

***Appendix #3***

***Adults with Special  
Health Care Needs  
(Adult SHCN)  
Screener***



# ***Adults with Special Health Care Needs (Adult SHCN) Screener***

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## ***Technical Summary***

### **DESCRIPTION**

The Adult Special Health Care Needs (Adult SHCN) Screener is a set of five questions used to identify individuals with chronic disease or disability. These questions are designed to be self or telephone-administered. The Adult SHCN Screener was originally developed to identify a population with chronic conditions or disability for the purpose of quality assessment.

The screener takes approximately one minute to administer by telephone for a single respondent. It takes a similar amount of time to complete when self-administrated. The Adult SHCN Screener is currently available only in English; however, a Spanish-language version is under development.

### ***Conceptual approach***

The Adult SHCN Screener uses a consequences-based approach to define special health care needs and disability. The screener criteria are independent of diagnostic label or etiology. They focus on limitations in functioning and type and amount of services needed as a result of having an on-going health condition rather than the presence of a specific diagnosis or type of disability.

### ***Definitional criteria***

The screening tool uses consequences-based criteria to identify adults with chronic or special health care needs. All of the following must be present to qualify:

- The individual currently experiences a specific consequence;
- The consequence is due to a medical, behavioral, or other health condition;

- The duration or expected duration of the condition is 12 months or longer.

The first part of each Adult SHCN Screener question asks whether the respondent experiences one of five different health consequences:

1. Use or need of prescription medication;
2. Above average use or need of medical care, mental health, or other health services;
3. Functional limitations;
4. Use or need of specialized therapies (e.g., OT, PT, speech);
5. Treatment or counseling for mental health, substance abuse, or emotional problems.

The second and third parts of each screening question<sup>†</sup> ask those responding “yes” to the first part of the question whether the specific consequence is due to any kind of health condition and, if so, whether that condition has lasted or is expected to last for at least 12 months.

All three parts of at least one screener question (or, in the case of question 5, both parts) must be answered “yes” in order for a person to meet the Adult SHCN Screener criteria.

## BACKGROUND

The Adult SHCN Screener was developed in response to the need for an efficient, standardized method of identifying adults with chronic or special health care needs for the purposes of quality assessment, potential care management, and other follow-up activities.

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<sup>†</sup> Question 5 of the screener is a two-part question; both are answered “yes” to qualify.

The Adult SHCN screener uses a theoretical framework originally developed to identify children with special health care needs for epidemiological purposes.<sup>1</sup> This framework draws upon research indicating that childhood chronic conditions often produce similar consequences in terms of functioning and service use.<sup>2,3,4</sup> Extensive research supports the validity of non-condition specific criteria to comprehensively identify children across the range and diversity of chronic disease and disability.<sup>5,6</sup>

Under the impetus of the new managed care provisions of the Balanced Budget Act of 1997, the Centers for Medicare and Medicaid Services (CMS) recognized the need for research to address gaps among available methods for identifying adults with chronic disease or disability. As a result, CMS (then HCFA) contracted with FACCT–The Foundation for Accountability to develop and test a short, survey-based screening tool for adults using the consequences-based, non-condition specific approach first developed to identify children. The goal was an instrument with the flexibility to be used in a variety of settings to identify adults with a broad range of special health care needs for which assessment for care management and quality monitoring might be appropriate.

The development of non-condition specific methodology for identifying adults is important for several reasons:

- The utility and accuracy of methods that rely upon administrative data is constrained by the availability, reliability, and inconsistencies of claims and encounter records;
- New health plan enrollees do not have administrative records available. Consequently, other methods are needed if they are to be screened for special health care needs at the point of enrollment;
- Diagnosis-based approaches miss people whose special health needs or chronic conditions are not yet diagnosed, are more difficult to diagnose, or are of the type commonly under-diagnosed (e.g., diabetes, depression,

lupus). It is not unusual for symptoms and consequences to be present for a period of time before formal diagnosis occurs;

- Diagnostic labels alone do not convey the extent of disease burden or disability experienced;
- Diagnosis-based methods are biased towards identifying individuals with access to medical care.

Researchers at FACCT built on their previous work to develop an adult version of the Children with Special Health Care Screener. The process leading to the Adult SHCN Screener described here included expert input and review from a specially convened national advisory committee, cognitive testing with adults with chronic illness or disability, and refinements based on pilot testing of earlier versions.

