

A faded background image of a family sitting on a wooden floor. A woman is holding a sleeping baby, and a man is sitting next to her, smiling. The text is overlaid on a blue rectangular box.

Rhode Island Health Information Survey (HIS) *Results for 2015*

Final Report
October 2015

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- 1. Executive Summary**
- 2. Primary Type of Health Insurance Coverage**
- 3. Demographic Characteristics of the Uninsured**
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- 11. Medical Expenses and Access to Care**
- 12. Health Services Usage**

Executive Summary

◆ Purpose

- Obtain current, state-specific information about insurance in Rhode Island
- Obtain comparison to HIS 2012 data using same survey/methodology

◆ About the Survey

- HIS 2012 and HIS 2015 both conducted by Market Decisions of Portland, ME
- Surveys conducted by phone only (including landlines and cell phones)
- Funded by federal Establishment funds thru HSRI
- Surveyed 5,000 households, 12,000 individuals,
- Excluded institutionalized population
- Surveys conducted in English and Spanish
- Based on the Coordinated State Coverage Survey (CSCS) designed by SHADAC (State Health Access Data Assistance Center)
- Data was weighted to match known state demographic data from the Census Bureau American Community Survey
- Medicaid and HSRI enrollment data was calibrated to match available administrative data on state enrollees

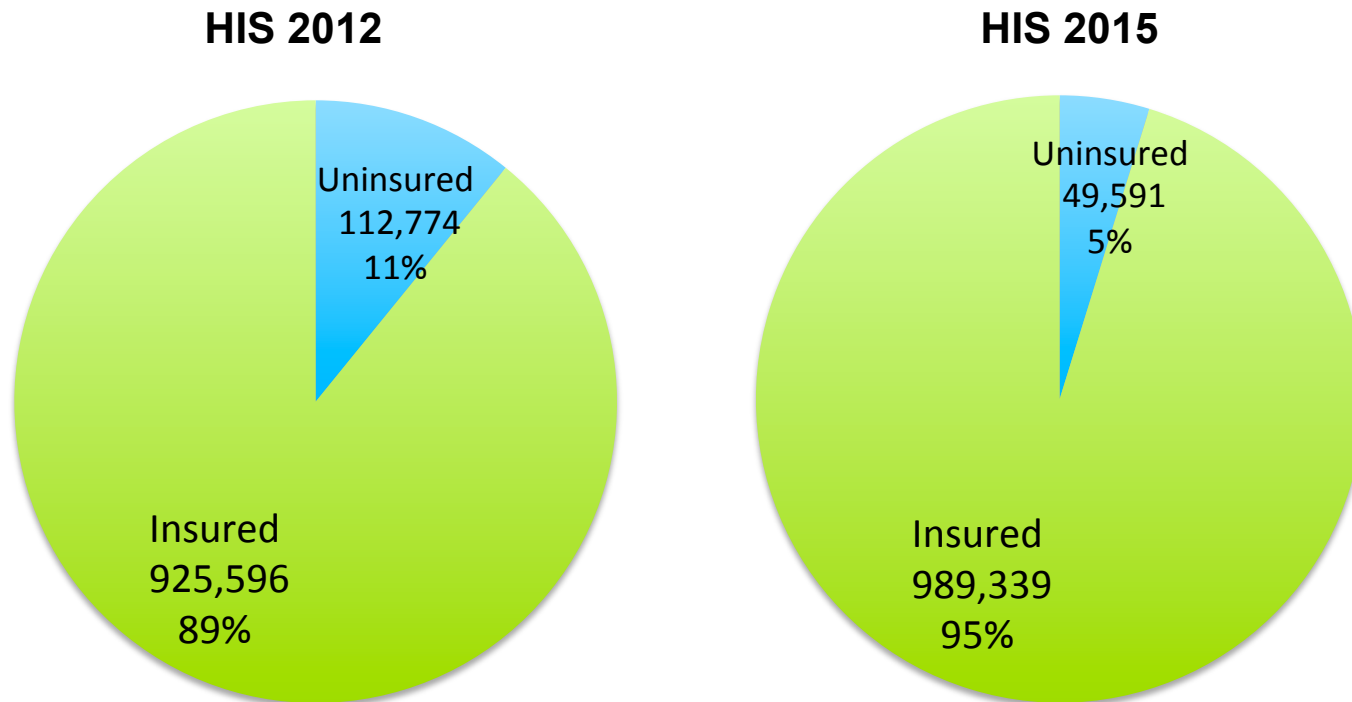
Executive Summary

The percentage of Rhode Islanders lacking health insurance has been reduced by more than half since 2012.

- ◆ As of September 2015, HealthSource RI has enrolled over 37,000 in health coverage, and in partnership with the federal government, has connected more than 30,000 Rhode Islanders with financial assistance to make private health insurance affordable.
- ◆ An additional 82,000 Rhode Islanders have enrolled in Medicaid since 2012 under expanded eligibility rules.
- ◆ The number of uninsured residents has been reduced from just fewer than 113,000 before the Affordable Care Act was signed to just fewer than 50,000 today.
- ◆ Nearly half the remaining uninsured have incomes that make them eligible for Medicaid, another 41 percent have incomes that would likely qualify them for a federal health insurance premium tax credit through HSRI.
- ◆ The remaining uninsured Rhode Islanders are more likely to be young, male, and earn less than 200 percent of the federal poverty level.
 - Results also suggest that the remaining uninsured are disproportionately adults without children and are in slightly worse health than the general Rhode Island population.
 - One-third of the remaining uninsured have been uninsured for less than 6 months
- ◆ Finally, uninsured Rhode Islanders with incomes over 138 percent of the federal poverty level indicate cost and concerns about eligibility as the main reasons why they are not enrolled in state-sponsored insurance.

Executive Summary

The **Uninsured population** has declined by 63,000 individuals, from 113,000 in 2012 to 50,000 in 2015 according to HIS.



Includes non-institutionalized population only. Uninsured includes ~1,000 uninsured over 65 in both datasets.
Margin of error = < 1%.

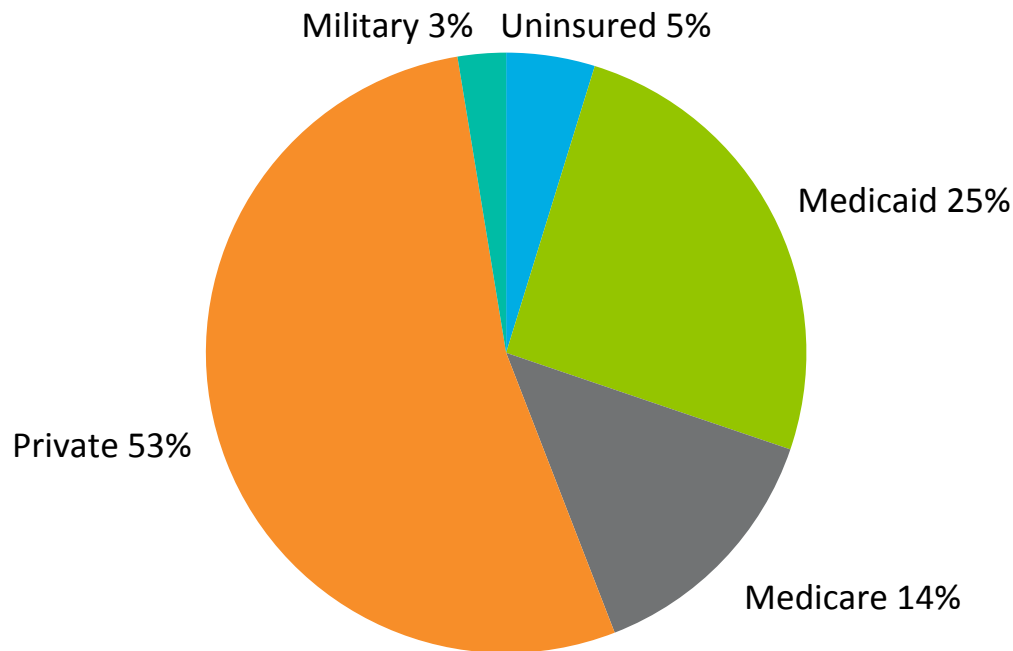
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Primary Type of Health Insurance Coverage

HIS 2015 shows 5% of the Rhode Island population is uninsured.

Breakdown of Insurance Status by Primary Insurance Type



Note: Primary type of health insurance coverage classifies residents with more than one type of insurance into a single category based upon a specific hierarchical order. See next slide for details.

Primary Type of Health Insurance Coverage

◆ Definitions: Primary Insurance Coverage

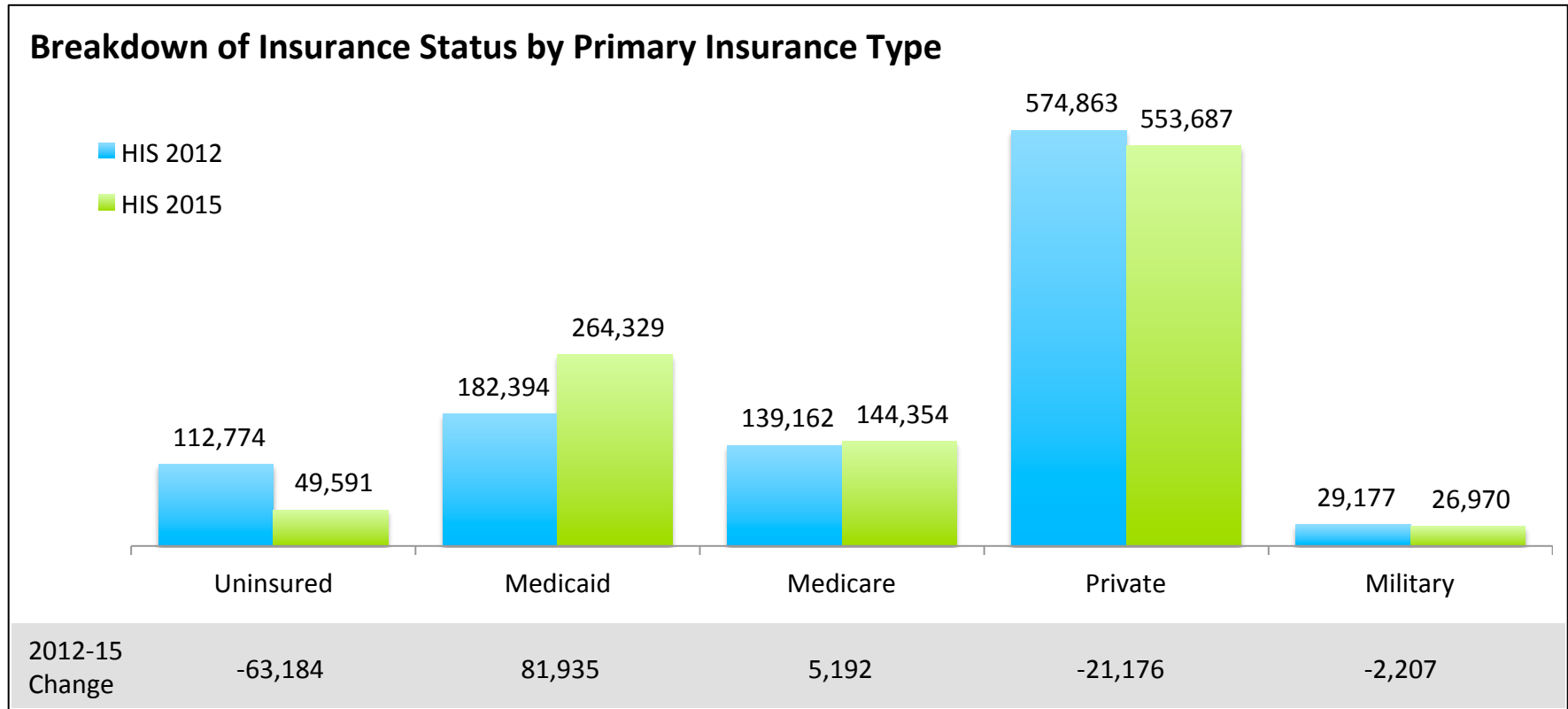
- **Uninsured** are those with no coverage at the point in time the survey interview was conducted
- **Medicare** is mainly residents over 65 (88% of Medicare enrollment).
- **Private insurance** includes both employer-based and individual market coverage, including coverage through HSRI.
- **Medicaid** includes RItCare, RItShare, Rhody Health Partners, Rhody Health Options, Connect Care Choice, medical assistance, etc.
- **Military** includes veterans and TRICARE coverage

◆ Primary Insurance Hierarchy

- The primary type of insurance is assigned in a hierarchy in cases where an individual has more than one type of coverage based on which insurance would likely be the primary payer.
- The hierarchy used in this section is as follows, with those lower on the list trumping those higher:
 - Military Health Insurance
 - Private Health Insurance
 - Medicare
 - If covered by both Military and Medicare person is assigned to Military Health Insurance
 - Medicaid, RItCare, RItShare

Primary Type of Health Insurance Coverage

Between HIS 2012 and HIS 2015, the number of uninsured decreased from 113,000 to 50,000.



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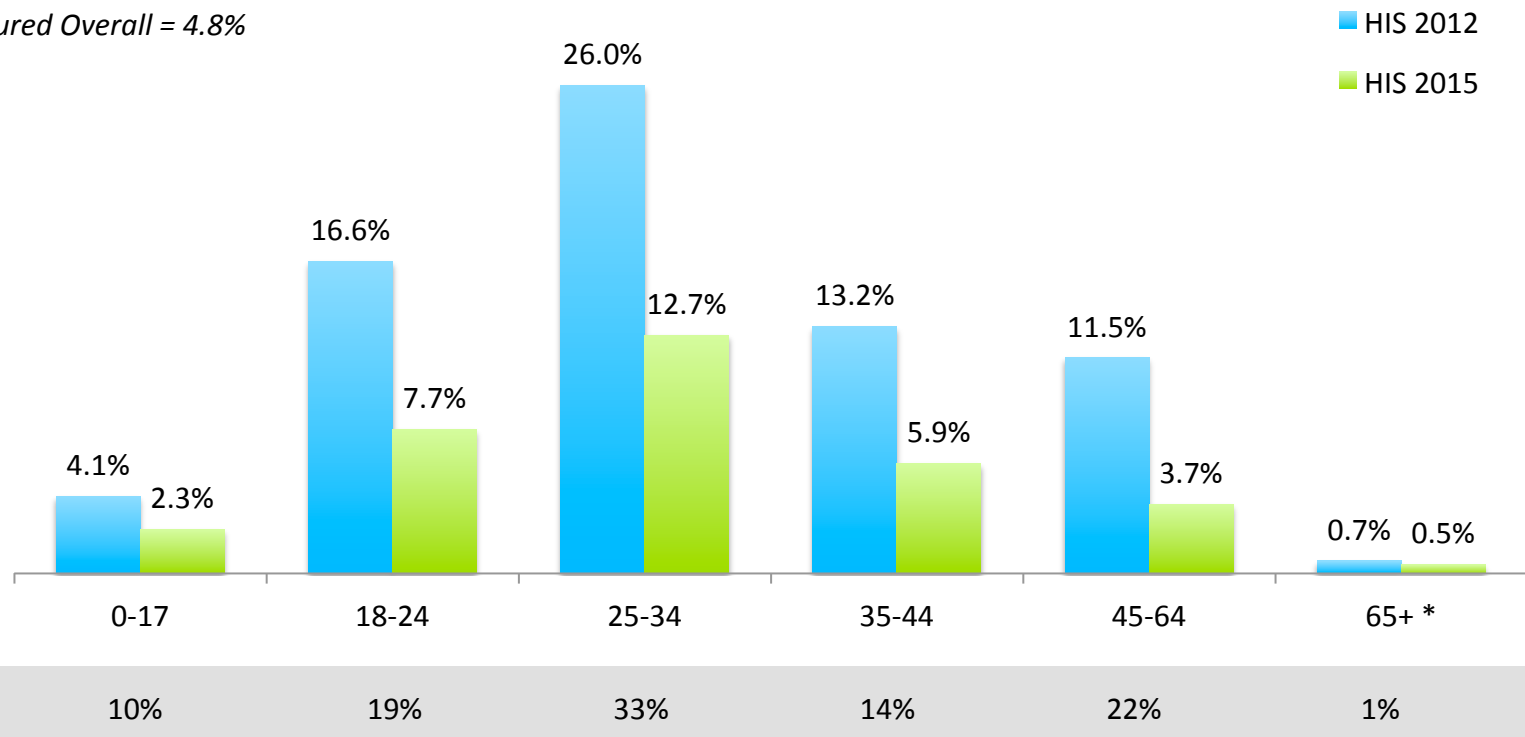
Demographic Characteristics of the Uninsured

Residents between ages 25 and 34 have the highest uninsured rate.

Uninsured Rate by Age

HIS 2012 Uninsured Overall = 10.9%

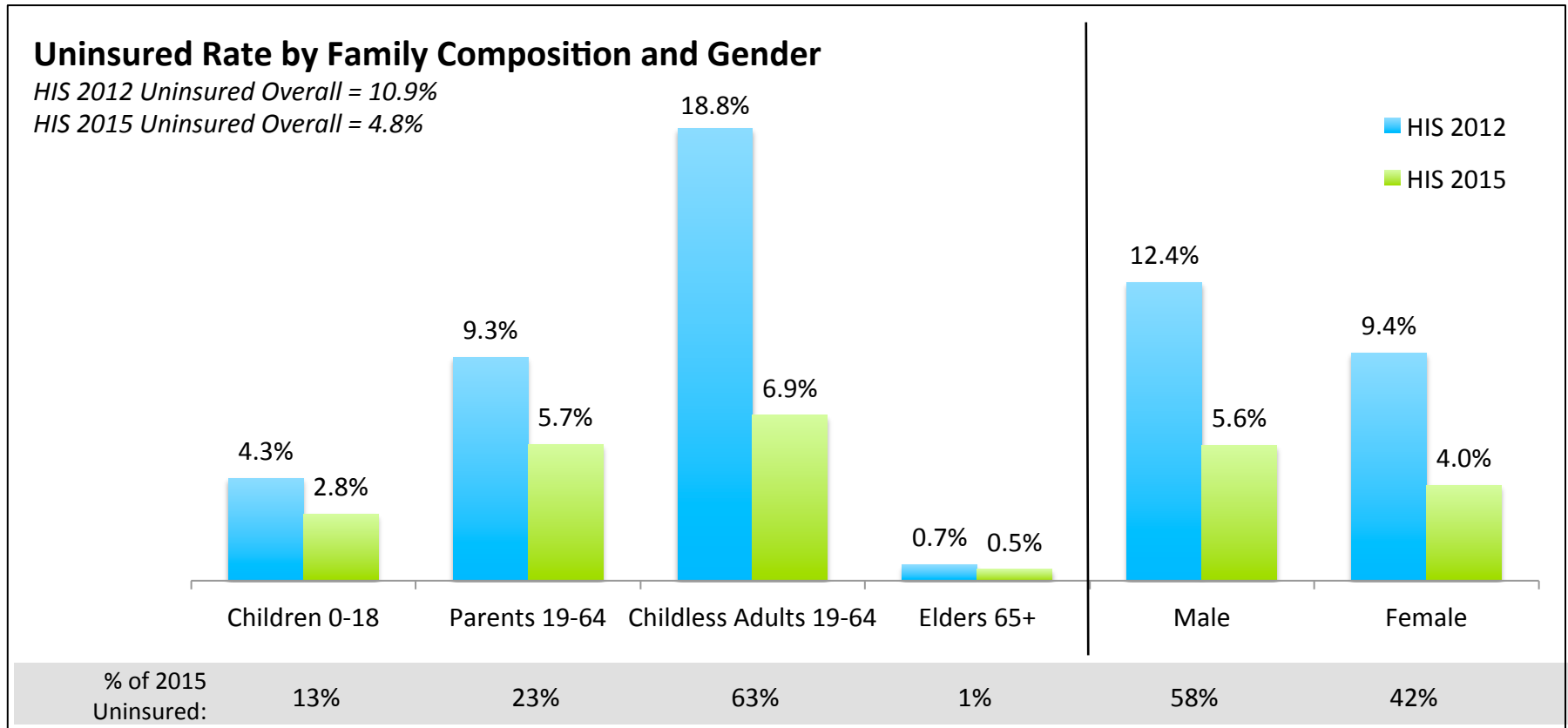
HIS 2015 Uninsured Overall = 4.8%



*Reasons for an individual over 65 to not be in Medicare include citizenship status and waiting periods, among others.

Demographic Characteristics of the Uninsured

Childless adults make up nearly two-thirds of the uninsured and have the highest uninsured rate. Males have an uninsured rate of 5.6% in 2015 compared to 4.0% for females.



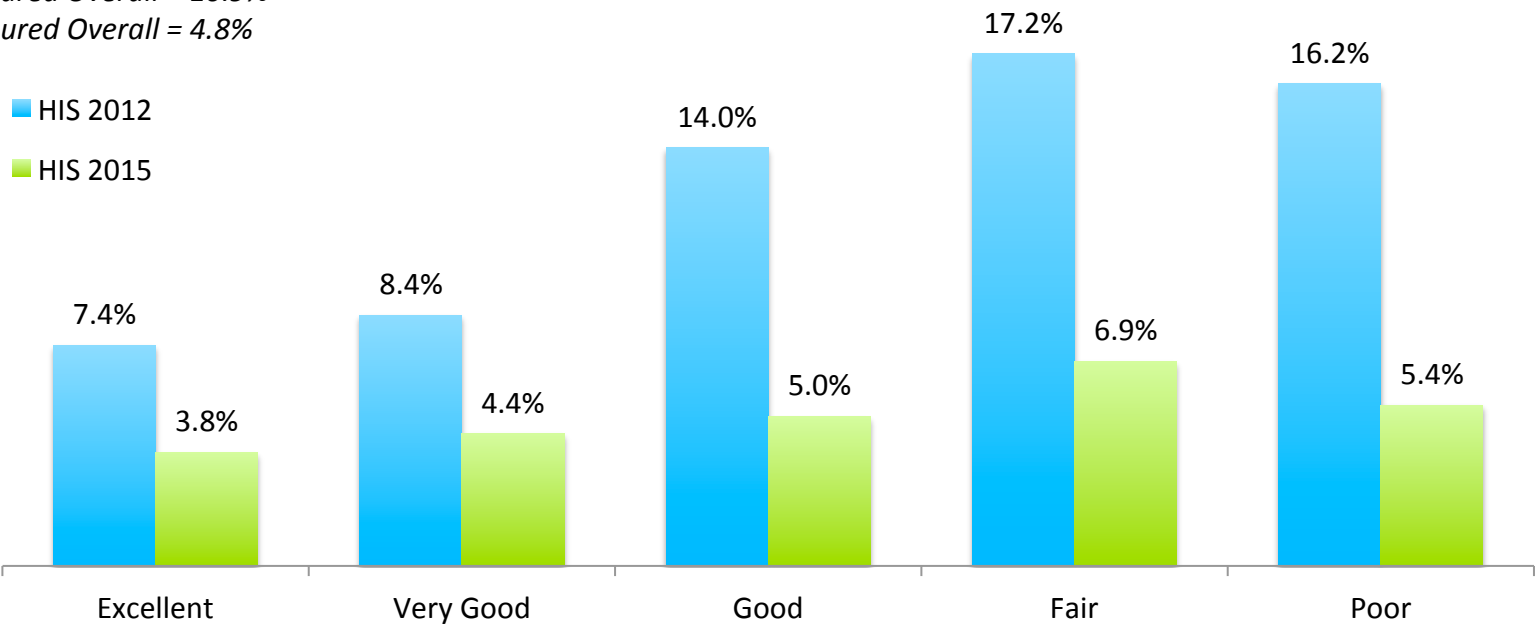
Demographic Characteristics of the Uninsured

Residents who characterize themselves as in Fair or Poor health have higher uninsured rates than those who characterize themselves in good or better health.

