



Access to Healthcare in the United States

Final Report

Analytical Practicum Project
under guidance of
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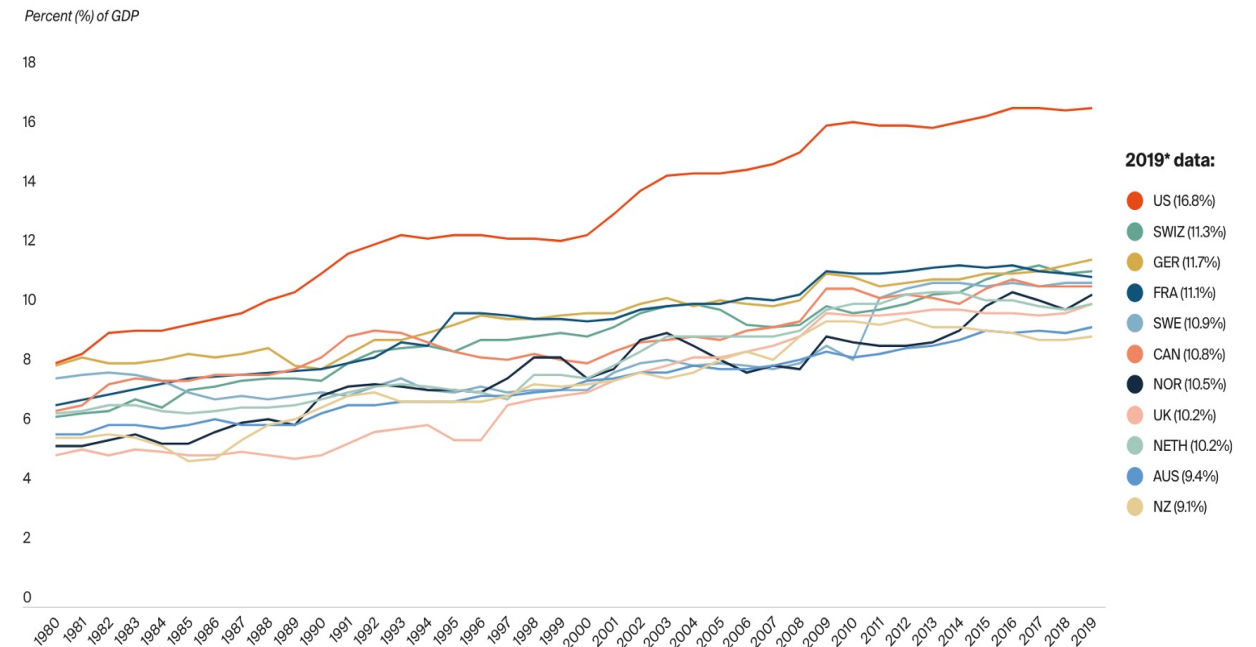
WHY ?

USA ranked 11th globally in Overall Healthcare despite of spending \$4.1 trillion

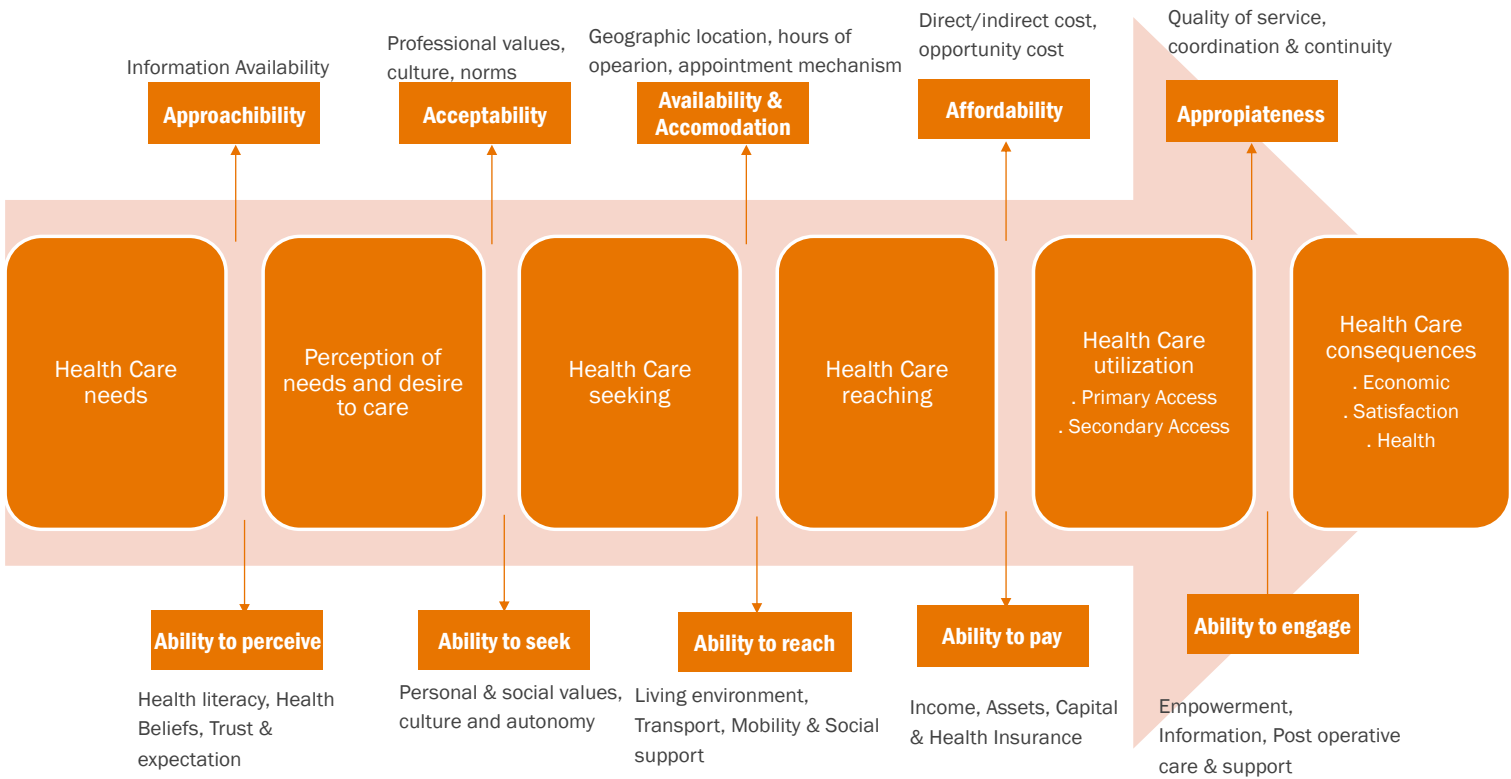
Facts:

