

ACCESS AND UTILIZATION

Men and women use health care differently. In some cases, men and women use different types of care and in other cases, services are utilized at different rates. Men generally use health care at lower rates than women. This is largely due to women's reproductive health care needs and lower rates of chronic illness among men. In addition to gender differences, men of different racial and ethnic backgrounds access and utilize care differently. Men of color (black, Hispanic, and American Indian and Alaska Native men, in particular) face greater barriers and challenges in accessing care, which often leads to lower use of recommended health services. As there is considerable state variation in measures of access and utilization, aggregate statistics that describe men nationally or even statewide can mask gaping disparities between men of different racial and ethnic groups.

State policies can also affect men's access to care. Whether a state economy is dominated by jobs in industries with high rates of coverage (i.e. manufacturing) or dominated by jobs in industries with lower insurance rates (i.e. agriculture or service), affects the insurance rate in the state. Access and utilization rates are also affected by Medicaid eligibility policy, local health care provider availability, and men's ability to shoulder the out-of-pocket costs associated with their care. Interactions with the health care system, such as an ongoing relationship with a physician, also influence how men obtain and use services. The importance of screening services, such as colorectal cancer screenings, has been well documented.⁴⁴ Services like routine dental care, which maintains healthy teeth and gums, and medical checkups, are also recognized as important.⁴⁵

This chapter focuses on widely accepted measures of health care access: insurance status, having a regular healthcare provider, and experiencing financial barriers to timely care. This chapter also examines the use of selected preventive services including routine checkups, colorectal cancer screenings, and dental care. The state-level data presented in this chapter also highlight variations in access and utilization rates across racial and ethnic groups. The data in this section are drawn from the Current Population Survey conducted by the U.S. Census Bureau every March and the Behavioral Risk Factor and Surveillance Survey conducted annually by the U.S. Centers for Disease Control and Prevention (CDC). The indicators included in this dimension are:

1. No Health Insurance Coverage
2. No Personal Doctor/Health Care Provider
3. No Routine Checkup
4. No Dental Checkup
5. No Colorectal Cancer Screening
6. No Doctor Visit Due to Cost

NO HEALTH INSURANCE COVERAGE

Health insurance, be it private or public, has been demonstrated to greatly facilitate the use of health care services.⁴⁶ There is a significant body of research that has demonstrated the important role that insurance plays in making health care affordable and accessible. In the U.S., the majority of men get their insurance through their employer. Men who are insured are more likely to get recommended levels of preventive care, higher quality care, and to have better health outcomes. There are also numerous studies that demonstrate that the uninsured face more barriers to accessing care.⁴⁷ This indicator reports the percentage of men ages 18 to 64 who were uninsured based on data from the 2006 to 2008 Current Population Surveys from the U.S. Census Bureau.

Highlights

- Nationally, about one in five (22.4%) men ages 18 to 64 lacked health insurance coverage (Table 2.1). On average, 15.7% of white men were uninsured compared to 46.0% of Hispanics, 38.5% of American Indians and Alaska Natives, 28.8% of blacks, and 21.0% of Asian American, Native Hawaiian and other Pacific Islanders.
- The uninsured rate ranged from 11.6% of men in Massachusetts to one-third of men in Texas (33.3%).
- There was considerable variation in uninsured rates in the states and among the rates of men who were uninsured within racial and ethnic groups across the states. For example, only 17.3% of Hispanic men in Hawaii were uninsured compared to 67.5 % in North Carolina. Among black men, the range varied from a low of 16.0% uninsured in Massachusetts to a high of 40.6% in Nebraska.
- The U.S. disparity score for the uninsured was 2.27, indicating that the uninsured rate for men of color was over twice that of white men. State disparity scores ranged from a low of 1.07 in Hawaii to a high of 4.81 in the District of Columbia, meaning that men of color in the District of Columbia had an uninsured rate that was almost five times the rate of white men. The high disparity score in the District of Columbia was largely due to ten-fold difference in the uninsured rates between Hispanic (43.8%) men compared to white men (4.7%).
- In Figure 2.1, all the states were in the upper quadrants and had disparities that exceeded 1.00, meaning that the uninsured rates were higher for men of color than for white men in all states.
- In states in the upper left quadrant of Figure 2.1, white men were uninsured at rates below the national average, but above the uninsured rate for minority men. Connecticut, Minnesota, Nebraska, New Jersey, and Wisconsin had among the lowest uninsured rates in the nation for white men, but disparity scores that were higher than the national average. The District of Columbia was a notable outlier with a very low uninsured rate for white men, and the highest disparity score in the nation (4.81).
- A number of states (Arkansas, Florida, Louisiana, New Mexico, and Tennessee) in the upper right quadrant had among the highest uninsured rates for white men but disparity scores that approached 2.00. In these states, both men of color and white men had high uninsured rates.



Table 2.1. No Health Insurance Coverage, by State and Race/Ethnicity, 2006 - 2008

