance Abuse \$20.4
Mental Health \$71.2

Developmental & Physical

Disability \$302.0
Children & Family \$184.0
Rehabilitation Services \$22.1

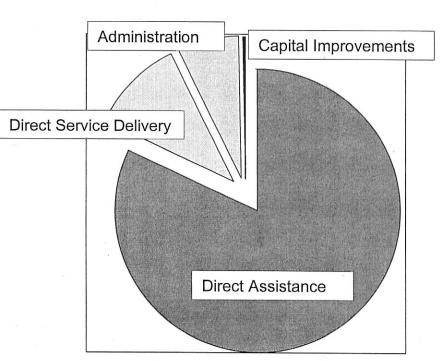
Other \$13.8

\$238.1 (10.6%)

\$157.4 (7.0%)

\$7.9 (.35%)

\$1,851.9 (82.1%)

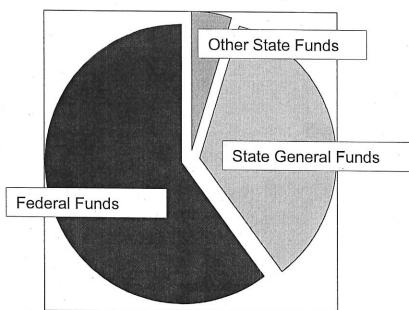


Total \$2,255.3

Totals may not add due to rounding

SRS Expenditures by Revenue Source

FY 2004 Budget – Governor's Budget Recommendation (In millions)



Total \$2,255.3

(Totals may not add due to rounding)

State General Funds Federal Funds Other State Funds

Fee Funds
Children's Initiative Fund (tobacco)
Intergovernmental Transfer
State Building Fund

\$793.3 (35.2%)

\$1,357.6 (60.2%)

\$104.3 (4.6%)

\$61.6

\$27.1

\$8.0

\$7.6

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Summary of Expenditures Annual Expenditures in Millions for State Fiscal Year 2002 (AF)

Child, Adult, and Family Safety and Well-Being Services	SFY 2002
Adoption/Alternative Permanencies	\$28.2
Adoption Subsidy	\$17.1
Foster Care	\$91.9
Financial and Employment Services	
Child Care	\$50.8
Child Support Collections **	\$143.0
Food Assistance	\$106.8
General Assistance	\$6.0
Low Income Energy Assistance	\$8.8
Rehabilitation Direct Services	\$14.6
Temporary Assistance for Families (TAF)	\$49.0
TAF Employment Services	\$8.0
**This line-item is not an expenditure, but total SRS child support collected on behalf of families	(In Millions)
-Not a complete list of SRS services	

Summary of Expenditures

Health and Medical Services	SFY 2002
State Mental Retardation Hospitals	\$46.6
Developmental Disability Services	\$245.0
Mental Health Services	\$74.7
Physical Disability Services	\$60.4
State Mental Health Hospitals	\$60.1
Substance Abuse Treatment and Recovery	\$17.0
Health Care Services: People Primarily in Managed Care Programs	
Families	\$106.6
Children	\$118.9
Pregnant Women	\$37.6
People Primarily in the Fee-for-Service Program	8
Persons who are Elderly and Disabled	\$471.7
Children in Foster Care, Adoption, or JJA	\$31.3
Persons Provided Partial Health Care Coverage	\$13.2
MediKan Fee-for-Service	\$17.5
Children's Health Insurance Program	\$43.2
	(In Millions)

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Summary of Persons Assisted Number of consumers/beneficiaries for state fiscal year 2002

	Child, Adult, and Family Safety and Well-Being Services	SFY 2002
	Adoption/Alternative Permanencies	1,546
	Adoption Subsidy	4,303
	Foster Care	3,264
	Financial and Employment Services	
	Child Care	16,151
	Child Support Collections	150,204
	Food Assistance	131,723
9	General Assistance	3,152
	Low Income Energy Assistance	72,239
	Rehabilitation Direct Services	7,859
	Temporary Assistance for Families (TAF)	34,453
	TAF Employment Services	11,342