- **1 in 10 don't have health care insurance (health.gov).**
- **14% of chronically ill U.S. adults said they did not get the support they needed (cwf).**
- **USA health care expense was \$4.1 trillion in 2020, or \$12,530 per person (cms.gov).**
- **No 1 in Maximum no of death due to corona (WHO).**

Health Care Spending as a Percentage of GDP, 1980–2019



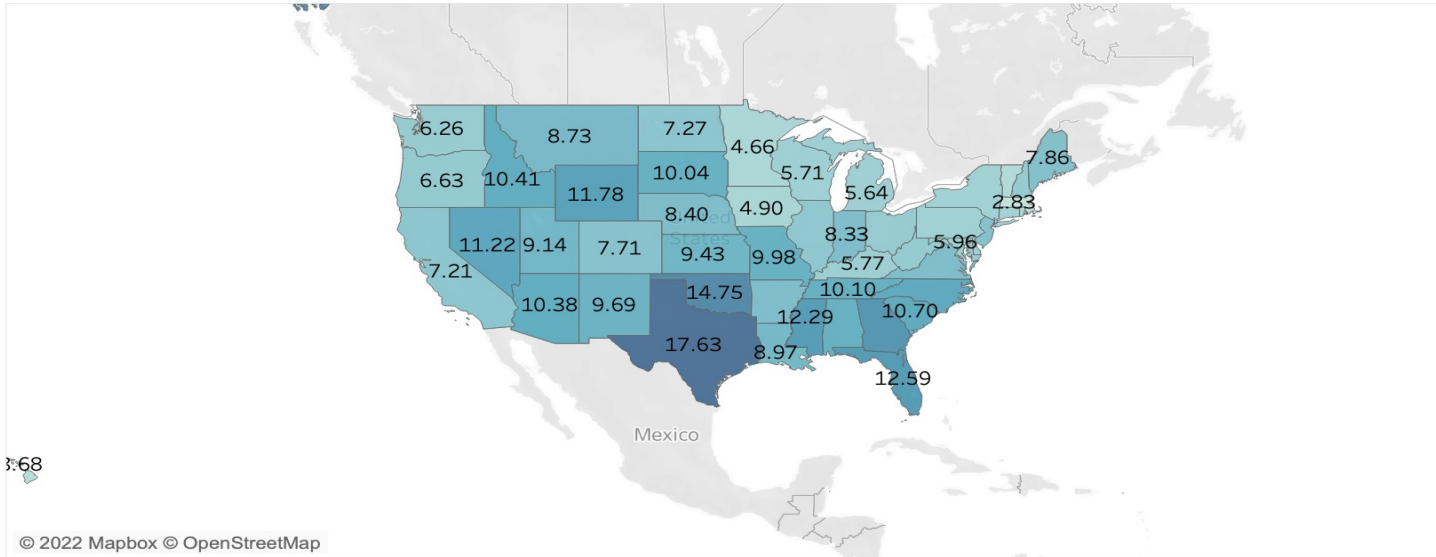
Healthcare Accessibility



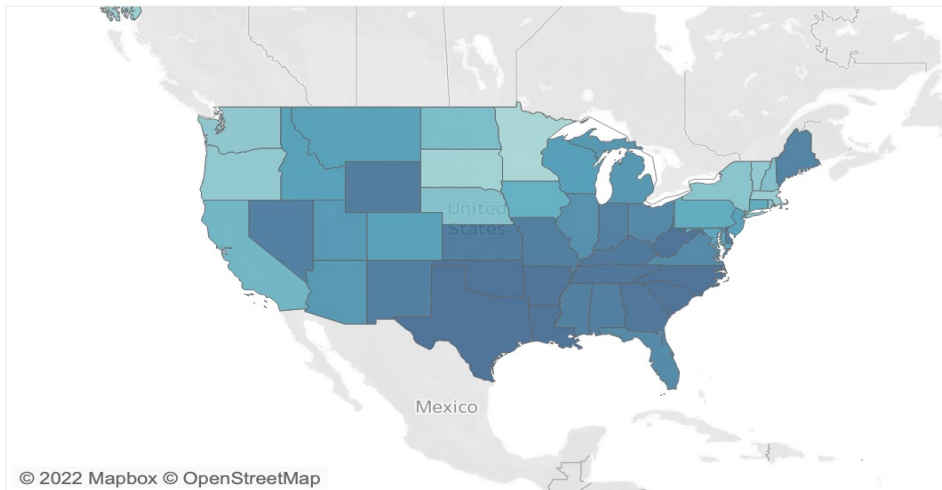
Why Healthcare is not Accessible for everyone in USA?

