

Who gets it right? Characteristics associated with accurate reporting of health insurance coverage type

Kathleen T Call, SHADAC; Joanne Pascale, US Census Bureau; Angela Fertig, Medica Research Institute; Don Oellerich, Office of the Assistant Secretary for Planning and Evaluation, HHS

INTRODUCTION & GOALS

- Little is known about factors associated with accurate reporting of insurance type. What is known is limited to those with Medicaid.
- Goal is to describe factors associated with accurate reports of insurance type among privately and publicly insured including:
 - Person, respondent, family-level characteristics
 - Health status
 - Social distance between respondent and other members of household (complexity of task)

RATIONALE

Knowing correlates of accurate reporting informs:

- Survey design
- Editing and imputation routines
- Adjustments to estimates of coverage type or the uninsured for policy simulations

STUDY DESIGN

- Collaborated with health plan that offers full range of private and public insurance plans
- Used enrollment records to sample and randomly assign to health insurance question treatments:
 - Current Populations Survey (CPS)
 - American Community Survey (ACS)
- Stratified sample; oversampled public; weighted to health plan population totals
- 15 minute survey, April-June 2015
- 22% response rate (AAPOR RR4)
- Data collected on all household members
- Individual surveys matched to enrollment records; at least one person matched in 87% of households
- Final matched data set: 3,823 people
 - CPS = 1,989
 - ACS = 1,834

METHODS

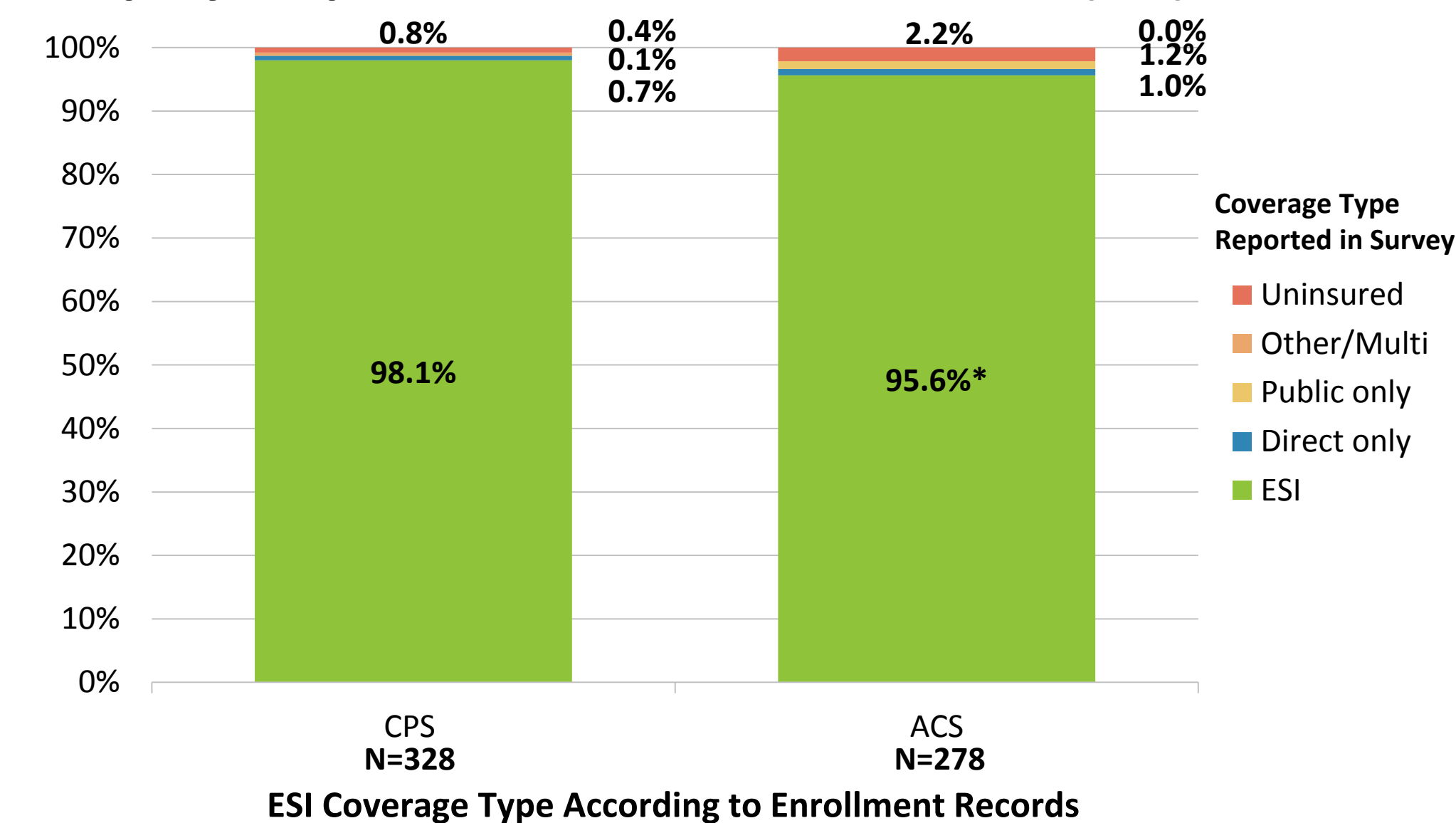
- Logistic regression predicting accurate reporting.
- Chow tests indicate CPS and ACS regressions should be run separately
- Used collinearity tests to refine models

