

HEALTH POLICY PUBLICATION



MISSOURI FOUNDATION FOR HEALTH

# Effects of the 2005 Missouri Medicaid Legislation on Recipients: Measuring Changes in Coverage, Care, and Health Status

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## **Abstract**

In 2005, the Missouri Legislature instituted substantial changes to the state's Medicaid program. After these changes, many Missourians lost or experienced changes in their Medicaid coverage as the eligibility criteria and covered services were changed substantially. The Missouri Foundation for Health and the Greater Kansas City Health Care Foundation contracted with the Center for Health Policy at Washington University to design and implement a study to understand whether the changes in Medicaid coverage had an effect on Missouri residents. The Center for Health Policy wanted to capture data from people in their daily environment, rather than in a health care setting, and so designed a study that interviewed Medicaid recipients either by phone or in person at their homes.

To implement this design, Center for Health Policy investigators partnered with Urban Strategies, Inc., a human services organization focused on linking low-income housing residents with social services and with a housing management company that manages mixed-income housing units across the State of Missouri. This gave researchers access to Medicaid recipients in their homes through an organization that had strong relationships with the residents. The research team completed surveys with 844 rental households in St. Louis City, Kansas City, Springfield, Kirksville, and Carthage. These households represent 844 adult respondents and 581 children for a total of 1,425 residents.

The study showed that 15 percent of adult respondents lost Medicaid coverage since 2005. Of those who lost coverage, well over half (62%) reported not having insurance at the time of the survey. Additionally, loss of Medicaid coverage is associated with ability to get needed medical care. One in five (20%) adult respondents surveyed reported a time in the past year when they needed medical care but did not receive it. For those who lost coverage after 2005, the percentage more than doubles (53%).

Health status and productivity also seem to be related to health insurance for low-income Missourians. More specifically, when benefits are taken away or reduced, more people

report a negative change in health status. One in five reports a change in their health status was related to a change in their Medicaid coverage. Furthermore, 12 percent report that a change in their health status affected their ability to work. Over half of those who had a change in or a loss of Medicaid coverage reported a decline in their health status.

The study also examined the experience of children as a result of the 2005 changes. While most of the changes were directed at adults, children who experienced a change or loss of coverage were more likely to need medical care but not receive it. The results also showed that, as with adults, children were more likely to experience a negative change in health status if they had a reduction in or loss of Medicaid benefits. The same result was indicated for quality of care.

# Introduction

## Background

In 2005, the Missouri Legislature instituted substantial changes to its Medicaid program by enacting Missouri Senate Bill 539. After these changes, many Missourians lost or experienced changes in their Medicaid coverage as the eligibility criteria were changed significantly. Key changes included:

- A change in parental eligibility for Medicaid from 75 percent of the Federal Poverty Level (FPL) to approximately 20 percent of the FPL.
- A change in eligibility for the elderly and disabled for the Medicaid program from 100 percent of the FPL to 85 percent of the FPL.
- Elimination of the Medical Assistance for Workers with Disabilities (MAWD) program.

Table 1 illustrates changes in eligibility guidelines.

**Table 1. Missouri Medicaid Eligibility**

<b>Covered Populations</b>	<b>Income Guidelines prior to changes in 2005</b>	<b>Current Income Guidelines</b>
Children (up to age 19)	<300% FPL	<300% FPL
Parents	<75% FPL	~20% FPL
Pregnant Women	<185% FPL	<185% FPL
Disabled Adults	<100% FPL	<85% FPL
Elderly Adults (age 65 +)	<100% FPL	<85% FPL
Blind Individuals	<100% FPL	<100% FPL

In addition, covered services and benefits were scaled back for most adult Medicaid enrollees and cost sharing requirements were increased for adults and children.

Subsequent to the enactment of these changes, the Missouri Medicaid program has seen a drop in enrollment of over 118,000 people, or 12 percent of total enrollment, during the time period of July 2005 to December 2007. Table 2 illustrates these changes.

**Table 2. Missouri Department of Social Services –  
Medicaid Program Caseload Counter – Historical Data**

	July 2005	January 2006	July 2006	January 2007	July 2007	December 2007	Enrollment Change	Percent Change
Medicaid Enrollees	949,341	883,441	830,262	825,378	822,685	830,795	-118,546	-12%
Persons with Disabilities	159,650	142,973	140,900	140,056	142,117	144,498	-15,152	-9%
Elderly	80,764	80,207	77,728	77,983	76,445	76,940	-3,824	-5%
Adults	153,047	130,798	100,698	99,015	96,614	95,943	-57,104	-37%
Children	538,310	510,848	488,549	485,952	482,757	485,745	-52,565	-10%
Pregnant Women	17,570	18,615	22,387	22,372	24,752	27,669	+10,099	+57%

Family Support Division/Division of Medical Services-Monthly Management Report, Table 23, (<http://www.dss.mo.gov/re/fmsmr.htm>). This is a point-in-time count that represents the first day of each month.

## Study Design

Loss of or reductions in health insurance coverage have been shown to have an effect on the health of individuals and their ability to access health care services.<sup>1</sup> The Missouri Foundation for Health and the Greater Kansas City Health Care Foundation contracted with the Center for Health Policy at Washington University to design and implement a study to understand whether the changes in Medicaid coverage had an effect on Missouri residents. The Center for Health Policy wanted to capture data from people in their daily environment, rather than in a health care setting, and so designed a study that interviewed Medicaid recipients either by phone or in person at their homes.

By conducting in person as well as phone surveys, the study eliminated the selection bias associated with only talking to those who have or will answer the phone. Because the study used a combination of phone and in person techniques, the results from both strategies were compared to ensure that results were consistent. Differences between the survey methods in this study were not found.

To implement this design, Center for Health Policy investigators partnered with Urban Strategies, Inc., a human services organization focused on linking low-income housing

<sup>1</sup> M.L. Berk and C.L. Schur, "Access to Care: How Much Difference Does Medicaid Make?" *Health Affairs* 17, no. 3 (1998): 169–180; C. Schoen et al., "Insurance Matters for Low-Income Adults: Results from a Five-State Survey," *Health Affairs* 16, no. 5 (1997): 163–171; and J.S. Weissman et al., "Termination from Medicaid: How Does It Affect Access, Continuity of Care, and Willingness to Purchase Insurance?" *Journal of Health Care for the Poor and Underserved* 10, no. 1 (1999): 122–137.

residents with social services. This partnership gave the Center for Health Policy access to low-income residents throughout Missouri, specifically in St. Louis, Kansas City, Springfield, Carthage, and Kirksville. Low-income housing units in each of these locations are managed by McCormack Baron Ragan Management Services Inc., a low-income housing management company closely affiliated with Urban Strategies.

Through its partnership with the rental housing management company, the Center for Health Policy had access to 5,000 Missouri households in mixed-income housing developments around the state. The residents are single persons, families, individuals with disabilities, and the elderly. Residents that agreed to participate completed a standard demographic survey and then an in-depth oral survey focused on understanding the impact of the Medicaid changes.

The purpose of the study was to understand not only who lost Medicaid coverage, but what impact coverage changes had on health care access and health status. Key questions to be addressed by the study were identified to determine the impact the changes had on Medicaid recipients. These key questions were then used to draft a two-part survey to gather data on the experiences of Medicaid recipients. Specifically, the study sought answers to the following questions:

- For those who lost coverage, did they find alternative health insurance coverage?
- Did they experience changes in their ability to obtain health care services?
- Did they seek different services after the changes were made to the Medicaid program?
- Have they experienced a change in their health status since the time of the changes to the Medicaid program?
- Have they experienced a change in the quality of the health care services they receive since the changes were made to the Missouri Medicaid program?

# **Methodology**

## **Study Population and Sampling**

Residents of mixed-income housing, managed by McCormack Baron Ragan, living in Missouri were the target population for this study. Limiting our study sample to this population allowed us to focus on a lower income population and enhance our ability to locate Medicaid recipients in their homes. Interviewing individuals in their homes allowed us to reach Medicaid recipients in their natural environment. Our goal was to help eliminate bias. If we had surveyed people in health care settings, we would have had a disproportionate number of sick people seeking services in our sample. There are approximately 5,000 households managed by McCormack Baron Ragan housing in Missouri.

The sample for this study was not drawn as a random sample of Medicaid recipients in Missouri. As an alternative, researchers chose to interview residents living in mixed-income housing developments across Missouri managed by a single management organization. This model was chosen because it allowed the researchers to target low-income Missourians in their homes and reach a greater number of Medicaid recipients. Since the survey was administered as a convenience sample and not through a random sampling process, the results from this study cannot be interpreted as a statistically valid representation of the Medicaid population. However, the results represent the experiences of many Medicaid recipients living in low-income housing across Missouri.

## **Data Collection**

Residents of McCormack Baron Ragan housing were recruited to participate in a two-part survey. Demographic information was collected from the residents on the standard data collection form used by the housing management company. (See Appendix B). Lower income residents typically provide this information to the housing management on an annual basis to maintain their subsidized housing status. Standard data collected included: age, sex, income, education, and household size. Four questions were added to the demographic form asking residents general questions about their health and health care.

In addition, residents were asked if they would participate in a longer survey about their health insurance coverage. If residents agreed to participate, a longer oral survey was conducted with trained interviewers to measure the experiences of the residents since the changes were made to the Medicaid program in July of 2005. (See Appendix C).

