

# **Medicaid Expansion in Kentucky**

Emily Beauregard, MPH, Executive Director

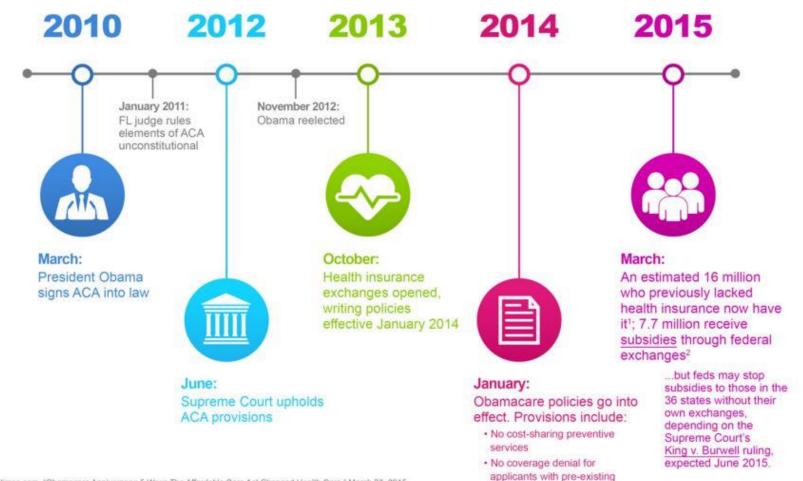
Emily.beauregard@kyvoicesforhealth.org

# Today we'll discuss...

- The ACA and Medicaid expansion
- Current state of Medicaid in Kentucky
- Measuring the success of expanded coverage
- Reforming Medicaid through 1115 waivers
- Opportunities to move beyond coverage to better care

# The ACA & Medicaid Expansion

#### **ACA Timeline**

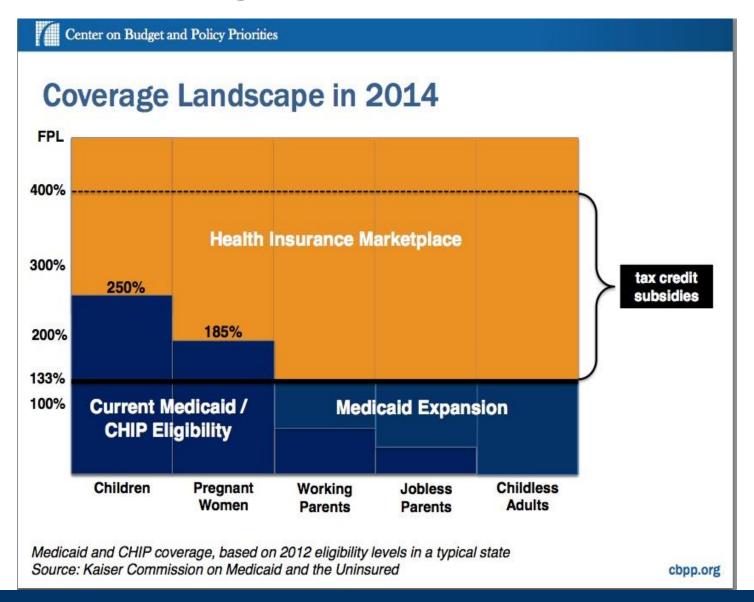


conditions

"ibtimes.com. "Obamacare Anniversary: 5 Ways The Affordable Care Act Changed Health Care." March 23, 2015.

Fvox.com. "Obamacare is 5 years old, and Americans are still worried about death panels." March 23, 2015.

## **Coverage Based on Income**



### **Essential Health Benefits**

#### All health coverage must include essential health benefits:

- 1. Doctor visits
- 2. Hospitalization
- 3. Emergency Care
- 4. Maternity and Newborn Care
- 5. Pediatric Care (including Dental and Vision)
- 6. Prescriptions
- 7. Medical Tests
- 8. Mental Health Care and Substance Abuse
- 9. Physical, Speech & Occupational Therapy
- 10. Wellness

## **Individual Mandate**

The ACA requires most people over age 18 to have public or private health insurance or face fines beginning in 2014.

Must enroll in health coverage before March 31, 2014.