SETTING THE STAGE: REPORTING ACCURACY

Highlights

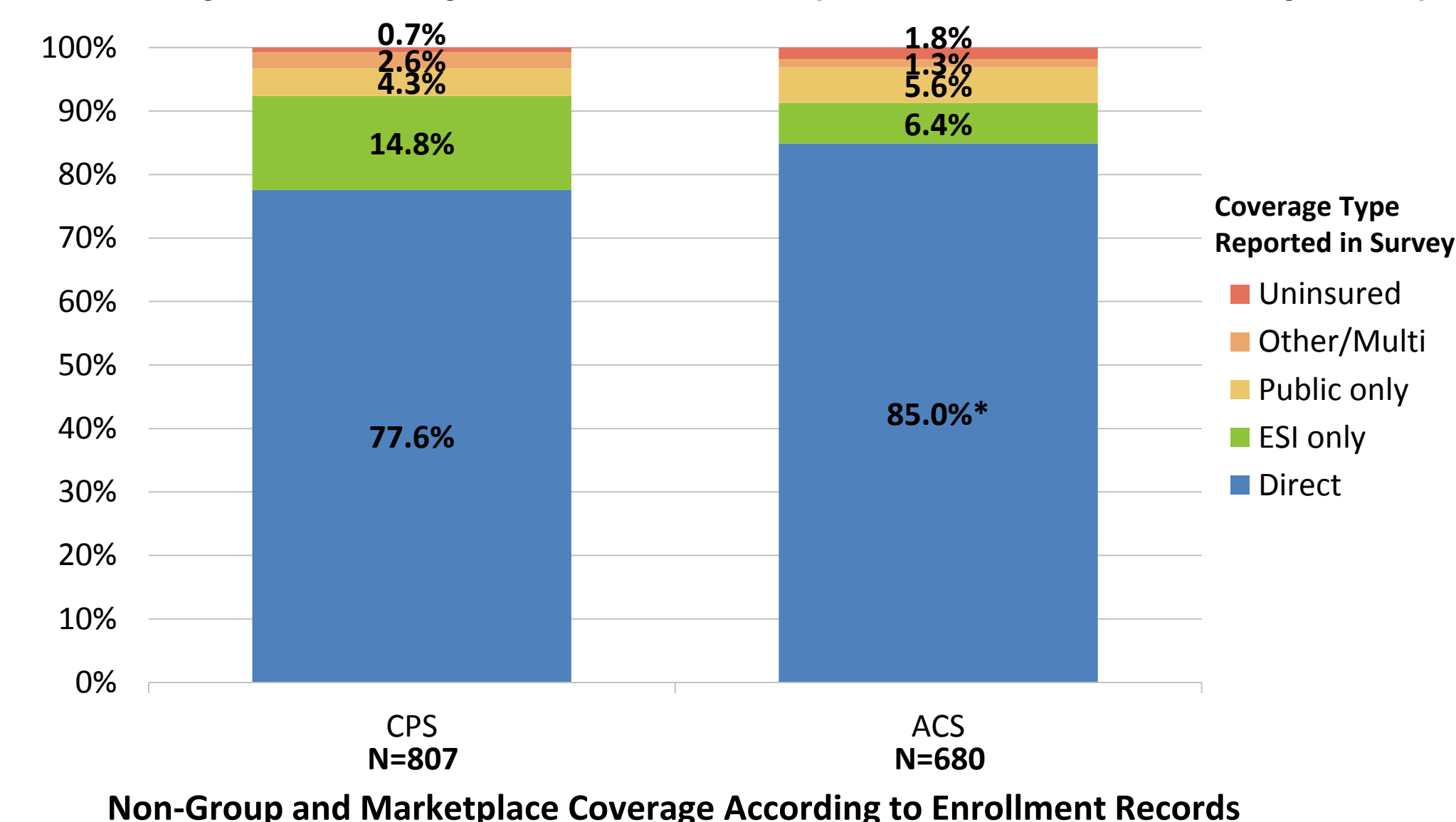
- Reporting accuracy is highest among ESI
 - Lower for direct purchase and Medicaid
- For all coverage types, very few are reported as lacking insurance altogether
 - More likely to be reported with the wrong type of insurance

