Nonsubstantive Change Request

**NATIONAL HEALTH INTERVIEW SURVEY**

OMB No***.*** 0920-0214, Expiration Date 12/31/2023

Contact Information:

Stephen Blumberg, PhD

Division of Health Interview Statistics

National Center for Health Statistics/CDC

3311 Toledo Road

Hyattsville, MD 20782

301.458.4107 (voice)

301.458.4035 (fax)

swb5@cdc.gov

October 26, 2021

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| Att 5a | 2022 NHIS Proposed New Content – Concepts Measured |
| Att 5b | 2022 NHIS Proposed New Content - Concepts Measured, Duplication, and Proposed Uses of Data |
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**NCHS National Health Interview Survey**

This is a request for approval of a nonsubstantive change to the National Health Interview Survey (NHIS) (OMB No. 0920-0214, Exp. Date 12/31/2023), conducted by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC). This nonsubstantive change requests two general changes: (1) reduction in burden hours for a health exam with NHIS sample adults and (2) changes in content for the 2022 NHIS.

Reduction in burden hours for a health exam with NHIS sample adults

NCHS is no longer planning to conduct a follow-up health exam with NHIS sample adults in 2022. The NHIS is currently conducting a pilot study that was approved under National Health and Nutrition Examination Survey and Related NCHS Programs Generic Information Collection (OMB No. 0920-1208, Exp. Date 08/31/2023). The start of the pilot study was delayed until June of 2021. This prevented NCHS from sufficiently evaluating the pilot study in time to begin fielding the health exam with the annual NHIS in 2022. The earliest that the NHIS may begin administering health exams with NHIS sample is 2023. The inclusion of the health exam in the NHIS depends on successful implementation and demonstration of the feasibility of the health exam in the pilot study. Therefore, NCHS is reducing the burden from the health exam in half to 3,750 annualized burden hours; the new annualized estimate of 5,000 respondents reflects the potential for 15,000 respondents in 2023, reduced from 30,000 respondents across 2022-2023.

Changes in survey content

The NHIS has been conducted every year since 1957. The current design of the NHIS questionnaire implemented in 2019, features a rotational schedule consisting of annual core, rotating core, emerging content and sponsored content modules. Summarized here are the proposed nonsubstantive changes from the 2021 NHIS to the 2022 NHIS.

The NHIS maintains a set of items that is consistently fielded every year. In 2022, the following content ***will be added*** to the annual core:

1. Add 4 questions related to dental and vision coverage for Medicare Advantage beneficiaries

The NHIS rotates core content onto the survey on a periodic basis such that all content will appear at least once in a three year cycle begun in 2019. As of the end of 2021, all NHIS rotating core content has been fielded at least once. There are no changes to the rotating content other than the usual rotation of sections on and off the NHIS.

Addition of questions planned to be rotated in as part of the NHIS rotating core schedule

1. Add 6 questions on utilization of services for dental care and other health providers for adults
2. Add 15 questions on mental health assessments for adults
3. Add 31 questions on health behaviors including questions about physical activity, walking, fatigue, sleep, alcohol use, smoking history and cessation for adults
4. Add 8 questions on utilization of services for dental care, mental health care, and other health providers for children
5. Add 33 questions on mental health assessments for children
6. Add 19 questions on health behaviors including body mass index measurement, physical activity, neighborhood characteristics, sleep, and screen time for children

Removal of questions planned to be rotated out as part of the NHIS rotating core schedule

1. Remove 12 questions on allergies and other conditions for adults
2. Remove 6 questions on psychological distress for adults
3. Remove 6 questions on detailed employment for adults
4. Remove 29 questions on repetitive strain and injuries for adults
5. Remove 9 questions on chronic pain for adults
6. Remove 21 questions on preventive services for adults
7. Remove 6 questions on allergies for children
8. Remove 18 questions on injuries for children

This submission also seeks approval to add and remove ***sponsored content*** in the 2022 NHIS:

Addition of sponsored content in 2022

1. Add 25 questions as part of annual cancer control content sponsored by the National Cancer Institute (NCI, NIH) and the National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP, CDC). This includes 14 questions on diet and nutrition and 11 questions on smoking cessation for adults.
2. Add 1 question on menthol cigarette use for adults sponsored by the Food and Drug Administration (FDA).
3. Add 25 questions on complementary and integrative health for adults and children sponsored by the National Center for Complementary and Integrative Health (NCCIH, NIH).
4. Add 17 questions on voice, swallowing, speech, and language problems for adults and children sponsored by the National Institute on Deafness and Other Communication Disorders (NIDCD, NIH).
5. Add 2 questions on HPV vaccination for adults and children and 2 questions on tetanus immunization for adults

Removal of sponsored content from 2021

1. Remove 9 questions on work arrangements for adults
2. Remove 10 questions on social distancing at work for adults
3. Remove 7 diabetes related questions for adults
4. Remove 21 questions on cancer screening for adults
5. Remove 4 questions on access to cancer care during the pandemic for adults
6. Remove 1 question on life satisfaction for adults
7. Remove 15 questions on taste and smell for adults
8. Remove 4 questions on hepatitis vaccination, one question on travel relevant for vaccination, and three questions on shingles vaccination for adults

In addition, this submission seeks to add and remove emerging content to address issues of growing interest to the Department of Health and Human Services.

