

Study finds continuous health coverage essential for patients managing diabetes

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When patients with diabetes experience interruptions in health - insurance coverage, they are less likely to receive the screening tests and vaccines they need to protect their health. A new study finds that this is true even when patients receive free or reduced-cost medical care at federally funded safety net clinics.

The study was funded in part by the National Institutes of Health and findings published online in the *Journal of the American Board of Family Medicine*.

"Our study shows that patients need continuous [health insurance coverage](#) in order to ensure adequate preventive care, even when that care is provided at a reduced cost," said Rachel Gold, PhD, MPH, lead author and investigator with the Kaiser Permanente Center for Health Research in Portland, Ore.

"Most of the services at our safety net clinics are free, but some of the diagnostic tests require a small co-pay that is usually covered by Medicaid," said Amit Shah, MD, study co-author and Medical Director of the Multnomah County Health Department in Portland. "Patients who lose their [Medicaid coverage](#) often delay getting the tests because they can't afford the co-pay."

The study included 3,384 diabetes patients receiving medical care from 2005-2007 at 50 federally qualified health centers in Oregon. These health centers provide free or reduced-cost care to low-income patients

regardless of their [insurance status](#). More than half the patients in the study (52 percent) had continuous coverage, most often provided by Medicaid, a publicly funded insurance program for low-income people. Twenty-seven percent had no insurance, and 21 percent had interrupted coverage, during the three-year study period. Patients with private insurance were excluded from the study.

Researchers examined patients' [electronic health records](#) to determine whether they received four services recommended at least annually for [diabetes patients](#): a lipid test for [high cholesterol](#), a [flu vaccine](#), a test that measures [blood sugar levels](#), and a urine test that can detect kidney damage.

Forty-eight percent of patients with continuous insurance coverage received at least three lipid-screening tests at one of the study clinics over the three-year study period; 25 percent received three or more flu shots; 72 percent received three or more screenings for blood glucose; and 19 percent received three or more screenings for kidney damage. Patients with no coverage, and patients with interruptions in coverage, received significantly fewer of these services than patients with continuous health insurance coverage.

Notably, the study showed no increase in services received as insurance coverage increased; rather, all patients with discontinuous health insurance were equally vulnerable to missing services, compared to the continuously insured. These findings suggest that public insurance coverage must be continuous to ensure that patients receive consistent and timely care.

Provided by Kaiser Permanente

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