



EARLY IMPACTS OF THE ACA ON HEALTH INSURANCE COVERAGE IN MINNESOTA

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**State Health Reform
Assistance Network**
Charting the Road to Coverage

Support for this work was provided by the Robert Wood Johnson Foundation's State Health Reform Assistance Network.

Why did we do this study?

- Great interest among policy makers in understanding the ACA's impacts in as timely a way as possible
- 2014 estimates from the usual sources are not likely to be available until the fall of 2015
- New health insurance coverage options and requirements have undoubtedly led to shifts in the coverage landscape
 - Available information, such as number of people enrolled in MNsure coverage, only tells part of the story
- Although data on national impacts was beginning to emerge, the impacts of the ACA will vary by state
- Study was done at the request of MNsure



Availability of survey data on health insurance coverage changes

	Estimated Data Release	Reflects Coverage for
Minnesota Health Access Survey	Early 2014 Early 2016	2013 2015
<i>Federal Surveys w/state estimates:</i>		
Current Population Survey (CPS)	Sept. 2014 Sept. 2015	2013 2014
American Community Survey	Sept. 2014 Sept. 2015	2013 2014
National Health Interview Survey Early Release	June 2014 June 2015	2013 2014



Earliest survey data for 2014 on state-level coverage impacts of ACA not available until 2015

Minnesota Health Insurance Market

Minnesota Health Insurance Market

Group Insurance

- Fully-Insured, Non-SHOP
- Self-Insured
- Small Business Health Options (SHOP)

Nongroup Insurance

- Direct Purchase
- High-Risk Pools (MCHA and PCIP)
- MNsure

Public Insurance

- Medical Assistance
- MinnesotaCare
- Medicare

Uninsured



Approach for SHADAC's analysis

- Estimate health insurance coverage for entire state population at **two points in time**:
 - September 30, 2013 & May 1, 2014
 - Immediately before MNsure open enrollment period and 1 month after end of open enrollment
- Use information on gains and losses by type of coverage to estimate the change in the number of Minnesotans without health insurance
- Account for population growth, to avoid overestimating the reduction in the number of uninsured

Details of method

- Approach has been used to estimate coverage distribution in Minnesota since the early 1990s
- Begin with total state population and use available data to count the number of people with each type of coverage, being careful to avoid double counting (e.g., Medicare-Medicaid dual eligibles)
- Solve for the unknowns (shown in bold/orange below)

Total Population September 30, 2013 (5.43 million)
<ul style="list-style-type: none">• Group Insurance<ul style="list-style-type: none">• Fully-Insured• Self-Insured• SHOP• Nongroup Insurance<ul style="list-style-type: none">• Direct Purchase• High-Risk Pools• MNsure• Public Insurance• Uninsured

Total Population May 1, 2014 (5.45 million)
<ul style="list-style-type: none">• Group Insurance<ul style="list-style-type: none">• Fully-Insured• Self-Insured• SHOP• Nongroup Insurance<ul style="list-style-type: none">• Direct Purchase• High-Risk Pools• MNsure• Public Insurance• Uninsured

