

Profile of Ohio's Medicaid-Enrolled Adults and Those who are Potentially Eligible

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OMAS

Ohio Medicaid Assessment Survey

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EXECUTIVE SUMMARY

The primary objective of this chartbook is to describe the population of non-elderly adults who are currently enrolled in Medicaid and those who are potentially eligible using data from the 2015 Ohio Medicaid Assessment Survey (OMAS). Four Medicaid eligibility groups are used throughout this chartbook: Enrolled and Newly Eligible, Enrolled and Oldly Eligible, Potentially Newly Eligible and Not Enrolled, Potentially Oldly Eligible and Not Enrolled.

For this population, this chartbook profiles insurance status (among the potentially eligible), health care access, unmet health needs, health status, and substance use. Key findings from this analysis included:

- The enrolled and oldly eligible were least likely to report unmet health care need and difficulty accessing care.
- The percentage of currently Medicaid-enrolled adults (both newly and oldly eligible) who had a routine medical visit, ≥ 1 ER visit, or ≥ 1 hospital admission in the past year was higher than the corresponding percentage among the potentially eligible but not enrolled populations.
- The enrolled and newly eligible group had higher unmet needs compared to the currently enrolled, oldly eligible population. In contrast, this newly eligible group had better health compared to these oldly eligible enrollees.

These differences in unmet need may be due in part to the oldly eligible having Medicaid coverage longer, on average, than the newly eligible, who may not have realized the full benefits of their relatively new coverage. Additionally, those newly eligible may have had high levels of unmet needs before getting coverage.

Non-elderly adults, who remain potentially eligible for but not enrolled in Medicaid, were healthier than their enrolled counterparts. Their comparatively better health likely contributes to their higher rates of employment.

This chartbook also examines women of reproductive age (19 through 44 years) with respect to their pregnancy status, and breastfeeding intentions of currently pregnant women. The percentage of women who were currently pregnant or pregnant in the past year was highest among those who were potentially oldly eligible but not enrolled.

Visit grc.osu.edu/OMAS for additional information about OMAS, including the data and electronic version of this chartbook.

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BACKGROUND

The Affordable Care Act (ACA) extended healthcare coverage to millions of Americans through a variety of avenues. One strategy states had for increasing access to health insurance was expanding Medicaid coverage to more low-income adults (Kaiser Family Foundation, 2013).

Previous research has shown that adults who are potentially eligible for Medicaid coverage are often healthier than those already on Medicaid. In a 2013 study of individuals on Medicaid compared to a national sample of potentially eligible individuals, uninsured low-income adults who were going to be potentially eligible to enroll in Medicaid under the ACA had a lower prevalence of many chronic conditions (Decker et al. 2013).

Ohio expanded Medicaid coverage in January 2014 to all non-senior adults (ages 19 through 64), regardless of their parental status, with family incomes at or below 138% of the Federal Poverty Level (FPL). Pregnant women with incomes $\leq 200\%$ FPL remained eligible for Medicaid coverage.

Adults who have enrolled under these expanded eligibility criteria are termed the “newly eligible” group, while those

who are enrolled under pre-2014 criteria are termed “oldly eligible.” As of June 2015, more than 631,487 newly eligible adults have enrolled (Centers for Medicare and Medicaid Services, 2016). As of February 2016, Ohio Medicaid currently covers approximately 1,538,163 non-senior adults in total, representing about 22% of Ohio’s non-senior adult population.

The wealth of health and healthcare-related data available in the 2015 OMAS allows for the comparison of Ohio’s newly and oldly eligible Medicaid enrollees on numerous measures including demographics, health care access, unmet needs and health status. Additionally, individuals can also be compared based on insurance status. Many uninsured adults in Ohio are eligible for Medicaid coverage under either the new or old eligibility criteria. The 2015 OMAS collected household income and family size data. When coupled with insurance type and status, these data support estimates of individuals who may be eligible for Medicaid but are not currently enrolled. Given the potential for these individuals to also enroll in Ohio Medicaid, there is value in profiling their health and health needs.

OBJECTIVES

The primary objective of this chartbook is to describe the population of adults who are currently enrolled in Medicaid and those who are potentially eligible. Each of these groups are further stratified by whether they are newly or oldly eligible for Medicaid coverage.

The measures of interest include:

1. Demographics;
2. Insurance Status, among the potentially eligible;
3. Health Care Access, including barriers to healthcare and routine health care use;
4. Unmet Health Needs, specifically unmet dental, vision, mental health, and prescription needs;
5. Health Status, including current health status, mental health-related impairment, chronic health conditions, and disability and special health care needs; and,
6. Substance Use, including smoking status, binge drinking, and misuse of prescription drugs.

This chartbook also describes the health and health status of women of reproductive age (19 through 44 years). As with the primary analysis, this analysis is stratified by current versus potentially eligible and newly versus oldly eligible.

In addition to presenting data on the demographics of this population, this chartbook profiles:

1. Pregnancy status, including pregnancy in the past year and currently pregnant; and,
2. Intention to breastfeed among women who are currently pregnant.

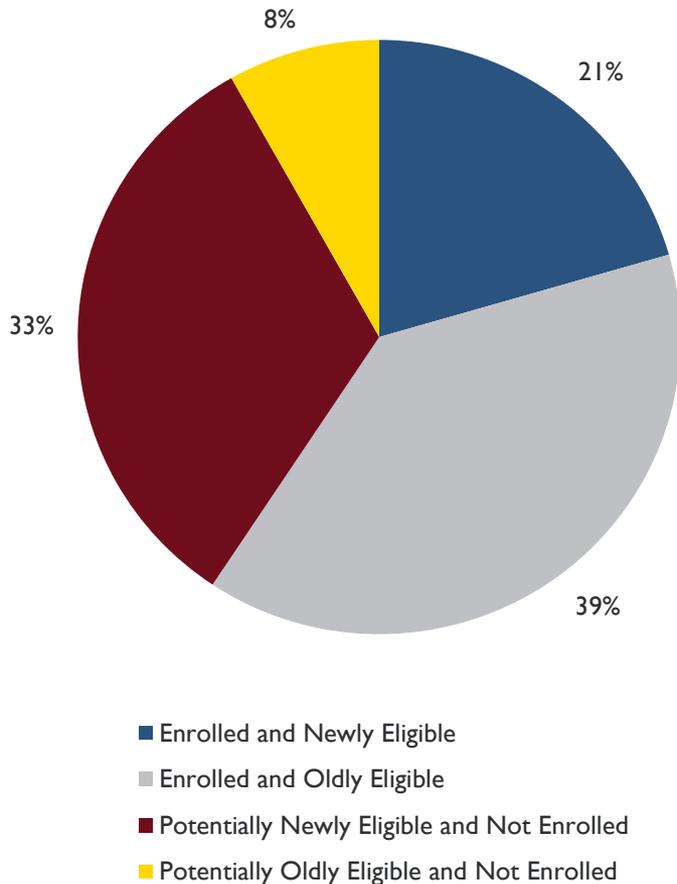
METHODS

The Ohio Medicaid Assessment Survey (OMAS) is a population-based survey that examines access to the health system, health status, and health determinant characteristics of Ohio's Medicaid, Medicaid eligible, and non-Medicaid child and adult populations. The 2015 OMAS used a random stratified dual-frame telephone survey design to collect data from samples representative of all non-institutionalized Ohio residents. This survey included both landline and cell phone frames. The landline sampling was based upon a list-assisted stratified random digit dial (RDD) procedure. African-Americans, Asians, and Hispanics were oversampled in landline sampling. The cell phone sampling was a stratified random sample of cell phone numbers by the county in which their cellphone was activated, with oversampling of African-Americans.

From January through June 2015, trained telephone interviewers administered the OMAS to 42,876 adult Ohio residents, with 16,453 complete in the landline sample and 26,423 completed in the cell phone sample. For landline telephone numbers, households were randomly selected through a list assisted 1+block RDD method. Upon reaching the household, the interviewer selected an eligible adult age

19 years and older who had the most recent birthday to complete the adult component of the survey. For cellphone telephone numbers, persons were randomly selected through a random sample of cellphone numbers in eligible 1,000-blocks. Upon reaching a person, the interviewer asked the predominant user of the cellphone, if he/she was 19 years or older, to complete the adult component of the survey. If the predominant user of the cellphone was under 19 years old, the telephone number was ineligible for the survey. When a respondent indicated that there was one or more children age 0-18 years in the household, the interviewer selected the child who had the most recent birthday. In landline sample, the adult who was most knowledgeable of the selected child completed the child component of OMAS on behalf of the child; in cellphone sample, the adult who completed the adult section also completed the child section. There were 10,122 respondents to the child portion of the survey. The overall response rate for the survey was 24.1%, including a 25.8% response rate for the landline sample and 22.9% for cell phone sample. A detailed description of the survey methodology can be found at www.grc.osu.edu/OMAS.

MEDICAID ELIGIBILITY



Four Medicaid eligibility groups are used throughout this chartbook*:

- **Enrolled and Newly Eligible:** Non-elderly adults (19-64 years) enrolled in Medicaid who are eligible under post-expansion criteria (Weighted N=512,761)
- **Enrolled and Oldly Eligible:** Non-elderly adults enrolled in Medicaid who are eligible under pre-expansion criteria (Weighted N=969,104)
- **Potentially Newly Eligible and Not Enrolled:** Non-elderly adults not enrolled in Medicaid who are eligible under post-expansion criteria (Weighted N=812,308)
- **Potentially Oldly Eligible and Not Enrolled:** Non-elderly adults not enrolled in Medicaid who are eligible under pre-expansion criteria (Weighted N=203,835)

