

Cover Michigan

The State of Health Care Coverage in Michigan



CENTER FOR HEALTHCARE
RESEARCH & TRANSFORMATION



2010

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Cover Michigan Introduction

The Center for Health Care Research & Transformation presents *Cover Michigan 2010*, a report of health care coverage in the U.S. and Michigan, including data on the uninsured, publicly and privately insured, premiums and cost-sharing, the health care safety net and health reform.


Cover Michigan 2010 reports the most recent comparative data available for the U.S. and Michigan: 2008 data for the U.S. and 2007/2008 two-year pooled data for Michigan. Michigan data are pooled to ensure an adequate sample size; some demographic data are reported as three-year pooled averages. Where possible, more recent data are included.

The 2010 report and the *Cover Michigan Survey 2010* (released in March 2010) both reveal continued upward trends in areas of concern from our 2009 report: more people lacking insurance, more employers dropping coverage, higher costs for those who have insurance, and a growing strain on the health care safety net.

Important trends noted in *Cover Michigan 2010* include:

- The numbers of uninsured and publicly insured in our state have been growing. More than 3.8 million Michigan citizens were either uninsured or covered by a public program (Medicare, Medicaid, military)—almost 39 percent of the state's population;
- Despite the growth in public coverage, many of the poor did not have coverage at all: 37 percent of those with incomes below the poverty line did not have coverage in 2007/2008;
- While Michigan still has a higher percentage of those with private coverage than most states (ranking ninth highest), businesses in Michigan have been dropping coverage at a faster rate than the U.S. overall and the percent of Michigan's population with private coverage was 4.5 percent lower in 2007/2008 than it was in 2003/2004;
- Average Michigan family premiums continue to be less than the U.S. average, at \$11,321 compared to \$12,298— making Michigan the ninth lowest state in average family premiums in 2008;
- Reflecting the increase in the number of uninsured in the state and the increase in copayments and deductibles faced by those with insurance, uncompensated care in hospitals increased in 2008 to \$2 billion, a 94 percent increase since 2004;
- "Safety net" providers in Michigan are critically important for many of those most in need, but these providers are challenged to meet demand for their services. Also, Michigan has fewer such providers than many other states: Michigan ranked 31st in the nation for the number of federally qualified health center sites per 10,000 uninsured.

We predict these 2008 trends will continue in the 2009 data. If anything, given the dramatic economic events of 2009, they will likely reflect even steeper changes in the same directions. There is no question the trends evident in this report depict both the reasons health reform was a major national policy issue in 2009 and some of the challenges it will face.



In subsequent years, the Patient Protection and Affordable Care Act will substantially change the picture of health care coverage in Michigan. In this report, we estimate the impact of the Act had it been fully implemented and in effect in 2007/2008 (the period for which we have the most recent, comprehensive state data on health coverage). While everyone in Michigan will be affected to some degree eventually, some of the notable coverage trend estimates include:

- 286,755 of Michigan's uninsured with incomes at or below 133 percent of poverty will become newly eligible for Medicaid by 2014.
- About 3.4 million people in Michigan, with incomes between 133 percent and 400 percent of poverty will meet the income standard for subsidies in the new health insurance exchanges in 2014.
- Another 144,401 businesses in Michigan, who offer health insurance to their employees, are eligible for tax credits under the Act (when employee wage-levels meet criteria).
- \$11 billion is available for expansion of federal qualified health centers nationally.

Because many provisions in the Act do not take effect for several years, we expect to see continued challenges in the near term for the safety net and the health care system in general in caring for those most in need. The changes contemplated in the Act are a beginning—not an end—to addressing many of the issues we see in this report, and it will be important to track and understand changes in our state over time. For the more than one million uninsured people in Michigan, these changes can't come soon enough.

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Introduction

The number of uninsured residents in Michigan has been steadily increasing.

Michigan's uninsured rate has been trending upwards over the last five years, going from 9.2 percent of the population in the two-year period 2003/2004 to 10.7 percent in 2007/2008, a statistically significant increase. While the percent of Michigan residents lacking health insurance is still lower than the U.S. average of 14.8 percent, Michigan's national ranking worsened over the last several years, falling from 7th lowest in 2003/2004¹ to 10th in 2005/2006 and 16th in 2007/2008. Just over one million individuals living in Michigan were uninsured in 2007/2008.

Notably, in 2005/2006, Michigan had the lowest rate of uninsured children in the nation; but by 2007/2008, its ranking worsened to 6th, principally because the number of uninsured children in other states decreased in this time period (especially in Massachusetts, where sweeping health care reform was passed in 2006), while Michigan's did not.

Most of the uninsured were poor or near poor—but working.

Most of the uninsured in Michigan in 2007/2008 lived in families where at least one member was employed full time; almost half lived in families where the highest degree of educational attainment was a high school diploma or less. And more than half were poor or near poor.

The uninsured were disproportionately African American and Hispanic.

The likelihood of being uninsured also varies by age, gender and race. Most elderly are covered by Medicare, and many children are eligible for the Children's Health Insurance Program. Young adults aged 25-34 had the highest proportion of uninsured; African Americans and Hispanics were disproportionately represented among the uninsured relative to their representation in the overall population; and men were more likely to be uninsured than women.

The number of uninsured in 2009/2010 is likely to be higher than 2007/2008.

The increase in the rate of uninsured in Michigan over the past several years is not surprising given the increase in the state's unemployment rate. Studies show that as the number of unemployed increase, so does the number of uninsured. Recent data from the Kaiser Foundation showed that every percentage point increase in the unemployment rate represented an increase of approximately 1.1 million uninsured.² In Michigan loss of health insurance is a lagging indicator relative to unemployment, largely due to labor contracts that provide health coverage for a time after layoffs; but given the increase in the state's unemployment rate between 2008 (10.6 percent) and 2009 (14.7 percent),³ the uninsured rate is likely to be considerably higher in 2009/2010.

¹ Tied with four other states. Source: U.S. Census Bureau, Current Population Survey (CPS), State Health Access Data Assistance

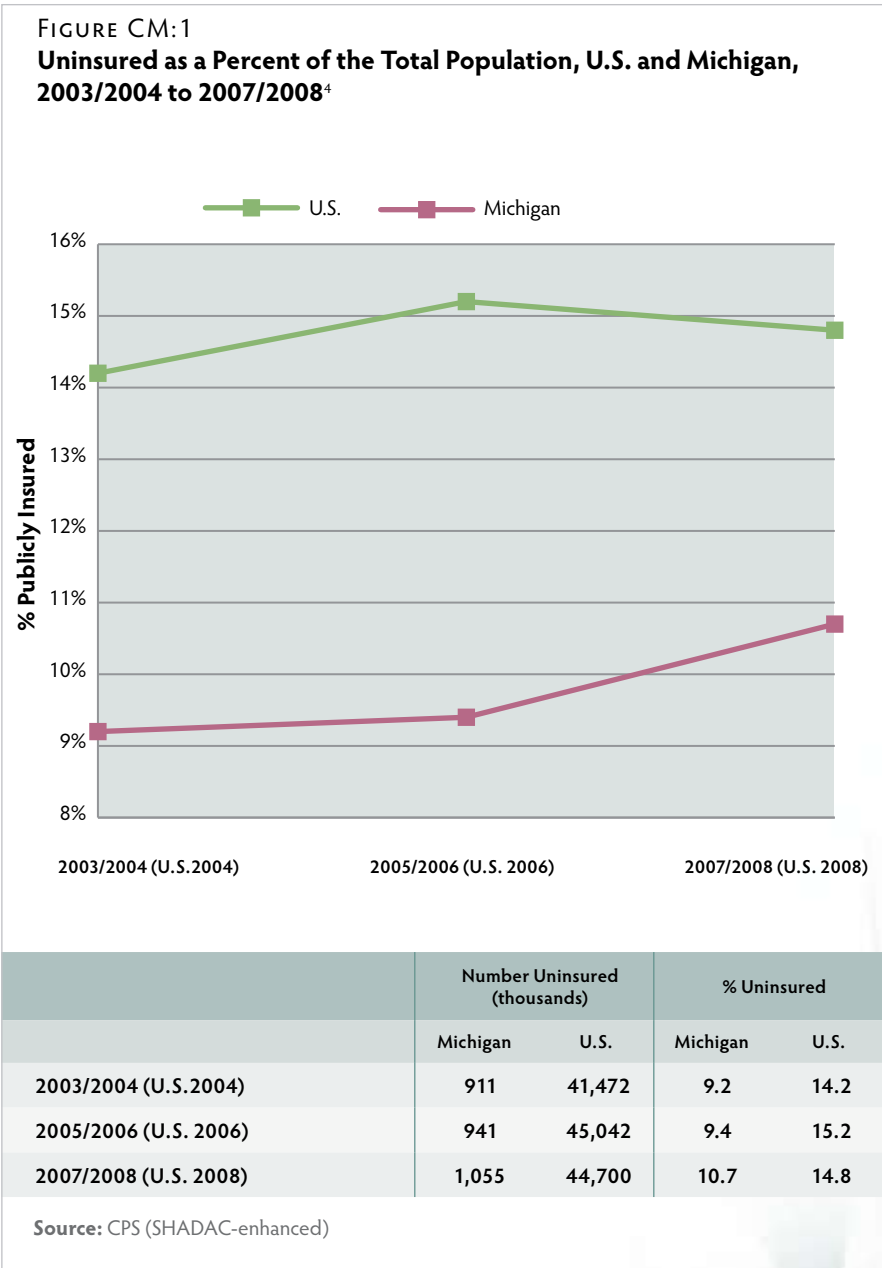
² Rising Unemployment, Medicaid and the Uninsured. The Kaiser Family Foundation. January, 2009.

³ U.S. Department of Labor, Bureau of Labor Statistics.

The Uninsured, U.S. and Michigan

In 2008, the number of uninsured grew to 44.7 million in the U.S. and just over one million in Michigan. And while the uninsured rate increased from 2003/2004 to 2007/2008 for Michigan, and from 2004 to 2008 for the U.S., the increase was more significant in Michigan.

The uninsured as a percent of Michigan's population increased from 9.2 percent to 10.7 percent from 2003/2004 to 2007/2008; the U.S. average increased from 14.2 percent to 14.8 percent from 2004 to 2008.



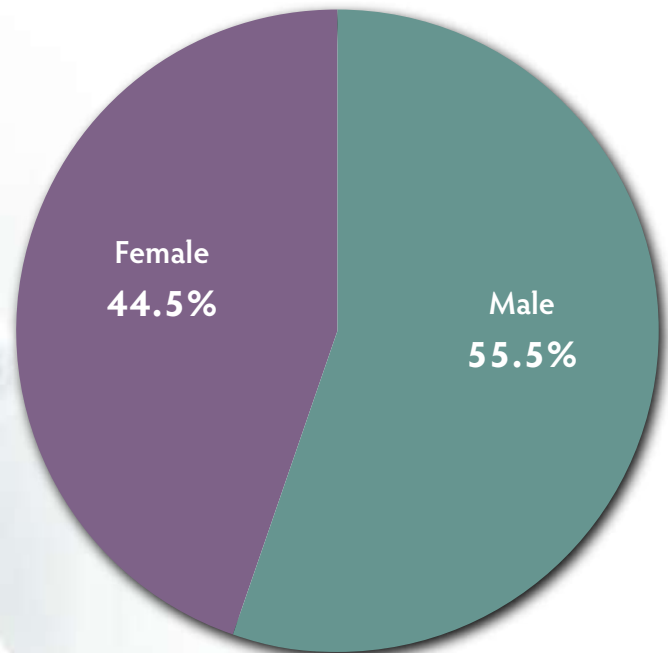
⁴ Uninsured as percent of total population was calculated using single-year data for U.S. rates and two-year pooled data for Michigan rates to ensure adequate sample size.

DEMOGRAPHIC PROFILE OF THE UNINSURED IN MICHIGAN

Michigan's Uninsured by Gender, 2007/2008

Men are more likely to be uninsured than women. In 2007/2008, 55.5 percent of the uninsured were men, 44.5 percent were women.

FIGURE CM:2

Distribution of the Uninsured by Gender, Michigan, 2007/2008

Source: CPS (SHADAC-enhanced)

DEMOGRAPHIC PROFILE OF THE UNINSURED IN MICHIGAN

Michigan's Uninsured by Age, 2006/2008⁵

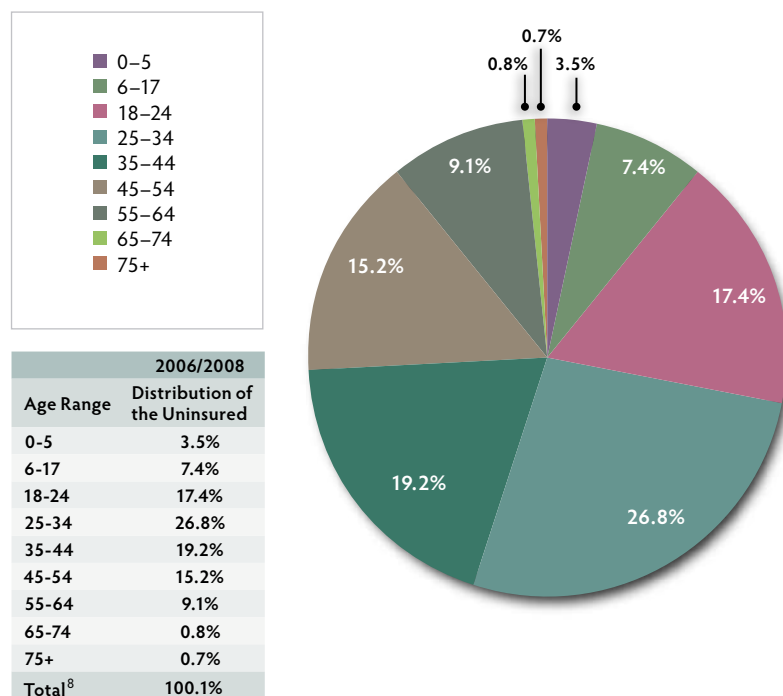
The smallest proportion of the uninsured was those over the age of 65, (most of whom are insured under Medicare). Children who are eligible for the Children's Health Insurance Program (CHIP), also represented a small proportion of the uninsured.

Among the uninsured, non-elderly adults were overrepresented relative to their representation in the overall population. In 2006/2008, adults age 18-64 represented 88 percent of the uninsured but just 75 percent of the population.⁶ Because of categorical limits, many low income adults are currently not eligible for Medicaid.⁷

Adults ages 25-34 represented the highest proportion and highest rate of uninsured. Twenty-seven percent of those who were uninsured were between the ages of 25-34. The rate of uninsurance for this group went from 16.9 percent in 2003/2005 to 22.4 percent in 2006/2008, a statistically significant increase.

FIGURE CM:3

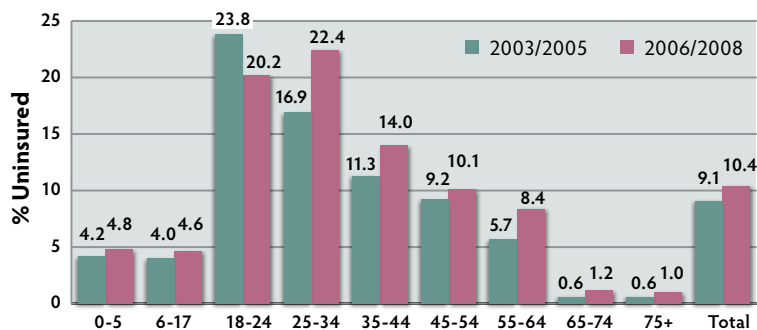
Distribution of the Uninsured by Age, Michigan, 2006/2008



Source: CPS (SHADAC-enhanced)

FIGURE CM:4

Uninsured as a Percent of Total Population by Age, Michigan, 2003/2005 and 2006/2008



⁵ Three years of pooled data are used to create uninsurance estimates because of small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of uninsured by demographic characteristic. See methodology for more information.

⁶ U.S. Census Bureau, 2006/2008 American Community Survey 3-Year Estimates

⁷ Low-income adults under age 65 qualify for Medicaid in Michigan if they are disabled, pregnant, or have dependent children. Income eligibility levels are generally much lower for parents than for children, and adults without children are generally ineligible. Beginning in 2014, the Patient Protection and Affordable Care Act of 2010 will expand Medicaid eligibility to all individuals under the age of 65 with incomes up to 133 percent of the federal poverty level.

⁸ Total percent is over 100 due to rounding.

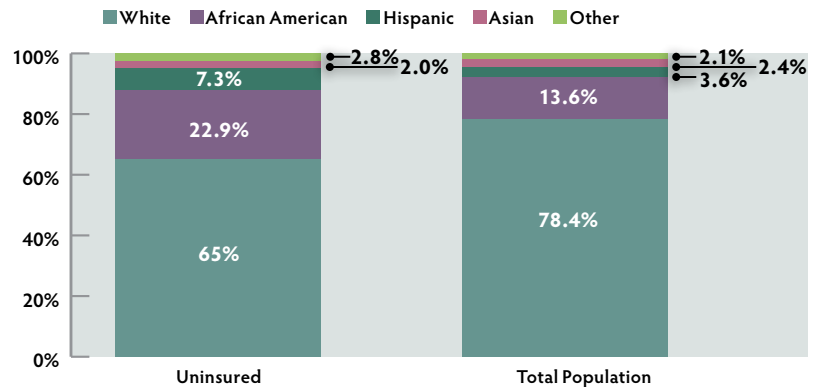
Age Range	2003/2005 % Uninsured	2006/2008 % Uninsured	# of Uninsured (in thousands)	Total Population (in thousands)
0-5	4.2	4.8	36	750
6-17	4.0	4.6	76	1,661
18-24	23.8	20.2	180	895
25-34	16.9	22.4	277	1,236
35-44	11.3	14.0	198	1,420
45-54	9.2	10.1	157	1,546
55-64	5.7	8.4	94	1,115
65-74	0.6	1.2	8	671
75+	0.6	1.0	7	609
Total	9.1	10.4	1,032	9,902

Source: CPS (SHADAC-enhanced)

Michigan's Uninsured by Race 2006/2008⁹

In 2006/2008, the uninsured were not distributed evenly across the population. In Michigan, African American and Hispanic populations were overrepresented in the uninsured population relative to their representation in the overall population. African Americans represented 13.6 percent of the overall population and 22.9 percent of the uninsured. Hispanics represented 3.6 percent of the population and 7.3 percent of the uninsured.¹⁰

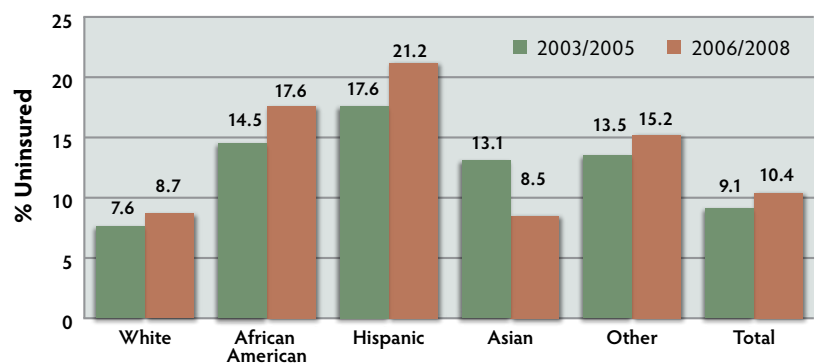
FIGURE CM:5
Uninsured vs. Total Population, Distribution by Race, Michigan, 2006/2008



2006/2008		
Race/Ethnicity	% Uninsured	% Total Population
White	65.0	78.4
African American	22.9	13.6
Hispanic	7.3	3.6
Asian	2.0	2.4
Other	2.8	2.1
Total	100.0	100.0

Source: CPS (SHADAC-enhanced)

FIGURE CM:6
Uninsured as a Percent of Total Population by Race, Michigan, 2003/2005 and 2006/2008



Race/Ethnicity	2003/2005	2006/2008	
	% Uninsured	% Uninsured	Number of Uninsured (in thousands)
White	7.6	8.7	671
African American	14.5	17.6	236
Hispanic	17.6	21.2	75
Asian	13.1	8.5	21
Other	13.5	15.2	29
Total	9.1	10.4	1,032

Source: CPS (SHADAC-enhanced)

⁹ Three years of pooled data are used to create uninsurance estimates because of small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of uninsured by demographic characteristic. See methodology for more information.

¹⁰ This is comparable to the previous three-year period.

DEMOGRAPHIC PROFILE OF THE UNINSURED IN MICHIGAN

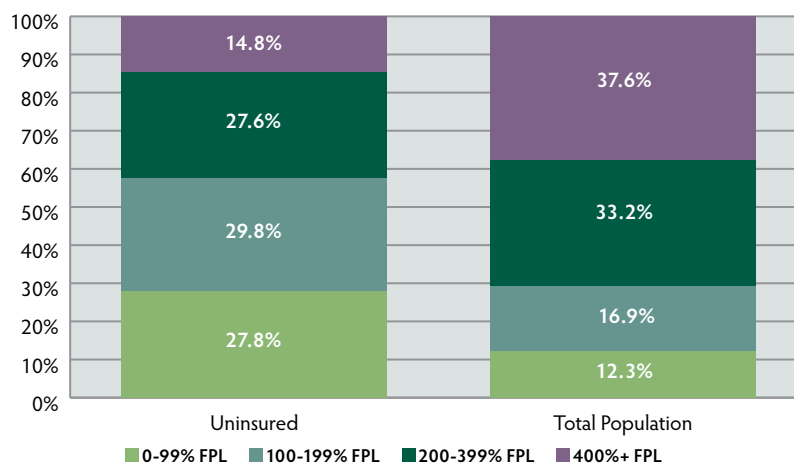
Michigan's Uninsured by Income 2006/2008¹¹

More than half of Michigan's uninsured were poor or near poor, a higher percentage than in the population overall.¹² While 12.3 percent of the population are poor (defined as below 100 percent of the federal poverty level), 27.8 percent of the uninsured were poor. In 2006/2008, 16.9 percent of the population was near poor (defined as between 100 and 199 percent of the FPL) but they made up almost 30 percent of the uninsured.

In 2006/2008, only 14.8 percent of the uninsured were from families at or above 400 percent of poverty. The distribution of the uninsured by FPL can be expected to change following implementation of the provisions of the national health care reform bill passed in 2010 (see Section VI, Impact of Health Care Reform on Michigan).

FIGURE CM:7

Uninsured vs. Total Population, Distribution by Federal Poverty Level, Michigan, 2006/2008

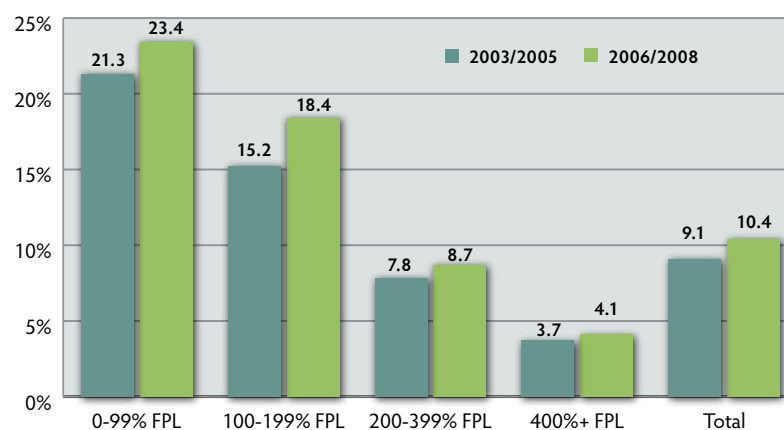


2006/2008		
Federal Poverty Level	% Uninsured	% Total Population
0-99% FPL	27.8	12.3
100-199% FPL	29.8	16.9
200-399% FPL	27.6	33.2
400%+ FPL	14.8	37.6
Total ¹³	100.1	100.0

Source: CPS (SHADAC-enhanced)

FIGURE CM:8

Uninsured as a Percent of Total Population by Federal Poverty Level, Michigan, 2003/2005 and 2006/2008



Federal Poverty Level	2003/2005	2006/2008	
	% Uninsured	% Uninsured	Number of Uninsured (in thousands)
0-99% FPL	21.3	23.4	287
100-199% FPL	15.2	18.4	307
200-399% FPL	7.8	8.7	285
400%+ FPL	3.7	4.1	153
Total	9.1	10.4	1,032

Source: CPS (SHADAC-enhanced)

¹¹ Three years of pooled data are used to create uninsurance estimates because of small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of uninsured by demographic characteristic. See methodology for more information.

¹² "Poor and near poor" is defined as up to 200 percent of the federal poverty level (FPL). The poverty level defined by the Census Bureau for 2007 for a family of four is annual income below \$21,203.

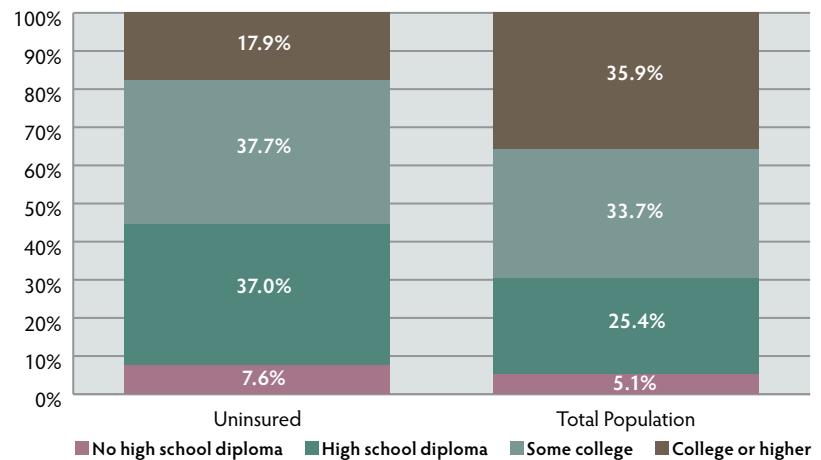
¹³ Total percent is over 100 due to rounding.

Michigan's Uninsured by Family Education Level 2006/2008¹⁴

In 2006/2008, nearly half of Michigan's uninsured lived in households where the highest level of education attained by anyone in the household was a high school diploma or less. Fewer than 20 percent of the uninsured were living in households where at least one member had a college diploma.

FIGURE CM:9

Uninsured vs. Total Population, Distribution by Family Education Level, 2006/2008

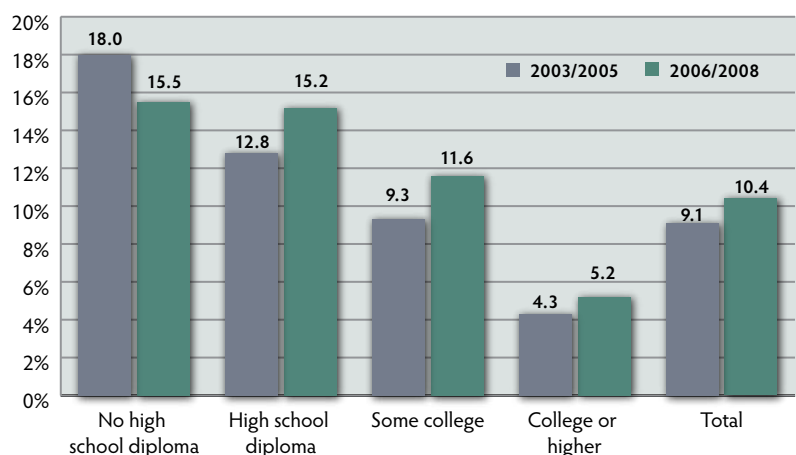


2006/2008		
Education - Family	Uninsured	Total Population
No high school diploma	7.6%	5.1%
High school diploma	37.0%	25.4%
Some college	37.7%	33.7%
College or higher	17.9%	35.9%
Total ¹⁵	100.1%	100.0%

Source: CPS (SHADAC-enhanced)

FIGURE CM:10

Uninsured as a Percent of Total Population by Family Education Level, Michigan, 2003/2005 and 2006/2008



Education - Family	2003/2005	2006/2008	
	% Uninsured	% Uninsured	Number of Uninsured (in thousands)
No high school diploma	18.0	15.5	78
High school diploma	12.8	15.2	381
Some college	9.3	11.6	388
College or higher	4.3	5.2	184
Total	9.1	10.4	1,032

Source: CPS (SHADAC-enhanced)

¹⁴ Three-year pooled data are used for uninsurance estimates due to small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of uninsured by demographic characteristic. See methodology for more information.

¹⁵ Total percent is over 100 due to rounding.

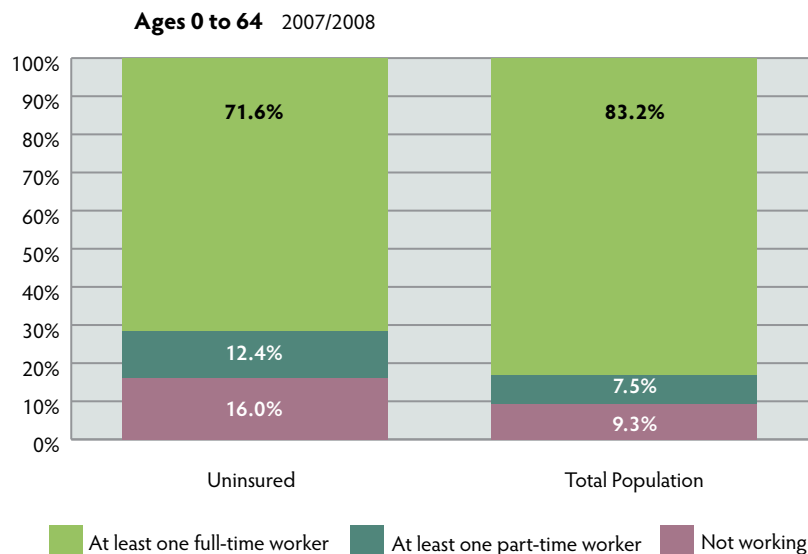
DEMOGRAPHIC PROFILE OF THE UNINSURED IN MICHIGAN

Michigan's Uninsured by Family Work Status, 2007/2008

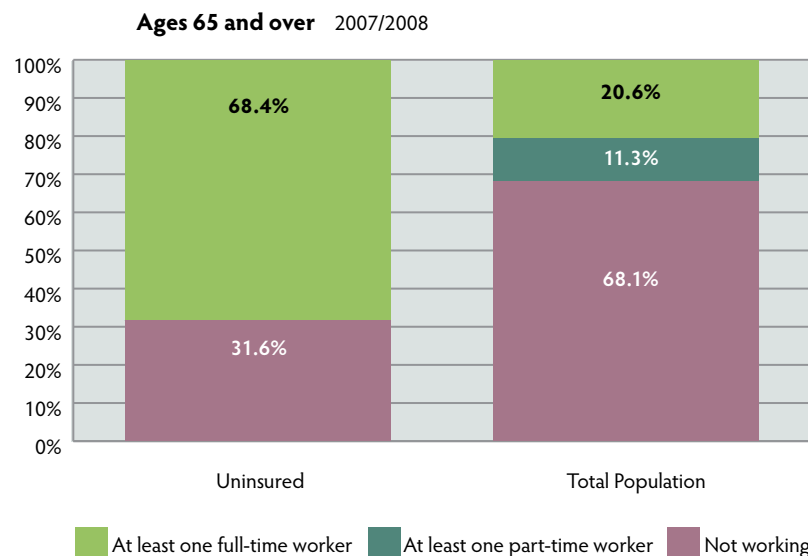
Most of the uninsured in Michigan lived in families where at least one member was employed full time. In 2007/2008, 71.6 percent of those under 65 and 83.2 percent of those 65 and older lived in a family with at least one full time worker. These statistics disprove the myth that the uninsured are unemployed, and also demonstrates that being employed is no guarantee of having insurance.

FIGURE CM:11

Uninsured vs. Total Population, Distribution by Family Work Status, 2007/2008



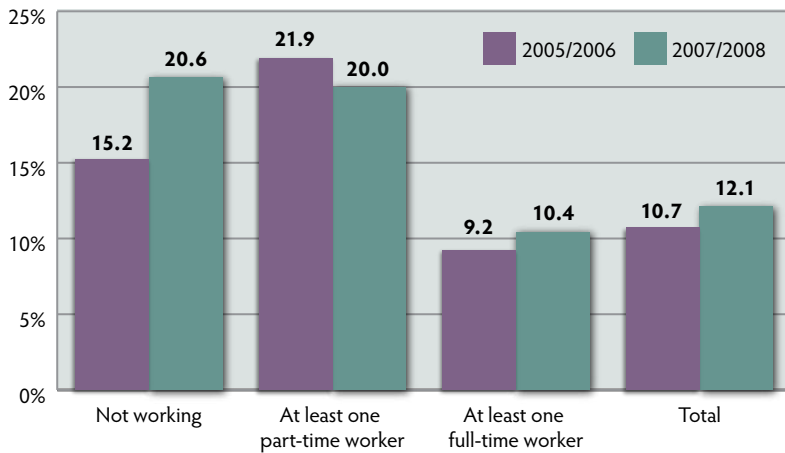
Ages 0 to 64 years		2007/2008	
Work Status - Family		% Uninsured	% Total Population
Not working		16.0	9.3
At least one part-time worker		12.4	7.5
At least one full-time worker		71.6	83.2
Total		100.0	100.0



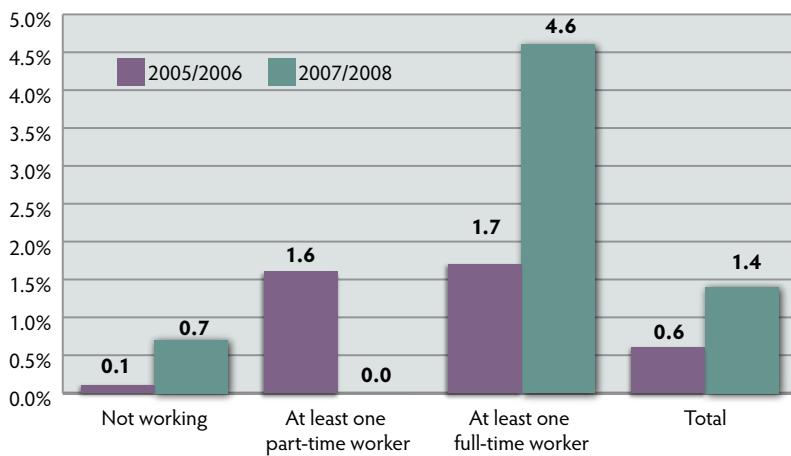
Ages 65 and over		2007/2008	
Work Status - Family		% Uninsured	% Total Population
Not working		31.6	68.1
At least one part-time worker		0.0	11.3
At least one full-time worker		68.4	20.6
Total		100.0	100.0

Source: CPS (SHADAC-enhanced)

FIGURE CM:12

Uninsured as a Percent of Total Population by Family Work Status, Michigan, 2005/2006 and 2007/2008

Ages 0 to 64 years		2007/2008	
Work Status - Family	% Uninsured	% Uninsured	Number of Uninsured (in thousands)
Not working	15.2	20.6	165
At least one part-time worker	21.9	20.0	128
At least one full-time worker	9.2	10.4	740
Total	10.7	12.1	1,033



Ages 65 and over		2007/2008	
Work Status - Family	% Uninsured	% Uninsured	Number of Uninsured (in thousands)
Not working	0.1	0.7	6
At least one part-time worker	1.6	0.0	0
At least one full-time worker	1.7	4.6	13
Total	0.6	1.4	19

Source: CPS (SHADAC-enhanced)

STATE COMPARISONS: UNINSURED, 2007/2008¹⁶

Percent Uninsured All Ages, 2007/2008

There was significant variation in the percent uninsured in 2007/2008 among states ranging from 4.5 percent in Massachusetts (the lowest in the nation) to 24.6 percent in Texas. The U.S. average was 14.8 percent in 2008.

In 2007/2008 in Michigan, the rate of uninsured was below the national average at 10.7 percent.

FIGURE CM:13

State Comparisons: Percent Uninsured All Ages, 2007/2008

Ranking 1 = low, 51 = high

2007/08 Rank	2005/06 Rank	State ¹⁷	% Uninsured
1	6	Massachusetts*	4.5
2	1	Hawaii	7.6
3	1	Minnesota	7.9
4	1	Wisconsin	8.2
5	4	Connecticut	8.5
6	10	Vermont	8.6
7	5	Iowa	8.7
8	20	Dist. of Columbia*	9.1
8	8	Pennsylvania	9.1
10	9	Maine	9.
11	13	New Hampshire	9.8
12	6	Rhode Island	10.1
13	18	Delaware	10.2
13	16	North Dakota	10.2
15	17	South Dakota	10.6
16	20	Indiana	10.7
16	10	Michigan	10.7
18	12	Ohio	11.2
19	34	Utah	11.3
20	30	Alabama*	11.4
20	19	Washington	11.4
22	14	Nebraska	11.7
23	15	Kansas	11.8
24	22	Missouri	12.0
25	25	Illinois	12.4
26	26	Maryland	12.6
27	29	New Jersey	12.7
28	24	New York	12.8
29	22	Virginia	12.9
30	32	West Virginia	13.4
30	31	Wyoming	13.4
32	27	Kentucky	13.5
33	28	Tennessee	14.0
34	33	Idaho	14.8
35	38	Montana	15.3
36	46	Oklahoma*	15.5
36	36	South Carolina	15.5
38	35	North Carolina	15.6
39	39	Colorado	15.9
40	37	Oregon	16.0
41	44	Arkansas	16.9
41	41	Georgia	16.9
43	42	Nevada	17.3
44	45	California	18.1
45	40	Alaska	18.3
46	48	Arizona	18.5
47	47	Louisiana	18.7
48	43	Mississippi	18.8
49	49	Florida	20.0
50	50	New Mexico	22.3
51	51	Texas	24.6
		U.S. ¹⁸	14.8

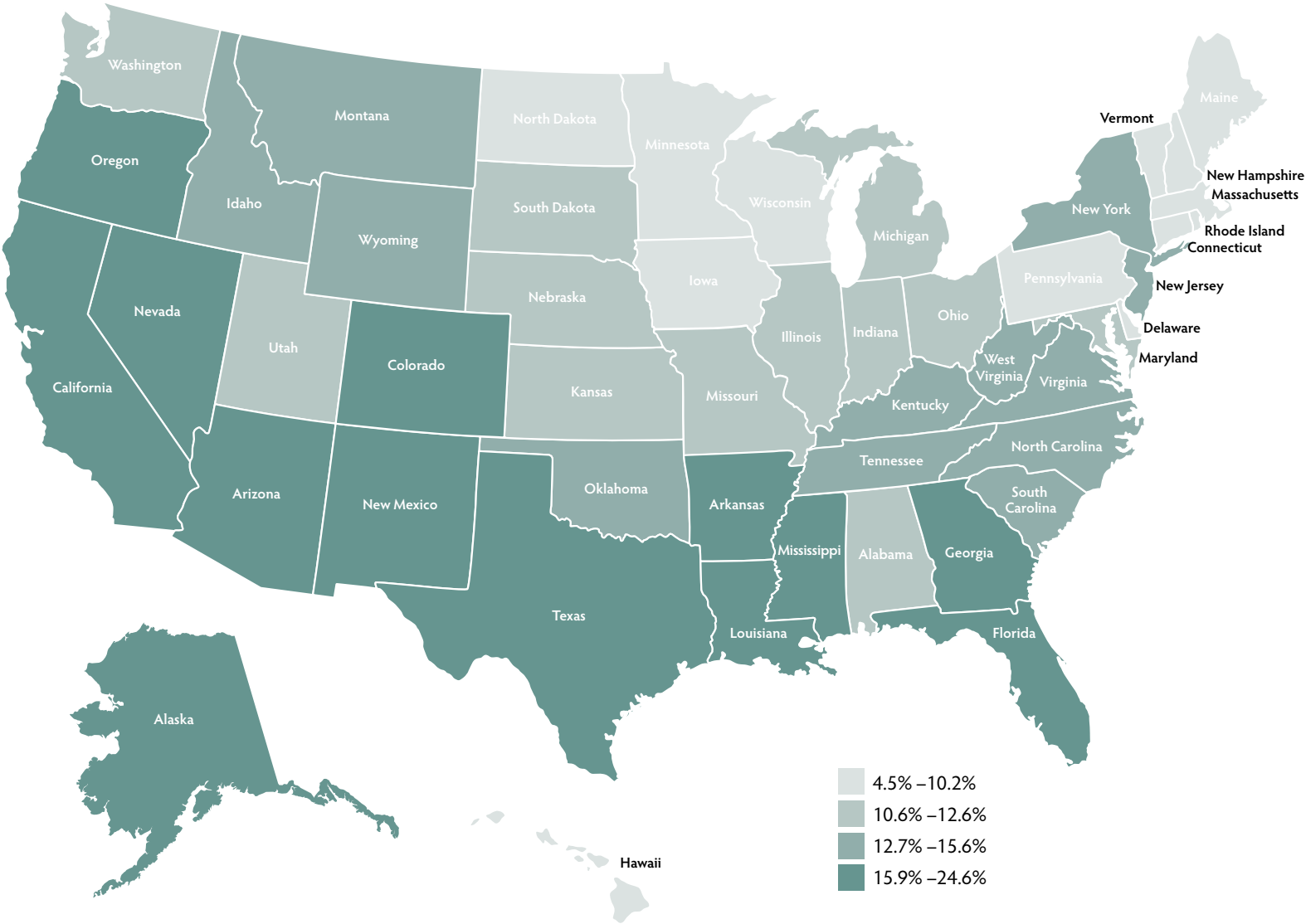
Source: CPS (SHADAC-enhanced)

¹⁶ Rankings are only meant to give the position of the state's uninsured percentage relative to other states and do not always represent statistical differences.