Uninsured Rate by Health Status

HIS 2012 Uninsured Overall = 10.9%

HIS 2015 Uninsured Overall = 4.8%



% of 2015
Uninsured:

22%

29%

29%

15%

4%

2% of uninsured did not answer question

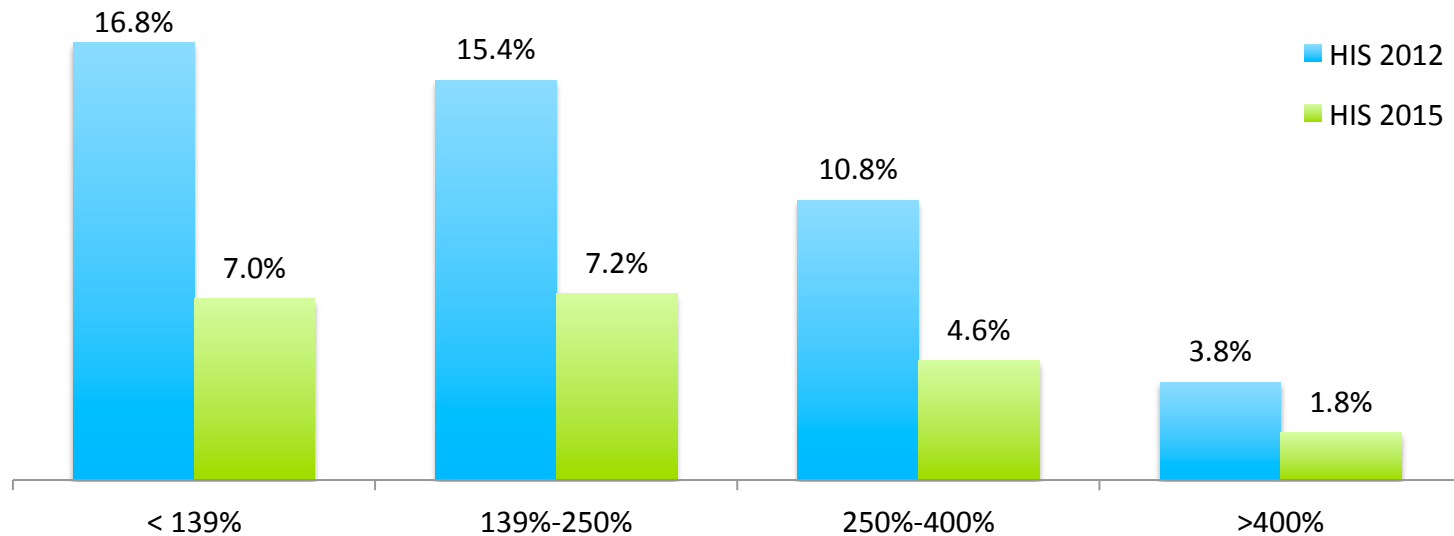
Demographic Characteristics of the Uninsured

The uninsured rate is higher among those with lower incomes.

Uninsured Rate by Income Level

HIS 2012 Uninsured Overall = 10.9%

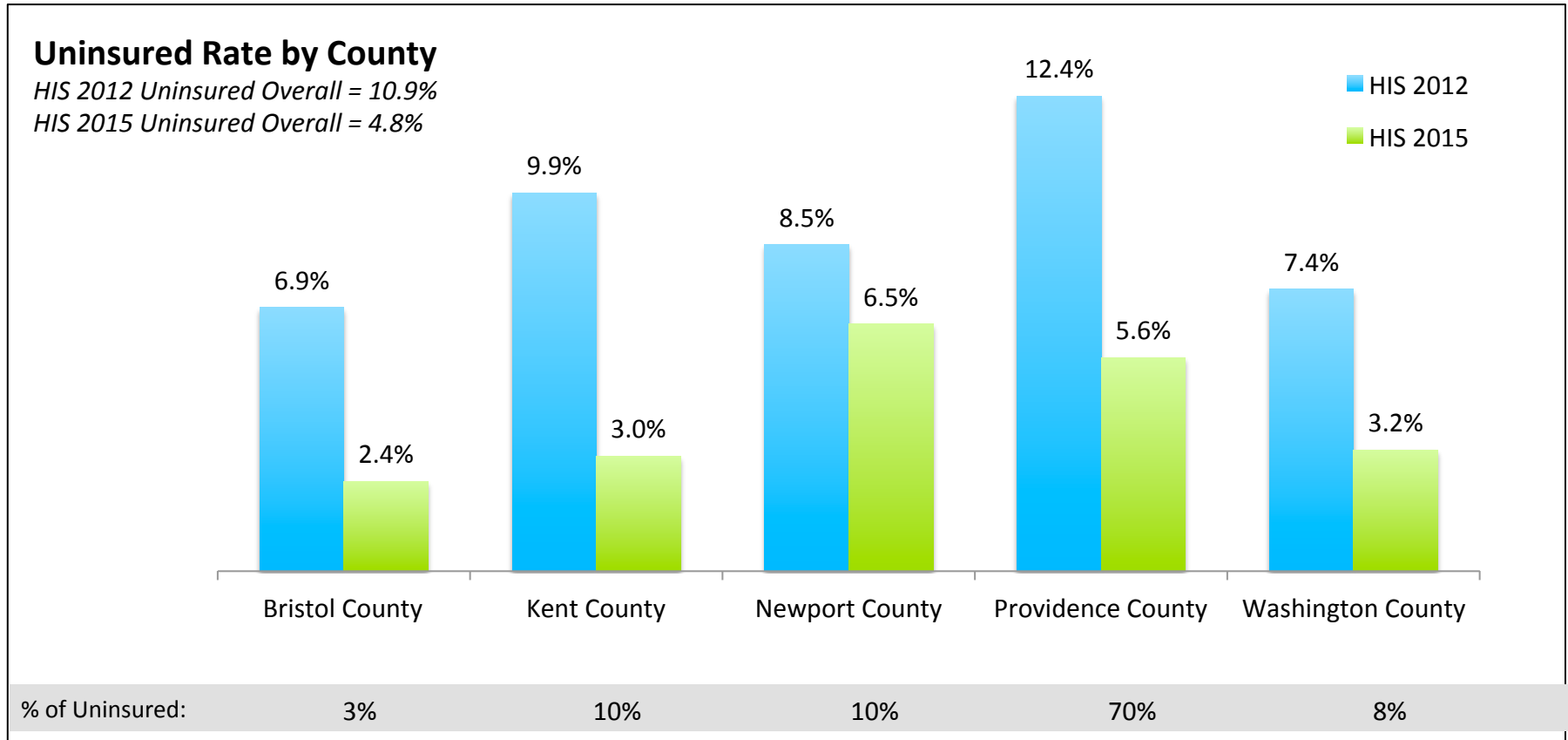
HIS 2015 Uninsured Overall = 4.8%



% of Uninsured:	46%	23%	18%	13%
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Demographic Characteristics of the Uninsured

70% of the uninsured reside in Providence county.



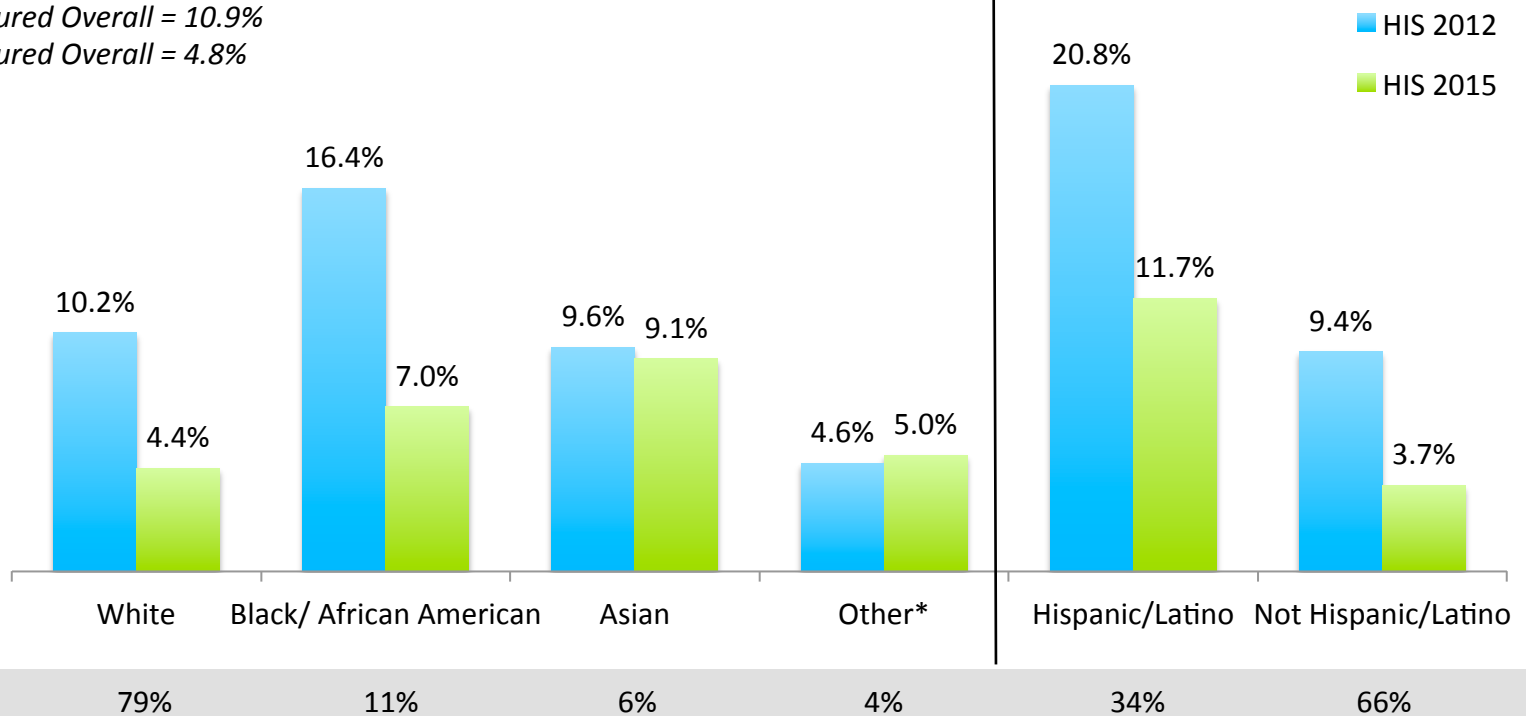
Demographic Characteristics of the Uninsured

Uninsured rates are still much higher among minorities, especially the Hispanic/Latino population.

Uninsured Rate by Race/Ethnicity

HIS 2012 Uninsured Overall = 10.9%

HIS 2015 Uninsured Overall = 4.8%



*Other includes native Hawaiian, other Pacific Islander, American Indian, Alaska Native, and other.

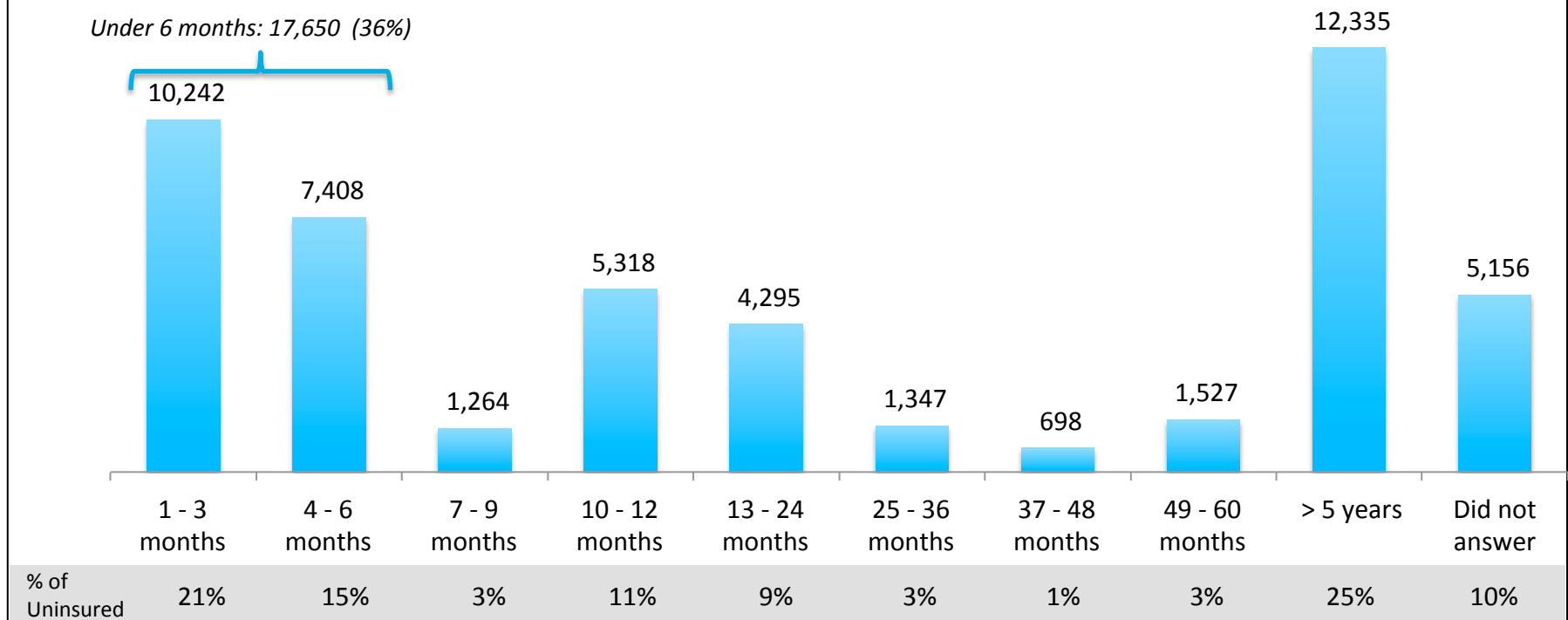
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Behavioral Characteristics of the Uninsured

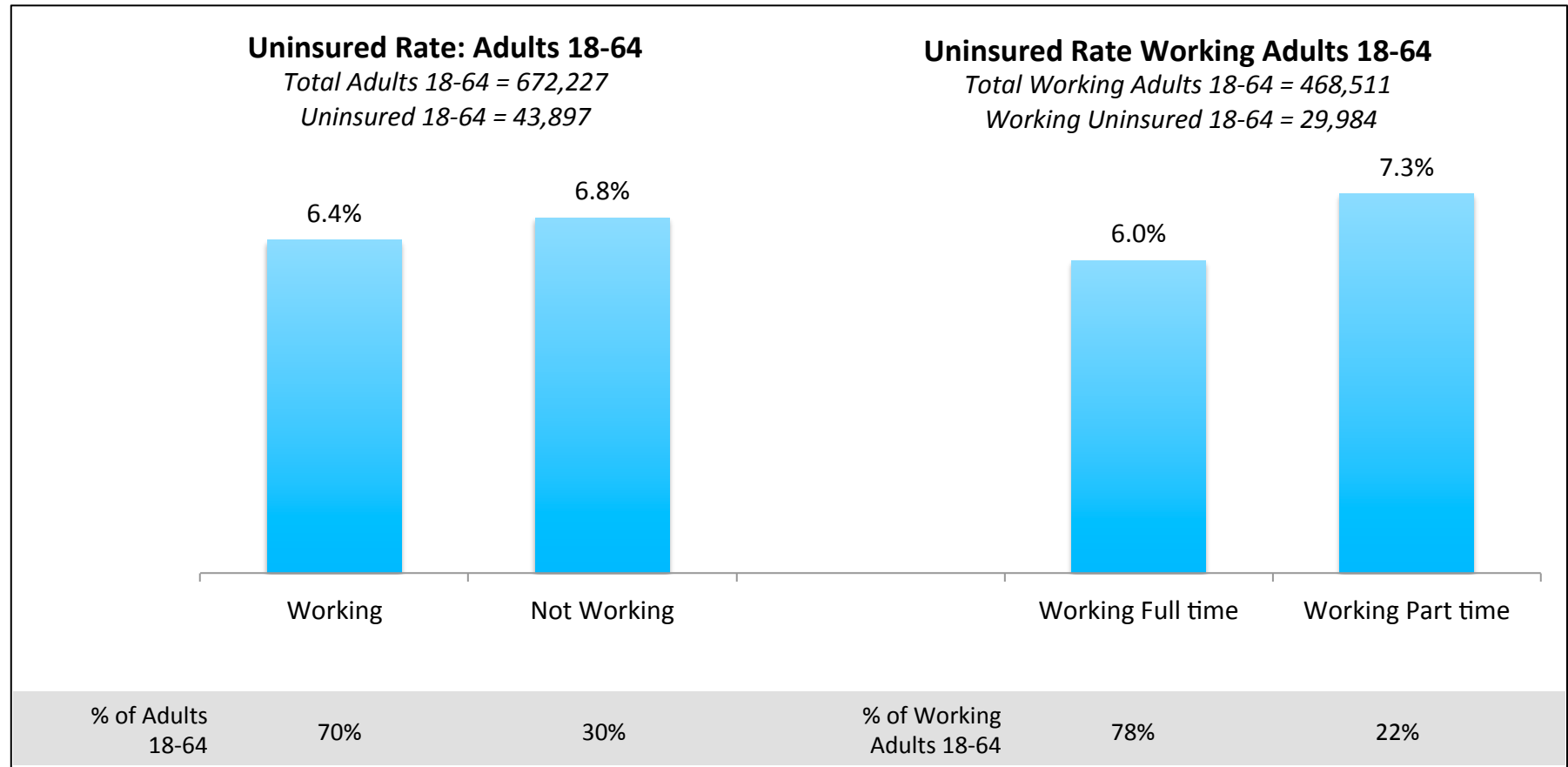
36% of the uninsured are “newly” uninsured, having lost insurance during the last 6 months. One quarter of the uninsured are considered “chronically” uninsured and have been uninsured for more than 5 years.

Number of Uninsured by Length of Time Uninsured *Total Uninsured= 49,591*



Behavioral Characteristics of the Uninsured

Working adults have an uninsured rate of 6.4%. However the 24% of working adults who are working part time have an uninsured rate of 7.3%

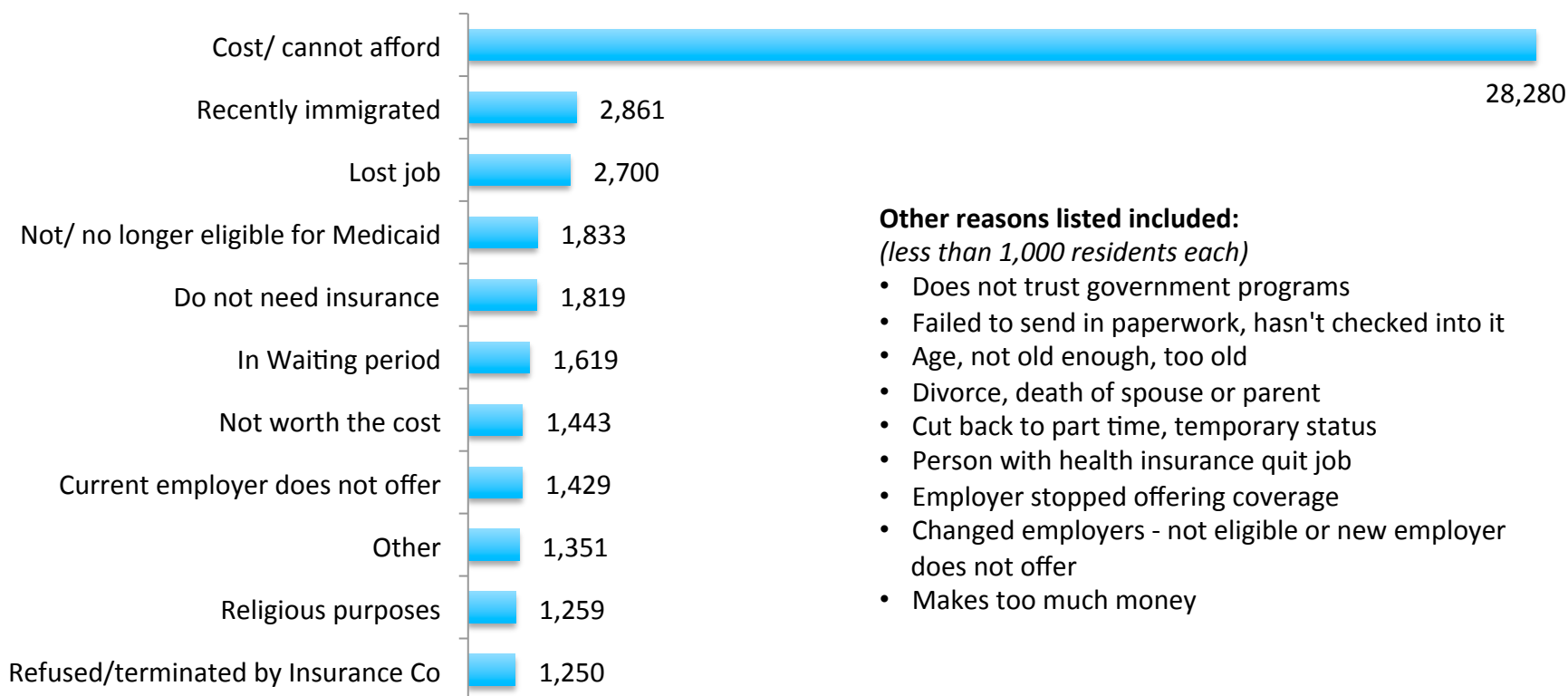


Behavioral Characteristics of the Uninsured

Cost/affordability is by far the main reason given for remaining uninsured.

Main Reasons for Remaining Uninsured

Asked of all uninsured residents (total = 49,591), multiple responses allowed

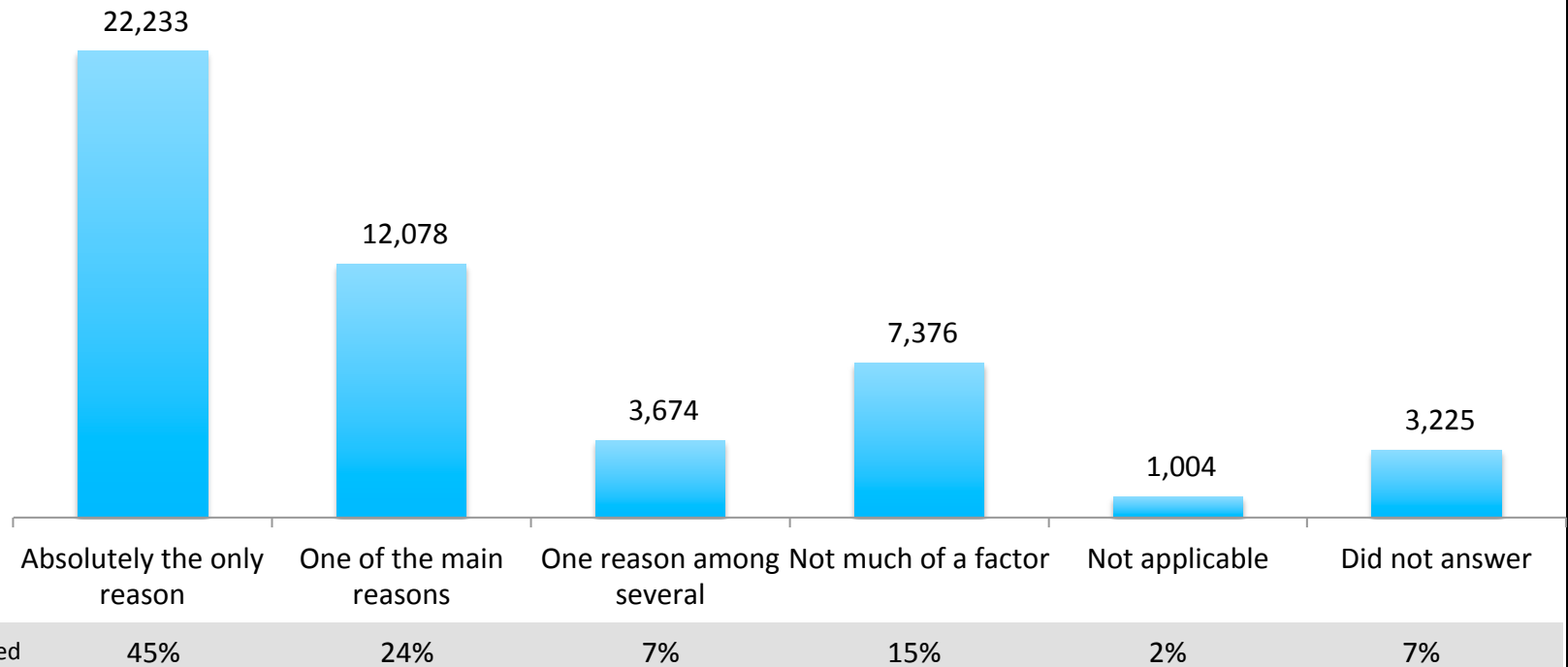


Behavioral Characteristics of the Uninsured

Almost half of the uninsured cite cost as “absolutely the only reason” for remaining uninsured.