## TESTING AND USE HISTORY

### *Testing*

During Spring 2001, the Adult SHCN Screener and other survey questions were administered by telephone to 2,500 adult Ohio Medicaid clients eligible through Temporary Aid to Needy Families (TANF) and 900 adult clients enrolled in Ohio Medicaid through the Supplemental Security Income (SSI) eligibility. A total of 3,400 telephone survey interviews were collected. The SSI sample included Medicaid clients under 65 years old (n = 650) and over 65 years old (n = 250). The majority of clients in the TANF sample (n = 2,100) were enrolled in one of three Ohio Medicaid managed care organizations. The remainder of the TANF sample were covered by the Medicaid Fee-for-Service program (n= 400).

In addition to the Adult SHCN Screener, the telephone interview included disability questions from the National Health Interview Survey, good health days questions developed by the Centers for Disease Control, the SF-12 health status

instrument, as well as other questions on utilization of services, and social and behavioral characteristics of respondents.

The study design included obtaining encounter or claims data for all survey respondents in order to compare survey-based findings with administrative data-based methods of identifying people with special health care needs. Researchers used software from the 3M Clinical Risk Groups (CRGs) administrative data-based clinical classification system to assign each respondent into a category of chronic, significant acute or healthy.

### ***Proportion identified***

In the study summarized above, the five-item Adult SHCN Screener identified approximately 36 percent of the TANF sample, which was predominately females (92%) between age 18 and 45, as having a chronic condition or special health care need.<sup>7</sup> In the same study, the screening tool identified approximately 93 percent of the SSI sample.<sup>7</sup>

Individuals identified by the Adult SHCN Screener differed dramatically and significantly from those not identified in terms of overall health status, level of disability and functional limitations, and in their need for or use of services. In the TANF sample:

- About half of the individuals identified as having special health care needs (SHCN) reported “fair or poor” health compared to only 1 in 10 of those not identified.
- One in 4 with SHCN reported experiencing two or more limitations in activities of daily living (ADLs) compared to 1 in 100 of the group not identified.
- Over 40 percent of the SHCN group reported 10 or more outpatient visits during the past year compared to 16 percent of those without SHCN.

- Individuals with SHCN needed or used specialized services, such as medical equipment or special therapies, 6 to 7 times more frequently than did individuals who did not screen positively for having chronic or special health care needs.
- One in 4 with SHCN needed or used treatment or counseling during the past year for emotional, mental health, or substance abuse problems compared to less than 1 in 20 in the group not identified by the screener.

Several articles reporting findings from this study, including comparisons of survey-based and administrative-based identification methods, are under development. A poster presentation of Adult SHCN Screening results accepted for display during the 2001 annual meeting of the Academy for Health Services Research is included in this appendix.<sup>7</sup>

### ***Use History***

The Adult SHCN Screener is a fairly new instrument. Although experience with its use is limited, some early examples are available. The State of Ohio included the Adult SHCN Screener in the 2002 Consumer Assessment of Health Plans Survey (CAHPS) administered in a statewide sample of clients enrolled in the Ohio Fee-for-Service Medicaid program.<sup>8</sup> For two consecutive years (2001 and 2002), the State of Iowa has used the Adult SHCN Screener in several general population and Medicaid studies.<sup>9</sup> Neighborhood Health Plan, a Medicaid managed care organization in Massachusetts, is administering a version of the Adult SHCN Screener to new health plan enrollees to identify special health care needs.<sup>10</sup> The Adult SHCN Screener was recently administered in a national online survey to adolescents age 13 to 18.

### **AVAILABILITY and COST**

The Adult SHCN Screener is available at no cost from FACCT—The Foundation for Accountability. A copy can be obtained by emailing [dread@facct.org](mailto:dread@facct.org) or by calling (503) 546-9391.



## TECHNICAL SUPPORT

Technical support for administering, scoring, and interpreting results of the Adult SHCN Screener can be obtained by e-mailing [dread@facct.org](mailto:dread@facct.org) . Scoring programs, test data sets, and supporting materials are also available upon request.

## OTHER CONSIDERATIONS

Preliminary analyses of Adult SHCN Screener data suggest that the type and number of screening criteria on which an individual qualifies may be useful for prioritizing follow-up. The use of the Adult SHCN Screener to identify individuals for case management and other types of assessments or tracking is just beginning to be studied on a formal basis.

