FACT SHEET

Medicaid Expansion Enrollment and Eligibility Update: Characteristics of Expansion Enrollees

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Saint Louis University Center for Health Law Studies &
Washington University Center for Health Economics and Policy

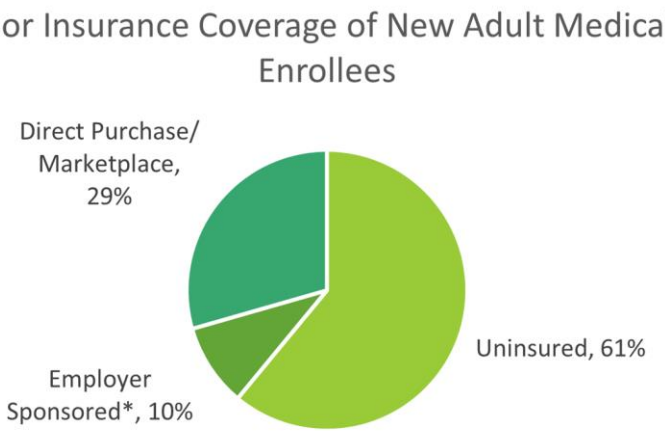
Introduction

Missouri is to expand Medicaid to include all adults age 19-64 earning up to 138% of the federal poverty line FPL ($30,305 for a family of three), starting July 1, 2021. This Fact Sheet lays out preliminary estimates of the number of people likely to enroll in the expansion during the first year, July 2021 to July 2022, as well as the key demographic characteristics of those who enroll. The number of expected enrollees and their demographic characteristics may be important background information for the implementation of the Medicaid expansion efforts, including plans for outreach, access to care and costs. In addition, these numbers can be used to help estimate any increases in the demand for health care services across the State. The Fact Sheet concludes with a description of the data used to compile these estimates, and the methods used.

Total number of people potentially eligible and enrolled for the Medicaid expansion

The number of new adults projected to enroll in the expansion of Medicaid in Missouri in the first year after July 2021 is 247,500 adults. The Governor's budget assumes that the projected enrollment for the Medicaid expansion will be 274,312 in the first year, so this estimate is within range of that projection.[1] Under the expansion, adults are eligible for Medicaid expansion under the rules which expand eligibility up to 138% of the federal poverty line.[2] These estimates reflect adjustments to previous estimates made by the Center for Health Economics and Policy,[3] and include the effects of the recession that has hit the US and Missouri since Spring 2020 (see Appendix B), but these estimates do not include adults presently enrolled in Medicaid who will shift to the Medicaid expansion group. To provide some context for the estimated new enrollees in Medicaid under the expansion, as of December 2020, there were currently 1.029 million people enrolled in the MOHealthNet program in Missouri, with the increase largely due to the requirement for "maintenance of effort," from the Center for Medicare and Medicaid Services (CMS) to keep Medicaid recipients on the rolls during the COVID-19 pandemic.[4]

Based upon experiences in other states, we expect that about 55 % of these new adults will enroll in the first month of expansion, July 2021, with about 60% enrolling by August and about 75% by November.

