Accuracy of ACS Health Insurance Estimates: Survey Reports versus Enrollment Records

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Motivation for Research

- Accuracy of survey reports of health coverage:
 - Insured/uninsured = ok
 - Type of coverage (employer-sponsored, Medicaid, etc.) = not ok
- Limited research on reporting accuracy by coverage type
 - Medicaid is under-reported, but some other type of coverage is often reported instead
 - → Medicaid under-count; small overestimate of uninsured
- Reporting accuracy for coverage type useful:
 - As a component of the uninsured measure
 - In and of themselves to examine shifts from public to private; vice versa
- Limited data on reporting accuracy pre- and post-ACA
- Objectives: expand literature beyond Medicaid and:
 - examine levels and patterns of misreporting for range of coverage types
 - explore how over- and under-reporting offset each other







CHIME Study

- "Comparing Health Insurance Measurement Error"
- Partnered with Medica Health Plans (MHP) based in Minnesota
- MHP offers several types of coverage:
 - Employer-sponsored insurance (ESI)
 - Direct purchase (on and off marketplace)
 - Medicaid
 - MinnesotaCare (state-sponsored public plan)







CHIME Basic Study Design

- Start with enrollment records from MHP
- Use records as sample for household phone number
- Administer much-abbreviated ACS survey, including full series on health insurance
- Compare survey estimates to enrollment records on:
 - Status (covered/not covered)
 - Coverage type





CHIME Survey Methods

- 15-minute phone survey conducted in Spring, 2015
- Content:
 - Demographics
 - Labor force
 - Government program participation (food stamps, WIC, etc.)
 - Health insurance
- Stratified sample: oversampled public, undersampled ESI
- Data collected on all household members
- Household-level response rate: 22% (conducted non-response analysis)
- MHP enrollment file sent post-data collection
- Records matched to survey data at person-level
- Analysis file restricted to those under 65
- Weighted data to MHP population totals









MHP Population, HH Sample and Personlevel Matched Cases Across Strata

Coverage Type according to	MHP Population when Sampled (December 2014)		Sample Phone Numbers	ACS Matched Sample		
MHP Records				НН	Person	
	N	%	n	n	n	%
ESI	463,000	67%	2,496	124	246	16%
NonGroup	22,000	3%	4,187	274	538	36%
Marketplace	1,700	0.2%	1,124	102	152	10%
Medicaid	181,000	26%	4,989	177	450	30%
MinnesotaCare	26,000	4%	2,447	4	31	2%
ESI/Public trans	3,000	0.4%	757	37	90	6%
TOTAL	696,700	100%	16,000	718	1,507	100%









ACS Health Insurance Question

	coverage in items a - h. Insurance through a current or	Yes	No
a.	former employer or union (of this person or another family member)		
b.	Insurance purchased directly from an insurance company (by this person or another family member)		Е
C.	Medicare, for people 65 and older, or people with certain disabilities		
i	Medicaid, Medical Assistance, or any kind of government-assistance		
	plan for those with low incomes or a disability		L
e.	TRICARE or other military health care		E
f.	VA (including those who have ever used or enrolled for VA health care)		L
g.	Indian Health Service		L
h.	Any other type of health insurance or health coverage plan – Specify –		E





Reporting Accuracy Metrics

Sensitivity: among those enrolled in Cov Type X, how many reported Cov Type X?

Predictive Power: among those reporting Cov Type X, how many were enrolled in Cov Type X?

Prevalence: how does prevalence of Cov Type X compare between records and survey?







Summary Results

	Sensitivity	Predict	Prevalence Estimates				
		Power	MHP	ACS	ACS-MHP		
Private	96.6	95.6	67.1	73.9	6.8	***	
Public	84.0	92.8	25.7	24.2	-1.6	**	
ESI	95.1	96.7	63.6	68.6	5.0	***	
Direct	84.4	47.0	3.5	6.4	2.9	***	
Insured	97.1	n/a	100	97.1	-2.9	***	