¹⁷ States with the asterisk (*) have a statistically significant change from the previous time period.

¹⁸ U.S. uninsured data are single-year estimates representing 2008 only.

Percent Uninsured All Ages, 2007/2008



STATE COMPARISONS: UNINSURED, 2007/2008¹⁹

Percent Uninsured Adults (18-64), 2007/2008

In 2007/2008, the Michigan rate of uninsured adults was below the 2008 national average at 14.9 percent, ranking 17th nationally.²⁰

FIGURE CM:14

State Comparisons: Percent Uninsured Adults (18-64), 2007/2008

Ranking 1 = low, 51 = high

2007/08 Rank	2005/06 Rank	State ²¹	% Uninsured
1	7	Massachusetts*	6.0
2	2	Hawaii	10.1
2	1	Minnesota	10.1
4	3	Wisconsin	10.9
5	17	Dist. of Columbia*	11.2
6	10	Vermont	11.4
7	5	Iowa	11.9
8	4	Connecticut	12.0
9	6	Pennsylvania	12.1
10	9	Maine	12.8
11	8	Rhode Island	13.0
12	15	Delaware	13.1
12	13	New Hampshire	13.1
14	16	North Dakota	13.3
15	32	Utah*	14.1
16	20	South Dakota	14.3
17	12	Michigan	14.9
18	14	Nebraska	15.0
18	11	Ohio	15.0
18	22	Washington	15.0
21	19	Indiana	15.2
22	18	Kansas	15.4
23	23	Missouri	15.8
24	36	Alabama*	16.1
25	24	Maryland	16.2
26	27	New Jersey	16.7
27	21	Virginia	16.8
28	25	Illinois	16.9
29	26	New York	17.1
30	31	Wyoming	17.8
31	28	Kentucky	18.6
32	33	Colorado	19.2
33	29	Tennessee	19.3
34	37	West Virginia	19.6
35	30	Idaho	20.1
36	40	South Carolina	20.2
37	34	Montana	20.4
38	35	North Carolina	20.7
39	41	Nevada	20.8
40	38	Oregon	20.9
41	47	Oklahoma*	21.1
42	42	Georgia	21.7
43	39	Alaska	22.5
44	45	Arizona	23.3
45	44	California	23.9
46	46	Arkansas	24.1
47	43	Mississippi	25.0
48	49	Louisiana	25.7
49	48	Florida	25.8
50	50	New Mexico	29.2
51	51	Texas	30.8
		U.S. ²²	19.7

Source: CPS (SHADAC-enhanced)

¹⁹ Rankings are only meant to give the position of the state's uninsured percentage relative to other states and do not always represent statistical differences.

²⁰ There was no statistical change in the national or state average between the 2005/06 and the 2007/08 time periods.

²¹ States with the asterisk (*) have a statistically significant change from the previous time period.

²² U.S. uninsured data are single-year estimates representing 2008 only.

Percent Uninsured Children (0-17), 2007/2008

In 2007/2008 the rate of uninsured children varied significantly among states, ranging from 2.3 percent in Massachusetts (the lowest in the nation) to 18.6 percent in Texas. At 4.7 percent, Michigan's rate of uninsured children was significantly below the national average of 9.1 percent, but from 2005/2006 to 2007/2008, Michigan's national ranking worsened, dropping from lowest in the nation to 6th lowest in the nation.

The rate of uninsured children in the U.S. decreased from 10.9 percent in 2006 to 9.1 percent in 2008, a statistically significant improvement.

FIGURE CM:15

State Comparisons: Percent Uninsured Children (0-17), 2007/2008

Ranking 1 = low, 51 = high

2007/08 Rank	2005/06 Rank	State ²³	% Uninsured
1	5	Massachusetts*	2.3
2	2	Connecticut	3.6
3	23	Indiana*	4.4
4	3	Iowa	4.5
5	10	New Hampshire	4.6
6	1	Michigan	4.7
7	17	West Virginia	4.8
8	16	Maine	4.9
8	8	Wisconsin	4.9
10	5	Hawaii	5.1
11	8	Alabama	5.2
12	5	Vermont	5.3
13	12	Dist. Of Columbia	5.7
13	26	Illinois*	5.7
15	14	Minnesota	5.8
16	18	Washington	6.1
17	12	Pennsylvania	6.3
18	19	New York	6.7
19	4	Rhode Island	6.8
20	11	Ohio	6.9
21	33	Arkansas	7.1
21	21	Kentucky	7.1
21	30	North Dakota	7.1
24	25	South Dakota	7.7
25	34	Delaware	7.8
26	29	Virginia	7.9
27	23	Missouri	8.0
28	21	Tennessee	8.1
29	42	Utah*	8.3
30	14	Kansas	8.4
31	28	Maryland	8.5
32	19	Nebraska	8.6
33	32	New Jersey	8.7
34	31	Wyoming	8.9
35	40	Idaho	9.5
36	39	Oklahoma	9.7
37	41	North Carolina	9.9
38	36	Georgia	10.2
39	43	California*	10.3
39	46	Montana	10.3
41	38	Oregon	10.4
42	37	Louisiana	10.6
43	27	Alaska	12.1
44	45	Mississippi	12.2
44	34	South Carolina	12.2
46	44	Colorado	12.6
47	48	Arizona	14.1
48	50	New Mexico	15.0
49	47	Nevada	15.6
50	49	Florida	18.0
51	51	Texas	18.6
		U.S. ²⁴	9.1

Source: CPS (SHADAC-enhanced)

²³ States with the asterisk (*) have a statistically significant change from the previous time period.

²⁴ U.S. uninsured data are single-year estimates representing 2008 only.

Michigan's Uninsured Status by County, 2008

Nearly half of Michigan's uninsured population was concentrated in southeast Michigan (Wayne, Oakland, and Macomb counties). Other counties with high numbers of uninsured included Kent and Genesee counties.

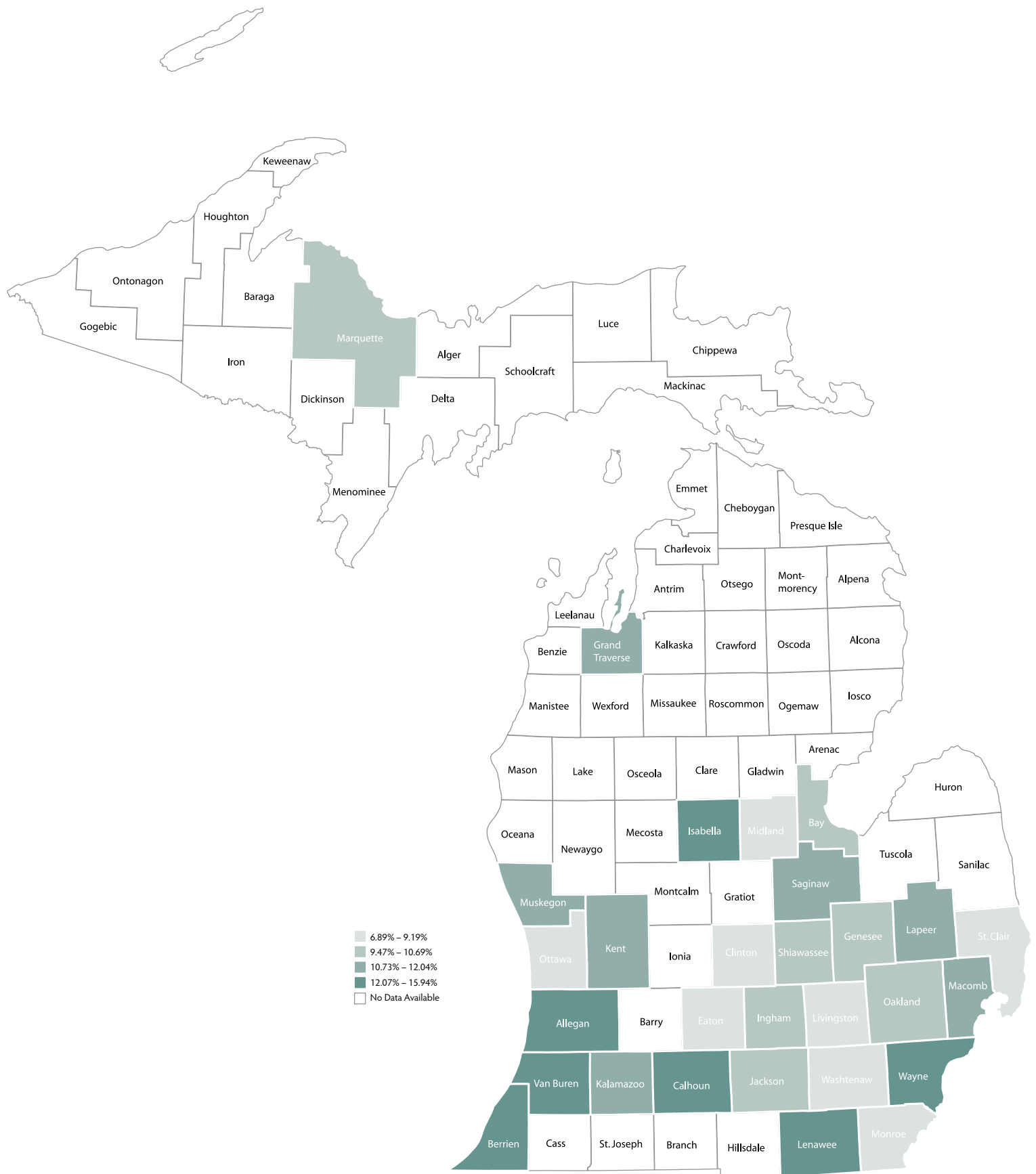
FIGURE CM:16
Uninsured Rate by Michigan County²⁵, 2008

County	% Uninsured	Number of Uninsured
Allegan	12.1%	13,447
Bay	9.7%	10,315
Berrien	14.0%	22,181
Calhoun	13.2%	17,674
Clinton	7.6%	5,286
Eaton	6.9%	7,324
Genesee	9.7%	41,436
Grand Traverse	11.0%	9,196
Ingham	10.3%	28,384
Isabella	13.4%	8,826
Jackson	9.6%	14,634
Kalamazoo	10.7%	26,167
Kent	11.3%	67,946
Lapeer	12.0%	10,571
Lenawee	12.1%	11,978
Livingston	9.2%	16,638
Macomb	10.7%	88,272
Marquette	9.8%	6,239
Midland	9.2%	7,539
Monroe	7.7%	11,670
Muskegon	11.2%	19,113
Oakland	9.5%	112,991
Ottawa	7.3%	18,964
Saginaw	10.8%	21,152
Shiawassee	10.7%	7,536
St. Clair	8.6%	14,433
Van Buren	15.9%	12,361
Washtenaw	8.0%	27,092
Wayne	14.8%	284,109

Source: U.S. Census Bureau, 2008 American Community Survey

²⁵ American Community Survey provides one year estimates for the uninsured only for counties with populations greater than 65,000 persons. Counties with less than 65,000 persons are not included in this table.

Michigan's Uninsured Status by County, 2008



Methodology—Uninsured

Most of the data in this chapter are from the State Health Access Data Assistance Center (SHADAC). SHADAC uses the U.S. Census Bureau's Current Population Survey Annual Social and Economic Supplement (CPS) estimates of health insurance to compile health insurance coverage data for all states available through a web-based table generator tool.

This report uses SHADAC-enhanced CPS health insurance estimates to report the number and percent of the population uninsured. These estimates are CPS data reweighted and adjusted by SHADAC to account for historical changes in the survey's methodology to provide more accurate estimates over time. Due to these adjustments, the uninsured estimates in this report do not correspond completely to estimates published by the Census Bureau and generally result in lower uninsurance estimates. For more information on SHADAC and its data center, visit:
<http://www.shadac.org/datacenter>.

Standard error and confidence intervals were used to determine statistical significance in this report. Statistical significance was calculated at 95 percent confidence to determine statistical differences in the data.

Percent of the Population Uninsured uses single-year data for U.S. rates and two-year pooled data for Michigan rates. Standard errors for estimates of the uninsured were too large to provide accurate single-year estimates of insurance coverage for Michigan. Pooling multiple years of CPS data provides more precise estimates of uninsured by state given small sample sizes.

The Demographic Profile of the Uninsured in Michigan uses two-year pooled data to estimate Michigan's uninsured by gender and three-year pooled data to estimate Michigan's uninsured by age, race, income, education and work status. Pooled data provide more precise estimates of uninsured by each demographic characteristic given small sample sizes.

In the demographic data for the uninsured, the "total uninsured" includes both "total among respondents" (reflecting subtotals for those who responded to the demographic and the coverage questions) and "all population total" (reflecting subtotals for those who did not respond to the demographic or coverage questions and are thus the same for all demographic breakouts that use the same number of years of pooled data).

State Comparisons use uninsured rates to rank all fifty states and the District of Columbia. These rankings are meant to compare a state's uninsured percentage relative to other states and do not always represent statistically significant differences in the percent uninsured. All state-level estimates are calculated using two-year pooled data (due to small sample sizes), while U.S. estimates reflect single-year data.

Michigan's Uninsured Status by County data are single-year estimates from the U.S. Census Bureau's 2008 American Community Survey (ACS). County-level uninsured data is reported by ACS for all geographies that have a population of 65,000 people or more; therefore, only 29 of the 83 counties in Michigan are represented in the table.



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Introduction

Public insurance is increasingly important in providing coverage.

From an overall standpoint, in 2007/2008, the picture of the publicly insured in Michigan was very similar to that of the U.S. as a whole in 2008. Indeed, in 2007/2008, the percentage of the population with public insurance in Michigan almost matched the U.S. average. Nationally and in Michigan, public coverage was increasingly important for many citizens. Nearly one-third has public insurance coverage; about half through Medicare and another 43 percent through Medicaid.

Public coverage, especially Medicaid, is disproportionate among minorities but doesn't fully cover the poor.

African Americans and Hispanics were much more likely to have public coverage than were whites (in Michigan: 41.5 percent and 36.8 percent, respectively, compared to 25.6 percent). And, while the poor were much more likely than other income groups to have public coverage, in Michigan, 37 percent of those with incomes below the federal poverty level did not have public coverage in 2007/2008.

The disabled and the elderly in Medicaid consume significantly more resources than other population groups.

Within the Medicaid population, payment and enrollment categories were disproportionate. For example, 56 percent of those enrolled in Medicaid in 2006 were children but they accounted for only 15.1 percent of all Medicaid payments. Conversely, those who were dually enrolled (i.e., covered by both Medicare and Medicaid) accounted for only 17 percent of Medicaid enrollment but 47 percent of Medicaid payments.

Penetration of the Medicaid population was also significantly different by county of residence. In 2009, 27 percent of Michigan's Medicaid population was in Wayne County. Oakland, Macomb, and Kent counties were the next highest in percentage of the Medicaid population.

Medicaid and the Children's Health Insurance Program (CHIP) brought significant federal dollars to the state.

In 2008, 22.2 percent of total state expenditures in Michigan (federal and state combined) went for the Medicaid program. In 2007, 43.6 percent of total Michigan expenditures for Medicaid were provided by the state (more than \$4 billion). In 2007, federal Medicaid dollars in Michigan exceeded \$5 billion.

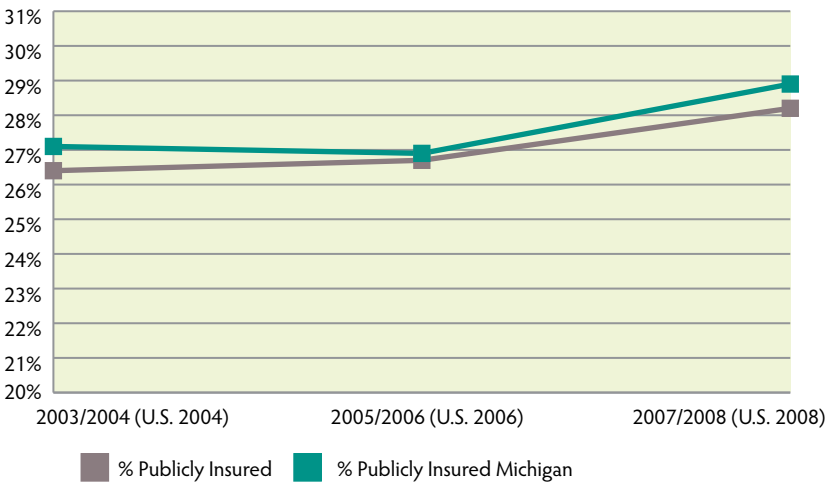
In 2008, the state provided nearly \$72 million for Michigan's Children's Health Insurance Program (MICHild)—29 percent of expenditures—with an additional \$173 million provided by the federal government. 43,000 children were enrolled in the MICHild program in 2008, and nearly 70,000 adults were enrolled in Medicaid using funds allocated to MICHild. It is estimated that 10,000 children were eligible for but not enrolled in MICHild. Starting in FY 2011, federal funding for CHIP can no longer be used to cover the adult population.



Percent of Population Publicly Insured, U.S. and Michigan

The percentage of the state and national population with public insurance has increased since 2003/2004. In 2007/2008, 2.8 million people in Michigan (28.2 percent) had publicly financed health coverage, similar to the U.S. average in 2008 (28.9 percent).

FIGURE CM:17
Percent of Population Publicly Insured, U.S. and Michigan, 2003/2004 to 2007/2008²⁶



	Number Publicly Insured (thousands)		% Publicly Insured	
	U.S.	Michigan	U.S.	Michigan ²⁷
2003/2004 (U.S. 2004)	78,969	2,625	27.1	26.4
2005/2006 (U.S. 2006)	79,815	2,659	26.9	26.7
2007/2008 (U.S. 2008)	87,168	2,781	28.9	28.2

Source: CPS (SHADAC-enhanced)

²⁶ Publicly insured as percent of total population was calculated using single-year data for U.S. rates and two-year pooled data for Michigan rates to ensure adequate sample size.

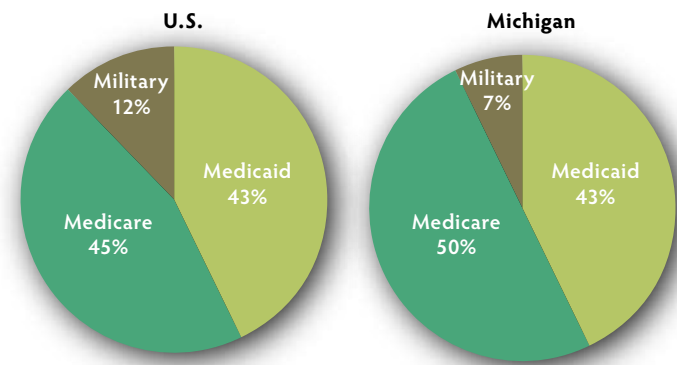
²⁷ The change in the percent of the Michigan population who are publicly insured is not statistically significant.

Publicly Insured by Coverage Type, U.S. and Michigan

In 2007/2008, about half of the publicly insured were enrolled in Medicare (45 percent in the U.S., and 50 percent in Michigan). Enrollment in Medicaid was the next largest public program at 43 percent for both the U.S. and Michigan. Finally, military health coverage accounted for 12 percent of the publicly enrolled in the U.S. and seven percent in Michigan. Enrollment in all three public programs has increased steadily since 2003/2004.

In 2005, 17 percent of total Medicaid enrollees were dually enrolled compared to 18 percent in the U.S.²⁸

FIGURE CM:18
Percent of the Population Publicly Insured by Coverage Type, U.S. and Michigan^{29, 30}



Source: CPS (SHADAC-enhanced)

FIGURE CM:19
Distribution of the Publicly Insured by Coverage Type,³¹ U.S. (2008) and Michigan (2007/2008)

U.S.						
Time Period	Number Insured (thousands)			% Insured		
	Medicaid	Medicare	Military	Medicaid	Medicare	Military
2004	37,687	39,702	10,378	12.9	13.6	3.6
2006	38,029	40,418	10,220	12.8	13.6	3.4
2008	42,408	42,999	11,346	14.1	14.3	3.8

Michigan						
Time Period	Number Insured (thousands)			% Insured		
	Medicaid	Medicare	Military	Medicaid	Medicare	Military
2003/2004	1,249	1,438	175	12.6	14.5	1.8
2005/2006	1,296	1,403	182	13.0	14.1	1.8
2007/2008	1,290	1,507	205	13.1	15.3	2.1

Source: CPS (SHADAC-enhanced)

²⁸ Please see page 38 for data on dual enrollment.

²⁹ These figures are not mutually exclusive and reflect the fact that some individuals may be dually enrolled and have coverage from more than one source.

³⁰ The Medicaid coverage data from CPS displayed here should only be used for comparisons to other coverage types or the uninsured. For accurate Medicaid enrollment figures, refer to the Medicaid enrollment data from Kaiser State Health Facts in this chapter, which report data from the Centers for Medicare and Medicaid Services (CMS). See the methodology for more information.

³¹ Medicare and Medicaid insured data include dual-eligibles. Dual-eligibles are individuals entitled to Medicare who are also eligible for some level of Medicaid benefits.



DEMOGRAPHIC PROFILE OF THE PUBLICLY INSURED IN MICHIGAN

Michigan's Publicly Insured by Age, 2007/2008

In 2007/2008, 44 percent of those publicly insured in Michigan were 65 years or older, primarily due to Medicare eligibility age requirements. Seventeen percent of those with public insurance were school age children, ages 6-17.



FIGURE CM:20

Distribution of the Publicly Insured by Age, Michigan, 2007/2008

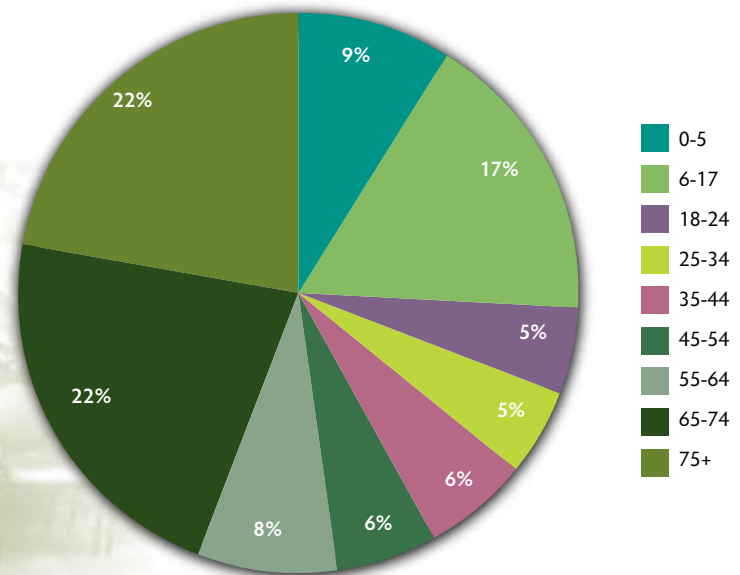
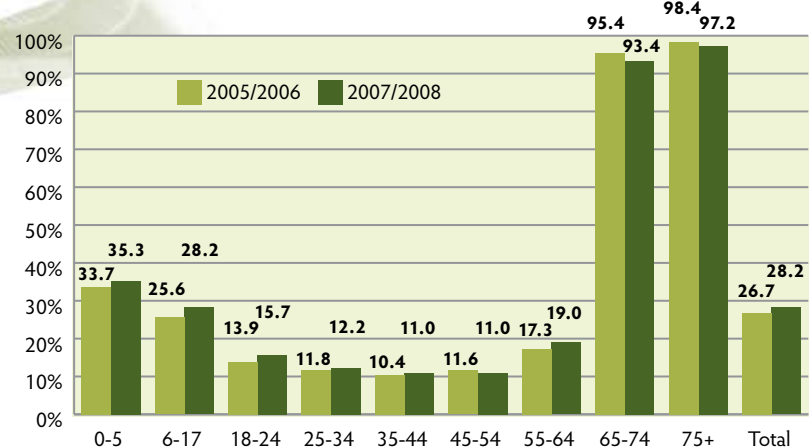


FIGURE CM:21

Publicly Insured as a Percent of Total Population by Age, Michigan, 2005/2006 and 2007/2008



Age Range	2005/2006	2007/2008 ³²		
	% Publicly Insured	% Publicly Insured	% Distribution of the Publicly Insured	Number of Publicly Insured (in thousands)
0-5	33.7	35.3	9.4	261
6-17	25.6	28.2	16.6	463
18-24	13.9	15.7	5.1	141
25-34	11.8	12.2	5.4	149
35-44	10.4	11.0	5.5	153
45-54	11.6	11.0	6.3	174
55-64	17.3	19.0	7.5	209
65-74	95.4	93.4	22.0	612
75+	98.4	97.2	22.3	619
Total	26.7	28.2	100.0	2,781

Source: CPS (SHADAC-enhanced)

³² The increases and decreases in the percent of the population publicly insured for each age group were not statistically significant from 2005/2006 to 2007/2008.

DEMOGRAPHIC PROFILE OF THE PUBLICLY INSURED IN MICHIGAN

Michigan's Publicly Insured by Race/Ethnicity, 2006/2008³³

Between 2003/2005 and 2006/2008, there was a statistically significant increase in the percentage of Hispanics in Michigan with public health coverage, from 26.7 percent in 2003/2005 to 36.8 percent in 2006/2008.

In Michigan, African Americans and Hispanics of all ages were more likely to be covered by public insurance programs than whites.

FIGURE CM:22

Distribution of the Publicly Insured by Race/Ethnicity, Michigan, 2006/2008

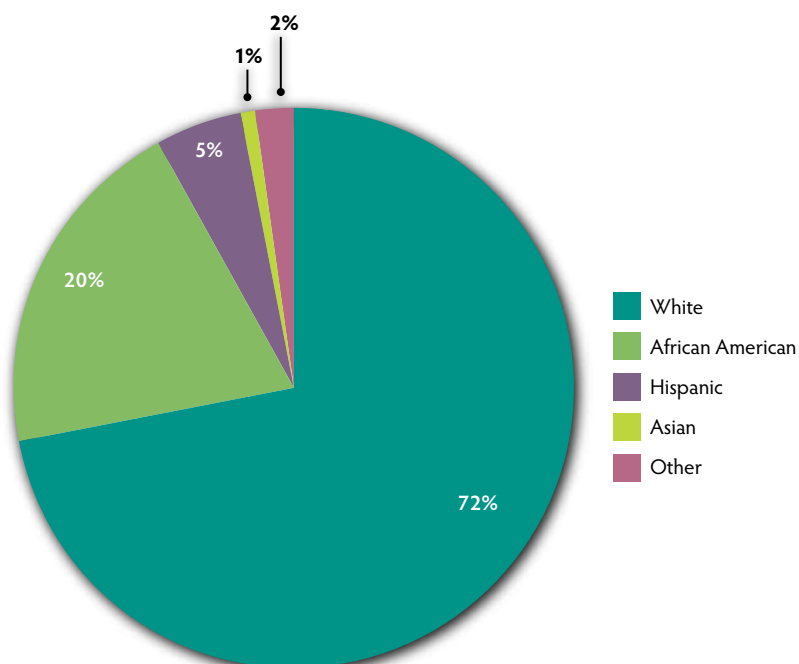
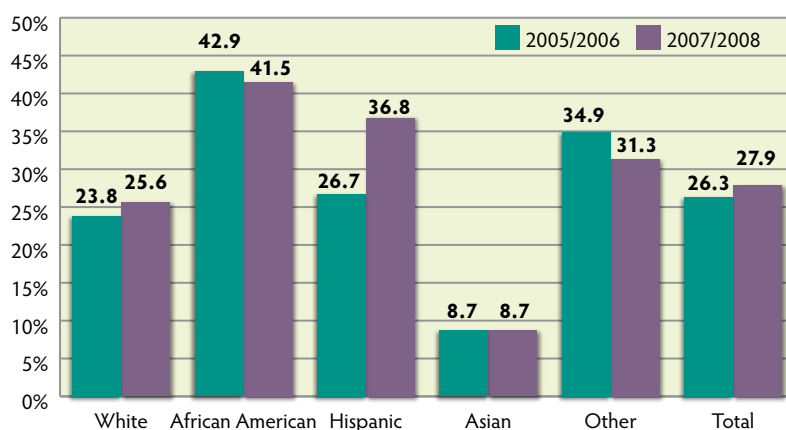


FIGURE CM:23

Publicly Insured as a Percent of Total Population by Race/Ethnicity, Michigan, 2003/2005 and 2006/2008



Race/Ethnicity	2003/2005	2006/2008		
	% Publicly Insured	% Publicly Insured	% Distribution of the Publicly Insured	Number of Publicly Insured (in thousands)
White	23.8	25.6	72.0	1,986
African American	42.9	41.5	20.2	558
Hispanic	26.7	36.8	4.7	131
Asian	8.7	8.7	0.7	20
Other	34.9	31.3	2.2	62
Total	26.3	27.9	100.0	2,758

Source: CPS (SHADAC-enhanced)

³³ Three-year pooled data are used for publicly insured estimates by race/ethnicity due to small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of publicly insured populations by demographic characteristic. See methodology for more information.

Michigan's Publicly Insured by Income, 2007/2008

In 2007/2008, more than half of those with public health insurance in Michigan lived in families with incomes under 200 percent of the federal poverty level (FPL). Having public health coverage was inversely related to income: almost 63 percent of those with incomes below the FPL had public health coverage compared to 12.6 percent of those who were at 400 percent or above. More than 75 percent of those earning above 400 percent of poverty had Medicare coverage.

FIGURE CM:24
Distribution of the Publicly Insured by Federal Poverty Level, Michigan, 2007/2008

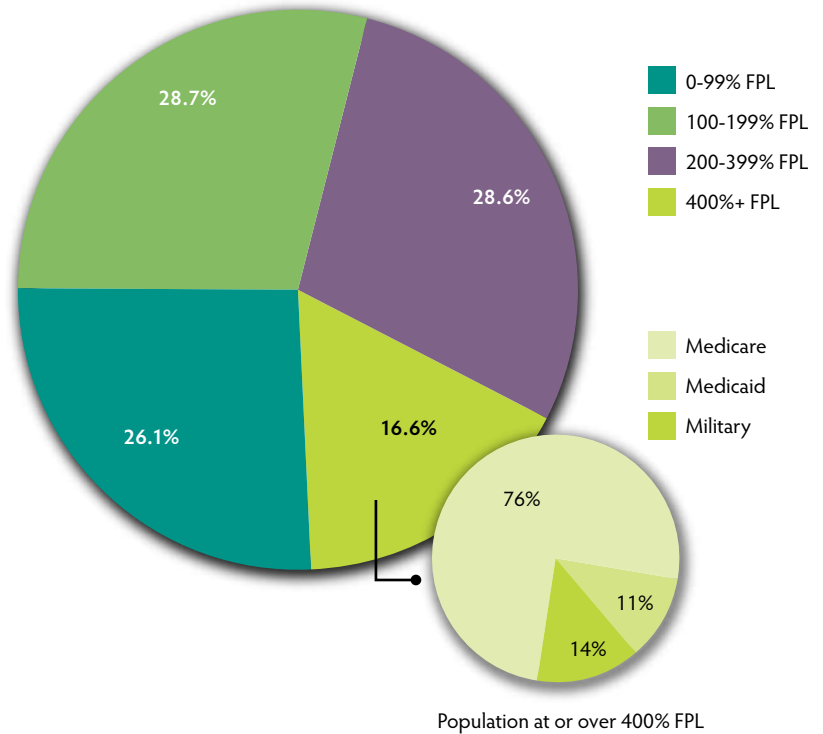
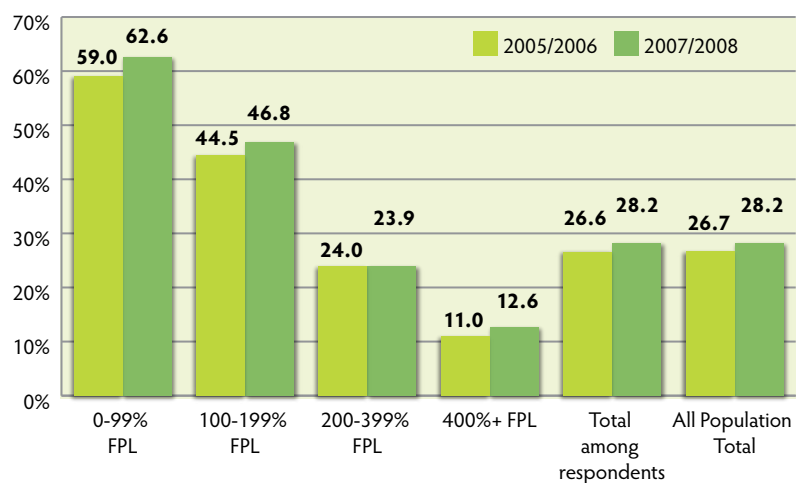


FIGURE CM:25
Publicly Insured as a Percent of Total Population by Federal Poverty Level, Michigan, 2005/2006 and 2007/2008



Family Poverty Level	2005/2006	2007/2008 ³⁴		
	% Publicly Insured	% Publicly Insured	% Distribution of the Publicly Insured	Number of Publicly Insured (in thousands)
0-99% FPL	59.0	62.6	26.1	725
100-199% FPL	44.5	46.8	28.7	797
200-399% FPL	24.0	23.9	28.6	794
400%+ FPL	11.0	12.6	16.6	460
Total among respondents	26.6	28.2	100.0	2,776
All Population Total	26.7	28.2	—	2,781

Source: CPS (SHADAC-enhanced)

³⁴ The increases and decreases in the percent of the population publicly insured for each family poverty level group were not statistically significant from 2005/2006 to 2007/2008.

DEMOGRAPHIC PROFILE OF THE PUBLICLY INSURED IN MICHIGAN

Michigan's Publicly Insured by Family Education Level, 2007/2008

Having public coverage was inversely related to educational attainment. Over half of those with public health coverage lived in households where the highest educational level attained by anyone in the household was a high school diploma or less; just 18 percent lived in households where the highest educational attainment was a college degree or higher.

There was a statistically significant increase in those with college degrees who were publicly insured in 2007/2008 compared to 2005/2006—from 10.7 percent to 14.2 percent respectively—because of increases in both Medicare and Medicaid enrollment in this group.

FIGURE CM:26
Distribution of the Publicly Insured by Family Education Level, Michigan, 2007/2008

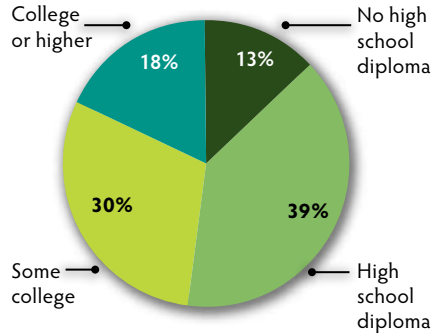


FIGURE CM:27
Publicly Insured by Family Education Level and Coverage Type, 2007/2008

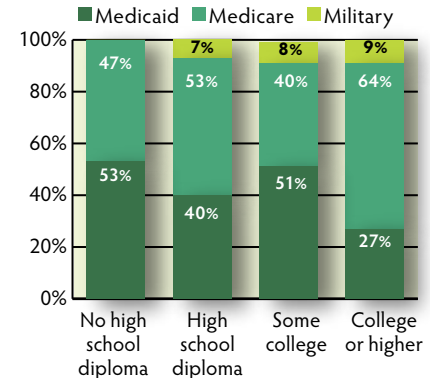
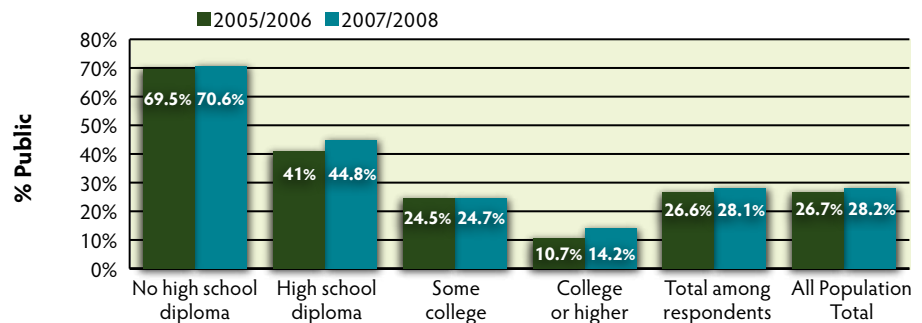


FIGURE CM:28
Publicly Insured as a Percent of Total Population by Family Education Level, Michigan, 2005/2006 and 2007/2008



Education—Family	2005/2006	2007/2008		
	% Publicly Insured	% Publicly Insured	% Distribution of Publicly Insured	# of Publicly Insured (in thousands)
No high school diploma	69.5	70.6	13.0	359
High school diploma	41.0	44.8	38.5	1,068
Some college	24.5	24.7	30.2	836
College or higher	10.7	14.2	18.4	509
Total among respondents	26.6	28.1	100.0	2,772
All Population Total	26.7	28.2	—	2,781

Source: CPS (SHADAC-enhanced)

FIGURE CM:29
Percent of the population with Medicaid or Medicare coverage by Family Education Level, Michigan, 2005/2006 vs. 2007/2008

	% Medicaid		% Medicare	
	2005/2006	2007/2008	2005/2006	2007/2008
No high school diploma	42.8	40.4	33.0	35.6
High school diploma	19.8	19.9	22.8	26.0
Some college	12.8	13.5	11.0	10.6
College or higher	2.9	4.1	7.4	9.7
Total	13.0	13.1	14.1	15.3

Source: CPS (SHADAC-enhanced)

Michigan's Publicly Insured by Family Work Status, 2007/2008

In 2007/2008, 60 percent of non-elderly adults with public insurance were working either full or part-time. This percentage is similar to the previous time period (2005/2006).

FIGURE CM:30

Distribution of Publicly Insured (Ages 18-64) by Family Work Status, Michigan, 2007/2008

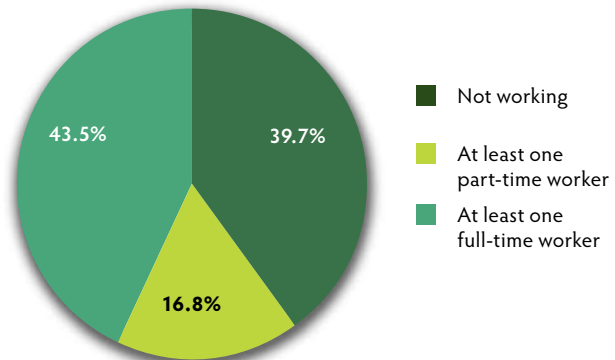
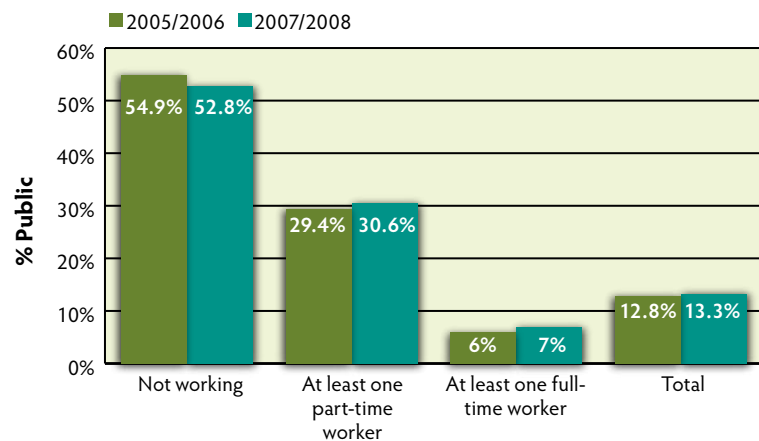


FIGURE CM:31

Publicly Insured (Ages 18-64) as a Percent of Total Population (18-64) by Family Work Status, Michigan, 2005/2006 and 2007/2008



Ages 18 to 64	2005/2006	2007/2008 ³⁵		
		% Publicly Insured	% Distribution of Publicly Insured	Number of Publicly Insured (in thousands)
Not working	54.9	52.8	39.7	328
At least one part-time worker	29.4	30.6	16.8	139
At least one full-time worker	6.0	7.0	43.5	359
Total	12.8	13.3	100.0	826

Source: CPS (SHADAC-enhanced)

³⁵ From the period 2005/2006 to 2007/2008, there were no statistically significant increases or decreases in the percent of the population publicly insured by family work status among those ages 18 to 64.

