

Health Insurance Coverage in the United States: 2017

Introduction

Health insurance is a means for financing a person's health care expenses. While the majority of people have private health insurance, primarily through an employer, many others obtain coverage through programs offered by the government. Other individuals do not have health insurance coverage at all (see the text box "What Is Health Insurance Coverage?").

Over time, changes in the rate of health insurance coverage and the distribution of coverage types may reflect economic trends, shifts in the demographic composition of the population, and policy changes that affect access to care. Several such

policy changes occurred in 2014, when many provisions of the Patient Protection and Affordable Care Act went into effect (see the text box "Health Insurance Coverage and the Affordable Care Act").

This report presents statistics on health insurance coverage in the United States in 2017, changes in health insurance coverage rates between 2016 and 2017, as well as changes in health insurance coverage rates between 2013 and 2017.¹ The statistics in this report are based on information collected in two surveys conducted by the U.S. Census Bureau, the Current Population Survey Annual

¹ For a discussion of measuring change over time with the CPS ASEC, see Appendix B.

Social and Economic Supplement (CPS ASEC) and the American Community Survey (ACS) (see the text box "Two Measures of Health Insurance Coverage"). Throughout the report, unless otherwise noted, estimates come from the CPS ASEC.

Highlights

- In 2017, 8.8 percent of people, or 28.5 million, did not have health insurance at any point during the year. The uninsured rate and number of uninsured in 2017 were not statistically different from 2016 (8.8 percent or 28.1 million) (Figure 1 and Table 1).²
- The percentage of people with health insurance coverage for all or part of 2017 was 91.2 percent, not statistically different from the rate in 2016 (91.2 percent). Between 2016 and 2017, the number of people with health insurance coverage increased by 2.3 million, up to 294.6 million (Table 1).
- In 2017, private health insurance coverage continued to be more prevalent than government coverage, at 67.2 percent and 37.7 percent, respectively.³ Of the subtypes of health insurance coverage, employer-based insurance was the most common, covering 56.0 percent of the population for some or all of the calendar year, followed by Medicaid (19.3 percent), Medicare (17.2 percent),

² For a discussion of the quality of the CPS ASEC health insurance coverage estimates, see Appendix B.

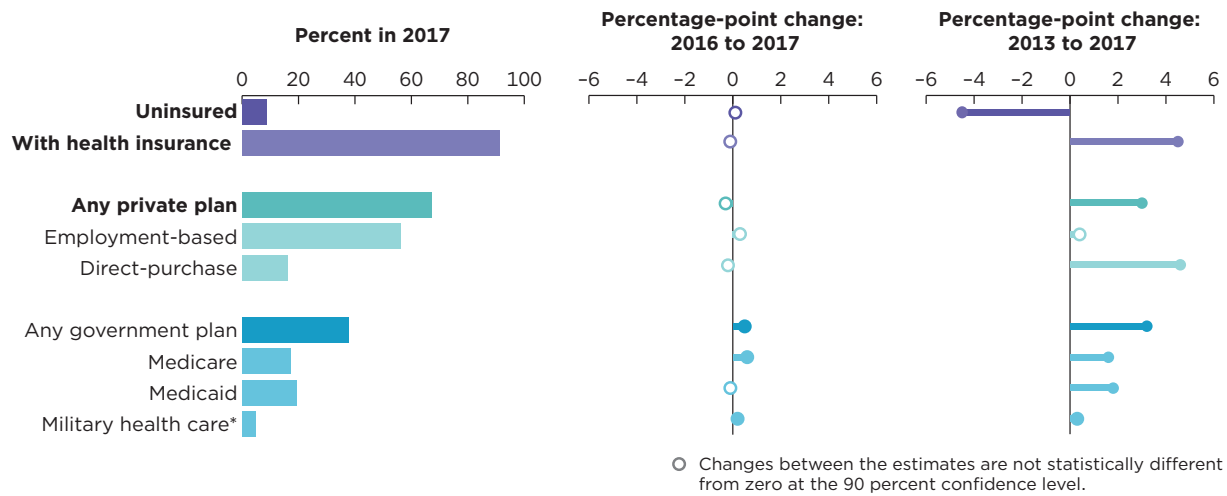
³ Some people may have more than one coverage type during the calendar year.

What Is Health Insurance Coverage?

Health insurance coverage in the Current Population Survey Annual Social and Economic Supplement (CPS ASEC) refers to comprehensive coverage during the calendar year.* For reporting purposes, the Census Bureau broadly classifies health insurance coverage as private insurance or government insurance. The CPS ASEC defines private health insurance as a plan provided through an employer or a union and coverage purchased directly by an individual from an insurance company or through an exchange. Government insurance coverage includes federal programs, such as Medicare, Medicaid, the Children's Health Insurance Program (CHIP), individual state health plans, TRICARE, CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military. In the CPS ASEC, people were considered "insured" if they were covered by any type of health insurance for part or all of the previous calendar year. They were considered uninsured if, for the entire year, they were not covered by any type of health insurance. Additionally, people were considered uninsured if they only had coverage through the Indian Health Service (IHS), as IHS coverage is not considered comprehensive. For more information, see Appendix A, "Estimates of Health Insurance Coverage."

* Comprehensive health insurance covers basic healthcare needs. This definition excludes single service plans, such as accident, disability, dental, vision, or prescription medicine plans.

Figure 1.
Percentage of People by Type of Health Insurance Coverage and Change From 2013 to 2017
 (Population as of March of the following year)



* Military health care includes TRICARE and CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military.

Note: For information on confidentiality protection, sampling error, nonsampling error, and definitions in the Current Population Survey, see <www2.census.gov/programs-surveys/cps/techdocs/cpsmar18.pdf>.

Source: U.S. Census Bureau, Current Population Survey, 2014, 2017, and 2018 Annual Social and Economic Supplements.

direct-purchase coverage (16.0 percent), and military coverage (4.8 percent) (Table 1 and Figure 1).

