

Federal Statistics on Health Insurance Coverage: Technical Meeting on Methods Used in Household Surveys

August 18, 2014

U.S. Census Bureau Health Insurance Coverage Data

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Presentation for the **Federal Statistics on Health Insurance Coverage:
Technical Meeting on Methods Used in Household Surveys**

August 18, 2014

Census Bureau Statistics Related to Health

Social Determinants

- Age
- Ancestry
- Commuting patterns (distance/time)
- Disability
- Educational attainment
- Employer type (industry, class of work)
- Employment status
- Fertility
- Food stamps receipt
- Grandparents as caregivers
- Household and family composition
- Housing value
- Income and earnings amounts
- Labor force status
- Language spoken and English ability
- Marital status
- Mobility
- Nativity status/citizenship
- Number of children
- Other income sources
- Perceived Health status
- Poverty
- Race and ethnicity
- School enrollment
- Sex
- Transportation to work
- Type of work (occupation)
- Veterans Disability
- Veterans status
- Wealth
- Well-being: basic needs, consumer durables, ability to get help, food security, fear of crime

Physical Determinants

Housing

- Age of housing
- Plumbing
- Heating
- Housing cost (monthly)
- Housing conditions

Health Care Costs and Financing

- Health insurance (Insured/not)**
- Types of health insurance**
- Spells of health insurance
- Employer health insurance take-up
- Reasons not covered
- Out-of-pocket spending (MOOP)
- Family care

Health Care Services

- Accessibility
- Health care workers
- Number of medical personnel
- Availability of medical offices/hospitals
- Types of medical establishments
- Utilization of health services

Census Bureau's Health Insurance Coverage Measurement

Current Population Survey Annual Social and Economic Supplement (CPS ASEC)

American Community Survey (ACS)

Survey of Income and Program Participation (SIPP)

Current Population Survey

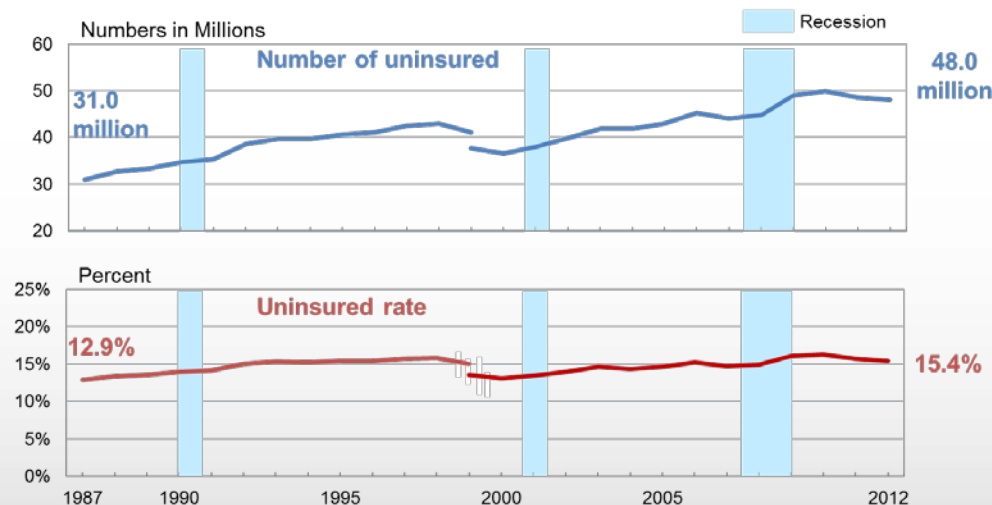
Annual Social and Economic Supplement

Purpose:

To obtain a measure of health insurance coverage and non-cash benefits that can be used along with calendar year income to assess economic well-being

- Collected in February, March, April about previous year health insurance coverage
- Official poverty rate
- Detailed income sources and amounts
- Health insurance and type
- Medical out-of-pocket expenses
- Health status
- Labor force detail
- Household/family relationships (parent pointers)
- Historical time series, first collected in 1988 about calendar year 1987

Uninsured Rate and Number of Uninsured: 1987 to 2012



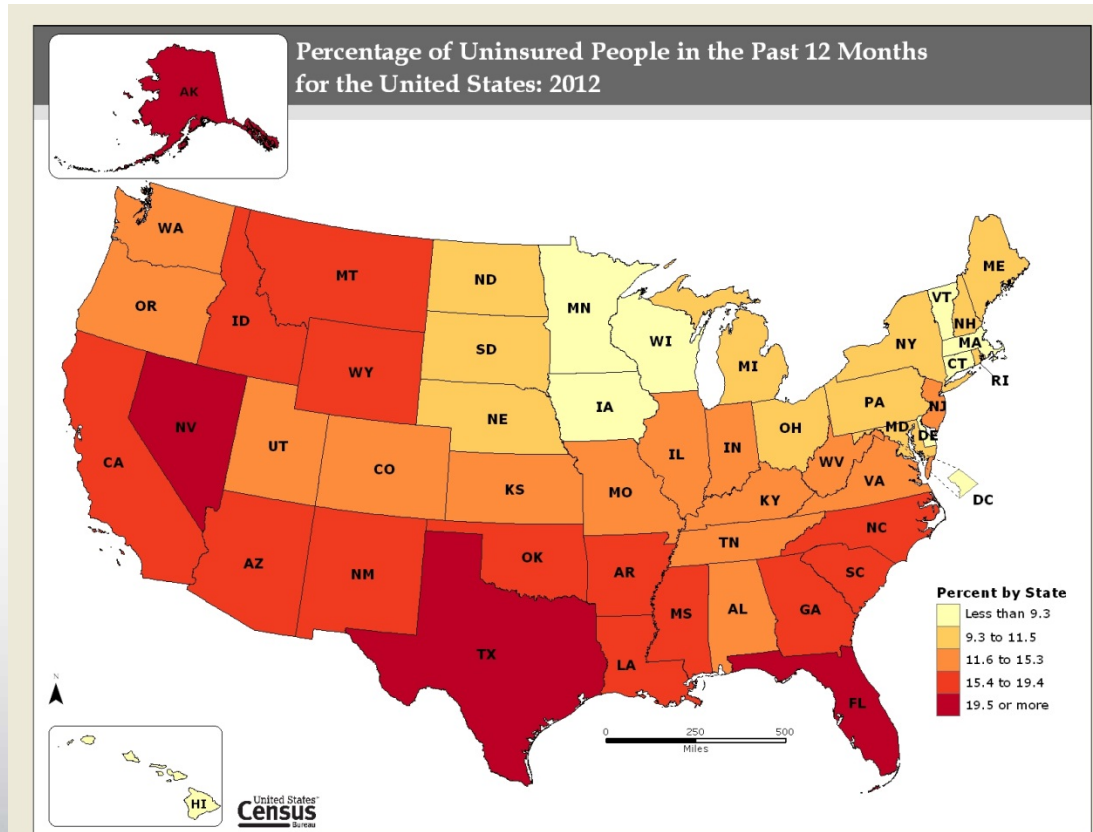
Source: U.S. Census Bureau, Current Population Survey, 2000 to 2013 Annual Social and Economic Supplements.

American Community Survey

Health Insurance by type, large sample size, small geographies, many variables

16 Is this person **CURRENTLY** covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.

- | | Yes | No |
|---|--------------------------|--------------------------|
| a. Insurance through a current or former employer or union (of this person or another family member) | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Insurance purchased directly from an insurance company (by this person or another family member) | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Medicare, for people 65 and older, or people with certain disabilities | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability | <input type="checkbox"/> | <input type="checkbox"/> |
| e. TRICARE or other military health care | <input type="checkbox"/> | <input type="checkbox"/> |
| f. VA (including those who have ever used or enrolled for VA health care) | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Indian Health Service | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Any other type of health insurance or health coverage plan – <i>Specify</i> | <input type="checkbox"/> | <input type="checkbox"/> |



Source: U.S. Census Bureau, 2012 American Community Survey

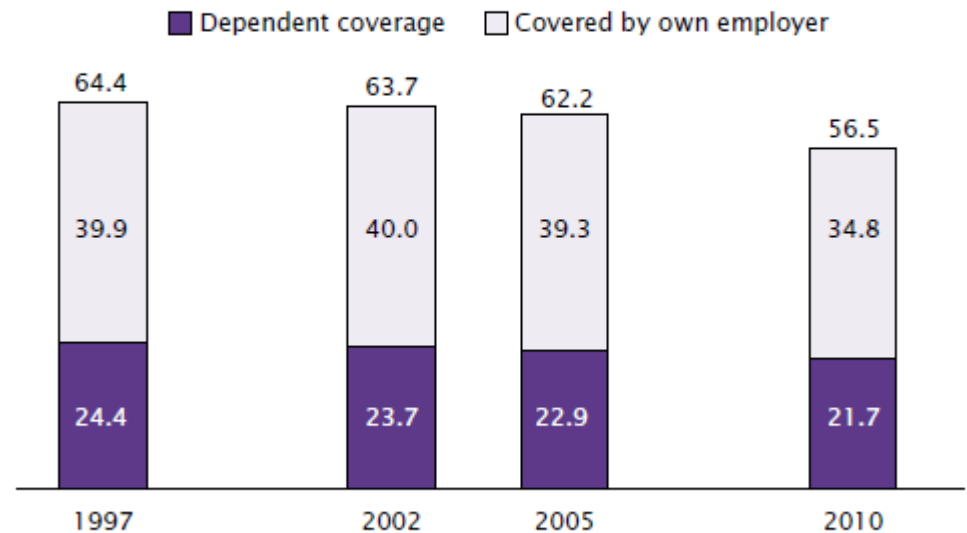
Survey of Income and Program Participation

- Longitudinal survey – follows sample respondents for several years
- Transitions on and off health insurance coverage
- Core and Topical Module questions (1984-2008)
- Focus on low-income
- Follows people when they move
- National level primarily
- Re-designed SIPP 2014
 - Event History Calendar used to collect events by month
 - Annual interviews

Figure 1.

Employment-Based Health Insurance Rate, by Type of Coverage: 1997, 2002, 2005, and 2010

(In percent. All people aged 15 and over)

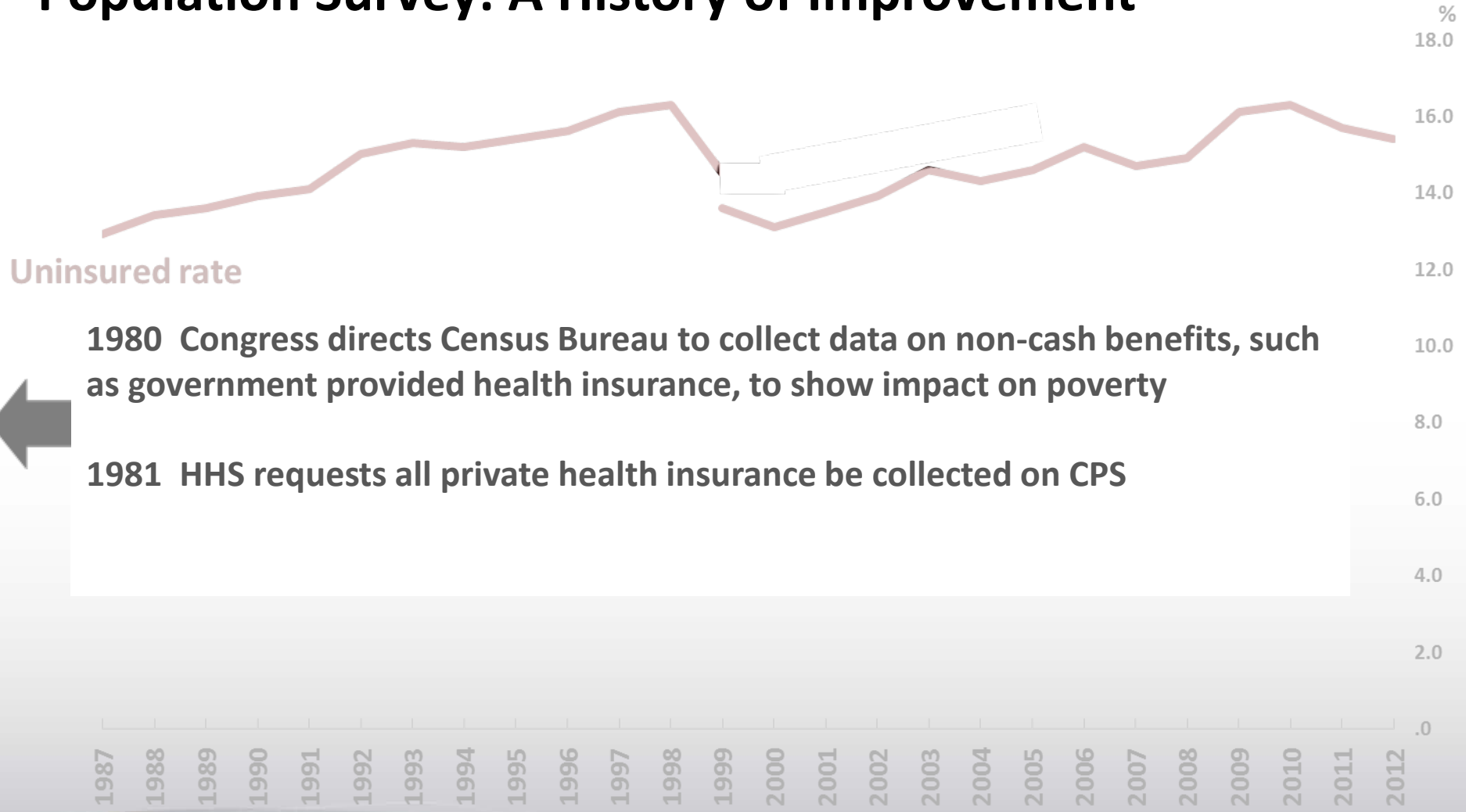


Source: U.S. Census Bureau, Survey of Income and Program Participation (1996, 2001, 2004, and 2008 Panels).