STATE COMPARISONS: PUBLICLY INSURED, 2007/2008

Percent Publicly Insured All Ages, 2007/2008

In 2008 there was a statistically significant increase in the national percent of publicly insured, going from 26.9 percent in 2006 to 28.9 percent in 2008.

In 2007/2008, Michigan had the 29th highest percentage of publicly insured among the 50 states and District of Columbia; the same ranking as in 2005/2006.

FIGURE CM:32

State Comparisons: Percent Publicly Insured All Ages, 2007/2008

Ranking 1 = high, 51 = low

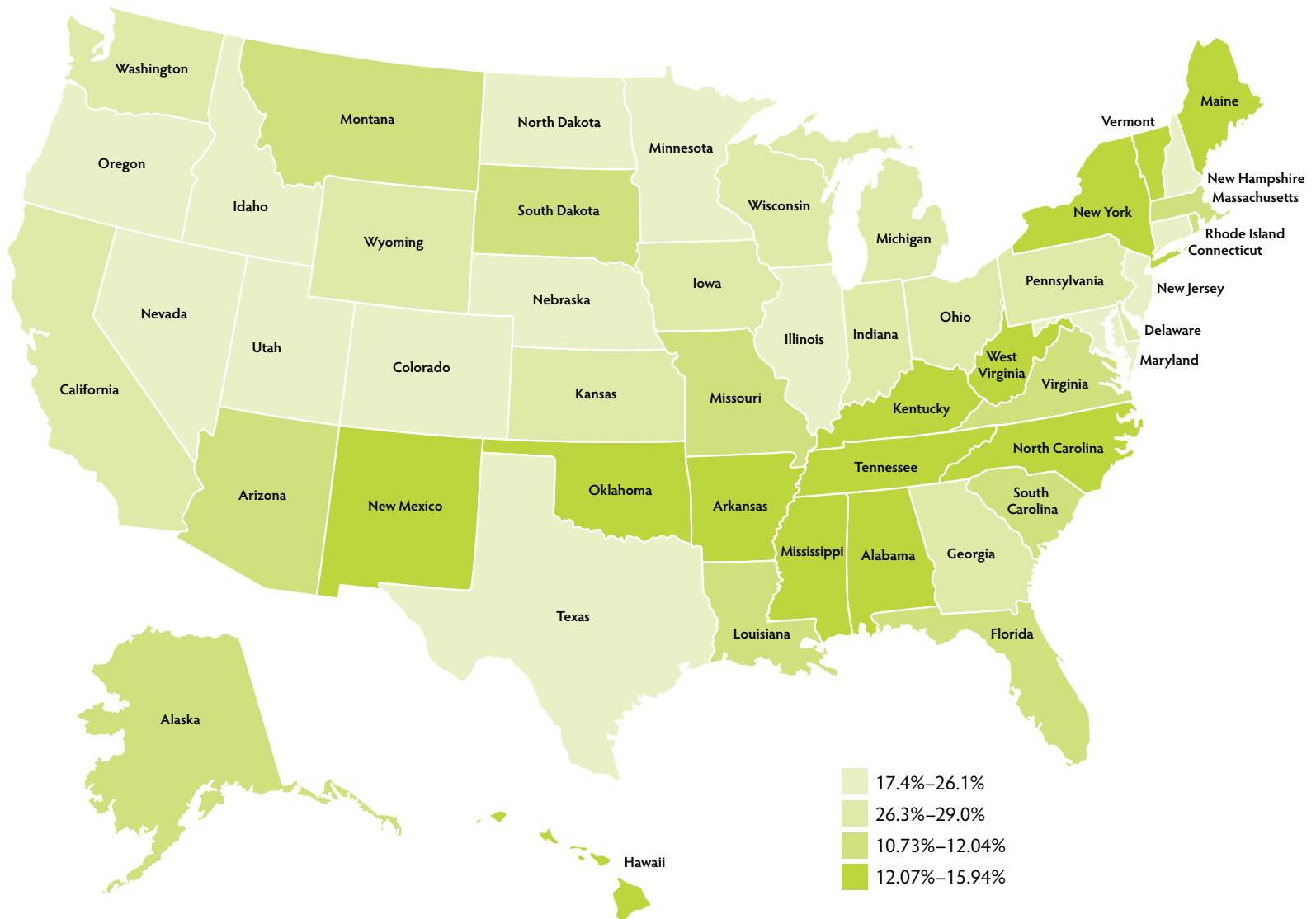
2007/08 Rank	2005/06 Rank	State ³⁶	% Publicly Insured in 2007/2008
1	2	Maine	37.3
2	1	West Virginia	36.3
3	3	Mississippi	35.8
4	4	Vermont	34.9
5	6	Tennessee	34.8
6	8	Hawaii	34.4
7	13	Arkansas	33.5
8	9	Oklahoma	33.3
9	17	Kentucky*	33.0
10	4	New Mexico	32.4
11	12	Alabama	31.8
12	19	North Carolina	31.5
13	14	New York	31.3
14	7	Dist. Of Columbia	30.9
14	22	Montana	30.9
16	18	Arizona	30.7
17	37	Massachusetts*	30.6
18	15	Louisiana	30.2
18	16	South Carolina	30.2
20	20	Florida	29.9
21	10	Rhode Island	29.8
22	10	Alaska	29.4
22	24	Missouri	29.4
22	21	South Dakota	29.4
25	31	Virginia*	29.1
26	22	Washington	29.0
27	27	Pennsylvania	28.8
28	24	Delaware	28.6
29	29	Michigan	28.2
30	46	Indiana*	27.5
31	29	California	27.2
31	34	Kansas	27.2
31	26	Ohio	27.2
34	27	Wyoming	26.9
35	41	Wisconsin	26.7
36	32	Georgia	26.3
36	33	Iowa	26.3
38	38	Texas	26.1
39	38	Connecticut	26.0
40	44	Illinois	25.7
40	35	Oregon	25.7
42	44	Minnesota	25.6
43	38	Idaho	25.3
44	36	Nebraska	25.1
45	43	Maryland	24.7
46	42	North Dakota	24.5
47	51	New Jersey	22.7
48	49	Colorado	22.0
49	48	New Hampshire	21.2
50	47	Nevada	21.1
51	50	Utah	17.4
		U.S. ³⁷	28.9

Source: CPS (SHADAC-enhanced)

³⁶ States with the asterisk (*) have a statistically significant change from the previous time period.

³⁷ U.S. publicly insured data are single-year estimates representing 2008 only.

Percent Publicly Insured All Ages, 2007/2008



STATE COMPARISONS: PUBLICLY INSURED, 2007/2008

Percent Publicly Insured Adults (18-64), 2007/2008

From 2006 to 2008 there was a statistically significant increase in the national percent of publicly insured adults, going from 12.7 to 14.1 percent.

In 2007/2008, Michigan had the 26th highest percentage of publicly insured adults among the 50 states and District of Columbia. The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:33

State Comparisons: Percent Publicly Insured Adults (18-64), 2007/2008 Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ³⁸	% Publicly Insured in 2007/08
1	1	Maine	22.4
2	2	Alaska	19.6
3	7	Vermont	19.3
4	10	Hawaii*	19.1
5	4	Mississippi	19.1
6	3	West Virginia	19.0
7	8	Dist. Of Columbia	18.9
8	5	Tennessee	18.4
9	24	Massachusetts*	18.2
10	14	Kentucky	18.1
11	11	Arizona	17.5
12	9	New Mexico	17.1
13	12	New York	17.1
14	15	North Carolina	16.9
15	15	Virginia	16.5
16	18	Washington	16.3
17	19	Oklahoma	16.0
18	6	Rhode Island	16.0
19	13	Alabama	15.8
20	21	Arkansas	15.3
21	22	Delaware	15.1
22	20	Montana	15.1
23	15	South Carolina	15.1
24	30	Missouri	14.7
25	22	Louisiana	13.6
26	28	Michigan	13.3
27	29	South Dakota	13.3
28	26	Georgia	13.2
29	32	Florida	13.0
30	39	Minnesota	13.0
31	33	Wisconsin	13.0
32	39	Pennsylvania*	12.8
33	27	California	12.6
34	25	Ohio	12.6
35	30	Wyoming	12.6
36	47	Kansas*	12.5
37	37	Connecticut	11.8
38	34	Nebraska	11.7
39	43	Illinois	11.5
40	45	Colorado	11.2
41	36	Iowa	11.2
42	42	Maryland	11.2
43	41	Indiana	11.1
44	34	Oregon	11.1
45	46	Texas*	11.1
46	48	North Dakota	9.8
47	44	Nevada	9.6
48	51	New Jersey*	9.5
49	37	Idaho	9.3
50	50	New Hampshire	8.3
51	49	Utah	7.9
		U.S. ³⁹	14.1

Source: CPS (SHADAC-enhanced)

³⁸ States with the asterisk (*) have a statistically significant change from the previous time period.

³⁹ U.S. publicly insured data are single-year estimates representing 2008 only.

Percent Publicly Insured Children (0-17), 2007/2008

From 2006 to 2008 there was a statistically significant increase in the national percent of publicly insured children, going from 29.9 percent in 2006 to 33.5 percent.

In 2007/2008, Michigan had the 30th highest percentage of publicly insured children among the 50 states and District of Columbia. The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:34

State Comparisons: Percent Publicly Insured Children (0-17), 2007/2008

Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ⁴⁰	% Publicly Insured in 2007/08
1	6	Mississippi	48.0
2	2	Arkansas	47.8
3	8	Oklahoma	42.7
3	5	West Virginia	42.7
5	1	Dist. of Columbia	42.1
6	13	Tennessee	41.8
7	7	New Mexico	41.1
8	3	Vermont	40.3
9	10	Hawaii	39.4
10	14	Maine	38.5
11	12	Louisiana	37.6
12	14	Kentucky	37.3
13	3	Alaska	36.4
14	20	North Carolina	36.0
15	9	Georgia	35.7
16	19	California*	35.6
17	21	Arizona	35.4
18	10	Alabama	35.2
19	18	New York	35.1
20	23	Texas*	35.0
21	39	Indiana*	33.4
21	37	Montana	33.4
23	22	Washington	33.1
24	42	Illinois*	32.0
24	17	Rhode Island	32.0
26	24	Missouri	31.6
27	25	Kansas	31.2
28	16	South Carolina	30.7
28	29	Virginia	30.7
30	31	Michigan	30.4
31	25	South Dakota	30.2
32	28	Ohio	29.5
33	29	Pennsylvania	28.5
34	36	Oregon	27.9
35	46	Massachusetts*	27.8
35	27	Wyoming	27.8
37	33	Iowa	27.4
37	34	Nebraska	27.4
39	32	Florida	27.3
40	38	Delaware	26.8
41	40	Wisconsin	26.6
42	43	Maryland	26.4
43	35	Idaho	26.3
44	44	Connecticut	26.2
45	41	North Dakota	24.5
46	48	Minnesota	23.0
47	47	Colorado	21.6
48	50	New Hampshire	20.1
49	49	New Jersey	19.4
50	51	Nevada	18.2
51	45	Utah*	16.1
		U.S. ⁴¹	33.5

Source: CPS (SHADAC-enhanced)

⁴⁰ States with the asterisk (*) have a statistically significant change from the previous time period.

⁴¹ U.S. publicly insured data are single-year estimates representing 2008 only.

STATE COMPARISONS: PUBLICLY INSURED, 2007/2008

Medicare Enrollment, 2008

In 2008, Michigan had the eighth highest number of individuals enrolled in Medicare among the 50 states and District of Columbia, which is consistent with Michigan's ranking in overall population.

FIGURE CM:35

State Comparisons: Medicare Enrollment, 2008

Ranking 1 = high, 51 = low

Rank (No. enrolled)	Rank (Pop. over 65 years)	State	Total number of beneficiaries	% of population enrolled in Medicare
1	1	California	4,470,439	12.1
2	2	Florida	3,180,256	17.3
3	3	New York	2,877,270	14.8
4	4	Texas	2,778,533	11.4
5	5	Pennsylvania	2,210,989	17.7
6	6	Ohio	1,830,807	15.8
7	7	Illinois	1,769,546	13.6
8	8	Michigan	1,571,709	15.4
9	9	North Carolina	1,392,450	15.1
10	10	New Jersey	1,279,020	14.6
11	12	Georgia	1,145,727	11.8
12	11	Virginia	1,071,681	13.7
13	13	Massachusetts	1,015,086	15.6
14	14	Tennessee	995,254	15.9
15	16	Missouri	961,308	16.2
16	15	Indiana	958,270	14.9
17	17	Washington	896,838	13.6
18	19	Wisconsin	871,111	15.4
19	18	Arizona	852,880	13.4
20	20	Alabama	804,351	17.2
21	22	Minnesota	746,505	14.2
22	21	Maryland	740,811	13.0
23	24	Kentucky	724,356	16.9
24	23	South Carolina	714,008	15.9
25	25	Louisiana	653,018	15.0
26	28	Oregon	580,425	15.2
27	27	Oklahoma	575,298	15.7
28	26	Colorado	574,263	11.6
29	29	Connecticut	546,623	15.4
30	32	Arkansas	505,634	17.6
31	30	Iowa	504,944	16.8
32	31	Mississippi	476,564	16.1
33	33	Kansas	416,167	14.9
34	35	West Virginia	371,770	20.4
35	34	Nevada	327,629	12.5
36	36	New Mexico	292,363	14.6
37	39	Nebraska	270,435	15.1
38	37	Utah	262,064	9.7
39	38	Maine	252,025	18.9
40	40	Idaho	212,381	13.9
41	42	New Hampshire	203,608	15.2
42	41	Hawaii	193,333	14.8
43	44	Rhode Island	177,279	16.6
44	43	Montana	159,650	16.4
45	45	Delaware	139,709	15.9
46	46	South Dakota	131,368	16.3
47	48	North Dakota	106,005	16.5
48	47	Vermont	104,460	16.5
49	50	Wyoming	75,790	14.3
50	49	District of Columbia	74,805	12.6
51	51	Alaska	59,435	8.5
		U.S.	44,831,390	14.7

Source (Medicare enrollment): Kaiser State Health Facts. Calculation based on CMS Statistics: Centers for Medicare and Medicaid Services (CMS), Office of External Affairs, released 1/31/08; and 2007 population.

Source (Percent of population enrolled): Kaiser State Health Facts from Mathematica Policy Research analysis of CMS State/County Market Penetration Files, July 2008.

Source (Population over 65 years): Current Population Survey Annual Social and Economic Supplement (CPS)

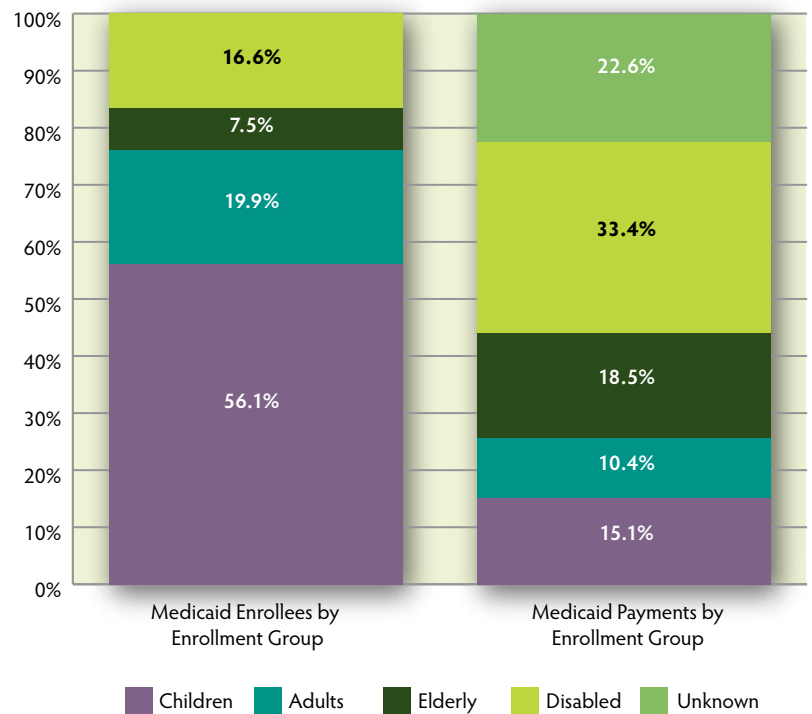
MEDICAID ENROLLMENT AND SPENDING

Distribution of Medicaid Enrollment vs. Payments, U.S. and Michigan, Fiscal Year 2006

In FY 2006, 56.1 percent of Medicaid enrollees were children, but children accounted for only 15.1 percent of Medicaid payments. In contrast, just 7.5 percent of Medicaid enrollees were over the age of 65 but accounted for 18.5 percent of Medicaid payments.

FIGURE CM:36

Distribution of Medicaid Enrollment vs. Payments, U.S. and Michigan, Fiscal Year 2006



Distribution of Medicaid Enrollees by Enrollment Group FY2006	Michigan (%)	U.S. (%)	Michigan (thousands)	U.S. (thousands)
Children	56.1	49.7	1,017	29,182
Adults ⁴²	19.9	25.3	360	14,880
Elderly	7.5	10.4	135	6,116
Disabled	16.6	14.5	301	8,537
Total	100.0	100.0	1,813	58,715

Distribution of Medicaid Payments by Enrollment Group FY2006	Michigan (%)	U.S. (%)	Michigan (\$ millions)	U.S. (\$ millions)
Children	15.1	18.6	1,153	49,847
Adults	10.4	11.9	789	31,871
Elderly	18.5	24.3	1,409	65,389
Disabled	33.4	40.9	2,540	109,899
Unknown	22.6	4.3	1,723	11,634
Total	100.0	100.0	7,615	268,641

Source: The Urban Institute and Kaiser Commission on Medicaid and the Uninsured

⁴² Adults are generally people age 18 to 64 and children are generally people age 17 and younger. However, some people under age 18 may be classified as "adults" and some people age 18 and older may be classified as "children" depending on why they qualify for the program and each state's practices.

MEDICAID ENROLLMENT AND SPENDING

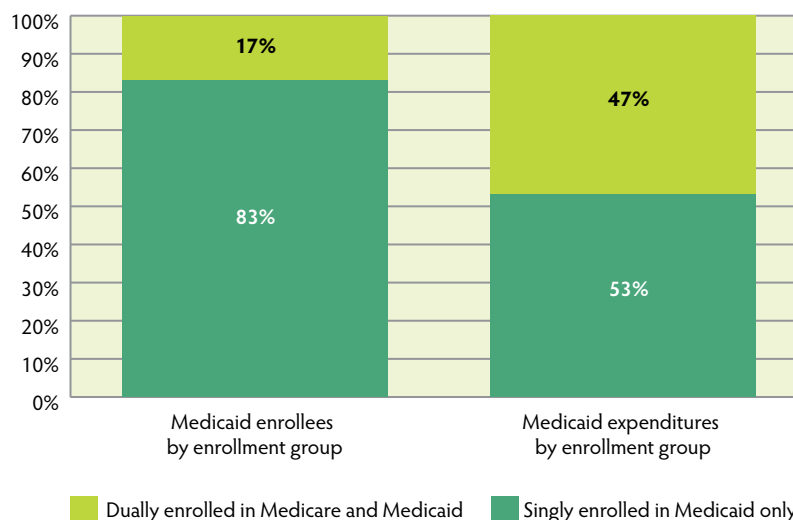
Dually Enrolled Share of Medicaid Enrollment and Spending, Fiscal Year 2005

In FY 2005, the most recent year data were available; there were 245,888 people in Michigan and over 8.8 million in the U.S. dually enrolled in both Medicare and Medicaid.

In Michigan during FY 2005, although only 17 percent of Medicaid enrollees were dually enrolled, they accounted for 47 percent of Medicaid payments.⁴³

⁴³ Urban Institute estimates based on data from the Medicaid Statistical Information System (MSIS) and Medicaid Financial Management Reports (CMS Form 64) prepared for the Kaiser Commission on Medicaid and the Uninsured. For more information, see "Dual-eligibles: Medicaid Enrollment and Spending for Medicare Beneficiaries in 2005"; available at <http://www.kff.org/medicaid/7846.cfm>.

FIGURE CM:37
Dually Enrolled Share of Medicaid Enrollment and Spending, Michigan, Fiscal Year 2005

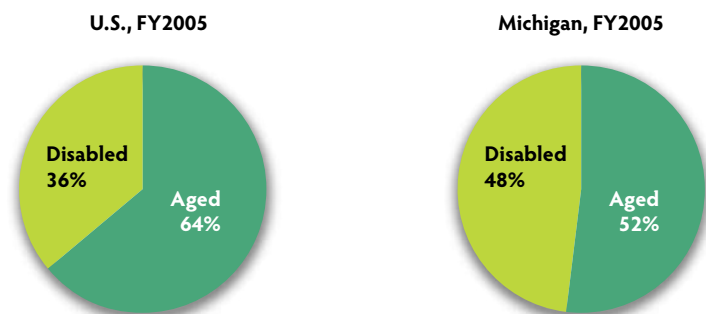


	Number of enrollees (U.S.)	% of all Medicaid enrollees (U.S.)	% of Medicaid total expenditures (U.S.)	Number of enrollees (Michigan)	% of all Medicaid enrollees (Michigan)	% of Medicaid total expenditures (Michigan)
Enrolled in Medicaid only	48,928,667	82	54	1,446,400	83	53
Dually enrolled in Medicare and Medicaid	8,807,160	18	46	245,888	17	47

Distribution of the Dually Enrolled, Fiscal Year 2005

At 48 percent, Michigan had a somewhat larger proportion of disabled dually enrolled individuals compared with the U.S. overall, where younger disabled enrollees made up just 36 percent of those who were dually enrolled.

FIGURE CM:38
Distribution of the Dually Enrolled, U.S. and Michigan, Fiscal Year 2005



	U.S.	Michigan
Aged	64%	52%
Disabled	36%	48%

Source: Kaiser Commission on Medicaid and the Uninsured

Medicaid Enrollment, Fiscal Year 2006

In FY 2006, California had the largest Medicaid population in the country. Michigan had the eighth largest Medicaid population, both consistent with their total population rankings. Louisiana had a disproportionately high Medicaid population relative to its overall population rank. New Jersey and Virginia had disproportionately low Medicaid populations relative to their overall population rank.

FIGURE CM:39

State Comparisons: Medicaid Enrollment, Fiscal Year 2006

Ranking 1 = high, 51 = low

Medicaid Enrollment Rank	Population Rank	State	FY 2006 Medicaid Enrollment ⁴⁴
1	1	California	10,547,200
2	3	New York	5,116,800
3	2	Texas	4,102,500
4	4	Florida	3,030,100
5	5	Illinois	2,422,300
6	6	Pennsylvania	2,085,500
7	7	Ohio	2,063,000
8	8	Michigan	1,813,300
9	9	Georgia	1,811,500
10	10	North Carolina	1,640,300
11	17	Tennessee	1,482,300
12	16	Arizona	1,432,700
13	13	Massachusetts	1,224,300
14	14	Washington	1,195,800
15	25	Louisiana	1,090,800
16	18	Missouri	1,070,300
17	15	Indiana	1,016,100
18	20	Wisconsin	987,900
19	23	Alabama	973,900
20	24	South Carolina	960,800
21	11	New Jersey	935,500
22	12	Virginia	862,400
23	26	Kentucky	837,500
24	31	Mississippi	787,700
25	21	Minnesota	774,200
26	19	Maryland	771,000
27	32	Arkansas	754,700
28	28	Oklahoma	701,300
29	22	Colorado	549,800
30	27	Oregon	529,800
31	29	Connecticut	525,600
32	36	New Mexico	513,900
33	30	Iowa	454,400
34	37	West Virginia	392,600
35	33	Kansas	360,000
36	34	Utah	304,000
37	40	Maine ⁴⁵	302,200
38	35	Nevada ⁴⁶	257,800
39	38	Nebraska	241,700
40	39	Idaho	217,500
41	42	Hawaii	217,300
42	43	Rhode Island	197,800
43	45	Delaware	183,800
44	50	Dist. of Columbia	163,200
45	49	Vermont	159,700
46	41	New Hampshire	141,600
47	47	Alaska	123,300
48	46	South Dakota	118,500
49	44	Montana	113,900
50	51	Wyoming	81,600
51	48	North Dakota	73,100
		U.S.	58,714,800

⁴⁴ Enrollment estimates are rounded to the nearest 100. Estimates will differ slightly from estimates posted by CMS because adjustments to the data have been made for several states where some individuals appeared to be categorized incorrectly. Furthermore, enrollment totals are persons ever enrolled during the fiscal year. Enrollment includes those eligible for family planning waiver programs, receiving restricted benefits because of their eligibility status as aliens, dual Medicare-Medicaid eligibles, and enrollees eligible for prescription drug-only coverage. See methodology for additional information.

⁴⁵ Maine data are for FY2004.

⁴⁶ Nevada data are for FY2005.

Source (Medicaid enrollment): The Urban Institute and Kaiser Commission on Medicaid and the Uninsured

Source (Population): Population Division, U.S. Census Bureau, July 2006

MEDICAID ENROLLMENT AND SPENDING

Medicaid Recipients as a Percentage of County Population in Michigan, Fiscal Year 2009

Twenty-seven percent of the state's Medicaid population was in Wayne County. Oakland, Macomb, and Kent counties had the next highest number of Medicaid recipients, together accounting for another 19 percent of the state's Medicaid population. At 26.8 percent, Lake County had the highest percentage of its population on Medicaid.

FIGURE CM:40

(Map & Table) Medicaid Recipients as a Percentage of County Population in Michigan, Fiscal Year 2009

County	Medicaid Recipients (monthly average)	Population ⁴⁷	Medicaid Recipients as a % of Population
Alcona	1,667	11,556	14.4
Alger	1,474	9,438	15.6
Allegan	17,533	112,975	15.5
Alpena	6,298	29,520	21.3
Antrim	4,124	24,109	17.1
Arenac	3,533	16,361	21.6
Baraga	1,540	8,528	18.1
Barry	8,167	58,890	13.9
Bay	18,816	107,495	17.5
Benzie	2,888	17,396	16.6
Berrien	31,436	159,481	19.7
Branch	8,873	45,726	19.4
Calhoun	30,384	135,861	22.4
Cass	9,722	50,185	19.4
Charlevoix	3,644	25,936	14.0
Cheboygan	5,514	26,354	20.9
Chippewa	6,093	38,971	15.6
Clare	7,609	30,312	25.1
Clinton	6,607	69,726	9.5
Crawford	2,796	14,463	19.3
Delta	6,846	37,179	18.4
Dickinson	4,450	26,812	16.6
Eaton	12,573	106,781	11.8
Emmet	5,652	33,535	16.9
Genesee	96,503	428,790	22.5
Gladwin	5,289	25,920	20.4
Gogebic	3,124	16,043	19.5
Grand Traverse	13,233	86,071	15.4
Gratiot	7,940	42,245	18.8
Hillsdale	8,522	46,212	18.4
Houghton	5,827	35,174	16.6
Huron	5,942	32,805	18.1
Ingham	45,238	277,528	16.3
Ionia	10,163	63,833	15.9
Iosco	5,638	25,932	21.7
Iron	2,428	12,001	20.2
Isabella	9,593	66,778	14.4
Jackson	27,894	160,180	17.4
Kalamazoo	39,657	245,912	16.1
Kalkaska	3,915	17,066	22.9
Kent	104,959	605,213	17.3
Keweenaw	307	2,202	13.9

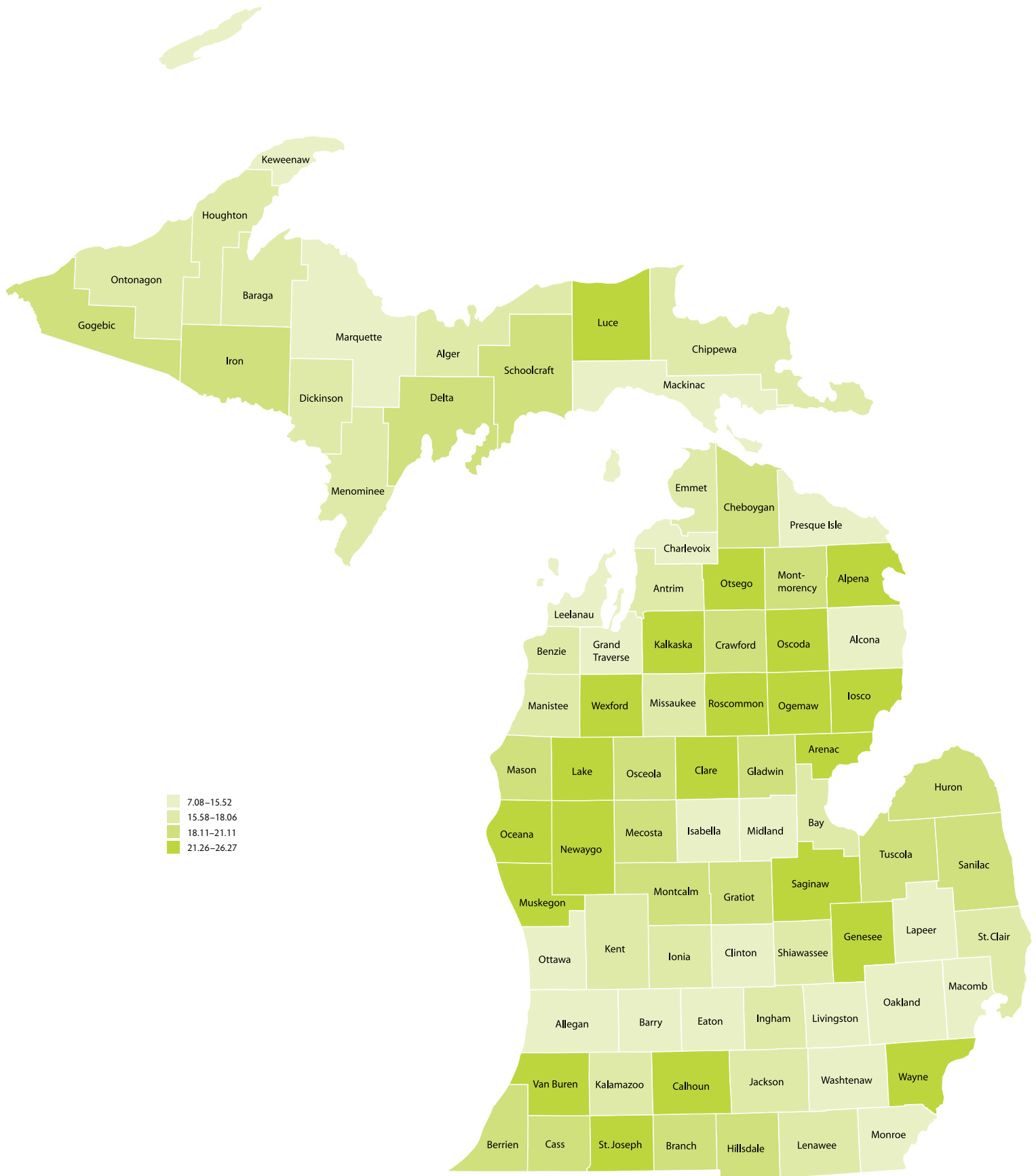
County	Medicaid Recipients (monthly average)	Population ⁴⁷	Medicaid Recipients as a % of Population
Lake	2,947	11,014	26.8
Lapeer	12,203	90,875	13.4
Leelanau	1,579	21,783	7.2
Lenawee	15,704	100,801	15.6
Livingston	12,935	182,575	7.1
Luce	1,440	6,614	21.8
Mackinac	1,578	10,624	14.9
Macomb	107,994	830,663	13.0
Manistee	4,286	24,640	17.4
Marquette	9,049	65,492	13.8
Mason	5,797	28,782	20.1
Mecosta	8,369	41,562	20.1
Menominee	3,909	24,202	16.2
Midland	11,635	82,605	14.1
Missaukee	2,536	15,001	16.9
Monroe	19,133	152,949	12.5
Montcalm	12,532	62,971	19.9
Montmorency	2,182	10,335	21.1
Muskegon	40,932	174,344	23.5
Newaygo	10,397	48,897	21.3
Oakland	114,488	1,202,174	9.5
Oceana	7,241	27,598	26.2
Ogemaw	5,280	21,016	25.1
Ontonagon	1,199	6,819	17.6
Osceola	4,697	22,930	20.5
Oscoda	1,995	8,836	22.6
Otsego	5,083	23,808	21.3
Ottawa	27,772	260,364	10.7
Presque Isle	2,030	13,650	14.9
Roscommon	5,538	25,042	22.1
Saginaw	43,466	200,745	21.7
Sanilac	8,933	43,024	20.8
Schoolcraft	1,714	8,220	20.9
Shiawassee	12,744	70,880	18.0
St Clair	28,397	168,894	16.8
St Joseph	13,710	62,232	22.0
Tuscola	10,476	56,187	18.6
Van Buren	17,077	77,801	21.9
Washtenaw	33,486	347,376	9.6
Wayne	462,415	1,949,929	23.7
Wexford	8,107	31,673	25.6
Michigan Total	1,708,157	10,003,422	17.1

Source (Medicaid recipients): Michigan Department of Human Services

Source (Population): U.S. Census Bureau

⁴⁷ The population data for counties and Michigan are 2008 estimates.

Medicaid Recipients as a Percentage of County Population in Michigan, Fiscal Year 2009





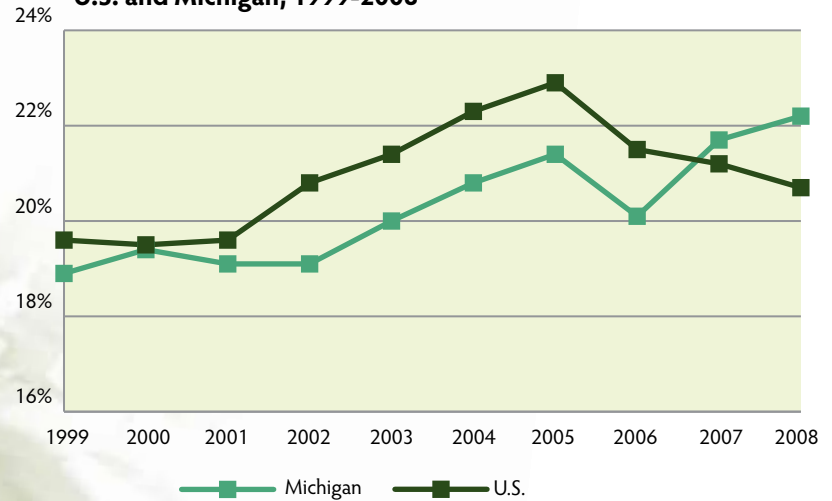
MEDICAID ENROLLMENT AND SPENDING

Medicaid Expenditures as a Percent of Total State Expenditures, U.S. and Michigan, 1999-2008

In 2008, U.S. average Medicaid expenditures (state funds and federal funds combined) on Medicaid represented 20.7 percent of total state expenditures. In 2008, Medicaid expenditures in Michigan represented 22.2 percent of total state expenditures, higher than the 2007 figure of 21.7 percent and considerably higher than the 1999 figure of 18.9 percent.

FIGURE CM:41

Medicaid Expenditures as a Percent of Total State Expenditures, U.S. and Michigan, 1999-2008



% of Total Expenditures

Fiscal Year	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008
U.S. ⁴⁸	19.6	19.5	19.6	20.8	21.4	22.3	22.9	21.5	21.2	20.7
Michigan	18.9	19.4	19.1	19.1	20.0	20.8	21.4	20.1	21.7	22.2

Source: National Association of State Budget Officers

⁴⁸ The U.S. percentages represent an aggregate total for all states. The U.S. line is Medicaid expenditures as a percent of mean state expenditures.

State Comparisons: Medicaid Expenditures as a Percent of Total State Expenditures, FY 2008

In fiscal year 2008, Michigan ranked 16th highest among the 50 states and District of Columbia on percentage of state expenditures devoted to Medicaid, compared with 27th highest in 2007.

FIGURE CM:42

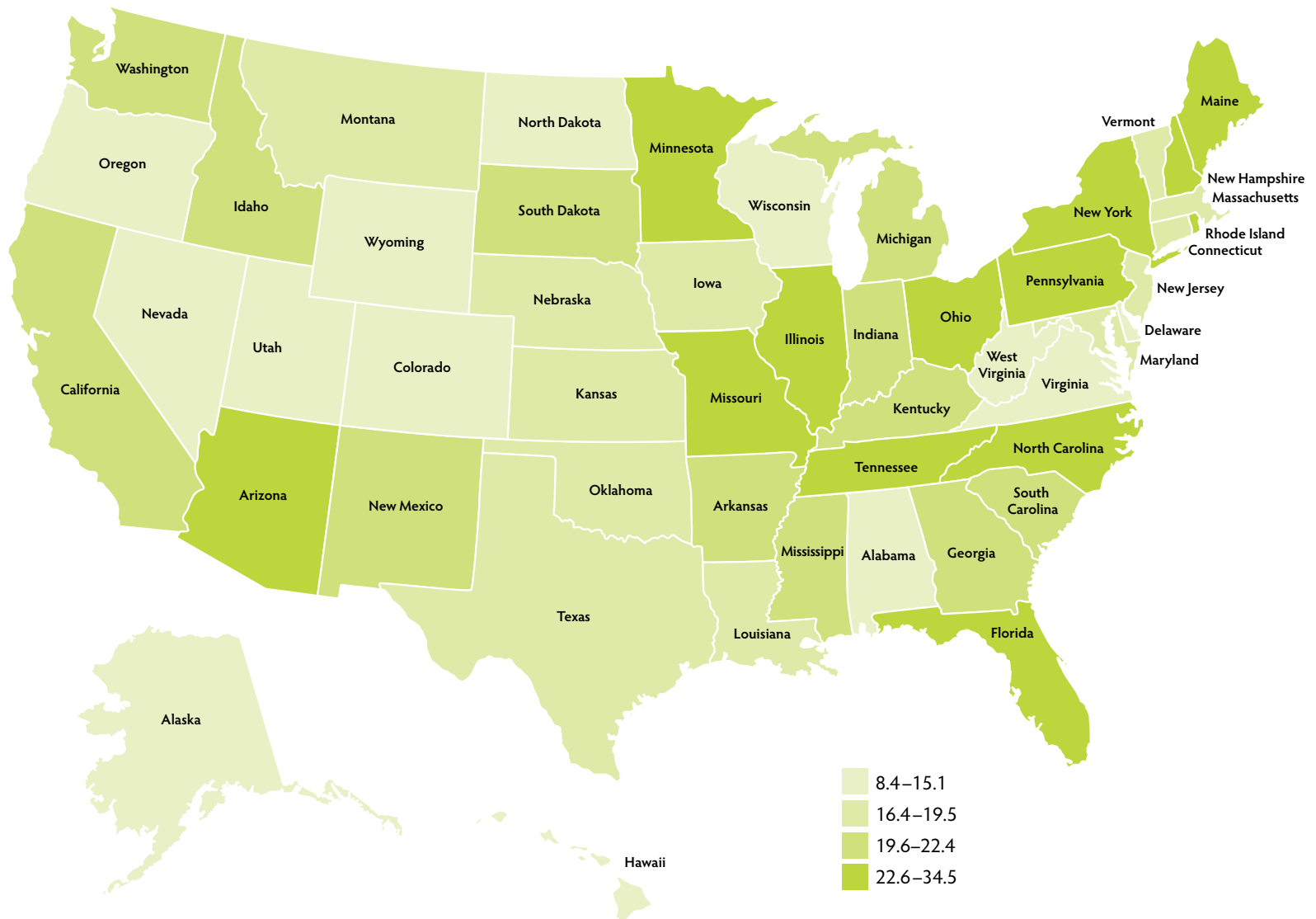
State Comparisons: Medicaid Expenditures as a Percent of Total State Expenditures Fiscal Year 2008

Ranking 1 = high, 50 = low

2008 Rank	2007 Rank	State	% of State Expenditures
1	1	Missouri	34.5
2	3	Pennsylvania	30.3
3	6	Illinois	29.5
4	4	Tennessee	28.5
5	2	Maine	28.2
6	5	New York	26.7
7	8	North Carolina	26.4
8	10	New Hampshire	26.0
9	12	Rhode Island	25.9
10	13	Florida	23.2
10	8	Ohio	23.2
12	11	Arizona	22.8
13	20	Minnesota	22.6
14	14	Mississippi	22.4
15	20	South Dakota	22.3
16	27	Michigan	22.2
17	15	Idaho	21.9
18	18	Indiana	21.7
19	23	Kentucky	21.3
20	18	South Carolina	21.1
21	20	New Mexico	20.8
22	25	Arkansas	20.3
23	33	California	19.7
24	26	Georgia	19.6
24	15	Washington	19.6
26	24	New Jersey	19.5
27	17	Louisiana	19.3
28	28	Maryland	18.9
28	33	Vermont	18.9
30	29	Kansas	18.7
30	35	Massachusetts	18.7
32	30	Oklahoma	18.6
33	32	Iowa	17.9
34	31	Nebraska	17.7
35	36	Connecticut	17.4
36	40	Montana	16.8
37	7	Texas	16.4
38	43	North Dakota	15.1
38	44	Virginia	15.1
40	42	Oregon	13.7
41	37	Utah	13.6
42	45	Wisconsin	13.5
43	41	Nevada	12.3
44	48	West Virginia	12.1
45	39	Delaware	11.5
46	49	Hawaii	11.2
47	37	Colorado	11.1
48	46	Alabama	11.0
49	50	Wyoming	10.2
50	47	Alaska	8.4
All States			20.7

Source: National Association of State Budget Officers

State Comparisons: Medicaid Expenditures as a Percent of Total State Expenditures, FY 2008



MEDICAID ENROLLMENT AND SPENDING

State Comparisons: Medicaid Spending Fiscal Year 2007

Reflecting the size of the total Medicaid population in Michigan, Michigan ranked 10th highest state on total federal and state Medicaid expenditures.

