



DECISION DEMOGRAPHICS

February 5, 2014

SUBJECT: Redesigned CPS ASEC Coming in 2014: Income and Health Insurance

Change is coming. For CPS ASEC 2014, the entire sample will receive new health insurance questions, and a 3/8 split of the sample will receive redesigned income questions. Thus, it is probable that official 2014 income and poverty data will be based on only the 5/8 of the sample that will have responded to the existing questions.

The Census Bureau fielded the Redesigned ASEC Content Test in March 2013, as the last stage in preparation for design changes. What follows is extracted from two November 2013 presentations about the Content Test, given at the Federal Committee on Statistical Methodology Research Conference by Census Bureau staff. Personal communication with Census Bureau personnel provided additional details; supporting materials are attached.

INCOME

In 2011 Census contracted for an evaluation of the CPS ASEC instrument to investigate acknowledged problems with collection of income information. Based on the contractors' suggestions Census created a computer assisted instrument to address income underreporting, item nonresponse, and errors resulting from respondent fatigue.

Redesigned ASEC also adapts to present day retirement account realities—retirement, pensions, and annuities are historically under-reported in the ASEC—and better clarifies questions on asset-related income (one of the largest aggregate shortfalls in measured CPS income) such as interest earned on retirement accounts.

The Income Statistics Branch plans to issue a Working Paper in the coming months, describing more completely the results of the Content Test and further research avenues.

Redesigned ASEC incorporates the following, regarding income items:

- 1. Removal of the income screener**

Formerly, only households that report less than \$75K in combined family income were asked about means-tested transfer programs such as SNAP and TANF (the current ASEC instrument may inappropriately screen out some eligible households).

- 2. Separation of “source” and “amount” questions: Dual pass approach**

The first pass identifies all income sources received by the household, while the second pass collects income amounts for sources received by the household (currently, a respondent answering in the affirmative to receiving income is immediately asked the amount). Questions on earnings from jobs, unemployment income, and worker's compensation are unchanged.

3. Tailored skip patterns

Income questions more relevant to known characteristics of household composition (after earnings are collected) are asked first, to help reduce respondent fatigue—all questions are asked, simply in different orders. Three skip patterns are:

- Low income: prioritizes questions on public assistance and food stamps
- Senior (62+): prioritizes disability and retirement questions
- Default (all other households): the order closely reflects the current instrument, but removes the family income screener

4. Income range follow-ups for Don't know/Refused

A respondent that DK/R to provide an amount for an income source they (or someone in the household) indicated as having received is asked new questions, aimed to get a range (High, Middle, and Low bracketed ranges, specific to income source, were developed) in lieu of an exact dollar amount.

5. Distinguishing between retirement accounts and other interest earning assets Revised disability, survivor, and retirement questions

In the current ASEC, one broad question identifies sources of pension and retirement income. In Redesigned ASEC, retirement accounts and annuities are a stand-alone series of questions; the instrument asks specifically about pensions, then retirement accounts, and lastly annuities.

New questions on withdrawals and distributions from retirement accounts were added (the Urban Institute identified that the ASEC misses over 90 percent of retirement account withdrawals). To make sure withdrawals are not incorrectly counted as income, a follow-up question asks about roll-overs or reinvestments to other accounts.

Redesigned ASEC also asks a series of specific question about each possible source of interest, dividend, and capital gain income (it is estimated the current ASEC misses about 40 percent of aggregate interest income and about 75 percent of dividend income; it makes no distinction between sources of investment income, and does not query capital gains). If a respondent DK/R, a follow-up question asks the total value of the account at the end of the year; Census will then estimate interest earned. Adding multiple ways of capturing this information allows a targeted reduction of under-reporting and item nonresponse.

Sources of disability income were separated into individual questions to ease confusion: SSDI, SSI, or other forms of disability pay.

Content Test:

For the March 2013 Content Test, responses to selected questions from the current and redesigned instruments were presented. Preliminary comparisons were made using this non-representative sample, as a starting point for further research. The upcoming Working Paper will elaborate on these results.

The 3/8 split of the 2014 sample who will receive the redesigned income questions will essentially be a large-scale test of the Redesign's effect on income and poverty measures. For

this 3/8 split, the selection of households is random across 7 of the 8 rotation groups. The exception is 1st month-in-sample households; a technical barrier prevented a random selection of these households, so all will receive the traditional income questions.

