



MILWAUKEE HEALTH CARE

PARTNERSHIP

Milwaukee Premium Assistance Program Feasibility Analysis

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Revised: March 1, 2023

MHCP Mission

The Milwaukee Health Care Partnership is a public/private consortium dedicated to **improving health care** for low-income, underserved populations in Milwaukee County, with the aim of contributing to improved:

- health outcomes,
- health equity,
- and lowering the total cost of care.

Focus on Health Care “Access”

- *Availability*
- *Accessibility*
- *Acceptability*
- *Linkages*

Addressing Select Community Health Issues in Collaboration with Others

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MISSION: Established in 2007, the Milwaukee Health Care Partnership (MHCP) is a public/private consortium dedicated to improving health care for low-income, underserved populations in Milwaukee County with the aim of improving health outcomes, advancing health equity and lowering the total cost of care.

	COVERAGE	ACCESS	CARE COORDINATION	COMMUNITY HEALTH
	<p>GOAL: Secure and retain adequate and affordable health insurance for all</p> <p>Insurance Outreach and Enrollment</p> <ul style="list-style-type: none"> Increase and Maintain Enrollment in Medicaid, Marketplace and Other Insurance Options and Improve Health Insurance Literacy * (MKEN/CWI) Support Local Implementation of Medicaid Eligibility and Enrollment Reforms (MKEN/CWI/DHS) 	<p>GOAL: Increase availability, accessibility and acceptability of health care services</p> <p>Primary Care Capacity Building</p> <ul style="list-style-type: none"> Support implementation of FQHC Capacity Building Plan including HIT, workforce development and shared program/service expansion (WPHCA) Continue to Enhance Select Free and Charitable Clinic Capabilities for uninsured (FC3) <p>Specialty Access</p> <ul style="list-style-type: none"> Continuously Improve the Specialty Access for Uninsured Program * <p>Behavioral Health Access</p> <ul style="list-style-type: none"> Improve Access and Navigation to Behavioral Health Services for Adults and Youth * (BHS) Support Implementation of the Psychiatric Crisis Services Redesign, including the Mental Health Emergency Center * (BHS) 	<p>GOAL: Enhance care coordination/navigation within and across the delivery system</p> <p>Patient Care Connection</p> <ul style="list-style-type: none"> Advance and continuously improve programs and services to reduce avoidable ED and IP utilization and connect patients to ongoing care, including the ED to Medical Home Program * <p>Housing Screening and Connections</p> <ul style="list-style-type: none"> Continuously improve and expand housing navigation and subsidies for homeless and at-risk patients and families, including the Housing is Health Program * (MCHS/IMPACT) <p>Health Information Technology</p> <ul style="list-style-type: none"> Optimize HIT and HIE capabilities to improve access, create efficiencies and enhance care coordination 	<p>GOAL: Identify and address targeted community health needs</p> <p>Community Health Needs Assessment</p> <ul style="list-style-type: none"> Facilitate cross-organization and inter-sector health improvement planning informed by CHNA and MHCP plan Promote and continuously improve the value and utilization of Health Compass Milwaukee <p>Community Investments</p> <ul style="list-style-type: none"> Continuously Improve Shared Community Investment Fund and the Health Improvement Fund Alignment and Impact (UWGMWC) <p>Consumer Health Outreach & Education</p> <ul style="list-style-type: none"> Use HealthyMKE and other communication channels to inform, educate and connect consumers and mobilizers to health care resources (IPR)
SPONSOR	<p>Medicaid Policy /Program Reform</p> <ul style="list-style-type: none"> Inform Medicaid Policy and Program Reforms (WHA/WPHCA) Support Communication and Local Implementation of DHS Policy and Regulatory Changes (DHS) 	<p>Oral Health Access</p> <ul style="list-style-type: none"> Continue to Improve Oral Health Access and Service Connections * (CHA) <p>Workforce Development</p> <ul style="list-style-type: none"> Support workforce pipeline and residency program enhancements, including Teaching Health Centers, and regulatory reforms with a focus on diversity and inclusion (WHA/WPHCA/CHC) 	<p>Determinants of Health Screening and Navigation</p> <ul style="list-style-type: none"> Strengthen relationships with community-based organizations and enhance social needs screening and navigation for at risk populations (IMPACT) 	<p>Immunization Improvement</p> <ul style="list-style-type: none"> Support cross-sector vaccination access and outreach with a focus on flu and pediatric vaccination (IM) <p>Violence Prevention</p> <ul style="list-style-type: none"> Implement and Measure Impact of Health Care Sector Violence Prevention and Intervention Initiatives * (OVP/CIC/MHD) <p>COVID-19 Mitigation</p> <ul style="list-style-type: none"> Continue to coordinate health care sector COVID response activities in collaboration with other sectors (PHC)
PARTICIPATE	<p>Policy and Regulatory Reform</p> <ul style="list-style-type: none"> Track state, local and federal health care policy and regulations impacting access and quality of care for vulnerable populations (WHA/WPHCA) 	<p>Telehealth</p> <ul style="list-style-type: none"> Continue to Monitor and Leverage Telemedicine Services and Reimbursement <p>Medication Access</p> <ul style="list-style-type: none"> Support Drug Assistant and other Medication / Vaccine Access programs (FQHCs/FC3/MHD) <p>Mobile Health</p> <ul style="list-style-type: none"> Inform and support coordination of various mobile health services 	<p>Medical Transport</p> <ul style="list-style-type: none"> Monitor Medicaid Transportation Policies and Practices (DHS) <p>EMS Coordination</p> <ul style="list-style-type: none"> Support county-wide EMS policies and practices to improve access and outcomes (OEM) <p>Lead Intervention</p> <ul style="list-style-type: none"> Collaborate with health departments on lead screening and connection to care (MHD) 	<p>Milwaukee Anchor Institutions</p> <ul style="list-style-type: none"> Monitor health care workforce and procurement strategies (MAC) <p>School-based Health</p> <ul style="list-style-type: none"> Monitor community schools and other school-based health improvement activities (UWGMWC) <p>SUD Services Assessment</p> <ul style="list-style-type: none"> Participate in SUD access assessment and consider collaboration opportunities (BHS/ WPF)
MONITOR				

