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Health Care Access in Nevada

2011 BRFSS



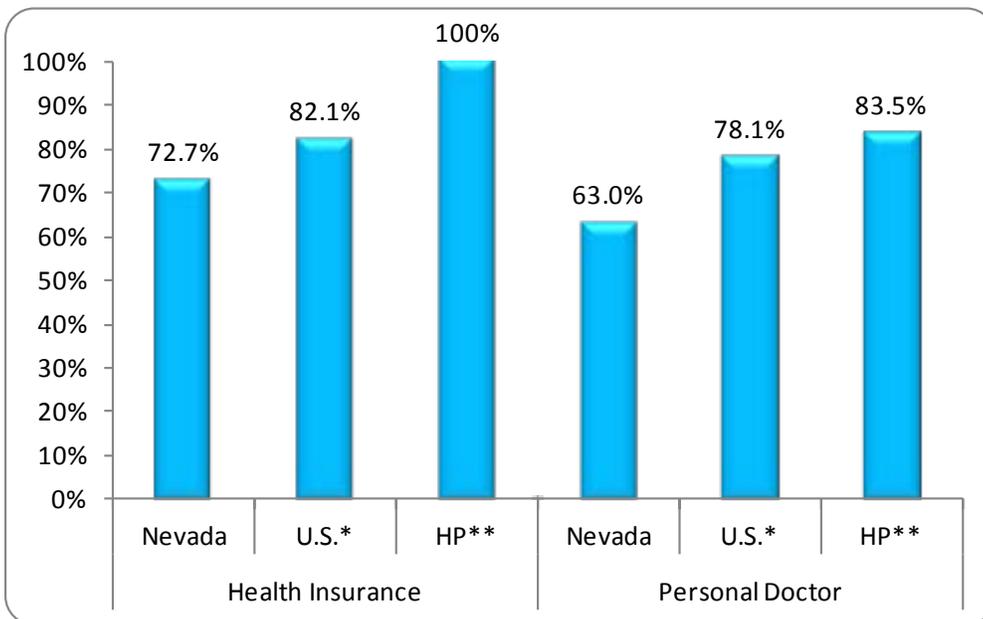
Brian Sandoval, Governor
 Michael J. Willden, Director
 Department of Health and Human Services

Richard Whitley, MS, Administrator
 Tracey D. Green, MD, State Health Officer
 Nevada State Health Division

Access to health care is “the timely use of personal health services to achieve the best health outcomes”.¹ Health care access can be measured by presence or absence of health insurance or a usual source of care such as a primary care provider.¹ Uninsured people are less likely to receive medical care, are more likely to die early, and have poorer health compared to people with health insurance. In addition, the financial cost of not being insured is felt by uninsured individuals, employers, health system, and taxpayers. The estimated economic value to be gained by better health outcomes as a result of having health insurance for all Americans is 65-130 billion dollars yearly.²

In 2011, 40.7 million people aged 18-64 years and 5.2 million of children under 18 years had no health insurance coverage in the United States (U.S.).³ Uninsured adults are less likely to seek preventive care and chronically ill uninsured adults are more likely to delay or forego needed care including prescription medications than insured adults, resulting in serious health problems and more medical expenses in the future.²

Figure 1: Percent of Adults with Health Insurance and a Personal Doctor, 2011 BRFSS Data



In 2011, 72.7% of Nevada adults had health insurance compared to 82.1% nationwide. The national goal is that all individuals have health insurance coverage. Additionally, only 63.0% of Nevada adults had a personal doctor compared to 78.1% adults nationwide and the national goal of 83.5%.