State	Disparity Score	Prevalence						
		All Men	White	All Minority*	Black	Hispanic	Asian and NHPI	American Indian/ Alaska Native
All States	2.27	22.4%	15.7%	35.8%	28.8%	46.0%	21.0%	38.5%
Alabama	1.87	19.9%	15.4%	28.9%	24.9%			
Alaska	1.75	25.3%	21.3%	37.3%		28.4%	26.8%	49.3%
Arizona	2.53	26.2%	16.1%	40.8%		46.7%		
Arkansas	1.84	27.0%	22.6%	41.6%	37.2%	64.0%		
California	2.30	27.4%	15.8%	36.4%	26.5%	43.3%	22.4%	
Colorado	2.34	22.5%	16.8%	39.4%	30.7%	43.1%		
Connecticut	2.74	15.1%	10.7%	29.2%	28.5%	36.9%	12.1%	
Delaware	2.12	16.3%	12.1%	25.6%	16.7%	48.8%		
District of Columbia	4.81	15.6%	4.7%	22.8%	18.7%	43.8%		
Florida	1.90	28.8%	21.3%	40.5%	33.4%	46.3%	31.2%	
Georgia	2.32	24.7%	16.0%	37.1%	30.9%	62.9%	20.4%	
Hawaii	1.07	12.2%	11.5%	12.3%		17.3%	10.7%	
Idaho	2.14	21.1%	18.3%	39.1%		46.9%		
Illinois	2.25	20.1%	14.2%	32.0%	29.9%	40.8%	15.4%	
Indiana	2.14	17.2%	15.0%	32.1%	28.9%	43.2%		
Iowa	2.15	14.4%	12.7%	27.4%	20.9%	34.4%		
Kansas	2.71	17.2%	13.1%	35.5%	26.2%	48.8%		
Kentucky	2.06	20.1%	17.9%	36.9%	30.4%			
Louisiana	1.80	29.4%	22.9%	41.2%	37.7%			
Maine	1.58	15.3%	14.9%	23.6%				
Maryland	2.38	19.8%	12.5%	29.8%	21.9%	59.8%	17.3%	
Massachusetts	1.60	11.6%	10.4%	16.7%	16.0%	21.6%	12.4%	
Michigan	1.86	17.2%	14.7%	27.4%	29.8%	30.0%	11.8%	
Minnesota	2.86	12.0%	9.6%	27.5%	19.5%	44.2%	16.9%	
Mississippi	2.44	26.6%	16.6%	40.6%	38.1%			
Missouri	1.67	18.0%	16.3%	27.1%	28.1%	39.7%		
Montana	2.28	22.8%	20.3%	46.4%				
Nebraska	2.62	18.1%	14.5%	38.1%	40.6%	41.5%		
Nevada	1.94	24.2%	17.5%	34.1%	21.6%	42.3%	23.3%	
New Hampshire	2.33	16.8%	15.4%	35.8%		53.1%		
New Jersey	3.07	21.1%	11.6%	35.5%	30.9%	47.9%	16.7%	
New Mexico	1.98	31.5%	20.4%	40.5%		37.5%		63.9%
New York	2.12	21.2%	14.7%	31.3%	28.3%	37.8%	23.6%	
North Carolina	2.24	24.1%	17.2%	38.6%	28.0%	67.5%		
North Dakota	3.16	17.9%	14.3%	45.1%				53.3%
Ohio	1.83	16.4%	14.6%	26.7%	25.3%	40.1%		
Oklahoma	1.83	25.0%	20.3%	37.1%	30.5%	51.7%		41.4%
Oregon	2.15	25.7%	20.9%	45.0%		63.8%	21.5%	
Pennsylvania	1.74	15.2%	13.6%	23.7%	23.1%	29.0%	17.0%	
Rhode Island	2.23	15.8%	12.8%	28.6%	25.4%	31.9%	21.6%	
South Carolina	1.84	23.4%	18.3%	33.6%	29.7%	64.9%		
South Dakota	3.51	16.8%	13.4%	47.2%				53.5%
Tennessee	1.87	24.2%	20.2%	37.7%	29.7%	61.2%		
Texas	2.33	33.3%	19.5%	45.4%	32.9%	51.3%	27.3%	
Utah	3.03	19.5%	14.5%	43.8%		49.9%		
Vermont	1.28	15.1%	14.9%	18.9%				
Virginia	2.27	19.8%	13.9%	31.7%	22.1%	58.4%	24.6%	
Washington	2.15	17.8%	14.1%	30.3%	31.9%	43.3%	16.8%	
West Virginia	1.31	20.9%	20.6%	27.0%				
Wisconsin	2.73	14.1%	11.3%	30.9%	26.1%	41.0%		
Wyoming	2.02	20.0%	17.9%	36.1%		37.2%		

Note: Among men ages 18-64.

*All Minority men includes black, Hispanic, Asian and Native Hawaiian or other Pacific Islander (NHPI), American Indian or Alaska Native, and men of two or more races.

A disparity score greater than 1.00 indicates that minority men are doing worse than white men. A disparity score less than 1.00 indicates that minority men are doing better than white men. A disparity score equal to 1.00 indicates that minority and white men are doing the same.

Source: Current Population Survey, 2006-2008.

◻ Smallest disparity: Men of color faring worse than white men
 ◻ Largest disparity: Men of color faring worse than white men

◻ Best state in column
 ◻ Worst state in column

NO PERSONAL DOCTOR/HEALTH CARE PROVIDER

Having an ongoing relationship with a doctor or health care provider can improve access to health care services. Having a regular doctor increases the likelihood of receiving recommended screening and preventive services as well as ongoing care to manage chronic health problems.⁴⁸ Many factors influence the likelihood of having a regular doctor, including insurance status and the availability of care in the communities where patients reside. The data for this indicator are drawn from the Behavioral Risk Factor Surveillance Survey (BRFSS). The survey questions asked respondents if they have one person they think of as their personal doctor or health care provider.

Highlights

- Nationally, more than 1 in 4 (28.0%) men ages 18 to 64 did not have a personal doctor/health care provider (Table 2.2). On average, 49.1% of Hispanic and 38.1% of American Indian and Alaska Native men lacked a personal health care provider as did 30.3% of black and 25.8% of Asian American, Native Hawaiian and other Pacific Islander men, all higher rates than 22.6% of white men.
- The share of men who did not have a personal health care provider ranged from a low of 16.0% of men in Delaware to a high of 42.2% in Alaska. There was also variation within racial and ethnic groups across states. For example, 23.5% of Hispanic men in Hawaii lacked a personal health care provider compared with 73.5% of Hispanic men in North Carolina where the uninsured rate was also high for this group (Table 2.2).
- The U.S. disparity score was 1.71 meaning that on average, minority men had no regular provider at rates that exceeded white men by 70%. State disparity scores ranged from a low of 0.81 in Hawaii to a high of 2.43 in Rhode Island, where half of Hispanic men were without a personal doctor.
- In Figure 2.2, in Hawaii, the only state in the lower quadrants with a disparity score less than 1.00, a smaller share of men of color went without a personal doctor than white men, however, a slightly higher share of white men in Hawaii lacked a personal doctor than the average for white men in the U.S.
- Rhode Island and Connecticut were near the top of the upper left quadrant with among the highest disparity scores in the U.S (2.43 and 2.29, respectively). However, the share of white men without a personal health care provider was lower than the national average for white men in these states.
- Several rural and frontier states in the upper right quadrant, Alaska, Wyoming, Montana, North Dakota, and Idaho had higher than average rates of no personal provider among both white and minority men.

