



HEALTH CARE SERVICES & CAPACITY FOLLOWING MEDICAID EXPANSION

What can we learn from late expanding states?

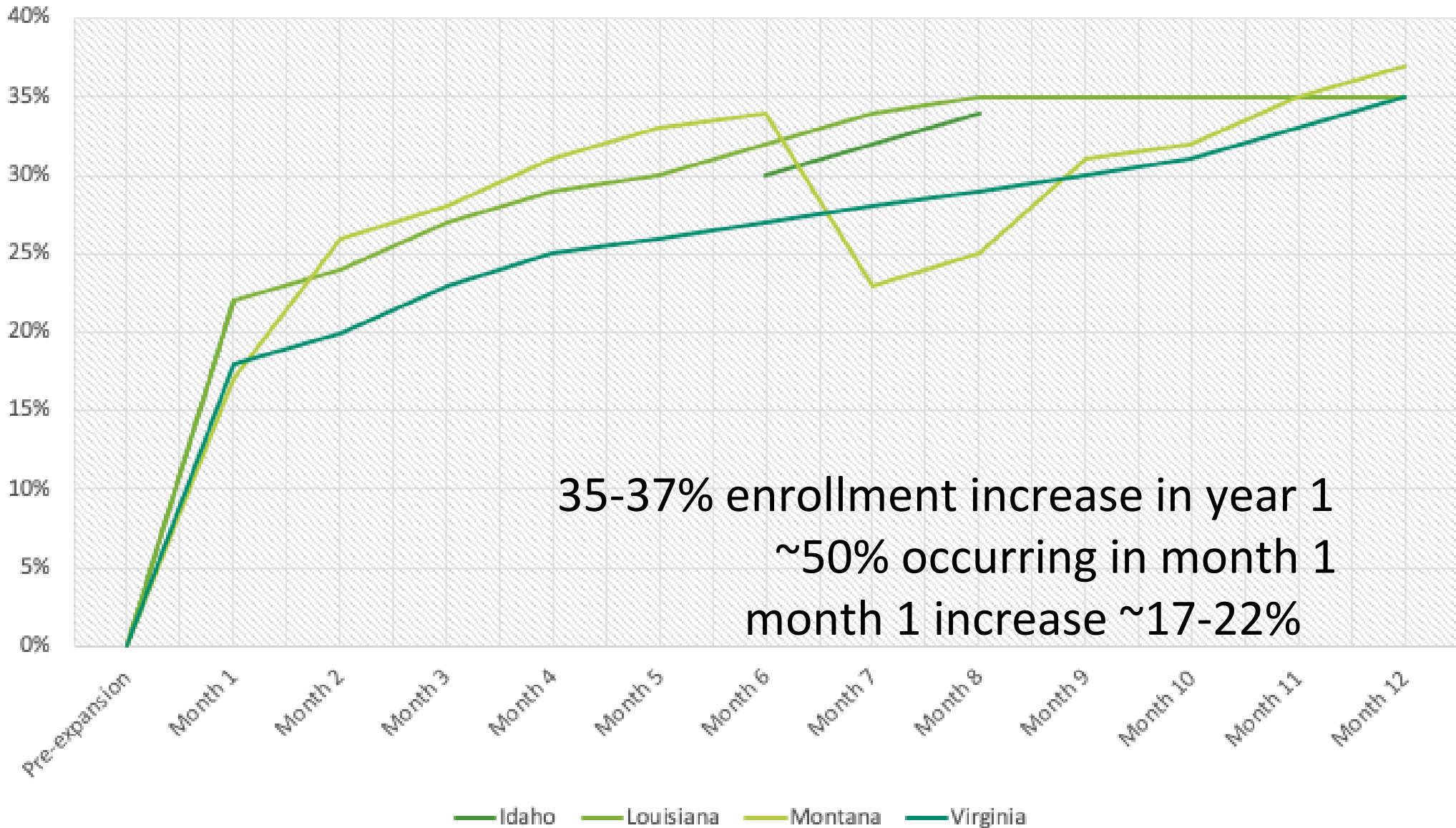
SAINT LOUIS UNIVERSITY & WASHINGTON UNIVERSITY TEAMS

HEATHER BEDNAREK, ALMA CARVER, ASHLEIGH GIOVANINI, PREETHI RAJA, & SIDNEY D.
WATSON

PRESENTED TO: CARE DELIVERY TEAM, MARCH 18, 2021

Late Medicaid Expanding States

Medicaid & CHIP Enrollment Increase & Timing in Year 1



LESSONS LEARNED FROM LATE EXPANDING STATES

- Provider capacity to meet the needs of new adults enrollees
 - No reports of generalized problems with access or quality
 - Specific bottlenecks related to underlying shortages of specific types of providers
 - States relied on MCOs to create adequate networks
 - States report increased Medicaid provider capacity post-expansion, both
 - Number of Medicaid providers
 - Size of patient loads, i.e. existing providers submitting more claims