^{***} p < .01



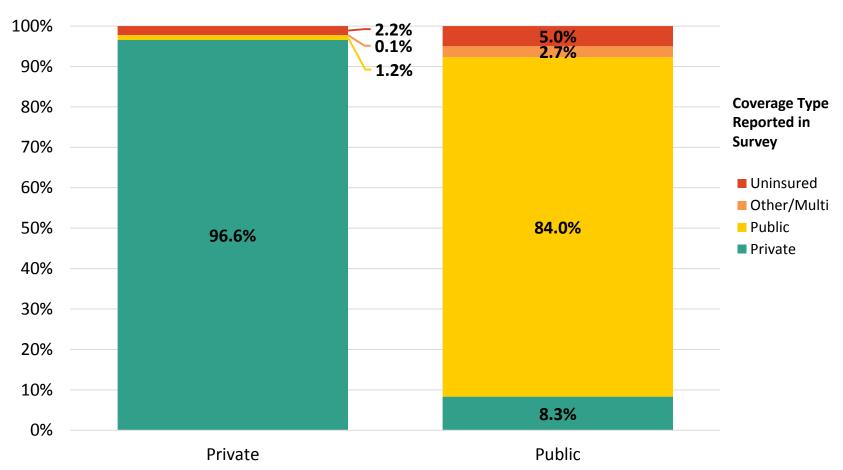






^{**} p < .05

Sensitivity: Coverage Type Reported among Private and Public Enrollees



Coverage Type According to Enrollment Records

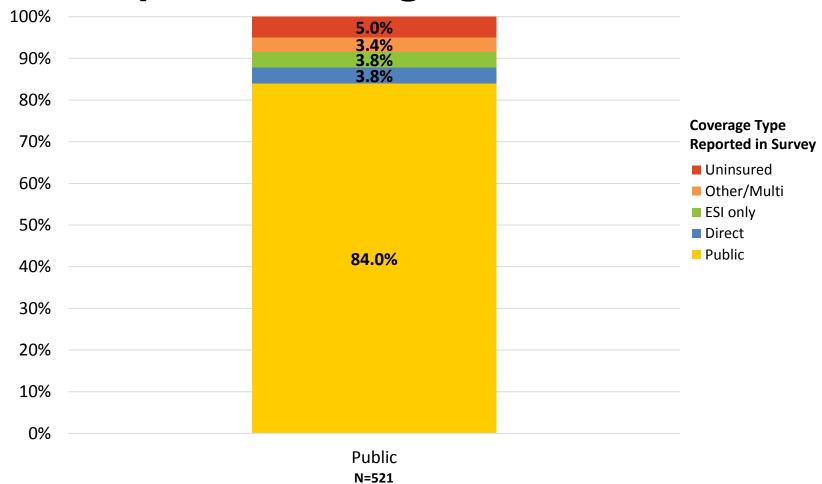








Sensitivity: Detailed Coverage Type Reported among Public Enrollees



Public Insurance Coverage According to Enrollment Records

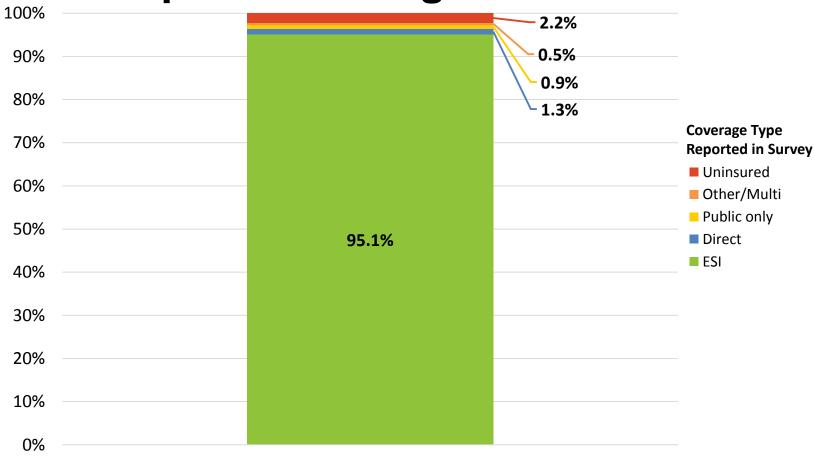








Sensitivity: Detailed Coverage Type Reported among ESI Enrollees



ESI N=278
ESI Coverage Type According to Enrollment Records

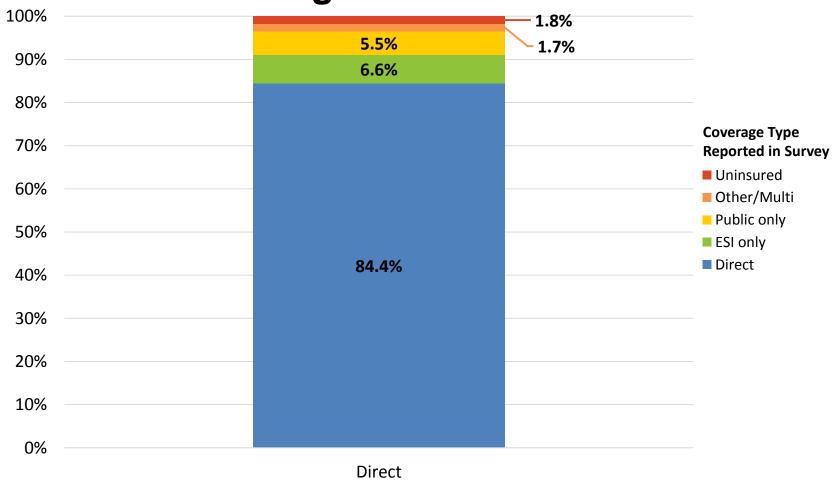








Sensitivity: Detailed Coverage Type Reported among Direct Enrollees



N=680
Direct Coverage According to Enrollment Records

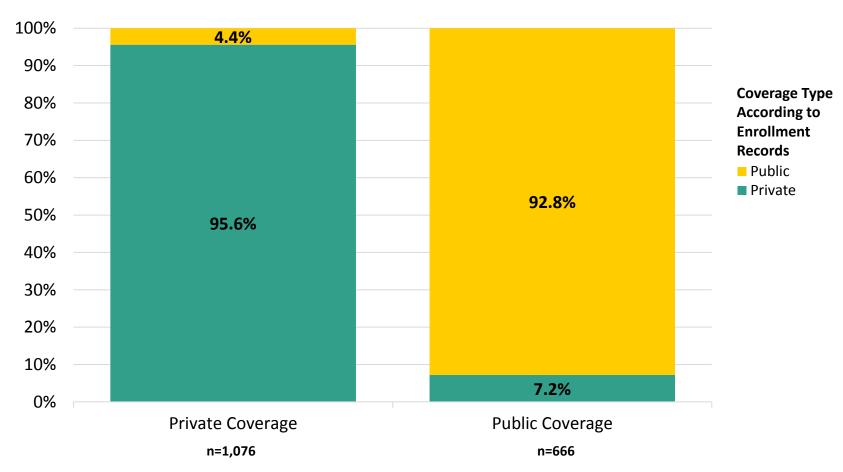








Predictive Power: Enrollment among those with Reported Private and Public Coverage



