Group Proposal

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Motivating Question

Our team will be seeking to explore the question "What percent of individuals that should be eligible for Medicaid after COVID-19 but are not presently covered?". After the COVID-19 public health emergency many states chose to reevaluate the eligibility requirements for Medicaid, resulting in the loss of Medicaid coverage for many individuals. Given that many individuals became mere vulnerable both in terms of economic and health status following the pandemic, it is theorized that a large quantity of those that lost coverage would still greatly benefit from these services.

Data Sources and Methods

We will be exploring this data through the utilization of the 2019 and 2022 US Census Community Resilience Estimates and the 2019 and 2022 US Census Survey of Income and Program Participation (SIPP). We will first conduct an exploratory data analysis of both datasets to identify high level trends, assess missingness, and identify potential categorical variables of interest that may need to be grouped/combined or dropped to reduce the impact of outliers.

The Community Resilience Estimates are available at a Census Tract, County, and State level. It provides estimates of a "Community Resilience Index" that assesses factors most correlated with the capacity of households to respond to, absorb, and recover from disasters. One factor included within the Index is the the percent of households that do not have health insurance. In order to target our investigation of Medicaid and health care coverage on an individual level, we will identify the top 15 states that had the greatest reduction in Community Resilience in terms of insurance coverage between 2019 and 2022. We believe that this will be a strong proxy indicator for states that changed their eligibility requirements following the pandemic, and therefore will be an effective way to streamline our analysis when examining data on an individual level. During the selection of states, we will utilize parametric and non-parametric methods to create a new variable of the true estimated percent change in insurance coverage between 2019 and 2022. We will select the states with the largest percent reduction in health insurance coverage as predicted by the new variable (either parametric or non-parametric) with the estimated smallest margin of error.

The 15 states identified in the above analysis will then be utilized to filter the responses of the SIPP data to assess our primary question of interest. In order to assess true eligibility of Medicaid versus actual coverage in 2022, we will create a supervised machine learning model to predict coverage. 2019's data will be utilized as the testing and training data to represent "true" eligibility for Medicaid coverage and select the model that is best predictive of this variable. We will then utilize the 2022 dataset as the implementation data to evaluate whether individuals surveyed should actually be covered by Medicaid. These predicted values will be compared against whether an individual actually had Medicaid coverage in 2022, and then results will be aggregated at a state level to assess the percent of individuals that are estimated to be eligible for coverage but are not covered.

Anticipated Technical Hurdles

There are several potential technical hurdles we anticipate throughout the analysis:

- Community Resilience Estimates may not be an effective indicator of changes to Medicaid Eligibility policies
- SIPP data only provides state level changes, when analysis may be more effective at a county or tract level
- Data missingness at an individual level within SIPP data will impact representative sampling