Conclusions:

Preliminary analysis shows that Redesigned ASEC captured more sources of income, more reported amount values, and possibly higher totals of aggregate income than the current production instrument.

HEALTH INSURANCE

The CPS ASEC generates widely-used estimates on health insurance coverage and the uninsured. Qualitative research has shown that the calendar-year measure is flawed. Estimates reflect a mixture of current and past year coverage, and may overstate the uninsured rate—i.e., some respondents do not focus on the calendar year reference period, but rather report on their current insurance status; those with more recent coverage are more likely to report accurately than those with coverage farther in the past.

The Redesigned ASEC incorporates the following regarding health insurance questions:

1. Improves upon calendar year by adding questions about current coverage (referred to as point-in-time)
2. New content:
 - Health insurance exchanges, “marketplaces”
 - Employer-sponsored insurance offers and take-up

For the Content test, the complete health insurance sections from both the production ASEC and the Redesigned ASEC that were administered from the March 2013 call centers were compared.

Results:

1. The Content Test yielded lower estimates of uninsured than production ASEC.
2. The calendar year estimate of uninsured was lower than the point-in-time estimate.

See attached presentation “*Health Insurance in the Current Population Survey: Redesign and Production*” for details.

Conclusions:

1. Initial support for the redesigned instrument
2. Limitations: high nonresponse
3. Future research is planned, especially to examine if nonresponse impacted results
4. The Health Insurance Redesign has obtained approval from OMB to replace production ASEC in 2014

[Federal Register Volume 77, Number 232 (Monday, December 3, 2012)]

[Notices]

[Pages 71574-71575]

From the Federal Register Online via the Government Printing Office [www.gpo.gov]

[FR Doc No: 2012-29055]

DEPARTMENT OF COMMERCE

Submission for OMB Review; Comment Request

The Department of Commerce will submit to the Office of Management and Budget (OMB) for clearance the following proposal for collection of information under the provisions of the Paperwork Reduction Act (44 U.S.C. chapter 35).

Agency: U.S. Census Bureau.

Title: 2013 Current Population Survey Annual Social & Economic Supplement.Content Test.

OMB Control Number: None

Form Number(s): The automated survey instrument has no form number.

Type of Request: New collection.

Burden Hours: 10,000.

Number of Respondents: 15,000.

Average Hours Per Response: 40 minutes.

Needs and Uses: The Current Population Survey (CPS) Annual Social and Economic Supplement (ASEC) is used to produce official estimates of income and poverty, and it serves as the most widely-cited source of estimates on health insurance and the uninsured. These statistics have far-ranging implications for policy and funding decisions. Alternative sets of questions on income and health insurance have been developed and are now slated for a large-scale field test to evaluate the questions and the estimates they generate.

With regard to income, the CPS ASEC was converted to computer assisted interviewing (CAI) in 1994. This conversion, however, essentially took the questions and skips patterns of the paper questionnaire, and put them on a computer screen. Automated data collection methods allow for complicated skips, respondent-specific question wording, and carry-over of data from one interview to the next. The computerized questionnaire also permits the inclusion of several built-in editing features, including automatic checks for internal consistency and unlikely responses, and verification of answers. With these built-in editing features, errors can be caught and corrected during the interview itself. It has been more than 30 years since the last major redesign of the income questions of this questionnaire (1980), and the need to modernize this survey to take advantage of CAI technologies has become more and more apparent.

Regarding health insurance, the CPS ASEC health insurance questions have measurement error due to both the reference period and timing of data collection. Qualitative research has

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shown that some respondents do not focus on the calendar year reference

period, but rather report on their current insurance status. Quantitative studies have shown that those with more recent coverage are more likely to report accurately than those with coverage in the more past. A new set of integrated questions on both current and past calendar year status should produce more accurate estimates of past year coverage. This is because the current coverage status questions may serve as an anchor to elicit more accurate reports of past year coverage than the standard methodology.

In addition to making improvements to the core set of questions on health insurance, in 2014 the Affordable Care Act is set to go into effect. One of the main features of the ACA is the ``Health Insurance Exchange.'' These are joint federal-state partnerships designed to create a marketplace of private health insurance options for individuals and small businesses. While these Exchanges are still in development and states have broad flexibility in designing the programs, it is essential for the federal government to have a viable methodology in place when the Affordable Care Act goes into effect to measure Exchange participation, and to measure types of health coverage (in general) in the post-reform era.