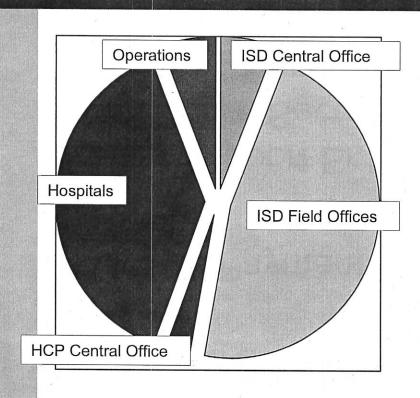
average per month

Summary of Persons Assisted

Health and Medical Services	SFY 2002
State Mental Retardation Hospitals	375
Developmental Disability Services	8,876
Mental Health Services	24,726*
Physical Disability Services	4,875
State Mental Health Hospitals	431
Substance Abuse Treatment and Recovery	14,111
Health Care Services: People Primarily in Managed Care Programs	
Families	52,400
Children	71,900
Pregnant Women	5,700
People Primarily in the Fee-for-Service Program	
Persons who are Elderly and Disabled	63,060
Children in Foster Care, Adoption, or JJA	10,000
Persons Provided Partial Health Care Coverage	6,660
MediKan Fee-for-Service	2,970
Children's Health Insurance Program	24,264
*Figure represents persons served per year	



SRS Employee Count



Currently Filled FTE

Integrated Service Delivery

Central Office 338.78 Field Operations 2,667.78

Health Care Policy

Central Office	161.93
Hospitals	2,180.05

Kansas Neurological Institute 564.20
Larned State Hospital 671.30
Osawatomie State Hospital 388.26
Parsons State Hospital & TC 447.49
Rainbow Mental Health Facility 110.80

Operations

339.06

(Includes Legal, Human Resources, Audit and Consulting Services, Budget, Finance, Public Affairs and Planning and Policy Coordination)

Total

5,687.60



Highlights for 2003 Legislative Session

Legislative Proposals

- Kansas Payment Center Sunset Measure
- Child Support Enforcement Requirement that Social Security Numbers be on Kansas Driver's License Applications
- Repeal of \$40 Pass Through of Child Support



FY 2003/2004 SRS Budget Highlights

Budget

- At the end of the 2002 legislative session, SRS' FY 2003 budget was significantly impacted by numerous budget reductions which resulted in reducing, modifying or eliminating critical services.
- As SRS ended the 2002 legislative session and began preparing an FY 2003/2004 budget, we had serious concerns about Kansas' financial picture and its impact on SRS' budget.
- SRS imposed several cost management tools to slow the growth of the Medicaid program.
- As we prepared our budget, we recognized that \$75 million in one-time Intergovernmental Transfer funding would need to be replaced with SGF or critical services to thousands of people would be eliminated.
- In August and November, Governor Graves imposed an allotment of \$6.2 million SGF/\$14.9 million all funds and \$26.6 million SGF/\$49.09 million all funds, respectively, on SRS, leading us to make significant administrative, program and service reductions in the current year.

FY 2003/2004 SRS Budget Highlights

Budget

- Although the Governor's FY 2004 budget restores some critical service reductions, the budget continues to reflect significant reductions in SRS' budget.
- The Governor's budget recommendation funds consensus caseloads and replaces Intergovernmental Transfer funds.
- SRS central office and field offices will be managing programs with fewer staff: one in six positions will be left open in central office, one in eight positions will be left open in the field offices. Also, the state hospitals are currently implementing workforce reductions and will continue to do so in FY 2004.
- In addition, layoff plans were submitted to the Division of Personnel Services last week. The layoff plan contains a total of 147 positions within the agency, including:
 - 50 positions from Central Office
 - 77 positions from Area Offices
 - 11 positions from State Hospitals
 - 9 additional positions from Manhattan Area Office (effective June 6, 2003)



