



Massachusetts Health Connector and
Department of Revenue

Data on the Individual Mandate

Tax Year 2009

November 2011

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Key Findings

This report provides analysis of tax year 2009 data on the health insurance status of adult tax filers in Massachusetts, and is a follow-up to the analysis of tax year 2008 data published by the Massachusetts Health Connector (Health Connector) and the Department of Revenue (DOR) in December 2010.¹

This analysis demonstrates that there was continued strong compliance with the health insurance tax filing requirement in Massachusetts in 2009. The results from 2009 are consistent with other data reports which suggest a continued high rate of insurance coverage in the state; over 96% of tax filers who complied with the filing requirement were insured at some point in 2009.

Changes in 2009: Beginning January 1, 2009, Massachusetts residents subject to the individual mandate were required to have insurance that met certain requirements, known as the state's Minimum Creditable Coverage (MCC) standards. Consequently, in 2009, the Schedule HC was modified so that filers could report whether they had health insurance that met these standards. This was a significant change from 2008 when the Schedule HC asked if filers had any type of insurance, regardless of whether or not it met prescribed MCC standards. As a result, in this report when a filer is described as being "uninsured" this indicates that the filer either had no insurance, or had insurance that did not meet MCC standards. This significant change makes comparison to prior years difficult.

Compliance with filing a Schedule HC:

- Ninety-nine percent of tax filers required to file a Schedule HC for tax year 2009 complied with the filing requirement to report health insurance information.

Full-year insured filers:

- Of those adult tax filers who complied with the filing requirement, 92% (3,800,000) reported being insured for all of tax year 2009.

Full-year uninsured filers:

- Approximately 4% of filers (170,000) reported being uninsured for all of tax year 2009.
- Of the adults who were uninsured for all of tax year 2009, 67% (115,000) reported that their income was at or below 150% Federal Poverty Level (FPL), and were therefore exempt from the individual mandate penalty. Fifteen percent (26,000) were assessed a penalty because affordable insurance was available to them. An additional 13% (22,000) reported that health insurance was not affordable for them, based on their application of the affordability schedule. Three percent (5,300) claimed a religious exemption, two percent (3,800) sought to appeal the penalty, and less than 1% (200) reported a Certificate of Exemption.

Part-year insured filers:

- Approximately 4% of filers (150,000) reported being uninsured for part of tax year 2009.
- Of filers with part-year insurance, 37% (55,000) had income at or below 150% FPL and thus were not subject to a penalty. Twelve percent (18,000) reported that insurance was not affordable, based on their application of the affordability schedule. Thirty-three percent (48,000) had a permissible gap in coverage (i.e., a gap in coverage that lasted three or fewer consecutive months), 15% (22,000) were subject to a penalty since insurance was affordable, and 2% (3,000) were subject to a penalty since insurance was affordable but submitted an appeal. The remaining filers with part-year insurance (1%) included filers who had a Certificate of Exemption (70) or a religious exemption (600).

¹ Massachusetts Health Connector and Department of Revenue, Data on the Individual Mandate: Tax Year 2008, December 2010. Available on-line at, <http://tinyurl.com/report-TaxYear2008>

Introduction and Background

The cornerstone of Massachusetts' 2006 landmark health reform law is shared responsibility. As a result of the law, government, individuals and employers all assumed new responsibilities in order to improve and expand access to health insurance in Massachusetts. A key feature of the Massachusetts reform is the requirement that most adult residents who can afford health insurance must maintain coverage or pay a penalty. This requirement is enforced by DOR through the income tax filing process where Massachusetts residents are required to report information about their health insurance coverage on the Schedule HC.

For tax year 2007, which was the first year of the mandate, tax filers were required to indicate if they had insurance as of December 31, 2007. The penalty for noncompliance with the mandate in 2007 was loss of the personal income tax exemption, or \$219.

For tax year 2008, tax filers were required to indicate whether they had coverage in each month of 2008. If affordable coverage was available to the individual, as defined by the state's affordability schedule, but the individual did not have health insurance coverage, then the individual was assessed a penalty.²

Individuals with income below 150% FPL (\$15,612 for a single person in 2008) were exempt from the penalty. A religious exemption was available for individuals who had a sincerely held religious belief as the basis of their refusal to obtain and maintain health insurance coverage. An individual could also obtain a Certificate of Exemption prior to filing their taxes if they did not have access to affordable coverage or if they suffered a hardship which prevented them from being able to afford the lowest-cost available health plan.

The penalty for noncompliance with the mandate in 2008 was up to 50% of the lowest cost health insurance premium available through the Health Connector for every month the individual fails to comply with the mandate.

For tax year 2009, just as in the previous year, tax filers continued to be required to indicate whether they had coverage in each month of 2009, and the penalty for not complying with the mandate continued to be up to 50% of the lowest cost health insurance premium available through the Health Connector. The same exemptions were in place for individuals with income below 150% FPL, religious exemptions, and Certificate of Exemptions.

Updates in 2009: There were several updates made to the Schedule HC in 2009. The most significant of these updates was the requirement that tax filers report if they had health insurance that met MCC standards.³ In 2008, residents were only required to report if they had health insurance for each month, regardless of whether or not the plan met MCC standards. Throughout this report when a filer is described as being "uninsured", this indicates that the filer either had no insurance, or had insurance that did not meet MCC standards.

² For more information about the state's affordability schedule, see the Health Connector's website at: <http://preview.tinyurl.com/key-decisions>

³ For more information about MCC, see the Health Connector's website at: <http://tinyurl.com/mcc-background>

In 2009 there was a change in how “couples” and “families” were defined for purposes of the affordability schedule.⁴ As a result, 210,000 filers that were categorized as “couples” in 2009 would have been considered to be a “family” in 2008.

Improvements to the 2009 Schedule HC were made in order to make the form easier for tax filers to complete.⁵ DOR also increased efforts to communicate with individuals who did not complete a Schedule HC.

Given these significant changes between 2008 and 2009, comparisons between consecutive tax years should be made with great caution.

Previous reports have analyzed tax data for 2007 and 2008.^{6,7} This report analyzes the data on the individual mandate for tax year 2009.

⁴ In 2009, those filing as head of household with one dependent or married filing separately with one dependent were considered to be “couples” by the affordability schedule. In 2008, they were categorized as “families.” Information about dependents was not directly reported on the Schedule HC. Therefore, the number of dependents was inferred based on family size, which was self-reported by tax filers on the Schedule HC.

“Individuals” included taxpayers with a filing status of single or married filing separately and a self-reported family size of one.

“Couples” included taxpayers with a filing status of married filing jointly and a family size of two. In 2009, “Couples” also included taxpayers who reported being a head of household with a family size of two, and married filing separately with a family size of two.

“Families” included filers with a filing status of married filing jointly, married filing separately, or head of household and a family size of more than two.

The filers who could not be categorized as individuals, couples or families included filers who reported a family size of zero.

⁵ To make the Schedule HC easier for filers to complete, questions 3, 4 and 7 in the 2008 form were combined into questions 3 and 4 in the 2009 form.

⁶ Massachusetts Department of Revenue, Data on the Individual Mandate and Uninsured Tax Filers: Tax Year 2007, October 2008. Available on-line at, <http://tinyurl.com/report-TY2007>

⁷ Massachusetts Health Connector and Department of Revenue, Data on the Individual Mandate. Tax Year 2008, December 2010. Available on-line at, <http://tinyurl.com/report-TaxYear2008>

Methodology

This analysis was compiled by the Health Connector using data provided by the DOR, under a Memorandum of Understanding between the agencies. All individual level identifiers were removed prior to sharing data with the Health Connector and conducting this data analysis.

The methodology used in this analysis was similar to the methodology used for the preceding year, taking into account updates to FPL guidelines and the state's affordability schedule, and taking into account the updates in 2009 noted in the prior section of this report.

This report presents analyses of returns filed and processed by DOR as of May 2011. As of this date, there were approximately 3.6 million returns, representing 4.7 million tax filers.⁸ Based on tax year 2008 filings, the returns processed as of May 2011 represented approximately 99% of all expected tax year 2009 returns.

Similar to previous years, this analysis relies primarily on information as self-reported by tax filers. This information is subject to tax filer reporting errors and inconsistencies, as well as post-filing verification, enforcement and audit efforts by DOR. The analyses presented focuses on adult tax filers aged 19 and over, and thus do not reflect the health insurance status of children, individuals who are not required to file a tax return, or individuals who did not file a return despite being required to do so. While the mandate applies to adult tax filers (age 18 and over), for purposes of simplicity this report excludes individuals who turned 18 during the tax year.⁹

Numbers in this report are rounded. Percentages, where provided, may not add to 100% due to rounding.

⁸ There may be one or two tax filers per tax return.

⁹ Individuals who turned 18 during the tax year became subject to the mandate on the first day of the month following their birthday.

