



# USING SMALL AREA ESTIMATES FOR ACA OUTREACH

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# Outline

- Research Objective
- Background
  - ACS
  - ZCTAs
  - Reliability
- Methods
  - CAR model
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- Results
- Interactive Maps
- Findings

# Motivation

- The public's knowledge of the ACA is poor
  - As of January 2014, 46% of the uninsured did not know about the availability of financial help for coverage
- Overall, the first open enrollment season was successful
  - But lots of variation across the states and a long way to go
- Success during the 2<sup>nd</sup> season will depend on outreach

# Outreach

- Blanket media campaigns might not be enough
- Need to target the uninsured
- To do that efficiently
  - Need to know where the uninsured are
  - What kind of communities they live in
  - What institutions are present in the local community that can serve as access points

# Research Objective

- PROBLEMS:
  - Small Area Health Insurance Estimates (SAHIE) are not granular enough
  - Direct zip code level estimates (ACS) can be unreliable
  - Accessing the data can be difficult
- GOALS:
  - Improve access to ZIP Code level estimates
  - Improve reliability of ZIP Code level estimates

# BACKGROUND

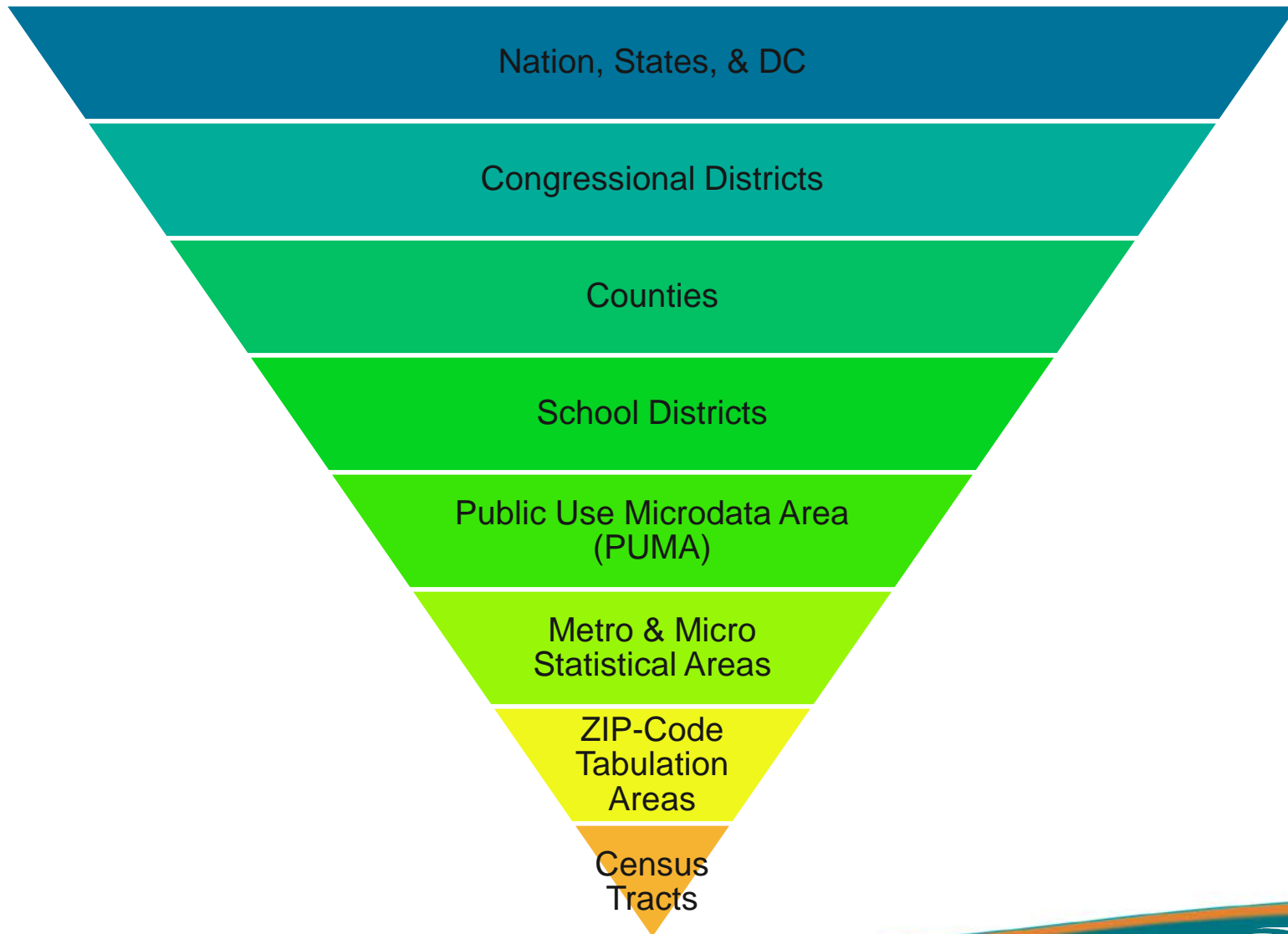
# American Community Survey (ACS)

