



Health Factors Clinical & Quality Care

MATCH – County Ranking Data (Mobilizing Action Toward Community Health) 2010 Snapshot of Clinical Care Health Factors

MATCH - Buncombe County	Buncombe Value	NC Value	Target Value	
Clinical Care NC County Rank: 3rd Healthiest				
<u>Uninsured adults [12]</u>	18%	17%	14%	↓
<u>Primary care provider rate [13]</u>	206	115	154	↑
<u>Preventable hospital stays rate [14]</u>	49	73	55	↓
<u>Diabetic screening [15]</u>	88%	84%	88%	↑
<u>Hospice use [16]</u>	33%	28%	37%	↑

Sources URL: <http://www.countyhealthrankings.org/north-carolina/buncombe>

About the Target Value

The arrows help us know whether we should be higher or lower than the targeted value in order to improve health. For example, when looking at Adult Smoking, the Buncombe Value is higher than the Target Value. We need to decrease ↓ the percentage of adults who smoke in order to meet or exceed the Target Value.

About the Buncombe Value

The Buncombe Value is calculated using multiple years of data to stabilize the data and offer a good “snapshot” of a particular health behavior. Health behaviors that are highlighted in **Red** are above ↑ the Target Value.

In this Section...

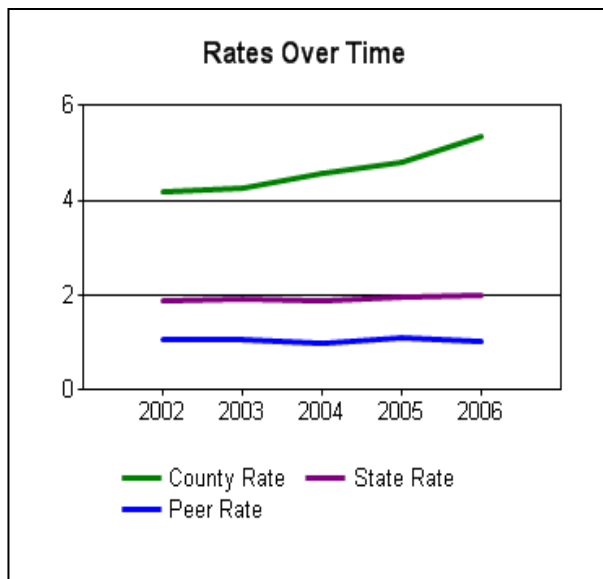
Find data from Local Health Survey, BRFSS and other resources about factors that impact health outcomes.

- Health Care Access & Utilization
- Affordability and Health Insurance
 - Medical care & medication
 - Mental health care
 - Dental care
- Disease Management
- Early Identification of Disease
- Flu Vaccination



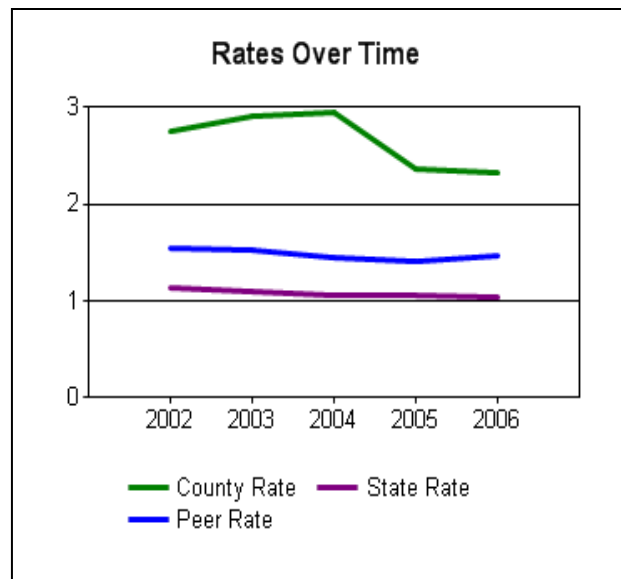
Category Clinical Care	Health Care Access & Utilization
Indicators	Primary and Mental health care provider rates, % of adults with no doctor, % adults getting routine health care
Why is this important?	<p>Health insurance by itself does not ensure access. It is also necessary to have comprehensive coverage, providers that accept the individual's health insurance, relatively close proximity of providers to patients, and primary care providers in the community. Additional barriers include: lack of transportation to providers' offices, lack of knowledge about preventive care, long waits to get an appointment, low health literacy, and inability to pay the high-deductible of many insurance plans and/or co-pays for receiving treatment.</p> <p>Evidence shows that a higher density of primary care providers is associated with lower probability of hospitalization for ambulatory-care sensitive conditions. Therefore, a community can improve its potentially preventable hospitalization rates through increasing access to high quality primary health care providers. [MATCH County Ranking]</p>

Psychologists per 10,000 Population



Source: NC CATCH

Psychological Associates per 10,000 Population

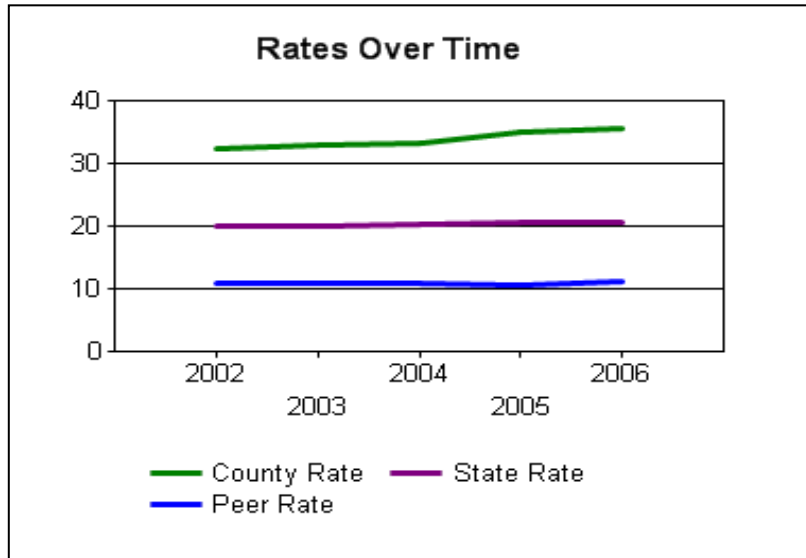


Source: NC CATCH

The number of psychologists, as well as psychological associates, remains above both the state and peer county rates (Randolph, Burke, and Davidson). Not shown are rates among the counties in Western NC, which are also below the rates in Buncombe.



Physicians per 10,000 Population



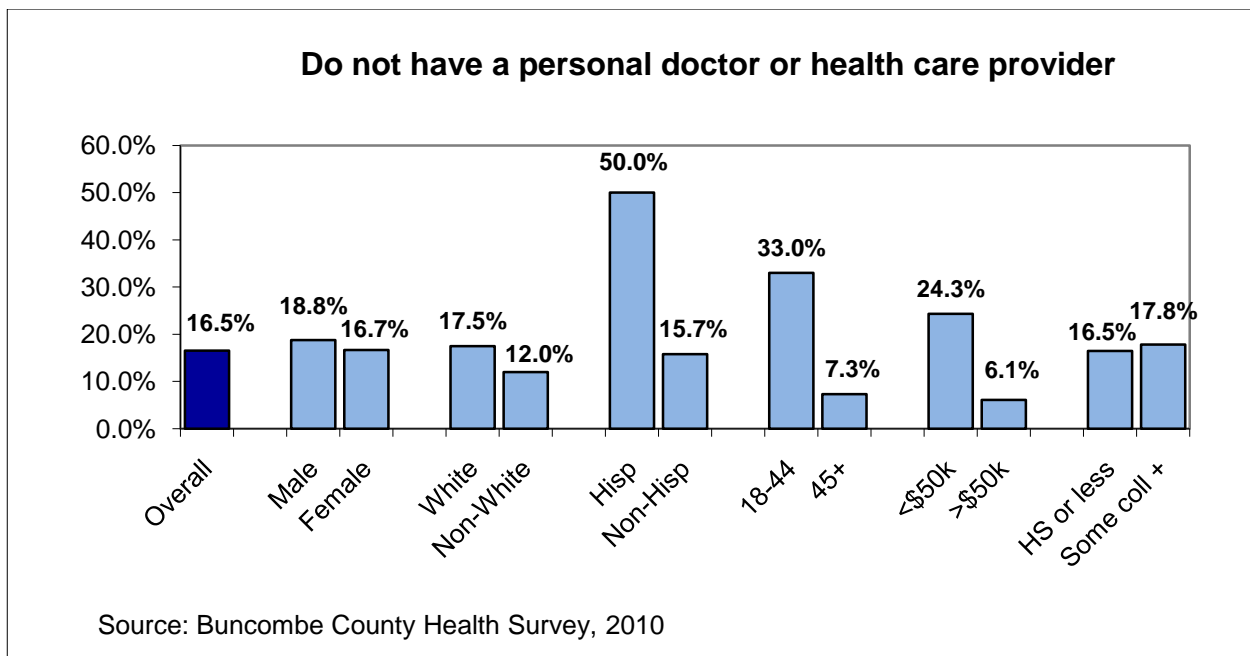
Source: NC CATCH

Health Opinion Survey Findings

Ranked #1: Making sure everyone has a doctor they can see when they are sick (Medical Care Home)



Local Health Survey



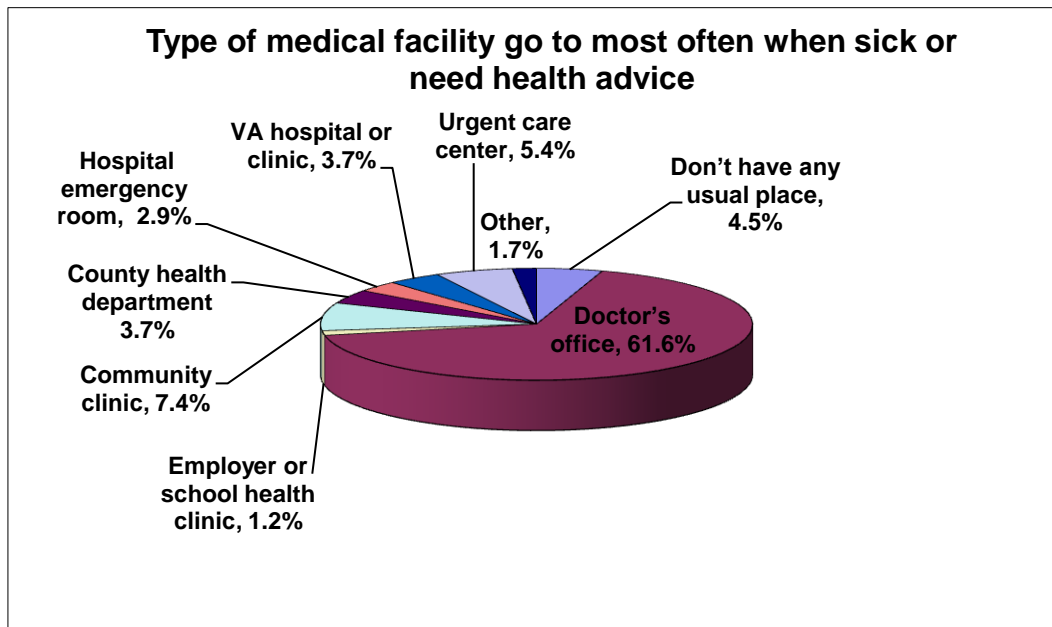
Source: Buncombe County Health Survey, 2010

Overall, 16.5% of those surveyed report not having a personal doctor, with higher percentages among those who are younger and those with less income. Fifty percent of Hispanics report not having a doctor or health care provider. Data indicates that Buncombe has more physicians than NC or counties that are similar (peer counties); yet there are still many people who don't have a regular doctor. On the pages that follow, there are more survey questions that offer results that support cost and lack of insurance as the biggest barriers to accessing medical care.



