

# Overview of the MNHA Survey, Methodology, and Evidence of the Impact of the ACA on Health Insurance Coverage in Minnesota

**Minnesota Health Services Research Conference**

**March 1, 2016**

**University of Minnesota, St. Paul Campus**

# MNHA Team

- MDH

- Alisha Simon
- Sarah Hagge
- Kendal Orgera
- Stefan Gildemeister

- SSRS

- David Dutwin
- Susan Sherr
- Arina Goyle

- SHADAC

- Kathleen Call
- Giovanni Alarcon
- Karen Turner
- Jessie Kemmick  
Pintor

- MINNESOTANS!

# Minnesota Health Access Survey: Background

- **General Population Telephone Survey**
  - Sampling designed to results of specific geographic regions, ages, race and ethnic groups
  - Sample telephone numbers in landline and cell frame
- **History**
  - Early surveys conducted by the University
  - Since 2001, a partnership between MDH/SHADAC
  - Funding until 2007 through various sources
  - Starting in 2007 funding through
    - Biennial state appropriation
    - Matching funds provided by DHS
    - Operation funding by MDH

# Minnesota Health Access Survey: Methods

MNHA	Total Completes	Percent Landline Completes	Response Rate
2001	27,315	100%	67%
2004	13,802	100%	59%
2007	9,728	100%	43%
2009 <sup>^</sup>	12,031	82%	45%
2011 <sup>^</sup>	11,355	62%	44%
2013 <sup>^</sup>	11,778	42%	48%
2015 <sup>*^</sup>	11,178	28%	35%

<sup>^</sup> Age screen (in landline; added to cell 2015) and child oversample.

<sup>\*</sup> Oversampled pre-paid cell phones.

# Minnesota Health Access Survey: Content

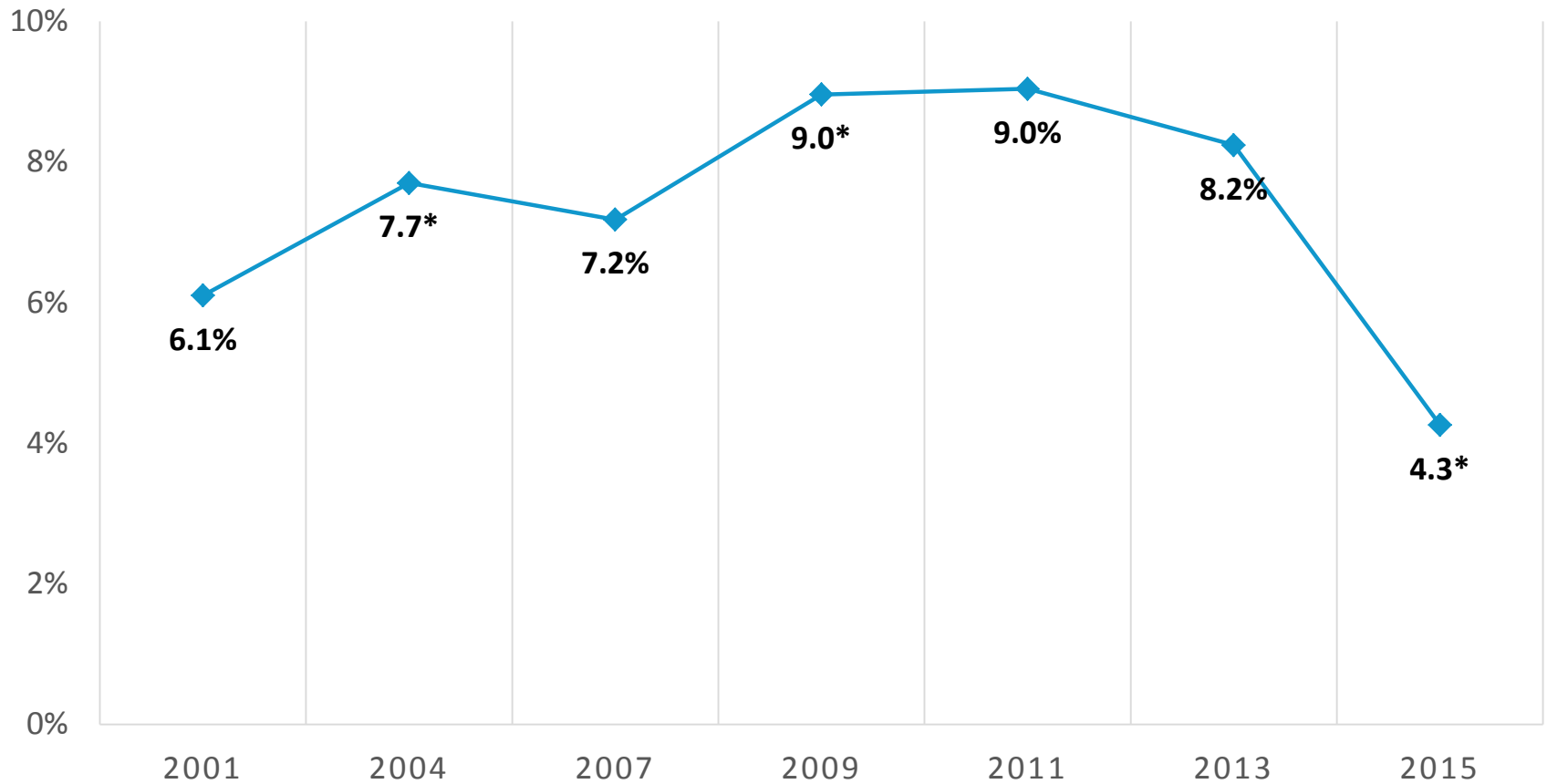
- Respond to stakeholder needs
- Changing policy environment
- Added questions
  - Health insurance literacy
  - Discrimination
    - Having insurance or type of insurance
    - Race, ethnicity or nationality
  - ❖ Affordability
  - ❖ Access

