



The Colorado Eligibility Atlas

Mapping the Uninsured



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Introduction

The Affordable Care Act (ACA) has made more Coloradans eligible for health insurance by expanding the Medicaid program for those with the lowest incomes and offering tax credits to make private health insurance more affordable for those with higher incomes.

Colorado opted to extend Medicaid insurance coverage to all adults with annual incomes at or below 138 percent of the federal poverty level (FPL) beginning in January. Additionally, Colorado created a state-based private insurance marketplace – Connect for Health Colorado – where Coloradans with family incomes between 138 percent and 400 percent of the FPL can qualify for federal tax credits to assist with insurance premiums.

More than 307,000 Coloradans have signed up for health insurance – about 179,000 for Medicaid and about 129,000 for private insurance through the marketplace. Even so, the Colorado Health Institute estimates that hundreds of thousands remain uninsured.

In this report, the Colorado Health Institute set out to find out more about Colorado’s uninsured population.

We sought answers to these research questions:

- Where do they live?
- What are their demographic characteristics?
- What are their reasons for being uninsured?
- Do these characteristics vary geographically across Colorado?

Our analysis of available data resulted in the 17 maps in this study, “The Colorado Eligibility Atlas: Mapping the State’s Uninsured.” The maps focus on two groups of the uninsured: Low-income Coloradans eligible for but not enrolled (EBNE) in the Medicaid or Child Health Plan *Plus* (CHP+) public insurance programs, and higher-

income Coloradans who qualify to receive tax credits (QTC).

The results of this new study are timely as Colorado leaders and policymakers prepare for the next Connect for Health Colorado open enrollment period beginning in November. One of the primary goals of the ACA is to ensure that as many Americans as possible, particularly the most vulnerable, have access to affordable health insurance.

Estimates from The Colorado Eligibility Atlas provide useful insights about the uninsured, information that can help inform outreach and enrollment strategies. These strategies will likely vary depending on the characteristics of the different populations explored in the maps, such as children, adults, Spanish language speakers or the unemployed.

For example, in regions with high proportions of EBNE and QTC Coloradans who are employed, an employer-outreach strategy is likely to be more effective than in places where high proportions are unemployed. Likewise, strategies in communities with low levels of educational attainment among the uninsured should factor this in when developing outreach materials.

The Colorado Eligibility Atlas also underscores the importance of studying the uninsured through two different lenses, by the numbers and by the percentages. The greatest numbers of uninsured Coloradans reside in the cities. The percentages, though, often tell a different story and can help to inform community-level strategies.



Summary of Findings

The Colorado Eligibility Atlas maps suggest that the characteristics of uninsured Coloradans eligible for health insurance programs vary across Colorado in important ways. Three geographic areas, in particular, stand out:

Northwest Colorado and the Mountain Resort Counties

Employment characteristics are likely to explain many of the observations from the state's northwest corner and central mountains, home to ski and resort communities. We found that these communities were often above the state average according to a number of characteristics that we explored, such as the percentages of: QTC adults who are employed; EBNE and QTC Coloradans who speak Spanish at home; and EBNE adults with only a high school degree.

Many jobs in this region are seasonal or part-time, paying relatively low wages and not offering health benefits. Workers in the service, resort or oil and gas industries – and their families – likely account for the high EBNE percentages among children and adults. Many of these jobs likely contribute to the higher percentages of EBNE and QTC populations who are Spanish language speakers as well. In addition, a high percentage of this region's uninsured reported they don't need health insurance, perhaps explained by the fact that younger adults – who tend to report not needing health insurance more often – are drawn to recreational jobs in this region.¹

Denver and the Front Range Urban Areas

The state's most populous area – the Front Range urban corridor that includes Denver, Aurora, Boulder and Colorado Springs – is home to the highest numbers of EBNE and QTC Coloradans.

2014 Poverty Guidelines

Family Size	Percent of Poverty Guideline		
	100%	138%	400%
1	\$11,670	\$16,105	\$46,680
2	\$15,730	\$21,707	\$62,920
3	\$19,790	\$27,310	\$79,160
4	\$23,850	\$32,913	\$95,400

Denver and its suburbs, however, also have among the highest rates of EBNE and QTC residents who have less than a high school education, are unemployed and looking for work, or who speak Spanish at home. These factors are likely related. Adults with lower levels of education or with limited English proficiency may have limited employment opportunities, leading to lower incomes and lack of access to employer-sponsored health insurance.

Eastern Plains

Communities in the state's vast Eastern Plains generally tend to have higher proportions of EBNE adults who are not employed and are looking for work. They are also more likely to have only a high school degree and to speak Spanish at home. In this region, a high percentage of uninsured residents report "churning." In other words, they report that they are uninsured because they lost Medicaid or CHP+ eligibility within the past year.

Many other Colorado regions stand out in the data as well, and they are discussed throughout the report.

Age

Understanding the age distribution of the Coloradans who are eligible but not enrolled in health insurance – both the EBNE and QTC populations – can help to tailor strategic outreach efforts.

The Medicaid expansion has largely focused on low-income adults between the ages of 19 and 64 without dependent children. This can be a challenging population to reach since many of them may have been without health insurance for years. Efforts to devise effective educational and outreach strategies will continue in the years ahead.

And while Colorado has made great strides in enrolling the state's children in public health

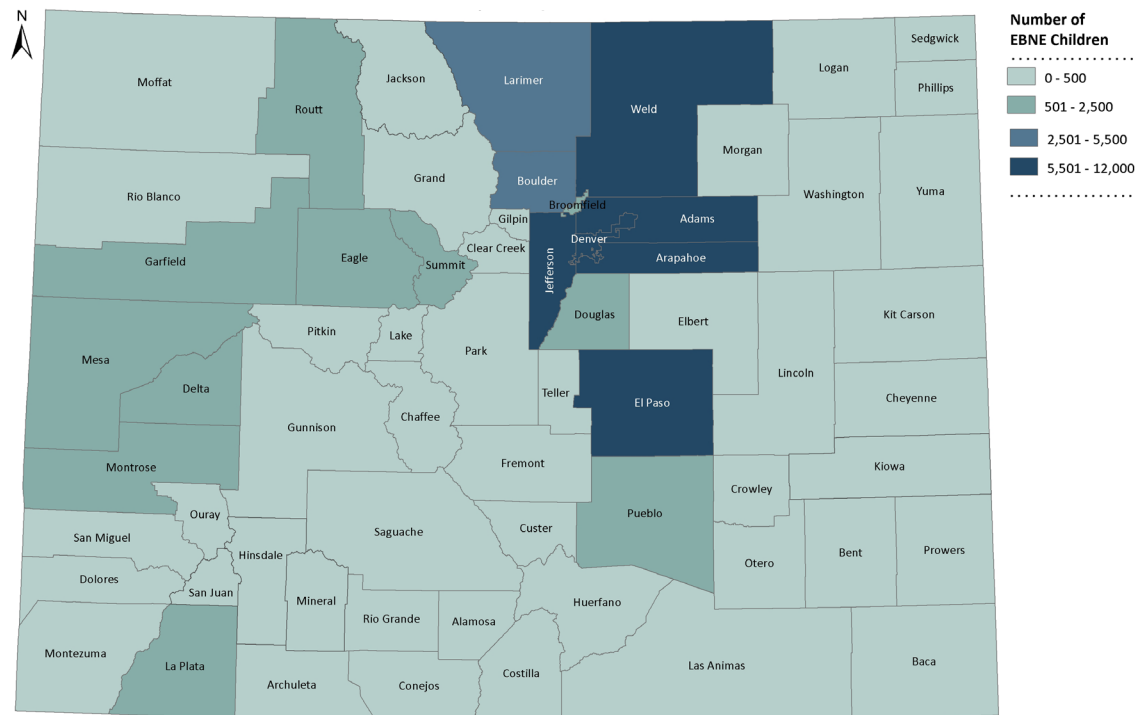
insurance, the data show areas of the state where EBNE and QTC children remain uninsured.

This analysis helps to pinpoint data to support different strategic goals. For example, if the goal is to identify the greatest number of children, the focus would turn to the state's urban areas. On the other hand, a community-based strategy could target areas with higher percentages of uninsured children. Similarly, there could be two different goals for reaching and enrolling adults.

This section of the Eligibility Atlas provides analysis of both children and adults. The first three maps focus on children and the second three on adults.

