

The Changing Landscape of Healthcare Coverage Across Ohio: What does it mean for our health?

Debut of the 2015 Ohio Medicaid
Assessment Survey Statewide Findings

August 19, 2015

#OMAS2015

Sponsors and Partners





WELCOME

TERESA C. LONG, MD, MPH, HEALTH COMMISSIONER
COLUMBUS PUBLIC HEALTH

2015 Ohio Medicaid Assessment Survey

- Key tool for state agencies and local public health organizations to identify and address gaps in needed health services
- Rigorous approach to ensure high-quality data
- Representative of all Ohioans
 - 42,876 adult interviews (19 years & older)
 - 10,122 child interviews (0-18 years)
 - Child interview is completed by an adult proxy

Today's Presentations

- Ohio's Significant Shifts in Healthcare Coverage
- Health Profile of Key Populations
- An Interactive Tool for Exploring the Data

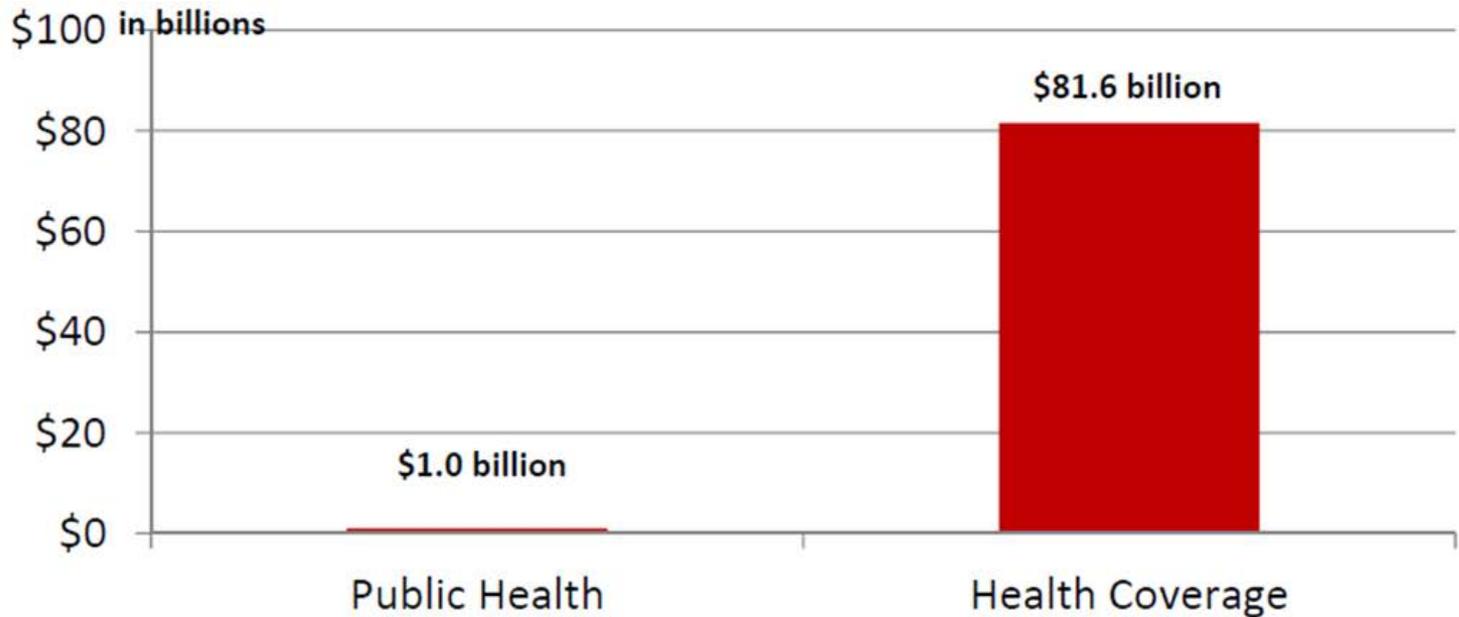
Ohio Department of Medicaid

- The OMAS is a critical tool to monitor the effects of policy and systemic changes
- Unique strengths include:
 - Population-based and collects multiple domains of insurance access and use
 - Supports comparison of the enrolled Medicaid population to others, such as the potentially eligible but not enrolled
 - Supports subgroup analysis

Ohio Department of Health

- OMAS helps ODH better serve Ohioans
- Through OMAS data, we can:
 - Better understand the populations we serve.
 - Effectively adapt to the changing healthcare landscape.
 - Identify the most at-risk populations across Ohio.
 - Obtain a unique level of unmet need and quality of care data.

Better Planning for Better Health in Ohio

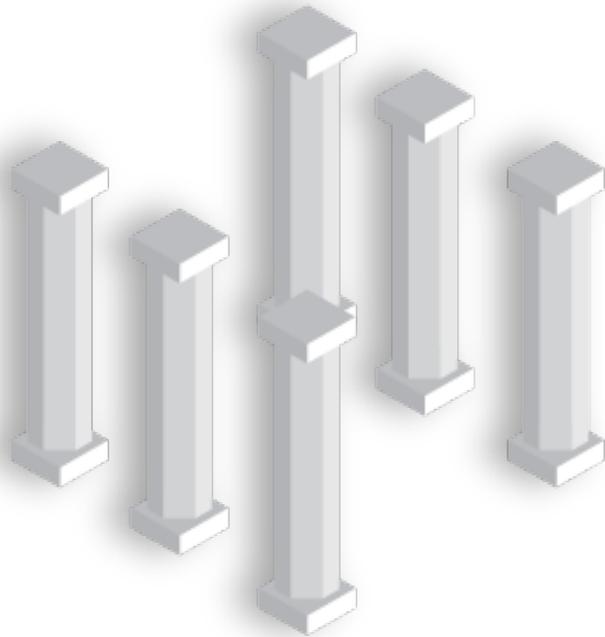


Governor's Office of Health Transformation

Source: Health Policy Institute of Ohio, *Ohio Public Health Basics* (2013) and CMS, *National Health Expenditure Data* (2009).

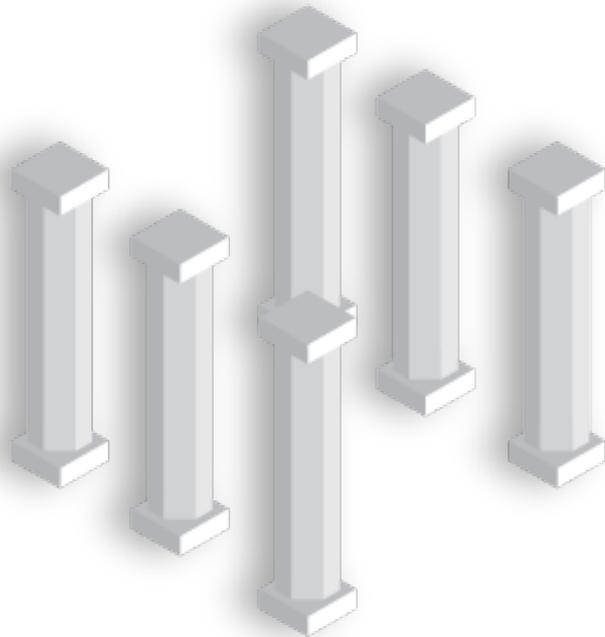


ODH Pillars of Public Health



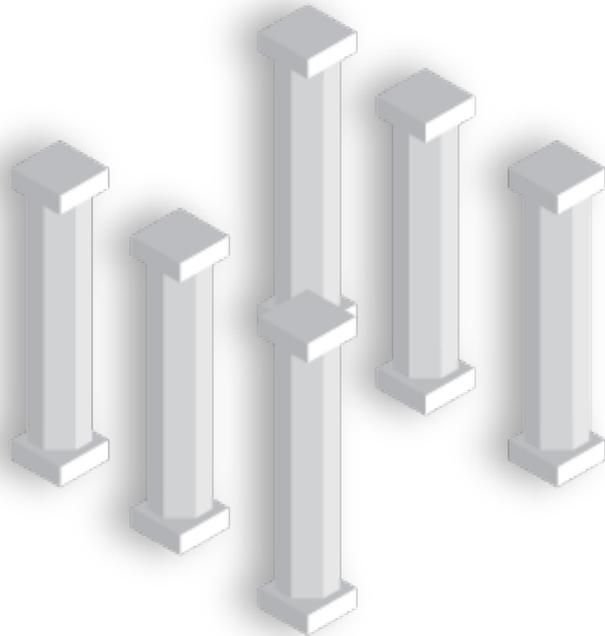
- Infectious Diseases
- Preparedness
- Health Improvement & Wellness
- Health Equity & Access
- Environmental Health
- Regulatory Compliance

ODH Pillars of Public Health



- Infectious Diseases
- Preparedness
- **Health Improvement & Wellness**
- **Health Equity & Access**
- Environmental Health
- Regulatory Compliance

ODH Pillars of Public Health



Health Improvement & Wellness

- OMAS has information about chronic conditions and health behaviors.

Health Equity & Access

- OMAS informs us about access beyond insurance coverage (regular doctor or nurse, unmet needs, etc.).

OMAS Alignment with ODH High Priorities

- Reducing infant mortality
- Curbing tobacco use



Better Planning for Better Health in Ohio: OMAS & State and Local Health Assessments

OMAS provides both state and county data

- Invaluable planning tool for both state and local health departments.
- Serves as a crosswalk for decisions related to local health policies and programs that involve local health departments, the Ohio Department of Medicaid and other health and human services agencies.

OHIO'S MEDICAID POPULATION

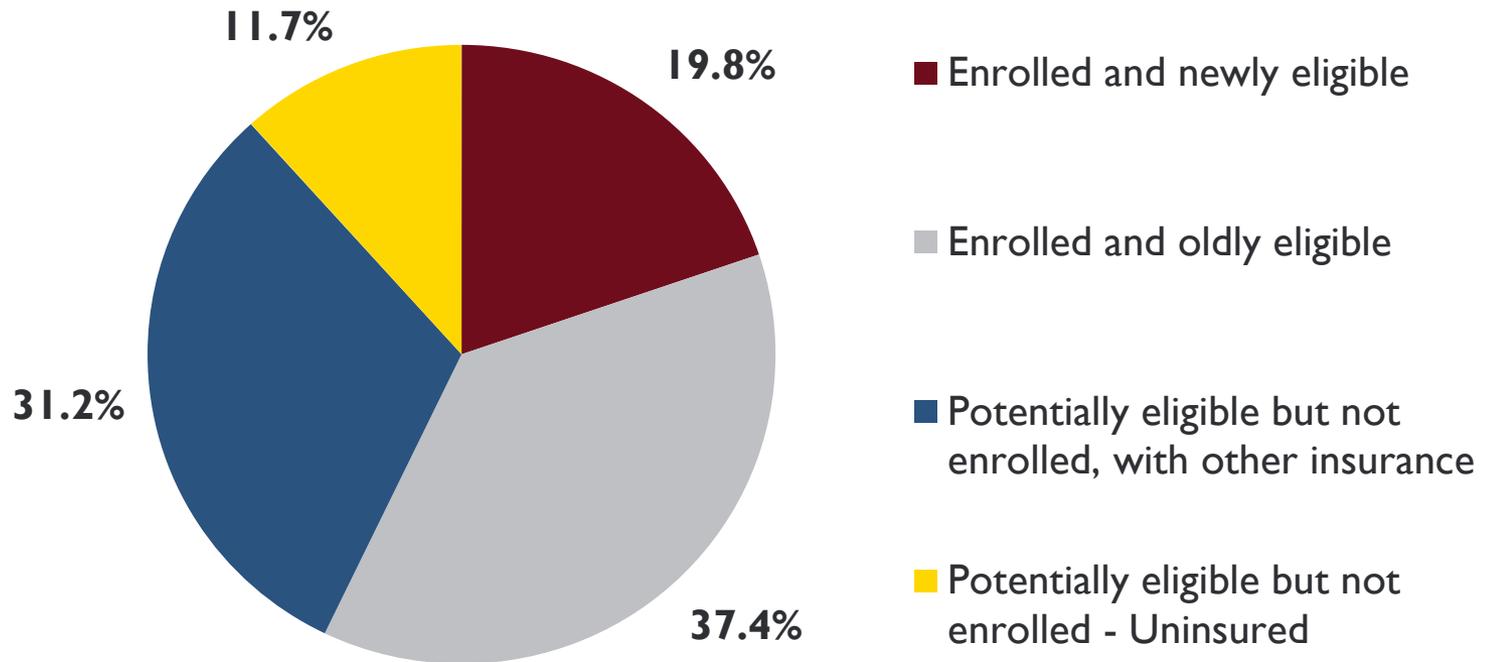
Ohio's Medicaid Population

- Administrative data show that the average enrollment for adults ages 19-64 years from January – June 2015 was:
 - Adults enrolled under Medicaid extension (newly eligible): 525,424
 - Enrolled adults who qualified under “old” pre-extension rules (oldly eligible): 970,219

Administrative data is enrollment as of the end of each month excluding retroactive and backdated enrollments.

