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**MEDIA ALERT**

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**Do the Uninsured Have Higher Mortality Rates?  
New Study Uses Faulty Methodology; Exaggerates Results**

DALLAS, TX (Sept. 17, 2009) – A new study in the *American Journal of Public Health* claiming that lack of health insurance increases the risk of death by 40% is flawed, according to the National Center for Policy Analysis. [http://www.ncpa.org/pdfs/2009\\_harvard\\_health\\_study.pdf](http://www.ncpa.org/pdfs/2009_harvard_health_study.pdf)

“The findings in this research are based on faulty methodology and the death risk is significantly overstated,” said NCPA President John C. Goodman. “The subjects were interviewed only once and the study tries to link their insurance status at that time to mortality a decade later. Yet over the period, the authors have no idea whether subjects were insured or uninsured, what kind of medical care they received, or even cause of death.”

“Being uninsured is like being unemployed,” said Goodman. “It happens to lots of people for brief periods of time. But most people who are uninsured can get insurance within 12 months. Were the people in this study uninsured for only a few months? Or, was it 10 years? Nobody knows.”

A [more careful study](#) using a similar approach by former Congressional Budget Office Director June O’Neill found that for low-income people, uninsurance increased the probability of dying by only 3% and for higher-income people uninsurance had no impact on mortality.

[http://www.ncpa.org/pdfs/06012009\\_oneill.pdf](http://www.ncpa.org/pdfs/06012009_oneill.pdf)

“There is a genuine crisis of the uninsured in this country,” Goodman said. “And, while it is better to have private insurance coverage than no health insurance at all, statistically, patients fare better with no insurance in this country than those who are insured in Canada.”

As a part of a better solution to health reform, the NCPA has produced a [five point reform plan](#):

[http://www.ncpa.org/pdfs/Five\\_Steps\\_to\\_a\\_Better\\_Health\\_Care\\_System\\_Web.pdf](http://www.ncpa.org/pdfs/Five_Steps_to_a_Better_Health_Care_System_Web.pdf)

The NCPA is also taking an active role in supporting a petition drive opposing nationalizing health care.

The petition, at <http://freeourhealthcarenow.com/>, has already been signed by over 1.3 million people.

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**Editor’s note:** *Dr. Goodman can speak about the uninsured study results. Dr. June O’Neill is also available for interviews.*

The [National Center for Policy Analysis \(NCPA\)](#) is a nonprofit, nonpartisan public policy research organization established to develop alternatives to government regulation by relying on the private sector. Topics include health care, taxes, Social Security, welfare and environmental regulation.

**Review of “Health Insurance and Mortality in U.S. Adults”  
By John C. Goodman, NCPA President and Kellye Wright Fellow**

**Faulty Methodology.** The new study in the *American Journal of Public Health* applies flawed methodology to reach overstated conclusions. The researchers interviewed the uninsured only once — and never saw them again. Ten years later, the researchers concluded the participants were still uninsured and, if they died in the interim, lack of insurance is blamed as the cause.

Yet, like unemployment, uninsurance happens to many people for short periods of time. Most people who are uninsured regain insurance within one year. The authors of the study did not track what happened to the insurance status of the subjects over the decade examined, what medical care was received or even causes of death.

The study conclusion that lack of insurance causes a 40% increase in mortality is not credible.

**Overstates the Risk of Death.** When Professor June O’Neill, former Director of the Congressional Budget Office (CBO), used a similar approach she found that the involuntarily uninsured (low-income people) were 3% more likely to die during a 14-year period than those covered by health insurance. There was no statistically significant effect on the “voluntarily uninsured” (higher income people).

**Medicaid is Worse.** The uninsured in this study are disproportionately poor, minority, high school dropouts and unemployed. Although this study ignores Medicaid, bills before Congress would try to insure this group by expanding Medicaid. The O’Neill study found that people enrolled in Medicaid have a much higher mortality rate than the uninsured. In other words, Medicaid enrollment lowers life expectancy rather than raising it.

**Canadian Health Care (the authors’ preferred system) is Worse.** The authors of this study are on record as favoring Canada’s system of single-payer national health insurance. Yet insured patients in Canada fare worse than the uninsured in the United States.

- Among US women age 40 to 64, 87% of those with insurance had a mammogram within 5 years, compared to 65% of those without insurance.
- The rate for Canadian women is 65% — the same as for uninsured women in the US.
- Canadian women also have the same rate of screening for cervical cancer as uninsured US women (80%), over five years. Among insured US women, the rate is 92%.
- Among uninsured US men, 31% were screened for prostate cancer, compared with 16% in Canada. For insured US men, the rate is 52%.