- Between 2016 and 2017, the rate of Medicare coverage increased by 0.6 percentage points to cover 17.2 percent of people for part or all of 2017 (up from 16.7

percent in 2016) (Table 1 and Figure 1).^{4, 5}

- The military coverage rate increased by 0.2 percentage points to 4.8 percent during this time. Coverage rates for employment-based coverage, direct-purchase coverage, and

⁴ This increase was partly due to growth in the number of people aged 65 and over. The population 65 years and older did not have a statistically significant change in the Medicare coverage rate between 2016 and 2017. However, the percentage of the U.S. population 65 years and older increased between 2016 and 2017.

⁵ Throughout this report, details may not sum to totals because of rounding.

Medicaid did not statistically change between 2016 and 2017.

- In 2017, the percentage of uninsured children under the age of 19 (5.4 percent) was not statistically different from the percentage in 2016 (Table 2).⁶
- For children under the age of 19 in poverty, the uninsured rate (7.8 percent) was higher than for children not in poverty (4.9 percent) (Figure 6).

⁶ Throughout this report, the term “children” is used to refer to people under age 19, regardless of marital status or householder status.

- Between 2016 and 2017, the uninsured rate did not statistically change for any race or Hispanic origin group (Table 5).⁷
- In 2017, non-Hispanic Whites had the lowest uninsured rate among race and Hispanic-origin groups (6.3 percent). The uninsured rates

⁷ Federal surveys give respondents the option of reporting more than one race. Therefore, two basic ways of defining a race group are possible. A group, such as Asian, may be defined as those who reported Asian and no other race (the race-alone or single-race concept) or as those who reported Asian, regardless of whether they also reported another race (the race-alone-or-in-combination concept). The body of this report (text, figures, and tables) shows data using the first approach (race alone). Use of the single-race population does not imply that it is the preferred method of presenting or analyzing data. The Census Bureau uses a variety of approaches.

In this report, the term “non-Hispanic White” refers to people who are not Hispanic and who reported White and no other race. The Census Bureau uses non-Hispanic Whites as the comparison group for other race groups and Hispanics. Since Hispanics may be any race, data in this report for Hispanics overlap with data for race groups. Being Hispanic was reported by 15.4 percent of White householders who reported only one race, 4.8 percent of Black householders who reported only one race, and 2.2 percent of Asian householders who reported only one race.

Data users should exercise caution when interpreting aggregate results for the Hispanic population or for race groups because these populations consist of many distinct groups that differ in socioeconomic characteristics, culture, and nativity. For further information, see <www.census.gov/cps>.

for Blacks and Asians were 10.6 percent and 7.3 percent, respectively. Hispanics had the highest uninsured rate (16.1 percent) (Table 5).

- Between 2016 and 2017, the percentage of people without health insurance coverage at the time of interview decreased in three states and increased in 14 states (Table 6 and Figure 8).⁸

Estimates of Health Insurance Coverage

This report classifies health insurance coverage into three different groups: overall coverage, private coverage, and government coverage. Private coverage includes health insurance provided through an employer or union and coverage purchased directly by an individual from an insurance company or through an exchange.⁹ Government coverage includes federal programs, such as Medicare, Medicaid, the

⁸ Estimates are from the 2016 and 2017 American Community Survey, 1-year estimates. For more information, see the text box “Two Measures of Health Insurance Coverage.”

⁹ Exchanges include coverage purchased through the federal Health Insurance Marketplace, as well as other state-based marketplaces, and include both subsidized and unsubsidized plans.

Children’s Health Insurance Program (CHIP), individual state health plans, TRICARE, CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military. Individuals are considered to be uninsured if they did not have health insurance coverage at any point during the calendar year (see the text box “What Is Health Insurance Coverage?”).

In 2017, most people (91.2 percent) had health insurance coverage at some point during the calendar year (Table 1 and Figure 1). More people had private health insurance (67.2 percent) than government coverage (37.7 percent).¹⁰

Employer-based insurance was the most common subtype of health insurance in the civilian, noninstitutionalized population (56.0 percent), followed by Medicaid (19.3 percent), Medicare (17.2 percent), direct-purchase insurance (16.0 percent), and military health care (4.8 percent) (Table 1).

¹⁰ Some people may have more than one coverage type during the calendar year (see section on “Multiple Coverage Types”).

Health Insurance Coverage and the Affordable Care Act

Since the passage of the Patient Protection and Affordable Care Act (ACA) in 2010, several of its provisions have gone into effect at different times. For example, in 2010, the Young Adult Provision enabled adults under the age of 26 to remain as dependents on their parents’ health insurance plans. Many more of the main provisions went into effect on January 1, 2014, including the expansion of Medicaid eligibility and the establishment of health insurance marketplaces (e.g., healthcare.gov).

In 2014, people under the age of 65, particularly adults aged 19 to 64, may have become eligible for coverage options under the ACA. Based on family income, some people may have qualified for subsidies or tax credits to help pay for premiums associated with health insurance plans. In addition, the population with lower income may have become eligible for Medicaid coverage if they resided in one of the 31 states (or the District of Columbia) that expanded Medicaid eligibility on or before January 1, 2017. Twenty-four states and the District of Columbia expanded Medicaid eligibility by January 1, 2014. Between then and January 1, 2015, three additional states—Michigan, New Hampshire, and Pennsylvania—had expanded Medicaid eligibility. By January 1, 2016, three more states—Alaska, Indiana, and Montana—expanded Medicaid eligibility. One more state—Louisiana—expanded Medicaid eligibility by January 1, 2017.*

* For a list of the states and their Medicaid expansion status as of January 1, 2017, see Table 6: Percentage of People Without Health Insurance Coverage by State: 2013, 2016, and 2017.