Health Care Access & Utilization

Local Health Survey



Source: Buncombe Local Health Survey, 2010

Among survey respondents, 62% of Buncombe adults report going to a doctor's office, and approximately 23% report going to some type of clinic or urgent care center. However, 4.5% report that they **don't have a place to go** when they are sick or need medical advice. Additionally, 2.9% report going to Hospital Emergency Room, which is not an appropriate or cost-effective use of that resource for someone who is sick or needing medical advice. Therefore, it could be interpreted that over 7% do not have a usual place to go when they are sick.

Assessing whether someone has a place to go to get health care has been included on each local health survey since 2000. In 2000, only 2.88% reported "don't have a place to go"; by 2005 the measure increased to 5.31%, compared to 2010 results of 4.5%, which indicate some improvement.

Over the years, our community has committed time and resources addressing this issue and has aligned community resources to improve access to medical care but there are barriers such as health insurance that continue to be a barrier that isn't easily resolved at the local level.

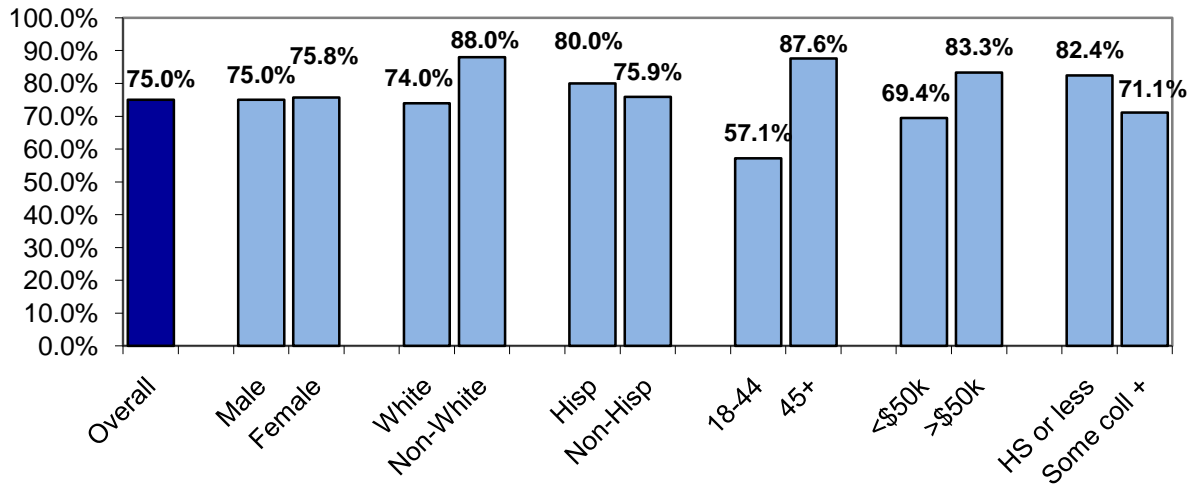
"Everyone has a doctor they can see when they are sick" is currently considered a national health policy priority. Also, our local health opinion survey ranked having a doctor as the #1 health priority. Local survey results may indicate that of the Buncombe County population, possibly 10,300 people don't have a place to go when they are sick.



Health Care Access & Utilization

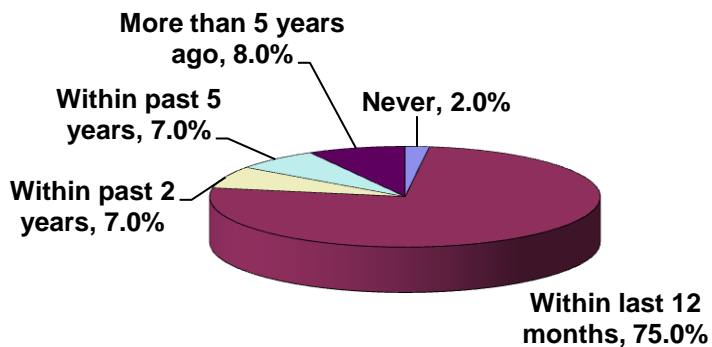
Local Health Survey

Have had a routine checkup within the past year



Source: Buncombe County Health Survey, 2010

Last time visited health provider for a routine checkup

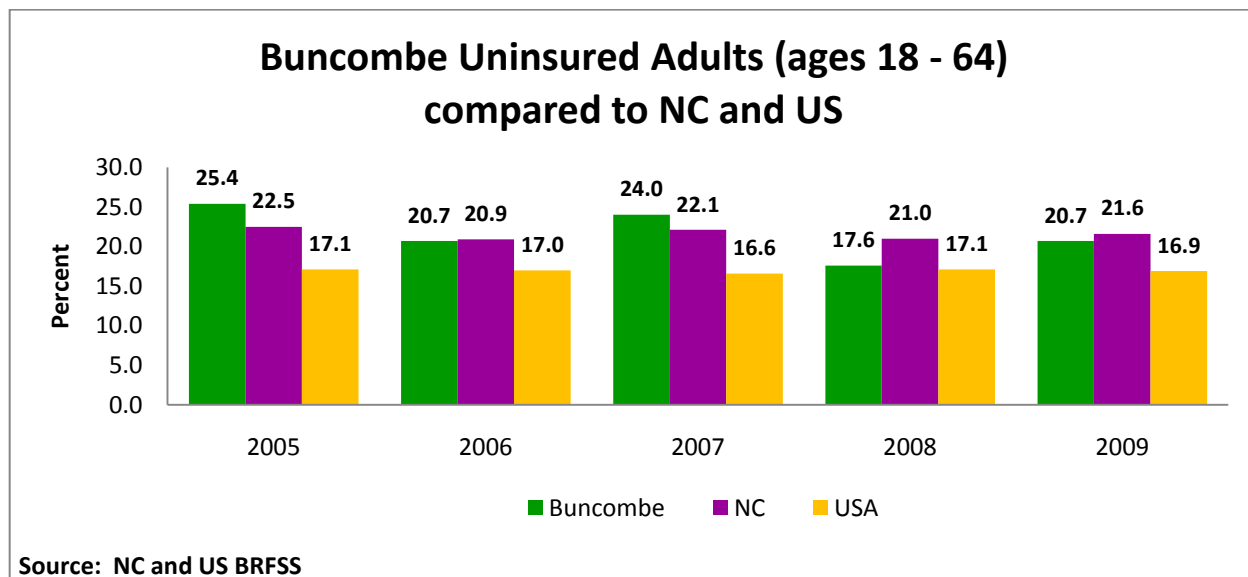


Overall, 3 out of 4 of those surveyed report getting a checkup in the past year. If we adjusted for age, however, the results would be even lower. Eighty-seven percent of people over age 45 have been for a checkup within the past year, compared to only 57% of adults less than 44 years of age.

Checkups are encouraged to increase early detection of disease or even prevent conditions before they start. 1 out of 10 report either never getting a checkup or having been more than 5 years ago, most likely due to lack of health insurance. <http://www.cdc.gov/family/checkup/>



Category Clinical Care	Affordability and Health Insurance
Indicators	% uninsured adults, % of adults wanting care but didn't get it
Why is this important?	<p>Evidence shows that uninsured individuals experience more adverse outcomes (physically, mentally, and financially) compared to insured individuals. The uninsured are less likely to receive preventive and diagnostic health care services, are more often diagnosed at a later disease stage, and on average receive less treatment for their condition compared to insured individuals.</p> <p>At the individual level, self-reported health status and overall productivity are lower for the uninsured. The Institute of Medicine reports that the uninsured population has a 25% higher mortality rate than the insured population.</p> <p>Ethnic minorities are more likely to be uninsured than non-Hispanic whites. Employment-based coverage is the largest source of health coverage in the U.S., and many unskilled, low paying, and part-time jobs do not offer health coverage benefits. In general, employment status is the most important predictor of health care coverage in the U.S. Within the employer framework, racial disparities exist that are important to address. [MATCH County Ranking]</p>



NC and US BRFSS is a randomized telephone survey. It's important to note that cell phones are not included in this survey and therefore the survey responses do not represent the population who only use cell phones.

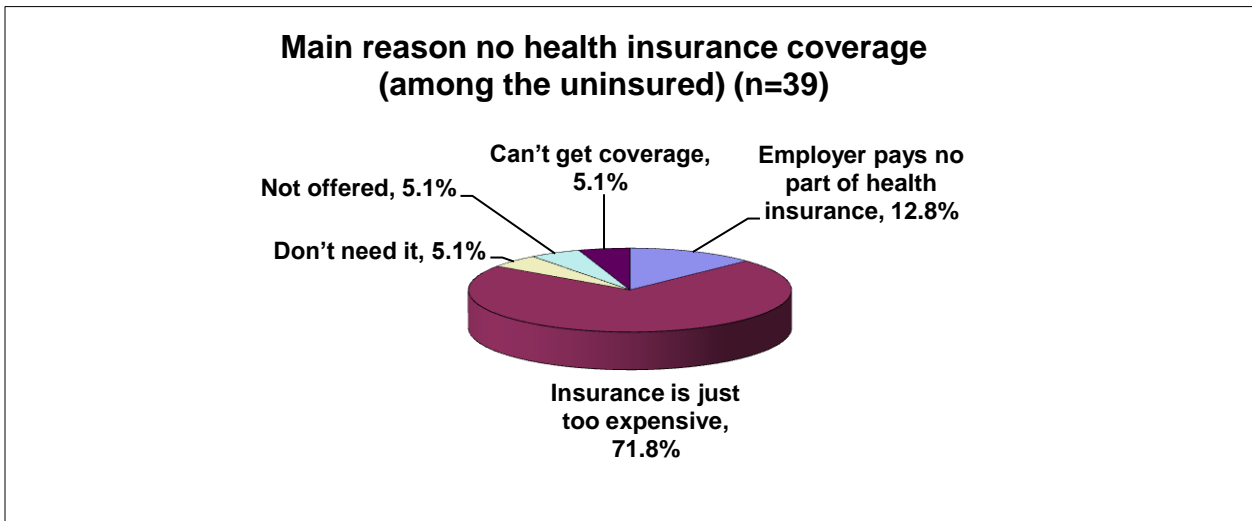
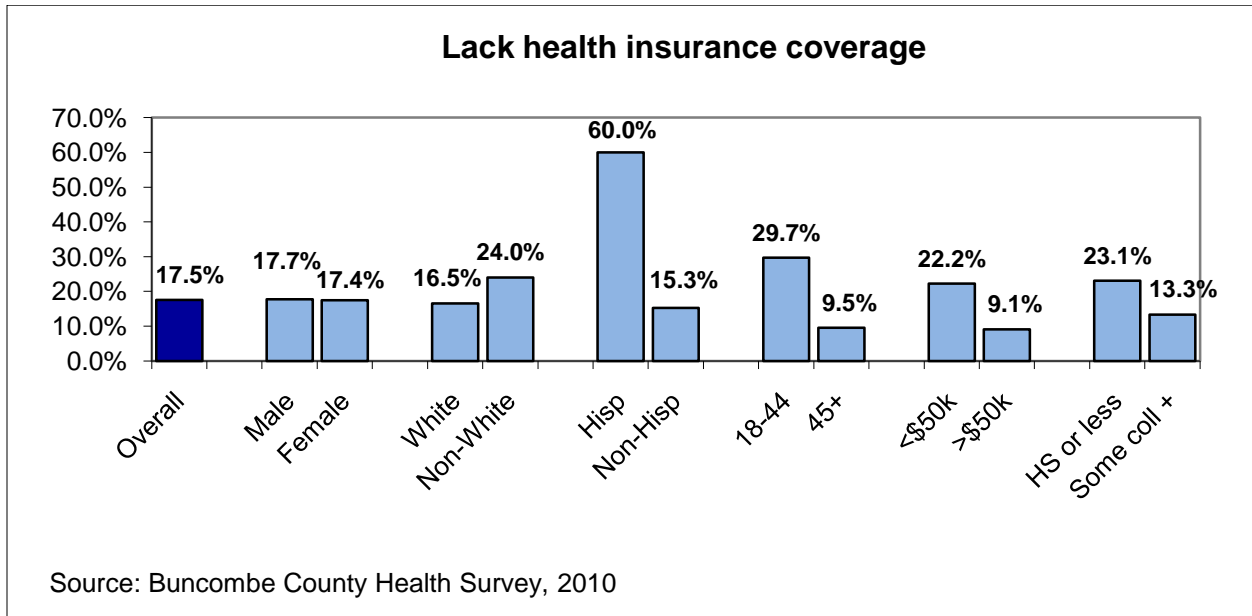
By focusing on adults, ages 18 – 64, the measure offers a better understanding of uninsured population in Buncombe County because most adults age 65 and older have Medicare insurance. During the past two years, uninsured adults in Buncombe County have been just below NC rates while still higher than the US rate of uninsured adults. In 2005, 1 in 4 Buncombe adults (ages 18 – 64) didn't have insurance. By comparison, 1 in 5 didn't have insurance in 2009.



