Health Insurance Coverage and Care in Massachusetts, 2015-2019:

A Baseline Assessment of Gaps by Geographic Region

April 2022



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Executive Summary

This report on health insurance coverage and care by geographic regions in Massachusetts is part of a new series exploring health care equity issues in the Commonwealth. Although Massachusetts consistently has the highest rate of health insurance coverage in the nation, differences exist in rates of health insurance coverage, access, utilization, and affordability challenges among various subpopulations in the Commonwealth.

This report provides a baseline assessment of gaps in health insurance coverage, access, utilization, and affordability across eight health service regions leading up to the COVID-19 pandemic. The data analyzed come from the Massachusetts Health Insurance Survey (MHIS) across three biennial waves (2015-2019).

Health Insurance Coverage

 The majority of Massachusetts residents (93.3%) were insured all year.

- Continuous coverage rates ranged from 89.4% in Southcoast region to 95.3% in Western MA.
- The Southcoast and Cape and Islands regions had the lowest rates of residents reporting continuous health insurance coverage (89.4% and 89.9%, respectively), representing nearly 61,000 residents without continuous health insurance coverage.

Health Care Access

- The rates of any difficulties accessing care at a doctor's office or clinic ranged from 25.1% in Metro South to 31.2% in Southcoast.
- Residents in Metro Boston and Southcoast reported the highest rates of difficulty accessing care because the doctor's office or clinic was not accepting new patients (13.2% and 13.3%, respectively).
- Nearly one in seven residents of Southcoast reported difficulties accessing care due to being uninsured or being told the doctor's office or clinic would not accept their health insurance type.

 Residents in Western MA reported the highest rates of difficulty getting an appointment as soon as they felt one was needed (20.2%); whereas residents in Metro West and Metro South reported the lowest rates of this difficulty (15.6% and 15.4%, respectively).

Health Care Utilization

- The majority of Massachusetts residents reported having visited a doctor in the past 12 months. The rates ranged from 87.7% in Metro Boston to 91.5% in Northeast MA.
- Residents in Northeast MA, Southcoast, and Metro West regions reported the highest rates of visiting a doctor in the past year (91.5%, 90.5%, and 90.4%, respectively).
- Rates of dental visits were highest among residents in Northeast MA (76.2%) and Metro West (76.7%) and lowest among residents in the Cape and Islands (70.3%) and Southcoast (68.7%).

- Rates of potential reliance on the emergency room (ER), defined as visiting the ER at least three times in the past 12 months or reporting that their most recent visit to the ER was for a non-emergency, ranged from 10.4% in Metro West to 23.4% in Southcoast.
- The highest rates of potential reliance on the ER were reported by residents in Southcoast and Cape and Islands (23.4% and 18.4%, respectively).

Health Care Affordability

- Rates of unmet health care needs due to cost ranged from 21.0% in the Cape and Islands to 31.3% in Southcoast.
- Rates of medical debt and problems paying medical bills in the family ranged from 18.3% in Metro Boston to 27.2% in Southcoast.
- Residents in Metro Boston reported the lowest rates of family medical debt and problems paying family medical bills, whereas those in Metro South and Southcoast reported the highest rates of these issues (25.0% and 27.2%, respectively).

Introduction

Massachusetts consistently has high rates of health insurance coverage, access, and utilization relative to other states, largely attributed to the 2006 Massachusetts health care reforms and early implementation of the Affordable Care Act. Nonetheless, health care gaps persist among residents of different geographic regions, races, ethnicities, socioeconomic levels, sexual orientations, gender identities, national origins, and disability statuses, among other characteristics. 1,2,3,4,5,6 Moreover, historically marginalized groups face inequities in their health outcomes and experiences in accessing and receiving quality health care services, particularly for individuals with intersectional identities. These inequities have been exacerbated by and extend beyond the COVID-19 pandemic, highlighting the urgency to address these health care challenges.

In the Commonwealth's goal to achieve an equitable health care system, where all residents have the opportunity to "attain their full health potential, with no one disadvantaged from achieving this potential due to socioeconomic status or socially assigned circumstance (e.g., geography, race, gender, ethnicity, religion, sexual orientation)"8,9 it is imperative to prioritize the collection and analysis of reliable and meaningful health care information on subpopulations to inform policymakers, health care providers, payers, and other stakeholders.

To provide objective and reliable health care data on population subgroups, the Center for Health Information and Analysis (CHIA) releases this report, focusing on geography, as part of a new reporting series on health care equity in the Commonwealth. Many factors may

contribute to differences in health care and health by community; they include racial/ethnic make-up, public infrastructure, availability of health care services, and other aspects of the physical, social and economic environment. This report provides a baseline assessment of gaps in health insurance coverage, access, utilization and affordability using Massachusetts's eight health service regions: Western MA, Central MA, Northeast MA, Metro Boston, Metro West, Metro South, Southcoast, and Cape and Islands. More information regarding demographic characteristics for each of the regions referenced in this report can be found in the databook.

The data source for this report is the Massachusetts

Health Insurance Survey (MHIS), a statewide, populationbased survey of non-institutionalized Massachusetts

residents. In this report, "resident" refers to the individual,
and "family" refers to the individual plus any spouse/
partner, parents/guardians, and siblings, children, or
stepchildren under age 26 who are living in the household.

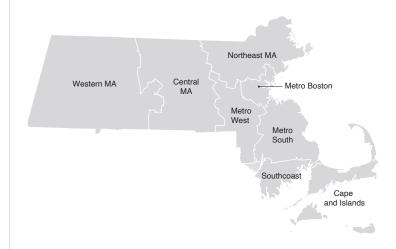
As part of CHIA's Continuing Study on Insurance Coverage, Underinsurance and Uninsurance, the MHIS provides information on health insurance coverage, as well as health care access, utilization, affordability, and emerging topics in the Commonwealth. All analyses in this report use the combined MHIS data across three biennial waves (2015, 2017, and 2019) to provide reliable estimates for population subgroups. For further details on the dataset and measures used, please see the technical appendix for Health Insurance Coverage and Care in Massachusetts, 2015-2019: A Baseline Assessment of Gaps by Age, Race and Ethnicity, and Income.

This report provides important baseline measures leading up to the COVID-19 pandemic of health insurance coverage, access, utilization, and affordability across eight geographic regions. CHIA will continue to monitor developments in these domains for different subpopulations as insights from this report series may help inform efforts to better target interventions for a more equitable health care system in the Commonwealth.