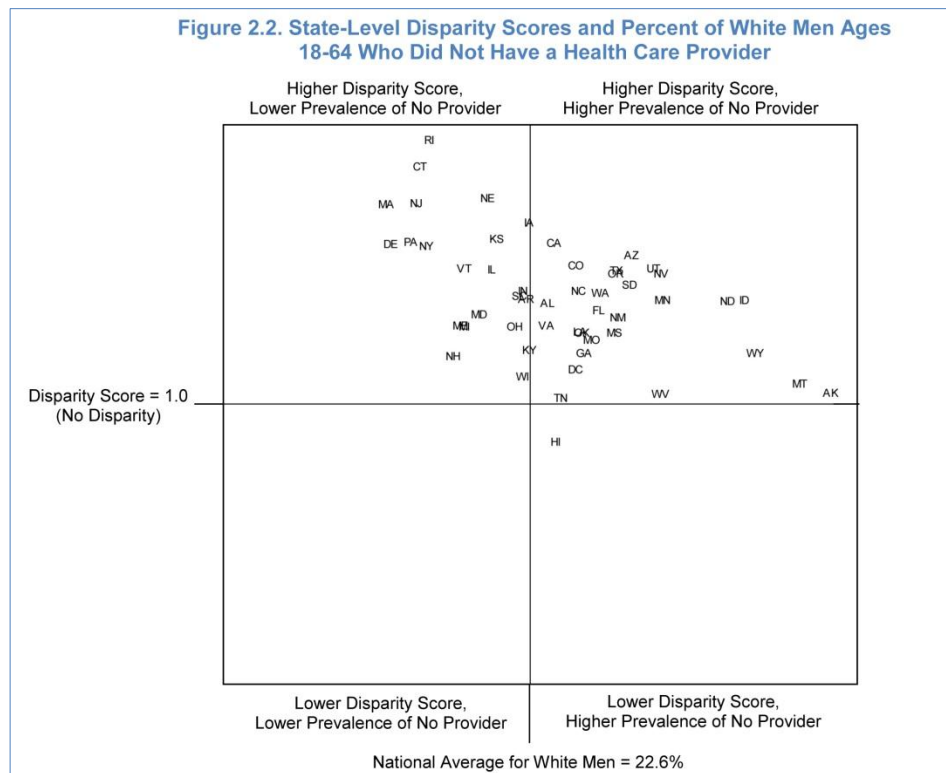


Table 2.2. No Personal Doctor/Health Care Provider, by State and Race/Ethnicity, 2006 - 2008

State	Disparity Score	Prevalence						
		All Men	White	All Minority*	Black	Hispanic	Asian and NHPI	American Indian/ Alaska Native
All States	1.71	28.0%	22.6%	38.7%	30.3%	49.1%	25.8%	38.1%
Alabama	1.55	27.1%	23.2%	36.0%	35.2%			
Alaska	1.07	42.2%	40.7%	43.6%				54.1%
Arizona	1.81	37.2%	28.4%	51.4%		55.1%		61.4%
Arkansas	1.57	24.4%	21.8%	34.3%	26.0%	59.6%		
California	1.88	36.5%	23.6%	44.3%	27.3%	52.4%	29.3%	
Colorado	1.76	30.4%	24.9%	43.7%	32.1%	48.2%	28.5%	
Connecticut	2.29	19.1%	15.3%	35.0%	29.7%	43.5%	23.6%	
Delaware	1.87	16.0%	13.5%	25.2%	20.5%			
District of Columbia	1.20	28.3%	24.9%	29.8%	27.1%	40.3%		
Florida	1.51	31.7%	26.4%	40.0%	30.7%	46.6%	30.4%	42.3%
Georgia	1.28	28.4%	25.4%	32.6%	30.5%	37.2%		
Hawaii	0.81	19.9%	23.9%	19.3%		23.5%	16.7%	
Idaho	1.57	38.4%	35.5%	55.8%		61.6%		
Illinois	1.73	25.6%	19.9%	34.5%	29.6%	43.9%	22.9%	
Indiana	1.62	24.5%	21.8%	35.3%	24.9%	50.7%		
Iowa	1.99	24.2%	22.2%	44.1%		49.2%		
Kansas	1.90	23.1%	20.0%	38.0%	26.7%	48.4%		
Kentucky	1.30	22.7%	22.1%	28.7%	36.9%			
Louisiana	1.40	29.5%	25.2%	35.3%	33.3%	47.1%		
Maine	1.43	18.2%	17.8%	25.5%				
Maryland	1.49	22.8%	18.9%	28.3%	25.3%	43.6%	15.5%	
Massachusetts	2.09	16.5%	13.2%	27.5%	23.6%	35.3%	24.2%	
Michigan	1.43	20.1%	18.1%	25.9%	25.9%	26.8%		
Minnesota	1.57	32.4%	30.3%	47.5%	43.4%			
Mississippi	1.39	31.6%	27.3%	38.1%	37.9%			
Missouri	1.36	27.2%	25.8%	35.0%	30.6%			
Montana	1.12	39.1%	38.8%	43.4%				48.1%
Nebraska	2.12	22.4%	19.5%	41.3%		58.4%		
Nevada	1.71	39.8%	30.2%	51.7%	41.0%	60.3%		
New Hampshire	1.27	17.6%	17.3%	22.0%				
New Jersey	2.09	22.0%	15.1%	31.6%	24.1%	43.5%	17.0%	
New Mexico	1.48	34.2%	27.5%	40.6%		38.7%		50.4%
New York	1.86	21.5%	15.7%	29.2%	23.5%	39.5%	18.0%	
North Carolina	1.62	32.3%	25.1%	40.7%	30.6%	73.5%	24.0%	31.6%
North Dakota	1.56	35.8%	34.3%	53.6%				65.9%
Ohio	1.43	22.3%	21.1%	30.2%	30.5%	27.6%		
Oklahoma	1.39	28.9%	25.3%	35.2%	36.0%	53.4%		26.2%
Oregon	1.71	30.1%	27.4%	46.9%		60.9%		
Pennsylvania	1.88	17.2%	14.8%	27.8%	28.0%	26.4%	30.3%	
Rhode Island	2.43	20.1%	16.0%	39.0%	29.2%	50.2%		
South Carolina	1.59	25.9%	21.4%	34.1%	32.7%	40.8%		
South Dakota	1.65	30.3%	28.3%	46.6%				52.6%
Tennessee	1.05	24.4%	24.0%	25.1%	27.4%			
Texas	1.73	37.5%	27.5%	47.6%	40.1%	52.1%	25.4%	
Utah	1.74	33.5%	29.8%	51.9%		59.4%		
Vermont	1.74	18.6%	18.0%	31.3%				
Virginia	1.43	25.0%	23.1%	33.1%	28.8%	51.2%		
Washington	1.61	29.9%	26.4%	42.4%	44.7%	58.6%	26.4%	35.6%
West Virginia	1.07	30.2%	30.1%	32.1%				
Wisconsin	1.16	22.2%	21.7%	25.1%	22.2%	26.7%		16.2%
Wyoming	1.29	36.9%	35.9%	46.3%		47.5%		42.8%

Note: Among men ages 18-64.

*All Minority men includes black, Hispanic, Asian and Native Hawaiian or other Pacific Islander (NHPI), American Indian or Alaska Native, and men of two or more races.

A disparity score greater than 1.00 indicates that minority men are doing worse than white men. A disparity score less than 1.00 indicates that minority men are doing better than white men. A disparity score equal to 1.00 indicates that minority and white men are doing the same.

Source: Behavioral Risk Factor Surveillance System, 2006-2008.

 Largest disparity: White men faring worse than men of color
 Largest disparity: Men of color faring worse than white men

 Best state in column
 Worst state in column

NO ROUTINE CHECK UP

Routine checkups are an important point of contact with the health care system. Checkups are an opportunity for screening and counseling services on a wide range of issues ranging from smoking to nutrition. While the U.S. Preventive Services Task Force does not have a specific recommendation regarding the frequency of checkups, they have guidelines for a number of preventive screenings that are often included in a checkup, such as blood pressure tests and cholesterol screenings. Furthermore, for men with chronic illnesses, regular follow up with a provider is important for obtaining both preventive and treatment services. The data for this indicator are drawn from the Behavioral Risk Factor Surveillance Survey (BRFSS). The survey question asked respondents how long it had been since they last visited a doctor for a routine checkup (defined as a general physical exam, not an exam for a specific injury, illness, or condition).