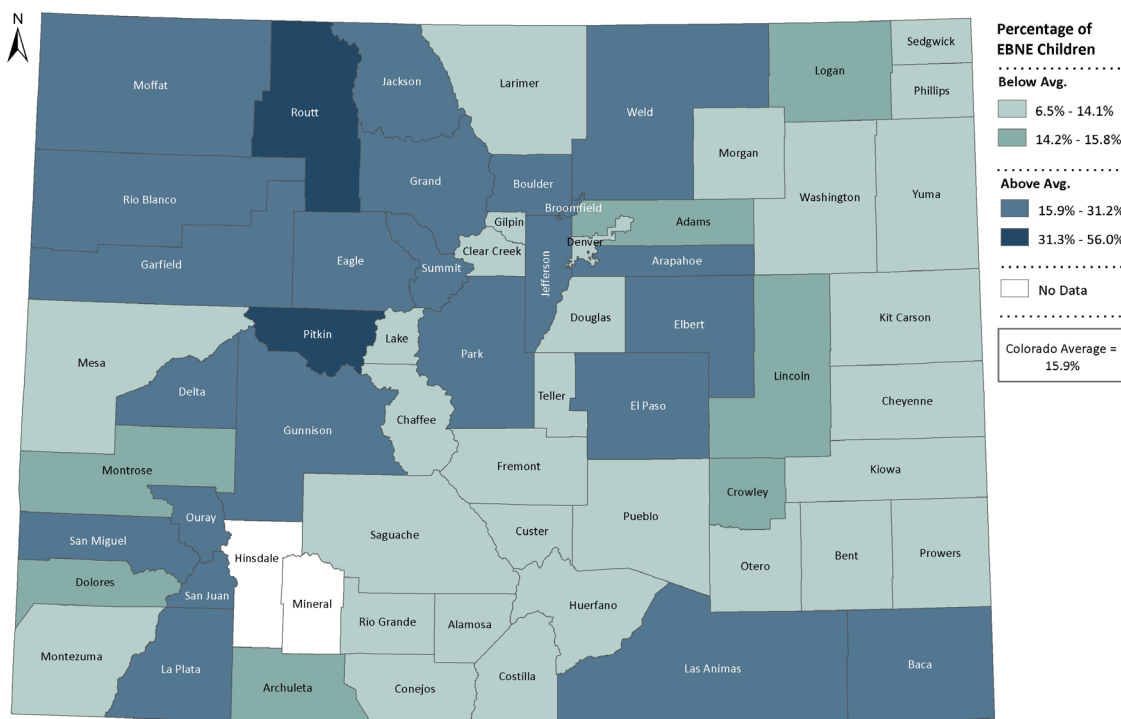
Map 1: Number of Uninsured Children Who Are Eligible for Medicaid or CHP+ But Not Enrolled (EBNE), 2012

The Colorado Health Institute estimates that nearly 81,000 children under the age of 19 are EBNE. The distribution of EBNE children across Colorado shown in this map tends to mirror the distribution of the general population, with higher numbers in the urban corridor along the Front Range.



Map 2: Percentage of Uninsured Children Who Are Eligible for Medicaid or CHP+ But Not Enrolled (EBNE), 2012

- The data suggest higher-than-average rates of EBNE children on the Western Slope and along the Front Range. Pitkin County has the highest percentage of EBNE children but among the lowest number at 340.



The Challenge of Change: Describing Current Policy with Past Data

Developing the estimates for The Colorado Eligibility Atlas posed a challenge to the Colorado Health Institute: How do we use pre-2014 data to estimate the number of uninsured Coloradans who could be affected by policy changes that happened in 2014?

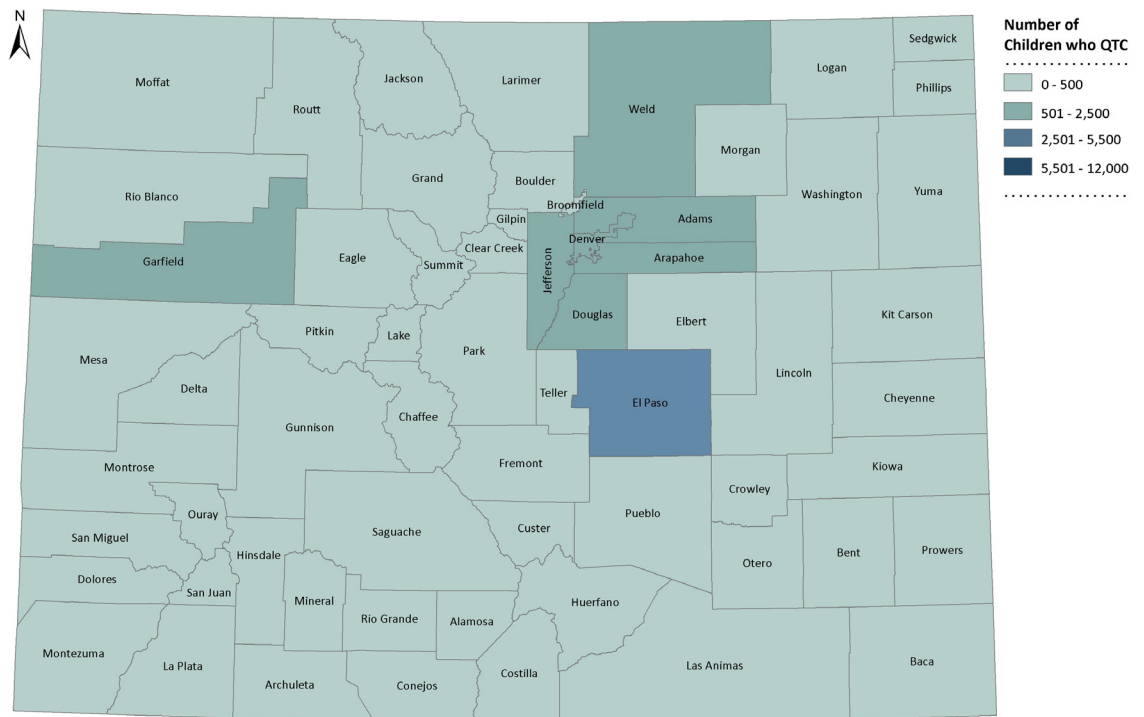
In response, we used the latest data available, which was from 2012 and 2013, to develop our best estimates of uninsured Coloradans who may be eligible for Medicaid or marketplace tax credits. Because of the time lag, these may be overestimates because many of the uninsured have already signed up for these programs.

Terms to Know

- **Eligible But Not Enrolled (EBNE) Children:** Uninsured children aged 18 and under whose income and documentation status suggest that they would be eligible for Medicaid or Child Health Plan Plus (CHP+).
- **Eligible But Not Enrolled (EBNE) Adults:** Uninsured adults between the ages of 19 and 64 whose income and documentation status suggest that they would be eligible for Medicaid.
- **Qualify for Tax Credits (QTC):** Uninsured Coloradans whose income and documentation status suggest that they are eligible to receive advanced premium tax credits through the state's health insurance marketplace, Connect for Health Colorado. Note that the Colorado Health Institute has broken this group down to children aged 18 and under and adults between the ages of 19 and 64 when appropriate.

Map 3: Number of Uninsured Children Who Qualify for Tax Credits (QTC), 2012

• *Uninsured children who qualify for insurance tax credits must be part of families with annual incomes between 266 percent and 400 percent of FPL. They also must be either legal citizens or documented non-citizens. Comparing this map with Map 1 shows that many more of Colorado's uninsured children are eligible for public insurance programs than the insurance tax credits – an estimated difference of about 66,300. El Paso County has the highest number of children who qualify for tax credits at 2,661.*

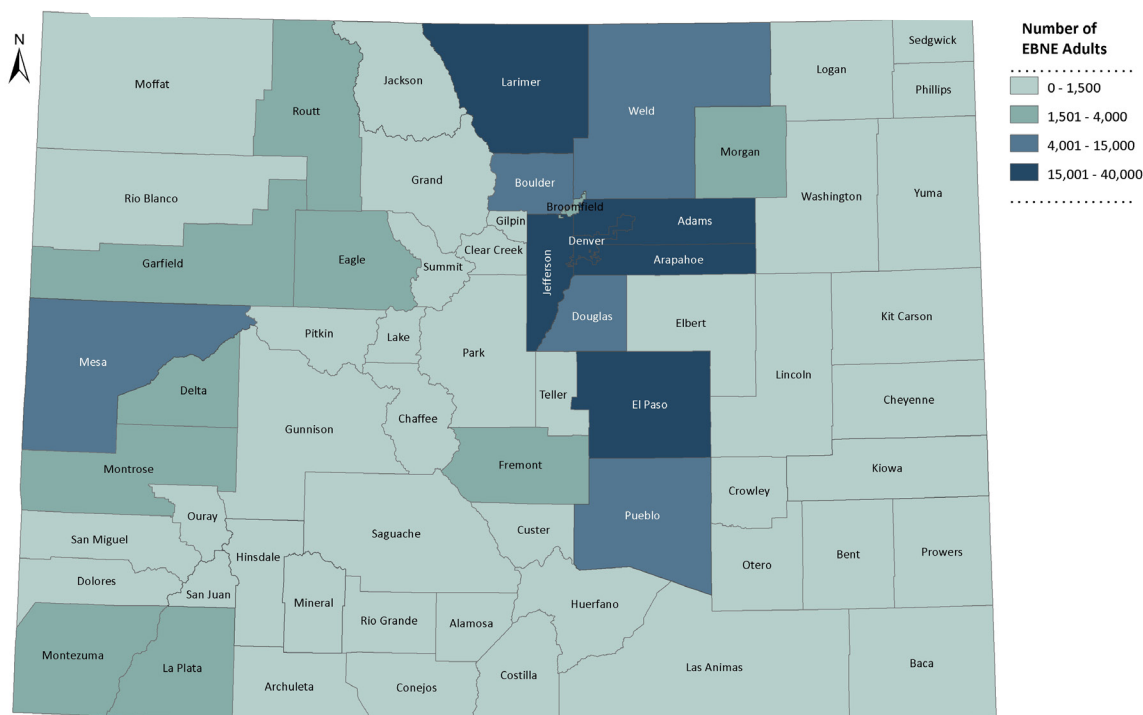


Sources and Notes

- **Total population:** Only those in the poverty universe, which does not include foster children and people living in prisons, nursing homes, mental hospitals, college dormitories or military quarters.
- **QTC child definition:** Uninsured children ages 18 and younger with family incomes between 266 percent and 400 percent of the FPL who are citizens or documented non-citizens.
- **EBNE child definition:** Uninsured children ages 18 and younger with family incomes at or below 265 percent of the FPL who are citizens or documented non-citizens who have been in the United States for at least five years.