Coverage Type Reported in Survey

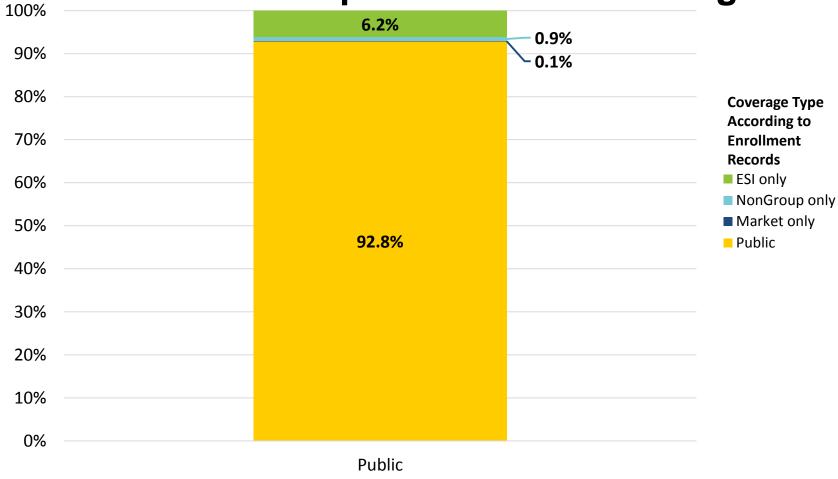








Predictive Power: Detailed Enrollment among those with Reported Public Coverage



N = 490

Coverage Type Reported in Survey

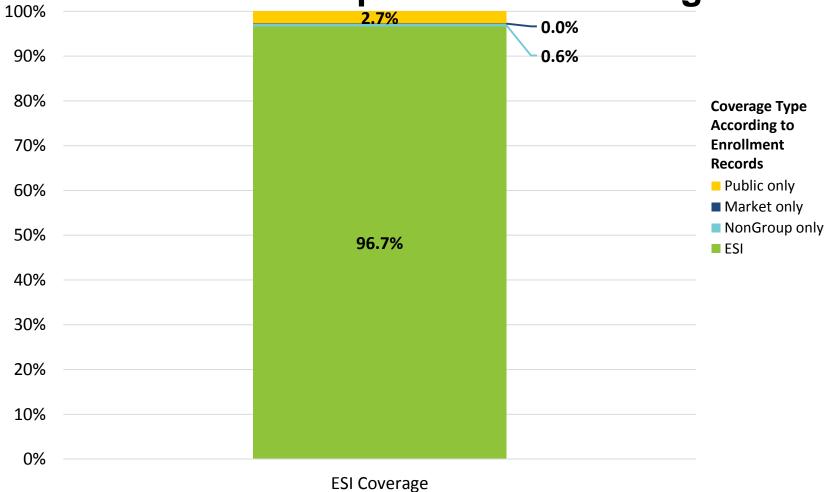








Predictive Power: Detailed Enrollment among those with Reported ESI Coverage



N=399
Coverage Type Reported in Survey

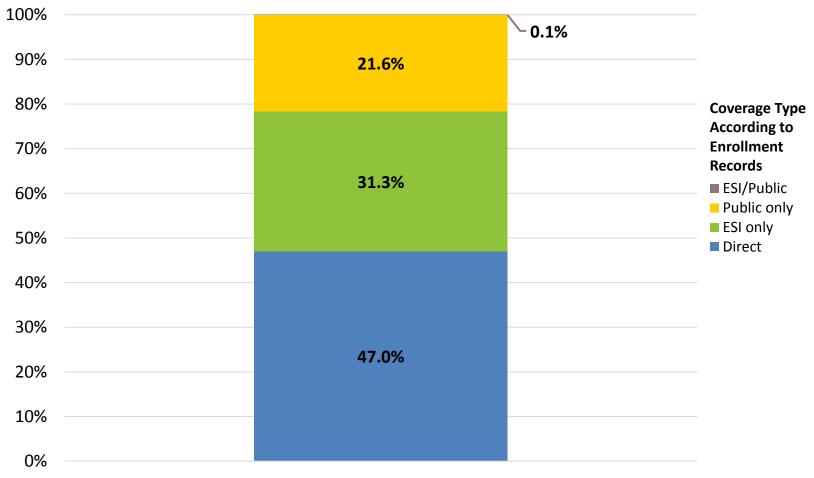








Predictive Power: Detailed Enrollment among those with Reported Direct Coverage



Direct Coverage

n=712

Coverage Type Reported in Survey

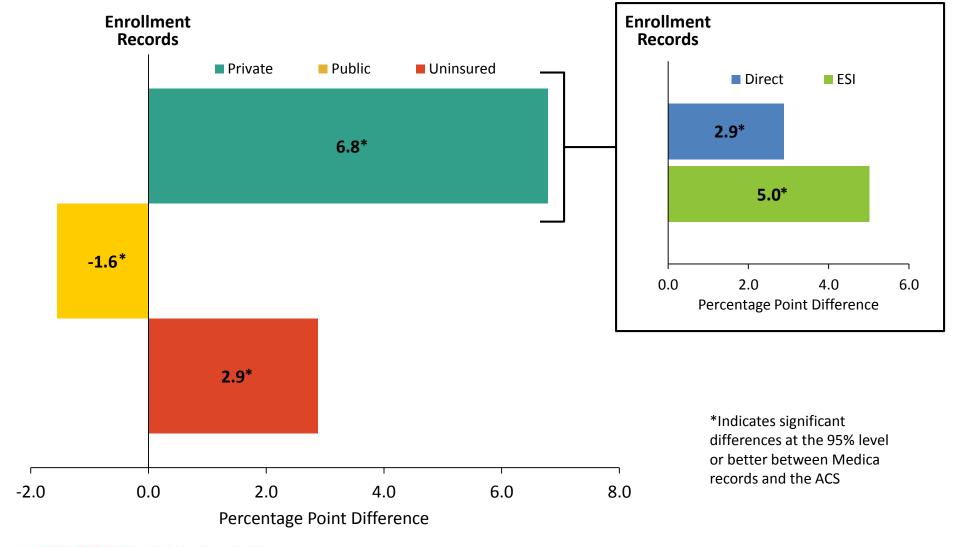








Prevalence: MHP Population minus Survey Estimates











Take-Away: **Baseline Accuracy Metrics**

	Concitivity	Predict	Prevalence Estimates				
	Sensitivity	Power MHP		ACS	ACS-MHP		
Private	96.6	95.6	67.1	73.9	6.8	***	
Public	84.0	92.8	25.7	24.2	-1.6	**	
ESI	95.1	96.7	63.6	68.6	5.0	***	
Direct	84.4	47.0	3.5	6.4	2.9	***	
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^{***} p < .01

p < .05

Next Steps

- Examine characteristics of accurate and inaccurate reporters
- Compare to CPS reporting accuracy metrics
- Explore utility of experimental Portal/Premium/Subsidy questions in ACS to categorize public, marketplace, and non-group coverage



Portal, Premium and Subsidy Verbatim Questions

PORTAL: Was this plan obtained through a State or Federal Marketplace, Healthcare.gov, or a similar state website?

PREMIUM: Is there a monthly premium for this plan?

READ IF NECESSARY: A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription costs.

SUBSIDY: Is the cost of the premium subsidized based on family income?

READ IF NECESSARY: A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription costs.

READ IF NECESSARY: Subsidized health coverage is insurance with a reduced premium. Low and middle income families are eligible to receive tax credits that allow them to pay lower premiums for insurance bought through healthcare exchanges or marketplaces.









Thank you!

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