Highlights

- Nationally, 25.5% of men ages 18 to 64 reported no routine checkups in the prior two years (Table 2.3). Approximately one-third of Hispanic men (29.5%) reported they had not had a recent checkup, as did 28.4% of American Indian and Alaska Native, 26.2% of white, 22.9% of Asian American, Native Hawaiian and other Pacific Islander, and 15.1% of black men.
- There was variation within racial and ethnic groups across states. For example, 12.8% of Hispanic men in Pennsylvania reported no recent checkups compared with 53.7% of Hispanic men in Arkansas.
- The U.S. disparity score for this measure was 0.90, indicating that on average, white men had lower rates of routine checkups than men of color overall. This was the only access measure for which minority men had higher access than white men. State disparity scores ranged from a low of 0.51 in Tennessee, where white men had recent checkups at half the rate of minority men, to a high of 1.48 in Rhode Island, where the rate was 48% higher among white men.
- In Figure 2.3, most states were in the lower quadrants, with disparity scores below 1.00, meaning that white men had a higher rate of not having a recent checkup than men of color. This pattern is unusual for an access indicator, as states typically cluster in the upper quadrants. In the lower left quadrant, several states with the lowest disparity scores (District of Columbia, Louisiana, and Tennessee) were also ones in which fewer black men had low rates of not having a routine checkup, but white men had relatively higher rates.
- In the lower right quadrant, two states (Oklahoma and Wyoming) are at the farthest right because they had among the highest shares of white men who had not had a checkup and relatively low disparities between racial and ethnic groups.



Table 2.3. No Routine Checkup in Past Two Years, by State and Race/Ethnicity, 2006 - 2008

State	Disparity Score	Prevalence						
		All Men	White	All Minority*	Black	Hispanic	Asian and NHPI	American Indian/ Alaska Native
All States	0.90	25.5%	26.2%	23.6%	15.1%	29.5%	22.9%	28.4%
Alabama	0.81	21.5%	23.0%	18.6%	17.0%			
Alaska	0.88	33.2%	34.6%	30.3%				33.2%
Arizona	1.31	26.0%	23.3%	30.4%		31.8%		27.9%
Arkansas	1.00	33.6%	33.1%	33.0%	23.3%	53.7%		
California	1.05	27.9%	26.5%	28.0%	10.0%	31.6%	25.9%	
Colorado	1.16	33.0%	31.4%	36.4%	25.3%	39.5%	28.9%	
Connecticut	1.06	19.9%	19.4%	20.6%	12.5%	26.8%	19.4%	
Delaware	1.05	14.2%	14.0%	14.7%	10.0%			
District of Columbia	0.63	17.9%	22.7%	14.3%	11.3%	26.0%		
Florida	0.95	21.8%	22.2%	21.0%	13.9%	24.4%	26.7%	30.9%
Georgia	0.64	22.0%	25.6%	16.4%	14.2%	19.2%		
Hawaii	1.05	26.5%	25.3%	26.5%		25.8%	27.7%	
Idaho	1.11	39.4%	38.9%	43.1%		46.7%		
Illinois	0.81	27.8%	29.5%	23.9%	19.8%	27.0%	25.7%	
Indiana	0.82	31.6%	32.1%	26.4%	17.8%	33.8%		
Iowa	1.07	28.6%	28.4%	30.5%		40.8%		
Kansas	0.97	25.6%	25.4%	24.6%	15.8%	29.0%		
Kentucky	0.71	25.9%	26.6%	19.0%	20.9%			
Louisiana	0.66	17.4%	19.3%	12.7%	11.0%	19.1%		
Maine	1.23	23.6%	23.3%	28.6%				
Maryland	0.75	20.2%	22.5%	16.8%	13.7%	22.3%	20.9%	
Massachusetts	0.93	15.6%	15.7%	14.5%	11.4%	15.4%	16.6%	
Michigan	0.68	24.5%	26.3%	17.8%	14.3%	20.5%		
Minnesota	1.07	23.3%	23.2%	24.8%	20.5%			
Mississippi	0.80	29.1%	31.6%	25.2%	24.5%			
Missouri	0.68	33.4%	34.8%	23.6%	17.7%			
Montana	0.87	32.7%	33.2%	28.8%				25.4%
Nebraska	0.86	33.8%	34.1%	29.3%		37.7%		
Nevada	1.14	33.1%	30.9%	35.3%	17.9%	41.2%		
New Hampshire	0.75	21.7%	22.1%	16.5%				
New Jersey	1.03	17.5%	17.3%	17.8%	11.1%	23.9%	12.9%	
New Mexico	1.13	29.8%	27.9%	31.5%		32.1%		29.6%
New York	0.85	20.9%	21.8%	18.5%	13.1%	24.2%	15.4%	
North Carolina	0.89	23.0%	22.7%	20.2%	12.4%	38.7%	20.2%	24.0%
North Dakota	0.99	33.6%	33.8%	33.3%				38.2%
Ohio	0.76	28.6%	29.4%	22.3%	16.2%	38.5%		
Oklahoma	0.90	35.9%	36.7%	33.1%	28.5%	46.0%		26.8%
Oregon	0.96	32.8%	32.9%	31.7%		37.1%		
Pennsylvania	0.65	23.0%	24.4%	15.9%	15.3%	12.8%	20.9%	
Rhode Island	1.48	14.0%	12.9%	19.1%	13.8%	22.8%		
South Carolina	0.71	26.1%	28.7%	20.5%	17.6%	34.9%		
South Dakota	0.77	32.3%	33.2%	25.6%				24.1%
Tennessee	0.51	15.9%	18.2%	9.2%	8.3%			
Texas	0.91	28.0%	28.9%	26.3%	17.9%	29.1%	20.9%	
Utah	1.03	36.9%	36.7%	38.0%		42.8%		
Vermont	0.93	27.6%	27.7%	25.8%				
Virginia	0.79	24.6%	26.1%	20.7%	17.4%	31.7%		
Washington	1.00	29.9%	29.5%	29.7%	23.8%	37.1%	23.6%	27.8%
West Virginia	0.65	22.0%	22.4%	14.6%				
Wisconsin	0.68	28.9%	29.8%	20.3%	17.3%	22.7%		39.9%
Wyoming	0.94	36.0%	36.4%	34.2%		33.9%		33.8%

Note: Among men ages 18-64.

*All Minority men includes black, Hispanic, Asian and Native Hawaiian or other Pacific Islander (NHPI), American Indian or Alaska Native, and men of two or more races.

