

README
Health Insurance Coverage

2017 Current Population Survey
Annual Social and Economic Supplement
Research File

Introduction

The 2014 Current Population Survey Annual Social and Economic Supplement (CPS ASEC) included redesigned questions for income and health insurance coverage, followed by changes in the 2015 CPS ASEC to allow spouses and unmarried partners to specifically identify as opposite- or same-sex. While data from the updated collection methods were released on schedule, data processing changes to take advantage of this new content are now available.

The 2017 CPS ASEC Research File provides income, poverty, and health insurance estimates based on these updated CPS ASEC questions as well as a redesigned processing system. This new system introduces demographic changes to account for same sex couples, revised procedures for editing income and health insurance variables, and several new income and health insurance variables. Changes to the editing procedures encompass both changes to the resolution of logically inconsistent data and changes to the imputation methods.

The research file can be linked to other CPS ASEC files and supplements, including the 2017 CPS ASEC production file. There are changes in income, poverty and health insurance estimates between the 2017 research file and the 2017 production file.

Impact on Health Insurance Coverage Estimates

The updated processing system includes a number of changes to CPS ASEC health insurance data that better integrate detailed information from the 2014 questionnaire redesign. For example, the processing system introduces a new method of estimating coverage that builds from subannual estimates to determine whether a person was covered at any point in the previous calendar year. It also refines the methods by which missing and incomplete data are imputed and in which inconsistent information is handled. See “Health Insurance Coverage in the 2017 CPS ASEC Research File” and “Health Insurance Coverage in the Current Population Survey: Estimates from the 2017 Research File” for more information. (Both of these resources are available at <https://www.census.gov/data/datasets/time-series/demo/income-poverty/data-extracts.html>.)

The file also includes additional information about types of coverage held at the time of survey and details about Marketplace coverage that were not previously available. See the “Health Insurance Data User Notes” for information on these variables (also available at <https://www.census.gov/data/datasets/time-series/demo/income-poverty/data-extracts.html>).

Table 1 presents the research file estimates and the production estimates side-by-side. During calendar year 2016, the percentage of people with no health insurance at any time was 7.9 percent using the 2017 CPS ASEC research file, lower than the production file estimate of 8.8 percent. The table also shows the following:

- The percentage of people with any private coverage in 2016 was higher on the research file (68.1 percent) compared with the production file (67.5 percent).^{1,2}
- Both employment-based coverage and direct purchase coverage were lower on the research file than the production file.
- Medicaid coverage is lower on the research file (18.9 percent) than on the production file (19.4 percent.) Initial evaluation (Berchick & Jackson, 2019) concludes that this is the result of the reduction in multiple coverage.

Comparing records from the research file with the production file shows that about 4.8 percent of the sample have a change in their health insurance status due to the new processing system. (See “Health Insurance Coverage in the Current Population Survey: Estimates from the 2017 Research File” for more information. <<https://www.census.gov/data/datasets/time-series/demo/income-poverty/data-extracts.html>>.

Background

After a decade of research showing that the CPS ASEC captured less health insurance coverage in comparison with other federal surveys (Hess et al., 2001; Kenney & Lynch, 2010; Pascale, 1999), the Census Bureau introduced a redesigned questionnaire in the 2014 survey (See Vornovitsky & Day, 2015). While data from the updated collection methods were released on schedule (e.g., Berchick, Hood, and Barnett, *Health Insurance Coverage in the United States: 2017* uses the data from the redesigned questions to examine health insurance coverage from 2013 to 2017), data processing changes to take advantage of this new content are now available.

Plans for Public Engagement

The Census Bureau continues to finalize the CPS ASEC processing system, which will be used to produce estimates from the 2019 CPS ASEC. Researchers at the Census Bureau expect to present detailed estimates using the new processing system for the 2017 and 2018 CPS ASEC at the Population Association of America and Joint Statistical Meetings in 2019. We also plan to host an expert meeting to discuss these changes before the September 2019 release of annual income, poverty and health insurance estimates

¹ Some people may have more than one coverage type during the calendar year.

² For additional information about differences in private and government coverage, see “Health Insurance Coverage in the 2017 CPS ASEC Research File.”

Table 1. Health Insurance Coverage Numbers and Rates by Type of Coverage and Data File Source: 2016

(Numbers in thousands, margins of error in thousands or percentage points as appropriate. Population as of March of the following year. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see www2.census.gov/programs-surveys/cps/techdocs/cpsmar17.pdf)

