

More Oregonians have health insurance coverage in 2014

Key Findings

- Nearly three out of four Oregonians that were uninsured in 2013 gained health insurance coverage in 2014.
- Cost was the most frequently mentioned barrier to obtaining health insurance coverage.
- About 40% of all uninsured Oregonians in 2013 enrolled in Medicaid (OHP) or Medicare in 2014.
- Newly insured Oregonians are more likely to have incomes below 200% of the federal poverty level.

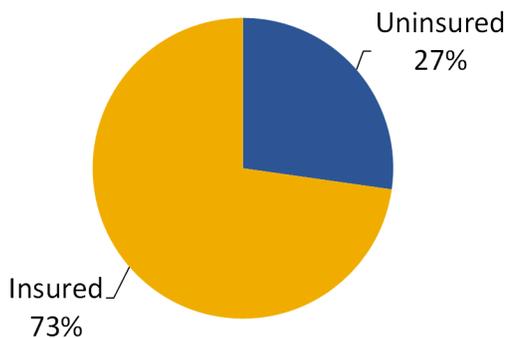
Background

The Oregon Health Insurance Survey (OHIS) Recontact study describes changes in health insurance coverage for uninsured individuals between 2013 and 2014. The Oregon Health Authority recontacted 964 households where an individual self-identified as uninsured in the 2013 OHIS; approximately 47% responded in 2014. Approximately 550,000 Oregonians lacked health insurance in 2013.

It is important to note that these data only describe those individuals that were uninsured in 2013. We cannot make assumptions about all Oregonians who were uninsured in 2014. Individuals who were insured in 2013 and have since changed or lost coverage are not included in this analysis.

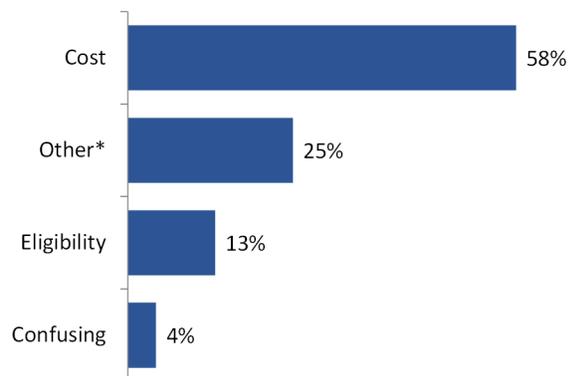
Insurance Status

About one quarter of previously uninsured people still lack coverage



Reasons Oregonians Remain Uninsured

Cost was the main reason for not getting health insurance through Cover Oregon



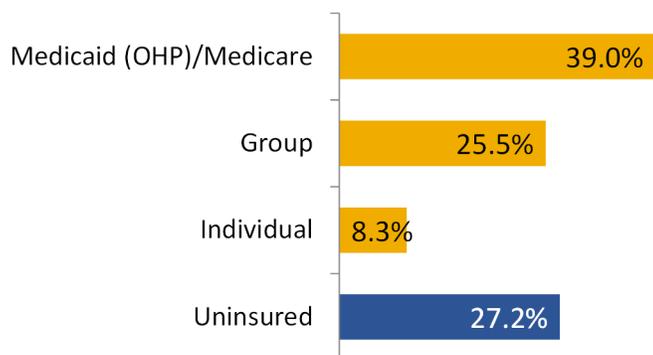
*Other reasons include: waiting for a response, applied for other health coverage, have not heard of Cover Oregon, not interested, do not like the system, and benefits don't cover what they are looking for.

Sources: 2014 OHIS Recontact Study; uninsurance rates reflect survey respondents' health insurance status at the time of answering the survey, which was administered in Aug.-Sept. 2014.



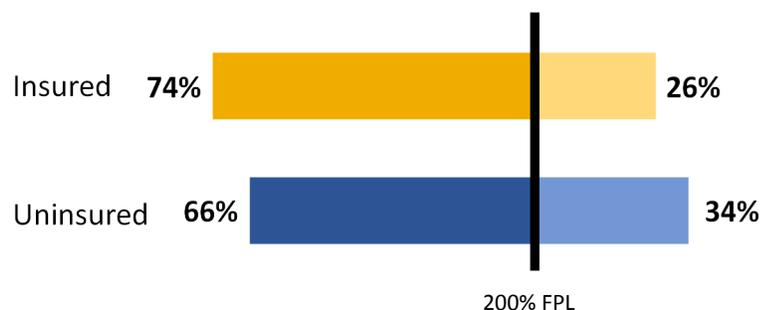
Insurance Source

Nearly 40% of all previously uninsured individuals obtained Medicaid (OHP) or Medicare



Household Income

Newly insured Oregonians are more likely to have incomes below 200% of the Federal Poverty Level



Discussion

The Recontact study found that 73% of uninsured Oregonians in 2013 obtained health insurance in 2014. Of the 27% that remained uninsured, over half said that cost was the main barrier to obtaining coverage.

There were large enrollment increases in the Oregon Health Plan (OHP) in late 2013 and early 2014¹. The Recontact study found the same trend, specifically that nearly 40% of those newly insured people enrolled in Medicaid (OHP) or Medicare (see chart). A quarter were enrolled in group insurance plans and only 8 percent individually bought health insurance, which could

have been through Cover Oregon, the state health insurance marketplace.

A large proportion of individuals in the Recontact study have household income less than 200% of the Federal Poverty Level. However, slightly more of the newly insured group are below 200% of FPL.

This finding supports the idea that lower income individuals are more easily able to gain health insurance coverage, especially Medicaid (OHP), after the implementation of the Affordable Care Act (ACA) in 2014.

¹ See Oregon Health Plan enrollment reports available at www.oregon.gov/oha/healthplan/pages/reports.aspx

Questions or comments regarding this fact sheet may be directed to: OHIS.Admin@state.or.us

About the OHIS Recontact Study: This fact sheet is part of a series exploring health insurance coverage in Oregon using information gathered through the 2014 OHIS Recontact Study. The study was fielded in September and October 2014 and re-contacted 964 individuals that self-identified as uninsured in the 2013 OHIS. Nearly 450 people completed the survey, for a response rate of 47%. For more information on OHIS, visit the Health Insurance Coverage webpage at: www.oregon.gov/oha/OHPR/RSCH/Pages/Insurance_Data.aspx.

The **Oregon Health Authority's Office of Health Analytics** collects and analyzes data to inform policy development, program implementation, and system evaluation. The Office of Health Analytics supports OHA efforts to further the triple aim goals of improving health, improving health care quality & reducing costs by leveraging qualitative & quantitative data to monitor progress and identify future policy and program opportunities.