shadac

2023

ANNUAL REPORT

ABOUT SHADAC

The State Health Access Data Assistance Center (SHADAC) is a multidisciplinary health policy research center with a focus on the use of data to inform state policy. Based in Minneapolis, Minnesota, SHADAC is located within the University of Minnesota School of Public Health. For over 20 years, SHADAC has produced rigorous, policy-driven analyses, translating complex research findings into actionable information that is accessible to a broad audience. SHADAC faculty and staff are nationally recognized experts on collecting and applying health policy data to inform or evaluate policy decisions, with expertise in both federal and state survey data sources. We provide unbiased technical assistance and in-depth analysis to states and other organizations and collaborate with a wide range of partners including foundations, state and federal agencies, academic institutions, other research organizations, and nonprofits.

A NOTE FROM THE SHADAC DIRECTOR

Lynn A. Blewett, PhD, MPA

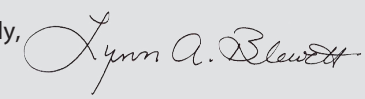
2023 was another busy and productive year for SHADAC; I am so grateful for our dedicated team of faculty, staff, and students who made this success possible. Our team's hard work and dedication are what allow SHADAC to produce high-quality products that are both actionable and relevant for policymakers, researchers, and our funding partners. There is much for SHADAC to be proud of this year. Our work on the Robert Wood Johnson Foundation-funded Medicaid Equity Monitoring Tool project yielded two exciting new products that identified quantitative and qualitative resources on Medicaid member experience and, crucially, highlight and provide recommendations around critical data gaps. A strategic partner, Health Leads, was engaged to connect with Medicaid community members directly. This collaboration will bring new insights by centering community voice in this important work toward advancing health equity.

We are also grateful for our continued work with the State Health and Value Strategies program at Princeton University to assist states with their data needs in order to inform policy decisions. Much of our work with SHVS this year focused on the unwinding of the continuous coverage requirement - aka the "Medicaid Unwinding". Works included reviewing and analyzing state reporting of reinstatement data; using sources like the Household Pulse Survey to monitor coverage transitions; looking at reporting requirements during this transition; and more.

We also were able to focus on other emerging policy issues and topics, including sexual orientation and gender identity (SOGI) data collection practices and standards, monitoring data and information on the opioid epidemic, responding to requests for comments on proposed changes to federal surveys such as the American Community Survey, and updating our resources like State Health Compare with the newest estimates and accompanying analyses.

We could not have had the success and accomplishments that we did in 2023 without our collaborators, funders, and partners. As we look towards this upcoming year, we are excited and proud to continue to work alongside them and our dedicated faculty, staff, and students to provide both data and analytic products that can spur meaningful policy impacts. We can't wait to see what 2024 brings!

Sincerely,



STATE HEALTH POLICY TECHNICAL ASSISTANCE

SHADAC provides direct technical assistance (TA) to individual states, creating forums to support state-to-state peer learning, and, more broadly, translating technical research and policy analysis into content that is both accessible and informative to decision-makers.

Featured Project

STATE HEALTH & VALUE STRATEGIES

SHADAC provides technical assistance as part of the Robert Wood Johnson Foundation's (RWJF) State Health & Value Strategies (SHVS), a program that connects state officials with experts in the field to support them in transforming their health care systems to be affordable, equitable, and innovative. SHADAC provides analytic and evaluation support with the goal of helping states use sound data to inform policy decisions on topics. Our focus in 2023 was on supporting states through the "unwinding" of the pandemic era Medicaid continuous coverage requirement. We also continued to provide hands-on support for states looking to improve demographic data collection (e.g., race, ethnicity, sexual orientation, gender identity, disability) in order to inform equity-focused initiatives.

As the unwinding of the Medicaid continuous coverage requirement continues, both states and the federal government have been tracking and monitoring the impacts of the resumption of eligibility redeterminations and disenrollments. In partnership with SHVS, SHADAC has been monitoring data dashboards and reports released by states as they track eligibility, redeterminations, and disenrollments. The following collection of expert perspectives include interactive visuals with links to unwinding indicators and reinstatement data.

