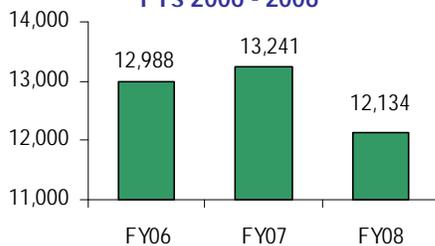




Uninsured hospitalizations, FYs 2006-2008

In Fiscal Year (FY) 2008, the state's 30 acute care hospitals reported 12,134 uninsured hospitalizations with total associated charges of over \$239 million. An "uninsured hospitalization¹" is one for which no third party payer is responsible for payment, and which often results in financial burdens for patients and their families along with hospitals. This brief will provide a retrospective analysis of uninsured hospitalizations from FY 2006-2008.

Figure 1: Total uninsured hospitalizations, FYs 2006 - 2008



Source: CT Office of Health Care Access Inpatient Acute Care Hospital Discharge Database

As shown in Figure 1, over the past three years, uninsured hospitalizations decreased by 6.6 %, from 12,988 in FY 2006 to 12,134 in FY 2008. While the number of uninsured hospitalizations fell during this period, associated charges to treat these uninsured patients rose by 14% from FY 2006 levels. Figure 2 illustrates that uninsured hospitalizations did not consistently decline over the three years. In FY 2007, uninsured hospitalizations were reported at 13,241, a 1.9% increase from FY 2006. They declined 8.4% between FY 2007 and FY 2008. During the three-year period, Medicaid and Medicare hospitalizations increased by 6.1% and 2.5%, respectively.

Between FY 2006 and FY 2008, the number of Emergency Department (ED) visits by uninsured patients increased by 2.3% (+3,939 visits²), signaling that the decrease in the number of uninsured hospitalizations was not indicative of uninsured ED utilization. The percentage of uninsured ED visits remained at 11% of total ED visits across each of the three years. In FY 2008, of 1.6 million ED visits statewide, 173,009 visits were made by patients without insurance.

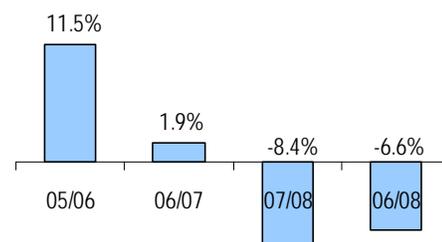
In FY 2008, 66% of the uninsured who were hospitalized were admitted through the ED, up from 62% three years earlier. The percentage of uninsured patients under age 40 decreased over the past three years, while the share of uninsured hospitalizations for individuals above 40 years old rose from 45% to 50%. Although the state experienced demographic changes with regard to uninsured hospital discharges, the total number of uninsured hospitalizations remained at fewer than 3% of all Connecticut hospitalizations. This figure ranks the state favorably compared to the U.S. average for uninsured hospitalizations (5.7% in 2006³).

DECREASE IN UNINSURED HOSPITALIZATIONS, FYS 06-08

The overall decline of uninsured hospitalizations (-6.6%) was fueled by decreased admissions in the following uninsured categories:

- Children, < age 18 (-23 %),
- Adults, ages 19-39 (-11 %),
- Races other than White, Black, or Hispanic, (-33 %), and
- Referral Admissions (-10 %).

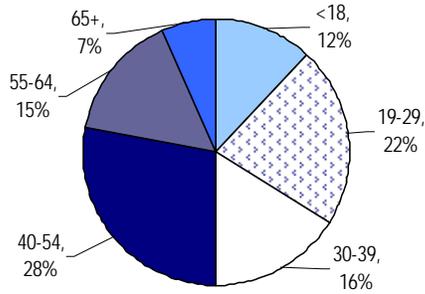
Figure 2: Annual percent change in uninsured hospitalizations, FYs 2006 - 2008



Source: CT Office of Health Care Access Inpatient Acute Care Hospital Discharge Database

WHO WERE THE HOSPITALIZED UNINSURED?

