

Creating Community for a Lifetime Roadmap

Overview—Access to Affordable Health Care

The Access to Affordable Health Care issue area focuses on building an expert, integrated and user-friendly system of health care and related services sensitive to the strengths and needs of older adults. It involves strategies such as outreach and education, advocacy for evidence-based policies and practices, and community collaborations.

Desired Outcome

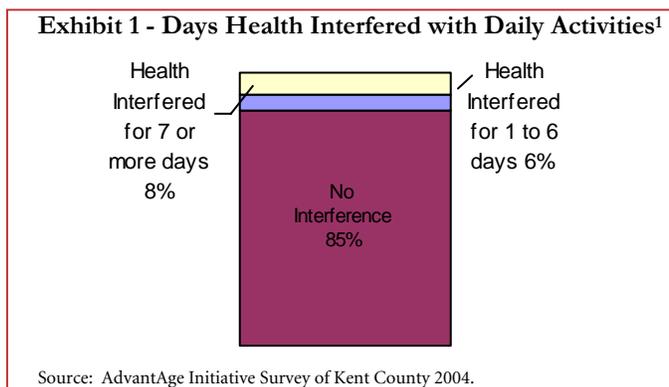
Older adults can access affordable mental and physical health services, including medication.

Background

Americans are living significantly longer lives, in no small part due to preventive efforts that have reduced the number of deaths from heart disease and stroke. With increasing longevity, a growing number of older people are experiencing chronic disease, disability and depression during their “extra” years of life. Lifestyle changes and emphasis on preventive health care could help reverse this trend.

Although prevention and early detection efforts in Kent County are reaching many older adults, more holistic and integrated efforts are needed. Many Kent County elders are not getting basic Medicare-covered preventive measures such as flu shots, PSA tests for prostate cancer, mammograms, and bone density tests. Nearly one in four (23%) older Kent County residents describes his or her health as fair or poor. More than one-third (36%) say they’ve had one or more unhealthy days in the previous month—and in 14% of those cases, their physical or mental health interfered with their normal, everyday activities.

Recent research indicates that, among older patients, depression contributes as much to mortality as do cardiovascular disease and diabetes—and that, with treatment, older adults recover from depression as much as three times faster. In Kent County, eight percent—nearly 5,000 older people—say they need professional help to address depression or anxiety, but two-thirds of those have not gotten the help they need. Those lacking treatment include people who need help with everyday activities and low income elders.



¹The number of “unhealthy days” is based on a summary index from two questions: 1) “Now, thinking about your physical health, which includes physical illness and injury, for how many days in the past 30 days was your physical health not good?” and 2) “Now, thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?” People who had one or more “unhealthy” days were asked, “During the past 30 days, for how many days did poor physical or mental health keep you from doing your usual activities, such as self care, work, or recreation?” Percentages may not add up to 100% due to rounding and/or missing information.

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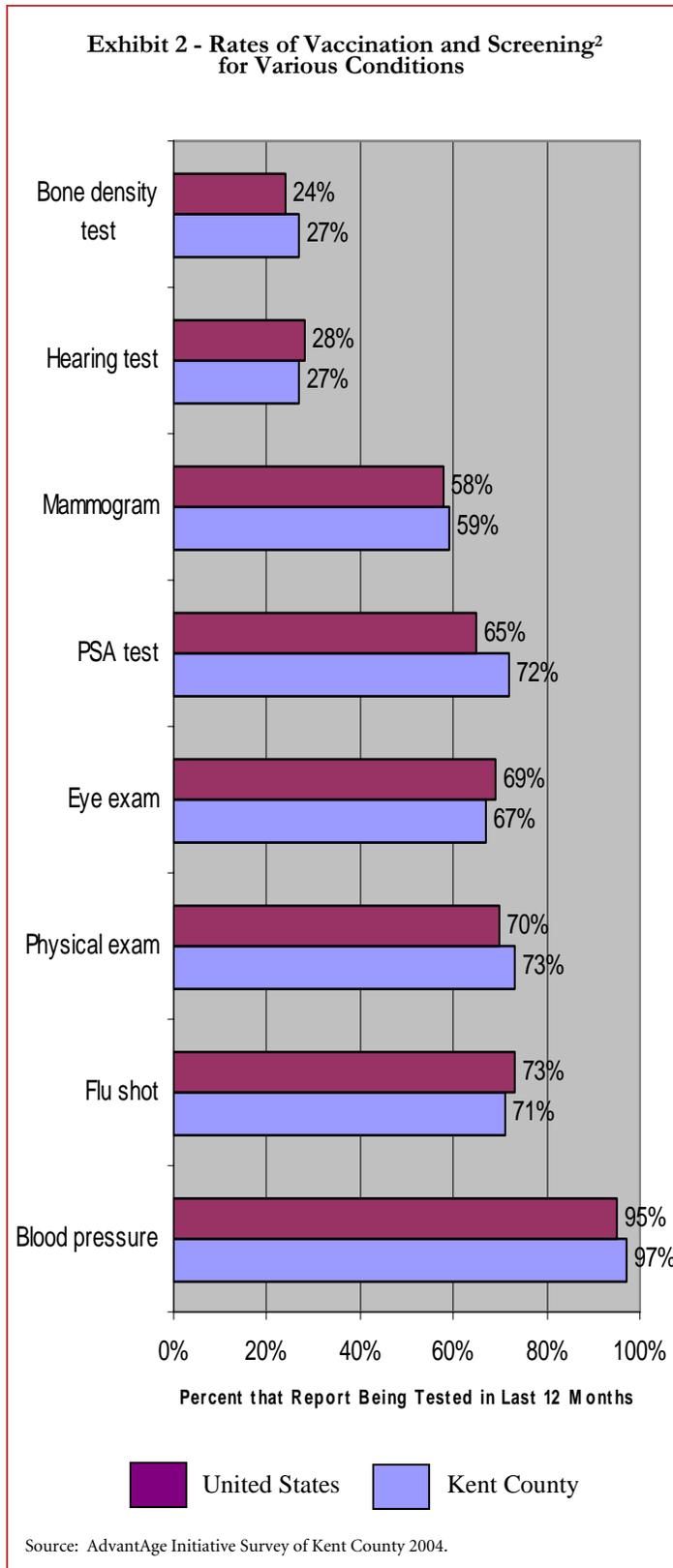
An overwhelming proportion of Kent County’s older population (97%) say they have a regular source of health care, with 89% saying they have a private doctor and almost all (97%) who needed medical care in the last year indicating that they had obtained it and had no trouble paying for it. However, low income elders, minorities, and those who have restrictions on their everyday activities (ADLs and/or IADLs) are significantly more likely than their counterparts to have had problems paying for medication and other health care needs.

