



Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, January–March 2013

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Highlights

- In the first 3 months of 2013, 46.0 million persons of all ages (14.8%) were uninsured at the time of interview, 57.4 million (18.5%) had been uninsured for at least part of the year prior to interview, and 34.5 million (11.1%) had been uninsured for more than a year at the time of interview.
- In the first 3 months of 2013, 5.2 million (7.1%) children under age 18 were uninsured at the time of interview.
- Among adults aged 19–25, the percentage uninsured at the time of interview was 26.7% (8.2 million) in the first 3 months of 2013.
- For all age groups, there were no significant changes between 2012 and the first 3 months of 2013 in the percentage of persons uninsured at the time of interview.
- In the first 3 months of 2013, among persons under age 65, 17.1% were uninsured at the time of interview, 23.9% had public health plan coverage, and 60.3% had private health insurance coverage.
- In the first 3 months of 2013, 32.5% of persons under age 65 with private health insurance at the time of interview were enrolled in a high-deductible health plan (HDHP), including 10.9% who were enrolled in a consumer-directed health plan (CDHP).
- An estimated 22.8% of persons with private health insurance were in a family with a flexible spending account (FSA) for medical expenses.

releasing selected estimates of health insurance coverage for the civilian noninstitutionalized U.S. population based on data from the 2013 National Health Interview Survey (NHIS), along with comparable estimates from the 2008–2012 NHIS. Estimates for January–March 2013 were based on data for 24,658 persons.

Three estimates of lack of health insurance coverage are provided: (a) uninsured at the time of interview, (b) uninsured at least part of the year prior to interview (which includes persons uninsured for more than a year), and (c) uninsured for more than a year at the time of interview (e.g., [Tables 1 and 2](#)). Estimates of public and private coverage are also presented (e.g., [Table 3](#)). [Table 3](#) also includes estimates for 1997 and 2005.

For this report, several tables have been modified from previous reports. These tables present estimates of uninsured, public coverage, and private coverage by poverty status for persons under age 65 ([Table 4](#)), adults aged 18–64 ([Table 5](#)), and children aged 0–17 ([Table 6](#)). [Table 7](#) shows the percentages of persons who were uninsured, had public coverage, and had private coverage, by age and sex. Estimates for persons under age 65, by race and ethnicity, are shown in [Table 8](#). [Table 9](#) presents estimates for adults aged 18–64 by other selected demographic characteristics that are relevant to adults only.

For individuals with private health insurance, estimates are presented in [Tables 10 and 11](#) for enrollment in high-deductible health

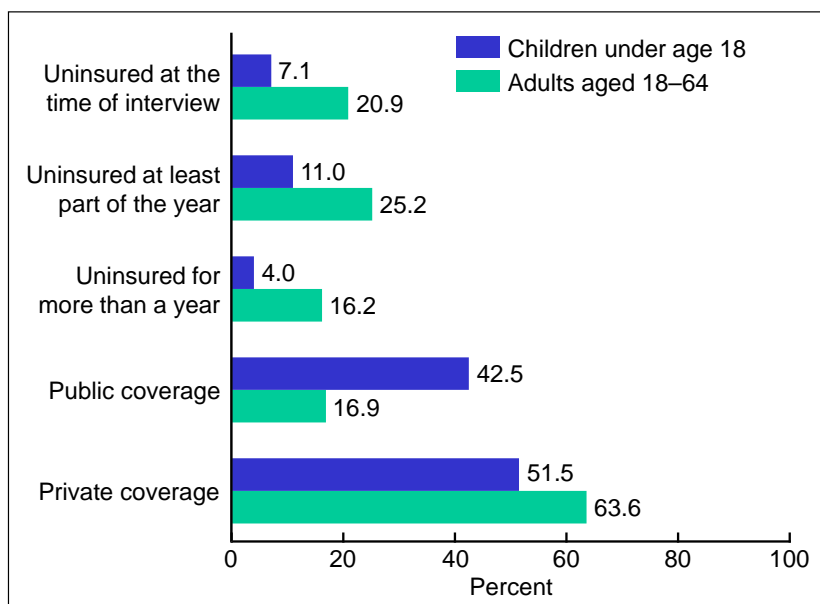


Figure 1. Percentage of persons without health insurance, by three measurements and age group, and percentage of persons with health insurance at the time of interview, by coverage type and age group: United States, January–March 2013

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2013, Family Core component.

Introduction

The Centers for Disease Control and Prevention’s (CDC) National Center for Health Statistics (NCHS) is



plans (HDHPs), enrollment in consumer-directed health plans (CDHPs), and being in a family with a flexible spending account (FSA) for medical expenses.

This report is updated quarterly and is part of the NHIS Early Release (ER) Program, which releases updated selected estimates that are available from the NHIS website at:

<http://www.cdc.gov/nchs/nhis.htm>.

For more information about NHIS and the ER Program, see the **Technical Notes** and the **Additional Early Release Program Products** sections at the end of this report.

Results

Lack of health insurance coverage

In the first 3 months of 2013, the percentage of persons uninsured at the time of interview was 14.8% (46.0 million) for persons of all ages, 17.1% (45.7 million) for persons under age 65, 7.1% (5.2 million) for children aged 0–17, 20.9% (40.5 million) for adults aged 18–64, and 26.7% (8.2 million) for adults aged 19–25 (Tables 1 and 2). For all age groups, there were no significant changes between 2012 and the first 3 months of 2013 in the percentage of persons uninsured at the time of interview.

The percentage of persons uninsured for at least part of the year was 18.5% (57.4 million) for persons of all ages, based on data from the first 3 months of 2013 (Tables 1 and 2). Adults aged 18–64 were more than twice as likely (25.2%) as children (11.0%) to experience this lack of coverage (Figure 1). Among adults aged 19–25, 31.4% had been uninsured for at least part of the past year. For all age groups, there were no significant changes between 2012 and the first 3 months of 2013 in the percentage of persons who were uninsured for at least part of the year prior to interview.

