


University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*



University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

# Wisconsin's BadgerCare Plus Coverage Expansion: Early Evaluation Results


*APPAM 2009*

Lindsey Leininger

State of WI Collaborators: Milda Aksamitauskas, Linda McCart  
Principal Investigators: Tom DeLeire, Thomas R. Oliver  
Project Director: Donna Friedsam



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*

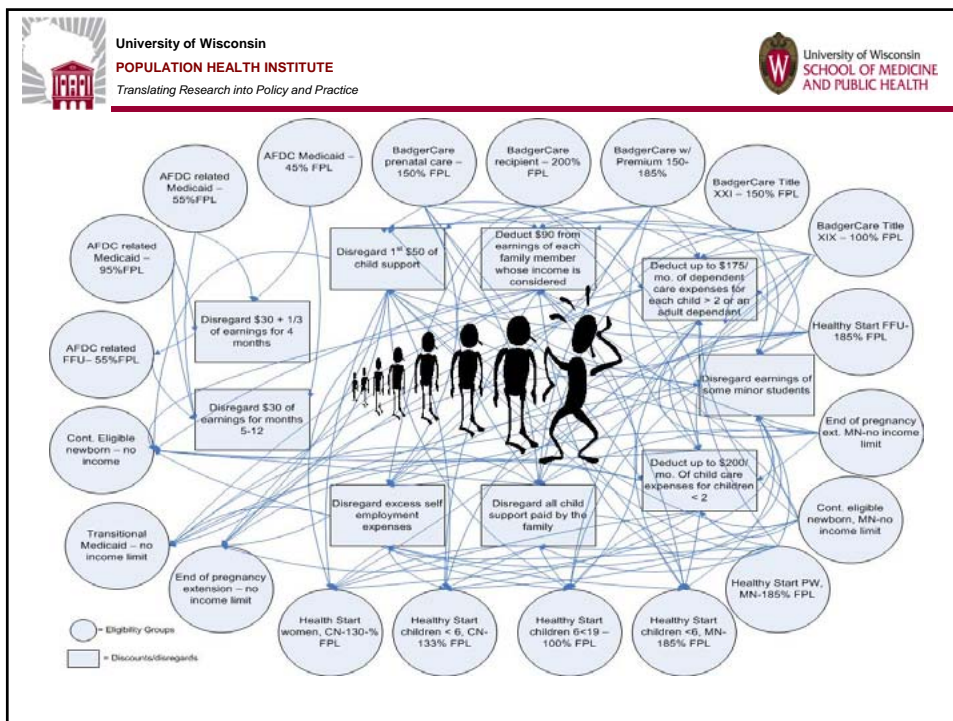
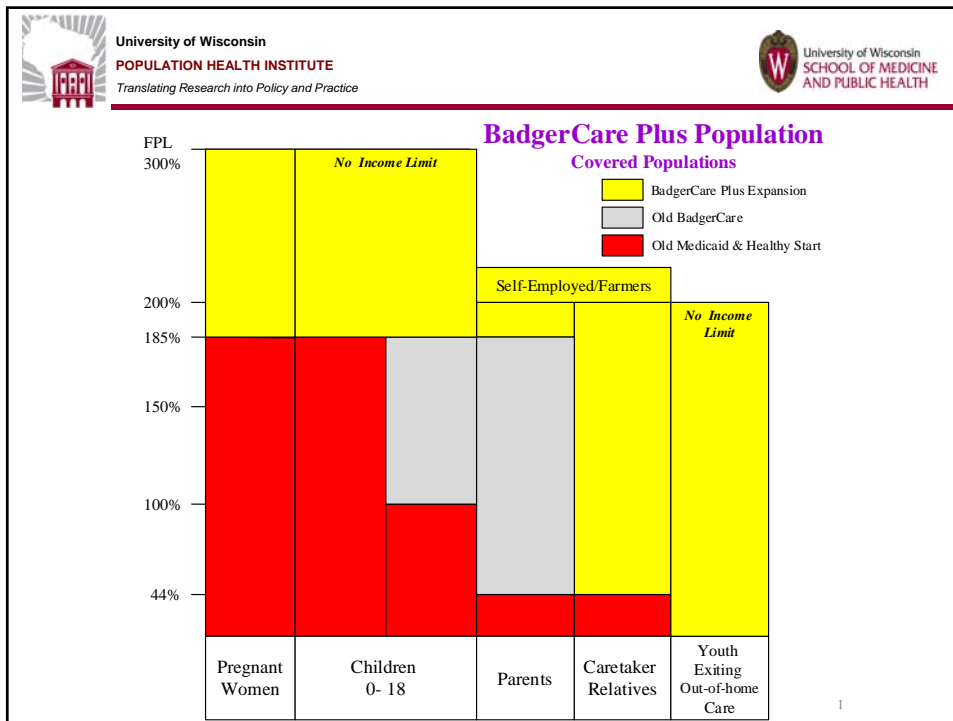