Massachusetts Health Service Regions

This chartbook assesses differences in health insurance coverage and care across eight Massachusetts health service regions established by the Massachusetts Health Policy Commission. The following eight regions, outlined on the map to the right, are referenced throughout the report: Western MA, Central MA, Northeast MA, Metro Boston, Metro West, Metro South, Southcoast, and Cape and Islands.

It is important to examine and understand geographic differences in health insurance coverage and care in the Commonwealth because community characteristics of subpopulations across and within geographic regions likely contribute to these differences. For example, residential segregation compounded by limited access to stable income in some localities may contribute to transitions in health insurance coverage. Community disinvestment and unequal distribution of health care providers and services, particularly in rural and low-income areas, may reduce residents' access to care. Likewise, differences in regional socioeconomic compositions may influence residents' ability to utilize available services, and/or exacerbate health care affordability issues for families. For more detailed information regarding the regional demographics, please see the databook.



Region	Population Estimate§	Percent
Cape and Islands	243,803	3.6%
Central MA	772,038	11.3%
Metro Boston	1,656,426	24.2%
Metro South	843,072	12.3%
Metro West	692,116	10.1%
Northeast MA	1,479,546	21.6%
Southcoast	343,223	5.0%
Western MA	820,271	12.0%
Total	6,850,495	100.0%

[§] Population estimates are based on the American Community Survey (ACS) 2019 5-year population estimates.



Health Insurance Coverage

Health insurance coverage is critical to promoting access to preventive and timely health care services and can help to mitigate financial burdens due to high health care costs. Following the implementation of Massachusetts' 2006 health care reform and the federal Patient Protection and Affordable Care Act (enacted in 2010), Massachusetts residents have had the highest rates of insurance coverage in the nation. However, high rates of health insurance coverage among residents overall may obscure differences that exist across the different geographic regions of the Commonwealth. In particular, historical factors such as residential segregation, limited availability of affordable housing, and reduced access to high paying jobs in certain geographic regions may create systemic challenges that make residents such as racial/ethnic minorities, lowincome workers, and foreign-born residents with limited English proficiency, more vulnerable to transitions in health insurance coverage.¹⁰

To investigate differences in health insurance coverage among residents of different Massachusetts regions, this section examines coverage rates at the time of the survey using the following measures: 1) those residents who were always insured for the past 12 months (continuous insurance coverage), 2) those who were sometimes insured for the past 12 months, and 3) those who were never insured for the past 12 months. These measures represent three groups on the spectrum of health insurance coverage from the most protected residents to the least protected residents.

Key Findings

- The majority of MA residents (93.3%) were insured all year.
- Continuous coverage rates ranged from 89.4% in Southcoast region to 95.3% in Western MA.
- The Southcoast and Cape and Islands regions had the lowest rates of residents reporting continuous health insurance coverage (89.4% and 89.9%, respectively), representing nearly 61,000 residents without continuous health insurance coverage.

Health Insurance Coverage

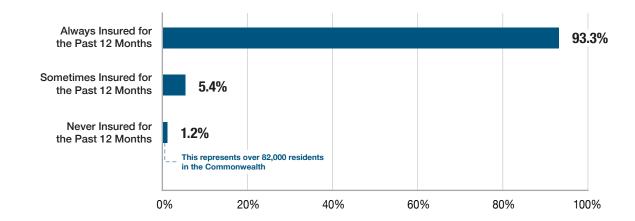
In the Commonwealth, nearly all (93.3%) Massachusetts residents were always insured for the past 12 months.

The remaining residents were either sometimes insured (5.4%) or never insured for the past 12 months (1.2%).

Although the percentage of residents never insured for the past 12 months was small (1.2%), this represents over 82,000 residents in the Commonwealth.

Note: Estimates may not add up to 100% due to rounding. Source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Overall Statewide Health Insurance Coverage Rates





Health Insurance Coverage

Overall, 93.3% of Massachusetts residents were always insured for the past 12 months.

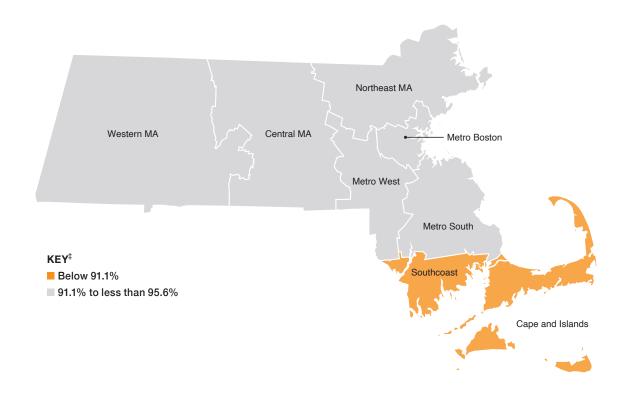
By region, the rates ranged from 89.4% in Southcoast to 95.3% in Western MA. The Southcoast and Cape and Islands regions, in particular, had the lowest rates of residents reporting continuous health insurance coverage (89.4% and 89.9%, respectively), representing 36,221 residents in Southcoast, and 24,685 residents in the Cape and Islands who did not have continuous health insurance coverage.

Note:

- ‡ Regions in orange indicate rates of at least one standard deviation below the statewide estimate (91.1% for this figure). Regions in gray indicate rates that are within one standard deviation of the statewide estimate (91.1% to less than 95.6% for this figure).
- There are no regions with rates at least one standard deviation above the statewide estimate (95.6% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimates for that area

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Statewide Health Insurance Coverage Rates over the Past 12 Months



Region	# Residents Not Continuously Insured§	% Residents Insured All Year§	% Residents Insured All Year [§]	95% Confid	ence Interval
Cape and Islands	24,685	219,118	89.9%	87.0%	92.8%
Central MA	47,573	724,465	93.8%	92.4%	95.3%
Metro Boston	130,829	1,525,597	92.1%	90.9%	93.3%
Metro South	59,959	783,113	92.9%	91.5%	94.3%
Metro West	36,112	656,004	94.8%	93.2%	96.4%
Northeast MA	74,698	1,404,848	95.0%	94.0%	95.9%
Southcoast	36,221	307,002	89.4%	87.0%	91.9%
Western MA	38,486	781,785	95.3%	94.2%	96.4%
Statewide	457,116	6,393,379	93.3%	92.9%	93.8%