Regarding persistent lack of coverage, 12.9% (34.3 million) of persons under age 65 had been uninsured for more than a year (Tables 1 and 2). Adults aged 18–64 (16.2%) were more than four times as likely as

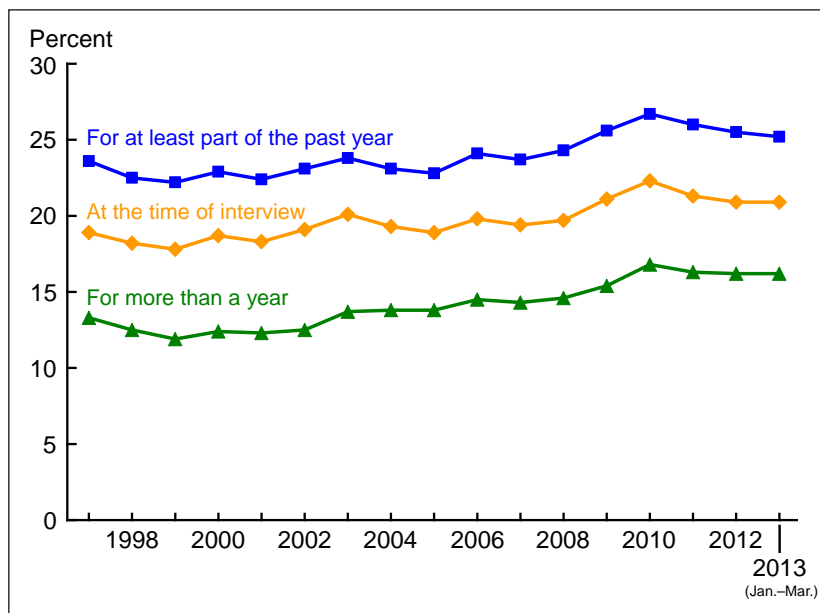


Figure 2. Percentages of adults aged 18–64 who lacked health insurance coverage at the time of interview, for at least part of the past year, or for more than a year: United States, 1997–March 2013

NOTE: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997–2013, Family Core component.

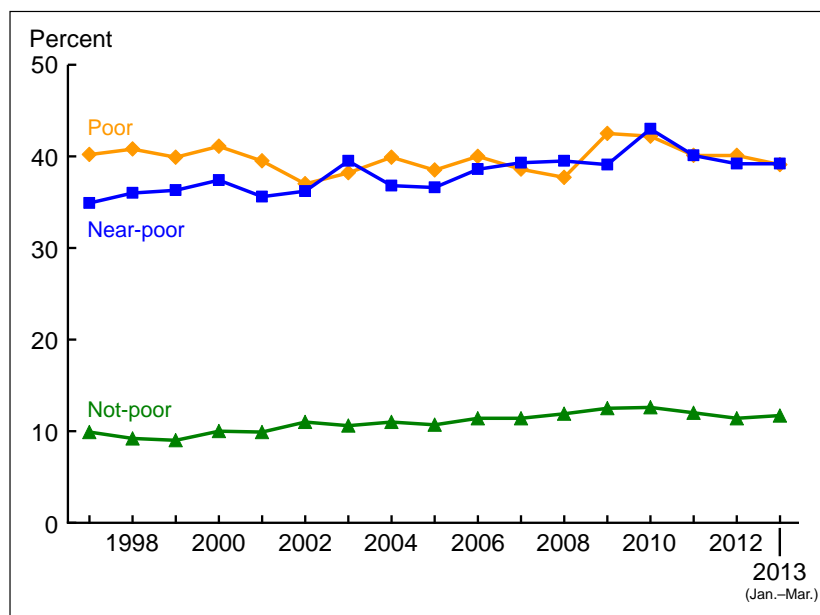


Figure 3. Percentage of adults aged 18–64 who were uninsured at the time of interview, by poverty status: United States, 1997–March 2013

NOTE: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997–2013, Family Core component.



children (4.0%) to have been uninsured for more than a year (Figure 1). Among adults aged 19–25, the percentage uninsured for more than a year was 19.6% (Table 1). For all age groups, there were no significant changes between 2012 and the first 3 months of 2013 in the percentage of persons who had been uninsured for more than a year.

Among adults aged 18–64, between 1997 and the first 3 months of 2013, there has been a generally increasing trend in the percentage who were uninsured at the time of interview, who lacked coverage for at least part of the past year, and who had been uninsured for more than a year (Figure 2).

Among children aged 0–17, the percentage who were uninsured at the time of interview decreased from 13.9% in 1997 to 7.1% in the first 3 months of 2013 (Table 1).

Public and private coverage

In the first 3 months of 2013, 23.9% of persons under age 65 were covered by public health plans at the time of interview (Table 3). More than two-fifths of children (42.5%) were covered by a public plan, compared with 16.9% of adults aged 18–64 (Figure 1). Public coverage among adults aged 19–25 was 17.3% (Table 3). For all age groups, there were no significant changes in public coverage between 2012 and the first 3 months of 2013.

Among adults aged 18–64, there was an increase in public coverage between 1997 (10.2%) and the first three months of 2013 (16.9%) (Table 3). Among children, the percentage with public coverage doubled between 1997 (21.4%) and the first three months of 2013 (42.5%).

Among persons under age 65, 60.3% were covered by private health insurance plans at the time of interview (Table 3). Slightly less than two-thirds (63.6%) of adults aged 18–64 were covered by a private plan, compared with 51.5% of children under age 18 (Figure 1). Among adults aged 19–25, 56.9% were covered by a private plan. For all age groups, there were no

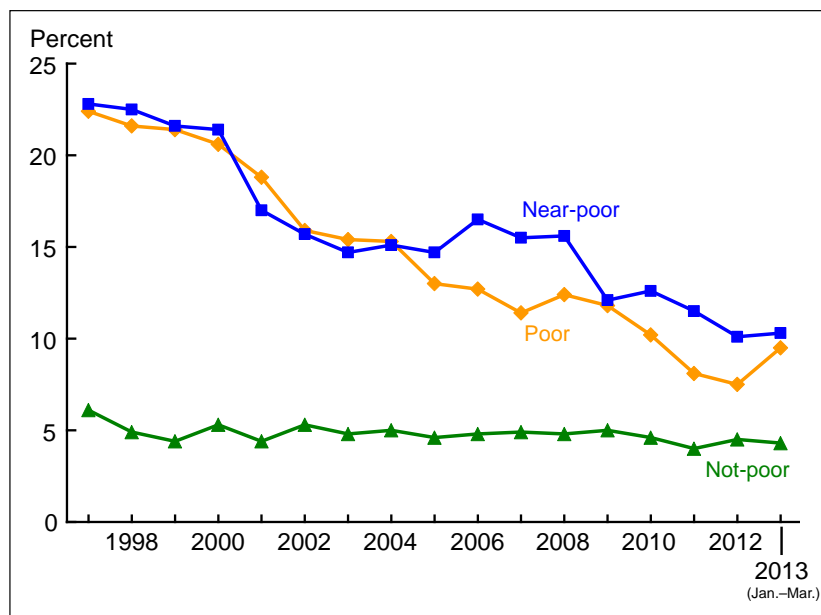


Figure 4. Percentage of children under age 18 who were uninsured at the time of interview, by poverty status: United States, 1997–March 2013

NOTE: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997–2013, Family Core component.

