

WINNIPESAUKEE PUBLIC HEALTH REGION: DEMOGRAPHIC DATA UPDATE AND EXPANDED MEDICAID DISCUSSION PREVIEW

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Winnipesaukee Public Health Council
Franklin Savings Bank Welcome Center
Tilton, New Hampshire
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Two Sections to Today's Presentation

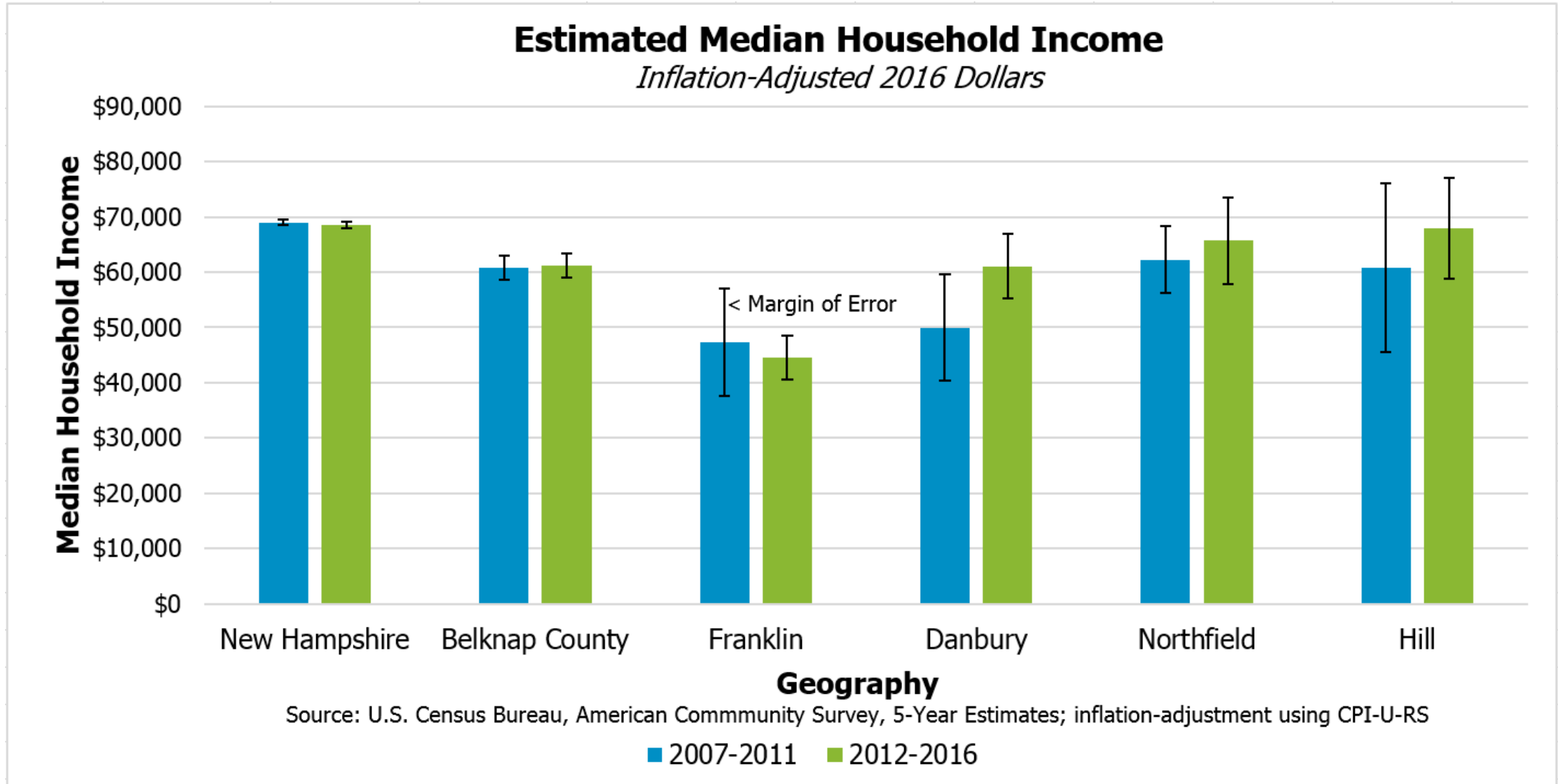
■ Demographic Update

- *U.S. Census Bureau survey data released in late 2017 offers insights, hints of regional demographic changes*
- *Five-year data provides more certainty, larger sample sizes for smaller jurisdictions, released in December 2017*
- *One-year survey data has more uncertainty, but more timely*
- *90 percent confidence intervals shown to indicate uncertainty*
- *Population projections*
- *Housing availability challenges*

■ The New Hampshire Health Protection Program (NHHPP)

- *Overview of current NH version of expanded Medicaid*
- *Findings of commission that studied the NHHPP*
- *Likely points of debate this legislative session*