Key: () Partner Organizations * see support materials on mkehcp.org

Updated 07/22

Marketplace Premium Assistance Program (MPAP) Discussion

Purpose:

Evaluate the feasibility of establishing a Marketplace premium assistance program that would pay **health insurance premiums** for low-income Milwaukee County residents eligible for Marketplace insurance plans in order to prevent an increase in the uninsured rate – and ultimately contribute to health care access and improved health outcomes.

MPAP Opportunity

Multiple factors signal a good time to evaluate a Marketplace Premium Assistance Program (MPAP) for Milwaukee County residents

- Medicaid COVID continuous eligibility provision ends April 2023, with the ***potential of 90,000 county residents falling-off coverage*** starting in June 2023
- There are now ***lower-cost Marketplace premiums*** due to generous federal subsidies and advance premium tax credits (APTCs)
 - Plans as low as \$0-\$10 a month
- The Marketplace Healthcare.gov ***Special Enrollment Period*** (SEP) has been extended from March 2023 – June 2024 for those falling off Medicaid coverage
- Lowest income populations (101- 138% FPL) have historically achieved high Marketplace enrollment but their ***enrollment has declined*** in recent years
- Lowest income populations (101- 138% FPL) are most likely to fall off of coverage throughout the year due to ***missing premium payments***.
- Opportunity to ***inform future State health policy*** for population group

