

BREAKING DOWN THE RANKINGS: IMPROVING ACCESS TO HEALTH CARE

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ACKNOWLEDGEMENTS

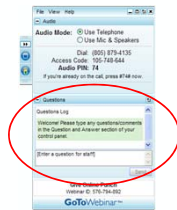
- Robert Wood Johnson Foundation
 - Including Abbey Cofsky, Paul Kuehnert, Michelle Larkin, Jim Marks, Joe Marx, Naima Wong
- Wisconsin County Health Rankings & Roadmaps Team
 - Including Bridget Catlin, Patrick Remington, David Kindig, Amanda Jovaag, Alison Bergum, Kitty Jerome, Kate Konkle, Karen Odegaard, Jan O’Neill
- Our Partners
 - Including Burness Communications, Community Catalyst, United Way Worldwide, ASTHO, NACCHO, NNPHI, Dartmouth Institute, CDC, NCHS

GO TO WEBINAR ATTENDEE INTERFACE

1. Viewer Window



2. Control Panel



OUTLINE

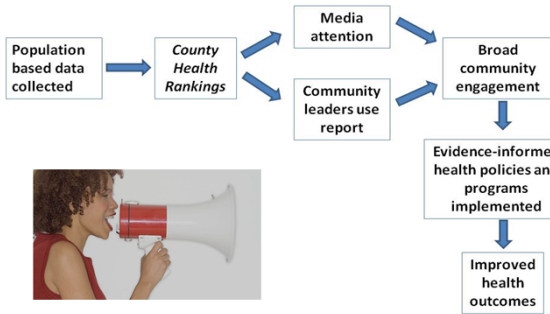
County Health Rankings & Roadmaps Overview

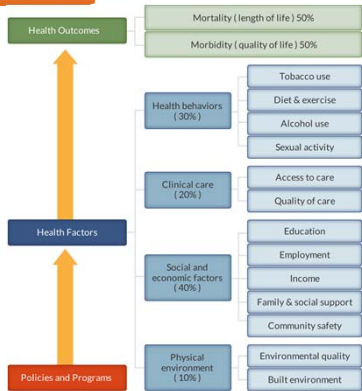
Exploring the Data: Access to Health Care Measures

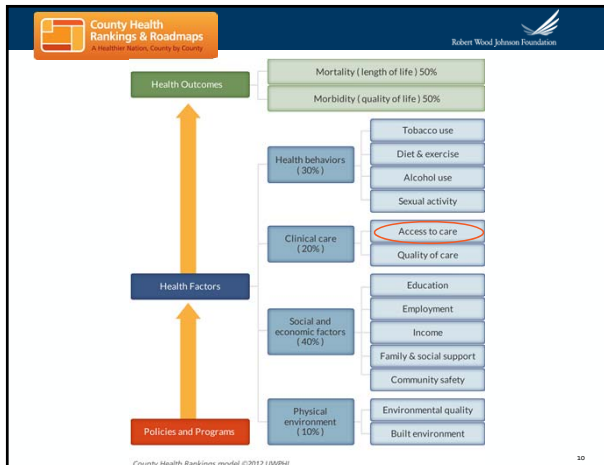
Digging Deeper: How the Affordable Care Act will Affect Access to Health Care

Q & A

County Health Rankings Logic Model







CLINICAL CARE

FOCUS AREA	MEASURE	DATA SOURCE
ACCESS TO CARE (10%)	Uninsured (5%)	Small Area Health Insurance Estimates
	Primary Care Physicians (3%)	Health Resources & Services Administration
	Dentists (2%)	Health Resources & Services Administration

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Breaking Down the Rankings Model: Improving Access to Health Care

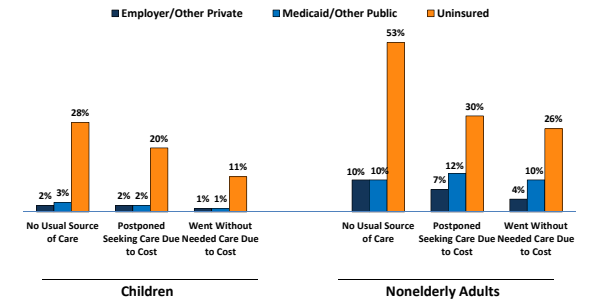
County Health Rankings and Roadmaps
Judith Solomon
November 14, 2013