- General household survey conducted by the U.S. Census Bureau
  - Mandatory survey in 4 modes (mail, internet, phone, in person)
  - Collects sample in all counties or county equivalents in the U.S. every year
- Replacement for the “long form” of the decennial census
  - Collects detailed economic, social, demographic, and housing information annually instead of once every ten years
  - Collects information on health insurance status information at time of survey (produces point in time insurance estimate)





# Identify Location of Potentially Eligible



# Counties - Reliability

## Minnesota Percent Uninsured Estimates by County

- ACS 2008-2012
  - Highest RSE is 18.4%
  - Average RSE is 8.0%
  - Average RSE top ten (sample size) counties 3.7%
  - Average RSE bottom ten (sample size) counties 12.2%
- SAHIE 2011
  - Highest RSE is 7.9%
  - Average RSE is 6.0%
  - Average RSE top ten (sample size) counties 5.1%
  - Average RSE bottom ten (sample size) counties 6.3%

Note: RSE is relative standard error (standard error/estimate)

# ZCTAs – Reliability

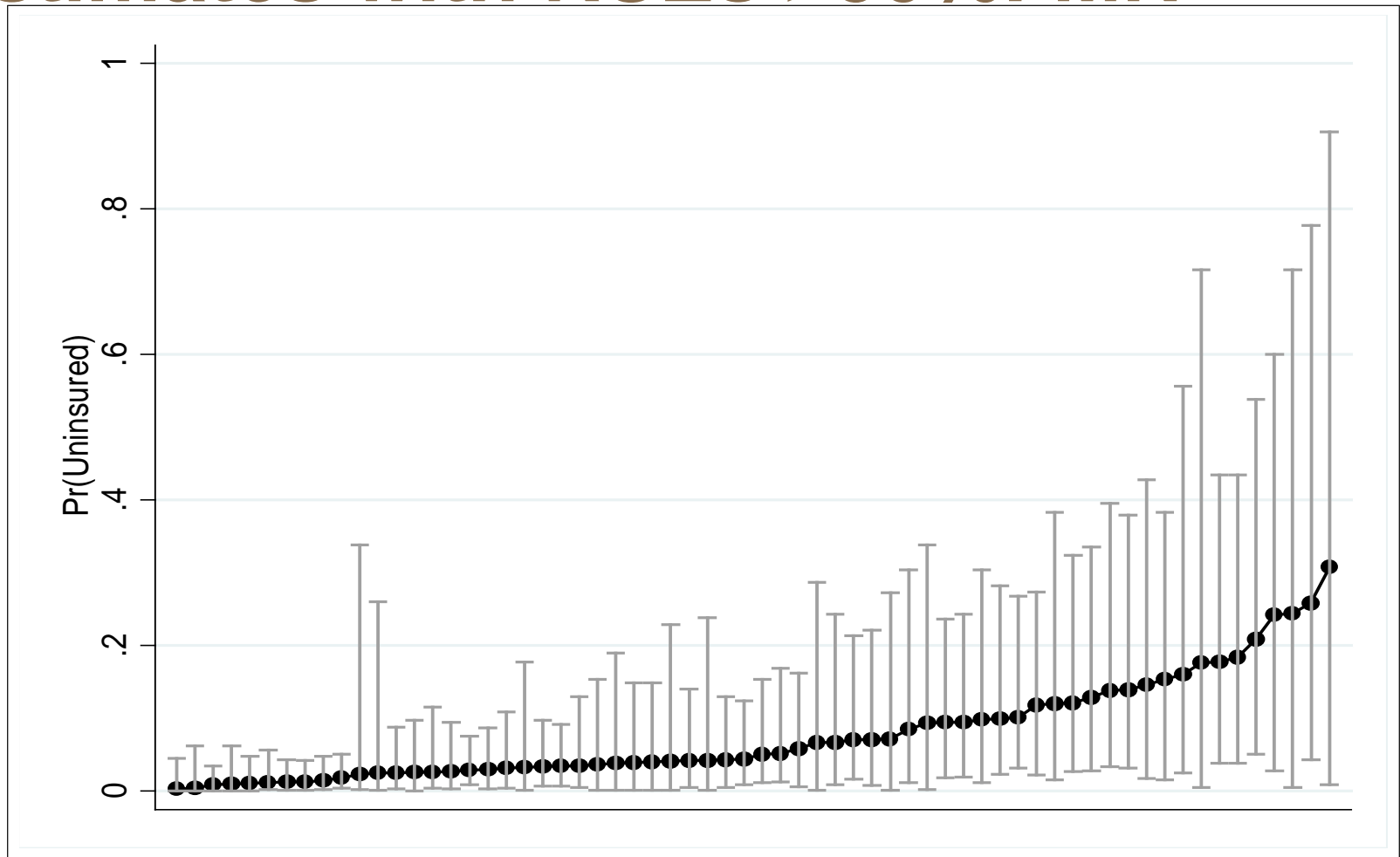
## Non-Zero Percent Uninsured Estimates in Minnesota

