March 2020

Special Message from SHADAC

With every passing day, it is clear that the novel coronavirus (COVID-19) continues to alter the way that we live, work, learn and play. SHADAC, too, is altering the focus of our work and research during these uncertain times. We believe in the power of reliable, relevant, and timely data to inform policy at the national, state, and local levels. That is why, in the time to come, we are committed to tackling this newest issue in public health, and shedding light where possible using reliable and relevant data.

Stay tuned, and we hope that you stay well!

SHADAC Announcements

SHADAC Brief Explores Revised Current Population Survey Estimates on Medical Out-of-Pocket Spending

Last year, the U.S. Census Bureau fundamentally redesigned the system used to process estimates from the Current Population Survey Annual Social and Economic Supplement (CPS ASEC). Using this new system, the Census Bureau released both new 2018 estimates on health insurance, income, poverty, and medical expenditures as well as re-processing collected data for 2017. A new brief from SHADAC researchers examines the effects of implementation of the new system through comparison of estimates of medical out-of-pocket spending between both years.

New Data on American Community Survey on Broadband Internet Access

The arrival of COVID-19 has shifted the way that Americans live, work, and access health care; sparking an embrace of internet service-based solutions. This shift has brought to attention the issue of the “digital divide” between individuals who have access to telecommunications and internet service and those who do not. SHADAC has added a new measure—the percentage of households with access to broadband internet services—to our state data web tool, State Health Compare. An initial analysis of the newly available estimates shows wide variation in access to broadband across states and reveals disparities by key subpopulations, such as income, rurality, coverage, and disability status.

Special Brief from SHADAC Shows Rise in Out-of-Pocket Health Spending across the States

As concerns about health care cost and spending persist across the United States, SHADAC has recently added another new measure to State Health Compare, our state data web tool, to measure the median in medical out-of-pocket spending for those with employer-sponsored health insurance (ESI) by state. In a recent special issue brief, SHADAC researchers found the median U.S. family medical out-of-pocket cost for individuals with ESI coverage was $3,300 in 2018, though a number of states (17) registered significantly higher medians. As a result of rising out-of-pocket spending, even for those with ESI, the issue brief also estimates that almost one in five Americans (18.8%) currently face high medical cost burden.

Data, Analysis, and Trends from the States

California Health Care Foundation Survey on COVID-19

A recent public survey fielded by the California Health Care Foundation (CHCF) asked residents about their experiences in getting tested for COVID-19 and their access to care. The survey, broken down between the total population and those with incomes at or below 138% of the federal poverty guidelines (FPG), shows the majority of residents did not feel they needed a COVID-19 test at the moment (68%) nor had they recently sought health care (68%). Low-income Californians, however, were more likely to want a COVID-19 test (18% vs. 11%) —due to greater likelihood of chronic conditions that put them at higher risk of complications—and were also more likely to have sought health care (18% vs. 10%). The survey did also show some evidence that individuals are forgoing health care visits over concerns about coronavirus, as just shy of 4% of residents reported being unable to access care in a timely manner.

2019 Wisconsin Health Care Affordability Survey shows Significant Care Cost Burdens

Health care affordability remains a prevalent issue across the United States. A new survey from Altarum Healthcare Value Hub finds that almost half (47%) of Wisconsin adults encountered one or more cost related barriers to getting healthcare during the past year, which resulted in skipped or delayed care, or making changes to use of prescription medical drugs as a result. A summary brief also details the effects
of statewide medical burden, as more than a quarter (28%) of Wisconsin adults reported struggling to pay off medical bills.

2019 Vermont Youth Risk Behavior Survey Shows Increase in E-Cigarette Use
The Vermont Department of Health recently released a report of the results from the state’s 2019 Youth Risk Behavior Survey (YRBS). A measure of health outcomes and health risk behaviors such as alcohol and drug use, tobacco use, inadequate physical activity, and obesity (among other), results from the survey show a significant decrease in cigarette use from 2017 (24%) to 2019 (22%) but a significant increase in e-cigarette use from 2017 (34%) to 2019 (50%) among high school students of the state. Among middle school students, similar trends emerged, as cigarette use remained stable at 7% in both 2017 and 2019 but e-cigarette use nearly doubled from 9% in 2017 to 16% in 2019.

