The microWELT platform and its application for care projections with a case-study for Austria

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Organisation

- Objectives
- The microWELT modeling platform
  - Core processes
  - NTA/NTTA accounting
  - Recent publications
- Comparative projections of care systems
- Case-Study
  - The Austrian care allowance system
  - Modeling approach
  - Projection scenarios
- Conclusions
Objectives

- Creation of a tool for projecting the future care demand and supply in the context of socio-demographic change and institutional settings
- Capturing monetary and time transfer flows consistent with the National Transfer Accounting (NTA) and National Time Transfer Accounting (NTTA) framework
- Comparative analysis across four countries (Austria, Spain, UK, Canada): sustainability, vulnerabilities, policy options
- Use of the existing microWELT model, initially developed in H2020 WELTRANSIM project as starting point
- Contributing to the development of MicroWELT as a modular, extendable and refinable modeling platform
The microWELT Platform: core processes

- Socio-demographic microsimulation model integrating detailed population projections with longitudinal NTA/NTTA accounting
  - Interacting population model
  - Continuous time
- Reproduces official population projections but adds detail:
  - Education,
  - Family,
  - Health,
  - Labor status
- Designed as a portable, extendable, refinable platform based on comparative data
The microWELT Platform: NTA/NTTA accounting

- NTA/NTTA Variables
  - Labor Income
  - Taxes, social contributions
  - Public transfers by type: education, health, care, pensions, ... other
  - Private transfers (cash, time) within and between families; by type
  - Asset income and saving
  - Private and public consumption by type

- Disaggregation
  - Initially: NTAs disaggregated by education and family type
  - In development: modeling of NTA/NTTA variables on the individual level
  - WellCARE: distinguishing care economy variables: LTC, childcare
Context: Recent Publications

• Horvath et.al. (2023) Socio-economic Inequality and Healthcare Costs Over the Life Course – A Dynamic Microsimulation Approach - Public Health, (219), 124-130
• Horvath et.al. (2021) The Impact of Education and Health on Labor Force Participation and the Macroeconomic Consequences of Ageing, Bertelsmann Foundation, Monograph/Study
• Spielauer et. al. (2023) The Effect of Educational Expansion and Family Change on the Sustainability of Public and Private Transfers - Journal of the Economics of Ageing, 25
Comparative modeling of elderly care

• How much care is needed?
• Where is it provided: nursing home / home care
• If home care: who are the care providers? How much care by provider?
  • Partner
  • Children / Others
  • Formal home care services
  • Care gap?
• Pricing of care:
  • NTA: public and private consumption; public transfers
  • NTTA: time transfers
• How does system adjust? Effects of socio-demographic change on informal supply, care mix, costs, System sustainability; vulnerabilities
Simulation Analysis

- Nursing homes
  - Likelihood as today -> additional places required
  - Changing supply -> change number/composition in community
- Informal Care of “Others”
  - Supply as today -> change in likelihood/h of receipt
  - Receipt as today -> required additional supply -> LF adjustments
- Formal home care
  - Receipt as today -> additional h required
  - Changing supply -> change in gap / h by partner
- Partner
  - Takes residual -> increase in (distribution) h compared today
  - Limitations -> change individual gap
- Care gap -> total care gap, who is affected -> Feedback
- Change costs, NTA, NTTA, ... -> economic consequences -> Feedback
Illustration: Austrian Care Allowance Projection

• Universal care allowance system: Assessment of required hours and severity (if more than 180h) based on (I)ADLs (Instrumental Activities of Daily Living); 7 levels (175€ - 1880€/month)

• Consistency between administrative data (prevalence by care level, age, sex) and survey data (receipt of allowance; number of (I)ADL, levels)

• Estimation of relative differences in receipt of allowance by education, age group, sex (odds ratios) based on SHARE (Survey of Health, Ageing and Retirement in Europe); calculation of prevalence parameters by age, sex, and education which align to administrative data by age and sex.

• Simulation:
  • Expected total individual life-time care allowances of current 50-year-olds, by education; accounting for mortality differences by education
  • Projection of total costs by year
Receiving care allowance and number of (I)ADLs
Care allowance by education, age, sex
Scenarios

- Scenarios:
  1. w/o increasing life expectancy (as in population projections; +4 years)
  2. w/o accounting for differential care needs by education
  3. w/o changing effect of age; “87 becoming the new 83“
Illustration: Prevalence of receiving allowance
Expected age at death by education, currently 50
Lifetime Costs Currently 50y Old by Scenario

Current Mortality

Mortality Improvement

Care by Education

Slower Ageing

Legend:
- Lifetime health Costs Low
- Lifetime health Costs Medium
- Lifetime health Costs High
- Lifetime health Costs All
Cost Projections by Scenario

Total Care Allowances

- Current Mortality
- Mortality Improvement
- Care by Education
- Slower Ageing

[Graph showing projections for different scenarios over time]
Conclusions

Case study

-Based on currently observed differences in care needs by education, higher life expectancy of higher educated does not lead to higher lifetime costs
-High uncertainty in future care demand – and public costs - especially concerning expansion/compression of morbidity

Comparative project

-Many challenges: data issues, capturing distributional operations of regimes, ...
-High uncertainty and complex interplay between socio-demographic change and care regimes, require simulation analysis: what-if, sensitivity
-NTA/NTTA approach combined with microsimulation promising for comparative analysis across very different regimes
-MicroWELT a powerful platform