Nonsubstantive Change Request

NATIONAL HEALTH INTERVIEW SURVEY

OMB No. 0920-0214, Expiration Date 12/31/2026

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Sections

INTRODUCTION

A. JUSTIFICATION

- 1. Circumstances Making the Collection of Information Necessary
- 2. Purpose and Use of Information Collection
- 12. Estimates of Annualized Burden Hours and Costs
- 15. Explanation for Program Changes or Adjustments.

List of Attachments

Att 3b	NHIS Snapshot 3 Year-Cycle Questionnaire Content and Periodicity
Att 5b	2025 NHIS Proposed New Content - Concepts Measured, Duplication, and Proposed Uses
	of Data
Att 9a	2025 NHIS Roster Questionnaire
Att 9b	2025 NHIS Sample Adult Questionnaire
Att 9c	2025 NHIS Sample Child Questionnaire
Att 9d	2025 Reinterview Questionnaire

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NCHS National Health Interview Survey

INTRODUCTION

This is a request for approval of a nonsubstantive change to the National Health Interview Survey (NHIS) (OMB No. 0920-0214, Exp. Date 12/31/2026), conducted by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC). This nonsubstantive change requests changes in content for the 2025 NHIS.

Summary of 2025 NHIS Content Changes

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 2024 NHIS to the 2025 NHIS.

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.

The 2025 NHIS

The 2025 NHIS will include annual core and the rotating core scheduled for 2025 along with new sponsored content (that will replace the 2024 sponsored modules). Annual core content remains the same. Rotating core content largely remains the same except content on aspirin and preventative screening. The aspirin section changed from four to two questions given updated guidance on aspirin use for the prevention or control of heart disease. In the preventative screening section colorectal cancer questions will be administered to respondents 35 years old or older given updated guidance that expands the recommended age for colorectal cancer screening.

Removed Content

Rotating sample adult core content that was on the NHIS in 2024 and will rotate off the 2025 NHIS includes allergies, psychological distress, industry and occupation, injuries, and health related behaviors (physical activity, walking, sleep, fatigue, smoking history, and alcohol use). Sponsored content that will be removed includes content on menthol cigarettes, lunger cancer screening, other chronic conditions (Psoriasis, Chron's disease, and chronic fatigue syndrome), immunosuppression, vaccination details (flu vaccination during pregnancy, follow-up shingles vaccination questions, Hepatitis A vaccination), work or volunteer activities in a medical facility, travel outside the United States, taste and smell, food security, sun care and protection, and perceptions of walking environment. Emerging content on housing costs and transportation barriers to care has also been removed.

Items on allergies, injury, and health related behaviors (physical activity, height and weight, neighborhood characteristics, sleep, and screen time) will rotate off the sample child core. Sponsored content on food security and taste and smell will also be removed.

Added Content

The 2025 rotating sample adult core will include questions that were previously fielded in the NHIS including mental health assessment, service utilization (dental care, vision care, therapy, and home health care), chronic pain, aspirin use, and preventative screening. All this rotating content has been fielded on the NHIS since the 2019 NHIS redesign. Sample adult sponsored content for 2025 includes items on life satisfaction, diabetes medications (insulin and GLP-1 injectables), age of disability onset, long COVID, vaccination (shingles, tetanus, Tdap, RSV), other tobacco products, concussions, social support and loneliness, preventative screening (diabetes and cancer), pain management, social connectedness and isolation, epilepsy, caregiving, ADHD/ADD diagnoses and treatment, whole person health, menopause, and voice, swallowing, speech, and language difficulty. Much of this sponsored content has been included on the survey since the 2019 NHIS redesign; However, sponsored content on menopause, social support and loneliness, and whole person health will be fielded for the first time in 2025. Emerging content on internet access and health information technology, language spoken at home, volunteer activities, civic engagement, and gender identity will be retained from the 2024 questionnaire, and content on social supports for parents will be added.