Affordability and Health Insurance



Local Health Survey



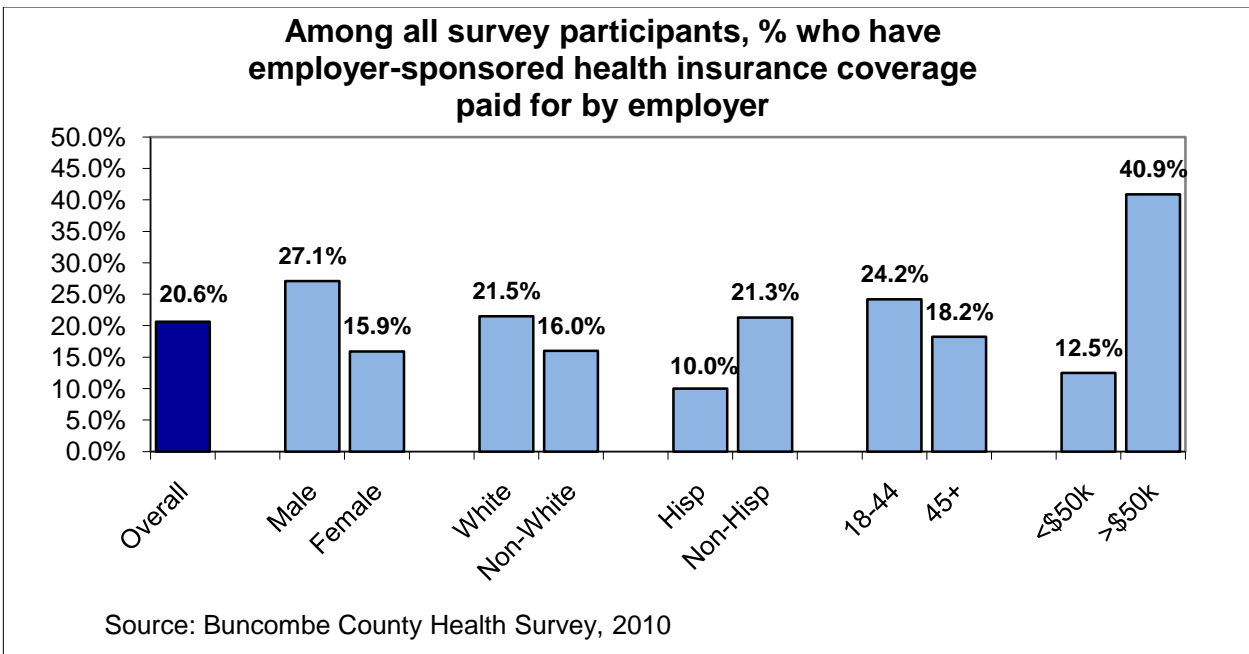
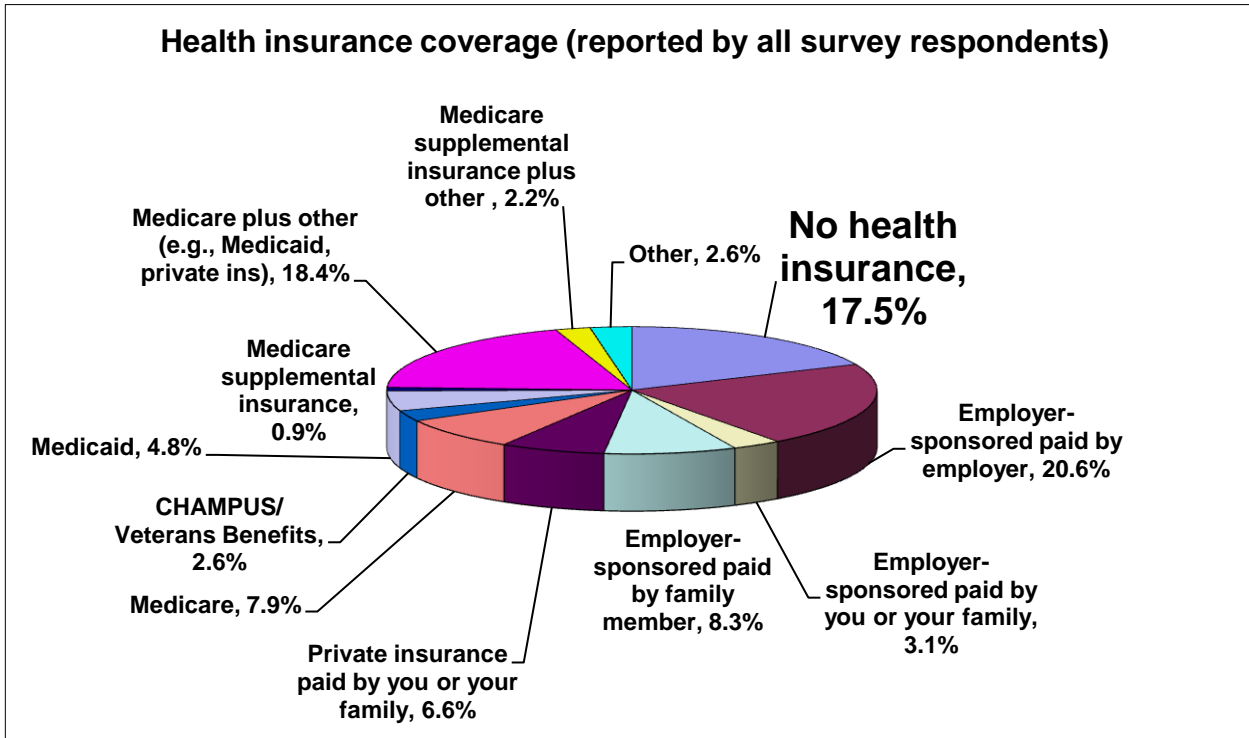
Source: Buncombe County Health Survey, 2010

Among all adults in the local survey, **17.5% report having no health insurance**. Of all groups, Hispanics were most likely to be uninsured (60%). Others more likely to be uninsured include younger people, non-whites, and those with lower income and education. Conversely, less than 1 in 10 adults over 44 are without insurance and most are likely between the ages of 44 – 64 (before they are eligible for Medicare Insurance).

Nearly 85% attribute lack of insurance to the cost or that employer pays no part of insurance (and therefore cost is a factor). 5% report they can't get coverage, and just as many report they don't feel that they need health insurance.



Local Health Survey



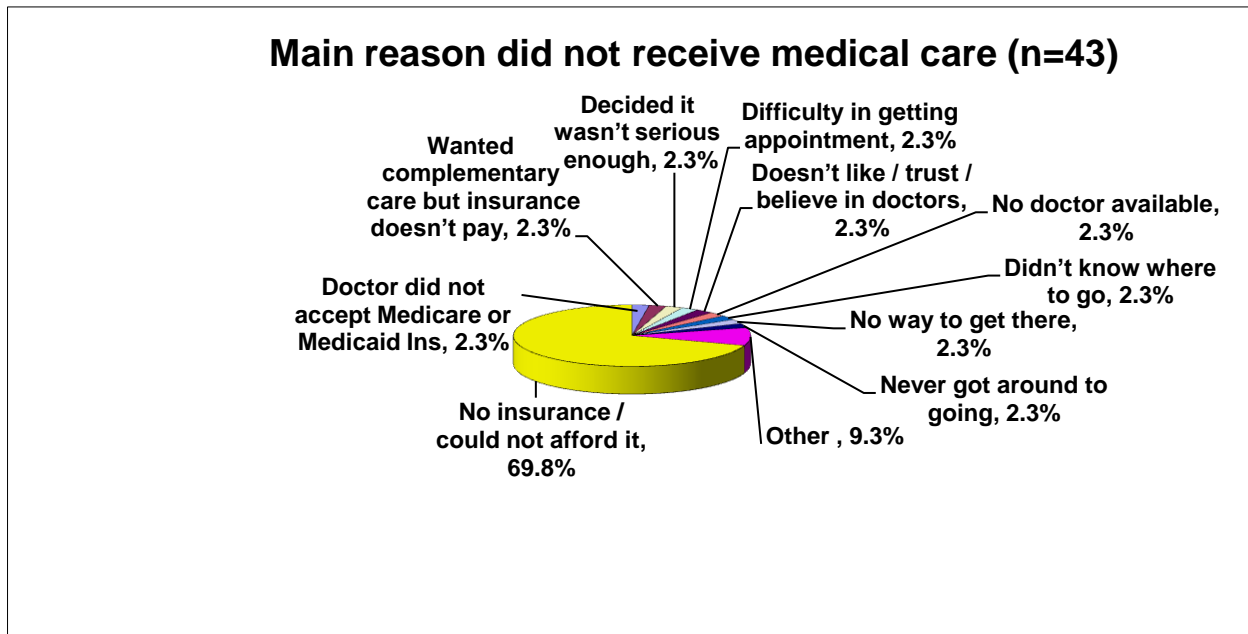
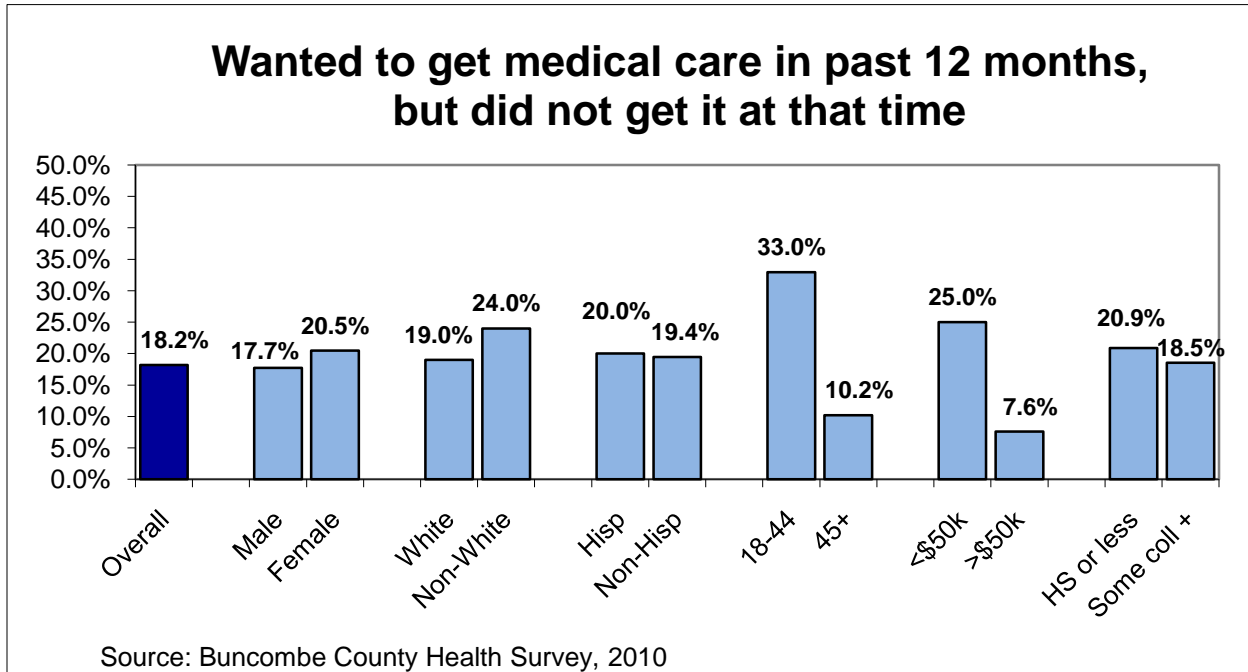
We asked all survey respondents to describe types of insurance they have, if any. The pie chart depicts the types of health insurance (or lack of) that people put together to pay for medical care.