The study employed interviewers who lived or worked with low-income populations to conduct the oral interviews with the residents. The interviewers were able to succeed in reaching the residents due to their knowledge of the community. Interviewers contacted the survey participants in three ways: by phone, by conducting home visits, and by holding events within the housing developments. The research team analyzed the data collected to ensure that the results were consistent across all interviewing methods. The results from all survey methods were consistent and aggregated for reporting. Interviews were conducted from September 2006 through January 2008. Residents were offered \$10 gift cards to grocery stores or other neighborhood retailers for their participation in the study.

The research team received approval from the Human Studies Committee Institutional Review Board at Washington University to conduct interviews with study participants. Researchers and interviewers completed the human studies training through Washington University and passed the certification test to ensure that all information regarding study participants was handled appropriately. Letters were sent to every household inviting them to participate in the study. (See Appendix D). In addition, the letters explained the purpose of the study and how the information obtained through the interviews would be used for reporting purposes. Interviewers were trained to review this information again with the study participants at the time of the interview. Individuals that agreed to participate in the study were interviewed.

## **Data Analysis**

Survey participants were asked if they were ever enrolled in the Missouri Medicaid program and, if so, the dates of enrollment. All participants who indicated they were enrolled in the Missouri Medicaid program in 2005 were included in the analysis. Two

exceptions were made. Women enrolled strictly for coverage of a pregnancy were not included in the analysis because they would have lost coverage 60 days postpartum regardless of the new Medicaid laws. In addition, if someone indicated that they lost coverage because they were now eligible for Medicare, they were not included in the analysis because that change was not related to the new Medicaid laws.

The research team completed the demographic and health insurance surveys with residents in 844 rental households managed by McCormack Baron Ragan. These include residents in St. Louis City, Kirksville, Springfield, Carthage, and Kansas City. These households represent 844 adult respondents and 581 children for a total of 1,425 residents. The remainder of this report provides results obtained from these in-depth interviews pertaining to 940 enrollees. The results include response data for the 359 adult residents who reported that they were enrolled in the Missouri Medicaid program at the time of the changes to the program in 2005. In addition, the results include children from 278 households, in which the parents report that their children had Medicaid coverage in 2005. There are 581 children living in these 278 households. Results for the children are reported by household and for this report are not weighted based on the number of children living in the household.

# Results

## Demographic Data

Demographic data were collected for the study population to allow for deeper analysis and to understand how the study’s population compared to the overall Missouri Medicaid population. Table 3 provides demographic information for the study population as well as the statewide Medicaid population. The age distribution of the study population is similar to the statewide Medicaid population for 18 to 19 year olds, 20 to 24 year olds, 45 to 65 year olds, and those 65 and older. It is different for children (62% to 54%) and for adults 25 to 44 (11% to 17%). Targeted efforts were made to interview families with children because of particular interest in how the changes affected this population, which could explain the oversampling of children. In addition, the researchers suspect that the study had fewer adults in the mid-range because of fewer individuals with a disability in the study due to the fact that these housing units did not specifically target this population. Additionally, the study had a greater percentage of females (80% to 68%) because an effort was made to target families and a disproportionate number of Medicaid families have women as the only adult in the household.

**Table 3. Survey Participant Age Distribution**

Age of Enrollees	Medicaid Survey Participants		State of Missouri Medicaid Population	
	Number of Survey Participants	Percentage of Residents by Age Group In our Survey	Number of Medicaid Recipients in July 2005	Percentage of Medicaid recipients By Age Group
<b>Birth – 17 years</b>	581	62%	519,352	54%
<b>18 – 19 years</b>	16	2%	28,457	3%
<b>20 – 24 years</b>	35	4%	52,236	5%
<b>25 – 44 years</b>	105	11%	160,688	17%
<b>45 – 65 years</b>	95	10%	107,045	11%
<b>65 + years</b>	108	11%	90,747	10%
<b>Total Enrollees</b>	940	100%	958,677	100%

Missouri State Division of Medical Services/ MICA Data, <http://www.dhss.mo.gov/MICA/>

**Table 4. Survey Participant Gender Data**

<b>Gender of Medicaid Enrollees</b>	<b>Adult Study Population</b>		<b>State of Missouri Adult Medicaid Population</b>	
	Number of Survey Participants	Percentage of Survey Participants	Number of Medicaid enrollees in July 2005	Percentage of Medicaid enrollees in July 2005
<b>Female</b>	267	80%	295,756	68%
<b>Male</b>	65	20%	140,589	32%

Missouri State Division of Medical Services/ MICA Data, <http://www.dhss.mo.gov/MICA/>

The education level of survey participants was as follows: 23 percent reported that they did not have a high school education; 28 percent reported completing high school or a GED; and 26 percent reported that they had received some college education. The majority of the survey participants (71%) were either unemployed or retired. A small percentage (8%) of the survey participants reported that they were currently a student. Over half (56%) of the survey participants reported that they did not have any children living in the household at the time of the survey (See Table 5).

**Table 5. Survey Participant Demographic Data**

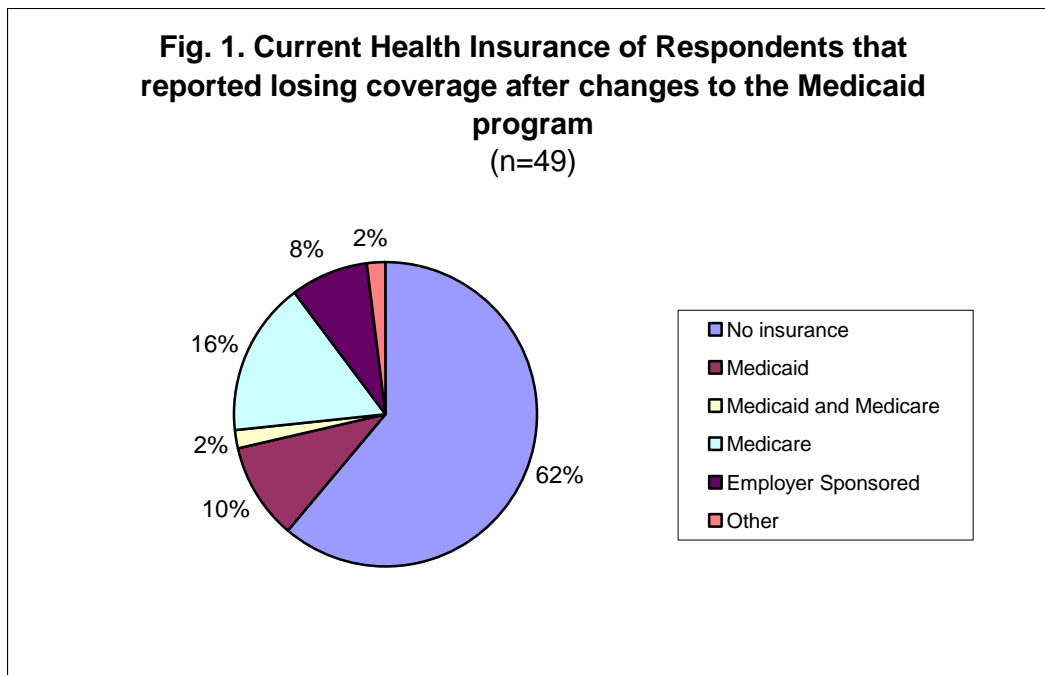
Marital Status of Adult Study Participants	Number	Percent
Single	190	53%
Married	26	7%
Divorced	39	11%
Separated	10	3%
Widowed	59	16%
Not Given	35	10%
<b>Education of Adult Participants</b>		
Did not complete High School	84	23%
Completed High School/GED	99	28%
Vocational Certification	4	1%
2 Year College	18	5%
Some college	60	17%
4 year college	11	3%
Graduate School	2	1%
Not Given	76	21%
<b>Employment Status of Adult Study Participants</b>		
Employed	63	18%
Not Employed or Retired	255	71%
Not Given	39	11%
<b>Student Status of Adult Study Participants</b>		
Student	29	8%
Not currently a student	261	73%
Not Given	69	19%
<b>Number of Children of Adult Study Participants</b>		
No Children	201	56%
One Child	62	17%
Two Children	50	14%
Three Children	26	7%
Four Children	14	4%
Five+ Children	6	2%

## Results from Adult Surveys

### ***Have Medicaid recipients experienced changes in health insurance coverage?***

Survey participants that were covered by Missouri Medicaid in 2005 were asked if they had experienced changes to their Medicaid coverage since July of 2005. Approximately 15 percent of survey participants reported that they lost coverage through Medicaid since the summer of 2005. An additional 32 percent reported that they had experienced changes in their Medicaid coverage. Changes to coverage cited by respondents included: loss of treatments or services, increased costs for medications, increased costs for doctor visits, and increased spend-down amounts. The remaining 52 percent of survey respondents reported that they had not experienced any changes in their Medicaid coverage since the summer of 2005.

Respondents were also asked about their health insurance at the time of the survey. Of those that reported that they had lost Medicaid coverage in 2005, almost two-thirds (62%) said they were uninsured at the time of the survey. Only 8 percent of those who lost their Medicaid coverage were able to access employer sponsored insurance. An additional 28 percent were able to gain public insurance coverage through Medicaid, Medicare, or both (see Figure 1).