Emerging Issues

- □ Rising Social Service Caseloads
- □ Escalating Health Care Costs
- □ Balancing Demand for Services with Available Funding
- □ Demographic Changes in Rural Areas
- Maintaining High Staff Morale Through Tough Times
- Managing Programs with Fewer Dollars and Staff
- □ Federal Reauthorization of Programs:
 - ☐ TANF
 - □ Child Care

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Schedule 1

Department of Social and Rehabilitation Services Adjustments included in the Governor's Budget Recommendation (in millions)

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Reductions inclu	aded in SRS S	Submitted Bu	dget	
Governor's August Allotment Reductions Reduce Family Preservation Services Reduce Child Support Enforcement Contracts Head Injury Waiver Local Office closures, State Hospital staff, and other administrative reductions Medicaid cost avoidance	(6,020,860)	(14,092,734)	(6,020,860)	(14,092,734)
State hospital workforce reductions Reduce workforce in targeted positions not providing critical patient care	(600,000)	(600,000)	(1,200,000)	(2,142,086)
Redesign of the delivery of field services close 22 offices before July 2003 (reduction part of August allotment) close more offices in FY 2004	0	. 0	(197,005)	(416,500)
		nitted Budget		
Governor's November 2003 Allotment K	Reductions con	tinued in FY	2004	
Increase SRS Central Office Shrinkage from 7.25% to 17% 1 out of every 6 positions will be kept vacant. This represents a reduction in workforce.	(843,590)	(2,313,955)	(914,069)	(2,439,375)
Reduce Information Technology and Human Resource Training contracts	(1,900,000)	(5,307,263)	(623,285)	(1,707,916)
Reduce Early Learning grants Grants to improve the quality of care will be reduced by \$1.4 million affecting the funding for the following: accreditation, infant/toddler slots, provider start-up funding, training, education, provider recruitment, and resource and referral services	(557,200)	(1,400,000)	(557,200)	(1,400,000)
Reduce Child Welfare grants • Additional funding for the training and recruitment of foster parents will be eliminated.	(157,382)	(406,493)	(314,764)	(812,986)

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Eliminate grandfathering for those whose PD Waiver LOC score is between 16 and 25 The level of care eligibility score for the PD waiver was raised from 16 to 25 in 1999. Persons already being served were allowed to remain in service. 350 persons will be removed from PD waiver funded services	(334,656)	(840,000)	(1,481,551)	(3,765,060)
Reduce Pharmacy Reimbursement rate to Average Wholesale Price - 13% Reimbursement for branded pharmaceuticals will be reduced from the average wholesale price (AWP) minus 11 percent to AWP minus 13 percent.	(212,267)	(533,333)	(1,231,200)	(3,100,000)
Reduce inpatient acute care hospital reimbursement rate Reduce rate by 10% in FY 2003 Reduce hospital rates by paying the lessor of the diagnostic related groupings (DRG) or the charged amount, reduce payments to out of state hospitals, paying less for costs above the DRG, and making no payments for medical education services.	(614,840)	(1,544,724)	(4,997,450)	(12,700,000)
Reduce Medical Transportation reimbursement rate • Reduce the base rate paid for Medicaid covered transportation from \$20 per trip to \$10 per trip.	(497,500)	(1,250,000)	(1,180,500)	(3,000,000)
Limit the Number of Branded Prescriptions covered by Medicaid to five per month The number of branded drugs covered by Medicaid for each person in the program will be limited. Persons on Medicaid and their physicians, with certain exceptions, will need to switch to generics, prioritize their medications, or seek other funding for branded medications above the limit. Generic drugs will not be limited.	(1,400,000)	(3,500,000)	(5,312,250)	(13,500,000)
Reduce Physical Disability Waiver funding approved for the PD waiver waiting list The additional appropriation for serving more people on the PD waiver waiting list will not be used. 156 fewer persons will be served on the PD waiver	(1,000,000)	(2,500,000)	(983,750)	(2,500,000)
Reduce family preservation services • Approximately 451 families will not receive services as a result of the reduction in this program.	(932,672)	(1,750,000)	(1,750,000)	(1,750,000)
Move Start Date for two year limit on General Assistance and MediKan Start date for two year limit will move to 1/1/02 Persons who have been receiving services will lose them on 1/1/04	0	0	(2,693,146)	(2,693,146)
Reduce SRS travel & supply expenditures	(181,419)	(493,975)	(156,400)	(421,336)

