

# OVERVIEW OF THE DESIGN AND PRELIMINARY RESULTS FROM THE TOPICAL MODULES OF THE NATIONAL IMMUNIZATION SURVEY

Philip J. Smith PhD, Diane Simpson MD, Lance Rodewald MD, Lawrence Barker PhD, John Stevenson

Centers for Disease Control and Prevention National Immunization Program

VFC Eligibility Rates and Rates Associated with VFC Eligibility

State	Percent of Population 19-35 Years	Percent of Children Covered by VFC (95% CI)	Percent of Children Covered by VFC (95% CI)	Percent of Children Covered by VFC (95% CI)	Percent of Children Covered by VFC (95% CI)	Percent of Children Covered by VFC (95% CI)	Percent of Children Covered by VFC (95% CI)
U.S. Total	30.0(2.4)	28.0(2.3)	38.1(3.4)	77.0(3.3)	47.0(3.2)	13.0(3.3)	88.0(2.5)
Alabama	38.0(3.0)	44.0(3.0)	49.0(3.0)	41.0(4.1)	74.0(7.1)	32.0(4.1)	88.0(3.0)
Alaska	20.0(1.4)	20.0(1.4)	38.0(1.4)	78.0(7.5)	63.0(6.0)	38.0(3.8)	78.0(1.2)
Arizona	27.0(2.2)	18.0(1.1)	38.0(1.1)	17.0(1.7)	20.0(1.8)	77.0(4.7)	68.0(1.6)
Arkansas	41.0(2.4)	20.0(1.2)	48.0(2.0)	12.0(1.2)	79.0(7.0)	14.0(2.4)	82.0(1.4)
California	40.0(3.4)	36.0(3.0)	48.0(3.0)	79.0(4.1)	47.0(4.5)	30.0(3.0)	88.0(3.4)
Colorado	18.0(1.6)	78.0(1.6)	20.0(1.6)	28.0(1.6)	11.0(1.6)	19.0(1.6)	88.0(1.6)
Connecticut	28.0(1.8)	88.0(1.8)	36.0(1.8)	69.0(1.9)	12.0(1.4)	69.0(1.9)	98.0(1.8)
Delaware	28.0(1.4)	37.0(1.3)	38.0(1.4)	71.0(7.1)	22.0(1.4)	89.0(1.3)	88.0(1.4)
Dist. of Columbia	37.0(1.8)	37.0(1.4)	44.0(1.8)	67.0(6.1)	69.0(6.1)	69.0(6.1)	92.0(1.8)
Florida	27.0(1.8)	40.0(1.2)	42.0(1.8)	17.0(1.8)	59.0(4.7)	61.0(3.3)	88.0(1.8)
Georgia	38.0(1.3)	28.0(1.8)	38.0(1.7)	13.0(1.7)	23.0(1.3)	69.0(1.3)	63.0(1.3)
Idaho	40.0(1.4)	38.0(1.4)	32.0(1.4)	20.0(1.4)	20.0(1.4)	20.0(1.4)	62.0(1.4)
Illinois	38.0(1.4)	28.0(1.4)	38.0(1.4)	68.0(4.2)	11.0(1.4)	69.0(4.2)	87.0(1.4)
Indiana	22.0(1.4)	38.0(1.4)	37.0(1.4)	11.0(1.4)	11.0(1.4)	11.0(1.4)	62.0(1.4)
Iowa	18.0(1.2)	18.0(1.2)	27.0(1.4)	78.0(7.4)	69.0(6.0)	43.0(1.3)	88.0(1.4)
Kansas	20.0(1.4)	17.0(1.2)	25.0(1.3)	8.0(1.2)	3.0(1.2)	4.0(1.2)	67.0(1.3)
Kentucky	28.0(1.3)	27.0(1.3)	38.0(1.3)	17.0(1.3)	61.0(1.1)	14.0(1.1)	47.0(1.4)
Louisiana	33.0(1.6)	43.0(1.6)	53.0(1.6)	17.0(1.6)	20.0(1.3)	20.0(1.3)	78.0(1.3)
Maine	24.0(1.2)	38.0(1.4)	40.0(1.4)	67.0(4.1)	61.0(4.1)	69.0(4.1)	87.0(1.4)
Maryland	13.0(1.3)	28.0(1.3)	28.0(1.3)	84.0(8.3)	24.0(1.3)	69.0(1.3)	48.0(1.3)
Massachusetts	18.0(1.3)	28.0(1.3)	30.0(1.3)	23.0(1.3)	69.0(1.3)	69.0(1.3)	98.0(1.3)