Coverage type	2017 CPS ASEC Production file ¹				2017 CPS ASEC Research file ²				Difference (2017 CPS ASEC Research File less 2017 CPS ASEC Production File) ⁴	
	Number	Margin of error ³ (±)	Rate	Margin of error ³ (±)	Number	Margin of error ³ (±)	Rate	Margin of error ³ (±)	Number	Rate
Total	320,372	96	X	X	319,794	119	X	X	*-578	X
Any health plan	292,320	541	91.2	0.2	294,657	534	92.1	0.2	*2,337	*0.9
Any private plan ^{5,6}	216,203	1,145	67.5	0.4	217,638	1139	68.1	0.4	*1,435	*0.6
Employment-based ⁵	178,455	1,130	55.7	0.4	176,137	1241	55.1	0.4	*-2,318	*-0.6
Direct-purchase ⁵	51,961	874	16.2	0.3	37,819	698	11.8	0.2	*-14,142	*-4.4
TRICARE ⁵	X	X	X	X	8,129	455	2.5	0.1	X	X
Any government plan ^{5,7}	119,361	1,018	37.3	0.3	110,714	978	34.6	0.3	*-8,646	*-2.6
Medicare ⁵	53,372	396	16.7	0.1	53,932	405	16.9	0.1	*560	0.2
Medicaid ⁵	62,303	931	19.4	0.3	60,461	963	18.9	0.3	*-1,843	*-0.5
Military excluding TRICARE ^{5,8}	X	X	X	X	3,054	174	1.0	0.1	X	X
Military including TRICARE ⁵	14,638	575	4.6	0.2	10,951	499	3.4	0.2	-3,687	*-1.1
Uninsured⁹	28,052	519	8.8	0.2	25,137	498	7.9	0.2	*-2,915	*-0.9

* An asterisk preceding an estimate indicates change is statistically different from zero at the 90 percent confidence level.

X Not applicable.

¹ Estimates from the 2017 CPS ASEC production file correspond to those previously released in the report "Health Insurance Coverage in the United States: 2016", available at www.census.gov/content/dam/Census/library/publications/2017/demo/p60-260.pdf.

² Estimates from the 2017 CPS ASEC research file reflect different underlying universes and weights. For more information, see the research file documentation at www2.census.gov/programs-surveys/demo/datasets/income-poverty/time-series/data-extracts/2017/cps-asec-research-file/2017-asec-research-file-documentation.pdf.

³ A margin of error is a measure of an estimate's variability. The larger the margin of error in relation to the size of the estimate, the less reliable the estimate. This number, when added to and subtracted from the estimate, forms the 90 percent confidence interval. Margin of errors shown in this table are based on standard errors calculated using replicate weights. For more information, see "Standard Errors and Their Use" at www2.census.gov/library/publications/2017/demo/p60-259sa.pdf.

⁴ Details may not sum to totals because of rounding.

⁵ The estimates by type of coverage are not mutually exclusive; people can be covered by more than one type of health insurance during the year.

⁶ In the production file, private health insurance includes coverage provided through an employer or union, coverage purchased directly by an individual from an insurance company, or coverage through someone outside the household. In the research file, private health insurance also includes TRICARE.

⁷ In the research file, government health insurance coverage includes Medicaid, Medicare, CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military. In the production file, government health insurance also includes TRICARE.

⁸ Military health care includes CHAMPVA, as well as care provided by the Department of Veterans Affairs and the military.

⁹ Individuals are considered to be uninsured if they do not have health insurance coverage for the entire calendar year.

Note: The Census Bureau reviewed this data product for unauthorized disclosure of confidential information and has approved the disclosure avoidance practices applied to this release. CBDRB-FY19-ROSS-B0048.

Source: U.S. Census Bureau, Current Population Survey, 2017 Annual Social and Economic Supplements.

References

Berchick, E.R., Hood, E., and J.C. Barnett. 2018. *Health Insurance Coverage in the United States: 2017*. Washington, DC: Government Publishing Office.

Berchick, E.R., and H.M. Jackson. 2019. "Health Insurance Coverage in the Current Population Survey: Estimates from the 2017 Research File." SEHSD Working Paper. Available at <<https://www.census.gov/data/datasets/time-series/demo/income-poverty/data-extracts.html>>

Berchick, E.R., and H.M. Jackson. 2019. "Health Insurance Coverage in the 2017 CPS ASEC Research File." SEHSD Working Paper. Available at <<https://www.census.gov/data/datasets/time-series/demo/income-poverty/data-extracts.html>>

Hess, J., J. Moore, J. Pascale, J. Rothgeb, and C. Keeley. 2001. "The effects of person-level versus household-level questionnaire design on survey estimates and data quality." *Public Opinion Quarterly* 65(4): 574-584.

Kenney, G., and V. Lynch. 2010. "Monitoring children's health insurance coverage under CHIPRA using federal surveys." In *Databases for Estimating Health Insurance Coverage for Children: A Workshop Summary*. Washington, DC: The National Academies Press.

Pascale, J. 1999. "Methodological Issues in Measuring the Uninsured." *Proceedings of the Seventh Health Survey Research Methods Conference*, pp. 167–173.

Vornovitsky, M., and J. Day. 2015. "Health Insurance Measurement and Estimates." <<https://www.census.gov/content/dam/Census/library/working-papers/2015/demo/2015-Vornovitsy-Day-01.pdf>>.