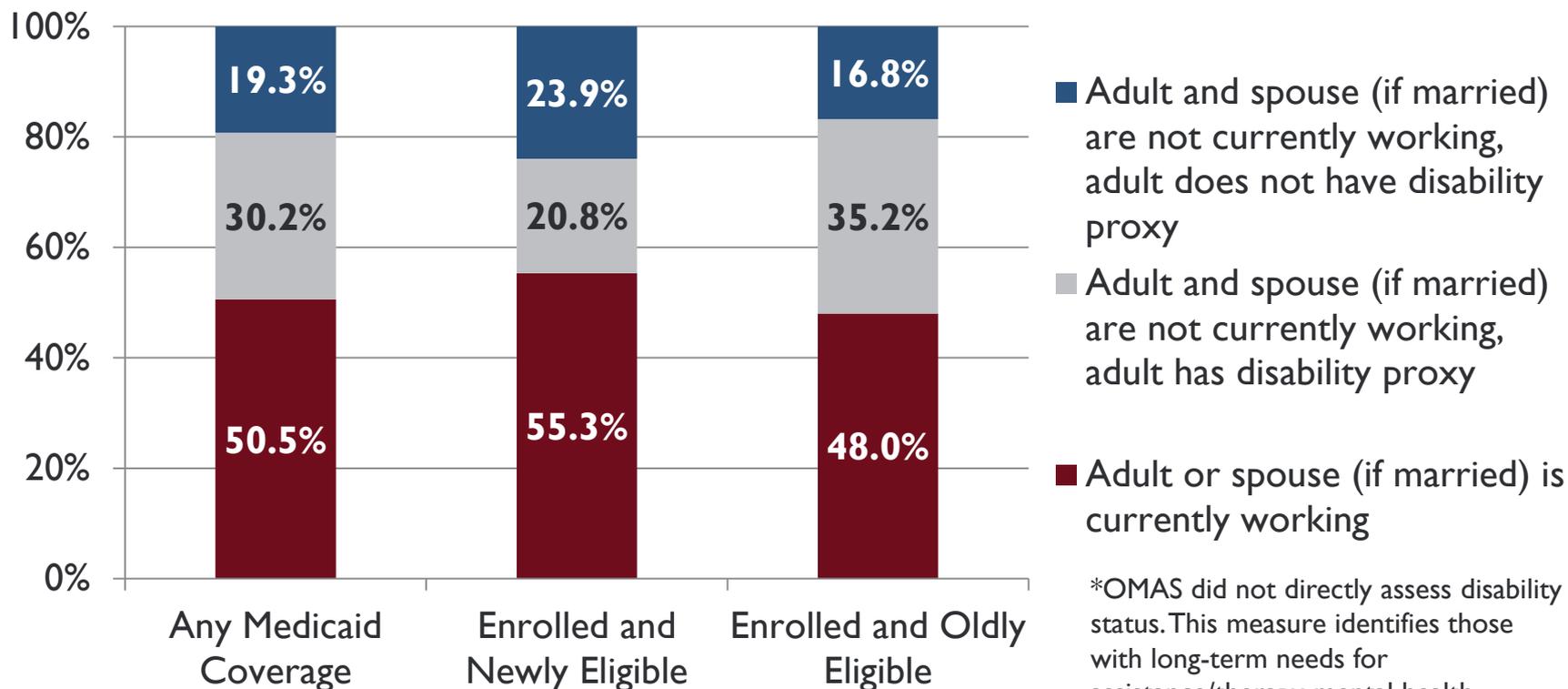
Potentially Medicaid Eligible Adults 19-64 years

Medicaid Enrolled and Potentially Eligible Population, 2015 OMAS



Most Medicaid-Enrolled Adults (19-64 years) are either Working or Disabled

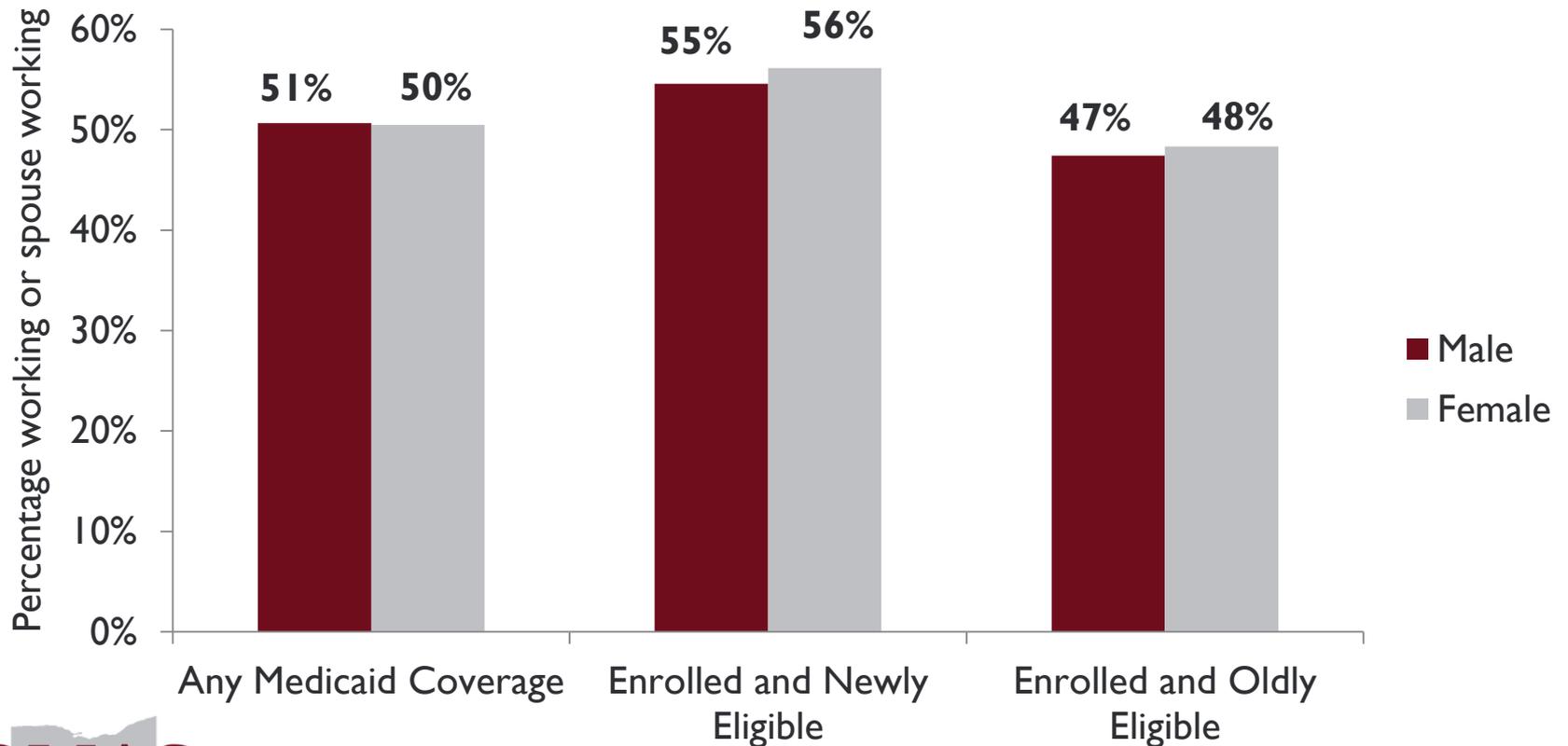
Working and Disability Proxy* Status among Medicaid Adults in 2015



*OMAS did not directly assess disability status. This measure identifies those with long-term needs for assistance/therapy, mental health impairment, and/or ABD coverage to approximate disability status.

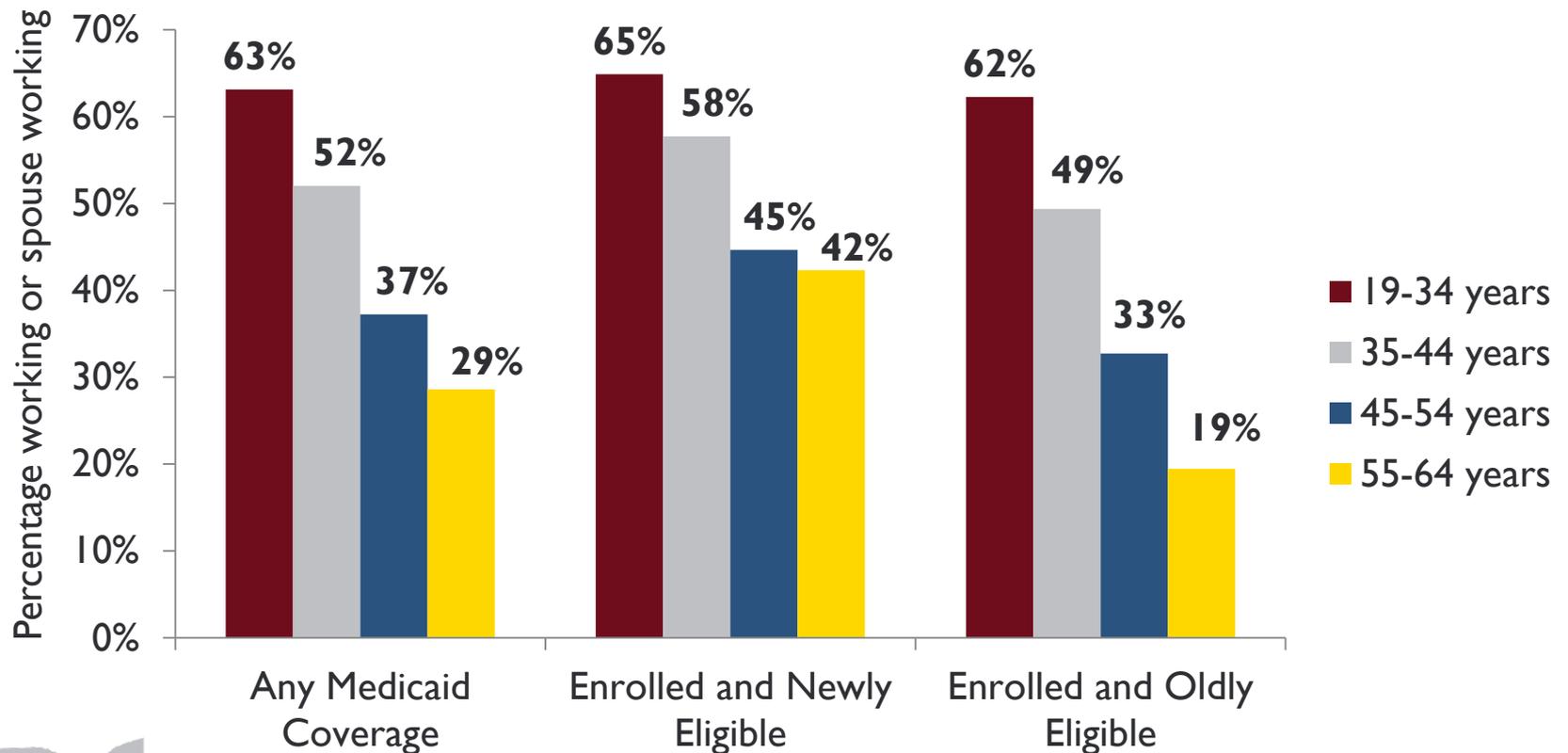
Medicaid Working Profile: Gender (Ages 19-64)

Adult or spouse (if married) is currently working



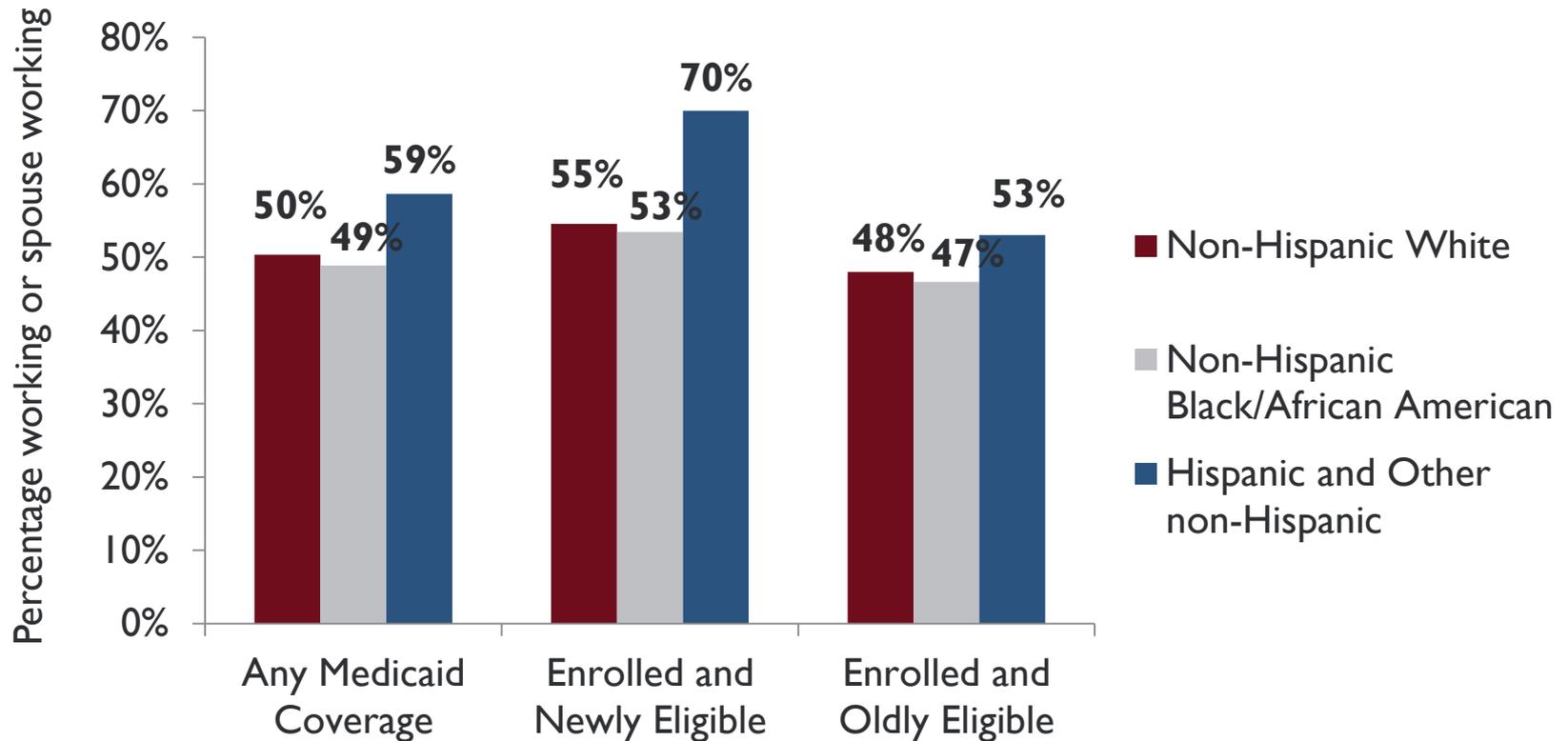
Medicaid Working Profile: Age (Ages 19-64)