Addition of emerging content in 2022

1. Add 3 long-COVID symptom questions for adults and children
2. Add 6 questions on health care access barriers
3. Add 3 questions on respondent sex at birth and gender identity

Removal of emerging content from 2021

1. Remove 1 item on COVID-19 testing for adults and children
2. Remove 3 COVID-19 related questions on access to care for adults and children
3. Remove 4 COVID-19 related questions on caregiving received for adults
4. Remove 2 questions on social support for adults

Finally, some questions on the reinterview questionnaire were replaced to reflect new content for the 2022 NHIS.

1. Two questions about whether respondents remembered being asked about questions on injuries and allergies for adults are being replaced by 2 questions on yoga and dental examination for adults.
2. One question about whether respondents remembered being asked about questions on allergies for children is being replaced with 1 item on concussions for children.
3. **Justification**

# 1. Circumstance Making the Collection of Information Necessary

The NHIS is conducted by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC) to collect, on an annual basis, statistically valid data on the amount, distribution, and effects of illness and disability in the population and on the utilization of health care services for such conditions. The NHIS has been conducted every year since 1957, and the questionnaire has been periodically redesigned (most recently in 2019) to reflect the latest state of the science and maintain the survey’s topical relevance toward its critical public health mission.

The NHIS has been conducted every year since 1957. The current design of the NHIS questionnaire implemented in 2019, features a rotational schedule consisting of annual core, rotating core, emerging content and sponsored content modules. Attachment 3b provides a visual depiction of the content and module structure. The NHIS sample adult and sample child questionnaires include annual core content that is scheduled to be fielded every year, rotating content that is fielded periodically, emerging content to address new topics of growing interest to NHCS, CDC, and DHHS, and sponsored content that is fielded when external funding is available.

# 2. Purpose and Use of Information Collection

All rotating content for the 2022 NHIS has previously been included in the NHIS after the redesign in 2019. For each of the new items added – annual, sponsored, and emerging - attachment 5a lists the concepts and Attachment 5b expands list of concepts to describe efforts to locate duplication with other surveys and proposed uses of the data. This includes the following content:

Annual core: New annual core include items on dental and vision coverage for Medicare advantage beneficiaries in the insurance section.

Sponsored content: New sponsored content for sample adults only includes items on diet and nutrition, smoking cessation, menthol cigarette use, and tetanus, shingles and COVID-19 vaccinations. Items measuring vaccination status of COVID-19 for adults have been modified to incorporate the new guidance for immunosuppressed adults and booster shots. When guidance is available for children, the questions may need to be modified accordingly. For both adults and children, items are proposed for complementary and integrative health, voice, swallowing, speech and language disorders, and HPV vaccinations.

Emerging content: New emerging content includes items on long COVID-19 symptoms for adults and children. Items are also proposed to capture access barriers to care (nonfinancial), and gender identity of adults.

All of the content that will be added to the 2022 NHIS, except for sample adult gender identity and nonfinancial access barriers to care, was included in the 3- year (2021-2023) submission that was approved on 12-23-2020. The sample adult gender identity questions help NCHS inform “Executive Order 13988 on Preventing and Combating Discrimination on the Basis of Gender Identity and Sexual Orientation”. The sex and gender identity questions are being tested in the 2022 NHIS in an experimental design that is described in Attachment 5b. The results of the test will inform future question wording on sex and gender in the NHIS. The nonfinancial access barriers to care questions supplement existing NHIS questions on financial barriers to care and help NCHS provide better data to address “Executive Order 13985 on Advancing Racial Equity and Support for Underserved Communities Through the Federal Government.”

Reinterview

The Census Bureau conducts a short quality control reinterview with a small subsample (<5%) of NHIS respondents. Items are updated each year to reflect the change in NHIS content. The reinterview instrument can be found as Attachment 9d.

Decision on life satisfaction question

The 2021 NHIS included two versions of a life satisfaction question: a version with an 11 point response scale and a version with 4 response categories. NCHS decided to use the 4 category version in 2022. The documentation for this decision is in Attachment 6.

# 12. Estimates of Annualized Burden Hours and Costs

1. **Time Estimates**

This nonsubstantive change request seeks approval of changes to the OMB revision package that was approved on 12/31/2020 (OMB# 0920-0214, expires 12/31/2023). The average burden for each survey component for one complete survey cycle is shown in the table below. The estimated total average annual burden for all components in the revision package was 42,845 hours. The total average annualized burden hours is being reduced by 5,250 hours. The updated total annualized burden hours are 37,595 hours as a result of this nonsubtantive change request.

