

**Title: Lack of Care for those who Serve: Healthcare Coverage and Access among US Veterans, 2019**

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## **Abstract**

More than 9 million veterans are enrolled in the Veterans Health Administration, but many are not eligible, and earlier studies found that many remain uninsured. We examined veterans' insurance coverage and measures of access to care by analyzing the 2019 Behavioral Risk Factor Surveillance System. Our study population included 53,230 veterans, representing 25.7 million individuals nationwide. Most (88.1%) were male, and their mean age was 56.6 years. 6.0% of veterans (weighted N=1.5 million) were uninsured in 2019, but the proportion was substantially higher in some states (e.g. Texas, with 10.4% uninsured). 2 million veterans (7.9% of veterans) went without needed medical care due to cost; the proportion was higher among those with heart disease (9.6%) and COPD (12.5%). Many uninsured veterans went without recommended care: 17.3% had not had a check-up in the previous 5 years; less than half had a personal doctor; 29.0% had received an influenza vaccine in the previous year; and (among those for whom it was indicated) only 38.3% had ever had a pneumonia vaccine. Three years into the Trump administration, and a decade following passage of the Affordable Care, the goal of universal coverage for veterans is unachieved.

## **Background**

More than 9 million veterans are enrolled in the Veterans Health Administration (VA).(1) However, millions of other veterans are not eligible for VA coverage. While some are covered by other insurance, earlier studies have found that many remain uninsured,(2) even in the wake of the Affordable Care Act.(3) We examined veterans' insurance coverage and measures of access to care in 2019.

## **Methods**

We analyzed the 2019 Behavioral Risk Factor Surveillance System (BRFSS), the nation's largest public health survey, conducted annually by the Centers for Disease Control (CDC) in cooperation with US states and territories. We identified veterans based on the question, "Have you ever served on active duty in the United States Armed Forces, either in the regular military or in a National Guard or military reserve unit"?

We tabulated uninsurance rates among veterans overall, by age, and by state. We also examined coverage rates among veterans with 6 chronic medical conditions: coronary artery disease (CAD); stroke; chronic obstructive pulmonary disease (COPD); diabetes; current asthma; and kidney disease. Additionally, we tabulated the number and share of veterans who responded affirmatively when asked if there was "a time in the past 12 months when you needed to see a doctor but could not because of cost?"

To assess whether veterans' lack of insurance coverage interfered with their ability to obtain medical care, we also assessed four other measures of access to care by coverage status: 1) time since last checkup; 2) having a personal doctor; 3) receiving an influenza vaccination in the past year (which is recommended for most people); and (4) having ever received a pneumonia vaccination (among older persons or those with chronic illness).

The CDC provides BRFSS survey weights to produce nationally-representative estimates. Our analyses used these, and Stata/SE 16.1 procedures that account for the survey's complex sampling.

## **Results**

The BRFSS surveyed 53,230 veterans, representative of 25.7 million individuals nationwide in 2019. Their average age was 56.6 years, and most (88.1%) were male.

One and a half million veterans (6.0% of all veterans) were uninsured in 2019 (Table 1). The proportion uninsured was higher (8.7%) among non-elderly (<65 years old) veterans, and similar or slightly lower among those with chronic conditions. Texas was the state with the largest number of uninsured veterans (weighted N=246,086), or 10.4% of all veterans living in the state, an uninsurance rate second only to Mississippi's (Table 2).

Two million veterans (7.9% of all veterans) reported going without needed care due to cost (Table 1). Rates of foregone medical care were higher among non-elderly veterans (10.7%) and among those with several medical conditions (e.g. 9.6% of veterans with heart disease and 12.5% of those with COPD).

Uninsured veterans were also less likely than insured veterans to receive most types of recommended care, as shown in Table 3. More than one in six uninsured veterans had not had a

check-up in the past 5 years, compared to only 2.9% of veterans with insurance. Less than a third (29.0%) of uninsured veterans had received an influenza vaccine in the past year, and only 38.3% of those needing pneumonia vaccination had ever received one. Less than half (47.7 %) of uninsured veterans had a personal doctor.

### **Discussion:**

In 2019, 1.5 million veterans remained uninsured and 2.0 million went without needed care due to cost. The numbers were generally higher in states such as Texas and Mississippi that have rejected the ACA's Medicaid expansion. Uninsured veterans often reported that they could not afford needed medical care, and failed to receive important clinical preventive services.