- State Dashboards to Monitor the Unwinding of the Medicaid Continuous Coverage Requirement
- State-Based Marketplace Transition Data During the Unwinding
- States' Reporting of Medicaid Unwinding Reinstatement Data

Related Topical Work

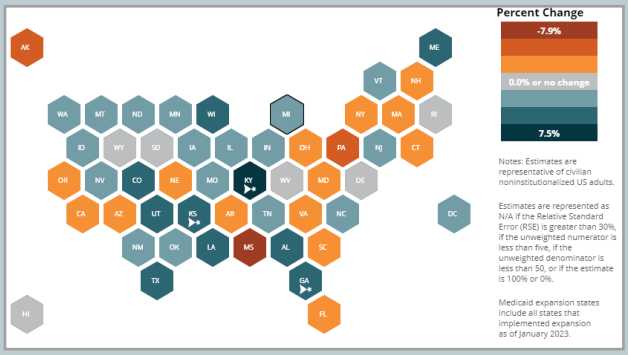
- State-Based Reinsurance Programs via 1332 State Innovation Waivers
- Long-Term Services and Supports (LTSS) Resources
- SHADAC's Lynn Blewett Featured on 'Hospitals in Focus' Podcast

Research Leaders

Emily Zylla

Elizabeth Lukanen

Featured Publication Tracking Health Insurance Coverage During the Unwinding: Monthly Data from the Household Pulse Survey



Additional Unwinding Work:

- Data to Monitor the Unwinding of the Medicaid Continuous Coverage Requirement - Presentation
- Best Practices for Publicly Reporting State Unwinding Data - Cross-Post Blog
- Reporting Requirements Related to Medicaid Unwinding: Considerations for Medicaid and the Marketplace - Blog
- Unwinding the Medicaid Continuous Coverage Requirement - Transitioning to ESI Coverage - Brief
- Using Surveys to Monitor Coverage Transitions During the Unwinding of the Medicaid Continuous Coverage Requirement - Blog

EMERGING POLICY ISSUES

In addition to the touchstone resources SHADAC produces and updates on a regular basis, our researchers continually monitor public health issues in anticipation of new and emerging concerns. From there, they identify and analyze data, developing new resources for policymakers to use as evidence in considering and making decisions. Whether conducting analysis on vaccination rates or the changing trends in substance use disorders, SHADAC closely monitors current affairs and considers how data can inform efforts to solve tough problems.

Research Leaders

Colin Planalp

Natalie Schwehr Mac Arthur

"Cannabis policy is a rapidly evolving arena in the U.S. with recent changes at the federal level and across dozens of states. It also remains an under-studied public health issue, so it is crucial for researchers to engage in monitoring and evaluation efforts while collaborating with policymakers to ensure we maximize benefits and mitigate potential harms in this new environment."

-Colin Planalp, Senior Research Fellow

Related Topical Work

- Staying Alive in America - Minnesota Public Radio
- Monitoring Broadband Expansion and Disparities using Data from State Health Compare - Blog
- Associations between Neighborhood Support and Child Health Outcomes - Blog
- Interventions Likely Prevented Childhood Poverty from Rising During the Pandemic - Blog
- New State Health Compare Estimates on ACEs Aim to Improve Understanding of Health Inequities - Blog

Public Health Implications of Cannabis Policy in Minnesota

Working alongside the newly established Cannabis Research Center (CRC) at the University of Minnesota, SHADAC researchers are using data from the National Survey on Drug Use and Health to examine three issues related to the public health implications of cannabis prior to its 2023 legalization in Minnesota: the prevalence of cannabis use, cannabis abuse and dependence (i.e., addiction), and driving under the influence of cannabis. This brief also provides background and context on U.S. and Minnesota cannabis policy.

Opportunities to Learn More About Serving Justice-Involved Individuals Through 1115 Demonstration Evaluations

Many justice-involved individuals, predominantly from marginalized communities, rely on Medicaid for crucial post-release healthcare. However, these individuals face significant obstacles navigating and accessing medical and behavioral health care services. States, spurred by CMS guidance, are exploring 1115 demonstration waivers to extend Medicaid services pre-release with California leading the way. This SHADAC brief underscores the need for comprehensive and equity-focused evaluation plans tailored to the challenges faced by justice-involved populations.

Improving Coordination Between SNAP and Medicaid in State Agencies

SHADAC has partnered with MEF Associates on their project with USDA's Food and Nutrition Service to examine State-level opportunities for coordination between the Supplemental Nutrition Assistance Program (SNAP) and Medicaid. The study involves site visits to State agencies, interviews with staff from both programs, and aims to produce a Best Practices Guide to enhance coordination between SNAP and Medicaid.

The Kids Aren't Alright: Adverse Childhood Experiences and Implications for Health Equity

This brief discusses how adverse childhood experiences (ACEs) can affect kids' health well into adulthood, and it draws on data from the National Survey of Children's Health to unpack the prevalence of those potentially traumatic experiences among children by demographic groups at the state and national levels.

