

Planning for the Upcoming Releases of Income, Poverty, and Health Insurance Coverage Estimates from Federal Sources

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- 9:00 AM** **Welcome and Introductions**
Michael C. Cook, Sr., Chief, Public Information Office, U.S. Census Bureau
Victoria Velkoff, Chief, Social, Economic, and Housing Statistics Division,
U.S. Census Bureau
- 9:15 AM** **Income, Poverty, and Health Insurance from the Current Population Survey
Annual Social and Economic Supplement**
Ed Welniak, Chief, Income Statistics Branch, U.S. Census Bureau
Trudi Renwick, Chief, Poverty Statistics Branch, U.S. Census Bureau
Marina Vornovitsky, Chief, Health and Disability Statistics Branch, U.S. Census
Bureau
- 10:20 AM** **Upcoming Data Releases**
Victoria Velkoff, Chief, Social, Economic, and Housing Statistics Division,
U.S. Census Bureau
- 10:30 AM** **Questions and Discussion**
- 10:45 AM** **Break**
- 11:00 AM** **Health Insurance Coverage Estimates from Other Sources**
Stephen Blumberg, Associate Director for Science in the Division of Health
Interview
Statistics, National Center for Health Statistics
Alfred Gottschalck, Assistant Division Chief for Small Area and Longitudinal
Estimates, U.S. Census Bureau
- 11:40 AM** **Discussion and Conclusion**

Michael Cook: Good morning everyone. I'm Michael Cook, Chief of the Public Information Office at the U.S. Census Bureau.

I'd like to welcome everyone to today's event entitled Plans for the Upcoming Releases of Income, Poverty and Health Insurance Covered Estimates for Federal Sources.

I'd like to take a little time and talk to you about the program today. First we'll have Tori Velkoff the Chief of our Social, Economic and Housing Statistics Division. She'll provide an overview of what was released last year.

Then we'll have some subject matter experts walk you through exactly on the updates that we have planned for the income poverty and health insurance coverage estimates releases that are forthcoming.

We will open the floor for questions before we take a break at 10:45. And then we'll come right back at 11 o'clock and continue with additional information before closing at 11:40.

I'd like to remind those that are online dialed in listening and viewing today that when you do dial in please use the number 1-800-857-4620. The pass code is 9912525. And you need to stay on the line until the operator asks for the passcode, you do not press in the passcode.

So without further delay I'd like to welcome Victoria Velkoff, the Division Chief of the Social, Economic and Housing Statistics Division here at the Census Bureau.

Victoria Velkoff: Thank you Michael. Good morning and thank you for joining us in the room and online. We're having this meeting today to explain our upcoming releases on income poverty and health insurance.

We're going to be releasing a lot of important data related to income, poverty and health insurance both this week and next month. And we want to be very clear about what we are releasing and when we are releasing it.

I want to give you a little bit of background on the Current Population Survey Annual Social and Economic Supplement or CPS ASEC as we call it.

Last year we implemented those redesigned income and redesigned health insurance questions in the CPS ASEC. How we implemented the new income questions and the new health insurance questions differed.

For income we used a split panel approach. In 2014 we had about 98,000 addresses in the CPS sample. We asked the new income questions of about 30,000 of those addresses. The remaining 68,000 received the traditional income questions.

We needed the split panel design for income because it preserved the time series and provides a bridge between the old and the new series.

The CPS ASEC is the source of official US Poverty Estimates so a consistent time series is a necessity. And the best way to make improvements and create that bridge was to take a split panel approach

The time series for health insurance was also important but knowing that there were other data sources out there specifically the National Health Interview Survey, and the American Community Survey, and knowing that we needed a very solid baseline for 2013 with the new health insurance questions we decided to ask the redesigned health insurance questions of the full sample.

We needed to establish a baseline in 2013 with the new health insurance questions. We wanted this baseline insights before the major effects of the Affordable Care Act took

effect. And we can now use this 2013 baseline as a comparison with 2014 in future years.

And only a full ASEC sample provides reliable estimates for small groups some of which may be the most affected by the Affordable Care Act.

I want to clarify before I go on the difference between the collection year and the reference year in the CPS ASEC.

We collect the CPS ASEC in February, March and April each year. The reference period for income, poverty and health insurance coverage is the previous calendar year.

So for example the 2014 ASEC data referred to the 2013 income poverty and health estimates. Likewise the 2015 ASEC data referred to the 2014 income poverty and health insurance estimates.

For the reports on income and poverty and health insurance that we released last September we chose to use the sample based on the 68,000 addresses that received the traditional income questions. These are outlined in the red box.

We did this for a couple of reasons. One reason is that income and health insurance are very closely related so we wanted to have a consistent set of income questions for the health insurance report.

Note that the sample is nationally representative. And for last year's health insurance report we did not show change with the CPS data but rather focused on calendar year 2013. We used ACS data to look at the change.

So last year we put out three reports based on the sample that received the traditional income questions those were income and poverty 2013, health insurance coverage in the United States in 2013 and the supplemental poverty measure.

We also put up - put out some products based on the full ASEC sample for example we put out a table package on American families and a table package on geographic mobility. Note that these tables that were based on the full sample did not show any income data.

We also released several data sets last year. Last September we released a public use file that was based on the 68,000 addresses that received the traditional income questions. Note that this data set was consistent with all of the reports we put out last year.

We also released an extract on current health insurance coverage and a supplemental poverty research data file.

In January we released two data sets one was the public use research file that was based on the sample that received the redesigned income questions, and we also released an extract that contained weights for the full file so that external users could combine the subsamples into one file.

When we released the reports last year we knew we needed to do a lot of research on the difference between the traditional income questions and the redesigned income questions. And we've done a lot of that research.

We presented several papers that the American Economic Association meetings in January. We had an expert meeting here at the Census Bureau in March where we reviewed our research and received feedback from experts.

We also presented several papers at the Joint Statistical Meetings in August. And we're planning to present a paper at the Federal Committee on Statistical Methods in December.

With that as background let me go through the agenda and tell you who will be talking about what? Ed Welniak, who is Chief of Income Statistics Branch will discuss changes to the income questions in the CPS ASEC and compare the income results from the traditional and the redesigned questions.

Trudi Renwick, who is the Chief of the Poverty Statistics Branch will present information on the poverty rates from the two subsamples. She will also provide information about our releases on income and poverty.

Marina Vornovitsky, Chief of the Health and Disability Statistics Branch will give you an overview of the changes to the health insurance questions on the CPS ASEC. And she will provide information about our releases on health insurance.

After Marina I'll talk about some of our upcoming data releases. And we'll have some time for questions and discussions at that point.

As Michael said we'll take a break between 10:45 and 11:00. And after the break we'll hear from Stephen Blumberg from the National Center for Health Statistics.

Stephen is the Associate Director for Science in the Division of Health Interview Statistics and he will talk about some of the recent data from the Health Interview Survey.

And then we'll have Alfred Gottschalck the Assistant Division Chief for Small Area and Longitudinal Estimates here at the Census Bureau. And Al will talk about our small area health insurance estimates for 2014.

After AI we'll have another opportunity for questions. And then we'll conclude the meeting. With that I'll turn the podium over to Ed.

Ed Welniak: Good morning everybody. I am as billed Ed Welniak, Chief of the Income Statistics Branch. And I'm going to talk to you this morning about the current population for surveys 2014 Annual Social and Economic Supplement or the ASEC and the 2013 estimates we released last year.

These are the topics I'm going to cover today. We're going to talk about the 2014 ASEC split panel design, give an overview of the instrument changes we made in 2014.

We're going to look at the source of last year's income estimates. And I'll finish talking about the research we conducted over the past year.

Let's start with why we had the split panel in the 2014 ASEC. Census periodically conducts research to show how well our survey performs.

This research usually involves looking at how the survey data compares to independent sources usually administrative benchmarks. Our most recent evaluation looks at data collected back and compared to benchmarks to 2007.

