About MEPS

Medical Expenditure Panel Survey





Introduction



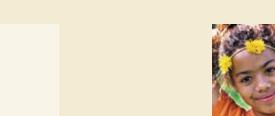


The Medical Expenditure Panel Survey (MEPS) is a principal source of information about how people in the United States receive health care and how they pay for that care. MEPS is one of the major data collection programs of the U.S. Department of Health and Human Services. It is conducted by the Agency for Healthcare Research and Quality (AHRQ) and the Centers for Disease Control and Prevention (CDC).

MEPS includes two components, the largest of which is a nation-wide survey of families and individuals. The other component of MEPS collects information directly from medical providers. By linking these sources of data, MEPS provides a comprehensive picture of how Americans use and pay for health care.











Researchers and government policymakers use MEPS data to help assess the benefits and costs of major health care policy choices facing the nation.



History of the Medical Expenditure Panel Survey

The Medical Expenditure Panel Surveys (MEPS) began in the 1970s, a time when the structure of American health care delivery, private insurance, Federal health care programs, and even the demographic composition of the country began to undergo dramatic changes. Recent years have seen intensification of these

changes. MEPS is designed to help us understand how these changes affect the kinds and amounts of health care Americans use and how they pay for that care.

Purpose and Scope

The household component of MEPS is a large-scale survey of individuals and families in scientifically selected communities across the nation. MEPS participants are chosen from among the individuals and families who participated previously in the National Health Interview Survey (NHIS) conducted by the U.S. Bureau of the Census.

Information from the household survey is used each year to create national estimates of health status, health insurance coverage, health care use, the sources that pay for health care, and amounts paid. MEPS data provide estimates for individuals and families in the overall U.S. civilian population as well as in major subgroups of the population.

MEPS uses a panel design; that is, each year a new group of households begins the series of interviews that cover 2 full calendar years. This design allows researchers to study how changes in health status, income, employment, and health insurance coverage are related to the use of health care services and payment for care. Information from MEPS can be compared with data from prior years to examine how these factors change over time.

Researchers use MEPS data to help understand many aspects of our health care system. Government policymakers use the data to help assess the benefits and costs of major health care policy choices facing the nation.

Data Collection Procedures

Survey participants are introduced to the survey through advance mailings in December and January. They participate in a series of five in-person interviews conducted at 5- to 6-month intervals.

Survey information is collected for all eligible family members. Generally, one knowledgeable adult family member answers the survey questions for the entire family. The length of the interview will vary depending on the family size, and the nature and extent of their health experiences.

On average, the in-person interviews require less than 2 hours per household. Interviewers use laptop computers to record answers to the survey questions, making the administration of the interview more efficient.

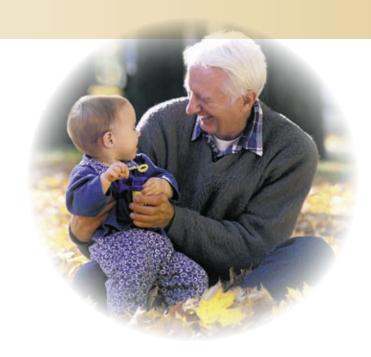
The data for this survey are collected by a national field force of 500 professionally trained interviewers directed by 32 regional supervisors. The Agency for Healthcare Research and Quality chose Westat, a survey research organization with headquarters in the Washington, DC area, to employ the field staff and conduct the interviews. All field staff wear a survey identification badge.

Topics Covered in the Interviews

The interviews cover a variety of topics related to health care, including:

- Demographics (age, race, sex, etc.)
- Health conditions
- Current health status
- Visits to health care providers
- Charges and payments for health care
- Prescription medicines
- Employment
- Health insurance
- Satisfaction with health care

Each interview focuses on information for a specific period of time, generally since January 1 or the previous interview. A complete set of interviews collects health information for 2 full calendar years.



By participating in MEPS, you can help the U.S. Department of Health and Human Services obtain a complete and comprehensive picture of the health care issues facing Americans, and shape the health care system of tomorrow.

Uses of the Data

The primary users of MEPS data include government institutions, public and private research organizations, universities, health care providers, and educators. Important findings from the survey are published in major journals. Recent findings, information about public data releases, and much more information about the study are available on the AHRQ web site (www.MEPS.AHRQ.gov).