Differences in Measurement

Survey	Period of collection	Health Insurance coverage reference period	Health Insurance coverage estimate	Benefit/Use
CPS ASEC	February, March, April	Last calendar year (January through December)	Uninsured all previous calendar year	Economic well-being; with detailed income
ACS	Continuous	Current coverage at date of interview	Averaged over 12 months	Detailed geography
SIPP	Pre 2014, every 4 months, 2014 - once a year	Monthly, with transitions	Averaged over 12 months	Longitudinal transitions on and off health insurance and changes in types

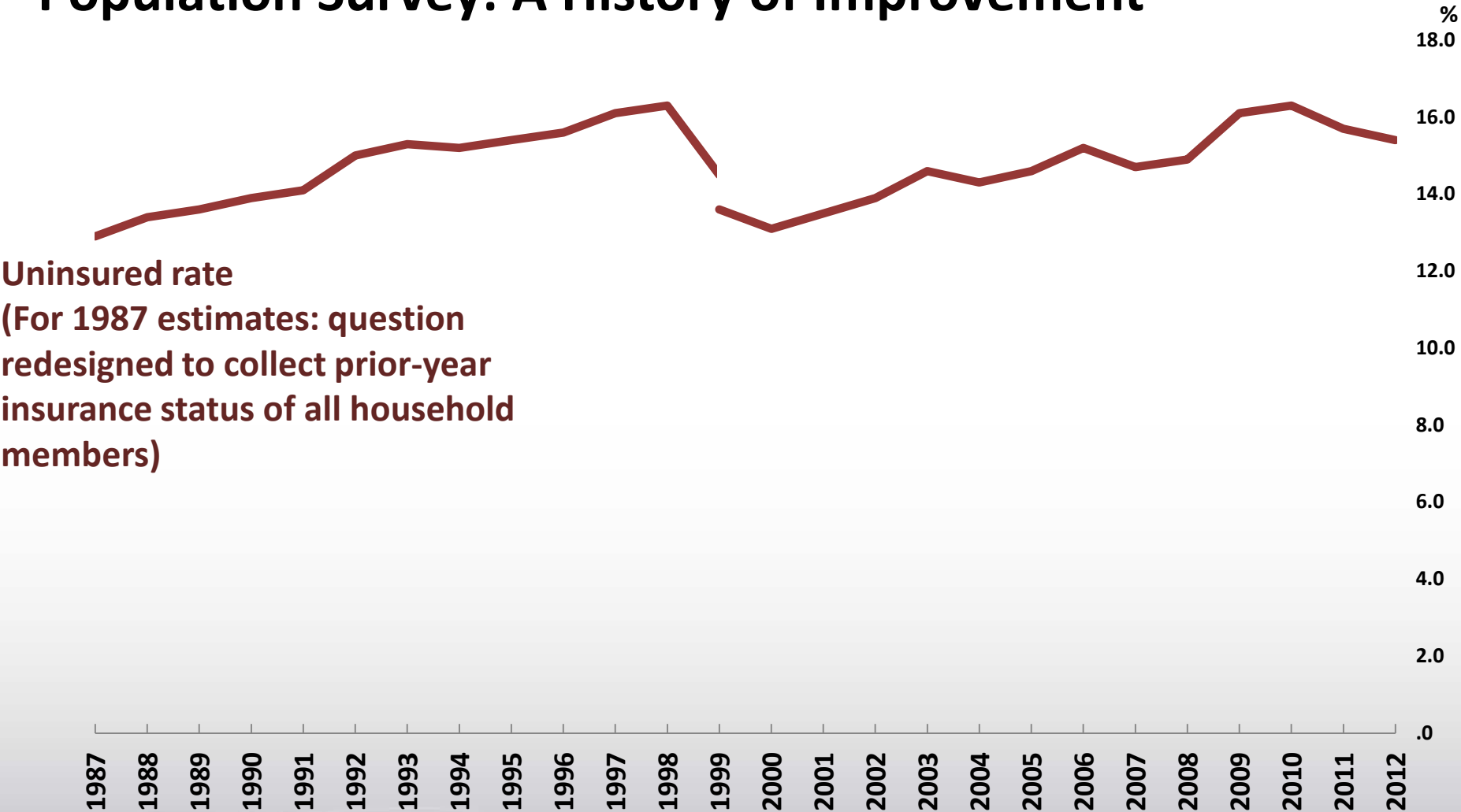
Measuring Health Insurance Coverage with the Current Population Survey: A History of Improvement



1980 Congress directs Census Bureau to collect data on non-cash benefits, such as government provided health insurance, to show impact on poverty

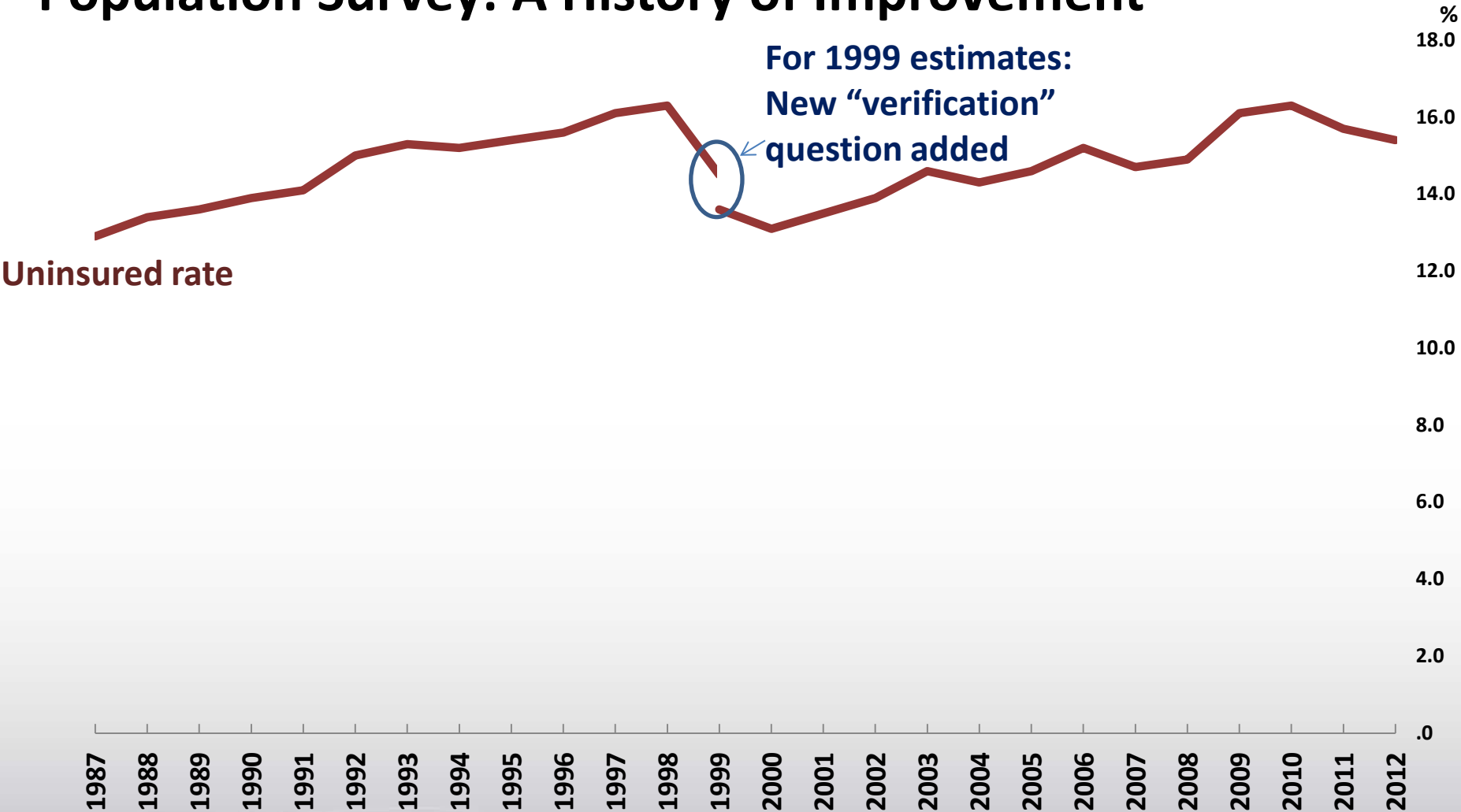
1981 HHS requests all private health insurance be collected on CPS

Measuring Health Insurance Coverage with the Current Population Survey: A History of Improvement

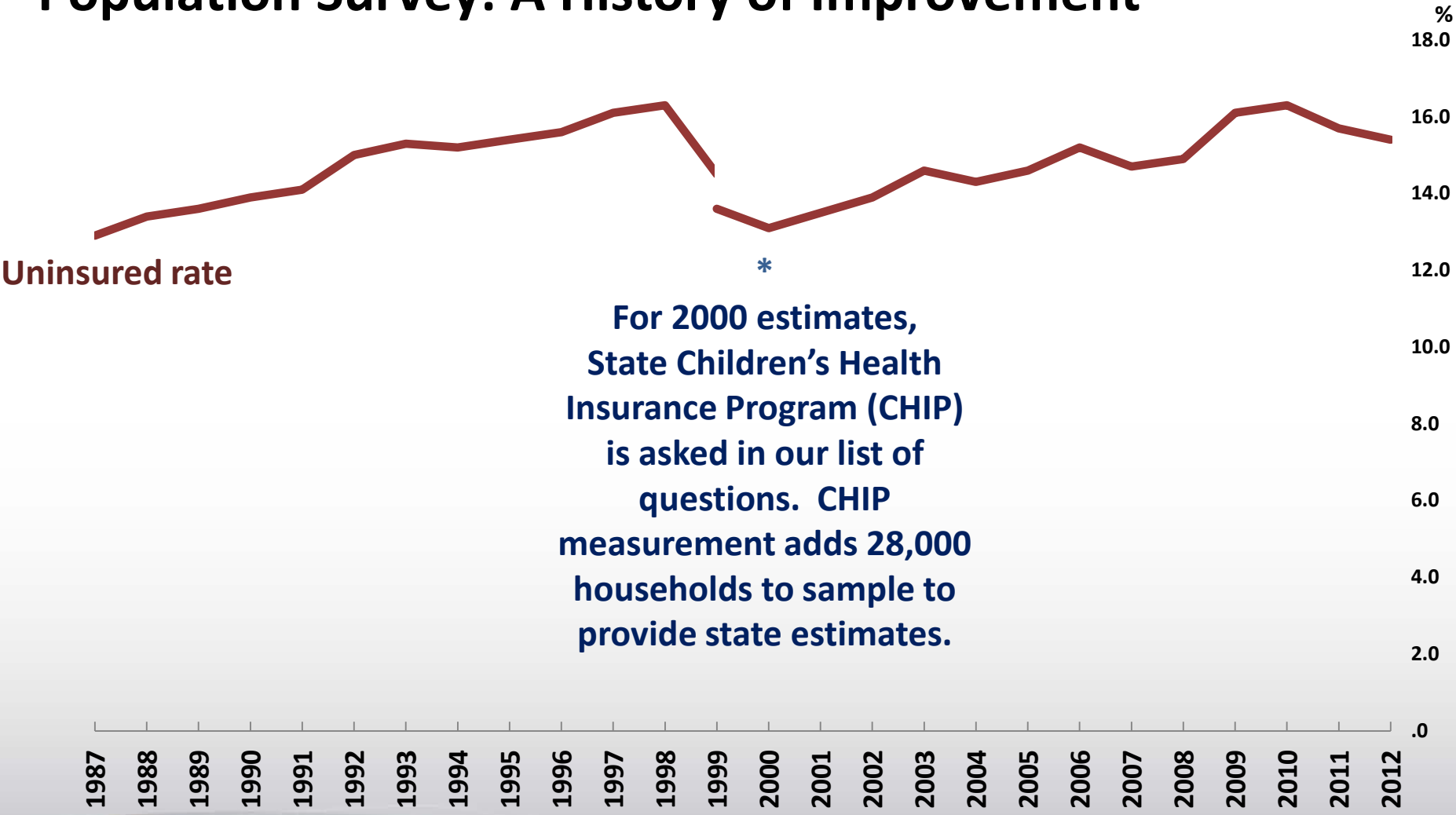


Uninsured rate
 (For 1987 estimates: question redesigned to collect prior-year insurance status of all household members)

