Outlook 2013

Is Montana's Health Care Workforce Ready for the Affordable Care Act?

www.csi.mt.gov/health/reports.asp

- Leif Associates
 - Health Insurance Market Study
- Bureau of Business and Economic Research
 - The Status of Montana's Health Insurance Population
 - Montana's Health Insurance Market: Prospects for 2014 and Beyond
 - An Estimate of the Economic Ramifications
 Attributable to the Potential Medicaid Expansion
 on the Montana Economy

Lots of questions remain about the Affordable Care Act

- Will health insurance premiums increase?
- Will competition emerge in the Exchange, and will it have a favorable impact on consumers?
- Will businesses dump employees into the Exchange?
- Will Medicare beneficiaries struggle to find doctors?
- Will ACA bend the health care cost curve upward instead of downward?

 Ability of health care workforce to accommodate potential added demands as uninsured become insured..



55,000

87,000

 Ability of health care infrastructure, primarily health care workforce, to absorb potential added demands..

16,000

55,000



 Ability of health care infrastructure, primarily health care workforce, to absorb potential added demands..

16,000



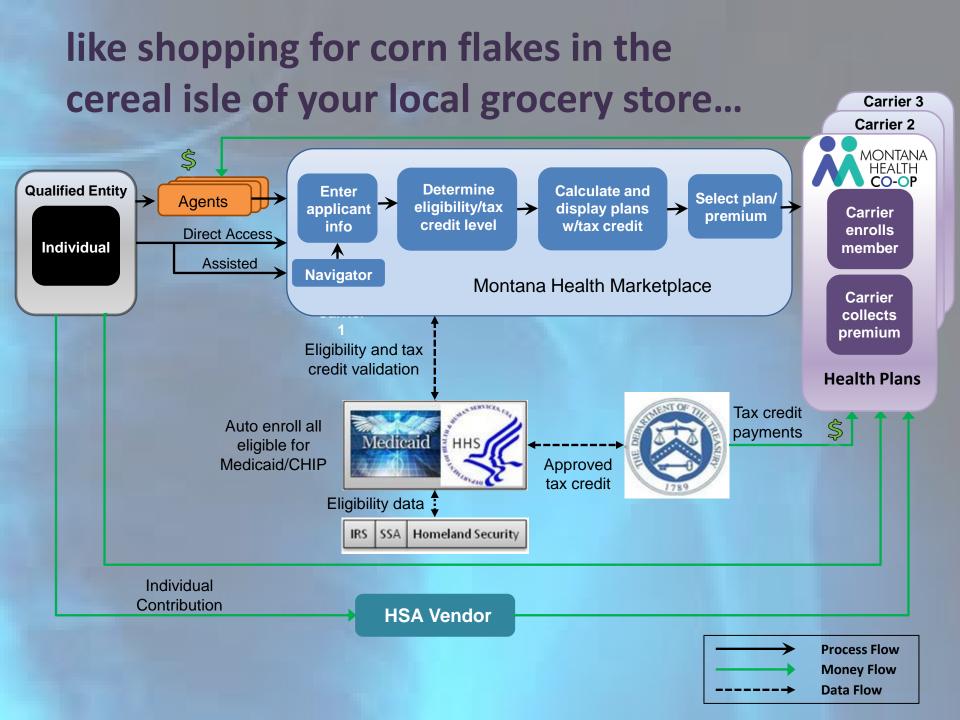
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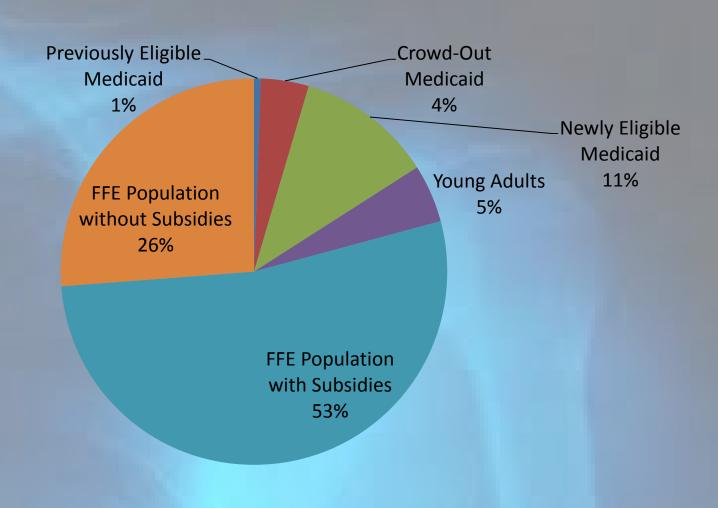
Montana family of 4: Head of Household Age 40

