2010 Iowa Child and Family Household Health Survey

Insurance Report

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Topics to be covered

2010 IHHS

- Overview
- Methods
- Insurance Coverage of Children in Iowa
- Hawk-I
- Health Insurance and the Affordable Care Act
Primary purpose-2010 IHHS

1) To assess the health and well-being of children and families in Iowa
2) To explore early childhood issues in Iowa
3) To assess the health insurance coverage of children in Iowa and features of the uninsured
4) To assess the health and well-being of racial and ethnic minority children in Iowa

All IHHS reports are available at:
http://ppc.uiowa.edu/health/study/iowa-child-and-family-household-health-survey-ihhs
Health Insurance Coverage for Iowa Children

Data from the 2010 Iowa Child and Family Household Health Survey

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July 16, 2013
Study Collaborators

• Only statewide health survey
• Joint effort of
  - Iowa Department of Public Health
  - University of Iowa Public Policy Center
  - Iowa Child Health Specialty Clinics
  - Other funding partners for 2010
    • U.S. Department of Health and Human Services Maternal and Child Health Bureau (MCHB)
    • Blank Children’s Hospital
    • American Academy of Pediatrics – Iowa Chapter
    • ARRA funding through Early ACCESS
Survey topics-2010

- Functional health status
  - CYSHCN screener
- Access to/need for care
  - Insurance coverage
- Prescription medications
- Dental care
- Behavioral/emotional health
- Emergency room use
- Medical home-new
- Early childhood issues
  - Parental engagement
  - Child care
- Physical activity
- Nutrition
- Substance use problems
- Social determinants of health-new
- Food insecurity-new
Methods-2010 IHHS

- Population-based statewide household survey
- Address-based sampling design - new
- Mixed mode data collection
  - Telephone and Internet survey methods
- AA/Latino oversample
- Data collection by Univ. of Northern Iowa Center for Social and Behavioral Research
Methods-2010 IHHS

- Data collection: Fall 2010, Spring 2011
- 180 questions max.
  - 22 minutes on average
- 2386 completed surveys (80% mothers)
  - 1859 phone
  - 527 online
- Data weighted to be more representative of state
Iowa’s children (census data)

<table>
<thead>
<tr>
<th>2000 Census</th>
<th>2010 Census</th>
</tr>
</thead>
<tbody>
<tr>
<td>827,983</td>
<td>820,510</td>
</tr>
</tbody>
</table>

Percent change: 0.01% from 2000 to 2010

- Births leveled in 40,000 per year (+3.7% from 2000)
- School enrollment down 6.3% from 2005

Families-decreased (-8.1%) from 2000

- 377,687 in 2000
- 347,118 in 2010
Health Insurance Coverage for Iowa Children

- 75% covered by private insurance
- 60% of uninsured eligible for public insurance
- 31% of uninsured had parents with insurance
Children’s Coverage by Race/Ethnicity

- African-American: 62% uninsured, 38% private insurance, 3% public insurance (Medicaid, hawk-i)
- Hispanic: 54% uninsured, 36% private insurance
- White: 17% uninsured, 80% private insurance
- Multi-racial/other: 42% uninsured, 56% private insurance
Rating Health Insurance Coverage for Iowa Children

- **Private Insurance**
  - Fair or poor: 6%
  - Good: 22%
  - Very Good: 36%
  - Excellent: 37%

- **Public Insurance**
  - Fair or poor: 4%
  - Good: 15%
  - Very Good: 25%
  - Excellent: 56%
Health Status by Health Insurance Coverage for Iowa Children

- Uninsured: 8% Fair or poor, 14% Good, 29% Very Good, 50% Excellent
- Private insurance: 1% Fair or poor, 26% Good, 67% Very Good, 54% Excellent
- Public insurance: 3% Fair or poor, 16% Good, 28% Very Good, 54% Excellent
Unmet Need by Health Insurance Coverage for Iowa Children

- Uninsured: 77% (23% unmet need, 95% no unmet need)
- Private insurance: 98% (2% unmet need, 96% no unmet need)
- Public insurance: 95% (5% unmet need, 97% no unmet need)
* ER visit: 22% private, 38% public or uninsured
Worry about HC Costs by Health Insurance Coverage for Iowa Children

- Uninsured: 19% Did not worry, 50% Worried some, 31% Worried a lot
- Private: 72% Did not worry, 25% Worried some, 3% Worried a lot
- Public: 73% Did not worry, 80% Worried some, 8% Worried a lot
Parent’s Health Insurance Coverage

- **African-American**: 87%
- **Hispanic**: 55%
- **White (non-Hispanic)**: 92%

- **No**: 13%
- **Yes**: 87%
18% of children were dentally uninsured.

