

Health Insurance Status of Arkansans – Effects on Arkansas Healthcare Providers

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Health Policy Issues Facing Arkansans

- <u>Access</u> to health care providers
- Quality of health care delivery
- <u>Cost</u> of health insurance increasing

 Increased utilization of services
 Cost-shifting from uncompensated care
- High rates of illnesses related to o Tobacco use
 - **o Obesity and Physical Inactivity**
 - o Non-use of seat belts / helmets

Arkansas Health Policy Roundtable

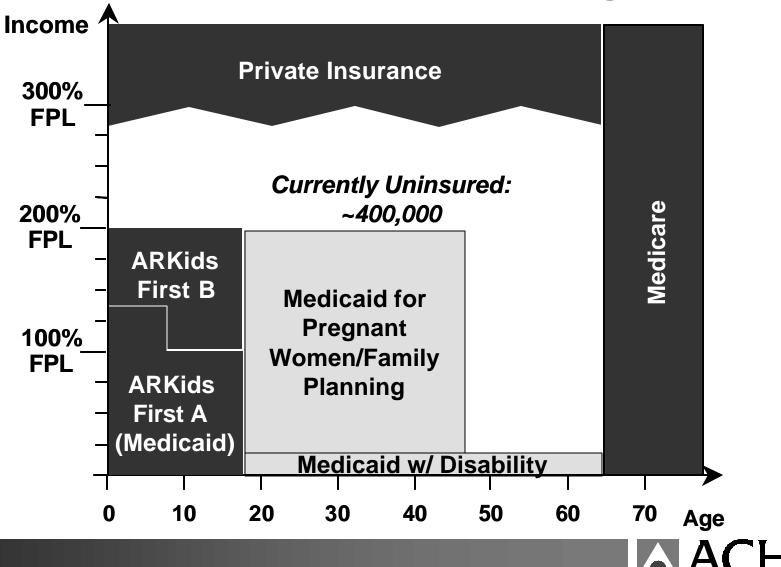
- 21 private-citizen members
 - 7 Consumer representatives
 - 7 Employer representatives
 - 7 Insurance / provider representatives
- Goals
 - Assess health insurance challenges facing Arkansans
 - Develop a 5-10 year strategic plan
 - Increase the number of Arkansans covered by health insurance AND promote marketplace stability

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Stakeholders and strategic partners

- Arkansas Advocates for Children and Families
- Arkansas Hospital Association
- Arkansas Medical Society
- Arkansas Chamber of Commerce
- Community Health Centers
- Department of Human Services
- Department of Health
- Service Employees International Union
- Arkansas Farm Bureau
- Department of Insurance
- Academia
- Healthcare providers / health insurance carriers

Current patchwork quilt of Arkansas health insurance coverage



Insured Arkansans

- 74% of Arkansans receive their health insurance through their place of employment
- Among all states, Arkansas has the 2nd lowest number of employers offering employer sponsored health insurance (45%)
- Dramatic difference by employer size:
 - ->95% of large employers;
 - <30% of small businesses offer health insurance</p>
 - Seasonal, contract, and part-time workers not covered

Uninsured Arkansans

- 400,000 uninsured Arkansans (all ages)
 - 16% total population
 - 20% adults between 19-64 years of age
 - 25% adults between 19-44 years of age
- Most uninsured live in smaller communities throughout the state
- Majority of uninsured are working in full time jobs (> 35 hours per week)

Challenges faced by Arkansas Employers

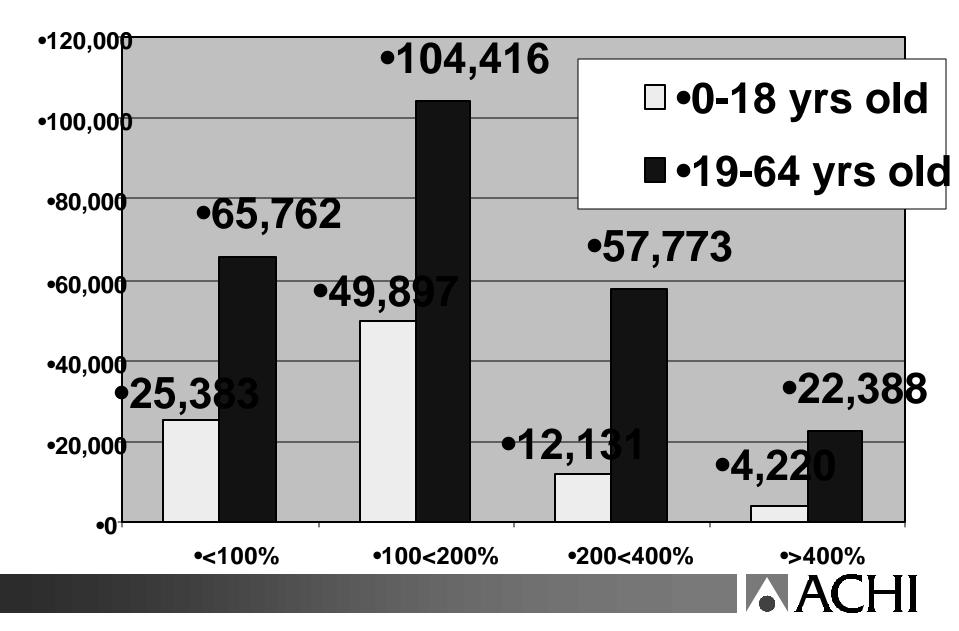
- Large employers predominantly self-insured; small businesses with few options
- 20-35% annual premium increases experienced by small businesses (some increases reported much higher)
- Insurance companies require that for employers to participate, they must guarantee that 70-80% of their employees purchase coverage
- Participation threatened by increasing costsharing required by employees/families