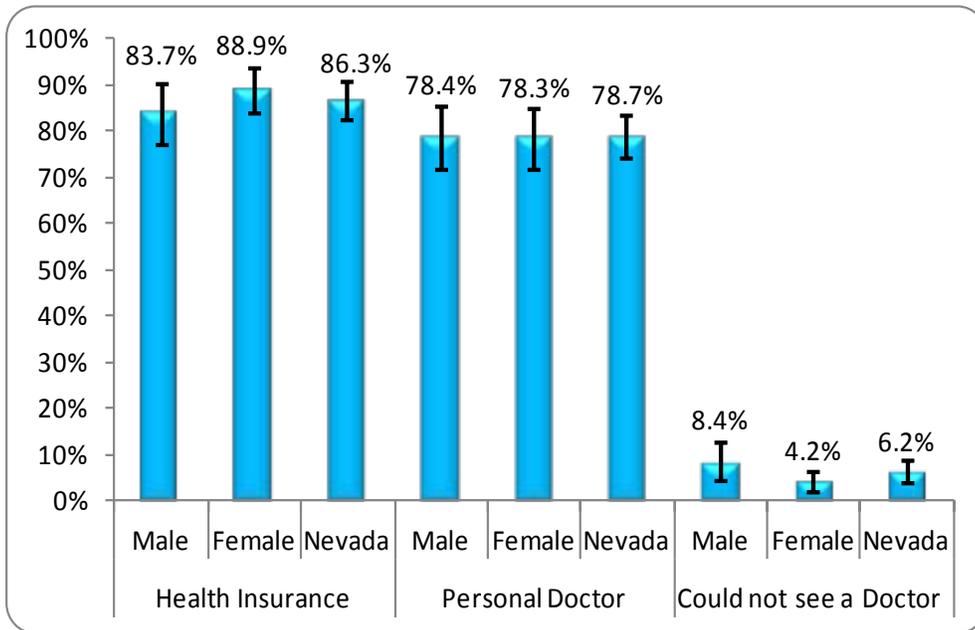
Lack of insurance is costly to communities in several ways for instance; hospitals may reduce services which affects everybody including the insured.

Note:

- * United States and District of Columbia median prevalence
- ** Healthy People 2020 Objectives are the national goals

Children are less likely to be uninsured than adults because they are more likely to qualify for public health insurance such as Medicaid. However, many children in Nevada under the age of 18 do not have health insurance. The benefits of having health insurance for children include: having a personal doctor, receiving well-child care and immunizations to prevent future illness and monitor developmental milestones, obtain prescription medications; and having basic dental services. In addition, children with health insurance receive timely diagnosis of serious health conditions, experience fewer avoidable hospitalizations, have improved asthma outcomes, and miss fewer days of school.²

Figure 2: Percent of Children under 18 years with Health Insurance, a Personal Doctor, and those who could not see a Doctor by Gender, Nevada, 2011 BRFSS Data



In 2011, 86.3% and 78.7% of Nevada children under 18 years had health insurance and a personal doctor respectively. In addition, 6.2% needed to see a doctor in the past 12 months but could not due to cost.

The U.S. has made huge investments in health care and it is unfortunate that all Americans do not benefit from the health care system due to lack of health insurance. To get the best return on investment made on American health care, all individuals should have health insurance.

Nevada Behavioral Risk Factor Surveillance System reports and other reports on related topics can be obtained from the Nevada State Health Division website at: health.nv.gov/publications.htm

Technical Notes:

- Data are from the 2011 Behavioral Risk Factor Surveillance System (BRFSS) which includes Nevada’s state added question for children’s access to health care.
- The 2011 BRFSS survey is different from previous years because the approach and methodology used to conduct the survey changed, therefore, estimates from 2011 BRFSS may not be comparable to estimates in previous years.

1. Institute of Medicine. Access to Health Care in America. Washington: National Academies Press; 1993
2. Institute of Medicine. America’s Uninsured Crisis: Consequences for Health and Health Care. Report Brief February 2009. Available at: <http://www.iom.edu/~media/Files/Report%20Files/2009/Americas-Uninsured-Crisis-Consequences-for-Health-and-Health-Care/Americas%20Uninsured%20Crisis%202009%20Report%20Brief.pdf> [Accessed March 20, 2013]
3. Cohen RA., Martinez ME. Health insurance coverage: Early release of estimates from the National Health Interview Survey, 2011. National Center for Health Statistics. June 2012. Available at: <http://www.cdc.gov/nchs/data/nhis/earlyrelease/Insur201206.pdf> [Accessed March 20, 2013]

Requests for additional information can be made to:
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