# UNINSURANCE

---

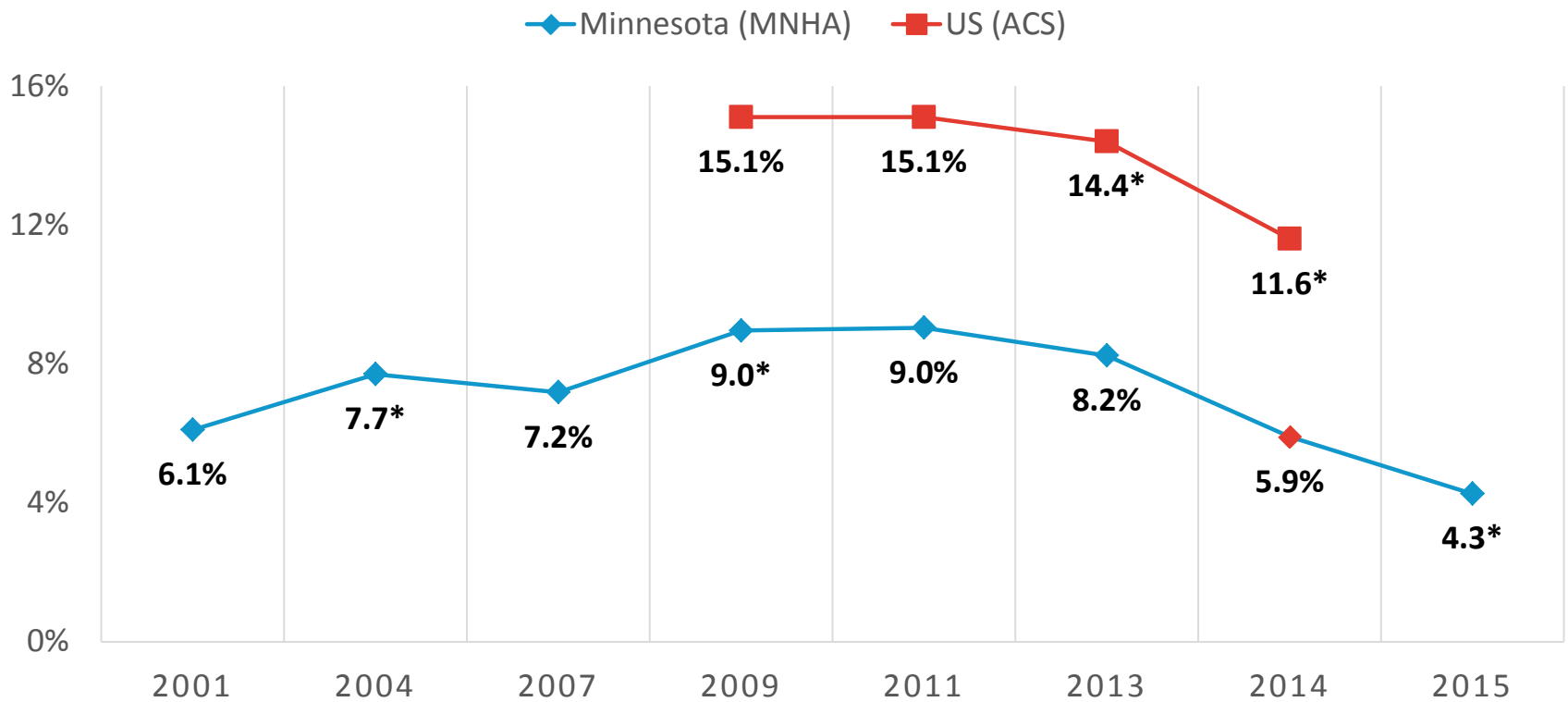
# Uninsurance in Minnesota – 2001-2015

MNHA



\* Indicates statistically significant difference from previous year shown at the 95% level  
Source: 2001, 2004, 2007, 2009, 2011, 2013 and 2015 Minnesota Health Access Survey.

