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7.6 Million Californians Rely on the Safety Net of Health Care Providers for Regular Care

Melissa Gatchell, Shana Alex Lavarreda, and Ninez Ponce

California’s system of safety net providers, which includes community health centers, public hospitals and clinics, provides regular care to nearly 7.6 million Californians, almost a quarter of the state’s nonelderly population (Exhibit 1).

Four in 10 safety net users—nearly three million Californians in all—were covered all year by employment-based health insurance, but they reported using these community health centers, public hospitals and clinics as their main source of care.

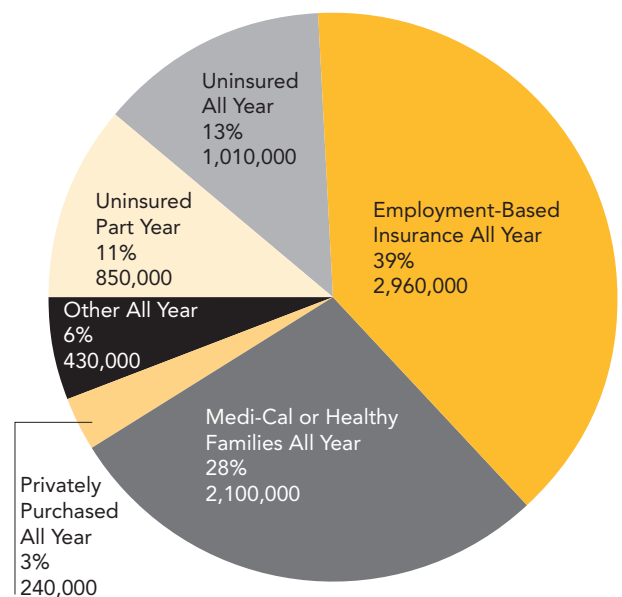
Over two million adults and children covered by Medi-Cal or Healthy Families reported their main source of care as the safety net. They represent nearly three in 10 safety net users.

The safety net also served nearly 1.9 million of the 6.5 million Californians who lacked coverage for some or all of the year in 2005. More than one million who were uninsured all year and 850,000 who were uninsured part year reported using a safety net clinic or hospital as their usual source of care.

The safety net thus serves people of every health insurance status, but it has historically focused its mission on serving lower income adults and children, racial/ethnic minorities and immigrants. The safety net is the top source of care for those who are uninsured all year, followed by private providers (22%). A plurality of those uninsured all year report not having a usual source of care (47%), with the remainder reporting that they use emergency rooms, no one place, or other places (3%; data not shown).

Among those uninsured all year, there is greater reliance on the safety net among Latinos, other

Exhibit 1. Insurance Status of Nonelderly Adults and Children Who Rely on Safety Net Providers as Their Usual Source of Care, Ages 0-64, California, 2005



Notes: “Other All Year” includes public programs other than Medi-Cal or Healthy Families (such as Healthy Kids or AIM), as well as any combinations of insurance in which the person was never uninsured.

Numbers may not add to 100% due to rounding.

Source: 2005 California Health Interview Survey

single/multiracial individuals, non-citizens without green cards, adults with children, and people with family incomes below 200% of the federal poverty level (Exhibit 2). Among those who are uninsured part year, the overall proportion who use the safety net for their regular source of care is essentially the same as the overall proportion for Californians uninsured all year.

Exhibit 2. Proportion of Uninsured Adults and Children Who Rely on the Safety Net as Their Usual Source of Care , Ages 0-64, California, 2005

	Uninsured All Year (%)	Uninsured Part Year (%)
Overall Proportion	28.0%	28.9%
Race/Ethnicity		
White	22.5%	17.2%
Latino	33.5%	37.6%
Asian American and Pacific Islander	12.5%	22.9%
African American	30.8%	26.1%
Other Single / Multiple Race	34.4%	37.5%
Citizenship		
U.S. Citizen	24.6%	25.1%
Non-Citizen with Green Card	24.8%	34.1%
Non-Citizen without Green Card	36.5%	44.5%
Family Composition		
Single Adult	22.8%	20.0%
Single Parent	30.9%	32.3%
Married without Children	26.9%	26.9%
Married with Children	34.1%	36.6%
Family Income as Percent of Federal Poverty Level (FPL) *		
0-99% FPL	33.2%	38.9%
100-199% FPL	30.0%	34.3%
200-299% FPL	21.1%	25.0%
300% FPL and Above	21.4%	17.4%

* In 2005, the federal poverty level was \$9,973 for one person, \$12,755 for a two-person family, and \$15,577 for a three-person family.

Note: Numbers are rates and will not add to 100%.

Source: 2005 California Health Interview Survey

However, and somewhat surprisingly, among persons in the groups noted above, safety net use is greater among those uninsured part of the year than it is among those who are uninsured all year. This is because far fewer persons who are uninsured part year have no usual source of care. Thus, having some form of coverage over the past year among these vulnerable groups is associated with higher rates of having a regular source of care, whether from the safety net or from private providers (data not shown).

Our findings underscore the important role of the safety net in ensuring access to care for the most socio-economically vulnerable Californians. It serves many

Californians with employment-based insurance coverage as well as those covered by public programs (such as Medi-Cal and Healthy Families) and those who are uninsured for all or even some of the year.

It plays a critical role for the uninsured, but especially for uninsured people of color, immigrants, families with children, and low-income adults and children. To the extent that public policies that expand health insurance coverage reduce the number of uninsured Californians, the safety net will serve fewer patients who will be uninsured. However, the important role that it currently plays in the care of people with employment-based insurance, Medi-Cal or Healthy Families coverage suggests that the safety net will continue to be a critically important provider of health care to Californians who do obtain coverage. Federal and state investments will be needed to support the continuing role that the safety net is likely to play.

Data Source

Based on data from the 2005 California Health Interview Survey, this fact sheet examines the use of community health centers, public hospitals and clinics as a usual source of care. CHIS 2005 provides the most recent information available on health insurance coverage of Californians, both statewide and at the county level. For more information on the California Health Interview Survey, please visit www.chis.ucla.edu.

Author Information

Melissa Gatchell, MPH, is a graduate student researcher in the UCLA Department of Health Services at the School of Public Health; Shana Alex Lavarreda, MPP, is a senior research associate at the UCLA Center for Health Policy Research; and Ninez Ponce, PhD, MPP, is a senior research scientist at the UCLA Center for Health Policy Research and an associate professor in the Department of Health Services.

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UCLA Center for Health Policy Research
 10960 Wilshire Blvd., Suite 1550
 Los Angeles, California 90024

Phone 310.794.0909
 Fax 310.794.2686
 Email chpr@ucla.edu