

From Databases to Policy Spaces: An Introduction to Kentucky's Office of Health Data and Analytics

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Part I – Evidence-Based Policy, and the Role of Administrative Data in Forming Conclusions

Part II – How the Office of Health Data and Analytics Serves the Commonwealth of Kentucky

Part III – Example Projects that Have Been Completed by the Division of Analytics









KENTUCKY'S PURSUIT OF EVIDENCE-BASED POLICY FOR HEALTH AND FAMILY SERVICES

Part I:

How Healthy are Kentuckians?

According to the UnitedHealth Foundation's America's Health Rankings® 2019 Annual Report, Kentucky's overall ranking is 43rd in the U.S.

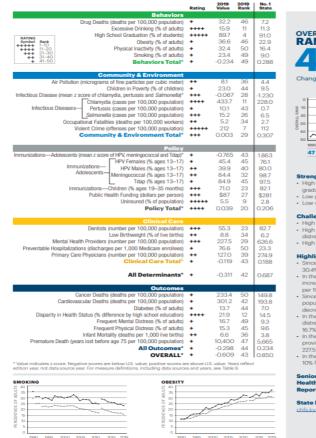
Strengths

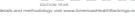
- 4th in high school graduation rates
- 7th in violent crime
- 9th in rates of uninsured citizens
- 11th in rates of excessive drinking

Challenges

- 49th in smoking
- 50th in preventable hospitalizations
- 50th in physical inactivity
- 50th in cancer deaths

ITED REALTH FOUNDATION | AMERICA'S REALTH PANKINGS# 2019 Kentucky









Strengths:

- · High percentage of high school graduation · Low prevalence of excessive drinking
- Low violent crime rate

Challenges:

- · High prevalence of physical inactivity · High prevalence of frequent mental distress
- · High cancer death rate
- **Highlights**:
- Since 2012, obesity increased 20% from 30.4% to 36.6% of adults In the past 10 years, drug death increased 96% from 16.4 to 32.2 deaths
- per 100,000 population Since 2010, the percentage of the
- population without health insurance decreased 66% from 16.1% to 5.5% In the past three years, frequent menta
- distress increased 21% from 13.8% to 167% of adults · In the past two years, mental health
- providers increased 17% from 194.6 to 227.5 per 100,000 population
- In the past four years, diabetes included 10% from 12.5% to 13.7% of adults

Senior Report Rank: 49 Health of Women and Children Report Rank: 44

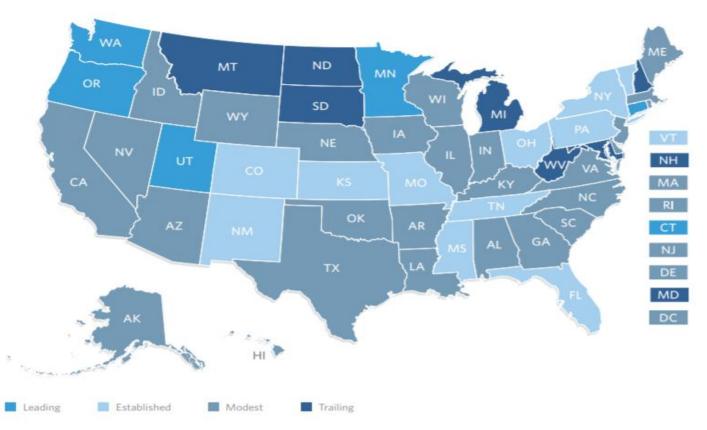
State Health Department Website





Evidence-Based Policy: The National Landscape

Most States Show Modest Levels of Evidence-Based Policymaking



Source: Pew analysis of statutes, administrative codes, executive orders, and state documents

© 2017 The Pew Charitable Trusts



Pew-MacArthur Results First Initiative. (2017). How states engage in evidence-based policymaking: A national assessment. *The Pew Charitable Trusts, MacArthur Foundation. Washington, DC*



Could Kentucky Use Data to Become a Healthier State?