Lastly, the current health insurance status questions lend themselves to questions about whether an employer offers the employee health insurance. Although this set of questions is new to the CPS ASEC, it has been in CPS production in the Contingent Worker Supplement (CWS). The CWS was fielded in February of 1995, 1997, 1999, 2001 and 2005.

The CPS ASEC field test will be conducted by telephone from one or more of the Census Bureau's telephone data collection centers in March 2013 with retired CPS sample.

The primary purpose of the field study is to evaluate the redesigned questions and assess any improvements over the CPS ASEC status quo design. Based on the results of the content test, if results are favorable for the new instrument, changes may be implemented in the production CPS ASEC in 2014.

Affected Public: Individuals or households.

Frequency: One time only.

Respondent's Obligation: Voluntary.

Legal Authority: Title 13 U.S.C., Section 182.

OMB Desk Officer: Brian Harris-Kojetin, (202) 395-7314.

Copies of the above information collection proposal can be obtained by calling or writing Jennifer Jessup, Departmental Paperwork Clearance Officer, (202) 482-0336, Department of Commerce, Room 6616, 14th and Constitution Avenue NW., Washington, DC 20230 (or via the Internet at jjessup@doc.gov).

Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to Brian Harris-Kojetin, OMB Desk Officer either by fax (202-395-7245) or email (bharrisk@omb.eop.gov).

Dated: November 27, 2012.

Gwellnar Banks,
Management Analyst, Office of the Chief Information Officer.
[FR Doc. 2012-29055 Filed 11-30-12; 8:45 am]
BILLING CODE 3510-07-P

[Federal Register Volume 78, Number 172 (Thursday, September 5, 2013)]
[Notices] [Pages 54622-54623] From the Federal Register Online via the
Government Printing Office [www.gpo.gov] [FR Doc No: 2013-21538]

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DEPARTMENT OF COMMERCE Census Bureau Proposed Information Collection; Comment
Request; Current Population Survey, Annual Social and Economic Supplement
AGENCY: U.S. Census Bureau, Commerce. ACTION: Notice.

SUMMARY: The Department of Commerce, as part of its continuing effort to reduce
paperwork and respondent burden, invites the general public and other Federal
agencies to take this opportunity to comment on proposed and/or continuing
information collections, as required by the Paperwork Reduction Act of 1995.

DATES: To ensure consideration, written comments must be submitted on or before
November 4, 2013.

ADDRESSES: Direct all written comments to Jennifer Jessup, Departmental
Paperwork Clearance Officer, Department of Commerce, Room 6616, 14th and
Constitution Avenue NW., Washington, DC 20230 (or via the Internet at
jjessup@doc.gov).

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies
of the information collection instrument(s) and instructions should be directed
to Aaron Cantu, U.S. Census Bureau, DSD/CPS HQ- 7H108D, Washington, DC 20233-
8400, (301) 763-3806 (or via the Internet at aaron.benjamin.cantu@census.gov).

SUPPLEMENTARY INFORMATION:

I. Abstract The Census Bureau plans to request clearance for the collection
of data concerning the Annual Social and Economic Supplement (ASEC) to be
conducted in conjunction with the February, March, and April Current Population
Survey (CPS). The Census Bureau has conducted this supplement annually for over
50 years. The Census Bureau and the Bureau of Labor Statistics sponsor this
supplement.

Information on work experience, personal income, noncash benefits, health
insurance coverage, and migration is collected. The work experience items in
the ASEC provide a unique measure of the dynamic nature of the labor force as
viewed over a one-year period. These items produce statistics that show
movements in and out of the labor force by measuring the number of periods of
unemployment experienced by people, the number of different employers worked
for during the year, the principal reasons for unemployment, and part-/full-
time attachment to the labor force. We can make indirect measurements of
discouraged workers and others with a casual attachment to the labor market.

The income data from the ASEC are used by social planners, economists,
government officials, and market researchers to gauge the economic well-being
of the country as a whole, and selected population groups of interest.
Government planners and researchers use these data to monitor and evaluate the
effectiveness of various assistance programs. Market researchers use these data
to identify and isolate potential customers. Social planners use these data to
forecast economic conditions and to identify special groups that seem to be
especially sensitive to economic fluctuations. Economists use ASEC data to
determine the effects of various economic forces, such as inflation, recession,
recovery, and so on, and their differential effects on various population
groups.

