What's New in the 2013-2014 California Health Interview Survey

As an ongoing cross-sectional survey of California's population, each CHIS two-year data cycle has its own unique features. **This document describes the main cycle-specific methodological changes that were implemented in CHIS 2013-2014.** It is recommended that CHIS data users review the information below and detailed online documentation as necessary before analyzing or reporting CHIS data.

CHIS Methodological Documentation
Online: http://healthpolicy.ucla.edu/chis/design/Pages/methodology.aspx

1) **One-Year Data File Release** – CHIS 2013 and 2014 public use files (PUFs) were released as separate, one-year data files (one file for each year), which is different from the combined two-year data files released in the past. The switch to single-year data files was facilitated by continuous data collection, which began in the CHIS 2011-2012 data collection cycle. The CHIS 2013-2014 data collection cycle includes interviews conducted between February 2013 and early January 2015 with approximately half of the interviews conducted during calendar year 2013 and the other half during calendar year 2014. We will re-release CHIS 2011 and 2012 data files as separate, one-year files later in 2015 for researchers who want to make single year estimates across this four-year timespan. Two-year data files for the CHIS 2013-2014 cycle can be requested later this year via our Data Access Center (DAC, see http://healthpolicy.ucla.edu/chis/data/Pages/GetCHISData.aspx).

   As of the CHIS 2013 and 2014 data file release (August 2015), AskCHIS (http://ask.chis.ucla.edu) included individual year data for CHIS 2011, 2012, 2013, and 2014, so users can produce single-year estimates. In future years, we anticipate releasing one-year PUFs and updating AskCHIS annually, which will provide CHIS users with much more timely data and greater flexibility in structuring their analyses. Users should be cautious examining indicators for small populations (such as child, teen, or racial/ethnic groups) due to the smaller sample sizes of the one-year data; pooling two or more cycles of one-year data is generally advised.

   Users who need more information about pooling/trending data over time should review the Analyze CHIS Data website at http://healthpolicy.ucla.edu/chis/analyze/Pages/default.aspx or go to the Analyze CHIS Data user forum at http://healthpolicy.ucla.edu/forum/Pages/Forum.aspx.

2) **Measuring Modified Adjusted Gross Income (MAGI) and Medi-Cal Eligibility –** CHIS has always included adult survey questions to estimate eligibility for California's Medicaid program, Medi-Cal. The 2010 Patient Protection and Affordable Care Act (ACA) included numerous changes to Medi-Cal eligibility. Effective January 1, 2014, income-based eligibility for Medi-Cal and Healthy Families (California's Children's Health Insurance Program) participation is determined by Modified Adjusted Gross Income (MAGI). CHIS 2014 (and CHIS 2013, but most relevant to 2014) included the following changes to approximate a respondent's MAGI.

   a. Added two questions to identify households receiving workers' compensation in the past month and the amount received in order to exclude workers' compensation income from total income (AL32, AL33);
   b. Modified questions on child support to eliminate "other" income sources (government or veterans' programs) (AL15, AL16) to exclude child support income from total income;
   c. Added two questions clarifying whether there is anyone else not living in the household, but living in the U.S., who is supported by the total household income reported (AK32, AK33).

The MAGI approximation informed the construction of the CHIS 2014 variable, **ELGMAGI3**, capturing uninsured individuals who are "newly eligible" for Medi-Cal under the ACA. **ELGMAGI3** also categorizes many uninsured individuals eligible for Healthy Families as *Medi-Cal eligible* due to the transition of Healthy Families enrollees into the Targeted Low Income Medicaid Program.

Detailed documentation about the MAGI variable is forthcoming. See the Analyze CHIS Data forum for more information (http://healthpolicy.ucla.edu/forum/Pages/Forum.aspx).

3) **New and Updated Survey Questions –** Most CHIS questions are included in every CHIS cycle, but some are added or removed depending on both stake-holder input on public health importance and funding availability. Noteworthy changes include:

    a. New content CHIS 2013-2014:
        i. 2014 only: Questions to determine Covered California (the state health insurance marketplace) participation and experience shopping for coverage in the individual market.
        ii. 2013-2014: Contraception use, access to general and specialty care, dental insurance, industry and occupation (forthcoming), teen and child sedentary behavior, and teen grade level and organizational involvement.

    b. Removed content: falls among older adults; moderate and vigorous activity in the past week; fruit and vegetable consumption in the past month; mammography; teen drug use/sexual behavior and STI testing; and, bullying and interpersonal violence among teens.

4) **Japanese American Oversample and Tagalog Interviewing –** A special oversample of Japanese Americans was conducted using telephone numbers associated with Japanese first and last names. These phone numbers were used to increase the yield of Californians of Japanese descent for an oversample of about 130 Japanese Americans. The *CHIS 2013-2014 Methodology Report 1 – Sample Design* includes more information about this oversample. CHIS continued to oversample Koreans and Vietnamese as well. CHIS 2013-2014 also includes interviews in Tagalog, in addition to its usual languages: English, Spanish, Chinese (Cantonese and Mandarin dialects), Korean and Vietnamese.

5) **County Oversamples –** As before, some counties funded additional interviews. In CHIS 2013-2014, approximately 1,600 additional households were sampled in San Diego County to provide sub-county estimates (as has been done since 2005). Three other counties also included supplemental oversamples (Calaveras, Siskiyou, and Tuolumne) of about 400 additional households each. An address-based sample was used in Sonoma County to complete interviews in about 500 additional households.

6) **Dual-Frame Cell Phone & Landline RDD Sample –** In CHIS 2013-2014, 7,752 adult interviews were conducted from the cell phone sample (19.3% of adult interviews). In CHIS 2011-2012, 9,151 adult interviews were conducted from the cell phone sample (21.3% of adult interviews). CHIS 2009 had 3,047 (6.4% of adult interviews) interviews conducted from the cell phone sample. Like CHIS 2011-2012, CHIS 2013-2014 used county-level goals for the cell phone RDD sample. The complete sample design is in *CHIS 2013-2014 Methodology Report 5 – Sample Design* (to be released Fall 2015). For more about cell phone sampling from the American Association for Public Opinion Research see http://www.aapor.org/Cell_Phone_Task_Force_Report.htm.