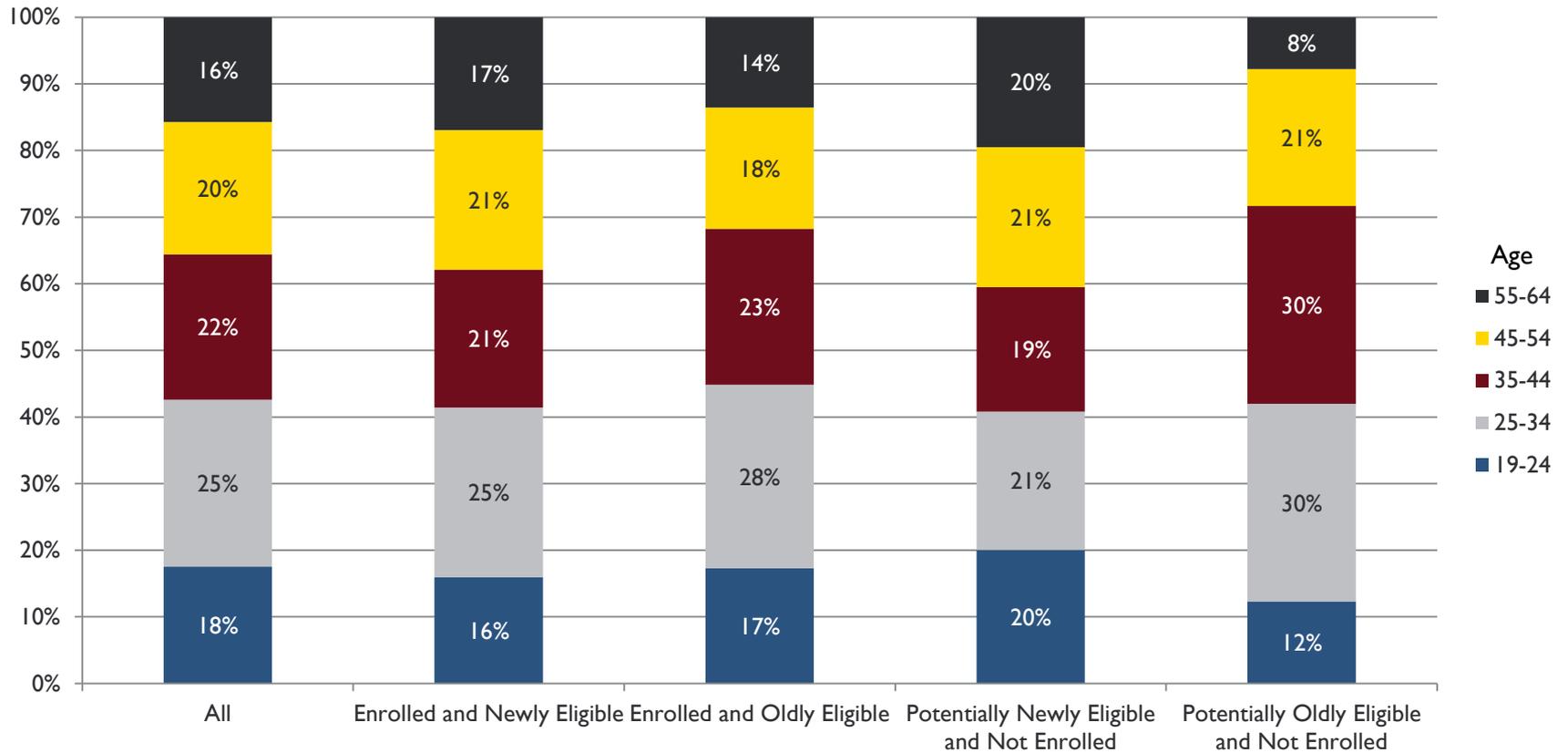
*A description of the four groups is located in the Appendix.

STUDY POPULATION

Newly and Oldly Eligible Medicaid Adults

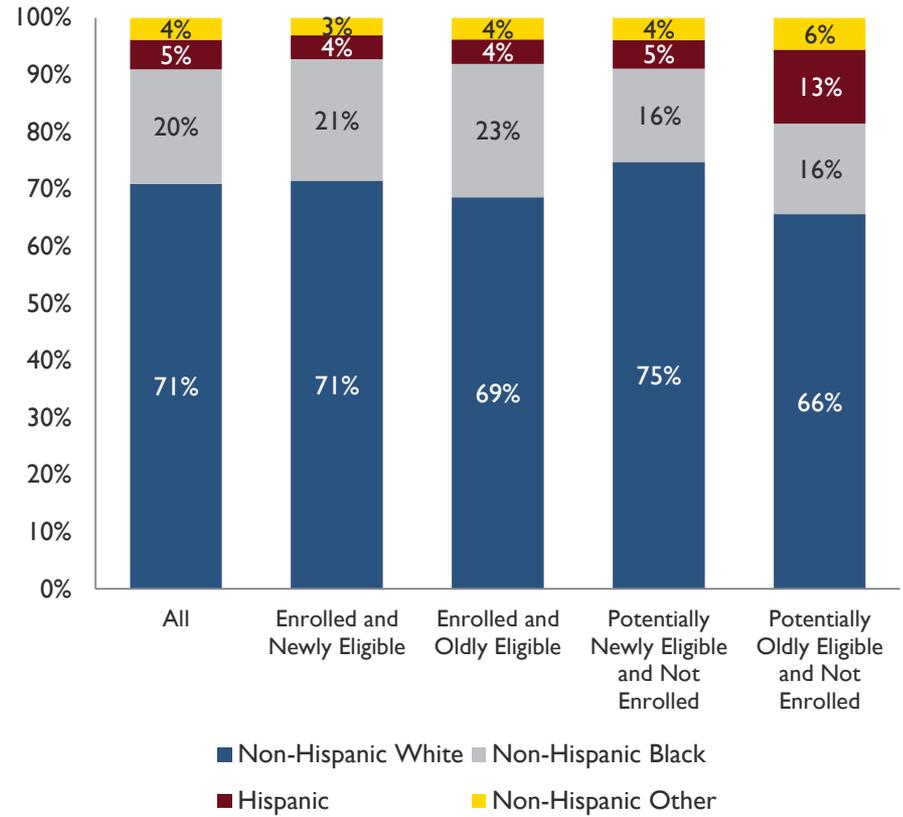
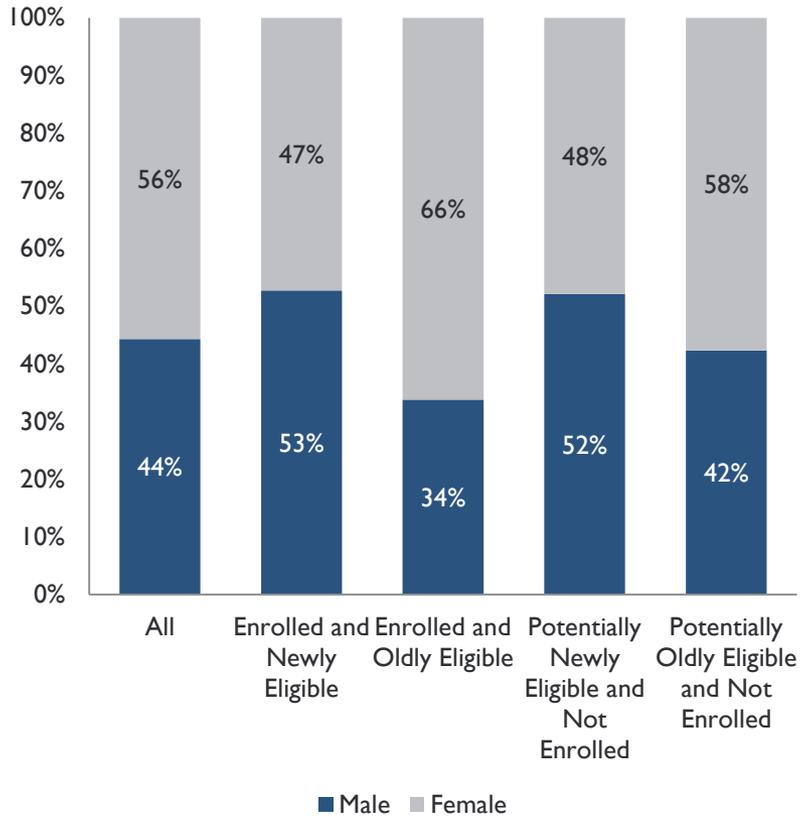
The primary population of interest is adults aged 19 through 64 years. Results are presented for all of this population and stratified by the four Medicaid eligibility groups.

AGE



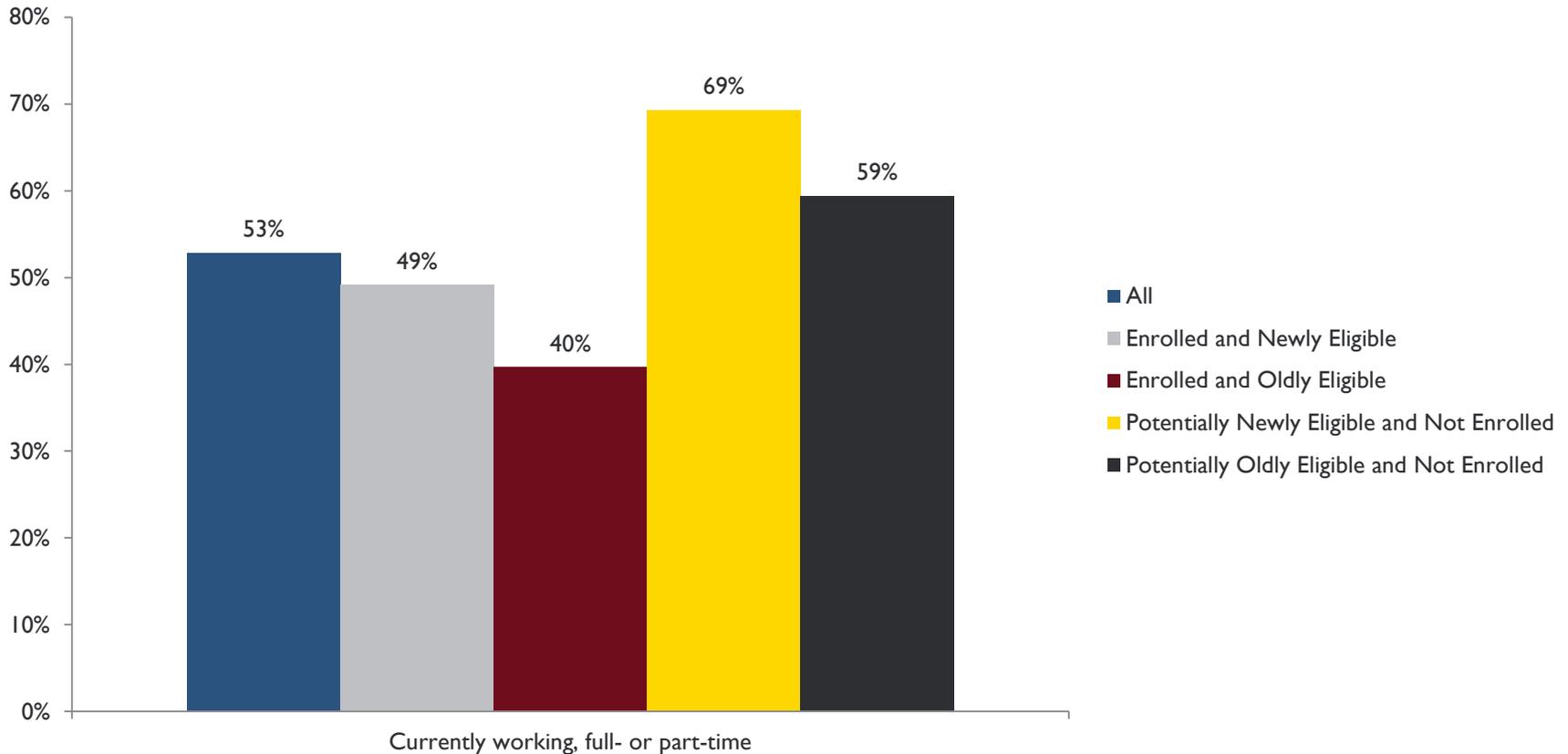
There are differences in age distribution between potential newly and oldly eligible unenrolled non-elderly adults; specifically, those oldly eligible and not enrolled appear to be younger than those potentially newly eligible and unenrolled.

GENDER AND RACE/ ETHNICITY



The gender distribution is fairly balanced among all groups, except the enrolled and oldly eligible adults, where two-thirds are female. The enrolled and oldly eligible group includes all currently pregnant women with incomes $\leq 200\%$ FPL. Ohio Medicaid covers a disproportionate share of Ohio's Non-Hispanic Black, Hispanic, and Non-Hispanic other populations: 25-35% of Medicaid's current or potentially eligible non-elderly population is minority, compared to 21% of all Ohioans age 19-64 years.

