

Quality of Medical Care Received by Individuals with Mental Illnesses

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Prevalence of Diabetes Among Individuals with Psychiatric Disorders

- ◆ The prevalence of diabetes in the general population is increasing, with the highest rates reported among African Americans, Native Americans, and Mexican Americans.
- ◆ A high prevalence rate of diabetes has also been found among individuals with mental illness.
- ◆ The prevalence rate of impaired glucose tolerance among individuals with schizophrenia has been found to be twice that of the general population.
- ◆ The prevalence of diabetes in patients with bipolar disorder has been found to be two to three times higher than the general population.

- Bushe & Holt, 2004

Concerns on Individuals with Comorbid Psychiatric and Diabetes Conditions

- ◆ Concerns of diabetes among individuals with psychiatric conditions is that evidence suggests that Individuals with mental illness tend to receive poorer quality of medical care for their diabetes than those without mental illness (Frayne and colleagues, 2005)
- ◆ Goldberg and colleagues (2007) also found that individuals who have comorbid type II diabetes and severe mental illness received fewer recommended services and less education about diabetes, compared with those without serious mental illness.

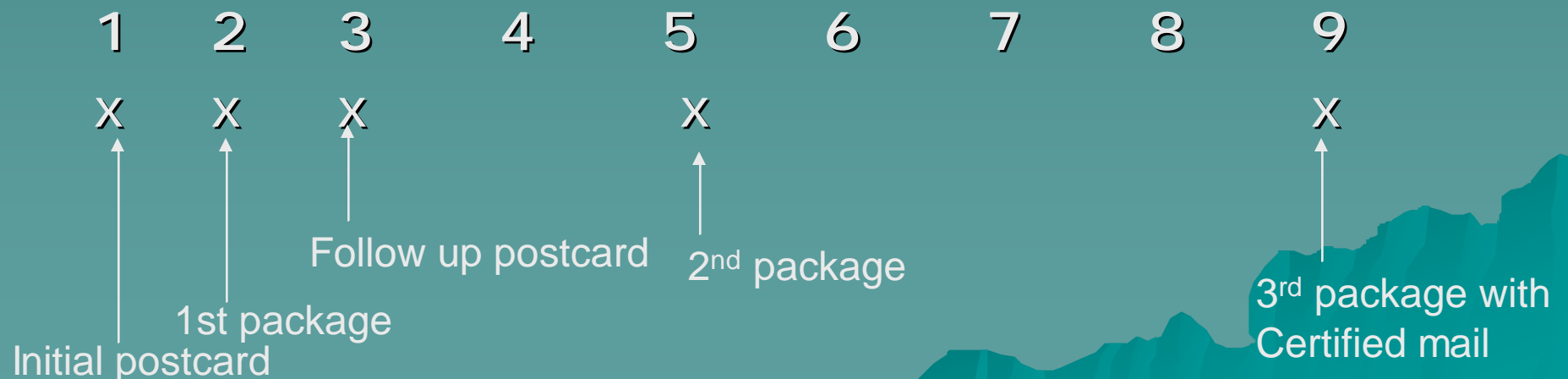
Purpose

The purpose of the study is to exam the difference in quality of diabetes care received by Medicaid recipients who suffer from diabetes with mental illness compared to those without mental illness.

Design and Method

- ◆ Population-based mail survey to stratified random selected Medicaid recipients based on diagnoses, race, and gender.
- ◆ Five steps mailing procedures recommended by Dillman (1978) and Salant & Dillman (1992).
- ◆ Survey package include cover letter, both English and Spanish surveys, preaddressed-stamped return envelop.