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Topics

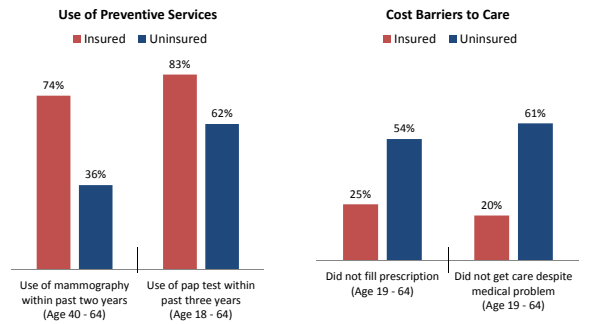
- Health Insurance Makes a Difference
- Current Status of Medicaid Expansion and Implementation of State Marketplaces
- Premium Tax Credits: The Basics

Health Insurance Matters: Access to Care by Health Insurance Status, 2011



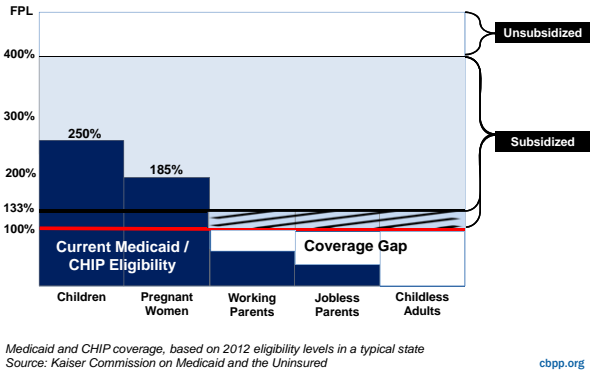
NOTES: In past 12 months. Respondents who said usual source of care was the emergency room were included among those not having a usual source of care. All differences between the uninsured and the two insurance groups are statistically significant (p<0.05).
SOURCE: KCMU analysis of 2011 NHIS data.

Health Insurance Matters: Women's Access to Care by Insurance Coverage, 2010



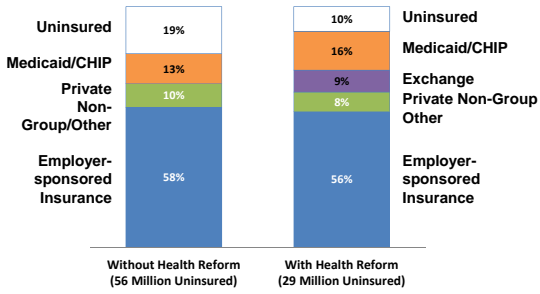
Sources: Kaiser Family Foundation, National Center for Health Statistics, National Health Interview Survey in Health, United States 2012. The Commonwealth Fund Biennial Health Insurance Survey, 2010

Coverage Landscape in 2014

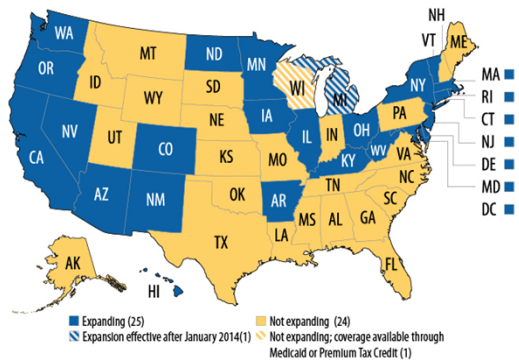


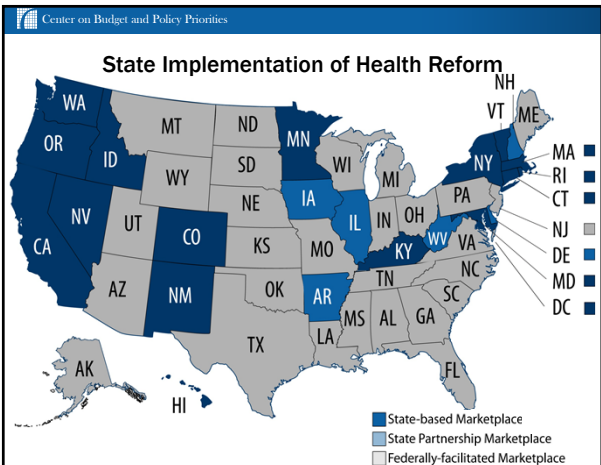
Estimated Health Insurance Coverage in 2017

