

The Dynamics of Demand for Colorado's Safety Net Services



July 17, 2014

Safety Net Advisory Committee (SNAC) Learning Lab



SNAC Lab Objectives

SNAC LABS 2014

- Leverage our collective focus on vulnerable populations
- Provide a forum for opportunities and lessons learned
- Share the latest strategies for using data to measure effectiveness
- Synthesize input from group and develop a shared body of knowledge

Today's Topic for Discussion



What We're Not Discussing Today

POLITICS

Business groups tout poll showing Coloradans back immigration reform

By Jon Murray

The Denver Post

POSTED: 07/09/2014 10:00:42 AM MDT UPDATED: 07/09/2014 10:26:37 AM MDT



The Economist explains

Why America can't fix its immigration problem

Jul 8th 2014, 23:50 by T.N. I LOS ANGELES









ILLEGAL IMMIGRANTS

Immigration crisis: Our Constitution doesn't guarantee entry to the United States









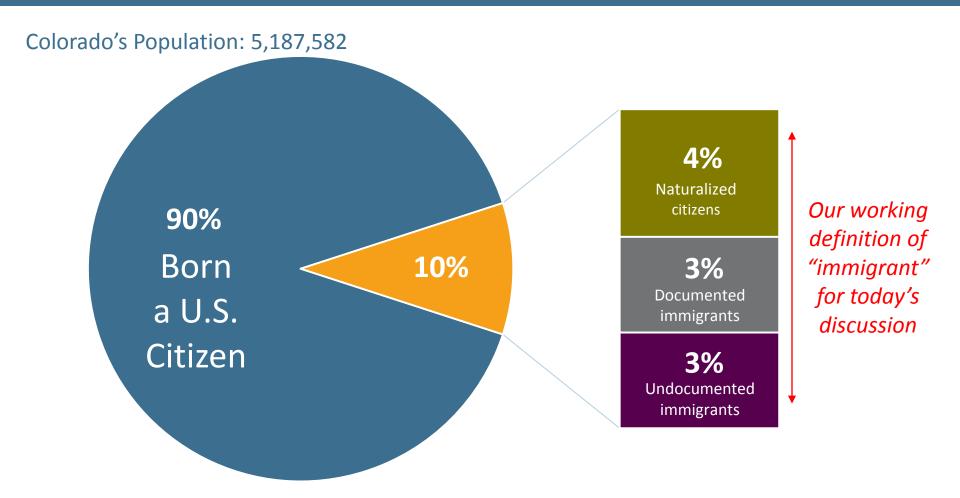
Three Takeaways

- Colorado's non-citizens are a diverse group, but they tend to be low-income and Hispanic.
 Almost half are uninsured.
- Non-citizens report worse health and use less health care than citizens, but they don't report the usual barriers to care.
- Language, cultural sensitivity and trust are critical factors to providing access to care for Colorado's non-citizen population.



Immigrants in Colorado: Demographics

Who Lives in Colorado?