# Uninsurance in Minnesota and the US 2001-2015

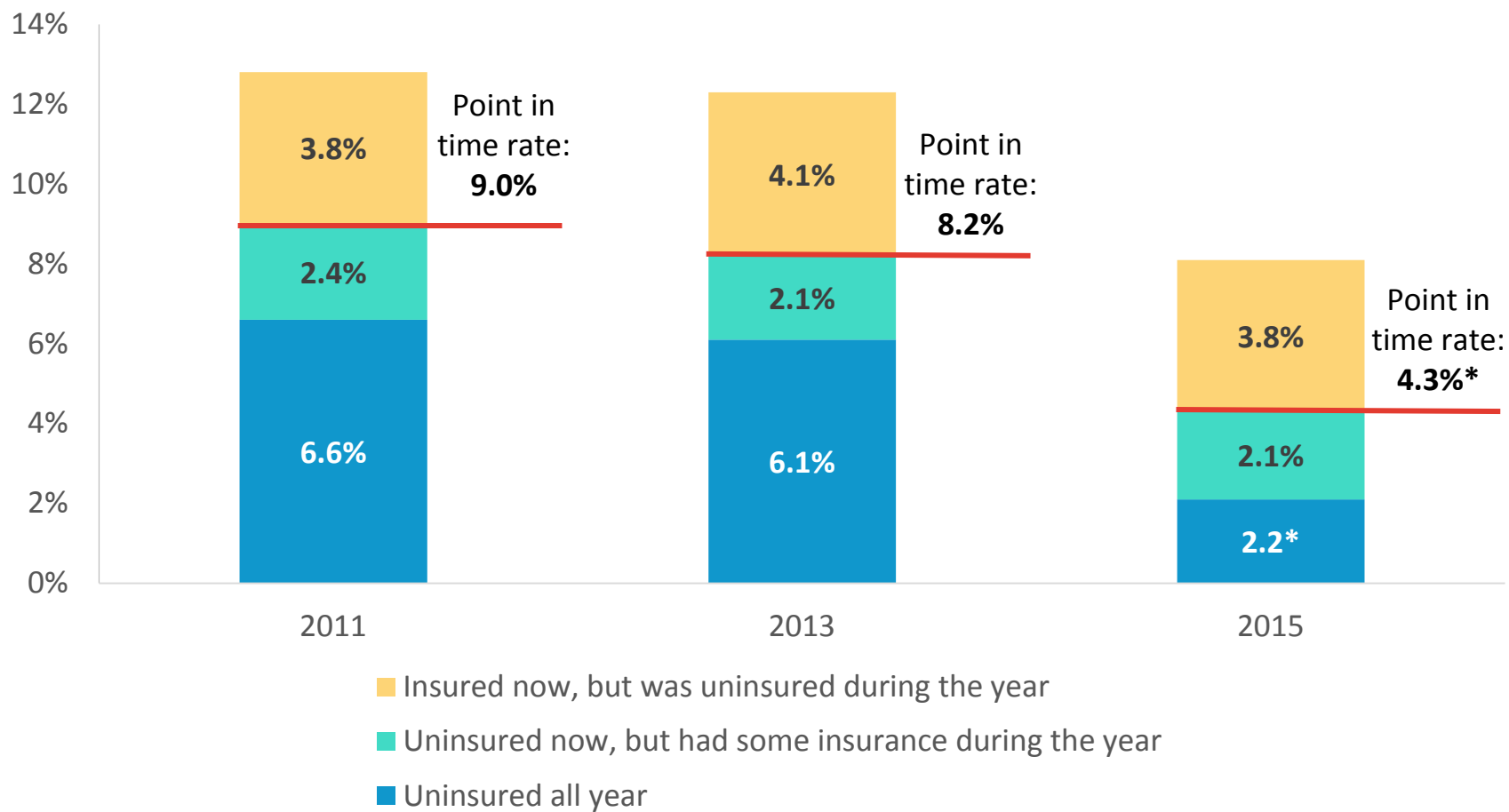


\* Indicates statistically significant difference from previous year shown at the 95% level *within the same survey*

Source: 2001, 2004, 2007, 2009, 2011, 2013 and 2015 Minnesota Health Access Survey (Minnesota) and U.S. Census Bureau, American Community Survey (ACS), US rates and 2014 Minnesota Rate. Although estimates for Minnesota align well, direct comparisons are not encouraged.