Data Sources

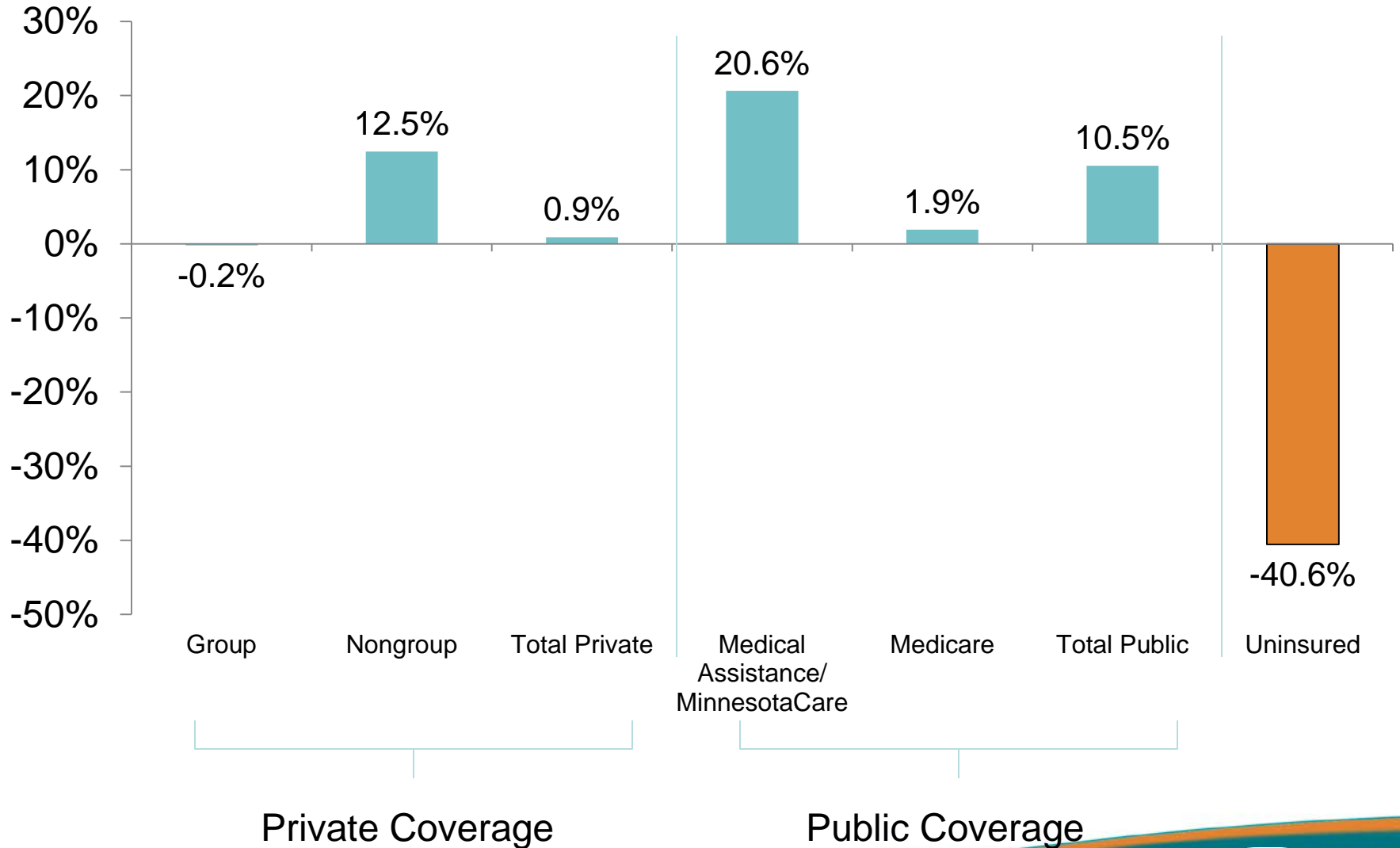
Total Population	U.S. Census Bureau
Private Group	Minnesota Council of Health Plans
SHOP	MNsure
Private Nongroup	Minnesota Council of Health Plans
Qualified Health Plan Enrollment	MNsure
High-Risk Pools	MCHA & CMS
Medical Assistance & MinnesotaCare	DHS
Medicare	CMS
Uninsured	MNHA Survey (MDH)

Main study results

- Number of uninsured Minnesotans fell from 445,000 to 264,000 – a reduction of 180,500
 - Uninsurance rate fell from 8.2% to 4.9%
- Most of the coverage gains occurred in state public insurance programs - increase of 155,000
 - Not surprising since an estimated 2/3 of uninsured were previously eligible for public coverage
- Private health insurance coverage also increased
 - Net gain of 30,000: 36,000 gain in nongroup coverage offset by 6,000 loss in group coverage

