

VIRTUAL HOUSEKEEPING

Welcome to the Survey of Surveys Webinar by Rutgers Center for State Health Policy

The webinar will begin at 10:00am.

- The webinar is being recorded and will be posted at cshp.rutgers.edu
- All attendees will be in listen-only mode.
- For Zoom technical questions, send a chat message directly to Oliver Lontok.
- Submit content questions using the Q&A box.
- There will be brief Q&A breaks throughout and time for questions at the end.

A Survey of Surveys

Measuring Health Coverage and Access to Care in NJ

June 8, 2022

Kristen Lloyd, M.P.H., Senior Research Scientist

Funding for this webinar is provided by core support from the
Robert Wood Johnson Foundation



Visit our website



Connect on LinkedIn



@RutgersCSHP

ACKNOWLEDGEMENTS

- Funding from the Robert Wood Johnson Foundation
- CSHP: Joel Cantor, Sc.D., Margaret Koller, M.S.
Oliver Lontok, M.D., M.P.H, and Joseph Brecht, M.S.
- SPH: Alan Monheit, Ph.D., Bloustein: Jane Miller, Ph.D.



With appreciation for all the great work and very helpful resources provided by:



- NJ Department of Health



- U.S. Census Bureau



- IPUMS



- State Health Access Data Assistance Center (SHADAC)

All errors are mine.

AGENDA

Overview of Surveys

Coverage and Access Questions

Other Selected Survey Content

Accessing Data

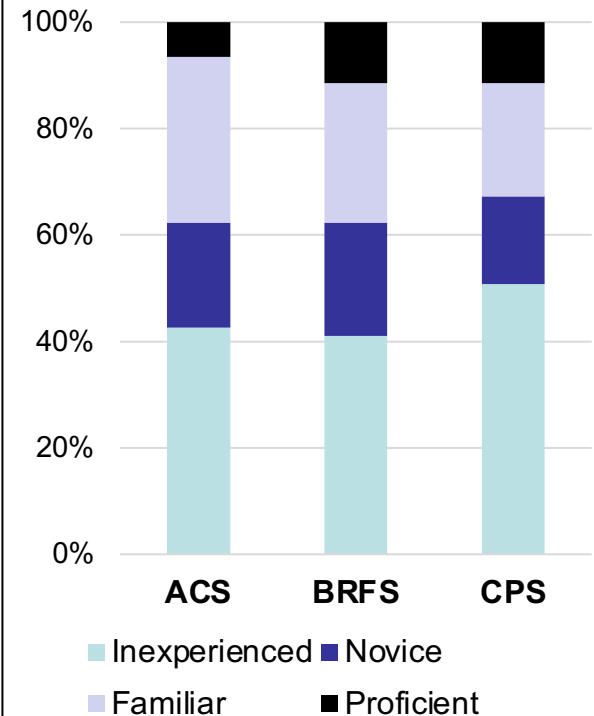
Analysis Guidance

COVID Impact

Resources

Q&A

Webinar Registrants' Familiarity with Surveys



Survey of Surveys

A



**American
Community Survey**

B



**Behavioral Risk
Factor Survey**

C



**Current Population
Survey (ASEC)**

Common Features

- Publicly available; de-identified
- Population-based
- Cross-sectional samples
- Annual estimates with monthly data collection structure
- State-level estimates using probability sampling
- Estimate coverage, specifically insured/uninsured
- Release of estimates for a given measurement year generally begins late summer/fall of following year.

American Community Survey (ACS)



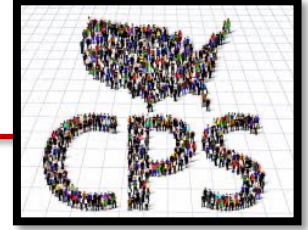
- U.S. Census Bureau
- General Household Survey beginning in 2005
 - replaced Census long form
- Rolling (Jan-Dec) address-based sampling
 - 12 monthly independent samples with 3 month field period
- Household & Person-level estimates
 - Reporting for respondent and each member of household
- Largest sample - 2.2 million households in U.S.

NJ Behavioral Risk Factor Survey (NJBRFs)

- Component of BRFSS, started in 1991
- Sponsored by the NJ Department of Health (NJDOH)
- Technical assistance and funding from CDC
- Monitors behavioral risk factors and chronic conditions
 - Core questions (fixed, rotating, emerging issues) + optional modules + state-added questions
- Telephone survey
- Person-level estimates
 - Adult respondent only
- Medium sample – 160K respondents in U.S.



Current Population Survey (CPS)



- U.S. Census Bureau & Bureau of Labor Statistics
- CPS began 1940, ASEC in 1947
- Labor force participation survey + supplements
 - Health insurance collected in Annual Social and Economic Supplement (ASEC)
- Address-based sampling
 - Monthly rolling panel collection
 - ASEC conducted February-April using March CPS sample plus supplemental sample
- Household, Family & Person-level estimates
 - Reporting for respondent and each member of household
- Smaller sample – ASEC is 90-100K households in U.S.

Understanding Group Quarters (GQs)

Housing Units:

- House
- Apartment
- Mobile home
- Rented room

97%



Institutional Group Quarters:

- Correctional facilities
- Nursing homes
- Psychiatric hospitals

Non-Institutional Group Quarters:

- College dormitories
- Military barracks
- Group homes
- Missions
- Shelters

3%

Understanding Group Quarters (GQs)

Housing Units:

- House
- Apartment
- Mobile home
- Rented room

ACS, NJBRFS, CPS

97%



Institutional Group Quarters:

- Correctional facilities - *ACS*
- Nursing homes - *ACS*
- Psychiatric hospitals - *ACS*

Non-Institutional Group Quarters:

- College dormitories - *ACS, NJBRFS*
- Military barracks - *ACS*
- Group homes – *ACS, CPS*
- Missions – *ACS, CPS*
- Shelters – *ACS, CPS*

3%

Comparison of Key Features

ACS	BRFS	CPS-ASEC
Households and Persons (all ages)	Persons (age 18+)	Households and Persons
Mail; internet; in person	Phone	In person; phone
Entire Population	Non-inst. adults	Civilian non-inst.
Msmt Yr = Survey Yr	Msmt Yr = Survey Yr	Msmt Yr = Survey Yr – 1
Single year & Multiyear (5 years)	Single year	Single year
Various and small geographies (e.g. ZCTA, Census block)	Designed for State; Stretch to County	Designed for National; Stretch to State, Large MSAs
Largest sample	Medium sample	Smallest sample
Coverage ☒	Coverage ☒	Coverage ☒
Access ☐	Access ☒	Access ☐

COVERAGE AND ACCESS

ACS – Core Coverage Question

6 Is this person **CURRENTLY** covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.

	Yes	No
a. Insurance through a current or 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)	☐	☐
c. Medicare, for people 65 and older, or people with certain disabilities	☐	☐
d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability	☐	☐
e. TRICARE or other military health care	☐	☐
f. VA (including those who have ever used or enrolled for VA health care)	☐	☐
g. Indian Health Service	☐	☐
h. Any other type of health insurance or health coverage plan – <i>Specify</i>	☐	☐

- Question introduced in 2008
- Reported for respondent and each member of household at time of survey
- Multiple sources can be reported per person
- Medicaid is grouped with other gov't assistance plans.

NJBRFS – Core Coverage Question

Adult respondent only

1991-2020: *Do you have any kind of health care coverage, including health insurance, prepaid plans such as HMOs, or government plans such as Medicare, or Indian Health Service?*

2021-present: *What is the current primary source of your health insurance? (one used most often)*

- | | | |
|---|---|---|
| <ul style="list-style-type: none"> • A plan purchased through an employer or union (including plans purchased through another person's employer) • A private nongov't plan that you or another family member buys on your own | <ul style="list-style-type: none"> • Medicare • Medigap • Medicaid • Children's Health Insurance Program (CHIP) | <ul style="list-style-type: none"> • Military related health care: TRICARE (CHAMPUS) / VA health care / CHAMP-VA • Indian Health Service • State sponsored health plan • Other government program • No coverage of any type |
|---|---|---|

NJBRFS – Health Care Access Module (HCA)

NJ began using in 2013*

*What is the current primary source of your health insurance? (one used most often)***

- | | | |
|---|---|--|
| <ul style="list-style-type: none"> • A plan purchased through an employer or union (including plans purchased through another person's employer) • A plan that you or | <ul style="list-style-type: none"> another family member buys on your own • Medicare • Medicaid or other state program • TRICARE (formerly CHAMPUS), VA, or | <ul style="list-style-type: none"> Military • Alaska Native, Indian Health Service, Tribal Health Services • Some other source • None (no coverage) |
|---|---|--|

- Also includes periods of uninsurance in last 12 months for insured and duration of uninsurance for uninsured.

**Access to Medical Care Module used by NJ in 2012 asks insurance type.*

***In 2013, multiple responses were allowed.*

CPS – Core Coverage Question

"At any time in 2012, was anyone household covered by ... ?"