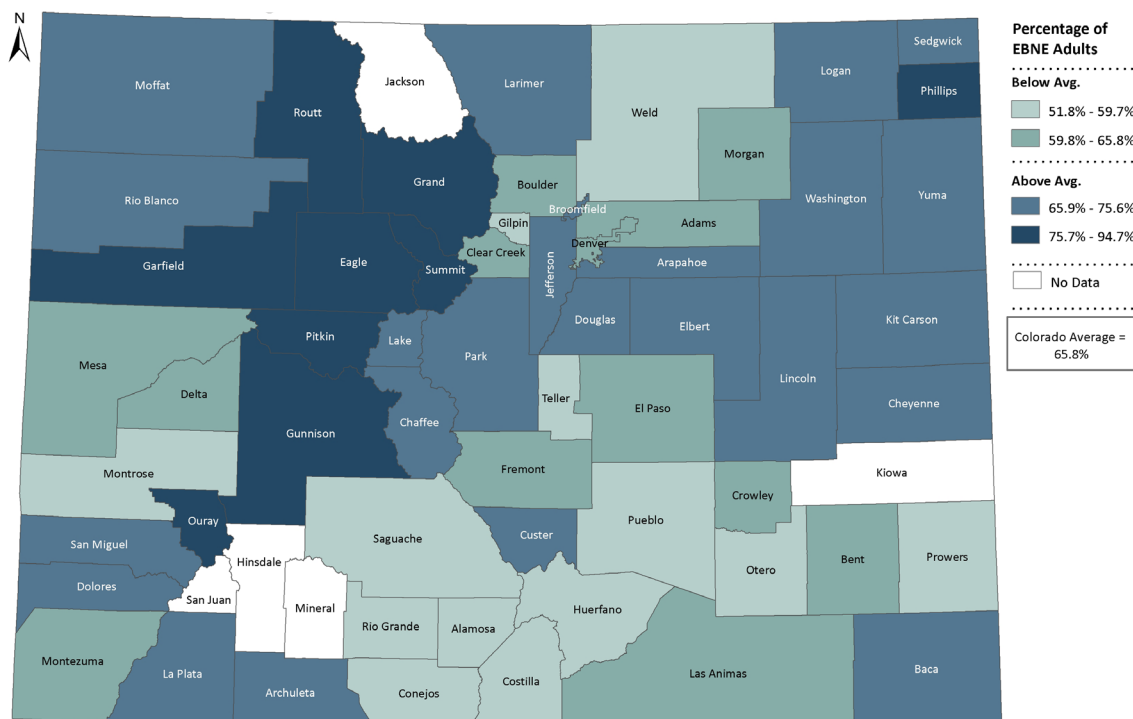
Map 4: Number of Uninsured Adults Who are Eligible But Not Enrolled (EBNE) in Medicaid, 2012

- The greatest numbers of EBNE adults are along the Front Range and in Mesa County. This pattern largely mirrors the distribution of the general population.



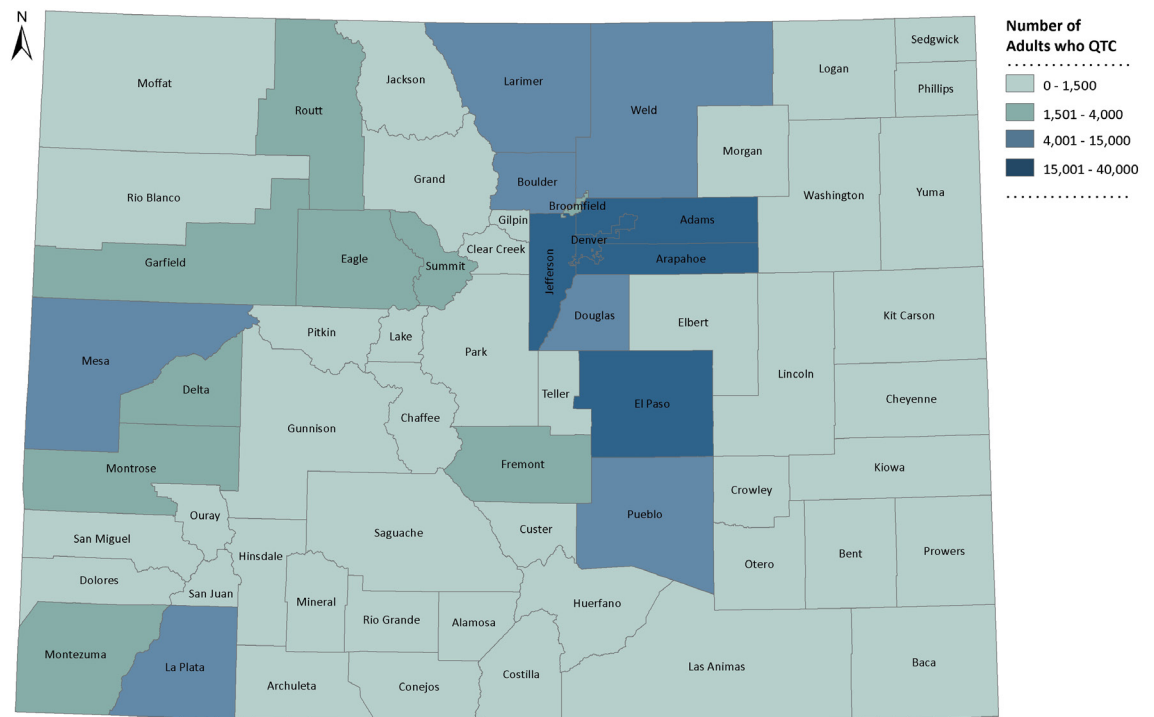
Map 5: Percentage of Uninsured Adults Who are Eligible But Not Enrolled (EBNE) in Medicaid, 2012

- While the highest numbers are found along the Front Range, the highest percentages of EBNE adults are in the mountain resort communities. Eagle County has the highest percentage of EBNE adults at 94.6 percent.



Map 6: Number of Uninsured Adults Who Qualify for Tax Credits (QTC), 2012

- *The greatest concentration of uninsured QTC adults is along the Front Range as well as in Mesa and La Plata counties. Distribution patterns for uninsured EBNE adults and uninsured QTC adults are similar.*



Sources and Notes

- **Total population:** Only those in the poverty universe- does not include foster children and people living in prisons, nursing homes, mental hospitals, college dormitories or military quarters.
- **QTC adult definition:** Uninsured adults between the ages of 19 and 64 with family incomes between 138 percent and 400 percent of the FPL who are either citizens or documented non-citizens.
- **EBNE adult definition:** Uninsured adults ages 19-64 with family incomes at or below 138 percent FPL who are either United States citizens or documented noncitizens who have been in the United States for five or more years.