- AA least likely, most likely to have public.
Conclusions

• Iowa had low rate of uninsured children
  - Hispanic/Latino most likely
  - Half of Hispanic/Latino children had uninsured parents

• Public insurance important
  - Rated better than public insurance
  - One in four young children in public insurance
  - Important safety net coverage for minority populations
  - Access/quality might still need improvement
    • Less likely to have medical home
ACA-related Conclusions

• Many uninsured children in “woodwork”
  - Iowa just agreed to modified expansion for rest
  - Outreach via navigators will be important

• Medical home-type coverage could expand
  - 2703 SPAs in place for Medicaid
  - Child enrollment low

• Dental coverage could be improved
  - Coverage must be offered but not paid for on public exchanges
    • Covered and paid for on private exchanges
    • Can get just dental from CHIP in Iowa only
Full and Past Reports from IHHS

http://ppc.uiowa.edu/IHHS

- Statewide results
- Nutrition and physical activity
- Early childhood
- Insurance coverage report
Conclusions

Vinny
hawk-i Outreach

Sylvia Petersen, State **hawk-i** Outreach Coordinator

**Iowa Department of Public Health**

*Bureau of Family Health*

Healthy and Well Kids in Iowa

1-800-257-8563
hawk-i

Healthy and Well Kids in Iowa
What is *hawk-i*?

- *hawk-i* is Iowa’s State Children’s Health Insurance Program (SCHIP)
- It is administered by the Department of Human Services (DHS)
- Provides health care coverage for children ages 1-19 whose families’ income falls between 200-300% FPL
  - Premiums based on income
- Plans through Wellmark or UnitedHealthcare
hawk-i Dental Only Coverage

- Provides dental care coverage for children
- Same income limits apply
  - Premiums based on income
- Delta Dental of Iowa
hawk-i Outreach in Iowa
Uninsured Children in Iowa

- Children without health insurance are four times more likely to go without needed care, such as preventive, dental, or mental health services.

- Children without health insurance are less likely to have a regular primary care physician, and children without a regular physician are nine times more likely to be hospitalized for an avoidable health problem than children with a regular doctor.

- Children without health insurance are also more likely to miss school than their peers who are insured.
Statewide Outreach

• The Department of Human Services contracts with the Iowa Department of Public Health to provide oversight to a statewide outreach program
• State outreach coordinator
• 22 local outreach coordinators
Why Outreach?

- Research has shown that people need to hear a message **seven times** before they will act.
- The enrollment process can be confusing and overwhelming.
- Many families don’t realize they qualify
# Outreach

## Statewide Outreach
- Increasing awareness
- Creating a single message
- Developing Marketing materials
- Liaison to DHS

## Grassroots Outreach
- Building partnerships
- Application assistance
- Targeted outreach specific to each community
- Outreach to four main groups:
  - Schools
  - Faith-based organizations
  - Healthcare providers
  - Special populations
CHIPRA Outreach Grant

- Centers for Medicare & Medicaid Services
- Targeted outreach to teens
- We have reached 330 teens through additional outreach efforts from this funding
- Project ends at the end of August
- HIT Week 2013 – August 11th-17th
  - Awareness Week
  - Video Contest
Enrollment Trends
hawk-i Enrollment in Iowa Since 2007
Dental Only Enrollment

- January: 3,800
- February: 3,850
- March: 3,900
- April: 3,950
- May: 4,000
- June: 4,050
- July: 4,100
- August: 4,150
- September: 4,200
- October: 4,250
- November: 4,300
- December: 4,350

Graph showing enrollment trends from January 2012 to March 2013.
Questions?

Contact:

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Families with Children and the ACA

Abby McGill
Iowa Department of Public Health
Office of Health Care Transformation
July 16th
What is the ACA?

The Affordable Care Act

- Signed into law on March 23, 2010
- The ACA is aimed at increasing the affordability and rate of health insurance coverage for Americans, and reducing the overall costs of health care

ACA Implementation Partners

- Iowa Insurance Division (IID)
- Iowa Department of Human Services (DHS)
- Iowa Department of Public Health (IDPH)
The need for health reform

- Too many people lack health coverage & care
- System focuses on treatment instead of prevention
- Lack of attention to SDOH, health disparities
- Inefficient delivery and payment system
- U.S. healthcare spending is unsustainable
- Low-ranking U.S. health outcomes
Families with Children & the ACA

* Insurers can no longer refuse to insure children with serious illnesses
  * Women will not have to pay more than men for the same insurance policies
* Free preventative services (www.healthcare.gov/prevention)
* Insurers can’t limit your care
* Young adults under 26 can stay on parents plan
* Health Insurance Marketplace
A Health Insurance Marketplace is a new online way for individuals, families and small business employers to buy health insurance when key parts of the health care law take effect this year.