A disparity score greater than 1.00 indicates that minority men are doing worse than white men. A disparity score less than 1.00 indicates that minority men are doing better than white men. A disparity score equal to 1.00 indicates that minority and white men are doing the same.

Source: Behavioral Risk Factor Surveillance System, 2006-2008.

 Largest disparity: White men faring worse than men of color
 Largest disparity: Men of color faring worse than white men

 Best state in column
 Worst state in column

NO DENTAL CHECK UP

Dental health is an important, yet, often overlooked aspect of overall health and well-being. In 2000, the Surgeon General’s first-ever report on oral health documented links between oral diseases and other physical illnesses, such as ear and sinus infections, weakened immune systems, diabetes, and several other serious health conditions.⁴⁹ Lack of dental care has the potential to affect speech, nutrition, growth and function, social development, and quality of life throughout the lifespan.⁵⁰ While most seek dental care regularly, those who are poor, disabled, or are racial and ethnic minorities, often face greater challenges accessing dental care and suffer a disproportionate burden of oral disease.⁵¹ The data for this indicator are drawn from the Behavioral Risk Factor Surveillance Survey (BRFSS). The survey question asked respondents if they had a dental checkup in the past two years.

Highlights

- Nationally, 1 in 3 (34.2%) men ages 18 to 64 reported that they did not have a dental checkup in the past two years (Table 2.4). Over 4 in 10 Hispanic (45.7%), American Indian and Alaska Native (42.9%), and black (42.1%) men lacked a timely dental checkup compared to 30.6% of Asian American, Native Hawaiian and other Pacific Islander men and 30.2% of white men.
- There was variation within racial and ethnic groups across states. For example, just over a quarter (26.6%) of Hispanic men in Pennsylvania lacked a recent dental checkup compared with nearly two-thirds (62.8%) of Hispanic men in Arkansas.
- The U.S. disparity score for this measure was 1.39, meaning that men of color had a nearly 40% higher rate of no dental checkup in the past two years than white men. State disparity scores ranged from a low of 0.85 in West Virginia to a high of 1.78 in Connecticut, where the percentage of men of color without a dental checkup was almost 80% higher than the percentage of white men.
- With the exception of West Virginia, all states were in the upper quadrants in Figure 2.4. In West Virginia, 40.9% of white men had not had a recent dental checkup compared to 34.7% of minority men. Furthermore, white men in West Virginia fared worse than white men nationally (40.9% versus 30.2%).
- About half of the states clustered in the upper left quadrant, meaning that white men in those states did better than white men nationally, but men of color had lower rates of dental checkups than white men.
- The other half of states clustered in the upper right quadrant, indicating that a higher share of white men in those states went without a dental checkup than the national average for white men, but men of color were still at a disadvantage relative to white men. In Arkansas, Mississippi, Missouri, and Oklahoma, over 40% of white men lacked a dental visit, but the share was still lower than the rate for minority men in those states.

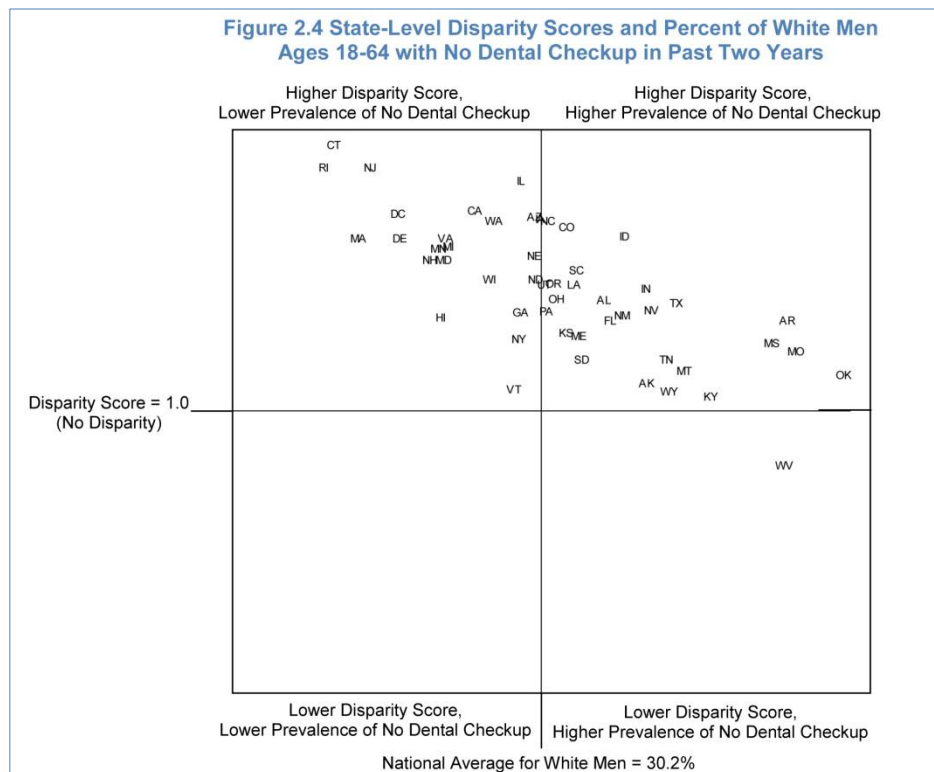


Table 2.4. No Dental Checkup in Past Two Years, by State and Race/Ethnicity, 2006 - 2008

