

NCHS Response to Health Policy Data Requests 2017

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National Health Interview Survey

Long-term Trends in Health Insurance Coverage

Table 1. Percentages (and standard errors) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968-2015

Year	Sample size	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
1968	120,670	79.3 (0.39)	---	---	---	---	---	---
1970	44,373	78.7 (0.53)	68.6 (0.60)	10.0 (0.37)	---	---	---	---
1972	119,939	77.3 (0.39)	69.4 (0.43)	7.8 (0.18)	3.5 (0.14)	---	2.6 (0.18)	16.7 (0.32)
1974	104,727	79.7 (0.31)	70.5 (0.35)	9.6 (0.18)	4.7 (0.16)	---	2.5 (0.20)	13.1 (0.24)
1976	101,594	78.9 (0.31)	68.5 (0.32)	10.3 (0.19)	4.9 (0.16)	0.2 (0.02)	2.6 (0.19)	14.1 (0.24)
1978	98,465	79.3 (0.34)	70.2 (0.35)	9.2 (0.19)	6.7 (0.19)	1.2 (0.04)	2.3 (0.16)	12.0 (0.22)
1980	91,425	79.4 (0.38)	71.4 (0.40)	8.0 (0.20)	7.1 (0.19)	1.4 (0.05)	2.0 (0.16)	12.0 (0.26)
1982	92,489	78.1 (0.53)	70.3 (0.55)	7.9 (0.21)	6.1 (0.29)	1.2 (0.04)	3.7 (0.21)	13.9 (0.36)
1984	46,729	76.9 (0.64)	68.4 (0.67)	8.7 (0.27)	6.8 (0.34)	1.1 (0.06)	3.6 (0.26)	14.6 (0.46)
1986	93,396	76.7 (0.62)	69.1 (0.62)	7.7 (0.21)	6.8 (0.33)	1.2 (0.04)	3.7 (0.23)	14.5 (0.39)
1989	54,860	76.8 (0.71)	69.3 (0.76)	7.6 (0.33)	6.4 (0.35)	1.2 (0.05)	3.3 (0.29)	15.0 (0.43)
1990	102,684	75.9 (0.51)	68.3 (0.51)	7.6 (0.19)	7.2 (0.26)	1.4 (0.05)	2.9 (0.24)	15.6 (0.35)
1991	105,053	74.2 (0.43)	66.4 (0.47)	7.8 (0.28)	7.1 (0.21)	1.3 (0.04)	3.0 (0.25)	17.2 (0.30)
1992	105,316	73.6 (0.48)	62.8 (0.52)	10.8 (0.31)	8.5 (0.27)	1.4 (0.06)	2.9 (0.25)	16.4 (0.29)
1993	113,042	72.0 (0.46)	64.9 (0.45)	7.1 (0.18)	9.8 (0.29)	1.4 (0.05)	2.9 (0.25)	16.8 (0.28)
1994	101,608	69.9 (0.50)	64.0 (0.48)	5.9 (0.17)	11.2 (0.34)	1.4 (0.05)	2.8 (0.23)	17.8 (0.32)
1995	90,512	71.3 (0.42)	65.6 (0.43)	5.7 (0.16)	11.5 (0.27)	1.6 (0.06)	2.6 (0.17)	16.3 (0.25)
1996	56,268	71.2 (0.55)	65.1 (0.57)	6.1 (0.22)	11.1 (0.33)	1.6 (0.07)	2.6 (0.19)	16.7 (0.36)
1997	91,275	70.7 (0.36)	66.4 (0.36)	4.2 (0.13)	9.7 (0.23)	1.6 (0.05)	2.7 (0.13)	17.5 (0.24)
1998	87,020	72.1 (0.36)	67.5 (0.37)	4.6 (0.14)	8.9 (0.22)	1.7 (0.06)	2.7 (0.15)	16.6 (0.25)
1999	85,732	72.8 (0.36)	68.3 (0.37)	4.4 (0.14)	9.1 (0.21)	1.7 (0.06)	2.2 (0.12)	16.1 (0.25)
2000	89,149	71.7 (0.35)	67.3 (0.37)	4.2 (0.14)	9.5 (0.22)	1.7 (0.06)	2.2 (0.13)	16.8 (0.25)
2001	89,478	71.5 (0.37)	67.2 (0.35)	4.1 (0.12)	10.4 (0.21)	1.8 (0.06)	2.1 (0.12)	16.1 (0.25)
2002	82,533	69.7 (0.37)	65.6 (0.37)	3.9 (0.13)	11.8 (0.23)	1.7 (0.06)	2.3 (0.14)	16.5 (0.24)

See footnotes at end of table

Table 1. Percentages (and standard errors) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968-2015—continued

Year	Sample size	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
2003	81,596	68.9 (0.40)	64.4 (0.41)	4.0 (0.15)	12.3 (0.25)	1.8 (0.06)	2.4 (0.17)	16.5 (0.26)
2004	83,357	68.8 (0.39)	64.0 (0.39)	4.6 (0.14)	12.5 (0.24)	1.8 (0.06)	2.4 (0.12)	16.4 (0.23)
2005	87,077	68.2 (0.40)	63.6 (0.40)	4.4 (0.14)	12.9 (0.25)	1.8 (0.06)	2.5 (0.13)	16.4 (0.24)
2006	67,066	66.3 (0.48)	61.5 (0.48)	4.6 (0.17)	14.0 (0.32)	2.1 (0.08)	2.5 (0.14)	17.0 (0.29)
2007	67,065	66.8 (0.45)	61.6 (0.46)	4.9 (0.17)	13.9 (0.30)	2.1 (0.08)	2.7 (0.17)	16.6 (0.29)
2008	65,495	65.6 (0.46)	60.5 (0.46)	4.8 (0.19)	14.7 (0.32)	2.3 (0.08)	2.7 (0.16)	16.8 (0.29)
2009	78,011	63.3 (0.49)	58.0 (0.48)	5.0 (0.17)	16.1 (0.33)	2.3 (0.08)	2.9 (0.18)	17.5 (0.28)
2010	79,336	61.7 (0.47)	56.6 (0.45)	4.8 (0.15)	16.9 (0.29)	2.3 (0.07)	3.1 (0.15)	18.2 (0.29)
2011	89,060	61.8 (0.45)	56.4 (0.44)	4.8 (0.15)	17.8 (0.31)	2.4 (0.07)	3.0 (0.11)	17.2 (0.24)
2012	94,247	61.8 (0.41)	56.9 (0.42)	4.4 (0.14)	18.0 (0.28)	2.4 (0.07)	3.0 (0.14)	16.9 (0.24)
2013	104,204	61.8 (0.42)	56.6 (0.42)	4.7 (0.15)	18.1 (0.28)	2.6 (0.07)	3.0 (0.13)	16.7 (0.25)
2014	116,682	63.7 (0.41)	56.4 (0.42)	6.4 (0.17)	19.6 (0.30)	2.5 (0.08)	3.1 (0.17)	13.3 (0.22)
2015	103,520	65.5 (0.42)	57.4 (0.43)	7.7 (0.18)	20.6 (0.35)	2.6 (0.08)	3.0 (0.16)	10.6 (0.19)

--- Data not available.

¹Includes persons covered by private coverage obtained through an employer, purchased directly, or obtained through any other means. Beginning in 2014, private coverage also includes plans purchased through the Health Insurance Marketplace or a state-based exchange. Excludes plans that paid for only one type of service such as accidents or dental care.

²The category "Private coverage (employer)" is private insurance originally obtained through a present or former employer or union; this also includes private insurance obtained through the workplace, self-employment, or a professional association.

³The category "Private coverage (other)" includes persons who are covered by private insurance that is directly purchased as well as plans obtained through school or other means. Beginning in 2014, this category also includes plans purchased through the Health Insurance Marketplace or a state-based exchange.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare (1976+), Medicaid, State Children's Health Insurance Program (SCHIP) (1999+), state-sponsored (1982-1989, 1992+) or other government-sponsored health plan (1997+), or military-related coverage. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service such as accidents or dental care.

NOTES: Percentages do not add to 100 because a small percentage of persons reported more than one type of coverage. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population. In this table, unknown values (responses coded as "refused," "not ascertained," or "don't know") were not counted in the denominators when calculating estimates. For private health insurance coverage, this may result in the percentage with "private coverage (employer)" and the percentage with "private coverage (other)" not adding up to the percentage with "private coverage (any)." For a full description of the methodology used for these tables, see the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" (<http://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>).

SOURCE: NCHS, National Health Interview Survey, health insurance supplements (prior to 1997) and family core questionnaire (starting with 1997).

ACKNOWLEDGEMENTS: This table is an update of Table 1 from the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" which was released in July 2009 (<http://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>). This table was produced by Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics, Centers for Disease Control and Prevention.

Suggested citation

Cohen RA. Long-term trends in health insurance: Estimates from the National Health Interview Survey, United States, 1968–2015. National Center for Health Statistics. February 2017. Available from: https://www.cdc.gov/nchs/health_policy/coverage_and_access.htm.

Table 2. Number (in millions) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968-2015

Year	Population under age 65	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
1968	177.1	140.5	---	---	---	---	---	---
1970	180.9	142.3	124.1	18.0	---	---	---	---
1972	184.2	142.3	127.9	14.4	6.5	---	4.7	30.7
1974	186.6	148.7	131.5	17.9	8.7	---	4.6	24.4
1976	188.8	148.9	129.4	19.5	9.3	0.5	4.9	26.6
1978	191.0	151.6	134.0	17.5	12.8	2.4	4.3	23.0
1980	194.0	154.1	138.5	15.6	13.8	2.7	3.9	23.3
1982	201.7	157.5	141.8	16.0	12.2	2.5	7.5	28.0
1984	203.8	156.7	139.4	17.7	13.9	2.3	7.3	29.7
1986	205.2	157.5	141.7	15.7	13.9	2.4	7.6	29.8
1989	208.8	160.4	144.6	15.8	13.4	2.5	6.9	31.3
1990	214.3	162.7	146.3	16.3	15.4	3.0	6.1	33.4
1991	216.3	160.5	143.7	16.8	15.4	2.8	6.5	37.2
1992	218.4	160.8	137.1	23.7	18.6	3.0	6.4	35.8
1993	220.7	158.9	143.2	15.8	21.6	3.2	6.4	37.1
1994	223.6	158.8	145.9	12.9	23.9	3.0	6.1	38.8
1995	228.6	159.8	146.2	13.5	25.6	3.1	6.4	40.6
1996	230.4	164.4	151.3	13.1	26.6	3.7	5.9	37.7
1997	232.5	165.5	151.4	14.2	25.8	3.7	6.0	38.9
1998	234.6	165.8	155.9	9.8	22.9	3.8	6.4	41.0
1999	236.8	170.8	159.8	10.8	21.1	4.1	6.3	39.2
2000	239.2	174.2	163.4	10.5	21.9	4.1	5.2	38.5
2001	241.3	173.0	162.5	10.1	22.9	4.0	5.4	40.5
2002	243.6	174.1	163.8	10.0	25.2	4.3	5.1	39.2

See footnotes at end of table

Table 2. Number (in millions) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968–2015—continued

Year	Population under age 65	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
2003	251.8	173.6	162.1	10.1	30.9	4.5	6.1	41.6
2004	253.7	174.5	162.3	11.6	31.6	4.5	6.1	41.6
2005	256.1	174.7	162.9	11.1	33.2	4.5	6.4	42.1
2006	258.2	171.2	158.8	11.8	36.2	5.4	6.5	43.9
2007	260.7	174.1	160.7	12.7	36.2	5.4	7.0	43.3
2008	262.0	171.9	158.6	12.6	38.4	5.9	7.0	44.1
2009	263.4	166.7	152.8	13.1	42.4	6.2	7.7	46.2
2010	265.4	163.9	150.2	12.7	44.8	6.0	8.1	48.3
2011	266.2	164.5	150.1	12.7	47.4	6.4	7.9	45.8
2012	266.7	164.9	151.8	11.8	48.1	6.5	8.1	45.2
2013	267.5	165.3	151.5	12.5	48.5	7.1	8.1	44.6
2014	268.2	170.7	151.3	17.2	52.6	6.7	8.4	35.7
2015	269.4	176.6	154.7	20.8	55.4	7.0	8.1	28.7

--- Data not available.

¹Includes persons covered by private coverage obtained through an employer, purchased directly, or obtained through any other means. Beginning in 2014, private coverage also includes plans purchased through the Health Insurance Marketplace or a state-based exchange. Excludes plans that paid for only one type of service such as accidents or dental care.

²The category "Private coverage (employer)" is private insurance originally obtained through a present or former employer or union; this also includes private insurance obtained through the workplace, self-employment, or a professional association.

³The category "Private coverage (other)" includes persons who are covered by private insurance that is directly purchased as well as plans obtained through school or other means. Beginning in 2014, this category also includes plans purchased through the Health Insurance Marketplace or a state-based exchange.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare (1976+), Medicaid, State Children's Health Insurance Program (SCHIP) (1999+), state-sponsored (1982–1989, 1992+) or other government-sponsored health plan (1997+), or military-related coverage. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service such as accidents or dental care.

NOTES: A person may have more than one type of coverage, therefore, individual coverage types may not add up to the population total. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population. In this table, unknown values (responses coded as "refused," "not ascertained," or "don't know") were not counted in the denominators when calculating estimates. For private health insurance, coverage this may result in the number with "private coverage (employer)" and the number with "private coverage (other)" not adding up to the number with "private coverage (any)." For a full description of the methodology used for these tables, see the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" (<http://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>).

SOURCE: NCHS, National Health Interview Survey, health insurance supplements (prior to 1997) and family core questionnaire (starting with 1997).

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Suggested citation

Cohen RA. Long-term trends in health insurance: Estimates from the National Health Interview Survey, United States, 1968–2015. National Center for Health Statistics. February 2017. Available from: https://www.cdc.gov/nchs/health_policy/coverage_and_access.htm.



Table 1. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–September 2016

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	18.2 (0.30)	61.2 (0.50)	...	22.0 (0.38)
Quarter 1	17.5 (0.53)	62.6 (0.99)	...	21.2 (0.71)
Quarter 2	19.2 (0.74)	60.9 (0.92)	...	21.2 (0.58)
Quarter 3	18.8 (0.50)	60.6 (0.83)	...	22.0 (0.64)
Quarter 4	17.2 (0.49)	60.6 (0.89)	...	23.5 (0.68)
2011 full year	17.3 (0.29)	61.2 (0.51)	...	23.0 (0.37)
Quarter 1	17.4 (0.49)	61.3 (0.89)	...	22.7 (0.67)
Quarter 2	17.4 (0.48)	61.4 (0.83)	...	22.5 (0.59)
Quarter 3	17.3 (0.54)	60.8 (0.95)	...	23.3 (0.68)
Quarter 4	16.9 (0.51)	61.1 (0.86)	...	23.3 (0.63)
2012 full year	16.9 (0.27)	61.0 (0.47)	...	23.5 (0.37)
Quarter 1	17.6 (0.56)	60.2 (0.93)	...	23.5 (0.64)
Quarter 2	16.0 (0.48)	63.0 (0.90)	...	22.6 (0.68)
Quarter 3	17.0 (0.50)	60.3 (0.84)	...	24.2 (0.67)
Quarter 4	17.2 (0.47)	60.3 (0.80)	...	23.8 (0.59)
2013 full year	16.6 (0.30)	61.0 (0.52)	...	23.8 (0.35)
Quarter 1	17.1 (0.54)	60.3 (0.91)	...	23.9 (0.65)
Quarter 2	16.4 (0.49)	62.1 (0.82)	...	22.9 (0.59)
Quarter 3	16.5 (0.48)	61.2 (0.85)	...	23.7 (0.61)
Quarter 4	16.2 (0.53)	60.5 (0.93)	...	24.5 (0.68)
2014 full year	13.3 (0.26)	63.6 (0.46)	2.2 (0.10)	24.5 (0.36)
Quarter 1	15.2 (0.47)	61.8 (0.85)	1.4 (0.11)	24.2 (0.68)
Quarter 2	12.9 (0.50)	63.8 (0.81)	2.4 (0.17)	24.7 (0.61)
Quarter 3	13.2 (0.44)	64.0 (0.85)	2.5 (0.20)	24.0 (0.62)
Quarter 4	12.1 (0.42)	64.4 (0.90)	2.5 (0.18)	25.0 (0.74)
2015 full year	10.5 (0.22)	65.6 (0.50)	3.8 (0.14)	25.3 (0.43)
Quarter 1	10.7 (0.40)	66.5 (0.88)	3.6 (0.22)	24.2 (0.74)
Quarter 2	10.3 (0.36)	66.7 (0.81)	4.0 (0.24)	24.6 (0.71)
Quarter 3	10.8 (0.43)	64.5 (0.93)	4.2 (0.29)	26.1 (0.77)
Quarter 4	10.3 (0.41)	64.7 (0.95)	3.4 (0.24)	26.3 (0.81)
2016 (Jan–Sep)	10.3 (0.32)	64.8 (0.56)	4.1 (0.16)	26.6 (0.46)
Quarter 1	10.0 (0.39)	66.0 (0.80)	4.0 (0.23)	25.7 (0.64)
Quarter 2	10.8 (0.46)	63.9 (0.79)	4.1 (0.26)	26.8 (0.75)
Quarter 3	10.1 (0.44)	64.4 (0.77)	4.1 (0.29)	27.4 (0.71)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–September 2016

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
0-17 years				
2010 full year	7.8 (0.32)	53.8 (0.75)	...	39.8 (0.73)
Quarter 1	7.4 (0.51)	55.4 (1.47)	...	38.5 (1.41)
Quarter 2	9.1 (0.79)	53.0 (1.30)	...	39.3 (1.19)
Quarter 3	8.2 (0.56)	53.7 (1.35)	...	39.7 (1.31)
Quarter 4	6.5 (0.46)	53.0 (1.35)	...	41.6 (1.30)
2011 full year	7.0 (0.27)	53.3 (0.76)	...	41.0 (0.74)
Quarter 1	6.9 (0.50)	54.4 (1.40)	...	40.3 (1.35)
Quarter 2	7.7 (0.48)	53.7 (1.23)	...	40.1 (1.21)
Quarter 3	7.1 (0.53)	52.3 (1.46)	...	42.1 (1.38)
Quarter 4	6.5 (0.45)	53.0 (1.33)	...	41.5 (1.29)
2012 full year	6.6 (0.27)	52.8 (0.73)	...	42.1 (0.72)
Quarter 1	6.7 (0.55)	51.6 (1.35)	...	43.0 (1.24)
Quarter 2	6.4 (0.57)	55.3 (1.34)	...	39.9 (1.38)
Quarter 3	6.8 (0.50)	52.0 (1.30)	...	43.0 (1.26)
Quarter 4	6.4 (0.44)	52.4 (1.33)	...	42.3 (1.25)
2013 full year	6.5 (0.26)	52.6 (0.76)	...	42.2 (0.70)
Quarter 1	7.1 (0.52)	51.5 (1.45)	...	42.5 (1.30)
Quarter 2	7.1 (0.51)	54.1 (1.31)	...	40.1 (1.21)
Quarter 3	5.9 (0.49)	52.7 (1.39)	...	42.7 (1.26)
Quarter 4	6.0 (0.47)	52.0 (1.34)	...	43.6 (1.24)
2014 full year	5.5 (0.27)	53.7 (0.68)	0.9 (0.11)	42.2 (0.65)
Quarter 1	6.6 (0.55)	51.7 (1.34)	0.5 (0.14)	43.0 (1.32)
Quarter 2	5.6 (0.59)	53.6 (1.28)	1.0 (0.17)	42.5 (1.24)
Quarter 3	5.3 (0.46)	54.6 (1.31)	1.0 (0.19)	40.9 (1.24)
Quarter 4	4.2 (0.40)	54.5 (1.38)	1.3 (0.28)	42.9 (1.39)
2015 full year	4.5 (0.24)	54.7 (0.78)	2.0 (0.18)	42.2 (0.79)
Quarter 1	4.6 (0.50)	56.3 (1.44)	1.6 (0.23)	40.4 (1.38)
Quarter 2	4.5 (0.48)	55.7 (1.34)	1.9 (0.29)	41.1 (1.32)
Quarter 3	4.5 (0.46)	53.3 (1.49)	2.5 (0.39)	43.7 (1.45)
Quarter 4	4.3 (0.43)	53.6 (1.53)	1.9 (0.32)	43.5 (1.54)
2016 (Jan–Sep)	5.0 (0.36)	53.5 (0.91)	2.3 (0.21)	43.4 (0.81)
Quarter 1	5.0 (0.46)	54.9 (1.34)	2.2 (0.27)	42.1 (1.32)
Quarter 2	5.0 (0.60)	52.9 (1.46)	2.4 (0.32)	43.3 (1.43)
Quarter 3	4.8 (0.56)	52.6 (1.37)	2.4 (0.38)	44.9 (1.38)
18-29 years				
2010 full year	30.9 (0.56)	53.4 (0.64)	...	16.2 (0.45)
Quarter 1	30.6 (1.13)	53.4 (1.34)	...	16.6 (0.92)
Quarter 2	31.9 (1.16)	54.0 (1.25)	...	14.4 (0.73)
Quarter 3	32.0 (1.01)	52.2 (1.11)	...	16.4 (0.85)
Quarter 4	29.1 (1.08)	54.2 (1.31)	...	17.4 (0.86)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–September 2016—Continued

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	27.7 (0.57)	56.4 (0.69)	...	16.7 (0.48)
Quarter 1	27.9 (1.01)	55.8 (1.34)	...	17.1 (0.92)
Quarter 2	27.6 (1.02)	57.4 (1.23)	...	16.0 (0.71)
Quarter 3	28.1 (1.10)	55.6 (1.28)	...	17.0 (0.87)
Quarter 4	27.2 (1.02)	56.9 (1.16)	...	16.8 (0.75)
2012 full year	26.9 (0.54)	56.5 (0.64)	...	17.5 (0.47)
Quarter 1	28.2 (1.10)	54.7 (0.33)	...	17.9 (0.88)
Quarter 2	25.1 (1.09)	58.4 (1.42)	...	17.6 (0.85)
Quarter 3	27.4 (0.99)	55.3 (1.27)	...	18.0 (0.94)
Quarter 4	26.9 (1.12)	57.6 (1.30)	...	16.6 (0.77)
2013 full year	26.1 (0.59)	57.6 (0.68)	...	16.9 (0.46)
Quarter 1	26.5 (1.02)	56.0 (1.24)	...	18.1 (0.88)
Quarter 2	25.1 (1.06)	58.5 (1.21)	...	17.1 (0.87)
Quarter 3	25.9 (1.06)	58.8 (1.23)	...	16.1 (0.90)
Quarter 4	26.8 (1.13)	57.2 (1.42)	...	16.5 (0.91)
2014 full year	20.6 (0.49)	61.4 (0.68)	2.1 (0.14)	19.0 (0.50)
Quarter 1	22.2 (0.91)	59.7 (1.36)	1.3 (0.21)	19.0 (0.97)
Quarter 2	19.8 (0.89)	62.2 (1.19)	2.4 (0.31)	18.8 (0.95)
Quarter 3	21.5 (0.99)	61.0 (1.34)	2.3 (0.28)	18.4 (0.85)
Quarter 4	19.1 (0.86)	62.4 (1.25)	2.5 (0.30)	19.7 (0.97)
2015 full year	16.5 (0.50)	64.2 (0.68)	3.4 (0.23)	20.2 (0.54)
Quarter 1	17.2 (0.87)	64.0 (1.16)	3.0 (0.42)	19.8 (0.99)
Quarter 2	15.2 (0.74)	65.4 (1.22)	4.0 (0.39)	20.3 (0.97)
Quarter 3	16.9 (0.84)	64.1 (1.18)	3.8 (0.49)	19.7 (0.93)
Quarter 4	16.5 (0.97)	63.4 (1.33)	2.8 (0.36)	21.1 (0.98)
2016 (Jan–Sep)	15.1 (0.56)	62.8 (0.75)	3.6 (0.21)	23.3 (0.70)
Quarter 1	15.1 (0.87)	64.1 (1.07)	3.1 (0.37)	21.7 (1.04)
Quarter 2	16.3 (0.91)	61.2 (1.15)	3.9 (0.45)	24.0 (1.09)
Quarter 3	13.9 (0.80)	63.0 (1.14)	3.9 (0.42)	24.3 (1.04)
30-64 years				
2010 full year	19.1 (0.36)	67.9 (0.49)	...	14.5 (0.31)
Quarter 1	18.2 (0.64)	69.8 (0.88)	...	13.6 (0.53)
Quarter 2	20.0 (0.83)	67.7 (0.95)	...	13.9 (0.48)
Quarter 3	19.7 (0.64)	67.2 (0.79)	...	14.5 (0.54)
Quarter 4	18.6 (0.59)	67.0 (0.82)	...	16.0 (0.56)
2011 full year	18.9 (0.34)	67.0 (0.44)	...	15.6 (0.29)
Quarter 1	19.2 (0.62)	67.0 (0.79)	...	15.4 (0.52)
Quarter 2	18.9 (0.60)	67.0 (0.80)	...	15.5 (0.52)
Quarter 3	18.8 (0.58)	67.3 (0.82)	...	15.5 (0.50)
Quarter 4	18.7 (0.59)	67.0 (0.84)	...	16.0 (0.58)
2012 full year	18.7 (0.31)	66.8 (0.43)	...	16.0 (0.30)
Quarter 1	19.4 (0.65)	66.7 (0.85)	...	15.3 (0.52)
Quarter 2	17.7 (0.54)	68.6 (0.78)	...	15.4 (0.51)
Quarter 3	18.6 (0.58)	66.4 (0.80)	...	16.6 (0.57)
Quarter 4	19.2 (0.53)	65.3 (0.72)	...	16.8 (0.53)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–September 2016—Continued

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2013 full year	18.3 (0.36)	66.6 (0.47)	...	16.7 (0.31)
Quarter 1	18.9 (0.68)	66.4 (0.84)	...	16.4 (0.56)
Quarter 2	18.1 (0.59)	67.5 (0.75)	...	16.1 (0.52)
Quarter 3	18.7 (0.57)	66.5 (0.76)	...	16.6 (0.52)
Quarter 4	17.8 (0.63)	66.2 (0.88)	...	17.6 (0.59)
2014 full year	14.7 (0.30)	69.4 (0.43)	2.9 (0.13)	17.3 (0.33)
Quarter 1	17.1 (0.58)	67.8 (0.74)	1.8 (0.16)	16.5 (0.54)
Quarter 2	14.1 (0.57)	69.6 (0.75)	3.1 (0.23)	17.7 (0.57)
Quarter 3	14.3 (0.51)	69.9 (0.81)	3.4 (0.27)	17.3 (0.57)
Quarter 4	13.7 (0.53)	70.2 (0.85)	3.1 (0.22)	17.7 (0.66)
2015 full year	11.5 (0.25)	71.7 (0.43)	4.9 (0.17)	18.5 (0.36)
Quarter 1	11.5 (0.45)	72.7 (0.76)	4.9 (0.28)	17.5 (0.60)
Quarter 2	11.4 (0.45)	72.7 (0.72)	5.1 (0.30)	17.6 (0.61)
Quarter 3	11.9 (0.52)	70.4 (0.88)	5.2 (0.31)	19.3 (0.71)
Quarter 4	11.2 (0.48)	70.9 (0.86)	4.3 (0.32)	19.4 (0.74)
2016 (Jan–Sep)	11.3 (0.35)	71.2 (0.44)	5.1 (0.21)	19.2 (0.41)
Quarter 1	10.8 (0.45)	72.5 (0.72)	5.3 (0.29)	18.7 (0.57)
Quarter 2	11.7 (0.49)	70.5 (0.61)	5.1 (0.31)	19.3 (0.58)
Quarter 3	11.5 (0.49)	70.8 (0.62)	5.1 (0.35)	19.5 (0.55)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 3. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–September 2016

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	22.3 (0.35)	64.1 (0.46)	...	15.0 (0.30)
Quarter 1	21.5 (0.66)	65.5 (0.88)	...	14.4 (0.54)
Quarter 2	23.2 (0.80)	64.0 (0.89)	...	14.0 (0.44)
Quarter 3	23.0 (0.58)	63.2 (0.73)	...	15.0 (0.51)
Quarter 4	21.4 (0.60)	63.6 (0.81)	...	16.4 (0.53)
2011 full year	21.3 (0.34)	64.2 (0.45)	...	15.9 (0.29)
Quarter 1	21.6 (0.59)	64.0 (0.79)	...	15.9 (0.50)
Quarter 2	21.2 (0.59)	64.5 (0.79)	...	15.6 (0.47)
Quarter 3	21.3 (0.62)	64.2 (0.84)	...	15.9 (0.52)
Quarter 4	21.0 (0.62)	64.3 (0.78)	...	16.2 (0.51)
2012 full year	20.9 (0.31)	64.1 (0.42)	...	16.4 (0.29)
Quarter 1	21.7 (0.66)	63.6 (0.84)	...	16.0 (0.51)
Quarter 2	19.6 (0.59)	65.9 (0.83)	...	16.0 (0.51)
Quarter 3	20.9 (0.57)	63.5 (0.79)	...	17.0 (0.55)
Quarter 4	21.3 (0.58)	63.3 (0.73)	...	16.8 (0.50)
2013 full year	20.4 (0.37)	64.2 (0.47)	...	16.7 (0.30)
Quarter 1	20.9 (0.64)	63.6 (0.79)	...	16.9 (0.54)
Quarter 2	19.9 (0.58)	65.1 (0.74)	...	16.3 (0.51)
Quarter 3	20.6 (0.59)	64.5 (0.74)	...	16.4 (0.48)
Quarter 4	20.1 (0.64)	63.8 (0.87)	...	17.3 (0.57)
2014 full year	16.3 (0.31)	67.3 (0.43)	2.7 (0.11)	17.7 (0.32)
Quarter 1	18.4 (0.55)	65.6 (0.76)	1.7 (0.13)	17.1 (0.53)
Quarter 2	15.6 (0.57)	67.7 (0.73)	2.9 (0.21)	18.0 (0.53)
Quarter 3	16.2 (0.53)	67.6 (0.80)	3.1 (0.23)	17.6 (0.53)
Quarter 4	15.1 (0.52)	68.1 (0.81)	2.9 (0.19)	18.2 (0.62)
2015 full year	12.8 (0.27)	69.7 (0.43)	4.5 (0.16)	18.9 (0.36)
Quarter 1	13.0 (0.45)	70.4 (0.77)	4.4 (0.27)	18.1 (0.62)
Quarter 2	12.4 (0.43)	70.8 (0.71)	4.8 (0.27)	18.3 (0.60)
Quarter 3	13.2 (0.51)	68.8 (0.83)	4.9 (0.29)	19.4 (0.66)
Quarter 4	12.6 (0.52)	69.0 (0.84)	3.9 (0.27)	19.9 (0.66)
2016 (Jan–Sep)	12.3 (0.36)	69.0 (0.47)	4.7 (0.18)	20.3 (0.40)
Quarter 1	11.9 (0.47)	70.2 (0.70)	4.7 (0.27)	19.5 (0.51)
Quarter 2	12.9 (0.52)	68.1 (0.62)	4.8 (0.28)	20.5 (0.62)
Quarter 3	12.1 (0.48)	68.8 (0.66)	4.8 (0.30)	20.8 (0.56)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

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Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–September 2016

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Male				
2010 full year	25.3 (0.44)	63.4 (0.51)	...	12.5 (0.30)
Quarter 1	24.7 (0.84)	64.7 (0.93)	...	12.0 (0.54)
Quarter 2	26.4 (0.93)	63.5 (0.99)	...	11.2 (0.49)
Quarter 3	26.3 (0.75)	62.2 (0.82)	...	12.6 (0.50)
Quarter 4	24.0 (0.74)	63.3 (0.87)	...	14.1 (0.55)
2011 full year	23.7 (0.40)	63.9 (0.49)	...	13.8 (0.30)
Quarter 1	24.0 (0.72)	63.7 (0.86)	...	13.6 (0.52)
Quarter 2	23.8 (0.72)	64.0 (0.92)	...	13.5 (0.51)
Quarter 3	23.4 (0.75)	64.2 (0.90)	...	14.0 (0.52)
Quarter 4	23.6 (0.69)	63.8 (0.82)	...	14.0 (0.53)
2012 full year	23.2 (0.38)	64.0 (0.46)	...	14.2 (0.31)
Quarter 1	24.0 (0.78)	63.6 (0.92)	...	13.8 (0.54)
Quarter 2	21.6 (0.68)	66.1 (0.90)	...	13.9 (0.58)
Quarter 3	23.5 (0.71)	63.5 (0.82)	...	14.3 (0.57)
Quarter 4	23.8 (0.71)	62.7 (0.84)	...	14.5 (0.54)
2013 full year	22.5 (0.42)	64.6 (0.49)	...	14.2 (0.32)
Quarter 1	23.3 (0.80)	63.9 (0.90)	...	14.3 (0.58)
Quarter 2	22.7 (0.72)	64.3 (0.84)	...	14.2 (0.58)
Quarter 3	22.3 (0.70)	65.0 (0.80)	...	14.1 (0.54)
Quarter 4	21.9 (0.78)	65.0 (0.90)	...	14.3 (0.56)
2014 full year	18.3 (0.38)	67.7 (0.47)	2.4 (0.12)	15.2 (0.36)
Quarter 1	20.0 (0.66)	66.3 (0.84)	1.6 (0.14)	14.9 (0.59)
Quarter 2	17.8 (0.72)	67.8 (0.79)	2.7 (0.24)	15.7 (0.64)
Quarter 3	18.1 (0.66)	67.8 (0.85)	2.7 (0.24)	15.4 (0.58)
Quarter 4	17.3 (0.65)	68.7 (0.92)	2.8 (0.21)	15.1 (0.66)
2015 full year	14.9 (0.31)	69.9 (0.47)	4.1 (0.18)	16.6 (0.37)
Quarter 1	15.2 (0.55)	70.6 (0.88)	3.9 (0.31)	15.6 (0.69)
Quarter 2	14.3 (0.53)	71.6 (0.81)	4.7 (0.30)	15.4 (0.62)
Quarter 3	15.8 (0.65)	68.3 (0.88)	4.1 (0.32)	17.3 (0.66)
Quarter 4	14.3 (0.67)	69.1 (0.96)	3.7 (0.32)	18.2 (0.74)
2016 (Jan–Sep)	14.4 (0.43)	69.6 (0.46)	4.6 (0.20)	17.6 (0.41)
Quarter 1	13.8 (0.57)	71.0 (0.73)	4.5 (0.30)	16.9 (0.53)
Quarter 2	15.1 (0.69)	68.7 (0.68)	4.5 (0.30)	17.7 (0.75)
Quarter 3	14.2 (0.54)	69.2 (0.77)	4.9 (0.32)	18.1 (0.62)
Female				
2010 full year	19.3 (0.32)	64.7 (0.47)	...	17.4 (0.38)
Quarter 1	18.4 (0.65)	66.2 (0.95)	...	16.8 (0.68)
Quarter 2	20.1 (0.76)	64.5 (0.92)	...	16.8 (0.55)
Quarter 3	19.7 (0.57)	64.2 (0.80)	...	17.3 (0.67)
Quarter 4	18.8 (0.60)	64.0 (0.87)	...	18.6 (0.68)

See footnotes at end of table.

Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–September 2016—Continued

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	18.9 (0.36)	64.5 (0.47)	...	18.0 (0.34)
Quarter 1	19.2 (0.59)	64.3 (0.86)	...	18.1 (0.62)
Quarter 2	18.6 (0.59)	64.9 (0.81)	...	17.8 (0.57)
Quarter 3	19.3 (0.64)	64.1 (0.89)	...	17.8 (0.65)
Quarter 4	18.4 (0.71)	64.8 (0.93)	...	18.4 (0.66)
2012 full year	18.6 (0.33)	64.2 (0.44)	...	18.6 (0.34)
Quarter 1	19.6 (0.66)	63.5 (0.90)	...	18.0 (0.61)
Quarter 2	17.7 (0.60)	65.8 (0.86)	...	18.0 (0.57)
Quarter 3	18.5 (0.61)	63.5 (0.88)	...	19.5 (0.66)
Quarter 4	18.8 (0.59)	63.9 (0.76)	...	18.9 (0.59)
2013 full year	18.3 (0.37)	64.0 (0.51)	...	19.1 (0.36)
Quarter 1	18.7 (0.62)	63.4 (0.85)	...	19.3 (0.65)
Quarter 2	17.3 (0.57)	65.9 (0.79)	...	18.4 (0.59)
Quarter 3	18.9 (0.60)	63.9 (0.81)	...	18.7 (0.57)
Quarter 4	18.4 (0.67)	62.6 (0.96)	...	20.2 (0.73)
2014 full year	14.3 (0.30)	66.9 (0.46)	2.9 (0.13)	20.1 (0.36)
Quarter 1	16.8 (0.59)	65.1 (0.86)	1.8 (0.18)	19.3 (0.62)
Quarter 2	13.5 (0.56)	67.6 (0.84)	3.1 (0.23)	20.2 (0.64)
Quarter 3	14.3 (0.52)	67.4 (0.89)	3.5 (0.28)	19.7 (0.66)
Quarter 4	12.9 (0.54)	67.6 (0.85)	3.1 (0.23)	21.2 (0.73)
2015 full year	10.8 (0.29)	69.6 (0.47)	4.8 (0.17)	21.2 (0.42)
Quarter 1	10.9 (0.46)	70.2 (0.80)	4.8 (0.30)	20.5 (0.69)
Quarter 2	10.6 (0.45)	70.0 (0.75)	4.8 (0.32)	21.1 (0.71)
Quarter 3	10.8 (0.53)	69.3 (0.95)	5.6 (0.35)	21.5 (0.81)
Quarter 4	10.9 (0.53)	68.8 (0.89)	4.2 (0.31)	21.5 (0.76)
2016 (Jan–Sep)	10.4 (0.35)	68.4 (0.56)	4.9 (0.18)	22.9 (0.49)
Quarter 1	10.1 (0.49)	69.5 (0.84)	4.8 (0.31)	22.0 (0.66)
Quarter 2	10.8 (0.47)	67.5 (0.79)	5.0 (0.33)	23.2 (0.71)
Quarter 3	10.2 (0.54)	68.3 (0.75)	4.7 (0.35)	23.4 (0.63)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–September 2016

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Hispanic or Latino ⁵				
2010 full year	43.2 (0.91)	41.1 (0.85)	...	16.3 (0.64)
Quarter 1	42.4 (1.72)	42.9 (1.67)	...	15.4 (1.10)
Quarter 2	44.9 (1.39)	39.7 (1.37)	...	15.8 (0.92)
Quarter 3	44.1 (1.78)	40.5 (1.69)	...	15.8 (0.98)
Quarter 4	41.5 (1.38)	41.1 (1.45)	...	18.1 (1.00)
2011 full year	42.2 (0.89)	40.3 (0.82)	...	18.1 (0.63)
Quarter 1	42.0 (1.60)	41.2 (1.95)	...	17.1 (1.18)
Quarter 2	41.4 (1.46)	40.2 (1.31)	...	19.0 (0.86)
Quarter 3	42.6 (1.38)	39.5 (1.41)	...	18.6 (1.10)
Quarter 4	42.7 (1.57)	40.2 (1.39)	...	17.6 (1.00)
2012 full year	41.3 (0.89)	40.4 (0.73)	...	19.0 (0.64)
Quarter 1	42.6 (1.72)	41.0 (1.68)	...	17.1 (1.02)
Quarter 2	39.7 (1.29)	42.0 (1.49)	...	19.3 (1.04)
Quarter 3	40.5 (1.55)	39.8 (1.34)	...	20.1 (1.39)
Quarter 4	42.2 (1.58)	38.8 (1.42)	...	19.7 (1.03)
2013 full year	40.6 (0.88)	42.1 (0.70)	...	18.0 (0.62)
Quarter 1	41.4 (1.95)	40.7 (1.52)	...	18.6 (1.17)
Quarter 2	41.3 (1.51)	41.9 (1.24)	...	17.5 (0.94)
Quarter 3	39.5 (1.38)	43.0 (1.49)	...	18.1 (1.11)
Quarter 4	40.3 (1.47)	42.7 (1.40)	...	17.7 (0.95)
2014 full year	33.7 (0.76)	46.4 (0.86)	2.6 (0.30)	20.6 (0.73)
Quarter 1	35.7 (1.43)	44.8 (1.62)	1.4 (0.30)	20.1 (1.09)
Quarter 2	33.2 (1.42)	47.2 (1.55)	3.0 (0.61)	20.3 (1.16)
Quarter 3	34.0 (1.40)	46.8 (1.44)	3.4 (0.55)	19.8 (1.12)
Quarter 4	31.8 (1.47)	47.0 (1.54)	2.6 (0.37)	22.1 (1.22)
2015 full year	27.7 (0.72)	50.0 (0.85)	5.1 (0.40)	23.0 (0.84)
Quarter 1	28.3 (1.24)	49.8 (1.42)	5.4 (0.55)	22.7 (1.26)
Quarter 2	26.1 (1.30)	53.2 (1.46)	4.2 (0.58)	21.4 (1.28)
Quarter 3	29.3 (1.33)	48.2 (1.40)	5.3 (0.65)	23.1 (1.25)
Quarter 4	27.2 (1.36)	48.8 (1.56)	5.4 (0.66)	24.7 (1.41)
2016 (Jan–Sep)	24.7 (1.17)	50.8 (1.21)	5.1 (0.38)	25.8 (1.32)
Quarter 1	24.5 (1.31)	51.6 (1.88)	5.1 (0.65)	25.2 (1.72)
Quarter 2	25.1 (1.93)	50.4 (2.23)	5.0 (0.76)	25.4 (2.08)
Quarter 3	24.5 (1.74)	50.6 (1.78)	5.1 (0.81)	26.7 (1.52)
Non-Hispanic white, single race				
2010 full year	16.4 (0.35)	72.2 (0.52)	...	12.8 (0.34)
Quarter 1	15.6 (0.63)	73.4 (0.93)	...	12.5 (0.60)
Quarter 2	17.0 (0.65)	72.7 (0.83)	...	11.7 (0.49)
Quarter 3	16.7 (0.64)	71.5 (0.92)	...	13.0 (0.63)
Quarter 4	16.1 (0.66)	71.4 (0.89)	...	14.1 (0.61)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–September 2016—Continued

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	15.6 (0.35)	72.5 (0.48)	...	13.4 (0.31)
Quarter 1	16.1 (0.64)	71.8 (0.87)	...	13.6 (0.57)
Quarter 2	15.8 (0.60)	72.9 (0.85)	...	12.6 (0.50)
Quarter 3	15.7 (0.64)	72.6 (0.86)	...	13.3 (0.61)
Quarter 4	14.8 (0.59)	72.8 (0.94)	...	14.1 (0.62)
2012 full year	15.1 (0.31)	72.7 (0.46)	...	13.7 (0.33)
Quarter 1	16.0 (0.67)	72.3 (0.88)	...	13.1 (0.58)
Quarter 2	14.2 (0.62)	74.5 (0.83)	...	13.1 (0.51)
Quarter 3	15.1 (0.58)	71.9 (0.87)	...	14.7 (0.61)
Quarter 4	15.1 (0.59)	72.3 (0.85)	...	13.9 (0.57)
2013 full year	14.5 (0.34)	72.7 (0.49)	...	14.4 (0.32)
Quarter 1	15.2 (0.62)	71.8 (0.91)	...	14.6 (0.62)
Quarter 2	13.9 (0.54)	73.6 (0.82)	...	14.2 (0.61)
Quarter 3	14.7 (0.61)	72.8 (0.80)	...	14.0 (0.52)
Quarter 4	14.0 (0.61)	72.6 (0.96)	...	14.7 (0.67)
2014 full year	11.6 (0.29)	75.3 (0.47)	2.5 (0.13)	14.6 (0.36)
Quarter 1	13.5 (0.58)	73.7 (0.87)	1.6 (0.16)	14.1 (0.66)
Quarter 2	11.1 (0.58)	75.5 (0.81)	2.6 (0.23)	14.9 (0.61)
Quarter 3	11.4 (0.52)	75.6 (0.88)	2.9 (0.28)	14.6 (0.67)
Quarter 4	10.5 (0.55)	76.2 (0.93)	2.8 (0.24)	14.8 (0.71)
2015 full year	8.7 (0.25)	77.3 (0.47)	4.3 (0.18)	15.7 (0.42)
Quarter 1	8.7 (0.50)	78.6 (0.78)	4.0 (0.30)	14.4 (0.63)
Quarter 2	8.8 (0.47)	78.0 (0.78)	4.7 (0.33)	14.9 (0.68)
Quarter 3	8.9 (0.48)	75.7 (0.93)	4.6 (0.39)	17.0 (0.80)
Quarter 4	8.3 (0.55)	77.0 (0.96)	3.7 (0.36)	16.2 (0.81)
2016 (Jan–Sep)	8.5 (0.27)	76.5 (0.47)	4.6 (0.21)	16.8 (0.37)
Quarter 1	8.4 (0.47)	77.8 (0.60)	4.4 (0.32)	15.7 (0.55)
Quarter 2	9.0 (0.41)	75.0 (0.72)	4.7 (0.30)	17.6 (0.59)
Quarter 3	7.9 (0.41)	76.7 (0.67)	4.7 (0.35)	17.1 (0.60)
Non-Hispanic black, single race				
2010 full year	27.2 (0.75)	49.3 (0.81)	...	25.3 (0.70)
Quarter 1	27.9 (1.41)	49.5 (1.60)	...	24.3 (1.41)
Quarter 2	26.5 (1.33)	49.4 (1.72)	...	25.7 (1.32)
Quarter 3	28.6 (1.14)	48.6 (1.35)	...	24.8 (1.31)
Quarter 4	25.6 (1.33)	49.6 (1.80)	...	26.3 (1.46)
2011 full year	24.8 (0.65)	50.5 (0.79)	...	26.2 (0.75)
Quarter 1	23.9 (1.26)	52.2 (1.67)	...	25.8 (1.18)
Quarter 2	24.2 (1.24)	51.1 (1.55)	...	26.5 (1.44)
Quarter 3	25.0 (1.16)	50.1 (1.49)	...	25.9 (1.27)
Quarter 4	26.2 (1.44)	48.8 (1.57)	...	26.6 (1.49)
2012 full year	23.6 (0.61)	50.8 (0.75)	...	27.0 (0.68)
Quarter 1	26.0 (1.19)	46.3 (1.50)	...	29.1 (1.21)
Quarter 2	21.9 (1.34)	53.1 (1.93)	...	25.8 (1.40)
Quarter 3	24.1 (1.05)	51.7 (1.47)	...	25.7 (1.27)
Quarter 4	22.6 (1.25)	52.2 (1.52)	...	27.3 (1.34)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–September 2016—Continued

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2013 full year	24.9 (0.62)	50.0 (0.91)	...	26.6 (0.80)
Quarter 1	25.5 (1.16)	50.6 (1.58)	...	25.0 (1.37)
Quarter 2	23.6 (1.23)	50.8 (1.68)	...	26.7 (1.32)
Quarter 3	25.9 (1.23)	50.3 (1.45)	...	26.0 (1.25)
Quarter 4	24.6 (1.39)	48.3 (1.70)	...	28.7 (1.55)
2014 full year	17.7 (0.60)	53.4 (0.84)	2.9 (0.27)	30.5 (0.73)
Quarter 1	20.2 (1.16)	51.6 (1.67)	1.4 (0.38)	29.7 (1.30)
Quarter 2	15.9 (1.04)	54.4 (1.73)	3.7 (0.51)	31.1 (1.53)
Quarter 3	17.5 (1.00)	52.6 (1.81)	3.3 (0.48)	31.5 (1.54)
Quarter 4	17.2 (1.16)	55.0 (1.82)	3.3 (0.55)	29.8 (1.59)
2015 full year	14.4 (0.57)	57.8 (0.90)	4.0 (0.34)	29.7 (0.84)
Quarter 1	15.6 (1.00)	56.7 (1.50)	4.1 (0.73)	29.7 (1.46)
Quarter 2	13.5 (0.97)	57.9 (1.72)	4.2 (0.61)	30.5 (1.37)
Quarter 3	14.7 (1.17)	60.3 (1.55)	4.4 (0.53)	27.2 (1.18)
Quarter 4	14.0 (1.14)	56.5 (1.99)	3.2 (0.48)	31.4 (1.89)
2016 (Jan–Sep)	15.1 (0.69)	57.0 (1.05)	4.3 (0.38)	29.6 (1.17)
Quarter 1	13.0 (1.34)	58.8 (1.86)	4.6 (0.63)	29.6 (1.66)
Quarter 2	16.7 (1.17)	55.7 (1.96)	4.7 (0.66)	29.4 (1.84)
Quarter 3	15.7 (1.20)	56.7 (1.70)	3.6 (0.71)	29.7 (1.47)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

⁵Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

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Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–September 2016

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
Poor (<100% FPL)				
2010 full year	42.2 (0.99)	19.6 (0.89)	...	38.8 (0.97)
Quarter 1	44.0 (1.79)	17.6 (0.68)	...	39.1 (1.82)
Quarter 2	43.5 (1.87)	19.4 (1.67)	...	37.5 (1.83)
Quarter 3	43.7 (1.75)	17.0 (1.50)	...	40.0 (1.75)
Quarter 4	38.1 (1.58)	24.1 (1.61)	...	38.6 (1.74)
2011 full year	40.1 (0.91)	21.2 (1.02)	...	39.6 (0.93)
Quarter 1	39.8 (0.64)	21.6 (1.79)	...	39.3 (1.67)
Quarter 2	37.2 (1.83)	23.8 (2.48)	...	39.9 (1.87)
Quarter 3	42.2 (1.84)	17.1 (1.86)	...	41.7 (1.64)
Quarter 4	41.1 (1.84)	22.1 (1.98)	...	37.5 (1.83)
2012 full year	40.1 (0.90)	20.2 (1.09)	...	40.8 (0.94)
Quarter 1	42.7 (1.62)	19.6 (1.69)	...	38.6 (1.60)
Quarter 2	38.9 (2.03)	21.0 (3.13)	...	41.3 (1.71)
Quarter 3	41.0 (1.43)	17.2 (1.46)	...	42.3 (1.82)
Quarter 4	37.6 (1.58)	22.6 (1.96)	...	40.9 (1.62)
2013 full year	39.3 (1.00)	19.0 (0.97)	...	42.4 (0.95)
Quarter 1	39.1 (1.74)	19.5 (1.87)	...	42.4 (1.91)
Quarter 2	38.9 (1.79)	19.0 (2.22)	...	42.7 (1.76)
Quarter 3	40.2 (1.90)	18.1 (2.26)	...	42.3 (1.76)
Quarter 4	39.2 (1.77)	19.3 (1.70)	...	42.3 (1.77)
2014 full year	32.3 (0.93)	21.9 (0.92)	2.2 (0.20)	46.6 (0.95)
Quarter 1	34.9 (1.53)	20.5 (1.59)	1.0 (0.27)	45.4 (1.74)
Quarter 2	33.5 (2.03)	20.2 (1.61)	2.5 (0.49)	47.0 (2.11)
Quarter 3	32.0 (1.78)	21.5 (2.06)	2.1 (0.37)	47.5 (1.70)
Quarter 4	29.1 (1.72)	25.1 (2.00)	3.2 (0.50)	46.5 (1.88)
2015 full year	25.2 (0.90)	24.3 (1.04)	3.8 (0.39)	51.7 (1.08)
Quarter 1	28.0 (1.57)	23.1 (1.50)	3.6 (0.65)	50.3 (2.06)
Quarter 2	25.0 (1.51)	24.6 (1.97)	4.3 (0.85)	51.6 (1.93)
Quarter 3	25.2 (1.70)	23.5 (2.67)	4.6 (0.82)	52.7 (2.55)
Quarter 4	22.4 (1.63)	25.9 (2.20)	2.7 (0.53)	52.4 (1.95)
2016 (Jan–Sep)	26.0 (1.25)	20.6 (0.93)	2.6 (0.27)	55.0 (1.34)
Quarter 1	24.7 (1.61)	23.8 (1.70)	2.9 (0.45)	52.8 (1.77)
Quarter 2	27.2 (2.05)	19.3 (1.49)	2.4 (0.47)	54.6 (2.25)
Quarter 3	26.2 (2.08)	18.4 (1.60)	2.6 (0.42)	57.6 (2.23)
Near poor (≥100% and <200% FPL)				
2010 full year	43.0 (0.74)	34.7 (0.74)	...	23.7 (0.55)
Quarter 1	43.8 (1.41)	34.8 (1.48)	...	22.8 (1.15)
Quarter 2	44.2 (1.52)	35.0 (1.44)	...	22.1 (1.17)
Quarter 3	43.9 (1.50)	34.3 (1.54)	...	23.5 (1.14)
Quarter 4	40.2 (1.51)	34.8 (1.59)	...	26.6 (1.35)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–September 2016—Continued

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
2011 full year	40.1 (0.72)	35.4 (0.75)	...	25.9 (0.69)
Quarter 1	40.3 (1.24)	36.1 (1.37)	...	25.4 (1.21)
Quarter 2	42.1 (1.41)	33.5 (1.32)	...	25.7 (1.14)
Quarter 3	39.0 (1.31)	36.0 (1.34)	...	26.0 (1.25)
Quarter 4	39.2 (1.49)	35.9 (1.40)	...	26.5 (1.27)
2012 full year	39.2 (0.68)	37.2 (0.74)	...	25.2 (0.57)
Quarter 1	41.0 (1.28)	35.8 (1.44)	...	24.4 (1.13)
Quarter 2	37.8 (1.42)	38.4 (1.46)	...	25.7 (1.12)
Quarter 3	38.0 (1.51)	38.6 (1.62)	...	25.1 (1.16)
Quarter 4	40.0 (1.44)	35.9 (1.45)	...	25.4 (1.21)
2013 full year	38.5 (0.84)	36.4 (0.78)	...	26.6 (0.78)
Quarter 1	39.2 (1.42)	33.8 (1.38)	...	28.4 (1.42)
Quarter 2	38.4 (1.55)	37.9 (1.50)	...	25.4 (1.33)
Quarter 3	37.9 (1.34)	39.3 (1.39)	...	24.1 (1.19)
Quarter 4	38.6 (1.42)	34.6 (1.38)	...	28.5 (1.44)
2014 full year	30.9 (0.72)	41.2 (0.81)	4.5 (0.33)	29.6 (0.76)
Quarter 1	34.4 (1.58)	39.3 (1.53)	2.2 (0.40)	27.5 (1.24)
Quarter 2	28.5 (1.20)	43.5 (1.38)	5.1 (0.56)	29.6 (1.21)
Quarter 3	31.3 (1.32)	42.1 (1.43)	5.3 (0.70)	28.7 (1.27)
Quarter 4	29.2 (1.31)	40.0 (1.47)	5.2 (0.66)	32.6 (1.41)
2015 full year	24.1 (0.62)	43.8 (0.79)	7.9 (0.48)	34.2 (0.80)
Quarter 1	23.8 (1.14)	45.9 (1.43)	8.6 (0.92)	32.8 (1.43)
Quarter 2	24.0 (1.17)	45.8 (1.47)	8.6 (0.88)	32.5 (1.42)
Quarter 3	24.4 (1.22)	41.3 (1.54)	7.3 (0.99)	36.1 (1.47)
Quarter 4	24.2 (1.35)	42.4 (1.68)	7.0 (0.82)	35.5 (1.69)
2016 (Jan–Sep)	23.0 (0.81)	40.5 (1.03)	7.2 (0.53)	38.6 (1.03)
Quarter 1	23.6 (1.33)	43.0 (1.86)	7.0 (0.90)	36.2 (1.78)
Quarter 2	23.4 (1.28)	39.1 (1.40)	7.5 (0.75)	39.2 (1.39)
Quarter 3	22.0 (1.40)	39.2 (1.37)	7.2 (0.91)	40.5 (1.64)
Not poor (≥200% FPL)				
2010 full year	12.6 (0.27)	80.8 (0.36)	...	8.1 (0.27)
Quarter 1	11.5 (0.50)	82.2 (0.66)	...	7.8 (0.45)
Quarter 2	13.2 (0.57)	80.8 (0.66)	...	7.4 (0.36)
Quarter 3	13.2 (0.57)	80.1 (0.65)	...	8.1 (0.51)
Quarter 4	12.4 (0.54)	80.1 (0.69)	...	9.0 (0.46)
2011 full year	12.0 (0.28)	81.1 (0.35)	...	8.3 (0.23)
Quarter 1	12.0 (0.55)	81.1 (0.64)	...	8.3 (0.40)
Quarter 2	12.5 (0.49)	80.5 (0.64)	...	8.4 (0.39)
Quarter 3	12.0 (0.49)	81.5 (0.64)	...	8.0 (0.39)
Quarter 4	11.6 (0.50)	81.4 (0.66)	...	8.6 (0.43)
2012 full year	11.4 (0.26)	81.3 (0.38)	...	8.7 (0.29)
Quarter 1	11.5 (0.52)	81.4 (0.68)	...	8.5 (0.52)
Quarter 2	11.3 (0.52)	81.7 (0.68)	...	8.5 (0.44)
Quarter 3	11.3 (0.44)	81.0 (0.64)	...	9.3 (0.51)
Quarter 4	11.7 (0.44)	80.9 (0.62)	...	8.7 (0.49)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–September 2016—Continued

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
2013 full year	11.4 (0.27)	81.2 (0.37)	...	8.9 (0.26)
Quarter 1	11.7 (0.56)	81.7 (0.74)	...	8.1 (0.47)
Quarter 2	11.4 (0.48)	81.0 (0.62)	...	9.0 (0.45)
Quarter 3	12.0 (0.54)	80.0 (0.66)	...	9.6 (0.44)
Quarter 4	10.5 (0.59)	82.0 (0.73)	...	8.8 (0.47)
2014 full year	8.9 (0.23)	83.9 (0.35)	2.3 (0.12)	8.5 (0.26)
Quarter 1	10.1 (0.48)	83.0 (0.62)	1.7 (0.18)	8.1 (0.44)
Quarter 2	8.6 (0.43)	83.0 (0.64)	2.5 (0.23)	9.7 (0.48)
Quarter 3	8.5 (0.40)	84.4 (0.57)	2.7 (0.27)	8.3 (0.42)
Quarter 4	8.3 (0.44)	85.1 (0.61)	2.4 (0.22)	8.0 (0.46)
2015 full year	7.6 (0.22)	84.7 (0.33)	3.8 (0.17)	9.1 (0.27)
Quarter 1	7.5 (0.42)	85.3 (0.65)	3.5 (0.28)	8.6 (0.49)
Quarter 2	7.5 (0.36)	85.2 (0.56)	3.8 (0.28)	8.8 (0.46)
Quarter 3	8.1 (0.46)	83.8 (0.64)	4.3 (0.32)	9.6 (0.46)
Quarter 4	7.3 (0.47)	84.7 (0.68)	3.4 (0.32)	9.3 (0.54)
2016 (Jan–Sep)	7.0 (0.27)	84.8 (0.32)	4.3 (0.18)	9.6 (0.24)
Quarter 1	6.5 (0.37)	85.9 (0.54)	4.4 (0.32)	9.0 (0.36)
Quarter 2	7.5 (0.42)	83.9 (0.51)	4.3 (0.27)	10.0 (0.45)
Quarter 3	7.1 (0.43)	84.6 (0.49)	4.4 (0.33)	10.0 (0.41)

... Category not applicable.

¹Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 12.2% in 2010, 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, and 8.8% in 2015 and 7.9% in the first three quarters of 2016. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

²A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

⁴Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁵Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–September 2016

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Age group		
Under age 65		
2014 full year	2.2 (0.10)	5.9
Quarter 1	1.4 (0.11)	3.7
Quarter 2	2.4 (0.17)	6.3
Quarter 3	2.5 (0.20)	6.8
Quarter 4	2.5 (0.18)	6.7
2015 full year	3.8 (0.14)	10.2
Quarter 1	3.6 (0.22)	9.7
Quarter 2	4.0 (0.24)	10.7
Quarter 3	4.2 (0.29)	11.3
Quarter 4	3.4 (0.24)	9.1
2016 (Jan–Sep)	4.1 (0.16)	11.0
Quarter 1	4.0 (0.23)	10.8
Quarter 2	4.1 (0.26)	11.1
Quarter 3	4.1 (0.29)	11.1
Age 0–17		
2014 full year	0.9 (0.11)	0.7
Quarter 1	0.5 (0.14)	0.4
Quarter 2	1.0 (0.17)	0.7
Quarter 3	1.0 (0.19)	0.8
Quarter 4	1.3 (0.28)	0.9
2015 full year	2.0 (0.18)	1.4
Quarter 1	1.6 (0.23)	1.2
Quarter 2	1.9 (0.29)	1.4
Quarter 3	2.5 (0.39)	1.8
Quarter 4	1.9 (0.32)	1.4
2016 (Jan–Sep)	2.3 (0.21)	1.7
Quarter 1	2.2 (0.27)	1.6
Quarter 2	2.4 (0.32)	1.8
Quarter 3	2.4 (0.38)	1.7
Age 18–64		
2014 full year	2.7 (0.11)	5.2
Quarter 1	1.7 (0.13)	3.3
Quarter 2	2.9 (0.21)	5.7
Quarter 3	3.1 (0.23)	6.1
Quarter 4	2.9 (0.19)	5.7
2015 full year	4.5 (0.16)	8.8
Quarter 1	4.4 (0.27)	8.6
Quarter 2	4.8 (0.27)	9.3
Quarter 3	4.9 (0.29)	9.5
Quarter 4	3.9 (0.27)	7.8
2016 (Jan–Sep)	4.7 (0.18)	9.3
Quarter 1	4.7 (0.27)	9.2
Quarter 2	4.8 (0.28)	9.4
Quarter 3	4.8 (0.30)	9.4

See footnotes at the end of the table.

Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–September 2016—continued

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Age 18–29		
2014 full year	2.1 (0.14)	1.1
Quarter 1	1.3 (0.21)	0.6
Quarter 2	2.4 (0.31)	1.2
Quarter 3	2.3 (0.28)	1.2
Quarter 4	2.5 (0.30)	1.3
2015 full year	3.4 (0.23)	1.8
Quarter 1	3.0 (0.42)	1.6
Quarter 2	4.0 (0.39)	2.1
Quarter 3	3.8 (0.49)	1.9
Quarter 4	2.8 (0.36)	1.5
2016 (Jan–Sep)	3.6 (0.21)	1.9
Quarter 1	3.1 (0.37)	1.6
Quarter 2	3.9 (0.45)	2.1
Quarter 3	3.9 (0.42)	2.0
Age 30–64		
2014 full year	2.9 (0.13)	4.1
Quarter 1	1.8 (0.16)	2.6
Quarter 2	3.1 (0.23)	4.4
Quarter 3	3.4 (0.27)	4.9
Quarter 4	3.1 (0.22)	4.4
2015 full year	4.9 (0.17)	7.0
Quarter 1	4.9 (0.28)	7.0
Quarter 2	5.1 (0.30)	7.3
Quarter 3	5.2 (0.31)	7.6
Quarter 4	4.3 (0.32)	6.3
2016 (Jan–Sep)	5.1 (0.21)	7.4
Quarter 1	5.3 (0.29)	7.6
Quarter 2	5.1 (0.31)	7.3
Quarter 3	5.1 (0.35)	7.4

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.” These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2014–2016, Family Core component.

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Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–September 2016

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Sex		
Male		
2014 full year	2.4 (0.12)	2.3
Quarter 1	1.6 (0.14)	1.5
Quarter 2	2.7 (0.24)	2.6
Quarter 3	2.7 (0.24)	2.6
Quarter 4	2.8 (0.21)	2.7
2015 full year	4.1 (0.18)	4.0
Quarter 1	3.9 (0.31)	3.7
Quarter 2	4.7 (0.30)	4.5
Quarter 3	4.1 (0.32)	4.1
Quarter 4	3.7 (0.32)	3.6
2016 (Jan–Sep)	4.6 (0.20)	4.5
Quarter 1	4.5 (0.30)	4.4
Quarter 2	4.5 (0.30)	4.3
Quarter 3	4.9 (0.32)	4.7
Female		
2014 full year	2.9 (0.13)	2.9
Quarter 1	1.8 (0.18)	1.8
Quarter 2	3.1 (0.23)	3.1
Quarter 3	3.5 (0.28)	3.4
Quarter 4	3.1 (0.23)	3.1
2015 full year	4.8 (0.17)	4.8
Quarter 1	4.8 (0.30)	4.8
Quarter 2	4.8 (0.32)	4.8
Quarter 3	5.6 (0.35)	5.6
Quarter 4	4.2 (0.31)	4.2
2016 (Jan–Sep)	4.9 (0.18)	4.9
Quarter 1	4.8 (0.31)	4.9
Quarter 2	5.0 (0.33)	5.0
Quarter 3	4.7 (0.35)	4.7
Race/ethnicity		
Hispanic or Latino ²		
2014 full year	2.6 (0.30)	0.9
Quarter 1	1.4 (0.30)	0.5
Quarter 2	3.0 (0.61)	1.0
Quarter 3	3.4 (0.55)	1.1
Quarter 4	2.6 (0.37)	0.9
2015 full year	5.1 (0.40)	1.7
Quarter 1	5.4 (0.55)	1.8
Quarter 2	4.2 (0.58)	1.4
Quarter 3	5.3 (0.65)	1.8
Quarter 4	5.4 (0.66)	1.9
2016 (Jan–Sep)	5.1 (0.38)	1.8
Quarter 1	5.1 (0.65)	1.8
Quarter 2	5.0 (0.76)	1.7
Quarter 3	5.1 (0.81)	1.8

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–September 2016—continued

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Non-Hispanic white, single race		
2014 full year	2.5 (0.13)	3.0
Quarter 1	1.6 (0.16)	1.9
Quarter 2	2.6 (0.23)	3.2
Quarter 3	2.9 (0.28)	3.5
Quarter 4	2.8 (0.24)	3.4
2015 full year	4.3 (0.18)	5.2
Quarter 1	4.0 (0.30)	4.9
Quarter 2	4.7 (0.33)	5.8
Quarter 3	4.6 (0.39)	5.5
Quarter 4	3.7 (0.36)	4.5
2016 (Jan–Sep)	4.6 (0.21)	5.5
Quarter 1	4.4 (0.32)	5.3
Quarter 2	4.7 (0.30)	5.6
Quarter 3	4.7 (0.35)	5.7
Non-Hispanic black, single race		
2014 full year	2.9 (0.27)	0.7
Quarter 1	1.4 (0.38)	0.3
Quarter 2	3.7 (0.51)	0.9
Quarter 3	3.3 (0.48)	0.8
Quarter 4	3.3 (0.55)	0.8
2015 full year	4.0 (0.34)	1.0
Quarter 1	4.1 (0.73)	1.0
Quarter 2	4.2 (0.61)	1.0
Quarter 3	4.4 (0.53)	1.1
Quarter 4	3.2 (0.48)	0.8
2016 (Jan–Sep)	4.3 (0.38)	1.0
Quarter 1	4.6 (0.63)	1.1
Quarter 2	4.7 (0.66)	1.1
Quarter 3	3.6 (0.71)	0.9
Poverty status³		
Poor (<100% FPL)		
2014 full year	2.2 (0.20)	0.6
Quarter 1	1.0 (0.27)	0.3
Quarter 2	2.5 (0.49)	0.7
Quarter 3	2.1 (0.37)	0.6
Quarter 4	3.2 (0.50)	0.9
2015 full year	3.8 (0.39)	0.9
Quarter 1	3.6 (0.65)	0.9
Quarter 2	4.3 (0.85)	1.0
Quarter 3	4.6 (0.82)	1.1
Quarter 4	2.7 (0.53)	0.7
2016 (Jan–Sep)	2.6 (0.27)	0.6
Quarter 1	2.9 (0.45)	0.7
Quarter 2	2.4 (0.47)	0.6
Quarter 3	2.6 (0.42)	0.6
Near poor (≥100% and <200% FPL)		
2014 full year	4.5 (0.33)	1.6
Quarter 1	2.2 (0.40)	0.8
Quarter 2	5.1 (0.56)	1.7
Quarter 3	5.3 (0.70)	1.9
Quarter 4	5.2 (0.66)	1.8

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–September 2016—continued

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2015 full year	7.9 (0.48)	2.7
Quarter 1	8.6 (0.92)	2.9
Quarter 2	8.6 (0.88)	2.9
Quarter 3	7.3 (0.99)	2.6
Quarter 4	7.0 (0.82)	2.5
2016 (Jan–Sep)	7.2 (0.53)	2.5
Quarter 1	7.0 (0.90)	2.5
Quarter 2	7.5 (0.75)	2.5
Quarter 3	7.2 (0.91)	2.4
Not poor (≥200% FPL)		
2014 full year	2.3 (0.12)	3.1
Quarter 1	1.7 (0.18)	2.2
Quarter 2	2.5 (0.23)	3.4
Quarter 3	2.7 (0.27)	3.6
Quarter 4	2.4 (0.22)	3.1
2015 full year	3.8 (0.17)	5.1
Quarter 1	3.5 (0.28)	4.7
Quarter 2	3.8 (0.28)	5.2
Quarter 3	4.3 (0.32)	5.9
Quarter 4	3.4 (0.32)	4.6
2016 (Jan–Sep)	4.3 (0.18)	6.0
Quarter 1	4.4 (0.32)	6.0
Quarter 2	4.3 (0.27)	6.0
Quarter 3	4.4 (0.33)	6.1

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

²Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

³Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 8.8% in 2014, 8.8% in 2015 and 7.9% in the first three quarters of 2016. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage." These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2014–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.