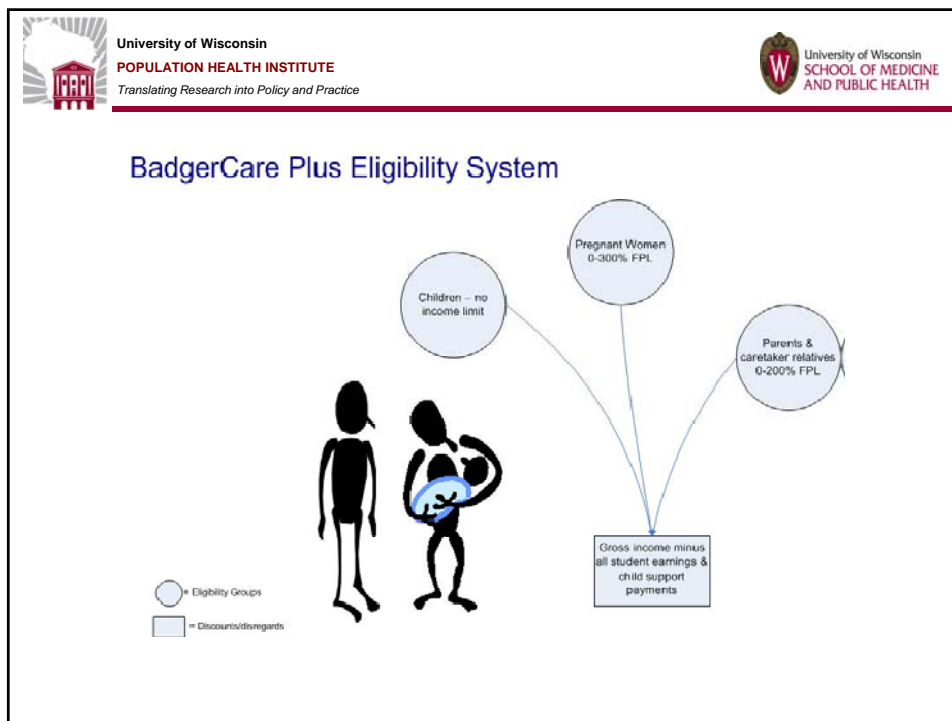
University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

---

## Wisconsin's BadgerCare Plus (BC+)

- Ongoing reform effort launched in 2/2008
- Overarching goal of preliminary initiatives:  
provide universal access to coverage for  
children
- Three specific components:
  - Eligibility expansion
  - Administrative simplification
  - Marketing and outreach efforts





University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*

University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

## Crowd-Out Provisions Altered

Under BadgerCare:

- Individuals with access to “affordable” health insurance were ineligible
- Individual responsible for ESI verification

Under BC+:

- People in families <150% FPL exempted
- Employer responsible for ESI verification

University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*

University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


## Creative Use of Systems

- Enhanced and promoted online application
- Effort to “auto-convert” unenrolled individuals who were made newly eligible under BC+ rules
  - For example, children with siblings already on assistance


University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*

University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


## “All Kids” Marketing



*Health insurance for all kids*



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

## Outreach

- Held community meetings throughout state prior to program launch
- Mini-grants to 31 organizations (up to \$25,000 per organization), paying “finders fee” of \$50 per approved BC+ application
- Use of more than 200 community partner organizations to help sign up families



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

## Evaluation

- Quantitative component
  - Estimate changes in aggregate program enrollment and in socioeconomic composition of program enrollees
  - Assess the impacts of the auto-conversion process
  - Estimate program impacts on exits and “churning”
- Qualitative component
  - In-depth, semi-structured interviews with key informants from local and state government, health care associations and advocacy groups
  - Review of health policy literature, official documents and media reports



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

## Quantitative Data Sources

- Monthly WI administrative panel data
  - Study period: 1/2007 through 5/2009
  - Contains income and demographic information
- Current Population Survey
  - Note: Conducted reliability test of CPS denominators against estimates derived from Wisconsin's Family Health Survey (FHS) and the American Community Survey (ACS).