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Miscellaneous Administrative Reductions Reduce various contracts and other misc admin costs.	(233,131)	(498,259)	(235,570)	(497,676)
Miscellaneous Funding Shifts • Shifts SGF expenditures to federal and fee funds	(1,352,023)	0	(1,121,404)	0
Reduce Medical Policy grants Reduce various administrative grants including incentive payments for diversion of people from private acute care psychiatric hospital admission.	(145,541)	(207,164)	(770,541)	(832,164)
Reduce Prevention Grants	(16,830)	(75,000)	(16,830)	(75,000)
Reduce Mental Health Grants Reduce grants to Consortium AIMS, WSU Children, WSU Other, ComCare, KU Medical Residency Program, KU Adult, KU Children, NAMI, KEYS, Alternate Care, and Vocational Rehabilitation.	(165,380)	(192,000)	(204,630)	(231,250)
Reduce Developmental Disability Grants Reduce grants for Make a Difference, DD targeted case management growth, Families Together, and CDDO Administration	(404,445)	(721,730)	(404,445)	(721,730)
Reduce Rehabilitation Grants Reduce grants to United Cerebral Palsy, KCDHH administrative grants, Kan-Sail administrative grants, and administrative training grants.	(104,959)	(185,295)	(133,723)	(302,105)
Reduce MediKan rate to Community Mental Health Centers	(466,667)	(466,667)	(1,400,000)	(1,400,000)
Reduce Foster Care contract rate by 5%	(1,797,282)	(1,950,637)	(3,273,750)	(4,761,818)
Reduce Family Preservation contract rate by 2.5%	(16,219)	(106,454)	(252,091)	(255,489)
Reduce Adoption contract rate by 2.5%	(247,853)	(360,458)	(618,120)	(900,000)
Limit prescription drug supply to 31 days	(199,000)	(500,000)	(196,750)	(500,000)
Require prior authorization to access Cox II anti-inflammatory drugs Cox II anti-inflammatory medication will only be authorized for person with ulcers or persons on medication that causes gastro-intestinal distress.	(199,000)	(625,000)	(590,250)	(1,500,000)

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Reduce Family Support for Developmental Disability Waiver Families with minor or adult children living at home receive attendant care services funded by the DD waiver. The number of hours of services these families receive will be reduced by an average of 10% 2,200 families may receive fewer services	(398,900)	(1,000,000)	(1,574,000)	(4,000,000)
Eliminate the Protection Reporting Center (eliminate 9 FTE) The responsibility of receiving and screening all child and adult abuse/neglect concerns will be distributed among the 11 SRS management areas, depending on where the child/family or adult resides. Concerns made after normal business hours can be made to local law enforcement agencies or a 1-800 abuse hotline.	(50,157)	(78,346)	(200,381)	(312,998)
Governor's November 2003 Allotment R	eductions par	tially restored	in FY 2004	
Reduce Community Mental Health Center State Aid	(2,500,000)	(2,500,000)	(1,500,000)	(1,500,000)
 Reduce formula grants to Community Mental Health Centers (CMHC) that support their general provision of services and infrastructure. Some CMHCs use these funds as certified match for federal Medicaid 		ક ,		
Reduce Community Developmental Disability Organization State Aid Reduce formula grants to Community Developmental Disability Organization (CDDO)	(1,996,500)	(1,996,500)	(1,500,000)	(1,500,000)
that support their general provision of services and infrastructure. Some CDDOs use these funds as certified match for federal Medicaid.		¥., .,		
Raise HealthWave Premiums Triple HealthWave Premiums from \$10 to \$30 and \$15 to \$45 based family income in FY 03; Double rates from \$10 to \$20 and \$15 to \$30 in FY	(91,628)	(328,650)	(359,150)	(1,288,200)
 5,800 families will be subject to higher premiums 1,475 children could drop coverage based on national studies of experiences in other states. 				
Governor's November 2003 Allotment R	eductions res	tored in FY 20	004	
Reduce Head Start grants Reduce the Kansas Early Head Start program by \$300,000. Approximately 70 children and 82 families will be affected by the reduction in Early Head Start funding.	(119,400)	(300,000)	0	. 0

