Understanding Children's Utilization and Expenditures in New York Medicaid

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United Hospital Fund

Mission: United Hospital Fund works to build a more effective health care system for every New Yorker. An independent, nonprofit organization, we analyze public policy to inform decision-makers, find common ground among diverse stakeholders, and develop and support innovative programs that improve the quality, accessibility, affordability, and experience of patient care.

Children's Health Initiative and Medicaid Institute Publications

Seizing the Moment: Strengthening Children's Primary Care in New York (Jan 2016)

You Get What You Pay for: Measuring Quality in Value-Based Payment for Children's Health Care (June 2016)

Understanding Medicaid Utilization for Children in New York State (July 2016)

Value-Based Payment Models for Medicaid Child Health Services (July 2016)



Context - Children in NY Medicaid

- Medicaid covers 43.5% of all children under age 21 in New York State
- Children account for 37% of all NYS Medicaid Enrollees
- Most, but not all, children are in managed care
- VBP only applies to children in managed care

Enrollment Jan 2016	2,292,641
Managed Care	2,042,872
Fee For Service	249,769
Age Breakdown	Under age 1 – 6% 1-4 – 22% 5-9 – 26% 10-13 – 18% 14-17 – 17% 18-20 – 11%

Sources: New York State Medicald Program Enrollment by Month – Health Data NY; Census Bureau American Fact Finder ACS Demographic and Housing Estimates; United Hospital Fund Understanding Medicald Utilization for Children in New York State.



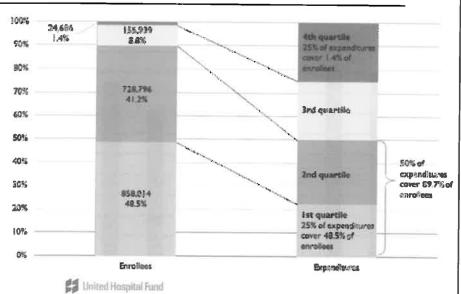
Data Needs for Value-Based Payment

- Population Segmentation Multiple analytic approaches
 - Expenditures How are dollars spent Differentiating low-need and high-need children in Medicaid – Limited savings opportunities
 - Utilization Determining current usage and investigating potential points of under- or over-utilization. Identify variation by:
 - Demographics Age, race/ethnicity, geography
 - Utilization type primary care, emergency department, inpatient
 - Diagnoses Common conditions at different developmental stages
- Adult Comparisons How are children different from adults?

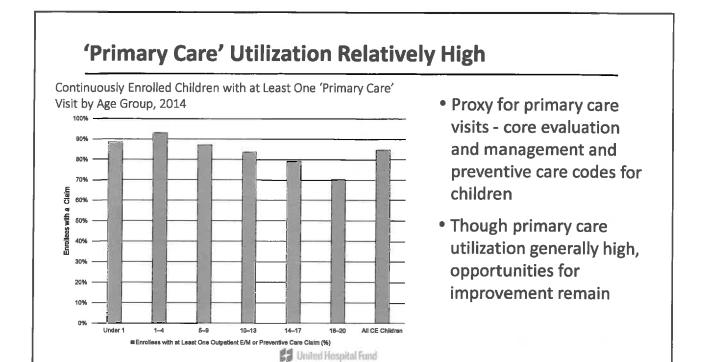


Population Segmentation by Expenditure Quartiles

- 90% of Children average only \$2400 per year in expenditures
- Children are much cheaper than adults
- High-cost children have a range of conditions (e.g., DD, BH, complex chronic conditions)



Utilization for Children Varies by Many Factors Continuously Enrolled Children with at Least One Inpatient or ED Visit by Age Group, 2014 Children have high utilization in the early years, especially primary care and hospitalizations for asthma and gastroenteritis In the teen years utilization rises mostly due to behavioral health conditions Under 1 18-20 ®Enrollees with at Least One ED Visit (%) @Enrollees with at Least One Inpatient Visit (%) 23 United Hospital Fund



Utilization Varies Based on Children's Diagnoses...

		CE Children with a Primary Diagnosis of		
Subcohort	CF Children	Asthma	Diabetes	Gastroenteritis
Number of Enrollees	1,767,435	138,936	10,850	82,886
Percent of Total CE Children	100.0%	7.9%	0.6%	4.7%
Enrollees with an Inpatient Visit (%)	3.05%	9.63%	13.24%	7.03%
Enrollees with an ED Visit (%)	27.21%	49.03%	37.63%	52,81%
Enrollees with an Outpatient E/M or Preventive Care Visit (%)	84.66%	97.08%	97.19%	97.55%

...Including for Children with Complex Conditions

		CE Children with a Primary Diagnosis of		
Subcohort	CE Children	Behavioral Health Condition	Developmental Disability	Complex Chronic Condition
Number of Enrollees	1,767,435	219,477	117,721	96,722
Percent of Total CE Children	100.0%	12.4%	6.7%	5.5%
Enrollees with an Inpatient Visit (%)	3.05%	7.79%	6.75%	15.24%
Enrollees with an ED Visit (%)	27.21%	38.74%	33.44%	36.81%
Enrollees with an Outpatient E/M or Preventive Care Visit (%)	31.66%	90.24%	90.19%	95.12%

Children Are Not Just Small Adults

- Average expenditure per child \$6,900 less than for average adult
- Children use much less inpatient care, and have shorter stays than adults
- Diagnoses driving emergency and inpatient utilization differ greatly

2014*	Children	Adults
Expenditures	\$7.52 Billion	\$23.8 Billion
Enrollees w/ Inpatient Visit	5.8%	12.3%
Length of Stay	5.32 days	8.17 days
Emergency visits / 1,000 Enrollees	487	648



Data Limitations and Implications

- Data analysis excludes some services for children in foster care, and likely includes a small over-count of inpatient visits.
- Compared to adults, children are generally a low-cost, low-utilization population and have more contact with primary care.
 - 'Well' children less likely than adults to have avoidable hospitalizations that are often the target for value-based payment savings
 - Preventing 'well' children from becoming high-need in the future may require more and/or different services, especially during early childhood
- A very small subset of children with heterogeneous needs account for a large proportion of expenditures Some of these sub-populations are not yet in managed care and all may require a different VBP approach.