When screening adults, it is important to ensure that individuals unable to respond for themselves because of health or cognitive limitations are not excluded from the process. One way to accomplish this is to include an option for response by a proxy familiar with the targeted individual's health issues. In the Ohio Adult Medicaid study summarized in the *Testing and Use History* section above, the telephone interview protocol included queries to identify situations in which it might be necessary for another person to answer as a proxy for the targeted respondent. In the TANF sample, less than 2 percent of the interviews were obtained via a proxy responder. However, approximately 1 in 4 interviews in the SSI sample were collected through proxy responders.

## REFERENCES

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- <sup>2</sup> Pless I, Roghmann K. Chronic illness and its consequences: observations based on three epidemiologic surveys. *Pediatrics*. 1971;79:351-359.
- <sup>3</sup> Stein REK and Jessop DJ: What diagnosis does not tell? The case for a noncategorical approach to chronic illness in childhood. *Social Science and Medicine*. 1989;29:769-778.
- <sup>4</sup> Newacheck P, Taylor WR. Childhood chronic illness: prevalence, severity and impact. *Am J Pub Health*. 1992;82:364-371.
- <sup>5</sup> Stein REK, Westbrook LE, Bauman LJ. Questionnaire for identifying children with chronic conditions (QuICCC): a measure based on a noncategorical approach. *Pediatrics*. 1997;99:513-521.
- <sup>6</sup> Bethell CD, Read D, Neff J, Blumberg SJ, Stein REK, Sharp V, Newacheck P. Comparison of the children with special health care needs screener to the questionnaire for identifying children with chronic conditions—revised. *Ambulatory Pediatrics*. 2002;2:49-57.
- <sup>7</sup> Bethell CD, Read D, Hendryx M, Hornbrook M, Sharp VL. Identifying adults with chronic or special health care needs in managed care. [Poster presentation.] Academy for Health Services Research, June 2001. Abstract available at <http://academyhealth.org/abstracts/2001/managedcare/bethell/htm> .
- <sup>8</sup> For more information, contact Rosemary Chaudry of the Ohio Department of Jobs and Family Services at [chaudr@odjfs.state.oh.us](mailto:chaudr@odjfs.state.oh.us) .
- <sup>9</sup> For more information, contact Peter C. Damiano at [peter-damiano@uiowa.edu](mailto:peter-damiano@uiowa.edu) .
- <sup>10</sup> For more information, contact Pamela Gossman at [Pamela\\_Gossman@nhp.org](mailto:Pamela_Gossman@nhp.org) .



***Adult SHCN  
Screenener***



## Adults with Special Health Care Needs (Adult SHCN) Screener (mail or telephone)

1. Do you currently need or take **prescription medicine** (*other than vitamins or birth control pills*)?
  - Yes → Go to Question 1a
  - No → Go to Question 2
  - 1a. Is this because of ANY medical, mental health or other health condition?
    - Yes → Go to Question 1b
    - No → Go to Question 2
  - 1b. Is this a condition that has lasted or is expected to last for at least 12 months?
    - Yes
    - No
2. Do you need or use **medical care, mental health or other health services** on a regular basis?
  - Yes → Go to Question 2a
  - No → Go to Question 3
  - 2a. Is this because of ANY medical, mental health or other health condition?
    - Yes → Go to Question 2b
    - No → Go to Question 3
  - 2b. Is this a condition that has lasted or is expected to last for at least 12 months?
    - Yes
    - No
3. Do you have difficulty doing or need assistance to do **day-to-day activities**? (*for example: work, go to school, do housework, socialize, cook, do paperwork*)
  - Yes → Go to Question 3a
  - No → Go to Question 4
  - 3a. Is this because of ANY medical, mental health or other health condition?
    - Yes → Go to Question 3b
    - No → Go to Question 4
  - 3b. Is this a condition that has lasted or is expected to last for at least 12 months?
    - Yes
    - No
4. Do you need or get **special therapy**? (*for example: physical, occupational, speech or respiratory therapy*)
  - Yes → Go to Question 4a
  - No → Go to Question 5
  - 4a. Is this because of ANY medical, mental health or other health condition?
    - Yes → Go to Question 4b
    - No → Go to Question 5
  - 4b. Is this a condition that has lasted or is expected to last for at least 12 months?
    - Yes
    - No
5. Do you need or get **treatment or counseling** for any kind of mental health, substance abuse or emotional problem?
  - Yes → Go to Question 5a
  - No
  - 5a. Has this problem lasted or is it expected to last for at least 12 months?
    - Yes
    - No

