Healthy Michigan Plan Beneficiary Impact

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Healthy Michigan Plan Basics

- MDHHS launched the Healthy Michigan Plan (HMP) in April 2014 after:

  ◦ Passage of PA 107 of 2013, the authorizing state legislation

  ◦ Initial federal waiver approval from the Centers for Medicare and Medicaid Services (CMS), which was received on December 30, 2013

- HMP extended access to comprehensive health coverage approximately 675,000 previously uninsured or underinsured Michigan citizens

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HMP Goals

▸ Improve access to healthcare

▸ Improve the quality of healthcare services delivered;

▸ Reduce uncompensated care

▸ Encourage preventive care and the adoption of healthy behaviors

▸ Help individuals manage their health care issues

▸ Encourage quality, continuity, and appropriate medical care

▸ Study the effects of a demonstration model that infuses market-driven principles into a public healthcare insurance program

HEALTHY MICHIGAN PLAN

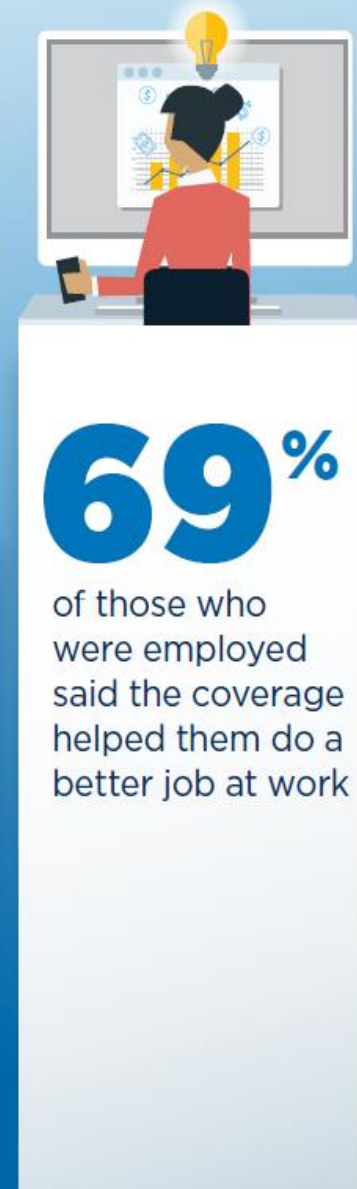# Healthy Michigan Plan Eligibility Changes

