UNINSURED RATE AMONG NONELDERLY ADULTS Varies by Region in Kansas

This fact sheet is the first of a three-part series examining the geographic variation in health insurance coverage for Kansans.

While Kansas has made strides in reducing the uninsured rate among nonelderly adults age 19-64, gains in health insurance coverage have stalled in recent years. In 2017, the overall uninsured rate among Kansas nonelderly adults remained unchanged from the previous year at 12.3 percent (205,324 Kansans). This fact sheet examines the county-specific uninsured rate among Kansas nonelderly adults in 2017 (Figure 1) — the most recent year for which county-level data are available — and regional changes in the uninsured rate from 2009 to 2017 (Figure 2, page 2). It uses data from the U.S. Census Bureau 2017 Small Area Health Insurance Estimates.

Uninsured Rate Varies by County

- There was more than a three-fold difference between Kansas counties with the highest and lowest uninsured rate among nonelderly adults in 2017: 27.2 percent in Hamilton County and 8.2 percent in Leavenworth County.
- While most counties with the highest uninsured rates were in the southwest area of the state, a few counties in the southeast also had high rates.

Figure 1. Kansas Adults Age 19-64: Uninsured Rate and Number by County, 2017

Note: Uninsured Kansas adults age 19-64 (not in institutions) = 205,324. County-level data in Excel format are available at bit.ly/2OC2dTr. Regions are designated using the Kansas Department of Health and Environment District Office Boundaries map.

Source: KHI analysis of data from the U.S. Census Bureau 2017 Small Area Health Insurance Estimates.
The southwest region of Kansas had a consistently higher uninsured rate than other regions in Kansas from 2009 to 2017. Between 2013 and 2016, there was a significant decrease in the uninsured rate among nonelderly adults in each region. However, the uninsured rate in all regions has flattened out since 2016.

### Discussion
Regardless of where Kansas adults age 19-64 live, insurance coverage has improved since 2009, and the improvement has followed a similar trend across all regions. However, the gap between the southwest and other regions in the state persists. Further analysis of the underlying contributors to the high uninsured rate in the southwest could help communities implement targeted approaches.