FIGURE CM:43

State Comparisons: Medicaid Spending Fiscal Year 2007

Ranking 1 = high, 51 = low

2007 Rank by Total Expenditures	2006 Rank by Total Expenditures	State	Federal share (thousands)	State share (thousands)	State share as a % of total	Total Expenditures (thousands)
1	1	New York	\$ 22,169,701	\$ 22,169,701	50.0	\$ 44,339,402
2	2	California	\$ 17,983,987	\$ 17,983,987	50.0	\$ 35,967,974
3	3	Texas	\$ 12,514,881	\$ 8,075,578	39.2	\$ 20,590,459
4	4	Pennsylvania	\$ 8,664,203	\$ 7,265,569	45.6	\$ 15,929,772
5	5	Florida	\$ 7,987,348	\$ 5,596,577	41.2	\$ 13,583,926
6	6	Ohio	\$ 7,788,933	\$ 5,266,603	40.3	\$ 13,055,537
7	7	Illinois	\$ 6,331,159	\$ 6,331,159	50.0	\$ 12,662,317
8	8	Massachusetts	\$ 5,147,513	\$ 5,147,513	50.0	\$ 10,295,027
9	9	North Carolina	\$ 6,340,036	\$ 3,489,477	35.5	\$ 9,829,512
10	11	Michigan	\$ 5,225,933	\$ 4,043,192	43.6	\$ 9,269,125
11	10	New Jersey	\$ 4,458,624	\$ 4,458,624	50.0	\$ 8,917,247
12	15	Tennessee	\$ 4,537,938	\$ 2,591,580	36.4	\$ 7,129,518
13	12	Georgia	\$ 4,345,506	\$ 2,663,374	38.0	\$ 7,008,880
14	14	Arizona	\$ 4,400,541	\$ 2,216,814	33.5	\$ 6,617,355
15	13	Missouri	\$ 4,061,076	\$ 2,531,580	38.4	\$ 6,592,656
16	17	Minnesota	\$ 3,095,792	\$ 3,095,792	50.0	\$ 6,191,585
17	18	Washington	\$ 2,902,327	\$ 2,888,429	49.9	\$ 5,790,756
18	19	Maryland	\$ 2,717,818	\$ 2,717,818	50.0	\$ 5,435,635
19	20	Louisiana	\$ 3,751,056	\$ 1,631,432	30.3	\$ 5,382,489
20	16	Indiana	\$ 3,205,253	\$ 1,914,960	37.4	\$ 5,120,213
21	21	Virginia	\$ 2,481,443	\$ 2,481,443	50.0	\$ 4,962,886
22	22	Wisconsin	\$ 2,837,378	\$ 2,099,768	42.5	\$ 4,937,146
23	23	Kentucky	\$ 3,195,572	\$ 1,397,087	30.4	\$ 4,592,658
24	24	Connecticut	\$ 2,175,549	\$ 2,175,549	50.0	\$ 4,351,098
25	25	South Carolina	\$ 2,895,640	\$ 1,268,352	30.5	\$ 4,163,992
26	26	Alabama	\$ 2,836,956	\$ 1,280,542	31.1	\$ 4,117,498
27	28	Oklahoma	\$ 2,298,649	\$ 1,074,772	31.9	\$ 3,373,421
28	27	Mississippi	\$ 2,494,036	\$ 792,347	24.1	\$ 3,286,383
29	30	Arkansas	\$ 2,273,259	\$ 823,824	26.6	\$ 3,097,083
30	31	Colorado	\$ 1,463,997	\$ 1,463,997	50.0	\$ 2,927,993
31	29	Oregon	\$ 1,767,735	\$ 1,126,869	38.9	\$ 2,894,604
32	33	New Mexico	\$ 1,894,797	\$ 739,426	28.1	\$ 2,634,223
33	32	Iowa	\$ 1,572,762	\$ 964,769	38.0	\$ 2,537,531
34	34	West Virginia	\$ 1,582,466	\$ 591,251	27.2	\$ 2,173,718
35	35	Kansas	\$ 1,287,632	\$ 849,516	39.7	\$ 2,137,148
36	36	Maine	\$ 1,259,988	\$ 731,458	36.7	\$ 1,991,446
37	37	Rhode Island	\$ 904,351	\$ 823,158	47.6	\$ 1,727,510
38	38	Nebraska	\$ 890,187	\$ 646,472	42.1	\$ 1,536,659
39	39	Utah	\$ 975,363	\$ 415,232	29.9	\$ 1,390,595
40	40	District of Columbia	\$ 971,278	\$ 416,262	30.0	\$ 1,387,540
41	41	Nevada	\$ 670,861	\$ 573,086	46.1	\$ 1,243,947
42	42	New Hampshire	\$ 582,614	\$ 582,614	50.0	\$ 1,165,228
43	43	Hawaii	\$ 632,387	\$ 465,507	42.4	\$ 1,097,894
44	44	Idaho	\$ 771,962	\$ 324,575	29.6	\$ 1,096,537
45	47	Delaware	\$ 495,459	\$ 495,459	50.0	\$ 990,917
46	45	Alaska	\$ 549,313	\$ 404,687	42.4	\$ 954,000
47	46	Vermont	\$ 532,923	\$ 371,409	41.1	\$ 904,332
48	48	Montana	\$ 506,315	\$ 226,307	30.9	\$ 732,621
49	49	South Dakota	\$ 389,922	\$ 229,789	37.1	\$ 619,711
50	50	North Dakota	\$ 328,780	\$ 179,224	35.3	\$ 508,004
51	51	Wyoming	\$ 229,226	\$ 204,011	47.1	\$ 433,237
		U.S.	\$ 181,378,423	\$ 138,298,523	43.3	\$ 319,676,946

Source: Urban Institute and Kaiser Commission on Medicaid and the Uninsured

CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

Children Enrolled in CHIP, U.S. and Michigan, 2002-2008

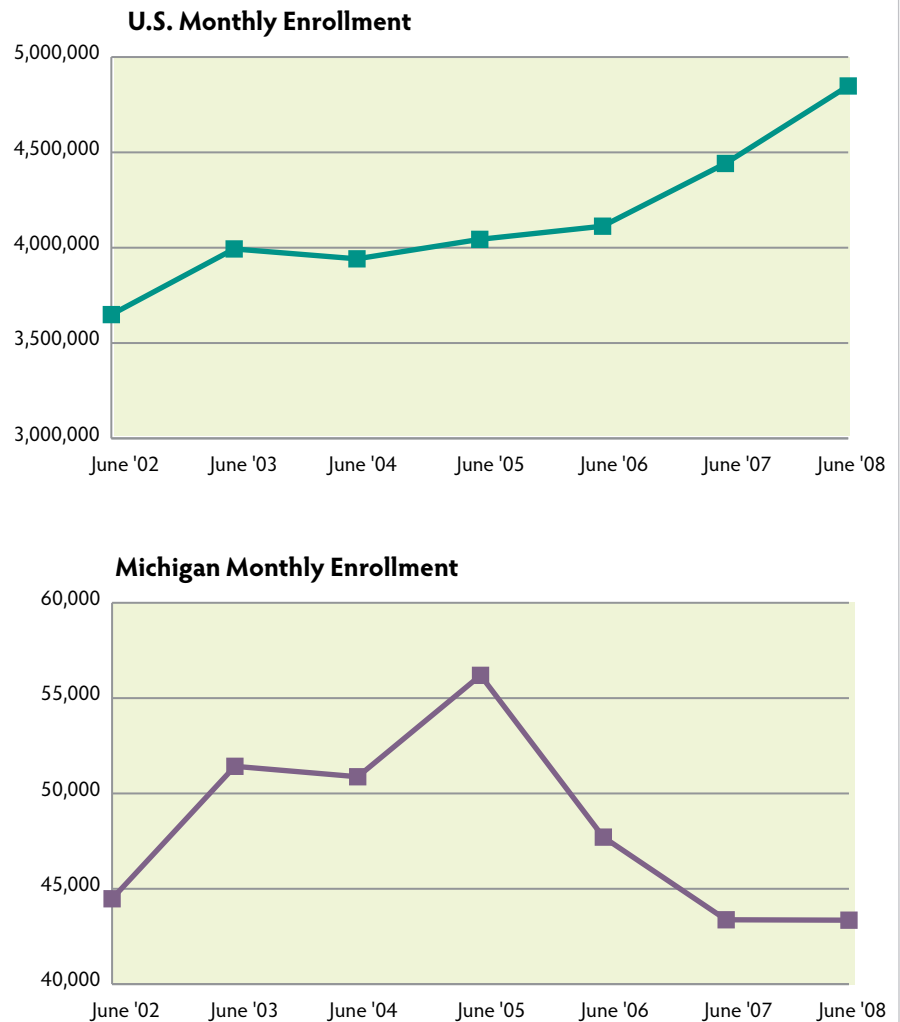
Nationally, as of June 2008, there were nearly five million children covered by the CHIP program.

In Michigan, during the same time period, 43,000 children were covered by MICHild, the state's CHIP program. It is estimated that an additional 10,000 children were eligible for the MICHild program but not enrolled.⁴⁹

CHIP enrollment from year to year has varied based on changes in program focus and outreach funding as well as other factors (e.g., changes in citizenship documentation requirements in 2006, approaches to counting of teens).

After a decline from its peak enrollment of over 56,000 children in 2005, MICHild enrollment remained steady from 2007 to 2008 with just over 43,300 children enrolled both years.

FIGURE CM:44
Children Enrolled in CHIP, U.S. and Michigan, 2002-2008⁵⁰



⁴⁹ These estimates are provided by Health Management Associates, based on Kaiser State Health facts insurance data.

⁵⁰ In Michigan CHIP has two components. The program includes a Medicaid-expansion CHIP component of Healthy Kids and the separate program, MICHild. MICHild enrollees are about 70 percent of all children enrolled in CHIP in Michigan.

Monthly Enrollment								
	Program Type	June '02	June '03	June '04	June '05	June '06	June '07	June '08
U.S.	All CHIP Children	3,649,131	3,993,508	3,941,608	4,043,863	4,112,845	4,441,796	4,848,221
Michigan	All CHIP Children	44,477	51,424	50,876	56,195	47,710	43,375	43,354

% Change								
	Program Type	June 02 - June 03	June 03 - June 04	June 04 - June 05	June 05 - June 06	June 06 - June 07	June 07 - June 08	
U.S.	All CHIP Children	9.4	-1.3	2.6	1.7	8.0	9.2	
Michigan	All CHIP Children	15.6	-1.1	10.5	-15.1	-9.1	0.0	

Source: Health Management Associates



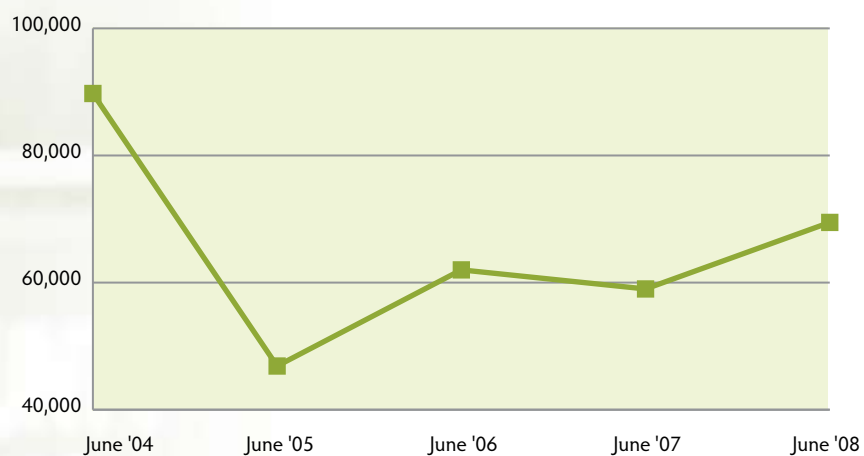
CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

Adults Enrolled in CHIP, Michigan, 2004-2008

In Michigan, as of June 2008, there were nearly 70,000 adults covered by the CHIP program. Michigan and three other states used unspent CHIP funds to cover eligible adults under a waiver program that permits the use of the funds for this purpose. In Michigan, childless adults are eligible for the Adult Benefit Waiver program if they have incomes at or below 35 percent of the federal poverty level. Federal funding for this program ends at the close of fiscal year 2010.

FIGURE CM:45

Adults enrolled under CHIP, Michigan, 2004-2008



Monthly Enrollment					
Program Type	June '04	June '05	June '06	June '07	June '08
Michigan Adults under CHIP	89,753	46,874	62,000	59,000	69,469

% Change				
Program Type	June 04 - June 05	June 05 - June 06	June 06 - June 07	June 07 - June 08
Michigan Adults under CHIP	-47.8	32.3	-4.8	17.7

Source: Health Management Associates

State Comparisons: Children Enrolled in CHIP, June 2008

In 2008, Michigan ranked 28th among the 50 states and District of Columbia on the number of children enrolled in CHIP. The number of children enrolled in Michigan's CHIP program was essentially unchanged between 2007 and 2008.

FIGURE CM:46

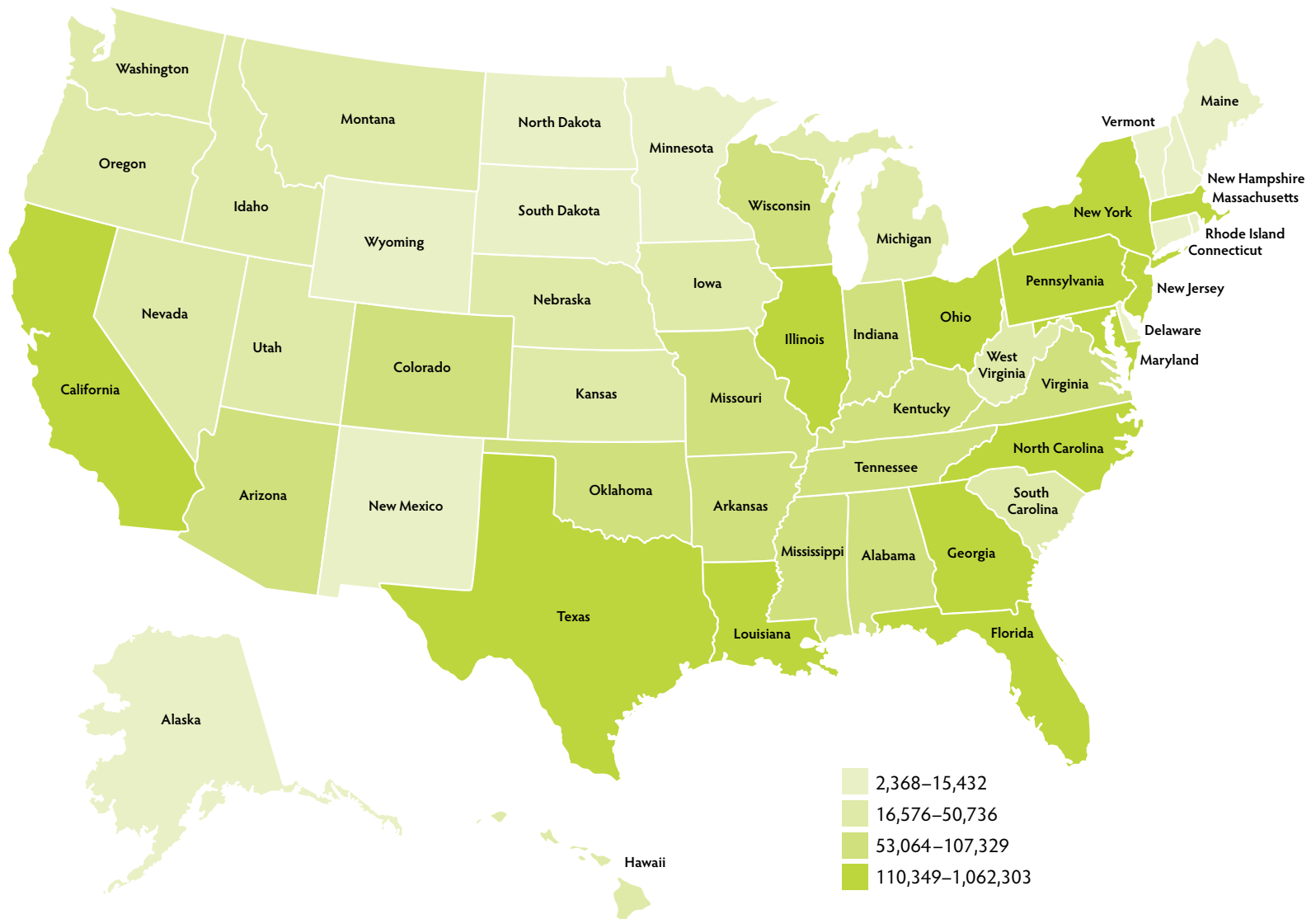
State Comparisons: Children Enrolled in CHIP, June 2008⁵¹ Ranking 1 = high, 51 = low

2008 Rank	2007 Rank	State	June 2008 Enrollment	June 2007 Enrollment	% Change
1	1	California	1,062,303	986,311	7.7
2	3	Texas	504,959	326,635	54.6
3	2	New York	365,311	394,164	-7.3
4	5	Florida	231,226	224,575	3.0
5	4	Georgia	225,497	276,551	-18.5
6	6	Illinois	186,107	175,145	6.3
7	7	Pennsylvania	172,662	161,166	7.1
8	8	North Carolina	164,755	152,954	7.7
9	9	Ohio	145,049	140,547	3.2
10	11	Louisiana	124,310	107,828	15.3
11	10	New Jersey	121,581	125,494	-3.1
12	12	Maryland	110,877	104,870	5.7
13	13	Massachusetts	110,349	92,506	19.3
14	14	Virginia	107,329	82,731	29.7
15	16	Indiana	71,253	68,394	4.2
16	17	Alabama	71,251	67,715	5.2
17	30	Wisconsin	69,802	31,368	122.5
18	15	Arkansas	67,832	69,349	-2.2
19	19	Arizona	65,837	64,453	2.1
20	21	Mississippi	64,978	60,122	8.1
21	18	Oklahoma	62,955	66,570	-5.4
22	23	Colorado	60,166	51,939	15.8
23	20	Missouri	58,923	61,936	-4.9
24	22	Kentucky	53,555	52,536	1.9
25	29	Tennessee	53,064	31,619	67.8
26	25	Oregon	50,736	39,586	28.2
27	26	South Carolina	45,332	36,001	25.9
28	24	Michigan	43,354	43,375	0.0
29	27	Kansas	38,047	35,374	7.6
30	32	Utah	35,248	25,095	40.5
31	28	Iowa	34,580	33,412	3.5
32	31	Nevada	26,832	29,899	-10.3
33	35	Idaho	26,811	19,352	38.5
34	34	Nebraska	25,397	24,491	3.7
35	33	West Virginia	24,418	24,939	-2.1
36	36	Washington	20,953	18,975	10.4
37	37	Hawaii	18,787	17,226	9.1
38	40	Montana	16,576	13,289	24.7
39	38	Connecticut	15,432	17,200	-10.3
40	39	Maine	13,839	13,346	3.7
41	41	Rhode Island	12,348	12,612	-2.1
42	42	South Dakota	11,531	11,136	3.5
43	43	New Mexico	9,706	8,072	20.2
44	44	Alaska	8,743	7,793	12.2
45	45	New Hampshire	8,009	7,415	8.0
46	47	District of Columbia	6,720	5,146	30.6
47	46	Wyoming	6,039	5,684	6.2
48	49	North Dakota	5,785	4,553	27.1
49	48	Delaware	5,484	5,069	8.2
50	50	Vermont	3,215	2,820	14.0
51	51	Minnesota	2,368	2,458	-3.7
		U.S.	4,848,221	4,441,796	9.2

Source: Health Management Associates

⁵¹ For Michigan, this includes both MIChild and the Medicaid expansion Healthy Kids component. This table represents all children enrolled under CHIP.

State Comparisons: Children Enrolled in CHIP, June 2008



CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

State Comparisons: CHIP Spending, Fiscal Year 2008

Despite ranking 28th among the 50 states and District of Columbia in enrollment, Michigan ranked 12th in total expenditures for its CHIP program (MICHild). As previously noted, Michigan is one of four states that uses unspent CHIP funds to covered eligible adults. In Michigan in 2008 the number of adults covered by CHIP exceeded the number of children covered by CHIP.

⁵² Total expenditures in Michigan include the Healthy Kids component and ABW program dollars.

⁵³ Washington qualifies under Public Law 108-74, which allows the state to elect to receive a portion of their SCHIP allotments as increased federal matching for certain Medicaid expenditures. The total state share is buried within the Medicaid expenditures and cannot be determined.

FIGURE CM:47

State Comparisons: CHIP Spending, Fiscal Year 2008⁵² Ranking 1 = high, 51 = low

2008 Rank by Total Expenditures	2007 Rank by Total Expenditures	State	Federal Share	State Share	State share as a % of total	Total Expenditures
1	1	California	\$ 1,259,347,793	\$ 707,181,369	36	\$ 1,966,529,162
2	3	Texas	\$ 697,962,599	\$ 266,228,092	28	\$ 964,190,691
3	4	New York	\$ 326,890,431	\$ 176,017,929	35	\$ 502,908,360
4	6	New Jersey	\$ 323,057,000	\$ 173,953,756	35	\$ 497,010,756
5	2	Illinois	\$ 292,862,843	\$ 158,301,992	35	\$ 451,164,835
6	8	Massachusetts	\$ 259,309,763	\$ 141,501,797	35	\$ 400,811,560
7	7	Florida	\$ 272,305,390	\$ 117,742,863	30	\$ 390,048,253
8	12	North Carolina	\$ 237,723,151	\$ 89,831,341	27	\$ 327,554,492
9	10	Ohio	\$ 227,466,032	\$ 86,095,754	27	\$ 313,561,786
10	5	Georgia	\$ 224,990,230	\$ 77,965,510	26	\$ 302,955,740
11	9	Pennsylvania	\$ 204,468,133	\$ 96,840,641	32	\$ 301,308,774
12	11	Michigan	\$ 172,932,643	\$ 71,896,346	29	\$ 244,828,989
13	13	Maryland	\$ 156,230,248	\$ 84,123,981	35	\$ 240,354,229
14	14	Virginia	\$ 131,264,569	\$ 70,683,127	35	\$ 201,947,696
15	16	Louisiana	\$ 159,214,074	\$ 38,003,902	19	\$ 197,217,976
16	17	Mississippi	\$ 142,912,495	\$ 28,445,415	17	\$ 171,357,910
17	15	Arizona	\$ 119,364,458	\$ 36,997,776	24	\$ 156,362,234
18	31	New Mexico	\$ 124,318,151	\$ 28,176,022	18	\$ 152,494,173
19	20	Alabama	\$ 108,802,989	\$ 31,896,591	23	\$ 140,699,580
20	27	Arkansas	\$ 113,217,801	\$ 26,264,357	19	\$ 139,482,158
21	18	Indiana	\$ 102,383,574	\$ 36,196,460	26	\$ 138,580,034
22	19	Oklahoma	\$ 99,351,936	\$ 29,726,855	23	\$ 129,078,791
23	24	Colorado	\$ 82,481,275	\$ 44,412,995	35	\$ 126,894,270
24	23	Kentucky	\$ 90,295,307	\$ 24,219,377	21	\$ 114,514,684
25	25	Minnesota	\$ 71,388,962	\$ 38,440,201	35	\$ 109,829,163
26	22	Missouri	\$ 79,645,045	\$ 28,435,963	26	\$ 108,081,008
27	21	Wisconsin	\$ 75,282,751	\$ 31,761,695	30	\$ 107,044,446
28	50	Tennessee	\$ 77,517,851	\$ 26,393,477	25	\$ 103,911,328
29	26	Oregon	\$ 66,339,195	\$ 25,037,124	27	\$ 91,376,319
30	28	Rhode Island	\$ 59,115,228	\$ 29,438,573	33	\$ 88,553,801
31	29	Iowa	\$ 55,307,598	\$ 20,240,609	27	\$ 75,548,207
32	37	South Carolina	\$ 57,786,536	\$ 15,501,237	21	\$ 73,287,773
33	30	Kansas	\$ 47,850,684	\$ 18,978,403	28	\$ 66,829,087
34	32	Utah	\$ 50,253,013	\$ 12,454,091	20	\$ 62,707,104
35	33	Nebraska	\$ 35,562,811	\$ 14,802,308	29	\$ 50,365,119
36	36	Maine	\$ 33,391,598	\$ 11,538,854	26	\$ 44,930,452
37	35	West Virginia	\$ 36,785,678	\$ 8,086,123	18	\$ 44,871,801
38	40	Idaho	\$ 35,351,472	\$ 9,448,268	21	\$ 44,799,740
39	38	Washington ⁵³	\$ 43,367,730	\$ (103,727)	0	\$ 43,264,003
40	34	Nevada	\$ 28,766,219	\$ 14,264,441	33	\$ 43,030,660
41	39	Connecticut	\$ 26,290,673	\$ 6,706,947	20	\$ 32,997,620
42	42	Montana	\$ 24,945,517	\$ 7,048,804	22	\$ 31,994,321
43	41	Hawaii	\$ 17,603,151	\$ 7,706,931	30	\$ 25,310,082
44	46	South Dakota	\$ 15,628,267	\$ 6,026,231	28	\$ 21,654,498
45	43	Alaska	\$ 14,387,020	\$ 7,224,443	33	\$ 21,611,463
46	44	North Dakota	\$ 13,452,611	\$ 4,575,634	25	\$ 18,028,245
47	47	Delaware	\$ 9,664,288	\$ 5,203,843	35	\$ 14,868,131
48	45	New Hampshire	\$ 11,248,518	\$ 2,215,607	16	\$ 13,464,125
49	48	Wyoming	\$ 8,740,819	\$ 4,706,594	35	\$ 13,447,413
50	49	District of Columbia	\$ 10,138,224	\$ 2,694,970	21	\$ 12,833,194
51	51	Vermont	\$ 5,660,421	\$ 695,488	11	\$ 6,355,909
		U.S.	\$ 7,008,011,446	\$ 3,038,512,514	30	\$ 10,046,523,960

Source: The Centers for Medicare and Medicaid Services (CMS) as reported to Kaiser State Health Facts

Methodology—Publicly Insured

Most of the data in this chapter are from the State Health Access Data Assistance Center (SHADAC). SHADAC uses the U.S. Census Bureau's Current Population Survey Annual Social and Economic Supplement (CPS) estimates of health insurance to compile health insurance coverage data for all states, available through a web-based table-generator tool.

This report uses SHADAC-enhanced CPS health insurance estimates to report the number and percent of the population publicly insured (which include Medicare, Medicaid, military, CHIP, and state-specific public programs). These estimates are CPS data, reweighted and adjusted by SHADAC to account for historical changes in the survey's methodology and provide more accurate coverage estimates over time. Due to adjustments to the CPS data, the publicly insured estimates in this report do not correspond completely to estimates published by the Census Bureau and generally result in lower uninsured estimates. For more information on SHADAC and its data center, visit: <http://www.shadac.org/datacenter>.

Standard error and confidence intervals were used to determine statistical significance in this report. Statistical significance was calculated at 95 percent confidence to determine statistical differences in the data.

Percent of the Population Publicly Insured uses single-year data for U.S. rates and two-year pooled data for Michigan rates. Standard errors for estimates of the publicly insured were too large to provide accurate single-year estimates of insurance coverage for Michigan. Pooling multiple years of CPS data provides more precise estimates of uninsured by state given small sample sizes.

The Demographic Profile of the Publicly Insured in Michigan uses two-year pooled data for estimates of the publicly insured by age, family poverty level, education, and work status (due to small sample sizes). For race, sample sizes were even smaller than for other demographic characteristics; therefore those estimates use three-year pooled data.

In the demographic data for the publicly insured, the "total publicly insured" includes both "total among respondents" (reflecting subtotals for those who responded to the demographic and the coverage questions) and "all population total" (reflecting subtotals for those who did not respond to the demographic or coverage questions and are thus the same for all demographic breakouts that use the same number of years of pooled data).

State Comparisons use publicly insured rates to rank all fifty states and the District of Columbia. These rankings are meant to compare a state's publicly insured percentage relative to other states and do not always represent statistically significant differences in the percent privately insured. All state-level estimates of the publicly insured by age are calculated using two-year pooled data (due to small sample sizes) while U.S. publicly insured estimates by age reflect single-year data.

Medicaid enrollment data are from the Urban Institute and Kaiser Commission on Medicaid and the Uninsured, based on the Centers for Medicare and Medicaid Services' Medicaid Statistical Information System reports (2009). These data have been adjusted to account for states where some individuals were incorrectly categorized. The most common adjustment made by the Urban Institute and Kaiser Commission on Medicaid and the Uninsured was to shift those who were categorized as disabled but were age 65 and older into the "aged" category. The next most common adjustment was to shift those who were under 65 years of age from the aged category into the disabled category.

Medicaid expenditure data are from the National Association for State Budget Officers (NASBO) State Expenditure Reports. States were asked to report Medicaid expenditures as (1) general funds appropriated to the Medicaid agency and any other agency for direct Medicaid matching purposes under Title XIX, (2) other state funds and revenue sources used as Medicaid match, and (3) federal matching funds provided according to Title XIX. In Michigan during fiscal year 2008, public health and community/institutional care for mentally and developmentally disabled persons are partially reflected in the Medicaid expenditures. For further information and access to the full State Expenditure Report, please visit: <http://nasbo.org/Publications/StateExpenditureReport/tabid/79/Default.aspx>.

Medicaid spending data by state and federal share (fiscal year 2007) are from the Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates based on data from Centers for Medicare and Medicaid Services-64 reports, March 2009. Among these data, Medicaid expenditures include benefit and disproportionate share hospital payments, but do not include administrative costs, accounting adjustments, or the U.S. Territories. When these additional costs are accounted for, total U.S. Medicaid spending was about \$331.8 billion in fiscal year 2007.

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Introduction

Michigan was the ninth highest state in percentage of employers offering private health insurance.

At 74 percent in 2007/2008, Michigan continued to have a higher rate of private coverage than the U.S. overall. Michigan ranked 13th highest on the percent of population with private coverage and ninth on percent of employers that offer private health coverage.

Businesses in Michigan and nationally have been dropping employee health benefits; the number of employers offering health benefits has dropped at a faster rate in Michigan than the U.S. overall.

In Michigan as in the country as a whole, businesses have been dropping coverage and individuals have been losing private coverage over the past several years. The percent of Michigan's population with private coverage has dropped 4.5 percent since 2003/2004, and the percentage of businesses offering health insurance has decreased by 11 percent since 2000. Michigan workers are increasingly employed by smaller employers, and smaller employers are less likely than large employers to offer health coverage. In 2008, in Michigan and nationally, just over one-third of businesses with fewer than ten employees offered health coverage compared to 99 percent of businesses with 1,000 employees or more. In Michigan, a significant number of firms with 25-99 employees stopped offering health coverage between 2006 and 2008: 90.4 percent offered coverage in 2006 but only 70.7 percent in 2008.

Private coverage was positively associated with higher income and education; whites and Asians were also more likely to have private coverage.

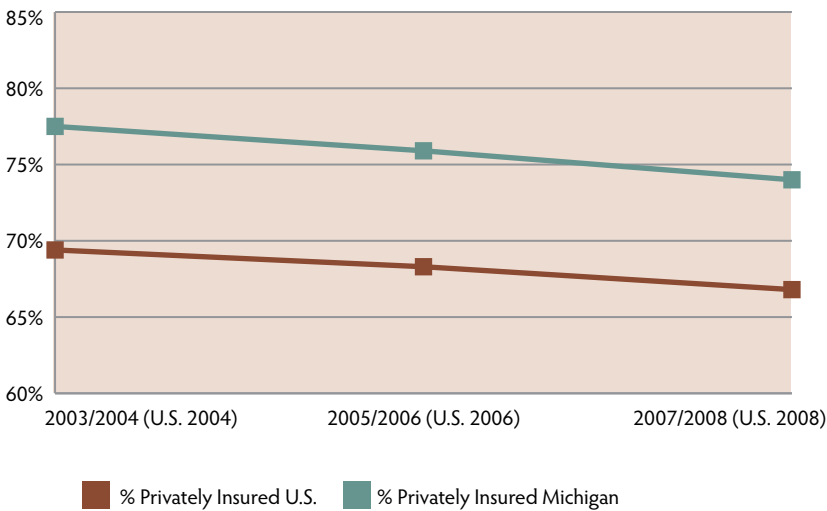
In 2007/2008, having private health coverage continued to be positively associated with having higher income. Of those with incomes over 400 percent of the federal poverty level, 93.2 percent had private coverage, compared to only 20.9 percent of those below the federal poverty level. More education was also associated with a greater degree of private health coverage. Only 37.3 percent of those living in families where the highest educational attainment was less than a high school diploma had private insurance, compared to 89.8 percent of those living in families with at least one college graduate. Race was also associated with health insurance status: In 2007/2008, 79.8 percent of whites and 87 percent of Asians had private coverage compared with 49.9 percent of African Americans and 47.8 percent of Hispanics.



Percent of Population Privately Insured, U.S. and Michigan

Michigan has long had a higher percentage of individuals with private health insurance coverage than does the country overall. This continued to be the case in 2007/2008, with 74 percent covered by private health insurance compared to 66.8 percent in the U.S. overall (2008). However, from 2003/2004 to 2007/2008, the percentage of those with private coverage has dropped significantly in both Michigan and the U.S.

FIGURE CM:48
Percent of Population Privately Insured, U.S. and Michigan, 2003/2004 to 2007/2008⁵⁴



	Number Privately Insured (thousands)		% Privately Insured	
	U.S.	Michigan	U.S.	Michigan
2003/2004 (U.S. 2004)	202,132	7,702	69.4	77.5
2005/2006 (U.S. 2006)	202,759	7,559	68.3	75.9
2007/2008 (U.S. 2008)	201,432	7,301	66.8	74.0

Source: CPS (SHADAC-enhanced)

⁵⁴ Privately insured as percent of total population was calculated using single-year data for U.S. rates and two-year pooled data for Michigan rates to ensure adequate sample size.

DEMOGRAPHIC PROFILE OF THE PRIVATELY INSURED IN MICHIGAN

Michigan's Privately Insured by Age, 2006/2008⁵⁵

Those in age groups 6-17, 25-34, and 35-44 experienced a significant drop in the average percentage of the age group covered by private insurance from 2003/2005 to 2006/2008, going from 77.8 to 73.8, 73.4 to 67.9, and 81.5 to 77.4, respectively.

FIGURE CM:49

Distribution of the Privately Insured by Age, Michigan, 2006/2008

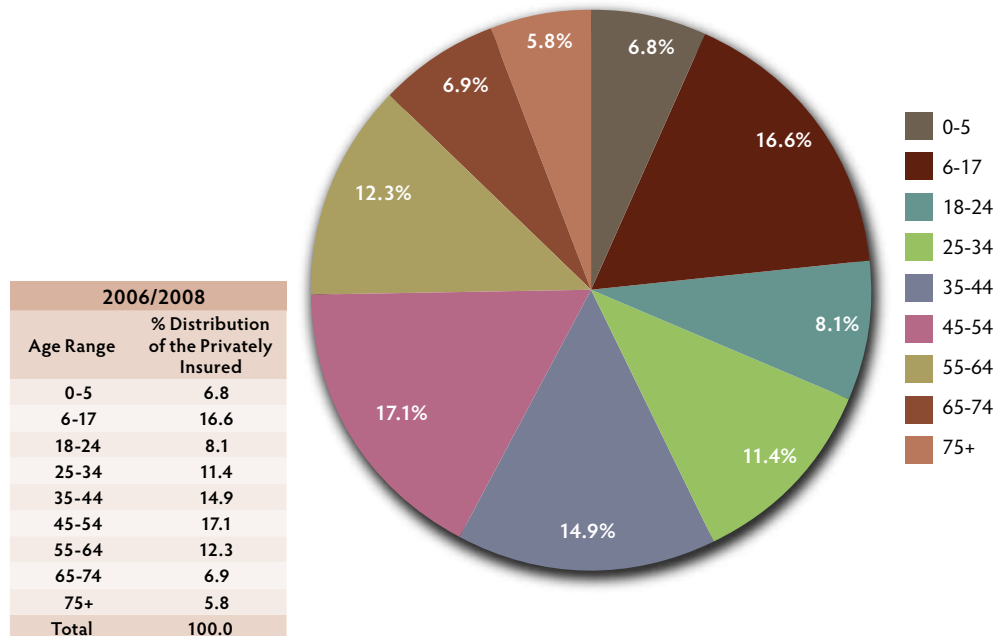
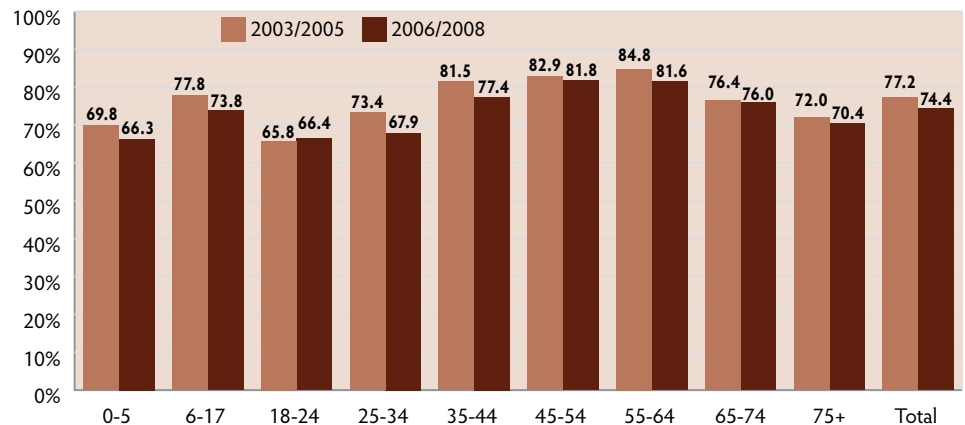


FIGURE CM:50

Privately Insured as a Percent of Total Population by Age, Michigan, 2003/2004 and 2006/2008



Age Range	2003/2005	2006/2008	
	% Privately Insured	% Privately Insured	Number of Privately Insured (in thousands)
0-5	69.8	66.3	498
6-17	77.8	73.8	1,226
18-24	65.8	66.4	594
25-34	73.4	67.9	840
35-44	81.5	77.4	1,100
45-54	82.9	81.8	1,262
55-64	84.8	81.6	909
65-74	76.4	76.0	510
75+	72.0	70.4	430
Total	77.2	74.4	7,368

Source: CPS (SHADAC-enhanced)

⁵⁵ Three years of pooled data are used to create these privately insured estimates because of small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of the privately insured by some demographic characteristics. See methodology for more information.

