STATE-LEVEL ESTIMATES FROM THE NHIS RESTRICTED DATA: ANALYSIS TO SUPPORT STATES IMPLEMENTATION AND EVALUATION OF THE ACA

Joanna Turner, Senior Research Fellow University of Minnesota, SHADAC

December 2, 2015 FCSM, Washington, DC



Background

The Affordable Care Act (ACA) has made significant changes in health insurance coverage and health care systems across the U.S.

States responsible for implementing many of the key elements

State program administrators and policymakers need reliable state-level data

PERCENT UNINSURED AT TIME OF INTERVIEW (ALL AGES) (January - June 2014 and January - June 2015) 2014 ALL 2015 STATES 3.2pp 12.2% 16.3% 10.2% New York N. Carolina Georgia New Jersey Michigan Ohio

Data Needs to Evaluate the ACA

Rich data on health care access, utilization, affordability, and health insurance coverage

State-representative samples

Timely

Study changes over time

National Health Interview Survey (NHIS)

Key data source for monitoring health and health care use of the US population since 1957

Conducted annually by the National Center for Health Statistics (NCHS)

In 2011, added new questions for monitoring the ACA's impact

Sample augmentation

Uninsured estimates now available for all states

Challenges of Using the NHIS for State-Level Analysis

State-level identifiers are not available on public use files; access restricted to a NCHS or Census Research Data Center

Available sample weights do not account for state population totals and characteristics

 Explored creating state-level weights, but did not have enough information

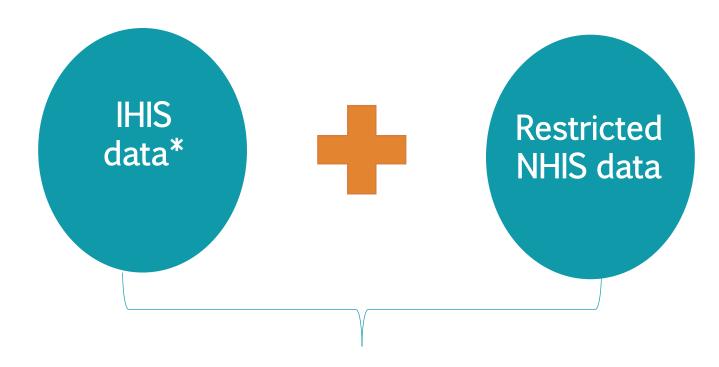
Project Goals

Expand the role of NHIS in helping states to evaluate and monitor health reform

Produce state-level estimates and make these publically available via SHADAC's Data Center

Submitted a proposal to conduct work at the University of Minnesota's Census Research Data Center (MnRDC)

Data Linking



Merged by NCHS

Integrated Health Interview Series – Harmonized NHIS data produced by the Minnesota Population Center and SHADAC (www.ihis.us/ihis)

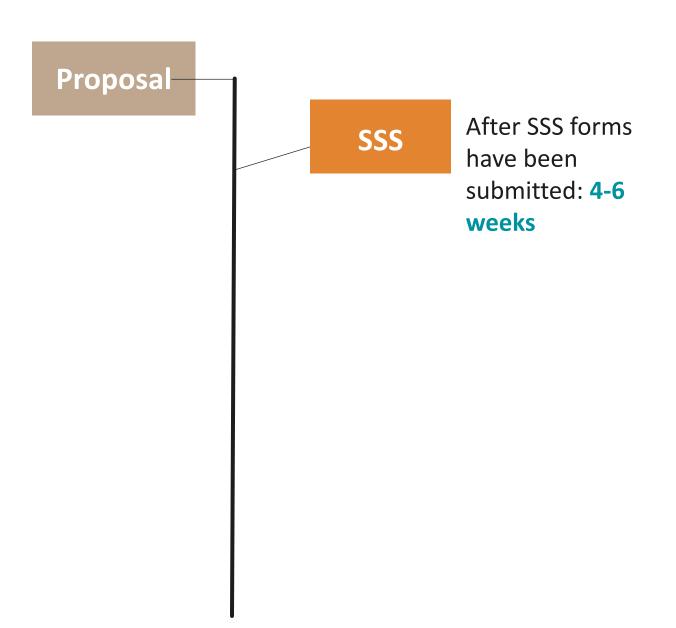
RDC PROCESS

Creation: 1-3 months

Proposal

Approval/Revisions:

6-12 weeks



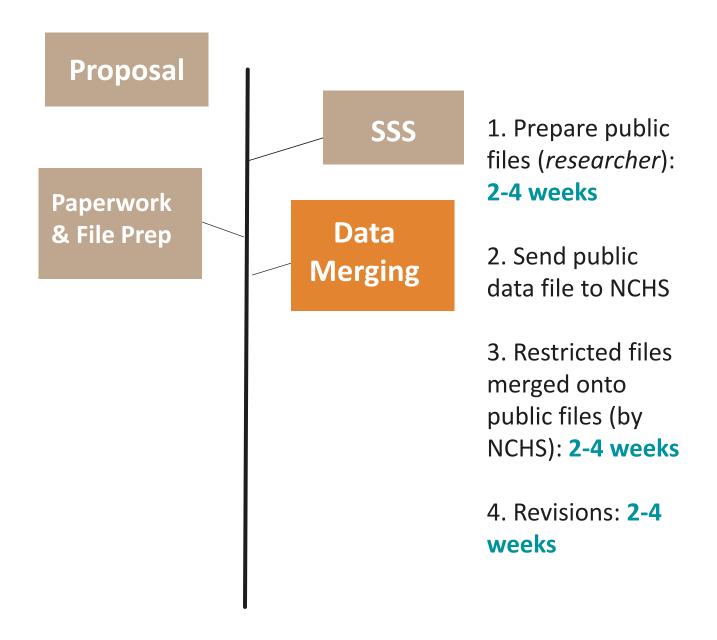
Proposal

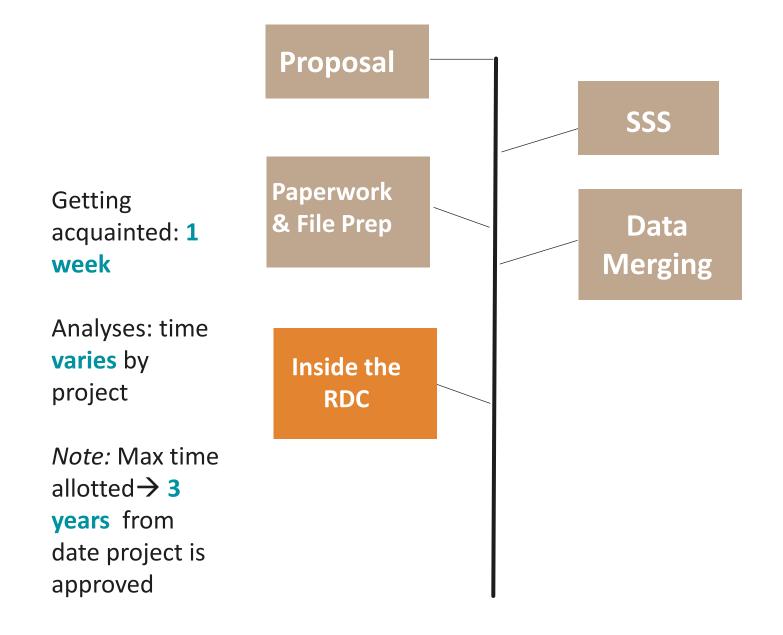
SSS

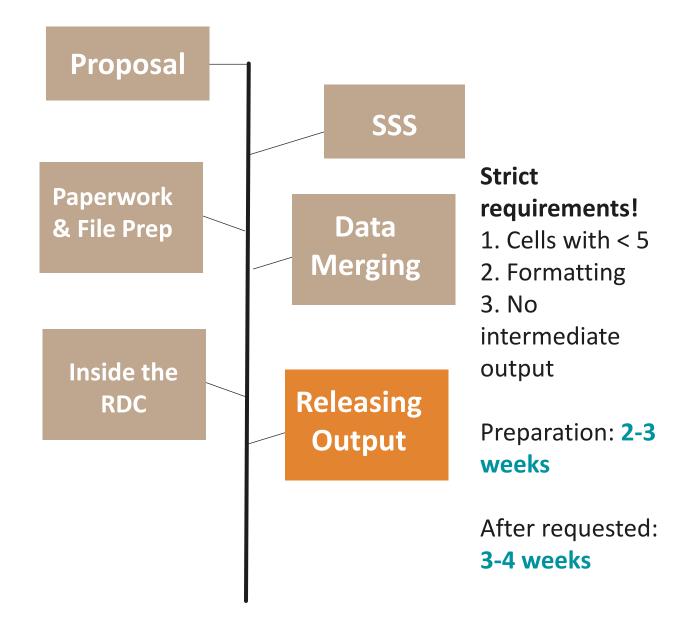
Supplement any forms for the RDC

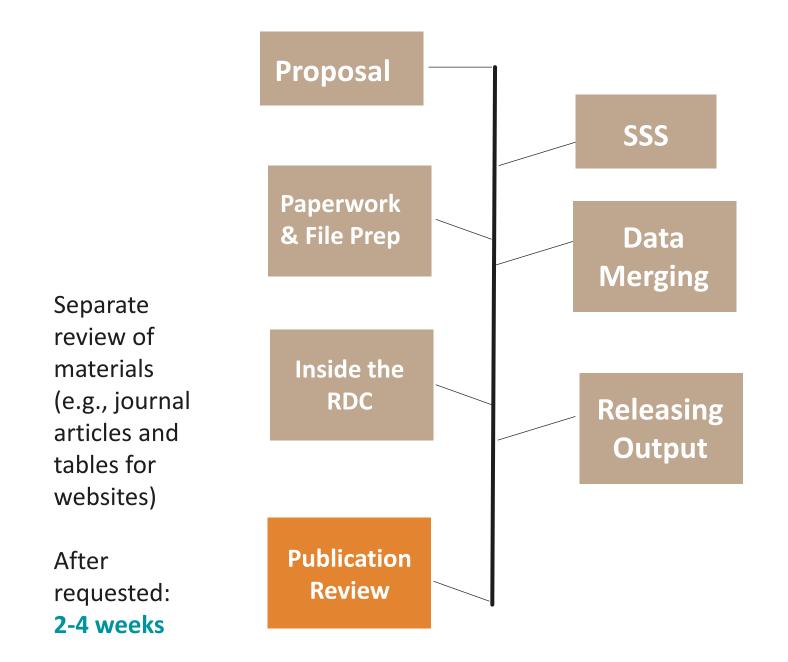
Paperwork & File Prep

Create
analyses
programs
using public
data









SHADAC DATA CENTER

http://datacenter.shadac.org/



HOME + NEWS

PROFILES

MAPS + CHARTS

*Share Email ABOUT CONTACT SHADAC.ORG >

Create customized reports on state-level health insurance coverage, access, and cost with Data Center, from State Health Access Data Assistance Center (SHADAC)

CREATE A REPORT Location Profile By Location By Topic By Data Source

STAY UPDATED



Receive the latest in health insurance coverage, access, and cost. Join SHADAC's mailing list.





ABOUT CONTACT SHADAC.ORG V

Maps & Charts

Step 1: Choose an Indicator by Topic or by Data Source?

Data Source: NHIS

Step 2: Select an indicator.

Access to Care

Had Usual Source of Medical Care Other than Emergency Department in Past Year by Age

No Trouble Finding Doctor in Past Year by Age

Told that Provider Does Accept Insurance Type in Past Year by Age

Affordability of Health Care

Needed but Delayed Medical Care Due to Cost in Past Year by Age

Needed but Did Not Get Medical Care Due to Cost in Past Year by Age

Trouble Paying Medical Bills or Paying Off Bills Over Time in Past Year by Age

Made Changes to Medical Drugs Because of Cost in Past Year by Age

Health Care Utilization

Had General Doctor or Provider Visit in Past Year by Age Had Visit to Emergency Department in Past Year by Age Spent the Night in Hospital in Past Year by Age