Table 1. Coverage Numbers and Rates by Type of Health Insurance: 2013, 2016, and 2017

(Numbers in thousands, margins of error in thousands or percentage points as appropriate. Population as of March of the following year. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see www2.census.gov/programs-surveys/cps/techdocs/cpsmar18.pdf)

| Coverage type | 2013 | | | 2016 | | | 2017 | | | Change in number | | Change in rate | |
|-------------------------------------------|----------------|----------------------------------|-------------|----------------------------------|----------------|------------|----------------------------------|----------------|------------|----------------------------------|----------------|----------------|-------------|
| | Number | Margin of error ¹ (±) | Rate | Margin of error ¹ (±) | Number | Rate | Margin of error ¹ (±) | Number | Rate | Margin of error ¹ (±) | 2017 less 2016 | 2017 less 2016 | 2013 |
| Total | 313,401 | 109 | X | X | 320,372 | 96 | X | 323,156 | 123 | X | X | X | X |
| Any health plan | 271,606 | 656 | 86.7 | 0.2 | 292,320 | 541 | 0.2 | 294,613 | 662 | 0.2 | *2,293 | -0.1 | *4.5 |
| Any private plan ^{2,3} | 201,038 | 1,140 | 64.1 | 0.4 | 216,203 | 1,145 | 0.4 | 217,007 | 1,158 | 0.4 | 804 | -0.3 | *3.0 |
| Employment-based ⁴ | 174,418 | 1,160 | 55.7 | 0.4 | 178,455 | 1,130 | 0.4 | 181,036 | 1,241 | 0.4 | *2,582 | 0.3 | 0.4 |
| Direct-purchase ² | 35,755 | 615 | 11.4 | 0.2 | 51,961 | 874 | 0.3 | 51,821 | 1,008 | 0.3 | -140 | -0.2 | *4.6 |
| Any government plan ^{2,4} | 108,287 | 1,115 | 34.6 | 0.4 | 119,361 | 1,018 | 0.3 | 121,965 | 1,086 | 0.3 | *2,604 | *0.5 | *3.2 |
| Medicare ² | 49,020 | 377 | 15.6 | 0.1 | 53,372 | 396 | 0.1 | 55,623 | 351 | 0.1 | *2,251 | *0.6 | *1.6 |
| Medicaid ² | 54,919 | 969 | 17.5 | 0.3 | 62,303 | 931 | 0.3 | 62,492 | 1,007 | 0.3 | 188 | -0.1 | *1.8 |
| Military health care ^{2,5} | 14,016 | 595 | 4.5 | 0.2 | 14,638 | 575 | 0.2 | 15,532 | 769 | 0.2 | *893 | *0.2 | *0.3 |
| Uninsured ⁶ | 41,795 | 614 | 13.3 | 0.2 | 28,052 | 519 | 0.2 | 28,543 | 634 | 0.2 | 492 | 0.1 | *-4.5 |

X Not applicable.

* Changes between the estimates are statistically different from zero at the 90 percent confidence level.

¹ A margin of error (MOE) is a measure of an estimate's variability. The larger the MOE in relation to the size of the estimate, the less reliable the estimate. This number, when added to and subtracted from the estimate, forms the 90 percent confidence interval.

MOEs shown in this table are based on standard errors calculated using replicate weights. For more information, see "Standard Errors and Their Use" at <www2.census.gov/library/publications/2018/demo/p60-264sa.pdf>.

² The estimates by type of coverage are not mutually exclusive; people can be covered by more than one type of health insurance during the year.

³ Private health insurance includes coverage provided through an employer or union, coverage purchased directly by an individual from an insurance company, or coverage through someone outside the household.

⁴ Government health insurance coverage includes Medicaid, Medicare, TRICARE, CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military.

⁵ Military health care included is TRICARE and CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military.

⁶ Individuals are considered to be uninsured if they do not have health insurance coverage for the entire calendar year.

Source: U.S. Census Bureau, Current Population Survey, 2014, 2017, and 2018 Annual Social and Economic Supplements.

Two Measures of Health Insurance Coverage

This report includes two types of health insurance coverage measures: health insurance coverage during the previous calendar year and health insurance coverage at the time of the interview.

The first measure, health insurance coverage at any time during the previous calendar year, is collected with the Current Population Survey Annual Social and Economic Supplement (CPS ASEC). The CPS is the longest-running survey conducted by the U.S. Census Bureau. The key purpose of the CPS ASEC is to provide timely and detailed estimates of economic well-being, of which health insurance coverage is an important part. The Census Bureau conducts the CPS ASEC annually between February and April, and the resulting measure of health insurance coverage reflects an individual's coverage status during the previous calendar year.

The second measure, health insurance coverage at the time of the interview, is collected with the American Community Survey (ACS). The ACS is an ongoing survey that collects comprehensive information on social, economic, and housing topics. Due to its large sample size, the ACS provides estimates at many levels of geography and for smaller population groups. The Census Bureau conducts the ACS throughout the year, and the resulting measure of health coverage reflects an annual average of current health insurance coverage status.