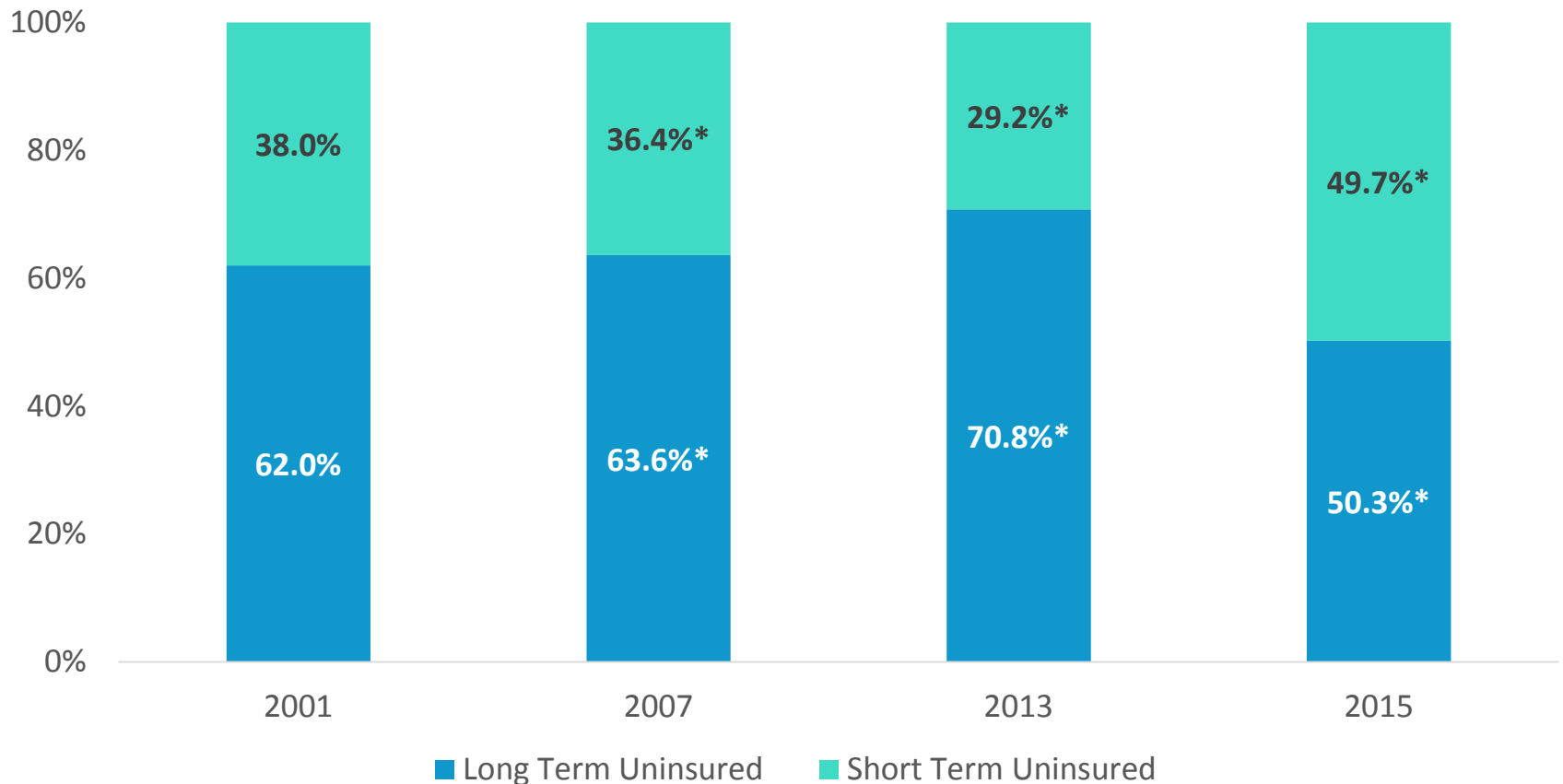


# Alternate Measures of Uninsurance



\* Indicates statistically significant difference from previous year shown at the 95% level  
Source: 2011, 2013 and 2015 Minnesota Health Access Surveys.

# The Percent of Uninsured who are “Long Term” is Changing

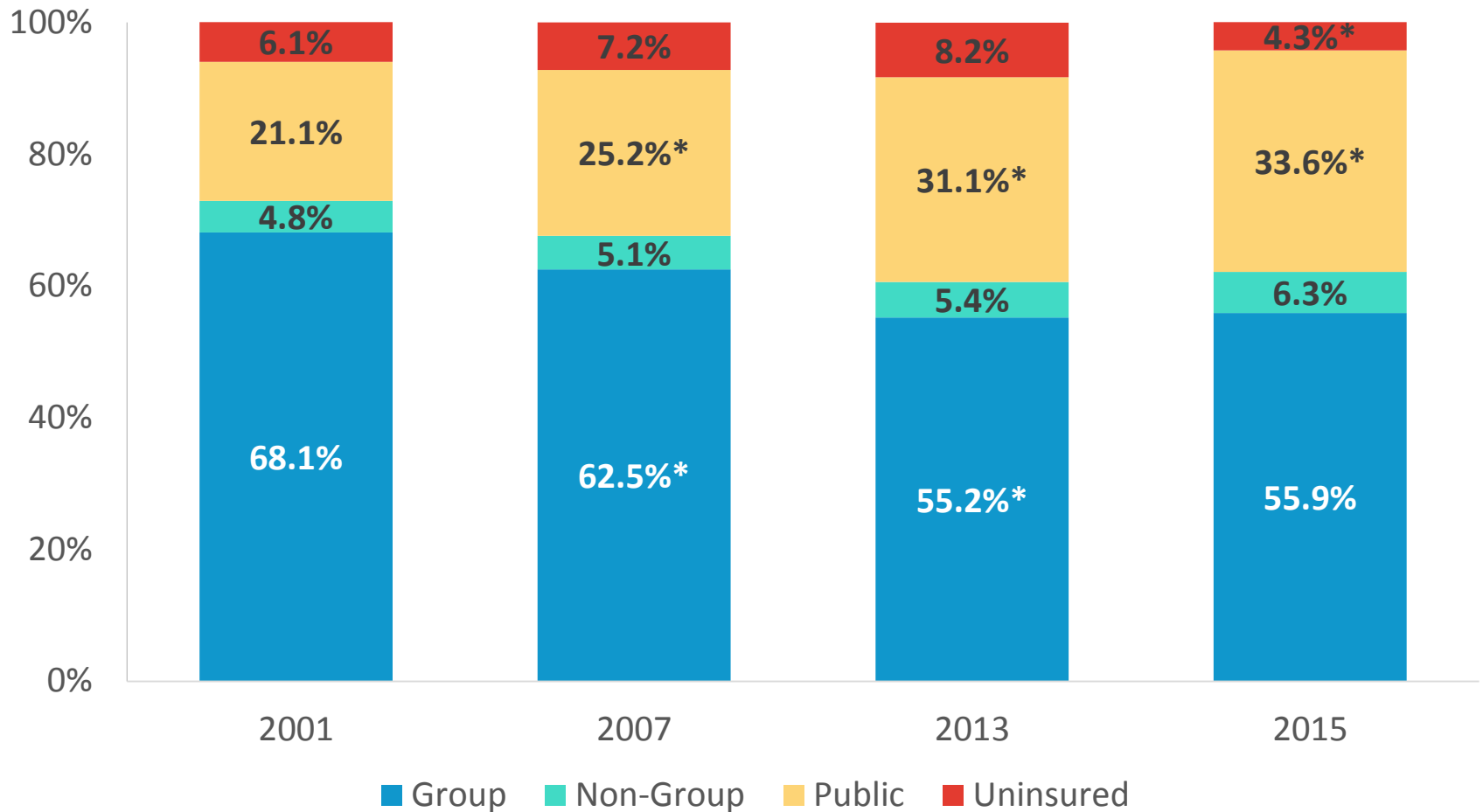


\* Indicates statistically significant difference from previous year shown at the 95% level  
Source: 2007, 2011, 2013 and 2015 Minnesota Health Access Survey.

