

A Profile of Alabama's Low-Wage Uninsured Workers

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The recently enacted American Rescue Plan Act of 2021 (ARP) includes new large financial incentives for states to extend health insurance coverage to low-wage workers and other adults earning less than \$17,775 a year.¹ These incentives apply to regular spending in a state's Medicaid program and offer a five-percentage point across the board increase in the federal share for a 24-month period after the state extends coverage. The Kaiser Family Foundation estimates that Alabama's budget would see a net gain of \$540 million over a two-year period if the state expanded Medicaid.² Approximately 204,100 uninsured non-elderly adults, or 49 percent of the state's uninsured adult population, would gain health insurance.³

This fact sheet examines which workers and industries would benefit from expansion of Medicaid coverage.⁴ The top three industry sectors employing low-wage uninsured workers are hospitality, retail, and health care and social assistance, accounting for approximately 47 percent of those working without insurance; these industry sectors include businesses such as restaurants, general merchandise stores (such as warehouse clubs and supercenters), and nursing care facilities (see Table 1). The most common jobs for low-wage, uninsured workers are *cashiers, cooks, freight and stock laborers, and maids and housekeeping staff* (see Table 2).



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Table 1. Top Industry Sectors in Alabama

| For Low-Wage Workers | | For Low-Wage, Uninsured Workers | |
|---|-------|---|-------|
| Retail trade | 16.9% | Accommodation and food services | 19.0% |
| Accommodation and food services | 15.5% | Retail trade | 16.2% |
| Health care and social assistance | 12.8% | Health care and social assistance | 11.4% |
| Manufacturing | 10.2% | Manufacturing | 11.0% |
| Construction | 7.1% | Construction | 10.1% |
| Administrative, support, and waste management | 7.0% | Administrative, support, and waste management | 9.3% |
| Education services | 6.5% | Other services (except public administration) | 5.6% |
| Other services (except public administration) | 5.5% | Transportation and warehousing | 3.0% |

Table 2. Top Occupations in Alabama

| For Low-Wage Workers | | For Low-Wage, Uninsured Workers | |
|--|------|--|------|
| Cashiers | 7.4% | Cashiers | 9.4% |
| Cooks | 3.7% | Cooks | 4.9% |
| Stockers and order fillers | 3.2% | Laborers and freight, stock, and material movers | 3.5% |
| Retail salespersons | 2.9% | Maids and housekeeping cleaners | 3.3% |
| Waiters and waitresses | 2.8% | | |
| Janitors and building cleaners | 2.6% | | |
| Laborers and freight, stock, and material movers | 2.6% | | |
| First-line supervisors of retail sales workers | 2.6% | | |
| Nursing assistants | 2.5% | | |
| Maids and housekeeping cleaners | 2.3% | | |

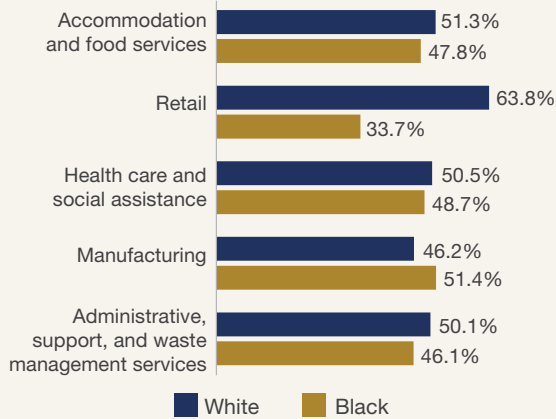
Note: Workers with no occupation are not listed.

Source: Georgetown University Center for Children and Families analysis of US Census Bureau American Community Survey (ACS) 2019 Public Use Microdata Sample (PUMS).

Demographics of uninsured low-income adults

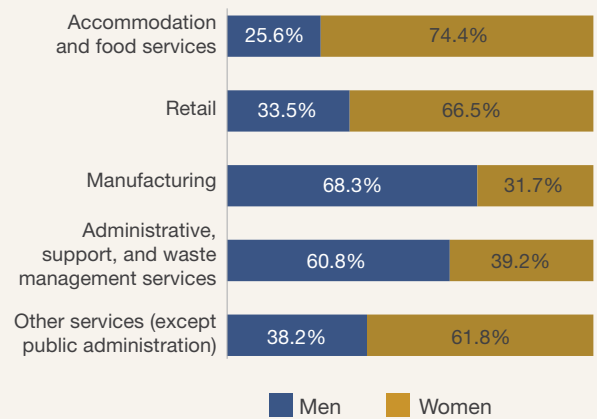
Our analysis finds that women make up a disproportionate share of low-income, non-elderly adult citizens in Alabama (60 percent) and account for 55 percent of those who are uninsured. In Alabama, 58 percent of uninsured low-income citizens are White, 39 percent are Black, and the remainder describe themselves in other categories including American Indian, Asian/Pacific Islander, or multi-racial. Approximately two percent of low-income citizen non-elderly adults identify as Hispanic/Latino.⁵ As Figure 1 illustrates, all of the top industry sectors with the greatest number of low-wage uninsured workers have a majority of White workers except for manufacturing. Figure 2 shows that the hospitality, retail, and service industries employ more uninsured, low-wage women, while manufacturing, and administrative, support, and waste management services employ more uninsured, low-wage men.

