

## Regional Health Issues

- Vulnerable populations are increasing; in particular the number of persons in poverty is increasing in every county with the greatest increase in numbers coming in the wealthiest counties.
- Vulnerable populations are spreading out as the region as a whole becomes more diverse.
- There are considerable variations across counties in terms of socio-economic status, health outcomes, and access to care.
- Poor health outcomes are highly correlated with poor socio-economic status in urban counties.
- Poor health outcomes are highly correlated with poor access to care in rural counties.
- Obesity and diabetes is increasing across the region.
- Minority health is particularly adversely affected by socio-economic status, by poor access to care, by environmental factors, and by behavior; however, African Americans and Hispanics appear to be impacted differently by these factors or respond differently to these impacts.

In 2010, the REACH Healthcare Foundation asked the Mid-America Regional Council (MARC) to analyze available data on the health and social conditions of the uninsured and other vulnerable populations in the Kansas City metropolitan area. This document provides a brief summary of the findings from that analysis.

**The data reflects health issues and conditions in the Foundation’s service area:**

- Johnson County, KS
- Wyandotte County, KS
- Allen County, KS
- Jackson County, MO
- Cass County, MO
- Lafayette County, MO
- Portions of Clay and Platte counties that are within the boundaries of Kansas City, Missouri

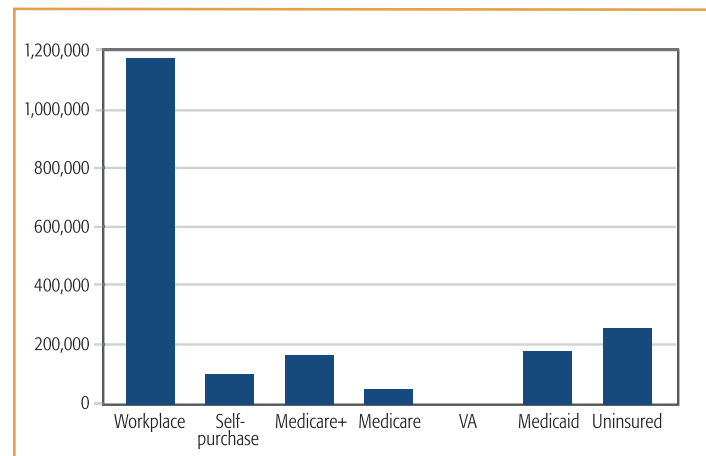
## Health Data Assessment Findings

Based on data from the U.S. Census Bureau 2008 American Community Survey, out of a total 1.8 million population, 250,000 people in the REACH service area are uninsured (chart A). An additional 195,000 people receive Medicaid assistance.

*These individuals are considered the “medically underserved,” representing 24% of the area’s total population.*

Besides those who are uninsured or on Medicaid, a little less than 1.2 million people in the REACH service area have health insurance through their workplace. Close to 164,000 people have Medicare plus some other type of insurance, while about 45,000 people have Medicare without supplemental insurance. Approximately 112,000 people purchase health insurance directly from insurers as their primary coverage.

### A. Type of Health Insurance



# The Uninsured and Medically Underserved

The composition of those who are insured, those who are on Medicaid, and those who are uninsured is quite different. Charts B, C and D illustrate some of these differences in terms of age, employment and poverty. The majority (87%) of individuals on Medicaid are not in the labor force; about 55 percent are children under the age of 18, with 13 percent seniors over age 65. Of the remaining 32 percent, a significant number of them are single mothers or in group homes (disabled). By contrast, two-thirds of the uninsured are in the labor force, with 56% working and 11% looking for work.

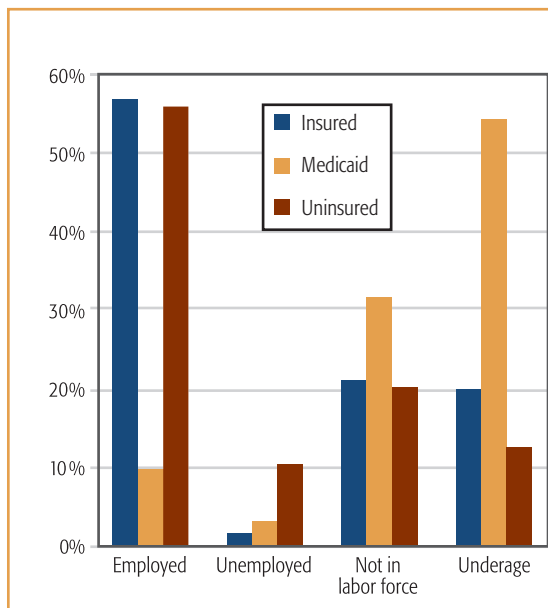
About 58% of the uninsured have incomes below 200% of poverty; slightly more than three-fourths of those on Medicaid fall in the same income range. More than one quarter (28%) of the uninsured live in households below the federal poverty level. This compares to 3% of those who are insured through their workplace.