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

## Key Income Cutoffs

- < 150% of FPL: BC+ crowd out provisions do not apply
- < 185% of FPL: Eligible for BC/Medicaid/Healthy Start pre-expansion
- < 200% of FPL: BC+ Standard plan (limited cost-sharing)
- > 200% of FPL: BC+ Benchmark plan (premiums and cost sharing), parents/caretakers are ineligible
- > 300% of FPL: Kid's premium = full cost



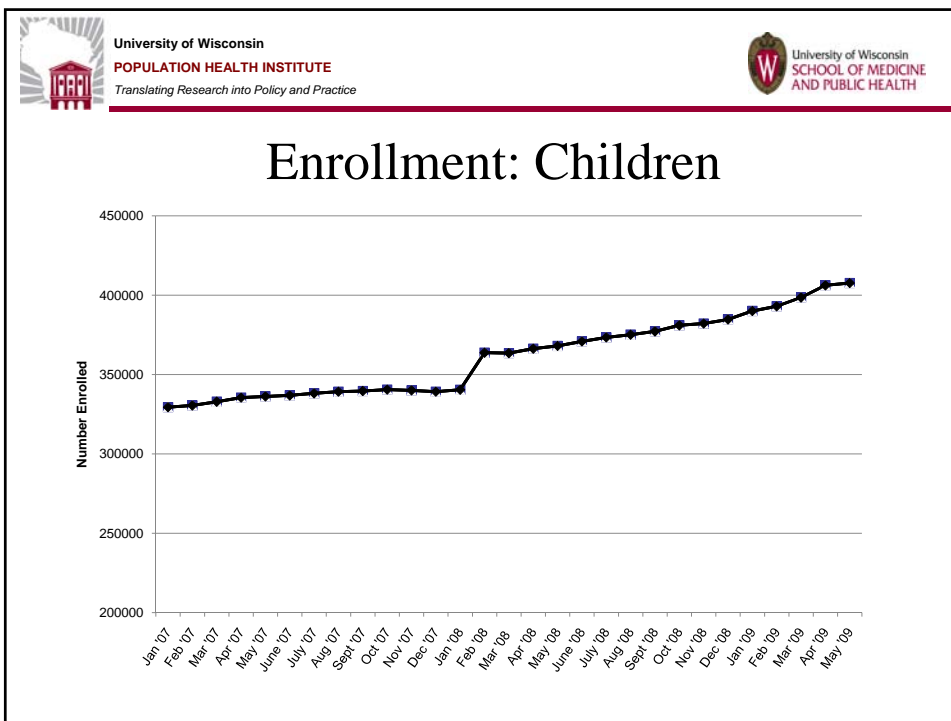
University of Wisconsin  
**POPULATION HEALTH INSTITUTE**  
*Translating Research into Policy and Practice*




University of Wisconsin  
**SCHOOL OF MEDICINE  
AND PUBLIC HEALTH**


## Study Populations

- All children
  - Stratified by FPL (<150% FPL, 150-200% FPL, 200-300% FPL, 300% + FPL)
- Low-income (<200% FPL) parents
  - Stratified by FPL poor (<150% FPL), near-poor (150-200% FPL)






University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

### Child Enrollment by FPL

	Dec-07	May-09	Change	% of change
All	339,255	407,682	68,427	100%
<150	318,966	355,971	37,005	54%
150-200	19,134	36,477	17,343	25%
200-300	828	12,674	11,846	17%
300+	196	2,560	2,364	3%



