Health Care Access

Results from the 2013 Indiana BRFSS

Health insurance coverage is an important determinant of access to health care. Uninsured non-elderly adults are substantially less likely to have a usual source of health care or a recent health care visit than their insured counterparts. The major source of coverage for persons under 65 years of age is private employer-sponsored group health insurance [National Center for Health Statistics].

The Indiana State Department of Health received 2012 Prevention and Public Health Funds (PPHF-2012) to include the Health Care Access Module in the 2013 Indiana Behavioral Risk Factor Surveillance System (BRFSS) survey. This module includes questions on health insurance coverage, doctor visits, not being able to take medication as prescribed due to cost, and whether medical bills were being paid off over time. The BRFSS is an annual random digit-dial telephone survey conducted through a cooperative agreement with the Centers for Disease Control and Prevention, and all states and the District of Columbia participate.

The BRFSS survey uses a complex sample design to randomly select respondents with either listed or unlisted landline and cell telephones. State health departments conduct the BRFSS surveys continuously through the year using a standardized core questionnaire and optional modules. The BRFSS is the sole source of state-level health risk factors, behaviors, and prevalence of certain chronic conditions. The BRFSS relies on self-reported data. This type of survey has certain limitations that should be understood when interpreting the data. Respondents have the tendency to underreport behaviors that may be considered socially unacceptable, such as smoking and driving after drinking alcohol. Conversely, respondents may overreport behaviors that are desirable, such as physical activity. The differences reported on the following pages are statistically significant (p<0.05) unless otherwise noted.

Since over 96% of adults age 65 years and older reported having Medicare, this newsletter focuses on adults ages 18-64 years. An estimated 700,000 (21.6%) of those Indiana adults reported they were not currently covered by any type of health insurance or health coverage plans. White, non-Hispanic adults were the least likely to report not having health insurance coverage (18.0%) compared to black, non-Hispanic (31.1%) and other/multiracial, non-Hispanic (31.6%). Hispanic adults (48.9%) were more likely than the other races to not to be currently covered by health insurance coverage.
Respondents who reported that they had any kind of health care coverage were asked if there was any time in the past 12 months when they did not have any health insurance coverage. Overall, 8% of adults ages 18-64 years answered yes. Respondents without any health care coverage were asked the time since they last had health care coverage. Twelve percent had never had health insurance while over one third last had health insurance more than three years ago (Figure 1).

Figure 1

Time Since Last Had Health Care Coverage
Indiana 2013

Source: Indiana 2013 BRFSS

Respondents were asked if there was a time in the past 12 months when they did not take their medication as prescribed because of cost (this did not include over-the-counter medications). Overall, 9.5% reported not taking their medication for this reason. Those not doing so were more likely to be female (11.4%), black, non-Hispanic (15.0%), and have lower education and household income levels (see Figure 2).

Figure 2

In Past 12 Months Did Not Take Medication as Prescribed Due to Cost by Household Income
Indiana 2013
The survey also asked if respondents currently have any medical bills that are being paid off over time. (This could include medical bills being paid off with a credit card, through personal loans, or bill paying arrangements with hospitals or other providers. The bills could be from earlier years as well as 2013). Overall, 26.5% of adults reported they were paying off medical bills. The prevalence of having to pay medical bills over time varied by demographics:

- Females were more likely than males (27.3% vs. 19.1%, respectively).
- White, non-Hispanic adults were less likely than black, non-Hispanic adults (22.2% vs. 36.1%, respectively).
- College graduates were less likely than those with less than a college degree (16.9% vs. 25.2%, respectively).
- For those with insurance, 24.9% were paying off medical bills, compared to 33% of those without health insurance.

Respondents were also asked about the number of times they had been to a doctor, nurse or other health professional in the past 12 months. Approximately 15% (14.5) did not have a visit, 17.7% had one visit, 45.7% had 2-5 visits, 14.5% had 6-12 visits, and 6.8% had 13 or more visits. When comparing the number of visits by health insurance coverage, there was no difference for one visit. Adults with health insurance were more likely than those without to have 2 or more doctor visits in the past year, while those without insurance were more likely to not have any doctor visits (Figure 3).

Figure 3

**Number of Doctor Visits in Past Year by Health Care Coverage**

*Indiana 2013*

<table>
<thead>
<tr>
<th>Number of Doctor Visits</th>
<th>Coverage</th>
<th>No Coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No visits</td>
<td>10.3</td>
<td>34.4</td>
</tr>
<tr>
<td>One visit</td>
<td>17.3</td>
<td>49.2</td>
</tr>
<tr>
<td>2-5 visits</td>
<td>18.5</td>
<td>32.6</td>
</tr>
<tr>
<td>6-12 visits</td>
<td>15.5</td>
<td>10.4</td>
</tr>
<tr>
<td>13+ visits</td>
<td>7.7</td>
<td>4.0</td>
</tr>
</tbody>
</table>

Red data label: significant difference
Source: Indiana 2013 BRFSS

Adults without consistent health insurance are more likely to skip medical care because of cost concerns, which can lead to poorer health, higher long-term health care costs, and early death. [National Center for Health Statistics]

Additional newsletters will be published with additional information from the Health Care Access Module.
Acknowledgments

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