- Kentucky policy makers need information quickly, and in an easily digestible format, if it is to be useful for their decisions.
 - "How many Kentuckians are enrolled in Medicaid? Has this number significantly changed in recent years?"
- Administrative data from the operations of state government programs are often a rich source of information for rigorous program evaluation.
 - "Who received this program, and was it helpful for them?"
- The analysis of this data allows for making reasonable estimates about the effects of policy choices before they are made.
 - "If this bill were to be signed into law, how much do we believe it would cost in new expenditures?"









THE OFFICE OF HEALTH DATA AND ANALYTICS

Part II:

Division of Analytics: History and Mission

Kentucky Revised Statutes 194A.101

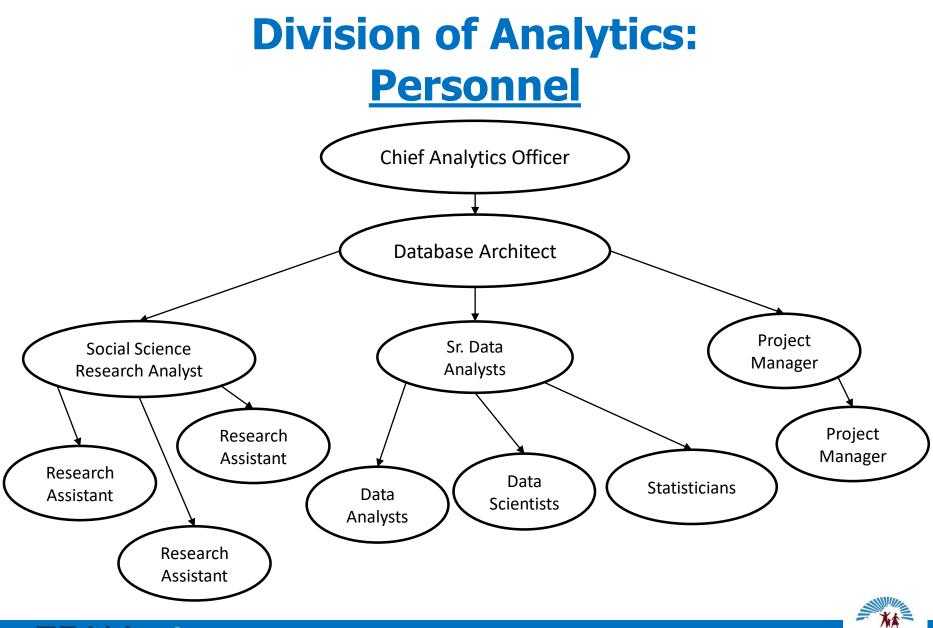
- 194A.101 Division of Analytics created in the Office of Health Data and Analytics -- Duties and responsibilities -- Review of data requests -- Administrative regulations.
- (1) The Division of Analytics is hereby created in the Office of Health Data and Analytics. The division shall provide oversight and strategic direction and be responsible for coordinating the data analysis initiatives for the various departments that regulate health care and social services to ensure that policy is consistent with the long-term goals across the Commonwealth.
- (2) The division shall have the authority to review all data requests received by the cabinet from the public, review the requests for content to determine the cabinet's response, and approve the release of the requested information. The division shall review data analyses conducted by the departments within the cabinet to ensure the consistency, quality, and validity of the analysis prior to its use in operational and policy decisions. The division shall facilitate the process of data integration by initiating and maintaining data-sharing agreements in order to improve inter-agency and cross-cabinet collaboration.
- (3) The Office of Health Data and Analytics shall promulgate administrative regulations in accordance with KRS Chapter 13A to implement this section.

Effective: June 27, 2019 History: Created 2019 Ky. Acts ch. 90, sec. 4, effective June 27, 2019.