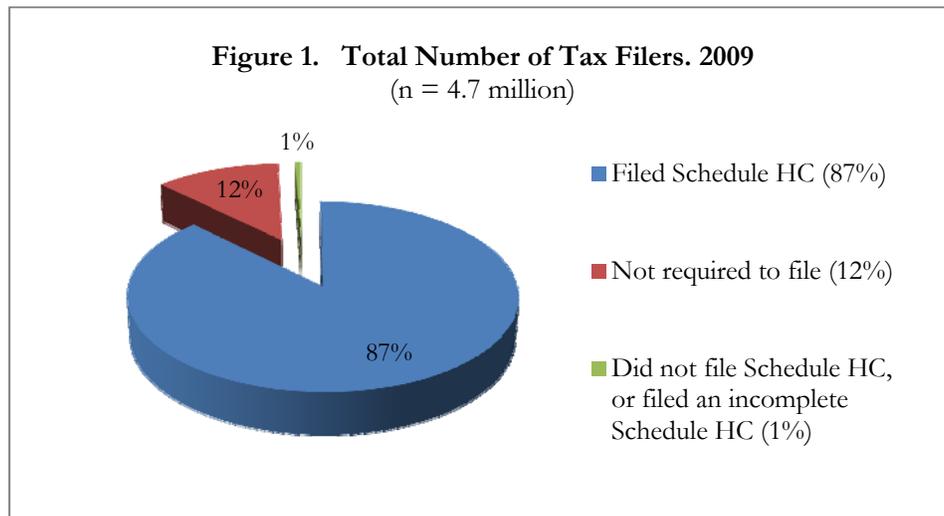
Results

Overview of All Filers

Figure 1 shows the total number of tax filers for tax year 2009 (4.7 million), and the number that filed a Schedule HC. Tax filers subject to the individual mandate are required to file a Schedule HC with their income tax return in order to document their compliance with the individual mandate.

Of 4.7 million filers, 87% (4.1 million) filed a Schedule HC. Approximately 12% (560,000) were not required to file, which includes non-residents, certain part-year residents, and individuals under 18. The remaining 1% (25,000) were subject to the mandate but did not file a Schedule HC or filed it with incomplete information.¹⁰

There were 4.2 million filers who were required to file a Schedule HC, and 99% of these filers complied with this requirement. This is an increase from the 97% compliance rate that occurred in tax year 2008 and may be the result of increased familiarity with the Schedule HC, and improved communications between DOR and individuals who have not completed a Schedule HC.



The subsequent analyses presented in this report include information for only those tax filers who submitted a completed Schedule HC, and who were age 19 and older.

¹⁰ DOR corresponds with tax filers who either did not file a Schedule HC or filed it with insufficient information to determine the applicability of the individual mandate.

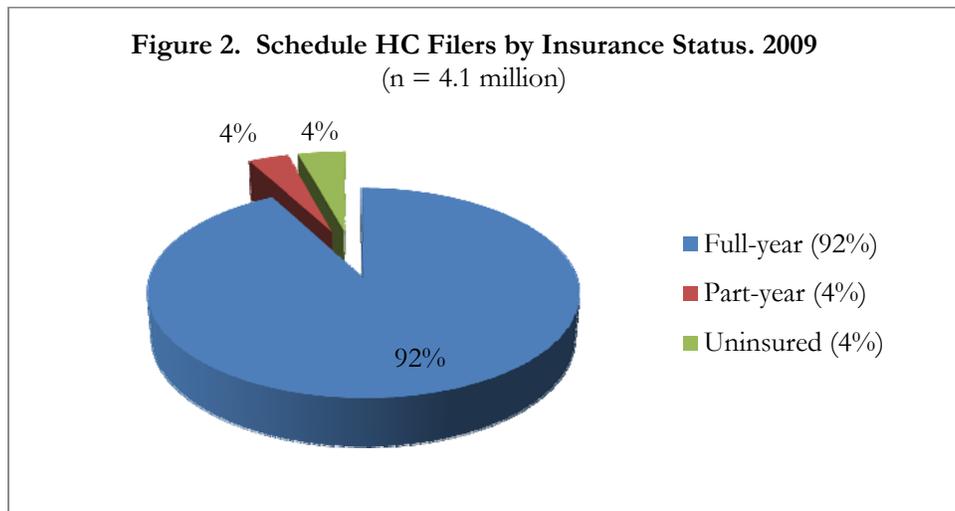
Insurance Status of Schedule HC Filers

In filing the 2009 tax return, individuals were required to indicate on the Schedule HC whether they were enrolled in an MCC-compliant plan for all, part, or none of 2009. Individuals who reported having federal government insurance were considered to have full-year insurance.¹¹

Ninety-two percent (3.8 million) of the 4.1 million adult filers who submitted a complete Schedule HC reported having MCC-compliant health insurance for the full tax year (Figure 2).¹²

The 92% who reported having full-year health insurance in 2009 is slightly lower than the 95% who reported having any type of full-year health insurance in 2008. However, as discussed in the methodology section of this report, comparisons between 2008 and 2009 must be made with caution. As previously noted, 2009 was the first year that residents were required to have not only health insurance, but insurance that met MCC standards. Therefore, the observed change in full-year insurance rates from 95% in 2008, to 92% in 2009 does not necessarily indicate a rise in the number of people without some form of health insurance. Notably, survey data, including results from the Division of Health Care Finance & Policy, suggest that the estimated uninsurance rate in 2009 was not significantly different than in 2008.¹³

The remaining Schedule HC filers had insurance for part of the year (4%) or were uninsured for the entire year (4%).¹⁴



¹¹ Federal government insurance includes Medicare, the Veterans Administration Program, Tricare or “Other” government health coverage, as indicated in Question 4 on the 2009 Schedule HC. MassHealth or Commonwealth Care were not considered to be federal government insurance.

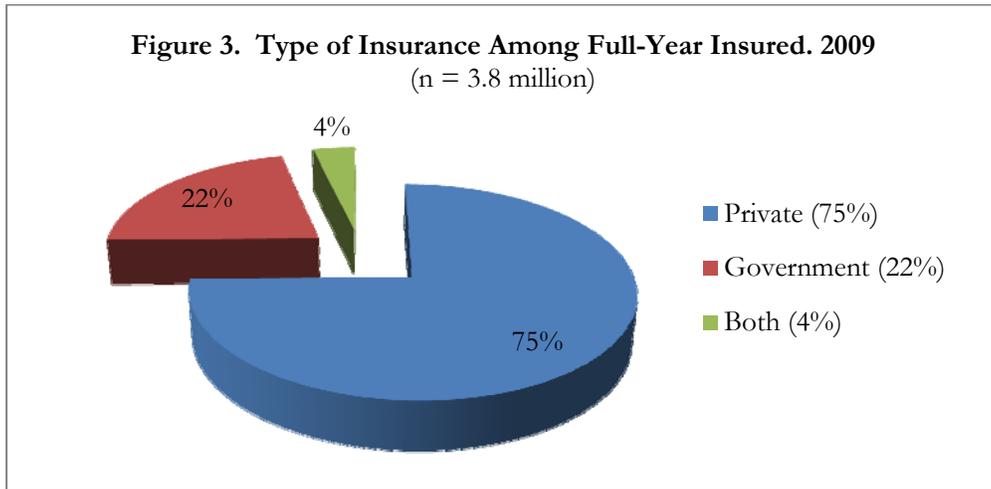
¹² The full-year insured category includes 49,400 part-year residents who met the requirements of the mandate for the entire period that the mandate applied to them.

¹³ For 2008 and 2009 estimates of uninsured rates from DHCFP’s Massachusetts Health Insurance Survey (HIS), see: <http://www.mass.gov/cohhs/docs/dhcfp/r/pubs/09/his-coverage-2008-2009-oct-2009.ppt>

¹⁴ The part-year insured category includes 9,900 part-year residents who indicated insurance for some but not all of the period for which the mandate applied to them.

Full-Year Insured Filers

Among those who reported having full-year insurance coverage on their Schedule HC, private insurance was the most common source of health insurance coverage (Figure 3). Seventy-five percent (2.8 million) of adult filers with full-year coverage reported having private insurance. An additional 4% (140,000) reported having both private and government insurance. This could be either concurrent or consecutive coverage. The remaining 22% (810,000) of filers with full-year health insurance coverage reported having government insurance.¹⁵



¹⁵ Government insurance includes federal government insurance (such as Medicare, the Veterans Administration Program, and Tricare) as well as MassHealth and Commonwealth Care.