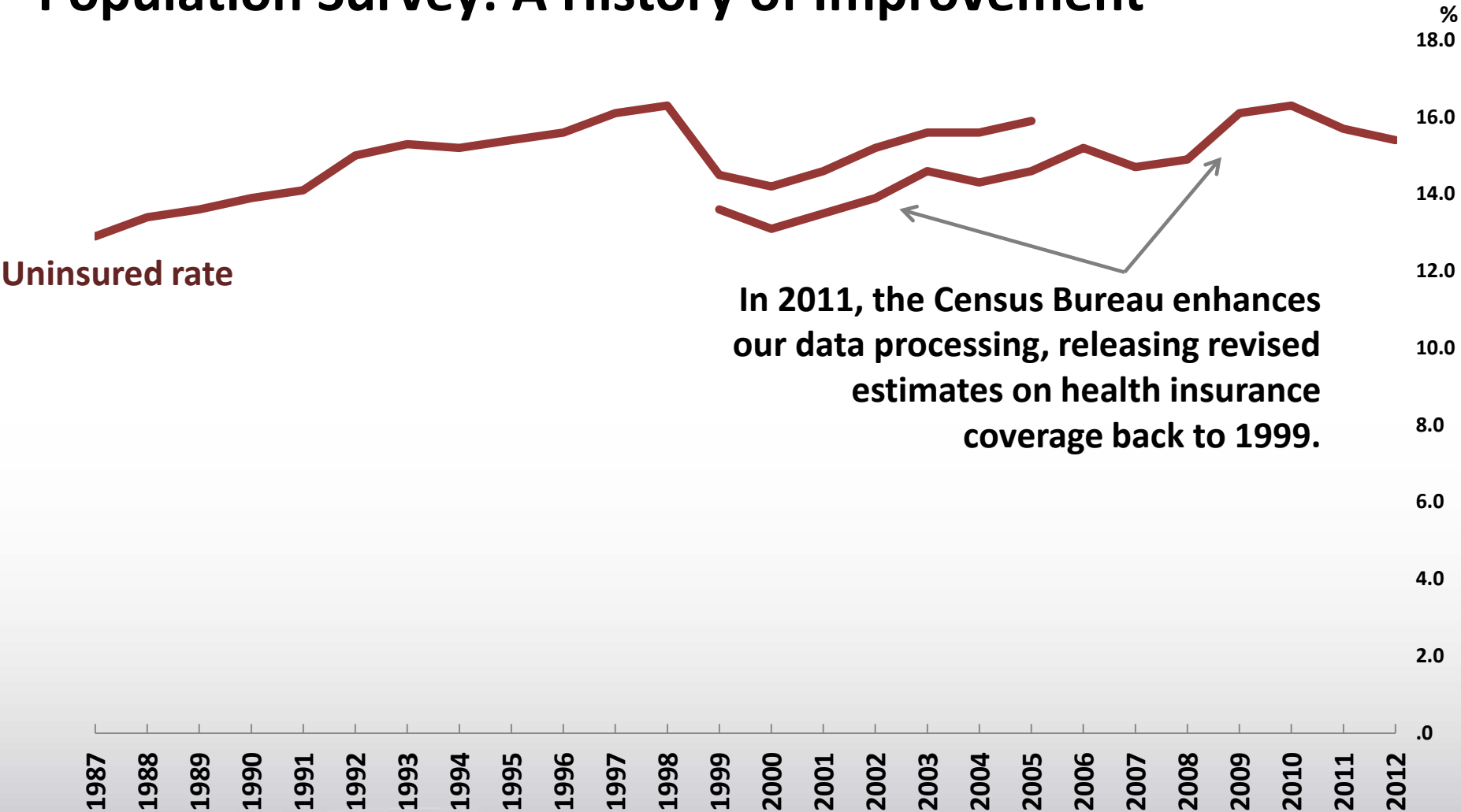
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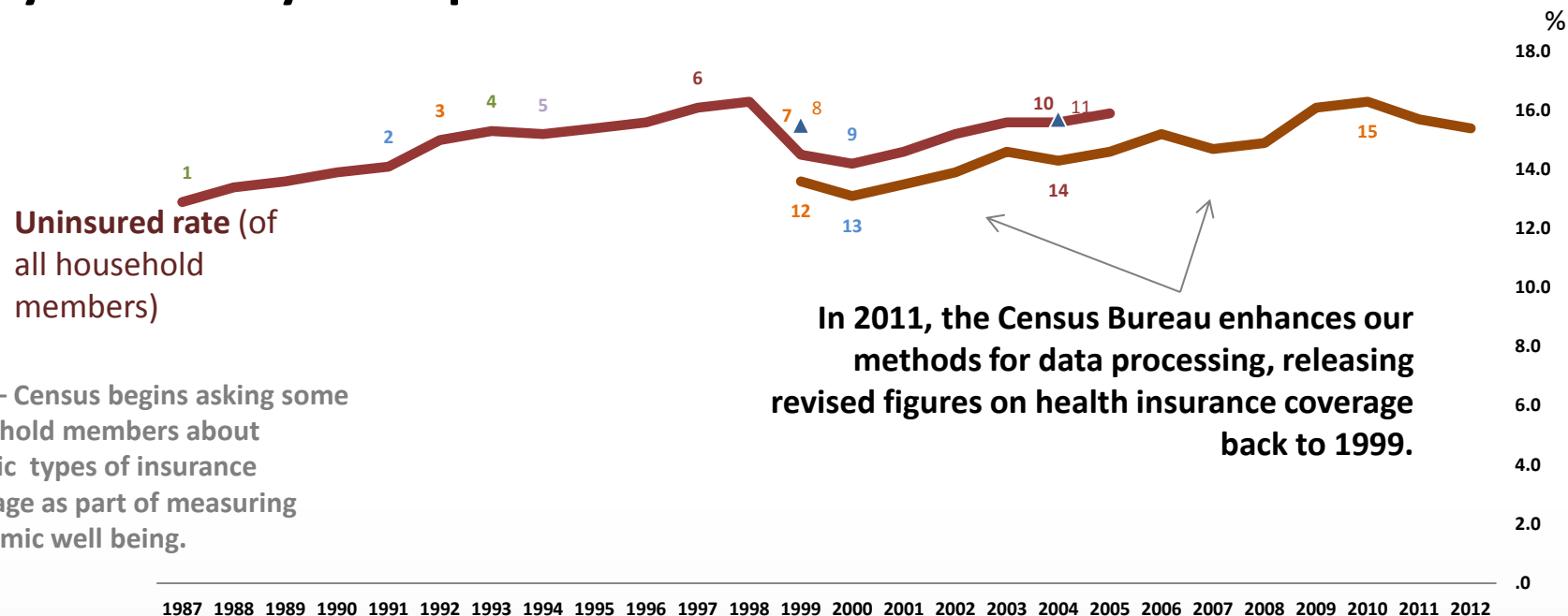
Measuring Health Insurance Coverage with the Current Population Survey: A History of Improvement



Measuring Health Insurance Coverage with the Current Population Survey: A History of Improvement



Measuring Health Insurance Coverage with the Current Population Survey: A History of Improvement



← 1981 – Census begins asking some household members about specific types of insurance coverage as part of measuring economic well being.

Note: CPS measures prior-year coverage, so, for example, 1987 statistics come from the 1988 CPS.

1/ Question redesigned in 1988 to include all household members.

2/ Figures are revised to correct for nine omitted weights from the original March 1992 CPS file.

3/ Implementation of Census 1990 based population controls.

4/ Data collection method changed from paper and pencil to computer-assisted interviewing.

5/ Health insurance questions were redesigned. Increases in estimates of employment-based and military health care coverage may be partially due to questionnaire changes. Overall coverage estimates were not affected.

6/ People with no coverage other than access to Indian Health Service now considered uninsured. Overall estimates of health insurance coverage change only negligibly; however, the decrease in the number of people covered by Medicaid may be partially due to this change.

7,8,12/ Estimates reflect the results of follow-up verification questions and of Census 2000 based population controls. Triangle represents 1990 population controls.

9,13/ CHIP Implementation of a 28,000 household sample expansion.

10,11,14/ These estimates from the 2005 ASEC were revised based on improvements to the algorithm that assigned coverage to dependents, and there was an adjustment to the weights. Triangle represents original estimate.

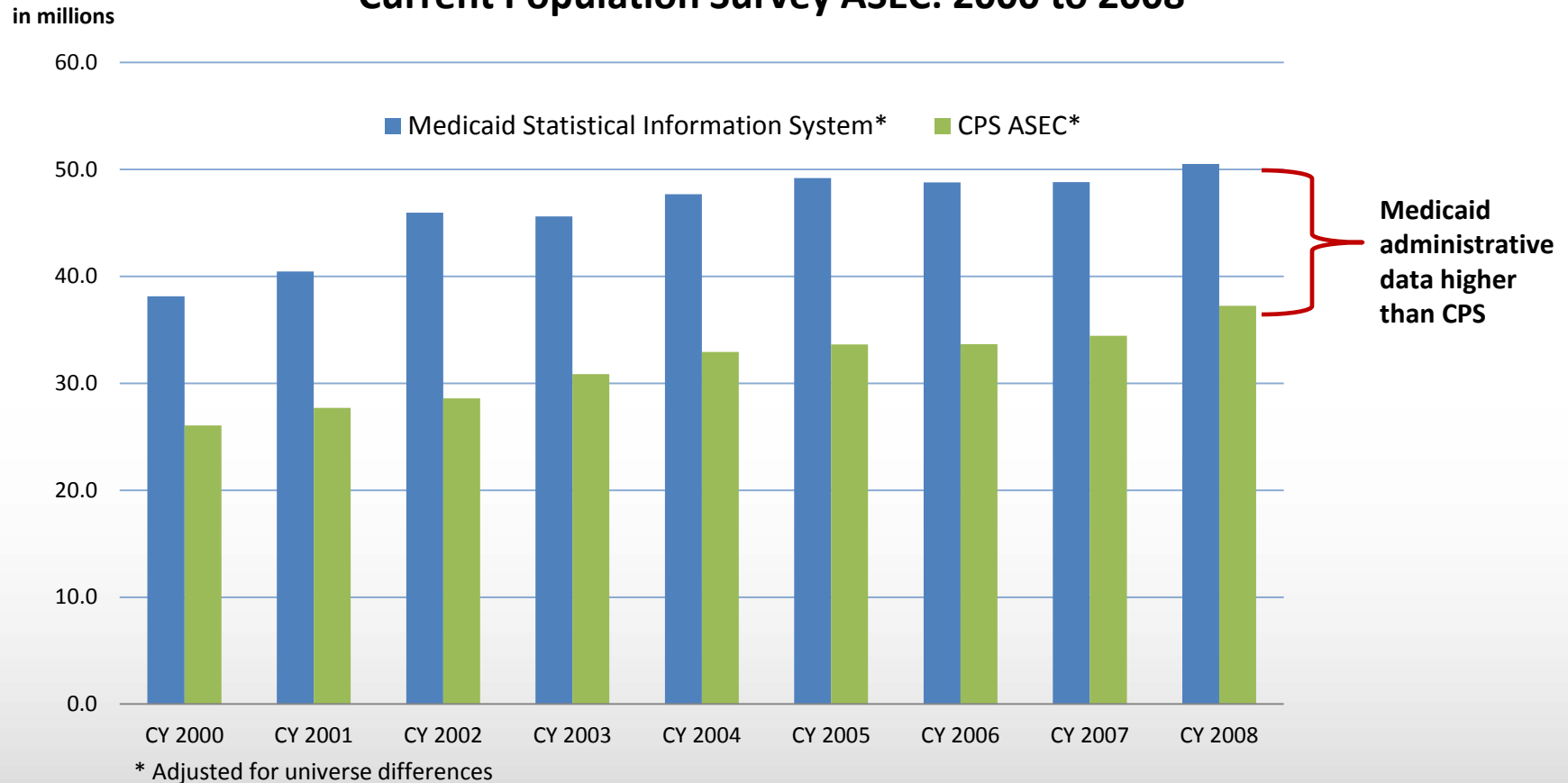
15/ Implementation of Census 2010-based population controls.