DEMOGRAPHIC PROFILE OF THE PRIVATELY INSURED IN MICHIGAN

Michigan's Privately Insured by Race, 2006/2008⁵⁶

Between 2003/2005 and 2006/2008, there was a statistically significant drop in the percentage of whites and Hispanics in Michigan with private health coverage, dropping from 82.1 to 79.8 percent and 63.2 to 47.8 percent, respectively.

FIGURE CM:51

Distribution of the Privately Insured by Race, Michigan, 2006/2008

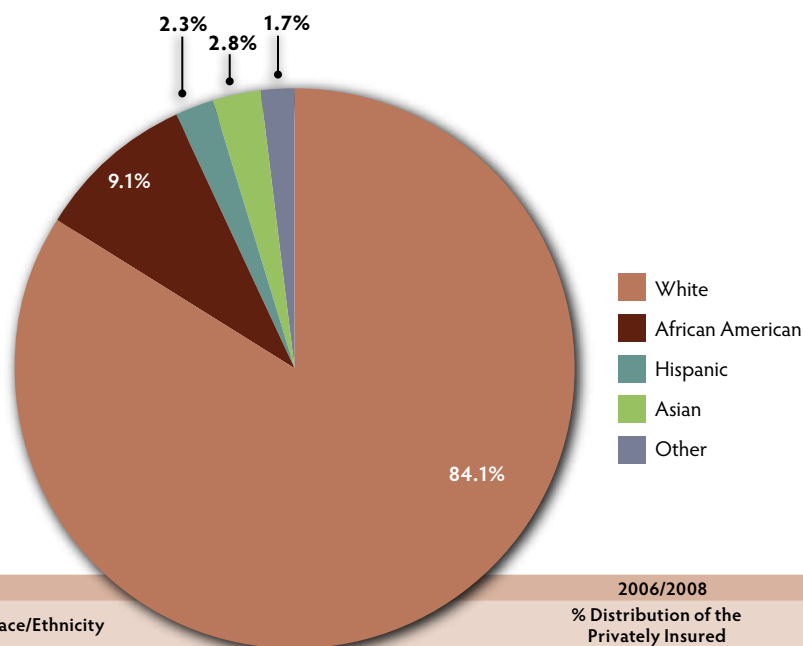
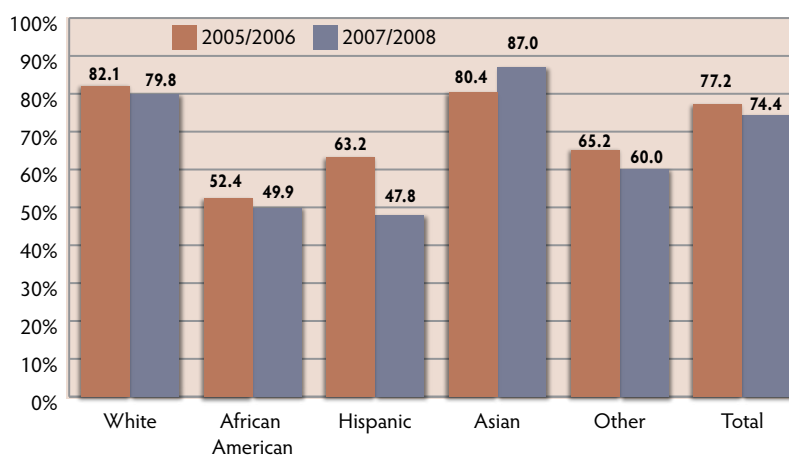


FIGURE CM:52

Privately Insured as a Percent of Total Population by Race, Michigan, 2003/2005 and 2006/2008



⁵⁶ Three years of pooled data are used to create these privately insured estimates because of small sample sizes. Pooling multiple years of Current Population Survey (CPS) data provides more precise estimates of the privately insured by some demographic characteristics. See methodology for more information.

Source: CPS (SHADAC-enhanced)

Michigan's Privately Insured by Income, 2007/2008

In Michigan in 2007/2008, only 15.4 percent of those with private health insurance had incomes below 200 percent of the federal poverty level.

Having private health coverage was directly correlated with income: only 20.9 percent of those below the federal poverty level had private health coverage compared to 93.2 percent of those who were at 400 percent or higher of the federal poverty level. There were no statistically significant changes in these rates from 2005/2006.

FIGURE CM:53

Distribution of Privately Insured by Federal Poverty Level, Michigan, 2007/2008

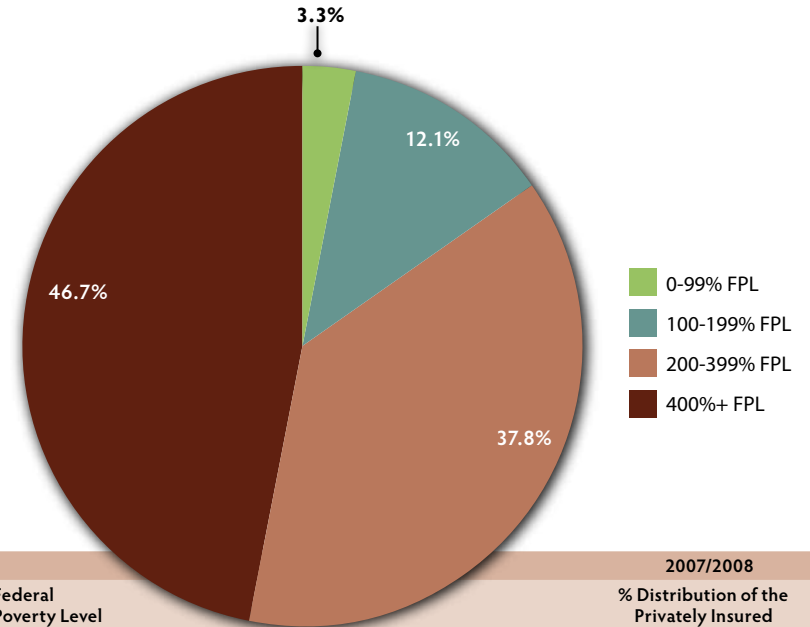
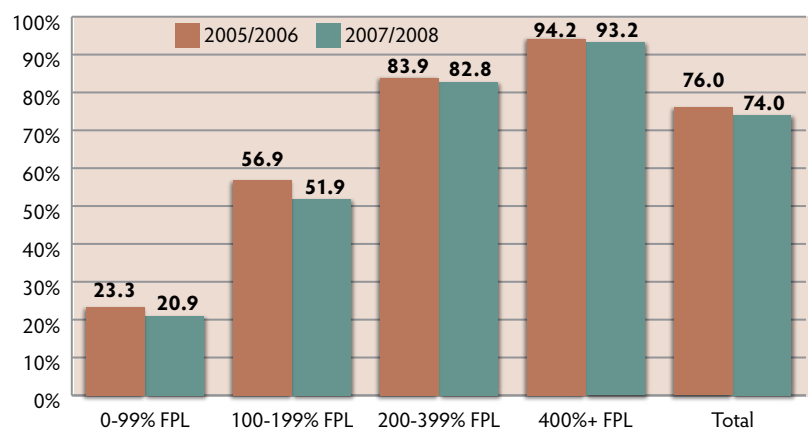


FIGURE CM:54

Privately Insured as a Percent of Total Population, by Federal Poverty Level, Michigan, 2005/2006 and 2007/2008



Federal Poverty Level	2005/2006	2007/2008	
	% Privately Insured	% Privately Insured	Number of Privately Insured (in thousands)
0-99% FPL	23.3	20.9	243
100-199% FPL	56.9	51.9	887
200-399% FPL	83.9	82.8	2,762
400%+ FPL	94.2	93.2	3,410
Total	76.0	74.0	7,301

Source: CPS (SHADAC-enhanced)

DEMOGRAPHIC PROFILE OF THE PRIVATELY INSURED IN MICHIGAN

Michigan's Privately Insured by Family Education Level, 2007/2008

Having private health coverage is also highly related to educational attainment. Only a little less than 22 percent of those with private health coverage lived in households where the highest educational attainment in the family was a high school diploma or less. Thirty-seven percent of those in families where the highest educational attainment was less than a high school diploma had private health insurance coverage, compared to 89.8 percent of those with a college degree or higher. There was no statistical change in these rates from 2005/2006.

FIGURE CM:55

Michigan's Privately Insured by Family Education Level, 2007/2008

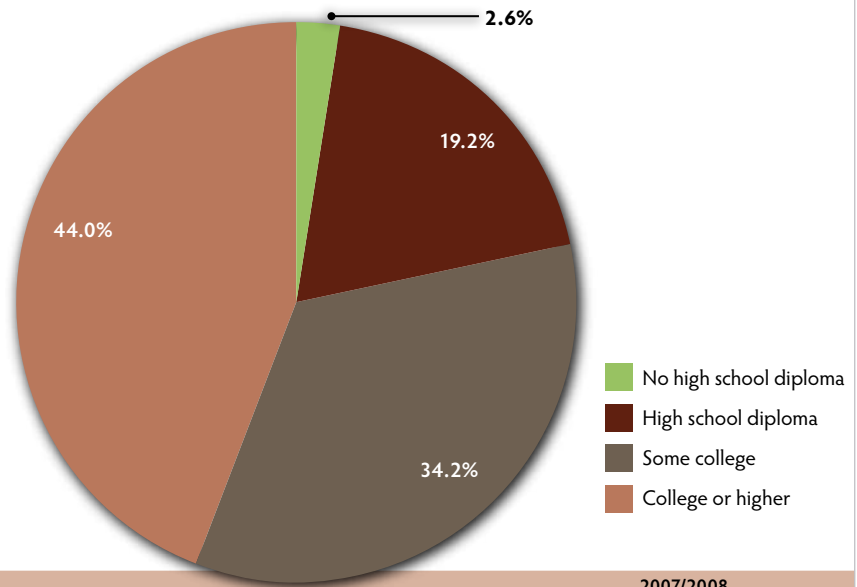
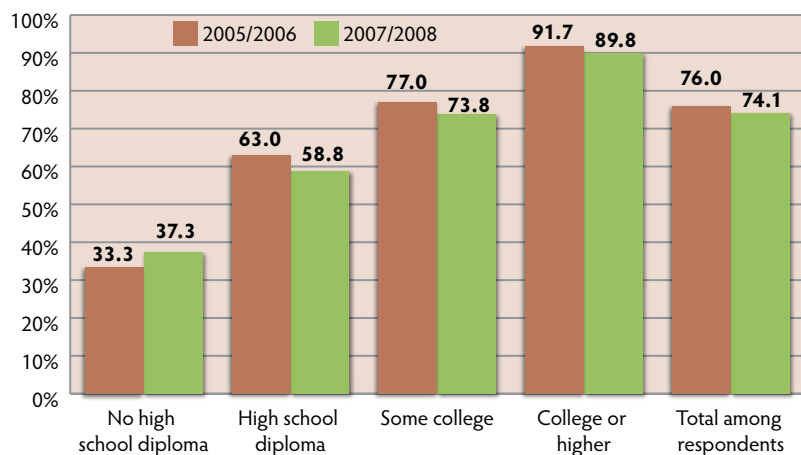


FIGURE CM:56

Privately Insured as a Percent of Total Population by Family Education Level, Michigan, 2005/2006 and 2007/2008



Education—Family	2005/2006	2007/2008	
	% Privately Insured	% Privately Insured	Number of Privately Insured (in thousands)
No high school diploma	33.3	37.3	190
High school diploma	63.0	58.8	1,403
Some college	77.0	73.8	2,492
College or higher	91.7	89.8	3,212
Total among respondents	76.0	74.1	7,297
All Population Total	75.9	74.0	7,301

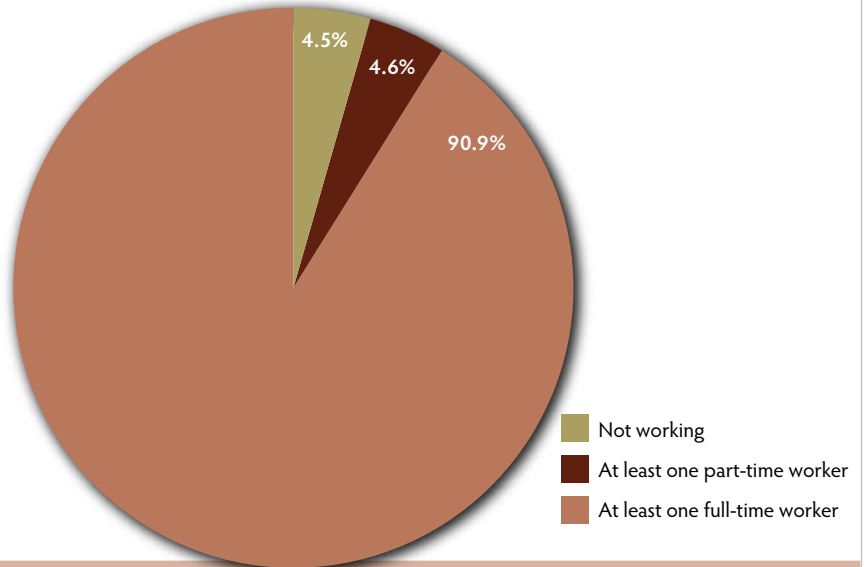
Source: CPS (SHADAC-enhanced)

Michigan's Privately Insured by Family Work Status, 2007/2008

In 2007/2008, 82.9 percent of those ages 18 to 64 lived in families where at least one full time worker had private health coverage, compared to 85 percent in 2005/2006, a statistically significant drop.

FIGURE CM:57

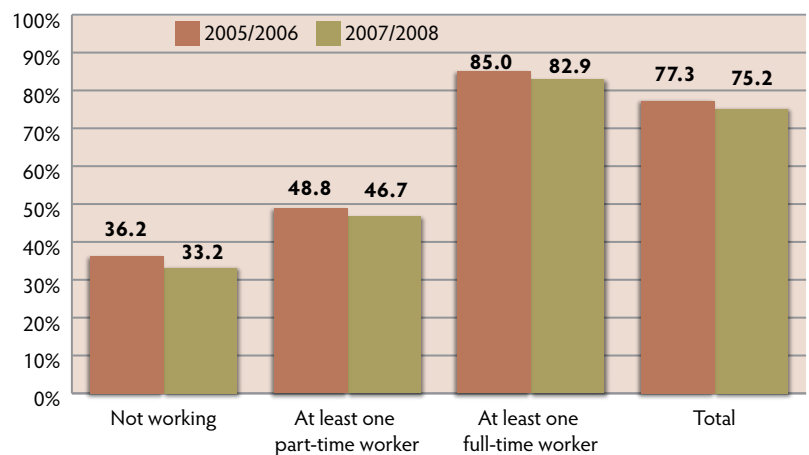
Distribution of the Privately Insured (Ages 18-64) by Family Work Status, Michigan, 2007/2008



Ages 18 to 64		2007/2008
Work Status	% Distribution of the Privately Insured	
Not working		4.5
At least one part-time worker		4.6
At least one full-time worker		90.9
Total		100.0

FIGURE CM:58

Privately Insured (Ages 18-64) as a Percent of Total Population (18-64) by Family Work Status, Michigan, 2005/2006 and 2007/2008



Ages 18 to 64		2005/2006		2007/2008	
Work Status		% Privately Insured		% Privately Insured	Number of Privately Insured (in thousands)
Not working		36.2		33.2	210
At least one part-time worker		48.8		46.7	215
At least one full-time worker		85.0		82.9	4,235
Total		77.3		75.2	4,660

Source: CPS (SHADAC-enhanced)

STATE COMPARISONS

Percent Privately Insured, All Ages, 2007/2008

In 2007/2008, Michigan ranked 13th highest among the 50 states and District of Columbia on the percent of population with any form of private coverage. This was not a statistically significant change from the 2005/2006 ranking.

FIGURE CM:59

State Comparisons: Percent Privately Insured, All Ages, 2007/2008

Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ⁵⁷	% Privately Insured
1	2	New Hampshire	79.1
2	1	Minnesota	78.9
3	3	Iowa	78.6
3	22	Utah*	78.6
5	6	North Dakota	78.2
6	4	Connecticut	76.6
7	5	Wisconsin	76.3
8	12	Massachusetts	76.1
9	7	Pennsylvania	75.3
10	8	Nebraska	75.1
11	13	Maryland	74.9
12	17	South Dakota	74.6
13	10	Michigan	74.0
13	11	New Jersey	74.0
15	13	Hawaii	73.2
16	18	Delaware	73.1
17	8	Kansas*	72.9
18	20	Illinois	72.2
19	15	Ohio	72.1
20	16	Indiana	72.0
20	18	Rhode Island	72.0
22	28	Idaho	71.7
23	26	Wyoming	71.6
24	27	Vermont	71.0
25	23	Washington	70.9
26	21	Virginia	70.6
27	24	Colorado	70.5
28	29	Oregon	69.8
29	25	Missouri	69.7
30	30	Maine	69.4
31	34	Alabama	68.9
31	31	Nevada	68.9
33	37	Dist. of Columbia	68.2
34	31	Montana	67.7
35	40	Georgia	65.8
36	42	West Virginia	65.6
37	34	New York*	65.2
38	39	South Carolina	65.1
39	31	Kentucky	64.8
40	36	North Carolina	64.1
41	45	Oklahoma	63.9
42	41	Alaska	63.2
43	44	California	62.5
44	43	Florida	62.0
45	38	Tennessee	61.9
46	48	Arizona	60.6
47	47	Louisiana	59.6
48	46	Arkansas	59.1
49	49	Texas*	56.7
50	50	Mississippi	55.4
51	51	New Mexico	54.8
		U.S. ⁵⁸	66.8

Source: CPS (SHADAC-enhanced)

⁵⁷ States with the asterisk (*) have a statistically significant change from the previous time period.

⁵⁸ U.S. privately insured data are single-year estimates representing 2008 only.

STATE COMPARISONS

Percent Privately Insured, Employer-Based Coverage, All Ages, 2007/2008

In 2007/2008, Michigan ranked ninth highest among the 50 states and District of Columbia on percent with employer-based coverage (all ages). The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:60

State Comparisons: Percent Privately Insured, Employer-Based Coverage Only, All Ages, 2007/2008 Ranking 1 = high, 51 = low

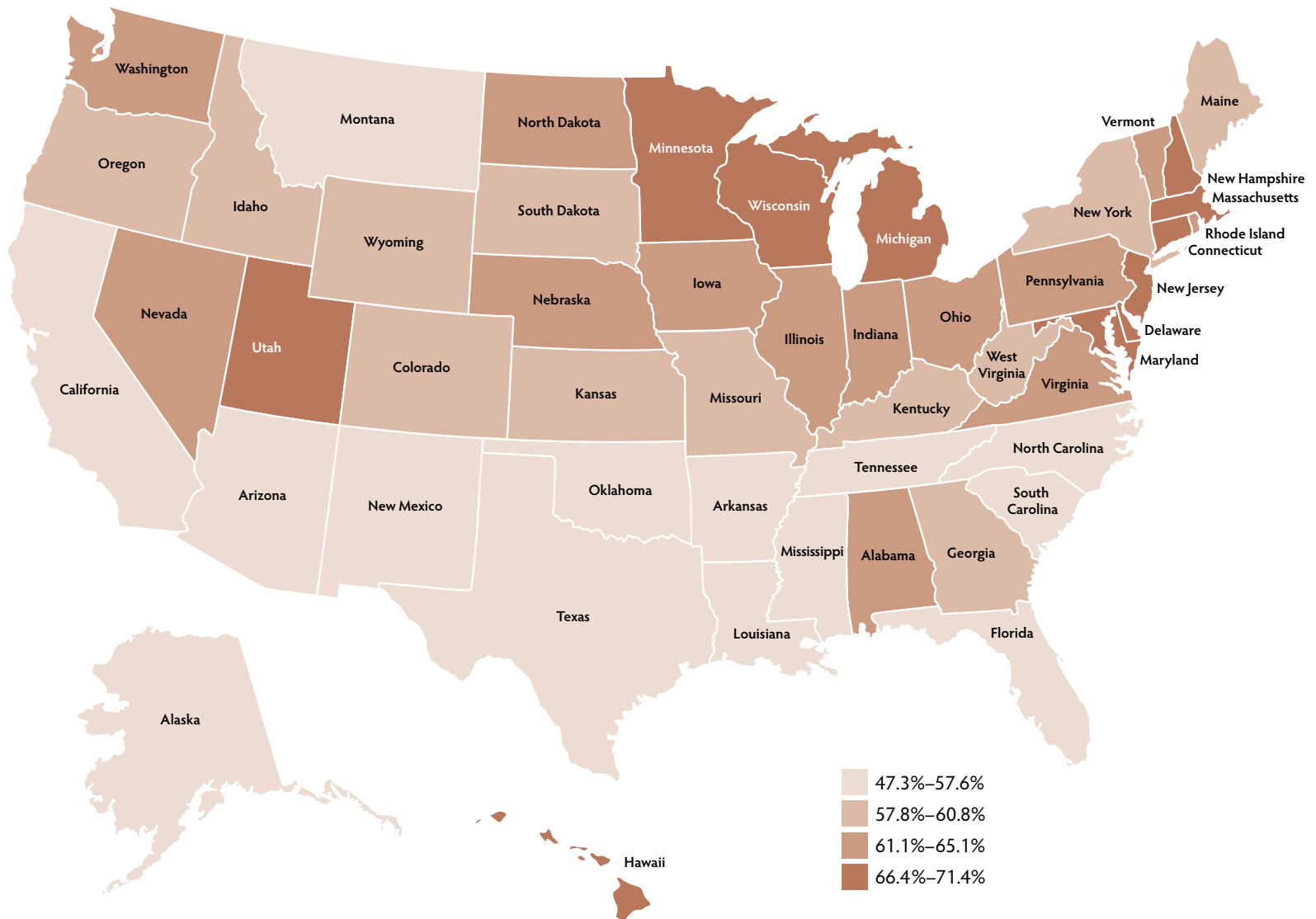
2007/08 Rank	2005/06 Rank	State ⁵⁹	% Employer Based
1	1	New Hampshire	71.4
2	19	Utah*	69.0
3	9	Massachusetts	68.9
4	6	Hawaii	68.3
5	2	Connecticut	67.9
5	5	Maryland	67.9
7	7	Delaware	66.8
7	10	Minnesota	66.8
9	4	Michigan	66.7
9	3	New Jersey*	66.7
11	7	Wisconsin	66.4
12	14	Indiana	65.1
12	11	Ohio	65.1
14	13	Iowa	65.0
15	16	Pennsylvania	64.3
16	17	Illinois	64.0
17	20	Nebraska	63.6
18	24	Nevada	63.4
18	12	Virginia*	63.4
20	22	Vermont	63.3
21	15	Rhode Island	62.9
22	29	Alabama	61.7
22	28	North Dakota	61.7
22	18	Washington	61.7
25	37	District of Columbia	61.1
26	23	Colorado	60.8
27	25	Missouri	60.5
28	21	Kansas	60.4
28	35	Wyoming	60.4
30	36	Georgia	60.0
31	32	West Virginia	59.4
32	26	New York	59.1
32	34	Oregon	59.1
34	30	Idaho	59.0
35	31	Maine	58.9
35	39	South Dakota	58.9
37	27	Kentucky	57.8
38	33	Alaska	57.6
39	40	South Carolina	57.5
40	38	North Carolina	55.4
40	42	Oklahoma	55.4
42	44	California	54.1
43	46	Arizona	53.9
44	43	Montana	53.5
45	41	Tennessee	53.4
46	48	Louisiana	52.6
47	45	Florida	52.5
48	49	Arkansas	51.0
49	47	Texas*	50.3
50	51	Mississippi	47.9
51	50	New Mexico	47.3
		U.S. ⁶⁰	58.7

Source: CPS (SHADAC-enhanced)

⁵⁹ States with the asterisk (*) have a statistically significant change from the previous time period.

⁶⁰ U.S. privately insured data are single-year estimates representing 2008 only.

Percent Privately Insured, Employer-Based Coverage, All Ages, 2007/2008



Percent Privately Insured, Individually-Purchased Coverage, All Ages, 2007/2008

In 2007/2008, Michigan ranked 41st among the 50 states and District of Columbia on percent with individually purchased health coverage (all ages). The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:61

State Comparisons: Percent Privately Insured, Individually Purchased Coverage Only, All Ages, 2007/2008

Ranking 1 = high, 51 = low

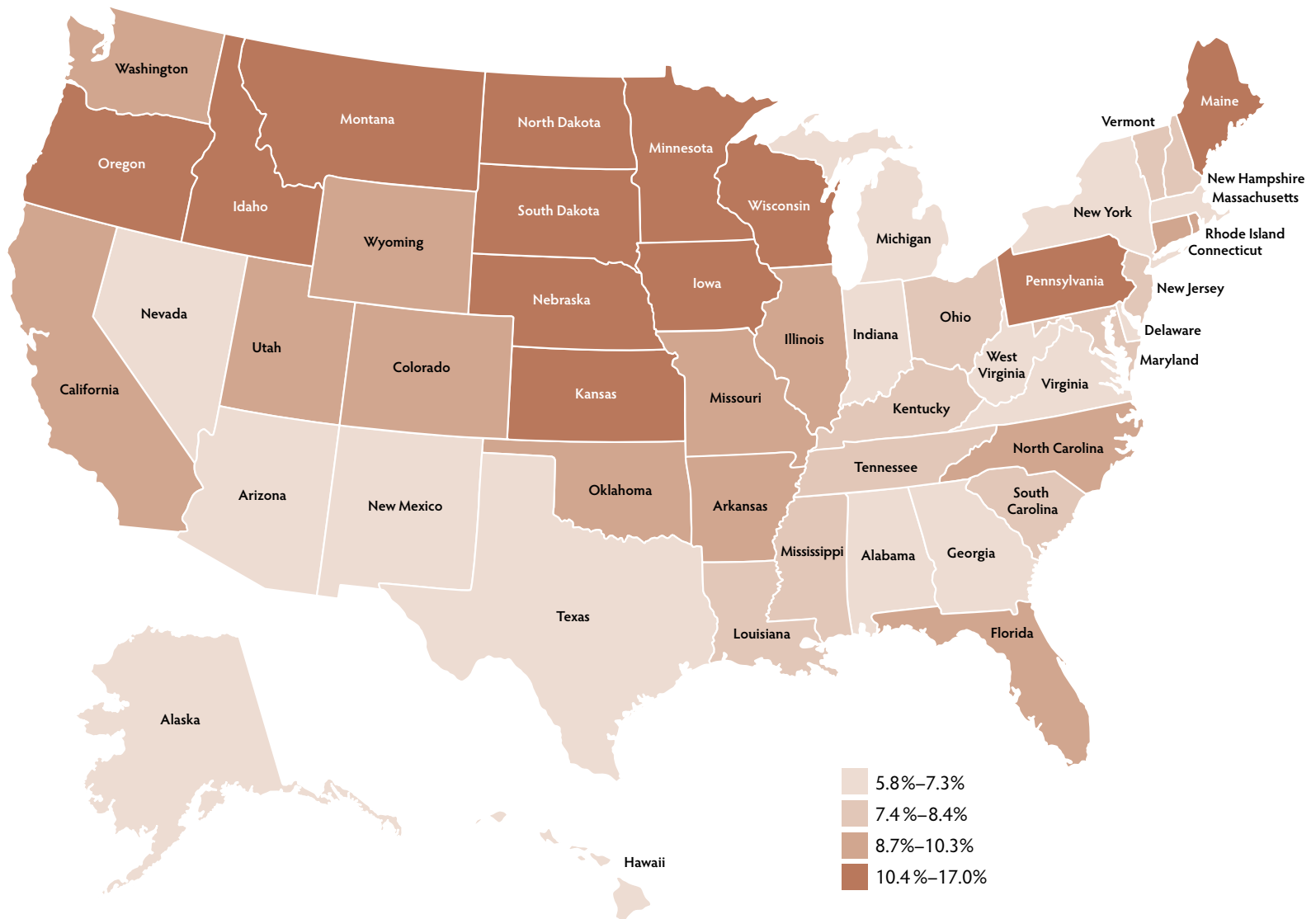
2007/08 Rank	2005/06 Rank	State ⁶¹	% Individual
1	1	South Dakota	17.0
2	2	North Dakota	16.6
3	3	Montana	14.2
4	5	Iowa	14.0
5	12	Idaho*	13.6
6	8	Minnesota	12.3
7	4	Kansas	12.2
8	7	Nebraska	11.9
8	9	Oregon	11.9
10	17	Maine	11.2
11	10	Pennsylvania	10.8
12	15	Wisconsin	10.4
13	5	Wyoming	10.3
14	13	Florida	10.2
15	24	Utah	10.1
16	14	Colorado	10.0
17	21	Washington	9.8
18	11	Missouri	9.5
19	19	Arkansas	9.1
19	21	Connecticut	9.1
21	32	Rhode Island	8.9
22	16	California*	8.7
22	25	Illinois	8.7
22	21	North Carolina	8.7
22	25	Oklahoma	8.7
26	25	Tennessee	8.4
27	33	South Carolina	8.3
28	17	Mississippi	8.2
29	20	New Hampshire	8.0
30	39	Ohio	7.7
31	37	Kentucky	7.6
31	44	New Jersey	7.6
31	29	Vermont	7.6
34	35	Dist. of Columbia	7.5
34	37	Maryland	7.5
36	29	Louisiana	7.4
37	43	Arizona	7.3
37	25	Indiana	7.3
39	35	Virginia	7.2
40	41	Massachusetts	7.1
41	47	Michigan	6.9
42	31	Alabama	6.8
42	41	Texas	6.8
44	48	New Mexico	6.7
45	51	West Virginia	6.5
46	50	Delaware	6.2
47	48	Alaska	6.0
47	44	Georgia	6.0
47	33	Hawaii*	6.0
50	40	New York*	5.9
51	46	Nevada	5.8
		U.S. ⁶²	8.4

Source: CPS (SHADAC-enhanced)

⁶¹ States with the asterisk (*) have a statistically significant change from the previous time period.

⁶² U.S. privately insured data are single-year estimates representing 2008 only.

Percent Privately Insured, Individually-Purchased Coverage, All Ages, 2007/2008



STATE COMPARISONS

Percent Privately Insured, Employer-Based Coverage, Adults (18-64), 2007/2008

In 2007/2008, Michigan ranked 15th among the 50 states and District of Columbia on the percentage of those ages 18-64 with employer-based coverage. The change in ranking from 2005/2006 was not statistically significant

FIGURE CM:62

State Comparisons: Percent Privately Insured, Employer-Based Coverage, Adults (18-64), 2007/2008

Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ⁶³	% Employer Based
1	1	New Hampshire	75.9
2	4	Hawaii	74.7
3	16	Massachusetts	74.0
4	2	Connecticut	72.5
5	11	Minnesota	72.5
6	7	Iowa	72.2
7	5	Wisconsin	71.8
8	9	Maryland	71.6
9	15	Indiana	71.5
10	26	Utah*	71.4
11	3	New Jersey	71.3
12	6	Pennsylvania	71.2
13	8	Delaware	70.7
14	21	Vermont	69.9
15	10	Michigan	69.8
16	12	Ohio	69.5
17	13	Rhode Island	69.0
18	19	Nebraska	68.8
19	31	Alabama	68.7
20	28	Nevada	68.5
21	18	Illinois	68.3
22	23	North Dakota	67.6
23	14	Virginia*	67.5
24	17	Kansas	67.2
25	30	South Dakota	67.2
26	22	Missouri	66.6
27	20	Washington	65.8
28	34	Wyoming	65.5
29	37	Dist. of Columbia	65.1
30	38	Georgia	64.5
31	27	Maine	64.5
32	32	Colorado	64.3
33	33	Oregon	64.2
34	29	New York	63.7
35	35	West Virginia	63.7
36	24	Idaho	63.3
37	39	South Carolina	62.9
38	25	Kentucky	62.4
39	41	Oklahoma	61.4
40	36	North Carolina	60.4
41	42	Alaska	59.8
42	44	Montana	59.2
43	40	Tennessee	59.0
44	43	Florida	58.3
45	46	California	58.2
46	47	Arizona	58.0
47	45	Arkansas	57.7
48	50	Louisiana	57.4
49	48	Mississippi	55.5
50	49	Texas	55.5
51	51	New Mexico	50.8
		U.S. ⁶⁴	63.5

Source: CPS (SHADAC-enhanced)

⁶³ States with the asterisk (*) have a statistically significant change from the previous time period.

⁶⁴ U.S. privately insured data are single-year estimates representing 2008 only.

Percent Privately Insured, Individually-Purchased Coverage, Adults (18-64), 2007 to 2008

In 2007/2008, Michigan ranked 44th among the 50 states and District of Columbia on the percentage of those ages 18-64 with individually purchased private health coverage. The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:63

State Comparisons: Percent Privately Insured, Individually-Purchased Coverage only, Adults (18-64), 2007-2008

Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ⁶⁵	% Individual
1	2	North Dakota	12.1
2	1	South Dakota	11.2
3	8	Idaho	11.0
4	3	Montana	9.9
5	20	Utah*	9.8
6	4	Nebraska	9.1
7	14	Iowa	9.0
8	5	Colorado	8.4
9	17	Oregon	8.2
10	10	Kansas	8.1
10	22	Washington	8.1
12	5	California	7.9
13	10	Dist. of Columbia	7.8
14	10	Minnesota	7.7
15	18	Arkansas	7.6
15	10	Florida	7.6
15	7	Wyoming	7.6
18	23	Wisconsin	7.3
19	23	Maine	7.1
20	15	Pennsylvania	6.9
21	26	Tennessee	6.7
22	19	North Carolina	6.6
23	16	Mississippi*	6.5
24	41	Arizona	6.3
24	35	Illinois	6.3
24	35	Oklahoma	6.3
27	38	Connecticut	6.2
27	9	Missouri	6.2
29	46	South Carolina	6.1
30	43	Rhode Island	6.0
31	31	Louisiana	5.9
31	30	Maryland	5.9
31	42	Ohio	5.9
34	31	New Mexico	5.8
35	45	Kentucky	5.7
36	38	Alaska	5.6
36	38	Texas	5.6
38	26	New Hampshire	5.5
38	26	Virginia	5.5
40	37	Georgia	5.3
41	23	Indiana	5.2
41	50	New Jersey	5.2
43	31	Nevada	4.9
44	49	Delaware	4.8
44	46	Michigan	4.8
44	26	Vermont	4.8
47	20	Hawaii*	4.7
47	31	New York*	4.7
49	48	Massachusetts	4.1
50	43	Alabama	3.8
51	51	West Virginia	3.6
		U.S. ⁶⁶	6.3

Source: CPS (SHADAC-enhanced)

⁶⁵ States with the asterisk (*) have a statistically significant change from the previous time period.

⁶⁶ U.S. privately insured data are single-year estimates representing 2008 only.

STATE COMPARISONS

Percent Privately Insured, Employer-Based Coverage, Children (0-17), 2007/2008

In 2007/2008, Michigan ranked 11th among the 50 states and District of Columbia on the percentage of those ages 0-17 with employer-based coverage. The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:64

State Comparisons: Percent Privately Insured, Employer-Based Coverage only, Children (0-17), 2007/2008

Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ⁶⁷	% Employer Based
1	1	New Hampshire	76.1
2	21	Utah*	72.0
3	6	Wisconsin	71.2
4	2	Massachusetts	71.0
5	3	Connecticut	70.7
6	3	Minnesota	70.1
7	5	New Jersey	69.4
8	7	Iowa	69.0
9	9	Maryland	67.1
10	17	Pennsylvania	67.0
11	8	Michigan	66.4
11	20	North Dakota	66.4
13	10	Delaware	66.1
14	15	Ohio	65.6
15	11	Nevada	65.4
16	19	Rhode Island	65.1
17	12	Nebraska	64.8
18	14	Virginia	64.7
19	16	Illinois	64.4
20	33	Idaho	64.1
21	18	Indiana	63.5
22	26	Wyoming	63.4
23	12	Hawaii	63.1
24	23	Washington	62.5
25	31	Vermont	62.2
26	22	Colorado	61.8
27	28	Maine	61.4
28	25	Alabama	60.6
28	29	Missouri	60.6
30	30	South Dakota	60.4
31	36	Oregon	60.3
32	24	Kansas	60.0
33	26	New York	59.6
34	37	South Carolina	58.4
35	41	Georgia	57.8
36	37	West Virginia	57.5
37	33	Kentucky	56.8
38	39	Montana	56.1
39	32	Alaska	55.4
40	42	Florida	54.2
41	39	North Carolina	53.6
42	44	California	53.3
43	50	Dist. of Columbia	53.2
44	46	Louisiana	52.8
45	33	Tennessee	52.5
46	45	Oklahoma	52.2
47	43	Arizona	51.8
48	48	Texas	46.5
49	47	Arkansas	45.9
50	49	New Mexico	44.5
51	50	Mississippi	42.6
		U.S. ⁶⁸	58.3

Source: CPS (SHADAC-enhanced)

⁶⁷ States with the asterisk (*) have a statistically significant change from the previous time period.

⁶⁸ U.S. privately insured data are single-year estimates representing 2008 only.

Percent Privately Insured, Individually-Purchased Coverage, Children (0-17), 2007/2008

In 2007/2008, Michigan ranked 44th among the 50 states and District of Columbia on the percentage of those ages 0-17 with individually purchased coverage. The change in ranking from 2005/2006 was not statistically significant.

FIGURE CM:65

State Comparisons: Percent Privately Insured, Individually-Purchased Coverage only, Children (0-17), 2007/2008

Ranking 1 = high, 51 = low

2007/08 Rank	2005/06 Rank	State ⁶⁹	% Individual
1	1	South Dakota	10.5
2	7	Utah	8.2
3	4	Idaho	7.8
4	2	Oregon	7.7
5	6	North Dakota	7.5
6	3	Colorado	7.3
7	19	Louisiana	6.4
8	11	Florida	6.0
8	13	Minnesota	6.0
8	5	Montana	6.0
11	8	California*	5.9
12	15	Iowa	5.7
13	9	Kansas	5.6
13	10	Missouri	5.6
15	45	Connecticut*	5.4
15	15	Nebraska	5.4
17	25	Washington	5.2
17	14	Wyoming	5.2
19	29	Alaska	5.1
19	21	Arkansas	5.1
21	23	Maryland	5.0
21	23	North Carolina	5.0
23	21	Wisconsin	4.9
24	47	New Jersey*	4.7
25	34	Arizona	4.5
25	35	Texas	4.5
27	49	New Mexico	4.4
28	37	Kentucky	4.2
29	39	Maine	4.1
29	27	New Hampshire	4.1
29	47	Ohio*	4.1
32	31	Pennsylvania	4.0
33	50	Delaware	3.9
33	37	South Carolina	3.9
35	43	Dist. of Columbia	3.8
35	30	Illinois	3.8
35	39	Nevada	3.8
35	35	Rhode Island	3.8
35	17	Tennessee	3.8
35	25	Virginia	3.8
41	27	Hawaii	3.7
42	18	Oklahoma	3.7
43	11	Mississippi	3.5
44	43	Michigan	3.3
45	31	Georgia	3.2
45	31	New York	3.2
47	42	Massachusetts	2.7
47	46	Vermont	2.7
49	39	Alabama	2.6
50	20	Indiana*	1.9
51	51	West Virginia	1.7
		U.S. ⁷⁰	4.6

Source: CPS (SHADAC-enhanced)

⁶⁹ States with the asterisk (*) have a statistically significant change from the previous time period.

⁷⁰ U.S. privately insured data are single-year estimates representing 2008 only.

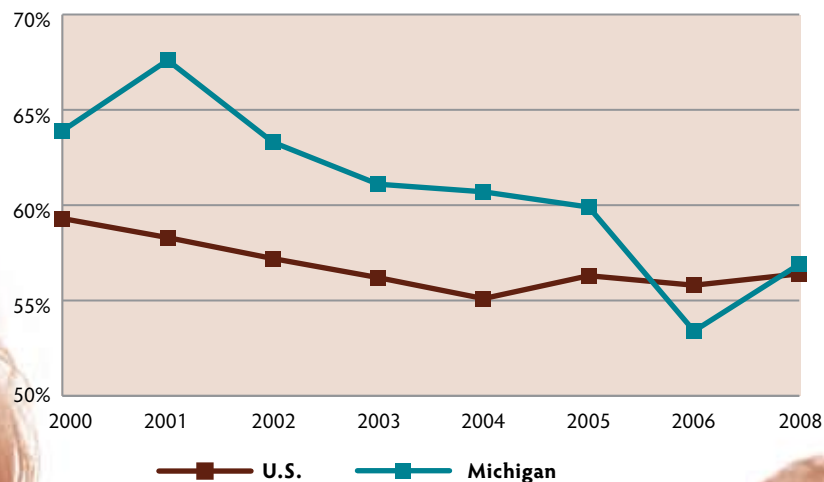
OFFER RATE

Percent of Private Sector Establishments Offering Health Insurance, 2000 to 2008

In 2000, 63.9 percent of employers in Michigan and 59.3 percent of employers in the U.S. offered health insurance coverage. By 2008, those percentages decreased to 56.9 percent in Michigan and 56.4 percent in the U.S., an 11 percent drop in Michigan and a 4.9 percent drop in the U.S. overall.

