



# Oregon Health Insurance Survey

## Demographic Information Fact Sheet

# 2015

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 insurance coverage rates for Oregonians from different demographic groups. The demographic areas covered in this fact sheet are age, employment status, education level, income, geographic region, race and ethnicity.

### INSURANCE COVERAGE AT TIME OF SURVEY

At the time of the survey, 94.7% of Oregonians had health insurance coverage. Young adults ages 19-34 had the lowest rate of coverage, which is likely driven by several factors. Young adults lose coverage under parents' plans at age 26, and are less likely to have steady employment that provides health insurance. They also may perceive that they don't need health insurance, won't use it, or that it is too expensive.<sup>1</sup>

19-34 year olds had the lowest insurance rate.

*Percentage with insurance at time of the survey.*



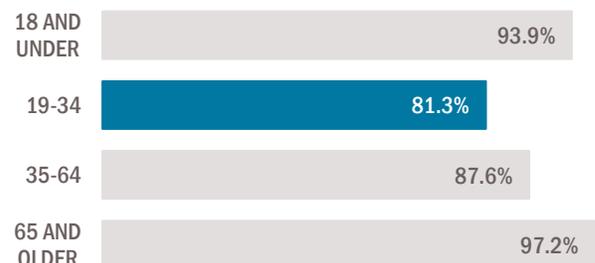
### INSURANCE FOR ALL OF THE PREVIOUS YEAR

We asked the people who told us they had health insurance if they had had coverage for all of the previous 12 months.

Young adults were least likely to have a fully year of continuous health care coverage, indicating less stability in health insurance than other age groups.

19-34 year olds were least likely to have had insurance for the entire previous year.

*Percentage of insured with coverage for all previous 12 months.*



## EMPLOYMENT AND INSURANCE COVERAGE

Insurance coverage status is strongly related to employment status. Adults who were out of the labor force had the highest rate of coverage. A large number of these individuals are retired or disabled, and covered by public programs such as Medicare or Medicaid.

The out of the labor force group includes: unpaid workers for a family business or family farm, those not employed and not looking for work, those that are retired, and those unable to work because of a disability.

## EDUCATION AND INSURANCE COVERAGE

In Oregon, 65% of adults have completed at least some college, while 11% have not completed a high school degree or GED and 24% have a high school degree or GED.

Higher levels of education typically correspond to a jobs that provide health insurance as a benefit. Unsurprisingly, respondents with less education were less likely to have health insurance.

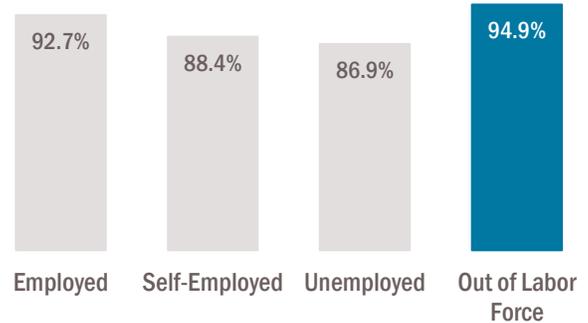
## INCOME AND INSURANCE COVERAGE

Insurance coverage rates trend upward with household income, reaching over 98% for people above 400% of the Federal Poverty Level (FPL). The exception is families making 139-200% FPL who do not qualify for Medicaid, are likely to work low wage jobs that may not provide health insurance, and whose incomes are low enough that they have difficulty affording health insurance premiums even with federal subsidies.

The federal government sets an income poverty line each year and this poverty level is adjusted for the number of people in a household. Eligibility for public programs like Medicaid is based on a family's income compared to the Federal Poverty Level (FPL). In Oregon, families with up to 138% of the Federal Poverty Level qualify for Medicaid benefits. Children can qualify for Medicaid if their family's income is up to 300% of the Federal Poverty Level.

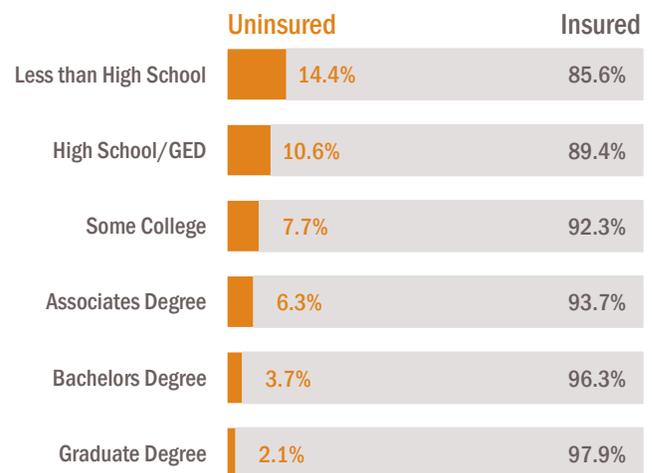
Adults out of the labor force had the highest insurance coverage rate.

