

Low-Income, Uninsured Mainers Face Substantial Challenges Getting Health Care

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INTRODUCTION

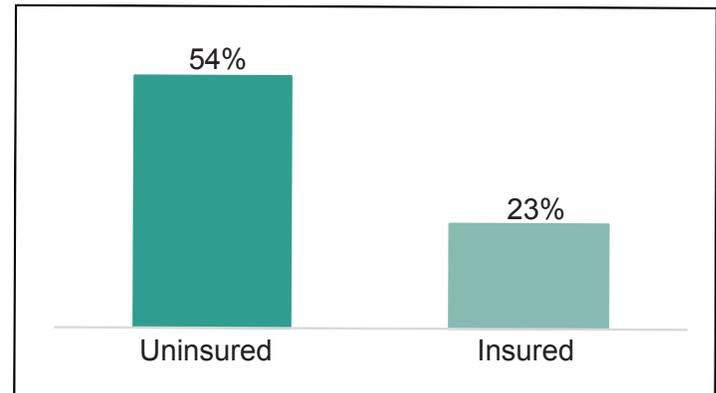
In Maine, an estimated 112,700 adults age 19-64 have incomes below 138 percent of the federal poverty level (FPL).¹ For single individuals, this represents an income of \$16,753 per year, or \$22,715 for families of two in 2018. An estimated 71,500 adults¹ are newly eligible for Medicaid pending implementation of the recent vote in support of expansion of the program under the Affordable Care Act (ACA). In the absence of Medicaid expansion, those with family incomes below the federal poverty level have lacked opportunities to gain health insurance coverage as they are ineligible for subsidized health plans through the ACA Marketplace. There is ample evidence that individuals without health insurance coverage can have difficulty obtaining the health care that they need, which can lead to untreated illness and poor health over time.

To understand the experiences of low-income, uninsured Maine adults, this brief uses data from the 2013-2017 Health Reform Monitoring Survey (HRMS) to examine health care access for adults aged 18-64 with family incomes below 138% FPL (See Methods Note for a brief description of the HRMS). Throughout the brief, we refer to individuals with incomes below 138% FPL as “low-income.” These adults are eligible for expanded Medicaid under the ACA. For each indicator of access, we compare individuals who are uninsured to those who have health insurance coverage.

TROUBLE FINDING DOCTORS

Having a usual health care provider is a common measure of health care access, because an ongoing relationship with a provider can ensure that individuals receive routine check-ups and prompt illness care. More than half of Maine’s low-income uninsured adults (54%) do not have a regular provider they can see for health care services, a rate more than double that of those with health insurance (Figure 1).

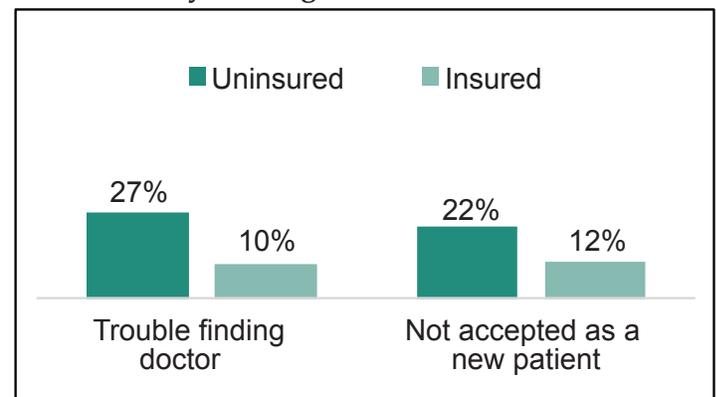
Figure 1: Percent of Low-Income Adults 18-64 Who Did Not Have a Usual Source of Health Care



Source: Health Reform Monitoring Survey (HRMS) 2013-2017
Note: All uninsured-insured differences significant at $p < .05$

The lack of a regular health care provider among uninsured adults in Maine may be related to greater difficulty finding a provider who will accept them as patients. As shown in Figure 2, uninsured low-income adults are almost three times as likely to report trouble finding a doctor (27% versus 10% among the insured). Compared with those with health insurance, Maine’s uninsured are about twice as likely to say that they are unable to find a provider to accept them as a new patient (12% versus 22%, Figure 2).