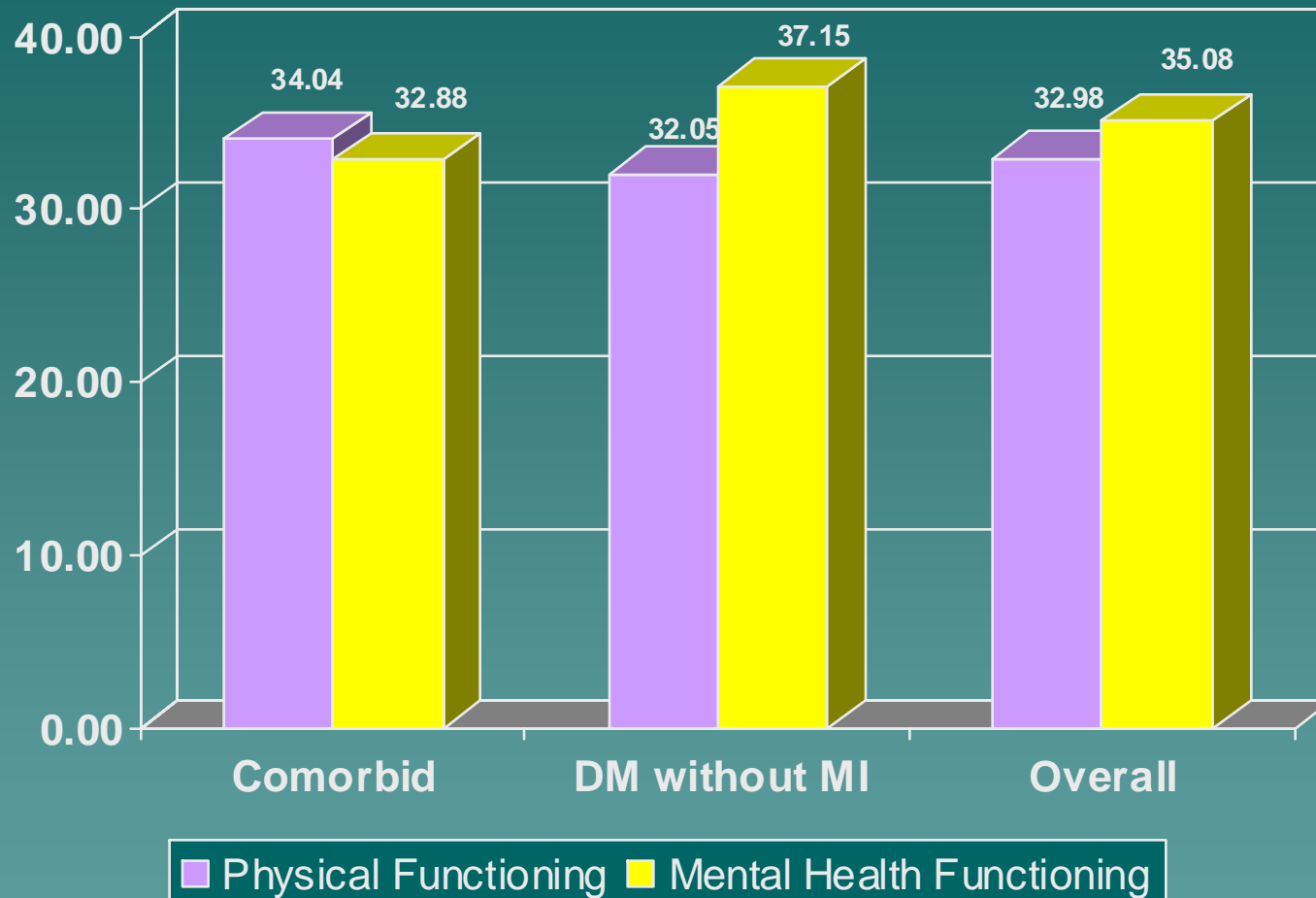
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Design and Method cont....

- ◆ Sample
 - 469 Medicaid recipients age 18 and above
 - Enrolled in MediPass rather than a managed care plan
 - Being diagnosed with diabetes based on Medicaid claims data
 - Diverse population living in Miami Dade and Monroe Counties
 - 14.3% (67) nonHispanic White, 28.4% (133) nonHispanic Black, and 57.4% (269) Hispanic
 - Average 52 years old.
- ◆ Measures
 - SF-12
 - Colorado Symptom Index
 - Both physical and mental services use as well as service specifically related to diabetes care, including eye exam, foot care, serum glucose level monitoring
 - Degree of difficulty in accessing care
 - Level of satisfaction with services used