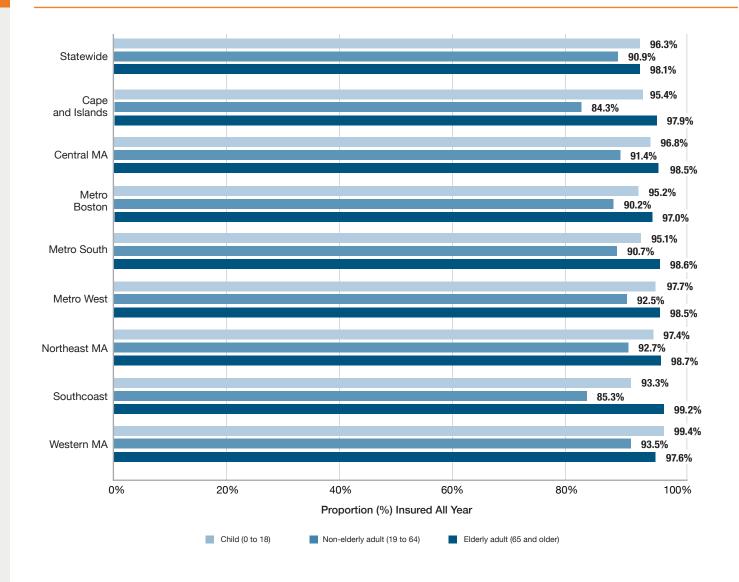


Health Insurance Coverage

Non-elderly adult residents (ages 19-64) tended to have lower coverage rates across all regions, and largely reflected the regional pattern of the entire population.

In contrast, children and elderly residents had higher coverage and narrower regional differences. This in part may be due to public programs such as the Children's Health Insurance Program (CHIP), a means-tested public insurance program for children under the provision of MassHealth, and Medicare for elderly adults, which help address gaps in coverage for these populations.

Health Insurance Coverage Rates over the Past 12 Months by Age Group



Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019



Health Care Access

Increased access to health care services is known to substantially reduce morbidity and mortality rates from a wide range of diseases and injury, as well as increase overall quality of life. 11,12 Notably, rates of access have been found to vary by location. Studies have found reduced access to health care service providers, including physicians, dentists, behavioral health providers and other health practitioners, in more rural and lower income areas, as well as areas with higher proportions of racial/ ethnic minority residents. 13,14 Factors such as fewer health care providers within a given geographic area, limited access to transportation, and limited access to services in languages other than English may affect residents in certain regions more than others across the Commonwealth. 15,16 Furthermore, difficulties accessing health care are often found to be higher than the rates of uninsurance, suggesting that additional factors beyond

insurance coverage status contribute to these difficulties. In addition to these socioeconomic and environmental constraints, difficulties accessing health care at a doctor's office or clinic may influence residents' likelihood of delaying or forgoing needed health care and potentially exacerbate certain health conditions.

To further investigate differences in health care access among residents of different Massachusetts regions, this section examines difficulties accessing health care at a doctor's office or clinic in the past 12 months with three measures: 1) being told that a doctor's office or clinic was not accepting new patients, 2) not having insurance or being told that the doctor's office or clinic did not accept their insurance type, or 3) being unable to get an appointment at a doctor's office or clinic as soon the resident thought one was needed.[†]



[†] This inability to get an appointment "as soon as needed" is an indication of residents' perception that care was needed, rather than a clinical assessment of the timing with which care was needed.

Key Findings:

- The rates of any difficulties accessing care at a doctor's office or clinic ranged from 25.1% in Metro South to 31.2% in Southcoast.
- Residents of the Cape and Islands and Southcoast regions had the highest rate of any difficulties accessing care at a doctor's office or clinic (30.1% and 31.2%, respectively).
- Residents in Metro Boston and Southcoast reported the highest rates of difficulty accessing care because the doctor's office or clinic was not accepting new patients (13.2% and 13.3%, respectively).

- Nearly one in seven residents of Southcoast reported difficulties accessing care due to being uninsured or being told the doctor's office or clinic would not accept their health insurance type.
- Residents in Western MA reported the highest rates of difficulty getting an appointment as soon as they felt one was needed (20.2%); whereas residents of Metro West and Metro South reported the lowest rates of this difficulty (15.6% and 15.4%, respectively).

Health Care Access

Nearly one in three Massachusetts residents faced difficulties accessing care at a doctor's office or clinic: 12.1% of residents were told that the doctor's office or clinic was not accepting new patients; nearly one in eight (11.2%) were either uninsured or were told that the doctor's office or clinic did not accept their insurance type; and nearly one in five (18.0%) were unable to get an appointment as soon as they thought one was needed.

Note: Any of These Difficulties: Told Doctor's Office or Clinic Was Not Accepting New Patients; Uninsured at any time over the past 12 months or Told Doctor's office or Clinic Did Not Accept Health Insurance Type; Unable to Get an Appointment with a Doctor's Office or Clinic as Soon as Needed.

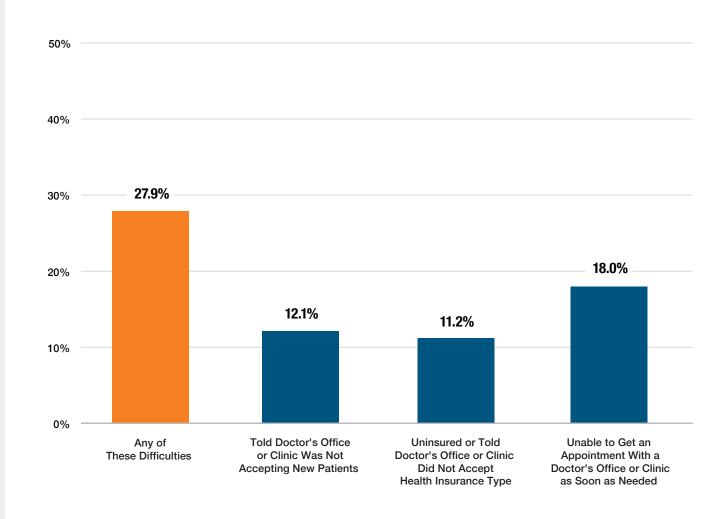
Told Doctor's Office or Clinic Was Not Accepting New Patients: residents were told by a doctor's office or clinic that new patients were not being accepted over the past 12 months.

