



### Background:

Young adults are at one of the most vulnerable stages of life as they transition from adolescents into independent adults; and yet they lack many of the social and societal supports afforded children and older adults. These transitioning youth have the least help in obtaining guidance and education regarding their health, and more than any other age group they lack access to quality health care. Approximately 1 in 3 young adults do not have health insurance, compared to 1 in 6 Americans, overall. Young adults often lose eligibility under their parent's policy when they turn 19 or graduate from college. Nineteen to twenty-four year-olds are most at risk of being uninsured (35%), and these rates continue to increase.<sup>1</sup> The health of those who are already economically marginalized is in particular jeopardy, as low-income 19-24 year-olds have a greatly increased risk of being uninsured (43%). Ethnicity and education also widens the gap in services: 47% of African-American and 62% of Latino 19-23 year-old men who are not in school full-time are uninsured.<sup>3</sup>

Contrary to popular perception, most young adults recognize the value of health insurance. Seventy percent of young adults regard health insurance as a very important factor when choosing a job. Unfortunately, young people are in the early stages of their careers and changing jobs more frequently leads to periods without insurance.<sup>2</sup> Even when employed, young adults are significantly less likely to have job-based health benefits than their older counterparts. Young adults are often too new in their positions or work in jobs that do not provide coverage.<sup>5</sup> Only 45% of workers aged 19-24 have job-based health benefits, compared to 62% for older age groups.<sup>3</sup>

The risks of not having health insurance are high: uninsured patients have worse clinical outcomes than insured patients for several chronic conditions including diabetes, HIV infection and mental illness.<sup>6</sup> The health risks are particularly high for young adults (and low-income young adults). Forty percent of uninsured 19-29 year-olds received no preventive care services in the past year.<sup>3</sup> Half of uninsured young adults with low incomes went without needed medical care during the past year.<sup>3</sup> Thirty-nine percent of uninsured young adults stated that they would wait as long as possible to receive health care.<sup>7</sup>

Interestingly, young adults' morbidity and mortality characteristics resemble those of adolescents more than adults. In fact, young adults suffer a higher rate of each preventable cause of death than their adolescent counterparts. While there has been considerable attention paid to the unique risks and needs of adolescents, there has been a marked neglect of those same risks and needs in the young adult population. More than any other age group, young adults are likely to die from accidents, homicide or suicide.<sup>4</sup> Young adults are in a precarious position: they undertake the responsibilities of adulthood without having established economic stability and they bear the health risks of adolescence without having the established support system afforded to children. It is imperative that we examine the health care crisis as it relates to the young adult population..

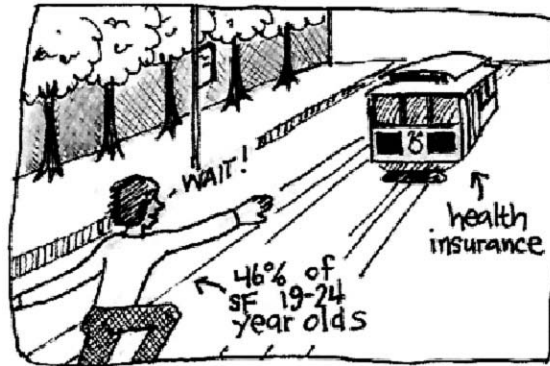
### San Francisco:

According to the California Health Interview Survey, 46 percent of 19-24 year olds in San Francisco are uninsured, with the highest prevalence is in the Asian and Latino communities. Despite the fact that our health care crisis is worse than in the average

U.S. city, there is some cause for optimism in San Francisco. San Francisco's ambitious plan to extend its Healthy Kids program would provide benefits to young adults below 300% of the federal poverty level. Depending on its implementation criteria, this could effectively fill the gap in coverage for most vulnerable young people. In combination with employer-based plans, private insurance, school coverage and existing public programs, this could translate into roughly 95% of young adults having access to health insurance. In order to make this initiative as successful as possible, the HIYA Project proposes the following recommendations.

### Recommendations:

- Close loopholes in the current Healthy Kids Expansion plan: Now the extended plan is only available to young adults currently enrolled in Healthy Kids, Healthy Families, or MediCal and who are about to age out of services.
- Do not simply replicate the coverage provided to children: Gather community input to insure that the coverage provided by the expanded program is age appropriate. Healthy Kids expansion should include coverage for mental health services and drug and alcohol programs.
- Ensure that this health insurance is meaningful: Increase the pool of internists, family practitioners, and obstetrician/gynecologists accepting Healthy Kids. Coordinate with sexual health/reproductive services (Family PACT providers) to ensure comprehensive care.
- Use this expansion as a model for other communities: Follow the outcomes of these young adults to assess the long-term implications of having adequate health care during this period
- Create a Transitional Adult Task Force to advocate for the broader issues of young adults: Learn about the full spectrum of needs and resources of young adults, which will in turn provide a context for understanding their health needs.



<sup>1</sup>Institute of Medicine (2004). *Insuring America's Health*. Washington, DC: National Academy Press.

<sup>2</sup>Kaiser Commission for Medicaid and the Uninsured. *Health Insurance Coverage in the U.S.: 2002 Data Update*. <http://www.kff.org>

<sup>3</sup>The Commonwealth Fund (May, 2000). *Health Insurance On Their Own: Young Adults Living Without Health Insurance*. New York, NY: The Commonwealth Fund.

<sup>4</sup>State of California, Department of Health Services, Vital Statistics Table 5-9A, "Leading Causes of Deaths and Age-Specific Death Rates" California 2002

<sup>5</sup>Institute of Medicine (2001). *Coverage Matters: Insurance and Health Care*. Washington, DC: National Academy Press.

<sup>6</sup>Institute of Medicine (2002). *Care Without Coverage: Too Little, Too Late*. Washington, DC: National Academy Press.

<sup>7</sup>The Commonwealth Fund Survey of Women's and Men's Health, 1998, <http://www.cmf.org>

Prepared in 2005 by the **HIYA** (Health Insurance for Young Adults) Project, a collaboration between the Adolescent Health Working Group and Coleman Advocates for Children and Youth. Through qualitative and quantitative research, HIYA aims to provide support for policy initiatives extending health insurance coverage to youth who are transitioning into adulthood. Moreover, the HIYA project is dedicated to expanding interest in, and understanding of, the variety of issues facing young adults – an underrepresented, vulnerable and dynamic population whose health is costly to neglect.