LESSONS LEARNED FROM LATE EXPANDING STATES

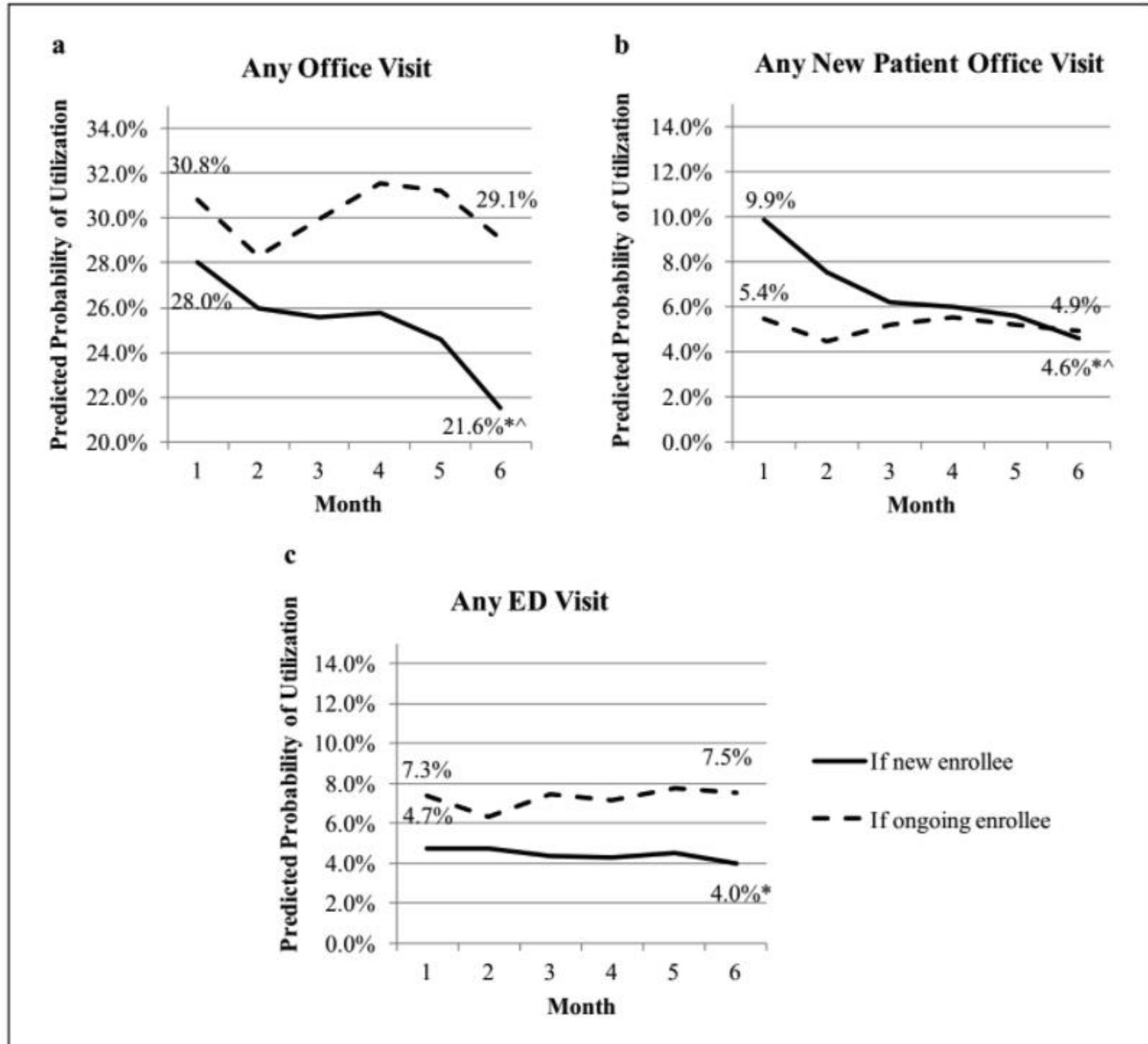
- Services used by new Medicaid expansion enrollees during the first year
 - New enrollees connect with primary care, do not rely heavily on EDs, seek preventive screenings, mental health and substance use treatment, and preventive dental care
- Data about primary and preventive care, ED visits, hospital inpatient & outpatient care, mental health, substance use treatment dental care
- Be prepared, enrollees use services in the first months of coverage