Research and Testing

1999 - present	Academic researchers suggest the CPS estimates of health insurance (Medicaid) may be too low
2001 – 2004	Research on whether question order matters
2005 – present	Medicaid Undercount Project
2006 – 2009	Cognitive tests on improving health insurance questions
2010	Survey of Health Insurance and Program Participation
2012	Massachusetts cognitive study on exchanges
2013	CPS ASEC Content test

Medicaid Undercount Project

Medicaid Undercount in the Current Population Survey ASEC: 2000 to 2008



Source: Noon, James, Leticia Fernandez, and Sonya Rastogi. The Medicaid Undercount in the 2007-2009 Current Population Survey. Federal Committee on Statistical Methods Research Conference. Washington, D.C., 4-6 November. http://www.copafs.org/UserFiles/file/fcsm/A4_Noon_2013FCSM.pdf

Previous CPS ASEC Measurement Issues

- **Annual retrospective questions:**

“At any time in 2012, was anyone in this household covered by a health insurance plan provided through their current or former employer or union?”

“Some respondents simply do not hear or do not focus on the calendar year reference period stated in the question, and instead report their current situation...”

J Pascale, U.S. Census Bureau

1. Reference Period

Respondent
Issues

- Coverage status can change over the course of a year
- Not clear what time period
- Compared with other national surveys with the same reference period, estimate looks different

Previous CPS ASEC Measurement Issues

“At any time in 2012, was anyone in this household covered by ... ?”

- Job or Union
- Direct Purchase
- Someone outside household
- Medicare
- Medicaid
- CHIP
- Military
- State specific plan

2. Questionnaire structure = “laundry list” approach (undercounts of some types of health insurance)
 - Respondents pre-report coverage
3. Respondents confuse plan types (Medicaid/Medicare)
4. Missing some people’s coverage -- Household-level design

Survey of Health Insurance and Program Participation (SHIPP): 2010

- Tested new approach to measuring health insurance
 - Simplified questions
 - Started with yes/no question on current coverage
 - Drilled down as needed to current CPS level of detail
- Split ballot field experiment
 - CPS
 - ACS
 - EXP -- questions designed to reduce measurement error
- March-April 2010 (CATI)
- Completed interviews: 12,743

Law Change Required More Research

Patient Protection and Affordable Care Act



Cognitive “Exchange” testing in Massachusetts: 2011 and 2012

Effect of law may change how people answer the set of health insurance questions as they will have new ways to obtain health insurance coverage

Phases of research:

- Expert consultation
- Focus groups with exchange participants
- Cognitive interviews with exchange participants and those not enrolled

March 2013 CPS ASEC Content Test

Health insurance section:

- **Redesign of health insurance coverage types**
- **New questions to measure Exchange/Marketplace participation**
- **Added questions on employer offered health insurance coverage**

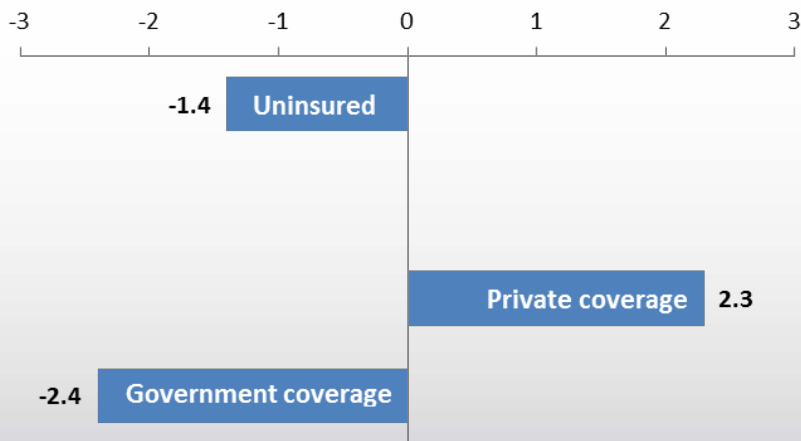
Purpose of test:

- **Operational:** Do these questions work on ASEC instrument?
- **Do results make sense?**
 - **Better calendar year estimate**
 - **Expect current coverage to be higher than calendar year estimate**
- **Minimize respondent cognitive burden**

CPS ASEC Content Test Results

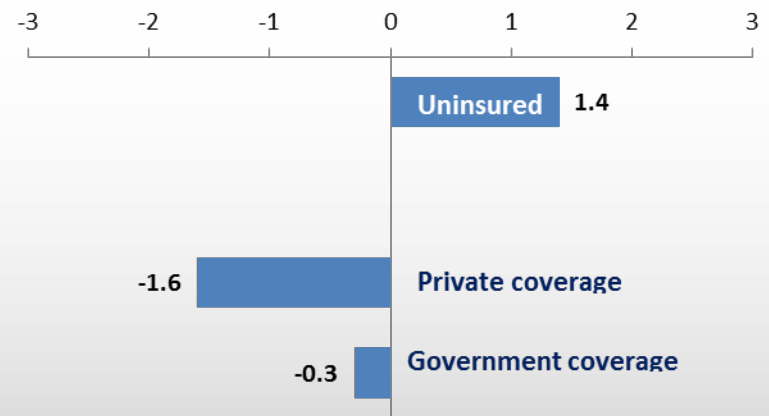
Content Test estimate of uninsured lower by 1.4 percentage points than Production CPS ASEC

Percentage Change:
Content Test Minus Production



Uninsured rate for current coverage exceeded the uninsured rate for the calendar year (both content test estimates)

Percentage Change:
Current Coverage Minus Calendar Year



Health Insurance Question Changes in the CPS ASEC

Goal: Provide improved health insurance coverage estimates for calendar year 2013, baseline (prior to ACA) year for measuring future year changes

Redesigned health insurance coverage questions

Reference period

- New current coverage question to improve responses to questions about health coverage in previous calendar year

Health insurance coverage types

- Start with general coverage questions followed by more specific questions

Household-level design

- Ask *who else in household* had that plan type
- Ask about *all household members by name* to address gaps in household coverage

New questions to measure Marketplace participation

Added questions on employer-sponsored insurance offers and take-up

Revised questions on Medical Out-Of-Pocket expenses (MOOP)

Flow of Re-designed CPS ASEC Questionnaire

Current Coverage Status

Iterates
through
questions,
checking
for gaps
and
additional
plans



Plan Type (includes exchange questions)

Months of Coverage

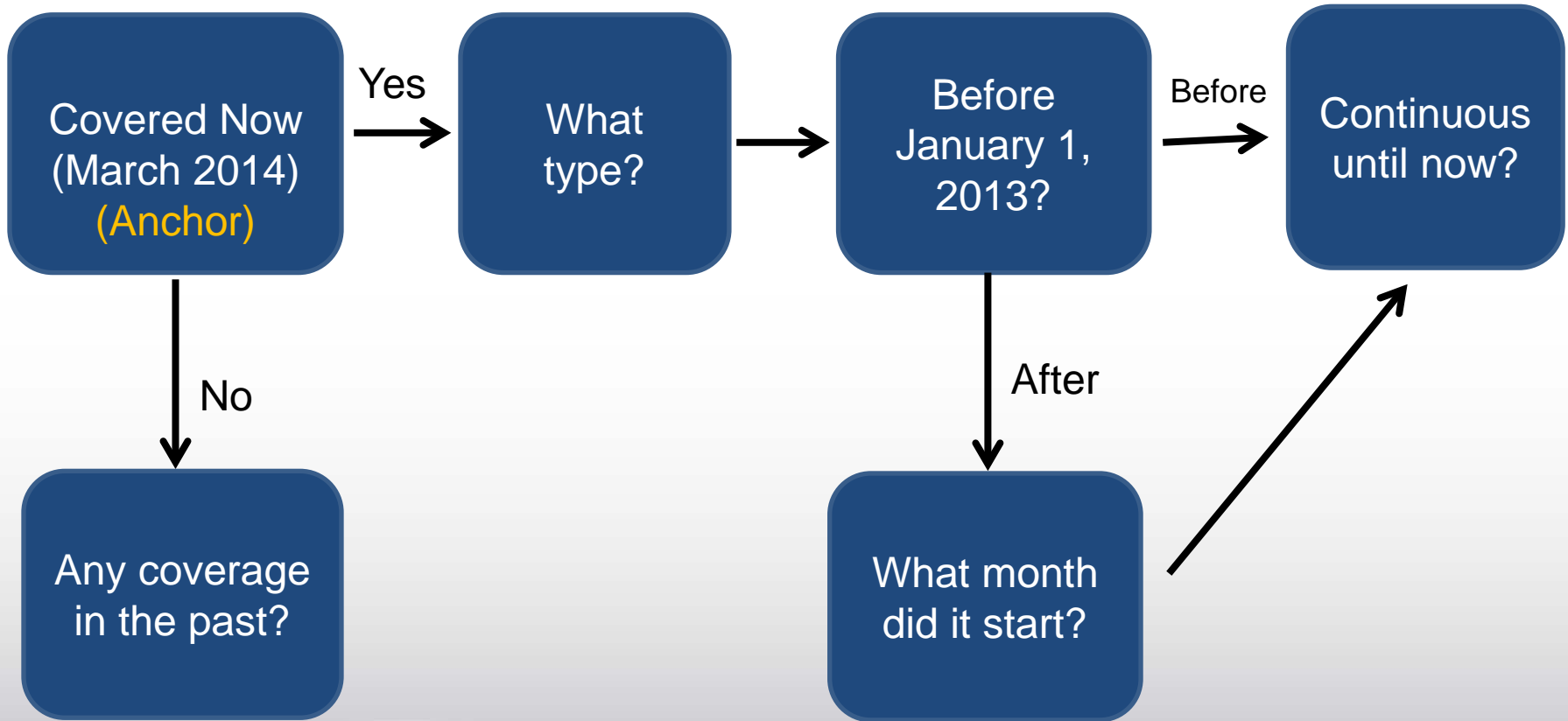
Additional Household Members Covered by Plan

Employer-sponsored insurance offers/take-up (if applicable)

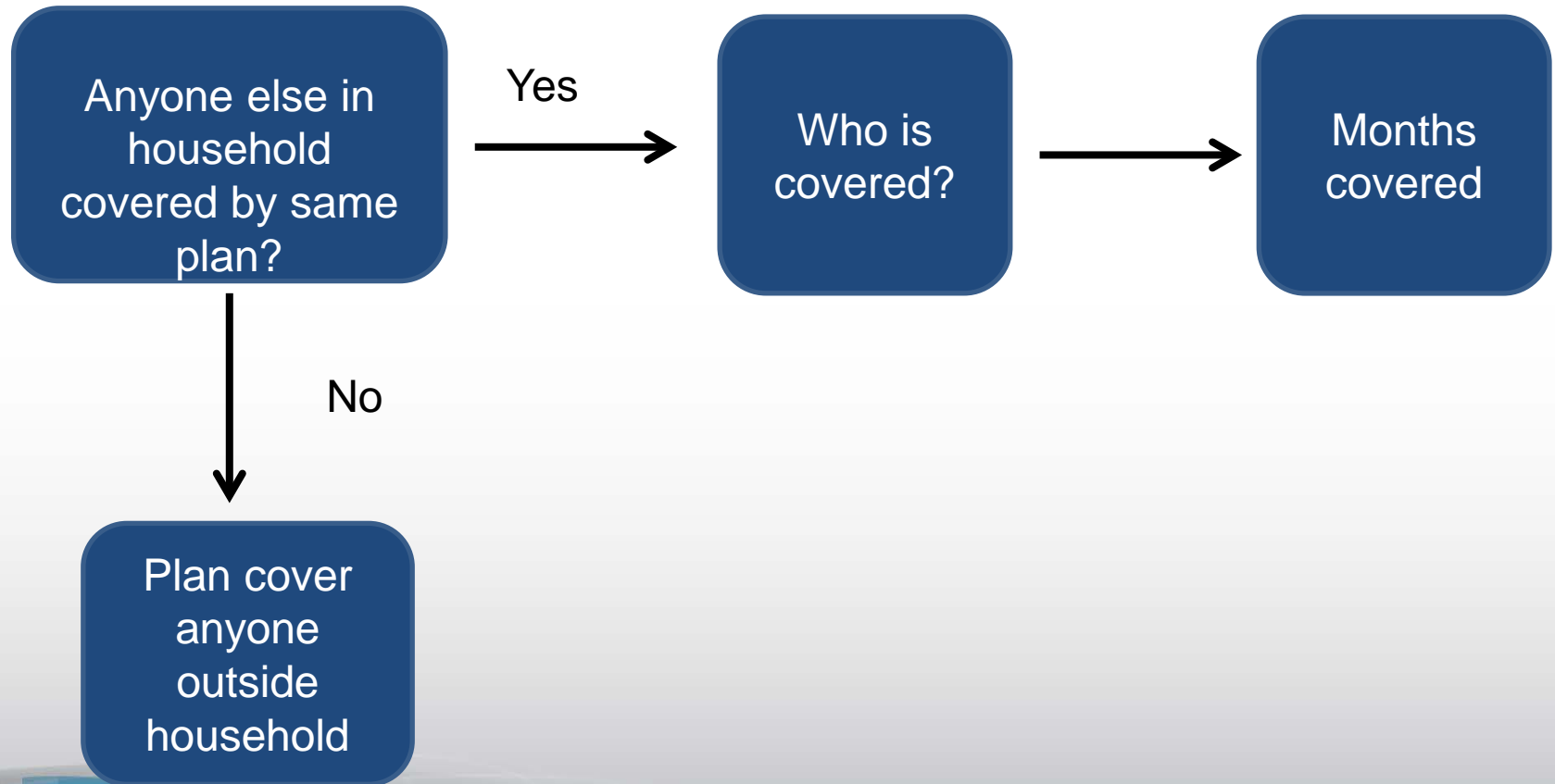
Health status

Medical Out-Of-Pocket expenses (MOOP)

Re-designed CPS ASEC: Health Insurance Now and Last Calendar Year



Additional Household Members Covered



Summary: Health Insurance Coverage Estimates

- CPS ASEC provides more than 3 decades of health insurance measurement.
- Multiple surveys offer health insurance coverage measures with different uses (such as, economic well-being, detailed geography, transitions).
- Federal statistical agencies work continuously to improve data collections, and our understanding of those data.
- Changing a survey requires years of research and testing.
- CPS ASEC improvements for 2014 will better measure health insurance coverage for calendar year 2013, thus providing a strong baseline to measure future changes in health insurance coverage due to ACA.