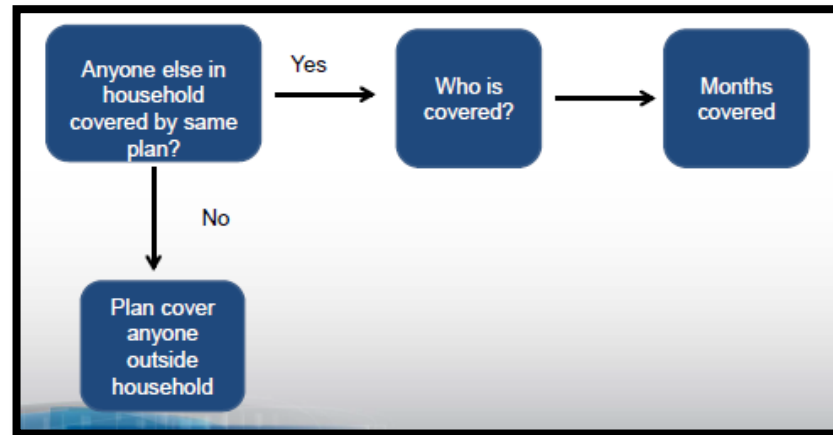
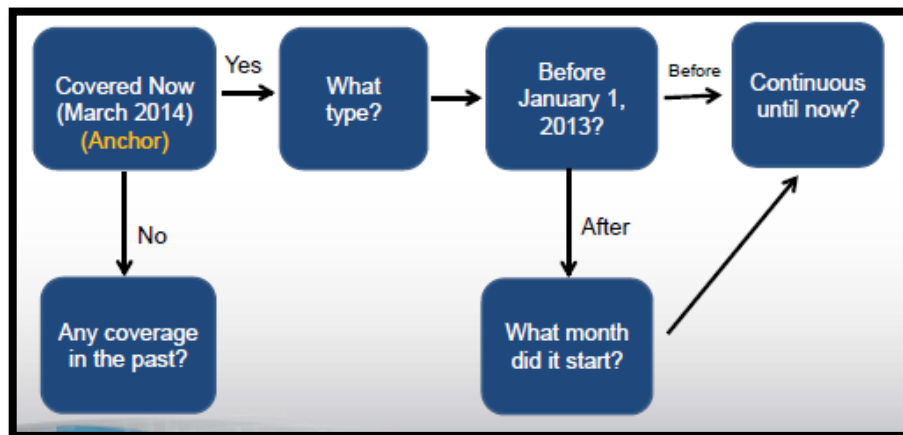
- ☐ Job or Union
- ☐ Direct Purchase
- ☐ Someone outside household
- ☐ Medicare
- ☐ Medicaid
- ☐ CHIP
- ☐ Military
- ☐ State specific plan

Note: Question wording and process for ascertaining this information differs pre-2013 to 2014+ due to major survey redesign.

- Annual retrospective question
- Reported for respondent and each member of household at time of survey
- Multiple sources can be reported
- Also asks who is policyholder for ESI and direct purchase coverage.
- If anyone in household has no coverage reported, a verification question confirms this person was uninsured.

CPS- 2014 Redesign of Coverage Questions

- Asks about current coverage, coverage in last year, and spells of coverage by month (if not continuous).
 - *Are you NOW covered by any type of health plan?*
 - *Is it provided through a job, gov't or state, or some other way?*
 - *Has coverage been continuous since January (of prior year)? Was anyone in household covered by [insurance type] in prior year?*



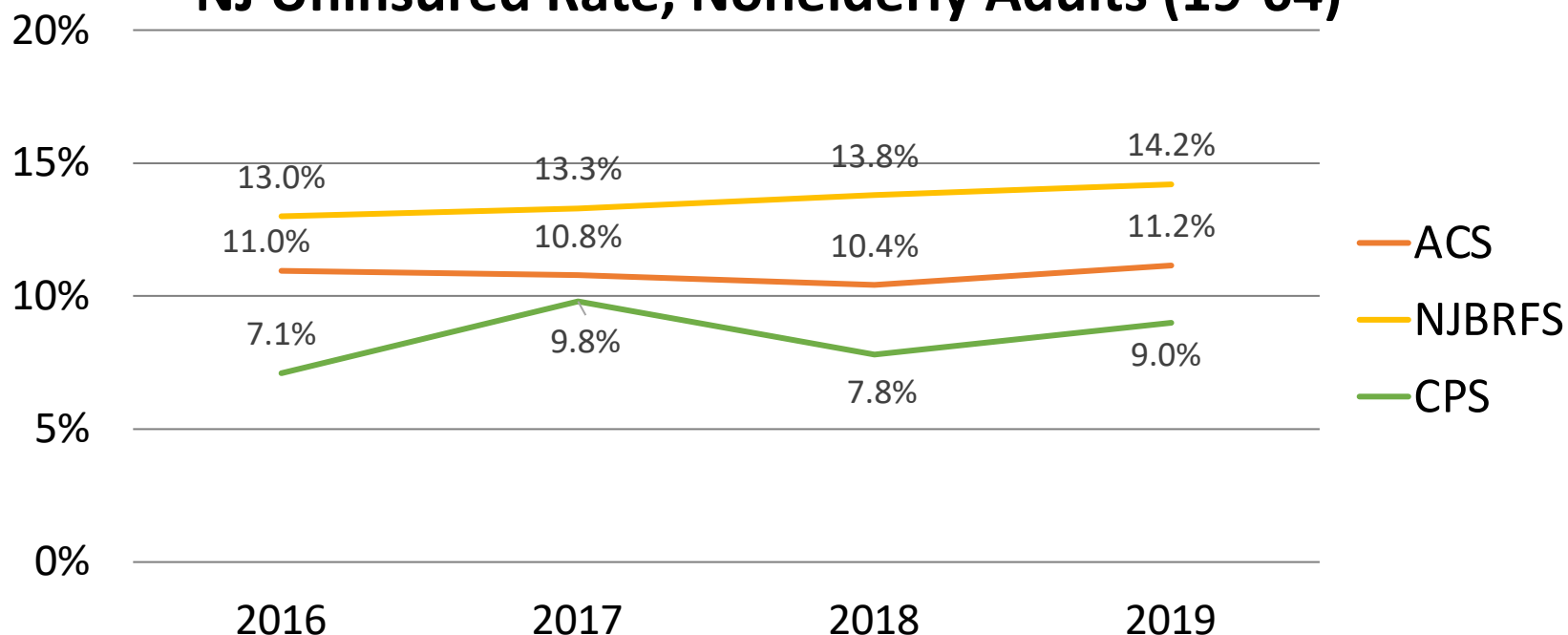
Comparison of Coverage Qs

	ACS	BRFS¹	CPS-ASEC²
Availability	2008-present	1991-present	1987-present
Method	Current point-in-time	Current point-in-time	Any point-in-time in prior year
	Multiple types	Any coverage	Multiple types
Uninsured	Point-in-time	Point-in-time	All of prior year
Estimates reflect	Average with coverage type at point-in-time over year	Average insured/uninsured at point-in-time over year	Average ever with coverage type over prior year
Policyholder	No	No	Yes

¹Primary coverage type available when HCA module used in 2013, 2014, 2017, and on core survey beginning in 2021.

²Current point in time and spells of coverage by month added in 2014 CPS and fully incorporated starting with 2019 CPS.

NJ Uninsured Rate, Nonelderly Adults (19-64)



- ACS data for the non-institutionalized population from SHADAC State Health Compare, statehealthcompare.shadac.org
- NJBRFS data from NJSHAD, https://www-doh.state.nj.us/doh-shad/query/result/njbrfs/Uninsured/UninsuredCrude11_.html
- CPS data for 2016 from Kaiser Family Foundation, <https://www.kff.org/other/state-indicator/uninsured-rates-for-the-nonelderly-by-age-cps/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
- CPS data for 2017-2019 for ages 18-64 from SHADAC issue briefs “Comparing Federal Government Surveys that Count the Uninsured”, <https://www.shadac.org/publications/comparing-federal-government-surveys-count-uninsured-2018>, https://www.shadac.org/sites/default/files/publications/Comparing%20Federal%20Surveys_Oct2019.pdf, https://www.shadac.org/sites/default/files/publications/Comparing%20Federal%20Surveys_Oct2020.pdf.

Summary of Key Methodological Features

	ACS	BRFS	CPS-ASEC
Verification Q	No	No	Yes (2000)
Write-in field	Yes	No	No
State names for Medicaid/CHIP	No	No	Yes
Other	Write-in and direct purchase	Only English and Spanish	Recall bias
Processing (logic edits, imputation)	Yes	Yes	Yes - fully imputed HHs
Medicaid undercount	Yes	Unexamined	Yes

Medicaid Undercount

DOI: 10.1111/1475-6773.13058

RESEARCH ARTICLE

HSR Health Services Research

Response error and the Medicaid undercount in the current population survey

James M. Noon MA  | Leticia E. F.