Full-Year Uninsured Filers

Approximately 4% (170,000) of adult filers indicated on their Schedule HC that they were uninsured for all of 2009. Figure 4 shows details of Schedule HC filers who reported being uninsured for all of 2009. Sixty-seven percent (115,000) of full-year uninsured adult filers reported that their income was at or below 150% FPL. These individuals are exempt from the individual mandate penalty. Fifteen percent (26,000) were assessed a penalty because affordable insurance was available to them. An additional 13% (22,000) reported that health insurance was not affordable for them, based on their application of the affordability schedule. Three percent (5,300) claimed a religious exemption. Two percent (3,800) sought to file an appeal of the penalty. Less than 1% (200) reported having a Certificate of Exemption (not shown).

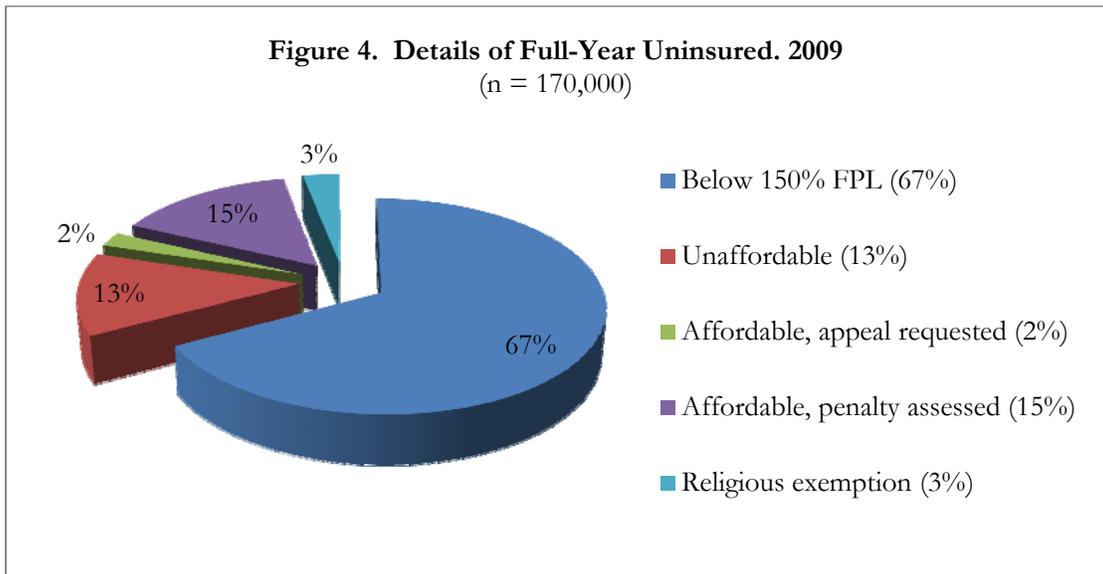
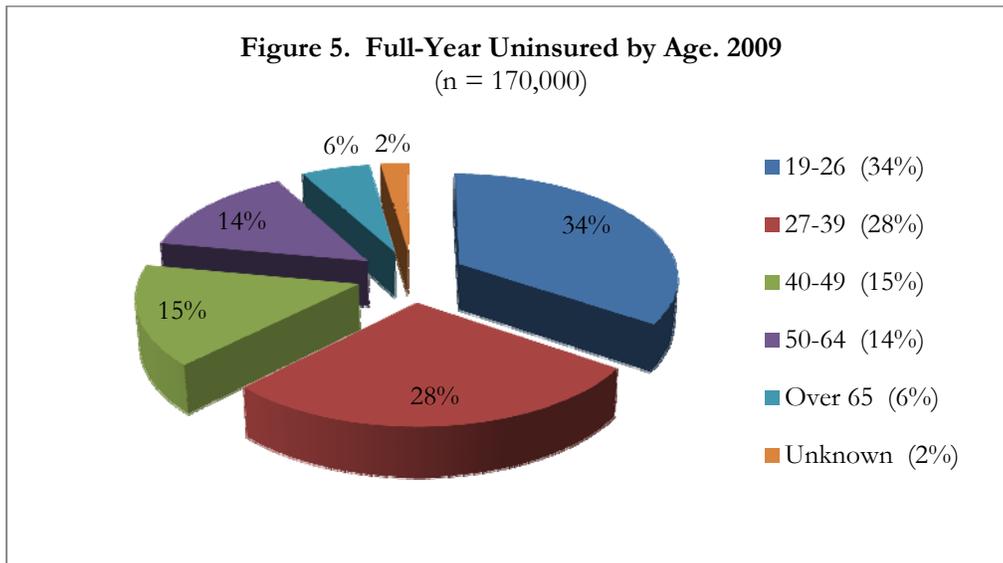


Figure 5 shows the distribution of adult Schedule HC filers who were uninsured for all of 2009 by age category. This figure also includes 4,000 filers whose age could not be determined.¹⁶ Consistent with findings of other studies and from the 2008 Schedule HC analysis, young adults are over-represented among uninsured adults in Massachusetts. Adults aged 19 to 26 represented 15% of all adult residents aged 19 or over based on 2009 population estimates from the U.S. Census Bureau. However, they comprised 34% of full-year uninsured Schedule HC filers in 2009.



¹⁶ These filers with “unknown” age are only included in figures which show age distribution (Figures 5, 6, 17, 18). The remaining analyses in this report are limited to filers with a known age that is greater than or equal to 19.

Figure 6 shows the age distribution of Schedule HC filers who were uninsured for the full year by affordability. The “Affordable” category includes those who reported that they were able to afford insurance and were assessed a penalty, as well as those who reported that they were able to afford insurance but wished to appeal the penalty. The “Below 150% FPL” category includes filers who are exempt from penalty because their income is below 150% FPL. The “Unaffordable” category includes filers who reported being unable to afford coverage based on their application of the affordability schedule. Filers who claimed a religious exemption or a Certificate of Exemption were not included in this analysis because they were not asked to provide information about whether affordable insurance was available to them.

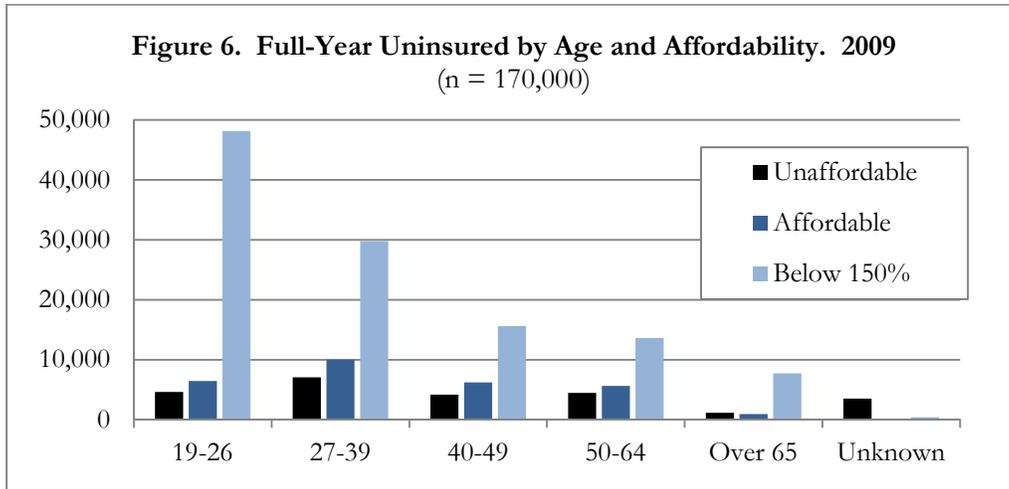


Figure 7 shows information on the gender of full-year uninsured adult Schedule HC filers. Gender information was available for 68% of filers. Among full-year uninsured filers for whom gender information was available, 65% were male.

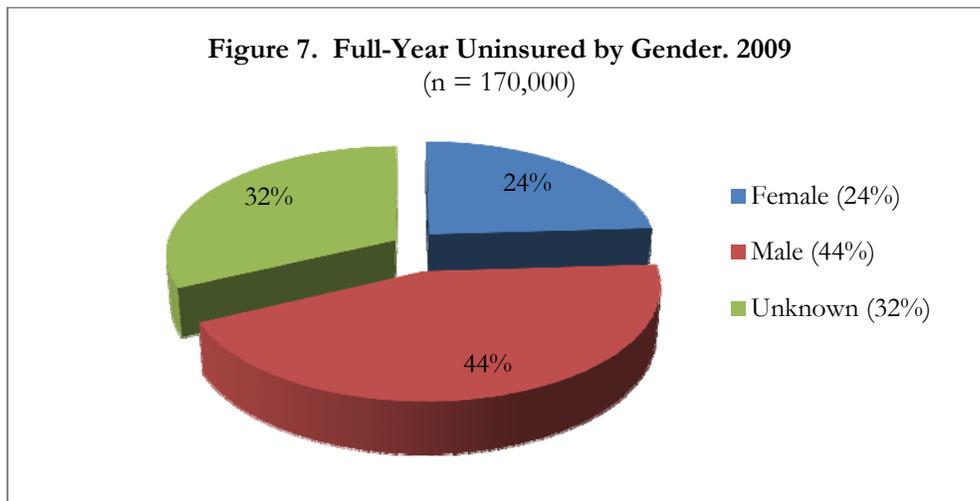


Table 1 shows the distribution of full-year uninsured filers by region. The regions are defined based on the county groupings used for the affordability schedule worksheet. The affordability worksheet included with the Schedule HC lists the lowest monthly premiums that are available in each of three geographic regions.¹⁷

The third column of Table 1 presents the number of uninsured adult Schedule HC filers in each region as a percentage of the region's total adult population. This percentage should not be interpreted as an uninsurance rate for several reasons: first, the number of uninsured filers in each region includes only those who filed a Schedule HC, and thus excludes people who are not required to file. Second, there is a slight discrepancy in the age cut-offs used (i.e., the Schedule HC data includes those ages 19 and over, whereas the Census data includes those ages 18 and over). Third, as mentioned in the methodology section of this report, filers in 2009 that are described as uninsured could have had insurance that did not meet MCC standards.