Adult or spouse (if married) is currently working



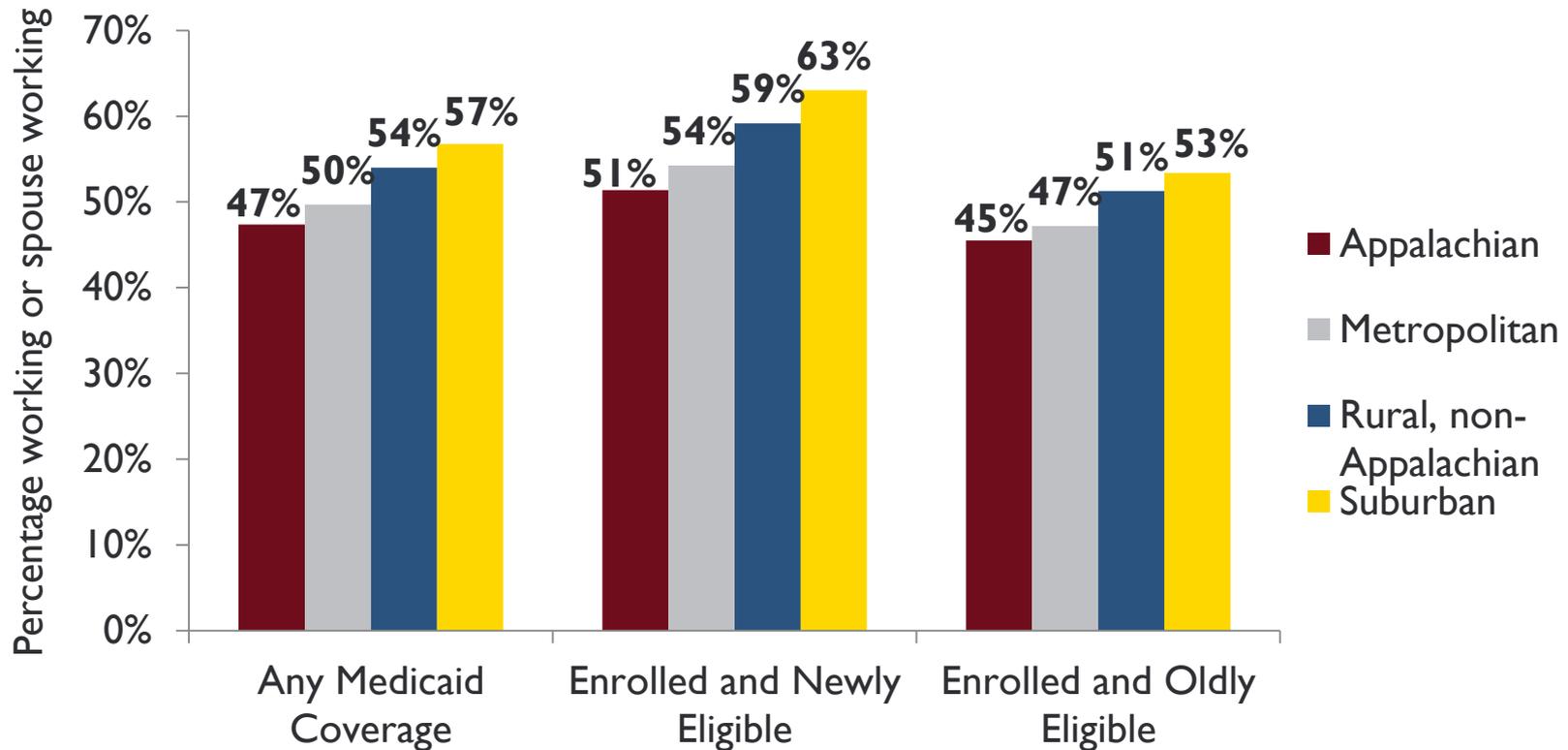
Medicaid Profile: Percentage Working Among Racial/Ethnic Groups (Ages 19-64)

Adult or spouse (if married) is currently working



Medicaid Working Profile: County Type

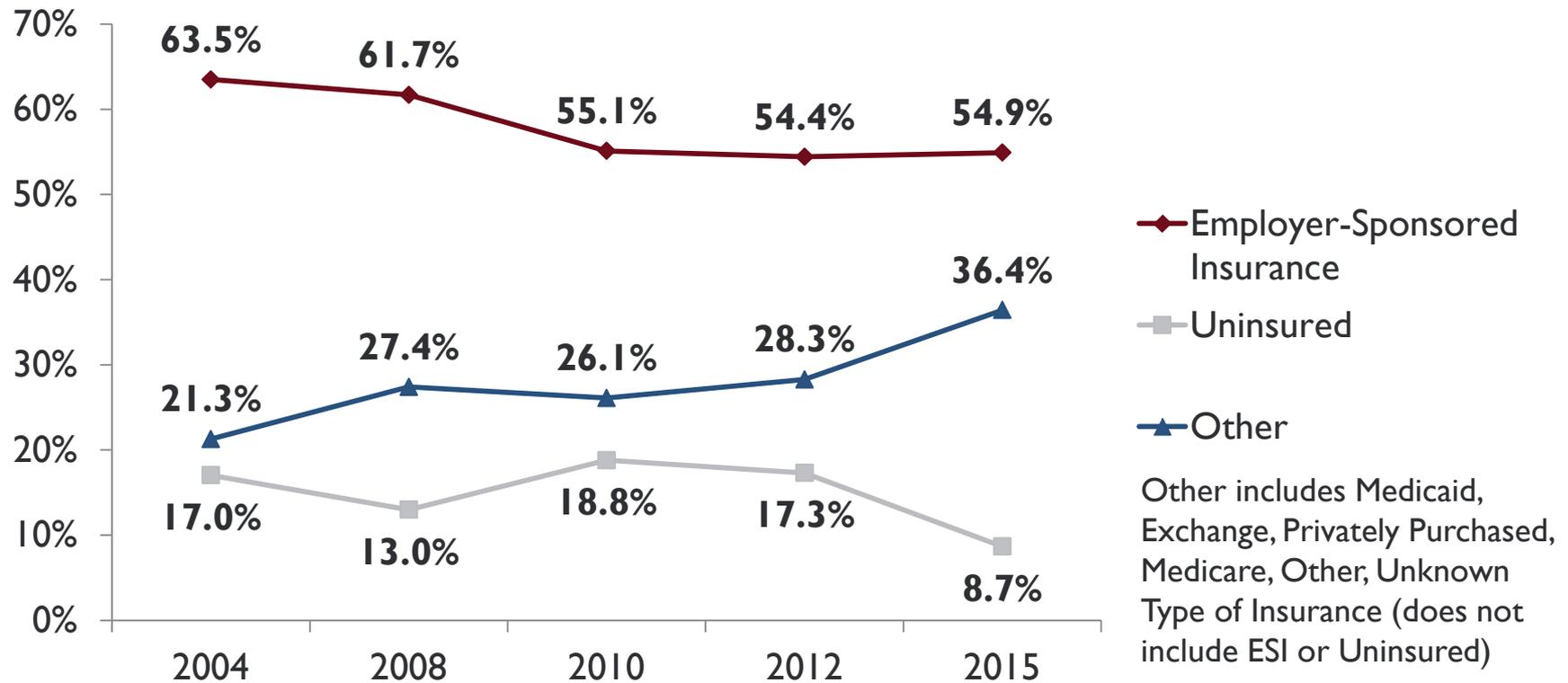
Adult or spouse (if married) is currently working



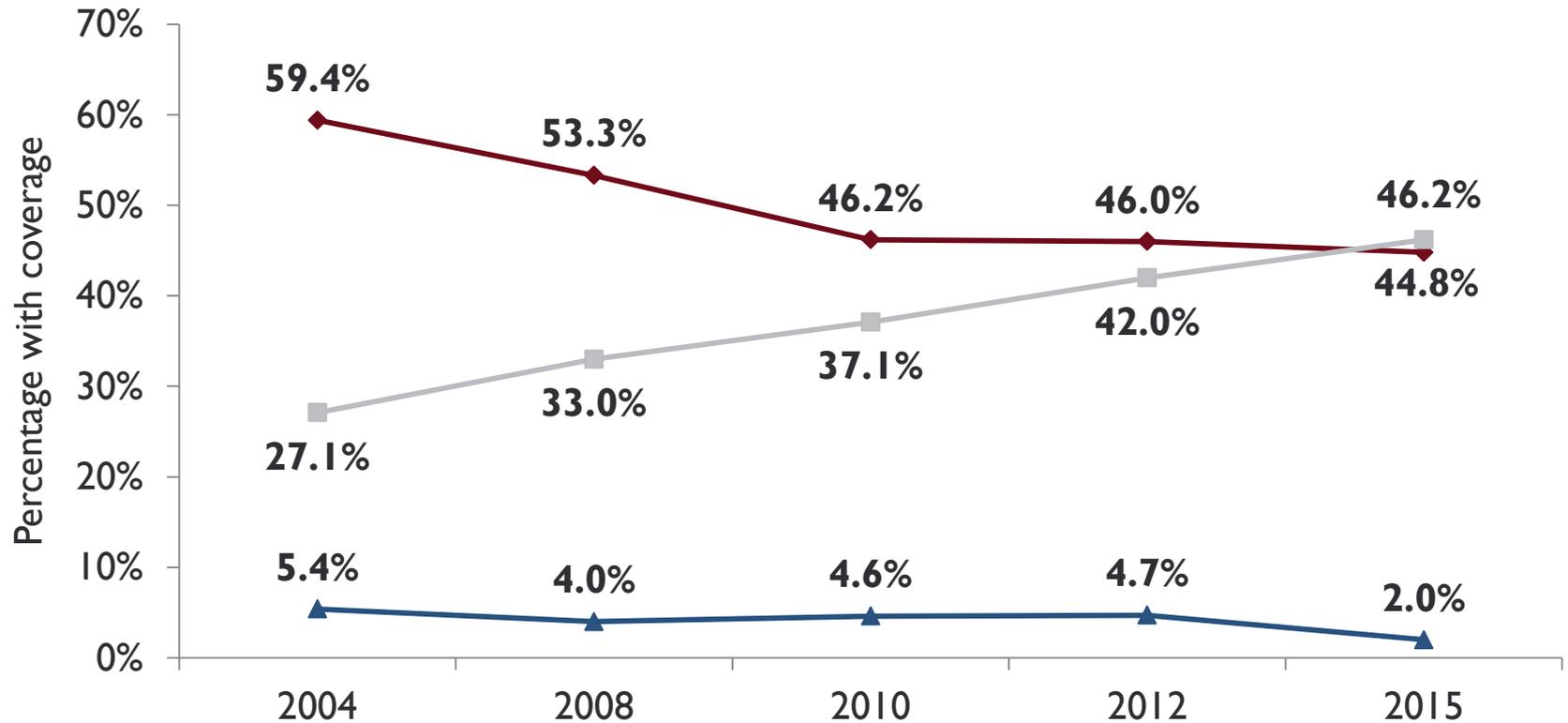
OHIO'S SIGNIFICANT SHIFTS IN HEALTHCARE COVERAGE

Uninsured Rate Cut in Half Employer Coverage Remains Unchanged

Insurance Trends among Adults 19-64 Years



Child Insurance (0-17 years*)



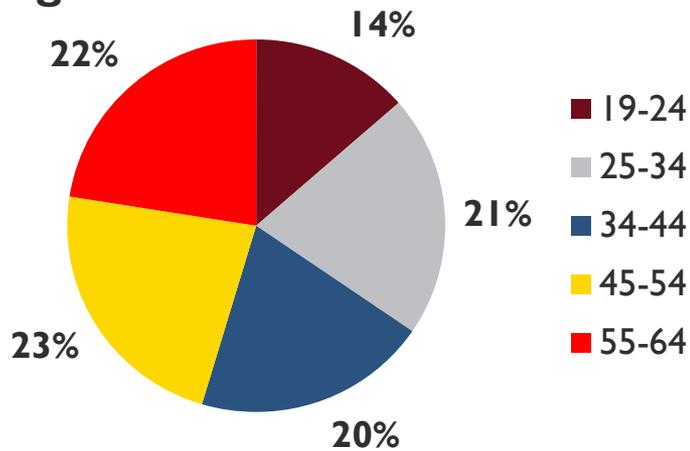
◆ Employer-Sponsored ■ Medicaid ▲ Uninsured

*18-year-olds were classified as adults through 2010, and were then classified as children. They therefore cannot be included in trend analysis.

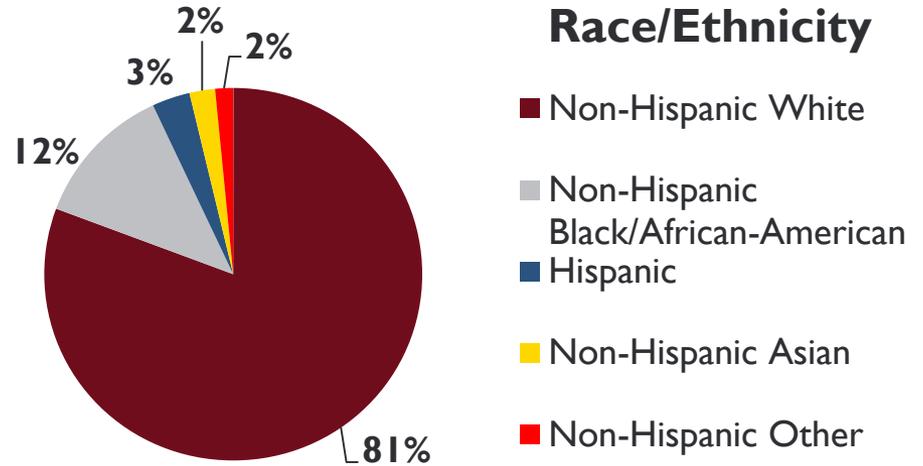
Does not display "Other" insurance types, including Exchange, Privately Purchased, Medicare, Other, and Unknown Type of Insurance

All Ohio Adult Demographics (19-64 Years)

Age



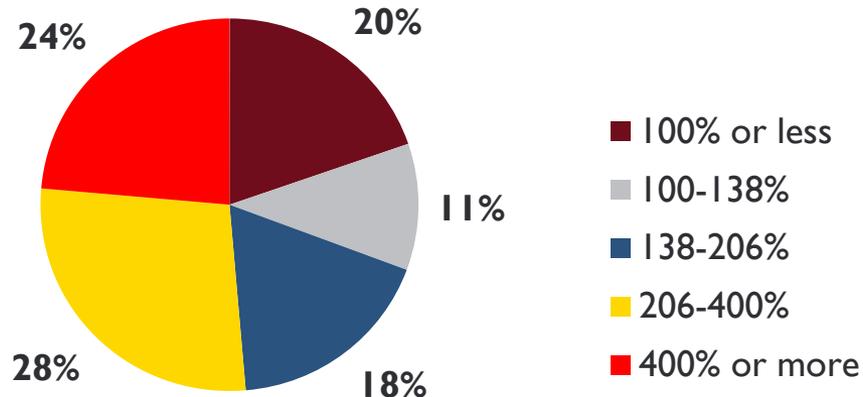
Race/Ethnicity



- Non-Hispanic White
- Non-Hispanic Black/African-American
- Hispanic
- Non-Hispanic Asian
- Non-Hispanic Other

70% of adults had a full- or part-time job

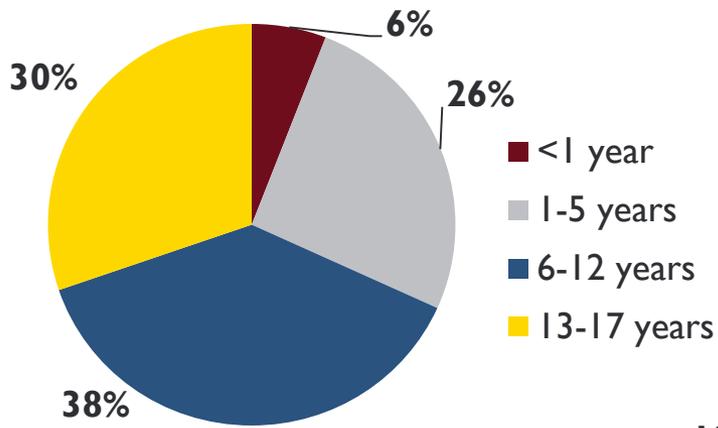
Poverty (% Federal Poverty Level)