Uninsured or Told Doctor's office or Clinic Did Not Accept Health Insurance Type: residents were uninsured at any time over the past 12 months or were told by a doctor's office or clinic that their insurance was not being accepted over the past 12 months.

Unable to Get an Appointment with a Doctor's Office or Clinic as Soon as Needed: residents were unable to get an appointment at a doctor's office or clinic as soon as they thought one was needed over the past 12 months.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Difficulties Accessing Health Care at a Doctor's Office or Clinic over the Past 12 Months by Type of Difficulty





Health Care Access

Nearly one-third (27.9%) of all Massachusetts residents reported experiencing at least one type of difficulty in accessing health care at a doctor's office or clinic in the past 12 months.

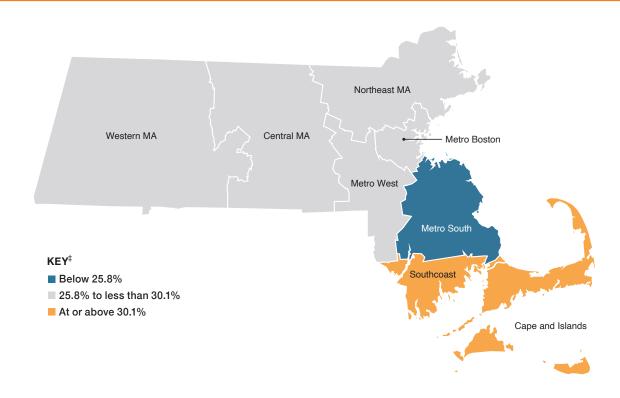
By region, the rates ranged from 25.1% in Metro South to 31.2% in Southcoast. Residents in Southcoast and the Cape and Islands reported the highest rates of experiencing at least one type of difficulty (31.2% and 30.1%, respectively), whereas residents in Metro South reported the lowest rates of access difficulties (25.1%).

Note: Any of These Difficulties: Told Doctor's Office or Clinic Was Not Accepting New Patients; Uninsured at any time over the past 12 months or Told Doctor's office or Clinic Did Not Accept Health Insurance Type; Unable to Get an Appointment with a Doctor's Office or Clinic as Soon as Needed.

- ‡Regions in blue indicate rates at least one standard deviation below the statewide estimate (25.8% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (25.8% to less than 30.1% for this figure).
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (30.1% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Any Difficulties in Accessing Health Care at a Doctor's Office or Clinic over the Past 12 Months



Region	# Residents with Access Difficulties [§]	% Residents with Access Difficulties [§]	95% Confidence Interval	
Cape and Islands	73,339	30.1%	26.7%	33.5%
Central MA	226,002	29.3%	26.8%	31.8%
Metro Boston	488,503	29.5%	27.6%	31.4%
Metro South	211,493	25.1%	22.9%	27.3%
Metro West	187,194	27.0%	24.1%	30.0%
Northeast MA	382,701	25.9%	23.5%	28.2%
Southcoast	106,972	31.2%	27.4%	35.0%
Western MA	236,909	28.9%	26.6%	31.2%
Statewide	1,912,775	27.9%	27.0%	28.9%



Health Care Access

Overall, 12.1% of all Massachusetts residents were told that a doctor's office or clinic was not accepting new patients over the past 12 months.

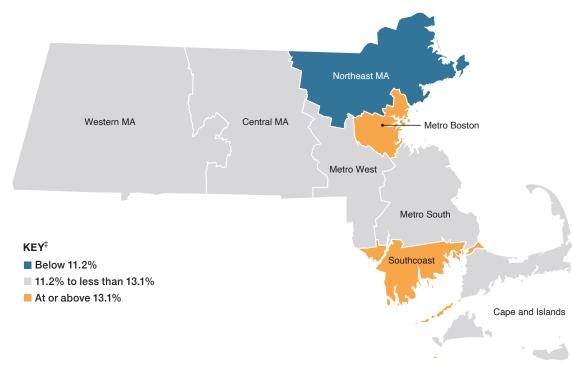
By region, the rates ranged from 10.4% in Northeast MA to 13.3% in Southcoast. Residents in Southcoast and Metro Boston reported the highest rates of difficulties enrolling as a new patient (13.3% and 13.2%, respectively), and residents in Northeast MA reported the lowest rates of this difficulty (10.4%).

Note: Told Doctor's Office or Clinic Was Not Accepting New Patients: residents were told by a doctor's office or clinic that new patients were not being accepted over the past 12

- ‡Regions in blue indicate rates of at least one standard deviation below the statewide estimate (11.2% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (11.2% to less than 13.1%
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (13.1% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019.

Told Doctor's Office or Clinic was Not Accepting New Patients over the Past 12 Months



Region	# Residents Told Doctor's Office/Clinic Was Not Accepting New Patients [§]	% Residents Told Doctor's Office/Clinic Was Not Accepting New Patients [§]	95% Confide	ence Interval
Cape and Islands	31,514	12.9%	10.6%	15.3%
Central MA	94,963	12.3%	10.6%	14.0%
Metro Boston	219,151	13.2%	11.6%	14.9%
Metro South	98,674	11.7%	10.1%	13.3%
Metro West	85,242	12.3%	10.0%	14.6%
Northeast MA	154,566	10.4%	9.1%	11.8%
Southcoast	45,809	13.3%	10.7%	16.0%
Western MA	102,672	12.5%	10.9%	14.1%
Statewide	830,919	12.1%	11.5%	12.8%



Health Care Access

Overall, 11.2% of all Massachusetts residents were uninsured or told the doctor's office or clinic would not accept their health insurance type in the past 12 months.

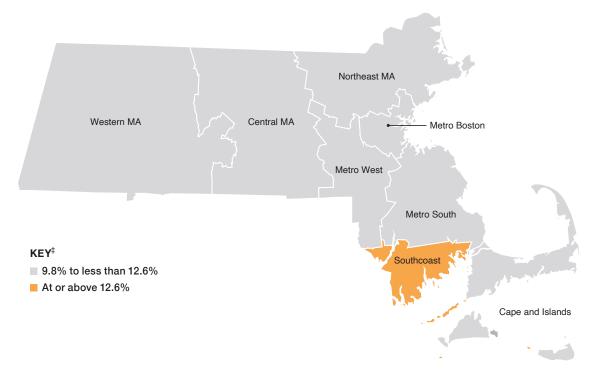
By region, the rates ranged from 10.0% in Northeast MA to 14.1% in Southcoast, which had the highest reported rates of residents being uninsured or told a doctor's office or clinic did not accept their health insurance type.