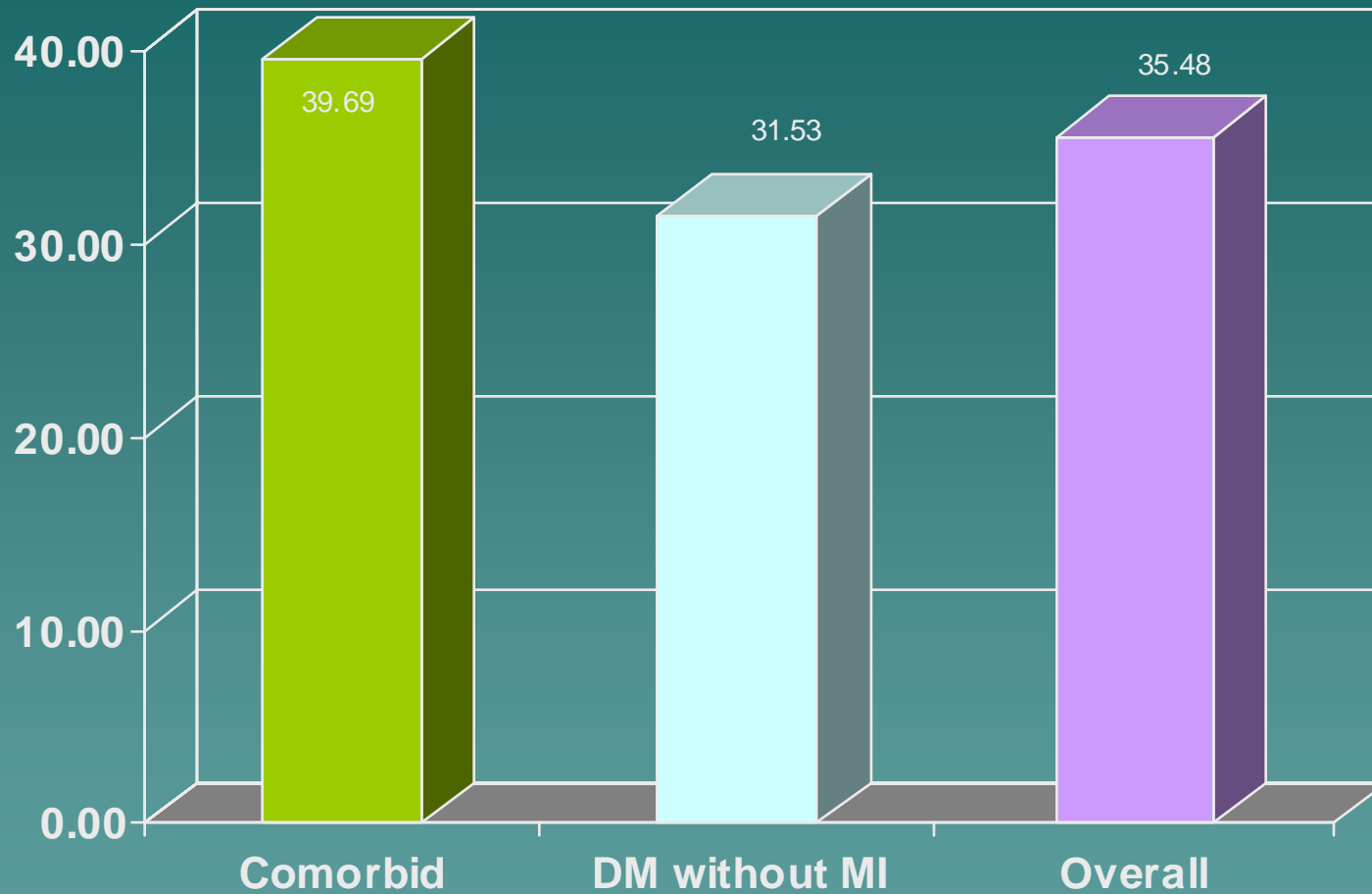
Functioning Levels (SF-12*) (Case Mix Adjusted)



Diabetic individuals without mental illness have a significant lower level of physical functioning and a higher mental health functioning level ($ps < .001$).

* A higher score indicates a higher level of functioning.