For more information

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August 18, 2014



National Health Interview Survey

- ❑ **Purpose:** To monitor the health of the US population through the collection and analysis of data on a broad range of health topics
- ❑ **Sample:** Multi-stage, clustered national sample of housing units from every state, to be representative of the civilian noninstitutionalized US population
- ❑ **Mode:** In-person interviews by Census interviewers
- ❑ **Data collection:** Continuous, with annual data files
- ❑ **Goal:** Complete interviews for 35,000+ households



Basic Structure of the NHIS Questionnaire

Since 1997

❑ Family Core

- Demographic, general health, and **insurance coveredata**
- For all family members
- Proxy responses allowed

❑ Sample Adult Core

- Health conditions, risk behaviors, and health care utilization data
- For one randomly selected adult in each family
- Self-response only

❑ Sample Child Core

- Health conditions and health care utilization data
- For one randomly selected child in each family
- Knowledgeable adult responds for child



Health Insurance Content in NHIS

Since 1959

□ Questionnaire items in 1959

- Do you (Does your family) have insurance that pays all or part of the bills when you go to the hospital?
 - What is the name of the plan (or plans)? Any other plans?
 - Who is covered by this plan (each plan)?
 - Does the plan (either plan) pay any part of the surgeon's bill for an operation?
- Do you (Does your family) have insurance that pays all or part of the bill for doctors' visits at home or at his office?
 - What is the name of the plan (or plans)? Any other plans?
 - Who is covered by this plan (each plan)?



Health Insurance Content in NHIS

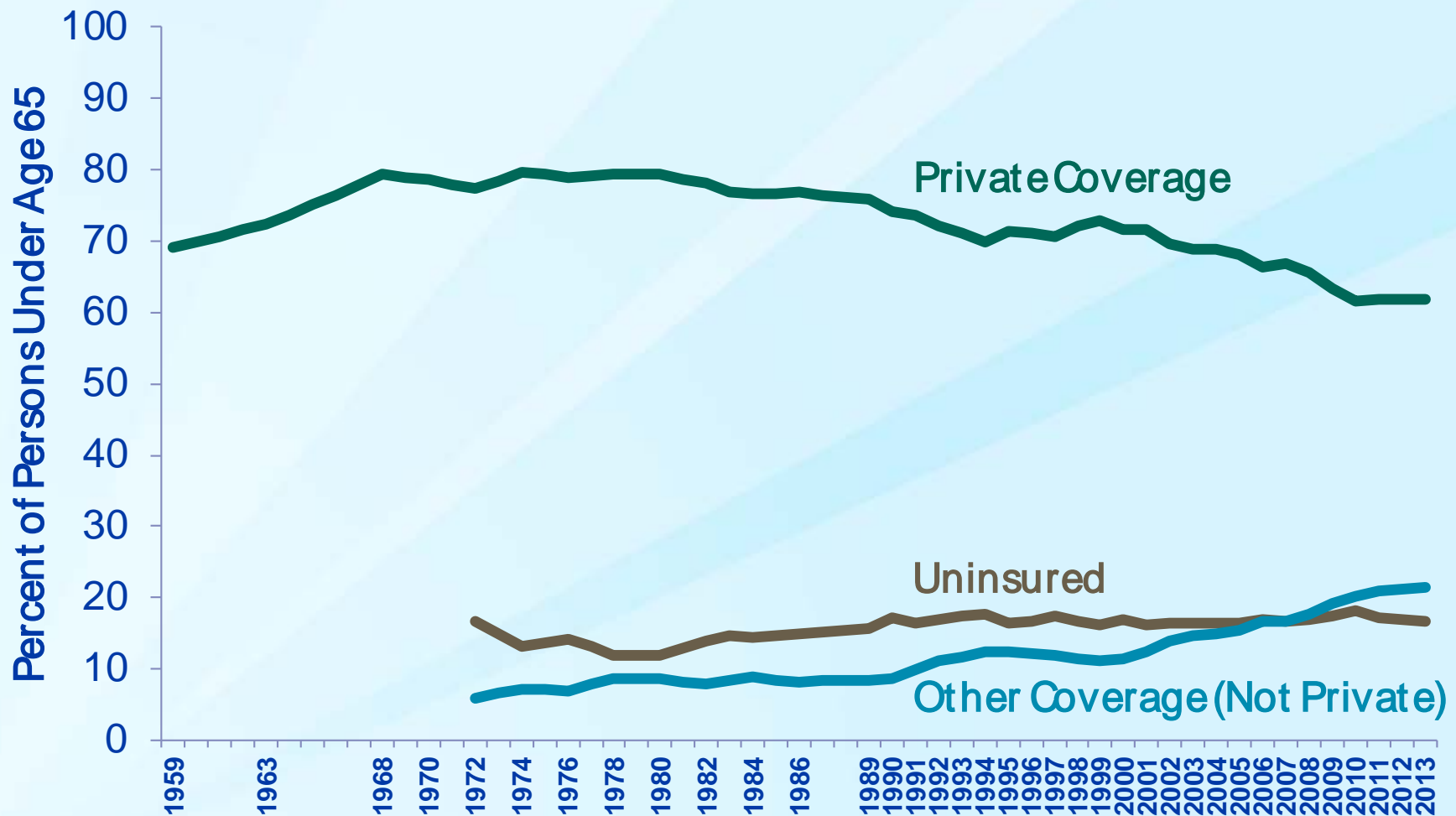
Since 1959

□ Questionnaire items in 1959

- Do you (Does your family) have insurance that pays all or part of the bills when you go to the hospital?
 - **What is the name of the plan (or plans)? Any other plans?**
 - Who is covered by this plan (each plan)?
 - Does the plan (either plan) pay any part of the surgeon's bill for an operation?
- Do you (Does your family) have insurance that pays all or part of the bill for doctors' visits at home or at his office?
 - **What is the name of the plan (or plans)? Any other plans?**
 - Who is covered by this plan (each plan)?

NHIS Health Insurance Coverage Rates

Current Coverage at Time of Interview, 1959–2013





General Approach to NHIS Insurance Content *Since 1997*

- Ask whether anyone in the family has health insurance coverage

The next questions are about health insurance. Include health insurance obtained through employment or purchased directly as well as government programs like Medicare and Medicaid that provide Medical care or help pay medical bills.

[Are you / Is anyone in the family] covered by any kind of health insurance or some other kind of health care plan?

General Approach to NHIS Insurance Content *Since 1997*

- Ask about the sources of coverage for each family member

What kind of health insurance or health care coverage do you (does family member) have?

INCLUDE those that pay for only one type of service (nursing home care, accidents, or dental care).

EXCLUDE private plans that only provide extra cash while hospitalized.

- Private health insurance
- Medicare
- Medi-Gap
- Medicaid
- CHIP (Children's Health Insurance Program)
- Military health care (TRICARE/VA/CHAMP-VA)
- Indian Health Service
- State-sponsored health plan
- Other government program
- Single service plan (e.g., dental, vision, prescriptions)
- No coverage of any type

General Approach to NHIS Insurance Content *Since 1997*

- Ask detailed questions about each type of coverage, on a person-basis, except for private plans

Examples

Medicare

- Enrollment in Medicare Advantage plan?
- Under a Medicare managed care arrangement?
- Enrollment in Medicare Part D?

Medicaid / CHIP / State-sponsored health plan

- Requirement to choose doctor from a list? Sign up with a certain doctor?
- Need for referrals to go to a different doctor or place for care?

Private

- In whose name is this plan? [policyholder]
- Which category best describes how the plan was obtained?
- Who pays for this health insurance plan? Employer subsidies?
- Premiums? How are they paid?
- Is the annual deductible < \$1250 or \$1250+?



General Approach to NHIS Insurance Content *Since 1997*

- ❑ Collect the “complete and accurate” names of private and public plans, from the health plan card, if possible

Examples

- What is the **complete name** of the first plan? Which family members are covered by this plan?
- May I please see your (family member’s) **Medicare card** to determine the type of coverage?
- What is the **name** of your (family member’s) Medicare Advantage or Medicare HMO plan?
- What is the **name** of the Medicaid health plan that assigned the doctor?
- I recorded that you are (family member is) covered by the Children’s Health Insurance Program (*or* a state-sponsored health plan, *or* an other government program). **What is the name of the plan?**

General Approach to NHIS Insurance Content *Since 1997*

- ❑ Confirm no coverage and ask follow-up questions for those said to be uninsured

Examples

- I have recorded that you are (family member is) not covered by health insurance. Is this correct?
- About how long has it been since you (family member) last had health care coverage?
- Which of these are reasons you do (family member does) not have health insurance?



Evaluation and Coding of Coverage Source

- ❑ Automated coding based on string searches of the private plan names
 - **Primary goal:** Identify and exclude single-service plans
- ❑ Manual coding of plan names provided by respondents who indicated coverage from either private or public sources (including Medicare, Medicaid, and military)
 - **Primary goal:** Identify inconsistencies and correct errors

Health Insurance Plan Coding

- ❑ Based on a list of 4,000-5,000 plan names
- ❑ Organized by state, and updated annually
- ❑ Sources of information:
 - The Competitive Edge (HealthLeaders-Interstudy)
 - The National Directory of Managed Care Organizations (Health Resources Publishing)
 - SMGHMO/PPO & Chains Directory (FirstMark, Inc)
 - HMO/PPO Directory (Grey House Publishing)
 - AIS Directory of Health Plans (Atlantic Information Services)
 - Listing of Medigap Plans (CMS; www.medicare.gov)
 - Mark Farrah Associates
 - Medicaid Managed Care Plan list (compiled by NCHS from Internet searches)
 - Medicare Advantage List (CMS; www.medicare.gov)
 - Guide to Federal Benefits (www.opm.gov)
 - Exchange Issuer and Exchange Plan name list (Department of Health and Human Services)
 - Blue Cross and Blue Shield Plans (compiled by NCHS from Internet searches)
 - Names of other public programs (compiled by NCHS from Internet searches)

