

# State Level Data and Data Collaborations

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# State Level Data and Collaborations

- State level data are useful if you are interested in health disparities
  - Lower income individuals and families, including those with significant disability, are underrepresented in many national and commercial datasets
  - Medicaid data provide comprehensive coverage on diverse populations
- State level data can be challenging to work with and to acquire
  - Steep learning curves due to complex and bureaucratic systems
  - Data are protected and a path to access is not always clear
  - High prevalence of Medicaid managed care may result in uneven data quality
  - Understanding and accessing data benefits from long term collaborations
- Opportunities at the county level

# Types of Data Available at the State Level

- Medicaid data
  - Health insurance coverage for low-income families and individuals (in expansion states), low-income elderly, disabled
  - Covers a racially/ethnically diverse population with complex health conditions
- Inpatient and emergency department discharge data
  - Discharge data are available in most states
  - In CA: Office of Statewide Health Planning and Development
  - AHRQ maintains a national data base (HCUP) that aggregates these data, although with less detail than is available in the state data
- State-level surveys can provide local area information
  - Greater focus on health disparities compared to national surveys and potentially more customizable
  - California Health Interview Survey, Healthy Places Index

# Value from using Medicaid Data

- Medicaid data are comprehensive
  - Medical care
  - Mental health care and substance use care
  - Pharmaceuticals
  - Home and community-based services
  - Long term care
- Medicaid provides a unique platform for special populations of interest
  - Health of families: maternity care, child asthma
  - Common chronic conditions as well as less common, but more severe conditions
  - Mental health and substance use
  - Developmental disability
  - Custodial care

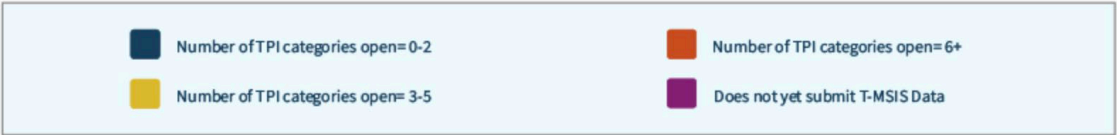
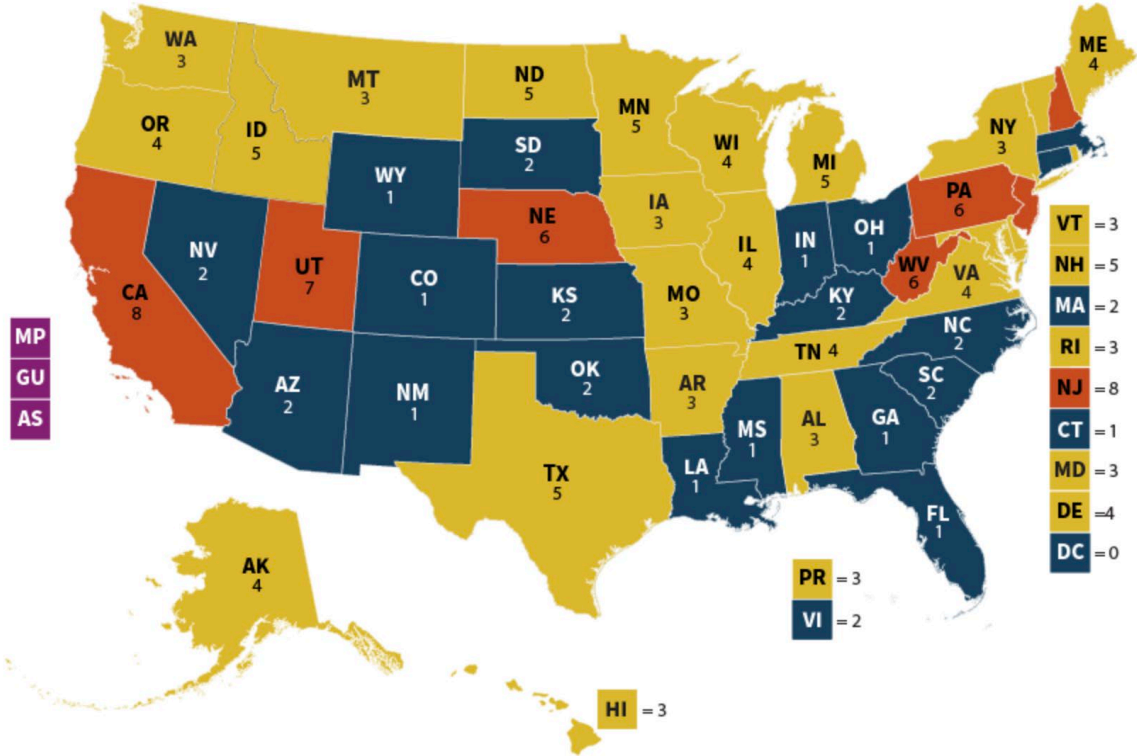
# Medicaid Programs are Innovative

- Delivery system and payment reform
  - Comprehensive, statewide multi-payer delivery system and payment reforms that reward value as opposed to volume and support improvements in population health
- Integrated services for people with complex needs
  - Innovations in care for high-risk children and youth; adults eligible for Medicare and Medicaid, including those with long-term care needs; and people with complex physical health, behavioral health, and social service needs
- Experimentation with alternative delivery strategies
  - Community health workers to build health literacy
  - Peer providers with lived experience to increase engagement in health care

# Transformed Medicaid Statistical Information System

- T-MSIS system aims to provide Medicaid data on all US states and territories
  - Next generation of the MSIS meant to provide more timely access to data
  - MSIS was the basis of the Medicaid Analytic Extract (MAX data)
- T-MSIS has experienced some delays, although all states are now reporting data
- Currently working to improve data quality targeting 21 indicators:
  - TPI-03: Reasonableness of Eligible Counts
  - TPI-13: Beneficiary Demographics
  - TPI-20: Completeness of Key Claims Service Data Elements

# T-MSIS Priority Items (TPIs) 1 – 23 Status (2021 T-MSIS DQ Assessment)



# Challenges in using State Level Data

- Data access is an issue
  - Each state will have a unique process/IRB to access data
  - Fragmented data, MOUs required for multiple systems
  - Significant investment for a single study
- Data quality
  - Each state will have unique aspects of their data
  - High prevalence of managed care may affect data quality
  - Potentially data on race/ethnicity, language, sexual orientation
- State data access and quality would benefit from long-term collaborations and investment
  - Maintenance of merged datasets, standardized process for data access, shared understanding of data elements



# Data Collaborations in Counties

- California has five counties with populations > 2M
  - Los Angeles, San Diego, Orange, Riverside, San Bernardino
- Counties often manage some parts of the health care system
  - Mental health and substance use services are managed at the county level in California
  - County level data may have more detail than data at the state level
- Counties also provide other social and public safety services
  - Child welfare, jail and juvenile justice, probation