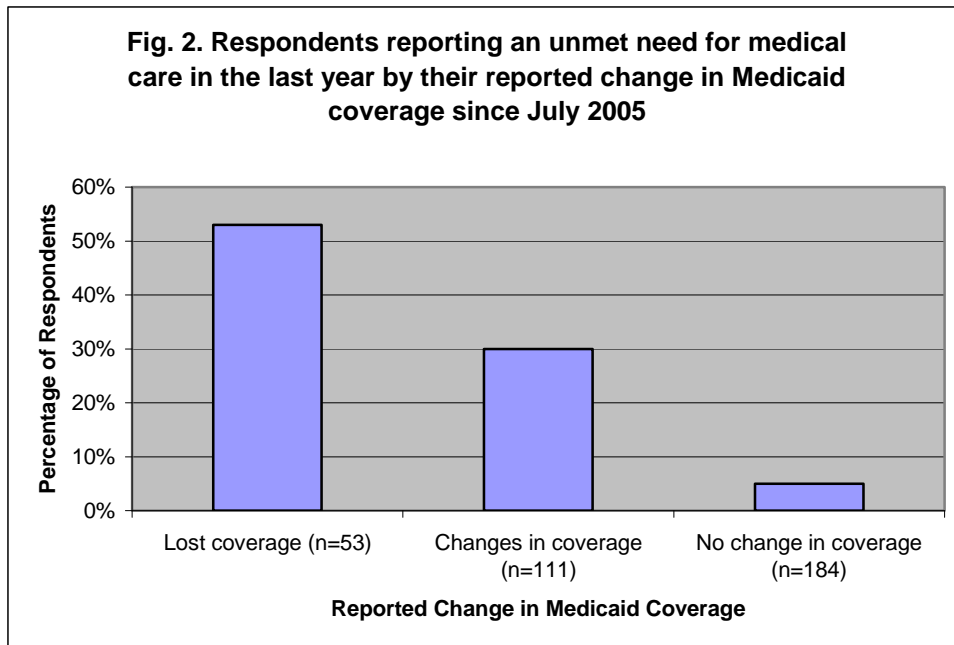
***Did the residents enrolled in Medicaid at the time of the changes to the program experience changes in their ability to obtain health care services?***

Survey participants were asked two primary questions to measure their ability to access health care services since the changes were made to the Medicaid program in 2005.

First, they were asked if they had experienced a time in the last year when they needed medical care, but they had not received it. One out of five (20%) survey participants reported that they had experienced a time in the past year that they needed medical care, but had not received it. The respondents were then placed in subgroups based on the changes that they had reported in their Medicaid coverage since the summer of 2005:

- lost Medicaid coverage,
- still covered but reported changes to Medicaid coverage, and
- reported no change to Medicaid coverage.

Of those who lost Medicaid coverage, 53 percent reported that they have needed medical care in the past year and not received it (see Figure 2).

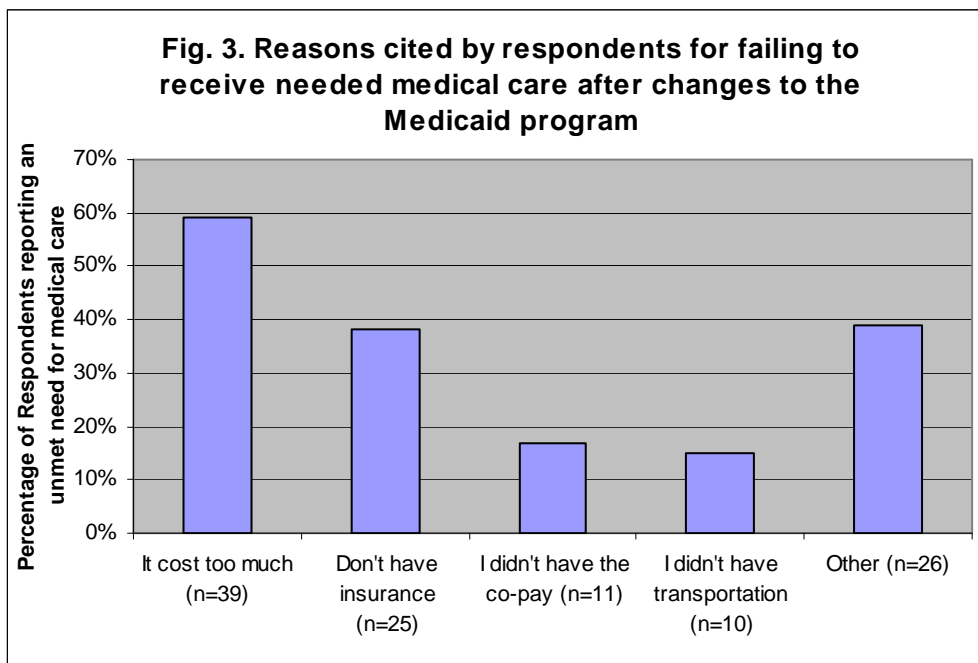


Approximately 30 percent of respondents who experienced a change in their Medicaid coverage responded that they had needed medical care in the past year and had not received it. Finally, only 5 percent of respondents who reported no change in their

Medicaid coverage answered that they had had a need for medical care in the past year and not received it.

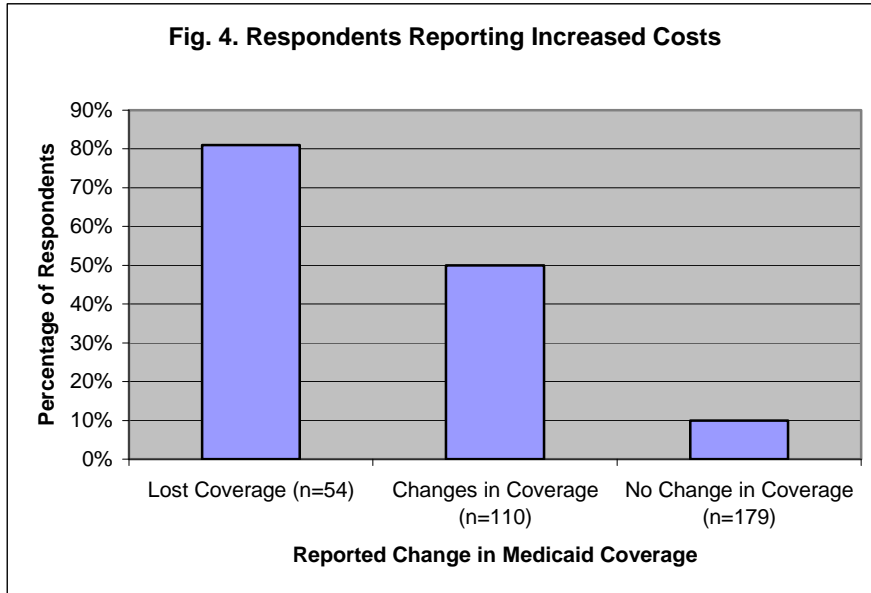
Respondents who stated that they had needed medical care in the past year but had not received it were asked to identify the main reasons that they did not receive care.

Approximately half of all respondents stated that one of their reasons for not receiving medical care was that it cost too much and/or they did not have health insurance. Other frequently cited reasons for not receiving medical care were: lack of co-payment, the doctor/hospital would not accept their insurance, and they did not have transportation (see Figure 3).

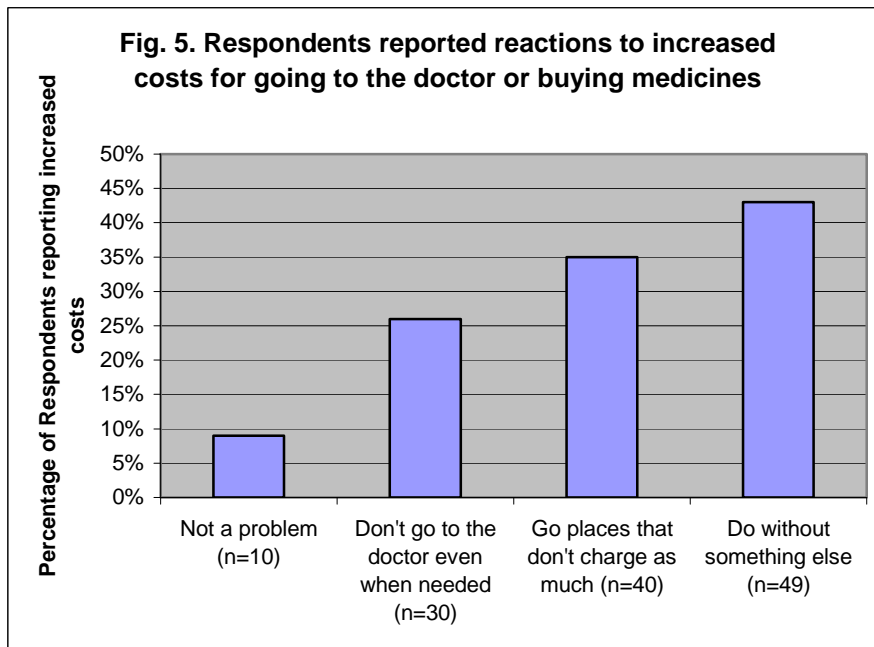


Survey participants were also asked if they had experienced increased costs for going to the doctor or buying medicines in the past year. Over one-third (34%) of all survey participants reported that their costs for going to the doctor or buying medicines had increased in the past year. The survey responses were then stratified based on the changes that the respondents reported to their Medicaid coverage. Four out of five respondents (81%) who reported losing coverage through Medicaid said their costs had increased; half of respondents (50%) who experienced changes in coverage reported that

their out-of-pocket costs had increased; and 10 percent of respondents that had not experienced changes in coverage reported that their costs had increased (see Figure 4).

