



Healthy Polk Priority # 5: Ensuring Health Services for the Uninsured

Findings and Implications from CFPC's Scan of the Uninsured Population and Safety Net Providers in Polk County

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March 13, 2012

Healthy Polk 2020 Priority #5

Expand health coverage and services for lowans who can't afford private insurance but don't qualify for public programs.

Current Picture of Polk County's Uninsured Population

- 9.7% (41,366) of Polk County's population
- 80% higher rate in Des Moines (12.6%) than rest of Polk County (7.1%)
- 13% (35,434) among 18-64, 5% (5,481) among 0-17, 1% among 65+ (451)
- 55% of uninsured in households with incomes below 200% of poverty, although they represent only 27% of population (almost none in households above 400% of poverty)

Current Picture of Safety Net Providers and Services

- Patchwork of dedicated providers with no organized system coordinating or integrating services (particularly across primary, secondary, tertiary care)
- Significant share of uninsured do receive some health services through safety net providers
 - Primary Health Care serves approximately 10,000 uninsured Polk residents
 - Broadlawns serves approximately 14,000 residents under IowaCares (Medicaid)
- Not possible for CPFC to calculate exact proportion of uninsured served due to absence of unduplicated count and diversity of types of care provided
- Underinsured also significant concern

Implications of the ACA to Covering the Uninsured

- Will not cover all the currently uninsured (particularly undocumented residents)
- Will have less of impact on Iowa due to expiration of IowaCares as Medicaid expansion begins
- May reduce uninsured significantly (even in half), but dependent upon:
 - Effective health navigators
 - Affordable health exchange

Implications of ACA to Safety Net Providers

- May change locus of funding
- May increase demand for services
- Provides some opportunities for providing more comprehensive services, including medical homes and care coordination and preventive/public education services
- May expose health provider shortages that need to be addressed for both uninsured and insured to receive care

Stakeholder Interviews and Conversations on Current Gaps in Serving Uninsured

- Culturally and linguistically competent services
- Services to undocumented residents
- Specialty services (surgical, mental health, dental, and pharmaceutical)
- Underinsured residents and access to preventive services
- Transportation and other barriers in navigating a complicated and fragmented system

Possible Next Steps

- Develop a set of questions that needs assessments to be conducted by hospitals should address
- Develop recommendations regarding ACA health navigation in the context of Polk County's uninsured population
- Develop strategies for strengthening coordination and patient information sharing across safety net providers
- Seek opportunities for strengthening care coordination and patient-centered medical homes, particularly within safety net community
- Develop recommendations regarding community health education, with a focus upon cultural and linguistic responsiveness

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