



MEDICAID EXPANSION: ENROLLEE DEMOGRAPHICS

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Children, Families, Health, and Human Services Interim Committee

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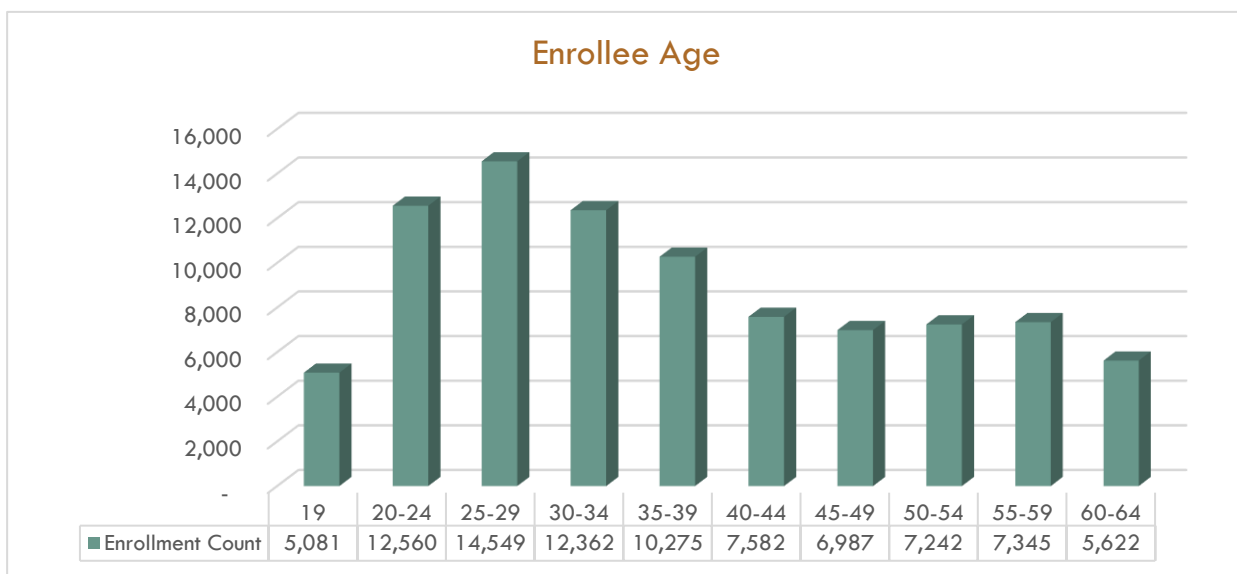
MONTANA STATE LEGISLATURE

MEDICAID EXPANSION: ENROLLEE DEMOGRAPHICS

Medicaid expansion opened the Medicaid program to people who previously were not eligible for the state-federal health care program because they weren't blind, disabled, pregnant, or elderly or because their incomes were too high. Except where otherwise noted, this briefing paper summarizes demographic information of the 89,605 Montanans enrolled in the expansion program as of Dec. 15, 2017.

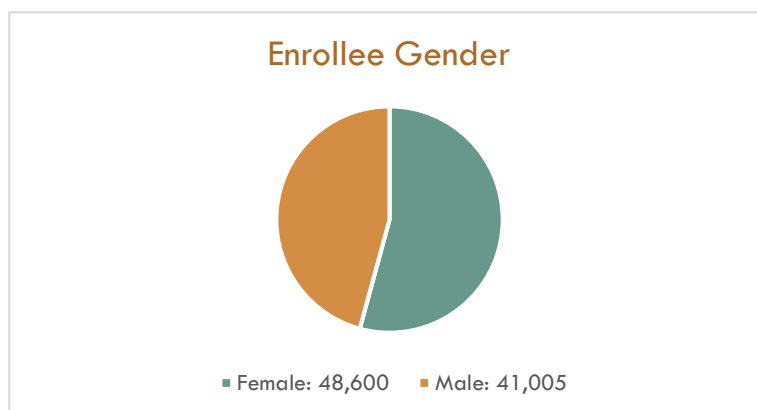
Age

Under Medicaid expansion, nondisabled individuals ages 19 to 64 are eligible for the program if their incomes don't exceed 138% of the federal poverty level at the time that eligibility is determined. Within this age range, the largest age group receiving benefits on Sept. 1 was the 25- to 29-year-old group. That group made up 16% of the enrollees. Nearly 55,000 enrollees, or 61%, were under the age of 40.