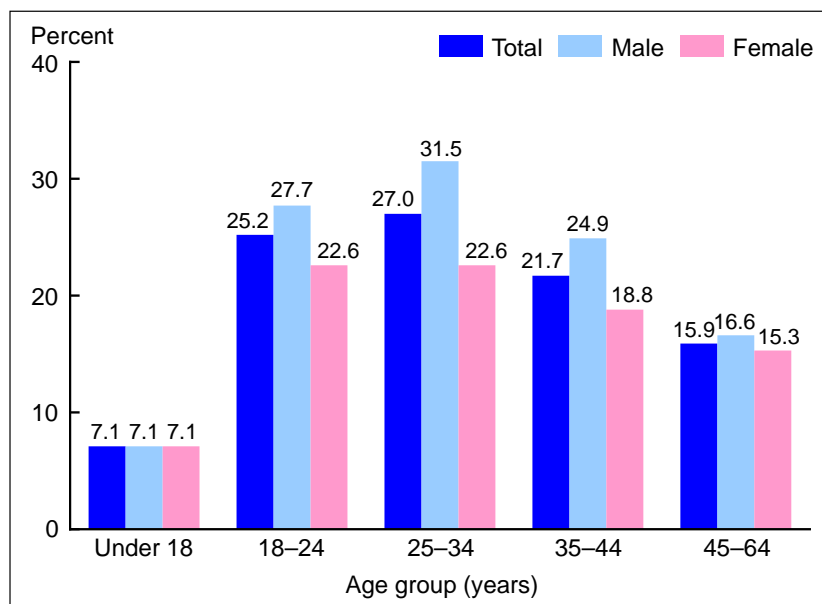


Figure 5. Percentage of persons under age 65 without health insurance coverage at the time of interview, by age group and sex: United States, January–March 2013

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2013, Family Core component.



significant changes in private coverage between 2012 and the first 3 months of 2013.

The percentage with private coverage decreased among persons under age 65 between 1997 and the first 3 months of 2013 ([Table 3](#)). Among adults aged 18–64, private coverage decreased 9.2 percentage points between 1997 (72.8%) and the first 3 months of 2013 (63.6%). Among children, private coverage decreased almost 15 percentage points between 1997 (66.2%) and the first 3 months of 2013 (51.5%).

Insurance coverage, by poverty status

In the first 3 months of 2013, 27.9% of poor, 29.7% of near-poor, and 9.9% of not-poor persons under age 65 did not have health insurance coverage at the time of interview ([Table 4](#); see [Technical Notes](#) for a definition of poverty status). During the same period, 58.6% of poor, 40.8% of near-poor, and 9.7% of not-poor persons under age 65 were on public coverage. Private coverage among persons under age 65 was highest among persons who were not poor (81.7%) and lowest among those who were poor (14.4%).

Among persons under age 65 who were poor, near-poor, or not-poor, there was no significant change in the percentage who were uninsured between 2012 and the first 3 months of 2013 ([Table 4](#)). However, among persons under age 65 who were near-poor, there was a significant increase in the percentage with public coverage, from 37.1% in 2012 to 40.8% in the first 3 months of 2013. During this time period, there was a corresponding decrease in private coverage from 35.2% to 31.0%. Additionally during this same time period, among persons under age 65 who were poor or not-poor, there were no significant changes in the percentage who had public coverage or private coverage.

Among adults aged 18–64, 39.1% of poor, 39.2% of near-poor, and 11.7% of not-poor adults did not have health insurance coverage at the time of interview ([Table 5](#)). During the

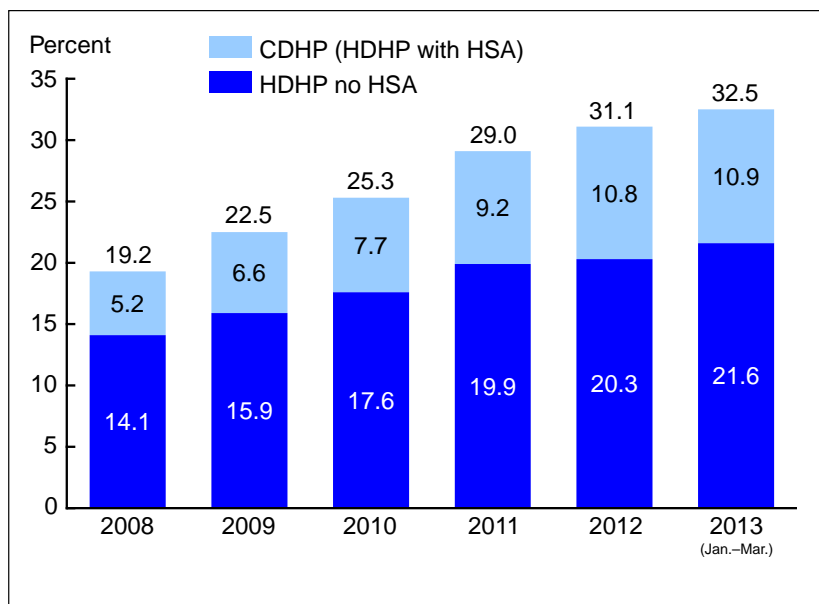


Figure 6. Percentages of persons under age 65 who are enrolled in a high-deductible health plan without a health savings account, or in a consumer-directed health plan, among those with private health insurance coverage: United States, 2008–March 2013

NOTES: CDHP is consumer-directed health plan, which is a high-deductible health plan (HDHP) with a health savings account (HSA). HDHP no HSA is a high-deductible health plan without an HSA. The individual components of HDHPs may not add up to the total, due to rounding. Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.

same period, 42.4% of poor, 28.4% of near-poor, and 8.1% of not-poor adults aged 18–64 were on public coverage. Private coverage among adults aged 18–64 was highest among persons who were not poor (81.7%) and lowest among those who were poor (19.5%).

Among adults aged 18–64 who were poor, near-poor, or not-poor, there were no significant change in the percentage who were uninsured between 2012 and the first 3 months of 2013 ([Table 5](#)). However, among adults aged 18–64 who were near-poor, there was a significant increase in the percentage with public coverage, from 25.2% in 2012 to 28.4% in the first 3 months of 2013. During this time period, there was a corresponding decrease in private coverage from 37.2% to 33.8%. During the same period, among adults aged 18–64 who were poor or not-poor, there were no significant changes in the percentage who had public coverage or private coverage.

From 1997 through March 2013, the percentage of poor adults aged 18–64 who were uninsured from 1997 through March 2013 remained relatively stable ([Figure 3](#)). However, among near-poor and not-poor adults aged 18–64 there has been a generally increasing trend between 1997 and the first 3 months of 2013 in those who were uninsured.

Among children aged 0–17, 9.5% of poor, 10.3% of near-poor, and 4.3% of not-poor children did not have health insurance coverage at the time of interview ([Table 6](#)). During the same period, 85.5% of poor, 66.3% of near-poor, and 15.0% of not-poor children were on public coverage. Private coverage among children was highest among persons who were not poor (81.7%) and lowest among those who were poor (6.1%).

