



# Unmet Health Care Needs of Ohio Adults

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## INTRODUCTION

An important measure of health care quality is whether individuals believe their health care needs are being met. These “unmet needs” involve an individual’s perceptions, which are not necessarily related to the care they actually receive. Consider two people who each have similar trouble scheduling a dental screening. For the person who has a painful toothache, such a delay can have a significant impact on her health and well-being. Yet for someone who feels fine, such delays may only be a minor inconvenience.

The 2017 Ohio Medicaid Assessment Survey (OMAS) provides estimates of the percent of Ohio adults who have three common types of unmet needs: dental, vision, and mental health care. This brief describes the prevalence of such unmet needs and the demographic and other characteristics associated with them. Analyses focus on adults with a developmental disability, and those covered by Medicaid as well as lower-income individuals who have other types of insurance or are uninsured. (*Among adults, “lower-income” refers to individuals in households with incomes ≤138% of the federal poverty level [FPL].*)

## METHODS

OMAS is a telephone survey that samples both landline and cell phones in Ohio. The 2017 version is the seventh iteration and researchers completed 39,711 interviews with adults during second half of 2017. The findings reported in this brief are weighted to be representative of all non-institutionalized adults in Ohio.

To measure unmet health care needs, OMAS asked a series of questions: “During the past 12 months, was there a time when you needed any of the following, but could not get it at that time: dental care/vision care or eye glasses/mental health care or counseling services?” Respondents who

answered “yes” were classified as having unmet needs for that type of care.

## RESULTS

Overall, 11.5% of all Ohio adults had unmet dental needs, 10.1% had unmet vision needs, and 5.9% had unmet mental health needs (Figure 1). Compared to the general population, adults with Medicaid and those with a developmental disability were more likely to have unmet needs. For example, 15.2% of adults with Medicaid reported unmet vision care needs. Among adults with developmental disability, there were no statistically significant differences among the percent who had unmet dental needs versus unmet vision needs or unmet mental health needs.

**Table 1.** Percent of African-American, Hispanic, and White adults with unmet health needs, 2017 OMAS

	Dental	Vision	Mental Health
African-American, non-Hispanic	18.2%	14.7%	8.2%
Hispanic (any race)	20.2%	16.2%	9.8%
White, non-Hispanic	10.3%	9.2%	5.5%

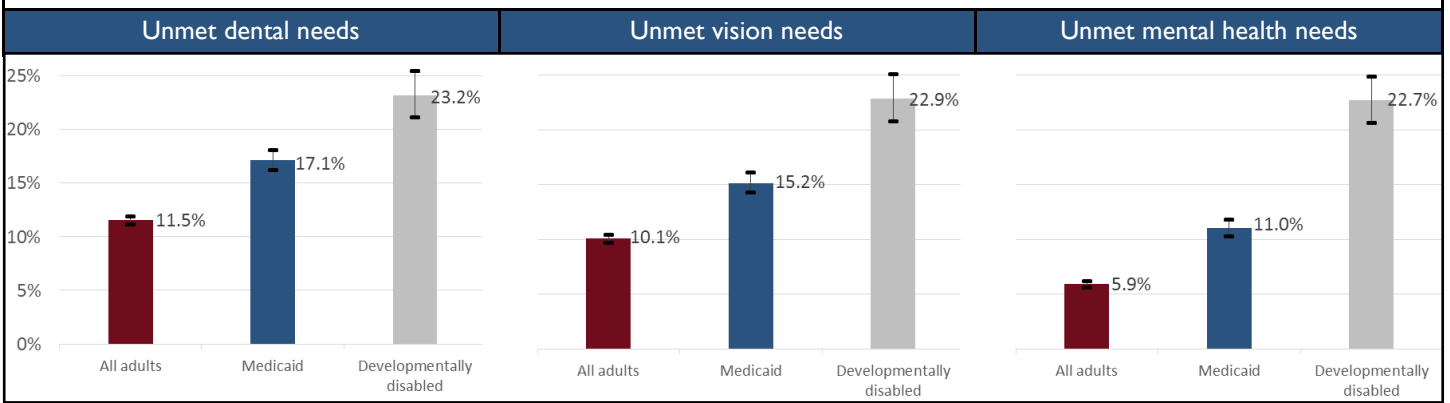
Across the different types of unmet needs, White adults had fewer unmet needs compared to African-American or Hispanic adults (Table 1). About 5.5% of Whites had unmet mental health needs, for example, compared to 8.2% of African-Americans and 9.8% of Hispanics. There were no significant differences by gender (table not shown).