Uninsured Population and Medical debt Analysis

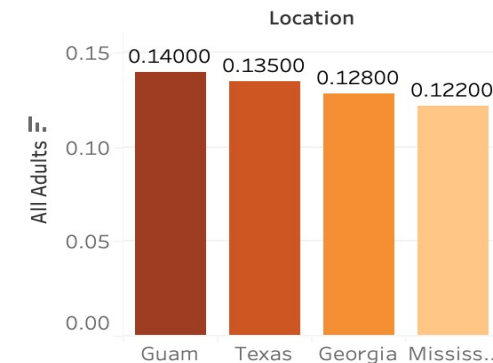
Percentage Uninsured Population



Percentage of People with Medical Debt

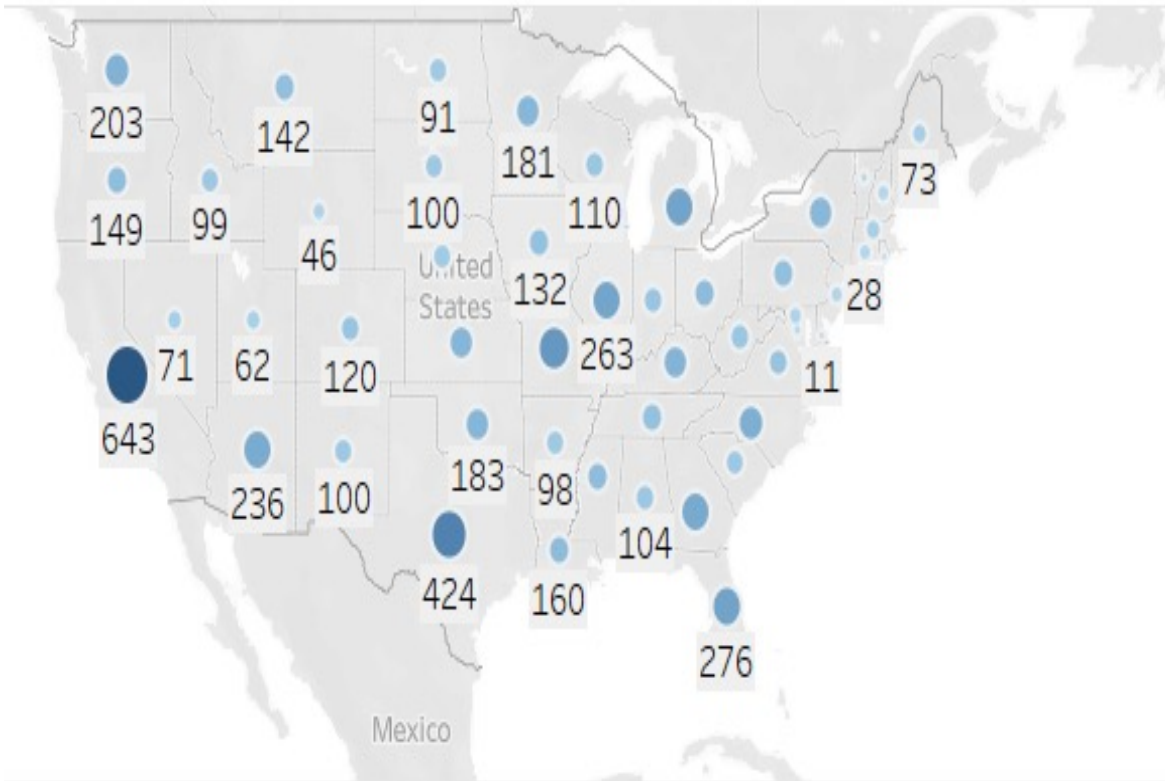


Percentage of Adults Who Report Not Seeing a Doctor in the Past 12 Months Because of Cost



- Uninsured rate in 2021 was **>6.6%** in expansion states and **>12.7% in non-expansion states** which is more than national average.
- Nearly 1 in 5 households** are in medical debt. USA owes **approximately \$195 billion** in medical debt.
- Women (about 1 in 8) were more likely than men (about 1 in 11) to carry medical debt.