*Percentage with insurance coverage by employment status.*



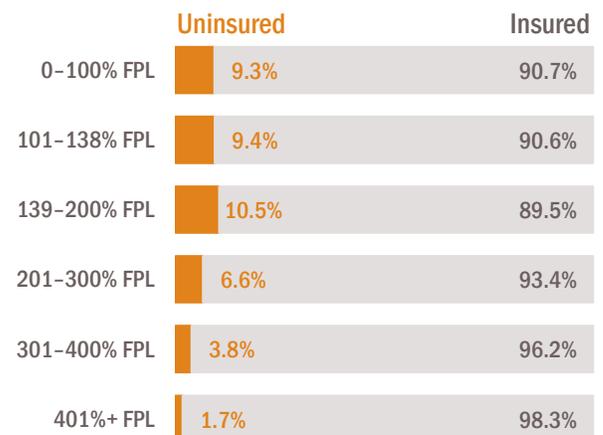
As education level increases, so does insurance coverage.

*Percentage with insurance coverage by education level.*



People with incomes between 139-200% FPL were least likely to have insurance coverage.

*Percentage with insurance coverage by income level (% of FPL).*



## RURAL VS. URBAN INSURANCE COVERAGE

Health insurance coverage rates were slightly higher in rural parts of the state compared to urban areas.

The rural and urban designations used in this report are based on the OHSU Office of Rural Health’s method.<sup>2</sup> They define a rural area as a geographic region 10 or more miles from a population center of 40,000 people or more. We used a list of zip codes that were coded as rural or urban based on this definition.

Insurance coverage rates were higher in urban areas.

*Percentage with insurance coverage by rural or urban designation.*



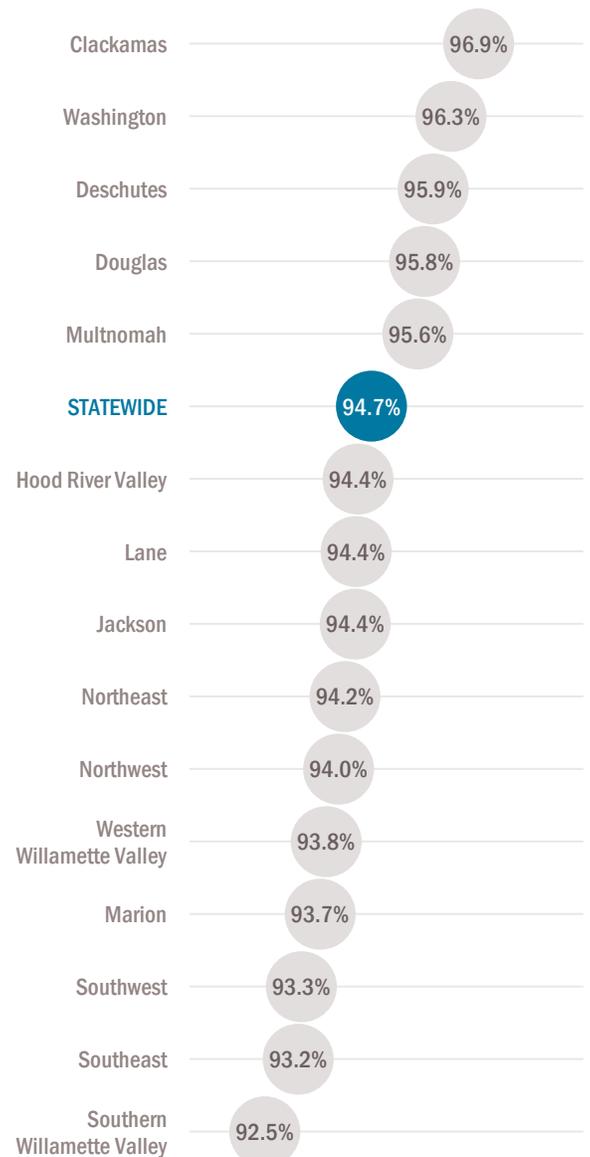
## REGIONS AND INSURANCE COVERAGE

The three counties in the Portland Metro were on the higher end of regional insurance coverage rates. However, three counties with large populations (Lane, Jackson, and Marion counties) all had insurance coverage rates below the state average.