Table 1. Full-Year Uninsured by Region. 2009			
	Number of Full-Year Uninsured Adult Schedule HC Filers	2009 Adult Population by Region*	Full-Year Uninsured Filers as a % of the Adult Population
Region 1: Berkshire, Franklin, and Hampshire Counties	8,200	291,050	2.8%
Region 2: Bristol, Essex, Hampden, Middlesex, Norfolk, Suffolk, and Worcester Counties	130,000	4,287,249	3.0%
Region 3: Barnstable, Dukes, Nantucket, and Plymouth Counties	21,000	582,286	3.6%
Out of State	12,000	N/A	N/A
<i>* 2009 U.S. Census Bureau estimates</i>			

¹⁷ Region 1 includes Berkshire, Franklin, and Hampshire counties. Region 2 includes Bristol, Essex, Hampden, Middlesex, Norfolk, Suffolk, and Worcester counties. Region 3 includes Barnstable, Dukes, Nantucket, and Plymouth counties. Each region is composed of counties which have similar insurance costs.

Figure 8 shows the distribution of filers who were uninsured for all of 2009, by region and affordability of insurance.

In all three regions, the majority of the uninsured (64% - 74%) reported income below 150% FPL.

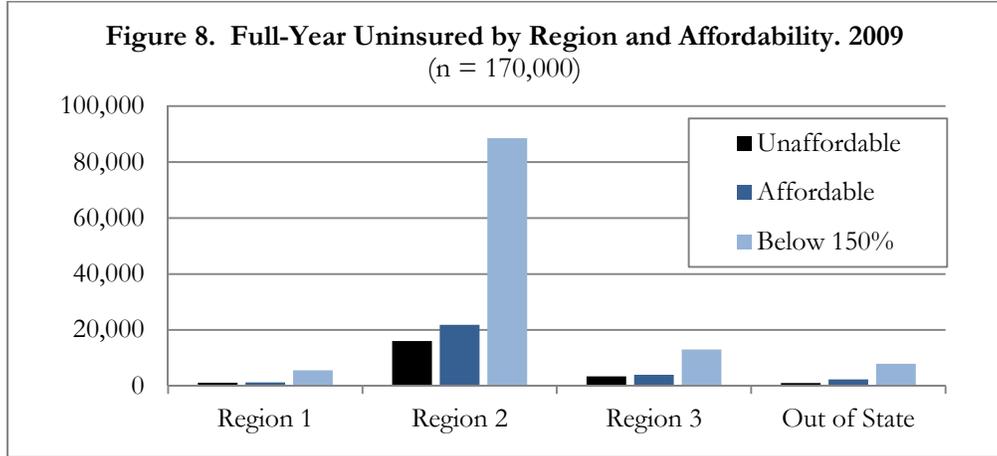
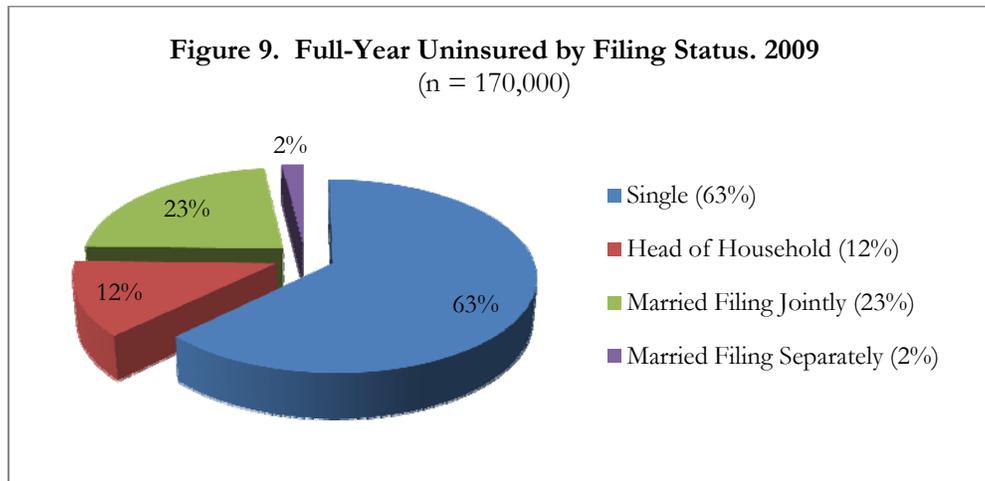
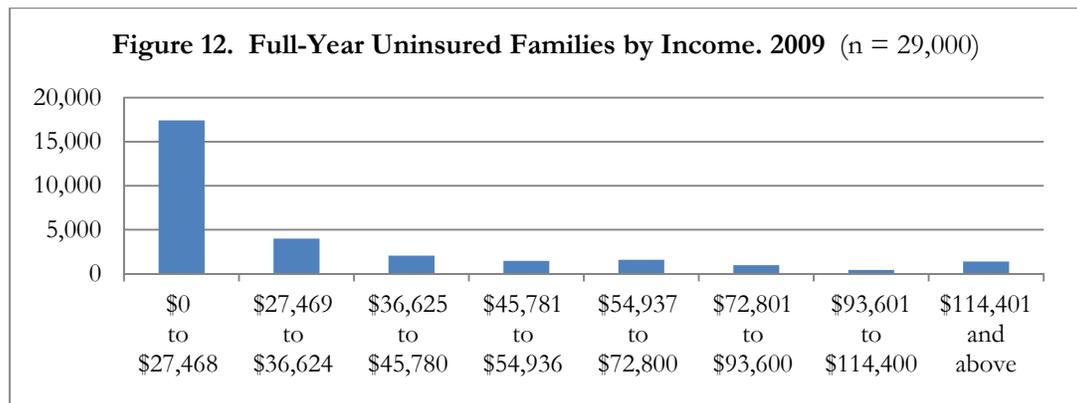
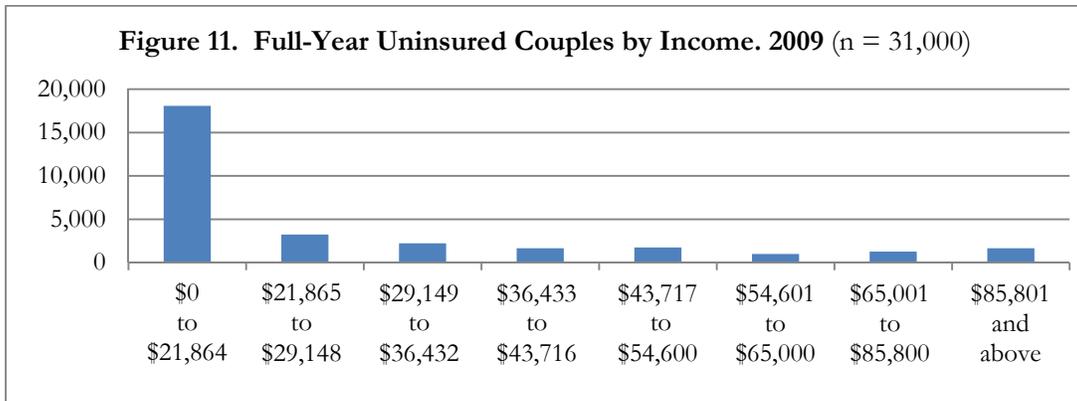
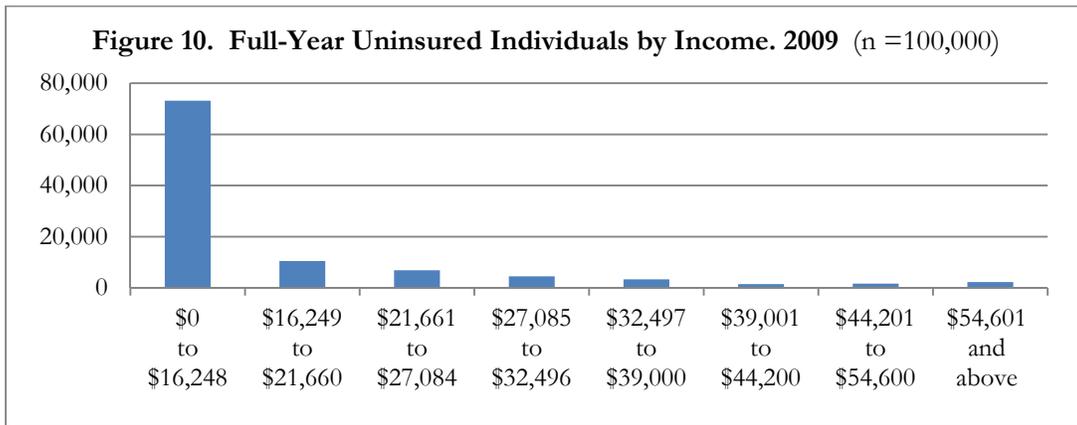


