Preventive Screening Improvements Needed for People with Physical Disabilities

The Bottom Line
Individuals with physical disabilities have far lower rates for preventive screenings and care than the general population. In Kansas, those supported by Medicaid had worse screening rates and diabetes quality of care indicators than their national counterparts.

We can improve preventive screenings and health services to improve the health of these individuals and minimize the costs of their health care.

What We’ve Learned
Substantial social, physical and environmental barriers continue to prevent people with disabilities from receiving the preventive care that they need.

The purpose of this study was to analyze the preventive screening use patterns among individuals with disabilities supported by the Kansas Home and Community-Based Services (HCBS) Physical Disability Waiver.

- Kansas Medicaid HCBS waiver recipients with physical disabilities had the lowest preventive screening rates for cervical, breast, and colon cancer when compared to individuals with physical disabilities and those without disabilities. This data is from the most recently available national sample, the 2006 Medical Expenditure Panel Survey (MEPS).
- Kansas HCBS waiver recipients also had lower screening rates for three of the four diabetes quality of care screening visits (HbA1c, lipid testing, and eye exam) and a substantially lower rate of dental visits than national comparators.
Disparities in clinical preventive care for cancer, diabetes, and dentistry likely result in later diagnosis, a great number of preventable hospitalizations, and higher costs.

Policy Change Will Help
State Medicaid agencies and public health departments must design and implement policy and program interventions that target individuals with disabilities’ specific needs and enhance preventive cancer screenings, dental care, and disease management services for this population.

Ways to Improve Preventive Screenings and Health Services
- Ensure greater accessibility to screening facilities by including: height-adjustable examination tables, adequately padded stirrups for pelvic exams, mammogram machines that adjust for height, general physical access of screening facility (e.g., parking lot, entrance, door widths, bathrooms, etc.)
- Create affordable, accessible, and reliable transportation systems
- Educate physicians on the importance of preventive care for women with disabilities
- Improve follow-up scheduling systems for review of test results with patients
- Emphasize nutrition and exercise in preventive care services for people with disabilities
- Educate radiology technicians on how to address physical barriers during screening
- Educate and remind people with disabilities about the importance of regular preventive screenings and disease management practices

About the Data
This was a retrospective study comparing (grossly) data from FY 2007 (7/2006-6/2007) Kansas Medicaid claims to the 2006 Medical Expenditure Panel Survey (MEPS) full year consolidated file.

- Kansas Medicaid Home and Community-Based Services waiver recipients with physical disabilities supported by the waiver for ≥11 months (N=7195).
- MEPS 2006 weighted sample of individuals with either 1) physical disabilities who received Medicaid and were insured all year OR 2) no disabilities with any or no health insurance.