Household Income - Five-Year Survey Data



Household Income – Five-Year Survey Data

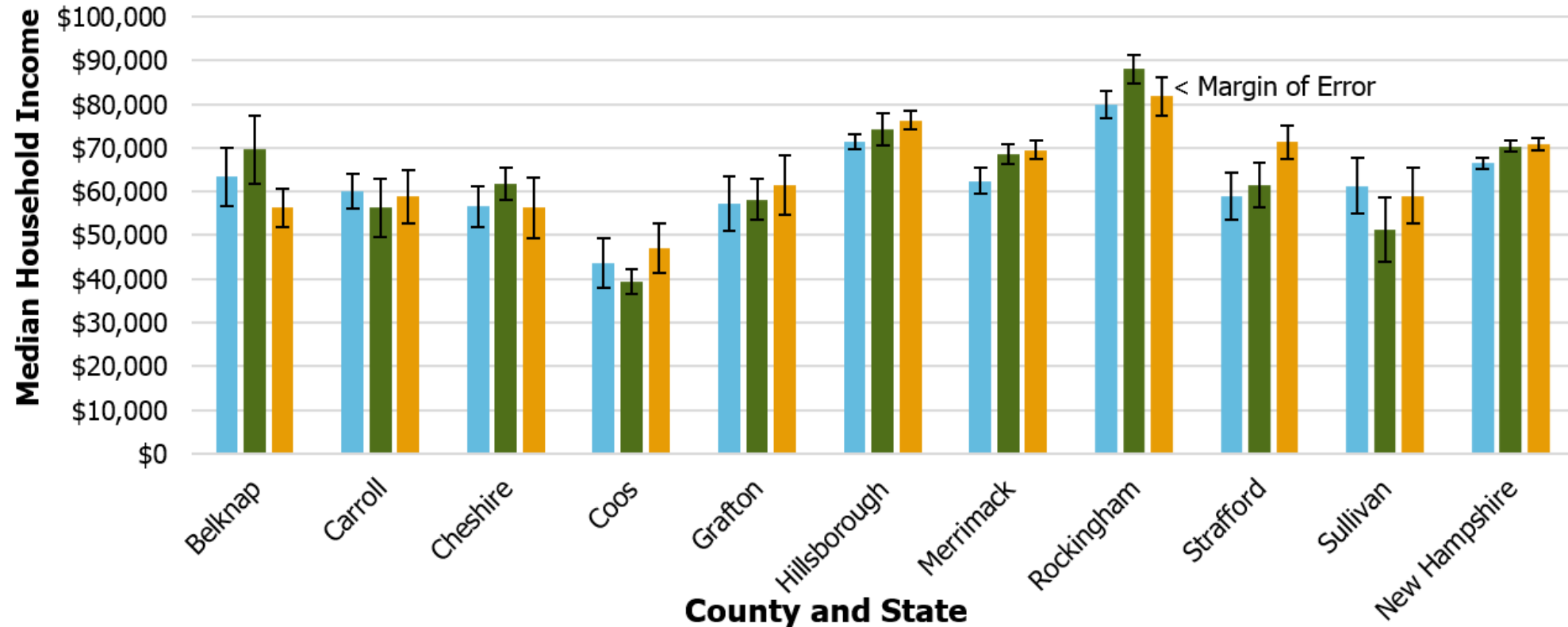
Median Household Income				
<i>2007-2011 and 2012-2016 Data Estimates and Margins of Error</i>				
Geography	2007-2011 Estimate	Margin of Error	2012-2016 Estimate	Margin of Error
New Hampshire	\$68,988	+/- \$551	\$68,485	+/- \$579
Belknap County	\$60,727	+/- \$2,160	\$61,245	+/- \$2,189
Laconia	\$51,761	+/- \$3,507	\$48,893	+/- \$4,719
Franklin	\$47,296	+/- \$9,774	\$44,490	+/- \$3,944

Source: U.S. Census Bureau, American Community Survey, 5-Year Estimates
 Notes: Margin of error based on a 90 percent confidence level; all figures adjusted for inflation to 2016 dollars defined by the U.S. Census Bureau using CPI-U-RS

Household Income - One-Year Survey Data

Estimated Median Household Income by County

Estimates and Margins of Error for New Hampshire Counties, One-Year Data

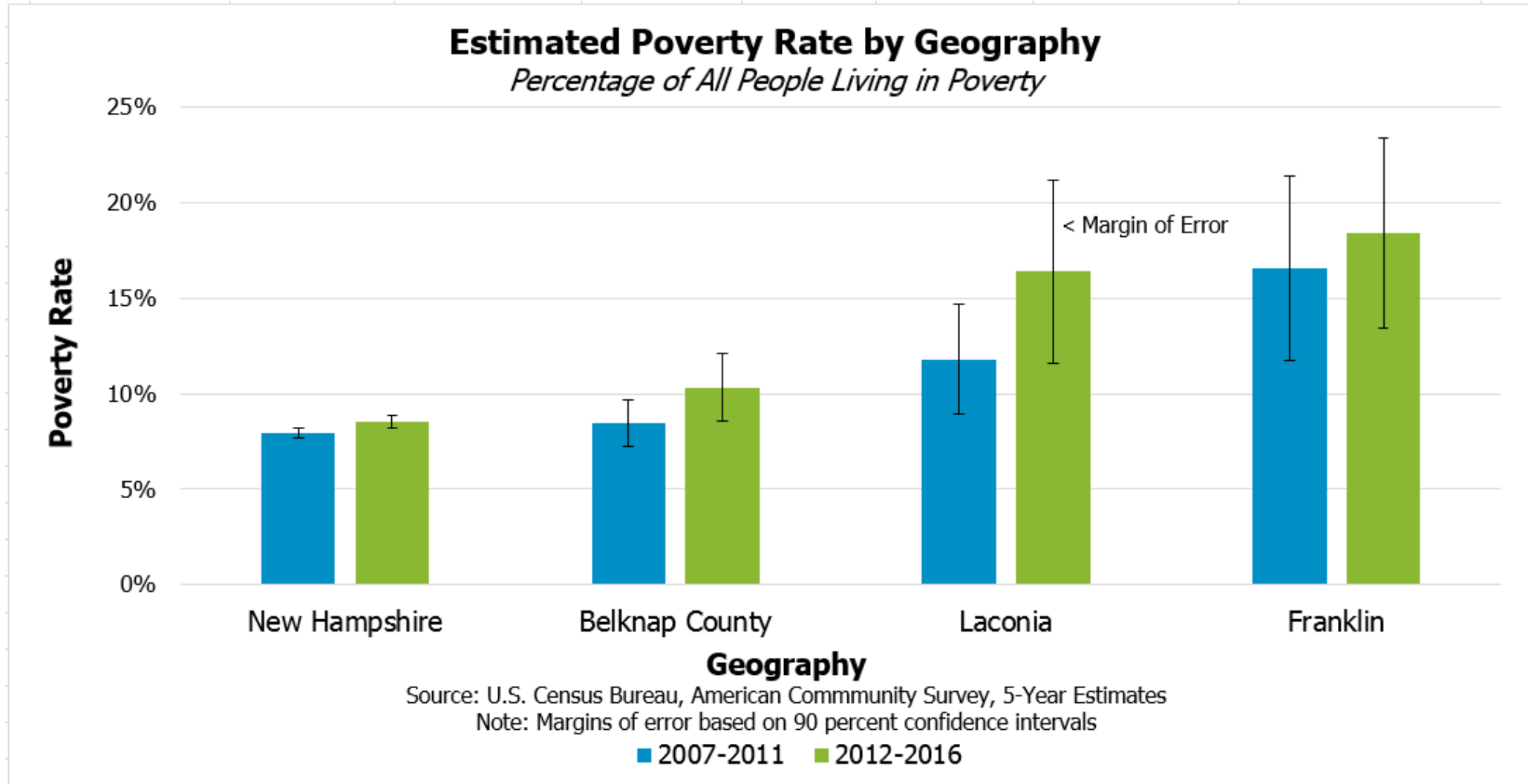


Source: U.S. Census Bureau, American Community Survey, 1-Year Supplemental Estimates

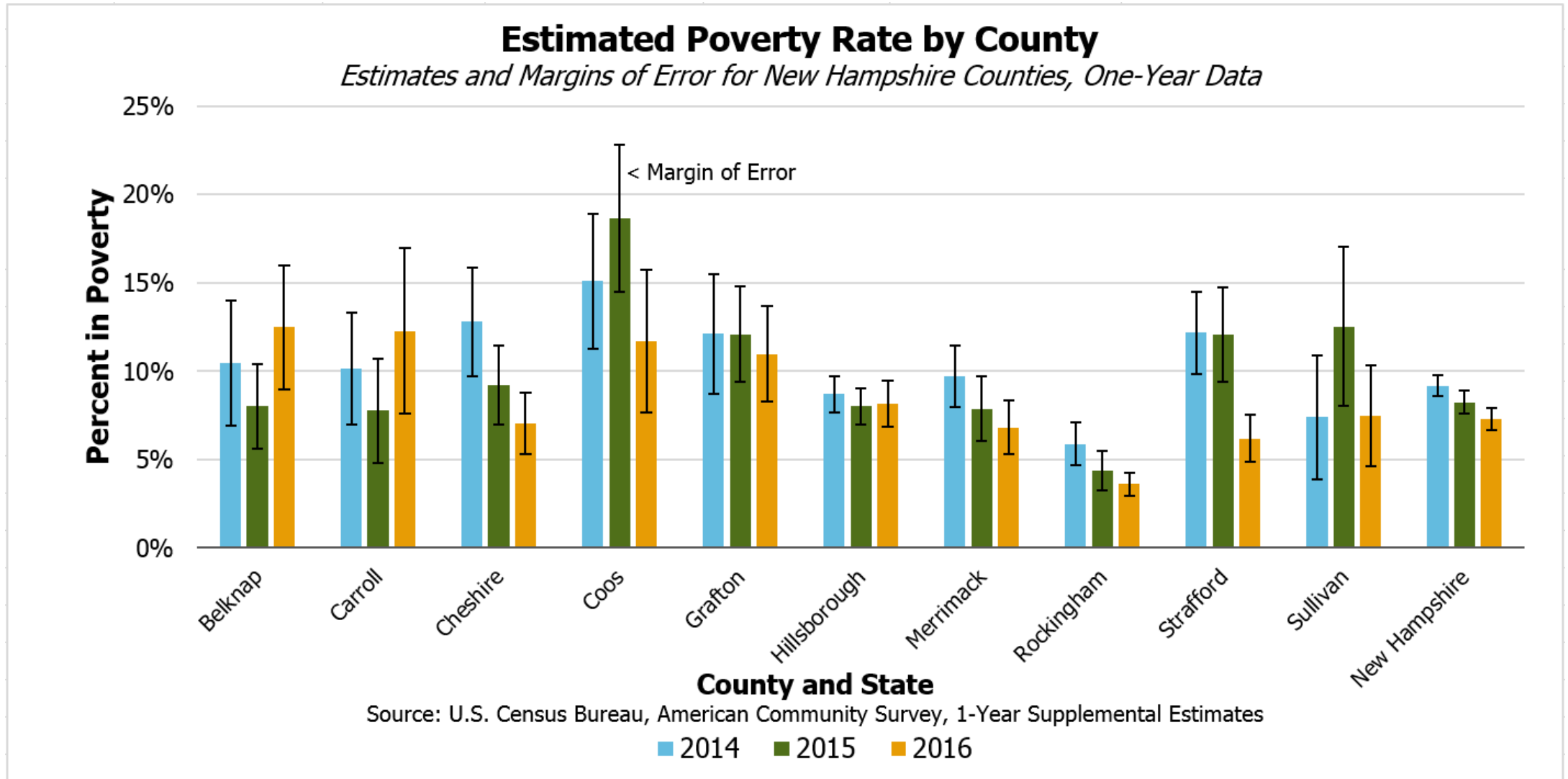
Note: No inflation adjustments

2014 2015 2016

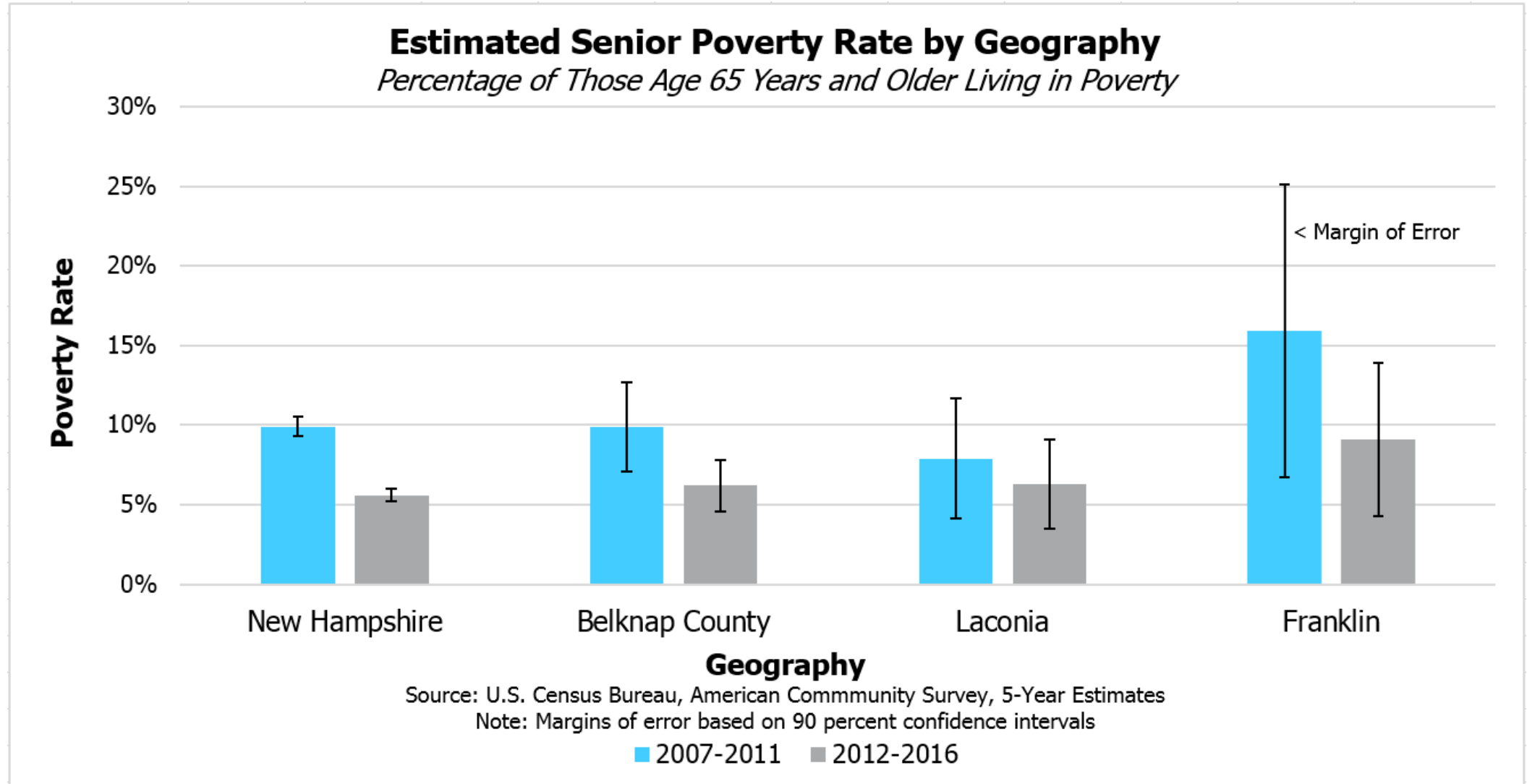
Poverty – Five-Year Survey Data



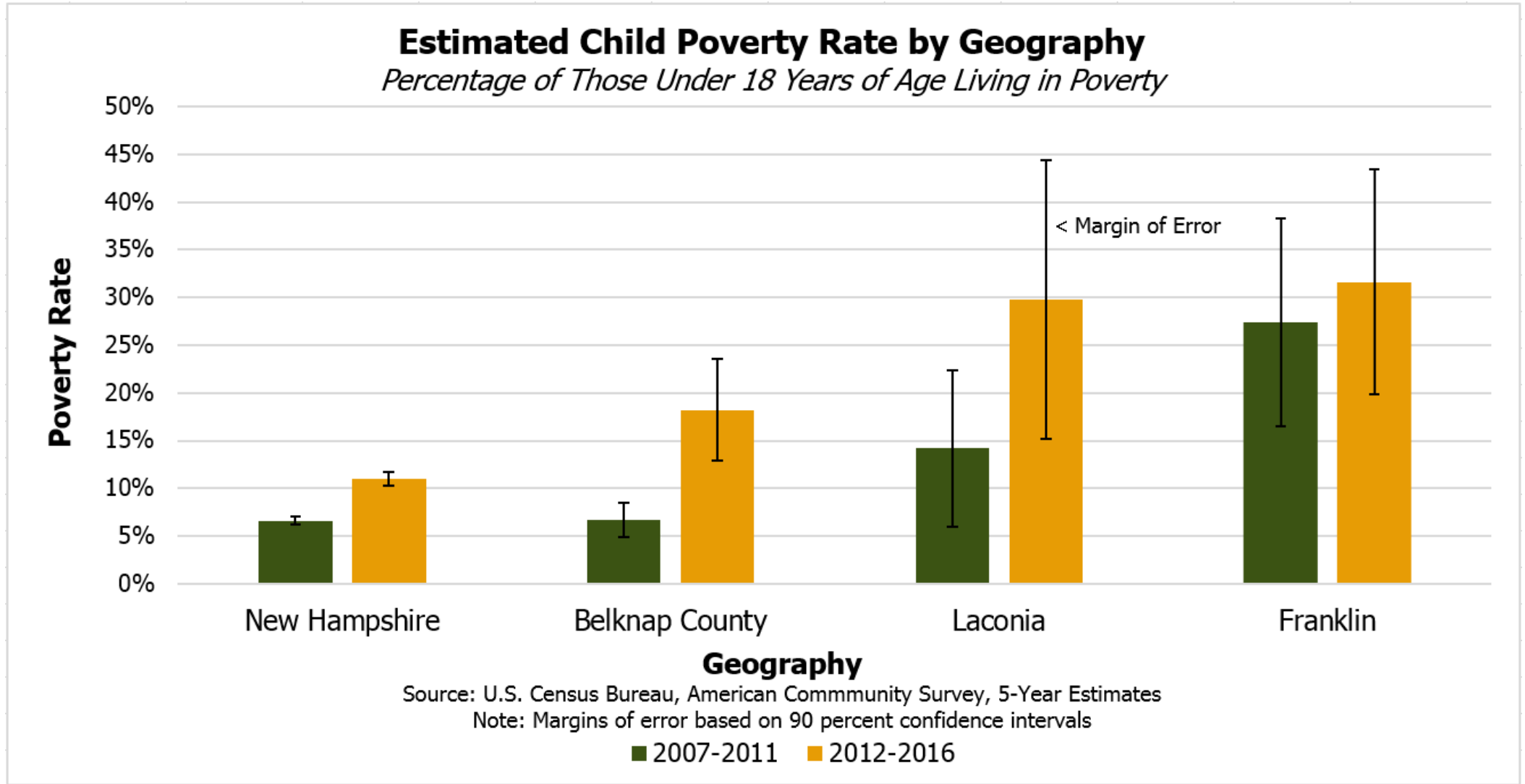
Poverty - One-Year Survey Data



Poverty by Group - Five-Year Survey Data



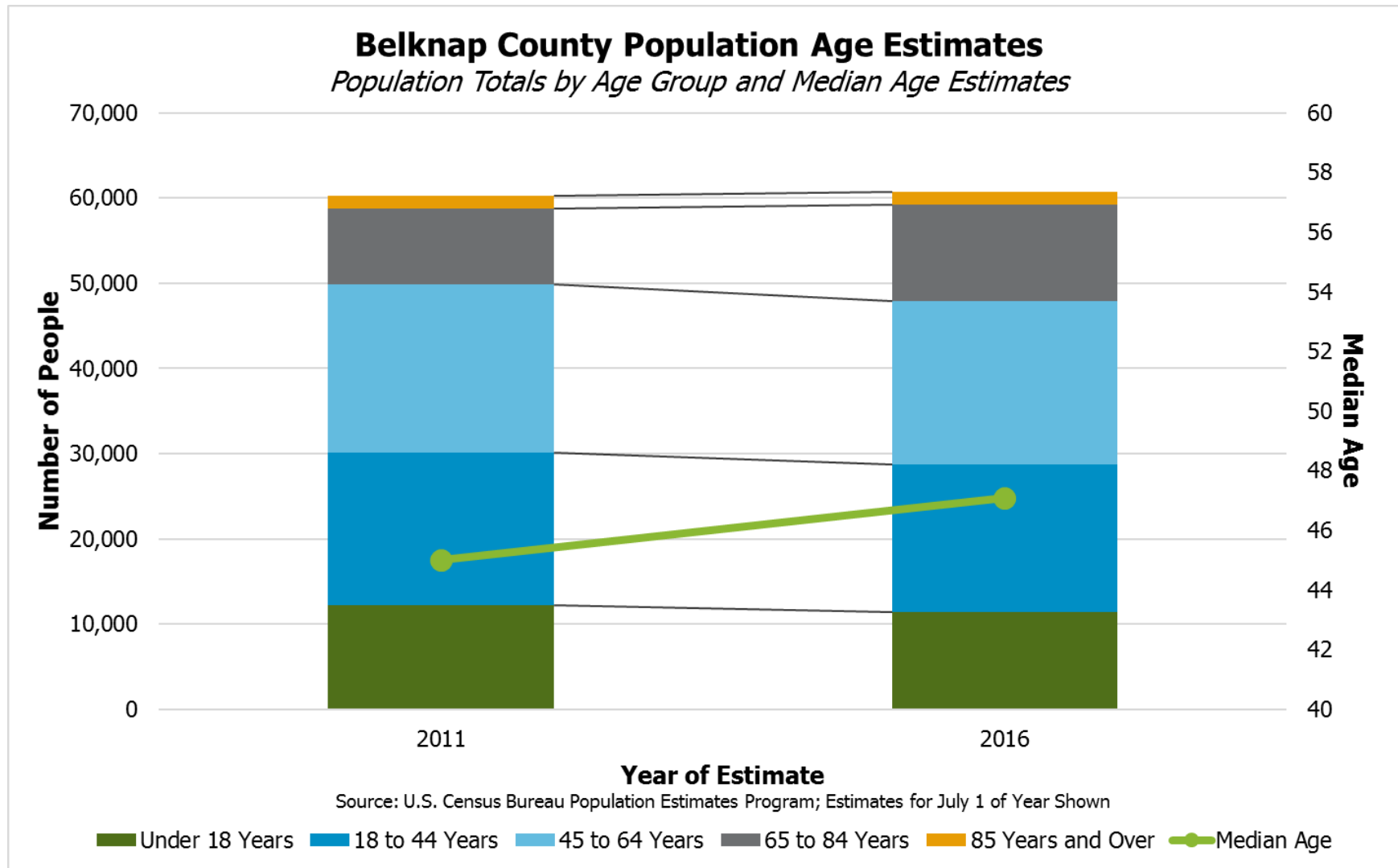
Poverty by Group – Five-Year Survey Data



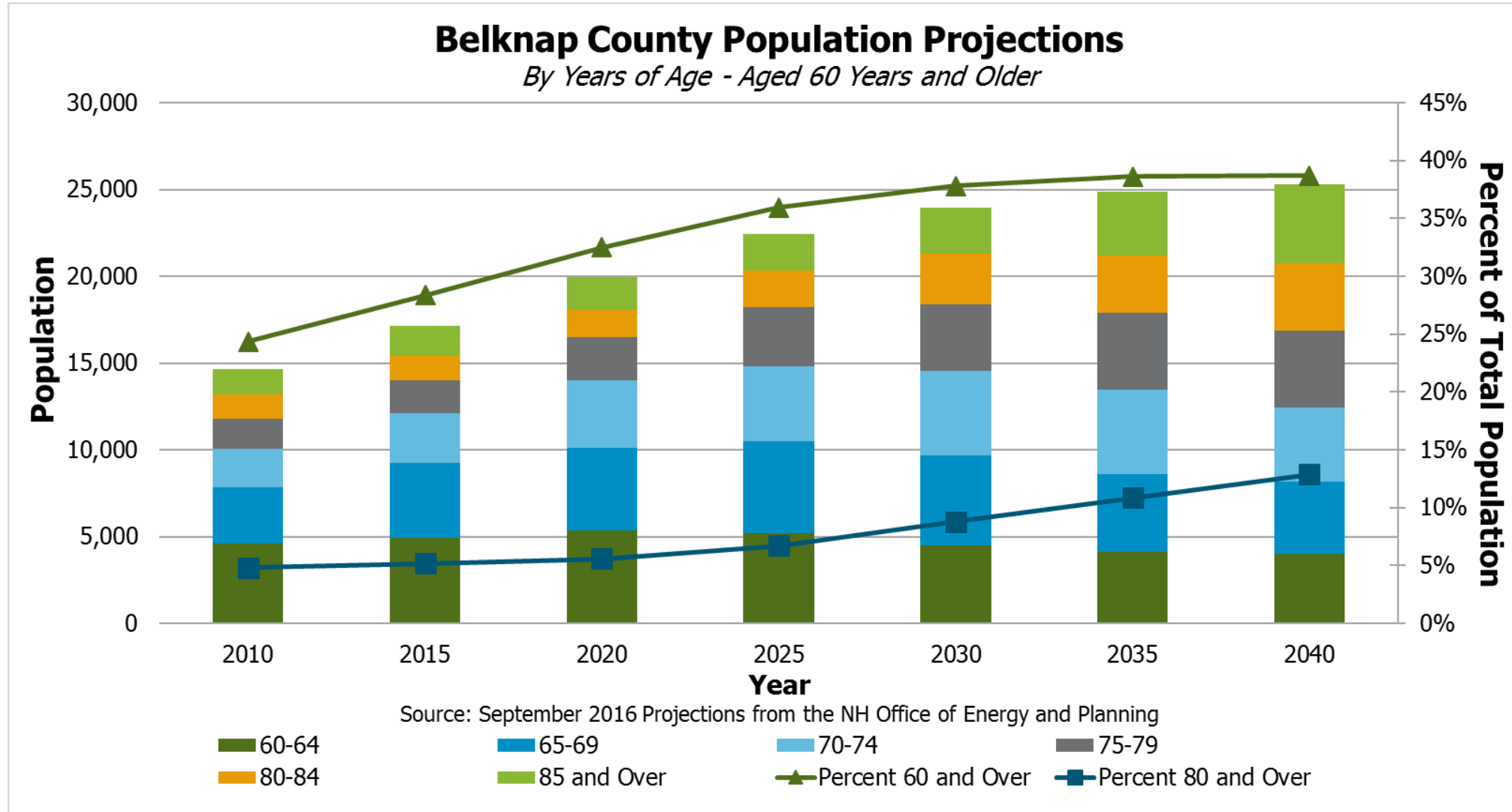
National School Lunch Program Data

Free and Reduced Price School Lunch Eligibility			
<i>Percent of Students Eligible by School District</i>			
District	2007-2008	2011-2012	2016-2017
Alton	16%	27%	27%
Barnstead	25%	34%	33%
Franklin	44%	56%	59%
Gilford	15%	19%	20%
Gilmanton	18%	22%	19%
Hill	32%	51%	34%
Inter-Lakes Cooperative	21%	32%	29%
Laconia	40%	55%	57%
Newfound Area	29%	38%	37%
Shaker Regional	23%	34%	34%
Winnisquam Regional	22%	36%	32%
Statewide	19%	27%	27%
Source: New Hampshire Department of Education, Division of Program Support Notes: Eligible students have family incomes at 185 percent of the federal poverty line or less; statewide counts do not include charter schools			

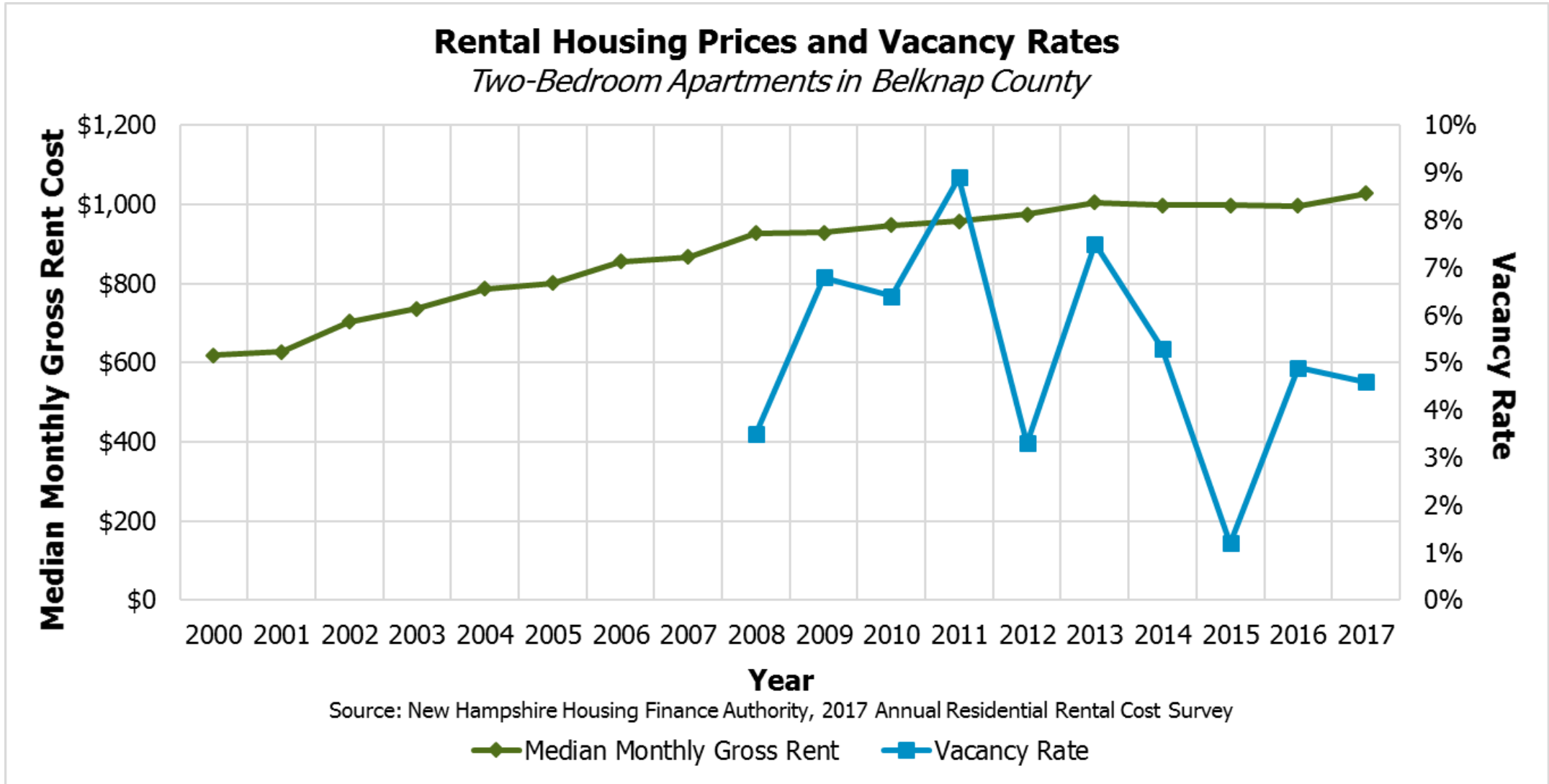
Demographic Changes



Demographic Projections



Housing Constraints



QUESTIONS?

Medicaid in New Hampshire

Serves Large Portion of State's Population

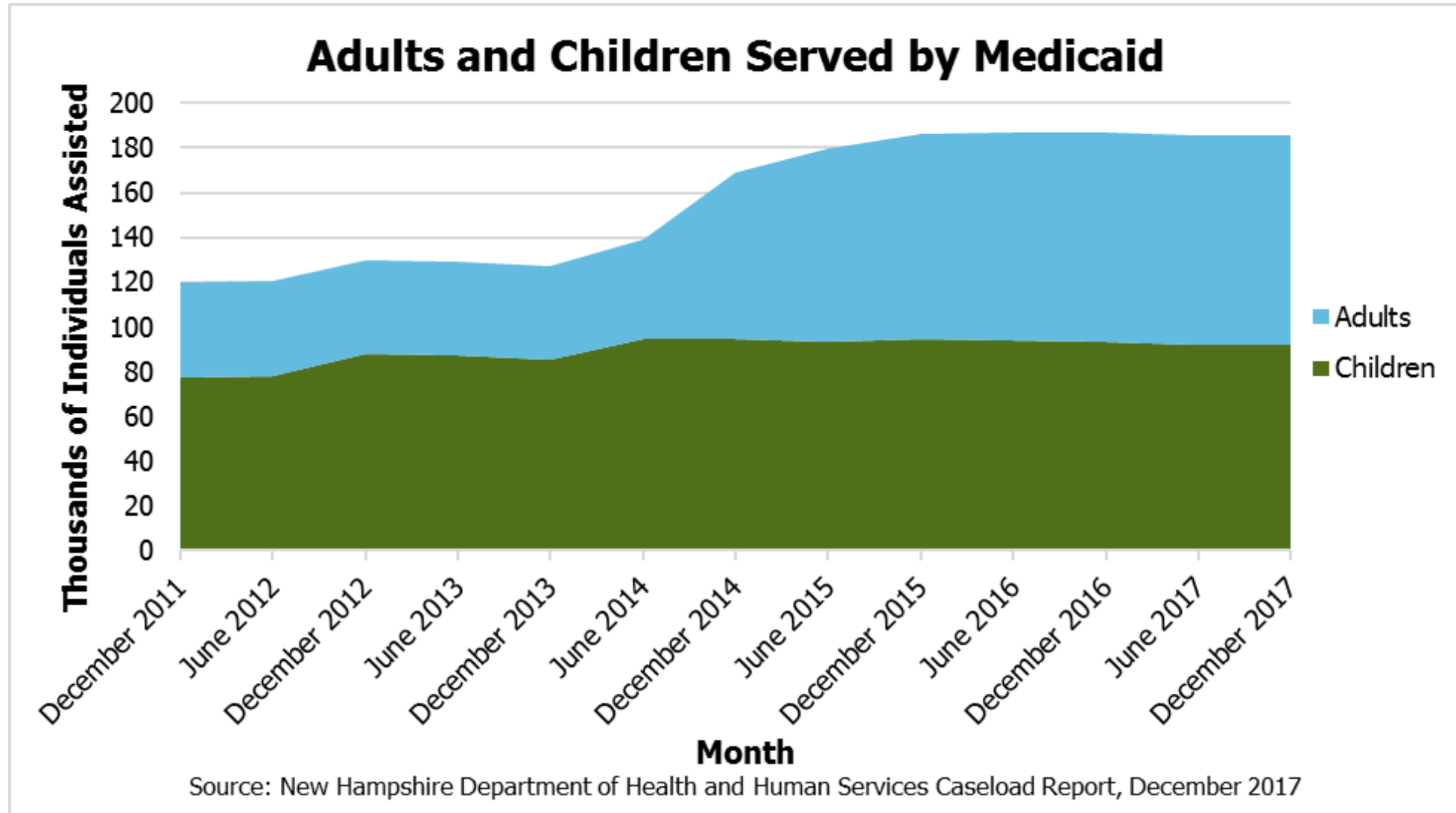
- As of December 31, 2017, total enrollment was 185,659 people, including:
 - *88,437 low-income children aged 18 and under*
 - *18,105 adults with disabilities and 1,454 children with severe disabilities*
 - *9,015 individuals aged 65 or older, including some with disabilities*
- Most are served through either managed care organizations (MCOs) or more traditionally-administered Medicaid run directly by the State (nursing homes, people with disabilities)

Partnership with Federal Government

- In all funds (State on-budget, State off-budget, federal), about \$2.0 billion in SFY 2016 was Medicaid, approximately 29 percent of all State spending
- Certain programs have different match rates, all at 50%-50% or better
- Recent federal proposals would have significantly reduced federal contributions

Sources: *New Hampshire Medicaid Enrollment Demographic Trends and Geography*, New Hampshire Department of Health and Human Services, December 2017; *Information Statement*, State of New Hampshire (Treasury Department), March 24, 2017.

Medicaid in New Hampshire



Medicaid Expansion – New Hampshire Health Protection Program

Enrollees

- The New Hampshire Health Protection Program helped ensure access to health care for more than 53,200 adults aged 19 to 64 (December 31, 2017)
- Qualifying requires incomes at or below 138 percent of the federal poverty guidelines
 - *\$16,754 for an individual, \$28,677 for a family of three (2018)*

Program Components

- Premium Assistance Program (PAP) uses Medicaid funds to pay for private sector health care premiums on the individual marketplace, although certain benefits are provided directly through fee-for-service Medicaid when not provided by private health insurance; 46,194 enrollees (December 31, 2017)
- Medically frail enrollees whose ability to perform daily activities are limited by their conditions or those who live in a long-term care facility, services provided through MCOs, not PAP; 7,028 enrollees (December 31, 2017)
- Health Insurance Premium Payment Program for low-income earners who receive health insurance through their employers, Medicaid provides assistance in paying premiums; 81 enrollees (August 1, 2017)

NHHPP Commission Recommendations

- Legislature established a “Commission to Evaluate the Effectiveness and Future of the Premium Assistance Program” in the 2016 NHHPP reauthorization
- Summary of recommendations (November 8, 2017):
 - *Reauthorize program for five years*
 - *Shift from PAP to MCO (minimizing impacts of medically frail on marketplace)*
 - *Raise reimbursement rates to providers for behavioral health services, consider higher rates for other services*
 - *Institute a transition period to avoid lapse in coverage*
 - *Increase case management services from MCOs to ensure continuity of care*
 - *Research further information on possible changes in levels to uncompensated care payments, Insurance Premium Tax revenue, and Medicaid Enhancement Tax revenue*

Ongoing Questions

- Reauthorization?
- Transition all PAP to MCO, keep PAP for some, or keep PAP for current population?
- Provider reimbursement rate changes?
- Paying for the State portion of the program?
 - *Federal government pays for 94 percent in 2018, 93 percent in 2019, and 90 percent in 2020 and after. Costs projected to change based on reimbursement rates (PAP vs. MCO).*
- Length of reauthorization period?
- Work requirements?
- Center for Medicare and Medicaid Services waivers?
- More information or analysis that might change the debate?

Timeline

- Current iteration of program expires December 31, 2018
- Work requirements as identified in statute require a federal waiver to be in place by April 30, 2018, and no federal waiver triggers notification of the program's end to recipients
- Legislative session scheduled to end by Memorial Day, but likely a decision well before then to give insurers time to set rates

Additional NHFPI Resources

- 5th Annual Conference, Building a Strong Foundation for a Prosperous Economy, February 23, 2018, at the Grappone Conference Center in Concord: <http://nhfpi.org/news-events/policy-conference-2018>
- New Hampshire's Numbers: 2016 Census Bureau Estimates for Income, Poverty, Housing Costs, and Health Insurance Coverage: <http://nhfpi.org/research/state-economy/new-hampshire-2016-census-bureau-estimates.html>
- Interpreting the Significance of the October County Census Data Release: <http://nhfpi.org/commoncents/interpreting-significance-october-county-census-data-release.html>
- Medicaid Expansion Work Requirements Hinge on Federal Approval: <http://nhfpi.org/commoncents/medicaid-expansion-work-requirements-hinge-on-federal-approval.html>
- Medicaid Assists More Than 185,000 New Hampshire Residents: <http://nhfpi.org/commoncents/medicaid-assists-more-than-185000-new-hampshire-residents.html>
- Demographic Changes Likely to Increase Demand for Medicaid: <http://nhfpi.org/commoncents/demographic-changes-likely-to-increase-demand-for-medicaid.html>
- NHFPI Common Cents blog: <http://nhfpi.org/commoncents>



THANK YOU FOR YOUR TIME

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