Figure 9 shows the distribution of filers who were uninsured for all of 2009 by filing status. Sixty-three percent (108,000) of full-year uninsured filers were single, 23% (39,000) were married filing a joint return, 12% (22,000) were a head of household, and 2% (3,300) were married filing separate returns.



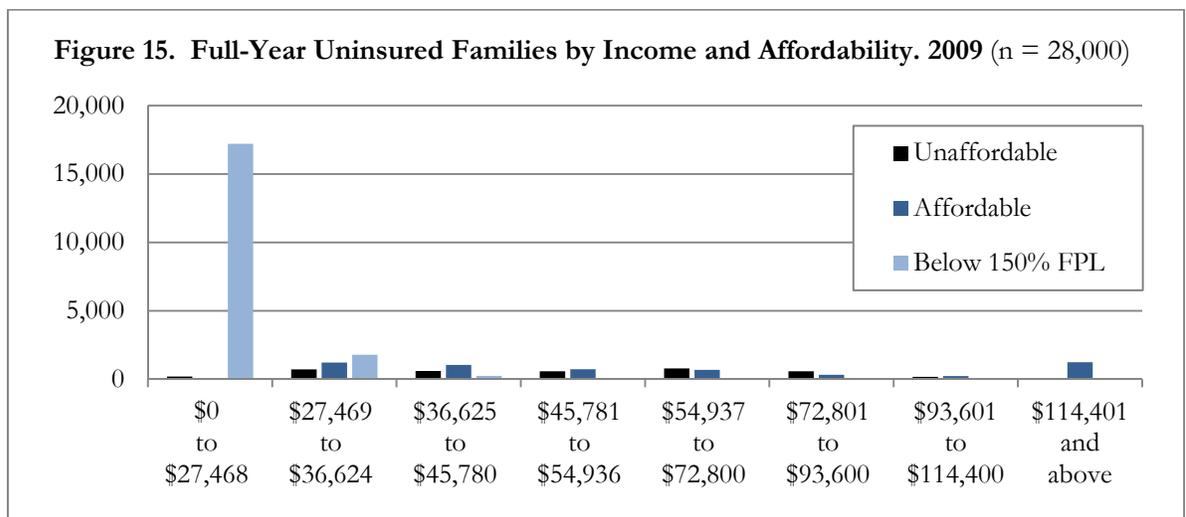
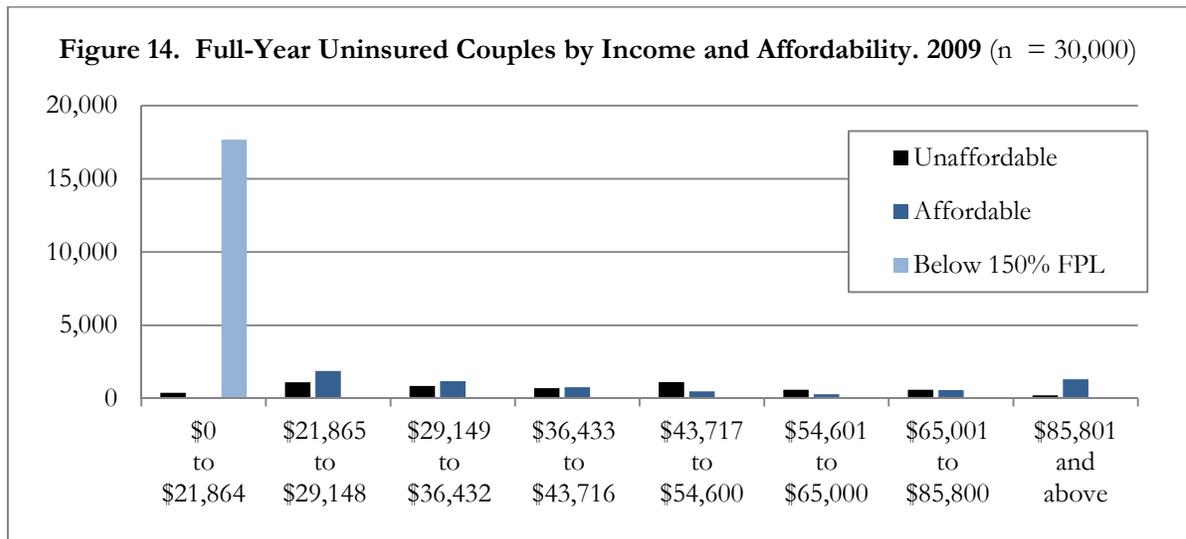
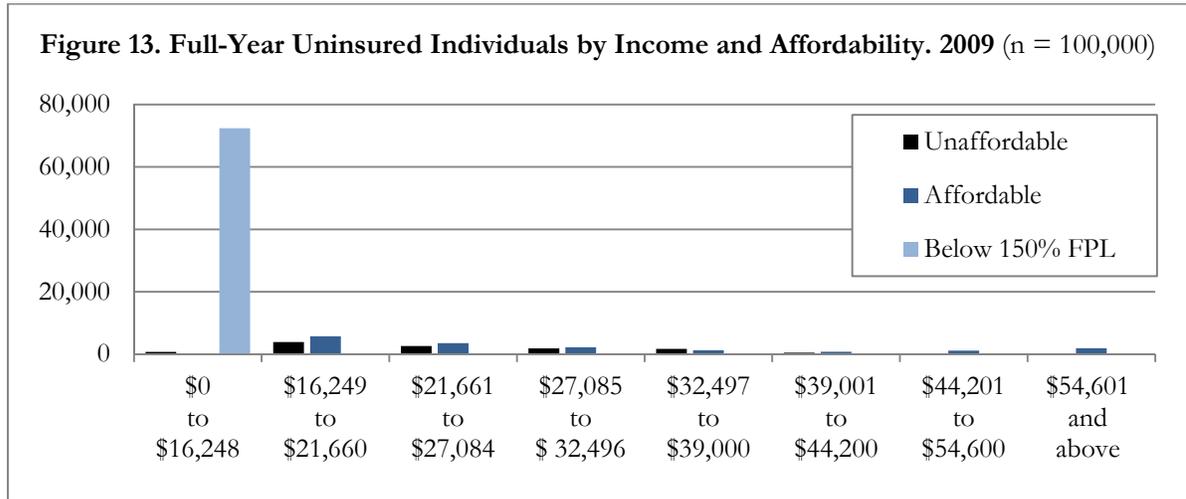
To analyze the distribution of full-year uninsured adult Schedule HC filers by income, filers were next categorized into one of three categories based on filing status and family size: individuals, couples, or families. As explained in the introduction to this report, in 2009 there was a change in how “couples” and “families” were defined for the purposes of the affordability schedule, which makes comparisons between consecutive years difficult.