Rating of Cost as a Reason for Remaining Uninsured

Asked of all uninsured residents (total = 49,591)

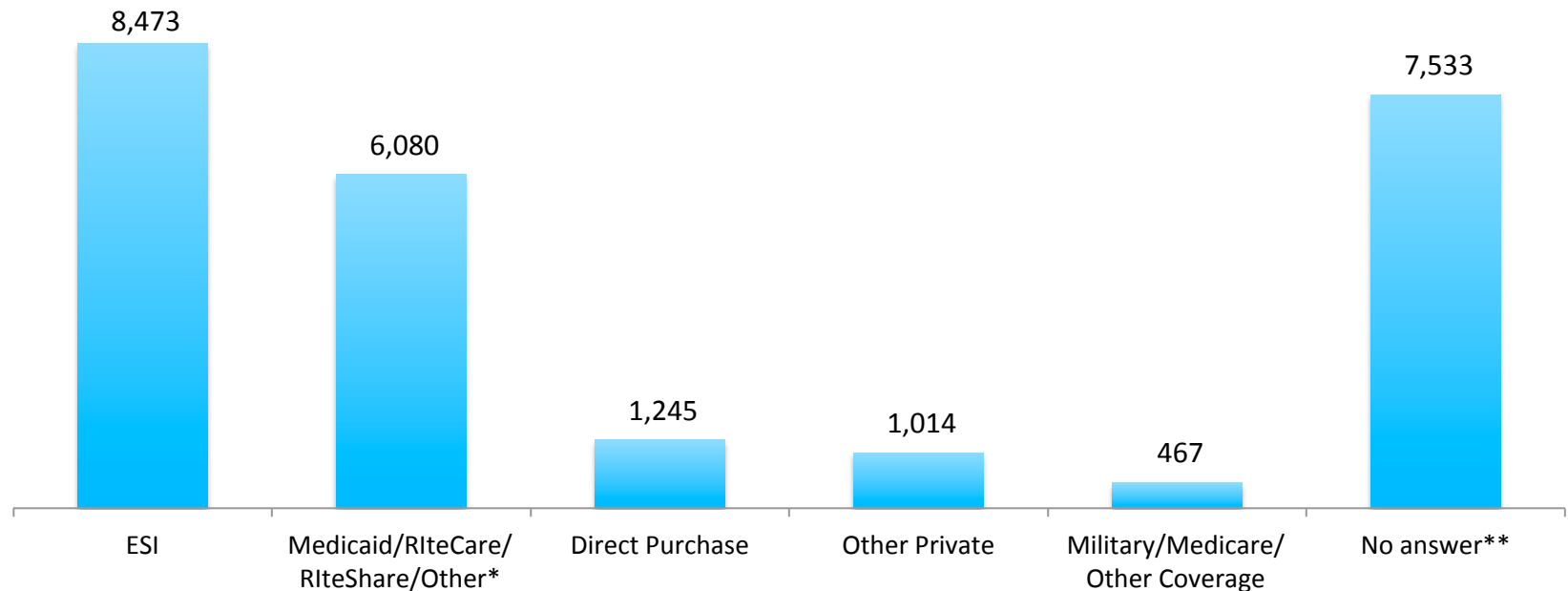


Behavioral Characteristics of the Uninsured

The most common previous type of insurance for the uninsured is ESI. Medicaid is the next most common.

Previous Insurance Type for Residents Uninsured less than 12 months

Asked of all uninsured residents who had insurance within last 12 months (total = 24,812)



*Other Medicaid includes Medical Assistance, Rhody Health Partners, ConnectCare Choice and other Medicaid programs.

**No answer includes inconsistent answer of "no coverage" for residents who indicated they have been uninsured less than 12 months

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11. Medical Expenses and Barriers to Care
12. Mental Health Care Access

Eligibility for Medicaid or HSRI Coverage

Uninsured residents may be eligible for coverage under state health insurance programs or eligible for some level of premium assistance (tax credits) to assist in purchasing health insurance through HealthSource RI.

◆ **Income-Based Eligibility for State Health Insurance Coverage (Medicaid)**

- Children under 250% FPL
- Adults under 138% FPL
- *Other populations may be eligible for Medicaid coverage but are not specified in the following section (disabled, SSI, etc...)*

◆ **Eligibility for Premium Subsidies (Tax Credits) for Insurance Offered through HSRI**

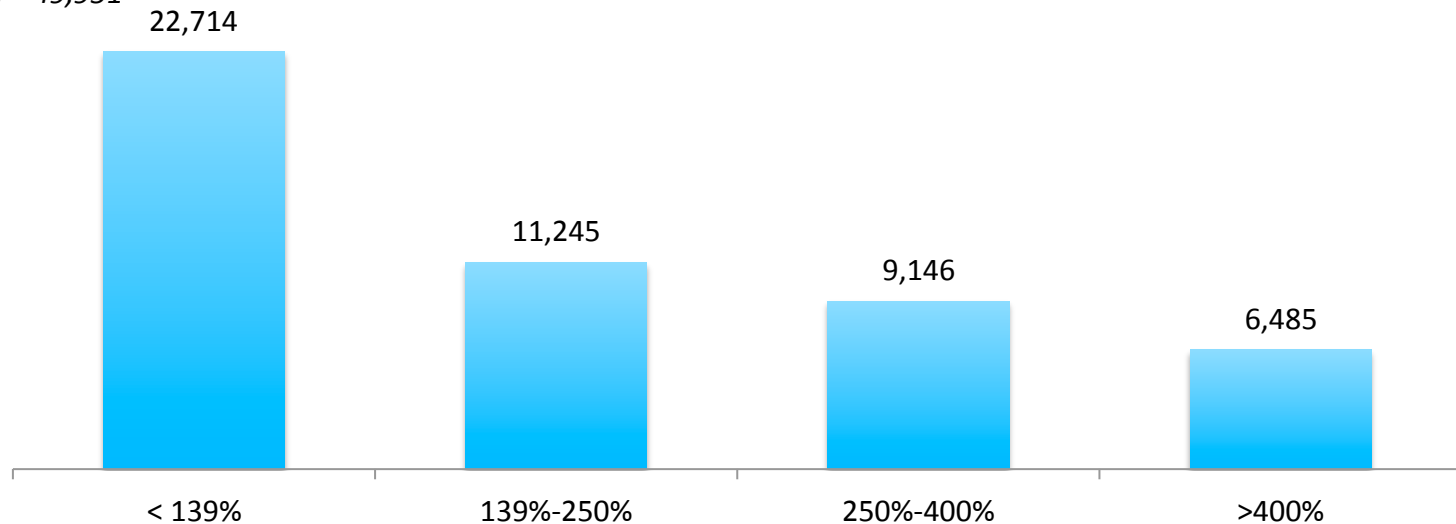
- The PPACA provides tax credits that reduce premium costs.
- Subsidies are provided for families with incomes up to 400% of FPL.
- The tax credits are designed such that an individual of a family will not spend more than a specific percentage of their income on health insurance premiums.
- Plans offered through the Exchange also cap out-of-pocket expenses for families with incomes up to 250% of FPL (cost sharing reductions).

Eligibility for Medicaid or HSRI Coverage

Many of the remaining uninsured may be eligible for Medicaid or subsidized coverage through HSRI.

Number of Uninsured by Income Level (FPL)

Total uninsured = 49,951



May be eligible for Medicaid

May be eligible for tax credits and cost sharing reductions through HSRI.
(Children may be eligible for Medicaid)

May be eligible for tax credits through HSRI

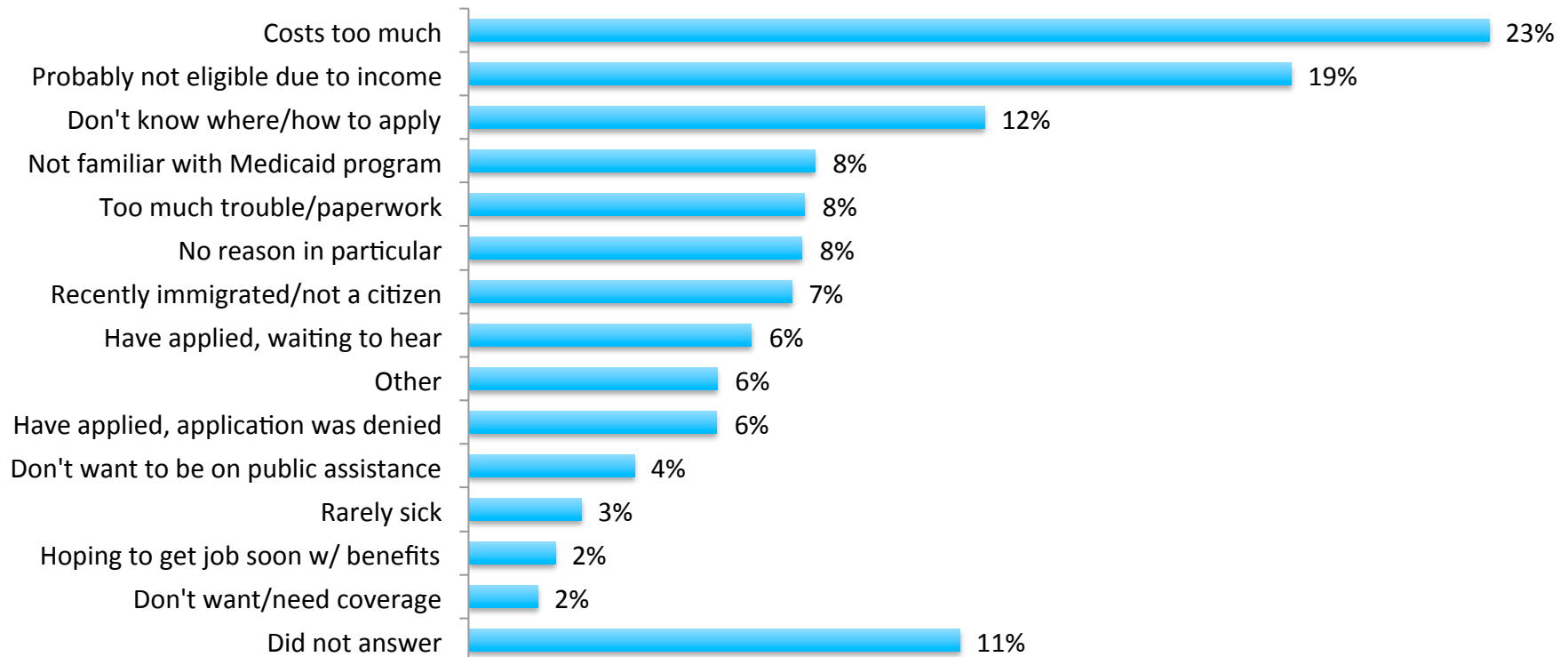
Eligible to purchase through HSRI without tax credits

Eligibility for Medicaid or HSRI Coverage

Uninsured individuals give cost and concerns about eligibility as the main reasons why they are not enrolled in state-sponsored insurance.

Uninsured Residents Reasons for Not Enrolling in State-Sponsored insurance Program

Asked of all uninsured residents (total = 49,951), multiple responses allowed



Eligibility for Medicaid or HSRI Coverage

Uninsured individuals of all income levels give cost and concerns about eligibility as the main reasons why they are not enrolled in state-sponsored insurance.

Uninsured Residents Reasons for Not Enrolling in State-Sponsored insurance	% of Uninsured (previous chart)	% of Uninsured Under 138% FPL	% of Uninsured Over 138% FPL
Number of Uninsured	49,591	22,714	26,876
Costs too much	23%	20%	26%
Probably not eligible due to income	19%	11%	26%
Don't know where/how to apply	12%	11%	12%
Not familiar with Medicaid program	8%	6%	10%
Too much trouble/paperwork	8%	10%	6%
No reason in particular	8%	8%	7%
Recently immigrated/not a citizen	7%	10%	5%
Have applied, waiting to hear	6%	11%	3%
Other	6%	9%	3%
Have applied, application was denied	6%	6%	5%
Don't want to be on public assistance	4%	3%	4%
Rarely sick	3%	3%	2%
Hoping to get job soon w/ benefits	2%	1%	3%
Don't want/need coverage	2%	1%	2%
Did not answer	11%	12%	11%

Multiple answers allowed.

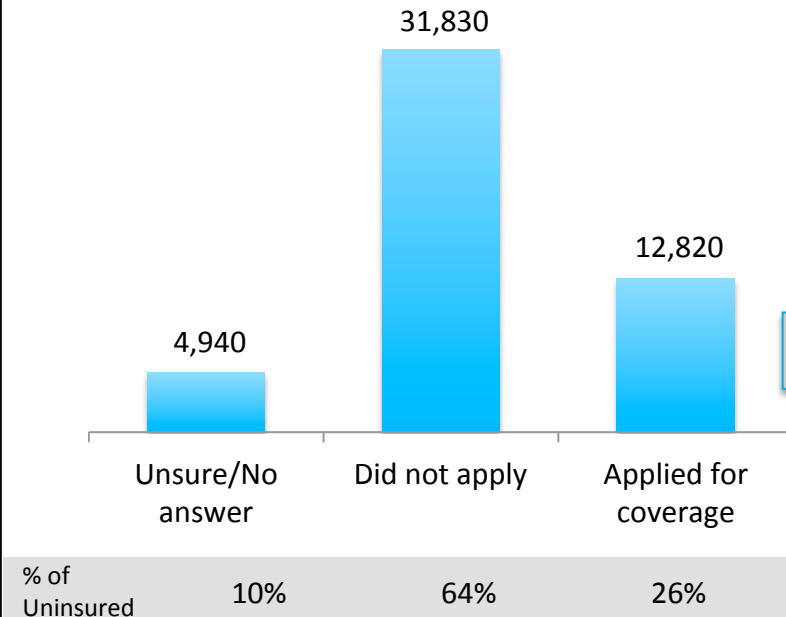
Eligibility for Medicaid or HSRI Coverage

Just over one-quarter of the uninsured applied for coverage since October 2014, mainly through Medicaid and HSRI.

Uninsured – Applications for Coverage

Asked of all Uninsured (total = 49,591)

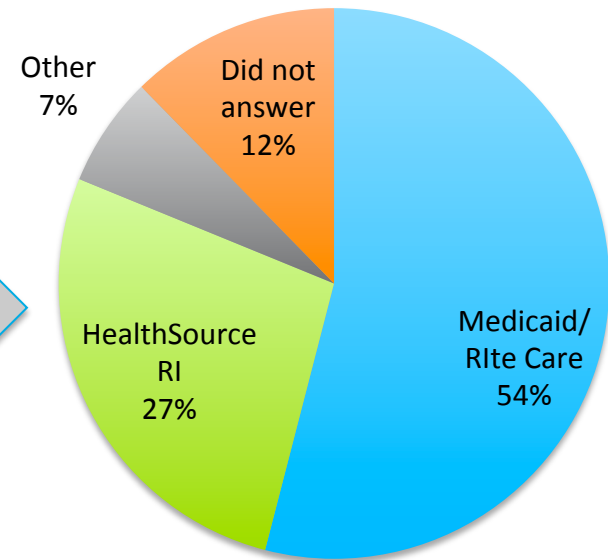
Did you apply for coverage?



What type of coverage did you apply for?

Multiple responses allowed

Of those who applied for coverage = 12,820

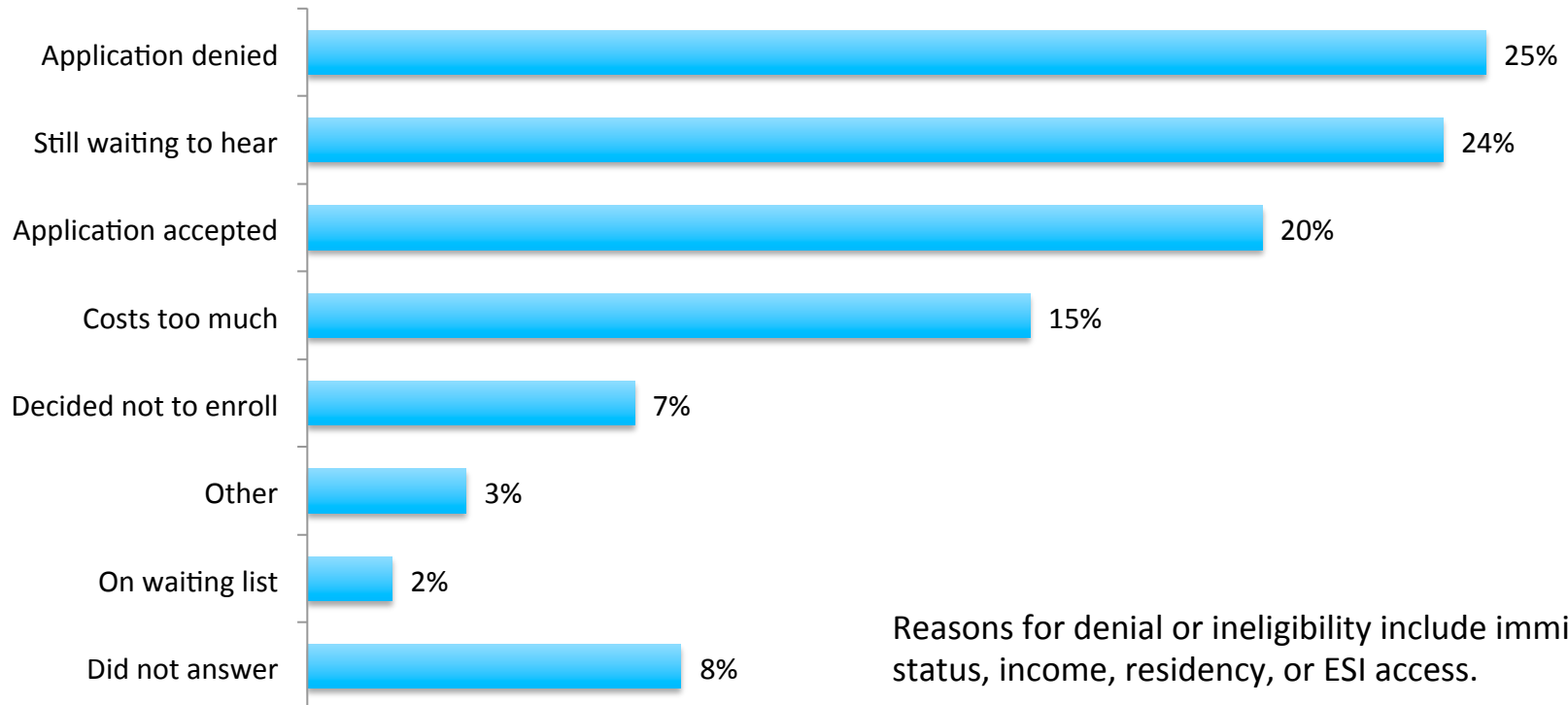


Eligibility for Medicaid or HSRI Coverage

Of those who applied, 25% responded that their applications had been denied, another 24% are waiting to hear outcomes, and 20% had their applications accepted.

Uninsured Who Applied for Insurance – Outcome of Application

Asked of uninsured residents who applied for coverage = 12,820, multiple responses allowed



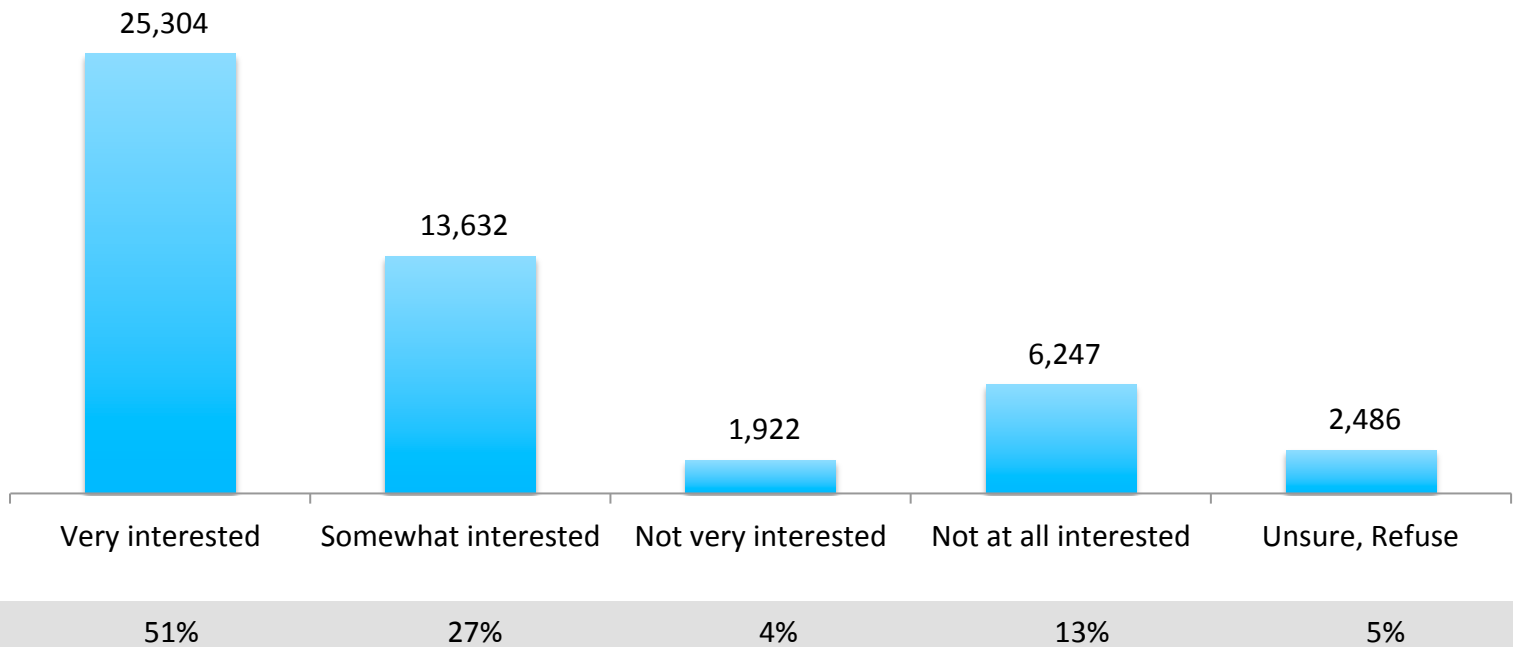
Reasons for denial or ineligibility include immigration status, income, residency, or ESI access.

Eligibility for Medicaid or HSRI Coverage

More than three-quarters of the uninsured would be somewhat or very interested in enrolling in RiteCare if eligible.

Uninsured – Interest in Enrolling in RiteCare if Eligible

Asked of all Uninsured (total = 49,591)



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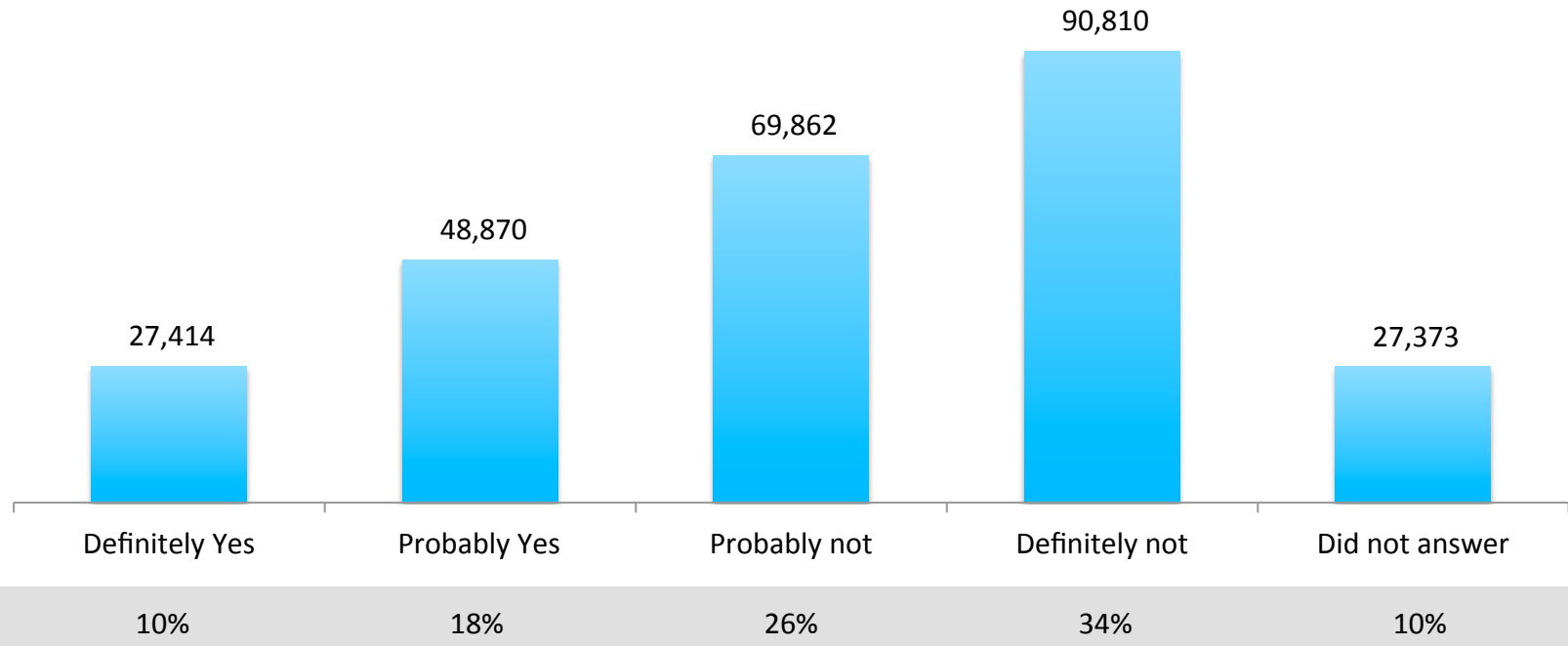
Medicaid and HSRI Enrollment

Sixty percent of families on Medicaid say they would probably or definitely not be able to get private health insurance.

Likelihood of Obtaining Private Health Insurance Among those on Medicaid

If state health insurance was no longer available, would your family be able to get private insurance?

