Changes in Young Adult Primary Care Under the Affordable Care Act

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OBJECTIVES: We sought to describe changes in young adults' routine care and usual sources of care (USCs), according to provider specialty, after implementation of extended dependent coverage under the Affordable Care Act (ACA) in 2010.

METHODS: We used Medical Expenditure Panel Survey data from 2006 to 2012 to examine young adults' receipt of routine care in the preceding year, identification of a USC, and USC provider specialties (pediatrics, family medicine, internal medicine, and obstetrics and gynecology).

RESULTS: The percentage of young adults who sought routine care increased from 42.4% in 2006 to 49.5% in 2012 ($P < .001$). The percentage identifying a USC remained stable at approximately 60%. Among young adults with a USC, there was a trend between 2006 and 2012 toward increasing percentages with pediatric (7.6% vs 9.1%) and family medicine (75.9% vs 80.9%) providers and declining percentages with internal medicine (11.5% vs 7.6%) and obstetrics and gynecology (5.0% vs 2.5%) providers.

CONCLUSIONS: Efforts under the ACA to increase health insurance coverage had favorable effects on young adults' use of routine care. Monitoring routine care use and USC choices in this group can inform primary care workforce needs and graduate medical education priorities across specialties.

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