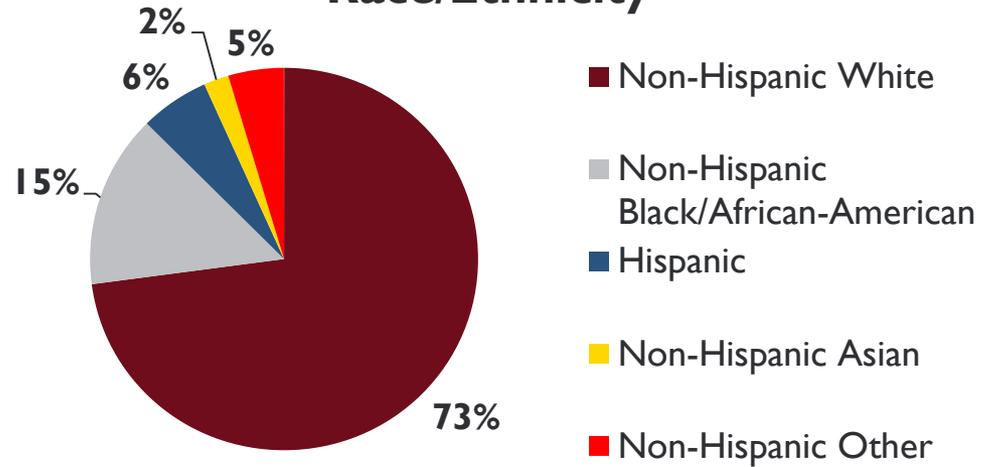
Based on last month's income

All Ohio Children Demographics (0-17 Years)

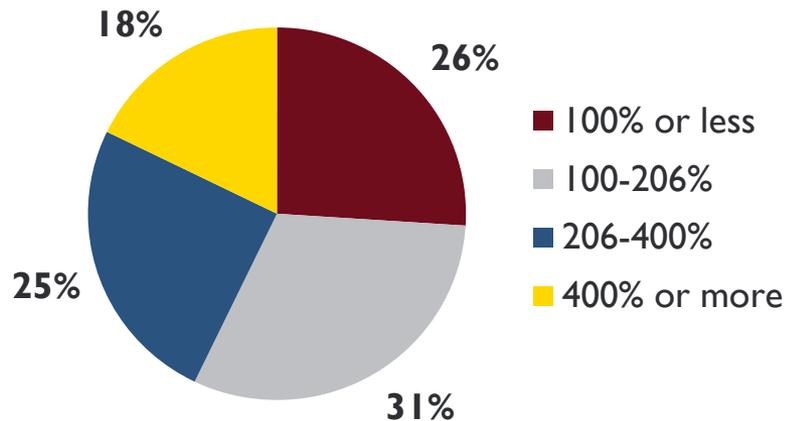
Age



Race/Ethnicity



Poverty (% Federal Poverty Level)

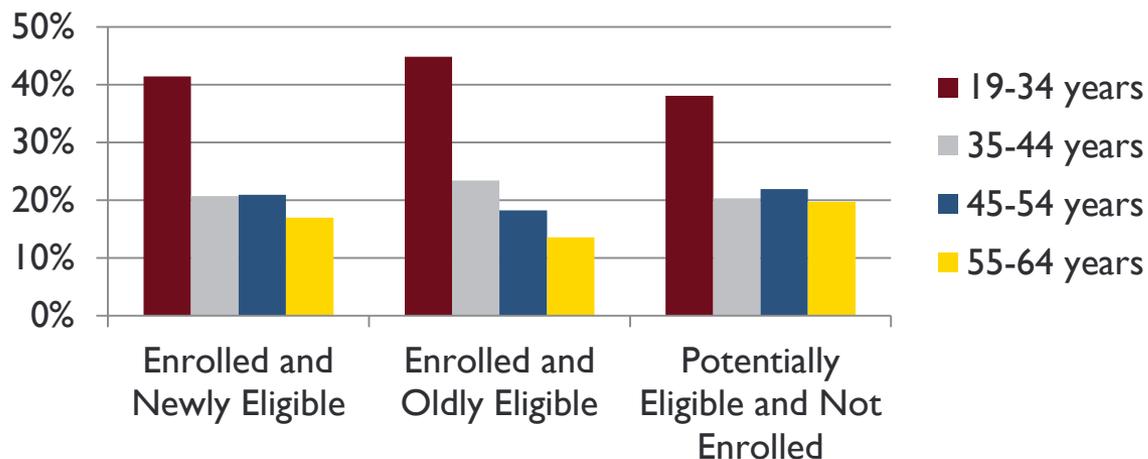


Based on
last month's
income

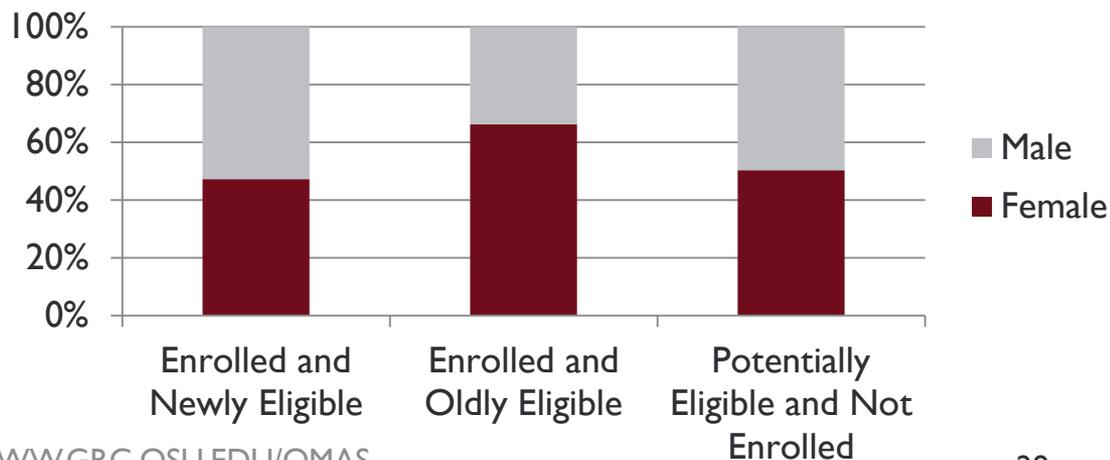
MEDICAID PROFILE: EXTENSION AND ADULTS ELIGIBLE UNDER OLD RULES

Medicaid Demographics among Adults 19-64 Years in 2015

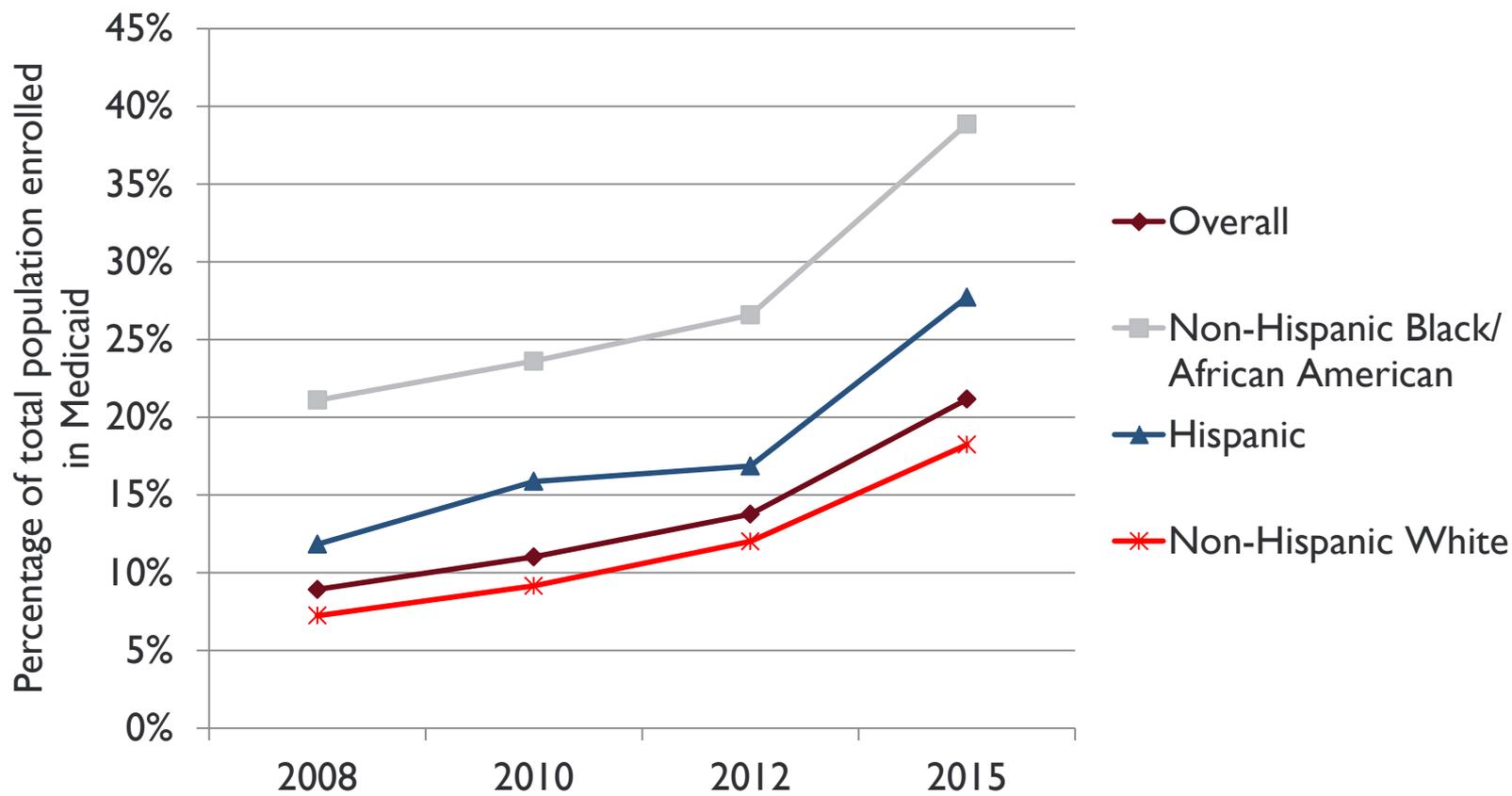
Age Distribution



Gender



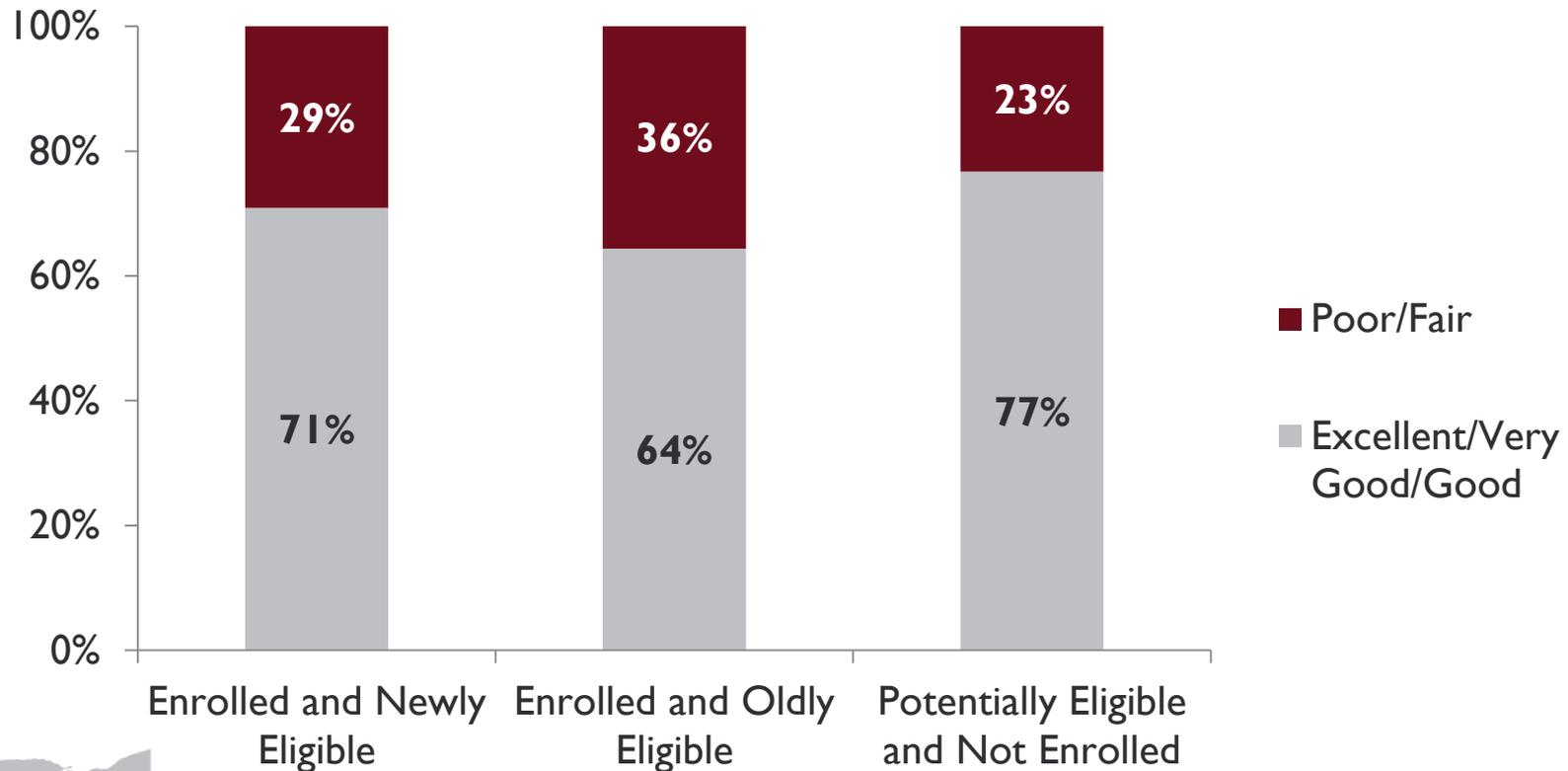
Medicaid Enrollment Trends Stratified by Race/Ethnicity, Adults 19-64 years



Other race (non-Hispanic) not shown

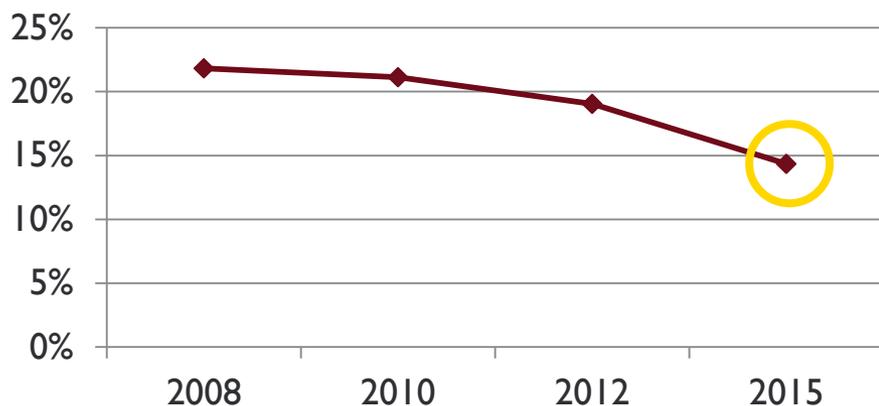
Medicaid Profile: Health Status in 2015 (Adults 19-64 years)

