

## **Appendix: Methods and Limitations**

### **The Colorado Eligibility Atlas: Mapping the State's Uninsured**

May 2014

This document describes the methods used by the Colorado Health Institute to develop estimates of health insurance coverage of Colorado's children and working age adults.

#### **UNINSURED ESTIMATES**

**Primary Data Source:** The U.S. Census Bureau's 2012 American Community Survey (ACS), an annual stratified random sample survey of approximately 51,000 individuals from 23,000 Colorado households. The data have been weighted to represent the state population as well as geographic sub-regions within Colorado. A method developed by the University of Missouri yielded county-level estimates. The estimates do not exclude uninsured adults who may be eligible for Medicaid due to a disability.

**Definitions:** An adult is between the ages of 19 and 64 and is counted as uninsured if he or she reported no health insurance when the ACS questionnaire was administered. A child is below 19 years old and was counted as uninsured if his or her parent reported that the child did not have health insurance when the ACS questionnaire was administered.

#### **INCOME AND POVERTY STATUS**

**Definitions:** Limited to Coloradans for whom ACS income data were collected. Income and poverty data are not available for foster children and people living in prisons, nursing homes, mental hospitals, college dormitories or military quarters.

The Affordable Care Act (ACA) establishes a new approach to calculating eligibility for public insurance programs – Modified Adjusted Gross Income (MAGI). The new Colorado MAGI eligibility standards used for this analysis are:

- Children in Medicaid: 147 percent FPL
- Children in CHP+: 265 percent FPL
- Adults in Medicaid: 138 percent FPL.

#### **PARENTAL STATUS**

**Data Source:** Relationship variables in the ACS data file to identify parents (ages 19-64) of dependent children (under the age of 19). The Colorado Health Institute updated the analysis in 2011 to designate other relatives, such as a grandparent, as "parents" if no parent was present in the household.



### **MEDICAID AND CHILD HEALTH PLAN PLUS (CHP+) ENROLLMENT**

**Data Source:** The Colorado Department of Health Care Policy and Financing (HCPF) provided average monthly enrollment figures, both by county and statewide, for the period between January and December 2012. Enrollment data were unavailable for a few small counties, so the sum of the counties does not equal the state enrollment totals. The reported enrollment in the CHP+ program includes only children and does not include enrollees in the CHP+ at Work premium assistance program.

### **CITIZENSHIP AND DOCUMENTATION STATUS**

**Data Source:** The ACS contains variables on citizenship but not on documentation status. The Colorado Health Institute in 2011 updated its assumptions for estimating undocumented immigrants based on Pew Hispanic Center research. Pew estimated approximately 180,000 undocumented people in Colorado in 2010.<sup>2</sup> The Colorado Health Institute estimates that 148,587 undocumented people resided in Colorado in 2012, of which 19,316 were children. From the remaining individuals who were not U.S. citizens but had legal documentation to reside in the United States, any individual residing in the U.S. for fewer than five years was removed from the analysis per eligibility guidelines for Medicaid.

### **SMALL SAMPLE SIZES**

Many counties had a small number of observations on which to calculate an estimate. The Colorado Health Institute encourages prudent use of the estimates.

### **REASONS FOR BEING UNINSURED**

**Data Source:** The Colorado Health Institute used data from the 2013 Colorado Health Access Survey (CHAS) to describe reasons for being uninsured among Coloradans lacking coverage. The 2013 CHAS was a telephone survey of 10,224 randomly selected households in Colorado. It was administered between April 15 and July 27. Survey data were weighted to accurately reflect the demographics and distribution of the state's population amongst the 21 health statistics regions (HSRs). Most of the urban counties are their own HSR, therefore the county estimates reflects the HSR estimates from the CHAS. For counties that are aggregated with other counties within an HSR (such as the rural areas of the state), each county within an HSR was given the HSR value. For instance, HSR 1 is made up of Logan, Morgan, Phillips, Sedgwick, Washington and Yuma counties. In HSR 1, 18.9 percent of the uninsured reported that they were uninsured because they did not know how to get health insurance. This 18.9 percent was the value given to Logan, Morgan, Phillips, Sedgwick, Washington and Yuma counties.





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**FOR MORE INFORMATION**

The Colorado Health Institute welcomes the opportunity to discuss questions or to provide additional information about the methods, data sources or assumptions. Please contact Jeff Bontrager, Director of Research on Coverage and Access, at [bontragerj@coloradohealthinstitute.org](mailto:bontragerj@coloradohealthinstitute.org)