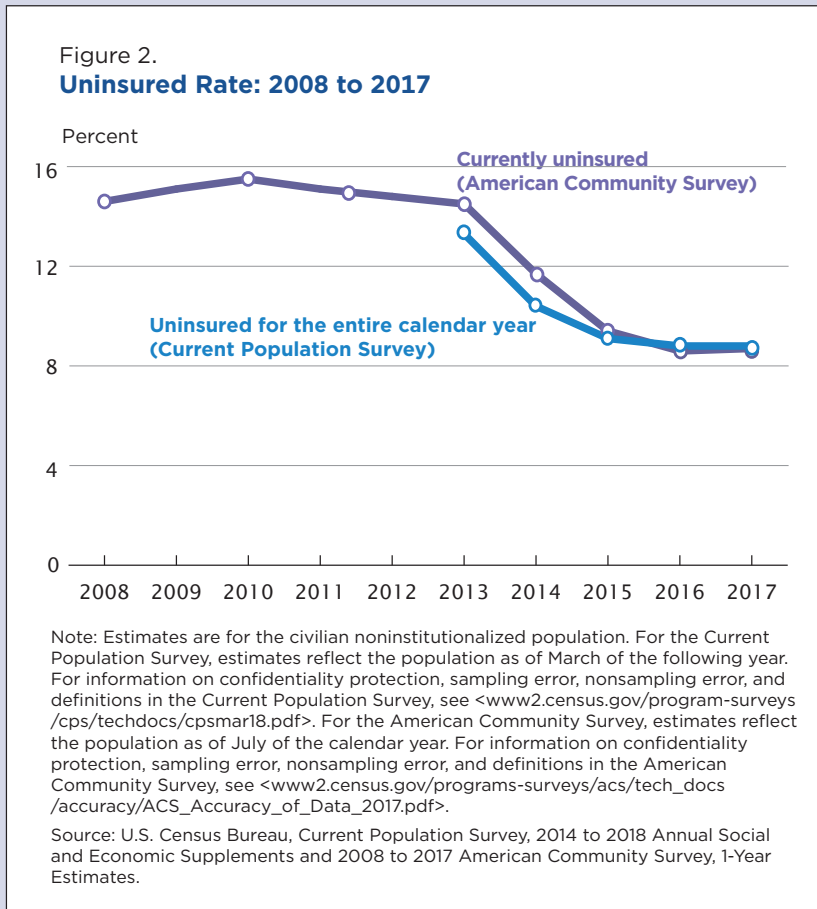
As a result of the difference in the collection of health insurance

coverage status, the resulting uninsured rates measure different concepts. The CPS ASEC uninsured rate represents the percentage of people who had no health insurance coverage at any time during the previous calendar year. The ACS uninsured rate is a measure of the percentage of people who were uninsured at the time of the interview.

As measured by the CPS ASEC, the uninsured rate was essentially unchanged between 2016 and 2017, at 8.8 percent. As measured by the ACS, the uninsured

rate increased by 0.2 percentage points from 8.6 percent in 2016 to 8.7 percent in 2017 (Figure 2).

Over a longer period, as measured by the ACS, uninsured rates remained relatively stable between 2008 and 2013, but decreased sharply by 2.8 percentage points between 2013 and 2014. Uninsured rates then decreased by 2.3 percentage points between 2014 and 2015 and 0.8 percentage points between 2015 and 2016. Between 2016 and 2017, the uninsured rate increased by 0.2 percentage points.



The percentage of people covered by any type of health insurance in 2017 was not statistically different from the percentage in 2016. The percentage of people covered by private health insurance or either of the two subtypes of private health insurance (employment-based and direct-purchase) also did not statistically change between 2016 and 2017.

Between 2016 and 2017, the percentage of people with government health insurance increased by 0.5 percentage points, to 37.7 percent in 2017 (Table 1).¹¹ Of the three subtypes of government health insurance, both military health care and Medicare coverage rates increased between 2016 and 2017. The percentage of people covered by military health care increased by 0.2 percentage points to 4.8 percent in 2017. The rate of Medicare coverage increased by

0.6 percentage points to 17.2 percent in 2017. This increase was partly due to growth in the number of people aged 65 and over.

Multiple Coverage Types

While most people have a single type of insurance, some people may have more than one type of coverage during the calendar year. They may have multiple types of coverage at one time to supplement their primary insurance type, or they may switch coverage types over the course of the year. Of the population with health insurance coverage in 2017, 77.8 percent had one coverage type during the year and 22.2 percent had multiple coverage types over the course of the year (Figure 3).

Some types of health insurance were more likely to be held alone, while other types of health insurance coverage were more likely to be held in combination with another type of insurance at some point during the

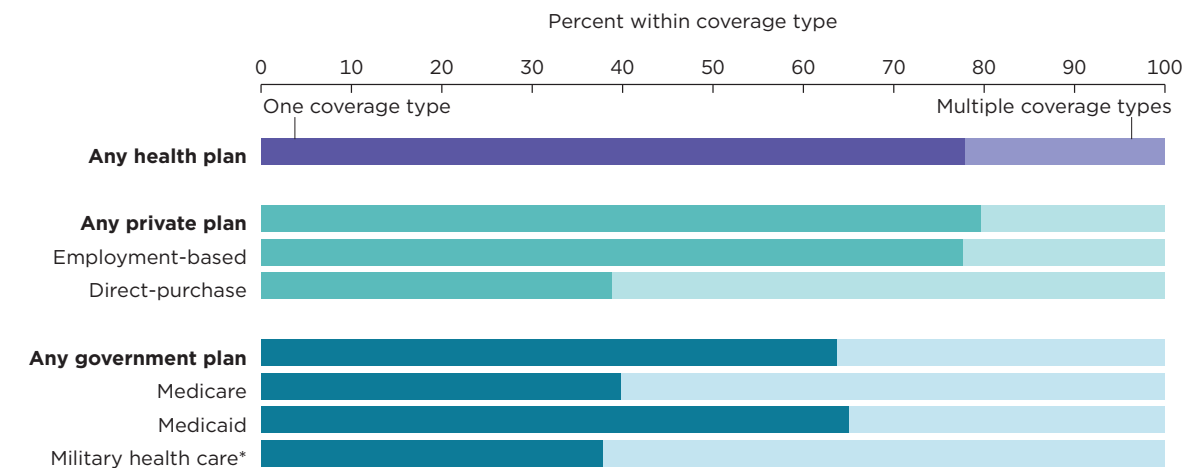
year. Most people with employer-based health insurance coverage or Medicaid coverage did not have more than one plan type. In 2017, only 22.4 percent of people with employer-sponsored coverage and 35.0 percent with Medicaid had multiple types of coverage.

In 2017, the majority of people covered by direct-purchase, Medicare, or military health care had some other type of health insurance during the year (61.2 percent, 60.2 percent, and 62.2 percent, respectively).¹²

¹² The percentage of people with direct-purchase coverage and another type of health insurance was not statistically different from the percentage of people with Medicare and another type of health insurance, or the percentage of people with military health care and another type of health insurance. The percentage of people with Medicare and another type of health insurance was not statistically different from the percentage of people with military health care and another type of health insurance.