Percent change by type of insurance

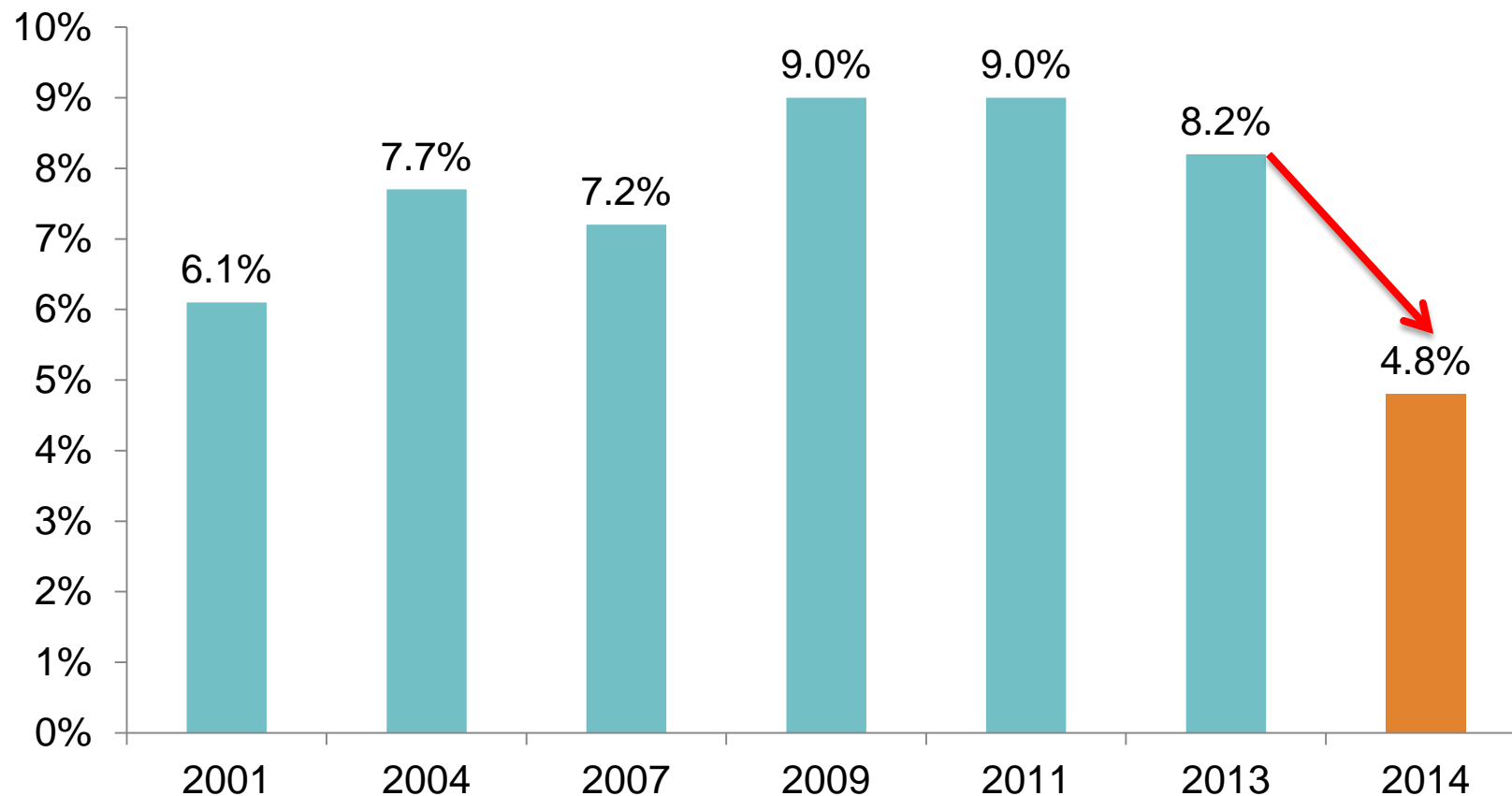
September 30, 2013 to May 1, 2014



Putting findings in context

Unprecedented drop in uninsurance rate

Trends in the Rate of Uninsurance in Minnesota



Source: 2001 to 2013, Minnesota Health Access Survey; 2014 SHADAC analysis of administrative and survey data

