



*News from April 2020*

## SHADAC Announcements

### New Minnesota Health Insurance Model Estimates Employer-sponsored Health Insurance Losses during COVID-19



Professors Ezra Golberstein and Jean Abraham, faculty members in the University of Minnesota [Division of Health Policy and Management](#), worked with SHADAC researchers to develop a new Minnesota Health Insurance model (MN-HIM) to estimate the loss of employer sponsored insurance (ESI) from job loss due to COVID-19. The results show the potential impact on policy holders and their dependents and indicate that as many as 18.4 million individuals face potential disruptions and possible loss of their ESI. See the [report](#) and the accompanying [technical brief](#) for more details.

### SHADAC and SSRSS Survey Results Show Reduced Access to Care for U.S. Adults during COVID-19

A [recent, nationally representative survey](#) conducted in April 2020 by the survey firm SSRSS included SHADAC questions on access and coverage. The results showed that a majority of adults in the United States (58.7%) reported that access to health care services had been negatively affected by the coronavirus pandemic, including delayed or canceled health care appointments. Over half of adult respondents (54.5%) responded that they experienced an increase in worry about their ability to afford health care if they contract COVID-19.



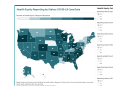
### Expert Perspectives from SHADAC on COVID-19 Data Dashboards and Health Equity Data

In two new Expert Perspectives produced for State Health & Value Strategies (SHVS), SHADAC researchers explored how states are collecting, reporting, and publishing data on the COVID-19 pandemic.



The first, [State COVID-19 Data Dashboards](#), reviews key indicators that states are reporting (such as the number of tests completed or the number of positive cases) and highlights innovative, public-facing dashboards. The author also provide an overview of "best practices" states can consider when developing or modifying COVID-19 dashboards (e.g., what data to include, how and when to update data, organization and presentation of dashboards, etc.).

[States' Reporting of COVID-19 Health Equity Data](#) looks in depth at which states are reporting data on the impacts of COVID-19 on vulnerable populations, including communities of color, low-income populations, and residents of congregate living facilities. Also included are interactive maps that explore the extent to which states are reporting data breakdowns by age, gender, race, ethnicity, and locational levels (ZIP code), group residence type, and for health care workers. These data were also presented during a webinar entitled "Health Equity and COVID-19: Tracking and Taking Action to Address Disparities," hosted by SHVS, with SHADAC and Health Equity Solutions. [Slides](#) from the presentation are available here, as well as a [video recording](#).



## Data, Analysis, and Trends from the States

### 2019 Massachusetts Health Insurance Survey



The Center for Health Information Analysis (CHIA) recently released a [report on the results](#) of the 2019 Massachusetts Health Insurance Survey (MHIS). Findings celebrated the state's continuing low rate of uninsured (2.9%) and the fact that most residents (92%) had coverage for the entire year. The report also highlighted concerns regarding access to and affordability of health care, finding that 32% of respondents reported trouble accessing health care and 48% reporting health care affordability issues. CHIA also released accompanying [data tables](#), a [methodology report](#), and a [short infographic](#) of the results.

### New Kentucky Health Issues Poll Focused on Coverage and Cost of Care

[New results](#) from the Kentucky Health Issues Poll (KHIP) shows working-aged Kentuckians (age 18-64) with health insurance coverage are still concerned about loss of coverage and costs of care. The [report](#) shows 22% of low-income adults report worry about losing health insurance coverage, and 29% of low-income adults reported delaying care due to cost.



### 2019 Colorado Health Access Survey: Disparities in Children's Uninsured Rates



Results from the 2019 [Colorado Health Access Survey](#) (CHAS) showed the overall uninsured rates for children climbing from 3.0% in 2017 to 4.3% in 2019. Survey results

also found that rates of uninsurance for Hispanic/Latin(x) children tripled from 2.4% to 7.9% over the same time period. The analysis includes estimates of change in the distribution of insurance with the majority of children receiving coverage from a parent or guardian's employer.

## Payment and Delivery System Advancement in the States

### Payment Reform and Primary Care during COVID-19

Milbank Memorial Fund released a [new issue brief](#) that makes the case for reforming the way that primary care payments are made in order to provide sufficient funds for transformation of practices in response to the COVID-19 pandemic. The authors recommend a shift away from fee-for-service (FFS) payments toward prospectively paid, risk-adjusted per member per month amounts. The brief presents different models through which this reform could be enacted, as well as challenges that could arise during implementation.