Changes in Characteristics of Chronically Uninsured Adults: Early Release of Estimates From the National Health Interview Survey, 2010–September 2016

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Highlights

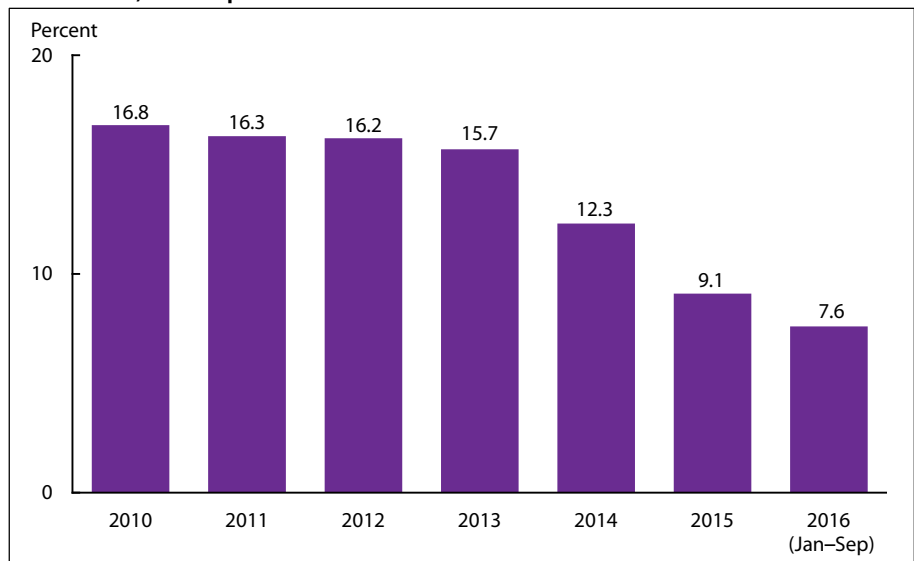
- Among adults aged 18–64, the percentage who were chronically uninsured has decreased from 16.8% in 2010 to 7.6% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, from 2010 to the first 9 months of 2016, the percentage who were aged 18–25 decreased from 23.4% to 16.0%, and the percentage who were aged 35–44 increased from 21.9% to 26.8%.
- In 2010, the percentage of chronically uninsured adults who were non-Hispanic white was larger than the percentage who were Hispanic. However, in the first 9 months of 2016, Hispanics composed the largest racial and ethnic group among the chronically uninsured.
- Among chronically uninsured adults aged 18–64, from 2010 to the first 9 months of 2016, the percentage who were unemployed decreased from 16.3% to 10.1%, and the percentage who were employed increased from 62.5% to 67.5%.
- The percentage of chronically uninsured adults aged 18–64 who lived in the South was higher than that for any other region, and this percentage increased from 44.6% in 2010 to 54.7% in the first 9 months of 2016.

Introduction

In the first 9 months of 2016, 24.3 million (12.3%) adults aged 18–64 were uninsured at the time of interview—18.2 million fewer adults than in 2010 (1). Within the remaining uninsured population, some individuals are uninsured for only a short period of time, while others are chronically uninsured or without coverage for more than 1 year. The chronically uninsured differ in many ways from the short-term uninsured. Previous research suggests that persons who were uninsured for more than 1 year have less access to and use of health care services compared with persons who were uninsured for shorter periods of time (2). Except for the first figure, this report does not present estimates of prevalence or risk of being chronically uninsured—rather, it examines selected characteristics of the chronically uninsured adult population aged 18–64, and how these have changed between 2010 and the first 9 months of 2016. Estimates for 2010–2015 are based on full years of data from the National Health Interview Survey (NHIS), and 2016 estimates are based on data collected during the first 9 months of 2016.

This report is produced by the NHIS Early Release (ER) Program, which releases selected preliminary estimates prior to final microdata release. These estimates are available from the NHIS website at: <https://www.cdc.gov/nchs/nhis.htm>. For more information about NHIS and the ER Program, see the [Technical Notes](#) and [Additional Early Release Program Products](#) sections of this report.

Figure 1. Percentage of adults aged 18–64 who were chronically uninsured, by year: United States, 2010–September 2016

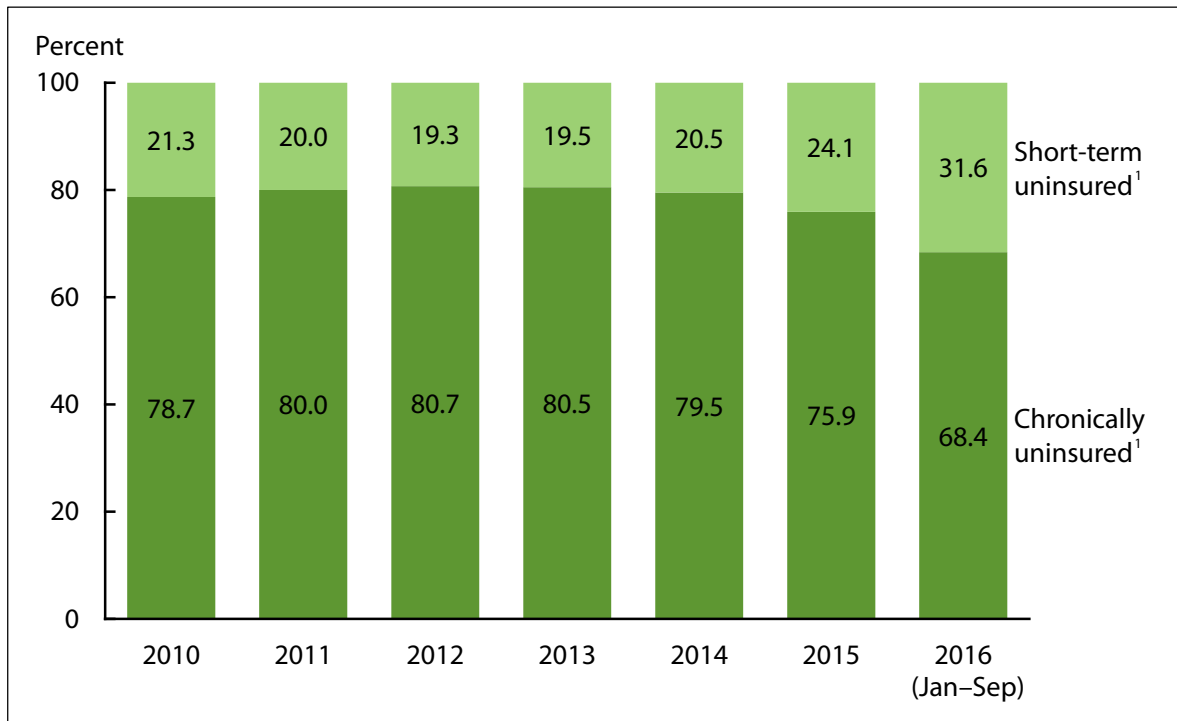


NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. The decrease in the percentage of adults aged 18–64 who were chronically uninsured from 2010–September 2016 followed a significant quadratic trend ($p < 0.05$). Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, 7.6% of adults aged 18–64 were chronically uninsured (Figure 1).
- Among adults aged 18–64, the percentage who were chronically uninsured decreased from 16.8% in 2010 to 7.6% in the first 9 months of 2016. However, the decrease occurred primarily from 2013 to the first 9 months of 2016; the percentage was stable before then.

Figure 2. Percent distribution of adults aged 18–64 who were uninsured, by length of time uninsured and year: United States, 2010–September 2016



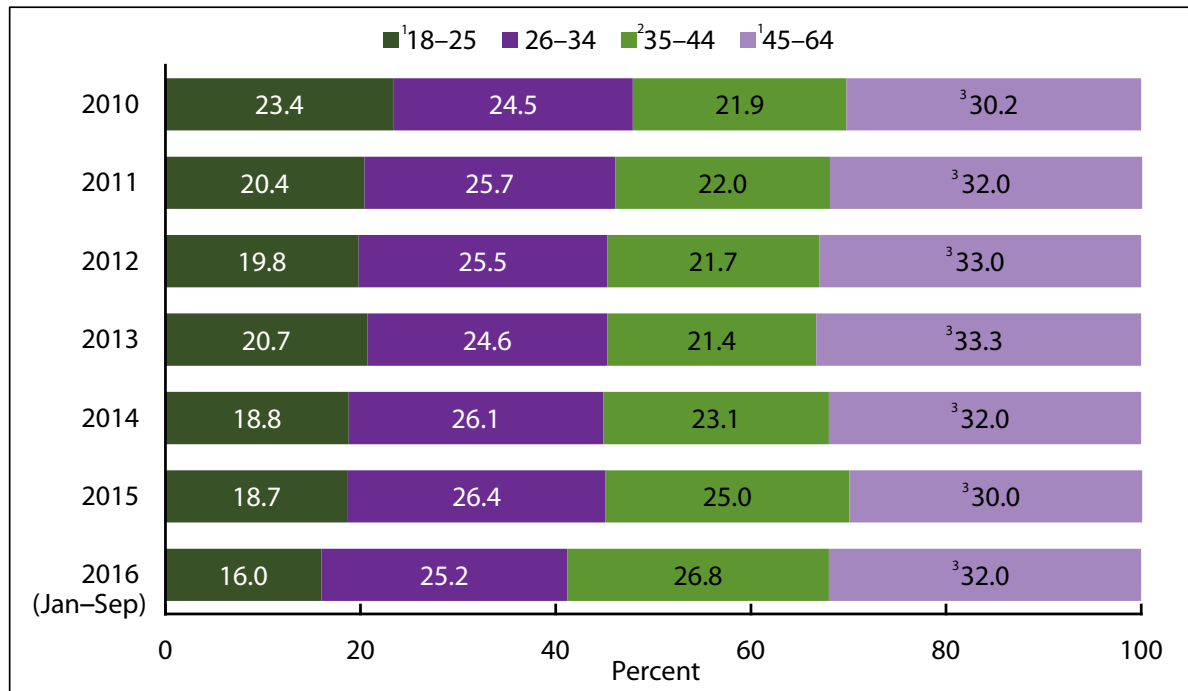
¹Significant cubic trend from 2010–September 2016 ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Short-term uninsured was defined as having lacked coverage for 1 year or less. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among uninsured adults aged 18–64, 31.6% were short-term uninsured and 68.4% were chronically uninsured (Figure 2).
- Within each year from 2010 to the first 9 months of 2016, the percentage of uninsured adults aged 18–64 who were chronically uninsured was significantly larger than the percentage who were short-term uninsured.
- Among uninsured adults aged 18–64, the percentage who were chronically uninsured increased from 78.7% in 2010 to 80.7% in 2012, remained stable between 2012 and 2014, and then decreased from 79.5% in 2014 to 68.4% in the first 9 months of 2016.

Figure 3. Percent distribution of adults aged 18–64 who were chronically uninsured, by age group and year: United States, 2010–September 2016



¹Significant cubic trend from 2010–September 2016 ($p < 0.05$).

²Significant quadratic trend from 2010–September 2016 ($p < 0.05$).

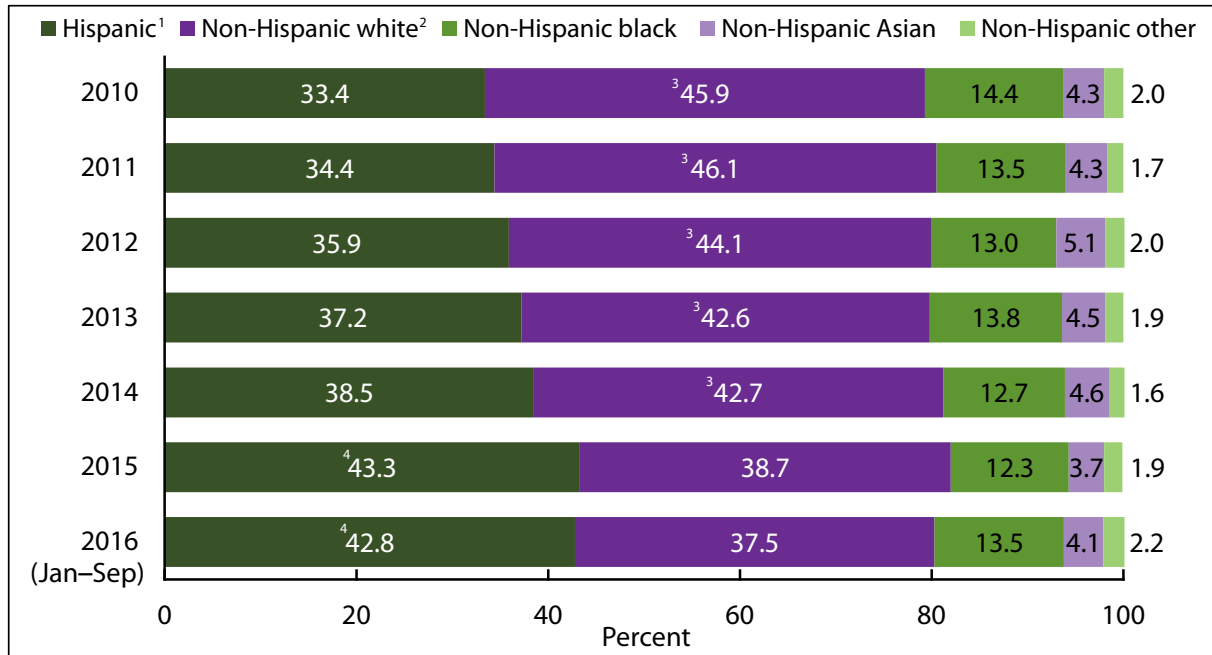
³Significantly larger than the percentage of adults aged 18–25, 26–34, and 35–44 ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016 among chronically uninsured adults aged 18–64, 16.0% were aged 18–25, 25.2% were aged 26–34, 26.8% were aged 35–44, and 32.0% were aged 45–64 (Figure 3).
- Within each year from 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, the percentage who were aged 45–64 was significantly larger than that of any other age group examined.
- Among chronically uninsured adults aged 18–64, the percentage who were aged 18–25 decreased from 23.4% in 2010 to 20.4% in 2011, remained stable between 2011 and 2013, and then continued to decrease to 18.8% in 2014 and 16.0% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who were aged 26–34 between 2010 (24.5%) and the first 9 months of 2016 (25.2%).
- Among chronically uninsured adults aged 18–64, the percentage who were aged 35–44 remained stable from 2010 to 2013, and then increased from 21.4% in 2013 to 26.8% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who were aged 45–64 increased from 30.2% in 2010 to 32.0% in 2011, remained stable between 2011 and 2014, and then decreased from 32.0% in 2014 to 30.0% in 2015. There was no significant change in the percentage who were aged 45–64 between 2015 and the first 9 months of 2016.

Figure 4. Percent distribution of adults aged 18–64 who were chronically uninsured, by race and ethnicity and year: United States, 2010–September 2016



¹Significant linear increase from 2010–September 2016 ($p < 0.05$).

²Significant linear decrease from 2010–September 2016 ($p < 0.05$).

³Significantly larger than the percentage who were Hispanic, non-Hispanic black, non-Hispanic Asian, and non-Hispanic other race ($p < 0.05$).

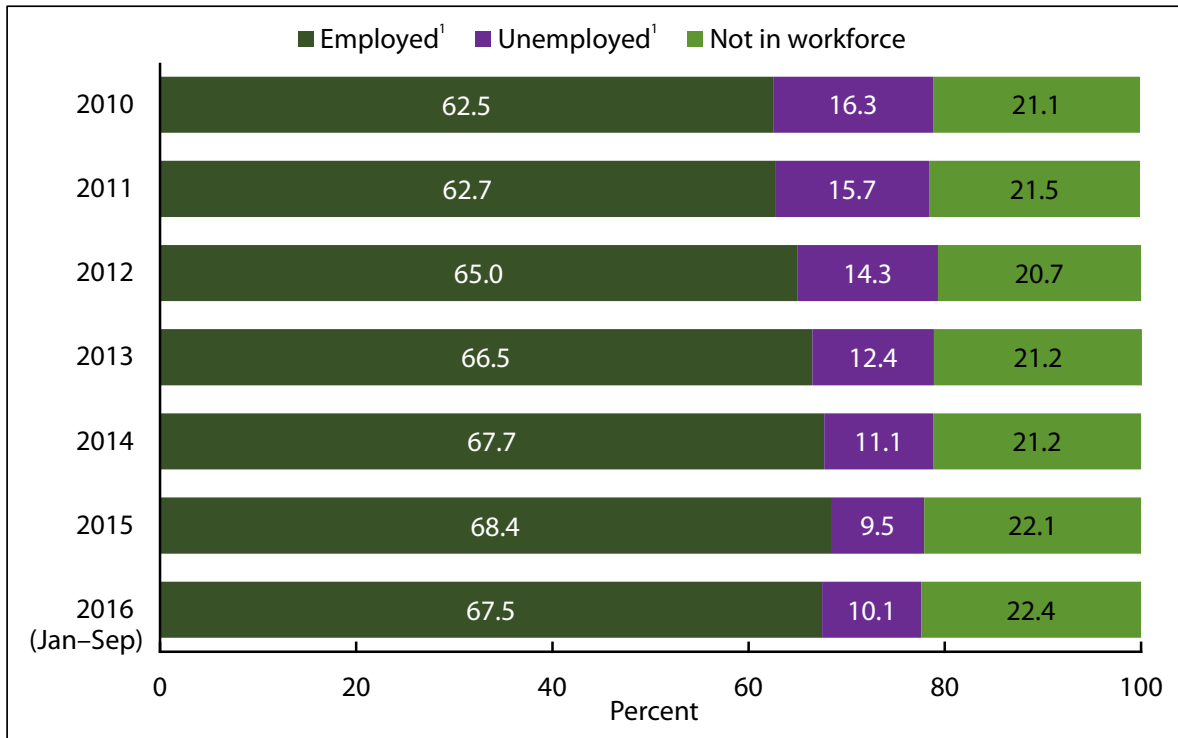
⁴Significantly larger than the percentage who were non-Hispanic white, non-Hispanic black, non-Hispanic Asian, and non-Hispanic other race ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 42.8% were Hispanic, 37.5% were non-Hispanic white, 13.5% were non-Hispanic black, 4.1% were non-Hispanic Asian, and 2.2% were non-Hispanic other race (Figure 4).
- From 2010 to 2014, the largest percentage of chronically uninsured adults aged 18–64 were non-Hispanic white. However, in 2015 and the first 9 months of 2016, those who were Hispanic made up the largest percentage of the chronically uninsured.
- Among chronically uninsured adults aged 18–64, the percentage who were Hispanic increased from 33.4% in 2010 to 42.8% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who were non-Hispanic white decreased from 45.9% in 2010 to 37.5% in the first 9 months of 2016.
- From 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, there were no significant changes in the percentages who were non-Hispanic black, non-Hispanic Asian, and non-Hispanic other race.

Figure 5. Percent distribution of adults aged 18–64 who were chronically uninsured, by employment status and year: United States, 2010–September 2016



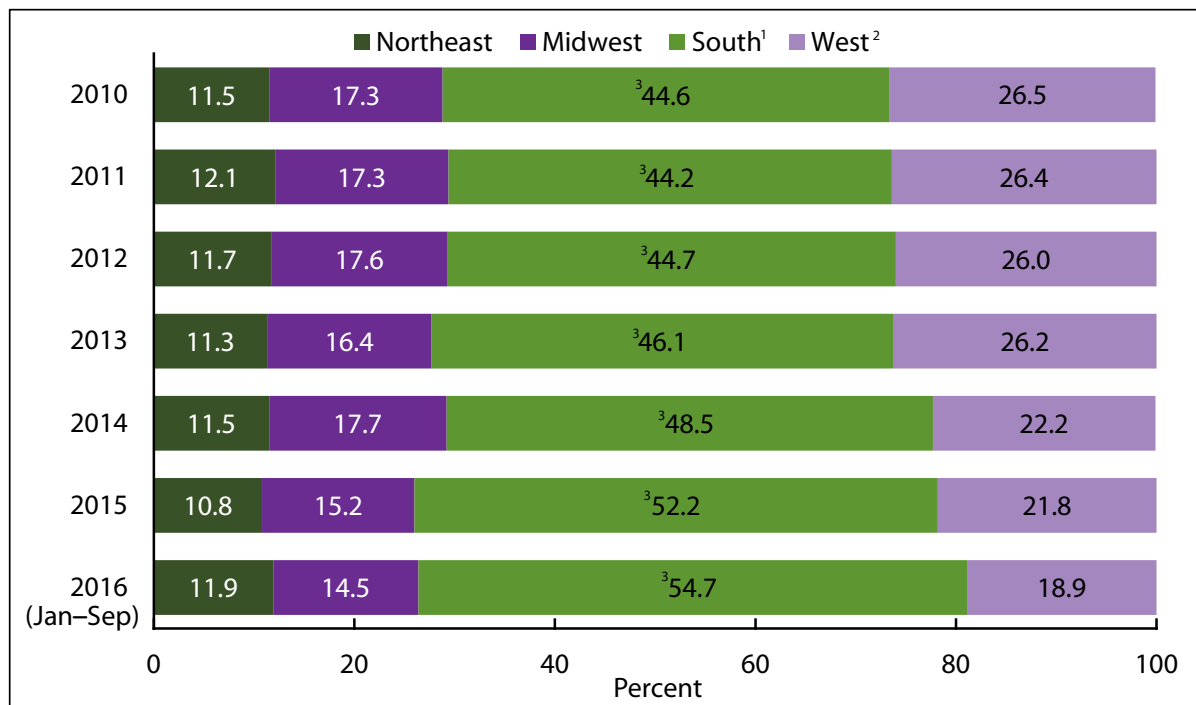
¹Significant cubic trend from 2010–September 2016 ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 67.5% were employed, 10.1% were unemployed, and 22.4% were not in the workforce (Figure 5).
- Among chronically uninsured adults aged 18–64, the percentage who were employed remained stable from 2010 to 2011, then increased from 62.7% in 2011 to 67.7% in 2014, and then remained stable through the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who were unemployed remained stable from 2010 to 2011, then decreased from 15.7% in 2011 to 9.5% in 2015, and then remained stable through the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who were not in the workforce from 2010 (21.1%) to the first 9 months of 2016 (22.4%).

Figure 6. Percent distribution of adults aged 18–64 who were chronically uninsured, by region and year: United States, 2010–September 2016



¹Significant linear increase from 2010–September 2016 ($p < 0.05$).

²Significant linear decrease from 2010–September 2016 ($p < 0.05$).

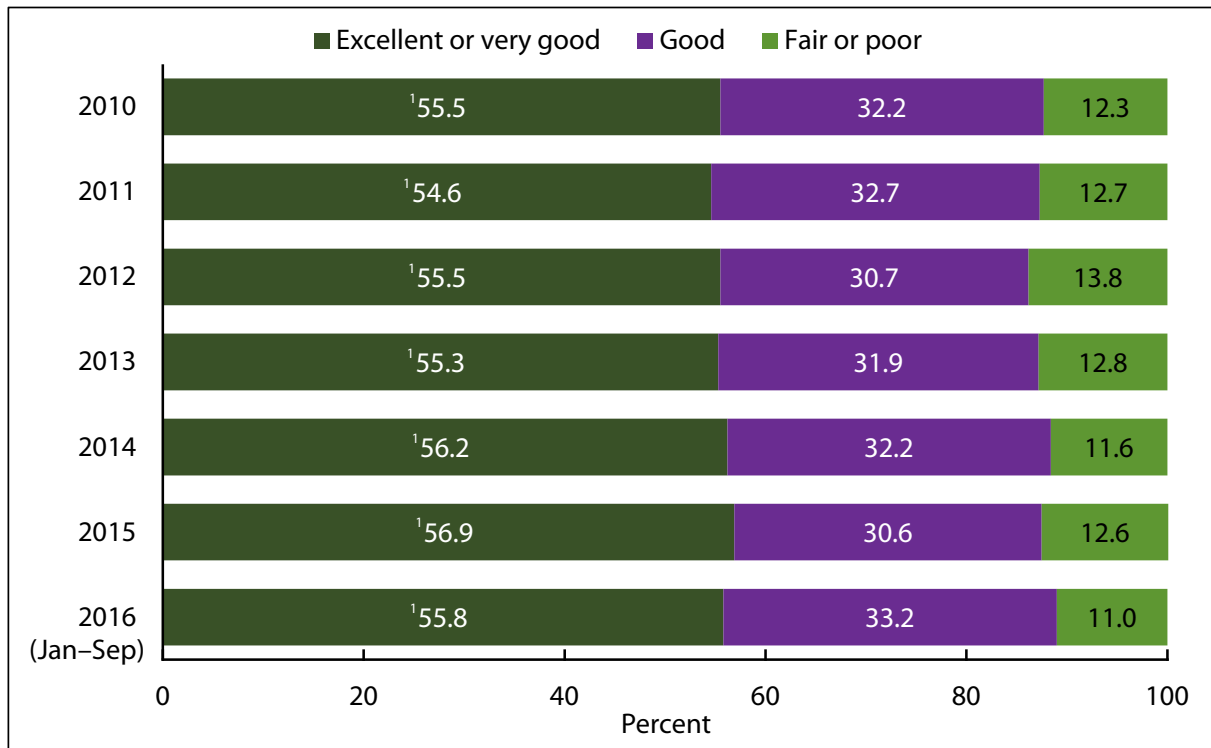
³Significantly larger than the percentage who live in the Northeast, Midwest, or West ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 11.9% lived in the Northeast, 14.5% lived in the Midwest, 54.7% lived in the South, and 18.9% lived in the West (Figure 6).
- Within each year from 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, the percentage who lived in the South was larger than that of any other region.
- Among chronically uninsured adults aged 18–64, the percentage who lived in the South increased from 44.6% in 2010 to 54.7% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who lived in the West decreased from 26.5% in 2010 to 18.9% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who lived in the Midwest from 2010 (17.3%) to the first 9 months of 2016 (14.5%). The observed difference between 2010 and the first 9 months of 2016 did not meet the usual criterion for statistical significance ($p = 0.078$).
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who lived in the Northeast from 2010 (11.5%) to the first 9 months of 2016 (11.9%).

Figure 7. Percent distribution of adults aged 18–64 who were chronically uninsured, by health status and year: United States, 2010–September 2016



¹Significantly larger than the percentage who rated their health as good or fair or poor ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 55.8% rated their health as excellent or very good, 33.2% rated their health as good, and 11.0% rated their health as fair or poor (Figure 7).
- Within each year from 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, the percentage who rated their health as excellent or very good was larger than the percentage who rated their health as good or fair or poor.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who rated their health as excellent or very good from 2010 (55.5%) to the first 9 months of 2016 (55.8%).
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who rated their health as good from 2010 (32.2%) to the first 9 months of 2016 (33.2%).
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who rated their health as fair or poor from 2010 (12.3%) to the first 9 months of 2016 (11.0%).

Summary

The landscape of health insurance coverage in the United States has changed from 2010 to the first 9 months of 2016. During this time period, among adults aged 18–64, the percentage who were uninsured has decreased—more than 18 million adults have gained health care coverage since 2010 (1). Among the remaining uninsured, the majority had lacked coverage for more than 1 year, (were chronically uninsured). However, from 2010 to the first 9 months of 2016, the percentage of adults who were chronically uninsured decreased overall and as a percentage of all uninsured adults. As these shifts toward gaining insurance took place, there was uncertainty about whether the characteristics of the chronically uninsured would change as well. For example, there was concern that those who were young and healthy would be less likely to sign up for coverage (3), and would therefore make up a larger proportion of the chronically uninsured.

The proportion of the chronically uninsured population that report they were in good or very good or excellent health has not changed between 2010 and the first 9 months of 2016. However, the proportion who were Hispanic, employed, aged 35–44, and who lived in the South has increased. It is important to note that despite making up a larger proportion of the chronically uninsured, this does not indicate an increase in prevalence or risk of being chronically uninsured within these groups. These populations have still had significant gains in health insurance coverage during this time period. For example, the percentage of Hispanic adults aged 18–64 who were uninsured at the time of interview decreased 18.5 percentage points from 2010 to the first 9 months of 2016 (1).

The chronically uninsured are of special interest because they have a persistent lack of coverage, and may be at higher risk of not obtaining preventive services or care for illness and injury (2). A recent study found that this persistent lack of coverage, as reflected in those who had been uninsured for more than 1 year, was associated with less use of health services and access to care, compared with those who had been uninsured for 1 year or less (2). Additionally, reasons for being uninsured may differ for those who are chronically uninsured and those who have been uninsured for a shorter amount of time, and therefore may require different solutions to acquire access to needed care (4). It can be useful to differentiate the chronically uninsured from those who have been uninsured for a short period of time to better identify those populations with the highest risk of not receiving necessary care.

Table 1. Percentage (and standard error) of adults aged 18–64 and percent distribution (and standard error) of uninsured adults aged 18–64, by length of time spent uninsured: United States, 2010–September 2016

Insurance status	2010	2011	2012	2013	2014	2015	2016 (Jan–Sep)
Percent overall							
Chronically uninsured ¹	16.8 (0.30)	16.3 (0.31)	16.2 (0.29)	15.7 (0.34)	12.3 (0.27)	9.1 (0.22)	7.6 (0.31)
Short-term uninsured ¹	4.6 (0.12)	4.1 (0.11)	3.9 (0.10)	3.8 (0.11)	3.2 (0.10)	2.9 (0.11)	3.5 (0.13)
Percent distribution of uninsured, by length of time uninsured ²							
Chronically uninsured ¹	78.7 (0.49)	80.0 (0.49)	80.7 (0.49)	80.5 (0.53)	79.5 (0.58)	75.9 (0.75)	68.4 (1.12)
Short-term uninsured ¹	21.3 (0.49)	20.0 (0.49)	19.3 (0.49)	19.5 (0.53)	20.5 (0.58)	24.1 (0.75)	31.6 (1.12)

¹Chronically uninsured was defined as having lacked coverage for more than 1 year, while short-term uninsured was defined as having lacked coverage for 1 year or less. In references to “1 year or less” and “more than 1 year,” 1 year is defined as the 12 months prior to interview. In 2016, answer categories concerning the length of noncoverage for those who were currently uninsured were modified. Therefore, 2016 estimates of uninsured for “1 year or less” and “more than 1 year” may not be completely comparable to previous years. For more information on this change, see Technical Notes.

²A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

Table 2. Percent distribution (and standard error) of adults aged 18–64 who were chronically uninsured, by selected demographic characteristics and year: United States, 2010–September 2016

Selected characteristic	2010	2011	2012	2013	2014	2015	2016 (Jan–Sep)
Sex							
Male	58.2 (0.46)	57.4 (0.49)	56.3 (0.46)	55.7 (0.47)	57.2 (0.57)	59.5 (0.66)	59.7 (0.71)
Female	41.8 (0.46)	42.6 (0.49)	43.7 (0.46)	44.3 (0.47)	42.8 (0.57)	40.5 (0.66)	40.3 (0.71)
Age group (years)							
18–25	23.4 (0.44)	20.4 (0.44)	19.8 (0.50)	20.7 (0.50)	18.8 (0.59)	18.7 (0.60)	16.0 (0.99)
26–34	24.5 (0.58)	25.7 (0.51)	25.5 (0.51)	24.6 (0.57)	26.1 (0.60)	26.4 (0.69)	25.2 (1.00)
35–44	21.9 (0.47)	22.0 (0.43)	21.7 (0.46)	21.4 (0.52)	23.1 (0.56)	25.0 (0.69)	26.8 (0.80)
45–64	30.2 (0.55)	32.0 (0.54)	33.0 (0.54)	33.3 (0.69)	32.0 (0.73)	30.0 (0.73)	32.0 (0.91)
Race and ethnicity							
Hispanic	33.4 (1.24)	34.4 (1.21)	35.9 (1.18)	37.2 (1.35)	38.5 (1.36)	43.3 (1.40)	42.8 (1.98)
Non-Hispanic, white only	45.9 (1.15)	46.1 (1.09)	44.1 (1.11)	42.6 (1.20)	42.7 (1.19)	38.7 (1.26)	37.5 (1.78)
Non-Hispanic, black only	14.4 (0.73)	13.5 (0.65)	13.0 (0.64)	13.8 (0.60)	12.7 (0.63)	12.3 (0.67)	13.5 (1.01)
Non-Hispanic, Asian only	4.3 (0.26)	4.3 (0.30)	5.1 (0.36)	4.5 (0.28)	4.6 (0.36)	3.7 (0.37)	4.1 (0.55)
Non-Hispanic, other races	2.0 (0.39)	1.7 (0.16)	2.0 (0.19)	1.9 (0.17)	1.6 (0.17)	1.9 (0.25)	2.2 (0.37)
Region							
Northeast	11.5 (0.48)	12.1 (0.50)	11.7 (0.75)	11.3 (1.06)	11.5 (0.91)	10.8 (0.89)	11.9 (1.35)
Midwest	17.3 (0.75)	17.3 (0.68)	17.6 (0.68)	16.4 (0.82)	17.7 (0.91)	15.2 (1.02)	14.5 (1.45)
South	44.6 (1.15)	44.2 (1.13)	44.7 (1.11)	46.1 (1.27)	48.5 (1.38)	52.2 (1.35)	54.7 (3.24)
West	26.5 (1.12)	26.4 (1.10)	26.0 (0.91)	26.2 (1.05)	22.2 (1.04)	21.8 (1.05)	18.9 (2.36)
Poverty status¹							
Poor	29.3 (0.71)	28.8 (0.70)	29.8 (0.72)	29.3 (0.73)	31.1 (0.86)	28.4 (0.93)	29.7 (1.37)
Near poor	34.3 (0.71)	34.6 (0.75)	35.3 (0.65)	34.4 (0.70)	35.8 (0.98)	35.1 (0.90)	35.2 (1.50)
Not poor	36.5 (0.82)	36.5 (0.80)	34.9 (0.73)	36.3 (0.77)	33.1 (0.82)	36.5 (0.94)	35.1 (1.52)
Employment status							
Employed	62.5 (0.59)	62.7 (0.56)	65.0 (0.57)	66.5 (0.56)	67.7 (0.62)	68.4 (0.74)	67.5 (1.05)
Unemployed	16.3 (0.49)	15.7 (0.47)	14.3 (0.41)	12.4 (0.45)	11.1 (0.48)	9.5 (0.54)	10.1 (0.53)
Not in workforce	21.1 (0.50)	21.5 (0.50)	20.7 (0.45)	21.2 (0.52)	21.2 (0.62)	22.1 (0.60)	22.4 (1.06)
Health status²							
Excellent or very good	55.5 (0.68)	54.6 (0.68)	55.5 (0.71)	55.3 (0.68)	56.2 (0.75)	56.9 (0.90)	55.8 (1.15)
Good	32.2 (0.60)	32.7 (0.63)	30.7 (0.58)	31.9 (0.66)	32.2 (0.74)	30.6 (0.84)	33.2 (0.80)
Fair or poor	12.3 (0.40)	12.7 (0.40)	13.8 (0.48)	12.8 (0.44)	11.6 (0.46)	12.6 (0.64)	11.0 (0.90)

¹Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold, "near poor" persons have incomes of 100% to less than 200% of the poverty threshold, and "not poor" persons have incomes of 200% of the poverty threshold or greater. The percentages of respondents with unknown poverty status were 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, 8.8% in 2015, and 7.9% in the first three quarters of 2016. Estimates for persons with unknown poverty status are not shown separately. For more information on the unknown income and poverty status categories, see the *Survey Description* document for the 2015 National Health Interview Survey, available from: <https://www.cdc.gov/nchs/nhis.htm>. The estimates shown in this report may differ from estimates based on both reported and imputed income.

²Health status data were obtained by asking respondents to assess their own health and that of family members living in the same household as excellent, very good, good, fair, or poor. The analyses exclude adults with unknown health status.

NOTES: A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care. Chronically uninsured was defined as having lacked coverage for more than 1 year. A person was identified as having lacked coverage for more than 1 year based on the response to the following question: "Not including Single Service Plans, about how long has it been since [you/Alias] last had health care coverage?" In references to "more than 1 year," 1 year is defined as the 12 months prior to interview. In 2016, answer categories concerning the length of noncoverage for those who were currently uninsured were modified. Therefore, 2016 estimates of "uninsured for more than 1 year" may not be completely comparable to previous years. For more information on this change, see Technical Notes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

Technical Notes

The National Center for Health Statistics (NCHS) is releasing selected estimates of characteristics of the chronically uninsured for the civilian noninstitutionalized U.S. population based on data from the January 2010–September 2016 National Health Interview Survey (NHIS).

The estimates are being released prior to final data editing and final weighting to provide access to the most recent information from NHIS. Differences between estimates calculated using preliminary data files and final data files are typically less than 0.1 percentage point. However, preliminary estimates of persons without health insurance coverage are generally 0.1–0.3 percentage points lower than the final estimates due to the editing procedures used for the final data files.

Estimates for 2010 through September 2016 are stratified by year, sex, age group, race and ethnicity, region, poverty status, employment status, and self-reported health status.

Data source

Data used to produce this Early Release (ER) report are derived from the NHIS Family Core from January 2010 through September 2016. This component collects information on all family members in each household. Data analysis was based on information collected on 691,965 persons in the Family Core. Visit the NHIS website at: <https://www.cdc.gov/nchs/nhis.htm> for more information about the design, content, and use of NHIS.

Estimation procedures

NCHS creates survey weights for each calendar quarter of the NHIS sample. The NHIS data weighting procedure is described in more detail at: https://www.cdc.gov/nchs/data/series/sr_02/sr02_165.pdf. Estimates were calculated using the NHIS survey weights, which are calibrated to census totals for sex, age, and race and ethnicity of the U.S. civilian noninstitutionalized population. Weights for the 2010 and 2011 NHIS data were derived from 2000 census-based population estimates. Weights for the 2012, 2013, 2014, 2015, and 2016 NHIS data were derived from 2010 census-based population estimates.

Point estimates and estimates of their variances were calculated using SUDAAN software to account for the complex sample design of NHIS. The Taylor series linearization method was chosen for variance estimation. Trends were evaluated using logistic regression analysis.

Unless otherwise noted, all estimates shown meet the NCHS standard of having less than or equal to 30% relative standard error. Differences between percentages or rates were evaluated using two-sided significance tests at the 0.05 level. Lack of comment regarding the difference between any two estimates does not necessarily mean that the difference was tested and found to be not significant.

Estimates of percent distribution may not always add to 100% due to rounding.

Definitions of selected terms

Lack of health insurance coverage at interview—A person was defined as uninsured if, at the time of interview, he or she did not have any private health insurance, Medicare, Medicaid, CHIP, state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care. For comparability, the estimates for all years were created using these same definitions. Health insurance information is collected for all persons in a family and is reported on an individual basis.

Chronically uninsured—A person was defined as chronically uninsured if he or she was uninsured at the time of interview, and indicated that he or she had lacked health insurance coverage for more than 1 year. Persons who were chronically uninsured were identified by asking those who were uninsured at the time of interview the following question (HILAST): *Not including Single Service Plans, about how long has it been since [you/Alias] last had health care coverage?* In 2016, the answer categories for the HILAST questions were modified to align NHIS responses with those of other national federal surveys. Therefore, 2016 estimates of “uninsured for more than 1 year” may not be completely comparable to previous years. Prior to 2016, the answer categories for the HILAST question were: 6 months or less; more than 6 months, but not more than 1 year ago; more than 1 year, but not more than 3 years ago; more than 3 years; and never. Beginning in 2016, the answer categories for the HILAST question are: 6 months or less; more than 6 months, but less than 1 year; 1 year; more than 1 year, but less than 3 years; 3 years or more; and never.

Poverty status—Poverty categories are based on the ratio of the family’s income in the previous calendar year to the appropriate poverty threshold (given the family’s size and number of children), as defined by the U.S. Census Bureau. Persons categorized as “poor” have a poverty ratio less than 100% (i.e., their family income was below the poverty threshold); “near poor” persons have incomes of 100% to less than 200% of the poverty threshold; and “not poor” persons have incomes that are 200% of the poverty threshold or greater. The percentage of respondents with unknown poverty status from January 2010 through September 2016 averaged 10.1%. For more information on unknown income and unknown poverty status, see the NHIS *Survey Description* document for 2015 at: <https://www.cdc.gov/nchs/nhis.htm>.

Employment status—Employment status is assessed at the time of interview and is obtained for persons aged 18 and over. For the purposes of this report, adults were classified as “employed” if they reported that they either worked at or had a job or business at any time during the 1-week period preceding the interview. This includes working for pay at a job or business, with a job or business

but not at work, and working but not for pay at a family-owned job or business. Adults were classified as “unemployed” if they were looking for work during the 1-week period preceding the interview, and “not in the workforce” if they were not working at a job or business and were not looking for work during the 1-week period preceding the interview.

Additional Early Release Program Products

Additional reports are published through the Early Release (ER) Program.

Early Release of Selected Estimates Based on Data From the National Health Interview Survey is published quarterly and provides estimates of 15 selected measures of health. Measures of health include estimates of health insurance, having a usual place to go for medical care, obtaining needed medical care, influenza vaccination, pneumococcal vaccination, obesity, leisure-time physical activity, current smoking, alcohol consumption, HIV testing, general health status, personal care needs, serious psychological distress, diagnosed diabetes, and asthma episodes and current asthma.

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey is published quarterly and provides detailed estimates of health insurance coverage.

Wireless Substitution: Early Release of Estimates From the National Health Interview Survey is published biannually and provides selected estimates of telephone coverage in the United States.

Other ER reports and tabulations on special topics are released on an as-needed basis; see

<https://www.cdc.gov/nchs/nhis/releases.htm>.

In addition to these reports, preliminary microdata files containing selected National Health Interview Survey (NHIS) variables are produced as part of the ER Program. For the 2016 NHIS, these files are made available four times: September 2016, November 2016, February 2017, and May 2017. NHIS data users can analyze these files through the National Center for Health Statistics Research Data Center without having to wait for the final annual NHIS microdata files to be released.

New measures may be added as work continues and in response to changing data needs. Feedback on these releases is welcome (nhislist@cdc.gov).

Announcements about Early Releases, other new data releases, publications, or corrections related to NHIS will be sent to members of the HISUSERS e-mail list. To join, visit the Centers for Disease Control and Prevention website at <https://www.cdc.gov/subscribe.html>.

References

1. Martinez ME, Zammiti EP, Cohen RA. Health insurance coverage: Early release of estimates from the National Health Interview Survey, January–September 2016. National Center for Health Statistics. February 2017. Available from: <https://www.cdc.gov/nchs/nhis/releases.htm>.
2. Villarroel MA, Cohen RA. Health insurance continuity and health care access and utilization, 2014. NCHS data brief no 249. Hyattsville, MD: National Center for Health Statistics. 2016.
3. Levine D, Mulligan J. Mere mortals: Overselling the young invincibles. *J Health Pol Policy Law* 42(2):387–407. 2017.
4. Graves JA, Swartz K. Health care reform and the dynamics of insurance coverage—lessons from Massachusetts. *N Eng J Med* 367(13):1181–84. 2012.

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Zammiti EP, Cohen RA. Changes in characteristics of chronically uninsured adults: Early release of estimates from the National Health Interview Survey, 2010–September 2016. National Center for Health Statistics. 2017. Available from: <https://www.cdc.gov/nchs/nhis/releases.htm>.



Table 1. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–December 2016

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	18.2 (0.30)	61.2 (0.50)	...	22.0 (0.38)
Quarter 1	17.5 (0.53)	62.6 (0.99)	...	21.2 (0.71)
Quarter 2	19.2 (0.74)	60.9 (0.92)	...	21.2 (0.58)
Quarter 3	18.8 (0.50)	60.6 (0.83)	...	22.0 (0.64)
Quarter 4	17.2 (0.49)	60.6 (0.89)	...	23.5 (0.68)
2011 full year	17.3 (0.29)	61.2 (0.51)	...	23.0 (0.37)
Quarter 1	17.4 (0.49)	61.3 (0.89)	...	22.7 (0.67)
Quarter 2	17.4 (0.48)	61.4 (0.83)	...	22.5 (0.59)
Quarter 3	17.3 (0.54)	60.8 (0.95)	...	23.3 (0.68)
Quarter 4	16.9 (0.51)	61.1 (0.86)	...	23.3 (0.63)
2012 full year	16.9 (0.27)	61.0 (0.47)	...	23.5 (0.37)
Quarter 1	17.6 (0.56)	60.2 (0.93)	...	23.5 (0.64)
Quarter 2	16.0 (0.48)	63.0 (0.90)	...	22.6 (0.68)
Quarter 3	17.0 (0.50)	60.3 (0.84)	...	24.2 (0.67)
Quarter 4	17.2 (0.47)	60.3 (0.80)	...	23.8 (0.59)
2013 full year	16.6 (0.30)	61.0 (0.52)	...	23.8 (0.35)
Quarter 1	17.1 (0.54)	60.3 (0.91)	...	23.9 (0.65)
Quarter 2	16.4 (0.49)	62.1 (0.82)	...	22.9 (0.59)
Quarter 3	16.5 (0.48)	61.2 (0.85)	...	23.7 (0.61)
Quarter 4	16.2 (0.53)	60.5 (0.93)	...	24.5 (0.68)
2014 full year	13.3 (0.26)	63.6 (0.46)	2.2 (0.10)	24.5 (0.36)
Quarter 1	15.2 (0.47)	61.8 (0.85)	1.4 (0.11)	24.2 (0.68)
Quarter 2	12.9 (0.50)	63.8 (0.81)	2.4 (0.17)	24.7 (0.61)
Quarter 3	13.2 (0.44)	64.0 (0.85)	2.5 (0.20)	24.0 (0.62)
Quarter 4	12.1 (0.42)	64.4 (0.90)	2.5 (0.18)	25.0 (0.74)
2015 full year	10.5 (0.22)	65.6 (0.50)	3.8 (0.14)	25.3 (0.43)
Quarter 1	10.7 (0.40)	66.5 (0.88)	3.6 (0.22)	24.2 (0.74)
Quarter 2	10.3 (0.36)	66.7 (0.81)	4.0 (0.24)	24.6 (0.71)
Quarter 3	10.8 (0.43)	64.5 (0.93)	4.2 (0.29)	26.1 (0.77)
Quarter 4	10.3 (0.41)	64.7 (0.95)	3.4 (0.24)	26.3 (0.81)
2016 full year	10.4 (0.31)	65.0 (0.48)	4.1 (0.13)	26.3 (0.41)
Quarter 1	10.0 (0.39)	66.0 (0.80)	4.0 (0.23)	25.7 (0.64)
Quarter 2	10.8 (0.46)	63.9 (0.79)	4.1 (0.26)	26.8 (0.75)
Quarter 3	10.1 (0.44)	64.4 (0.77)	4.1 (0.29)	27.4 (0.71)
Quarter 4	10.8 (0.49)	65.6 (0.81)	4.3 (0.26)	25.2 (0.71)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

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Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–December 2016

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
0-17 years				
2010 full year	7.8 (0.32)	53.8 (0.75)	...	39.8 (0.73)
Quarter 1	7.4 (0.51)	55.4 (1.47)	...	38.5 (1.41)
Quarter 2	9.1 (0.79)	53.0 (1.30)	...	39.3 (1.19)
Quarter 3	8.2 (0.56)	53.7 (1.35)	...	39.7 (1.31)
Quarter 4	6.5 (0.46)	53.0 (1.35)	...	41.6 (1.30)
2011 full year	7.0 (0.27)	53.3 (0.76)	...	41.0 (0.74)
Quarter 1	6.9 (0.50)	54.4 (1.40)	...	40.3 (1.35)
Quarter 2	7.7 (0.48)	53.7 (1.23)	...	40.1 (1.21)
Quarter 3	7.1 (0.53)	52.3 (1.46)	...	42.1 (1.38)
Quarter 4	6.5 (0.45)	53.0 (1.33)	...	41.5 (1.29)
2012 full year	6.6 (0.27)	52.8 (0.73)	...	42.1 (0.72)
Quarter 1	6.7 (0.55)	51.6 (1.35)	...	43.0 (1.24)
Quarter 2	6.4 (0.57)	55.3 (1.34)	...	39.9 (1.38)
Quarter 3	6.8 (0.50)	52.0 (1.30)	...	43.0 (1.26)
Quarter 4	6.4 (0.44)	52.4 (1.33)	...	42.3 (1.25)
2013 full year	6.5 (0.26)	52.6 (0.76)	...	42.2 (0.70)
Quarter 1	7.1 (0.52)	51.5 (1.45)	...	42.5 (1.30)
Quarter 2	7.1 (0.51)	54.1 (1.31)	...	40.1 (1.21)
Quarter 3	5.9 (0.49)	52.7 (1.39)	...	42.7 (1.26)
Quarter 4	6.0 (0.47)	52.0 (1.34)	...	43.6 (1.24)
2014 full year	5.5 (0.27)	53.7 (0.68)	0.9 (0.11)	42.2 (0.65)
Quarter 1	6.6 (0.55)	51.7 (1.34)	0.5 (0.14)	43.0 (1.32)
Quarter 2	5.6 (0.59)	53.6 (1.28)	1.0 (0.17)	42.5 (1.24)
Quarter 3	5.3 (0.46)	54.6 (1.31)	1.0 (0.19)	40.9 (1.24)
Quarter 4	4.2 (0.40)	54.5 (1.38)	1.3 (0.28)	42.9 (1.39)
2015 full year	4.5 (0.24)	54.7 (0.78)	2.0 (0.18)	42.2 (0.79)
Quarter 1	4.6 (0.50)	56.3 (1.44)	1.6 (0.23)	40.4 (1.38)
Quarter 2	4.5 (0.48)	55.7 (1.34)	1.9 (0.29)	41.1 (1.32)
Quarter 3	4.5 (0.46)	53.3 (1.49)	2.5 (0.39)	43.7 (1.45)
Quarter 4	4.3 (0.43)	53.6 (1.53)	1.9 (0.32)	43.5 (1.54)
2016 full year	5.1 (0.31)	53.8 (0.71)	2.5 (0.17)	43.0 (0.65)
Quarter 1	5.0 (0.46)	54.9 (1.34)	2.2 (0.27)	42.1 (1.32)
Quarter 2	5.0 (0.60)	52.9 (1.46)	2.4 (0.32)	43.3 (1.43)
Quarter 3	4.8 (0.56)	52.6 (1.37)	2.4 (0.38)	44.9 (1.38)
Quarter 4	5.6 (0.46)	54.9 (1.31)	3.0 (0.37)	41.5 (1.22)
18-29 years				
2010 full year	30.9 (0.56)	53.4 (0.64)	...	16.2 (0.45)
Quarter 1	30.6 (1.13)	53.4 (1.34)	...	16.6 (0.92)
Quarter 2	31.9 (1.16)	54.0 (1.25)	...	14.4 (0.73)
Quarter 3	32.0 (1.01)	52.2 (1.11)	...	16.4 (0.85)
Quarter 4	29.1 (1.08)	54.2 (1.31)	...	17.4 (0.86)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–December 2016—Continued

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	27.7 (0.57)	56.4 (0.69)	...	16.7 (0.48)
Quarter 1	27.9 (1.01)	55.8 (1.34)	...	17.1 (0.92)
Quarter 2	27.6 (1.02)	57.4 (1.23)	...	16.0 (0.71)
Quarter 3	28.1 (1.10)	55.6 (1.28)	...	17.0 (0.87)
Quarter 4	27.2 (1.02)	56.9 (1.16)	...	16.8 (0.75)
2012 full year	26.9 (0.54)	56.5 (0.64)	...	17.5 (0.47)
Quarter 1	28.2 (1.10)	54.7 (0.33)	...	17.9 (0.88)
Quarter 2	25.1 (1.09)	58.4 (1.42)	...	17.6 (0.85)
Quarter 3	27.4 (0.99)	55.3 (1.27)	...	18.0 (0.94)
Quarter 4	26.9 (1.12)	57.6 (1.30)	...	16.6 (0.77)
2013 full year	26.1 (0.59)	57.6 (0.68)	...	16.9 (0.46)
Quarter 1	26.5 (1.02)	56.0 (1.24)	...	18.1 (0.88)
Quarter 2	25.1 (1.06)	58.5 (1.21)	...	17.1 (0.87)
Quarter 3	25.9 (1.06)	58.8 (1.23)	...	16.1 (0.90)
Quarter 4	26.8 (1.13)	57.2 (1.42)	...	16.5 (0.91)
2014 full year	20.6 (0.49)	61.4 (0.68)	2.1 (0.14)	19.0 (0.50)
Quarter 1	22.2 (0.91)	59.7 (1.36)	1.3 (0.21)	19.0 (0.97)
Quarter 2	19.8 (0.89)	62.2 (1.19)	2.4 (0.31)	18.8 (0.95)
Quarter 3	21.5 (0.99)	61.0 (1.34)	2.3 (0.28)	18.4 (0.85)
Quarter 4	19.1 (0.86)	62.4 (1.25)	2.5 (0.30)	19.7 (0.97)
2015 full year	16.5 (0.50)	64.2 (0.68)	3.4 (0.23)	20.2 (0.54)
Quarter 1	17.2 (0.87)	64.0 (1.16)	3.0 (0.42)	19.8 (0.99)
Quarter 2	15.2 (0.74)	65.4 (1.22)	4.0 (0.39)	20.3 (0.97)
Quarter 3	16.9 (0.84)	64.1 (1.18)	3.8 (0.49)	19.7 (0.93)
Quarter 4	16.5 (0.97)	63.4 (1.33)	2.8 (0.36)	21.1 (0.98)
2016 full year	15.2 (0.55)	63.2 (0.66)	3.8 (0.18)	22.8 (0.60)
Quarter 1	15.1 (0.87)	64.1 (1.07)	3.1 (0.37)	21.7 (1.04)
Quarter 2	16.3 (0.91)	61.2 (1.15)	3.9 (0.45)	24.0 (1.09)
Quarter 3	13.9 (0.80)	63.0 (1.14)	3.9 (0.42)	24.3 (1.04)
Quarter 4	15.4 (1.04)	64.5 (1.46)	4.1 (0.39)	21.1 (1.15)
30-64 years				
2010 full year	19.1 (0.36)	67.9 (0.49)	...	14.5 (0.31)
Quarter 1	18.2 (0.64)	69.8 (0.88)	...	13.6 (0.53)
Quarter 2	20.0 (0.83)	67.7 (0.95)	...	13.9 (0.48)
Quarter 3	19.7 (0.64)	67.2 (0.79)	...	14.5 (0.54)
Quarter 4	18.6 (0.59)	67.0 (0.82)	...	16.0 (0.56)
2011 full year	18.9 (0.34)	67.0 (0.44)	...	15.6 (0.29)
Quarter 1	19.2 (0.62)	67.0 (0.79)	...	15.4 (0.52)
Quarter 2	18.9 (0.60)	67.0 (0.80)	...	15.5 (0.52)
Quarter 3	18.8 (0.58)	67.3 (0.82)	...	15.5 (0.50)
Quarter 4	18.7 (0.59)	67.0 (0.84)	...	16.0 (0.58)
2012 full year	18.7 (0.31)	66.8 (0.43)	...	16.0 (0.30)
Quarter 1	19.4 (0.65)	66.7 (0.85)	...	15.3 (0.52)
Quarter 2	17.7 (0.54)	68.6 (0.78)	...	15.4 (0.51)
Quarter 3	18.6 (0.58)	66.4 (0.80)	...	16.6 (0.57)
Quarter 4	19.2 (0.53)	65.3 (0.72)	...	16.8 (0.53)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–December 2016—Continued

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2013 full year	18.3 (0.36)	66.6 (0.47)	...	16.7 (0.31)
Quarter 1	18.9 (0.68)	66.4 (0.84)	...	16.4 (0.56)
Quarter 2	18.1 (0.59)	67.5 (0.75)	...	16.1 (0.52)
Quarter 3	18.7 (0.57)	66.5 (0.76)	...	16.6 (0.52)
Quarter 4	17.8 (0.63)	66.2 (0.88)	...	17.6 (0.59)
2014 full year	14.7 (0.30)	69.4 (0.43)	2.9 (0.13)	17.3 (0.33)
Quarter 1	17.1 (0.58)	67.8 (0.74)	1.8 (0.16)	16.5 (0.54)
Quarter 2	14.1 (0.57)	69.6 (0.75)	3.1 (0.23)	17.7 (0.57)
Quarter 3	14.3 (0.51)	69.9 (0.81)	3.4 (0.27)	17.3 (0.57)
Quarter 4	13.7 (0.53)	70.2 (0.85)	3.1 (0.22)	17.7 (0.66)
2015 full year	11.5 (0.25)	71.7 (0.43)	4.9 (0.17)	18.5 (0.36)
Quarter 1	11.5 (0.45)	72.7 (0.76)	4.9 (0.28)	17.5 (0.60)
Quarter 2	11.4 (0.45)	72.7 (0.72)	5.1 (0.30)	17.6 (0.61)
Quarter 3	11.9 (0.52)	70.4 (0.88)	5.2 (0.31)	19.3 (0.71)
Quarter 4	11.2 (0.48)	70.9 (0.86)	4.3 (0.32)	19.4 (0.74)
2016 full year	11.4 (0.34)	71.3 (0.39)	5.1 (0.17)	19.0 (0.38)
Quarter 1	10.8 (0.45)	72.5 (0.72)	5.3 (0.29)	18.7 (0.57)
Quarter 2	11.7 (0.49)	70.5 (0.61)	5.1 (0.31)	19.3 (0.58)
Quarter 3	11.5 (0.49)	70.8 (0.62)	5.1 (0.35)	19.5 (0.55)
Quarter 4	11.7 (0.52)	71.5 (0.64)	5.0 (0.30)	18.4 (0.55)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

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Table 3. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–December 2016

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	22.3 (0.35)	64.1 (0.46)	...	15.0 (0.30)
Quarter 1	21.5 (0.66)	65.5 (0.88)	...	14.4 (0.54)
Quarter 2	23.2 (0.80)	64.0 (0.89)	...	14.0 (0.44)
Quarter 3	23.0 (0.58)	63.2 (0.73)	...	15.0 (0.51)
Quarter 4	21.4 (0.60)	63.6 (0.81)	...	16.4 (0.53)
2011 full year	21.3 (0.34)	64.2 (0.45)	...	15.9 (0.29)
Quarter 1	21.6 (0.59)	64.0 (0.79)	...	15.9 (0.50)
Quarter 2	21.2 (0.59)	64.5 (0.79)	...	15.6 (0.47)
Quarter 3	21.3 (0.62)	64.2 (0.84)	...	15.9 (0.52)
Quarter 4	21.0 (0.62)	64.3 (0.78)	...	16.2 (0.51)
2012 full year	20.9 (0.31)	64.1 (0.42)	...	16.4 (0.29)
Quarter 1	21.7 (0.66)	63.6 (0.84)	...	16.0 (0.51)
Quarter 2	19.6 (0.59)	65.9 (0.83)	...	16.0 (0.51)
Quarter 3	20.9 (0.57)	63.5 (0.79)	...	17.0 (0.55)
Quarter 4	21.3 (0.58)	63.3 (0.73)	...	16.8 (0.50)
2013 full year	20.4 (0.37)	64.2 (0.47)	...	16.7 (0.30)
Quarter 1	20.9 (0.64)	63.6 (0.79)	...	16.9 (0.54)
Quarter 2	19.9 (0.58)	65.1 (0.74)	...	16.3 (0.51)
Quarter 3	20.6 (0.59)	64.5 (0.74)	...	16.4 (0.48)
Quarter 4	20.1 (0.64)	63.8 (0.87)	...	17.3 (0.57)
2014 full year	16.3 (0.31)	67.3 (0.43)	2.7 (0.11)	17.7 (0.32)
Quarter 1	18.4 (0.55)	65.6 (0.76)	1.7 (0.13)	17.1 (0.53)
Quarter 2	15.6 (0.57)	67.7 (0.73)	2.9 (0.21)	18.0 (0.53)
Quarter 3	16.2 (0.53)	67.6 (0.80)	3.1 (0.23)	17.6 (0.53)
Quarter 4	15.1 (0.52)	68.1 (0.81)	2.9 (0.19)	18.2 (0.62)
2015 full year	12.8 (0.27)	69.7 (0.43)	4.5 (0.16)	18.9 (0.36)
Quarter 1	13.0 (0.45)	70.4 (0.77)	4.4 (0.27)	18.1 (0.62)
Quarter 2	12.4 (0.43)	70.8 (0.71)	4.8 (0.27)	18.3 (0.60)
Quarter 3	13.2 (0.51)	68.8 (0.83)	4.9 (0.29)	19.4 (0.66)
Quarter 4	12.6 (0.52)	69.0 (0.84)	3.9 (0.27)	19.9 (0.66)
2016 full year	12.4 (0.36)	69.2 (0.41)	4.7 (0.15)	20.0 (0.38)
Quarter 1	11.9 (0.47)	70.2 (0.70)	4.7 (0.27)	19.5 (0.51)
Quarter 2	12.9 (0.52)	68.1 (0.62)	4.8 (0.28)	20.5 (0.62)
Quarter 3	12.1 (0.48)	68.8 (0.66)	4.8 (0.30)	20.8 (0.56)
Quarter 4	12.7 (0.56)	69.6 (0.70)	4.8 (0.26)	19.1 (0.57)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–December 2016

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Male				
2010 full year	25.3 (0.44)	63.4 (0.51)	...	12.5 (0.30)
Quarter 1	24.7 (0.84)	64.7 (0.93)	...	12.0 (0.54)
Quarter 2	26.4 (0.93)	63.5 (0.99)	...	11.2 (0.49)
Quarter 3	26.3 (0.75)	62.2 (0.82)	...	12.6 (0.50)
Quarter 4	24.0 (0.74)	63.3 (0.87)	...	14.1 (0.55)
2011 full year	23.7 (0.40)	63.9 (0.49)	...	13.8 (0.30)
Quarter 1	24.0 (0.72)	63.7 (0.86)	...	13.6 (0.52)
Quarter 2	23.8 (0.72)	64.0 (0.92)	...	13.5 (0.51)
Quarter 3	23.4 (0.75)	64.2 (0.90)	...	14.0 (0.52)
Quarter 4	23.6 (0.69)	63.8 (0.82)	...	14.0 (0.53)
2012 full year	23.2 (0.38)	64.0 (0.46)	...	14.2 (0.31)
Quarter 1	24.0 (0.78)	63.6 (0.92)	...	13.8 (0.54)
Quarter 2	21.6 (0.68)	66.1 (0.90)	...	13.9 (0.58)
Quarter 3	23.5 (0.71)	63.5 (0.82)	...	14.3 (0.57)
Quarter 4	23.8 (0.71)	62.7 (0.84)	...	14.5 (0.54)
2013 full year	22.5 (0.42)	64.6 (0.49)	...	14.2 (0.32)
Quarter 1	23.3 (0.80)	63.9 (0.90)	...	14.3 (0.58)
Quarter 2	22.7 (0.72)	64.3 (0.84)	...	14.2 (0.58)
Quarter 3	22.3 (0.70)	65.0 (0.80)	...	14.1 (0.54)
Quarter 4	21.9 (0.78)	65.0 (0.90)	...	14.3 (0.56)
2014 full year	18.3 (0.38)	67.7 (0.47)	2.4 (0.12)	15.2 (0.36)
Quarter 1	20.0 (0.66)	66.3 (0.84)	1.6 (0.14)	14.9 (0.59)
Quarter 2	17.8 (0.72)	67.8 (0.79)	2.7 (0.24)	15.7 (0.64)
Quarter 3	18.1 (0.66)	67.8 (0.85)	2.7 (0.24)	15.4 (0.58)
Quarter 4	17.3 (0.65)	68.7 (0.92)	2.8 (0.21)	15.1 (0.66)
2015 full year	14.9 (0.31)	69.9 (0.47)	4.1 (0.18)	16.6 (0.37)
Quarter 1	15.2 (0.55)	70.6 (0.88)	3.9 (0.31)	15.6 (0.69)
Quarter 2	14.3 (0.53)	71.6 (0.81)	4.7 (0.30)	15.4 (0.62)
Quarter 3	15.8 (0.65)	68.3 (0.88)	4.1 (0.32)	17.3 (0.66)
Quarter 4	14.3 (0.67)	69.1 (0.96)	3.7 (0.32)	18.2 (0.74)
2016 full year	14.4 (0.42)	69.8 (0.41)	4.7 (0.16)	17.4 (0.38)
Quarter 1	13.8 (0.57)	71.0 (0.73)	4.5 (0.30)	16.9 (0.53)
Quarter 2	15.1 (0.69)	68.7 (0.68)	4.5 (0.30)	17.7 (0.75)
Quarter 3	14.2 (0.54)	69.2 (0.77)	4.9 (0.32)	18.1 (0.62)
Quarter 4	14.6 (0.65)	70.1 (0.72)	4.7 (0.29)	16.8 (0.61)
Female				
2010 full year	19.3 (0.32)	64.7 (0.47)	...	17.4 (0.38)
Quarter 1	18.4 (0.65)	66.2 (0.95)	...	16.8 (0.68)
Quarter 2	20.1 (0.76)	64.5 (0.92)	...	16.8 (0.55)
Quarter 3	19.7 (0.57)	64.2 (0.80)	...	17.3 (0.67)
Quarter 4	18.8 (0.60)	64.0 (0.87)	...	18.6 (0.68)

See footnotes at end of table.

Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–December 2016—Continued

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	18.9 (0.36)	64.5 (0.47)	...	18.0 (0.34)
Quarter 1	19.2 (0.59)	64.3 (0.86)	...	18.1 (0.62)
Quarter 2	18.6 (0.59)	64.9 (0.81)	...	17.8 (0.57)
Quarter 3	19.3 (0.64)	64.1 (0.89)	...	17.8 (0.65)
Quarter 4	18.4 (0.71)	64.8 (0.93)	...	18.4 (0.66)
2012 full year	18.6 (0.33)	64.2 (0.44)	...	18.6 (0.34)
Quarter 1	19.6 (0.66)	63.5 (0.90)	...	18.0 (0.61)
Quarter 2	17.7 (0.60)	65.8 (0.86)	...	18.0 (0.57)
Quarter 3	18.5 (0.61)	63.5 (0.88)	...	19.5 (0.66)
Quarter 4	18.8 (0.59)	63.9 (0.76)	...	18.9 (0.59)
2013 full year	18.3 (0.37)	64.0 (0.51)	...	19.1 (0.36)
Quarter 1	18.7 (0.62)	63.4 (0.85)	...	19.3 (0.65)
Quarter 2	17.3 (0.57)	65.9 (0.79)	...	18.4 (0.59)
Quarter 3	18.9 (0.60)	63.9 (0.81)	...	18.7 (0.57)
Quarter 4	18.4 (0.67)	62.6 (0.96)	...	20.2 (0.73)
2014 full year	14.3 (0.30)	66.9 (0.46)	2.9 (0.13)	20.1 (0.36)
Quarter 1	16.8 (0.59)	65.1 (0.86)	1.8 (0.18)	19.3 (0.62)
Quarter 2	13.5 (0.56)	67.6 (0.84)	3.1 (0.23)	20.2 (0.64)
Quarter 3	14.3 (0.52)	67.4 (0.89)	3.5 (0.28)	19.7 (0.66)
Quarter 4	12.9 (0.54)	67.6 (0.85)	3.1 (0.23)	21.2 (0.73)
2015 full year	10.8 (0.29)	69.6 (0.47)	4.8 (0.17)	21.2 (0.42)
Quarter 1	10.9 (0.46)	70.2 (0.80)	4.8 (0.30)	20.5 (0.69)
Quarter 2	10.6 (0.45)	70.0 (0.75)	4.8 (0.32)	21.1 (0.71)
Quarter 3	10.8 (0.53)	69.3 (0.95)	5.6 (0.35)	21.5 (0.81)
Quarter 4	10.9 (0.53)	68.8 (0.89)	4.2 (0.31)	21.5 (0.76)
2016 full year	10.5 (0.36)	68.6 (0.48)	4.8 (0.16)	22.5 (0.45)
Quarter 1	10.1 (0.49)	69.5 (0.84)	4.8 (0.31)	22.0 (0.66)
Quarter 2	10.8 (0.47)	67.5 (0.79)	5.0 (0.33)	23.2 (0.71)
Quarter 3	10.2 (0.54)	68.3 (0.75)	4.7 (0.35)	23.4 (0.63)
Quarter 4	10.8 (0.60)	69.2 (0.87)	4.8 (0.29)	21.3 (0.73)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

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SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

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Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–December 2016

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Hispanic or Latino ⁵				
2010 full year	43.2 (0.91)	41.1 (0.85)	...	16.3 (0.64)
Quarter 1	42.4 (1.72)	42.9 (1.67)	...	15.4 (1.10)
Quarter 2	44.9 (1.39)	39.7 (1.37)	...	15.8 (0.92)
Quarter 3	44.1 (1.78)	40.5 (1.69)	...	15.8 (0.98)
Quarter 4	41.5 (1.38)	41.1 (1.45)	...	18.1 (1.00)
2011 full year	42.2 (0.89)	40.3 (0.82)	...	18.1 (0.63)
Quarter 1	42.0 (1.60)	41.2 (1.95)	...	17.1 (1.18)
Quarter 2	41.4 (1.46)	40.2 (1.31)	...	19.0 (0.86)
Quarter 3	42.6 (1.38)	39.5 (1.41)	...	18.6 (1.10)
Quarter 4	42.7 (1.57)	40.2 (1.39)	...	17.6 (1.00)
2012 full year	41.3 (0.89)	40.4 (0.73)	...	19.0 (0.64)
Quarter 1	42.6 (1.72)	41.0 (1.68)	...	17.1 (1.02)
Quarter 2	39.7 (1.29)	42.0 (1.49)	...	19.3 (1.04)
Quarter 3	40.5 (1.55)	39.8 (1.34)	...	20.1 (1.39)
Quarter 4	42.2 (1.58)	38.8 (1.42)	...	19.7 (1.03)
2013 full year	40.6 (0.88)	42.1 (0.70)	...	18.0 (0.62)
Quarter 1	41.4 (1.95)	40.7 (1.52)	...	18.6 (1.17)
Quarter 2	41.3 (1.51)	41.9 (1.24)	...	17.5 (0.94)
Quarter 3	39.5 (1.38)	43.0 (1.49)	...	18.1 (1.11)
Quarter 4	40.3 (1.47)	42.7 (1.40)	...	17.7 (0.95)
2014 full year	33.7 (0.76)	46.4 (0.86)	2.6 (0.30)	20.6 (0.73)
Quarter 1	35.7 (1.43)	44.8 (1.62)	1.4 (0.30)	20.1 (1.09)
Quarter 2	33.2 (1.42)	47.2 (1.55)	3.0 (0.61)	20.3 (1.16)
Quarter 3	34.0 (1.40)	46.8 (1.44)	3.4 (0.55)	19.8 (1.12)
Quarter 4	31.8 (1.47)	47.0 (1.54)	2.6 (0.37)	22.1 (1.22)
2015 full year	27.7 (0.72)	50.0 (0.85)	5.1 (0.40)	23.0 (0.84)
Quarter 1	28.3 (1.24)	49.8 (1.42)	5.4 (0.55)	22.7 (1.26)
Quarter 2	26.1 (1.30)	53.2 (1.46)	4.2 (0.58)	21.4 (1.28)
Quarter 3	29.3 (1.33)	48.2 (1.40)	5.3 (0.65)	23.1 (1.25)
Quarter 4	27.2 (1.36)	48.8 (1.56)	5.4 (0.66)	24.7 (1.41)
2016 full year	25.0 (1.20)	51.4 (1.08)	5.2 (0.40)	24.9 (1.15)
Quarter 1	24.5 (1.31)	51.6 (1.88)	5.1 (0.65)	25.2 (1.72)
Quarter 2	25.1 (1.93)	50.4 (2.23)	5.0 (0.76)	25.4 (2.08)
Quarter 3	24.5 (1.74)	50.6 (1.78)	5.1 (0.81)	26.7 (1.52)
Quarter 4	25.9 (1.79)	53.1 (1.60)	5.8 (0.81)	22.3 (1.24)
Non-Hispanic white, single race				
2010 full year	16.4 (0.35)	72.2 (0.52)	...	12.8 (0.34)
Quarter 1	15.6 (0.63)	73.4 (0.93)	...	12.5 (0.60)
Quarter 2	17.0 (0.65)	72.7 (0.83)	...	11.7 (0.49)
Quarter 3	16.7 (0.64)	71.5 (0.92)	...	13.0 (0.63)
Quarter 4	16.1 (0.66)	71.4 (0.89)	...	14.1 (0.61)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–December 2016—Continued

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	15.6 (0.35)	72.5 (0.48)	...	13.4 (0.31)
Quarter 1	16.1 (0.64)	71.8 (0.87)	...	13.6 (0.57)
Quarter 2	15.8 (0.60)	72.9 (0.85)	...	12.6 (0.50)
Quarter 3	15.7 (0.64)	72.6 (0.86)	...	13.3 (0.61)
Quarter 4	14.8 (0.59)	72.8 (0.94)	...	14.1 (0.62)
2012 full year	15.1 (0.31)	72.7 (0.46)	...	13.7 (0.33)
Quarter 1	16.0 (0.67)	72.3 (0.88)	...	13.1 (0.58)
Quarter 2	14.2 (0.62)	74.5 (0.83)	...	13.1 (0.51)
Quarter 3	15.1 (0.58)	71.9 (0.87)	...	14.7 (0.61)
Quarter 4	15.1 (0.59)	72.3 (0.85)	...	13.9 (0.57)
2013 full year	14.5 (0.34)	72.7 (0.49)	...	14.4 (0.32)
Quarter 1	15.2 (0.62)	71.8 (0.91)	...	14.6 (0.62)
Quarter 2	13.9 (0.54)	73.6 (0.82)	...	14.2 (0.61)
Quarter 3	14.7 (0.61)	72.8 (0.80)	...	14.0 (0.52)
Quarter 4	14.0 (0.61)	72.6 (0.96)	...	14.7 (0.67)
2014 full year	11.6 (0.29)	75.3 (0.47)	2.5 (0.13)	14.6 (0.36)
Quarter 1	13.5 (0.58)	73.7 (0.87)	1.6 (0.16)	14.1 (0.66)
Quarter 2	11.1 (0.58)	75.5 (0.81)	2.6 (0.23)	14.9 (0.61)
Quarter 3	11.4 (0.52)	75.6 (0.88)	2.9 (0.28)	14.6 (0.67)
Quarter 4	10.5 (0.55)	76.2 (0.93)	2.8 (0.24)	14.8 (0.71)
2015 full year	8.7 (0.25)	77.3 (0.47)	4.3 (0.18)	15.7 (0.42)
Quarter 1	8.7 (0.50)	78.6 (0.78)	4.0 (0.30)	14.4 (0.63)
Quarter 2	8.8 (0.47)	78.0 (0.78)	4.7 (0.33)	14.9 (0.68)
Quarter 3	8.9 (0.48)	75.7 (0.93)	4.6 (0.39)	17.0 (0.80)
Quarter 4	8.3 (0.55)	77.0 (0.96)	3.7 (0.36)	16.2 (0.81)
2016 full year	8.6 (0.25)	76.6 (0.38)	4.6 (0.16)	16.6 (0.34)
Quarter 1	8.4 (0.47)	77.8 (0.60)	4.4 (0.32)	15.7 (0.55)
Quarter 2	9.0 (0.41)	75.0 (0.72)	4.7 (0.30)	17.6 (0.59)
Quarter 3	7.9 (0.41)	76.7 (0.67)	4.7 (0.35)	17.1 (0.60)
Quarter 4	8.9 (0.44)	76.8 (0.59)	4.7 (0.29)	15.9 (0.57)
Non-Hispanic black, single race				
2010 full year	27.2 (0.75)	49.3 (0.81)	...	25.3 (0.70)
Quarter 1	27.9 (1.41)	49.5 (1.60)	...	24.3 (1.41)
Quarter 2	26.5 (1.33)	49.4 (1.72)	...	25.7 (1.32)
Quarter 3	28.6 (1.14)	48.6 (1.35)	...	24.8 (1.31)
Quarter 4	25.6 (1.33)	49.6 (1.80)	...	26.3 (1.46)
2011 full year	24.8 (0.65)	50.5 (0.79)	...	26.2 (0.75)
Quarter 1	23.9 (1.26)	52.2 (1.67)	...	25.8 (1.18)
Quarter 2	24.2 (1.24)	51.1 (1.55)	...	26.5 (1.44)
Quarter 3	25.0 (1.16)	50.1 (1.49)	...	25.9 (1.27)
Quarter 4	26.2 (1.44)	48.8 (1.57)	...	26.6 (1.49)
2012 full year	23.6 (0.61)	50.8 (0.75)	...	27.0 (0.68)
Quarter 1	26.0 (1.19)	46.3 (1.50)	...	29.1 (1.21)
Quarter 2	21.9 (1.34)	53.1 (1.93)	...	25.8 (1.40)
Quarter 3	24.1 (1.05)	51.7 (1.47)	...	25.7 (1.27)
Quarter 4	22.6 (1.25)	52.2 (1.52)	...	27.3 (1.34)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–December 2016—Continued

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2013 full year	24.9 (0.62)	50.0 (0.91)	...	26.6 (0.80)
Quarter 1	25.5 (1.16)	50.6 (1.58)	...	25.0 (1.37)
Quarter 2	23.6 (1.23)	50.8 (1.68)	...	26.7 (1.32)
Quarter 3	25.9 (1.23)	50.3 (1.45)	...	26.0 (1.25)
Quarter 4	24.6 (1.39)	48.3 (1.70)	...	28.7 (1.55)
2014 full year	17.7 (0.60)	53.4 (0.84)	2.9 (0.27)	30.5 (0.73)
Quarter 1	20.2 (1.16)	51.6 (1.67)	1.4 (0.38)	29.7 (1.30)
Quarter 2	15.9 (1.04)	54.4 (1.73)	3.7 (0.51)	31.1 (1.53)
Quarter 3	17.5 (1.00)	52.6 (1.81)	3.3 (0.48)	31.5 (1.54)
Quarter 4	17.2 (1.16)	55.0 (1.82)	3.3 (0.55)	29.8 (1.59)
2015 full year	14.4 (0.57)	57.8 (0.90)	4.0 (0.34)	29.7 (0.84)
Quarter 1	15.6 (1.00)	56.7 (1.50)	4.1 (0.73)	29.7 (1.46)
Quarter 2	13.5 (0.97)	57.9 (1.72)	4.2 (0.61)	30.5 (1.37)
Quarter 3	14.7 (1.17)	60.3 (1.55)	4.4 (0.53)	27.2 (1.18)
Quarter 4	14.0 (1.14)	56.5 (1.99)	3.2 (0.48)	31.4 (1.89)
2016 full year	15.0 (0.62)	56.7 (0.95)	4.1 (0.36)	29.9 (1.06)
Quarter 1	13.0 (1.34)	58.8 (1.86)	4.6 (0.63)	29.6 (1.66)
Quarter 2	16.7 (1.17)	55.7 (1.96)	4.7 (0.66)	29.4 (1.84)
Quarter 3	15.7 (1.20)	56.7 (1.70)	3.6 (0.71)	29.7 (1.47)
Quarter 4	14.6 (1.29)	55.6 (1.68)	3.7 (0.56)	31.1 (1.55)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

⁵Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–December 2016

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
Poor (<100% FPL)				
2010 full year	42.2 (0.99)	19.6 (0.89)	...	38.8 (0.97)
Quarter 1	44.0 (1.79)	17.6 (0.68)	...	39.1 (1.82)
Quarter 2	43.5 (1.87)	19.4 (1.67)	...	37.5 (1.83)
Quarter 3	43.7 (1.75)	17.0 (1.50)	...	40.0 (1.75)
Quarter 4	38.1 (1.58)	24.1 (1.61)	...	38.6 (1.74)
2011 full year	40.1 (0.91)	21.2 (1.02)	...	39.6 (0.93)
Quarter 1	39.8 (0.64)	21.6 (1.79)	...	39.3 (1.67)
Quarter 2	37.2 (1.83)	23.8 (2.48)	...	39.9 (1.87)
Quarter 3	42.2 (1.84)	17.1 (1.86)	...	41.7 (1.64)
Quarter 4	41.1 (1.84)	22.1 (1.98)	...	37.5 (1.83)
2012 full year	40.1 (0.90)	20.2 (1.09)	...	40.8 (0.94)
Quarter 1	42.7 (1.62)	19.6 (1.69)	...	38.6 (1.60)
Quarter 2	38.9 (2.03)	21.0 (3.13)	...	41.3 (1.71)
Quarter 3	41.0 (1.43)	17.2 (1.46)	...	42.3 (1.82)
Quarter 4	37.6 (1.58)	22.6 (1.96)	...	40.9 (1.62)
2013 full year	39.3 (1.00)	19.0 (0.97)	...	42.4 (0.95)
Quarter 1	39.1 (1.74)	19.5 (1.87)	...	42.4 (1.91)
Quarter 2	38.9 (1.79)	19.0 (2.22)	...	42.7 (1.76)
Quarter 3	40.2 (1.90)	18.1 (2.26)	...	42.3 (1.76)
Quarter 4	39.2 (1.77)	19.3 (1.70)	...	42.3 (1.77)
2014 full year	32.3 (0.93)	21.9 (0.92)	2.2 (0.20)	46.6 (0.95)
Quarter 1	34.9 (1.53)	20.5 (1.59)	1.0 (0.27)	45.4 (1.74)
Quarter 2	33.5 (2.03)	20.2 (1.61)	2.5 (0.49)	47.0 (2.11)
Quarter 3	32.0 (1.78)	21.5 (2.06)	2.1 (0.37)	47.5 (1.70)
Quarter 4	29.1 (1.72)	25.1 (2.00)	3.2 (0.50)	46.5 (1.88)
2015 full year	25.2 (0.90)	24.3 (1.04)	3.8 (0.39)	51.7 (1.08)
Quarter 1	28.0 (1.57)	23.1 (1.50)	3.6 (0.65)	50.3 (2.06)
Quarter 2	25.0 (1.51)	24.6 (1.97)	4.3 (0.85)	51.6 (1.93)
Quarter 3	25.2 (1.70)	23.5 (2.67)	4.6 (0.82)	52.7 (2.55)
Quarter 4	22.4 (1.63)	25.9 (2.20)	2.7 (0.53)	52.4 (1.95)
2016 full year	26.2 (1.31)	21.6 (0.92)	2.9 (0.27)	53.7 (1.29)
Quarter 1	24.7 (1.61)	23.8 (1.70)	2.9 (0.45)	52.8 (1.77)
Quarter 2	27.2 (2.05)	19.3 (1.49)	2.4 (0.47)	54.6 (2.25)
Quarter 3	26.2 (2.08)	18.4 (1.60)	2.6 (0.42)	57.6 (2.23)
Quarter 4	26.7 (2.03)	24.6 (1.62)	3.7 (0.64)	50.0 (1.98)
Near poor (≥100% and <200% FPL)				
2010 full year	43.0 (0.74)	34.7 (0.74)	...	23.7 (0.55)
Quarter 1	43.8 (1.41)	34.8 (1.48)	...	22.8 (1.15)
Quarter 2	44.2 (1.52)	35.0 (1.44)	...	22.1 (1.17)
Quarter 3	43.9 (1.50)	34.3 (1.54)	...	23.5 (1.14)
Quarter 4	40.2 (1.51)	34.8 (1.59)	...	26.6 (1.35)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–December 2016—Continued

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
2011 full year	40.1 (0.72)	35.4 (0.75)	...	25.9 (0.69)
Quarter 1	40.3 (1.24)	36.1 (1.37)	...	25.4 (1.21)
Quarter 2	42.1 (1.41)	33.5 (1.32)	...	25.7 (1.14)
Quarter 3	39.0 (1.31)	36.0 (1.34)	...	26.0 (1.25)
Quarter 4	39.2 (1.49)	35.9 (1.40)	...	26.5 (1.27)
2012 full year	39.2 (0.68)	37.2 (0.74)	...	25.2 (0.57)
Quarter 1	41.0 (1.28)	35.8 (1.44)	...	24.4 (1.13)
Quarter 2	37.8 (1.42)	38.4 (1.46)	...	25.7 (1.12)
Quarter 3	38.0 (1.51)	38.6 (1.62)	...	25.1 (1.16)
Quarter 4	40.0 (1.44)	35.9 (1.45)	...	25.4 (1.21)
2013 full year	38.5 (0.84)	36.4 (0.78)	...	26.6 (0.78)
Quarter 1	39.2 (1.42)	33.8 (1.38)	...	28.4 (1.42)
Quarter 2	38.4 (1.55)	37.9 (1.50)	...	25.4 (1.33)
Quarter 3	37.9 (1.34)	39.3 (1.39)	...	24.1 (1.19)
Quarter 4	38.6 (1.42)	34.6 (1.38)	...	28.5 (1.44)
2014 full year	30.9 (0.72)	41.2 (0.81)	4.5 (0.33)	29.6 (0.76)
Quarter 1	34.4 (1.58)	39.3 (1.53)	2.2 (0.40)	27.5 (1.24)
Quarter 2	28.5 (1.20)	43.5 (1.38)	5.1 (0.56)	29.6 (1.21)
Quarter 3	31.3 (1.32)	42.1 (1.43)	5.3 (0.70)	28.7 (1.27)
Quarter 4	29.2 (1.31)	40.0 (1.47)	5.2 (0.66)	32.6 (1.41)
2015 full year	24.1 (0.62)	43.8 (0.79)	7.9 (0.48)	34.2 (0.80)
Quarter 1	23.8 (1.14)	45.9 (1.43)	8.6 (0.92)	32.8 (1.43)
Quarter 2	24.0 (1.17)	45.8 (1.47)	8.6 (0.88)	32.5 (1.42)
Quarter 3	24.4 (1.22)	41.3 (1.54)	7.3 (0.99)	36.1 (1.47)
Quarter 4	24.2 (1.35)	42.4 (1.68)	7.0 (0.82)	35.5 (1.69)
2016 full year	23.2 (0.76)	40.3 (0.95)	7.5 (0.51)	38.5 (0.91)
Quarter 1	23.6 (1.33)	43.0 (1.86)	7.0 (0.90)	36.2 (1.78)
Quarter 2	23.4 (1.28)	39.1 (1.40)	7.5 (0.75)	39.2 (1.39)
Quarter 3	22.0 (1.40)	39.2 (1.37)	7.2 (0.91)	40.5 (1.64)
Quarter 4	23.8 (1.34)	39.8 (1.72)	8.3 (0.97)	38.1 (1.59)
Not poor (≥200% FPL)				
2010 full year	12.6 (0.27)	80.8 (0.36)	...	8.1 (0.27)
Quarter 1	11.5 (0.50)	82.2 (0.66)	...	7.8 (0.45)
Quarter 2	13.2 (0.57)	80.8 (0.66)	...	7.4 (0.36)
Quarter 3	13.2 (0.57)	80.1 (0.65)	...	8.1 (0.51)
Quarter 4	12.4 (0.54)	80.1 (0.69)	...	9.0 (0.46)
2011 full year	12.0 (0.28)	81.1 (0.35)	...	8.3 (0.23)
Quarter 1	12.0 (0.55)	81.1 (0.64)	...	8.3 (0.40)
Quarter 2	12.5 (0.49)	80.5 (0.64)	...	8.4 (0.39)
Quarter 3	12.0 (0.49)	81.5 (0.64)	...	8.0 (0.39)
Quarter 4	11.6 (0.50)	81.4 (0.66)	...	8.6 (0.43)
2012 full year	11.4 (0.26)	81.3 (0.38)	...	8.7 (0.29)
Quarter 1	11.5 (0.52)	81.4 (0.68)	...	8.5 (0.52)
Quarter 2	11.3 (0.52)	81.7 (0.68)	...	8.5 (0.44)
Quarter 3	11.3 (0.44)	81.0 (0.64)	...	9.3 (0.51)
Quarter 4	11.7 (0.44)	80.9 (0.62)	...	8.7 (0.49)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–December 2016—Continued

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
2013 full year	11.4 (0.27)	81.2 (0.37)	...	8.9 (0.26)
Quarter 1	11.7 (0.56)	81.7 (0.74)	...	8.1 (0.47)
Quarter 2	11.4 (0.48)	81.0 (0.62)	...	9.0 (0.45)
Quarter 3	12.0 (0.54)	80.0 (0.66)	...	9.6 (0.44)
Quarter 4	10.5 (0.59)	82.0 (0.73)	...	8.8 (0.47)
2014 full year	8.9 (0.23)	83.9 (0.35)	2.3 (0.12)	8.5 (0.26)
Quarter 1	10.1 (0.48)	83.0 (0.62)	1.7 (0.18)	8.1 (0.44)
Quarter 2	8.6 (0.43)	83.0 (0.64)	2.5 (0.23)	9.7 (0.48)
Quarter 3	8.5 (0.40)	84.4 (0.57)	2.7 (0.27)	8.3 (0.42)
Quarter 4	8.3 (0.44)	85.1 (0.61)	2.4 (0.22)	8.0 (0.46)
2015 full year	7.6 (0.22)	84.7 (0.33)	3.8 (0.17)	9.1 (0.27)
Quarter 1	7.5 (0.42)	85.3 (0.65)	3.5 (0.28)	8.6 (0.49)
Quarter 2	7.5 (0.36)	85.2 (0.56)	3.8 (0.28)	8.8 (0.46)
Quarter 3	8.1 (0.46)	83.8 (0.64)	4.3 (0.32)	9.6 (0.46)
Quarter 4	7.3 (0.47)	84.7 (0.68)	3.4 (0.32)	9.3 (0.54)
2016 full year	7.2 (0.25)	84.6 (0.29)	4.3 (0.16)	9.6 (0.22)
Quarter 1	6.5 (0.37)	85.9 (0.54)	4.4 (0.32)	9.0 (0.36)
Quarter 2	7.5 (0.42)	83.9 (0.51)	4.3 (0.27)	10.0 (0.45)
Quarter 3	7.1 (0.43)	84.6 (0.49)	4.4 (0.33)	10.0 (0.41)
Quarter 4	7.8 (0.36)	84.1 (0.58)	4.2 (0.27)	9.5 (0.47)

... Category not applicable.

¹Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 12.2% in 2010, 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, 8.8% in 2015 and 7.8% in 2016. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

²A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

⁴Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁵Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

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Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–December 2016

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Age group		
Under age 65		
2014 full year	2.2 (0.10)	5.9
Quarter 1	1.4 (0.11)	3.7
Quarter 2	2.4 (0.17)	6.3
Quarter 3	2.5 (0.20)	6.8
Quarter 4	2.5 (0.18)	6.7
2015 full year	3.8 (0.14)	10.2
Quarter 1	3.6 (0.22)	9.7
Quarter 2	4.0 (0.24)	10.7
Quarter 3	4.2 (0.29)	11.3
Quarter 4	3.4 (0.24)	9.1
2016 full year	4.1 (0.13)	11.2
Quarter 1	4.0 (0.23)	10.8
Quarter 2	4.1 (0.26)	11.1
Quarter 3	4.1 (0.29)	11.1
Quarter 4	4.3 (0.26)	11.6
Age 0–17		
2014 full year	0.9 (0.11)	0.7
Quarter 1	0.5 (0.14)	0.4
Quarter 2	1.0 (0.17)	0.7
Quarter 3	1.0 (0.19)	0.8
Quarter 4	1.3 (0.28)	0.9
2015 full year	2.0 (0.18)	1.4
Quarter 1	1.6 (0.23)	1.2
Quarter 2	1.9 (0.29)	1.4
Quarter 3	2.5 (0.39)	1.8
Quarter 4	1.9 (0.32)	1.4
2016 full year	2.5 (0.17)	1.8
Quarter 1	2.2 (0.27)	1.6
Quarter 2	2.4 (0.32)	1.8
Quarter 3	2.4 (0.38)	1.7
Quarter 4	3.0 (0.37)	2.2
Age 18–64		
2014 full year	2.7 (0.11)	5.2
Quarter 1	1.7 (0.13)	3.3
Quarter 2	2.9 (0.21)	5.7
Quarter 3	3.1 (0.23)	6.1
Quarter 4	2.9 (0.19)	5.7
2015 full year	4.5 (0.16)	8.8
Quarter 1	4.4 (0.27)	8.6
Quarter 2	4.8 (0.27)	9.3
Quarter 3	4.9 (0.29)	9.5
Quarter 4	3.9 (0.27)	7.8

See footnotes at the end of the table.

Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–December 2016—continued

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2016 full year	4.7 (0.15)	9.4
Quarter 1	4.7 (0.27)	9.2
Quarter 2	4.8 (0.28)	9.4
Quarter 3	4.8 (0.30)	9.4
Quarter 4	4.8 (0.26)	9.4
Age 18–29		
2014 full year	2.1 (0.14)	1.1
Quarter 1	1.3 (0.21)	0.6
Quarter 2	2.4 (0.31)	1.2
Quarter 3	2.3 (0.28)	1.2
Quarter 4	2.5 (0.30)	1.3
2015 full year	3.4 (0.23)	1.8
Quarter 1	3.0 (0.42)	1.6
Quarter 2	4.0 (0.39)	2.1
Quarter 3	3.8 (0.49)	1.9
Quarter 4	2.8 (0.36)	1.5
2016 full year	3.8 (0.18)	2.0
Quarter 1	3.1 (0.37)	1.6
Quarter 2	3.9 (0.45)	2.1
Quarter 3	3.9 (0.42)	2.0
Quarter 4	4.1 (0.39)	2.1
Age 30–64		
2014 full year	2.9 (0.13)	4.1
Quarter 1	1.8 (0.16)	2.6
Quarter 2	3.1 (0.23)	4.4
Quarter 3	3.4 (0.27)	4.9
Quarter 4	3.1 (0.22)	4.4
2015 full year	4.9 (0.17)	7.0
Quarter 1	4.9 (0.28)	7.0
Quarter 2	5.1 (0.30)	7.3
Quarter 3	5.2 (0.31)	7.6
Quarter 4	4.3 (0.32)	6.3
2016 full year	5.1 (0.17)	7.4
Quarter 1	5.3 (0.29)	7.6
Quarter 2	5.1 (0.31)	7.3
Quarter 3	5.1 (0.35)	7.4
Quarter 4	5.0 (0.30)	7.3

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage." These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2014–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–December 2016

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Sex		
Male		
2014 full year	2.4 (0.12)	2.3
Quarter 1	1.6 (0.14)	1.5
Quarter 2	2.7 (0.24)	2.6
Quarter 3	2.7 (0.24)	2.6
Quarter 4	2.8 (0.21)	2.7
2015 full year	4.1 (0.18)	4.0
Quarter 1	3.9 (0.31)	3.7
Quarter 2	4.7 (0.30)	4.5
Quarter 3	4.1 (0.32)	4.1
Quarter 4	3.7 (0.32)	3.6
2016 full year	4.7 (0.16)	4.5
Quarter 1	4.5 (0.30)	4.4
Quarter 2	4.5 (0.30)	4.3
Quarter 3	4.9 (0.32)	4.7
Quarter 4	4.7 (0.29)	4.6
Female		
2014 full year	2.9 (0.13)	2.9
Quarter 1	1.8 (0.18)	1.8
Quarter 2	3.1 (0.23)	3.1
Quarter 3	3.5 (0.28)	3.4
Quarter 4	3.1 (0.23)	3.1
2015 full year	4.8 (0.17)	4.8
Quarter 1	4.8 (0.30)	4.8
Quarter 2	4.8 (0.32)	4.8
Quarter 3	5.6 (0.35)	5.6
Quarter 4	4.2 (0.31)	4.2
2016 full year	4.8 (0.16)	4.9
Quarter 1	4.8 (0.31)	4.9
Quarter 2	5.0 (0.33)	5.0
Quarter 3	4.7 (0.35)	4.7
Quarter 4	4.8 (0.29)	4.8
Race/ethnicity		
Hispanic or Latino ²		
2014 full year	2.6 (0.30)	0.9
Quarter 1	1.4 (0.30)	0.5
Quarter 2	3.0 (0.61)	1.0
Quarter 3	3.4 (0.55)	1.1
Quarter 4	2.6 (0.37)	0.9
2015 full year	5.1 (0.40)	1.7
Quarter 1	5.4 (0.55)	1.8
Quarter 2	4.2 (0.58)	1.4
Quarter 3	5.3 (0.65)	1.8
Quarter 4	5.4 (0.66)	1.9

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–December 2016—continued

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2016 full year	5.2 (0.40)	1.8
Quarter 1	5.1 (0.65)	1.8
Quarter 2	5.0 (0.76)	1.7
Quarter 3	5.1 (0.81)	1.8
Quarter 4	5.8 (0.81)	2.0
Non-Hispanic white, single race		
2014 full year	2.5 (0.13)	3.0
Quarter 1	1.6 (0.16)	1.9
Quarter 2	2.6 (0.23)	3.2
Quarter 3	2.9 (0.28)	3.5
Quarter 4	2.8 (0.24)	3.4
2015 full year	4.3 (0.18)	5.2
Quarter 1	4.0 (0.30)	4.9
Quarter 2	4.7 (0.33)	5.8
Quarter 3	4.6 (0.39)	5.5
Quarter 4	3.7 (0.36)	4.5
2016 full year	4.6 (0.16)	5.6
Quarter 1	4.4 (0.32)	5.3
Quarter 2	4.7 (0.30)	5.6
Quarter 3	4.7 (0.35)	5.7
Quarter 4	4.7 (0.29)	5.6
Non-Hispanic black, single race		
2014 full year	2.9 (0.27)	0.7
Quarter 1	1.4 (0.38)	0.3
Quarter 2	3.7 (0.51)	0.9
Quarter 3	3.3 (0.48)	0.8
Quarter 4	3.3 (0.55)	0.8
2015 full year	4.0 (0.34)	1.0
Quarter 1	4.1 (0.73)	1.0
Quarter 2	4.2 (0.61)	1.0
Quarter 3	4.4 (0.53)	1.1
Quarter 4	3.2 (0.48)	0.8
2016 full year	4.1 (0.36)	1.0
Quarter 1	4.6 (0.63)	1.1
Quarter 2	4.7 (0.66)	1.1
Quarter 3	3.6 (0.71)	0.9
Quarter 4	3.7 (0.56)	0.9
Poverty status ³		
Poor (<100% FPL)		
2014 full year	2.2 (0.20)	0.6
Quarter 1	1.0 (0.27)	0.3
Quarter 2	2.5 (0.49)	0.7
Quarter 3	2.1 (0.37)	0.6
Quarter 4	3.2 (0.50)	0.9
2015 full year	3.8 (0.39)	0.9
Quarter 1	3.6 (0.65)	0.9
Quarter 2	4.3 (0.85)	1.0
Quarter 3	4.6 (0.82)	1.1
Quarter 4	2.7 (0.53)	0.7

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–December 2016—continued

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2016 full year	2.9 (0.27)	0.7
Quarter 1	2.9 (0.45)	0.7
Quarter 2	2.4 (0.47)	0.6
Quarter 3	2.6 (0.42)	0.6
Quarter 4	3.7 (0.64)	0.9
Near poor (≥100% and <200% FPL)		
2014 full year	4.5 (0.33)	1.6
Quarter 1	2.2 (0.40)	0.8
Quarter 2	5.1 (0.56)	1.7
Quarter 3	5.3 (0.70)	1.9
Quarter 4	5.2 (0.66)	1.8
2015 full year	7.9 (0.48)	2.7
Quarter 1	8.6 (0.92)	2.9
Quarter 2	8.6 (0.88)	2.9
Quarter 3	7.3 (0.99)	2.6
Quarter 4	7.0 (0.82)	2.5
2016 full year	7.5 (0.51)	2.5
Quarter 1	7.0 (0.90)	2.5
Quarter 2	7.5 (0.75)	2.5
Quarter 3	7.2 (0.91)	2.4
Quarter 4	8.3 (0.97)	2.7
Not poor (≥200% FPL)		
2014 full year	2.3 (0.12)	3.1
Quarter 1	1.7 (0.18)	2.2
Quarter 2	2.5 (0.23)	3.4
Quarter 3	2.7 (0.27)	3.6
Quarter 4	2.4 (0.22)	3.1
2015 full year	3.8 (0.17)	5.1
Quarter 1	3.5 (0.28)	4.7
Quarter 2	3.8 (0.28)	5.2
Quarter 3	4.3 (0.32)	5.9
Quarter 4	3.4 (0.32)	4.6
2016 full year	4.3 (0.16)	6.0
Quarter 1	4.4 (0.32)	6.0
Quarter 2	4.3 (0.27)	6.0
Quarter 3	4.4 (0.33)	6.1
Quarter 4	4.2 (0.27)	6.0

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

²Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

³Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 8.8% in 2014, 8.8% in 2015 and 7.8% in 2016. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage." These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2014–2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<http://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammit and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



High-deductible Health Plans and Financial Barriers to Medical Care: Early Release of Estimates From the National Health Interview Survey, 2016

by Robin A. Cohen, Ph.D., and Emily P. Zammitti, M.P.H.,
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Highlights

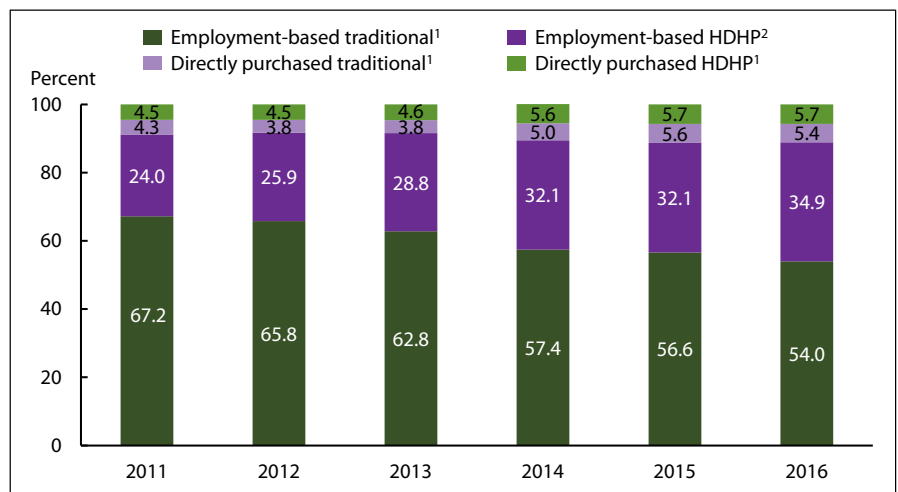
- The percentage of adults aged 18–64 with employment-based coverage enrolled in a high-deductible health plan (HDHP) increased, from 26.3% in 2011 to 39.3% in 2016.
- In 2016, among privately insured adults aged 18–64 with employment-based coverage, those enrolled in an HDHP were more likely to experience the two financial barriers to care analyzed in this report than those enrolled in a traditional plan.
- In 2016, among privately insured adults aged 18–64 with directly purchased coverage, the percentage of those who had experienced financial barriers to health care did not differ by type of coverage (HDHP or traditional).
- In 2016, among privately insured adults aged 18–64 with employment-based coverage, income distributions were similar between those with an HDHP and those with a traditional plan.
- In 2016, among privately insured adults aged 18–64 with directly purchased coverage, those enrolled in an HDHP had higher household incomes than those enrolled in a traditional plan.

Introduction

High-deductible health plans (HDHPs) are health insurance policies with higher deductibles than traditional plans. In 2016, HDHP was defined as a health plan with an annual deductible of at least \$1,300 for self-only coverage or \$2,600 for family coverage. Traditional plans have annual deductibles below these levels. Relative to traditional plans, HDHPs tend to have lower premium costs. Because of the higher deductibles, persons enrolled in HDHPs can have higher out-of-pocket costs in the initial stages of care. Previous studies have shown that adults with HDHPs are more likely to forgo or delay care due to cost (1,2), and low-income adults with HDHPs are less confident that they can afford care compared with those with traditional plans (3).

These previous studies have focused on employment-based coverage or have not disaggregated employment-based coverage from directly purchased coverage. This report provides recent estimates from the National Health Interview Survey (NHIS) for the percentage of privately insured adults aged 18–64 who experienced financial barriers to care in the past 12 months by source (employment-based or directly purchased) and type (traditional or HDHP) of private coverage. Because income is also associated with financial barriers to care, income distribution by source and type of private coverage is also shown. All estimates in this report are based on preliminary data. This report is produced by the NHIS Early Release (ER) Program, which releases selected preliminary estimates prior to final microdata release.

Figure 1. Percent distribution of privately insured adults aged 18–64, by source and type of private coverage: United States, 2011–2016



¹Significant cubic trend from 2011 through 2016 ($p < 0.05$).

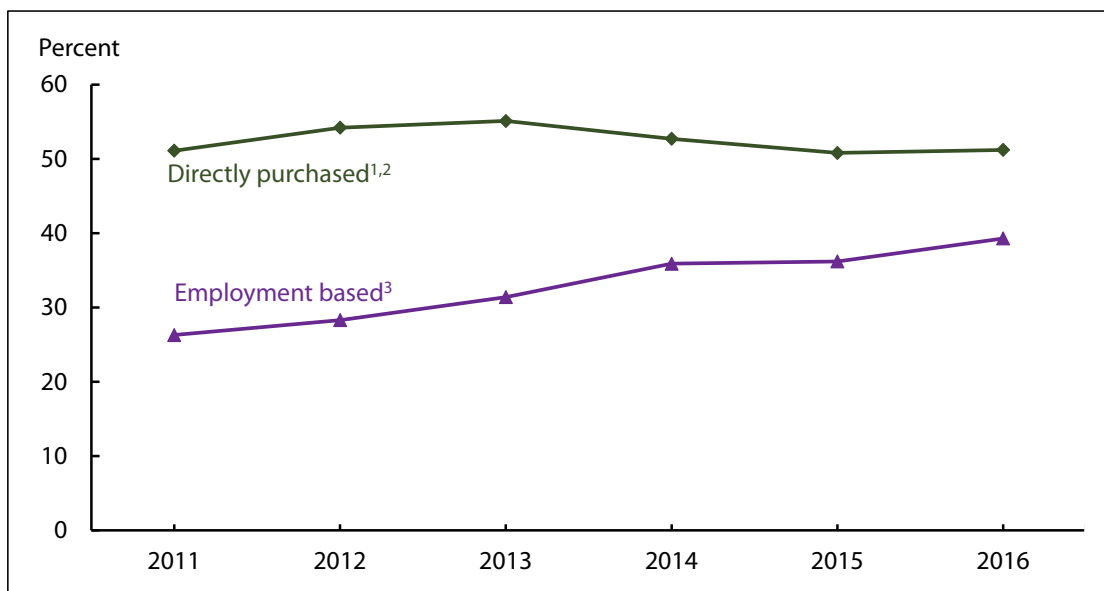
²Significant linear increase from 2011 through 2016 ($p < 0.05$).

NOTES: HDHP is a high-deductible health plan. Estimates may not add to 100.0% due to rounding. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2016.

- In 2016, among privately insured adults aged 18–64, 54.0% were enrolled in an employment-based traditional plan, 34.9% were enrolled in an employment-based HDHP, 5.4% were enrolled in a directly purchased traditional plan, and 5.7% were enrolled in a directly purchased HDHP (Figure 1).
- The percentage of adults aged 18–64 enrolled in an employment-based HDHP increased, from 24.0% in 2011 to 34.9% in 2016.
- The percentage of privately insured adults aged 18–64 enrolled in an employment-based traditional plan generally decreased, from 67.2% in 2011 to 54.0% in 2016. However, the decrease was not linear; there were significant changes in the percentage between 2011 (67.2%) and 2012 (65.8%) and between 2014 (57.4%) and 2015 (56.6%).
- The percentage of privately insured adults aged 18–64 enrolled in a directly purchased HDHP remained stable from 2011 (4.5%) to 2013 (4.6%), it increased from 4.6% in 2013 to 5.6% in 2014, and then it remained stable from 2014 to 2016 (5.7%).
- The percentage of privately insured adults aged 18–64 enrolled in a directly purchased traditional plan decreased from 2011 (4.3%) to 2012 (3.8%), it increased from 3.8% in 2012 to 5.6% in 2015, and then it remained stable from 2015 to 2016.

Figure 2. Percentage of privately insured adults aged 18–64 enrolled in a high-deductible health plan, by source of private coverage: United States, 2011–2016



¹Significantly different from those with employment-based high-deductible health plan coverage within each year from 2011 through 2016 ($p < 0.05$).

²Significant quadratic trend from 2011 through 2016 ($p < 0.05$).

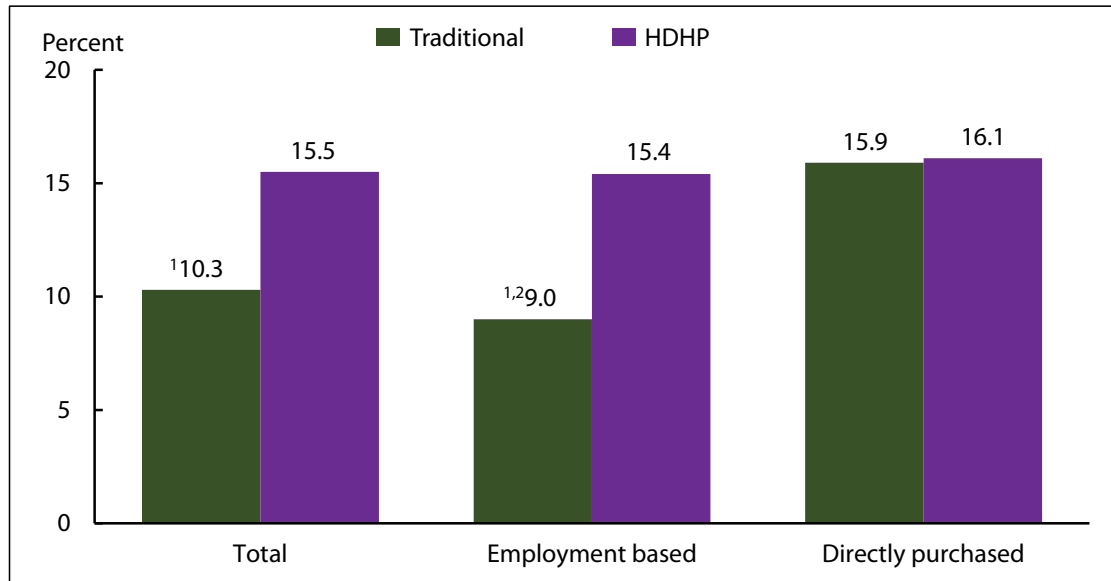
³Significant linear increase from 2011 through 2016 ($p < 0.05$).

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2016.

- The percentage of adults aged 18–64 with employment-based coverage enrolled in an HDHP increased, from 26.3% in 2011 to 39.3% in 2016 (Figure 2).
- The percentage of adults aged 18–64 with directly purchased coverage enrolled in an HDHP increased, from 51.1% in 2011 to 55.1% in 2013, it decreased from 55.1% in 2013 to 50.8% in 2015, and then it remained stable between 2015 and 2016 (51.2%). There was no significant difference in the percentage of adults enrolled in an HDHP between 2011 (51.1%) and 2016 (51.2%).
- Within each year from 2011 through 2016, enrollment in an HDHP was lower among adults aged 18–64 with employment-based coverage than among those with directly purchased coverage.

Figure 3. Percentage of privately insured adults aged 18–64 in families having problems paying medical bills in the past 12 months, by source and type of private coverage: United States, 2016



¹Significantly different from those with HDHP ($p < 0.05$).

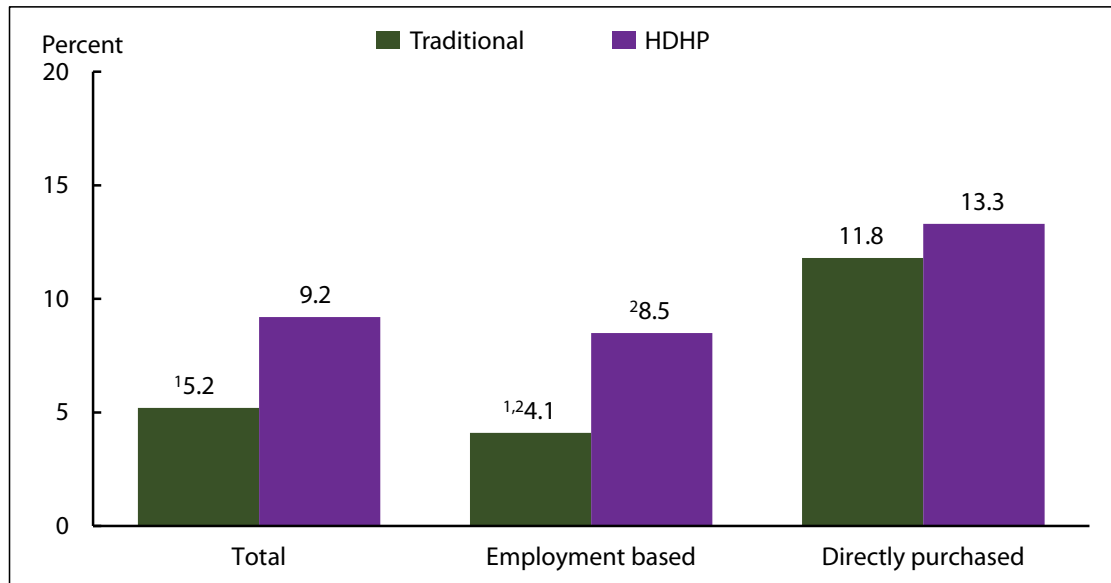
²Significantly different from those with directly purchased traditional and directly purchased HDHP ($p < 0.05$).

NOTES: HDHP is a high-deductible health plan. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2016.

- In 2016, among privately insured adults aged 18–64, the percentage of those in families having problems paying medical bills in the past 12 months was significantly higher for those with an HDHP (15.5%) than those with a traditional plan (10.3%) (Figure 3).
- In 2016, among privately insured adults aged 18–64 with employment-based coverage, the percentage of those in families having problems paying medical bills was significantly higher for those with an HDHP (15.4%) than those with a traditional plan (9.0%).
- In 2016, among privately insured adults aged 18–64 with directly purchased coverage, there was no significant difference between those with a traditional plan (15.9%) and those with an HDHP (16.1%).
- Regardless of the type of directly purchased private coverage, adults with directly purchased coverage were as likely as those with an employer-based HDHP to be in families having problems paying medical bills in the past 12 months, and they were more likely than those with employer-based traditional plans to be in families having problems paying medical bills.

Figure 4. Percentage of privately insured adults aged 18–64 who did not get or delayed medical care due to cost in the past 12 months, by source and type of private coverage: United States, 2016



¹Significantly different from those with HDHP ($p < 0.05$).

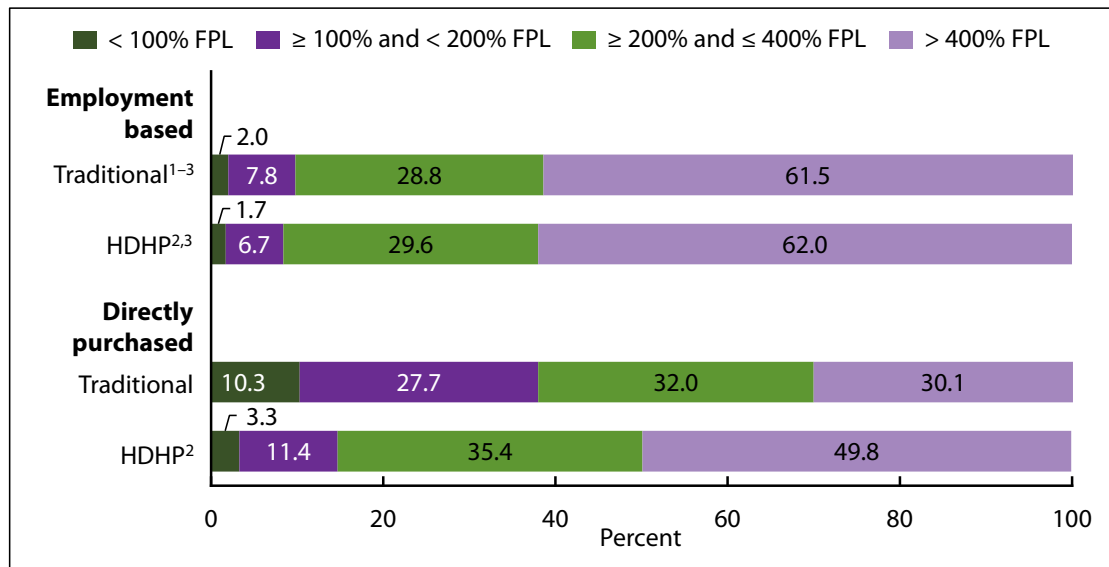
²Significantly different from those with directly purchased traditional and directly purchased HDHP ($p < 0.05$).

NOTES: HDHP is a high-deductible health plan. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2016.

- In 2016, among privately insured adults aged 18–64, the percentage of those who did not get or delayed medical care due to cost in the past 12 months was significantly higher for those with an HDHP (9.2%) than for those with a traditional plan (5.2%) (Figure 4).
- In 2016, among privately insured adults aged 18–64 with employment-based coverage, the percentage of those who did not get or delayed medical care due to cost in the past 12 months was significantly higher for those with an HDHP (8.5%) than for those with an employment-based traditional plan (4.1%).
- In 2016, among privately insured adults aged 18–64 with directly purchased coverage, there was no significant difference between those with a traditional plan (11.8%) and those with an HDHP (13.3%).
- Regardless of the type of directly purchased private coverage, adults with directly purchased coverage were more likely to not get or delay medical care due to cost than those with employment-based coverage.

Figure 5. Percent distribution of privately insured adults aged 18–64, by source and type of private coverage and poverty status: United States, 2016



¹Significantly different from those with employment-based HDHPs for those with incomes FPL ≥ 100% and < 200% FPL ($p < 0.05$).

²Significantly different from those with directly purchased traditional plans for those with incomes < 100% FPL, FPL ≥ 100% and < 200% FPL, and > 400% FPL ($p < 0.05$).

³Significantly different from those with directly purchased HDHPs for all income levels ($p < 0.05$).

NOTES: FPL is federal poverty level. HDHP is a high-deductible health plan. Estimates may not add to 100.0% due to rounding. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2016.

- In 2016, among privately insured adults aged 18–64 with employment-based coverage, the income distributions were mostly similar for those with traditional and those with HDHP coverage. The only significant difference was among those with incomes from 100% to less than 200% of the federal poverty level (FPL). The percentage with incomes from 100% to less than 200% FPL was higher among those with a traditional plan (7.8%) than those with an HDHP (6.7%) (Figure 5).
- In 2016, among privately insured adults aged 18–64 with directly purchased coverage, those with traditional coverage were more likely than those with an HDHP to have incomes less than 100% FPL (10.3% compared with 3.3%) and incomes from 100% to less than 200% FPL (27.7% compared with 11.4%). Those with traditional coverage were less likely than those with an HDHP to have incomes greater than 400% FPL (30.1% compared with 49.8%).
- Privately insured adults aged 18–64 with either traditional (61.5%) or HDHP (62.0%) employment-based coverage were more likely to have incomes greater than 400% FPL than those enrolled in either a directly purchased traditional plan (30.1%) or a directly purchased HDHP (49.8%).
- Privately insured adults aged 18–64 with directly purchased traditional plans (27.7%) were more likely than those with employment-based traditional coverage (7.8%), employment-based HDHP coverage (6.7%), or directly purchased HDHP coverage (11.4%) to have incomes from 100% to less than 200% FPL.
- Privately insured adults aged 18–64 with directly purchased traditional plans (10.3%) were three to five times more likely than those with employment-based traditional coverage (2.0%), employment-based HDHP coverage (1.7%), or directly purchased HDHP coverage (3.3%) to have incomes less than 100% FPL.

Summary

Among privately insured adults aged 18–64 with employment-based coverage, those enrolled in an HDHP were more likely than those enrolled in a traditional plan to forgo or delay medical care and to be in a family having problems paying medical bills. However, among privately insured adults aged 18–64 with directly purchased coverage, the pattern of results was different. In 2016, there was no significant difference in financial barriers to health care according to type of plan (traditional or HDHP) in the direct purchase market.

The differences observed in this report between adults in employment-based HDHPs and adults with employment-based traditional plans have been observed in previous studies. For example, analyses of 2007 and 2008 NHIS data also found that adults with HDHPs were more likely to forgo or delay care than those with traditional plans (2). In the employment-based market, the income distributions for those with traditional plans and HDHPs were similar. Therefore, factors other than income may contribute to the differences seen in financial barriers to health care between those with employment-based HDHPs and those with traditional plans.

Few previous studies have examined the differences between adults in directly purchased HDHPs and adults with directly purchased traditional plans. No significant differences in financial barriers to care were observed in this report between these two groups. However, these two groups differ significantly in their income distributions. Those with directly purchased traditional plans generally have lower household income (relative to the federal poverty level) than those with directly purchased HDHPs. Different deductible levels coupled with different income distributions might account for the same percentage of adults facing barriers among those with traditional and those with HDHP directly purchased private insurance.

As the dynamics of the private health insurance market change, the NHIS will continue to monitor the association between type and source of private health insurance and financial barriers to needed health care.

Table 1. Percentage (standard error) of adults aged 18–64 with private coverage and percent distribution (standard error) of privately insured adults aged 18–64, by source and type of coverage and year: United States, 2011–2016

Source and type of private coverage	2011	2012	2013	2014	2015	2016
Percentage with private coverage	64.2 (0.45)	64.1 (0.42)	64.2 (0.47)	67.3 (0.43)	69.7 (0.43)	69.2 (0.41)
Percent distribution						
Employment-based ¹						
traditional ²	67.2 (0.50)	65.8 (0.55)	62.8 (0.62)	57.4 (0.65)	56.6 (0.64)	54.0 (0.59)
Employment-based ¹ HDHP ³	24.0 (0.44)	25.9 (0.51)	28.8 (0.58)	32.1 (0.64)	32.1 (0.64)	34.9 (0.58)
Directly purchased ⁴						
traditional ²	4.3 (0.18)	3.8 (0.17)	3.8 (0.18)	5.0 (0.21)	5.6 (0.21)	5.4 (0.23)
Directly purchased ⁴ HDHP ³	4.3 (0.18)	4.5 (0.19)	4.6 (0.17)	5.6 (0.22)	5.7 (0.24)	5.7 (0.22)

¹Private insurance originally obtained through a present of former employer or union or through a professional association.

²Defined in 2016 as a health plan with an annual deductible of less than \$1,300 for self-only coverage and \$2,600 for family coverage. The deductible is adjusted annually for inflation. Deductibles for previous years are included in the Technical Notes.

³HDHP is a high-deductible health plan. It was defined in 2016 as a health plan with an annual deductible of at least \$1,300 for self-only coverage and \$2,600 for family coverage. The deductible is adjusted annually for inflation. Deductibles for previous years are included in the Technical Notes.

⁴Private insurance that was originally obtained through direct purchase or other means not related to employment. Since 2014, this category includes plans purchased through the Health Insurance Marketplace or state-based exchanges.

NOTES: Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2016.

Table 2. Percentage (standard error) of privately insured adults aged 18–64 enrolled in a high-deductible health plan, by source of coverage and year: United States, 2011–2016

Type of private coverage	2011	2012	2013	2014	2015	2016
All private health coverage	28.5 (0.49)	30.4 (0.54)	33.4 (0.64)	37.6 (0.68)	37.9 (0.67)	40.6 (0.60)
Employment based ¹	26.3 (0.49)	28.3 (0.56)	31.4 (0.64)	35.9 (0.70)	36.2 (0.70)	39.3 (0.63)
Directly purchased ²	51.1 (1.44)	54.2 (1.55)	55.1 (1.39)	52.7 (1.36)	50.8 (1.39)	51.2 (1.36)

¹Private insurance originally obtained through a present of former employer or union or through a professional association.

²Private insurance originally obtained through direct purchase or other means not related to employment. Since 2014, this category includes plans purchased through the Health Insurance Marketplace or state-based exchanges.

NOTES: Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A high-deductible health plan was defined in 2016 as a health plan with an annual deductible of at least \$1,300 for self-only coverage and \$2,600 for family coverage. The deductible is adjusted annually for inflation. Deductibles for previous years are included in the Technical Notes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2016.

Table 3. Percentage (standard error) of privately insured adults aged 18–64 in families having problems paying medical bills and who did not get or delayed medical care in the past 12 months, by source and type of private coverage: United States, 2016

Source and type of private coverage	Problems paying medical bills	Delayed or did not get medical care
Total	12.4 (0.37)	6.5 (0.18)
Source of coverage		
Employment based ¹	11.7 (0.41)	5.7 (0.18)
Directly purchased ²	16.0 (0.87)	12.0 (0.69)
Type of coverage		
Traditional ³	10.3 (0.37)	5.2 (0.23)
HDHP ⁴	15.5 (0.64)	9.2 (0.33)
Source and type of coverage		
Employment-based ¹ traditional ³	9.0 (0.38)	4.1 (0.19)
Employment-based ¹ HDHP ⁴	15.4 (0.73)	8.5 (0.34)
Directly purchased ² traditional ³	15.9 (1.42)	11.8 (1.23)
Directly purchased ² HDHP ⁴	16.1 (1.32)	13.3 (1.01)

¹Private insurance originally obtained through a present of former employer or union or through a professional association.

²Private insurance originally obtained through direct purchase or other means not related to employment. This category includes plans purchased through the Health Insurance Marketplace or state-based exchanges.

³Defined in 2016 as a health plan with an annual deductible of less than \$1,300 for self-only coverage and \$2,600 for family coverage.

⁴HDHP is a high-deductible health plan. It was defined in 2016 as a health plan with an annual deductible of at least \$1,300 for self-only coverage and \$2,600 for family coverage.

NOTES: Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2016.

Table 4. Percent distribution (standard error) of privately insured adults aged 18–64, by source and type of private coverage and poverty status: United States, 2016

Source and type of private coverage and poverty status	Percent distribution within source and type of coverage
Employment-based ¹ HDHP ²	
< 100% FPL ³	1.7 (0.19)
≥ 100% and < 200% FPL ³	6.7 (0.34)
≥ 200% and ≤ 400% FPL ³	29.6 (0.66)
> 400% FPL ³	62.0 (0.74)
Employment-based ¹ traditional ⁴	
< 100% FPL ³	2.0 (0.15)
≥ 100% and < 200% FPL ³	7.8 (0.32)
≥ 200% and ≤ 400% FPL ³	28.8 (0.54)
> 400% FPL ³	61.5 (0.64)
Directly purchased ⁵ HDHP ²	
< 100% FPL ³	3.3 (0.63)
≥ 100% and < 200% FPL ³	11.4 (1.34)
≥ 200% and ≤ 400% FPL ³	35.4 (2.03)
> 400% FPL ³	49.8 (2.06)
Directly purchased ⁵ traditional ⁴	
< 100% FPL ³	10.3 (1.13)
≥ 100% and < 200% FPL ³	27.7 (1.50)
≥ 200% and ≤ 400% FPL ³	32.0 (1.86)
> 400% FPL ³	30.1 (1.86)

¹Private insurance originally obtained through a present of former employer or union or through a professional association.

²HDHP is a high-deductible health plan. It defined in 2016 as a health plan with an annual deductible of at least \$1,300 for self-only coverage and \$2,600 for family coverage.

³FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. For more information on poverty status, see Technical Notes. Estimates may differ from estimates that are based on both reported and imputed income.

⁴Defined in 2016 as a health plan with an annual deductible of less than \$1,300 for self-only coverage and \$2,600 for family coverage.

⁵Private insurance originally obtained through direct purchase or other means not related to employment. This category includes plans purchased through the Health Insurance Marketplace or state-based exchanges.

NOTES: Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2016.

Technical Notes

The National Center for Health Statistics (NCHS) is releasing selected estimates of difficulties with access to care for the civilian noninstitutionalized U.S. population based on data from the 2016 National Health Interview Survey (NHIS). The estimates are being released prior to final data editing and final weighting to provide access to the most recent information from NHIS. Differences between estimates calculated using preliminary data files and final data files are typically less than 0.1 percentage point. All estimates in this report were based on preliminary data files.

Data source

Data used to produce this Early Release (ER) report are derived from the NHIS Family Core and Supplemental components from 2011 through 2016. These components collect information on all family members in each household. Data analysis for 2016 was based on information collected on 58,157 adults aged 18–64 in the Family Core and Supplemental components. Visit the NHIS website at <https://www.cdc.gov/nchs/nhis.htm> for more information about the design, content, and use of NHIS.

Estimation procedures

NCHS creates survey weights for each calendar quarter of the NHIS sample. The NHIS data weighting procedure is described in more detail at https://www.cdc.gov/nchs/data/series/sr_02/sr02_165.pdf. Estimates were calculated using the NHIS survey weights, which are calibrated to census totals for sex, age, and race and ethnicity of the U.S. civilian noninstitutionalized population. Weights for the 2011 NHIS data were derived from 2000 census-based population estimates. Weights for the 2012, 2013, 2014, 2015, and 2016 NHIS data were derived from 2010 census-based population estimates.

Point estimates and estimates of their variances were calculated using SUDAAN software (RTI International, Research Triangle Park, N.C.) to account for the complex sample design of NHIS. The Taylor series linearization method was chosen for variance estimation. Trends were evaluated using logistic regression analysis.

Unless otherwise noted, all estimates shown meet the NCHS standard of having less than or equal to 30% relative standard error. Differences between percentages or rates were evaluated using two-sided significance tests at the 0.05 level. Terms such as “more likely” and “less likely” indicate a statistically significant difference unless otherwise noted. Lack of comment regarding the difference between any two estimates does not necessarily mean that the difference was tested and found to be not significant.

Definitions of selected terms

Delayed or did not get medical care due to cost—Based on the following four questions: “During the past 12 months, [have you delayed seeking medical care/has medical care been delayed for anyone in the family] because of worry about the cost?” If yes, “For which family member was medical care delayed?” “During the past 12 months, was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] couldn’t afford it?” If yes, “Who didn’t get needed care?”

Directly purchased coverage—Private insurance originally obtained through direct purchase or other means not related to employment.

Employment-based coverage—Private insurance originally obtained through a present or former employer, union, or professional association.

Family—Defined as an individual or a group of two or more related persons who are living together in the same occupied housing unit (i.e., household) in the sample. In some instances, unrelated persons sharing the same household, such as an unmarried couple living together, may also be considered one family.

High-deductible health plan (HDHP)—For persons with private health insurance, a question was asked regarding the annual deductible of each private health insurance plan. HDHP was defined in 2015 and 2016 as a private health plan with an annual deductible of at least \$1,300 for self-only coverage or \$2,600 for family coverage. The deductible is adjusted annually for inflation. For 2013 and 2014, the annual deductible was \$1,250 for self-only coverage and \$2,500 for family coverage. For 2011 and 2012, the annual deductible was \$1,200 for self-only coverage and \$2,400 for family coverage.

Private health insurance—Includes persons who had any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Data on health insurance status were edited using an automated system based on logic checks and keyword searches. For comparability, the estimates for all years were created using these same procedures. Health insurance information is collected for all persons in a family and is reported on an individual basis.

Poverty status—Poverty categories are based on the ratio of the family’s income in the previous calendar year to the appropriate poverty threshold (given the family’s size and number of children), as defined by the U.S. Census Bureau.

Problems paying medical bills in the past 12 months—Based on the following question: “In the past 12 months, did [you/anyone in the family] have problems paying or were unable to pay any medical bills? Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home, or home care.” This question was answered by the family respondent on behalf of everyone in the family.

Traditional health plan—For persons with private health insurance, a question was asked regarding the annual deductible of each private health insurance plan. A traditional health plan was defined in 2016 as a private health plan with an annual deductible less than \$1,300 for self-only coverage or \$2,600 for family coverage.

Additional Early Release Program Products

Additional reports are published through the Early Release (ER) Program. *Early Release of Selected Estimates Based on Data From the National Health Interview Survey* is published quarterly and provides estimates of 15 selected measures of health. Measures of health include estimates of health insurance, having a usual place to go for medical care, obtaining needed medical care, influenza vaccination, pneumococcal vaccination, obesity, leisure-time physical activity, current smoking, alcohol consumption, HIV testing, general health status, personal care needs, serious psychological distress, diagnosed diabetes, and asthma episodes and current asthma.

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey is published quarterly and provides detailed estimates of health insurance coverage.

Wireless Substitution: Early Release of Estimates From the National Health Interview Survey is published biannually and provides selected estimates of telephone coverage in the United States.

In addition to these reports, preliminary microdata files containing selected National Health Interview Survey (NHIS) variables are produced as part of the ER Program. For the 2016 NHIS, these files were made available four times: in September 2016, November 2016, February 2017, and May 2017. NHIS data users can analyze these files through the National Center for Health Statistics Research Data Center without having to wait for the final annual NHIS microdata files to be released.

New measures may be added as work continues and in response to changing data needs. Feedback on these releases is welcome (nhislist@cdc.gov).

Announcements about Early Releases, other new data releases, publications, or corrections related to NHIS will be sent to members of the HISUSERS e-mail list. To join, visit the Centers for Disease Control and Prevention website at <https://www.cdc.gov/subscribe.html>.

References

1. Sinaiko AD, Mehrotra A, Sood N. Cost-sharing obligations, high-deductible health plan growth, and shopping for health care: enrollees with skin in the game. *JAMA Intern Med* 176(3):395–397. 2016.
2. Cohen RA. Impact of type of insurance plan on access and utilization of health care services for adults aged 18–64 years with private health insurance: United States, 2007–2008. NCHS data brief, no 28. Hyattsville, MD: National Center for Health Statistics. 2010.
3. Collins SR, Gunja M, Rasmussen PW, Doty MM, Beutel S. Are Marketplace plans affordable? Consumer perspectives from the Commonwealth Fund Affordable Care Act Tracking Survey, March–May 2015. The Commonwealth Fund. 2015.

Suggested citation

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<https://www.cdc.gov/nchs/nhis/releases.htm>.



National Health Interview Survey Early Release Program

Table 1. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–March 2017

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	18.2 (0.30)	61.2 (0.50)	...	22.0 (0.38)
Quarter 1	17.5 (0.53)	62.6 (0.99)	...	21.2 (0.71)
Quarter 2	19.2 (0.74)	60.9 (0.92)	...	21.2 (0.58)
Quarter 3	18.8 (0.50)	60.6 (0.83)	...	22.0 (0.64)
Quarter 4	17.2 (0.49)	60.6 (0.89)	...	23.5 (0.68)
2011 full year	17.3 (0.29)	61.2 (0.51)	...	23.0 (0.37)
Quarter 1	17.4 (0.49)	61.3 (0.89)	...	22.7 (0.67)
Quarter 2	17.4 (0.48)	61.4 (0.83)	...	22.5 (0.59)
Quarter 3	17.3 (0.54)	60.8 (0.95)	...	23.3 (0.68)
Quarter 4	16.9 (0.51)	61.1 (0.86)	...	23.3 (0.63)
2012 full year	16.9 (0.27)	61.0 (0.47)	...	23.5 (0.37)
Quarter 1	17.6 (0.56)	60.2 (0.93)	...	23.5 (0.64)
Quarter 2	16.0 (0.48)	63.0 (0.90)	...	22.6 (0.68)
Quarter 3	17.0 (0.50)	60.3 (0.84)	...	24.2 (0.67)
Quarter 4	17.2 (0.47)	60.3 (0.80)	...	23.8 (0.59)
2013 full year	16.6 (0.30)	61.0 (0.52)	...	23.8 (0.35)
Quarter 1	17.1 (0.54)	60.3 (0.91)	...	23.9 (0.65)
Quarter 2	16.4 (0.49)	62.1 (0.82)	...	22.9 (0.59)
Quarter 3	16.5 (0.48)	61.2 (0.85)	...	23.7 (0.61)
Quarter 4	16.2 (0.53)	60.5 (0.93)	...	24.5 (0.68)
2014 full year	13.3 (0.26)	63.6 (0.46)	2.2 (0.10)	24.5 (0.36)
Quarter 1	15.2 (0.47)	61.8 (0.85)	1.4 (0.11)	24.2 (0.68)
Quarter 2	12.9 (0.50)	63.8 (0.81)	2.4 (0.17)	24.7 (0.61)
Quarter 3	13.2 (0.44)	64.0 (0.85)	2.5 (0.20)	24.0 (0.62)
Quarter 4	12.1 (0.42)	64.4 (0.90)	2.5 (0.18)	25.0 (0.74)
2015 full year	10.5 (0.22)	65.6 (0.50)	3.8 (0.14)	25.3 (0.43)
Quarter 1	10.7 (0.40)	66.5 (0.88)	3.6 (0.22)	24.2 (0.74)
Quarter 2	10.3 (0.36)	66.7 (0.81)	4.0 (0.24)	24.6 (0.71)
Quarter 3	10.8 (0.43)	64.5 (0.93)	4.2 (0.29)	26.1 (0.77)
Quarter 4	10.3 (0.41)	64.7 (0.95)	3.4 (0.24)	26.3 (0.81)
2016 full year	10.4 (0.31)	65.0 (0.48)	4.1 (0.13)	26.3 (0.41)
Quarter 1	10.0 (0.39)	66.0 (0.80)	4.0 (0.23)	25.7 (0.64)
Quarter 2	10.8 (0.46)	63.9 (0.79)	4.1 (0.26)	26.8 (0.75)
Quarter 3	10.1 (0.44)	64.4 (0.77)	4.1 (0.29)	27.4 (0.71)
Quarter 4	10.8 (0.49)	65.6 (0.81)	4.3 (0.26)	25.2 (0.71)
2017 (Jan–Mar)	10.3 (0.41)	66.0 (0.77)	4.0 (0.22)	25.3 (0.59)
Quarter 1	10.3 (0.41)	66.0 (0.77)	4.0 (0.22)	25.3 (0.59)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



National Health Interview Survey Early Release Program

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–March 2017

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
0-17 years				
2010 full year	7.8 (0.32)	53.8 (0.75)	...	39.8 (0.73)
Quarter 1	7.4 (0.51)	55.4 (1.47)	...	38.5 (1.41)
Quarter 2	9.1 (0.79)	53.0 (1.30)	...	39.3 (1.19)
Quarter 3	8.2 (0.56)	53.7 (1.35)	...	39.7 (1.31)
Quarter 4	6.5 (0.46)	53.0 (1.35)	...	41.6 (1.30)
2011 full year	7.0 (0.27)	53.3 (0.76)	...	41.0 (0.74)
Quarter 1	6.9 (0.50)	54.4 (1.40)	...	40.3 (1.35)
Quarter 2	7.7 (0.48)	53.7 (1.23)	...	40.1 (1.21)
Quarter 3	7.1 (0.53)	52.3 (1.46)	...	42.1 (1.38)
Quarter 4	6.5 (0.45)	53.0 (1.33)	...	41.5 (1.29)
2012 full year	6.6 (0.27)	52.8 (0.73)	...	42.1 (0.72)
Quarter 1	6.7 (0.55)	51.6 (1.35)	...	43.0 (1.24)
Quarter 2	6.4 (0.57)	55.3 (1.34)	...	39.9 (1.38)
Quarter 3	6.8 (0.50)	52.0 (1.30)	...	43.0 (1.26)
Quarter 4	6.4 (0.44)	52.4 (1.33)	...	42.3 (1.25)
2013 full year	6.5 (0.26)	52.6 (0.76)	...	42.2 (0.70)
Quarter 1	7.1 (0.52)	51.5 (1.45)	...	42.5 (1.30)
Quarter 2	7.1 (0.51)	54.1 (1.31)	...	40.1 (1.21)
Quarter 3	5.9 (0.49)	52.7 (1.39)	...	42.7 (1.26)
Quarter 4	6.0 (0.47)	52.0 (1.34)	...	43.6 (1.24)
2014 full year	5.5 (0.27)	53.7 (0.68)	0.9 (0.11)	42.2 (0.65)
Quarter 1	6.6 (0.55)	51.7 (1.34)	0.5 (0.14)	43.0 (1.32)
Quarter 2	5.6 (0.59)	53.6 (1.28)	1.0 (0.17)	42.5 (1.24)
Quarter 3	5.3 (0.46)	54.6 (1.31)	1.0 (0.19)	40.9 (1.24)
Quarter 4	4.2 (0.40)	54.5 (1.38)	1.3 (0.28)	42.9 (1.39)
2015 full year	4.5 (0.24)	54.7 (0.78)	2.0 (0.18)	42.2 (0.79)
Quarter 1	4.6 (0.50)	56.3 (1.44)	1.6 (0.23)	40.4 (1.38)
Quarter 2	4.5 (0.48)	55.7 (1.34)	1.9 (0.29)	41.1 (1.32)
Quarter 3	4.5 (0.46)	53.3 (1.49)	2.5 (0.39)	43.7 (1.45)
Quarter 4	4.3 (0.43)	53.6 (1.53)	1.9 (0.32)	43.5 (1.54)
2016 full year	5.1 (0.31)	53.8 (0.71)	2.5 (0.17)	43.0 (0.65)
Quarter 1	5.0 (0.46)	54.9 (1.34)	2.2 (0.27)	42.1 (1.32)
Quarter 2	5.0 (0.60)	52.9 (1.46)	2.4 (0.32)	43.3 (1.43)
Quarter 3	4.8 (0.56)	52.6 (1.37)	2.4 (0.38)	44.9 (1.38)
Quarter 4	5.6 (0.46)	54.9 (1.31)	3.0 (0.37)	41.5 (1.22)
2017 (Jan–Mar)	5.3 (0.61)	54.1 (1.25)	1.9 (0.27)	42.3 (1.22)
Quarter 1	5.3 (0.61)	54.1 (1.25)	1.9 (0.27)	42.3 (1.22)
18-29 years				
2010 full year	30.9 (0.56)	53.4 (0.64)	...	16.2 (0.45)
Quarter 1	30.6 (1.13)	53.4 (1.34)	...	16.6 (0.92)
Quarter 2	31.9 (1.16)	54.0 (1.25)	...	14.4 (0.73)
Quarter 3	32.0 (1.01)	52.2 (1.11)	...	16.4 (0.85)
Quarter 4	29.1 (1.08)	54.2 (1.31)	...	17.4 (0.86)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–March 2017—Con.