MINNESOTA, expanded 2016

FIRST 6 MONTHS

- Office visits
- New patient visits
- ED visits

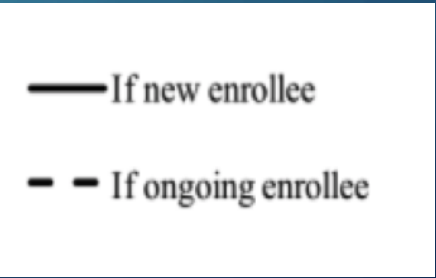
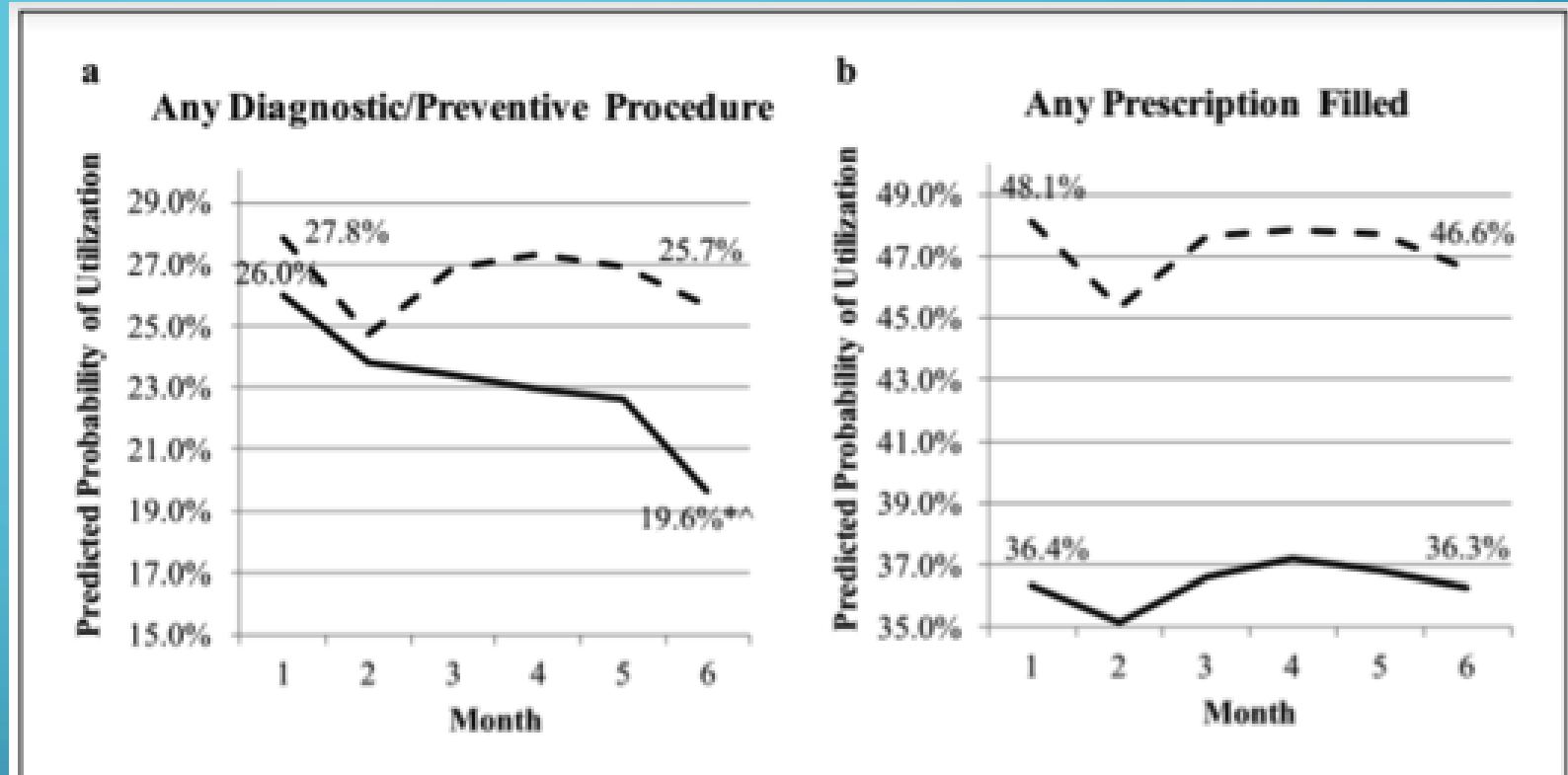
Fertig, et al., Evidence of Pent-up Demand for Care After Medicaid Expansion, 2018