These evaluations have shown survey estimates consistently lower than our benchmarks. In 2011 the Census Bureau contracted Mathematica and (West Start) to further evaluate the performance of the ASEC questionnaire.

Based on their research findings in a series of cognitive interviews to find ways to improve the data and the data collection we conducted our first field test of the new income questions in March of 2013.

That test used telephone interviews of retired ASEC sample of approximately 23,000 addresses. Based on the encouraging results from those we saw amounts increase and the number of recipients increase. We decided to do a split panel full production sample to further evaluate the redesign.

The split panel approach subsampled addresses of the 2014 ASEC. About 30,000 addresses were randomly assigned to be eligible to receive the redesigned questionnaire.

The remaining sample of about 68,000 addresses were eligible to receive the traditional questionnaire.

Let me list how the redesigned different from the traditional questionnaire. I'll go over each of these in more detail after going through the list.

It used a dual pass approach for identifying income recipients and income amounts that is all information was collected about (recipientcy) before any amount questions were asked.

It used three tailored skip patterns. It used income range follow-ups for don't knows and refusals. It asked more questions about different property and retirement amounts and from other interest earning assets.

It had new questions about retirement account withdrawals and distributions. And it had more detailed survivor, disability and retirement questions.

It also removed an income screener. The traditional ASEC asked households with less than \$75,000 about means tested transfer of programs such as food stamps and general assistance.

There was evidence that the traditional questionnaire was inappropriately screening out some households that may be eligible for those programs.

This could happen if there was a nonfamily member in the household that could be receiving those benefits or if the family's current economic situation at the time of the interview didn't reflect their economics during the previous calendar year.

The redesigned instrument now asks all households regardless of income all the transfer program questions. Let's take a look at these changes in more detail.

The traditional questionnaire used an interleaf design where income receipt was immediately followed by amount questions.

The redesign uses the dual pass approach. Here you can see how it worked with Social Security as an example.

The first pass identifies all income sources received in the household. The second pass collects income amounts for each of the sources received.

A tailored skip pattern used known characteristics of the household to ask more relevant questions earlier in the interview and to help reduce respondent fatigue and keep the questions relevant.

The three skip patterns were for lower income households which prioritized questions on means tested programs such as public assistance and food stamps.

Here an income screener was used but only to identify this as a lower income household. All the questions were still asked.

Household the second one was households with a member age 62 and older which prioritized disability and retirement questions.

And the third was the default which was used if it was not a low income household or if there were no member 62 years older over. It closely reflected the traditional incomes question order. All questions again regardless of household composition were asked just in a different order.

The redesign also used unfolding range follow-up questions any time a respondent didn't know or refused to give an amount.

The unfolding aspect was for respondents was initially selected if the lowest range was used then a follow-up question was asked to further refine their income.

The income amounts presented in the range questions depended on the source of the income. The redesign used a high, middle and low ranges based upon the type of income. This slide shows the sequence of range questions again using Social Security as an example.

The objective of the income range question is to reduce the amount of nonresponse by allowing respondents to provide a less precise answer.

To better capture retirement income the redesign specifically asked about both traditional pensions that is sometimes referred to as defined benefits and retirement account sometimes referred to as defined contribution such as IRA, 401 or other accounts designed specifically for retirement savings and it also asked about annuities.

The traditional ASEC used one broad question that combined pension, retirement and annuity income.

If the respondent had a retirement account the redesign asked the respondent to identify the specific types of retirement accounts and whether there were any withdrawals or distributions from those accounts.

Questions on withdrawals and distributions from retirement accounts were totally new in the redesign. There were no comparable questions in the traditional ASEC.

The new questions asked an account type. And it use that account type fill to use the exact wording the respondent gave for easier identification.

For respondents over 70 the redesign question change the text to reflect the fact that many would be required to take a distribution or a withdrawal. It would add the phrase including distributions you may have been required to take.

All withdrawals were followed up with questions asking if the money was rolled over or reinvested into another account which would then not be counted as income for that year.

To better cash capture asset income interest and dividend income received on retirement accounts was asked separately from non-retirement accounts.

The questionnaire made no distinction the traditional questionnaire made no distinctions between investment income received in a retirement account and investment income received outside of retirement accounts.

New also in the redesign for people who refused or didn't know the amounts that they received in interest income or property income were questions that asked the total value of the account at the end of the year.

Interest earning checking accounts, savings accounts, money market funds, CDs, saving bonds and shares of stocks in corporations or mutual funds are all types of nonretirement accounts

The redesign asked a series of questions specifically about each of these sources of income. Respondents with shares of stocks in corporation or mutual funds were asked follow questions about receiving the receipt of dividends or capital gains.

No questions on capital gains were asked in the traditional ASEC. Capital gains are not included in the traditional definition of income nor in the income definition using the redesign.

So these are the changes that the redesign income questionnaire had. The 2014 ASEC gave us two samples and two sets of income and poverty estimates for calendar year 2013.

So just to remind everyone what we released last year. All of the 2013 and 2012 income and poverty estimates in last year's report were derived using the traditional income questions and the existing processing system designed for those income questions.

This preserved continuity between the two years a strictly apples to apples approach to comparing estimates and a consistent way to measure change between the two years.

We will do something similar this year however we will be using the consistent redesign income questions and the existing processing system.

Let me add that all of our estimates from all of the samples and subsamples were each based on weighted results to be nationally representative of the total US population.

Since the release of last year's report we've been busy conducting research and evaluating the results from the split panel.

A good part of analyst time over the past year was spent adapting the existing processing system to work with the redesign questions.

We have now completed that task and have also done some comparisons of income estimates derived from the traditional questionnaire and estimates from the redesign questionnaire. These next slides show what we found.

This table shows the overall effect on median household income and the percentage difference between the redesign and traditional ASEC estimates by a few selected characteristics of households. All results shown are statistically significant at the 90% confidence level.

Other characteristics we typically examine from year to year showed that none has statistically significant lower medians as a result of using the redesigned questions.

This graph shows (recipientcy) by source of income for people age 15 years and older. Here we show the number of income recipients by income source when using the traditional questionnaire shown in green on this slide and the number from the redesign shown in purple along with the percent difference.

A goal of the redesign was to increase income source reporting using the dual pass approach of identifying all sources of income before asking amounts and using tailored skip patterns to ask more pertinent sources of income earlier in the interview based on household composition.

With the exception of workers compensation all income (recipientcy) was higher or not statistically different in the redesign.

The increased (recipientcy) of all these types of income resulted in some lower means by income source but increased aggregates overall.

Another goal of the redesign was to make the reporting of retirement income more current by adding new questions on retirement accounts.

Here we see more retirement (recipientcy) from both pensions and retirement accounts. Targeting retirement account income with expanded questions resulted in an over 400% increase in people that received those types of incomes from IRAs, Keoghs or other types of defined contribution plans.

Using the same color scheme here we see the changes in aggregate income by source. Aggregate income was higher in the redesign for all the same sources of income that had higher (recipientcy) except for dividends.

One of the focuses of the redesign was to improve the reporting of means tested income by removing the income screener, tailoring the income questions for low income households and using the dual pass approach.

Public assistance aggregate income was up nearly 30% in the redesign compared to the traditional questions.

Aggregate interest income nearly doubled actually more than doubled and dividend income was slightly lower 20% lower.

This is likely a result of the redesigned questionnaire better classifying what constitutes dividend income separating interest or capital gains. Collectively interest and dividend income was nearly 54% higher in the redesign.

Here we can see what happened to income overall. Total aggregate income from all income sources was 4.2 higher in the redesign.

Let me also add some perspective here with regard to income sources. While every income source is in fact important we need to keep in mind that most income comes from earnings that is from wages and salaries or self-employment income.