Figure 1. Coverage reported by survey treatment among employer-sponsored insurance enrollees (ESI)



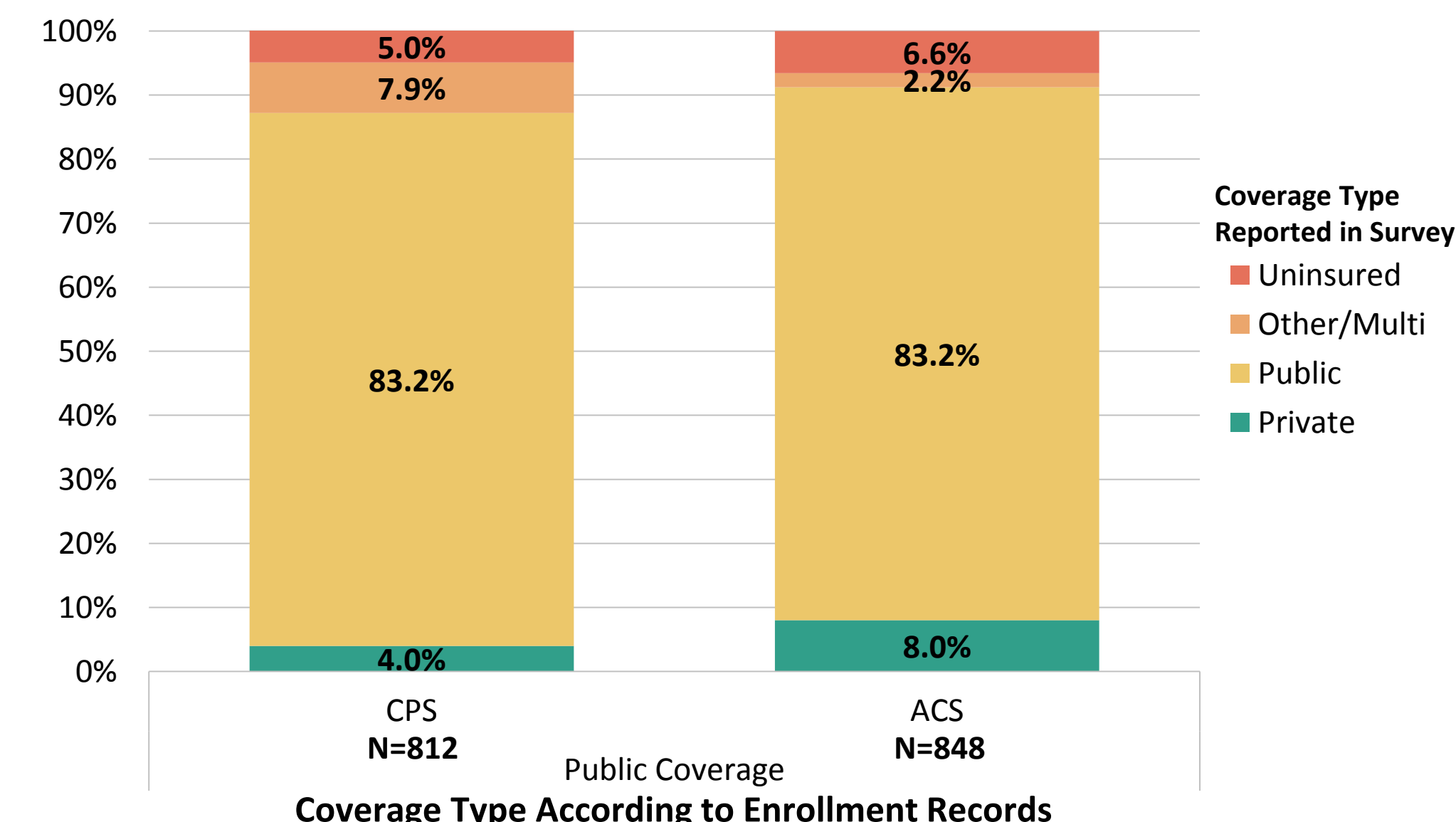
*Indicates significant difference (ps.05) between CPS and ACS
Other/Multi includes reports of Medicare, military, other unspecified and/or multiple reports of any of these coverage types

Figure 2. Coverage reported by survey treatment among direct purchase plan enrollees (on and off Marketplace)



*Indicates significant difference (ps.05) between CPS and ACS
Other/Multi includes reports of Medicare, military, other unspecified and/or multiple reports of any of these coverage types

