

New Findings from the Health Reform Monitoring Survey

Medicaid and CHIP Payment and Access Commission

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Overview

- Update on coverage and Medicaid enrollment changes following Affordable Care Act (ACA) implementation
- Background on the Health Reform Monitoring Survey (HRMS)
- Characteristics of newly enrolled adults in the Medicaid expansion:
 - Demographic/socioeconomic characteristics
 - Health status
 - Access to care
 - Utilization of services
 - Satisfaction with coverage

Coverage and Medicaid Enrollment Changes Following ACA Implementation

Overall Insurance Coverage Gains

- 14.1 million uninsured adults have gained coverage since the beginning of open enrollment
 - Uninsured rate declined from 20.3% to 13.2%
- Coverage gains were larger in states that expanded Medicaid
 - For those with incomes below 138% FPL, expansion states saw a 13 percentage point decline in their uninsured rate, while non-expansion states saw a 7 percentage point decline

Source: Office of the Assistant Secretary for Planning and Evaluation (ASPE): Health insurance coverage and the Affordable Care Act (2015).

Medicaid Enrollment Changes

- As of January 2015, there were approximately 70 million full-benefit Medicaid and CHIP enrollees
- Overall, states reported a 19.3% increase in enrollment from their 2013 baselines
 - Expansion states reported enrollment increases of 26.1% compared to 7.8% in non-expansion states

Source: Centers for Medicare & Medicaid Services: Medicaid & CHIP: January 2015 monthly applications, eligibility determinations and enrollment report (2015).

Note: Baseline comparisons are only available for 49 states, excluding Connecticut and Maine.



Medicaid Enrollment in the New Adult Group

- As of March 2014, 4.8 million expansion group adults were enrolled (excluding CA, DC, ND)
 - 3.2 million qualify for 100% newly eligible federal match
 - 1.5 million are not newly eligible
- Represents about 8.8% of all Medicaid enrollees in 48 states with data
 - 17.9% of enrollees in 22 expansion states with data

Source: Centers for Medicare & Medicaid Services: Total Medicaid enrollees – VIII group break out report (2015). Note: Four additional states – Indiana, Michigan, New Hampshire, and Pennsylvania – have since expanded.

Health Reform Monitoring Survey Results

Health Reform Monitoring Survey (HRMS)

- Quarterly internet-based survey of nonelderly adults (age 18-64)
- Collects data on:
 - Health coverage
 - Health status
 - Access to care
 - Affordability of care
- Data presented here are primarily from Quarter
 3 and Quarter 4 2014

HRMS Definition of Expansion Population

- Adults age 18 to 64
- Report Medicaid at the time of the survey
- Uninsured for part or all of the past 12 months
- Live in an expansion state
- Have family incomes at or below 138% FPL
- May include some previously eligible, but not enrolled adults

Interest in the New Medicaid Enrollees

- Health status and access to services has implications for costs and system capacity
- Limited data exist on these factors
- HRMS provides first picture of who gained coverage after the Medicaid expansion
- Analysis compares estimates for expansion population to full-year Medicaid population, exchange enrollees, adults with employersponsored insurance, and uninsured adults

Demographic Characteristics

- Slightly less than half of the expansion population is between ages of 18 and 34
- Almost 60% are female (lower than full-year Medicaid enrollees)
- About 44% are parents
- Nearly half are white and almost a third are Hispanic

Socioeconomic Characteristics

- Over 40% of the expansion population was employed, with the majority working part-time (higher than full-year Medicaid enrollees)
- 70% reported family income below 100% FPL
- Almost 60% were uninsured prior to enrolling
- Half received Supplemental Nutrition Assistance Program (SNAP) benefits
- More than a quarter claimed the Earned Income Tax Credit (EITC)

Source: Urban Institute analysis of HRMS, Q3 2014 and Q4 2014. SNAP and EITC benefits are from Q2 2014 and Q4 2014.



Health Status

- Compared to those with exchange or employersponsored coverage, expansion adults are more likely to report fair or poor health and more average days in poor physical or mental health
- Compared to those with full-year Medicaid (i.e., the previously eligible Medicaid population), expansion adults report fewer average days in poor physical health, but comparable in terms of poor mental health days

Source: Urban Institute analysis of HRMS, Q3 2014 and Q4 2014.

Access to Care

- 6 in 10 adults covered under the Medicaid expansion reported having a usual source of care
- More than one-third of the Medicaid expansion population reported access barriers
 - Responses are based on the previous 12 months, so barriers may have occurred prior to enrollment in Medicaid
- Higher share of full-year Medicaid enrollees had a usual source of care and a routine checkup within the past year, and they reported fewer access barriers

Source: Urban Institute analysis of HRMS, Q3 2014 and Q4 2014.

Satisfaction with Current Coverage

- Adults newly enrolled under the Medicaid expansion are less satisfied with the availability and quality of services compared to those with exchange, employer-sponsored, or full-year Medicaid coverage
- However, they reported less dissatisfaction with the cost of coverage compared to those with exchange or employer-sponsored coverage

Source: Urban Institute analysis of HRMS, Q3 2014 and Q4 2014.

Future Work

- Ongoing monitoring of survey data
 - HRMS and other private surveys
 - Federal surveys due out in the fall
- Examining administrative data from CMS
 - Enrollment data from CMS-64 and performance indicators
 - Encounter data