# SOURCES OF COVERAGE

---

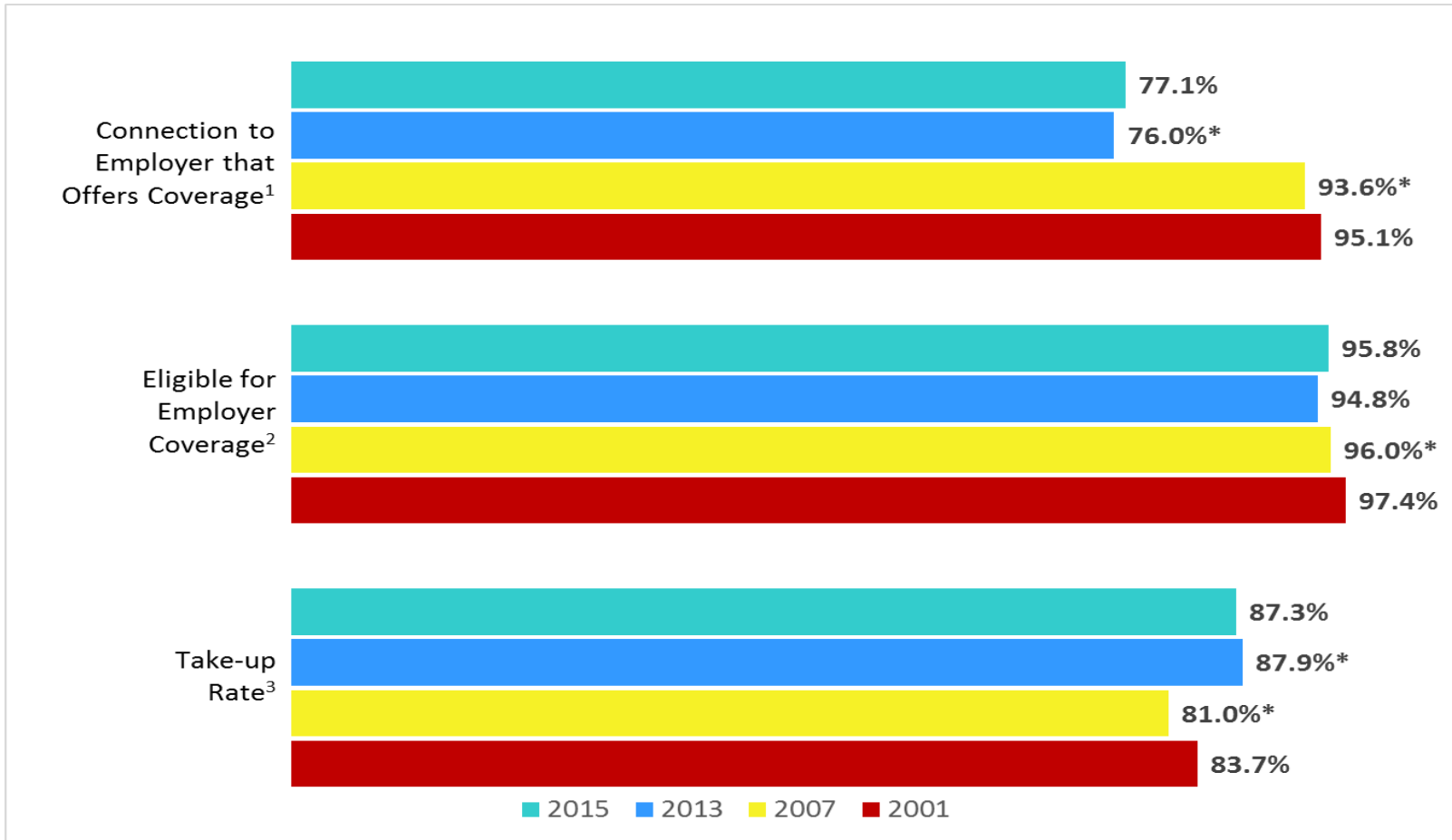
# Sources of Health Insurance Coverage



\* Indicates statistically significant difference from previous year shown at the 95% level  
Source: 2001, 2007, 2013 and 2015 Minnesota Health Access Survey.

# Access to Employer Coverage

## Non-elderly Minnesotans



\* Indicates statistically significant difference from previous year shown at the 95% level

1 Person works for or has a family member who works for an employer that offers health insurance coverage to at least some employees.

2 Percent of those who work for or have a family member who works for an employer that offers coverage who are eligible for that coverage.