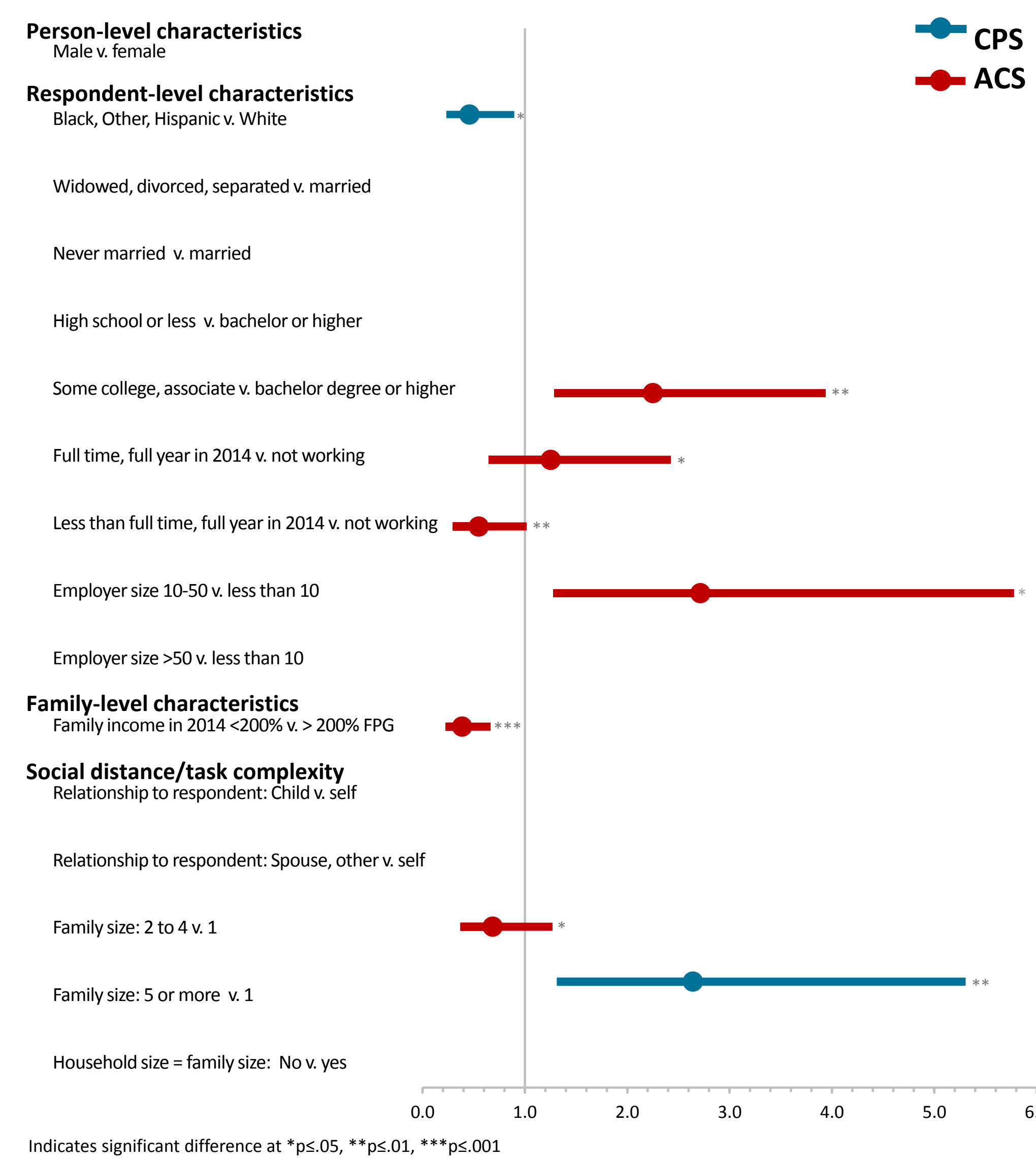
Figure 3. Coverage reported by survey treatment among Medicaid enrollees



*Indicates significant difference (ps.05) between CPS and ACS
Other/Multi includes reports of Medicare, military, other unspecified and/or multiple reports of any of these coverage types