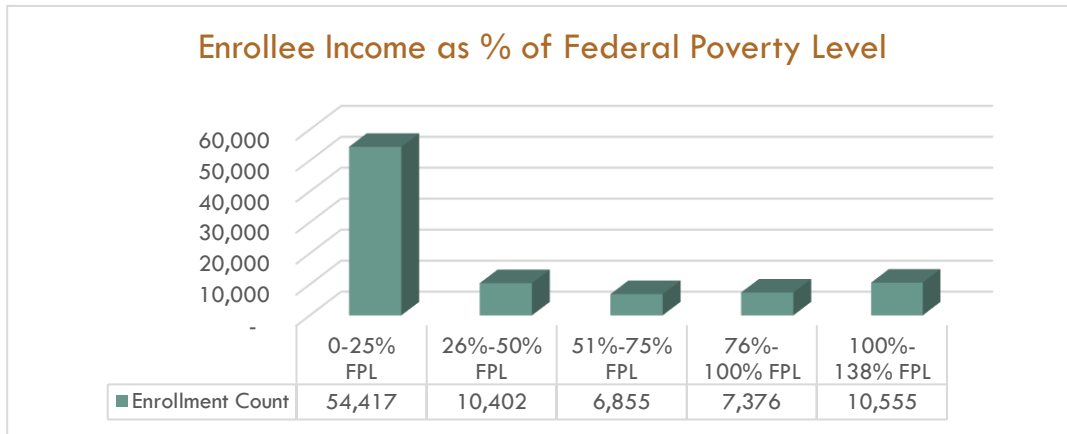
Gender

More women were enrolled in the program than men, making up about 54 percent of the expansion group.



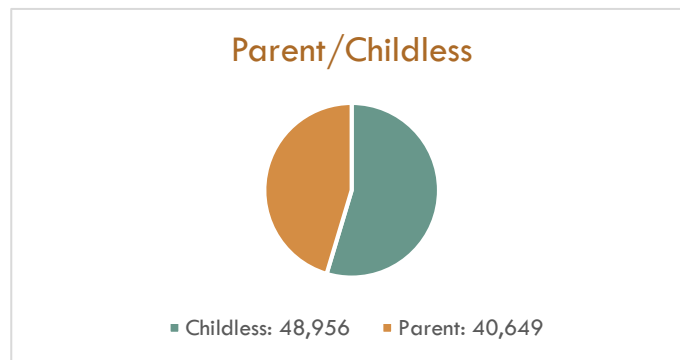
Income

About 72% of the 89,605 enrollees had incomes at or below 50% of the federal poverty level, while about 12% had incomes above 100% of poverty. The remainder – 16% – had incomes of 51% to 100% of poverty.



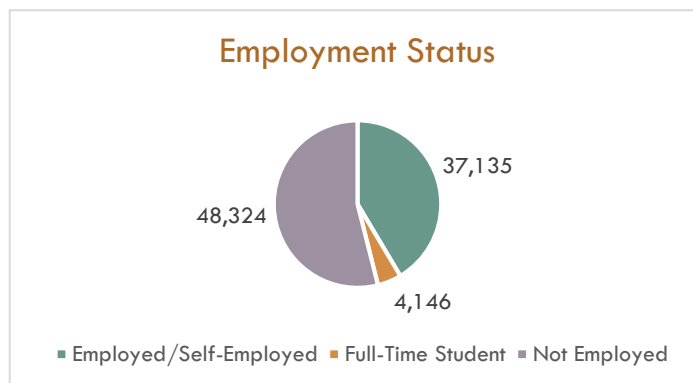
Childless Adults

About 55% of the expansion enrollees did not have children.



Employment

About 54% of the enrollees were unemployed, while 41% reported being employed and about 5% were students.



Length of Stay

The Montana Medicaid program has adopted 12-month continuous eligibility, which allows enrollees to stay in the program for 12 months even if their incomes increase above the level allowed by law. DPHHS does not have a specific report or data extract specifying how long each person has participated in the program. However, to meet federal reporting requirements, the agency has been collecting data since January 2017 on a person’s length of stay at the time of program exit.