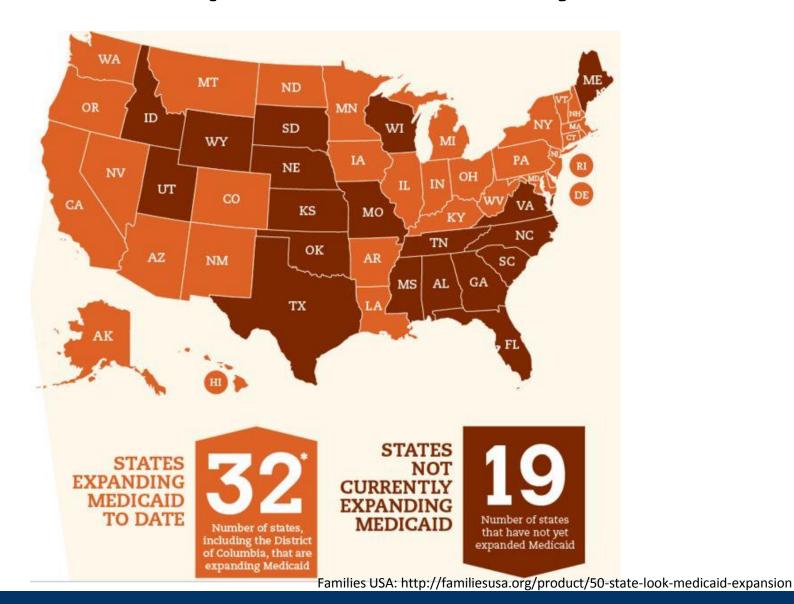
# **Supreme Court Decision: June 2012**

Upheld the constitutionality of the ACA's individual mandate.

#### **BUT**

The ruling made the Medicaid expansion optional for states.

# **Medicaid Expansion State-by-State**



# Why Medicaid Expansion is Important for Kentucky

## **Poor Health Status**

In 2013, Kentucky ranked...

50<sup>th</sup> in smoking

40<sup>th</sup> in obesity

43<sup>rd</sup> in sedentary lifestyles

41st in diabetes

50<sup>th</sup> in cancer deaths

48<sup>th</sup> in heart attacks

44th in annual dental visits

# Status of Kentucky's Uninsured

In 2013...

20.4% or 640k Kentuckians were uninsured.

Of these, more than 300k were estimated to be eligible for expanded Medicaid.

Total annual costs associated with uninsured Kentuckians are estimated at more than \$1 billion.

# **Impact of Being Uninsured**

Surveys conducted by the University of Kentucky reveal a number of problems experienced by uninsured Kentuckians.

#### Because of the cost of health care, the uninsured are:

- Three times more likely than people with insurance to <u>not</u> go to a doctor when sick.
- Twice as likely to skip a medical test or treatment recommended by a doctor.
- Twice as likely than people with insurance to <u>not</u> fill a prescription.
- Almost three times more likely than the insured to have a problem paying a medical bill.
- More than twice as likely to be contacted by a collection agency about medical bills.
   Health Status and Care Access of the Uninsured in Kentucky

Douglas Keith Branham, University of Kentucky

# **Helping Low Income Kentuckians**

#### In 2013...

The adult poverty rate in Kentucky was 18% compared to 14.3% nationally.

Before expansion, Medicaid covered very few adults with the exception of:

- Aged, Blind, Disabled
- Parents at or below 57% FPL

Expansion covers individuals and families up to 138% FPL

- Individuals 18 or older making less than \$16,394
- Family of four making less than \$33,534

# Paying for Expanded Coverage

The ACA established a new national floor of Medicaid coverage at 138% of poverty level

Guaranteed 100% Federal match for 3 years

No cost to states until 2017

СҮ	Enhanced FMAP Percentage
2014	100%
2015	100%
2016	100%
2017	95%
2018	94%
2019	93%
2020 and beyond	90%

# **How Kentucky Expanded**

Governor Beshear announced his decision to expand Medicaid on May 9, 2013

Existing state law gave the Secretary of Health and Family Services authority "to take advantage of all federal funds that may be available for medical assistance...the secretary...may by regulation comply with any requirement that maybe imposed or opportunity that may be presented by federal law."

# Stakeholder Support for Expansion

**Associations** 

Universities

Health plans

Hospitals

Primary care providers

Mental health organizations

Social services organizations

Advocacy organizations



# Who's Eligible for Medicaid

#### Will I qualify for coverage?

To be eligible for healthcare coverage through kynect, you:

- Must live in Kentucky
- Must be a U.S. citizen or national (or meet qualified alien status)
- Cannot currently be in prison
- Must provide proof of income

Under the new rules, resources are not counted for family and children Medicaid cases. Traditional Medicaid such as for the aged, blind and disabled still has an asset test (cash, property, IRA).