Insurance Coverage by Demographics

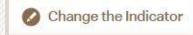
Age

Needed but Did Not Get Medical Care Due to Cost in Past Year by Age

Age: 0-64

Single Year: 2013; Data Type: Percent





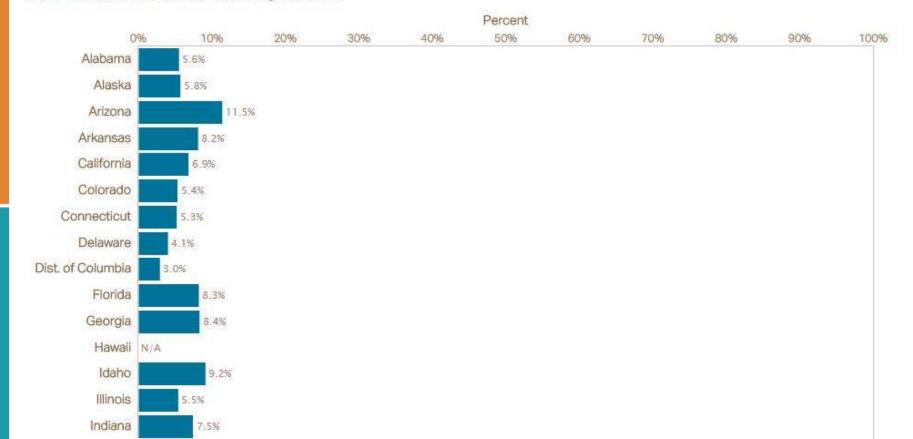


Rank Trend

Map Bar

Age: 0-64

SORT BY: Location | Lowest Value | Highest Value



Needed but Did Not Get Medical Care Due to Cost in Past Year by Age

Rank

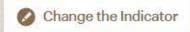




Age: 0-64

Single Year: 2013; Data Type: Percent

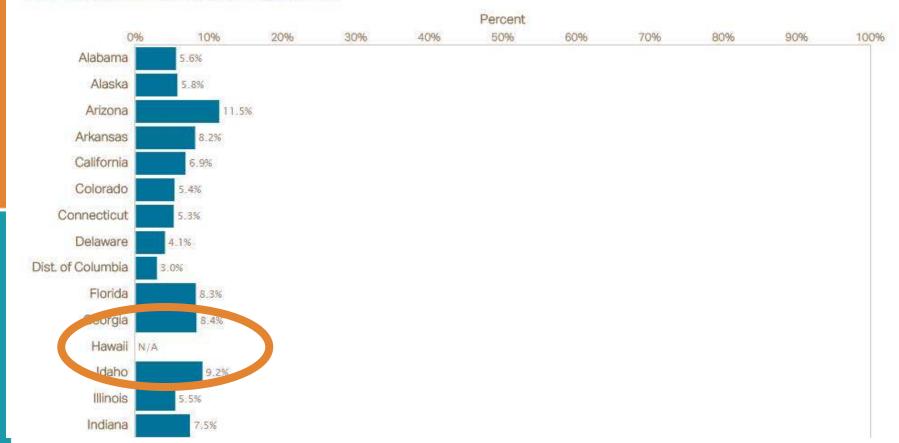






Age: 0-64

SORT BY: Location | Lowest Value | Highest Value



Needed but Did Not Get Medical Care Due to Cost in Past Year by Age

Rank





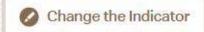


Bar

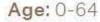
Age: 0-64

Single Year: 2013; Data Type: Percent (include margin of error)