HSPA areas and Internet accessibility across USA

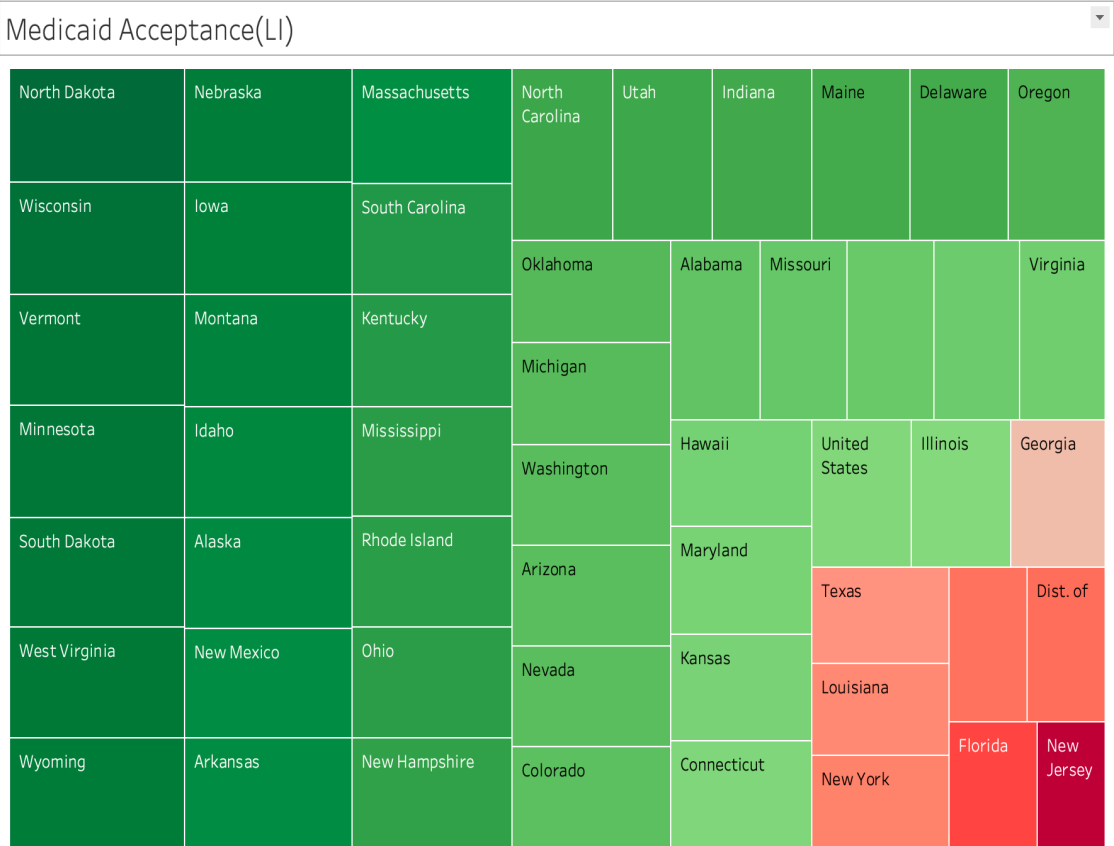
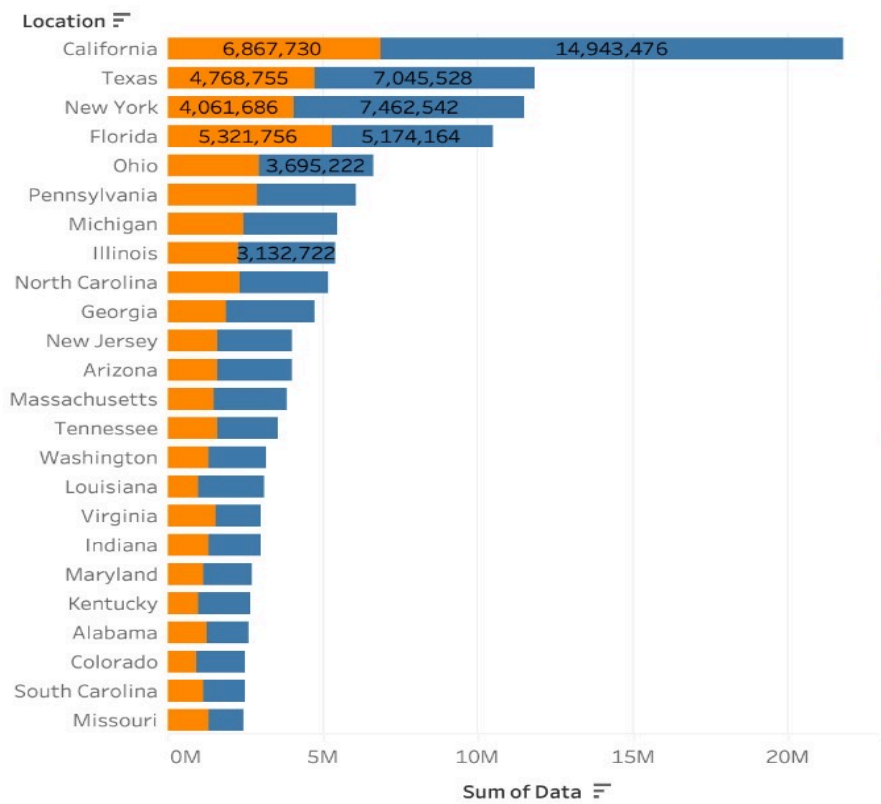


- **58%** of counties in Texas have a shortage of mental health professionals, which is the highest shortage percentage in USA.
- 21% of uninsured population are lacking internet access in USA.