¹¹ All comparative statements in this report have undergone statistical testing, and unless otherwise noted, all comparisons are statistically significant at the 10 percent level.

Figure 3. **Percentage With One or Multiple Coverage Types: 2017**
(Population as of March of the following year)



* Military health care includes TRICARE and CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military.

Note: For information on confidentiality protection, sampling error, nonsampling error, and definitions in the Current Population Survey, see <www2.census.gov/programs-surveys/cps/techdocs/cpsmar18.pdf>.

Source: U.S. Census Bureau, Current Population Survey, 2018 Annual Social and Economic Supplement.

Table 2. Percentage of People by Type of Health Insurance Coverage by Age: 2016 and 2017

(Numbers in thousands, margins of error in percentage points. Population as of March of the following year. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see www2.census.gov/programs-surveys/cps/techdocs/cpsmar18.pdf)

| Characteristic | Total | | | | | | | | | | | | | | | | | | | |
|----------------------------------------|----------------|-------------|----------------------------------|----------------|---------------------------------------|------------|----------------------------------|------------|------------------------------------------|------------|----------------------------------|-------------|----------------------------------|-------------|----------------------------------|------------|----------------------------------|------------|------------|------------|
| | 2016 | | 2017 | | Private health insurance ³ | | | | Government health insurance ⁴ | | | | Uninsured ⁵ | | | | | | | |
| | 2016 | | 2017 | | 2016 | | 2017 | | 2016 | | 2017 | | 2016 | | 2017 | | | | | |
| | Number | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | | | |
| Total | 320,372 | 91.2 | 0.2 | 323,156 | 91.2 | 0.4 | 67.5 | 0.4 | 67.2 | 0.4 | -0.3 | 37.3 | 0.3 | 37.7 | 0.3 | 8.8 | 0.2 | 8.8 | 0.2 | 0.1 |
| Age | | | | | | | | | | | | | | | | | | | | |
| Under the age of 65..... | 271,098 | 89.9 | 0.2 | 272,076 | 89.8 | 0.2 | 70.2 | 0.4 | 70.2 | 0.4 | Z | 27.0 | 0.4 | 27.2 | 0.4 | 10.1 | 0.2 | 10.2 | 0.2 | 0.1 |
| Under the age of 18..... | 74,047 | 94.7 | 0.3 | 73,963 | 94.7 | 0.3 | 62.7 | 0.6 | 63.0 | 0.6 | 0.3 | 41.9 | 0.6 | 42.3 | 0.7 | 5.3 | 0.3 | 5.3 | 0.3 | Z |
| Aged 18 to 64..... | 197,051 | 88.1 | 0.2 | 198,113 | 88.1 | 0.2 | 73.0 | 0.4 | 72.8 | 0.4 | -0.1 | 21.4 | 0.3 | 21.6 | 0.4 | 11.9 | 0.2 | 12.1 | 0.3 | 0.1 |
| Under the age of 19 ⁶ | 78,150 | 94.6 | 0.3 | 78,106 | 94.6 | 0.3 | 62.9 | 0.6 | 63.3 | 0.6 | 0.3 | 41.5 | 0.6 | 41.9 | 0.7 | 5.4 | 0.3 | 5.4 | 0.3 | Z |
| Aged 19 to 64..... | 192,948 | 87.9 | 0.2 | 193,971 | 87.9 | 0.2 | 73.1 | 0.4 | 72.9 | 0.4 | -0.2 | 21.1 | 0.3 | 21.3 | 0.4 | 12.1 | 0.2 | 12.2 | 0.3 | 0.1 |
| Aged 19 to 25 ⁷ | 29,815 | 86.9 | 0.6 | 29,922 | 86.9 | 0.6 | 71.3 | 0.8 | 70.2 | 0.9 | -1.1 | 23.1 | 0.8 | 23.4 | 0.8 | 13.1 | 0.6 | 14.0 | 0.7 | *0.9 |
| Aged 26 to 34..... | 39,736 | 84.3 | 0.6 | 40,152 | 84.3 | 0.6 | 69.7 | 0.7 | 69.9 | 0.8 | 0.2 | 20.4 | 0.6 | 20.3 | 0.7 | 15.7 | 0.6 | 15.6 | 0.6 | -0.1 |
| Aged 35 to 44..... | 40,046 | 86.9 | 0.5 | 40,659 | 86.9 | 0.5 | 73.3 | 0.7 | 73.6 | 0.7 | 0.2 | 19.3 | 0.6 | 19.2 | 0.6 | 13.1 | 0.5 | 13.3 | 0.5 | 0.2 |
| Aged 45 to 64..... | 83,351 | 90.6 | 0.3 | 83,237 | 90.6 | 0.3 | 75.2 | 0.5 | 75.1 | 0.5 | -0.1 | 21.7 | 0.5 | 22.1 | 0.5 | 9.4 | 0.3 | 9.3 | 0.3 | -0.1 |
| Aged 65 and older..... | 49,274 | 98.8 | 0.1 | 51,080 | 98.8 | 0.1 | 52.8 | 0.8 | 51.1 | 0.8 | *-1.6 | 93.6 | 0.3 | 93.7 | 0.3 | 1.2 | 0.1 | 1.3 | 0.1 | 0.1 |

* Changes between the estimates are statistically different from zero at the 90 percent confidence level.

Z Represents or rounds to zero.

¹ Details may not sum to totals because of rounding.

² A margin of error (MOE) is a measure of an estimate's variability. The larger the MOE in relation to the size of the estimate, the less reliable the estimate. This number, when added to and subtracted from the estimate, forms the 90 percent confidence interval. MOEs shown in this table are based on standard errors calculated using replicate weights. For more information, see "Standard Errors and Their Use" at www2.census.gov/library/publications/2018/demo/p60-264sa.pdf.

