Rhode Island
Can Afford
Health Care for All

Appendix III: Detailed Tables

Part 3 of a Three-Part Report

Appendix III: RI Health Spending Without and With Reform - Detailed Tables

Section 1: Projected Health Expenditures for Rhode Island Residents for 2002

This section portrays the projected cost of health care for residents of Rhode Island in the baseline year (1999) before any reforms have been implemented.

Expenditures assuming no reform	Amount (\$Millions)	Share of Resident Spending
1) Hospital Care	\$2,172	30.1%
2) Physician & Other Professional Services	\$1,572	21.8%
3) Dental Services	\$314	4.4%
4) Home Health Care	\$169	2.3%
5) Prescription Drugs & Medical non-durables	\$919	12.7%
a) Prescription Drugs	\$795	11.0%
6) Vision Products and Other Medical Durables	\$52	0.7%
7) Nursing Home Care	\$586	8.1%
8) Other Personal Health Care	\$568	7.9%
9) Personal Health Care Total	\$6,345	87.9%
10) Program Administration and Net Cost of Private Health Insurance	\$472	6.5%
11) Government Public Health Activities	\$259	3.6%
12) Research	\$142	2.0%
13) Construction (not included in total to avoid double counting)	\$100	1.4%
14) Total	\$7,217	100.0%

Section 2: Sources of Projected Rhode Island Beneficiary Health Expenditures (for Residents and for Non-resident Workers)

Expenditures assuming no reform

In this section, we divide the total health expenditures for residents between public and private sources. We also add health expenditures for non-residents working in the state.

	Amount	Share of Beneficiary	Share of Resident
1) Public	(\$Millions)	,	Spending
A) Medicare (less privately paid premiums)	\$1,246	16.7%	17.3%
B) Medicaid	\$1,199	16.1%	16.6%
C) Other government expenditures	\$1,063	14.2%	14.7%
D) Total public	\$3,508	46.9%	48.6%

2) Private			
A) Private health insurance & other private health spending	\$2,462	33.0%	34.1%
B) Out of pocket expenditures	\$867	11.6%	12.0%
C) Workers Compensation privately funded medical portion	\$284	3.8%	3.9%
D) Medicare privately paid premiums (subtracted from 1a)	\$105	1.4%	1.5%
E) Payments for health insurance for non-residents working in-state	\$255	3.4%	3.5%
F) Total private	\$3,973	53.2%	55.0%
3) Total public and private (including out of state worker health expenditures)	\$7,472	100.1%	103.6%

Section 3: Net Cost of Universal Coverage

In this section, the additional costs incurred for universal coverage, and the savings resulting from universal coverage and delivery system reforms are itemized.

	Single Payer
4) Additional costs associated with universal coverage (\$ millions)	Without Cost Sharing
A) Cost of increased utilization due to universal access to comprehensive benefits	<u> </u>
i) Bringing currently uninsured to average health service use rates	\$128
ii) Additional utilization resulting from reduction or elimination of patient cost sharing	\$818
a) Increased use of hospital services	\$111
b) Increased use of physicians' and other professionals' services	\$206
c) Increased prescription drug utilization	\$259
d) Increased use of nursing home services	\$0
e) Increased use of home care services	\$25
f) Increased use of dental care	\$157
g) Increased use of medical durables	\$30
h) Increased use of other personal health care	\$29
iii) Total increased spending (sum of i and ii)	\$946
B) Cost of added use of assistive technology, rehab services, and attendant care	\$44
C) Cost of increased coordination, health data collection, and analysis services	\$37
D) Total additional costs for Rhode Island beneficiaries (Aiii + B + C)	\$1,027
E) Subtotal (2 F + 4D health spending requiring public or private funding)	\$4,999
F) Total expenditures for full coverage for all benefits (1E + 4D)	\$8,507
G) Increase over current expenditures for Rhode Island residents (Section 1, line 15)	17.9%
H) Increase over current expenditures for Rhode Island beneficiaries (Section 2, line 3)	13.9%

	Single Payer
	Without Cost
5) Savings associated with universal coverage and delivery system reforms (\$ millions)	Sharing
A) Savings due to reduction in workers comp medical payments	\$14
B) Savings from more appropriate treatment for ambulatory sensitive conditions	\$26
C) Savings from cost controls	
i) Savings on hospital/physician use: utiliz. mgmt, practice patterns, timely care	\$184
ii) Savings from capital planning and cap on capital spending	\$46
D) Savings from bulk purchasing discounts/ price negotiations for medical products	
i) Prescription drug savings from payment for added volume at marginal cost	\$251
ii) Durable medical equipment savings	\$21
E) Savings due to simplification of administration	
i) Private health insurance overhead savings	\$314
ii) Hospital administrative savings	\$273
iii) Physicians administrative savings	\$162
iv) Nursing home administrative savings	\$12
v) Dental care administrative savings	\$4
F) Total savings	\$1,306

6) Total cost of health care for Rhode Island beneficiaries after savings	\$7,201
A) Increase (decrease) over projected RI resident spending without reform	(\$16)
B) Percent Increase (decrease) over projected RI resident spending without reform	
C) Increase (decrease) over projected RI beneficiary spending without reform	(\$271)
D) Percent Increase (decrease) over projected RI beneficiary spending without reform	-3.6%

