



October/November 2021

## SHADAC Announcements

### New SHADAC Brief Highlights Importance of Borrowing Proven Policy Strategies to Vaccinate Kids against COVID-19



Most children in the United States are now eligible for COVID vaccines; however, challenges in immunizing the adult population have shown that a successful vaccination campaign will take planning and hard work. A [new SHADAC issue brief](#) produced for State Health & Value Strategies, with funding from the Robert Wood Johnson Foundation, highlights strategies and tools that have led to prior successful U.S. efforts in achieving high childhood vaccination rates as well as make dramatic strides toward health equity—and identifies how those strategies could be applied in the context of the current COVID-19 crisis.

### SHADAC Collaborative Report Builds on Policy Strategy during the Pandemic to Increase Access to Medications for Opioid Use Disorder (MOUD)

In a [new brief](#) for Milbank Memorial Fund, SHADAC Director [Lynn Blewett](#) and researcher [Carrie Au-Yeung](#) worked with Hennepin Healthcare Division Director [Tyler Winkelman](#) to explore federal and state policy changes that were put in place during the COVID-19 pandemic to improve access to medications for opioid use disorder (MOUD). The authors also recommend that particular changes continue beyond the emergency period, such as: 1) allowing initiation visits via telemedicine; 2) allowing opioid treatment programs (OTPs) to dispense more methadone doses; and 3) suspension of prior authorization requirements, and specifically prohibition of Medicaid prior authorization requirements, for MOUD.



### Latest Analysis from the SHADAC COVID-19 Survey Finds 97 Million Adults Affected by COVID illness



The [SHADAC COVID-19 Survey](#) is a two-part survey designed to measure the impacts of the novel coronavirus on a variety of experiences (e.g., illness, stress and coping mechanisms, access to care, health insurance) for adults in the United States. In April 2021, researchers fielded an updated version of the survey for which [results](#) showed that nearly 40% of U.S. adults know someone who has died from COVID (37.7 percent) or either themselves have, or had a family member who has, contracted COVID (37.6 percent). The analysis also provides data breakdowns by racial and ethnic subgroups, income and education levels, as well as by age.

### SHADAC Researchers Look at the State of SOGI Data Collection at the Federal Level and in Medicaid

Federal efforts around the collection of sexual orientation and gender identity (SOGI) data are falling short in the U.S., especially for the approximately 1.17 million people who identify as part of a sexual or gender minority (SGM) and have Medicaid as their primary source of health insurance coverage. A new [State Health and Value Strategies brief](#), authored by SHADAC researchers, documents the limited examples of SOGI data collection occurring at the federal level and in Medicaid, and highlights the efforts of an Oregon community stakeholder process that has identified several key areas for SOGI data improvement.



## Data, Analysis, and Trends from the States

### California: COVID-19 Data Updates for the California Health Interview Survey (CHIS)



Preliminary COVID-19 Estimates from the 2021 California Health Interview Survey (CHIS) have recently **been updated** by the UCLA Center for Health Policy research with data from August 2021. Survey results are focused on examining effects of the pandemic on state residents' ability to seek testing, treatment, and vaccination for COVID; risk reduction behaviors such as social distancing, mask wearing, and following state gathering guidelines; and impacts of COVID on employment status, affordability of basic necessities, mental health challenges, and health insurance coverage status.

### Colorado: 2021 CHAS Looks at the Pandemic, Health, Coverage, and Care Data

The Colorado Health Institute (CHI) has published **2021 results** from the biennial Colorado Health Access Survey (CHAS) in a **new report** focused around understanding impacts of the COVID-19 pandemic. Among the key findings, the report revealed that the state's uninsured rate remained at 6.6% (statistically unchanged since 2015 at 6.7%) due to the counterbalancing effects of pandemic-related job loss and subsequent employer-sponsored health insurance coverage loss (49.8% in 2021 from 52.7% in 2019) that were offset by a dramatic rise in public coverage—primarily Medicaid, at 24.8% in 2021 from 18.7% in 2019.



## Payment and Delivery System Reform in the States

### Maryland: Innovative Care Symposium



The Maryland Health Care Commission recently hosted the **first in a three-part virtual symposium series** focused on the evolution of quality measurement and value-based care delivery models as well as approaches and strategies for team-based care and for managing patients who are high-risk and high-utilization. **Slides** and a recording of the virtual meeting are available for viewing.

