Summary of Current Surveys and Data Collection Systems
National Center for Health Statistics, 2016

Name		Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
Population Surveys						
National Health Interview Survey	-Personal interviews	-Health status and limitations -Utilization of health care -Health insurance -Access to care -Selected health conditions -Poisonings and injuries -Health behaviors -Functioning/disability -Immunizations	-40,000 households per year -Address-based sample design. Sample adults are oversampled if 65+ and black, Hispanic, or Asian	-OMB categories ** -Detailed Hispanic groups -Detailed API groups -Family and individual income, poverty level -Type of living quarters -Acculturation questions/language used during interview -Education and occupation -Birthplace -Citizenship status	-Annual	-Continue annual survey -Provide sampling frame-Medical Expenditure Panel Survey -2016 Diabetes, Vision, Balance, Blood donation, Chronic pain -2016 Implement a redesigned address-based sample Planned Supplements: Ongoing - Functioning and disability, Child Mental Health, Enhanced access to care and utilization questions, Immunizations, Non-smoked tobacco products, E-cigarettes, ABCs of heart disease/stroke, Crohn's disease/Colitis, Family food security, Hepatitis B/C screening
National Health Interview Survey-Native Hawaiian and Pacific Islander Survey	-Personal interviews	-Health status and limitations -Utilization of health care -Health insurance -Access to care -Selected health conditions -Poisonings and injuries -Health behaviors -Functioning/disability -Immunizations	-4,000 households -Sample addresses have been selected from completed 2012 American Community Survey interviews with households that included at least one person identifying as NHPI. Must confirm one household member identifies as NHPI to screen in	-OMB categories ** -Detailed Hispanic groups -Detailed API groups -Family and individual income, poverty level -Type of living quarters -Acculturation questions/language used during interview -Education and occupation -Birthplace -Citizenship status	-One-time data collection in 2014	-Release public use data file in fall 2016
National Health Interview Survey-National Health Care Coverage Survey	-Telephone	Abbreviated version of NHIS to focus on Affordable Care Act: -Health Insurance -Access to care and utilization	-12,000 respondents -Follow-back survey of a nationally representative sample of U.S. population	-OMB categories ** -Detailed Hispanic groups -Detailed API groups -Family and individual income, poverty level -Type of living quarters -Acculturation questions/language used during interview -Education and occupation -Birthplace -Citizenship status	-One-time	-Data collected September 2015–April 2016 -Release public use data file in 2017
National Health and Nutrition Examination Survey	-Personal interviews -Physical examinations -Laboratory tests -Nutritional assessment -DNA repository -Bio-specimen repository	-Selected diseases and conditions including those undiagnosed or undetected -Nutrition monitoring -Environmental exposures monitoring -Children's growth & development -Infectious disease monitoring -Overweight and diabetes -Hypertension and cholesterol -Health behaviors -Oral Health -Prescription drug use -Dietary supplement use	-5,000 persons per year, all ages -Oversample 60+ -Oversample blacks, Asians and Hispanics	-OMB categories** -Data for black, white, other, Asian, and Hispanic-Income and poverty index -Education -Occupation -Type of living quarters -Social services -Birthplace -Acculturation questions re: language usually spoken at home	-Continuous since 1999, 2-year survey cycles, with capability for longitudinal follow-up	-Data collection for annual sample -Data releases on two-year cycles -Longitudinal follow-up feasibility study -Implement real-time survey design

Name	Data Source/Methods	Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
National Survey of Family Growth	-Personal interviews -Men and women 15–44 years of age through September 2015 -Men and women 15–49 years of age starting September 2015	-Contraception and sterilization -Teenage sexual activity and pregnancy -Family planning/unintended pregnancy -Infertility, adoption, breastfeeding -Marriage, divorce, and cohabitation -Fatherhood involvement -HIV risk behavior	-5,000 men and women, 15–44 years of age per year -Oversample blacks, Hispanics and teens	-OMB categories** -Four specific Hispanic groups -Family and individual income -Sources of income -Education -Primary language information collected starting fall 2011	-Continuous	-Data collection for 2015–2017 ongoing -Data set from 2-year 2013–2015 continuous interviewing to be released in fall of 2020

