

■ **IMMIGRANTS ARE LESS LIKELY TO HAVE HEALTH INSURANCE ...**

Nationally, about two-thirds (66%) of foreign-born adults have health insurance, compared to 87% of native-born adults. In California, the percentages are 72% and 89%, respectively. In Los Angeles County – the most populous county in California – immigrants are far less likely than the native-born to have health insurance (59% compared to 83%). Immigrants in the county are more likely to work in jobs that do not provide health insurance – 43% have employer-provided insurance and 10% have public insurance (compared to 60% and 13%, respectively, for natives). Eligibility for public health insurance depends on [legal immigration status](#).

■ **... AND LESS LIKELY TO USE HEALTH CARE SERVICES.**

Statewide, [immigrants](#) are less likely than the native-born to have a usual source of health care and they report fewer doctor visits. In Los Angeles County, 25% of immigrants have never had a medical checkup, and 11% have never been to a doctor. Among the native-born in the county, the respective figures are 13% and 5%. Use rates are even lower among [illegal immigrants](#) in the county: 32% have never had a checkup and 17% have never been to a doctor.

■ **BY MANY MEASURES, IMMIGRANTS ARE HEALTHIER THAN U.S.-BORN RESIDENTS.**

State-level comparisons show that, on average, immigrants enjoy lower rates of various chronic diseases than their native-born counterparts and have longer life expectancies (82 years vs. 77 years). Possible reasons for these differences include the self-selection of healthy people to immigrate, the maintenance of healthy diets and behaviors, and the existence of immigrant networks that provide information and informal health care.

■ **IMMIGRANTS INCUR LOWER HEALTH CARE COSTS.**

Largely because of their lower use rates, immigrants incur lower health expenditures than natives. Nationwide, per-capita immigrant health care expenditures are roughly half of those for natives. This is true overall, for the uninsured, and for the publicly insured. Health care expenditures among immigrant children are 74% lower than among native-born children. The exception is emergency department (ED) visits for children: Although foreign-born children have fewer ED visits than native-born children, their overall per-capita ED expenditures are more than three times higher.

■ **IMMIGRANTS PAY MORE OF THEIR OWN MONEY FOR HEALTH CARE.**

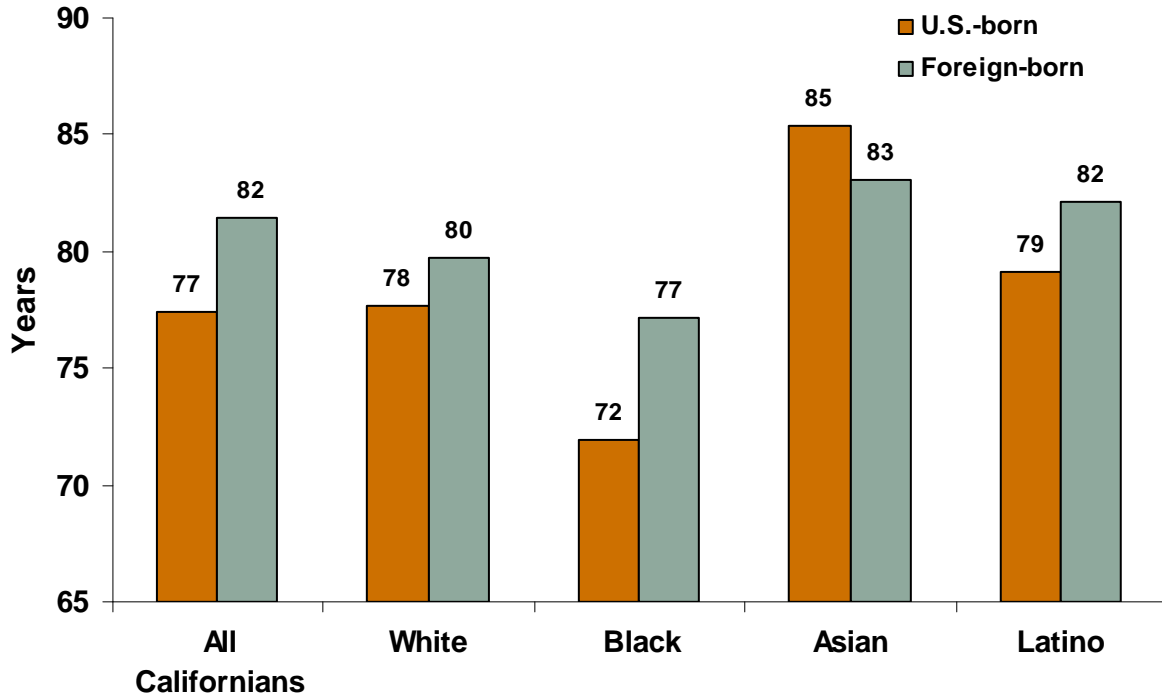
In Los Angeles County, 21% of the medical costs among immigrants are paid for with public money, compared to 28% among the native-born. Because of their lower rates of health care coverage, immigrants pay 28% of their costs out-of-pocket, compared to 20% for the native-born. Undocumented immigrants pay 36% of their medical costs out-of-pocket and 23% of their costs with public money.

