



November 2019

SHADAC Announcements

SHADAC Research Report Examines "What's Happening with Health Information Exchange in the State" of Connecticut



Under contract with the [Connecticut Health Foundation](#), SHADAC researchers have authored a [policy brief](#) on the launch of Connecticut's new statewide health information exchange (HIE) system, the Health Information Alliance. In addition to providing context for the development of the HIE, the [brief](#) also offers an overview of the current state landscape related to information exchange, describes potential obstacles and opportunities going forward, and offers a perspective on next steps and key questions to ask in order to ensure success.

New Medicaid Expansion and Medicaid Undercount Article from SHADAC in *Health Services Research Journal*

A [new paper](#) from researchers at SHADAC, the University of Maryland, and the U.S. Census Bureau, is the latest in a series of publications that look at the differing enrollment measurements found between federal survey data and the Medicaid and CHIP data provided by the Centers for Medicare and Medicaid Services (CMS) in order to gauge the degree of difference—known as “Medicaid undercount.” In [the article](#), the authors not only cross-compare measurements between all states, but also for states that did or did not adopt Medicaid expansion.

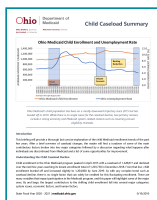


SHADAC Resource: Alternatives to ACA Compliant Plans in the Individual Market

Recent changes in the non-group health insurance marketplace have increased the prevalence of non-ACA-compliant health plan options. These plan types include Association Health Plans (AHPs), Short-Term Limited Duration plans (STLD), Agriculture/Farm Plans, and religiously based, pre-paid coverage plans, or “Sharing Ministries.” A new [blog resource](#) from SHADAC investigates each of these non-ACA-compliant plans and provides a brief description along with current estimates of enrollment or projected enrollment.

Data, Analysis, and Trends from the States

Ohio Summary Report on Medicaid Child Caseload



The Ohio Department of Medicaid recently released a [summary report](#) examining trends in state Medicaid child enrollment from January 2006 through August 2019. Top-level findings show an overall steady increase in enrollment from 2006 through June 2015, when enrollment began to slowly decline and then level off by 2019. The report also looks at a multiplicity of possible factors behind these enrollment figures, such as economic shifts, employment rates, population trends, and Medicaid enrollment system/process

issues, among others.

Report on the Uninsured in Connecticut

In a new [two-part research study](#), Access Health CT conducted interviews with recently insured individuals, both one-on-one and in focus groups, in order to understand drivers behind their decisions to obtain health insurance coverage and what barriers might prevent the currently uninsured from doing the same. Respondents listed insufficient wages, unaffordable healthcare coverage options, and overall lack of access to relevant resources to understand coverage plan options as the most common hurdles facing the state's uninsured population.



Payment and Delivery System Advancement in the States New Value-Based Payment Technical Assistance Opportunity for State Medicaid Programs



The Medicaid Innovation Accelerator Program (IAP) is offering a new [technical assistance \(TA\) opportunity](#) for state Medicaid programs looking to design and implement new value-based payment (VBP) strategies for fee-for-service (FFS) home and community-based services (HCBS). Selected state will be assigned a technical support team including an individualized coach and VBP subject experts, receive one-on-one technical assistance, and have access to other state participants through scheduled check-in discussions.

Interested states can find and fill out a letter of interest form [here](#).

Expanding Payer and Provider Participation in Data Exchange in California

For over two decades, California has worked toward establishing a statewide health information exchange program with varying results. A [new report](#) from the California Health Care Foundation (CHCF) and Manatt Health surveys experiences in five states—Florida, Maryland, Michigan, Minnesota, and North Carolina—and outlines lessons learned regarding available policy, contracting, and financial levers; forming quality and value-based collaborations; and establishing measurement and reporting systems to inform future HIE efforts in California and other states.



Other Data News & SHADAC Resources

New T-MSIS Files Available for Medicaid and CHIP data

The Research Data Assistance Center (ResDAC) has [recently released](#) the T-MSIS Analytic Files (TAFs) for Medicaid and the Children's Health Insurance Program (CHIP) for public research use, replacing the previous Medicaid Analytic eXtract (MAX) files. The [files](#) contain data on enrollment (including eligibility and demographic information), service use, claims, and payment, all organized by service month.

U.S. Census Bureau Releases 2018 ACS Public Use Microdata Sample Files

The latest [public use microdata sample \(PUMS\) files](#) from the 2018 American Community Survey (ACS) are now available from the U.S. Census Bureau. Users can access the 2018 files on the new [data.census.gov](#) website, as well as files for previous years going back through 2005 in SAS and CSV formats. The 2018 data is searchable by a number of variables, such as age, race, ethnicity, education etc., and by geographic location.

Additional Resources

Implementing ASAM Criteria for SUD Treatment through Medicaid Managed Care

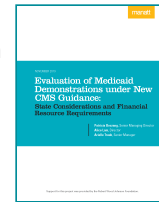


A new [issue brief](#) from Bailit Health for State Health and Value Strategies (SHVS) examines ways that states are expanding access to Medicaid-funded substance use disorder (SUD) treatments by leveraging 1115 demonstration waivers. Certain states (including California, Maryland, Massachusetts, and Virginia) have additionally implemented the American Society for Addiction Medicine (ASAM) Criteria—a multidimensional client assessment model—as a guideline for more effective client placement for SUD treatment. The [brief](#) includes interviews from state officials to profile best practices,

challenges, and lessons learned in utilizing ASAM Criteria as part of SUD treatment standards.

Evaluation of Medicaid Demonstrations under New CMS Guidance: State Considerations and Financial Resource Requirements

Following the Centers for Medicare & Medicaid Services' (CMS) release of improved guidance and strengthened requirements around state program evaluation, Manatt Health has developed a [new resource](#) to help states identify and understand potential implications and costs when undertaking evaluation demonstration design and implementation to meet the new standards. Informed by a review of publicly available state data and interviews with state Medicaid officials, independent evaluators, researchers and CMS officials, the report discusses key drivers behind increasing evaluation complexity and offers a range of financing lever options for states.



Recommended Reading

[Death toll from tainted cocaine rising across the country](#)

Laura Ungar, Kaiser Health New; NBC News

[The Opioid Epidemic's Impact on Children Will Cost the U.S. Billions without Urgent Action](#)

Elizabeth Wright Burak, Georgetown CCF

[Smart work by the University of Minnesota to find the uninsured](#)

Star Tribune Editorial

[Regional Health Improvement Collaboratives: Fertile Ground for Partnerships with Health Services Researchers](#)

Julie Sonier, AcademyHealth Blog

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