Veterans can be uninsured for several reasons. Those who serve for less than two consecutive years, or have an “other than honorable” discharge, may not be eligible for VA benefits. Moreover, eligibility status is prioritized according to a history of service-related injuries and income, among other factors,(5) and those in lower priority groups may be denied services. Some veterans may also be unaware of their current eligibility for VA benefits, either because they have never applied, or because they have been rejected in the past. Finally, low-income men, particularly those not living with young children, may lack the option of Medicaid coverage if they reside in a state that rejected the ACA Medicaid expansion.

Lack of coverage compromises medical care access and use for veterans, as it does for the general population. Low rates of influenza and pneumonia vaccination among uninsured veterans (many of whom are older men) raise particular concerns during the COVID-19 pandemic. Many uninsured veterans are vulnerable to severe COVID-19, and their rates of vaccination for influenza and pneumonia suggest that they may have poor access to a COVID-19 vaccine should one become available. Although the Trump administration has promised that COVID-19 vaccines will be free-at-point-of-use, providers may charge an administration fee which could serve as a barrier for uninsured veterans.

Our study has limitations. BRFSS interviewers are instructed to inform participants “as necessary” that “active duty” excludes those who only underwent training in the National Guard; nonetheless, some individuals we identified as veterans probably had served only in the National Guard or Reserves. Additionally, the BRFSS question's wording does not clearly exclude those currently serving in the military (although none of these would be uninsured). For these reasons, our study identifies more veterans than previous research defining veterans based on narrower questions such as those in some Census Bureau surveys.

Three years into the Trump administration, and ten years after passage of the ACA, the goal of universal coverage for veterans(2) remains unachieved.

**Table 1: Health coverage and access among US veterans, 2019 BRFSS**

	Uninsured % (number)	Unable to afford a doctor visit % (number)
All veterans	6.0 (1,532,329)	7.9 (2,023,129)
Age		
Under 65	8.7 (1,284,822)	10.7 (1,586,152)
65 and older	2.3 (247,507)	4.0 (436,977)
Medical conditions*		
Coronary artery disease†	4.4 (153,368)	9.6 (329,903)
Stroke	6.5 (95,063)	13.3 (193,889)
COPD‡	6.0 (151,149)	12.5 (316,378)
Diabetes§	3.8 (158,654)	8.1 (335,883)
Current Asthma	6.2 (96,795)	14.6 (229,130)
Kidney Disease	5.4 (63,171)	8.6 (101,505)

\* Defined by reported diagnosis from a health professional

† Defined as a diagnosis of a heart attack, angina, or coronary heart disease.

‡ Defined as a diagnosis of COPD, chronic bronchitis, or emphysema

§ Excludes those with diabetes during pregnancy, as well as those with “pre-diabetes or borderline diabetes”

**Table 2: Number and Percent of US Veterans Uninsured in 2019, by State/Territory**

State/territory	Percent [95% CI]	Weighted N [95% CI]
Alabama	8.2 [5.9,11.3]	39,997 [26,172, 53,822]
Alaska	3.8 [2.2,6.6]	3,643 [1,626, 5,660]
Arizona	5 [3.2,7.6]	32,415 [18,027, 46,804]
Arkansas	10.2 [7.0,14.6]	27,824 [16,811, 38,838]
California	5.0 [3.4,7.2]	114,464 [69,458, 159,470]
Colorado	4.3 [3.1,6.0]	20,101 [13,345, 26,858]
Connecticut	5.5 [3.6,8.3]	13,406 [7,546, 19,266]
Delaware	7.8 [5.0,12.2]	7,542 [4,003, 11,081]
District of Columbia	5.9 [3.0,11.2]	1,932 [618, 3,246]
Florida	5.5 [4.1,7.4]	117,699 [82,148, 153,250]
Georgia	7.1 [4.9,10.2]	69,128 [43,367, 94,889]
Hawaii	3.8 [2.6,5.5]	6,181 [3,815, 8,548]

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Idaho	7.6 [5.1,11.2]	12,229 [7,315,17,143]
Illinois	6.9 [4.5,10.7]	53,940 [29,288, 78,593]
Indiana	4.9 [3.5,6.9]	24,497 [15,896, 33,099]
Iowa	4.4 [3.2,6.0]	10,552 [7,186, 13,917]
Kansas	6.1 [4.5,8.2]	14,730 [10,085, 19,374]
Kentucky	4.2 [2.3,7.4]	15,444 [6,281, 24,606]
Louisiana	5.8 [3.5,9.3]	22,228 [11,059, 33,398]
Maine	5.6 [3.9,7.8]	7,055 [4,516, 9,595]
Maryland	2.4 [1.7,3.4]	11,417 [7,517, 15,316]
Massachusetts	3.4 [1.9,5.8]	13,489 [5,759, 21,220]
Michigan	6.5 [4.8,8.9]	50,186 [33,841, 66,531]
Minnesota	5.5 [4.3,7.1]	21,894 [16,164, 27,624]
Mississippi	11.1 [7.2,17.0]	27,887 [14,681, 41,093]
Missouri	3.9	20,844