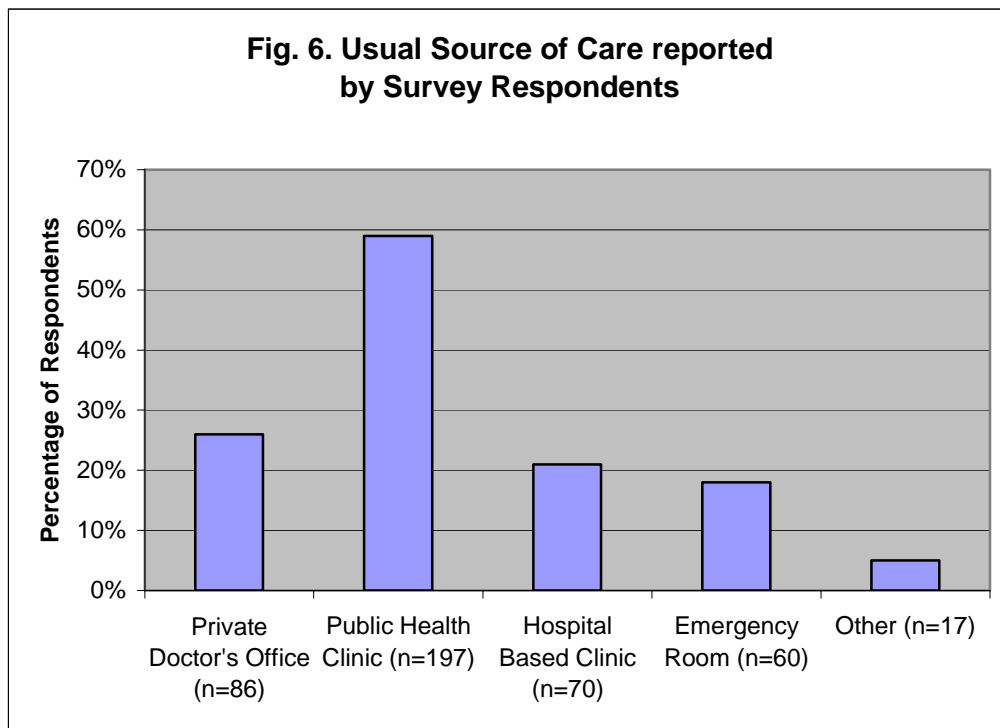


Respondents indicating that they had experienced increased costs for the doctor or medicines were then asked how they manage the increased costs. The top three responses were: do not go to the doctor even when they need to, do without something else, and go places that don't charge as much (see Figure 5).



***Do the residents that were enrolled in Medicaid in the summer of 2005 seek different services after the changes were made to the program in 2005?***

Survey participants were asked if they had a place they usually go when they need medical care. Almost all (95%) survey participants reported that they had a usual place or multiple places that they go for medical care. Over half of the respondents mentioned that they usually go to a public health clinic for their care. Other frequently cited sources of care include: a private doctor's office, a hospital-based clinic, and a hospital emergency room (see Figure 6). About one in seven (14%) survey participants reported that their usual source of care had changed in the last year.



***Have the residents that were enrolled in Medicaid in the summer of 2005 experienced a change in their health status?***

Survey respondents were asked about changes in their health status in two ways to determine if their health status had changed since the time of the changes to the Medicaid program. First, interviewers inquired if the respondent's health had changed because of changes in their health insurance. Overall, almost one in five (19%) survey participants enrolled in Medicaid at the time of the changes to the program attribute a change in their health to

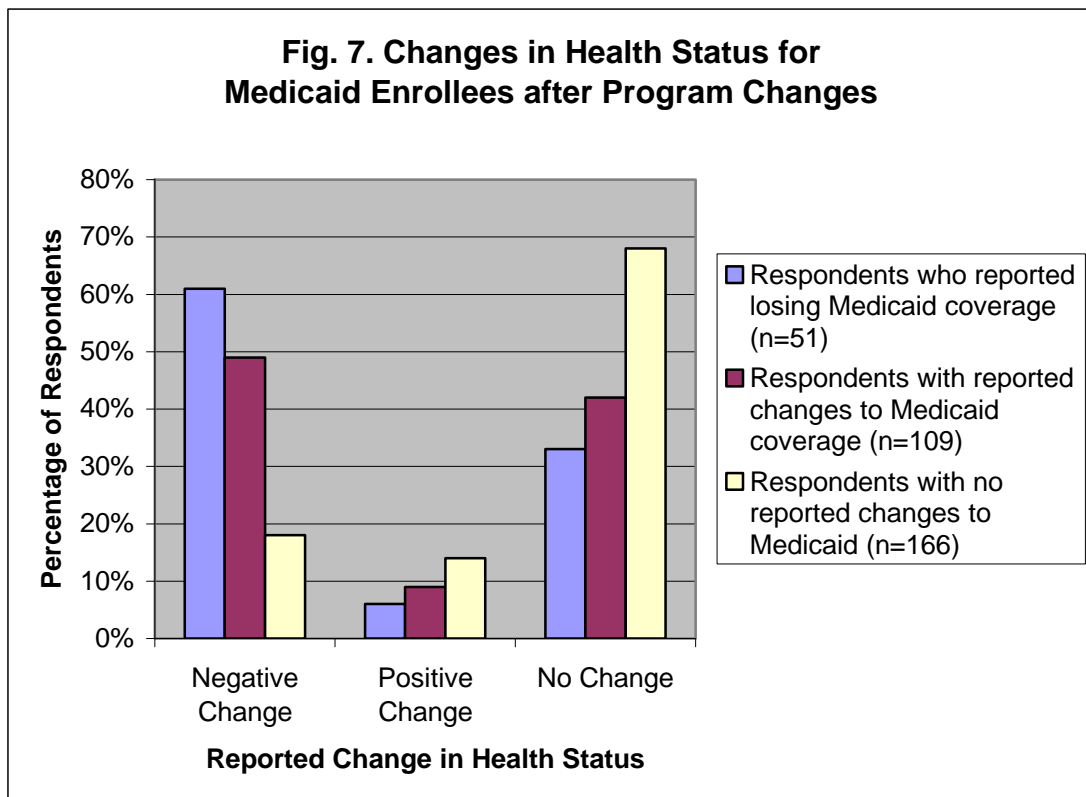
changes in their health insurance, and 12 percent of survey participants report that a change in their health had affected their ability to work.

Second, respondents were asked to rate their health status on a scale of zero to ten before and after changes in the Medicaid program. Overall, the results indicated that:

- 35 percent experienced a negative change in health status,
- 11 percent experienced a positive change in health status, and
- 54 percent experienced no change in health status.

The results from this question were then analyzed for only those who reported a change in or loss of their Medicaid coverage after 2005 (see Figure 7). For this group:

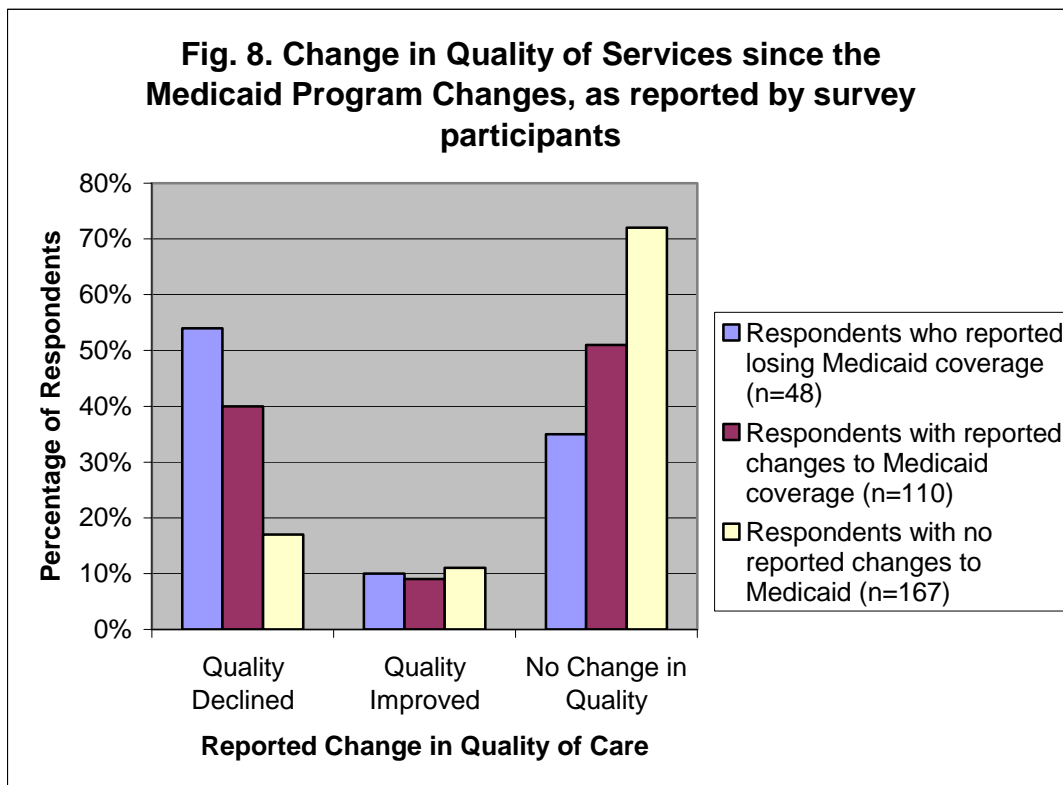
- 53 percent reported a negative change in health status,
- 8 percent reported a positive change in health status, and
- 39 percent reported no change in health status.



