



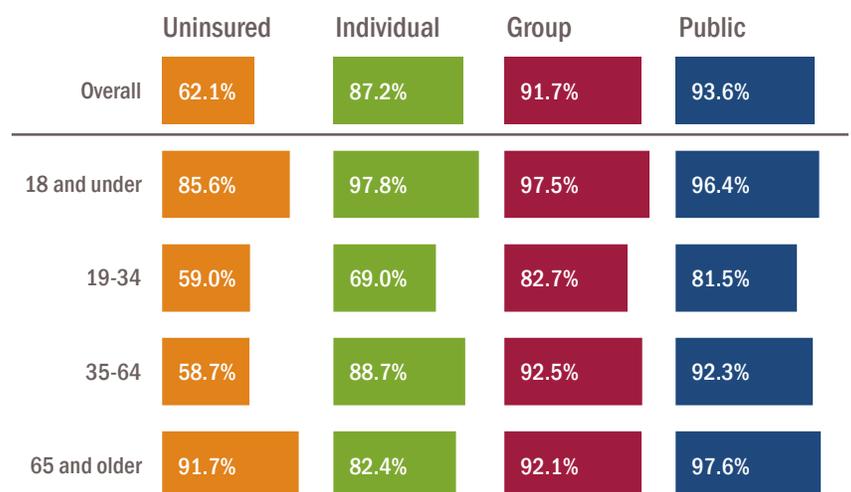
The Oregon Health Insurance Survey (OHIS) is an important source of information about health care coverage in the state. The survey provides detailed information about the impacts of health system reform efforts on health care coverage, access to care, and utilization. Data from the 2015 survey provides an early look at how changes due to the Affordable Care Act are impacting coverage. This fact sheet is part of a series exploring health insurance coverage using data from this survey, and presents information about Oregonians' access to health care. Multiple factors influence access to care, including availability and location of providers, cost of care, and insurance coverage.

USUAL SOURCE OF CARE

We asked survey respondents if they have a usual place they go to receive health care. Having a usual doctor is linked to lower costs and better health outcomes. Statewide, 90% of respondents reported having a usual source of care.

Not surprisingly, uninsured Oregonians were less likely to have a usual source of care. Overall, though, the large majority of Oregonians have a place that they usually go for health care.

This chart shows the percentage of people with a usual place to go for health care by coverage type and age groups, with young adults (19–34) being the least likely to have a usual place to go.

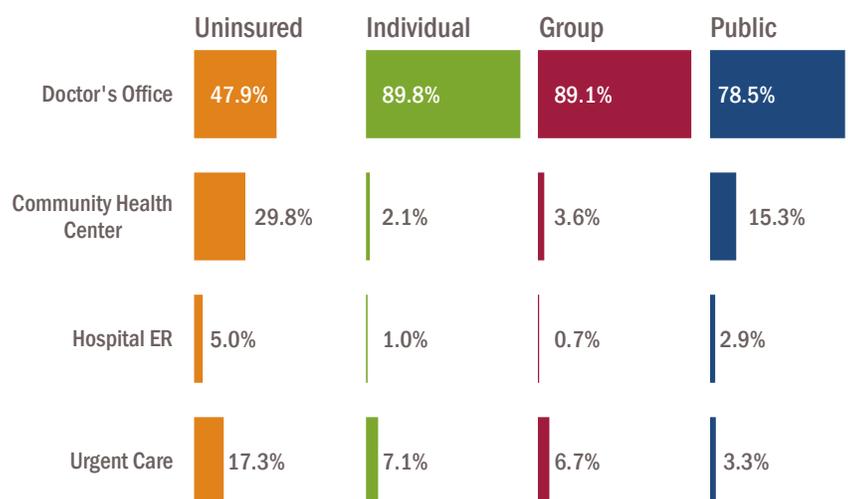


USUAL PLACE FOR CARE

For respondents who said they had a usual source of care, we asked them where they went for routine care. For all coverage types, the doctor's office was the most common place, with 80% of respondents stating that the doctor's office was their usual source for care.