Figures 10, 11 and 12 show the distribution of full-year uninsured individuals, couples, and families by income. Among adult Schedule HC filers uninsured for the full year, 60% (100,000) were categorized as individuals, 18% (31,000) as couples, and 17% (29,000) as families. Across all categories, most uninsured filers were in the lowest income category. There were an additional 7,600 filers who could not be categorized as individuals, couples, or families on the basis of the information provided on the Schedule HC.¹⁸



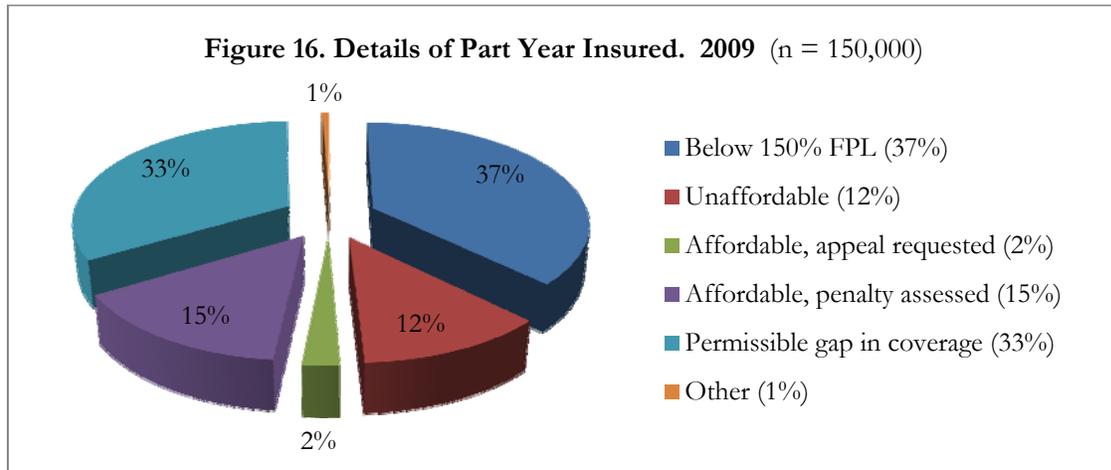
¹⁸ Filers who could not be categorized as individuals, couples or families included filers who reported a family size of zero.

Figures 13 through 15 show the distribution of full-year uninsured individuals, couples, and families by income category and affordability.

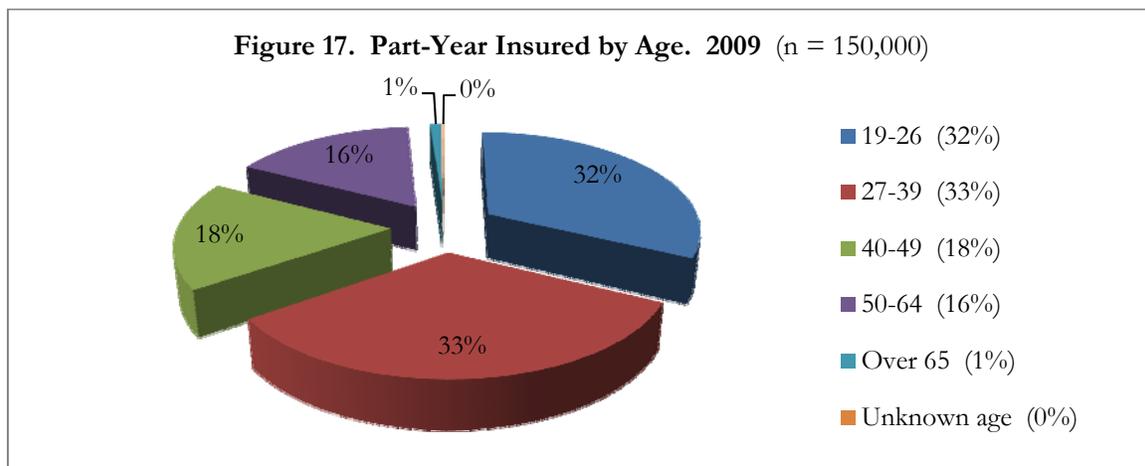


Part-Year Insured Filers

Approximately 4% of Schedule HC filers (150,000) reported having insurance for only part of tax year 2009. Figure 16 shows details of Schedule HC filers who reported having part-year insurance. Thirty-seven percent (55,000) of filers with part-year insurance reported that their income was at or below 150% FPL and thus were not subject to a penalty. Insurance was unaffordable for an additional 12% (18,000) of filers with part-year insurance. Thirty-three percent (48,000) had a permissible gap in coverage which lasted three or fewer consecutive months.¹⁹ Fifteen percent (22,000) were subject to a penalty since insurance was affordable, and 2% (3,000) were subject to a penalty since insurance was affordable but submitted an appeal. One percent of filers with part-year insurance included filers who had a Certificate of Exemption (70), or a religious exemption (600).



The age distribution of filers with insurance for part of tax year 2009 is shown in Figure 17, where filers between ages 19-26 and 27-39 are the largest categories of those with part-year insurance (32% and 33%, respectively). As with the full-year uninsured population described previously in Figure 5, young adults are also over-represented among part-year insured adults in Massachusetts.



¹⁹ The Health Connector's Administrative Bulletin 03-10 (which is available on-line at, <http://tinyurl.com/bulletin-03-10>) clarifies that for purposes of penalty calculation, taxpayers will not be subject to the penalty if they had lapses in coverage consisting of three or fewer consecutive calendar months.

Figure 18 shows the age distribution of part-year insured tax filers by affordability.

When compared to filers who were uninsured for the full year (in Figure 6), a higher percentage of filers who were uninsured for part of tax year 2009 reported being uninsured but able to afford coverage (26% of filers with part-year insurance, compared with 17% of filers who were uninsured for all of 2009).

The “Affordable” category includes those who reported that they were able to afford insurance and were assessed a penalty, as well as those who reported that they were able to afford insurance but wished to appeal the penalty. The “Below 150% FPL” category includes those tax filers who reported an income below 150% FPL. The “Unaffordable” category includes tax filers who reported that insurance was not affordable to them, based on the affordability schedule. Filers with a Certificate of Exemption or a religious exemption are excluded. In addition, a significant number of filers (48,000) had a permissible gap in coverage and could not be classified into the “affordable” and “unaffordable” categories because they were not asked to provide information about whether affordable insurance was available to them.

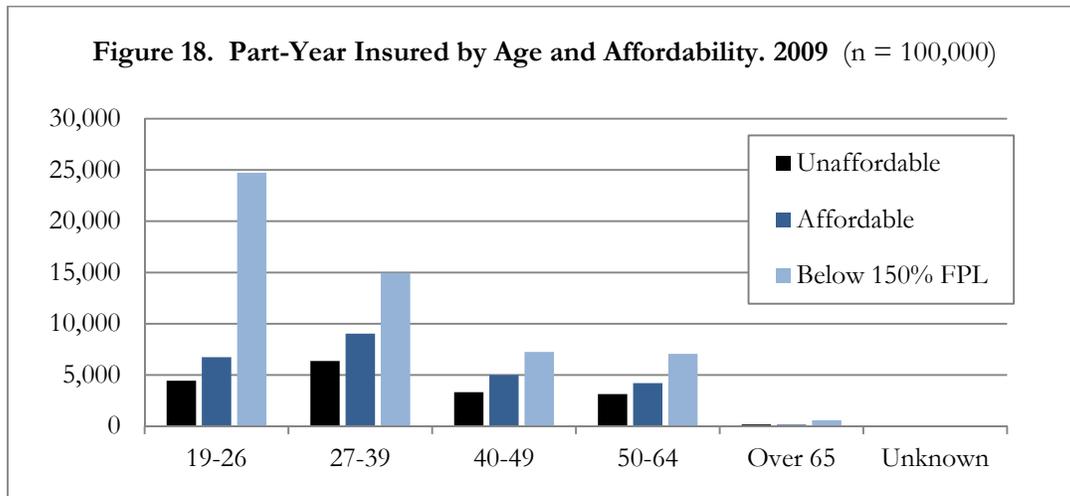


Figure 19 shows the distribution of part-year insured Schedule HC filers by gender. Among part-year insured filers for whom gender was available, 55% were male. As with full-year uninsured filers (who are described in Figure 7), the majority of part-year insured filers for whom gender is known are men.

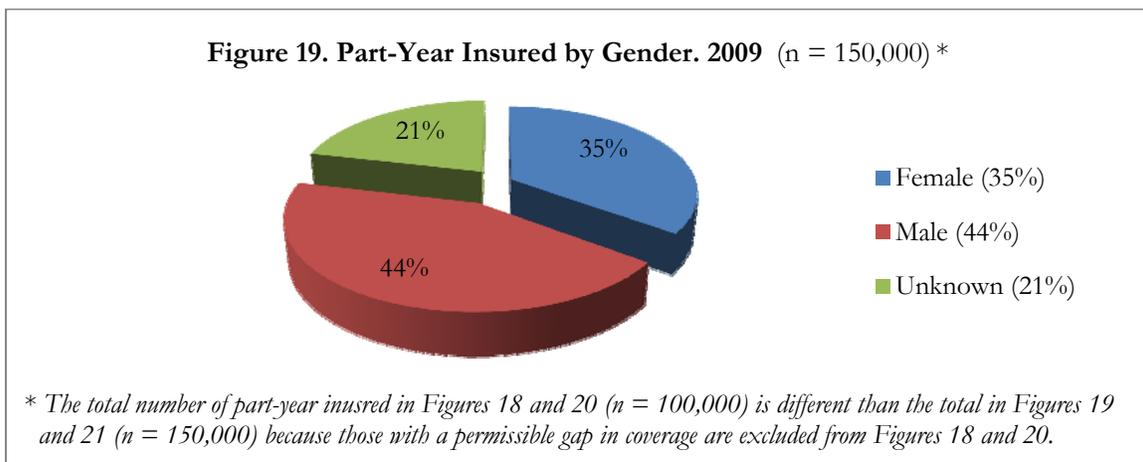


Table 2 shows the regional distribution of filers reporting part-year insurance, compared with the total adult population (age 18 and over) in each region, based on 2009 Census Bureau estimates.