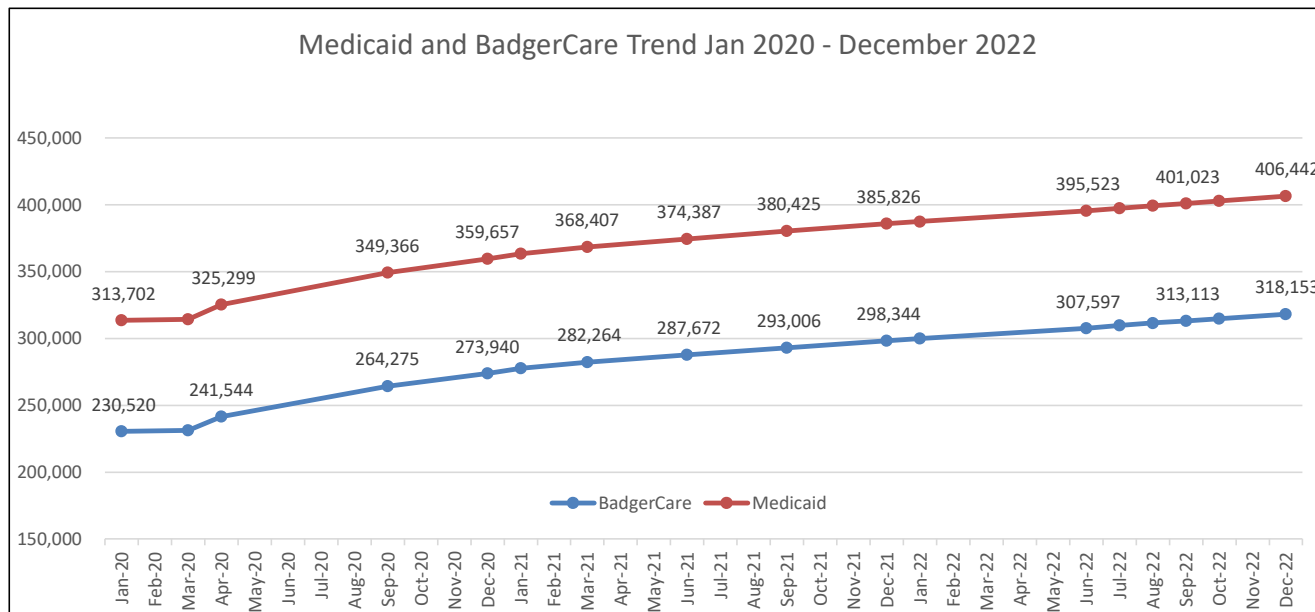
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Impact of Medicaid Eligibility Re-Determination

Throughout the COVID-19 Federal Public Health Emergency (PHE), Milwaukee County experienced:

- 90,000+ (30%) increase in Medicaid enrollment
 - 87,000+ (38%) increase in BadgerCare Plus enrollment
- **More than 406,000 individuals are enrolled in a Medicaid program comprising over 44% of the County population as of December 2022**



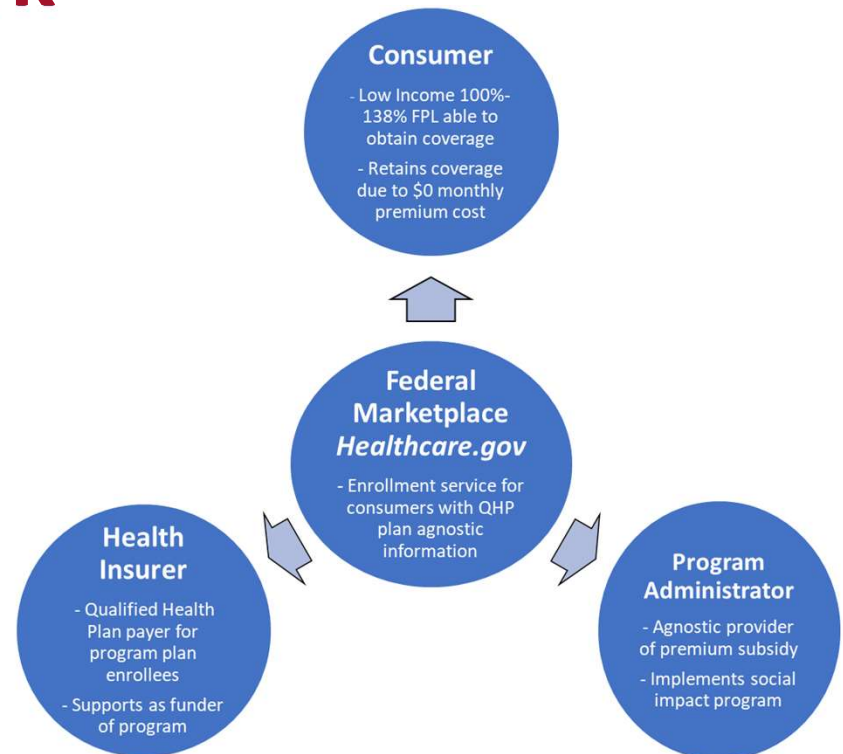
Medicaid Change: +30%

BadgerCare Change: +38%

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MPAP: How it Would Work

- **Low-income consumers** select Marketplace plan and retain coverage for up to 12-month period with uncapped premium assistance support
 - Or until secures employer-based coverage or becomes eligible for Medicaid or Medicare
- Non-profit **Program Administrator** serves as MPAP enrollment agency and fiscal agent
 - Verifies eligibility
 - EFT premium payments made directly to Marketplace issuer on behalf of consumer
- **Braided funding** secured to support premium payment assistance, program administration, and evaluation costs



