

Project Description

1) Proposal Background and brief Literature Review

The roll-out of the Federal and State-run marketplace health insurance exchanges (on October 1, 2013) is a key provision of the Affordable Care Act (ACA – interchangeable with Obamacare). As the Kaiser Family foundation indicates, the rollout highlights a growing focus on whether the enrollment of so-called “young invincibles” will be sufficient to keep insurance markets stable and avoid adverse selection.¹ The colloquial insurance term “invincible” is used to describe the younger age range of adults (generally 18-29 years of age) who generally believe themselves to be healthier in status and therefore immune from the need for healthcare services. This however, may not be factually correct as indicated in a recent Urban Institute report.² Nonetheless, insurance companies rely on this age range to broaden and balance their risk pools of covered lives so as not to only insure the most costly (and less healthy) individuals.

While the new marketplace health insurance exchanges will rely on 18-29 year-old enrollment and continuation, surveys indicate that this age range (and others) is still generally unfamiliar with the details associated with Obamacare or its use.³ The reasons for this unfamiliarity are many⁴ and yet lack of knowledge about Obamacare will greatly undermine the long-term success of the exchanges. As well, the survey data is national in scope and no similar regional or statewide focused research has been conducted.

This project will examine “young invincibles” from two perspectives (a) Self-Perceived Health Status and (b) General and Specific Knowledge of Obamacare related to their future. The self-perceived health status perspective will be ascertained from the characteristics of the young uninsured using data from the Medical Expenditure Panel Survey (MEPS) conducted by the Agency for Healthcare Research and Quality.⁵ MEPS is generally considered the most accurate source of health expenditure data. The survey is nationally representative and uses verification data obtained from medical providers. We will use the most recent year from which data are publicly available.

The Obamacare knowledge perspective will be examined by way of a developed survey using probability sampling in order to ascertain how this age range may stabilize (or not) the regional insurance market and what interventions (educational, promotional etc) may be suitable to address this issue. In addition, focus group sessions will be conducted to analyze trends in perception and beliefs related to elements of Obamacare. The targeted population will be randomly selected 18-29 year-old individuals.

Brief Literature Review to Support the Proposal

1. Levitt, L, (2013) The Numbers Behind “Young Invincibles” and the Affordable Care Act. Retrieved 2/3/2014 from <http://kff.org/health-reform/perspective/the-numbers-behind-young-Invincibles-and-the-affordable-care-act/>.
2. Lisa Dubay, L., G.M. Kenney and E. Zarabozo (2013). Medicaid and the Young Invincibles Under the Affordable Care Act: Who Knew? Retrieved 2/6/2104 from <http://www.urban.org/uploadedpdf/412964-Medicaid-and-the-Young-Invincibles-Under-the-Affordable-Care-Act.pdf>
3. Gallup News Service (2014) Retrieved 2/7/14 from http://www.gallup.com/file/poll/167357/Familiarity_with_Healthcare_Law_140106.pdf
4. Gonshorowski, D. (2013). How will you fare in the Obamacare Exchanges? Retrieved 2/3/2014 from: <http://www.heritage.org/research/reports/2013/10/enrollment-in-obamacare-exchanges-how-will-your-health-insurance-fare>.
5. Medical Expenditure Panel Survey. ARHQ website: <http://meps.ahrq.gov/mepsweb>

2) Applicant’s Qualifications

██████████ is an Associate Professor of Health Services Administration and Chair of the Master of Health Administration program at the University of Southern Indiana. He teaches graduate level courses on the U.S. Healthcare Delivery System and Strategic Planning/Thinking in Healthcare. He is involved in three board level committees at St. Mary’s Health System (Finance Committee, Hospital Board, Physician-Hospital Organization) as an appointed community member in addition to being a board member for the ECHO Community Care, a federally qualified health center in the Tri-State area. In addition, one of his scholarly tracks (since 2010) relates to the impact of private insurance expansion (via the ACA exchanges) on healthcare organization efficiency.

