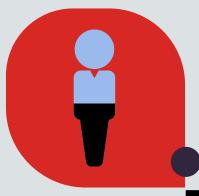
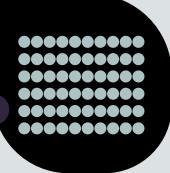
Health Care to be as Physically and Mentally Fit as Possible



45% of community members say lack of affordable medical care is a top issue for the Bellevue community.

60 confirmed drug and alcohol-related deaths in East King County.



6,000 Bellevue adults are uninsured.

33% of adults in central and northeast Bellevue did not have a dental checkup in the last year.





20% of adults in the U.S. experience mental illness each year.

Goal #4

Health Care to be as Physically and Mentally Fit as Possible

This chapter includes data about:

- Health indicators, medical coverage, and access to care
- Dental care
- Substance use disorder
- Mental health

This chapter discusses these topics as they pertain to the broader community. For more information about how this goal area relates to specific populations (Older Adults, Refugees and Immigrants, People with Disabilities, School-Aged Children and Youth, and Veterans) within our community, please see their respective chapters.

In addition, we recognize that disparate outcomes based on race exist regarding prevalence of and responses to the issues covered in this chapter. As part of the City's ongoing efforts to continue growing as a culturally competent and racially equitable organization and city, we have, when possible, highlighted racial disparities throughout this report, denoted by the phrase, "Racial (In)Equity Data Point."

While gender is a spectrum that includes transgender people and those who identify as neither male nor female, the sources referenced in this chapter reported data by male and female and did not report data encompassing the entire gender spectrum.

Key Findings

- Under the health care plans made available after the Affordable Care Act, many vulnerable people now have coverage who were uninsured before ACA. However, coverage does not automatically translate into positive health outcomes, as many still cannot access medical, vision, dental, or mental health services.
- Many community members are struggling with mental health issues, which are exacerbated by a lack of access to affordable, accessible, and culturally competent care.
- Lack of accessible dental care remains a problem for the Bellevue community: service providers, consumers, and residents all identify it as a major health issue, often exacerbated because the Affordable Care Act does not mandate provision of dental insurance.

Health Indicators, Medical Coverage, and Access to Care

Public Health Seattle King County and the Washington State Department of Health track a number of health indicators to identify a community's general health. A city health profile is a public health report that provides information on health indicators and their determinants. The purpose of the report is to inform policymakers, government agencies, and the public about population health at the local level. Some of these indicators include life expectancy, access to health care, and late or

no prenatal care. Overall, the City of Bellevue's ratings on the majority of these types of indicators show a greater level of overall health and well-being for its residents compared to King County and Washington State.¹

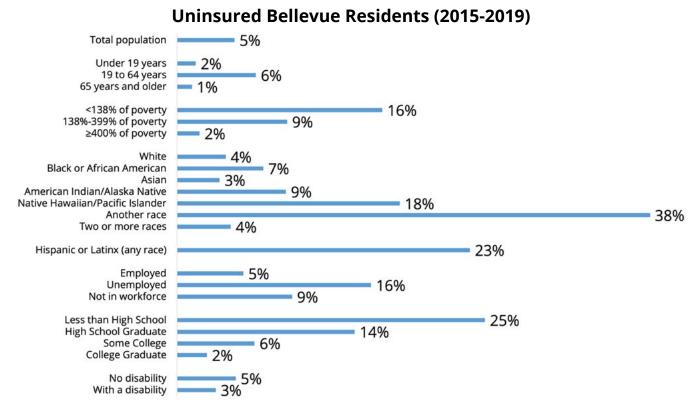
When people are uninsured, they typically use the emergency department (ED) of a local hospital for healthcare, which is extremely expensive. Many patients cannot pay these bills, so they apply for what is called "charity care" from the hospital, which may pay for a portion of their bills (from 20% to 100%).

