

ISSUE BRIEF: ACCESS TO HEALTH CARE

Access to health services is important at every age. Having both a primary care provider and medical insurance can prevent illness by improving access to a range of recommended preventive services across the lifespan, from childhood vaccinations to screening tests for cancer and chronic diseases, such as diabetes and heart disease. Having a primary care provider and medical insurance also plays a vital role in finding health problems in their earliest, most treatable stages, and managing a person through the course of the disease. Lacking access to health services—even for just a short period—can lead to poor health outcomes over time.

Key Facts:

- Almost 1 in 4 Americans do not have a regular primary care provider or health center where they can receive routine medical services
- Less than half of older adults are up-to-date on a core set of clinical preventive services, including cancer screenings and immunizations
- Less than half of Americans with hypertension have adequately controlled blood pressure and only one-third with high cholesterol have it adequately controlled. Improving control is one of the most effective ways to prevent heart disease and stroke
- Colorectal cancer is the second leading cause of death in the U.S. Some estimates suggest that if screening implemented at recommended levels, more than 18,000 lives could be saved each year
- Each year, asthma costs the U.S about \$3.30 per person in medical expenses, missed school /work days and early deaths
- Community programs that teach people how to manage their diabetes can help prevent short- and long-term health conditions, enhance quality of life, and contain health care costs
- More than 80 million people in the US do not have fluoridated water, which reduces tooth decay by 25% in children and adults. Every dollar spent on fluoridation saves more than \$40 in dental treatment costs
- Nationally, only 44.5% (age-adjusted) of people age 2 and older had a dental visit in the past 12 months, a rate that has remained unchanged for the past decade

Health Insurance

People without medical insurance are more likely to lack a usual source of medical care, and are more likely to skip routine medical care due to cost, increasing their risk for serious and disabling health conditions. When they do access health services, they are often burdened with large medical bills and out-of-pocket expenses.

Regular Source of Medical Care

Access to health services affects a person's health and well-being. Regular and reliable access to health services can prevent disease and disability, detect and treat illnesses or other health conditions, increase quality of life, reduce the likelihood of premature death and increase life expectancy. Primary care providers play an important role in protecting the health and safety of the communities they serve. They can develop meaningful and sustained relationships with patients and provide integrated services while practicing in the context of family and community. Having a usual primary care provider is associated with greater patient trust in the provider, good patient-provider communication and increased likelihood that patients will receive appropriate care.

Clinical/Community Preventive Services

Clinical preventive services, such as routine disease screening and scheduled immunizations, are key to reducing death and disability and improving the Nation's health. These services both prevent and detect illnesses and diseases—from flu to cancer—in their earlier, more treatable stages, significantly reducing the risk of illness, disability, early death, and medical care costs. They can be supported and reinforced by community-based prevention, policies, and programs. Community programs can also play a role in promoting the use of clinical preventive services and assessing clients in overcoming barriers to transportation, child care and navigating resources .

Social Determinants of Health

One of the barriers to accessing to health care is the high cost of medical insurance, deductibles and co-pays. A lack of medical

services in some communities, coupled with a shortage of primary care providers, also negatively affects people's ability to access health services. Living in a rural area itself is a determinant health. Geographic isolation, fewer transportation options and limited resources compound access barriers.

HIGHLIGHTS FROM THE 2015 COMMUNITY HEALTH ASSESSMENT

Alpena, Antrim, Charlevoix, Cheboygan, Emmet, Montmorency, Otsego, and Presque Isle counties

Tip of the Mitt Data

Health Professions Shortage Areas: There are Health Professions Shortage Areas designated in Alpena, Antrim, Charlevoix, Cheboygan, Emmet, Montmorency, Otsego and Presque Isle counties for primary care, behavioral health, and/or dental care

Primary Care Provider Rate: Five counties have provider to population ratios considerably below State rate (80 per 100,000): Presque Isle (15); Antrim (34); Cheboygan (62) Montmorency (63); and Otsego (67). Unsurprisingly, counties where hospitals are located, and medical practices are concentrated, have higher rates: 86 per 100,000 in Alpena County, 96 per 100,000 in Charlevoix County, and 134 per 100,000 in Emmet County.

Health Insurance: Most recent data (2013) for rates of insured for the overall adult population range from 80% in Montmorency County to 84% in Otsego County. However, with the implementation of the Affordable Care Act, the federal Health Insurance Marketplace opened late in 2012 and was soon followed by the State’s Healthy Michigan Plan. As of April 2015, virtually 100% of eligible adults from the 8-county region were enrolled in one of these programs. The proportion of children covered by any insurance ranges from 94-95% in all eight counties, slightly below State rate of 96%.

Community Conversations

117 community members and representatives from local health departments, hospitals and other health care providers, social service agencies, schools, business, and government participated in a Community Conversation to answer the question, “What can we do here in this county to move closer to our vision of a healthy community?” Improving access to health care—including primary care, behavioral health, and/or oral health care, was identified as an action in the following counties:

ALP	ANT	CHX-EM	CHB	MON	OTS	PI
X	X	X	X	X	X	X

What Matters to You? Survey N=1,220

Access to health care was the #1 factor needed for a healthy community in the Community Survey, with 69% identifying access to primary care, specialty care, behavioral health and dental care as a top factor. They ranked access to care 6th as a need in their county, after substance use, overweight and obesity, chronic disease mental health issues, and affordable housing.

Health Care Provider Survey N=126

Similarly, 69% of physicians, nurse practitioners and physician assistants identified access to health care as a top factor, ranking it #1 in the Health Care Provider Survey. Regarding local community health problems, they ranked access to health care third, following overweight/obesity and mental health issues.

Major Forces of Change

Affordable Care Act (ACA)

Implemented in 2013, the ACA represents the largest overhaul of the U.S. healthcare system since the enactment of Medicare and Medicaid in 1965. It introduced mechanisms like mandates, subsidies and insurance exchanges. The law requires insurance companies to cover all applicants within new minimum standards and offer the same rates regardless of pre-existing conditions or sex.

Enroll Northern Michigan

Enroll Northern Michigan is a very successful collaborative initiative of health departments, hospitals, federally-qualified health centers, community mental health agencies and other community partners from across the tip of the mitt region. Led by the Health Department of Northwest Michigan with funding from the Northern Health Plan to enroll eligible adults in the ACA: Healthy Michigan Plan or the Health Insurance Marketplace.

Mi-Connect

Mi-Connect is led by Alcona Health Centers, a system of federally-qualified health centers. The initiative is designed to increase integration of primary care and behavioral health and increase access to oral health care across an 11-county region.