MINNESOTA, expanded 2016

FIRST 6 MONTHS

- diagnostic procedures
- prescription filled

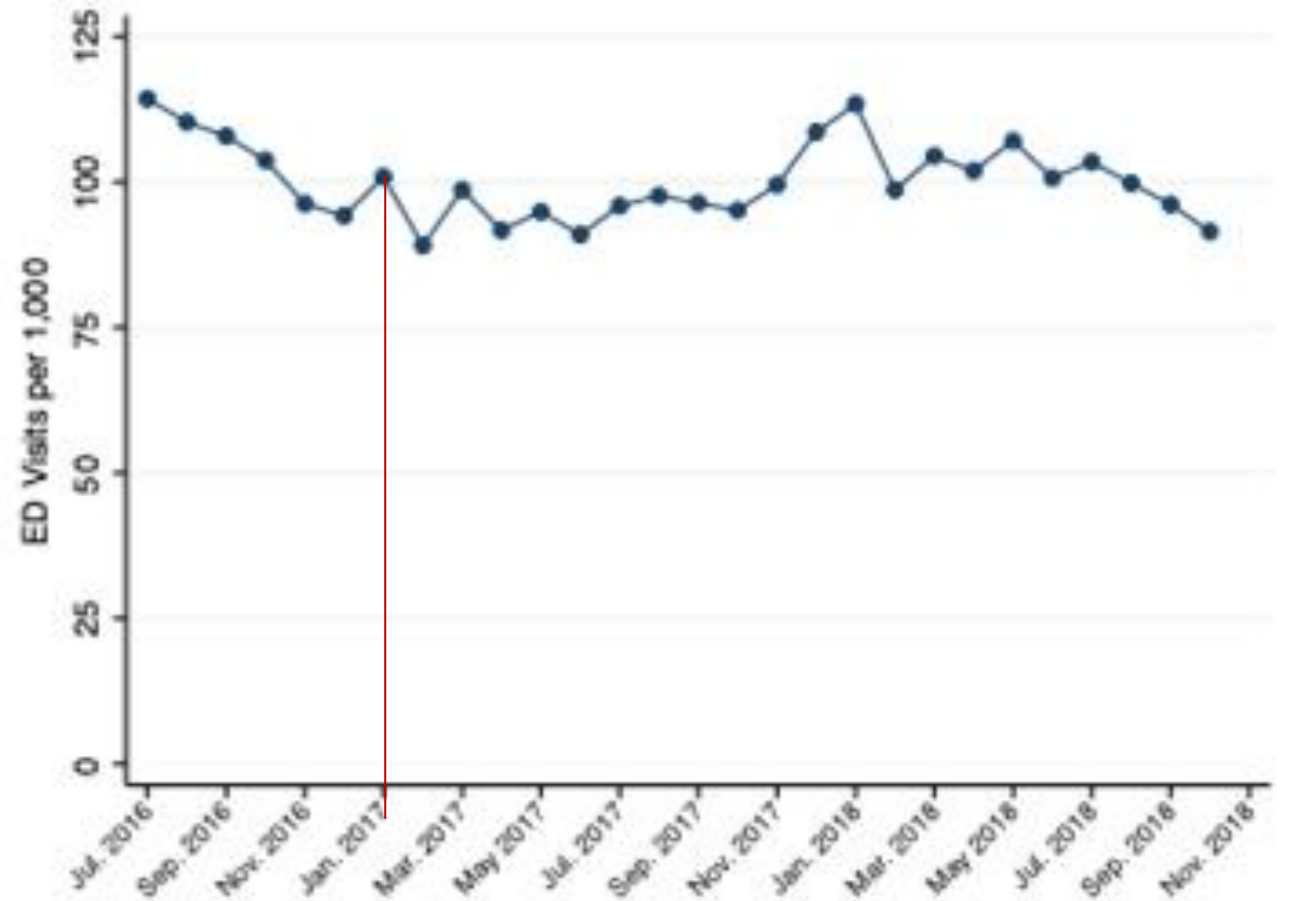


LOUISIANA, expanded 2016

FIRST 2 YEARS ED VISITS

- start high
- Within 6 months, drop 13%
- Next 2 years, drop another 7%

Figure 3: ED Visits per 1,000 Medicaid Expansion Enrollees

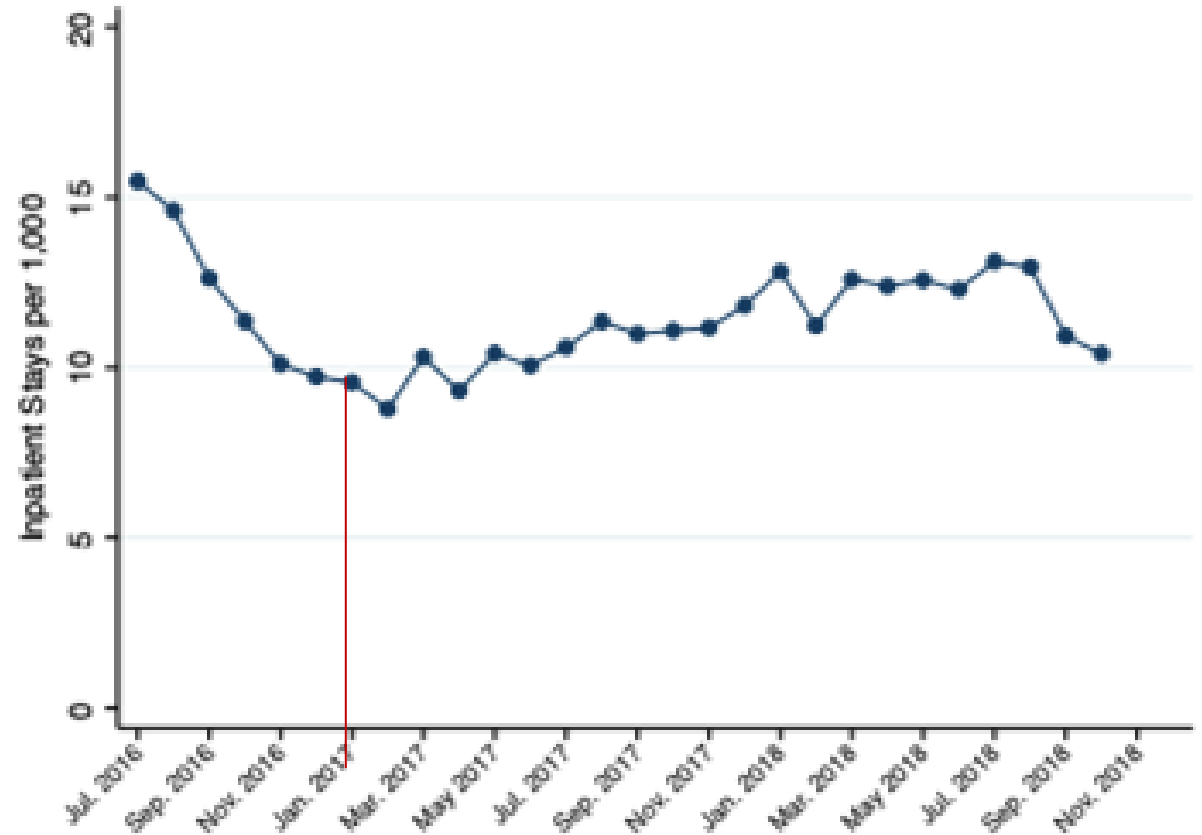


LOUISIANA

FIRST 2 YEARS INPATIENT

- With 6 months, drop by 1/3
- Over next 2 years...

Figure 4: Inpatient Stays per 1,000 Medicaid Expansion Enrollees



OTHER MEASURES OF HOSPITAL SERVICE USE

MONTANA, expanded

Hospital Services	Year 1 (2016)	Year 2 (2017)
Inpatient admission	+3.4%	+1.7%
Outpatient visits	+2.6%	-2.1%
Ambulatory surgery visits	+12.1%	+16.1%
ED visits	\$3.9%	+2.3%

PRIMARY AND PREVENTIVE CARE, year 1 across late expanding states

- **Montana and Louisiana** - **1 in 4** used at least one **preventive** medical
 - cholesterol screening, wellness exam, diabetes screening
- **Virginia** - almost **7 in 10** enrollees had a least one **office visit**
- **Maine** - **1 in 10** screened for breast or colorectal **cancer**
- **Montana** - More than **1 in 5** used preventive **dental**

TRACKING NEW DIAGNOSIS & TREATMENT, year 1

- State dashboards track
 - By county & cumulative over time
- Louisiana, Montana
 - hypertension, diabetes, colon cancer, breast cancer treatment, substance use & mental health treatment
- Virginia
 - hypertension, diabetes, cancer, asthma, COPD, addiction and recovery treatment, at least one prescription
- Maine
 - Hypertension, diabetes, mental health, substance use & opioid disorder
 - 15% treated for diabetes or hypertension, year 1+retroactive coverage)

MENTAL HEALTH & SUBSTANCE USE TREATMENT

Maine (year 1+ retroactive coverage)

- Almost ½ received mental health treatment
- **1 in 5** used substance use treatment services & almost 1 in 6 used opioid disorder treatment
- Idaho (9 months)
 - **1 in 3** diagnosed with serious and persistent mental illness
- Virginia
 - **Almost 1 in 10** received addiction and recovery treatment services (8%)
- Louisiana (year 1)
 - Less than **1 in 10** accessed mental health treatment
 - Only **1 in 50** received substance use treatment

But what about pent-up demand for preventive services due to COVID?