WORKING STATUS



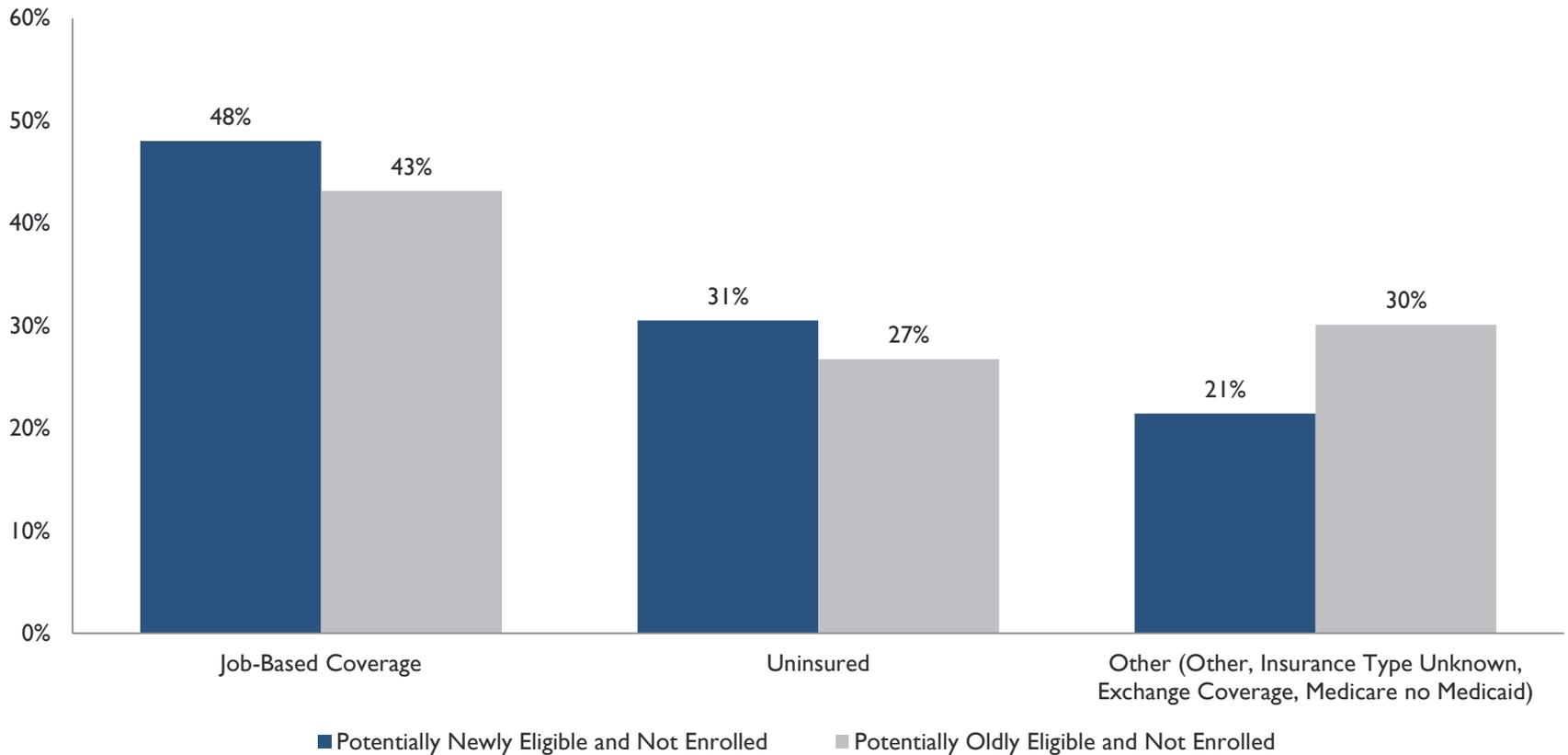
In the general Ohio population aged 19-64 years, an estimated 70% of non-elderly adults were working a full- or part-time job. Similarly, 69% of the potentially newly eligible and 59% of the potentially oldly eligible but not enrolled populations were currently working. Among the currently enrolled population, half of the newly eligible population worked a full- or part-time job in the last week.

RESULTS

SECTION I: INSURANCE STATUS

This first section explores insurance status among all adults 19 through 64 years who are potentially eligible for Medicaid.

1.1 TYPE OF INSURANCE COVERAGE AMONG POTENTIALLY MEDICAID ELIGIBLE NON-ELDERLY ADULTS



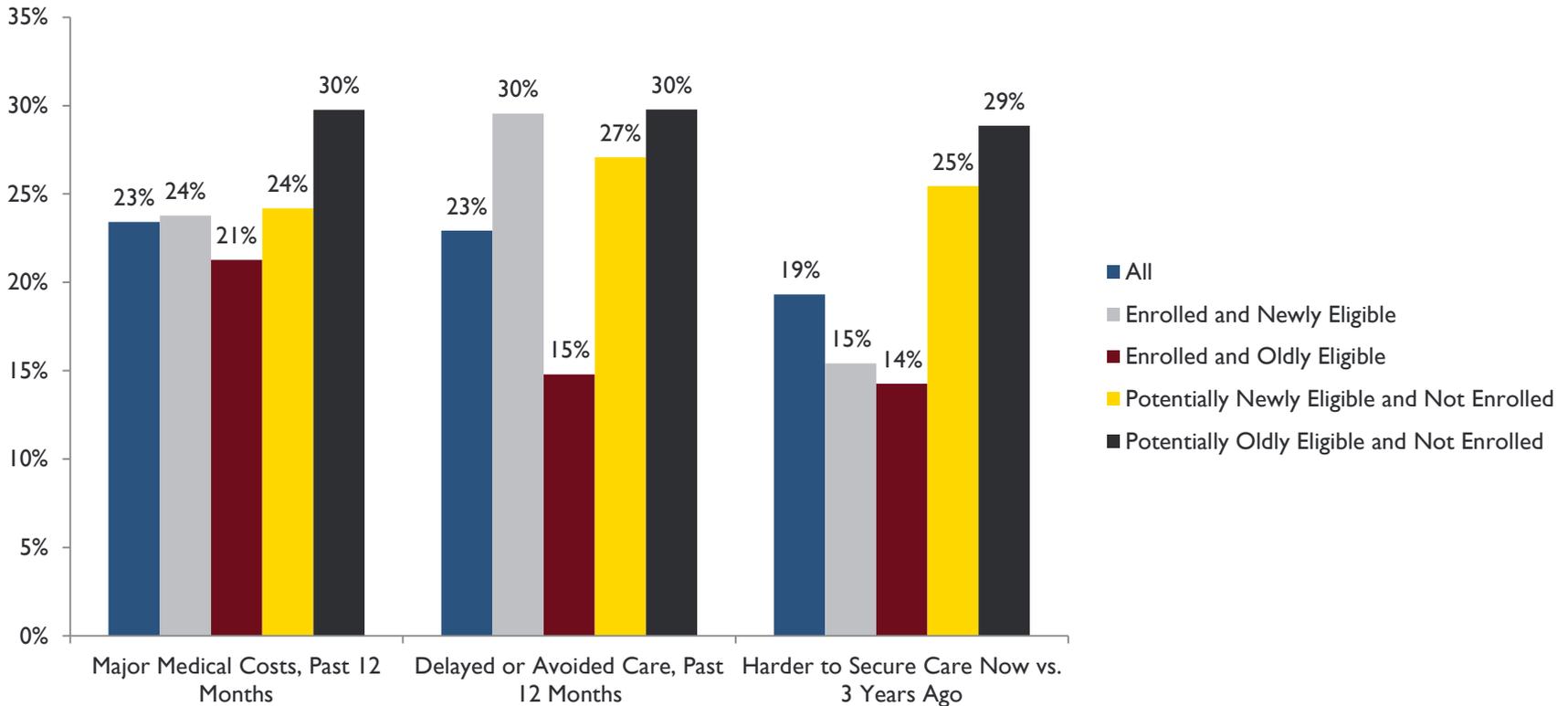
The most common type of insurance among both potentially Medicaid eligible groups was job-based coverage. About 20% of the potentially newly eligible and 30% of the potentially oldly eligible populations had some other form of health insurance coverage.

RESULTS

SECTION 2: HEALTH CARE ACCESS

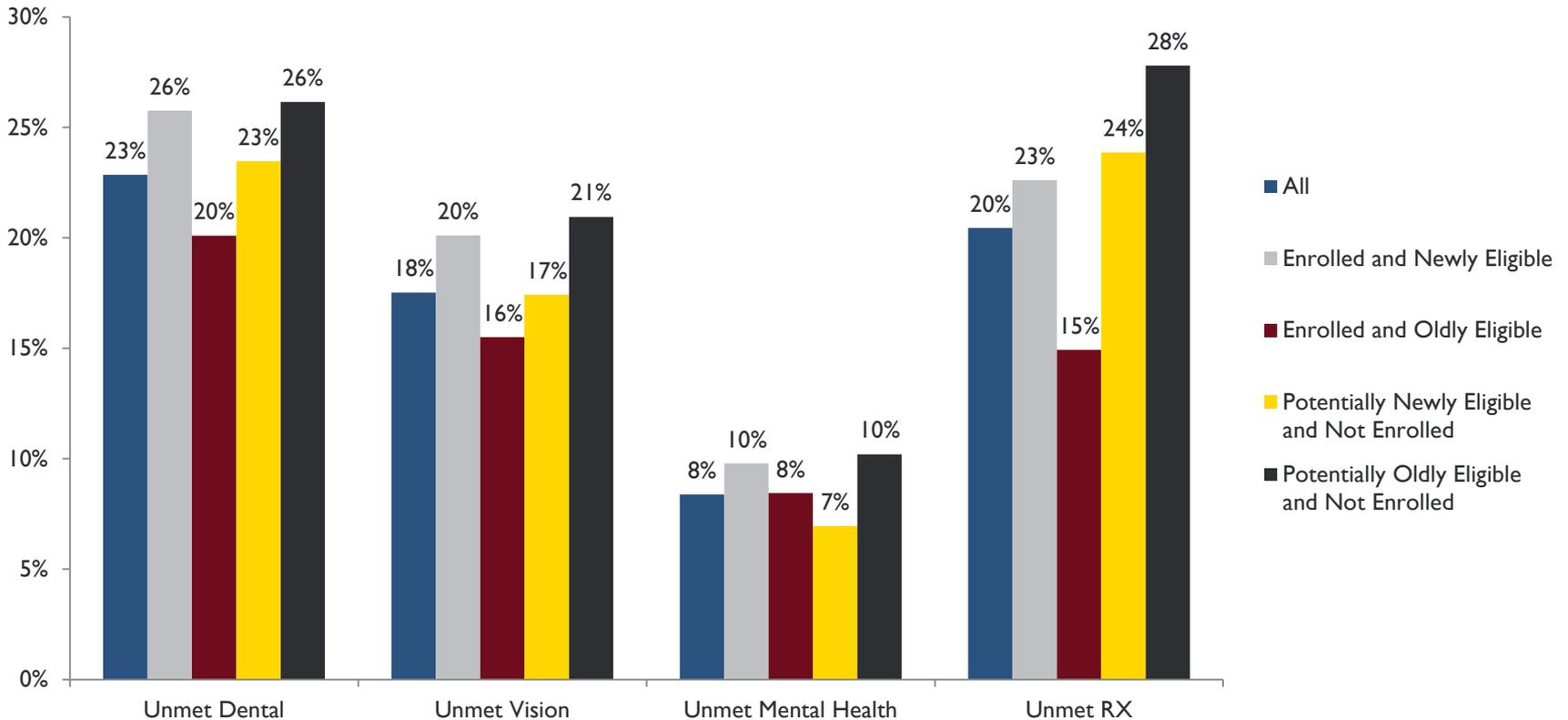
This section profiles difficulties accessing care, unmet needs, and healthcare utilization patterns among all adults 19 through 64 who are currently covered by or potentially eligible for Medicaid.

