SHADAC Announcements

SHADAC Brief for CHCF Discusses "Anticipating COVID-19 Vaccination Challenges through Flu Vaccination Patterns"

A new issue brief from SHADAC researchers, funded by the California Health Care Foundation (CHCF), examines flu vaccination rates as the closest possible analog to understanding how the implementation of a widespread coronavirus vaccination campaign will unfold. Key findings from the brief show flu vaccination rates consistently fall far short of the minimum anticipated rate (70%) expected to be needed to reach population immunity against COVID-19, not only overall for the U.S. (38.7%), but also across all subgroups, even those with the highest reported vaccinations (adults age 65 and older at 59.1%).

- **Related Webinar** - COVID-19 Vaccine Challenges: Illustrating Hurdles to Population Immunity and Equity Using Flu Vaccination Data. On Thursday, February 4, SHADAC held a webinar highlighting data from the recently published brief for CHCF using flu vaccination rates for U.S. adults as a proxy to identify population subgroups that may be harder to reach with a COVID-19 vaccine. Senior Research Fellow Colin Planalp presented an analysis of several demographic categories, such as age, race/ethnicity, chronic health conditions, and health insurance coverage status, for both the U.S. and California as a state example. A recording of the webinar and presentation slides are also available.

SHADAC Expert Perspective for SHVS Examines State Monitoring Strategies for Equitable COVID Vaccine Rates

In a recently published expert perspective for State Health & Value Strategies (SHVS), SHADAC researchers scanned states to see what data they are currently publically reporting related to vaccine administration. The post is also accompanied by an interactive map that explores the extent to which all 50 states are reporting vaccine administration data breakdowns by age, gender, race, ethnicity, provider type, and level of geography; what data sources are being used; and what options states can consider to collect more information via survey data in the future.

New Resource from SHADAC and NGA Defines and Highlights Setting-specific COVID Outbreak Reporting among States

Working with the National Governor’s Association (NGA), SHADAC developed a resource examining the 18 states thus far that have defined and are reporting “setting-specific” COVID-19 outbreaks (e.g., outbreaks in schools and workplaces, but specifically excluding nursing homes) as of November 2020. The resource highlights examples that other states can look to when considering adapting and expanding COVID-19 reporting to include setting-specific reporting (also known as “cluster reporting”), and also contains a summary of the status of related reporting on contact tracing.

Data, Analysis, and Trends from the States

New 2019 Minnesota Health Access Survey (MNHA) Report

The Minnesota Department of Health (MDH) recently released a data report from the Minnesota Health Access Survey (MNHA), a collaboration between MDH and SHADAC, showed that in 2019, approximately 264,000 Minnesotans (4.7%) did not have health insurance coverage. Though the COVID-19 pandemic arrived in early 2020, the MNHA survey showed that at least through the first half of 2020, the state’s uninsured rate held steady, at 4.6%. This is partly due to increased enrollment in public health insurance programs and in the individual market, which offset some of the losses in employer-sponsored coverage.
Results from the California Health Care Foundation (CHCF)/NORC Health Policy Survey, conducted from November 2020 to January 2021, were recently published in a comprehensive data report. Key findings in the report showed Californians’ top priorities when it came to health issues, such as making sure all Californians have access to health insurance coverage, making sure those with mental health issues can receive needed treatment, lowering out-of-pocket health care costs, as well as COVID-related issues of ensuring that the state and counties have enough resources and enough providers to control the spread of coronavirus.

Payment and Delivery System Advancement in the States

 Leveraging Value-Based Payment Approaches to Promote Health Equity: Key Strategies for Health Care Payers

As part of the Advancing Health Equity: Leading Care, Payment, and Systems Transformation program funded by the Robert Wood Johnson Foundation (RWJF), the Center for Health Care Strategies (CHCS) and the Institute for Medicaid Innovation (IMI) authored a recent report identifying six interconnected strategies to develop equity-focused value-based payment (VBP) approaches in order to mitigate health disparities at the state and local level. The six strategies listed in the report include: articulating an equity goal; assessing the payment and care delivery environment; selecting performance measures; setting performance targets; designing the payment approach; and addressing operational challenges.

Other Data News & SHADAC Resources

American Community Survey (ACS) 5-year PUMS Data Released

The U.S. Census Bureau has released the American Community Survey (ACS) 5-year Public Use Microdata Sample (PUMS) files for 2015-2019. The 5-year PUMS files offer multiyear estimates for geographic areas with fewer than 65,000 residents and, using these files, researchers are able to view the full range of population and housing unit and group quarters responses collected from individual ACS forms. 2019 data on distribution of Health Insurance Coverage Type by state is also now available for exploration on SHADAC’s State Health Compare web tool.

Eight Updated Measures Now Available on SHADAC’s State Health Compare

SHADAC has recently updated eight of the measures housed on our State Health Compare web tool with estimates from 2019, the latest data year available. Measures that have been updated span a variety of health categories (Cost of Care, Health Behaviors, Health Outcomes, Public Health, Quality of Care, and Social and Economic Factors), and range in topic from Child Vaccinations to Broadband Internet Access to Unaffordable Rents to Opioid-Related and Other Drug Overdose Deaths, and more.

Other Resources

Urban Institute Report Shows Many Uninsured Adults Have not Tried to Enroll in Medicaid or Marketplace Coverage

A new report from the Urban Institute draws from the results of the September 2020 Coronavirus Tracking Survey to take stock of the erosion of employer-sponsored insurance (ESI) and declining incomes that have occurred during the COVID-19 pandemic—factors which will likely make a number of individuals newly eligible for publicly subsidized coverage. However, low health insurance literacy among these same individuals may result in lack of enrollment in programs for which they qualify and, in turn, drive rising uninsured rates. The report also discusses and recommends a variety of outreach efforts for informing the newly uninsured about coverage options, financial assistance, eligibility requirements, and enrollment procedures.

2020 Update for Robert Wood Johnson Foundation (RWJF) Culture of Health Measures

The Robert Wood Johnson Foundation (RWJF) recently published 2020 updates for their national Culture of Health measure sets. An initial analysis of the data showed small but notable improvements in areas such as mental health (a three percentage-point reduction in the rate of children reporting one or more adverse childhood experiences or “ACEs,” for example), and access to high quality health care via development and expansion of new payment and health care delivery models, among others.

Recommended Reading

Many States Don’t Know Who’s Getting COVID-19 Vaccines. That’s a Huge Problem for Equity
Alejandro de la Garza; Time Magazine

COVID-19 vaccine rollout needs a shot of equity