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Reduce Child Welfare grants The reduction of the disability advocacy contract will reduce the number of children receiving assistance in obtaining federal disability.	(127,548)	(180,000)	. 0	. 0
Eliminate Economic and Employment Services Grants Reduce the TAF and GA disability advocacy contract Eliminate professional development contract	(118,496)	(320,000)	0	0
Reduce Child Care eligibility 185% FPL to 150% FPL The maximum income to receive child care subsidies for a family of three will decrease from \$2,316 to \$1,878 per month, a 19 percent reduction. Approximately 1,288 families and 2,092 children will lose their eligibility for subsidies. Restored to 185% FPL in FY 2004	(831,798)	(2,089,944)	0	0
Reduce Protected Income Level for Waivers to \$645 The PIL allows persons served with waiver funding to keep higher amounts of income for housing, utilities, food and transportation. This lowers the amount these persons are allowed to keep for these expenses by requiring them to pay more for medical care. The average additional amount paid by these persons will be \$516 per year. 1,205 persons on the DD waiver 1,160 persons on the PD waiver 42 persons on the Head Injury (HI) waiver Restored to \$716 in FY 2004	(186,635)	(468,931)	0	0
Reduce CFP Family Services/Community Services • Approximately 6 families will not receive services as a result of the reduction in Family Services.	(32,116)	(63,470)	0	0
Eliminate the emergency shelter case management funding Approximately 3,636 children may not receive case management services as a result of the elimination of this funding which could result in fewer benefits for early intervention. Fully restored in FY 2004	(600,523)	(600,523)	0	0
State Hospital hiring freeze and/or workforce reductions 1 out of every 9 positions will be kept vacant. This represents a reduction in workforce.	(762,282)	(762,282)	0	0
Reduce State Hospital OOE expenditures Reduce maintenance and upkeep of hospital buildings and grounds and supplies available for administration and resident use.	(750,000)	(750,000)	0	

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Increase SRS Field Office Shrinkage rate from the approved 7.25% to 12% for FY 03; to 10.7% as submitted in the FY 04 budget 1 out of every 8 positions will be kept vacant.	(2,346,121)	(5,350,024)	0	0
Reduce Substance Abuse Prevention & Treatment grants Reduce grants not directly related to direct consumer services.	(53,653)	(503,300)	0	0
Raise Physical Disability Waiver Level of Care Score to 30 but grandfather those in service 118 of the 674 persons on the waiting list would not qualify for PD waiver services The GBR lower the LOC back to 26 in FY 2004	(47,820)	(120,150)	0	
Reduce PD Waiver rate 2.5%	(139,986)	(366,598)	0	0
Reduce HI Waiver rate 2.5%	(17,125)	(37,266)	0	0
Reduce DD Waiver rate 5%	(976,776)	(2,448,673)	0	0
Eliminate Medicaid coverage for adult vision 10,500 persons will experience a delay in receiving eye examinations or glasses.	(208,333)	(458,333)	0	0
Eliminate Medicaid coverage for adult audiology 4,500 person will experience a delay in receiving hearing tests or hearing aids	(83,333)	(166,667)		0
Eliminate Medicaid coverage for incontinence supplies 513 persons will not have diapers purchased through Medicaid for incontinence	(166,667)	(416,667)	0	0
Other Reductions			242	
Pend Medical Claims • Medicaid payments for claims from hospitals, physicians, pharmacy, and home health will be held for about the last 12 days of FY 2003 and paid immediately in FY 2004.	(6,200,000)	(15,500,000)	6,200,000	15,500,000
Funding shifts Shift antipsychotropic medication funding from SGF to pharmacy manufacturer rebates (fee fund) Medicaid Federal Match percentage increase Increase IGT funding in waivers	(4,000,000)	0	(15,570,000)	0
Tighten eligibility for TANF Transitional - Medical program by requiring reapplication after 6 months	0	0	(865,700)	(2,200,000)