Among children who were poor, near-poor, or not-poor, there were no significant changes in the percentage who were uninsured between 2012 and



the first 3 months of 2013 ([Table 6](#)). However, among children who were poor, there was a significant decrease in private coverage, from 8.8% in 2012 to 6.1% in the first 3 months of 2013. Among children who were near-poor, there was a significant increase in the percentage with public coverage, from 61.0% in 2012 to 66.3% in the first 3 months of 2013. There was a corresponding decrease in private coverage, from 31.1% to 25.3%. For children who were not poor, there were no significant differences in the percentages who were uninsured, had public coverage, or had public coverage between 2012 and the first 3 months of 2013.

The percentage of poor and not-poor children who were uninsured at the time of interview decreased from 1997 through the first 3 months of 2013 ([Figure 4](#)). However, the percentage of near-poor children who were uninsured at the time of interview decreased from 1997 to 2003, remained relatively stable from 2003 to 2007, and then decreased from 2007 through the first 3 months of 2013.

Health insurance coverage, by selected demographic characteristics

Age and sex

Based on data from the first 3 months of 2013, adults aged 25–34 were the most likely to lack health insurance coverage at the time of interview (27.0%) ([Table 7](#)). Among persons under age 65, children aged 0–17 were the most likely to have public coverage (42.5%) and adults aged 45–64 were the most likely to have private coverage. Among adults in age groups 18–24, 25–34, and 35–44, men were more likely than women to lack health insurance coverage at the time of interview ([Figure 5](#)).

Race/ethnicity

In the first 3 months of 2013, among persons under age 65, 30.8% of Hispanic, 19.8% of non-Hispanic black, 12.9% of non-Hispanic white, and 12.5% of non-Hispanic Asian persons were uninsured ([Table 8](#)).

Private coverage was highest among those who were non-Hispanic white (70.7%) and non-Hispanic Asian (72.5%). Public coverage was highest among those who were non-Hispanic black (36.0%). For all race/ethnicity groups, there were no significant changes in coverage between 2012 and the first three months of 2013.

Other demographic characteristics

Based on data from the January–March 2013 NHIS, lack of health insurance coverage among adults aged 18–64 was greatest in the South (24.8%) and West (23.4%) regions of the United States ([Table 9](#)). The highest rate of public coverage was in the Northeast (19.8%), and the highest rates of private coverage were in the Northeast (66.7%) and Midwest (67.9%) regions.

Among adults 18–64 who lacked a high school diploma, 42.6% were uninsured at the time of interview ([Table 9](#)). This rate is three times higher than for those with more than a high school education. Public health plan coverage was highest among those who lacked a high school diploma (30.5%) and lowest among those with more than a high school education (12.3%). Private coverage was highest among those who had more than a high school education (75.2%) and lowest among those who lacked a high school diploma (28.0%).

Among currently unemployed adults aged 18–64, 49.6% lacked coverage at the time of interview ([Table 9](#)). Among employed adults in the same age group, 18.7% were uninsured. Public health plan coverage was lowest among employed adults (8.5%) and highest among those who were not in the workforce (40.7%). Among employed adults, 73.5% had private coverage. This rate is three times as high as for those who were unemployed.

Married adults aged 18–64 were less likely to be uninsured than those who were divorced, separated, living with a partner, or never married. Married adults were also more likely than other marital groups to have private health coverage.

Estimates of enrollment in HDHPs, CDHPs, and FSAs

Based on data from the January–March 2013 NHIS, 32.5% of persons under age 65 with private health insurance were enrolled in an HDHP, including 10.9% who were enrolled in a CDHP [an HDHP with a health savings account (HSA)] and 21.6% who were enrolled in an HDHP without an HSA ([Figure 6](#) and [Table 10](#)). (See [Technical Notes](#) for definitions of HDHP, CDHP, and HSA.) There was no significant change in enrollment in HDHPs or CDHPs between 2012 and the first 3 months of 2013.

HDHPs constitute a growing share of both employment-based and directly purchased health plans. Based on data from the first 3 months of 2013, among persons under age 65 with private health insurance, 30.3% with employment-based coverage were enrolled in an HDHP ([Table 11](#)). Among persons under age 65, 57.8% with directly purchased private health plans were enrolled in an HDHP.

In the first 3 months of 2013, among persons under age 65 with private health insurance, 22.8% were in a family that had an FSA for medical expenses ([Table 10](#)). (See [Technical Notes](#) for definition of FSA.)

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Table 1. Percentages of persons who lacked health insurance coverage at the time of interview, for at least part of the past year, and for more than a year, by age group and year: United States, 2008–March 2013

| Age group and year | Uninsured ¹ at the time of interview | Uninsured ¹ for at least part of the past year ² | Uninsured ¹ for more than a year ² |
|--------------------------|---|--|--|
| Percent (standard error) | | | |
| All ages | | | |
| 2008 | 14.7 (0.32) | 18.7 (0.33) | 10.6 (0.26) |
| 2009 | 15.4 (0.30) | 19.4 (0.32) | 10.9 (0.26) |
| 2010 | 16.0 (0.27) | 19.8 (0.29) | 11.7 (0.22) |
| 2011 | 15.1 (0.25) | 19.2 (0.29) | 11.2 (0.21) |
| 2012 | 14.7 (0.23) | 18.6 (0.27) | 11.1 (0.22) |
| 2013 (Jan.–Mar.) | 14.8 (0.46) | 18.5 (0.51) | 11.1 (0.42) |
| Under 65 years | | | |
| 2008 | 16.7 (0.36) | 21.2 (0.37) | 12.0 (0.29) |
| 2009 | 17.5 (0.34) | 22.0 (0.36) | 12.4 (0.29) |
| 2010 | 18.2 (0.30) | 22.5 (0.33) | 13.3 (0.24) |
| 2011 | 17.3 (0.29) | 21.8 (0.33) | 12.7 (0.25) |
| 2012 | 16.9 (0.27) | 21.3 (0.31) | 12.7 (0.24) |
| 2013 (Jan.–Mar.) | 17.1 (0.53) | 21.3 (0.58) | 12.9 (0.48) |
| 0–17 years | | | |
| 2008 | 8.9 (0.43) | 13.3 (0.49) | 5.6 (0.35) |
| 2009 | 8.2 (0.40) | 12.8 (0.47) | 4.8 (0.31) |
| 2010 | 7.8 (0.32) | 11.6 (0.37) | 4.5 (0.23) |
| 2011 | 7.0 (0.27) | 10.9 (0.36) | 3.7 (0.19) |
| 2012 | 6.6 (0.27) | 10.4 (0.35) | 3.7 (0.19) |
| 2013 (Jan.–Mar.) | 7.1 (0.52) | 11.0 (0.65) | 4.0 (0.42) |
| 18–64 years | | | |
| 2008 | 19.7 (0.40) | 24.3 (0.40) | 14.6 (0.34) |
| 2009 | 21.1 (0.37) | 25.6 (0.38) | 15.4 (0.34) |
| 2010 | 22.3 (0.35) | 26.7 (0.37) | 16.8 (0.30) |
| 2011 | 21.3 (0.34) | 26.0 (0.37) | 16.3 (0.31) |
| 2012 | 20.9 (0.31) | 25.5 (0.34) | 16.2 (0.29) |
| 2013 (Jan.–Mar.) | 20.9 (0.64) | 25.2 (0.68) | 16.2 (0.58) |
| 19–25 years | | | |
| 2008 | 30.9 (0.87) | 39.1 (0.91) | 21.2 (0.74) |
| 2009 | 32.7 (0.82) | 40.3 (0.87) | 22.0 (0.74) |
| 2010 | 33.9 (0.73) | 41.7 (0.78) | 24.1 (0.61) |
| 2011 | 27.9 (0.71) | 36.1 (0.77) | 20.1 (0.61) |
| 2012 | 26.4 (0.72) | 33.0 (0.72) | 19.6 (0.62) |
| 2013 (Jan.–Mar.) | 26.7 (1.25) | 31.4 (1.34) | 19.6 (1.12) |

