



Robert Wood Johnson Foundation

The logo for the Robert Wood Johnson Foundation is a stylized, dark blue graphic consisting of several curved, overlapping lines that resemble a wing or a fan.

**STATE HEALTH ACCESS REFORM EVALUATION (SHARE)**  
**Grant Award Information**

July 2009

## GRANT AWARD INFORMATION

The State Health Access Reform Evaluation (SHARE) is National Program of the Robert Wood Johnson Foundation (RWJF) created to support the evaluation of health policy reform at the state level and develop an evidence-based resource to inform health reform efforts in the future. The program is administered by the State Health Access Data Assistance Center (SHADAC) housed within the University of Minnesota, School of Public Health. Lynn Blewett, Ph.D., SHADAC's Principal Investigator and Associate Professor in the Division of Health Policy and Management, is leading the implementation and management of the program. The SHARE Program began in December 2006 and will run five years, ending in November 2011.

SHARE has the following key goals: to 1) coordinate evaluations of state reform efforts in a way that establishes a body of evidence to inform state and national policy makers on the mechanisms required for successful state health reform; 2) identify and address gaps in research on state health reform activities from a state policy perspective; and 3) disseminate findings in a manner that is meaningful and user-friendly for state and national policy makers, state agencies, and researchers alike.

During the first five months of 2007, SHARE worked with a Technical Advisory Group (TAG) to develop a conceptual framework to guide the research focus and the approach to grant making. To facilitate grant making that is consistent with the SHARE framework, the TAG developed a set of research questions focused on key dimensions of reform: efficiency in program implementation, affordability, and sustainability.

In August 2007, SHARE released a call for proposals and received 62 proposals covering a wide range of topics and disciplines. 26 applicant teams were invited to submit a full proposal. A separate Proposal Advisory Group (PAG), made up of a nationwide panel of experts, reviewed the full proposals. Of the 26 full proposals, the committee recommended funding 15 totaling approximately \$5 million in grant awards. SHARE added a 16<sup>th</sup> study in May 2008, commissioned due to a significant policy change in Maryland that warranted investigation. The following is an overview of the 16 studies that have received SHARE funding.

For more information about SHARE, please contact Deputy Director Elizabeth Lukanen (612-626-1537, or by email at [elukanen@umn.edu](mailto:elukanen@umn.edu)) or visit the SHARE website: [www.statereformevaluation.org](http://www.statereformevaluation.org).

As SHARE grantees begin to release preliminary findings, SHARE will assist in the dissemination effort by publishing the findings as formal issue briefs. Check our website to stay updated about these publications, or join the SHARE e-mail list at our homepage in order to be notified when they are available.

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# GEOGRAPHIC DISTRIBUTION OF REFORMS BEING STUDIED

## 29 States Being Examined in Studies

MAP

States Being Examined in Single State Studies	States Being Examined in Multi-State Studies	
<ul style="list-style-type: none"> <li>▪ California (2 studies)</li> <li>▪ Maryland</li> <li>▪ Massachusetts</li> <li>▪ New Mexico</li> <li>▪ Rhode Island</li> <li>▪ Wisconsin</li> <li>▪ Vermont</li> </ul>	<ul style="list-style-type: none"> <li>▪ Colorado</li> <li>▪ Delaware</li> <li>▪ Florida</li> <li>▪ Idaho (2 studies)</li> <li>▪ Illinois (4 studies)</li> <li>▪ Indiana (2 studies)</li> <li>▪ Iowa</li> <li>▪ Kentucky</li> <li>▪ Maine (3 studies)</li> <li>▪ Maryland (2 studies)</li> <li>▪ Massachusetts (5- 4 studies)</li> <li>▪ Minnesota</li> <li>▪ Missouri (2 studies)</li> <li>▪ Montana</li> <li>▪ New Hampshire</li> <li>▪ New Jersey (2 studies)</li> </ul>	<ul style="list-style-type: none"> <li>▪ New Mexico (2 studies)</li> <li>▪ New York (2 studies)</li> <li>▪ Oklahoma</li> <li>▪ Pennsylvania</li> <li>▪ Rhode Island</li> <li>▪ South Dakota</li> <li>▪ Texas</li> <li>▪ <del>Utah</del></li> <li>▪ Virginia</li> <li>▪ Vermont</li> <li>▪ Washington</li> <li>▪ West Virginia</li> </ul>