State wise distribution of Medicare & Medicaid/CHP

Texas has 2nd highest Medicaid enrollment and in contrary the acceptance of Medicaid is poor with 38th ranking in USA

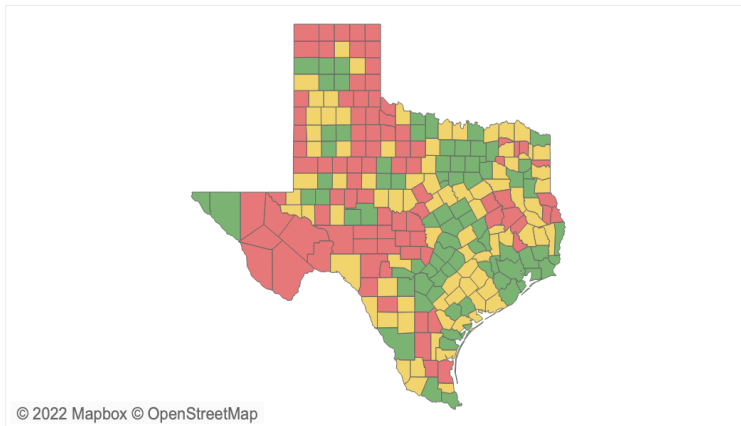
People under Medicaid



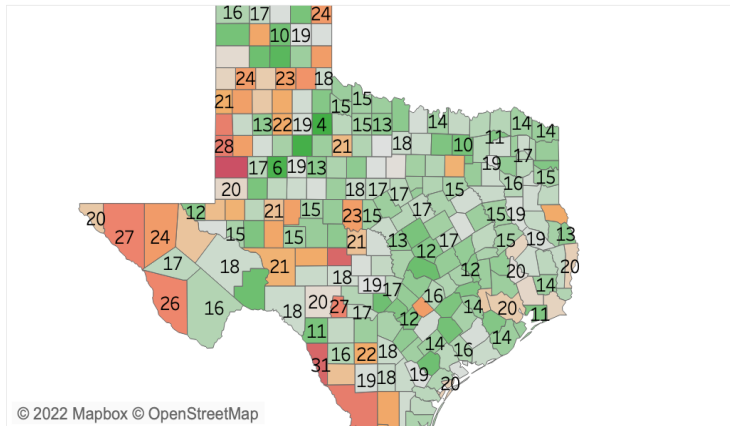
County wise distribution of urbanization, education, poverty & insurance coverage

Most of the counties near Mexico Border are highly uninsured and fall under Sub-urban or rural area. They are also the highest percentage of people living under FPL.

