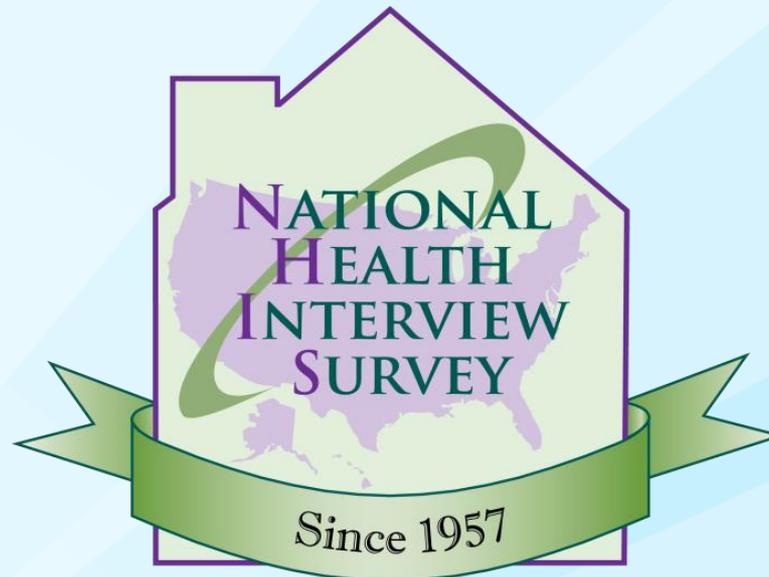


Recent Enhancements to the NHIS that Facilitate Insurance Policy Analyses



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National Health Interview Survey

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

Basic Content and Structure of the NHIS Questionnaire Since 1997

□ Family Core

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

□ Sample Adult Core

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

□ Sample Child Core

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

Recent Enhancements to the NHIS that Facilitate Insurance Policy Analyses

- ❑ Expanded content on health care access and utilization**
- ❑ Increased survey sample sizes**
- ❑ Improved timeliness of health insurance estimates**

Additions to the NHIS in 2011 Related to Health Care System Changes

□ Related to the affordability of care

- Employer or union contribution to premiums (if known)
- Any problems paying medical bills in past 12 months
- Any medical bills being paid off over time, on credit cards, or through personal loans
- Financial barriers to seeing specialists or getting follow-up care
- Financial barriers to medication use
- Worry about ability to pay medical bills if sick or in an accident