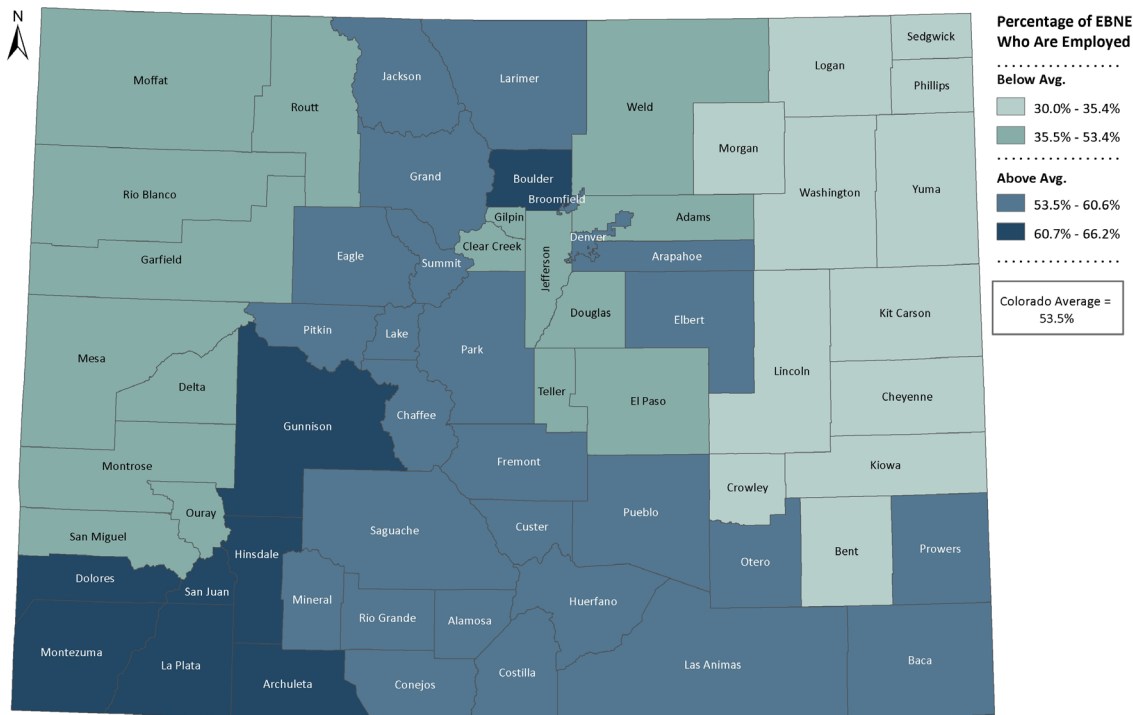
Employment

Health insurance is intricately tied to employment. The proportion of employed Coloradans with health insurance was 80.7 percent in 2013, according to the Colorado Health Access Survey (CHAS). Among the unemployed, 56.5 percent were uninsured.²

The employed may work seasonal jobs that do not include health insurance and with incomes that fluctuate significantly throughout the year, especially in resort areas that depend on tourism. The lack of steady employment and income can result in workers in these areas churning between Medicaid and tax credit eligibility.

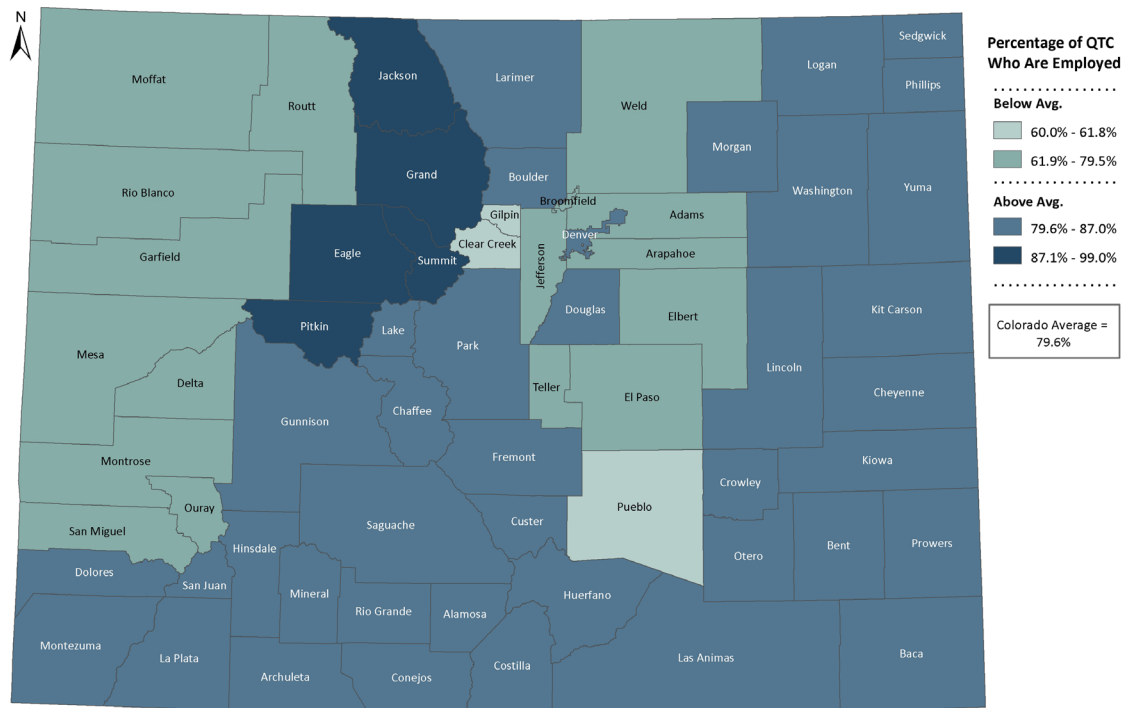
Map 7: Percentage of Uninsured Adults Who Are Eligible For But Not Enrolled (EBNE) in Medicaid And Who Are Employed, 2012

• *EBNE adults in the southwestern part of the state are more likely to be employed than those in other regions. Two of three (66.2 percent) EBNE adults are employed in Gunnison, Hinsdale, San Juan, Dolores, Montezuma, La Plata and Archuleta counties compared to the state EBNE average of 53.5 percent.*



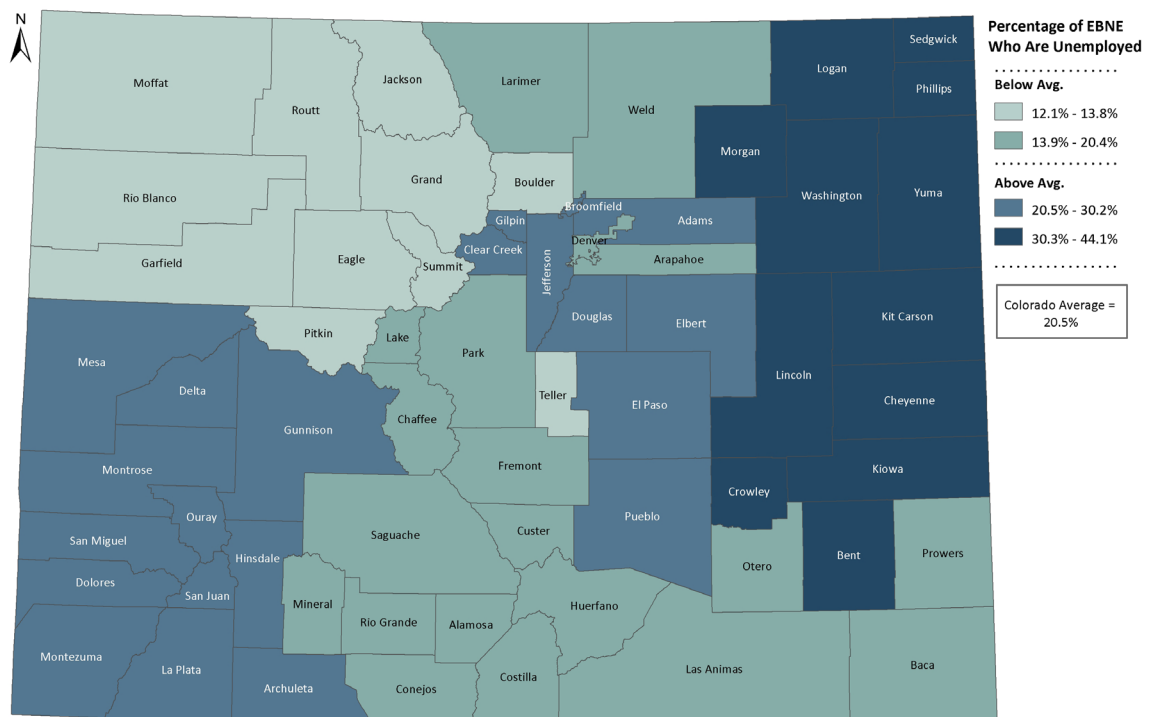
Map 8: Percentage of Uninsured Adults Who Qualify for Tax Credits (QTC) And Who Are Employed, 2012

- Virtually every (99 percent) QTC adult in Eagle, Grand, Pitkin and Summit counties is employed. This represents 5,977 people who have jobs, but don't have health insurance. Given the influence of tourism, hospitality, and oil and gas jobs in this mountain region, these findings may reflect a high number of seasonal or temporary workers. This also likely reflects the high cost of health insurance in this area.