## STUDY DESCRIPTIONS

### **Evaluation of Risk Selection in Market-Based State Programs**

Grantee Institution: Mathematica Policy Research, Princeton, NJ  
Principal Investigator: Deborah Chollet, Ph.D. Senior Fellow  
dchollet@mathematica-mpr.com  
Co-Principal Investigator: Amy Lischko, D.Sc. Assistant Professor, Tufts University School of Medicine  
Investigators: Su Liu, Ph.D. Senior Researcher, Mathematica Policy Research  
Kate Stewart, Ph.D. Researcher, Mathematica Policy Research  
Awarded: \$599,514

Maine, Massachusetts, and New York each have sponsored voluntary health insurance programs that offer private coverage to small businesses, self-employed workers and other individuals with limited access to affordable insurance. This study will assess the reforms' experience with risk selection using a mixed-methods approach in which empirical analyses will be used to quantify risk selection in state programs supplemented with interviews with state officials and major carriers. The quantitative analyses will rely on claims data, program administrative data, insurers' annual financial reports and state-specific data from the BRFS.

### **Evaluation of Three States' Reforms to Cover All Children**

Grantee Institution: UCLA  
Principal Investigator: Jose J Escarce, M.D., Ph.D. Professor of Medicine, David Geffen School of Medicine  
jescarce@mednet.ucla.edu  
Co-Principal Investigator: Carole Roan Gresenz, Ph.D. Senior Economist, RAND  
Investigators: Nicole Lurie, M.D., MSPH. Senior Natural Scientist, RAND  
Miriam Laugesen, Ph.D. Assistant Professor, Columbia University Mailman School of Public Health  
Awarded: \$599,357

Illinois, Pennsylvania, and Washington have recently enacted reforms that provide access to health insurance coverage to all, or nearly all, children through a combination of SCHIP eligibility expansions and voluntary "buy-in" provisions. The study will use econometric analyses of secondary data to estimate the effects of the reforms on children's insurance coverage, take-up of public coverage, crowd-out of private coverage, and out-of-pocket costs among families with uninsured children. The main data sources will be the public use Annual Social and Economic Supplements (ASEC) of the Current Population Survey (CPS), the public use Washington State Population Surveys (WSPS), and geo-coded versions of the MEPS-Household Component (MEPS-HC).

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### **How Affordable are State Coverage Plans?**

Grantee Institution: University of Southern Maine, Portland, ME  
Principal Investigator: Elizabeth Kilbreth, Ph.D. Associate Research Professor  
bethk@usm.maine.edu  
Co-Principal Investigator: Katherine Swartz, Ph.D. Professor, Department of Health Policy and Management, Harvard School of Public Health  
Investigators: William Thomas, Ph.D. Professor, Institute for Health Policy, Muskie School of Public Service, University of Southern Maine  
Michael Doonan, Ph.D. Assistant Professor, Schneider Institute for Health Policy, Heller School for Social Policy and Management  
Kimberley Fox. Senior Policy Analyst, Institute for Health Policy, Muskie School of Public Service, University of Southern Maine  
Awarded: \$567,421

Massachusetts, Maine and Vermont have all enacted strategies to expand health insurance to people who would otherwise be uninsured. This study will use program enrollment and utilization to assess the effects of premium requirements and participant cost-sharing on access to care. The investigators will use a cross-sectional study using multivariate modeling and qualitative policy analytic techniques and will create person-level data files that link claims information with income and demographic data.

### **Effects of Medicaid Reform on Access to Care, Program Sustainability, and Administrative Efficiency in Kentucky and Idaho**

Grantee Institution: Urban Institute, Washington, D.C.  
Principal Investigator: Genevieve Kenney, Ph.D. Principal Research Associate, Health Policy Center  
jkenney@ui.urban.org  
Investigators: Ed T. Baker, Ph.D. Director, Center for Health Policy, Boise State University  
Julia F. Costich, JD., Ph.D. Chair, Department of Health Services Management, University of Kentucky College of Health Services  
Others: Sharon K. Long, Ph.D. Principal Research Associate, Urban Institute Health Policy Center  
Judith Solomon, JD. Senior Fellow, Center on Budget and Policy Priorities  
Jeffery Talbert, PhD. Associate Professor, University of Kentucky College of Pharmacy  
James Henry Marton, PhD. Associate Professor, Georgia State University  
Awarded: \$399,305

This study will evaluate Medicaid reform initiatives in Kentucky and Idaho that offer different benefit plans to different beneficiary populations and impose cost sharing requirements. Both programs have a goal of reducing program costs, while maintaining access and quality. The research objectives are to understand the administration of the plans, their impact on beneficiary access to timely and appropriate care, to assess their impact on program costs, and to identify the effects of particular aspects of the reforms. The study will involve interviews and use administrative enrollment and claims/encounters data.