FIGURE CM:66

Percent of Private Sector Establishments Offering Health Insurance, 2000 to 2008



	2000	2001	2002	2003	2004	2005	2006	2007 ⁷¹	2008	2000 to 2008 % change	2006 to 2008 % change
U.S.	59.3	58.3	57.2	56.2	55.1	56.3	55.8	—	56.4	-4.9	1.1
Michigan	63.9	67.6	63.3	61.1	60.7	59.9	53.4	—	56.9	-11.0	6.6

Source: Medical Expenditure Panel Survey

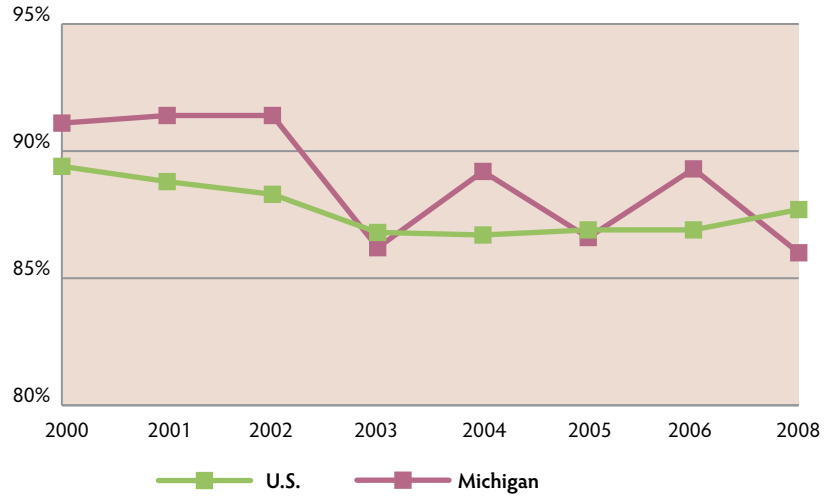
⁷¹ Data missing because MEPS data were not collected for 2007. See methodology for more details.

Percent of Private Sector Employees in Establishments Offering Health Insurance, 2000 to 2008

In 2000, 91.1 percent of employees in Michigan worked in firms that offered private health coverage (compared to 89.4 percent in the U.S. overall). By 2008, that percentage had dropped to 86 percent in Michigan (compared with 87.7 percent in the U.S. overall).

FIGURE CM:67

Percent of Private Sector Employees in Establishments Offering Health Insurance, 2000 to 2008



	2000	2001	2002	2003	2004	2005	2006	2007 ⁷²	2008	2000-2008 % change	2006- 2008 % change
U.S.	89.4	88.8	88.3	86.8	86.7	86.9	86.9	—	87.7	-1.9	0.9
Michigan	91.1	91.4	91.4	86.2	89.2	86.6	89.3	—	86.0	-5.6	-3.7

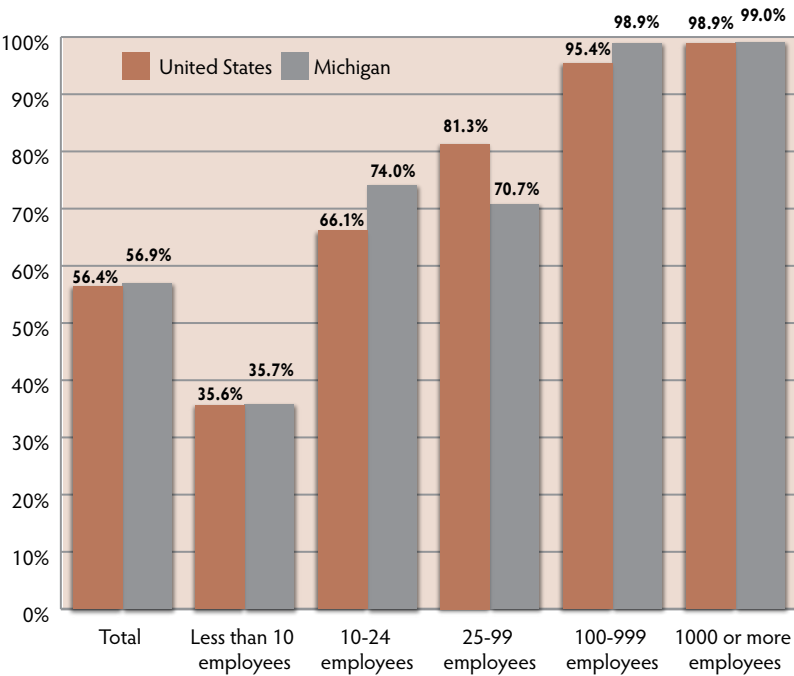
Source: Medical Expenditure Panel Survey

⁷² Data missing because MEPS data were not collected for 2007. See methodology for more details.

Percent of Private Sector Establishments Offering Health Insurance by Firm Size, U.S. and Michigan, 2008

There is a direct association between the offering of health insurance and the size of employer. In both the U.S. and Michigan, only about one-third of firms with less than 10 employees offered health insurance, compared to approximately 99 percent of those firms with 1,000 or more employees. Of particular note is the drop in the percentage of firms with 25-99 employees offering health coverage in Michigan. In 2006, 90.4 percent of Michigan firms with 25-99 employees offered health insurance; by 2008, that percentage had dropped to just over 70 percent.

FIGURE CM:68
Percent of Private Sector Establishments Offering Health Insurance by Firm Size, U.S. and Michigan, 2008



2008	Total	Less than 10 employees	10-24 employees	25-99 employees	100-999 employees	1000 or more employees
U.S.	56.4%	35.6%	66.1%	81.3%	95.4%	98.9%
Michigan	56.9%	35.7%	74.0%	70.7%	98.9%	99.0%

2006	Total	Less than 10 employees	10-24 employees	25-99 employees	100-999 employees	1000 or more employees
U.S.	55.8%	35.1%	63.2%	81.6%	94.1%	98.4%
Michigan	53.4%	32.5%	66.0%	90.4%	96.6%	98.0%

Source: Medical Expenditure Panel Survey

Methodology—Privately Insured

Most data in this chapter are from the State Health Access Data Assistance Center (SHADAC). SHADAC uses the U.S. Census Bureau's Current Population Survey Annual Social and Economic Supplement (CPS) estimates of health insurance to compile health insurance coverage data for all states, available through a web-based table generator tool.

This report uses SHADAC-enhanced CPS health insurance estimates to report the number and percent of the population privately insured (which include employer-sponsored and individually purchased health insurance). These estimates are CPS data reweighted and adjusted by SHADAC to account for historical changes in the survey's methodology and provide a more accurate assessment of coverage estimates over time. Due to adjustments to the CPS data, the privately insured estimates in this report do not correspond completely to estimates published by the Census Bureau and generally result in lower uninsurance estimates. For more information on SHADAC and their data center, visit:

<http://www.shadac.org/datacenter>.

Standard error and confidence intervals were used to determine statistical significance in this report. Statistical significance was calculated at 95 percent confidence to determine statistical differences in the data.

Percent of the Population Privately Insured uses single-year data for U.S. rates and two-year pooled data for Michigan rates. Standard errors for estimates of the publicly insured were too large to provide accurate single-year estimates of insurance coverage for Michigan. Pooling multiple years of CPS data provides more precise estimates of the uninsured by state given small sample sizes.

The Demographic Profile of the Privately Insured uses two-year pooled data for estimates of the privately insured by age, family poverty level, education, and work status (due to small sample sizes). For race, sample sizes were even smaller than for other demographic characteristics; therefore those estimates use three-year pooled data.

In the demographic data for the privately insured, the "total privately insured" includes both "total among respondents" (reflecting subtotals for those who responded to the demographic and the coverage questions) and "all population total" (reflecting subtotals for those who did not respond to the demographic or coverage questions and are thus the same for all demographic breakouts that use the same number of years of pooled data).

State Comparisons uses privately insured rates to rank the 50 states and District of Columbia. These rankings are meant to compare a state's privately insured percentage relative to other states and do not always represent statistically significant differences in the percent privately insured. All state-level estimates within the state comparisons are calculated using two-year pooled data (due to small sample size) while the U.S. privately insured estimate reflects single-year data.

Offer rate data comes from the Agency for Healthcare Research and Quality's (AHRQ's) Medical Expenditure Panel Survey Insurance Component (MEPS-IC), which is an annual survey of employer health insurance offerings.

From 1996 through 2006 MEPS-IC used a retrospective data collection method, which means that each year data were collected for the prior calendar year, creating a time lag in the availability of data. To reduce the time lag, MEPS-IC switched to a current data collection method beginning with the 2008 survey, collecting data in the same year as the calendar year for which the data were being compiled. MEPS-IC data were not collected for 2007.

For complete methodological and data collection information, as well as to view additional MEPS data, please visit:

<http://www.meps.ahrq.gov>.

SECTION IV • HEALTHCARE PREMIUMS AND COST SHARING

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Introduction

Michigan family premiums are less than the U.S. average, ranking ninth lowest in the nation.

In 2008, Michigan's average family premium was \$11,321, lower than the U.S. average of \$12,298. From 1998 to 2008, Michigan's average family premium increased at a slower rate than the U.S. average. Indeed, from 2006 to 2008, Michigan's average family premium reflected virtually no change, while the U.S. average family premium increased 8.1 percent—improving Michigan's national ranking for average family premium from 30th in 2006 to 9th lowest in 2008. In 2008, Michigan's average single premium was \$4,388, 28th lowest in U.S.

Michigan members' cost-sharing has been less than the national average, but Michigan deductibles and copayments have been increasing at a faster rate than the U.S. average over the past several years.

The member's share of costs—in the form of premium sharing, deductibles, and copayments—has been accelerating nationally and in Michigan over the past several years. Overall, Michigan citizens with private coverage tended to assume less of the cost for that coverage than the U.S. average. In 2008, Michigan families were responsible for 22.3 percent of average family premium costs compared to 27.6 percent for the U.S. overall; Michigan family deductibles averaged \$1,403 compared to the U.S. average of \$1,658. Similarly, office visit copayments in Michigan were \$19.59 on average compared to \$20.53 for the U.S. overall.

An overall picture of 2008 premiums and cost sharing can be seen in the table below.

FIGURE CM:69

Overview of Premiums and Cost Sharing, U.S. and Michigan, 2008

	U.S.	Michigan
Average Family Premiums	\$12,298	\$11,321
Average Employee Contribution	28%	22%
Average Single Premium	\$4,386	\$4,388
Average Employee Contribution	20%	17%
Average Family Deductible	\$1,658	\$1,403
Average Copayment	\$20.53	\$19.59

Source: Medical Expenditure Panel Survey

PREMIUMS

Growth in Health Plan Costs, U.S. and Michigan, 1998 to 2008⁷³

In the U.S., the average annual family premium for employment-based coverage increased 120 percent from 1998 to 2008 (from \$5,590 to \$12,298). In the same period, average family health plan costs in Michigan increased 94 percent (from \$5,848 to \$11,321). For comparison, overall inflation (or growth in GDP) from 1998 to 2008 was 56.6 percent.

Most notably, between 2006 and 2008 the cost of Michigan's average family health plan declined 1.1 percent⁷⁴ compared to an increase of 8.1 percent for the U.S. overall. Single health plan cost trends were similar.

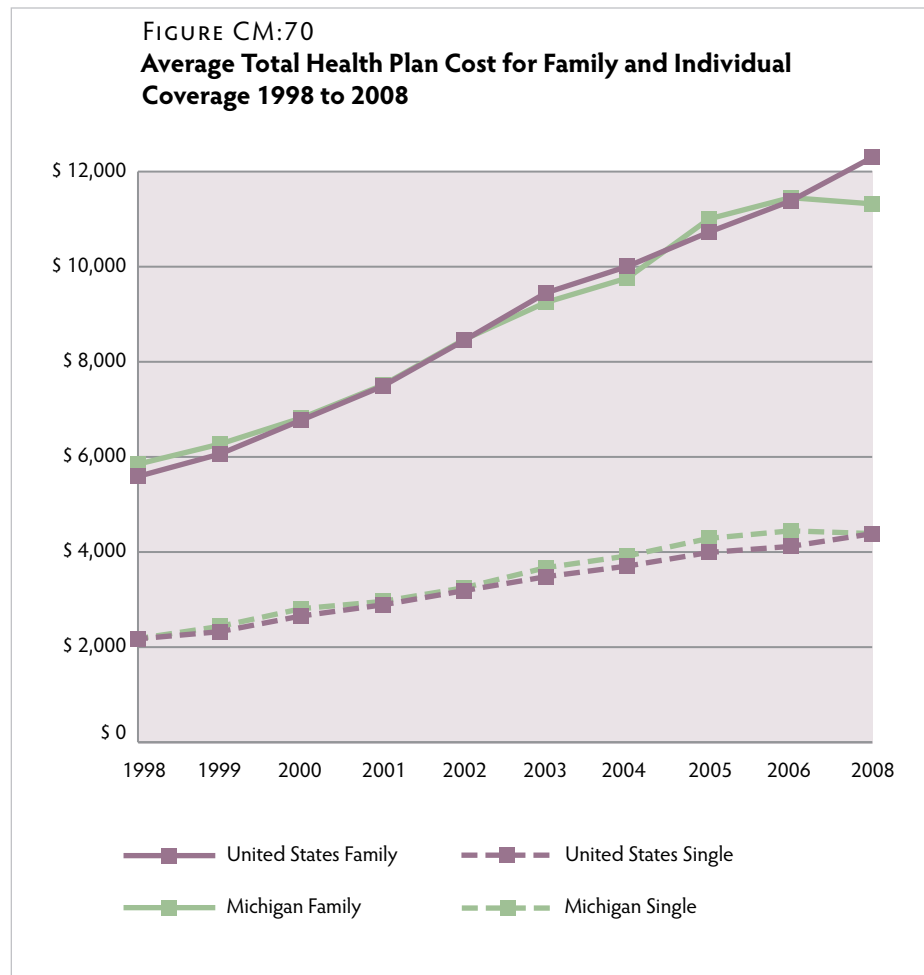


FIGURE CM:71
Growth in Health Plan Costs⁷⁵

		1998	1999	2000	2001	2002	2003	2004	2005	2006	2008	2006 to 2008 % change	1998 to 2008 % change
United States	Family	\$ 5,590	\$ 6,058	\$ 6,772	\$ 7,488	\$ 8,452	\$ 9,449	\$10,006	\$10,728	\$11,381	\$12,298	8.1	120.0
	Single	\$ 2,174	\$ 2,325	\$ 2,655	\$ 2,889	\$ 3,189	\$ 3,481	\$ 3,705	\$ 3,991	\$ 4,118	\$ 4,386	6.5	101.7
Michigan	Family	\$ 5,848	\$ 6,268	\$ 6,817	\$ 7,509	\$ 8,469	\$ 9,249	\$ 9,763	\$11,005	\$11,452	\$11,321	-1.1*	93.6
	Single	\$ 2,180	\$ 2,435	\$ 2,808	\$ 2,961	\$ 3,250	\$ 3,671	\$ 3,918	\$ 4,287	\$ 4,446	\$ 4,388	-1.3*	101.3

Source: Medical Expenditure Panel Survey

⁷³ Data for premiums reflects employer sponsored health plans and are total costs, including enrollee share.

⁷⁴ This decline was not statistically significant from 2006.

⁷⁵ Percentage changes marked with asterisk are not statistically significant.

Growth in Employee's Percentage Share of Premiums, U.S. and Michigan, 2000 to 2008

For both family and single coverage, Michigan employee's percentage share of the total cost was less than the U.S. average. In Michigan, the employee's percentage share of the family premium grew from 20.5 percent in 2006 to 22.3 percent in 2008, an increase of 5.7 percent. By comparison, in the U.S. overall, the employee's percentage share of the family premium increased 8.7 percent over the same time period—from 23.8 percent to 27.6 percent.

FIGURE CM:72

Employee's Percentage Share of Premiums 2000 to 2008



FIGURE CM:73

Employee's Percentage Share of Premiums 2000 to 2008⁷⁶

		2000	2006	2008	2006 to 2008 % change
United States	Family	23.8	25.4	27.6	8.7
	Single	16.9	19.1	20.1	5.2
Michigan	Family	20.5	21.1	22.3	5.7*
	Single	13.6	15.3	16.8	9.8*

Source: Medical Expenditure Panel Survey

⁷⁶ Percentage changes marked with asterisk are not statistically significant.

PREMIUMS

State Comparisons: Family Premiums, 2008

In 2008, the average annual family premium varied significantly among states—ranging from \$10,837 in Idaho to \$13,788 in Massachusetts—with an average premium of \$12,298 for the U.S. overall. In 2006, Michigan was above the U.S. average, ranking 30th among the 50 states and District of Columbia on a scale from lowest to highest premium cost; but in 2007 and 2008, Michigan's premium growth slowed considerably while U.S. average premiums continued to grow. Consequently, in 2008 Michigan ranked ninth lowest in the U.S. with an average premium of \$11,321.

FIGURE CM:74

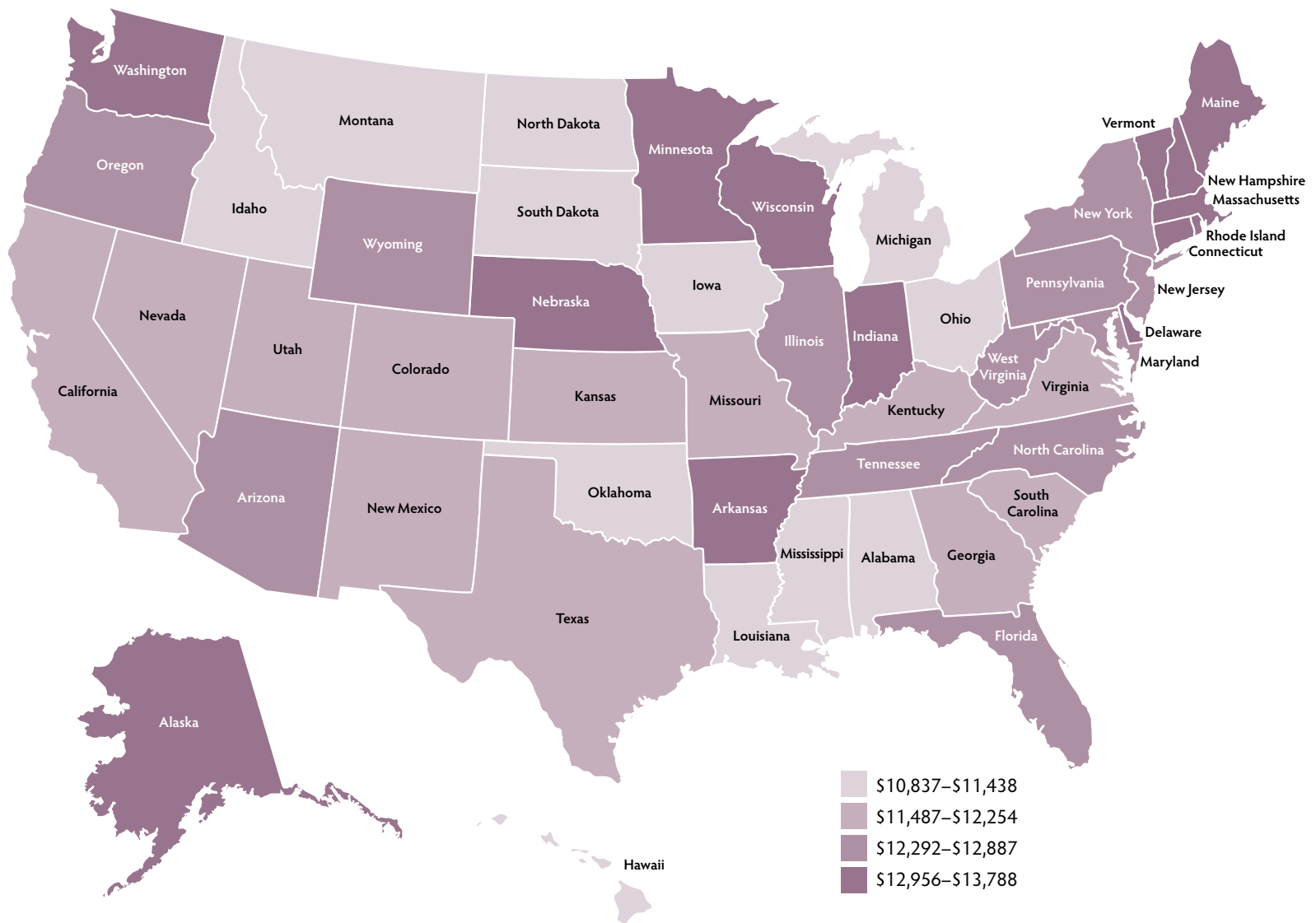
State Comparisons: Average Annual Family Premium per Enrolled Employee in Private Sector that Offer Health Insurance, 2008

Ranking 1 = low, 51 = high

2008 Rank	2006 Rank	State	Average Family Premiums
1	12	Idaho	\$ 10,837
2	9	Iowa	\$ 10,947
3	1	Hawaii	\$ 11,044
4	11	Oklahoma	\$ 11,053
5	10	Alabama	\$ 11,119
6	8	North Dakota	\$ 11,178
7	15	Louisiana	\$ 11,207
8	6	Arkansas	\$ 11,220
9	30	Michigan	\$ 11,321
10	3	Mississippi	\$ 11,363
11	5	South Dakota	\$ 11,382
12	18	Ohio	\$ 11,425
13	22	Montana	\$ 11,438
14	2	Nevada	\$ 11,487
15	4	Kentucky	\$ 11,506
16	23	Missouri	\$ 11,557
17	13	Nebraska	\$ 11,648
18	14	Georgia	\$ 11,659
19	21	Kansas	\$ 11,662
20	19	Utah	\$ 11,783
21	33	Virginia	\$ 11,935
22	24	Colorado	\$ 11,952
23	38	Texas	\$ 11,967
24	17	South Carolina	\$ 12,068
25	26	New Mexico	\$ 12,071
26	32	California	\$ 12,254
27	34	Arizona	\$ 12,292
28	7	Tennessee	\$ 12,302
29	16	North Carolina	\$ 12,308
30	40	Pennsylvania	\$ 12,339
31	25	Maryland	\$ 12,541
32	35	Oregon	\$ 12,585
33	39	Illinois	\$ 12,603
34	20	Florida	\$ 12,697
35	43	Wyoming	\$ 12,734
36	45	New Jersey	\$ 12,789
37	42	New York	\$ 12,824
38	27	West Virginia	\$ 12,887
39	37	Wisconsin	\$ 12,956
40	29	Washington	\$ 13,036
41	36	Vermont	\$ 13,091
42	48	Maine	\$ 13,102
43	41	Rhode Island	\$ 13,363
44	44	Alaska	\$ 13,383
45	50	Delaware	\$ 13,386
46	46	District of Columbia	\$ 13,427
47	49	Connecticut	\$ 13,436
48	31	Indiana	\$ 13,504
49	51	New Hampshire	\$ 13,592
50	28	Minnesota	\$ 13,639
51	47	Massachusetts	\$ 13,788
		United States	\$ 12,298

Source: Medical Expenditure Panel Survey

FIGURE CM:75

Average Family Premium per Enrolled Employee for Employer-Based Health Insurance, 2008

Source: Medical Expenditure Panel Survey

PREMIUMS

State Comparisons: Single Premiums, 2008

In 2008, average annual single premium costs ranged from \$3,830 in North Dakota to \$5,293 in Alaska, with an average cost of \$4,386 in the U.S. overall.

As it did for average family premium, Michigan's ranking on average single premium cost improved between 2006 and 2008. Michigan went from 41st lowest among the 50 states and District of Columbia in 2006 (at \$4,446) to 28th lowest in 2008 (at \$4,388).

FIGURE CM:76

State Comparisons: Average Annual Single Premium per Enrolled Employee in Private Sector that Offers Health Insurance

Ranking 1 = low, 51 = high

2008 Rank	2006 Rank	State	Average Single Premiums
1	7	North Dakota	\$ 3,830
2	1	Hawaii	\$ 3,831
3	2	Arkansas	\$ 3,923
4	4	Nevada	\$ 3,927
5	8	Kentucky	\$ 4,009
6	17	Louisiana	\$ 4,055
7	20	Oklahoma	\$ 4,072
8	27	New Mexico	\$ 4,074
9	28	Ohio	\$ 4,089
10	3	Idaho	\$ 4,104
12	5	Mississippi	\$ 4,124
12	19	Missouri	\$ 4,124
13	18	Alabama	\$ 4,139
14	13	Iowa	\$ 4,146
15	11	Georgia	\$ 4,160
16	9	Kansas	\$ 4,197
16	10	Utah	\$ 4,197
18	30	Virginia	\$ 4,202
19	32	Texas	\$ 4,205
20	37	Arizona	\$ 4,214
21	16	South Dakota	\$ 4,233
22	6	Tennessee	\$ 4,276
23	26	California	\$ 4,280
24	24	Colorado	\$ 4,303
25	33	Montana	\$ 4,355
26	14	Maryland	\$ 4,360
27	31	Oregon	\$ 4,384
28	41	Michigan	\$ 4,388
29	12	Nebraska	\$ 4,392
30	29	Washington	\$ 4,404
31	21	Minnesota	\$ 4,432
32	25	North Carolina	\$ 4,460
33	23	South Carolina	\$ 4,477
34	22	Indiana	\$ 4,495
35	36	Pennsylvania	\$ 4,499
36	15	Florida	\$ 4,517
37	48	Wyoming	\$ 4,622
38	47	New York	\$ 4,638
39	35	Illinois	\$ 4,643
40	51	Delaware	\$ 4,733
41	40	Connecticut	\$ 4,740
42	34	Wisconsin	\$ 4,777
43	43	New Jersey	\$ 4,798
44	42	Massachusetts	\$ 4,836
45	45	District of Columbia	\$ 4,890
46	39	West Virginia	\$ 4,892
47	38	Vermont	\$ 4,900
48	50	Maine	\$ 4,910
49	46	Rhode Island	\$ 4,930
50	49	New Hampshire	\$ 5,247
51	44	Alaska	\$ 5,293
		United States	\$ 4,386

Source: Medical Expenditure Panel Survey

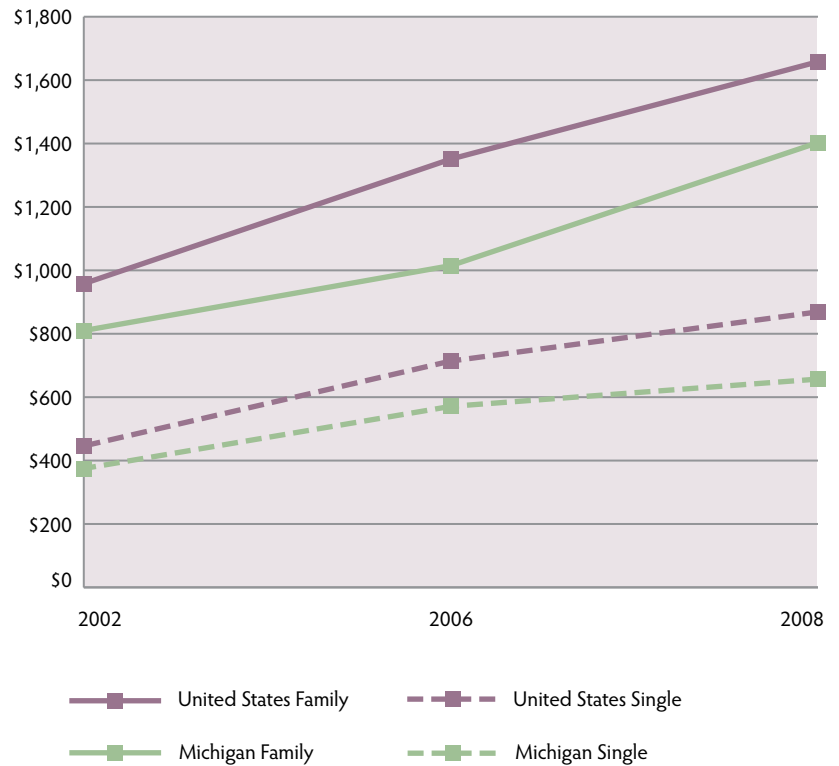
DEDUCTIBLES

Growth in Family and Single Deductibles, U.S. and Michigan, 2002 to 2008

In both Michigan and the U.S. overall, employees faced higher deductibles in 2008.

Michigan's average family deductible rose from \$1,015 to \$1,403 between 2006 and 2008, an increase of 38.2 percent. This rate of change was significantly higher than the 22.7 percent increase in the U.S. overall. However, Michigan's absolute deductible levels remained well below the U.S. average: \$1,403 for family plans and \$657 for single plans, compared to \$1,658 and \$869 (respectively) for the U.S. overall.

FIGURE CM:77
Average Deductible 2002 to 2008⁷⁷



		2002	2006	2008	2002 to 2008 % change	2006 to 2008 % change
United States	Family	\$958	\$1,351	\$1,658	73.1	22.7
	Single	\$446	\$714	\$869	94.8	21.7
Michigan	Family	\$810	\$1,015	\$1,403	73.2	38.2
	Single	\$375	\$571	\$657	75.2	15.1*

Source: Medical Expenditure Panel Survey

⁷⁷ Percent changes marked with an asterisk are not statistically significant.

DEDUCTIBLES

State Comparisons: Percent Enrolled in a Plan with a Deductible, 2008

Seventy-one percent of private sector employees in the U.S. were enrolled in employer-sponsored health insurance plans with deductibles. In Michigan, 72 percent of private sector employees were enrolled in plans with deductibles.

In other states, the percent of private sector employees enrolled in plans with deductibles ranged from 35 percent in Hawaii to 95 percent in South Dakota.

FIGURE CM:78

State Comparisons: Percent of Private-Sector Employees Enrolled in a Health Plan with a Deductible, 2008

Ranking 1 = low, 51 = high

2008 Rank	2006 Rank	State	% Enrolled
1	1	Hawaii	35.2
2	4	New York	46.6
3	3	Massachusetts	47.1
4	10	California	51.8
5	9	District of Columbia	54.4
6	2	Delaware	56.0
7	11	Pennsylvania	56.2
8	8	Connecticut	56.4
9	6	Maryland	57.1
10	7	New Jersey	58.0
11	21	Vermont	58.8
12	5	Rhode Island	59.6
13	13	Virginia	61.0
14	18	Nevada	66.4
15	17	New Mexico	71.1
16	32	Arizona	71.3
17	15	Michigan	72.1
18	14	New Hampshire	72.6
19	22	Minnesota	73.1
20	19	Florida	73.4
21	24	Oregon	75.0
22	26	Illinois	77.0
23	29	Georgia	77.1
24	12	Maine	78.1
25	16	Colorado	79.2
25	30	Washington	79.2
27	37	Tennessee	82.0
28	28	Utah	82.2
28	20	Missouri	82.3
30	36	Alaska	83.3
31	50	North Dakota	83.5
32	47	Kentucky	83.8
33	23	Alabama	83.9
34	49	Iowa	84.4
34	48	Mississippi	84.4
36	41	Louisiana	84.9
37	25	Texas	85.4
38	31	Ohio	86.0
39	27	North Carolina	86.5
40	45	Arkansas	86.8
41	33	West Virginia	87.1
42	34	Kansas	87.9
42	43	South Carolina	87.9
44	46	Idaho	88.7
45	42	Oklahoma	89.6
46	38	Wisconsin	90.0
47	35	Indiana	90.7
48	40	Wyoming	91.0
49	51	Montana	93.5
50	39	Nebraska	93.8
51	44	South Dakota	94.7
		United States	70.7

Source: Medical Expenditure Panel Survey

State Comparisons: Family Deductibles, 2008

Average annual deductibles ranged from \$978 in the District of Columbia to \$2,081 in Colorado, with an average amount of \$1,658 in the U.S. overall.

From 2006 to 2008, Michigan's ranking for average annual family deductible went from second lowest among the 50 states and District of Columbia (at \$1,015) to 10th lowest (at \$1,403).

FIGURE CM:79

State Comparisons: Average Family Deductible per Enrolled Employee in a Health Insurance Plan with a Deductible 2008

Ranking 1 = low, 51 = high

2008 Rank	2006 Rank	State	Average family deductible
1	4	District of Columbia	\$ 978
2	3	Alabama	\$ 1,142
3	9	West Virginia	\$ 1,243
4	16	Washington	\$ 1,252
5	12	Massachusetts	\$ 1,282
6	11	Rhode Island	\$ 1,315
7	6	Pennsylvania	\$ 1,349
8	7	North Dakota	\$ 1,360
9	5	Virginia	\$ 1,392
10	2	Michigan	\$ 1,403
11	42	Delaware	\$ 1,439
12	45	Indiana	\$ 1,441
13	1	Maryland	\$ 1,482
14	24	Arkansas	\$ 1,486
15	18	New York	\$ 1,524
16	23	Oregon	\$ 1,531
17	32	Tennessee	\$ 1,537
17	31	New Mexico	\$ 1,537
19	25	Kansas	\$ 1,544
20	26	Minnesota	\$ 1,553
21	10	Nevada	\$ 1,560
22	27	Maine	\$ 1,562
22	29	South Carolina	\$ 1,562
24	8	Alaska	\$ 1,609
25	34	Utah	\$ 1,613
26	21	Illinois	\$ 1,652
27	13	Kentucky	\$ 1,654
28	14	Ohio	\$ 1,663
29	44	New Hampshire	\$ 1,672
30	17	California	\$ 1,683
31	36	Iowa	\$ 1,686
32	19	New Jersey	\$ 1,701
33	39	Oklahoma	\$ 1,725
34	38	Hawaii	\$ 1,731
35	37	Louisiana	\$ 1,757
35	50	Wyoming	\$ 1,757
37	15	Idaho	\$ 1,791
38	33	Missouri	\$ 1,794
38	20	Nebraska	\$ 1,794
40	28	Wisconsin	\$ 1,824
41	49	Montana	\$ 1,834
42	30	Connecticut	\$ 1,849
43	22	Georgia	\$ 1,850
44	43	Florida	\$ 1,868
45	35	Arizona	\$ 1,886
46	46	Mississippi	\$ 1,907
47	47	North Carolina	\$ 1,925
48	40	South Dakota	\$ 1,953
49	41	Texas	\$ 1,964
50	51	Vermont	\$ 2,046
51	48	Colorado	\$ 2,081
		United States	\$ 1,658

Source: Medical Expenditure Panel Survey

DEDUCTIBLES

State Comparisons: Single Deductibles, 2008

In 2008, average annual single deductibles among states ranged from \$477 in the District of Columbia to \$1,084 in Vermont, with an average amount of \$869 in the U.S. overall.

Michigan's ranking for average single deductible stayed essentially unchanged between 2006 and 2008, going from eighth lowest among all states in 2006 (at \$571) to seventh lowest in the U.S. in 2008 (at \$657).

FIGURE CM:80

State Comparisons: Average Single Deductible per Enrolled Employee in a Health Insurance Plan with a Deductible 2008

Ranking 1 = low, 51 = high

2008 Rank	2006 Rank	State	Average single deductible
1	3	District of Columbia	\$ 477
2	13	Hawaii	\$ 525
3	2	Alabama	\$ 541
4	6	North Dakota	\$ 608
5	12	Massachusetts	\$ 627
6	4	Pennsylvania	\$ 649
7	8	Michigan	\$ 657
8	29	Delaware	\$ 670
9	32	West Virginia	\$ 683
10	15	Utah	\$ 702
11	9	Washington	\$ 703
12	1	Maryland	\$ 718
13	26	New York	\$ 732
14	19	Oregon	\$ 751
15	5	Rhode Island	\$ 754
16	22	Illinois	\$ 763
17	7	Nevada	\$ 764
18	18	New Hampshire	\$ 776
19	10	Virginia	\$ 786
20	34	New Mexico	\$ 796
21	11	Alaska	\$ 819
22	43	Idaho	\$ 829
23	28	Minnesota	\$ 830
24	40	Tennessee	\$ 833
25	14	Ohio	\$ 857
26	27	Oklahoma	\$ 862
27	39	Louisiana	\$ 875
28	20	Arkansas	\$ 880
29	21	California	\$ 882
30	41	South Carolina	\$ 899
31	25	Nebraska	\$ 902
32	36	Kansas	\$ 906
33	33	New Jersey	\$ 907
34	23	Georgia	\$ 912
35	38	Indiana	\$ 929
36	42	Maine	\$ 939
37	17	Kentucky	\$ 950
38	35	Arizona	\$ 952
39	48	Montana	\$ 959
40	31	Florida	\$ 963
41	30	Iowa	\$ 993
42	44	Mississippi	\$ 994
43	50	Colorado	\$ 998
44	37	Missouri	\$ 1,022
45	24	Connecticut	\$ 1,025
46	45	North Carolina	\$ 1,026
47	16	Wisconsin	\$ 1,033
48	51	Wyoming	\$ 1,037
49	46	South Dakota	\$ 1,043
50	47	Texas	\$ 1,058
51	49	Vermont	\$ 1,084
		United States	\$ 869

Source: Medical Expenditure Panel Survey

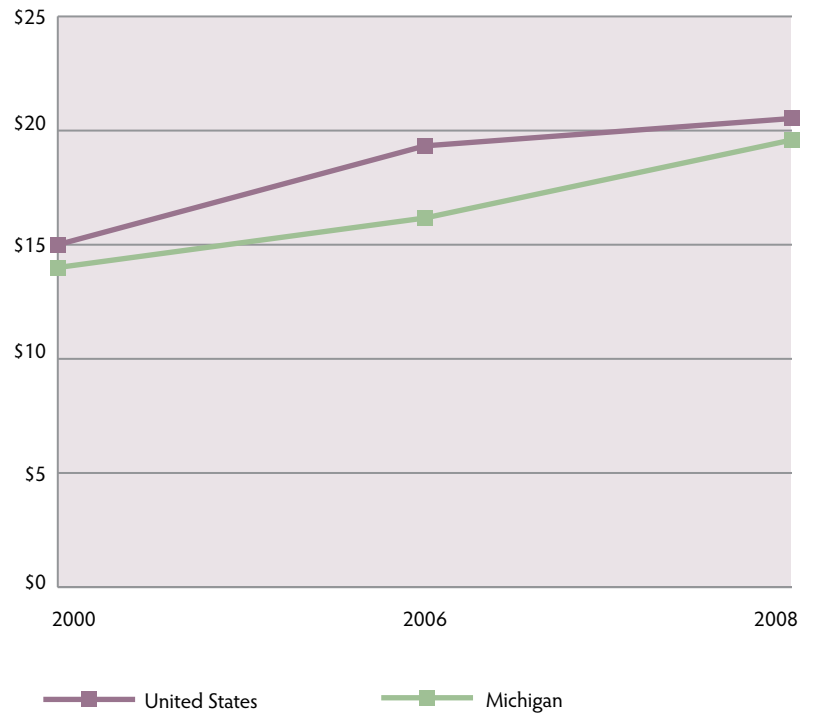
COPAYMENTS

Growth in Copayments for a Physician Office Visit, Michigan and U.S., 2000 to 2008

Average physician office copayments in Michigan increased between 2006 and 2008 at a faster rate than the U.S. overall (21.2 percent compared to 6.2 percent). By 2008, Michigan average physician office copayments were almost on par with the U.S. average (\$19.59 compared to \$20.53).

FIGURE CM:81

Average Copayment, 2000 to 2008



	2000	2006	2008	2006 to 2008 % change
United States	\$ 15	\$ 19.33	\$ 20.53	6.2
Michigan	\$ 14	\$ 16.17	\$ 19.59	21.2

Source: Medical Expenditure Panel Survey

COPAYMENTS

State Comparisons: Average Copayment for a Physician Office Visit, 2008

The average copayment among the fifty states and District of Columbia ranged from \$14.13 in Hawaii to \$25.32 in Alabama, with an average amount of \$20.53 in the U.S. overall.