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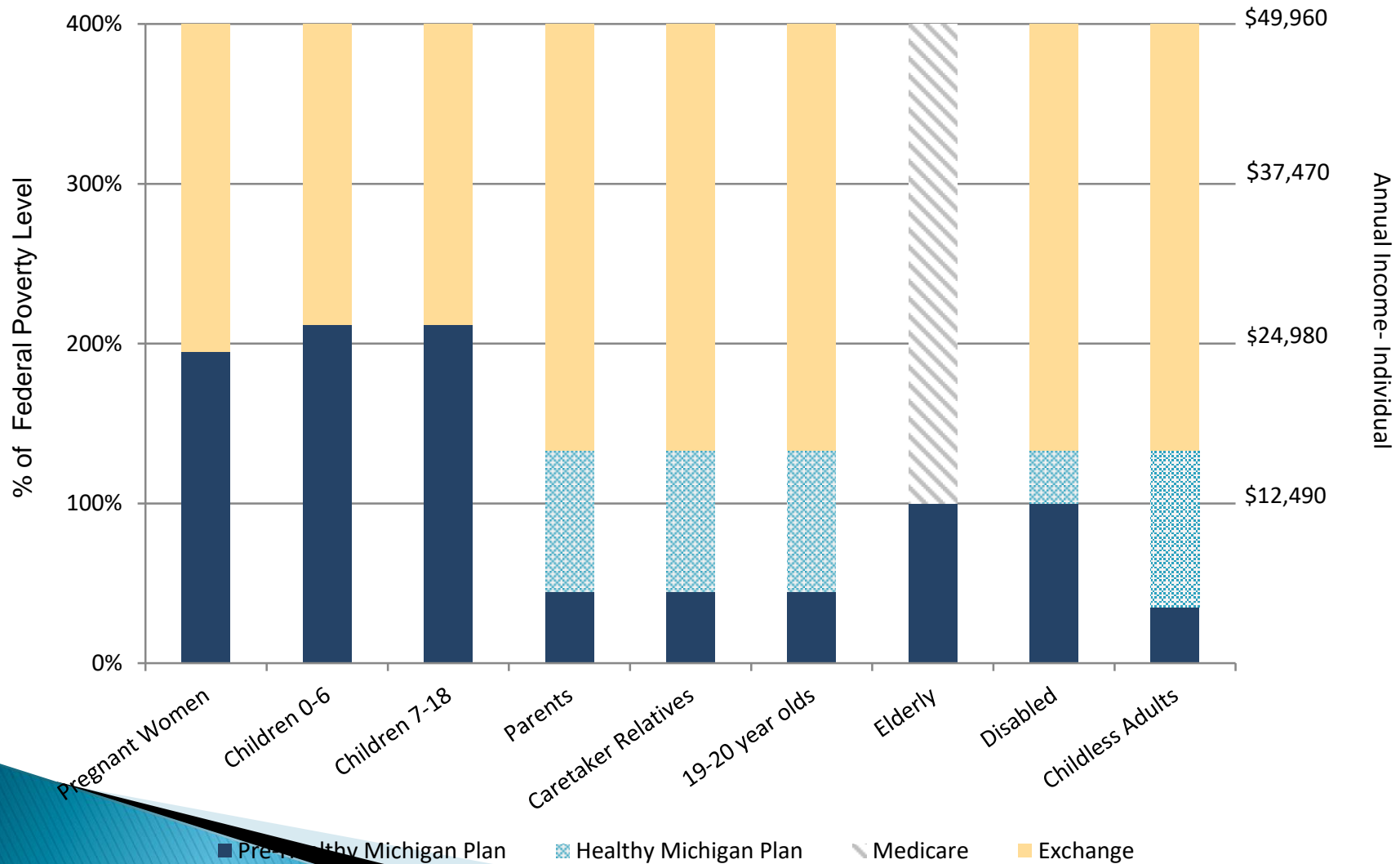
HMP Program Evaluation

- 1115 Waiver Demonstrations require an independent evaluation.

- The University of Michigan Institute for Healthcare Policy and Innovation (IHPI) was granted the contract to evaluate HMP.

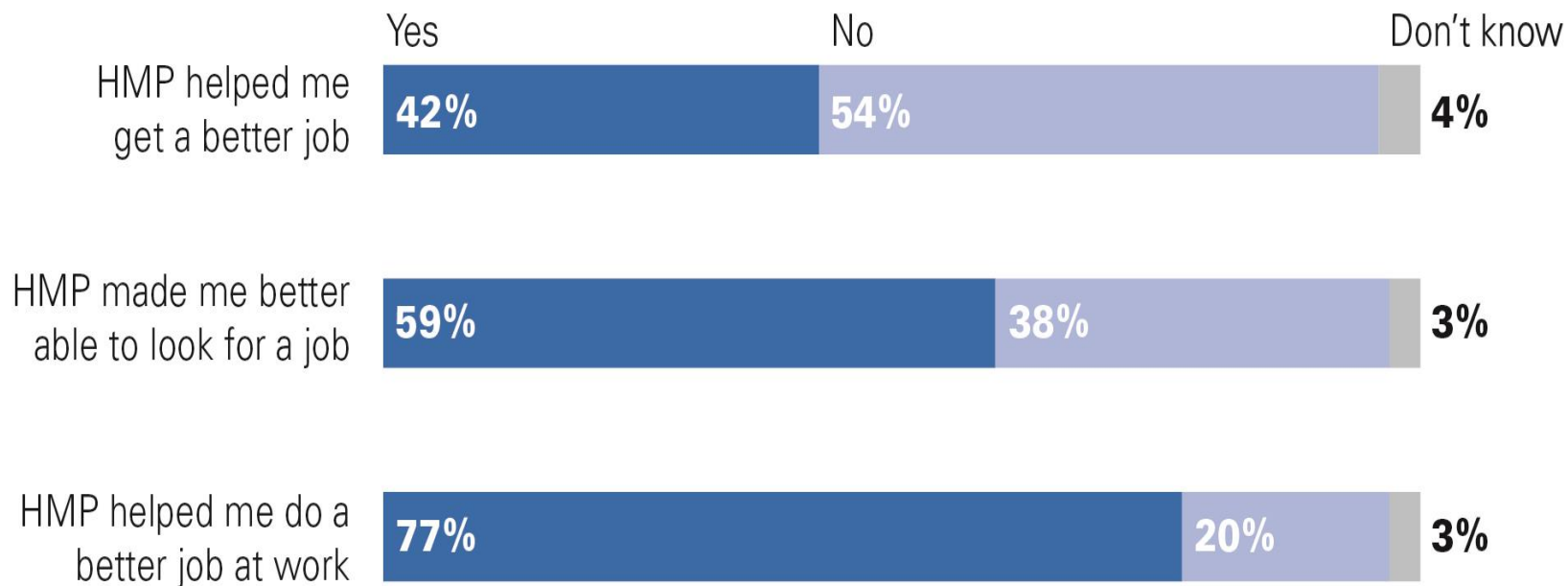- The evaluation included quantitative and qualitative studies.