U. S. Census Bureau, Washington, District of Columbia

Correspondence
James M. Noon, MA, U. S. Census Bureau,
Washington, DC 20233.
Email: james.noon@census.gov

Objective
2007-2010
ASEC).
Data Sou
2010 enr
Study De
and false
sis to ide
Principal
between

DOI: 10.1111/1475-6773.13213

RESEARCH ARTICLE

HSR Health Services Research

Medicaid expansion and the Medicaid undercount in the American Community Survey

Michel Boudreaux PhD¹  | James M. Noon MA² | Brett Fried MS³ |
Joanne Pascale MA² 

¹Department of Health Policy and Management, School of Public Health, University of Maryland, College Park, Maryland

²U.S. Census Bureau, Washington, District of Columbia

³State Health Access Data Assistance Center, University of Minnesota, Minneapolis, Minnesota

Correspondence
Michel Boudreaux, PhD, Department of Health Policy and Management, School of Public Health, University of Maryland, 4200 Valley Drive, College Park, MD 20742.

Abstract

Objective: To measure discordance between aggregate estimates of means-tested coverage from the American Community Survey (ACS) and administrative counts and examine the association of discordance with ACA Medicaid expansion.

Data Sources: 2010-2016 ACS and counts of Medicaid and Children's Health Insurance Program enrollment from the Centers for Medicare & Medicaid Services.

Study Design: State-by-year counts of means-tested coverage from the ACS were compared to administrative counts using percentage differences. Discordance was compared for states that did and did not adopt expansion using difference-in-differences. We then contrasted the effect of expansion on means-tested coverage esti-

ACS & CPS: Coverage Questions Added Post-ACA

a. Is there a premium for this plan? *A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs.*

☐ Yes

☐ No → *SKIP to question 18a*

b. Does this person or another family member receive a tax credit or subsidy based on family income to help pay the premium?

☐ Yes

☐ No



ACS

CPS →

(Is/Was) that coverage through (State Exchange Portal Name), which may also be known as (State Exchange Program Name 1, Name 2, Name 3)?

What do you call it - State Exchange Program (Portal, Name 1, Name 2, Name3)?

Small businesses can offer health coverage to their employees through (State Exchange SHOP Portal Name). (Is/Was) the coverage at all related to (State Exchange SHOP Portal Name), (such as State SHOP Name 1, Name 2, Name3)?

Is the cost of the premium subsidized based on (your/family) income?

- 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.
- 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 and marketplaces.

Earlier I recorded that (name/you) (are/is) employed but (do/does) not have health coverage through (your/his/her) job. Does (employer name) offer a health insurance plan to any of its employees?

Could (you/name) be in this plan if (you/he/she) wanted to?

Why (aren't/isn't) (you/he/she) in this plan?

Choose all that apply

- Covered by another plan
- Traded health insurance for higher pay
- Too expensive
- Don't need health insurance
- Have a pre-existing condition
- Haven't yet worked for this employer long enough to be covered
- Contract or temporary employees not allowed in plan
- Other/specify

Please specify other reason why not in plan

Why not? Why can't (name/you) be in this plan if (you/he/she) wanted to?

Choose all that apply

- Don't work enough hours per week or weeks per year
- Contract or temporary employees not allowed in plan
- Haven't yet worked for this employer long enough to be covered
- Have a pre-existing condition
- Too expensive
- Other/specify

Please specify other reason why not eligible.

NJBRFS – Core Access Questions

Usual Place of Care

Do you have one person (or a group of doctors) you think of as your personal doctor or health care provider?

Unmet Care Due to Cost

Was there a time in the past 12 months when you needed to see a doctor but could not because of cost?

Receipt of Routine Checkup

About how long has it been since you last visited a doctor for a routine checkup?

NJBRFS – HCA Module Questions

- **Unmet care for reasons other than cost**

- *Other than cost, there are many other reasons people delay getting needed medical care. Have you delayed getting needed medical care for any of the following reasons in the past 12 months?*

Select the most important reason.

- You couldn't get through on the telephone
- You couldn't get an appointment soon enough
- Once you got there, you had to wait too long to see the doctor
- The (clinic/doctor's) office wasn't open when you got there
- You didn't have transportation

- **Routine checkup**

- *How many times have you been to a doctor, nurse, or other health professional in the past 12 months?*

- **Other Topics**

- *Was there a time in the past 12 months when you did not take your medication as prescribed because of cost?*
 - *In general, how satisfied are you with the health care you received?*
 - *Do you currently have any medical bills that are being paid off over time?*

OTHER HEALTH-RELATED CONTENT

ACS – Disability Status

- Cognitive, ambulatory, independent living, self-care, vision, hearing disability
 - *Because of a physical, mental, or emotional condition, does this person have serious difficulty...?*

CPS – Health Status and Health Spending

- Self-rated General Health Status
 - *Excellent, Very Good, Good, Fair, Poor*
- Out of pocket medical spending and premiums

NJBRFS – Health Indicators

- General health Status
- Physical health in past 30 days
- Chronic conditions
 - Arthritis
 - Asthma
 - COPD
- Tobacco use
- Skin cancer
- Oral health
- Alcohol consumption
- Immunization
- Seat belt use
- Cancer screening
- HIV/AIDS
- Indoor Tanning
- Cognitive Decline
- Opioid/Drug Use

See annual questionnaires at: <https://www.nj.gov/health/chs/njbrfs/>

NJBRFS 2022 – SDOH and Health Equity Module

Satisfaction with life

Getting social/emotional support

Social isolation

Lost/reduced employment

SNAP/Food stamps

Food security

Ability to pay bills

Shut off utilities

Reliable transportation

Stress

Summary of Data

Least

Most

Coverage			
-Consistency			
Access			
Health Status			
Geography			
NJ Sample Size			

SELECTED DEMOGRAPHIC DATA

ACS – Race/Ethnicity Data

Improvements to the 2020 Census Race and Hispanic Origin Question Designs, Data Processing, and Coding Procedures

August 03, 2021

BY RACHEL MARKS, CHIEF, RACIAL STATISTICS BRANCH, POPULATION DIVISION AND MERARYS RIOS-VARGAS, CHIEF, ETHNICITY AND ANCESTRY BRANCH, POPULATION DIVISION

Subscribe



Estimated reading time: 10 minutes

The U.S. Census Bureau has collected data on Hispanic or Latino origin (see [this blog](#)) since the 1970 Census. How

→ **NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this survey, Hispanic origins are not races.**

5 Is Person 1 of Hispanic, Latino, or Spanish origin?

☐ No, not of Hispanic, Latino, or Spanish origin

☐ Yes, Mexican, Mexican Am., Chicano

☐ Yes, Puerto Rican

☐ Yes, Cuban

☐ Yes, another Hispanic, Latino, or Spanish origin – *Print, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.*

What is Person 1's race?
Mark (X) one or more boxes **AND** print origins.

☐ White – *Print, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc.*

☐ Black or African Am. – *Print, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.*

☐ American Indian or Alaska Native – *Print name of enrolled or principal tribe(s), for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.*

☐ Chinese ☐ Vietnamese ☐ Native Hawaiian

☐ Filipino ☐ Korean ☐ Samoan

☐ Asian Indian ☐ Japanese ☐ Chamorro

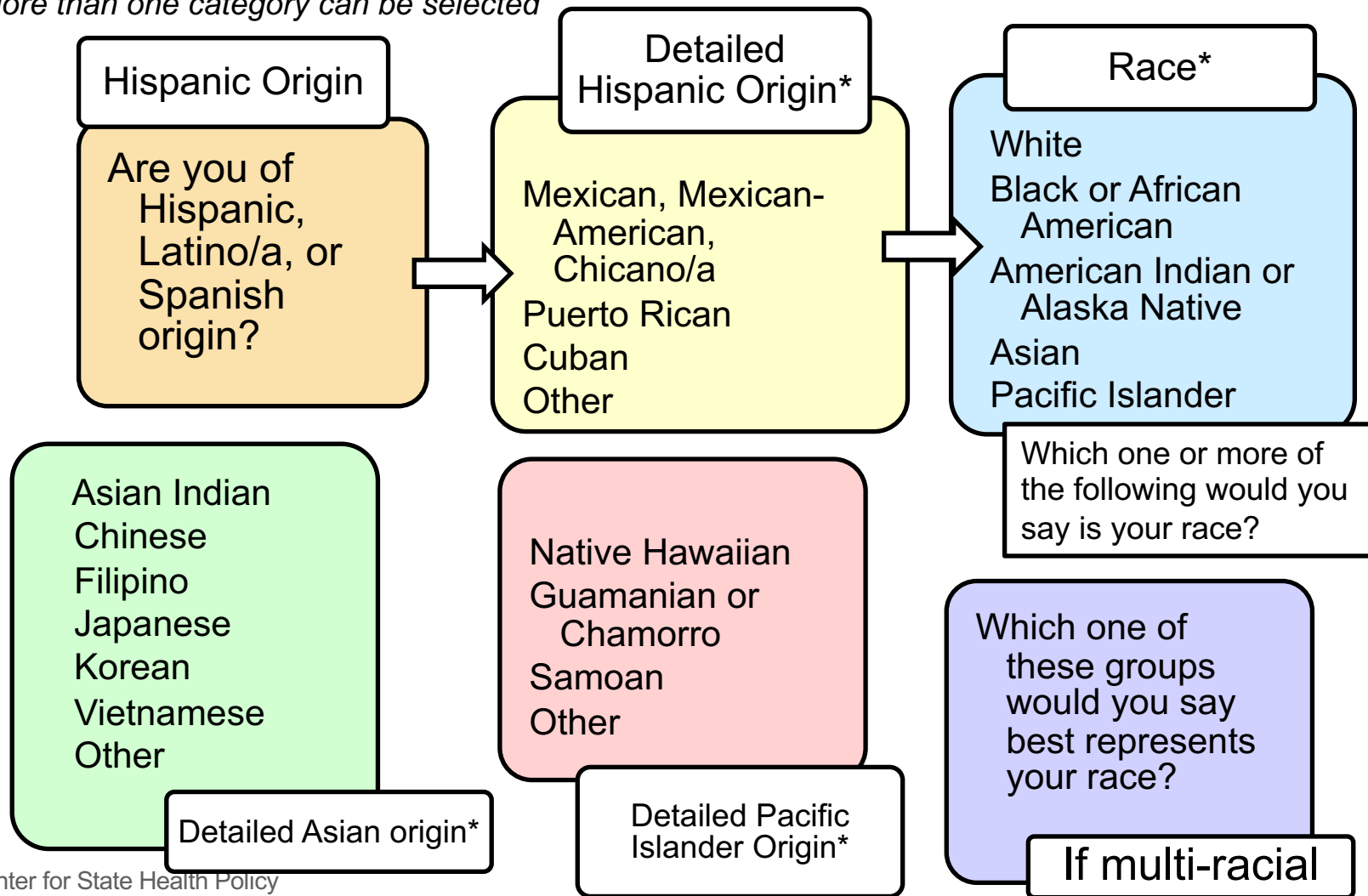
☐ Other Asian – *Print, for example, Pakistani, Cambodian, Hmong, etc.* ☐ Other Pacific Islander – *Print, for example, Tongan, Fijian, Marshallese, etc.*