Community Voice

- Affordability of medical care and medical insurance was a significant community and household concern for phone/online survey respondents. Forty-four percent of survey respondents rated lack of affordable medical insurance as a major/moderate community problem. Forty-five percent of survey respondents rated lack of affordable medical care as a major/moderate community problem.²
- In the phone/online survey, not being able to pay for medical insurance was a problem for 9% of households. Not being able to get medical insurance was a problem for 9% of households, and the ability to pay for doctor bills was a problem for 11% of households.³
- Thirty-two percent (n=6) of provider survey respondents report that their clients need health care but cannot access it.
- In the consumer survey, 19% (n=21) of respondents said they could rarely or never find affordable medical care. Among those making less than \$50,000, 25% (n=10) said the same.

Prevalence

■ As demonstrated in Figure 1, insurance rates vary substantially across different populations in Bellevue. Although the overall uninsurance rate is only 5%, there are stark differences across racial/ethnic groups, education levels, and income.⁴



- Racial (In)Equity Data Point: In King County, Black adults are more than 2 times less likely to have insurance compared to White adults. Additionally, Black people are more than 1.5 times as likely to have unmet health care needs due to cost compared to White people.⁶
- In 2019, approximately 4.6% of Bellevue residents were uninsured, compared with 5.3% across King County. In Bellevue, approximately 6,000 adults between the ages of 19 and 64 were uninsured (an uninsured rate of approximately 6%) while only 1% of children (under age 19) and older adults (over age 65) were uninsured.⁷
- In King County, 10.3% of adults reported needing to see a doctor in 12 months but could not because of cost. Across Bellevue, these percentages ranged from 4.4% (Bellevue-South) to 8.9% (Bellevue-West).8

Service Trends

- As of August 2021, more than 2.1 million Washingtonians are enrolled in Medicaid programs, nearly 470,000 of them are King County residents.⁹
- Washington hospitals reported \$1.039 billion in charity care charges in fiscal year 2019. This is an increase of 8.7% from those reported in fiscal year 2018.¹⁰
- HealthPoint serves low-income adults, children and youth, many of whom are homeless or in transitional housing. In 2020, HealthPoint provided medical care to 1,312 Bellevue residents.¹¹

Dental Care

Those who have the least access to preventative services and dental treatments have greater rates of oral disease. Similar to broader health access issues, oral health access is strongly tied to educational level, race and ethnicity, and income.¹² Dental decay is the most common chronic disease of childhood, impacting the ability to eat, talk, smile, pay attention and learn in school, which can have costly long-term adverse effects.¹³ The Affordable Care Act does not require dental care for adults, though plans can be found for children in the Washington Health Plan Finder.

Community Voice

- Thirty-seven percent of phone/online survey respondents rated lack of affordable dental care as a major/moderate community problem; 10% of households "not being able to pay for dental bills" as a major/moderate household problem.¹⁴
- Thirty-six (n=7) percent of provider survey respondents report that their clients need dental services but cannot access them.
- In the consumer survey, 18% (n=20) of respondents said they could rarely or never find medical and/or dental insurance. Among those making less than \$50,000, 38% (n=15) said the same.

Prevalence

In 2018 (the most recent year for which data are available), between 15% (both Bellevue-South and Bellevue-West) and 33% (both Bellevue-Central and Bellevue-Northeast) of adults reported they did not receive a dental checkup in the last year. Bellevue-South and Bellevue-West's rates are (statistically) lower than King County's overall rate.¹⁵

Service Trends

HealthPoint serves low-income adults, children and youth, many of whom are homeless or in transitional housing. In 2020, HealthPoint provided dental care to 402 Bellevue residents in that year.¹⁶ According to the provider survey, demand for dental services in Bellevue was rising steadily each year until COVID-19 precautions required closures and service adjustments. Even with those adjustments, International Community Health Services (ICHS), a Federally Qualified Health Center (FQHC) providing health services to underserved populations in King County, provided dental care to 403 Bellevue residents in 2020.¹⁷

Substance Use Disorder

In most individuals, dependency on a substance begins slowly and grows until their life becomes progressively unmanageable. Left untreated, the negative outcomes associated with substance use disorder are numerous, ranging from more frequent arrests to long-term health challenges. However, individuals with a substance use disorder who recognize that they need treatment and can access it are much more likely to engage in behaviors that are positive in the long term.