Vital Records

Name	Data Source/Methods	Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
National Vital Statistics System	-State vital registration -Births -Deaths -Fetal deaths -Linked Birth/Infant Death Program	-Birth and death rates -Birthweight -Teen and non-marital births -Pregnancy outcomes -Method of delivery -Preterm delivery -Multiple births -Medicaid payment -Breastfeeding -Maternal weight -Infant mortality -Life expectancy -Causes of death -Occupational mortality	**All Births**: (about 4 million records annually) **All Deaths**: (about 2.6 million records annually) -Reported fetal deaths of 20+ weeks gestation (about 26,000 annually) -Counts of marriages and divorces	For births, deaths, and fetal deaths: -OMB race categories (additional detail varies by state) and five Hispanic groups (additional detail varies by state). Multiple race information available for selected states. -Education Births and deaths: -OMB categories (10 specific API groups from 11 states) -Marital status -Primary language information not collected	-Annual	-Continue monthly, annual data system -Assist states in automating and/or re-engineering their IT systems to enhance timeliness/quality of reporting -Complete implementation of 2003 revised certificates re-engineering process -Evaluate quality of new data items added in 2003 -Develop and implement e-learning training for birth certificates -Release national data on fetal cause of death -Implement new data access methods and reports -Develop mortality surveillance system -Improve timeliness of vital statistics reports and data files -Re-engineer or replace the medical coding system
National Death Index	-State registration areas- death certificates	-Facilitates epidemiological follow-up studies from 1979–2013 -Verification of death for study participants for health/medical research purposes only -Optional release of coded causes of death available to users upon request -NCHS surveys can be linked to NDI	-All deaths	-State provided race/ethnicity categories consistent with OMB categories -Marital status -State/territory of birth	-Annual	-Continue ongoing operations -Continue to improve timeliness of data availability for matching -Update NDI website -Expand outreach to health/medical research community

Provider Surveys

Name	Data Source/Methods	Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
National Ambulatory Medical Care Survey	-Review medical records for patient visit information -Interview physicians and community health center providers	-Physician/CHC provider practice characteristics including: specialty, ownership, tests performed, and revenue -Experiences with prevention and treatment of sexually transmitted infections and HIV prevention -Use of electronic medical records -Administration of alcohol screening and brief interventions -Patient visit information including: demographics, vital signs, reason for visit, injury, continuity of care, diagnosis, chronic conditions, medical services, medications, and various laboratory test results	-80,820 patient visits -3,700 physicians in office-based practices -312 community health center providers	-OMB categories**	-Annual	-Continue annual survey -Expand sample size dependent upon receipt of additional funds