- Highest RSE is 174%
- Average RSE is 27.6%
- Thirty percent of RSEs > 28%
- Seven percent of RSEs > 50%
- $N \approx 890$

## Non-Zero Percent Uninsured Estimates in U.S.

- Highest RSE is 509%
- Average RSE is 27.6%
- Thirty percent of RSEs > 31%
- Eleven percent of RSEs > 50%
- $N \approx 33,000$

# 95% confidence intervals for ZCTA estimates with RSEs >50%: MN



# METHODS

# Two Methods for improving precision

- **Conditional Auto-Regressive Model (CAR)**
  - Advantages: Established method in the statistics literature
  - Disadvantages: High level of complexity, difficult to scale and apply to other types of estimates
- **Modified Composite Method**
  - Advantages: Easy to scale and apply to different types of estimates
  - Disadvantages: New approach so not peer reviewed

# CAR Model

- Auxiliary data (covariates) improves prediction
  - $r_z = \alpha + \beta X_z + v_z$
- Borrows strength from neighbors
  - Creates term for average value of adjacent neighbors
  - $v_z | v_{-z}, \sigma_v^2 \sim N \left( \sum_{j \in \delta_z} \frac{v_j}{|\delta_z|}, \frac{\sigma_v^2}{|\delta_z|} \right)$

# Composite Model

- Rough approximation of a composite estimator

$$Comp_{zc} = wt_{zc} * ZIPRATE_{zc} + (1 - wt_{zc}) * COUNTY_c$$

where wt=weight

$$wt_{zc} = (County_c - ZIPRATE_{zc})^2 / Total Error_{zc}$$

$$Total Error_{zc} = (County_c - ZIPRATE_{zc})^2 + SE^2_{zc}$$

See Rao (2003)



# Composite Model Intuition

Difference County and ZCTA

		Low	High
SE of ZCTA	Low		<b>Leans toward ZCTA</b>
	High	<b>Leans toward county</b>	

# Model Results

<b>CAR Model Results</b>	<b><u>Coef.</u></b>	<b><u>95% Credible Interval</u></b>
% White	-0.02	(-0.02,-0.017)
% Living w/Kids	-0.01	(-0.016,-0.009)
SD of Spatial Effects	0.32	