Challenges faced by Arkansas families

- Poor health driving costly care
- Increasing prescription drug utilization and new drug marketing increasing costs
- Cost-shifting of uncompensated care from the uninsured into costs of insured care (20% adults uninsured)
- Households want health insurance, but many have more pressing financial concerns (rent, food, etc).
- Debt related to provision of medical care.



Uninsured Adults and Children



Uninsured Impact on Arkansas Hospitals

Year	<u>1999</u>	2000	<u>2001</u>
# Patients Admitted w/o Insurance	17,815	20,545	26,843
% of All Admissions	4.9%	5.5%	6.8%
Uncovered Hospital Charges	\$151 million	\$168 million	\$248 million

Source: ADH Arkansas Hospital Discharge Database 1999, 2000, and 2001

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Lack of health insurance directly contributes to:

- Poorer health for Arkansans
 - Delay by the uninsured in obtaining appropriate care results in treatment that is MORE expensive yet LESS effective.
- Increased cost of health care in Arkansas
 - Steadily increasing health insurance premiums.
 - Decreased access to provider services.
- Increased cost of doing business in Arkansas
 - Increased employee absenteeism / turnover.
 - Increased rates of personal bankruptcies.

Arkansas Health Policy Roundtable Strategic Plan Recommendations for Immediate State Action



I. Expand Safety-Net Medicaid Program through Tobacco Settlement Funds to:

- A. Low income adults 19-64 years old
 - Establish safety-net benefits package (6 Clinic visits, 7 Inpatient days, 2 Outpatient Surgery per year, and 2 Prescriptions / month)
 - Proposal into federal government to extend coverage to approximately 30,000 low-income individuals
- B. Low income pregnant women
 - Extension of pregnancy coverage for women through Medicaid (133% to 200% of FPL) increasing coverage for approximately 3,000 women per year
 - Reduction in complicated pregnancies and costly premature infants



- II. Establish Arkansas Safety Net Benefits Program
 - Request federal approval for employers to "buy into" Medicaid for low-wage workers
 - Extend "safety-net" benefits to low-wage workers and their families
 - Employer determines group participation
 - Premium contributions are matched ~ 3:1 with federal funds for low-wage workers / families
 - Maintains private sector control with state support and federal subsidy

- III. Establish Community-Based Purchasing Pools / Cooperatives
 - Operationalize Act 925 of 2001
- IV. Include Scientifically Supported Preventive Services
 - Mammography (>40 y/o); Cholesterol screening (q 5 years); Immunizations; Blood pressure & obesity screening; et al
- V. Promote employer / employee education regarding health benefits and health plans

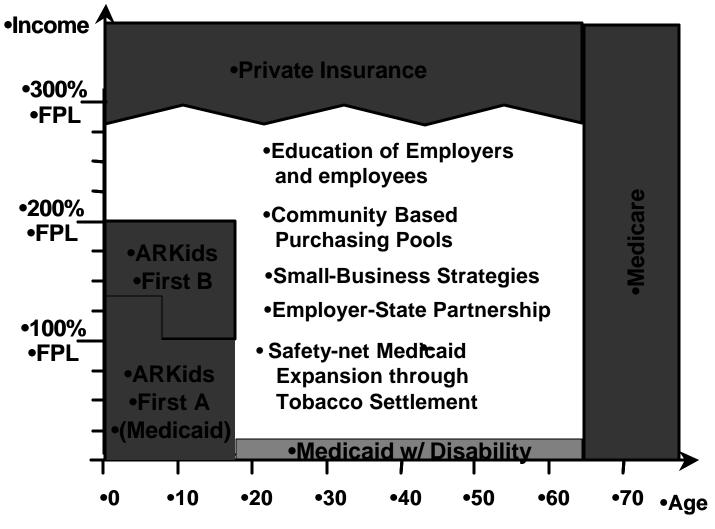
Additional Components of the Arkansas Health Policy Roundtable Strategic Plan



- I. Achieve Income Tax Neutrality for Health Insurance / Health Care Expenditures (Federal)
- II. Modify Medicare to include Prescription Drugs and Expanded Disabled Eligibility (Federal)
- III. Tie Medical Savings Accounts to Group Catastrophic Policies (Federal)
- IV. Increase ARKids enrollment (State)
- V. Promote enhanced stability of the small group marketplace (State)

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Proposed Insurance Coverage



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Current Activities

- Medicaid waiver application
- Act 1044 Safety Net Benefits Program
- Act 1035 Health Data Initiative
- HB 2240 Joint Interim Committee on Health Insurance / Prescription Drugs
- Development / implementation of Arkansas Safety Net Benefits Program
- Planning / coordination of outreach efforts

Thank you

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A copy of the Arkansas Health Policy Roundtable Report on Health Insurance Status of Arkansans can be downloaded at

http://www.achi.net/

