

## **The effects of Massachusetts Health Reform on Access to Care and Disparities Study Summary**

One of the central policy assumptions in the U.S. today is that expanding health insurance coverage will improve access to health care, improve health outcomes, and make each more equitable for all Americans. Limited access to care is one of the strongest contributors to disparities in outcomes. Massachusetts (MA) is the site of a key policy-relevant natural experiment, whereby recent legislation has resulted in 97% of the state's residents obtaining health insurance; it is thus the ideal setting in which to monitor and evaluate access to care, and disparities in accessing care. We will evaluate whether expanded insurance coverage will be associated with fewer preventable inpatient admissions, outpatient surgeries and emergency department visits for a spectrum of ambulatory care sensitive conditions including congestive heart failure (CHF), diabetes, angina, hypertension and pneumonia and 30-day readmissions for CHF, acute myocardial infarction, pneumonia, COPD, asthma and others. This project will also assess rates of a variety of referral-sensitive procedures including joint replacement, CABG, pacemaker insertion and percutaneous coronary interventions (PCI), and the use of safety-net hospitals by racial/ethnic minority patients. We will use state inpatient discharge data, outpatient ambulatory surgery data, and Emergency Department (ED) administrative data on adults age 18-64 (e.g. those not covered by Medicare) from seven states, including MA, which have nearly-complete race and ethnicity indicators, sizable minority populations, and diagnosis and cost data for each ED visit and admission. Corresponding data for age 65+ cohort will also be examined for comparison of trends. We will analyze data from 2003-2010, encompassing the years before and after 2006 MA health reform implementation. All analyses will control for potential confounders such as socioeconomic status, economic indices, regional variation in health resources, and baseline insurance rates among states. Almost nothing is known about how the sentinel insurance reform in MA will affect access to care and resultant outcomes, including disparities. Thus, the proposed project will provide crucially important information for national policy makers about the effects of health reform on health outcomes.

### **Publications:**

- 1: Hanchate AD, McCormick D, Lasser KE, Feng C, Manze MG, Kressin NR. Impact of Massachusetts Health Reform on Inpatient Care Use: Was the Safety-Net Experience Different Than in the Non-Safety-Net? *Health Serv Res.* 2016 Aug 8. doi: 10.1111/1475-6773.12542. [Epub ahead of print] PubMed PMID: 27500666.
- 2: Lasser KE, Hanchate AD, McCormick D, Chu C, Xuan Z, Kressin NR. Massachusetts Health Reform's Effect on Hospitals' Racial Mix of Patients and on Patients' Use of Safety-net Hospitals. *Med Care.* 2016 Sep;54(9):827-36. doi: 10.1097/MLR.0000000000000575. PubMed PMID: 27261638; PubMed Central PMCID: PMC4989238.
- 3: McCormick D, Hanchate AD, Lasser KE, Manze MG, Lin M, Chu C, Kressin NR. Effect of Massachusetts healthcare reform on racial and ethnic disparities in admissions to hospital for ambulatory care sensitive conditions: retrospective analysis of hospital episode statistics. *BMJ.* 2015 Apr 1;350:h1480. doi: 10.1136/bmj.h1480. PubMed PMID: 25833157; PubMed Central PMCID: PMC4382709.
- 4: Hanchate AD, Kapoor A, Katz JN, McCormick D, Lasser KE, Feng C, Manze MG, Kressin NR. Massachusetts health reform and disparities in joint replacement use: difference in differences study. *BMJ.* 2015 Feb 20;350:h440. doi: 10.1136/bmj.h440. PubMed PMID: 25700849; PubMed Central PMCID: PMC4353277.
- 5: Lasser KE, Hanchate AD, McCormick D, Manze MG, Chu C, Kressin NR. The effect of Massachusetts health reform on 30 day hospital readmissions: retrospective analysis of hospital episode statistics. *BMJ.* 2014 Mar 31;348:g2329. doi: 10.1136/bmj.g2329. PubMed PMID: 24687184; PubMed Central PMCID: PMC3970763.
- 6: Hanchate AD, Lasser KE, Kapoor A, Rosen J, McCormick D, D'Amore MM, Kressin NR. Massachusetts reform and disparities in inpatient care utilization. *Med Care.* 2012 Jul;50(7):569-77. doi: 10.1097/MLR.0b013e31824e319f. PubMed PMID: 22683590; PubMed Central PMCID: PMC3374150.