☐ Some other race – *Print race or origin.*

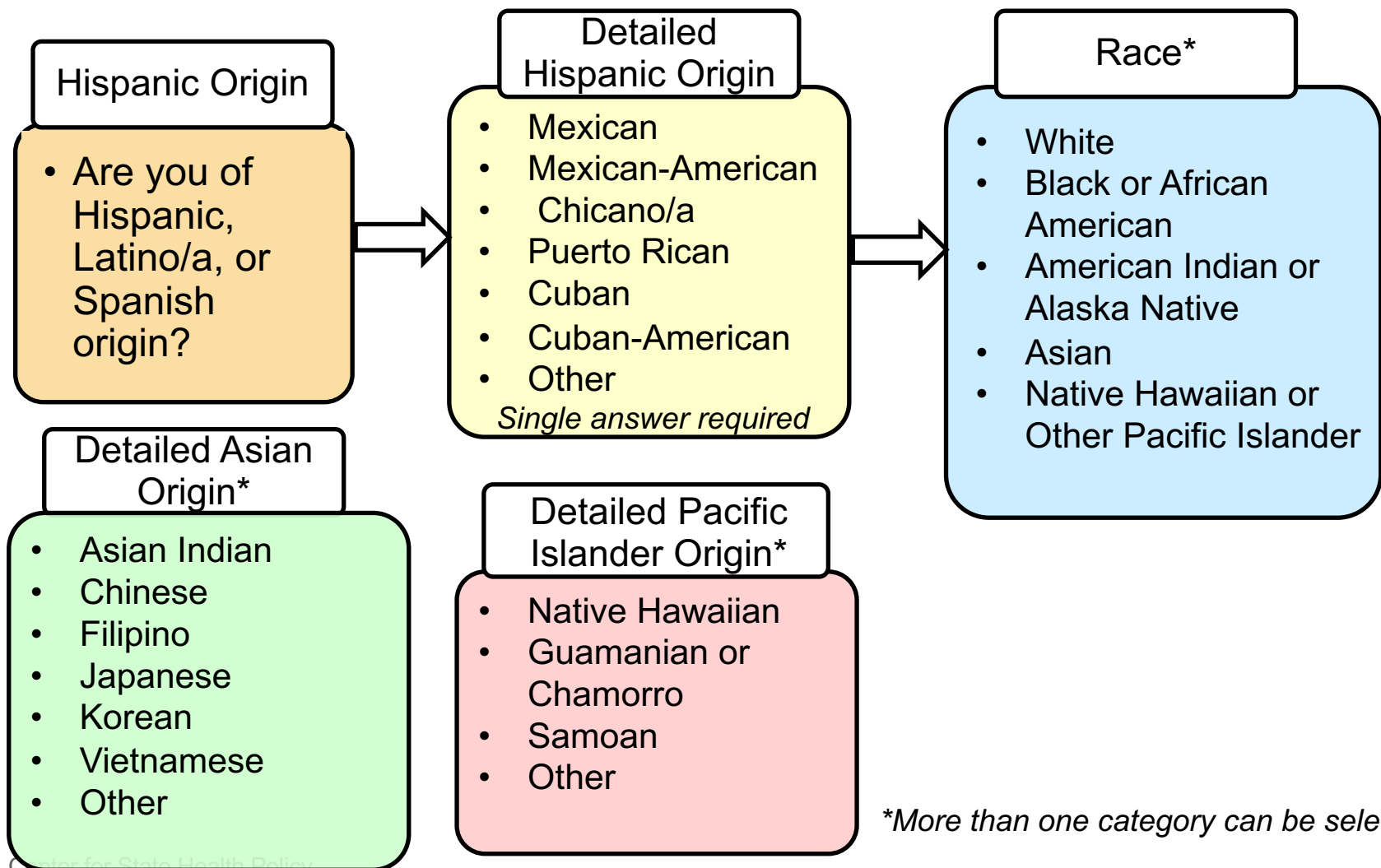
<https://www.census.gov/newsroom/blogs/random-samplings/2021/08/improvements-to-2020-census-race-hispanic-origin-question-designs.html>

NJBRFS – Race/Ethnicity Data

**More than one category can be selected*



CPS – Race/Ethnicity Data



**More than one category can be selected*

NJBRFS – Sexual Orientation and Gender Identity (SOGI) Module

Module became available to states in 2014 and NJ began using in 2020.

Respondents who refuse questions on sex/sex at birth are not interviewed.

Interviewers are trained not to question inconsistencies in results.

(For male respondents)

Which of the following best represents how you think of yourself?

- 1 = Gay
- 2 = Straight, that is, not gay
- 3 = Bisexual
- 4 = Something else
- 7 = I don't know the answer
- 9 = Refused Ask if Sex= 1.

(For female respondents)

Which of the following best represents how you think of yourself?

- 1 = Lesbian or Gay
- 2 = Straight, that is, not gay
- 3 = Bisexual
- 4 = Something else
- 7 = I don't know the answer
- 9 = Refused

Do you consider yourself to be transgender?

- 1 Yes, Transgender, male-to-female
- 2 Yes, Transgender, female-to-male
- 3 Yes, Transgender, gender nonconforming
- 4 No

https://www.cdc.gov/brfss/data_documentation/pdf/BRFSS-SOGI-Stat-Brief-508.pdf

Summary of Health-Equity Related Content

	ACS	BRFS	CPS-ASEC
Hispanic ethnicity	Y	Y	Y
Race	Multiple; most detail	Multiple & Primary	Multiple
Biological Sex	M/F	M/F	M/F
Gender Identity	No	Nonbinary (added 2022) SOGI Module 2020-2022	No
Sexual Orientation	N	Y	N
Same Sex Couples	Yes	No	Yes

ACCESSING THE DATA & ANALYSIS GUIDANCE

PROS

CONS

1

Tables and Summary Data

- Tables, charts, graphs provided by data steward
- Online analysis tools

No special software or coding required

Small geographies

Adjustment for complex design built-in

Limited to available variable categorizations and crosstabs

Learning curve for online analysis tools

Manual effort for statistical testing

2

Public Use Microdata

- Record-level data for a **sample** of responses
- Disclosure-avoidance processing

Maximum flexibility in how variables are categorized and cross-tabbed

Person-level modeling possible

Requires extraction, preparation, and analysis using statistical software

Larger geographies (PUMA)

Release lag

3

IPUMS

- Microdata from the U of Minnesota's Institute for Social Research and Data Innovation

Same as #2 PLUS:

Excellent documentation

User-friendly navigation and data extraction

Harmonized variables

Same as #2 PLUS:

Greater lag before data available

Additional processing to take into consideration

BRFSS not included

1. ACS Data

The American Community Survey Selected Ways to Access Data

- QuickFacts
- My Congressional District
- My Tribal Area
- OnTheMap for Emergency Management
- Census Business Builder
- data.census.gov
- Census COVID-19 Data Hub
- TIGER/Line Shapefiles w/ Selected Demographic Data
- Application Programming Interface (API)



census.gov/data/data-tools.html

13

1. ACS Data – data.census.gov

Statistical Testing Tool:

<https://www.census.gov/programs-surveys/acs/guidance/statistical-testing-tool.html>

See Appendices for what tables are available:

<https://www.census.gov/programs-surveys/acs/data/summary-file.html>

Center for State Health Policy

Institute for Health, Health Care Policy and Aging Research

Label (Grouping)	Estimate	Margin of Error	Insured Estimate	Insured Margin of Error
Civilian noninstitutionalized population	8,780,160 ±884		8,117,243 ±11,803	
AGE				
Under 6 years	622,588 ±2,409		602,480 ±2,631	
6 to 18 years	1,436,861 ±3,187		1,375,691 ±4,176	
19 to 25 years	754,852 ±3,234		666,884 ±4,594	
26 to 34 years	1,013,516 ±2,483		864,060 ±4,140	
35 to 44 years	1,122,484 ±911		981,433 ±4,225	
45 to 54 years	1,223,243 ±793		1,112,983 ±2,946	
55 to 64 years	1,202,024 ±699		1,123,733 ±2,578	
65 to 74 years	806,212 ±741		796,363 ±1,206	

1. CPS Data – www.census.gov/programs-surveys/cps/data/tables.html

Table H-04. Health Insurance Coverage Status and Type of Coverage by Selected Characteristics -- All Races: 2020

[Information on confidentiality protection, sampling error, nonsampling error, and definitions is available at <https://www2.census.gov/programs-surveys/cps/techdocs/cpsmar21.pdf>.](https://www2.census.gov/programs-surveys/cps/techdocs/cpsmar21.pdf)

Source: U.S. Census Bureau, Current Population Survey, 2021 Annual Social and Economic Supplement (CPS ASEC).