2016-2018 Surveys

- 2016 Enrollee Survey

  ◦ 4,090 HMP enrollees had complete survey data

- 2017 Follow-Up Survey

  ◦ 3,104 out of 4,106 who completed the 2016 survey

  ◦ 83.4% Response Rate

- 2018 Follow-Up Survey

  ◦ 2,608 out of 3,104 who completed the 2017 survey

  ◦ 89.4% Response Rate

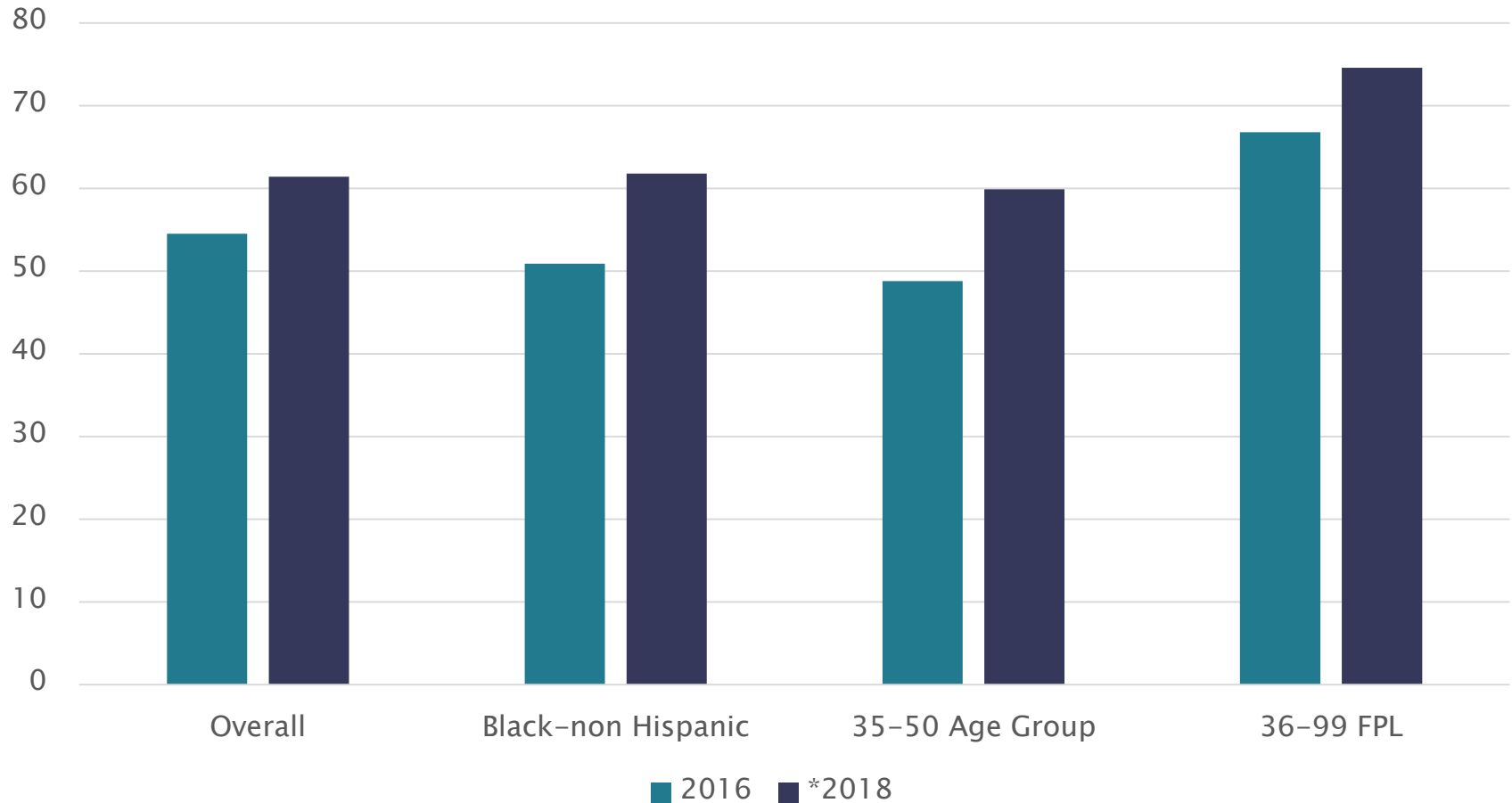# How did **Michigan's Medicaid expansion** affect the health of low-income people and their ability to work?