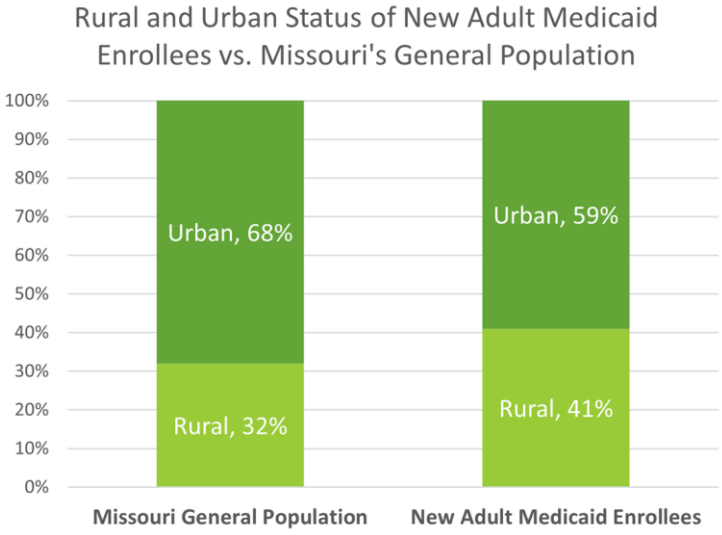


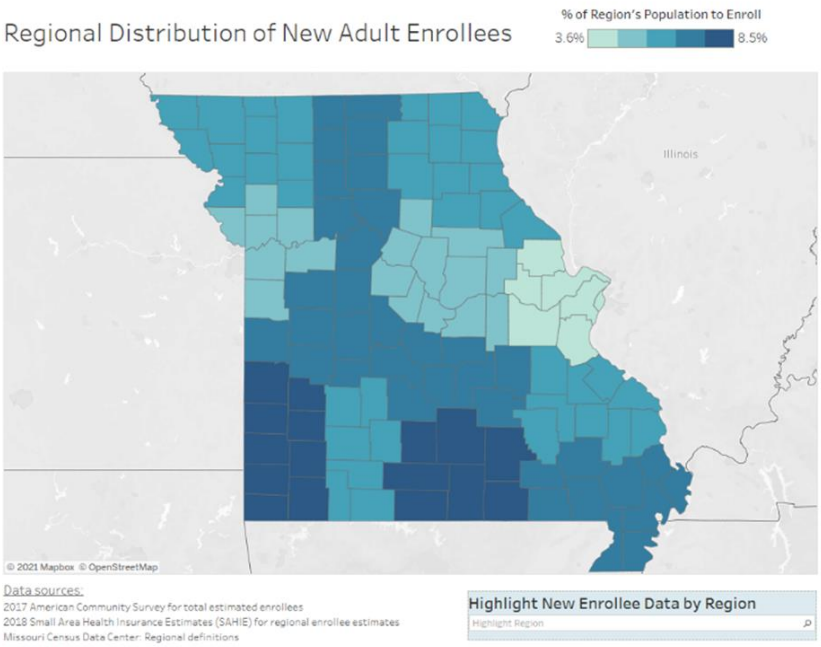
Prior insurance coverage:

Roughly three-fifths (61.9%) of the new adult Medicaid enrollees will be previously uninsured. About one-third (29.3%) will be moving from private individual insurance coverage (including those in ACA marketplace plans) and roughly 10% will drop employer sponsored coverage to move to Medicaid coverage.

Rural/urban status:

Roughly two-fifths (41%) of newly enrolled adult Medicaid recipients will live in rural areas in Missouri (as compared to only 32% of the state's overall population that lives in rural areas).





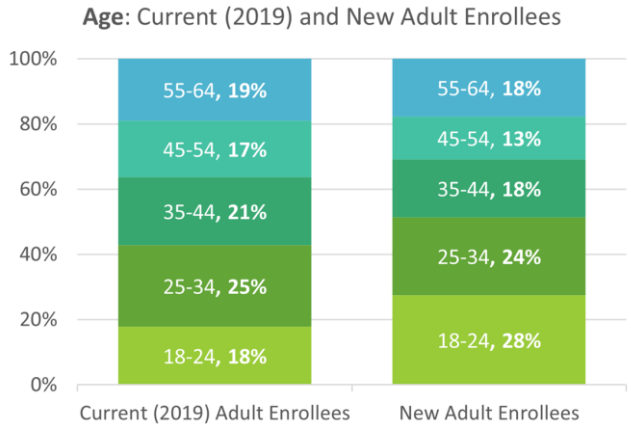
Regional distribution:

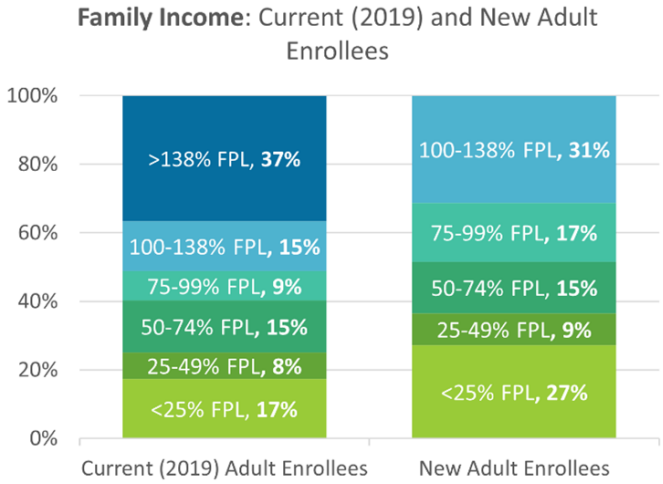
The enrollment rate in Missouri will vary between 3.6% (of the total population in the region) to 8.5% across Missouri, with the highest enrollment found in the South-Central portion of Missouri. An interactive visualization of the regional distribution, across 13 different regions in the state (defined by the Missouri Data Center; see Appendix B). The data visualization can be found here:

Map, Data Visualization (click to go website)

By clicking on a region, you can see the number of new adults likely to enroll in Medicaid during the first year.

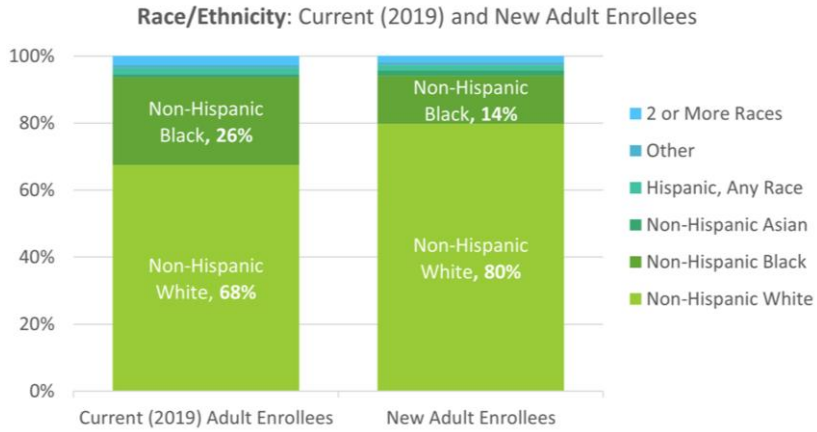
Age: Roughly half (52%) of the new adult enrollees will be under 35 years old, but roughly 20% of the new enrollees will be approaching retirement (age 55-64).





Income distribution: About one-quarter (27%) of the new adult Medicaid enrollees will have incomes below 25% of the federal poverty line (FPL), but almost half (48%) of the new eligibles will have incomes above 75% of the federal poverty line, in part because they are more likely to be employed.

Race/ethnicity: About 8 in 10 of the new adult Medicaid eligibles will be non-Hispanic white persons, while slightly over 20% will be people of color (African Americans, Hispanic, Asian, or other races).



Family structure: About two-thirds of the new adult enrollees will live in families with no children, and over two-thirds (68%) will not be parents.

Summary: The newly eligible Medicaid population will be significantly younger than the current Medicaid population, and many will have quite low incomes (less than 25% of the FPL). A disproportionate share will live in rural parts of Missouri. Roughly 60% of the new enrollees will be previously uninsured. These findings may help guide implementation efforts, as consideration is given to the current circumstances of those new enrollees in Medicaid.

Appendix A. Table of Enrollee Demographic Characteristics

*Note that the current adult Medicaid enrollees account for individuals at all poverty levels, not just below 138% FPL as with the potential new enrollee group.