State	Disparity Score	Prevalence						
		All Men	White	All Minority*	Black	Hispanic	Asian and NHPI	American Indian/ Alaska Native
All States	1.39	34.2%	30.2%	42.0%	42.1%	45.7%	30.6%	42.9%
Alabama	1.33	35.7%	32.7%	43.4%	44.1%			
Alaska	1.09	36.1%	34.6%	37.6%				52.2%
Arizona	1.57	35.5%	29.5%	46.3%		46.6%		52.1%
Arkansas	1.27	43.5%	41.1%	52.2%	46.9%	62.8%		
California	1.59	36.6%	26.8%	42.5%	38.4%	47.8%	29.8%	
Colorado	1.54	35.7%	31.0%	47.7%	34.5%	51.6%		
Connecticut	1.78	23.3%	20.3%	36.0%	37.5%	38.6%	26.7%	
Delaware	1.51	25.9%	23.3%	35.1%	37.7%			
District of Columbia	1.58	30.8%	23.2%	36.6%	37.6%	35.3%		
Florida	1.27	36.4%	33.0%	41.9%	41.4%	42.8%		
Georgia	1.29	32.0%	28.9%	37.2%	39.6%	34.2%		
Hawaii	1.28	30.3%	25.3%	32.3%		34.6%	32.4%	
Idaho	1.51	36.2%	33.7%	51.0%		60.6%		
Illinois	1.67	35.8%	29.0%	48.6%	53.7%	47.8%		
Indiana	1.36	37.0%	34.8%	47.3%	45.8%	50.1%		
Iowa	1.56	31.2%	29.9%	46.7%				
Kansas	1.23	32.3%	31.0%	38.2%	35.7%	47.2%		
Kentucky	1.05	37.8%	37.7%	39.4%				
Louisiana	1.37	35.3%	31.4%	43.0%	44.5%	37.5%		
Maine	1.22	31.9%	31.6%	38.6%				
Maryland	1.44	29.6%	25.3%	36.6%	39.4%	36.8%	24.6%	
Massachusetts	1.51	23.6%	21.3%	32.2%	35.9%	32.6%	28.1%	
Michigan	1.48	28.3%	25.6%	37.9%	41.7%			
Minnesota	1.48	26.4%	25.1%	37.0%				
Mississippi	1.20	43.5%	40.4%	48.6%	47.6%			
Missouri	1.18	42.5%	41.5%	49.0%	49.7%			
Montana	1.12	36.9%	36.4%	40.8%				43.5%
Nebraska	1.46	31.4%	29.5%	42.9%		55.5%		
Nevada	1.30	40.0%	34.9%	45.3%		53.3%		
New Hampshire	1.44	25.4%	24.7%	35.6%				
New Jersey	1.71	28.6%	22.0%	37.6%	37.7%	42.8%	27.2%	
New Mexico	1.28	38.4%	33.5%	43.1%		44.9%		41.2%
New York	1.21	31.6%	28.8%	35.0%	32.9%	39.7%	28.5%	
North Carolina	1.56	36.5%	30.1%	46.8%	42.7%	61.8%		43.4%
North Dakota	1.39	30.4%	29.5%	41.0%				
Ohio	1.33	31.7%	30.5%	40.5%	42.8%			
Oklahoma	1.11	45.6%	43.7%	48.6%	53.8%	52.3%		47.6%
Oregon	1.37	31.9%	30.3%	41.7%		49.1%		
Pennsylvania	1.29	31.8%	30.1%	38.9%	47.4%	26.6%		
Rhode Island	1.71	22.3%	19.9%	34.1%		38.6%		
South Carolina	1.41	35.7%	31.4%	44.4%	45.7%	37.8%		
South Dakota	1.16	32.2%	31.7%	36.6%				38.5%
Tennessee	1.15	36.9%	35.6%	41.1%	44.0%			
Texas	1.32	41.2%	36.1%	47.6%	51.1%	48.0%		
Utah	1.37	31.7%	30.0%	41.2%		45.5%		
Vermont	1.07	28.7%	28.6%	30.5%				
Virginia	1.51	28.8%	25.4%	38.2%	39.6%	37.6%		
Washington	1.56	30.8%	27.6%	42.9%	43.5%	53.4%	34.3%	41.4%
West Virginia	0.85	40.6%	40.9%	34.7%				
Wisconsin	1.39	28.7%	27.4%	38.0%	34.3%			
Wyoming	1.06	35.8%	35.7%	37.9%		38.9%		

Note: Among men ages 18-64

*All Minority men includes black, Hispanic, Asian and Native Hawaiian or other Pacific Islander (NHPI), American Indian or Alaska Native, and men of two or more races.

A disparity score greater than 1.00 indicates that minority men are doing worse than white men. A disparity score less than 1.00 indicates that minority men are doing better than white men. A disparity score equal to 1.00 indicates that minority and white men are doing the same.

Source: Behavioral Risk Factor Surveillance System, 2006-2008.

 Largest disparity: White men faring worse than men of color
 Largest disparity: Men of color faring worse than white men

 Best state in column
 Worst state in column

NO COLORECTAL CANCER SCREENING

Colorectal cancer is the third most common cancer among men in the United States.⁵² It is amenable to treatment, particularly when detected early. The United States Preventive Services Task Force recommends that adults ages 50 to 75 be screened for colorectal cancer at least once every ten years using one of the following testing methods: fecal occult blood testing, colonoscopy or sigmoidoscopy.⁵³ These tests can detect precancerous growths that can often be removed before developing into cancer and can also find tumors at an early stage.⁵⁴ Approximately 90 percent of people whose colorectal cancer is found and treated early live for at least another five years. The data for this indicator are drawn from the Behavioral Risk Factor Surveillance Survey (BRFSS). The survey question asked respondents if and when they had a blood stool test, colonoscopy, or flexible sigmoidoscopy.

Highlights

- Nationally, 42.7% of men ages 50 to 64 reported they had not had a colorectal cancer screening test in the past two years (Table 2.5). On average, 56.2% of Hispanic men, 48.4% of American Indian and Alaska Native men, and 46.8% of Asian American, Native Hawaiian and other Pacific Islander had not been screened, compared to 43.2% of black and 40.6% of white men.
- There was variation within racial and ethnic groups across states. For example, 30.7% of black men in Maryland reported they had not received a colorectal cancer screening compared to 55.3% of black men in Arkansas.
- The U.S. disparity score for this indicator was 1.23. State disparity scores ranged from a low of 0.90 in Iowa to a high of 1.62 in California, where more than six in ten black and Asian American and Native Hawaiian and other Pacific Islander men reported that they had not had a recent colorectal cancer screening.
- Figure 2.5 shows only Iowa and Vermont in the lower quadrants, with disparity scores below 1.00. Several states had disparity scores close to 1.00 and hovered near the x-axis, indicating that there was a similar share of white and minority men who had not had a recent colorectal screening test.
- Of the states in the upper left quadrant of Figure 2.5, California, Minnesota, and Rhode Island hovered above the rest as states with the highest disparity scores on this indicator.
- In the upper right quadrant, Wyoming stands out at the far right. While there is relatively little disparity between white men and men of color in the state, the rate of no recent colon cancer screening test among both groups was greater than the national average.



Table 2.5. No Colorectal Cancer Screening in Past Two Years, by State and Race/Ethnicity, 2006 - 2008