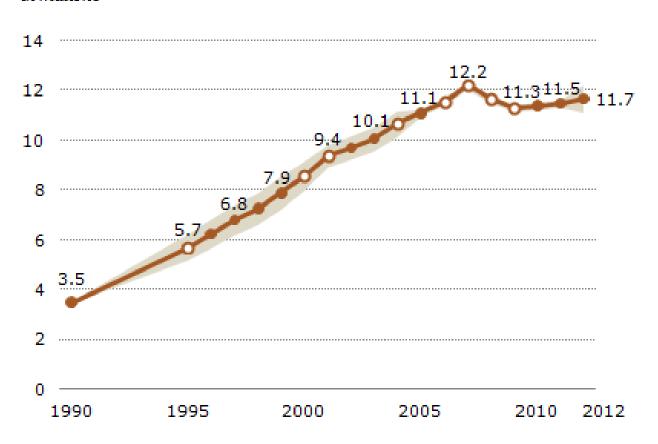




Number of Undocumented Immigrants in Flux

Estimates of the U.S. Unauthorized Immigrant Population, 1990-2012

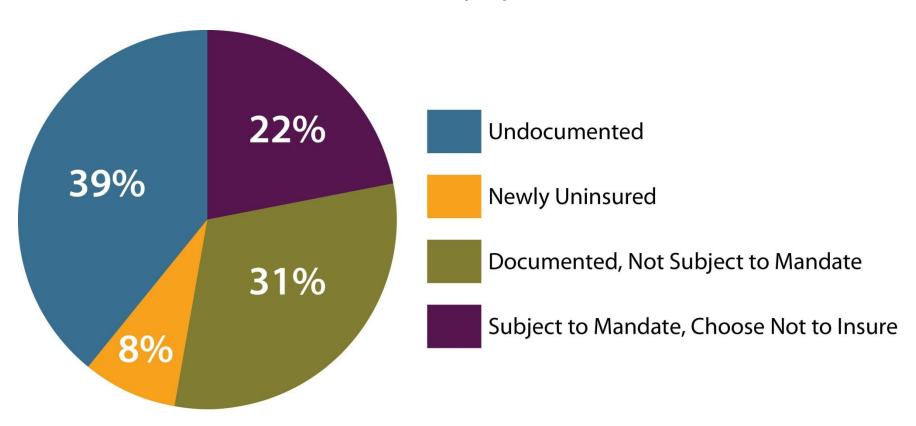
in millions





Many Remaining Uninsured Will Be Undocumented

Estimate: In 2016, 390,000 people in Colorado will still be uninsured.



Source: Colorado Health Benefit Exchange Research, Prepared by Jonathan Gruber, January 2012



Non-Citizens Younger, Many Low Income

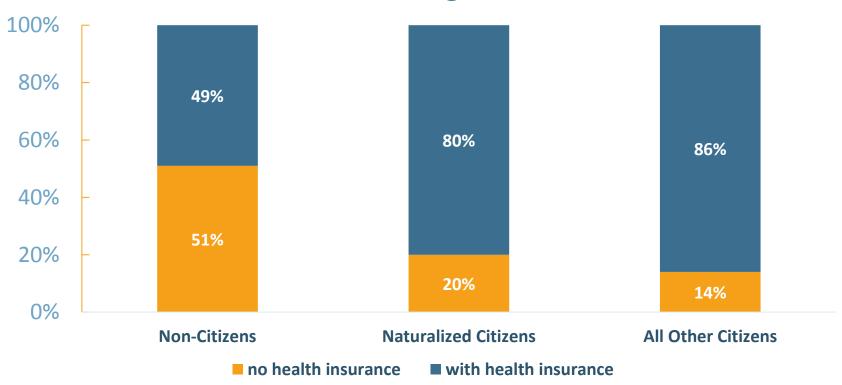
Demographics by Citizenship Status, Colorado, Ages 0-64

	Non-Citizen	Naturalized Citizens	All other Citizens
Median Age	34	42	30
Median Number of Years in the U.S.	11	20	n/a
Median Federal Poverty Level (FPL)	150% FPL	294% FPL	291% FPL

Source: 2012 American Community Survey

Non-Citizens More Likely to be Uninsured

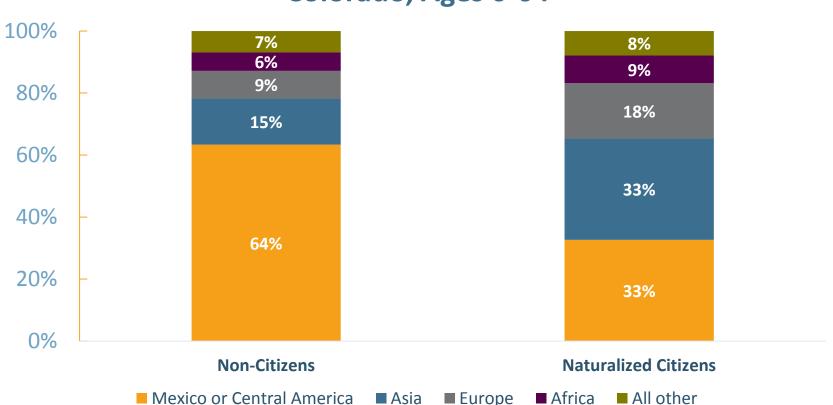
Health Insurance by Citizenship Status, Colorado, Ages 0-64





