Community Survey on Health Insurance, Health Care Affordability, and Barriers to Health Care

Introduction
The recent health care climate is uncertain, at best. While the national uninsured rate has fallen nearly eight percentage points since 2013, and health care costs have been moderating in recent years, many health care consumers are feeling the strain of increased cost sharing in their insurance plans. Rising premiums in the ACA Marketplace have caused some younger individuals to forego insurance and pay the penalty (Auter, 2017), while others have cut back on necessities like food and clothing to pay high deductibles and coinsurance (Kaiser Family Foundation [KFF], 2017). The Commonwealth Fund labels those who have high out of pocket costs and deductibles, relative to their income, the underinsured. In 2016, this group comprised 28 percent of those who had insurance coverage year-round, an increase from 23 percent in 2014 (Collins, Gunja, & Doty, 2017).

A survey was conducted to examine health insurance coverage, health care affordability and barriers to getting health care in Kent County. This year, we were fortunate enough to expand the size of our sample and breadth of our questions by collaborating with the Johnson Center for Philanthropy at Grand Valley State University in using the data from their annual 2017 VoiceKent (formerly VoiceGR) survey. Our sample consists of 2,383 adults, answering questions both online and in-person around Kent County. Surveys were conducted during the summer and fall of 2017.

Insurance Status and Type of Insurance
We report the types of health insurance in Figure 1. Twenty-nine percent of respondents get their insurance from their employer, 23 percent from Medicaid, 10 percent from Medicare, 6 percent from their parents’ insurance plan, and 7 percent from the ACA marketplace. Two percent were enrolled in Healthy Michigan, the ACA expanded portion of Medicaid. Eight percent of the sample was uninsured.

Figure 2 shows the percentage of the sample that had either no insurance in the last year or insurance for only part of the last year. Eight percent were uninsured for the full year, while 8 percent were uninsured for a portion of the year. Figure 3 reports current insurance status for those who were not insured for the full year in Figure 2. Fifty-two percent of respondents were still uninsured, while 23 percent gained coverage through Medicaid and 6 percent through Medicare.

Primary Care
The primary care provider (PCP) is an individual’s first contact with the health care system and, hence, a very important one. In fact, one PCP per 10,000 people can decrease hospital admissions by 5.5 percent, emergency room visits by 11 percent, and surgeries by 7 percent (Macinko, Starfield, & Shi, 2007). Figures 4 and 5 report the percentage of respondents who have a PCP and where they are most likely to go if they need medical attention.

Figure 4 shows that a large majority of respondents (83 percent) have a PCP. Although most people have one, not all use their PCP as a first resource when sick. The total column of Figure 5 shows that only 74 percent go to their doctor when ill, while 12 percent go to urgent care and 6 percent go to the ER. As we would expect, the rate of doctor utilization is much lower for the uninsured (32 percent) than for the insured (75 percent), and the uninsured also are more likely to go to the ER (15 percent) than are the insured (6 percent).

Demographics
Table 1 reports the demographics of survey respondents. About half (54 percent) of individuals are in the age categories of 20–39, with a mean age of 40 (not shown in table). The racial mix includes 56 percent white, non-Hispanic; 18 percent black, non-Hispanic; and 17 percent Hispanic. Seventy-two percent of respondents are female, 62 percent are married or in a committed relationship, 6 percent are divorced or separated, 2 percent are widowed, and 28 percent are single. Furthermore, 69 percent have annual incomes under $60,000, while 13 percent make $100,000 or more each year.

1VoiceKent (formerly VoiceGR) is an evolving community survey designed to assess Kent County residents’ perceptions and experiences on a variety of topics, including ability to meet basic needs, access to health care, neighborhood safety, employment, education, and racism. The primary goal of VoiceKent is to provide open, accessible, and objective community data to residents, nonprofits, governments, businesses, and other local decision-makers.

2At the time of this writing, VoiceKent had just finished surveying in the field. Because there is a short lag between this time and when we needed the data for our analysis, we are not using the full 2017 sample for our analysis.
Figure 1: Health Insurance Source (Corrected)

- Buys Own Insurance From the ACA Marketplace: 29%
- From Employer: 10%
- From Spouse or Domestic Partner: 6%
- Parents’ Insurance: 8%
- Medicaid: 7%
- Medicare: 6%
- Healthy Michigan Plan: 5%
- Self-Paid: 4%
- Uninsured: 2%
- Other: 3%

Number of Observations: 2,172
Number of Responses: 2,694
Source: Author’s calculations from Health Check 2018
Note: Survey respondents could select more than one source of insurance (if applicable).

Figure 2: Health Insurance Coverage in the Last Year

- Yes, For All of the Year: 84%
- Yes, For Part of the Year: 8%
- No, Not in the Past Year: 8%

Number of Observations: 2,204
Source: Author’s calculations from VoiceKent 2017
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