

SUPPORTING STATEMENT

Part A

Pretest of the Medical Expenditure Panel Survey
Quick Response Survey

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Agency for Healthcare Research and Quality (AHRQ)

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A. Justification

1. Circumstances that make the collection of information necessary

The mission of the Agency for Healthcare Research and Quality (AHRQ) set out in its authorizing legislation, The Healthcare Research and Quality Act of 1999 (see <http://www.ahrq.gov/hrqa99.pdf>), is to enhance the quality, appropriateness, and effectiveness of health services, and access to such services, through the establishment of a broad base of scientific research and through the promotion of improvements in clinical and health systems practices, including the prevention of diseases and other health conditions. AHRQ shall promote health care quality improvement by conducting and supporting:

1. research that develops and presents scientific evidence regarding all aspects of health care; and
2. the synthesis and dissemination of available scientific evidence for use by patients, consumers, practitioners, providers, purchasers, policy makers, and educators; and
3. initiatives to advance private and public efforts to improve health care quality.

Also, AHRQ shall conduct and support research and evaluations, and support demonstration projects, with respect to (A) the delivery of health care in inner-city areas, and in rural areas (including frontier areas); and (B) health care for priority populations, which shall include (1) low-income groups, (2) minority groups, (3) women, (4) children, (5) the elderly, and (6) individuals with special health care needs, including individuals with disabilities and individuals who need chronic care or end-of-life health care.

The goal of this research is to assess the capacity of the MEPS Household Component to serve as a vehicle for a quick response survey. MEPS is an ongoing study based on a series of household interviews, with followup data collection from medical providers. It produces annual, full-year estimates of health care utilization and expenditures. Because of the time required to collect and process information for a full year from household respondents and, subsequently, from their medical providers, the core MEPS design is not well-suited to providing early estimates on developing policy-relevant issues. A quick response survey capability that takes advantage of existing MEPS sample and data collection infrastructure, but that is not linked to the processing and schedule for the full-year MEPS estimates would enable AHRQ to accelerate collection and assessment of information on emerging policy issues relevant to the Agency's core mission.

To achieve the goal of this project, a one-time data collection will be conducted to assess the feasibility of using the Medical Expenditure Panel Survey as a vehicle for conducting a quick response survey. This data collection will target a representative subsample of the households participating in MEPS. The sample will be identified from among the households completing their fifth and final MEPS in-person household interview; the

data will be collected in brief computer-assisted telephone interviews that will be scheduled after the fifth-round interviews are complete. This initial data collection is intended to test the feasibility of the quick response survey rather than to address a specific policy issue. If successful, the quick response survey can be utilized in future data collections to collect information on specific emerging time-sensitive issues. See Attachment A for the questionnaire and Attachments B and C for the advance and follow up letters.

This study is being conducted by AHRQ through its contractor, Westat, pursuant to AHRQ's statutory authority to conduct and support research on healthcare and on systems for the delivery of such care, including activities with respect to the quality, effectiveness, efficiency, appropriateness and value of healthcare services and with respect to quality measurement and improvement. 42 U.S.C. 299a(a)(1) and (2).

2. Purpose and Use of Information

This clearance is for a new data collection effort.

The primary purpose of this effort is to test the capacity of MEPS to support an effort in which useful policy-relevant results can be collected, processed, and made available for analysis on an expedited basis. As an evaluation of the feasibility of using MEPS as a vehicle for a quick response survey, the content to be collected in this initial effort is not focused on a specific policy issue. The items include a set of reliable and valid items previously fielded in the National Health Interview Survey and additional items that would provide information to inform planning for possible future data collection efforts. The instrument is intended to reflect the burden level of more targeted efforts that could be undertaken once the feasibility is established.

3. Use of Improved Information Technology

This initial information collection will be conducted using computer assisted telephone interviewing (CATI). Use of CATI makes it possible to collect and edit the data in real-time, while the interview is being conducted. It also makes the data available for analyses much faster than in a paper format collection. This collection includes several questions designed to assess MEPS household respondents' access to the internet and willingness to share internet address information with a national survey like MEPS. This information will inform plans for possible interactions with respondents in future data collection efforts.

4. Efforts to Identify Duplication

This effort is designed to assess the feasibility of conducting a fast response survey within the specific design of the Medical Expenditure Panel Survey. Such a test has not been previously conducted within the MEPS environment and this test would not duplicate previous efforts. Content for this effort has been chosen to be illustrative of the general content and burden level of possible future efforts, with care taken to select items that had been proven valid and reliable in other studies. Duplication of content would be an issue in future iterations of the quick response study, where subject-matter is a key consideration.

5. Involvement of Small Entities

Information will be collected from a single respondent in each responding household. Information being requested has been limited to the minimum required to test the feasibility of a quick response survey.

6. Consequences if Information Collected Less Frequently

This initial test is a one-time collection.

7. Special Circumstances

This request is consistent with the general information collection guidelines of 5 CFR 1320.5(d)(2). No special circumstances apply.

8. Federal Register Notice and Outside Consultations

8.a. Federal Register Notice

Since this project is being submitted under AHRQ's Generic Pretesting Clearance 0935-0124, publication in the Federal Register is not required.