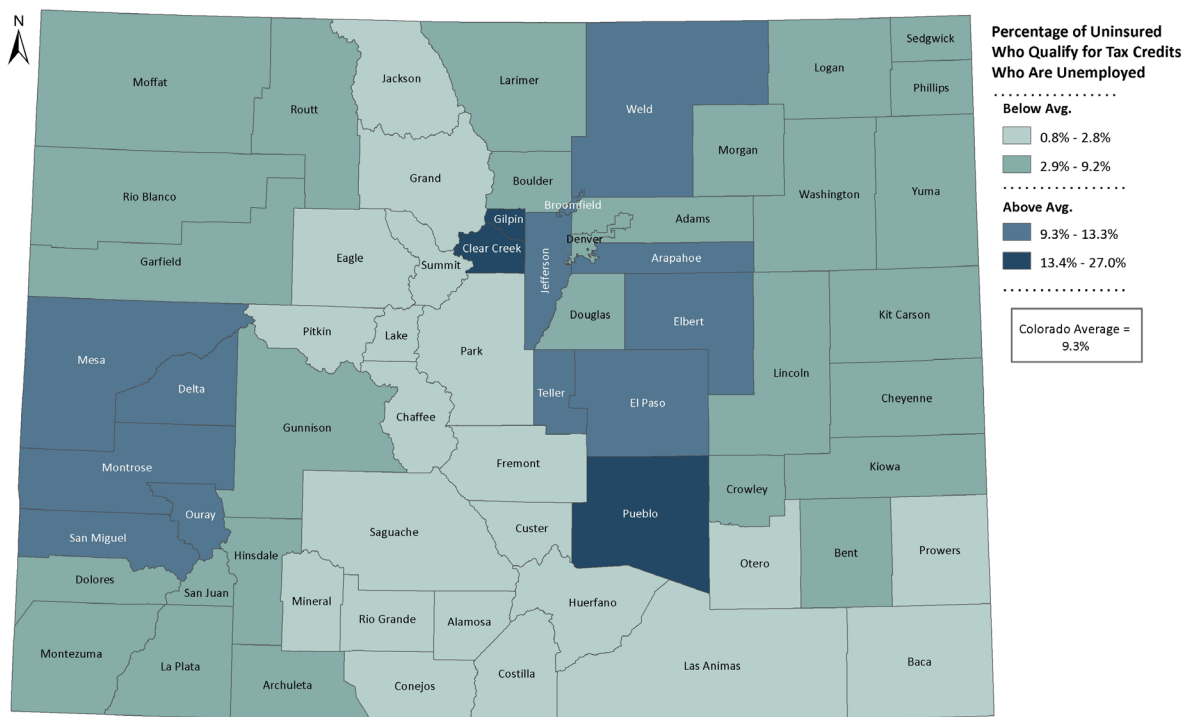
Map 9: Percentage of Uninsured Adults Who Are Eligible But Not Enrolled (EBNE) in Medicaid and Who Are Unemployed and Looking for Work, 2012

- Nearly half (44 percent) of EBNE adults in the 12-county Eastern Plains region are unemployed and looking for work, the state's highest rate. Still, this high rate represents only 2,600 people, or five percent of Colorado's 52,869 EBNE adults. (Note: This category includes unemployed people who are looking for work. It does not include those who are not looking for work, such as stay-at-home parents or early retirees.)



Map 10: Percentage of Uninsured Adults Who Qualify for Tax Credits (QTC) And Who Are Unemployed and Looking for Work, 2012

• *Gilpin and Clear Creek counties just west of the metro Denver area and Pueblo County in southern Colorado have the highest rate of QTC adults who are looking for work. In Gilpin and Clear Creek counties, about 27 percent of QTC adults are unemployed. However, given the small population in Gilpin and Clear Creek counties, these results should be interpreted with caution.*



Sources and Notes

- **Total population:** Only those in the poverty universe- does not include foster children and people living in prisons, nursing homes, mental hospitals, college dormitories or military quarters.
- **QTC adult definition:** Uninsured adults between the ages of 19 and 64 with family incomes between 138 percent and 400 percent of the FPL who are either citizens or documented non-citizens.
- **EBNE adult definition:** Uninsured adults ages 19-64 with family incomes at or below 138 percent FPL who are either United States citizens or documented noncitizens who have been in the United States for five or more years.

Spanish Language Speakers

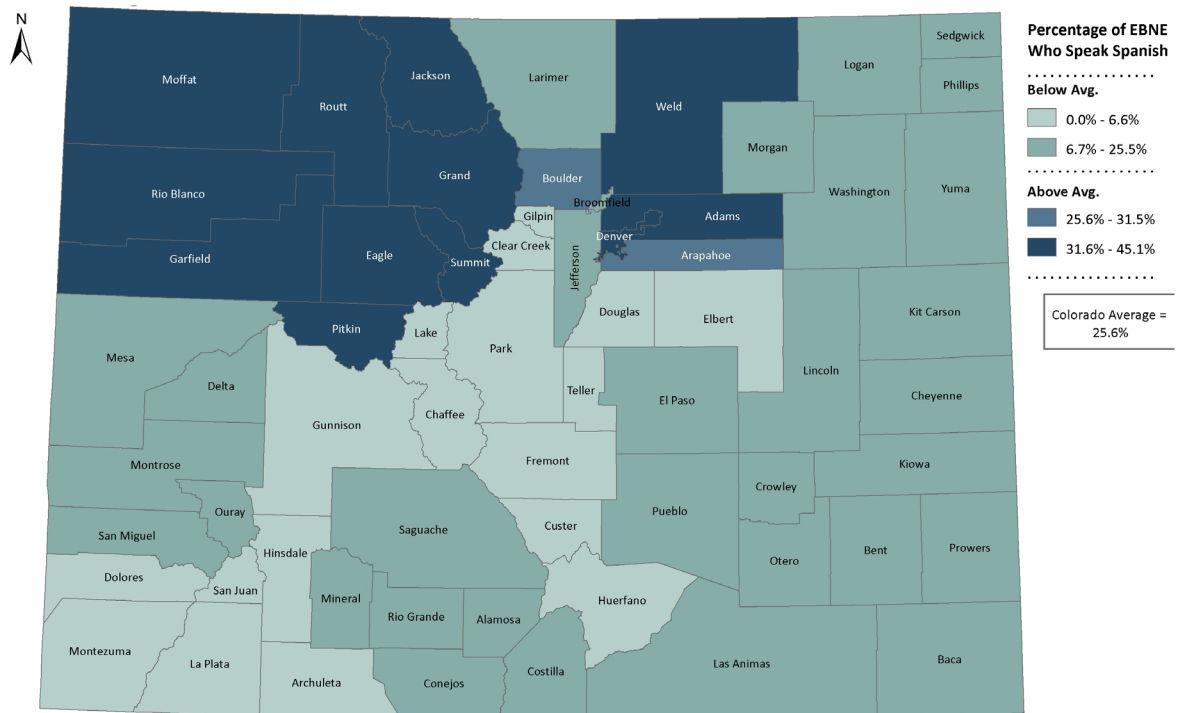
About one of seven (13.6 percent) Coloradans between the ages of five and 64 speak Spanish at home, according to the 2012 American Community Survey. A significant percentage of these Spanish language speakers are uninsured, even though they are eligible for public insurance or insurance tax credits. For example, about one of four EBNE Coloradans are Spanish language speakers (25.6 percent) and about one of five of

QTC Coloradans (20.0 percent) speak Spanish at home.

These Coloradans range from those who speak some Spanish with their families to those who are linguistically isolated.³ These findings identify places where outreach and enrollment strategies that are in Spanish and tailored to Hispanic culture are likely to be effective.

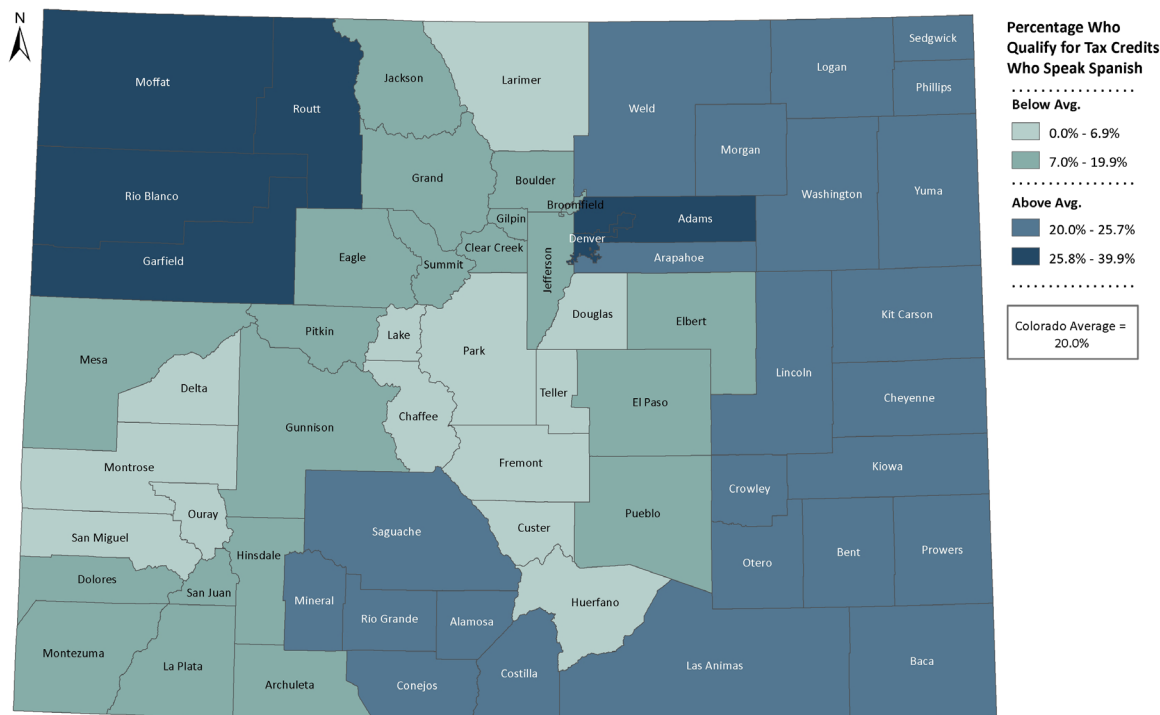
Map 11: Percentage of Uninsured Coloradans (Between Ages 5 and 64) Who Are Eligible For But Not Enrolled (EBNE) in Medicaid or CHP+ And Who Speak Spanish at Home, 2012

