



March 2017

Announcements

Employer Coverage Offers and Take-Up Declined in 2015: Chartbook and State Fact Sheets on ESI Trends from 2011-2015



A new SHADAC [chartbook](#) highlights the experiences of private-sector workers with employer-sponsored insurance (ESI) from 2011 to 2015 at the national level and in the states using data from the [Medical Expenditure Panel Survey – Insurance Component](#) (MEPS-IC). Among key findings: Employer offer rates declined nationally from 2014 to 2015, as did ESI take-up among eligible workers. Across the states, Hawaii continued to have the highest ESI take-up rate (81.5%), while Colorado had the lowest (67.9%).

Additionally, premium increases continued, but the premium growth rate was stable from 2014 to 2015. The chartbook is accompanied by [state-level fact sheets](#) summarizing key ESI characteristics from 2011 to 2015.

Lynn Blewett on Expert Panel: To Be (Insured) or Not to Be (Insured): The Future of Healthcare in the U.S.

Experts at the University of Minnesota School of Public Health, including SHADAC Principal Investigator Dr. Lynn Blewett, met on February 1st to discuss possible scenarios and public sentiment relating to the U.S. health system under the new federal administration. In particular, the [panel](#) discussed the future of the Affordable Care Act (ACA) and its possible replacement. Panelists explored multiple vantage points, including federal perspectives (Dr. Jean Abraham); state-based insurance, Medicaid expansion, and possible block granting methods (Dr. Lynn Blewett); mental health (Dr. Ezra Golberstein); and public sentiments (Dr. Sarah Gollust). A recording of this event is available [here](#).

State Analyses

Kentucky: July-September 2016 Quarterly Snapshot on Health Reform



SHADAC released a [July-September 2016 Quarterly Snapshot](#) providing the latest data on health reform topics of interest to Kentucky as part of a project sponsored by the [Foundation for a Healthy Kentucky](#). The current snapshot highlights the characteristics of the state's remaining uninsured, Medicaid enrollment metrics for the state, and the state's Marketplace activities. According to the report, Medicaid covered over 650,000 adult Kentuckians during the third quarter of 2016; three health insurers offered plans through Kentucky's marketplace during the 2017 open enrollment period (compared to seven in 2016); and 7.3% of Kentuckians reported being uninsured in 2016 compared to the 9.6% of individuals nationally. View the snapshot [here](#).

Minnesota: The Effect of "Stacking" in Ottertail County, Minnesota – SIM Case Study



As part of its evaluation of the State Innovation Model (SIM) in Minnesota, SHADAC produced a [case study](#) of Otter Tail County Public Health (OTCPH), a local public agency located in rural northwest Minnesota, to investigate the agency's experience participating in multiple SIM programs across more than one unique SIM aim. This multiple participation is a practice known as SIM program "stacking." The case study found that the Otter Tail community was a favorable environment in which to stack multiple SIM programs, but organizations in the county did face challenges related to the simultaneous administration of multiple SIM grants. Learn about these challenges, along with the positive impacts related to stacking, by accessing the [full case study](#).

Minnesota: How ACA Repeal Would Impact Coverage, Uncompensated Care, and Public Programs in the State



A new SHADAC brief, "[Impact of the Affordable Care Act in Minnesota: Implications of Repeal](#)," presents an overview of the impact of the ACA's coverage expansions in Minnesota and highlights the potential for losses with an ACA repeal in light of the current Republican congressional efforts to repeal and replace the law. The authors look specifically at rates of health insurance coverage, hospital uncompensated care, and levels of federal health funding for Minnesota's public coverage programs, noting that between 2013 and 2015, Minnesota benefitted substantially under the law: During this time, the state's number of uninsured dropped by nearly 200,000, new federal funding for coverage grew to \$2.0 Billion annually, and hospital uncompensated care costs decreased by \$54 Million.

Data News

NHIS: Coverage and Uninsurance Rates Mostly Stable in January-September 2016



The National Center for Health Statistics (NCHS) released health insurance coverage estimates for January through September 2016 from the [National Health Interview Survey](#) (NHIS) as part of the [NHIS Early Release Program](#). According to [the NCHS analysis](#), for the most part, coverage and uninsurance rates remained stable between 2015 and the first three quarters of 2016. Among key findings from the report: The percentage of persons of all ages who were uninsured at the time of interview held stable at 8.8 percent (28.2 million people) between 2015 and the first three quarters of 2016, as did the percentage of non-elderly adults in most age groups, including 18-24, 35-44, and 45-64 year-olds. Only adults aged 25-34 saw a change during the time periods studied, with uninsurance decreasing from 17.9 percent in 2015 to 16.4 percent in the first 9 months of 2016. Read the full report. [Read the full report.](#)

American Community Survey 2011–2015 PUMS Files Available via U.S. Census Bureau

The U.S. Census Bureau recently released the 2011–2015 American Community Survey (ACS) [Public Use Microdata Sample \(PUMS\) files](#). These files are a set of untabulated records about individual people or housing units (with individual response information including relationship, sex, education level, and employment status). They provide a five-percent sample of the U.S. population and cover geographic areas by region, division, state, and Public Use Microdata Areas (PUMAs). Users can access these files via [American FactFinder](#), the Census Bureau's [FTP site](#), and [DataFerrett](#). [Access the PUMS files here.](#)



Related Resource – [SHADAC's 5-Year ACS State and County Coverage Estimates](#) are available via a clickable map or a 50-state table of estimates. This resource provides state and county health insurance coverage estimates for the pooled years 2011-2015.

Recommended Reading

Features from the SHADAC Blog

["Video: Sarah Gollust Finds Little Public Health Substance in Early TV News Coverage of the ACA"](#)

February 17, 2017

["NHIS: Coverage and Uninsurance Rates Mostly Stable in January-September 2016"](#)

February 14, 2017

News Highlights: Our Research and Researchers in the News

Fewer employers offer health insurance, fewer employees sign up

[Politico](#) (gated), [Washington Examiner](#), [Minneapolis Star Tribune](#), [Hartford Business Journal](#), [Healthcare Finance News](#), [The Lund Report](#)

GOP health plan could cost Minnesota billions

[Associated Press](#)

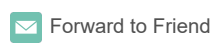
Drowning in a 'high-risk' insurance pool, at \$18,000 a year

[National Public Radio](#), [PBS NewsHour](#), [Kaiser Health News](#), [California Healthline](#), [Healthcare Finance News](#)

An interim plan to stabilize Minnesota's individual health insurance market

[Minneapolis Star Tribune](#)

The pitfalls of replacing Obamacare



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