Individuals who purchase insurance directly through the individual marketplace are somewhat poorer, work somewhat less and are slightly older than those who receive it through an employer.

Individuals with adequate insurance are primarily in the middle ages before eligibility for Medicare, with the median age at 43. The age distribution of the uninsured is largely young adults with a median age of 31.

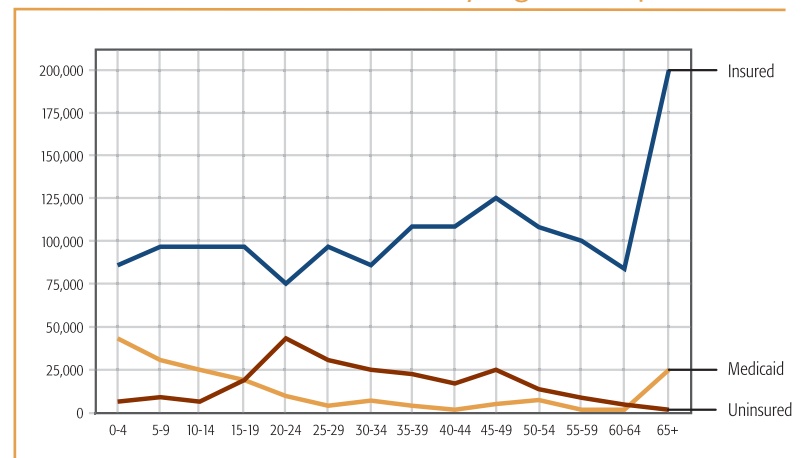
*The poverty chart shows that those on Medicaid and the uninsured have higher rates of poverty than people who are insured.*

## B. Percentage of Underserved by Employment Status

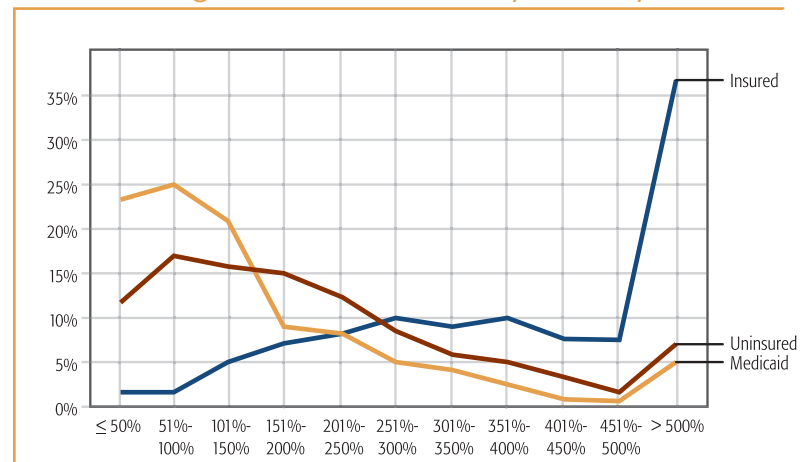


*The full report can be found online at [www.regionalhealth.org](http://www.regionalhealth.org).*