# Scoring the Adult with Special Health Care Needs (Adult SHCN) Screening Tool

The Adult SHCN screener uses consequences-based criteria to screen for persons with chronic or special health needs. To qualify as having chronic or special health needs, the following set of conditions must be met:

- a) The person currently experiences a specific service use or functioning consequence.
- b) The consequence is due to a medical, mental or other health condition.
- c) The duration or expected duration of the condition is 12 months or longer.

The first part of each screener question asks whether a person experiences one of five different health consequences:

- 1) Use or need of prescription medication (except vitamins or birth control pills)
- 2) Above average use or need of medical, mental health or other health services
- 3) Functional limitations
- 4) Use or need of specialized therapies (OT, PT, speech, etc.)
- 5) Treatment or counseling for mental health, substance abuse or emotional problems

The second and third parts\* of each screener question ask those responding “yes” to the first part of the question whether the consequence is due to any kind of health condition and if so, whether that condition has lasted or is expected to last for at least 12 months.

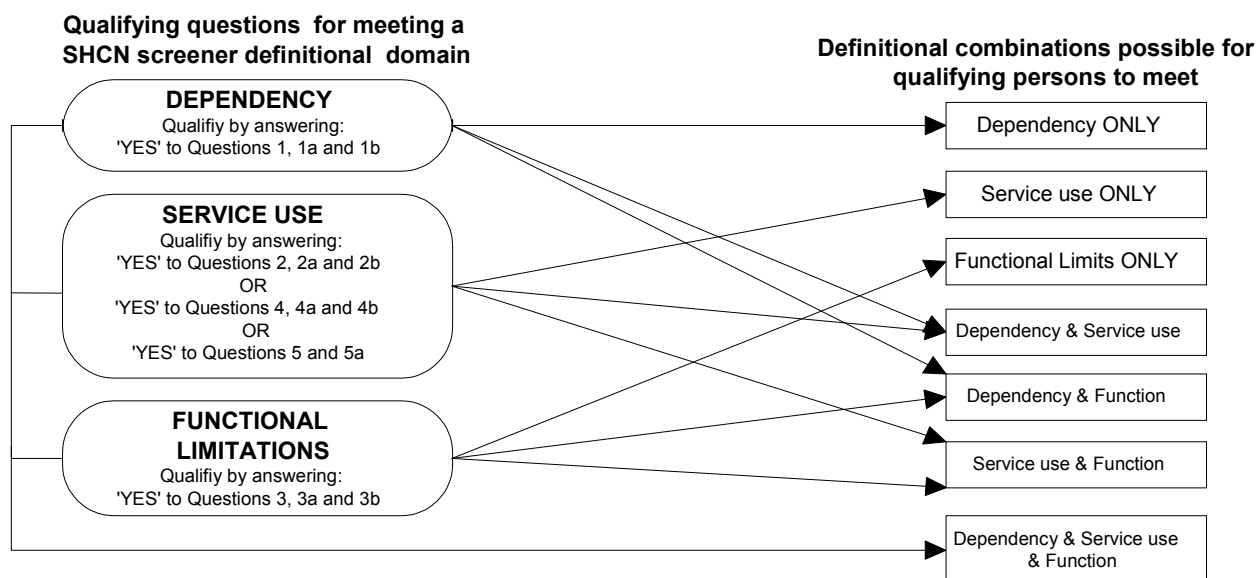
*\*NOTE: Screener question 5 is a two-part question. Both parts must be answered “yes” to qualify.*

All three parts of at least one screener question (or in the case of question 5, the two parts) must be answered “yes” in order for an adult to meet any one of the five SHCN screener criteria for having a chronic condition or special health care need. The five criteria are not mutually exclusive and a person may qualify only a single criterion or any combination of the five.