Total Adult Enrollee Population					
	Adult Medicaid Enrollees (Percent of Total)				Current Adult Medicaid Enrollees
	Uninsured	Employer Sponsored	Private/ Non-Group	Total Enrollees	
Total	**61.9%**	**8.8%**	**29.3%**	**100.0%**	**100.0%**
Age Breakouts					
Adults 18-24	22.1%	51.0%	31.9%	27.5%	17.8%
Adults 25-34	27.5%	20.3%	17.3%	23.9%	25.0%
Adults 35-44	21.1%	11.6%	12.4%	17.7%	20.9%
Adults 45-54	14.2%	7.9%	12.8%	13.2%	17.3%
Adults 55-64	15.2%	9.1%	25.6%	17.7%	19.0%
Family Poverty Levels					
<25%	25.4%	34.7%	28.6%	27.2%	17.4%
25-49%	9.8%	9.0%	8.5%	9.4%	7.8%
50-74%	15.5%	9.0%	15.6%	15.0%	15.1%
75-99%	17.9%	14.1%	16.8%	17.2%	8.6%
100-138%	31.3%	33.2%	30.5%	31.3%	14.6%
>138%					36.6%*
Race/ Ethnicity					
Non-Hispanic White	76.8%	81.3%	85.3%	79.7%	67.5%
Non-Hispanic Black	16.9%	12.5%	9.7%	14.4%	26.1%
Non-Hispanic Asian	1.3%	2.0%	2.1%	1.6%	1.0%
Hispanic, Any Race	2.1%	1.1%	0.8%	1.6%	1.8%
Other	1.0%	0.4%	0.5%	0.8%	1.1%
2 or More Races	1.8%	2.8%	1.6%	1.8%	2.5%
Parent Status					
Parent	35.8%	27.4%	24.8%	31.9%	37.5%
Non-Parent	64.2%	72.6%	75.2%	68.1%	62.5%
Marital Status					
Married	23.5%	22.1%	24.9%	23.8%	26.4%
Widowed	2.0%	1.4%	2.7%	2.1%	2.8%
Divorced	16.4%	8.3%	16.5%	15.7%	17.6%
Separated	5.2%	3.0%	1.8%	4.0%	4.7%
Never Married	53.0%	65.3%	54.1%	54.4%	48.5%
Family Size					
No Children	62.4%	65.0%	72.3%	65.4%	59.8%
1-2 Children	23.6%	21.8%	17.6%	21.7%	28.5%
3-4 Children	10.2%	11.9%	9.4%	10.1%	9.4%
5+ Children	3.8%	1.3%	0.8%	2.8%	2.4%
Educational Attainment					
Less than High School	21.4%	5.4%	5.1%	15.2%	24.9%
High School Grad	41.1%	28.3%	34.5%	38.0%	44.3%
Some College	30.6%	51.9%	42.6%	36.0%	24.2%
College Grad	6.9%	14.4%	17.9%	10.8%	6.6%
Language Spoken at Home					
English only	90.1%	92.6%	93.0%	91.1%	93.4%
Spanish	4.5%	3.7%	1.5%	3.6%	3.6%
Asian & Pacific Island languages	1.3%	1.4%	2.0%	1.5%	0.8%
Other language	4.1%	2.2%	3.4%	3.8%	2.2%
Limited English Proficiency					
Yes	11.6%	6.1%	7.3%	10.2%	27.2%
No	88.4%	93.9%	92.7%	89.8%	72.8%

Appendix B. Data and Methods

The 2019 American Community Survey (ACS) 1-year estimates were used to assess the size and composition of the Missouri population eligible for Medicaid as well as the number who would potentially enroll. The ACS dataset was restricted to noninstitutionalized, U.S. citizens under 65-years-old living in households earning at or below 138% FPL. This population was then separated into three categories of current insurance coverage: employer sponsored, marketplace, and the uninsured. For this analysis, Tricare was included as part of employer sponsored insurance. Individuals who fell into one of these groupings within the restricted dataset were considered to be the Medicaid eligible population. To estimate the potential Medicaid enrollee population, we assumed distinct take-up rates to apply to each coverage group for both the adult and child populations. For adults, these rates were 73% for the uninsured, 10% for those on employer sponsored coverage, and 100% for those on marketplace coverage. For children, the rates for these groupings were 66%, 9%, and 90%, respectively. These assumptions yield approximately 227,000 adults and 42,000 children that will potentially enroll in Medicaid following expansion in July 2021, not including those who have subsequently become eligible due to the 2020 recession brought on by the COVID-19 recession (see below).