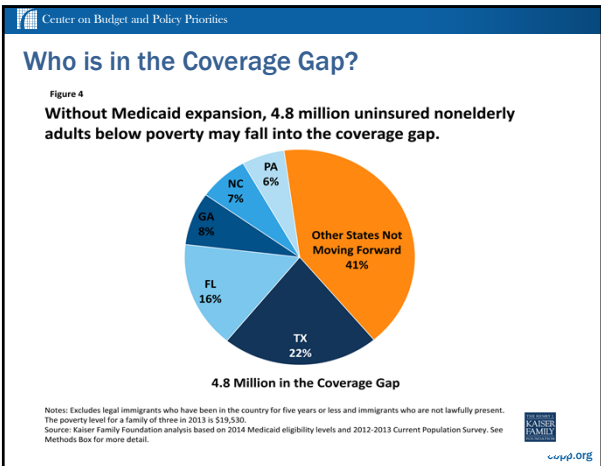
Total Nonelderly Population = 279 million



Medicaid Expansion Status for 2014







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Premium Tax Credits

- Available to individuals and families with incomes between 100 and 400% of the poverty line
 - Must not be eligible for other "minimum essential coverage" (MEC)
 - Must be US citizens or lawfully present in the US
 - Special rule for lawfully residing immigrants with incomes below the poverty line who are not eligible for Medicaid because of their immigration status

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How Are Income and Household Size Measured?

- **Income:** Modified Adjusted Gross Income (MAGI)

$$\begin{array}{r} \text{Adjusted Gross Income (1040, line 37)} \\ + \text{ Foreign income} \\ + \text{ Tax exempt interest} \\ + \text{ Non-taxable Social Security benefits} \\ \hline \text{MAGI} \end{array}$$

- **Household size:** Household unit equals tax unit
 - “Household” may or may not be the same as who is in the insurance plan

How Is the Amount of the Tax Credit Determined?

$$\begin{array}{r} \text{Credit amount} \\ = \\ \text{Cost of benchmark plan} \\ - \\ \text{Expected premium contribution} \end{array}$$

Credit amount affected by:

- Individual or family’s expected contribution based on their income
- Premium cost for benchmark plan

Example: Single Individual



John:

- 24 years old
- Income of 22,980 (200% FPL)
- Expected contribution: 6.3% or \$1,448

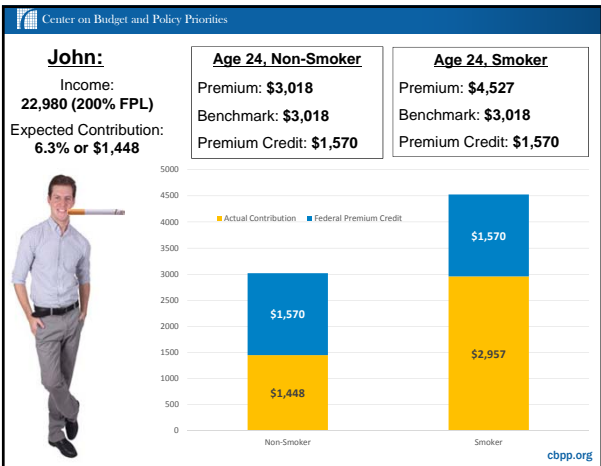
3 Lowest Cost Silver Plans Covering John:

- Plan A: \$2,800
- Plan B: \$3,018 ← Benchmark
- Plan C: \$3,200

Premium Credit:

$$\$3,018 - \$1,448 = \$1,570$$





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What Kind of Coverage Can People Buy with the Premium Credits?

Plan Tier	Actuarial Value
Platinum	90%
Gold	80%
Silver	70%
Bronze	60%

Higher premiums/Lower cost-sharing (Platinum, Gold)
 Benchmark (Silver)
 Lower premiums/Higher cost-sharing (Bronze)

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How Do People Get Premium Credits?

- Submit application to the Marketplace for advance payment of credits
 - Marketplace estimates amount of advance payment based on projected income
 - Credit is sent directly to insurer, individual pays insurer balance of premium
- Can also wait until tax filing and claim on return
 - Only available for months enrolled in a Marketplace health plan

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What Happens When Estimated Income for the Year is Different from Actual Income?

- Final amount of credit based on **actual** income
- At tax filing time, advance payments received are reconciled with actual credit amount
 - If income increases, may have to repay
 - If income decreases, may get more credit at tax time
- To avoid repayment, can reduce the amount of advance payment received during the year

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For More Information:

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