This project is directly aligned with my scholarly focus on the impact of the ACA and my interest in applying the outcomes of the project to both an educational and healthcare organization board perspective.

My past and current efforts (as a teacher-scholar) with a bent towards impacting the efficiency of healthcare organizations should demonstrate my interest and potential to implement and complete this project. A goal of this project is directly centered on the impact of invincibles on the efficiency of healthcare organization by way of the success of the ACA.

3) Significance/Goals & Objectives

As a faculty member, I believe that this project benefits my growth as a scholar and has an immediate and practical application to the most impactful change in the U.S.

healthcare system since the advent of Medicare in 1965. Although controversial, the ACA is now fully enacted and the provision (or lack of health insurance) is meaningful for the health and well-being of an individual, a family and a community. Moreover, since the state of Indiana has chosen not to create its own State exchange or expand access to Medicaid, the issues for Hoosiers takes on an added significance since insurance access options were limited from the onset. As such the crux of this project lies within and for the target age range and the communities in which they live in hopefully providing insightful outcomes that may result in interventions that improve access to healthcare.

The concrete objectives of this project are:

- To research and analyze the self-perceived health status of “invincibles” with a focus on state and regional demographics.
- To examine the knowledge level and future impact of the ACA among the “invincible” cohort.
- To determine the relationship between the two preceding outcomes so as to more clearly define the effects of comprehensive risk pooling on insurance exchanges and on the efficiency of healthcare organization as providers of care.

4) Research Methods/Development Plan

The development plan involves 4 phases:

Phase 1: July-September 2014

Review of Literature: A more exhaustive literature review will be conducted on (a) Self-Perceived Health status and (b) Knowledge of both private and public health insurance applicability.

Design/Development/Pilot Testing of Obamacare Invincibility Knowledge Survey: A survey will designed, and pilot tested with a pilot sample group equivalent to the target population. An IRB process will also be completed.

Phase 2: October – December 2014

Data Collection (Knowledge Survey): With the assistance of the USI Office of Sponsored Research, survey data will be collected with the targeted population.

Data Collection (Self-Perceived Health Status): The self-perceived health status perspective will be collected from the characteristics of the young uninsured using data from the Medical Expenditure Panel Survey (MEPS) conducted by the Agency for Healthcare Research and Quality. State of Indiana and Southwestern Indiana regional data will be collected in addition to the most recent national outcomes.

The Invincibility Factor and Health Insurance: Determining self-perceptions of health and knowledge of Obamacare among 18-29 year-olds.

Phase 3: January – May 2015

Focus Group Meeting (Follow-up on Knowledge Survey): Three qualitative focus group sessions will be conducted with a smaller sample of the target population to supplement the quantitative data collection in the Knowledge Survey. Perceptions, beliefs, and attitudes about the elements of Obamacare will be collected.

Phase 4: March – May 2015

Analysis: All survey, focus group and health status data will be analyzed through a simple descriptive analysis.

Phase 5: June-June 2015

Dissemination: The outcomes (in the form of a presentation followed by the creation of manuscript for publication) will be disseminated at the Academy for Health Annual Research Meeting – June14-16, 2015. (<http://www.academyhealth.org>)

4) Evaluation

There are two primary sets of outcomes sought in this project:

- a) Self-Perceived Health Status – These measurable outcomes are collected from the Medical Expenditure Panel Survey (MEPS). One major component of the MEPS is the Household Component section which houses detailed information for each person in a household including demographic characteristics, health conditions and health status. The health status of the targeted population (at the national, state and regional level) will be retrieved from this source.
- b) The Knowledge Survey and Focus Group Meetings – The Knowledge Survey will be a quantitative instrument that will collect measurable outcomes for the targeted population. The focus group represents the qualitative instrument that will collect trends in perceptions and beliefs about elements of Obamacare.

As indicated in Phase 5, a primary method of disseminate the outcomes will be through a presentation at the Academy Health Annual Research Meeting (June 2015). Academy Health is the premier professional organization serving the fields of health services and policy research.