**Have residents experienced a change in the quality of health care services they receive since the changes were made to the Medicaid program in 2005?**

Survey participants were asked to rate the quality of the health care services they received before and after the changes were made to the Medicaid program in 2005. The respondents were asked to rate the services they received on a scale of zero to ten. Close to one-third (30%) of respondents reported a decrease in the quality of health care services after the changes to the Medicaid program in 2005. About one in ten (11%) respondents reported an increase in the quality of health care services since the changes. Over half (59%) did not report any change in the quality of their health care services.

Breaking these results down by subgroup for individuals that reported they had experienced a change in or loss of their Medicaid coverage shows that 44 percent of respondents reported that the quality of health care services they received had decreased since the changes, 10 percent said the quality of health care services had improved, and 46 percent reported no change in the quality of their health care services (see Figure 8).

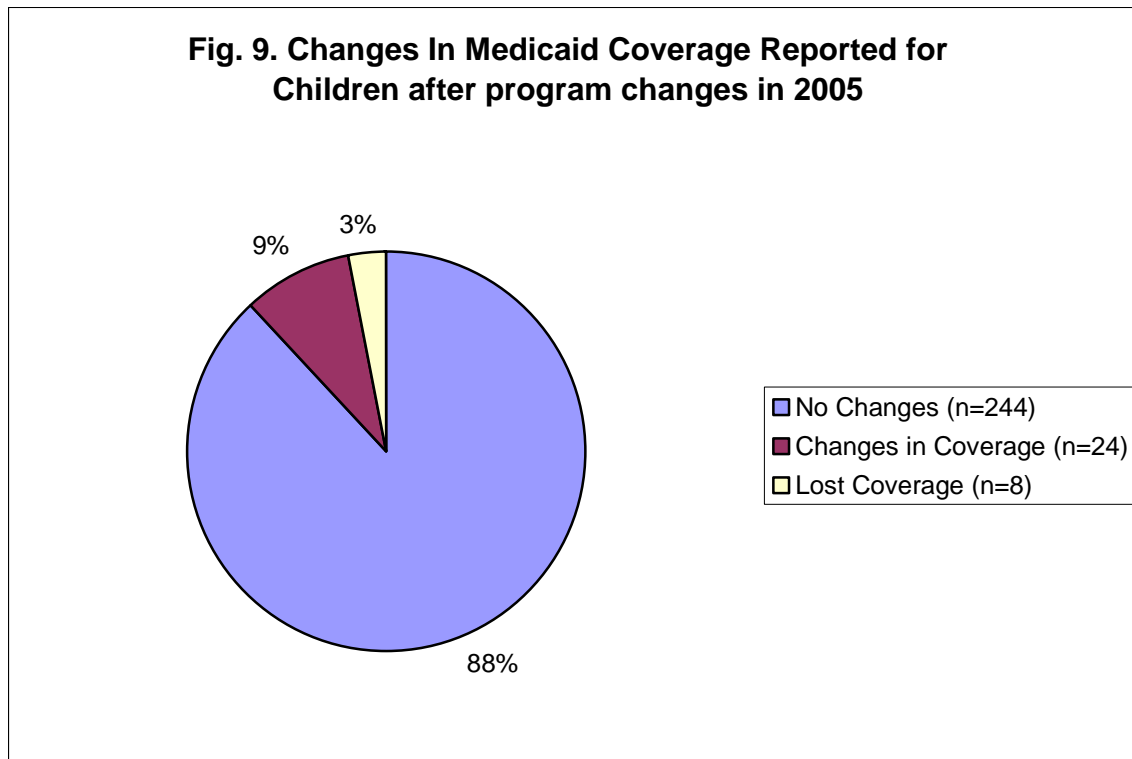


## Results from Children Surveys

Adult survey participants with children living in the household were asked to complete an additional survey focused on their children's Medicaid coverage. The results for the children's survey were included in the analysis if the children were enrolled in Medicaid in 2005. Respondents from 278 households answered the children's survey. There are 581 children living in these 278 households. The survey respondents answered one set of questions for all of the children in the household. The results of the 278 households are presented here.

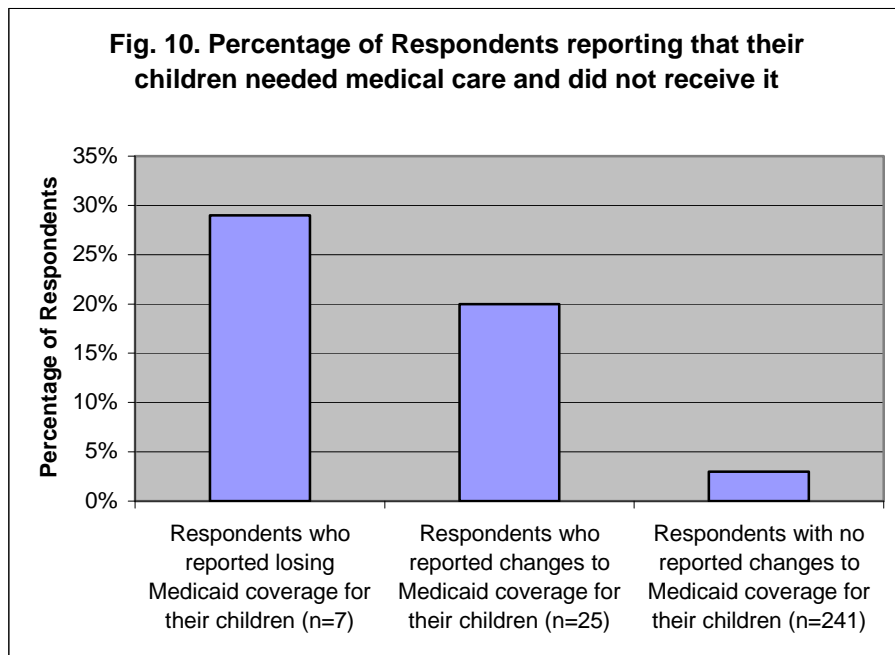
### ***Did Children Experience Changes in Medicaid Coverage?***

Survey participants whose children were covered by Missouri Medicaid in 2005 were asked about their Medicaid coverage since the summer of 2005. Most of the children (88%) experienced no change in their Medicaid coverage after the changes in 2005, while 3 percent reported that their children lost Medicaid coverage and 9 percent reported that their children had experienced changes in their coverage (see Figure 9).



***Did the children enrolled in Medicaid at the time of the changes to the program experience changes in their ability to obtain health care services?***

Survey participants were asked questions to measure their ability to access health care services for their children since the changes to the Medicaid program. One in twenty (5%) survey participants reported that they had experienced a time in the past year when their children needed medical care, but had not received it. Respondents were then grouped based on the changes they had reported in their children’s Medicaid coverage (see Figure 10). One in five respondents (20%) who reported that their children had a change in their Medicaid coverage since 2005 also reported that their children had needed medical care in the past year and not received it. Only 3 percent of respondents that reported no change in their children’s Medicaid coverage answered that their children had needed medical care in the past year and not received it.



Next, survey participants were asked about their ability to obtain Medicaid coverage for their children through the MC+ program (Missouri’s version of the State Children’s Health Insurance Program (SCHIP)). Of the respondents that said their children were enrolled in MC+, 7 percent reported that their costs had increased for enrolling their children in the Medicaid MC+ program since the changes in 2005.

***Did the survey participants seek different services for their children after the changes were made to the program in 2005?***

Overall, almost all (99%) survey respondents reported that their children had a usual place to go for medical care. A few (5%) reported that their usual source of care had changed in the last year.

***Have the children of survey participants that were enrolled in Medicaid in the summer of 2005 experienced a change in their health status?***

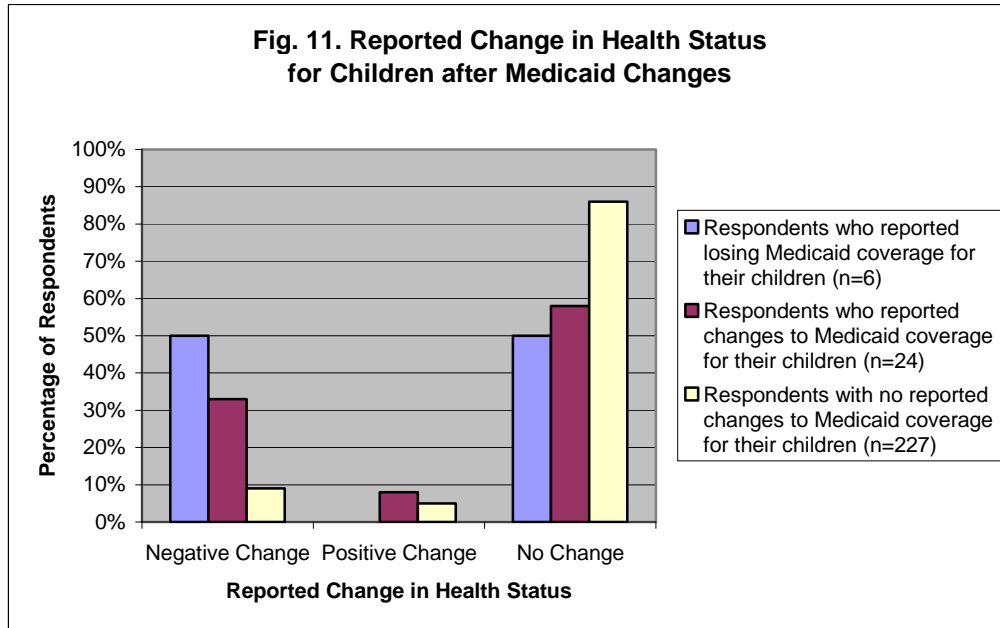
Interviewers posed questions to survey respondents regarding changes in the health status of their children in two ways. First, respondents were asked if they felt their children's health had changed because of changes in their health insurance. Overall, 5 percent of survey participants with children enrolled in Medicaid at the time of the changes reported that their children's health had changed because of changes in their health insurance.

