January 2017

Announcements

SHARE Program Launches Eight New Grants Examining Health Reform at the State Level

SHARE is pleased to announce the launch of eight new grants awarded through the Robert Wood Johnson Foundation’s State Health Access Reform Evaluation (SHARE) grant program, which is managed by SHADAC. The new SHARE grants focus on a range of topics, including Medicaid, private market coverage, employer-sponsored insurance, access to and utilization of care, health care costs and quality, and benefit design. SHARE will work with the funded projects to produce and disseminate timely, informative, user-friendly findings for state and federal policymakers and agencies as well as leading researchers. In total, SHARE has awarded $9.7 million to fund 51 projects since its inception in 2006.

New Brief: How to Test for Significant Differences Using the SHADAC Data Center

A new technical brief from SHADAC explains how to use the margins of error (MOEs) provided with SHADAC Data Center estimates to calculate whether there is a statistically significant difference between two estimates from state to state, from year to year, or between demographic groups. The brief, from SHADAC Research Assistant Robert Hest, outlines two ways to perform this calculation: by conducting a quick, visual assessment and by conducting a more robust hypothesis test.

5-Year ACS: State Fact Sheets Available

SHADAC produced new fact sheets with state and county coverage estimates from the 2011–2015 ACS data. The fact sheets provide uninsured rates by characteristics (e.g., age, race/ethnicity, and poverty level) for the pooled years 2011 through 2015. Estimates are available for each state (and the District of Columbia and Puerto Rico) and for all counties within each state. These data are available via a clickable map here, where you can also access a 50-state table of estimates.

New Brief Explores Section 1115 Waivers and ACA Medicaid Expansions with an Eye to Kentucky

Kentucky has announced plans to shift from a standard ACA Medicaid expansion to a Medicaid expansion using a Section 1115 waiver. To inform the conversation around these plans, SHADAC researchers authored a brief reviewing Section 1115 Medicaid waiver policies in five states where the waivers most closely align with Kentucky’s waiver discussion: Arkansas, Indiana, Iowa, Michigan, and Montana. The brief, produced for the Foundation for a Healthy Kentucky, explores the arguments and evidence for and against several waiver components: premium assistance, enrollee contributions, modified cost-sharing, healthy behavior incentives, and waiver of required benefits.

SHADAC Presents at APPAM

SHADAC staff members and alumni presented papers last month at the 2016 Fall Research Conference of the Association for Public Policy Analysis & Management (APPAM) in Washington, DC. Click on the links below to learn more about the presentations.

- Panel Paper: Health Insurance Coverage Reporting Accuracy in the American Community Survey
  Speaker: Kathleen T. Call, SHADAC
Data News

Census Bureau Releases 2011-2015 ACS 5-Year Uninsurance Estimates
Five-year estimates of the uninsured for 2011 through 2015 are now available from the American Community Survey (ACS). All geographic areas are represented, including census tracts, ZIP Code Tabulation Areas, and block groups. The estimates, which can be viewed in American Fact Finder, can be searched by topic (e.g. age, income, year, dataset), geographies (e.g. states, counties, places), race and ethnic groups (e.g. race, ancestry, tribe), and more. SHADAC’s 5-year ACS Fact Sheets can also be used to explore the data. The Census Bureau will release the ACS 5-year Public Use Microdata Sample (PUMS) files on January 19th.

NHIS Early Release: Health Insurance Coverage, January-June 2016
The National Center for Health Statistics (NCHS) published Early Release Measures from the National Health Interview Survey (NHIS) for January through June 2016, including a special report on health insurance coverage. The special report notes that the number of uninsured persons of all ages (28.4 million, or 8.9% of the population) remained statistically unchanged from 2015. This stability was mirrored among all age groups and racial and ethnicity groups. However, variation was seen when considering income: Among children ages 0-17 living in poverty, the uninsured rate increased significantly in the first six months of 2016, from 4.4 percent to 6.6 percent.

SHADAC’s State Profiles & Data Center: New Estimates Available
SHADAC’s State Profiles have been updated to reflect the most recent estimates from the American Community Survey (ACS; 2015), Medical Expenditure Panel Survey – Insurance Component (MEPS-IC; 2015), and National Health Interview Survey (NHIS; 2014; 2015 coming soon). The profiles give overviews of health care coverage, access to care, health care affordability, and health care utilization for each state and D.C. The most recent fact sheets with 5-year state and county uninsurance estimates for 2011–2015 (from ACS data) are also now accessible from the State Profile pages.

SHADAC has also updated the SHADAC Data Center with 2015 estimates from the ACS; Current Population Survey (CPS); Behavior Risk Factor Surveillance System (BRFSS); and MEPS. NHIS estimates of health care use, access, and affordability will be available soon.

SHADAC Blog: Highlights
Two Years after ACA Implementation in California: Coverage Gains Continued and Fewer Affordability Concerns Cited
January 3, 2017 – Cross-Post from California Healthcare Foundation

Employer-Sponsored Insurance: Premium Growth Slowed in 2015
December 22, 2016

State Medicaid Access Review Monitoring Plans (ARMPs): An Early Look at Data Sources Used by States
December 13, 2016