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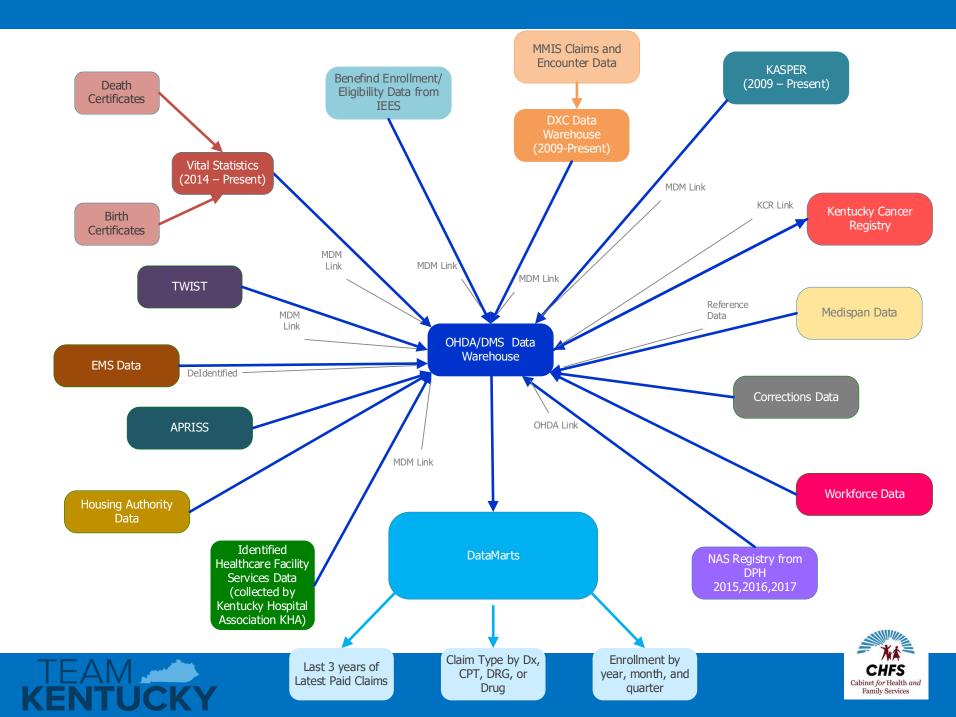
















SAMPLE OF COMPLETED PROJECTS & CURRENT WORK

Part III:

Office of Health Data and Analytics: Examples of Current Work

- Creation of an Integrated Data Warehouse for the Cabinet for Health and Family Services
 - Enable future analyses of health and social services that can capture a more holistic picture of Kentucky citizens
- State University Partnership Program
 - Facilitating additional research funding and Medicaid data for research faculty at state universities in Kentucky
- Research Support for the University of Kentucky's Helping to End Addiction LongtermSM (HEAL) and Medicaid Outcomes Distributed Research Network (MODRN)
 - Tracking epidemiological trends and other measures of addiction severity and treatment uptake in Kentucky
- Program Evaluation of Kentucky's Implementation of the Family First Prevention Services Act
 - Partnering with Kentucky's public child welfare agency to discover which programs are effective for preventing the placement of children in foster care.





Office of Health Data and Analytics: Criminal Justice Data

- Supporting the work of Kentucky's implementation of the State Opioid Response (SOR) grant
 - Kentucky Opioid Response Effort (KORE) & connecting justice-involved individuals to treatment services
 - Integrated sources
 - Medicaid
 - AAPRIS (Corrections data)
 - Vital Statistics Death Certificates
 - KASPER (PDMP Prescription Drug Monitoring Program)





Kentuckians Show Their Support in Unique Ways When They Feel are Being Governed Well



Who can take tomorrow, dip it in a dream, separate the sorrow and collect up all the cream?

THE ANDY MAN CAN, the Andy man can cause he mixes it with love and makes the world taste good 💓





OHDA's Policy Brief on Insurance for All Black Kentuckians



(Photo provided by the campaign)

Kentucky Governor Pledges Health Coverage to All Black Residents

- On June 8, 2020, Kentucky Governor Andy Beshear announced that the state will begin an initiative to achieve universal health insurance coverage for Black Kentuckians.
- Shortly after this announcement, a team of OHDA researchers produced a policy brief for the Administration.
- This brief was intended to summarize the health services literature as a means of giving decision makers helpful insights to consider.