[\(Numbers in thousands, margins of error in thousands or percentage points as appropriate. People as of March of the following year\)](#)

All Races																	
Characteristic	Total	Any health insurance				Private health insurance				Public health insurance				Uninsured ²			
		Margin		Margin		Margin		Margin		Margin		Margin		Margin			
		Number of error ¹ (±)	Percent of error ¹	Number of error ¹ (±)	Percent of error ¹	Number of error ¹ (±)	Percent of error ¹	Number of error ¹ (±)	Percent of error ¹	Number of error ¹ (±)	Percent of error ¹	Number of error ¹ (±)	Percent of error ¹	Number of error ¹ (±)	Percent of error ¹		
Total	325,638	297,680	638	91.4	0.2	216,532	1,166	66.5	0.4	113,337	923	34.8	0.3	27,957	612	8.6	0.2
Family Status																	
In families	261,847	240,592	980	91.9	0.2	177,608	1,247	67.8	0.4	87,156	900	33.3	0.3	21,255	521	8.1	0.2
...Householder	83,918	77,504	439	92.4	0.2	59,664	481	71.1	0.4	29,311	321	34.9	0.4	6,414	184	7.6	0.2
...Related children under 18	70,976	67,115	261	94.6	0.3	44,396	450	62.6	0.6	24,855	443	35.0	0.6	3,861	210	5.4	0.3
....Related children under 6	22,191	21,014	138	94.7	0.5	13,438	233	60.6	1.0	8,207	230	37.0	1.0	1,178	110	5.3	0.5
In unrelated subfamilies	1,017	880	110	86.5	3.8	522	85	51.3	6.0	389	70	38.3	5.2	137	43	13.5	3.8
Unrelated individuals	62,774	56,209	817	89.5	0.4	38,402	706	61.2	0.7	25,792	474	41.1	0.6	6,565	270	10.5	0.4
Age																	
Under 65 years	269,802	242,407	696	89.8	0.2	188,829	1,093	70.0	0.4	61,071	916	22.6	0.3	27,395	616	10.2	0.2

1. ACS & CPS Data – <https://data.census.gov/mdat/#/>

United States **BETA**
Census Bureau

Select a Dataset & Vintage

Select Dataset ACS 1-Year Estimates Public Use Microdata Sample
ACSPUMS1Y

Select Vintage 2019
2019

Send Feedback
census.data@census.gov

1. NJBRFS Data – New Jersey State Health Assessment Data (NJSHAD)

<https://www.nj.gov/health/chs/njbrfs/>

New Jersey State Health Assessment Data
New Jersey's Public Health Data Resource
Path: NJSHAD » query

Home | Health Topics | Community Profiles | Health Indicators | Dataset Queries

Dataset Queries

- Introduction
- About Queries
- Births
- 2000-2020 Deaths
- 2021-2022 Deaths
- Infant and Fetal Deaths
- Life Expectancy
- Behavioral Risk Factor Survey

NJ Behavioral Risk Factor Survey Data Query

- Overview
- General Health Status and Disability
- Chronic Diseases and Conditions
- Mental Health Status
- Injury
- Screening and Preventive Services
- Access to Health Care

Step 1: INDICATOR: Adults With/Without Any Kind of Health Care Coverage (No Health Coverage)

Step 2: Select year of survey (2020)

Step 3: Select age of survey respondent

Step 4: Select sex of survey respondent

Step 5: Select other demographic characteristics

Choose other characteristics to include in your analysis. The default is all survey respondents.

☒ Race/Ethnicity

Select race/ethnicity. (Default includes ALL RACES/ETHNICITIES)

☐ White, non-Hispanic

☐ Black/African American, non-Hispanic

New Jersey State Health Assessment Data
New Jersey's Public Health Data Resource
Path: NJSHAD » Query

Home | Health Topics | Community Profiles | Health Indicators | Dataset Queries | Other Data and Resources

Dataset Queries

- Introduction
- About Queries
- Births
- 2000-2020 Deaths
- 2021-2022 Deaths
- Infant and Fetal Deaths
- Life Expectancy
- Behavioral Risk Factor Survey
- Communicable Diseases

NJSHAD Query System Help Page

General Query System Help

- Definitions of Public Health Terms and Acronyms
- How to Cite Query Data

How To Use the Query System

- NJSHAD Query System Tips and Tutorial
- NJSHAD Step-by-Step Demonstration - Webinar/Video (Sept 2017) You must download the MP4 file. Webinar will not play in browser. Video has been edited down to 53 minutes, so it starts and ends abruptly.
- Maps and Data Grouping, Methods

Printing and Exporting Tables, Maps, and Graphs

Dataset-Specific Help

Births

- Birth Data Document

Mortality

- Death Data Document
- ICD-10 Codes
- Causes of Death, Groupings
- NJDOH 28 Major Causes of Death
- NCHS 52 Rankable Causes of Death
- NCHS 113 Selected Causes of Death
- Other Cause of Death
- Injury Matrix for ICD-10 Codes
- 2000 Cause of Death Coding Problem (May 2013)

Chart

Percent by County of Residence

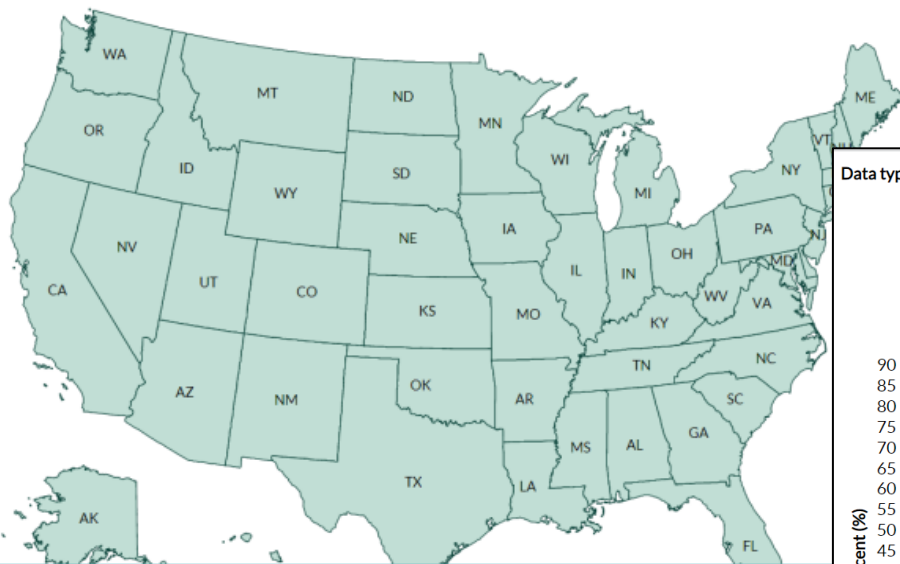
County of Residence	Percent
Atlantic	~15%
Bergen	~12%
Burlington	~8%
Camden	~10%
Cape May	~10%
Cumberland	~15%
Essex	~12%
Gloucester	~10%
Hudson	~15%
Hunterdon	~8%
Mercer	~12%
Middlesex	~10%
Monmouth	~10%
Morris	~10%
Ocean	~10%

1. NJBRFS Data – <https://www.cdc.gov/brfss/brfssprevalence/index.html>

Explore BRFSS Data By Location

Explore BRFSS Prevalence & Trends data for all questions for one location.

States & Territories



Explore BRFSS Data By Topic

Explore BRFSS Prevalence & Trends data for one question for all available states and MMSAs.