Income Levels for Programs

If your household size is this:	You may be eligible for Medicaid if your income* is this:	You may be eligible for help with your insurance bill if your income* is this:
1	Less than \$16,394	\$16,395-\$47,080
2	Less than \$22,107	\$22,108-\$63,720
3	Less than \$27,820	\$27,821-\$80,360
4	Less than \$33,534	\$33,535-\$97,000
5	Less than \$39,247	\$39,248-\$113,640
6	Less than \$44,960	\$44,961-\$130,280
7	Less than \$50,687	\$50,688-\$146,920
8	Less than \$56,428	\$56,429-\$163,560

<sup>\*</sup>Income levels are based on the year 2016. Children and pregnant women may still qualify with higher income levels.

# Who's Covered by Medicaid

In 2016...

Traditional 888,000

Expansion 428,000

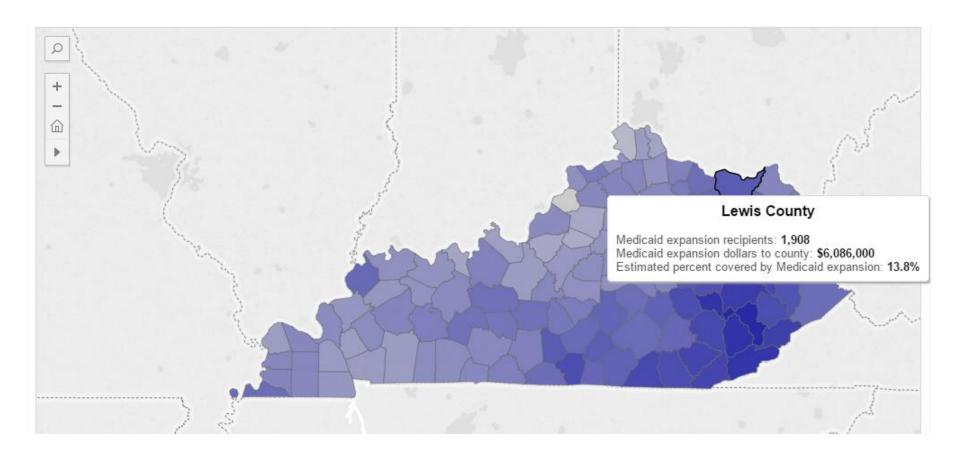
Total 1,350,000

### **Medicaid Enrollment**

This map shows the distribution of traditional income-based and ACA Medicaid expansion enrollees across Kentucky (ages 19 to 64) from October - December 2015.

31% live in Eastern Kentucky 26% live in Western Kentucky 19% live in Greater Louisville 16% live in Greater Lexington 8% live in Northern Kentucky 11-20% 0-10%

#### **County-by-County Look at Medicaid Expansion**



# **New & Improved Medicaid Benefits**

Medicaid now aligns with the essential health benefits, meaning less changes when you move between Medicaid and a Qualified Health Plan.

New benefit: substance use treatment

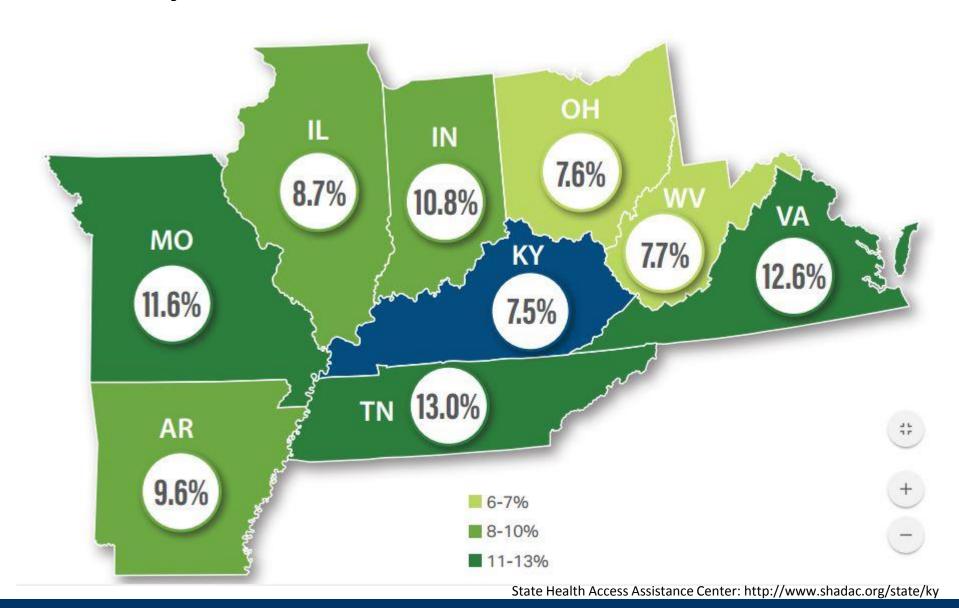
Improved benefit: dental for adults

# **Medicaid Cost Sharing**

- > No premiums
- Minimal co-pays (MCOs can wave)
  - Acute hospital in-patient = \$50
  - ER for non-emergency use = \$8
  - Adult dental or vision = \$3
  - Urgent care = \$3
  - Prescriptions
    - \$1 generic / \$3 preferred brand / \$8 non-preferred brand
  - Lab / Diagnostic / Radiology = \$3

