SUMMARY
The Department of Health’s access monitoring review plans shows that Medicaid fee-for-service clients use more primary care services and have more providers available per enrolled member as compared to their private insurance counterparts. The same report shows that for Medicaid fee-for-service clients in frontier counties Medicaid had lower utilization and fewer providers available per enrolled member for pre- and post-natal obstetric services. This brief is for informational purposes only and requires no Legislative action.

DISCUSSION AND ANALYSIS

Background
Effective January 2016 federal rule requires all states to develop access monitoring review plans and update them periodically. The Department of Health’s first report in October 2016 focused on access to care measures for the 27% or 112,000 Medicaid clients enrolled during FY 2015 whose medical needs were served primarily via fee-for-service and received the following services:

1) Primary care services
2) Physician specialty services
3) Pre- and post-natal obstetric services
4) Home health services

The report divides clients into the following five groups, which represented the following percentage of total clients served (numbers different slight between rural vs frontier counties for some categories):

1) 53-54% Children – ages 0 through 18
2) 22-23% Adults – ages 19 to 64
3) 12% People with disabilities
4) 7% Pregnant women
5) 4-6% Elderly – ages 65 and older

Medicaid clients in the following sixteen counties were those primarily served by fee-for-service for medical needs in FY 2015: Daggett, Duchesne, Emery, Grand, Wayne, Piute, Garfield, Kane, San Juan, Juab, Millard, Beaver, Uintah, Carbon, Sanpete, and Sevier. The percentage of county residents on Medicaid ranged from a low of 4% in Daggett to a high of 26% in San Juan. “Thirteen of Utah counties qualify as “frontier” with the population density under 6.1 persons per square mile. Much of Utah is sparsely populated, with correspondingly limited infrastructure. (page 4)”

What Were the Report’s Findings When Comparing 2014 to 2013 Data?
“The service penetration rate is calculated by dividing the number of service utilizers by the total number of members. The provider penetration rate is calculated by dividing the number of enrolled providers by the total number of members. (page 32)”
Medicaid Had Higher Penetration Rates Across Four Categories

1. Primary care (Services and Providers) – Medicaid had higher penetration rates compared to commercial clients across all eligibility groups.
2. Physician specialty (Providers in Rural Counties) - penetration rates compared to commercial clients across all eligibility groups in rural counties.
3. Home health (Providers) – Medicaid had higher penetration service rates compared to commercial clients across all eligibility groups.
4. Pre- and post-natal obstetric (Services and Providers in Rural Counties) - Medicaid had higher penetration rates compared to commercial clients across all eligibility groups.

Medicaid In Total Had Higher Penetration Rates (But Some Individual Categories Were Lower) in Two Categories

1. Physician specialty (Services) - Medicaid has higher service and provider penetration rates than commercial clients in both rural and frontier counties for all but one eligibility group. The only exception is for children on Medicaid living in frontier counties.
2. Home health (Services) – as an entire group Medicaid had higher penetration service rates compared to commercial clients, but had lower penetration for adults, children, and pregnant women.

Medicaid In Total Had Lower Penetration Rates in Two Categories

1. Physician specialty (Providers in Frontier Counties) – Medicaid had lower provider penetration rates compared to commercial clients because children had lower penetration rates. All other categories had higher penetration rates than commercial clients.
2. Pre- and post-natal obstetric (Services and Providers in Frontier Counties) - Medicaid had lower penetration rates compared to commercial clients across all eligibility groups.

Source

- [https://medicaid.utah.gov/uamrp-utah-access-monitoring-review-plan](https://medicaid.utah.gov/uamrp-utah-access-monitoring-review-plan)