1 in 4 people between the ages of 18 – 44 have insurance paid by their employer and another 11% pay for health insurance sponsored by their employer. Over 17% don't have insurance and the remaining have other forms of health insurance.



Affordability and Health Insurance

Local Health Survey



Source: Buncombe Local Health Survey, 2010

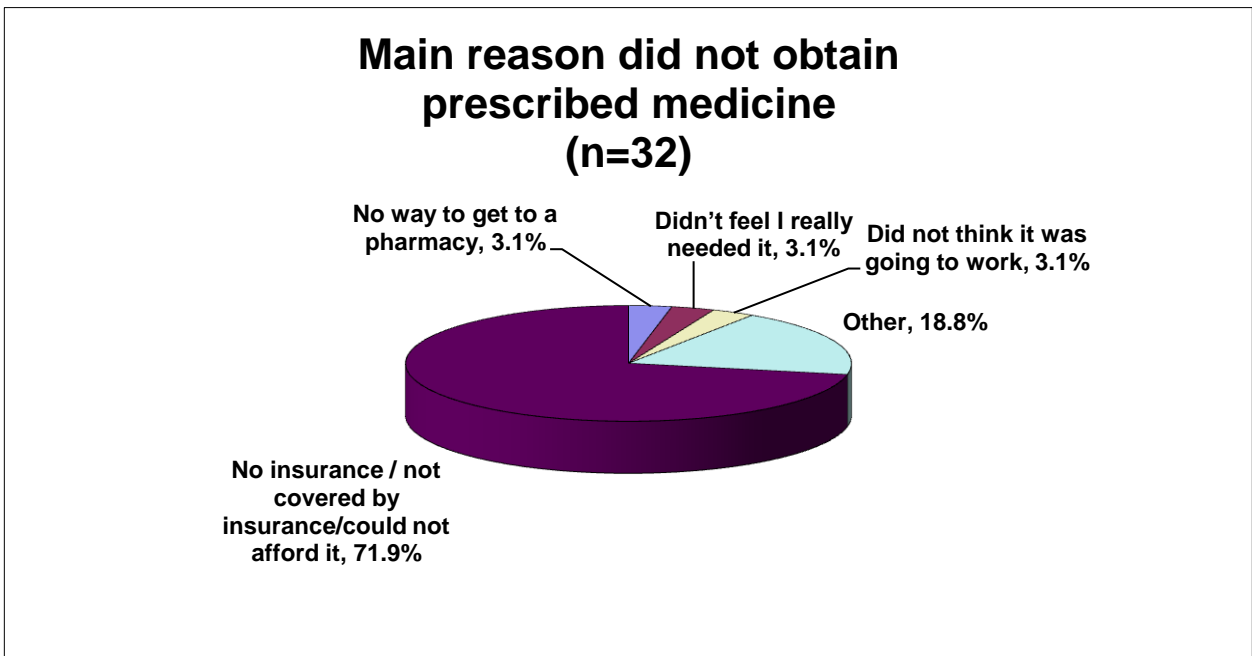
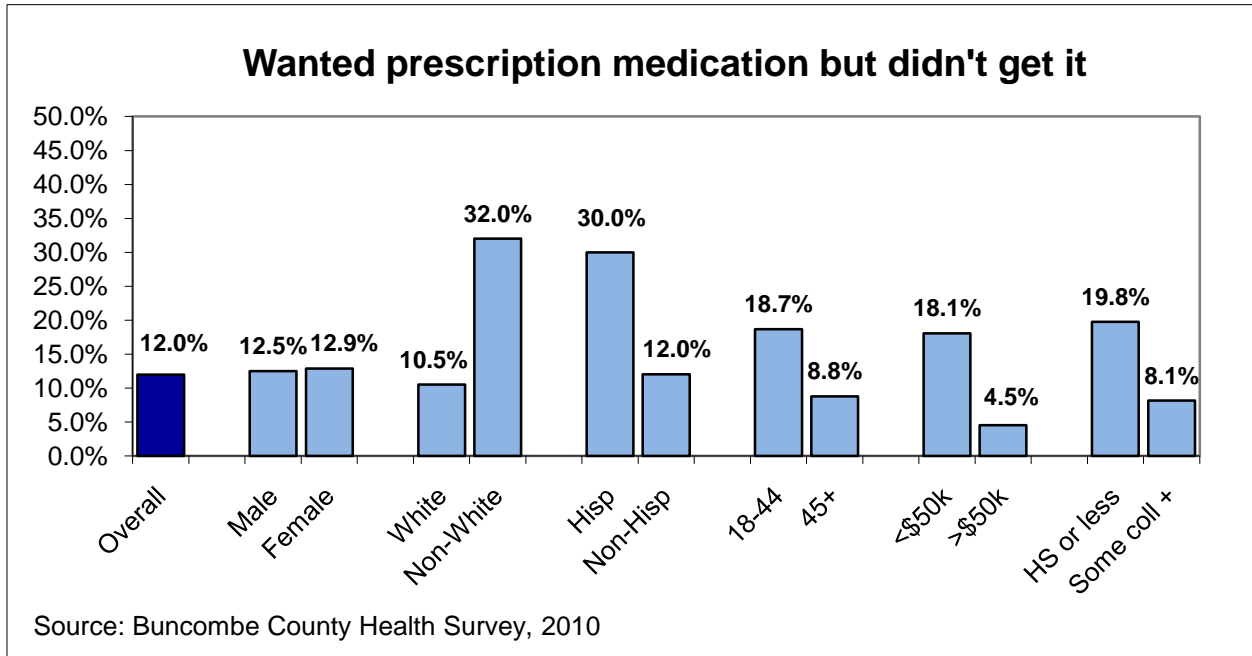
Overall, 18.2% of survey respondents reported wanting medical care in past year but didn't get it. The results increase to **1 in 3 younger adults (18-44) reporting they didn't get the medical care they wanted** in the past year. Others who reported the same are those with less income and non-whites. Approximately 7 out of 10 people reported lack of insurance as the primary reason.



Affordability and Health Insurance



Local Health Survey



Source: Buncombe Local Health Survey, 2010

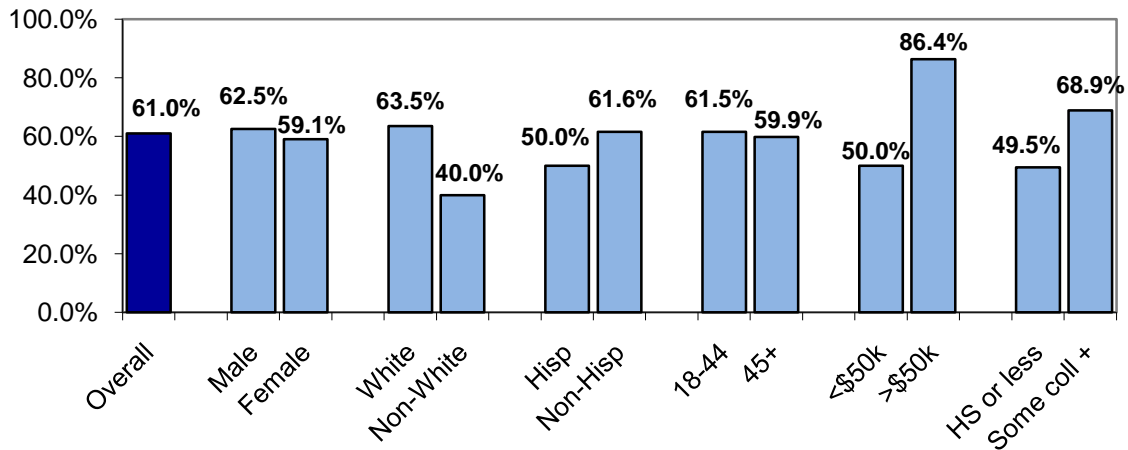
Overall, fewer people participating in the survey report wanting prescription medicine but not getting it, possibly attributable to the fact that fewer young people take prescription medicines and are therefore not needing them. However, when observing selected populations, nearly 1 in 3 non-whites, as well as Hispanics, wanted medication in the last year but didn't get it. Over 70% report lack of insurance and cost as the main reasons.