Earned income accounts for almost 76% of all the income collected in the ASEC. There was no change in the earnings questions in the redesign and not surprising there were no statistically significant differences between the traditional and redesign for (recipientcy) or aggregate income earned while the total for all other income sources combined increased almost 13%.

As I just showed you there were notable differences between the income estimates for each of the questionnaires and keeping the estimates separate when making historical comparisons must be considered.

However in keeping them separate sample size is reduced and sampling variability increases. Some researchers have expressed concern about not having the full 2014 CPA - CPS ASEC available for their research.

Our next speaker Trudi Renwick will talk about an attempt to create a combined income consistent file. Also we have an online link to a research paper that discusses that whole effort.

So to summarize the redesigned ASEC showed increases in household medians, income (recipientcy) and income aggregates.

The redesign questionnaire also seemed to improve the reporting for select targeted income sources such as public assistance, retirement and asset income.

That concludes my presentation on income. Next Trudi Renwick will talk about the impact the redesign had on poverty estimates and how we're preparing for this year's release. Trudi?

Trudi Renwick: Thanks Ed. I'm Trudi Renwick. I'm Chief of the Poverty Statistics branch here at Census Bureau. And I'm - as Ed said I'm going to talk about two different things.

I'm going to compare the 2013 poverty estimates from the sample with the traditional questions to the poverty estimates from the sample with the redesigned questions.

And then I'm going to do a little preview of what we or a discussion of what we've been released yesterday and today and what we will be releasing on September 16.

So as Ed noted as a result of the split panel in 2014 we have two sets of poverty estimates for 2013. The estimates from the traditional sample and the estimates from the redesigned sample.

Last year in our report we compared 2012 poverty to 2013 poverty using the sample that received the traditional income questions.

On September 16 we will be releasing our new 2014 poverty estimates. And the comparisons in that report will be to 2013 estimates from the redesigned sample.

So let's take a few minutes then to examine what are the differences across these two samples. For the overall poverty rate the official poverty estimate released last September was 14.5%.

If we use the sample with redesigned income questions the overall poverty rate is 14.8%. The difference between these two poverty estimates is not statistically significant.

You might note though that there is a higher standard error with the estimate from the redesigned sample because that was a smaller sample.

Besides the overall poverty rate most differences in the poverty estimates between the sample with the traditional income questions and the sample with the redesigned income questions were not statistically significant.

There were a few exceptions. We found lower poverty rates for Blacks and people who work less than full time year round with the redesigned question. And we phone higher poverty rates for children, Whites, Asians and people in the Midwest with the redesigned questions.

Let me just take a few minutes to go over some of these details. In the next sequence of slides I will show you the difference in poverty rates for the specific demographic subgroups.

I will focus on differences in poverty rates across the two samples emphasizing the few that have statistically significant differences.

The green bars show the poverty rates in the sample that received the traditional income questions and are the same as the rates that were published last September in our official Income and Poverty Report.

The purple bars show the rates for the sample that received redesigned income questions. The rate that will be showing in our report next month for 2013.

The poverty rate for children under the age of 18 was 21.5% in the sample with the redesigned income questions, 1.6 percentage points higher than the rates of children in the traditional sample.

The difference for those aged 18 to 64 and the population age 65 and older were not statistically significant.

Looking at poverty rates by sex while women had a higher poverty rate than men in both samples the difference across the two samples were not statistically significant.

The slide looks at poverty rates by race. Here there were a few differences. Poverty rates were higher for Whites and Asians in the redesigned sample but two percentage points lower for Blacks.

Here we see poverty rates by nativity and citizenship. Across the two samples the differences in poverty rates for these groups were not statistically significant.

And in this slide we're looking at poverty rates by region. The poverty rate for people living in the Midwest was one percentage point higher in the redesigned sample than is on the traditional sample. For the other regions the differences were not statistically significant.

And here we're looking at poverty rates by place of residence. Again in this case the differences across the samples were not statistically significant for any of these categories.

This slide looks at poverty rates by disability status for people age 18 to 64. And you can see that there were no significant differences here as well.

And finally looking at poverty rates by work experience here the only significant difference were for people who worked less than full time year round. Their poverty rates were 1.7 percentage points lower in the redesigned sample than in the traditional sample.

Since October 2011 the Census Bureau has been releasing an alternative National Poverty Estimate the Supplemental Poverty Measure.

Based on a series of suggestions from interagency technical working group the new measure creates a more complex statistical picture incorporating additional items such as tax payment, work expenses, medical out of pocket expenses and the value of non-cash governmental assistance such as SNAP benefits and housing assistance in the resource measure.

The thresholds are estimated by the Bureau of Labor Statistics. And are derived from the Consumer Expenditure Survey adjusted for geographic differences in the cost of housing.

Last October we released SPM estimates using the data from the sample drawn from the 68,000 addresses eligible to receive the traditional income questions. The overall SPM rate was 15.5%.

Using the sample with the redesigned income questions the overall SPM rate was 15.8% not statistically different from the rate in the traditional sample.

There were a few demographic groups that had significant differences like the official poverty - rate children under age 18 had a higher poverty rate.

There were also higher poverty for owners with no mortgage, people - and lower poverty rates for people living in the West and those who worked less than full time year round.

Should note that in addition to the redesigned income questions there were also changes in the way that the Census Bureau collects and processes data a medical out of pocket expenditures.

The estimates in the - the SPM estimates in the traditional sample was based on the old processing system for medical out of pocket expenses.

The estimate from the sample eligible for the redesigned income questions reflects a new processing system for medical out of pocket expenditures.

Let me switch gears now a little and talk about what we released yesterday and today. All of what we released - our estimate for 2013 from the 2014 CPS ASEC.

Yesterday we put up a full set of detailed income and poverty tables with estimates for 2013 from the redesigned sample.

You see here the screenshot of our poverty table of contents and you'll see that for every detailed table they'll now be two choices for 2013 either the estimates from the traditional sample or the estimates from the redesigned sample. And the income detail table will be similar - are similar to these.

Today I think last we heard was at 10:00 AM they're going to be releasing the 2014 CPS ASEC public use file for the sample that was eligible to receive the redesigned income questions.

And also today we will be publishing SPM Research File for the redesigned sample for reference year 2013.

As Ed mentioned - the also been busy doing research on what - how could we combine these files to create a full 2014 CPS ASEC sample with consistent income estimates?

To do this we viewed statistical techniques to model values for three income sources retirement income, interest and dividends in a sample that received the traditional income questions.

We chose these three income sources because they were the sources with the largest differences between the two subsamples.

When we ran the statistical model ten times and the file will include results of all ten rounds of the model so that researchers will be able to estimate the increased variance in the estimates due to these additional imputations.

As Ed noted and that the - you have the link from his slide there's a working paper that was presented last month at the Joint Statistical Meeting and posted on our Web site which provides the details of this model that we ran and the results from this model.

That file should be posted in the next couple of weeks. And I've provided here the link of where you'll be able to find that file once it is posted but it will not be posted today.

And of course September 16 is our day for our official release of the Income Poverty and Health Insurance Report. We will be releasing two income and poverty reports on September 16.

For the first time ever we will be releasing the Supplemental Poverty Measure on the same day as the official poverty measure.

On the first report Income and Poverty in the United States 2014 as we've mentioned before will compare income and poverty estimates for 2014 to 2013 using 2013 estimates from the sample with the redesigned income questions.

We also have two appendices in this report. One will compare income and poverty estimates from the traditional sample to income and poverty estimates from the redesigned sample. Extended version of what you've seen today in these slides.

And we will also have an appendix that compares income and poverty estimates from the redesigned sample for 2013 to the income and poverty estimates from the income consistent research file that we'll be releasing in the next few weeks.

We hope that these tables will help analysts and researchers bridge the estimates across the redesign of CPS ASEC.

And then the SPM report which will for the first time will be issued on the same day will also use the redesigned sample for its 2013 estimate. And we'll be comparing 2014 estimates to these 2013 estimates.