Current MPAP Design Assumptions

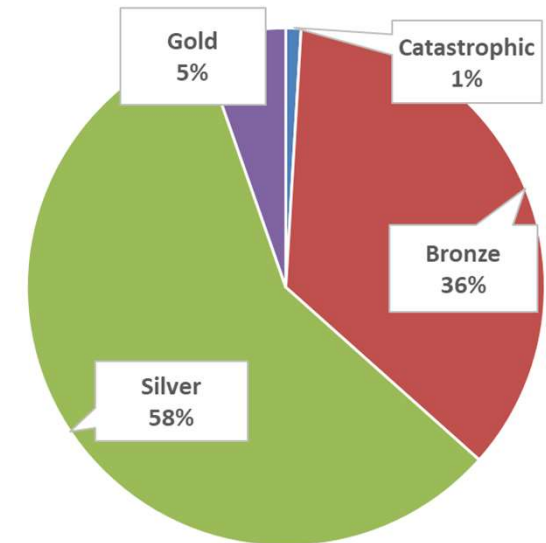
Proposed Program Eligibility Criteria

- Resident of Milwaukee County
- 101-138% FPL and not eligible for Medicaid*
- Qualifies for Marketplace Plan
 - Must be a U.S. citizen or lawfully present national
- Consumer selects “Silver Level” Marketplace Plan
 - Qualifies for cost-sharing reduction (CSR)
 - Qualifies for advance premium tax credit (APTC)
- Consumer agrees to transfer APTC to Marketplace Issuer

* Represents populations potentially eligible for Medicaid coverage under the federal Medicaid expansion plan adopted by 38 other states

Family members	Annual Income (2022)	
	100% FPL	138% FPL
1	\$13,590	\$18,754
2	\$18,310	\$25,268
3	\$23,030	\$31,781
4	\$27,750	\$38,295
4+	For each person, add \$7,080	