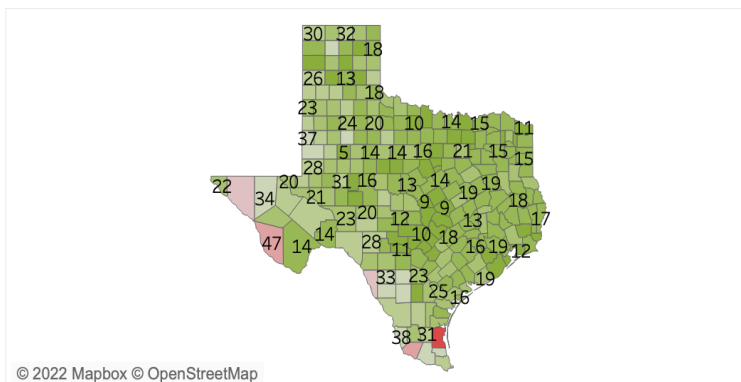
Urbanization in Texas



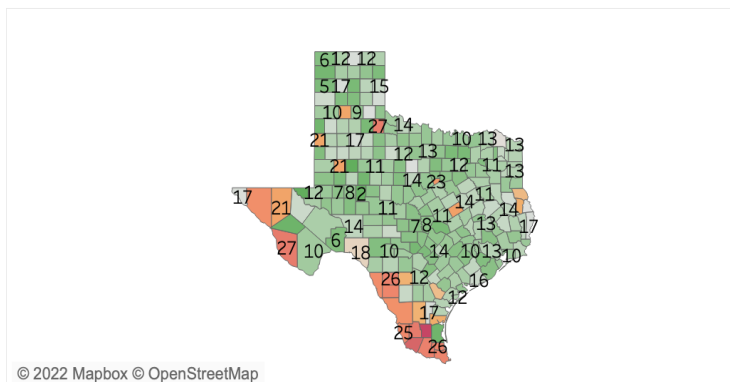
Percentage Of People Uninsured in Texas



Percentage of People who completed HS/Diploma in Texas

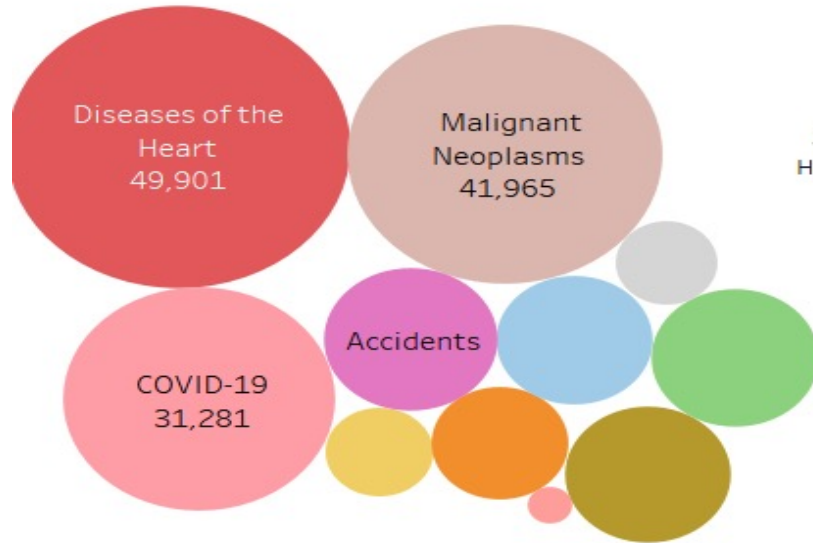


Percentage of people living under Federal Poverty in Texas

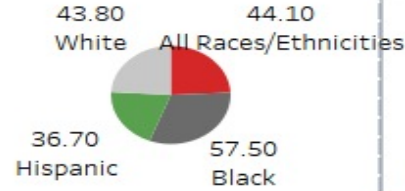


Top Reason for deaths In Texas

TEXAS death analysis

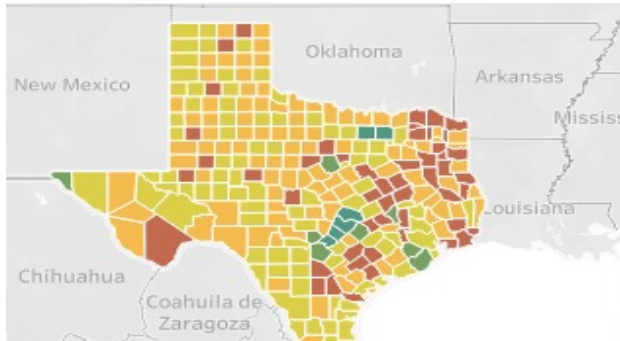


Heart Disease Hospitalization Rate per 1,000 Medicare Beneficiaries, All Race, All Genders, Ages 65+,

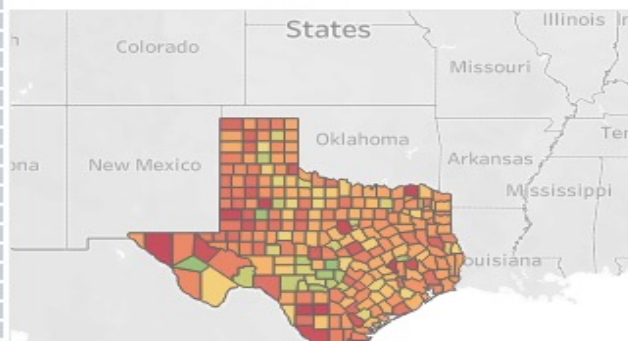


- Cardiovascular Disease which is an **umbrella for all other diseases** is the causing highest deaths in Texas.
- **57% of people with color** are suffering from Heart disease.
- **Preventive screenings** are offered very less in Texas

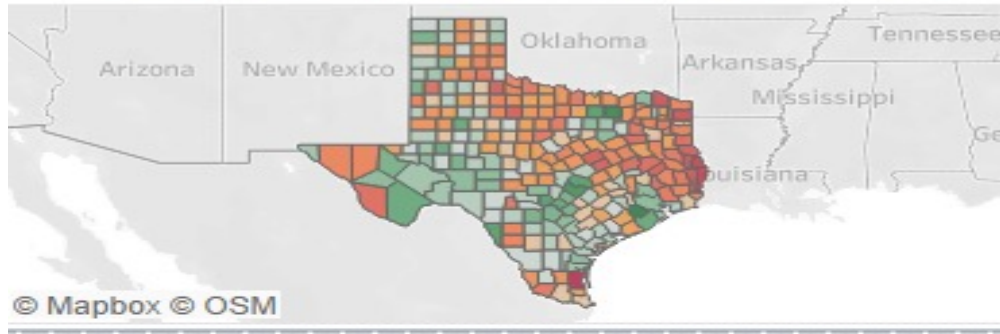
Adult Physical Inactivity Rates for Texas:



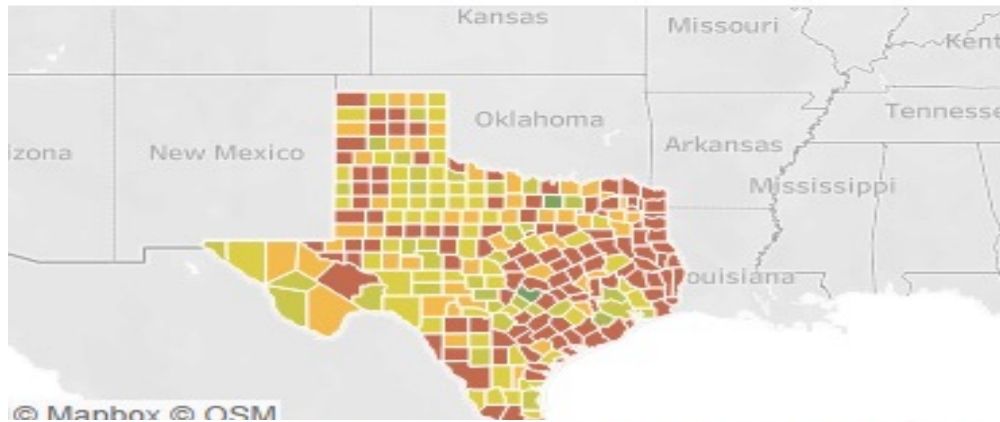
Cholesterol Screening Among Adults Ages 18+