A prime statistic of interest is the classification of people in poverty and how this measurement has changed over time for various groups. Researchers evaluate ASEC income data not only to determine poverty levels but also to determine whether government programs are reaching eligible households.

The ASEC also contains questions related to:

- (1) Medical expenditures;
- (2) Presence and cost of a mortgage on property;
- (3) Child support payments; and
- (4) Amount of child care assistance received.

These questions enable analysts and policymakers to obtain better estimates of family and household income, and more precisely gauge poverty status. It has been more than 30 years since the last major redesign of the income questions of this questionnaire (1980), and the need to modernize this survey to take advantage of computer assisted interviewing (CAI) technologies has become more and more apparent.

To this end, the redesigned 2014 ASEC questionnaire incorporates the following strategies:

- customization of income questions to fit specific demographic groups
- use of better targeted questions for certain income types that are currently not well reported

In addition, the CPS ASEC health insurance questions have measurement error due to both the reference period and timing of data collection. Qualitative research has shown that some respondents do not focus on the calendar year reference period, but rather report on their current insurance status. Quantitative studies have shown that those with more recent coverage are more likely to report accurately than those with coverage farther in the past. To that end, the redesigned ASEC questionnaire incorporates the following strategies:

- integrate questions on both current and past calendar year status
- ask reciprocity and amounts separately

In addition to making improvements to the core set of questions on health insurance, in 2014 the Patient Protection and Affordable Care Act (PPACA) is set to go into effect. One of the main features of the PPACA is the "Health Insurance Exchange." These are joint federal- state partnerships designed to create a marketplace of private health insurance options for individuals and small businesses. While these Exchanges are still in development and states have broad flexibility in designing the programs, the redesigned ASEC questionnaire puts a viable methodology in place, when the PPACA goes into effect, to measure Exchange participation and to measure types of health coverage in general in the post-reform era.

Lastly, the point-in-time health insurance questions lend themselves to additional questions concerning whether the current employer offered the respondent health insurance coverage. Although this set of questions is new to the CPS ASEC, it has been in CPS production in the Contingent Worker Supplement (CWS). The CWS was fielded in February of 1995, 1997, 1999, 2001 and 2005.

The ASEC 2014 data collection instrument will have a split-design structure, with two separate treatments for the income-related section. Only the income questions will have separate treatments; other sections will have only one treatment. Five-eighths ($\frac{5}{8}$) of the sample will have income questions from the ``traditional'' design, while three-eighths ($\frac{3}{8}$) will have income questions from the ``redesigned'' ASEC. This split-design will enable Census Bureau analysts to create a ``cross-walk'' when analyzing the effects of the redesigned ASEC on income and poverty estimates. T

The U.S. Census Bureau continues to follow the 1999 mandate from Congress regarding passage of the State Children's Health Insurance Program (SCHIP), or Title XXI. The mandate increased the sample size for the CPS, and specifically the ASEC, to a level achieving estimates that are more reliable for the number of individuals participating in this program at the state level. Since 2000, the ASEC is conducted in February, March, and April, rather than only in March, to achieve the increase in sample size.

II. Method of Collection The ASEC information will be collected by both personal visit and telephone interviews in conjunction with the regular February, March and April CPS interviewing. All interviews are conducted using computer-assisted interviewing.

III. Data OMB Control Number: 0607-0354. Form Number: There are no forms. We conduct all interviewing on computers. Type of Review: Regular submission. Affected Public: Individuals or households. Estimated Number of Respondents: 78,000. Estimated Time per Response: 25 minutes. Estimated Total Annual Burden Hours: 32,500. Estimated Total Annual Cost: There are no costs to the respondents other than their time to answer the CPS questions. Respondent's Obligation: Voluntary. Legal Authority: Title 13, United States Code, Section 182; and Title 29, United States Code, Sections 1-9.

IV. Request for Comments Comments are invited on: (

A) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility;

(B) The accuracy of the agency's estimate of the burden (including hours and cost) of the proposed collection of information;

(C) Ways to enhance the quality, utility, and clarity of the information to be collected; and

(D) Ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval of this information collection; they also will become a matter of public record.

