

Sharpening state spending on seniors

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As our society ages, a University of Montreal study suggests the health system should be focussing on comorbidity and specific types of disabilities that are associated with higher health care costs for seniors, especially cognitive disabilities. Comorbidity is defined as the presence of multiple disabilities. Michaël Boissonneault and Jacques Légaré of the



university's Department of Demography came to this conclusion after assessing how individual factors are associated with variation in the public costs of healthcare by studying disabled Quebecers over the age of 65 who live in private homes. "Healthcare spending accounts for a growing share of the budgets of economically developed countries. While technological innovations have been identified as the main driver of the increase in costs in recent decades, population aging could contribute more in the years to come. It is therefore important to understand the individual characteristics associated with the high costs of health care," Légaré said.

To explore the relationship between health status and level of costs, the research team worked from an original database that links data from Quebec's RAMQ public health insurance board (Régie de l'assurance maladie du Québec) with information from the Québec Survey on Activity Limitations, Chronic Diseases and Aging, the latest survey available on the topic. It was prepared by the Quebec government's statistical institute in 1998. The data enabled the researchers to examine whether older individuals with disabilities differed in terms of healthcare costs according to the number and nature of their disabilities. Healthcare costs in related to the costs of health professional consultations and pharmaceuticals.

The researchers found that healthcare costs increased with the number of disabilities. "The costs for consultations with health professionals and the use of pharmaceuticals were about two times higher for people with two disabilities compared to those with a single disability. The costs were again slightly higher for people with three or more disabilities," Boissonneault said.

They also noted that some types of disabilities were associated with higher costs than others were. This is the case for disabilities associated with agility, mobility, and cognition. "People with disabilities related to



agility, mobility, and cognition are more likely to suffer from other disabilities simultaneously, which adds to the costs of healthcare," Boissonneault said. "This is especially true for disabilities related to cognition, which are responsible for higher costs due to the use of pharmaceuticals."

The study, one of the few of its kind to focus on the Quebec population, is important because it indicates that people with poor health are not uniform in terms of healthcare costs and that prevention may be beneficial even for people with deteriorated health. "We must pay particular attention to comorbidity and the prevalence of disabilities related to cognition in order to contain healthcare costs in the context of an aging population. This type of disability can indeed reveal the presence of pathologies such as Alzheimer's disease, which is expected to grow significantly in the coming decades," warned Légaré.

Provided by University of Montreal

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