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	27.7 (0.57)	56.4 (0.69)	...	16.7 (0.48)
Quarter 1	27.9 (1.01)	55.8 (1.34)	...	17.1 (0.92)
Quarter 2	27.6 (1.02)	57.4 (1.23)	...	16.0 (0.71)
Quarter 3	28.1 (1.10)	55.6 (1.28)	...	17.0 (0.87)
Quarter 4	27.2 (1.02)	56.9 (1.16)	...	16.8 (0.75)
2012 full year	26.9 (0.54)	56.5 (0.64)	...	17.5 (0.47)
Quarter 1	28.2 (1.10)	54.7 (0.33)	...	17.9 (0.88)
Quarter 2	25.1 (1.09)	58.4 (1.42)	...	17.6 (0.85)
Quarter 3	27.4 (0.99)	55.3 (1.27)	...	18.0 (0.94)
Quarter 4	26.9 (1.12)	57.6 (1.30)	...	16.6 (0.77)
2013 full year	26.1 (0.59)	57.6 (0.68)	...	16.9 (0.46)
Quarter 1	26.5 (1.02)	56.0 (1.24)	...	18.1 (0.88)
Quarter 2	25.1 (1.06)	58.5 (1.21)	...	17.1 (0.87)
Quarter 3	25.9 (1.06)	58.8 (1.23)	...	16.1 (0.90)
Quarter 4	26.8 (1.13)	57.2 (1.42)	...	16.5 (0.91)
2014 full year	20.6 (0.49)	61.4 (0.68)	2.1 (0.14)	19.0 (0.50)
Quarter 1	22.2 (0.91)	59.7 (1.36)	1.3 (0.21)	19.0 (0.97)
Quarter 2	19.8 (0.89)	62.2 (1.19)	2.4 (0.31)	18.8 (0.95)
Quarter 3	21.5 (0.99)	61.0 (1.34)	2.3 (0.28)	18.4 (0.85)
Quarter 4	19.1 (0.86)	62.4 (1.25)	2.5 (0.30)	19.7 (0.97)
2015 full year	16.5 (0.50)	64.2 (0.68)	3.4 (0.23)	20.2 (0.54)
Quarter 1	17.2 (0.87)	64.0 (1.16)	3.0 (0.42)	19.8 (0.99)
Quarter 2	15.2 (0.74)	65.4 (1.22)	4.0 (0.39)	20.3 (0.97)
Quarter 3	16.9 (0.84)	64.1 (1.18)	3.8 (0.49)	19.7 (0.93)
Quarter 4	16.5 (0.97)	63.4 (1.33)	2.8 (0.36)	21.1 (0.98)
2016 full year	15.2 (0.55)	63.2 (0.66)	3.8 (0.18)	22.8 (0.60)
Quarter 1	15.1 (0.87)	64.1 (1.07)	3.1 (0.37)	21.7 (1.04)
Quarter 2	16.3 (0.91)	61.2 (1.15)	3.9 (0.45)	24.0 (1.09)
Quarter 3	13.9 (0.80)	63.0 (1.14)	3.9 (0.42)	24.3 (1.04)
Quarter 4	15.4 (1.04)	64.5 (1.46)	4.1 (0.39)	21.1 (1.15)
2017 (Jan–Mar)	15.3 (0.78)	65.8 (1.29)	4.0 (0.37)	19.7 (1.01)
Quarter 1	15.3 (0.78)	65.8 (1.29)	4.0 (0.37)	19.7 (1.01)
30-64 years				
2010 full year	19.1 (0.36)	67.9 (0.49)	...	14.5 (0.31)
Quarter 1	18.2 (0.64)	69.8 (0.88)	...	13.6 (0.53)
Quarter 2	20.0 (0.83)	67.7 (0.95)	...	13.9 (0.48)
Quarter 3	19.7 (0.64)	67.2 (0.79)	...	14.5 (0.54)
Quarter 4	18.6 (0.59)	67.0 (0.82)	...	16.0 (0.56)
2011 full year	18.9 (0.34)	67.0 (0.44)	...	15.6 (0.29)
Quarter 1	19.2 (0.62)	67.0 (0.79)	...	15.4 (0.52)
Quarter 2	18.9 (0.60)	67.0 (0.80)	...	15.5 (0.52)
Quarter 3	18.8 (0.58)	67.3 (0.82)	...	15.5 (0.50)
Quarter 4	18.7 (0.59)	67.0 (0.84)	...	16.0 (0.58)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–March 2017—Con.

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2012 full year	18.7 (0.31)	66.8 (0.43)	...	16.0 (0.30)
Quarter 1	19.4 (0.65)	66.7 (0.85)	...	15.3 (0.52)
Quarter 2	17.7 (0.54)	68.6 (0.78)	...	15.4 (0.51)
Quarter 3	18.6 (0.58)	66.4 (0.80)	...	16.6 (0.57)
Quarter 4	19.2 (0.53)	65.3 (0.72)	...	16.8 (0.53)
2013 full year	18.3 (0.36)	66.6 (0.47)	...	16.7 (0.31)
Quarter 1	18.9 (0.68)	66.4 (0.84)	...	16.4 (0.56)
Quarter 2	18.1 (0.59)	67.5 (0.75)	...	16.1 (0.52)
Quarter 3	18.7 (0.57)	66.5 (0.76)	...	16.6 (0.52)
Quarter 4	17.8 (0.63)	66.2 (0.88)	...	17.6 (0.59)
2014 full year	14.7 (0.30)	69.4 (0.43)	2.9 (0.13)	17.3 (0.33)
Quarter 1	17.1 (0.58)	67.8 (0.74)	1.8 (0.16)	16.5 (0.54)
Quarter 2	14.1 (0.57)	69.6 (0.75)	3.1 (0.23)	17.7 (0.57)
Quarter 3	14.3 (0.51)	69.9 (0.81)	3.4 (0.27)	17.3 (0.57)
Quarter 4	13.7 (0.53)	70.2 (0.85)	3.1 (0.22)	17.7 (0.66)
2015 full year	11.5 (0.25)	71.7 (0.43)	4.9 (0.17)	18.5 (0.36)
Quarter 1	11.5 (0.45)	72.7 (0.76)	4.9 (0.28)	17.5 (0.60)
Quarter 2	11.4 (0.45)	72.7 (0.72)	5.1 (0.30)	17.6 (0.61)
Quarter 3	11.9 (0.52)	70.4 (0.88)	5.2 (0.31)	19.3 (0.71)
Quarter 4	11.2 (0.48)	70.9 (0.86)	4.3 (0.32)	19.4 (0.74)
2016 full year	11.4 (0.34)	71.3 (0.39)	5.1 (0.17)	19.0 (0.38)
Quarter 1	10.8 (0.45)	72.5 (0.72)	5.3 (0.29)	18.7 (0.57)
Quarter 2	11.7 (0.49)	70.5 (0.61)	5.1 (0.31)	19.3 (0.58)
Quarter 3	11.5 (0.49)	70.8 (0.62)	5.1 (0.35)	19.5 (0.55)
Quarter 4	11.7 (0.52)	71.5 (0.64)	5.0 (0.30)	18.4 (0.55)
2017 (Jan–Mar)	11.0 (0.51)	72.2 (0.75)	5.0 (0.29)	18.6 (0.59)
Quarter 1	11.0 (0.51)	72.2 (0.75)	5.0 (0.29)	18.6 (0.59)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammit and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



National Health Interview Survey Early Release Program

Table 3. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–March 2017

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	22.3 (0.35)	64.1 (0.46)	...	15.0 (0.30)
Quarter 1	21.5 (0.66)	65.5 (0.88)	...	14.4 (0.54)
Quarter 2	23.2 (0.80)	64.0 (0.89)	...	14.0 (0.44)
Quarter 3	23.0 (0.58)	63.2 (0.73)	...	15.0 (0.51)
Quarter 4	21.4 (0.60)	63.6 (0.81)	...	16.4 (0.53)
2011 full year	21.3 (0.34)	64.2 (0.45)	...	15.9 (0.29)
Quarter 1	21.6 (0.59)	64.0 (0.79)	...	15.9 (0.50)
Quarter 2	21.2 (0.59)	64.5 (0.79)	...	15.6 (0.47)
Quarter 3	21.3 (0.62)	64.2 (0.84)	...	15.9 (0.52)
Quarter 4	21.0 (0.62)	64.3 (0.78)	...	16.2 (0.51)
2012 full year	20.9 (0.31)	64.1 (0.42)	...	16.4 (0.29)
Quarter 1	21.7 (0.66)	63.6 (0.84)	...	16.0 (0.51)
Quarter 2	19.6 (0.59)	65.9 (0.83)	...	16.0 (0.51)
Quarter 3	20.9 (0.57)	63.5 (0.79)	...	17.0 (0.55)
Quarter 4	21.3 (0.58)	63.3 (0.73)	...	16.8 (0.50)
2013 full year	20.4 (0.37)	64.2 (0.47)	...	16.7 (0.30)
Quarter 1	20.9 (0.64)	63.6 (0.79)	...	16.9 (0.54)
Quarter 2	19.9 (0.58)	65.1 (0.74)	...	16.3 (0.51)
Quarter 3	20.6 (0.59)	64.5 (0.74)	...	16.4 (0.48)
Quarter 4	20.1 (0.64)	63.8 (0.87)	...	17.3 (0.57)
2014 full year	16.3 (0.31)	67.3 (0.43)	2.7 (0.11)	17.7 (0.32)
Quarter 1	18.4 (0.55)	65.6 (0.76)	1.7 (0.13)	17.1 (0.53)
Quarter 2	15.6 (0.57)	67.7 (0.73)	2.9 (0.21)	18.0 (0.53)
Quarter 3	16.2 (0.53)	67.6 (0.80)	3.1 (0.23)	17.6 (0.53)
Quarter 4	15.1 (0.52)	68.1 (0.81)	2.9 (0.19)	18.2 (0.62)
2015 full year	12.8 (0.27)	69.7 (0.43)	4.5 (0.16)	18.9 (0.36)
Quarter 1	13.0 (0.45)	70.4 (0.77)	4.4 (0.27)	18.1 (0.62)
Quarter 2	12.4 (0.43)	70.8 (0.71)	4.8 (0.27)	18.3 (0.60)
Quarter 3	13.2 (0.51)	68.8 (0.83)	4.9 (0.29)	19.4 (0.66)
Quarter 4	12.6 (0.52)	69.0 (0.84)	3.9 (0.27)	19.9 (0.66)
2016 full year	12.4 (0.36)	69.2 (0.41)	4.7 (0.15)	20.0 (0.38)
Quarter 1	11.9 (0.47)	70.2 (0.70)	4.7 (0.27)	19.5 (0.51)
Quarter 2	12.9 (0.52)	68.1 (0.62)	4.8 (0.28)	20.5 (0.62)
Quarter 3	12.1 (0.48)	68.8 (0.66)	4.8 (0.30)	20.8 (0.56)
Quarter 4	12.7 (0.56)	69.6 (0.70)	4.8 (0.26)	19.1 (0.57)
2017 (Jan–Mar)	12.1 (0.43)	70.5 (0.67)	4.8 (0.24)	18.9 (0.54)
Quarter 1	12.1 (0.43)	70.5 (0.67)	4.8 (0.24)	18.9 (0.54)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

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National Health Interview Survey Early Release Program

Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–March 2017

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Male				
2010 full year	25.3 (0.44)	63.4 (0.51)	...	12.5 (0.30)
Quarter 1	24.7 (0.84)	64.7 (0.93)	...	12.0 (0.54)
Quarter 2	26.4 (0.93)	63.5 (0.99)	...	11.2 (0.49)
Quarter 3	26.3 (0.75)	62.2 (0.82)	...	12.6 (0.50)
Quarter 4	24.0 (0.74)	63.3 (0.87)	...	14.1 (0.55)
2011 full year	23.7 (0.40)	63.9 (0.49)	...	13.8 (0.30)
Quarter 1	24.0 (0.72)	63.7 (0.86)	...	13.6 (0.52)
Quarter 2	23.8 (0.72)	64.0 (0.92)	...	13.5 (0.51)
Quarter 3	23.4 (0.75)	64.2 (0.90)	...	14.0 (0.52)
Quarter 4	23.6 (0.69)	63.8 (0.82)	...	14.0 (0.53)
2012 full year	23.2 (0.38)	64.0 (0.46)	...	14.2 (0.31)
Quarter 1	24.0 (0.78)	63.6 (0.92)	...	13.8 (0.54)
Quarter 2	21.6 (0.68)	66.1 (0.90)	...	13.9 (0.58)
Quarter 3	23.5 (0.71)	63.5 (0.82)	...	14.3 (0.57)
Quarter 4	23.8 (0.71)	62.7 (0.84)	...	14.5 (0.54)
2013 full year	22.5 (0.42)	64.6 (0.49)	...	14.2 (0.32)
Quarter 1	23.3 (0.80)	63.9 (0.90)	...	14.3 (0.58)
Quarter 2	22.7 (0.72)	64.3 (0.84)	...	14.2 (0.58)
Quarter 3	22.3 (0.70)	65.0 (0.80)	...	14.1 (0.54)
Quarter 4	21.9 (0.78)	65.0 (0.90)	...	14.3 (0.56)
2014 full year	18.3 (0.38)	67.7 (0.47)	2.4 (0.12)	15.2 (0.36)
Quarter 1	20.0 (0.66)	66.3 (0.84)	1.6 (0.14)	14.9 (0.59)
Quarter 2	17.8 (0.72)	67.8 (0.79)	2.7 (0.24)	15.7 (0.64)
Quarter 3	18.1 (0.66)	67.8 (0.85)	2.7 (0.24)	15.4 (0.58)
Quarter 4	17.3 (0.65)	68.7 (0.92)	2.8 (0.21)	15.1 (0.66)
2015 full year	14.9 (0.31)	69.9 (0.47)	4.1 (0.18)	16.6 (0.37)
Quarter 1	15.2 (0.55)	70.6 (0.88)	3.9 (0.31)	15.6 (0.69)
Quarter 2	14.3 (0.53)	71.6 (0.81)	4.7 (0.30)	15.4 (0.62)
Quarter 3	15.8 (0.65)	68.3 (0.88)	4.1 (0.32)	17.3 (0.66)
Quarter 4	14.3 (0.67)	69.1 (0.96)	3.7 (0.32)	18.2 (0.74)
2016 full year	14.4 (0.42)	69.8 (0.41)	4.7 (0.16)	17.4 (0.38)
Quarter 1	13.8 (0.57)	71.0 (0.73)	4.5 (0.30)	16.9 (0.53)
Quarter 2	15.1 (0.69)	68.7 (0.68)	4.5 (0.30)	17.7 (0.75)
Quarter 3	14.2 (0.54)	69.2 (0.77)	4.9 (0.32)	18.1 (0.62)
Quarter 4	14.6 (0.65)	70.1 (0.72)	4.7 (0.29)	16.8 (0.61)
2017 (Jan–Mar)	13.6 (0.57)	71.1 (0.77)	4.7 (0.30)	16.9 (0.70)
Quarter 1	13.6 (0.57)	71.1 (0.77)	4.7 (0.30)	16.9 (0.70)

See footnotes at end of table.

Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–March 2017—Con.

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Female				
2010 full year	19.3 (0.32)	64.7 (0.47)	...	17.4 (0.38)
Quarter 1	18.4 (0.65)	66.2 (0.95)	...	16.8 (0.68)
Quarter 2	20.1 (0.76)	64.5 (0.92)	...	16.8 (0.55)
Quarter 3	19.7 (0.57)	64.2 (0.80)	...	17.3 (0.67)
Quarter 4	18.8 (0.60)	64.0 (0.87)	...	18.6 (0.68)
2011 full year	18.9 (0.36)	64.5 (0.47)	...	18.0 (0.34)
Quarter 1	19.2 (0.59)	64.3 (0.86)	...	18.1 (0.62)
Quarter 2	18.6 (0.59)	64.9 (0.81)	...	17.8 (0.57)
Quarter 3	19.3 (0.64)	64.1 (0.89)	...	17.8 (0.65)
Quarter 4	18.4 (0.71)	64.8 (0.93)	...	18.4 (0.66)
2012 full year	18.6 (0.33)	64.2 (0.44)	...	18.6 (0.34)
Quarter 1	19.6 (0.66)	63.5 (0.90)	...	18.0 (0.61)
Quarter 2	17.7 (0.60)	65.8 (0.86)	...	18.0 (0.57)
Quarter 3	18.5 (0.61)	63.5 (0.88)	...	19.5 (0.66)
Quarter 4	18.8 (0.59)	63.9 (0.76)	...	18.9 (0.59)
2013 full year	18.3 (0.37)	64.0 (0.51)	...	19.1 (0.36)
Quarter 1	18.7 (0.62)	63.4 (0.85)	...	19.3 (0.65)
Quarter 2	17.3 (0.57)	65.9 (0.79)	...	18.4 (0.59)
Quarter 3	18.9 (0.60)	63.9 (0.81)	...	18.7 (0.57)
Quarter 4	18.4 (0.67)	62.6 (0.96)	...	20.2 (0.73)
2014 full year	14.3 (0.30)	66.9 (0.46)	2.9 (0.13)	20.1 (0.36)
Quarter 1	16.8 (0.59)	65.1 (0.86)	1.8 (0.18)	19.3 (0.62)
Quarter 2	13.5 (0.56)	67.6 (0.84)	3.1 (0.23)	20.2 (0.64)
Quarter 3	14.3 (0.52)	67.4 (0.89)	3.5 (0.28)	19.7 (0.66)
Quarter 4	12.9 (0.54)	67.6 (0.85)	3.1 (0.23)	21.2 (0.73)
2015 full year	10.8 (0.29)	69.6 (0.47)	4.8 (0.17)	21.2 (0.42)
Quarter 1	10.9 (0.46)	70.2 (0.80)	4.8 (0.30)	20.5 (0.69)
Quarter 2	10.6 (0.45)	70.0 (0.75)	4.8 (0.32)	21.1 (0.71)
Quarter 3	10.8 (0.53)	69.3 (0.95)	5.6 (0.35)	21.5 (0.81)
Quarter 4	10.9 (0.53)	68.8 (0.89)	4.2 (0.31)	21.5 (0.76)
2016 full year	10.5 (0.36)	68.6 (0.48)	4.8 (0.16)	22.5 (0.45)
Quarter 1	10.1 (0.49)	69.5 (0.84)	4.8 (0.31)	22.0 (0.66)
Quarter 2	10.8 (0.47)	67.5 (0.79)	5.0 (0.33)	23.2 (0.71)
Quarter 3	10.2 (0.54)	68.3 (0.75)	4.7 (0.35)	23.4 (0.63)
Quarter 4	10.8 (0.60)	69.2 (0.87)	4.8 (0.29)	21.3 (0.73)
2017 (Jan–Mar)	10.7 (0.47)	70.0 (0.74)	4.8 (0.27)	20.7 (0.55)
Quarter 1	10.7 (0.47)	70.0 (0.74)	4.8 (0.27)	20.7 (0.55)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



National Health Interview Survey Early Release Program

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–March 2017

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Hispanic or Latino ⁵				
2010 full year	43.2 (0.91)	41.1 (0.85)	...	16.3 (0.64)
Quarter 1	42.4 (1.72)	42.9 (1.67)	...	15.4 (1.10)
Quarter 2	44.9 (1.39)	39.7 (1.37)	...	15.8 (0.92)
Quarter 3	44.1 (1.78)	40.5 (1.69)	...	15.8 (0.98)
Quarter 4	41.5 (1.38)	41.1 (1.45)	...	18.1 (1.00)
2011 full year	42.2 (0.89)	40.3 (0.82)	...	18.1 (0.63)
Quarter 1	42.0 (1.60)	41.2 (1.95)	...	17.1 (1.18)
Quarter 2	41.4 (1.46)	40.2 (1.31)	...	19.0 (0.86)
Quarter 3	42.6 (1.38)	39.5 (1.41)	...	18.6 (1.10)
Quarter 4	42.7 (1.57)	40.2 (1.39)	...	17.6 (1.00)
2012 full year	41.3 (0.89)	40.4 (0.73)	...	19.0 (0.64)
Quarter 1	42.6 (1.72)	41.0 (1.68)	...	17.1 (1.02)
Quarter 2	39.7 (1.29)	42.0 (1.49)	...	19.3 (1.04)
Quarter 3	40.5 (1.55)	39.8 (1.34)	...	20.1 (1.39)
Quarter 4	42.2 (1.58)	38.8 (1.42)	...	19.7 (1.03)
2013 full year	40.6 (0.88)	42.1 (0.70)	...	18.0 (0.62)
Quarter 1	41.4 (1.95)	40.7 (1.52)	...	18.6 (1.17)
Quarter 2	41.3 (1.51)	41.9 (1.24)	...	17.5 (0.94)
Quarter 3	39.5 (1.38)	43.0 (1.49)	...	18.1 (1.11)
Quarter 4	40.3 (1.47)	42.7 (1.40)	...	17.7 (0.95)
2014 full year	33.7 (0.76)	46.4 (0.86)	2.6 (0.30)	20.6 (0.73)
Quarter 1	35.7 (1.43)	44.8 (1.62)	1.4 (0.30)	20.1 (1.09)
Quarter 2	33.2 (1.42)	47.2 (1.55)	3.0 (0.61)	20.3 (1.16)
Quarter 3	34.0 (1.40)	46.8 (1.44)	3.4 (0.55)	19.8 (1.12)
Quarter 4	31.8 (1.47)	47.0 (1.54)	2.6 (0.37)	22.1 (1.22)
2015 full year	27.7 (0.72)	50.0 (0.85)	5.1 (0.40)	23.0 (0.84)
Quarter 1	28.3 (1.24)	49.8 (1.42)	5.4 (0.55)	22.7 (1.26)
Quarter 2	26.1 (1.30)	53.2 (1.46)	4.2 (0.58)	21.4 (1.28)
Quarter 3	29.3 (1.33)	48.2 (1.40)	5.3 (0.65)	23.1 (1.25)
Quarter 4	27.2 (1.36)	48.8 (1.56)	5.4 (0.66)	24.7 (1.41)
2016 full year	25.0 (1.20)	51.4 (1.08)	5.2 (0.40)	24.9 (1.15)
Quarter 1	24.5 (1.31)	51.6 (1.88)	5.1 (0.65)	25.2 (1.72)
Quarter 2	25.1 (1.93)	50.4 (2.23)	5.0 (0.76)	25.4 (2.08)
Quarter 3	24.5 (1.74)	50.6 (1.78)	5.1 (0.81)	26.7 (1.52)
Quarter 4	25.9 (1.79)	53.1 (1.60)	5.8 (0.81)	22.3 (1.24)
2017 (Jan–Mar)	24.1 (1.38)	52.2 (1.78)	4.5 (0.63)	24.3 (1.64)
Quarter 1	24.1 (1.38)	52.2 (1.78)	4.5 (0.63)	24.3 (1.64)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–March 2017—Con.

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Non-Hispanic white, single race				
2010 full year	16.4 (0.35)	72.2 (0.52)	...	12.8 (0.34)
Quarter 1	15.6 (0.63)	73.4 (0.93)	...	12.5 (0.60)
Quarter 2	17.0 (0.65)	72.7 (0.83)	...	11.7 (0.49)
Quarter 3	16.7 (0.64)	71.5 (0.92)	...	13.0 (0.63)
Quarter 4	16.1 (0.66)	71.4 (0.89)	...	14.1 (0.61)
2011 full year	15.6 (0.35)	72.5 (0.48)	...	13.4 (0.31)
Quarter 1	16.1 (0.64)	71.8 (0.87)	...	13.6 (0.57)
Quarter 2	15.8 (0.60)	72.9 (0.85)	...	12.6 (0.50)
Quarter 3	15.7 (0.64)	72.6 (0.86)	...	13.3 (0.61)
Quarter 4	14.8 (0.59)	72.8 (0.94)	...	14.1 (0.62)
2012 full year	15.1 (0.31)	72.7 (0.46)	...	13.7 (0.33)
Quarter 1	16.0 (0.67)	72.3 (0.88)	...	13.1 (0.58)
Quarter 2	14.2 (0.62)	74.5 (0.83)	...	13.1 (0.51)
Quarter 3	15.1 (0.58)	71.9 (0.87)	...	14.7 (0.61)
Quarter 4	15.1 (0.59)	72.3 (0.85)	...	13.9 (0.57)
2013 full year	14.5 (0.34)	72.7 (0.49)	...	14.4 (0.32)
Quarter 1	15.2 (0.62)	71.8 (0.91)	...	14.6 (0.62)
Quarter 2	13.9 (0.54)	73.6 (0.82)	...	14.2 (0.61)
Quarter 3	14.7 (0.61)	72.8 (0.80)	...	14.0 (0.52)
Quarter 4	14.0 (0.61)	72.6 (0.96)	...	14.7 (0.67)
2014 full year	11.6 (0.29)	75.3 (0.47)	2.5 (0.13)	14.6 (0.36)
Quarter 1	13.5 (0.58)	73.7 (0.87)	1.6 (0.16)	14.1 (0.66)
Quarter 2	11.1 (0.58)	75.5 (0.81)	2.6 (0.23)	14.9 (0.61)
Quarter 3	11.4 (0.52)	75.6 (0.88)	2.9 (0.28)	14.6 (0.67)
Quarter 4	10.5 (0.55)	76.2 (0.93)	2.8 (0.24)	14.8 (0.71)
2015 full year	8.7 (0.25)	77.3 (0.47)	4.3 (0.18)	15.7 (0.42)
Quarter 1	8.7 (0.50)	78.6 (0.78)	4.0 (0.30)	14.4 (0.63)
Quarter 2	8.8 (0.47)	78.0 (0.78)	4.7 (0.33)	14.9 (0.68)
Quarter 3	8.9 (0.48)	75.7 (0.93)	4.6 (0.39)	17.0 (0.80)
Quarter 4	8.3 (0.55)	77.0 (0.96)	3.7 (0.36)	16.2 (0.81)
2016 full year	8.6 (0.25)	76.6 (0.38)	4.6 (0.16)	16.6 (0.34)
Quarter 1	8.4 (0.47)	77.8 (0.60)	4.4 (0.32)	15.7 (0.55)
Quarter 2	9.0 (0.41)	75.0 (0.72)	4.7 (0.30)	17.6 (0.59)
Quarter 3	7.9 (0.41)	76.7 (0.67)	4.7 (0.35)	17.1 (0.60)
Quarter 4	8.9 (0.44)	76.8 (0.59)	4.7 (0.29)	15.9 (0.57)
2017 (Jan–Mar)	8.5 (0.49)	78.5 (0.66)	5.0 (0.32)	14.8 (0.51)
Quarter 1	8.5 (0.49)	78.5 (0.66)	5.0 (0.32)	14.8 (0.51)
Non-Hispanic black, single race				
2010 full year	27.2 (0.75)	49.3 (0.81)	...	25.3 (0.70)
Quarter 1	27.9 (1.41)	49.5 (1.60)	...	24.3 (1.41)
Quarter 2	26.5 (1.33)	49.4 (1.72)	...	25.7 (1.32)
Quarter 3	28.6 (1.14)	48.6 (1.35)	...	24.8 (1.31)
Quarter 4	25.6 (1.33)	49.6 (1.80)	...	26.3 (1.46)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–March 2017—Con.

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	24.8 (0.65)	50.5 (0.79)	...	26.2 (0.75)
Quarter 1	23.9 (1.26)	52.2 (1.67)	...	25.8 (1.18)
Quarter 2	24.2 (1.24)	51.1 (1.55)	...	26.5 (1.44)
Quarter 3	25.0 (1.16)	50.1 (1.49)	...	25.9 (1.27)
Quarter 4	26.2 (1.44)	48.8 (1.57)	...	26.6 (1.49)
2012 full year	23.6 (0.61)	50.8 (0.75)	...	27.0 (0.68)
Quarter 1	26.0 (1.19)	46.3 (1.50)	...	29.1 (1.21)
Quarter 2	21.9 (1.34)	53.1 (1.93)	...	25.8 (1.40)
Quarter 3	24.1 (1.05)	51.7 (1.47)	...	25.7 (1.27)
Quarter 4	22.6 (1.25)	52.2 (1.52)	...	27.3 (1.34)
2013 full year	24.9 (0.62)	50.0 (0.91)	...	26.6 (0.80)
Quarter 1	25.5 (1.16)	50.6 (1.58)	...	25.0 (1.37)
Quarter 2	23.6 (1.23)	50.8 (1.68)	...	26.7 (1.32)
Quarter 3	25.9 (1.23)	50.3 (1.45)	...	26.0 (1.25)
Quarter 4	24.6 (1.39)	48.3 (1.70)	...	28.7 (1.55)
2014 full year	17.7 (0.60)	53.4 (0.84)	2.9 (0.27)	30.5 (0.73)
Quarter 1	20.2 (1.16)	51.6 (1.67)	1.4 (0.38)	29.7 (1.30)
Quarter 2	15.9 (1.04)	54.4 (1.73)	3.7 (0.51)	31.1 (1.53)
Quarter 3	17.5 (1.00)	52.6 (1.81)	3.3 (0.48)	31.5 (1.54)
Quarter 4	17.2 (1.16)	55.0 (1.82)	3.3 (0.55)	29.8 (1.59)
2015 full year	14.4 (0.57)	57.8 (0.90)	4.0 (0.34)	29.7 (0.84)
Quarter 1	15.6 (1.00)	56.7 (1.50)	4.1 (0.73)	29.7 (1.46)
Quarter 2	13.5 (0.97)	57.9 (1.72)	4.2 (0.61)	30.5 (1.37)
Quarter 3	14.7 (1.17)	60.3 (1.55)	4.4 (0.53)	27.2 (1.18)
Quarter 4	14.0 (1.14)	56.5 (1.99)	3.2 (0.48)	31.4 (1.89)
2016 full year	15.0 (0.62)	56.7 (0.95)	4.1 (0.36)	29.9 (1.06)
Quarter 1	13.0 (1.34)	58.8 (1.86)	4.6 (0.63)	29.6 (1.66)
Quarter 2	16.7 (1.17)	55.7 (1.96)	4.7 (0.66)	29.4 (1.84)
Quarter 3	15.7 (1.20)	56.7 (1.70)	3.6 (0.71)	29.7 (1.47)
Quarter 4	14.6 (1.29)	55.6 (1.68)	3.7 (0.56)	31.1 (1.55)
2017 (Jan–Mar)	14.2 (1.18)	55.9 (1.18)	3.7 (0.46)	31.7 (1.28)
Quarter 1	14.2 (1.18)	55.9 (1.18)	3.7 (0.46)	31.7 (1.28)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

⁵Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

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National Health Interview Survey Early Release Program

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–March 2017

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
Poor (<100% FPL)				
2010 full year	42.2 (0.99)	19.6 (0.89)	...	38.8 (0.97)
Quarter 1	44.0 (1.79)	17.6 (0.68)	...	39.1 (1.82)
Quarter 2	43.5 (1.87)	19.4 (1.67)	...	37.5 (1.83)
Quarter 3	43.7 (1.75)	17.0 (1.50)	...	40.0 (1.75)
Quarter 4	38.1 (1.58)	24.1 (1.61)	...	38.6 (1.74)
2011 full year	40.1 (0.91)	21.2 (1.02)	...	39.6 (0.93)
Quarter 1	39.8 (0.64)	21.6 (1.79)	...	39.3 (1.67)
Quarter 2	37.2 (1.83)	23.8 (2.48)	...	39.9 (1.87)
Quarter 3	42.2 (1.84)	17.1 (1.86)	...	41.7 (1.64)
Quarter 4	41.1 (1.84)	22.1 (1.98)	...	37.5 (1.83)
2012 full year	40.1 (0.90)	20.2 (1.09)	...	40.8 (0.94)
Quarter 1	42.7 (1.62)	19.6 (1.69)	...	38.6 (1.60)
Quarter 2	38.9 (2.03)	21.0 (3.13)	...	41.3 (1.71)
Quarter 3	41.0 (1.43)	17.2 (1.46)	...	42.3 (1.82)
Quarter 4	37.6 (1.58)	22.6 (1.96)	...	40.9 (1.62)
2013 full year	39.3 (1.00)	19.0 (0.97)	...	42.4 (0.95)
Quarter 1	39.1 (1.74)	19.5 (1.87)	...	42.4 (1.91)
Quarter 2	38.9 (1.79)	19.0 (2.22)	...	42.7 (1.76)
Quarter 3	40.2 (1.90)	18.1 (2.26)	...	42.3 (1.76)
Quarter 4	39.2 (1.77)	19.3 (1.70)	...	42.3 (1.77)
2014 full year	32.3 (0.93)	21.9 (0.92)	2.2 (0.20)	46.6 (0.95)
Quarter 1	34.9 (1.53)	20.5 (1.59)	1.0 (0.27)	45.4 (1.74)
Quarter 2	33.5 (2.03)	20.2 (1.61)	2.5 (0.49)	47.0 (2.11)
Quarter 3	32.0 (1.78)	21.5 (2.06)	2.1 (0.37)	47.5 (1.70)
Quarter 4	29.1 (1.72)	25.1 (2.00)	3.2 (0.50)	46.5 (1.88)
2015 full year	25.2 (0.90)	24.3 (1.04)	3.8 (0.39)	51.7 (1.08)
Quarter 1	28.0 (1.57)	23.1 (1.50)	3.6 (0.65)	50.3 (2.06)
Quarter 2	25.0 (1.51)	24.6 (1.97)	4.3 (0.85)	51.6 (1.93)
Quarter 3	25.2 (1.70)	23.5 (2.67)	4.6 (0.82)	52.7 (2.55)
Quarter 4	22.4 (1.63)	25.9 (2.20)	2.7 (0.53)	52.4 (1.95)
2016 full year	26.2 (1.31)	21.6 (0.92)	2.9 (0.27)	53.7 (1.29)
Quarter 1	24.7 (1.61)	23.8 (1.70)	2.9 (0.45)	52.8 (1.77)
Quarter 2	27.2 (2.05)	19.3 (1.49)	2.4 (0.47)	54.6 (2.25)
Quarter 3	26.2 (2.08)	18.4 (1.60)	2.6 (0.42)	57.6 (2.23)
Quarter 4	26.7 (2.03)	24.6 (1.62)	3.7 (0.64)	50.0 (1.98)
2017 (Jan–Mar)	22.6 (1.51)	29.2 (2.28)	3.5 (0.70)	49.3 (2.10)
Quarter 1	22.6 (1.51)	29.2 (2.28)	3.5 (0.70)	49.3 (2.10)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–March 2017—Con.

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
Near poor (≥100% and <200% FPL)				
2010 full year	43.0 (0.74)	34.7 (0.74)	...	23.7 (0.55)
Quarter 1	43.8 (1.41)	34.8 (1.48)	...	22.8 (1.15)
Quarter 2	44.2 (1.52)	35.0 (1.44)	...	22.1 (1.17)
Quarter 3	43.9 (1.50)	34.3 (1.54)	...	23.5 (1.14)
Quarter 4	40.2 (1.51)	34.8 (1.59)	...	26.6 (1.35)
2011 full year	40.1 (0.72)	35.4 (0.75)	...	25.9 (0.69)
Quarter 1	40.3 (1.24)	36.1 (1.37)	...	25.4 (1.21)
Quarter 2	42.1 (1.41)	33.5 (1.32)	...	25.7 (1.14)
Quarter 3	39.0 (1.31)	36.0 (1.34)	...	26.0 (1.25)
Quarter 4	39.2 (1.49)	35.9 (1.40)	...	26.5 (1.27)
2012 full year	39.2 (0.68)	37.2 (0.74)	...	25.2 (0.57)
Quarter 1	41.0 (1.28)	35.8 (1.44)	...	24.4 (1.13)
Quarter 2	37.8 (1.42)	38.4 (1.46)	...	25.7 (1.12)
Quarter 3	38.0 (1.51)	38.6 (1.62)	...	25.1 (1.16)
Quarter 4	40.0 (1.44)	35.9 (1.45)	...	25.4 (1.21)
2013 full year	38.5 (0.84)	36.4 (0.78)	...	26.6 (0.78)
Quarter 1	39.2 (1.42)	33.8 (1.38)	...	28.4 (1.42)
Quarter 2	38.4 (1.55)	37.9 (1.50)	...	25.4 (1.33)
Quarter 3	37.9 (1.34)	39.3 (1.39)	...	24.1 (1.19)
Quarter 4	38.6 (1.42)	34.6 (1.38)	...	28.5 (1.44)
2014 full year	30.9 (0.72)	41.2 (0.81)	4.5 (0.33)	29.6 (0.76)
Quarter 1	34.4 (1.58)	39.3 (1.53)	2.2 (0.40)	27.5 (1.24)
Quarter 2	28.5 (1.20)	43.5 (1.38)	5.1 (0.56)	29.6 (1.21)
Quarter 3	31.3 (1.32)	42.1 (1.43)	5.3 (0.70)	28.7 (1.27)
Quarter 4	29.2 (1.31)	40.0 (1.47)	5.2 (0.66)	32.6 (1.41)
2015 full year	24.1 (0.62)	43.8 (0.79)	7.9 (0.48)	34.2 (0.80)
Quarter 1	23.8 (1.14)	45.9 (1.43)	8.6 (0.92)	32.8 (1.43)
Quarter 2	24.0 (1.17)	45.8 (1.47)	8.6 (0.88)	32.5 (1.42)
Quarter 3	24.4 (1.22)	41.3 (1.54)	7.3 (0.99)	36.1 (1.47)
Quarter 4	24.2 (1.35)	42.4 (1.68)	7.0 (0.82)	35.5 (1.69)
2016 full year	23.2 (0.76)	40.3 (0.95)	7.5 (0.51)	38.5 (0.91)
Quarter 1	23.6 (1.33)	43.0 (1.86)	7.0 (0.90)	36.2 (1.78)
Quarter 2	23.4 (1.28)	39.1 (1.40)	7.5 (0.75)	39.2 (1.39)
Quarter 3	22.0 (1.40)	39.2 (1.37)	7.2 (0.91)	40.5 (1.64)
Quarter 4	23.8 (1.34)	39.8 (1.72)	8.3 (0.97)	38.1 (1.59)
2017 (Jan–Mar)	23.0 (1.16)	42.0 (1.39)	6.6 (0.68)	36.9 (1.64)
Quarter 1	23.0 (1.16)	42.0 (1.39)	6.6 (0.68)	36.9 (1.64)
Not poor (≥200% FPL)				
2010 full year	12.6 (0.27)	80.8 (0.36)	...	8.1 (0.27)
Quarter 1	11.5 (0.50)	82.2 (0.66)	...	7.8 (0.45)
Quarter 2	13.2 (0.57)	80.8 (0.66)	...	7.4 (0.36)
Quarter 3	13.2 (0.57)	80.1 (0.65)	...	8.1 (0.51)
Quarter 4	12.4 (0.54)	80.1 (0.69)	...	9.0 (0.46)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–March 2017—Con.

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
2011 full year	12.0 (0.28)	81.1 (0.35)	...	8.3 (0.23)
Quarter 1	12.0 (0.55)	81.1 (0.64)	...	8.3 (0.40)
Quarter 2	12.5 (0.49)	80.5 (0.64)	...	8.4 (0.39)
Quarter 3	12.0 (0.49)	81.5 (0.64)	...	8.0 (0.39)
Quarter 4	11.6 (0.50)	81.4 (0.66)	...	8.6 (0.43)
2012 full year	11.4 (0.26)	81.3 (0.38)	...	8.7 (0.29)
Quarter 1	11.5 (0.52)	81.4 (0.68)	...	8.5 (0.52)
Quarter 2	11.3 (0.52)	81.7 (0.68)	...	8.5 (0.44)
Quarter 3	11.3 (0.44)	81.0 (0.64)	...	9.3 (0.51)
Quarter 4	11.7 (0.44)	80.9 (0.62)	...	8.7 (0.49)
2013 full year	11.4 (0.27)	81.2 (0.37)	...	8.9 (0.26)
Quarter 1	11.7 (0.56)	81.7 (0.74)	...	8.1 (0.47)
Quarter 2	11.4 (0.48)	81.0 (0.62)	...	9.0 (0.45)
Quarter 3	12.0 (0.54)	80.0 (0.66)	...	9.6 (0.44)
Quarter 4	10.5 (0.59)	82.0 (0.73)	...	8.8 (0.47)
2014 full year	8.9 (0.23)	83.9 (0.35)	2.3 (0.12)	8.5 (0.26)
Quarter 1	10.1 (0.48)	83.0 (0.62)	1.7 (0.18)	8.1 (0.44)
Quarter 2	8.6 (0.43)	83.0 (0.64)	2.5 (0.23)	9.7 (0.48)
Quarter 3	8.5 (0.40)	84.4 (0.57)	2.7 (0.27)	8.3 (0.42)
Quarter 4	8.3 (0.44)	85.1 (0.61)	2.4 (0.22)	8.0 (0.46)
2015 full year	7.6 (0.22)	84.7 (0.33)	3.8 (0.17)	9.1 (0.27)
Quarter 1	7.5 (0.42)	85.3 (0.65)	3.5 (0.28)	8.6 (0.49)
Quarter 2	7.5 (0.36)	85.2 (0.56)	3.8 (0.28)	8.8 (0.46)
Quarter 3	8.1 (0.46)	83.8 (0.64)	4.3 (0.32)	9.6 (0.46)
Quarter 4	7.3 (0.47)	84.7 (0.68)	3.4 (0.32)	9.3 (0.54)
2016 full year	7.2 (0.25)	84.6 (0.29)	4.3 (0.16)	9.6 (0.22)
Quarter 1	6.5 (0.37)	85.9 (0.54)	4.4 (0.32)	9.0 (0.36)
Quarter 2	7.5 (0.42)	83.9 (0.51)	4.3 (0.27)	10.0 (0.45)
Quarter 3	7.1 (0.43)	84.6 (0.49)	4.4 (0.33)	10.0 (0.41)
Quarter 4	7.8 (0.36)	84.1 (0.58)	4.2 (0.27)	9.5 (0.47)
2017 (Jan–Mar)	7.8 (0.41)	84.5 (0.51)	4.5 (0.30)	9.2 (0.39)
Quarter 1	7.8 (0.41)	84.5 (0.51)	4.5 (0.30)	9.2 (0.39)

... Category not applicable.

¹Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 12.2% in 2010, 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, 8.8% in 2015, 7.8% in 2016 and 6.6% in the first quarter of 2017. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

²A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

⁴Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁵Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



National Health Interview Survey Early Release Program

Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–March 2017

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Age group		
Under age 65		
2014 full year	2.2 (0.10)	5.9
Quarter 1	1.4 (0.11)	3.7
Quarter 2	2.4 (0.17)	6.3
Quarter 3	2.5 (0.20)	6.8
Quarter 4	2.5 (0.18)	6.7
2015 full year	3.8 (0.14)	10.2
Quarter 1	3.6 (0.22)	9.7
Quarter 2	4.0 (0.24)	10.7
Quarter 3	4.2 (0.29)	11.3
Quarter 4	3.4 (0.24)	9.1
2016 full year	4.1 (0.13)	11.2
Quarter 1	4.0 (0.23)	10.8
Quarter 2	4.1 (0.26)	11.1
Quarter 3	4.1 (0.29)	11.1
Quarter 4	4.3 (0.26)	11.6
2017 (Jan–Mar)	4.0 (0.22)	10.8
Quarter 1	4.0 (0.22)	10.8
Age 0–17		
2014 full year	0.9 (0.11)	0.7
Quarter 1	0.5 (0.14)	0.4
Quarter 2	1.0 (0.17)	0.7
Quarter 3	1.0 (0.19)	0.8
Quarter 4	1.3 (0.28)	0.9
2015 full year	2.0 (0.18)	1.4
Quarter 1	1.6 (0.23)	1.2
Quarter 2	1.9 (0.29)	1.4
Quarter 3	2.5 (0.39)	1.8
Quarter 4	1.9 (0.32)	1.4
2016 full year	2.5 (0.17)	1.8
Quarter 1	2.2 (0.27)	1.6
Quarter 2	2.4 (0.32)	1.8
Quarter 3	2.4 (0.38)	1.7
Quarter 4	3.0 (0.37)	2.2
2017 (Jan–Mar)	1.9 (0.27)	1.4
Quarter 1	1.9 (0.27)	1.4
Age 18–64		
2014 full year	2.7 (0.11)	5.2
Quarter 1	1.7 (0.13)	3.3
Quarter 2	2.9 (0.21)	5.7
Quarter 3	3.1 (0.23)	6.1
Quarter 4	2.9 (0.19)	5.7

See footnotes at the end of the table.

Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–March 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2015 full year	4.5 (0.16)	8.8
Quarter 1	4.4 (0.27)	8.6
Quarter 2	4.8 (0.27)	9.3
Quarter 3	4.9 (0.29)	9.5
Quarter 4	3.9 (0.27)	7.8
2016 full year	4.7 (0.15)	9.4
Quarter 1	4.7 (0.27)	9.2
Quarter 2	4.8 (0.28)	9.4
Quarter 3	4.8 (0.30)	9.4
Quarter 4	4.8 (0.26)	9.4
2017 (Jan–Mar)	4.8 (0.24)	9.4
Quarter 1	4.8 (0.24)	9.4
Age 18–29		
2014 full year	2.1 (0.14)	1.1
Quarter 1	1.3 (0.21)	0.6
Quarter 2	2.4 (0.31)	1.2
Quarter 3	2.3 (0.28)	1.2
Quarter 4	2.5 (0.30)	1.3
2015 full year	3.4 (0.23)	1.8
Quarter 1	3.0 (0.42)	1.6
Quarter 2	4.0 (0.39)	2.1
Quarter 3	3.8 (0.49)	1.9
Quarter 4	2.8 (0.36)	1.5
2016 full year	3.8 (0.18)	2.0
Quarter 1	3.1 (0.37)	1.6
Quarter 2	3.9 (0.45)	2.1
Quarter 3	3.9 (0.42)	2.0
Quarter 4	4.1 (0.39)	2.1
2017 (Jan–Mar)	4.0 (0.37)	2.1
Quarter 1	4.0 (0.37)	2.1
Age 30–64		
2014 full year	2.9 (0.13)	4.1
Quarter 1	1.8 (0.16)	2.6
Quarter 2	3.1 (0.23)	4.4
Quarter 3	3.4 (0.27)	4.9
Quarter 4	3.1 (0.22)	4.4
2015 full year	4.9 (0.17)	7.0
Quarter 1	4.9 (0.28)	7.0
Quarter 2	5.1 (0.30)	7.3
Quarter 3	5.2 (0.31)	7.6
Quarter 4	4.3 (0.32)	6.3
2016 full year	5.1 (0.17)	7.4
Quarter 1	5.3 (0.29)	7.6
Quarter 2	5.1 (0.31)	7.3
Quarter 3	5.1 (0.35)	7.4
Quarter 4	5.0 (0.30)	7.3
2017 (Jan–Mar)	5.0 (0.29)	7.3
Quarter 1	5.0 (0.29)	7.3

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage." These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population

SOURCE: NCHS, National Health Interview Survey, 2014–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.



National Health Interview Survey Early Release Program

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–March 2017

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Sex		
Male		
2014 full year	2.4 (0.12)	2.3
Quarter 1	1.6 (0.14)	1.5
Quarter 2	2.7 (0.24)	2.6
Quarter 3	2.7 (0.24)	2.6
Quarter 4	2.8 (0.21)	2.7
2015 full year	4.1 (0.18)	4.0
Quarter 1	3.9 (0.31)	3.7
Quarter 2	4.7 (0.30)	4.5
Quarter 3	4.1 (0.32)	4.1
Quarter 4	3.7 (0.32)	3.6
2016 full year	4.7 (0.16)	4.5
Quarter 1	4.5 (0.30)	4.4
Quarter 2	4.5 (0.30)	4.3
Quarter 3	4.9 (0.32)	4.7
Quarter 4	4.7 (0.29)	4.6
2017 (Jan–Mar)	4.7 (0.30)	4.5
Quarter 1	4.7 (0.30)	4.5
Female		
2014 full year	2.9 (0.13)	2.9
Quarter 1	1.8 (0.18)	1.8
Quarter 2	3.1 (0.23)	3.1
Quarter 3	3.5 (0.28)	3.4
Quarter 4	3.1 (0.23)	3.1
2015 full year	4.8 (0.17)	4.8
Quarter 1	4.8 (0.30)	4.8
Quarter 2	4.8 (0.32)	4.8
Quarter 3	5.6 (0.35)	5.6
Quarter 4	4.2 (0.31)	4.2
2016 full year	4.8 (0.16)	4.9
Quarter 1	4.8 (0.31)	4.9
Quarter 2	5.0 (0.33)	5.0
Quarter 3	4.7 (0.35)	4.7
Quarter 4	4.8 (0.29)	4.8
2017 (Jan–Mar)	4.8 (0.27)	4.9
Quarter 1	4.8 (0.27)	4.9
Race/ethnicity		
Hispanic or Latino ²		
2014 full year	2.6 (0.30)	0.9
Quarter 1	1.4 (0.30)	0.5
Quarter 2	3.0 (0.61)	1.0
Quarter 3	3.4 (0.55)	1.1
Quarter 4	2.6 (0.37)	0.9

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–March 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2015 full year	5.1 (0.40)	1.7
Quarter 1	5.4 (0.55)	1.8
Quarter 2	4.2 (0.58)	1.4
Quarter 3	5.3 (0.65)	1.8
Quarter 4	5.4 (0.66)	1.9
2016 full year	5.2 (0.40)	1.8
Quarter 1	5.1 (0.65)	1.8
Quarter 2	5.0 (0.76)	1.7
Quarter 3	5.1 (0.81)	1.8
Quarter 4	5.8 (0.81)	2.0
2017 (Jan–Mar)	4.5 (0.63)	1.6
Quarter 1	4.5 (0.63)	1.6
Non-Hispanic white, single race		
2014 full year	2.5 (0.13)	3.0
Quarter 1	1.6 (0.16)	1.9
Quarter 2	2.6 (0.23)	3.2
Quarter 3	2.9 (0.28)	3.5
Quarter 4	2.8 (0.24)	3.4
2015 full year	4.3 (0.18)	5.2
Quarter 1	4.0 (0.30)	4.9
Quarter 2	4.7 (0.33)	5.8
Quarter 3	4.6 (0.39)	5.5
Quarter 4	3.7 (0.36)	4.5
2016 full year	4.6 (0.16)	5.6
Quarter 1	4.4 (0.32)	5.3
Quarter 2	4.7 (0.30)	5.6
Quarter 3	4.7 (0.35)	5.7
Quarter 4	4.7 (0.29)	5.6
2017 (Jan–Mar)	5.0 (0.32)	6.0
Quarter 1	5.0 (0.32)	6.0
Non-Hispanic black, single race		
2014 full year	2.9 (0.27)	0.7
Quarter 1	1.4 (0.38)	0.3
Quarter 2	3.7 (0.51)	0.9
Quarter 3	3.3 (0.48)	0.8
Quarter 4	3.3 (0.55)	0.8
2015 full year	4.0 (0.34)	1.0
Quarter 1	4.1 (0.73)	1.0
Quarter 2	4.2 (0.61)	1.0
Quarter 3	4.4 (0.53)	1.1
Quarter 4	3.2 (0.48)	0.8
2016 full year	4.1 (0.36)	1.0
Quarter 1	4.6 (0.63)	1.1
Quarter 2	4.7 (0.66)	1.1
Quarter 3	3.6 (0.71)	0.9
Quarter 4	3.7 (0.56)	0.9
2017 (Jan–Mar)	3.7 (0.46)	0.9
Quarter 1	3.7 (0.46)	0.9

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–March 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Poverty status ³		
Poor (<100% FPL)		
2014 full year	2.2 (0.20)	0.6
Quarter 1	1.0 (0.27)	0.3
Quarter 2	2.5 (0.49)	0.7
Quarter 3	2.1 (0.37)	0.6
Quarter 4	3.2 (0.50)	0.9
2015 full year	3.8 (0.39)	0.9
Quarter 1	3.6 (0.65)	0.9
Quarter 2	4.3 (0.85)	1.0
Quarter 3	4.6 (0.82)	1.1
Quarter 4	2.7 (0.53)	0.7
2016 full year	2.9 (0.27)	0.7
Quarter 1	2.9 (0.45)	0.7
Quarter 2	2.4 (0.47)	0.6
Quarter 3	2.6 (0.42)	0.6
Quarter 4	3.7 (0.64)	0.9
2017 (Jan–Mar)	3.5 (0.70)	0.8
Quarter 1	3.5 (0.70)	0.8
Near poor (≥100% and <200% FPL)		
2014 full year	4.5 (0.33)	1.6
Quarter 1	2.2 (0.40)	0.8
Quarter 2	5.1 (0.56)	1.7
Quarter 3	5.3 (0.70)	1.9
Quarter 4	5.2 (0.66)	1.8
2015 full year	7.9 (0.48)	2.7
Quarter 1	8.6 (0.92)	2.9
Quarter 2	8.6 (0.88)	2.9
Quarter 3	7.3 (0.99)	2.6
Quarter 4	7.0 (0.82)	2.5
2016 full year	7.5 (0.51)	2.5
Quarter 1	7.0 (0.90)	2.5
Quarter 2	7.5 (0.75)	2.5
Quarter 3	7.2 (0.91)	2.4
Quarter 4	8.3 (0.97)	2.7
2017 (Jan–Mar)	6.6 (0.68)	2.2
Quarter 1	6.6 (0.68)	2.2
Not poor (≥200% FPL)		
2014 full year	2.3 (0.12)	3.1
Quarter 1	1.7 (0.18)	2.2
Quarter 2	2.5 (0.23)	3.4
Quarter 3	2.7 (0.27)	3.6
Quarter 4	2.4 (0.22)	3.1
2015 full year	3.8 (0.17)	5.1
Quarter 1	3.5 (0.28)	4.7
Quarter 2	3.8 (0.28)	5.2
Quarter 3	4.3 (0.32)	5.9
Quarter 4	3.4 (0.32)	4.6

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–March 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2016 full year	4.3 (0.16)	6.0
Quarter 1	4.4 (0.32)	6.0
Quarter 2	4.3 (0.27)	6.0
Quarter 3	4.4 (0.33)	6.1
Quarter 4	4.2 (0.27)	6.0
2017 (Jan–Mar)	4.5 (0.30)	6.2
Quarter 1	4.5 (0.30)	6.2

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

²Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

³Based on family income and family size, using the U.S. Census Bureau’s poverty thresholds. “Poor” persons are defined as those below the poverty threshold; “Near poor” persons have incomes of 100% to less than 200% of the poverty threshold; and “Not poor” persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 8.8% in 2014, 8.8% in 2015, 7.8% in 2016 and 6.6% in the first quarter of 2017. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

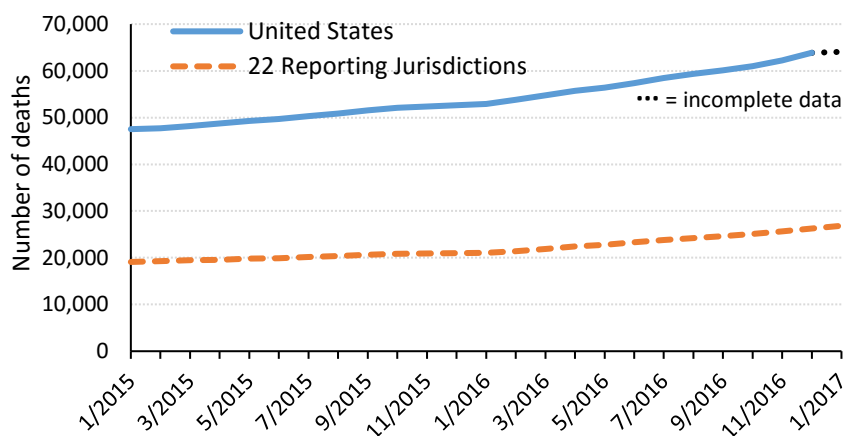
NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.” These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2014–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Emily P. Zammiti and Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics.

PROVISIONAL COUNTS OF DRUG OVERDOSE DEATHS, as of 8/6/2017

12 Month-Ending Drug Overdose Deaths



Provisional counts for 2016-2017 are based on data available for analysis as of the date specified. Counts for 2015 are based on final annual data. Provisional counts may be incomplete and causes of death may be pending investigation (see Notes on Data Quality). Line segments shown as ... represent likely underreporting due to incomplete data. Provisional counts for 12 months-ending (presented in the table) are the number of deaths received and processed for the 12 months that end with the specified month. These counts include all seasons of the year and are insensitive to reporting variations by seasonality. Deaths are reported by the jurisdiction in which the death occurred.

Selected Jurisdictions	Drug overdose deaths			Data quality	
	Number of deaths for 12 month-ending			12 month-ending Jan-2017	
	Jan-2016	Jan-2017	% Change	% Complete	% Pending investigation
US Total	52,898	64,070	21	99+	0.25
22 Reporting Jurisdictions	21,061	26,841	27	100	0.07
Alaska	126	126	0	100	0.09
Arkansas	378	382	1	100	0.08
Colorado	913	970	6	100	0.05
Delaware	181	309	71	100	0.01
Florida	3,324	5,167	55	100	0.06
Georgia	1,299	1,366	5	100	0.10
Illinois	1,893	2,518	33	100	0.04
Indiana	1,228	1,566	28	100	0.02
Iowa	303	324	7	99+	0.00
Kentucky	1,253	1,480	18	100	0.01
Louisiana	890	1,015	14	100	0.01
Maine	270	359	33	100	0.11
Maryland	1,303	2,171	67	100	0.04
Minnesota	607	655	8	100	0.00
Missouri	1,096	1,384	26	100	0.02
Nebraska	122	112	-8	100	0.04
New York City	987	1,478	50	100	0.08
North Dakota	62	80	29	99+	0.28
Texas	2,593	2,799	8	100	0.18
Virginia	1,005	1,387	38	100	0.02
Washington	1,134	1,102	-3	100	0.04
Wyoming	94	91	-3	100	0.00

NOTES ON DATA QUALITY: Provisional counts should be interpreted with caution and in the context of the data quality. Percent complete indicates the percentage of death records available for analysis. Percent pending investigation refers to the percentage of available records that are pending investigation and do not have a final cause of death. Drug overdose deaths are often initially reported with no cause of death (pending investigation) as they require lengthy investigation, including toxicology. Drug overdose deaths are identified using ICD-10 underlying cause-of-death codes X40–X44, X60–X64, X85, and Y10–Y14. Reporting jurisdictions were selected for inclusion based on two measures of data quality: 1) overall completeness of reporting ($\geq 90\%$), and 2) percentage of records pending investigation ($\leq 1.2\%$).

PROVISIONAL COUNTS OF DRUG OVERDOSE DEATHS, as of 8/6/2017

Provisional counts for 2016 and 2017 are based on data available for analysis as of the date specified. Provisional counts should be interpreted with caution and in the context of the data quality. Provisional counts may be incomplete and causes of death may be pending investigation. Reporting of specific drugs and drug classes varies by jurisdiction and estimates should be interpreted with caution. Deaths are reported by the jurisdiction in which the death occurred.

Drug overdose deaths involving specific drugs and drug classes, United States and 7 Jurisdictions, 12 month-ending Jan 2016, Jan 2017

Drug Type	United States		Alaska		Iowa		Maine		Maryland		New York City		Virginia		Washington	
	Number of deaths for 12 month-ending															
	Jan-16	Jan-17	Jan-16	Jan-17	Jan-16	Jan-17	Jan-16	Jan-17	Jan-16	Jan-17	Jan-16	Jan-17	Jan-16	Jan-17	Jan-16	Jan-17
Heroin (T40.1)	13,219	15,446	35	50	40	52	49	54	418	679	421	595	339	451	323	285
Natural and semi-synthetic opioids (T40.2)	12,726	14,427	60	40	76	87	108	131	394	712	222	337	270	346	272	281
Methadone (T40.3)	3,276	3,314	13	11	22	15	34	38	179	200	125	177	73	70	119	127
Synthetic opioids excluding methadone (T40.4)	9,945	20,145	13	10	47	61	111	208	386	1,222	154	628	263	692	61	101
Cocaine (T40.5)	6,986	10,619	9	15	17	18	32	58	154	328	308	537	168	263	86	82
Psychostimulants with abuse potential (T43.6)	5,922	7,663	27	55	61	81	23	31	21	48	49	60	45	68	316	338
Quality: % of overdose deaths with drug(s) specified	83%	85%	90%	99%	90%	93%	99%	99%	99%	99%	98%	100%	98%	99%	95%	93%

NOTES ON DATA QUALITY: Provisional counts for 12 months-ending are the number of deaths received and processed for the 12 month period ending in the month indicated. Deaths are classified by reporting jurisdiction in which the death occurred. Jurisdictions are selected for inclusion in the report based on two measures of data quality: 1) overall completeness of reporting ($\geq 90\%$); 2) percentage of records pending investigation ($\leq 1.2\%$); and for reporting deaths involving specific drugs and drug classes, 3) percentage of overdose deaths with drug specified ($\geq 92\%$). Drug overdose deaths are identified using ICD-10 underlying cause-of-death codes X40–X44, X60–X64, X85, and Y10–Y14. Drug overdose deaths involving selected drug categories are identified by ICD-10 multiple-cause-of-death codes (MCOD): heroin, T40.1; natural and semisynthetic opioids, T40.2; methadone, T40.3; synthetic opioids excluding methadone, T40.4; cocaine, T40.5; and psychostimulants with abuse potential, T43.6. Categories are not mutually exclusive because deaths may involve more than one drug. Among deaths with an underlying cause of drug overdose, the percent with at least one drug or drug class specified were identified through MCOs in the range T36-T50.8.



National Health Interview Survey

Coverage, Access, and Utilization by Medicaid Expansion Status

Table 1. Age group and poverty status of persons of all ages who were uninsured at the time of interview with family incomes less than or equal to 400 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Age and poverty status	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ persons of all ages with incomes less than or equal to 400% FPL ⁵	7,238	100.0	9,962	100.0	17,205	100.0
Age group [†]						
0-18 years	1,309	18.1 (1.23) [‡]	1,416	14.2 (0.93)	2,725	15.8 (0.75)
19-34 years	2,867	39.6 (1.40)	4,120	41.4 (1.09)	6,989	40.6 (0.86)
35-49 years	1,743	24.1 (1.12)	2,493	25.0 (0.96)	4,237	24.6 (0.73)
50-64 years	1,266	17.5 (1.10)	1,909	19.2 (0.93)	3,177	18.5 (0.70)
65 and over	53	0.7 (0.20) [‡]	23	0.2 (0.10)	77	0.4 (0.10)
Poverty status ^{5†}						
Less than 100% FPL	1,523	21.0 (1.46) [‡]	2,690	27.0 (1.29)	4,215	24.5 (0.97)
100% to less than or equal to 138% FPL	1,034	14.3 (1.31)	1,498	15.0 (1.06)	2,533	14.7 (0.80)
Greater than 138% to less than or equal to 250% FPL	2,840	39.2 (1.78)	3,611	36.2 (1.54)	6,453	37.5 (1.18)
Greater than 250% to less than or equal to 400% FPL	1,841	25.4 (1.59)	2,163	21.7 (1.39)	4,004	23.3 (1.06)

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within age group or poverty level at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Cohen RA and Zammitti EP. Coverage, access, and utilization by Medicaid expansion status: Estimates from the National Health Interview Survey, United States, 2015. National Center for Health Statistics. October 2017. Available from: https://www.cdc.gov/nchs/health_policy/coverage_and_access.htm.