Plan Selection PY2022: 100-400% FPL

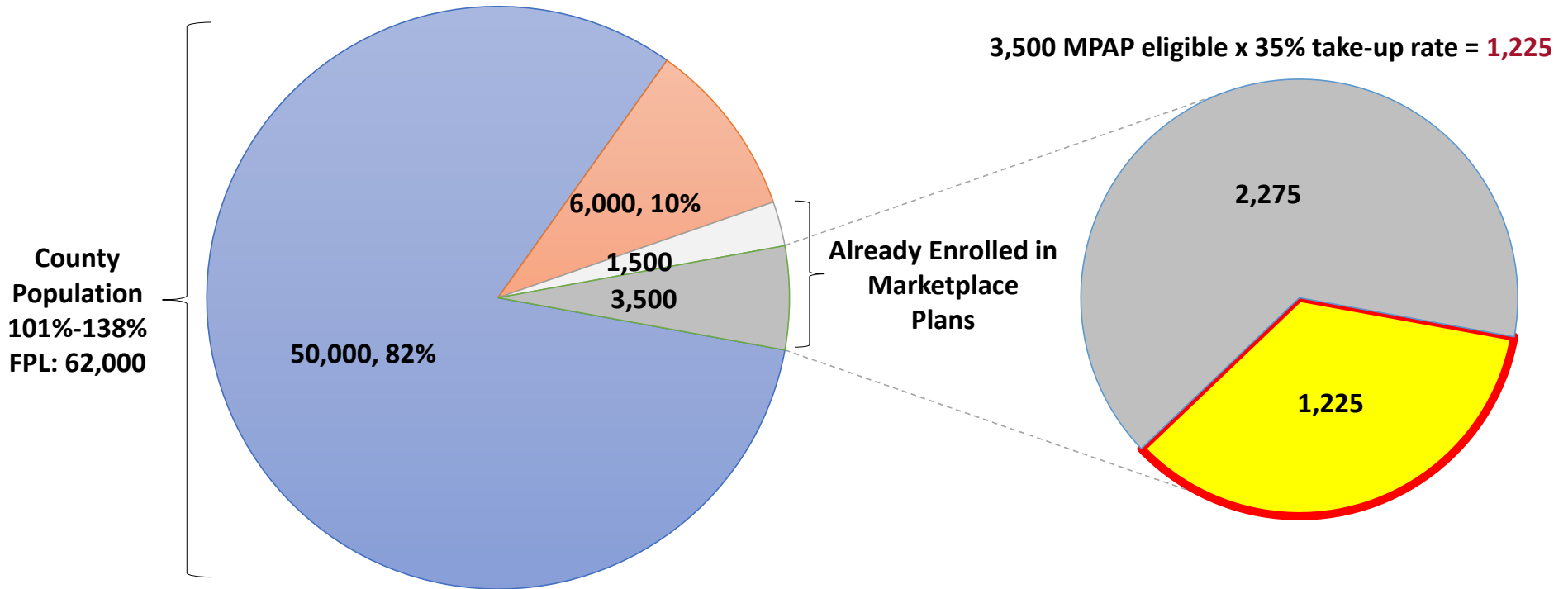


MPAP Design Assumptions – Other Inputs

INPUT	ESTIMATED IMPACT
Milwaukee County population at 101-138% FPL not enrolling in employer-based insurance	36,000 individuals <ul style="list-style-type: none"> • 25,000 on Medicaid + 5,000 on Marketplace + 6,000 Uninsured / Uninsurable
Marketplace enrollment rate for 101-138% population by year 2	40% enrollment = 10,000 additional individuals by year 2 <ul style="list-style-type: none"> • 15,000 = 5,000 current + 10,000 of Medicaid fall-off
Marketplace Silver Plan selection	70% - portion of plan holders that select silver plan at FPL
Take-up rate in Marketplace Premium Assistance Program	35% - rate of silver plan holders that enroll in MPAP <ul style="list-style-type: none"> • Assumes more aggressive outreach and promotion by enrollment assister, agents and brokers • Dane County currently at 25% take-up rate
Average Silver Plan premium assistance amount	\$36 / month <ul style="list-style-type: none"> • Dane County currently at \$102 / month
Retention rate year over year	90% re-enrollment in MPAP <ul style="list-style-type: none"> • Same as Dane County