Resulting Classification of Current Coverage

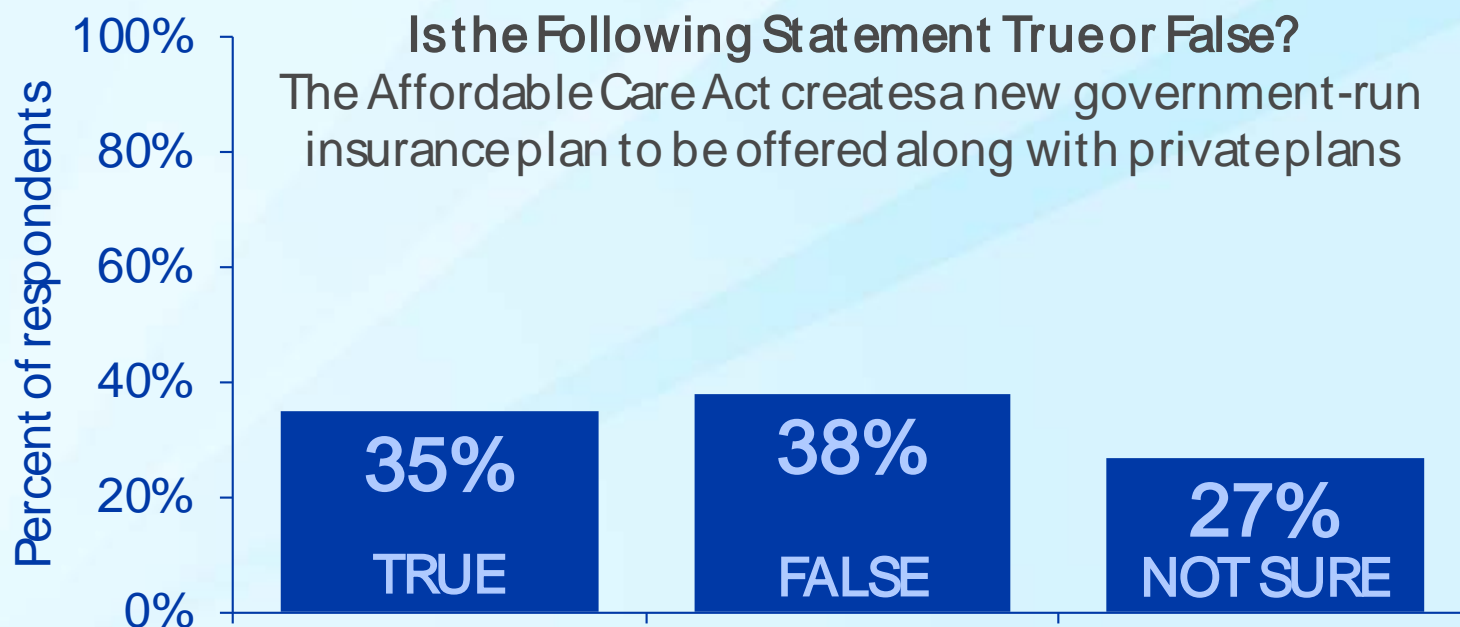
- ❑ MEDICARE – Medicare coverage recode
- ❑ MEDICAID – Medicaid coverage recode
- ❑ PRIVATE – Private health insurance recode
- ❑ SCHIP – CHIP coverage recode
- ❑ IHS – Indian Health Service recode
- ❑ MILCARE – Military health care coverage recode
- ❑ OTHPUB – State sponsored health plan recode
- ❑ OTHGOV – Other government program recode
- ❑ SINGLE – Single service plan recode
- ❑ NOTCOV – Uninsured *(persons with only IHS and/or SINGLE are uninsured)*

New for 2014:

- ❑ EXCHANGE – Exchange-based coverage recode

Confusion About Whether Exchange Coverage is Public or Private

- ❑ Health Insurance Terminology Survey (HITS)
- ❑ Fielded by NCHS in November 2013 and January 2014
- ❑ Opt-in online panel survey of approx. 1,000 adults





Coverage Obtained Through Health Insurance Marketplace or State-Based Exchanges *New for 2014*

Was the plan obtained through Healthcare.gov or the Health Insurance Marketplace [such as STATE EXCHANGE NAME]?

- ❑ For persons said to have coverage through Medicaid, CHIP, state-sponsored, or other government programs

- Under this plan, is there an enrollment fee or premium?
- Is the premium paid for this plan based on income?

- ❑ For persons said to have private health insurance coverage that was not employment-based

- Who pays for this health plan? *(mark all that apply)*
- *If self or family:* Is the premium paid for this plan based on income?

Method for Determining Exchange Coverage

- ❑ Reports of exchange-based coverage will be considered accurate, unless:
 - Plan name identifies a company that does not offer exchange-based coverage
 - Plan name is unknown, coverage is said to be state-sponsored or from another government program, but there is no premium
- ❑ Reports that a person does not have exchange-based coverage will be considered accurate, unless:
 - Plan name specifically identifies a known exchange plan name or exchange portal name
- ❑ **Name of the plan is an important consideration when classifying people as having exchange-based coverage**

Exchange Coverage Will Be Assigned If One of the Following Criteria is Met

- ❑ For all persons:
 - Provided a specific plan name that is an exchange plan

- ❑ For persons said to have a directly purchased private plan or a state-sponsored plan or other government plan:
 - Provided an exchange portal name (e.g., kynect in Kentucky)
 - Provided name of a company known to offer exchange plans, and plan was obtained from Health Insurance Marketplace
 - Plan name was unknown, plan was obtained from Health Insurance Marketplace, and
 - Plan was directly purchased, or
 - Plan was said to be a state-sponsored or other government plan, and there was a premium associated with the plan



Method for Determining Exchange Coverage

- ❑ All individuals classified as having exchange-based coverage will be considered to have **private health insurance**, regardless of whether they were reported to have obtained the coverage from a private or public source.
- ❑ More details about this plan are available online at:
http://www.cdc.gov/nchs/nhis/special_topics.htm



Strengths of the NHIS Health Insurance Data

- ❑ Collected in the context of data on health conditions, illness, disability, health care use, preventive health screenings, affordability of care, etc.
- ❑ Historical data to evaluate changes in coverage, measured at the time of the survey using the same general approach since 1997
- ❑ Collection of information to help verify public and private coverage, including exchange-based coverage
- ❑ Sufficient sample sizes to permit annual coverage estimates for a majority of states
- ❑ Quarterly release of preliminary estimates and associated microdata file 6 months after the end of data collection

Census Bureau 2014 CPS ASEC Releases

Victoria Velkoff, PhD

Federal Statistics on Health Insurance Coverage:
Technical Meeting on Methods Used in Household Surveys

August 18, 2014

Outline

- Implementation of the redesigned CPS ASEC
- Planned releases

Implementation Process

- Income questions cognitively tested in 2011
- Health Insurance questions cognitively tested in 2009
- SHIPP field test in 2010
- Cognitive tested exchange questions in Massachusetts in 2012

CPS ASEC 2013
Content Test
(reference year 2012)

Incorporated in
CPS ASEC 2014
(reference year 2013)

Implementation Process

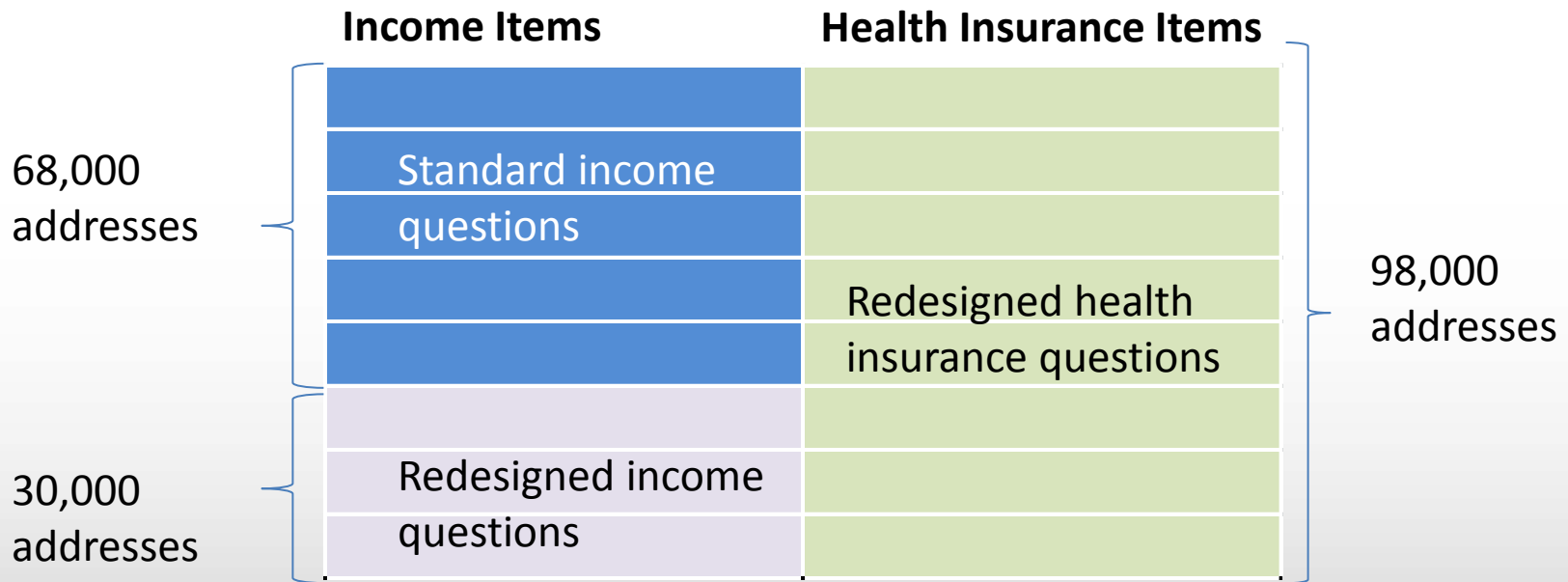
Split Sample Implementation for Income:

- New questions used for part of the 2014 ASEC sample (30,000 eligible addresses)
- Split-panel design preserves time series and provides a bridge between old and new series

Full Sample for Health Insurance:

- Needed to establish a 2013 baseline before major provisions of ACA take effect.
- Only full ASEC sample provides reliable estimates of small groups

Implementation and the ASEC Sample



Two 2013 Reports: Income & Poverty, Health Insurance

	Income Items	Health Insurance Items
68,000 addresses		
	Standard income questions	
		Redesigned health insurance questions
30,000 addresses	Redesigned income questions	

2013 Income & Poverty, and Health Insurance reports based on a sample of 68,000 addresses, representing the total U.S. population.

Continuing Research

Income Items

Health Insurance Items

Standard income questions	
	Redesigned health insurance questions
Redesigned income questions	

We are presently analyzing these data to evaluate the income questions.

Public Use File Release

Public use microdata full file based on 98,000 addresses to be released in January 2015.

Income Items	Health Insurance Items
Standard income questions	
	Redesigned health insurance questions
Redesigned income questions	

The 2015 Health Insurance Release

2013



Baseline

2014



**Comparison to 2013 baseline
will show the impact of new
health insurance law**

September 16, 2014 Release

All products based on the 68,000 sample

- **Income and Poverty in the United States: 2013**

Same general content as last year

- Characteristics
- Year-to-year comparisons

- **Health Insurance in the United States: 2013**

Same general cross-sectional characteristics as last year

- Characteristics based on CPS ASEC
- American Community Survey (ACS) estimates provide trend 2008-2013
- ACS state estimates

September 16, 2014 Release (Cont'd)

- Webinar @ 10:00 am
- Detailed tables online
- Public use microdata sample file (PUMS)
 - Based on the 68,000 sample (nationally representative weights)
 - Same variables as last year
- Measure of current health insurance coverage released with NCHS

Forthcoming Releases and Events

- Pre-release ACS Webinar – Week of September 8
- ACS one-year estimates release – September 18
- Supplemental Poverty Measure release planned for mid-October 2014 (based on 68,000 sample)
- Income question evaluation – January 2015
- Research Public Use File – January 2015
- Health insurance question evaluation – Summer 2015

For more information on income and poverty

<http://www.census.gov/topics/income.html>

The screenshot shows the U.S. Census Bureau website page for "Income & Poverty". At the top, there is a navigation bar with the U.S. Department of Commerce logo and links for "Blogs", "Index A-Z", "Glossary", and "FAQs". Below this is a search bar. The main navigation menu includes "Topics" (Population, Economy), "Geography" (Maps, Geographic Data), "Library" (Infographics, Publications), "Data" (Tools, Developers), "About the Bureau" (Research, Surveys), and "Newsroom" (News, Events, Blogs). The "Income & Poverty" section is highlighted. On the left, there is a sidebar with links for "About this Topic", "Data", "News", "Publications", "Surveys/Programs", "Visualizations", and "Working Papers". The main content area features a description of income as a gauge for well-being, a "Read More" link, and a list of related topics: Income, Income Inequality, Poverty, Small Area Income and Poverty, Supplemental Poverty Measures, and Wealth. A "Well-Being" tag is also present. To the right is an image of coins and bills. Below the main content is a "Latest" section with tabs for "News", "Data", "Publications", and "Working Papers". The "News" tab is active, showing a headline: "Income, Poverty & Health Insurance Statistics & ACS Release Schedule" dated July 31, 2014. The text states: "The U.S. Census Bureau announced today the schedule for the 2013 income, poverty & health insurance statistics, as well as the 2013 ACS releases." To the right of the news section is a "U.S. Census Bureau Economic Indicators" section. It features a "Business Inventories June 2014 Report" released at 10:00 AM EDT on 8/13/14, with a value of \$1,743.1 B and a 0.4% increase. Below it is an "Advance Monthly Retail Sales July 2014 Report" released at 8:30 AM EDT on 8/13/14.

For more information on health insurance

<http://www.census.gov/topics/health.html>

The screenshot shows the U.S. Census Bureau website's "Health" topic page. At the top, there is a navigation bar with the United States Census Bureau logo on the left and a search bar on the right. The navigation bar includes links for "Topics" (Population, Economy), "Geography" (Maps, Geographic Data), "Library" (Infographics, Publications), "Data" (Tools, Developers), "About the Bureau" (Research, Surveys), and "Newsroom" (News, Events, Blogs). The main content area is titled "Health" and features a sidebar on the left with links for "About this Topic", "Data", "News", "Publications", "Surveys/Programs", "Visualizations", and "Working Papers". The main content area includes a paragraph about the importance of health statistics, a "Read More" link, and a list of sub-topics: Disability, Expenses & Investments, Fertility, Health Insurance, HIV/AIDS, and Small Area Health Insurance Estimates. There is also a "Latest" section with a "News" tab selected, showing a featured article titled "An Aging Nation, Live on C-SPAN's 'America by the Numbers'" dated August 13, 2014. The article text states: "The nation's 65-and-older population is projected to reach 83.7 million in the year 2050, almost double in size from the 2012 level of 43.1 million." A "Tell us what YOU think" box is visible on the left side of the page.