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### **Achieving Universal Coverage through Comprehensive Health Reform: The Vermont Experience**

Grantee Institution: University of New England Center for Health Policy, Planning and Research, College of Osteopathic Medicine, Portland, ME

Principal Investigator: Ronald D. Deprez, Ph.D., MPH. Executive Director

Co-Principal Investigator: Sherry Glied, Ph.D. Professor & Chair, Department of Health Policy and Management, Columbia University Mailman School of Public Health

Investigators: Susan Besio, Ph.D. Director, Vermont Health Care Reform Implementation, Office of the Governor  
Marc E. Voyvodich, MHA. Chairman/CEO, Stoudwater Associates

Others: Brian Robertson, Ph.D. Research Director, Market Decisions, LLC  
Amy Kinner, MS. Research Associate, University of New England Center for Health Policy, Planning and Research

Awarded: \$397,517

The investigators will conduct a comprehensive evaluation of the Vermont health reform initiative to provide universal access to comprehensive, affordable health insurance coverage and, ultimately, access to quality health care. Primary and secondary data sets (primarily the 2005 Vermont Household Health Insurance Survey and CPS) will be analyzed to assess the impact of the reform on public, private, and self-insured coverage options, enrollment, premiums and other out-of-pocket costs, utilization indicators, program implementation administrative costs, and related measures.

### **Evaluation of Extending Dependent Coverage to Young Adults**

Grantee Institution: Rutgers University, New Brunswick, NJ

Principal Investigator: Joel C. Cantor, Sc.D. Professor and Director, Center for State Health Policy  
jcantor@ifh.rutgers.edu

Co-Principal Investigator: Alan C. Monheit, Ph.D. Professor, Health Systems and Policy, University of Medicine and Dentistry of New Jersey – School of Public Health

Awarded: \$359,567

Since 2003, more than 20 states have enacted dependent coverage expansions. This study will develop a detailed description of these dependent coverage policies, conduct descriptive analyses and fit models predicting the likelihood of policy enactment, use difference-in-difference models to assess the impact on coverage of state dependent coverage expansions (CPS and New Jersey household survey data) and assess policy implementation and unintended consequences for health coverage markets via semi-structured interviews. The study will include Colorado, Delaware, Florida, Idaho, Illinois, Indiana, Iowa, Maine, Maryland, Minnesota, Missouri, Montana, New Hampshire, New Jersey, New Mexico, Rhode Island, South Dakota, Texas, Virginia, and West Virginia, but will focus on and provide a more detailed analysis for New Jersey.

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## **An Evaluation of the Impacts of State Health Reform Initiatives in IL, MA, and NY**

Grantee Institution: Urban Institute, Washington, D.C.  
Principal Investigator: Sharon K. Long, Ph.D. Principal Research Associate, Health Policy Center  
slong@ui.urban.org  
Co-Principal Investigator: Alshadye Yemane, MPP. Research Associate, Urban Institute Health Policy Center  
Awarded: \$339,842

This study will examine the effects of reform efforts in Illinois, Massachusetts and New York. In particular, it will assess impacts on coverage, access to and use of care, and out-of-pocket (OOP) health costs using National Health Interview Survey (NHIS) data. The impact analyses will take advantage of the “natural experiment” that occurred in the three states to compare outcomes (insurance status, access and use, and OOP costs) for the target populations in each state before and after policy changes.

## **Incremental Strategies to Cover Low-Income Uninsured Adults**

Grantee Institution: Johns Hopkins Bloomberg School of Public Health, Baltimore, MD  
Principal Investigator: Lisa Dubay, Ph.D., Sc.M. Associate Professor, Department of Health Policy & Management  
ldubay@jhsph.edu  
Investigators: Hugh Waters, Ph.D. Associate Professor, Department of Health Policy & Management, Johns Hopkins Bloomberg School of Public Health  
Bradley Herring, Ph.D. Assistant Professor, Department of Health Policy & Management, Johns Hopkins Bloomberg School of Public Health  
Christina Moylan, MHS. Doctoral Candidate, Department of Health Policy & Management, Johns Hopkins Bloomberg School of Public Health  
Awarded: \$326,539

This study will evaluate reform efforts in the following five states where incremental progress in expanding health coverage to adults via Section 1115 demonstration waiver authority has been the primary strategy: Illinois, Maryland, New Jersey, New Mexico, and Oklahoma. The principal objectives of the research are to understand the political and economic context that leads states to enact incremental strategies to cover adults; to determine how these factors affect the sustainability of the initiative; and to estimate the impact of these incremental strategies on three key outcomes of interest. The study will use semi-structured interviews with key informants and administrative data, CPS data and AHA data to examine the success of the programs.