	Number of Part-Year Uninsured Adult Schedule HC Filers	2009 Adult Population by Region*	Part-Year Uninsured Filers as a % of the Adult Population
Region 1: Berkshire, Franklin, and Hampshire Counties	8,800	291,050	3.0%
Region 2: Bristol, Essex, Hampden, Middlesex, Norfolk, Suffolk, and Worcester Counties	110,000	4,287,249	2.7%
Region 3: Barnstable, Dukes, Nantucket, and Plymouth Counties	17,000	582,286	2.9%
Out of State	6,500	N/A	N/A

** 2009 U.S. Census Bureau estimates*

Figure 20 shows the distribution of part-year insured filers by region and affordability. As previously described, the “affordable” category includes those who reported that they were able to afford insurance and were assessed a penalty, as well as those who reported that they were able to afford insurance but wished to appeal the penalty. The “Below 150% FPL” category includes those tax filers who reported an income below 150% FPL. The “Unaffordable” category includes filers who reported that insurance was not affordable to them. Filers with a Certificate of Exemption, or religious exemption were less than 1% of the total, and therefore were not included in the figures below. A significant number of filers (48,000) had a permissible gap in coverage and could not be classified into the “affordable” and “unaffordable” categories.

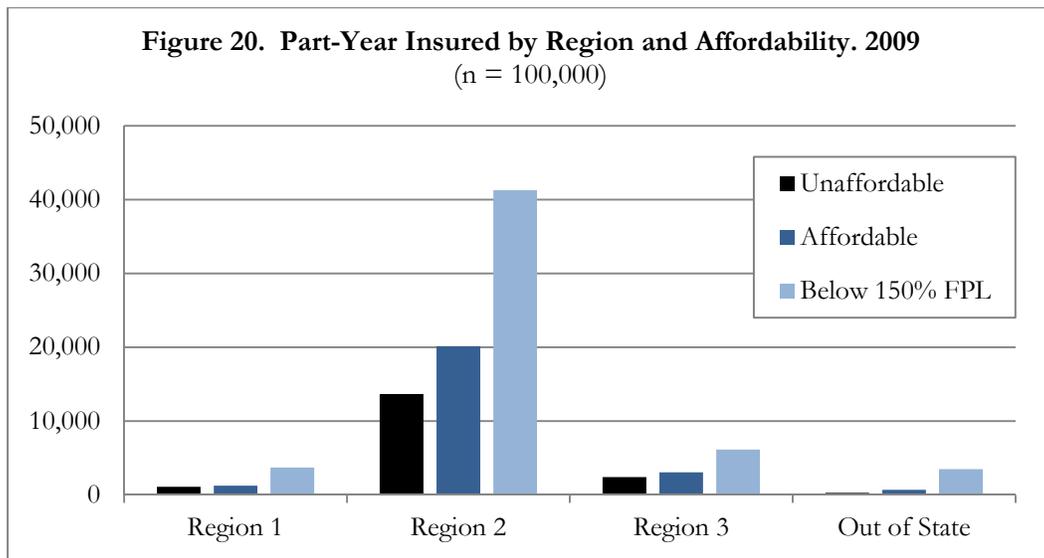
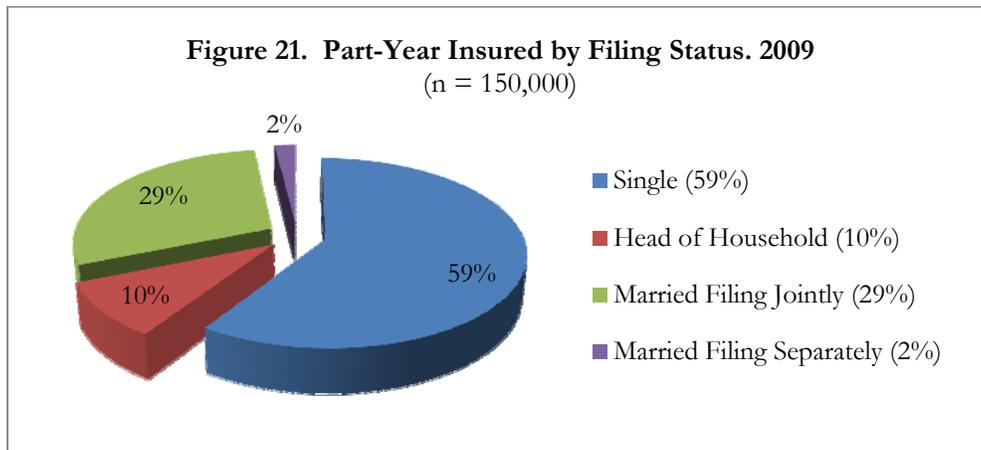
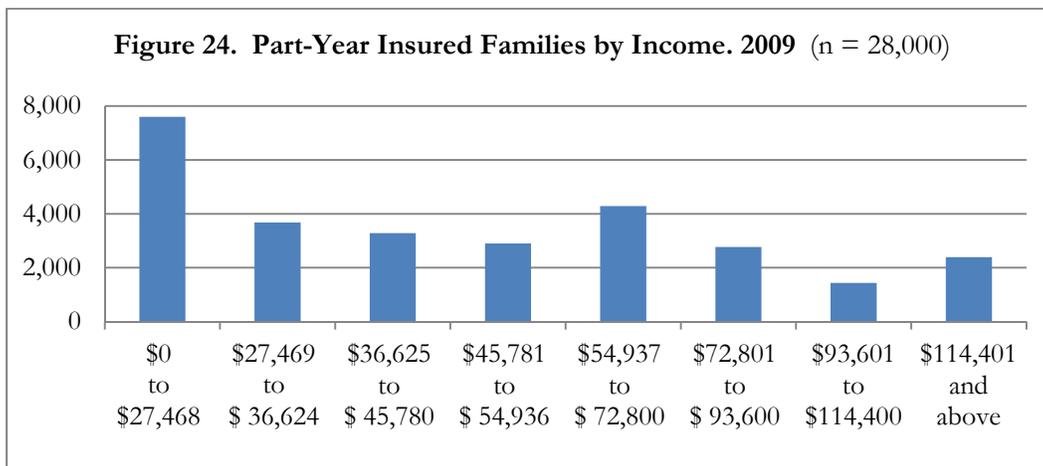
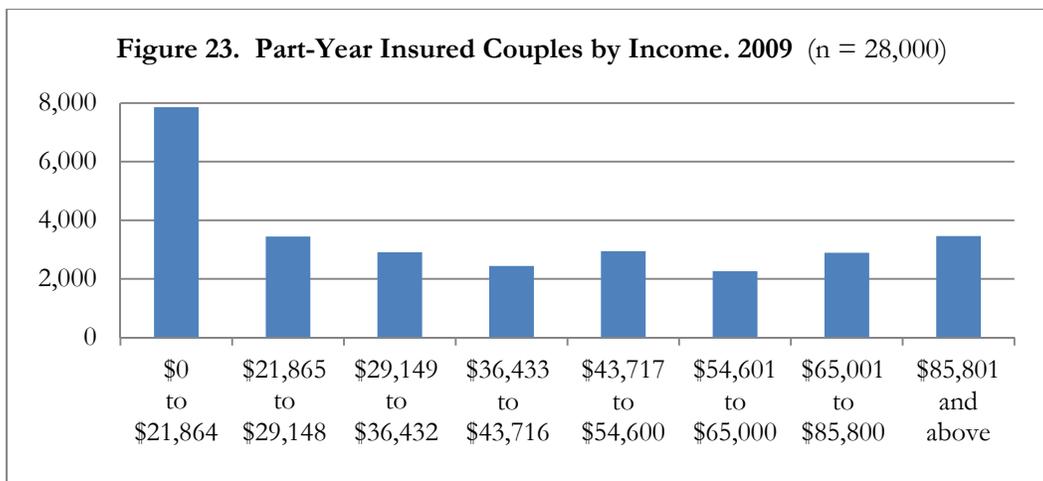
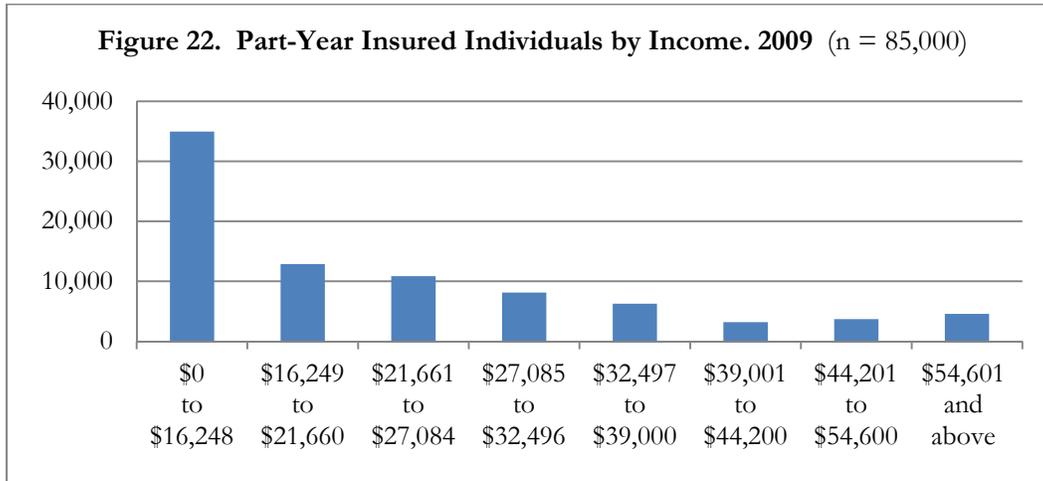


