



Analyzing the ACA Using New NHIS Questions

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Background

- The National Health Interview Survey (NHIS) is a valuable data source for health researchers
 - Cross-sectional household interview survey continuously administered each year
 - Data collected through personal household interviews
 - Questionnaire has four core components– Household, Family, Sample Adult, and Sample Child

Background

- The passage of the Patient Protection and Affordable Care Act (ACA) in 2010 generated new data requirements for the purpose of monitoring the law's impacts on the health care system
- In response, several questions were added to the NHIS beginning in 2011 and will be included in future years of data collection
 - Found in the Family, Sample Adult, and Sample Child components

Background

- The modifications made to the NHIS will help policymakers analyze:
 - Health Care Access and Use
 - Affordability
 - Young Adult Coverage Provision
 - Preexisting Condition Insurance Plan
 - Preventive Care Provision
 - Long-Term Care Insurance Program

Health Care Access and Use: *Coverage Status*

- Existing questions about type of coverage, whether or not a person lacks coverage, and reasons for no coverage
- New questions to help track the shared coverage responsibility provision (which goes into effect in 2014):
 - Has coverage has been directly purchased during the past 3 years? Was that coverage was for the respondent, someone else in the family, or both? Was it difficult to find such a plan?
 - Did the respondent have coverage for the past 12 months?
 - How does insurance status compare to one year ago?
 - If currently uninsured, what last type of coverage the person had?
 - Several questions regarding employer or union financial contributions toward the health plan

Health Care Access and Use: *Coverage Status*

- The NHIS already asks if the respondent has a usual source of care (USOC) and type of USOC
- New questions:
 - Why no USOC (both sample adult and sample child)?
 - Range of possible reasons such as language problems, convenience, and cost

Health Care Access and Use: *ER Use*

- Existing NHIS questions about number of ER visits, if ER was for asthma, and if ER is the usual place for care
- New questions are more specific, and asked of both adults and children:
 - Was the most recent ER trip at night or on the weekend?
 - Did the ER trip result in a hospital admission?
 - Reasons why the person ended up in the ER

Health Care Access and Use: *Delaying Needed Care*

- Current NHIS questions about why needed care was delayed (e.g., lacked transportation, could not get an appointment soon enough)
- New questions:
 - Specific provider reasons for why people were experiencing limited access to care, such as they were told the clinic/provider wasn't accepting new patients or that their coverage wasn't accepted
 - Despite troubles, was the person able to line up a general doctor?
 - Several questions about wait time (setting appointments, at appointments)
 - Role of technology (used to research health information, refill prescriptions, chat forums, etc.)

Affordability

- NHIS has tracked delayed care due to cost
- NHIS 2011:
 - Expanded delayed care due to cost section to include specialist care or follow-up care
 - Questions on financial burden from medical bills
 - Worried about paying medical bills
 - Worried are they about paying bills should they become sick
 - Confidence in affording plan if they had to pay for it on their own
 - Currently experiencing or recently experienced troubles paying medical bills
 - Had to ask the doctor to lower the cost of medical bills
 - Saved money on prescriptions by delaying refills, purchasing meds from other countries, took less/skipped doses, used alternative therapies

Young Adult Coverage Provision

- Questions on age, insurance status, reason for no insurance, and type of insurance have been part of the survey for many years, but in 2011 the NHIS began asking questions to help identify those insured young adults who are still on their parent's plan. For example:
 - If respondent was related to the policyholder under which they were insured
 - If insurance plan covered anyone not living in the house
 - Number and relationship of the people covered by the plan that live elsewhere

Preexisting Condition Insurance Plan

- The NHIS has tracked chronic conditions (diabetes, hypertension, arthritis, asthma, cholesterol)
- New to the 2011 survey:
 - Whether a person had been denied coverage, charged a higher price because of health, or excluded from coverage because of a health problem
 - Reasons why a plan was not purchased (included “due to a preexisting condition”)

Preventive Services

- Prior to the 2011 survey, respondents were asked if they had EVER had a specific preventive service
 - Beginning in 2011, the survey began using a 12 month look-back period and asking this question annually
 - Also, the NHIS started asking more specific questions about use of health clubs, wellness programs, community recreation programs, and employer fitness programs, and what might limit the use of them

Long-Term Care Insurance

- The ACA would have established a national, voluntary insurance program for purchasing a government-run community living assistance services and supports (CLASS) program, but this provision was repealed (01/01/13).
 - However, the NHIS began asking if people would be willing to buy this type of insurance, what their willingness-to-pay for this type of insurance would be, and several questions about activities of daily living (ADLs)

SHADAC Brief

- We have compiled a brief that summarizes these NHIS changes, available on our website:
<http://www.shadac.org/content/issue-briefs>
 - The Brief provides tables for each of these six categories listing the variable instrument name, full question, survey component that the variable is sourced from, question universe, and NHIS data file that houses the question

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