The Adult SHCN screener has three “definitional domains”. These are:

- 1) Dependency on prescription medications
- 2) Service use above that considered usual or routine
- 3) Functional limitations

The definitional domains are not mutually exclusive categories. A person meeting the screener criteria for having a chronic condition may qualify for one or more definitional domains (see diagram below). In addition to the proposed scoring of meeting at least one qualifying criterion, the field trial study will test additional scoring options using type and number of qualifying criteria and definitional domain combinations.



***Identifying Adults  
with Chronic or  
Special Health Care  
Needs: Evaluation  
of a Short  
Screening Tool***

***Poster presentation  
Academy for  
Health Services Research  
Annual Meeting***

***June 2001***





# Identifying Adults with Chronic or Special Health Care Needs: Evaluation of a Short Screening Tool

Christina Bethell, PhD, MPH, Debra Read, MPH

## Background

Identification of adults with chronic or special health care needs for the purposes of assessing and improving their health and health care quality is a need shared by Federal, State and local health agencies, health plans, providers and consumer organizations alike. An efficient, standardized survey-based method to identify adults with special health care needs (SHCN) is not currently available.

## Study Objective

The goal of this study is to specify an accurate, efficient, and flexible approach to identifying adults with special health care needs with the potential for standardized use in Medicaid populations.

The Adult SHCN Screener tested for this purpose includes five survey items asking whether specific health consequences are experienced. To qualify as having a special health care need, an individual must indicate that he or she experiences at least one of these five consequences and that the specific consequence is due to a medical, mental health or other health condition lasting or expected to last at least 12 months. The screening tool uses consequences-based, rather than condition-based criteria to identify adults with special health care needs. That is, a formally diagnosed condition is not required in order for an individual to qualify. Likewise, individuals who are not currently experiencing consequences from a diagnosed condition may not be identified by the screener criteria. See **Exhibit 1** for a copy of the screening tool evaluated in this study.

## Research Questions

1. Population Identified: Does the proportion of adults identified by the Adult SHCN Screener have face validity and vary as expected across population subgroups?
2. Expected Associations: Does the Adult SHCN Screener exhibit predictive and concurrent validity as demonstrated by expected associations observed among study variables indicative of chronic or special health care needs, functional status and the level of health and health service needs?

## Methods

The Adult SHCN Screener was administered by telephone in a sample of Medicaid clients enrolled in managed care or fee for service health systems (n = 3,222). Individuals eligible for Medicaid through the Temporary Aid to Needy Families (TANF) and Supplemental Security Income (SSI) were included. See **Table 1**.

The proportion and type of adults identified were evaluated and compared to respondents' verbatim reports of current health conditions, health and functional statuses, and use or need for health services.

### EXHIBIT 1: Adult SHCN Screener

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1. Do you currently need or take **prescription medicine** (*other than vitamins or birth control pills*)?
    - 1a. Is this because of ANY medical, mental health or other health condition?
    - 1b. Is this a condition that has lasted or is expected to last for at least 12 months?
  2. Do you need or use **medical care, mental health or other health services** on a regular basis?
    - 2a. Is this because of ANY medical, mental health or other health condition?
    - 2b. Is this a condition that has lasted or is expected to last for at least 12 months?
  3. Do you have difficulty doing or need assistance to do **day-to-day activities**? (*for example: work, go to school, do housework, socialize, cook, do paperwork*)
    - 3a. Is this because of ANY medical, mental health or other health condition?
    - 3b. Is this a condition that has lasted or is expected to last for at least 12 months?
  4. Do you need or get **special therapy**? (*for example: physical, occupational, speech or respiratory therapy*)
    - 4a. Is this because of ANY medical, mental health or other health condition?
    - 4b. Is this a condition that has lasted or is expected to last for at least 12 months?
  5. Do you need or get **treatment or counseling** for any kind of mental health, substance abuse or emotional problem?
    - 5a. Has this problem lasted or is it expected to last for at least 12 months?
- 
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## Results

**Proportion of adults identified:** The five-item Adult SHCN Screener identified approximately 36% of adult TANF Medicaid clients age 18 – 65 as having a chronic condition or special health care need. Approximately 93% of adults enrolled in Medicaid through SSI eligibility were identified. See **Table 2**.