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*



University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

### Enrollments Relative to Population Estimates: Children

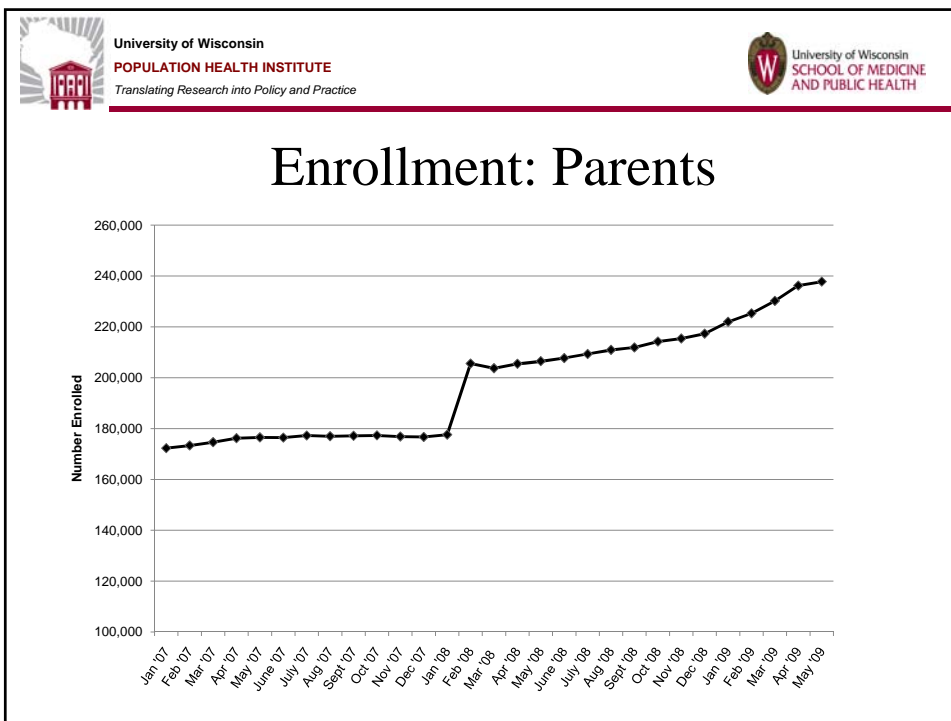
	Child						Urban	Rural
	All	<150	150-200	200-300	300+	Urban		
Dec-07	24%	84%	19%	0.3%	0.0%	21%	36%	
May-09	29%	94%	37%	5%	0.4%	25%	42%	
Change	5%	10%	18%	4%	0.4%	5%	6%	


University of Wisconsin  
**POPULATION HEALTH INSTITUTE**  
*Translating Research into Policy and Practice*

University of Wisconsin  
**SCHOOL OF MEDICINE AND PUBLIC HEALTH**


## Change in Initial Enrollment per Uninsured Population: Children

	Change in Enrollment (DHS)	Uninsured (CPS)	Ratio
All	27,077	72,674	37%
<150	2,287	32,433	7%
150-200	14,864	8,772	169%
200-300	8,569	16,061	53%
300+	1,485	15,408	10%
Urban	17,911	53,165	34%
Rural	9,166	19,509	47%






University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

## Parent Enrollment by FPL

	Dec-07	May-09	Change	% of change
All	176,686	237,779	61,093	100%
<150	166,051	210,213	44,162	72%
150-200	10,113	23,435	13,322	22%
200+	390	4,131	3,741	6%



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*



University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

## Change in Enrollment per Uninsured Population: Parents

	Change in Enrollment (DHS)	Uninsured (CPS)	Ratio
All	28,790	123,858	23%
<150	15,498	55,667	28%
150-200	10,382	13,284	78%
200-300	3,042	54,907	6%
Urban	19,107	93,819	20%
Rural	9,683	30,039	32%

University of Wisconsin  
**POPULATION HEALTH INSTITUTE**  
*Translating Research into Policy and Practice*