Community Voice

Twenty-seven percent of survey respondents rated drug abuse as a major/moderate community problem. Twenty percent rated alcoholism as a major/moderate community problem.¹⁸

Prevalence

- There were 515 drug and alcohol caused deaths in King County in 2020; 60 (12%) of those occurred in East King County.¹⁹
- Bellevue has a lower rate of drug- and alcohol-related deaths than the state as a whole.²⁰
- In King County, the number of fentanyl-involved overdose deaths between March and June 2020 was triple the number in the same months of 2019, resulting from the

"We have seen an increased need for counseling, especially for BIPOC counselors and substance use disorder counseling. We have lost a couple of people to suicide in the last few months due to mental health, so this needs to be addressed."

~ Participant, SafeHaven Community Conversation

inclusion of fentanyl primarily in counterfeit prescription pills.²¹

- In King County, overdoses disproportionately affect men, twice as often as women. Approximately 12% of overdoses were among people experiencing homelessness. Racial (In)Equity Data Point: Despite accounting for only 7% of the population in King County, Black (non-Hispanic) individuals accounted for 18% of all drug- and alcohol-related deaths in the county. Similarly, American Indian/Alaska Native individuals account for 4% of drugand alcohol-related deaths, but only 1% of the population. All other racial and ethnic groups included in the report (White, Asian, Hispanic, Other) have drug- and alcohol- death rates that are either consistent with or lower than their respective proportion of the population. It is important to acknowledge that race alone is not a determining factor in either substance use or overdose; numerous studies indicate that these disproportionalities exist primarily due to the increased stressors, traumas, and systemic inequities racial and ethnic minorities routinely experience. 23
- In 2020, there were 60 confirmed drug- and alcohol-related deaths in East King County. As of October 2021, there were 45 confirmed deaths.²⁴

- In 2019, there were 51 alcohol-related deaths in Bellevue, and the age-adjusted rate (6.6 per 100,000) is substantially less than that of King County (9.7) and Washington State (12.5).²⁵
- Across Bellevue, between 6% (Bellevue-West) and 11% (Bellevue-Central) of adults reported smoking cigarettes in the past 30 days (Bellevue-South and Bellevue-Northeast were 6.3% and 6.2% respectively). None of these rates statistically differed from the overall King County rate.²⁶

Service Trends

- Opioids are a class of drugs including heroin, fentanyl, and pain relievers like oxycodone.²⁷
 Across King County, 2,637 people were served through multiple strategies to address opioid addiction, including prescribing buprenorphine and providing trauma-informed behavioral health services.²⁸
- Largely due to COVID-19 related service interruptions, King County's Behavioral Health and Recovery Division recorded fewer new substance use disorder assessments from March through August 2020 compared to the same months of 2019. However, the number of assessments increased per month between May and August.²⁹
- In 2017, the most recent data available, 380 Bellevue clients received substance use disorder services from Washington State Department of Social and Health Services.³⁰
- Therapeutic Health Services (THS) provides intensive outpatient drug and alcohol treatment. In 2020, THS provided substance abuse treatment to 267 Bellevue residents.³¹

Mental Health

Individuals with a mental health diagnosis can experience disruption in their ability to think, feel, and relate to others, and this often results in changes in daily functioning. Fortunately, treatment for a mental health diagnosis, often a combination of psychosocial support and medication, can be effective. In the United States, the National Institute for Mental Health (NIMH) reports that between 70 and 90 percent of individuals experience a significant reduction in symptoms and improved quality of life after engaging in mental health treatment services.³²

Community Voice

- In the 2021 Bellevue phone/online survey, having a lot of stress, anxiety or depression that interferes with their daily life was rated as a major or moderate problem by 25% of respondents, the top problem experienced by households.³³
- In the phone/online survey, not being able to pay for mental health counseling was a problem for 8% of households. Not having access to mental health counseling was a problem for 10% of households.³⁴
- Fifty-eight percent (n=11) of provider survey respondents report that their clients need mental health care but cannot access it.
- In the consumer survey, 17% (n=19) of respondents said they could rarely or never find counseling services. Among those making less than \$50,000, 29% (n=11) said the same. In addition, 34% (n=37) of all respondents said they had a lot of anxiety, stress, and/or depression that interfered with their daily living. For respondents making less than \$50,000, only 21% (n=8) said the same.