Family Income, % Federal Poverty Level	\$23,425 (100% FPL)	\$35,137 (150% FPL)	\$58,562 (250% FPL)	\$93,700 (400% FPL)
Premium for Silver Plan	Medicaid	\$12,130	\$12,130	\$12,130
Family Monthly Premium, % of Income	Medicaid	\$117 (4%)	\$393 (8%)	\$742 (9.5%)
Government Monthly Tax Credit	Medicaid	\$894	\$618	\$269
Maximum out- of-Pocket, exc. Premium	Medicaid	\$4,167	\$6,250	\$8,333

Many ACA provisions focus on primary care...

- Reimbursement (10% bonuses), parity between
 Medicaid and Medicare,
- Welcome to Medicare exams, preventive services with no cost sharing,
- Individual mandate,
- Comprehensive Primary Care Initiative pilot,
- Patient Centered Homes (ACO's, Medical Homes),
- Community Health Centers

354,000 May Change Health Insurance



Primary Care Provider Deficit: 2008 to 2025

- 52,000 more docs needed
 - 33,000 due to population growth
 - 10,000 due to aging
 - 8,000 due to Affordable Care Act

Source: Winston Liaw et al, Annals of Family Medicine, November/December, 2012

Pre ACA Primary Care Demand in Montana, Flathead County

	Expected Source of Payment					
	Employer Sponsored Insurance	Direct Purchase	Medicare	Medicaid	No Insurance	Unknown
Montana	742,310	295,037	415,287	141,863	94,653	47,382
Flathead County	64,414	26,243	36,229	9,989	12,281	4,015

ACA Impact on Health Care Demand, Montana

	Primary Care	Surgical Specialty	Medical Specialty	Hospital Outpatient	Hospital Emergency	Total Additional Office Visits
Private Coverage	131,999	39,485	32,713	(1,979)	(19,795)	182,423
Medicaid	129,283	10,853	10,102	44,846	27,713	222,797
Total Additional Office Visits	261,281	50,338	42,815	42,867	7,919	405,220

Source: American Community Survey, National Ambulatory Medical Care Survey, BBER

ACA Impact on Health Care Demand, Flathead County

	Ambulatory Care Setting					Total Additional Office Visits
	Primary Care	Surgical Specialty	Medical Specialty	Hospital Outpatient	Hospital ER	
Private Insurance	14,890	4,454	3,690	(223)	(2,233)	20,578
Medicaid	13,362	1,122	1,044	4,635	2,864	23,028
Total Increase	28,252	5,576	4,734	4,412	631	43,605

Primary Care Capacity

- 2009 study by Davis, Roberts, White
 - Includes Family Practice, Internal Medicine,
 Pediatrics
 - Mid-level practitioners excluded (nurse practitioners, physicians' assistants)
- U.S. DHHS Guideline of 4,200 office visits/year
 - Contrasts with 5,400 office visits per AMA guidelines

Estimated Shortage/Surplus of Primary Care Office Visits, Montana

Primary Care Supply	Primary Care Demand	Shortage (-) Surplus (+) Office Visits per Year
2,079,000	1,997,814	+ 81,186

Estimated Shortage/Surplus of Primary Care Office Visits, Flathead County

Primary Care Supply	Primary Care Demand	Shortage (-) Surplus (+) Office Visits per Year
176,400	181,423	- 5,023

And the earnings forecast from last year?

- Depends on whether you view glass as half full or half empty
- Major revisions in key growth rates 2010-2011
 - BEA revised health care earnings growth from 3.9% to 3.2 %
 - CMS revised Personal health care spending growth from 4.6% to 3.9%
- Impact of outsourcing on health care earnings

Health Care Earnings, 2012-2014



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- "I don't believe there's any problem in this country, no matter how tough it is, that Americans, when they roll up their sleeves, can't completely ignore."
 - George Carlin 1937-2008

