



Chronic Pain Disparities Based on Insurance Payor

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Introduction

- Social disadvantage is suggested to be associated with chronic opioid use.¹ Whether this is due to severity of pain, lack of treatment options, or another reason for those who are socially disadvantaged remains unknown.
- Most studies have used race or ethnicity to investigate disparities. One study found that disparities in pain-related disability between racial groups may be at least partially mediated by neighborhood socioeconomic status.² This study evaluates disparities relating to insurance payor (a marker of social disadvantage).

Design/Methods

- Cross-sectional, survey- based study of chronic pain clinic at an academic tertiary care center after receiving institutional IRB approval.
- 152 subjects (recruited randomly) were included in the analysis. 50% had either commercial insurance or Medicare, while the other 50% had Medicaid, dual Medicare + Medicaid, or no insurance.

Results

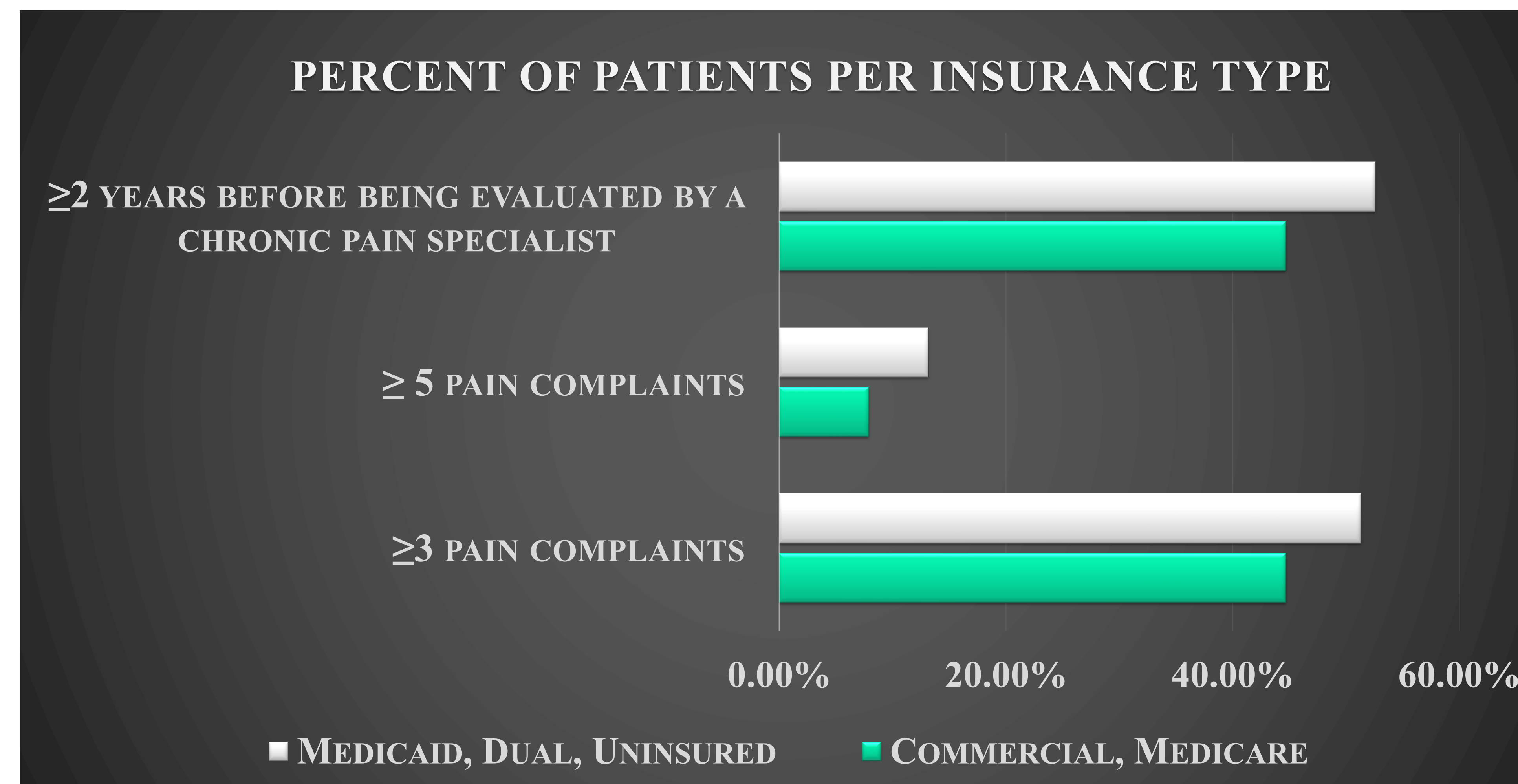
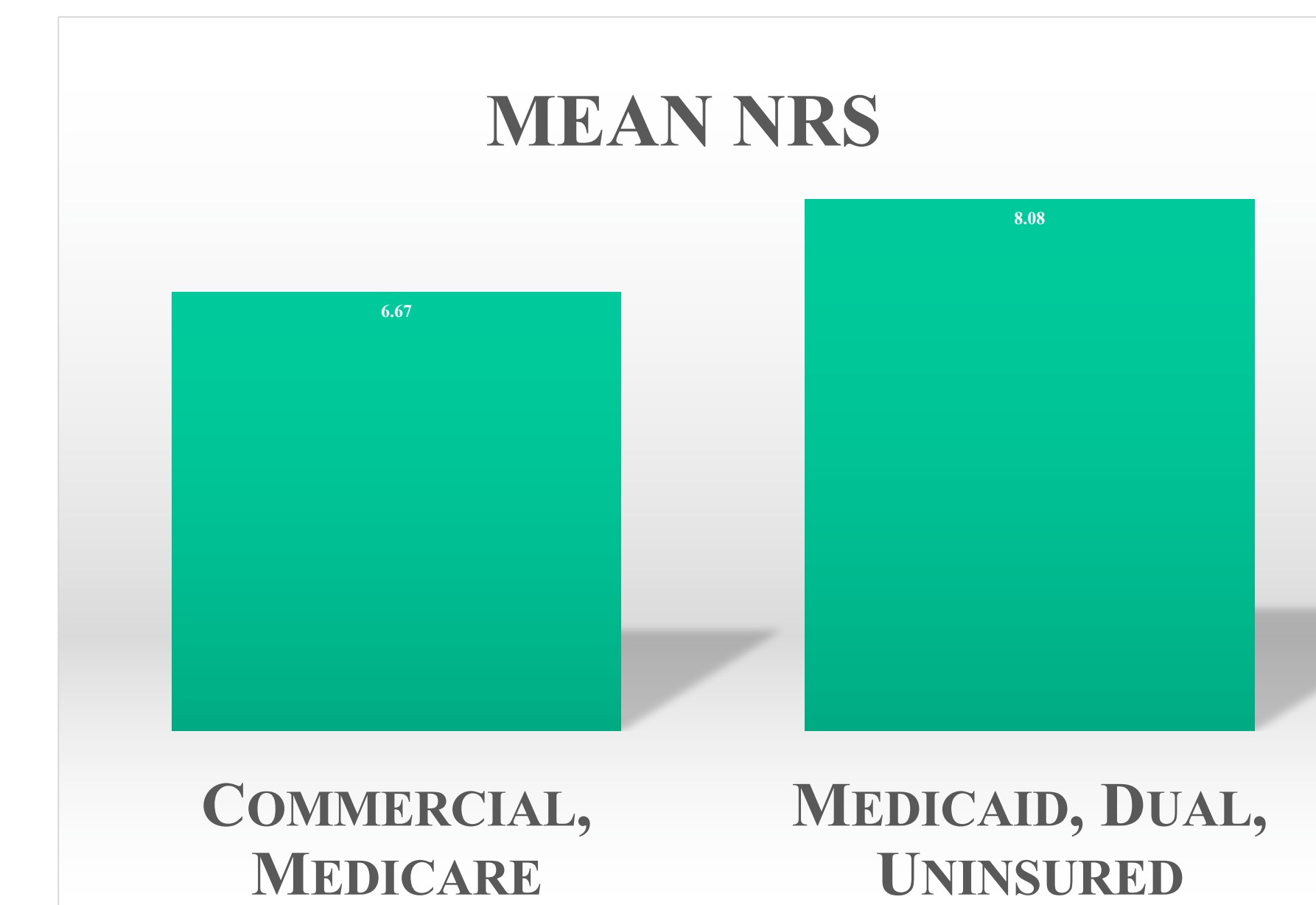
- Patients with commercial insurance or Medicare had an average pain score of 6.76 (on NRS) compared to the group consisting of Medicaid, Dual Medicare/Medicaid which had a score of 8.08. (p = 0.00013).
- 44.7% of commercial or Medicare insured subjects reported 3 or more pain complaints, compared to 51.3% of Medicaid, Dual Medicare/Medicaid, or uninsured subjects.
- 7.89% of commercial or Medicare subjects reports 5 or more complaints compared to 13.16% of those with Medicaid, Dual Medicare/Medicaid, or no insurance.
