

A Profile of Georgia'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 Georgia's budget would see a net gain of \$710 million over a two-year period if the state expanded Medicaid.² Approximately 452,600 uninsured non-elderly adults, or 39 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 administrative, support, and waste management, accounting for approximately 44 percent of those working without insurance; these industry sectors include businesses such as restaurants, general merchandise stores (such as warehouse clubs and supercenters), and building services (such as janitorial services) (see Table 1). The most common jobs for low-wage, uninsured workers are cashiers, cooks, maids and housekeeping staff, waiters/waitresses, and freight and stock laborers (see Table 2).



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Table 1. Top Industry Sectors in Georgia

For Low-Wage Workers		For Low-Wage, Uninsured Workers	
Retail	15.7%	Accommodation and food services	17.5%
Accommodation and food services	15.6%	Retail	17.0%
Health care and social assistance	10.9%	Administrative, support, and waste management	9.8%
Manufacturing	8.7%	Construction	9.4%
Administrative, support, and waste management	8.5%	Manufacturing	8.5%
Educational services	6.3%	Health care and social assistance	7.9%
Construction	5.9%	Other services (except public administration)	6.1%
Other services (except public administration)	5.6%	Transportation and warehousing	3.5%
Transportation and warehousing	4.9%	Educational services	3.4%
Professional, scientific, and technical services	3.0%	Professional, scientific, and technical services	2.3%

Table 2. Top Occupations in Georgia

For Low-Wage Workers		For Low-Wage, Uninsured Workers	
Cashiers	5.5%	Cashiers	6.8%
Cooks	4.1%	Cooks	5.0%
Laborers and freight, stock, and material movers, hand	3.2%	Maids and housekeeping cleaners	3.8%
Waiters and waitresses	3.1%	Waiters and waitresses	3.7%
Customer service representatives	3.0%	Laborers and freight, stock, and material movers, hand	3.5%
Maids and housekeeping cleaners	2.8%	Construction laborers	3.4%
Retail salespersons	2.8%	Retail salespersons	3.0%
Janitors and building cleaners	2.6%	Customer service representatives	2.9%
Driver/sales workers and truck drivers	2.4%	Janitors and building cleaners	2.6%
Construction laborers	2.1%	Driver/sales workers and truck drivers	2.4%

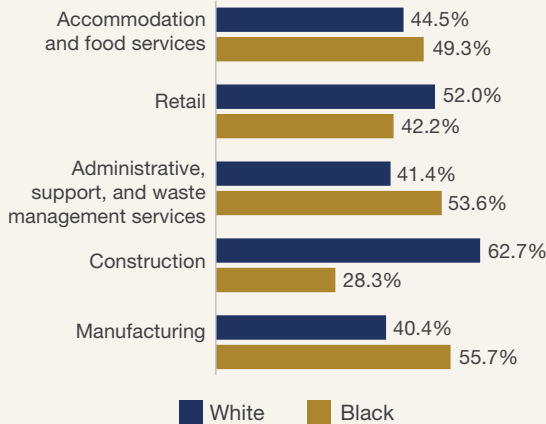
Note: Workers with no occupation are not listed.

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

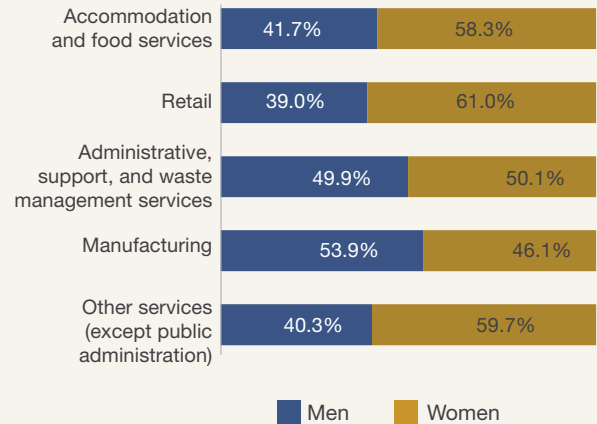
Our analysis finds that women make up a disproportionate share of low-income, non-elderly Georgians (60 percent) and account for 54 percent of low-income, non-elderly citizens who are uninsured. In Georgia, 48 percent of uninsured low-income citizens are White, 46 percent are Black, and the remainder describe themselves in other categories including American Indian, Asian/Pacific Islander, or multi-racial. Approximately six percent of low-income citizen non-elderly adults identify as Hispanic/Latino.⁵ As Figure 1 illustrates, different areas of the economy have different racial compositions for low-wage uninsured workers. Figure 2 shows that women make up the majority of the top two industries for low-wage, uninsured workers, hospitality and retail.

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 that the uninsured rate for all non-elderly adult workers varies considerably across the state of Georgia, ranging from 6.8 percent in Harris County to 35.1 percent in Atkinson County. Table 3 lists the nine counties with the highest proportion of uninsured workers, each with between one-quarter and one-third of non-elderly employed adults lacking insurance. All of these counties are rural counties underscoring other research findings that Medicaid expansion would greatly benefit rural areas.⁸

Uninsured Rate for Non-Elderly Workers

- Above 20%
- Between 10-20%
- 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.

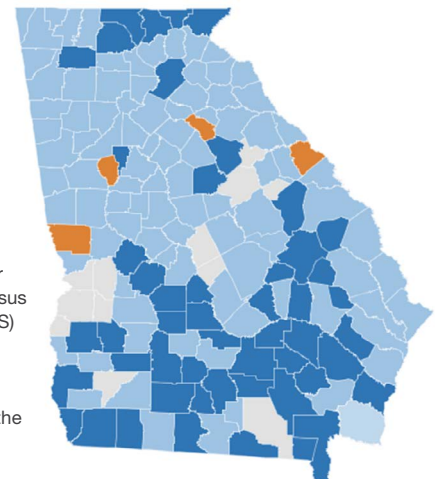


Table 3. Nine Counties with the Highest Rates for Non-Elderly Adults

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. Out of Georgia's 159 counties, 12 county estimates were suppressed due to high margins of error and low-reliability. Suppression rules did not affect the top nine presented in this figure. Contact authors for more information on the methodology.

County	Uninsured Rate
United States	11.0%
Georgia	15.8%
Atkinson	35.1%
Wheeler	35.1%
Candler	34.6%
Treutlen	33.5%

County	Uninsured Rate
Berrien	31.5%
Gilmer	31.0%
Colquitt	30.1%
Decatur	27.2%
Jeff Davis	27.1%

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 Georgia?” (Washington DC: Kaiser Family Foundation, February 2021), available at <https://files.kff.org/attachment/fact-sheet-medicaid-expansion-GA>.

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

⁸ J. Hoadley, J. Alker, and M. Holmes, “Health Insurance Coverage in Small Towns and Rural America: The Role of Medicaid Expansion” (Washington DC: Georgetown University Center for Children and Families, September 2018), available at <https://ccf.georgetown.edu/2018/09/25/health-insurance-coverage-in-small-towns-and-rural-america-the-role-of-medicaid-expansion/>.