Cabinet for Health and Family Services Office of Health Data and Analytics Division of Analytics



Improving Rates of Health Insurance Coverage for Black Kentuckians Matthew Walton, PhD, MSSW; Shawndaya Thrasher, MA, MSW; Taylor Johnston, BA

Kentucky's Uninsured Population: An Avenue for Intervention This being so, one study of 3,705 Americans over a 10-year period concluded that an increase in health insurance coverage would be an

effective strategy to reduce racial health disparities.7 According to

Race and Health Insurance Coverage in Kentucky: Governor Beshear announced on Monday, June 8, 2020 that his administration will make it a poiority to provide health insurance coverage to 100% of the Black citizens of Kentucky. For a host of reasons, the effects of the recent coronavirus outbreak have been borne disproportionately by Black Kentuckians – with a higher death rate than their White peers being the most salient example." Addressing health services access may measingfully reduce health disparities.

How this Review Addresses the Goal of 100% Coverage for Black Kentuckians: To help inform this effort, this brief presents insights derived from a review of the health services literature. Dynamics of Kentucky's instruance landscape are discussed, as well as public health outreach strategies. This brief does not claim to be an exhaustive systematic review; rather, it is designed to offer concise research insights.

How this Review Leads to Recommendations: 1. There will be significant challenges in terms of

- identifying who is uninsured. Leveraging existing relationships with healthcare providers will be likely to be helpful to overcome this challenge.
- This policy initiative is more likely to be successful if it considers decisions in light of an awareness of health insurance literacy. Kentucky's credentialed community health workers could help overcome baniers of distrust or confusion by the complexity of health insurance.
- Meaningfully involving and engaging Kentucky's Black citizens in critical decision making about their desires and preferences is likely to lead to greater success.

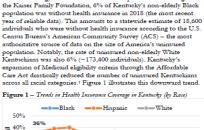
Introduction: Race and Healthcare

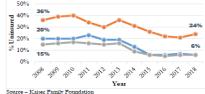
Curcent events in the United States have bought increased attention to the unique societal challenges that Black Americans face. Several authors and public officials have described racial disparities in health outcomes, access to healthcare services, and levels of trust in the broader healthcare system.^{1,5} Many sources of these disparate health outcomes have been explored by researchers. Prominent studies in the public health literature have investigated the consequences of housing discrimination³, inadequate educational resources⁴, and poverty.³ These societal realities result in Black Americans being more likely to be covered by Medicaid for their health instrance. Table I illustrates that this is true in Kentucky. Put simply, health and wealth are inscronably connected.⁶

Racial Category	# Medicaid Beneficiaries ^b	Total KY Population	Percent Enrolled in Medicaid
Black	151,961	375,285	40.49%
White	969,296	3,913,682	24.77%
Total ^a	1.366.220	4.467.673	30,58%

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Established Methods for Estimating the Size of Uninsured Populations

For this reason, it is important to note that the ACS will be the most appropriate primary source of information to gauge Exentucly's progress towards achieving 100% health immurance coverage for Black Kenntokians. If is possible that, with the right support and personnal, the Kentucky Health Information Exchange could become a tool to sugment this effort. The literature urges thoughtful consideration to the source of information that is used to gauge whether health policy initiatives are successful at ultimately reducing the arte of the nummered.⁸

Health Insurance: Outreach Approaches & the Value of Trust

This literature seview identified a study that is especially pertinent to the policy goal of universal health coverage for Black Kentuckians. This study involved a team of seearchees from the University of Louisville School of Public Health and Information Sciences that conducted a set of twelve focus goopps with a total of eightp-seven Black residents of West Louisville.⁹ The publication of their findings describes conclusions, desired from these interviews, which could help inform the Beshear Administration's policy choices.

Health Insurance Literacy

"Insurance is very complicated. Very hard to understand. I'm glad that somebody thinks enough of us to want to help us navigate this system."¹⁹ · P. ¹²¹³

The authors identify the importance of health insurance literacy – a concept they define as, "an individual's knowledge, ability, and confidence to find and evaluate information about health plans, (Continued on next page —)





Screenshot from Bloomberg Law. Retrieved from: https://news.bloomberglaw.com/health-law-and-business/kentucky-governor-pledges-health-coverage-to-all-black-residents

Questions? Comments?