HEALTH EQUITY

In the last year, SHADAC worked with new partners to better understand health disparities as well as the underlying factors that perpetuate health inequities. We continue to believe that better data collection and measurement are essential, particularly for monitoring and addressing the inequitable impacts of the pandemic. SHADAC's work in this area includes projects focused on health equity in the Medicaid program, technical resources on the availability of disaggregated data, analyzing data collection practices for measures like race, ethnicity, disability, and sexual orientation and gender identity (SOGI), and highlighting successful strategies in advancing health equity for key public health efforts, such as vaccinations.

Research Leaders

Christina Worrall

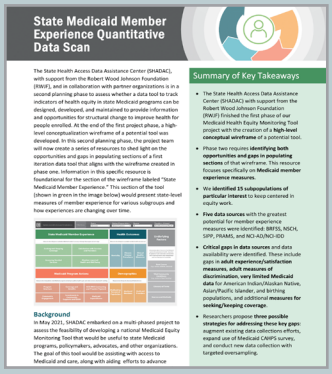
Andrea Stewart

Featured Projects

DETERMINING THE NEED FOR A MEDICAID EQUITY MONITORING TOOL

With support from the Robert Wood Johnson Foundation, SHADAC is leading a multi-phased project to assess whether identifying a set of key equity-related indicators and populating these relevant measures into a larger digital tool (i.e., a "Medicaid Equity Monitoring Tool") could be a helpful, feasible, and reliable way of tracking and advancing progress in achieving health equity in state Medicaid programs. SHADAC is currently in Phase 2 of the project, which involves collaborating with a new partner, Health Leads, who will facilitate community engagement to inform tool design and population. SHADAC is also conducting additional background research and data scans to understand the available data and contextual measures that could populate such a tool.

Featured Publication State Medicaid Member Experience Quantitative Data Scan


State Medicaid Member Experience Quantitative Data Scan

Summary of Key Takeaways

Background

DISPARITIES IN MINNESOTA'S COVID-19 VACCINATION RATES

Partnering with the Minnesota Electronic Health Record Consortium, SHADAC delved deep into an analysis of COVID-19 vaccination rates in Minnesota. Unlike many other studies, we were able to examine not only how COVID-19 vaccination rates differed across different demographic groups, but also how those disparities developed over time.

Disparities in Minnesota's COVID-19 Vaccination Rates - Issue Brief

Disparities in Minnesota's COVID-19 Vaccination Rates - Webinar

Minnesota's COVID-19 vaccine campaign left vulnerable groups with lagging rates - Blog

Related Topical Work

- Health Equity Measurement: Considerations for Selecting a Benchmark - SHVS Issue Brief
- Examining Discrimination and Health Care Access by Sexual Orientation in Minnesota - Blog
- To Improve Health Equity, Treat Disparities in Adverse Childhood Experiences - Blog
- Collection Practices of Race, Ethnicity, Language Data on Medicaid Applications in the States - Issue Brief

SURVEY DATA EXPERTISE & ANALYSIS

SHADAC has nationally recognized expertise in the collection and use of survey data, specializing in using survey data to monitor health care trends and to conduct policy analysis and evaluation. SHADAC produces analysis and survey support tools used by policymakers, researchers, and the media with a focus on state and federal health policy.

Federal Health Survey Data Releases

SHADAC covers the release of health insurance coverage data from major federal surveys such as the ACS, the CPS, the NHIS, and the MEPS, monitoring data releases year-round. This includes publicizing data release dates, analyzing the private-sector ESI landscape, summarizing key changes in health insurance trends through infographics and maps, and hosting an annual conversation with Census experts which provides an opportunity for dialogue and questions.

MACPAC Analysis of Survey Data

SHADAC provides on-demand quantitative analyses and technical assistance for the Medicaid and CHIP Payment and Access Commission (MACPAC) using a broad array of survey and vital statistics data, including restricted data only accessible to researchers with Special Sworn Status, which SHADAC researchers maintain.

Featured Publication Federal Survey Sample Size Analysis: Disability, Language, and Sexual Orientation and Gender Identity

Minnesota Health Access Survey

The Minnesota Health Access Survey, conducted collaboratively between SHADAC and the Minnesota Department of Health, is a large-scale telephone and mail survey that collects information on the health of Minnesotans and how they access health insurance and health care services. Findings from the survey provide an overview of the state's uninsured population and changes in their composition over time as well as trends in how Minnesotans obtain health insurance coverage.