Michigan	38.0(1.4)	24.0(1.6)	38.0(1.3)	18.0(1.3)	69.0(1.3)	69.0(1.3)	48.0(1.4)
Minnesota	16.0(1.2)	27.0(1.2)	27.0(1.2)	12.0(1.2)	10.0(1.0)	84.0(1.7)	88.0(1.2)
Missouri	40.0(1.6)	47.0(1.4)	58.0(1.6)	43.0(4.3)	11.0(1.3)	69.0(1.6)	88.0(1.6)
Montana	30.0(1.8)	38.0(1.7)	38.0(1.7)	67.0(6.1)	67.0(6.1)	67.0(6.1)	88.0(1.8)
Nebraska	22.0(1.2)	34.0(1.6)	38.0(1.6)	13.0(1.3)	43.0(1.3)	69.0(1.3)	42.0(1.2)
Nevada	34.0(1.6)	18.0(1.2)	40.0(1.6)	68.0(6.1)	10.0(1.6)	10.0(1.6)	67.0(1.3)
New Hampshire	7.0(1.3)	12.0(1.3)	12.0(1.3)	11.0(1.3)	2.0(1.3)	2.0(1.3)	31.0(1.3)
New Jersey	18.0(1.7)	13.0(1.3)	13.0(1.3)	10.0(1.3)	10.0(1.3)	10.0(1.3)	69.0(1.3)
New Mexico	38.0(1.3)	38.0(1.3)	37.0(1.3)	43.0(4.1)	61.0(4.1)	10.0(1.3)	87.0(1.3)
New York	36.0(1.3)	29.0(1.3)	40.0(1.6)	20.0(1.3)	14.0(1.3)	69.0(1.3)	87.0(1.3)
North Carolina	28.0(1.4)	38.0(1.4)	48.0(1.4)	47.0(4.1)	29.0(1.3)	21.0(1.3)	88.0(1.4)
North Dakota	38.0(1.3)	24.0(1.2)	37.0(1.3)	27.0(1.3)	68.0(1.3)	18.0(1.3)	48.0(1.4)
Ohio	27.0(1.6)	47.0(1.6)	48.0(1.6)	11.0(1.4)	69.0(4.1)	69.0(4.1)	69.0(1.6)
Oklahoma	27.0(1.3)	37.0(1.3)	48.0(1.3)	11.0(1.3)	18.0(1.3)	18.0(1.3)	71.0(1.3)
Oregon	20.0(1.3)	18.0(1.3)	28.0(1.4)	11.0(1.3)	2.0(1.3)	2.0(1.3)	41.0(1.3)
Pennsylvania	22.0(1.4)	13.0(1.1)	23.0(1.3)	73.0(7.0)	64.0(6.0)	32.0(1.4)	38.0(1.4)
Rhode Island	24.0(1.4)	38.0(1.4)	38.0(1.4)	20.0(1.4)	20.0(1.4)	48.0(1.7)	43.0(1.4)
South Carolina	28.0(1.4)	37.0(1.4)	38.0(1.4)	69.0(4.1)	69.0(4.1)	69.0(4.1)	88.0(1.4)
South Dakota	17.0(1.4)	27.0(1.4)	38.0(1.4)	18.0(1.4)	18.0(1.4)	7.0(1.4)	69.0(1.4)
Tennessee	42.0(1.6)	42.0(1.6)	58.0(1.6)	11.0(1.3)	8.0(1.3)	11.0(1.3)	68.0(1.6)
Texas	38.0(1.3)	28.0(1.3)	48.0(1.3)	17.0(1.3)	17.0(1.3)	17.0(1.3)	69.0(1.3)
Utah	14.0(1.4)	22.0(1.3)	23.0(1.3)	13.0(1.3)	69.0(1.3)	69.0(1.3)	69.0(1.4)
Vermont	18.0(1.3)	47.0(1.3)	42.0(1.3)	40.0(1.3)	69.0(1.3)	69.0(1.3)	88.0(1.3)
Virginia	14.0(1.4)	22.0(1.3)	23.0(1.3)	13.0(1.3)	69.0(1.3)	69.0(1.3)	69.0(1.4)
Washington	28.0(1.3)	31.0(1.3)	40.0(1.4)	14.0(1.4)	24.0(1.1)	23.0(1.1)	48.0(1.3)
West Virginia	40.0(1.4)	27.0(1.3)	47.0(1.4)	67.0(6.1)	69.0(6.1)	69.0(6.1)	69.0(1.4)
Wisconsin	12.0(1.2)	18.0(1.2)	21.0(1.2)	11.0(1.2)	7.0(1.2)	6.0(1.2)	38.0(1.2)
Wyoming	13.0(1.1)	24.0(1.4)	28.0(1.4)	13.0(1.1)	6.0(1.1)	14.0(1.1)	62.0(1.1)

Estimates of 4:3:1:3 vaccination coverage, by federal entitlement program.