38% said their mental health improved since enrolling

40% said their dental health improved since enrolling

48% said their physical health improved since enrolling

55% of those who were out of work said the coverage made them better able to look for a job

69% of those who were employed said the coverage helped them do a better job at work

HMP Coverage and Employment

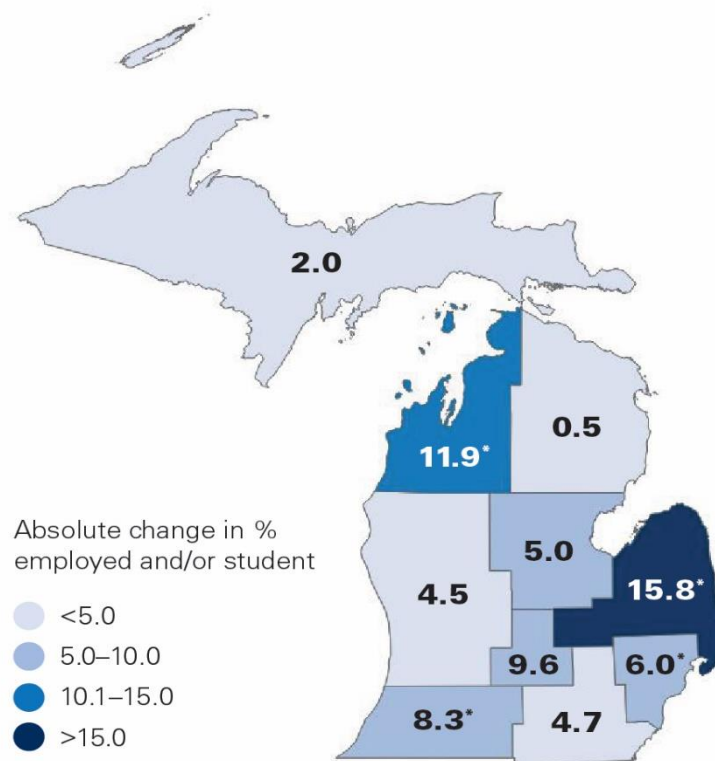In 2018, enrollees reported that HMP had a **positive impact on their employment and job seeking ability**.

	Yes	No	Don't know
HMP helped me get a better job	42%	54%	4%
HMP made me better able to look for a job	59%	38%	3%
HMP helped me do a better job at work	77%	20%	3%

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Reporting of Employment and/or Student 2016-2018

*Numbers are statistically significant, p<.05.

Reporting of Employment and/or Student 2016–2018

The change from 2016 to 2018 in the proportion of enrollees who were **employed and/or a student varied by prosperity region**.