State	Disparity Score	Prevalence						
		All Men	White	All Minority*	Black	Hispanic	Asian and NHPI	American Indian/ Alaska Native
All States	1.23	42.7%	40.6%	50.1%	43.2%	56.2%	46.8%	48.4%
Alabama	1.08	47.1%	46.2%	49.7%	51.1%			
Alaska	1.08	47.5%	47.1%	50.8%				47.5%
Arizona	1.54	44.3%	41.3%	63.5%		68.7%		
Arkansas	1.25	49.1%	47.6%	59.7%	55.3%			
California	1.62	47.2%	37.8%	61.3%		65.1%	61.8%	
Colorado	1.25	42.8%	40.9%	51.3%		53.4%		
Connecticut	1.29	33.0%	31.8%	41.1%				
Delaware	1.31	31.2%	29.9%	39.0%				
District of Columbia	1.40	38.9%	31.4%	43.9%	43.4%			
Florida	1.34	42.3%	38.8%	52.1%	39.2%	59.3%		
Georgia	1.11	44.1%	42.7%	47.5%	45.3%			
Hawaii	1.19	46.7%	42.5%	50.7%		56.6%	48.2%	
Idaho	1.26	51.6%	50.6%	63.9%				
Illinois	1.14	47.4%	45.8%	52.4%				
Indiana	1.15	50.0%	49.2%	56.4%	47.7%			
Iowa	0.90	44.4%	44.7%	40.2%				
Kansas	1.23	44.8%	44.0%	54.0%				
Kentucky	1.10	41.7%	41.3%	45.5%				
Louisiana	1.17	51.1%	48.4%	56.7%	55.3%			
Maine	1.07	31.1%	31.0%	33.1%				
Maryland	1.03	33.9%	33.7%	34.7%	30.7%			
Massachusetts	1.50	30.4%	28.5%	42.7%	45.8%	46.7%		
Michigan	1.12	36.7%	36.0%	40.4%	36.7%			
Minnesota	1.59	39.0%	37.9%	60.4%				
Mississippi	1.10	50.5%	48.9%	53.9%	52.3%			
Missouri	1.26	46.0%	44.7%	56.4%				
Montana	1.01	50.0%	50.0%	50.5%				61.5%
Nebraska	1.08	49.6%	49.4%	53.1%				
Nevada	1.12	48.8%	47.3%	53.0%				
New Hampshire	1.05	34.0%	33.9%	35.5%				
New Jersey	1.36	43.9%	39.9%	54.1%	52.0%	58.2%		
New Mexico	1.30	49.3%	44.1%	57.2%		55.8%		
New York	1.49	39.0%	33.7%	50.2%	40.4%			
North Carolina	1.18	39.4%	37.9%	44.9%	40.7%			
North Dakota	1.10	51.3%	51.1%	56.4%				
Ohio	1.01	44.3%	43.8%	44.3%	36.0%			
Oklahoma	1.10	50.8%	50.5%	55.5%	47.2%			49.1%
Oregon	1.19	42.9%	42.4%	50.6%				
Pennsylvania	1.03	42.3%	42.2%	43.6%	42.3%			
Rhode Island	1.58	33.1%	31.1%	49.1%				
South Carolina	1.19	42.3%	40.0%	47.5%	46.6%			
South Dakota	1.17	47.1%	46.6%	54.6%				54.5%
Tennessee	1.24	45.5%	44.1%	54.7%	48.2%			
Texas	1.38	50.5%	45.0%	62.1%	50.6%	66.5%		
Utah	1.19	39.9%	39.0%	46.5%				
Vermont	0.92	35.0%	35.1%	32.4%				
Virginia	1.09	37.2%	36.9%	40.3%	39.7%			
Washington	1.22	40.2%	39.5%	48.3%		56.3%		
West Virginia	1.13	49.4%	49.1%	55.8%				
Wisconsin	1.45	40.0%	38.9%	56.2%				
Wyoming	1.08	52.5%	52.2%	56.4%				

Note: Among men ages 50-64

*All Minority men includes black, Hispanic, Asian and Native Hawaiian or other Pacific Islander (NHPI), American Indian or Alaska Native, and men of two or more races.

A disparity score greater than 1.00 indicates that minority men are doing worse than white men. A disparity score less than 1.00 indicates that minority men are doing better than white men. A disparity score equal to 1.00 indicates that minority and white men are doing the same.

Source: Behavioral Risk Factor Surveillance System, 2006-2008.

⋯ Largest disparity: White men faring worse than men of color
 □ Largest disparity: Men of color faring worse than white men

⋯ Best state in column
 □ Worst state in column

NO DOCTOR VISIT DUE TO COST

Affordability of health care is a problem for many Americans. For men who are uninsured and must bear the full costs of health care services, affordability is often a leading reason for postponing or forgoing health care.⁵⁵ Even among those with insurance, costs associated with co-payments and coinsurance cause many to postpone or go without needed care.⁵⁶ Medicaid, the federal-state program to assist low-income families, the elderly, and people with disabilities, has no premiums and only nominal cost-sharing if any, but even those costs can be a barrier to those with very few resources. The data for this indicator are drawn from the Behavioral Risk Factor Surveillance Survey (BRFSS). The survey question asked respondents if there was a time in the past 12 months when they needed to see a doctor but could not because of cost.

Highlights

- Nationally, 13.2% of men ages 18 to 64 reported they did not visit a doctor in the prior year due to cost (Table 2.6). On average, 21.8% of Hispanic, 20.7% of American Indian and Alaska Native men, and 18.2% of black men reported cost as a barrier to care. This was about twice the rate of Asian American, Native Hawaiian and other Pacific Islander men (10.9%), and white men (10.3%).
- There was variation within racial and ethnic groups across states. For example, 27.4% of black men in Texas reported they went without a doctor visit because of cost compared to 8.8 % of black men in Nevada.
- The U.S. disparity score for this indicator was 1.83, indicating that the share of men of color who went without care because of cost was 80% higher than white men. State disparity scores ranged from a low of 0.99 in Tennessee, where the rates were nearly identical between white and minority men, to a high of 3.30 in the District of Columbia, where minority men in every subgroup reported that they went without care due to cost at three to four times the rate of white men.
- Almost all of the states were in the upper quadrants of Figure 2.6, indicating a disparity score greater than 1.00. Smaller shares of white men in those states went without care due to cost than minority men. Of the states in the upper left quadrant, Rhode Island and the District of Columbia hovered above the rest with the highest disparity scores on this indicator.
- In the upper right quadrant, West Virginia is an outlier. While there is little relative disparity between white men and men of color within the state, men in West Virginia went without care due to cost more often than the national average.
- Only Tennessee is in the lower quadrants, with a disparity score just lower than 1.00. Although the share of white and minority men for whom cost was a barrier to care was similar in Tennessee, the rate among white men was higher than the national average, but lower than average among men of color.