■ **MOST CALIFORNIANS OPPOSE PROVIDING HEALTH CARE COVERAGE FOR ILLEGAL IMMIGRANTS.**

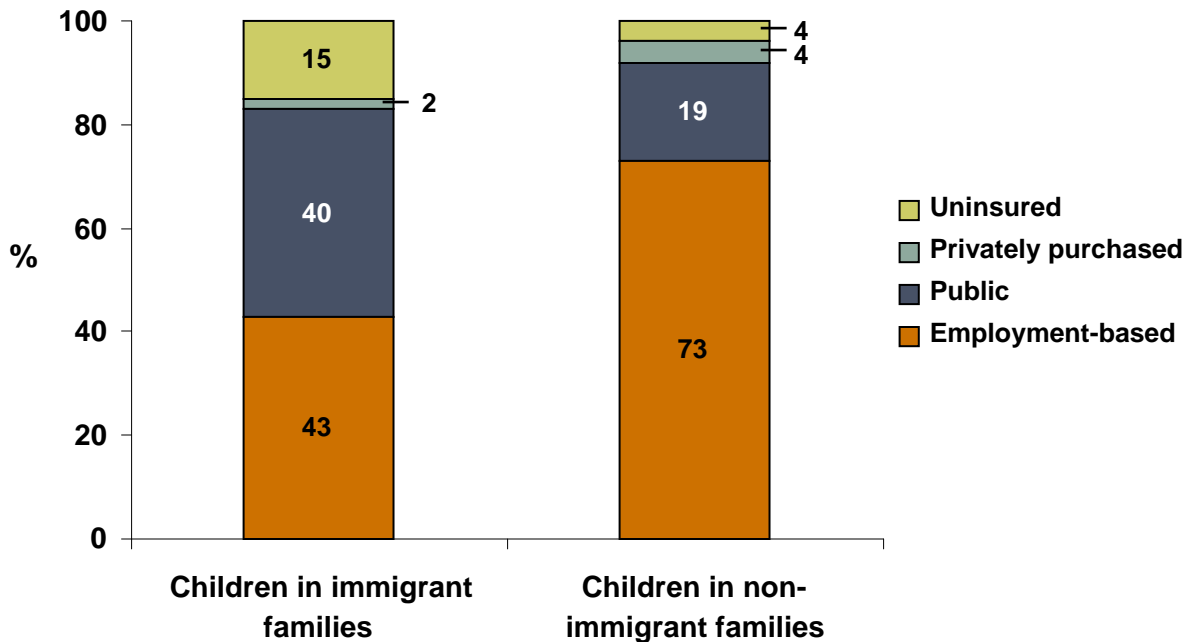
When asked in March 2007 about providing health care coverage for illegal immigrants, a majority (53%) of California residents opposed the idea, while 43% favored it.



Life Expectancies for Race/Ethnic Groups in California by Nativity, 2000



Source of Health Insurance for California Children, 2001



Sources: National Health Interview Survey. Medical Expenditure Panel Survey. California Health Information Survey. Los Angeles Family and Neighborhood Survey. California Department of Health Services. U.S. Census Bureau. Center for Immigration Studies. Lee and McConville, *Death in the Golden State: Why Do Some Californians Live Longer?*, PPIC, 2007. *PPIC Statewide Survey, March 2007*.

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