So just to give you a little - this is what the tables will look like in the report. We've blanked out the now I know a lot of you would like to see those 2014 numbers but we blanked those out.

But these 2013 numbers are the same as what we released yesterday in the detail tables. And those will be the basis for our comparison for all income and poverty estimates in the September release.

Our historical tables that will be released in September will as we've done before have two entries for 2013. One entry from the traditional sample and one entry to from the redesigned sample with appropriate footnotes explaining which is which. And of course in September we'll have numbers for 2014 as well.

We also have online a Web based tool called Table Creator that folks can use to create their own custom tables.

Using this tool one can create a single year or multi-year averages for poverty, income and health insurance estimates crossed by geography and crossed by a number of different demographics and characteristics.

On September 16 we will release an update to the Table Creator which will have a feature that will allow you to select among the three files for the 2013 data.

You'll be able to choose the traditional income questions, the redesigned income questions or a combined file for health insurance estimates which Marina will discuss in a moment.

The tool also has error messages so that -- and will warn you if they're trying to compare files that are not comparable.

For example if you try to create a two year average between 2014 and 2013 using the 2013 estimates from the traditional sample you'll get an error message saying that these two files are not consistent and should not be combined that you should be using the 2013 data from the redesigned if you want to do this two year average.

So hoping that that will be useful to people who want to do tables beyond what the tables that we publish.

We will also be releasing the 2015 CPS ASEC public use file what we call the early version of that file so it will not have taxes or non-cash benefits. Those will be released later.

We also later will be releasing in SPM research file for the 2015 CPS ASEC which will have SPM estimates for 2014. But that will not be released on release day.

I want to also talk a little bit about what we're not releasing on September 16 just to give people a heads up.

Traditionally both income and poverty produce multi-year tables for state level estimates and for estimates by race and Hispanic origin. These tables will not be updated until next year when we have three years of consistent data.

We will however on September 17 the day after be releasing one year ACS data. And that will provide single year income and poverty estimates for states and for smaller racial groups.

Just to recap looking at the differences in poverty rates for the total population from the two samples we did not find statistically significant differences.

And even digging down into specific demographic and geographic groups we found very few statistically significant differences across the two subsamples.

This week we've released detailed tables for income and poverty for 2013, the public use file using the redesigned sample for 2013 and the SPM Research File.

Coming soon will be the Income Consistent Research File. On September 16 we'll be releasing both the official and the SPM poverty reports on the same day and just to emphasize the year to year comparisons in that - in those reports will use the sample with the redesigned questions for the 2013 estimates.

Thank you. Here's my contact information if you have any more questions. And I will turn it over to Marina to discuss health insurance.

Marina Vornovitsky: Hello. My name is Marina Vornovitsky. And I'm the Chief of the Health and Disability Statistics Branch.

Today I'm going to give you a recap of what we released last year. I will also discuss the new CPS ASEC health insurance baseline and talk about what you can expect in the upcoming Health Insurance Coverage Report to be released in September.

As you just heard last year we made some changes to the income section of the CPS ASEC. These redesigned questions were administered to the entire - to a portion of the sample while the rest of the sample received traditional income questions.

Changes made to the health insurance section were different in both the scope and the purpose. In particular last year they implemented a complete questionnaire redesign. This change was based on over a decade of research and was meant to correct known issues with health insurance coverage data.

Also we knew that we had to establish a very strong baseline for measuring changes between 2013 and 2014 when many major provisions of the Affordable Care Act were to go into effect.

Having such a baseline was particularly important given the unique ability of the CPS to provide estimates of health insurance coverage for some of the smaller groups that are typically not measured at the same level of precision by other sources of health insurance coverage data.

For these reasons unlike the redesigned income questions these new health insurance questions got administered to the entire CPS ASEC sample.

This infographic further illustrates the importance of having a strong baseline in the CPS. As you may know health insurance coverage data are collected by multiple surveys some of which are listed here.

However the relative strengths of the CPS is that it produces national level estimates for a wide range of demographic and economic characteristics.

Very importantly the CPS ASEC helps to view changes in health insurance coverage in relation to changes in the overall economic well-being of the nation.

The change that we - so what are some of the issues does the CPS health insurance coverage before the redesign.

Here you can see both the CPS and the ACS produce uninsured rates that track closely over time. The blue line is the CPS ASEC uninsured rate and it represents the percentage of people who had no health insurance coverage at any point during the previous calendar year.

The green line is the ACS uninsured rate. And it is a measure of the percentage of people who were uninsured at the time of the interview.

Someone is more likely to be uninsured now than to have had no health insurance coverage at any time during the previous year therefore one should see the green line above the blue line however the opposite is true here.

The take away here is that the CPS produced estimates that there were not in line with other sources of health insurance data.

To address this and other issues we implemented a new set of health insurance questions last year. The change that we made was not made lightly. This infographic details just some of the research and testing going back to 1998 that went into redesigning the questionnaire.

Throughout we followed a strict set of internal and external guidelines that ensure that any changes that we make have been implemented thoughtfully and carefully in a transparent fashion and in full public view.

So what makes these redesigned health insurance questions better? Well the redesigned health insurance questionnaire begins the conversation about health insurance by asking respondents about their current coverage situation and then uses the answers provided to obtain information on health insurance coverage during the previous calendar year.

In terms of plan types the instruments start this general coverage questions first and then drills down to specific plan types their different paths depending on respondent's early answers. This makes it cognitively easier for respondents resulting in more precise answers.

The instrument also changed from a household level design to one that helps us capture health insurance coverage for all members of the household.

We ask who else in the household has that plan type. And ask about all household members by name to address gaps in health insurance coverage.

The take away here is that the new questionnaire results in more precise measures of health insurance coverage, expands topic detail and improves respondents experience.

How well did these new questions work? From 2008 through 2012 you see the trends that I showed you before however in calendar year 2013 which was the first calendar year to reflect redesigned health insurance questionnaire.

The CPS uninsured all year estimate was lower than the ACS currently uninsured estimates as expected.

So far I have been talking about all the improvements that we made to the health insurance questionnaire last year. Let me switch gears now and remind you what we did about what we did in last year's release.

In the spring of 2014 we implemented the new set of questions. So all respondents in the current population survey received the redesigned health insurance questionnaire.

Then last fall they released a report on health insurance coverage that was based on data collected using the redesigned health insurance questions.

Last year was also the first year when we designed income questions that introduced to a portion of the sample. The rest of the sample received traditional income questions.

For consistency this income and poverty last year's report on health insurance coverage in calendar year 2013 was based on the portion of the CPS ASEC example that received traditional income questions. All estimates in the report were representative of the entire population of the United States.

So how is this year going to be different? Well as I just explained in calendar year 2013 and calendar year 2014 the entire CPS ASEC example received redesigned health insurance questions.

So this year we are going to use the full sample for calendar year 2014 estimates which is the red box on the right-hand side.

Also for comparisons to 2013 we are going to use the full sample for calendar year 2013 estimates. Using the full sample for calendar year 2013 means that we have an even stronger baseline for measuring changes in health insurance coverage due to the Affordable Care Act especially for some of the smaller groups.

For your convenience we have re-created our 2013 detail tables using the full sample. These tables are available on our Web site.

So what impact if any does using the full sample rather than a subsample have on the 2013 health insurance coverage estimates?

As you can see there is not much of an impact. The take away here is that the overall uninsured rate remains unchanged whether you use the subsample or whether you use the full sample.

The one issue is where you cross health insurance coverage for calendar year 2013 by income or poverty. In this case for our comparisons to 2013 we will use the subsample that received redesigned income questions in 2013.

So what can you expect from the upcoming release this September? In September we're going to release the report based on CPS ASEC data that shows national level estimates for wide range of demographic and economic characteristics.

The report will present statistics on health insurance coverage by in the United States in 2014 and also focus on changes between 2013 and 2014.