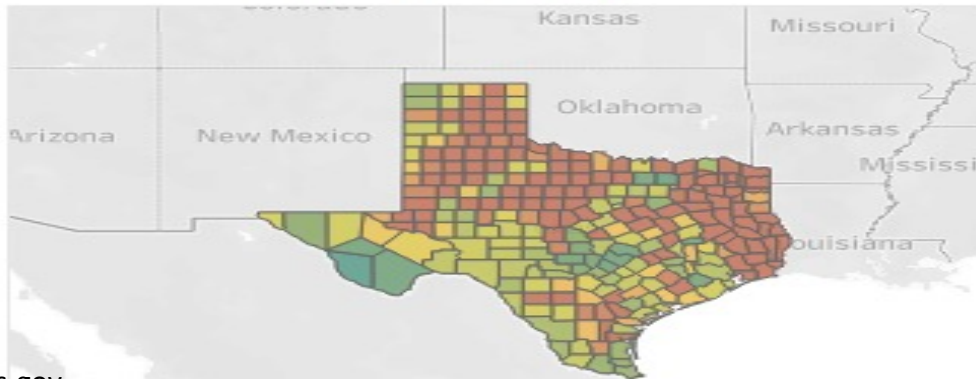
% of people who are mentally unhealthy



Adult Obesity Rates for Texas



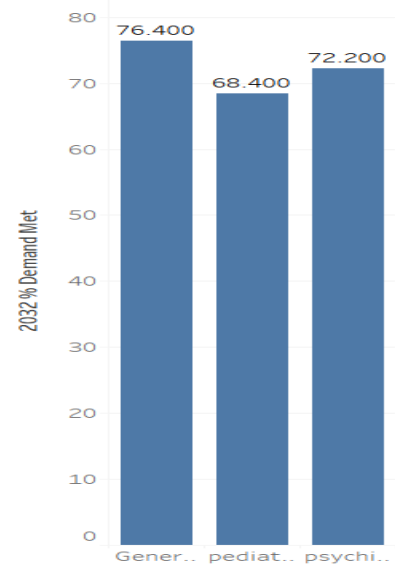
Total Cardiovascular Disease Death Rate per 100,000



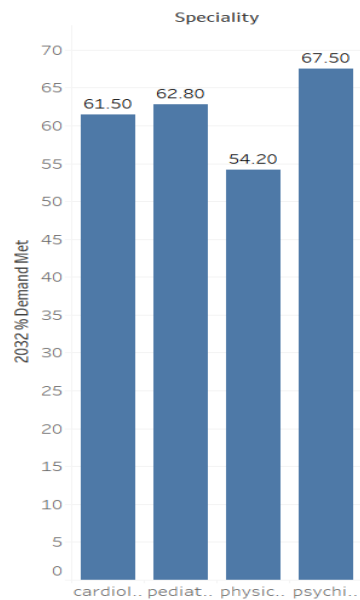
- East and North Texas are most affected by Cardiovascular diseases.
- East Texans are facing either Depression or Anxiety in larger number. Which leads to unhealthy lifestyle, worst health outcome ranking and substance use.
- More than 40% adults with a cognitive disability did not visit doctor due to cost

Demand and supply projection of Physicians across Texas for the year 2032

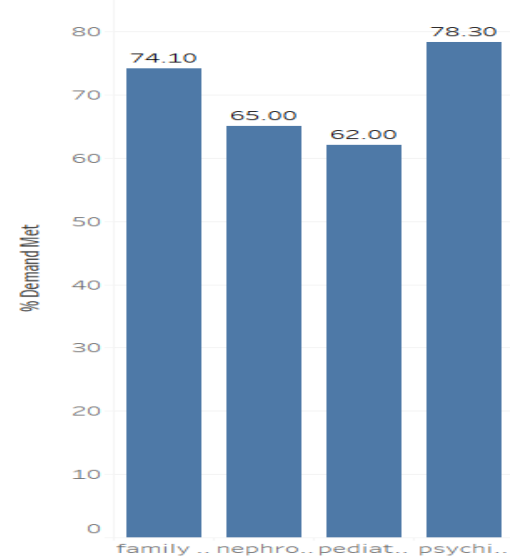
South Texas- Physician Speciality demand & supply