Note: Uninsured or Told Doctor's office or Clinic Did Not Accept Health Insurance Type: residents were uninsured at any time over the past 12 months or were told by a doctor's office or clinic that their insurance was not being accepted over the past 12 months.

- ‡There are no regions with rates at least one standard deviation below the statewide estimate (9.8% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (9.8% to less than 12.6% for this figure).
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (12.6% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Uninsured or Told Doctor's Office or Clinic Did Not Accept Health **Insurance Type over the Past 12 Months**



Region	# Residents Uninsured or Told Doctor's Office/Clinic Did Not Accept Health Insurance§	% Residents Uninsured or Told Doctor's Office/Clinic Did Not Accept Health Insurance§	95% Confide	ence Interval
Cape and Islands	29,723	12.2%	9.8%	14.6%
Central MA	96,432	12.5%	10.5%	14.5%
Metro Boston	187,479	11.3%	10.0%	12.7%
Metro South	89,832	10.7%	9.1%	12.2%
Metro West	69,767	10.1%	8.1%	12.1%
Northeast MA	147,374	10.0%	8.7%	11.3%
Southcoast	48,530	14.1%	11.0%	17.3%
Western MA	96,184	11.7%	10.1%	13.3%
Statewide	766,812	11.2%	10.5%	11.8%



Health Care Access

Overall, 18.0% of all Massachusetts residents reported being unable to get an appointment at a doctor's office or clinic as soon as one was needed in the past 12 months.

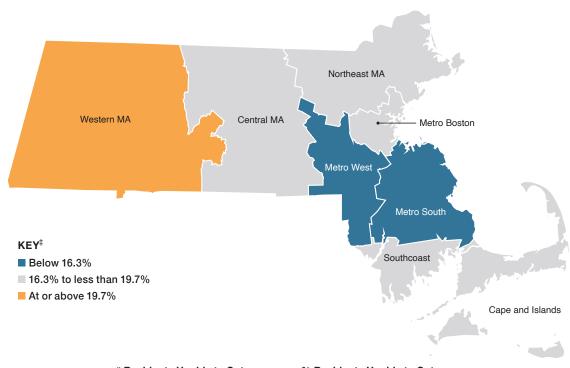
By region, the rates ranged from 15.4% in Metro South to 20.2% in Western MA. Residents in Western MA reported the highest rate of being unable to get an appointment at a doctor's office or clinic as soon as needed, and those in Metro West and Metro South reported the lowest rates of this difficulty (15.6% and 15.4%, respectively).

Note: Unable to Get an Appointment at a Doctor's Office or Clinic as Soon as Needed: residents were unable to get an appointment at a doctor's office or clinic as soon as they thought one was needed over the past 12 months.

- ‡Regions in blue indicate rates of at least one standard deviation below the statewide estimate (16.3% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (16.3% to less than 19.7% for this figure).
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (19.7% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Unable to Get an Appointment at a Doctor's Office or Clinic as Soon as Needed Over the Past 12 Months



Region	# Residents Unable to Get an Appointment at a Doctor's Office/Clinic When Needed [§]	% Residents Unable to Get an Appointment at a Doctor's Office/Clinic When Needed [§]	95% Confid	ence Interval
Cape and Islands	45,418	18.6%	15.5%	21.8%
Central MA	135,622	17.6%	15.3%	19.9%
Metro Boston	320,180	19.3%	17.7%	20.9%
Metro South	130,122	15.4%	13.6%	17.3%
Metro West	107,648	15.6%	13.2%	17.9%
Northeast MA	259,521	17.5%	15.4%	19.7%
Southcoast	64,898	18.9%	15.7%	22.1%
Western MA	165,680	20.2%	18.1%	22.3%
Statewide	1,233,358	18.0%	17.1%	18.9%

Health Care Utilization

Health care reform in Massachusetts and the subsequent implementation of the Affordable Care Act (ACA) led to increased overall utilization of primary care and preventive services, including dental care, as well as a reduction in delaying or forgoing needed care, and a decrease in preventable hospitalizations and potential reliance on the emergency room (ER). 17,18 Studies have found differences in utilization of health care based on geographic location throughout the country. 19 Residents in certain regions of the Commonwealth may be more isolated from health care services than residents in other regions due to lower numbers of general practice physicians, specialists or other health care providers per capita and/or within a given geographic radius. These differences in access to health care services may likely influence health care utilization patterns for residents in these regions.

To further investigate differences in health care utilization among residents of various Massachusetts regions, this section examines health care utilization patterns among residents with respect to: 1) whether residents had a visit with a general doctor and/or specialist in the past 12 months, 2) whether residents had a visit with a dental provider in the past 12 months, and 3) whether residents had a potential reliance on the ER for care, defined as visiting the ER at least three times in the past 12 months or reporting that their most recent visit to the ER was for a non-emergency. Although the frequency of needed health care visits varies by age and health status and most dental services are typically not covered by health plans, the rates of doctor or dental provider visits over a 12-month period still provide important insights into gaps in utilization across population subgroups.

Key Findings:

- Most Massachusetts residents reported having a visit with a doctor in the past year; rates ranged from 87.7% in Metro Boston to 91.5% in Northeast MA.
- Residents in Northeast MA, Southcoast, and Metro West regions reported the highest rates of visiting a doctor in the past year (91.5%, 90.5%, and 90.4%, respectively).

- Rates of dental visits in the past year were highest among residents in Northeast MA (76.2%) and Metro West (76.7%) and lowest among residents in the Cape and Islands (70.3%) and Southcoast (68.7%).
- Rates of potential reliance on the ER ranged from 10.4% in Metro West to 23.4% in Southcoast.
- Residents in Southcoast and Cape and Islands reported the highest rates of potential reliance on the ER (23.4% and 18.4%, respectively). ■

Health Care Utilization

Among Massachusetts residents, the majority (88.9%) reported having a visit with a doctor in the past 12 months.

Nearly three-quarters (73.4%) of residents reported having a visit with a dental provider in the past 12 months, indicating that, conversely, over one in four residents did not have a visit for dental care in the past 12 months. This may reflect difficulties in covering the costs of that care, particularly because dental care is often not covered by medical insurance, and many residents do not have dental insurance.