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Reduce Intermediate Care Facility for Mental Retardation rates by 10%	0	0	(784,973)	(1,994,848)
Additions				*
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	21,672,037	56,280,910	48,513,467	128,900,925
Replace Intergovernmental Transfer funds with SGF	0	0	74,800,000	0
Urban Acute Care Services • Funds have been made available to address crisis mental health services in urban areas.	0	. 0	1,000,000	2,510,040
Fund parent fees shortfalls Replace fee funds and increase federal expenditure authority for parental fees not collected for services provided by the serious emotional disturbance(SED) waiver, the developmental disability (DD) waiver, the technology assisted (TA) waiver, and family preservation contract.	0	1,746,000	1,234,480	3,520,000
Fund HCBS Waiting Lists Increase funding for Developmental Disability and Physical Disability Waivers SGF AF DD waiver 2.0 5.1 PD waiver 1.0 2.5	0	0	3,000,000	7,623,888
Fund Medicaid Coverage for children aging out of the foster care	. 0	0	64,470	162,500
Fund HealthWave caseload increases	0	0	3,091,526	12,025,000
Intensive services for at risk General Assistance/MediKan recipients	0	. 0	334,400	500,000
Fund Sexual Predator Treatment Program census increase	0	0	1,589,719	1,589,719
Fund current Sexual Predator Transition Program census	0	.0	100,000	100,000
Fund Rainbow Mental Health Facility This will allow RMHF to remain open after 7/1/2003	0	0	3,867,158	6,819,608

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
Children's Cabinet Additions				
Add CIF for Smart Start in Children's Cabinet	0	0	0	1,300,000

Schedule 2 Department of Social and Rehabilitation Services Changes Not Included the Governor's Budget (in millions)

Description	FY 2003 SGF	FY 2003 All Funds	FY 2004 SGF	FY 2004 All Funds
FY 2003 Supplemental an	d FY 2004 E	nhancement	Request	
Reduce State Institutions shrinkage rate	876,514	876,514	0	. 0
Fund Sexual Predator Treatment Program census increase	397,430	397,430	0	. 0
Fund Larned State Hospital support services required for Larned Juvenile Correctional Facility bed expansion	59,651	59,651	25.7,594	257,594
Fund Sexual Predator transition program <u>current</u> census	100,000	100,000	0	0
Waiver service access management lists	0	0	2,000,000	4,876,112
Supports for Children and Families Whose Needs Cross Services Systems	0	0	1,200,000	3,000,000
Intermediate Care Facilities for Mental Retardation (ICFs/MR) rate adjustments	0	0	538,515	1,350,000
Restore Hospice services for people on Physical Disability waiver	0	0	160,513	403,298
Sexual Predator transition program projected census	0	0	100,000	100,000
Physician reimbursement fee for service rates	0	0	7,500,000	18,400,000
Dental services funding for adults	0	, 0	6,400,000	16,000,000
Restore Family Preservation allotment cut	0	0	1,000,000	1,000,000
Severe and Persistent Mental Illness (SPMI) jail diversion	0	. 0	2,000,000	2,000,000
Services for Children with Autism/Autistic-like symptoms	0	0	1,000,000	1,000,000
Family formation and fatherhood initiative	. 0	. 0	202,754	208,100
Specialized Developmental Disability services	0	. 0	1,000,000	1,000,000
Re	eductions			
Reduce HealthWave eligibility to 185% FPL	. 0	.0	(303,320)	(1,087,950)
Modify HealthWave benefit package	0	0	(1,671,706)	(6,069,000)
Freeze Access to PD, DD, and HI Waivers	0	0	(4,720,054)	(11,847,526)
Reduce CFP Family Services/Community Services	0	. 0	(527,734)	(681,823)
Eliminate the Emergency Shelter Case Management funding	0	0	(1,441,256)	(1,441,256)