

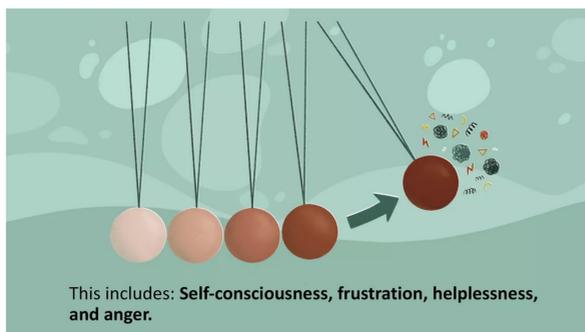
Examination of Medicaid Insurance as a barrier to patient choice in scalp psoriasis treatment modalities in the African American population

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Background

Psoriasis is a chronic disease that is well-known as difficult to treat with substantial effects on patient quality of life.

It is less common in African Americans than Caucasians within the U.S., but is by no means a “rare” diagnosis. Despite, black patients experience more severe disease and worse quality of life.



Treatment of scalp psoriasis in particular bears treatment challenges of its' own due to the unique hair styles, textures, and practices within the African American population.

Literature emphasizes the importance in patients being given an option to choose their topical steroid vehicle.



Two potential barriers in achieving optimal scalp psoriasis treatment : **Being a Medicaid recipient vs. Not being given an option to choose a vehicle by dermatologic provider**

Research Question

Is being publicly insured a barrier for African-American patients in accessing a self-selected steroid vehicle?

Methods

State Medicaid formularies for all 50 states were queried for coverage of 35 different topical steroid + vehicle combinations commonly used in scalp psoriasis treatment. Coverage was categorized as:

- Preferred
- Non-preferred
- Not listed at all

State-level characteristics as determined by the Kaiser Family Foundation:

- % of population enrolled in Medicaid
- % of black population enrolled in Medicaid

Results

Coverage status was **not significantly associated** with either percentage of the state with Medicaid insurance nor the proportion of a state's African-American population on Medicaid in all but 1 combination analyzed (Desoximetasone 0.25% spray/liquid, $p = 0.0289$).



Conclusions

Being a Medicaid recipient does not appear to be a significant structural factor contributing to race-based disparities for African Americans achieving optimal, patient-driven scalp psoriasis treatment.

Future Directions

Efforts of dermatologic providers should be geared toward **ensuring their patients' individual preferences for a steroid vehicle are being explored.**

It is the **duty & responsibility** of the dermatology provider to seek out and implement ways to make equitable care achievable for all their patients.