# Measuring the Impact of Expanded Coverage

#### Kentucky Leads the Nation in the Decrease in Uninsured



## **Increase in Preventive Screenings for 2014**

LDL-C screenings

Preventive dental services

Hemoglobin A1c tests

Cervical cancer screenings

Breast cancer screenings

Colorectal cancer screenings

111%

116%

1 92%

**1** 88%

111%

108%

# **Health Impact of Expanded Coverage**

#### Medicaid Preventive Services

During the past quarter (April-June 2015), Medicaid covered thousands of needed services for traditional income-based and ACA Medicaid expansion enrollees ages 19 to 64.



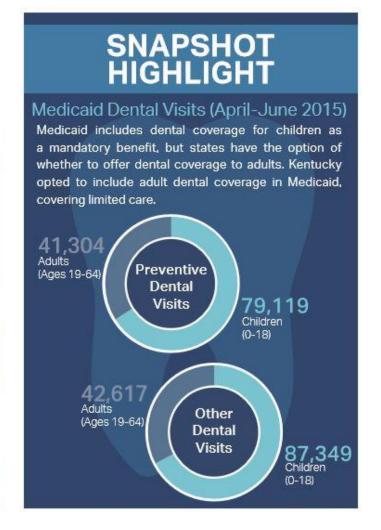
Breast Cancer Screening Breakout

Traditional Income-Based Medicaid 1,188

ACA Medicaid Expansion 9,003

Substance Abuse Treatment Services

treatment services were provided to traditional income-based and expansion enrollees ages 19-64.



# **Health Impact of Expanded Coverage**

#### Medicaid Preventive Services

During the quarter (July - September 2015), Medicaid covered thousands of needed services for traditional income-based and ACA Medicaid expansion enrollees ages 19 to 64.



Colorectal Cancer Screening Breakout

Traditional Income-Based Medicaid 666

ACA Medicaid Expansion 5,561

#### **Dental Services**



#### SNAPSHOT HIGHLIGHT

Substance Abuse Treatment Services (July-September 2015)

Kentucky ranks **2nd** in the U.S. for overdose deaths. **25%** of Kentuckians say they personally know someone who has abused prescription drugs, and **13%** know someone who has had problems with heroin.<sup>1</sup>



Substance abuse treatment services became part of the standard Medicaid service package as a result of the state's ACA implementation.

This graphic shows the number of substance abuse services provided to Medicaid enrollees ages 19-64.

# Change in ER Utilization for 2014

All Payers: ER VISITS



**SELF-PAY** 

1

-53%

**CHARITY** 



**-81%** 

**MEDICAID** 



+33%

**TOTAL ER VISITS** 



-3%

# Reforming Medicaid through 1115 Waivers

# Purpose of the 1115 Waiver

Waivers are vehicles states can use to test new or existing ways to deliver and pay for health care services in Medicaid and the Children's Health Insurance Program (CHIP).

Allows states flexibility to design and improve their Medicaid programs through demonstrations that:

- Expanding eligibility to individuals who are not otherwise Medicaid or CHIP eligible.
- Providing services not typically covered by Medicaid.
- Using innovative service delivery systems that:
  - improve care
  - increase efficiency
  - reduce costs

# Opportunities for Moving Beyond Coverage to Better Care

- Investing in the things that keep people healthy
- Providing the right care, in the right setting, at the right time
- Paying for better outcomes, not more care
- Reducing health disparities, by addressing the social determinants of health

# **Questions?**

Emily Beauregard, MPH, Executive Director

Emily.beauregard@kyvoicesforhealth.org

### 10 Essential Health Benefits

#### Every health plan must cover the following services:

- 1. Outpatient care
- 2. Emergency services
- 3. Hospitalization
- 4. Pregnancy, maternity, and newborn care
- 5. Mental health and substance use disorder services
- 6. Prescription drugs
- 7. Rehabilitative and habilitative services and devices
- 8. Laboratory services
- 9. Preventive and wellness services and chronic disease management
- 10. Pediatric services, including oral and vision care