Barriers to Arthritis Care in Michigan

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ABSTRACT
**Purpose:** This study assesses the overall prevalence of Michigan adults with arthritis who were unable to get arthritis care when needed, the reasons for not being able to get care, and the demographic and socioeconomic characteristics of those unable to get care.

**Methods:** A statewide survey of the civilian non-institutionalized adult population of Michigan: the Michigan Diabetes, Arthritis and Osteoporosis Survey, was conducted from November of 2004 through September of 2005. African-Americans, Hispanics and persons age 45 and older were oversampled. The final sample consisted of 2,656 completed interviews. Persons with self-reported arthritis were asked: "In the past 12 months, has there been an occasion when you needed care for your arthritis but were not able to get it?" Respondents who said "yes" were then asked "What prevented you from getting it?" Point estimates, 95% confidence intervals and t-tests to evaluate the differences in prevalence estimates among demographic and socioeconomic groups were calculated using SUDAAN software.
**Results:** The vast majority (92.6%, 95% CI 89.5%-94.8%) of Michigan adults with arthritis reported that they were able to get arthritis care when they needed it; 7.4% (95% CI 5.2%-10.5%) reported that they were not. Nearly two-thirds of those who experienced barriers to care indicated the expense of care or inadequate insurance as the reason for not receiving care. Age, sex, race and household income were associated with inability to get care; educational status and Hispanic status were not. Persons <55 years of age, females, African-Americans and those with household incomes <$35,000 per year were significantly more likely to report barriers to care than persons ≥75 years of age and over, males, whites and those with annual household incomes of ≥$35,000. The proportion of African-Americans who reported that they were unable to get care (22.4%, 95% CI=13.2%-35.3%) was three times higher than the statewide prevalence.

**Conclusions:** The prevalence of inability to get arthritis care in Michigan was relatively low statewide, but certain demographic and socioeconomic groups, particularly African-Americans, reported considerably higher levels of access-to-care problems. Reasons for difficulty in receiving care were predominantly related to cost and insurance barriers.

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STUDY OBJECTIVES
To identify the overall prevalence of Michigan adults with arthritis who are unable to get arthritis care when needed

To characterize the demographic and SES groups most likely to experience barriers to care

To describe the major reasons for difficulty in getting care
METHODS
The Michigan Diabetes, Arthritis & Osteoporosis Survey (MDAOS), 2004-2005

- **Survey Type:** Random-digit dialed telephone survey of English-speaking, non-institutionalized adults (age 18 & over) in Michigan

- **Sample Design:**
  - Disproportionate stratified
  - Oversampled African-Americans, Hispanics, persons age 45 & older, and listed (vs unlisted) phone #s

- **Sample Size:** Obtained 2,656 completed interviews from Nov ’04 through Sept ’05.
**The Survey Questions**

- **Persons with arthritis:** Responded “Yes” to “Have you ever been told by a doctor or other health professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?”

- **Persons experiencing barriers to arthritis care:** Responded “Yes” to “In the past 12 months, has there been an occasion when you needed care for your arthritis but were not able to get it?”
The Survey Questions (cont.)

- **Reasons for not getting care:** (If “Yes” to previous question) “What prevented you from getting it?”
(Categories below were *not* read to respondent.)

- No access to specialist
- No insurance
- Insurance does not cover treatment/prescriptions
- Too expensive
- Treatment did not work/was not effective
- Dr. not knowledgeable about treatment
- Dr. does not offer treatment
- Dr. does not seem to care or take condition seriously
- Long waits
- Other (specify)
RESULTS
“In the past 12 months, has there been an occasion when you needed care for your arthritis but were not able to get it?”

Michigan Adults With Arthritis, 2004-2005

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
Percent Not Able To Get Arthritis Care By Age, Michigan Adults With Arthritis, 2004-2005

%<55 vs 75+, p < .01

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
Percent Not Able To Get Arthritis Care By Gender, Michigan Adults With Arthritis, 2004-2005

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
Percent Not Able To Get Arthritis Care By Race, Michigan Adults With Arthritis, 2004-2005

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey

White vs Black, p < .01

White: 5.4
Black: 22.4
Other: 12.2
Percent Not Able To Get Arthritis Care By Hispanic Status, Michigan Adults With Arthritis, 2004-2005

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
Percent Not Able To Get Arthritis Care By Education, Michigan Adults With Arthritis, 2004-2005

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
Percent Unable To Get Arthritis Care By Income,
Michigan Adults With Arthritis, 2004-2005

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey

1 vs 2, \( p < .001 \)
1 vs 3, \( p < .001 \)
1 vs 4, \( p < .05 \)
What prevented you from getting arthritis care?

(Asked of persons with arthritis who were unable to get care: unwtd N=82)

29.2%  No insurance
22.5%  Too expensive
15.0%  No access to specialist
13.0%  Insurance does not cover treatment/prescriptions
20.3%  Other
100.0%

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
“Other” Reasons (from previous slide) (Asked of persons with arthritis who were unable to get arthritis care)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Long waits</td>
<td>6.1%</td>
</tr>
<tr>
<td>Did not want help/did not want to take medication</td>
<td>4.1%</td>
</tr>
<tr>
<td>Dr. not knowledgeable about treatment</td>
<td>2.5%</td>
</tr>
<tr>
<td>Treatment did not work/was not effective</td>
<td>2.0%</td>
</tr>
<tr>
<td>Misdiagnosed/treated for wrong problem/symptoms</td>
<td>1.4%</td>
</tr>
<tr>
<td>Dr. does not offer treatment</td>
<td>1.0%</td>
</tr>
<tr>
<td>Miscellaneous other</td>
<td>3.2%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>20.3%</strong></td>
</tr>
</tbody>
</table>

Source: Michigan Diabetes, Arthritis & Osteoporosis Survey
Only 7.4% of Michigan adults with arthritis reported being unable to get arthritis care in the past year when needed.

However, 22.4% of African-Americans with arthritis reported problems getting care.

Other groups more likely to experience difficulties were persons less than 55 years of age, females and persons in households with incomes less than $35,000 per year.

Paying for care (having no or inadequate insurance, care too expensive) was cited by nearly two-thirds of respondents as the main barriers for not getting care.
Limitations

- Small sample size – limited power for sub-group comparisons, especially for reasons for not getting care.

- All data based on self-reports

- Survey biases due to non-response and non-coverage
Acknowledgements

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