Dated: August 29, 2013. Gwellnar Banks, Management Analyst, Office of the Chief Information Officer. [FR Doc. 2013-21538 Filed 9-4-13; 8:45 am] BILLING CODE 3510-07-P

SUPPORTING STATEMENT

U.S. Department of Commerce

U.S. Census Bureau

2013 Current Population Survey Annual Social and Economic Supplement Content Test

OMB Control Number 0607-XXXX

Part A – Justification

Question 1. Necessity of the Information Collection

The Current Population Survey (CPS) Annual Social and Economic Supplement (ASEC) is used to produce official estimates of income and poverty, and it serves as the most widely-cited source of estimates on health insurance and the uninsured. These statistics have far-ranging implications for policy and funding decisions. Alternative sets of questions on income and health insurance have been developed and are now slated for a large-scale field test to evaluate the questions and the estimates they generate.

With regard to income, the CPS ASEC was converted to computer assisted interviewing (CAI) in 1994. This conversion, however, essentially took the questions and skips patterns of the paper questionnaire, and put them on a computer screen. Automated data collection methods allow for complicated skips, respondent-specific question wording, and carry-over of data from one interview to the next. The computerized questionnaire also permits the inclusion of several built-in editing features, including automatic checks for internal consistency and unlikely responses, and verification of answers. With these built-in editing features, errors can be caught and corrected during the interview itself. It has been more than 30 years since the last major redesign of the income questions of this questionnaire (1980), and the need to modernize this survey to take advantage of CAI technologies has become more and more apparent.

Regarding health insurance, the CPS ASEC health insurance questions have measurement error due to both the reference period and timing of data collection. Qualitative research has shown that some respondents do not focus on the calendar year reference period, but rather report on their current insurance status. Quantitative studies have shown that those with more recent coverage are more likely to report accurately than those with coverage in the more past. A new set of integrated questions on both current and past calendar year status should produce more accurate estimates of past year coverage. This is because the current coverage status questions may serve as an anchor to elicit more accurate reports of past year coverage than the standard methodology.

In addition to making improvements to the core set of questions on health insurance, in 2014 the Affordable Care Act is set to go into effect. One of the main features of the ACA is the “Health Insurance Exchange.” These are joint federal-state partnerships designed to create a marketplace of private health insurance options for individuals and small businesses. While these Exchanges are still in development and states have broad flexibility in designing the programs, it is essential for the federal government to have a viable methodology in place when the Affordable Care Act

goes into effect to measure Exchange participation, and to measure types health coverage (in general) in the post-reform era.

Lastly, the current health insurance status questions lend themselves to questions about whether an employer offers the employee health insurance. Although this set of questions is new to the CPS ASEC, it has been in CPS production in the Contingent Worker Supplement (CWS). The CWS was fielded in February of 1995, 1997, 1999, 2001 and 2005.

Please see attachments D, E, and F for a description of the redesigned health insurance instrument.

The CPS ASEC field test will be conducted by telephone from one or more of the Census Bureau's telephone data collection centers in March 2013 with retired CPS sample. The survey is being conducted under the legal authority of Title 13, United States Code, Section 182.

Question 2. Needs and Uses

The primary purpose of the field study is to evaluate the redesigned questions and assess any improvements over the CPS ASEC status quo design. Evaluations will be carried out by staff in the Social, Economic and Housing Statistics Division and the Center for Survey Measurement and will involve a range of different methods to address the following research questions:

A. Income

1. Are the test and production response distributions for each income type comparable?
2. How do test and production estimates of proportions of people receiving income compare by type of income?
3. How do test and production estimates (means and medians) of income compare?
4. How do test and production item missing data rates compare?
5. How do test and production response error (i.e., bias) in the estimate of reciprocity and amount by income type compare?
6. How do test and production estimates of poverty rates compare?
7. Do either the test or production instruments elicit respondent or interviewer behaviors that may contribute to interviewer or respondent error?

B. Health Insurance

1. Which of the two approaches results in higher estimates of insurance coverage?
2. Which of the two approaches results in higher estimates of public insurance coverage?
3. Which of the two approaches results in higher estimates of private insurance coverage?
4. Which of the two approaches results in lower item non-response rates for types of health insurance?
5. How does the offer and take-up of employer-provided health benefits compare to the Survey of Income and Program Participation?
6. How do the Health Insurance Exchange participation estimates in Massachusetts compare to the administrative totals in Massachusetts?

Information quality is an integral part of the pre-dissemination review of the information disseminated by the Census Bureau (fully described in the Census Bureau's Information Quality

Guidelines). Information quality is also integral to the information collections conducted by the Census Bureau and is incorporated into the clearance process required by the Paperwork Reduction Act.