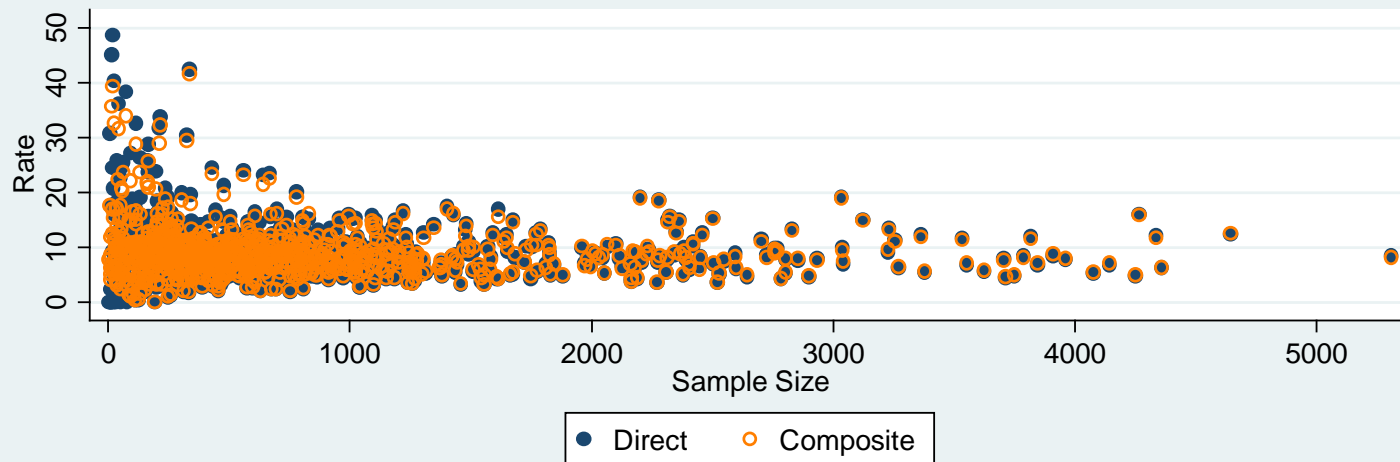
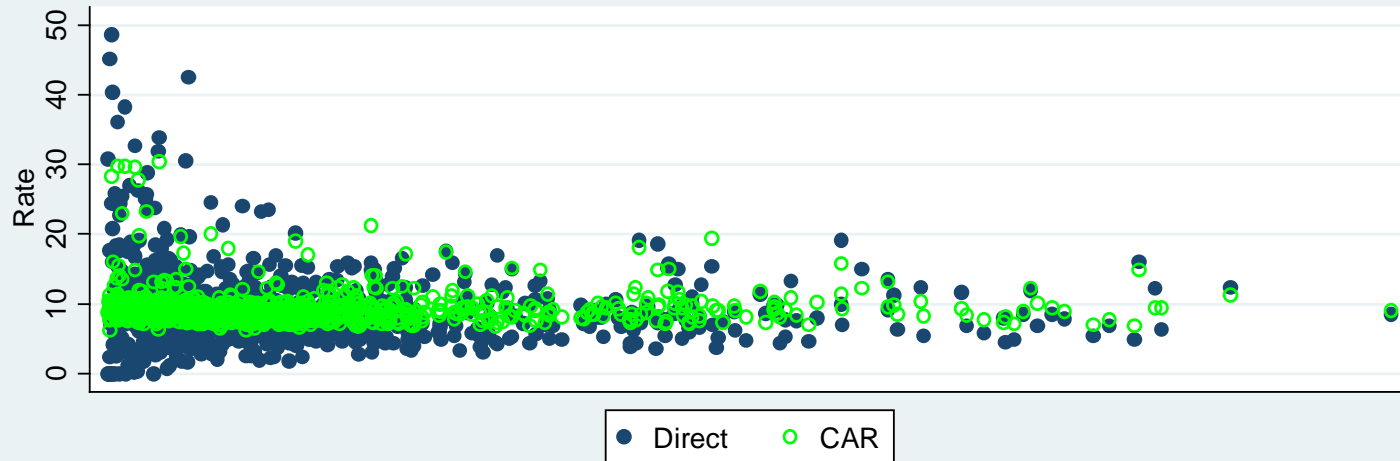
<b>Composite Model</b>	<b><u>Mean</u></b>	<b><u>SD</u></b>
Weight	.53	.32

# Comparison of Methods

## Average across estimates: Minnesota

	<u>Direct</u>	<u>CAR</u>	<u>Composite</u>
Rate, %	9.3	9.5	9.1
SE	2.6	1.1	1.6
RSE, %	27.6	11.1	20.9
RSE>30, %	28.7	0.1	11.2
RSE>50, %	8.5	0.1	3.4

