

## Use of ER/Urgent Care as a Usual Source of Care

2011 Greater Cincinnati/Northern Kentucky Child Well-Being Survey

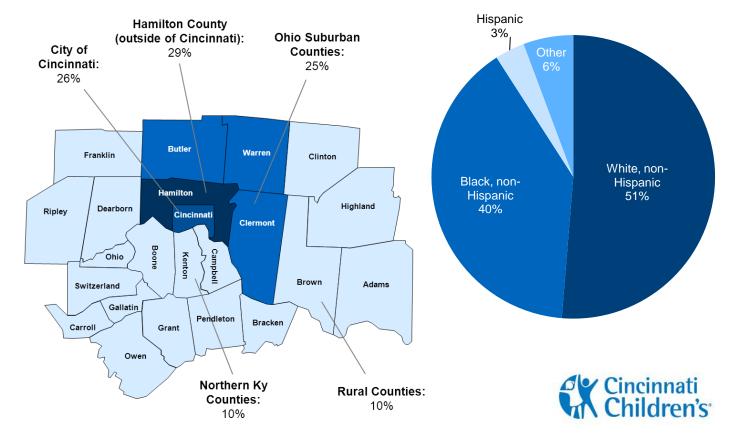
## Who relies on the ER/Urgent care for most of their medical care?

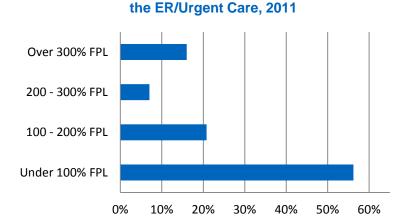
Knowing where children "usually" go for medical care allows us to know something about the quality of care that children are accessing. In general, having a doctor's office (or something similar, like a hospital outpatient clinic) as a source of primary care increases the likelihood that children are receiving continuous care

from a provider (or group of providers) who has access to their medical history. When children rely on emergency departments or urgent care centers for the majority of their health care, they are more likely to see providers who are unfamiliar with their medical history.

## Geographic distribution of children who's usual source of care is the ER/Urgent Care, 2011



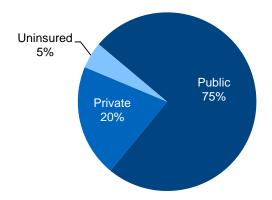




Household percentage of federal poverty level

of those whose child's usual source of care is

Insurance status and type of those who rely on ER/Urgent Care as usual source of care, 2011



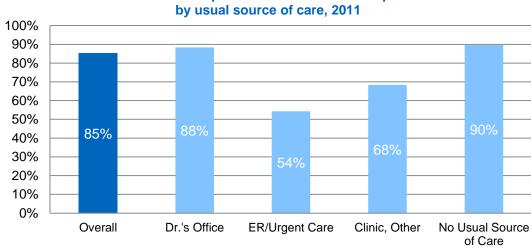
Reliance on ER/Urgent Care as a usual source of care is heavily concentrated in Hamilton County, the City of Cincinnati, and the Ohio suburban counties of Butler, Warren, Clermont. Of all of the children who rely on ER/Urgent care as their usual source of care, over three quarters are found within the City of Cincinnati, Hamilton County, or the surrounding suburban counties in Ohio.

In part, this represents differences in access to hospital emergency departments and urgent care centers, but also reflects the disproportionate reliance on ER/Urgent Care by children living in low income households, children insured by Medicaid or another type of public insurance, and children who are black, non-Hispanic, all of whom are more concentrated in and around the City of Cincinnati.

Not surprisingly, over half of the children using the ER/Urgent care as their usual source of care live in households below 100% FPL, which, in 2011, was \$22,350 for a family of four. However, 16% live in households above 300% FPL.

While Black, non-Hispanic children only made up about 14% of our sample population, they represent 40% of those using the ER/Urgent care as their usual source of care. Finally, 75% of those using the ER/Urgent care as their usual source of care are insured by Medicaid or some other kind of public insurance.

## Children who rely on an ER/Urgent Care as their *usual* source of care are less likely to have had any kind of preventive care visit within the past year



Percent who have had a preventive care visit in the past 12 months by usual source of care, 2011

> Overall, most (85%) parents said that their child had received some kind of preventive care visit within the past year. However, only about half (54%) of those who said that their child usually goes to an ER/Urgent Care center reported that their child had received a preventive care visit.

The **Child Well-Being Survey (CWBS)** is a random-digit-dial (RDD) telephone survey of primary caregivers in the Greater Cincinnati/Northern Kentucky region. Primary caregivers, usually parents, are asked questions about one randomly selected child in their household. The CWBS was previously conducted in 2000 and 2005. The 2011 sample includes 2,083 completed surveys and covers several health topics, including: general health status, chronic conditions, usual source of care, oral health and preventive dental care, screen time and physical activity, food security, and neighborhood resources. The sampling error for the 2011 CWBS is ±2.1%; the margin or error for any sub-group of the sample will be higher. The 2011 CWBS was supported by the United Way of Greater Cincinnati, the Health Foundation of Greater Cincinnati, the Center for Clinical and Translational Science and Training at the University of Cincinnati, and Vision 2015 of Northern Kentucky. For more findings from the 2011 Child Well-Being survey and past surveys visit <u>www.cchmc.org/service/j/anderson-center/health-policy/well-being/</u> or <u>www.HealthFoundation.org</u> For more information, please contact Rachel Sebastian, MA at (513) 803-2396 or rachel.sebastian@cchmc.org.