At \$19.59, Michigan's average copayment was just less than the national average, but because this amount represented an increase from 2006, Michigan's ranking dropped from second lowest for average copayment in 2006 to 12th lowest in 2008.

FIGURE CM:82

State Comparisons: Average Copayment for a Physician Office Visit, per Enrolled Employee in Any Employer-Provided Health Plan

Ranking 1 = low, 51 = high

2008 Rank	2006 Rank	State	Average Copayment
1	1	Hawaii	\$ 14.13
2	3	District of Columbia	\$ 16.35
3	4	Rhode Island	\$ 17.21
4	7	Pennsylvania	\$ 17.30
5	24	Vermont	\$ 17.63
6	5	Delaware	\$ 17.97
7	6	New Hampshire	\$ 18.06
8	11	West Virginia	\$ 18.21
9	8	Massachusetts	\$ 18.50
10	12	Maryland	\$ 18.75
11	10	California	\$ 19.39
12	2	Michigan	\$ 19.59
12	13	Oregon	\$ 19.59
14	14	Virginia	\$ 19.64
15	18	Washington	\$ 19.65
16	19	New York	\$ 19.88
17	23	Maine	\$ 19.89
18	9	Nevada	\$ 19.96
19	31	Utah	\$ 19.97
20	28	Minnesota	\$ 20.03
21	42	Alaska	\$ 20.10
22	16	Ohio	\$ 20.18
23	21	Idaho	\$ 20.25
24	33	Kentucky	\$ 20.47
25	29	Illinois	\$ 20.52
26	17	Iowa	\$ 20.64
27	20	Florida	\$ 20.67
28	34	Indiana	\$ 20.85
29	15	Arizona	\$ 21.05
30	22	Missouri	\$ 21.30
31	25	New Jersey	\$ 21.52
32	45	New Mexico	\$ 21.54
33	27	Wyoming	\$ 21.65
34	30	Connecticut	\$ 21.76
35	36	South Carolina	\$ 21.79
36	47	Arkansas	\$ 22.17
37	46	Georgia	\$ 22.24
38	37	Tennessee	\$ 22.27
39	40	Texas	\$ 22.42
40	35	North Carolina	\$ 22.46
41	26	Wisconsin	\$ 22.48
42	41	South Dakota	\$ 22.50
43	39	Nebraska	\$ 22.61
44	32	Kansas	\$ 22.84
45	43	Oklahoma	\$ 22.90
46	48	Montana	\$ 23.41
47	49	Louisiana	\$ 24.03
48	44	Colorado	\$ 24.07
49	38	North Dakota	\$ 24.30
50	50	Mississippi	\$ 25.04
51	51	Alabama	\$ 25.32
		United States	\$ 20.53

Source: Medical Expenditure Panel Survey

Methodology—Health Care Premiums and Cost Sharing

The data in this chapter are from the Agency for Healthcare Research and Quality's (AHRQ's) Medical Expenditure Panel Survey-Insurance Component (MEPS-IC), which is an annual survey of employer health insurance offerings.

From 1996 through 2006 MEPS-IC used a retrospective data collection method, which means that each year data were collected for the prior calendar year, creating a time lag in the availability of data. To reduce the time lag, MEPS-IC switched to a current data collection method beginning with the 2008 survey, collecting data in the same year as the calendar year for which the data were being compiled. In order to improve the timing, MEPS-IC data were not collected for 2007.

For complete methodological and data collection information, as well as to view additional MEPS data, please visit: <http://www.meps.ahrq.gov>.


Standard errors were used and confidence intervals were calculated to determine statistical significance in this report. When comparing data in this report, statistical significance was calculated at 95 percent confidence to determine statistical differences in the data, as indicated in the footnotes of this chapter.

State Comparisons include data from all 50 states and the District of Columbia to rank average spending on premiums, deductibles, and copayments. These rankings compare a state's average cost-sharing spending relative to other states and do not always represent statistically significant differences in the data.

SECTION V UNCOMPENSATED CARE AND THE SAFETY NET

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Introduction

Michigan hospitals provided over \$2 billion in uncompensated care in 2008.

Michigan's acute care hospitals provided just over \$2 billion in uncompensated care (bad debt and charity care) in 2008, an increase of 94 percent over 2004 levels. The growth in uncompensated care is likely due to the combined impact of the growing number of uninsured and increased cost-sharing for those who have insurance.

Uncompensated care was highest in Wayne County; more than double that of the next-highest regional areas: (1) Oakland County and (2) Washtenaw County. In Macomb County, uncompensated care charges rose 41.4 percent, the largest one-year increase.

While there are many health care "safety net" providers in Michigan, the need for these providers is much greater than the supply. Several other states have many more providers relative to need than does Michigan.

Those who have no health coverage or cannot afford to pay for their care also turn to clinics and other organizations that comprise the health care "safety net." Safety net providers include such organizations as federally qualified health centers (FQHCs), free clinics, health departments, and school-based health centers. These organizations provide services either free of charge or charge a fee based on income. Funds for these programs come from a variety of sources, including federal, state, and local public financing, private philanthropy, and some patient fees.

Michigan has many safety net providers but has had limited penetration of these providers compared to some other states. For example, with 29 FQHCs and 184 delivery sites in 2008, Michigan ranked 31st in the nation in the ratio of sites per 10,000 uninsured. Anecdotal evidence shows that Michigan's safety net is straining to meet the needs of the growing population that cannot afford care in other settings.

Growth of Charges, Hospital Uncompensated Care, 2004 to 2008

Hospital uncompensated care charges⁷⁸ in Michigan rose from approximately \$1.8 billion in 2007 to \$2.1 billion in 2008, a 12.8 percent increase. The increase from 2004 to 2008 was 94.7 percent.

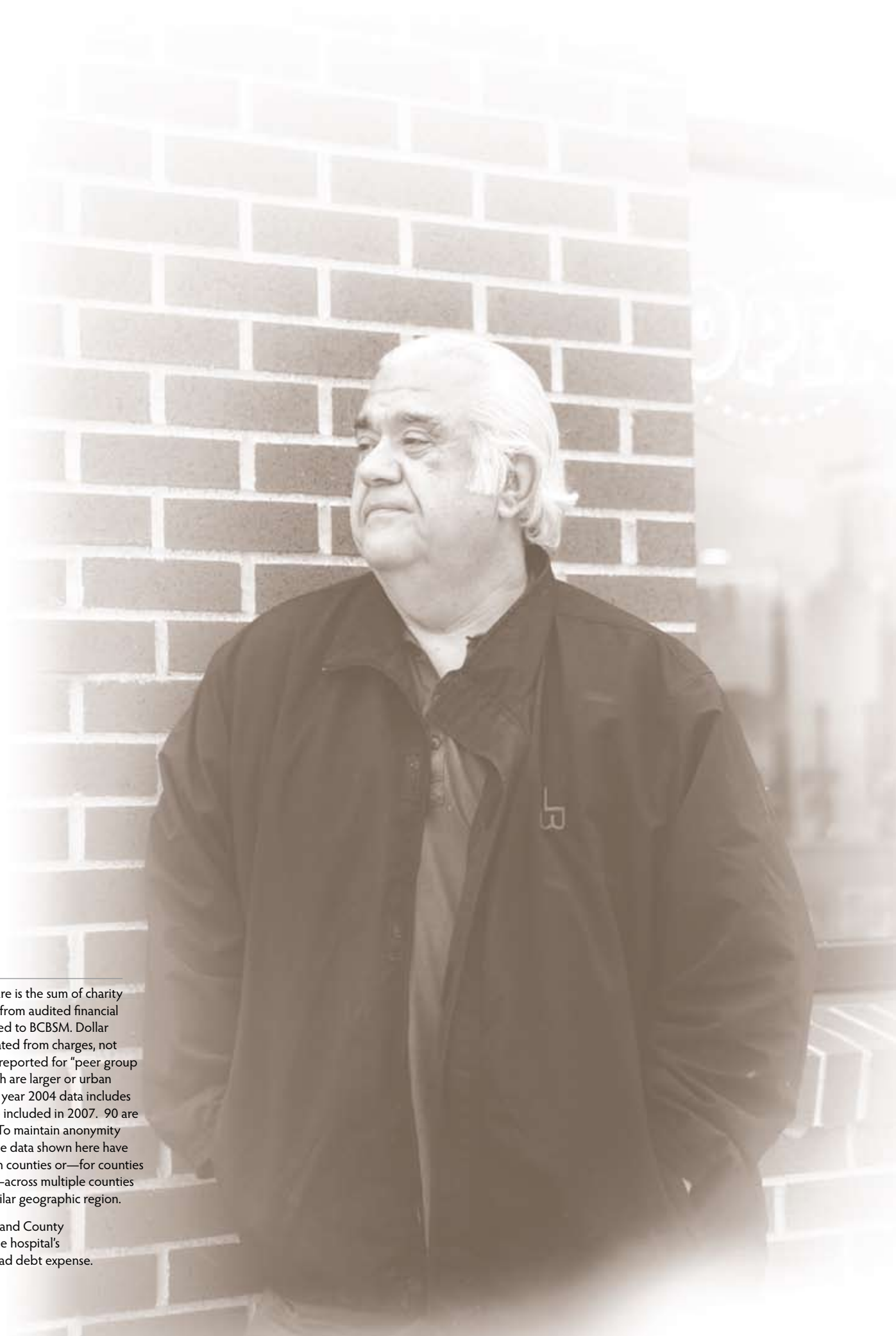
Uncompensated care was the highest in Wayne County; more than double that of the next highest regional areas: Oakland and Washtenaw counties. Of all counties, uncompensated care costs increased most significantly in Macomb County between 2007 and 2008 (41.4 percent). This increase was most likely due to the closure of Saint John Detroit Riverview Hospital in June of 2007.

FIGURE CM:83

Growth of Charges, Hospital Uncompensated Care, 2004 to 2007 and 2007 to 2008

County, Counties or Region	2004	2007	2008	2004 to 2007 % Change	2007 to 2008 % Change	2004 to 2008 % Change
Calhoun-Jackson	\$ 29,000,579	\$ 65,184,012	\$ 75,890,330	124.8	16.4	161.7
Genesee-Lapeer	\$ 54,888,944	\$ 90,725,333	\$ 117,832,673	65.3	29.9	114.7
Gratiot-Isabella-Midland	\$ 10,550,774	\$ 21,364,009	\$ 24,926,003	102.5	16.7	136.2
Hillsdale-Branch-St. Joseph	\$ 9,014,245	\$ 17,316,675	\$ 20,798,106	92.1	20.1	130.7
Ingham-Livingston-Shiawassee	\$ 66,330,595	\$ 112,610,547	\$ 132,416,233	69.8	17.6	99.6
Kalamazoo-Barry	\$ 34,196,066	\$ 68,474,600	\$ 69,877,713	100.2	2.0	104.3
Kent	\$ 39,807,353	\$ 80,811,188	\$ 98,764,659	103.0	22.2	148.1
Macomb	\$ 44,784,200	\$ 77,217,316	\$ 109,167,248	72.4	41.4	143.8
Mason-Newaygo-Mecosta	\$ 6,402,539	\$ 9,605,180	\$ 12,815,091	50.0	33.4	100.2
Monroe-Lenawee	\$ 9,875,900	\$ 18,842,454	\$ 25,806,119	90.8	37.0	161.3
Montcalm	\$ 4,503,865	\$ 8,216,802	\$ 7,069,486	82.4	-14.0	57.0
Northern Lower Peninsula	\$ 22,500,718	\$ 38,844,209	\$ 47,225,331	72.6	21.6	109.9
Oakland	\$ 126,373,487	\$ 209,697,253	\$ 200,189,917	65.9	-4.5 ⁷⁹	58.4
Ottawa-Muskegon	\$ 26,444,264	\$ 43,225,331	\$ 51,791,661	63.5	19.8	95.9
Saginaw-Bay	\$ 34,784,884	\$ 57,743,203	\$ 73,900,508	66.0	28.0	112.5
St. Clair	\$ 11,593,097	\$ 17,955,465	\$ 19,207,200	54.9	7.0	65.7
Upper Peninsula	\$ 16,437,554	\$ 24,686,262	\$ 32,330,109	50.2	31.0	96.7
Washtenaw	\$ 64,584,474	\$ 111,844,626	\$ 136,742,264	73.2	22.3	111.7
Wayne	\$ 438,430,055	\$ 741,946,105	\$ 790,110,838	69.2	6.5	80.2
Wexford-Ogemaw-Iosco	\$ 5,493,141	\$ 7,019,006	\$ 9,003,135	27.8	28.3	63.9
Total	\$ 1,055,996,734	\$ 1,823,329,576	\$ 2,055,864,624	72.7	12.8	94.7

Source: Blue Cross Blue Shield of Michigan.



⁷⁸ Uncompensated care is the sum of charity care and bad debt from audited financial statements submitted to BCBSM. Dollar amounts are calculated from charges, not costs, and are only reported for “peer group 1-4” hospitals, which are larger or urban hospitals. The fiscal year 2004 data includes 88 hospitals, 91 are included in 2007. 90 are included in 2008. To maintain anonymity among hospitals, the data shown here have been pooled within counties or—for counties with few hospitals—across multiple counties for the same or similar geographic region.

⁷⁹ The change in Oakland County was the result of one hospital’s reclassification of bad debt expense.

State Comparisons: Percent change in the number of FQHC delivery sites, 2008

Between 2007 and 2008, the number of federally qualified health center (FQHC) service delivery sites in Michigan increased 17.2 percent, from 157 to 184. However, even with this increase, there are fewer than two FQHC delivery sites per 10,000 uninsured in Michigan.

The state with the highest ratio of delivery sites in 2008 was Alaska, with nearly 14 per 10,000 uninsured. Texas had less than one site per 10,000 uninsured.

With 29 FQHCs and 184 delivery sites in 2008, Michigan ranked 31st in the nation on the ratio of FQHC service delivery sites per 10,000 uninsured.

FIGURE CM:84

State Comparisons, FQHC Service Delivery Sites per 10,000 Uninsured, 2008

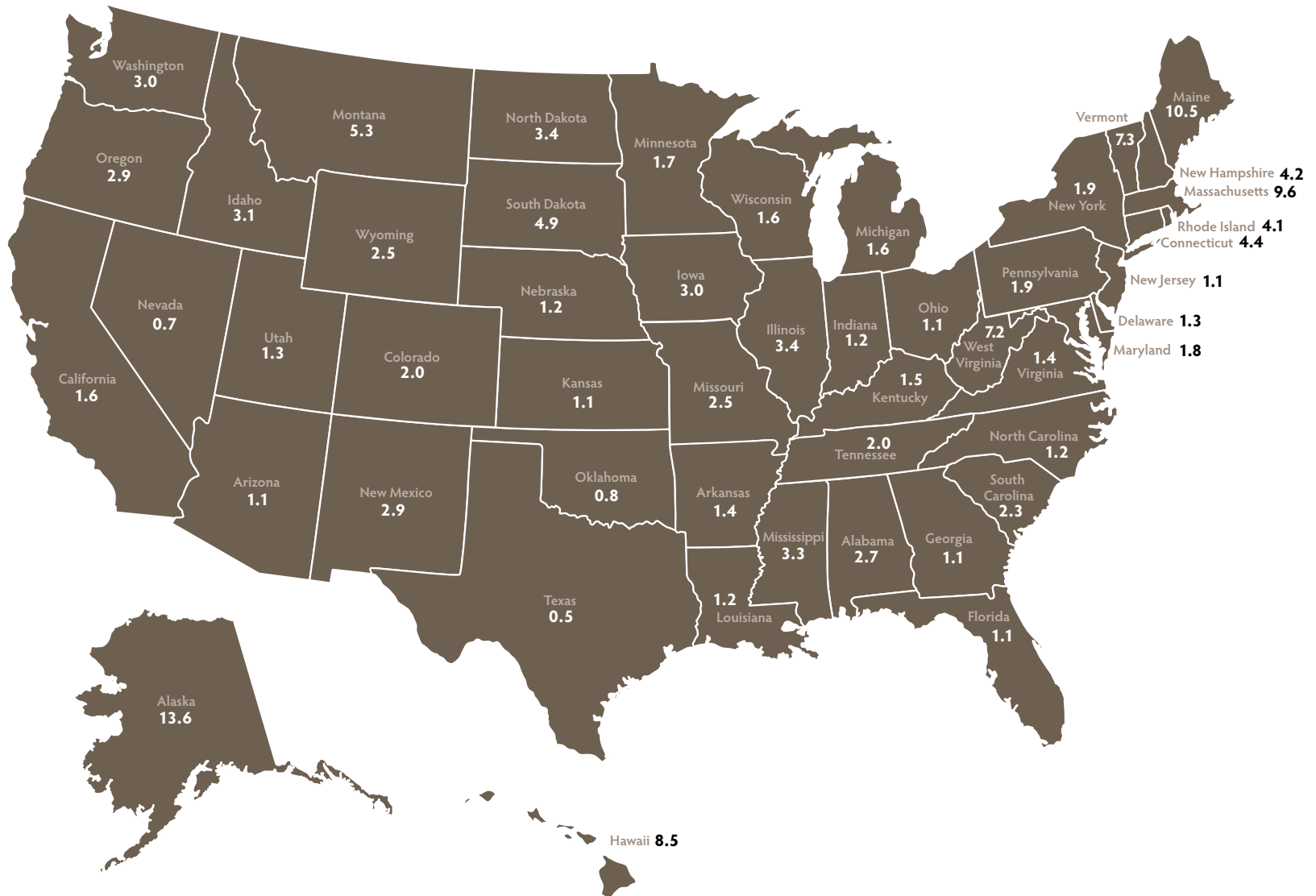
Ranking 1 = high, 51 = low

Rank (by delivery sites per uninsured)	State	Delivery sites per 10,000 Uninsured (2008)	Total No. of FQHCs	No. of Service Delivery Sites		% Change in Delivery Sites
				2007	2008	
1	Alaska	13.6	26	115	174	51.3
2	Maine	10.5	18	96	132	37.5
3	Massachusetts	9.6	36	306	333	8.8
4	Hawaii	8.5	14	63	82	30.2
5	District of Columbia	7.5	5	49	43	-12.2
6	Vermont	7.3	7	31	46	48.4
7	West Virginia	7.2	28	168	188	11.9
8	Montana	5.3	14	79	81	2.5
9	South Dakota	4.9	6	36	44	22.2
10	Connecticut	4.4	10	132	146	10.6
11	New Hampshire	4.2	9	50	57	14.0
12	Rhode Island	4.1	7	49	48	-2.0
13	Illinois	3.4	36	402	570	41.8
13	North Dakota	3.4	5	29	23	-20.7
15	Mississippi	3.3	21	157	178	13.4
16	Idaho	3.1	11	63	70	11.1
17	Washington	3.0	25	225	232	3.1
17	Iowa	3.0	13	74	83	12.2
19	New Mexico	2.9	15	110	133	20.9
19	Oregon	2.9	24	155	179	15.5
21	Alabama	2.7	16	118	151	28.0
22	Wyoming	2.5	6	15	18	20.0
22	Missouri	2.5	21	121	180	48.8
24	South Carolina	2.3	21	143	163	14.0
25	Tennessee	2.0	23	132	184	39.4
25	Colorado	2.0	15	137	160	16.8
27	New York	1.9	50	443	508	14.7
27	Pennsylvania	1.9	33	189	229	21.2
29	Maryland	1.8	16	105	126	20.0
30	Minnesota	1.7	14	71	76	7.0
31	Wisconsin	1.6	16	62	81	30.6
31	Michigan	1.6	29	157	184	17.2
31	California	1.6	113	796	1,049	31.8
34	Kentucky	1.5	18	80	94	17.5
35	Arkansas	1.4	12	60	68	13.3
35	Virginia	1.4	22	103	146	41.7
37	Utah	1.3	11	29	47	62.1
37	Delaware	1.3	4	10	12	20.0
39	Louisiana	1.2	22	70	99	41.4
39	North Carolina	1.2	26	136	173	27.2
39	Nebraska	1.2	6	21	26	23.8
39	Indiana	1.2	18	83	86	3.6
43	Ohio	1.1	27	130	149	14.6
43	Kansas	1.1	11	37	36	-2.7
43	Arizona	1.1	14	101	129	27.7
43	New Jersey	1.1	18	99	134	35.4
47	Florida	1.0	41	285	372	30.5
47	Georgia	1.0	28	114	163	43.0
49	Oklahoma	0.8	13	52	45	-13.5
50	Nevada	0.7	2	32	33	3.1
51	Texas	0.5	57	275	318	15.6
	United States	1.8	1,080	6,672	8,176	22.5

Sources: (Health center data): National Association of Community Health Centers

(Number Uninsured data): Urban Institute and Kaiser Commission on Medicaid and the Uninsured estimates based on the Census Bureau's March 2008 and 2009 Current Population Survey (CPS: Annual Social and Economic Supplements).

State Comparisons, FQHC Service Delivery Sites per 10,000 Uninsured, 2008



Number of FQHC sites in Michigan Counties, December 2009

In Michigan, the number of federally qualified health center (FQHC) and FQHC look-alike (FQHC-LA) sites increased from 139 in 2007 to 159 in 2008. Wayne County had the most sites at 24, closely followed by Kent County at 17 and considerably more than the next closest counties (Saginaw and St. Clair) with nine each.

FIGURE CM:85
Number of FQHC and FQHC-LAs in Michigan Counties, December 2009

County	2008	2007
Alcona	3	3
Alger	0	0
Allegan	1	1
Alpena	2	2
Antrim	2	2
Arenac	2	2
Baraga	0	0
Barry	0	0
Bay	2	3
Benzie	0	0
Berrien	3	3
Branch	0	0
Calhoun	2	3
Cass	1	1
Charlevoix	1	1
Cheboygan	0	0
Chippewa	1	1
Clare	0	0
Clinton	0	0
Crawford	0	0
Delta	0	0
Dickinson	0	0
Eaton	0	0
Emmet	1	0
Genesee	6	4
Gladwin	0	0
Gogebic	0	0
Grand Traverse	1	1
Gratiot	0	0
Hillsdale	0	0
Houghton	0	0
Huron	0	0
Ingham	7	8
Ionia	1	0
Iosco	1	1
Iron	1	1
Isabella	0	0
Jackson	5	4
Kalamazoo	5	5
Kalkaska	0	0
Kent	17	19
Keweenaw	0	0
Lake	4	4

County	2008	2007
Lapeer	1	1
Leelanau	1	0
Lenawee	1	0
Livingston	0	0
Luce	0	0
Mackinac	1	0
Macomb	6	6
Manistee	1	1
Marquette	1	0
Mason	0	0
Mecosta	0	0
Menominee	2	2
Midland	0	0
Misaaaukee	1	0
Monroe	3	2
Montcalm	1	0
Montmorency	2	3
Muskegon	5	3
Newaygo	3	3
Oakland	3	2
Oceana	2	3
Ogemaw	1	1
Ontonagon	1	1
Osceola	0	0
Oscoda	0	0
Otsego	0	0
Ottawa	1	1
Presque Isle	2	2
Roscommon	4	2
Saginaw	9	7
St Clair	9	7
St Joseph	0	0
Sanilac	0	0
Schoolcraft	0	0
Shiawassee	1	0
Tuscola	1	2
Van Buren	1	1
Washtenaw	1	1
Wayne	24	19
Wexford	1	0
Total 2008	159	
Total 2007	139	

Number of FQHC sites in Michigan Counties, December 2009



Federally Qualified Health Center (FQHC) and FQHC Look-alike (FQHC-LA)

FIGURE CM:86
FQHC and FQHC-LA Centers and Sites in Michigan, December 2009

Name of FQHC/FQHC-LA	Site Name	City	County	Site Type
Advantage Health Care	Salvation Army-- Fort Street	Detroit	Wayne	330E: Community Health Center
	Operation Get Down	Detroit	Wayne	330E: Community Health Center
	Latino Family Services	Detroit	Wayne	330E: Community Health Center
	Fort St. Presbyterian Church	Detroit	Wayne	330E: Community Health Center
	Advantage Health Center	Detroit	Wayne	330E: Community Health Center
	Waller Health Center on Cathedral Green	Detroit	Wayne	330H: Health Care for the Homeless Center
	Mobile Unit	Detroit	Wayne	Mobile
	Thea Bowman Center	Detroit	Wayne	330E: Community Health Center
Alcona Health Center	Alcona Health Center - Alpena Services	Alpena	Alpena	330E: Community Health Center
	Alcona Health Center - Harrisville Clinic	Harrisville	Alcona	330E: Community Health Center
	Alcona Health Center - Lincoln Clinic	Lincoln	Alcona	330E: Community Health Center
	Alcona Health Center - Oscoda Clinic	Oscoda	Iosco	330E: Community Health Center
	Community Health Center of Northern MI	Harbor Springs	Emmet	330E: Community Health Center
	Tiger Health	Lincoln	Alcona	School Based Clinic
	Alcona Health Center - Ossineke Clinic	Ossineke	Alpena	330E: Community Health Center
Baldwin Family Health Care	Family Health Care - Benson Street	White Cloud	Newaygo	330E: Community Health Center
	Family Health Care - Grant	Grant	Newaygo	330E: Community Health Center
	Family Health Care - Wilcox	White Cloud	Newaygo	330E: Community Health Center
	Hesperia Schools-Nursing Program	Hesperia	Oceana	School Based Clinic
	Baldwin Health Clinic	Baldwin	Lake	330E: Community Health Center
	Baldwin Teen Health Center	Baldwin	Lake	330E: Community Health Center
	Congregate Respite Oakwood Generations	Baldwin	Lake	330E: Community Health Center
	Great Lakes Family Care	Cadillac	Wexford	330E: Community Health Center
	Great Lakes Family Care-McBain	McBain	Missaukee	330E: Community Health Center

Name of FQHC/FQHC-LA	Site Name	City	County	Site Type
	Loretta Adams-Ashby Health Center	Baldwin	Lake	330E: Community Health Center
Bay Mills	Bay Mills Health Center	Brimley	Chippewa	330E: Community Health Center/Indian Health Services Tribal Health Center
Cassopolis Family Clinic	Cassopolis Family Clinic	Cassopolis	Cass	330E: Community Health Center
Center For Family Health, Inc.	Northeast Health Center	Jackson	Jackson	School Based Clinic
	Interfaith Health Center	Jackson	Jackson	330E: Community Health Center
	Center for Family Health, Inc.- Dental	Jackson	Jackson	Dental
	Teen Health Center at Parkside	Jackson	Jackson	School Based Clinic
	Center for Family Health-Medical	Jackson	Jackson	330E: Community Health Center
CHASS (Community Health & Social Services)	CHASS Southwest Center	Detroit	Wayne	330E: Community Health Center
	CHASS Western International Health Center	Detroit	Wayne	330E: Community Health Center
	CHASS Midtown Center	Detroit	Wayne	330E: Community Health Center
Cherry Street Health Services, Inc.	Belknap Commons Health Center	Grand Rapids	Kent	330E: Community Health Center
	Burton Health Center	Grand Rapids	Kent	School Based Clinic
	Cherry Street Health Services	Grand Rapids	Kent	330E: Community Health Center
	Creston High School	Grand Rapids	Kent	School Based Clinic
	Ottawa High School	Grand Rapids	Kent	School Based Clinic
	Ferguson Adult Health Center	Grand Rapids	Kent	330E: Community Health Center
	Ferguson Dental Clinic	Grand Rapids	Kent	Dental
	Grand Rapids Pediatrics	Grand Rapids	Kent	330E: Community Health Center
	The Salvation Army-Booth Family Clinic	Grand Rapids	Kent	330E: Community Health Center
	Union High School Health Center	Grand Rapids	Kent	School Based Clinic
	Westside Health Center	Grand Rapids	Kent	330E: Community Health Center
	Montcalm Area Health Center	Greenville	Montcalm	330E: Community Health Center
Covenant Community Care, Inc.	Covenant Community Care	Detroit	Wayne	330E: Community Health Center

Name of FQHC/FQHC-LA	Site Name	City	County	Site Type
	Southwest Solutions	Detroit	Wayne	330E: Community Health Center
Detroit Community Health Connection	East Riverside Health Center	Detroit	Wayne	330E:Community Health Center/Ryan White
	Eastside Health Center	Detroit	Wayne	330E:Community Health Center/Ryan White
	Healthy Teen Community Care Center	Detroit	Wayne	330E:Community Health Center/Ryan White
	Woodward Corridor Family Medical Center	Detroit	Wayne	330E:Community Health Center/Ryan White
	Bruce Douglas Health Center	Detroit	Wayne	330E:Community Health Center/Ryan White
	Nolan Health Center	Detroit	Wayne	330E:Community Health Center/Ryan White
Downriver Community Services	MATTS	Warren	Macomb	330H: Health Care for the Homeless Center
	Macomb County Warming Center	Roseville	Macomb	Homeless
	Richmond Community Schools	Richmond	St. Clair	Other
	New Haven Schools	New Haven	Macomb	Other
	McRest	Mt. Clemens	Macomb	Homeless
	Neighbors Caring for Neighbors	Mt. Clemens	Macomb	330H: Health Care for the Homeless Center
	Turning Point	Mt. Clemens	Macomb	330H: Health Care for the Homeless Center
	Algonac Community Schools	Algonac	St. Clair	Other
	Carolyns Place	Port Huron	St. Clair	330H: Health Care for the Homeless Center
	Clearview	Port Huron	St. Clair	330H: Health Care for the Homeless Center
	Algonac Medical Center/Community Services	Algonac	St. Clair	330E:Community Health Center
	Harbor For Youth	Port Huron	St. Clair	330H: Health Care for the Homeless Center
	Mother Hill	Port Huron	St. Clair	330H: Health Care for the Homeless Center
	Pathway	Port Huron	St. Clair	330H: Health Care for the Homeless Center
	Port of Hope	Port Huron	St. Clair	330H: Health Care for the Homeless Center
East Jordan Family Health Center	Bellaire Family Health Center	Bellaire	Antrim	330E: Community Health Center
	Central Lake Family Health Center	Central Lake	Antrim	330E: Community Health Center
	East Jordan Family Health Center	East Jordan	Charlevoix	330E: Community Health Center
Family Health Center of Battle Creek	Family Health Center	Battle Creek	Calhoun	330E: Community Health Center
	Family Health Center of Albion	Albion	Calhoun	330E: Community Health Center
Family Health Center, Inc.	Family Health Center - South	Kalamazoo	Kalamazoo	330E: Community Health Center

SECTION V UNCOMPENSATED CARE AND THE SAFETY NET

Name of FQHC/FQHC-LA	Site Name	City	County	Site Type
	Family Health Center, Inc.	Kalamazoo	Kalamazoo	330E: Community Health Center
	Family Health Center-City of Portage	Portage	Kalamazoo	330E: Community Health Center
	Edison School Based Health Center	Kalamazoo	Kalamazoo	School Based Clinic
	Health Care For the Homeless	Kalamazoo	Kalamazoo	330H: Health Care for the Homeless Center
Family Medical Center of MI, Inc.	Family Medical Center of MI-Adrian	Adrian	Lenawee	330E: Community Health Center
	Family Medical Center of MI, Inc.	Carleton	Monroe	330E: Community Health Center
	Family Medical Center of MI, Inc. - Temperance	Temperance	Monroe	330E: Community Health Center
	Family Medical Center of MI-Monroe	Monroe	Monroe	330E: Community Health Center
Hackley Community Care Center	Hackley Community Care Center	Muskegon Heights	Muskegon	330E: Community Health Center
Hamilton Community Health Network	Burton Clinic	Burton	Genesee	330E: Community Health Center
	Clio North Site	Mt.Morris	Genesee	330E: Community Health Center
	North Pointe	Flint	Genesee	330E: Community Health Center
	Community Mental Health Primary Care Site	Flint	Genesee	330E: Community Health Center
	Hamilton Community Health Network	Flint	Genesee	330E: Community Health Center
	Dental North Site	Flint	Genesee	Dental
Health Centers of Detroit	Health Centers of Detroit University Health Center	Detroit	Wayne	FQHC 'Look-Alike'
	Health Centers of Detroit Medical Group	Detroit	Wayne	FQHC 'Look-Alike'
	Health Centers of Detroit Advance Building	Southfield	Oakland	FQHC 'Look-Alike'
Health Delivery, Inc.	Manchester Site	Manchester	Washtenaw	330G: Migrant Health Center
	Imlay City Migrant Health Center	Imlay City	Lapeer	330G: Migrant Health Center
	Bayside Health Center	Bay City	Bay	330E: Community Health Center
	HDI OB/GYN & Midwifery Services	Bay City	Bay	330E: Community Health Center
	Wolverine Health Service-Vassar Center	Vassar	Tuscola	330E: Community Health Center
	Shiawassee Community Health Center	Owosso	Shiawassee	330E: Community Health Center
	Smiles are Everywhere-Community Dental Program	Saginaw	Saginaw	Mobile
	David R. Gamez Community Health Center	Saginaw	Saginaw	330E: Community Health Center
	Hearth Home HIV Awareness	Saginaw	Saginaw	Comm. Based Social Service Center Shelter
	Janes Street Academic Community Health Center	Saginaw	Saginaw	330E: Community Health Center

Name of FQHC/FQHC-LA	Site Name	City	County	Site Type
	Roosevelt S. Ruffin Community Health Center	Saginaw	Saginaw	330E: Community Health Center
	Saginaw High School-School based clinic	Saginaw	Saginaw	School Based Clinic
	Wadsworth Dental Center	Saginaw	Saginaw	Dental
	Wolverine Health Service-Saginaw Health Center	Saginaw	Saginaw	330E: Community Health Center
	Belding Migrant Health Center	Belding	Ionia	330G: Migrant Health Center
	Bridgeport Community Health Center	Saginaw	Saginaw	330E: Community Health Center
Ingham County Health Department	Healthy Smiles	Lansing	Ingham	Dental
	Otto Health and Wellness Center	Lansing	Ingham	FQHC 'Look-Alike'
	Sparrow Community Health Center	Lansing	Ingham	FQHC 'Look-Alike'
	St. Lawrence Community Health Center	Lansing	Ingham	FQHC 'Look-Alike'
	Well Child Health Center of Ingham Co.	Lansing	Ingham	FQHC 'Look-Alike'
	Willow Plaza Teen Clinic	Lansing	Ingham	FQHC 'Look-Alike'
	Cedar Community Health Center	Lansing	Ingham	FQHC 'Look-Alike'
InterCare Community Health Network	InterCare—Bangor	Bangor	Van Buren	330E: Community Health Center/Dental
	InterCare—Benton Harbor	Benton Harbor	Berrien	330E: Community Health Center/Dental
	InterCare—Mercy	Benton Harbor	Berrien	330E: Community Health Center
	InterCare—Eau Claire	Eau Claire	Berrien	330E: Community Health Center
	InterCare—Pullman	Pullman	Allegan	330E: Community Health Center
	InterCare—Holland	Holland	Ottawa	330E: Community Health Center
	Sparta Farmworker Health Services	Sparta	Kent	330E: Community Health Center
MidMichigan Health Park	MidMichigan Health Park	Houghton Lake	Roscommon	330E: Community Health Center
	Gerrish-Higgins School Based Clinic	Roscommon	Roscommon	School Based Clinic
	Houghton Lake School Based Clinic	Houghton Lake	Roscommon	School Based Clinic
	Roscommon—Mid Michigan Medical Offices	Roscommon	Roscommon	330E: Community Health Center
Muskegon Family Care Center	Getty Street Medical Clinic	Muskegon	Muskegon	330E: Community Health Center
	Oak Avenue Medical Clinic	Muskegon	Muskegon	330E: Community Health Center
	Dental Services	Muskegon	Muskegon	Dental
	Family Planning Services	Muskegon	Muskegon	330E: Community Health Center

Name of FQHC/FQHC-LA	Site Name	City	County	Site Type
Northwest Michigan Health Services	Shelby Migrant Clinic	Shelby	Oceana	330G: Migrant Health Center
	Bear Lake/Onkama Clinic	Bear Lake	Manistee	330G: Migrant Health Center
	Summer Dental Program	Suttons Bay	Leelanau	Dental
	Traverse City Migrant Clinic	Traverse City	Grand Traverse	330G: Migrant Health Center
Oakland Primary Health Services, Inc.	Oakland Primary Health Services, Inc.	Pontiac	Oakland	330E: Community Health Center
Saint Mary's Health Services	Heartside Clinic	Grand Rapids	Kent	330H: Health Care for the Homeless Center
	Browning Claytor Health Center	Grand Rapids	Kent	
	McAuley Health Center	Grand Rapids	Kent	Ryan White Title III Clinic
	Clinica Santa Maria	Grand Rapids	Kent	Hospital
	Sparta Health Center	Sparta	Kent	
Sterling Area Health Center	Sterling Medical	Sterling	Arenac	330E: Community Health Center
	Ogemaw Clinic	Prescott	Ogemaw	330E: Community Health Center
	Sterling Dental Clinic	Alger	Arenac	Dental
Thunder Bay Community Health	Atlanta Clinic	Atlanta	Montmorency	330E: Community Health Center
	Rogers City Clinic	Rogers City	Presque Isle	330E: Community Health Center
	Hillman Clinic	Hillman	Montmorency	330E: Community Health Center
	Onaway Clinic	Onaway	Presque Isle	330E: Community Health Center
UP Association of Rural Health Services, Inc.	West Mackinac Dental Center	Engadine	Mackinac	Dental
	Dickinson-Iron Dental Center	Crystal Falls	Iron	Dental
	Ewen Medical-Dental Center	Ewen	Ontonagon	330E: Community Health Center
	Northern Menominee Health Center	Spalding	Menominee	330E: Community Health Center
	Sawyer Dental Center	Gwinn	Marquette	Dental
	Northern Menominee Health Center South	Menominee	Menominee	330E: Community Health Center
Wellness Plan Health Centers	Gateway Medical Center	Detroit	Wayne	FQHC 'Look-Alike'
	East Area Medical Center	Detroit	Wayne	FQHC 'Look-Alike'
	Northwest Medical Center	Oak Park	Oakland	FQHC 'Look-Alike'
Western Wayne Community Health Center	Western Wayne Community Health Center	Inkster	Wayne	330E: Community Health Center
Source: Michigan Primary Care Association				

Number of Free Clinics in Michigan Counties, December 2009

As of December 2009, there were 75 free clinic sites in Michigan. These clinics varied in model, size, staffing approaches and hours of availability; but it is significant to note that Wayne and Kent counties had the most free clinics of any county in the state (with 17 and 6 respectively). Oakland had the next highest number at five.