Research Leaders

Kathleen Call

Robert Hest

METHODOLOGICAL RESOURCES

SHADAC maintains a variety of resources to guide state and federal analysts in the use of survey data. We developed the SHADAC Health Insurance Unit, or "HIU," and primary source of coverage hierarchy to help researchers estimate the characteristics and number of individuals who have access to public and private health insurance. Additionally, we track, highlight, and summarize important changes to federal data, monitor new data sources, and summarize key methodological issues such as the Medicaid undercount.

Featured Publication Using Enrollment Records to Evaluate Self-Reports of Monthly Coverage in the Redesigned Current Population Survey Health Insurance Module

METHODS ARTICLE

Using enrollment records to evaluate self-reports of monthly coverage in the redesigned current population survey health insurance module

We also update our methodological resources regularly with many products targeted at emerging issues in survey data and analysis. Examples include:

- What the Growing Medicaid Undercount Means for Data Users and Policymakers - Presentation
- Four Methods for Calculating Income as a Percent of the FPG in the BRFSS - Issue Brief
- SHADAC Responds to Proposed ACS Sexual Orientation and Gender Identity (SOGI) Test Questions - Blog
- Considerations from SHADAC: Proposed Revisions to Federal Standards for Collecting Race/Ethnicity Data - Blog
- FPG vs. FPL: What's the Difference? - Blog
- Changing Population Estimates: Implications for Data Users - Blog

STATE HEALTH COMPARE

Analysts and policymakers can use SHADAC's tool State Health Compare to view measures of insurance coverage, access, cost, utilization, and outcomes—as well as social and economic measures related to health. State Health Compare allows users to compare these measures across states and look at trends over time through user-generated maps, bar charts, trend lines, and tables. Users can also explore these measures within states by characteristics (e.g., age, race/ethnicity, education level, etc.). State Health Compare hosts more than 45 measures; estimates are available for timespans ranging from 4 to 21 years, drawing from 15 different sources. Click here for a full list of measures, data sources, and data years currently available and check out our short tutorial video to learn tips and tricks for using State Health Compare, and use this issue brief to learn more about Significance Testing Using State Health Compare!

POPULAR SHC MEASURES IN 2023

Health Insurance Coverage

This measure provides estimates of health insurance coverage by type (Medicare, employer-sponsored insurance [ESI], Medicaid, individual, and uninsurance) It can be viewed across 12 different breakdowns, with the most recent update of this measure allowing users to download estimates of insurance coverage for all of the minimum race categories for data collection outlined by the Office of Management and Budget (OMB): American Indian or Alaska Native (AIAN), Asian, Black or African American, Native Hawaiian or Other Pacific Islander (NHPI), and White. *Source: U.S. Census Bureau's American Community survey (ACS).*

Opioid-Related & Other Drug Poisoning Deaths

This measure provides annual, state-level rates of opioid-related and other drug poisoning deaths per 100,000 people. Annual estimates are available from 1999 to 2021 and can be broken down by different drug categories. A recent SHADAC brief, "The Opioid Crisis in the Pandemic Era", examines recent trends in the United States' opioid crisis and patterns in drug overdose death rates in 2021 (the most recent year of complete national data on overdose death rates), representing the first years of the COVID-19 pandemic. *Source: Center for Disease Control's WONDER Database.*

Child Vaccinations

State Health Compare now presents annual, state-level vaccination rates for children aged 35 months, specifically the percent of those children who received the full series of recommended vaccines. This measure also presents these state-level rates by race and ethnicity, health insurance coverage type, and poverty level. In a recent blog post, SHADAC researchers highlight key findings from this new child vaccination measure by race and ethnicity and type of health insurance coverage. *Source: National Immunization Survey (NIS-Child).*

Research Leaders

Robert Hest

Grace Liu

Exclusive Data Measures State Health Compare is the exclusive source for state-level data on a number of important measures that SHADAC produces using restricted-use data. In total, there are seven SHC measures that use this restricted-use data, including:

- **Usual Source of Medical Care**, a measure of access to health care, available by coverage type breakdowns.
- **Made Changes to Medical Drugs,** which measures the share of the population who skipped doses, delayed filling prescriptions, or took smaller doses to save money on prescription drugs.
- **Trouble Paying Medical Bills**, a measure of health care affordability available by age group and coverage type

HEALTH COVERAGE AND ACCESS TO CARE

Since its inception, SHADAC has been dedicated to conducting research and providing technical assistance in order to examine characteristics of and trends in health insurance coverage and access to care. SHADAC also examines and analyzes how these trends affect overall physical, social, and mental health status of various populations.