Analyses that adjusted for differences in demographics and health status estimated that lower-income adults with Medicaid were no more likely than those with employer-sponsored insurance to have unmet health needs.

## KEY FINDINGS

- Adults with developmental disabilities have much higher rates of unmet dental care, vision care, and mental health needs compared to the general population.
- The percent of Ohio adults with unmet dental needs and unmet vision needs each declined between 2015 and 2017. However, the percent of Ohio adults with unmet mental health needs increased during this period. Similar changes were observed for adults with Medicaid and for adults with a developmental disability.

**Figure 1.** Percent (with 90% CIs) of adult subpopulations with unmet dental, vision or mental health needs, 2017 OMAS



However, uninsured lower-income adults were consistently more likely to have some type of unmet health need. For example, a statistical model estimated that the probability of typical lower-income adults with Medicaid having unmet dental care needs was 14%, compared to 15% for lower-income adults with employer-sponsored insurance and 31% for lower-income adults who were uninsured (Figure 2). Analyses found similar differences for unmet vision care needs and unmet mental health needs in this subpopulation. Please note that dental coverage is not part of the standard Medicare benefit package, so many individuals with Medicare lack dental coverage.

**Trends over time**

The percent of Ohio adults with unmet dental needs declined to 11.5% in 2017 from 12.6% in 2015, while unmet

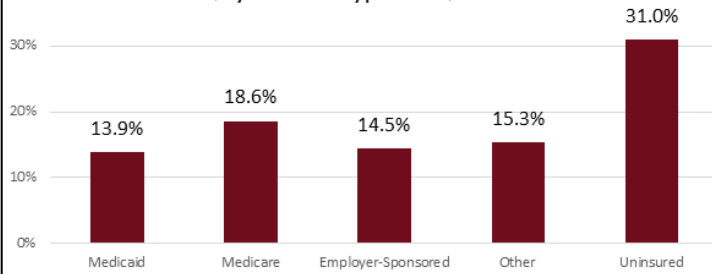
vision needs declined to 10.1% from 11.0% during the same period (Table 2). However, the percent of Ohio adults with unmet mental health needs increased to 5.9% in 2017 from 4.2% in 2015. Similar changes were observed for adults with Medicaid and those with developmental disabilities, although the changes for unmet vision care needs were not statistically significant.

**POLICY CONSIDERATIONS**

- Future research should examine why adults with developmental disabilities have much higher rates of unmet dental care, vision care, and mental health needs compared to the general population.
- Medicaid is comparable to employer-sponsored insurance in meeting the health needs of lower-income adults. Changes in the percent of lower-income adults who are uninsured may result in changes in their unmet health needs.
- Since 2015, the decline in unmet dental care and vision care needs is encouraging. However, policy-makers should consider future research and interventions to understand and address the increase in unmet mental health needs.

For more information about the methodology and findings in this brief, please visit [www.grc.osu.edu/OMAS](http://www.grc.osu.edu/OMAS).

**Figure 2.** Adjusted percentage of lower income adults having unmet dental needs, by insurance type/status, 2017 OMAS



**Table 2.** Percent of adults with unmet needs among adult subpopulations, 2015 and 2017

	Unmet dental needs		Unmet vision needs		Unmet mental health needs	
	2015	2017	2015	2017	2015	2017
All adults	12.6%	11.5%*	11.0%	10.1%*	4.2%	5.9%*
Adults with Medicaid	20.6%	17.1%*	16.5%	15.2%	8.2%	11.0%*
Adults with developmental disability	29.4%	23.2%*	26.1%	22.9%	18.4%	22.7%*

\* Statistically significant change from 2015