Class

Topic

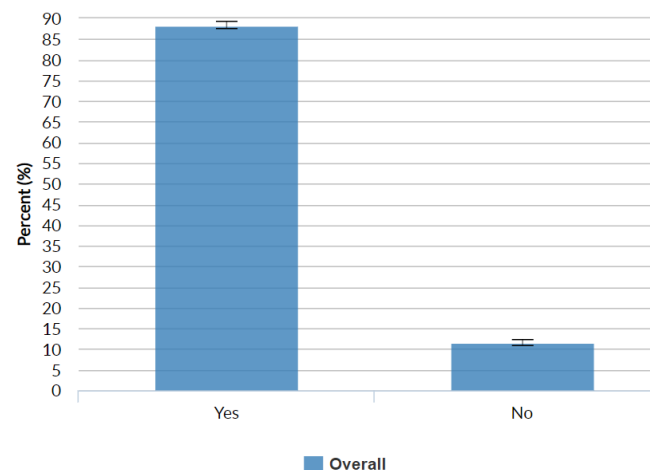
Data type

New Jersey - 2020

Do you have any kind of health care coverage? (Crude Prevalence)

View by: Overall

Response: (All)



Data Source: Behavioral Risk Factor Surveillance System (BRFSS)

2. ACS PUMS – <https://www2.census.gov/programs-surveys/acs/data/pums/>



Custom Tables

Data Tables

Data Tools

Data via API

Data via FTP

Equal Employment Opportunity (EEO)

Experimental Data

American Community Survey Data via FTP

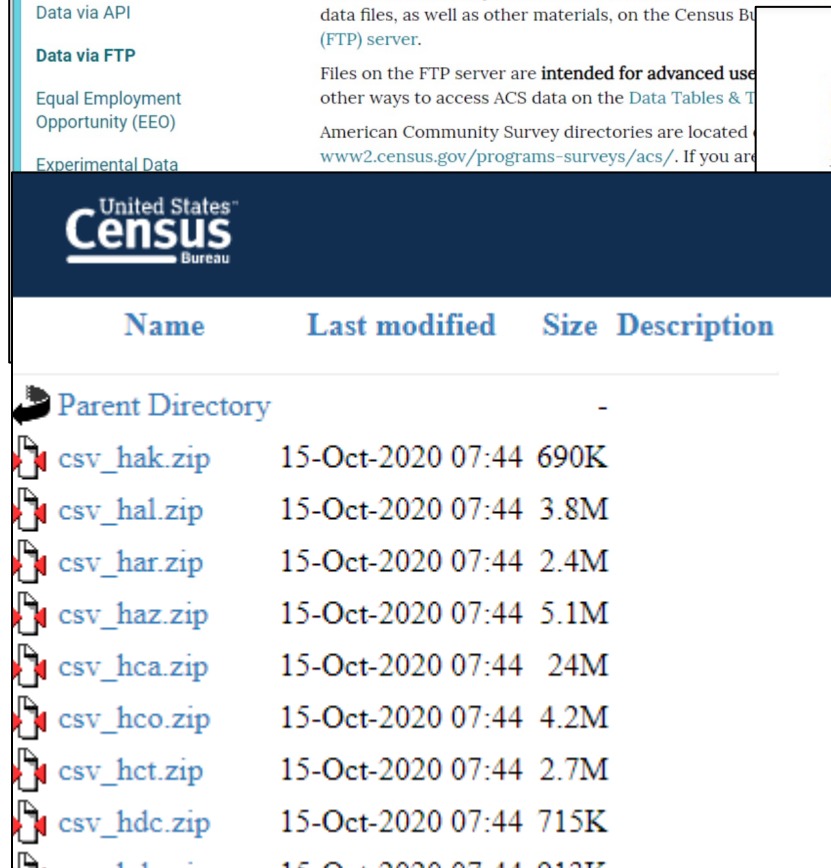
The Census Bureau produces downloadable American Community Survey (ACS) data files, as well as other materials, on the Census Bureau's (FTP) server.

Files on the FTP server are **intended for advanced use** and are not to be used in other ways to access ACS data on the Data Tables & Tools website.

American Community Survey directories are located at www2.census.gov/programs-surveys/acs/. If you are having trouble accessing the site, please contact the Census Bureau's Technical Support Center at ftp@cen.gov.

Related Information

- Share Your ACS Data Story
- Contact Us



Name	Last modified	Size	Description
Parent Directory	-	-	-
csv_hak.zip	15-Oct-2020 07:44	690K	
csv_hal.zip	15-Oct-2020 07:44	3.8M	
csv_har.zip	15-Oct-2020 07:44	2.4M	
csv_haz.zip	15-Oct-2020 07:44	5.1M	
csv_hca.zip	15-Oct-2020 07:44	24M	
csv_hco.zip	15-Oct-2020 07:44	4.2M	
csv_hct.zip	15-Oct-2020 07:44	2.7M	
csv_hdc.zip	15-Oct-2020 07:44	715K	

Understanding and Using the American Community Survey Public Use Microdata Sample Files

What Data Users Need to Know

Issued February 2021

https://www.census.gov/content/dam/Census/library/publications/2021/acs/acs_pums_handbook_2021.pdf

Recent sample N for NJ = 88,400 people

2. BRFSS PUMS – https://www.cdc.gov/brfss/annual_data/annual_data.htm

Recent sample N for NJ = 11,382

2020 BRFSS Survey Data and Documentation

The 2020 BRFSS data continue to reflect the changes initially made in 2011 for weighting methodology (raking) and adding cell-phone-only respondents. The aggregate BRFSS combined landline and cell phone data set is built from the landline and cell phone data submitted for 2020 and includes data from 50 states, the District of Columbia, Guam, and Puerto Rico.

2020 Survey Data Information

[2020 BRFSS Overview CDC](#) [PDF – 120 KB]
Provides information on the background, design, data collection and processing, and the statistical and analytical issues for the combined landline and cell phone data set.

Data Files

There are 401,958 records for 2020. More information on participation is available in the [states conducting surveillance, by year table](#). The data files are provided in ASCII and SAS Transport formats.

[2020 BRFSS Data \(ASCII\)](#) [ZIP – 41.5 MB]
August, 2021
This file for the combined landline and cell phone data set is in ASCII format. It has a fixed record length of 2037 positions.

[2020 BRFSS Data \(SAS Transport Format\)](#) [ZIP – 64.3 MB]
August, 2021
This file for the combined landline and cell phone data set was exported from SAS V9.3 in the XPT transport format. This file contains 279 variables. This format can be imported into SPSS or STATA. Please note: some of the variable labels get truncated in the process of converting to the XPT format so they may be slightly different from what is on the SASOUT19.SAS program.

[Variable Layout](#)
Format information on variable name by column position.

SAS Resources

The following files are included for use with SAS software developed by SAS Institute, Inc. The SAS files are programs that can be read using any text editor. Save SAS files as plain text files.

[Format20.sas](#) [SAS – 556 KB]
SAS for Windows program used to generate the 2020 format library.

[Formats20\[SAS7BCAT – 381 KB\]](#) Format library used with the 2020 BRFSS SAS Data File in 32 bit SAS.

[Formats20\[SAS7BCAT – 441 KB\]](#) Format library used with the 2020 BRFSS SAS Data File in 64 bit SAS.

[SASOUT20_LLCP.SAS](#) [SAS – 28 KB]
SAS for Windows program to convert the ASCII file into a SAS dataset.

[TRANSPRT.SAS](#) [SAS – 3 KB]
SAS for Windows program to convert the XPT (SAS Transport) file into a SAS dataset.

[Format20.sas CDC](#) [SAS – 54 KB]
SAS for Windows format assignment statements.

2. CPS PUMS – www.census.gov/data/datasets/time-series/demo/cps/cps-asec.html

 An official website of the United States government
[Here's how you know](#)

Annual Social and Economic Supplements

Sign up to stay up to date on the latest Current Population Survey Annual Social and Economic Supplement (ASEC) data, reports, and research file releases. Sign Up
[<https://public.govdelivery.com/accounts/USCENSUS/signup/29867>]

2021

Technical Documentation

 March 2021 Annual Social and Economic Supplement (ASEC) [3 MB] [U//www2.census.gov/programs-surveys/cps/techdocs/cpsmar21.pdf](http://www2.census.gov/programs-surveys/cps/techdocs/cpsmar21.pdf)

Data and Documents

 Data Dictionary [1.0 MB] [U//www2.census.gov/programs-surveys/cps/data](http://www2.census.gov/programs-surveys/cps/data)

ASCII Data File

 DOS/Windows [34 MB] [U//www2.census.gov/programs-surveys/cps/data](http://www2.census.gov/programs-surveys/cps/data)

 GNU gzip [34 MB] [U//www2.census.gov/programs-surveys/cps/datasets/](http://www2.census.gov/programs-surveys/cps/datasets/)

SAS Data File (includes Replicate Weights)

 SAS [377 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/](http://www2.census.gov/programs-surveys/cps/datasets/2021/)

CSV Data File (includes Replicate Weights)

 CSV [321 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/](http://www2.census.gov/programs-surveys/cps/datasets/2021/)

Recent sample N for NJ
=3,030

Replicate Weight Data and Documents

 2021 Replicate Weight Usage Instruction [< 1.0 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/2021_ASEC_Replicate_Weight_Usage_Instructions.docx](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/2021_ASEC_Replicate_Weight_Usage_Instructions.docx)

 SAS Input Statements [10 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/CPS_ASEC_ASCII_REPWGT_2021.SAS](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/CPS_ASEC_ASCII_REPWGT_2021.SAS)

Data File

 DOS/Windows [79 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/CPS_ASEC_ASCII_REPWGT_2021.ZIP](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/CPS_ASEC_ASCII_REPWGT_2021.ZIP)

 GNU gzip [79 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/CPS_ASEC_ASCII_REPWGT_2021.DAT.GZ](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/CPS_ASEC_ASCII_REPWGT_2021.DAT.GZ)

Household, Family, and Person Text Layouts

 House Record - Text Layout [< 1.0 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/hhldfmt.txt](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/hhldfmt.txt)

 Family Record - Text Layout [< 1.0 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/famifmt.txt](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/famifmt.txt)

 Person Record - Text Layout [< 1.0 MB] [U//www2.census.gov/programs-surveys/cps/datasets/2021/march/persfmt.txt](http://www2.census.gov/programs-surveys/cps/datasets/2021/march/persfmt.txt)

Annual file includes all states.