PROVIDER CAPACITY

BOTTLENECKS, related to general shortage

Montana

- Mental health providers and dental care “more limited”

Virginia

- Mental and behavioral health accepting new patients

Maine

- Behavioral health, long standing problems with mental health provider shortages and low Medicaid rates

The background is a solid teal color with a subtle gradient. In the four corners, there are decorative white line-art patterns resembling circuit boards or neural networks, with lines and small circles connecting them.

PROVIDER CAPACITY GROWTH

FQHCs, growth in capacity, year 1

Increases & Decreased in Patients	Total Patients	Medicaid patients	Uninsured patients
Virginia	+7%	+37%	-15%
Maine	+3%	+16%	-9%
Utah (up to 100% FPL in month 4)	0	+4%	-5%

Still analyzing data and may prepare a fact sheet

INCREASES IN MEDICAID PROVIDERS, 2 years in LOUISIANA

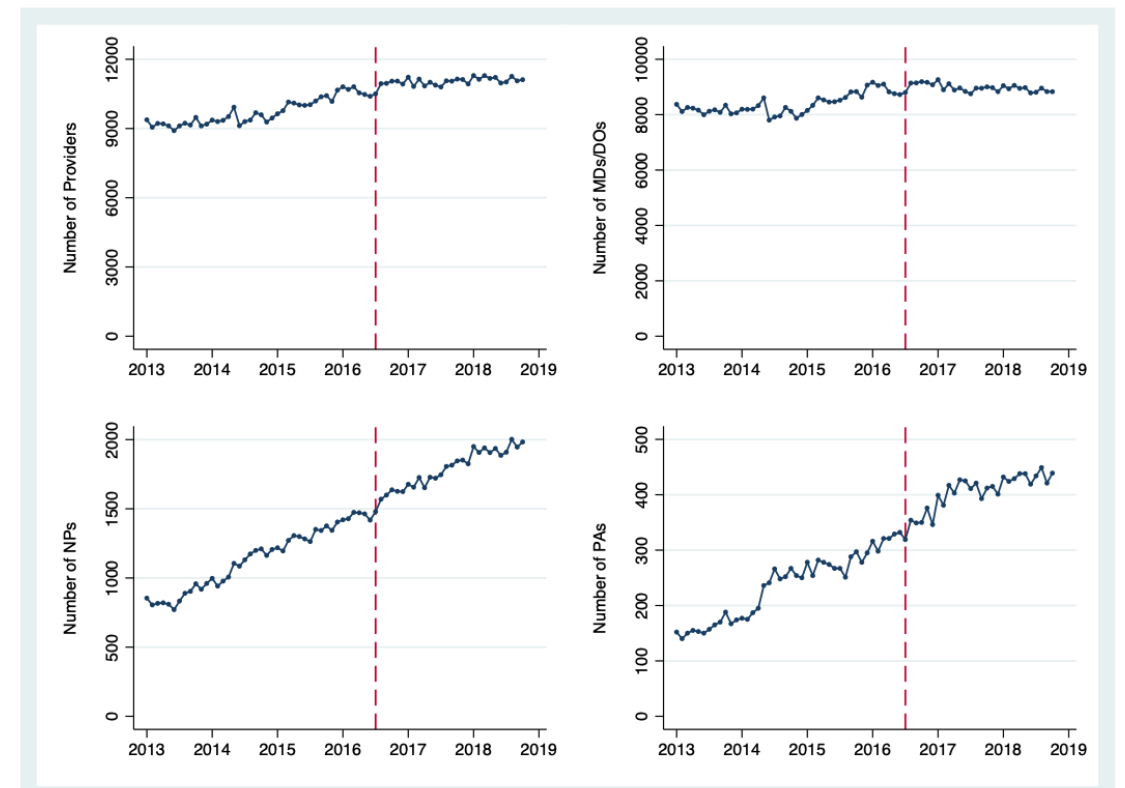
PCPs → 24%

SPECIALISTS → 50% jump, falling slightly over next 2 years

BY TYPE

- NPs → 55%
- PAs → 58%
- MDs/DOs → mostly stable, although higher

Figure 8: Number of Unique Providers by Month/Year by Provider Type, 2013 - 2018



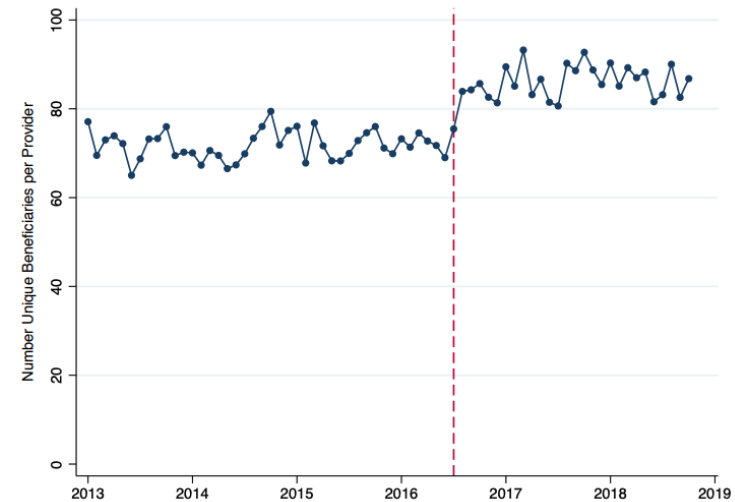
Notes: Providers with at least 10 Medicaid claims in a given month/year.

INCREASES IN MEDICAID PATIENT LOAD

AVERAGE MEDICAID PROVIDER MEDICAID PATIENT LOAD

- 14% growth → 72 before & 82 after
- PAs patient growth 26% → 47 to 59
- NPs, similar to PAs

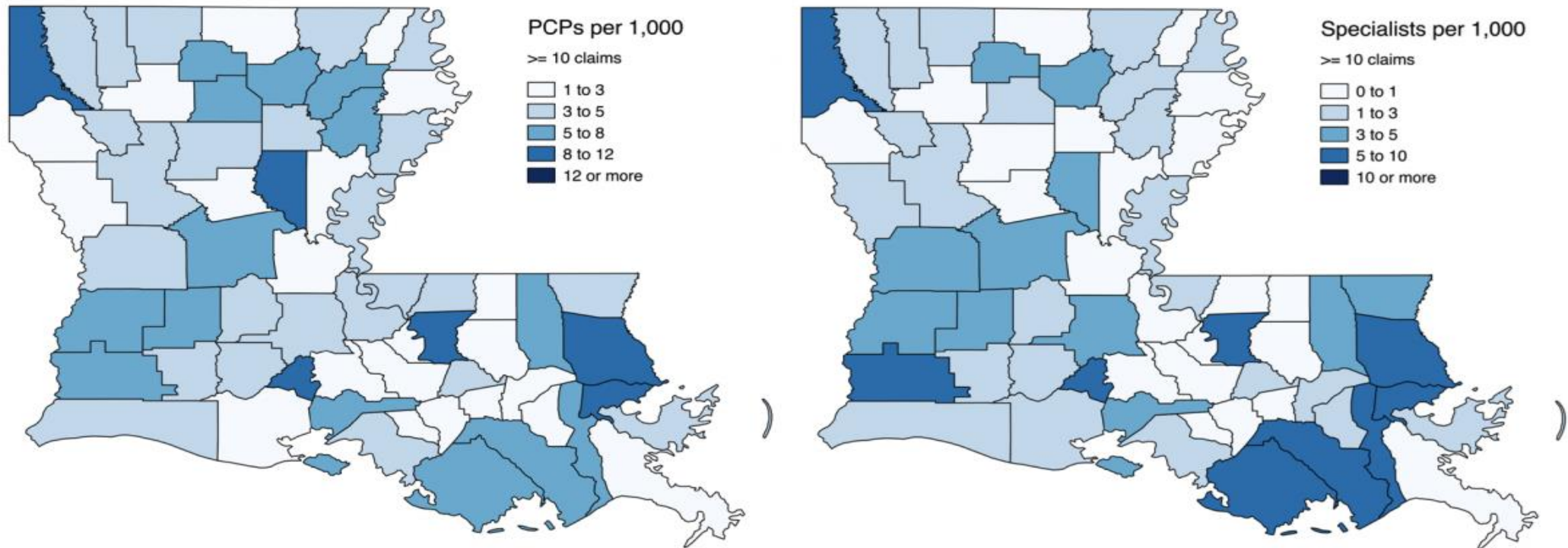
Figure 10: Number of Unique Beneficiaries per Provider by Month/Year, 2013 - 2018



Notes: Providers with at least 10 Medicaid claims in a given month/year.

