



AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



Medical Expenditure Panel Survey (MEPS) Changes to Survey in Response to COVID-19

Anita Soni, PhD, MBA
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MEPS Survey Design and Operations Changes

- ☐ Interviewer Preparation
- ☐ Timeline of Changes
- ☐ Temporary Changes in Sample Design
- ☐ Addition of New Data Items
- ☐ Cautions for Researchers

NEW: Interviewer Preparation

- ▶ **Collect data in-person from only places at acceptable level of transmission risk, others by phone**
- ▶ **COVID-19 interviewer and respondent risk checklists**
- ▶ **PPE training (using masks, sanitizer, gloves, wipes)**
- ▶ **Social distancing and ventilated space guidelines**
- ▶ **Updated phone and data quality protocols**
- ▶ **New interviewer training on Zoom**
- ▶ **Updated policies for AF and SAQ pick-up**
- ▶ **Added show cards on participant website**

Timeline of Changes

- ▶ **No interruption in data collection throughout pandemic**
- ▶ **Spring 2020: Shift to telephone interview**
 - Inclusion of telehealth: informal prompting of telemedicine events
- ▶ **Fall 2020:**
 - COVID added to Condition Roster (3 entries)
 - COVID-19 in-person mitigation protocols
 - Generalized CAPI instrument to accommodate 9 data collection rounds
- ▶ **Spring 2021:**
 - Telehealth questions added to provider probes
 - Inclusion of Telehealth event type
 - Added items related to 'Delays in care due to COVID

Timeline of Changes

► Fall 2021:

- Added COVID-19 vaccine item
- Gradual shift to Face-to-face interviewing

► Spring 2022:

- Face-to-face interviewing – as much as possible (varied geographically dependent on COVID-19 activity)
- Added COVID-19 vaccine booster item
- Roll out of Computerized Assisted Video Interview CAVI
- MEPS data collection is now multi-mode (in-person, CAVI and phone)

► Spring 2023:

- Addition of COVID-19 questions to measure LONG COVID

Temporary Changes in Sample Design

- **Data collection from Panels 23 and 24**
 - ▶ Extended to nine rounds
 - ▶ This translates into a respondent participating in MEPS for four years
- **Panel 25 onwards**
 - ▶ Data collection went back to five rounds

Addition: COVID-19 to Condition Look-up List

- **Fall 2020 (P25R2, P24R4, P23R6)**
 - ▶ **Added 3 COVID options to condition look-up list:**
 - Covid-19/coronavirus
 - Covid-19 test neg / DK – exposure to coronavirus
 - Covid-19 test neg / DK - no known exposure to coronavirus

These options will remain on the condition look-up list in future.
- **Spring 2021 (P26R1, P25R3, P24R5, P23R7)**
 - ▶ **Added Telehealth event type**