Prevalence

- About 20% of adults in the U.S. experienced mental illness in 2020.³⁵
- Racial (In)Equity Data Point: There is wide variation in the prevalence of mental illness among racial and ethnic groups. For example, in the Substance abuse and Mental Health Services Administration (SAMHSA) 2019 national survey, 22% of White respondents reported experiencing mental illness in the past year, compared with 17% of Black respondents, 18% of Hispanic/Latino respondents, and 14% of Asian respondents (the

lowest reported rate among all racial and ethnic groups). Respondents identifying as multi-racial had the highest incidence of mental illness at 32%.³⁶ These patterns are consistent with data from the Seattle/Tacoma/Bellevue Metropolitan Service Area (MSA).³⁷ Importantly, while these data are considered representative, some racial and ethnic groups may

"Mental Health services are incredibly difficult to access for someone with cognitive issues. First, the system is challenging to navigate. Then, there are no mental health services available for people with cognitive issues and no one is talking about this gap in services. Also, it is difficult to find providers that accept Medicaid and Medicare."

~ Participant, Bellevue Diversity Advisory Network

- experience stigma around mental health issues, which could affect willingness to disclose challenges in surveys.³⁸
- According to the U.S. Census Bureau's Household Pulse Survey, 26% of all respondents in Washington (n=5,950,326) reported feeling nervous, anxious, or on edge more than half the days (n= 641,484) or nearly every day (n= 901,196) in the previous week. In that same survey, 16% of all respondents reported feeling down, depressed, or hopeless more than half the days (n= 478,253) or nearly every day (n= 502,207) in the previous week.³⁹ **Racial (In)Equity Data Point:** Statewide, those who identified as two or more races reported the highest rate of symptoms for anxiety (45%), while those who identified as Black reported the highest rate of symptoms for depression (39%).⁴⁰
- There is an inverse relationship between household income and feelings of anxiety and depression: as household income rises, the likelihood of experiencing anxiety and/or depression in a given week dramatically decreases. Across the Seattle/Tacoma/Bellevue MSA, people with household incomes of less than \$25,000 were five times as likely to report distress than those with incomes of \$200,000 or more. In addition, 25% of individuals from households with incomes below the \$25,000 threshold reported not being able to get needed counseling or therapy from a mental health professional.⁴¹
- Across Bellevue, between 4.6% (Bellevue-West) and 8.4% (Bellevue-Northeast) of adults report frequent mental distress over a given month. Each of these percentages is statistically consistent with the overall King County average.⁴²
- Between 2014 and 2018 (the most recent data available), there were 82 suicides in Bellevue. Across Bellevue, the suicide rate ranged from 8.2 per 100,000 (Bellevue-South) to 14.7 per 100,000 (Bellevue-West). Across Bellevue, these percentages are statistically consistent with King County's overall rate.⁴³ Racial (In)Equity Data Point: Across King County, the suicide rate for American Indian/Alaska Native residents was nearly twice the rate of

White residents. In comparison, however, the suicide rate for all other racial groups was approximately half that of White residents.⁴⁴ As a single group, White male adults have the highest rates of death by suicide across the county.⁴⁵

Service Trends

- Crisis Clinic provides a 24-Hour Crisis Line. In 2020, the 24-Hour Crisis Line responded to more than 3,500 calls from Bellevue residents.⁴⁶
- The Mental Illness and Drug Dependency (MIDD) Behavioral Health Tax Fund ensures that people with behavioral health needs across King County are healthy, safe, and have access to the care they need. In 2019, approximately 2,000 East King County residents (or 10% of individuals served countywide) received at least one MIDD-funded service. MIDD strategies serving Eastside residents included: Prevention and Early Intervention (774 individuals), Crisis Diversion (884 individuals), Recovery and Reentry (168 individuals), and Therapeutic Courts (232 individuals).⁴⁷
- In 2020, NAMI-Eastside provided services to 712 Bellevue residents in the form of support groups, educational seminars, and direct services.⁴⁸
- In 2020, IKRON provided behavioral health assessments and services to 99 Bellevue residents.⁴⁹

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