Table 2. State Medicaid expansion status for persons of all ages who were uninsured at the time of interview with family incomes less than or equal to 400 percent of the federal poverty level, by age group and poverty status: United States, 2015

Age and poverty status	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ persons of all ages with incomes less than or equal to 400% FPL ⁵	7,238	42.0 (1.20)	9,962	58.0 (1.20)	17,205	100.0
Age group						
0-18 years	1,309	48.0 (2.94)	1,416	52.0 (2.94)	2,725	100.0
19-34 years	2,867	41.0 (1.53)	4,120	59.0 (1.53)	6,989	100.0
35-49 years	1,743	41.1 (1.83)	2,493	58.9 (1.83)	4,237	100.0
50-64 years	1,266	39.8 (2.12)	1,909	60.2 (2.12)	3,177	100.0
65 and over	*	*	*	*	77	100.0
Poverty status ⁵						
Less than 100% FPL	1,523	36.1 (2.16)	2,690	63.9 (2.16)	4,215	100.0
100% to less than or equal to 138% FPL	1,034	40.8 (2.97)	1,498	59.2 (2.97)	2,533	100.0
Greater than 138% to less than or equal to 250% FPL	2,840	44.0 (1.95)	3,611	56.0 (1.95)	6,453	100.0
Greater than 250 to less than or equal to 400% FPL	1,841	45.9 (2.66)	2,163	54.1 (2.66)	4,004	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

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Table 3. Selected demographic characteristics of adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Selected demographic characteristics	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,995	100.0	3,742	100.0	5,739	100.0
Age group						
19-34 years	1,009	50.6 (2.76)	1,789	47.8 (1.90)	2,800	48.8 (1.58)
35-49 years	530	26.6 (2.21)	1,048	28.0 (1.60)	1,579	27.5 (1.30)
50-64 years	455	22.8 (2.32)	904	24.2 (1.59)	1,360	23.7 (1.33)
Poverty status ⁵						
Less than 100% FPL	1,180	59.1 (2.96)	2,473	66.1 (2.06)	3,655	63.7 (1.67)
100% to less than or equal to 138% FPL	815	40.9 (2.96)	1,269	33.9 (2.06)	2,084	36.3 (1.67)
Sex						
Male	1,213	60.8 (2.31) [†]	1,826	48.8 (1.87)	3,040	53.0 (1.47)
Female	782	39.2 (2.31) [†]	1,916	51.2 (1.87)	2,699	47.0 (1.47)
Race/ethnicity [†]						
Hispanic	463	23.2 (2.05)	782	20.9 (1.45)	1,245	21.7 (1.19)
Non-Hispanic, white only	1,030	51.6 (2.81)	1,722	46.0 (2.23)	2,753	48.0 (1.75)
Non-Hispanic, black only	322	16.2 (2.09) [†]	1,069	28.6 (1.92)	1,392	24.3 (1.45)
Non-Hispanic, Asian only	86	4.3 (0.92) [†]	85	2.3 (0.54)	171	3.0 (0.47)
Non-Hispanic, other	94	4.7 (1.14) [†]	84	2.2 (0.62)	178	3.1 (0.56)
Marital status						
Married	528	26.5 (2.37)	1,084	29.0 (1.97)	1,613	28.1 (1.54)
Widowed	37	1.9 (0.72)	119	3.2 (0.59)	156	2.7 (0.47)
Divorced or separated	282	14.1 (1.70)	638	17.1 (1.30)	921	16.0 (1.03)
Living with a partner	260	13.0 (1.77)	512	13.7 (1.36)	772	13.4 (1.08)
Never married	887	44.5 (2.54)	1,390	37.1 (1.80)	2,278	39.7 (1.48)
Number of family members [†]						
1	558	28.0 (2.32) [†]	680	18.2 (1.47)	1,238	21.6 (1.27)
2-4	984	49.3 (2.77) [†]	2,247	60.1 (2.05)	3,232	56.3 (1.69)
5 or more	453	22.7 (2.40)	814	21.8 (1.82)	1,268	22.1 (1.48)
Employment status						
Employed	1,210	60.7 (2.38)	2,049	54.8 (1.58)	3,261	56.8 (1.32)
Unemployed	320	16.1 (1.76)	635	17.0 (1.42)	956	16.6 (1.10)
Not in workforce	464	23.3 (2.05)	1,058	28.3 (1.45)	1,523	26.5 (1.16)
Education status						
Less than high school	477	23.9 (2.26)	989	26.4 (1.56)	1,466	25.5 (1.27)
High school diploma or GED ⁶	778	39.0 (2.61)	1,512	40.4 (1.83)	2,291	39.9 (1.51)
Some college	618	31.0 (2.37)	974	26.0 (1.65)	1,594	27.8 (1.35)
Bachelor's degree or more	122	6.1 (1.26)	267	7.1 (1.04)	389	6.8 (0.83)

¹Chi-square test significant at $p < 0.05$.

[†]Significantly different from nonexpansion states within sex, race and ethnicity, and number of family members at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶GED is General Educational Development high school equivalency diploma.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

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Table 4. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected demographic characteristics: United States, 2015

Selected demographic characteristics	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,995	34.7 (1.59)	3,742	65.3 (1.59)	5,739	100.0
Age group						
19-34 years	1,009	36.0 (2.30)	1,789	64.0 (2.30)	2,800	100.0
35-49 years	530	33.5 (2.74)	1,048	66.5 (2.74)	1,579	100.0
50-64 years	455	33.5 (3.00)	904	66.5 (3.00)	1,360	100.0
Poverty status ⁵						
Less than 100% FPL	1,180	32.3 (1.99)	2,473	67.7 (1.99)	3,655	100.0
100% to less than or equal to 138% FPL	815	39.1 (2.87)	1,269	60.9 (2.87)	2,084	100.0
Sex						
Male	1,213	39.9 (2.16)	1,826	60.1 (2.16)	3,040	100.0
Female	782	28.9 (2.00)	1,916	71.1 (2.00)	2,699	100.0
Race/ethnicity						
Hispanic	463	37.2 (2.84)	782	62.8 (2.84)	1,245	100.0
Non-Hispanic, white only	1,030	37.4 (2.62)	1,722	62.6 (2.62)	2,753	100.0
Non-Hispanic, black only	322	23.1 (2.79)	1,069	76.9 (2.79)	1,392	100.0
Non-Hispanic, Asian only	*	*	*	*	171	100.0
Non-Hispanic, other	*	*	*	*	178	100.0
Marital status						
Married	528	32.8 (2.98)	1,084	67.2 (2.98)	1,613	100.0
Widowed	*	*	*	*	156	100.0
Divorced or separated	282	30.6 (3.34)	638	69.4 (3.34)	921	100.0
Living with a partner	260	33.6 (3.98)	512	66.4 (3.98)	772	100.0
Never married	887	38.9 (2.48)	1,390	61.1 (2.48)	2,278	100.0
Number of family members						
1	558	45.0 (3.19)	680	55.0 (3.19)	1,238	100.0
2-4	984	30.4 (2.09)	2,247	69.6 (2.09)	3,232	100.0
5 or more	453	35.7 (3.44)	814	64.3 (3.44)	1,268	100.0
Employment status						
Employed	1,210	37.1 (2.05)	2,049	62.9 (2.05)	3,261	100.0
Unemployed	320	33.5 (3.54)	635	66.5 (3.54)	956	100.0
Not in workforce	464	30.5 (2.55)	1,058	69.5 (2.55)	1,523	100.0
Education status						
Less than high school	477	32.9 (2.84)	989	67.1 (2.84)	1,466	100.0
High school diploma or GED ⁵	778	34.3 (2.46)	1,512	65.7 (2.46)	2,291	100.0
Some college	618	39.2 (2.94)	974	60.8 (2.94)	1,594	100.0
Bachelor's degree or more	122	31.7 (5.58)	267	68.3 (5.58)	389	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January and February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶GED is General Educational Development high school equivalency diploma.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

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Table 5. Health status and selected health conditions of adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Health status and selected health conditions	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,904	100.0	3,683	100.0	5,605	100.0
Health status						
Excellent or very good	894	47.0 (3.82)	1,713	46.5 (2.92)	2,615	46.7 (2.31)
Good	678	35.6 (3.84)	1,112	30.2 (2.47)	1,795	32.0 (2.10)
Fair or poor	332	17.4 (3.20)	859	23.3 (2.57)	1,195	21.3 (2.02)
Health status compared to previous year [†]						
Better	323	17.0 (3.01)	541	14.7 (1.98)	866	15.5 (1.63)
Same	1,447	76.0 (3.33)	2,612	70.9 (2.51)	4,071	72.6 (2.00)
Worse	133	7.0 (1.75) [‡]	530	14.4 (2.08)	667	11.9 (1.51)
Ever been diagnosed with cancer						
Yes	*	*	132	3.6 (1.14)	167	3.0 (0.86)
No	*	*	3,551	96.4 (1.14)	5,437	97.0 (0.86)
Ever been diagnosed with diabetes						
Yes	*	*	267	7.3 (1.51)	349	6.2 (1.10)
No	*	*	3,416	92.7 (1.51)	5,256	93.8 (1.10)
Ever been diagnosed with hypertension ⁶						
Yes	287	15.1 (3.07)	751	20.4 (2.21)	1,042	18.6 (1.80)
No	1,617	84.9 (3.07)	2,932	79.6 (2.21)	4,563	81.4 (1.80)
Had hypertension ⁶ in past 12 months						
Yes	231	12.1 (2.83)	602	16.4 (1.82)	837	14.9 (1.54)
No	1,673	87.9 (2.83)	3,081	83.6 (1.82)	4,767	85.1 (1.54)
Ever been diagnosed with high cholesterol						
Yes	174	9.1 (2.54)	412	11.2 (1.88)	588	10.5 (1.51)
No	1,730	90.9 (2.54)	3,272	88.8 (1.88)	5,017	89.5 (1.51)
Had high cholesterol in past 12 months						
Yes	*	*	251	6.8 (1.47)	347	6.2 (1.17)
No	*	*	3,432	93.2 (1.47)	5,258	93.8 (1.17)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within each health status at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January and February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Adults had to have been told on two or more different visits that they had hypertension or high blood pressure to be classified as hypertensive.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 6. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by health status and selected health conditions: United States, 2015

Health status and selected health conditions	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,904	38.8 (2.29)	3,683	66.2 (2.29)	5,605	100.0
Health status						
Excellent or very good	894	34.0 (2.96)	1,713	66.0 (2.96)	2,615	100.0
Good	678	37.6 (4.23)	1,112	62.4 (4.23)	1,795	100.0
Fair or poor	332	27.6 (4.82)	859	72.4 (4.82)	1,195	100.0
Health status compared to previous year						
Better	323	37.1 (5.73)	541	62.9 (5.73)	866	100.0
Same	1,447	35.4 (2.62)	2,612	64.6 (2.62)	4,071	100.0
Worse	133	19.9 (5.09)	530	80.1 (5.09)	667	100.0
Ever been diagnosed with cancer						
Yes	*	*	*	*	167	100.0
No	1,870	34.2 (2.34)	3,551	65.8 (2.34)	5,437	100.0
Ever been diagnosed with diabetes						
Yes	*	*	*	*	349	100.0
No	1,823	34.5 (2.34)	3,416	65.5 (2.34)	5,256	100.0
Ever been diagnosed with hypertension ⁶						
Yes	287	27.5 (5.02)	751	72.5 (5.02)	1,042	100.0
No	1,617	35.3 (2.55)	2,932	64.7 (2.55)	4,563	100.0
Had hypertension ⁶ in past 12 months						
Yes	231	27.3 (5.51)	602	72.7 (5.51)	837	100.0
No	1,673	34.7 (2.48)	3,081	65.3 (2.48)	4,767	100.0
Ever been diagnosed with high cholesterol						
Yes	174	29.5 (7.18)	412	70.5 (7.18)	588	100.0
No	1,730	34.4 (2.40)	3,272	65.6 (2.40)	5,017	100.0
Had high cholesterol in past 12 months						
Yes	*	*	*	*	347	100.0
No	1,810	34.2 (2.36)	3,432	65.8 (2.36)	5,258	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January and February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Adults had to have been told on two or more different visits that they had hypertension or high blood pressure to be classified as hypertensive.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 7. Type of health insurance coverage and any period without health insurance coverage for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Coverage status and period without health insurance	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Adults aged 19-64 years ⁴ with family incomes less than or equal to 138% FPL ⁵	14,137	100.0	10,219	100.0	24,356	100.0
Coverage status and type of health insurance ^{6†}						
Private ⁷	4,602	32.6 (1.25) [‡]	4,295	42.0 (1.35)	8,898	36.5 (0.93)
Medicaid ⁸	7,420	52.5 (1.26) [‡]	2,058	20.1 (0.98)	9,475	38.9 (0.91)
Uninsured ⁹	1,995	14.1 (0.70) [‡]	3,742	36.6 (1.27)	5,739	23.6 (0.70)
Any period without health insurance in the past 12 months ¹⁰						
Yes	3,447	24.4 (0.89) [‡]	4,652	45.5 (1.38)	8,106	33.3 (0.79)
No	10,690	75.6 (0.89) [‡]	5,566	54.5 (1.38)	16,250	66.7 (0.79)

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within each coverage characteristic at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes adults with health insurance coverage other than private, Medicaid, or uninsured.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁷Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care.

⁸Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Adults with more than one type of coverage were assigned the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁹An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

¹⁰Adults were classified as having a period without health insurance in the past 12 months if they were uninsured at the time of interview or were insured at the time of interview and had a period of uninsurance in the 12 months prior to interview.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

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Table 8. State Medicaid expansion status for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by type of health insurance coverage and any period without health insurance coverage: United States, 2015

Coverage status and period without health insurance	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Adults aged 19-64 years ⁴ with family incomes less than or equal to 138% FPL ⁵	14,137	58.0 (1.08)	10,219	42.0 (1.08)	24,356	100.0
Coverage status and type of health insurance ⁶						
Private ⁷	4,602	51.7 (1.84)	4,295	48.3 (1.84)	8,898	100.0
Medicaid ⁸	7,420	78.3 (1.13)	2,058	21.7 (1.13)	9,475	100.0
Uninsured ⁹	1,995	34.7 (1.59)	3,742	65.3 (1.59)	5,739	100.0
Any period without health insurance in the past 12 months ¹⁰						
Yes	3,447	42.4 (1.51)	4,652	57.6 (1.51)	8,106	100.0
No	10,690	65.6 (1.26)	5,566	34.4 (1.26)	16,250	100.0

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes adults with health insurance coverage other than private, Medicaid, or uninsured.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁷Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care.

⁸Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Adults with more than one type of coverage were assigned the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁹An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

¹⁰Adults were classified as having a period without health insurance in the past 12 months if they were uninsured at the time of interview or were insured at the time of interview and had a period of uninsurance in the 12 months prior to interview.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

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Table 9. Selected measures of access to health care for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,904	100.0	3,683	100.0	5,605	100.0
Usual place of care ⁶						
Yes	830	43.6 (4.26)	1,605	43.6 (2.87)	2,442	43.6 (2.40)
No	1,074	56.4 (4.26)	2,078	56.4 (2.87)	3,162	56.4 (2.40)
Kind of place ⁷						
Clinic or health center	344	41.5 (6.26)	816	50.8 (4.39)	1,165	47.7 (3.60)
Doctor's office or HMO	382	46.0 (6.41)	648	40.4 (4.20)	1,033	42.3 (3.52)
Other place	*	*	141	8.8 (2.13)	245	10.0 (2.06)
Any unmet medical need ⁸						
Yes	1,001	52.6 (3.98)	2,149	58.3 (3.21)	3,161	56.4 (2.53)
No	903	47.4 (3.98)	1,535	41.7 (3.21)	2,444	43.6 (2.53)
Didn't get needed medical care due to cost, past 12 months						
Yes	453	23.8 (3.35) [†]	1,209	32.8 (2.62)	1,669	29.8 (2.10)
No	1,451	76.2 (3.35) [†]	2,475	67.2 (2.62)	3,936	70.2 (2.10)
Delayed care due to cost, past 12 months						
Yes	498	26.2 (3.34) [†]	1,308	35.5 (2.71)	1,815	32.4 (2.15)
No	1,405	73.8 (3.34) [†]	2,375	64.5 (2.71)	3,790	67.6 (2.15)
Needed but couldn't afford prescription medicine, past 12 months						
Yes	378	19.8 (2.92) [†]	1,017	27.6 (2.56)	1,399	25.0 (1.99)
No	1,526	80.2 (2.92) [†]	2,666	72.4 (2.56)	4,206	75.0 (1.99)
Needed but couldn't afford mental health care, past 12 months						
Yes	163	8.6 (2.08)	387	10.5 (1.80)	552	9.9 (1.38)
No	1,741	91.4 (2.08)	3,296	89.5 (1.80)	5,053	90.1 (1.38)
Needed but couldn't afford dental care, past 12 months						
Yes	621	32.6 (3.52)	1,281	34.8 (2.93)	1,908	34.0 (2.28)
No	1,283	67.4 (3.52)	2,403	65.2 (2.93)	3,697	66.0 (2.28)
Needed but couldn't afford eyeglasses, past 12 months						
Yes	407	21.4 (3.26)	929	25.2 (2.69)	1,340	23.9 (2.10)
No	1,497	78.6 (3.26)	2,755	74.8 (2.69)	4,264	76.1 (2.10)

See footnotes at end of table.

Table 9. Selected measures of access to health care for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Needed but couldn't afford to see a specialist, past 12 months						
Yes	309	16.2 (2.96)	684	18.6 (2.29)	996	17.8 (1.82)
No	1,595	83.8 (2.96)	3,000	81.4 (2.29)	4,609	82.2 (1.82)
Needed but couldn't afford follow up care, past 12 months						
Yes	216	11.4 (2.44) [‡]	758	20.6 (2.33)	978	17.5 (1.77)
No	1,687	88.6 (2.44) [‡]	2,925	79.4 (2.33)	4,626	82.5 (1.77)
Prescribed medication, past 12 months						
Yes	581	30.5 (3.50) [‡]	1,632	44.3 (2.85)	2,224	39.7 (2.29)
No	1,323	69.5 (3.50) [‡]	2,051	55.7 (2.85)	3,381	60.3 (2.29)
Skipped medication doses to save money, past 12 months ⁹						
Yes	170	8.9 (1.98)	512	13.9 (1.86)	685	12.2 (1.40)
No	1,734	91.1 (1.98)	3,172	86.1 (1.86)	4,920	87.8 (1.40)
Took less medicine to save money, past 12 months ⁹						
Yes	201	10.5 (2.31)	519	14.1 (1.98)	723	12.9 (1.53)
No	1,703	89.5 (2.31)	3,164	85.9 (1.98)	4,882	87.1 (1.53)
Delayed filling prescription to save money, past 12 months ⁹						
Yes	190	10.0 (2.03) [‡]	617	16.8 (1.93)	811	14.5 (1.45)
No	1,714	90.0 (2.03) [‡]	3,066	83.2 (1.93)	4,793	85.5 (1.45)
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	247	13.0 (2.84)	692	18.8 (2.23)	944	16.8 (1.75)
No	1,657	87.0 (2.84)	2,991	81.2 (2.23)	4,661	83.2 (1.75)
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	295	15.5 (3.32)	322	8.7 (1.41)	618	11.0 (1.48)
No	1,609	84.5 (3.32)	3,362	91.3 (1.41)	4,987	89.0 (1.48)
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	109	3.0 (0.82)	229	4.1 (0.96)
No	*	*	3,574	97.0 (0.82)	5,376	95.9 (0.96)
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	*	*	141	3.8 (1.00)	284	5.1 (1.03)
No	*	*	3,542	96.2 (1.00)	5,321	94.9 (1.03)

See footnotes at end of table.

Table 9. Selected measures of access to health care for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Delayed care because office wait time was too long, past 12 months						
Yes	186	9.8 (2.72) [‡]	146	4.0 (1.06)	333	5.9 (1.17)
No	1,718	90.2 (2.72) [‡]	3,537	96.0 (1.06)	5,272	94.1 (1.17)
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	76	2.1 (0.72)	146	2.6 (0.79)
No	*	*	3,607	97.9 (0.72)	5,458	97.4 (0.79)
Delayed care because didn't have transportation, past 12 months						
Yes	*	*	166	4.5 (1.06)	231	4.1 (0.90)
No	*	*	3,517	95.5 (1.06)	5,374	95.9 (0.90)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[‡]Significantly different from nonexpansion states within each measure of access to care at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 10. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,904	33.8 (2.29)	3,683	66.2 (2.29)	5,605	100.0
Usual place of care ⁶						
Yes	830	33.7 (3.35)	1,605	66.3 (3.35)	2,442	100.0
No	1,074	33.8 (3.15)	2,078	66.2 (3.15)	3,162	100.0
Kind of place ⁷						
Clinic or health center	344	29.4 (4.64)	816	70.6 (4.64)	1,165	100.0
Doctor's office or HMO	382	36.7 (5.42)	648	63.3 (5.42)	1,033	100.0
Other place	*	*	*	*	245	100.0
Any unmet medical need ⁸						
Yes	1,001	31.3 (2.89)	2,149	68.7 (2.89)	3,161	100.0
No	903	36.6 (3.67)	1,535	63.4 (3.67)	2,444	100.0
Didn't get needed medical care due to cost, past 12 months						
Yes	453	27.0 (3.63)	1,209	73.0 (3.63)	1,669	100.0
No	1,451	36.6 (2.82)	2,475	63.4 (2.82)	3,936	100.0
Delayed care due to cost, past 12 months						
Yes	498	27.1 (3.33)	1,308	72.9 (3.33)	1,815	100.0
No	1,405	36.7 (2.92)	2,375	63.3 (2.92)	3,790	100.0
Needed but couldn't afford prescription medicine, past 12 months						
Yes	378	27.1 (4.01)	1,017	72.9 (4.01)	1,399	100.0
No	1,526	36.4 (2.62)	2,666	63.6 (2.62)	4,206	100.0
Needed but couldn't afford mental health care, past 12 months						
Yes	163	29.5 (6.41)	387	70.5 (6.41)	552	100.0
No	1,741	34.4 (2.47)	3,296	65.6 (2.47)	5,053	100.0
Needed but couldn't afford dental care, past 12 months						
Yes	621	32.5 (3.50)	1,281	67.5 (3.50)	1,908	100.0
No	1,283	34.6 (2.97)	2,403	65.4 (2.97)	3,697	100.0
Needed but couldn't afford eyeglasses, past 12 months						
Yes	407	30.4 (4.22)	929	69.6 (4.22)	1,340	100.0
No	1,497	35.1 (2.81)	2,755	74.8 (2.69)	4,264	100.0

See footnotes at end of table.

Table 10. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Needed but couldn't afford to see a specialist, past 12 months						
Yes	309	30.9 (5.07)	684	69.1 (5.07)	996	100.0
No	1,595	34.5 (2.60)	3,000	65.5 (2.60)	4,609	100.0
Needed but couldn't afford follow up care, past 12 months						
Yes	216	22.1 (4.68)	758	77.9 (4.68)	978	100.0
No	1,687	36.4 (2.49)	2,925	63.6 (2.49)	4,626	100.0
Prescribed medication, past 12 months						
Yes	581	25.8 (3.26)	1,632	74.2 (3.26)	2,224	100.0
No	1,323	38.7 (2.89)	2,051	61.3 (2.89)	3,381	100.0
Skipped medication doses to save money, past 12 months ⁹						
Yes	170	24.6 (5.26)	512	75.4 (5.26)	685	100.0
No	1,734	34.9 (2.44)	3,172	65.1 (2.44)	4,920	100.0
Took less medicine to save money, past 12 months ⁹						
Yes	201	27.5 (5.70)	519	72.5 (5.70)	723	100.0
No	1,703	34.5 (2.43)	3,164	65.5 (2.43)	4,882	100.0
Delayed filling prescription to save money, past 12 months ⁹						
Yes	190	23.1 (4.55)	617	76.9 (4.55)	811	100.0
No	1,714	35.4 (2.49)	3,066	64.6 (2.49)	4,793	100.0
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	247	25.9 (5.41)	692	74.1 (5.41)	944	100.0
No	1,657	35.2 (2.46)	2,991	64.8 (2.46)	4,661	100.0
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	295	47.6 (7.16)	322	52.4 (7.16)	618	100.0
No	1,609	32.2 (2.42)	3,362	67.8 (2.42)	4,987	100.0
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	*	*	229	100.0
No	1,785	33.1 (2.33)	3,574	66.9 (2.33)	5,376	100.0
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	*	*	*	*	284	100.0
No	1,761	33.0 (2.36)	3,542	67.0 (2.36)	5,321	100.0

See footnotes at end of table.

Table 10. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Delayed care because office wait time was too long, past 12 months						
Yes	*	*	*	*	333	100.0
No	1,718	32.5 (2.35)	3,537	67.5 (2.35)	5,272	100.0
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	*	*	146	100.0
No	1,834	33.5 (2.32)	3,607	66.5 (2.32)	5,458	100.0
Delayed care because didn't have transportation, past 12 months						
Yes	*	*	*	*	231	100.0
No	1,840	34.2 (2.36)	3,517	65.8 (2.36)	5,374	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 11. Selected measures of access to health care for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,536	100.0	2,245	100.0	9,757	100.0
Usual place of care ⁶						
Yes	6,369	84.5 (1.53)	1,902	84.7 (2.75)	8,250	84.6 (1.34)
No	1,167	15.5 (1.53)	343	15.3 (2.75)	1,506	15.4 (1.34)
Kind of place ⁷						
Clinic or health center	2,597	40.8 (2.30)	701	36.9 (3.86)	3,290	39.9 (1.95)
Doctor's office or HMO	3,512	55.1 (2.45)	1,171	61.6 (3.95)	4,672	56.6 (2.07)
Other place	259	4.1 (0.89) [‡]	30	1.6 (0.86)	288	3.5 (0.72)
Any unmet medical need ⁸						
Yes	2,390	31.7 (2.05)	799	35.6 (3.15)	3,181	32.6 (1.73)
No	5,146	68.3 (2.05)	1,446	64.4 (3.15)	6,575	67.4 (1.73)
Didn't get needed medical care due to cost, past 12 months						
Yes	542	7.2 (1.16) [‡]	276	12.3 (1.97)	817	8.4 (0.99)
No	6,994	92.8 (1.16) [‡]	1,970	87.7 (1.97)	8,940	91.6 (0.99)
Delayed care due to cost, past 12 months						
Yes	599	8.0 (1.18)	189	8.4 (1.68)	787	8.1 (0.98)
No	6,937	92.0 (1.18)	2,056	91.6 (1.68)	8,970	91.9 (0.98)
Needed but couldn't afford prescription medicine, past 12 months						
Yes	682	9.1 (1.15)	300	13.4 (2.15)	981	10.1 (1.02)
No	6,854	90.9 (1.15)	1,945	86.6 (2.15)	8,776	89.9 (1.02)
Needed but couldn't afford mental health care, past 12 months						
Yes	213	2.8 (0.55)	49	2.2 (0.70)	261	2.7 (0.45)
No	7,323	97.2 (0.55)	2,196	97.8 (0.70)	9,495	97.3 (0.45)
Needed but couldn't afford dental care, past 12 months						
Yes	1,251	16.6 (1.48) [‡]	545	24.3 (2.91)	1,793	18.4 (1.33)
No	6,285	83.4 (1.48) [‡]	1,700	75.7 (2.91)	7,963	81.6 (1.33)
Needed but couldn't afford eyeglasses, past 12 months						
Yes	918	12.2 (1.33)	249	11.1 (1.94)	1,164	11.9 (1.12)
No	6,618	87.8 (1.33)	1,997	88.9 (1.94)	8,593	88.1 (1.12)

See footnotes at end of table.

Table 11. Selected measures of access to health care for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Needed but couldn't afford to see a specialist, past 12 months						
Yes	373	4.9 (0.88)	188	8.4 (1.65)	559	5.7 (0.78)
No	7,163	95.1 (0.88)	2,058	91.6 (1.65)	9,197	94.3 (0.78)
Needed but couldn't afford follow up care, past 12 months						
Yes	304	4.0 (0.77)	148	6.6 (1.56)	452	4.6 (0.69)
No	7,232	96.0 (0.77)	2,097	93.4 (1.56)	9,304	95.4 (0.69)
Prescribed medication, past 12 months						
Yes	4,669	62.0 (2.01)	1,293	57.6 (3.60)	5,946	60.9 (1.76)
No	2,867	38.0 (2.01)	952	42.4 (3.60)	3,810	39.1 (1.76)
Skipped medication doses to save money, past 12 months ⁹						
Yes	377	5.0 (0.88)	200	8.9 (2.06)	575	5.9 (0.83)
No	7,159	95.0 (0.88)	2,045	91.1 (2.06)	9,181	94.1 (0.83)
Took less medicine to save money, past 12 months ⁹						
Yes	367	4.9 (0.81) [‡]	262	11.7 (2.29)	628	6.4 (0.83)
No	7,169	95.1 (0.81) [‡]	1,983	88.3 (2.29)	9,128	93.6 (0.83)
Delayed filling prescription to save money, past 12 months ⁹						
Yes	387	5.1 (0.81) [‡]	270	12.0 (2.21)	655	6.7 (0.81)
No	7,149	94.9 (0.81) [‡]	1,975	88.0 (2.21)	9,101	93.3 (0.81)
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	671	8.9 (1.12)	279	12.4 (2.30)	949	9.7 (1.01)
No	6,865	91.1 (1.12)	1,966	87.6 (2.30)	8,808	90.3 (1.01)
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	1,552	20.6 (1.70)	287	12.8 (2.19)	1,833	18.8 (1.41)
No	5,984	79.4 (1.70)	1,958	87.2 (2.19)	7,923	81.2 (1.41)
Delayed care because unable to get through on phone, past 12 months						
Yes	384	5.1 (0.99) [‡]	53	2.4 (0.78)	435	4.5 (0.78)
No	7,153	94.9 (0.99) [‡]	2,192	97.6 (0.78)	9,321	95.5 (0.78)
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	871	11.6 (1.34)	173	7.7 (1.62)	1,040	10.7 (1.10)
No	6,665	88.4 (1.34)	2,072	92.3 (1.62)	8,716	89.3 (1.10)

See footnotes at end of table.

Table 11. Selected measures of access to health care for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Delayed care because office wait time was too long, past 12 months						
Yes	564	7.5 (1.08) [‡]	67	3.0 (1.00)	629	6.4 (0.86)
No	6,972	92.5 (1.08) [‡]	2,178	97.0 (1.00)	9,127	93.6 (0.86)
Delayed care because office wasn't open when could go, past 12 months						
Yes	306	4.1 (0.78) [‡]	30	1.3 (0.72)	335	3.4 (0.63)
No	7,230	95.9 (0.78) [‡]	2,215	98.7 (0.72)	9,421	96.6 (0.63)
Delayed care because didn't have transportation, past 12 months						
Yes	519	6.9 (0.93)	109	4.9 (1.32)	626	6.4 (0.78)
No	7,017	93.1 (0.93)	2,136	95.1 (1.32)	9,130	93.6 (0.78)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[‡]Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 12. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,536	76.8 (1.52)	2,245	23.2 (1.52)	9,757	100.0
Usual place of care ⁶						
Yes	6,369	76.9 (1.70)	1,902	23.1 (1.70)	8,250	100.0
No	1,167	77.2 (3.86)	343	22.8 (3.86)	1,506	100.0
Kind of place ⁷						
Clinic or health center	2,597	78.6 (2.61)	701	21.4 (2.61)	3,290	100.0
Doctor's office or HMO	3,512	74.9 (2.31)	1,171	25.1 (2.31)	4,672	100.0
Other place	*	*	*	*	288	100.0
Any unmet medical need ⁸						
Yes	2,390	74.9 (2.46)	799	25.1 (2.46)	3,181	100.0
No	5,146	78.0 (1.89)	1,446	22.0 (1.89)	6,575	100.0
Didn't get needed medical care due to cost, past 12 months						
Yes	542	66.0 (5.29)	276	34.0 (5.29)	817	100.0
No	6,994	77.8 (1.59)	1,970	22.2 (1.59)	8,940	100.0
Delayed care due to cost, past 12 months						
Yes	599	75.8 (4.64)	189	24.2 (4.64)	787	100.0
No	6,937	76.9 (1.61)	2,056	23.1 (1.61)	8,970	100.0
Needed but couldn't afford prescription medicine, past 12 months						
Yes	682	69.3 (4.68)	300	30.7 (4.68)	981	100.0
No	6,854	77.8 (1.59)	1,945	22.2 (1.59)	8,776	100.0
Needed but couldn't afford mental health care, past 12 months						
Yes	213	81.2 (5.72)	49	18.8 (5.72)	261	100.0
No	7,323	76.8 (1.57)	2,196	23.2 (1.57)	9,495	100.0
Needed but couldn't afford dental care, past 12 months						
Yes	1,251	69.5 (3.55)	545	30.5 (3.55)	1,793	100.0
No	6,285	78.6 (1.67)	1,700	21.4 (1.67)	7,963	100.0
Needed but couldn't afford eyeglasses, past 12 months						
Yes	918	78.6 (3.59)	249	21.4 (3.59)	1,164	100.0
No	6,618	76.7 (1.68)	1,997	23.3 (1.68)	8,593	100.0

See footnotes at end of table.

Table 12. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Needed but couldn't afford to see a specialist, past 12 months						
Yes	373	66.3 (6.10)	188	33.7 (6.10)	559	100.0
No	7,163	77.6 (1.58)	2,058	22.4 (1.58)	9,197	100.0
Needed but couldn't afford follow up care, past 12 months						
Yes	304	67.1 (6.92)	148	32.9 (6.92)	452	100.0
No	7,232	77.4 (1.55)	2,097	22.6 (1.55)	9,304	100.0
Prescribed medication, past 12 months						
Yes	4,669	78.2 (1.87)	1,293	21.8 (1.87)	5,946	100.0
No	2,867	74.9 (2.52)	952	25.1 (2.52)	3,810	100.0
Skipped medication doses to save money, past 12 months ⁹						
Yes	377	65.2 (6.90)	200	34.8 (6.90)	575	100.0
No	7,159	77.7 (1.55)	2,045	22.3 (1.55)	9,181	100.0
Took less medicine to save money, past 12 months ⁹						
Yes	367	58.3 (6.64)	262	41.7 (6.64)	628	100.0
No	7,169	78.3 (1.53)	1,983	21.7 (1.53)	9,128	100.0
Delayed filling prescription to save money, past 12 months ⁹						
Yes	387	58.8 (6.15)	270	41.2 (6.15)	655	100.0
No	7,149	78.3 (1.55)	1,975	21.7 (1.55)	9,101	100.0
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	671	70.5 (4.88)	279	29.5 (4.88)	949	100.0
No	6,865	77.7 (1.61)	1,966	22.3 (1.61)	8,808	100.0
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	1,552	84.3 (2.67)	287	15.7 (2.67)	1,833	100.0
No	5,984	75.2 (1.77)	1,958	24.8 (1.77)	7,923	100.0
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	*	*	435	100.0
No	7,153	76.5 (1.59)	2,192	23.5 (1.59)	9,321	100.0
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	871	83.4 (3.46)	173	16.6 (3.46)	1,040	100.0
No	6,665	76.2 (1.65)	2,072	23.8 (1.65)	8,716	100.0

See footnotes at end of table.

Table 12. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Delayed care because office wait time was too long, past 12 months						
Yes	*	*	*	*	629	100.0
No	6,972	76.1 (1.62)	2,178	23.9 (1.62)	9,127	100.0
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	*	*	335	100.0
No	7,230	76.4 (1.58)	2,215	23.6 (1.58)	9,421	100.0
Delayed care because didn't have transportation, past 12 months						
Yes	519	82.6 (4.48)	109	17.4 (4.48)	626	100.0
No	7,017	76.5 (1.60)	2,136	23.5 (1.60)	9,130	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammiti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 13. Selected measures of access to health care for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Privately insured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	4,594	100.0	4,274	100.0	8,876	100.0
Usual place of care ⁶						
Yes	3,735	81.3 (2.16)	3,385	79.2 (2.06)	7,125	80.3 (1.50)
No	859	18.7 (2.16)	889	20.8 (2.06)	1,750	19.7 (1.50)
Kind of place ⁷						
Clinic or health center	1,193	31.9 (3.07)	921	27.2 (2.74)	2,114	29.7 (2.09)
Doctor's office or HMO	2,367	63.4 (3.14)	2,347	69.3 (2.82)	4,719	66.2 (2.14)
Other place	175	4.7 (1.24)	117	3.5 (1.05)	292	4.1 (0.80)
Any unmet medical need ⁸						
Yes	1,245	27.1 (2.39)	1,177	27.5 (2.44)	2,424	27.3 (1.70)
No	3,349	72.9 (2.39)	3,097	72.5 (2.44)	6,451	72.7 (1.70)
Didn't get needed medical care due to cost, past 12 months						
Yes	427	9.3 (1.67)	449	10.5 (1.35)	877	9.9 (1.08)
No	4,167	90.7 (1.67)	3,825	89.5 (1.35)	7,998	90.1 (1.08)
Delayed care due to cost, past 12 months						
Yes	595	13.0 (1.81)	553	12.9 (1.60)	1,149	12.9 (1.20)
No	3,999	87.0 (1.81)	3,721	87.1 (1.60)	7,727	87.1 (1.20)
Needed but couldn't afford prescription medicine, past 12 months						
Yes	344	7.5 (1.30)	419	9.8 (1.48)	765	8.6 (0.95)
No	4,251	92.5 (1.30)	3,855	90.2 (1.48)	8,111	91.4 (0.95)
Needed but couldn't afford mental health care, past 12 months						
Yes	166	3.6 (0.99)	94	2.2 (0.64)	260	2.9 (0.60)
No	4,428	96.4 (0.99)	4,180	97.8 (0.64)	8,616	97.1 (0.60)
Needed but couldn't afford dental care, past 12 months						
Yes	664	14.5 (2.12)	718	16.8 (2.06)	1,384	15.6 (1.47)
No	3,930	85.5 (2.12)	3,556	83.2 (2.06)	7,491	84.4 (1.47)
Needed but couldn't afford eyeglasses, past 12 months						
Yes	281	6.1 (1.21)	405	9.5 (1.58)	688	7.8 (1.00)
No	4,313	93.9 (1.21)	3,869	90.5 (1.58)	8,187	92.2 (1.00)

See footnotes at end of table.

Table 13. Selected measures of access to health care for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Needed but couldn't afford to see a specialist, past 12 months						
Yes	161	3.5 (0.80) [‡]	297	6.9 (1.38)	460	5.2 (0.80)
No	4,434	96.5 (0.80) [‡]	3,977	93.1 (1.38)	8,416	94.8 (0.80)
Needed but couldn't afford follow up care, past 12 months						
Yes	168	3.7 (0.92)	242	5.7 (1.19)	411	4.6 (0.74)
No	4,426	96.3 (0.92)	4,033	94.3 (1.19)	8,465	95.4 (0.74)
Prescribed medication, past 12 months						
Yes	2,433	52.9 (2.79) [‡]	2,657	62.1 (2.66)	5,098	57.4 (1.93)
No	2,162	47.1 (2.79) [‡]	1,618	37.9 (2.66)	3,778	42.6 (1.93)
Skipped medication doses to save money, past 12 months ⁹						
Yes	178	3.9 (0.87)	251	5.9 (1.16)	430	4.8 (0.71)
No	4,416	96.1 (0.87)	4,024	94.1 (1.16)	8,446	95.2 (0.71)
Took less medicine to save money, past 12 months ⁹						
Yes	197	4.3 (1.01)	222	5.2 (1.04)	420	4.7 (0.73)
No	4,397	95.7 (1.01)	4,053	94.8 (1.04)	8,456	95.3 (0.73)
Delayed filling prescription to save money, past 12 months ⁹						
Yes	219	4.8 (0.96) [‡]	397	9.3 (1.47)	619	7.0 (0.86)
No	4,375	95.2 (0.96) [‡]	3,877	90.7 (1.47)	8,257	93.0 (0.86)
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	389	8.5 (1.46) [‡]	630	14.7 (2.19)	1,024	11.5 (1.31)
No	4,205	91.5 (1.46) [‡]	3,644	85.3 (2.19)	7,852	88.5 (1.31)
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	523	11.4 (1.78)	403	9.4 (1.58)	926	10.4 (1.17)
No	4,072	88.6 (1.78)	3,871	90.6 (1.58)	7,950	89.6 (1.17)
Delayed care because unable to get through on phone, past 12 months						
Yes	66	1.4 (0.75)	124	2.9 (0.87)	191	2.2 (0.56)
No	4,528	98.6 (0.75)	4,150	97.1 (0.87)	8,685	97.8 (0.56)
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	275	6.0 (1.53)	211	4.9 (1.13)	486	5.5 (0.96)
No	4,320	94.0 (1.53)	4,063	95.1 (1.13)	8,390	94.5 (0.96)

See footnotes at end of table.

Table 13. Selected measures of access to health care for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Delayed care because office wait time was too long, past 12 months						
Yes	161	3.5 (0.81)	147	3.4 (0.98)	308	3.5 (0.64)
No	4,433	96.5 (0.81)	4,128	96.6 (0.98)	8,568	96.5 (0.64)
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	100	2.3 (0.92)	297	3.3 (0.81)
No	*	*	4,174	97.7 (0.92)	8,579	96.7 (0.81)
Delayed care because didn't have transportation, past 12 months						
Yes	61	1.3 (0.53)	98	2.3 (0.90)	159	1.8 (0.52)
No	4,533	98.7 (0.53)	4,177	97.7 (0.90)	8,716	98.2 (0.52)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.
¹Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammiti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 14. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	4,594	51.5 (2.25)	4,274	48.5 (2.25)	8,876	100.0
Usual place of care ⁶						
Yes	3,735	52.0 (2.43)	3,385	48.0 (2.43)	7,125	100.0
No	859	48.7 (4.39)	889	51.3 (4.39)	1,750	100.0
Kind of place ⁷						
Clinic or health center	1,193	56.0 (4.27)	921	44.0 (4.27)	2,114	100.0
Doctor's office or HMO	2,367	49.8 (2.82)	2,347	50.2 (2.82)	4,719	100.0
Other place	*	*	*	*	292	100.0
Any unmet medical need ⁸						
Yes	1,245	50.9 (3.51)	1,177	49.1 (3.51)	2,424	100.0
No	3,349	51.5 (2.69)	3,097	48.5 (2.69)	6,451	100.0
Didn't get needed medical care due to cost, past 12 months						
Yes	427	48.4 (5.77)	449	51.6 (5.77)	877	100.0
No	4,167	51.8 (2.39)	3,825	48.2 (2.39)	7,998	100.0
Delayed care due to cost, past 12 months						
Yes	595	51.5 (5.02)	553	48.5 (5.02)	1,149	100.0
No	3,999	51.5 (2.43)	3,721	48.5 (2.43)	7,727	100.0
Needed but couldn't afford prescription medicine, past 12 months						
Yes	344	44.4 (5.92)	419	55.6 (5.92)	765	100.0
No	4,251	51.8 (2.37)	3,855	48.2 (2.37)	8,111	100.0
Needed but couldn't afford mental health care, past 12 months						
Yes	*	*	*	*	260	100.0
No	4,428	50.9 (2.28)	4,180	49.1 (2.28)	8,616	100.0
Needed but couldn't afford dental care, past 12 months						
Yes	664	47.5 (5.05)	718	52.5 (5.05)	1,384	100.0
No	3,930	52.0 (2.49)	3,556	48.0 (2.49)	7,491	100.0
Needed but couldn't afford eyeglasses, past 12 months						
Yes	281	40.4 (6.29)	405	59.6 (6.29)	688	100.0
No	4,313	52.2 (2.35)	3,869	47.8 (2.35)	8,187	100.0

See footnotes at end of table.

Table 14. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Needed but couldn't afford to see a specialist, past 12 months						
Yes	161	34.6 (6.78)	297	65.4 (6.78)	460	100.0
No	4,434	52.2 (2.33)	3,977	47.8 (2.33)	8,416	100.0
Needed but couldn't afford follow up care, past 12 months						
Yes	*	*	*	*	411	100.0
No	4,426	51.8 (2.33)	4,033	48.2 (2.33)	8,465	100.0
Prescribed medication, past 12 months						
Yes	2,433	47.2 (2.72)	2,657	52.8 (2.72)	5,098	100.0
No	2,162	56.6 (3.27)	1,618	43.4 (3.27)	3,778	100.0
Skipped medication doses to save money, past 12 months ⁹						
Yes	*	*	*	*	430	100.0
No	4,416	51.7 (2.35)	4,024	48.3 (2.35)	8,446	100.0
Took less medicine to save money, past 12 months ⁹						
Yes	*	*	*	*	420	100.0
No	4,397	51.5 (2.33)	4,053	48.5 (2.33)	8,456	100.0
Delayed filling prescription to save money, past 12 months ⁹						
Yes	219	35.0 (5.88)	397	65.0 (5.88)	619	100.0
No	4,375	52.4 (2.38)	3,877	47.6 (2.38)	8,257	100.0
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	389	37.6 (5.61)	630	62.4 (5.61)	1,024	100.0
No	4,205	53.0 (2.41)	3,644	47.0 (2.41)	7,852	100.0
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	523	55.9 (6.20)	403	44.1 (6.20)	926	100.0
No	4,072	50.7 (2.32)	3,871	49.3 (2.32)	7,950	100.0
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	*	*	191	100.0
No	4,528	51.6 (2.25)	4,150	48.4 (2.25)	8,685	100.0
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	*	*	*	*	486	100.0
No	4,320	51.0 (2.30)	4,063	49.0 (2.30)	8,390	100.0

See footnotes at end of table.

Table 14. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2015—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Delayed care because office wait time was too long, past 12 months						
Yes	*	*	*	*	308	100.0
No	4,433	51.2 (2.29)	4,128	48.8 (2.29)	8,568	100.0
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	*	*	297	100.0
No	4,397	50.8 (2.21)	4,174	49.2 (2.21)	8,579	100.0
Delayed care because didn't have transportation, past 12 months						
Yes	*	*	*	*	159	100.0
No	4,533	51.5 (2.24)	4,177	48.5 (2.24)	8,716	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 15. Selected measures of health care service use for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,904	100.0	3,683	100.0	5,605	100.0
Seen or talked to any health care professional, past 12 months						
Yes	1,027	53.9 (4.14)	2,046	55.6 (2.78)	3,083	55.0 (2.31)
No	877	46.1 (4.14)	1,637	44.4 (2.78)	2,521	45.0 (2.31)
Seen or talked to general doctor, past 12 months						
Yes	673	35.3 (4.12)	1,335	36.3 (2.92)	2,015	35.9 (2.35)
No	1,231	64.7 (4.12)	2,348	63.7 (2.92)	3,590	64.1 (2.35)
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	216	11.3 (2.89)	486	13.2 (2.20)	705	12.6 (1.75)
No	1,688	88.7 (2.89)	3,197	86.8 (2.20)	4,900	87.4 (1.75)
Seen or talked to medical specialist, past 12 months						
Yes	*	*	314	8.5 (1.77)	476	8.5 (1.47)
No	*	*	3,369	91.5 (1.77)	5,129	91.5 (1.47)
Blood cholesterol check, past 12 months						
Yes	452	23.7 (3.85)	968	26.3 (2.19)	1,425	25.4 (1.91)
No	1,452	76.3 (3.85)	2,715	73.7 (2.19)	4,180	74.6 (1.91)
Blood pressure check, past 12 months						
Yes	966	50.7 (3.86)	2,001	54.3 (2.88)	2,977	53.1 (2.28)
No	938	49.3 (3.86)	1,682	45.7 (2.88)	2,628	46.9 (2.28)
Blood sugar check, past 12 months						
Yes	263	13.8 (2.87)	625	17.0 (1.94)	892	15.9 (1.62)
No	1,641	86.2 (2.87)	3,059	83.0 (1.94)	4,713	84.1 (1.62)
Received flu vaccine, past 12 months ⁶						
Yes	160	8.4 (2.42) [‡]	558	15.2 (2.09)	723	12.9 (1.65)
No	1,744	91.6 (2.42) [‡]	3,125	84.8 (2.09)	4,882	87.1 (1.65)
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	*	*
No	*	*	*	*	*	*
Mammogram, past 12 months ⁸						
Yes	*	*	102	20.8 (5.06)	162	22.5 (4.59)
No	*	*	388	79.2 (5.06)	559	77.5 (4.59)

See footnotes at end of table.

Table 15. Selected measures of health care service use for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Hospitalized overnight, past 12 months						
Yes	*	*	350	9.5 (1.73)	422	7.5 (1.25)
No	*	*	3,333	90.5 (1.73)	5,183	92.5 (1.25)
Visited Emergency Department, past 12 months						
Yes	497	26.1 (3.49)	1,067	29.0 (2.75)	1,570	28.0 (2.16)
No	1,407	73.9 (3.49)	2,616	71.0 (2.75)	4,035	72.0 (2.16)
Number of Emergency Department visits, past 12 months ⁴						
0	1,407	73.9 (3.49)	2,616	71.0 (2.75)	4,035	72.0 (2.16)
1	283	14.9 (2.83)	626	17.0 (2.39)	913	16.3 (1.83)
2 or more	214	11.2 (2.61)	441	12.0 (1.72)	657	11.7 (1.44)
Visited Emergency Department because no other place to go ⁵						
Yes	319	64.2 (7.29)	706	66.1 (5.13)	1,028	65.5 (4.18)
No	178	35.8 (7.29)	362	33.9 (5.13)	542	34.5 (4.18)
Visited Emergency Department because doctor's office wasn't open ⁶						
Yes	*	*	372	34.8 (5.12)	552	35.1 (4.38)
No	*	*	696	65.2 (5.12)	1,018	64.9 (4.38)
Visited Emergency Department because problem too serious for doctor's office ⁷						
Yes	*	*	518	48.5 (4.90)	750	47.8 (4.25)
No	*	*	549	51.5 (4.90)	820	52.2 (4.25)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Significantly different from nonexpansion states within each flu vaccine level at $p < 0.05$.

²Chi-square test significant at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 16. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2015

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,904	33.8 (2.29)	3,683	66.2 (2.29)	5,605	100.0
Seen or talked to any health care professional, past 12 months						
Yes	1,027	33.2 (3.07)	2,046	66.8 (3.07)	3,083	100.0
No	877	34.6 (3.45)	1,637	65.4 (3.45)	2,521	100.0
Seen or talked to general doctor, past 12 months						
Yes	673	33.3 (3.85)	1,335	66.7 (3.85)	2,015	100.0
No	1,231	34.1 (2.98)	2,348	65.9 (2.98)	3,590	100.0
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	216	30.5 (6.96)	486	69.5 (6.96)	705	100.0
No	1,688	34.4 (2.44)	3,197	65.6 (2.44)	4,900	100.0
Seen or talked to medical specialist, past 12 months						
Yes	*	*	*	*	476	100.0
No	1,743	33.8 (2.44)	3,369	66.2 (2.44)	5,129	100.0
Blood cholesterol check, past 12 months						
Yes	452	31.2 (4.63)	968	68.8 (4.63)	1,425	100.0
No	1,452	34.2 (2.70)	2,715	65.8 (2.70)	4,180	100.0
Blood pressure check, past 12 months						
Yes	966	32.0 (3.16)	2,001	68.0 (3.16)	2,977	100.0
No	938	35.3 (3.22)	1,682	64.7 (3.22)	2,628	100.0
Blood sugar check, past 12 months						
Yes	263	29.3 (5.25)	625	70.7 (5.25)	892	100.0
No	1,641	34.5 (2.58)	3,059	65.5 (2.58)	4,713	100.0
Received flu vaccine, past 12 months ⁶						
Yes	160	21.8 (5.62)	558	78.2 (5.62)	723	100.0
No	1,744	35.2 (2.52)	3,125	64.8 (2.52)	4,882	100.0
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	104	100.0
No	409	32.1 (4.35)	866	67.9 (4.35)	1,275	100.0
Mammogram, past 12 months ⁸						
Yes	*	*	*	*	162	100.0
No	*	*	*	*	559	100.0

See footnotes at end of table.

Table 16. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2015—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Hospitalized overnight, past 12 months						
Yes	*	*	*	*	422	100.0
No	1,835	35.2 (2.43)	3,333	64.8 (2.43)	5,183	100.0
Visited Emergency Department, past 12 months						
Yes	497	31.7 (4.40)	1,067	68.3 (4.40)	1,570	100.0
No	1,407	34.9 (2.61)	2,616	65.1 (2.61)	4,035	100.0
Number of Emergency Department visits, past 12 months						
0	1,407	34.9 (2.61)	2,616	65.1 (2.61)	4,035	100.0
1	283	31.0 (5.61)	626	69.0 (5.61)	913	100.0
2 or more	214	32.6 (6.67)	441	67.4 (6.67)	657	100.0
Visited Emergency Department because no other place to go⁹						
Yes	319	31.0 (5.60)	706	69.0 (5.60)	1,028	100.0
No	178	32.9 (6.68)	362	67.1 (6.68)	542	100.0
Visited Emergency Department because doctor's office wasn't open⁹						
Yes	*	*	*	*	552	100.0
No	319	31.3 (5.37)	696	68.7 (5.37)	1,018	100.0
Visited Emergency Department because problem too serious for doctor's office⁹						
Yes	229	31.4 (6.42)	518	68.6 (6.42)	750	100.0
No	268	33.5 (6.07)	549	66.5 (6.07)	820	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 17. Selected measures of health care service use for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,536	100.0	2,245	100.0	9,757	100.0
Seen or talked to any health care professional, past 12 months						
Yes	6,316	83.8 (1.67)	1,847	82.3 (3.13)	8,142	83.5 (1.45)
No	1,220	16.2 (1.67)	398	17.7 (3.13)	1,614	16.5 (1.45)
Seen or talked to general doctor, past 12 months						
Yes	5,125	68.0 (2.06)	1,415	63.0 (3.71)	6,523	66.9 (1.81)
No	2,411	32.0 (2.06)	830	37.0 (3.71)	3,233	33.1 (1.81)
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	1,820	24.1 (1.81)	469	20.9 (2.80)	2,282	23.4 (1.54)
No	5,717	75.9 (1.81)	1,776	79.1 (2.80)	7,474	76.6 (1.54)
Seen or talked to medical specialist, past 12 months						
Yes	1,642	21.8 (1.77)	486	21.7 (2.84)	2,123	21.8 (1.51)
No	5,894	78.2 (1.77)	1,759	78.3 (2.84)	7,634	78.2 (1.51)
Blood cholesterol check, past 12 months						
Yes	4,325	57.4 (2.24)*	1,101	49.0 (3.64)	5,414	55.5 (1.92)
No	3,211	42.6 (2.24)*	1,145	51.0 (3.64)	4,343	44.5 (1.92)
Blood pressure check, past 12 months						
Yes	6,242	82.8 (1.61)	1,814	80.8 (3.21)	8,035	82.4 (1.44)
No	1,294	17.2 (1.61)	431	19.2 (3.21)	1,721	17.6 (1.44)
Blood sugar check, past 12 months						
Yes	2,958	39.3 (2.10)	751	33.4 (3.23)	3,699	37.9 (1.78)
No	4,578	60.7 (2.10)	1,495	66.6 (3.23)	6,058	62.1 (1.78)
Received flu vaccine, past 12 months ⁶						
Yes	2,372	31.5 (2.09)*	532	23.7 (2.93)	2,896	29.7 (1.75)
No	5,164	68.5 (2.09)*	1,713	76.3 (2.93)	6,860	70.3 (1.75)
Colon cancer test, past 12 months ⁷						
Yes	326	18.6 (3.06)	*	*	413	19.8 (2.90)
No	1,428	81.4 (3.06)	*	*	1,673	80.2 (2.90)
Mammogram, past 12 months ⁸						
Yes	549	51.7 (5.13)	*	*	648	52.7 (4.68)
No	513	48.3 (5.13)	*	*	583	47.3 (4.68)

See footnotes at end of table.

Table 17. Selected measures of health care service use for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Hospitalized overnight, past 12 months						
Yes	1,027	13.6 (1.52)	359	16.0 (2.37)	1,384	14.2 (1.29)
No	6,509	86.4 (1.52)	1,886	84.0 (2.37)	8,373	85.8 (1.29)
Visited Emergency Department, past 12 months						
Yes	2,673	35.5 (2.09)	881	39.2 (3.28)	3,545	36.3 (1.79)
No	4,863	64.5 (2.09)	1,364	60.8 (3.28)	6,211	63.7 (1.79)
Number of Emergency Department visits, past 12 months						
0	4,863	64.5 (2.09)	1,364	60.8 (3.28)	6,211	63.7 (1.79)
1	1,244	16.5 (1.56)	439	19.6 (2.55)	1,679	17.2 (1.35)
2 or more	1,429	19.0 (1.74)	442	19.7 (2.88)	1,867	19.1 (1.49)
Visited Emergency Department because no other place to go ⁹						
Yes	1,067	39.9 (3.79)	416	47.2 (5.53)	1,480	41.7 (3.18)
No	1,606	60.1 (3.79)	465	52.8 (5.53)	2,066	58.3 (3.18)
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	1,256	47.0 (3.86)	339	38.5 (5.29)	1,592	44.9 (3.20)
No	1,417	53.0 (3.86)	541	61.5 (5.29)	1,954	55.1 (3.20)
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	1,513	56.6 (3.96) [‡]	379	43.0 (5.50)	1,887	53.2 (3.31)
No	1,160	43.4 (3.96) [‡]	502	57.0 (5.50)	1,658	46.8 (3.31)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[‡]Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 18. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2015

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,536	76.8 (1.52)	2,245	23.2 (1.52)	9,757	100.0
Seen or talked to any health care professional, past 12 months						
Yes	6,316	77.3 (1.63)	1,847	22.7 (1.63)	8,142	100.0
No	1,220	75.3 (4.35)	398	24.7 (4.35)	1,614	100.0
Seen or talked to general doctor, past 12 months						
Yes	5,125	78.3 (1.79)	1,415	21.7 (1.79)	6,523	100.0
No	2,411	74.4 (2.91)	830	25.6 (2.91)	3,233	100.0
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	1,820	79.5 (2.86)	469	20.5 (2.86)	2,282	100.0
No	5,717	76.3 (1.77)	1,776	23.7 (1.77)	7,474	100.0
Seen or talked to medical specialist, past 12 months						
Yes	1,642	77.1 (3.20)	486	22.9 (3.20)	2,123	100.0
No	5,894	77.0 (1.69)	1,759	23.0 (1.69)	7,634	100.0
Blood cholesterol check, past 12 months						
Yes	4,325	79.9 (1.84)	1,101	20.1 (1.84)	5,414	100.0
No	3,211	74.0 (2.55)	1,145	26.0 (2.55)	4,343	100.0
Blood pressure check, past 12 months						
Yes	6,242	77.5 (1.65)	1,814	22.5 (1.65)	8,035	100.0
No	1,294	75.0 (4.10)	431	25.0 (4.10)	1,721	100.0
Blood sugar check, past 12 months						
Yes	2,958	79.6 (2.22)	751	20.4 (2.22)	3,699	100.0
No	4,578	75.2 (2.03)	1,495	24.8 (2.03)	6,058	100.0
Received flu vaccine, past 12 months ⁶						
Yes	2,372	81.6 (2.50)	532	18.4 (2.50)	2,896	100.0
No	5,164	74.9 (1.88)	1,713	25.1 (1.88)	6,860	100.0
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	413	100.0
No	1,428	85.4 (2.51)	246	14.6 (2.51)	1,673	100.0
Mammogram, past 12 months ⁸						
Yes	*	*	*	*	648	100.0
No	513	88.3 (3.52)	69	11.7 (3.52)	583	100.0

See footnotes at end of table.

Table 18. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2015—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Hospitalized overnight, past 12 months						
Yes	1,027	73.8 (3.78)	359	26.2 (3.78)	1,384	100.0
No	6,509	77.3 (1.67)	1,886	22.7 (1.67)	8,373	100.0
Visited Emergency Department, past 12 months						
Yes	2,673	75.2 (2.36)	881	24.8 (2.36)	3,545	100.0
No	4,863	78.1 (1.93)	1,364	21.9 (1.93)	6,211	100.0
Number of Emergency Department visits, past 12 months						
0	4,863	78.1 (1.93)	1,364	21.9 (1.93)	6,211	100.0
1	1,244	73.9 (3.39)	439	26.1 (3.39)	1,679	100.0
2 or more	1,429	76.4 (3.42)	442	23.6 (3.42)	1,867	100.0
Visited Emergency Department because no other place to go ⁹						
Yes	1,067	71.9 (3.95)	416	28.1 (3.95)	1,480	100.0
No	1,606	77.5 (3.06)	465	22.5 (3.06)	2,066	100.0
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	1,256	78.8 (3.24)	339	21.2 (3.24)	1,592	100.0
No	1,417	72.4 (3.54)	541	27.6 (3.54)	1,954	100.0
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	1,513	79.9 (3.06)	379	20.1 (3.06)	1,887	100.0
No	1,160	69.7 (3.88)	502	30.3 (3.88)	1,658	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table 19. Selected measures of health care service use for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Privately insured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	4,594	100.0	4,274	100.0	8,876	100.0
Seen or talked to any health care professional, past 12 months						
Yes	3,645	79.3 (2.42)	3,507	82.0 (1.83)	7,160	80.7 (1.58)
No	950	20.7 (2.42)	767	18.0 (1.83)	1,716	19.3 (1.58)
Seen or talked to general doctor, past 12 months						
Yes	2,788	60.7 (2.79)	2,830	66.2 (2.41)	5,625	63.4 (1.85)
No	1,806	39.3 (2.79)	1,445	33.8 (2.41)	3,251	36.6 (1.85)
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	863	18.8 (2.17)	847	19.8 (2.58)	1,711	19.3 (1.71)
No	3,732	81.2 (2.17)	3,428	80.2 (2.58)	7,164	80.7 (1.71)
Seen or talked to medical specialist, past 12 months						
Yes	879	19.1 (2.28)	793	18.6 (2.06)	1,673	18.9 (1.54)
No	3,716	80.9 (2.28)	3,481	81.4 (2.06)	7,203	81.1 (1.54)
Blood cholesterol check, past 12 months						
Yes	2,160	47.0 (2.81)	2,153	50.4 (2.82)	4,320	48.7 (1.95)
No	2,434	53.0 (2.81)	2,122	49.6 (2.82)	4,556	51.3 (1.95)
Blood pressure check, past 12 months						
Yes	3,571	77.7 (2.45)	3,371	78.9 (2.01)	6,948	78.3 (1.58)
No	1,023	22.3 (2.45)	904	21.1 (2.01)	1,928	21.7 (1.58)
Blood sugar check, past 12 months						
Yes	1,395	30.4 (2.81)	1,577	36.9 (2.93)	2,979	33.6 (2.01)
No	3,199	69.6 (2.81)	2,697	63.1 (2.93)	5,897	66.4 (2.01)
Received flu vaccine, past 12 months ⁶						
Yes	1,459	31.7 (2.82)	1,385	32.4 (2.56)	2,846	32.1 (1.86)
No	3,136	68.3 (2.82)	2,889	67.6 (2.56)	6,029	67.9 (1.86)
Colon cancer test, past 12 months ⁷						
Yes	201	21.9 (5.13)	188	19.1 (4.13)	388	20.4 (3.35)
No	719	78.1 (5.13)	793	80.9 (4.13)	1,513	79.6 (3.35)
Mammogram, past 12 months ⁸						
Yes	*	*	329	51.8 (6.20)	595	53.5 (5.11)
No	*	*	306	48.2 (6.20)	516	46.5 (5.11)

See footnotes at end of table.

Table 19. Selected measures of health care service use for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2015—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Hospitalized overnight, past 12 months						
Yes	198	4.3 (1.01) [†]	356	8.3 (1.48)	555	6.3 (0.88)
No	4,397	95.7 (1.01) [†]	3,919	91.7 (1.48)	8,321	93.7 (0.88)
Visited Emergency Department, past 12 months						
Yes	887	19.3 (2.19)	957	22.4 (2.08)	1,847	20.8 (1.52)
No	3,707	80.7 (2.19)	3,317	77.6 (2.08)	7,029	79.2 (1.52)
Number of Emergency Department visits, past 12 months						
0	3,707	80.7 (2.19)	3,317	77.6 (2.08)	7,029	79.2 (1.52)
1	546	11.9 (1.70)	615	14.4 (1.97)	1,163	13.1 (1.29)
2 or more	341	7.4 (1.59)	342	8.0 (1.45)	684	7.7 (1.08)
Visited Emergency Department because no other place to go ⁹						
Yes	476	53.7 (6.33)	458	47.9 (6.03)	935	50.6 (4.38)
No	411	46.3 (6.33)	499	52.1 (6.03)	912	49.4 (4.38)
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	419	47.2 (6.33)	561	58.6 (5.28)	983	53.2 (4.14)
No	468	52.8 (6.33)	396	41.4 (5.28)	864	46.8 (4.14)
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	423	47.6 (6.32)	466	48.6 (6.41)	890	48.2 (4.51)
No	464	52.4 (6.32)	492	51.4 (6.41)	957	51.8 (4.51)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[†]Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from September through December 2015), IN (only for those interviewed from January through July 2015), NH (only for those interviewed from January through February 2015), and PA (only for those interviewed from January through June 2015). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammiti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 20. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2015

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Privately insured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	4,594	51.5 (2.25)	4,274	48.5 (2.25)	8,876	100.0
Seen or talked to any health care professional, past 12 months						
Yes	3,645	50.1 (2.44)	3,507	49.9 (2.44)	7,160	100.0
No	950	54.5 (4.28)	767	45.5 (4.28)	1,716	100.0
Seen or talked to general doctor, past 12 months						
Yes	2,788	49.1 (2.62)	2,830	50.9 (2.62)	5,625	100.0
No	1,806	55.0 (3.43) [†]	1,445	45.0 (3.43)	3,251	100.0
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	863	49.9 (4.96)	847	50.1 (4.96)	1,711	100.0
No	3,732	51.5 (2.41)	3,428	48.5 (2.41)	7,164	100.0
Seen or talked to medical specialist, past 12 months						
Yes	879	52.0 (4.24)	793	48.0 (4.24)	1,673	100.0
No	3,716	51.1 (2.59)	3,481	48.9 (2.59)	7,203	100.0
Blood cholesterol check, past 12 months						
Yes	2,160	48.8 (2.79)	2,153	51.2 (2.79)	4,320	100.0
No	2,434	52.1 (3.25)	2,122	47.9 (3.25)	4,556	100.0
Blood pressure check, past 12 months						
Yes	3,571	50.7 (2.48)	3,371	49.3 (2.48)	6,948	100.0
No	1,023	52.3 (4.29)	904	47.7 (4.29)	1,928	100.0
Blood sugar check, past 12 months						
Yes	1,395	46.2 (3.39)	1,577	53.8 (3.39)	2,979	100.0
No	3,199	53.5 (3.00)	2,697	46.5 (3.00)	5,897	100.0
Received flu vaccine, past 12 months ⁶						
Yes	1,459	50.6 (3.84)	1,385	49.4 (3.84)	2,846	100.0
No	3,136	51.3 (2.64)	2,889	48.7 (2.64)	6,029	100.0
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	388	100.0
No	719	46.4 (4.50)	793	53.6 (4.50)	1,513	100.0
Mammogram, past 12 months ⁸						
Yes	266	43.2 (6.76)	329	56.8 (6.76)	595	100.0
No	210	39.2 (6.97) [†]	306	60.8 (6.97)	516	100.0

See footnotes at end of table.

Table 20. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2015—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Hospitalized overnight, past 12 months						
Yes	198	35.4 (6.86)	356	64.6 (6.86)	555	100.0
No	4,397	52.5 (2.35)	3,919	47.5 (2.35)	8,321	100.0
Visited Emergency Department, past 12 months						
Yes	887	47.5 (4.20)	957	52.5 (4.20)	1,847	100.0
No	3,707	52.2 (2.47)	3,317	47.8 (2.47)	7,029	100.0
Number of Emergency Department visits, past 12 months						
0	3,707	52.2 (2.47)	743	47.8 (2.47)	7,029	100.0
1	546	46.5 (5.34)	138	53.5 (5.34)	1,163	100.0
2 or more	*	*	*	*	684	100.0
Visited Emergency Department because no other place to go ⁹						
Yes	476	50.4 (6.34)	458	49.6 (6.34)	935	100.0
No	411	44.6 (5.74)	499	55.4 (5.74)	912	100.0
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	419	42.3 (5.46)	561	57.7 (5.46)	983	100.0
No	468	53.7 (6.27)	396	46.3 (6.27)	864	100.0
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	423	47.0 (5.73)	466	53.0 (5.73)	890	100.0
No	464	48.0 (6.53)	492	52.0 (6.53)	957	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

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⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family and Sample Adult Core components.

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Table I. Impact of sample exclusion criteria on sample sizes and population estimates for persons of all ages, by state Medicaid expansion status: National Health Interview Survey Person File, 2015

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total	57,978	178,594	42,661	126,510
Exclude those missing health insurance coverage status	57,278	176,592	42,278	125,255
Exclude those missing information on Supplemental Social Security income	57,028	175,485	41,915	123,858
Exclude those missing information on US citizenship status	57,774	177,998	42,535	126,098
Exclude those covered by Medicare	49,052	151,075	35,514	105,644
Exclude sample adults who were pregnant at the time of interview	57,793	178,016	42,538	126,138
Exclude those who receive Supplemental Social Security income	56,481	174,346	41,726	123,961
Exclude those who are covered only by a military health plan	57,256	176,294	41,597	122,819
Exclude those who are covered only by Indian Health Service	57,944	178,504	42,476	126,234
Exclude those who have incomes above 400% FPL ³	37,773	108,203	29,741	83,914
Exclude those who are not US citizens	52,324	164,398	39,600	118,518
Total after excluding sample for reasons above	24,990	72,903	20,108	57,188

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2015 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2015_data_release.htm.

NOTES: Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2015, Family Core component.