Figure 2: Percent of Low-Income Adults 18-64 Who Had Difficulty Finding a Health Care Provider

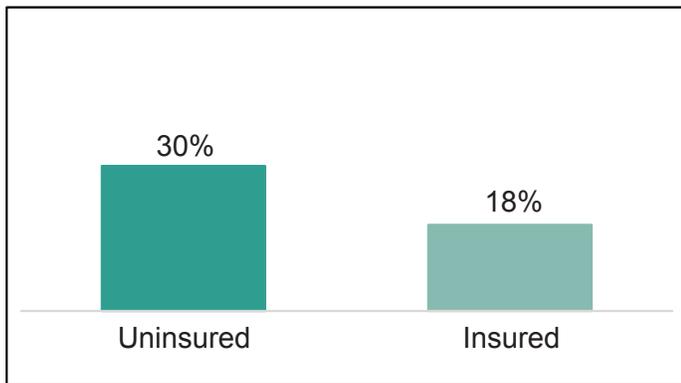


Source: Health Reform Monitoring Survey (HRMS) 2013-2017
Note: All uninsured-insured differences significant at $p < .05$

DELAYED APPOINTMENTS AND ROUTINE CHECK-UPS

The challenges that uninsured adults face in finding providers who will see them is likely to impact their ability to access timely health care services. For example, adults without health insurance are more likely than the insured to say they had trouble getting an appointment with a health care provider as soon as they needed (30% versus 18%, Figure 3).

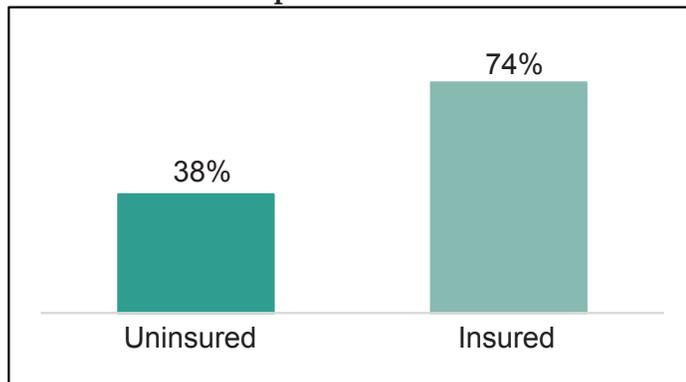
Figure 3: Percent of Low-Income Adults 18-64 Who Had Trouble Getting an Appointment As Soon As it Was Needed



Source: Health Reform Monitoring Survey (HRMS) 2013-2017
Note: All uninsured-insured differences significant at $p < .05$

Routine health care appointments, such as annual preventive exams, are important for maintaining health and for identifying health care problems early when they are most treatable. Yet just over one-third (38%) of uninsured low-income adults in Maine report having had a check-up within the past year. Compared with almost three-fourths (74%) of low-income adults who have health insurance coverage (Figure 4). The lack of regular check-ups is a concern because of the potential impact on long term health.

Figure 4: Percent of Low-Income Adults 18-64 Who Had a Check-up Within Past Year

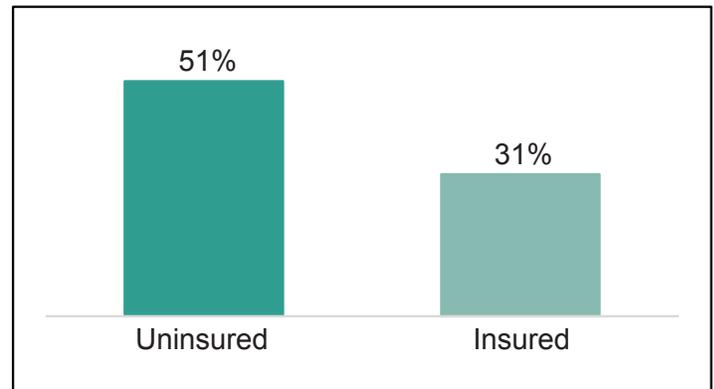


Source: Health Reform Monitoring Survey (HRMS) 2013-2017
Note: All uninsured-insured differences significant at $p < .05$

PROBLEMS AFFORDING HEALTH CARE

While health care affordability can be an issue for all low-income adults, being uninsured is associated with greater challenges in being able to afford needed health care services. For example, as shown in Figure 5, about half of Maine's low-income, uninsured adults indicate that they have had problems paying their medical bills (51% versus 31% of the insured).