### COVID-19 Provider Response: A Prospective Payment System

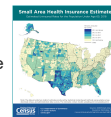


A [recent article](#) from the Center for Health Care Strategies (CHCS) examines the financial challenges of managing patient volume changes during the COVID-19 pandemic. The issue stems from the current fee-for-service (FFS) reimbursement model, where providers are paid per service they administer and fewer visits results in less income. CHCS discusses several prospective payment models (reimbursement strategies that pay providers a flat per-member-per-month amount) – that could improve the financial standing of struggling healthcare systems by removing the link between current patient volume and provider income. CHCS also discusses adaptations to these models to fit the needs of a COVID-19 response.

## Other Data News & SHADAC Resources

### 2018 U.S. Census Small Area Health Insurance Estimates Released

The U.S. Census Bureau [recently published](#) the Small Area Health Insurance Estimates (SAHIE) for 2018, which provide estimates of health insurance coverage for all U.S. counties and states. The SAHIE program is the only source of single-year health insurance coverage estimates at the county level. [Estimates are available](#) for each county by sex, age, and Federal Poverty Level (FPL). Race/ethnicity information is available at the state level.



### SHADAC Updated Estimates Added to State Health Compare



SHADAC has [added two new data measures and updated four pre-existing measures](#) with the latest available estimates from 2018 and 2019 on [our State Health Compare](#) web tool. The updated measures come from the Public Health, Health Behaviors and Outcomes, and Social and Economic Factors categories, and the new measures, [Broadband Internet Access](#) and [Medical Out-of-Pocket Spending](#), come from the Access to and Cost of Care categories.

## Special Focus Resources: COVID-19

### U.S. Census COVID-19 Demographic and Economic Resource Data

The United States Census Bureau recently published a [resource page](#) of demographic and economic information relating to COVID-19. The page includes a [data dashboard](#) of key indicators that states can use to better understand the impacts of the coronavirus pandemic, such as the average household size, age, sex, at-risk populations, and distributions of insurance coverage types by selected geographic locations at either the state or county level. The page also includes highlighted economic data such as average payroll, household income, and poverty level.



### State Health Compare: Focused Measures to Study State-level Impacts of COVID-19



SHADAC has compiled a [list of data measures](#), such as chronic disease prevalence and state per person public health spending, from our [State Health Compare](#) web tool that may be of interest to researchers in the study and understanding of COVID-19. State Health Compare includes estimates of for subpopulations that highlight persistent disparities in health including breakouts by sex, age, FPL, and race/ethnicity. This post also includes related resources, such as our [State Public Health Funding brief](#), that provide more in-depth analysis for selected measures.

### University of Minnesota Webinar: COVID-19 Health Policy Briefing

On April 24, 2020, the University of Minnesota School of Public Health Division of Health Policy and Management held a [webinar](#) to bring together local and national expert health policy perspectives (including SHADAC Director and SPH faculty, Professor Lynn Blewett) to discuss the current health policy challenges and share their perspectives on options associated with the COVID-19 pandemic, on topics ranging from modeling, insurance coverage, funding and access to care, payer and provider response, and more.



## Recommended Reading

[Trusted Research Can Guide Equity-focused Policies Addressing COVID-19](#)

Brian Quinn, Mona Shah; *The Hill*

[Experts: Oklahoma, Among the Unhealthiest States, Faces Heightened Risks for COVID-19](#)

Trevor Brown; *PBS Frontline* and *Oklahoma Watch*

[Public Health Labs Suffered Budget Cuts Prior to the Coronavirus Pandemic](#)

*Tom Scheck, Geoff Hing; NPR Morning Edition*

[A new public health crisis: caring for older adults living in nursing homes, assisted living and senior care](#)  
*Tetyana Shippee, Beth Virnig, Lynn Blewett; MinnPost*

[State Policy Option to Encourage Greater Use of Telehealth in State-Regulated Health Plans](#)  
*JoAnn Volk and Sabrina Corlette; Georgetown CHIR and State Health & Value Strategies (SHVS)*

[Pathways to Coverage for COVID-19 Testing and Treatment for Adults in Medicaid Expansion and Non-Expansion States](#)  
*Allison Orris and Kinda Serafi, Manatt Health and State Health & Value Strategies (SHVS)*

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SHADAC, 2221 University Avenue SE, Suite 345, Minneapolis, MN 55414