

The ACA Increased Millennials' Access to Primary Care: Where And How Often Are They Seeking Care?

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Image



Guest blogger [Charlene Wong, MD, MSHP](#), is a fellow with the Craig-Dalsimer Division of [Adolescent Medicine](#) program at The Children's Hospital of Philadelphia

Millions of millennials gained health insurance coverage under the Affordable Care Act (ACA). But getting covered is just one step in improving access to health care and health. I, along with fellow researchers at The Children's Hospital of Philadelphia, [studied](#) if and where newly insured young adults (ages 19-25 years old) sought primary care before and after implementation of the ACA's extended dependent coverage in 2010. Under this provision, young adults can stay on their parents' insurance until age 26. To complete our study, we used data from the large, nationally-representative Medical Expenditure Panel Survey from 2006 to 2012.

We found that a larger proportion of young adults had a routine primary care visit post-ACA (up to 50%) than pre-ACA (42%). However, only around 60% of young adults said they had a usual source of care or primary care doctor, and this proportion didn't change after the implementation of the ACA. When we looked at millennials' choices for primary care doctors both pre- and post-ACA, more saw family medicine doctors (76% to 81%) and pediatricians (8% to 9%), and fewer saw internists (12% to 8%) and OB/GYNs (5% to 3%).

We were encouraged that the ACA increased access to routine primary care for a sometimes "difficult-to-reach" population of young adults. However, while they used more primary care, around half were still without a check-up in the last year, indicating missed opportunities to provide evidence-based preventive services like vaccinations and screenings for sexually transmitted infections, obesity, depression, and drug use. Since a sizable 40% of young adults did not have a primary care doctor, providing additional education about how to

find a doctor at the time of getting coverage could further enhance young adults' access to care. Going forward, as additional insurance coverage mechanisms (like the health insurance marketplaces and Medicaid expansions starting in late 2013) are implemented, continuing to track millennials' access to primary care will be important to further measure the impact of the ACA on young people.

Our findings also highlight opportunities to better prepare the health care system for the influx of millions of newly insured young adults. The distribution of young adults' choices for primary care doctors can inform where the pipeline of providers-in-training could be strengthened to meet the expected demand. Finally, existing and future providers across the specialties that serve young adults – family medicine, pediatrics, internal medicine, & OB/GYN – need to be trained in the unique needs of young adult patients, so that we have a workforce ready to provide high-quality care to this population.

Charlene Wong, MD, MSHP
