

## SCREENING & REFERRAL FOR FOOD INSECURITY

IN KAISER PERMANENTE COLORADO

### PRELIMINARY REPORT #2

# How common is Food Insecurity among Elderly KP Members?



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Elderly Medicare Advantage members in Kaiser Permanente Colorado (KPCO) are offered an annual Medicare Total Health Assessment (MTHA) survey, which includes a single screening question about food insecurity, “Do you always have enough money to buy the food you need?” In [Preliminary Report #1](#) from our evaluation of this screening program, we reported that 51,482 elderly KPCO members were screened for food insecurity at least once between 2012 and 2015. This report presents some of the early learnings from this screening program.

## What is the prevalence of food insecurity among elderly KPCO members?

Of these 51,482, 2863 (5.6%) indicated that they “ever” experienced food insecurity. This estimate is lower than the 8.3% [national prevalence of food insecurity among US households](#) containing at least one elderly person, although differences in the population surveyed and the survey questions make comparisons between KP results and national findings difficult to interpret. (USDA, 2015)

## Does the prevalence of food insecurity vary by mode of MTHA administration?

Elderly KPCO members can complete the MTHA online through the KP patient portal kp.org, by telephone using interactive voice-response (IVR) technology, or in person during clinic visits. Table 1 shows that individuals who completed the MTHA online were the least likely to report food insecurity, while those who completed the survey in-person were the most likely to do so:

**Table 1: Prevalence of Food Insecurity by Mode of Survey Administration**

Mode of MTHA administration	N	Proportion using each mode	Prevalence of food insecurity
On line (kp.org)	21277	41.3%	3.0%
In person	9953	19.3%	9.0%
IVR	20169	39.2%	6.5%
Unknown	83	0.2%	8.4%
Overall	51482	100.0%	5.6%

Table 2 shows that individuals who completed the survey online were generally younger, less likely to

be members of a racial or ethnic minority, and healthier (fewer medical conditions) than those who were surveyed by other means.

**Table 2: Comparison of Patient Characteristics by Mode of Survey Administration**

Member Characteristics	All	On line (KP.org)	In person	IVR	Unknown
Age	71.2	69.8	71.8	72.4	73.8
White (%)	82.0	88.1	76.1	78.5	85.5
Chronic health conditions	3.0	2.8	3.0	3.1	2.8

**Does food insecurity change over time?**

Since the MTHA is offered yearly, 1,383 (48.3% of the 2,863 members with food insecurity) completed multiple surveys. Among these individuals, 139 (10%) reported food insecurity on every survey, while 1244 (90%) reported food insecurity on some but not all of their surveys.

**CONCLUSIONS:**

- Although food insecurity is less common among elderly KPCO members than the general population, many members do not always have enough money to buy the food they need.
- Members who completed the MTHA on-line were less likely to report food insecurity, but on-line respondents were younger, healthier, and

presumably had technology and skills to complete a [survey online](#). Such individuals may inherently be at lower risk of food insecurity.

- Food insecurity may vary over time. A single cross-sectional screening effort is unlikely to detect all vulnerable KPCO members.

## **WHAT'S NEXT?**

The next report from this evaluation will compare the socio-demographic and clinical characteristics of KPCO members who reported food insecurity to those who did not.

Thoughts and Comments?

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