Figure 1. Race of Low-Wage, Uninsured Workers in Top Industry Sectors



Source: Georgetown University Center for Children and Families analysis of U.S. Census Bureau American Community Survey (ACS) 2019 Public Use Microdata Sample (PUMS).⁶

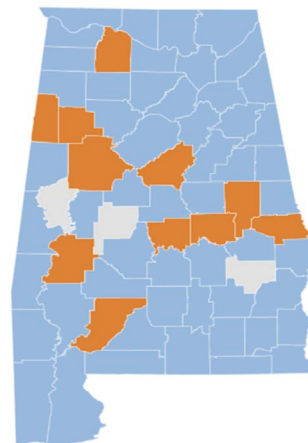
Figure 2. Gender of Low-Wage, Uninsured Workers in Top Industry Sectors



Source: Georgetown University Center for Children and Families analysis of U.S. Census Bureau American Community Survey (ACS) 2019 Public Use Microdata Sample (PUMS).⁷

Which parts of the state have higher proportions of uninsured workers?

The map on the right shows the range of uninsured rates for all non-elderly adult workers across the state of Alabama, ranging from 7.4 percent in Shelby County to 19.2 percent in DeKalb County. Table 3 lists eleven counties with high proportions of uninsured workers, each with more than 15 percent of non-elderly employed adults lacking insurance. The counties are a mix of rural counties and those with small cities and towns.



Uninsured Rate for Non-Elderly Workers
 Light Blue: Between 10-20%
 Orange: Lower than 10%

Note: Includes all workers ages 19-64 regardless of income or citizenship status.

Source: Georgetown University Center for Children and Families analysis of US Census Bureau American Community Survey (ACS) 2015-2019 Table DP03. Grey counties indicate that estimate is suppressed due to high margin of error and low-reliability. Contact authors for more information on the methodology.

Table 3. Counties with High Uninsured Rates for Non-Elderly Adults

Note: Includes all workers ages 19-64 regardless of income or citizenship status.
 Source: Georgetown University Center for Children and Families analysis of US Census Bureau American Community Survey (ACS) 2015-2019 Table DP03.⁸

| County | Uninsured Rate |
|---------------|----------------|
| United States | 11.0% |
| Alabama | 12.1% |
| DeKalb | 19.2% |
| Dale | 18.2% |
| Clay | 18.1% |
| Geneva | 18.1% |
| Marshall | 18.0% |

| County | Uninsured Rate |
|---------|----------------|
| Chilton | 17.7% |
| Russell | 17.1% |
| Conecuh | 16.9% |
| Henry | 15.7% |
| Winston | 15.5% |
| Cullman | 15.3% |

Endnotes

¹ For more information on the provisions of the law, see E. Park and S. Corlette, “American Rescue Plan Act: Health Coverage Provisions Explained” (Washington DC: Georgetown University Center for Children and Families and Center on Health Insurance Reform, March 2021), available at <https://ccf.georgetown.edu/2021/03/11/american-rescue-plan-act-health-coverage-provisions-explained/>.

² R. Rudowitz, B. Corallo, and R. Garfield, “New Incentive for States to Adopt the ACA Medicaid Expansion: Implications for State Spending” (Washington DC: Kaiser Family Foundation, March 2021), available at <https://www.kff.org/medicaid/issue-brief/new-incentive-for-states-to-adopt-the-aca-medicaid-expansion-implications-for-state-spending/>.

³ Kaiser Family Foundation, “Who Could Medicaid Reach with Expansion in Alabama?” (Washington DC: Kaiser Family Foundation, February 2021), available at <https://files.kff.org/attachment/fact-sheet-medicaid-expansion-AL>.

⁴ Contact authors for more information on sources of data and methods. All data are derived from the American Community Survey (2019) most from the Public Use Microdata Sample; county data calculated from American Community Survey five-year (2015-2019) prepared tables.

⁵ The American Community Survey measures race and ethnicity as two separate facets of an individual’s identity. Hispanic/Latino individuals can be of any race.

⁶ Estimates for the share of low-wage workers in each industry sector who are American Indian/Alaska Native, Asian/Native Hawaiian or Pacific Islander, and Two or More Races/Some Other Race are suppressed due to small sample sizes and low-reliability. Contact authors for more information on the methodology.

⁷ Estimates for health care and social assistance industry as well as construction industry suppressed due to small sample size and low-reliability in one category. Contact authors for more information on the methodology.

⁸ Out of Alabama’s 67 counties, three county estimates were suppressed due to high margins of error and low-reliability. Suppression rules did result in the exclusion of Bullock County, which may have an uninsured rate for non-elderly workers higher than 15 percent. Contact authors for more information on the methodology.