Self-Rated Health Status

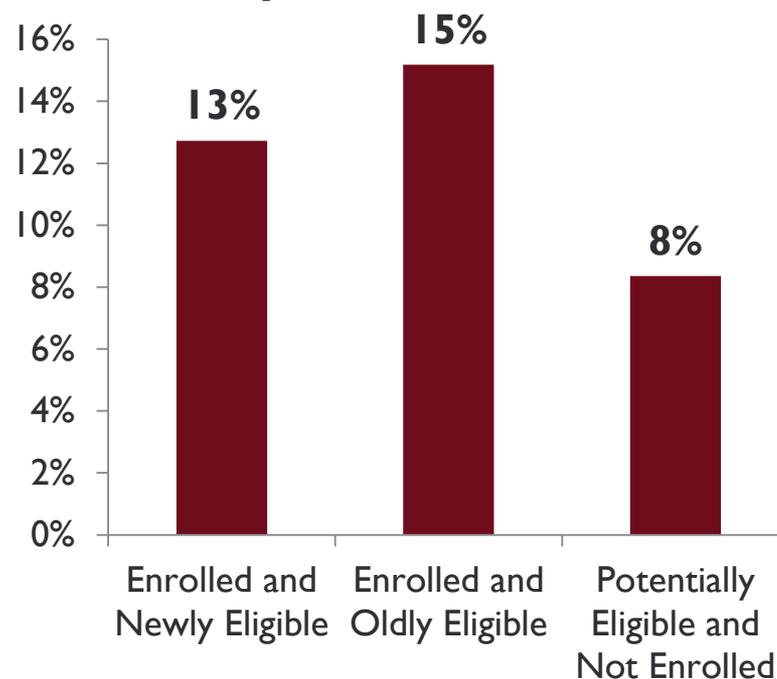


Medicaid Profile: Frequent Mental Distress among Adults (19-64 years)

14+ Mentally Distress Days, Medicaid Adults 19-64 Years



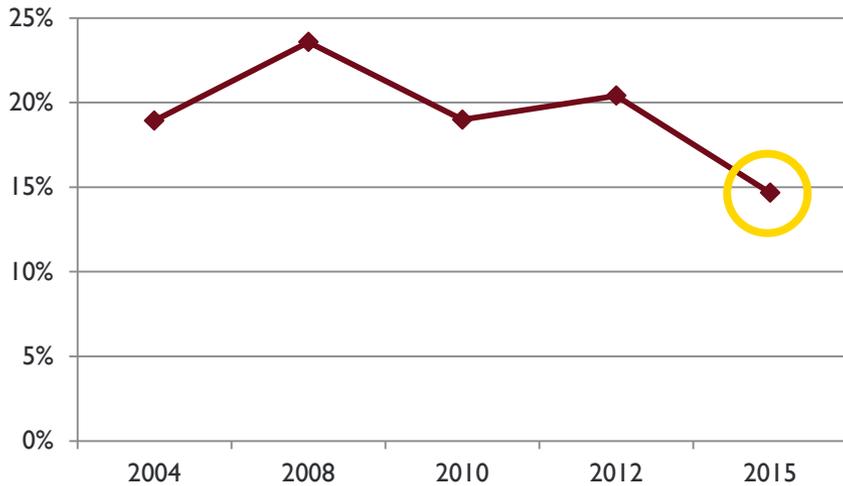
14+ Mentally Distressed Days, Medicaid Adults 19-64 years in 2015



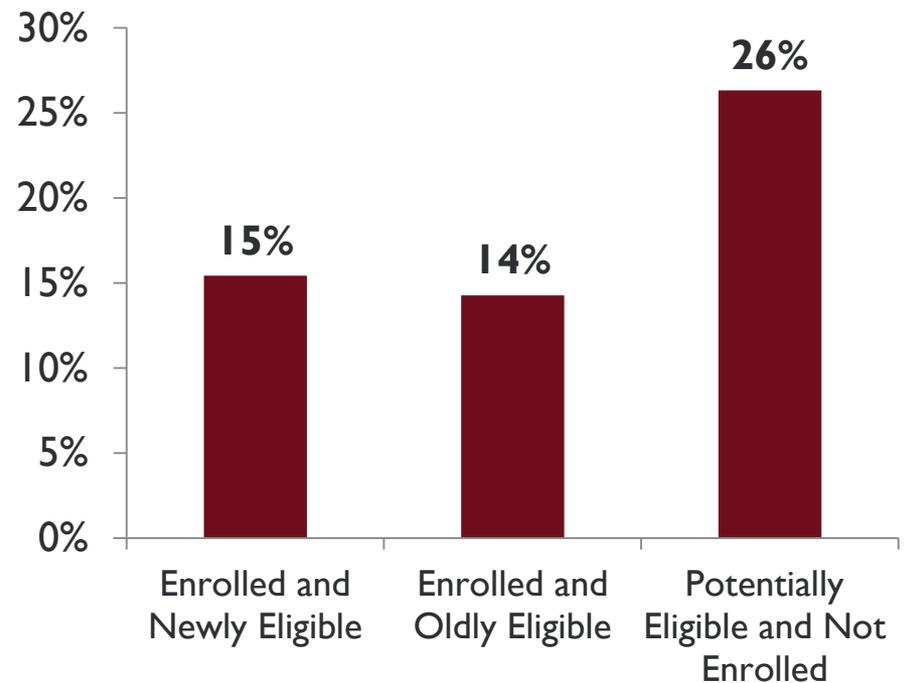
Frequent mental distress (FMD) is defined as having 14-30 mentally unhealthy days in the past 30 days
 (U. S. Department of Health Human Services, 2013)

Medicaid Profile: Harder to Secure Care Compared to 3 Years Ago among Adults

Trends among Medicaid Adults 19-64 Years

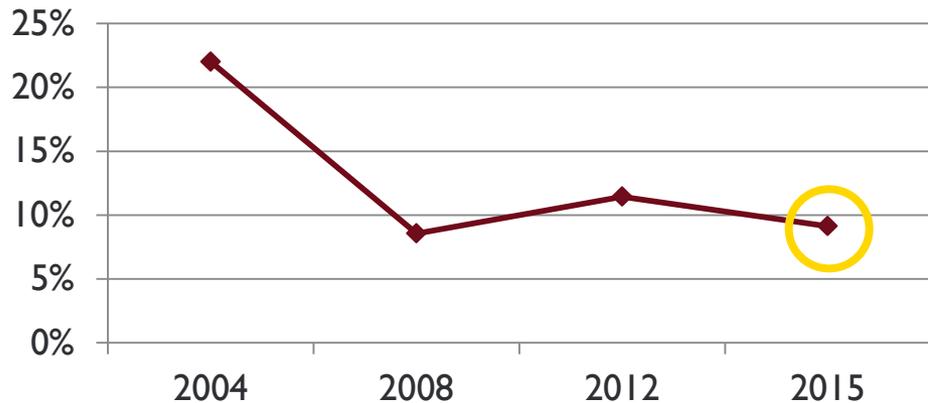


Medicaid Adults 19-64 Years in 2015

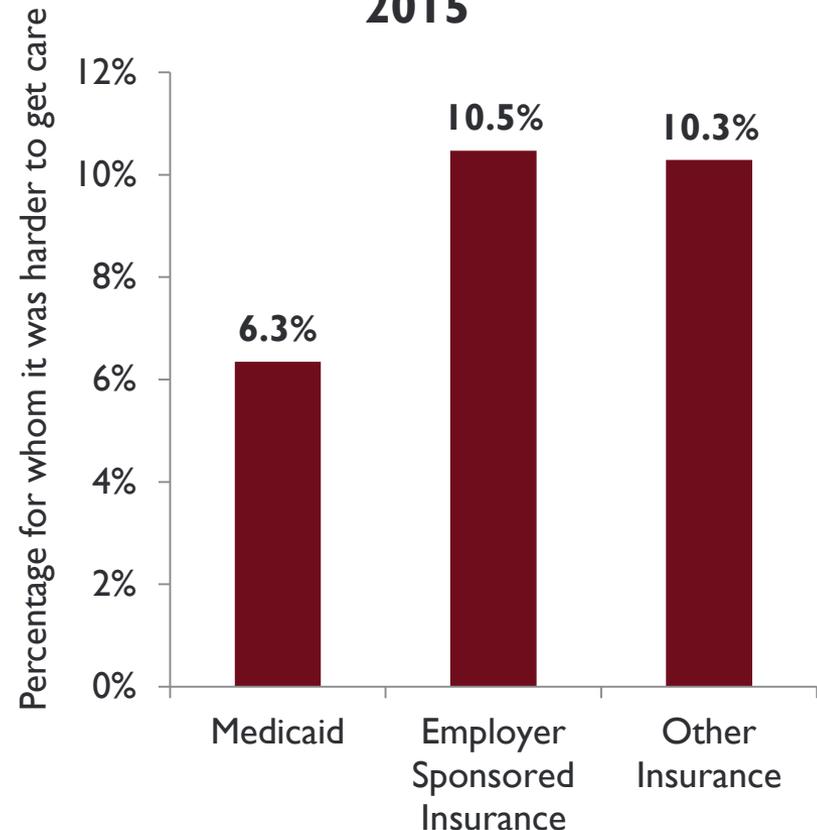


Harder to Secure Care Compared to 3 Years Ago among Children

Trends Among All Children 3-17 Years

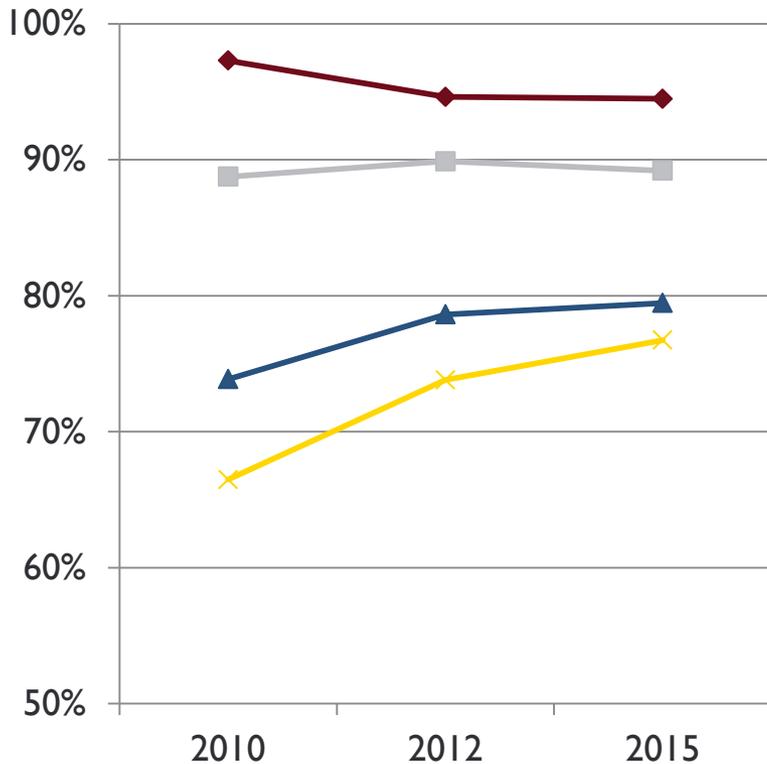


All Children 3-17 Years in 2015

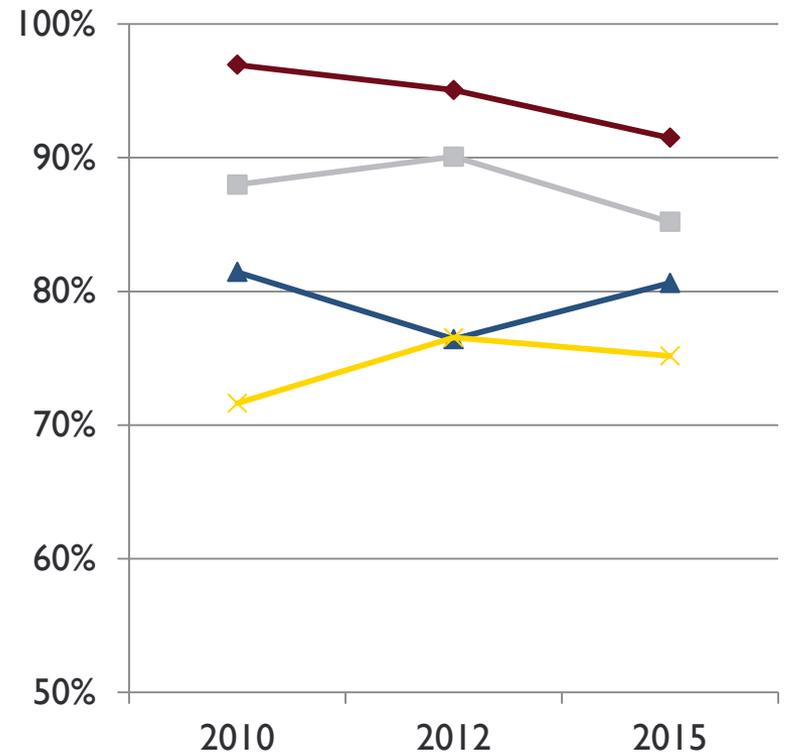


Routine Medical Visit in Past 12 Months among Children 0-17

Trends Among all Children 0-17 Years



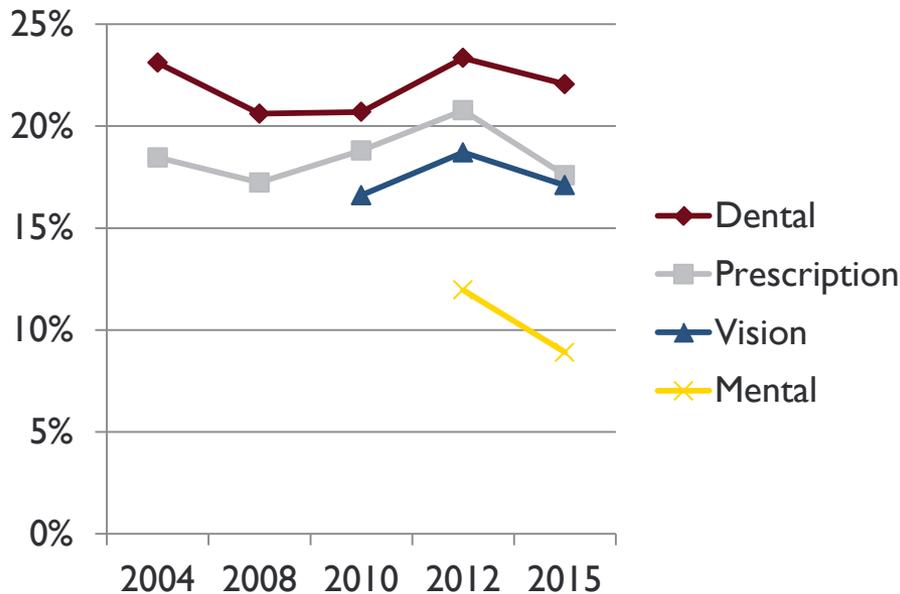
Trends Among All Medicaid Children 0-17 Years



