

DATA SOURCES for HEALTH ECONOMISTS

Updated: 13 November 2007

General Resources:

- William N. Evans; Helen Levy; Kosali I. Simon (2000). [Data Watch: Research Data in Health Economics](#). *The Journal of Economic Perspectives*, 14(4): 203-216.
 - Stable URL: <http://links.jstor.org/sici?sici=0895-3309%28200023%2914%3A4%3C203%3ADWRDIH%3E2.0.CO%3B2-K>
- The [National Center for Health Statistics](#) (NCHS) website has links to many useful data sets (e.g.: NAMCS, Mortality stats)
- [Health Data Tools and Statistics](#) from the Partners in Information Access for the Public Health Workforce

1. Health Components of Data Sets Traditionally Used by Economists

- **Current Population Survey**. 55k HH, Done by BLS, some working has changed over time
 1. March Supplement has public and private health insurance information. www.bls.census.gov/cps
 2. May '88 and April 93 - Employee Benefits
 3. Feb 95, 97, 99 - Contingent, Alternative employment arrangements
 4. Aug 98 - Retiree Health Insurance
 5. Sep 85 - Immunizations and Smoking
 6. Sep 89 - Veterans and Cardiovascular Disease
 7. Sep, Jan, May of 92-93, 95-96, 98-99 - Tobacco Use
- **Survey of Income and Program Participation (SIPP)**. - complex panel, 14k-36k HH, identifies state, and metro area. Questions on disability history, disability status of children, medical expenses, health status and utilization of health care services www.sipp.census.gov/sipp
- **Survey of Program Dynamics**. Especially good for welfare reform. Combo of 1992-93 SIPP, 1997 bridge survey based on March CPS, annual survey of same households in 1998-2002. ferret.bls.census.gov/cgi-bin/ferret
- **Panel Study of Income Dynamics (PSID)**. - Longitudinal Study by UMich. Sample of 5000 households in 1968 which has grown to 8500 households. The questions vary substantially year to year. Often Medicare Medicaid questions, general health status question. 1986 has significant health care info on functional limitations.

2. Longitudinal and Household Surveys of Health Status and Health Care Use

- **National Medical Expenditure Survey (NMES)**. Health Status, health care use and access: 1977, 1987 by the Agency for Healthcare Policy Research (now the Agency for Healthcare Research and Quality-AHRQ)
- **Medical Expenditure Panel Survey (MEPS)**. Similar to NMES but annual. 2 Calendar years of data are collected
- **Medicare Current Beneficiary Survey (MCBS)**. Collects data from a representative sample of the Medicare population, both aged and disabled. Began in 1991 with about 12k observations.

- **Health and Retirement Study (HRS)**, Asset and Health Dynamics of the Oldest-Old. Ongoing panels of selected cohorts 51 and older.
- **National Longitudinal Study of Adolescent Health (Add Health)** -
 - *is a nationally representative study that explores the causes of health-related behaviors of adolescents in grades 7 through 12 and their outcomes in young adulthood. Add Health seeks to examine how social contexts (families, friends, peers, schools, neighborhoods, and communities) influence adolescents' health and risk behaviors.*

Initiated in 1994 under a grant from the National Institute of Child Health and Human Development (NICHD) with co-funding from 17 other federal agencies, Add Health is the largest, most comprehensive survey of adolescents ever undertaken. Data at the individual, family, school, and community levels were collected in two waves between 1994 and 1996. In 2001 and 2002, Add Health respondents, 18 to 26 years old, were re-interviewed in a third wave to investigate the influence that adolescence has on young adulthood.

- <http://www.cpc.unc.edu/projects/addhealth>
- **National Survey of Children's Health (NSCH)**
 - <http://www.nschdata.org/>
 - *Conducted by telephone in English and Spanish during 2003-2004. The survey provides a broad range of information about children's health and well-being collected in a manner that allows for comparisons between states and at the national level. Telephone numbers are called at random to identify households with one or more children under 18 years old. In each household, one child was randomly selected to be the subject of the interview. In total, 102,353 surveys were completed nationally for children between the ages of 0-17 years*
- **Bureau of Primary Health Care Uniform Data System (BPHC UDS)**
 - <http://www.bphc.hrsa.gov/uds/>
 - A core set of information appropriate for monitoring and evaluating health center performance and reporting on trends is collected through UDS.

UDS collects basic demographic information on populations served, such as race/ethnicity and insurance status of patients. Certain data, such as birth outcomes, provide information on program effectiveness.

- The UDS is a reporting requirement for grantees of the following primary care programs administered by the BPHC, HRSA: Community Health Center, Migrant Health Center, Health Care for the Homeless, Public Housing Primary Care, and any section 330 funded Health Center

3. Surveys of Employer Provided Health Insurance

- **National Employer Health Insurance Survey.** 38k employers sampled from all states about health insurance in 1993
- **RobertWood Johnson, RAND Employer Health Survey.** 1993,1994 has 20k employers in 10 states
- **Medical Expenditure Panel Survey Insurance.** 30k employers samples, all states, annual since 1997

4. Cross Sectional Data of Health Status and Health Care Use

- **National Health Interview Survey (NHIS).** Household file of core questions for 40k HH, and no info on insurance status, access to care of health behaviors Special interest modules have varied size and scope (eg: AIDS, Insurance etc.)

- **Behavioral Risk Factor Surveillance System (BRFSS)**. by CDC, annual telephone based survey, 150k people. Surveys health status, health insurance, diabetes, tobacco use, selected cancer screening procedures and HIV/AIDS risks
- **Youth Risk Behavior Survey System**. by CDC, every other year since 1991
- **National Health and Nutrition Examination Survey**. measures nutritional status and health of US civilian pop. People provide medical histories and answer questions on their well being. 1976-80, 1988-94
- **National Ambulatory Medical Care Survey (NAMCS)**. data on use of ambulatory medical services. 1974-1981 annually, 1985-present annually. Limited demographic info (age, sex, ethnicity). Multiple observations per patient.
- **Healthcare Cost and Utilization Project**. Data on hospital discharges. 20% random sample of discharges. Data on gender age and sometimes race, diagnoses, procedures, length of stay, charges and source of payment.
- **Community Tracking Study (CTS)** - household survey, every other year. Has 'trackback' (calling insurance companies to get more detailed insured info) in 1996 and 1998. <http://www.hschange.com/index.cgi?data=01>

5. Data on Health Care Providers

- **Socioeconomic Monitoring System (SMS)**. Age medical specialty, practice income and expenses, weeks of work, fees, percent of revenue from third party payers.
- **Practice Patterns of Young Physicians (PPYP)**. Similar to SMS survey with more detail on graduate medical training, perceptions of the medical profession, career decisions, family background, etc.
- **Community Tracking Survey**. 12k practicing physicians who were asked about specialty, practice arrangements, physician time allocation, revenue, etc.

6. Vital Statistics

- **Natality and Mortality Detail**. gives characteristics of mother (age, marital status, race, edu, residency, pregnancy and birth data.) MortalityDetail has age, sex, race, edu, cause of death. Starting in 1985, some states also add industry and occupation of deceased. By the CDC.