Contact information

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Upcoming Releases from the National Health Interview Survey



Jennifer Madans, PhD

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August 18, 2014

National Health Interview Survey (NHIS) Early Release (ER) Program


- ❑ NHIS is conducted throughout the year based on monthly random samples.
- ❑ Annual files released six months after the completion of data collection.
- ❑ Data can be analyzed monthly or quarterly – estimates are an average over the time period covered.
- ❑ Change from Paper-and-Pencil Interview (PAPI) to Computer-Assisted Personal Interview (CAPI) data collection in 1997 changed how data were processed allowing for estimates to be released throughout the year – Early Release Program.
- ❑ Quarterly Early Release reports and preliminary microdata files are produced prior to final processing and weighting to provide early access to the most recent information.

NHIS Early Release (ER) Program

- **Every three months, the ER Program produces:**
 - A report on 15 key health indicators - first release early 2001 (1997 through June 2000 data)
 - A separate report on health insurance coverage estimates - first release in early 2002 (1997 – September 2001 data)
 - Web tables - quarterly health insurance estimates and special tabulations
 - Preliminary microdata file used for these reports
- **In addition, the ER Program produces:**
 - Periodic reports on special health-related topics, e.g.,
 - Problems paying medical bills
 - Sources of coverage and health care access and utilization for young adults
 - Emergency Room Use Among Adults Aged 18–64
 - Bi-annual reports on wireless substitution for landline service

Accessing the NHIS Website

<http://www.cdc.gov/nchs/nhis.htm>

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National Health Interview Survey

[NCHS Home](#) > [Surveys and Data Collection Systems](#)

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The National Health Interview Survey (NHIS) has monitored the health of the nation since 1957. NHIS data on a broad range of health topics are collected through personal household interviews. For over 50 years, the U.S. Census Bureau has been the data collection agent for the National Health Interview Survey. Survey results have been instrumental in providing data to track health status, health care access, and progress toward achieving national health objectives.

New in 2014: Native Hawaiian and Pacific Islander (NHPI) NHIS

What's New

- Reasons for Emergency Room Use Among U.S. Children: National Health Interview Survey, 2012 (7/2014)
- Sexual Orientation and Health Among U.S. Adults: National Health Interview Survey, 2013 [PDF - 194 KB] (07/2014)
- Wireless Substitution: Estimates From the National Health Interview Survey, July -December 2013 [PDF - 324 KB] (07/2014)
- 2013 National Health Interview Survey (NHIS) - Data Release (06/2014)
- Selected Estimates Based on Data From the 2013 National Health Interview Survey (6/2014)
- Health Insurance Coverage: Estimates From the National Health Interview Survey, 2013 [PDF - 515 KB] (6/2014)
- Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, January 2010 -December 2013 [PDF - 259 KB] (6/2014)
- Marriage, Cohabitation, and Men's Use of Preventive Health Care Services (6/2014)

Contact Us:






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-  (301) 458-4001
-  nhis@cdc.gov
[Contact CDC-INFO](#)

Related Sites

- [NHIS Early Release Program](#)
- [Surveys and Data Collection Systems](#)
- [Integrated Version of Selected NHIS Variables](#)
- [Joint Canada/United States Survey of Health](#)
- [Child and Family Statistics](#)

Selected Participants

Have you been selected to take part in the National Health Interview Survey?

-  [NHIS Brochure](#) [PDF - 715 KB]
-  [Folleto de NHIS](#) [PDF - 536 KB]
-  [Confidentiality Brochure](#) [PDF - 591 KB]
-  [Folleto de Confidential](#) [PDF - 785 KB]
-  [Early Release Brochure](#) [PDF - 1.2 MB]



Accessing the NHIS Early Release Program Website

<http://www.cdc.gov/nchs/nhis/releases.htm>

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A-Z Index A B C D E F G H I J K L M N O P Q R S T U V W X Y Z #

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- **Early Release**
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- Health, United States
- Life Tables
- National Health Statistics Reports
- National Vital Statistics Reports
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The National Health Interview Survey Early Release Program

The Early Release (ER) Program of the National Health Interview Survey (NHIS) provides analytic reports and preliminary microdata files on an expedited schedule. NHIS data users can have access to these very timely reports and microdata files without having to wait for the final annual NHIS microdata files to be released in late June following the end of each data collection year. ER reports and microdata files are produced prior to final data editing and final weighting to provide early access to the most recent information from NHIS. Some ER products are available as soon as nine months before the public use files are released. Below are descriptions of and links to each type of ER product.

- The online report **Selected Estimates Based on Data from the National Health Interview Survey** is published quarterly and provides estimates of 15 selected key health indicators (one of which is health insurance). The first report for each data collection year (January through December) is released in about September and is based on NHIS data from the previous January through March. Each of the three subsequent quarterly reports is based, respectively, on an additional three months of data.
- The online report **Health Insurance Coverage: Estimates from the National Health Interview Survey** is published quarterly and provides additional detailed estimates of health insurance coverage by selected demographic characteristics. The first report for each data collection year (January through December) is released in about September and is based on NHIS data from the previous January through March. Each of the three subsequent quarterly reports is based, respectively, on an additional three months of data.
- The online report **Wireless Substitution: Estimates from the National Health Interview Survey** is published in about May and December of each year and provides updated estimates of trends in use of landline and wireless telephones by persons and in households.
- Other online ER reports and tabulations on special topics are released on an as-needed basis. Some of these also are found at [Responses to Recent Health Policy Data Requests](#).
- **Preliminary Quarterly Microdata Files** [PDF - 114 KB] containing selected NHIS variables are made available via the NCHS Research Data Center (RDC). For each data collection year, these files are made available three times: in about September (with data from the first quarter), in about December (with data from the first two quarters), and in about March of the next year (with data from the first three quarters). Analysts wishing to use the files should follow standard procedures for using the RDC. Note that NCHS has RDC locations in Hyattsville, Maryland and Atlanta, Georgia, and NCHS data can also be accessed at Census Bureau RDCs and through remote access. See [NCHS Research Data Center](#).

On this Page

- [Early Release Reports on Key Health Indicators](#)
- [Early Release Reports on Detailed Estimates of Health Insurance Coverage](#)
- [Early Release Reports on Wireless Substitution](#)
- [Early Release Reports and Tabulations on Special Topics](#)
- [Preliminary Quarterly Microdata Files](#)

Contact Us:

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Health Insurance ER Report Released Quarterly in September, December, March, and June



NATIONAL HEALTH INTERVIEW SURVEY EARLY RELEASE PROGRAM

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, 2013

by Robin A. Cohen, Ph.D., and Michael E. Martinez, M.P.H., M.H.S.A.
Division of Health Interview Statistics, National Center for Health Statistics

Highlights

- In 2013, 44.8 million persons of all ages (14.4%) were uninsured at the time of interview, 55.4 million (17.8%) had been uninsured for at least part of the year prior to interview, and 33.4 million (10.7%) had been uninsured for more than a year at the time of interview.
- In 2013, among children aged 0–17, 6.5% were uninsured at the time of interview, 42.2% had public health plan coverage, and 52.6% had private health insurance coverage.
- In 2013, among persons aged 18–64, 20.4% were uninsured at the time of interview, 16.7% had public health plan coverage, and 64.2% had private health insurance coverage.
- Among children aged 0–17, the percentage who were uninsured at the time of interview decreased from 13.9% in 1997 to 6.5% in 2013.
- The percentage of adults aged 18–64 who were uninsured at the time of interview has generally increased since 1997 but decreased from 2010 to 2013.
- In 2013, the percentage of persons under age 65 who were uninsured at the time of interview varied by state. For example, 3.8% and 5.2% were uninsured in the District of Columbia and Massachusetts, respectively, whereas 24.8% were uninsured in Nevada and 24.7% were uninsured in Florida.

Introduction

The Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) is releasing selected estimates of health insurance coverage for the civilian noninstitutionalized U.S. population based on data from the 2013 National Health Interview Survey (NHIS), along with comparable estimates from the 2008–2012 NHIS. Estimates for 2013 were based on data for 104,203 persons.

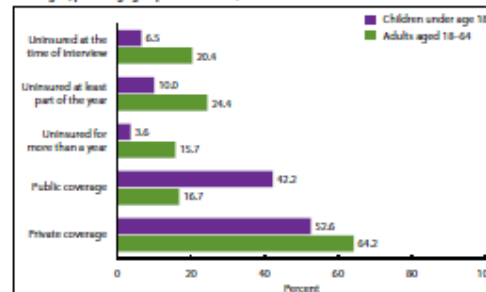
Three estimates of lack of health insurance coverage are provided: (a) uninsured at the time of interview, (b) uninsured at least part of the year prior to interview (which includes persons uninsured for more than a year), and (c) uninsured for more than a year at the time of interview (e.g., Tables 1 and 2). Estimates of public and private coverage

are also presented (e.g., Table 3). Table 3 also includes estimates for 1997 and 2005.

Additional tables present estimates of uninsured, public coverage, and private coverage by poverty status for persons under age 65 (Table 4), adults aged 18–64 (Table 5), and children aged 0–17 (Table 6). Table 7 shows the percentages of persons who were uninsured, had public coverage, and had private coverage, by age and sex. Estimates for persons under age 65, by race and ethnicity, are shown in Table 8. Table 9 presents estimates for adults aged 18–64 by other selected demographic characteristics that are relevant to adults only.

For individuals with private health insurance, estimates are presented in Tables 10 and 11 for enrollment in high-deductible health plans (HDHPs), enrollment in consumer-directed health

Figure 1. Percentage of persons without health insurance, using three measures of noncoverage and age group, and percentage of persons with health insurance at the time of interview, by coverage type and age group: United States, 2013

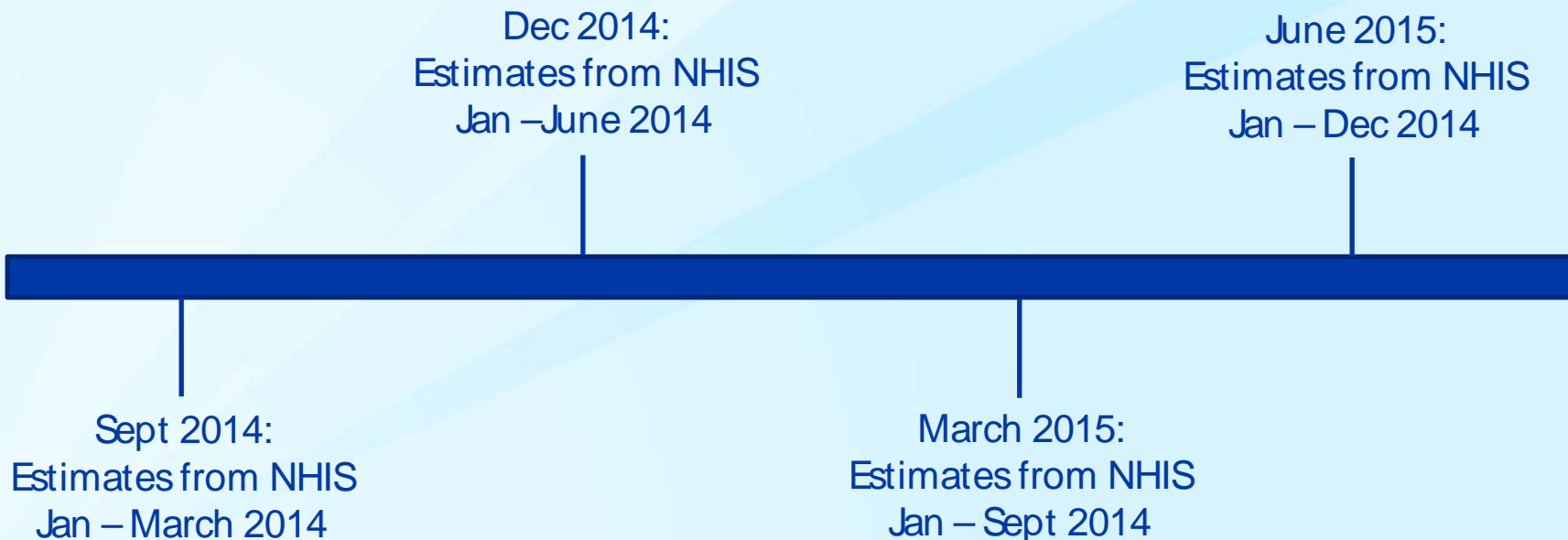


NCHS data are based on household interviews of a sample of the civilian noninstitutionalized population. DATA SOURCE: COGNITIVE, NATIONAL HEALTH INTERVIEW SURVEY, 2013, FAMILY CORE COMPONENT.

