

News from July 2020

SHADAC Announcements

Update of the SHADAC Health Insurance Unit (HIU)



SHADAC originally <u>created and released</u> its "Health Insurance Unit," or "HIU," to help researchers reconcile the differences between the way that a "family" is defined in federal surveys with the way it's defined by most private and public health insurance programs. A <u>new SHADAC brief</u> details updates to the HIU in response to changes to health insurance policy and program eligibility rules. A second brief, utilizing the HIU to calculate insurance estimates from the American Community Survey (ACS), will be released following the U.S.

Census Bureau's data release in September 2020.

State-level Infographics Provide an Overview of the Opioid Crisis in 2018

SHADAC researchers have updated our two-page state-level infographics resource on opioid overdose death rates with data from 2018. The infographics highlight key findings for trends in drug overdose deaths from 2000-2018, show how each state's overdose rates compare to the national average, and provide a high-level comparison of all 50 states' overdose death rates broken down by each of five opioid and opioid-related drug types. All estimates used in the infographics are also available via our State Health Compare online data tool



SHADAC Co-authored Brief Addresses Antibiotic Overprescribing



As part of the Centers for Disease Control and Prevention's (CDC) <u>6|18 Initiative</u>, researchers from the Center for Health Care Strategies (CHCS), SHADAC, and the CDC have co-authored a <u>new technical assistance tool</u> that describes metrics that state Medicaid and public health agency partners can use to evaluate and target opportunities to improve antibiotic prescribing practices to address issues of overprescribing. The brief also provides a summary of data sources that can be used to evaluate efforts focused on

improving antibiotic stewardship.

SHADAC Collaborative Analysis of Transportation's Role in Addressing Social Isolation among Older Adults

Under contract with the National Center for Mobility Management (NCMM), a <u>collaborative brief</u> from researchers at the University of Minnesota's Rural Health Research Center, SHADAC and the Center for Transportation Studies evaluated the role of transportation in addressing public health issues of social isolation and loneliness in older adults. The report includes recommendations on how to solve issues surrounding access to, cost of, and understanding of publicly funded transportation options for older adults.



Data, Analysis, and Trends from the States

California Health Insurance Enrollment 2020 Edition



The California Health Care Foundation (CHCF) recently published the <u>2020 edition</u> of the California Health Insurance Enrollment report, part of the CHCF California Health Insurers and Enrollment - Almanac Collection. Data from the report show 32.7 million Californians enrolled in 2019, nearly unchanged from 2018 enrollment, with gains in employer-

sponsored insurance (1.2%) and Medicare (5.9%) enrollment and nearly corresponding declines in individual (-5.4%) and the state's Medicaid program, Medi-Cal, (-2.9%) enrollment.

Study finds Kansas Marketplace Enrollment Declined Pre-COVID

A <u>new analysis</u> from the Kansas Health Institute (KHI) found a trend in declining enrollment in the Kansas Federally Facilitated Marketplace. At the end of 2019, roughly 4,000 fewer Kansans had enrolled or been re-enrolled than in the previous year and, when compared to 2016, the issue brief found a 15 percent drop in enrollment. The <u>brief</u> provides a general



overview of marketplace enrollment and detail on enrollee characteristics such as how many people enrolled by region, by age, by financial assistance levels, and how much the average monthly premium varied across the state.

Payment and Delivery System Advancement in the States

Manatt Health Webinar: How is COVID-19 Transforming Value-Based Payment?



On July 23, Manatt Health hosted a <u>webinar</u> that offered an overview of the shift from feefor-service (FFS) payment models toward value-based payment (VBP) with a focus on Medicare and other CMMI initiatives. The presentation includes a discussion of the different types of possible VBP models, as well as projected impacts on provider costs and

revenues and care delivery and quality measurement.