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.

²A year is defined as the 12 months prior to interview.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Table 2. Numbers of persons who lacked health insurance coverage at the time of interview, for at least part of the past year, and for more than a year, by age group and year: United States, 2008–March 2013

| Age group and year | Uninsured ¹ at the time of interview | Uninsured ¹ for at least part of the past year ² | Uninsured ¹ for more than a year ² |
|--------------------|---|--|--|
| Number in millions | | | |
| All ages | | | |
| 2008 | 43.8 | 55.9 | 31.7 |
| 2009 | 46.3 | 58.5 | 32.8 |
| 2010 | 48.6 | 60.3 | 35.7 |
| 2011 | 46.3 | 58.7 | 34.2 |
| 2012 | 45.5 | 57.7 | 34.1 |
| 2013 (Jan.–Mar.) | 46.0 | 57.4 | 34.5 |
| Under 65 years | | | |
| 2008 | 43.6 | 55.5 | 31.6 |
| 2009 | 46.0 | 57.9 | 32.6 |
| 2010 | 48.2 | 59.6 | 35.4 |
| 2011 | 45.9 | 58.0 | 33.9 |
| 2012 | 45.2 | 56.8 | 33.9 |
| 2013 (Jan.–Mar.) | 45.7 | 56.9 | 34.3 |
| 0–17 years | | | |
| 2008 | 6.6 | 9.9 | 4.1 |
| 2009 | 6.1 | 9.5 | 3.6 |
| 2010 | 5.8 | 8.7 | 3.4 |
| 2011 | 5.2 | 8.1 | 2.7 |
| 2012 | 4.9 | 7.7 | 2.7 |
| 2013 (Jan.–Mar.) | 5.2 | 8.1 | 3.0 |
| 18–64 years | | | |
| 2008 | 37.1 | 45.6 | 27.5 |
| 2009 | 40.0 | 48.4 | 29.1 |
| 2010 | 42.5 | 51.0 | 32.0 |
| 2011 | 40.7 | 49.9 | 31.2 |
| 2012 | 40.3 | 49.2 | 31.2 |
| 2013 (Jan.–Mar.) | 40.5 | 48.9 | 31.4 |
| 19–25 years | | | |
| 2008 | 8.9 | 11.2 | 6.1 |
| 2009 | 9.5 | 11.6 | 6.4 |
| 2010 | 10.0 | 12.3 | 7.1 |
| 2011 | 8.4 | 10.8 | 6.0 |
| 2012 | 7.9 | 9.9 | 5.9 |
| 2013 (Jan.–Mar.) | 8.2 | 9.6 | 6.0 |

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.

²A year is defined as the 12 months prior to interview.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Table 3. Percentages of persons who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by age group and selected years: United States, 1997–March 2013

| Age group and year | Uninsured ¹ at the time of interview | Public health plan coverage ² | Private health insurance coverage ³ |
|--------------------------|---|--|--|
| Percent (standard error) | | | |
| All ages | | | |
| 1997 | 15.4 (0.21) | 23.3 (0.27) | 70.7 (0.32) |
| 2005 | 14.2 (0.21) | 26.4 (0.30) | 67.3 (0.37) |
| 2008 | 14.7 (0.32) | 28.9 (0.39) | 64.1 (0.55) |
| 2009 | 15.4 (0.30) | 30.4 (0.40) | 61.9 (0.50) |
| 2010 | 16.0 (0.27) | 31.4 (0.39) | 60.2 (0.48) |
| 2011 | 15.1 (0.25) | 32.4 (0.37) | 60.1 (0.48) |
| 2012 | 14.7 (0.23) | 33.4 (0.35) | 59.6 (0.43) |
| 2013 (Jan.–Mar.) | 14.8 (0.46) | 34.0 (0.59) | 58.9 (0.84) |
| Under 65 years | | | |
| 1997 | 17.4 (0.24) | 13.6 (0.25) | 70.8 (0.35) |
| 2005 | 16.0 (0.24) | 16.8 (0.29) | 68.4 (0.39) |
| 2008 | 16.7 (0.36) | 19.3 (0.42) | 65.4 (0.57) |
| 2009 | 17.5 (0.34) | 21.0 (0.39) | 62.9 (0.54) |
| 2010 | 18.2 (0.30) | 22.0 (0.38) | 61.2 (0.50) |
| 2011 | 17.3 (0.29) | 23.0 (0.37) | 61.2 (0.51) |
| 2012 | 16.9 (0.27) | 23.5 (0.37) | 61.0 (0.47) |
| 2013 (Jan.–Mar.) | 17.1 (0.53) | 23.9 (0.65) | 60.3 (0.90) |
| 0–17 years | | | |
| 1997 | 13.9 (0.36) | 21.4 (0.48) | 66.2 (0.57) |
| 2005 | 8.9 (0.29) | 29.9 (0.56) | 62.4 (0.60) |
| 2008 | 8.9 (0.43) | 34.2 (0.79) | 58.3 (0.84) |
| 2009 | 8.2 (0.40) | 37.7 (0.76) | 55.7 (0.86) |
| 2010 | 7.8 (0.32) | 39.8 (0.73) | 53.8 (0.75) |
| 2011 | 7.0 (0.27) | 41.0 (0.74) | 53.3 (0.76) |
| 2012 | 6.6 (0.27) | 42.1 (0.72) | 52.8 (0.73) |
| 2013 (Jan.–Mar.) | 7.1 (0.52) | 42.5 (1.29) | 51.5 (1.44) |
| 18–64 years | | | |
| 1997 | 18.9 (0.23) | 10.2 (0.20) | 72.8 (0.30) |
| 2005 | 18.9 (0.26) | 11.5 (0.22) | 70.9 (0.36) |
| 2008 | 19.7 (0.40) | 13.4 (0.33) | 68.1 (0.54) |
| 2009 | 21.1 (0.37) | 14.4 (0.31) | 65.8 (0.47) |
| 2010 | 22.3 (0.35) | 15.0 (0.30) | 64.1 (0.46) |
| 2011 | 21.3 (0.34) | 15.9 (0.29) | 64.2 (0.45) |
| 2012 | 20.9 (0.31) | 16.4 (0.29) | 64.1 (0.42) |
| 2013 (Jan.–Mar.) | 20.9 (0.64) | 16.9 (0.54) | 63.6 (0.79) |
| 19–25 years | | | |
| 1997 | 31.4 (0.63) | 11.2 (0.46) | 58.4 (0.71) |
| 2005 | 31.2 (0.65) | 12.9 (0.51) | 56.5 (0.79) |
| 2008 | 30.9 (0.87) | 14.0 (0.75) | 55.7 (1.02) |
| 2009 | 32.7 (0.82) | 15.0 (0.62) | 52.6 (0.91) |
| 2010 | 33.9 (0.73) | 15.7 (0.55) | 51.0 (0.84) |
| 2011 | 27.9 (0.71) | 16.8 (0.60) | 56.2 (0.85) |
| 2012 | 26.4 (0.72) | 17.5 (0.59) | 57.2 (0.85) |
| 2013 (Jan.–Mar.) | 26.7 (1.25) | 17.3 (1.03) | 56.9 (1.51) |