³ Private health insurance includes coverage provided through an employer or union, coverage purchased directly by an individual from an insurance company, or coverage through someone outside the household.

⁴ Government health insurance coverage includes Medicaid, Medicare, TRICARE, CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military.

⁵ Individuals are considered to be uninsured if they do not have health insurance coverage for the entire calendar year.

⁶ Children under the age of 19 are eligible for Medicaid/CHIP.

⁷ This age is of special interest because of the Affordable Care Act's dependent coverage provision. Individuals aged 19 to 25 years may be eligible to be a dependent on a parent's health insurance plan.

Note: The estimates by type of coverage are not mutually exclusive; people can be covered by more than one type of health insurance during the year.

Source: U.S. Census Bureau, Current Population Survey, 2017 and 2018 Annual Social and Economic Supplements.

Health Insurance Coverage by Selected Characteristics

Age

Age is strongly associated with the likelihood that a person has health insurance and the type of health insurance a person has. In 2017, adults aged 65 and over and children under 19 were more likely to have had health insurance coverage (98.7 percent and 94.6 percent, respectively) compared with adults aged 19 to 64 (87.8 percent) (Table 2).

Adults aged 65 and over had the highest rate of health insurance coverage in 2017 (98.7 percent), with 93.7 percent covered by a government plan (primarily Medicare) and 51.1 percent covered by a private plan, which may have supplemented their government coverage.

Between 2016 and 2017, the rate of private coverage for adults aged 65 and over decreased by 1.6 percentage points from 52.8 percent in 2016. The rates of overall health insurance coverage and government coverage did not statistically change between 2016 and 2017 for this age group.

In 2017, children under the age of 19 were more likely to be covered by health insurance than adults aged 19 to 64 (94.6 percent and 87.8 percent, respectively). One reason for this difference could be that children from lower income families may be eligible for programs such as Medicaid or the Children's Health Insurance Program (CHIP).

In 2017, 63.3 percent of children under the age of 19 had private health insurance and 41.9 percent had government coverage. Some children were covered by both private and government coverage during the calendar year. Between 2016 and 2017, there was no statistical change in the rates of overall health insurance coverage, private coverage, or

government coverage for this age group.¹³

Working-age adults (people aged 19 to 64) had a lower rate of health insurance coverage in 2017 (87.8 percent) than both children and older adults.

Among working-age adults, the population aged 26 to 34 was the least likely to be insured, with a coverage rate of 84.4 percent. A higher percentage of adults aged 19 to 25 were insured (86.0 percent) than adults 26 to 34. For age groups between 26 and 64, the rate of health insurance coverage increased as age increased.¹⁴

Working-age adults were more likely than other age groups to be covered by private health insurance, with 72.9 percent of the population aged 19 to 64 having private insurance coverage in 2017. They also had a lower rate of government coverage than children under the age of 19 and adults aged 65 and over, at 21.3 percent.

Between 2016 and 2017, the percentage of adults aged 19 to 25 with any health insurance decreased by 0.9 percentage points to 86.0 percent. No other age group experienced a statistically significant change in their health insurance coverage rate during this time.

The ACS, which has a larger sample size than the CPS ASEC, provides an estimate of health insurance coverage at the time of the interview. The larger sample size offers an opportunity to look at coverage rates for

smaller groups, such as single years of age (Figure 4).¹⁵

Examining age across childhood and young adulthood, uninsured rates in 2017 were generally lower for children than for young adults, from 3.5 percent for infants to 17.8 percent for 26-year-olds. Two sharp differences existed between single-year ages. The percentage of 19-year-olds without coverage (13.2 percent) was 4.6 percentage points higher than the percentage for people 1 year younger. Likewise, the uninsured rate for 26-year-olds, the highest among all single years of age in 2017, was distinctly higher than for 25-year-olds (17.8 percent and 14.9 percent, respectively).

From ages 26 to 64, the uninsured rate generally declined with age. Between the ages of 64 and 65, the uninsured rate then decreased 4.9 percentage points. In 2017, 6.6 percent of 64-year-olds and 1.6 percent of 65-year-olds did not have health insurance coverage. For adults aged 65 and over, the uninsured rate varied little by age.

Between 2016 and 2017, the percentage of people without health insurance coverage at the time of interview did not statistically change for most single years of age. However, for children under the age of 19 and working-age adults between 50 and 59, the uninsured rate increased across multiple single years of age.