The geographic distribution of enrollees across Missouri regions was calculated apportioning the revised Medicaid enrollment estimates, using the 2018 Small Area Health Insurance Estimates (SAHIE).[5] Because of sample size considerations, results are not reported here at the county level. However, the results are aggregated up to 13 different regions in Missouri as defined by the Missouri Data Center.[6]

To calculate potential changes in enrollee numbers due to the recession that hit Missouri and the US following the onslaught of the COVID-19 pandemic, adjustments were made to the estimates from the 2019 ACS. The estimates drew upon several outside sources, including recent data on labor force figures for Missouri, to isolate the effects of the rise in unemployment and people leaving the labor force in 2020, drawn from the US Bureau of Labor. However, an estimate must be made not of the current unemployment rate, but what the unemployment rate will be in July 2021. For this, estimates from the Federal Reserve of the pace of the recovery are used. Using this estimate of the number of people who have lost employment, an estimate is made of the number of people who will have lost insurance is made, drawing principally upon a study by Dorn (2020).[7] An estimate is made of how many of these individuals will be eligible for the Medicaid expansion (that is, under 138% of the federal poverty line, using an 80% assumption), and the distribution of prior insurance coverage these individuals had before losing their employment, using Kaiser Family Foundation (2020)[8] estimates of those who will have lost private/Marketplace coverage, ESI coverage, or been previously uninsured. Finally, the take-up rates used elsewhere are applied to these estimates to draw assumptions about how many of these individuals will enroll in Medicaid when eligible.

*The views and opinions expressed in this fact sheet are those of the authors and do not reflect the official policy or position of Washington University or Saint Louis University

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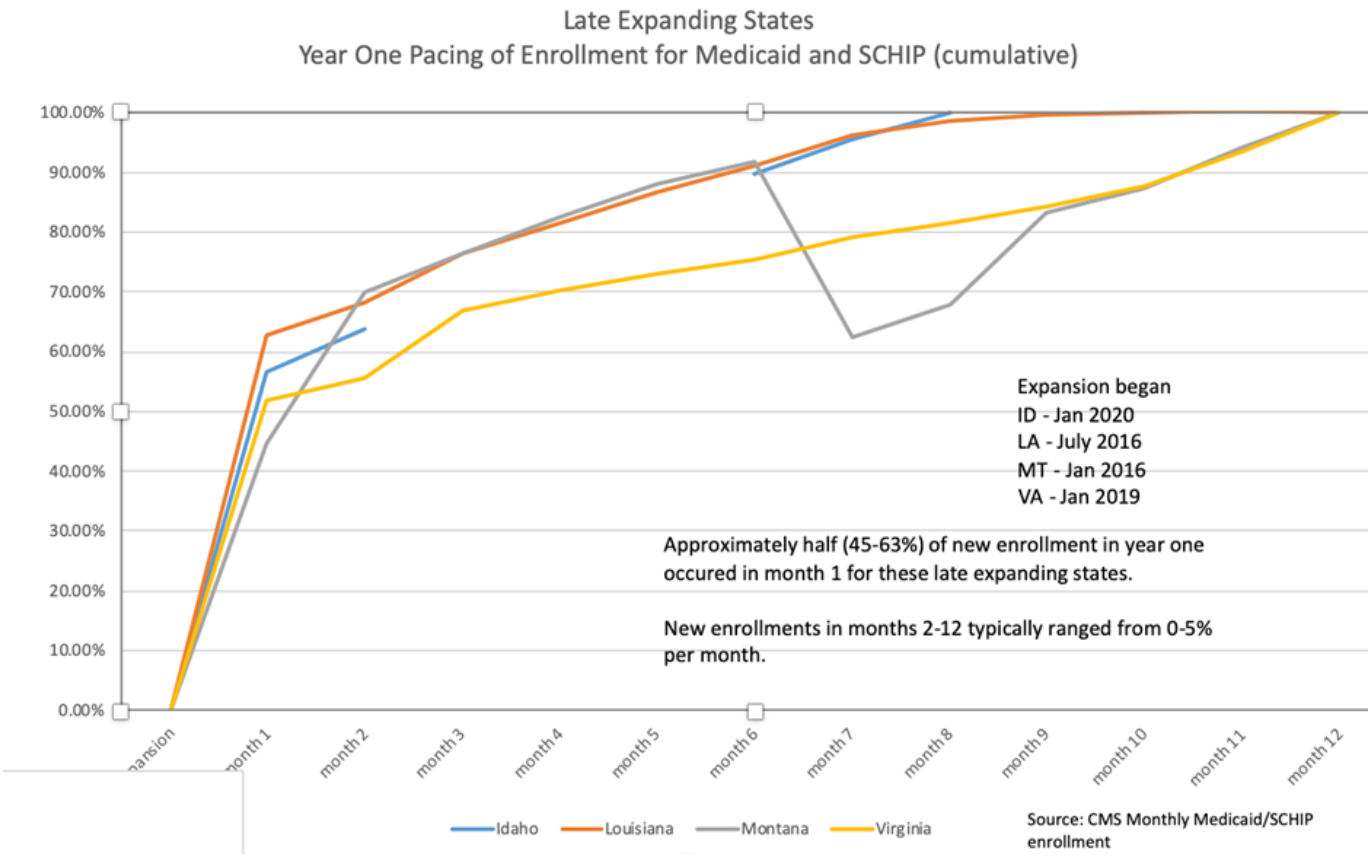
Appendix C. Data and Methods for Timing of Enrollment in Year 1

