



Ohio Adults who Lack a Usual Source of Health Care

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INTRODUCTION

Most Ohio residents have a place where they usually go when they are sick or need advice about their health. Yet some people do not because they lack health insurance, have not established a relationship with a health care provider, or for other reasons. Not having a usual source of health care is associated with less frequent preventive care and more frequent emergency department visits. Understanding the types of people who do not have access to a usual source of care can help policy makers plan how to allocate health care dollars most effectively and efficiently to improve population health and lower costs.

The 2017 Ohio Medicaid Assessment Survey (OMAS) enables researchers to estimate the percent of Ohio adults who lack access to a usual source of health care and to describe demographic and other characteristics associated with this lack of access. Analyses focus on adults covered by Medicaid as well as lower-income individuals who have other types of insurance or are uninsured. (*Among adults, “lower-income” refers to individuals in households with incomes ≤ 138% of the federal poverty level (FPL).*)

METHODS

OMAS is a telephone survey that samples both landline and cell phones in Ohio. The 2017 version is the seventh iteration and researchers completed 39,711 interviews with adults during second half of 2017. The findings reported in this brief are weighted to be representative of all non-institutionalized adults in Ohio.

To measure access to a usual source of health care, OMAS asked: “Is there one place that you usually go to when you

Table 1. Percent and Number of Ohio Adults with No Usual Source of Health Care

	Percent with no usual source of care	Estimated count of those who lack access
Female	4.9	226,000
Male	11.3	483,000
African-American, non-Hispanic	9.0	93,000
Hispanic (any race)	17.9	46,000
White, non-Hispanic	7.4	549,000
Other	11.7	21,000
19-34 years old	13.3	325,000
35-64 years old	7.0	319,000
65+ years old	3.5	65,000
Household income ≤138% FPL	9.8	260,000
139-250%FPL	9.4	189,000
251+%FPL	6.2	260,000
Medicaid	7.5	131,000
Medicare & other government	3.4	64,000
Employer-Sponsored	6.8	246,000
Private/Other	9.7	46,000
Uninsured	26.8	177,000
All Ohio adults	8.0	709,000

Note: Subtotals may not sum to total because of rounding

KEY FINDINGS

- The percent of Ohio adults who lack a usual source of healthcare increased from 7.2% in 2015 to 8.0% in 2017.
- Adults who were male, young, Hispanic, uninsured and living in households with incomes ≤250% of the Federal Poverty Level were more likely than other adults to lack a usual source of healthcare.

are sick or need advice about health?” Respondents who answered “no” were then asked: “Just to be sure, is it that there is no place at all that you usually go to when you are sick or you need advice about your health, or is it that you go to more than one place?” Individuals who answered “no” to the first question and “no place at all” to the second question were classified as not having a usual source of care. Respondents who listed any place as their usual source of care, whether it was appropriate (e.g., a doctor’s office) or not (e.g., hospital emergency department) were classified as having a usual source of care.

RESULTS

In 2017, 8.0% of Ohio adults (N=709,000) did not have a usual source of health care. Access was least common among adults who were male, young, Hispanic, uninsured and living in households with incomes at or below 250% of the Federal Poverty Level (Table 1). For example, 17.9% of Hispanic adults lacked a usual source of care, compared to 7.4% of Whites and 9.0% of African-Americans. About 1 in 4 uninsured adults (26.8%) lacked access to care, but there was no significant difference in the percent of those with Medicaid versus those with employer-sponsored insurance.

While lacking a usual source of health care was more prevalent among males and the uninsured, most of the 709,000 with no usual source of health care had employer-sponsored insurance and most were over age 34.

Having a usual source of care may lead to better health outcomes, yet the reverse may also be true: people who

feel healthy—especially when they are young—may be less likely to seek out a usual source of health care. In fact, adults are less likely to lack a usual source of care if they are obese (6.4% vs. 9.2% for non-obese), or if they have hypertension (4.2% vs. 10.3%) or heart disease (2.7% vs. 8.7%). Adults who have chronic health conditions yet lack a usual source of care are of great concern to policy makers. Yet the same general findings presented in Table 1 also held true for the subpopulations of adults who reported being obese or having hypertension or heart disease: such individuals who were male, Hispanic, young and uninsured were still more likely to lack a usual source of healthcare.

Trends over time

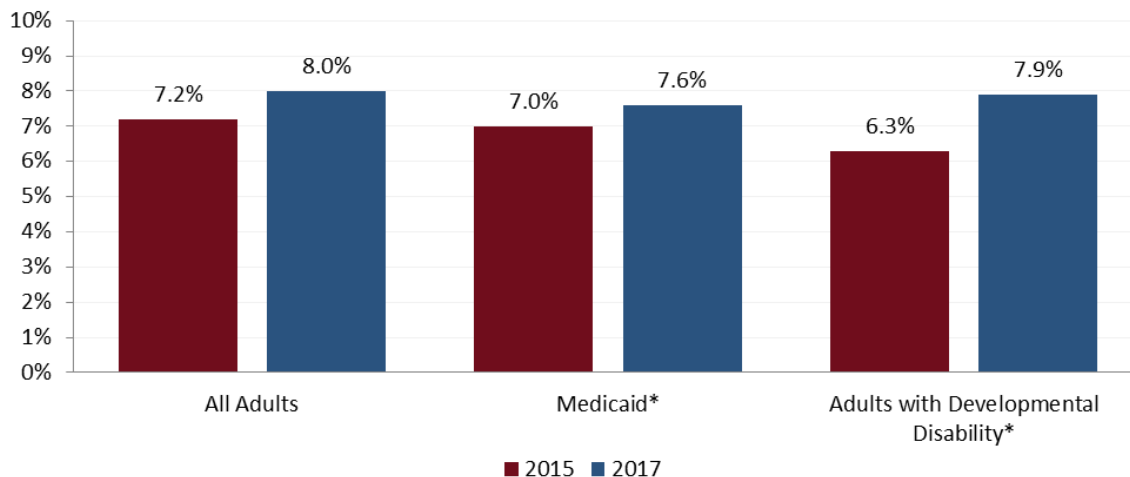
The percent of Ohio adults who lack a usual source of care increased from 7.2% in 2015 to 8.0% in 2017. This trend was similar for adults with Medicaid and those with a developmental disability, although the changes were not statistically significant (Figure 1).

POLICY CONSIDERATIONS

- Medicaid is comparable to employer-sponsored insurance in providing Ohio adults with access to usual sources of health care.
- Efforts to increase access to health care should focus on young, uninsured males.

For more information about the methodology and findings in this brief, please visit www.grc.osu.edu/OMAS.

Figure 1. Percent of Ohio adults and key subpopulations with no usual source of health care, 2015 and 2017



*not statistically significant

Source: 2015 and 2017 Ohio Medicaid Assessment Survey