

BROOKINGS



AFFORDABLE CARE ACT IMPLEMENTATION RESEARCH NETWORK

Conference on Evolving an Implementation Research Strategy for the Affordable Care Act

October 23-24, 2014 | The Brookings Institution

LITERATURE REVIEW

Organizations Currently Tracking and Analyzing ACA Implementation

Prepared by

Christine Dang-Vu, Engelberg Center for Health Care Reform at Brookings
Caitlin Brandt, Engelberg Center for Health Care Reform at Brookings

Publications for this working conference have been generously supported by



Preface

“Vision without execution is hallucination.” Thomas Alva Edison

When legislative bodies pass new laws to tackle problems and pursue opportunities, the work of government has only just begun. The considerable challenges of accomplishing the intent and requirements of the legislation remain.

Following passage of a law, an initial challenge is putting in place the first set of implementation actions. This requires a full gamut of decisions and actions, including assigning roles and responsibilities, setting timetables, awarding contracts and grants, promulgating rules, establishing effective measurement and management practices as well as systems to control risk, and ensuring ethical integrity.

A second equally important but often overlooked challenge is establishing a healthy, dynamic system that continuously learns and improves. The most successful government endeavors to establish a culture that continually asks and answers a few key questions, such as “Do government actions work as expected?” and “How can government do better across multiple dimensions?” These dimensions include outcomes; return on spending; and the quality of people’s experiences with government. They also include enhanced understanding of what government is doing and why; more informed individual choice; and fairness. The second question needs to be asked, answered, and acted upon more often than the first.

The Volcker Alliance supported preparation of this paper, which surveys current and planned research on implementation of the Affordable Care Act, to make it easier for practitioners, researchers, and others to know who is studying what, access and apply the findings, and identify research gaps that need to be filled.

It is our hope that this paper will contribute to creating the foundation for a culture of continuous learning and improvement resulting in better health care outcomes, greater access, and lower costs. A companion paper explores the potential of a network of local researchers willing to work together to learn about the Affordable Care Act’s implementation and share their insights.

We see these papers as a small but important contribution to addressing the challenge of effective execution of public policies and to rebuilding public trust in government. Launched in 2013, The Volcker Alliance seeks to rekindle intellectual, practical, and academic interest in the implementation of policy – the “nuts and bolts” and increasingly the “electrons” of governance – and serve as a catalyst for sustained government improvement.

In this light, the Affordable Care Act represents an important opportunity for improving the delivery of healthcare services, which are significantly funded and regulated by government. Improving healthcare is such an important part of government’s work that it is hard to imagine sustained and overall improvement in government performance unless the performance of the healthcare system is improved. At the same time, the Act demonstrates visibly the importance of execution and implementation in generating, or failing to generate, such improvements.

Shelley Metzenbaum, President
The Volcker Alliance
www.volckeralliance.org

Organizations Currently Tracking and Analyzing ACA Implementation

This is a preliminary scan of organizations compiling information and conducting research on the coverage provisions of the Affordable Care Act based on publicly available information found on their websites. The list is alphabetical, and includes a wide variety of groups on the funding and research side, in addition to government, non-profit, and private institutions.

Note: a “*” denotes organizations with databases

1. ACA Scholar Practitioner Network

<http://ssascholars.uchicago.edu/jhpp/>

Organizes scan of scholarly work on state-level implementation by state, topic, or researcher. These efforts are funded by the Robert Wood Johnson Foundation (RWJF) and the University of Chicago Center for Health Administration Studies.

2. Assistant Secretary for Planning and Evaluation (ASPE)

http://aspe.hhs.gov/office_specific/hp.cfm

Housed within the U.S. Department of Health and Human Services, ASPE releases research briefs on various impacts of the ACA, both short and long term, with much of the focus on marketplaces and enrollment. They also look at the effect of the ACA on CHIP, delivery reform, and uncompensated care.

3. Center on Health Insurance Reforms, Georgetown University

<http://chir.georgetown.edu/>

Their project, “*Implementing the ACA: Monitoring and Analysis of Insurance Reforms*,” (funded by The Commonwealth Fund) produces reports and policy briefs that analyze emerging trends, best practices, and implementation challenges; many of the reports detail state implementation decisions. Their research focus is mostly legal, and looks at rate review, market reforms, narrowing provider networks, market competition, and risk communication strategies, particularly through the lens of regulatory policy changes. RWJF also funded a series of “*Rapid Response*” reports that addressed timely, emerging issues for implementation (e.g. navigators, plan management, etc.).

