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Contact: Greg Turner, Ball Consulting Group, LLC Phone: 617-243-9950 Email: greg@ballcg.com

MASS. HEALTH REFORM SURVEY FINDS 'SUSTAINED GAINS' IN INSURANCE COVERAGE BUT 'PERSISTENT GAPS' IN ACCESS AND AFFORDABILITY

On 10th Anniversary of Landmark Legislation, Report Shows Nearly Half of Non-elderly Adults Still Have Challenges Getting and Affording Health Care

BOSTON (March 23, 2016) – Results from a survey of Massachusetts residents regarding health insurance released today by the <u>Blue Cross Blue Shield of Massachusetts Foundation</u> reveal a continued high rate of insured among the state's population, but also challenges with access and affordability particularly among those with lower incomes and those with higher health care needs.

The Massachusetts Health Reform Survey (MHRS), conducted in the fall of 2015 by the Urban Institute, highlights "sustained gains" in health insurance coverage since the 2006 passage of the state's health care reform law, with 95.7 percent of nonelderly adults reporting coverage when surveyed last fall. The near-annual survey tracks trends in the state's health care system since the 2006 passage of health reform. This is the first MHRS following the implementation of the Affordable Care Act (ACA) that began in January 2014.

The survey revealed that people who are healthier generally have more confidence in their ability to keep their insurance in the future, and have an easier time affording health care. Sicker respondents with chronic diseases indicated a higher degree of difficulty obtaining health care services and were more likely to be worried about their ability to pay for their medical bills in the future.

"The survey's top-line trend is affirming for Massachusetts residents and policy makers alike, as the rate of adults covered at the time of the survey is very high – in fact, it is the highest ever since we began measuring in 2006," said Audrey Shelto, President of the Blue Cross Blue Shield of Massachusetts Foundation. "However, the fact that 43 percent of insured adults report problems with affordability is a significant issue. Furthermore, these continued financial problems are disproportionately affecting our most vulnerable residents suggesting that simply having health insurance does not guarantee access to affordable care."



An executive summary of the report can be found <u>here</u>. The <u>full report</u>, <u>chart pack</u>, <u>infographic</u> and other resources can be found <u>here</u>. Key findings from the survey include:

- 95.7 percent of non-elderly adults had coverage at the time they were surveyed, and 88.6 percent maintained coverage for the entire year.
- In a first-ever measure by the annual survey, 73.4 percent of respondents reported having dental insurance.
- Almost half of insured nonelderly adults (46.9 percent) reported one or more of the following access challenges: 1) difficulty finding a provider that would accept their insurance; 2) difficulty finding a provider that was accepting new patients; or 3) difficulty getting an appointment with a provider in a timely manner.
- More than one-third of insured respondents reported that they went without needed health care over the past year, most often going without medical care (23.3 percent), prescription drugs (13.7 percent) and dental care (17.6 percent). Unmet need for care was significantly higher for insured adults with income at or below 138 percent of the federal poverty level (FPL) and adults with health problems, including those who reported fair or poor health and those with a health limitation or chronic condition. For example, those with low-incomes (at or below 138 percent FPL) were twice as likely to have unmet need for care than those with higher incomes (at or above 400 percent FPL) 52.3 percent vs. 26.9 percent, respectively.
- More than 43 percent of respondents reported that health care costs caused financial problems over the past year and just over a quarter (27.9 percent) of respondents at or below 138 percent FPL did not get needed health care at some point in the last year because of difficulty paying for it.
- One in five insured adults reported that they and their families had tried to address health care spending by cutting back on health care spending (11.4 percent), cutting back on other spending (17.1 percent), reducing savings or taking funds from savings (15.2 percent), increasing time spent working (9.8 percent), and/or taking on debt, including credit card debt (8.8 percent).

"Massachusetts has been successful at maintaining the gains in health insurance coverage that were achieved following the state's 2006 health care reform initiative," said Philip Johnston, Chairman of the Blue Cross Blue Shield of Massachusetts Foundation. "However, evidence from the 2015 Massachusetts Health Reform Survey suggests more work needs to be done to make health care more affordable as intended with the 2012 passage of Chapter 224, the state's cost containment legislation."



"New strategies are needed to reduce the burden of health care costs in Massachusetts, particularly for insured adults with lower incomes and those with health problems," said Sharon K. Long, a senior fellow at the Urban Institute and the lead author of the study.

The Blue Cross Blue Shield of Massachusetts Foundation makes available public use files of the results from each year the MHRS was fielded (i.e., 2006-2010, 2012-2013, 2015) through the Inter-university Consortium for Political and Social Research, and can be found <u>here</u>.

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About the Blue Cross Blue Shield of Massachusetts Foundation

The mission of the Blue Cross Blue Shield of Massachusetts Foundation is to expand access to health care for low-income and vulnerable individuals and families in the Commonwealth. The Foundation was founded in 2001 with an initial endowment from Blue Cross Blue Shield of Massachusetts. It operates separately from the company and is governed by its own Board of Directors.

About the Urban Institute

The nonprofit <u>Urban Institute</u> is dedicated to elevating the debate on social and economic policy. For nearly five decades, Urban scholars have conducted research and offered evidence-based solutions that improve lives and strengthen communities across a rapidly urbanizing world. Their objective research helps expand opportunities for all, reduce hardship among the most vulnerable, and strengthen the effectiveness of the public sector.

About the Massachusetts Health Reform Survey

Conducted annually by the Urban Institute from fall 2006 to fall 2015 (with the exception of 2011 and 2014), the survey has tracked health insurance coverage, health care access and use of services and affordability of care. The 2015 survey was funded by the Blue Cross Blue Shield of Massachusetts Foundation. Prior years' surveys were jointly funded with the Robert Wood Johnson Foundation (2006-2008, 2012-2013) and the Commonwealth Fund (2006-2008). The survey is fielded by the Social Science Research Solutions (SSRS) and is a telephone interview of approximately 2,000 non-elderly adults ages 19 to 64 in Massachusetts including those with landline phones and those with cell phones. There is an oversample of lower-income persons to allow for more detailed analysis of the impact of reform on this population. Lower-income is defined as those families with incomes below 300 percent of the federal poverty level.