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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans.



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.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997, 2005, and 2008–2013, Family Core component.



Table 4. Percentages of persons under age 65 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by poverty status and year: United States, 2008–March 2013

| Poverty status ¹ and year | Uninsured ² at the time of interview | Public health plan coverage ³ | Private health insurance coverage ⁴ |
|--------------------------------------|---|--|--|
| Percent (standard error) | | | |
| Poor (<100% FPL) | | | |
| 2008 | 27.9 (1.08) | 55.5 (1.22) | 17.9 (1.21) |
| 2009 | 30.2 (0.89) | 56.7 (1.06) | 14.1 (0.87) |
| 2010 | 29.5 (0.83) | 56.0 (0.98) | 15.5 (0.70) |
| 2011 | 28.2 (0.66) | 56.2 (0.82) | 16.6 (0.77) |
| 2012 | 28.3 (0.65) | 57.1 (0.83) | 16.1 (0.83) |
| 2013 (Jan.–Mar.) | 27.9 (1.32) | 58.6 (1.63) | 14.4 (1.34) |
| Near-poor (≥100% and <200% FPL) | | | |
| 2008 | 30.6 (0.82) | 34.7 (0.92) | 36.3 (1.00) |
| 2009 | 29.4 (0.77) | 36.7 (0.85) | 35.9 (0.93) |
| 2010 | 32.3 (0.69) | 36.2 (0.63) | 33.2 (0.77) |
| 2011 | 30.4 (0.58) | 37.7 (0.73) | 33.5 (0.75) |
| 2012 | 29.5 (0.56) | 37.1 (0.66) | 35.2 (0.75) |
| 2013 (Jan.–Mar.) | 29.7 (1.20) | 40.8 (1.43) | 31.0 (1.35) |
| Not-poor (≥200% FPL) | | | |
| 2008 | 10.2 (0.27) | 8.5 (0.30) | 82.5 (0.38) |
| 2009 | 10.7 (0.29) | 9.0 (0.30) | 81.6 (0.42) |
| 2010 | 10.7 (0.24) | 9.7 (0.28) | 81.0 (0.36) |
| 2011 | 10.1 (0.25) | 9.9 (0.26) | 81.4 (0.36) |
| 2012 | 9.8 (0.23) | 10.3 (0.33) | 81.3 (0.39) |
| 2013 (Jan.–Mar.) | 9.9 (0.50) | 9.7 (0.55) | 81.7 (0.79) |
| Unknown | | | |
| 2008 | 21.0 (0.73) | 19.4 (0.90) | 60.7 (1.16) |
| 2009 | 22.3 (0.85) | 20.8 (0.88) | 57.9 (1.24) |
| 2010 | 22.7 (0.95) | 21.0 (0.69) | 57.3 (1.08) |
| 2011 | 21.0 (0.64) | 26.2 (0.95) | 53.9 (1.09) |
| 2012 | 20.4 (0.73) | 28.8 (0.89) | 52.1 (1.00) |
| 2013 (Jan.–Mar.) | 20.4 (1.51) | 23.1 (1.85) | 57.8 (2.22) |

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. For more information on the "Unknown" poverty status category, see the [Technical Notes](#). 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 at the time of interview. 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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans.

⁴Includes 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.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Table 5. Percentages of adults aged 18–64 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by poverty status and year: United States, 2008–March 2013

| Poverty status ¹ and year | Uninsured ² at the time of interview | Public health plan coverage ³ | Private health insurance coverage ⁴ |
|--------------------------------------|---|--|--|
| Percent (standard error) | | | |
| Poor (<100% FPL) | | | |
| 2008 | 37.7 (1.49) | 40.4 (1.34) | 22.7 (1.65) |
| 2009 | 42.5 (1.20) | 40.3 (1.21) | 18.0 (1.15) |
| 2010 | 42.2 (0.99) | 38.8 (0.97) | 19.6 (0.89) |
| 2011 | 40.1 (0.92) | 39.6 (0.93) | 21.2 (1.02) |
| 2012 | 40.1 (0.90) | 40.8 (0.94) | 20.2 (1.09) |
| 2013 (Jan.–Mar.) | 39.1 (1.74) | 42.4 (1.91) | 19.5 (1.87) |
| Near-poor (≥100% and <200% FPL) | | | |
| 2008 | 39.9 (0.94) | 23.1 (0.80) | 38.3 (1.01) |
| 2009 | 39.1 (0.85) | 24.5 (0.75) | 37.7 (0.84) |
| 2010 | 43.0 (0.74) | 23.7 (0.55) | 34.7 (0.74) |
| 2011 | 40.1 (0.72) | 25.9 (0.69) | 35.4 (0.75) |
| 2012 | 39.2 (0.68) | 25.2 (0.57) | 37.2 (0.74) |
| 2013 (Jan.–Mar.) | 39.2 (1.41) | 28.4 (1.41) | 33.8 (1.35) |
| Not-poor (≥200% FPL) | | | |
| 2008 | 11.9 (0.28) | 7.0 (0.28) | 82.4 (0.37) |
| 2009 | 12.5 (0.31) | 7.6 (0.26) | 81.4 (0.38) |
| 2010 | 12.6 (0.27) | 8.1 (0.27) | 80.8 (0.36) |
| 2011 | 12.0 (0.28) | 8.3 (0.23) | 81.1 (0.35) |
| 2012 | 11.4 (0.26) | 8.7 (0.29) | 81.3 (0.38) |
| 2013 (Jan.–Mar.) | 11.7 (0.55) | 8.1 (0.47) | 81.7 (0.74) |
| Unknown | | | |
| 2008 | 24.4 (0.83) | 14.1 (0.77) | 62.7 (1.13) |
| 2009 | 26.7 (0.99) | 15.5 (0.69) | 58.8 (1.13) |
| 2010 | 27.1 (1.10) | 15.6 (0.63) | 58.4 (1.11) |
| 2011 | 25.6 (0.77) | 17.6 (0.73) | 58.1 (0.96) |
| 2012 | 25.7 (0.88) | 18.9 (0.76) | 56.9 (0.92) |
| 2013 (Jan.–Mar.) | 23.7 (1.64) | 17.8 (1.62) | 60.1 (2.04) |

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. For more information on the "Unknown" poverty status category, see the [Technical Notes](#). 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 at the time of interview. 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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans.