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Table II. Impact of sample exclusion criteria on sample sizes and population estimates for persons of all ages with family incomes less than or equal to 400 percent of the federal poverty level, by state Medicaid expansion status: National Health Interview Survey Person File, 2015

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total of persons of all ages with incomes less than or equal to 400% FPL ³	37,773	108,203	29,741	83,914
Exclude those missing health insurance coverage status	37,221	106,658	29,436	82,922
Exclude those missing information on Supplemental Social Security income	37,160	106,298	29,277	82,365
Exclude those missing information on US citizenship status	37,623	107,781	29,640	83,588
Exclude those covered by Medicare	31,693	90,149	24,625	69,489
Exclude sample adults who were pregnant at the time of interview	37,655	107,853	29,647	83,641
Exclude those who receive Supplemental Social Security income	36,378	104,240	28,843	81,517
Exclude those who are covered only by a military health plan	37,272	106,623	29,048	81,609
Exclude those who are covered only by Indian Health Service	37,741	108,124	29,584	83,670
Exclude those who are not US citizens	33,037	96,946	27,052	77,127
Total after excluding sample for reasons above	24,990	72,903	20,108	57,188

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

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Table III. Impact of sample exclusion criteria on sample sizes and population estimates for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: National Health Interview Survey Person File, 2015

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total of adults aged 19-64 with incomes less than or equal to 138% FPL ³	7,830	21,573	5,620	15,506
Exclude those missing health insurance coverage status	7,690	21,193	5,520	15,189
Exclude those missing information on Supplemental Social Security income	7,649	21,029	5,503	15,128
Exclude those missing information on US citizenship status	7,783	21,451	5,592	15,421
Exclude those covered by Medicare	7,303	19,984	5,136	14,175
Exclude sample adults who were pregnant at the time of interview	7,780	21,425	5,579	15,396
Exclude those who receive Supplemental Social Security income	7,198	19,794	5,196	14,373
Exclude those who are covered only by a military health plan	7,747	21,324	5,513	15,172
Exclude those who are covered only by Indian Health Service	7,822	21,554	5,564	15,421
Exclude those who are not US citizens	5,865	17,174	4,464	12,655
Total after excluding sample for reasons above	4,569	13,345	3,390	9,663

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

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Table IV. Impact of sample exclusion criteria on sample sizes and population estimates for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: National Health Interview Survey Sample Adult File, 2015

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total of adults aged 19-64 with incomes less than or equal to 138% FPL ³	3,551	22,076	2,658	15,828
Exclude those missing health insurance coverage status	3,524	21,862	2,641	15,720
Exclude those missing information on Supplemental Social Security income	3,531	21,906	2,650	15,796
Exclude those missing information on US citizenship status	3,540	21,998	2,654	15,797
Exclude those covered by Medicare	3,215	20,266	2,353	14,356
Exclude sample adults who were pregnant at the time of interview	3,501	21,732	2,617	15,560
Exclude those who receive Supplemental Social Security income	3,158	20,173	2,415	14,708
Exclude those who are covered only by a military health plan	3,499	21,778	2,596	15,503
Exclude those who are covered only by Indian Health Service	3,544	22,044	2,626	15,723
Exclude those who are not US citizens	2,825	17,756	2,218	13,055
Total after excluding sample for reasons above	2,099	13,809	1,636	10,195

¹Medicaid expansion states include: AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN (only those interviewed from August through December 2015), IA, KY, MD, MA, MI, MN, NV, NH (only those interviewed from March through December 2015), NJ, NM, NY, ND, OH, OR, PA (only those interviewed from July through December 2015), RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AK (only those interviewed from January through August 2015), AL, FL, GA, ID, KS, LA, ME, MS, MO, MT, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

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National Health Interview Survey

Long-term Trends in Health Insurance Coverage

Table 1. Percentages (and standard errors) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968-2016

Year	Sample size	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
1968	120,670	79.3 (0.39)	---	---	---	---	---	---
1970	44,373	78.7 (0.53)	68.6 (0.60)	10.0 (0.37)	---	---	---	---
1972	119,939	77.3 (0.39)	69.4 (0.43)	7.8 (0.18)	3.5 (0.14)	---	2.6 (0.18)	16.7 (0.32)
1974	104,727	79.7 (0.31)	70.5 (0.35)	9.6 (0.18)	4.7 (0.16)	---	2.5 (0.20)	13.1 (0.24)
1976	101,594	78.9 (0.31)	68.5 (0.32)	10.3 (0.19)	4.9 (0.16)	0.2 (0.02)	2.6 (0.19)	14.1 (0.24)
1978	98,465	79.3 (0.34)	70.2 (0.35)	9.2 (0.19)	6.7 (0.19)	1.2 (0.04)	2.3 (0.16)	12.0 (0.22)
1980	91,425	79.4 (0.38)	71.4 (0.40)	8.0 (0.20)	7.1 (0.19)	1.4 (0.05)	2.0 (0.16)	12.0 (0.26)
1982	92,489	78.1 (0.53)	70.3 (0.55)	7.9 (0.21)	6.1 (0.29)	1.2 (0.04)	3.7 (0.21)	13.9 (0.36)
1984	46,729	76.9 (0.64)	68.4 (0.67)	8.7 (0.27)	6.8 (0.34)	1.1 (0.06)	3.6 (0.26)	14.6 (0.46)
1986	93,396	76.7 (0.62)	69.1 (0.62)	7.7 (0.21)	6.8 (0.33)	1.2 (0.04)	3.7 (0.23)	14.5 (0.39)
1989	54,860	76.8 (0.71)	69.3 (0.76)	7.6 (0.33)	6.4 (0.35)	1.2 (0.05)	3.3 (0.29)	15.0 (0.43)
1990	102,684	75.9 (0.51)	68.3 (0.51)	7.6 (0.19)	7.2 (0.26)	1.4 (0.05)	2.9 (0.24)	15.6 (0.35)
1991	105,053	74.2 (0.43)	66.4 (0.47)	7.8 (0.28)	7.1 (0.21)	1.3 (0.04)	3.0 (0.25)	17.2 (0.30)
1992	105,316	73.6 (0.48)	62.8 (0.52)	10.8 (0.31)	8.5 (0.27)	1.4 (0.06)	2.9 (0.25)	16.4 (0.29)
1993	113,042	72.0 (0.46)	64.9 (0.45)	7.1 (0.18)	9.8 (0.29)	1.4 (0.05)	2.9 (0.25)	16.8 (0.28)
1994	101,608	69.9 (0.50)	64.0 (0.48)	5.9 (0.17)	11.2 (0.34)	1.4 (0.05)	2.8 (0.23)	17.8 (0.32)
1995	90,512	71.3 (0.42)	65.6 (0.43)	5.7 (0.16)	11.5 (0.27)	1.6 (0.06)	2.6 (0.17)	16.3 (0.25)
1996	56,268	71.2 (0.55)	65.1 (0.57)	6.1 (0.22)	11.1 (0.33)	1.6 (0.07)	2.6 (0.19)	16.7 (0.36)
1997	91,275	70.7 (0.36)	66.4 (0.36)	4.2 (0.13)	9.7 (0.23)	1.6 (0.05)	2.7 (0.13)	17.5 (0.24)
1998	87,020	72.1 (0.36)	67.5 (0.37)	4.6 (0.14)	8.9 (0.22)	1.7 (0.06)	2.7 (0.15)	16.6 (0.25)
1999	85,732	72.8 (0.36)	68.3 (0.37)	4.4 (0.14)	9.1 (0.21)	1.7 (0.06)	2.2 (0.12)	16.1 (0.25)
2000	89,149	71.7 (0.35)	67.3 (0.37)	4.2 (0.14)	9.5 (0.22)	1.7 (0.06)	2.2 (0.13)	16.8 (0.25)
2001	89,478	71.5 (0.37)	67.2 (0.35)	4.1 (0.12)	10.4 (0.21)	1.8 (0.06)	2.1 (0.12)	16.1 (0.25)
2002	82,533	69.7 (0.37)	65.6 (0.37)	3.9 (0.13)	11.8 (0.23)	1.7 (0.06)	2.3 (0.14)	16.5 (0.24)

See footnotes at end of table

Table 1. Percentages (and standard errors) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968-2016—continued

Year	Sample size	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
2003	81,596	68.9 (0.40)	64.4 (0.41)	4.0 (0.15)	12.3 (0.25)	1.8 (0.06)	2.4 (0.17)	16.5 (0.26)
2004	83,357	68.8 (0.39)	64.0 (0.39)	4.6 (0.14)	12.5 (0.24)	1.8 (0.06)	2.4 (0.12)	16.4 (0.23)
2005	87,077	68.2 (0.40)	63.6 (0.40)	4.4 (0.14)	12.9 (0.25)	1.8 (0.06)	2.5 (0.13)	16.4 (0.24)
2006	67,066	66.3 (0.48)	61.5 (0.48)	4.6 (0.17)	14.0 (0.32)	2.1 (0.08)	2.5 (0.14)	17.0 (0.29)
2007	67,065	66.8 (0.45)	61.6 (0.46)	4.9 (0.17)	13.9 (0.30)	2.1 (0.08)	2.7 (0.17)	16.6 (0.29)
2008	65,495	65.6 (0.46)	60.5 (0.46)	4.8 (0.19)	14.7 (0.32)	2.3 (0.08)	2.7 (0.16)	16.8 (0.29)
2009	78,011	63.3 (0.49)	58.0 (0.48)	5.0 (0.17)	16.1 (0.33)	2.3 (0.08)	2.9 (0.18)	17.5 (0.28)
2010	79,336	61.7 (0.47)	56.6 (0.45)	4.8 (0.15)	16.9 (0.29)	2.3 (0.07)	3.1 (0.15)	18.2 (0.29)
2011	89,060	61.8 (0.45)	56.4 (0.44)	4.8 (0.15)	17.8 (0.31)	2.4 (0.07)	3.0 (0.11)	17.2 (0.24)
2012	94,247	61.8 (0.41)	56.9 (0.42)	4.4 (0.14)	18.0 (0.28)	2.4 (0.07)	3.0 (0.14)	16.9 (0.24)
2013	104,204	61.8 (0.42)	56.6 (0.42)	4.7 (0.15)	18.1 (0.28)	2.6 (0.07)	3.0 (0.13)	16.7 (0.25)
2014	116,682	63.7 (0.41)	56.4 (0.42)	6.4 (0.17)	19.6 (0.30)	2.5 (0.08)	3.1 (0.17)	13.3 (0.22)
2015	103,520	65.5 (0.42)	57.4 (0.43)	7.7 (0.18)	20.6 (0.35)	2.6 (0.08)	3.0 (0.16)	10.6 (0.19)
2016	96,794	65.7 (0.44)	57.4 (0.46)	7.8 (0.18)	21.1 (0.35)	2.8 (0.08)	2.8 (0.14)	10.3 (0.23)

-- Data not available.

¹Includes persons covered by private coverage obtained through an employer, purchased directly, or obtained through any other means. Beginning in 2014, private coverage also includes plans purchased through the Health Insurance Marketplace or a state-based exchange. Excludes plans that paid for only one type of service such as accidents or dental care.

²The category "Private coverage (employer)" is private insurance originally obtained through a present or former employer or union; this also includes private insurance obtained through the workplace, self-employment, or a professional association.

³The category "Private coverage (other)" includes persons who are covered by private insurance that is directly purchased as well as plans obtained through school or other means. Beginning in 2014, this category also includes plans purchased through the Health Insurance Marketplace or a state-based exchange.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare (1976+), Medicaid, State Children's Health Insurance Program (CHIP) (1999+), state-sponsored (1982-1989, 1992+) or other government-sponsored health plan (1997+), or military-related coverage. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service such as accidents or dental care.

NOTES: Percentages do not add to 100 because a small percentage of persons reported more than one type of coverage. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population. In this table, unknown values (responses coded as "refused," "not ascertained," or "don't know") were not counted in the denominators when calculating estimates. For private health insurance coverage, this may result in the percentage with "private coverage (employer)" and the percentage with "private coverage (other)" not adding up to the percentage with "private coverage (any)." For a full description of the methodology used for these tables, see the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" (<https://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>).

SOURCE: NCHS, National Health Interview Survey, health insurance supplements (prior to 1997) and family core questionnaire (starting with 1997).

ACKNOWLEDGEMENTS: This table is an update of Table 1 from the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" which was released in July 2009 (<https://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>). This table was produced by Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics, Centers for Disease Control and Prevention.

Suggested citation

Cohen RA. Long-term trends in health insurance: Estimates from the National Health Interview Survey, United States, 1968–2016. National Center for Health Statistics. October 2017. Available from: https://www.cdc.gov/nchs/health_policy/coverage_and_access.htm.

Table 2. Number (in millions) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968-2016

Year	Population under age 65	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
1968	177.1	140.5	---	---	---	---	---	---
1970	180.9	142.3	124.1	18.0	---	---	---	---
1972	184.2	142.3	127.9	14.4	6.5	---	4.7	30.7
1974	186.6	148.7	131.5	17.9	8.7	---	4.6	24.4
1976	188.8	148.9	129.4	19.5	9.3	0.5	4.9	26.6
1978	191.0	151.6	134.0	17.5	12.8	2.4	4.3	23.0
1980	194.0	154.1	138.5	15.6	13.8	2.7	3.9	23.3
1982	201.7	157.5	141.8	16.0	12.2	2.5	7.5	28.0
1984	203.8	156.7	139.4	17.7	13.9	2.3	7.3	29.7
1986	205.2	157.5	141.7	15.7	13.9	2.4	7.6	29.8
1989	208.8	160.4	144.6	15.8	13.4	2.5	6.9	31.3
1990	214.3	162.7	146.3	16.3	15.4	3.0	6.1	33.4
1991	216.3	160.5	143.7	16.8	15.4	2.8	6.5	37.2
1992	218.4	160.8	137.1	23.7	18.6	3.0	6.4	35.8
1993	220.7	158.9	143.2	15.8	21.6	3.2	6.4	37.1
1994	223.6	158.8	145.9	12.9	23.9	3.0	6.1	38.8
1995	228.6	159.8	146.2	13.5	25.6	3.1	6.4	40.6
1996	230.4	164.4	151.3	13.1	26.6	3.7	5.9	37.7
1997	232.5	165.5	151.4	14.2	25.8	3.7	6.0	38.9
1998	234.6	165.8	155.9	9.8	22.9	3.8	6.4	41.0
1999	236.8	170.8	159.8	10.8	21.1	4.1	6.3	39.2
2000	239.2	174.2	163.4	10.5	21.9	4.1	5.2	38.5
2001	241.3	173.0	162.5	10.1	22.9	4.0	5.4	40.5
2002	243.6	174.1	163.8	10.0	25.2	4.3	5.1	39.2

See footnotes at end of table

Table 2. Number (in millions) of persons under 65 years of age with health insurance coverage, by coverage type, and without health insurance: United States, selected years 1968–2016—continued

Year	Population under age 65	Private coverage (any) ¹	Private coverage (employer) ²	Private coverage (other) ³	Medicaid	Medicare	Other public coverage	Uninsured ⁴
2003	251.8	173.6	162.1	10.1	30.9	4.5	6.1	41.6
2004	253.7	174.5	162.3	11.6	31.6	4.5	6.1	41.6
2005	256.1	174.7	162.9	11.1	33.2	4.5	6.4	42.1
2006	258.2	171.2	158.8	11.8	36.2	5.4	6.5	43.9
2007	260.7	174.1	160.7	12.7	36.2	5.4	7.0	43.3
2008	262.0	171.9	158.6	12.6	38.4	5.9	7.0	44.1
2009	263.4	166.7	152.8	13.1	42.4	6.2	7.7	46.2
2010	265.4	163.9	150.2	12.7	44.8	6.0	8.1	48.3
2011	266.2	164.5	150.1	12.7	47.4	6.4	7.9	45.8
2012	266.7	164.9	151.8	11.8	48.1	6.5	8.1	45.2
2013	267.5	165.3	151.5	12.5	48.5	7.1	8.1	44.6
2014	268.2	170.7	151.3	17.2	52.6	6.7	8.4	35.7
2015	269.4	176.6	154.7	20.8	55.4	7.0	8.1	28.7
2016	270.7	177.7	157.5	21.2	57.0	7.5	7.6	27.9

--- Data not available.

¹Includes persons covered by private coverage obtained through an employer, purchased directly, or obtained through any other means. Beginning in 2014, private coverage also includes plans purchased through the Health Insurance Marketplace or a state-based exchange. Excludes plans that paid for only one type of service such as accidents or dental care.

²The category "Private coverage (employer)" is private insurance originally obtained through a present or former employer or union; this also includes private insurance obtained through the workplace, self-employment, or a professional association.

³The category "Private coverage (other)" includes persons who are covered by private insurance that is directly purchased as well as plans obtained through school or other means. Beginning in 2014, this category also includes plans purchased through the Health Insurance Marketplace or a state-based exchange.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare (1976+), Medicaid, State Children's Health Insurance Program (CHIP) (1999+), state-sponsored (1982-1989, 1992+) or other government-sponsored health plan (1997+), or military-related coverage. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service such as accidents or dental care.

NOTES: A person may have more than one type of coverage, therefore, individual coverage types may not add up to the population total. Estimates are based on household interviews of a sample of the civilian noninstitutionalized population. In this table, unknown values (responses coded as "refused," "not ascertained," or "don't know") were not counted in the denominators when calculating estimates. For private health insurance, coverage this may result in the number with "private coverage (employer)" and the number with "private coverage (other)" not adding up to the number with "private coverage (any)." For a full description of the methodology used for these tables, see the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" (<https://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>).

SOURCE: NCHS, National Health Interview Survey, health insurance supplements (prior to 1997) and family core questionnaire (starting with 1997).

ACKNOWLEDGEMENTS: This table is an update of Table 1 from the report entitled "Health Insurance Coverage Trends, 1959–2007: Estimates from the National Health Interview Survey" which was released in July 2009 (<http://www.cdc.gov/nchs/data/nhsr/nhsr017.pdf>). This table was produced by Robin A. Cohen of the National Center for Health Statistics, Division of Health Interview Statistics, Centers for Disease Control and Prevention.

Suggested citation

Cohen RA. Long-term trends in health insurance: Estimates from the National Health Interview Survey, United States, 1968–2016. National Center for Health Statistics. October 2017. Available from: https://www.cdc.gov/nchs/health_policy/coverage_and_access.htm.



National Health Interview Survey

Any Hearing Loss by State

Table. Percentages (and adjusted standard errors) of adults aged 18 years and over with any hearing loss, by state: United States, 2014-2016

States	Percent (adjusted standard error)
All states	15.9 (0.17)
Alabama	20.0 (1.43)
Alaska	16.6 (1.42)
Arizona	16.4 (1.26)
Arkansas	21.4 (1.44)
California	12.3 (0.47)
Colorado	17.2 (1.22)
Connecticut	11.0 (1.12)
Delaware	14.3 (1.21)
District of Columbia	8.6 (1.00)
Florida	13.6 (0.72)
Georgia	15.5 (0.88)
Hawaii	14.5 (1.22)
Idaho	23.1 (1.42)
Illinois	16.3 (0.83)
Indiana	18.3 (1.21)
Iowa	20.3 (1.29)
Kansas	18.1 (1.23)
Kentucky	20.5 (1.29)
Louisiana	18.5 (1.32)
Maine	21.9 (1.35)
Maryland	11.0 (1.09)
Massachusetts	16.3 (1.32)
Michigan	17.4 (0.90)
Minnesota	18.7 (1.19)
Mississippi	15.9 (1.23)
Missouri	19.1 (1.38)
Montana	23.8 (1.54)
Nebraska	20.7 (1.30)
Nevada	12.9 (1.04)
New Hampshire	18.0 (1.30)
New Jersey	10.6 (0.97)
New Mexico	20.8 (1.30)
New York	12.6 (0.62)
North Carolina	14.8 (1.10)
North Dakota	20.9 (1.55)
Ohio	18.8 (0.88)
Oklahoma	17.5 (1.22)
Oregon	24.6 (1.43)
Pennsylvania	15.4 (0.88)
Rhode Island	14.9 (1.26)
South Carolina	14.6 (1.25)
South Dakota	20.8 (1.50)
Tennessee	21.0 (1.37)
Texas	16.0 (0.64)
Utah	15.9 (1.13)

See footnotes at the end of the table.

Table. Percentages (and adjusted standard errors) of adults aged 18 years and over with any hearing loss: United States, 2014-2016—*Continued*

States	Percent (adjusted standard error)
Vermont	13.7 (1.47)
Virginia	14.0 (1.02)
Washington	20.0 (1.21)
West Virginia	24.7 (1.44)
Wisconsin	15.7 (1.18)
Wyoming	22.3 (1.59)

NOTES: Hearing loss is based on a survey question that asked respondents, "Without the use of hearing aids or other listening devices, is your hearing excellent, good, a little trouble hearing, moderate trouble, a lot of trouble, or are you deaf?" "A little trouble hearing," "moderate trouble," "a lot of trouble," and "deaf" are combined for this table. Estimates have been updated using the 2016 revised weights, and are based on household interviews of a sample of the civilian noninstitutionalized population. In this table, unknown values (responses coded as "refused," "not ascertained," or "don't know") were not counted in the denominators when calculating estimates. All estimates and their variances were calculated using SUDAAN software to account for the complex sample design of NHIS. The standard errors were adjusted as described in Cohen RA, Zammitti EP, Martinez ME. Health insurance coverage: Early release of estimates from the National Health Interview Survey, 2017. National Center for Health Statistics. August 2017. Available from: <https://www.cdc.gov/nchs/data/nhis/earlyrelease/insur201708.pdf>.

SOURCE: NCHS, National Health Interview Survey, 2014-2016, Sample Adult component.

Suggested citation

Blackwell, DL and Norris, T. Any Hearing Loss by State: Estimates from the National Health Interview Survey, United States, 2014-2016. National Center for Health Statistics. October 2017. Available from: https://www.cdc.gov/nchs/health_policy/disability.htm.



National Health Interview Survey Early Release Program

Table 1. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–June 2017

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	18.2 (0.30)	61.2 (0.50)	...	22.0 (0.38)
Quarter 1	17.5 (0.53)	62.6 (0.99)	...	21.2 (0.71)
Quarter 2	19.2 (0.74)	60.9 (0.92)	...	21.2 (0.58)
Quarter 3	18.8 (0.50)	60.6 (0.83)	...	22.0 (0.64)
Quarter 4	17.2 (0.49)	60.6 (0.89)	...	23.5 (0.68)
2011 full year	17.3 (0.29)	61.2 (0.51)	...	23.0 (0.37)
Quarter 1	17.4 (0.49)	61.3 (0.89)	...	22.7 (0.67)
Quarter 2	17.4 (0.48)	61.4 (0.83)	...	22.5 (0.59)
Quarter 3	17.3 (0.54)	60.8 (0.95)	...	23.3 (0.68)
Quarter 4	16.9 (0.51)	61.1 (0.86)	...	23.3 (0.63)
2012 full year	16.9 (0.27)	61.0 (0.47)	...	23.5 (0.37)
Quarter 1	17.6 (0.56)	60.2 (0.93)	...	23.5 (0.64)
Quarter 2	16.0 (0.48)	63.0 (0.90)	...	22.6 (0.68)
Quarter 3	17.0 (0.50)	60.3 (0.84)	...	24.2 (0.67)
Quarter 4	17.2 (0.47)	60.3 (0.80)	...	23.8 (0.59)
2013 full year	16.6 (0.30)	61.0 (0.52)	...	23.8 (0.35)
Quarter 1	17.1 (0.54)	60.3 (0.91)	...	23.9 (0.65)
Quarter 2	16.4 (0.49)	62.1 (0.82)	...	22.9 (0.59)
Quarter 3	16.5 (0.48)	61.2 (0.85)	...	23.7 (0.61)
Quarter 4	16.2 (0.53)	60.5 (0.93)	...	24.5 (0.68)
2014 full year	13.3 (0.26)	63.6 (0.46)	2.2 (0.10)	24.5 (0.36)
Quarter 1	15.2 (0.47)	61.8 (0.85)	1.4 (0.11)	24.2 (0.68)
Quarter 2	12.9 (0.50)	63.8 (0.81)	2.4 (0.17)	24.7 (0.61)
Quarter 3	13.2 (0.44)	64.0 (0.85)	2.5 (0.20)	24.0 (0.62)
Quarter 4	12.1 (0.42)	64.4 (0.90)	2.5 (0.18)	25.0 (0.74)
2015 full year	10.5 (0.22)	65.6 (0.50)	3.8 (0.14)	25.3 (0.43)
Quarter 1	10.7 (0.40)	66.5 (0.88)	3.6 (0.22)	24.2 (0.74)
Quarter 2	10.3 (0.36)	66.7 (0.81)	4.0 (0.24)	24.6 (0.71)
Quarter 3	10.8 (0.43)	64.5 (0.93)	4.2 (0.29)	26.1 (0.77)
Quarter 4	10.3 (0.41)	64.7 (0.95)	3.4 (0.24)	26.3 (0.81)
2016 full year	10.4 (0.31)	65.0 (0.48)	4.1 (0.13)	26.3 (0.41)
Quarter 1	10.0 (0.39)	66.0 (0.80)	4.0 (0.23)	25.7 (0.64)
Quarter 2	10.8 (0.46)	63.9 (0.79)	4.1 (0.26)	26.8 (0.75)
Quarter 3	10.1 (0.44)	64.4 (0.77)	4.1 (0.29)	27.4 (0.71)
Quarter 4	10.8 (0.49)	65.6 (0.81)	4.3 (0.26)	25.2 (0.71)
2017 (Jan–Jun)	10.5 (0.36)	65.4 (0.50)	3.7 (0.17)	25.6 (0.49)
Quarter 1	10.3 (0.41)	66.0 (0.77)	4.0 (0.22)	25.3 (0.59)
Quarter 2	10.6 (0.44)	64.4 (0.63)	3.5 (0.24)	26.4 (0.74)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for “private health insurance coverage.”

⁴Includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

Suggested citation:

Cohen RA and Zammitti EP. Health insurance coverage: Early release of quarterly estimates from the National Health Interview Survey, January 2010–June 2017. National Center for Health Statistics. November 2017. Available from: <https://www.cdc.gov/nchs/nhis/releases.htm>.



National Health Interview Survey Early Release Program

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–June 2017

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
0-17 years				
2010 full year	7.8 (0.32)	53.8 (0.75)	...	39.8 (0.73)
Quarter 1	7.4 (0.51)	55.4 (1.47)	...	38.5 (1.41)
Quarter 2	9.1 (0.79)	53.0 (1.30)	...	39.3 (1.19)
Quarter 3	8.2 (0.56)	53.7 (1.35)	...	39.7 (1.31)
Quarter 4	6.5 (0.46)	53.0 (1.35)	...	41.6 (1.30)
2011 full year	7.0 (0.27)	53.3 (0.76)	...	41.0 (0.74)
Quarter 1	6.9 (0.50)	54.4 (1.40)	...	40.3 (1.35)
Quarter 2	7.7 (0.48)	53.7 (1.23)	...	40.1 (1.21)
Quarter 3	7.1 (0.53)	52.3 (1.46)	...	42.1 (1.38)
Quarter 4	6.5 (0.45)	53.0 (1.33)	...	41.5 (1.29)
2012 full year	6.6 (0.27)	52.8 (0.73)	...	42.1 (0.72)
Quarter 1	6.7 (0.55)	51.6 (1.35)	...	43.0 (1.24)
Quarter 2	6.4 (0.57)	55.3 (1.34)	...	39.9 (1.38)
Quarter 3	6.8 (0.50)	52.0 (1.30)	...	43.0 (1.26)
Quarter 4	6.4 (0.44)	52.4 (1.33)	...	42.3 (1.25)
2013 full year	6.5 (0.26)	52.6 (0.76)	...	42.2 (0.70)
Quarter 1	7.1 (0.52)	51.5 (1.45)	...	42.5 (1.30)
Quarter 2	7.1 (0.51)	54.1 (1.31)	...	40.1 (1.21)
Quarter 3	5.9 (0.49)	52.7 (1.39)	...	42.7 (1.26)
Quarter 4	6.0 (0.47)	52.0 (1.34)	...	43.6 (1.24)
2014 full year	5.5 (0.27)	53.7 (0.68)	0.9 (0.11)	42.2 (0.65)
Quarter 1	6.6 (0.55)	51.7 (1.34)	0.5 (0.14)	43.0 (1.32)
Quarter 2	5.6 (0.59)	53.6 (1.28)	1.0 (0.17)	42.5 (1.24)
Quarter 3	5.3 (0.46)	54.6 (1.31)	1.0 (0.19)	40.9 (1.24)
Quarter 4	4.2 (0.40)	54.5 (1.38)	1.3 (0.28)	42.9 (1.39)
2015 full year	4.5 (0.24)	54.7 (0.78)	2.0 (0.18)	42.2 (0.79)
Quarter 1	4.6 (0.50)	56.3 (1.44)	1.6 (0.23)	40.4 (1.38)
Quarter 2	4.5 (0.48)	55.7 (1.34)	1.9 (0.29)	41.1 (1.32)
Quarter 3	4.5 (0.46)	53.3 (1.49)	2.5 (0.39)	43.7 (1.45)
Quarter 4	4.3 (0.43)	53.6 (1.53)	1.9 (0.32)	43.5 (1.54)
2016 full year	5.1 (0.31)	53.8 (0.71)	2.5 (0.17)	43.0 (0.65)
Quarter 1	5.0 (0.46)	54.9 (1.34)	2.2 (0.27)	42.1 (1.32)
Quarter 2	5.0 (0.60)	52.9 (1.46)	2.4 (0.32)	43.3 (1.43)
Quarter 3	4.8 (0.56)	52.6 (1.37)	2.4 (0.38)	44.9 (1.38)
Quarter 4	5.6 (0.46)	54.9 (1.31)	3.0 (0.37)	41.5 (1.22)
2017 (Jan–Jun)	5.0 (0.52)	54.0 (0.87)	1.8 (0.19)	42.6 (0.95)
Quarter 1	5.3 (0.61)	54.1 (1.25)	1.9 (0.27)	42.3 (1.22)
Quarter 2	4.6 (0.60)	53.6 (1.11)	1.7 (0.22)	43.3 (1.34)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–June 2017—Con.

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
18-29 years				
2010 full year	30.9 (0.56)	53.4 (0.64)	...	16.2 (0.45)
Quarter 1	30.6 (1.13)	53.4 (1.34)	...	16.6 (0.92)
Quarter 2	31.9 (1.16)	54.0 (1.25)	...	14.4 (0.73)
Quarter 3	32.0 (1.01)	52.2 (1.11)	...	16.4 (0.85)
Quarter 4	29.1 (1.08)	54.2 (1.31)	...	17.4 (0.86)
2011 full year	27.7 (0.57)	56.4 (0.69)	...	16.7 (0.48)
Quarter 1	27.9 (1.01)	55.8 (1.34)	...	17.1 (0.92)
Quarter 2	27.6 (1.02)	57.4 (1.23)	...	16.0 (0.71)
Quarter 3	28.1 (1.10)	55.6 (1.28)	...	17.0 (0.87)
Quarter 4	27.2 (1.02)	56.9 (1.16)	...	16.8 (0.75)
2012 full year	26.9 (0.54)	56.5 (0.64)	...	17.5 (0.47)
Quarter 1	28.2 (1.10)	54.7 (0.33)	...	17.9 (0.88)
Quarter 2	25.1 (1.09)	58.4 (1.42)	...	17.6 (0.85)
Quarter 3	27.4 (0.99)	55.3 (1.27)	...	18.0 (0.94)
Quarter 4	26.9 (1.12)	57.6 (1.30)	...	16.6 (0.77)
2013 full year	26.1 (0.59)	57.6 (0.68)	...	16.9 (0.46)
Quarter 1	26.5 (1.02)	56.0 (1.24)	...	18.1 (0.88)
Quarter 2	25.1 (1.06)	58.5 (1.21)	...	17.1 (0.87)
Quarter 3	25.9 (1.06)	58.8 (1.23)	...	16.1 (0.90)
Quarter 4	26.8 (1.13)	57.2 (1.42)	...	16.5 (0.91)
2014 full year	20.6 (0.49)	61.4 (0.68)	2.1 (0.14)	19.0 (0.50)
Quarter 1	22.2 (0.91)	59.7 (1.36)	1.3 (0.21)	19.0 (0.97)
Quarter 2	19.8 (0.89)	62.2 (1.19)	2.4 (0.31)	18.8 (0.95)
Quarter 3	21.5 (0.99)	61.0 (1.34)	2.3 (0.28)	18.4 (0.85)
Quarter 4	19.1 (0.86)	62.4 (1.25)	2.5 (0.30)	19.7 (0.97)
2015 full year	16.5 (0.50)	64.2 (0.68)	3.4 (0.23)	20.2 (0.54)
Quarter 1	17.2 (0.87)	64.0 (1.16)	3.0 (0.42)	19.8 (0.99)
Quarter 2	15.2 (0.74)	65.4 (1.22)	4.0 (0.39)	20.3 (0.97)
Quarter 3	16.9 (0.84)	64.1 (1.18)	3.8 (0.49)	19.7 (0.93)
Quarter 4	16.5 (0.97)	63.4 (1.33)	2.8 (0.36)	21.1 (0.98)
2016 full year	15.2 (0.55)	63.2 (0.66)	3.8 (0.18)	22.8 (0.60)
Quarter 1	15.1 (0.87)	64.1 (1.07)	3.1 (0.37)	21.7 (1.04)
Quarter 2	16.3 (0.91)	61.2 (1.15)	3.9 (0.45)	24.0 (1.09)
Quarter 3	13.9 (0.80)	63.0 (1.14)	3.9 (0.42)	24.3 (1.04)
Quarter 4	15.4 (1.04)	64.5 (1.46)	4.1 (0.39)	21.1 (1.15)
2017 (Jan–Jun)	15.7 (0.63)	64.2 (0.86)	3.5 (0.28)	20.8 (0.70)
Quarter 1	15.3 (0.78)	65.8 (1.29)	4.0 (0.37)	19.7 (1.01)
Quarter 2	15.8 (0.87)	62.6 (1.14)	3.1 (0.35)	22.4 (1.06)
30-64 years				
2010 full year	19.1 (0.36)	67.9 (0.49)	...	14.5 (0.31)
Quarter 1	18.2 (0.64)	69.8 (0.88)	...	13.6 (0.53)
Quarter 2	20.0 (0.83)	67.7 (0.95)	...	13.9 (0.48)
Quarter 3	19.7 (0.64)	67.2 (0.79)	...	14.5 (0.54)
Quarter 4	18.6 (0.59)	67.0 (0.82)	...	16.0 (0.56)

See footnotes at end of table.

Table 2. Percentages (and standard errors) of persons under age 65 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by age group, year, and quarter: United States, January 2010–June 2017—Con.

Age group, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	18.9 (0.34)	67.0 (0.44)	...	15.6 (0.29)
Quarter 1	19.2 (0.62)	67.0 (0.79)	...	15.4 (0.52)
Quarter 2	18.9 (0.60)	67.0 (0.80)	...	15.5 (0.52)
Quarter 3	18.8 (0.58)	67.3 (0.82)	...	15.5 (0.50)
Quarter 4	18.7 (0.59)	67.0 (0.84)	...	16.0 (0.58)
2012 full year	18.7 (0.31)	66.8 (0.43)	...	16.0 (0.30)
Quarter 1	19.4 (0.65)	66.7 (0.85)	...	15.3 (0.52)
Quarter 2	17.7 (0.54)	68.6 (0.78)	...	15.4 (0.51)
Quarter 3	18.6 (0.58)	66.4 (0.80)	...	16.6 (0.57)
Quarter 4	19.2 (0.53)	65.3 (0.72)	...	16.8 (0.53)
2013 full year	18.3 (0.36)	66.6 (0.47)	...	16.7 (0.31)
Quarter 1	18.9 (0.68)	66.4 (0.84)	...	16.4 (0.56)
Quarter 2	18.1 (0.59)	67.5 (0.75)	...	16.1 (0.52)
Quarter 3	18.7 (0.57)	66.5 (0.76)	...	16.6 (0.52)
Quarter 4	17.8 (0.63)	66.2 (0.88)	...	17.6 (0.59)
2014 full year	14.7 (0.30)	69.4 (0.43)	2.9 (0.13)	17.3 (0.33)
Quarter 1	17.1 (0.58)	67.8 (0.74)	1.8 (0.16)	16.5 (0.54)
Quarter 2	14.1 (0.57)	69.6 (0.75)	3.1 (0.23)	17.7 (0.57)
Quarter 3	14.3 (0.51)	69.9 (0.81)	3.4 (0.27)	17.3 (0.57)
Quarter 4	13.7 (0.53)	70.2 (0.85)	3.1 (0.22)	17.7 (0.66)
2015 full year	11.5 (0.25)	71.7 (0.43)	4.9 (0.17)	18.5 (0.36)
Quarter 1	11.5 (0.45)	72.7 (0.76)	4.9 (0.28)	17.5 (0.60)
Quarter 2	11.4 (0.45)	72.7 (0.72)	5.1 (0.30)	17.6 (0.61)
Quarter 3	11.9 (0.52)	70.4 (0.88)	5.2 (0.31)	19.3 (0.71)
Quarter 4	11.2 (0.48)	70.9 (0.86)	4.3 (0.32)	19.4 (0.74)
2016 full year	11.4 (0.34)	71.3 (0.39)	5.1 (0.17)	19.0 (0.38)
Quarter 1	10.8 (0.45)	72.5 (0.72)	5.3 (0.29)	18.7 (0.57)
Quarter 2	11.7 (0.49)	70.5 (0.61)	5.1 (0.31)	19.3 (0.58)
Quarter 3	11.5 (0.49)	70.8 (0.62)	5.1 (0.35)	19.5 (0.55)
Quarter 4	11.7 (0.52)	71.5 (0.64)	5.0 (0.30)	18.4 (0.55)
2017 (Jan–Jun)	11.4 (0.37)	71.6 (0.50)	4.8 (0.20)	18.7 (0.47)
Quarter 1	11.0 (0.51)	72.2 (0.75)	5.0 (0.29)	18.6 (0.59)
Quarter 2	11.8 (0.51)	70.5 (0.56)	4.6 (0.33)	19.2 (0.66)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti and of the National Center for Health Statistics, Division of Health Interview Statistics.

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National Health Interview Survey Early Release Program

Table 3. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by year and quarter: United States, January 2010–June 2017

Year and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2010 full year	22.3 (0.35)	64.1 (0.46)	...	15.0 (0.30)
Quarter 1	21.5 (0.66)	65.5 (0.88)	...	14.4 (0.54)
Quarter 2	23.2 (0.80)	64.0 (0.89)	...	14.0 (0.44)
Quarter 3	23.0 (0.58)	63.2 (0.73)	...	15.0 (0.51)
Quarter 4	21.4 (0.60)	63.6 (0.81)	...	16.4 (0.53)
2011 full year	21.3 (0.34)	64.2 (0.45)	...	15.9 (0.29)
Quarter 1	21.6 (0.59)	64.0 (0.79)	...	15.9 (0.50)
Quarter 2	21.2 (0.59)	64.5 (0.79)	...	15.6 (0.47)
Quarter 3	21.3 (0.62)	64.2 (0.84)	...	15.9 (0.52)
Quarter 4	21.0 (0.62)	64.3 (0.78)	...	16.2 (0.51)
2012 full year	20.9 (0.31)	64.1 (0.42)	...	16.4 (0.29)
Quarter 1	21.7 (0.66)	63.6 (0.84)	...	16.0 (0.51)
Quarter 2	19.6 (0.59)	65.9 (0.83)	...	16.0 (0.51)
Quarter 3	20.9 (0.57)	63.5 (0.79)	...	17.0 (0.55)
Quarter 4	21.3 (0.58)	63.3 (0.73)	...	16.8 (0.50)
2013 full year	20.4 (0.37)	64.2 (0.47)	...	16.7 (0.30)
Quarter 1	20.9 (0.64)	63.6 (0.79)	...	16.9 (0.54)
Quarter 2	19.9 (0.58)	65.1 (0.74)	...	16.3 (0.51)
Quarter 3	20.6 (0.59)	64.5 (0.74)	...	16.4 (0.48)
Quarter 4	20.1 (0.64)	63.8 (0.87)	...	17.3 (0.57)
2014 full year	16.3 (0.31)	67.3 (0.43)	2.7 (0.11)	17.7 (0.32)
Quarter 1	18.4 (0.55)	65.6 (0.76)	1.7 (0.13)	17.1 (0.53)
Quarter 2	15.6 (0.57)	67.7 (0.73)	2.9 (0.21)	18.0 (0.53)
Quarter 3	16.2 (0.53)	67.6 (0.80)	3.1 (0.23)	17.6 (0.53)
Quarter 4	15.1 (0.52)	68.1 (0.81)	2.9 (0.19)	18.2 (0.62)
2015 full year	12.8 (0.27)	69.7 (0.43)	4.5 (0.16)	18.9 (0.36)
Quarter 1	13.0 (0.45)	70.4 (0.77)	4.4 (0.27)	18.1 (0.62)
Quarter 2	12.4 (0.43)	70.8 (0.71)	4.8 (0.27)	18.3 (0.60)
Quarter 3	13.2 (0.51)	68.8 (0.83)	4.9 (0.29)	19.4 (0.66)
Quarter 4	12.6 (0.52)	69.0 (0.84)	3.9 (0.27)	19.9 (0.66)
2016 full year	12.4 (0.36)	69.2 (0.41)	4.7 (0.15)	20.0 (0.38)
Quarter 1	11.9 (0.47)	70.2 (0.70)	4.7 (0.27)	19.5 (0.51)
Quarter 2	12.9 (0.52)	68.1 (0.62)	4.8 (0.28)	20.5 (0.62)
Quarter 3	12.1 (0.48)	68.8 (0.66)	4.8 (0.30)	20.8 (0.56)
Quarter 4	12.7 (0.56)	69.6 (0.70)	4.8 (0.26)	19.1 (0.57)
2017 (Jan–Jun)	12.5 (0.37)	69.6 (0.46)	4.5 (0.19)	19.2 (0.44)
Quarter 1	12.1 (0.43)	70.5 (0.67)	4.8 (0.24)	18.9 (0.54)
Quarter 2	12.9 (0.48)	68.4 (0.58)	4.2 (0.28)	20.0 (0.65)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

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National Health Interview Survey Early Release Program

Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–June 2017

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Male				
2010 full year	25.3 (0.44)	63.4 (0.51)	...	12.5 (0.30)
Quarter 1	24.7 (0.84)	64.7 (0.93)	...	12.0 (0.54)
Quarter 2	26.4 (0.93)	63.5 (0.99)	...	11.2 (0.49)
Quarter 3	26.3 (0.75)	62.2 (0.82)	...	12.6 (0.50)
Quarter 4	24.0 (0.74)	63.3 (0.87)	...	14.1 (0.55)
2011 full year	23.7 (0.40)	63.9 (0.49)	...	13.8 (0.30)
Quarter 1	24.0 (0.72)	63.7 (0.86)	...	13.6 (0.52)
Quarter 2	23.8 (0.72)	64.0 (0.92)	...	13.5 (0.51)
Quarter 3	23.4 (0.75)	64.2 (0.90)	...	14.0 (0.52)
Quarter 4	23.6 (0.69)	63.8 (0.82)	...	14.0 (0.53)
2012 full year	23.2 (0.38)	64.0 (0.46)	...	14.2 (0.31)
Quarter 1	24.0 (0.78)	63.6 (0.92)	...	13.8 (0.54)
Quarter 2	21.6 (0.68)	66.1 (0.90)	...	13.9 (0.58)
Quarter 3	23.5 (0.71)	63.5 (0.82)	...	14.3 (0.57)
Quarter 4	23.8 (0.71)	62.7 (0.84)	...	14.5 (0.54)
2013 full year	22.5 (0.42)	64.6 (0.49)	...	14.2 (0.32)
Quarter 1	23.3 (0.80)	63.9 (0.90)	...	14.3 (0.58)
Quarter 2	22.7 (0.72)	64.3 (0.84)	...	14.2 (0.58)
Quarter 3	22.3 (0.70)	65.0 (0.80)	...	14.1 (0.54)
Quarter 4	21.9 (0.78)	65.0 (0.90)	...	14.3 (0.56)
2014 full year	18.3 (0.38)	67.7 (0.47)	2.4 (0.12)	15.2 (0.36)
Quarter 1	20.0 (0.66)	66.3 (0.84)	1.6 (0.14)	14.9 (0.59)
Quarter 2	17.8 (0.72)	67.8 (0.79)	2.7 (0.24)	15.7 (0.64)
Quarter 3	18.1 (0.66)	67.8 (0.85)	2.7 (0.24)	15.4 (0.58)
Quarter 4	17.3 (0.65)	68.7 (0.92)	2.8 (0.21)	15.1 (0.66)
2015 full year	14.9 (0.31)	69.9 (0.47)	4.1 (0.18)	16.6 (0.37)
Quarter 1	15.2 (0.55)	70.6 (0.88)	3.9 (0.31)	15.6 (0.69)
Quarter 2	14.3 (0.53)	71.6 (0.81)	4.7 (0.30)	15.4 (0.62)
Quarter 3	15.8 (0.65)	68.3 (0.88)	4.1 (0.32)	17.3 (0.66)
Quarter 4	14.3 (0.67)	69.1 (0.96)	3.7 (0.32)	18.2 (0.74)
2016 full year	14.4 (0.42)	69.8 (0.41)	4.7 (0.16)	17.4 (0.38)
Quarter 1	13.8 (0.57)	71.0 (0.73)	4.5 (0.30)	16.9 (0.53)
Quarter 2	15.1 (0.69)	68.7 (0.68)	4.5 (0.30)	17.7 (0.75)
Quarter 3	14.2 (0.54)	69.2 (0.77)	4.9 (0.32)	18.1 (0.62)
Quarter 4	14.6 (0.65)	70.1 (0.72)	4.7 (0.29)	16.8 (0.61)
2017 (Jan–Jun)	14.1 (0.46)	70.2 (0.52)	4.3 (0.22)	17.2 (0.47)
Quarter 1	13.6 (0.57)	71.1 (0.77)	4.7 (0.30)	16.9 (0.70)
Quarter 2	14.4 (0.60)	69.0 (0.76)	3.9 (0.24)	17.9 (0.75)

See footnotes at end of table.

Table 4. Percentages (and standard errors) of persons aged 18–64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by sex, year, and quarter: United States, January 2010–June 2017—Con.

Sex, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Female				
2010 full year	19.3 (0.32)	64.7 (0.47)	...	17.4 (0.38)
Quarter 1	18.4 (0.65)	66.2 (0.95)	...	16.8 (0.68)
Quarter 2	20.1 (0.76)	64.5 (0.92)	...	16.8 (0.55)
Quarter 3	19.7 (0.57)	64.2 (0.80)	...	17.3 (0.67)
Quarter 4	18.8 (0.60)	64.0 (0.87)	...	18.6 (0.68)
2011 full year	18.9 (0.36)	64.5 (0.47)	...	18.0 (0.34)
Quarter 1	19.2 (0.59)	64.3 (0.86)	...	18.1 (0.62)
Quarter 2	18.6 (0.59)	64.9 (0.81)	...	17.8 (0.57)
Quarter 3	19.3 (0.64)	64.1 (0.89)	...	17.8 (0.65)
Quarter 4	18.4 (0.71)	64.8 (0.93)	...	18.4 (0.66)
2012 full year	18.6 (0.33)	64.2 (0.44)	...	18.6 (0.34)
Quarter 1	19.6 (0.66)	63.5 (0.90)	...	18.0 (0.61)
Quarter 2	17.7 (0.60)	65.8 (0.86)	...	18.0 (0.57)
Quarter 3	18.5 (0.61)	63.5 (0.88)	...	19.5 (0.66)
Quarter 4	18.8 (0.59)	63.9 (0.76)	...	18.9 (0.59)
2013 full year	18.3 (0.37)	64.0 (0.51)	...	19.1 (0.36)
Quarter 1	18.7 (0.62)	63.4 (0.85)	...	19.3 (0.65)
Quarter 2	17.3 (0.57)	65.9 (0.79)	...	18.4 (0.59)
Quarter 3	18.9 (0.60)	63.9 (0.81)	...	18.7 (0.57)
Quarter 4	18.4 (0.67)	62.6 (0.96)	...	20.2 (0.73)
2014 full year	14.3 (0.30)	66.9 (0.46)	2.9 (0.13)	20.1 (0.36)
Quarter 1	16.8 (0.59)	65.1 (0.86)	1.8 (0.18)	19.3 (0.62)
Quarter 2	13.5 (0.56)	67.6 (0.84)	3.1 (0.23)	20.2 (0.64)
Quarter 3	14.3 (0.52)	67.4 (0.89)	3.5 (0.28)	19.7 (0.66)
Quarter 4	12.9 (0.54)	67.6 (0.85)	3.1 (0.23)	21.2 (0.73)
2015 full year	10.8 (0.29)	69.6 (0.47)	4.8 (0.17)	21.2 (0.42)
Quarter 1	10.9 (0.46)	70.2 (0.80)	4.8 (0.30)	20.5 (0.69)
Quarter 2	10.6 (0.45)	70.0 (0.75)	4.8 (0.32)	21.1 (0.71)
Quarter 3	10.8 (0.53)	69.3 (0.95)	5.6 (0.35)	21.5 (0.81)
Quarter 4	10.9 (0.53)	68.8 (0.89)	4.2 (0.31)	21.5 (0.76)
2016 full year	10.5 (0.36)	68.6 (0.48)	4.8 (0.16)	22.5 (0.45)
Quarter 1	10.1 (0.49)	69.5 (0.84)	4.8 (0.31)	22.0 (0.66)
Quarter 2	10.8 (0.47)	67.5 (0.79)	5.0 (0.33)	23.2 (0.71)
Quarter 3	10.2 (0.54)	68.3 (0.75)	4.7 (0.35)	23.4 (0.63)
Quarter 4	10.8 (0.60)	69.2 (0.87)	4.8 (0.29)	21.3 (0.73)
2017 (Jan–Jun)	11.1 (0.39)	69.1 (0.55)	4.6 (0.23)	21.2 (0.57)
Quarter 1	10.7 (0.47)	70.0 (0.74)	4.8 (0.27)	20.7 (0.55)
Quarter 2	11.4 (0.54)	67.9 (0.60)	4.5 (0.39)	22.1 (0.79)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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National Health Interview Survey Early Release Program

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–June 2017

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Hispanic or Latino ⁵				
2010 full year	43.2 (0.91)	41.1 (0.85)	...	16.3 (0.64)
Quarter 1	42.4 (1.72)	42.9 (1.67)	...	15.4 (1.10)
Quarter 2	44.9 (1.39)	39.7 (1.37)	...	15.8 (0.92)
Quarter 3	44.1 (1.78)	40.5 (1.69)	...	15.8 (0.98)
Quarter 4	41.5 (1.38)	41.1 (1.45)	...	18.1 (1.00)
2011 full year	42.2 (0.89)	40.3 (0.82)	...	18.1 (0.63)
Quarter 1	42.0 (1.60)	41.2 (1.95)	...	17.1 (1.18)
Quarter 2	41.4 (1.46)	40.2 (1.31)	...	19.0 (0.86)
Quarter 3	42.6 (1.38)	39.5 (1.41)	...	18.6 (1.10)
Quarter 4	42.7 (1.57)	40.2 (1.39)	...	17.6 (1.00)
2012 full year	41.3 (0.89)	40.4 (0.73)	...	19.0 (0.64)
Quarter 1	42.6 (1.72)	41.0 (1.68)	...	17.1 (1.02)
Quarter 2	39.7 (1.29)	42.0 (1.49)	...	19.3 (1.04)
Quarter 3	40.5 (1.55)	39.8 (1.34)	...	20.1 (1.39)
Quarter 4	42.2 (1.58)	38.8 (1.42)	...	19.7 (1.03)
2013 full year	40.6 (0.88)	42.1 (0.70)	...	18.0 (0.62)
Quarter 1	41.4 (1.95)	40.7 (1.52)	...	18.6 (1.17)
Quarter 2	41.3 (1.51)	41.9 (1.24)	...	17.5 (0.94)
Quarter 3	39.5 (1.38)	43.0 (1.49)	...	18.1 (1.11)
Quarter 4	40.3 (1.47)	42.7 (1.40)	...	17.7 (0.95)
2014 full year	33.7 (0.76)	46.4 (0.86)	2.6 (0.30)	20.6 (0.73)
Quarter 1	35.7 (1.43)	44.8 (1.62)	1.4 (0.30)	20.1 (1.09)
Quarter 2	33.2 (1.42)	47.2 (1.55)	3.0 (0.61)	20.3 (1.16)
Quarter 3	34.0 (1.40)	46.8 (1.44)	3.4 (0.55)	19.8 (1.12)
Quarter 4	31.8 (1.47)	47.0 (1.54)	2.6 (0.37)	22.1 (1.22)
2015 full year	27.7 (0.72)	50.0 (0.85)	5.1 (0.40)	23.0 (0.84)
Quarter 1	28.3 (1.24)	49.8 (1.42)	5.4 (0.55)	22.7 (1.26)
Quarter 2	26.1 (1.30)	53.2 (1.46)	4.2 (0.58)	21.4 (1.28)
Quarter 3	29.3 (1.33)	48.2 (1.40)	5.3 (0.65)	23.1 (1.25)
Quarter 4	27.2 (1.36)	48.8 (1.56)	5.4 (0.66)	24.7 (1.41)
2016 full year	25.0 (1.20)	51.4 (1.08)	5.2 (0.40)	24.9 (1.15)
Quarter 1	24.5 (1.31)	51.6 (1.88)	5.1 (0.65)	25.2 (1.72)
Quarter 2	25.1 (1.93)	50.4 (2.23)	5.0 (0.76)	25.4 (2.08)
Quarter 3	24.5 (1.74)	50.6 (1.78)	5.1 (0.81)	26.7 (1.52)
Quarter 4	25.9 (1.79)	53.1 (1.60)	5.8 (0.81)	22.3 (1.24)
2017 (Jan–Jun)	26.5 (1.07)	50.5 (1.20)	4.3 (0.50)	23.9 (1.28)
Quarter 1	24.1 (1.38)	52.2 (1.78)	4.5 (0.63)	24.3 (1.64)
Quarter 2	28.5 (1.34)	48.8 (1.57)	4.3 (0.93)	23.8 (1.69)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–June 2017—Con.

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
Non-Hispanic white, single race				
2010 full year	16.4 (0.35)	72.2 (0.52)	...	12.8 (0.34)
Quarter 1	15.6 (0.63)	73.4 (0.93)	...	12.5 (0.60)
Quarter 2	17.0 (0.65)	72.7 (0.83)	...	11.7 (0.49)
Quarter 3	16.7 (0.64)	71.5 (0.92)	...	13.0 (0.63)
Quarter 4	16.1 (0.66)	71.4 (0.89)	...	14.1 (0.61)
2011 full year	15.6 (0.35)	72.5 (0.48)	...	13.4 (0.31)
Quarter 1	16.1 (0.64)	71.8 (0.87)	...	13.6 (0.57)
Quarter 2	15.8 (0.60)	72.9 (0.85)	...	12.6 (0.50)
Quarter 3	15.7 (0.64)	72.6 (0.86)	...	13.3 (0.61)
Quarter 4	14.8 (0.59)	72.8 (0.94)	...	14.1 (0.62)
2012 full year	15.1 (0.31)	72.7 (0.46)	...	13.7 (0.33)
Quarter 1	16.0 (0.67)	72.3 (0.88)	...	13.1 (0.58)
Quarter 2	14.2 (0.62)	74.5 (0.83)	...	13.1 (0.51)
Quarter 3	15.1 (0.58)	71.9 (0.87)	...	14.7 (0.61)
Quarter 4	15.1 (0.59)	72.3 (0.85)	...	13.9 (0.57)
2013 full year	14.5 (0.34)	72.7 (0.49)	...	14.4 (0.32)
Quarter 1	15.2 (0.62)	71.8 (0.91)	...	14.6 (0.62)
Quarter 2	13.9 (0.54)	73.6 (0.82)	...	14.2 (0.61)
Quarter 3	14.7 (0.61)	72.8 (0.80)	...	14.0 (0.52)
Quarter 4	14.0 (0.61)	72.6 (0.96)	...	14.7 (0.67)
2014 full year	11.6 (0.29)	75.3 (0.47)	2.5 (0.13)	14.6 (0.36)
Quarter 1	13.5 (0.58)	73.7 (0.87)	1.6 (0.16)	14.1 (0.66)
Quarter 2	11.1 (0.58)	75.5 (0.81)	2.6 (0.23)	14.9 (0.61)
Quarter 3	11.4 (0.52)	75.6 (0.88)	2.9 (0.28)	14.6 (0.67)
Quarter 4	10.5 (0.55)	76.2 (0.93)	2.8 (0.24)	14.8 (0.71)
2015 full year	8.7 (0.25)	77.3 (0.47)	4.3 (0.18)	15.7 (0.42)
Quarter 1	8.7 (0.50)	78.6 (0.78)	4.0 (0.30)	14.4 (0.63)
Quarter 2	8.8 (0.47)	78.0 (0.78)	4.7 (0.33)	14.9 (0.68)
Quarter 3	8.9 (0.48)	75.7 (0.93)	4.6 (0.39)	17.0 (0.80)
Quarter 4	8.3 (0.55)	77.0 (0.96)	3.7 (0.36)	16.2 (0.81)
2016 full year	8.6 (0.25)	76.6 (0.38)	4.6 (0.16)	16.6 (0.34)
Quarter 1	8.4 (0.47)	77.8 (0.60)	4.4 (0.32)	15.7 (0.55)
Quarter 2	9.0 (0.41)	75.0 (0.72)	4.7 (0.30)	17.6 (0.59)
Quarter 3	7.9 (0.41)	76.7 (0.67)	4.7 (0.35)	17.1 (0.60)
Quarter 4	8.9 (0.44)	76.8 (0.59)	4.7 (0.29)	15.9 (0.57)
2017 (Jan–Jun)	8.6 (0.35)	77.7 (0.54)	4.6 (0.22)	15.4 (0.41)
Quarter 1	8.5 (0.49)	78.5 (0.66)	5.0 (0.32)	14.8 (0.51)
Quarter 2	8.7 (0.43)	76.6 (0.72)	4.2 (0.27)	16.3 (0.64)
Non-Hispanic black, single race				
2010 full year	27.2 (0.75)	49.3 (0.81)	...	25.3 (0.70)
Quarter 1	27.9 (1.41)	49.5 (1.60)	...	24.3 (1.41)
Quarter 2	26.5 (1.33)	49.4 (1.72)	...	25.7 (1.32)
Quarter 3	28.6 (1.14)	48.6 (1.35)	...	24.8 (1.31)
Quarter 4	25.6 (1.33)	49.6 (1.80)	...	26.3 (1.46)

See footnotes at end of table.

Table 5. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by race/ethnicity, year, and quarter: United States, January 2010–June 2017—Con.

Race/ethnicity, year, and quarter	Uninsured ¹	Private health insurance coverage ²	Exchange-based private health insurance coverage ³	Public health plan coverage ⁴
2011 full year	24.8 (0.65)	50.5 (0.79)	...	26.2 (0.75)
Quarter 1	23.9 (1.26)	52.2 (1.67)	...	25.8 (1.18)
Quarter 2	24.2 (1.24)	51.1 (1.55)	...	26.5 (1.44)
Quarter 3	25.0 (1.16)	50.1 (1.49)	...	25.9 (1.27)
Quarter 4	26.2 (1.44)	48.8 (1.57)	...	26.6 (1.49)
2012 full year	23.6 (0.61)	50.8 (0.75)	...	27.0 (0.68)
Quarter 1	26.0 (1.19)	46.3 (1.50)	...	29.1 (1.21)
Quarter 2	21.9 (1.34)	53.1 (1.93)	...	25.8 (1.40)
Quarter 3	24.1 (1.05)	51.7 (1.47)	...	25.7 (1.27)
Quarter 4	22.6 (1.25)	52.2 (1.52)	...	27.3 (1.34)
2013 full year	24.9 (0.62)	50.0 (0.91)	...	26.6 (0.80)
Quarter 1	25.5 (1.16)	50.6 (1.58)	...	25.0 (1.37)
Quarter 2	23.6 (1.23)	50.8 (1.68)	...	26.7 (1.32)
Quarter 3	25.9 (1.23)	50.3 (1.45)	...	26.0 (1.25)
Quarter 4	24.6 (1.39)	48.3 (1.70)	...	28.7 (1.55)
2014 full year	17.7 (0.60)	53.4 (0.84)	2.9 (0.27)	30.5 (0.73)
Quarter 1	20.2 (1.16)	51.6 (1.67)	1.4 (0.38)	29.7 (1.30)
Quarter 2	15.9 (1.04)	54.4 (1.73)	3.7 (0.51)	31.1 (1.53)
Quarter 3	17.5 (1.00)	52.6 (1.81)	3.3 (0.48)	31.5 (1.54)
Quarter 4	17.2 (1.16)	55.0 (1.82)	3.3 (0.55)	29.8 (1.59)
2015 full year	14.4 (0.57)	57.8 (0.90)	4.0 (0.34)	29.7 (0.84)
Quarter 1	15.6 (1.00)	56.7 (1.50)	4.1 (0.73)	29.7 (1.46)
Quarter 2	13.5 (0.97)	57.9 (1.72)	4.2 (0.61)	30.5 (1.37)
Quarter 3	14.7 (1.17)	60.3 (1.55)	4.4 (0.53)	27.2 (1.18)
Quarter 4	14.0 (1.14)	56.5 (1.99)	3.2 (0.48)	31.4 (1.89)
2016 full year	15.0 (0.62)	56.7 (0.95)	4.1 (0.36)	29.9 (1.06)
Quarter 1	13.0 (1.34)	58.8 (1.86)	4.6 (0.63)	29.6 (1.66)
Quarter 2	16.7 (1.17)	55.7 (1.96)	4.7 (0.66)	29.4 (1.84)
Quarter 3	15.7 (1.20)	56.7 (1.70)	3.6 (0.71)	29.7 (1.47)
Quarter 4	14.6 (1.29)	55.6 (1.68)	3.7 (0.56)	31.1 (1.55)
2017 (Jan–Jun)	13.2 (0.87)	56.9 (1.09)	3.5 (0.38)	31.4 (1.10)
Quarter 1	14.2 (1.18)	55.9 (1.18)	3.7 (0.46)	31.7 (1.28)
Quarter 2	11.8 (1.36)	57.4 (1.72)	3.5 (0.59)	31.9 (1.59)

... Category not applicable.

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁴Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

⁵Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

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Cohen RA and Zammiti EP. Health insurance coverage: Early release of quarterly estimates from the National Health Interview Survey, January 2010–June 2017. National Center for Health Statistics. November 2017. Available from: <https://www.cdc.gov/nchs/nhis/releases.htm>.



National Health Interview Survey Early Release Program

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–June 2017

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
Poor (<100% FPL)				
2010 full year	42.2 (0.99)	19.6 (0.89)	...	38.8 (0.97)
Quarter 1	44.0 (1.79)	17.6 (0.68)	...	39.1 (1.82)
Quarter 2	43.5 (1.87)	19.4 (1.67)	...	37.5 (1.83)
Quarter 3	43.7 (1.75)	17.0 (1.50)	...	40.0 (1.75)
Quarter 4	38.1 (1.58)	24.1 (1.61)	...	38.6 (1.74)
2011 full year	40.1 (0.91)	21.2 (1.02)	...	39.6 (0.93)
Quarter 1	39.8 (0.64)	21.6 (1.79)	...	39.3 (1.67)
Quarter 2	37.2 (1.83)	23.8 (2.48)	...	39.9 (1.87)
Quarter 3	42.2 (1.84)	17.1 (1.86)	...	41.7 (1.64)
Quarter 4	41.1 (1.84)	22.1 (1.98)	...	37.5 (1.83)
2012 full year	40.1 (0.90)	20.2 (1.09)	...	40.8 (0.94)
Quarter 1	42.7 (1.62)	19.6 (1.69)	...	38.6 (1.60)
Quarter 2	38.9 (2.03)	21.0 (3.13)	...	41.3 (1.71)
Quarter 3	41.0 (1.43)	17.2 (1.46)	...	42.3 (1.82)
Quarter 4	37.6 (1.58)	22.6 (1.96)	...	40.9 (1.62)
2013 full year	39.3 (1.00)	19.0 (0.97)	...	42.4 (0.95)
Quarter 1	39.1 (1.74)	19.5 (1.87)	...	42.4 (1.91)
Quarter 2	38.9 (1.79)	19.0 (2.22)	...	42.7 (1.76)
Quarter 3	40.2 (1.90)	18.1 (2.26)	...	42.3 (1.76)
Quarter 4	39.2 (1.77)	19.3 (1.70)	...	42.3 (1.77)
2014 full year	32.3 (0.93)	21.9 (0.92)	2.2 (0.20)	46.6 (0.95)
Quarter 1	34.9 (1.53)	20.5 (1.59)	1.0 (0.27)	45.4 (1.74)
Quarter 2	33.5 (2.03)	20.2 (1.61)	2.5 (0.49)	47.0 (2.11)
Quarter 3	32.0 (1.78)	21.5 (2.06)	2.1 (0.37)	47.5 (1.70)
Quarter 4	29.1 (1.72)	25.1 (2.00)	3.2 (0.50)	46.5 (1.88)
2015 full year	25.2 (0.90)	24.3 (1.04)	3.8 (0.39)	51.7 (1.08)
Quarter 1	28.0 (1.57)	23.1 (1.50)	3.6 (0.65)	50.3 (2.06)
Quarter 2	25.0 (1.51)	24.6 (1.97)	4.3 (0.85)	51.6 (1.93)
Quarter 3	25.2 (1.70)	23.5 (2.67)	4.6 (0.82)	52.7 (2.55)
Quarter 4	22.4 (1.63)	25.9 (2.20)	2.7 (0.53)	52.4 (1.95)
2016 full year	26.2 (1.31)	21.6 (0.92)	2.9 (0.27)	53.7 (1.29)
Quarter 1	24.7 (1.61)	23.8 (1.70)	2.9 (0.45)	52.8 (1.77)
Quarter 2	27.2 (2.05)	19.3 (1.49)	2.4 (0.47)	54.6 (2.25)
Quarter 3	26.2 (2.08)	18.4 (1.60)	2.6 (0.42)	57.6 (2.23)
Quarter 4	26.7 (2.03)	24.6 (1.62)	3.7 (0.64)	50.0 (1.98)
2017 (Jan–Jun)	23.9 (1.42)	25.8 (1.60)	3.0 (0.46)	51.4 (1.42)
Quarter 1	22.6 (1.51)	29.2 (2.28)	3.5 (0.70)	49.3 (2.10)
Quarter 2	25.1 (1.97)	22.6 (1.68)	2.6 (0.50)	53.6 (1.97)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–June 2017—Con.

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
Near poor (≥100% and <200% FPL)				
2010 full year	43.0 (0.74)	34.7 (0.74)	...	23.7 (0.55)
Quarter 1	43.8 (1.41)	34.8 (1.48)	...	22.8 (1.15)
Quarter 2	44.2 (1.52)	35.0 (1.44)	...	22.1 (1.17)
Quarter 3	43.9 (1.50)	34.3 (1.54)	...	23.5 (1.14)
Quarter 4	40.2 (1.51)	34.8 (1.59)	...	26.6 (1.35)
2011 full year	40.1 (0.72)	35.4 (0.75)	...	25.9 (0.69)
Quarter 1	40.3 (1.24)	36.1 (1.37)	...	25.4 (1.21)
Quarter 2	42.1 (1.41)	33.5 (1.32)	...	25.7 (1.14)
Quarter 3	39.0 (1.31)	36.0 (1.34)	...	26.0 (1.25)
Quarter 4	39.2 (1.49)	35.9 (1.40)	...	26.5 (1.27)
2012 full year	39.2 (0.68)	37.2 (0.74)	...	25.2 (0.57)
Quarter 1	41.0 (1.28)	35.8 (1.44)	...	24.4 (1.13)
Quarter 2	37.8 (1.42)	38.4 (1.46)	...	25.7 (1.12)
Quarter 3	38.0 (1.51)	38.6 (1.62)	...	25.1 (1.16)
Quarter 4	40.0 (1.44)	35.9 (1.45)	...	25.4 (1.21)
2013 full year	38.5 (0.84)	36.4 (0.78)	...	26.6 (0.78)
Quarter 1	39.2 (1.42)	33.8 (1.38)	...	28.4 (1.42)
Quarter 2	38.4 (1.55)	37.9 (1.50)	...	25.4 (1.33)
Quarter 3	37.9 (1.34)	39.3 (1.39)	...	24.1 (1.19)
Quarter 4	38.6 (1.42)	34.6 (1.38)	...	28.5 (1.44)
2014 full year	30.9 (0.72)	41.2 (0.81)	4.5 (0.33)	29.6 (0.76)
Quarter 1	34.4 (1.58)	39.3 (1.53)	2.2 (0.40)	27.5 (1.24)
Quarter 2	28.5 (1.20)	43.5 (1.38)	5.1 (0.56)	29.6 (1.21)
Quarter 3	31.3 (1.32)	42.1 (1.43)	5.3 (0.70)	28.7 (1.27)
Quarter 4	29.2 (1.31)	40.0 (1.47)	5.2 (0.66)	32.6 (1.41)
2015 full year	24.1 (0.62)	43.8 (0.79)	7.9 (0.48)	34.2 (0.80)
Quarter 1	23.8 (1.14)	45.9 (1.43)	8.6 (0.92)	32.8 (1.43)
Quarter 2	24.0 (1.17)	45.8 (1.47)	8.6 (0.88)	32.5 (1.42)
Quarter 3	24.4 (1.22)	41.3 (1.54)	7.3 (0.99)	36.1 (1.47)
Quarter 4	24.2 (1.35)	42.4 (1.68)	7.0 (0.82)	35.5 (1.69)
2016 full year	23.2 (0.76)	40.3 (0.95)	7.5 (0.51)	38.5 (0.91)
Quarter 1	23.6 (1.33)	43.0 (1.86)	7.0 (0.90)	36.2 (1.78)
Quarter 2	23.4 (1.28)	39.1 (1.40)	7.5 (0.75)	39.2 (1.39)
Quarter 3	22.0 (1.40)	39.2 (1.37)	7.2 (0.91)	40.5 (1.64)
Quarter 4	23.8 (1.34)	39.8 (1.72)	8.3 (0.97)	38.1 (1.59)
2017 (Jan–Jun)	23.4 (0.94)	40.5 (1.06)	7.3 (0.77)	38.3 (1.31)
Quarter 1	23.0 (1.16)	42.0 (1.39)	6.6 (0.68)	36.9 (1.64)
Quarter 2	23.3 (1.26)	39.0 (1.78)	7.7 (1.29)	39.9 (1.80)
Not poor (≥200% FPL)				
2010 full year	12.6 (0.27)	80.8 (0.36)	...	8.1 (0.27)
Quarter 1	11.5 (0.50)	82.2 (0.66)	...	7.8 (0.45)
Quarter 2	13.2 (0.57)	80.8 (0.66)	...	7.4 (0.36)
Quarter 3	13.2 (0.57)	80.1 (0.65)	...	8.1 (0.51)
Quarter 4	12.4 (0.54)	80.1 (0.69)	...	9.0 (0.46)

See footnotes at end of table.