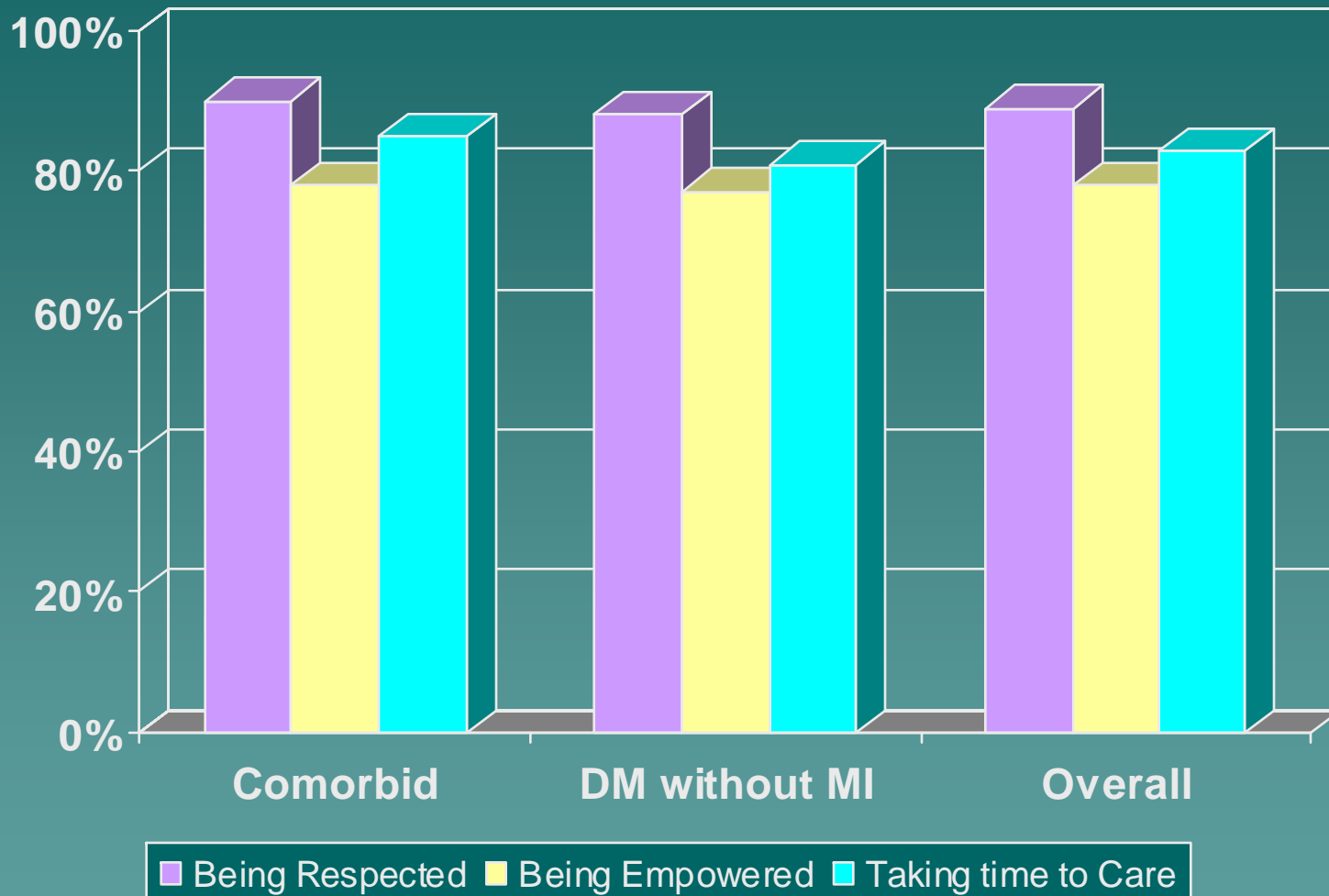
Psychopathologic Symptoms (CSI*) (Case Mix Adjusted)



Diabetic individuals without mental illness have less psychopathologic symptoms ($p < .001$).

* A higher CSI score indicates more psychopathological symptoms.

Culturally Appropriate Care (Case Mix Adjusted)

