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SHADAC State Needs Assessment and Data Collection Strategy Development: A Guide for HRSA Pre-Application States

SHADAC has prepared this technical assistance guide to help ensure that your HRSA grant applications reflect the best way for you to gather and use data to inform health policy in your state. We are available to provide individual technical assistance to you, whether that means connecting you with your colleagues in other states, directing you to existing national and state resources, or providing you with technical feedback on your proposals.

What do you need to know?

Keep the end in mind when designing your data collection strategy. Begin by considering the most important question – “What do we need to know that we don’t know now?” The questions below will help you clarify your purpose for the data collection proposal you will include in your HRSA State Planning Grant application.

There are two main categories to address: (1) health insurance coverage for households and individuals, and (2) employer health insurance offerings.

Health Coverage for Individuals and Families

1. Rate of uninsurance

- The overall level of uninsurance in your state
- The characteristics of the uninsured.

2. Demographics

- Income
- Age
- Gender
- Family composition
- Health status
- Employment status (including seasonal and part-time employment and multiple employers)
- Availability of private coverage (including offered but not accepted)
- Availability of public coverage
- Race/ethnicity

- Immigration status
- Geographic location (as defined by State -- urban/suburban/rural, county-level, etc.)
- Duration of uninsurance
- Other (please specify)_____

3. At what level do you need the estimates?

- State level
- Urban/rural
- Regional level
- County level
- Community level
- Racial/ethnic groups by rural/urban (specify groups) _____

4. How will you use this information?

- Policy development (simulation of policy options)
- Program design and development
- Marketing and outreach
- Other

5. Additional questions of interest might be better addressed by qualitative data collection methods, such as:

- Focus Groups with Individuals
- Key Informant Interviews with Community Leaders and Policy Makers
- Town Hall Meetings

6. Some additional questions or areas of policy interest, which can be addressed with data gathered through qualitative data collection methods, include:

- What is affordable coverage? How much are the uninsured willing to pay?
- Why do uninsured individuals and families not participate in public programs for which they are eligible?
- Why do uninsured individuals and families disenroll from public programs?
- Why do uninsured individuals and families not participate in employer-sponsored coverage for which they are eligible?
- Do workers want their employers to play a role in providing insurance or would some other method be preferable?
- How likely are individuals to be influenced by the availability of subsidies?
- How likely are individuals to be influenced by tax credits or other incentives?
- Barriers besides affordability that prevent the purchase of health insurance?
- How are the uninsured getting their medical needs met?
- The features of an adequate, barebones benefit package?
- How should underinsured be defined? How many of those defined as “insured” are underinsured?

Employer-Offered Health Coverage

1. Characteristics of firms that offer and don't offer coverage.

- Employer size (including self-employed)
- Industry sector
- Employee income brackets
- Percentage of part-time and seasonal workers
- Geographic location
- Other (please specify) _____

2. For employers offering coverage, detail about the coverage:

- Cost of policies
- Level of contribution
- Percentage of employees offered coverage who participate
- Benefit structure and offerings

3. At what level do you need the estimates?

- Employer size
- Industry sector
- Employee income brackets
- Part-time/full-time

4. How will you use this information?

- Policy development (simulation of policy options)
- Program design and development
- Marketing and outreach
- Other

5. Additional questions of interest might be better addressed by qualitative data collection methods, such as:

- Focus Groups with Small Employers
- Key Informant Interviews with Business Leaders and Policy Makers
- Town Hall Meetings

6. Some additional questions or areas of policy interest, which can be addressed with data gathered through qualitative data collection methods, include:

- What influences the employer's decision about whether or not to offer coverage?
- What are the primary reasons employers give for electing not to provide coverage?
- How do employers make decisions about the health insurance they will offer to their employees?
- What factors go into their employers' decisions regarding premium contributions, benefit package, and other features of the coverage?
- What would be the likely response of employers to an economic downturn or continued increases in costs?
- What employer and employee groups are most susceptible to crowd-out?

- How likely are employers who do not offer coverage to be influenced by expansion/development of purchasing alliances?
- How likely are employers who do not offer coverage to be influenced by individual or employer subsidies?
- How likely are employers who do not offer coverage to be influenced by additional tax incentives?
- What other alternatives might be available to motivate employers not now providing or contributing to coverage?
- Other (please specify) _____

Data Sources and Technical Assistance to Consider

Conducting primary data collection is certainly a viable option, but it is not the only source of data that can help you answer your original question. There are several existing data sources that can be helpful to you in this process. Make sure you know what is available for your state and what additional contribution a state survey would make.

1. What existing quantitative data sources could be helpful if available?

Existing federal survey data

- Current Population Survey (CPS)
- Medical Expenditure Panel Survey – Insurance Component (MEPS-IC)
- Behavioral Risk Factor Surveillance System (BRFSS)
- Survey of Income and Program Participation (SIPP)
- MEPS – Household Component
- National Health Insurance Survey (NHIS)
- State and Local Area Integrated Telephone Survey (SLAITS)
- National Survey of American Families (NSAF)
- Community Tracking Study (CTS)

Existing State Data

- Has your state conducted a survey in the past?
- Administrative data – Medicaid, SCHIP enrollment, utilization

2. Identify partners up front to facilitate data collection efforts.

- Local university
- Local consulting firm
- National consulting firm
- Other (please specify) _____

3. SHADAC can assist in you in the data collection activities, such as:

- Determining you state’s data needs
- Sample design
- Identification of appropriate data sources or survey instruments
- Selection of data collection vendor(s)
- More information on available data sources
- Feedback on your state’s data collection strategy