## Additional Resources, Reports, and Guides

### Federal Action Needed to Improve Race and Ethnicity Data in Health Programs

In the **first of two related reports**, Grantmakers In Health (GIH) collaborated with the National Committee for Quality Assurance (NCQA) to interview stakeholders in all levels of the U.S. health system with the goal of identifying tangible actions to help improve the completeness, accuracy, and usability of race and ethnicity data. The report not only identifies eleven specific, actionable items that could be employed by various organizations within the federal government, but also walks through potential methods for successful implementation of each action.



### Evidence Review Report from ASPE on Reaching the Remaining Uninsured



According to a **new issue brief** from the Office of the Assistant Secretary for Planning and Evaluation (ASPE), approximately 30 million individuals were uninsured in 2020—most of whom were eligible for federally subsidized coverage. In the authors' review of factors affecting enrollment in health coverage among uninsured populations, they found that "cost" was the most commonly cited reason for lack of enrollment. The **brief** also discusses barriers faced by individuals trying to enroll in health coverage and provides evidence on the impacts of various outreach strategies for helping the uninsured gain coverage.

### Altarum Healthcare Value Hub Releases State Policy Scorecards on Affordability

Altarum Healthcare Value Hub **recently published** their 2021 Healthcare Affordability State Policy Scorecards for all 50 states. The scorecards rank each state's performance on policies that make healthcare more affordable, such as expanding affordable coverage options, ensuring affordable cost-sharing options, eliminating barriers to high-value care, curbing excess prices, and more. Findings from the executive summary noted that while no state achieved a perfect score, California and Massachusetts consistently ranked at the top with high scores for affordable coverage, good coverage outcomes, and consistent efforts on addressing excess prices and out-of-pocket costs.



## Other Data News & SHADAC Updates

### Upcoming 2020 ACS 1-Year Experimental Estimates Release

In addition to the recent publication of a [report](#) measuring the impact of COVID-19 on the 2020 American Community Survey (ACS) data and response rates, the U.S. Census Bureau has [announced](#) that the 2020 1-year "experimental" estimates from the survey will be released on November 30, 2021, along with the experimental PUMS file and a working paper. The Census Bureau will also be hosting a webinar accompanying the release in order to explain and answer questions about the estimates.

## State Health Compare Measures Update: Special 2020-only Health Insurance Coverage



Due to the fact that American Community Survey (ACS) estimates will not be released as usual for 2020, SHADAC used data from the Current Population Survey (CPS) Annual Social and Economic Supplement (ASE) to create a separate, [2020-only Health Insurance Coverage measure](#) on our State Health Compare site. Estimates for 2020 have been created specifically for that year, and should not be compared to other years of data, which come from the ACS. SHADAC has also updated several other measures with 2020 data such as: [People with High Medical Care Cost Burden](#), [Medical Out-of-Pocket Spending](#), [Adult Binge Drinking](#), [Adult Smoking](#), and more.

## Update of the Minnesota Uninsured Profile Tool: Latest Legislative District Data Now Available

SHADAC has updated a unique set of [data infographics](#) derived from information in the [Minnesota Uninsured Profile Tool](#) using the latest estimates available from the U.S. Census Bureau, (2015-2019 American Community Survey, 5-year estimates). These color-coded legislative maps are designed to identify and categorize Minnesota legislative districts with high uninsured rates according to four levels of need for coverage. The maps and graphics also provide a deeper look into the socioeconomic data of each MN House and Senate district.



## Recommendations for our Readers

### [Kids with Gaps in Coverage Have Less Access to Care](#)

*Joan Alker, Aubrianna Osorio; Georgetown CCF*

### [Policy Options to Advance Mental Health: Resources and Tools for State Policymakers](#)

*Sean Stone, Akeiisa Coleman, Rachel Nuzum; The Commonwealth Fund*

### [Learning with Indigenous Communities to Advance Health Equity](#)

*Karabi Acharya; RWJF Culture of Health*

### [Black, Hispanic people miss out on Covid-19 testing and vaccinations](#)

*Deidre McPhillips; CNN*

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