⁴Includes 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.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Table 6. Percentages of children aged 0–17 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by poverty status and year: United States, 2008–March 2013

| Poverty status ¹ and year | Uninsured ² at the time of interview | Public health plan coverage ³ | Private health insurance coverage ⁴ |
|--------------------------------------|---|--|--|
| Percent (standard error) | | | |
| Poor (<100% FPL) | | | |
| 2008 | 12.4 (1.13) | 79.4 (1.37) | 10.4 (0.95) |
| 2009 | 11.8 (0.94) | 81.4 (1.11) | 8.2 (0.81) |
| 2010 | 10.2 (0.96) | 82.0 (1.22) | 9.2 (0.70) |
| 2011 | 8.1 (0.62) | 84.4 (0.87) | 8.9 (0.72) |
| 2012 | 7.5 (0.58) | 85.9 (0.80) | 8.8 (0.78) |
| 2013 (Jan.–Mar.) | 9.5 (1.42) | 85.5 (1.60) | 6.1 (1.00) |
| Near-poor (≥100% and <200% FPL) | | | |
| 2008 | 15.6 (1.07) | 53.4 (1.58) | 32.9 (1.46) |
| 2009 | 12.1 (0.90) | 58.4 (1.42) | 32.8 (1.43) |
| 2010 | 12.6 (0.73) | 59.2 (1.16) | 30.5 (1.18) |
| 2011 | 11.5 (0.69) | 60.8 (1.17) | 29.9 (1.07) |
| 2012 | 10.1 (0.70) | 61.0 (1.30) | 31.1 (1.18) |
| 2013 (Jan.–Mar.) | 10.3 (1.33) | 66.3 (2.14) | 25.3 (2.08) |
| Not-poor (≥200% FPL) | | | |
| 2008 | 4.8 (0.39) | 13.1 (0.62) | 83.1 (0.67) |
| 2009 | 5.0 (0.39) | 13.7 (0.63) | 82.4 (0.73) |
| 2010 | 4.6 (0.29) | 14.9 (0.57) | 81.4 (0.61) |
| 2011 | 4.0 (0.27) | 15.0 (0.55) | 82.1 (0.58) |
| 2012 | 4.5 (0.31) | 15.2 (0.62) | 81.3 (0.64) |
| 2013 (Jan.–Mar.) | 4.3 (0.56) | 15.0 (1.31) | 81.7 (1.40) |
| Unknown | | | |
| 2008 | 11.0 (0.97) | 35.1 (1.72) | 54.8 (1.78) |
| 2009 | 9.8 (0.99) | 36.1 (2.05) | 55.3 (2.07) |
| 2010 | 8.8 (0.89) | 38.1 (1.71) | 53.7 (1.74) |
| 2011 | 10.4 (0.76) | 45.9 (1.70) | 44.5 (1.66) |
| 2012 | 8.2 (0.77) | 51.8 (1.50) | 41.2 (1.49) |
| 2013 (Jan.–Mar.) | 10.1 (2.16) | 39.4 (3.85) | 50.7 (3.92) |

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. For more information on the "Unknown" poverty status category, see the [Technical Notes](#). 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 at the time of interview. 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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans.

⁴Includes 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.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Table 7. Percentages of persons who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by age and sex: United States, January–March 2013

| Selected characteristic | Uninsured ¹ at the time of interview | Public health plan coverage ² | Private health insurance coverage ³ |
|--------------------------|---|--|--|
| Percent (standard error) | | | |
| Age (years) | | | |
| All ages | 14.8 (0.46) | 34.0 (0.59) | 58.9 (0.84) |
| Under 65 | 17.1 (0.53) | 23.9 (0.65) | 60.3 (0.90) |
| 0–17 | 7.1 (0.52) | 42.5 (1.29) | 51.5 (1.44) |
| 18–64 | 20.9 (0.64) | 16.9 (0.54) | 63.6 (0.79) |
| 18–24 | 25.2 (1.21) | 19.2 (1.13) | 56.4 (1.57) |
| 25–34 | 27.0 (1.04) | 15.3 (0.82) | 58.1 (1.21) |
| 35–44 | 21.7 (1.06) | 13.4 (0.79) | 65.4 (1.21) |
| 45–64 | 15.9 (0.72) | 18.4 (0.73) | 68.2 (0.97) |
| 65 and over | 0.7 (0.13) | 96.6 (0.36) | 50.5 (1.39) |
| 19–25 | 26.7 (1.25) | 17.3 (1.03) | 56.9 (1.51) |
| Sex | | | |
| Male: | | | |
| All ages | 16.5 (0.57) | 31.4 (0.65) | 59.2 (0.90) |
| Under 65 | 18.7 (0.65) | 22.1 (0.68) | 60.6 (0.97) |
| 0–17 | 7.1 (0.62) | 41.7 (1.44) | 52.3 (1.60) |
| 18–64 | 23.3 (0.80) | 14.3 (0.58) | 63.9 (0.90) |
| 18–24 | 27.7 (1.76) | 15.5 (1.39) | 57.2 (2.16) |
| 25–34 | 31.5 (1.52) | 10.0 (0.85) | 58.8 (1.63) |
| 35–44 | 24.9 (1.40) | 11.1 (0.92) | 64.6 (1.46) |
| 45–64 | 16.6 (0.85) | 17.7 (0.90) | 68.7 (1.10) |
| 65 and over | 0.8 (0.18) | 96.6 (0.50) | 49.7 (1.61) |
| 19–25 | 30.1 (1.84) | 12.4 (1.20) | 57.9 (2.18) |
| Female: | | | |
| All ages | 13.3 (0.44) | 36.5 (0.68) | 58.6 (0.88) |
| Under 65 | 15.6 (0.51) | 25.7 (0.74) | 60.0 (0.94) |
| 0–17 | 7.1 (0.64) | 43.2 (1.47) | 50.7 (1.60) |
| 18–64 | 18.7 (0.62) | 19.3 (0.65) | 63.4 (0.85) |
| 18–24 | 22.6 (1.38) | 23.0 (1.49) | 55.6 (1.76) |
| 25–34 | 22.6 (1.12) | 20.4 (1.18) | 57.4 (1.29) |
| 35–44 | 18.8 (1.07) | 15.6 (1.02) | 66.1 (1.38) |
| 45–64 | 15.3 (0.77) | 19.2 (0.91) | 67.7 (1.13) |
| 65 and over | 0.7 (0.19) | 96.6 (0.44) | 51.2 (1.54) |
| 19–25 | 23.2 (1.41) | 22.1 (1.46) | 56.0 (1.72) |

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 at the time of interview. 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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare, and military plans.