8.b. Outside Consultations The Office of Science and Data Policy, Assistant Secretary of Planning and Evaluation, Department of Health and Human Services was consulted with regards to survey content. Consultation and input followed an iterative process until agreement was reached by all parties. Westat was consulted about survey content, in addition input was sought regarding data collection, management and release. There are no unresolved issues with regards to survey content, data collection, management and release.

9. Payments/Gifts to Respondents

No payments or respondent gifts are planned for this data collection.

10. Assurance of Confidentiality

Individuals and organizations will be assured of the confidentiality of their replies under Section 934(c) of the Public Health Service Act, 42 USC 299c-3(c). They will be told the purposes for which the information is collected and that, in accordance with this statute, any identifiable information about them will not be used or disclosed for any other purpose.

Information that can directly identify the respondent is collected as part of the normal MEPS data collection protocol. Items such as names, addresses, and telephone numbers are essential for contacting respondents for the series of MEPS interviews. All respondents for this collection will have supplied this identifying information in prior interviews, and it will be used to contact respondents for the quick response survey. One new item in this collection will test the willingness of respondents to provide an email address

The following assurance of confidentiality is provided to MEPS respondents:

This survey is authorized under Section 902(a) of the Public Health Service Act [42 U.S.C. 299a]. Personal information is protected by Federal Statutes, Section 934(c) and Section 308(d) of the Public Health Service Act [42 U.S.C. 299c-3(c) and 242m(d)] and will be kept confidential to the extent permitted by law. That law requires that information collected for research conducted or supported by AHRQ that identifies individuals or establishments be used only for the purpose for which it was supplied unless you consent to the use of the information for another purpose.

11. Questions of a Sensitive Nature

This collection contains no questions of a sensitive nature. Social Security Numbers and Medicare Numbers are not requested.

12. Estimates of Annualized Burden Hours and Costs

Exhibit 1 shows the estimated annualized burden hours for the respondents’ time to participate in this pretest. The MEPS-QRS will be completed by 1500 MEPS respondents and is estimated to take 12 minutes to complete. The total annualized burden is estimated to be 250 hours.

Exhibit 2 shows the estimated annualized cost burden associated with the respondents’ time to participate in this pretest. The total annualized cost burden is estimated to be \$6,405.

Exhibit 1. Estimated annualized burden hours

Form Name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
MEPS Quick Response Survey	1500	1	10/60	250
Total	1500	na	na	250

Exhibit 2. Estimated annualized cost burden

Form Name	Number of respondents	Total burden hours	Average hourly wage rate*	Total cost burden
MEPS Quick Response Survey	1500	250	\$21.35	\$5,338
Total	1500	250	na	\$5,338

*Based on the mean average hourly rate for all occupations (00-0000), National Compensation Survey: Occupational Wages in the United States May 2010, “U.S. Department of Labor, Bureau of Labor Statistics”.

13. Estimates of Annualized Respondent Capital and Maintenance Costs

Capital and maintenance costs include the purchase of equipment, computers or computer software or services, or storage facilities for records, as a result of complying with this data collection. There are no direct costs to respondents other than their time to participate in the study.

14. Estimates of Annualized Cost to the Government

Exhibit 3 shows the total and annualized costs to the government for conducting this pretest of the MEPS-QRS. Since this is a onetime pretest to be conducted in a single year, the total and annualized costs are identical. The total cost is estimated to be \$240,000.

Exhibit 3. Estimated Total and Annualized Cost

Cost Component	Total Cost	Annualized Cost
Project Development	\$23,000	\$23,000
Data Collection Activities	\$93,000	\$93,000
Data Processing and Analysis	\$31,000	\$31,000
Project Management	\$8,000	\$8,000
Overhead	\$85,000	\$85,000
Total	\$240,000	\$240,000

15. Changes in Hour Burden

This is a new collection of information.

16. Time Schedule, Publication and Analysis Plans

Final design and field plan	10/15/11
Data collection	4/15/12- 6/30/12
Reports on field progress	Weekly during data collection
Delivery of data file/final report	12/31/12

To test the feasibility of a Quick Response Survey the analysis will focus on several dimensions of response to the survey, examining response rates and level of effort at different phases of the collection and for specific groups of respondents. It will examine the rate at which respondents call in for an interview after receiving the advance letter and how much time elapsed between the mailing of the letter and the call in. For respondents who do not call in after receiving the first letter the analysis will examine the rate of response to the follow-up letter and the elapsed time between that mailing and their response. Respondents who do not call in from either letter will be contacted by

phone to complete the interview; the response rate from this effort will be examined, as well as the number of phone attempts required to complete the interview. In addition to considering the general feasibility of the QRS, the analysis will address specific features of the data collection operation that might inform procedures used in a future study.

Data quality issues will focus on completeness of responses. Two groups of questions will be of particular interest for possible future data collection efforts: the questions about access to health insurance documentation and use of the internet. The responses to the health insurance documentation questions will be examined to see the extent to which they indicate that respondents do have documents, recognize what we are asking for, and are willing to share them. These findings will inform possible initiatives to collect health insurance documents directly from household respondents. The responses to the internet questions will be examined to assess the availability of internet access to MEPS respondents and their willingness to use it for communication with a study such as MEPS.

17. Exemption for Display of Expiration Date

AHRQ does not seek this exemption.

Attachments:

Attachment A – MEPS QRS Questionnaire

Attachment B – Advance Letter

Attachment C -- Follow up Letter