Here's an example of the type of information that you can expect to see. This table will show numbers, rates and change between 2013 and 2014 by type of health insurance coverage.

We're also going to continue to rely on the American Community Survey for state analysis. For example this table will provide numbers, rates and change in the uninsured rate by state between 2013 and 2014.

Let me summarize our release. We have produced new comparison tables for 2013 using the full sample.

We will rely on estimates from these tables when we make comparisons over time. These tables as well as tables that we released last year are currently available on our Web site.

In September we're going to release a report that presents statistics on health insurance coverage in the United States in 2014 and focuses on changes between 2013 and 2014.

We are also going to continue to rely on the American Community Survey for state analysis.

Also released on September 16 will be a public use file, details and historical tables and current health insurance coverage abstracts.

Finally data users who would like additional statistics will be able to create custom tabulations using the Table's Creator tool that truly Trudi mentioned earlier this morning.

This concludes my presentation. Here is my contact information. If you have any questions about upcoming releases feel free to contact me. Thank you.

Victoria Velkoff: So you can see that we've been pretty busy and a lot's been going on. I'm going to do a recap of the session this first session and then quickly talk about the data products and - that we'll be releasing and a schedule for that release.

As Ed described we made a lot of changes to the income questions in the CPS. The main changes are outlined on the left-hand side of this chart.

I'm not going to review them but we did find that the changes had the result that we expected that is median income - median household income was the same or greater using the redesigned income questions.

As Trudi explained we saw very little difference in the poverty rate between the subsamples with the traditional the redesigned income questions.

This slide shows some of those results and you can see that there was only a statistical difference for children.

So for this year's income and poverty report that we'll be releasing in September we will be showing two numbers for 2013.

The first set of numbers will be based on the sample that received the traditional income questions. These are the numbers to use when looking back in time and are represented in the dark blue boxes in this chart.

The second set of numbers for 2013 are based on the sample that receives the redesigned income questions. These are indicated in the light purple. And these are the data to use when looking forward.

Marina just went over the changes to the health insurance questions in the CPS in 2014. Note that these changes were implemented in the full sample and again the new question resulted in a lower percent uninsured which is what we expected.

As you've heard several times this morning last year's health insurance report was based on the proportion of the sample that received the traditional income questions. We did this to be consistent with the income and poverty report. And the red box indicates that proportion of the sample that we used.

In this year's report we'll compare 2014 health insurance coverage rates to 2013 health insurance coverage rates using different portions of last year's sample.

For most of the characteristics in the report the health insurance estimates will be compared to the full sample of about 98,000 addresses as indicated in these two red boxes.

Remember that last year the full sample received the redesigned health insurance questions so we would have a solid baseline for comparison with 2014.

However when we crossed healthcare by income or poverty we'll use the portion of the sample that received the redesigned income questions.

So for most of the report we'll be using the full sample for 2013 but when we look at health insurance by income and poverty we'll be using the sample of approximately 30,000 addresses that received the redesigned income questions. Note that this sample is nationally representative.

We have released or are about to release several additional products for income poverty and health insurance for 2013.

The first is material for this meeting which is currently up on our Web site. We also released table packages for 2013 income and poverty using redesigned income questions based on the sample of 30,000 addresses.

We released select 2013 health insurance coverage tables most using the full sample. And we released a public use file with the redesigned income questions based on the sample of 30,000 addresses.

We also have several upcoming releases the first is on Wednesday, September 16. We will release three reports on that date Income and Poverty in the United States in 2014, Health Insurance Coverage in the United States in 2014 and for the first time the Supplemental Poverty Measure in 2014 releasing that the first time on the same day as the official poverty measure.

We'll also have a Web cast at 10 o'clock that day where we'll go over the main results of these three reports.

In addition we will release detailed tables for income, poverty and health insurance for 2014. We will also release a public use data file. And we'll release our measure of current health insurance coverage with the National Center for Health Statistics as we did last year.

Then the very next day on September 17 we'll be releasing the American Community Survey's one year data for nations, states and all geographic areas over \$65,000.

Finally we will release the income consistent research file based on the full sample and modeled income that Trudi talked about.

We will also again be releasing table packages based on other topics such as families and migrations based on the CPS.

And as you'll hear later from Al this morning we'll be releasing our Small Area Health Estimates for 2014.

As I said on September 17 we'll be releasing the ACS one year data products. This picture illustrates what you can expect to see in this release with its much larger sample size the ACS provides statistics for subnational geographies such as states, counties,

metro areas, congressional districts and cities. This level of geographic detail is not available from any other survey.

For more information on income and poverty you can go to our topic page on income and poverty and this is a screenshot of that topic page.

For more information on health insurance you can go to our health topic page and this is a screenshot of that page.

Here's my contact information. And now I'm going to turn it over to Michael to moderate the questions.

Michael Cook: Thank you Tori. And just as a quick reminder you can see it on the screen the dial in number 1-800-857-4620 passcode 9912525.

And also a quick reminder before you state your question if you could please mention your affiliation and your name. Operator do we have any questions on the phone?

Operator: On the audio portion if you'd like to ask a question please press Star 1. One moment please.

Michael Cook: And I'll ask also if we have any questions from those in the room. If you do just raise your hand and we'll get a microphone to you or I'll ask you to speak into the microphone on the table so that the listeners online can hear your question as well. Thank you.

Stan Zalapko: This is for Marina Vornovitsky. I work at the Census Bureau. I saw where the change in the question put the CPS more in line with the ACS but I was just wondering if there was a quick reason for why the CPS question that should have yielded a lower insured rate than the ACS was giving a higher one?

Marina Vornovitsky: You are asking why the CPS estimates is lower than the ACS estimate.

Stan Zalapko: In the plot with the blue and green line where the way the CPS question was asked should have yielded a lower uninsured rate than ACS but it was giving you a higher one, is there a quick answer for what was going on there or...

Marina Vornovitsky: So for why should have been lower?

Stan Zalapko: Not why it should have...

Marina Vornovitsky: Why it was higher?

Stan Zalapko: ...we do have to figure out why it was higher even though it should have been lower.

Marina Vornovitsky: Well we there a number of - there were a number of issues with the CPS ASEC health insurance questionnaire.

And I can direct you to some to a lot of research papers that, you know, have been done over a decade just looking at some of the sources.

So in particular they may have missed some household members when we asked about health insurance coverage. And that was one of the changes that we made. We started asking about household members by name to make sure that we - to make sure that, you know, if somebody was not mentioned we followed up and asked well what about this person essentially to make sure that we didn't miss anybody and that had an impact.

But I would certainly be happy to direct you to research papers detailing some of the issues with the CPS ASEC we designed the CPS ASEC questionnaire.

Stan Zalapko: Okay, thank you.

Michael Cook: Thank you for that. And we have another question in the room?

Donald Larch: I'm Donald Larch in HHS. I had a couple of questions one is that Trudi and others have mentioned that the SPM is going to be released the same day as the official which I think is wonderful. Thank you for getting that cooked up and out.

But the SPM does use the in kind in taxes but you said that, that data will not be available on the micro data. When will it be available?

Trudi Renwick: We don't have a specific date yet. We, you know, historically have put that data out in October sometimes as late as December. It'll certainly be sooner than that this year but we don't have a specific date for you yet.

You will have - and at the same time we'll point out that SPM research file so that you can also replicate the SPM estimates.

But again and we prioritized getting the report out on the same day and hopefully in future years we'll be able to put it all out on that day.

Donald Larch: Donald Larch from HHS again. So this question is about the health insurance redesign and an update on where you are on processing system in terms of releasing the full set of health insurance data that's being collected rather than collapsing it back into the old category.

Marina Vornovitsky: Well they're certainly working on it. As we hope to have more information after the September release but, you know, it is certainly being worked on.

The new instrument it is a very complex. It provides a lot more details. So they certainly want to make sure that we do a good job in terms of providing quality statistics. But it is being actively worked on and we'll share more information once we have it.

