



Evaluating Health Care Reform: Are Federal and State Surveys Meeting the Need?

Overview

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Donna L. Spencer

SHADAC

Background

- The passage of the Patient Protection and Affordable Care Act (ACA) in 2010 generated new data requirements for the purpose of monitoring and evaluating health care reform
 - Broad goals of improving health care access, health care utilization, and affordability
 - New policies/programs under ACA, including health insurance exchanges, Medicaid expansions, the young adult health insurance provision, health insurance coverage for individuals with preexisting conditions, preventive care provisions, etc.

A Framework for Tracking ACA Impacts

- SHADAC (Sonier & Lukanen, 2011)
- Three priority areas:
 - Health insurance coverage
 - Affordability and comprehensiveness of health insurance coverage
 - Access to health care services
- Metrics identified for each priority area
 - Measures that reflect major goals and provisions of the law
 - Outcomes rather than implementation process
 - Relevant/meaningful to policymakers

Recommended Measures: Insurance Coverage

Distribution of Insurance Coverage

Uninsured

Point in time

Uninsured for a year or longer

Uninsured at some point in past year

Reasons for uninsurance

Exempt from mandate

Paying penalty

Public Coverage

Enrollment trend

Participation rate

Churning

Health Insurance Exchange

Nongroup coverage: exchange and as % of market

Employer coverage: exchange and as % of market

Employer Coverage

Employers offering

Employees in firms that offer:
- % eligible
- % enrolled

Families with ESI offer:
- All family members enrolled

Employers paying penalty

Recommended Measures: Affordability & Comprehensiveness of Coverage

Insurance Premiums

Employer coverage

Total premium:

- Single
- Family

Employee share:

- Single
- Family

Nongroup coverage:

- Per enrollee

Comprehensiveness

Enrollment by benefit level:

- ESI
- Nongroup

Deductibles:

- ESI (single, family)
- Nongroup (single, family)

Financial Burden

% of families with high cost burden

“Affordable” premium as % of income

Subsidies

receiving premium and cost sharing subsidies in exchange

Average value of subsidies

Recommended Measures: Access to Care

Individuals

Use of services

Has usual source of care

Type of place for usual source of care

Preventive care visit in past year

Any doctor visit in past year

Barriers to care

Did not get necessary care (& reasons)

Not able to get timely appointment

Difficulty finding provider to take new patients

Difficulty finding provider that accepts insurance type

System

% of physicians accepting new patients, by payer

% of physicians participating in public programs

Ambulatory care sensitive hospital admissions

Emergency room visit rate

Preventable/avoidable ER visits

Safety net

Volume and type of services provided by safety net clinics

Uncompensated care

County indigent care volume and cost

Measures Come from Multiple Data Sources

- General population surveys
- Employer surveys
- Health care provider surveys
- Health plan data (e.g., APCD)
- State public program data (e.g., Medicaid claims)

Data Source Considerations

- Flexibility to adapt to changing information needs
- Comparability over time
- Population coverage – complete population of interest
- Ability to do in-depth analysis (e.g., by geography, age, income, race/ethnicity)
- Availability of benchmarks/national comparisons
- Timeliness of estimates
- Accessibility of data

Panel's Focus

- National and state-level population surveys providing data relevant to all three priority areas: **coverage, affordability, access**
- Both national and state-level surveys have been making adjustments to meet new data needs
 - Sample improvements
 - Expansions/revisions in survey questionnaire content
 - Improvements to timely access to data

Panel's Focus

- Surveys covered:
 - American Community Survey (Census)
 - Current Population Survey (Census)
 - National Health Interview Survey (NCHS)
 - State-level surveys
- Adjustments in questionnaire design

For more information, please contact:

Donna Spencer

dspencer@umn.edu

Complete copy of the Framework report is available at:

<http://www.shadac.org/publications/framework-tracking-impacts-affordable-care-act-in-california>



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