



DATA PROFILE FOR HEALTH STATISTICS REGION (HSR) I Logan, Morgan, Phillips, Sedgwick, Washington and Yuma Counties

The tables below provide data on the population, unemployment, health insurance status and other health related factors pertaining to residents in HSR I. The information is summarized by the Colorado Health Institute (CHI) using a variety of sources which are included below each table.

Table 1. Population by age, HSR I and Colorado, 2010 and 2020

	Population		Change 2010-2020	
	2010	2020	Percent change	Average annual growth rate
HSR I				
Age 0-18 years	19,347	22,937	18.6%	1.7%
Age 19-64 years	41,649	47,470	14.0%	1.3%
Age 65 years and older	11,130	14,205	27.6%	2.5%
All ages	72,126	84,612	17.3%	1.6%
Colorado				
Age 0-18 years	1,334,223	1,587,802	19.0%	1.8%
Age 19-64 years	3,284,580	3,656,925	11.3%	1.1%
Age 65 years and older	541,386	927,003	71.2%	5.5%
All ages	5,160,189	6,171,730	19.6%	1.8%

SOURCE: Colorado Health Institute using data from the Colorado Demography Office

As can be seen in Table 1, the most notable population growth in the counties comprising HSR I between 2010 and 2020 is projected to be in the 65+ population (28%), although it is still considerably lower than the expected growth at the state level (71%). The slowest growth rate in the HSR I population will be among working-age adults (age 19-64 years) at 14 percent. It is the case in almost every region of the state that the 65+ age group is the fastest-growing segment of the population. The lowest growth rate typically is found among working-age adults. This finding has policy implications for state resource allocations, especially in the Medicaid program that funds acute care for chronic disease management and a significant portion of long-term care expenses for low-income older adults.

Table 2. Unemployment rates, HSR I and Colorado, 2009-10

	October-December 2009	January-March 2010	April-June 2010	July-September 2010	October - December 2010
HSR I	4.5%	9.3%	8.2%	8.0%	5.7%
Colorado	7.1%	9.5%	8.8%	8.6%	8.8%

SOURCE: Colorado Health Institute using data from the Colorado Department of Labor & Employment, Labor Market Information Division, October 2009 – December 2010.

Unemployment rates can affect who has access to private insurance offerings as private health insurance in Colorado and the United States is primarily an employer-based system. The data in Table 2 reveal that unemployment rates are lower in HSR I than the state average.

Table 3. Median household income and percent of population at or below 100% and 200% of the federal poverty level (FPL), HSR I and Colorado, 2008-09

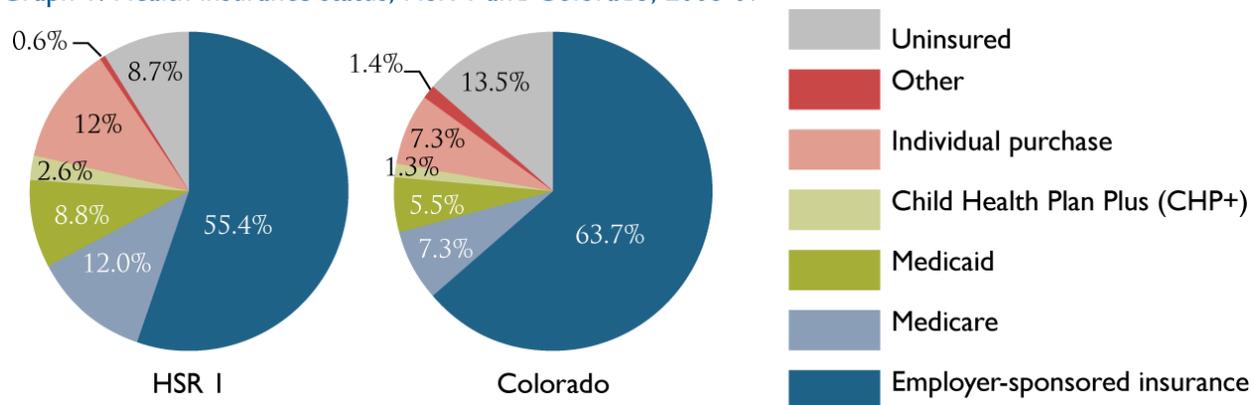
	Median household income	% of population at or below 100% of FPL, all ages	% of population at or below 200% of FPL, ages 0-18	% of population at or below 200% of FPL, ages 19-64
HSR I	\$33,852	23.9%	60.8%	40.3%
Colorado	\$38,399	18.6%	45.8%	37.0%

NOTE: In 2009, 100% of the FPL for a family of 4 was \$22,050.

SOURCE: 2008-09 Colorado Household Survey, Colorado Department of Health Care Policy and Financing (HCPF), analyzed by the Colorado Health Institute.

Annual household income is used to categorize families according to how their income ranks relative to a federally defined poverty level (FPL). This federal classification of poverty is used to determine eligibility for many federal and state programs including Medicaid and the Child Health Plan Plus (CHP+) program. The Patient Protection and Affordable Care Act also uses the FPL as criteria for determining eligibility for federal subsidies available to moderate-income individuals (up to 400% of FPL) to purchase health insurance through state health insurance exchanges. As can be seen in Table 3, HSR I has a larger proportion of its population at or below 100 percent and 200 percent of the FPL than the state as a whole.

Graph I. Health insurance status, HSR I and Colorado, 2008-09



SOURCE: 2008-09 Colorado Household Survey, HCPF, analyzed by the Colorado Health Institute.