Unhealthy Days⁷

More than one-third of Kent County elders—approximately 22,500 people—reported that their physical or mental health was not good for one or more days in the previous month. Fourteen percent—8,700 older adults—were unable to go about their normal daily activities as a result of poor mental or physical health. And for over 5,000 elders, poor health interfered with their daily activities for seven or more days in the previous month.

Gaps in Preventive Care

Immunizing against disease and early detection of health problems are key strategies for maintaining health, function and well-being as people age. Although nearly all Kent County elders have had a blood pressure check in the last year, a surprisingly large proportion have not had many of the Medicare-covered preventive health services such as bone density screenings (70%), mammograms (40%), and PSA tests for prostate cancer (27%).



¹See previous page.

²People were asked whether they had had any of the preventive measures or tests in the past 12 months.

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Despite public awareness campaigns, full Medicare coverage for the flu vaccine, and more than 35,000 U.S. deaths from flu each year, 29% of Kent County elders—more than 17,800 older adults—did not get a flu shot in the past year. Kent County residents with less education, those aged 65-74, and White elders were least likely to get their flu shot last year.

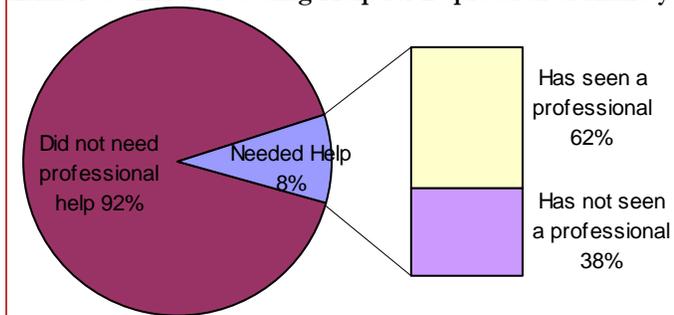
Disparities also occur in access to physical exams, prostate cancer screenings, mammograms and hearing tests:

- *Physical exams:* Lower income elders, women, those with limitations on their everyday activities and those with less education were least likely to have had a physical exam last year.
- *Prostate cancer screening:* Minority male elders, those aged 65-74, those with less education, and those who describe themselves as being in good health were least likely to have been screened for prostate cancer last year.
- *Mammograms:* Women aged 75 to 84, those with low incomes, less education, one or more limitations on everyday activities and who consider their health poor were least likely to have had a mammogram last year.
- *Hearing test:* White women aged 65-74 who consider themselves in good health were least likely to have had a hearing test last year.