Michael Cook: Thank you. Any more questions in the room? And we'll check with the operator.
Operator any questions on the phone?

Operator: Yes sir I have two. Our first question is from Danilo Trisi from Center on Budget and Policy Priorities.

Michael Cook: We're running a little ahead of schedule. I know that we have mentioned it a number of times and it should be ingrained into your brains but I just wanted to take time to remind you yet again about some upcoming releases so that you can stay tuned for it and also to point you to things that are on our Web site that can be seen as resources.

If you navigate to census.gov on our homepage you'll see a slider at the top of the page. At that slider there is an image directing you to today's Web cast...

...to remind folks that are paying attention online that if you miss something you'll be able to see the archived version of the Web cast on our use screen channel, as well as on our Census Live page as well as all the documents the background information that supports the information that's being shared today. So we'll check.

Operator: Sir we do have a question from Danilo Trisi, Center on Budget and Policy Priorities.

Michael Cook: Thank you.

Danilo Trisi: Thank you. So the question is for Trudi. Given what you've learned creating the income consistent file would you say that kind of poverty estimates for 2014 are fairly comparable to 2012 and earlier despite their redesign and income questions?

Trudi Renwick: Well what we're suggesting to people is that they make comparisons with caution. That they - we're providing the comparisons between the traditional file and the redesign file so people can see.

As I noted overall there were no differences. For many specific groups there were no differences. But if you - you should look and study those comparisons and use those to assess whether or not it's reasonable to make a comparison to earlier years or not.

Danilo Trisi: Okay. And can I do a follow-up question?

Trudi Renwick: Sure.

Danilo Trisi: And you're - this year you will not be releasing kind of the three year SPM the average the SPM tables for states that use three years of SBM data so that will be next year. Will you advise users to not try to do that to create SPM estimates for states?

Trudi Renwick: Well we're not going to do it.

Danilo Trisi: Okay. Yes.

Trudi Renwick: And so I would say we're probably taking the more conservative tact and saying that we are not going to combine those files and do three year estimates.

We will be providing you with all the data that you need to do a combined estimate but also to look at the SPM estimates from the traditional sample and the SPM estimates from the redesigned sample and look at it at the state level..

Danilo Trisi: Yes.

Trudi Renwick: ...to see how many states there are statistically significant differences and how many states there are not. And that could perhaps guide you as to whether...

Danilo Trisi: Okay.

Trudi Renwick: ...if not it would be wise to do that three year average.

Danilo Trisi: Okay. Thank you.

Operator: And our next question is from Pam Fessler from NPR News.

Pam Fessler: Yes, Hi Trudi. Actually the previous question or pretty much asked my question. And its how - I mean obviously when we get the 2014 poverty number people are going to want to compare it to like five years ago and ten years ago.

So when you say to do it with caution are there certain qualifiers that you think we should use? And also wanted to know is that only at the national level or when you are also talking about comparing poverty rates for some of the subgroups?

Trudi Renwick: So we - as I showed you on the text that there weren't statistically significant differences between across the two samples for the national poverty rate.

And so that would indicate that it would, you know, that making comparisons to earlier years for that overall national poverty rate you're probably okay.

We've done methodological changes in how we calculate poverty many times since 1959. And we continue to make comparisons, we've changed the thresholds, we've changed some of our definitions of unrelated individuals.

You can go through the footnotes on our historical tables if you want the gory details. So I would say at the national level both comparisons are fine.

It's when you get into smaller demographic subgroups that I would urge people to look at that appendix table and to see whether it's okay or not to make those comparisons.

Pam Fessler: Okay. Thank you.

Operator: I'm showing no further questions on the audio portion.

Michael Cook: Thank you operator. Are there any additional questions in the room? Go ahead.

Joe Dalaker: Hi. This is Joe Dalaker, Congressional Research Service. My question is you've done - you've with the redesigned questions you've been able to do a better job of identifying sources of income and yet I see that the poverty rates for certain groups have increased under the redesigned sample.

One would normally think that if you're discovering more sources of income that poverty would be lower. Do you have any additional thoughts on how - what's sort of going on behind the scenes there?

Trudi Renwick: Well I would direct you to look at a paper that my colleague Josh Mitchell and I presented at the American Economic Association in January where we looked at that question.

Short version of it is when we looked at the bottom quintile the bottom 20% of the income distribution we did not find the increases in income that Ed found at the medium or Ed found in the aggregate numbers.

So however the questionnaire was doing a better job of collecting income overall for the total population we did not see evidence of that in the bottom of the distribution.

We also found some differences in sample composition across the two samples, you know, as most people may know they're nationally representative but those weights control for residents, for rates, for sex, for age they do not control for all characteristics.

And we actually found that the sample that received the redesigned income questions had three million more people living in single parent families than the sample that received the traditional questions.

And so when we - we did an analysis and found that, that explained about half the difference in child poverty rates. And we also found looking at those earnings again that earnings in the bottom 20% of the income distribution were actually down.

And those are - that's a question that didn't change but earnings were lower for the sample that got the redesigned questions and...

Josh Mitchell: Thank you.

Michael Cook: Operator do we have any more questions on the phone?

Operator: I am showing no further questions sir.

Michael Cook: And do we have any additional questions in the room?

Well we'll go ahead and take our 15 minute break and meet back at 10:30. I'd like to thank everybody for their participation in the event thus far.

((BREAK))

Michael Cook: Okay we're going to go ahead and get started. We're going to go ahead and get started. I'd like to welcome everyone back to the second half of our technical meeting on plans for the upcoming releases of income, poverty and health insurance coverage estimates for federal sources.

Our second half of the agenda consists of health insurance coverage estimates and other source information from Mr. Stephen Blumberg the Associate Director for Science in the Division of Health, Interview Statistics at NCHS.

And also, we'll hear from our own Alfred Gottschalck the Assistant Division Chief for Small Area and Longitudinal Estimates here at the U.S. Census Bureau.

So without further delay here is Stephen.

Stephan Blumberg: All right welcome back. Now we turn to the National Health Interview Survey. The National Health Interview Survey is conducted by the National Center for Health Statistics and is one of our principal sources of information on the health of the US population.

It provides estimates for monitoring progress towards public health goals and for addressing specific issues of current public health concern including the health insurance coverage of the US population and its relationship with health status and health care access and use.

Like the CPS the National Health Interview Survey the health household survey of the civilian noninstitutionalized population conducted by interviewers from the US Census Bureau.

The HIS however is a cross sectional survey which means that we generally interview each family only once.

Interviewing is continuous throughout the year with a goal of completing interviews in at least 35,000 households annually and often more if funding permits.

The National Health Interview Survey has been collecting data continuously since 1957. Questions about the health insurance coverage of family members have been part of NHIS since 1959.

The monitoring was periodic until 1968 then every two years until 1986 and annually since 1989.

Since 1997 which was the last time that the NHIS questionnaire was redesigned the health insurance section has begun with a general question about whether anyone in the family is covered by any kind of health insurance or some other kind of health care plan.

If so then we ask what kind of health insurance or health care coverage each family member has. For each type of coverage we then ask a series of detailed questions about that coverage.

So examples include questions about how the plan was obtained, who pays for it, whether it's a high deductible health plan and whether it has managed care features.

And then we collect the full names of all private and public plans preferably from a health plan card or other communication from the health plan.

Health insurance as most of you know is a complex topic. Some inconsistencies in survey response are expected therefore before producing statistics on coverage the NHIS looks at the responses to the entire battery of insurance questions.

If the follow-up questions clearly suggest that the original coverage type recorded was incorrect the follow-up questions are then used to assign the coverage type.

Now before I go further I want to highlight several strengths of the National Health Interview Survey health insurance data.

The NHIS data are collected in the context of extensive data on the health and healthcare of the individual. We collect extensive follow-up data including plan names to help us verify public or private coverage.