Overall, 9% of respondents stated that a community health center was their usual source of care, with this source being most common among uninsured individuals and people with public coverage. About 17% of uninsured respondents listed urgent care as the usual place they went. Very few respondents said that the Hospital ER was the place where they go for usual care.

After doctors' offices, community health centers were the next most common place that Oregonians went for usual care.



USUAL SOURCE OF CARE BY REGION

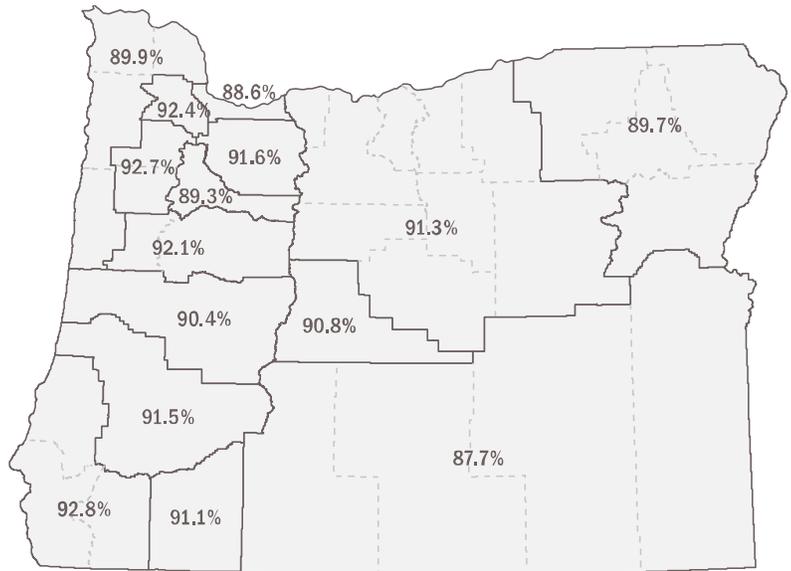
Access to health care providers varies by region in the state. The map to the right shows the percentage of respondents who reported having a usual source of care by region. As shown on the previous page, the statewide average for having a usual source of care is 90%. The Southeast, Northeast, and Northwest Regions of the state were below that average, along with Multnomah and Marion Counties.

The Southeast Region (Klamath, Lake, Harney, and Malheur Counties) had the lowest percentage of people having a usual source of care at 87.7%.

The Southwest Region (Coos, Curry, and Josephine Counties) reported the highest percentage of people having a usual source of care, at 92.8%.

Access to a usual source of care did not vary widely between different parts of the state.

Percentage in region with a usual source of care



Note: We grouped counties with lower populations into regions. This helps to ensure the validity of our analyses.

AVERAGE TRAVEL TIME FOR ROUTINE CARE

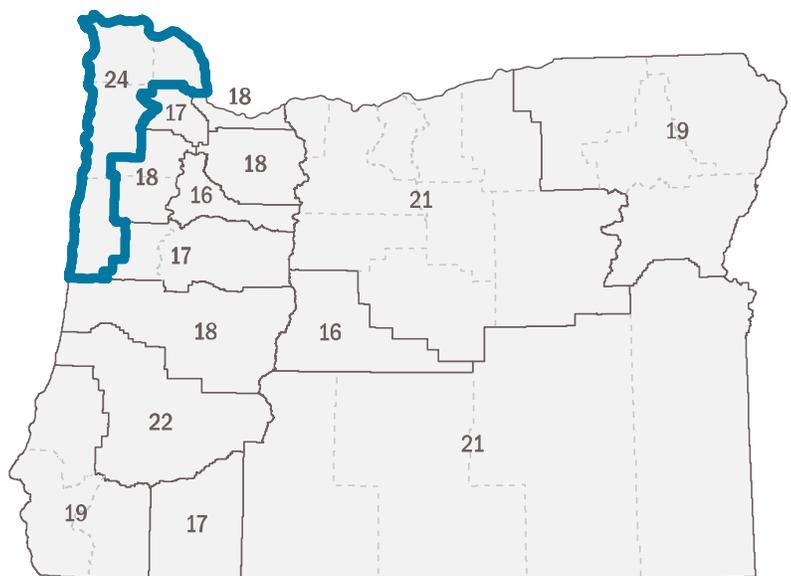
We asked respondents how many minutes they have to travel for routine care, such as for a check-up or non-urgent illness. Statewide, it took respondents an average of 18 minutes to travel for routine care.

