

Disparities in Access to Pain Rehabilitation Programs for Patients with Medicaid.

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Background

- Chronic pain conditions are a rising health concern, and Medicaid beneficiaries have been disproportionately affected.
- Yet most of the interdisciplinary pain rehabilitation programs (PRP) continue to not accept patients with Medicaid insurance.
- Better understanding of this issue and raising awareness of the disparities for patients with Medicaid can improve incentives for better access to Pain Rehabilitation Programs.

Aims

The aim of this study was to evaluate limits to national accessibility of various pain rehabilitation programs for Medicaid holders.

Questions to Consider:

- 1. Do Medicaid Patients Improve with Pain Rehab?
- 2. Are Medicaid Patients able to access Pain Rehab?

Methods

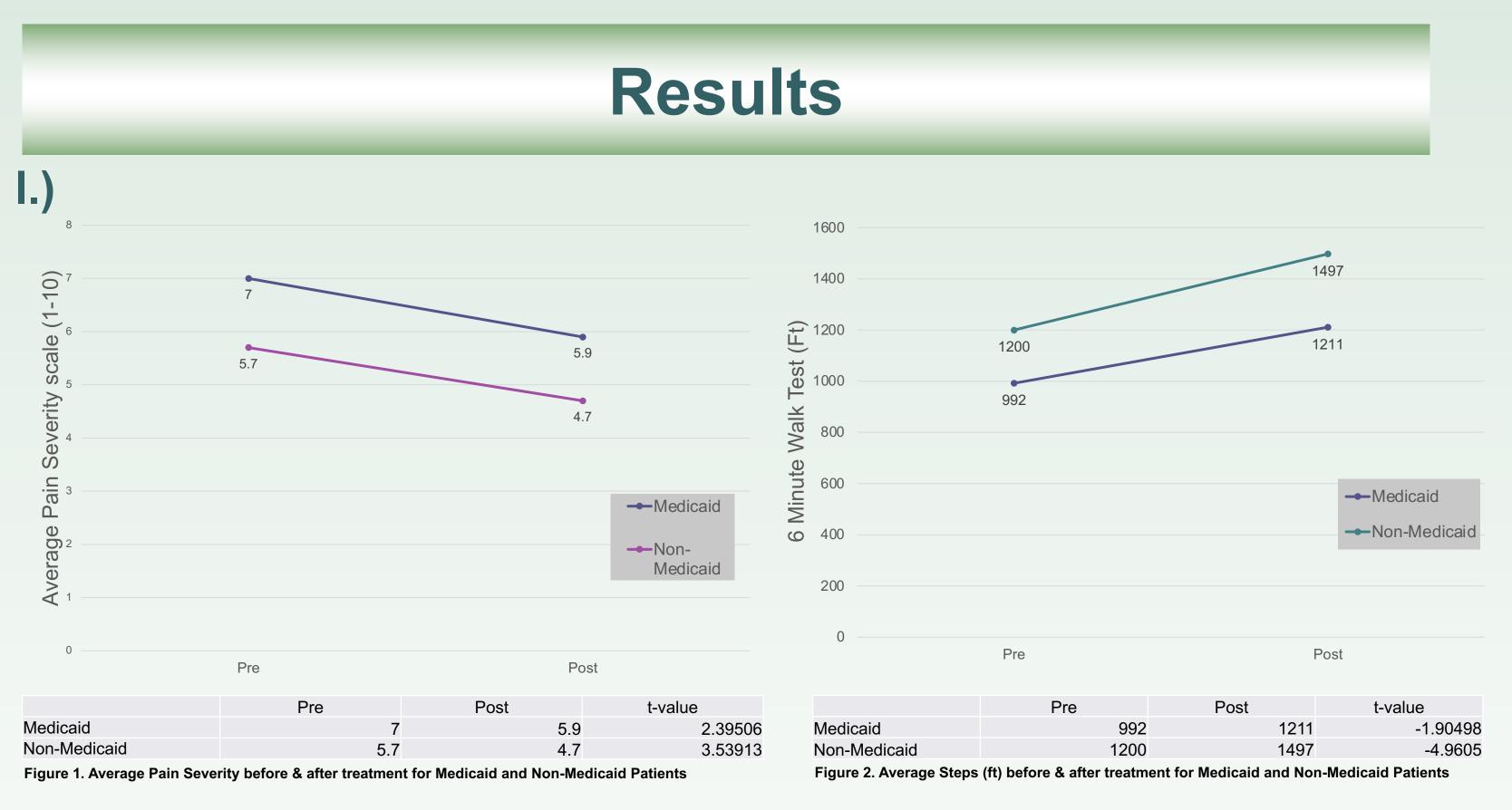
- I.) Participants: A total of 111 patients completed a 3-week interdisciplinary Pain Rehabilitation Program. Data was collected pre- and post-treatment.
 - 2-tailed t-tests were executed to compare pre & post treatment outcomes.
- II.) Programs were selected depending on their evidencebased treatment approaches to chronic pain across the biopsychosocial spectrum:



- 12 PRP from 12 different states were contacted utilizing a mock-patient script for a patient with Medicaid.
- To maintain anonymity, calls were made with an alias.

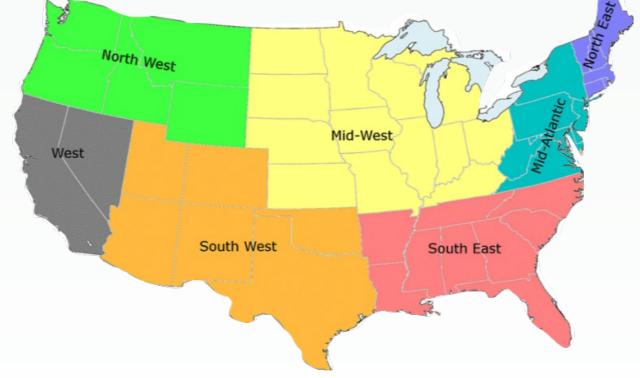
Demographics

Characteristic	Non-Medicaid (n = 84)	Medicaid (n = 27)
Age (in years); Mean (SD)	57 (13.1)	47 (12.8)
Gender % (n)		
Female (0)	70.7% (65)	77.3% (22)
Male (1)	29.2 (19)	23% (5)
Race % (n)		
Caucasian	77.4% (65)	25.9% (7)
African American	16.7% (14)	63% (17)
Other	5.9 % (5)	11.1% (3)



II.)

• From 12 PRP, 50% of the clinics reported that they did not accept Medicaid Insurance; the other 50% reported they did accept in-state Medicaid as a form of payment.



 The South-Eastern United States accounted for all rejection of Medicaid recorded in the study.

Region	Accepts Medicaid	Rejects Medicaid	
South-East	1	6	
Mid-West	3	-	
West	1	-	
North-East	1	_	
Table 2. A secretaria and rejection of Medicaid appropriate by various			

Conclusions

1.)

• Findings demonstrate that Medicaid patients experience significant improvement that is consistent with results from Non-Medicaid patients.

II.)

- Out of all the regions covered in the study, members of Medicaid residing in the SE are more likely to have their coverage rejected.
- The findings further affirm the need for more pain rehabilitation programs to accept Medicaid participants as well as the need for more access to non-opioid and non-surgical treatments for chronic pain.

Limitations:

- Due to the limited sample size, the study lacked diversity. This flaw can be mended through broadening the sample size and in-turn the ethic spectrum.
- Only generic questions on healthcare plan arose.
 These pertained to Medicaid membership or lack thereof.
- Results of this study do not wholly represent the thousands of remaining programs that have yet to be analyzed.

References

Scan QR code for references:



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