Non-Citizens Mostly from Mexico and Central America

Immigrants' Region of Origin, Colorado, Ages 0-64



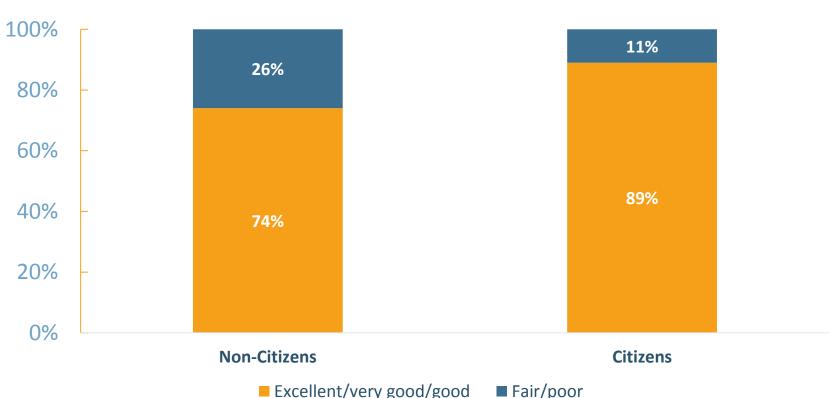
Source: 2012 American Community Survey



Health Status and Barriers to Care

Non-Citizens Report Worse Health

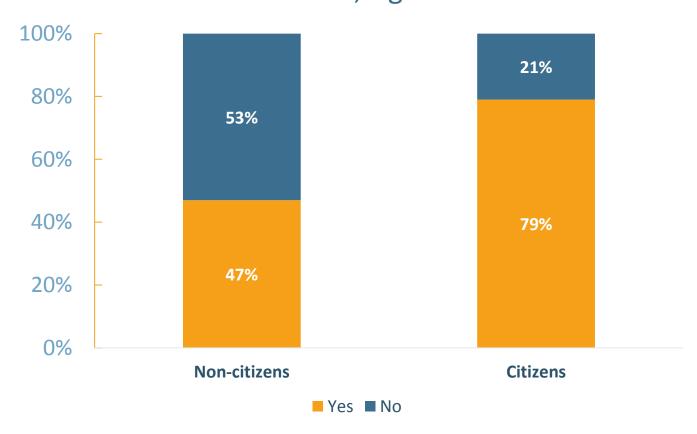
Self-Reported General Health Status, Colorado, Ages 0-64



Source: 2013 Colorado Health Access Survey

Non-Citizens Less Likely to Get Medical Care

Visited a medical provider in the past 12 months, Colorado, Ages 0-64





No Significant Difference in Reported Barriers to Care

No statistically significant differences in reported barriers to care between citizens and non-citizens. You couldn't...

Fill a prescription that you needed due to cost

Get doctor care that you needed due to cost

Get specialist care that you needed due to cost

Get dental care that you needed due to cost

Get an appointment at the doctor's office when you needed one

Get an appointment because the doctor's office wasn't accepting patients with your type of health insurance

Get an appointment because the doctor's office wasn't accepting new patients

Find transportation to the doctor's office/ it was too far away

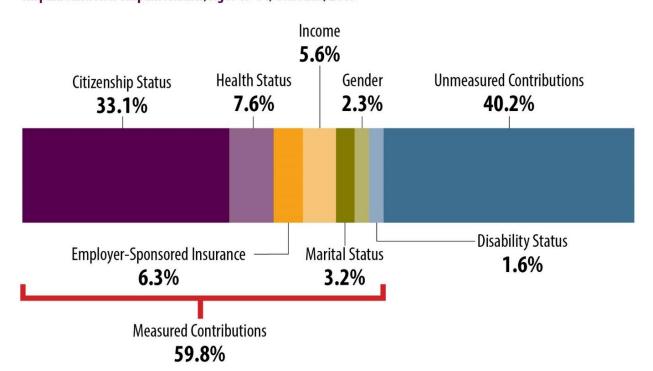
Take off from work (asked of employed*)



Unmeasured Contributions to the Coverage Gap

In Colorado, Hispanic adults are nearly twice as likely to be without health insurance as the rest of the state adult population.