Additions to the NHIS in 2011 Related to Health Care System Changes

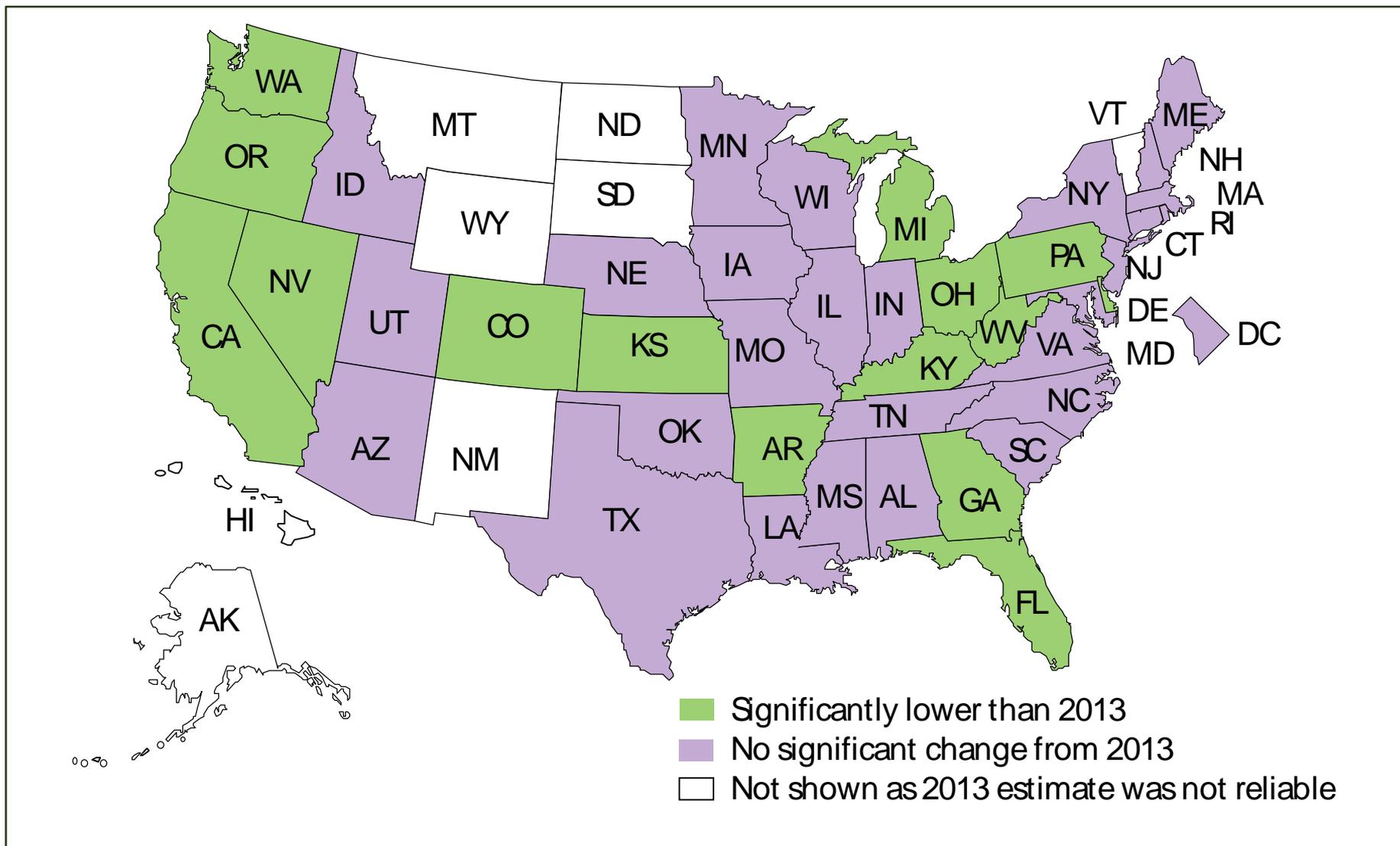
- ❑ **Related to the expansion of coverage to dependents through age 25**
 - For young adults living in the household, relationship of any policyholders who do not live in the household
 - Insurance coverage on anyone outside of the household

- ❑ **Related to concerns about the availability of providers**
 - Sources for all routine care
 - Wait times for appointment and/or being seen
 - Trouble finding a provider
 - Reasons for not having a regular provider
 - Reasons for any ER visits

Significant Increases in Sample Size

Selected Counts	2010	2011	2012	2013	2014
Augmented?	No	Yes	Yes	Yes	Yes
# Households	34,329	39,509	42,366	41,335	44,552
# Persons	89,976	101,875	108,131	104,520	112,053
# States with reliable estimates for insurance coverage (all ages)	20	32	43	43	51

Uninsured at the time of interview—Change in the percentage of uninsured for persons under age 65 between 2013 and 2014: United States



NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.
DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2013-2014, Family Core component.

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

- ❑ NHIS is conducted throughout the year based on monthly random samples.
- ❑ Annual files released six months after the completion of data collection.
- ❑ Early Release Products are developed prior to final processing and weighting to provide early access to the most recent information.
- ❑ Every three months, the ER Program produces:
 - A report on 15 key health indicators
 - A report on health insurance coverage
 - Web tables with quarterly health insurance estimates
 - Preliminary microdata file used for these reports

Preliminary Quarterly Microdata Files

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

Early Release Health Insurance Estimates Represent an Average Over the Months Included

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

Early Release Health Insurance Estimates and Data Files Will Be Released One Month Earlier

- ❑ **August** release was based on answers collected between January through March
- ❑ **November** release will be based on January–June
- ❑ **February** release will be based on January–September
- ❑ **May** release will be based on January–December

Challenges for the Near Future

- ❑ Implementation of the 2016 sample redesign**
- ❑ Decreased funding for sample size increases and content expansions**
- ❑ 2018 content redesign and the need for a streamlined questionnaire**
- ❑ Maintaining the high quality of the estimates**