Second, respondents rated the health status of their children on a scale of zero to ten before and after the changes were made to the Medicaid program. Overall, the study participants reported:

- 12 percent of their children experienced a negative change in health status since the changes to the Medicaid program,
- 5 percent of their children experienced a positive change in health status, and
- 83 percent experienced no change in health status.

The results to this question were then examined for respondent's who reported changes in or loss of their children's Medicaid coverage. For this subset:

- 37 percent reported a negative change in health status,
- 7 percent reported a positive change in health status, and
- 57 percent reported no change in health status (see Figure 11).



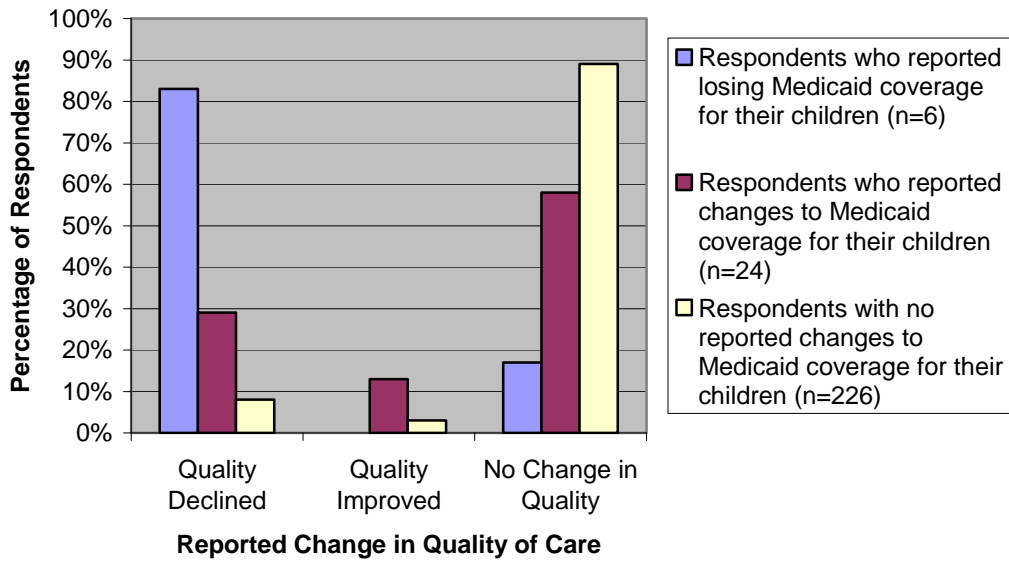
***Have the children of survey participants experienced a change in the quality of health care services received since the changes to the Medicaid program in 2005?***

Survey participants were asked to rate the quality of the health care services their children received before and after the changes were made to the Medicaid program in 2005. The respondents were asked to rate the services that their children received on a scale of zero to ten. Overall, one in ten (11%) respondents reported that their children had experienced a decrease in the quality of health care services. Less than one in twenty (4%) respondents reported that their children had experienced an increase in the quality of health care services and approximately 85 percent of survey participants did not report any change in the quality of health care services for their children.

When examining the same results for children who had experienced a change in or loss of their Medicaid coverage, the study found:

- 40 percent reported the quality had decreased,
- 10 percent said the quality had increased, and
- 50 percent reported no change in the quality of the health care services for their children (see Figure 12).

**Fig. 12. Reported Change in Quality of Care for Children since Medicaid Program Changes**



## Discussion

Since 2005, Missouri has seen a drop in overall Medicaid enrollment by approximately 12 percent. This study found that 15 percent of adults lost their Medicaid coverage since 2005. Of those who lost coverage, almost two-thirds (62%) reported not having insurance at the time of the survey. This finding supports the conclusion that finding alternative coverage after losing Medicaid has been difficult for low-income Missourians.

The study also found that the loss of health coverage relates to the ability to get needed medical care. One in five (20%) adult respondents reported a time in the past year when they needed medical care but did not receive it. For those who lost coverage the percentage more than doubles to 53 percent. This is in contrast to those who experienced no change in Medicaid coverage where only 5 percent reported not receiving needed medical care. These results are similar to the findings of a study conducted of Oregon Medicaid enrollees after changes made to that state's Medicaid program. In the Oregon study, 67 percent of individuals that lost Medicaid coverage reported an unmet health care need compared to 28 percent of those with stable Medicaid coverage.<sup>2</sup>

The current study also found that 81 percent of those who lost Medicaid coverage experienced an increase in medical costs and that one-third did not go to the doctor as a result, even when they believed they needed to go. Again, these results are consistent with the Oregon study.<sup>3</sup> The conclusion drawn from this is that insurance is an important contributor to accessing needed medical care for low-income populations. Additionally, specific changes to the Missouri Medicaid program impacted the ability of low-income Missourians to get needed medical care.

Health status and productivity also seem to be related to health insurance for low-income Missourians. More specifically, when benefits are taken away or reduced, more people report a negative change in health status. One in five adult respondents reported that a

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<sup>2</sup> Carlson, Matthew, Jennifer DeVoe, and Bill Wright, "Short-Term Impacts of Coverage Loss in a Medicaid Population: Early Results From a Prospective Cohort Study of the Oregon Health Plan." *Annals of Family Medicine* 4 (2006):391-398; Bill Wright, Matthew Carlson, Tina Edlund, Jennifer DeVoe, Charles Gallia, Jeanene Smith, "The Impact of Increased Cost Sharing on Medicaid Enrollees," *Health Affairs* 24, no. 4 (2005): 1106-1116.

<sup>3</sup> Ibid.

change in their health status was related to a change in their Medicaid coverage. Additionally, 12 percent of respondents reported that a change in their health affected their ability to work. Furthermore, of the subset of respondents that had a change in or loss of their Medicaid coverage, 53 percent reported a decline in their health status compared to before changes in their Medicaid coverage. The results also show that quality of health care is related to health insurance for low-income individuals. Close to half (44%) of those who experienced a reduction or loss of Medicaid benefits reported a decrease in the quality of health care received.

While most of the changes were directed at adults, this study was also interested in the experience of children as a result of these changes. Although premiums and copayments did increase for some families, the results indicated that most children (88%) did not experience a change in coverage. However, those who did experience a change were more likely to need medical care but not receive it. As with adults, children were more likely to experience a negative change in health status if they had a reduction in Medicaid benefits. The same is true for quality of health care.

The biggest impact of the 2005 Missouri Medicaid changes was on adults. Health status, ability to get needed care, ability to work, and quality of care were all affected by a reduction or elimination of Medicaid benefits for low-income Missouri residents. Ultimately, 90 percent of those respondents who lost their Medicaid coverage in 2005 either regained or became newly eligible for public coverage through Medicaid and/or Medicare (28%) or they were added to the ranks of uninsured Missourians (62%). These results are supported by the 2007 Census Bureau report that found that Missouri's uninsured population increased from 668,000 to 772,000.<sup>4</sup> This 14 percent increase in one year, caused the percentage of uninsured Missourians to increase from 11.7 to 13.3 percent. This study supports the conclusion that much of this growth in the uninsured can be tied to the decrease in Medicaid coverage in 2005.

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<sup>4</sup> U.S. Census Bureau, "Table HI05. Health Insurance Coverage Status and Type of Coverage by State and Age for All People: 2006," *Current Population Survey 2007 Annual Social and Economic Supplement*, [http://pubdb3.census.gov/macro/032007/health/h05\\_000.htm](http://pubdb3.census.gov/macro/032007/health/h05_000.htm).