### **Expected Associations:**

- As expected, the proportion of adults identified by the Adult SCHN Screener varied significantly by age ( $p = .000$ ), however, significant differences in screening rates by gender were not observed among adults in the TANF and SSI samples (**Figure 1**).
- Individuals meeting the screening criteria reported significantly poorer health status ( $p = .000$ ); 50% of the group identified by the screener described their health as “fair or poor” compared to 11% of the group not identified by screening tool (**Figure 2**).
- Individuals identified by the Adult SHCN Screener criteria in each of the samples experienced significantly more limitations in daily function, days of poor physical health or mental health than individuals in the groups not identified (**Table 3**).
- Individuals identified by the Adult SHCN Screener criteria in each of the samples needed or used significantly more health care services during the past 12 months than those not meeting the screening criteria (**Table 4**).
- Each individual meeting the screening criteria was asked to name up to 3 health conditions they had in mind when responding to the screener questions. In the TANF sample, 43% of the 875 individuals identified by the screening tool named one condition, and over half (57%) named at least two health conditions. Almost all of the health conditions respondents named verbatim are generally considered chronic or ongoing in nature according to the standard list of chronic conditions used in the National Health Interview Survey (**Table 5**).

**TABLE 1: OHIO Adult Medicaid Study: Summary of Sample Characteristics**

<b>Study populations</b>	<b>TANF / Managed care</b>	<b>TANF / Fee- for-service</b>	<b>SSI / under 65 yrs old</b>	<b>SSI / over 65 yrs old</b>
Mode	Telephone	Telephone	Telephone	Telephone
Number of cases	n = 2,058	n = 394	n = 493	n = 180
Female	(%) 91.8	(%) 80.2	(%) 68.8	(%) 86.7
18 – 24 yrs	(%) 23.4	(%) 17.8	(%) 4.5	(%) *
25 – 34 yrs	44.3	44.7	11.6	*
35 – 44 yrs	25.1	28.7	27.0	*
45 – 54 yrs	6.4	7.6	23.7	*
55 – 64 yrs	0.8	0.8	32.7	*
65 yrs & over	0.1	0.5	0.6	100.0
% Hispanic	(%) 4.2	(%) 1.8	(%) 1.8	(%) 0.0
% White/non-Hispanic	33.6	91.9	93.2	88.9
% Black/non-Hispanic	60.6	6.1	3.7	10.0
% Other/non-Hispanic	1.6	0.3	1.2	1.1

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**TABLE 2: OHIO Adult Medicaid Study: Percentage Identified by Adult Special Health Care Needs Screener**

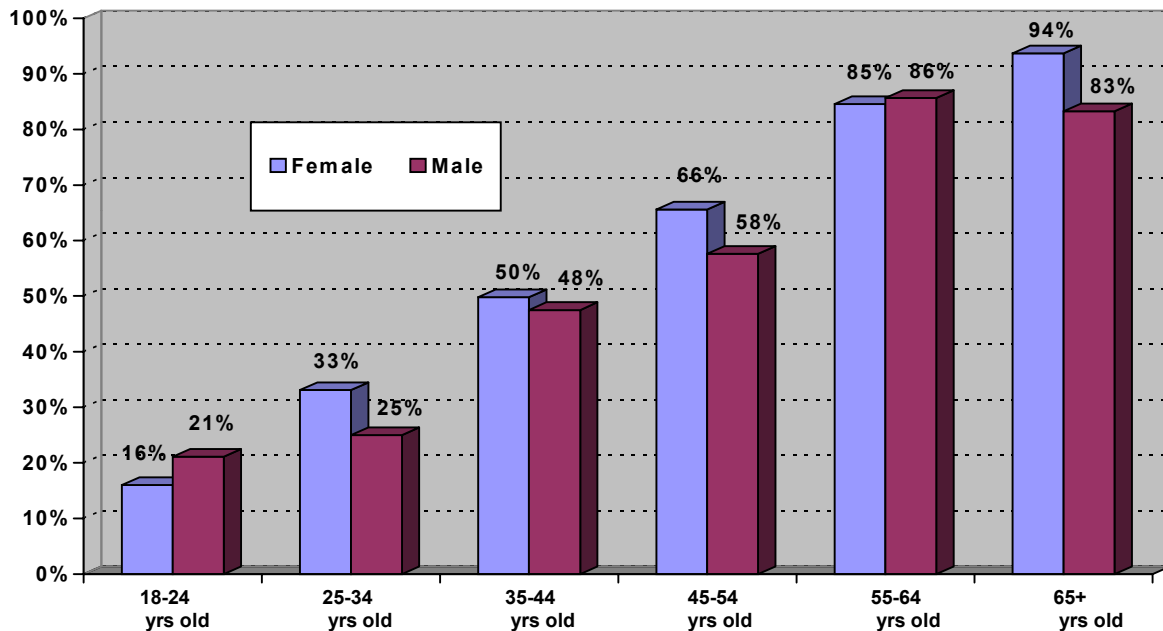
<b>Study populations</b>	<b>TANF / Managed care</b>	<b>TANF / Fee- for-service</b>	<b>SSI / under 65 yrs old</b>	<b>SSI / over 65 yrs old</b>
Number of cases	n = 2,058	n = 394	n = 493	n = 180
% identified by Adult Screener as having chronic or special health care needs	(%) 35.2	(%) 38.3	(%) 91.0	(%) 93.3
% with qualifying responses to each of the Adult Special Health Care Needs Screener questions				
	(%)	(%)	(%)	(%)
Q1: Need/use of prescription medicines	29.3	35.3	85.8	91.1
Q2: Above average need/use of services	22.6	25.9	78.1	79.4
Q3: Functional limitations	9.3	10.9	51.5	56.1
Q4: Need/use of specialized therapies	6.5	3.8	15.6	6.7
Q5: Tx or counseling for emotional or mental health problem	8.2	9.6	24.7	1.7