The reduced total average annual burden is the result of two types of changes outlined in this nonsubstantive change request. First, the new annualized estimate of 5,000 health exam respondents reflects the potential for 15,000 respondents in 2023, reduced from 30,000 respondents across 2022-2023. The new estimate of annualized burden hours from the health exam is 3,750, reduced from 7,500. Second, changes to the 2022 NHIS content resulted in revisions to the burden hours for the Adult Questionnaire and Child Questionnaire. The sample adult interview will see a reduction in burden hours due to planned reductions in rotating core content and reductions in the amount of sponsored content for 2022. The average annualized burden per response across the years 2021-2023 will decrease from 48 to 44 minutes. The changes result in a reduction of 2,000 total burden hours for the Adult Questionnaire. The average annualized burden per response across the years 2021-2023 will increase from 19 to 22 minutes for the Child questionnaire as a result of planned increases in rotating core content and increases in the amount of sponsored content for 2022. This results in a net increase of 500 total burden hours for the Child Questionaire.

Any future modification that might impact the instruments and/or burden estimates will be submitted as a nonsubstantive change request for OMB review, as applicable.

Lines 1-3 of the burden table represent the different sections of the NHIS questionnaire. Line 4 covers the methodological projects such as web and/or mail-based methodological, cognitive testing activities, and pilot studies. Line 5 covers the adolescent follow-back survey. Line 6 covers a follow-up health exam. Small quality control resurveys of participating households are represented on line 7.

*Estimated Annualized Burden Hours*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Type of Respondent | Form Name | Number of Respondents | Number of Responses per respondent | Average Burden per Response (in hours) | Total Burden Hours |
| Adult Household Member | Household Roster  | 36,000 | 1 | 4/60 | 2,400 |
| Sample Adult | Adult Questionnaire | 30,000 | 1 | 44/60 |  22,000 |
| Adult Family Member | Child Questionnaire | 10,000 | 1 | 22/60 | 3,667 |
| Adult Family Member | Methodological Projects  | 15,000 | 1 | 20/60 | 5,000 |
| Sample Child | Adolescent follow-back survey | 1,200 | 1 | 16/60 | 320 |
| Sample Adult | Health Exam  | 5,000 | 1 | 45/60 | 3,750 |
| Adult Family Member | Reinterview Survey  | 5,500 | 1 | 5/60 | 458 |
| Total |  |  |  |  | 37,595 |

Not all questions apply to each person, and the questionnaire instrument automatically skips over questions that do not apply, based on earlier information given by the respondent. Thus, no respondent is ever asked all of the questions in the questionnaire.

The estimate of response burden above is based on an average length of interview per household. Variations occur in individual household interview times primarily because of differing numbers of persons in the household and variations in the number of health conditions reported in the household.

The burden on any single member of a sample family also varies according to who is designated respondent for each component. In some sample families the same adult could be the respondent for all of the major components: roster, adult, and child. In other families there could be a different respondent for each component. In the first case, the total average burden on the single respondent would be about one hour; in all other cases the burden on a single respondent would be less.

**B. Cost to Respondents**

At an average wage rate of $21.00 per hour, the estimated annualized cost for the 37,595 burden hours is

$789,495. This estimated cost does not represent an out of pocket expense but represents a monetary value attributed to the time spent doing the interview.

*Estimated Annualized Burden Costs*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Type of Respondent | Form Name | Total Burden Hours | Hourly Wage Rate | Total Respondent Costs |
| Adult Household Member | Household Roster  | 2,400 | $21.00 | $50,400 |
| Sample Adult | Adult Questionnaire | 22,000 | $21.00 | $462,000 |
| Adult Family Member | Child Questionnaire | 3,667 | $21.00 | $77,000 |
| Adult Family Member | Methodological Projects  | 5,000 | $21.00 | $105,000 |
| Sample Child | Adolescent follow-back survey | 320267 | $21.00 | $6,720 |
| Sample Adult | Health Exam | 3,750 | $21.00 | $78,750 |
| Adult Family Member | Reinterview Survey  | 458 | $21.00 | $9,625 |
| Total | $789,495 |

# 15. Explanation for Program Changes or Adjustments

There is a reduction in total average annualized burden due to this nonsubstantive change. This reduction is the result of two changes outlined in this nonsubstantive change request. First, NCHS is no longer planning to conduct a follow-up health exam with NHIS sample adults in 2022. The NHIS is currently conducting a pilot study that was approved under a generic clearance for the National Health and Nutrition Examination Survey (NHANES). The start of the pilot study was delayed until June of 2021. This prevented NCHS from sufficiently evaluating the pilot study in time to begin fielding the health exam with the annual NHIS in 2022.

In addition, changes to the 2022 NHIS content resulted in revisions to the burden hours for the Adult Questionnaire and Child Questionnaire. There will be a reduction in burden hours for the Adult Qustionnaire due to planned reductions in rotating core content and reductions in the amount of sponsored content for 2022. There will be a slight increase in burden for the Child Questionnaire due to planned increases in rotating content and increases in the amount of sponsored content.