- *High percentages of EBNE Spanish language speakers between the ages of five and 64 live in northwestern Colorado and in Denver, Adams and Weld counties. This high rate is disproportionate to the overall number of Spanish speakers in these areas. In Moffat County, for example, in the far northwestern corner of the state, about 17.3 percent of residents speak Spanish at home but 43.2 percent of the EBNE residents are Spanish language speakers.*



Map 12: Percentage of Uninsured Coloradans (Between Ages 5 and 64) Who Qualify for Tax Credits (QTC) And Who Speak Spanish at Home, 2012

• *Northwestern Colorado, the Eastern Plains, the San Luis Valley and Denver and Adams counties are home to significant portions of Spanish language speakers among their QTC populations.*



Sources and Notes

- **Total population:** Only those in the poverty universe- does not include foster children and people living in prisons, nursing homes, mental hospitals, college dormitories or military quarters.
- **EBNE definition:** Uninsured children between the ages of five and 18 with family incomes at or below 265 percent of the FPL who are either citizens or documented non-citizens that have been in the United States for at least five years. Also, uninsured adults between the ages of 19 and 64 with family incomes at or below 138 percent of the FPL who are either citizens or documented non-citizens that have been in the United States for at least five years.
- **QTC definition:** Uninsured children between the ages of five and 18 with family incomes between 265 percent of the FPL and 400 percent of the FPL who are citizens or documented non-citizens. Also, uninsured adults between the ages of 19 and 64 with family incomes between 138 percent of the FPL and 400 percent of the FPL who are citizens or documented non-citizens.

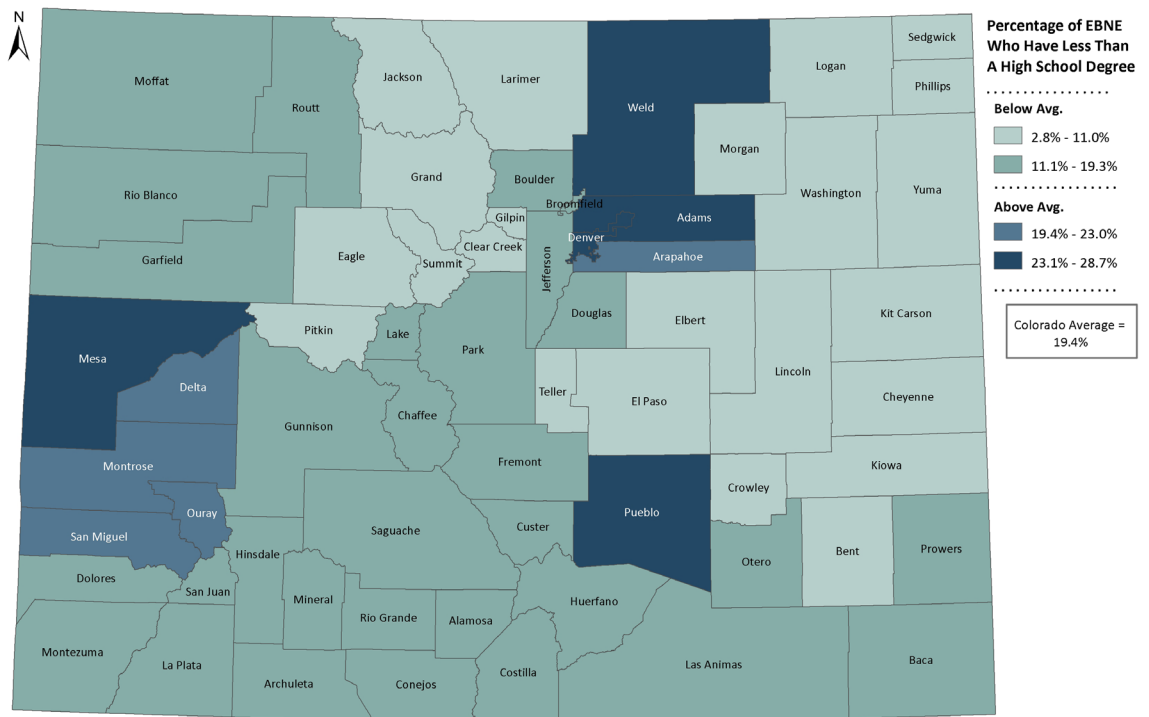
Education

Studies have found that educational levels are often associated with whether a person has health insurance. This is true in Colorado, according to the data. The education levels of EBNE adults are disproportionately lower than the overall Colorado population. EBNE adults are more than twice as

likely as all Coloradans not to have a high school degree. Among the EBNE population, 44.6 percent are high school graduates who have not received higher education compared to about one third of adults in the general population.

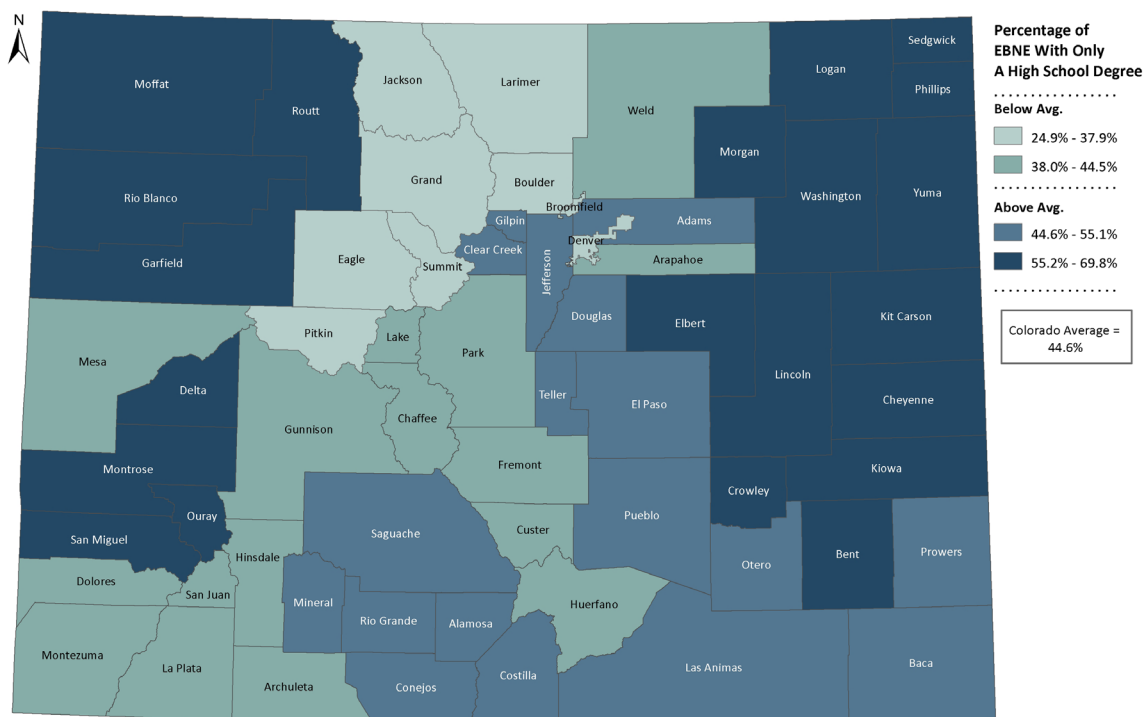
Map 13: Percentage of Uninsured Adults (Between Ages 19 and 64) Who Are Eligible For But Not Enrolled (EBNE) in Medicaid Who Have Less Than a High School Degree, 2012

- High rates of EBNE adults who haven't graduated from high school are found in various pockets around the state, including Mesa, Weld, Adams, Denver and Pueblo counties. Nearly three of 10 (28.7 percent) EBNE adults in Mesa County did not graduate from high school, the highest rate in the state.



Map 14: Percentage of Uninsured Adults (Between Ages 19 and 64) Who Are Eligible For But Not Enrolled (EBNE) in Medicaid With Only a High School Degree, 2012

• *The rate of EBNE adults who ended their education with a high school diploma ranges from 24.9 percent in Boulder County to 69.8 percent in Elbert County. The Eastern Plains, northwestern Colorado and the southwestern counties of Ouray, Delta, Montrose and San Miguel have among the highest rates of EBNE adults with no degree beyond a high school diploma.*



Sources and Notes

• **Total population:** Only those in the poverty universe, which does not include foster children and people living in prisons, nursing homes, mental hospitals, college dormitories or military quarters.