- 44.7% of those with commercial or Medicare insurance reported having chronic pain for at least 2 years before being evaluated by a chronic pain specialist, compared to 52.6% of those with Medicaid, Dual Medicare/Medicaid or no insurance.

Conclusion

- There may be differences among chronic pain populations based on insurance payor.

	Mean NRS	≥3 pain complaints	≥ 5 pain complaints	≥2 years before being evaluated by a chronic pain specialist
Commercial, Medicare	6.76	44.70%	7.89%	44.70%
Medicaid, Dual, Uninsured	8.08	51.30%	13.16%	52.60%

P = 0.00013 for two tailed t test comparing mean NRS



Discussion:

- Our study found that those who are socially disadvantaged (according to insurance payor) have higher average chronic pain. In addition, a greater number of socially disadvantaged patients have a higher number of chronic pain complaints and have had chronic pain for at least 2 years before being evaluated by a chronic pain specialist.
- This study shows that social disadvantage is linked to severity of pain, and delays in treatment of chronic pain may be more prevalent in those who are socially disadvantaged
- However, this was based on a limited population sample and insurance payor is just one marker for social disadvantage, and additional research needs to be conducted on a larger scale, also taking into consideration other factors involved in social disadvantage

Sources:

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Fuentes M, Hart-Johnson T, Green CR. The association among neighborhood socioeconomic status, race and chronic pain in black and white older adults. J Natl Med Assoc. 2007 Oct;99(10):1160-9. PMID: 17987920; PMCID: PMC2574394.