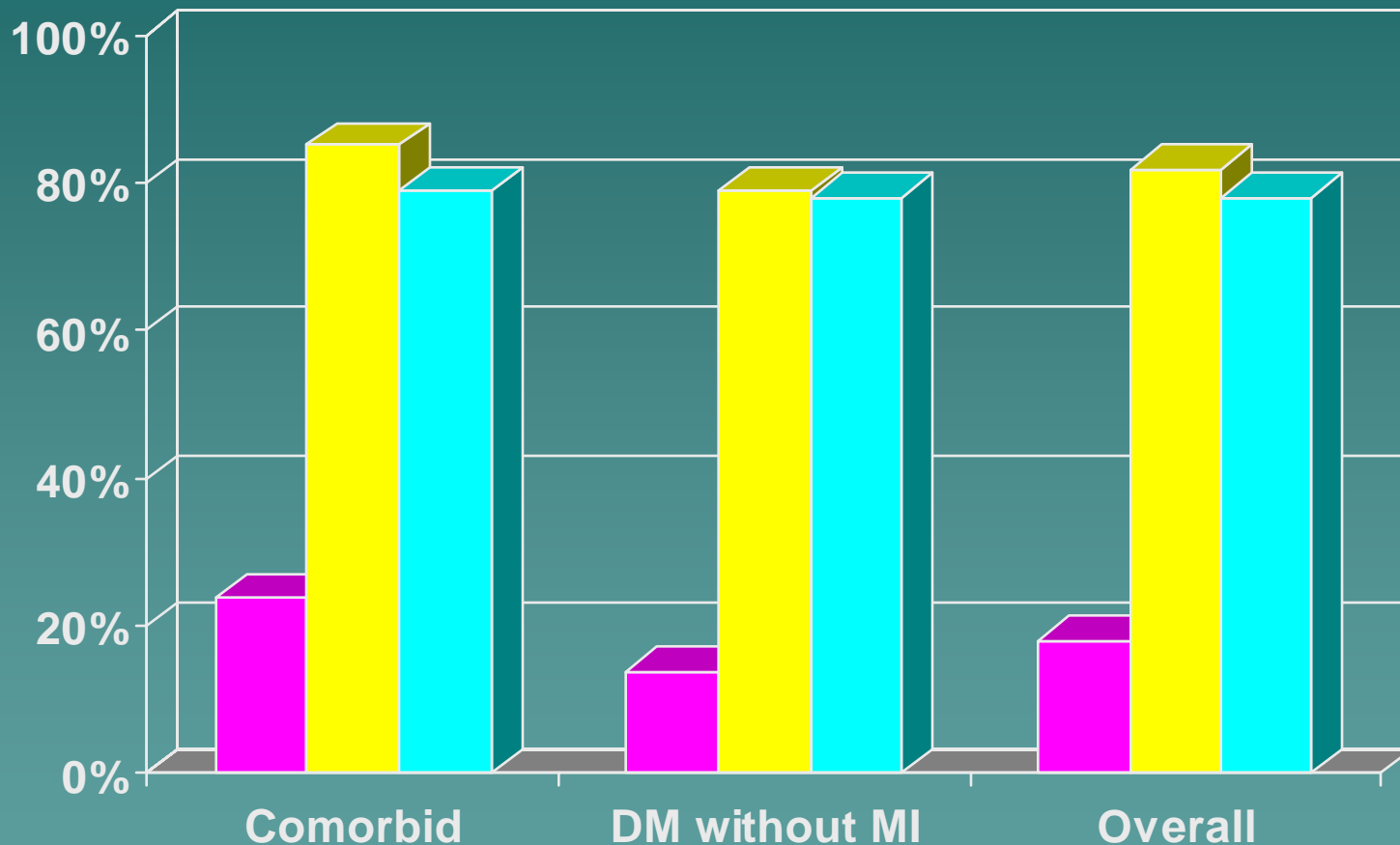


There were no differences in being treated respectfully, empowered in making health care decision, or provider taking time to care for diabetic individuals with or without mental illness ($ps > .05$)

Culturally Appropriate Care cont..