Name	Data Source/Methods	Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
National Electronic Health Records Survey (formerly National Ambulatory Medical Care Survey - Electronic Health Records**)**	-Mail survey of office-based physicians	-Provider characteristics -Use of electronic medical records/features -Specialty, practice size, ownership -Physician attitudes about electronic health records, barriers, benefits and impact	-10,302 physicians in office-based practices in 50 states and DC	-None collected	-Annual	**-**Continue annual survey
National Ambulatory Medical Care Survey Supplement of Primary Care Policies for Managing Patients with High Blood Pressure, High Cholesterol, or Diabetes	-Mail survey of primary care physicians: Internal Medicine, General Practice, Family Practice -Telephone screening and telephone follow-up of non-respondents	-Physician characteristics -Clinical decision supports and protocols when treating patients for high blood pressure, high cholesterol or diabetes -Clinical guidelines used -Patient registry systems -Electronic functions -Methods for patient follow-up -Patient education and self-management	-2,000 physicians	-None collected	-One-time	-Data collection 2016
National Ambulatory Medical Care Survey Supplement on Culturally and Linguistically Appropriate Services	- Mail, web, telephone follow-up survey of office-based physicians	-Physician characteristics -Patient racial and ethnic demographics -Training in cultural competency -Provision of culturally and linguistically appropriate services -Physician perspective on factors that aid or impede provision of services -Awareness of the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care	-2,400 physicians in office-based practices in 50 states and DC	-OMB categories** for physicians (patient race & ethnicity combined) -Number of languages physician is fluent -Number of languages physician is comfortable providing health care -If practice records patient cultural or language characteristics (nationality, natality, patient's primary language, income, religion)	-One-time	-Data collection 2016
National Hospital Ambulatory Medical Care Survey	-Review medical records on patient visit -Interview hospital administrators	-Patient demographics/characteristics Length of stay in ED -Diagnoses, procedures and treatment -Facility characteristics -Visit volumes -Use of electronic medical records and features	-65,000 patient visits -458 hospitals with EDs, outpatient departments, or ambulatory surgery locations	-OMB categories**	-Annual	-Continue annual survey
National Hospital Care Survey (replaced the National Hospital Discharge Survey, last conducted in 2010)	-Hospital billing (UB-04) records, electronic health records, and electronic health records (EHR)	-Utilization of hospital care, inpatient care, and care delivered in EDs, OPDs, hospital-based and/or free standing ambulatory surgery locations	-581 hospitals	-OMB categories** for EHR data collection using the Implementation Guide	-Annual	-Continue recruitment of hospitals and collection of data in hospitals currently recruited -Linkage to NDI and CMS data

Name	Data Source/Methods	Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
National Study of Long-Term Care Providers (replaced the National Nursing Home Survey, National Home and Hospice Care Survey, and National Survey of Residential Care Facilities)	-Mail/web/telephone survey of directors of adult day care services centers and residential care communities -CMS administrative data (claims and assessment) -Administrative data from the CMS on nursing homes and residents, home health agencies and patients, and hospices and patients	-Provider characteristics, services, practices (EHRs), and staffing -Aggregated provider-level information on residents/participants/patients including demographics, Medicaid use, selected diagnoses, cognitive impairment, health status, physical functioning, falls, hospital and ED use, and advance care planning -Rotating topic modules -State-level estimates where feasible	-11,600 residential care communities -5,000 adult day services centers	-OMB categories**	-Biennial starting in 2012 -Alternate fielding larger state sample with smaller national sample/person level biennial in 2018	-Release 2013–2014 reports in 2016 -Conduct 3rd survey wave data collection May–November 2016 -Plan 2018 survey

Telephone Surveys

Name	Data Source/Methods	Selected Data Items	Targeted Sample Size	Disparity Variables	Frequency	FY 2016–2017 Plans
State and Local Area Integrated Telephone Survey -National Survey of Children in Non-Parental Care, 2013 (NSCNC) -National Survey of the Diagnosis and Treatment of ADHD and Tourette Syndrome, 2014 (NS-DATA)	-Landline/cell telephone interviews -Follow-back surveys to 2011–2012 National Survey of Children's Health which used the sampling frame from the NIS	-Demographic characteristics -Children in non-parental care -Diagnosis and treatment -Attention Deficit Hyperactivity Disorder (ADHD) -Tourette Syndrome -Health care access and use -Functioning -Unmet needs for care and services -Health insurance -Living situations -Types of services and supports needed and used -Child health & well-being -Caregiver health & well-being -Family dynamics	-NSCNC - 1,600 children -NS-DATA – 3,700 children	-OMB categories** -Income and poverty levels -Education -Insurance coverage -Primary language	-One-time	-Data file and report release in 2015

** OMB categories include white, black or African-American, Asian, Native Hawaiian and other Pacific Islanders, American Indian or Alaska Native. Hispanic origin is asked as a separate question