## **Sheltering Employee Premium Contributions from Tax Using “Section 125 Plans”**

Grantee Institution: Wake Forest University Health Sciences, Winston-Salem, NC  
Principal Investigator: Mark A. Hall, J.D. Professor, Public Health Sciences  
mhall@wfubmc.edu  
Awarded: \$216,779

This study will evaluate three different states’ approaches to using section 125 plans to reduce the costs of health insurance (Indiana, Massachusetts, and Missouri). Specifically, the study will examine section 125 plans in the context of their affordability, sustainability, and their efficiency. Affordability will be measured by the reduction in cost of insurance. Sustainability will be measured by level of adoption, use, and acceptance by employers, employees, and insurance agents. Administrative efficiency will be measured by the costs of program administration for both employers and regulators. This will be a mixed-method (quantitative and

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qualitative), comparative case study analysis, consisting principally of descriptive data and in-depth interviews. Data will include state survey data, administrative data and claims data.

### **Evaluating the Implementation of the Rhode Island HealthPact Plans and the Design and Implementation of Rhode Island’s Medicaid Block Grant**

Grantee Institution: Brown University, Providence, RI  
Principal Investigator: Vincent Mor, Ph.D. Professor & Chair, Department of Community Health  
Vincent\_Mor@brown.edu  
Co-Principal Investigator: Amal Trivedi, M.D., MPH. Assistant Professor, Department of Community Health, Brown University  
Investigators: Melissa Clark, Ph.D. Associate Professor, Department of Community Health, Brown University  
William Rakowski, Ph.D. Professor, Department of Community Health, Brown University  
Others: Edward Miller, Ph.D. Assistant Professor, Department of Community Health, Brown University  
Sylvia Kuo, Ph.D. Assistant Professor, Department of Community Health, Brown University  
Awarded: \$200,000

This study will evaluate the adoption, implementation, and outcomes of the HealthPact plan in Rhode Island, a small group plan with two levels of coverage based on several healthy living pledges. The study will use key informant interviews to identify a variety of different issues that have contributed to low enrollment in the program. In addition, this study will evaluate the design and implementation of Rhode Island’s Global Consumer Choice Compact Waiver, which is the first federal waiver to “block grant” Medicaid for a state. The research team will conduct in-depth interviews with key stakeholders, review pertinent documents, and observe relevant hearings and meetings in order to accomplish two goals: (1) Understand the circumstances that led to the Global Waiver proposal, its design, and its approval by the federal government; and (2) assess the very early implementation of the waiver itself, including an analysis of the spending cap and the risks the state assumed in agreeing to the cap in exchange for the waiver.

### **Evaluating Wisconsin’s BadgerCare Plus Reform Package: Effects on Enrollment, Efficiency, and Churning**

Grantee Institution: University of Wisconsin School of Medicine & Public Health, Population Health Institute, Madison, WI  
Principal Investigator: Thomas Oliver, Ph.D. Associate Professor and Director of Health Policy  
troliver@wisc.edu  
Co-Principal Investigator: Tom Deleire, Ph.D. Associate Professor, UW School of Medicine & Public Health  
Investigators: Donna A. Friedsam, MPH. Researcher and Associate Director for Health Policy, UW School of Medicine & Public Health  
Alison Bergum, MPA. Associate Researcher, UW School of Medicine & Public Health  
Others: D. Paul Moberg, Ph.D. Senior Scientist, UW Population Health Institute.  
Barbara (Bobbi) Wolfe, Ph.D. Professor and Director, LaFollette School of Public Affairs, University of Wisconsin

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Thomas Kaplan, Ph.D. Senior Scientist, Institute for Research on Poverty,  
University of Wisconsin

Awarded: \$199,970

This study will evaluate the program simplification initiatives that were part of BadgerCare Plus and how they affect enrollment, including overall coverage rates and target efficiency, churning, and program sustainability. The study will use the Wisconsin Family Health Survey, ACCESS usage reports, the County Income Maintenance workload model and interviews with enrolled members, providers, advocacy groups, employers, and program administrators.

### **Assessing the First Use of Auto-Enrollment for a State Coverage Expansion**

Grantee Institution: Urban Institute, Washington, D.C.