University of Wisconsin  
**SCHOOL OF MEDICINE AND PUBLIC HEALTH**

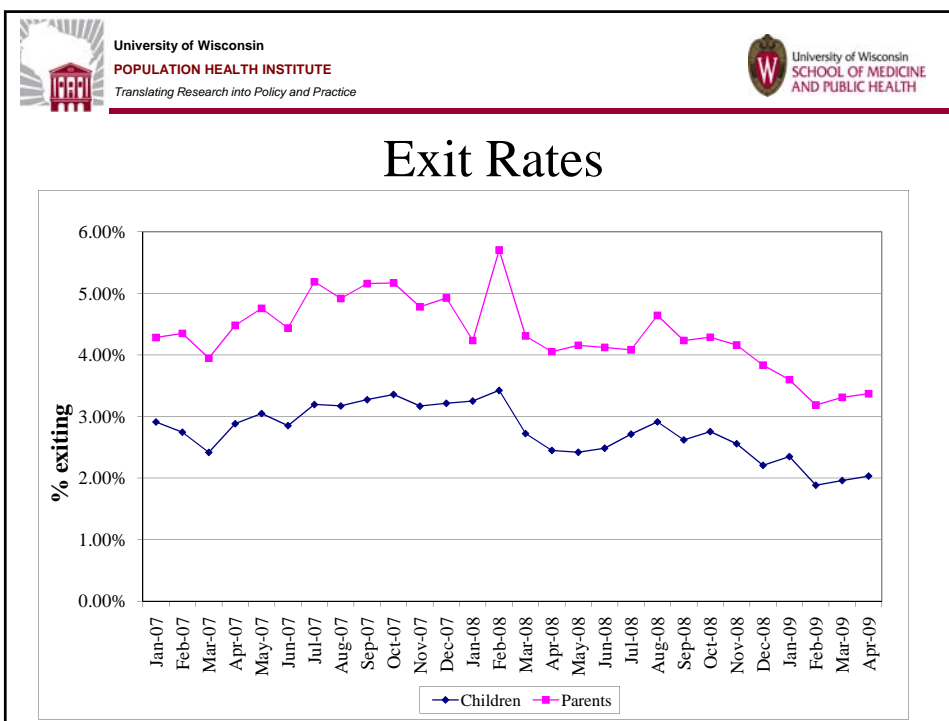
## Enrollments Relative to Population Estimates: Parents