The 2025 rotating sample child core will include items on service utilization (dental care, mental health care, physical and other therapeutic care), mental health assessment, and stressful life events. All this rotating content has been fielded on the NHIS since the 2019 NHIS redesign. Sponsored content on COVID-19 vaccination, concussion, and voice, swallowing, speech, and language difficulty will be retained from the 2024 sample child questionnaire.

Reinterview Questionnaire Changes

Finally, some questions on the reinterview questionnaire will be replaced to reflect new content changes within the 2025 NHIS. Three questions asking whether the sampled adult respondent remembered being asked about difficulty smelling odors, experiencing a sunburn in the past 12 months, and experiencing an injury in the past 3 months will be replaced by three questions asking whether the sampled adult remembered being asked about voice difficulties or trouble speaking, ability to find meaning and purpose in daily life, and experiencing pain the past 3 months. One question asking whether the sample child respondent remembered being asked about their child's allergies will be replaced with one question asking whether the sample child respondent remembered being asked about if their child had been separated from a parent or guardian because they went to jail.

Detailed List of 2025 NHIS Content Changes

Rotating Content

The NHIS annually rotates content in and out of the questionnaire on a fixed schedule (see Attachment 3b).

Below is a list of questions scheduled to be rotated in for the 2025 NHIS.

Adults

- 1. Rotate in 2 questions on aspirin use (Guidance on aspirin use was recently updated resulting in the removal of 2 additional questions that were in this section previously.)
- 2. Rotate in 3 questions on dental care
- 3. Rotate in 17 questions on preventative services and preventative screening
- 4. Rotate in 10 questions on chronic pain
- 5. Rotate in 3 questions on physical or other therapeutic care
- 6. Rotate in 8 questions on depression
- 7. Rotate in 7 questions on anxiety

Children

- 8. Rotate in 3 questions on physical or other therapeutic care
- 9. Rotate in 3 questions on dental care
- 10. Rotate in 7 questions on stressful life events
- 11. Rotate in 2 questions on mental health

Below is a list of questions scheduled to be rotated out for the 2025 NHIS. In accordance with the fixed schedule, these questions will return in future years.

Adults

- 1. Rotate out 3 questions on health conditions
- 2. Rotate out 6 questions on allergies
- 3. Rotate out 6 questions on serious psychological distress
- 4. Rotate out 8 questions on repetitive strain injury
- 5. Rotate out 21 questions on injury
- 6. Rotate out 3 questions on fatigue
- 7. Rotate out 8 questions on alcohol use
- 8. Rotate out 5 questions on physical activities
- 9. Rotate out 8 questions on walking
- 10. Rotate out 1 question on content of care about physical activity
- 11. Rotate out 7 questions on sleep
- 12. Rotate out 6 questions on detailed employment
- 13. Rotate out 4 questions on cigarettes and e-cigarettes

Children

- 14. Rotate out 6 questions on allergies
- 15. Rotate out 2 questions on height and weight
- 16. Rotate out 18 questions on injury
- 17. Rotate out 6 questions on physical activity
- 18. Rotate out 4 questions on neighborhood characteristics
- 19. Rotate out 6 questions on sleep

20. Rotate out 1 question on screen time

Sponsored Content

The NHIS also works with sponsors from other CDC centers, NIH, and other government agencies to field content relevant to their missions.

Below is a list of sponsored questions that will continue from 2024 to the 2025 NHIS.

Adults

- 1. Continue 1 question on life satisfaction
- 2. Continue 3 questions on insulin use
- 3. Continue 1 question on injectable medications (GLP-1)
- 4. Continue 1 question on age of disability onset
- 5. Continue 4 questions on Long COVID
- 6. Continue 1 question on pregnancy resulting in live birth
- 7. Continue 1 question on Tdap vaccination
- 8. Continue 2 questions on COVID-19 vaccination
- 9. Continue 1 question on shingles vaccination
- 10. Continue 1 question on tetanus vaccination
- 11. Continue 5 questions on other tobacco products
- 12. Continue 5 questions on concussions
- 13. Continue 2 questions on social support and loneliness

Children

- 14. Continue 4 questions on Long COVID
- 15. Continue 2 questions on COVID-19 vaccination
- 16. Continue 5 questions on concussions