# Appendix A: Data Collected

## Adult Survey

Survey Question		Percentage of Households
<i>Do you currently have health insurance?</i> N=356		
	Yes	90%
	No	10%
<i>Type of Health Insurance</i> N=324		
	Medicaid	50%
	Medicaid & Medicare	40%
	Medicaid & Other	1%
	Medicare	6%
	Employer	2%
	Other	1%
<i>Have you had changes to your Medicaid since the summer of 2005?</i> N=352		
	Yes	48%
	No	52%
<i>If you have had changes to your Medicaid, what have you lost or has been changed? (Indicate all that apply)</i> N=352		
	Lost coverage entirely	15%
	Lost services or treatments	26%
	It costs more to get medications	7%
	It costs more to go to the doctor	4%
	Other	3%
<i>Has there been a time in the last year that you needed medical care, but you did not get it?</i> N=353		
	Yes	19%
	No	81%
<i>What are the main reasons you did NOT get the medical care you needed?</i> Mark all that apply n=77		
	It cost too much	65%
	I don't have insurance	47%
	I owed money to my doctor	3%
	I couldn't get an appointment as soon as I wanted	9%
	Doctor/hospital would not accept my insurance	10%
	I didn't have the co-pay	16%
	I don't have a doctor	8%

	It takes too long to travel to the doctor's office/clinic	4%
	The office wasn't open when I could get there	0%
	I didn't have childcare	1%
	I didn't have transportation	12%
	Other	5%
<i>Is there a place you usually go to receive medical care? N=349</i>		
	Yes	95%
	No	5%
<i>If yes – Where do you usually go when you need medical care? (mark all that apply) N= 331</i>		
	A private doctor's office	25%
	A public health clinic	59%
	A hospital-based clinic	20%
	A hospital emergency room	17%
	Other	2%
<i>In the last year has the place you usually go to receive medical care changed? N=344</i>		
	Yes	16%
	No	84%
<i>Have your costs for going to the doctor gone up? N=347</i>		
	Yes	34%
	No	66%
<i>If Yes – How do you manage? N=148</i>		
	Not a problem	8%
	Work more hours	4%
	Don't go to the doctor even when I need to	30%
	Go places that don't charge as much (IE: free/low-cost clinic, ER)	33%
	Do without something else	38%
<i>Has your health changed because of changes in your health insurance? N=343</i>		
	Yes	19%
	No	81%
<i>Has a change in your health affected your ability to work? N=228</i>		
	Yes	12%
	No	88%
<i>Have you lost access to free transportation through Medicaid? N=332</i>		
	Yes	17%
	No	83%

<i>Have you been able to afford your medications?</i> N=345		
	Yes	75%
	No	25%
<i>Has your ability to afford your medications changed?</i> N=338		
	Yes	34%
	No	66%

## Children's Survey

Survey Question		Percentage of Households
<i>Do your children currently have health insurance?</i> N=277		
	Yes	95%
	No	5%
<i>Have your children had changes to their Medicaid since the summer of 2005?</i> N=276		
	Yes	12%
	No	88%
<i>Has there been a time in the last year that your children needed medical care, but they did not get it?</i> N=274		
	Yes	5%
	No	95%
<i>Did your costs for enrolling your children in MC+ go up since the summer of 2005?</i> N=169		
	Yes	7%
	No	93%
<i>Have you seen a change in your children's health because of changes in their health insurance?</i> N=258		
	Yes	5%
	No	95%
<i>Is there a place you usually take your children to receive medical care?</i> N=271		
	Yes	99%
	No	1%
<i>In the last year has the place you usually take your children changed?</i> N=260		
	Yes	5%
	No	95%

# Appendix B: Survey Document

<b>Resident Demographic Survey</b>
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Name \_\_\_\_\_ Effective Date \_\_\_\_\_

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Relationship: <input type="checkbox"/> Head <input type="checkbox"/> Spouse <input type="checkbox"/> Co-Head <input type="checkbox"/> Other Adult <input type="checkbox"/> Dependent <input type="checkbox"/> Foster Child <input type="checkbox"/> Live-in Attendant <input type="checkbox"/> Unknown	Race: <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> American Indian <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> Not Given	Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Undisclosed	Level of Education: <input type="checkbox"/> Did Not Complete HS <input type="checkbox"/> High School/GED <input type="checkbox"/> Some College <input type="checkbox"/> 2 Yr College Degree <input type="checkbox"/> 4 Yr College Degree <input type="checkbox"/> Graduate School <input type="checkbox"/> Vocational Certification <input type="checkbox"/> Not Given
Length of time in community: _____				
Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer, if any: _____	Number of hours worked per week: _____		
Occupation: _____		How long employed with current employer?: _____		
Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of School: _____		School Grade: _____	
School Type: <input type="checkbox"/> Headstart <input type="checkbox"/> Jr. High/Middle School <input type="checkbox"/> College <input type="checkbox"/> Job Corp <input type="checkbox"/> Daycare/Preschool <input type="checkbox"/> High School <input type="checkbox"/> Graduate School <input type="checkbox"/> Home Schooling <input type="checkbox"/> Elementary <input type="checkbox"/> Jr. College <input type="checkbox"/> Trade School <input type="checkbox"/> Not Given				
Children: <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of Children, if any: _____		Age of Children, if any: _____	
Child One Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of School: _____	School Grade: _____	School Type: _____	
Child Two Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of School: _____	School Grade: _____	School Type: _____	
Child Three Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of School: _____	School Grade: _____	School Type: _____	
Child Four Student: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of School: _____	School Grade: _____	School Type: _____	

**RESIDENT DEMOGRAPHICS SURVEY**  
**Page Two**

Name \_\_\_\_\_

Source of Health Insurance (Head of Household)							
<input type="checkbox"/> Employer		<input type="checkbox"/> Medicare		<input type="checkbox"/> Medicaid		<input type="checkbox"/> None	
<input type="checkbox"/> VA		<input type="checkbox"/> Medicare +		<input type="checkbox"/> MC+		<input type="checkbox"/> Other: _____	
Source of Health Insurance (Children)							
<input type="checkbox"/> Employer		<input type="checkbox"/> Medicare		<input type="checkbox"/> Medicaid		<input type="checkbox"/> None	
<input type="checkbox"/> VA		<input type="checkbox"/> Medicare +		<input type="checkbox"/> MC+		<input type="checkbox"/> Other: _____	
In the past 6 months, have you or your child been to the doctor?:				Has there been a time in the past 6 months that you or your child has not seen the doctor because of changes to your health insurance?			
<input type="checkbox"/> Yes				<input type="checkbox"/> Yes			
<input type="checkbox"/> No				<input type="checkbox"/> No			
Has there been a time in the past 6 months when you or child could not get medicine because of costs or changes to your health insurance?					May we contact you to ask more questions about your health insurance?		
<input type="checkbox"/> Yes					<input type="checkbox"/> Yes		
<input type="checkbox"/> No					<input type="checkbox"/> No		
INCOME FROM		Pension:	TANF:	Social Security:	General Assistance:	SSI:	Child Support:
		_____	_____	_____	_____	_____	_____
	Other Sources:	Military:	Federal Employment	Non-Federal Employment:	Indian Trust:	Business:	Unemployment:
	_____	_____	_____	_____	_____	_____	_____

**Opt Out (Resident Signature Required):**

\_\_\_\_\_

## Appendix C: Missouri Medicaid Cut-back Follow-up Questionnaire

1. Have you ever been enrolled in the Missouri Medicaid or MC+ programs? (*Did you have the red card?*)
  - Yes → [Go to QUESTION 2]
  - No → [Go to Children's Survey]
  
2. When were you enrolled in the Medicaid or MC+ program?  
 Dates (approximate) \_\_\_\_\_  
 (*If dates enrolled include any time in 2005 or 2006 proceed with the survey, if they do not include these years proceed to the children's survey*)
  
3. Have you been enrolled continuously in the Missouri Medicaid program?
  - Yes → [Go to QUESTION 5]
  - No → [Go to QUESTION 4]
  
4. What are the main reasons that you have not been continuously enrolled in the Medicaid program in Missouri?
 

<ul style="list-style-type: none"> <li><input type="checkbox"/> I was cut from the program</li> <li><input type="checkbox"/> My income increased</li> <li><input type="checkbox"/> I became eligible for Medicare</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> I did not return the application on time</li> <li><input type="checkbox"/> I got coverage through an employer or family member</li> <li><input type="checkbox"/> Some other reason: _____</li> </ul>
--	--
  
5. Do you currently have health insurance?
  - Yes
  - No
 What type?
 

<ul style="list-style-type: none"> <li><input type="checkbox"/> Missouri Medicaid or MC+</li> <li><input type="checkbox"/> Medicare</li> <li><input type="checkbox"/> Employer or family member's employer</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> VA</li> <li><input type="checkbox"/> Other type of insurance</li> <li><input type="checkbox"/> No insurance</li> <li><input type="checkbox"/> Don't know</li> <li><input type="checkbox"/> Self-paid private plan</li> </ul>
---	--
  
6. Have you lost or had changes to your Missouri Medicaid coverage since the summer of 2005?
  - Yes → [Go to QUESTION 7]
  - No → [Go to QUESTION 9]
  
7. What have you lost or what has changed about your Medicaid coverage?
  - Lost Medicaid coverage entirely
  - Lost treatments or services (please specify – use Form A as reference)
  - \_\_\_\_\_
  - It costs more to get medications

- It costs more to go to the doctor
- Other: (please explain) \_\_\_\_\_

8. If you have experienced a change in your Medicaid coverage **for yourself** how do you currently pay for healthcare expenses? (*Please check all that apply*)

- Other insurance (please specify which type) \_\_\_\_\_
- Work more
- Pay part of the costs at area health centers
- Don't get healthcare because it is too expensive
- Go to the emergency room
- Don't get prescriptions filled
- Don't take medications as often as prescribed
- Go to a free clinic
- Other (Please give an example) \_\_\_\_\_