Table 6. Percentages (and standard errors) of persons aged 18-64 who were uninsured, had private health insurance coverage, and had public health plan coverage at the time of interview, by poverty status, year, and quarter: United States, January 2010–June 2017—Con.

Poverty status ¹ , year, and quarter	Uninsured ²	Private health insurance coverage ³	Exchange-based private health insurance coverage ⁴	Public health plan coverage ⁵
2011 full year	12.0 (0.28)	81.1 (0.35)	...	8.3 (0.23)
Quarter 1	12.0 (0.55)	81.1 (0.64)	...	8.3 (0.40)
Quarter 2	12.5 (0.49)	80.5 (0.64)	...	8.4 (0.39)
Quarter 3	12.0 (0.49)	81.5 (0.64)	...	8.0 (0.39)
Quarter 4	11.6 (0.50)	81.4 (0.66)	...	8.6 (0.43)
2012 full year	11.4 (0.26)	81.3 (0.38)	...	8.7 (0.29)
Quarter 1	11.5 (0.52)	81.4 (0.68)	...	8.5 (0.52)
Quarter 2	11.3 (0.52)	81.7 (0.68)	...	8.5 (0.44)
Quarter 3	11.3 (0.44)	81.0 (0.64)	...	9.3 (0.51)
Quarter 4	11.7 (0.44)	80.9 (0.62)	...	8.7 (0.49)
2013 full year	11.4 (0.27)	81.2 (0.37)	...	8.9 (0.26)
Quarter 1	11.7 (0.56)	81.7 (0.74)	...	8.1 (0.47)
Quarter 2	11.4 (0.48)	81.0 (0.62)	...	9.0 (0.45)
Quarter 3	12.0 (0.54)	80.0 (0.66)	...	9.6 (0.44)
Quarter 4	10.5 (0.59)	82.0 (0.73)	...	8.8 (0.47)
2014 full year	8.9 (0.23)	83.9 (0.35)	2.3 (0.12)	8.5 (0.26)
Quarter 1	10.1 (0.48)	83.0 (0.62)	1.7 (0.18)	8.1 (0.44)
Quarter 2	8.6 (0.43)	83.0 (0.64)	2.5 (0.23)	9.7 (0.48)
Quarter 3	8.5 (0.40)	84.4 (0.57)	2.7 (0.27)	8.3 (0.42)
Quarter 4	8.3 (0.44)	85.1 (0.61)	2.4 (0.22)	8.0 (0.46)
2015 full year	7.6 (0.22)	84.7 (0.33)	3.8 (0.17)	9.1 (0.27)
Quarter 1	7.5 (0.42)	85.3 (0.65)	3.5 (0.28)	8.6 (0.49)
Quarter 2	7.5 (0.36)	85.2 (0.56)	3.8 (0.28)	8.8 (0.46)
Quarter 3	8.1 (0.46)	83.8 (0.64)	4.3 (0.32)	9.6 (0.46)
Quarter 4	7.3 (0.47)	84.7 (0.68)	3.4 (0.32)	9.3 (0.54)
2016 full year	7.2 (0.25)	84.6 (0.29)	4.3 (0.16)	9.6 (0.22)
Quarter 1	6.5 (0.37)	85.9 (0.54)	4.4 (0.32)	9.0 (0.36)
Quarter 2	7.5 (0.42)	83.9 (0.51)	4.3 (0.27)	10.0 (0.45)
Quarter 3	7.1 (0.43)	84.6 (0.49)	4.4 (0.33)	10.0 (0.41)
Quarter 4	7.8 (0.36)	84.1 (0.58)	4.2 (0.27)	9.5 (0.47)
2017 (Jan–Jun)	7.9 (0.35)	84.1 (0.41)	4.0 (0.19)	9.4 (0.30)
Quarter 1	7.8 (0.41)	84.5 (0.51)	4.5 (0.30)	9.2 (0.39)
Quarter 2	8.0 (0.51)	83.5 (0.53)	3.5 (0.23)	9.7 (0.48)

... Category not applicable.

¹Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 12.2% in 2010, 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, 8.8% in 2015, 7.8% in 2016 and 6.6% in the first quarter of 2017. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

²A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

⁴Includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage."

⁵Includes Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2017, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the NHIS Early Release Program (<https://www.cdc.gov/nchs/nhis/releases.htm>). This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–June 2017

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Age group		
Under age 65		
2014 full year	2.2 (0.10)	5.9
Quarter 1	1.4 (0.11)	3.7
Quarter 2	2.4 (0.17)	6.3
Quarter 3	2.5 (0.20)	6.8
Quarter 4	2.5 (0.18)	6.7
2015 full year	3.8 (0.14)	10.2
Quarter 1	3.6 (0.22)	9.7
Quarter 2	4.0 (0.24)	10.7
Quarter 3	4.2 (0.29)	11.3
Quarter 4	3.4 (0.24)	9.1
2016 full year	4.1 (0.13)	11.2
Quarter 1	4.0 (0.23)	10.8
Quarter 2	4.1 (0.26)	11.1
Quarter 3	4.1 (0.29)	11.1
Quarter 4	4.3 (0.26)	11.6
2017 (Jan–Jun)	3.7 (0.17)	10.1
Quarter 1	4.0 (0.22)	10.8
Quarter 2	3.5 (0.24)	9.5
Age 0–17		
2014 full year	0.9 (0.11)	0.7
Quarter 1	0.5 (0.14)	0.4
Quarter 2	1.0 (0.17)	0.7
Quarter 3	1.0 (0.19)	0.8
Quarter 4	1.3 (0.28)	0.9
2015 full year	2.0 (0.18)	1.4
Quarter 1	1.6 (0.23)	1.2
Quarter 2	1.9 (0.29)	1.4
Quarter 3	2.5 (0.39)	1.8
Quarter 4	1.9 (0.32)	1.4
2016 full year	2.5 (0.17)	1.8
Quarter 1	2.2 (0.27)	1.6
Quarter 2	2.4 (0.32)	1.8
Quarter 3	2.4 (0.38)	1.7
Quarter 4	3.0 (0.37)	2.2
2017 (Jan–Jun)	1.8 (0.19)	1.3
Quarter 1	1.9 (0.27)	1.4
Quarter 2	1.7 (0.22)	1.2
Age 18–64		
2014 full year	2.7 (0.11)	5.2
Quarter 1	1.7 (0.13)	3.3
Quarter 2	2.9 (0.21)	5.7
Quarter 3	3.1 (0.23)	6.1
Quarter 4	2.9 (0.19)	5.7

See footnotes at the end of the table.

Table 7. Percentages and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by age group, year, and quarter: United States, January 2014–March 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2015 full year	4.5 (0.16)	8.8
Quarter 1	4.4 (0.27)	8.6
Quarter 2	4.8 (0.27)	9.3
Quarter 3	4.9 (0.29)	9.5
Quarter 4	3.9 (0.27)	7.8
2016 full year	4.7 (0.15)	9.4
Quarter 1	4.7 (0.27)	9.2
Quarter 2	4.8 (0.28)	9.4
Quarter 3	4.8 (0.30)	9.4
Quarter 4	4.8 (0.26)	9.4
2017 (Jan–Jun)	4.5 (0.19)	8.8
Quarter 1	4.8 (0.24)	9.4
Quarter 2	4.2 (0.28)	8.3
Age 18–29		
2014 full year	2.1 (0.14)	1.1
Quarter 1	1.3 (0.21)	0.6
Quarter 2	2.4 (0.31)	1.2
Quarter 3	2.3 (0.28)	1.2
Quarter 4	2.5 (0.30)	1.3
2015 full year	3.4 (0.23)	1.8
Quarter 1	3.0 (0.42)	1.6
Quarter 2	4.0 (0.39)	2.1
Quarter 3	3.8 (0.49)	1.9
Quarter 4	2.8 (0.36)	1.5
2016 full year	3.8 (0.18)	2.0
Quarter 1	3.1 (0.37)	1.6
Quarter 2	3.9 (0.45)	2.1
Quarter 3	3.9 (0.42)	2.0
Quarter 4	4.1 (0.39)	2.1
2017 (Jan–Jun)	3.5 (0.28)	1.8
Quarter 1	4.0 (0.37)	2.1
Quarter 2	3.1 (0.35)	1.6
Age 30–64		
2014 full year	2.9 (0.13)	4.1
Quarter 1	1.8 (0.16)	2.6
Quarter 2	3.1 (0.23)	4.4
Quarter 3	3.4 (0.27)	4.9
Quarter 4	3.1 (0.22)	4.4
2015 full year	4.9 (0.17)	7.0
Quarter 1	4.9 (0.28)	7.0
Quarter 2	5.1 (0.30)	7.3
Quarter 3	5.2 (0.31)	7.6
Quarter 4	4.3 (0.32)	6.3
2016 full year	5.1 (0.17)	7.4
Quarter 1	5.3 (0.29)	7.6
Quarter 2	5.1 (0.31)	7.3
Quarter 3	5.1 (0.35)	7.4
Quarter 4	5.0 (0.30)	7.3
2017 (Jan–Jun)	4.8 (0.20)	7.0
Quarter 1	5.0 (0.29)	7.3
Quarter 2	4.6 (0.33)	6.7

See footnotes at the end of the table.

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage." These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population

SOURCE: NCHS, National Health Interview Survey, 2014–2017, Family Core component.

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National Health Interview Survey Early Release Program

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–June 2017

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Sex		
Male		
2014 full year	2.4 (0.12)	2.3
Quarter 1	1.6 (0.14)	1.5
Quarter 2	2.7 (0.24)	2.6
Quarter 3	2.7 (0.24)	2.6
Quarter 4	2.8 (0.21)	2.7
2015 full year	4.1 (0.18)	4.0
Quarter 1	3.9 (0.31)	3.7
Quarter 2	4.7 (0.30)	4.5
Quarter 3	4.1 (0.32)	4.1
Quarter 4	3.7 (0.32)	3.6
2016 full year	4.7 (0.16)	4.5
Quarter 1	4.5 (0.30)	4.4
Quarter 2	4.5 (0.30)	4.3
Quarter 3	4.9 (0.32)	4.7
Quarter 4	4.7 (0.29)	4.6
2017 (Jan–Jun)	4.3 (0.22)	4.2
Quarter 1	4.7 (0.30)	4.5
Quarter 2	3.9 (0.24)	3.8
Female		
2014 full year	2.9 (0.13)	2.9
Quarter 1	1.8 (0.18)	1.8
Quarter 2	3.1 (0.23)	3.1
Quarter 3	3.5 (0.28)	3.4
Quarter 4	3.1 (0.23)	3.1
2015 full year	4.8 (0.17)	4.8
Quarter 1	4.8 (0.30)	4.8
Quarter 2	4.8 (0.32)	4.8
Quarter 3	5.6 (0.35)	5.6
Quarter 4	4.2 (0.31)	4.2
2016 full year	4.8 (0.16)	4.9
Quarter 1	4.8 (0.31)	4.9
Quarter 2	5.0 (0.33)	5.0
Quarter 3	4.7 (0.35)	4.7
Quarter 4	4.8 (0.29)	4.8
2017 (Jan–Jun)	4.6 (0.23)	4.6
Quarter 1	4.8 (0.27)	4.9
Quarter 2	4.5 (0.39)	4.5
Race/ethnicity		
Hispanic or Latino ²		
2014 full year	2.6 (0.30)	0.9
Quarter 1	1.4 (0.30)	0.5
Quarter 2	3.0 (0.61)	1.0
Quarter 3	3.4 (0.55)	1.1
Quarter 4	2.6 (0.37)	0.9

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–June 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2015 full year	5.1 (0.40)	1.7
Quarter 1	5.4 (0.55)	1.8
Quarter 2	4.2 (0.58)	1.4
Quarter 3	5.3 (0.65)	1.8
Quarter 4	5.4 (0.66)	1.9
2016 full year	5.2 (0.40)	1.8
Quarter 1	5.1 (0.65)	1.8
Quarter 2	5.0 (0.76)	1.7
Quarter 3	5.1 (0.81)	1.8
Quarter 4	5.8 (0.81)	2.0
2017 (Jan–Jun)	4.3 (0.50)	1.5
Quarter 1	4.5 (0.63)	1.6
Quarter 2	4.3 (0.93)	1.5
Non-Hispanic white, single race		
2014 full year	2.5 (0.13)	3.0
Quarter 1	1.6 (0.16)	1.9
Quarter 2	2.6 (0.23)	3.2
Quarter 3	2.9 (0.28)	3.5
Quarter 4	2.8 (0.24)	3.4
2015 full year	4.3 (0.18)	5.2
Quarter 1	4.0 (0.30)	4.9
Quarter 2	4.7 (0.33)	5.8
Quarter 3	4.6 (0.39)	5.5
Quarter 4	3.7 (0.36)	4.5
2016 full year	4.6 (0.16)	5.6
Quarter 1	4.4 (0.32)	5.3
Quarter 2	4.7 (0.30)	5.6
Quarter 3	4.7 (0.35)	5.7
Quarter 4	4.7 (0.29)	5.6
2017 (Jan–Jun)	4.6 (0.22)	5.5
Quarter 1	5.0 (0.32)	6.0
Quarter 2	4.2 (0.27)	5.1
Non-Hispanic black, single race		
2014 full year	2.9 (0.27)	0.7
Quarter 1	1.4 (0.38)	0.3
Quarter 2	3.7 (0.51)	0.9
Quarter 3	3.3 (0.48)	0.8
Quarter 4	3.3 (0.55)	0.8
2015 full year	4.0 (0.34)	1.0
Quarter 1	4.1 (0.73)	1.0
Quarter 2	4.2 (0.61)	1.0
Quarter 3	4.4 (0.53)	1.1
Quarter 4	3.2 (0.48)	0.8
2016 full year	4.1 (0.36)	1.0
Quarter 1	4.6 (0.63)	1.1
Quarter 2	4.7 (0.66)	1.1
Quarter 3	3.6 (0.71)	0.9
Quarter 4	3.7 (0.56)	0.9
2017 (Jan–Jun)	3.5 (0.38)	0.9
Quarter 1	3.7 (0.46)	0.9
Quarter 2	3.5 (0.59)	0.8

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–June 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
Poverty status ³		
Poor (<100% FPL)		
2014 full year	2.2 (0.20)	0.6
Quarter 1	1.0 (0.27)	0.3
Quarter 2	2.5 (0.49)	0.7
Quarter 3	2.1 (0.37)	0.6
Quarter 4	3.2 (0.50)	0.9
2015 full year	3.8 (0.39)	0.9
Quarter 1	3.6 (0.65)	0.9
Quarter 2	4.3 (0.85)	1.0
Quarter 3	4.6 (0.82)	1.1
Quarter 4	2.7 (0.53)	0.7
2016 full year	2.9 (0.27)	0.7
Quarter 1	2.9 (0.45)	0.7
Quarter 2	2.4 (0.47)	0.6
Quarter 3	2.6 (0.42)	0.6
Quarter 4	3.7 (0.64)	0.9
2017 (Jan–Jun)	3.0 (0.46)	0.7
Quarter 1	3.5 (0.70)	0.8
Quarter 2	2.6 (0.50)	0.6
Near poor (≥100% and <200% FPL)		
2014 full year	4.5 (0.33)	1.6
Quarter 1	2.2 (0.40)	0.8
Quarter 2	5.1 (0.56)	1.7
Quarter 3	5.3 (0.70)	1.9
Quarter 4	5.2 (0.66)	1.8
2015 full year	7.9 (0.48)	2.7
Quarter 1	8.6 (0.92)	2.9
Quarter 2	8.6 (0.88)	2.9
Quarter 3	7.3 (0.99)	2.6
Quarter 4	7.0 (0.82)	2.5
2016 full year	7.5 (0.51)	2.5
Quarter 1	7.0 (0.90)	2.5
Quarter 2	7.5 (0.75)	2.5
Quarter 3	7.2 (0.91)	2.4
Quarter 4	8.3 (0.97)	2.7
2017 (Jan–Jun)	7.3 (0.77)	2.5
Quarter 1	6.6 (0.68)	2.2
Quarter 2	7.7 (1.29)	2.6
Not poor (≥200% FPL)		
2014 full year	2.3 (0.12)	3.1
Quarter 1	1.7 (0.18)	2.2
Quarter 2	2.5 (0.23)	3.4
Quarter 3	2.7 (0.27)	3.6
Quarter 4	2.4 (0.22)	3.1
2015 full year	3.8 (0.17)	5.1
Quarter 1	3.5 (0.28)	4.7
Quarter 2	3.8 (0.28)	5.2
Quarter 3	4.3 (0.32)	5.9
Quarter 4	3.4 (0.32)	4.6

See footnotes at end of table.

Table 8. Percentages and number in millions of persons aged 18–64 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics, year, and quarter: United States, January 2014–June 2017—Con.

Characteristic, year and quarter	Percent (standard error ¹)	Number in millions
2016 full year	4.3 (0.16)	6.0
Quarter 1	4.4 (0.32)	6.0
Quarter 2	4.3 (0.27)	6.0
Quarter 3	4.4 (0.33)	6.1
Quarter 4	4.2 (0.27)	6.0
2017 (Jan–Jun)	4.0 (0.19)	5.5
Quarter 1	4.5 (0.30)	6.2
Quarter 2	3.5 (0.23)	4.9

¹The estimates are based on a sample of the population and therefore are subject to sampling error. Standard errors are reported to indicate the reliability of the estimates. Quarterly estimates have larger standard errors than annual estimates due to smaller sample sizes, and this should be taken into account when evaluating the statistical significance of differences between groups and changes over time. Estimates with larger standard errors are less reliable and less precise than estimates with smaller standard errors.

²Refers to persons who are of Hispanic or Latino origin and may be of any race or combination of races.

³Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold; "Near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "Not poor" persons have incomes of 200% of the poverty threshold or greater. Persons with unknown poverty status are not shown in this table. The percentage of respondents with unknown poverty status was 8.8% in 2014, 8.8% in 2015, 7.8% in 2016 and 6.9% in the first two quarters of 2017. Estimates may differ from estimates that are based on both reported and imputed income. FPL is federal poverty level.

NOTES: Private health insurance includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Exchange-based coverage includes persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111-148, P.L. 111-152). All persons who have exchange-based coverage are considered to have private health insurance and have also been included in the estimate for "private health insurance coverage." These health insurance estimates are being released prior to final data editing and final weighting to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2014–2017, Family Core component.

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National Health Interview Survey

Coverage, Access, and Utilization by Medicaid Expansion Status

Coverage, access, and utilization by Medicaid expansion status: Estimates from the National Health Interview Survey, United States, 2016

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Table 1. Age group and poverty status of persons of all ages who were uninsured at the time of interview with family incomes less than or equal to 400 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Age and poverty status	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ persons of all ages with incomes less than or equal to 400% FPL ⁵	7,246	100.0	9,400	100.0	16,639	100.0
Age group [†]						
0-18 years	1,417	19.6 (1.50)*	1,394	14.8 (0.93)	2,810	16.9 (0.85)
19-34 years	2,859	39.5 (1.39)	3,557	37.8 (1.22)	6,412	38.5 (0.92)
35-49 years	1,609	22.2 (1.16)*	2,441	26.0 (0.97)	4,048	24.3 (0.75)
50-64 years	1,282	17.7 (1.08)*	1,956	20.8 (1.02)	3,236	19.4 (0.75)
65 and over	79	1.1 (0.24)	53	0.6 (0.17)	132	0.8 (0.14)
Poverty status ^{5†}						
Less than 100% FPL	1,537	21.2 (1.74)*	2,909	30.9 (1.35)	4,442	26.7 (1.11)
100% to less than or equal to 138% FPL	989	13.6 (1.85)	1,353	14.4 (1.07)	2,340	14.1 (1.05)
Greater than 138% to less than or equal to 250% FPL	2,849	39.3 (1.94)	3,351	35.7 (1.55)	6,198	37.2 (1.23)
Greater than 250% to less than or equal to 400% FPL	1,871	25.8 (1.72)*	1,788	19.0 (1.36)	3,658	22.0 (1.06)

[†]Chi-square test significant at $p < 0.05$.

*Significantly different from nonexpansion states within age group or poverty level at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammiti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 2. State Medicaid expansion status for persons of all ages who were uninsured at the time of interview with family incomes less than or equal to 400 percent of the federal poverty level, by age group and poverty status: United States, 2016

Age and poverty status	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ persons of all ages with incomes less than or equal to 400% FPL ⁵	7,246	43.6 (1.35)	9,400	56.4 (1.35)	16,639	100.0
Age group						
0-18 years	1,417	50.5 (3.25)	1,394	49.5 (3.25)	2,810	100.0
19-34 years	2,859	44.6 (1.66)	3,557	55.4 (1.66)	6,412	100.0
35-49 years	1,609	39.8 (1.90)	2,441	60.2 (1.90)	4,048	100.0
50-64 years	1,282	39.7 (2.10)	1,956	60.3 (2.10)	3,236	100.0
65 and over	*	*	*	*	132	100.0
Poverty status ⁵						
Less than 100% FPL	1,537	34.6 (2.52)	2,909	65.4 (2.52)	4,442	100.0
100% to less than or equal to 138% FPL	989	42.3 (3.89)	1,353	57.7 (3.89)	2,340	100.0
Greater than 138% to less than or equal to 250% FPL	2,849	46.0 (2.01)	3,351	54.0 (2.01)	6,198	100.0
Greater than 250 to less than or equal to 400% FPL	1,871	51.2 (2.80)	1,788	48.8 (2.80)	3,658	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table 3. Selected demographic characteristics of adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Selected demographic characteristics	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,915	100.0	3,721	100.0	5,639	100.0
Age group						
19-34 years	1,029	53.7 (2.96)	1,775	47.7 (1.82)	2,806	49.8 (1.60)
35-49 years	446	23.3 (2.29)	1,049	28.2 (1.60)	1,496	26.5 (1.33)
50-64 years	440	23.0 (2.31)	897	24.1 (1.67)	1,337	23.7 (1.36)
Poverty status ⁵						
Less than 100% FPL	1,120	58.5 (3.28) [†]	2,549	68.5 (2.05)	3,671	65.1 (1.81)
100% to less than or equal to 138% FPL	795	41.5 (3.28) [†]	1,172	31.5 (2.05)	1,968	34.9 (1.81)
Sex						
Male	1,201	62.7 (2.33) [†]	1,883	50.6 (1.49)	3,085	54.7 (1.31)
Female	714	37.3 (2.33) [†]	1,838	49.4 (1.49)	2,554	45.3 (1.31)
Race/ethnicity [†]						
Hispanic	419	21.9 (2.64)	731	19.7 (3.26)	1,151	20.4 (2.30)
Non-Hispanic, white only	1,022	53.3 (3.40)	1,676	45.0 (2.70)	2,699	47.9 (2.14)
Non-Hispanic, black only	333	17.4 (2.47) [†]	1,108	29.8 (2.32)	1,442	25.6 (1.73)
Non-Hispanic, Asian only	*	*	47	1.3 (0.57)	127	2.2 (0.60)
Non-Hispanic, other	61	3.2 (1.02)	159	4.3 (0.98)	220	3.9 (0.73)
Marital status						
Married	503	26.3 (3.00)	1,054	28.3 (1.76)	1,558	27.6 (1.54)
Widowed	26	1.3 (0.48)	91	2.4 (0.56)	116	2.1 (0.40)
Divorced or separated	235	12.3 (1.79)	597	16.1 (1.21)	833	14.8 (1.02)
Living with a partner	324	16.9 (2.04)	535	14.4 (1.63)	860	15.2 (1.28)
Never married	827	43.2 (3.10)	1,444	38.8 (2.08)	2,272	40.3 (1.74)
Number of family members						
1	448	23.4 (2.30)	696	18.7 (1.63)	1,145	20.3 (1.34)
2-4	1,077	56.2 (2.88)	2,265	60.9 (2.08)	3,344	59.3 (1.68)
5 or more	390	20.4 (2.77)	759	20.4 (1.73)	1,150	20.4 (1.49)
Employment status [†]						
Employed	1,221	63.8 (2.43)	2,071	55.7 (1.60)	3,294	58.4 (1.37)
Unemployed	273	14.3 (1.85)	625	16.8 (1.35)	899	15.9 (1.10)
Not in workforce	421	22.0 (2.17) [†]	1,025	27.5 (1.60)	1,447	25.7 (1.30)
Education status						
Less than high school	565	29.5 (2.84)	1,084	29.1 (1.73)	1,650	29.3 (1.50)
High school diploma or GED ⁶	663	34.6 (2.65)	1,515	40.7 (1.87)	2,180	38.7 (1.52)
Some college	537	28.1 (2.49)	959	25.8 (1.69)	1,497	26.5 (1.39)
Bachelor's degree or more	149	7.8 (1.71)	164	4.4 (0.78)	313	5.5 (0.79)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[†]Chi-square test significant at $p < 0.05$.

[†]Significantly different from nonexpansion states within poverty status, sex, race and ethnicity, and employment status at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶GED is General Educational Development high school equivalency diploma.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table 4. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected demographic characteristics: United States, 2016

Selected demographic characteristics	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,915	33.9 (1.81)	3,721	66.1 (1.81)	5,639	100.0
Age group						
19-34 years	1,029	36.6 (2.47)	1,775	63.4 (2.47)	2,806	100.0
35-49 years	446	29.8 (2.89)	1,049	70.2 (2.89)	1,496	100.0
50-64 years	440	32.9 (3.14)	897	67.1 (3.14)	1,337	100.0
Poverty status ⁵						
Less than 100% FPL	1,120	30.5 (2.08)	2,549	69.5 (2.08)	3,671	100.0
100% to less than or equal to 138% FPL	795	40.4 (3.20)	1,172	59.6 (3.20)	1,968	100.0
Sex						
Male	1,201	38.9 (2.18)	1,883	61.1 (2.18)	3,085	100.0
Female	714	27.9 (2.16)	1,838	72.1 (2.16)	2,554	100.0
Race/ethnicity						
Hispanic	419	36.4 (5.56)	731	63.6 (5.56)	1,151	100.0
Non-Hispanic, white only	1,022	37.8 (2.64)	1,676	62.2 (2.64)	2,699	100.0
Non-Hispanic, black only	333	23.1 (3.08)	1,108	76.9 (3.08)	1,442	100.0
Non-Hispanic, Asian only	*	*	*	*	127	100.0
Non-Hispanic, other	*	*	*	*	220	100.0
Marital status						
Married	503	32.1 (3.52)	1,054	67.9 (3.52)	1,558	100.0
Widowed	*	*	*	*	116	100.0
Divorced or separated	235	28.1 (3.60)	597	71.9 (3.60)	833	100.0
Living with a partner	324	37.6 (4.18)	535	62.4 (4.18)	860	100.0
Never married	827	36.2 (2.75)	1,444	63.8 (2.75)	2,272	100.0
Number of family members						
1	448	39.1 (3.27)	696	60.9 (3.27)	1,145	100.0
2-4	1,077	32.2 (2.28)	2,265	67.8 (2.28)	3,344	100.0
5 or more	390	33.9 (4.21)	759	66.1 (4.21)	1,150	100.0
Employment status						
Employed	1,221	37.1 (2.20)	2,071	62.9 (2.20)	3,294	100.0
Unemployed	273	30.4 (3.43)	625	69.6 (3.43)	899	100.0
Not in workforce	421	29.1 (3.00)	1,025	70.9 (3.00)	1,447	100.0
Education status						
Less than high school	565	34.1 (3.38)	1,084	65.9 (3.38)	1,650	100.0
High school diploma or GED ⁵	663	30.2 (2.58)	1,515	69.8 (2.58)	2,180	100.0
Some college	537	35.7 (2.85)	959	64.3 (2.85)	1,497	100.0
Bachelor's degree or more	149	47.5 (7.04)	164	52.5 (7.04)	313	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶GED is General Educational Development high school equivalency diploma.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table 5. Health status and selected health conditions of adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Health status and selected health conditions	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,834	100.0	3,382	100.0	5,219	100.0
Health status [†]						
Excellent or very good	864	47.1 (4.33)	1,689	49.9 (2.79)	2,555	49.0 (2.37)
Good	734	40.0 (4.52) [‡]	948	28.0 (2.46)	1,682	32.2 (2.30)
Fair or poor	236	12.9 (3.04) [‡]	745	22.0 (2.29)	982	18.8 (1.85)
Health status compared to previous year [†]						
Better	289	15.7 (3.05)	574	17.0 (2.04)	863	16.5 (1.70)
Same	1,379	75.2 (4.03)	2,250	66.5 (2.49)	3,631	69.6 (2.15)
Worse	*	*	558	16.5 (2.07)	725	13.9 (1.75)
Ever been diagnosed with cancer						
Yes	*	*	124	3.7 (1.08)	198	3.8 (0.92)
No	**1,760	**96.0 (1.70)	3,258	96.3 (1.08)	5,022	96.2 (0.92)
Ever been diagnosed with diabetes						
Yes	*	*	237	7.0 (2.03)	318	6.1 (1.46)
No	**1,754	**95.6 (1.71)	3,144	93.0 (2.03)	4,901	93.9 (1.46)
Ever been diagnosed with hypertension ⁶						
Yes	291	15.9 (3.31)	650	19.2 (2.44)	941	18.0 (1.97)
No	1,543	84.1 (3.31)	2,732	80.8 (2.44)	4,278	82.0 (1.97)
Had hypertension ⁶ in past 12 months						
Yes	207	11.3 (2.77)	524	15.5 (2.31)	732	14.0 (1.80)
No	1,627	88.7 (2.77)	2,857	84.5 (2.31)	4,487	86.0 (1.80)
Ever been diagnosed with high cholesterol						
Yes	178	9.7 (2.57) [‡]	566	16.7 (2.37)	745	14.3 (1.81)
No	1,656	90.3 (2.57) [‡]	2,815	83.3 (2.37)	4,475	85.7 (1.81)
Had high cholesterol in past 12 months						
Yes	56	3.0 (1.13) [‡]	347	10.3 (2.19)	404	7.7 (1.51)
No	1,778	97.0 (1.13) [‡]	3,034	89.7 (2.19)	4,815	92.3 (1.51)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision.

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within each health status at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Adults had to have been told on two or more different visits that they had hypertension or high blood pressure to be classified as hypertensive.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 6. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by health status and selected health conditions: United States, 2016

Health status and selected health conditions	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,834	35.1 (2.59)	3,382	64.9 (2.59)	5,219	100.0
Health status						
Excellent or very good	864	33.8 (3.24)	1,689	66.2 (3.24)	2,555	100.0
Good	734	43.6 (4.76)	948	56.4 (4.76)	1,682	100.0
Fair or poor	236	24.0 (5.15)	745	76.0 (5.15)	982	100.0
Health status compared to previous year						
Better	289	33.4 (5.27)	574	66.6 (5.27)	863	100.0
Same	1,379	37.9 (3.11)	2,250	62.1 (3.11)	3,631	100.0
Worse	*	*	**558	**77.1 (7.12)	725	100.0
Ever been diagnosed with cancer						
Yes	*	*	*	*	198	100.0
No	1,760	35.3 (2.67)	3,258	64.7 (2.67)	5,022	100.0
Ever been diagnosed with diabetes						
Yes	*	*	*	*	318	100.0
No	1,754	35.7 (2.63)	3,144	64.3 (2.63)	4,901	100.0
Ever been diagnosed with hypertension ⁶						
Yes	291	30.9 (5.78)	650	69.1 (5.78)	941	100.0
No	1,543	36.1 (2.84)	2,732	63.9 (2.84)	4,278	100.0
Had hypertension ⁶ in past 12 months						
Yes	207	28.3 (6.28)	524	71.7 (6.28)	732	100.0
No	1,627	36.3 (2.78)	2,857	63.7 (2.78)	4,487	100.0
Ever been diagnosed with high cholesterol						
Yes	178	23.9 (5.90)	566	76.1 (5.90)	745	100.0
No	1,656	37.0 (2.76)	2,815	63.0 (2.76)	4,475	100.0
Had high cholesterol in past 12 months						
Yes	*	*	**347	**86.3 (5.20)	404	100.0
No	1,778	36.7 (2.72)	3,034	63.3 (2.72)	4,815	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Adults had to have been told on two or more different visits that they had hypertension or high blood pressure to be classified as hypertensive.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 7. Type of health insurance coverage and any period without health insurance coverage for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Coverage status and period without health insurance	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Adults aged 19-64 years ⁴ with family incomes less than or equal to 138% FPL ⁵	14,641	100.0	9,996	100.0	24,637	100.0
Coverage status and type of health insurance ^{6†}						
Private ⁷	5,013	34.2 (1.30) [‡]	3,999	40.0 (1.55)	9,013	36.6 (0.98)
Medicaid ⁸	7,655	52.3 (1.29) [‡]	2,163	21.6 (1.12)	9,815	39.8 (0.95)
Uninsured ⁹	1,915	13.1 (0.78) [‡]	3,721	37.2 (1.47)	5,639	22.9 (0.80)
Any period without health insurance in the past 12 months ¹⁰						
Yes	3,061	20.9 (0.95) [‡]	4,601	46.0 (1.45)	7,663	31.1 (0.86)
No	11,579	79.1 (0.95) [‡]	5,395	54.0 (1.45)	16,974	68.9 (0.86)

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within each coverage characteristic at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes adults with health insurance coverage other than private, Medicaid, or uninsured.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁷Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care.

⁸Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Adults with more than one type of coverage were assigned the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁹An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

¹⁰Adults were classified as having a period without health insurance in the past 12 months if they were uninsured at the time of interview or were insured at the time of interview and had a period of uninsurance in the 12 months prior to interview.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table 8. State Medicaid expansion status for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by type of health insurance coverage and any period without health insurance coverage: United States, 2016

Coverage status and period without health insurance	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Adults aged 19-64 years ⁴ with family incomes less than or equal to 138% FPL ⁵	14,641	59.4 (1.15)	9,996	40.6 (1.15)	24,637	100.0
Coverage status and type of health insurance ⁶						
Private ⁷	5,013	55.6 (1.92)	3,999	44.4 (1.92)	9,013	100.0
Medicaid ⁸	7,655	77.9 (1.27)	2,163	22.1 (1.27)	9,815	100.0
Uninsured ⁹	1,915	33.9 (1.81)	3,721	66.1 (1.81)	5,639	100.0
Any period without health insurance in the past 12 months ¹⁰						
Yes	3,061	39.9 (1.65)	4,601	60.1 (1.65)	7,663	100.0
No	11,579	68.2 (1.28)	5,395	31.8 (1.28)	16,974	100.0

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes adults with health insurance coverage other than private, Medicaid, or uninsured.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁷Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care.

⁸Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Adults with more than one type of coverage were assigned the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁹An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

¹⁰Adults were classified as having a period without health insurance in the past 12 months if they were uninsured at the time of interview or were insured at the time of interview and had a period of uninsurance in the 12 months prior to interview.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 9. Selected measures of access to health care for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,834	100.0	3,382	100.0	5,219	100.0
Usual place of care ⁶						
Yes	831	45.3 (4.20)	1,557	46.0 (2.91)	2,390	45.8 (2.40)
No	1,002	54.7 (4.20)	1,825	54.0 (2.91)	2,829	54.2 (2.40)
Kind of place ^{7†}						
Clinic or health center	284	34.2 (5.86) [‡]	928	59.6 (4.32)	1,214	50.8 (3.75)
Doctor's office or HMO	433	52.1 (6.78) [‡]	458	29.4 (3.99)	891	37.3 (3.74)
Other place	*	*	171	11.0 (2.93)	285	11.9 (2.44)
Any unmet medical need ⁸						
Yes	909	49.6 (4.53) [‡]	2,121	62.7 (3.00)	3,033	58.1 (2.53)
No	925	50.4 (4.53) [‡]	1,260	37.3 (3.00)	2,187	41.9 (2.53)
Didn't get needed medical care due to cost, past 12 months						
Yes	498	27.2 (3.63) [‡]	1,262	37.3 (2.64)	1,762	33.8 (2.15)
No	1,335	72.8 (3.63) [‡]	2,120	62.7 (2.64)	3,458	66.2 (2.15)
Delayed care due to cost, past 12 months						
Yes	561	30.6 (4.28)	1,384	40.9 (3.09)	1,948	37.3 (2.54)
No	1,272	69.4 (4.28)	1,997	59.1 (3.09)	3,272	62.7 (2.54)
Needed but couldn't afford prescription medicine, past 12 months						
Yes	422	23.0 (3.85) [‡]	1,122	33.2 (3.11)	1,544	29.6 (2.44)
No	1,412	77.0 (3.85) [‡]	2,259	66.8 (3.11)	3,675	70.4 (2.44)
Needed but couldn't afford mental health care, past 12 months						
Yes	145	7.9 (2.31)	432	12.8 (2.74)	577	11.1 (1.96)
No	1,689	92.1 (2.31)	2,950	87.2 (2.74)	4,642	88.9 (1.96)
Needed but couldn't afford dental care, past 12 months						
Yes	566	30.8 (4.27)	1,304	38.6 (3.55)	1,870	35.8 (2.73)
No	1,268	69.2 (4.27)	2,078	61.4 (3.55)	3,349	64.2 (2.73)
Needed but couldn't afford eyeglasses, past 12 months						
Yes	370	20.2 (3.93)	712	21.1 (2.94)	1,083	20.7 (2.35)
No	1,464	79.8 (3.93)	2,669	78.9 (2.94)	4,136	79.3 (2.35)
Needed but couldn't afford to see a specialist, past 12 months						
Yes	308	16.8 (3.65)	732	21.6 (3.03)	1,040	19.9 (2.34)
No	1,526	83.2 (3.65)	2,650	78.4 (3.03)	4,179	80.1 (2.34)

See footnotes at end of table.

Table 9. Selected measures of access to health care for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Needed but couldn't afford follow up care, past 12 months						
Yes	281	15.3 (3.27)	602	17.8 (2.66)	883	16.9 (2.07)
No	1,553	84.7 (3.27)	2,780	82.2 (2.66)	4,336	83.1 (2.07)
Prescribed medication, past 12 months						
Yes	661	36.0 (4.62)	1,324	39.2 (3.10)	1,986	38.0 (2.57)
No	1,173	64.0 (4.62)	2,058	60.8 (3.10)	3,233	62.0 (2.57)
Skipped medication doses to save money, past 12 months ⁹						
Yes	217	11.8 (3.31)	468	13.8 (2.42)	685	13.1 (1.95)
No	1,617	88.2 (3.31)	2,914	86.2 (2.42)	4,534	86.9 (1.95)
Took less medicine to save money, past 12 months ⁹						
Yes	218	11.9 (3.31)	456	13.5 (2.48)	675	12.9 (1.98)
No	1,616	88.1 (3.31)	2,925	86.5 (2.48)	4,544	87.1 (1.98)
Delayed filling prescription to save money, past 12 months ⁹						
Yes	267	14.5 (3.61)	584	17.3 (2.52)	851	16.3 (2.07)
No	1,567	85.5 (3.61)	2,798	82.7 (2.52)	4,368	83.7 (2.07)
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	287	15.7 (3.67)	663	19.6 (2.45)	951	18.2 (2.04)
No	1,546	84.3 (3.67)	2,719	80.4 (2.45)	4,269	81.8 (2.04)
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	158	8.6 (2.28)	473	14.0 (2.46)	631	12.1 (1.81)
No	1,676	91.4 (2.28)	2,908	86.0 (2.46)	4,588	87.9 (1.81)
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	59	1.7 (0.68)	106	2.0 (0.61)
No	**1,787	**97.5 (1.21)	3,323	98.3 (0.68)	5,114	98.0 (0.61)
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	*	*	101	3.0 (0.80)	183	3.5 (0.81)
No	**1,752	**95.5 (1.77)	3,281	97.0 (0.80)	5,036	96.5 (0.81)
Delayed care because office wait time was too long, past 12 months						
Yes	*	*	260	7.7 (2.13)	379	7.3 (1.57)
No	**1,715	**93.5 (2.11)	3,121	92.3 (2.13)	4,840	92.7 (1.57)

See footnotes at end of table.

Table 9. Selected measures of access to health care for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	65	1.9 (0.63)	106	2.0 (0.64)
No	**1,793	**97.8 (1.39)	3,317	98.1 (0.63)	5,114	98.0 (0.64)
Delayed care because didn't have transportation, past 12 months						
Yes	19	1.0 (0.54) [†]	203	6.0 (1.58)	222	4.2 (1.07)
No	1,815	99.0 (0.54) [†]	3,179	94.0 (1.58)	4,998	95.8 (1.07)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision.

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within each measure of access to care at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammiti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 10. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,834	35.1 (2.59)	3,382	64.9 (2.59)	5,219	100.0
Usual place of care ⁶						
Yes	831	34.7 (3.76)	1,557	65.3 (3.76)	2,390	100.0
No	1,002	35.3 (3.25)	1,825	64.7 (3.25)	2,829	100.0
Kind of place ⁷						
Clinic or health center	284	23.4 (4.24)	928	76.6 (4.24)	1,214	100.0
Doctor's office or HMO	433	48.4 (6.53)	458	51.6 (6.53)	891	100.0
Other place	*	*	*	*	285	100.0
Any unmet medical need ⁸						
Yes	909	30.0 (3.39)	2,121	70.0 (3.39)	3,033	100.0
No	925	42.3 (3.85)	1,260	57.7 (3.85)	2,187	100.0
Didn't get needed medical care due to cost, past 12 months						
Yes	498	28.3 (3.92)	1,262	71.7 (3.92)	1,762	100.0
No	1,335	38.6 (3.04)	2,120	61.4 (3.04)	3,458	100.0
Delayed care due to cost, past 12 months						
Yes	561	28.8 (4.30)	1,384	71.2 (4.30)	1,948	100.0
No	1,272	38.8 (3.03)	1,997	61.2 (3.03)	3,272	100.0
Needed but couldn't afford prescription medicine, past 12 months						
Yes	422	27.5 (4.69)	1,122	72.5 (4.69)	1,544	100.0
No	1,412	38.7 (2.99)	2,259	61.3 (2.99)	3,675	100.0
Needed but couldn't afford mental health care, past 12 months						
Yes	*	*	*	*	577	100.0
No	1,689	36.6 (2.74)	2,950	63.4 (2.74)	4,642	100.0
Needed but couldn't afford dental care, past 12 months						
Yes	566	30.4 (4.33)	1,304	69.6 (4.33)	1,870	100.0
No	1,268	38.1 (3.34)	2,078	61.9 (3.34)	3,349	100.0
Needed but couldn't afford eyeglasses, past 12 months						
Yes	370	34.3 (6.17)	712	65.7 (6.17)	1,083	100.0
No	1,464	35.6 (2.88)	2,669	64.4 (2.88)	4,136	100.0
Needed but couldn't afford to see a specialist, past 12 months						
Yes	308	29.7 (6.20)	732	70.3 (6.20)	1,040	100.0
No	1,526	36.7 (2.85)	2,650	63.3 (2.85)	4,179	100.0

See footnotes at end of table.

Table 10. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Needed but couldn't afford follow up care, past 12 months						
Yes	281	32.0 (6.34)	602	68.0 (6.34)	883	100.0
No	1,553	36.0 (2.82)	2,780	64.0 (2.82)	4,336	100.0
Prescribed medication, past 12 months						
Yes	661	33.5 (4.24)	1,324	66.5 (4.24)	1,986	100.0
No	1,173	36.5 (3.36)	2,058	63.5 (3.36)	3,233	100.0
Skipped medication doses to save money, past 12 months ⁹						
Yes	*	*	*	*	685	100.0
No	1,617	35.9 (2.80)	2,914	64.1 (2.80)	4,534	100.0
Took less medicine to save money, past 12 months ⁹						
Yes	*	*	*	*	675	100.0
No	1,616	35.8 (2.79)	2,925	64.2 (2.79)	4,544	100.0
Delayed filling prescription to save money, past 12 months ⁹						
Yes	267	31.6 (7.03)	584	68.4 (7.03)	851	100.0
No	1,567	36.1 (2.73)	2,798	63.9 (2.73)	4,368	100.0
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	287	30.4 (6.42)	663	69.6 (6.42)	951	100.0
No	1,546	36.5 (2.78)	2,719	63.5 (2.78)	4,269	100.0
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	158	25.2 (6.32)	473	74.8 (6.32)	631	100.0
No	1,676	36.7 (2.78)	2,908	63.3 (2.78)	4,588	100.0
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	*	*	106	100.0
No	1,787	35.2 (2.63)	3,323	64.8 (2.63)	5,114	100.0
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	*	*	*	*	183	100.0
No	1,752	35.0 (2.67)	3,281	65.0 (2.67)	5,036	100.0
Delayed care because office wait time was too long, past 12 months						
Yes	*	*	*	*	379	100.0
No	1,715	35.6 (2.76)	3,121	64.4 (2.76)	4,840	100.0

See footnotes at end of table.

Table 10. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	*	*	106	100.0
No	1,793	35.3 (2.66)	3,317	64.7 (2.66)	5,114	100.0
Delayed care because didn't have transportation, past 12 months						
Yes	*	*	*	*	222	100.0
No	1,815	36.5 (2.63)	3,179	63.5 (2.63)	4,998	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammiti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 11. Selected measures of access to health care for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,671	100.0	2,160	100.0	9,826	100.0
Usual place of care ⁶						
Yes	6,709	87.5 (1.54)	1,798	83.2 (3.38)	8,501	86.5 (1.42)
No	962	12.5 (1.54)	362	16.8 (3.38)	1,324	13.5 (1.42)
Kind of place ^{7†}						
Clinic or health center	2,040	30.4 (2.16)*	741	41.2 (4.05)	2,781	32.7 (1.91)
Doctor's office or HMO	4,399	65.6 (2.26)	1,045	58.2 (4.05)	5,441	64.0 (1.97)
Other place	269	4.0 (1.08)*	11	0.6 (0.50)	280	3.3 (0.86)
Any unmet medical need ⁸						
Yes	2,031	26.5 (1.85)	742	34.4 (3.75)	2,772	28.2 (1.67)
No	5,640	73.5 (1.85)	1,418	65.6 (3.75)	7,054	71.8 (1.67)
Didn't get needed medical care due to cost, past 12 months						
Yes	590	7.7 (1.21)	259	12.0 (2.30)	848	8.6 (1.08)
No	7,082	92.3 (1.21)	1,901	88.0 (2.30)	8,978	91.4 (1.08)
Delayed care due to cost, past 12 months						
Yes	551	7.2 (1.20)	253	11.7 (2.28)	804	8.2 (1.06)
No	7,120	92.8 (1.20)	1,906	88.3 (2.28)	9,021	91.8 (1.06)
Needed but couldn't afford prescription medicine, past 12 months						
Yes	672	8.8 (1.14)	286	13.2 (2.07)	958	9.8 (1.00)
No	6,999	91.2 (1.14)	1,874	86.8 (2.07)	8,868	90.2 (1.00)
Needed but couldn't afford mental health care, past 12 months						
Yes	310	4.0 (0.75)	65	3.0 (0.98)	374	3.8 (0.62)
No	7,361	96.0 (0.75)	2,095	97.0 (0.98)	9,451	96.2 (0.62)
Needed but couldn't afford dental care, past 12 months						
Yes	1,111	14.5 (1.41)	427	19.8 (3.03)	1,538	15.7 (1.29)
No	6,560	85.5 (1.41)	1,733	80.2 (3.03)	8,288	84.3 (1.29)
Needed but couldn't afford eyeglasses, past 12 months						
Yes	781	10.2 (1.18)	337	15.6 (2.85)	1,118	11.4 (1.12)
No	6,890	89.8 (1.18)	1,823	84.4 (2.85)	8,708	88.6 (1.12)
Needed but couldn't afford to see a specialist, past 12 months						
Yes	438	5.7 (1.19)	140	6.5 (1.87)	578	5.9 (1.02)
No	7,233	94.3 (1.19)	2,020	93.5 (1.87)	9,248	94.1 (1.02)

See footnotes at end of table.

Table 11. Selected measures of access to health care for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Needed but couldn't afford follow up care, past 12 months						
Yes	238	3.1 (0.77)	53	2.4 (1.04)	290	3.0 (0.64)
No	7,434	96.9 (0.77)	2,107	97.6 (1.04)	9,536	97.0 (0.64)
Prescribed medication, past 12 months						
Yes	4,907	64.0 (2.32)	1,435	66.5 (3.58)	6,340	64.5 (1.99)
No	2,764	36.0 (2.32)	725	33.5 (3.58)	3,486	35.5 (1.99)
Skipped medication doses to save money, past 12 months ⁹						
Yes	350	4.6 (0.84)	*	*	491	5.0 (0.81)
No	7,321	95.4 (0.84)	**2,019	**93.5 (2.17)	9,335	95.0 (0.81)
Took less medicine to save money, past 12 months ⁹						
Yes	362	4.7 (0.86)	162	7.5 (2.22)	524	5.3 (0.84)
No	7,309	95.3 (0.86)	1,997	92.5 (2.22)	9,302	94.7 (0.84)
Delayed filling prescription to save money, past 12 months ⁹						
Yes	481	6.3 (1.17)	202	9.3 (2.61)	683	7.0 (1.08)
No	7,190	93.7 (1.17)	1,958	90.7 (2.61)	9,143	93.0 (1.08)
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	758	9.9 (1.24)	211	9.8 (1.68)	969	9.9 (1.04)
No	6,913	90.1 (1.24)	1,949	90.2 (1.68)	8,857	90.1 (1.04)
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	1,346	17.6 (1.83)	422	19.5 (3.04)	1,767	18.0 (1.58)
No	6,325	82.4 (1.83)	1,738	80.5 (3.04)	8,058	82.0 (1.58)
Delayed care because unable to get through on phone, past 12 months						
Yes	314	4.1 (0.73)	*	*	410	4.2 (0.66)
No	7,357	95.9 (0.73)	**2,064	**95.6 (1.55)	9,416	95.8 (0.66)
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	703	9.2 (1.37)	182	8.4 (2.02)	884	9.0 (1.16)
No	6,968	90.8 (1.37)	1,978	91.6 (2.02)	8,941	91.0 (1.16)
Delayed care because office wait time was too long, past 12 months						
Yes	610	7.9 (1.27)	133	6.1 (1.42)	742	7.5 (1.04)
No	7,061	92.1 (1.27)	2,027	93.9 (1.42)	9,084	92.5 (1.04)

See footnotes at end of table.

Table 11. Selected measures of access to health care for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Delayed care because office wasn't open when could go, past 12 months						
Yes	192	2.5 (0.57)	65	3.0 (1.08)	257	2.6 (0.51)
No	7,479	97.5 (0.57)	2,095	97.0 (1.08)	9,569	97.4 (0.51)
Delayed care because didn't have transportation, past 12 months						
Yes	472	6.2 (1.10)	214	9.9 (2.39)	686	7.0 (1.01)
No	7,199	93.8 (1.10)	1,946	90.1 (2.39)	9,139	93.0 (1.01)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision.

[†]Chi-square test significant at $p < 0.05$.

[‡]Significantly different from nonexpansion states within "kind of place" at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 12. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,671	78.0 (1.56)	2,160	22.0 (1.56)	9,826	100.0
Usual place of care ⁶						
Yes	6,709	78.7 (1.67)	1,798	21.3 (1.67)	8,501	100.0
No	962	72.5 (5.10)	362	27.5 (5.10)	1,324	100.0
Kind of place ⁷						
Clinic or health center	2,040	73.2 (2.93)	741	26.8 (2.93)	2,781	100.0
Doctor's office or HMO	4,399	80.7 (2.07)	1,045	19.3 (2.07)	5,441	100.0
Other place	**269	**95.9 (3.28)	*	*	280	100.0
Any unmet medical need ⁸						
Yes	2,031	73.1 (3.07)	742	26.9 (3.07)	2,772	100.0
No	5,640	79.8 (1.79)	1,418	20.2 (1.79)	7,054	100.0
Didn't get needed medical care due to cost, past 12 months						
Yes	590	69.4 (5.66)	259	30.6 (5.66)	848	100.0
No	7,082	78.8 (1.58)	1,901	21.2 (1.58)	8,978	100.0
Delayed care due to cost, past 12 months						
Yes	551	68.4 (5.76)	253	31.6 (5.76)	804	100.0
No	7,120	78.8 (1.62)	1,906	21.2 (1.62)	9,021	100.0
Needed but couldn't afford prescription medicine, past 12 months						
Yes	672	70.0 (4.67)	286	30.0 (4.67)	958	100.0
No	6,999	78.8 (1.59)	1,874	21.2 (1.59)	8,868	100.0
Needed but couldn't afford mental health care, past 12 months						
Yes	**310	**82.6 (5.43)	*	*	374	100.0
No	7,361	77.7 (1.61)	2,095	22.3 (1.61)	9,451	100.0
Needed but couldn't afford dental care, past 12 months						
Yes	1,111	72.1 (4.10)	427	27.9 (4.10)	1,538	100.0
No	6,560	79.0 (1.64)	1,733	21.0 (1.64)	8,288	100.0
Needed but couldn't afford eyeglasses, past 12 months						
Yes	781	69.7 (5.01)	337	30.3 (5.01)	1,118	100.0
No	6,890	79.0 (1.60)	1,823	21.0 (1.60)	8,708	100.0
Needed but couldn't afford to see a specialist, past 12 months						
Yes	438	75.7 (6.88)	140	24.3 (6.88)	578	100.0
No	7,233	78.0 (1.58)	2,020	22.0 (1.58)	9,248	100.0

See footnotes at end of table.

Table 12. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Needed but couldn't afford follow up care, past 12 months						
Yes	*	*	*	*	290	100.0
No	7,434	77.8 (1.60)	2,107	22.2 (1.60)	9,536	100.0
Prescribed medication, past 12 months						
Yes	4,907	77.2 (1.99)	1,435	22.8 (1.99)	6,340	100.0
No	2,764	79.1 (2.51)	725	20.9 (2.51)	3,486	100.0
Skipped medication doses to save money, past 12 months ⁹						
Yes	*	*	*	*	491	100.0
No	7,321	78.2 (1.59)	2,019	21.8 (1.59)	9,335	100.0
Took less medicine to save money, past 12 months ⁹						
Yes	*	*	*	*	524	100.0
No	7,309	78.4 (1.57)	1,997	21.6 (1.57)	9,302	100.0
Delayed filling prescription to save money, past 12 months ⁹						
Yes	*	*	*	*	683	100.0
No	7,190	78.5 (1.59)	1,958	21.5 (1.59)	9,143	100.0
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	758	78.1 (3.70)	211	21.9 (3.70)	969	100.0
No	6,913	77.9 (1.69)	1,949	22.1 (1.69)	8,857	100.0
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	1,346	76.0 (3.88)	422	24.0 (3.88)	1,767	100.0
No	6,325	78.3 (1.67)	1,738	21.7 (1.67)	8,058	100.0
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	*	*	410	100.0
No	7,357	78.0 (1.58)	2,064	22.0 (1.58)	9,416	100.0
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	703	79.4 (4.99)	182	20.6 (4.99)	884	100.0
No	6,968	77.8 (1.60)	1,978	22.2 (1.60)	8,941	100.0
Delayed care because office wait time was too long, past 12 months						
Yes	610	82.0 (4.35)	133	18.0 (4.35)	742	100.0
No	7,061	77.6 (1.63)	2,027	22.4 (1.63)	9,084	100.0

See footnotes at end of table.

Table 12. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	*	*	257	100.0
No	7,479	78.0 (1.60)	2,095	22.0 (1.60)	9,569	100.0
Delayed care because didn't have transportation, past 12 months						
Yes	472	68.6 (6.72)	214	31.4 (6.72)	686	100.0
No	7,199	78.6 (1.62)	1,946	21.4 (1.62)	9,139	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 13. Selected measures of access to health care for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Privately insured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	5,408	100.0	4,085	100.0	9,495	100.0
Usual place of care ⁶						
Yes	4,626	85.5 (1.69) [†]	3,196	78.2 (2.16)	7,819	82.3 (1.37)
No	782	14.5 (1.69) [†]	889	21.8 (2.16)	1,676	17.7 (1.37)
Kind of place ⁷						
Clinic or health center	1,408	30.4 (2.55)	1,130	35.4 (2.81)	2,539	32.5 (1.91)
Doctor's office or HMO	3,060	66.1 (2.70)	1,951	61.1 (2.96)	5,007	64.0 (2.02)
Other place	*	*	114	3.6 (0.98)	273	3.5 (0.84)
Any unmet medical need ⁸						
Yes	987	18.2 (1.85) [†]	1,002	24.5 (2.11)	1,993	21.0 (1.40)
No	4,422	81.8 (1.85) [†]	3,083	75.5 (2.11)	7,502	79.0 (1.40)
Didn't get needed medical care due to cost, past 12 months						
Yes	309	5.7 (1.01) [†]	397	9.7 (1.33)	707	7.4 (0.82)
No	5,099	94.3 (1.01) [†]	3,688	90.3 (1.33)	8,787	92.6 (0.82)
Delayed care due to cost, past 12 months						
Yes	469	8.7 (1.21)	427	10.5 (1.38)	896	9.4 (0.91)
No	4,939	91.3 (1.21)	3,658	89.5 (1.38)	8,598	90.6 (0.91)
Needed but couldn't afford prescription medicine, past 12 months						
Yes	340	6.3 (1.18)	341	8.3 (1.34)	682	7.2 (0.91)
No	5,068	93.7 (1.18)	3,745	91.7 (1.34)	8,812	92.8 (0.91)
Needed but couldn't afford mental health care, past 12 months						
Yes	59	1.1 (0.33)	64	1.6 (0.44)	123	1.3 (0.27)
No	5,350	98.9 (0.33)	4,021	98.4 (0.44)	9,372	98.7 (0.27)
Needed but couldn't afford dental care, past 12 months						
Yes	565	10.4 (1.46)	426	10.4 (1.49)	990	10.4 (1.03)
No	4,844	89.6 (1.46)	3,660	89.6 (1.49)	8,504	89.6 (1.03)
Needed but couldn't afford eyeglasses, past 12 months						
Yes	274	5.1 (0.98)	335	8.2 (1.52)	611	6.4 (0.85)
No	5,134	94.9 (0.98)	3,751	91.8 (1.52)	8,884	93.6 (0.85)
Needed but couldn't afford to see a specialist, past 12 months						
Yes	166	3.1 (0.71)	211	5.2 (1.25)	378	4.0 (0.70)
No	5,242	96.9 (0.71)	3,874	94.8 (1.25)	9,116	96.0 (0.70)

See footnotes at end of table.

Table 13. Selected measures of access to health care for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Needed but couldn't afford follow up care, past 12 months						
Yes	170	3.1 (0.76)	164	4.0 (0.98)	334	3.5 (0.61)
No	5,239	96.9 (0.76)	3,921	96.0 (0.98)	9,160	96.5 (0.61)
Prescribed medication, past 12 months						
Yes	3,051	56.4 (2.48)	2,265	55.4 (2.71)	5,316	56.0 (1.80)
No	2,357	43.6 (2.48)	1,820	44.6 (2.71)	4,178	44.0 (1.80)
Skipped medication doses to save money, past 12 months ⁹						
Yes	192	3.5 (0.86)	188	4.6 (1.03)	381	4.0 (0.66)
No	5,216	96.5 (0.86)	3,897	95.4 (1.03)	9,114	96.0 (0.66)
Took less medicine to save money, past 12 months ⁹						
Yes	219	4.1 (0.96)	181	4.4 (0.88)	400	4.2 (0.66)
No	5,189	95.9 (0.96)	3,904	95.6 (0.88)	9,094	95.8 (0.66)
Delayed filling prescription to save money, past 12 months ⁹						
Yes	248	4.6 (0.95) [‡]	358	8.8 (1.37)	608	6.4 (0.81)
No	5,160	95.4 (0.95) [‡]	3,728	91.2 (1.37)	8,886	93.6 (0.81)
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	507	9.4 (1.44)	492	12.1 (1.69)	1,001	10.5 (1.12)
No	4,901	90.6 (1.44)	3,593	87.9 (1.69)	8,493	89.5 (1.12)
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	769	14.2 (1.61)	525	12.9 (2.16)	1,294	13.6 (1.32)
No	4,639	85.8 (1.61)	3,560	87.1 (2.16)	8,201	86.4 (1.32)
Delayed care because unable to get through on phone, past 12 months						
Yes	169	3.1 (0.75)	88	2.2 (0.71)	257	2.7 (0.53)
No	5,239	96.9 (0.75)	3,997	97.8 (0.71)	9,238	97.3 (0.53)
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	408	7.5 (1.15)	311	7.6 (1.74)	719	7.6 (1.01)
No	5,000	92.5 (1.15)	3,774	92.4 (1.74)	8,776	92.4 (1.01)
Delayed care because office wait time was too long, past 12 months						
Yes	220	4.1 (0.93)	*	*	448	4.7 (0.96)
No	5,188	95.9 (0.93)	**3,858	**94.4 (1.82)	9,046	95.3 (0.96)

See footnotes at end of table.

Table 13. Selected measures of access to health care for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Delayed care because office wasn't open when could go, past 12 months						
Yes	260	4.8 (0.92)	100	2.4 (0.85)	359	3.8 (0.67)
No	5,148	95.2 (0.92)	3,985	97.6 (0.85)	9,136	96.2 (0.67)
Delayed care because didn't have transportation, past 12 months						
Yes	150	2.8 (0.85)	73	1.8 (0.71)	222	2.3 (0.57)
No	5,259	97.2 (0.85)	4,013	98.2 (0.71)	9,273	97.7 (0.57)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision

³Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 14. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	5,408	56.9 (2.25)	4,085	43.1 (2.25)	9,495	100.0
Usual place of care ⁶						
Yes	4,626	58.6 (2.35)	3,196	41.4 (2.35)	7,819	100.0
No	782	46.2 (4.26)	889	53.8 (4.26)	1,676	100.0
Kind of place ⁷						
Clinic or health center	1,408	54.9 (3.83)	1,130	45.1 (3.83)	2,539	100.0
Doctor's office or HMO	3,060	60.5 (2.65)	1,951	39.5 (2.65)	5,007	100.0
Other place	*	*	*	*	273	100.0
Any unmet medical need ⁸						
Yes	987	49.0 (3.72)	1,002	51.0 (3.72)	1,993	100.0
No	4,422	58.3 (2.47)	3,083	41.7 (2.47)	7,502	100.0
Didn't get needed medical care due to cost, past 12 months						
Yes	309	43.6 (5.63)	397	56.4 (5.63)	707	100.0
No	5,099	57.9 (2.33)	3,688	42.1 (2.33)	8,787	100.0
Delayed care due to cost, past 12 months						
Yes	469	52.2 (5.07)	427	47.8 (5.07)	896	100.0
No	4,939	57.4 (2.35)	3,658	42.6 (2.35)	8,598	100.0
Needed but couldn't afford prescription medicine, past 12 months						
Yes	340	49.3 (6.09)	341	50.7 (6.09)	682	100.0
No	5,068	56.9 (2.31)	3,745	43.1 (2.31)	8,812	100.0
Needed but couldn't afford mental health care, past 12 months						
Yes	*	*	*	*	123	100.0
No	5,350	56.5 (2.23)	4,021	43.5 (2.23)	9,372	100.0
Needed but couldn't afford dental care, past 12 months						
Yes	565	56.4 (5.29)	426	43.6 (5.29)	990	100.0
No	4,844	56.3 (2.34)	3,660	43.7 (2.34)	8,504	100.0
Needed but couldn't afford eyeglasses, past 12 months						
Yes	274	44.4 (6.91)	335	55.6 (6.91)	611	100.0
No	5,134	57.1 (2.29)	3,751	42.9 (2.29)	8,884	100.0
Needed but couldn't afford to see a specialist, past 12 months						
Yes	*	*	*	*	378	100.0
No	5,242	56.8 (2.27)	3,874	43.2 (2.27)	9,116	100.0

See footnotes at end of table.

Table 14. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Needed but couldn't afford follow up care, past 12 months						
Yes	*	*	*	*	334	100.0
No	5,239	56.5 (2.27)	3,921	43.5 (2.27)	9,160	100.0
Prescribed medication, past 12 months						
Yes	3,051	56.8 (2.67)	2,265	43.2 (2.67)	5,316	100.0
No	2,357	55.8 (3.14)	1,820	44.2 (3.14)	4,178	100.0
Skipped medication doses to save money, past 12 months ⁹						
Yes	*	*	*	*	381	100.0
No	5,216	56.6 (2.28)	3,897	43.4 (2.28)	9,114	100.0
Took less medicine to save money, past 12 months ⁹						
Yes	*	*	*	*	400	100.0
No	5,189	56.5 (2.30)	3,904	43.5 (2.30)	9,094	100.0
Delayed filling prescription to save money, past 12 months ⁹						
Yes	248	40.4 (6.29)	358	59.6 (6.29)	608	100.0
No	5,160	57.4 (2.30)	3,728	42.6 (2.30)	8,886	100.0
Asked for lower cost medication to save money, past 12 months ⁹						
Yes	507	50.1 (5.27)	492	49.9 (5.27)	1,001	100.0
No	4,901	57.1 (2.37)	3,593	42.9 (2.37)	8,493	100.0
Any nonfinancial barrier to care in the past 12 months ¹⁰						
Yes	769	58.7 (5.36)	525	41.3 (5.36)	1,294	100.0
No	4,639	55.9 (2.33)	3,560	44.1 (2.33)	8,201	100.0
Delayed care because unable to get through on phone, past 12 months						
Yes	*	*	*	*	257	100.0
No	5,239	56.0 (2.23)	3,997	44.0 (2.23)	9,238	100.0
Delayed care because unable to get appointment soon enough, past 12 months						
Yes	408	56.0 (7.03)	311	44.0 (7.03)	719	100.0
No	5,000	56.3 (2.27)	3,774	43.7 (2.27)	8,776	100.0
Delayed care because office wait time was too long, past 12 months						
Yes	*	*	*	*	448	100.0
No	5,188	56.6 (2.24)	3,858	43.4 (2.24)	9,046	100.0

See footnotes at end of table.

Table 14. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of access to health care: United States, 2016—continued

Access to health care	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Delayed care because office wasn't open when could go, past 12 months						
Yes	*	*	*	*	359	100.0
No	5,148	55.6 (2.22)	3,985	44.4 (2.22)	9,136	100.0
Delayed care because didn't have transportation, past 12 months						
Yes	*	*	*	*	222	100.0
No	5,259	56.0 (2.23)	4,013	44.0 (2.23)	9,273	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Based on a question that asked respondents, "Is there a place that you usually go to when you are sick or need advice about your health?" Adults who report the emergency department as their usual place of care are defined as having no usual place of care.

⁷Only among adults who have a usual place of care.

⁸Adults were classified as having "Any unmet need" if they reported "yes" to any of the following questions: "During the past 12 months was there any time when [you/someone in the family] needed medical care, but did not get it because [you/the family] could not afford it?" "During the past 12 months, [have/has] [you/anyone in the family] delayed seeking medical care because of worry about the cost." "During the past 12 months, was there any time when [you needed any of the following, but didn't get it because you couldn't afford it: prescription medicines, mental health care or counseling, or dental care?"

⁹Adults who were not prescribed medication in the past 12 months were considered to be a "no" response for this measure.

¹⁰Adults were classified as having "Any nonfinancial barrier to care" if they reported "yes" to any of the following for delaying care in the past 12 months: couldn't get through on the telephone; couldn't get an appointment soon enough; once you get there, wait too long to see the doctor; the clinic/doctor's office wasn't open when you could get there; didn't have transportation.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

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Table 15. Selected measures of health care service use for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,834	100.0	3,382	100.0	5,219	100.0
Seen or talked to any health care professional, past 12 months						
Yes	844	46.0 (4.69)	1,822	53.9 (2.95)	2,667	51.1 (2.54)
No	989	54.0 (4.69)	1,560	46.1 (2.95)	2,552	48.9 (2.54)
Seen or talked to general doctor, past 12 months						
Yes	643	35.0 (4.46)	1,114	33.0 (3.11)	1,758	33.7 (2.56)
No	1,191	65.0 (4.46)	2,267	67.0 (3.11)	3,461	66.3 (2.56)
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	238	13.0 (3.32)	366	10.8 (1.97)	605	11.6 (1.74)
No	1,595	87.0 (3.32)	3,016	89.2 (1.97)	4,614	88.4 (1.74)
Seen or talked to medical specialist, past 12 months						
Yes	*	*	207	6.1 (1.28)	302	5.8 (1.05)
No	**1,739	**94.8 (1.82)	3,175	93.9 (1.28)	4,917	94.2 (1.05)
Blood cholesterol check, past 12 months						
Yes	427	23.3 (4.09)	933	27.6 (2.84)	1,363	26.1 (2.33)
No	1,407	76.7 (4.09)	2,449	72.4 (2.84)	3,856	73.9 (2.33)
Blood pressure check, past 12 months						
Yes	939	51.2 (4.23)	1,828	54.1 (3.25)	2,769	53.1 (2.57)
No	894	48.8 (4.23)	1,554	45.9 (3.25)	2,450	46.9 (2.57)
Blood sugar check, past 12 months						
Yes	280	15.3 (3.52)	806	23.8 (3.00)	1,085	20.8 (2.31)
No	1,554	84.7 (3.52)	2,576	76.2 (3.00)	4,134	79.2 (2.31)
Received flu vaccine, past 12 months ⁶						
Yes	216	11.8 (2.74)	474	14.0 (1.96)	689	13.2 (1.59)
No	1,618	88.2 (2.74)	2,908	86.0 (1.96)	4,530	86.8 (1.59)
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	*	*
No	*	*	**849	**95.4 (2.00)	**1,337	**95.6 (1.88)
Mammogram, past 12 months ⁸						
Yes	*	*	97	21.2 (6.12)	143	20.9 (5.16)
No	*	*	360	78.8 (6.12)	540	79.1 (5.16)
Hospitalized overnight, past 12 months						
Yes	*	*	246	7.3 (1.41)	304	5.8 (1.05)
No	**1,776	**96.9 (1.46)	3,135	92.7 (1.41)	4,915	94.2 (1.05)

See footnotes at end of table.