Absolute change in % employed and/or student

- <5.0
- 5.0–10.0
- 10.1–15.0
- >15.0

2.0

0.5

11.9*

5.0

4.5

15.8*

9.6

6.0*

8.3*

4.7

*Indicates statistically significant change over time

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Reports of Excellent, Very Good, or Good Health Increased

Health Status
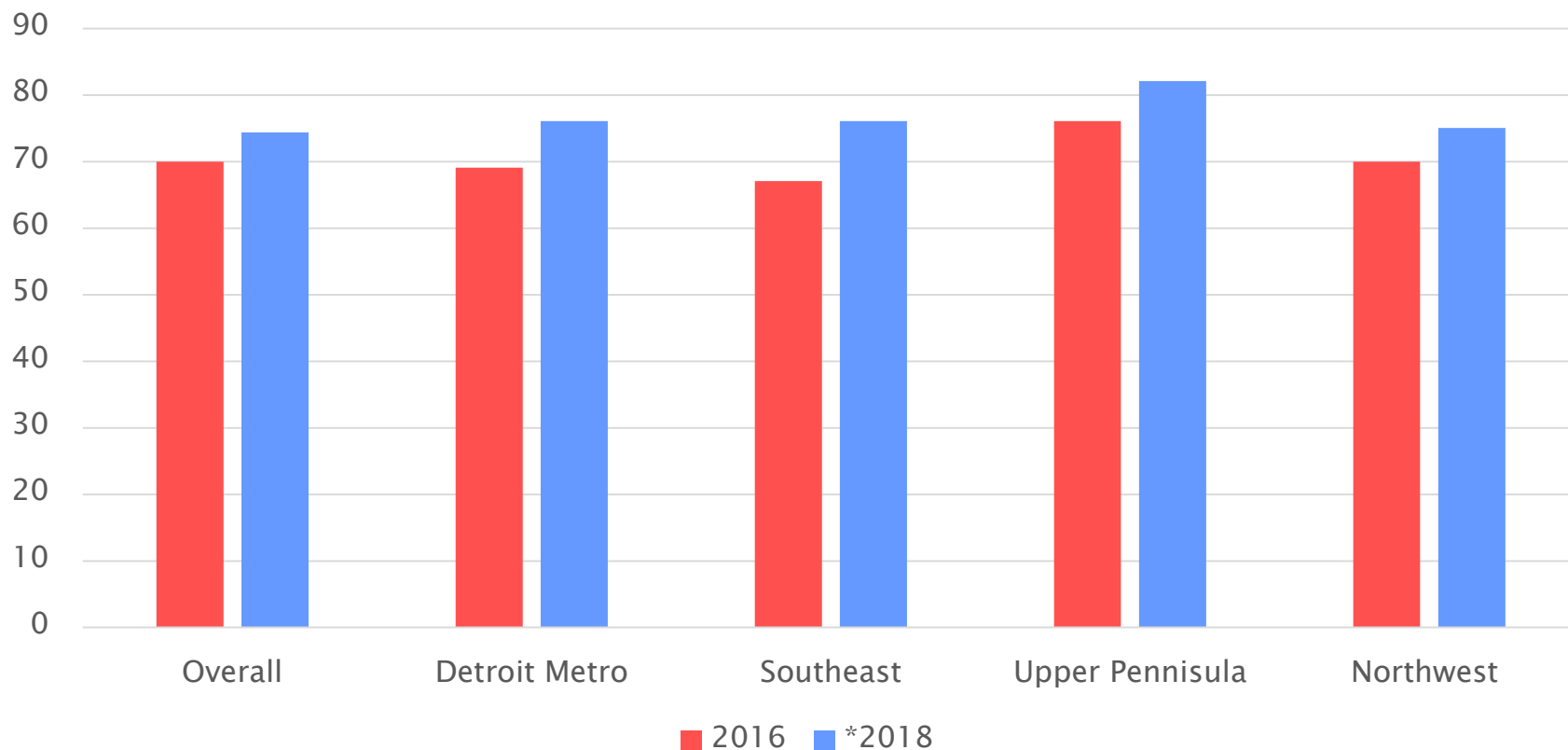
*Numbers are statistically significant, p<.05.