Based on the results of the content test, if results are favorable for the new instrument, changes may be implemented in the production CPS ASEC in 2014.

Question 3. Use of Information Technology

All interviews will be carried out using a Computer-Assisted Telephone Interviewing (CATI) instrument and data will be transmitted electronically from the telephone facilities to Census Bureau headquarters in Suitland. In general, CATI instruments offer smooth, efficient administration of questionnaires, since the sequencing of questions is handled behind-the-scenes by the program, not by the interviewer.

In the redesign, this automation is heavily exploited in the health insurance series. Information gathered early in the interview is stored for later use in the interview. This feature enhances efficiency and reduces burden. Specifically, the full series of health insurance questions are asked about the household respondent. Data are collected from the respondent on each type of health insurance coverage from January 1 of the previous calendar year up until the interview day and the months of coverage.

In multi-person households, there is an additional set of questions to determine whether other household members are (or were) also covered by the same types of coverage and their months of coverage. After the household respondent's interview is complete, he or she is asked a set of questions about the second person on the roster. If the second person was mentioned as being covered by the plan already reported in the household respondent's interview (i.e., a family plan), then two questions are asked about that second person; did the second person have any other health coverage and when (from January 1 up until the interview day). If the second person does not have additional coverage, no more questions are asked about that person. When additional plans are reported, the series repeats and details on plan type, months of coverage, and others on the same plan are gathered. The series continues in this fashion for the remainder of household members on the roster. This approach offers the specificity of asking about each household member by name, but reduces burden substantially in cases where multiple household members share the same coverage.

The test of the new income questions take advantage of technology because it is exploiting CATI to get better data and reduce burden. It will permit the use of several built-in editing features, including automatic checks for internal consistency and unlikely responses, and verification of answers. It will allow for custom tailoring of income question order to match the demographic make-up of the household and allow for dependent interviewing.

Question 4. Efforts to Identify Duplication

While other federal and non-federal agencies collect data on health insurance coverage, each of these surveys has a different history, purpose, constraints and different methodologies, and all result in different estimates. The American Community Survey, for example, collects data on point-in-time coverage but not coverage throughout the previous calendar year.

Income from CPS ASEC is the most thorough survey in regards to other federal surveys. For instance, the American Community Survey collects income information on eight types while the CPS ASEC collects income information on over fifty types. The CPS ASEC is also the source of official poverty estimate.

Question 5. Minimizing Burden

Small businesses or other small entities are not asked to report information.

Question 6. Consequences of Less Frequent Collection

The redesign of the income and health insurance questions is aimed at testing new content and reducing measurement error in the CPS ASEC. It is likely that the Census Bureau will decide that there is a break in series for the health insurance estimates. The Affordable Care Act will go into effect in 2014. The 2014 CPS ASEC will report health insurance status for the calendar year 2013. This is important because the 2014 CPS ASEC will serve as the baseline for health reform.¹ If the changes in the health insurance questions occur after 2014, there will not be baseline measurement.

Question 7. Special Circumstances

There are no special circumstances.

Question 8. Consultations Outside the Agency

For more than a decade Census Bureau staff have been collaborating and communicating with individuals outside the bureau who have been closely involved in the technical matters of health insurance measurement. These individuals include Don Oellerich and Ben Sommers (at the U.S. Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation), Michael Davern (of the University of Chicago and the National Opinion Research Center), Kathleen Call (of the State Health Access Data Center), Linda Bilheimer and Diane Makuc (of the National Center for Health Statistics), and Steve Hill (at the Agency for Healthcare Research and Quality). Efforts have also been made to both inform and solicit comments from the research community on research findings and plans for future tests through a number of publications, conferences and seminars.

¹ Explicitly, the uninsured rate will be used as a factor in calculating payments made by Medicare to hospitals that treat a disproportionate share of low-income patients (H. R. 4872—27). ACA does not specify which Census Bureau data to use.

In 2011, Westat Inc., with assistance from the Urban Institute, was contracted to evaluate the CPS ASEC instrument. In April of that year, they issued a report entitled “Cognitive Testing of Potential Changes to the Annual Social and Economic Supplement of the Current Population Survey” (see Attachment H). They documented potential changes to income questions to correct income errors of varying magnitudes across income types. They also conducted cognitive interviews for the new income questions in particular subpopulations.