Asked of all residents on Medicaid = 264,329

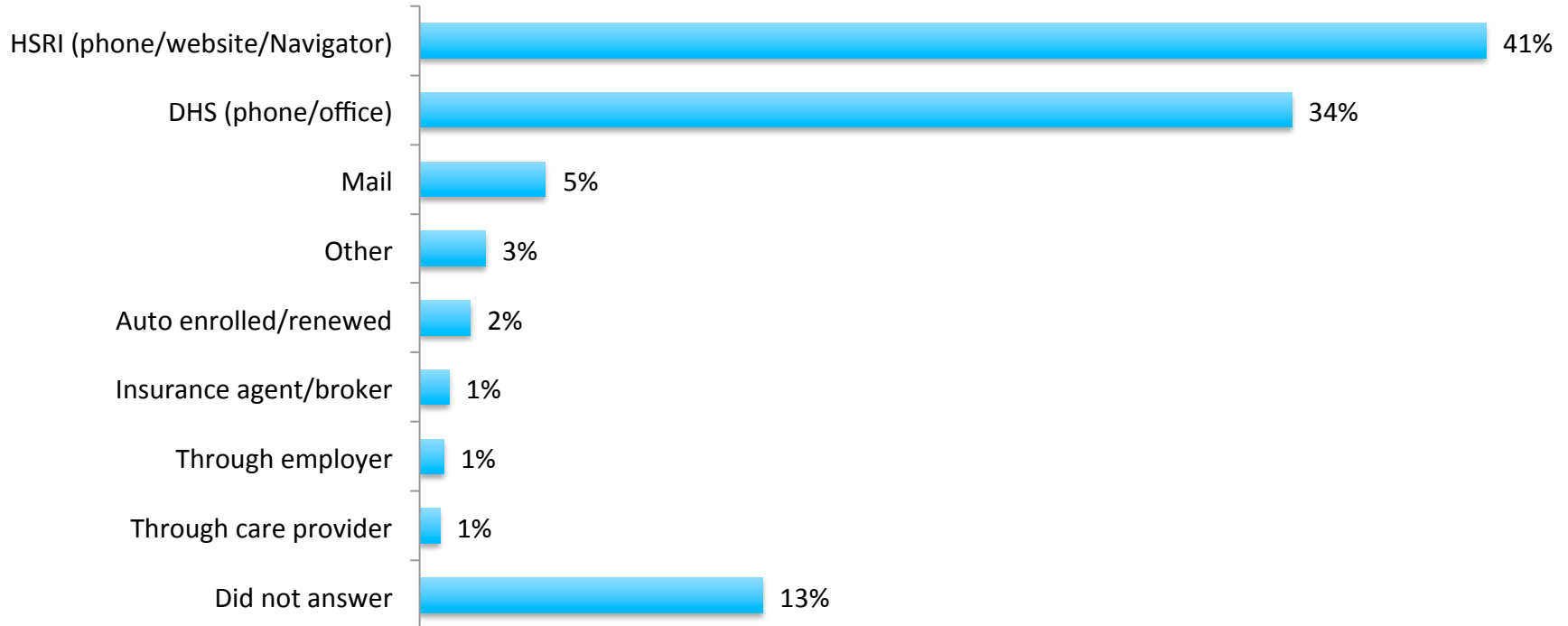


Medicaid and HSRI Enrollment

41% of Medicaid enrollees used the HSRI channels to enroll in or renew Medicaid coverage.

Method of Last Renewing Medicaid Coverage

Asked of all residents on Medicaid = 264,329

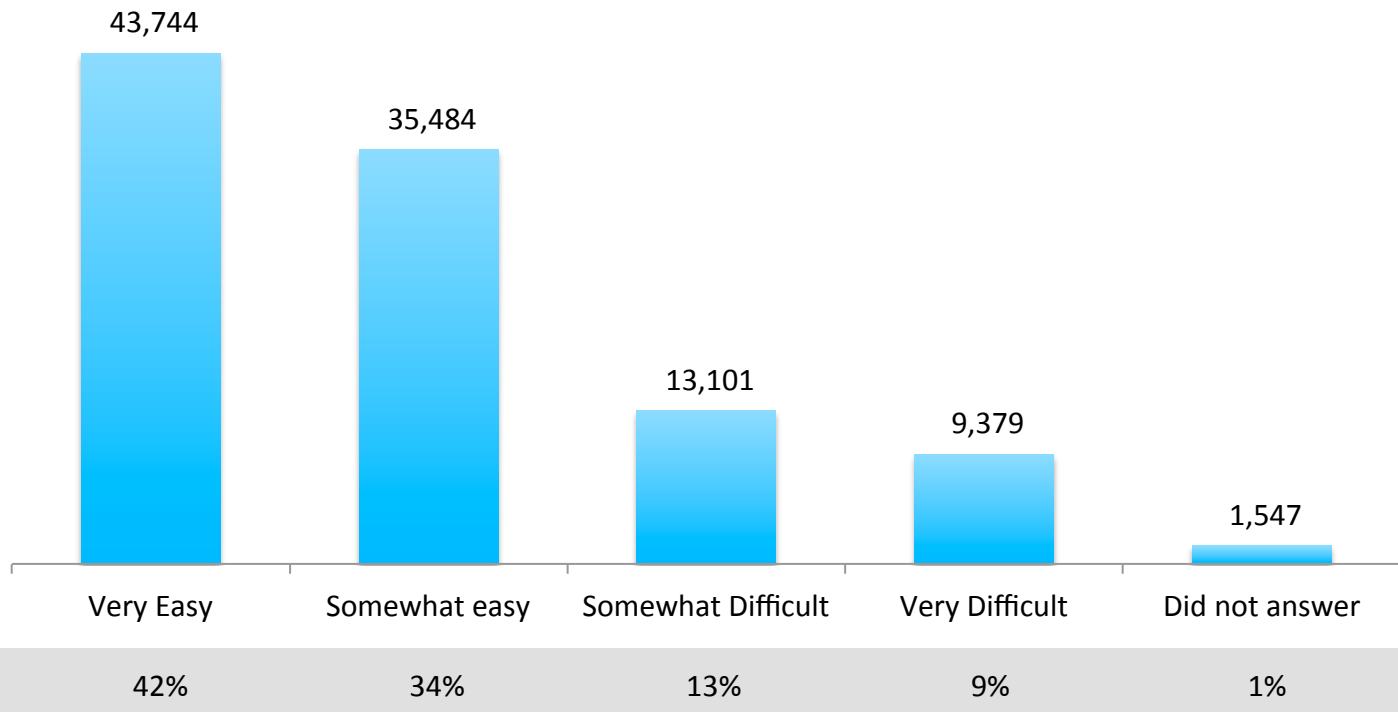


Medicaid and HSRI Enrollment

76% of Medicaid enrollees who used the HSRI contact center to enroll in or renew Medicaid coverage found the process very or somewhat easy.

Ease of Enrolling in/Renewing Medicaid Coverage through HSRI

Of those on Medicaid who used HSRI to enroll in/renew coverage (total = 103,254)

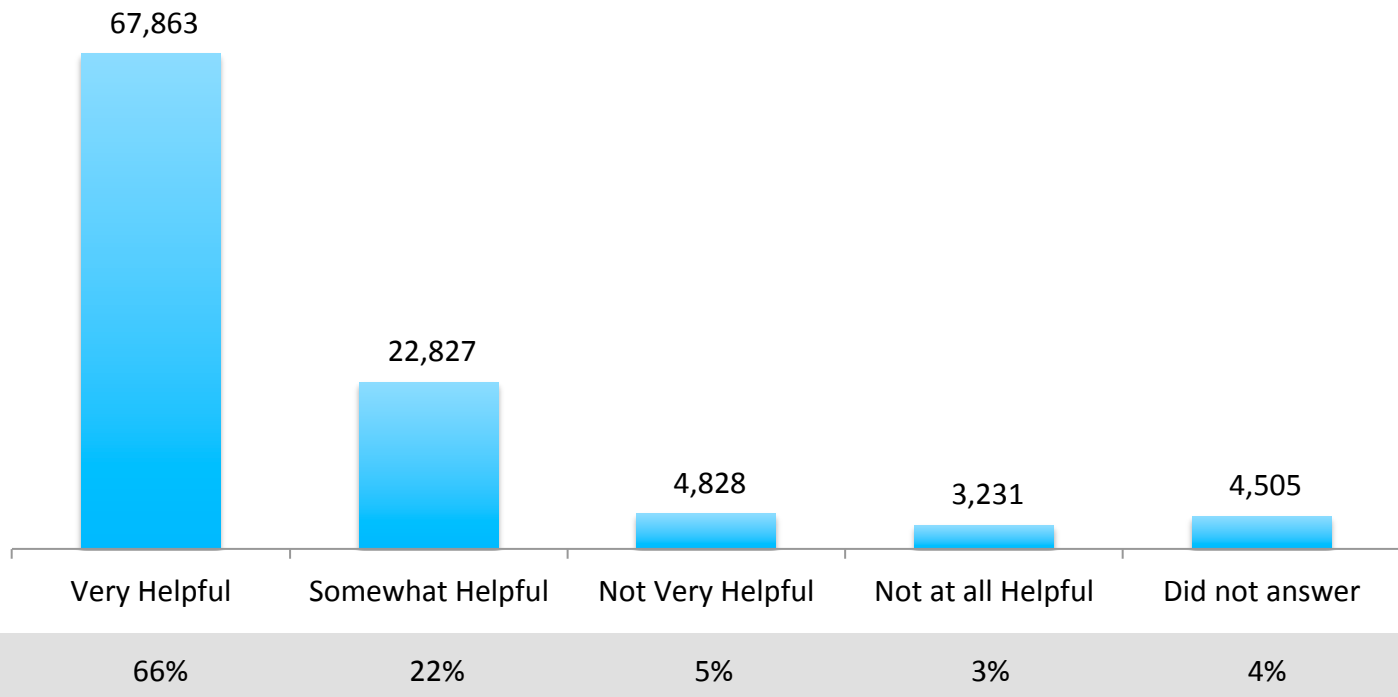


Medicaid and HSRI Enrollment

66% of Medicaid enrollees who used the HSRI contact center to enroll in or renew Medicaid coverage found HSRI very helpful.

Helpfulness of HSRI with Enrolling in/Renewing Medicaid Coverage

Of those on Medicaid who used HSRI to enroll in/renew coverage (total = 103,254)



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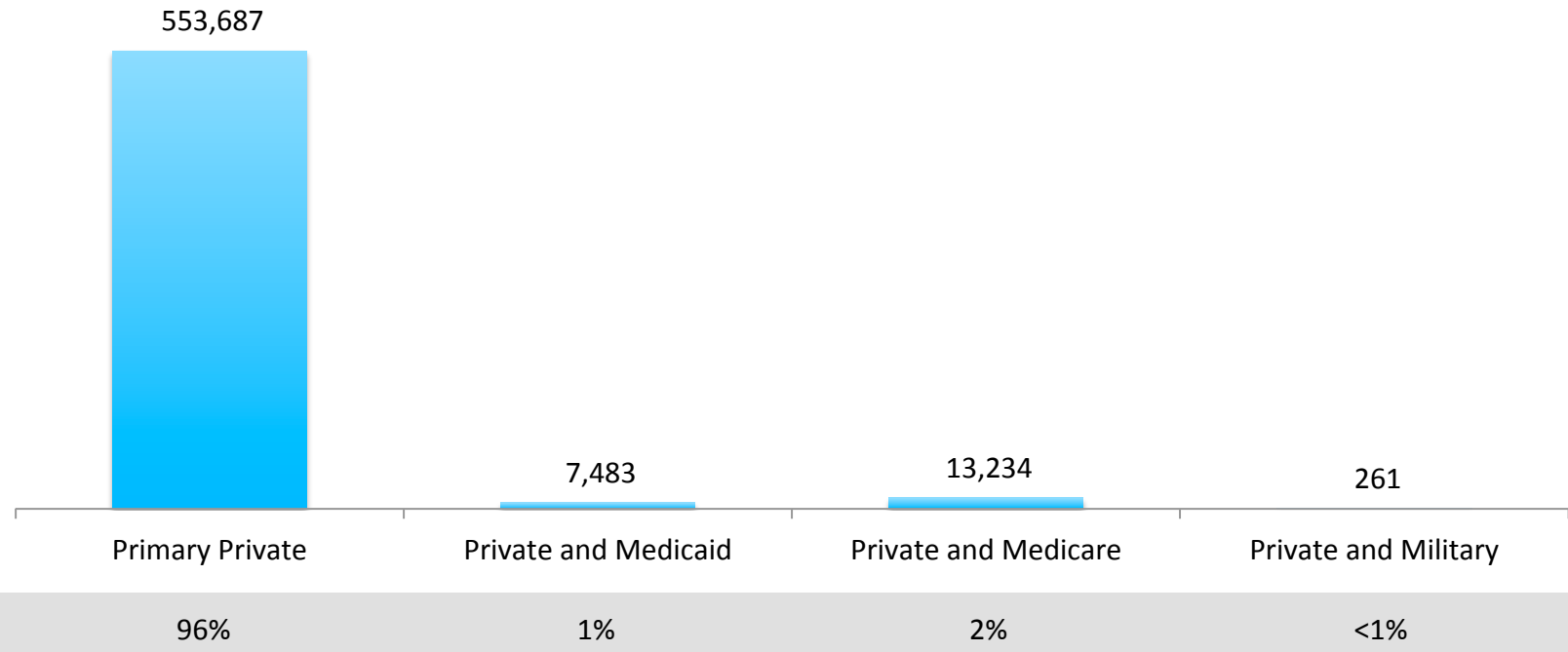
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Private Insurance Coverage

4% of privately insured have another source of insurance. Including those with other types of insurance brings the total privately insured to 574,665.

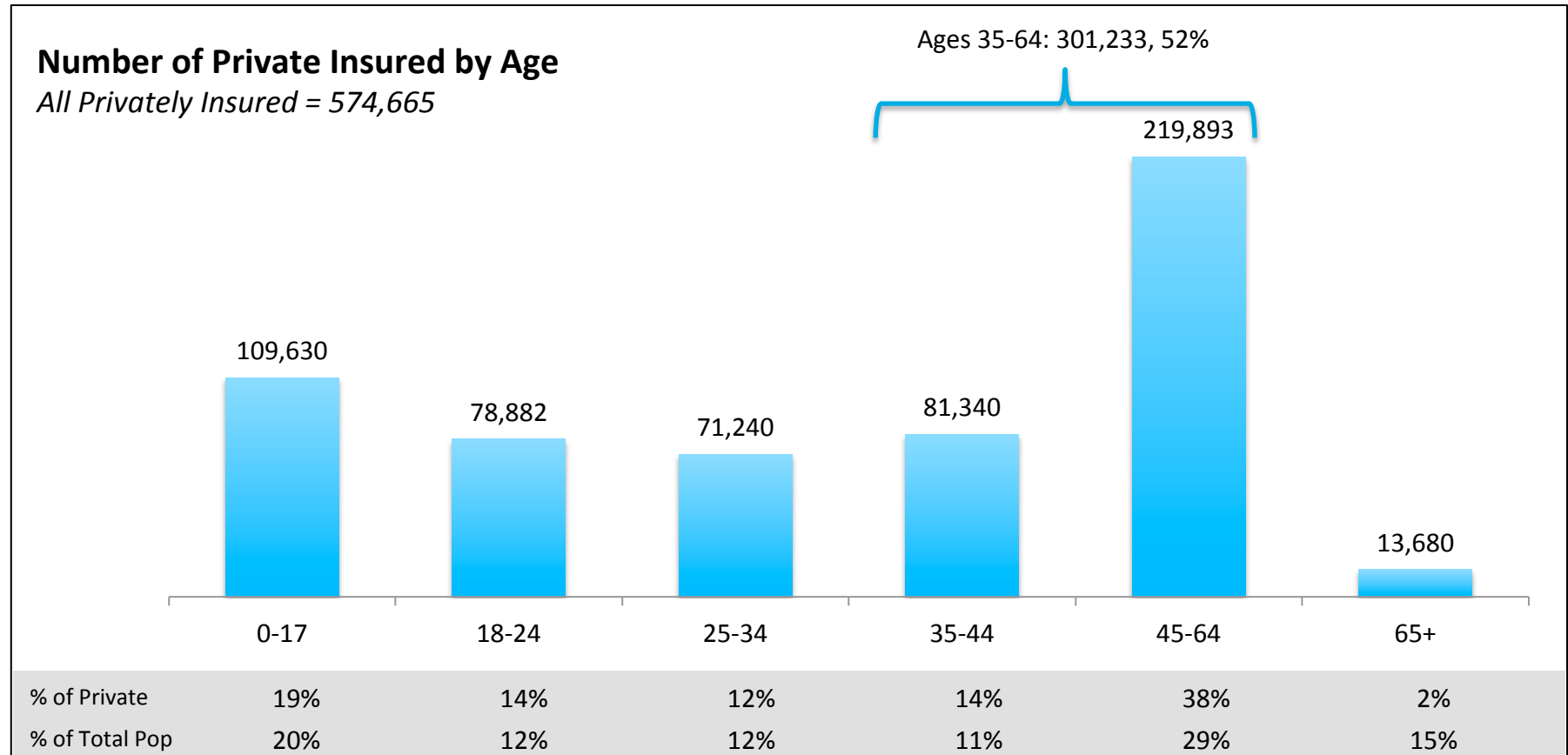
Private Insured by Secondary Type of Insurance

All Privately Insured = 574,665



Private Insurance Coverage

More than half of the privately insured population is between ages 35 and 64.

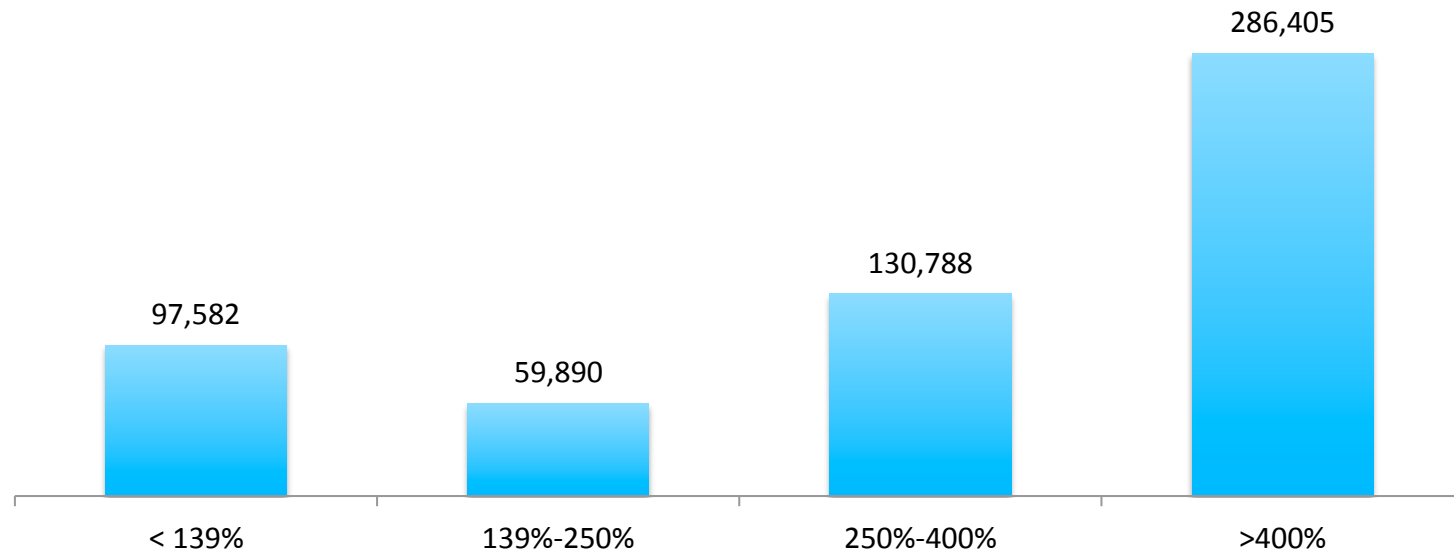


Private Insurance Coverage

Fifty percent of the privately insured are over 400% FPL.

Number of Private Insured by Income Level

All Privately Insured = 574,665



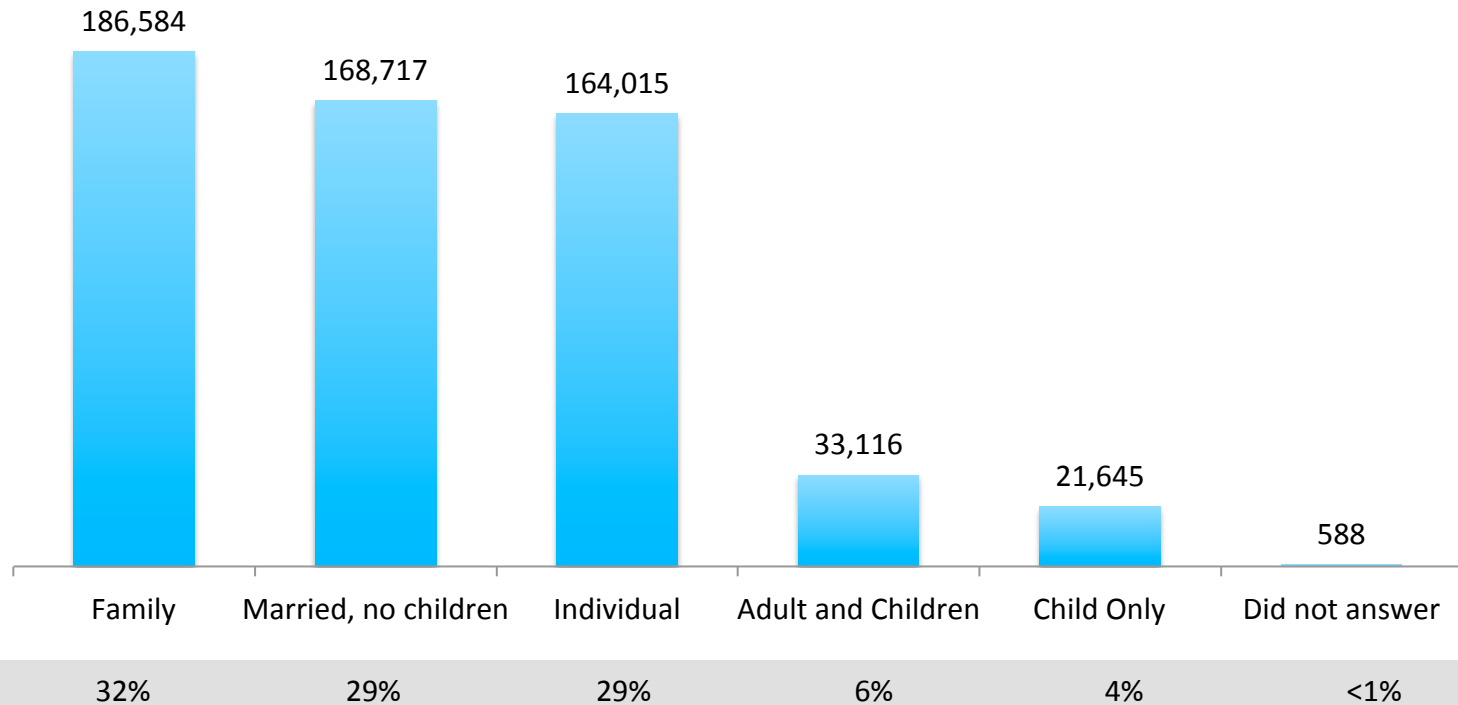
% of Private	17%	10%	23%	50%
% of Total Pop	31%	15%	19%	34%

Private Insurance Coverage

About one-third of policies are for families, another third for married couples without children, and the remaining third for individuals.

Private Insurance Policy Type

All Privately Insured = 574,665

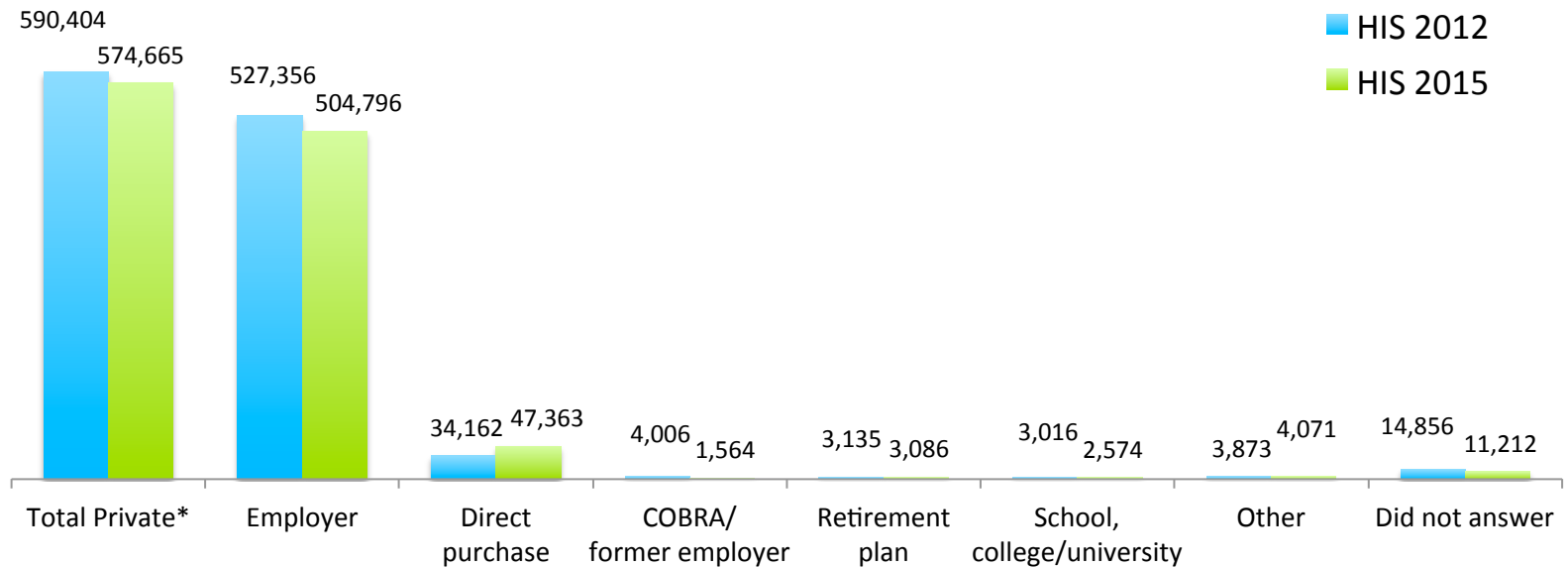


Private Insurance Coverage

88% of private insurance is through employers. Another 8% is direct purchase, including through HSRI.