Current Marketplace Enrollee MPAP Eligibility + Take-Up Assumption

CHART #1

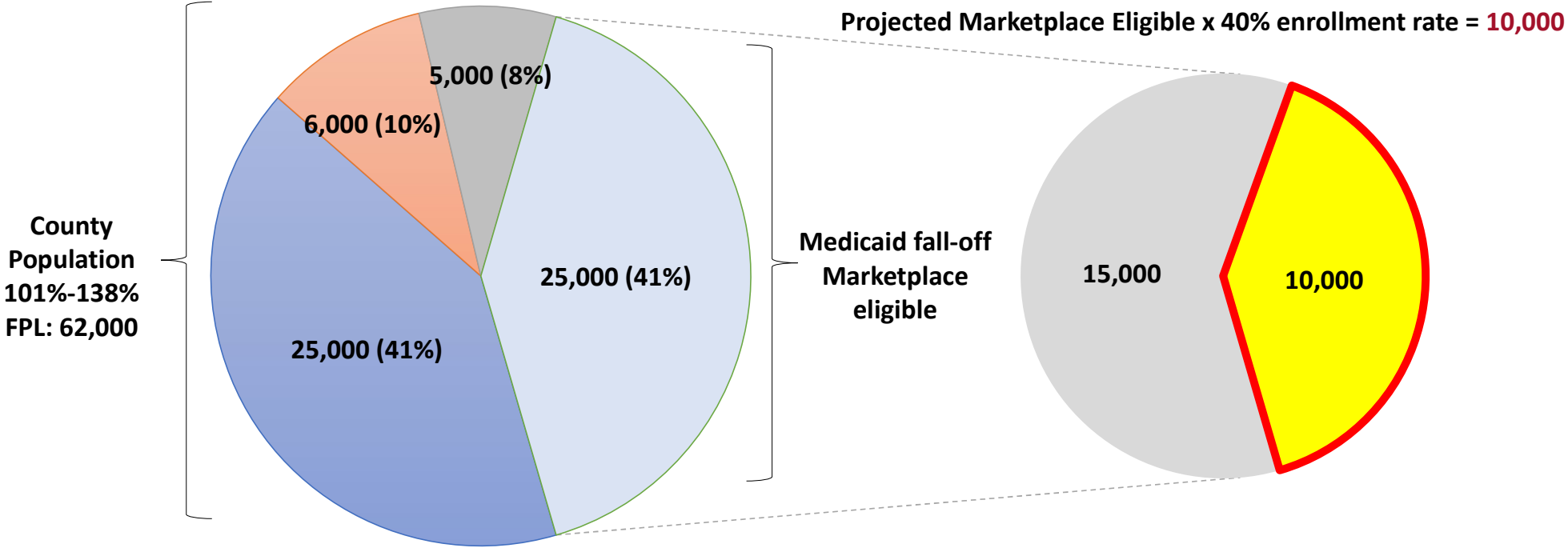


- Insured: Eligible for Employer or Medicaid
- Enrolled in Marketplace Non-Silver Plan
- Enrolled in Marketplace Silver Plan & MPAP unlikely