Graph 1. Factors Associated With the Health Insurance Disparity between Hispanic and Non-Hispanic Adults, Ages 19-64, Colorado, 2013







What Is Working Well? Where Are The Gaps?

Questions For You

- How does your organization work with the immigrant community?
 - A particular focus on serving immigrants?
 - Language resources?
 - Cultural resources?
 - Many, some, or few immigrants seeking services?
- Has this changed over time?
- What are the challenges today?

The Clinical Perspective: Key Considerations

- Language
- Culture
- Establishing trust
- Identifying available resources
- Financial sustainability of caring for the remaining uninsured

Questions for You

- How does your organization work with the immigrant community?
 - A particular focus on serving immigrants?
 - Language resources?
 - Cultural resources?
 - Many, some, or few immigrants seeking services?
- Has this changed over time?
- What are the challenges today?

Three Takeaways

- Colorado's non-citizens are a diverse group, but they tend to be low-income and Hispanic.
 Almost half are uninsured.
- Non-citizens report worse health and use less health care than citizens, but they don't report the usual barriers to care.
- Language, cultural sensitivity and trust are critical factors to providing access to care for Colorado's non-citizen population.



Idea Dialogue: Painting the Access Picture

What is the Access-to-Care Dashboard?

Working Definition:

A synthesis of the best data available over time to understand whether Coloradans have access to the care they need.

Why Compile This Data?

To address the questions:

- What are the dimensions of access to care?
- Do Coloradans have adequate access?
- Is coverage translating into access?
- What would we expect to happen to Coloradans' access when policy changes are implemented?

Guiding Principles

- Monitor over the long term needs to be updatable.
- Make straightforward and accessible.
- Vet with stakeholders.
- Recognize the differences among subpopulations: geographic, age, race/ethnicity, income.

How Will the Metrics Be Developed?

Modeled after Urban Institute Framework

Insurance Coverage

- Uninsured
- Types of Coverage
- Eligibility
- Coverage-Related Barriers

Potential Access

- Usual Source of Care
- Provider Availability
- Health Care Infrastructure

Realized Access

- Barriers to Care
- Receipt of Timely and Appropriate Care
- Volume of Services

Questions for You

- Are we on the right track?
- How might you use the dashboard?
- In what ways can you participate?

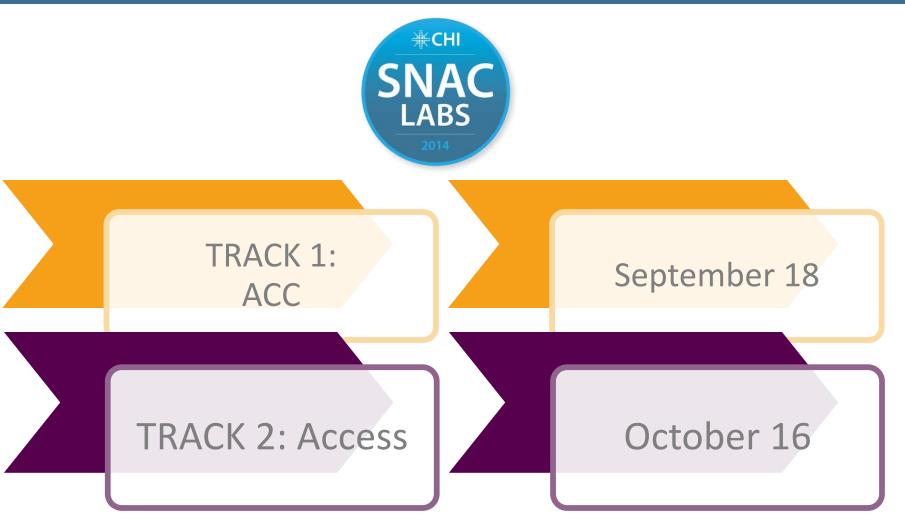


Next Steps

- Formation of SNAC Work Group to iron out the details.
- Compile the data.
- Test the dashboard with CCMU's Health is Local communities.
- Roll out in late summer/early fall 2014.



Two-Track SNAC Labs









Jeff Bontrager Anna Vigran 720.382.7075 720.382.7095 <u>Bontragerj@coloradohealthinstitute.org</u> <u>Vigrana@coloradohealthinstitute.org</u>