4. Center on Budget and Policy Priorities (CBPP)*

<http://www.cbpp.org/research/index.cfm?fa=topic&id=32>

CBPP provides technical assistance to states on ACA implementation and integrating enrollment and eligibility assessments across human services programs. They produced a webinar series, “*Health Reform: Beyond the Basics*,” targeted to advocates, and state and local officials to provide information and assist with ACA implementation. They also provide input and assistance to federal and state governments on regulations and policy decisions regarding the insurance marketplaces and Medicaid. CBPP also produces brief analytical pieces that focus on the implications of policy options/decisions such as the impact of the ACA on employment and the impact of expanding the “grandfathering” of plans. They also created a database of marketplace implementation issues.

5. The Commonwealth Fund

<http://www.commonwealthfund.org/topics/affordable-care-act-reforms>

Commonwealth funds organizations to conduct health-related research, particularly related to enrollment gaps, and also conducts and publishes national surveys tracking consumer experience with health insurance marketplaces. They frequently publish issue briefs and case studies regarding ACA implementation, such as marketplace decisions, Medicaid expansion, quality of coverage, consumer satisfaction, and improvement in health outcomes.

6. Enroll America

<http://www.enrollamerica.org/>

Enroll America is a non-profit organization focused on enrollment and health insurance coverage. They provide implementation resources for national and state level stakeholders and compile federal guidance on ACA enrollment provisions. They also produce research publications in the areas of application assistance; eligibility, enrollment, and renewal; health literacy; outreach; and providers.

7. George Washington University, Department of Health Policy

<http://publichealth.gwu.edu/departments/health-policy/departmental-research>

GWU has produced a study regarding state policies for consumer outreach and the role of community health centers in these efforts. They also published a paper regarding state decisions on marketplaces and plan offerings, and host “HealthReform GPS,” which collects information on and publishes briefs about implementation of various parts of the law. This project is funded by RWJF.

8. Health Affairs

http://content.healthaffairs.org/cgi/collection/affordable_care_act

Health Affairs is a peer-reviewed journal focused on health policy issues, and also produces policy briefs on timely and important health policy topics. Funded by RWJF, the briefs are geared to policymakers, congressional staffers, and others who need short, jargon-free explanations of health policy basics. They include competing arguments from various sides of a policy proposal and the relevant research supporting each perspective. The briefs include color maps and charts and often show how individual states are affected (RWJF funded and accessible at: <http://www.rwjf.org/en/research-publications/find-rwjf-research/2009/06/health-affairs-rwjf-health-policy-brief-series.html>).

9. Kaiser Family Foundation*

<http://kff.org/health-reform/>

Kaiser tracks ACA implementation, particularly state decisions, coverage/enrollment estimates, and delivery system changes within Medicaid and the implications of that on system capacity. They also house Kaiser State Health Facts, which gather information pertaining to various aspects of ACA implementation for all 50 states, including, but not limited to: marketplace type, estimated number of plan enrollees, percentage of population enrolled, enrollee demographic information, enrollee plan selection, dental marketplace selection, Medicaid/CHIP enrollment, and number of insurers participating. They also produce issue briefs aimed at a general policy audience that address ACA-related topics such as coverage gaps, premiums, risk adjustment, and public opinion of the law and its implementation.

10. Leonard Davis Institute of Health Economics, University of Pennsylvania*

<http://ldi.upenn.edu/data-briefs>

The Institute publishes a series of reports and data briefs on ACA insurance marketplace operations and trends. It also hosts the Health Services Research Data Center, and produces insurance exchange datasets, which are funded by RWJF and available on their website. Topics include:

- State insurance department
- SHOP Participation Rules
- HIX Exchange Determination Process & Governance Structure
- Medicaid Expansion and Federal State Division of Responsibility
- Costs of all silver plans by insurer and rating area
- State ACA rules by Geographic Rating Areas
- Adjusted Community Ratings: The extent that states implement ACA rules regarding premium rates.
- Choice Architecture on the Web Portals: How web portals present plan information to consumers.
- Brokers: Role of insurance brokers and agents on the exchanges.
- Network Adequacy

11. National Academy of State Health Policy (NASHP)

<http://www.nashp.org/aca-implementation-state-health-reform-0>

NASHP has produced a few issue briefs with an emphasis on Medicaid and CHIP issues, and coordinates *State (Re)forum*, an online community where state health policymakers can share best practices.

12. National Conference of State Legislatures*

<http://www.ncsl.org/research/health/health-reform.aspx>

The NCSL hosts a database with state legislative actions on ACA in 45 states plus DC; the legislation can be sorted by state and topic.

13. PricewaterhouseCoopers' Health Research Institute*

<http://www.pwc.com/us/en/health-industries/health-research-institute/index.jhtml>

Releases briefs related to their Health Research Institute surveys, which consist of insurance executives and consumers. Includes overlap and comparisons between the sets of results to try to map whether insurers and consumers have the same goals and interests in mind, and whether insurers are focusing on the right aspects of their plans.