STATE	Estimated 4:3:1:3 Vaccination Coverage (95% CI)			
U.S. Total	74.0(1.1)	68.0(1.1)	68.0(1.1)	62.0(1.1)
Alabama	68.0(1.6)	68.0(1.6)	78.0(1.4)	78.0(1.6)
Alaska	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Arizona	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Arkansas	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
California	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Colorado	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Connecticut	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Delaware	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Dist. of Columbia	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Florida	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Georgia	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Idaho	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Illinois	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Indiana	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Iowa	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Kansas	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Kentucky	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Louisiana	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Maine	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Maryland	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Massachusetts	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Michigan	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Minnesota	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Missouri	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Montana	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Nebraska	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Nevada	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
New Hampshire	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
New Jersey	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
New Mexico	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
New York	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
North Carolina	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
North Dakota	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Ohio	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Oklahoma	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Oregon	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Pennsylvania	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Rhode Island	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
South Carolina	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
South Dakota	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Tennessee	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Texas	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Utah	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Vermont	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Virginia	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Washington	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
West Virginia	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Wisconsin	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)
Wyoming	77.0(1.6)	78.0(1.6)	88.0(1.6)	88.0(1.6)

## Background

The National Immunization Survey (NIS) was initiated in April 1994 to monitor vaccination coverage rates on an ongoing basis. The NIS covers 78 Immunization Action Plan (IAP) areas that include the 50 states and 28 metropolitan areas, including the District of Columbia. Each IAP area represents a stratum of the sampling design within which the NIS samples independently. Within each IAP area, the design of the NIS includes 2 phases of sampling: a random digit dialing (RDD) phase of households with children between the ages of 19 and 35 months of age, followed by a mail survey of vaccination providers of these "age-eligible" children in sampled households. Smith et al.<sup>1,2</sup> and Zell et al.<sup>3</sup> give a more detailed description of the design of the NIS.

One of the primary functions of the NIS has been to provide surveillance to monitor progress toward achieving vaccination goals defined by the Childhood Immunization Initiative<sup>4</sup> and to assist the CDC in directing resources to states for the purposes of improving vaccination coverage rates in IAP areas. In addition to providing estimated coverage rates for IAP areas, there has been recognition that additional information is required to assist the National Immunization Program at the Centers for Disease Control and Prevention in improving vaccination coverage rates. Specific topics that have been identified where additional information is required include parents' ability to pay for vaccinations; (ii) parental knowledge and experiences about immunization; and (iii) day care arrangements/breastfeeding practices/WIC participation. All of these are important topics in which data will be collected and analyzed to improve our understanding of vaccination in the U.S. This information could lead to new or improved programs that are designed to increase vaccination rates further.

- Smith, P.J., Battaglia, M.P., Huggins, V., Ezzati-Rice, T., Roden, A.-S., Khare, M., Wright, R.A. Overview of the sampling design and The statistical methods used in The national immunization survey. American Journal of Preventive Medicine, to appear.
- Smith, P.J., Rao, J.N.K., Daniels, D., Battaglia, M.P., Ezzati-Rice, T.M., Khare, M. Compensating for nonresponse bias in the national immunization survey using response propensities. NCHS Series 2 Report. Hyattsville, MD. To appear.
- Zell, E.R., Ezzati-Rice, T.M., Battaglia, M.P., and Wright, R.A. "National Immunization Survey: The Methodology of a Vaccination Surveillance System", Public Health Reports, Oxford University Press, Cary, NC, vol 115, pp 65-77, January/February 2000.
- Centers for Disease Control and Prevention. Reported vaccine-preventable diseases—United States, 1993, and the Childhood Immunization Initiative. MMWR Morb Mortal Wkly Rep. 1994;43:57-60.

## The Design of the First NIS Topical Modules

The need to collect information on these topics has been carefully balanced with the burden that respondents bear in participating in the NIS RDD interview. Approximately 85% of all NIS respondents in the RDD phase of the survey are known to be mothers with at least 1 child between 19 and 35 months of age. Also, the current average interview length for the NIS household interview conducted over the telephone is approximately 24 minutes for households with an age-eligible child. While the need for information on additional topics is great, if all respondents were asked additional questions, the length of the NIS interview would become considerably longer and would place even greater burden upon respondents.