2.1 BARRIERS TO RECEIVING HEALTH CARE



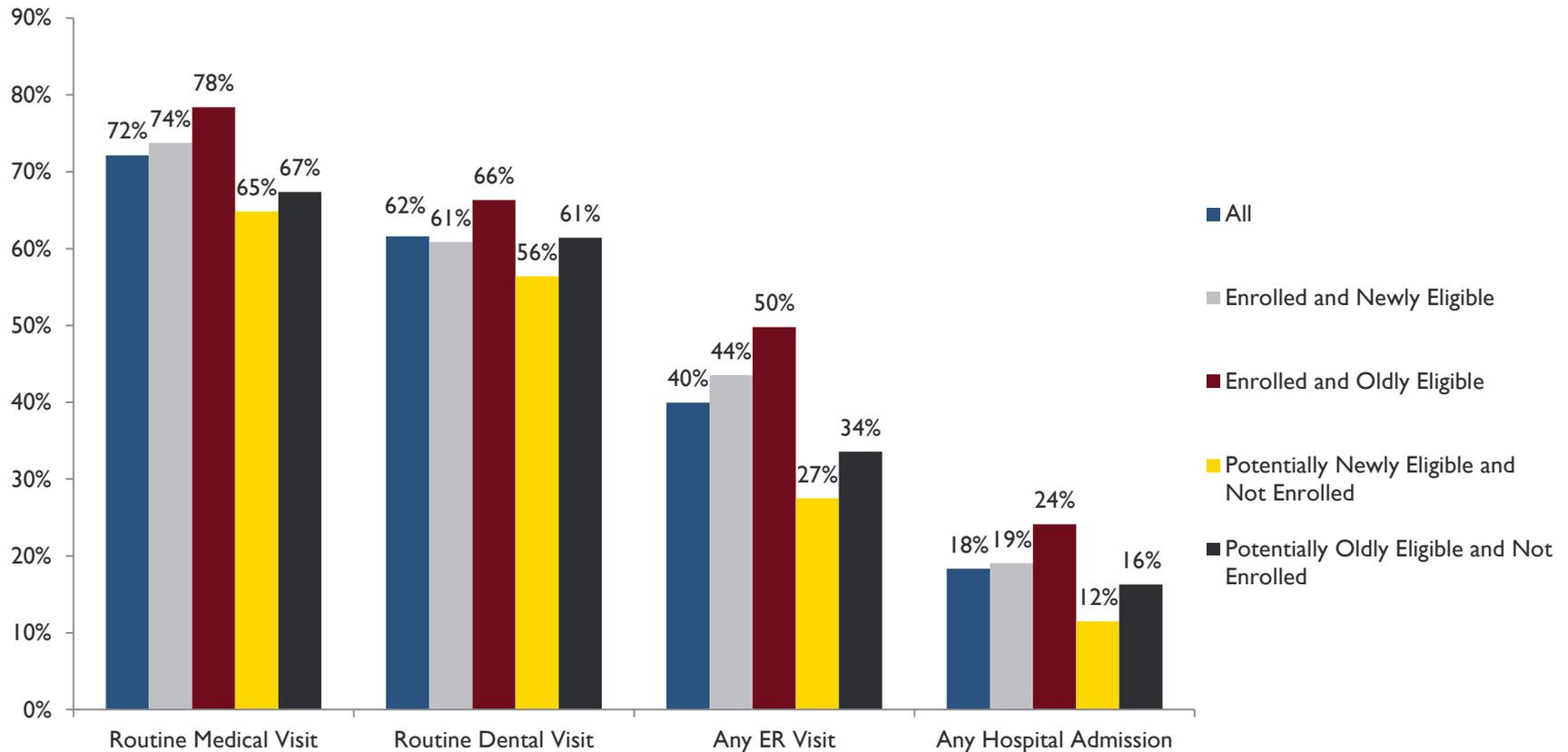
Among the groups, the percentage experiencing barriers to receiving health care was generally highest among those potentially oldly eligible and not enrolled and lowest among those enrolled and oldly eligible. Among those currently enrolled in Medicaid, a higher percentage of the newly eligible population reported having barriers than the oldly eligible, but the most substantial difference was in the percentage who delayed or avoided care in the past 12 months. Many of those who were enrolled and oldly eligible had Medicaid coverage longer than those in the newly eligible and enrolled population and consequently, may have better established care.

2.2 UNMET HEALTH NEEDS, PAST YEAR



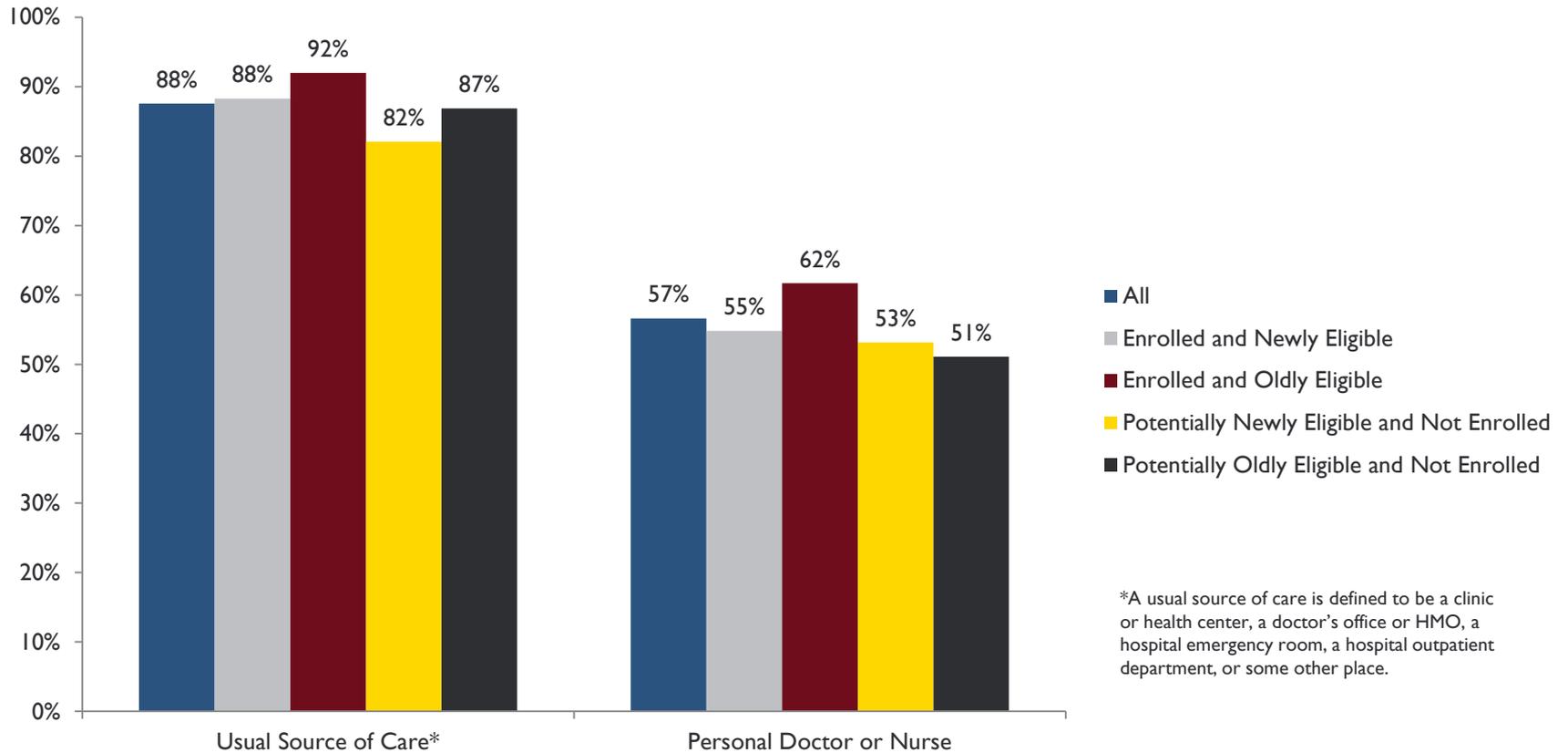
Generally, those enrolled and oldly eligible for Medicaid report the fewest unmet health needs and those potentially oldly eligible and not enrolled report the highest unmet needs. Between 20-26% of non-elderly low-income adults report unmet dental needs and 16-21% report unmet vision needs. There was much less variation in the percentage reporting an unmet mental health need. The greatest variation was observed in unmet prescription needs, where 15-28% of non-elderly low-income adults reported an unmet need in the past year.

2.3 HEALTHCARE UTILIZATION



The percentage of currently Medicaid-enrolled adults (both newly and oldly eligible) who had a routine medical visit, at least one ER visit, or at least one hospital admission in the past year was higher than the corresponding percentage among the potentially newly and oldly eligible but not enrolled populations. The prevalence of having a routine dental visit in the past year was more similar across the four groups.

2.4 ROUTINE HEALTH CARE



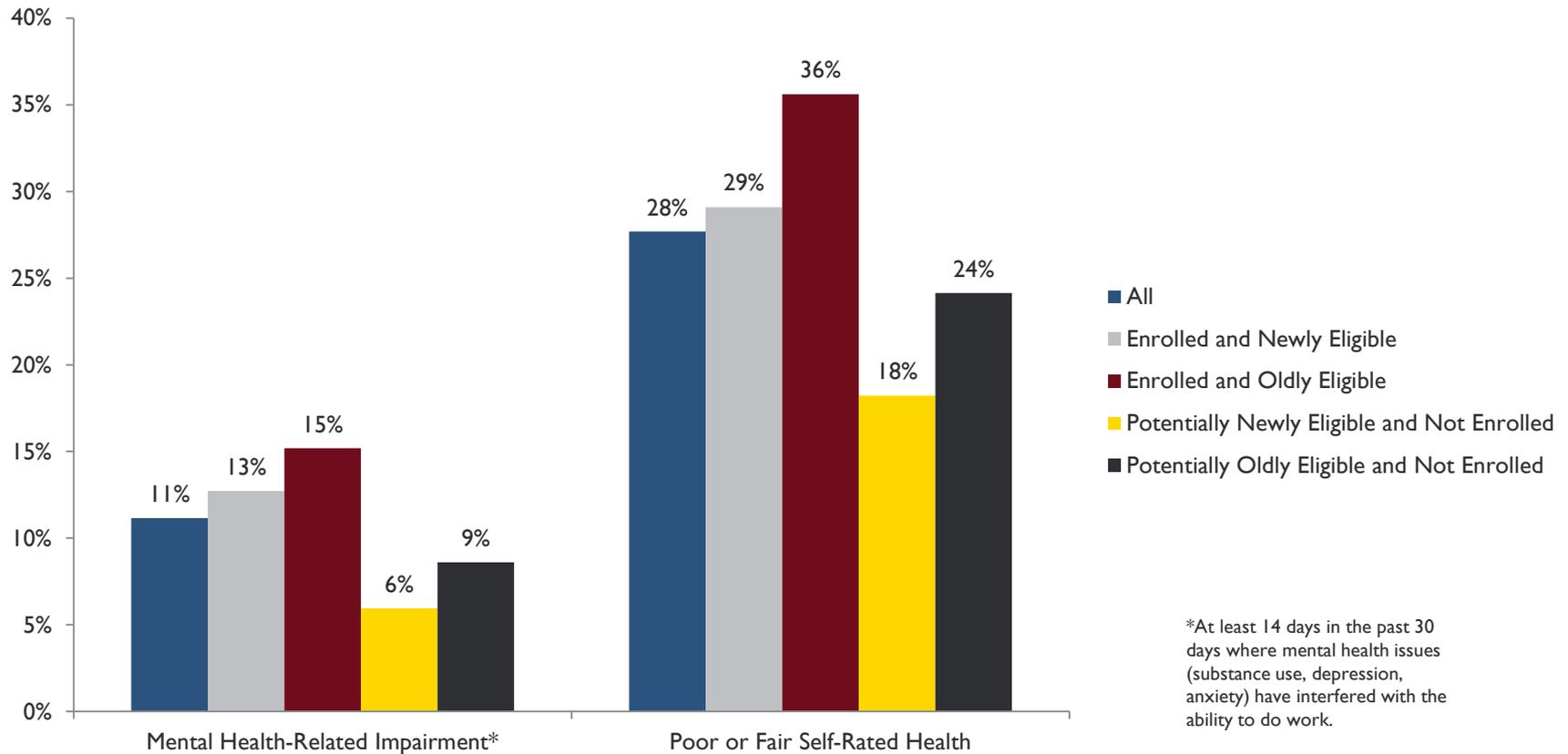
Over 85% of all non-elderly Medicaid-enrolled or potentially Medicaid-eligible adults report having a usual source of care and a little over half have a personal doctor or nurse. Although these percentages were highest among the enrolled and oldly eligible population, there was not much variation across groups.

RESULTS

SECTION 3: HEALTH STATUS

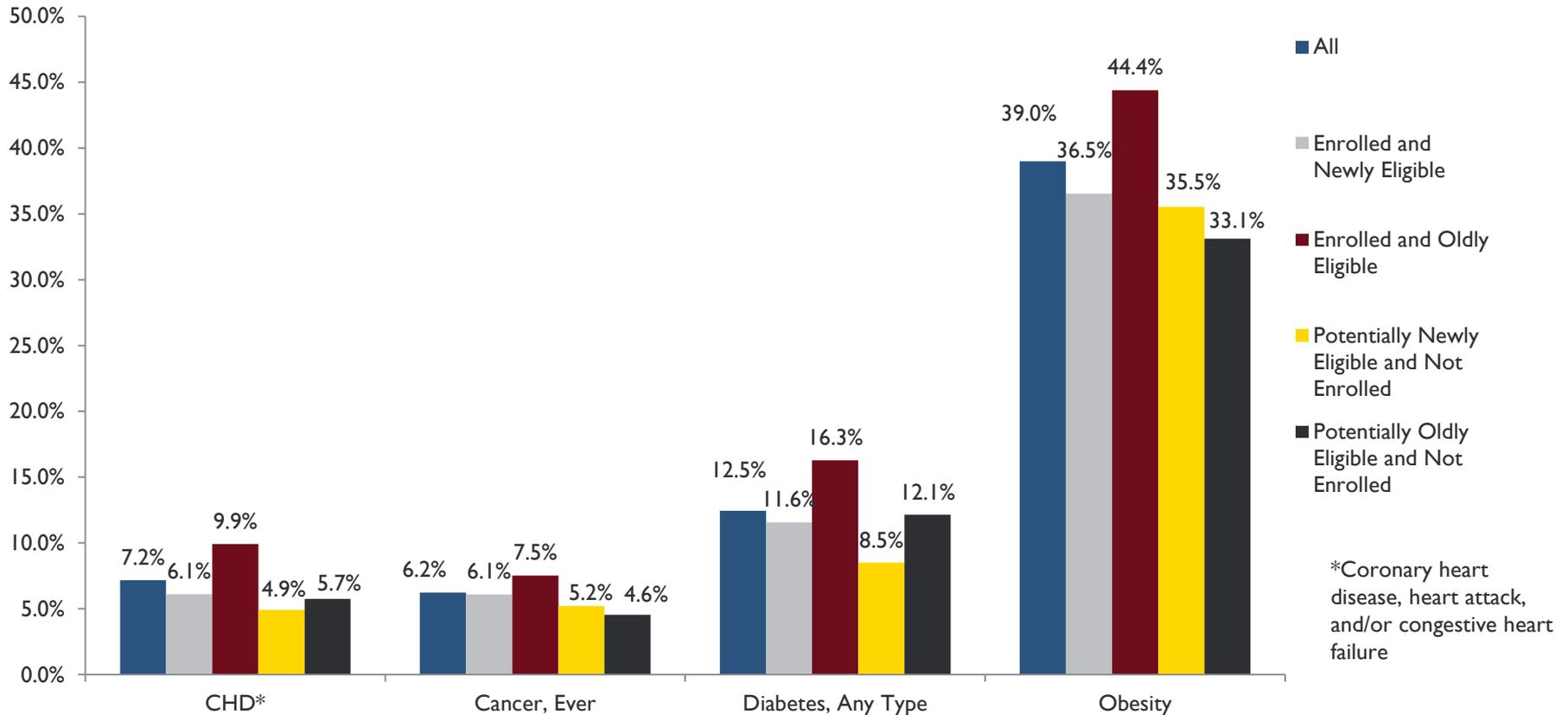
This section profiles current health status for adults 19 through 64 years who are currently covered by Medicaid or potentially eligible for Medicaid coverage.

3.1 CURRENT HEALTH STATUS



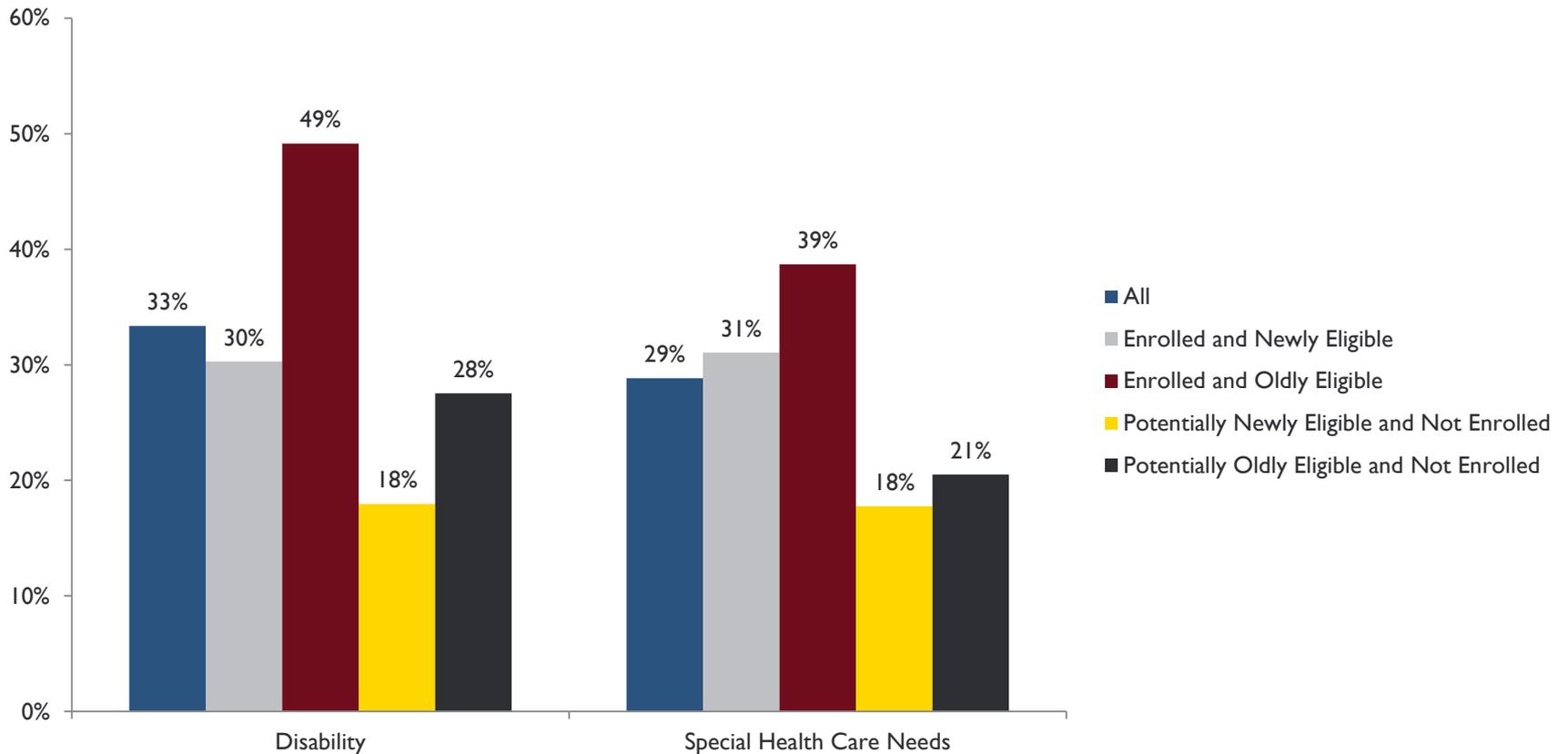
The prevalence of mental-health related impairment and poor or fair self-rated health was much lower among the potentially eligible and not enrolled populations compared to the Medicaid-enrolled populations.

3.2 PREVALENCE OF CHRONIC DISEASE



Across all measures, the highest prevalence of chronic disease is among those enrolled and oldly eligible. The prevalence of these chronic diseases was slightly higher among the enrolled and newly eligible group than among the potentially newly eligible and not enrolled group, but only by 1-3%.

3.3 DISABILITY AND SPECIAL HEALTH CARE NEEDS



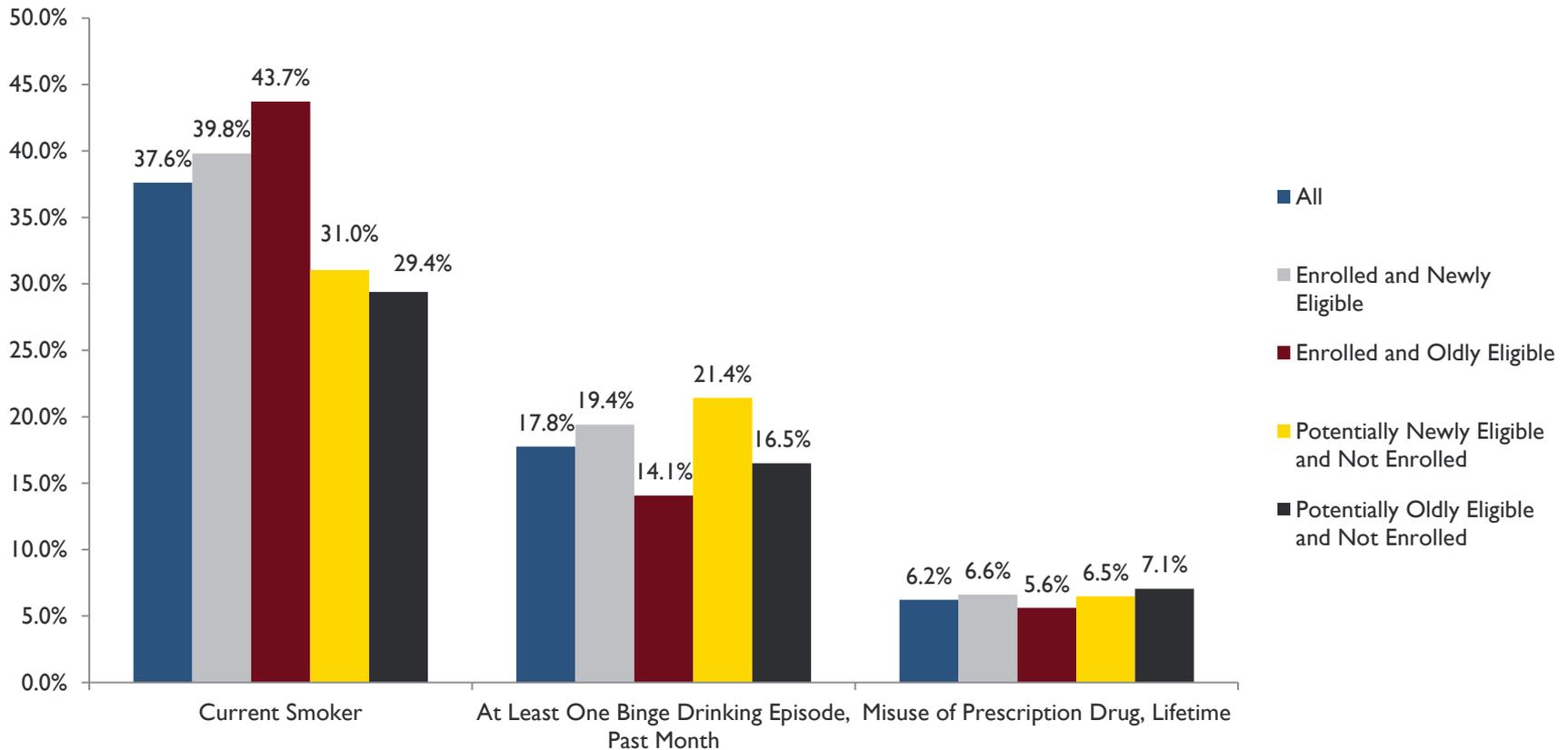
The prevalence of non-elderly low-income adults estimated to have a disability ranged from 18% for those potentially newly eligible to 49% for those enrolled and oldly eligible. Reported special health care needs ranged from 18% for the potentially newly eligible to 39% for the enrolled and oldly eligible.

RESULTS

SECTION 4: SUBSTANCE USE

This section profiles smoking, drinking habits, and misuse of prescription drugs among currently enrolled and potentially Medicaid eligible adults 19 through 64 years.

4.1 SUBSTANCE USE



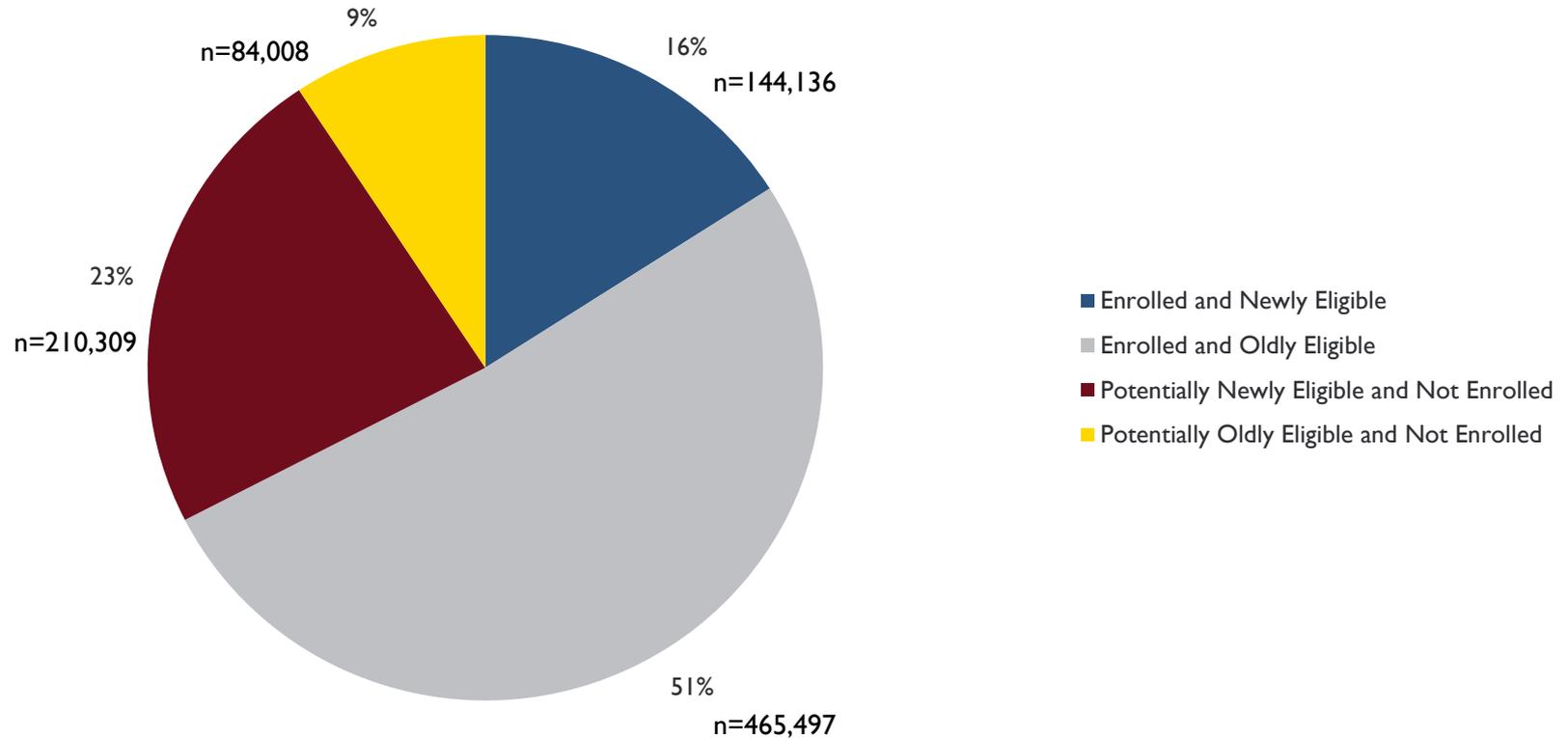
The prevalence of smoking was much lower among the potential eligible but not enrolled groups compared to the currently Medicaid-enrolled groups. The prevalence of binge drinking in the past month ranged from 14-21%. There was considerably less variation among lifetime misuse of prescription drugs with between 6-7% of non-elderly low-income adults reporting use.

RESULTS

SECTION 5: WOMEN OF REPRODUCTIVE AGE

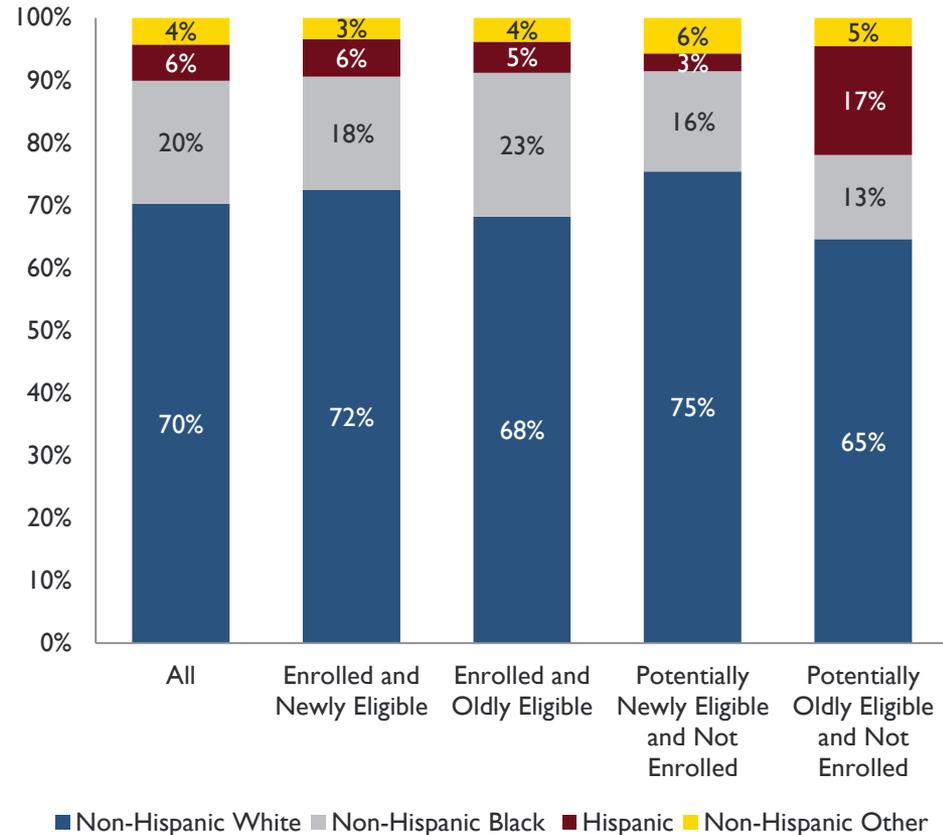
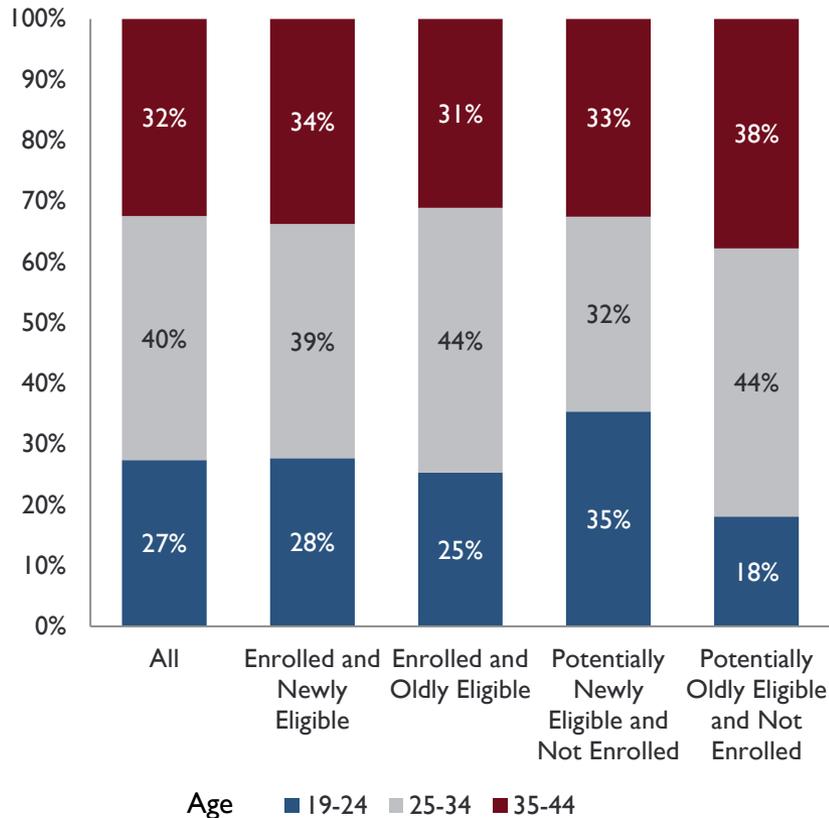
This section profiles women of reproductive age (19-44 years) who are currently enrolled in or potentially eligible for Medicaid with respect to their pregnancy status and intention to breast feed. Results are presented for all of this population and stratified by the four Medicaid eligibility groups.