• **EBNE adult definition:** Uninsured adults ages 19-64 with family incomes at or below 138 percent FPL who are either United States citizens or documented noncitizens who have been in the United States for five or more years.



Reasons for Not Having Health Insurance

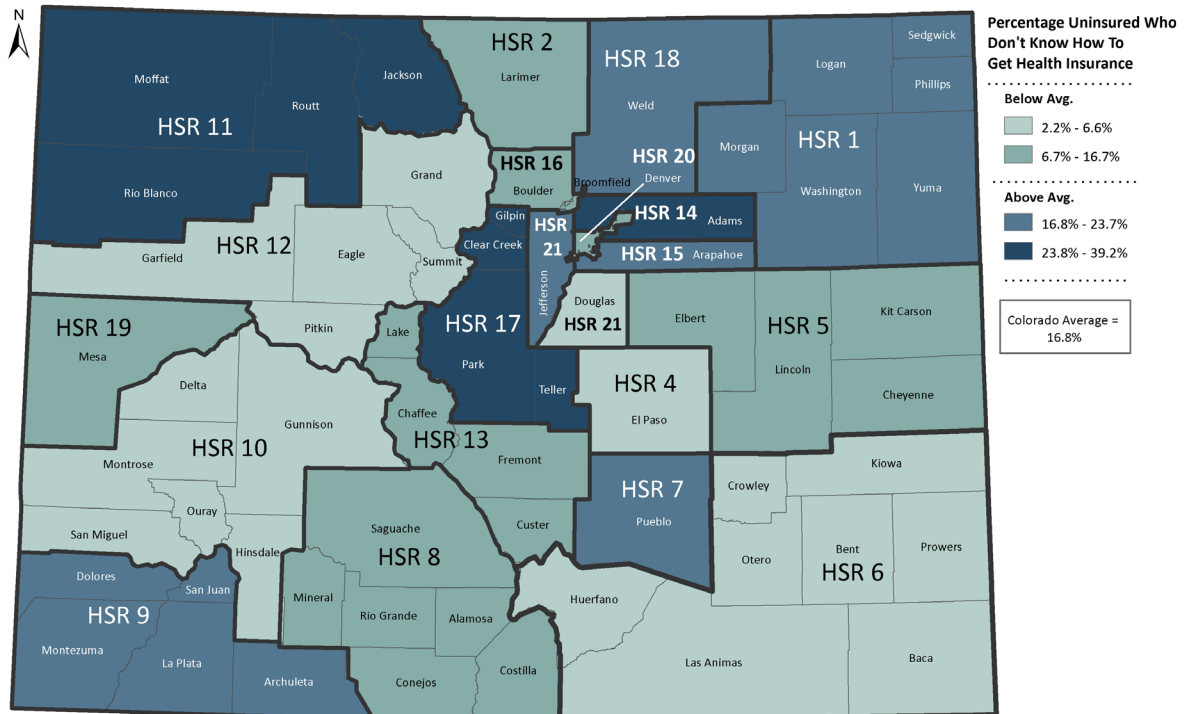
Uninsured Coloradans report a wide range of reasons for not having health insurance, although being unable to afford it is the top reason, according to the Colorado Health Access Survey (CHAS).

Making health insurance more affordable is a key

goal of the ACA. It will be important to monitor whether uninsured Coloradans do begin to see insurance as something they can fit into their budgets. Meanwhile, identifying the other factors preventing Coloradans from obtaining health insurance can inform strategic efforts designed to encourage enrollment.

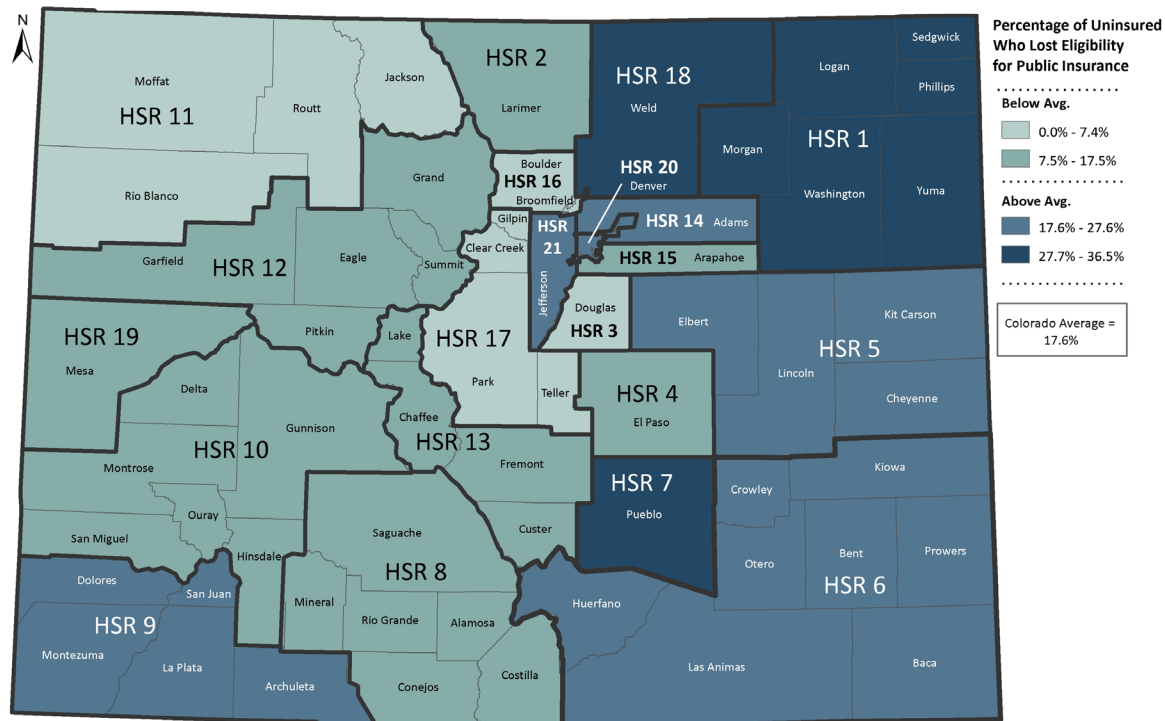
Map 15: Percentage of Uninsured Coloradans At or Below the Age of 64 and With Incomes up To Four Times the Poverty Level Who Report Not Knowing How to Get Health Insurance, 2012

- About 17 percent of uninsured Coloradans said they do not know how to get health insurance. More than one of three uninsured residents of Adams County (Health Statistics Region 14) and Moffat, Rio Blanco, Routt and Jackson counties (Health Statistics Region 11) do not know how to get health insurance, the highest proportions in the state.



Map 16: Percentage of Uninsured Coloradans At or Below the Age of 64 and With Incomes up To Four Times the Poverty Level Who Report Losing Eligibility for Medicaid or CHP+, 2012

- Nearly one of five uninsured Coloradans (17.6 percent) said they lost eligibility for Medicaid or CHP+. The regions with the highest rates include Morgan, Logan, Washington, Sedgwick, Phillips and Yuma counties (Health Statistics Region 1) at 36.5 percent; Weld County (Health Statistics Region 18) at 32.7 percent; Pueblo County (Health Statistics Region 7) at 29.4 percent; and Adams County (Health Statistics Region 14) at 27.6 percent.



Colorado Health Access Survey (CHAS): The Basics

Who: 10,224 randomly selected households with one person at least 18 years old

What: Twenty-minute telephone survey on health insurance, access to health care and use of health care

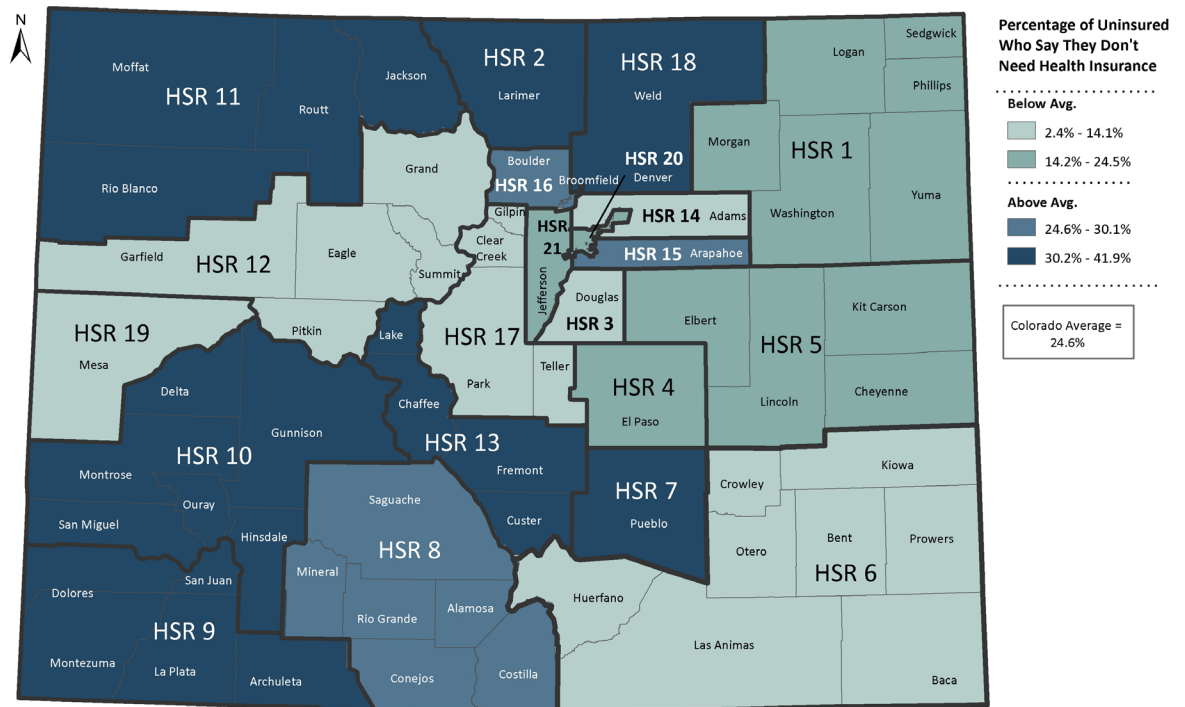
When: Between April 15 and July 27, 2013