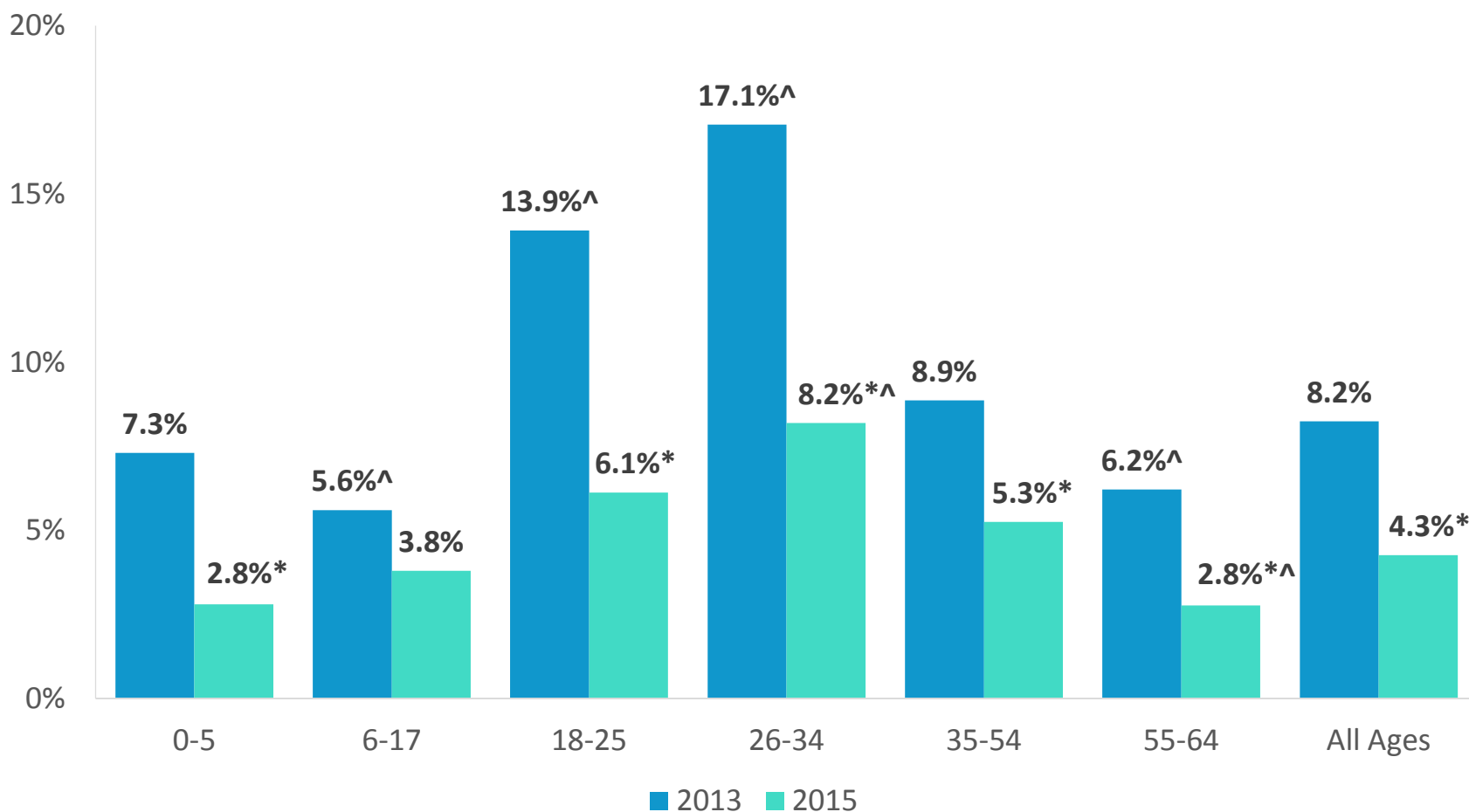
3 Percent of those eligible for employer coverage as an employee or dependent who elect to participate in the employer provided health insurance coverage.

Source: 2001, 2007, 2013 and 2015 Minnesota Health Access Survey.

