

Preventive Health Care in Older Adults

Findings from the PRC National Health Survey

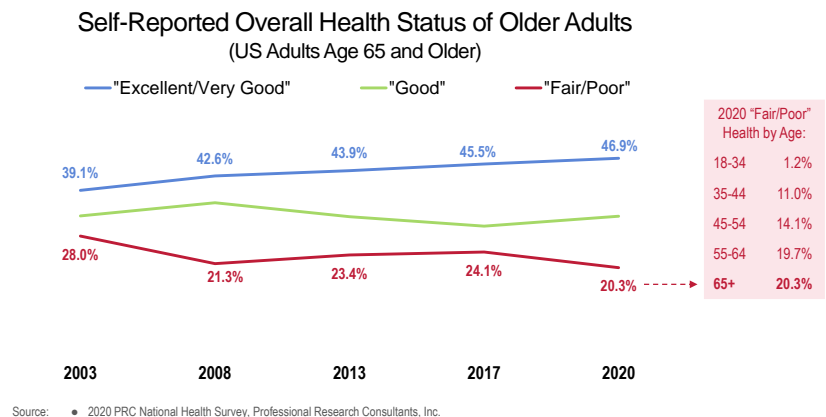


PRC is the only research firm to conduct regular national studies (since 1995) to collect comparative data for its CHNA clients. The latest **PRC National Health Survey** reflects a random sample of 1,000 Americans interviewed through a mixed-mode protocol, including telephone (landline and cell phone) and internet surveys.

By 2030, the entirety of the baby boomer generation will be age 65 and older, with the increasing health care needs that come with that. Preventive health care remains key to promote healthy aging in this growing population. This brief looks at some critical measures from the **2020 PRC National Health Survey** among older Americans (age 65 and older) relative to preventive health services and access to care.

HEALTH STATUS

PRC national data show that self-reported health status in older Americans has improved over the past several years. While older adults (not surprisingly) remain more likely than younger adults to characterize their overall health as “fair” or “poor,” this percentage has decreased for older adults since the early 2000s. At the same time, the share of older Americans rating their own general health as “excellent” or “very good” has steadily risen.

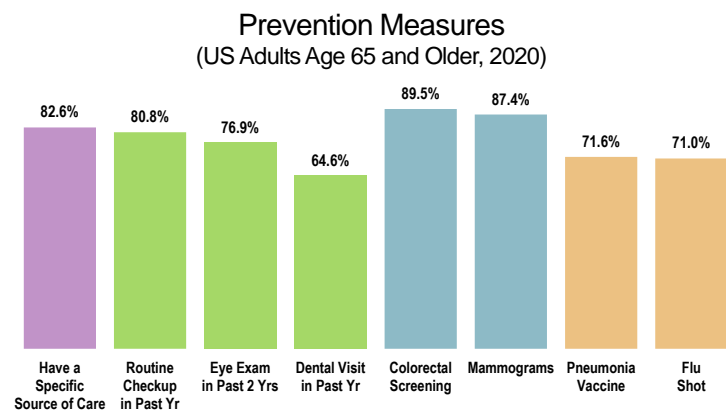


However, health status is not equal throughout the older population. Disparity is particularly evident when reviewing findings by income level: “fair/poor” health increases to 31.7% among older Americans with incomes below 200% of the federal poverty level (more than double the 14.9% found among older adults with higher incomes).

PREVENTIVE HEALTH CARE

Preventive medical care is especially important for older adults, as their risk for health problems increases with age. Prevention or early diagnosis of problems can contribute to better overall health and a higher quality of life.

The **2020 PRC National Health Survey** reveals that over 80% of older adults have a relationship with a particular health provider or clinic for their routine health needs (a specific source of care), and nearly as many report having had a routine checkup in the past year. However, the inverse of this is that approximately 20% have not.



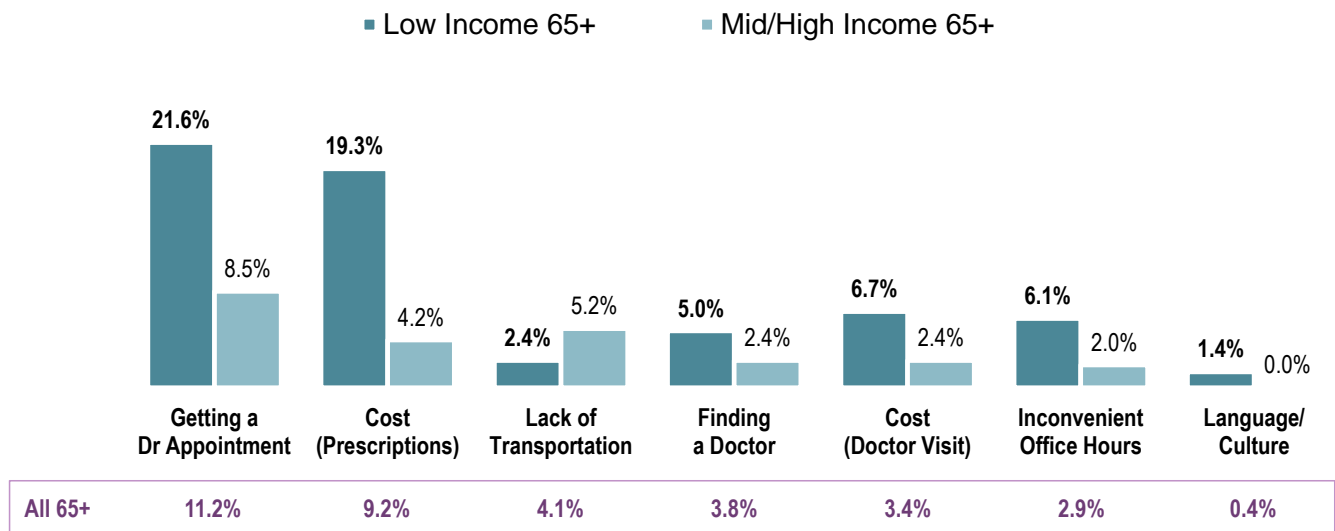
Regular eye exams and particularly dental care are less prevalent in older adults. The data also show about 70% coverage for pneumonia vaccination (ever) or flu vaccination (in the past year).

ACCESS TO HEALTH CARE

Nearly every American 65 or older is eligible for Medicare, and almost all of them are eligible for Medicare Part A (hospital insurance) with no premiums [www.verywellhealth.com]. Still, there remain a number of barriers (including cost-related barriers) that can limit access to health care for older Americans, particularly those at lower incomes.

Of the potential barriers tested in the 2020 PRC National Health Survey, **appointment availability** and **prescription cost** were the most prevalent barriers for older adults, and the ones which had particular impact on low-income seniors. Less prevalent, but still with significant income disparity, were barriers such as cost of physician visits, inconvenient office hours, and difficulty finding physicians.

Experienced Barriers Accessing Health Care in the Past Year (US Adults Age 65 and Older, 2020)



Source: • 2020 PRC National Health Survey, Professional Research Consultants, Inc.

Note: • "Low income" includes older adults living below 200% of the federal poverty level (FPL), taking into account annual household income and household size; "mid/high income" includes those older adult with incomes at 200% of FPL or above.

As the needs of older adults continue to grow in your community, visit www.PRCCustomResearch.com or email ImproveHealth@PRCCustomResearch.com to learn how a PRC Community Health Needs Assessment can help you better understand and address them.