Early Release Health Insurance Estimates

Represent an Average Over the Number of Months Included

- ❑ September release is based on answers collected between January through March
- ❑ December release is based on January–June
- ❑ March release is based on January–September
- ❑ June release is based on January–December



Content of Health Insurance Early Release Report

□ Percentages and counts of persons

- Uninsured at time of interview
- Uninsured at least part of the year
- Uninsured for more than a year



By age group,
over time

□ Percentages of persons

- Uninsured at the time of interview
- With public health plan coverage
- With private health plan coverage



By age and poverty status,
over time
By race/ethnicity over time
By age and sex

□ Percentages of adults

- Uninsured at the time of interview
- With public health plan coverage
- With private health plan coverage



By education;
By employment status;
By marital status

Health Insurance ER Report: Statistics

- Percentages of persons in high-deductible health plans
 - Without a health savings account
 - In a consumer directed health plan

- **Subnational coverage estimates**
 - By expanded region (9--similar to Census division)
 - By state Medicaid expansion status
 - By state Health Insurance Marketplace type
 - By selected states (in December, March, and June reports)

- **And starting with the September 2014 report, percentage and count of persons under age 65 classified as having exchange-based coverage (centered on mid-Feb).**
 - Estimates for population subgroups will be released later in the year as sample size permits.

Early Release Health Insurance Estimates are Preliminary

- **Based on a streamlined version of final processing procedures.**
 - More automated.
 - Based on the prior year's list of health insurance plan names (list was updated with latest exchange plans for September release).
 - Does not distinguish between individual types of public programs.
- **Preliminary estimates are generally close to the final estimates.**
 - Within 0.1 percentage points for the proportion uninsured.
 - Within 0.2 or 0.3 percentage points for estimates of private and public coverage.

Preliminary Quarterly Microdata Files

- ❑ Data are available in the NCHS Research Data Center (RDC).
- ❑ The RDC provides a mechanism for researchers to access data not released to the public because of nondisclosure or confidentiality reasons.
- ❑ Access is provided either on site (Hyattsville, Atlanta, and the 12 Census RDCs) or via a remote system.



<http://www.cdc.gov/rdc/>

**To receive announcements about Early Releases
and other NHIS data releases and publications,
visit the NCHS website at:**

http://www.cdc.gov/nchs/nhis/nhis_listserv.htm



The Effort to Improve Data on Health Insurance Coverage

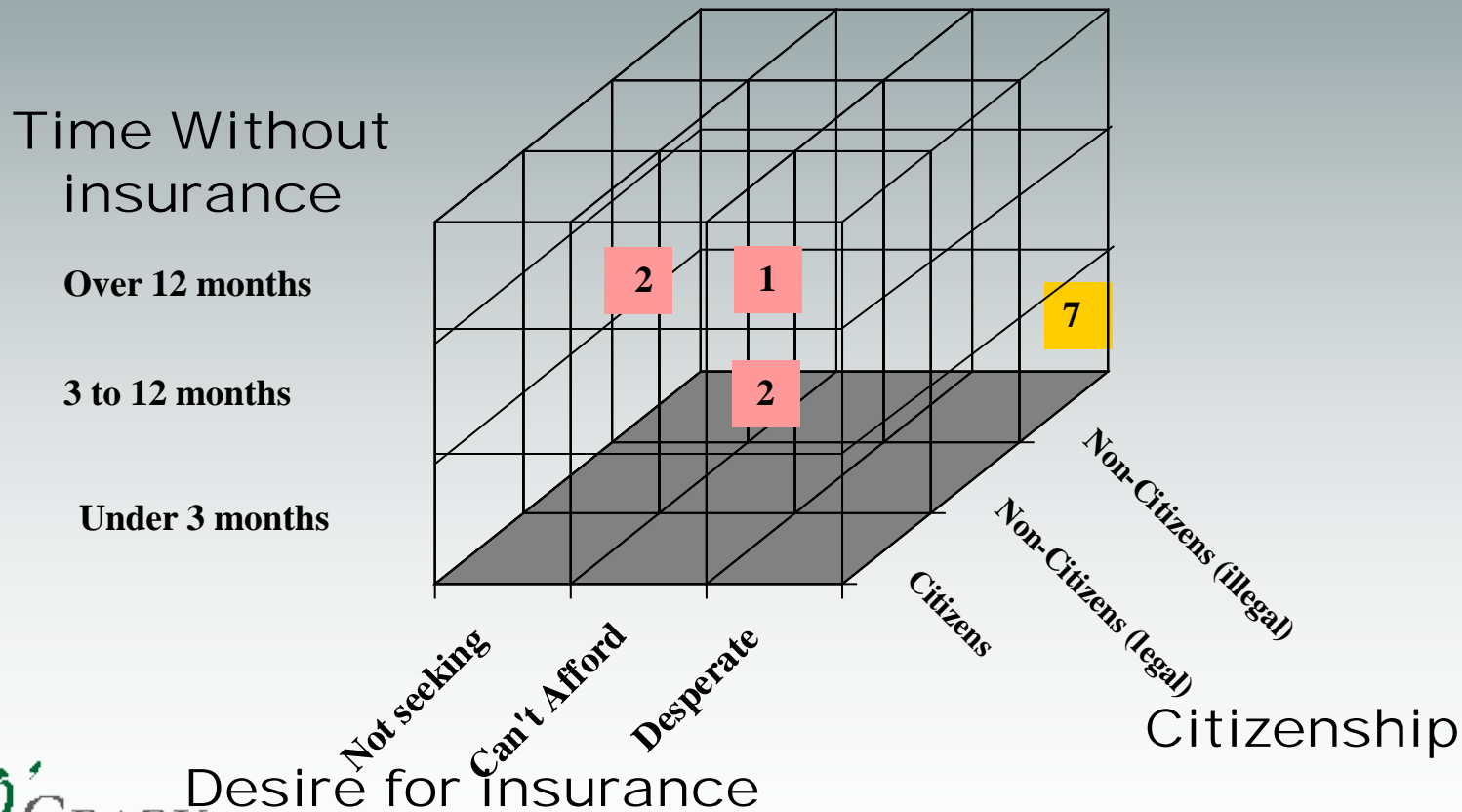
Michael J. O'Grady, Ph.D.
Principal
O'Grady Health Policy, LLC

**Former Assistant Secretary for Planning and
Evaluation (ASPE), HHS**

A Little Political/Policy History

- In 2004 after successfully passing a Medicare drug benefit, the Bush administration was exploring policy options for reducing the number of uninsured.
- The approach was more incremental. Working from a policy logic that there probably wasn't enough funding or political consensus to cover all the uninsured.
- We wanted the most accurate estimate of the number of uninsured and key subpopulations in greatest need.

Conceptual Tool for Thinking About the Uninsured



President Bush's Briefing in the Roosevelt Room in 2004

- First slide:

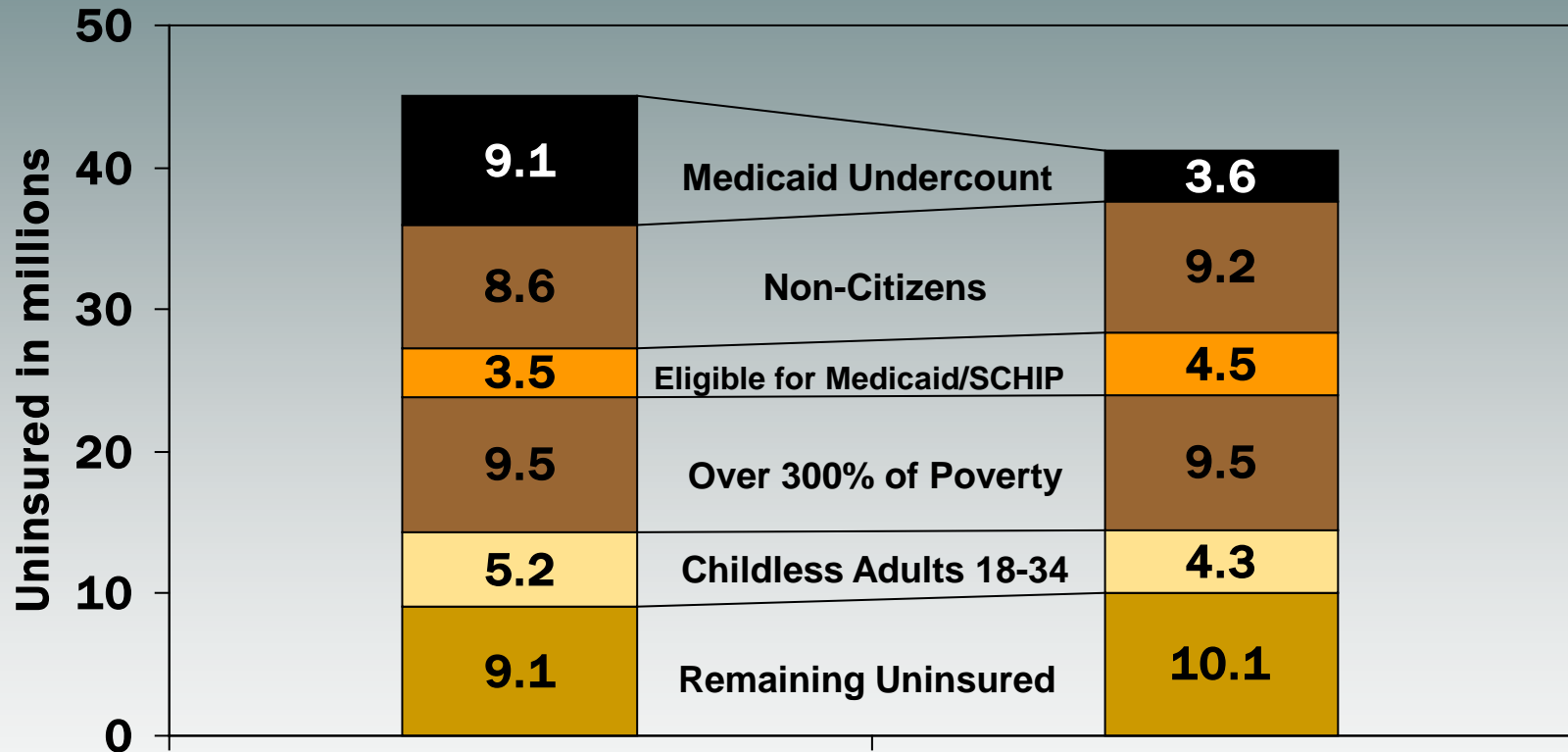
Current Population Survey (CPS), Census	2003	45.0 million 15.6%
Medical Expenditure Panel Survey (MEPS), HHS	2002	32.4 million 11.5%
National Health Interview Survey (NHIS), HHS	2003	28.8 million 10.0%
Survey of Income and Program Participation (SIPP), Census	2001	18.9 million 6.8%

- There are four major Federal surveys that measure the uninsured— two HHS, two Census.
- These surveys report a wide range of estimates, leading to some confusion and difficulty targeting policy solutions.

Step I- Medicaid Undercount

- As states improved Medicaid data systems, it became apparent that the CPS increasingly undercounts Medicaid enrollment and overcounts the uninsured.
- ACF and ASPE funded a project by RAND to examine the undercount in California by matching Medicaid administrative data with the CPS data.
- ASPE has funded two models that analyze the Medicaid undercount –
 - The Actuarial Research Corporation
 - The Urban Institute's TRIM model

Key Subpopulations and Estimated Overcount of the Uninsured



Actuaries' Estimates
(35.9 million Uninsured)

Health Economists' Estimates
(37.6 million Uninsured)

Step 2 – Convene the Technical Experts in and out of Governments

- Staffs of the four different surveys.
- Outside survey and health policy experts.
- Analytic staffs support policymaking, e.g., CMS, Treasury, OMB, CBO, CRS.
- Consensus on cooperation and testing of competing methodologies, e.g., question wording, imputation vs. reweighting, recall periods.

Step 3 – Funding the Research to Find the Right Number

- University of Minnesota:
 - Comparison of the questions and methodologies of all four major federal surveys to determine the accuracy of the health insurance estimates.
 - SNACC project that linked six different sets of survey and administrative file to determine the most accurate counts of coverage and the uninsured.
- Mathematica Policy Research:
 - Comparison of the questions and methodologies of all four major federal surveys to determine the accuracy of the income estimates.



Conclusions

- It was clear when this started the process that it might take a decade to see the fruits of the effort, but in 2004 a decade had already passed since the Clinton administration had to face the same problem and no significant progress had been made.
- We knew we ran the risk of being accused of trying to “define away the problem.” However, if there’s a better way to measure data on important policy problem and you don’t do it for fear of political “heat,” it’s professionally irresponsible.

QUESTIONS?

Dial-in number: 800-857-4620

Participant passcode: CENCHS

Note: Stay on the line until operator asks for the passcode. Do not key in passcode.