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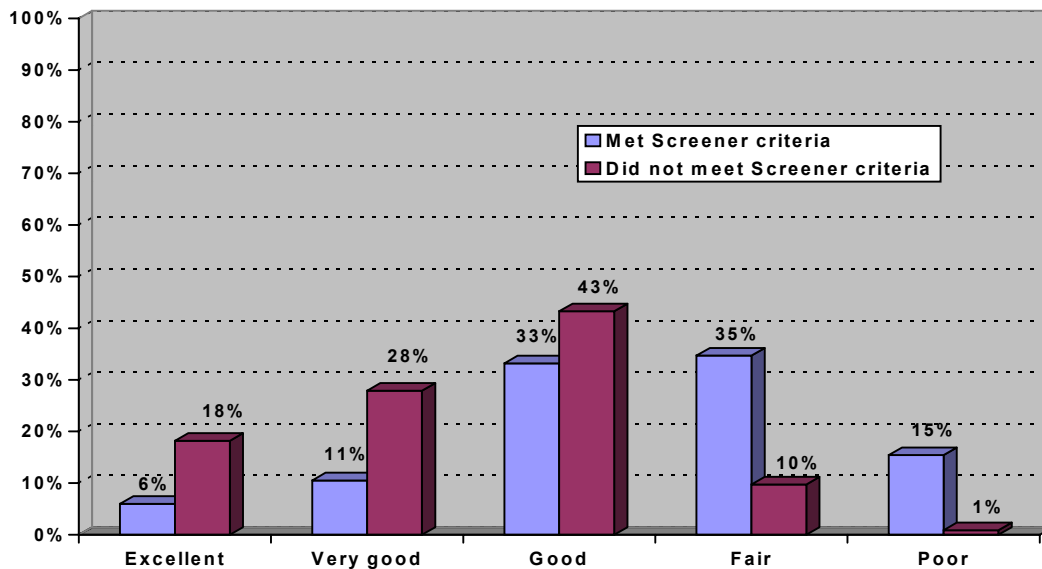
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**Figure 1: Age & gender-specific rates for meeting Adult Screener criteria for having chronic or specific health care needs**  
 (OHIO Adult Study: TANF and SSI over 65 yrs old samples combined)  
 n = 2,632



**Figure 2: Self-reported health status by Adult Screener results**  
 (OHIO Adult Study: TANF and SSI over 65 yrs old samples combined)  
 n = 2,632



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**TABLE 3: OHIO Adult Medicaid Study: Functional limitations and health status  
by Adult Special Health Care Needs Screener status**