# Distributions by Sample Size

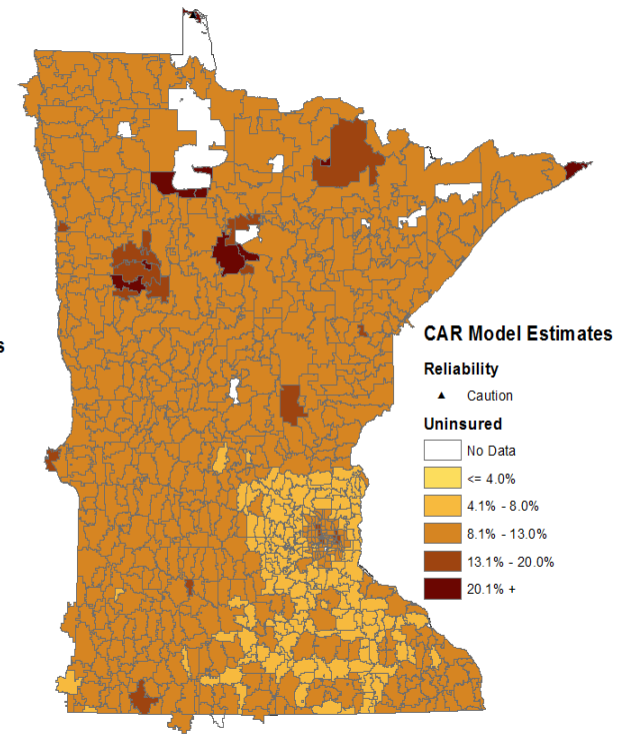
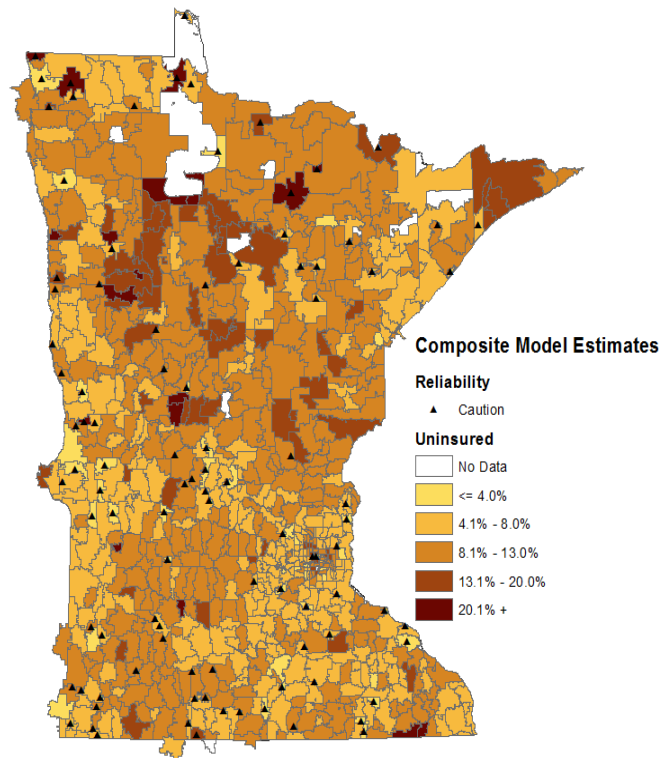
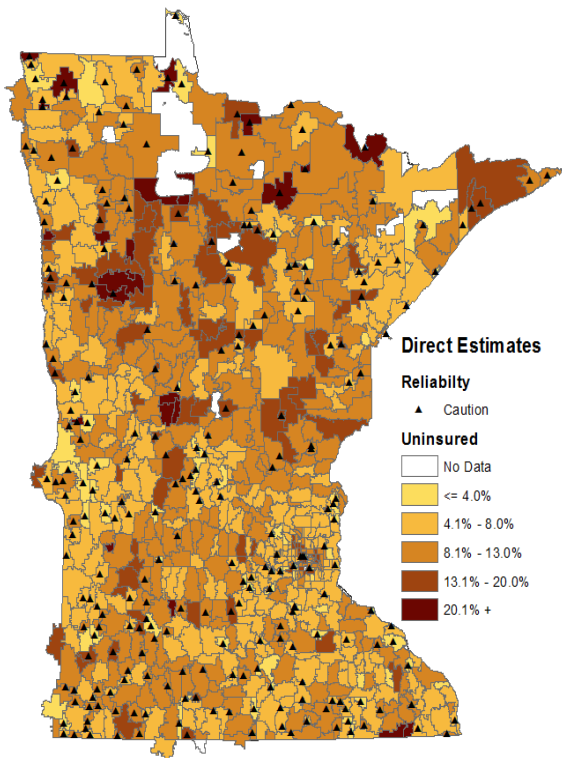