WOMEN, AGES 19-44 YEARS: DISTRIBUTION OF MEDICAID ENROLLMENT AND ELIGIBILITY



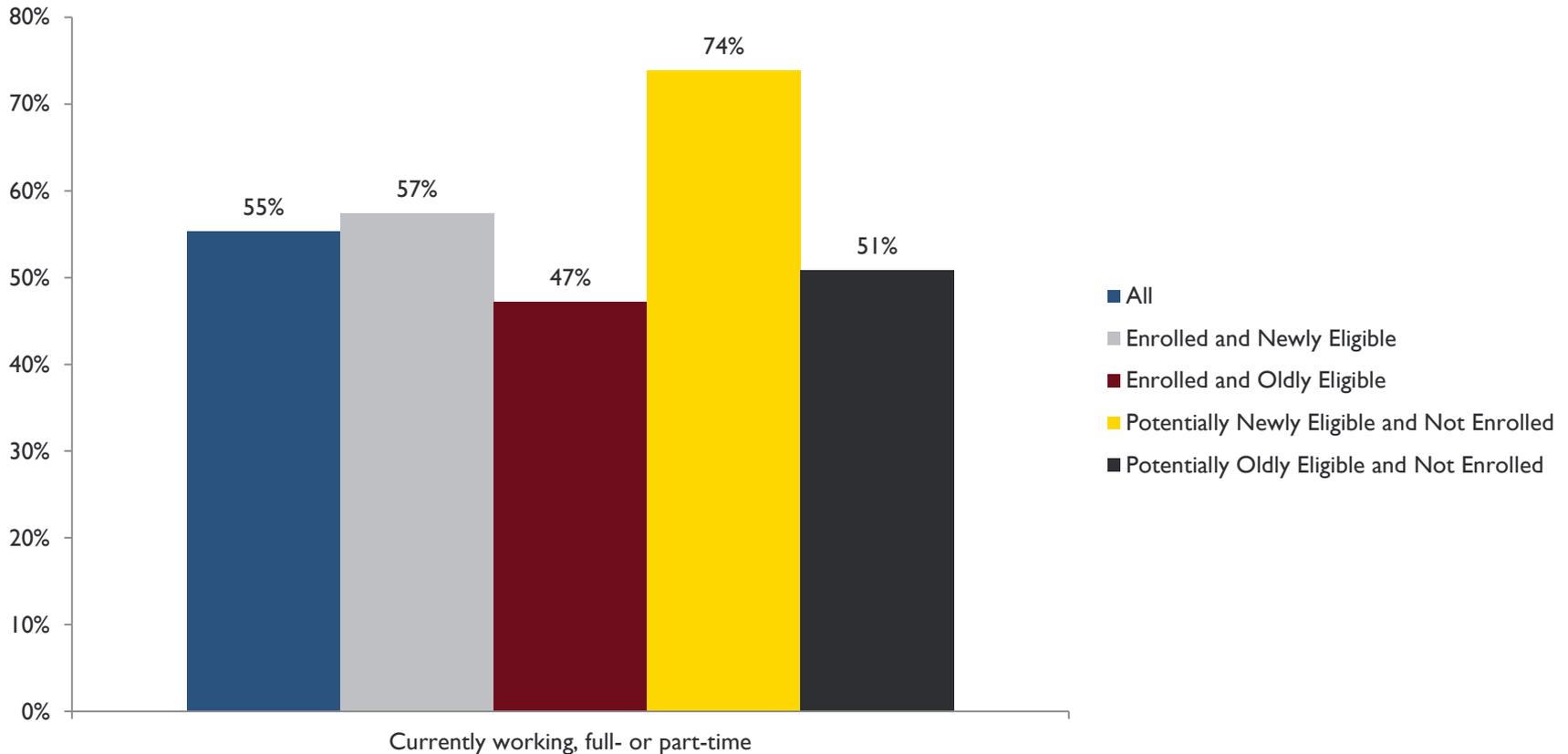
Women of reproductive age were predominantly classified as enrolled and oldly eligible.

WOMEN, AGES 19-44 YEARS: AGE AND RACE/ETHNICITY



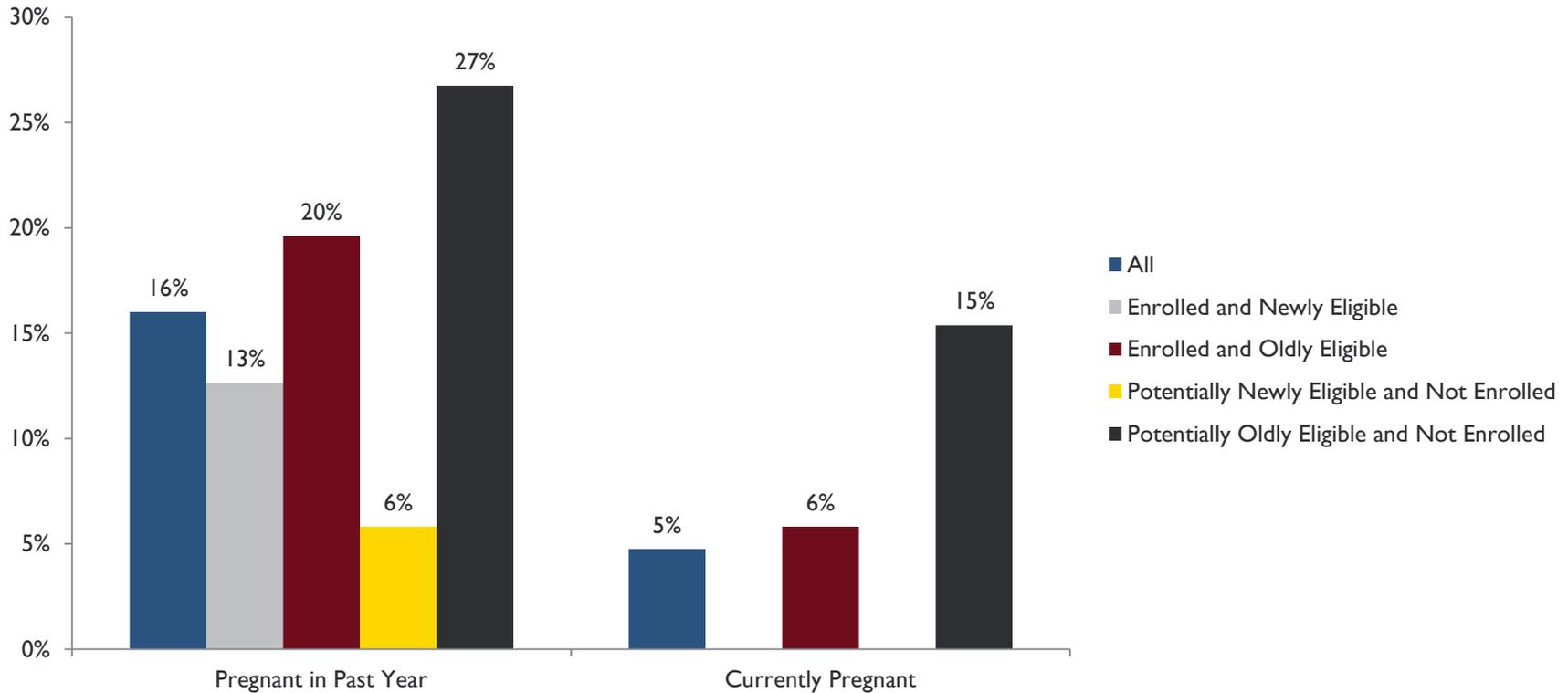
Women of reproductive age in the potentially newly eligible and unenrolled group appear younger than the other groups with 35% of women between ages 19-24. Ohio Medicaid insures a disproportionate percentage of low-income Non-Hispanic Black, Hispanic, and Non-Hispanic other females: 27% of the enrolled and newly eligible and 32% of the enrolled and oldly eligible population was minority, compared to 23% of all female Ohioans age 19-44 years.