Source of Private Insurance

All Privately Insured = 574,665



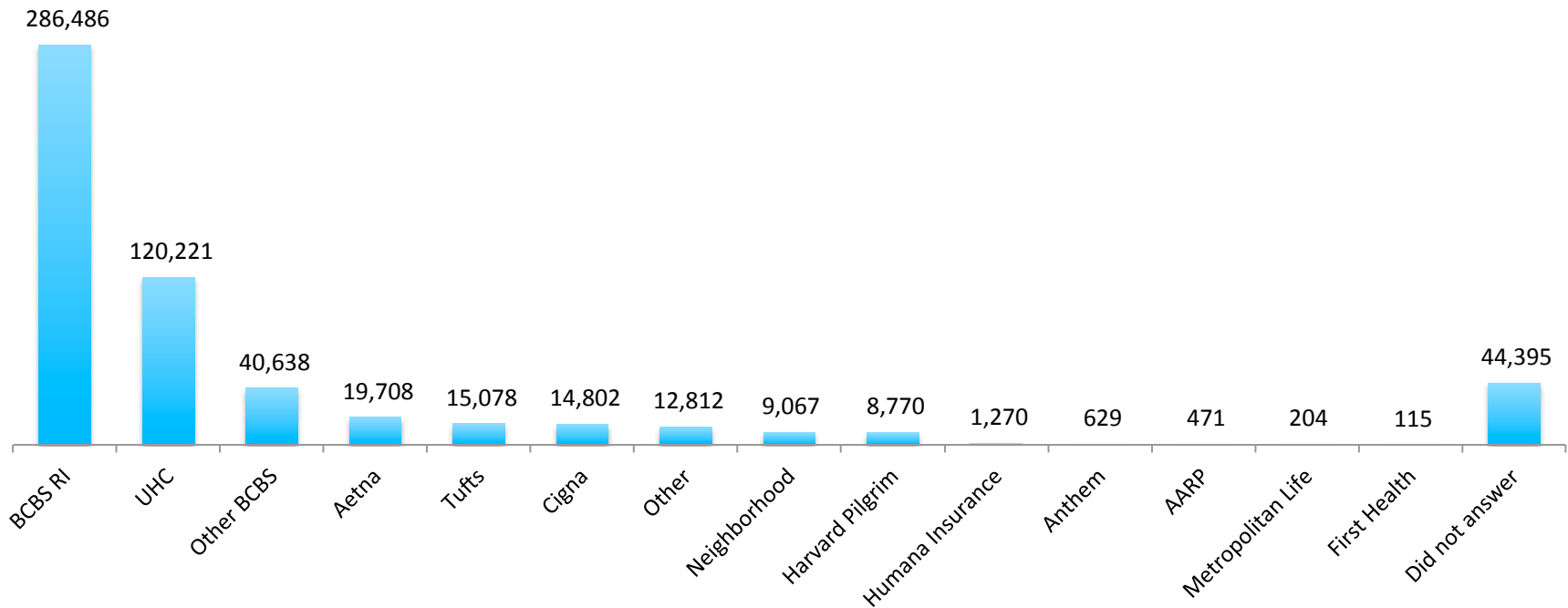
% of 2015 Private Insurance	100%	88%	8%	<1%	1%	<1%	1%	2%
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Private Insurance Coverage

BCBS of Rhode Island and United Healthcare have the bulk of the market.

Private Insurance Providers

All Privately Insured = 574,665

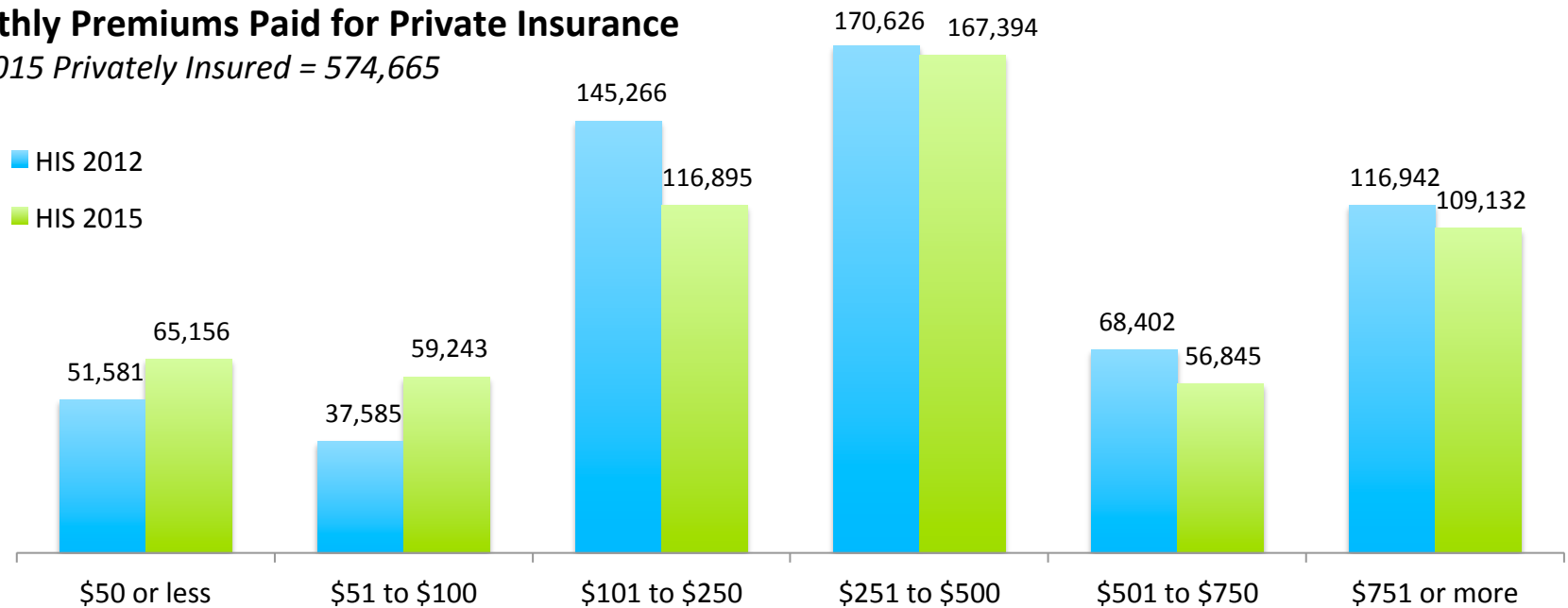


Private Insurance Coverage

Over half of privately insured residents pay between \$100 and \$500 monthly for premiums.

Monthly Premiums Paid for Private Insurance

HIS 2015 Privately Insured = 574,665



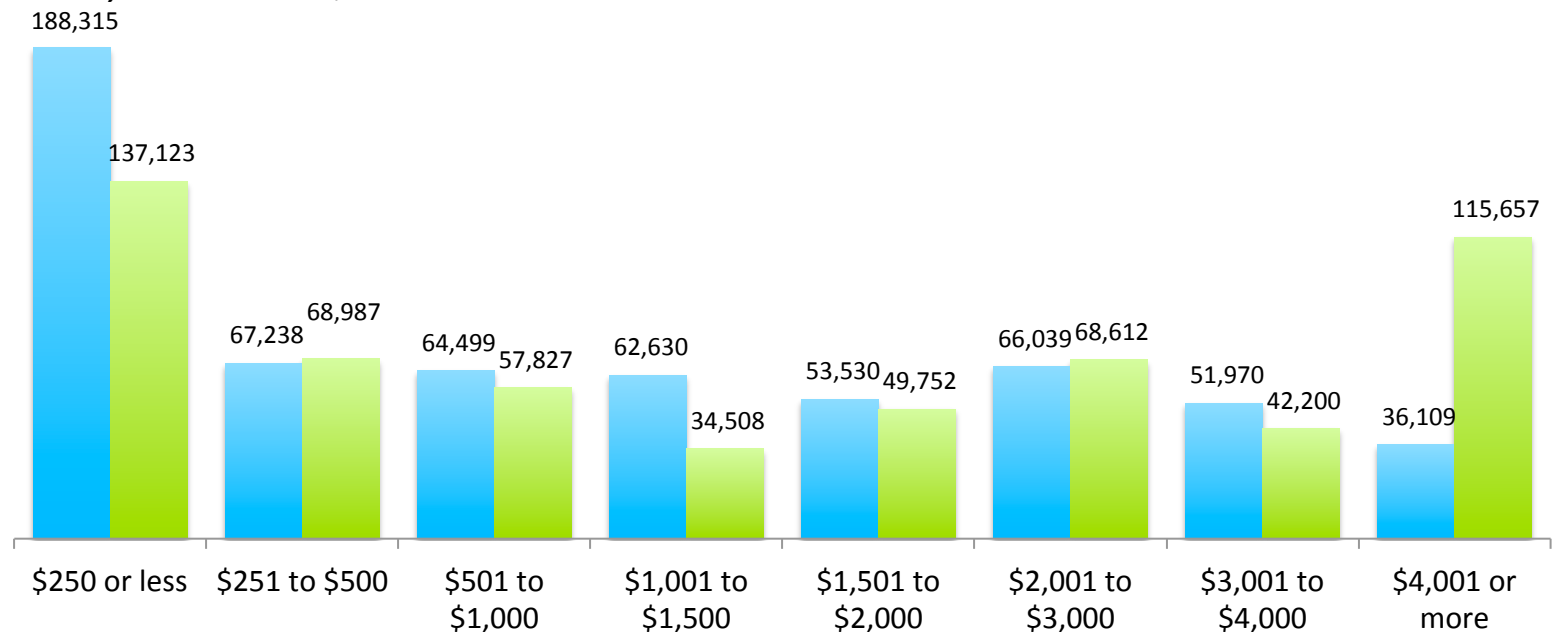
% of Private 2012	9%	6%	25%	29%	12%	20%
% of Private 2015	11%	10%	20%	29%	10%	19%

Private Insurance Coverage

Fewer residents are paying under \$250 in deductibles than in 2012. Also more residents are paying over \$4,000 for deductibles than in 2012.

Annual Deductibles for Private Insurance

HIS 2015 Privately Insured = 574,665



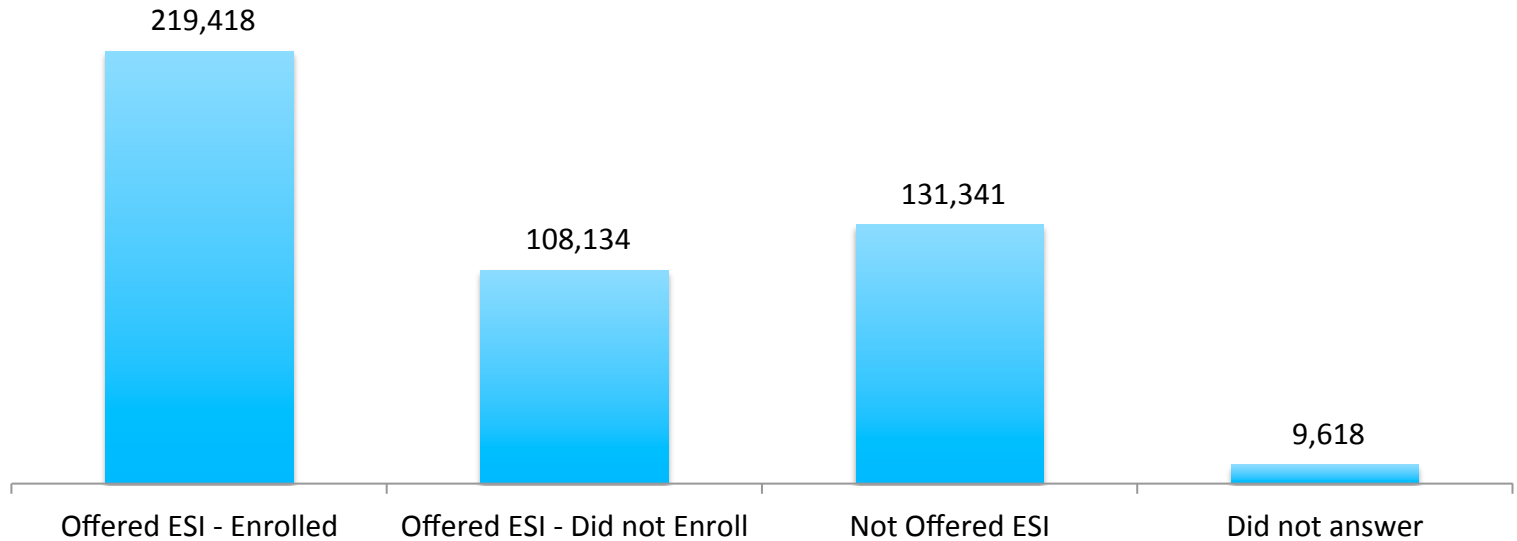
% of Private 2012	32%	11%	11%	11%	9%	11%	9%	6%
% of Private 2015	24%	12%	10%	6%	9%	12%	7%	20%

Private Insurance Coverage

Forty-seven percent of working adults were offered ESI and enrolled. Of working uninsured adults, 33% were offered ESI but did not enroll.

Access to ESI Among Working Adults 18-64 – Insured and Uninsured

Total working adults 18-64 = 468,511



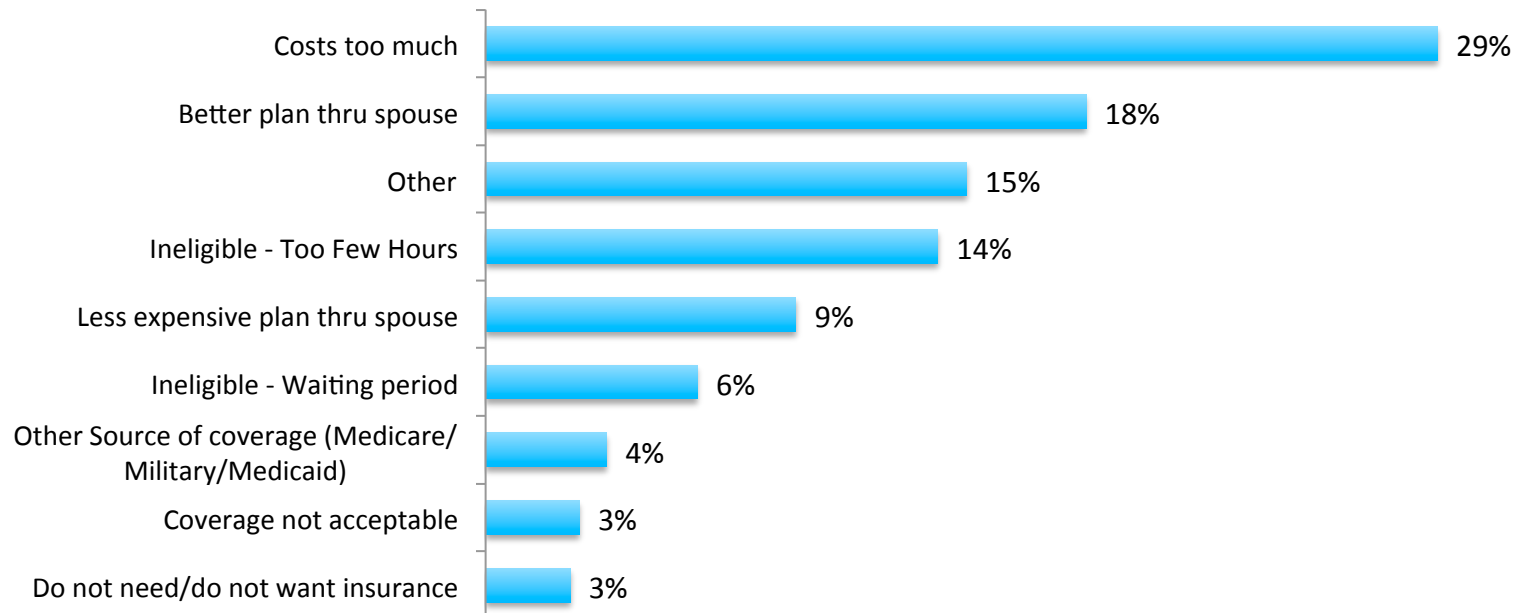
% of Working Uninsured 18-64	0%	33%	64%	3%
% of Total Working 18-64	47%	23%	28%	2%

Private Insurance Coverage

Cost is offered as the main reason for not enrolling in ESI among working adults who were offered ESI and did not enroll.

Reasons for not Enrolling in ESI Among Working Adults Offered ESI

Asked of working adults 18-64 offered ESI but not enrolled = 108,134



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Underinsurance

Residents with private health insurance under age 65 were classified as underinsured based on the formula developed by the Commonwealth Fund

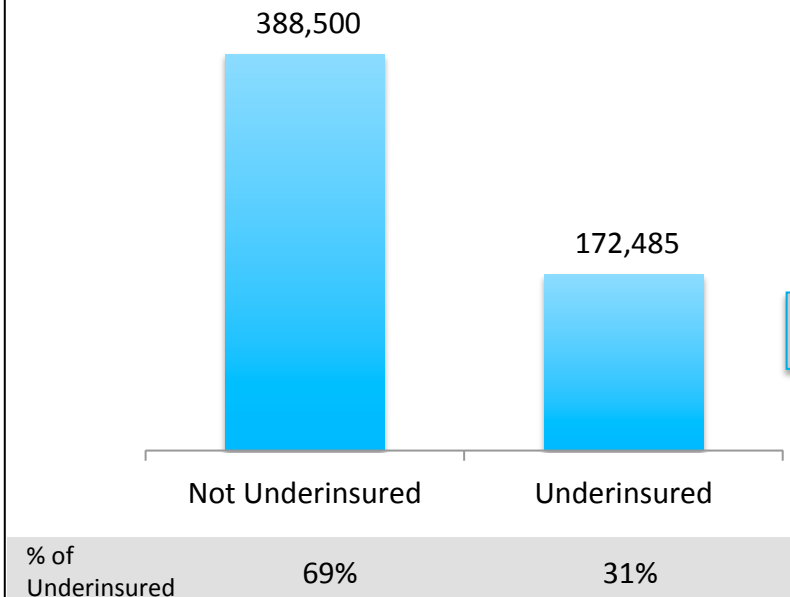
- ◆ A resident with private insurance is defined as underinsured if:
 - The deductible for the private health insurance coverage exceeds 5% of a family's income and/or
 - A family earned 200% or less of federal poverty level and their out of pocket expenses for medical care exceeds 5% of family income.
 - A family earned more than 200% of federal poverty level and their out of pocket expenses for medical care exceeds 10% of family income.
- ◆ Typically Underinsurance is only evaluated for the privately insured.

Underinsurance

31% of those on private insurance under age 65 are considered underinsured.

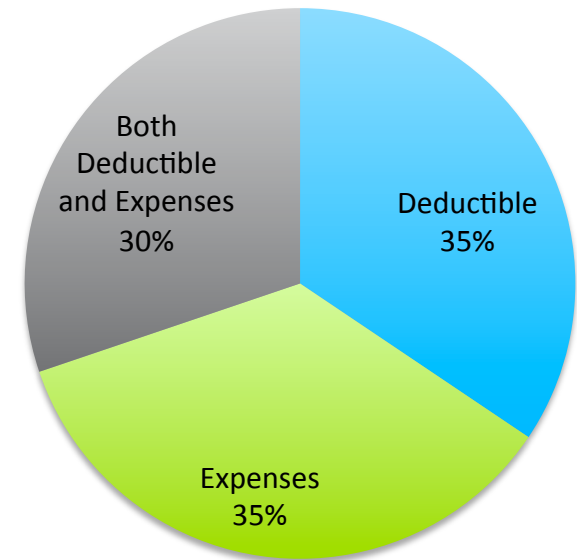
Underinsured Residents among Privately Insured under Age 65

Total <65 on Private Insurance = 560,985



Of those who are underinsured

Underinsured due to...

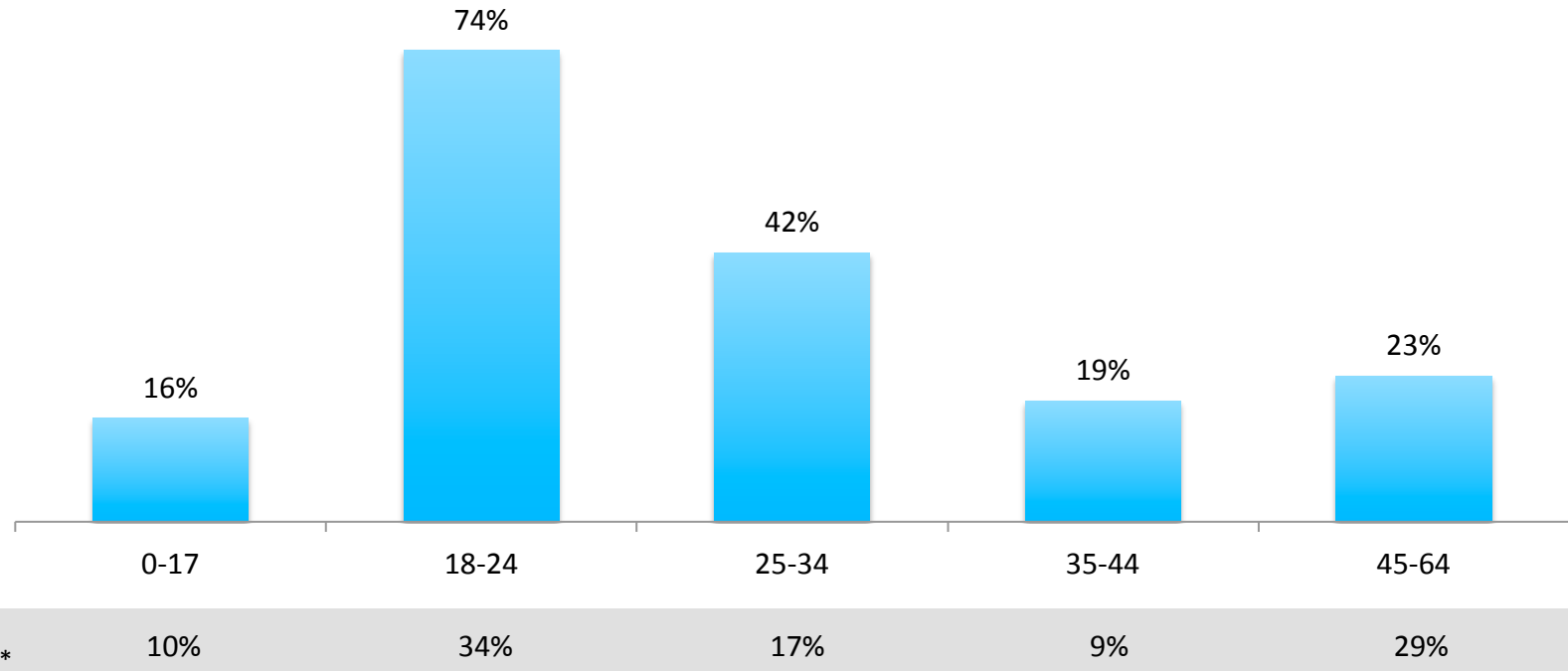


Underinsurance

Almost three-quarters of those privately insured between ages 18 and 24 are considered underinsured.

