Utilization of healthcare services varies among construction workers. Many factors influence utilization patterns (such as health status, income, and age), and health insurance coverage is a leading contributor.1 Construction workers without health insurance, regardless of ethnicity, are less likely to have access to healthcare. Hispanic workers lag far behind white, non-Hispanic workers in healthcare access, but the disparities were reduced among those with health insurance coverage.2,3

In 2010, about 63% of uninsured Hispanic construction workers did not have a usual source of care when sick compared to 52% of uninsured white, non-Hispanic workers and 15% of insured Hispanics (chart 55a). In the same year, 7.4% of uninsured Hispanics usually visited the hospital emergency room for healthcare when sick compared to less than 1% of Hispanics with health insurance (chart 55b).

Having health insurance also affects frequency of care; construction workers without health insurance have fewer visits to healthcare providers. In 2010, 59% of uninsured Hispanic construction workers had not seen a doctor or health professional in more than 12 months compared to just 22% of insured Hispanics and 18% of insured white, non-Hispanics (chart 55c). As a result, more than half (53%) of uninsured Hispanic workers did not receive any preventive care in the entire year compared to only 11% of insured Hispanic workers (chart 55d).

In terms of medical expenditures,4 or the payments made to healthcare providers and institutions, the ethnic difference was small among insured workers but striking when comparing insured and uninsured workers: an uninsured Hispanic worker spent $219 for healthcare on average in 2010, only 10% of the amount spent by an insured Hispanic worker (chart 55e). In addition, uninsured Hispanic workers spent just 22% of the average amount spent by uninsured white, non-Hispanic workers.

Health expenditures are affected by health insurance coverage and increase with age, particularly among workers of middle- and older-ages (chart 55f). Medical expenditures soared after workers reached age 65, when almost all were eligible for Medicare. This suggests that uninsured older workers may delay health services until they are covered by Medicare, which may lead to worse overall health and higher costs later in life.5,6 Given that retirement is a time when many workers experience a loss of employment-based health insurance, workers nearing age 65 may be at higher risk for lack of healthcare access.

The data used for this page were obtained from the National Health Interview Survey (NHIS) and the Medical Expenditure Panel Survey (MEPS). The NHIS provides more detailed information on health behaviors, while the MEPS data cover healthcare use, expenditures, and sources of payment.

References:

4. Medical expenditures include payments from all sources to hospitals, physicians, other medical care providers, and pharmacies for services received for medical conditions reported by respondents. Sources include direct payments from individuals, private insurance, Medicare, Medicaid, workers’ compensation, and miscellaneous other sources. Expenditures for hospital-based services include those for both facility and separately billed physicians’ services. Over-the-counter drugs, alternative care services, or telephone contacts with medical providers are not included.
55a. Percentage of construction workers who had no consistent place to receive care when sick, by insurance status and Hispanic ethnicity, 2010

55b. Percentage of construction workers using hospital emergency rooms when sick, by insurance status and Hispanic ethnicity, 2010

55c. Percentage of construction workers whose last contact with a doctor or other health professional was more than one year ago, by insurance status and Hispanic ethnicity, 2010

55d. Percentage of construction workers who did not receive preventive care of any kind within the past 12 months, by insurance status and Hispanic ethnicity, 2010

55e. Average medical expenditures among construction workers, by insurance status and Hispanic ethnicity, 2010

55f. Average medical expenditures among construction workers, by insurance status and age group, 2010

Note: All charts - Data cover all employment.
Source: Charts 55a-55d - National Center for Health Statistics. 2010 National Health Interview Survey. Calculations by CPWR Data Center.