

Effects of Health Insurance on Perceived Quality of Care Among Latinos in the United States

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BACKGROUND: There is suggestive evidence that lower rates of health insurance coverage increases the gaps in quality and access to care among Latinos as compared with non-Latino whites. In order to examine these potential disparities, we assessed the effects of insurance coverage and multiple covariates on perceived quality of care.

OBJECTIVE: To assess the distribution of perceived quality of care received in a national Latino population sample, and the role of insurance in different patient subgroups.

DESIGN: Telephone interviews conducted between 2007 and 2008 using the Pew Hispanic Center/Robert Wood Johnson Foundation Latino Health Surveys (Waves 1 and 2).

PARTICIPANTS: Randomly selected Latino adults aged ≥ 18 years living in the United States.

MEASUREMENTS: Pearson χ^2 tests identified associations among various demographic variables by quality of care ratings (poor, fair, good, excellent) for the insured and uninsured (Wave 1: N=3545). Subgroup analyses were conducted among Wave 2 participants reporting chronic conditions (N=1067). Bivariate and multivariate analyses were conducted to estimate the effects of insurance, demographic variables and consumer characteristics on quality of care.

RESULTS: Insurance availability had an odds ratio of 1.47 (95% CI, 1.22–1.76) net of confounders in predicting perceived quality of care among Latinos. The largest gap in rates of excellent/good ratings occurred among the insured with eight or more doctor visits compared to the uninsured (76.2% vs. 54.6%, $P < .05$).

CONCLUSIONS: Future research can gain additional insights by examining the impact of health insurance on processes of care with a refined focus on specific transactions between consumers and providers' support staff and physicians guided by the principles of patient-centered care.

KEY WORDS: insurance; Latinos; quality; acculturation; chronic care.
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