North Texas- % of Physician Specialities demand met in 2032

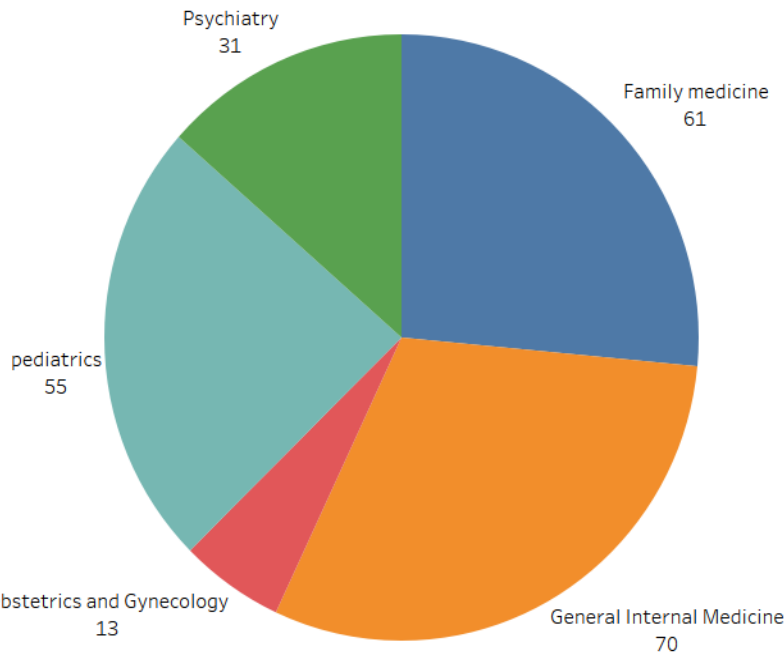


Gulf Texas- % of Physician Specialities demand met in 2032

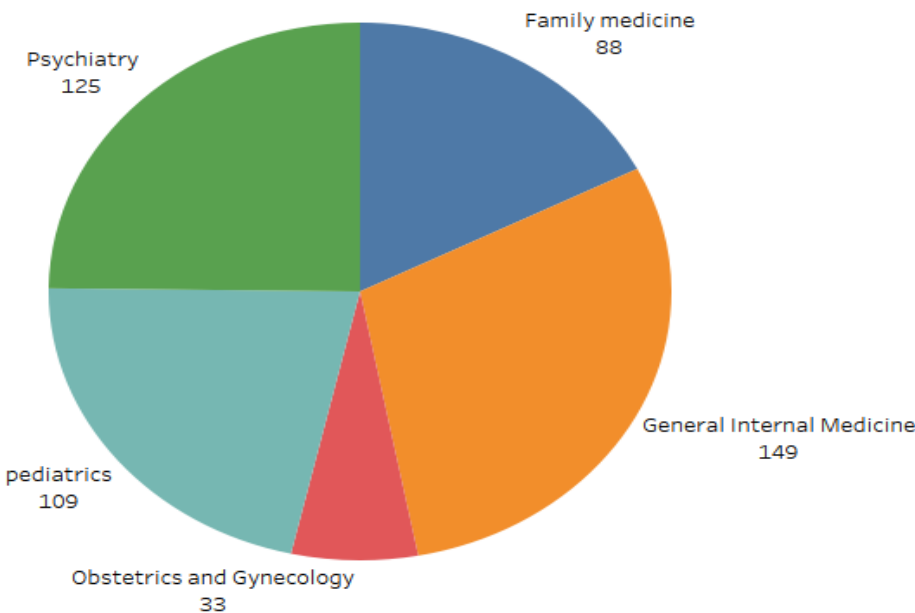


- Shortage of all physicians statewide is expected to **raise from 6,218(FTE's) in 2019 to 10,330 in 2032**
- **Psychiatry** is identified as a critical shortage in all regions of the state.
- **Pediatrics** is projected to be critical shortage in all regions of the state.
- **Family medicine** is projected to be critical shortage in Gulf Coast, West Tx

Additional GME Graduates Each Year Over the Previous Year to Meet Demand (Per School)



Additional UME Graduates Each Year Over the Previous Year to Meet Demand (Per School)



GME would have to increase by the following no. of residency slots per year over the prior year to meet the need for the following specialties:

Speaciality	
Family Medicine	61
General Internal me..	61
obstetrics	13
pediatrics	55
Psychiatry	31

- In 2000-2019, 49.4% of Texas medical school graduates remained in Texas for their GME.
- In 2000-2019 58.9% of physicians who completed their GME in Texas stayed in the state to practice.
- Texas ranked 41st among the 50 states in the number of active physicians per 100,000 population.

Observations



To drill down and find out the reasons which affects accessibility, we have analyzed the data for United states.

- ✓ States like California, Texas, Florida, Georgia made highest medical expenditure, but still underperforming across many aspects of accessibility.
- ✓ Roughly five million Texans are uninsured. **Texas has the nation's highest uninsured rate**—about 18% in 2021, compared to the national average of 8.6%.
- ✓ Most of the counties in Texas near Mexico border and some near Louisiana border were underperforming the most.
- ✓ Some of the most prominent socio-economic factor leading to the disparity in health care accessibility are race, household size, number of households without internet access, non-English speaking households.
- ✓ Hispanic population is mostly (39%) uninsured which is higher than average (18%) uninsured population in Texas followed by black uninsured(12%) population.
- ✓ Results indicates that Current shortage of physician, Pediatrics, Psychiatry, cardiology in Texas will increase through upcoming 10 years(2032). So, number of physicians graduating from medical institutes will not meet the projected demand.

Recommendations



- ✓ Universal Coverage- Medical Prices should be fixed statewide, with no surprise bills.
- ✓ Increase the no. of healthcare providers in rural USA which are designated as HSPA.
- ✓ Promote best practices in healthcare screening to reduce treatment costs.
- ✓ One Size doesn't fit all- Different Counties has different needs so "Health Equity" should be maintained.
- ✓ There should be fair redistribution of healthcare resources for making it equally accessibility.
- ✓ Expand Medicaid Coverage in Texas.
- ✓ Increase accessibility to internet and Health- IT (EHR's) should be improvised.