CMS, Medicaid & CHIP Monthly Enrollment Reports data from four states that expanded Medicaid in recent years were used to estimate the pace of enrollment for Medicaid expansion in Missouri. CMS monthly enrollment data includes those eligible for comprehensive benefits. The states are Idaho (January 2020), Louisiana (July 2016), Montana (January 2016, and Virginia (January 2019). In these four states approximately half (45-63%) of new enrollment in the first year of expansion occurred in the first month. New enrollment in months 2-12 typically ranged from 0-5% each month.



[1] State of Missouri, "Department of Social Services Support Divisions Fiscal Year 2022 Budget Request Book 1 of 7," page 38.

[2] Children in Missouri are currently eligible for Medicaid at a higher level of poverty (up to 300% of the FPL). It is assumed that some children currently eligible, but not currently enrolled, may enroll when their parents enroll (the so-called "woodwork effect", see Appendix B).

[3] Center for Health Economics and Policy, Washington University in St. Louis, "Analysis of the Fiscal Impact of Medicaid Expansion in Missouri," February 2019, https://publichealth.wustl.edu/wp-content/uploads/2019/04/Analysis-of-the-Fiscal-Impact-of-Medicaid-Expansion-in-Missouri-FINAL_w_Exec_Summary.pdf

[4] Department of Social Services, DSS Caseload Counter, https://dss.mo.gov/mis/clcounter/history.htm

[5] U.S. Department of Census, https://www.census.gov/content/census/en/programs-surveys/sahie.html/

[6] Missouri Data Center, Missouri Counties and regions, found here: https://mcdc.missouri.edu/geography/reference/MO_Region_Codes.html

[7] Stan Dorn, "The COVID-19 Pandemic and Resulting Economic Crash Have Caused the Greatest Health Insurance Losses in American History," FamiliesUSA, July 2020. https://familiesusa.org/resources/the-covid-19-pandemic-and-resulting-economic-crash-have-caused-the-greatest-health-insurance-losses-in-american-history/

[8] Rachel Garfield, Gary Claxton, Anthony Damico, Larry Levitt, "Eligibility for ACA Health Coverage Following Job Loss," Kaiser Family Foundation, May 2020, https://www.kff.org/coronavirus-covid-19/issue-brief/eligibility-for-aca-health-coverage-following-job-loss/