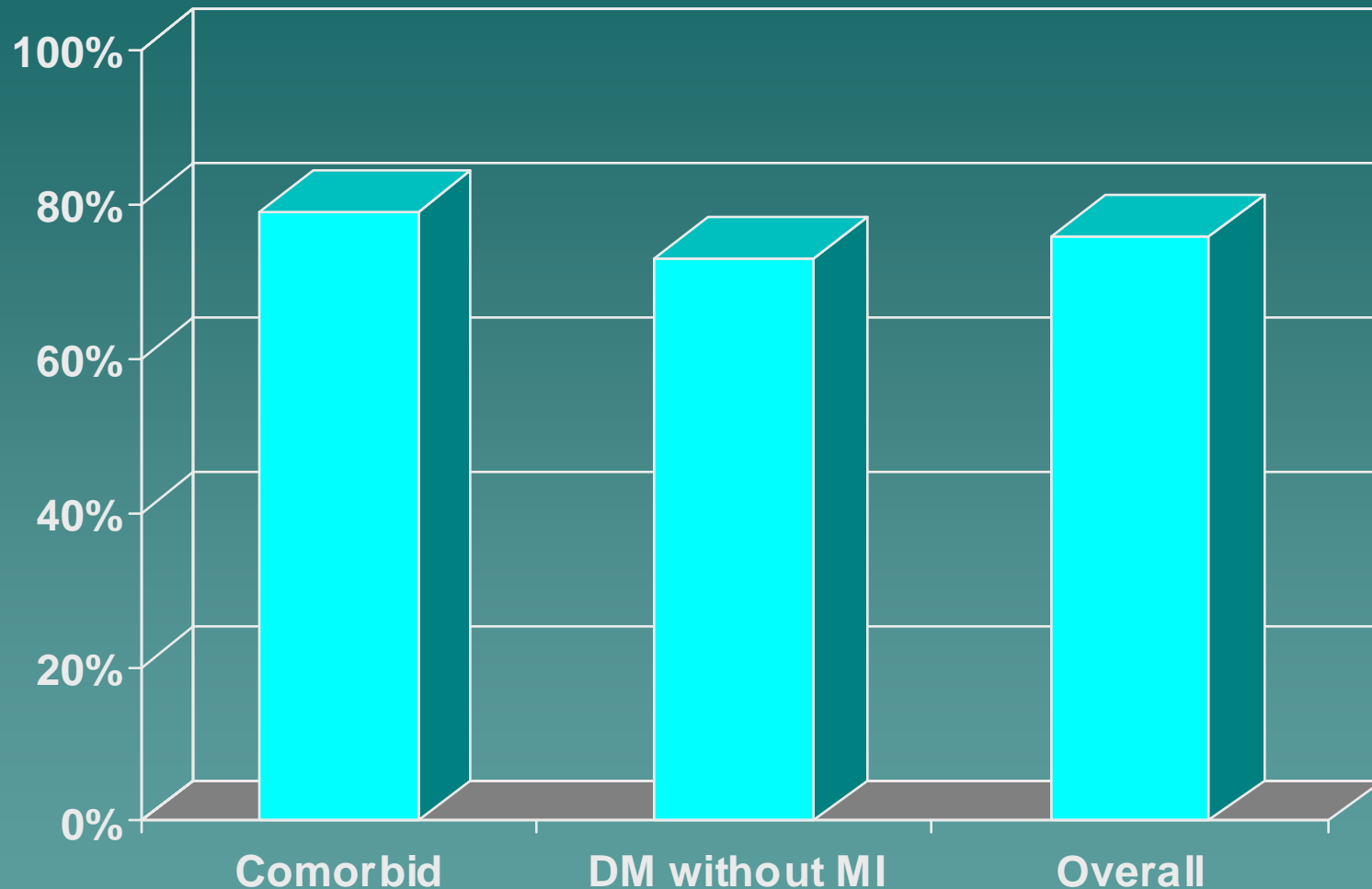
(Case Mix Adjusted)

■ Being looked down ■ Understood Cultural Value ■ Sensitive to culture background



The only significant difference was found in perceived being looked down by providers between two groups.