Principal Investigator: Stan L. Dorn, JD. Senior Research Associate, Health Policy Center  
sdorn@ui.urban.org

Investigator: Sharon K. Long, Ph.D. Principal Research Associate, Urban Institute Health  
Policy Center

Others: Ian Hill, MPA, MSW. Principal Research Associate, Urban Institute Health  
Policy Center  
Embry Howell, Ph.D. Principal Research Associate, Urban Institute Health  
Policy Center

Awarded: \$197,892

This study will focus on Massachusetts' use of Uncompensated Care Pool data to auto enroll people into CommCare, investigating access to and utilization of care by these individuals. The study will use CPS data along with encounter data reported by CommCare's contracted Managed Care Organizations to compare demographic variables and health status indicators for automatic enrollees and self-initiated enrollees. In addition, the study will be supplemented by qualitative information garnered from key informant interviews, site visits, administrative data analysis, and enrollee focus groups.

### **Evaluating Small Group Employer Participation in New Mexico's SCI Program**

Grantee Institution: New Mexico Human Service Department, Santa Fe, NM

Principal Investigator: Anna S. Sommers, PhD. Senior Research Analyst, The Hilltop Institute,  
University of Maryland, Baltimore County  
asommers@hilltop.umbc.edu

Co-Principal Investigator: Mari Spaulding-Bynon, JD. Insure New Mexico Bureau Chief, New Mexico  
Human Services Department

Investigator: Charles Milligan, JD, MPH. Executive Director, The Hilltop Institute,  
University of Maryland, Baltimore County

Awarded: \$195,855

This study will examine the New Mexico State Coverage Insurance (SCI) program that targets working age adults through a public/private partnership program. The principal objective of the study is to identify factors that have influenced employer participation in New Mexico's SCI program. Data will include state

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administrative data on enrollment into SCI, a survey of participating employers and non-participating employers who inquired about SCI, and employed individuals who enrolled with no employer sponsorship.

### **Evaluating the Impact of Outreach and Enrollment Strategies in California**

Grantee Institution: USC Keck School of Medicine, Department of Family Medicine, Alhambra, CA  
Principal Investigator: Michael R Cousineau, Dr.PH, Associate Professor and Director, Center for Community Health Studies  
cousinea@usc.edu  
Co-Principal Investigator: Gregory Stevens, Ph.D. Assistant Professor, USC Keck School of Medicine, Center for Community Health Studies  
Awarded: \$187,218

This study will address the problem of California's uninsured children that are eligible but not enrolled in public programs. The objective of this study is to evaluate the effectiveness of outreach and enrollment strategies, particularly technology-based interventions. Data sources will be enrollment data, California Health Interview Survey data, and data on outreach and enrollment strategies collected through bi-annual surveys.

### **Evaluation of 12-Month Continuous Eligibility in Medicaid**

Grantee Institution: UCLA, Los Angeles, CA  
Principal Investigator: E. Richard Brown, Ph.D. Director, Center for Health Policy Research  
erbrown@ucla.edu  
Co-Principal Investigator: Shana Alex Lavarreda, MPP. Senior Research Associate, UCLA Center for Health Policy Research  
Investigators: Dylan Roby, PhD. Research Scientist, UCLA Center for Health Policy Research  
Jennifer Kincheloe, MPH, PhD. Research Scientist, UCLA Center for Health Policy Research  
Awarded: \$172,533

This study assesses whether instituting 12-month continuous eligibility directly benefited California's children enrolled in Medi-Cal by improving their health care utilization outcomes, specifically increasing their rates of well-child visits and decreasing avoidable emergency department and hospital visits. This study will assess whether 12-month continuous eligibility improves health utilization outcomes by analyzing Medi-Cal administrative data.

### **Maryland Kids First Act Outreach Evaluation**

Grantee Institution: Maryland Department of Health and Mental Hygiene (DHMH), Baltimore, MD  
Principal Investigator: David Idala, MA. Senior Research Analyst, The Hilltop Institute, University of Maryland, Baltimore County  
didala@hilltop.umbc.edu  
Co-Principal Investigator: Tricia Roddy, MHSA. Director of the Office of Planning, Maryland DHMH  
Investigator: Charles Milligan, JD, MPH. Executive Director, The Hilltop Institute, University of Maryland, Baltimore County  
Other: Cheryl Powell, MPP. Senior Research Analyst, The Hilltop Institute, University of Maryland, Baltimore County

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Awarded:

\$183,664

This study will analyze Maryland's use of income tax records to identify children eligible for, but un-enrolled in, Medicaid and/or SCHIP. The research will evaluate the logic behind the collection and use of these data, implementation of the pre-determined algorithm, and how well the state achieved its goals to identify and enroll uninsured eligible children in Medicaid and/or SCHIP. This study also seeks to more broadly inform other states' efforts to use existing sources of data, such as tax records, for outreach and enrollment. A rigorous evaluation of this novel outreach strategy will be of great interest to states facing similar problems identifying and enrolling eligible uninsured children.

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