# Which method is better?

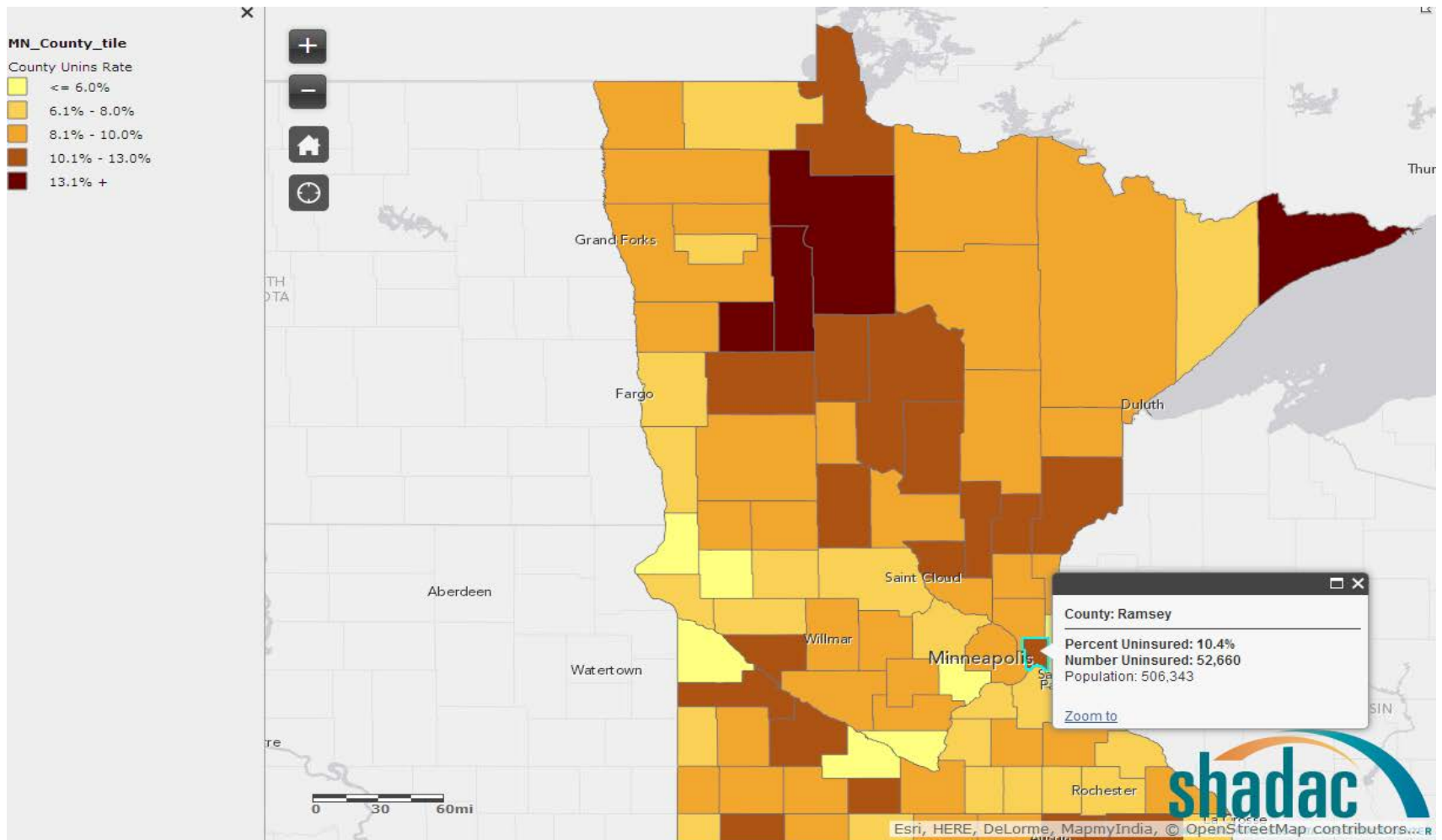
	Direct	CAR	Composite
Complexity	Low	High	Low
Scalability	Easy	Hard	Easy
Reliability	Not very reliable	Very reliable	More reliable but still not great
Bias	?	?	?