REMAINING UNINSURED

---

# Uninsurance Rates by Age, Non-Elderly

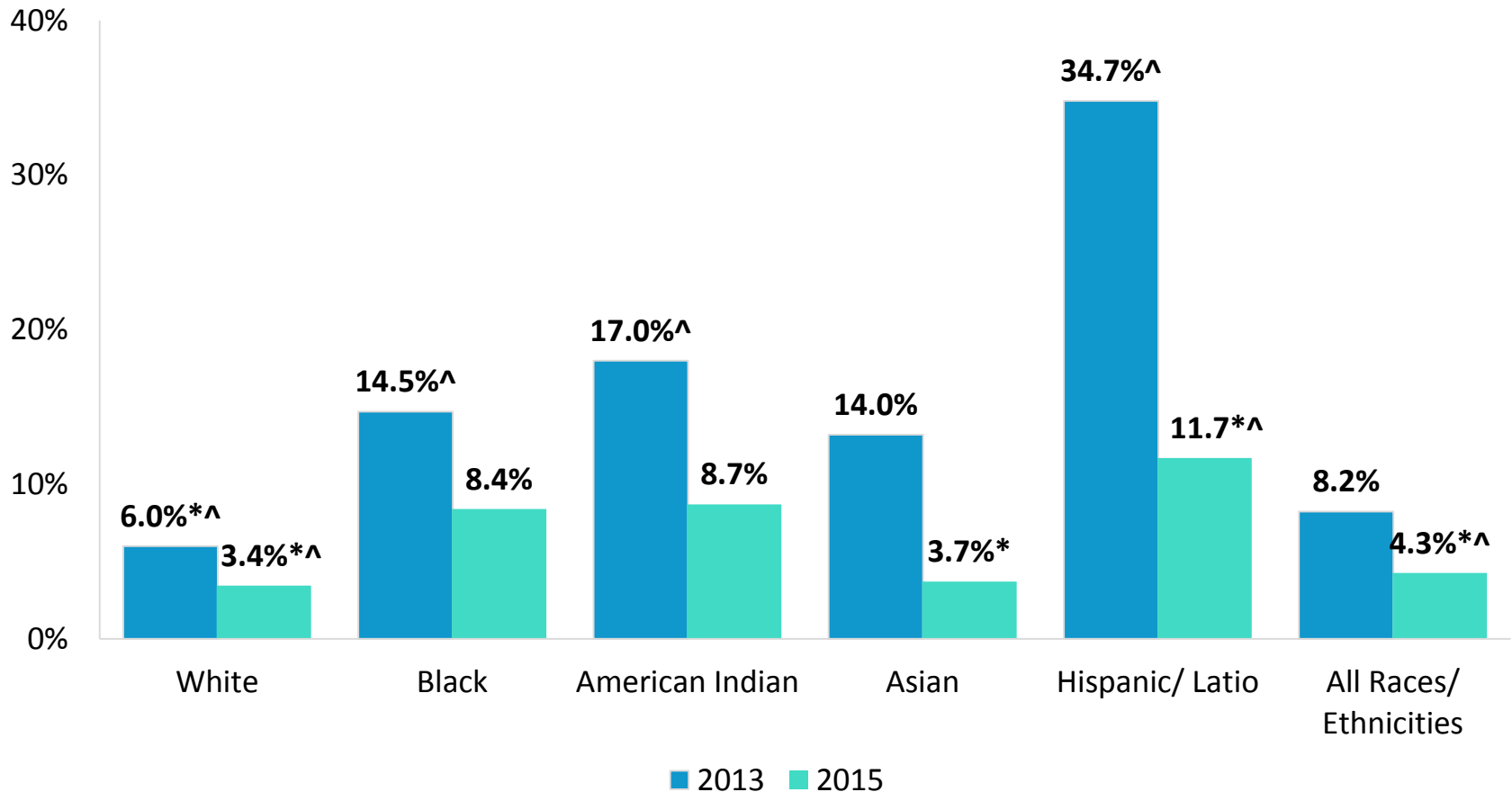


\* Indicates statistically significant difference from previous year shown at the 95% level

^ Indicates statistically significant difference from all races/ethnicities in the same year at the 95% level

Source: 2013 and 2015 Minnesota Health Access Survey.

# Uninsurance Rates by Race, Ethnicity



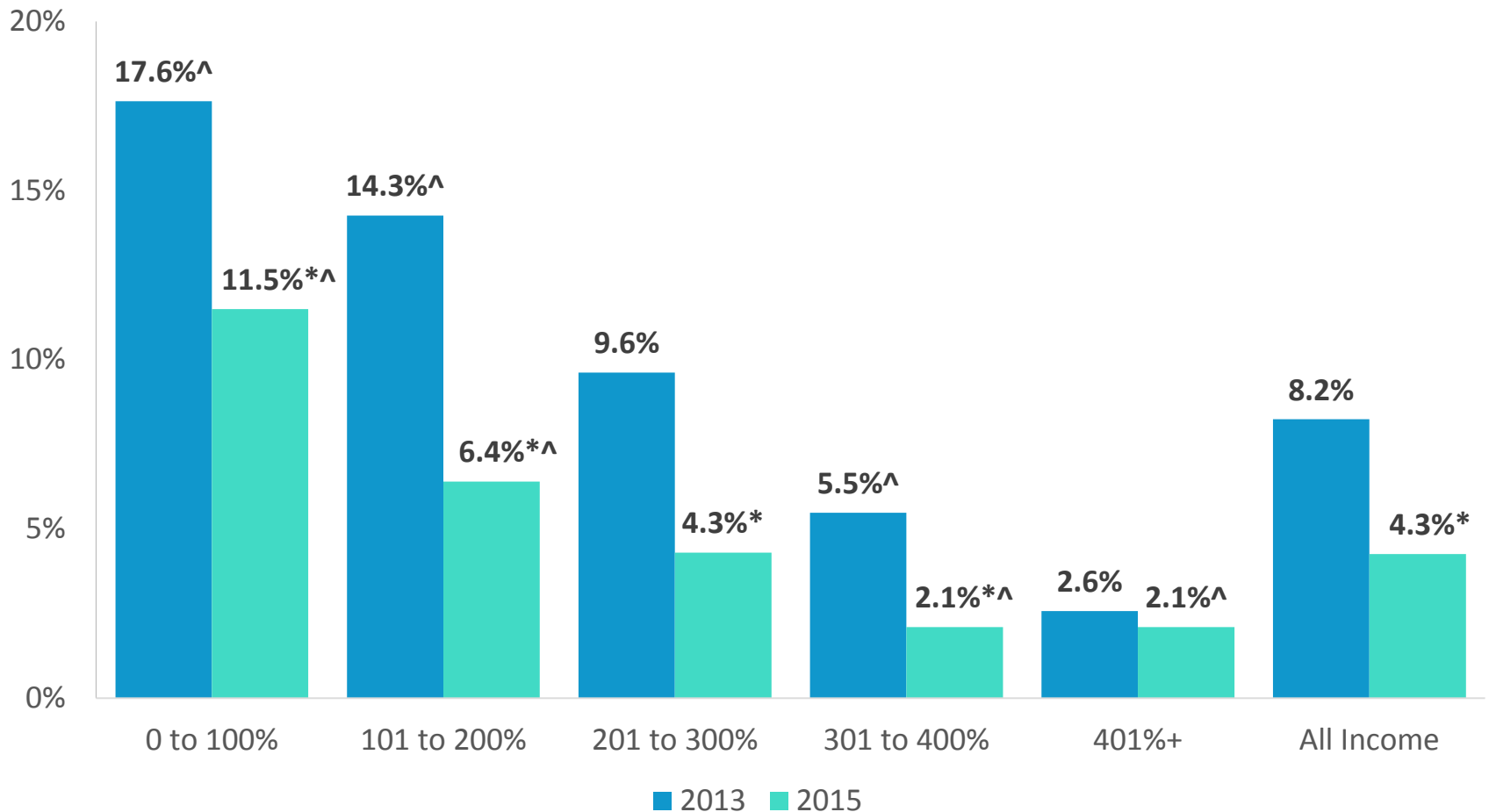
\* Indicates statistically significant difference from previous year shown at the 95% level

^ Indicates statistically significant difference from all races/ethnicities in the same year at the 95% level

Source: 2013 and 2015 Minnesota Health Access Survey.