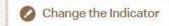


Had Visit to Emergency Department in Past Year by Age

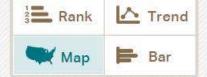
Age: 0-64

Single Year: 2013; Data Type: Percent

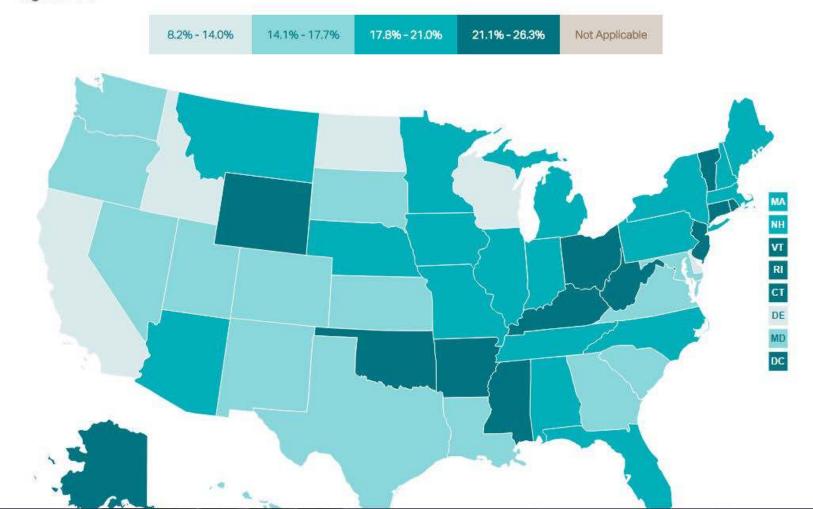












Trouble Paying Medical Bills or Paying Off Bills Over Time in Past Year by Age

Rank Trend

Map Bar

Location: 3 Selected

Age: 0-64

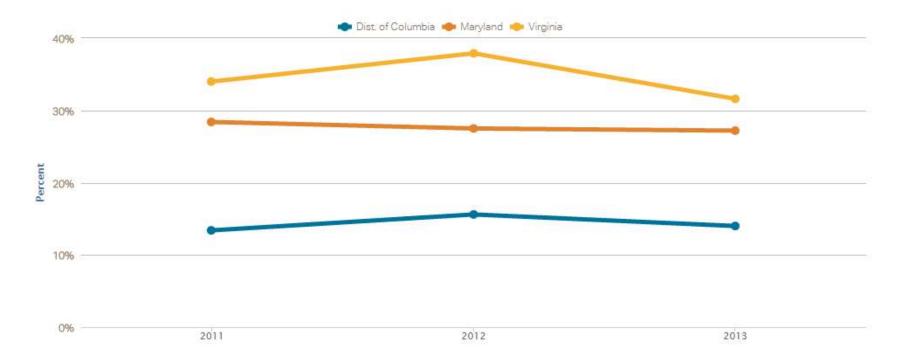
Single Year: 2011 to 2013; Data Type: Percent







Age: 0-64



Had General Doctor or Provider Visit in Past Year by Age

Rank Trend





Location: Dist. of Columbia

Age: 4 Selected

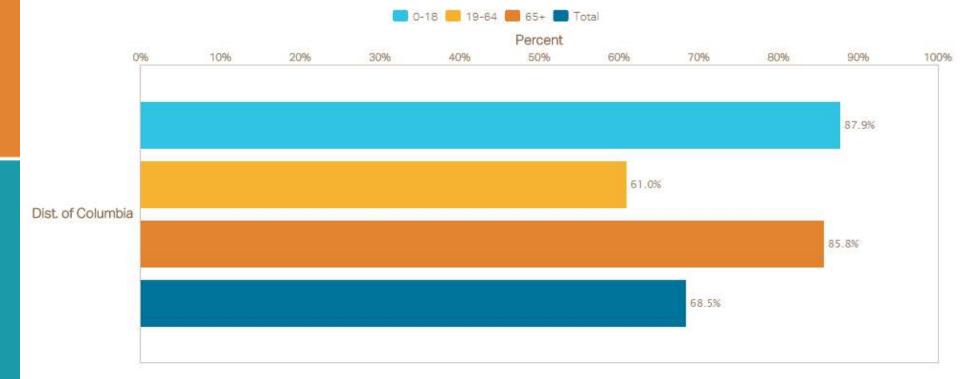
Single Year: 2013; Data Type: Percent







Age: 4 Selected



Minnesota

Indicators: 1 selected

Year: Most Recent; Data Type: Percent and Margin of Error





Needed but Delayed Medical Care Due to Cost in Past Year by Age (2013)

Age										
0-64		0-18		19-64		65+		Total		
%	MOE	%	MOE	%	MOE	%	MOE	%	MOE	
6.6%	1.7%	N/A	N/A	8.4%	2.2%	N/A	N/A	6.2%	1.5%	

Source: SHADAC analysis of National Health Interview Survey (NHIS) data, National Center for Health Statistics (NCHS). The NHIS sample is drawn from the Integrated Health Interview Survey (IHIS, MN Population Center and SHADAC). Data were analyzed at the University of Minnesota's Census Research Data Center because state identifiers and continuous income were needed to produce results and these variables are restricted.

Get Data

Minnesota

Indicators: 1 selected

Year: Most Recent; Data Type: Percent and Margin of Error



Edit this Profile (Years, etc)



Needed but Delayed Medical Care Due to Cost in Past Year by Age (2013)

Age										
0-64		0-18		19-64		65+		Total		
%	MOE	%	MOE	%	MOE	%	MOE	%	MOE	
6.6%	1.7%	N/A	N/A	8.4%	2.2%	N/A	N/A	6.2%	1.5%	

Source: SHADAC analysis of National Health Interview Survey (NHIS) data, National Center for Health Statistics (NCHS). The NHIS sample is drawn from the Integrated Health Interview Survey (IHIS, MN Population Center and SHADAC). Data were analyzed at the University of Minnesota's Census Research Data Center because state identifiers and continuous income were needed to produce results and these variables are restricted.

Next Steps

Add 2014 estimates

Add measures by coverage type

• Uninsured, private, and public

Resources

SHADAC's Data Center

http://datacenter.shadac.org/

SHADAC brief on NHIS questionnaire changes

 http://www.shadac.org/publications/nhisquestionnaire-changes-addressing-patientprotection-and-affordable-care-act

Integrated Health Interview Series (IHIS)

https://www.ihis.us/ihis/

Contact Information

Joanna Turner

Senior Research Fellow

turn0053@umn.edu

612.624.4802