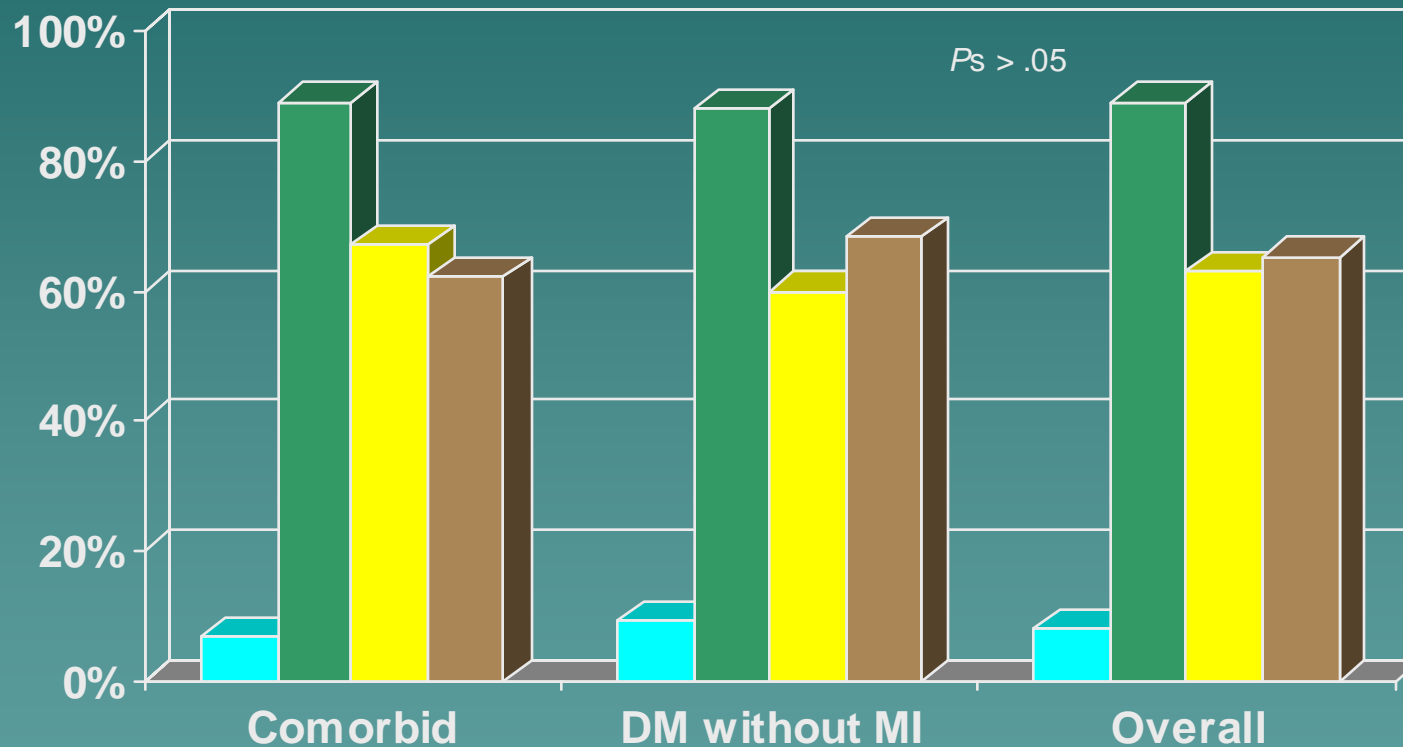
Difficulty in Obtaining Specialty Care (Case Mix Adjusted)



Overall 75% respondents reported having difficulty in getting specialty care with no significant difference found between two groups.

