

# Health insurance changes, access to care by patients' mental health status

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A research letter published by *JAMA Psychiatry* examined access to care before the Patient Protection and Affordable Care Act (ACA) and after the ACA for patients grouped by mental health status using a scale to assess mental illness in epidemiologic studies.

The ACA expanded health insurance to millions of Americans through insurance reforms, Medicaid expansions and subsidies for coverage in the marketplace. The ACA also expanded [mental health](#) coverage through mental health parity reforms and through the provision of essential health benefits, which included [mental health services](#).

The study by Elizabeth Sherrill, B.S., and Gilbert Gonzales, Ph.D., M.H.A., of the Vanderbilt University School of Medicine, Nashville, builds on previous research and examines changes in access to care for adults by mental health status using data from a national sample.

The final sample included 77,095 adults and they were classified according to a scale as having moderate mental illness, severe mental illness or no mental illness.

The research letter suggests adults with severe mental illness were more likely to be unemployed, have low income and have poor or fair health. The authors found:

- A decrease in uninsured adults with no mental illness and moderate and severe mental illness.

- A decrease in having no usual source of care, delayed medical care, forgone medical care and forgone prescription medications for adults with moderate mental illness.
- A decrease in forgone prescription medications and forgone mental [health](#) care for adults with severe mental illness.

The research letter notes limitations, including study design and other potential mitigating factors. The authors suggest that not finding improvement in some areas for adults with severe mental illness could be attributable to factors not fully addressed by the ACA.

"Access to care has improved for adult with MMI [moderate mental illness] and SMI [severe mental [illness](#)]. Of importance, forgone [mental health care](#) decreased significantly for individuals with SMI. However, gaps in access persist," the research letter concludes.

**More information:** *JAMA Psychiatry* (2017).  
[jamanetwork.com/journals/jamap ... psychiatry.2017.2697](https://jamanetwork.com/journals/jamap...psychiatry.2017.2697)

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