- Uninsured/Uninsurable
- Enrolled in Marketplace Silver Plan & MPAP likely

Projected Future Marketplace Eligibility + Enrollment Assumptions

CHART #2

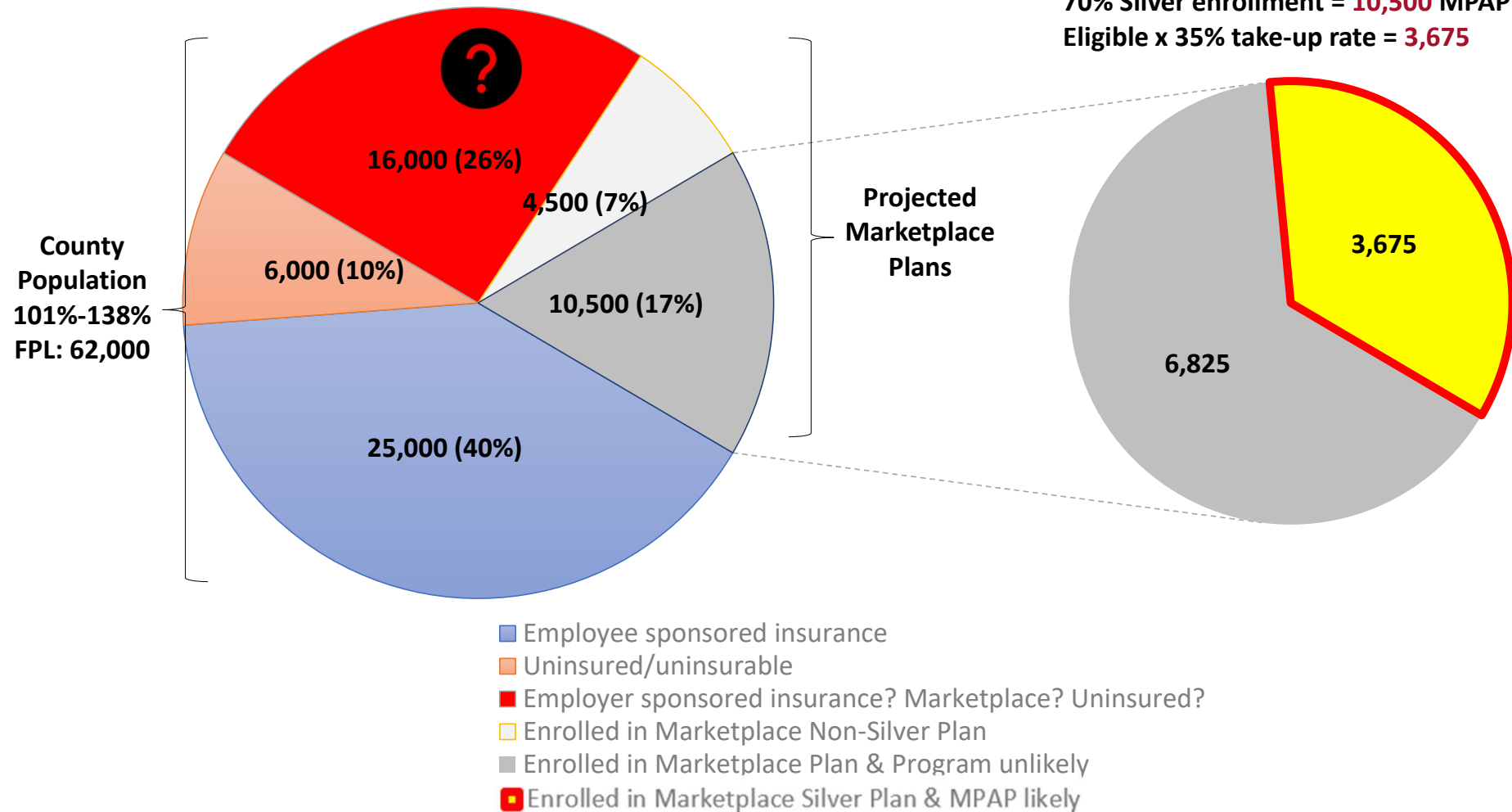


- Insured: employer sponsored insurance
- Uninsured/uninsurable
- Currently enrolled in Marketplace
- Marketplace eligible who do NOT take up Marketplace plan
- Marketplace eligible who DO take up Marketplace plan

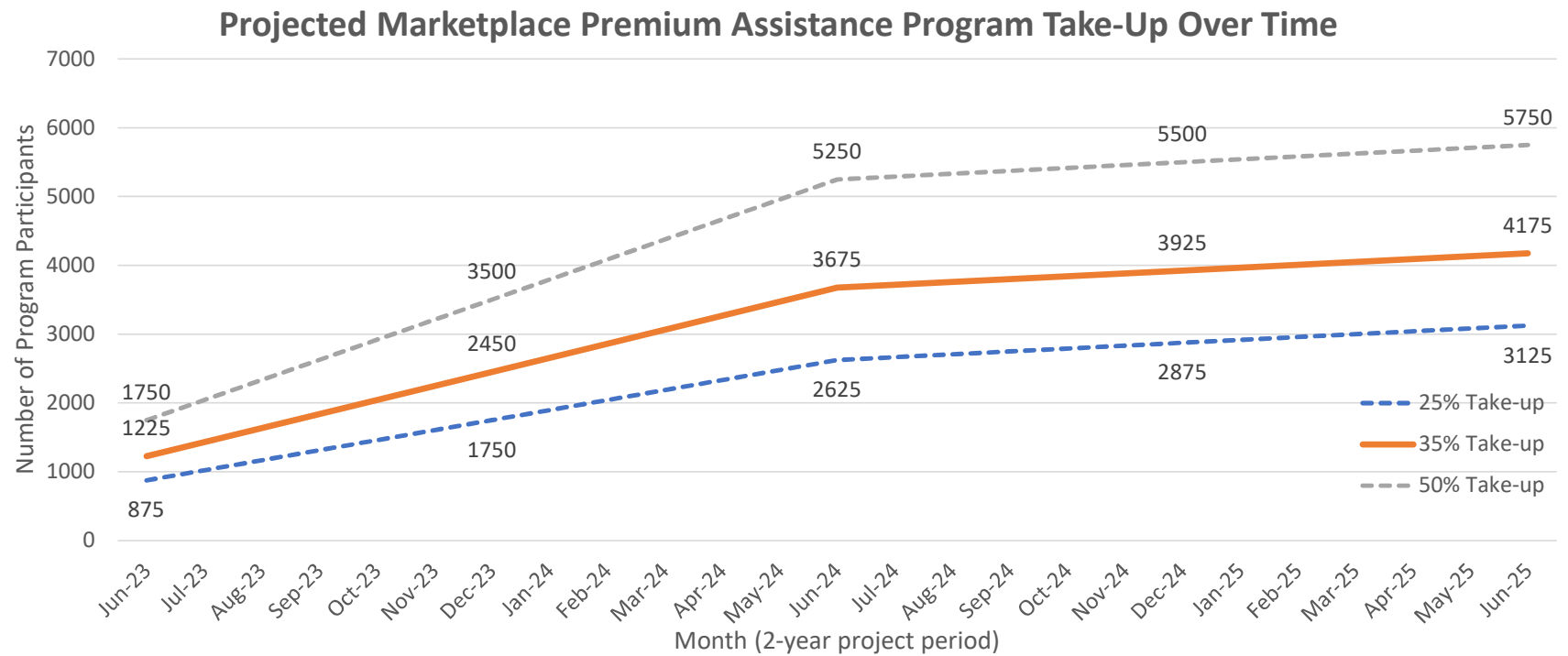
Projected Future Marketplace and MPAP Eligibility + Take-up Assumption

