

About SHARE

The State Health Access Reform Evaluation (SHARE) is a Robert Wood Johnson Foundation (RWJF) program that supports rigorous research on health reform issues, specifically as they relate to the state implementation of the affordable Care Act (ACA). The program operates out of the State Health Access Data Assistance Center (SHADAC), an RWJF-funded research center in the Division of Health Policy and Management, School of Public Health, University of Minnesota. 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.

Dissemination of Findings

Findings from the SHARE studies will be released as a series of policy-relevant briefs targeted at state and national officials. These briefs will present findings in a user-friendly manner that highlights their relevance to the broader policy debate. Visit our website to view these resources, or join the SHARE e-mail list at our homepage in order to be notified when they are available:

www.statereformevaluation.org

Fall 2010

SHARE Grant Awards

With the passage of the Affordable Care Act (ACA), SHARE's most recent grants are quick-turnaround, policy-relevant studies aimed at identifying lessons to help states shape implementation of national health reform. The projects focus on topics such as monitoring the impact of reform at the state level, the new income eligibility for Medicaid (modified adjusted gross income (MAGI)), the impact reform on rural areas, and the income dynamics and characteristics of low- and moderate-income adults impacted by reform. The following is an overview of the eight grantees that have received second-round SHARE funding.

Developing a Monitoring Strategy for Health Reform's Progress and Effects

Len Nichols, PhD, MS, MA

Develop a strategy for measuring the impacts of health reform with respect to coverage expansion, delivery system reform, workforce development, and public health improvement by state. By convening state, academic and federal data experts, develop guidance to states on how to use select measures to track and interpret progress and outcomes on a variety of fronts.

Institution: George Mason University College of Health and Human Services

Grant Period: September 1, 2010 – August 31, 2011

Eligibility Determination Using a Modified Adjusted Gross Income: Implications for Enrollment under Health Reform

John Czajka, PhD

Cheryl Camillo, MPA

Analyze the potential implications of the ACA provision requiring states to use "modified adjusted gross income" (MAGI) to determine income eligibility for medical assistance under state plans and waivers. Convene a meeting between state officials and policy experts to discuss these implications and will use the CPS to conduct an empirical analysis to determine how MAGI compares with other income definitions that selected state have used. Through these analyses, develop a set of guidelines for states to use in translating their particular Medicaid/CHIP income definitions into the MAGI and filing-unit concepts that ACA requires.

Institution: Mathematica Policy Research

Grant Period: October 15, 2010 – June 14, 2011

Evaluation of State & Federal Young Adult Dependent Coverage Expansion Policies

Joel Cantor, ScD

Margaret Koller, MS

Evaluate the impact of state policies to extend eligibility for dependent coverage to young adults, analyzing (1) how variations in key access and cost provisions of state laws influence the coverage of targeted young adults; and (2) how the dependent coverage provisions of the ACA affect coverage of young adults as the provisions are phased in over 2010 and 2011.

Institution: Rutgers Center for State Health Policy

Grant Period: November 1, 2010 – April 30, 2013

Expanding Coverage and Ensuring Access: The Challenges and Opportunities of Implementing Health Reform in Rural America

Andrew Coburn, PhD, EdM

Identify and examine rural implementation issues, challenges, and potential policy and other strategies in two main areas of the ACA: (1) health system financing and delivery system reform and (2) insurance coverage expansions. Examine and highlight the important differences in how financing and delivery system innovations and insurance reform provisions are likely to work in rural versus urban populations/firms/areas. Evaluate how state policy and/or other strategies could be used to achieve more effective rural implementation.

Institution: University of Southern Maine Muskie School of Public Service

Grant Period: September 1, 2010 – August 31, 2011

Implications and Options for State-Funded Programs under Health Reform

Theresa Sachs

Document the enrollment, structure, funding and objectives of current state-funded programs for the uninsured, along with the legal, technical and policy issues that states will have to address as they review options for transitioning program enrollees as they become eligible for other coverage under ACA. Analyze possibilities for re-directing state dollars that will be freed up by the infusion of federal funds in 2014 to continue to protect the health of vulnerable populations in a way that is compliant with federal requirements and consistent with state goals.

