Health insurance coverage is a well-documented determinant of access to health care and of overall health outcomes. Variation in health insurance coverage between demographic groups contributes to disparities in access and health outcomes. This fact sheet explores the relationship between gender and health insurance in the state of Florida. The reasons for gender disparities are complex and often interact with factors such as age, race/ethnicity, education, income, and employment. Examining differences in health insurance coverage between men and women can help in understanding overall gender health disparities in Florida.

Rates of Uninsurance For All Floridians Under 65 Years, 1999 vs. 2004

Over a five-year period, uninsurance rates steadily increased for all non-elderly Floridians (Figure 1). Males were more likely to be uninsured than females and have shown a greater increase in uninsurance rates than have females. The increase in uninsurance rates seen in males is more than double that observed in females (3.5% vs. 1.6 % increase).

Disparities in health insurance coverage between men and women are not well understood. Contributing factors might include sociodemographic differences between men and women, employment characteristics of each group, or Medicaid eligibility criteria that favor female coverage. There has been much analysis of challenges women face in securing health care and health care coverage, but more investigation into the particular situation of men is needed in order to better design programs aimed at reducing rates of uninsurance in Florida and the entire country.
Gender Differences in Coverage Among Working-Age (18-64) Adults

Working-age women in Florida are less likely to be uninsured than working-age men. Survey data shows that the uninsurance rate for working age women is 20.7 percent as compared to 24.1 percent for men (see table).

Age: In almost every age group, women have lower rates of uninsurance than men. However, among those aged 55-64, men are less likely to be uninsured than women (uninsurance rates 12.7% vs. 14.4%). It is possible that men are more likely to be employed in later life (and, thus, have greater access to employer-based insurance), or that women are less likely to be eligible for Medicaid after reproductive age, increasing the likelihood that women between the ages of 55 to 64 will be uninsured.

Race / Ethnicity: FHIS data show that Hispanics and Blacks are generally more likely to be uninsured than other racial and ethnic groups in Florida. Within Black and Hispanic populations, gender disparities in coverage are more pronounced than the gender gaps found among whites and other races. Disparities in rates of uninsurance between men and women are compounded by racial differences. For example, Hispanic men are almost three times more likely to be uninsured than White women. Many Hispanics are not citizens or qualified aliens and therefore do not have access to public coverage.

Educational Attainment: FHIS data show that higher educational attainment is associated with lower rates of uninsurance, but women are less likely to be uninsured at all education levels. The exception is among Floridians with graduate degrees, where men have slightly lower rates of uninsurance than women.

Federal Poverty Level: Poverty is inversely related to uninsurance rates; higher income levels are associated with lower rates of uninsurance. However, regardless of income level, women are less likely to be uninsured than men. This is particularly apparent among individuals living at or below 100% of the FPL, where rates of uninsurance for men are about 12 percentage points higher than for women. This large difference is likely attributable to Medicaid’s broad eligibility categories for which women are likely to qualify more often than men.

Employment Sector: FHIS data show that workers who are self-employed, or work in the private industry, are more likely to be uninsured than those who work for the government. Regardless of the employment sector, however, women are less likely to be uninsured than men.

Firm Size: Larger firms are more likely to offer health insurance as a benefit of employment. Small firms often have a difficult time affording premiums for employees. In general, regardless of firm size, women are less likely to be uninsured than men. However, gender differences in uninsurance rates almost disappear when the firm size exceeds 500 employees. Gender differences in rates of uninsurance are more pronounced in small firms.
Figure 2 demonstrates the relationship between employment status and uninsurance. Full-time employees have the lowest rates of uninsurance compared to part-time employees and those that are unemployed. Approximately half of Florida’s unemployed have no health insurance.

In general, regardless of employment status, men are more likely to be uninsured than women. However, women not in the work force have higher rates of uninsurance than men who are not in the work force. Some of the women in this category may be homemakers who are unable to obtain health coverage through a job or spousal coverage.

Source of Health Insurance Coverage

Figure 3 breaks down health insurance coverage by type, or source, of insurance, and between men and women between ages 18-64. It should be noted that coverage sources are not mutually exclusive.

Employer-sponsored coverage, including dependent coverage, is the principal source of coverage for both women and men in Florida. A little over 55% of both groups receive employer-sponsored coverage either as an employee or as a dependent.

Women are more likely to obtain coverage as dependents. This could make women more vulnerable to coverage gaps when the spousal employer reduces benefits for family coverage, they are widowed, divorced, or their spouse becomes unemployed.

The proportion of women covered under Medicaid is much higher than that of men. This is due to Medicaid’s eligibility categories for which women are likely to qualify more often than men. If differences in Medicaid enrollment are taken into account, the gap in uninsurance rates between men and women would be reduced to one percent. Without Medicaid many women would be uninsured.

Summary: Men in Florida are more likely to be uninsured than women. With few exceptions, this trend is consistent regardless of age, race, education, poverty level, employment sector, firm size, or employment status.

Questions remain as to why men are more likely to be uninsured than women. While it is clear that Medicaid is effective in reducing the numbers of uninsured women, more research focusing on the barriers men face in securing coverage is needed. It is possible that men do not prioritize health insurance coverage in the same manner as women. Programs aimed at reducing rates of uninsurance in the state must be mindful of the gender differences in coverage.
Data Source and Methods

The findings presented in this fact sheet are based on data from the 2004 Florida Health Insurance Study. Telephone interviews were conducted between April and August of 2004 with 17,435 Florida households, collecting data on approximately 46,876 individuals under age 65. Telephone fieldwork was conducted by the Survey Research Center of the University of Florida’s Bureau of Economic and Business Research. Up to 20 phone calls were made to each household selected by random-digit dialing. Interviews were conducted in English, Spanish, or Haitian Creole, at the discretion of the interviewee. Each interview took approximately 14 minutes to complete, depending on the size of the household. A full household enumeration was implemented, and information was also obtained about health status, access and utilization of health services, and type of employment. Survey methodology details are available at http://ahca.myflorida.com/Medicaid/quality_management/mrp/Projects/fhis2004/index.shtml.

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