

August 2022

SHADAC Announcements



SHADAC Publishes Analysis of 2021 Employer-Sponsored Insurance (ESI) Estimates

Following the release of the Medical Expenditure Panel Survey-Insurance Component (MEPS-IC) estimates for 2021, SHADAC researchers analyzed the latest ESI-related data in a set of new products, which included a <u>narrative brief</u>, <u>50-state comparison tables</u>, and a <u>national-level blog with corresponding infographic</u>. The 2021 ESI estimates indicated a recovery to certain pre-pandemic trends, such as an increase of private-sector workers returning to small firms (<50 employees). The brief and accompanying products also outlined the continued rise in costs across contributions, premiums, and deductibles—costs that vary widely across states.

RSVP Today: SHADAC's Annual Webinar with the U.S. Census Bureau

SHADAC is hosting an <u>upcoming webinar</u> on September 29th at 1pm CST featuring experts from the United States Census Bureau to present annual fall release estimates from the 2021 American Community Survey (ACS) and the Current Population Survey Annual Social and Economic Supplement (CPS ASEC). After the 2020 ACS data were released on an experimental-only basis due to COVID-19-related disruptions, we are looking forward to a discussion of the return of the full release of health insurance coverage data at both the national and the state level, as well as by coverage type, from the past year. Register for the webinar here.

New SHADAC Blog Covers 2022 National Health Interview Survey (NHIS) Early Release Q1 Estimates

In a recent blog post, SHADAC research fellow Andrea Stewart discussed the quarterly estimates of health insurance coverage released by the National Center for Health Statistics (NCHS). These data were released as part of the NHIS Early Release Program and include estimates from January 2021 through March 2022. Notably, the data showed that the uninsured rate dropped significantly across all age groups, decreasing by 1.5 percentage points (PP) from 9.5% during Q1 2021 to a historic low of just 8.0% during Q1 2022. The blog also includes trends across a number of demographic indicators including race and ethnicity, age, and region.

Data, Analysis, and Trends from the States

Minnesota: New Study Shows Economic and Social Impact of Excessive Drinking in MN

The Minnesota Department of Health (MDH) <u>conducted a study</u> to quantify the impacts of excessive drinking on local communities. Published in the <u>American Journal of Preventative Medicine</u>, the report states that excessive drinking cost Minnesotans \$7.85 billion in 2019; this came through lost productivity, health care costs, and other costs such as those related to criminal justice and motor vehicle crashes.

Colorado: CO Publishes Health Equity Plan to Address Disparities

As part of its newly released <u>Fiscal Year 2022-23 Department Health Equity Plan</u>, the Colorado Department of Health Care Policy and Financing identified four initial health disparity focus areas within Health First Colorado (Colorado's Medicaid program) that it plans to target in order to improve health outcomes in the state: COVID-19 vaccination rates, maternal care, behavioral health, and prevention.

State Health Compare Spotlight

SHADAC's State Health Compare allows analysts and policymakers to view state-level data on more than 50 measures across a range of topics through maps, bar charts, trends, and tables.

This month, we're highlighting the <u>Physician</u> Acceptance of New Patients measure.



SHADAC research fellow Robert Hest <u>used this measure to compare rates by coverage type</u> (Medicaid, Private, and Medicare) and found that while more than 95 percent of physicians said they accepted new patients with private insurance in 2014-2017, only 74 percent accepted new patients with Medicaid coverage (among physicians accepting new patients), a greater than 20 percentage-point gap. Read more about the disparity between private coverage and Medicaid by state in this <u>recent blog post</u>.

Additional SHADAC News and Resources

Understanding the Medicaid MAGI and CHIP Application Processing Time Performance Indicator

This blog from SHADAC research assistant Maya Benedict explores the value of the application processing time indicator as a window into how efficiently state Medicaid programs process their Medicaid Modified Adjusted Gross Income (MAGI) and Children's Health Insurance Program (CHIP) applications. Benedict analyzed recent processing time data by state and found that close to 71 percent of applications were processed within seven days in 2021, which is an increase from 2020 and well-above the standards established by the Centers for Medicare and Medicaid Services. However, with the impending cessation of the COVID-19 public health emergency (PHE), it will be necessary to continue monitoring this indicator for improvements and setbacks.

Resource: Five Updated and One New Measure on SHADAC's State Health Compare Estimates for five measures of health care access, affordability, and use have been recently updated on SHADAC's State Health Compare web tool. One new measure, "Had Dental Visit," has also been added to the tool. The new and updated measures are all produced using data from the National Health Interview Survey (NHIS), conducted by the National Center for Health Statistics (NCHS). SHADAC produces these state-level measures using restricted-access data through the Minnesota Research Data Center (MnRDC).

Recommendations for our Readers

How Differences in Medicaid, Medicare, and Commercial Health Insurance Payment Rates

Impact Access, Health Equity, and Cost

Medicaid Managed Care Contract Language: Health Disparities and Health Equity
State Health and Value Strategies

Understanding the Inflation Reduction Act

Cindy Mann, Adam Striar; Commonwealth Fund

The Council of State Governments

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