Institution: Health Management Associates

Grant Period: September 1, 2010 – August 31, 2011

Income Dynamics and Characteristics of Health Reform Expansion Populations

Lara Shore-Sheppard, PhD, MA

Analyze the income dynamics and characteristics of low and moderate income adults impacted by ACA. Such an analysis will enable the coordination of enrollment between Medicaid/CHIP and insurance exchange plans and will facilitate the development of procedures for calculating premium subsidies. Additionally, learning about the population of Americans who will be eligible for free or subsidized coverage will facilitate efforts to target outreach and to accurately forecast service utilization.

Institution: Williams College

Grant Period: October 1, 2010 – October 1, 2012

Strategies for Moving the SNACC Project to the Next Level: Leveraging SNACC Data for Policy and Evaluation

Mike O'Grady, PhD

Use the SNACC project (a data linkage project conducted by SHADAC, NCHS, AHRQ, ASPE, CMS, and Census) as a platform for identifying the most useful set of next-generation data linkage projects for the purpose of informing health care reform implementation. Identify the barriers to creating these data sets, including current limits on data access, and evaluate whether the challenges and shortfalls created by these barriers outweigh the value added. This analysis will be conducted through interviews with technical staff who work with these data and key outside researchers and analytic staff who directly inform policymakers.

***Institution:** National Opinion Research Center (NORC)*

***Grant Period:** September 1, 2010 – November 30, 2010*

Using Behavior Nudges to Improve Disease Management: Cost-Effective Strategies for Improving Care of Low-Income Diabetics

Kate Baicker, Ph.D.

Analyze newly-available data on utilization of primary care and prescription drugs along with other outcomes among a population of diabetic Medicaid enrollees who received an intervention to test the effectiveness of behavioral nudges versus financial incentives in promoting statin use. The results will give policy-makers information on mechanisms for improving disease management and the effectiveness of utilization in public insurance programs. The lessons learned from this intervention may be able to provide insights into a broader class of program improvements that can be applied to other types of care in other populations and in other states.

***Institution:** Harvard School of Public Health*

***Grant Period:** September 1, 2010 – August 31, 2011*

More about the State Health Access Reform Evaluation (SHARE)

First funded by RWJF in 2007, SHARE provides information on the impact of coverage expansion efforts and timely guidance about how to effectively implement health reforms. Key goals of the program are to develop a coordinated approach to the study of health reform issues – specifically as they relate to the state implementation of national reform – and to produce and disseminate informative, user-friendly findings for state and federal policymakers and agencies, as well as leading researchers.

SHARE's initial round of funded research on state reform efforts included topics such as the impacts of expanding eligibility guidelines for young adult dependent coverage; the differential coverage impacts seen under reforms of varying scope; and the impact on crowd-out following public program enrollment and eligibility simplifications in Wisconsin and following comprehensive reforms in Vermont. Findings from a number of these studies can be found in the February 2011 special issue of *Health Services Research*. Additional findings are available at www.statereformevaluation.org.

SHARE operates out of the State Health Access Data Assistance Center (SHADAC), an RWJF-funded research center in the Division of Health Policy and Management, School of Public Health, University of Minnesota. SHADAC helps states monitor rates of health insurance coverage and understand factors associated with uninsurance. In addition to providing health policy analysis, SHADAC provides technical assistance to federal agencies that conduct health insurance surveys, and states that conduct their own surveys and/or use data from national surveys. 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.

For more information about SHARE, please contact Deputy Director Elizabeth Lukanen (612-626-1537; elukanen@umn.edu), or visit the SHARE website: www.statereformevaluation.org.