Figure 3: Age distribution of uninsured hospitalizations, FY 2008

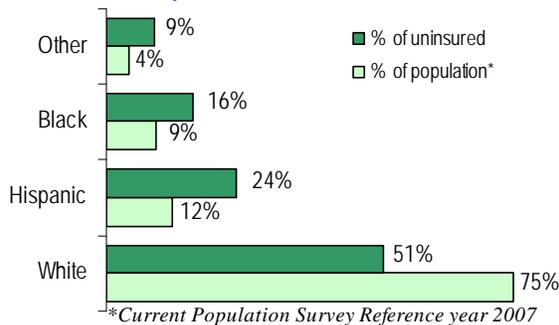


Source: CT Office of Health Care Access Inpatient Acute Care Hospital Discharge Database

Patients ages 40 to 54 comprised the largest percentage (28%) of uninsured hospitalizations (Figure 3).

However, the number of uninsured hospitalizations in this age group actually decreased by 3% from FY 2006 to FY 2008. The age group with the most dramatic decline in volume of uninsured hospitalizations was children under age 18, with a 23% decrease over three years. The decline may be due to the expansion of HUSKY, a public program offering coverage to lower income children and their parents. Over this three-year period the only age groups to experience an increase in uninsured discharge volume were those over age 55.

Figure 4: Race and ethnicity of uninsured hospitalizations, FY 2008



Source: CT Office of Health Care Access Inpatient Acute Care Hospital Discharge Database

Hispanics accounted for nearly one quarter of the state's uninsured hospitalizations although they are only about 12% of Connecticut's population (Figure 4).

As the number of uninsured hospitalizations decreased in FY 2008, minorities experienced a larger percentage drop in the number of uninsured discharges than Whites (-8.2% versus -6.1%). This drop in uninsured discharges, however, was not entirely consistent throughout the uninsured minority population, as the number of uninsured hospitalizations for Blacks and Hispanics increased by 1% over this period.

UTILIZATION TRENDS

Some regions of the state experienced an increase in the number of uninsured resident hospitalizations over the past three years.

In particular, Windham County residents experienced a 31% (or 115 patients) increase in the number of uninsured hospitalizations when compared to FY 2006, while Fairfield County, a more densely populated county, saw a 17% (or 666 patients) drop in uninsured discharges among its residents over the same period. Middlesex County residents experienced the sharpest decrease in uninsured discharges, falling 55% (or 266 patients) from FY 2006 levels. Overall, Connecticut's three most populous counties (Fairfield, New Haven, and Hartford) cumulatively accounted for 74% of uninsured hospitalizations in FY 2008. Connecticut hospitals that served the highest volume of uninsured resident inpatients overall were located in urban areas within the state: Hartford Hospital (11%), Yale-New Haven Hospital (10%), St. Vincent's Medical Center (9%) and Norwalk (7%). From FY 2006 through FY 2008, approximately 6% of uninsured inpatients were from out-of-state, and increased by approximately 4% over the period.

In FY 2008, several hospitals saw a significant drop in uninsured hospitalizations when compared to FY 2006 levels. Middlesex Hospital (-374 discharges), Norwalk Hospital (-353 discharges) and St. Mary's Hospital (-177 discharges) had the highest decreases in uninsured hospitalizations. Although the overall number of uninsured hospitalizations decreased from three years ago, certain hospitals saw an increase in uninsured hospitalizations, the largest being Lawrence and Memorial Hospital (+152 discharges), Windham Community Memorial Hospital (+91 discharges) and the Hospital of Saint Raphael (+84 discharges). Cumulatively, Connecticut hospitals experienced a net decrease of 854 uninsured discharges when compared to FY 2006.

OHCA's next issue brief will focus on the subject of uncompensated care.

Notes

¹For the purposes of this issue brief, uninsured patients are defined as persons whose primary payer was self-pay, other, or no charge as defined in OHCA's hospital inpatient discharge database regulations.

²Connecticut Hospital Association Chime, Inc. Emergency Department Database (excludes Sharon Hospital)

³AHRQ, Uninsured Hospitalizations, 2003. HCUP Statistical Brief #7. May 2006.

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