To control respondent burden, a split sampling design has been used. In this design, each respondent with an age-eligible child will be randomly assigned to receive questions pertaining to only one of the three topics. We refer to the questions that pertain to a single topic as an "topical module." The overall goal of the split sampling design is to control interview time with respondents, yet to enhance the NIS interview to collect additional analytically important information. Smith et al.<sup>5</sup> provide more details about the design of the NIS topical modules.

- Smith, Philip J., Simpson, Diane, Battaglia, Michael P., Huggins, Vicki, Rodewald, Lance, Klevens, Monina, Wilkison, Marilyn, Roden, Ann-Sofi, Khare, Meena, and Wright, Robert A. 2000. Split sampling design for topical modules in the National Immunization Survey, 2000 Proceedings of the Section on Survey Research Methods, Alexandria, VA: American Statistical Association, pp. 653-658.

## The Analytic Objectives of the First NIS Health Insurance Topical Module

Costs to parents and providers are a known barrier to vaccination. Specifically, administration of vaccines by private providers depends on insurance reimbursement rates, the availability of publicly purchased vaccines, and other possible costs to providers. Referral of children needing vaccinations away from a child's "medical home" to a health department clinic also depends on insurance coverage and out-of-pocket costs to parents. These referrals cause missed opportunities and delays in timely vaccinations. Data from this topical module will provide information on these economic barriers to vaccination and their impact on vaccination coverage levels.

The Vaccines for Children (VFC) program is a federal entitlement program that provides publicly purchased vaccine for five groups of children: uninsured children; underinsured children if they go to a federally qualified health center; Medicaid-enrolled children; and American Indian or Alaska Native children. Nationally, approximately 32% of preschool children are eligible for VFC. In order to correctly distribute the VFC funds to the states, CDC needs to know the proportion of a state's preschool children that are entitled to VFC vaccine. This module will provide state-by-state estimates of this proportion, and these estimates will be combined with state program information to distribute funds. Although VFC is a federal entitlement program, it is operated at the state level. Each state enrolls providers into the VFC program, and these providers administer VFC vaccine to eligible children. Since the NIS provider record check asks whether the provider is enrolled in VFC, this module will allow each state to determine the proportion of VFC-eligible children who receive their vaccines from VFC-enrolled providers. This information will help guide states' provider enrollment efforts. States purchase vaccine using one of three different policies: universal purchase (16 states), in which all vaccine is purchased by the state; augmented VFC (16 states), in which state funding is used to purchase vaccine for children whose commercial insurance does not cover the cost of vaccination so they can be vaccinated in their medical home; and standard purchase (17 states), in which vaccine for underinsured children is purchased only for health departments. This module will be used to determine whether the likelihood of referral to health department clinics is associated with vaccine purchase policy.

## Results from the Health Insurance Module

### State Vaccine for Children Eligibility Rates

The Vaccines for Children (VFC) program is a federal entitlement program that provides publicly purchased vaccine for five groups of children: uninsured children; underinsured children if they go to a federally qualified health center; Medicaid-enrolled children; and American Indian or Alaska Native children. Nationally, approximately 32% of preschool children are eligible for VFC. In order to correctly distribute the VFC funds to the states, CDC needs to know the proportion of a state's preschool children that are entitled to VFC vaccine. This module will provide state-by-state estimates of this proportion, and these estimates will be combined with state program information to distribute funds.

VFC eligibility is defined as:

- reporting living in a household with total annual income less than 133% of poverty,
- reporting being on Medicaid,
- reporting being without medical insurance,
- reporting having medical insurance that does not cover at least some of the cost of vaccinations, and
- reporting being American Native / Alaskan Native.

The following table provides VFC eligibility rates and rates associated with factors that define VFC eligibility for each State and the District of Columbia.

## Federal Entitlement Programs Participation and Vaccination Coverage: State Estimates

Among the goals of the VFC program is to raise vaccination coverage rates by removing financial barriers to vaccinations among people living in poverty. The Women, Infants, and Children (WIC) Program is an entitlement program run by the U.S. Department of Agriculture. The mission of the WIC Program is to safeguard the health of low-income women, infants, & children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care. Generally, families living below 185% of the federally established poverty level are eligible to participate in WIC. Also, WIC is mandated to program increase vaccination coverage among children participating in the program. Medicaid is a jointly funded, Federal-state health insurance program for certain low-income and needy people. It covers approximately 36 million individuals including children, the aged, blind, and/or disabled, and people who are eligible to receive federally assisted income maintenance payments. Medicaid often serves to cover the costs of childhood vaccinations for participating families.

The following table uses data available from 1 quarter of the NIS Health Insurance Module, and provides 4: