2013 The Graphics that Helped Explain Health Policy

"It is a capital mistake to theorize before one has data."

Sherlock Holmes, "A Scandal in Bohemia" (Arthur Conan Doyle)

Sherlock Holmes would fit right in at the Colorado Health Institute.

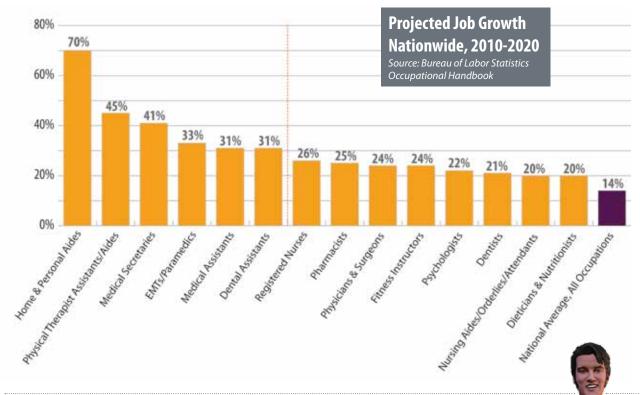
We're data detectives who collect, assemble, crunch and interpret numbers to inform health care policy. You could say our work is elementary (sorry). But data, like food, is all in the presentation. So, serving up our numbers in an appealing way is a high priority for CHI.
With that in mind, we've compiled our favorite graphics of 2013. Most have appeared in CHI publications this year.
Each is an example of how to make numbers accessible as well as informative.

Cliff Foster, Editor

Michele Lueck, President and CEO

What this graphic illustrates to me is the enormous complexity of health care. How do we as a community provide health care to all Coloradans? How do we do that without perpetuating a system of inequality? The

jobs that are most in demand pay the least. In fact, they pay under \$10 an hour. The people who work these jobs qualify for subsidies and entitlement programs. Isn't this a cycle we should try to break?



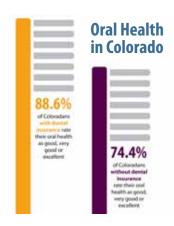
My second favorite: Why? You can never get 100 percent of the people to believe anything!

Interestingly, those under age 30, the group least likely to be Elvis fans, are more likely than any other age group to believe that Elvis Presley may not really be dead; 11 percent of these young Americans say it is possible that "The King" lives on.



Brian Clark, Manager of Creative Services

As the staff graphics artist, a year's worth of infographics, pie charts, bar charts and scatter plots have left me unable to tell my X axis from my cluster width. That said, my favorite graphic from 2013 started as a small secondary item for another project, but unexpectedly became a hit during our Colorado Health Access Survey (CHAS) rollout presentation.



Sara Schmitt, Director Of Community Health Policy

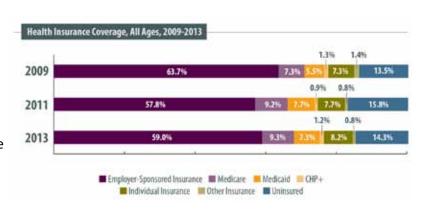
Our recent study, "More Dental Insurance: Enough Dental Care?," examined whether Colorado is ready to meet additional dental demands from Medicaid enrollees. This graphic focused CHI's expertise in data analysis on a relevant, timely policy issue. It is clear and easy to understand — all of our sweet spots!

Medicaid enrollees in



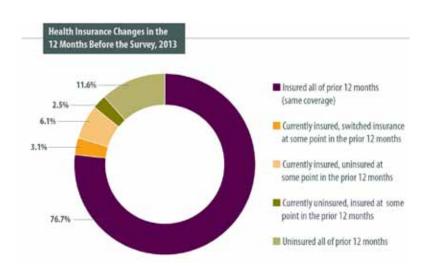
Deborah Goeken, Senior Director Of Operations And Communications

This graphic showing the distribution of health insurance is from the 2013 Colorado Health Access Survey (CHAS). It's important now, but it will be even more important in two years, when the 2015 CHAS will give us an idea of how – of if – health reform efforts have changed the health insurance landscape in Colorado. That will be fascinating.



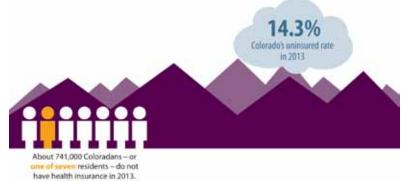
Jeff Bontrager, Director Of Research On Coverage And Access

This graphic from the 2013 Colorado Health Access Survey (CHAS) illustrates "churn," which refers to changes in health insurance status over the course of a year. Churn could refer to becoming insured or uninsured or changing the type of insurance, often because of a change in life circumstance such as a marriage or a loss of a job. I find this graphic valuable because it suggests that the magnitude of churn is almost as great as Coloradans who have lacked coverage for an entire year.



Natalie Triedman, Research Analyst

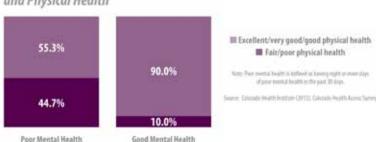
It is no surprise that CHI came up with something special for the 2013 uninsured rate -- the most sought after data point from the Colorado Health Access Survey (CHAS). This graphic creatively embodies Colorado's unique character in such a way that it draws you in without a headline. Who wouldn't want to read on?



Kevin Butcher, Research Analyst

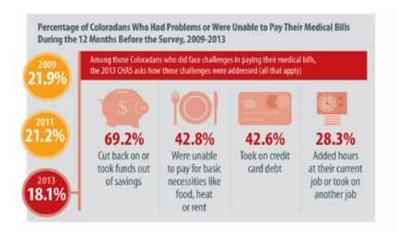
Since I'm passionate about mental health, it seems only fitting that I choose this graphic as my favorite of the year. It is a succinct representation of the oftoverlooked concept that mental and physical health are deeply intertwined. Too frequently, we forget to take care of our mental well-being.

Relationship Between Mental Health and Physical Health



Tamara Keeney, Research Assistant

This graphic from the 2013 Colorado Health Access Survey (CHAS) really paints the picture of how Coloradans are dealing with the consequences of high-cost medical bills. While it is important to know that nearly one of five Coloradans reported having problems or were unable to pay their medical bills, it is equally as important to know how they faced this challenge and how it might have impacted their life.



Amy Downs, Senior Director For Policy And Analysis

Attorneys general from across the United States argued to the Supreme Court that the Medicaid expansion in the Affordable Care Act was coercion by the federal government. The court subsequently ruled that states could choose whether or not to participate, and at this point, 26 states are choosing not to participate. Fifty-eight percent of low income, uninsured individuals live in states that are not expanding. But this statistic glosses over complex nuances. In October, the New York Times published a graphic that elegantly summarizes where low income and uninsured individuals live, according to race and ethnicity.

How Different Groups Are Affected

More than half of the nation's poor and uninsured live in states that are not participating in the expansion of Medicaid, and the share among blacks is even higher.



Rebecca Alderfer, Senior Analyst

The Colorado Health Institute's 2012 Annual Report consists of 16 pages of graphics, photos and fun. This innovative approach to reporting on CHI's progress toward its mission provides all the key information in an accessible way. Even better, this graphical digest demonstrates that organizations can have a serious task without taking the task too seriously.



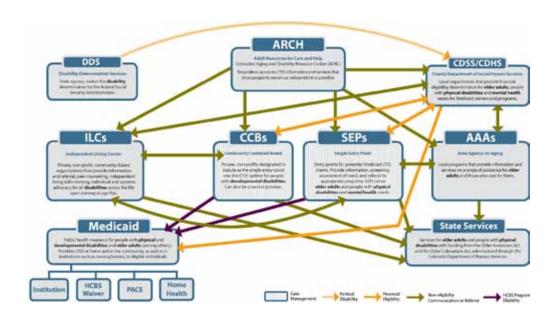
Tim Dunbar, Director Of Finance And Administration

The mountain climbing imagery in "Reaching Our Peak: Creating a Healthier Colorado," complemented the subject matter perfectly. I love how each section showed the climber at various heights as a way to communicate Colorado's progress in improving health in five areas: schools, the workplace, communities, the health care delivery system and places where we age.



Tasia Sinn, Senior Analyst

My favorite graphic addresses the Long-Term Services and Supports (LTSS) puzzle. While it may not be the most straightforward, it represents a system that is often not straightforward or clear and shows how people in need of LTSS navigate a complicated system. Each box tells the story of countless dedicated people working to help their fellow Coloradans live healthy, productive lives.



Anna Vigran, Senior Analyst

Asking a CHIer to choose a favorite graphic is a tough request, but I think this graphic showing 2013 CHAS results about emergency department use is particularly interesting. I like it because:

- Unnecessary or excessive use of emergency department care is frequently discussed as a big problem;
- This graphic shows the scope of the issue how many Coloradans actually use the emergency department;
- And it gives the patient perspective on why people use the emergency department.

First, it shows that about one of five Coloradans (19.5 percent) visited the emergency department at least once in the past 12 months. This helps me understand the scope of this topic.

Next, it shows that more than half of emergency department visits (58.9 percent) were from people who actually believed they had an emergency, while just over 40 percent thought their condition could have been treated by a regular doctor. Again, this illustrates the scope of the problem. More than 40 percent of emergency department visits from people who thought a regular doctor could have treated their condition sounds like a lot.

So why did they go to the emergency room? The last part of the graphic shows that more than a third of patients that thought they "could have been treated by a regular doctor" went to the emergency department because a doctor's office told them to. And with more than half of the patients who thought they did not have an emergency citing convenience or lack of access to another source of care, it looks like additional capacity and extended hours for doctor's offices might help, too.



* All that apply

Cliff Foster, Editor

Who else would send out holiday cards with the image of a pie chart and a greeting that contains the words "statistically significant?"