Approximately one in seven residents (14.0%) indicated a potential reliance on the ER for care in the past 12 months, assessed by using the ER for a nonemergency condition at their most recent visit and/or visiting the ER three or more times in the past 12 months.

Note: ER= Emergency Room

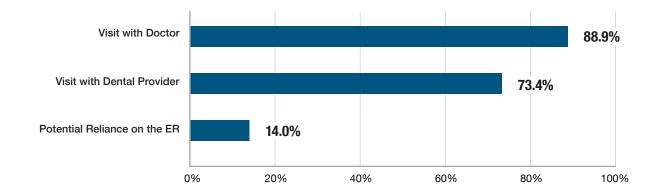
Visit with Doctor: Residents had a visit with a general doctor or specialist in the past 12 months.

Visit with Dental Provider: Residents had a dental care visit in the past 12 months.

Potential Reliance on the ER: Residents used the ER for nonemergency condition(s) at most recent visit or had three or more visits to the ER in the past 12 months.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Health Care Utilization Measures over the Past 12 Months





Health Care Utilization

As previously noted, nearly nine in 10 (88.9%) of Massachusetts residents reported a visit with a doctor in the past 12 months.

By region, the rates ranged from 87.7% in Metro Boston to 91.5% in Northeast MA. Metro West, Southcoast, and Northeast MA regions had the highest rates of residents reporting a visit with a doctor (90.4%, 90.5%, and 91.5%, respectively).

Note: Visit with Doctor: Residents had a visit with a general doctor or specialist in the past 12 months.

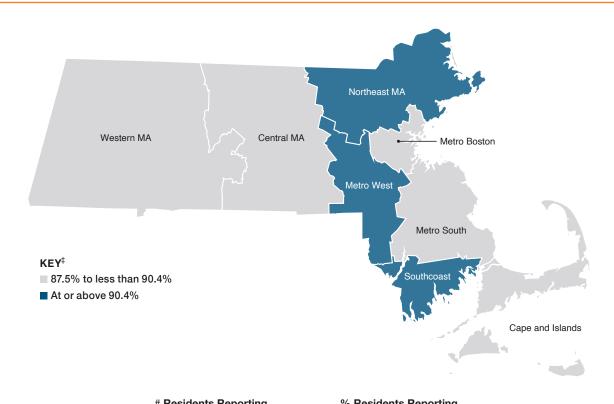
‡There are no regions with rates at least one standard deviation below the statewide estimate (87.5% for this figure). Regions in gray indicate rates that are within one standard deviation of the statewide estimate (87.5% to less than 90.4% for this figure).

Regions in blue indicate rates of at least one standard deviation above the statewide estimate (90.4% for this figure).

§ Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Visit with a Doctor over the Past 12 Months



Region	# Residents Reporting ion a Doctor Visit [§]		95% Confidence Interval	
Cape and Islands	215,018	88.2%	85.2%	91.2%
Central MA	681,713	88.3%	86.4%	90.2%
Metro Boston	1,453,004	87.7%	86.4%	89.0%
Metro South	743,972	88.2%	86.5%	90.0%
Metro West	625,925	90.4%	88.4%	92.4%
Northeast MA	1,353,650	91.5%	90.3%	92.7%
Southcoast	310,486	90.5%	88.2%	92.7%
Western MA	720,261	87.8%	86.0%	89.6%
Statewide	6,091,576	88.9%	88.3%	89.5%



Health Care Utilization

Nearly three in four Massachusetts residents (73.4%) reported a visit with a dental provider in the past 12 months.

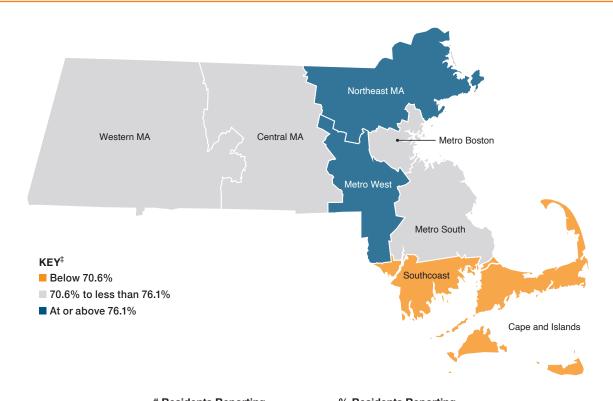
By region, the rates ranged from 68.7% in Southcoast to 76.7% in Metro West. Residents in the Northeast MA and Metro West had the highest rates of reporting a visit with a dental provider (76.2% and 76.7%, respectively), and those in Cape and Islands and Southcoast reported the lowest rates (70.3% and 68.7%, respectively).

Note: Visit with Dental Provider: Residents had a dental care visit in the past 12 months.

- ‡Regions in orange indicate rates of at least one standard deviation below the statewide estimate (70.6% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (70.6% to less than 76.1% for this figure).
- Regions in blue indicate rates of at least one standard deviation above the statewide estimate (76.1% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Visit with a Dental Provider over the Past 12 Months



Region	# Residents Reporting gion a Dental Provider Visit [§]		95% Confidence Interval	
Cape and Islands	171,339	70.3%	66.2%	74.4%
Central MA	559,244	72.4%	69.8%	75.1%
Metro Boston	1,193,099	72.0%	70.4%	73.6%
Metro South	619,707	73.5%	70.9%	76.1%
Metro West	530,803	76.7%	73.7%	79.6%
Northeast MA	1,126,886	76.2%	74.1%	78.3%
Southcoast	235,936	68.7%	64.8%	72.7%
Western MA	607,459	74.1%	71.9%	76.2%
Statewide	5,025,434	73.4%	72.5%	74.2%



Health Care Utilization

As previously noted, 14% of Massachusetts residents reported a potential reliance on the ER over the past 12 months, which represents over 960,000 residents.

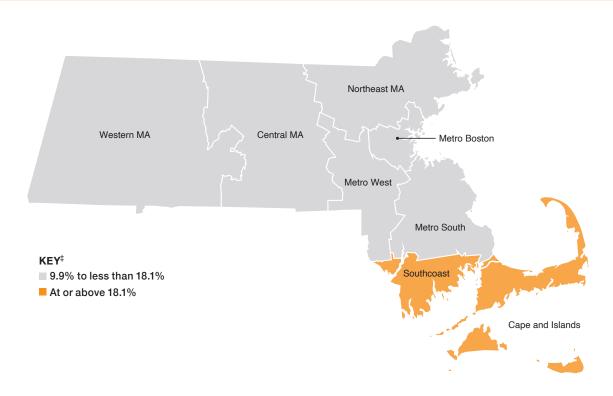
By region, the rates ranged from 10.4% in Metro West to 23.4% in Southcoast. Residents in the Cape and Islands and Southcoast reported the highest rates of potential reliance on the ER (18.4% and 23.4%, respectively).