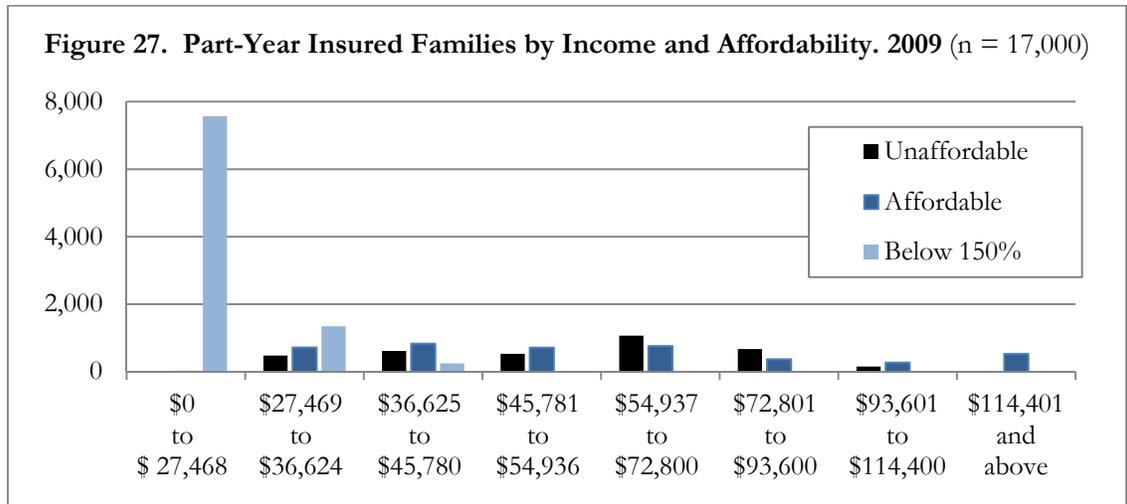
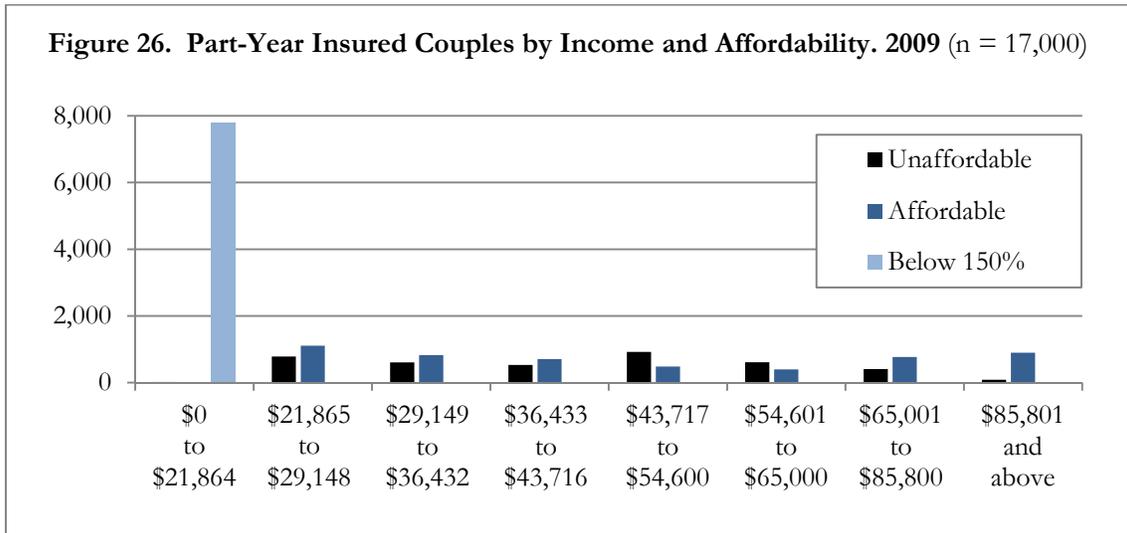
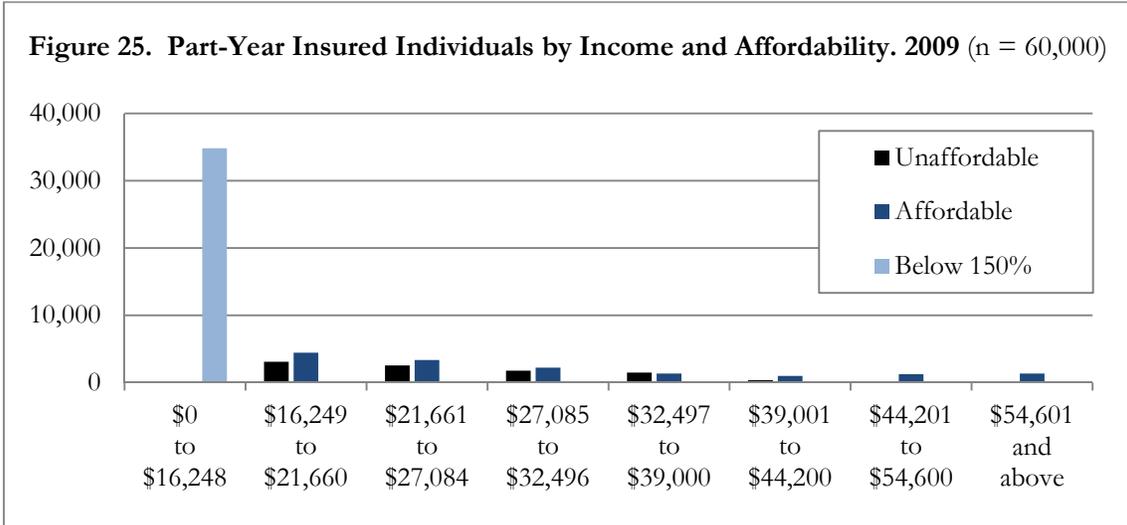
Figure 21 shows the distribution of part-year insured Schedule HC filers by filing status. The majority (59%) of filers who were insured for part of 2009 filed as single.



Figures 22, 23 and 24 show the part-year insured Schedule HC filers by income category. As with full-year uninsured filers (shown in Figures 13, 14 and 15), filers with part-year insurance were categorized as individuals, couples, or families, based on filing status and family size. Among adult Schedule HC filers with part-year insurance, 58% (85,000) were categorized as individuals, 19% (28,000) as couples, and 19% (28,000) as families. An additional 5,100 filers with part-year insurance could not be categorized on the basis of the information provided.



Figures 25, 26 and 27 show the distribution of filers with part-year insurance by income and affordability.



Summary

This analysis demonstrates that in 2009 there continued to be strong compliance with Massachusetts' health insurance reporting requirements, with 99% of tax filers who were required to file a Schedule HC complying with the reporting requirement.

In addition, there continued to be high rates of insurance coverage with 92% of adults who filed a Schedule HC reporting being insured and having MCC-compliant coverage for all of 2009. Relatively few filers (26,000 who were uninsured for the full year and 22,000 with part-year insurance, for a combined total of 48,000 filers) were assessed a penalty in 2009. Data for uninsured tax filers is consistent with other reports that suggest that the uninsured in Massachusetts are more likely to be low-income, young, male, and single.

As a result of the changes in the Schedule HC, particularly the introduction of the MCC requirement in 2009, it is difficult to make comparisons between data from 2008 and 2009. However, there were no significant changes to the 2010 Schedule HC, and next year's analysis of the 2010 tax data should provide a good opportunity to analyze trends in health insurance coverage in Massachusetts. Moving forward, Schedule HC filing data will become an increasingly valuable source of data on health insurance coverage and mandate compliance trends in Massachusetts.