Underinsurance Rate by Age Group

(% underinsured among those privately insured under age 65)



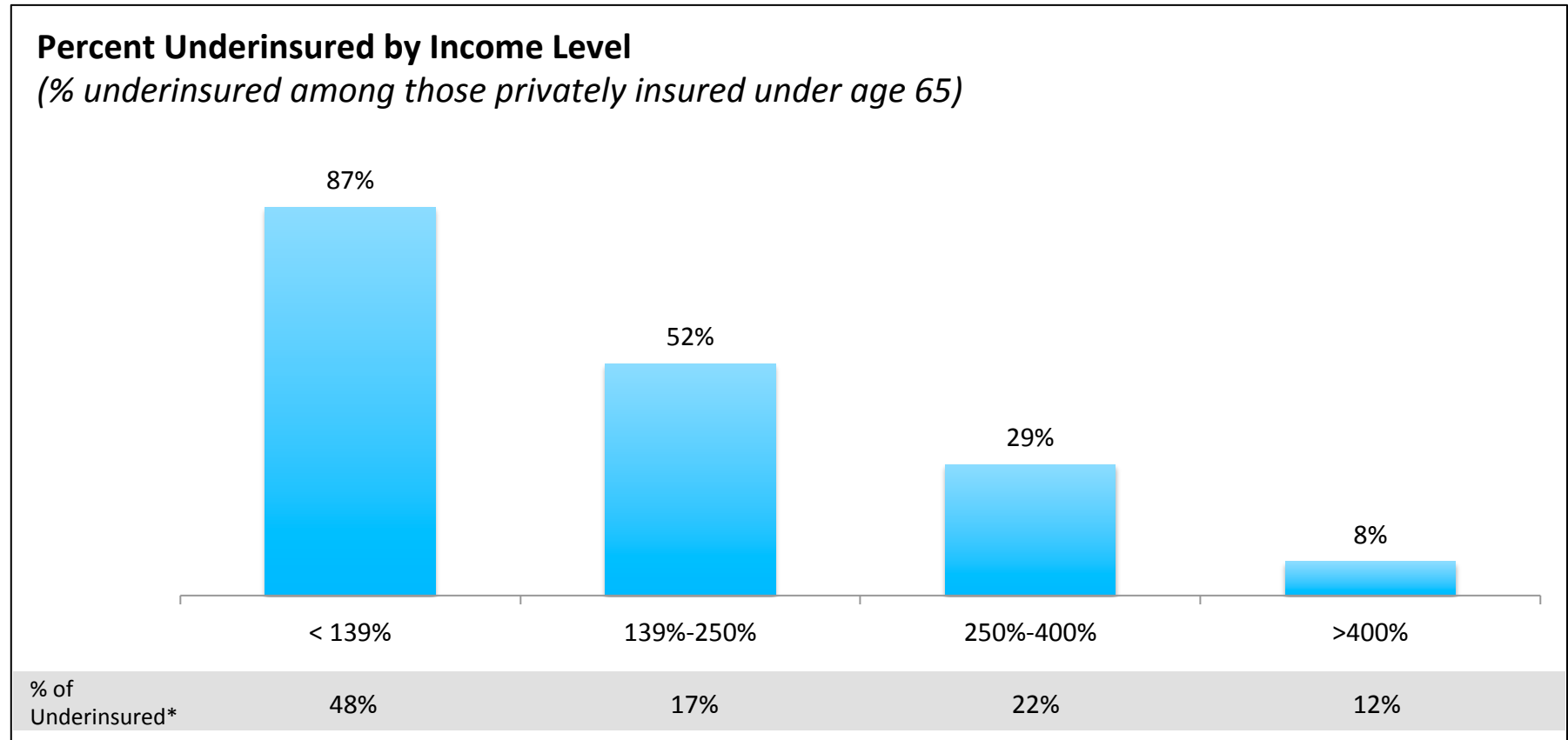
*This is percent of total underinsured residents among those privately insured under age 65.

Underinsurance

Almost ninety percent of those privately insured under 139% FPL are considered underinsured.

Percent Underinsured by Income Level

(% underinsured among those privately insured under age 65)



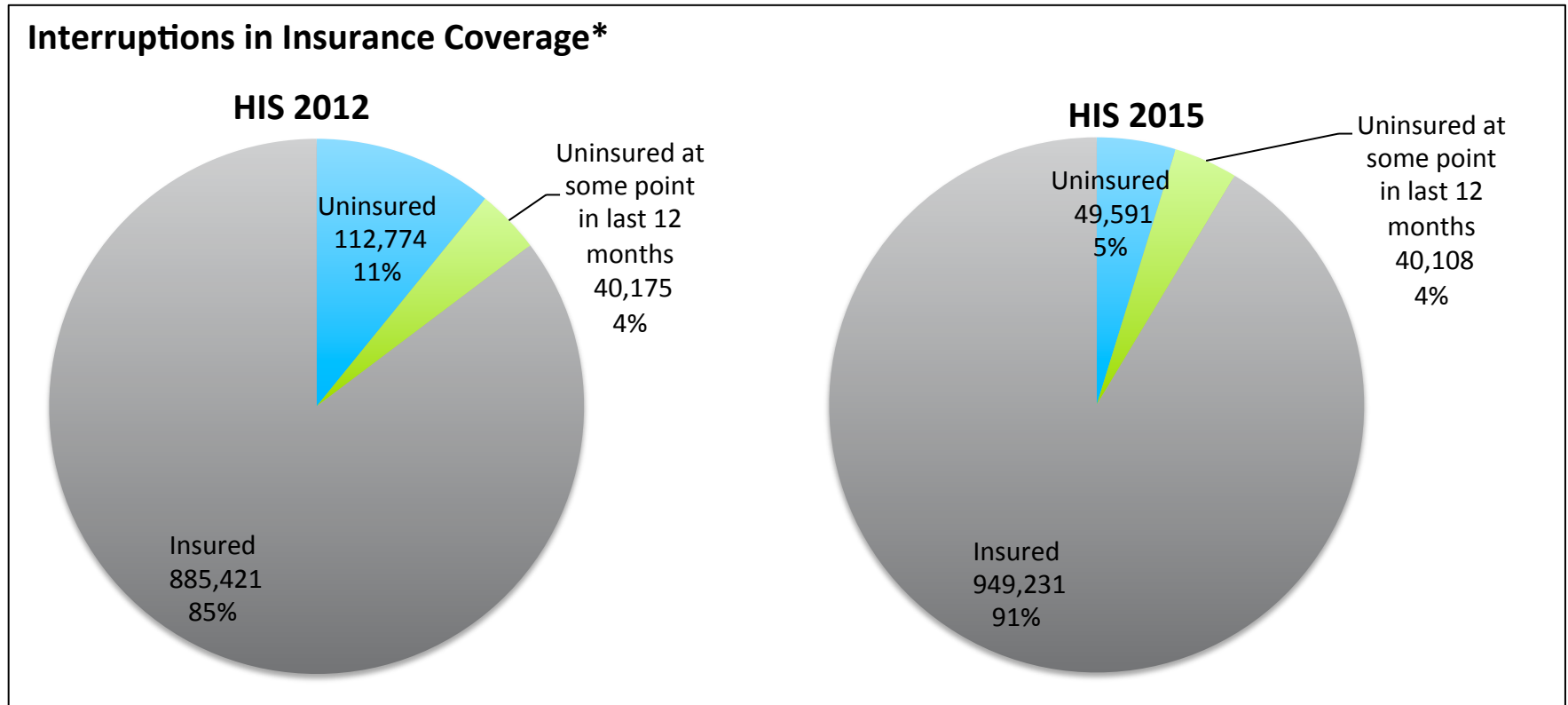
*This is percent of total underinsured residents among those privately insured under age 65.

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Interruptions in Insurance Coverage

While the rate of uninsured has dropped from 12% to 5%, the rate of those who have had a gap in insurance coverage over the last 12 months has remained steady at 4% between HIS 2012 and HIS 2015.



*Point in Time refers to those uninsured at the time of the survey response. "During last 12 months" refers to those currently insured residents who were without insurance at some point during the last 12 months.

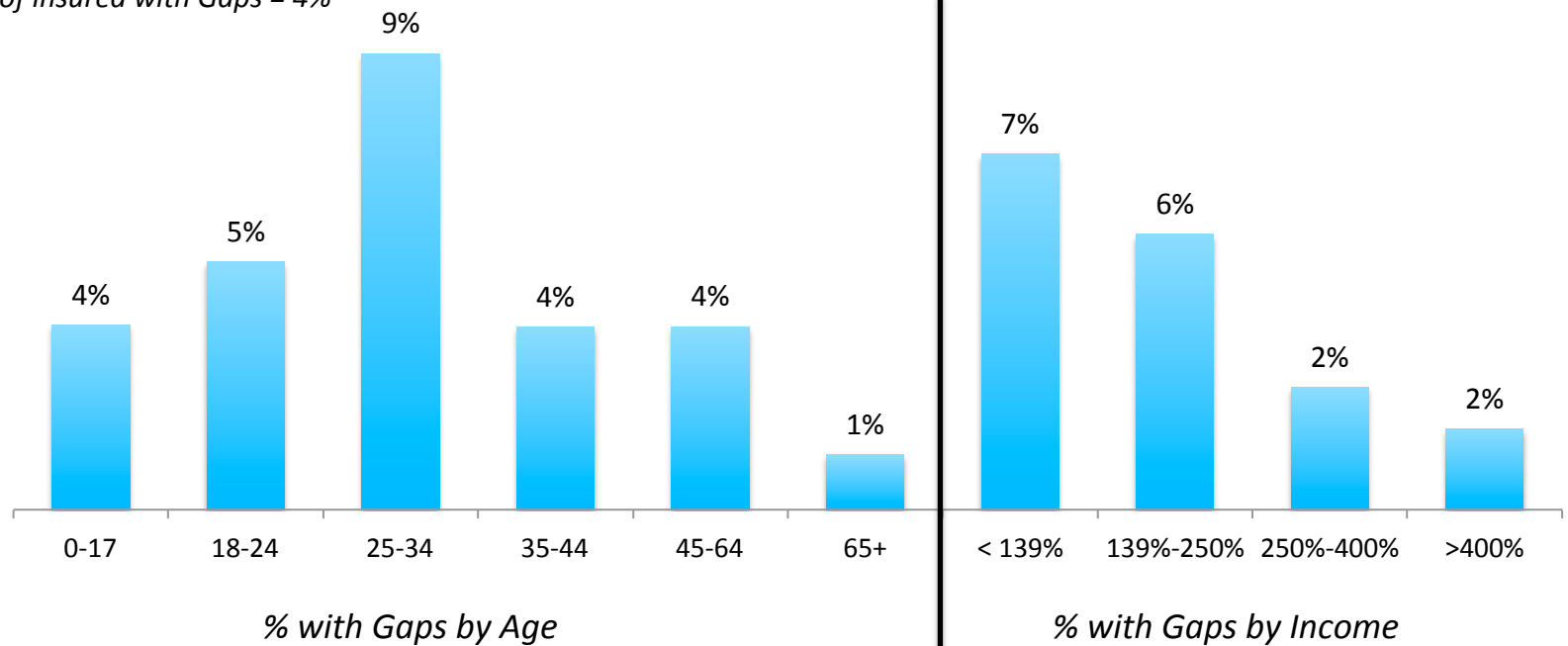
Interruptions in Insurance Coverage

Almost 10% of residents between ages 25-34 have had gaps in coverage over the last 12 months. Also lower income residents are more likely to have coverage gaps.

Percent of Insured Residents with Interruptions in Coverage over Last 12 Months

Total insured = 989,339

Overall % of insured with Gaps = 4%

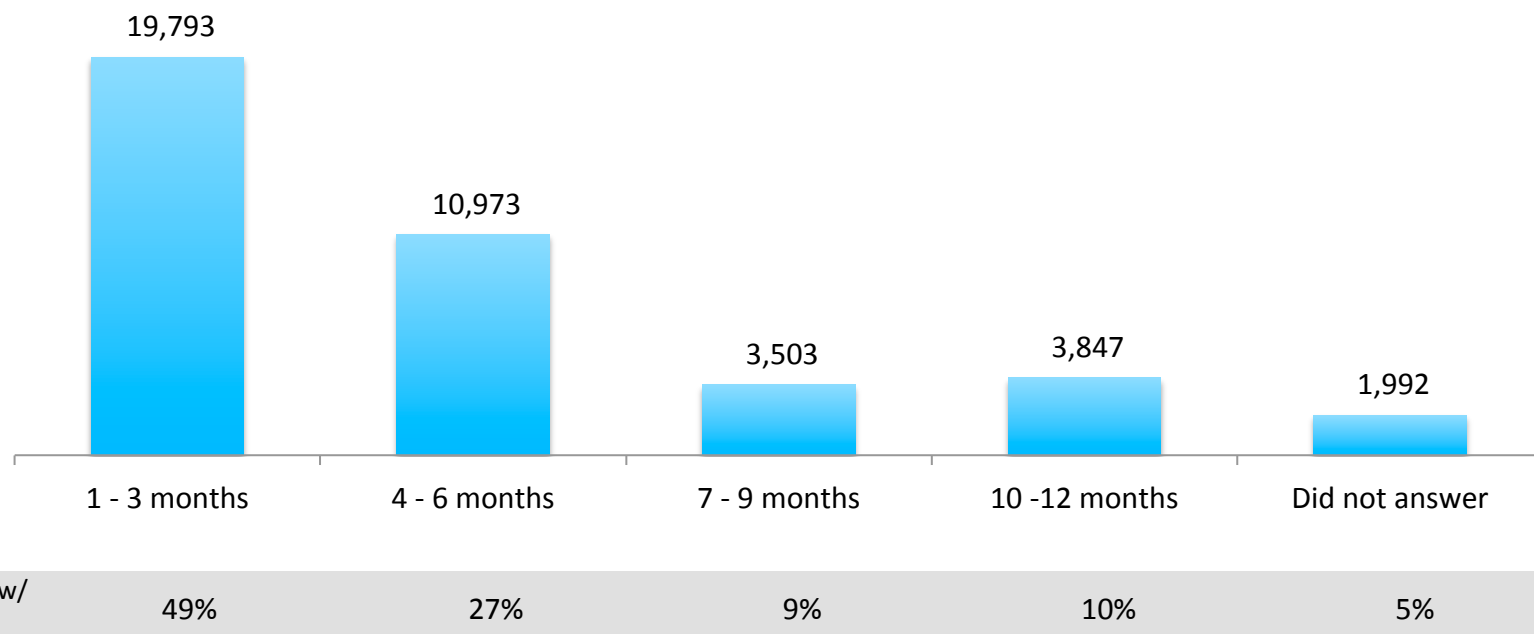


Interruptions in Insurance Coverage

Three-quarters of those with interruptions in coverage were without coverage for less than 6 months.

Length of Time without Insurance Coverage over Last 12 Months

Total currently insured with gaps in coverage = 40,108

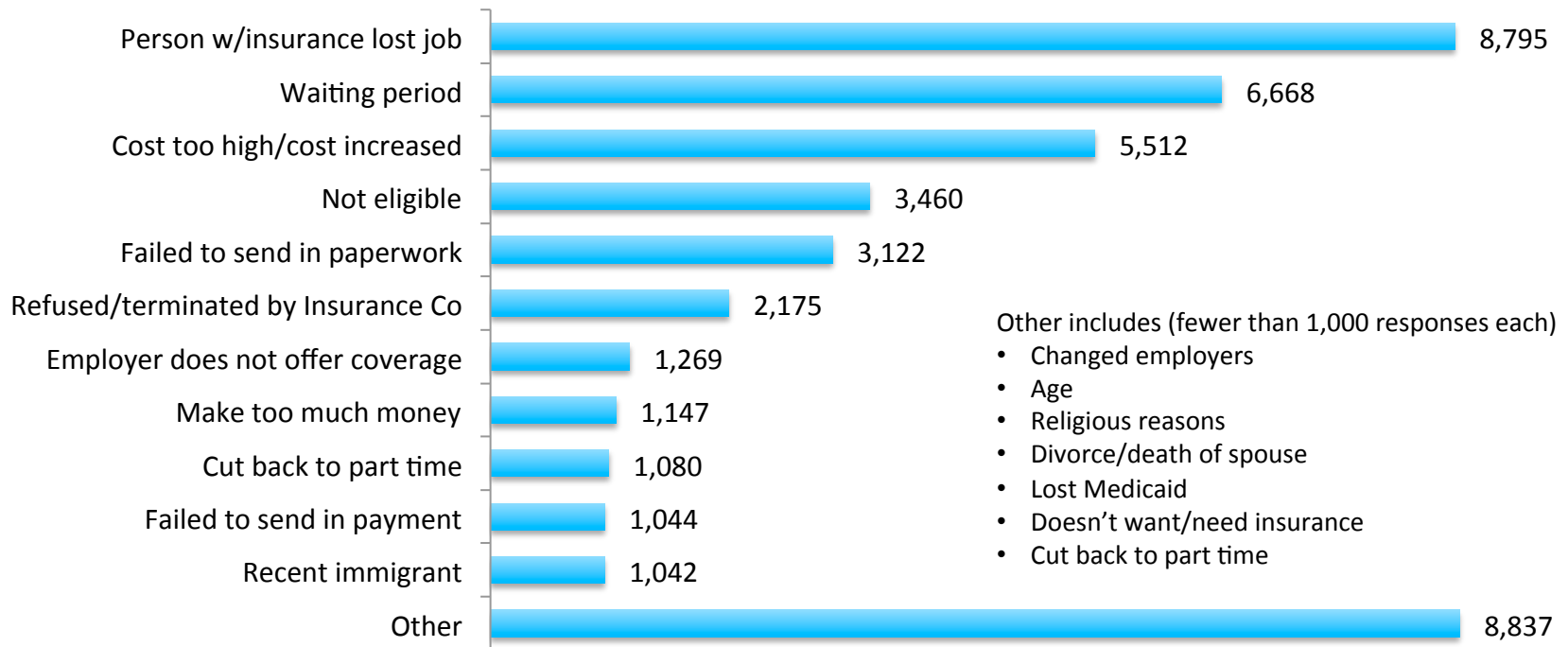


Interruptions in Insurance Coverage

The main reasons for interruptions in coverage are losing one's job or being in a waiting period for coverage. Cost is a close third.

Reasons for Interruptions in Insurance Coverage

Total currently insured with gaps in coverage = 40,108, multiple responses allowed



Contents

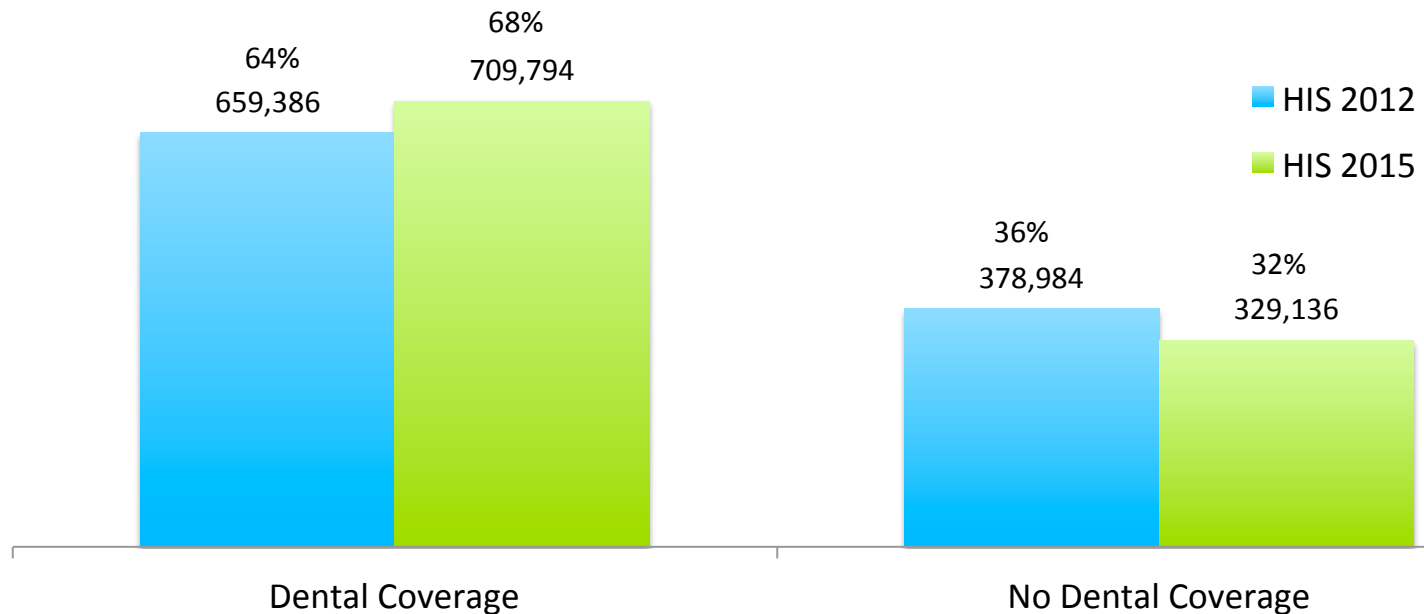
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Dental Coverage

The percent of residents with dental coverage has increased from 64% in HIS 2012 to 68% in HIS 2015.

Dental Insurance Coverage

All RI residents = 1,038,930

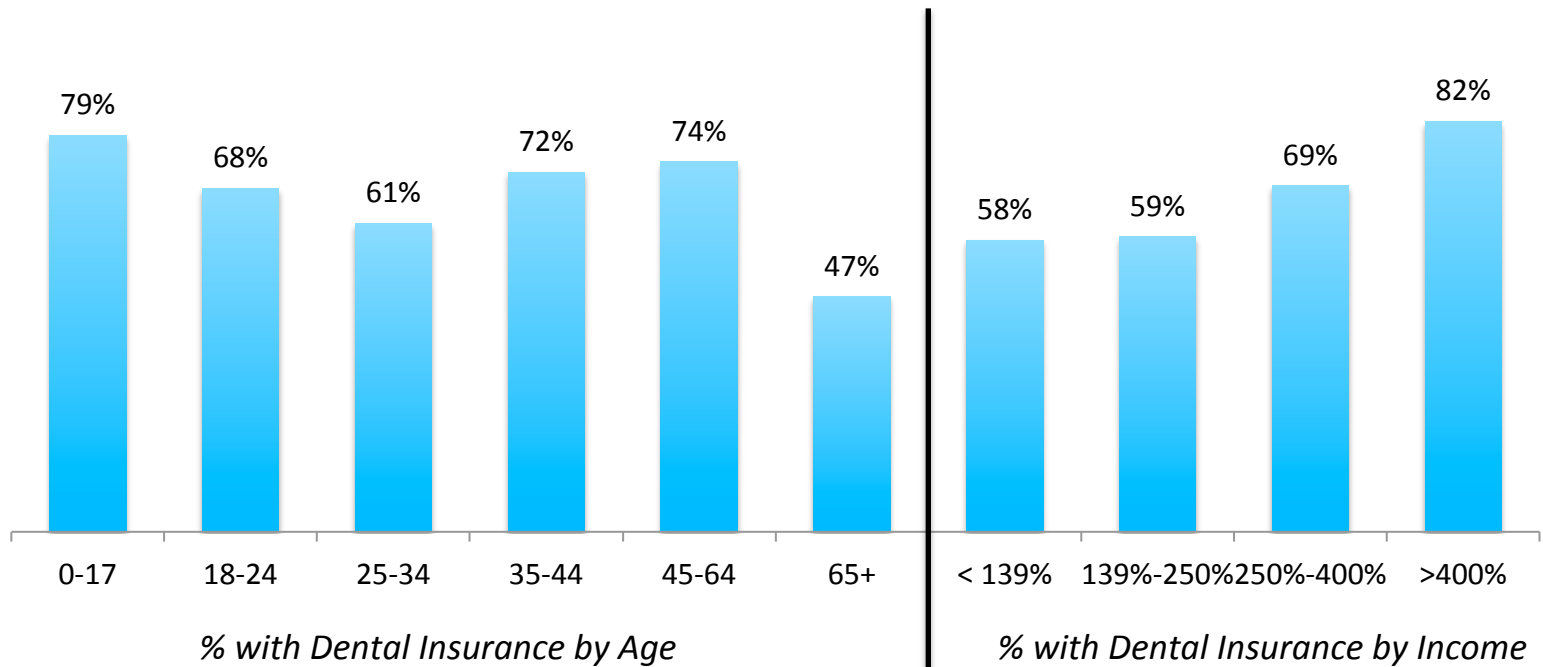


Dental Coverage

Lower income residents were less likely to have dental insurance. Also those ages 18-34 were less likely to have dental insurance than other age groups.

