

B27

Mary Valmont

Advisor(s): Marilyn Fraser

Examining the Association between Insurance Status and Healthcare Access among NYC Residents

Purpose: To determine if insurance status is associated with access to care among adults in the NYC Metropolitan Area. We postulated that there would be an association between insurance status (e.g., uninsured, private vs. public) and access to care (e.g., frequency of healthcare visits a year) among adults in the NYC Metropolitan Area.

Methods: Using the data from the Communities Together for Health Equity (CTHE) survey, was used to assess the relationship between insurance status and access to care among adults in NYC. Chi-square test and Mann Whitney U test were used to assess the association between insurance status and access to care.

Result: Among the uninsured, 19% reported receiving no care at all, versus 6.30% of insured participants, $p < 0.01$. Among uninsured participants, 29.4% reported receiving care 2-3 times a year, compared to 47.9% of insured participants, $p < 0.05$. Over 60% of public insurance participants reported receiving no care at all, compared to 39.0% of private insurance participants, $p < 0.05$. Among those with public insurance, 70.7% reported utilizing healthcare services less frequently, approximately once a year, compared to only 29.2% of individuals with private insurance.

Conclusions: There is an association between insurance status and access to care among adults in NYC. Participants with no insurance and those with public insurance utilized healthcare services less frequently.

Keywords: Insurance status, Access to healthcare, Urban Population, Uninsured adults.