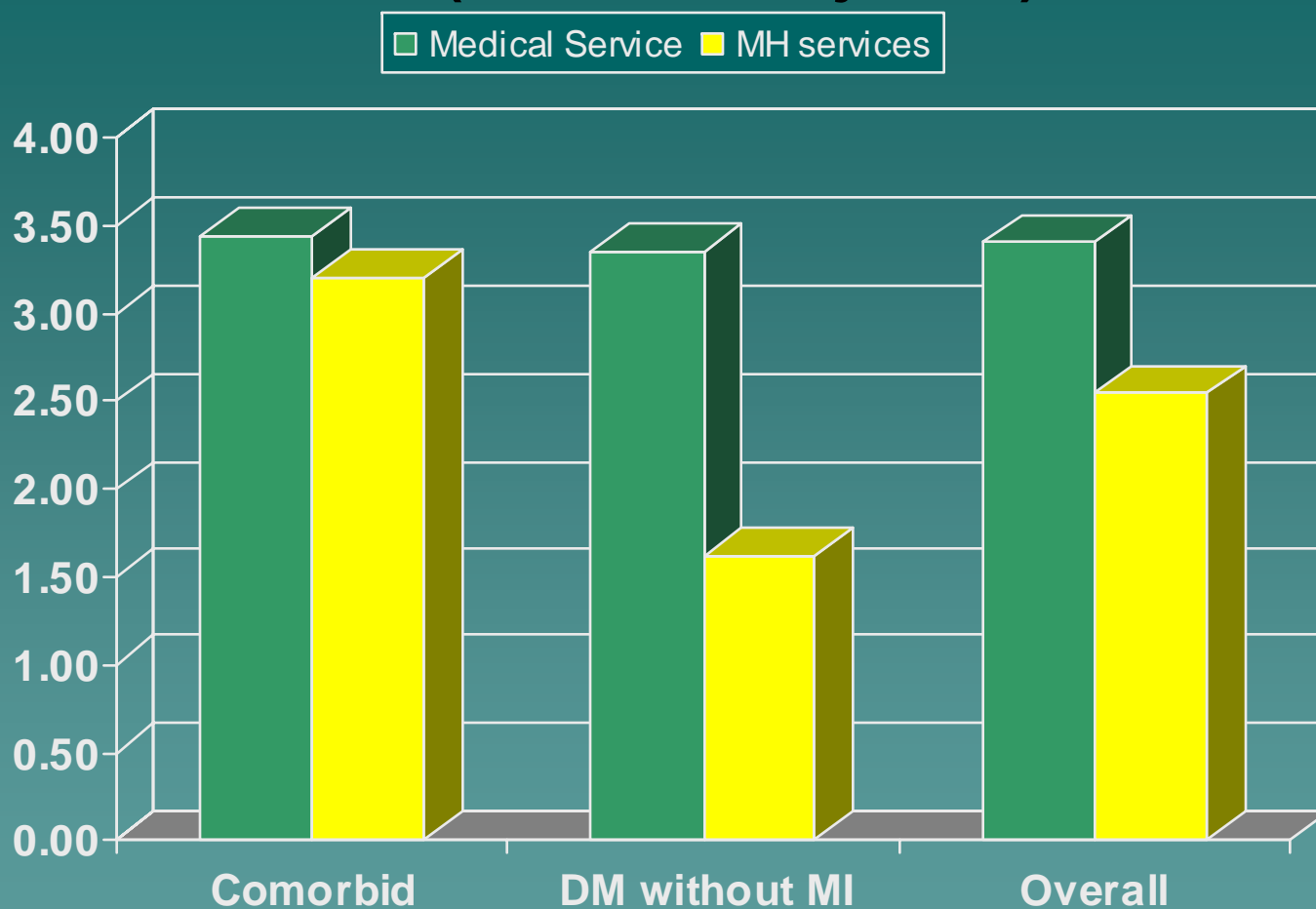
Receiving Preventive Cares (Case Mix Adjusted)

- Prevention/education program
- Feet Examination
- Monitor Serum Glucose Level
- Eye examination



*Less than 10% of diabetic individuals reported to have participated in any preventive/education program such as diet control. Less than 70% of diabetic individuals received feet or eye examination during the past year. No differences were found between groups

Satisfaction with Services Used (Case Mix Adjusted)



No difference were found in the level of satisfaction with medical services ($p > .05$) but diabetic individuals without mental illness have a significantly lower level of satisfaction with mental health services ($p < .001$).

Conclusions and Implications

- ❖ Individuals with comorbid conditions have a significantly higher level of physical functioning.
- ❖ Diabetic individuals without mental illnesses have a significantly higher mental health functioning level compared to those with comorbid conditions as expected. However, their average mental health functioning level (37.15) indicates that they were experiencing moderate degree of emotional/mental distress and could benefit from mental health care.
- ❖ There are no significant differences in receiving culturally appropriate care received by two groups, except that individuals with comorbid conditions are more likely to report being looked down by their physical care providers compared to diabetic individuals without mental illnesses.

Conclusions and Implications cont..

- ❖ More than 75% of respondents, regardless of having mental illness or not, reported having difficulty in obtaining specialty care. No difference is found between diabetic individuals with or without mental illness. This phenomena can be related to Medicaid health services system issues, such as availability of specialty providers providing services to Medicaid population.
- ❖ Less than ten percent of the participants, regardless whether having mental illness or not, reported to have participated in any preventive/education program, such as a diet control program.
- ❖ There are no significant differences in receiving prevented care, such as foot or eye examinations between two groups during the past year. However, less than 70% of the respondents received foot or eye examinations which are far lower than recommended by the American Diabetes Association.

Conclusions and Implications cont..

- ❖ There are no differences in level of satisfaction with physical services received by diabetic individuals either with or without mental illness.
- ❖ However, diabetic individuals without mental illness who used mental health services reported a significantly lower level of satisfaction with mental health services used. Increased prevalence rate of depression among diabetes patients suggests the importance of early detection and intervention for this population.

Limitations

- ◆ Limited to self-report information
- ◆ No intensity or type of services use in relation to outcomes were examined