Section 4: Financing Universal Coverage	
This section shows potential funding sources for universal coverage alternatives.	
7) Out-of-state funding that can finance part of the cost of reform (\$ millions)	Single Payer Without Cost Sharing
A) Federal share of increased spending resulting from Medicaid expansion	\$0
B) Federal funds generated by higher Medicaid use	\$64
C) Federal funds generated by higher Medicare use	\$145
D) Estimated employer contributions for residents working out-of-state	\$435

Total additional costs paid for through non-state sources (no cost sharing)

8) Net cost of Rhode Island health care after increased out-of-state financing	\$6,557
A) Increase (decrease) over projected RI resident spending without reform	(\$660)
B) Percentage Increase (decrease) over projected RI resident spending from existing revenue sources without reform	-9.1%
C) Increase (decrease) over projected RI beneficiary spending without reform	(\$915)
D) Percentage Increase (decrease) over projected RI beneficiary spending from existing revenue sources without reform	-12.2%

\$644

	Single Payer Without Cost
9) Source of health spending after reform (\$ millions)	Sharing
A) Existing public spending for health care	\$3,508
B) Additional public spending for health care after reform	\$2,822
C) Private insurance and other private payments for health care	\$0
D) Out-of-pocket (patient cost sharing) spending for health care	\$227
i) Patient cost sharing for Hospital and Physician services	\$0
ii) Patient cost sharing for room and meal cost in nursing homes	\$103
iii) Patient cost sharing for home care	\$0
iv) Patient cost sharing for prescription drugs	\$0
v) All other patient cost sharing medical non-durables	<u>\$124</u>
E) Total private health spending after reform	\$227

10) Cost of health care to be paid by public or private insurance under universa	Single Payer Without Cost Sharing
coverage reform (\$ millions) (line 8 less public spending and out-of-pocket spending)	\$2,822
Source of spending replaced by above amount	
A) Existing private health insurance spending	\$3,106
B) Existing out-of-pocket health spending replaced by public or private insurance	\$640
C) Total existing health spending replaced by public or private insurance	\$3,746
D) Change in revenues needed to purchase full coverage of health services	(\$923)

11) Increased cost (savings) to Rhode Island residents	
A) Additional (reduced) health spending (\$ millions)	(\$923)
B) Percentage Increase (decrease) over existing private health spending	-24.7%

Rhode Island - Appendix III: Detailed Tables

Section 5: Changes in Spending on Care and Administration and in Spending by Type of Care

In this section, the change in allocation of spending by type of care is shown, and the change in allocation of spending between administration and actual care.

12) Changes in Area of Expenditure			
(\$Millions)	Resident Spending Prior to Reform	Beneficiary Spending Prior to Reform	Beneficiary Spending in Single Payer Without Cost Sharing
1) Hospital Care	\$2,172	\$2,223	\$1,869
2) Physician Services	\$1,572	\$1,647	\$1,699
3) Dental Services	\$314	\$335	\$485
4) Home Health Care (and other new services for people with disabilities - see line 4B)	\$169	\$173	\$248
5) Prescription Drugs & Other Medical Non-durables	\$919	\$973	\$977
6) Vision Products and Other Durable Medical Equipment	\$52	\$54	\$65
7) Nursing Home Care	\$586	\$596	\$605
8) Other Personal Health Care	\$568	\$575	\$628
9) Personal Health Care Total	\$6,345	\$6,567	\$6,575
10) Program Administration and Net Cost of Private Health Insurance	\$472	\$500	\$211
11) Government Public Health Activities	\$259	\$259	\$268
12) Research	\$142	\$146	\$147
13) Construction (not included in total to avoid double counting)	\$100	\$100	\$100
14) Total	\$7,217	\$7,472	\$7,202

Change in Area of Expenditure for beneficiaries after reform compared to existing resident spending

compared to existing resident spending		
	Single Payer Without Cost	
(\$Millions)	Sharing	
1) Hospital Care	(\$303)	
2) Physician Services	\$127	
3) Dental Services	\$170	
4) Home Health Care (and other new services for people with disabilities - see line 4B)	\$79	
5) Prescription Drugs and Other Medical Non-durables	\$58	
6) Vision Products and Other Medical Durables	\$12	
7) Nursing Home Care	\$19	
8) Other Personal Health Care	\$60	
9) Personal Health Care Total	\$230	
10) Program Administration and Net Cost of Private Health Insurance	(\$260)	
11) Government Public Health Activities	\$9	
12) Research	\$5	
13) Construction (not included in total to avoid double counting)	\$0	
14) Total	(\$16)	

13) Spending on actual services			
		Single Payer	
	Dries to Reform	Without Cost	
4) Heavitel Cons	Prior to Reform	Sharing	
1) Hospital Care	\$1,590	\$1,559	
2) Physician Services	\$1,190	\$1,480	
3) Dental Services	\$289	\$463	
7) Nursing Home Care	\$506	\$537	

Change in spending on actual services (compared to exi	Single Payer Without Cost
	Sharing
1) Hospital Care	(\$31)
2) Physician Services	\$289
3) Dental Services	\$174
7) Nursing Home Care	\$31

Change from current resident administration spending	Single Payer Without Cost Sharing
1) Hospital Care	(\$273)
2) Physician Services	(\$162)
3) Dental Services	(\$4)
7) Nursing Home Care	(\$12)