PROVIDER PARTICIPATION by county LOUISIANA

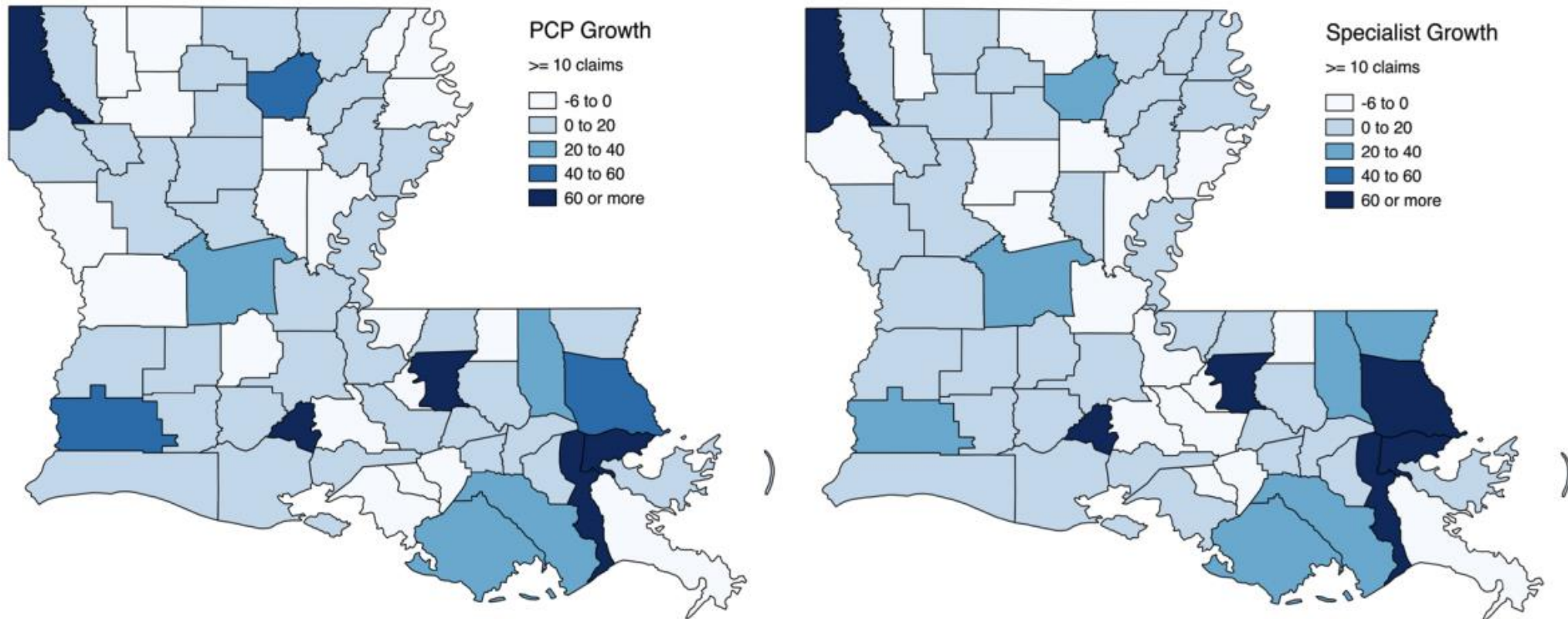
Figure 12: PCPs and Specialists per 1,000 Louisiana Medicaid Beneficiaries in 2018



Notes: Providers with at least 10 final adjudicated Medicaid claims in 2018.

PROVIDER PARTICIPATION GROWTH - – by county LOUISIANA

Figure 13: Provider Participation Growth Pre-to-Post Medicaid Expansion



Notes: Providers with at least 10 final adjudicated Medicaid claims in 2018.

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Coming soon...

- Medicaid providers by county – Abby Barker
- HMO Access Plans
 - counties where plans cannot and do not meet minimum standards
 - Facilities and specialties
- Health status of new enrollees – Tim & Wash U Team

Contact Information

Principal Investigators:

Timothy McBride tmcbride@wustl.edu

Sidney Watson, sidney.watson@slu.edu

Key Investigators: Heather Bednarek, Alma Carver, Ashleigh Giovanini, Emily Hernandez, Leah Kemper, Lauren Kempton, Preethi Raja

Websites:

IPH/Center for Health Economics and Policy: <https://publichealth.wustl.edu/centers/health-economics/>

SLU Center for Health Law Studies: <https://www.slu.edu/law/health/faculty.php>



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