9. Has there been a time in the last year that you needed medical care, but you did NOT get it?

- Yes → [Go to QUESTION 10]
- No → [Go to QUESTION 11]

10. What are the main reasons you did NOT get the medical care you needed?

**Mark All That Apply**

- |   |   |
|---|---|
| <input type="checkbox"/> It cost too much                                       | <input type="checkbox"/> I don't have a doctor  |
| <input type="checkbox"/> I don't have insurance                                 | <input type="checkbox"/> It takes too long to travel to the doctor's office or clinic |
| <input type="checkbox"/> I owed money to my doctor, the clinic, or the hospital | <input type="checkbox"/> The office wasn't open when I could get there                |
| <input type="checkbox"/> I couldn't get an appointment as soon as I wanted      | <input type="checkbox"/> I did not have childcare                                     |
| <input type="checkbox"/> Doctor or hospital would not accept my insurance       | <input type="checkbox"/> I did not have transportation                                |
| <input type="checkbox"/> I didn't have the co-pay                               | <input type="checkbox"/> Other (please give reason) _____                             |

11. Is there a place you usually go when you need medical care?

- Yes → [Go to Question 12]
- No → [Go to Question 13]

12. Where do you usually go to receive medical care?

- |  |  |
|--|--|
| <input type="checkbox"/> A private doctor's office                         | <input type="checkbox"/> An urgent care clinic                         |
| <input type="checkbox"/> A public health clinic or community health center | <input type="checkbox"/> I don't have a usual place                    |
| <input type="checkbox"/> A hospital-based clinic                           | <input type="checkbox"/> Don't know                                    |
| <input type="checkbox"/> A hospital emergency room                         | <input type="checkbox"/> Some other place (Please specify where) _____ |

13. In the last year, has the place you usually go when you need medical care changed because of changes in your health insurance?

- Yes → [Go to QUESTION 14]
- No → [Go to QUESTION 15]

14. Where did you usually go before the changes in your health insurance?

- A private doctor's office
- A public health clinic or community health center
- A hospital-based clinic
- An emergency room
- An urgent care clinic
- I don't have a usual place
- Don't know
- Some other place \_\_\_\_\_

15. Have your costs for going to the doctor and buying medicines gone up because of changes in your health insurance?

- Yes
- No → [Go to Question 17]

16. How do you manage?

- Not a problem
- Work more hours
- Don't go to Doctor even when I need to
- Go places that don't charge as much (IE: Free/low cost clinic, Emergency Room)
- Do without something else  
(Example) \_\_\_\_\_

### **YOUR MEDICAL COVERAGE**

17. Has your health changed because of changes in your health insurance?

- Yes (How so?) \_\_\_\_\_
- No → [Go to QUESTION 19]

18. Has this affected your ability to work?

- Yes (How so?) \_\_\_\_\_
- No

19. Have you lost access to free transportation for healthcare services through Medicaid?

- Yes
- No

20. Have you been able to afford your prescription medications?

- Yes
- No

21. Has your ability to afford your medications changed because of changes in your health insurance?

- Yes
- No

22. How would you rate your health status now?

0 – meaning terrible  
10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

23. How would you rate your health status before the changes in Medicaid program in the summer of 2005?

0 – meaning terrible  
10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

24. How would you rate the health care services you received before the changes in the Medicaid program in the summer of 2005?

0 – meaning terrible  
10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

25. How would you rate the health care services you receive now?

0 – meaning terrible  
10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

#### **CHILDREN'S MEDICAL COVERAGE**

26. Have children in your household ever been enrolled in the Missouri Medicaid program ?

- Yes → [Go to QUESTION 27]
- No → [End Survey]

27. When were your children enrolled in the Missouri Medicaid program?

Dates (approximate) \_\_\_\_\_

*(If dates enrolled include any time in 2005 or 2006 proceed with the survey, if they do not include these years end the survey)*

28. Have the children been enrolled continuously in the Missouri Medicaid program?
- Yes → [Go to QUESTION 30]
  - No → [Go to QUESTION 29]

29. What are the main reasons that the children have not been continuously enrolled in the Medicaid program in Missouri over the last 2 years?

- My income increased
- I was unable to afford the premiums
- I did not return the application on time
- I got coverage through an employer or family member
- Some other reason: \_\_\_\_\_

30. Do the children in your household currently have health insurance?

- Yes
  - No
- What type(s)?
- Missouri Medicaid or MC+
  - Medicare
  - Employer or family member's employer
  - VA
  - Other type of insurance
  - No insurance
  - Don't know
  - Self-paid private plan

31. Have the children in your household lost or had changes to their Medicaid coverage since July 2005?

- Yes → [Go to QUESTION 32]
- No → [Go to QUESTION 34]

32. What have the children lost or what has been changed about their Medicaid coverage?

- Lost Medicaid coverage entirely
- Lost treatments or services (please specify – use Form A as reference)
- \_\_\_\_\_
- It costs more to get medications
- It costs more to go to the doctor
- Premiums had to be paid to enroll them in Medicaid/MC+
- Other: (please explain) \_\_\_\_\_

33. If you have experienced a loss or change in Medicaid coverage **for your children** how do you currently pay for their healthcare expenses? (*Please check all that apply*)

- Other insurance (please specify which type) \_\_\_\_\_
- Pay part of the costs at area health centers
- Don't get healthcare because it is too expensive

- Go to the emergency room
- Don't get prescriptions filled
- The children don't take medications as often as prescribed
- Free health clinics
- Out-of-pocket
- Other (Please give an example)  
\_\_\_\_\_

34. Have the children in your household been enrolled in the MC+ (SCHIP) program in Missouri at any time in the last two years?

- Yes → [Go to Question 35]
- No → [Go to Question 37]

35. Did the costs for enrolling your child/ children in MC+ go up since the summer of 2005?

- Yes → [Go to Question 36]
- No → [Go to Question 37]

36. Are your children still in the MC+ program even though the costs went up?

- Yes
- No

37. Is there a place you usually go when your children need medical care?

- Yes
- No → [Go to Question 39]

38. Where do you usually take your children to receive medical care?

- A private doctor's office
- A public health clinic or community health center
- A hospital-based clinic
- A hospital emergency room
- An urgent care clinic
- I don't have a usual place
- Don't know
- Some other place (Please specify where)  
\_\_\_\_\_

39. In the last year, has the place you usually go when your children need medical care changed because of changes in their health insurance?

- Yes
- No → [Go to Question 41]

40. Where did you usually take your children before the changes in their health insurance?

- A private doctor's office
- A public health clinic or community health center
- A hospital-based clinic
- An emergency room
- An urgent care clinic
- I don't have a usual place
- Don't know
- Some other place

41. Have you seen a change in your child/children's health because of changes in their health insurance?

- Yes (How so?) \_\_\_\_\_
- No

42. Have your children missed school because of a change in their health status?

- Yes
- No

43. Has a change in your children's health affected your ability to work?

- Yes (How so?) \_\_\_\_\_
- No

44. Has there been a time in the last year when your children needed medical care, but they did NOT get it?

- Yes
- No → [Go to QUESTION 46]

45. What are the main reasons your children did NOT get the medical care they needed?

**Mark All That Apply**

- |   |   |
|---|---|
| <input type="checkbox"/> It cost too much                                       | <input type="checkbox"/> I don't have a doctor  |
| <input type="checkbox"/> I don't have insurance                                 | <input type="checkbox"/> It takes too long to travel to the doctor's office or clinic |
| <input type="checkbox"/> I owed money to my doctor, the clinic, or the hospital | <input type="checkbox"/> The office wasn't open when I could get there                |
| <input type="checkbox"/> I couldn't get an appointment as soon as I wanted      | <input type="checkbox"/> I did not have childcare                                     |
| <input type="checkbox"/> Doctor or hospital would not accept my insurance       | <input type="checkbox"/> I did not have transportation                                |
| <input type="checkbox"/> I didn't have the co-pay                               | <input type="checkbox"/> Other (please give reason) _____                             |

46. How would you rate your children's health now?

0 – meaning terrible

10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

47. How would you rate your children's health status before the changes to the Medicaid program in the summer of 2005?

0 – meaning terrible

10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

48. How would you rate the health care services your children received prior to the changes to the Medicaid program in the summer of 2005?

0 – meaning terrible

10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

49. How would you rate the health care services your children receive now?

0 – meaning terrible

10 – meaning great

0 1 2 3 4 5 6 7 8 9 10

Comments? \_\_\_\_\_

50. What have these changes in health status meant in your life?

Comments? \_\_\_\_\_

## Appendix D: Informed Consent Letter

Dear Resident:

A few weeks ago you were asked to complete a resident survey. At that time you answered a couple of questions about your health care coverage and you gave us permission to contact you again with additional questions regarding your health care. On (   Date   ) we will be visiting your building to ask you some additional questions about your health care.

Participation in this confidential interview is voluntary and you may decline to answer any questions. However, if you choose to participate, you will receive a \$10 gift certificate to a local grocery store for your valuable contribution to this study. Your response to these questions will be kept confidential and grouped with other residents responses. No individual's identity will be revealed.

This study is being conducted by Urban Strategies, Inc. in cooperation with Washington University Center for Health Policy. This study is supported by the Missouri Foundation for Health.

If you have any questions regarding the study, please contact Wade Baughman, at (314) 421-4200.

Thank you,

Wade Baughman  
Project Manager, Senior Services  
Urban Strategies Inc.