- Enrollment starts October 1, 2013
- Coverage begins January 2014

The Health Insurance Marketplace provides

- Access to affordable insurance options
- Ability to buy certain private health insurance
- Access to health insurance information

Allows apples-to-apples comparison of Qualified Health Plans
How the Marketplace Works

1. Create an account
   First you'll provide some basic information. Sign up for Marketplace emails now and we'll let you know as soon as you can create an account.

2. Apply
   Starting October 1, 2013 you'll enter information about you and your family, including your income, household size, and more.
   Visit HealthCare.gov to get a checklist to help you gather the information you'll need.

3. Pick a plan
   Next you'll see all the plans and programs you're eligible for and compare them side-by-side.
   You'll also find out if you can get lower costs on monthly premiums and out-of-pocket costs.

4. Enroll
   Choose a plan that meets your needs and enroll!
   Coverage starts as soon as January 1, 2014.
The Marketplace provides:

- A break on costs through a new premium tax credit
  - 400% of poverty level is around 45,000 for an individual, and for a family of 4 it is $92,000
- Advance payment of the premium tax credit to the health plan to help lower your monthly premium
- Unbiased help and customer support provided
- Easy to use
- Quality health coverage that meets minimum standards

Video from healthcare.gov explaining the HBE:
Iowa’s Health Insurance Federal Poverty Guidelines and Subsidy Levels

- **400% + FPL**
  - No Subsidies

- **200-399% FPL**
  - Lower Subsidies

- **138-199% FPL**
  - Highest Subsidies

- **<138% FPL**
  - Iowa Health and Wellness Plan

*hawk-i* is health care coverage for uninsured children under age 19 of working families whose income is under 300% of FPL.
## Percent of Poverty Guidelines

<table>
<thead>
<tr>
<th>Family Size</th>
<th>100%</th>
<th>133%</th>
<th>150%</th>
<th>200%</th>
<th>250%</th>
<th>300%</th>
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<td>1</td>
<td>$11,170</td>
<td>$14,856</td>
<td>$16,755</td>
<td>$22,340</td>
<td>$27,925</td>
<td>$33,510</td>
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<td>$22,695</td>
<td>$30,260</td>
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<td>$30,657</td>
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<td>$35,923</td>
<td>$40,515</td>
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<td>6</td>
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<td>$41,190</td>
<td>$46,455</td>
<td>$61,940</td>
<td>$77,425</td>
<td>$92,910</td>
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<tr>
<td>7</td>
<td>$34,930</td>
<td>$46,457</td>
<td>$52,395</td>
<td>$69,860</td>
<td>$87,325</td>
<td>$104,790</td>
<td>$139,720</td>
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<tr>
<td>8</td>
<td>$38,890</td>
<td>$51,726</td>
<td>$58,335</td>
<td>$77,780</td>
<td>$97,225</td>
<td>$116,670</td>
<td>$155,560</td>
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<td>For each additional family member</td>
<td>$3,960</td>
<td>$5,267</td>
<td>$5,940</td>
<td>$7,920</td>
<td>$9,900</td>
<td>$11,880</td>
<td>$15,840</td>
</tr>
</tbody>
</table>
Essential Health Benefits

✓ Ambulatory care
✓ Emergency services
✓ Hospitalization
✓ Preventative and wellness services and chronic disease management
✓ Laboratory services
✓ Prescription drugs
✓ Maternity and newborn care
✓ Pediatric services
✓ Mental health and substance use disorder services
✓ Rehabilitative and habilitative services and devices
Connect to good health, Massachusetts!

Our online Commonwealth Choice marketplace is the only place where you can compare plans from the state's major insurers. We're an independent state agency, so you can shop with confidence.

Our Commonwealth Care program offers low-or-no-cost health insurance for people who qualify. It provides comprehensive benefits and a choice of health plans.

Find the plan that's right for you and enroll today!
Federal Resources:

* www.healthcare.gov

Iowa Resources:

* IID- http://www.iid.state.ia.us/Exchange
* IDPH- http://www.idph.state.ia.us/HBE/
Contact Information

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Questions?

Insurance Report

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Sylvia Petersen
Abby McGill
Upcoming IHHS Webinars

• Medical Home/Health Home - September
• Methods - October
• Ethnic Disparity - November