As expected, respondents living in the eastern and southern parts of the state had the longest average travel times to routine care. Eastern and Southern Oregon are less densely populated than the northwestern part of the state and residents are generally farther away from cities with healthcare facilities.

Interestingly, the Northwest Region of the state, including Columbia, Clatsop, Tillamook, and Lincoln Counties, had the longest average travel time to routine care. We suspect this high average is due to a spread out population and limited transportation infrastructure, with just a few main state highways.

People living in the Northwest Region had the longest average travel time to get to routine medical care.

Average travel time in minutes



AVERAGE TRAVEL TIME FOR URGENT CARE

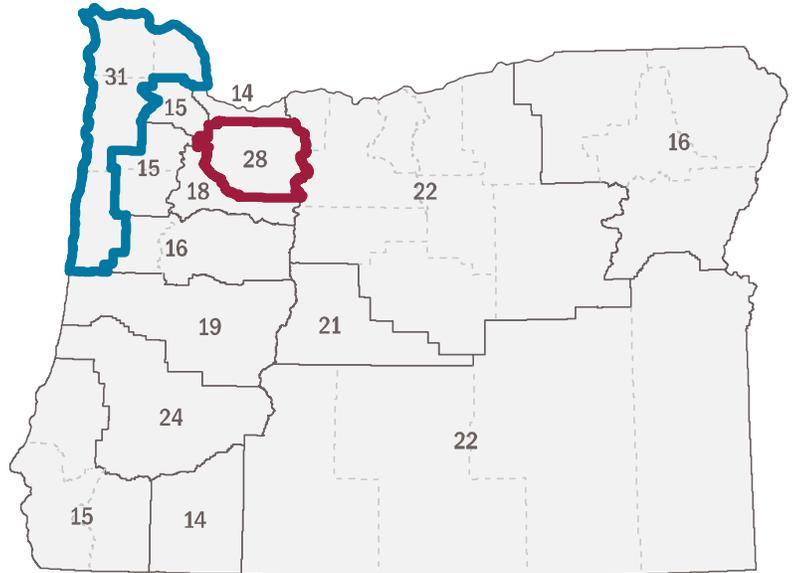
We also asked respondents how many minutes it takes them to get to a provider if they need urgent care. Statewide, respondents traveled an average of 18 minutes to get to an urgent care provider.

Across the state there was greater variance in how long it takes to get to urgent care. The Northwest Region and Clackamas County reported the longest average times and Multnomah and Jackson Counties reported the shortest times.

The different between the longest travel time and the shortest travel time was 17 minutes.

People living in the **Northwest Region** and in **Clackamas County** reported the longest average travel time to get urgent care.

Average travel time in minutes

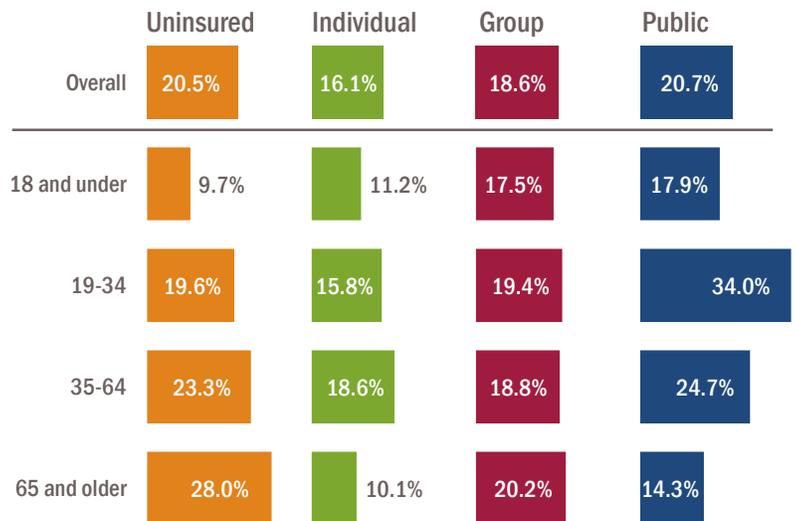


ABILITY TO GET AN APPOINTMENT

We asked respondents if they were unable to get an appointment as soon as they needed in the last 12 months. Statewide, 19% of people reported that they were unable to get an appointment as soon as needed.