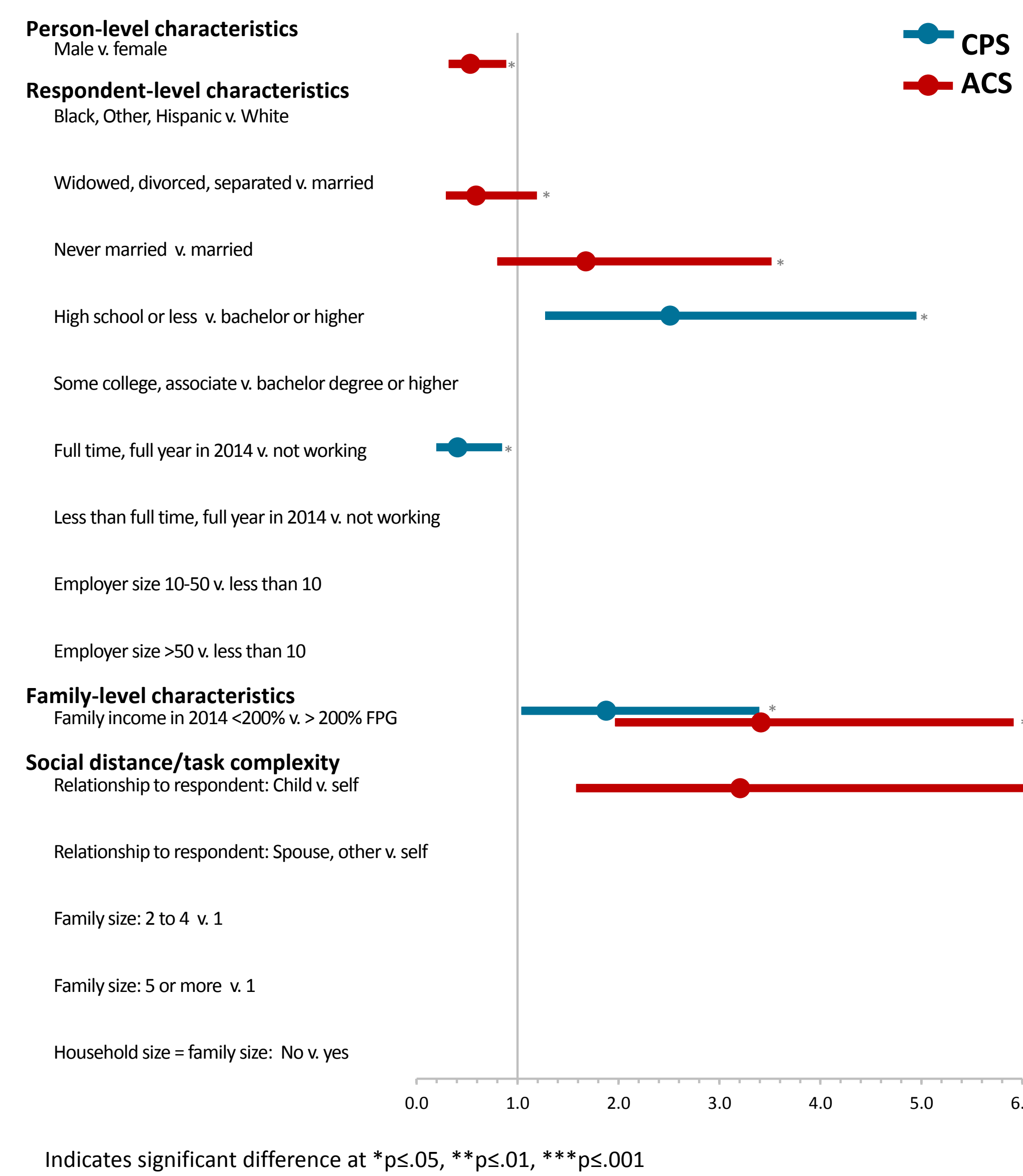
RESULTS: COVARIATES OF ACCURATE REPORTS

Figure 4. Accurate reporting of direct purchase by survey treatment



Indicates significant difference at *ps.05, **ps.01, ***ps.001

Figure 5. Accurate reporting of Medicaid by survey treatment



Indicates significant difference at *ps.05, **ps.01, ***ps.001

SUMMARY OF COVARIATE RESULTS

- This is first look at factors associated with reporting accuracy among those with direct purchase insurance
- Among those with direct purchase insurance reporting accuracy is higher among the socially/structurally advantaged
 - Specifically, white non-Hispanic, full time/full year employed, higher income households
- Consistent with prior research, Medicaid reporting accuracy is higher among the socially/structurally disadvantaged
 - Specifically, those unemployed, from lower income and education households
- Reporting accuracy appears to be more randomly distributed for those in the CPS than ACS treatment (fewer CPS than ACS covariates reach significance)

NEXT STEPS

- Results are preliminary; we continue to refine models
- We will exploit administrative data next:
 - Look at plan enrollment for other household members to pursue “shared coverage hypothesis”
 - Enrollee vs policyholder status
 - Duration, intensity, recency, stability of coverage
- Separate direct purchase on and off the marketplace and those with and without premium subsidy – which covariates matter?
- Explore patterns of misreports
 - For example: direct purchase who report ESI and vice versa

CONTACT INFORMATION: Kathleen Call
callx001@umn.edu