14. RAND

<http://www.rand.org/topics/health-care-reform.html>

RAND regularly releases briefs related to cost and coverage, including Medicaid expansion, state exchanges, and payment reform and care models. They have a microsimulation model that they use to project outcomes related to spending and uninsurance rates over all 50 states. They conduct the *RAND Health Reform Opinion Study*, which started in September 2013 and collects public opinion research from 5,500 individuals regarding the ACA and insurance enrollment. The survey tracks individual coverage changes and asks participants whether they have a favorable/unfavorable opinion of it, whether their family will be better or worse off, and whether the country will be better or worse off because of the ACA. They also conduct on the ground research with enrollees and grassroots organizations to highlight barriers and develop strategies to increase enrollment, as part of the Coverage to Care initiative.

15. Robert Wood Johnson Foundation*

<http://www.rwjf.org/en/topics/search-topics/A/affordable-care-act-aca.html>

RWJF presents regular reports, briefs, and commentary on health policy issues, health reform, and the Foundation's research program. Projects include policy and administrative research, technical assistance, insurance marketplaces, support for data bases on the ACA and health reform, Medicaid, and health systems' IT. They also fund various datasets and analysis on health reform, including research on insurance exchanges, Medicaid, and health IT (as indicated throughout this document).

16. State Health Access Data Assistance Center (SHADAC)*

<http://www.shadac.org/>

SHADAC is a health policy research center that provides technical assistance and produces various issue briefs, reports, and journal articles on various aspects of health policy. They also host a data center that focuses on coverage, access, and cost estimates by state. They also partner with the State Health Reform Assistance Network to provide implementation assistance in ten states, which they are shifting into a research project.

17. State Health Reform Assistance Network

<http://www.statenetwork.org/>

This network represents a joint collaboration between RWJF and Princeton University. It also coordinates with Georgetown and the State Health Access Data Assistance Center to provide technical assistance and works with newly formed marketplaces, Medicaid agencies, insurance departments, and other state

agencies to effectively implement ACA's coverage expansions. They also produce issue briefs, meetings and presentations, regulatory analysis, state materials, templates and toolkits, webinars, and work plans and timelines.

18. Urban Institute

http://www.urban.org/health_policy/health_care_reform/index.cfm

The Institute produces a series of policy papers and issue briefs related to the ACA, which cover a range of topics including Medicaid expansion, coverage, outreach and enrollment, insurance marketplaces (premiums, adverse selection, etc.), and the fiscal implications of the reforms. A series of papers examine ACA implementation in ten states and address topics like state strategies for stabilizing premiums. Most of these papers are qualitative case studies of state efforts. A second series of quantitative papers examine the coverage and fiscal implications of various policy scenarios using their micro-simulation model, such as effects on employment, coverage, and access to care. They conduct a quarterly *Health Reform Monitoring Survey* of the non-elderly population, which collects data on coverage, access to and use of health care, health care affordability, and health status. The survey questions use the same wording as federal surveys such as the ACS and NHIS where possible. Much of their work is funded by RWJF. They also provide technical assistance to a few states exploring exchange development.

Organizations	DATABASES				GENERAL RESEARCH/ISSUE BRIEFS				TECHNICAL ASSISTANCE			
	E & M	IT	ECO	Medicaid	E & M	IT	ECO	Medicaid	E&M	IT	ECO	Medicaid
ACA Scholar Network					✓		✓	✓				
ASPE					✓		✓	✓				
CHIR, Georgetown					✓				✓		✓	
CBPP	✓		✓		✓		✓	✓	✓		✓	✓
Commonwealth*					✓		✓	✓				
Enroll America							✓				✓	
GW Dept. of Health Policy					✓	✓		✓				
Health Affairs					✓	✓	✓	✓				
Kaiser	✓			✓	✓		✓	✓				
Leonard Davis Institute, UPenn	✓			✓	✓							
Ntl. Academy of State Health Policy					✓		✓	✓				
Ntl. Conf. of State Legislatures	✓		✓	✓								
PWC's Health Research Institute	✓				✓			✓				
RAND					✓		✓	✓			✓	
RWJF*	✓			✓	✓	✓	✓	✓			✓	
SHADAC	✓		✓				✓	✓	✓		✓	✓
State Health Reform Assistance Network									✓		✓	✓
Urban					✓		✓	✓	✓			

KEY - * indicates primary funder
 E & M – Exchanges and Markets
 IT – Information Technology
 ECO – Enrollment, Consumer Support, and Outreach

Medicaid – Medicaid