Below is a list of sponsored questions to be added in the 2025 NHIS

Adults

- 1. Add 2 questions on A1C testing
- 2. Add 1 question on stress from living with diabetes
- 3. Add 21 questions on preventative cancer screening (colorectal, prostate, cervical, and breast cancer)
- 4. Add 1 question on RSV vaccination
- 5. Add 11 questions on pain management
- 6. Add 4 questions on social connectedness and isolation
- 7. Add 4 questions on epilepsy
- 8. Add 1 question on caregiving
- 9. Add 17 questions on voice, swallowing, speech, and language difficulty
- 10. Add 5 questions on ADD and ADHD
- 11. Add 8 questions on whole person health
- 12. Add 5 questions on menopause

Children

13. Add 17 questions on voice, swallowing, speech, and language difficulty

Below is a list of sponsored questions to be removed from the 2025 NHIS

Adults

- 1. Remove 1 question on cigarette use
- 2. Remove 2 questions on menthol cigarettes
- 3. Remove 3 questions on Psoriasis, Ulcerative Colitis, and Chron's disease
- 4. Remove 2 questions on chronic fatigue syndrome
- 5. Remove 2 question on immunosuppression
- 6. Remove 1 question on period of pregnancy
- 7. Remove 2 questions on flu vaccination during pregnancy
- 8. Remove 1 question on number of COVID-19 vaccinations
- 9. Remove 1 question on Hepatitis A vaccination
- 10. Remove 2 questions on work or volunteer activities in a medical facility
- 11. Remove 1 question on travel outside the United States
- 12. Remove 5 follow-up questions on shingles vaccination
- 13. Remove 1 question on receiving SNAP benefits in the past 30 days
- 14. Remove 10 questions on food security
- 15. Remove 17 questions on taste and smell, 5 of which are COVID-19 related
- 16. Remove 3 questions on lung cancer screening
- 17. Remove 12 questions on perceptions of walking environment
- 18. Remove 10 questions on sun care and protection

Children

- 19. Remove 1 question on receiving SNAP benefits in the past 30 days
- 20. Remove 10 questions on food security
- 21. Remove 8 questions on taste and smell

Emerging Content

Finally, as part of the redesigned NHIS some survey time is allotted to capture emerging issues relevant to NCHS mission.

Below is a list of emerging content questions that will continue from 2024 to the 2025 NHIS.

Adults

- 17. Continue 5 questions on Internet access and health information technology
- 18. Continue 6 questions on language spoken at home
- 19. Continue 2 questions on volunteer activities
- 20. Continue 2 questions on civic engagement
- 21. Continue 2 questions on gender identity

Below is a list of emerging content questions to be added for the 2025 NHIS.

Adults

22. Add 3 questions on social supports for parents

Below is a list of emerging content questions to be removed for the 2025 NHIS.

Adults

- 23. Remove 1 question on GLP-1 injectable diabetes medications (This item is now included under sponsored content)
- 24. Remove 1 question on housing costs
- 25. Remove 1 question on transportation barriers to care

A. JUSTIFICATION

1. Circumstance Making the Collection of Information Necessary

Background

The NHIS is conducted by the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC), to comply with the NCHS mandate under 42 USC 242k 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. NHIS data are used widely throughout the Department of Health and Human Services (DHHS) to monitor trends in illness and disability and to track progress toward achieving many of the health objectives for the nation. The data are also used by the public health research community for epidemiologic and policy analysis of such issues as characterizing those with various health problems, measuring levels of health insurance coverage, determining barriers to accessing and using health care, and evaluating the impact of changes in federal health programs.

In accordance with the 1995 initiative to increase the integration of surveys within DHHS, respondents to the NHIS serve as the sampling frame for the Medical Expenditure Panel Survey (MEPS; OMB# 0935-0118, expires 11/30/2025). MEPS uses completed interviews from the NHIS to identify and select the desired sample, contact that sample to collect additional data, and combine their survey data with the original NHIS data. These procedures reduce survey costs, reduce overall burden on the public, and increase the amount of data available for critical health-related analysis.