Where: Statewide, divided equally among 21 Health Statistics Regions

Map 17: Percentage of Uninsured Coloradans At or Below the Age of 64 and With Incomes up To Four Times the Poverty Level Who Report Not Needing Health Insurance, 2012

• An increasing number of Coloradans do not think they need health insurance, according to the CHAS. The proportion of uninsured Coloradans in this category more than doubled between the 2009 and 2013 surveys, climbing from 11.1 percent in 2009 to 24.6 percent in 2013. This is likely a reaction to the Affordable Care Act's individual mandate to obtain health insurance.

• Rates of uninsured Coloradans who report not needing health insurance are highest in Gunnison, Delta, Montrose, San Miguel, Ouray and Hinsdale counties (Health Statistics Region 10) at 41.9 percent. The uninsured in less populous areas of eastern Colorado (Health Statistics Regions 1, 5 and 6) and some mountain communities (Health Statistics Region 12) are much less likely to indicate that they don't need health insurance.



Sources and Notes

- **Total population:** Uninsured Coloradans ages 0-64 with family incomes at or below 400 percent FPL.
- **Geography:** Results are calculated at the 21 Health Statistics Region (HSR) level. The counties that are their own HSR have the HSR value. The counties that are aggregated with other counties in an HSR all have the same percentage value.



Conclusion

The Colorado Eligibility Atlas underscores the regional differences in the uninsured Coloradans who are eligible but not enrolled in public insurance programs or who are eligible for tax credits to purchase insurance.

These differences – such as employment, education, language and the reasons for being uninsured – provide important insights for implementing the law efficiently and developing targeted outreach and enrollment strategies within communities.

Ensuring that materials are available in Spanish, for example, may be particularly important on the Eastern Plains, where a high percentage of QTC residents are Spanish speakers. Likewise, outreach and enrollment workers may elect to target resort and service industry workers and their families in the Northwest and Central Mountain regions, where the jobs may not provide health coverage benefits.

The maps show that the most EBNE and QTC Coloradans are concentrated along the Front Range, following the overall population characteristics of the state.

However, many local governments, foundations, nonprofit organizations and businesses focus on community-level solutions to local challenges. The Colorado Eligibility Atlas reveals variation between counties in the percentage of EBNE or QTC Coloradans, as well as their characteristics. These findings can inform whether enrollment strategies are focused on reaching the most people or on minimizing disparities across county boundaries.

Colorado's health insurance landscape will continue to evolve. As it changes, the Colorado Health Institute will be monitoring these changes over time at the state and community levels.



Endnotes

¹ 2013 Colorado Health Access Survey, Demographics Workbook, Age - Table 4 "Age and Reasons for Not Having Insurance."

² 2013 Colorado Health Access Survey, Demographics Workbook, Employment – Table 86 "Employment and Insurance."

³ US Census Bureau. American Community Survey Data and Documentation.



Methods Summary

Eligible For But Not Enrolled In Medicaid Or CHP+ (EBNE)

Year: 2012

Data Sources:

- American Community Survey
- Colorado Department of Health Care Policy and Financing

Analysis Based On: Income, documentation status and insurance status

Qualify For Tax Credits (QTC)

Year: 2012

Data Source:

- American Community Survey

Analysis Based On: Income, documentation status and insurance status

Employment Status, Educational Attainment And Spanish Language

Year: 2012

Data Source:

- American Community Survey

Analysis Based On: Income, documentation status and insurance status

Reasons For Being Uninsured

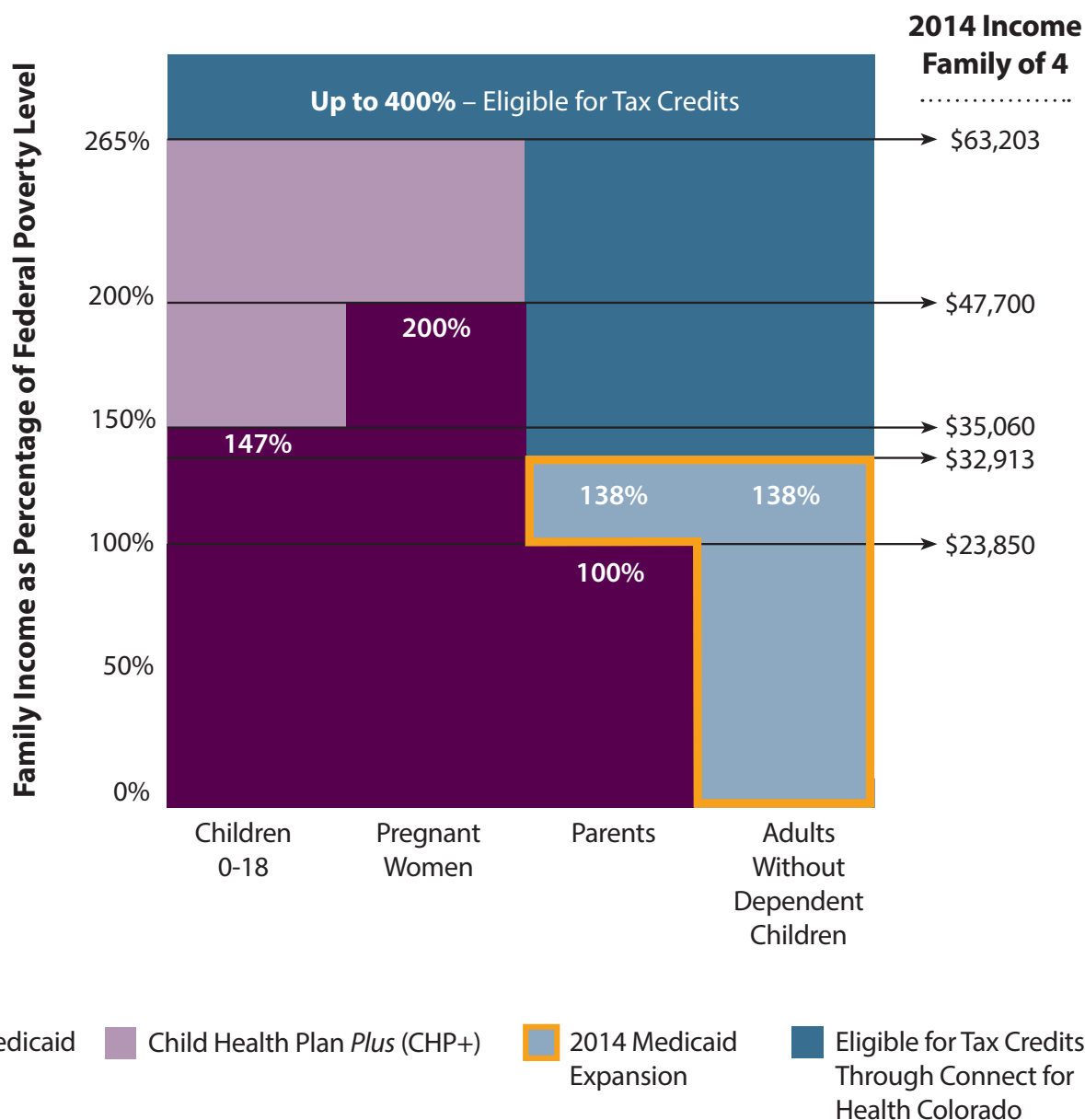
Year: 2013

Data Sources:

- Colorado Health Access Survey

Analysis Based On: Income and insurance status

Eligibility Levels for Public Insurance Programs, by Population, Colorado, 2014



Note: Medicaid and CHP+ eligibility levels reflect new methods of calculating income under the Affordable Care Act and Modified Adjusted Gross Income (MAGI)



The Colorado Health Institute is a trusted source of independent and objective health information, data and analysis for the state's health care leaders. The Colorado Health Institute is funded by the Caring for Colorado Foundation, Rose Community Foundation, The Colorado Trust and The Colorado Health Foundation.

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