CHART #3

15,000 Projected Marketplace Plans x
70% Silver enrollment = 10,500 MPAP
Eligible x 35% take-up rate = 3,675



Projected MPAP Take-up: Year 1 and 2



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MPAP Budget Projections

Expenses*

- **Premium Assistance: \$2,646,000 for year 1 & 2**
 - 6,125 MPAP participants @\$36/mos. premium assistance X 12 mos.
- **Program Administration: \$350,000 per year**
 - Program manager 1.0 FTE
 - Administrative overhead, financial administration, and staff support
 - Reporting software (start-up + ongoing operating)
 - Program promotion
- **Program Evaluation: \$50,000 over 2 years**

	Premium Assistance	Program Administration & Evaluation	Annual Budget
Year 1	\$1,058,400	\$375,000	\$1,433,400
Year 2	\$1,458,400	\$375,000	\$1,962,600
TOTAL	\$2,646,000	\$750,000	\$3,396,000

* Variable based on inputs

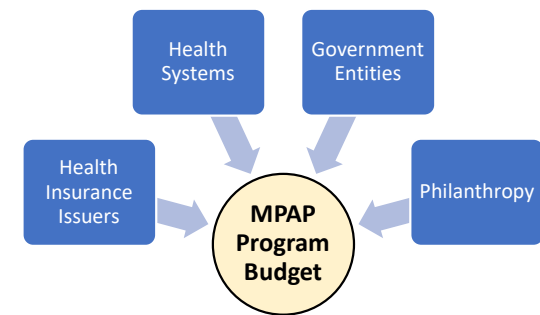


Proposed 2-Year Pilot = \$3,396,000

MPAP Revenue Assumptions

Proposed Braided Funding Model

- **Health Systems:** (Shared Community Investment Fund)
 - Ascension Wisconsin
 - Aurora Health Care
 - Children’s Wisconsin
 - Froedtert Health
- **Marketplace Issuers:** Marketplace Qualified Health Plans (QHPs) on Healthcare.gov
- **Government Agencies**
- **Other Philanthropic Organizations and Individuals**



Commitment Discussions

Funder	Annual	Total (2-Year)
Health Systems	\$500,000	\$1,000,000
Marketplace Issuers	\$600,000	\$1,200,000
County Government	\$250,000	\$500,000
Other Government / Philanthropy	\$400,000	\$800,000
TOTAL	\$1,750,000	\$3,500,000

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Projected MPAP Benefits

- **For Low-Income Residents**
 - Improved access to primary, specialty, and mental health care and medications
 - Eliminated risk of losing coverage due to inability to pay or missing payments
 - Health insurance parity
 - Improved health care outcomes, health, and well-being
 - Ensured health insurance coverage during a critical period for delayed health care post-COVID
- **For Health Care Providers**
 - Supports health care mission
 - Reduction in uncompensated care
- **For Marketplace Issuers**
 - Continuity of membership / reduced churn rate
 - Increased members and premiums
- **For Employers / Civic Organizations**
 - Healthy workforce
 - Quality of life
- **For Government / Community**
 - Improved racial and health equity
 - Productive members of society
 - Residents living their best lives

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Evaluation and Sustainability Plan

Demonstrate impact on individuals, community/government agencies, and value to sponsoring organizations

Possible Metrics

- Program take-up and retention rate
- Uninsured rate for 101-138% FPL
- Uncompensated care reductions estimates
- Marketplace issuer enrollment and retention, premium revenue / ROI
- Other

Support Policy and Systems Change

- Report findings to the State of WI to inform future coverage policy and investments

Projected Implementation Timeline

ACTIVITY	TIMEFRAME
Confirm Program and Financial Administrators	March 17
Finalize Eligibility Criteria and Input Assumptions	March 17
Secure Braided Funding Pledges	March 24
Confirm Decision to Proceed with Program	March 31
Staff Hiring and Technology Integration	May 1
Secure Program Evaluator	May 1
Program Readiness Confirmed	June 1
Program Launch and Promotion	Mid-June
Program 2-Year Implementation	July 1, 2023 – June 30, 2025

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