And because we have been - and because the data has been collected using the same general approach since 1997 observed changes in coverage over time can be considered reliable.

We also have sufficient sample sizes to permit annual coverage estimates for a majority of states and in fact with 2014 data we were quite excited that it was the first time we had sufficient sample sizes to produce estimates for all 50 states and the District of Columbia.

This map showing state estimates of uninsurance from 20 using 2014 data was published this past June.

Dark green identifies the states with the lowest uninsurance rates Hawaii had the lowest percentage of uninsured individuals under age 65 in 2014 followed by Massachusetts, Delaware and Iowa. The District of Columbia also had a similarly low uninsurance rate.

The dark purple show the states with the highest uninsurance rates for persons under age 65 in 2014. The highest rates were observed in Texas and Oklahoma followed by Alaska and Florida.

Now as I mentioned the National Health Interview Survey is conducted continuously throughout the year and that's based on monthly random samples.

We take the 12 monthly samples over across the calendar year, aggregate them together into annual data files and after processing and weighting release those files in June of each year so 2014 data were released just this past June.

And we recognize however that for key topics health insurance included many people want to see preliminary early data from the National Health Interview Survey.

And with that goal in mind the National Center for Health Statistics developed the HIS early release program.

Through this program early release products are developed to provide early access to the most recent information.

Now these products are produced prior to final processing and weighting and therefore the estimates that are in these reports can best be considered preliminary. I'll talk a little bit more about that in a moment.

Turning back to what exactly the program produces every three months the early release program produces a report on 15 key health indicators, a report on health insurance coverage, Web tables that present quarterly health insurance estimates and also we release through our research data centers preliminary micro data files that are used for these reports so that other researchers may be able to analyze the data themselves.

The early release health insurance estimates represents an average over the months included in the report.

They are in that sense cumulative. So historically in September we have released estimates that are based on data collected from January through March.

Then in December we've released data collected or data from the first six months of the year, in March 9 months and in June the full 12 months of the year.

However with funding and encouragement from the Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services we have been working to improve the timeliness of our releases. And in fact the release from the first three months of 2015 came out two weeks ago on August 12, 2015.

We anticipate that across, you know, for the next three reports that we will be releasing them roughly a month ahead of our historic schedule that is that the January to June data will be released in November, the January to September data will be released in February and the full year data will be released in May that's for health insurance estimates only.

Again the full year 2015 data sets and reports based on that for other than health insurance we anticipate coming in June 2016.

Now this slide shows the first page of the report released two weeks ago based on data from January to March 2015.

Those of you who are familiar with our reports may notice that we changed the format. The new report has more figures and less text but all of the estimates that were included in early reports are still there they're just now in there as appendix tables.

The big highlight from this report was that seven million fewer persons lacked health insurance coverage in the first three months of 2015 compared to 2014.

This estimate is a point in time estimate reflecting reports of insurance status at the time of interview. Most of the estimates in the report are point in time estimates but we do present three different uninsurance measures a point in time, and estimate of uninsurance at some time in the previous 12 months and an estimate of the percentage of persons who have been uninsured for more than one year.

As you can see on this slide since 2013 the percentage of uninsured has decreased for all three measures of the uninsured.

Now getting back to the point in time uninsurance estimates I want to show you a selection of figures from this report that was released two weeks ago.

So this graph shows changes in the uninsurance rate point in time uninsurance rate by age. You can see that the prevalence of uninsured adults has recently decreased for all age groups.

The decrease occurred for all income groups though more sharply for near poor adults. That is adults living in households or living in families with incomes between 100% and 200% of the federal poverty level. And recent declines were steepest for Hispanic and non-Hispanic Asian adults.

The report also presents estimates of private and public insurance for adults shown here and for children.

Note that among children under age 18 the percentage with private insurance increased from about 52% in 2013 to 56% in the first three months of 2015 reversing a 14 year trend of declining rates of private coverage for children.

Newly released reports also present the percentage with private coverage obtained through the health insurance marketplace or state based exchanges.

This percentage has increased from the first quarter of 2014 to the fourth quarter of 2014 and again in the first quarter of 2015.

As I said that's just a selection of some of the figures that are presented in our early release health insurance report.

Some of the other information that's in there includes the percentage of persons in high deductible health plans.

They're also are several figures representing subnational coverage estimates for instance by region, by state Medicaid expansion status and by state health insurance marketplace type.

We also present estimates for selected states though in the recent report there are no state estimates because sample size is just not sufficient after three months of data collection to present state estimates.

But the November and the February reports we anticipate we'll have estimates for probably ten to 12 states and then for the May report we hope that with the full year 2015 data we will again be able to present estimates for all 50 states and the District of Columbia.

Now as I mentioned before the health insurance estimates that we present in the early release reports are preliminary and that's because they're based on a streamlined version of the final processing procedures.

They're more automated than the manual checks that we do through all the follow-up data when we're doing final processing.

They're also based on the prior year's list of health insurance plan names though we do update with the latest exchange plans for the August release.

And we also don't attempt in the early release reports to distinguish between individual types of public programs so for instance trying to distinguish between Medicaid and the Children's Health Insurance Program.

Despite the fact that these estimates are preliminary there are generally close to the final estimates. Our comparisons indicate that they are within .1 percentage point of for the proportion of uninsured and within, you know, two or 3/10 of a percentage point for estimates of private and public coverage.

So what's coming? Well next week on September 1 we will be releasing our report on the 15 key health indicators based on data from the first three months of 2015.

Now one of those key health indicators is health insurance but it is just a subset of the information that's in the report that we released two weeks ago. There's nothing new on health insurance in next week's report.

However next week's report does contain a number of variables that are related to health insurance. So for instance the proportion of persons who have a usual place for healthcare and the proportion of persons who have had financial problems obtaining care.

Then as you've heard on September or on September 16 jointly with the Census Bureau we will be releasing an updated comparison of the NHIS and CPS point in time estimates.

We did this last year comparing the estimates from the January through March NHIS to the CPS point in time estimates which are from February through April.

Last year we didn't find much in the way of significant differences. We'll be updating those estimates and roughly two weeks I guess it is.

And then as I've already mentioned the next early release of health insurance coverage estimates will be in November presenting data from the first six months of 2015.

If you're looking for these reports the best place to go is the National Health Interview Survey Web site. That address is at the top of this slide.

Typically you can find our most recent reports over in the What's New column on the right. But if you're - if it's not there or you're looking for an older report you can go where that red arrow is pointing on the left-hand side to the NHIS early release program, click there and you'll get to the early release program Web site. And the second bullet on that page refers to the health insurance reports.

Also if you want to receive announcements via email about our early releases and other HIS data releases you can join our Listserv using the address on this slide. Thank you.

Alfred Gottschalck: Good morning and thank you for taking the time today to meet with us. I am the Assistant Division Chief for Small Area and Longitudinal Estimates the area that oversees the Small Area Health Insurance estimates SAHIE program.

Today I would like to provide an update on the current SAHIE production plans concerning our next SAHIE release.

SAHIE is one of the estimates of health insurance that the Census Bureau releases. And for the 2014 SAHIE estimates we have some changes to consider and we would welcome your feedback.

First I would like to provide a brief overview of the SAHIE program. The Census Bureau releases model based health insurance coverage estimates for all US counties on an annual basis through the SAHIE program.

We also release health insurance coverage estimates for states as well with race and Hispanic origin detail.

We produce SAHIE estimates because they provide the only single year estimates of health insurance coverage for every county in the United States.

We use a model to produce estimates that typically have lower variances than the survey estimates. This past March we released the 2013 SAHIE estimates.

The SAHIE program is partially funded by the Centers for Disease Control and Prevention's, National Breast and Cervical Cancer Early Detection Program.

The CDC have a congressional mandate to provide such screening services through this program. The CDC has been a strong partner over the years and we are very grateful for their support.