# Reports of "Fair/Poor Health" Decreased

Health Status
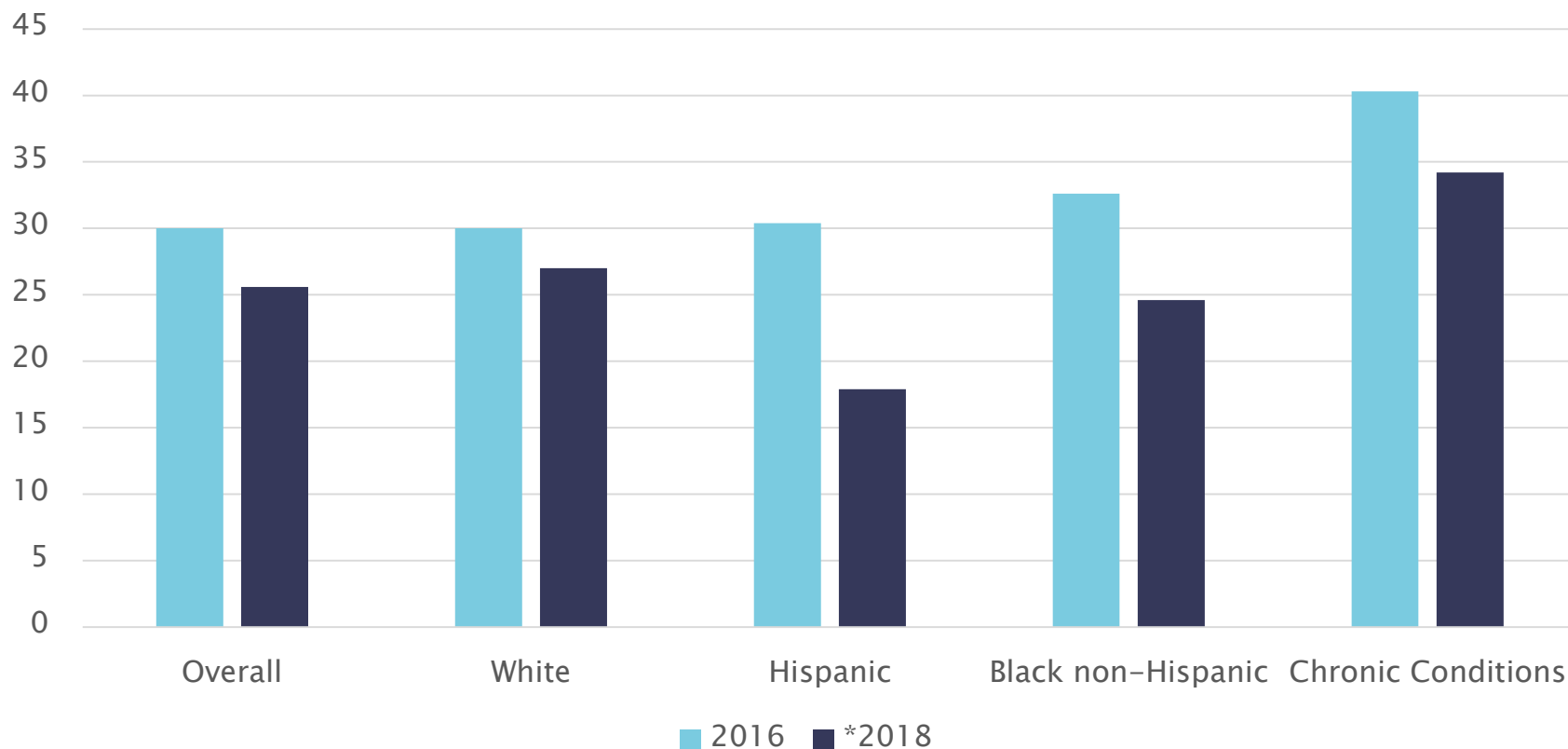
*Numbers are statistically significant, p<.05.

Health Status

- The mean number of days enrollees reported poor physical health in the month prior to survey completion.

  ◦ Overall decline from 6.7 days in 2016 to 5.9 in 2018.

  ◦ Largest decline for beneficiaries who earn between 36-99% Federal Poverty Level: 5.3 days in 2016 to 3.9 days in 2018.

- The mean number of days enrollees reported poor mental health in the month prior to survey completion.

  ◦ Overall decline from 5.8 days in 2016 to 5.6 days in 2018.

  ◦ Largest decline was found in 51-64 Age Group – from 6.3 days in 2016 to 4.8 days in 2018.