Other Data News & SHADAC Resources

Medical Expenditure Panel Survey (MEPS) 2019 Insurance Component Released

The Agency for Healthcare Research and Quality (AHRQ) released the 2019 Medical Expenditure Panel Survey Insurance Component (MEPS-IC) Health Insurance Tables, which provide <a href="nates-nat

June 2020 MACPAC Report

The Medicaid and CHIP Payment Access Commission released its June 2020 Report to Congress on Medicaid and CHIP. The report includes information on improving the integration of care for low-income people over age 65 and people with disabilities who are dually eligible for Medicaid and Medicare; ensuring that Medicaid is the payer of last resort when its beneficiaries also have coverage from another insurance program; and addressing concerns about high rates of maternal morbidity and mortality.



Update to SHADAC's Data Tool - The Minnesota Uninsured Profile



Dr. Kathleen Call and her research team at SHADAC have released the <u>latest in a series of updates</u> for their data tool, <u>the Minnesota Uninsured Profile</u>, which uses local data to support targeted outreach and enrollment strategies to reach the Minnesota's remaining uninsured. The update allows users to view the uninsured population not only by state, region, county, ZIP code, and state legislative district (both House and Senate), but also by

MNsure rating areas—the geographic regions health insurers use to set premiums on MNsure. The downloadable profile also includes an updated version of the <u>companion interactive map</u>.

SHADAC Briefs Examine Rising Suicide Rates across the Nation and in the States from 2000-2018

The United States <u>suicide death rate</u> rose to another historic high of 14.2 deaths per 100,000 people in 2018, up from 14.0 in 2017. This growth continued a decades-long increase in death rates from suicide in the U.S. <u>Two updated briefs</u> from SHADAC draw on new vital statistics data from the U.S. Centers for Disease Control and Prevention (CDC) to present trends and variations in suicide death rates across the nation, among the states, and by subpopulation breakdowns from 2000 to 2018.



Special Focus Resources: COVID-19

COVID-19 State Survey Activity



SHADAC released a new resource providing a summary of state efforts to capture information on the coronavirus pandemic through state and local surveys fielded between March 2020 and May 2020. Currently, the resource contains 47 surveys from 30 states and the District of Columbia, with several individual states reporting multiple surveys, and three multi-state surveys. The resource page provides additional information on topics covered within the surveys and, in certain cases, some early results. Additionally, the resource

includes a clickable state-level map that provides links to the data collection instruments and key survey results

CMS Medicaid and CHIP Flexibility in Response to COVID-19

The Center for Medicare and Medicaid Services (CMS) has authorized temporary flexibility to Medicaid and the Children's Health Insurance Program (CHIP) to aid states in responding to the COVID-19 pandemic. A new resource from State Health & Value Strategies (SHVS) organizes these declarations and flexibilities into a summative table that includes the changes, the effective date, current end date, and a citation for each measure.



Urban Institute Examines Effects of COVID-19 on Loss of Employment and Health Insurance Coverage



Urban Institute released two new analyses that examine loss of employment and subsequent loss of employer-sponsored insurance and avoidance of care among adults using data from their Coronavirus Tracking Survey. In the <u>first brief</u>, estimates from May 2020 show a roughly 4.9 percentage-point decline in employer-sponsored health insurance coverage. A <u>second companion brief</u> estimates that 45.5 percent of adults in families losing work or work-related income reported unmet need for medical care in their family and/or

avoided care because of concerns about exposure to COVID-19.

Recommended Reading

Connecting Systems to Build Health Equity During COVID-19

Chris Lyttle; RWJF Culture of Health Blog

Surveying social interactions during the pandemic

Charlie Plain & Martha Coventry; University of Minnesota School of Public Health News

\$10 per person is simply not enough to deal with a public health crisis

Bryan Koch; Arizona Mirror

State Health Compare data offer baseline for measuring pandemic's impact on suicide, drug overdose death rates

Colin Planalp; SHADAC Blog

North Dakota had second highest rise in suicide rates from 2000 to 2018, study says

April Baumgarten; The Dickinson Press

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