Figure 5: Percent of Low-Income Adults Who Had Problems Paying Medical Bills



Source: Health Reform Monitoring Survey (HRMS) 2013-2017
Note: All uninsured-insured differences significant at $p < .05$

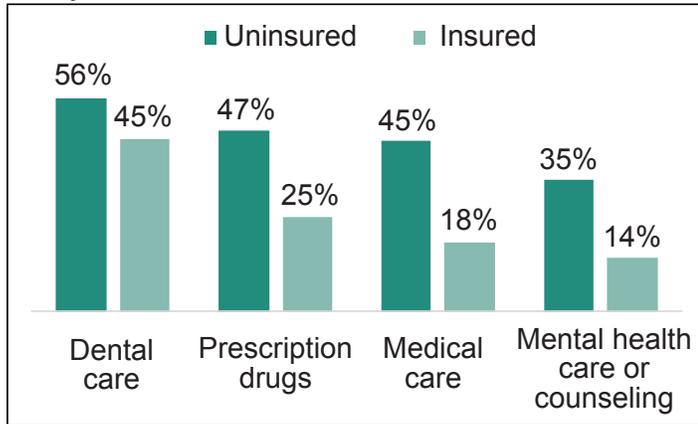
In addition to having problems paying for medical care they receive, uninsured low-income adults also frequently delay or go without needed health care services because of the cost (Figure 6). While accessing dental services is a financial problem for all low-income Maine adults, those without health insurance report somewhat higher rates of delayed or forgone dental care (56% versus 45%).

For other types of medical care services, the difference in access for uninsured versus insured low-income Maine residents was even more pronounced. Nearly half (47%) of uninsured low-income adults report delaying or forgoing needed prescription medications compared with only 25% of those with health insurance coverage. Forty-five percent of those without insurance put off or went without needed medical care and 35% went without needed mental health care, versus 18% and 14% of their insured counterparts, respectively.

CONCLUSION

Access to affordable health care services is a challenge for many of Maine's low-income adults; however, these challenges are particularly pronounced for those who lack health insurance coverage. Compared with

Figure 6: Percent of Low-Income Adults 18-64 Who Delayed or Went Without Care Because of Costs



Source: Health Reform Monitoring Survey (HRMS) 2013-2017
 Note: All uninsured-insured differences significant at $p < .05$

their insured counterparts, low-income uninsured Mainers have more trouble finding a health care provider to see them, are less likely to seek needed medical services, and have greater difficulty paying their medical bills when they do obtain health care. These access problems place low-income, uninsured Maine adults at risk of poorer health if they are not adequately managing health care conditions or if new conditions are identified much later than they would be with health insurance coverage.

METHODS NOTE

This brief is based on data from Maine’s oversample of the Health Reform Monitoring Survey, a national survey of the nonelderly population designed to monitor the ACA. The core HRMS is funded by the Robert Wood Johnson Foundation and the Urban Institute, and the Maine Health Access Foundation has supported an oversample for Maine during Quarter 4 2013, Quarter 4 2014, Quarter 1 2016, and Quarter 1 2017. Survey questions include detailed information about health insurance coverage, health status, and access to health care services. The survey is administered online by GfK Custom Research through their Knowledge Panel®, a sample of adults living in the U.S. Maine’s sample includes “opt-in” respondents who volunteer to participate in surveys. More information about GfK Custom Research and the Knowledge Panel® can be found at: <http://hrms.urban.org/faq.html>

REFERENCES

1. *Estimated Budget Impacts of Expanding MaineCare*. New York, NY: Manatt Health; February 27, 2018.