IPUMSwww.ipums.org

IPUMS provides census and survey data from around the world integrated across time and space. IPUMS integration and documentation makes it easy to study change, conduct comparative research, merge information across data types, and analyze individuals within family and community contexts. Data and services available free of charge.

USE IT FOR GOOD – NEVER FOR EVIL



U.S. Census and American
Community Survey microdata from
1850 to the present. [Learn More](#)

VISIT SITE



Current Population Survey microdata
including basic monthly surveys and
supplements from 1962 to the
present. [Learn More](#)

VISIT SITE

- User-friendly; Excellent documentation
- Microdata (SAS, SPSS, and Stata) and online analysis tool
- Variables harmonized over time
- Additional variables (e.g. SHADAC's HIU identifier, FPG, family interrelationships, single race*, predicted race*, CPS longitudinal weights).
- Greater lag until data are available (particularly added variables)
- BRFSS not included

*https://assets.ipums.org/_files/webinars/RACHSING_slides.pdf

Tips for Analysts

- Require adjustment for design features in order to produce estimates for a population and accurate standard errors (SEs)/statistical tests.
- Depending on variable of interest, choose the correct weight to create point estimates:

	ACS	BRFS	CPS-ASEC
Household	✓		✓
Family			✓
Person	✓	✓	✓

- ACS & CPS: Use replicate weights to calculate SEs and CIs.
- BRFS: Weight, strata, and PSU to calculate SEs and CIs.
- Ballpark your results against published tables/data.
- Generally linked to other data sources by geography.

PUMS Analysis Resources

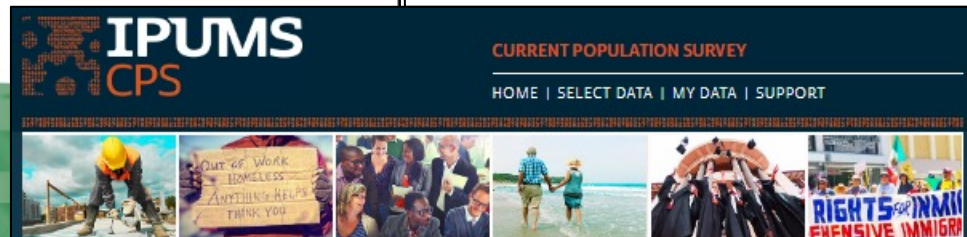
<https://www.census.gov/programs-surveys/acs/library/handbooks/general.html>

Understanding and Using American Community Survey Data

What All Data Users Need to Know

Issued September 2020

<https://cps.ipums.org/cps/repwt.shtml>



Complex Sampling Weights and Preparing 2020 BRFSS Module Data for Analysis

July 2021



REPLICATE WEIGHTS IN THE CURRENT POPULATION SURVEY

[Go Back to IPUMS-CPS Documentation](#)

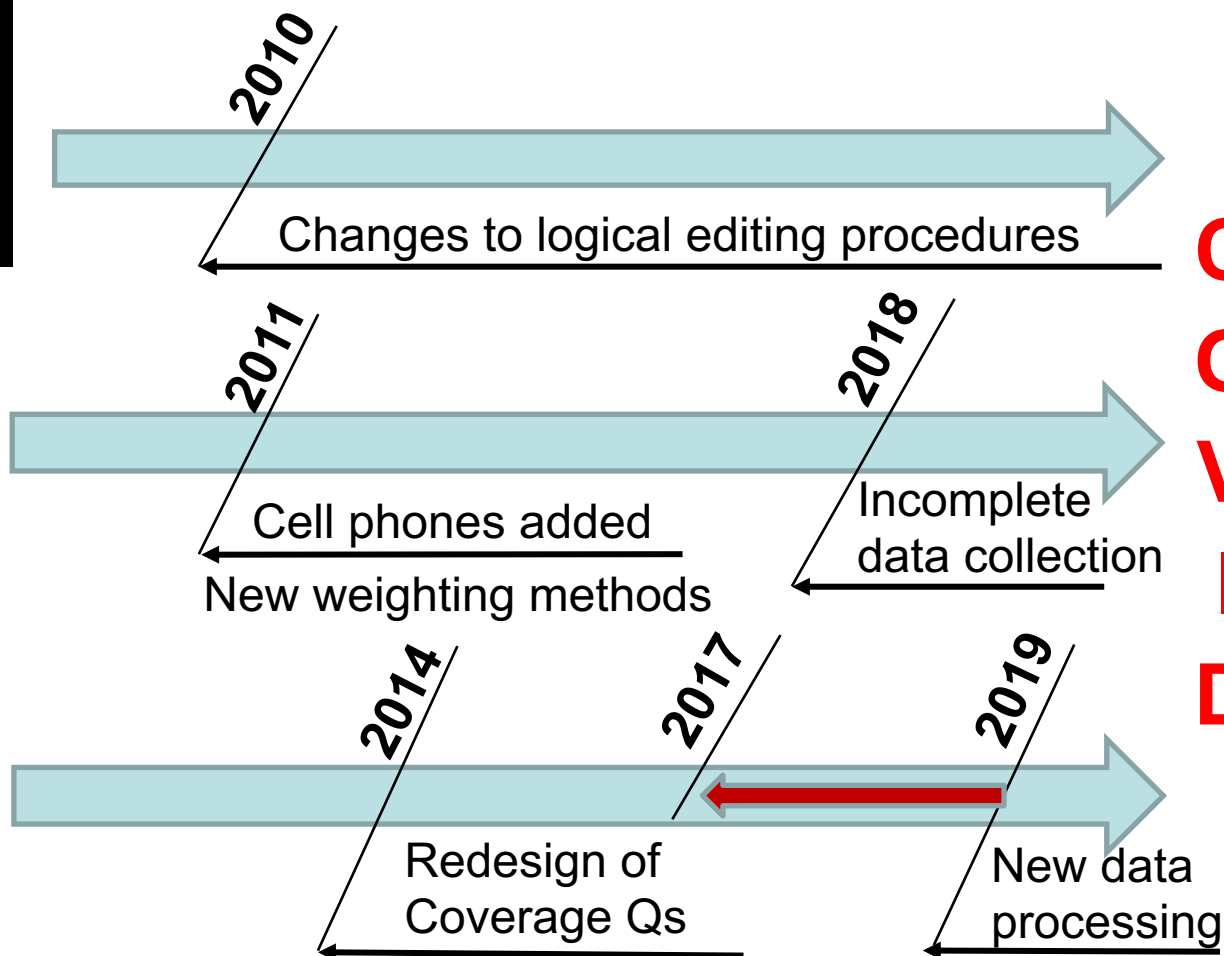
SUMMARY

- [What are replicate weights?](#)
- [Why might I want to use replicate weights?](#)
- [Does using replicate weights make any substantive difference?](#)
- [How do I obtain replicate standard errors from ASEC IPUMS-CPS data?](#)
- [Is there any way to do this automatically in major statistical packages?](#)
- [Can I simply divide the full sample into 160 random subsamples from the full sample and calculate replicate standard errors manually?](#)
- [How are the CPS replicate weights calculated?](#)