FIGURE CM:87
Number of Free Clinics in Michigan Counties, December 2009

County	2009	County	2009	County	2009
Alcona	0	Gratiot	0	Misauakee	0
Alger	0	Hillsdale	1	Monroe	0
Allegan	1	Houghton	0	Montcalm	0
Alpena	1	Huron	1	Montmorency	0
Antrim	0	Ingham	3	Muskegon	0
Arenac	0	Ionia	0	Newaygo	0
Baraga	0	Iosco	0	Oakland	5
Barry	2	Iron	1	Oceana	0
Bay	1	Isabella	0	Ogemaw	0
Benzie	0	Jackson	1	Ontonagon	0
Berrien	0	Kalamazoo	1	Osceola	0
Branch	1	Kalkaska	0	Oscoda	0
Calhoun	2	Kent	6	Otsego	0
Cass	1	Keweenaw	0	Ottawa	2
Charlevoix	1	Lake	0	Presque Isle	0
Cheboygan	1	Lapeer	1	Roscommon	0
Chippewa	1	Leelanau	0	Saginaw	2
Clare	0	Lenawee	0	Sanilac	0
Clinton	0	Livingston	1	Schoolcraft	0
Crawford	1	Luce	1	Shiawassee	1
Delta	1	Mackinac	1	St Clair	1
Dickinson	1	Macomb	3	St Joseph	1
Eaton	0	Manistee	1	Tuscola	0
Emmet	1	Marquette	1	Van Buren	0
Genesee	1	Mason	0	Washtenaw	3
Gladwin	0	Mecosta	1	Wayne	17
Gogebic	0	Menominee	0	Wexford	1
Grand Traverse	1	Midland	0		
				Michigan Total	75

Sources: Blue Cross Blue Shield of Michigan and Free Clinics of Michigan

Number of Free Clinics in Michigan Counties, December 2009



Free Clinics in Michigan, December 2009

FIGURE CM:88

Free Clinics in Michigan, December 2009

City	County	Name of Clinic
Allegan	Allegan	Seeds of Grace Free Clinic
Alpena	Alpena	Free Clinic of Alpena
Delton	Barry	Faith Community Free Health Clinic
Hastings	Barry	Barry Community Free Clinic
Essexville	Bay	Helen M. Nickless Volunteer Clinic
Coldwater	Branch	Presbyterian Health Clinic of Branch County
Battle Creek	Calhoun	Nursing Clinic of Battle Creek
Marshall	Calhoun	Fountain Clinic
Dowagiac	Cass	Cass County Free Health Clinic
Boyne City	Charlevoix	Lakeshore Community Free Clinic
Cheboygan	Cheboygan	Northern Care Clinic
Sault Saint Marie	Chippewa	Community Health Access Coalition
Grayling	Crawford	Ausable Free Clinic
Iron Mountain	Dickinson	Medical Care Access Coalition
Petoskey	Emmet	Community Free Clinic
Flint	Genesee	Genesee County Free Medical Clinic
Traverse City	Grand Traverse	Traverse Health Clinic
Traverse City	Grand Traverse	Traverse Health Clinic and Coalition
Hillsdale	Hillsdale	St. Peter's Free Clinic
Lansing	Ingham	Care Free Medical
Mason	Ingham	Care Free Medical
Jackson	Jackson	St. Luke's Clinic
Jackson	Jackson	Dove Medical Clinic
Kalamazoo	Kalamazoo	Free Health Clinic of Kalamazoo
Grand Rapids	Kent	Health Intervention Services
Grand Rapids	Kent	Baxter Holistic Health Clinic
Grand Rapids	Kent	Oasis of Hope Center
Grand Rapids	Kent	Catherine's Care Center
Grand Rapids	Kent	Project Access
Wyoming	Kent	Wesley Health
Lapeer	Lapeer	Loving Hands Health Clinic
Adrian	Lenawee	Community Action Agency Clinic
Pinckney	Livingston	Faith Medical Clinic
Clinton Twshp	Macomb	MCG Medical Outreach Clinic
Mount Clemens	Macomb	Neighbors Caring for Neighbors

City	County	Name of Clinic
Washington	Macomb	Samaritan House
Manistee	Manistee	Manistee Area Community Clinic
Marquette	Marquette	The Medical Care Access Coalition Volunteer Clinic
Big Rapids	Mecosta	Hope House Free Medical Clinic
Oak Park	Oakland	MAPI Charitable Clinic
Pontiac	Oakland	Gary Burnstein Community Health Clinic
Pontiac	Oakland	Mercy Place Clinic
Pontiac	Oakland	Oakland County Children & Clinics
Pontiac	Oakland	POH Children's Clinic
Holland	Ottawa	Holland Free Clinic
Zeeland	Ottawa	City on a Hill Ministries Health Clinic
Saginaw	Saginaw	Healthy Futures
Saginaw	Saginaw	Cathedral Mental Health Care
Owosso	Shiawassee	Redeemer Lutheran Church Free Medical Clinic
Port Huron	St. Clair	Peoples Clinic for Better Health
Three Rivers	St. Joseph	Riverside Health Clinic
Chelsea	Washtenaw	Hope Clinic of Chelsea
Ypsilanti	Washtenaw	Home Medical Clinic
Brownstown	Wayne	Wyandotte Clinic for the Working Uninsured
Detroit	Wayne	Covenant Community Care
Detroit	Wayne	Malta Medical Mission
Detroit	Wayne	Cabrini Clinic
Detroit	Wayne	Joy-Southfield Health Clinic
Detroit	Wayne	The HUDA Clinic
Detroit	Wayne	Mercy Primary Care Center
Detroit	Wayne	St. Vincent DePaul Center
Detroit	Wayne	St. John Community Health
Detroit	Wayne	Cass Community United Methodist Clinic
Detroit	Wayne	Latino Family Services Clinic
Detroit	Wayne	The Dr. Albert B. Cleage, Sr. Memorial Health Center
Taylor	Wayne	MAPI Free Clinic
Wayne	Wayne	Wayne Medical Clinic
Cadillac	Wexford	Cadillac Community Health Clinic

Sources: Blue Cross Blue Shield of Michigan and Free Clinics of Michigan

State Comparisons: Number of School-Based Health Centers, School Year 2007/2008

Nationally, the average number of school based health centers per 10,000 children in the 2007/08 school year was 35.7. With 215 school based health centers (SBHCs) per 10,000 school-aged children, New Mexico had the highest ratio of school-based health centers to school age children in the nation. Georgia ranked the lowest, with fewer than two centers per 10,000 children.

Michigan ranked 18th highest, with nearly 50 SBHCs per 10,000 children and a total of 90 centers across the state.

FIGURE CM:89

State Comparisons: Number of School-Based Health Centers, School Year 2007/2008

Ranking 1 = high, 51 = low

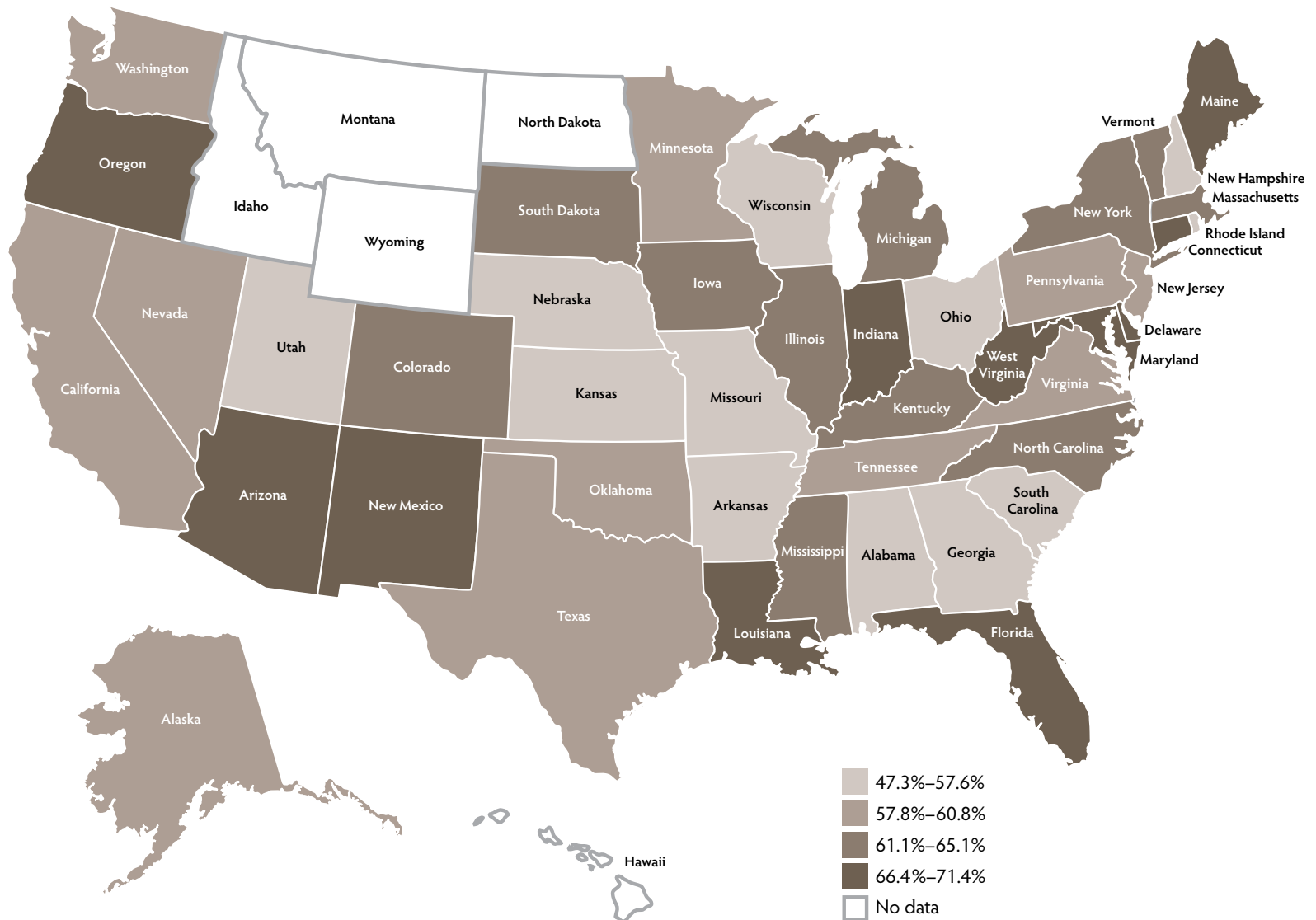
Rank	State	No. of SBHCs per 10,000 school age children, 6 to 18
1	New Mexico	215.3
2	Delaware	191.8
3	West Virginia	176.7
4	Connecticut	127.6
5	Maine	123.2
6	Florida	81.6
7	Oregon	80.4
8	Louisiana	79.3
9	Indiana	75.0
10	Maryland	72.2
11	District of Columbia	67.6
12	Arizona	66.7
13	New York	62.9
14	Mississippi	55.9
15	Massachusetts	54.1
16	Vermont	53.8
17	Colorado	53.1
18	Michigan	49.7
19	South Dakota	41.1
20	Iowa	31.4
21	North Carolina	30.1
22	Kentucky	27.9
23	Illinois	27.2
24	New Jersey	25.8
25	California	23.4
26	Alaska	21.7
27	Tennessee	20.1
28	Minnesota	18.9
29	Washington	17.5
30	Oklahoma	16.7
31	Texas	15.1
32	Virginia	14.1
33	Pennsylvania	14.0
34	Nevada	13.2
35	Rhode Island	11.8
36	Ohio	10.0
37	South Carolina	9.0
38	Utah	8.9
39	Wisconsin	8.4
40	Arkansas	7.8
41	Alabama	6.1
42	New Hampshire	4.3
43	Kansas	4.0
44	Nebraska	3.1
45	Missouri	2.9
46	Georgia	1.7
47	Hawaii	No Data
48	Idaho	No Data
49	Montana	No Data
50	North Dakota	No Data
51	Wyoming	No Data
	United States	35.7

Source:

School-aged children data: CPS (SHADAC-enhanced)

Health center data: National Assembly on School-Based Health Care

State Comparisons: Number of School-Based Health Centers, School Year 2007/2008





Methodology—Uncompensated Care and the Safety Net

The data presented in this chapter represent the most recent data available at the time the report was compiled.

Data on growth in charges for hospital uncompensated care were obtained from Blue Cross Blue Shield of Michigan (BCBSM) through a special data request. Hospital uncompensated care is the sum of charity care and bad debt from audited financial statements submitted to BCBSM. Dollar amounts are calculated from charges, not costs, and are only reported for “peer group 1-4” hospitals, which are large or urban hospitals. The fiscal year 2004 data includes 88 hospitals; 91 are included in 2007; and 90 are included in 2008. To maintain anonymity among hospitals, the data shown here have been pooled by county, or for counties with few hospitals, across multiple counties in the same or similar geographic region.

Number of school-based health centers per 10,000 school-aged children was calculated using health center data from the National Assembly on School-Based Health Care as the numerator and population data for those ages 6 to 18 from SHADAC-enhanced CPS data in the denominator.

SECTION VI • HEALTH REFORM:

Data Relevant to the Patient Protection and Affordable Care Act of 2010

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Introduction

The Patient Protection and Affordable Care Act (PPACA, or the Act) will affect the picture of coverage in Michigan in many different ways.

While it is relatively easy to project the impact of some components of the Act (e.g., the number who will be eligible for Medicaid after 2014), it is more difficult to project many other elements (e.g., how many of the eligible will actually enroll in Medicaid). In this chapter, we try to give a picture of the impact of the PPACA, had it been fully implemented and in effect in 2007/2008⁸⁰ (the period for which we have the most recent, comprehensive data on health coverage in the state).

It is important to understand that the regulations for most of the provisions of the Act have yet to be written, and Michigan, like other states, will have choices to make about the way various components of the Act are implemented. We made a number of assumptions about those choices to derive the estimates presented here. These estimates are intended to be illustrative of what could happen under the PPACA, and give some dimension to the scope of coverage in the Act and impacts on the most affected groups.

⁸⁰ Two-year pooled data are used to ensure adequate sample size to provide more precise estimates of the population.



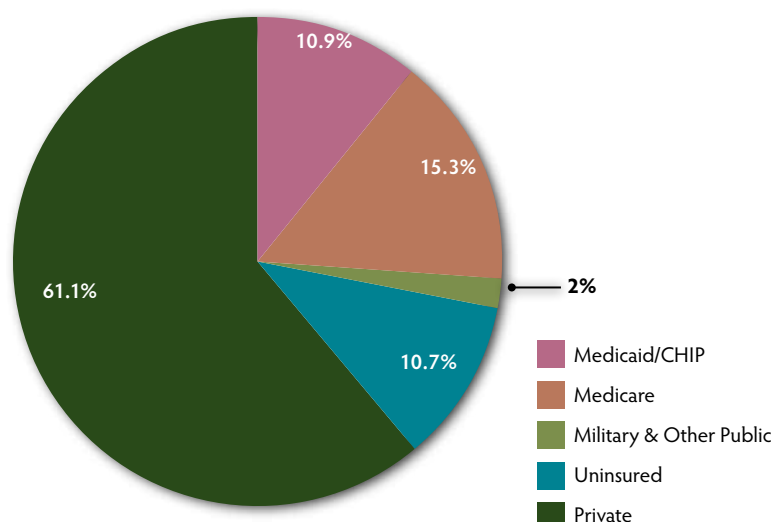
An Overall Picture of Coverage

The Patient Protection and Affordable Care Act is intended to significantly reduce the number of uninsured individuals in the country. If the Act were fully implemented in 2014, and all those who were eligible for coverage and/or mandated to purchase coverage enrolled in or purchased that coverage, there would be considerable growth in both private and public sector coverage in the state. That is, while 28 percent of those in Michigan had public coverage in 2007/2008, under health reform, 33 percent would be eligible (and if all enrolled, covered). And while 61 percent of the state's population had private coverage in 2007/2008,⁸¹ post-reform that number could grow to 65 percent assuming all who are required to purchase coverage did so (and those who currently have employer based group coverage but would be Medicaid eligible continue to retain employer based coverage). Those who are currently covered by individually-purchased private insurance and meet income eligibility criteria for Medicaid under reform (i.e., have incomes less than 133 percent of poverty) make up one percent of Michigan's population, but it is unclear whether they would choose to enroll for Medicaid or retain their private coverage.

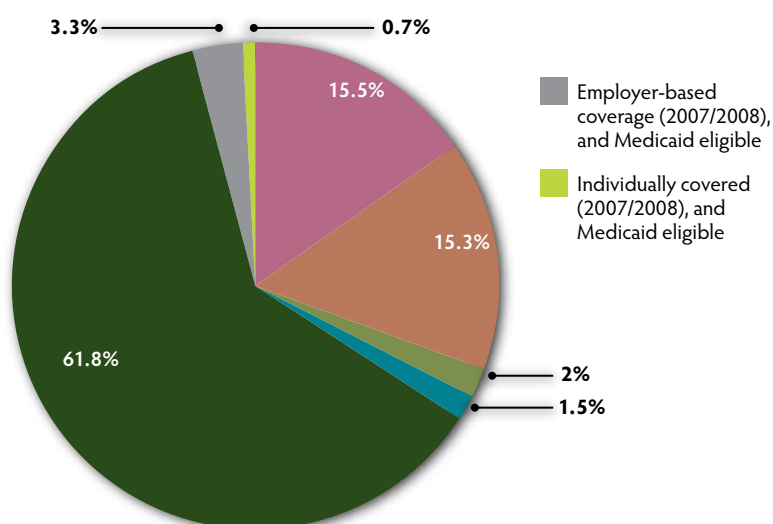
Health reform will provide coverage or subsidies to purchase coverage for just over 77 percent (a vast majority) of those who are currently uninsured. Those who would remain uninsured post-reform include those who have incomes up to 400% of the federal poverty level (FPL), but who would be ineligible for either Medicaid or subsidies—principally undocumented immigrants—and those who are not eligible for subsidies but also not subject to the mandate due to premiums that are relatively high compared to their incomes.

⁸¹ Private coverage figures in this chapter have been adjusted to provide unduplicated counts of the privately and publicly insured. For this reason, figures here differ from the estimates provided in the Privately Insured chapter of *Cover Michigan*.

FIGURE CM:90
Percent of Population—Coverage Pre-Reform



Percent of Population—Estimates of Coverage Post Reform



Type of Coverage 2007/2008	Pre-reform		Post-reform		Change	
	# of people	% of Total Population	# of people	% of Total Population	#	%
Public	2,781,000	28.2	3,232,905	32.8	451,905	16.2
Medicaid/CHIP	1,073,190	10.9	1,525,095	15.5	451,905	42.1
Total other public (Medicare/Military/other public)	1,707,810	17.3	1,707,810	17.3	0.0	0.0
Private	6,021,256	61.1	6,091,629	61.8	70,373	1.2
Employer-based coverage (2007/2008), and Medicaid eligible	—	—	321,876	3.3	321,876	—
Individually covered (2007/2008), and Medicaid eligible	—	—	66,653	0.7	66,653	—
Uninsured	1,055,000	10.7	144,193	1.5	(910,807)	-86.3
Total Population	9,857,256	100.0	9,857,256	100.0		

Source: CPS (SHADAC-enhanced) with adjustments. See methodology for details.

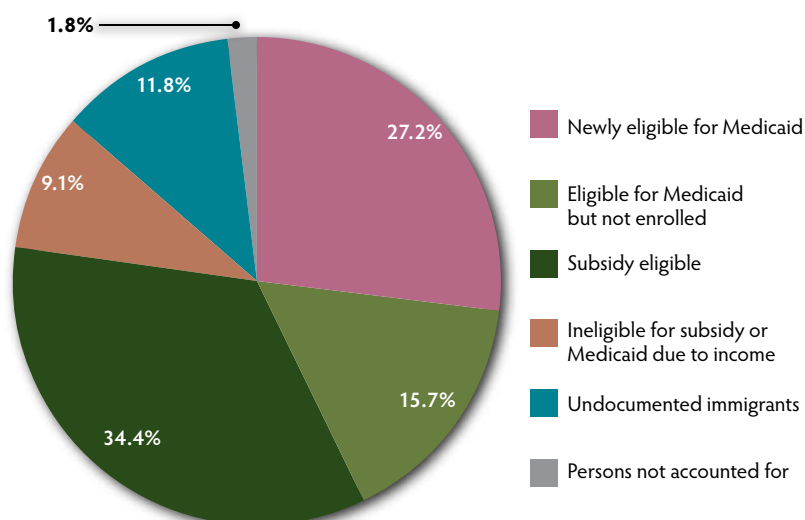
More Detail on What the State's Health Coverage Would Look Like if Health Reform Were Already in Effect

The Patient Protection and Affordable Care Act requires states to extend Medicaid eligibility to all non-elderly individuals (citizens and legal immigrants who have been in the U.S. for at least five years) with incomes up to 133 percent of the federal poverty level. If health reform had been in effect, twenty seven percent of those uninsured in 2007/2008 would have been newly eligible for Medicaid. It is important to note that a meaningful percentage of the uninsured were already eligible for Medicaid or MICHild prior to health reform but were not enrolled. For example, we estimate that 16 percent of the uninsured (about 165,150 people) in 2007/2008 were eligible for Medicaid but not enrolled. Our estimates assume that both groups will enroll in Medicaid with health reform, i.e. those who have been eligible in the past but not enrolled, and the newly eligible. Our assumption is based on the fact that health reform includes an individual mandate and we are presuming that there will be an increase in enrollment outreach efforts under reform. If these assumptions do not come to pass, however, the number enrolled could be lower than our estimates, and the numbers of uninsured remain higher. Of note, for those who are already eligible for Medicaid coverage (regardless of enrollment status), the federal government will pay the regular Medicaid match rate to states. For those who are newly eligible under expansion rules (and were ineligible for Medicaid on December 1, 2009), the federal government will finance their coverage at 100 percent in 2014 through 2016, 95 percent in 2017, 94 percent in 2018, 93 percent in 2019, and 90 percent in 2020 and for subsequent years.

Thirty-four percent of those who were uninsured in 2007/2008 would not be eligible for Medicaid but would be eligible for a premium subsidy under health reform (if they purchase coverage through the health insurance exchanges). Finally, nine percent of the uninsured—approximately 96,000 people in Michigan—would have been ineligible for both Medicaid and a subsidy under health reform because their incomes were higher than 400 percent of poverty. These individuals would still be subject to the mandate to purchase health coverage and could purchase such coverage from the insurance exchange.

FIGURE CM:91

Projected coverage changes among the uninsured assuming Health Reform took effect in 2007/2008



Source(s): CPS (SHADAC-enhanced) with adjustments, and the Federation for American Immigration Reform (FAIR). See methodology for details.

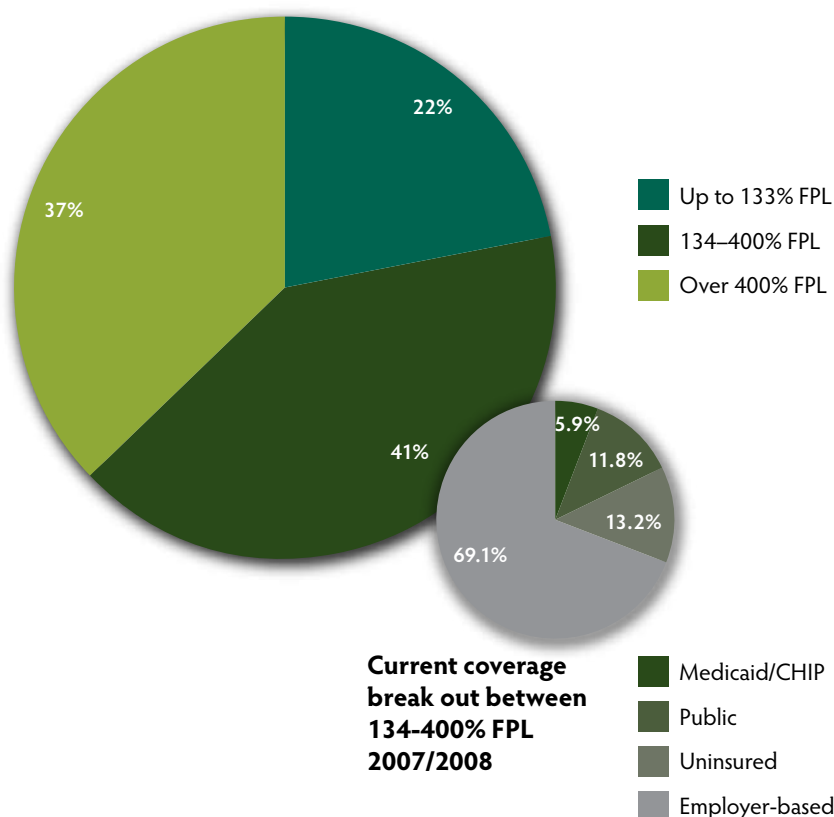
Subsidy eligibility among the non-elderly population

In 2007/2008, 41 percent of the state's non-elderly population met the income standard for a premium subsidy to purchase coverage through the health insurance exchanges. However, eligibility for a subsidy also takes into account whether or not an individual already has private coverage. Of those that met the income standard for subsidy eligibility in 2007/2008:

- 13.2 percent were uninsured and 5.9 percent purchased coverage through the individual market. Both of those populations would be eligible to receive a subsidy if they purchased insurance coverage through a health insurance exchange
- About 12 percent of this income group had Medicaid coverage. Some of those currently covered by Medicaid may become eligible for exchange-based subsidies in 2014 depending on how the state maintenance of effort requirements are structured in final regulations
- 69 percent of those in this income group had employer-based insurance coverage in 2007/2008. This population would not be eligible for subsidies to purchase coverage through the exchanges unless their employer-based coverage was deemed inadequate (less than the essential benefits package) or if the employee's share of the premium was greater than 9.5 percent of income.

FIGURE CM:92

Total Michigan non-elderly population by income 2007/2008



Michigan non-elderly population by income, 2007/2008

Income Group	#	%
Up to 133% FPL	1,913,300	22
134-400% FPL	3,485,467	41
Over 400% FPL	3,166,033	37
Total	8,564,800	100

Coverage of the non-elderly between 134 to 400% of FPL, 2007/2008

Type of Coverage	#	%
Individual	204,717	5.9
Public ⁸²	412,117	11.8
Uninsured	458,849	13.2
Employer-based	2,409,784	69.1
Total	3,485,467	100.0

Source(s): U.S. Census Bureau, Current Population Survey (State Health Access Data Assistance Center enhanced) with adjustments and Kaiser Family Foundation. See *Cover Michigan 2010* methodology for details

⁸² Public coverage at this income level is mostly made up of children (ages 1-19) covered by Medicaid between 133 and 150% of FPL, infants and pregnant women covered by Medicaid between 133 and 185% of FPL, and all children covered by CHIP with incomes between 133 and 200% of FPL. The remainder of this population have Medicaid for a portion of the year if they temporarily have low incomes.

Coverage Impacts in the Individual Market and For Small Businesses⁸³

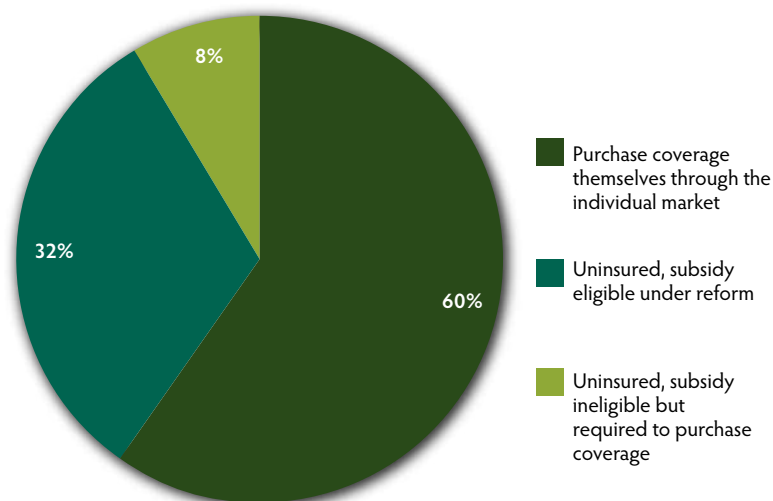
Under the Patient Protection and Affordable Care Act, two types of insurance exchanges will be established in 2014: one for individuals to purchase coverage (the American Health Benefit Exchange) and an exchange for businesses with up to 100 employees (the Small Business Health Options Program- SHOP). These two exchange types can be administered as one at state option. Before 2016, states have the option of limiting the SHOP exchanges to businesses with 50 or fewer employees, and, beginning in 2017, states can allow businesses with more than 100 employees to purchase coverage from one of these exchanges.

In 2008, about 21.5 percent of Michigan's private businesses were large firms employing almost 2.2 million employees. In that same year, small businesses (i.e. those with 100 or fewer employees) made up 78.5 percent of Michigan's private businesses and about 37 percent of all private sector employees. Of those small businesses, 54.7 percent of them did not offer health insurance in 2008. 33.2 percent of Michigan residents in 2008 worked for small businesses that did not offer health insurance.

In 2007/2008, there were about 684,900 individuals who individually purchased health insurance coverage in Michigan. In addition, as noted earlier, there were 363,020 in 2007/2008 who were uninsured but would become subsidy eligible under health reform to purchase coverage in the exchange and another 95,882 who would not be subsidy eligible but would be mandated to purchase coverage. So, it is likely that the individual insurance exchange could include a total of 1,143,802 individuals had it been in place in 2007/2008.

FIGURE CM:93

Insurance Exchange in the Individual Market Michigan, 2008



	#	%
Purchase coverage themselves through the individual market	684,900	59.9%
Uninsured, subsidy eligible under reform	363,020	31.7%
Uninsured, subsidy ineligible but required to purchase coverage	95,882	8.4%
Total population in the individual market	1,143,802	100.0%

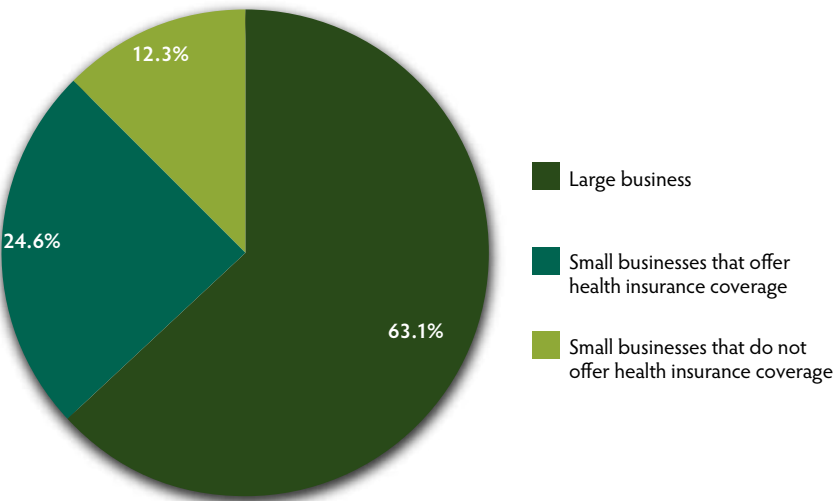
Source: U.S. Census Bureau, Current Population Survey (State Health Access Data Assistance Center enhanced) with adjustments. See *Cover Michigan 2010* methodology for details.

⁸³ The exchanges under PPACA include small businesses with 100 or fewer workers; however, the Medical Expenditure Panel Survey (MEPS) data defines small businesses as establishments with 99 or fewer workers. This section uses the MEPS data as a proxy for all small business with 100 or fewer workers.

Coverage Impacts in the Individual Market and For Small Businesses (continued)

Many of those individuals who work in small businesses are likely to get coverage in the future through the SHOP exchange rather than as they do today. In 2008, there were over 1.2 million people in Michigan who worked in small firms. Approximately 850,000 of these individuals worked for employers who offered health insurance while another 423,000 or so worked for employers that did not offer health insurance. Some of the 423,000 who worked for small employers who did not offer health insurance may well have purchased health insurance coverage on their own through the individual market .

FIGURE CM:94
Distribution of employees by employer size in the private sector in Michigan, 2008



	# of employees	% of all employees
Large businesses	2,177,358	63.1
Small businesses that offer health insurance coverage	849,553	24.6
Small businesses that do not offer health insurance coverage	423,062	12.3
Total among all private sector employers	3,449,973	100.0

It is very difficult to predict how many total individuals would be enrolled in the exchanges post reform, since we don't know how many who work in small businesses have purchased health insurance coverage themselves in the individual market. However, it is probably fair to say that the population enrolled in the exchanges will likely be more than 1.14 million (the total in the individual market today plus those individuals who will be required to purchase coverage in the future) but less than 2.4 million (the total amount of those in the potential individual market and those who work for small businesses). The number will likely be less than 2.4 million because some of those who work for small businesses today are already counted in the individual market numbers.

Final Note on Small Businesses

For the next four years, until the SHOP exchanges are set up, businesses with 10 or fewer full-time-equivalent employees earning less than \$25,000 a year on average will be eligible for a tax credit of 35 percent of health insurance costs.⁸⁴ Companies with between 11 and 25 workers and an average wage of up to \$50,000 are eligible for partial credits. 58 percent of all private businesses in Michigan (about 119,375 in 2008) had fewer than 10 employees. With about 428,671 employees, these businesses employed about 12.4 percent of Michigan's private sector.

Wage data for these employers are not generally available. However, if all businesses in these size categories in Michigan were wage eligible, a total of 144,401 businesses could be eligible for the tax credit. These businesses employ approximately 766,538 employees.

FIGURE CM:95

Private sector establishments and employees by firm size in Michigan, 2008

	Small businesses			Large businesses	Total
	Less than 10 employees	10-24 employees	25-99 employees	100 or more employees	
Number of private businesses	119,375	25,026	17,030	44,247	205,678
Businesses as a % of all businesses	58.0	12.2	8.3	21.5	100.0
Total number of employees	428,671	337,867	506,077	2,177,358	3,449,973
Employees as a % of all employees	12.4	9.8	14.7	63.1	100.0

Source: Medical Expenditure Panel Survey (MEPS).

⁸⁴ MEPS provides data for less than 10 employees and between 10 to 24 employees. Although the subsidies that will be available for some small businesses until SHOP exchanges are set up apply to establishments with 10 or fewer employees and 11 to 25 employees, MEPS data is used here to estimate the number of businesses and employees who will be impacted by these subsidies.

Other Estimates of Medicaid Coverage in Health Reform:

In May 2010, the Kaiser Commission on Medicaid and the Uninsured released a report detailing national and state-level projections of Medicaid coverage and spending under health reform. The Commission projects the increases in Medicaid coverage and the associated costs to states compared to Medicaid coverage absent health reform. Similar to CHRT findings detailed earlier in this report, the Kaiser analysis found that Medicaid expansions will likely significantly increase coverage and reduce the number of uninsured in the U.S. Kaiser's numbers differ from CHRT's, however, principally because their analysis projected what may happen in 2019, whereas our numbers consider what might have happened in 2007/2008 had health reform been in place at that time. The bottom line projection for Michigan Medicaid expansion from Kaiser was that

- In 2019, Michigan will have 589,965 new Medicaid enrollees.
- 73 percent of this population, or 430,744 of these individuals, were previously uninsured before health reform took effect and newly enrolled in Medicaid coverage.
- Between 2014 and 2019, Medicaid expansion will increase Medicaid enrollment by 30.2 percent.
- The increase in Medicaid coverage will lead to a 50.6 percent reduction in uninsured among adults with incomes up to 133 percent FPL by 2019.

For more details and to view the full report, visit:

<http://www.kff.org/healthreform/8076.cfm>



Methodology—The Impact of Health Reform on Coverage in Michigan

The purpose of this chapter is to give a picture of the impact of the Patient Protection and Affordable Care Act (PPACA), had it been fully implemented and in effect in 2007/2008 (the period for which we have the most recent, comprehensive data on health coverage in the state). To accomplish that we used 2007/2008 pooled data to determine all coverage estimates.

All data in this chapter is Michigan specific data. Estimates of coverage in this chapter are based on 2007/2008 pooled data from the State Health Access Data Assistance Center (SHADAC). SHADAC uses the U.S. Census Bureau's Current Population Survey Annual Social and Economic Supplement (CPS) estimates of health insurance coverage to compile data for all states. This report and chapter uses SHADAC-enhanced CPS health insurance estimates to report the number and percentage coverage estimates of the Michigan population. SHADAC-enhanced estimates are created from CPS data that are reweighted and adjusted by SHADAC to account for historical changes in the survey's methodology to provide a more accurate assessment of coverage estimates over time. Due to the adjustments to the CPS data, the uninsured estimates in this report do not correspond completely to estimates published by the Census Bureau and generally result in lower estimates of uninsured. For more information on SHADAC and their data center, visit: <http://www.shadac.org/datacenter>.

An Overall Picture of Coverage includes estimates based on 2007/2008 pooled SHADAC-enhanced data from the previous Cover Michigan chapters, with adjustments made by CHRT to account for double counting between Medicare and Medicaid beneficiaries, as well as between those who receive both public and private coverage. For this reason, figures in this chapter may differ from estimates in the Publicly Insured and Privately Insured chapters. All uninsured data include and account for undocumented immigrants, as estimated by the Federation for American Immigration Reform (FAIR) at 125,000 persons in 2008. Because this population will not be eligible for Medicaid or subsidies under health reform, CHRT assumes that they will remain uninsured. Included in coverage estimates for the graph and table, "Percent of Population—Estimates of Coverage Post Reform," are:

- "Public" equals 2007/2008 public estimates and the number of all non-elderly uninsured persons up to 133 percent of Federal Poverty Level (FPL).
- "Private" is the sum of 2007/2008 private estimates (adjusted by CHRT for double counting), the number of subsidy eligible persons (between 133 and 400 percent of FPL) and the subsidy and Medicaid ineligible uninsured (uninsured with incomes over 400 percent of FPL).
- The "Uninsured" is the remaining population that is not included in private or public coverage, assuming that all those who are eligible for coverage or subsidies and are mandated to purchase health insurance enroll in coverage.
- Estimates for children between 19 and 26 that can remain on their parents' insurance coverage were not included or accounted for in these data adjustments because there were no reliable estimates for this population

The sections—*More Detail on What the State's Health Coverage Would Look Like if Health Reform Were Already in Effect*, *Subsidy Eligibility Among the non-Elderly Population*, and *Insurance Exchange in the Individual Market in Michigan, 2008* in the section **Coverage Impacts in the Individual Market and For Small Businesses** include estimates of the non-elderly population based on 2007/2008 pooled SHADAC-enhanced data from previous Cover Michigan chapters. All data include and account for undocumented immigrants, as estimates by the Federation for American Immigration Reform (FAIR) at 125,000 persons in 2008. CHRT used Kaiser State Health Facts data to estimate the number of Medicaid eligible, subsidy eligible, and Medicaid and subsidy ineligible persons if health reform were to have taken effect in 2007/2008. Adjustments were made to this data to keep consistent with SHADAC-enhanced CPS figures used throughout the Cover Michigan report.

For more information on the Kaiser Family Foundation's State Health Facts, please visit: <http://statehealthfacts.org>.

The remainder of the section, *Coverage Impacts in the Individual Market and for Small Businesses*, exclusively includes 2008 data from the Agency for Healthcare Research and Quality's (AHRQ's) Medical Expenditure Panel Survey Insurance Component (MEPS-IC), which is an annual survey of employer health insurance offerings.

For complete methodological and data collection information, as well as to view additional MEPS data, please visit: <http://www.meps.ahrq.gov>.

Glossary

Children's Health Insurance Program (CHIP) — Enacted in 1997, CHIP is a federal-state program that provides health care coverage for uninsured low-income children who are not eligible for Medicaid. In Michigan, CHIP funding is used for the MICHild program and has been used for the Medicaid-expansion program *Healthy Kids*.

Copayment — A flat dollar amount for each service that an insured individual pays at the time of receiving a covered health care service from a provider.

Coinsurance — A percentage amount applied to each service that an individual pays at the time of receiving a covered health care service from a provider.

Cost Sharing — A term encompassing all types of point of service payments required of individuals with health coverage, including deductibles, coinsurance, and copayments.

Deductible — The amount an insured individual must pay, up to a specified dollar amount, before benefits are paid by the health plan.

Dual Eligible — Persons who are entitled to Medicare (Part A and/or Part B) and who are also eligible for Medicaid.

Federal Poverty Level — The federal government's working definition of poverty that is used as the reference point to determine the number of people with incomes below poverty and the income standard for eligibility for public programs. The federal government uses two different definitions of poverty. The U.S. Census poverty threshold is used as the basis for official poverty population statistics, such as the percentage of people living in poverty. The poverty guidelines, released by the U.S. Department of Health and Human Services (HHS), are used to determine eligibility for public programs and subsidies. For 2008, the Census weighted average poverty threshold for a family of four was \$22,025 and the HHS poverty guideline was \$21,200.

Federally Qualified Health Centers (FQHC) — Public and private non-profit health care organizations that provide low-cost health care and meet certain criteria under the Medicare and Medicaid programs and receive funds under the Health Center Program (Section 330 of the Public Health Service Act).

FQHC Look-Alike — Health centers that have been identified by HRSA and certified by the Centers for Medicare and Medicaid Services as meeting the definition of "health center" under Section 330 of the PHS Act, although they do not receive grant funding under Section 330.

Free Clinics — Organizations that offer community healthcare free or on a very low-cost basis. Care is generally provided in these clinics to persons who have lower or limited income and no health insurance, including persons who are not eligible for Medicaid or Medicare.

Medicaid — A joint federal and state program, administered by states, that provides health insurance coverage to certain categories of low-income individuals, including children, pregnant women, parents of eligible children, and people with disabilities.

Medicare — The federal health insurance program for people 65 years of age or older, certain younger people with disabilities, and people with end-stage renal disease (permanent kidney failure with dialysis or a transplant, sometimes called ESRD).

Privately Insured — Those insured by any form of health insurance not funded by the government. Private health insurance plans may be purchased on an individual or group basis.

Premiums — The amount paid for health insurance, most often on a monthly basis. The cost of the premium may be shared between individuals and employers or government purchasers.

Publicly Insured — Those insured by plans administered and funded by federal and/or state governments, e.g. Medicare, Medicaid, the State Children's Health Insurance Program, and the military.

Safety Net — Health care providers who deliver health care services to patients regardless of their ability to pay. The safety net may include public hospital systems, local health departments, free clinics, community health centers (such as federally qualified health centers/look-alikes, school-based health clinics, migrant health centers), and other providers who serve a disproportionate share of uninsured and low-income patients.

School Based Health Centers — A health center located on school property that provides on-site primary medical and mental health services to school-aged children and adolescents

Uncompensated Care — In this report, combined hospital bad debts and charitable care as defined by Blue Cross and Blue Shield of Michigan.



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