The telehealth event type will be an ongoing event type

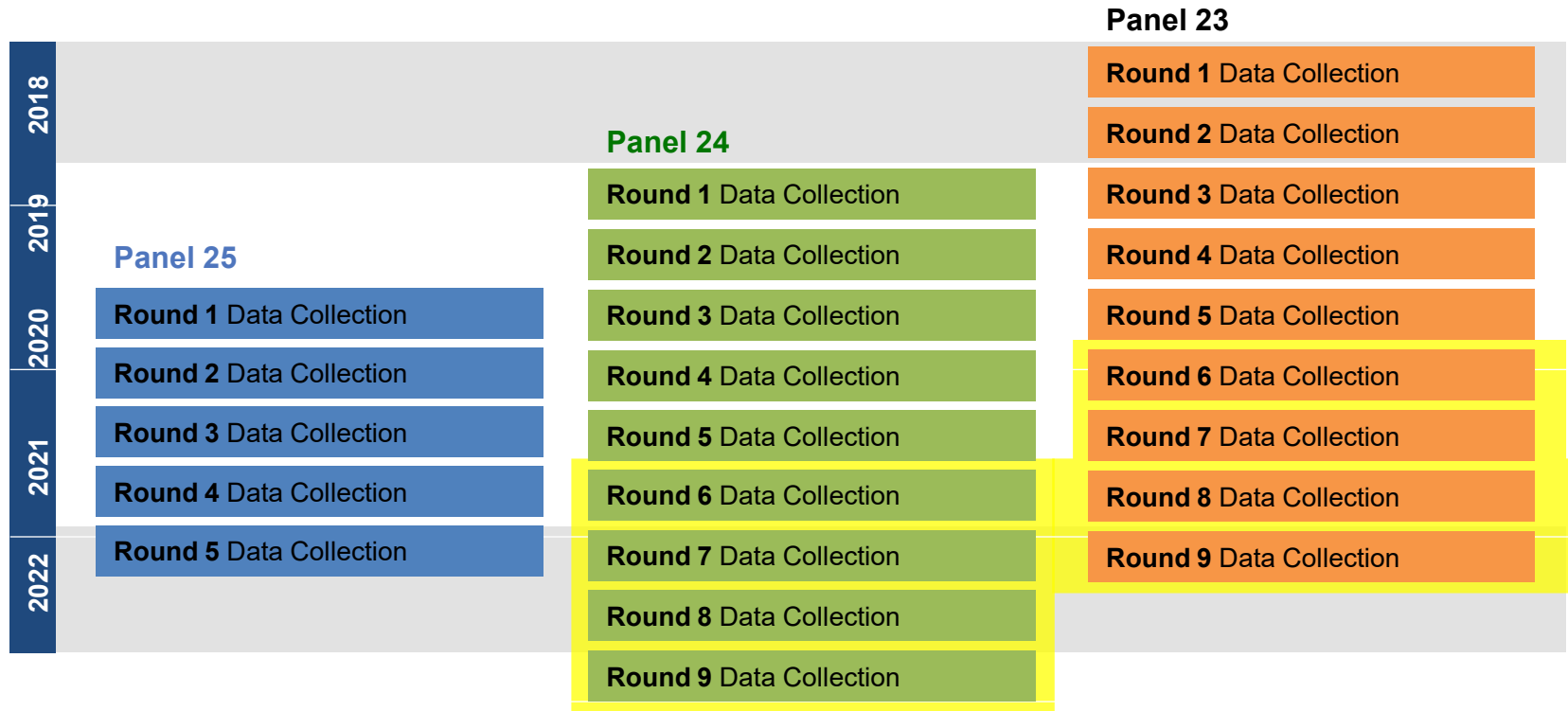
Addition: Delays in Care due to COVID-19

- **Spring 2021 (P26R1, P25R3, P24R5, P23R7)**
 - ▶ **A series of items asking whether the person had to delay care due to COVID. Questions asked about medical care, dental care and prescription medicines.**
 - ▶ **These items are part of a separate section called (COVID Delays in Care).**
 - ▶ **This was asked in MEPS only during the following interviewing cycles: Spring and Fall 2021 and Spring 2022 (except for Round 1).**
 - ▶ **The series was discontinued for all rounds beginning in Fall 2022 (P27R2, P26R4, P24R8).**

Addition: COVID-19 Vaccine and Boosters

- **Fall 2021 (P26R2, P25R4, P24R6, P23R8)**
 - ▶ A COVID-19 vaccine question was added.
- **Spring 2022 (P27R1, P26R3, P25R5, P24R7, P23R9)**
 - ▶ A booster item was added for those RU members that reported in the current round or a previous round that they received the vaccine.
- **Spring 2023 (P28R1, P27R3, P26R5)**
 - ▶ Booster item removed
 - ▶ The Vaccine question will change to always asking if the person had a vaccine during the reference period.

FY 2020: An Illustration of Changes in Panel Design



Cautions for Using MEPS 2020 Data File



- Due to the impact of the COVID-19 pandemic on MEPS collection methods, the following needs to be kept in mind while using 2020 data files:
 - ▶ 2020 MEPS includes three panels of data, Panel 25 Rounds 1, 2, and 3, Panel 24 Rounds 3, 4, and 5, and Panel 23 Rounds 5, 6, and 7.
 - ▶ The overall response rate of 27.6 percent for 2020 is substantially lower than that for 2019 (39.5 percent).
 - ▶ 2020 data was collected predominantly by phone.
 - ▶ Adjustments were made to the weighting process to accommodate use of 3 panels.
 - ▶ TELEMEDICINE is not Home health. The event type matches the type of provider seen.
- Please read the Documentation carefully before starting your analysis using MEPS 2020 data files.

Thank you!



Anita.Soni@ahrq.hhs.gov