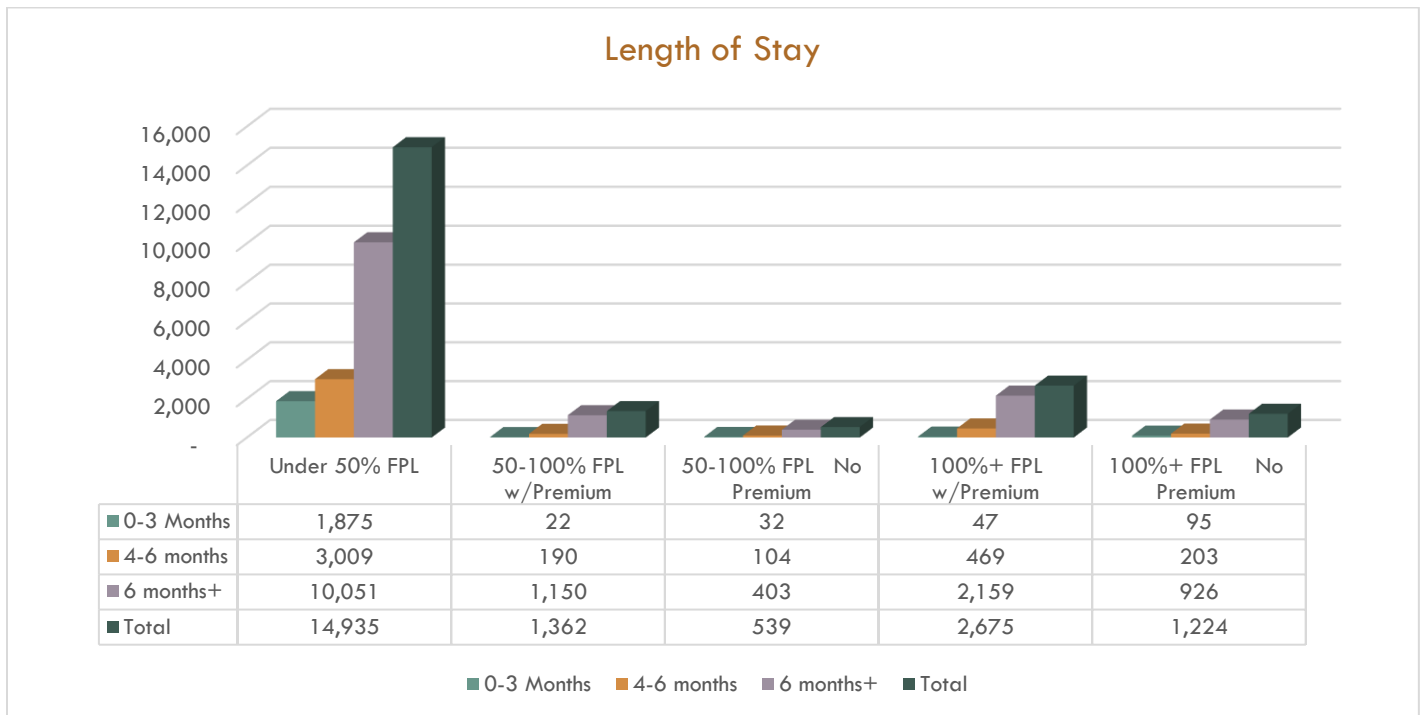
The department looks at how many people leave the program:

- within the first 3 months of enrollment;
- within 4 to 6 months of enrollment; and
- after more than 6 months of enrollment.

The figures do not include people who didn’t re-enroll when their 12 months of eligibility ended. In addition, DPHHS does not track the reason people leave the program. Reasons could range from a failure to pay premiums to finding a job with insurance coverage, moving out of state, or becoming eligible for other programs, such as Medicare.

The data for the 9-month period ending Sept. 30, 2017, shows that 20,735 people left the program during that time. The majority of them – nearly 71% – left after being in the program for more than six months. Most of them had incomes of under 50% of poverty.

The count does not mean that 20,735 individuals left the program. The number could reflect multiple periods of enrollment for people who were in the program for a short period, left the program for an unknown reason, and re-enrolled because they became eligible for the program again.



Participation in Other Public Assistance Programs

Many expansion enrollees receive benefits through other public assistance programs offered in the state, as do enrollees in the traditional Medicaid program. The largest overlap occurs with the Supplemental Nutrition Assistance Program, or SNAP, with 38% of expansion enrollees also receiving SNAP benefits to purchase food.

Participation in other programs is much lower, with 1% or less of the enrollees also participating in the Temporary Assistance for Needy Families, child care assistance, Low-Income Energy Assistance Program, or weatherization program. TANF is open only to people with dependent children.

The charts below reflect data as of Sept. 1, 2017.