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	[2.6,5.7]	[12,629, 29,059]
Montana	5.7 [4.2,7.8]	6,443 [4,383, 8,503]
Nebraska	6.3 [4.9,8.1]	9,993 [7,387, 12,598]
Nevada	5.7 [2.9,10.8]	16,144 [5,061, 27,227]
New Hampshire	3.8 [2.2,6.6]	4,731 [2,024, 7,437]
New Mexico	5.6 [3.6,8.6]	9,386 [5,153, 13,619]
New York	5.1 [3.6,7.2]	55,896 [35,961, 75,831]
North Carolina	6.0 [4.0,8.8]	63,183 [37,370, 88,996]
North Dakota	3.8 [2.1,6.7]	2,584 [1,024,4,144]
Ohio	5.3 [3.8,7.5]	48,382 [31,158, 65,607]
Oklahoma	5.1 [3.4,7.6]	19,202 [11,125, 27,280]
Oregon	3.2 [2.1,4.9]	11,762 [6,755, 16,770]
Pennsylvania	4.6 [2.9,7.3]	46,348 [24,252, 68,445]
Rhode Island	6.4 [3.4,11.8]	5,007 [1,688, 8,325]

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South Carolina	6.3 [4.6,8.5]	34,165 [23,302, 45,028]
South Dakota	5.6 [3.4,9.1]	4,481 [2,177, 6,785]
Tennessee	7.2 [4.8,10.6]	43,709 [25,708, 61,710]
Texas	10.4 [7.6,14.2]	246,086 [163,821, 328,351]
Utah	4.7 [3.3,6.7]	8,121 [5,129, 11,113]
Vermont	5.1 [3.4,7.6]	2,549 [1,498,3,599]
Virginia	4.6 [3.3,6.4]	42,954 [28,027, 57,880]
Washington	4.2 [3.1,5.7]	29,833 [20,702, 38,964]
West Virginia	5.6 [3.5,8.9]	9,345 [4,810, 13,881]
Wisconsin	8.6 [5.4,13.3]	37,684 [19,513, 55,854]
Wyoming	7.0 [4.6,10.6]	4,123 [2,336, 5,910]
Guam	7.4 [5.1,10.7]	1,419 [880,1,958]
Puerto Rico	8.1 [4.1,15.5]	8,073 [2,366,13,779]

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**Table 3: Healthcare utilization and indicators of access to care among veterans by coverage status, 2019**

	Coverage Status	
	Insured % (95% CI)	Uninsured % (95% CI)
Time since last checkup*		
<1 yr	86.9 [86.2,87.5]	55.7 [51.5,59.8]
1-2yrs	6.7 [6.3,7.2]	14.2 [11.5,17.4]
2-5yrs	3.3 [3.0,3.7]	12.2 [9.4,15.8]
5+ yrs	2.9 [2.6,3.2]	17.3 [14.6,20.4]
Never	0.2 [0.2,0.3]	0.6 [0.3,1.0]
Personal doctor†	83.8 [83.1,84.5]	47.7 [43.6,51.9]
Influenza vaccination‡	57.5 [56.6,58.4]	29.0 [25.0,33.3]
Pneumonia vaccination§	67.1 [66.1,68.1]	38.3 [32.3,44.7]

\*Defined by the question: “About how long has it been since you last visited a doctor for a routine checkup? [A routine checkup is a general physical exam, not an exam for a specific injury, illness, or condition.]”

† Defined by the question: “Do you have one person you think of as your personal doctor or health care provider?”. Includes those with only one or more than one providers.

‡ Defined by the question:

“During the past 12 months, have you had either flu vaccine that was sprayed in your nose or flu shot injected into your arm?”

§ Defined by the question:

“Have you ever had a pneumonia shot also known as a pneumococcal vaccine?”. Percentages are of those who meet CDC Advisory Committee on Immunization Practices criteria for pneumococcal vaccination,(4) including adults  $\geq 65$  and adults of any age with heart disease (excludes hypertension), chronic lung disease (includes both COPD and current asthma), diabetes mellitus, and cigarette smoking. We excluded former smokers. We were unable to include those with multiple other conditions recommended for pneumococcal vaccination under these guidelines (e.g. HIV or solid organ transplant) given lack of appropriate questions in the BRFSS. We also excluded those with “kidney disease” given lack of specificity of the BRFSS’ question on this condition. Finally, we excluded those with cancer given lack of data on state of treatment of the cancer.

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