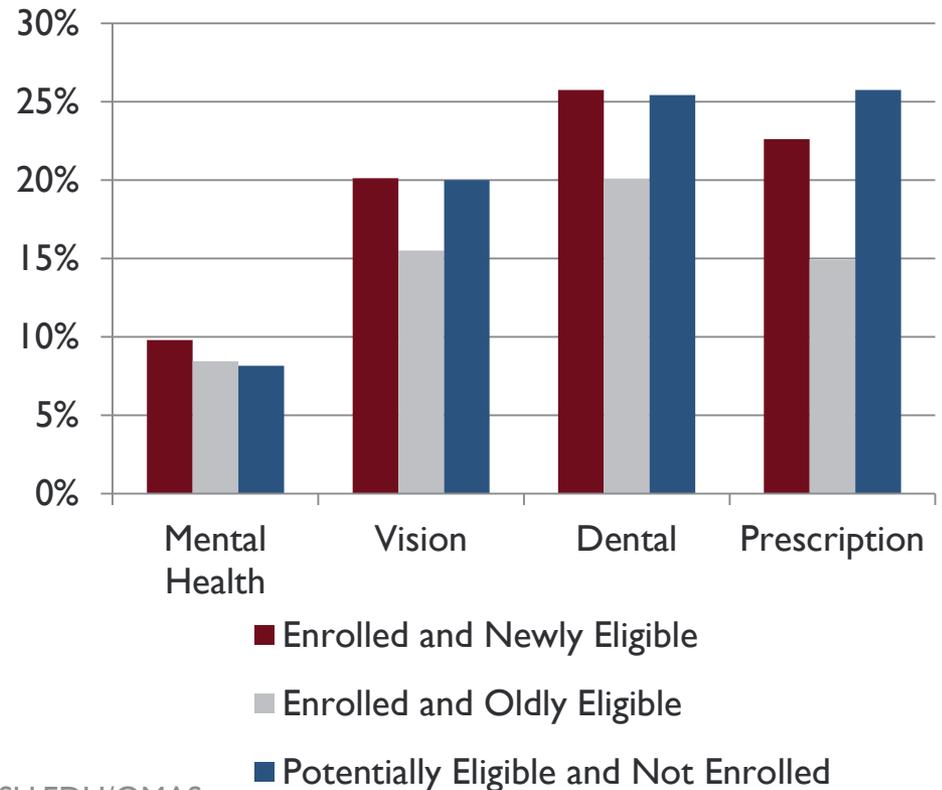
◆ < 1 year
 ■ 1-5 years
 ▲ 6-12 years
 × 13-17 years

Medicaid Profile: Unmet Healthcare Needs in Past 12 Months among Adults (19-64 years)

Trends among Medicaid Adults 19-64 Years



Unmet Needs among Medicaid Adults 19-64 Years in 2015



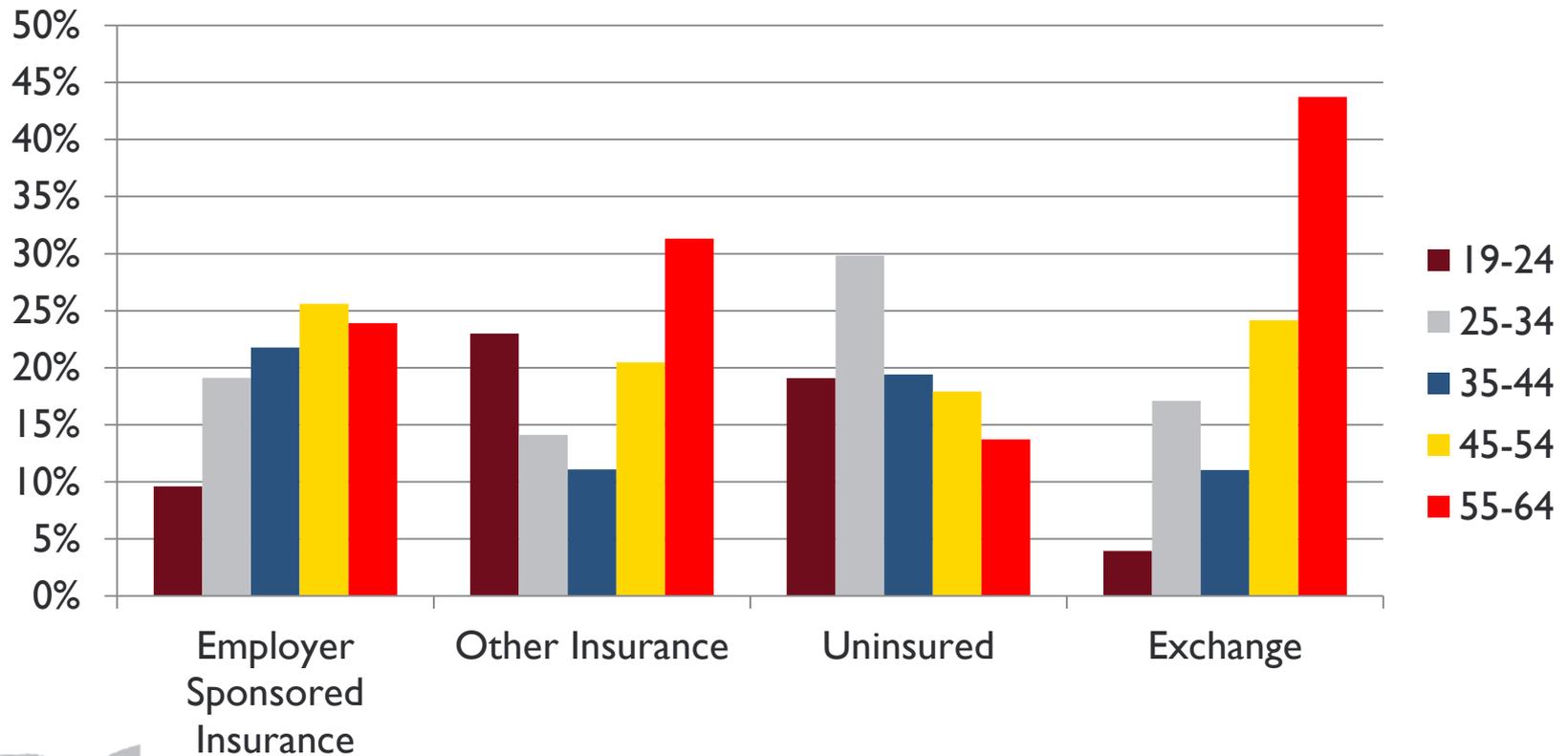
Key Findings and Implications

- Medicaid extension may have had a greater impact on minority populations
- It is becoming easier for adults and children to secure care
- Adults who are potentially eligible but not enrolled are relatively healthy
- Most Medicaid participants are either from working families or are disabled

THE UNINSURED AND THOSE WITH OTHER COVERAGE

Other Healthcare Coverage and Uninsured: Age Distribution

Adults 19-64 Years

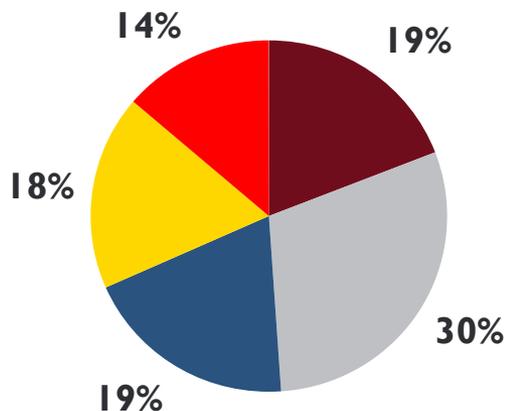


Uninsured Adults in 2015 (19-64 years)

Who is left?

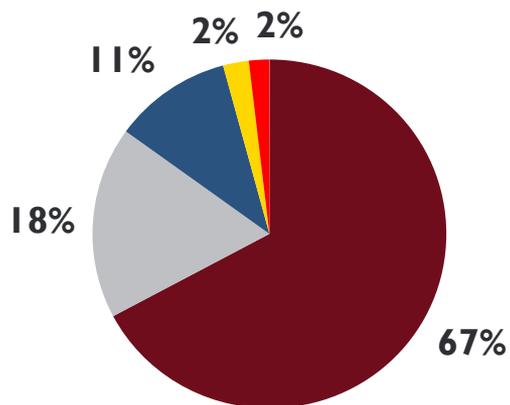
Age

- 19-24
- 25-34
- 34-44
- 45-54
- 55-64

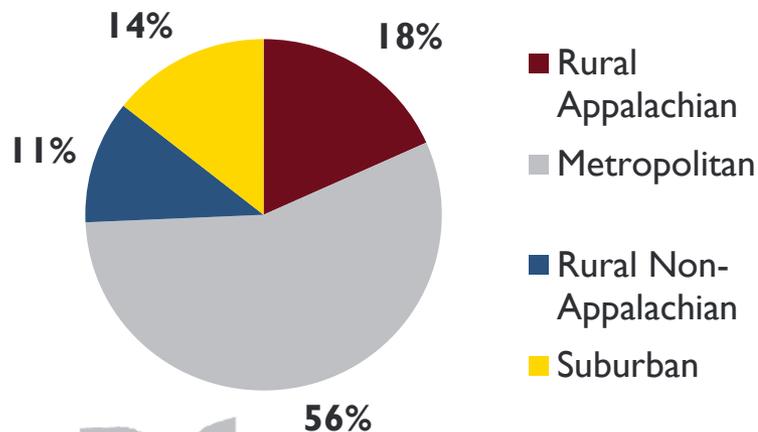


Race/Ethnicity

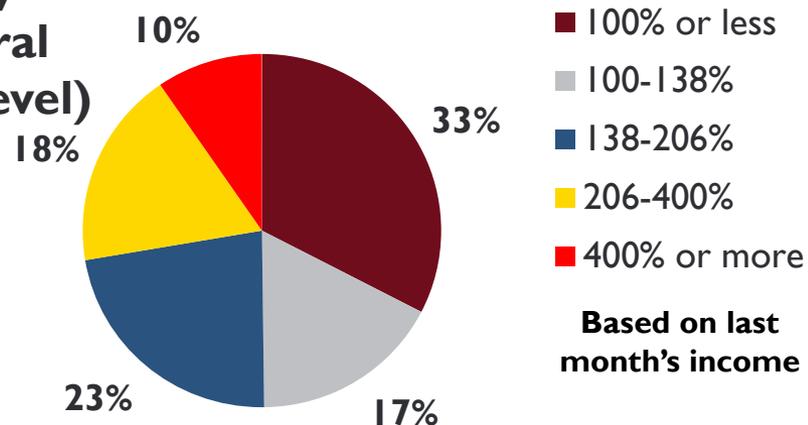
- Non-Hispanic White
- Non-Hispanic Black/African-American
- Hispanic
- Non-Hispanic Asian
- Non-Hispanic Other



Region



Poverty (% Federal Poverty Level)