HEALTHY MICHIGAN P L A N

MI Health Account Statements Changing Health Care Decisions
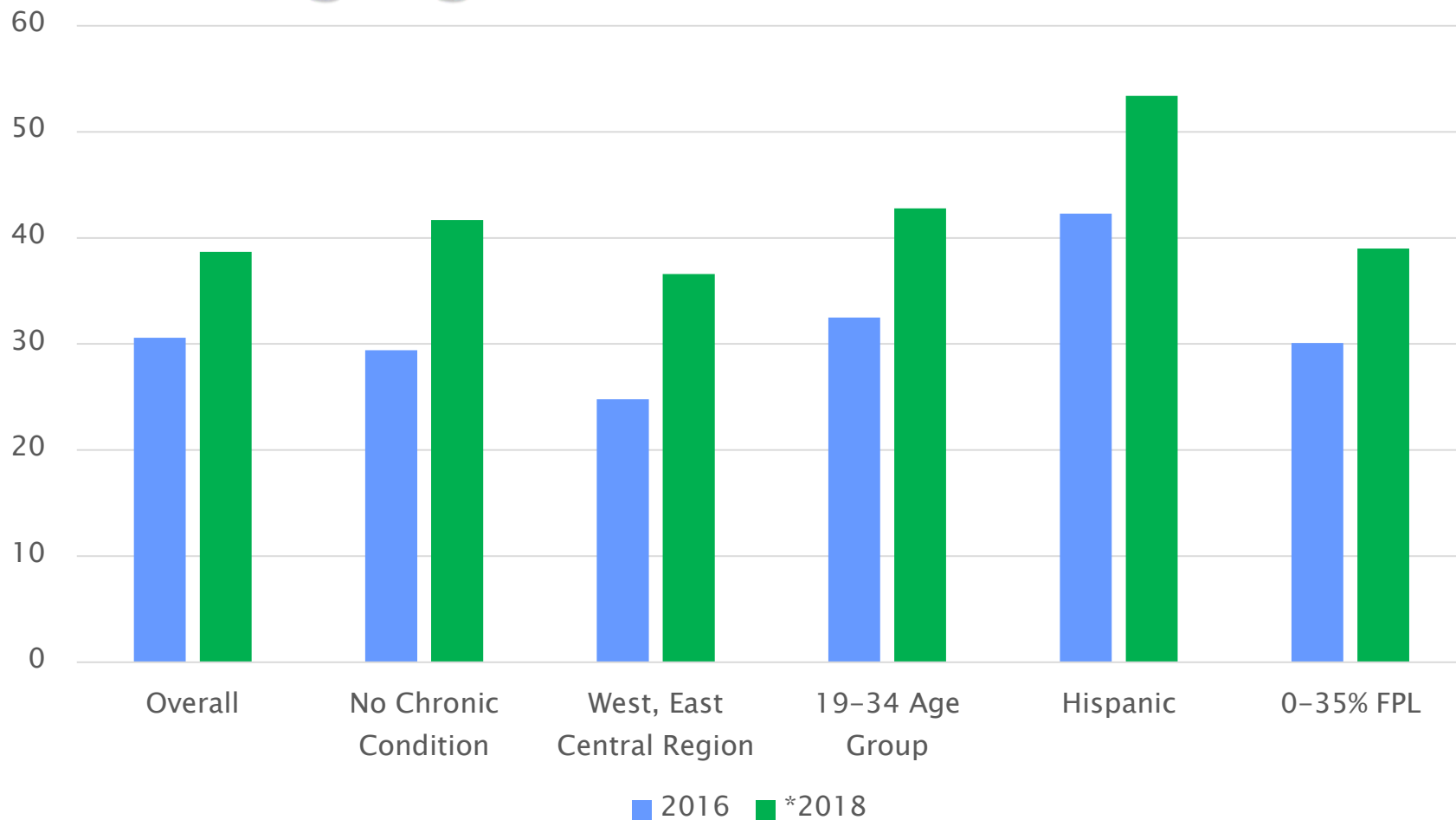
*Numbers are statistically significant, p<.05.

Regular Source of Care

- Primary Care Provider visit decreased from 87.1% in 2016 to 85.7% in 2018

- 84.8% of enrollees who completed the Enrolled Survey and who reported having a primary care provider (PCP) saw their PCP in the past 12 months.

