

COVID-19: Who Can Afford to Pay the Costs of Care?

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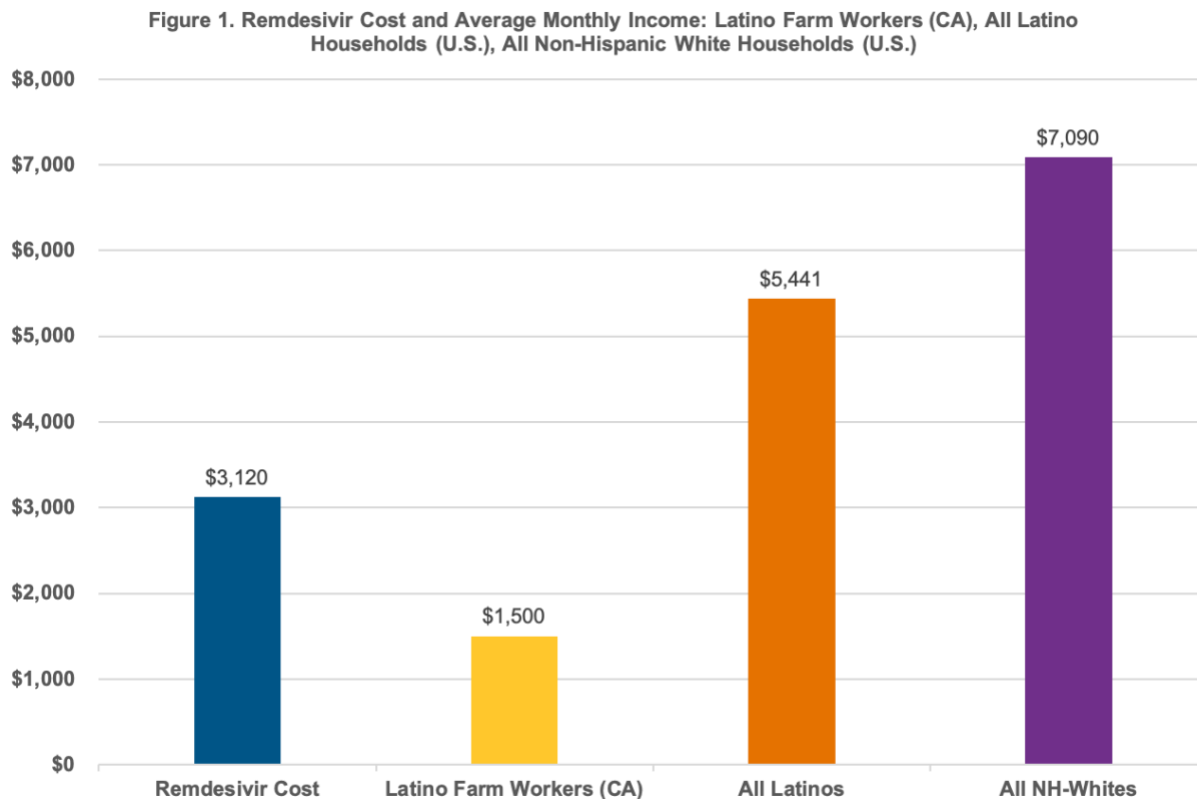
Since 1992, UCLA Health's Center for the Study of Latino Health and Culture (CESLAC) has provided cutting-edge, fact-based research, education, and public information about Latinos, their health, their history, and their roles in California's society and economy.

COVID-19: Who Can Afford to Pay the Costs of Care?

Farm workers are among the most essential workers in California. Thanks to their tireless efforts, crops are planted, tended, and harvested so that all Californians can enjoy their daily meals. But in order to provide our daily bread, farm workers expose themselves to the coronavirus as they travel to work in crowded vehicles, work shoulder to shoulder in packing houses, and sleep in packed houses and barracks at night.

These essential workers are paid very little, and they rarely have health insurance. If they become infected with the coronavirus, they often have to pay their medical costs out of pocket.

Figure 1 shows the cost of a typical course of remdesivir used in COVID-19 treatment (\$3,120), as well as average monthly household incomes for farm workers in California, all Latino households in the U.S., and all non-Hispanic white households in the U.S. This shows that the cost of a course of remdesivir treatment amounts to more than two whole months' income for a California farm worker.



Because they rarely have health insurance, in order to pay for such a course of treatment, a California farm worker would have to go entirely without meals, housing,

and transportation for two months (60 days). Of course, most people will starve to death by around 40 days without food.

The average monthly household income of all Latinos in the U.S. is \$5,441. The out-of-pocket cost for a course of remdesivir is slightly more than half (57%) that amount. Higher-income households are more likely to have health insurance, though, so these households might have most, or all, of this cost covered by their insurer.

The average monthly income for non-Hispanic white households in the U.S. is \$7,090. The cost of remdesivir treatment would be less than half (44%) a month's income for them. About 95% of non-Hispanic white households have health insurance, which might cover most, or all, of the cost.

Nearly 50 years ago, the medical economist Victor Fuchs posed a question in the title of his first book on health, economics, and social choice: *Who shall live?* In the face of the COVID-19 pandemic and its effects on essential workers—such as farm workers—who earn little and rarely have health insurance, we must ask ourselves the same question: Who shall live?

For more information, or to arrange a telephone interview with the Center's Director, David E. Hayes-Bautista, Ph.D., Distinguished Professor of Medicine, please contact Adriana Valdez, at (310) 794-0663 or cesla@ucla.edu.

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