Table 15. Selected measures of health care service use for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Visited Emergency Department, past 12 months						
Yes	384	20.9 (3.65)	953	28.2 (2.98)	1,337	25.6 (2.33)
No	1,450	79.1 (3.65)	2,429	71.8 (2.98)	3,883	74.4 (2.33)
Number of Emergency Department visits, past 12 months						
0	1,450	79.1 (3.65)	2,429	71.8 (2.98)	3,883	74.4 (2.33)
1	215	11.7 (2.61)	472	13.9 (1.89)	687	13.2 (1.54)
2 or more	168	9.2 (2.75)	481	14.2 (2.57)	649	12.4 (1.93)
Visited Emergency Department because no other place to go ⁹						
Yes	*	*	551	57.8 (5.94)	768	57.5 (4.99)
No	*	*	402	42.2 (5.94)	568	42.5 (4.99)
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	*	*	194	20.4 (3.92)	310	23.2 (3.71)
No	*	*	759	79.6 (3.92)	1,027	76.8 (3.71)
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	*	*	447	46.9 (6.13)	612	45.8 (5.04)
No	*	*	506	53.1 (6.13)	725	54.2 (5.04)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

ACKNOWLEDGMENTS: This table is a product of the Division of Health Interview Statistics. This table was produced by Robin A. Cohen and Emily P. Zammitti of the National Center for Health Statistics, Division of Health Interview Statistics.

Suggested citation

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Table 16. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2016

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Uninsured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	1,834	35.1 (2.59)	3,382	64.9 (2.59)	5,219	100.0
Seen or talked to any health care professional, past 12 months						
Yes	844	31.9 (3.55)	1,822	68.1 (3.55)	2,667	100.0
No	989	39.0 (3.73)	1,560	61.0 (3.73)	2,552	100.0
Seen or talked to general doctor, past 12 months						
Yes	643	36.7 (4.69)	1,114	63.3 (4.69)	1,758	100.0
No	1,191	34.6 (3.09)	2,267	65.4 (3.09)	3,461	100.0
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	*	*	*	*	605	100.0
No	1,595	34.8 (2.69)	3,016	65.2 (2.69)	4,614	100.0
Seen or talked to medical specialist, past 12 months						
Yes	*	*	*	*	302	100.0
No	1,739	35.5 (2.71)	3,175	64.5 (2.71)	4,917	100.0
Blood cholesterol check, past 12 months						
Yes	427	30.1 (5.16)	933	69.9 (5.16)	1,363	100.0
No	1,407	35.2 (2.82)	2,449	64.8 (2.82)	3,856	100.0
Blood pressure check, past 12 months						
Yes	939	34.1 (3.49)	1,828	65.9 (3.49)	2,769	100.0
No	894	36.7 (3.70)	1,554	63.3 (3.70)	2,450	100.0
Blood sugar check, past 12 months						
Yes	280	26.2 (5.75)	806	73.8 (5.75)	1,085	100.0
No	1,554	38.1 (2.90)	2,576	61.9 (2.90)	4,134	100.0
Received flu vaccine, past 12 months ⁶						
Yes	216	31.9 (6.38)	474	68.1 (6.38)	689	100.0
No	1,618	36.4 (2.81)	2,908	63.6 (2.81)	4,530	100.0
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	62	100.0
No	491	37.3 (4.78)	849	62.7 (4.78)	1,337	100.0
Mammogram, past 12 months ⁸						
Yes	*	*	*	*	143	100.0
No	*	*	*	*	540	100.0
Hospitalized overnight, past 12 months						
Yes	*	*	*	*	304	100.0
No	1,776	36.1 (2.72)	3,135	63.9 (2.72)	4,915	100.0

See footnotes at end of table.

Table 16. State Medicaid expansion status for adults aged 19-64 who were uninsured at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2016—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Visited Emergency Department, past 12 months						
Yes	384	28.9 (4.55)	953	71.1 (4.55)	1,337	100.0
No	1,450	37.6 (3.21)	2,429	62.4 (3.21)	3,883	100.0
Number of Emergency Department visits, past 12 months						
0	1,450	37.6 (3.21)	2,429	62.4 (3.21)	3,883	100.0
1	215	31.5 (5.85)	472	68.5 (5.85)	687	100.0
2 or more	168	26.0 (7.00)	481	74.0 (7.00)	649	100.0
Visited Emergency Department because no other place to go ⁹						
Yes	218	28.5 (5.67)	551	71.5 (5.67)	768	100.0
No	*	*	*	*	568	100.0
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	*	*	*	*	310	100.0
No	269	26.6 (5.30)	759	73.4 (5.30)	1,027	100.0
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	165	27.1 (6.33)	447	72.9 (6.33)	612	100.0
No	219	30.4 (6.24)	506	69.6 (6.24)	725	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WV.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴An adult was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. An adult was also defined as uninsured if he or she had only a private plan that paid for one type of service, such as accidents or dental care.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 17. Selected measures of health care service use for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,671	100.0	2,160	100.0	9,826	100.0
Seen or talked to any health care professional, past 12 months						
Yes	6,438	83.9 (1.90) [‡]	1,961	90.8 (1.78)	8,395	85.4 (1.53)
No	1,233	16.1 (1.90) [‡]	199	9.2 (1.78)	1,430	14.6 (1.53)
Seen or talked to general doctor, past 12 months						
Yes	5,287	68.9 (2.27)	1,343	62.2 (4.07)	6,625	67.4 (1.99)
No	2,384	31.1 (2.27)	817	37.8 (4.07)	3,201	32.6 (1.99)
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	1,798	23.4 (1.90)	550	25.5 (3.19)	2,347	23.9 (1.64)
No	5,873	76.6 (1.90)	1,610	74.5 (3.19)	7,479	76.1 (1.64)
Seen or talked to medical specialist, past 12 months						
Yes	1,509	19.7 (1.58)	521	24.1 (3.15)	2,030	20.7 (1.42)
No	6,162	80.3 (1.58)	1,639	75.9 (3.15)	7,796	79.3 (1.42)
Blood cholesterol check, past 12 months						
Yes	4,298	56.0 (2.44)	1,327	61.4 (4.07)	5,623	57.2 (2.08)
No	3,373	44.0 (2.44)	833	38.6 (4.07)	4,203	42.8 (2.08)
Blood pressure check, past 12 months						
Yes	6,288	82.0 (2.01)	1,897	87.8 (2.25)	8,182	83.3 (1.66)
No	1,383	18.0 (2.01)	263	12.2 (2.25)	1,644	16.7 (1.66)
Blood sugar check, past 12 months						
Yes	3,004	39.2 (2.22) [‡]	1,138	52.7 (4.04)	4,138	42.1 (1.97)
No	4,667	60.8 (2.22) [‡]	1,022	47.3 (4.04)	5,688	57.9 (1.97)
Received flu vaccine, past 12 months ⁶						
Yes	2,571	33.5 (2.19)	762	35.3 (3.93)	3,332	33.9 (1.91)
No	5,100	66.5 (2.19)	1,398	64.7 (3.93)	6,494	66.1 (1.91)
Colon cancer test, past 12 months ⁷						
Yes	399	24.3 (4.09)	*	*	533	26.6 (3.65)
No	1,239	75.7 (4.09)	*	*	1,468	73.4 (3.65)
Mammogram, past 12 months ⁸						
Yes	375	45.5 (5.43)	*	*	489	48.2 (4.84)
No	450	54.5 (5.43)	*	*	525	51.8 (4.84)
Hospitalized overnight, past 12 months						
Yes	890	11.6 (1.36)	362	16.8 (2.58)	1,252	12.7 (1.21)
No	6,781	88.4 (1.36)	1,798	83.2 (2.58)	8,574	87.3 (1.21)

See footnotes at end of table.

Table 17. Selected measures of health care service use for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Visited Emergency Department, past 12 months						
Yes	2,699	35.2 (2.14)	936	43.4 (3.65)	3,635	37.0 (1.86)
No	4,972	64.8 (2.14)	1,223	56.6 (3.65)	6,191	63.0 (1.86)
Number of Emergency Department visits, past 12 months						
0	4,972	64.8 (2.14)	1,223	56.6 (3.65)	6,191	63.0 (1.86)
1	1,349	17.6 (1.67)	425	19.7 (3.14)	1,774	18.1 (1.47)
2 or more	1,350	17.6 (1.64)	511	23.7 (3.10)	1,861	18.9 (1.46)
Visited Emergency Department because no other place to go ⁹						
Yes	1,058	39.2 (3.51) [‡]	500	53.4 (6.03)	1,559	42.9 (3.09)
No	1,641	60.8 (3.51) [‡]	436	46.6 (6.03)	2,076	57.1 (3.09)
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	1,326	49.1 (3.62)	400	42.7 (6.19)	1,725	47.4 (3.12)
No	1,373	50.9 (3.62)	537	57.3 (6.19)	1,911	52.6 (3.12)
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	1,368	50.7 (3.82)	351	37.5 (5.67)	1,716	47.2 (3.19)
No	1,332	49.3 (3.82)	586	62.5 (5.67)	1,919	52.8 (3.19)

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

[‡]Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 18. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2016

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Adults covered by Medicaid ⁴ aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	7,671	78.0 (1.56)	2,160	22.0 (1.56)	9,826	100.0
Seen or talked to any health care professional, past 12 months						
Yes	6,438	76.5 (1.76)	1,961	23.5 (1.76)	8,395	100.0
No	1,233	86.0 (2.88)	199	14.0 (2.88)	1,430	100.0
Seen or talked to general doctor, past 12 months						
Yes	5,287	79.5 (1.82)	1,343	20.5 (1.82)	6,625	100.0
No	2,384	74.2 (3.14)	817	25.8 (3.14)	3,201	100.0
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	1,798	76.4 (2.98)	550	23.6 (2.98)	2,347	100.0
No	5,873	78.3 (1.85)	1,610	21.7 (1.85)	7,479	100.0
Seen or talked to medical specialist, past 12 months						
Yes	1,509	74.2 (3.27)	521	25.8 (3.27)	2,030	100.0
No	6,162	78.9 (1.77)	1,639	21.1 (1.77)	7,796	100.0
Blood cholesterol check, past 12 months						
Yes	4,298	76.2 (2.28)	1,327	23.8 (2.28)	5,623	100.0
No	3,373	80.0 (2.32)	833	20.0 (2.32)	4,203	100.0
Blood pressure check, past 12 months						
Yes	6,288	76.7 (1.76)	1,897	23.3 (1.76)	8,182	100.0
No	1,383	84.0 (3.11)	263	16.0 (3.11)	1,644	100.0
Blood sugar check, past 12 months						
Yes	3,004	72.6 (2.78)	1,138	27.4 (2.78)	4,138	100.0
No	4,667	82.1 (1.77)	1,022	17.9 (1.77)	5,688	100.0
Received flu vaccine, past 12 months ⁶						
Yes	2,571	77.0 (2.81)	762	23.0 (2.81)	3,332	100.0
No	5,100	78.4 (1.93)	1,398	21.6 (1.93)	6,494	100.0
Colon cancer test, past 12 months ⁷						
Yes	399	75.0 (6.43)	133	25.0 (6.43)	533	100.0
No	1,239	84.6 (2.77)	225	15.4 (2.77)	1,468	100.0
Mammogram, past 12 months ⁸						
Yes	375	76.7 (5.64)	113	23.3 (5.64)	489	100.0
No	**450	**85.6 (4.74)	*	*	525	100.0
Hospitalized overnight, past 12 months						
Yes	890	71.0 (4.40)	362	29.0 (4.40)	1,252	100.0
No	6,781	79.0 (1.60)	1,798	21.0 (1.60)	8,574	100.0

See footnotes at end of table.

Table 18. State Medicaid expansion status for adults aged 19-64 who were covered by Medicaid at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2016—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Visited Emergency Department, past 12 months						
Yes	2,699	74.1 (2.53)	936	25.9 (2.53)	3,635	100.0
No	4,972	80.1 (1.94)	1,223	19.9 (1.94)	6,191	100.0
Number of Emergency Department visits, past 12 months						
0	4,972	80.1 (1.94)	1,223	19.9 (1.94)	6,191	100.0
1	1,349	75.9 (3.65)	425	24.1 (3.65)	1,774	100.0
2 or more	1,350	72.3 (3.67)	511	27.7 (3.67)	1,861	100.0
Visited Emergency Department because no other place to go ⁹						
Yes	1,058	67.6 (4.48)	500	32.4 (4.48)	1,559	100.0
No	1,641	78.8 (3.02)	436	21.2 (3.02)	2,076	100.0
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	1,326	76.7 (3.89)	400	23.3 (3.89)	1,725	100.0
No	1,373	71.7 (3.60)	537	28.3 (3.60)	1,911	100.0
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	1,368	79.2 (3.43)	351	20.8 (3.43)	1,716	100.0
No	1,332	69.0 (3.94)	586	31.0 (3.94)	1,919	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

**Complement of the estimate does not meet NCHS standards of reliability or precision

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes Medicaid and only state-sponsored health plans with no premiums or it is not known if a premium is charged. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy. Therefore, this category excludes adults who were covered by private insurance in addition to their Medicaid coverage

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 19. Selected measures of health care service use for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Privately insured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	5,408	100.0	4,085	100.0	9,495	100.0
Seen or talked to any health care professional, past 12 months						
Yes	4,514	83.5 (2.06)	3,238	79.3 (2.20)	7,750	81.6 (1.53)
No	895	16.5 (2.06)	847	20.7 (2.20)	1,744	18.4 (1.53)
Seen or talked to general doctor, past 12 months						
Yes	3,666	67.8 (2.43) [†]	2,436	59.6 (2.75)	6,098	64.2 (1.82)
No	1,743	32.2 (2.43) [†]	1,649	40.4 (2.75)	3,397	35.8 (1.82)
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	1,502	27.8 (2.22) [†]	804	19.7 (1.98)	2,301	24.2 (1.53)
No	3,907	72.2 (2.22) [†]	3,281	80.3 (1.98)	7,193	75.8 (1.53)
Seen or talked to medical specialist, past 12 months						
Yes	1,110	20.5 (1.98) [†]	536	13.1 (1.79)	1,642	17.3 (1.35)
No	4,298	79.5 (1.98) [†]	3,549	86.9 (1.79)	7,853	82.7 (1.35)
Blood cholesterol check, past 12 months						
Yes	2,593	47.9 (2.81)	1,763	43.2 (2.91)	4,356	45.9 (2.08)
No	2,816	52.1 (2.81)	2,322	56.8 (2.91)	5,139	54.1 (2.08)
Blood pressure check, past 12 months						
Yes	4,332	80.1 (2.26)	3,179	77.8 (2.13)	7,511	79.1 (1.60)
No	1,076	19.9 (2.26)	907	22.2 (2.13)	1,984	20.9 (1.60)
Blood sugar check, past 12 months						
Yes	1,827	33.8 (2.78)	1,142	27.9 (2.37)	2,967	31.3 (1.92)
No	3,581	66.2 (2.78)	2,944	72.1 (2.37)	6,528	68.7 (1.92)
Received flu vaccine, past 12 months ⁶						
Yes	1,830	33.8 (2.37) [†]	1,058	25.9 (2.22)	2,883	30.4 (1.63)
No	3,578	66.2 (2.37) [†]	3,027	74.1 (2.22)	6,611	69.6 (1.63)
Colon cancer test, past 12 months ⁷						
Yes	167	18.1 (4.40)	186	24.0 (5.06)	354	20.9 (3.31)
No	755	81.9 (4.40)	590	76.0 (5.06)	1,343	79.1 (3.31)
Mammogram, past 12 months ⁸						
Yes	285	60.2 (7.00)	243	51.5 (6.67)	529	55.9 (4.87)
No	189	39.8 (7.00)	229	48.5 (6.67)	418	44.1 (4.87)
Hospitalized overnight, past 12 months						
Yes	387	7.2 (1.30)	242	5.9 (1.28)	630	6.6 (0.93)
No	5,021	92.8 (1.30)	3,843	94.1 (1.28)	8,865	93.4 (0.93)

See footnotes at end of table.

Table 19. Selected measures of health care service use for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: United States, 2016—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³ (standard error)
Visited Emergency Department, past 12 months						
Yes	950	17.6 (1.77)	800	19.6 (2.12)	1,751	18.4 (1.36)
No	4,459	82.4 (1.77)	3,285	80.4 (2.12)	7,744	81.6 (1.36)
Number of Emergency Department visits, past 12 months						
0	4,459	82.4 (1.77)	3,285	80.4 (2.12)	7,744	81.6 (1.36)
1	609	11.3 (1.53)	583	14.3 (1.78)	1,193	12.6 (1.17)
2 or more	341	6.3 (1.02)	217	5.3 (1.33)	557	5.9 (0.81)
Visited Emergency Department because no other place to go ⁹						
Yes	379	40.0 (5.50)	326	40.8 (6.44)	707	40.4 (4.20)
No	570	60.0 (5.50)	473	59.2 (6.44)	1,044	59.6 (4.20)
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	394	41.5 (5.33)	335	41.9 (5.79)	730	41.7 (3.92)
No	556	58.5 (5.33)	464	58.1 (5.79)	1,021	58.3 (3.92)
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	486	51.2 (5.74)	424	53.0 (6.07)	912	52.1 (4.15)
No	463	48.8 (5.74)	376	47.0 (6.07)	839	47.9 (4.15)

^{*}Significantly different from nonexpansion states within each level of each measure at $p < 0.05$.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table 20. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2016

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Privately insured ⁴ adults aged 19-64 years with family incomes less than or equal to 138% FPL ⁵	5,408	56.9 (2.25)	4,085	43.1 (2.25)	9,495	100.0
Seen or talked to any health care professional, past 12 months						
Yes	4,514	57.5 (2.43)	3,238	42.5 (2.43)	7,750	100.0
No	895	50.6 (4.51)	847	49.4 (4.51)	1,744	100.0
Seen or talked to general doctor, past 12 months						
Yes	3,666	59.5 (2.53)	2,436	40.5 (2.53)	6,098	100.0
No	1,743	50.8 (3.49)	1,649	49.2 (3.49)	3,397	100.0
Seen or talked to nurse practitioner, physician assistant, or midwife, past 12 months						
Yes	1,502	64.5 (3.47)	804	35.5 (3.47)	2,301	100.0
No	3,907	53.7 (2.50)	3,281	46.3 (2.50)	7,193	100.0
Seen or talked to medical specialist, past 12 months						
Yes	1,110	66.8 (4.11)	536	33.2 (4.11)	1,642	100.0
No	4,298	54.0 (2.44)	3,549	46.0 (2.44)	7,853	100.0
Blood cholesterol check, past 12 months						
Yes	2,593	59.5 (2.97)	1,763	40.5 (2.97)	4,356	100.0
No	2,816	54.7 (2.95)	2,322	45.3 (2.95)	5,139	100.0
Blood pressure check, past 12 months						
Yes	4,332	57.1 (2.42)	3,179	42.9 (2.42)	7,511	100.0
No	1,076	53.7 (4.23)	907	46.3 (4.23)	1,984	100.0
Blood sugar check, past 12 months						
Yes	1,827	61.2 (3.30)	1,142	38.8 (3.30)	2,967	100.0
No	3,581	54.5 (2.73)	2,944	45.5 (2.73)	6,528	100.0
Received flu vaccine, past 12 months ⁶						
Yes	1,830	62.7 (3.31)	1,058	37.3 (3.31)	2,883	100.0
No	3,578	53.5 (2.58)	3,027	46.5 (2.58)	6,611	100.0
Colon cancer test, past 12 months ⁷						
Yes	*	*	*	*	354	100.0
No	755	55.6 (4.77)	590	44.4 (4.77)	1,343	100.0
Mammogram, past 12 months ⁸						
Yes	285	54.3 (6.84)	243	45.7 (6.84)	529	100.0
No	*	*	*	*	418	100.0
Hospitalized overnight, past 12 months						
Yes	387	61.4 (6.88)	242	38.6 (6.88)	630	100.0
No	5,021	56.6 (2.34)	3,843	43.4 (2.34)	8,865	100.0

See footnotes at end of table.

Table 20. State Medicaid expansion status for adults aged 19-64 who were covered with private health insurance at the time of interview with family incomes less than or equal to 138 percent of the federal poverty level, by selected measures of health care service use: United States, 2016—continued

Use of selected health care services	Number of persons in expansion states ¹ (in thousands)	Percent in expansion states ¹ (standard error)	Number of persons in nonexpansion states ² (in thousands)	Percent in nonexpansion states ² (standard error)	Number of persons in all states ³ (in thousands)	Percent in all states ³
Visited Emergency Department, past 12 months						
Yes	950	53.6 (4.27)	800	46.4 (4.27)	1,751	100.0
No	4,459	56.9 (2.37)	3,285	43.1 (2.37)	7,744	100.0
Number of Emergency Department visits, past 12 months						
0	4,459	56.9 (2.37)	3,285	43.1 (2.37)	7,744	100.0
1	609	50.4 (5.15)	583	49.6 (5.15)	1,193	100.0
2 or more	*	*	*	*	557	100.0
Visited Emergency Department because no other place to go ⁹						
Yes	379	53.0 (6.94)	326	47.0 (6.94)	707	100.0
No	570	53.9 (5.39)	473	46.1 (5.39)	1,044	100.0
Visited Emergency Department because doctor's office wasn't open ⁹						
Yes	394	53.1 (6.06)	335	46.9 (6.06)	730	100.0
No	556	53.6 (5.68)	464	46.4 (5.68)	1,021	100.0
Visited Emergency Department because problem too serious for doctor's office ⁹						
Yes	486	52.6 (5.67)	424	47.4 (5.67)	912	100.0
No	463	54.4 (6.31)	376	45.6 (6.31)	839	100.0

*Estimate is not shown, as it does not meet NCHS standards of reliability or precision.

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³Excludes those living in AK (only for those interviewed from January through February 2016), LA (only for those interviewed from July through December 2016), and MT (only for those interviewed from January through June 2016). These periods reflect the 6 months following the date of state's Medicaid expansion.

⁴Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. Health insurance classification is based on a hierarchy of mutually exclusive categories in the following order, private, Medicaid, other coverage, and uninsured. Adults with more than one type of health insurance were assigned to the first appropriate category in the hierarchy.

⁵FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

⁶Includes vaccination both by shot and nasal spray.

⁷Limited to adults aged 50-64 years.

⁸Limited to female adults aged 50-64 years.

⁹Limited to adults who had a visit to the emergency with at least one emergency department visit in the past 12 months. This measure is regarding the most recent visit to the emergency department.

NOTES: This analysis excluded those who were covered by Medicare, had only military health care, had only Indian Health Service, were noncitizens, had Supplemental Social Security income and were pregnant sample adult females. Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family and Sample Adult Core components.

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Table I. Impact of sample exclusion criteria on sample sizes and population estimates for persons of all ages, by state Medicaid expansion status: National Health Interview Survey Person File, 2016

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total	57,375	195,268	38,141	120,927
Exclude those missing health insurance coverage status	56,789	193,156	37,789	119,643
Exclude those missing information on Supplemental Social Security income	56,717	192,721	37,441	118,239
Exclude those missing information on US citizenship status	57,210	194,617	38,053	120,586
Exclude those covered by Medicare	46,907	163,053	31,317	101,122
Exclude sample adults who were pregnant at the time of interview	57,229	194,781	38,034	120,595
Exclude those who receive Supplemental Social Security income	56,006	190,606	37,272	118,141
Exclude those who are covered only by a military health plan	56,407	192,491	37,192	117,812
Exclude those who are covered only by Indian Health Service	57,281	195,096	38,009	120,626
Exclude those who have incomes above 400% FPL ³	34,325	115,686	25,027	78,511
Exclude those who are not US citizens	53,804	181,228	35,834	112,509
Total after excluding sample for reasons above	22,989	78,258	16,706	52,480

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau’s poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

NOTES: Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table II. Impact of sample exclusion criteria on sample sizes and population estimates for persons of all ages with family incomes less than or equal to 400 percent of the federal poverty level, by state Medicaid expansion status: National Health Interview Survey Person File, 2016

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total of persons of all ages with incomes less than or equal to 400% FPL ³	34,325	115,686	25,027	78,511
Exclude those missing health insurance coverage status	33,863	114,020	24,762	77,547
Exclude those missing information on Supplemental Social Security income	33,924	114,175	24,618	76,966
Exclude those missing information on US citizenship status	34,201	115,192	24,963	78,253
Exclude those covered by Medicare	27,627	95,322	20,308	64,861
Exclude sample adults who were pregnant at the time of interview	34,228	115,346	24,947	78,280
Exclude those who receive Supplemental Social Security income	33,076	111,442	24,208	75,872
Exclude those who are covered only by a military health plan	33,722	113,945	24,409	76,547
Exclude those who are covered only by Indian Health Service	34,244	115,532	24,910	78,241
Exclude those who are not US citizens	31,577	104,871	23,066	71,536
Total after excluding sample for reasons above	22,989	78,258	16,706	52,480

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau’s poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

NOTES: Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table III. Impact of sample exclusion criteria on sample sizes and population estimates for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: National Health Interview Survey Person File, 2016

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total of adults aged 19-64 with incomes less than or equal to 138% FPL ³	6,158	22,005	4,604	15,165
Exclude those missing health insurance coverage status	6,016	21,493	4,521	14,865
Exclude those missing information on Supplemental Social Security income	6,069	21,685	4,525	14,881
Exclude those missing information on US citizenship status	6,123	21,871	4,590	15,110
Exclude those covered by Medicare	5,634	20,332	4,177	13,895
Exclude sample adults who were pregnant at the time of interview	6,128	21,907	4,561	15,028
Exclude those who receive Supplemental Social Security income	5,607	20,115	4,248	14,035
Exclude those who are covered only by a military health plan	6,074	21,729	4,519	14,892
Exclude those who are covered only by Indian Health Service	6,133	21,965	4,567	15,079
Exclude those who are not US citizens	5,122	17,801	3,805	12,357
Total after excluding sample for reasons above	3,950	13,886	2,890	9,502

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

NOTES: Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core component.

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Table IV. Impact of sample exclusion criteria on sample sizes and population estimates for adults aged 19-64 with family incomes less than or equal to 138 percent of the federal poverty level, by state Medicaid expansion status: National Health Interview Survey Sample Adult File, 2016

Selected characteristics for sample exclusion	Sample size in expansion states ¹	Number of persons in expansion states ¹ (in thousands)	Sample size in nonexpansion states ²	Number of persons in nonexpansion states ² (in thousands)
Total of adults aged 19-64 with incomes less than or equal to 138% FPL ³	3,134	23,280	2,289	15,342
Exclude those missing health insurance coverage status	3,101	22,913	2,267	15,182
Exclude those missing information on Supplemental Social Security income	3,122	23,220	2,280	15,265
Exclude those missing information on US citizenship status	3,129	23,205	2,287	15,306
Exclude those covered by Medicare	2,801	21,441	2,017	13,870
Exclude sample adults who were pregnant at the time of interview	3,105	22,997	2,247	14,988
Exclude those who receive Supplemental Social Security income	2,770	21,091	2,073	14,070
Exclude those who are covered only by a military health plan	3,079	22,936	2,239	15,030
Exclude those who are covered only by Indian Health Service	3,125	23,239	2,274	15,242
Exclude those who are not US citizens	2,714	18,788	1,999	12,578
Total after excluding sample for reasons above	2,027	14,564	1,476	9,459

¹Medicaid expansion states include: AK (only those interviewed from March through December 2016), AZ, AR, CA, CO, CT, DE, DC, HI, IL, IN, IA, KY, MD, MA, MI, MN, MT (only those interviewed from July through December 2016), NV, NH, NJ, NM, NY, ND, OH, OR, PA, RI, VT, WA, and WV.

²Medicaid nonexpansion states include: AL, FL, GA, ID, KS, LA (only those interviewed from January through June 2016), ME, MS, MO, NE, NC, OK, SC, SD, TN, TX, UT, VA, WI, and WY.

³FPL is federal poverty level, based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The 2016 imputed income files were used to help create the poverty variable, and this variable is based on reported and imputed family income. For more information see: https://www.cdc.gov/nchs/nhis/nhis_2016_data_release.htm.

NOTES: Number of persons rounded to the nearest 1,000. The sum of number of persons within the subpopulations may not add up to the total due to rounding. Estimates are based on household interviews of a sample of the civilian noninstitutionalized U.S. population.

SOURCE: NCHS, National Health Interview Survey, 2016, Family Core and Sample Adult components.

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Problems Paying Medical Bills Among Persons Under Age 65: Early Release of Estimates From the National Health Interview Survey, 2011–June 2017

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Highlights

- The percentage of persons under age 65 who were in families having problems paying medical bills decreased, from 21.3% (56.5 million) in 2011 to 16.0% (43.3 million) in the first 6 months of 2017.
- The percentage of children aged 0–17 years who were in families having problems paying medical bills decreased, from 23.2% in 2011 to 17.1% in the first 6 months of 2017.
- In the first 6 months of 2017 among persons under age 65, males (15.1%) were less likely than females (16.9%) to be in families having problems paying medical bills.
- In the first 6 months of 2017, among persons under age 65, 29.4% of those who were uninsured, 20.5% of those who had public coverage, and 12.3% of those who had private coverage were in families having problems paying medical bills in the past 12 months.
- In the first 6 months of 2017, 24.4% of poor, 24.8% of near-poor, and 12.2% of not-poor persons under age 65 were in families having problems paying medical bills in the past 12 months.

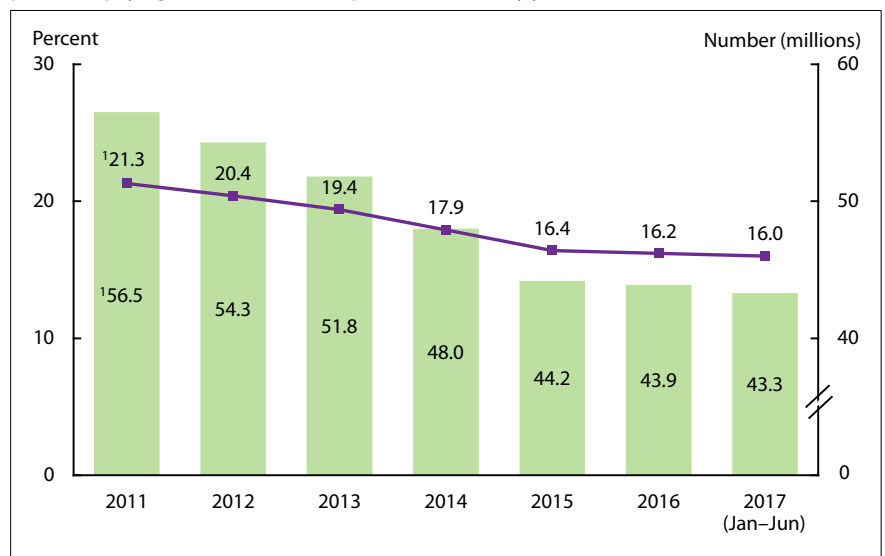
Introduction

This report provides updated estimates (1) from the National Health Interview Survey (NHIS) for the percentage of persons under age 65 who were in families having problems paying medical bills, by selected demographic variables and insurance status. Estimates for 2011–2016 are based on full years of data, and the 2017 estimates are based on data collected during the first 6 months of 2017. During this time period, there have been changes in the prevalence of uninsured persons. In the first 6 months of 2017, 28.3 million (10.5%) persons under age 65 were uninsured at the time of interview—17.6 million fewer persons than in 2011 (17.3%) but only 0.1 million more persons than in 2016 (a statistically insignificant difference) (2).

In this report on families having problems paying medical bills, an NHIS “family” is defined as an individual or a group of two or more related persons living together in the same housing unit. Thus, a family can consist of only one person. In some instances, unrelated persons sharing the same household, such as an unmarried couple living together, may also be considered a family.

This report is produced by the NHIS Early Release (ER) Program, which releases selected preliminary estimates prior to final microdata release. These estimates are available from the NHIS website at <https://www.cdc.gov/nchs/nhis.htm>. For more information about NHIS and the ER Program, see the [Technical Notes](#) and [Additional Early Release Program Products](#) sections of this report.

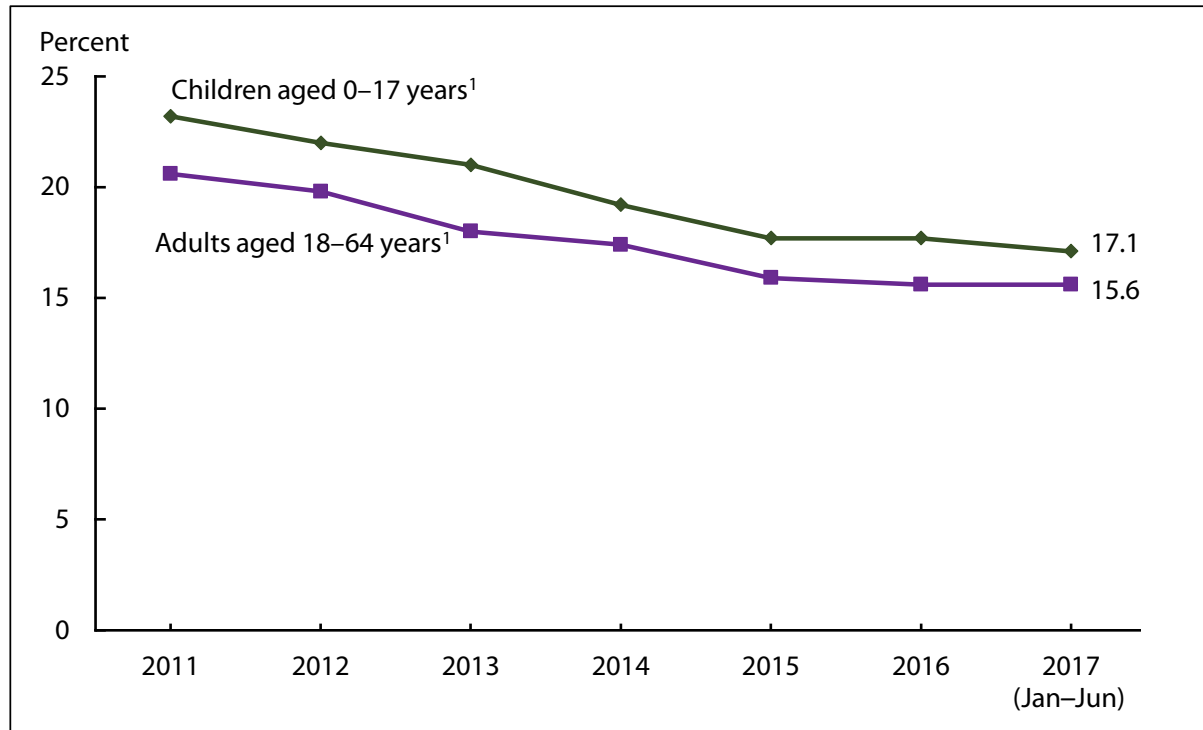
Figure 1. Percentage and number of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by year: United States, 2011–June 2017



¹Significant linear decrease from 2011 through June 2017 ($p < 0.05$).
NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.
SOURCE: NCHS, National Health Interview Survey, 2011–2017.

- Among persons under age 65, 16.0% (43.3 million) were in families having problems paying medical bills in the first 6 months of 2017 (Figure 1).
- The percentage of persons under age 65 who were in families having problems paying medical bills decreased, from 21.3% (56.5 million) in 2011 to 16.0% (43.3 million) in the first 6 months of 2017.
- The percentage of persons under age 65 who were in families having problems paying medical bills did not change significantly between 2016 (16.2% or 43.9 million) and the first 6 months of 2017 (16.0% or 43.3 million).

Figure 2. Percentage of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by age group and year: United States, 2011–June 2017



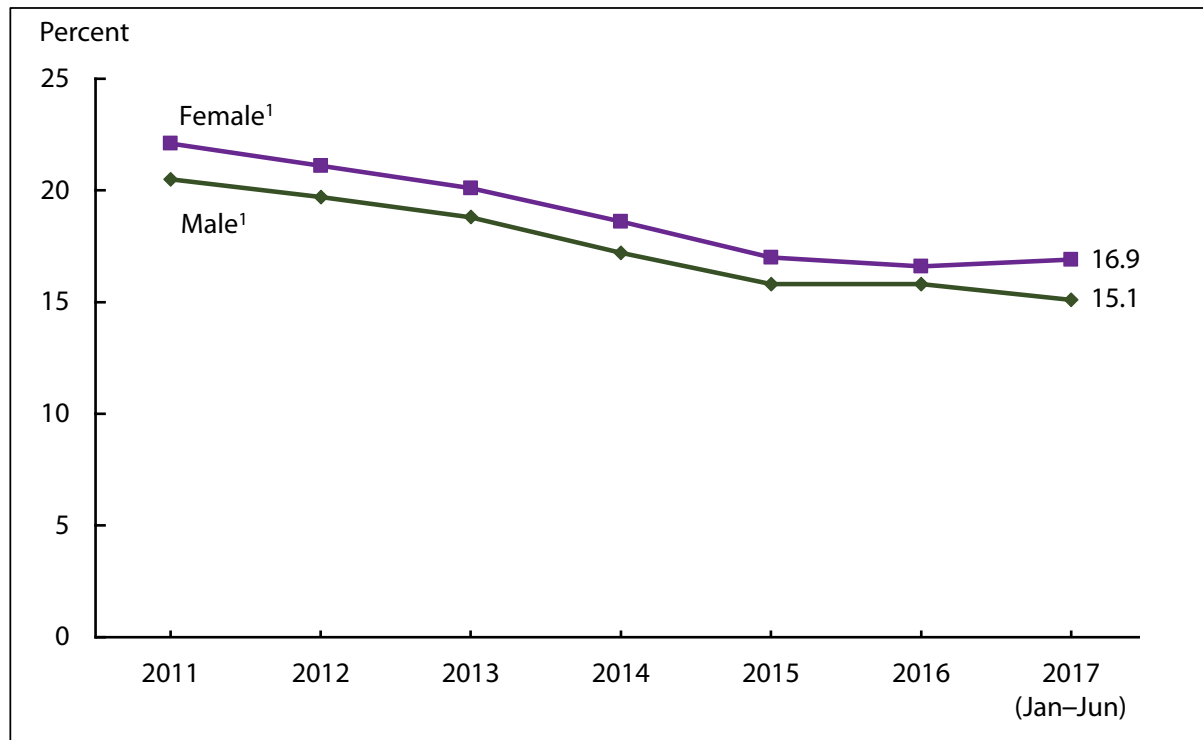
¹Significant linear decrease from 2011 through June 2017 ($p < 0.05$).

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2017.

- Among children aged 0–17 years, the percentage of those who were in families having problems paying medical bills decreased, from 23.2% in 2011 to 17.1% in the first 6 months of 2017 (Figure 2). However, the observed decrease in the percentage of children who were in families having problems paying medical bills between 2016 (17.7%) and the first 6 months of 2017 (17.1%) was not significant.
- Among adults aged 18–64, the percentage of those who were in families having problems paying medical bills decreased, from 20.6% in 2011 to 15.6% in the first 6 months of 2017. There was no change in the percentage of adults aged 18–64 who were in families having problems paying medical bills between 2016 (15.6%) and the first 6 months of 2017 (15.6%).
- Within each year from 2011 through 2016, children were more likely than adults aged 18–64 to be in families having problems paying medical bills. In the first 6 months of 2017, the observed difference between children (17.1%) and adults aged 18–64 (15.6%) was not significant.

Figure 3. Percentage of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by sex and year: United States, 2011–June 2017



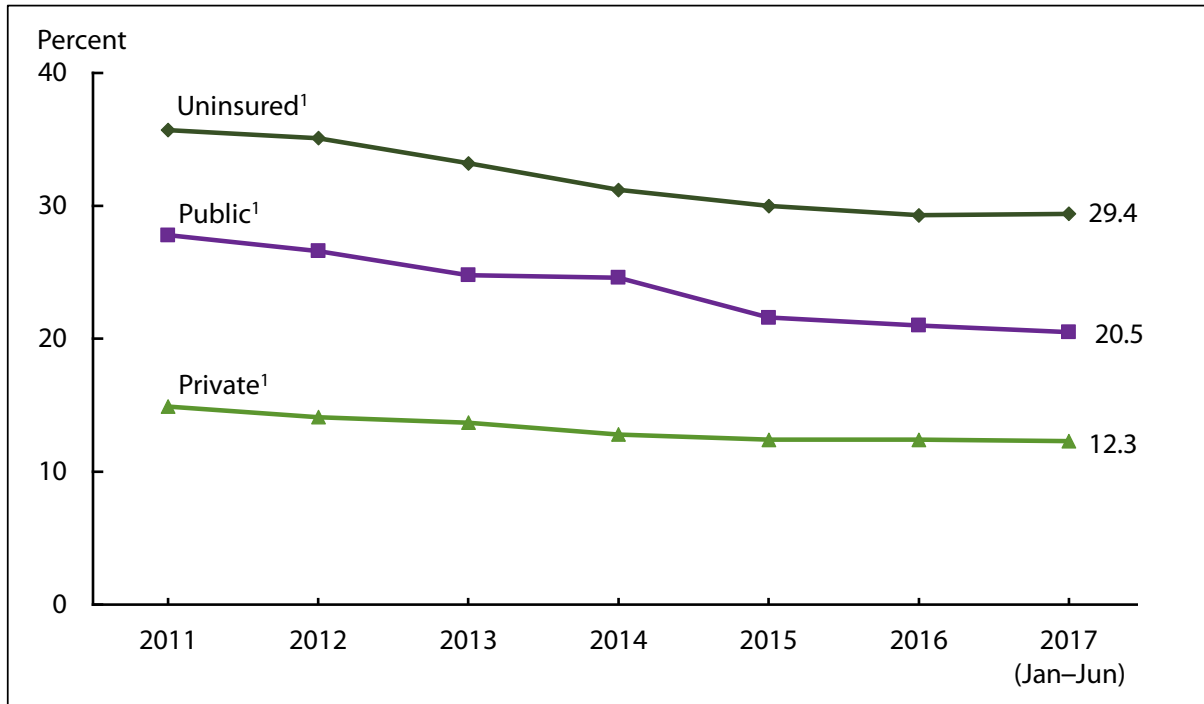
¹Significant linear decrease from 2011 through June 2017 ($p < 0.05$).

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2017.

- Among persons under age 65, the percentage of males who were in families having problems paying medical bills decreased, from 20.5% in 2011 to 15.1% in the first 6 months of 2017 (Figure 3). However, the observed decrease in the percentage of males having problems paying medical bills between 2016 (15.8%) and the first 6 months of 2017 (15.1%) was not significant.
- Among persons under age 65, the percentage of females who were in families having problems paying medical bills decreased, from 22.1% in 2011 to 16.9% in the first 6 months of 2017. However, the observed increase in the percentage of females who were in families having problems paying medical bill between 2016 (16.6%) and the first 6 months of 2017 (16.9%) was not significant.
- Within each year from 2011 through 2015 and from January through June 2017, females were more likely than males to have been in a family having problems paying medical bills. In 2016, the observed difference between females (16.6%) and males (15.8%) was not significant.

Figure 4. Percentage of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by health insurance coverage status and year: United States, 2011–June 2017



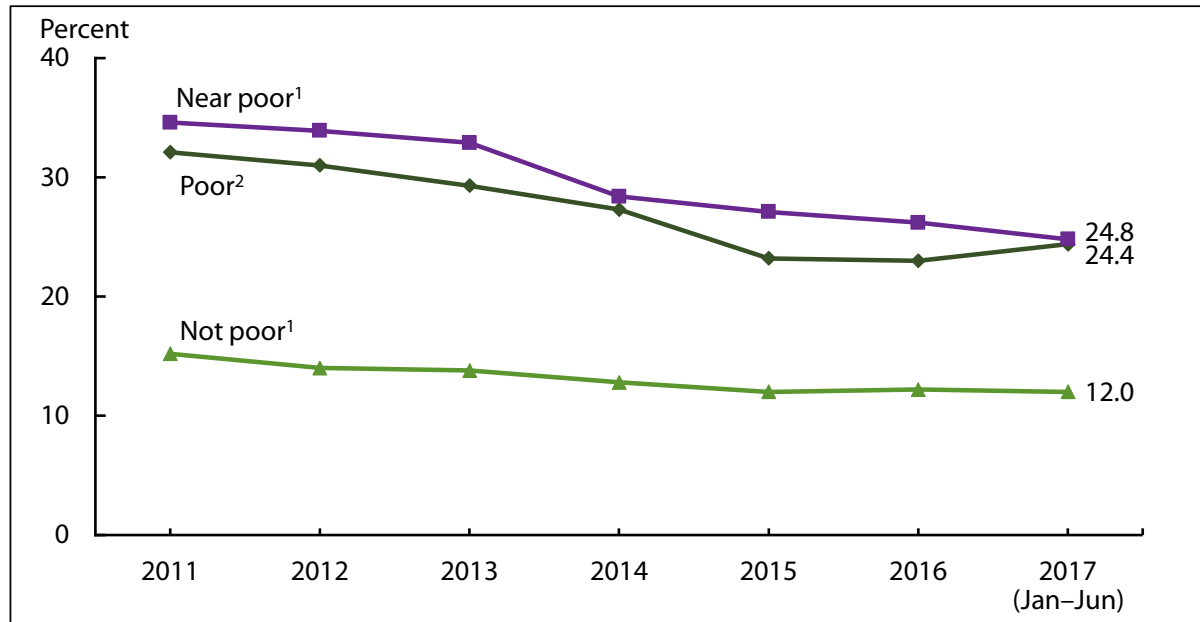
¹Significant linear decrease from 2011 through June 2017 ($p < 0.05$).

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2017.

- In the first 6 months of 2017, among persons under age 65, 29.4% of those who were uninsured, 20.5% of those with public coverage, and 12.3% of those who had private coverage were in families having problems paying medical bills in the past 12 months (Figure 4).
- Among persons under age 65 who were uninsured, the percentage of persons who were in families having problems paying medical bills decreased, from 35.7% in 2011 to 29.4% in the first 6 months of 2017.
- The percentage of persons under age 65 with public coverage who were in families having problems paying medical bills decreased, from 27.8% in 2011 to 20.5% in the first 6 months of 2017.
- The percentage of persons under age 65 with private coverage who were in families having problems paying medical bills decreased, from 14.9% in 2011 to 12.3% in the first 6 months of 2017.
- Among persons under age 65 who were uninsured, had public coverage, or had private coverage, there was no significant change in the percentage of those who were in families having problems paying medical bills between 2016 and the first 6 months of 2017.
- Within each year, persons under age 65 who were uninsured were more likely than those who had public or private coverage to be in families having problems paying medical bills.
- Within each year, persons under age 65 who had public coverage were more likely than those who had private coverage to be in families having problems paying medical bills.

Figure 5. Percentage of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by poverty status, and year: United States, 2011–June 2017



¹Significant linear decrease from 2011 through June 2017 ($p < 0.05$).

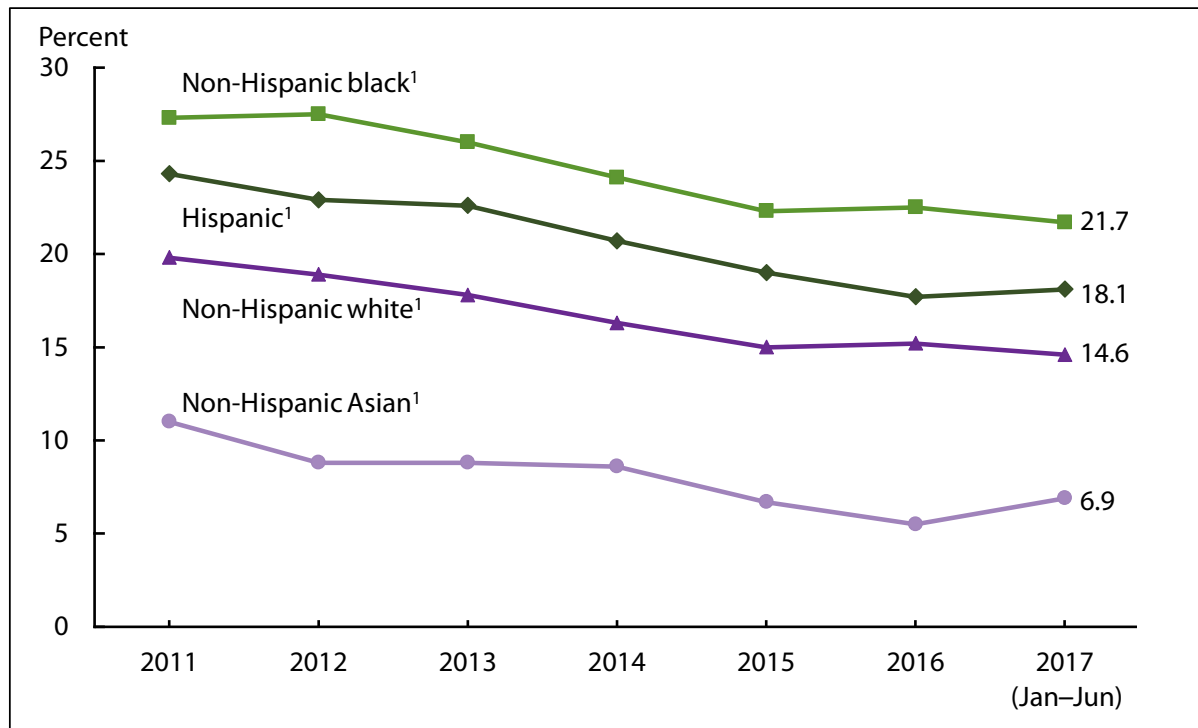
²Significant linear and cubic trend ($p < 0.05$).

NOTES: "Poor" persons are defined as those below the poverty threshold; "near poor" persons have incomes of 100% to less than 200% of the poverty threshold; and "not poor" persons have incomes of 200% of the poverty threshold or greater. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2017.

- In the first 6 months of 2017, among persons under age 65, 24.4% of those who were poor, 24.8% of those who were near poor, and 12.0% of those who were not poor were in families having problems paying medical bills in the past 12 months (Figure 5).
- The percentage of poor persons under age 65 who were in families having problems paying medical bills generally decreased nearly 5 percentage points, from 2011 (32.1%) to 2014 (27.3%). The percentage then decreased another 4 percentage points between 2014 and 2015 to 23.2%. However, the percentage has remained relatively constant between 2015 (23.2%) and the first 6 months of 2017 (24.4%).
- The percentage of near-poor persons under age 65 who were in families having problems paying medical bills decreased, from 34.6% in 2011 to 24.8% in the first 6 months of 2017.
- The percentage of not-poor persons under age 65 who were in families having problems paying medical bills decreased, from 15.2% in 2011 to 12.0% in the first 6 months of 2017.
- Among persons under age 65 who were poor, near poor, or not poor, there was no significant change in the percentage of those who were in families having problems paying medical bills between 2016 and the first 6 months of 2017.
- Within each year, persons under age 65 who were poor or near poor were about twice as likely as those who were not poor to be in families having problems paying medical bills.
- Within each year from 2011 through 2013 and 2015 through 2016, persons under age 65 who were near poor were more likely than those who were poor to be in families having problems paying medical bills.

Figure 6. Percentage of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by race and ethnicity and year: United States, 2011–June 2017



¹Significant linear decrease from 2011 through June 2017 ($p < 0.05$).

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2017.

- In the first 6 months of 2017, among persons under age 65, 21.7% of non-Hispanic black, 18.1% of Hispanic, 14.6% of non-Hispanic white, and 6.9% of non-Hispanic Asian persons were in families having problems paying medical bills in the past 12 months (Figure 6).
- The percentage of non-Hispanic black persons under age 65 who were in families having problems paying medical bills decreased, from 27.3% in 2011 to 21.7% in the first 6 months of 2017.
- The percentage of Hispanic persons under age 65 who were in families having problems paying medical bills decreased, from 24.3% in 2011 to 18.1% in the first 6 months of 2017.
- The percentage of non-Hispanic white persons under age 65 who were in families having problems paying medical bills decreased, from 19.8% in 2011 to 14.6% in the first 6 months of 2017.
- The percentage of non-Hispanic Asian persons under age 65 who were in families having problems paying medical bills decreased, from 11.0% in 2011 to 6.9% in the first 6 months of 2017.
- Among all race and ethnicity groups shown, there was no significant change in the percentage of persons under age 65 who were in families having problems paying medical bills between 2016 and the first 6 months of 2017.
- Within each year, among persons under age 65, non-Hispanic black persons were more likely than all other groups, and non-Hispanic Asian persons were less likely than all other groups, to be in families having problems paying medical bills.
- Within each year, among persons under age 65, Hispanic persons were more likely than non-Hispanic white persons to be in families having problems paying medical bills.

Table. Percentage (standard error) of persons under age 65 who were in families having problems paying medical bills in the past 12 months, by selected demographic characteristics and year: United States, 2011–June 2017

Selected characteristic	2011	2012	2013	2014	2015	2016	2017 (Jan–Jun)
Total	21.3 (0.37)	20.4 (0.33)	19.4 (0.38)	17.9 (0.35)	16.4 (0.31)	16.2 (0.37)	16.0 (0.52)
Sex							
Male	20.5 (0.38)	19.7 (0.34)	18.8 (0.40)	17.2 (0.35)	15.8 (0.33)	15.8 (0.41)	15.1 (0.55)
Female	22.1 (0.41)	21.1 (0.36)	20.1 (0.40)	18.6 (0.39)	17.0 (0.34)	16.6 (0.38)	16.9 (0.53)
Age group (years)							
0–17	23.2 (0.51)	22.0 (0.49)	21.0 (0.54)	19.2 (0.48)	17.7 (0.46)	17.7 (0.46)	17.1 (0.74)
18–64	20.6 (0.36)	19.8 (0.32)	18.8 (0.37)	17.4 (0.34)	15.9 (0.30)	15.6 (0.38)	15.6 (0.49)
Race and ethnicity							
Hispanic	24.3 (0.72)	22.9 (0.64)	22.6 (0.64)	20.7 (0.73)	19.0 (0.62)	17.7 (0.96)	18.1 (1.19)
Non-Hispanic, white only	19.8 (0.47)	18.9 (0.46)	17.8 (0.47)	16.3 (0.44)	15.0 (0.42)	15.2 (0.43)	14.6 (0.57)
Non-Hispanic, black only	27.3 (0.85)	27.5 (0.73)	26.0 (0.88)	24.1 (0.85)	22.3 (0.80)	22.5 (0.73)	21.7 (1.15)
Non-Hispanic, Asian only	11.0 (0.87)	8.8 (0.72)	8.8 (0.83)	8.6 (0.76)	6.7 (0.70)	5.5 (0.75)	6.9 (1.09)
Non-Hispanic other races	26.7 (1.69)	26.2 (1.58)	23.6 (1.73)	23.1 (1.49)	21.1 (1.69)	19.6 (1.47)	21.4 (2.39)
Health insurance coverage status by age group (years)							
Under age 65:							
Uninsured ¹	35.7 (0.76)	35.1 (0.63)	33.2 (0.69)	31.2 (0.81)	30.0 (0.84)	29.3 (0.89)	29.4 (1.33)
Private ²	14.9 (0.33)	14.1 (0.33)	13.7 (0.42)	12.8 (0.34)	12.4 (0.30)	12.4 (0.36)	12.3 (0.59)
Public ³	27.8 (0.62)	26.6 (0.63)	24.8 (0.61)	24.6 (0.61)	21.6 (0.58)	21.0 (0.65)	20.5 (0.66)
0–17:							
Uninsured ¹	37.7 (1.76)	36.7 (1.65)	36.2 (1.73)	32.7 (1.85)	33.9 (2.21)	32.5 (2.64)	27.9 (3.31)
Private ²	16.7 (0.52)	15.3 (0.57)	14.7 (0.65)	13.3 (0.54)	13.3 (0.52)	12.5 (0.44)	12.7 (1.02)
Public ³	29.3 (0.80)	28.6 (0.81)	26.7 (0.82)	25.6 (0.76)	21.9 (0.73)	22.9 (0.83)	21.8 (0.95)
18–64:							
Uninsured ¹	35.4 (0.74)	34.9 (0.64)	32.8 (0.67)	31.0 (0.78)	29.5 (0.83)	28.8 (0.77)	29.6 (1.24)
Private ²	14.4 (0.31)	13.8 (0.31)	13.4 (0.40)	12.6 (0.33)	12.1 (0.29)	12.4 (0.37)	12.2 (0.52)
Public ³	26.2 (0.64)	24.6 (0.65)	23.0 (0.61)	23.7 (0.67)	21.4 (0.66)	19.5 (0.69)	19.5 (0.80)
Poverty status ⁴ by age group (years)							
Under age 65:							
Poor	32.1 (0.93)	31.0 (0.84)	29.3 (0.95)	27.3 (0.96)	23.2 (0.92)	23.0 (0.94)	24.4 (1.31)
Near poor	34.6 (0.78)	33.9 (0.85)	32.9 (0.86)	28.4 (0.81)	27.1 (0.85)	26.2 (0.80)	24.8 (1.21)
Not poor	15.2 (0.39)	14.0 (0.36)	13.8 (0.41)	12.8 (0.37)	12.0 (0.33)	12.2 (0.41)	12.0 (0.61)
0–17:							
Poor	32.7 (1.23)	30.3 (1.13)	28.4 (1.22)	26.7 (1.23)	21.9 (1.09)	23.5 (1.26)	25.8 (1.73)
Near poor	34.3 (1.08)	32.7 (1.14)	32.9 (1.20)	27.0 (1.02)	27.0 (1.21)	25.7 (1.01)	22.8 (1.59)
Not poor	15.4 (0.59)	14.6 (0.54)	14.2 (0.65)	13.2 (0.56)	12.5 (0.52)	12.7 (0.48)	12.2 (1.02)
18–64:							
Poor	31.8 (0.93)	31.4 (0.87)	29.8 (0.94)	27.7 (0.98)	24.0 (0.95)	22.7 (0.93)	23.7 (1.39)
Near poor	34.7 (0.79)	34.5 (0.84)	33.0 (0.83)	29.0 (0.84)	27.2 (0.79)	26.4 (0.86)	25.9 (1.27)
Not poor	15.1 (0.38)	13.8 (0.34)	13.7 (0.39)	12.6 (0.36)	11.9 (0.32)	12.0 (0.43)	12.0 (0.54)
Out-of-pocket medical expenses ⁵							
Less than \$2,000	17.9 (0.36)	17.2 (0.34)	16.1 (0.36)	15.3 (0.35)	13.3 (0.34)	13.3 (0.35)	12.6 (0.51)
\$2,000 or more	32.7 (0.79)	31.2 (0.78)	30.3 (0.80)	27.2 (0.79)	26.3 (0.75)	25.2 (0.76)	25.7 (1.08)

¹Includes persons without private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military health plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare (disability), and military plans. A small number of persons were covered by both public and private plans and were included in both categories

⁴Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold, "near poor" persons have incomes of 100% to less than 200% of the poverty threshold, and "not poor" persons have incomes of 200% of the poverty threshold or greater. The percentages of respondents with unknown poverty status were 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, 8.8% in 2015, 7.8% in 2016, and 6.9% in the first two quarters of 2017. Estimates for persons with unknown poverty status are not shown separately. For more information on the unknown income and poverty status categories, see the *Survey Description* document for the 2016 National Health Interview Survey, available from: <https://www.cdc.gov/nchs/nhis.htm>. The estimates shown in this report may differ from estimates based on both reported and imputed income.

⁵Based on the following survey question: "The next question is about money that [you have/your family has] spent out of pocket on medical care. We do not want you to count health insurance premiums, over-the-counter drugs, or costs that you will be reimbursed for. In the past 12 months, about how much did [you/your family] spend for medical care and dental care?"

NOTES: Having problems paying medical bills in the past 12 months is based on the following survey question: "In the past 12 months did [you/anyone in the family] have problems paying or were unable to pay any medical bills? Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home, or home care." Health insurance pertains to the sample person, whereas "problems paying medical bills" refers to the family as reported by the family respondent. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2011–2017.

Technical Notes

The National Center for Health Statistics (NCHS) is releasing selected estimates of problems paying medical bills for the past 12 months for the civilian noninstitutionalized U.S. population based on data from the January 2011–June 2017 National Health Interview Survey (NHIS).

The estimates are being released prior to final data editing and final weighting to provide access to the most recent information from NHIS. Differences between estimates calculated using preliminary data files and final data files are typically less than 0.1 percentage point. Estimates for 2011 through June 2017 are stratified by year, sex, age group, race and ethnicity, poverty status, health insurance coverage status, and out-of-pocket medical expenses. All estimates in this report are based on preliminary data files.

Data source

Data used to produce this Early Release (ER) report are derived from the NHIS Family Core and Supplemental components from January 2011 through June 2017. These components collect information on all family members in each household. Data analysis was based on information collected on 667,739 persons in the Family Core and Supplemental components. A new sample design was implemented with the 2016 NHIS. Sample areas were reselected to take into account changes in the distribution of the U.S. population since 2006, when the previous sample design was first implemented. Commercial address lists were used as the main source of addresses, rather than field listing; and the oversampling procedures for black, Hispanic, and Asian persons that were a feature of the previous sample design were not implemented in 2016. Some of the differences between estimates for 2016 and 2017 and estimates for earlier years may be attributable to the new sample design. Visit the NCHS website at <https://www.cdc.gov/nchs/nhis.htm> for more information on the design, content, and use of NHIS.

Estimation procedures

NCHS creates survey weights for each calendar quarter of the NHIS sample. The NHIS data weighting procedure is described in more detail at https://www.cdc.gov/nchs/data/series/sr_02/sr02_165.pdf. Estimates were calculated using the NHIS survey weights, which are calibrated to census totals for sex, age, and race and ethnicity of the U.S. civilian noninstitutionalized population. Weights for the 2011 NHIS data were derived from 2000 census-based population estimates. Weights for the 2012, 2013, 2014, 2015, 2016, and 2017 NHIS data were derived from 2010 census-based population estimates.

Point estimates and estimates of their variances were calculated using SUDAAN software to account for the complex sample design of NHIS. The Taylor series linearization method was chosen for variance estimation. Trends were evaluated using logistic regression analysis.

Beginning with the 2017 NHIS, all estimates shown meet the NCHS standards of reliability as specified in *National Center for Health Statistics Data Presentation Standards for Proportions* (3), unless otherwise noted. Estimates based on the 2016 and earlier NHIS meet the former NCHS standard of having less than or equal to 30% relative standard error. Differences between percentages or rates were evaluated using two-sided significance tests at the 0.05 level. Terms such as “more likely” and “less likely” indicate a statistically significant difference. Lack of comment regarding the difference between any two estimates does not necessarily mean that the difference was tested and found to be not significant.

Definitions of selected terms

Health insurance coverage at interview—The “private health insurance coverage” category includes persons who had any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. The “public health plan coverage” category includes Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plans, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories. A person was defined as uninsured if he or she did not have, at the time of the interview, any private health insurance, Medicare, Medicaid, CHIP, state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or only a private plan that paid for one type of service, such as accidents or dental care. Data on health insurance status were edited using an automated system based on logic checks and keyword searches. For comparability, the estimates for all years were created using these same procedures. Health insurance information is collected for all persons in a family and is reported on an individual basis.

Family—An individual or a group of two or more related persons who are living together in the same occupied housing unit (i.e., household) in the sample. In some instances, unrelated persons sharing the same household, such as an unmarried couple living together, may also be considered one family.

Poverty status—Based on the ratio of the family’s income in the previous calendar year to the appropriate poverty threshold (given the family’s size and number of children) defined by the U.S. Census Bureau for that year (4–10). Persons categorized as “poor” have a poverty ratio less than 100% (i.e., their family income was below the poverty threshold); “near poor” persons have incomes of

100% to less than 200% of the poverty threshold; and “not poor” persons have incomes that are 200% of the poverty threshold or greater. The percentage of respondents with unknown poverty status from January 2011 through June 2017 averaged 9.6%. For more information on unknown income and unknown poverty status, see the *NHIS Survey Description* document for 2016: <https://www.cdc.gov/nchs/nhis.htm>. NCHS provides imputed income files, which are released a few months after the annual release of NHIS microdata and are not available for the ER updates. Therefore, estimates stratified by poverty status in this ER report are based on reported income only and may differ from similar estimates produced later that are based on both reported and imputed income.

Problems paying medical bills in the past 12 months—Based on the following question: “In the past 12 months, did [you/anyone in the family] have problems paying or were unable to pay any medical bills? Include bills for doctors, dentists, hospitals, therapists, medication, equipment, nursing home, or home care.” This question was answered by the family respondent on behalf of everyone in the family.

Additional Early Release Program Products

Additional reports are published through the Early Release (ER) Program. *Early Release of Selected Estimates Based on Data From the National Health Interview Survey* is published quarterly and provides estimates of 15 selected measures of health. Measures of health include estimates of health insurance, having a usual place to go for medical care, obtaining needed medical care, influenza vaccination, pneumococcal vaccination, obesity, leisure-time physical activity, current smoking, alcohol consumption, HIV testing, general health status, personal care needs, serious psychological distress, diagnosed diabetes, and asthma episodes and current asthma.

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey is published quarterly and provides detailed estimates of health insurance coverage.

Wireless Substitution: Early Release of Estimates From the National Health Interview Survey is published biannually and provides selected estimates of telephone coverage in the United States.

In addition to these reports, preliminary microdata files containing selected National Health Interview Survey (NHIS) variables are produced as part of the ER Program. For the 2017 NHIS, these files are made available in and about August 2017, November 2017, February 2018, and May 2018. NHIS data users can analyze these files through the National Center for Health Statistics Research Data Center without having to wait for the final annual NHIS microdata files to be released.

New measures may be added as work continues and in response to changing data needs. Feedback on these releases is welcome (nhislist@cdc.gov).

Announcements about Early Releases, other new data releases, publications, or corrections related to NHIS will be sent to members of the HISUSERS e-mail list. To join, visit the Centers for Disease Control and Prevention website at <https://www.cdc.gov/subscribe.html>.

References

1. Cohen RA, Zammiti EP. Problems paying medical bills among persons under age 65: Early release of estimates from the National Health Interview Survey, 2011–June 2016. National Center for Health Statistics. 2016. Available from: <https://www.cdc.gov/nchs/nhis/releases.htm>.
2. Zammiti EP, Cohen RA, Martinez ME. Health insurance coverage: Early release of estimates from the National Health Interview Survey, January – June 2017. National Center for Health Statistics. November 2017. Available from: <https://www.cdc.gov/nchs/nhis/releases.htm>.
3. Parker JD, Talih M, Malec DJ, Beresovsky V, Carroll M, Gonzalez Jr JF, et al. National Center for Health Statistics data presentation standards for proportions. National Center for Health Statistics. *Vital Health Stat* 2(175). 2017. Available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf.
4. DeNavas-Walt C, Proctor BD, Smith JC. Income, poverty, and health insurance coverage in the United States: 2010. U.S. Census Bureau, Current Population Reports, P60–239. Washington, DC: U.S. Government Printing Office. 2011.
5. DeNavas-Walt C, Proctor BD, Smith JC. Income, poverty, and health insurance coverage in the United States: 2011. U.S. Census Bureau, Current Population Reports, P60–243. Washington, DC: U.S. Government Printing Office. 2012.
6. DeNavas-Walt C, Proctor BD, Smith JC. Income, poverty, and health insurance coverage in the United States: 2012. U.S. Census Bureau, Current Population Reports, P60–245. Washington, DC: U.S. Government Printing Office. 2013.

7. DeNavas-Walt C, Proctor BD. Income and poverty in the United States: 2013. U.S. Census Bureau, Current Population Reports, P60–249. Washington, DC: U.S. Government Printing Office. 2014.
8. DeNavas-Walt C, Proctor BD. Income and poverty in the United States: 2014. U.S. Census Bureau, Current Population Reports, P60–252. Washington, DC: U.S. Government Printing Office. 2015.
9. Proctor BD, Semega, JL, Kollar, MA. Income and poverty in the United States: 2015. U.S. Census Bureau, Current Population Reports, P60–256. Washington, DC: U.S. Government Printing Office. 2016.
10. Semega JL, Kollar MA. Income and poverty in the United States: 2016. U.S. Census Bureau, Current Population Reports, P60–259. Washington, DC: U.S. Government Printing Office. 2017.

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<https://www.cdc.gov/nchs/nhis/releases.htm>.