Note: Potential Reliance on the ER: Residents used the ER for non-emergency condition(s) at their most recent visit or had three or more visits to the ER in the past 12 months.

- ‡There are no regions with rates at least one standard deviation below the statewide estimate (9.9% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (9.9% to less than 18.1% for this figure).
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (18.1% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source:Massachusetts Health Insurance Survey: 2015, 2017, 2019

Potential Reliance on the ER over the Past 12 Months



Region	# Residents with Potential ER Reliance [§]	% Residents with Potential ER Reliance [§]	95% Confidence Interval	
Cape and Islands	44,808	18.4%	14.8%	22.0%
Central MA	93,296	12.1%	10.5%	13.6%
Metro Boston	240,008	14.5%	13.0%	16.0%
Metro South	117,912	14.0%	12.2%	15.8%
Metro West	72,315	10.4%	8.2%	12.7%
Northeast MA	191,770	13.0%	11.5%	14.4%
Southcoast	80,150	23.4%	19.5%	27.2%
Western MA	106,473	13.0%	11.1%	14.8%
Statewide	960,004	14.0%	13.3%	14.7%



Health Care Affordability

Although Massachusetts has the lowest rate of uninsured residents in the country, residents continue to face challenges related to the high cost of care. ²⁰ The Commonwealth typically has higher-than-average health care costs, the burden of which is shared by residents through high deductibles, cost-sharing, and premiums. These may create financial difficulties even among the continuously insured. ^{21,22} Furthermore, higher levels of unemployment, relatively fewer high wage jobs, underinsurance, and/or stringent income eligibility criteria for public programs may exacerbate health care affordability issues for residents and their families in certain geographic regions.

To further investigate differences in rates of health care affordability issues across various Massachusetts regions, this section examines the following measures: 1) whether residents or any members of their immediate families had medical debt (medical bills being paid over time) or problems paying individual or family medical bills over the

past 12 months and 2) whether residents have had any unmet health care needs due to cost (including general doctor care, specialist care, mental health services, dental care, or prescription drugs) over the past 12 months. In this section, "resident" refers to the individual, and "family" refers to the individual plus any spouse/partner, parents/ guardians, and siblings, children, or stepchildren under age 26 who are living in the household.

Key Findings:

- The rate of residents experiencing unmet health care needs due to cost ranged from a low of 21.0% in the Cape and Islands to a high of 31.3% in Southcoast.
- The rates of medical debt and problems paying medical bills in the family ranged from 18.3% in Metro Boston to 27.2% in Southcoast.
- Residents in Metro Boston reported the lowest rates of medical debt and problems paying medical bills in the family, whereas those in Metro South and Southcoast reported the highest rates of these issues (25.0% and 27.2%, respectively).

Health Care Affordability

Nearly one-quarter of Commonwealth residents (24.0%) reported experiencing unmet health care needs due to cost, and over one-fifth of residents (22.0%) reported medical debt and/or problems paying medical bills in their family.

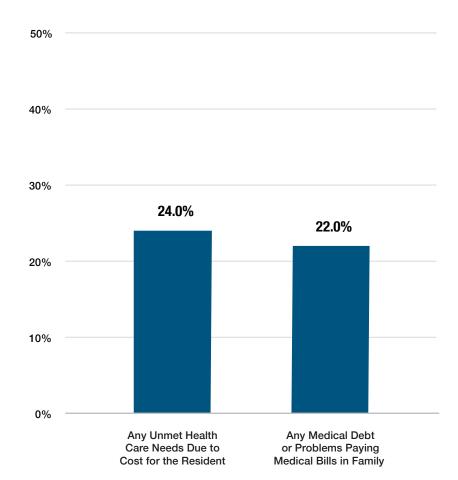
Sources of family medical bills included general doctor care, specialist care, mental health services, dental care, and prescription medications.

Note: Any Unmet Health Care Needs Due to Cost for the Resident: Any unmet need for health care due to cost for the resident in the past 12 months including prescription drugs, general doctor care, specialist care, mental health services and/or dental care.

Any Medical Debt or Problems Paying Medical Bills in the Family: Residents with any medical debt (any medical bills being paid overtime) or problem paying medical bills in the family in the past 12 months.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Issues with Health Care Affordability over the Past 12 Months





Health Care Affordability

As previously noted, one quarter of all Massachusetts residents (24.0%) reported experiencing unmet health care needs due to cost.

By region, the rates ranged from 21.0% in the Cape and Islands to 31.3% in Southcoast, where residents reported the highest rates of any unmet needs due to cost.

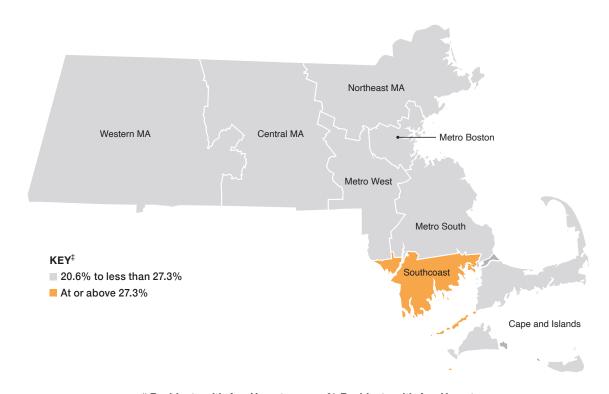
Note: Any Unmet Health Care Needs Due to Cost for the Resident: Any unmet need for health care due to cost for the resident in the past 12 months including prescription drugs, general doctor care, specialist care, mental health services and/or dental care.

- ‡There are no regions with rates at least one standard deviation below the statewide estimate (20.6% for this figure).