## C. Number of Underserved by Age Group



## D. Percentage of Underserved by Poverty Level



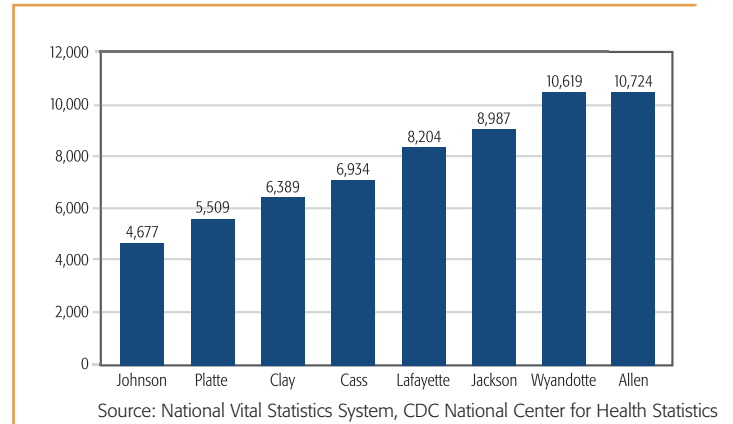
There are a number of populations that can be considered medically vulnerable because of susceptibility to illness or injury or because they have financial, cultural or physical difficulties in accessing health care. These populations include people over age 65 (approximately 200,000 people and growing) and those under age 18 (466,000, or about one quarter of the population).

Other vulnerable populations in our region include minorities (about one quarter of the population), those who are linguistically isolated (about 18,000 individuals), those who are homeless (over 10,000 individuals), and those individuals who are undocumented, estimated to be about 43,000. An especially medically vulnerable population are those individuals living in poverty, which totals about 180,000. Chart E shows that the numbers of individuals living in poverty is growing in all counties in the REACH service area.

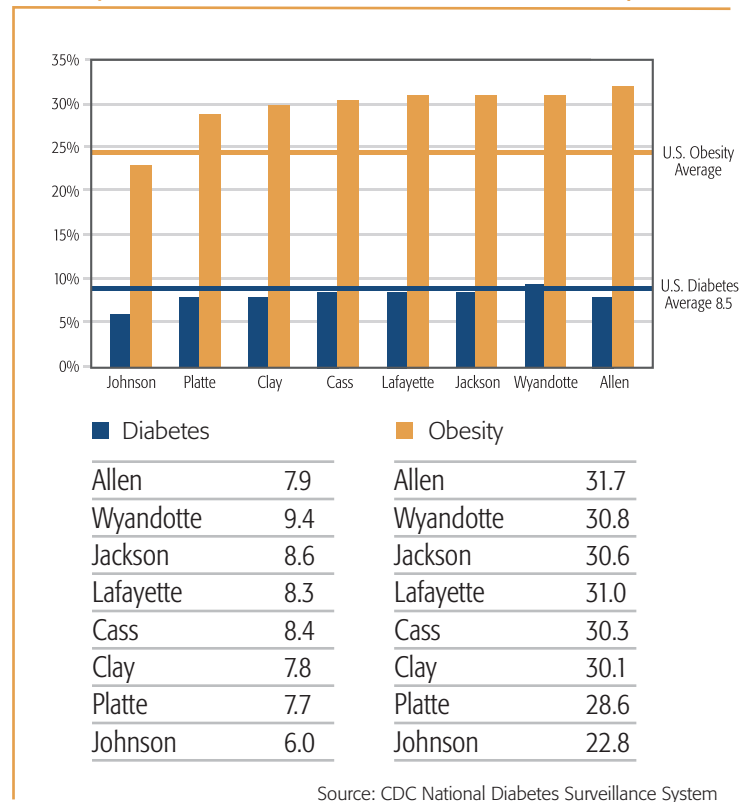
An important measure used in the county health rankings is years of potential life lost (YPLL), which is a measure of the rates of premature death. It is the number of years of life prior to age 75 lost within a geographic area due to premature death and is expressed as the number of years lost per 100,000 population (chart F).

Obesity and diabetes are major and related health issues. Chart G shows the 2007 obesity and diabetes rates per county. Obesity rates are above the U.S. average in all counties except in Johnson; diabetes rates also are higher than the U.S. average. Data from the U.S. Centers for Disease Control show that adult obesity and diabetes increased in every county between 2004 and 2007, except in Johnson County, where diabetes rates held steady during that period.

### F. Years of Potential Life Lost (YPLL)



### G. Population with Diabetes and Obesity



### E. Population Living in Poverty

	Allen	Johnson	Wyandotte	Cass	Clay	Jackson	Lafayette	Platte	REACH Service Area
At/Under 100% FPL (2000)	2,093	15,323	25,773	4,664	9,898	76,808	2,816	3,477	140,852
At/Under 100% FPL (2008)	N/A	23,174	30,073	4,853	15,196	95,850	3,962	6,779	179,887
% Increase At/Under 100% FPL (2000 to 2008)	N/A	51.24%	16.68%	4.05%	53.53%	24.79%	40.70%	94.97%	27.71%