# Maps!

# Minnesota: Comparing Estimates

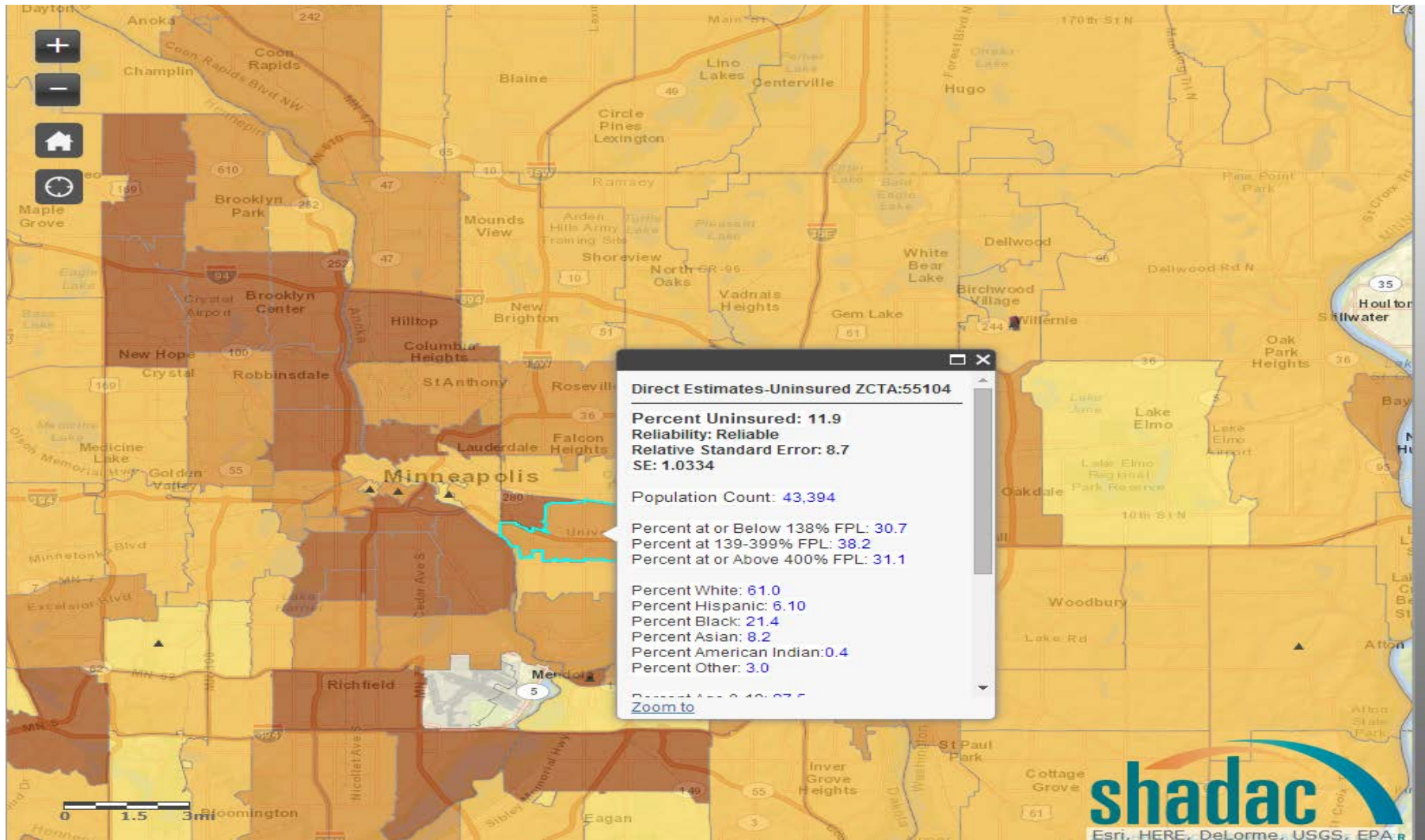


# Start with the County





# Then look at ZCTA estimates



# Findings

- Providing uninsurance estimates at the ZCTA level is problematic both from the standpoint of reliability and accessibility
- Possible solutions to the problem of reliability is to use small area methods such as CAR or a moderated composite estimator
- CAR is the more established method and provides more reliable estimates but is complex and difficult to scale
- A potential compromise is to use the modified composite estimator but more testing is needed
- Interactive mapping can make these estimates available at the ZCTA level