Study populations	TANF / Managed care & fee-for- service samples combined		SSI / under 65 yrs old		SSI / over 65 yrs old	
	Did not meet screener	Met screener	Did not meet screener	Met screener	Did not meet screener	Met screener
Number of cases	n = 1,577	n = 875	n = 46	n = 447	n = 12	n = 168
Functional limitations in Activities of Daily Living (ADL list from NHIS)	(%)	(%)	(%)	(%)	(%)	(%)
No limitations	95.0	64.1	87.0	34.5	91.7	42.9
1 ADL limitation	3.3	12.0	8.7	17.2	8.3	9.5
2 – 3 ADL limitations	1.1	13.0	0.0	23.0	0.0	17.3
4 – 7 ADL limitations	0.7	11.0	4.3	25.2	0.0	30.4
	(P = .000)		(P = .000)		(P = .02)	
Currently uses special equipment such as wheelchair, cane, special bed or special telephone, etc.	(%)	(%)	(%)	(%)	(%)	(%)
	0.8	10.4	8.7	30.7	0.0	54.8
	(P = .000)		(P = .003)		(P = .001)	
Mean number of “poor physical health days” during past 30 days	2.4 days	9.9 days	3.3 days	17.5 days	1.5 days	16.5 days
	(P = .000)		(P = .000)		(P = .000)	
Mean number of “poor mental health days” during past 30 days	4.4 days	12.0 days	5.2 days	14.4 days	2.8 days	4.8 days
	(P = .000)		(P = .000)		(P = .45)	

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**TABLE 4: OHIO Adult Medicaid Study: Level of health services use past 12 months by Adult Special Health Care Needs Screener status**

Study populations	TANF / Managed care & fee-for- service samples combined		SSI / under 65 yrs old		SSI / over 65 yrs old	
	Did not meet screener n = 1,577	Met screener n = 875	Did not meet screener n = 46	Met screener n = 447	Did not meet screener n = 12	Met screener n = 168
Number of cases						
Dr office or clinic visits during past 12 months	(%)	(%)	(%)	(%)	(%)	(%)
No visits	16.6	3.8	17.4	3.6	50.0	1.2
1 –2 visits	35.1	13.3	45.7	8.8	16.7	10.7
10 or more visits	16.0 (P = .000)	43.0	8.7 (P = .000)	44.7	8.3 (P = .000)	40.0
Emergency room visits during past 12 months	(%)	(%)	(%)	(%)	(%)	(%)
No ER visits	56.6	41.8	54.3	44.0	83.3	50.6
1 ER visit	21.8	21.0	21.7	20.0	8.3	22.6
2 or more ER visits	21.3 (P = .000)	37.2	24.0 (P = .19)	36.1	8.3 (P = .17)	26.8
Overnight hospitalizations during past 12 months	(%)	(%)	(%)	(%)	(%)	(%)
1 or more overnight hospitalizations	18.1 (P = .001)	23.9	6.5 (P = .001)	30.7	8.3 (P = .07)	33.3

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**Table 5: Type and frequency of health conditions named verbatim by group qualifying on the Adult Screener criteria**

(OHIO Adult Medicaid Study: TANF managed care & fee-for-service)

Type & frequency of health conditions named verbatim by individuals identified by the Adult Screener as having a chronic or special health need (n = 875)*			
Low prevalence chronic conditions	26.7%	Refused	1.7%
Depression	24.6%	COPD/Emphysema	1.6%
High Blood Pressure	16.2%	High Cholesterol	1.6%
Chronic Back Problems	13.9%	Cancer	1.4%
Mental Health (COD, schizophrenia, anxiety bipolar, etc)	13.6%	Lupus	1.3%
Asthma	12.7%	Vision / Blindness	1.3%
Diabetes	8.9%	Epilepsy/Seizures	1.1%
Arthritis	8.2%	Surgery	1.0%
Not sure if chronic or acute; need more info	8.1%	Menopause	0.8%
Allergies	7.5%	Hysterectomy	0.6%
Headaches/Migraines	5.6%	Substance Abuse	0.6%
Thyroid Conditions	5.3%	Stroke	0.5%
Heart Condition/Disease	4.0%	Physical Disability	0.5%
Acid Reflux	3.4%	Mental Disability	0.3%
Stomach/Intestinal Problems	3.3%	Congestive Heart Failure	0.2%
Fibromyalgia	3.2%	Hearing / Deafness	0.1%
Sinus Problems	2.7%		

\* Percentages do not add up to 100.0 because 29.5% of those id'd by Adult SHCN screener named 2 conditions and 27.5% named 3 conditions

Bethell and Read, 2001

FACCT–The Foundation for Accountability

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