Percent of Population with Dental Insurance

Overall % with dental insurance = 68%

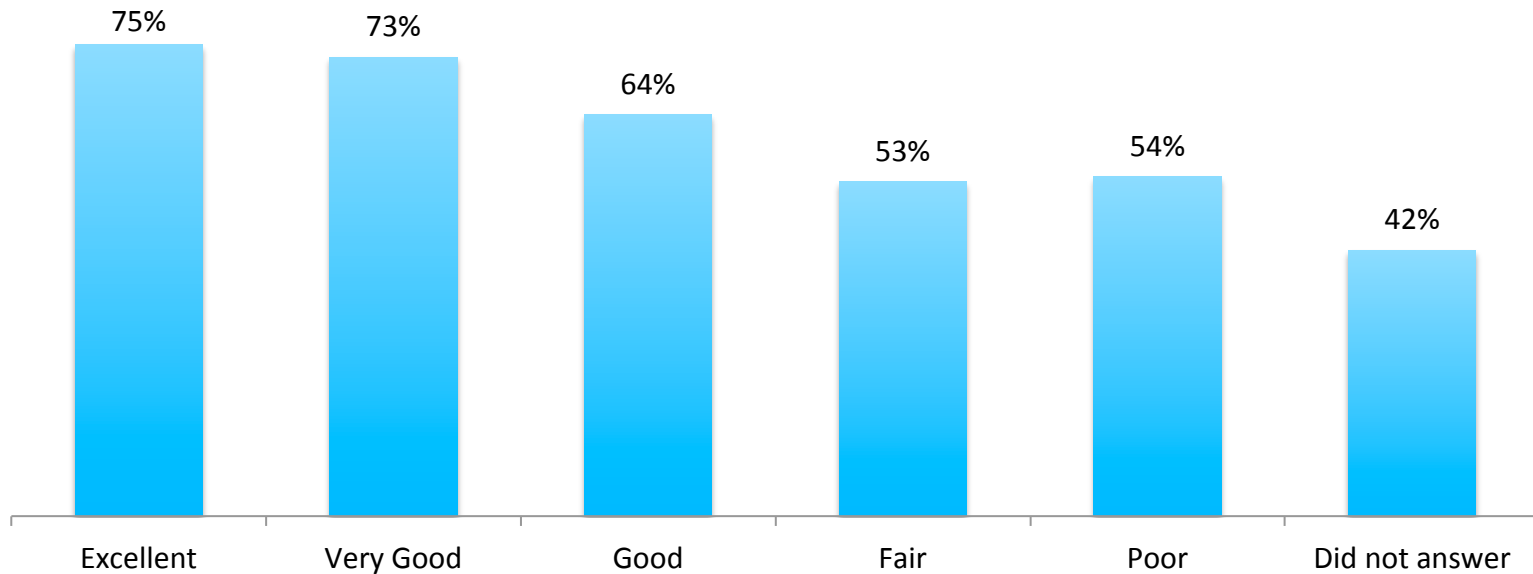


Dental Coverage

Residents in better health tend to have higher rates of dental insurance than those with fair or poor health.

Percent of Population with Dental Insurance by Health Status

Overall % with dental insurance = 68%



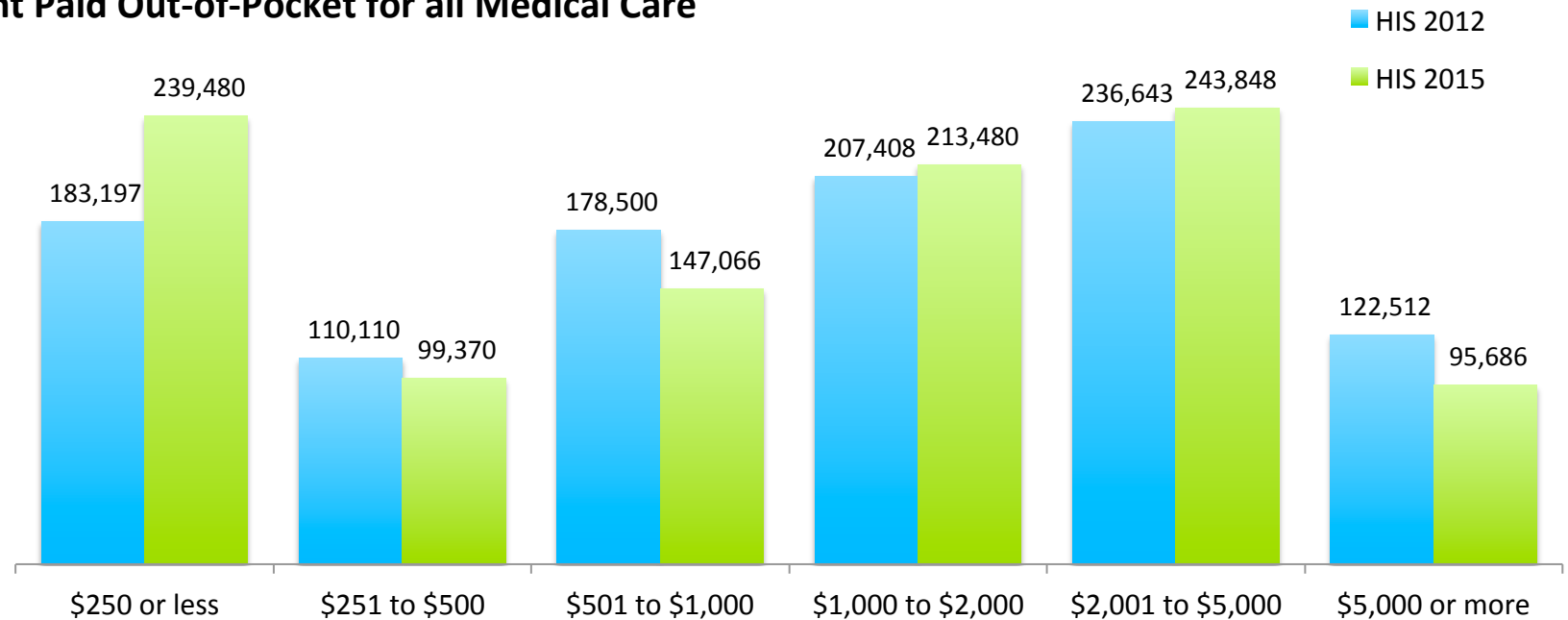
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Medical Expenses and Access to Care

23% of residents in 2015 have paid less than \$250 in out-of-pocket expenses for medical care while 9% of residents have paid \$5,000 or more.

Amount Paid Out-of-Pocket for all Medical Care

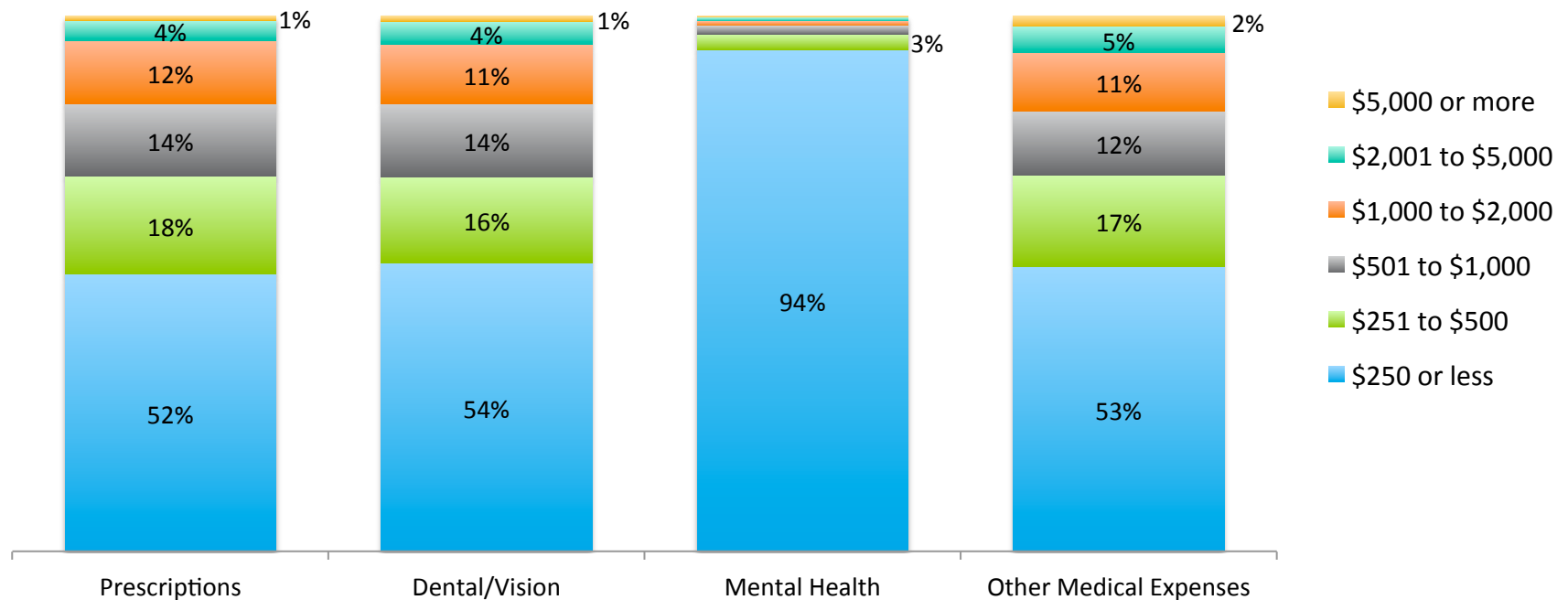


% of total 2012	18%	11%	17%	20%	23%	12%
% of total 2015	23%	10%	14%	21%	23%	9%

Medical Expenses and Access to Care

About 50% of residents spent \$250 or less out of pocket for prescriptions, dental and vision care, and other medical expenses. 94% of residents spent less than \$250 out of pocket for mental health care expenses.

Amount Paid Out-of-Pocket by Medical Expense Category

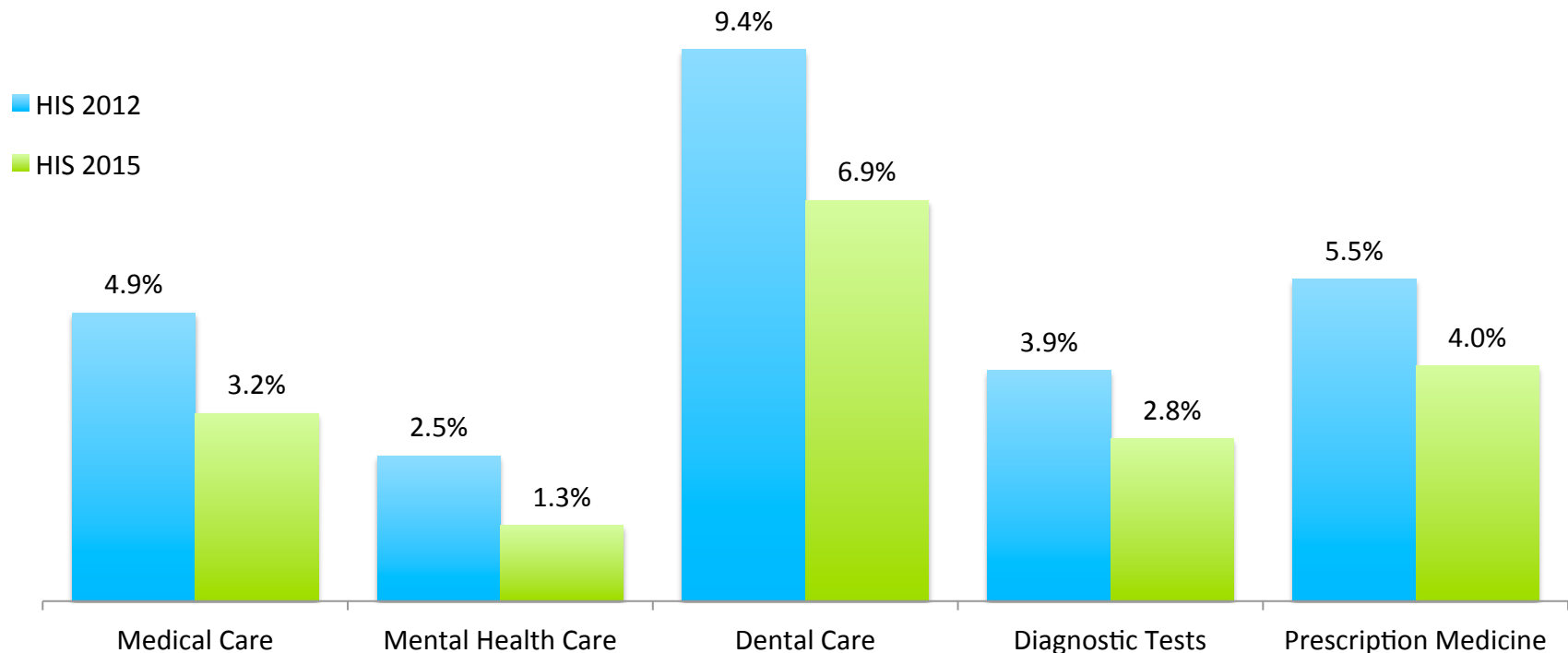


Medical Expenses and Access to Care

Over 3% of residents delayed or did not get medical care because they could not afford it. This has decreased from almost 5% of residents in 2012. The percent of residents forgoing other types of care has decreased as well.

Percent of Residents Forgoing Types of Care due to Expense

% answering "Yes" to forgoing care "because could not afford it"



Medical Expenses and Access to Care

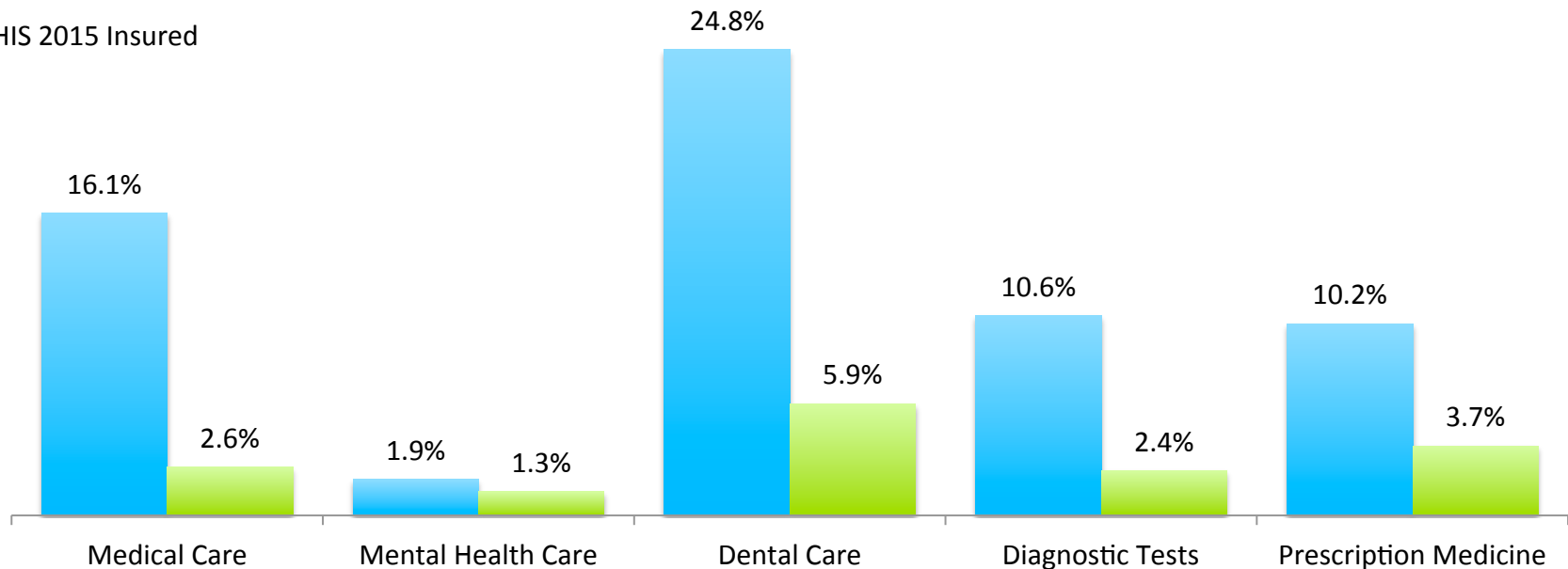
Over 16% of uninsured residents delayed or did not get medical care because they could not afford it. In comparison, less than 3% of insured residents did not get medical care due to expense.

Percent of Residents Forgoing Types of Care due to Expense by Insurance Status – HIS 2015

% answering “Yes” to forgoing care “because could not afford it”

■ HIS 2015 Uninsured

■ HIS 2015 Insured

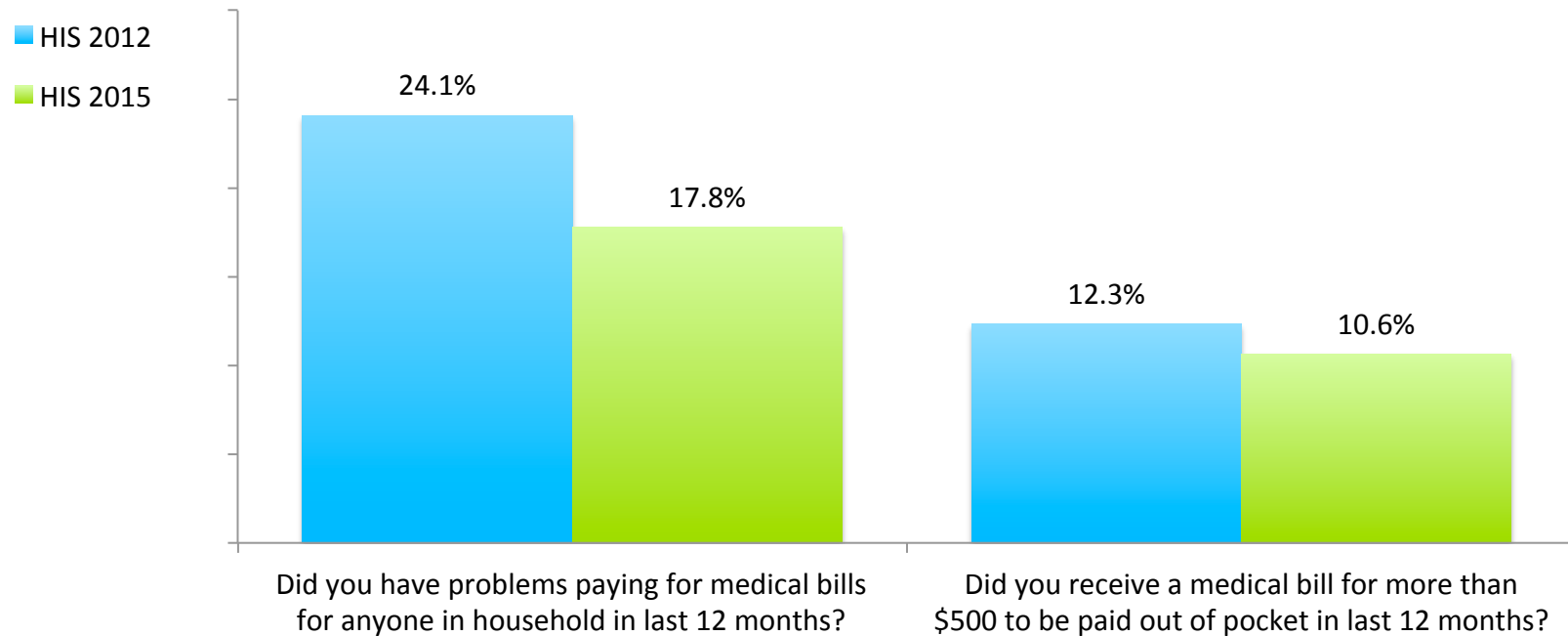


Medical Expenses and Access to Care

About 18% of residents had problems paying for medical bills in the last year, down from 24% in HIS 2012. Over 10% of residents had received a bill for more than \$500 to be paid out of pocket.

Percent of Residents Experiencing Difficulty Paying Medical Bills

% answering "Yes" to expense questions below

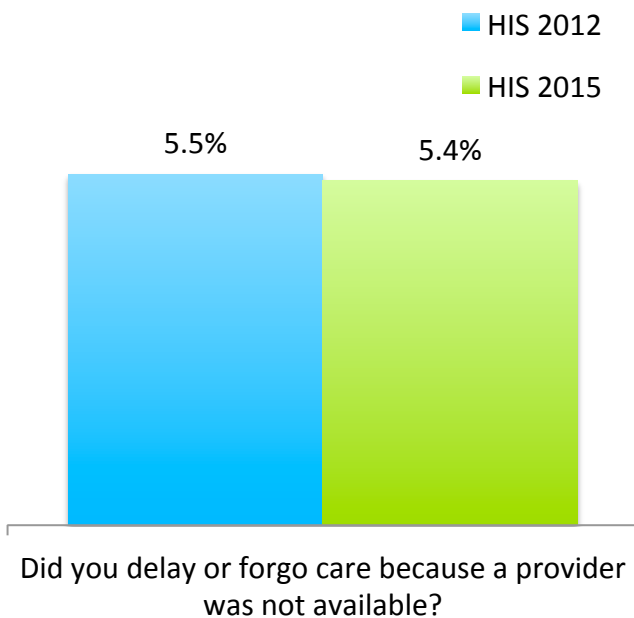


Medical Expenses and Access to Care

About 5% of residents have had to forgo or delay care because a provider was not available. The most common types of care forgone or delayed were routine/preventative medical care and dental care.

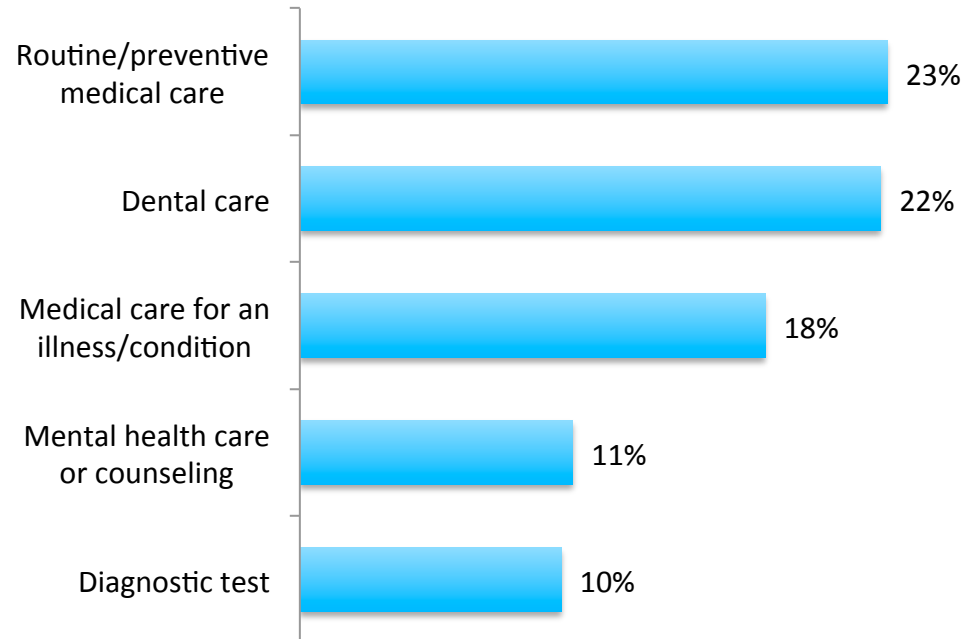
% of Residents Forgoing/Delaying Care because Provider not Available

% answering "Yes"



Types of Care Forgone/Delayed

Top 5 answers of those forgoing/delaying care



Medical Expenses and Access to Care

About 3% of residents had to forgo or delay care because they could not find a provider who accepted their insurance. The most common type of care affected was mental health care or counseling.

% of Residents Forgoing/Delaying Care because they could not find a provider who accepts their insurance?

% answering "Yes"

■ HIS 2012

■ HIS 2015

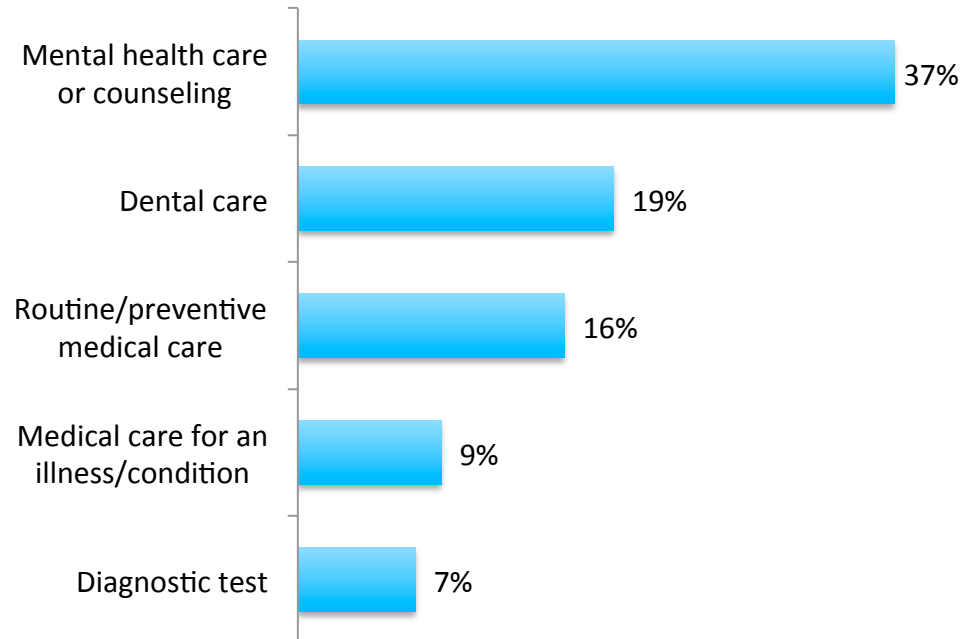
3.3%

*Not asked in
HIS 2012*

Did you delay or forgo care because you could not find a provider who accepts your insurance?

