

ISPOR ABSTRACT – Health Care Use & Policy Studies (HP) – equity, access, quality of care (EAQ)

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IMPACT OF MEDICAID MANAGED CARE EXPANSION ON ACCESS TO PROVIDERS IN MISSISSIPPI

OBJECTIVE

The objective of this study was to evaluate access to healthcare providers before and after a significant increase in managed care (MC) enrollment in the Mississippi Medicaid program.

METHODS

A retrospective analysis was conducted using Mississippi Medicaid fee-for-service (FFS) and MC pharmacy claims data in the period one year prior to (pre-period) and one year after (post-period) the December 2012 Medicaid MC expansion. Beneficiaries had to be enrolled for at least one month during the study period to be included in the analysis. Providers were considered to be participating in a plan (FFS or MC) during each observation period if at least one pharmacy claim bearing his/her Medicaid provider identity number was filed during the period. Distance from beneficiary to provider was calculated by computing geocodes for their respective zip-codes using the PROC GEOCODE procedure in SAS.

RESULTS

Overall, the average distance beneficiaries had to travel to see the three closest primary care providers (PCPs) or specialists who accept either FFS or Medicaid MC plans did not change significantly from the pre- to the post-period (10.2 miles for PCPs and 7.7 miles for specialist). During the post-period in rural areas, beneficiaries in MC had slightly lower distances for PCPs (10.6 miles for MC and 10.9 for FFS) and for specialist (8.6 miles for MC and 8.9 miles for FFS). Overall, the ratio of the number of enrollees per PCP significantly decreased for FFS ($p < 0.01$) and significantly increased for MC plan A and B ($p < 0.01$). The number of enrollees per specialist did not significantly change for FFS ($p = 0.059$) and significantly increased for MC plan A and B ($p < 0.01$) from the pre- to the post-period.

CONCLUSIONS

Expansion of Medicaid MC has not adversely affected physician participation in Medicaid and in rural areas has slightly improved access to PCPs and specialists.

Statement to be included on poster

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