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 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 NCHS, CDC, and DHHS, and sponsored content that is fielded when external funding is available.

2. Purpose and Use of Information Collection

The purposes of the NHIS are (1) to provide national data on an annual basis on the prevalence of chronic conditions and impairments, the extent of disability, the utilization of health care services, and other health-related topics; (2) to provide more detailed information on selected topics periodically and on a one time basis (3) to provide a sampling frame for the Medical Expenditure Panel Survey and other follow-back surveys. It is also a main provider of data for the Congressionally mandated *Health*, *United States* report and provides data for many indicators used in monitoring progress toward current Healthy People goals and for detailing health disparities; and (4) provide a gold standard to benchmark and calibrate estimates from the NCHS Rapid Surveys System (OMB# 0920-1408, expires 6/30/2026).

A major strength of the NHIS is its ability to display health characteristics by selected demographic and socio-economic characteristics of the U.S. civilian, noninstitutionalized population. NHIS data are typically used for program planning and evaluation, public health education and health promotion and epidemiological research. Input to the design of questions is solicited from experts in a variety of organizations within the federal government, and from outside researchers and public health professionals.

In addition to the principal questionnaires, like in past years, a small subsample (<5%) of respondents will be reinterviewed as a quality control measure; the reinterview questionnaire is provided in Attachment 9d.

12. Estimates of Annualized Burden Hours and Costs

A. Time Estimates

The average burden for each survey component for one complete one-year survey cycle is shown in the table below.

The estimated overall average annual burden for 2025, including the roster, adult questionnaire, child questionnaire, methodological projects, NHIS Teen and the reinterview component is 37,891 hours.

Lines 1-3 of the burden table represent the different sections of the NHIS questionnaire. Line 4 covers any methodological projects such as web and/or mail-based methodological projects, cognitive testing, and mixed-mode NHIS activities. Line 5 covers the NHIS-Teen survey. Small quality control reinterview surveys of participating households are represented on line 6.

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
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Adult Household Member	Household Roster	36,000	1	4/60	2,400
Sample Adult	Adult Questionnaire	33,000	1	49/60	26,950
Adult Family Member	Child Questionnaire	10,000	1	18/60	3,000
Adult Family Member	Methodological Projects	15,000	1	20/60	5,000
Sample Child	NHIS-Teen survey	333	1	15/60	83
Adult Family Member	Reinterview Survey	5,500	1	5/60	458
Total					37,891

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.

The amount of time needed to complete the 2025 sample adult (reduction of 550 hours) and sample child questionnaires (reduction of 1,000 hours) is expected to be slightly reduced as compared to 2024 due to a cyclical, net reduction in survey content.

The amount of burden hours estimated for methodological projects and the reinterview survey is the same. The NHIS-Teen will not be conducted in 2025, but may be conducted in 2026, thus a reduced annualized burden (reduction of 84 hours) is reflected in the table above.

B. Cost to Respondents

At an average wage rate of \$35.21 per hour, the estimated annualized cost for the 37,892 burden hours is \$1,334,165. (Wage information is from the Bureau of Labor Statistics:

http://www.bls.gov/news.release/empsit.t19.htm.) 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
Adult Household	Household Roster	2,400	\$35.21	\$84,504
Sample Adult	Adult Questionnaire	26,950	\$35.21	\$948,910
Adult Family Member	Child Questionnaire	3,000	\$35.21	\$105,630
Adult Family Member	Methodological Projects	5,000	\$35.21	\$176,050
Sample Child	NHIS-Teen Survey	83	\$35.21	\$2,934
Adult Family Member	Reinterview Survey	458	\$35.21	16,138
Total				\$1,334,165

15. Explanation for Program Changes or Adjustments

There is a slight decrease in average annualized burden for the 2025 NHIS compared to the 2024 NHIS. This decrease in burden is due to net decreases in the number of survey items included in both the adult and child questionnaires, revised estimates to the burden of the child questionnaire based on monitoring of the 2024 NHIS, and a decision to not field the NHIS-Teen in 2025.