

# Post-Briefing FACT SHEET

Milbank Memorial Fund

## STATE LEADERSHIP NETWORK

### State Health Data Sources for Action

April 26, 2022

#### Introduction

To set context prior to diving into state health performance scorecards, the briefing series kicked off with a review of two foundational national data resources: KFF's recently redesigned State Health Facts and the Medicaid and CHIP Payment and Access Commission (MACPAC)'s MACStats.

#### State Health Facts

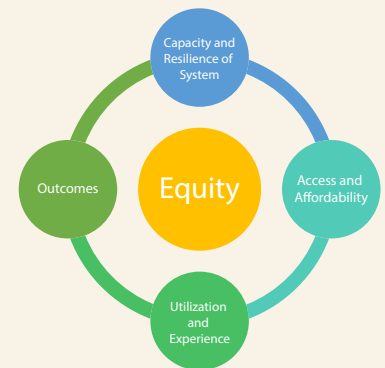
[State Health Facts](#) is a searchable, continuously updated compendium of state data points on more than 800

### Leveraging Performance Scorecards to Improve Health and Equity in Your State Series

State officials could improve their capacity to respond to complex population health issues if they routinely use national data scorecards to:

- examine their state's current performance
- benchmark against the performance of other states
- connect with best practice states around successful interventions
- establish administrative, policy and/or regulatory priorities
- increase public trust and engagement through transparency
- examine performance and course correct interventions, over time

State officials need a range of indicators covering the dimensions featured to the right to create a comprehensive picture of state health performance over the life span, from young children to older adults, and to examine equity of access, utilization, care experience, and outcomes.



health indicators in 14 data topics, such as women's health and disparities. Tolbert explained that the data, which is compiled from large government data sets, surveys, and administrative data

sets, can be displayed in tables, maps, and trend graphs, or exported as an CSV file. Users can also build custom state reports by selecting states and specific indicators, many of which can

#### SPEAKERS

**Jennifer Tolbert**

Director of Health Care Reform, KFF

**Chris Park**

Principal Analyst and Data

Analytics Advisor

Medicaid and CHIP Payment and Access Commission (MACPAC)

Moderator:

**Kate McEvoy**

Program Officer

Milbank Memorial Fund

#### State Health Facts

More than 800 up-to-date health indicators at the state level can be mapped, ranked, and downloaded.

[Learn more](#)

Enter keywords



#### Explore Indicators by Category

Affordable Care Act	COVID-19	Demographics and the Economy	Disparities	Health Costs & Budgets
Health Coverage & Uninsured	Health Insurance & Managed Care	Health Status	HIV/AIDS	Medicaid & CHIP
Medicare	Mental Health & Substance Use	Providers & Service Use	Women's Health	

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“The purpose is to bring together in one place, all these federal and state data on Medicaid and CHIP that come from multiple sources and sometimes are difficult to find or analyze. Calculating different measures from the data book provides context for understanding these programs and how they fit into the larger health care system in terms of federal and state budgets, enrollment, and spending and beneficiary health and access to care.”

— Chris Park,  
Principal Analyst and Data  
Analytics Advisor,  
Medicaid and CHIP Payment  
and Access Commission

by filtered by race and ethnicity or other demographics. Tolbert also highlighted additional, timely state-by-state tools like a Medicaid Postpartum Coverage Extension tracker. During the question-and-answer session, a participant observed how seeing COVID-19 vaccination update stratified by age and race/ethnicity helped them identify younger people as a high-priority group for vaccination outreach.

## MACStats

[MACStats](#) is published by MACPAC, a nonpartisan federal commission created to provide policy analysis and recommendations to Congress, the US Department of Health and Human Services and states on Medicaid and CHIP. The MACStats website offers tables and figures with the latest data on Medicaid and CHIP enrollment and spending by major eligibility groups, as well as the annual report that rolls up all of data as of the end of each year.

Users can see federal matching rates, the proportion of eligibility groups that are in comprehensive managed care versus limed benefit programs, as well as utilization rates by service. Other

state-level data shows supplemental payments that states make to different providers, such as hospitals, nursing facilities, mental health facilities, and physicians, and prescription drug spending and utilization.

Park noted that the MACPAC methodology used to account for data anomalies or gaps may be different than methodological choices made by the Centers for Medicare and Medicaid Services (CMS) or KFF, leading to different results. He expected some of these variances to resolve as states improve their reporting. Questions from state participants focused on sources of the data; plans to stratify information by race, ethnicity and other demographic characteristics; and technical queries on the Medicaid data.

## Resources:

1. [State Health Facts, KFF](#)
2. [MACStats, Medicaid and CHIP Payment and Access Commission \(MACPAC\)](#)