The Census Bureau published a notice on July 5, 2012 (77 FR page 39678-9) announcing our intention to submit this test for approval. We received no official comments on this notice.

Question 9. Paying Respondents

This study will not involve any payments to respondents.

Question 10. Assurance of Confidentiality

Respondents are informed through an advance letter and in the survey introduction that the survey: (1) is being conducted under the authority of Title 13, Unites States Code, Section 182; (2) has been approved by the OMB under project number 0607-xxxx; (3) takes an average of 40 minutes per household to complete; and (4) is voluntary. Respondents are also informed that the Census Bureau is required under Section 9 of Title 13 to keep their information confidential and use it for statistical purposes only. The advance letter also solicits comments from respondents and provides an address and email address for sending these comments. It also states that the OMB number legally certifies the information collection. Please see attachments B and C.

Question 11. Justification for Sensitive Questions

No sensitive questions are asked in this study.

Question 12. Estimate of Hour Burden

The 2013 CPS ASEC content test will be conducted only one time, by telephone, with retired CPS sample, with a goal of 15,000 completed household interviews. Typically, a single respondent reports for the entire household. The interview is expected to take 40 minutes per household on average, resulting in 10,000 total annual burden hours.

Question 13. Estimate of Cost Burden

There are no costs to respondents other than that of their time to respond.

Question 14. Cost to Federal Government

The total cost estimate for the production of the CATI instrument, testing, and all phases of preparation and administration of data collection is \$1,399,960. The Census Bureau will bear the full cost of the study.

Question 15. Reason for Change in Burden

The increase in burden is attributable to the information collection being submitted as new.

Question 16. Project Schedule

General research leading up to this study has been ongoing. Preliminary planning for this particular field test began in December 2011. Below is a general schedule.

2012

- January-May: (1) Prepare general project plan
(2) Develop detailed specifications for CATI instrument.
(3) Develop detailed post-processing specifications.
- May: Hold kick-off meeting among inter-divisional Census staff; develop schedule; assign tasks.
- June - December: Work with staff from the Demographic Surveys Division and the Technology Management Office, who will author the instrument.
Conduct first formal test of CATI instrument (“user’s test”).

2013

- January: (1) Develop specifications for sample selection.
(2) Develop advance letter and procedures
(3) Conduct formal test of CATI instrument (“systems test”)
(4) Develop training materials
- February: (1) Select and prepare sample.
(2) Conduct third formal test of CATI instrument (“verifications test”)
- March: (1) Mail advance letters
(2) Conduct training
- March - May (3) Conduct training and data collection
- June - August Analysis and preparation of reports for internal use, research conferences and publications.

Question 17. Request to Not Display Expiration Date

The expiration date will be contained in the advance letter sent to respondents.

Question 18. Exceptions to the Certification

There are no exceptions to the Certification for Paperwork Reduction Act Submissions.

Health Insurance in the Current Population Survey: Redesign and Production

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U.S. Census Bureau

Presented at FCSM in Washington DC on November 6, 2013

The views expressed in this research, including those related to statistical, methodological, technical, or operational issues, are solely those of the author and do not necessarily reflect the official positions or policies of the Census Bureau. The author accepts responsibility for all errors. This presentation reports the research and analysis undertaken by Census Bureau staff. It has undergone more limited review than official publications.



U.S. Department of Commerce
Economics and Statistics Administration
U.S. CENSUS BUREAU

Health Insurance and the CPS

- Health insurance is increasingly important but difficult to measure
- CPS ASEC provides key estimates, but has limitations
- Redesigned instrument fielded in 2013 Content Test
- May replace production 2014 CPS ASEC, pending OMB approval

Overview

- Background
- Objectives
- Data and methods
- Findings
- Discussion

Development of Redesigned Health Insurance Instrument

- Limitation: uninsured rate may be too high
- Redesign based on over 10 years of research
- Improved calendar year by adding point-in-time

Features of Redesigned Health Insurance Instrument

- Improved calendar year by adding point-in-time
- Takes full advantage of automated instrument
- Adds new content
 - Health insurance exchanges, “marketplaces”
 - Employer-sponsored insurance offers and take-up

Objectives

- Comparing the content test to the production instrument:
 - How does the calendar year estimate of health insurance differ?
- Comparing estimates from different time frames within the content test:
 - How does the calendar year estimate differ from the point-in-time measure?