Note: We grouped counties with lower populations into regions. This helps to ensure the accuracy of our analyses. See the table below for a list of regions and the counties they contain.

Insurance coverage rates did not vary drastically between regions.

*Percentage with insurance coverage by region.*



| Region                     | Counties  |
|----------------------------|---|
| Northeast                  | Baker, Umatilla, Union, Wallowa   |
| Hood River Valley          | Crook, Gilliam, Grant, Hood River, Jefferson, Morrow, Sherman, Wasco, Wheeler |
| Southeast                  | Harney, Klamath, Lake, Malheur  |
| Northwest                  | Clatsop, Columbia, Lincoln, Tillamook   |
| Southern Willamette Valley | Benton, Linn  |
| Southwest                  | Coos, Curry, Josephine  |
| Western Willamette Valley  | Polk, Yamhill   |

## RACE AND INSURANCE COVERAGE

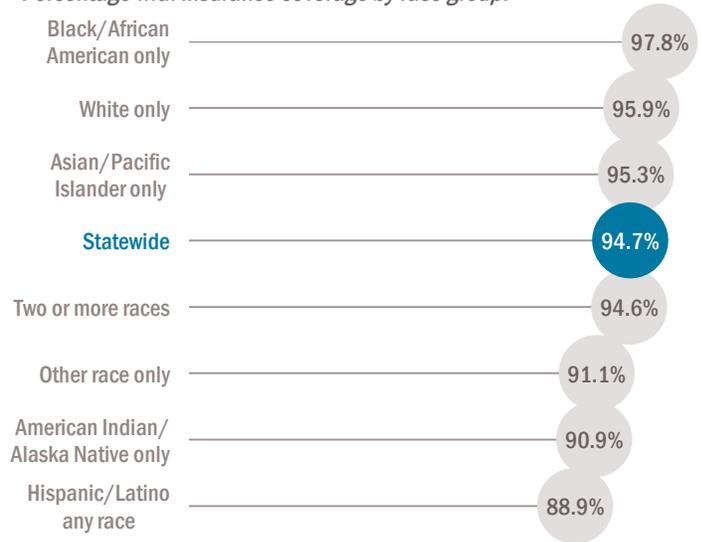
The health insurance rate among Black/African American respondents was the highest, at nearly 98%. Hispanic/Latino respondents of any race had the lowest insurance coverage rate, at just under 89%.

The data show that while there are some disparities in health insurance coverage between racial and ethnic groups, there are not extremely large differences between the groups.

For this analysis, we combined race and ethnicity into one variable. If a respondent marked that they were Hispanic or Latino, they were not counted in any other racial group. The other six categories are non-Hispanic/Latino ethnicity.

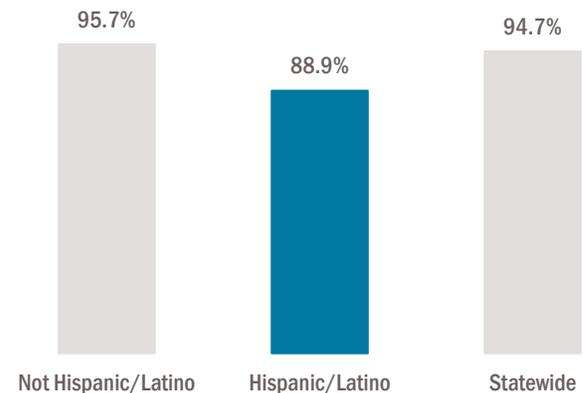
Black/African American respondents had the highest rate of health insurance coverage.

Percentage with insurance coverage by race group.



Nearly 89% of Hispanic/Latino respondents had health insurance coverage.

Percentage with insurance coverage by ethnic group.



## INSURANCE COVERAGE BY ETHNICITY

When we looked at ethnicity only, we found that 95.7% of non-Hispanic/Latino Oregonians had insurance coverage.

In this survey we ask about race and ethnicity as separate questions. This allows for more accurate data on how people identify themselves.

For ethnicity, we are specifically interested in having the more accurate number of Hispanic/Latino people represented in the survey. The question specifically asks if the respondent is Mexican, Puerto Rican, Cuban, or another Hispanic or Latino group.

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 in 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](http://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.

<sup>1</sup> See <http://kff.org/report-section/adults-who-remained-uninsured-at-the-end-of-2014-issue-brief/>

<sup>2</sup> See <http://www.ohsu.edu/xd/outreach/oregon-rural-health/data/rural-definitions/index.cfm>

For questions or comments about this fact sheet, please contact [ohis.admin@state.or.us](mailto:ohis.admin@state.or.us).

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