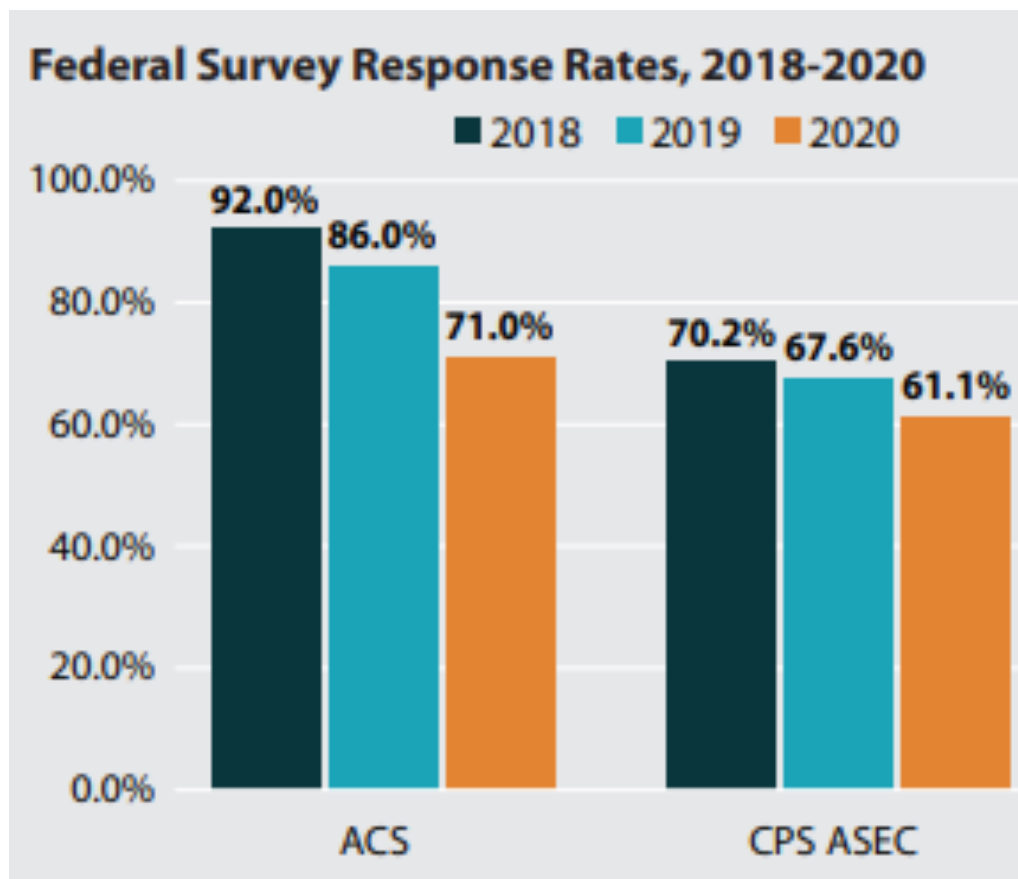
Small Subsamples and Pooling

- Estimates based on small samples are unstable and should be flagged/suppressed
- Rules of Thumb:
 - $\text{MOE} \leq 3$ percentage points
 - $N \geq 50$
 - Relative standard error (RSE) $< 30\%$
- Multiple years of survey data can be pooled to increase sample size
 - ACS does have a 5-year file with weight
 - If combining years of CPS, NJBRFS, or < 5 years of ACS:
 - Divide the weight by # years
 - Scale weights by the proportion of the pooled sample contributed by each annual file

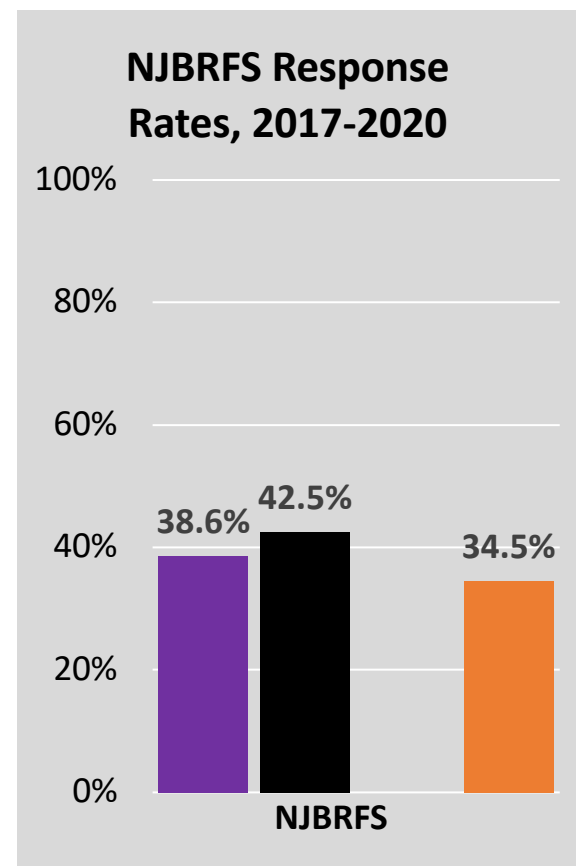
Trending Cautions



COVID Impact



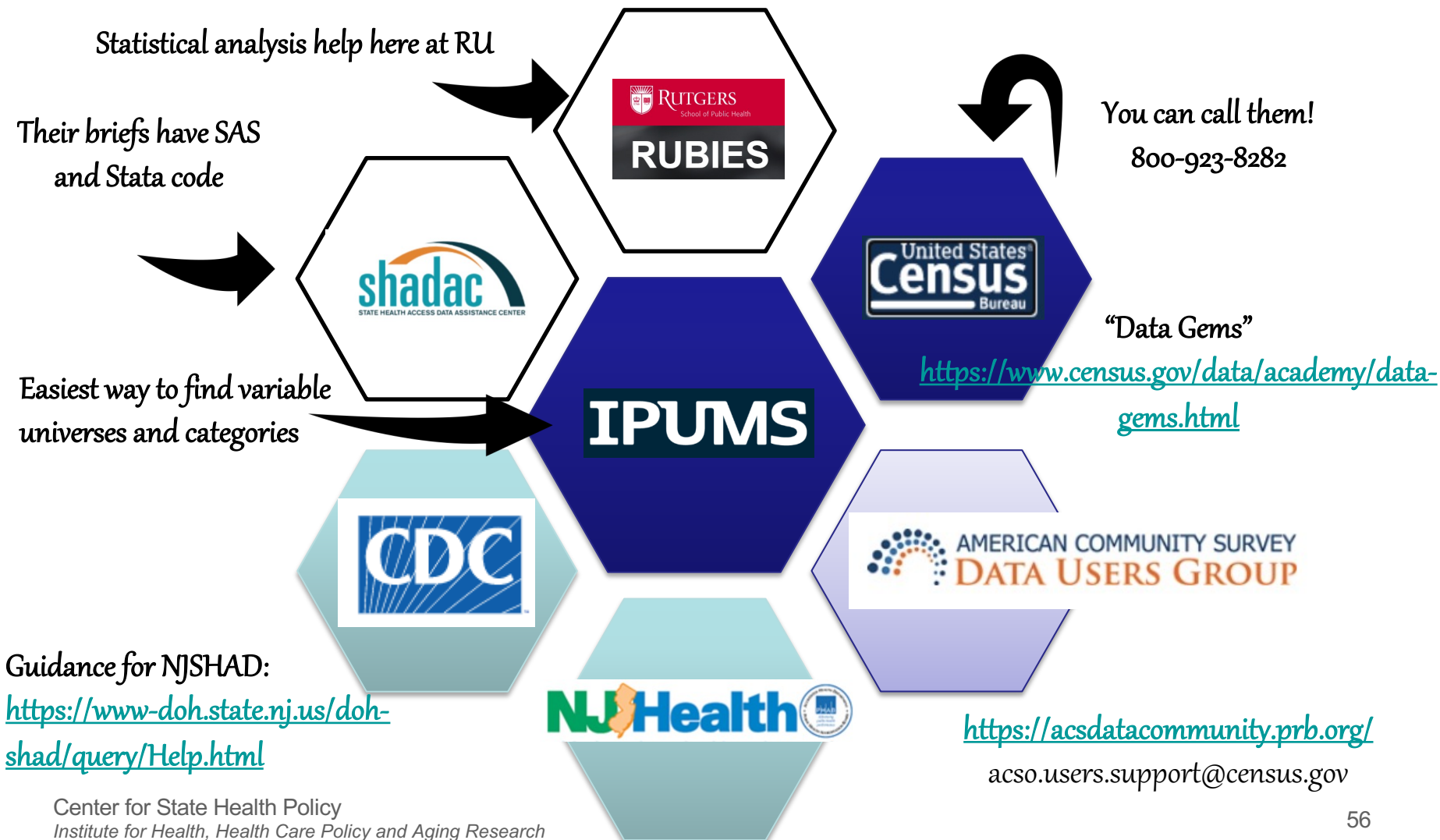
<https://www.shadac.org/sites/default/files/publications/Changes%20in%20Federal%20Surveys-8.2021.pdf>



Summary of COVID Impact - 2020

	ACS	BRFS	CPS-ASEC
Data Collection	Suspended mail and in-person	Telephone collection unaffected	Suspended in-person; used telephone
Year(s) Affected	2020	2020	2019
Non-response	Differential; Advantaged HHs responded	No mention of greater non-response	Differential; Advantaged HHs responded
Remedy	Census created experimental weight	N/A	IPUMS created special weight
Bottom Line	All estimates experimental	No caution	Caution with PUMS; better with IPUMS

Resources for Analysts



Key Takeaways



- Suited to tracking national and state trends due to consistent measurement, large sample, and timeliness
- Estimates can be made for small geographic areas.
- Obtains information for all household members



- Useful for research on coverage and access for adults at state/county level when rich health variables are also needed
- Timely inclusion of modules with current research and policy relevance (e.g., SDOH, SOGI, etc.)



- Best for national or state-level research where economic variables are important (e.g., detailed income, employment)
- Longest running and most detailed data on coverage
- Obtains information for all household members

Q & A

THANK YOU!

- The webinar recording will be posted at cshp.rutgers.edu
- Please fill out the post-webinar survey upon exiting the webinar.