Data and Methods

Differences between content test and production ASEC:

1. Survey questions
2. Survey mode: March call centers only
3. Survey sample: reweight data

	Production ASEC, weighted	March call centers, weighted	Content test, weighted	“Production ASEC,” reweighted
% under 65	86.1%	75.2%	85.3%	85.3%

Data and Methods

“Production ASEC”

- Unedited
- March call centers from 2013
- Reweighted to weighted content test sample
- Fully complete health insurance section
- 10,829 individuals

Content test

- Unedited
- March call centers from 2013
- Weighted to national population
- Fully complete health insurance section
- 16,410 individuals

Disclaimer: These data are being released on request, despite concerns about their quality. The Census Bureau’s policy is not to withhold data that are available, unless releasing such data would violate confidentiality requirements. The Census Bureau recommends using these data only for research or evaluation purposes, and not to make statements about characteristics of the population or economy because they do not meet the criteria outlined in the Census Bureau’s Statistical Quality standard: Releasing Information Product.

Health Insurance by Coverage Type

	“Production ASEC”	Content test	Difference (Content Test - “Production”)
Uninsured	13.9	10.6	-3.3*
Private	70.4	72.2	2.0
Government	29.0	28.2	-0.8
Medicare	15.6	15.7	0.1
Medicaid	10.8	11.2	0.4

Source: CPS ASEC health insurance production instrument and content test (2013)

Note: “Production ASEC” estimates are from unedited data that uses adjusted population weight; March call centers only; Content test estimates are from unedited data weighted to population level; March call centers only; * indicates significant at the 90% confidence level

Health Insurance by Coverage Type (Under 18)

	“Production ASEC”	Content test	Difference (Content Test - “Production”)
Uninsured	7.5	6.0	-1.5
Private	68.4	66.3	-2.1
Government	32.5	31.5	-0.9
Medicare	0.0	0.8	0.7*
Medicaid	27.2	28.5	1.3

Source: CPS ASEC health insurance production instrument and content test (2013)

Note: “Production ASEC” estimates are from unedited data that uses adjusted population weight; March call centers only; Content test estimates are from unedited data weighted to population level; March call centers only; * indicates significant at the 90% confidence level

Uninsured by Race and Hispanic Origin

Race and Hispanic origin	“Production ASEC”	Content test	Difference (Content Test - “Production”)
White alone	13.2	9.9	-3.3*
White non-Hispanic	8.5	6.4	-2.1*
Black alone	17.4	12.4	-5.0*
Asian alone	15.8	10.3	-5.5*
Hispanic	34.7	25.9	-8.8*

Source: CPS ASEC health insurance production instrument and content test (2013)

Note: “Production ASEC” estimates are from unedited data that uses adjusted population weight; March call centers only; Content test estimates are from unedited data weighted to population level; March call centers only; * indicates significant at the 90% confidence level

Uninsured by Age

Age	“Production ASEC”	Content test	Difference (Content Test - “Production”)
0 to 18	7.9	6.1	-1.8
19 to 25	26.2	18.3	-7.9
26 to 34	26.8	20.1	-6.6
35 to 44	24.3	14.1	-10.1*
45 to 64	12.7	11.4	-1.3
65+	1.7	1.5	-0.2

Source: CPS ASEC health insurance production instrument and content test (2013)

Note: “Production ASEC” estimates are from unedited data that uses adjusted population weight; March call centers only; Content test estimates are from unedited data weighted to population level; March call centers only; * indicates significant at the 90% confidence level

Content Test: Difference between Calendar Year and Point-in-Time

Estimate	Expected direction of difference	Difference (CY-PIT), percentage point
Uninsured	-	-1.4*
Private	+	1.6*
Government	+	0.3
Medicare	- or null	-0.4*
Medicaid	+	0.6*

Source: CPS ASEC content test (2013)

Note: Content test estimates are from unedited data weighted to population level; March call centers only; * indicates significant at the 90% confidence level

Discussion

- Production ASEC vs. Content Test
 - Content test yielded lower estimates of uninsured than production ASEC
- Point-in-Time vs. Calendar Year (Content Test only)
 - Calendar year estimate of uninsured was lower than point-in-time estimate

Limitations and Future Research

- Initial support for the redesigned instrument
- Limitations: high nonresponse
- Future research
- May replace production ASEC in 2014, subject to OMB approval

Thank you

Questions? Please contact:

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