Affordability and Health Insurance

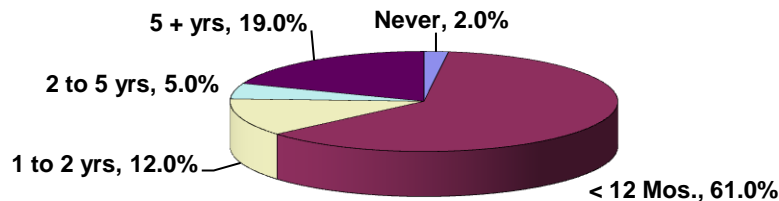
Local Health Survey

Had teeth cleaned by a dentist or dental hygienist within the past year



Source: Buncombe County Health Survey, 2010

Length of time since last teeth cleaning by a dentist or dental hygienist



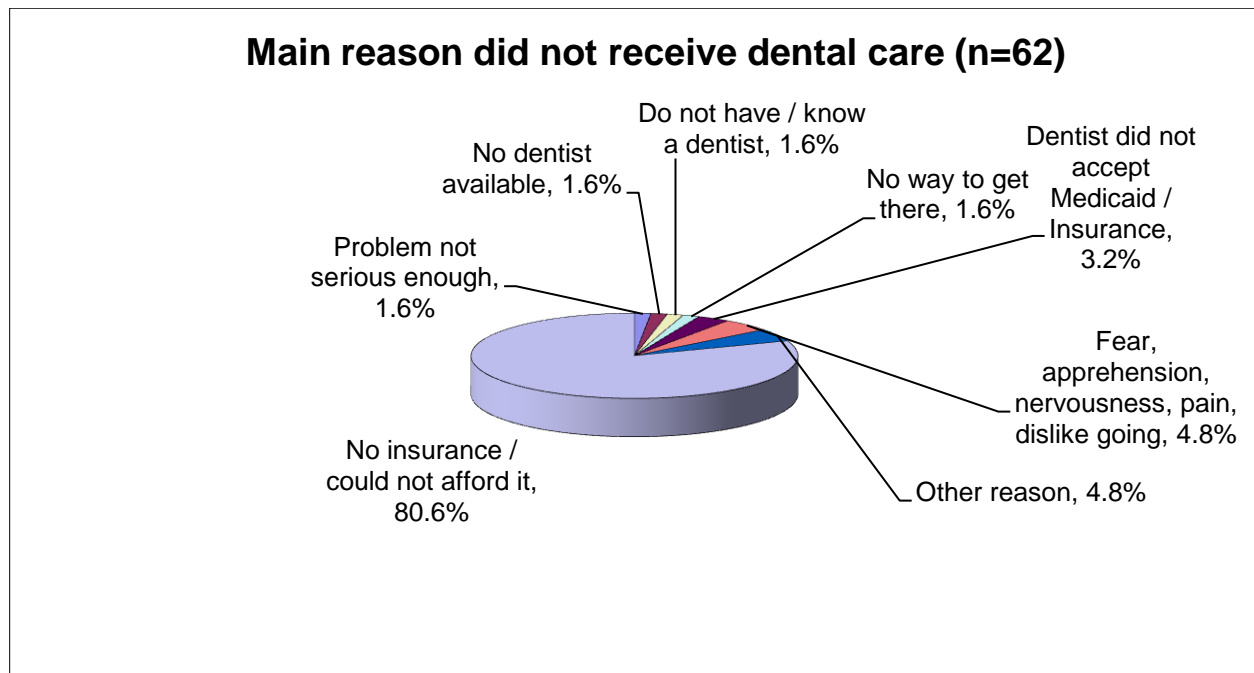
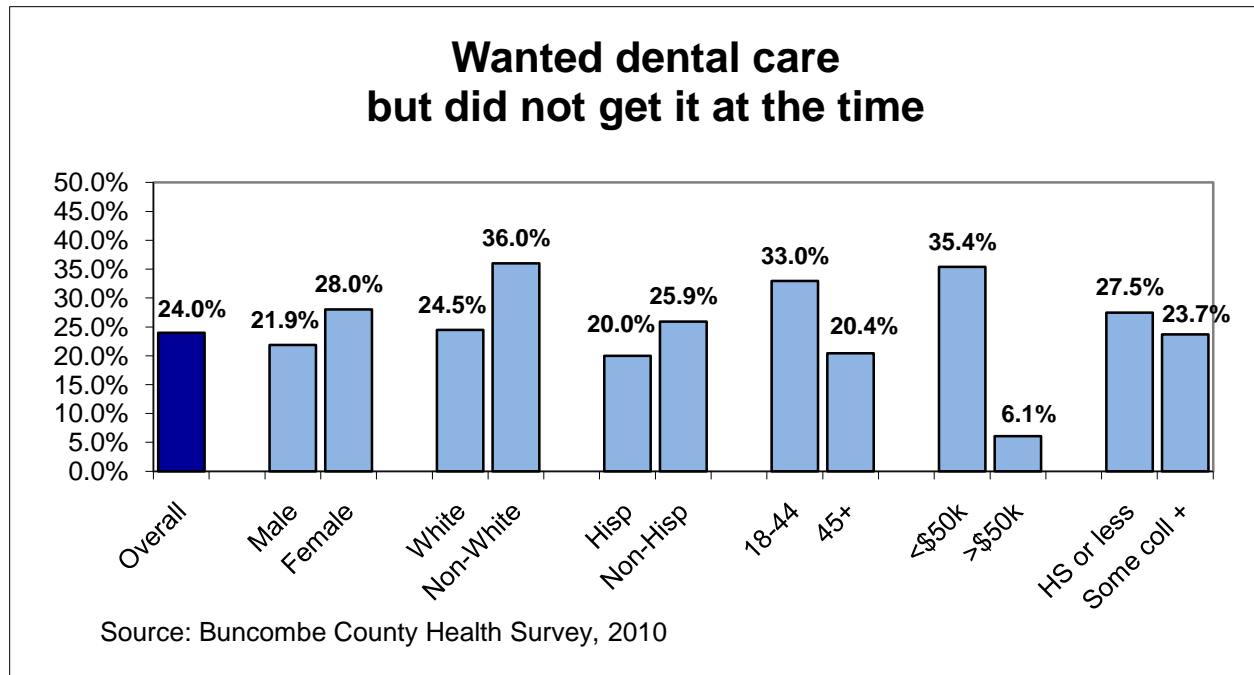
Overall, 62% of survey population report getting their teeth cleaned in past year and among most subpopulations, at least 50% get their teeth cleaned at least annually. The exception is among non-white, of whom 40% report annual visits to get their teeth cleaned.

Over 1 in 5 report either never visiting the dentist/dental hygienist to get teeth cleaned or that it has been longer than 5 years. The actual recommendation for normal teeth cleaning is every 6 months.



Affordability and Health Insurance

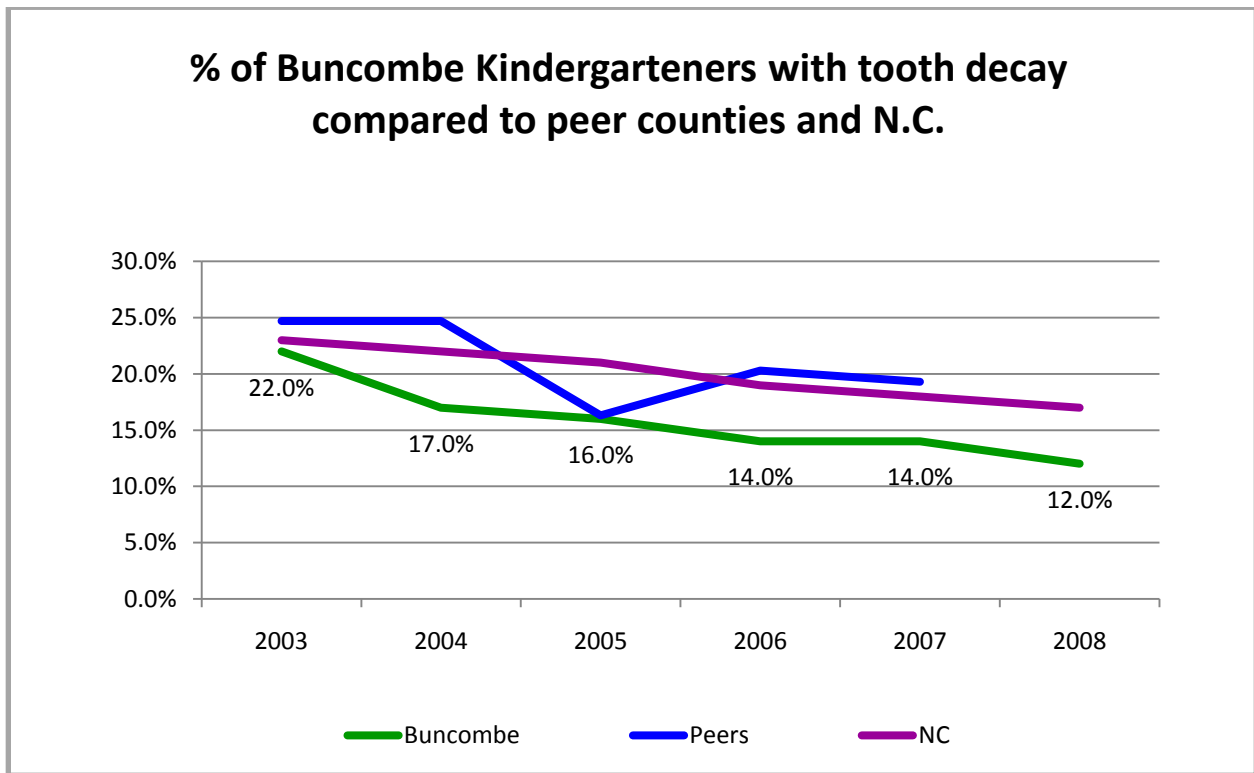
Local Health Survey



Nearly 1 in 4 of survey participants report wanting to get their teeth cleaned but did not (in past year). Over 80% attribute not getting dental care when they wanted it to lack of dental insurance or costs. We observe disparities among non-whites and younger adults, as well as those with less income. Only 6% of those with incomes greater than \$50,000 reported wanting dental care but not getting it.



Affordability and Health Insurance



Source: NC CATCH (2003 – 2007), DHHS Oral Health Section (2008);

Peer Counties: Davidson, Burke, Randolph

Note: Dental Assessment data is gathered by a Public Health Dental Hygienist, employed by Buncombe County Department of Health, who screens all Kindergarten children for tooth decay. This is very reliable data since it is gathered for ALL kindergarten children in both city and county school systems.

The percentage of Buncombe County kindergarteners with untreated dental disease continues a downward trend from 22% in 2003 to 12% in 2008, lower than NC and peer counties during the five year period.

The 45% decline in tooth decay since 2003 is attributable to several factors: increased number of pediatric and general dentists who also accept Medicaid; Mission Children's Dental Program, which provides extensive restorative dental care for children; and the introduction of a preschool dental screening and referral program in 1999, supported by funding from Buncombe County Partnership for Children (Smart Start).

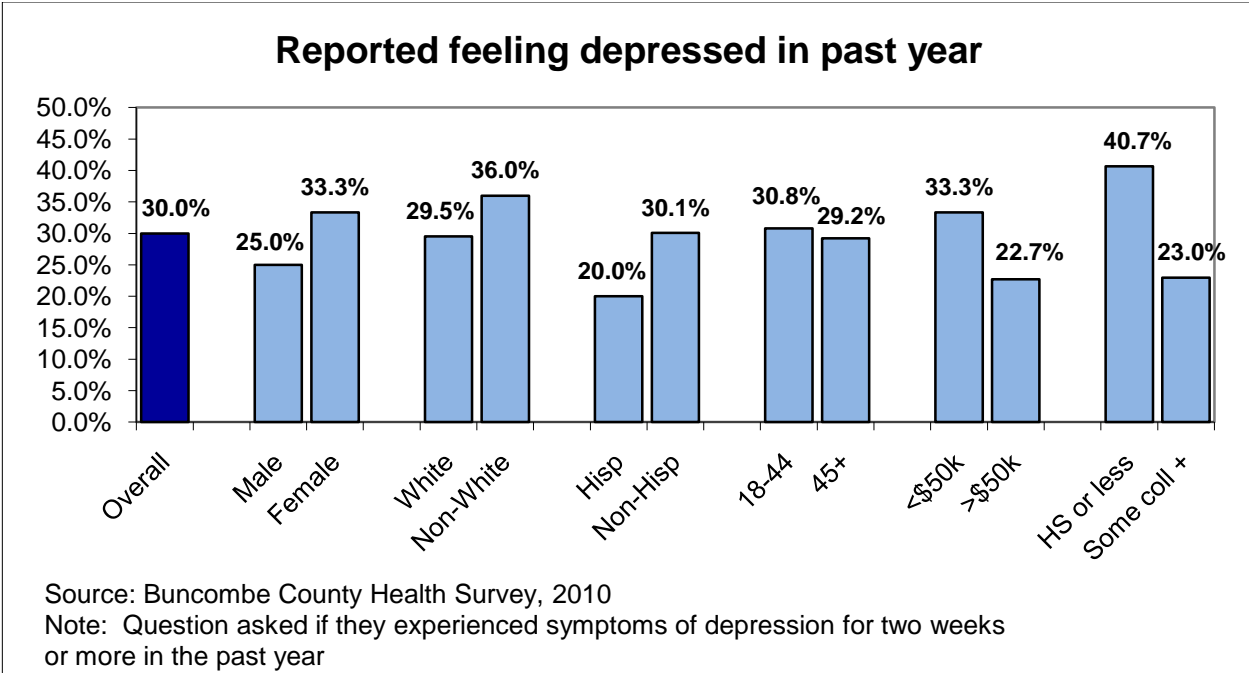
Due to budget reductions and new state priorities, the program lost funding and is no longer in operation (as of July 1, 2010). Kindergarten tooth decay will be monitored closely to determine if an increase in dental care resources is enough to sustain a 12% incidence of tooth decay among kindergarteners in Buncombe County.



Category Clinical Care	Mental Health Care
Indicators	% reporting feeling depressed; % wanting mental health care but did not get it/main reason
Why is this important?	<p>Poor mental health and drug and alcohol addictions affect millions of American workers each year, causing a monumental toll on American workplaces each year through lost productivity and health care costs.</p> <p>People with severe mental illnesses and other chronic conditions such as diabetes, asthma, heart disease, and obesity die earlier than do people without such conditions. Behavioral health conditions may not be properly addressed because of a lack of community resources and poor health insurance coverage for such conditions. The federal government — in partnership with states, communities, consumers, families, and the private sector — has responded with proposals for health care reform that include mental health care. [Center for Disease Control, 2010]</p>



Local Health Survey



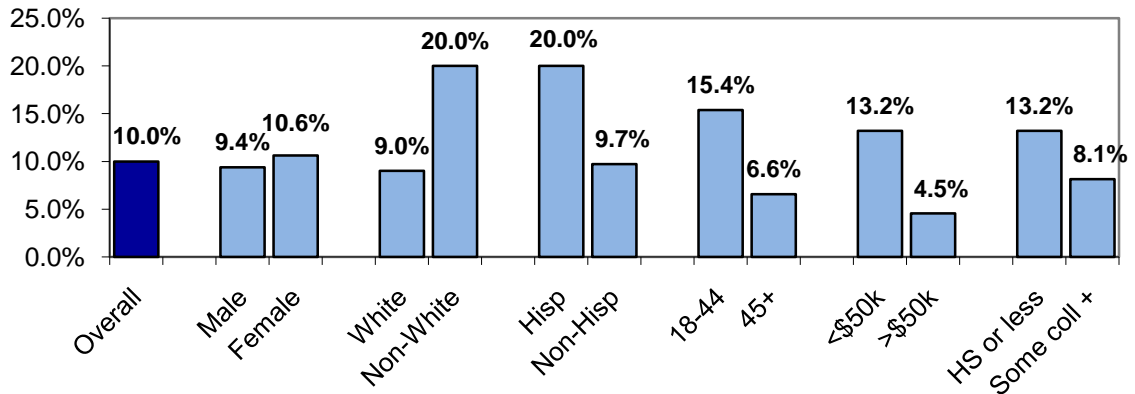
Overall, 30% of local survey respondents reported feeling depressed for more than two weeks in the past year. Results were the highest among those with an education level of high school or less (40%) followed by non-whites (36%). It is notable that 20% of Hispanics reported depression compared to 30% of non-Hispanics, and Hispanics had the lowest results among all categories of sex, race, income, education.



Mental Health Care

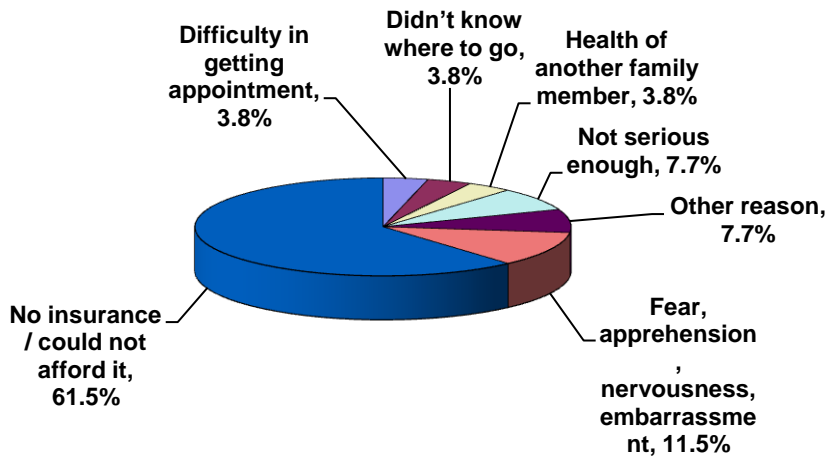
Local Health Survey

Wanted mental health care or counseling during the past 12 months but did not get it at that time



Source: Buncombe County Health Survey, 2010

Main reason did not receive mental health or counseling care (n=26)



Health Opinion Survey Findings

People commonly listed access to mental health counseling as a priority issue.

Source: Buncombe County Health Survey, 2010

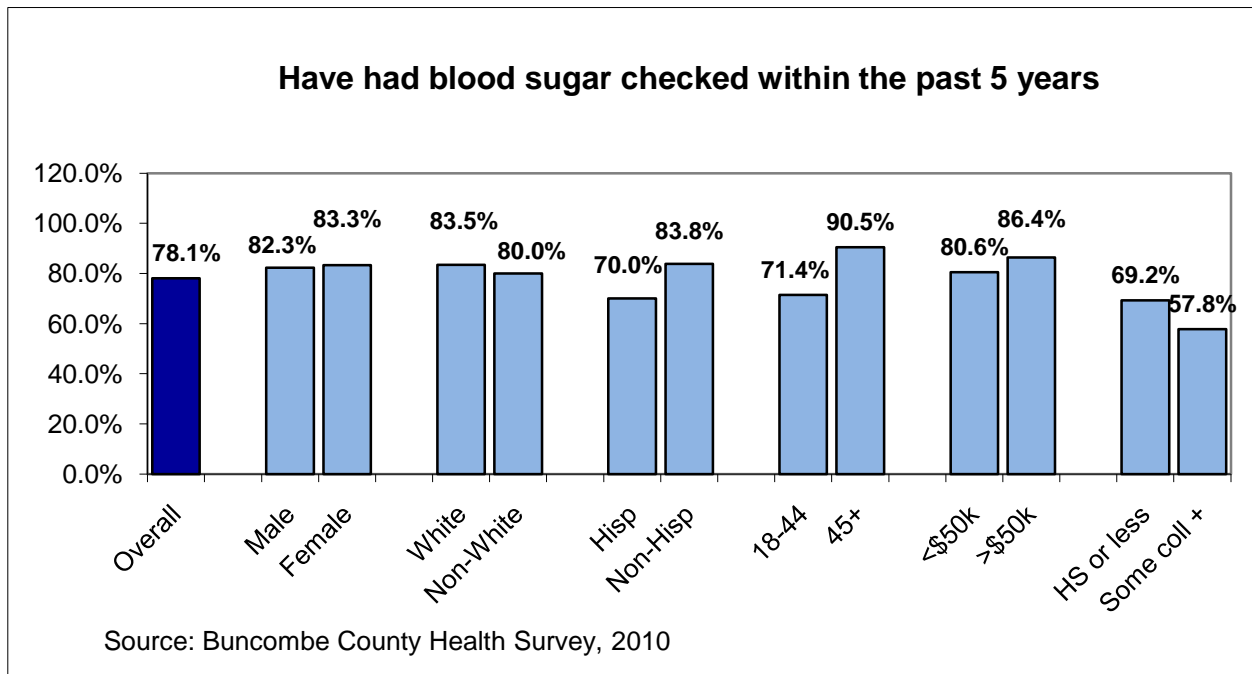
1 in 10 survey participants report wanting mental health counseling /care but didn't get it during the past year. Results were 50% higher among non-whites and Hispanics. Those with incomes over \$50,000, as well as those 45+ years of age were least likely to report wanting mental health care but didn't get it.

Health Opinion survey results found access to mental health care listed as a priority issue.



Category Clinical Care	Disease Management
Indicators	% getting blood pressure, cholesterol and diabetes screenings
Why is this important?	<p>High blood pressure, high cholesterol and diabetes increase the risk for heart disease and stroke, which are among the top leading causes of death in Buncombe County and the US.</p> <p>High blood pressure is called the "silent killer" because it often has no warning signs or symptoms, and many people don't realize they have it. That's why it's important to get your blood pressure checked regularly.</p> <p>Proper diagnosis and management of diabetes may help reduce risk of complications caused by diabetes, such as heart disease, stroke, and some cancers, as well as specific complications of diabetes such as kidney disease, blindness, and lower-limb amputations.</p>

Local Health Survey

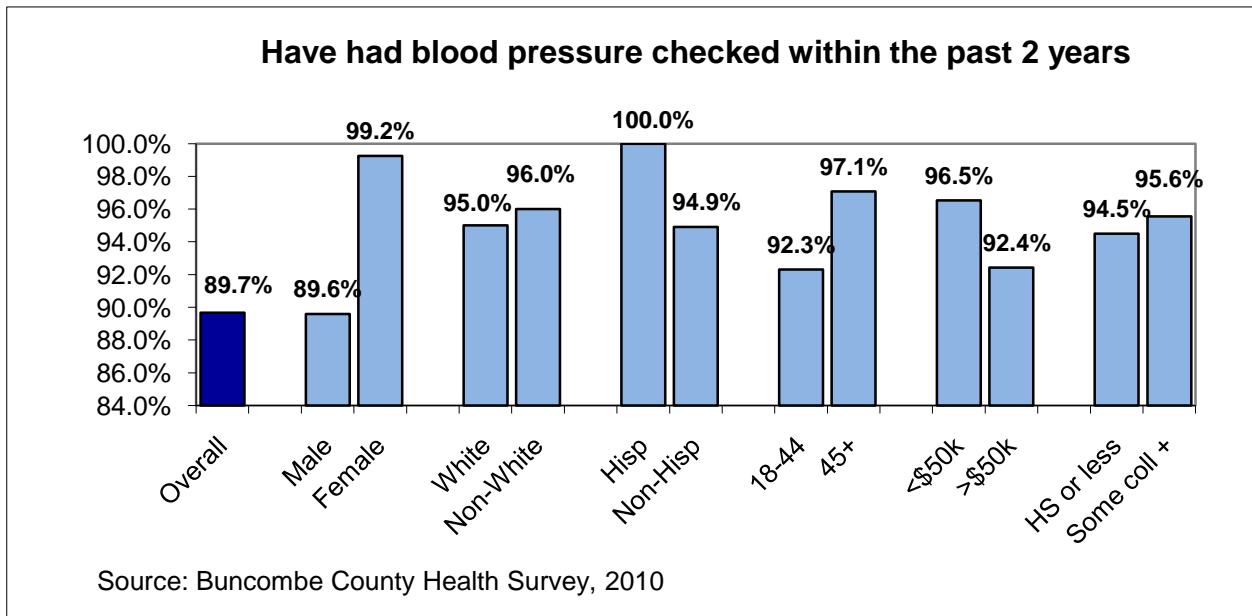
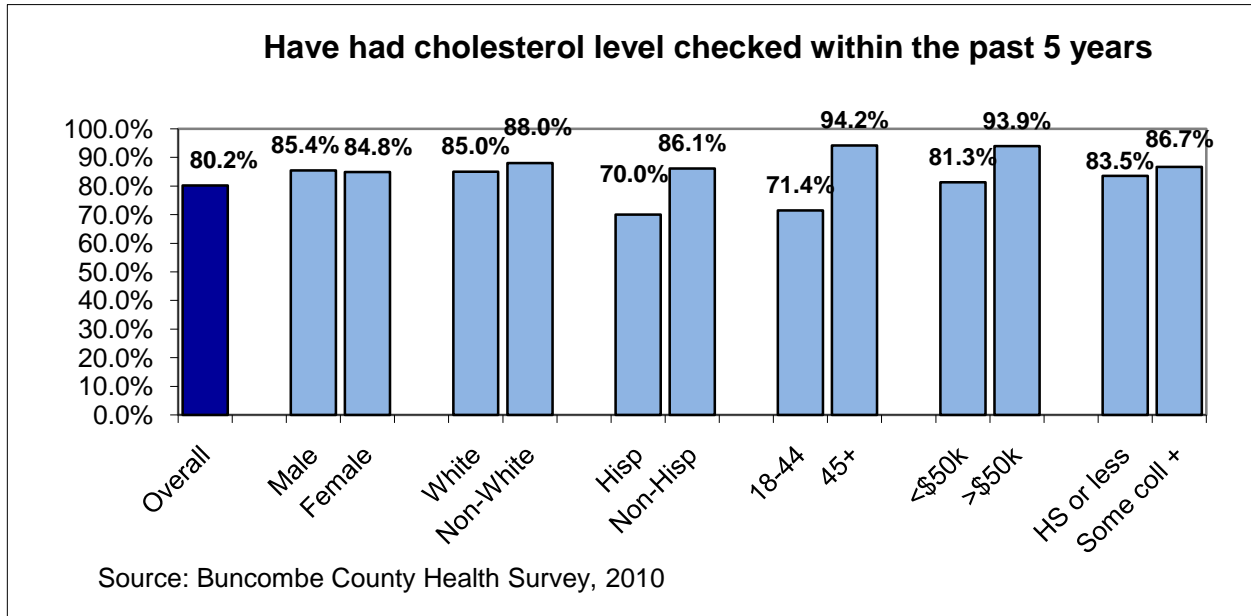


American Diabetic Association recommendation: Currently, the ADA recommends that all adults aged 45 years and older be considered for diabetes screening by their health care provider every 3 years, particularly in those who are overweight or obese. Nearly 80% of Buncombe County adults had their blood sugar checked within the past five years. The local healthy survey didn't offer three years as an answer to select. The five year measure is the closest indicator of whether adults are getting recommended diabetes screenings.



Disease Management

Local Health Survey



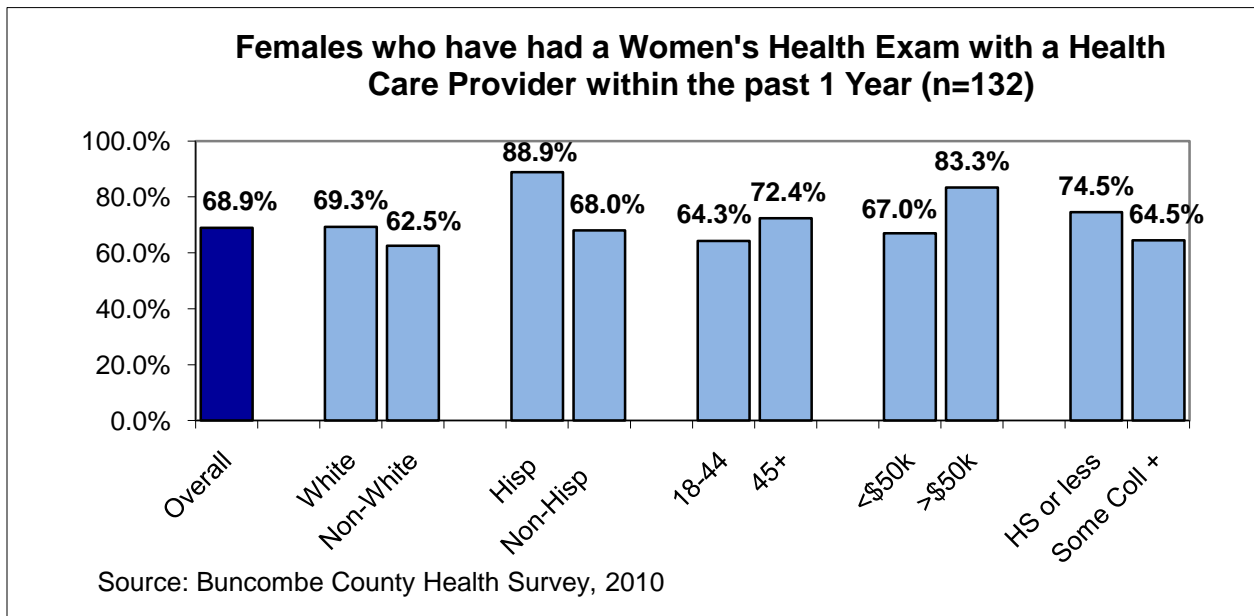
The National Cholesterol Education Program recommendation: adults should get their cholesterol checked every five years by their doctor. Over 9 out of 10 local survey respondents had their blood pressure checked within the recommended amount of time.

American Health Association Recommendation: adults should have their blood pressure checked by a doctor / health care professional at least once every two years and more often if it's high. Overall, close to 9 out of 10 local survey respondents had their cholesterol checked within the recommended amount of time.



Category Clinical Care	<h2 style="text-align: center;">Early Detection of Disease</h2>
Indicators	% of males and females getting recommended health screenings; HIV testing
Why is this important?	<p>Mammograms are the best method to detect breast cancer early when it is easier to treat and before it is big enough to feel or cause symptoms. Having regular mammograms can lower the risk of dying from breast cancer.</p> <p>Cervical cancer is the easiest female cancer to prevent with regular screening tests and follow-up. Two screening tests can help prevent cervical cancer or find it early: Pap Test and HPV (human papilloma virus) Test.</p> <p>Among the leading causes of cancer death in men, prostate cancer is second, behind lung cancer. DRE (Digital Rectal Exam) can sometimes help suggest cancers in men, especially if they have had a normal PSA test. The potential benefit of prostate cancer screening is early detection of cancer, which may make treatment more effective.</p> <p>People who are infected with HIV but not aware of it are not able to take advantage of the therapies that can keep them healthy and extend their lives, nor do they have the knowledge to protect their sex or drug-use partners from becoming infected. Because medical treatment that lowers HIV viral load might also reduce risk for transmission to others, early referral to medical care could prevent HIV transmission in communities while reducing a person's risk for HIV-related illness and death. [Center for Disease Control and Prevention]</p>

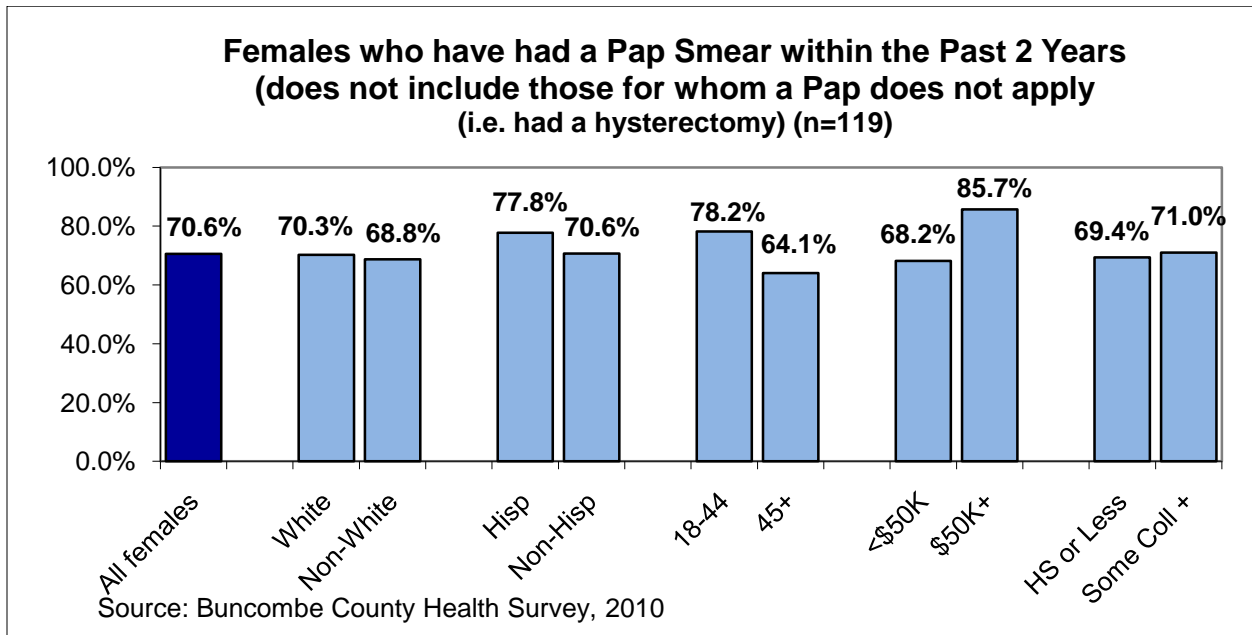
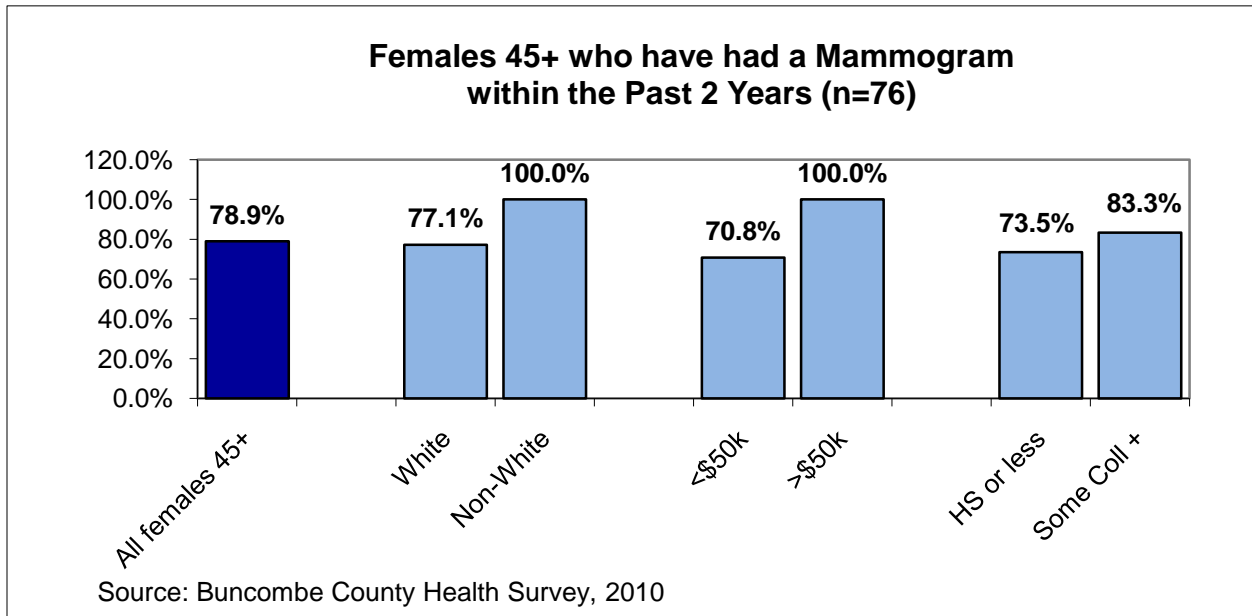
Local Health Survey