 Regions in gray indicate rates that are within one standard.
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (20.6% to less than 27.3% for this figure).
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (27.3% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Any Unmet Health Care Needs Due to Cost for the Resident over the Past 12 Months



Region	# Residents with Any Unmet Health Care Needs Due to Cost§	% Residents with Any Unmet Health Care Needs Due to Cost§	95% Confidence Interval	
Cape and Islands	51,194	21.0%	17.6%	24.4%
Central MA	197,790	25.6%	23.1%	28.2%
Metro Boston	392,757	23.7%	22.0%	25.5%
Metro South	207,910	24.7%	22.2%	27.1%
Metro West	146,067	21.1%	18.6%	23.6%
Northeast MA	329,578	22.3%	20.1%	24.4%
Southcoast	107,549	31.3%	27.3%	35.4%
Western MA	206,324	25.2%	22.9%	27.4%
Statewide	1,642,020	24.0%	23.1%	24.8%



Health Care Affordability

As noted previously, 22.0% of all Massachusetts residents reported a medical debt or problems paying medical bills in the family over the past 12 months.

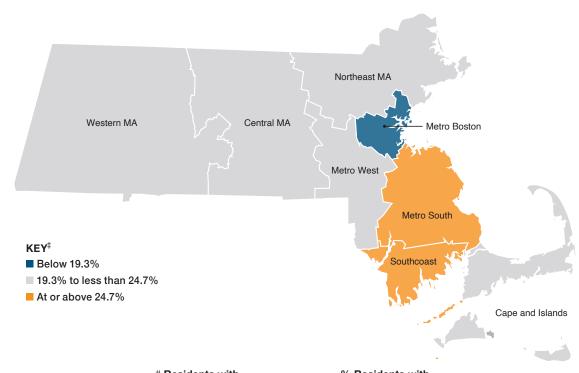
By region, the rates ranged from 18.3% in Metro Boston to 27.2% in Southcoast. Residents in Metro Boston reported the lowest rates of medical debt and problems paying medical bills in the family, whereas those in Metro South and Southcoast reported the highest rates of these issues (25.0% and 27.2%, respectively).

Note: Any Medical Debt or Problems Paying Medical Bills in the Family: Residents with any medical debt (medical bills being paid overtime) or problems paying medical bills in the family in the past 12 months.

- ‡Regions in blue indicate rates of at least one standard deviation below the statewide estimate (19.3% for this figure).
- Regions in gray indicate rates that are within one standard deviation of the statewide estimate (19.3% to less than 24.7% for this figure).
- Regions in orange indicate rates of at least one standard deviation above the statewide estimate (24.7% for this figure).
- § Proportions were estimated based on the Massachusetts Health Insurance Survey (2015-2019). The number of residents is then estimated as the proportion of an area multiplied by the ACS 2019 5-year population estimate for that area.

Data source: Massachusetts Health Insurance Survey: 2015, 2017, 2019

Medical Debt or Problems Paying Medical Bills in the Family over the Past 12 Months



Region Cape and Islands	# Residents with Medical Debt or Problems Paying Medical Bills [§] 56,162	% Residents with Medical Debt or Problems Paying Medical Bills§	95% Confidence Interval	
			19.6%	26.5%
Central MA	170,632	22.1%	19.8%	24.4%
Metro Boston	302,994	18.3%	16.8%	19.8%
Metro South	210,954	25.0%	22.7%	27.3%
Metro West	142,146	20.5%	17.9%	23.1%
Northeast MA	336,192	22.7%	20.5%	25.0%
Southcoast	93,407	27.2%	24.0%	30.4%
Western MA	188,938	23.0%	21.1%	25.0%
Statewide	1,504,969	22.0%	21.2%	22.7%



Notes

- 1 Findings from the 2019 Massachusetts Health Insurance Survey 2020, Center for Health Information and Analysis Boston, MA.
- 2 Keisler-Starkey, , K.a.L.N.B., Health Insurance Coverage in the United States: 2019. 2020.
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- 4 Healthcare utilization as a proxy in disability determination. 2018, National Academies of Sciences Engineering and Medicine.
- **5** Artiga, S., K. Orgera, and O. Pham, *Disparities in health and health care:* Five key questions and answers. 2020, Kaiser Family Foundation.
- 6 Zhu, J., et al., Massachusetts Health Reform and Disparities in Coverage, Access and Health Status. Journal of General Internal Medicine, 2010. 25(12): p. 1356-1362.
- 7 COVID-19 Community Impact Survey (CCIS) Preliminary Analysis Results as of April 6, 2022. 2022, Massachusetts Department of Public Health
- 8 Health Equity Framework 2020. 2020, Massachusetts Health Policy Comission.
- 9 Building Toward Racial Justice and Equity in Health: A Call to Action. Office of the Attorney General, Commonwealth of Massachusetts.
- 10 The Geography of Uninsurance in Massachusetts: An Update for 2013-2017. Blue Cross MA Foundation
- 11 Miller, S., The Effect of the Massachusetts Reform on Health Care Utilization. Inquiry, 2012. 49(4): p. 317-326.
- 12 Dickman, S.L., D.U. Himmelstein, and S. Woolhandler, Inequality and the health-care system in the USA. Lancet, 2017. 389(10077): p. 1431-1441.

- 13 Chan KS, G.D., McCleary RR, Thrope RJ, Availability of Health Care Provider Offices and Facilities in Minority and Integrated Communities in the US. J Health Care Poor Underserved, 2019. 30(3): p. 986-1000.
- 14 Probst, J.C., Moore, C.G., Glover, S.H., and Samuels, M.E., Person and place: the compounding effects of race/ethnicity and rurality on health. American Journal of Public Health, 2004. 94(10): p. 1695-1703.
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- **16** Left Out: Barriers to Health Equity for Rural and Underserved Communities. 2020, U.S. House of Representatives Committee on Ways and Means
- 17 Healthcare utilization as a proxy in disability determination. 2018, National Academies of Sciences Engineering and Medicine.
- 18 MIller, S., The Effect of the Massachusetts Reform on Health Care Utilization. Inquiry, 2012. 49(4): p. 317-326.
- 19 Left Out: Barriers to Health Equity for Rural and Underserved Communities. 2020, U.S. House of Representatives Committee on Ways and Means.
- 20 Keisler-Starkey, K.a.L.N.B., Health Insurance Coverage in the United States: 2019, 2020,
- 21 Zhu, J., et al., Massachusetts Health Reform and Disparities in Coverage, Access and Health Status. Journal of General Internal Medicine, 2010. 25(12): p. 1356-1362.
- 22 Jost, T., Affordability: The Most Urgent Health Reform Issue for Ordinary Americans. Health Affairs, 2016.



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