Payment and Delivery System Advancement in the States
Bailit Health on State Strategies to Promote Value-Based Payment through Medicaid Managed Care
Under contract with the Medicaid and CHIP Payment Access Commission (MACPAC), Bailit Health has released a final report documenting the efforts of state Medicaid programs to increase the use of value-based payment (VBP) methods by managed care organizations (MCOs). The report includes interviews with stakeholders in five states—Minnesota, New Mexico, New York, Ohio, and South Carolina—documenting the differentiation in approaches to care coordination payments adaptation of implementation strategies to address state-specific needs, and challenges in overcoming barriers to evaluation efforts.

Other Data News & SHADAC Resources
National Survey of Children’s Health 2017-2018 Combined Years Available
Combined data sets from the National Survey of Children's Health (NSCH) have been released for years 2017-2018 by the Data Resource Center (DRC) for Child & Adolescent Health, a national data center dedicated to development, documentation, and dissemination of data findings and data sets on child, youth, and family health in the U.S.

The DRC is supported and funded by the Health Resources and Services Administration’s (HRSA) Maternal and Child Health Bureau (MCHB). The increased sample size allows for more precise estimates to be produced at both the national and state levels, as well as easier comparisons of data across states.

SHADAC BRFSS Spotlight Series Featuring Health Outcomes Data on State Health Compare
SHADAC recently completed a new, three-part data analysis using the Behavioral Risk Factor Surveillance System (BRFSS) survey. The analysis explores three measures of health behaviors—Adult Smoking and E-Cigarette Use, Adult Binge Drinking, and Adult Obesity. Yearly estimates for these measures are also available on SHADAC’s State Health Compare web tool.

SHADAC Updated Estimates Added to State Health Compare
SHADAC has updated seven data measures with the latest available estimates from 2018 and 2019 on the State Health Compare website. The updated measures include Insurance Coverage, Cost of Care, Public Health, Health Outcomes, and Social and Economic Factors, as well as a variety of health topics, including health insurance, housing, poverty, premature deaths, medical cost burden, and smoking. Measures also include breakdowns such as insurance coverage type, age, income level, race/ethnicity, among others.

Special Focus Resources: COVID-19
SHVS COVID-19 Resource Page for States
State Health & Value Strategies (SHVS) has partnered with Manatt Health, Georgetown’s Center on Health Insurance Reforms (CHIR), the State Health Access Data Assistance Center (SHADAC), Bailit Health, and GMMB to create an extensive resource page to serve as a source of COVID-19 information for states. The page contains a topic-specific directory of linked resources, such as Medicaid Coverage and Access, Funding and Coverage for the Uninsured, Telehealth and Telemedicine, Social Risk Factors, and more.

CIDRAP COVID-19 Resource Center
The Center for Infectious Disease Research and Policy (CIDRAP) at the University of Minnesota, under the direction of Dr. Michael T. Osterholm, has built a comprehensive resource page focused on the arrival, evolution, and response to the novel coronavirus (COVID-19) in numerous sectors. Contents span a range of topics, from a background of the disease; news on labs, diagnostics, and supply chain issues; a bibliography of related materials and studies; preparedness and response guides; podcasts and webinars; tools including FAQs, fact sheets, maps, and infographics; and much more.

KFF Data Resource Details Risk Factors of Serious Illness with COVID-19
To inform discussions about the challenges associated with coronavirus, the Kaiser Family Foundation (KFF) has produced an issue brief detailing the increasing concerns of the public health community for adults who have a higher risk of developing serious illness if infected (i.e., both young and older adults with medical conditions such as heart disease, diabetes, lung disease, asthma and obesity). Building on information recently made available from the CDC, the KFF brief provides national estimates of adults at elevated risk of serious illness (37.6% or 92.6 million people) as well as detailing variation in estimates across the states, ranging from a high of 49.3 percent in West Virginia to a low of 30.0 percent in Utah.
Recommended Reading

The Coronavirus’s Unique Threat to the South
Vann R. Newkirk II; The Atlantic

The American health care system is only making COVID-19 worse
Kat Eschner; Popular Science

What Are State Officials Doing to Make Private Health Insurance Work Better for Consumers During the Coronavirus Public Health Crisis?
Sabrina Corlette, Kevin Lucia, Madeline O’Brien; Commonwealth Fund

COVID-19 may reveal cracks, but Obamacare has transformed our health care
Heather Howard, Thomas Huelskoetter; The Star-Ledger NJ

2020’s States with the Most and Least Medicaid Coverage
Adam McCann; WalletHub