Most Elders Suffering from Depression or Anxiety Are Not Getting the Help They Need

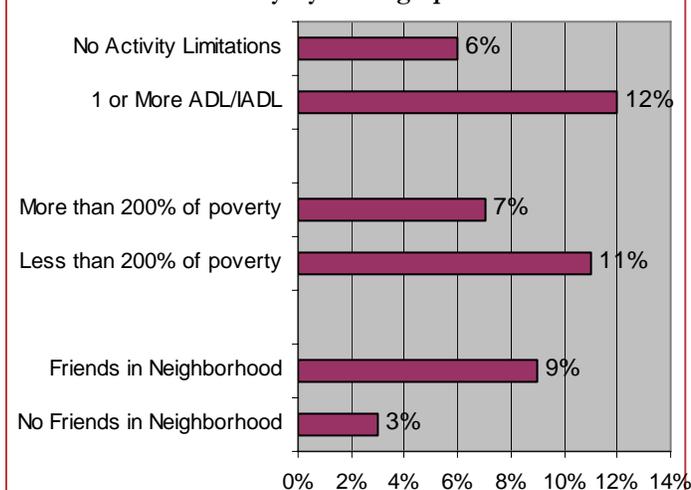
Depression in older adults is an important indicator of general well-being and mental health; in fact, higher levels of depression are associated with higher rates of physical illness, greater functional disability, and higher health care costs. Nearly 5,000 Kent County elders

Exhibit 3 - Elders Needing Help for Depression or Anxiety



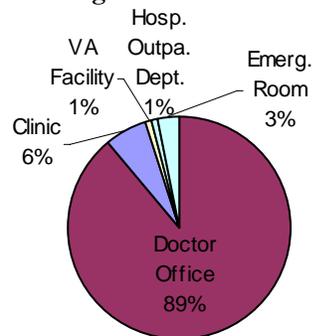
Source: Kent County 2004

Exhibit 4 - Elders Needing Help for Depression or Anxiety By Demographics



Source: AdvantAge Initiative Survey of Kent County 2004.

Exhibit 5 - Regular Source of Health Care



Source: AdvantAge Initiative Survey of Kent County 2004.

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report needing the help of a health care professional because of depression or anxiety. Over 1/3 of them have not gotten the help they need. Most likely, these numbers are low, as experience shows that people tend to under-report their need for mental health assistance.

People 85 years old and over, women, those less educated, and those who live alone are only slightly more likely to say they need professional help for depression or anxiety. But the prevalence of these issues varies by other characteristics. For example, Kent County elders reporting that they need help include:

- Twice as many with limitations on their activities of daily living (ADLs or IADLs) as those without limitations
- Significantly more low income elders

Elders Across the Board Have a Regular Source of Care...

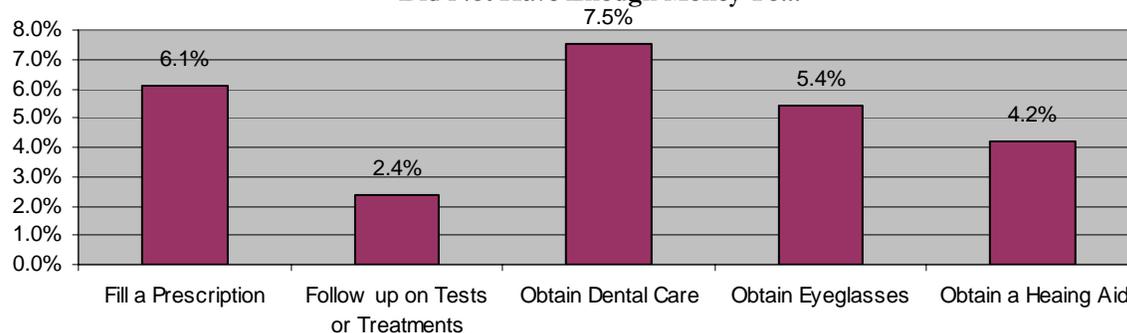
A full 97% of Kent County elders report having a place that they usually go when they are sick or need advice about their health—and the proportions are fairly stable regardless of demographic differences. The majority of elders in the U.S. go to a private doctor for regular care; in Kent County, 89% identified a private doctor as their regular source of care: 90% of older women and 88% of older men. Six percent—about 3,800 elders in Kent County—rely on clinics and health centers.

...But Disparities Exist in Ability to Pay

A small proportion of older adults in Kent County (2%) report problems paying for health care needs. However, 5-8%—3,000 to 5,000 elders—had a time in the past twelve months when they did not have enough money to fill a prescription or pay for dental care or eyeglasses and significant disparities exist by demographics. For example, those having trouble paying for:

- *Prescriptions* are three times as likely to be low income and twice as likely to be minorities and/or have limitations on their everyday activities. Those age 65 to 74 are seven times as likely as those 85 or more to have trouble paying for prescriptions.
- *Dental care* are six times as likely to be low income, five times as likely to be women and/or have restrictions on their everyday activities, three times as likely to be a minority, and twice as likely to be in poor health. Those between the ages of 75 and 84 are twice as likely as those age 85 or more to have trouble paying for dental care.
- *Eyeglasses* are six times as likely to be low income and twice as likely to be a minority, have less education, and/or restrictions on everyday activities. People age 85 or more are eight times as likely as those age 75-84 to have trouble paying for eyeglasses.

Exhibit 6 - Were There Any Times in the Past 12 Months When You (Or Other Adults In Your Household) Did Not Have Enough Money To...



Source: AdvantAge Initiative Survey of Kent County 2004.

Percent who said "Yes"