

Medical Debt in LA County

Update - January 2024

Medical Debt Burden Increases in Los Angeles County to More Than \$2.9 billion in 2022

The Los Angeles (LA) County Department of Public Health has completed an updated analysis of [our previous report](#) on medical debt in LA County using recently released data from the [California Health Interview Survey \(CHIS\)](#).

Medical debt continues to burden

1 in 10
LA County adults



Medical debt remains a crucial public health issue in LA County that affected approximately one in ten adults, or approximately 785,000 LA County adults in 2022.

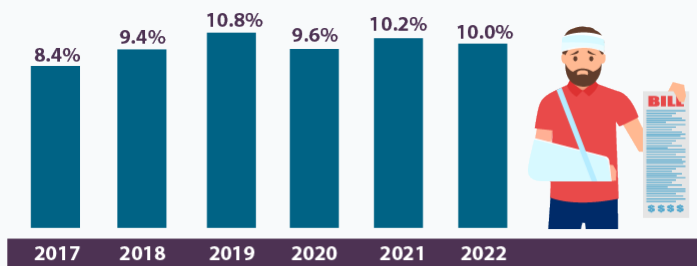
10% increase
in amount of
Medical Debt

2021

2022



This increase is about
\$300 million dollars



Medical Debt continues to affect about 10% of adults

Total medical debt burden increased from 2021 to 2022 by approximately \$300 million and is now estimated to be greater than \$2.9 billion.

Even with expanding insurance coverage and Public Health Emergency for COVID-19 protections, the medical debt burden for LA County adults has not decreased from 2017-2022.

The LA County Board of Supervisors has recently passed a [motion](#) aimed at reducing medical debt for county residents by requiring data collection on debt and financial assistance activities, identifying best practices and developing new policies to reduce medical debt, as well as purchasing and retiring residents' medical debt for a fraction of the price.

Summary of Medical Debt Burden in LA County

- Medical debt continues to burden 1 in 10 LA County adults.
- The prevalence of medical debt (10.0%) is comparable to other public health priorities, such as asthma (8.5%) and type 2 diabetes (11.9%).
- Medical debt burden in LA County increased from over \$2.6 billion in 2021 to over \$2.9 billion dollars in 2022.
- Approximately half (53.8%) of adults with medical debt burden took on credit card debt to pay medical bills.
- Medical debt burden continues to disproportionately affect Latino, Black, and American Indian/Alaska Native, Native Hawaiian/Pacific Islander, and multiracial adults, adults with lower incomes, and families with children.
- Medical debt for adults varied by insurance status with 9.1% of those with Medi-Cal experiencing medical debt, 8.4% with private insurance, and 5.5% with Medicare. Over one quarter (27.1%) of those uninsured were burdened by medical debt.
- Adults with Medi-Cal were 2 times more likely to be burdened with medical debt, those with private insurance were 2.5 times more likely to be burdened, and those with no insurance were over 8 times more likely to be burdened than those with Medicare.
- Adults with medical debt burden are 2-3.5 times more likely to be food insecure, delay or forgo needed healthcare, delay or forgo prescriptions, and be unstably housed than those without medical debt burden.
- Adults with at least one in-patient stay in the past year were over 2.5 times more likely to be burdened with medical debt than those who had no hospital stays. Adults with at least one emergency room (ER) visit in the past year were approximately twice as likely to be burdened as those without ER visits.
- Adults who reported having had COVID-19 were 26% more likely to be burdened with medical debt than those who did not.
- Despite the uninsured prevalence decreasing approximately 13% from 2021 to 2022, medical debt prevalence stayed approximately the same. This highlights the need for medical debt focused approaches to address this issue.

Data & Methods: This report utilizes data from CHIS, spanning the years 2017 to 2022. CHIS is the nation's largest state health survey. Most of our analyses utilized 2019 to 2022 data, which consisted of responses from a representative sample of 18,002 adults in LA County. More detailed methods are described in our [Medical Debt in LA County Baseline Report and Action Plan](#).

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