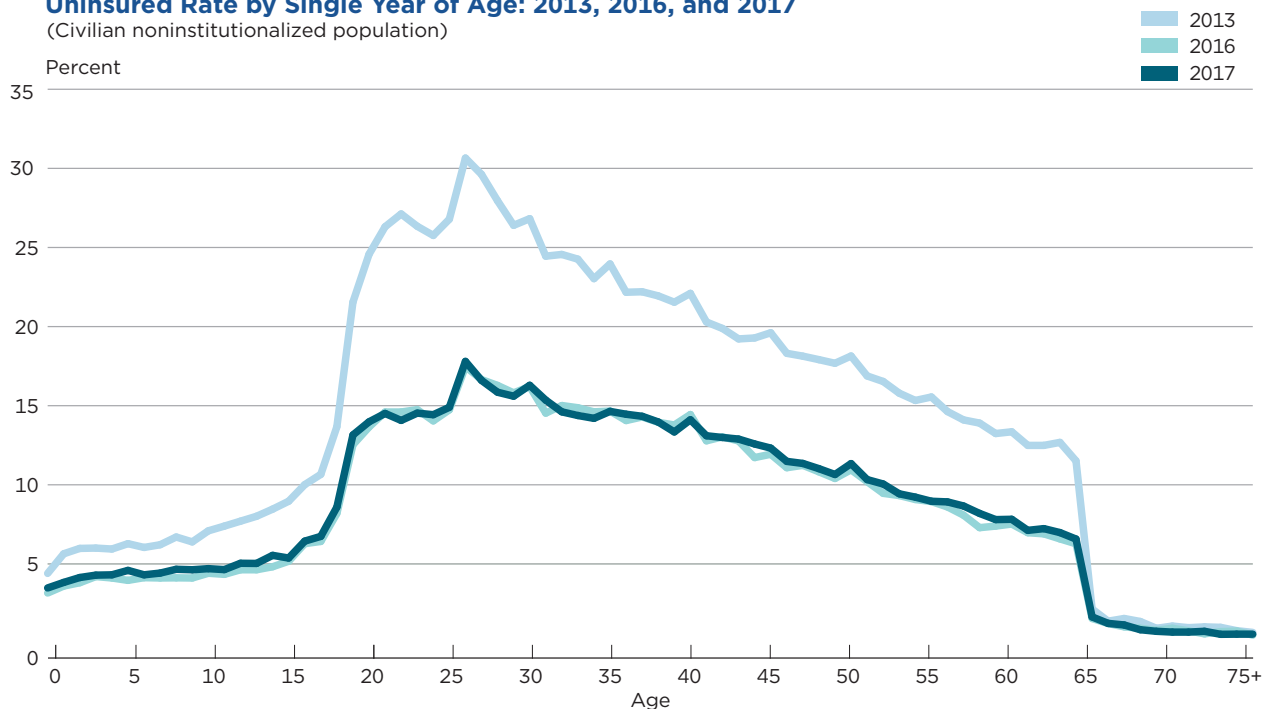
Between 2013 and 2017, uninsured rates fell for all single-year ages under the age of 65, with the largest declines of about 12.0 percentage points for each age between 21 and 28. An uneven downward shift in

¹³ The Children's Health Insurance Program (CHIP) is a government program that provides health insurance to children in families with income too high to qualify for Medicaid, but who are unable to afford private health insurance.

¹⁴ In 2017, the health insurance coverage rate for people aged 19 to 25 was not statistically different from the coverage rate for people aged 35 to 44.

¹⁵ These estimates and estimates in the remainder of this section come from the 2013, 2016, and 2017 American Community Survey, 1-year estimates. In the ACS, health insurance coverage status corresponds to coverage at the time of the interview (see the text box "Two Measures of Health Insurance Coverage").

Figure 4.
Uninsured Rate by Single Year of Age: 2013, 2016, and 2017
 (Civilian noninstitutionalized population)



For information on confidentiality protection, sampling error, nonsampling error, and definitions in the American Community Survey, see <www2.census.gov/programs-surveys/acs/tech_docs/accuracy/ACS_Accuracy_of_Data_2017.pdf>. Source: U.S. Census Bureau, 2013, 2016, and 2017 American Community Surveys, 1-Year Estimates.

uninsured rates reduced some of the age-specific disparities. However, in 2017, three notable sharp differences remained between single-year ages, specifically between 18- and 19-year-olds, between 25- and 26-year-olds, and between 64- and 65-year-olds.

Marital Status

Many adults obtain health insurance coverage through their spouse. In 2017, married adults aged 19 to 64 had the highest coverage rate, at 90.9 percent (Table 3).¹⁶ The coverage rate was lowest for people who were separated (79.7 percent). Of people who were never married, 84.0 percent were covered by health insurance. The coverage rates for people

¹⁶ All estimates by marital status are for the population aged 19 to 64.

who were widowed or divorced were 86.6 percent and 86.4 percent, respectively.¹⁷

Between 2016 and 2017, none of the marital status groups had a statistically significant change in their rate of overall coverage.

Disability Status

Adults with a disability had a higher rate of health insurance coverage (91.2 percent) than adults with no disability (87.5 percent) in 2017 (Table 3).¹⁸

Adults with a disability were less likely than adults with no disability

¹⁷ In 2017, the coverage rate of people who were widowed was not statistically different from the coverage rate of people who were divorced.

¹⁸ All estimates by disability status are for the population aged 19 to 64.

to have private health insurance coverage and more likely to have government coverage. In 2017, 44.8 percent of adults with a disability had private coverage, compared with 75.5 percent of adults with no disability, a 30.7 percentage-point difference. At the same time, 57.8 percent of adults with a disability and 17.8 percent with no disability had government coverage, a 39.9 percentage-point difference.

Between 2016 and 2017, neither the population with a disability nor the population with no disability had statistically significant changes in their rates of overall coverage, private coverage, or government coverage.

Table 3. Percentage of People by Type of Health Insurance Coverage for Working-Age Adults Aged 19 to 64: 2016 and 2017

(Numbers in thousands, margins of error in percentage points. Population as of March of the following year. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see www2.census.gov/programs-surveys/cps/techdocs/cpsmar16.pdf)