Early Detection of Disease

Local Health Survey

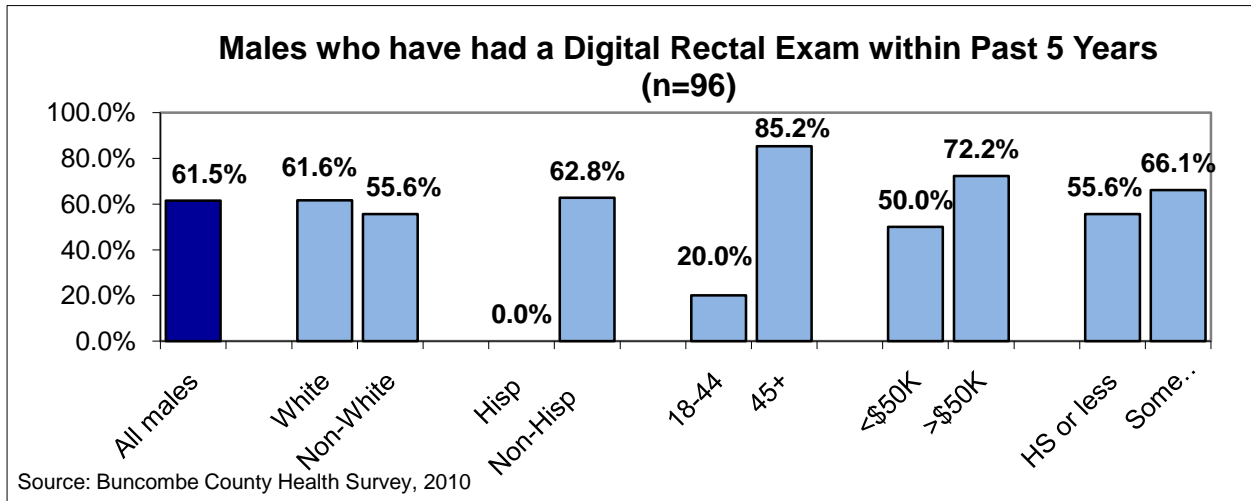


The US Preventive Services Task Force (USPSTF) recommends: screening for cervical cancer in women who have been sexually active and have a cervix. They recommend against routinely screening women 65+ years for cervical cancer if they have had adequate recent screening with normal Pap smears and are not otherwise at high risk for cervical cancer. 71% of women (excluding those for whom it doesn't apply) had a cervical cancer screening within the past 2 years. Nearly 8 out of 10 women 45+ years had a mammogram within past 2 years. 100% of non-whites had recommended mammograms, as well as women reporting income greater than \$50,000.

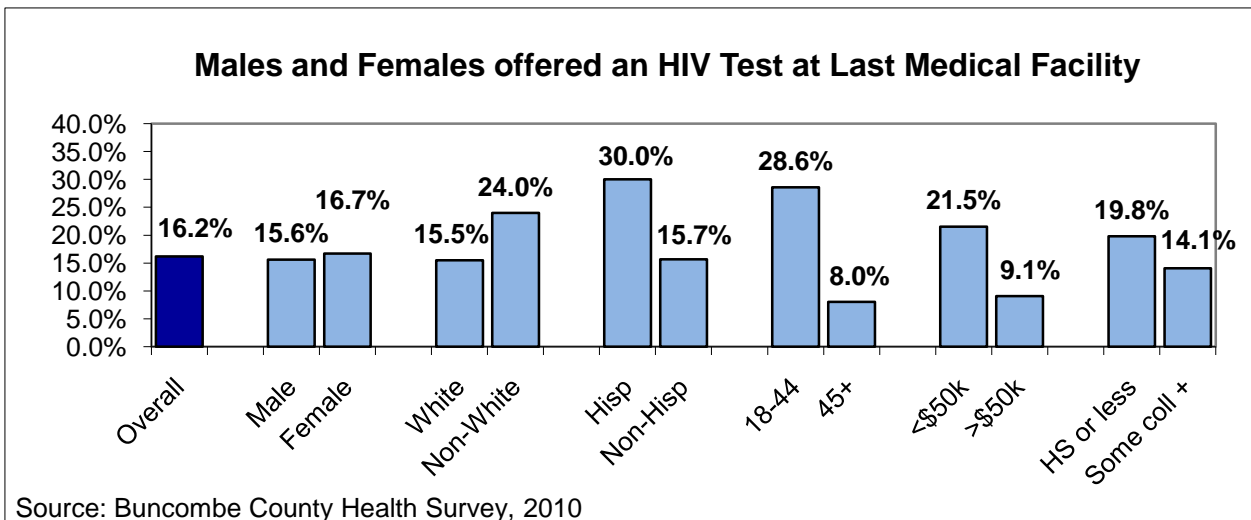


Early Detection of Disease

Local Health Survey



The potential benefit of prostate cancer screening is early detection of cancer, which may make treatment more effective. However, it is unclear if the potential benefits of a PSA screening test outweigh the known side effects of treatment. CDC recommends that all men be given information on the pros and cons before making their own decision about prostate screening. For this reason the indicator selected to monitor prostate cancer screening is the DRE (Digital Rectal Exam) rather than a PSA test. It is notable that zero Hispanics reported having a DRE. More than 1 in 3 men in Buncombe County haven't had this type of exam in over 5 years (or never).

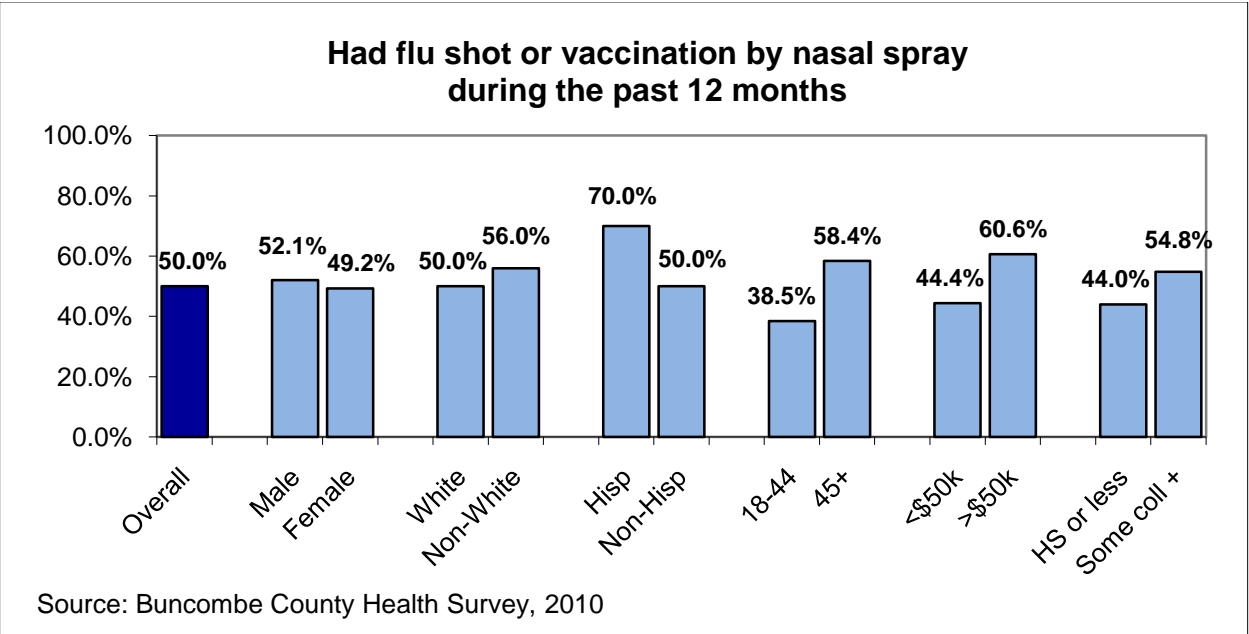


People who are infected with HIV but not aware of it are not able to take advantage of the therapies that can keep them healthy and extend their lives, nor do they have the knowledge to protect their sex or drug-use partners from becoming infected. Knowing whether one is positive or negative for HIV confers great benefits in healthy decision making. HIV testing at medical facilities is a policy initiative aimed at early detection and early treatment of HIV disease. Overall, only 16% report getting an HIV test at the last medical facility they visited. Results are higher for Hispanics (30%) and younger adults, ages 18-44 (29%).



Category Clinical Care	Flu Vaccine (adults)
Indicators	% adults getting recommended vaccination
Why is this important?	<p>Flu is a serious contagious disease that can lead to hospitalization and even death. In 2009–2010, a new and very different flu virus (called 2009 H1N1) spread worldwide causing the first flu pandemic in more than 40 years. Flu is unpredictable, but the Centers for Disease Control and Prevention (CDC) expect the 2009 H1N1 virus to spread this upcoming season along with other seasonal flu viruses.</p> <p>While everyone should get a flu vaccine each flu season, it's especially important that certain groups (people over 50, young children, those with chronic illnesses) get vaccinated either because they are at high risk of having serious flu-related complications or because they live with or care for people at high risk for developing flu-related complications. [Center for Disease Control and Prevention]</p>

 **Local Health Survey**



Center for Disease Control recommendation: a yearly flu vaccine is the first and most important step in protecting against flu viruses, especially to decrease the risk of severe flu illness for high risk persons. 50% of survey respondents report having a flu vaccine in past year. The number has increased from previous years, as indicated by local survey data (29% in 1995, 38% in 2000, 30% in 2005).



Summary of Findings

What does the data tell us?

Among Buncombe adults who participated in the **local health survey**:

Medical care & medication

- 4.5% report not having a place to go when they are sick and 2.9% report going to the ER if they are sick or need medical advice, a costly place to get health care when sick.
- 1 out of 10 report either never getting a checkup or having been more than 5 years ago.
- 1 in 3 adults between ages 18-44 report wanting medical care but did not get it, mostly due to lack of insurance or cost.
- Only 8% of adults making greater than \$50,000 report wanting to get medical care but did not get it, which correlates to the greater number among this population with medical insurance.
- Nearly 1 in 3 nonwhites and Hispanics report wanting medication but did not get it in past year, primarily attributed to cost.

Affordability and Health Insurance

- 17.5% have NO health insurance, with 85% attributing lack of insurance due to cost.
- 6 out of 10 Hispanics did not have health insurance, along with 1 out of 4 nonwhites.
- Only 25% of adults between the ages of 18 – 44 have insurance paid by their employer and another 11% pay for health insurance sponsored by their employer.

Dental care

- 62% have gotten their teeth cleaned within the past year.
- 1 in 5 adults report either never getting their teeth cleaned or that it has been more than 5 years.
- 1 in 4 reports they wanted to get their teeth cleaned in the past year but did not, over 80% site lack of insurance as the primary reason.

Mental health care

- 30% report feeling depressed (for two or more weeks) in past year.
- 1 in 10 report wanting mental health care but didn't get it in past year. Hispanics and non-whites were twice as likely to report depression as their non-Hispanic and white counterparts.

Disease Management

- Overall, 90% reported getting blood pressure and cholesterol checked at recommended intervals, while only 80% had diabetes screening following recommendations.

Early identification of disease

- 1 in 3 males haven't had a digital rectal exam for prostate cancer in over 5 years (or never).
- Nearly 8 out of 10 women ages 45+ have had mammograms within the past two years. 100% of non-whites participating in the survey had recommended mammograms.
- 71% of women (excluding those whom it doesn't apply) have had a cervical cancer screening within the past 2 years.

50% of report having a flu vaccine in past year. The number has increased from previous years, as indicated by local survey data (29% in 1995, 38% in 2000, 30% in 2005).

Buncombe County's six year average for adults who are uninsured is above the North Carolina



average (18% vs. 17%) and is also ABOVE the Target of 14%.

What do people care about?

Health opinion survey Ranks as #1 health priority: Making sure everyone has a doctor they can see when they are sick (Medical Care Home).

Where can I find more data about health care affordability, disease management and preventive health care?

BC Health Survey, 2010: <http://www.buncombecounty.org>

BC and NC BRFSS: <http://www.schs.state.nc.us/SCHS/brfss/>

US BRFSS: <http://apps.nccd.cdc.gov/BRFSS/>

NC State Center for Health Statistics: <http://www.schs.state.nc.us/SCHS/data/vitalstats.cfm>

NC CATCH (warehouse of data): <http://www.schs.state.nc.us/SCHS/catch/>

MATCH – County Health Rankings: <http://www.countyhealthrankings.org/north-carolina>