# Uninsurance Rates by Household Income



\* Indicates statistically significant difference from previous year shown at the 95% level

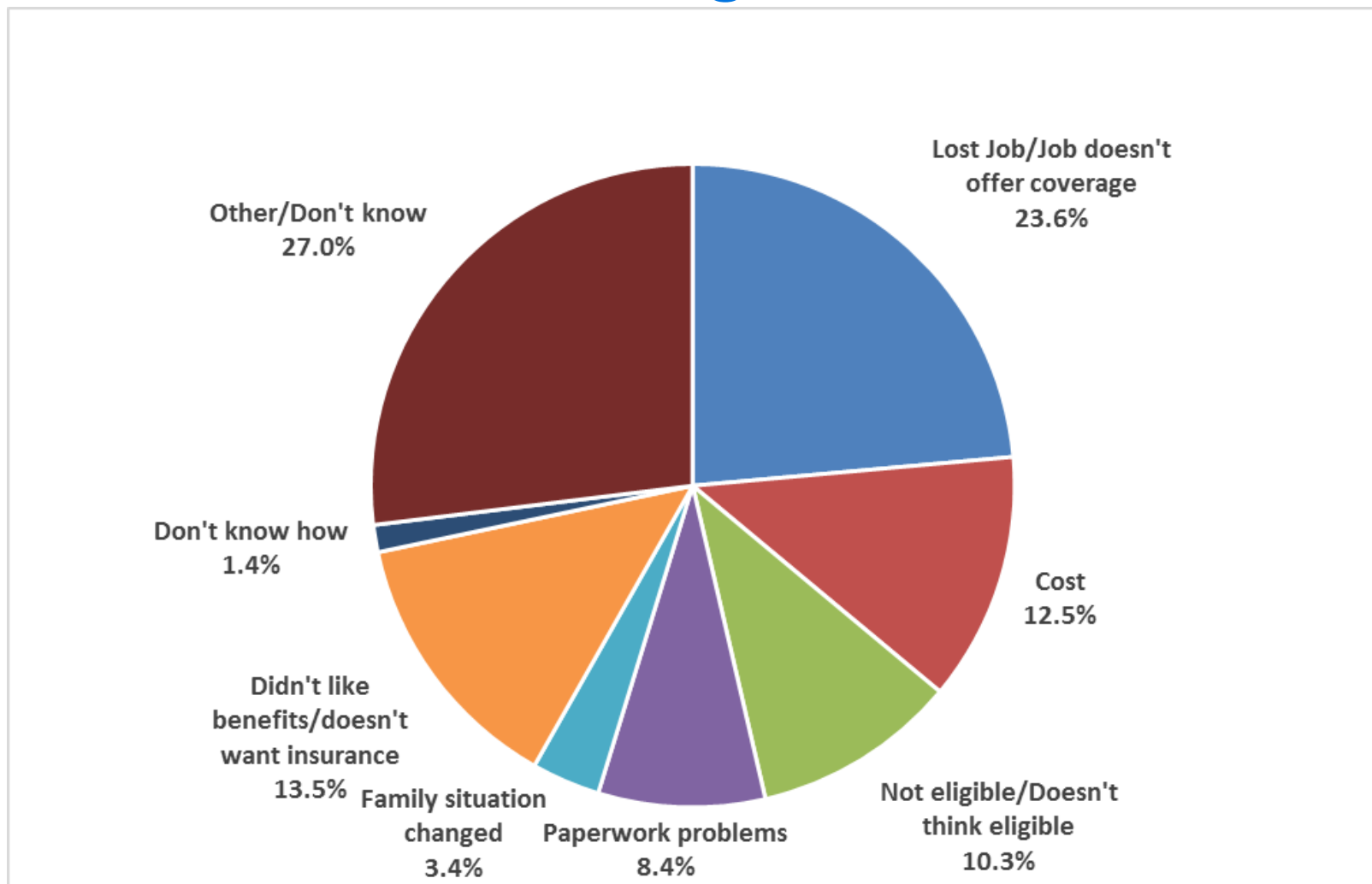
^ Indicates statistically significant difference from all races/ethnicities in the same year at the 95% level

Source: 2013 and 2015 Minnesota Health Access Survey.

# Remaining Uninsured 2015

- There are dramatically fewer uninsured
- Gains in coverage across virtually all demographic groups
- Historical patterns in inequities largely remain :
  - More likely to have household incomes below 200% FPG
  - More likely to have fair or poor self-reported health
  - More likely to have high school or less education
  - Less likely to be white
  - Less likely to be married

# Reasons For Being Uninsured 2015



Other/Don't know includes just moved to state, getting coverage soon, immigration issues, IHS, other and don't know  
Source: 2015 Minnesota Health Access Survey.

# Contact Information

**Kathleen Thiede Call, PhD**

[Callx001@umn.edu](mailto:Callx001@umn.edu)