WOMEN, AGES 19-44 YEARS: WORKING STATUS



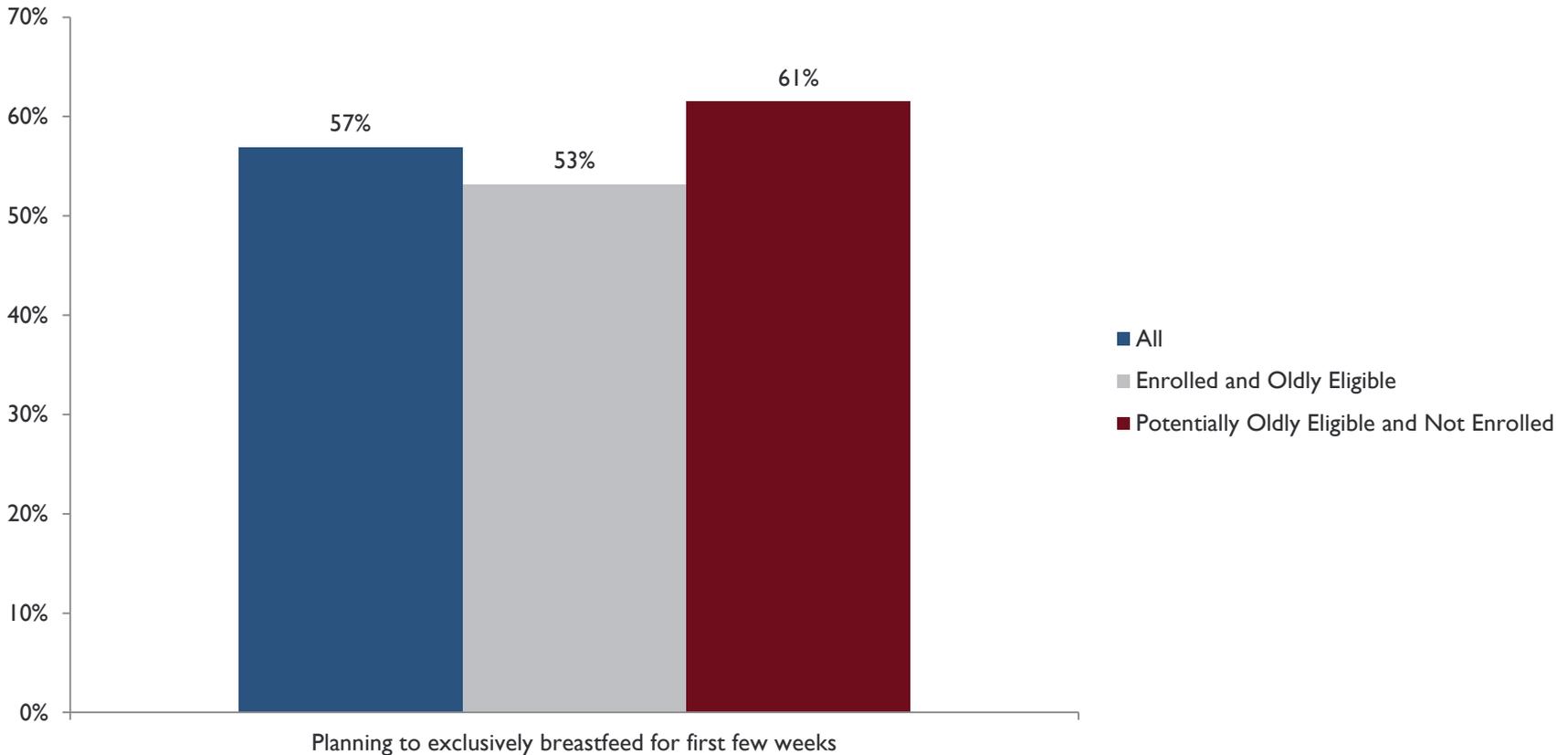
The majority of women of reproductive age report working. An estimated 55% of all low-income Ohioan women of reproductive age report working a full- or part-time job. Among the potentially eligible but not enrolled population, a much higher percentage of the potentially newly eligible were working than the potentially oldly eligible.

5.1 WOMEN, AGES 19-44 YEARS: PREGNANCY STATUS



Reported pregnancy in the past year ranged from 6% for the potentially newly eligible and unenrolled to 27% for the potentially oldly eligible and unenrolled. Reported current pregnancy ranged from 6% for the enrolled and oldly eligible and to 15% for the potentially oldly eligible and unenrolled. Of those currently pregnant and potentially oldly eligible but not enrolled, 61% had job-based insurance coverage, 17% were uninsured, and 22% had some other form of insurance. All currently pregnant women are considered oldly eligible, which is why there are no data on newly eligible, currently pregnant women.

5.2 WOMEN, AGES 19-44 YEARS: BREASTFEEDING PLANS AMONG CURRENTLY PREGNANT



Across both groups, over 50% of women who were currently pregnant planned to exclusively breastfeed their newborn for the first few weeks. This percentage was higher among the potentially eligible but not enrolled population.

KEY FINDINGS

This chartbook presented information from the 2015 OMAS on the characteristics and health status of non-elderly adults (19-64 years) and women of reproductive age (19-44 years) who were currently enrolled in or potentially eligible for Medicaid coverage. Key findings for the non-elderly adults population include:

Insurance Coverage

More than a quarter of those not enrolled but potentially eligible for Medicaid were uninsured. Job-based coverage was the most common form of insurance among those who did have coverage.

Unmet Healthcare Needs and Access to Care

In general, there was a high level of unmet need for dental care among all four groups.

A much lower proportion of the enrolled and oldly eligible group reported unmet healthcare needs and difficulty accessing care compared to the newly eligible and enrolled and the potentially oldly eligible and not enrolled. Specifically, the enrolled and oldly eligible had:

- Lower unmet dental, vision, and prescription needs.
- Lower prevalence of major medical costs, delaying or avoiding care, and reporting it was harder to secure care.

Non-elderly adults in the enrolled newly eligible group had higher unmet needs compared to the currently enrolled, oldly eligible population. In contrast, this newly eligible group had better health on many measures compared to those enrolled and oldly eligible. With respect to unmet needs among the enrolled and newly eligible, it is important to note that those newly eligible may have had unmet needs before getting coverage.

The percentage of Medicaid-enrolled adults (both newly and oldly eligible) who had a routine medical visit, at least one ER visit, or at least one hospital admission in the past year was higher than the corresponding percentage among the potentially newly and oldly eligible but not enrolled populations.

KEY FINDINGS

Health Status and Health Behaviors

Individuals already enrolled in Medicaid reported higher percentages of mental health-related impairment, poor or self-rated health, disability and special health care needs. Individuals enrolled and oldly eligible had the highest prevalence of chronic health conditions, while the prevalence among the enrolled and newly eligible was similar to that among the potentially eligible groups.

The percentage of potentially eligible adults who smoked was 10-15% less than the percentage among currently enrolled adults.

Women of Reproductive Age

The percentage of women who were currently pregnant or pregnant in the past year was highest among those who were potentially oldly eligible but not enrolled.

CONCLUSION

Prior research has shown that adults who are potentially eligible for Medicaid coverage are often healthier than those already on Medicaid. The findings on health status, health conditions, and disability status presented in this chartbook are consistent with these previous results. Non-elderly adults who remain potentially eligible for but not enrolled in Medicaid were healthier than their enrolled counterparts on all of these health-related measures. Their comparatively better health likely contributes to their higher rates of employment.

The enrolled and oldly eligible were least likely to report unmet health care needs and difficulty accessing care. Many of those who were enrolled and oldly eligible had Medicaid coverage longer than those in the newly eligible and enrolled population. As a result, they may have better established care that more completely addresses their needs.

The comparatively high report of unmet needs among the enrolled newly eligible population may also be due in part to the fact that survey respondents were asked about their unmet needs over the past 12 months, while many of the newly eligible and enrolled individuals had been covered by

Medicaid for less than 12 months at the time of the interview. These differences in unmet need may be due in part to the oldly eligible having Medicaid coverage longer, on average, than the newly eligible, who may not have realized the full benefits of their relatively new coverage. The relatively high prevalence of unmet need for dental care across all groups suggests efforts to increase access to dental care for the Medicaid population may be warranted.

Among women of reproductive age who were currently pregnant, there was some variation in the percentage who were planning to exclusively breastfeed their infant for the first few weeks. Just over half of oldly eligible, currently enrolled mothers were planning to breastfeed, suggesting there may be opportunities to further encourage and support exclusive breastfeeding among all pregnant Medicaid beneficiaries.

REFERENCES

Centers for Medicare and Medicaid Services. (2016, April 13). Medicaid CHIP Program Information by State: Ohio. Retrieved from <https://www.medicaid.gov/medicaid-chip-program-information/by-state/ohio.html>

Decker, S. L., Kostova, D., Kenney, G. M., & Long, S. K. (2013). Health status, risk factors, and medical conditions among persons enrolled in Medicaid vs uninsured low-income adults potentially eligible for Medicaid under the Affordable Care Act. *JAMA*, *309*(24), 2579–2586. <http://doi.org/10.1001/jama.2013.7106>

Kaiser Family Foundation. (2013). Medicaid Eligibility for Adults as of January 1, 2014. Retrieved September 3, 2015, from <http://kff.org/medicaid/fact-sheet/medicaid-eligibility-for-adults-as-of-january-1-2014/>

APPENDIX

The following criteria were used to define the four Medicaid eligibility groups.

The enrolled and oldly eligible group is comprised of individuals who are enrolled in Medicaid and who satisfy one or more of the following conditions:

- Have a child and an income less than or equal to 95% FPL
- An income less than or equal to 44% FPL and between the ages of 19 and 20
- Currently pregnant with an income less than or equal to 200% FPL
- 65 years or older
- Considered aged, blind, or disabled
- Disabled and on Medicaid for greater than 455 days
- Younger than 65 and on Medicaid for longer than 455 days.

The enrolled and newly eligible group is comprised of individuals under age 65 classified as being enrolled in Medicaid and who satisfy one or more of the following conditions:

- Parent of someone 18 or younger in the household and have a family income greater than 95% FPL
- Not a parent of anyone 18 or younger in the household and did not meet any of the old eligibility criteria.

Those potentially oldly eligible and unenrolled satisfy one or more of the following conditions and are not currently enrolled in Medicaid:

- Parent of a child under 18 in the household with an income less than or equal to 95% FPL
- An income less than or equal to 44% FPL and are between the ages of 19 and 20
- Currently pregnant with an income less than or equal to 200% FPL
- Have an income less than or equal to 66% FPL and are 65 years old or older (Note: this Chartbook excludes those eligible for Medicare Premium Assistance Program (MPAP)).

Those potentially newly eligible and unenrolled are not on Medicaid or Medicare, are under the age of 65 and satisfy one or more of the following conditions:

- Parent of someone 18 or younger in the household and have a family income greater than 95% FPL but less than or equal to 138% FPL
- Not a parent and have an income less than or equal to 138% FPL.

(Notes: Income refers to monthly income.)

APPENDIX

The following SAS code was used to create the four eligibility groups.

```
if medicd_a_imp=1 then do;
  if s13a=1 and FPL_MON_PCT LE 95 then caidelig_m1=1;
  else if FPL_MON_PCT LE 44 and s14_imp in (19,20) then
caidelig_m1=2;
  else if e65a=1 and FPL_MON_PCT LE 200 then caidelig_m1=3;
  else if s14_imp GE 65 or care_abd=1 or (disab_proxy_a=1 and
b4c2days GE 455) then caidelig_m1=4;
  else if s14_imp < 65 and b4c2days GE 455 then caidelig_m1=12;
  else if s14_imp < 65 and i_type_a_imp=2 then do;
    if s13a=1 then caidelig_m1=5;
    else if s13a NE 1 then caidelig_m1=6;
  end;
  else caidelig_m1=13;
end;
else do;
  if s13a=1 and FPL_MON_PCT LE 95 then caidelig_m1=7;
  else if FPL_MON_PCT LE 44 and s14_imp in (19,20) then
caidelig_m1=8;
  else if e65a=1 and FPL_MON_PCT LE 200 then caidelig_m1=9;
  else if s14_imp < 65 and i_type_a_imp NE 3 and FPL_MON_PCT LE
138 then do;
    if s13a=1 then caidelig_m1=10;
    else if s13a NE 1 then caidelig_m1=11;
  end;
  else if FPL_MON_PCT LE 66 then caidelig_m1=14;
end;
```

format caidelig_m1 caid8elig.;

```
if caidelig_m1 in (5, 6) then caidelig_grp1=1 ; /*Enrolled and Newly
Eligible*/
else if caidelig_m1 in (1, 2, 3, 4, 12) then caidelig_grp1=2; /*Enrolled
and Oldly Eligible */
else if caidelig_m1 in (10, 11) then caidelig_grp1=3; /*Potentially Newly
Eligible and Not Enrolled */
else if caidelig_m1 in (7, 8, 9, 14) then caidelig_grp1=4; /*Potentially
Oldly Eligible and Not Enrolled */
```