- No statistically significant change from 2016 to 2018 in the proportion of enrollees who reported seeing their PCP in the past 12 months.
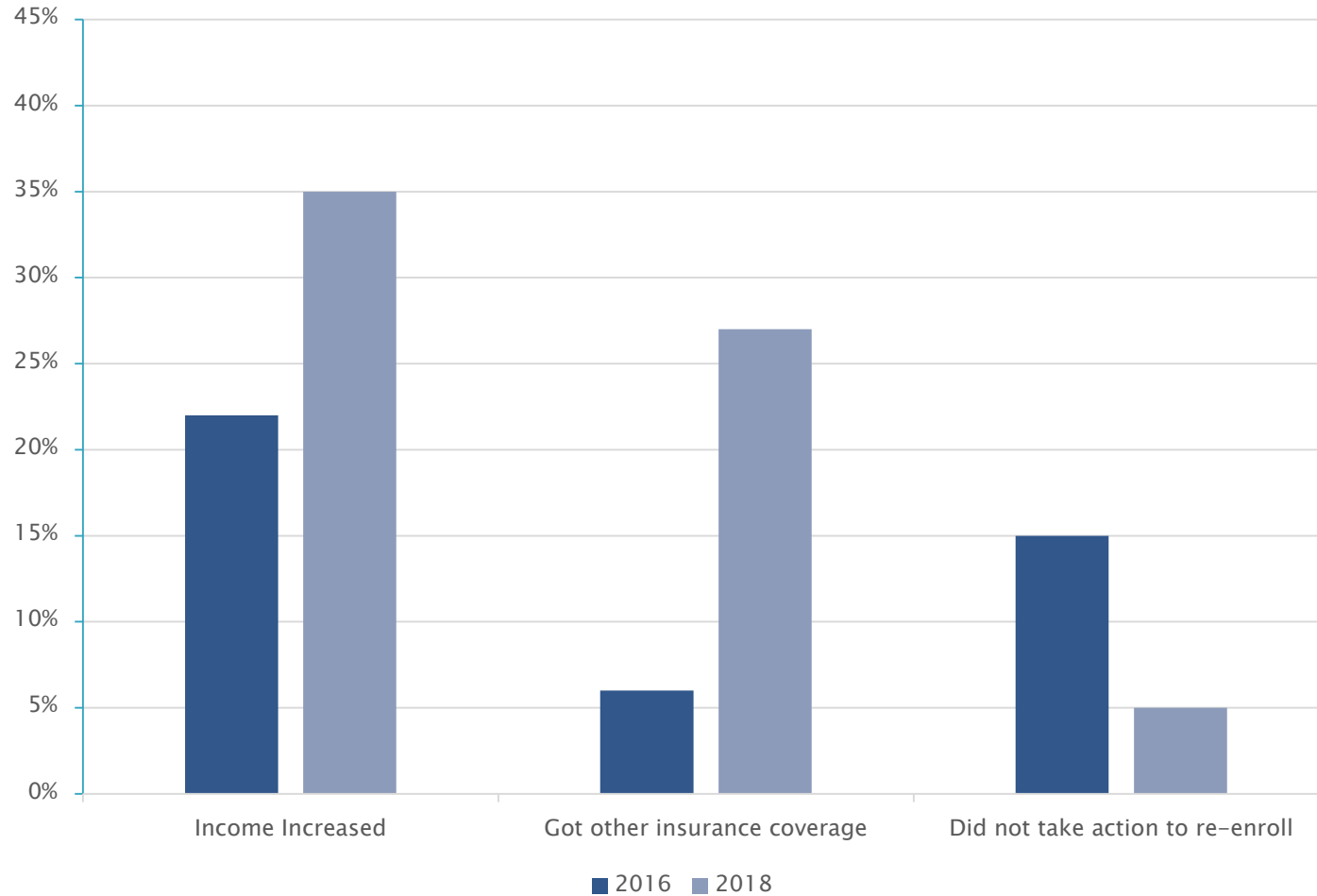

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Emergency Room Visits Decreased

- Decrease in ER visits overall

- Low-complexity ER visit in the last 12 months decreased from 3.6% in 2016 to 1.9% in 2018.

- The largest decreases were found in:
  ◦ 35-50 Age Group (from 4.1% in 2016 to 1.4% in 2018)
  ◦ Black, non-Hispanic (from 4.8% in 2016 to 2.3% in 2018)
  ◦ Mental Health/SUD (from 4.9% in 2016 to 2.8% in 2018)

Questions