Research Leaders

Lacey Hartman

Karen Turner

CALIFORNIA HEALTH CARE FOUNDATION (CHCF)

SHADAC has worked with CHCF and their key partners for years; this long-term collaborative relationship produces relevant analyses and products to support CHCF's objectives of advancing meaningful, measurable improvements in the way the health care delivery system provides care to the people of California. In 2023, our work with CHCF focused on coverage, access, and affordability, with particular interest in serving and understanding disparities between varied populations.

Featured Publications

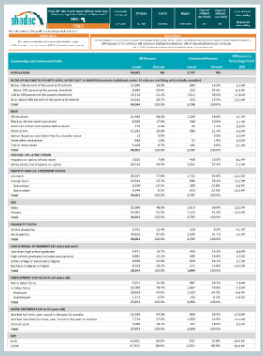
- California Achieves Lowest Uninsured Rate Ever in 2022 - Blog
- Did Disparities in Access Worsen During the Pandemic? - Issue Brief
- Telehealth Use and Experiences Among California Adults - Issue Brief

"CHCF provides support for critical research to inform health policy in the state of California with a focus on understanding and improving outcomes for those who have been historically marginalized and not well served by the existing health care system. We are grateful for the opportunity to contribute to this work to advance health equity in California and to disseminate lessons learned for other states."

- Lacey Hartman, Senior Research Fellow

Featured Projects

MINNESOTA'S COMMUNITY AND UNINSURED PROFILE



The Community and Uninsured Profile provides rates and counts of Minnesotans at a range of geographic levels using data from the American Community Survey (ACS). This resource was originally developed as part of "Minnesota's Uninsured and the Communities in Which They Live," a project funded by the Blue Cross Blue Shield Foundation of Minnesota. This tool supports targeted outreach and enrollment activities of health insurance navigators while also providing information about the uninsured to Minnesota policymakers as they develop strategies to reach the remaining uninsured in Minnesota. Users of this profile can explore characteristics of both the total population and the uninsured population in a specific ZIP code while also overlaying in-depth community characteristics. In addition, users can look at rates and characteristics of the community and uninsured within the state as a whole, by region, county, and state legislative district. Users can also filter by MNsure rating areas -- the geographic regions health insurers use to set premiums on MNsure. Case studies highlighting how the profile can support the enrollment efforts of local organizations and departments can be found in our blog on the topic here.

Related Topical Work

- Race/Ethnicity Data in CMS Medicaid (T-MSIS) Analytic Files: 2021 Data Assessment - Blog
- The Future of State All-Payer Claims Databases - Journal Article
- Association of Discrimination Based on SOGI with Health Care Access and Health Outcomes

ACKNOWLEDGMENTS

THANK YOU TO ALL OF OUR 2023 FUNDERS AND PARTNERS

We are extremely grateful for the generous and longstanding support of the Robert Wood Johnson Foundation (RWJF), which sustains our core efforts toward increasing the availability and use of relevant state and national data to inform state health policy. SHADAC is also honored to serve as a technical assistance provider under Princeton University's State Health & Value Strategies (SHVS). With the support from RWJF, SHVS, and a number of additional partners including foundations, federal and state agencies, and other research organizations, SHADAC continues to serve as an unbiased research, technical assistance, data, and evaluation resource.

Foundations

- Blue Cross Blue Shield of Minnesota Foundation
- California Health Care Foundation
- Robert Wood Johnson Foundation

Federal Agencies

- Medicaid and CHIP Payment & Access Commission
- U.S. Census Bureau

State and Local Agencies

- Hennepin County
- Minnesota Department of Health
- Minnesota Department of Human Services

Research and Consulting Organizations

- Benefits Data Trust (BDT)
- Health Leads
- MEF Associates
- Minnesota Electronic Health Record Consortium
- NORC at the University of Chicago
- Princeton University, State Health & Value Strategies
- RACE for Equity
- UCLA Data Equity Center
- University of Minnesota, Minnesota Population Center
- University of Minnesota, School of Medicine
- Young Policy Solutions

BEHIND THE SCENES SHADAC STAFF

Elliot Walsh

Research Dissemination Coordinator

Lindsey Theis

Sr. Communications Specialist

Pam Suneson

Administrative Associate

Our administrative associate, communications staff, and student research assistants are key behind-the-scene members of our SHADAC team. From contributing to research project initiatives, logistics, and planning, to maintaining SHADAC's website, promotional efforts, social media presence and overall brand identity, they serve as fundamental support staff to our research center.

Student Research Assistants

Student Research Assistants

- Annie Gowlovech
- Miles Hirson
- Madhulika Nallani
- Quin Nelson

Doctoral Students

- James Campbell
- Mateo Frumholtz
- Jhih-Yun Liu
- Claire McGlave

2023

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Visit www.shadac.org for more or connect with us on social media!