The relationship between having health insurance coverage, type of coverage and health outcomes has been demonstrated by a growing body of research. Colorado policymakers can have a better understanding of the insurance status of their constituents through the data contained in the Colorado Household Survey (COHS).

Table 4. Employed adults (ages 19–64) who are uninsured, HSR I and Colorado, 2008-09

	Percent
HSR I	8.2%
Colorado	14.8%

SOURCE: 2008-09 Colorado Household Survey, HCPF, analyzed by the Colorado Health Institute.

While private health insurance is primarily secured through one’s employer, many working individuals still lack coverage. Table 4 summarizes the proportion of employed adults who are uninsured in HSR I and Colorado. HSR I has a lower rate of uninsured employed adults when compared to the state average. These uninsured working individuals will be prime candidates for purchasing health insurance through the state’s health insurance exchange.

Table 5. Number and proportion of persons who are eligible but not enrolled in Medicaid and Child Health Plan Plus (CHP+) and estimates of expansion populations, HSR I and Colorado, 2009

	HSR I		Colorado	
	Number	Percent	Number	Percent
CHP+ children (age 0-18)				
Currently eligible and enrolled	1,333	57.6%	65,558	62.8%
Currently eligible but not enrolled*	981	42.4%	38,887	37.2%
HB 09-1293: Expansion group*	40		10,858	
Medicaid children (age 0-18)				
Currently eligible and enrolled	4,383	87.1%	256,845	86.7%
Currently eligible but not enrolled	649	12.9%	39,550	13.3%
Medicaid parents of dependent children (age 19-64)				
Currently eligible and enrolled	1,075	74.3%	69,140	72.0%
Currently eligible but not enrolled	372	25.7%	26,906	28.0%
HB 09-1293: Expansion group	182		20,098	
National health reform: Expansion group	521		19,965	
Medicaid childless adults (age 19-64)				
HB 09-1293: Expansion group	2,930		143,191	
National health reform: Expansion group	473		39,348	

SOURCE: Colorado Health Institute analysis of the 2009 American Community Survey and Medicaid and CHP+ enrollment data from HCPF

The Colorado Health Care Affordability Act in 2009 (HB 09-1293) expanded CHP+ eligibility to 250 percent of the federal poverty level (FPL) (Table 5) for children and pregnant women and Medicaid eligibility for adults to 100 percent of FPL. In light of the changes, monitoring eligible but not enrolled individuals in these programs is essential for program planning and budgetary purposes.

Table 6. Health risk factors by life stage, HSR I and Colorado, 2006-09

	HSR I	Colorado
Healthy Beginnings¹		
Women who received prenatal care after first trimester or had no prenatal care during pregnancy	24.8%	21.8%
Healthy Children²		
Children who are uninsured	18.8%	9.0%
Children who are obese	23.1%	14.0%
Percent of children engaged in physical activity fewer than 7 hours per week	42.0%	44.5%
Healthy Adults³		
Adults who have been told by a doctor that they have diabetes (excludes gestational diabetes)	10.0%	5.4%
Percent of adults who have fair or poor health ⁴	18.4%	15.2%
Adults who are obese [†]	29.2%	18.7%

SOURCE: ¹Center for Health and Environmental Information and Statistics, Colorado Department of Public Health and Environment (CDPHE), 2006-08; ²Child Health Survey, CDPHE, 2007-09; ³2007-09 Behavioral Risk Factor Surveillance System (BRFSS) Survey, CDPHE; ⁴2008-09 Colorado Household Survey, HCPF

[†] Body Mass Index (BMI) is a measure of height relative to weight. Adults reporting a BMI of 30 or higher are considered obese.

Risk factors that affect the health of individuals and populations are a matter of both personal and public responsibility. In the case of pregnant women receiving adequate prenatal care (Table 6), it is clear that neither Colorado as a state nor HSR I as a region of the state is doing well—25 percent of women in HSR I are either not starting care in the first trimester of their pregnancy or are getting no prenatal care at all. This statistic has policy implications for how health care resources are deployed, including the outreach and enrollment of low-income pregnant women into the Medicaid and CHP+ programs.

Table 7. Health care utilization profile, HSR I and Colorado, 2008-09

	HSR I	Colorado
Health care utilization¹		
Visited an emergency room in the past year	27.4%	24.3%
Visited a primary care physician in the past year	94.7%	90.9%
Deferred medical care due to cost		
Insured	17.1%	16.9%
Uninsured	56.0%	43.7%
Usual source of care²		
A doctor's office or private clinic	68.4%	76.1%
A community health center or other public clinic	28.2%	11.8%
A retail clinic like Wal-Mart	0.0%	0.2%
A hospital emergency room	1.8%	4.7%
An urgent care center	0.0%	3.2%
Some other place	1.4%	3.5%
Does not go to one place most often	0.2%	0.4%

¹Limited to respondents who indicated they had visited a health care professional or health care facility in the 12 months prior to the survey. ²If respondents indicated that they did not have a usual source of care, they were asked where they would go if they were sick or needed advice about their health.

SOURCE: 2008-09 Colorado Household Survey, HCPF, analyzed by the Colorado Health Institute

One of the more unique aspects of the Colorado Household Survey (COHS) is the section where respondents were asked about their health care utilization. As can be seen in Table 7, the proportion of individuals living in HSR I who cited a community health center or public clinic as a usual source of care is more than twice that of the state. The COHS provides a rich source of data for policymakers to understand how insurance status and household income influence how and whether residents use health services.