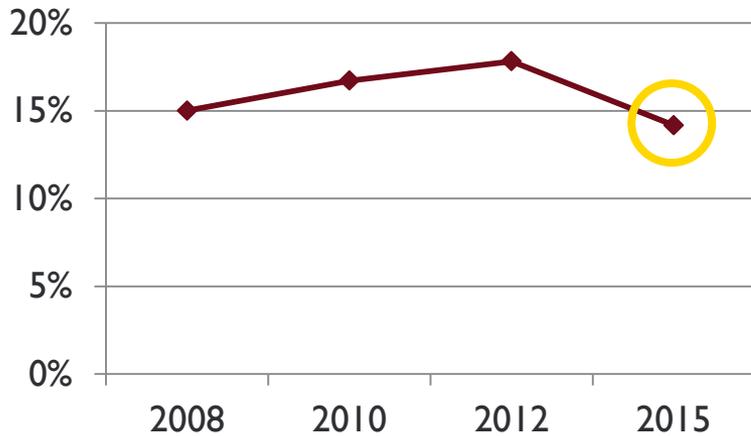


Based on last month's income

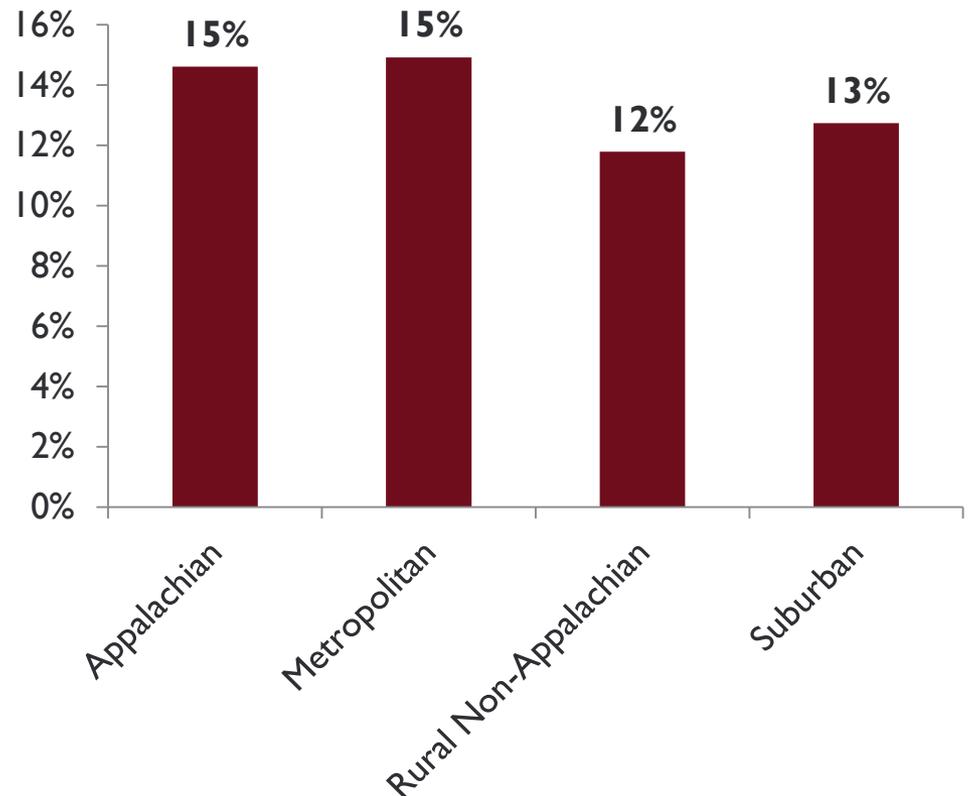
HEALTH PROFILE OF KEY POPULATIONS

Unmet Need for Dental Care

Trend among All Adults 19-64 Years

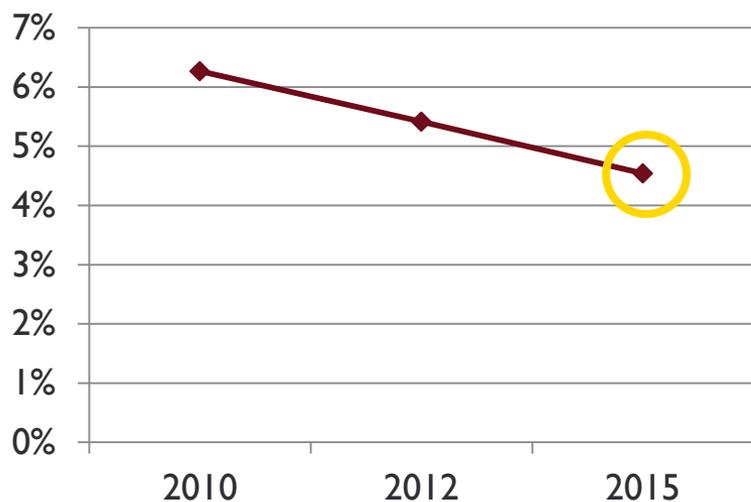


Adults 19-64 Years in 2015, Stratified by County Type

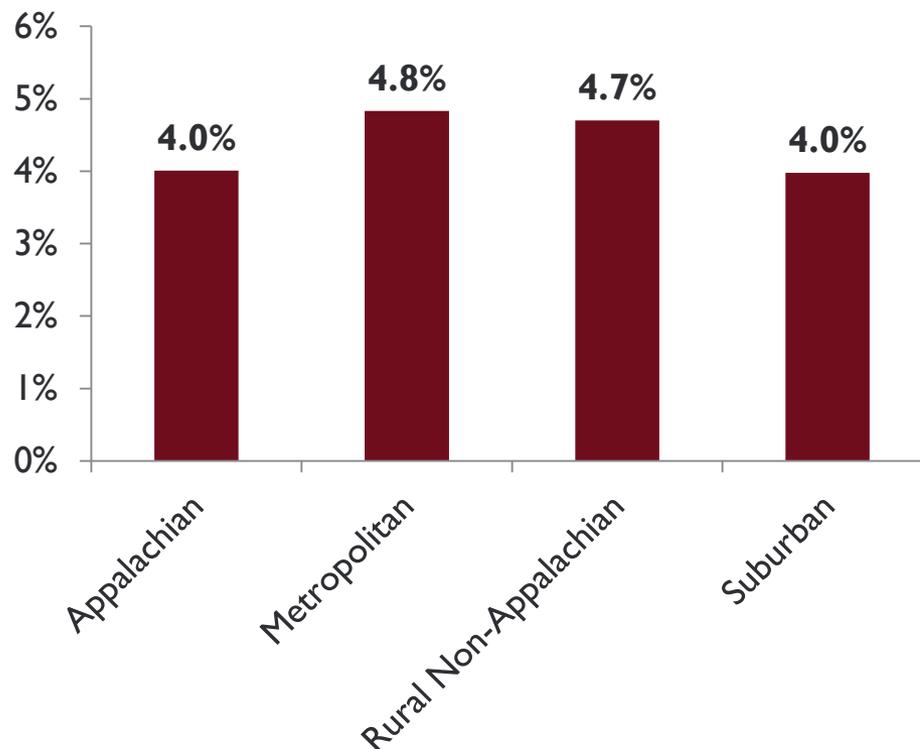


Trend in Unmet Need for Dental Care by County Type for Children 3-17

Trend Among All Children 3-17

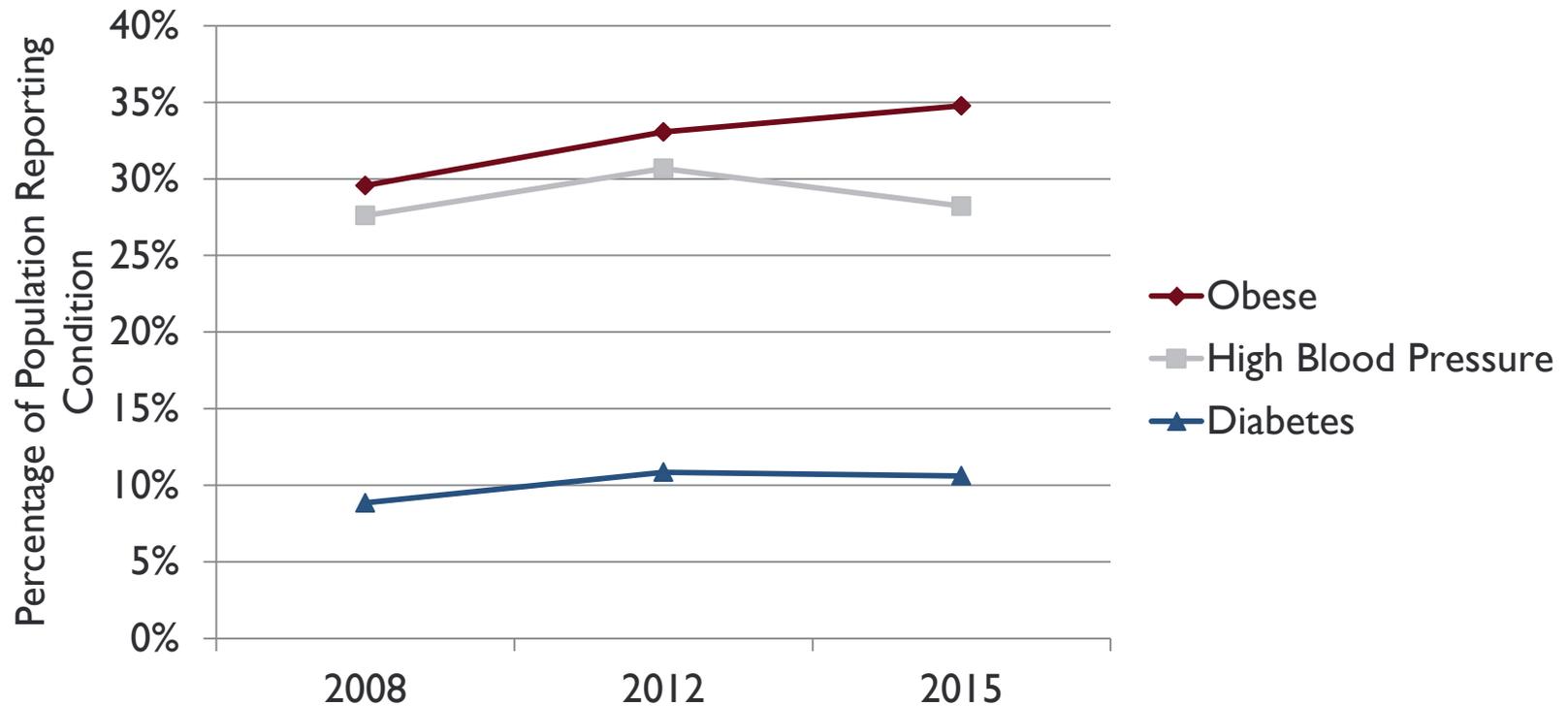


Children 3-17 years in 2015, Stratified by County Type



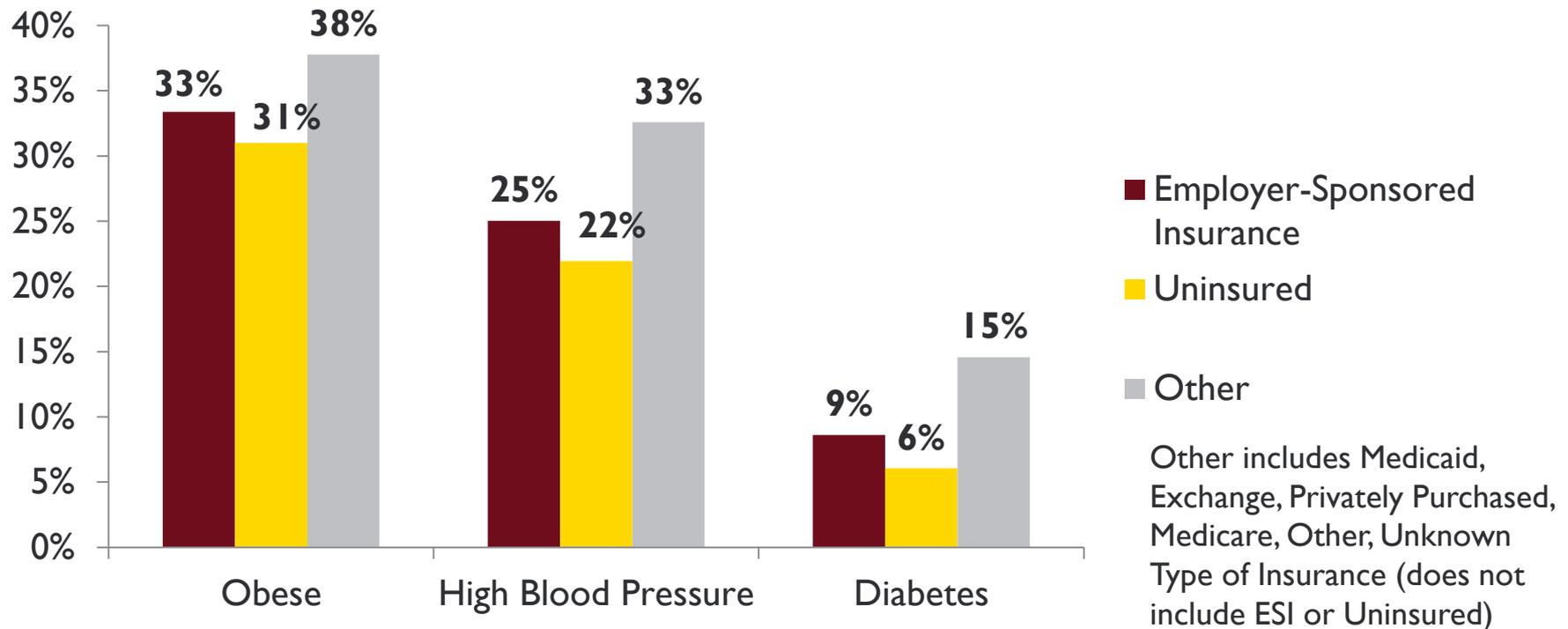
Trends in Chronic Conditions

All Adults 19-64 Years



Chronic Conditions among Adults 19-64 years

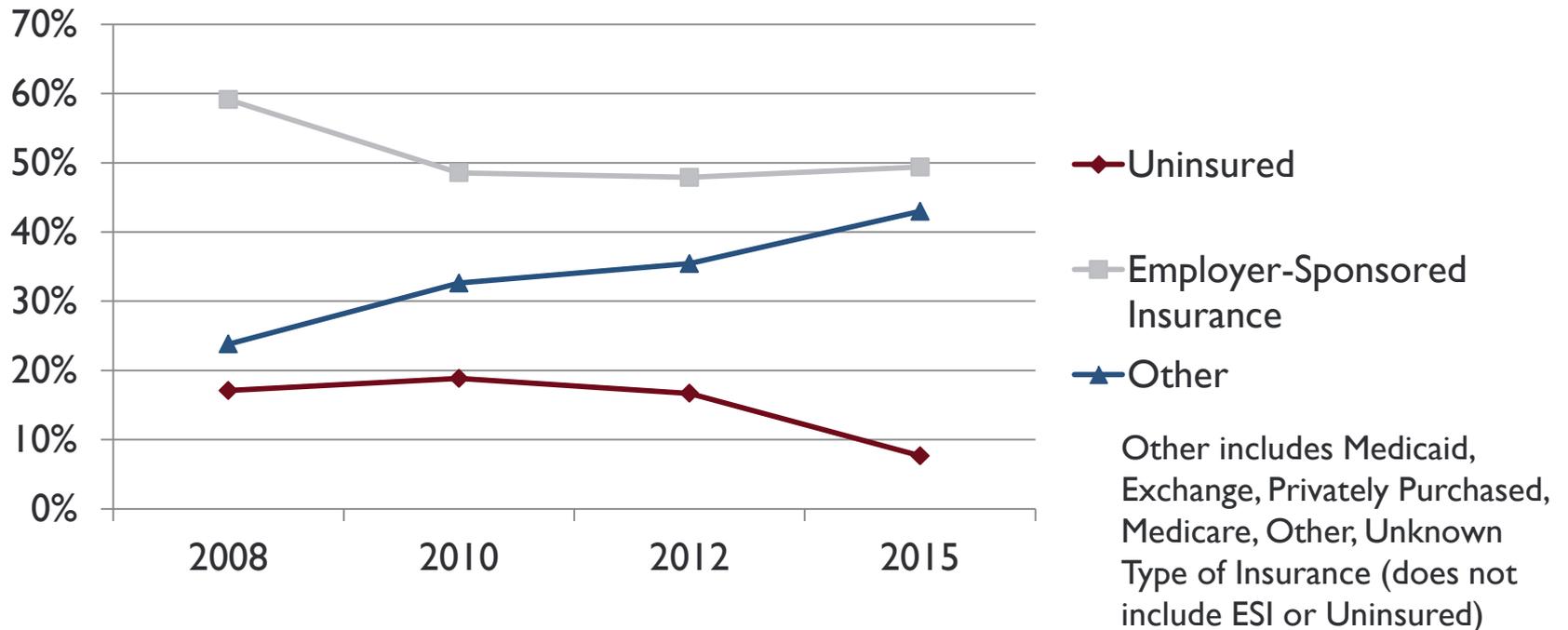
Chronic Health Conditions by Insurance Type 2015, Adults 19-64



WOMEN OF REPRODUCTIVE AGE (19-44 YEARS)