Putting Findings in Context

- Our findings are consistent with national analysis of early ACA impacts:

Change in % of nonelderly adults uninsured, September 2013 – March 2014

- Urban Institute: 2.7 percentage points
- RAND: 4.7 percentage points
- Gallup: 3.7 percentage points (to April)

- Our findings are also consistent with analysis of Massachusetts' reforms, which were similar to the ACA
 - 45 percent decline in uninsurance among adults in the first year (2007)

Common questions about the SHADAC study

- Does the analysis assume that everyone who purchased coverage through MNsure was previously uninsured?
 - No. We don't have information on changes in coverage for specific individuals.
 - But, by using aggregated enrollment counts at two points in time, we can answer the question "How many people gained coverage?" without knowing "Which ones?"

Common questions about the SHADAC study

- What is driving changes in group coverage?
 - Not enough information yet to draw conclusions
 - Possibilities include:
 - Shift from fully insured to self insured (39,000 decrease in fully insured balanced by 33,000 increase in self insured)
 - Changes in employment at firms that offer coverage
 - Changes in employer decisions to offer coverage
 - Changes in employee decisions to take up coverage that is offered
 - State-level estimates on market for employer sponsored coverage expected summer 2015

Questions that remain to be answered

- Our findings represent a timely but very high-level look at the coverage impacts of the ACA in Minnesota
- Many important questions remain, such as:
 - What are the characteristics of the remaining uninsured population?
 - How many people who enrolled in MNsure were previously uninsured?
 - Are the newly insured able to access care?
 - What is driving trends in employer coverage?

Additional Research: MNHA Re-contact Survey

- Collaboration between MDH and SHADAC
- Based on 2013 MN Health Access Survey (MNHA)
- Re-contacting respondents who reported they were uninsured or had nongroup insurance
- Key areas of survey focus:
 - Did uninsured gain coverage? Why/why not?
 - Pathways to coverage
 - Changes in access to care and use of services
- Survey being conducted summer/fall 2014 – results available late fall

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- Co-authors
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- Data contributors
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Resources

Report

- Early Impacts of the Affordable Care Act on Health Insurance Coverage in Minnesota: www.shadac.org/MinnesotaCoverageReport

State Data

- SHADAC Data Center: www.shadac.org/datacenter

News

- Sign up for SHADAC newsletter: www.shadac.org/content/stay-updated
- SHADAC Blog: www.shadac.org/blog
- Twitter: @SHADAC

Other Resources

- SHADAC Data Resources for Monitoring the ACA: www.shadac.org/content/resources-monitoring-aca
- ACA Insurance Marketplace Enrollment Reports www.shadac.org/publications/insurance-marketplace-enrollment-reports



Survey Expertise

- Sociologists
- Health Services Research



Policy Analysis

- Economists
- Public Health Analytics



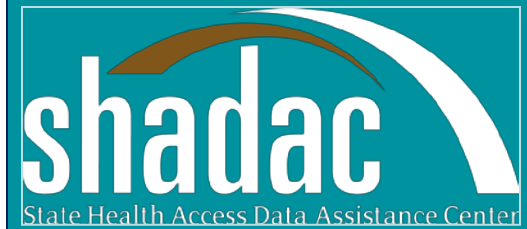
State and Federal Data Expertise

- Statisticians
- Demography



Program Evaluation

- Sociologists
- Program Evaluation



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Research Areas

- ✓ Health insurance coverage
- ✓ Access to care
- ✓ Safety net & health disparities
- ✓ Monitoring & evaluation of the ACA
- ✓ Health system reform
- ✓ Medicaid