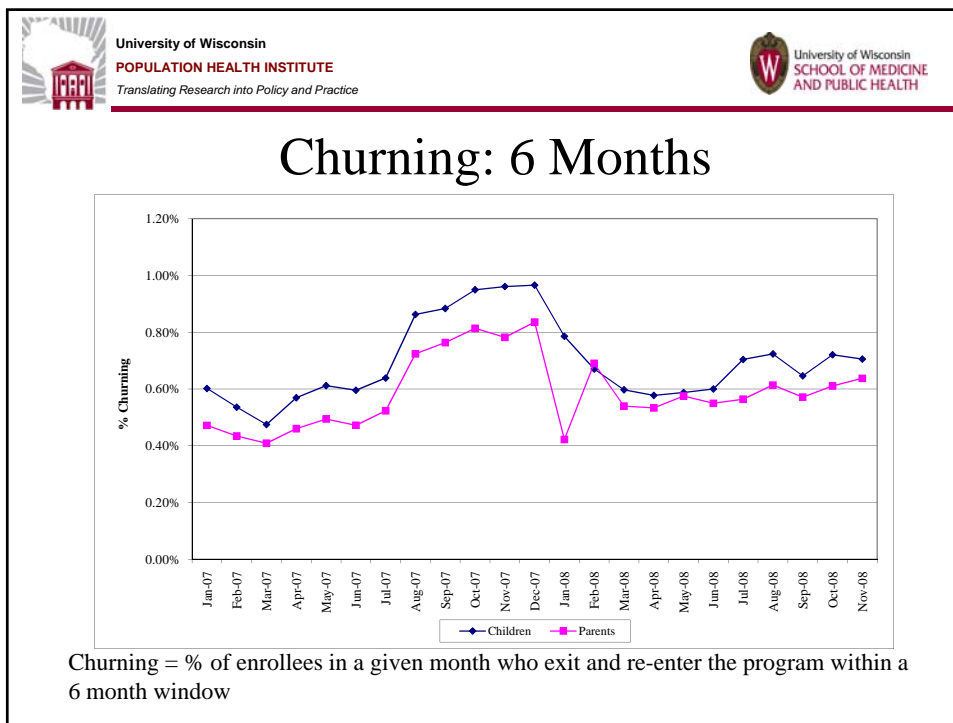
---

**Parents/Caretakers**

---

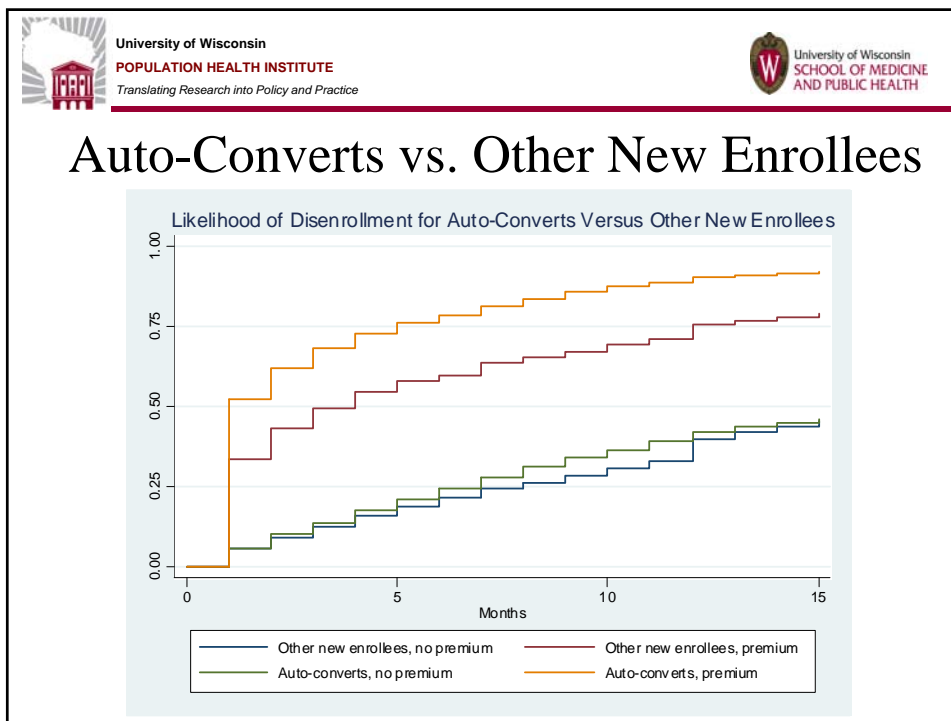
	<u>All</u>	<u>&lt;150</u>	<u>150-200</u>	<u>200+</u>	<u>Urban</u>	<u>Rural</u>
Dec-07	13%	67%	13%	0%	11%	19%
May-09	17%	85%	29%	0%	14%	26%
<u>Change</u>	<u>4%</u>	<u>18%</u>	<u>17%</u>	<u>0%</u>	<u>4%</u>	<u>7%</u>





### Who Are the Auto-Converts?

	<u>All</u>	<u>Kids</u>	<u>Parents</u>
Auto-enrolled in Feb. 2008	41,148	17,132	24,016
<i>Of these, what % had a family member enrolled in Jan 08?</i>			
Any family member	92%	87%	95%
Parent/Spouse	26%	41%	15%
Sibling/Child	80%	61%	94%
<u>Previously Enrolled (2007)</u>	<u>62%</u>	<u>71%</u>	<u>56%</u>




University of Wisconsin  
POPULATION HEALTH INSTITUTE  
Translating Research into Policy and Practice


University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

## Summary of Findings

- Large enrollment increases among parents and kids
  - Structural break at program launch with a continuing upward trend
  - Numbers higher than projected
  - Strong belief that program has been successful; however, officials concerned about budget problems
- Majority of new enrollees came from the already eligible
  - Stakeholders credit the success of outreach efforts and branding as “all-kids” coverage



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

## Summary, Cont'd

- Exits and churning:
  - Program exits increased during transition period; are leveling off at a lower rate than the pre-period
  - But churning does not yet appear significantly affected
  - Next up: estimating more sophisticated statistical models of exit and churning
  - Belief among officials and advocates that substantial numbers of eligible members will not remain in the program if required to pay premiums
- Auto-conversion enrollment
  - Effective way to enroll newly eligible children; exits among non-premium payers comparable to those of other enrollees



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*




University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH


---

## Implications for Reformers

- Eligibility expansions coupled with administrative simplification and aggressive outreach can facilitate take-up, even in the absence of a mandate
- Autoenrollment is a promising policy option for enrolling newly eligible poor populations



University of Wisconsin  
POPULATION HEALTH INSTITUTE  
*Translating Research into Policy and Practice*



University of Wisconsin  
SCHOOL OF MEDICINE  
AND PUBLIC HEALTH

---

## Next Steps

- Immediate: Estimate crowd-out using a variety of administrative and survey data sources
- Future: Evaluate impact of the next phase of the BC+ reforms
  - New program for adults without dependent children (“Core Plan”)