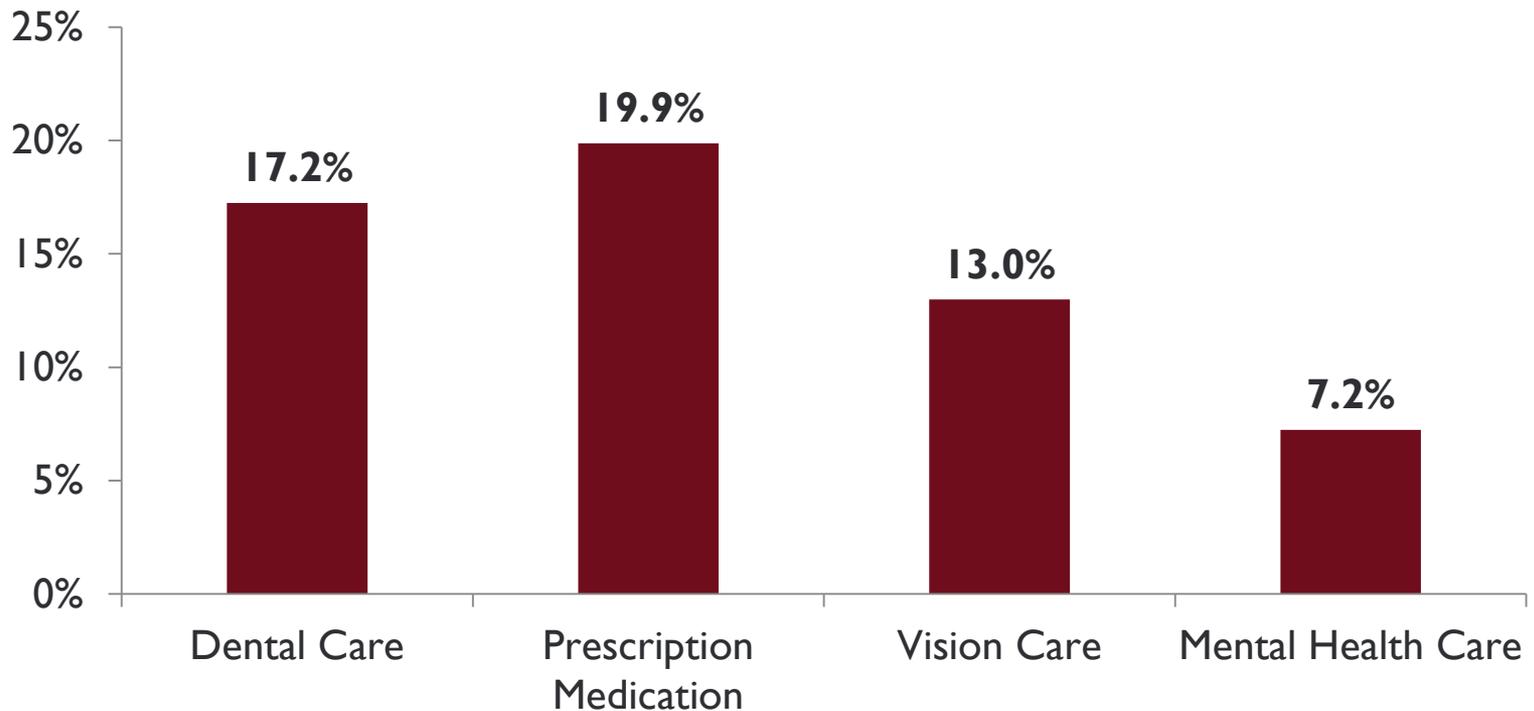
Trends in Insurance Coverage

Women 19-44 Years



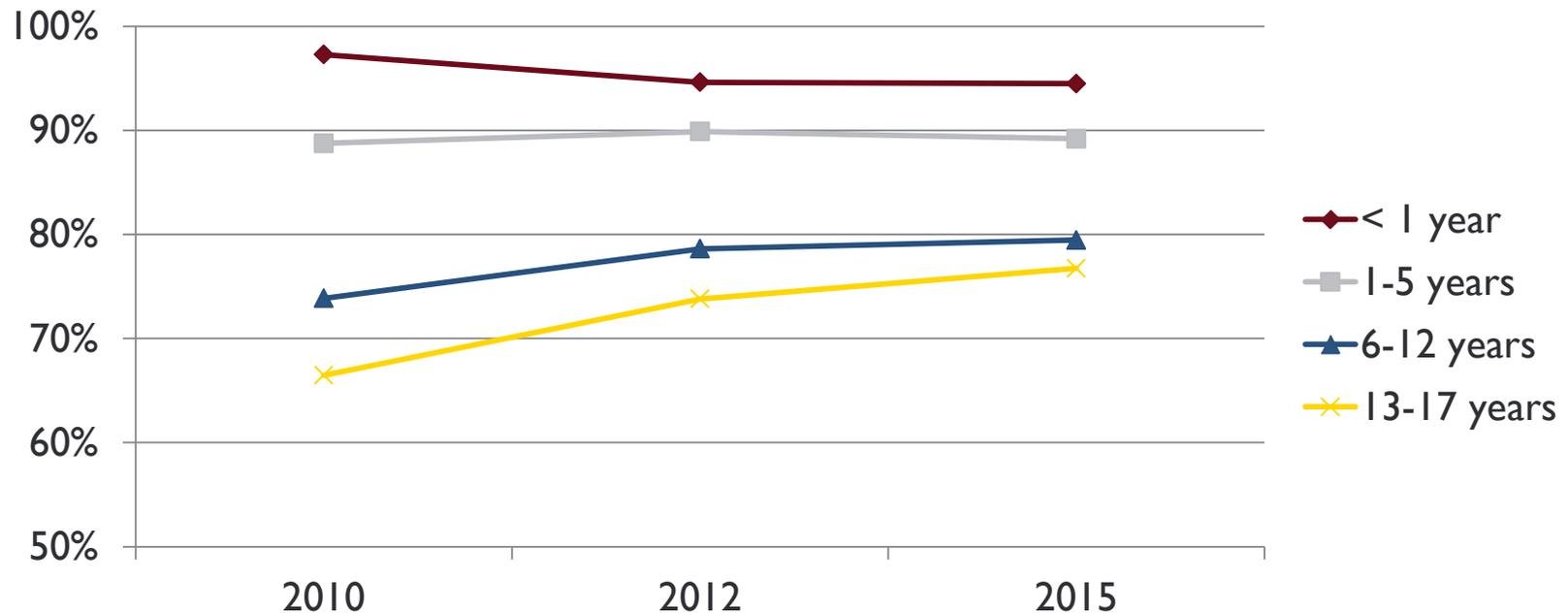
Percentage with an Unmet Need for Care in 2015

Women 19-44 years



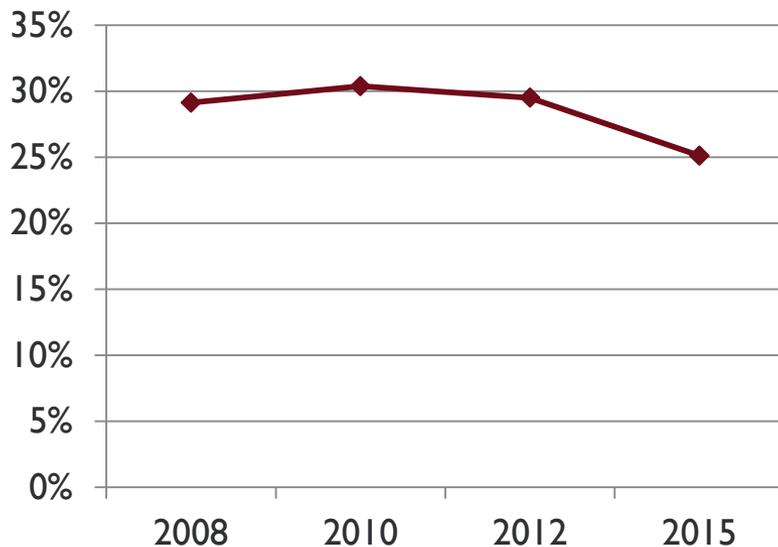
Routine Medical Visit in Past 12 Months

Trend among all Children 0-17 Years

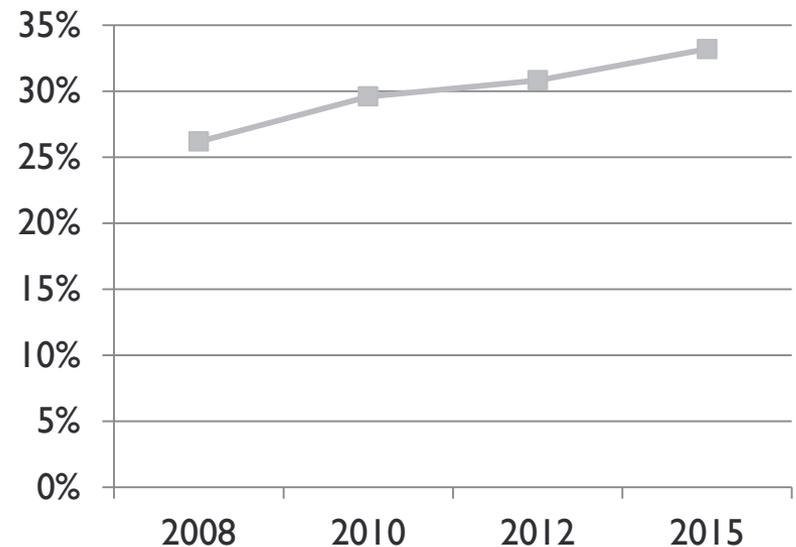


Prevalence of Smoking and Obesity over Time

Percentage of Women 19-44 Years who Currently Smoke



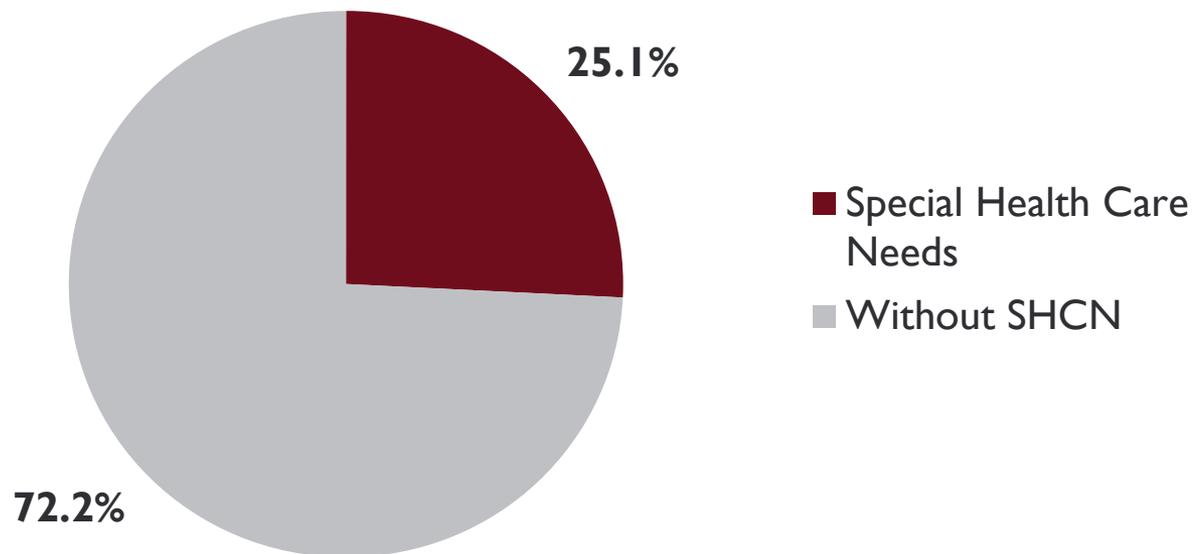
Percentage of Women 19-44 Years who are Obese



CHILDREN WITH SPECIAL HEALTHCARE NEEDS

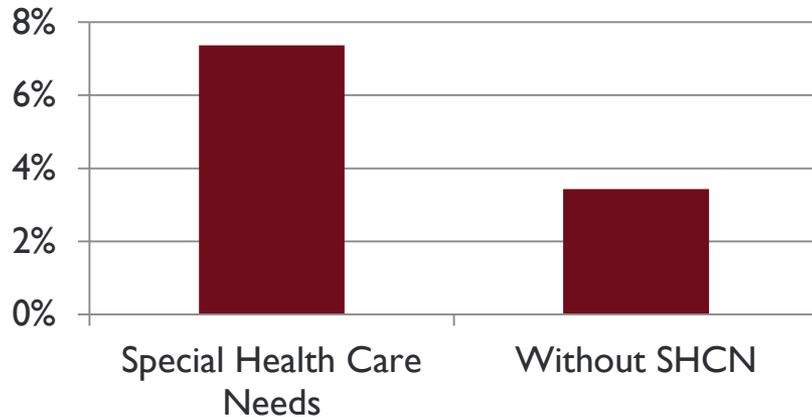
Children with Special Healthcare Needs (SHCN)

Distribution of Children with Special Health Care Needs, 0-17 Years in 2015

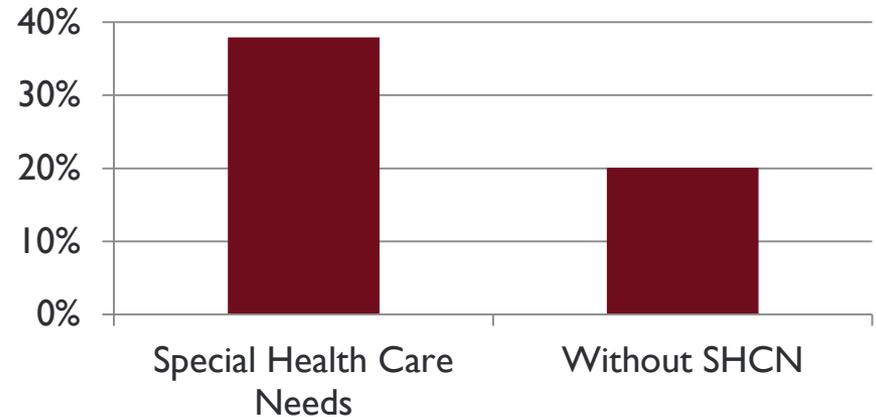


Profile of CSHCN in 2015

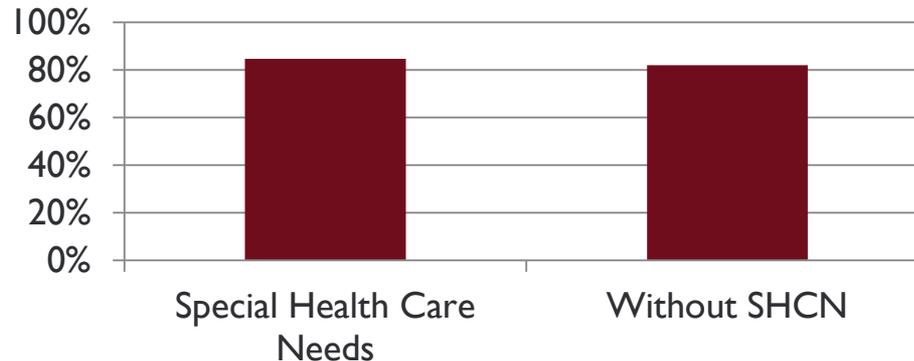
Unmet Dental Health Care Need, Children 3-17 Years



One or more ER Visit in Past Year, Children 0-17 Years



Routine Medical Visit Past Year, Children 0-17 Years



AN INTERACTIVE TOOL FOR EXPLORING THE DATA

OMAS Dashboard

- Analyze data from 2015, 2012, 2010, and 2008 without performing any programming
- User-directed, real-time results
 - grc.osu.edu/OMAS
- Visit OMAS website in September to download public dataset

Future Analysis

- Reports to be published on the OMAS website
 - Crowd-out analysis
 - Estimated uninsured rate by county
 - Profile of the aging population

Future Analysis

- Sponsored research project presentations in June 2016
 - Maternal and infant/child health
 - Influence of determinants of health on access to care, health status, and health care utilization
 - Impact of Care Consistent with Patient Centered Medical Home on health care access, utilization, and health status

CLOSING REMARKS: LOOKING FORWARD