In addition SAHIE data are also used by other government agencies and researchers interested in examining health insurance coverage.

SAHIE data represents ACS health insurance coverage estimates that are enhanced with administrative data to create the model based estimates of health insurance coverage.

SAHIE has used ACS data as a base since 2008 hence SAHIE reflects annual changes over time from 2008 to 2013.

SAHIE data can be used to analyze geographic variations in health insurance coverage across states and counties.

Furthermore SAHIE data can be used to examine differences in coverage by race or ethnicity, sex, age and income levels that reflect thresholds for state and federal assistance programs.

To demonstrate one of the key strengths of SAHIE data its geographic coverage please see this map. This map shows that shows the counties that are and are not published with 2014 ACS one year estimates.

The green areas are counties that are available with ACS one year estimates and the white areas are the counties not available via ACS one year estimates.

Given SAHIE's statistical power SAHIE is able to provide estimates for every county in the country on an annual basis.

ACS publishes one year estimates for geographies with population 65,000 or greater. This covers approximately 20%, 26% of all counties or 85% of the total population.

With five year estimates ACS provides data for all geographies. The next ACS five year release will occur this December and cover the period 2010 to 2014.

Several types of data are used to create SAHIE . The input for SAHIE are data from the American Community Survey both one year and five year estimates, data from Census 2010 as well as data from the Census Bureau's population estimates and County business patterns.

We also use other data in the model such as information from tax returns, supplemental nutrition assistance programs participation records and Medicaid and children's Health Insurance Program participation records.

So how does the SAHIE model work? We combined ACS one year published and unpublished estimates with model estimates using statistical techniques which weight the relative contribution of the two components based on their relative precision.

If the ACS estimate has a smaller variance for example due to a large sample size it contributes more to the final estimate. In this case the survey data have high relative precision compared with the model estimate.

Otherwise the model estimate has more weight since modeling produces more reliable and stable estimates we can publish one year SAHIE estimates for all counties every year.

Now I would like to discuss 2014 SAHIE in relation to the changing healthcare landscape. States can choose whether or not to expand their eligibility criteria for Medicaid participation.

For 2014 SAHIE we need to rethink the inputs. Typically the Medicaid data used in the model are lagged by a few years.

For instance the SAHIE estimate that we released this past March used Medicaid data from 2011. We used lagged Medicaid data because it is a later latest data set available that has all the information we need for the model.

For the 2014 SAHIE estimates we used lagged Medicaid data using for 2014 SAHIE estimates using lagged Medicaid data may present an issue.

Obviously using 2012 Medicaid data to model health insurance for 2014 may be a problem. We expect that health insurance coverage will change due to the change in Medicaid eligibility. So we really need to ensure that the data in our model can capture this change.

Currently 28 states and the District of Columbia have chosen to expand -- indicated in the light color in the map -- and 22 states have not expanded indicated in the dark color of the map.

Given this change in Medicaid eligibility it is important for the SAHIE program to effectively incorporate the most recent available data on Medicaid coverage into the SAHIE model.

Consequently we need to rethink where we get the Medicaid data or rethink the data that go into our model.

Specifically we need to evaluate alternative Medicaid data sources. Currently SAHIE uses data from the Medicaid Statistical Information System or MSIS.

These data contain information of all those eligible and receiving services under the Medicaid and CHIP programs for every state and territory. And we are very familiar with the characteristics and features of these data given we have used these data for many years.

T-MSIS will be replaced by the Transformed Medicaid Statistical Information System or T-MSIS. This transition is occurring on a phased basis as states begin submitting data under this new system.

As more states begin submitting their data under this new system we will have a better understanding of the characteristics relative to the prior MSIS system.

As a result we are currently evaluating three other data sources that provide state Medicaid enrollment data.

The first is the Medicaid and CHIP application eligibility determination and enrollment data also from CMS, the Medicaid enrollment data collected through the Medicaid budget and expansion system again from CM and Medicaid and CHIP enrollment data snapshot reports from the Kaiser family foundation.

To summarize we need to effectively capture the changes in Medicaid eligibility. We need to address the lag in our Medicaid input data.

And lastly as the transition from MSIS to T-MSIS continues we need to gain an understanding of the difference between the two systems.

So our challenge is to evaluate the underlying data to better understand the strengths and weaknesses of each data source.

Once we more fully understand the characteristics and features of each data source we then must determine the impact on the model estimates of making the change to Medicaid data component on the SAHIE model. Given the outcome of these evaluations we will then determine whether a modeling change is warranted.

Consequently we have some options to consider this current production cycle. Our first option would be to make no change in the Medicaid data source where we would use the same data source and lagged. This data would be from the 2012 T-MSIS.

Another option would be to change the source Medicaid data this production cycle as justified by our evaluations previously mentioned.

Lastly we could use our evaluations to inform the decision as the Medicaid data source for 2015 SAHIE and beyond.

In regards to upcoming SAHIE release products 2014 SAHIE data will be released in 2016. If a change in modeling is made for the 2014 SAHIE data an updated version of 2013 SAHIE data will be released for comparison purposes.

Lastly detailed documentation of any new data sources and modeling will be released with the 2014 SAHIE data along with our data interactive tool.

For further information concerning the SAHIE program please see our SAHIE Web site at census.gov. You may also contact us via email.

We welcome any feedback you may have concerning the issues I have outlined today. Please direct this feedback to our SAHIE email address. Thank you for your time and interest in our health insurance data.

Michael Cook: Thanks Al. That concludes the presentation from the second half of our technical meeting this morning and so we'll go ahead and open up the lines for those that are watching online and also those in the room if you have any questions we'll take them now at this point in time.

Operator do we have any questions on the phone?

Operator: On the audio portion to ask a question please press Star 1. And just one moment please.
Sir I am showing no questions at this time.

Michael Cook: Do we have any questions in the room? As we wait to see if anybody is trying to login and prepare themselves for questions in the room we've seen it before but I'll show it again the timeline of upcoming releases.

We have the income and poverty in the United States, health insurance coverage in the United States and the sub-community poverty measure for 2014 all being released September 16 at 10 o'clock via Web cast.

They will include detailed tables of income poverty and health insurance coverage from 2014, the public use file and also the measure of current health insurance coverage release with the National Center for Health Statistics.

And then that same day at 12 o'clock the ACS American Community Survey one year estimates including information on the nation, states and all geographic areas over 65,000 will go into embargo at noon.

Let embargo will last until 12:01 AM on September 17 where that information will be released and made available publicly.

Also forthcoming we have income consistent research file based on the full sample and model income, Americas families for 2015 on the horizon, geographic mobility from 2014 to 2015 and then as Al mentioned the Small Area Health Estimate Insurance Estimates for 2014.

Operator do we have any questions on the phone?

Operator: I am showing no questions at this time sir.

Michael Cook: And are there any questions in the room? Yes go ahead sir.

Donald Larch: This is a question related to the SAHIE estimates and data sources that you use. I know that historically you've used data from IRS aggregate data.

Are there plans to secure the data on recipients of the premium tax credit in that aggregate data which would help identify low income households with insurance through the marketplace?

Alfred Gottschalck: No. I'm not aware of any of those plans no.

Michael Cook: Thank you for that question. Any other questions in the room? And operator do we have any questions on the phone?

Operator: I am showing no questions sir.

Michael Cook: In conclusion I'd like to remind folks that are watching online as well as those in the room that if you are from the media you can contact the public information office for more information. You can contact us by dialing 301-763-3030 or by email at pio@census.gov.

If you are nonmedia I ask that you contact our customer service center by dialing 1-800-932-8282 or 301763 info.

I'd like to thank everyone all of our panelists and discussants and you for tuning in online and being here in the room for participating in today's Web cast on the upcoming releases of income poverty and health insurance coverage estimates from federal sources.

This concludes our technical meeting. Thank you everyone.

Operator: Thank you. And this does conclude today's conference. You may disconnect at this time.

END