Among the insured groups, Oregonians with public coverage were slightly more likely to have trouble getting an appointment. This is especially true of young adults with public coverage, of whom 34% were not able to get an appointment as soon as one was needed.

Oregonians with **individual health plans** were least likely to have issues getting an appointment as soon as one was needed.



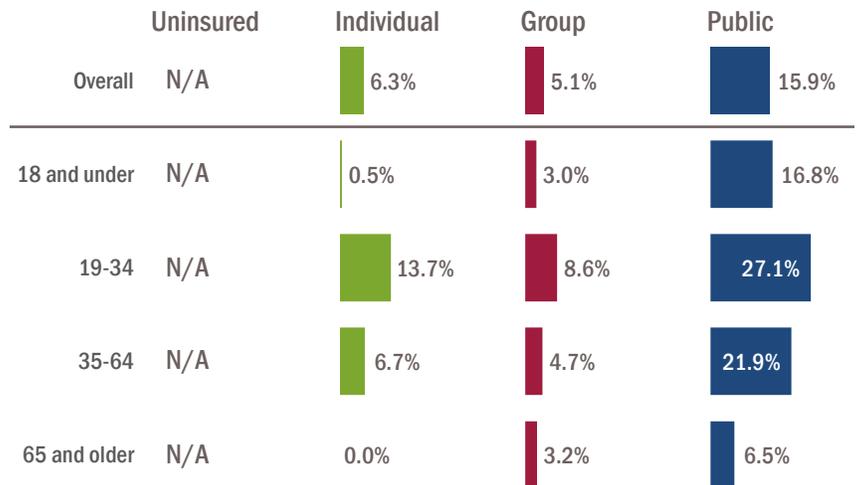
COVERAGE TYPE NOT ACCEPTED BY PROVIDER

The type of health care coverage a person has can impact their ability to access care. Statewide, 10% of respondents with insurance coverage reported that a provider would not accept patients with their health care coverage type.

People with public insurance types—including Medicaid and Medicare—are the most likely to have difficulty finding a provider that accepts their coverage. One possible reason for this finding is that public insurance programs typically have lower contracted payment amounts for health care than commercial insurers. Providers that accept public insurance may limit the number of patients they serve with that type of coverage.

Also, with many new Oregon Health Plan (OHP or Medicaid) enrollees in 2014 and 2015, there were reports of too few health care professionals to provide care for the newly enrolled OHP clients.

Individuals with **public health insurance** were the most likely to report that a health provider was not accepting patients with their coverage type.



Note: Uninsured Oregonians were not asked this question.

The Oregon Health Insurance Survey (OHIS) collects information about health insurance coverage, access to care, and utilization in Oregon. The survey is fielded every two years, and data from this fact sheet is from the 2015 survey. More than 9,000 Oregonians completed the survey between April and September of 2015. The survey sample drew from a list of all residential addresses in Oregon, and respondents were given the opportunity to complete the survey via phone, online, or paper versions. For more information about OHIS methods and results, go to:

www.oregon.gov/oha/OHPR/RSCH/Pages/Insurance_Data.aspx

This fact sheet was prepared by Rebekah Gould for the Oregon Health Authority's Office of Health Analytics. The Office of Health Analytics collects and analyzes data to inform policy, monitor progress toward transformation goals, and evaluate programs. The Office supports OHA efforts to further the triple aim goals of better health, better care, and lower costs.

For questions or comments about this fact sheet, please contact ohis.admin@state.or.us.

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