Types of Care Forgone/Delayed

Top 5 answers of those forgoing/delaying care

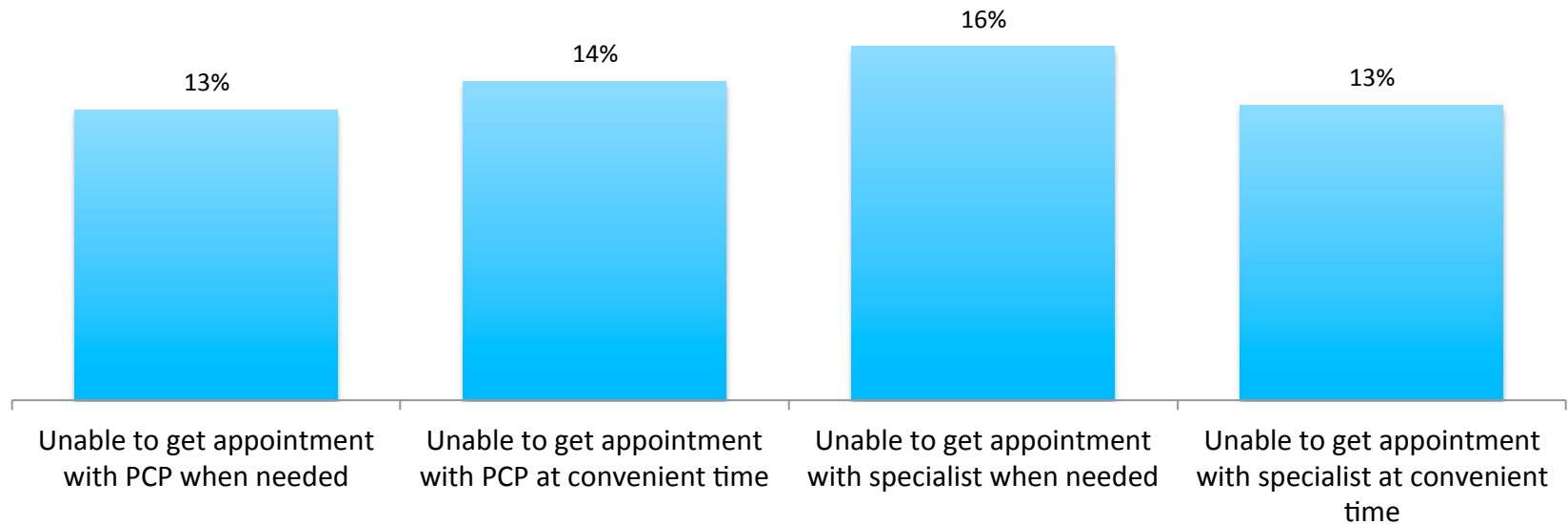


Medical Expenses and Access to Care

13% of residents were unable to get an appointment with a primary care physician (PCP) when needed. Sixteen percent of residents were unable to get an appointment with a specialist when needed.

Percent of Residents with Issues Getting Care

Total population = 1,038,930

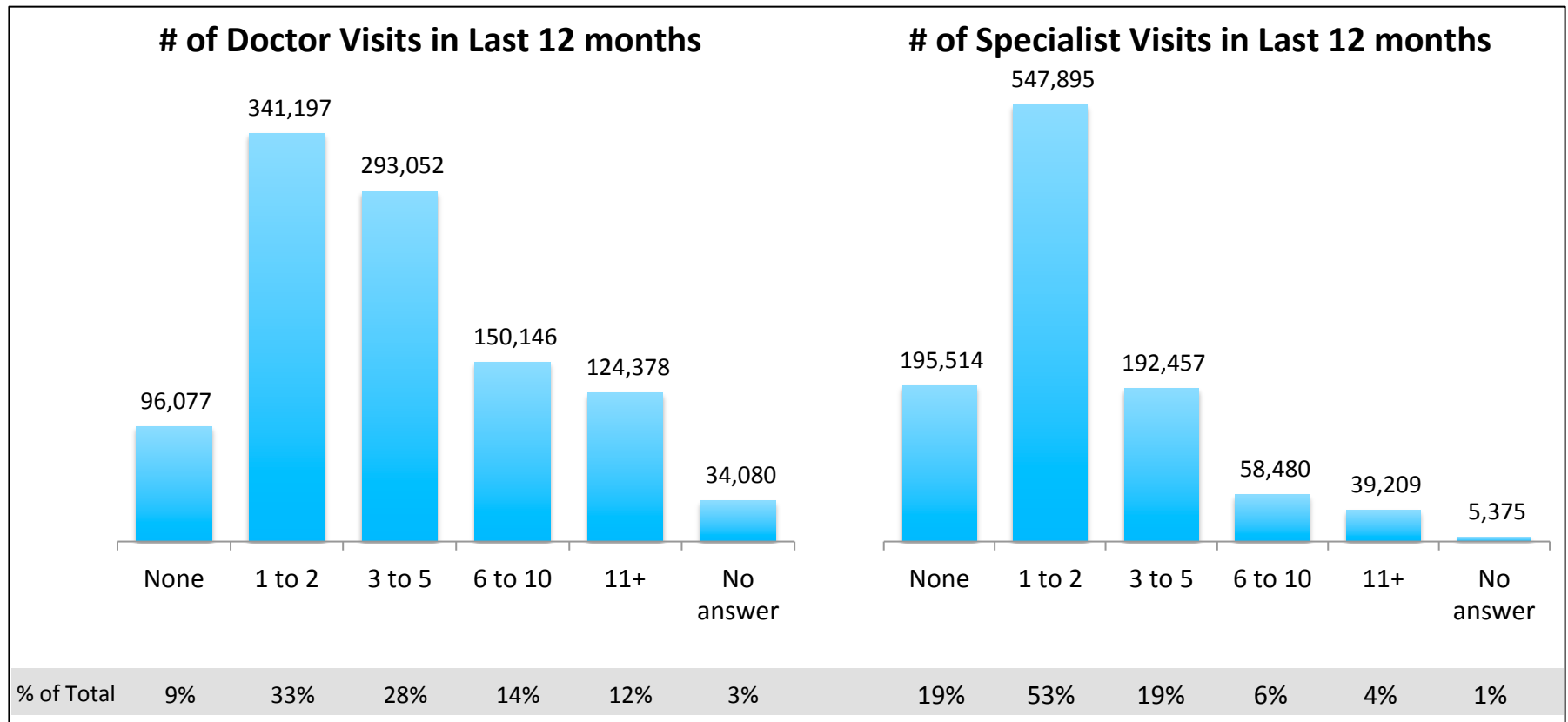


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Health Services Usage

About 1/3 of residents had 1-2 doctor visits in the last year. Another 28% saw doctors 3-5 times. More than half of residents saw a specialist 1-2 times in the last year. Another 29% saw a specialist more than 3 times.

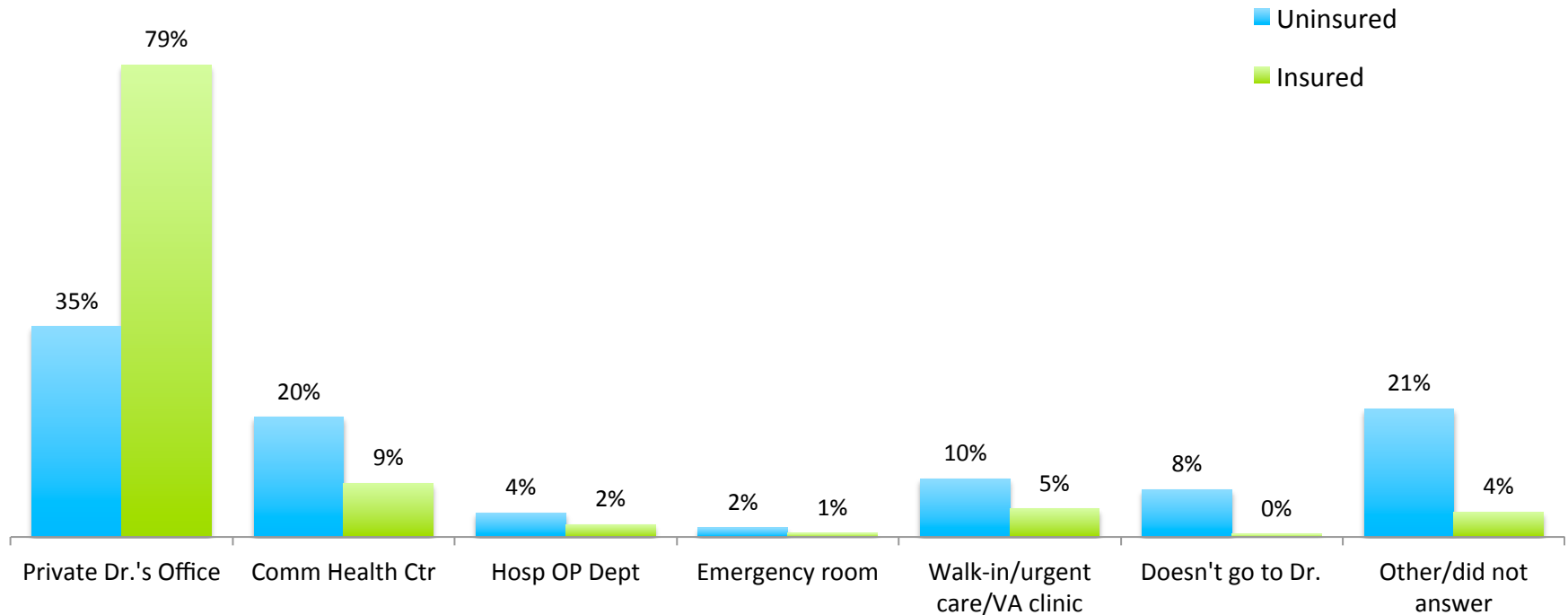


Health Services Usage

Nearly 80% of insured residents go to a private doctor's office or group practice for routine care compared to 35% of uninsured residents. Uninsured residents are much more likely to go to a community health center or walk-in/urgent care clinic.

Percent of Residents by Where They Go for Routine Care

Total population; Uninsured = 49,591, Insured = 989,339

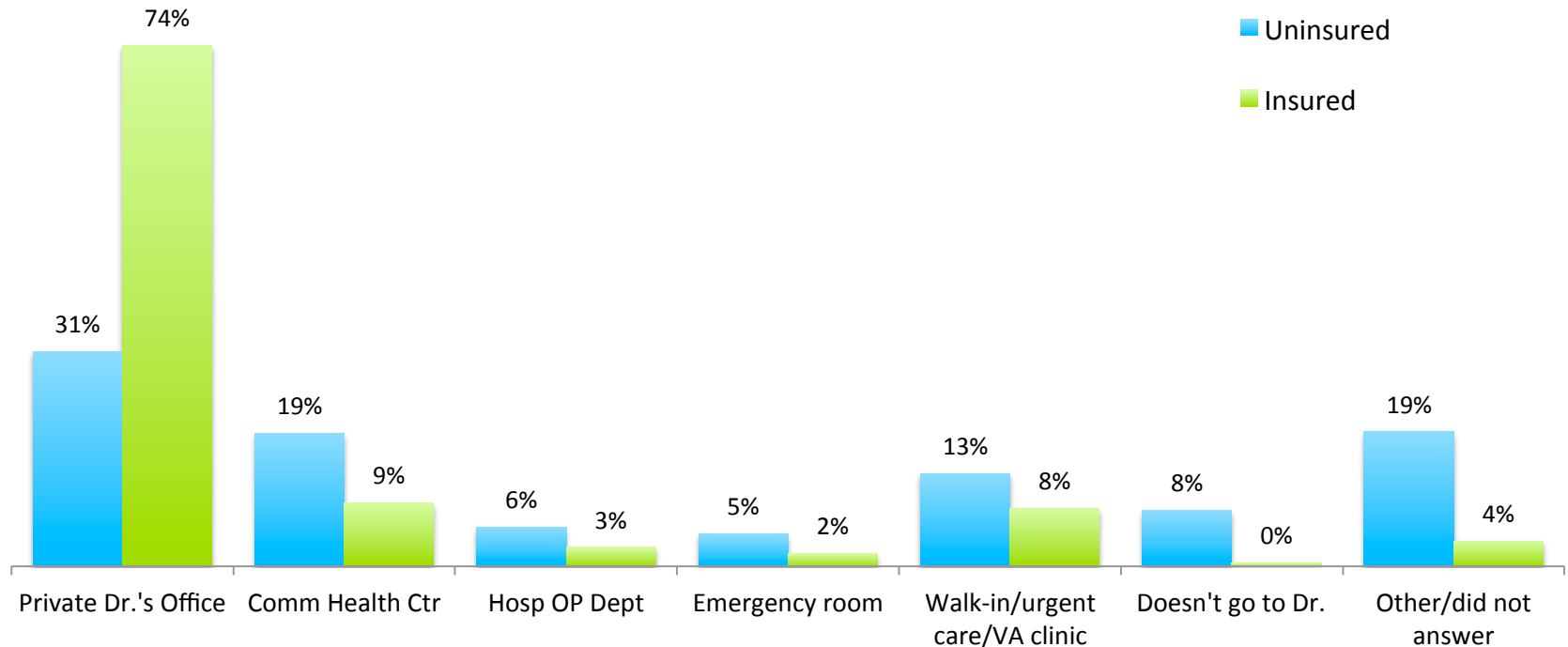


Health Services Usage

About three-quarters of insured residents go to a private doctor's office or group practice when sick or in need of medical attention compared to 31% of uninsured residents.

Percent of Residents by Where They Go When Sick or in Need of Medical Attention

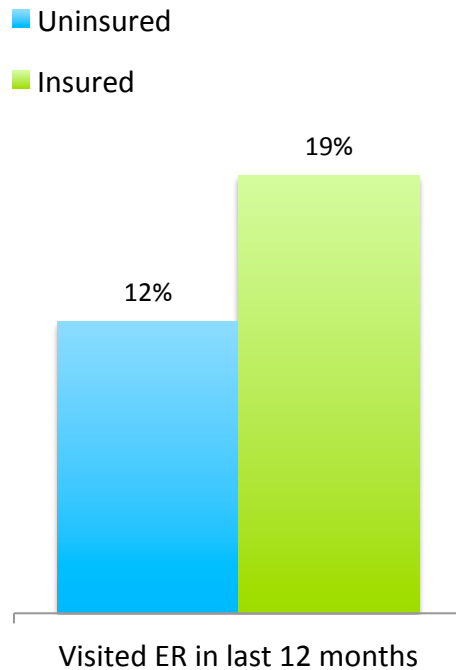
Total population; Uninsured = 49,591, Insured = 989,339



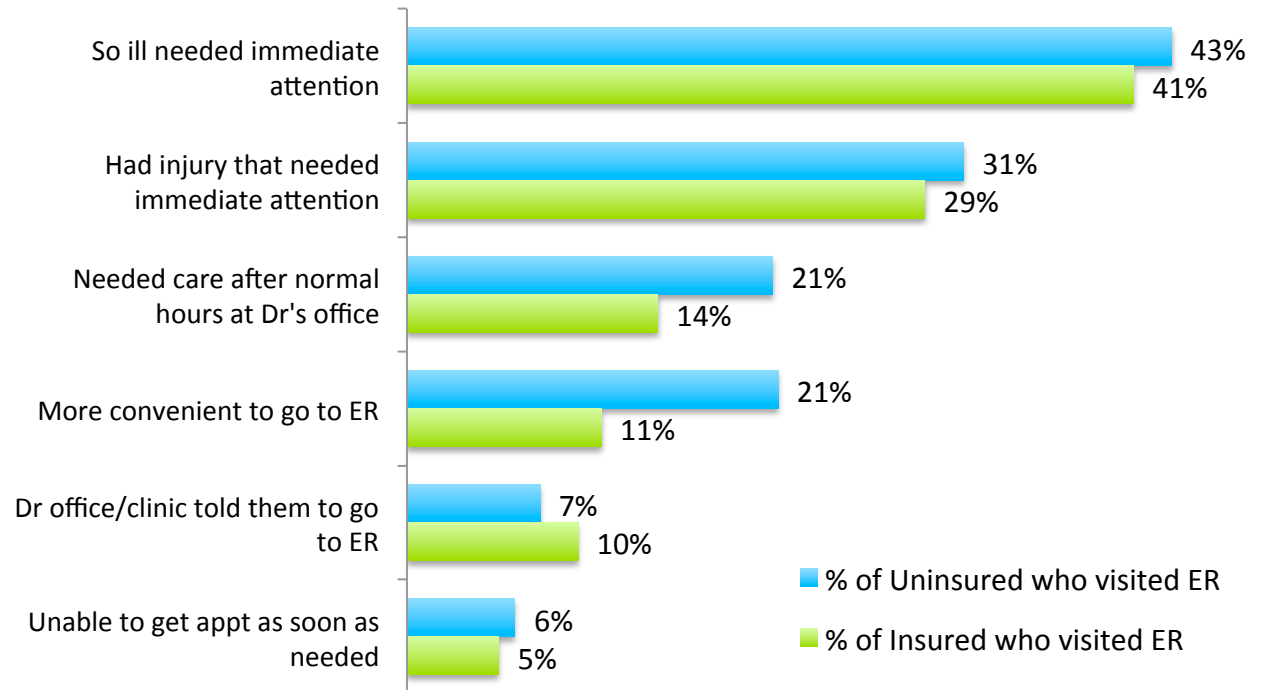
Health Services Usage

12% of the uninsured population visited the emergency room during the last 12 months compared to 19% of the insured population. The main reasons for ER usage were illness and injury that required immediate attention.

Percent of Population Visiting Emergency Room



Top Reasons for Visiting ER
Of those visiting ER – Multiple responses allowed

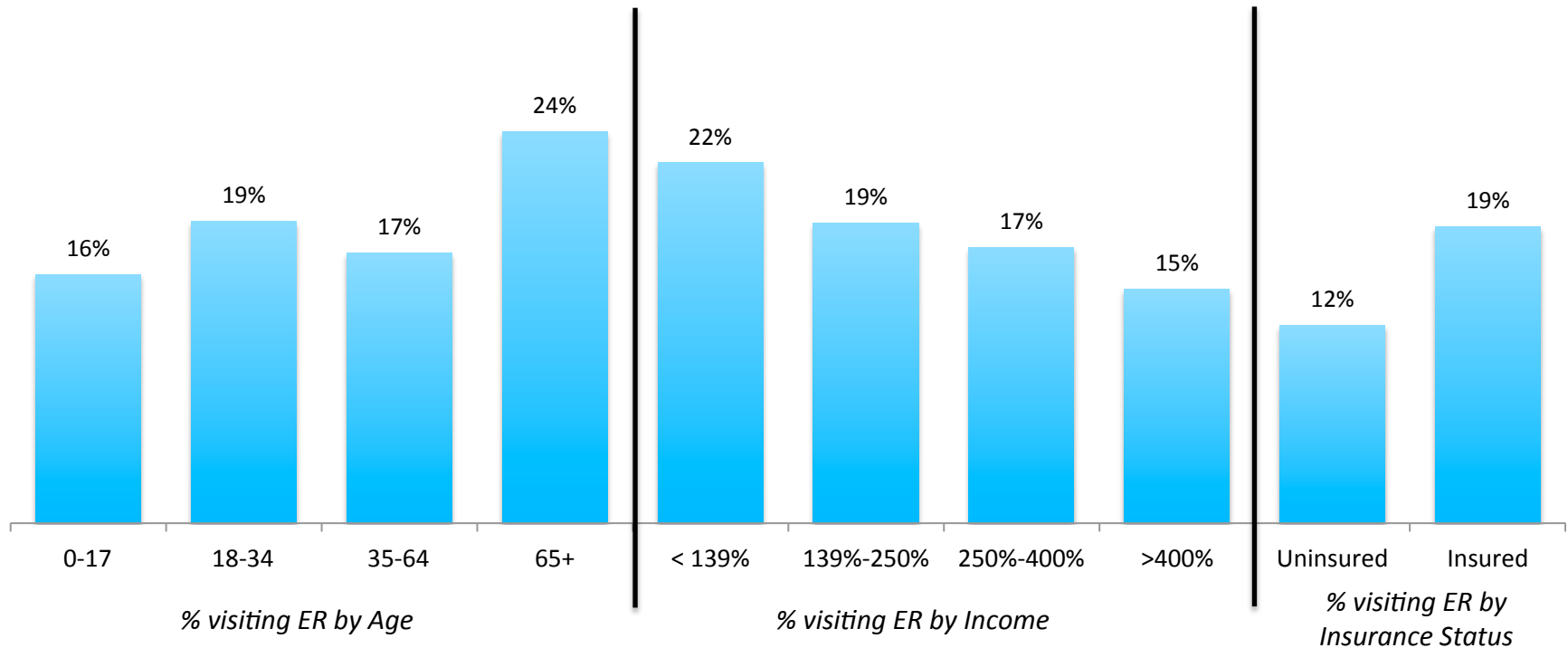


Health Services Usage

People over 65 and those under 139% FPL have higher ER usage than the average.

Percent of Population Visiting Emergency Room by Age/Income/Insurance Status

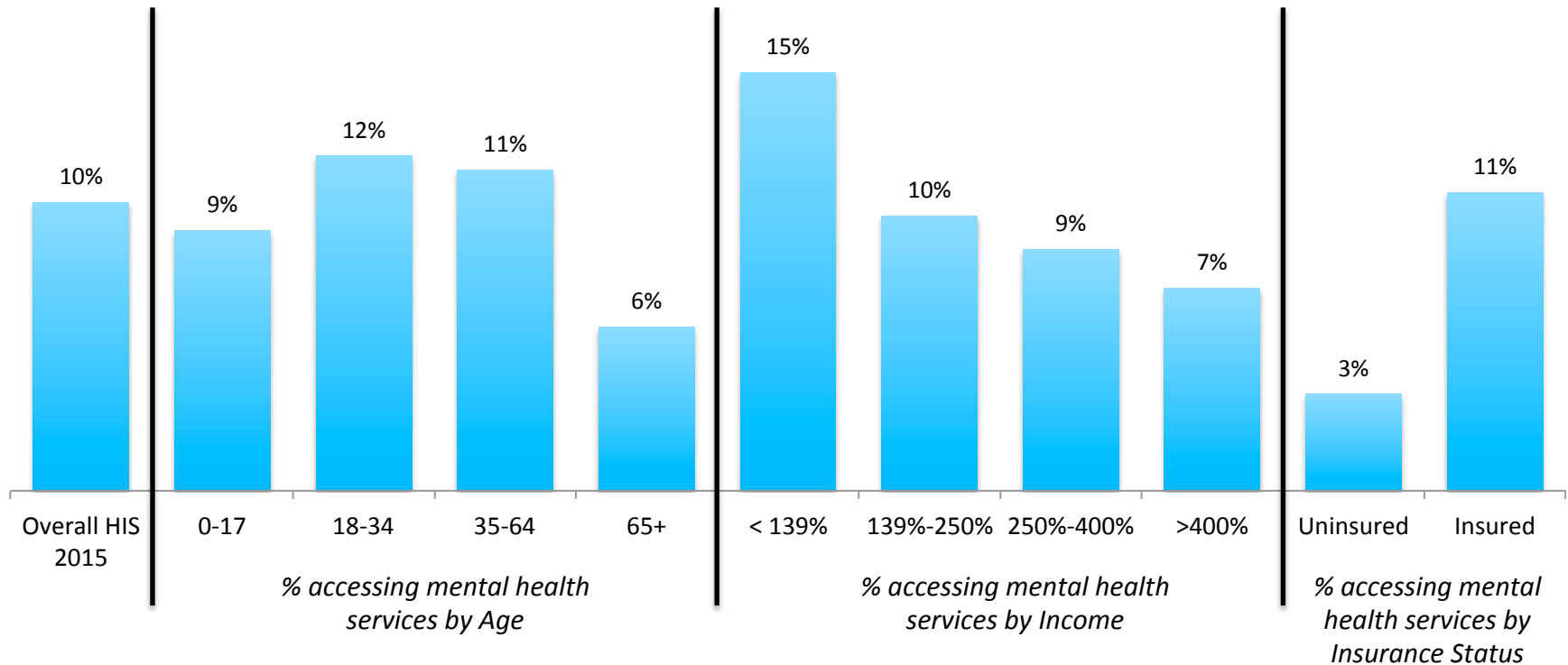
Overall % visiting ER = 18%



Health Services Usage

People between 18-34 and those under 139% FPL have higher incidence of accessing mental health services than the average.

Percent of Population Accessing Mental Health Services by Age/Income/Insurance Status



- ◆ For more information, please visit us at <http://healthsourceri.com>

Survey Methodology Detail

◆ Timing

- 2015 Survey conducted between March and June 2015
- 2012 Survey conducted between July and October 2012

◆ Survey Sample

- All persons in Rhode Island, excluding those living in institutional settings
- Surveys conducted by phone, including both land lines and cell phones
- Oversampling of low income residents: 40% of sample from households earning <\$35,000/year

◆ Survey Responses: HIS 2015

- Total interviews conducted: 5,602 households, 12,136 total residents
- Final dataset contains data from 416 uninsured residents
- 51% of surveys completed via landline telephones, 49% via cell phones
- 171 surveys conducted in Spanish
- Overall response rate was 37%

◆ Survey Results

- Data was weighted to match known state demographic data from the Census Bureau American Community Survey
- Medicaid and HSRI enrollment data was calibrated to match available administrative data on state enrollees