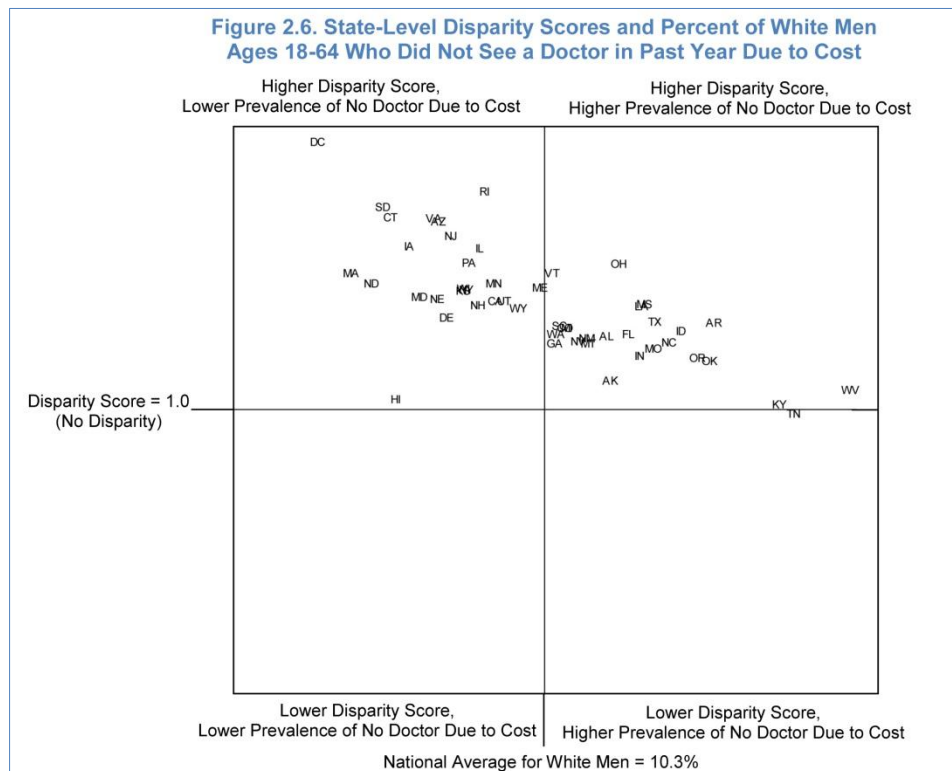


Table 2.6. No Doctor Visit in Past Year Due to Cost, by State and Race/Ethnicity, 2006 - 2008

State	Disparity Score	Prevalence						
		All Men	White	All Minority*	Black	Hispanic	Asian and NHPI	American Indian/ Alaska Native
All States	1.83	13.2%	10.3%	18.9%	18.2%	21.8%	10.9%	20.7%
Alabama	1.64	13.8%	11.7%	19.1%	17.8%			
Alaska	1.26	13.0%	11.7%	14.8%				18.3%
Arizona	2.62	12.1%	7.6%	20.0%		22.8%		16.8%
Arkansas	1.76	16.2%	14.2%	24.9%	24.9%	24.9%		
California	1.94	14.2%	9.0%	17.4%	13.5%	20.9%	9.6%	
Colorado	1.71	13.0%	10.6%	18.2%	14.7%	19.7%	8.2%	
Connecticut	2.66	8.8%	6.5%	17.2%	18.0%	18.8%	10.9%	
Delaware	1.80	9.1%	7.8%	14.0%	10.5%			
District of Columbia	3.30	11.2%	4.7%	15.6%	15.1%	20.7%		
Florida	1.66	15.5%	12.2%	20.2%	16.3%	24.0%	5.3%	30.2%
Georgia	1.58	12.9%	10.4%	16.5%	15.7%	18.0%		
Hawaii	1.11	7.0%	6.7%	7.4%		11.0%	6.5%	
Idaho	1.69	14.7%	13.5%	22.7%		25.0%		
Illinois	2.39	13.2%	8.7%	20.8%	20.5%	24.1%	13.2%	
Indiana	1.48	13.7%	12.5%	18.5%	18.2%	17.4%		
Iowa	2.41	7.8%	7.0%	16.8%		19.6%		
Kansas	2.03	9.7%	8.2%	16.7%	11.9%	20.9%		
Kentucky	1.06	15.7%	15.8%	16.7%	15.5%			
Louisiana	1.90	16.2%	12.5%	23.8%	25.0%	20.4%		
Maine	2.06	10.6%	10.1%	20.7%				
Maryland	1.98	10.2%	7.2%	14.2%	12.6%	22.1%	7.4%	
Massachusetts	2.18	7.1%	5.5%	12.0%	13.8%	17.9%	3.8%	
Michigan	1.71	12.5%	10.7%	18.4%	18.3%	18.7%		
Minnesota	2.09	10.1%	8.9%	18.7%	19.5%			
Mississippi	1.91	16.9%	12.5%	24.0%	25.6%			
Missouri	1.54	13.7%	12.7%	19.6%	20.9%			
Montana	1.58	11.9%	11.2%	17.7%				13.3%
Nebraska	1.96	8.4%	7.6%	14.9%		18.7%		
Nevada	1.60	13.9%	10.9%	17.5%	8.8%	21.0%		
New Hampshire	1.90	9.1%	8.6%	16.3%				
New Jersey	2.50	12.6%	7.9%	19.9%	19.9%	24.5%	11.0%	
New Mexico	1.63	14.7%	11.2%	18.2%		18.1%		15.6%
New York	2.04	12.1%	8.3%	16.9%	12.8%	23.1%	10.9%	
North Carolina	1.59	16.1%	13.1%	20.9%	18.1%	26.6%	18.5%	26.7%
North Dakota	2.10	6.6%	6.0%	12.6%				11.9%
Ohio	2.26	13.8%	11.9%	26.9%	24.8%	38.0%		
Oklahoma	1.43	16.4%	14.1%	20.2%	20.9%	28.4%		17.7%
Oregon	1.45	14.6%	13.8%	20.1%		24.3%		
Pennsylvania	2.27	10.4%	8.4%	19.0%	20.7%	20.9%	4.1%	
Rhode Island	2.87	11.8%	8.8%	25.3%	20.7%	32.5%		
South Carolina	1.73	13.3%	10.5%	18.2%	17.0%	22.9%		
South Dakota	2.74	7.3%	6.3%	17.3%				10.0%
Tennessee	0.99	16.1%	16.1%	15.9%	15.2%			
Texas	1.77	17.7%	12.8%	22.6%	27.4%	21.5%	19.1%	
Utah	1.94	10.6%	9.2%	17.8%		19.0%		
Vermont	2.18	11.0%	10.3%	22.5%				
Virginia	2.65	10.6%	7.5%	19.8%	16.4%	32.8%		
Washington	1.66	11.9%	10.4%	17.2%	21.6%	23.8%	7.9%	19.9%
West Virginia	1.19	17.6%	17.4%	20.7%				
Wisconsin	2.05	9.2%	8.2%	16.9%	18.1%	16.3%		12.9%
Wyoming	1.88	10.5%	9.5%	17.8%		15.7%		22.4%

Note: Among men ages 18-64

*All Minority men includes black, Hispanic, Asian and Native Hawaiian or other Pacific Islander (NHPI), American Indian or Alaska Native, and men of two or more races.

A disparity score greater than 1.00 indicates that minority men are doing worse than white men. A disparity score less than 1.00 indicates that minority men are doing better than white men. A disparity score equal to 1.00 indicates that minority and white men are doing the same.

Source: Behavioral Risk Factor Surveillance System, 2006-2008.

 Largest disparity: White men faring worse than men of color
 Largest disparity: Men of color faring worse than white men

 Best state in column
 Worst state in column