| Characteristic | Total | | | | | | | | | | | | | | |
|--------------------------------------------------|----------------|-------------|----------------------------------|-------------|---------------------------------------|-------------|------------------------------------------|-------------|----------------------------------|-------------|----------------------------------|------------|----------------------------------|------------|----------------------------------|
| | 2016 | | 2017 | | Private health insurance ³ | | Government health insurance ⁴ | | Uninsured ⁵ | | 2016 | | 2017 | | |
| | Number | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) | Per- cent | Margin of error ² (±) |
| | | | | | | | | | | | | | | | |
| Total | 320,372 | 91.2 | 0.2 | 91.2 | 0.2 | 67.5 | 0.4 | 37.3 | 0.3 | 37.7 | 0.3 | 8.8 | 0.2 | 8.8 | 0.2 |
| Total, 19 to 64 years old..... | 192,948 | 87.9 | 0.2 | 87.8 | 0.3 | 73.1 | 0.4 | 21.1 | 0.3 | 21.3 | 0.4 | 12.1 | 0.2 | 12.2 | 0.3 |
| Marital Status | | | | | | | | | | | | | | | |
| Married ⁶ | 101,822 | 91.2 | 0.3 | 90.9 | 0.3 | 80.1 | 0.5 | 17.9 | 0.4 | 18.3 | 0.4 | 8.8 | 0.3 | 9.1 | 0.3 |
| Widowed..... | 3,633 | 86.1 | 1.6 | 86.6 | 1.6 | 58.7 | 2.0 | 33.5 | 2.2 | 36.0 | 2.2 | 13.9 | 1.6 | 13.4 | 1.6 |
| Divorced..... | 19,460 | 86.1 | 0.6 | 86.4 | 0.7 | 64.3 | 1.0 | 26.8 | 0.9 | 26.3 | 0.9 | 13.9 | 0.6 | 13.6 | 0.7 |
| Separated..... | 4,495 | 80.8 | 1.5 | 79.7 | 1.7 | 55.9 | 1.9 | 31.0 | 1.8 | 29.9 | 1.8 | 19.2 | 1.5 | 20.3 | 1.7 |
| Never married..... | 63,537 | 84.0 | 0.5 | 84.0 | 0.4 | 66.5 | 0.7 | 23.2 | 0.6 | 23.1 | 0.5 | 16.0 | 0.5 | 16.0 | 0.4 |
| Disability Status⁷ | | | | | | | | | | | | | | | |
| With a disability..... | 15,248 | 91.2 | 0.7 | 91.2 | 0.7 | 43.5 | 1.2 | 58.6 | 1.1 | 57.8 | 1.2 | 8.8 | 0.7 | 8.8 | 0.7 |
| With no disability..... | 176,842 | 87.6 | 0.2 | 87.5 | 0.3 | 75.9 | 0.4 | 17.5 | 0.3 | 17.8 | 0.3 | 12.4 | 0.2 | 12.5 | 0.3 |
| Work Experience | | | | | | | | | | | | | | | |
| All workers..... | 149,105 | 88.8 | 0.3 | 88.7 | 0.3 | 80.1 | 0.3 | 13.9 | 0.3 | 14.0 | 0.3 | 11.2 | 0.3 | 11.3 | 0.3 |
| Worked full-time, year-round..... | 107,577 | 90.2 | 0.3 | 90.2 | 0.3 | 84.5 | 0.3 | 10.4 | 0.3 | 10.9 | 0.3 | 9.8 | 0.3 | 9.8 | 0.3 |
| Worked less than full-time, year-round..... | 41,528 | 85.2 | 0.5 | 84.6 | 0.6 | 69.0 | 0.6 | 23.1 | 0.6 | 22.4 | 0.6 | 14.8 | 0.5 | 15.4 | 0.6 |
| Did not work at least 1 week..... | 43,843 | 85.0 | 0.5 | 84.9 | 0.5 | 49.1 | 0.8 | 45.6 | 0.7 | 46.5 | 0.9 | 15.0 | 0.5 | 15.1 | 0.5 |
| Educational Attainment | | | | | | | | | | | | | | | |
| Total, 26 to 64 years old..... | 163,133 | 88.1 | 0.2 | 88.1 | 0.3 | 73.4 | 0.4 | 20.8 | 0.3 | 20.9 | 0.4 | 11.9 | 0.2 | 11.9 | 0.3 |
| No high school diploma..... | 15,389 | 72.7 | 1.1 | 73.7 | 1.1 | 40.9 | 1.1 | 37.7 | 1.1 | 37.5 | 1.2 | 27.3 | 1.1 | 26.3 | 1.1 |
| High school graduate (includes equivalency)..... | 45,401 | 84.8 | 0.5 | 84.5 | 0.5 | 65.0 | 0.7 | 26.3 | 0.6 | 26.3 | 0.6 | 15.2 | 0.5 | 15.5 | 0.5 |
| Some college, no degree..... | 26,594 | 88.4 | 0.5 | 88.0 | 0.5 | 71.8 | 0.8 | 19.5 | 0.8 | 19.5 | 0.8 | 11.6 | 0.5 | 12.0 | 0.5 |
| Associate's degree..... | 17,759 | 90.7 | 0.6 | 90.5 | 0.7 | 77.9 | 0.9 | 19.5 | 0.8 | 19.5 | 0.8 | 9.3 | 0.6 | 9.5 | 0.7 |
| Bachelor's degree..... | 36,528 | 93.2 | 0.4 | 92.8 | 0.4 | 86.8 | 0.5 | 11.6 | 0.4 | 12.4 | 0.5 | 6.8 | 0.4 | 7.2 | 0.4 |
| Graduate or professional degree..... | 21,482 | 95.2 | 0.4 | 95.8 | 0.4 | 90.0 | 0.6 | 9.8 | 0.6 | 10.3 | 0.6 | 4.8 | 0.4 | 4.2 | 0.4 |

* Changes between the estimates are statistically different from zero at the 90 percent confidence level.
 † Details may not sum to totals because of rounding.
² A margin of error (MOE) is a measure of an estimate's variability. The larger the MOE in relation to the size of the estimate, the less reliable the estimate. This number, when added to and subtracted from the estimate, forms the 90 percent confidence interval. MOEs shown in this table are based on standard errors calculated using replicate weights. For more information, see "Standard Errors and Their Use" at <www2.census.gov/library/publications/2018/demo/p60-264sa.pdf>.
³ Private health insurance includes coverage provided through an employer or union, coverage purchased directly by an individual from an insurance company, or coverage through someone outside the household.
⁴ Government health insurance coverage includes Medicaid, Medicare, TRICARE, CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs and the military.
⁵ Individuals are considered to be uninsured if they do not have health insurance coverage for the entire calendar year.
⁶ The combined category "married" includes three individual categories: "married, civilian spouse present," "married, armed forces spouse present," and "married, spouse absent."
⁷ The sum of those with and without a disability does not equal the total because disability status is not defined for individuals in the armed forces.
 Note: The estimates by type of coverage are not mutually exclusive; people can be covered by more than one type of health insurance during the year.
 Source: U.S. Census Bureau, Current Population Survey, 2017 and 2018 Annual Social and Economic Supplements.