Requests for further information about the Medical Expenditure Panel Survey (MEPS) should be addressed to:

Project Director
Medical Expenditure Panel Survey
Agency for Healthcare Research and Quality
540 Gaither Road
Rockville, MD 20850

Questions About MEPS

1 What is the Medical Expenditure Panel Survey (MEPS)?

MEPS is an ongoing comprehensive survey that studies the cost of health care and the ways Americans pay for health care. Conducted for the Department of Health and Human Services, this survey is a principal source of data about the U.S. health care system. MEPS is conducted with a cross-section of the American public and collects detailed information on health status, health care use and expenses, and the way people pay for health care.

2 Why do we need a national survey of medical expenditures?

MEPS provides detailed information on the cost of health care for the entire population of the United States. This information is vital for answering questions about how the health care system operates currently, and how changes in that system would affect the public.



3 What makes MEPS different from other surveys?

MEPS is the only national medical survey that is able to link data on individuals and households directly with their medical use and health care costs. No other survey contains such essential information for determining the true cost of health care and who pays for it. In addition to providing an ongoing source of current data, MEPS makes it possible to examine how health care use, expenses, sources of payment, and insurance coverage change over time.

4 What do I have to do to participate?

Some of the questions deal with topics such as age, education, and employment and can be answered easily. Most questions ask about health-related issues such as use of prescription medicines and specific health events such as visits to a doctor's office. You may find it easier to answer questions if you have medical bills, receipts, or notes on a personal calendar, but these materials are not required for participation.

5 Who uses MEPS data?

MEPS data are used by a wide variety of people from both the private and public sectors, including hospitals; health care planners; and Federal, State, and local government agencies.

6 Can MEPS be used to inform U.S. health care policymakers?

The information from MEPS provides input that's critical to public policy issues and the evaluation of proposals to improve the health care system. MEPS data have also proved valuable in examining how changes in health insurance coverage over time have affected availability and use of health services, particularly by children.





What information does MEPS collect that can help me?

MEPS data on health status, access to medical care, and the satisfaction with that care help policymakers and researchers assess the extent to which the health care needs of the American public are being met.

MEPS is the only source of information available for estimating the total health care costs families face each year. Here are some examples:

Elderly: MEPS data can be used to examine the proportion of personal income the elderly and their families are using to pay for medical care not covered by Medicare.

Minorities: MEPS can be used to assess differences among various racial and ethnic groups in health insurance coverage, health care use, and costs paid directly by the family.

Children: MEPS also collects data on children's immunizations, the types of doctors who treat them, and any disabilities the children have.

MEPS is the only national medical survey that is able to link data on individuals and households directly with their medical use and health care costs.

Answers MEPS Will Give Us

MEPS addresses many questions that are asked of the health care industry. *How does health care use, cost, and insurance status vary by:*

- Income
- Age
- Race and Ethnicity
- Geographic Locale
- Family Composition
- Household Health Status
- Functional Impairment
- Chronic/Acute Conditions
- Employment Status

MEPS questions about private health insurance ask:

- Who is covered?
- Sources of coverage:
 - Employment-related plans
 - Public health insurance plans such as Medicare, TRICARE, and State-sponsored programs such as Medicaid and SCHIP (State Children's Health Insurance Program)
 - Private insurance purchased directly from an insurance company or HMO
- How coverage affects use of services?

Users of MEPS Data

Here are a few examples:

Private

- Insurance Companies
 - Blue Cross and Blue Shield
 - Kaiser Permanente
 - United Healthcare Corp.
- Associations
 - American Association of Retired Persons (AARP)
 - American Medical Association (AMA)
- Newspapers
 - New York Times
- Pharmaceutical Companies
 - Merck and Company, Inc.

Public

- U.S. Department of Health and Human Services
- Centers for Disease Control and Prevention (CDC)
- Food and Drug Administration (FDA)
- National Institutes of Health (NIH)
- U.S. Department of Veterans Affairs
- Environmental Protection Agency (EPA)
- Academic Institutions
 - Johns Hopkins Bloomberg School of Public Health
 - Duke University
 - Harvard University
 - University of California

Requests for further information about **MEPS** or any of its component surveys should be addressed to:

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If you have questions or comments, you may call Alex Scott toll free at 1-800-945-**MEPS** (6377). Or visit the AHRQ web site: www.meps.ahrq.gov