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.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2013, Family Core component.



Table 8. Percentages of persons under age 65 who were uninsured, had public health plan coverage, and had private health insurance coverage at the time of interview, by race/ethnicity and year: United States, 2008–March 2013

| Race/ethnicity and year | Uninsured ¹ at the time of interview | Public health plan coverage ² | Private health insurance coverage ³ |
|---|---|--|--|
| | Percent (standard error) | | |
| Hispanic or Latino | | | |
| 2008 | 33.1 (0.95) | 27.4 (0.78) | 40.0 (0.98) |
| 2009 | 32.8 (0.86) | 30.6 (0.78) | 37.1 (0.89) |
| 2010 | 31.9 (0.72) | 32.0 (0.78) | 36.6 (0.81) |
| 2011 | 31.1 (0.68) | 33.6 (0.74) | 36.1 (0.82) |
| 2012 | 30.4 (0.71) | 34.0 (0.71) | 36.4 (0.74) |
| 2013 (Jan.–Mar.) | 30.8 (1.46) | 34.8 (1.13) | 35.0 (1.54) |
| Non-Hispanic white, single race | | | |
| 2008 | 12.3 (0.34) | 14.2 (0.43) | 74.9 (0.59) |
| 2009 | 13.1 (0.34) | 15.6 (0.42) | 72.9 (0.57) |
| 2010 | 13.7 (0.30) | 16.4 (0.42) | 71.4 (0.57) |
| 2011 | 13.0 (0.32) | 17.1 (0.39) | 71.4 (0.55) |
| 2012 | 12.7 (0.28) | 17.3 (0.39) | 71.5 (0.51) |
| 2013 (Jan.–Mar.) | 12.9 (0.55) | 18.0 (0.73) | 70.7 (0.97) |
| Non-Hispanic black, single race | | | |
| 2008 | 17.7 (0.55) | 33.8 (0.97) | 50.0 (1.04) |
| 2009 | 18.8 (0.59) | 34.9 (0.97) | 47.8 (0.99) |
| 2010 | 20.8 (0.63) | 36.3 (0.79) | 44.6 (0.84) |
| 2011 | 19.0 (0.51) | 36.9 (0.83) | 45.6 (0.85) |
| 2012 | 17.9 (0.50) | 38.2 (0.77) | 45.4 (0.79) |
| 2013 (Jan.–Mar.) | 19.8 (1.02) | 36.0 (1.61) | 45.4 (1.71) |
| Non-Hispanic Asian, single race | | | |
| 2008 | 13.3 (0.93) | 12.0 (1.10) | 75.4 (1.38) |
| 2009 | 15.2 (0.93) | 13.0 (1.00) | 72.5 (1.36) |
| 2010 | 16.8 (0.76) | 14.9 (0.98) | 69.1 (1.17) |
| 2011 | 16.0 (0.89) | 17.6 (1.14) | 67.0 (1.40) |
| 2012 | 16.4 (0.93) | 16.6 (0.85) | 67.5 (1.24) |
| 2013 (Jan.–Mar.) | 12.5 (1.54) | 15.6 (2.13) | 72.5 (2.61) |
| Non-Hispanic other races and multiple races | | | |
| 2008 | 17.8 (2.00) | 32.8 (2.79) | 51.8 (2.94) |
| 2009 | 19.9 (1.50) | 34.6 (1.96) | 48.2 (2.59) |
| 2010 | 22.4 (4.83) | 30.3 (2.14) | 48.7 (3.83) |
| 2011 | 19.1 (1.78) | 32.5 (1.60) | 50.6 (1.89) |
| 2012 | 16.4 (1.33) | 35.8 (1.77) | 50.8 (2.16) |
| 2013 (Jan.–Mar.) | 14.1 (2.28) | 40.0 (3.96) | 47.6 (4.04) |

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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare and military plans.

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.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Table 9. Percentages of adults aged 18–64 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by selected demographic characteristics: United States, January–March 2013

| Selected characteristic | Uninsured ¹ at the time of interview | Public health plan coverage ² | Private health insurance coverage ³ |
|---|---|--|--|
| Percent (standard error) | | | |
| Race/ethnicity | | | |
| Hispanic or Latino | 41.4 (1.95) | 18.6 (1.17) | 40.7 (1.52) |
| Non-Hispanic: | | | |
| White, single race | 15.2 (0.62) | 14.6 (0.62) | 71.8 (0.91) |
| Black, single race | 25.5 (1.16) | 25.0 (1.37) | 50.6 (1.58) |
| Asian, single race | 14.6 (1.60) | 12.7 (1.83) | 73.2 (2.31) |
| Other races and multiple races | 21.8 (3.39) | 31.9 (4.16) | 48.6 (4.29) |
| Region | | | |
| Northeast | 14.5 (1.49) | 19.8 (1.07) | 66.7 (1.77) |
| Midwest | 17.2 (1.10) | 16.6 (1.38) | 67.9 (1.79) |
| South | 24.8 (1.22) | 16.4 (0.85) | 60.4 (1.31) |
| West | 23.4 (1.02) | 15.7 (1.08) | 62.3 (1.52) |
| Education | | | |
| Less than high school | 42.6 (1.81) | 30.5 (1.42) | 28.0 (1.53) |
| High school diploma or GED ⁴ | 26.5 (1.07) | 21.2 (0.90) | 53.9 (1.20) |
| More than high school | 14.0 (0.52) | 12.3 (0.55) | 75.2 (0.69) |
| Employment status | | | |
| Employed | 18.7 (0.64) | 8.5 (0.42) | 73.5 (0.72) |
| Unemployed | 49.6 (2.18) | 26.2 (1.75) | 24.5 (1.92) |
| Not in workforce | 19.5 (0.91) | 40.7 (1.13) | 43.9 (1.34) |
| Marital status | | | |
| Married | 15.1 (0.73) | 12.7 (0.59) | 73.8 (0.90) |
| Widowed | 23.9 (3.21) | 28.3 (3.60) | 50.2 (3.55) |
| Divorced or separated | 24.0 (1.26) | 25.4 (1.31) | 52.4 (1.50) |
| Living with partner | 34.1 (1.74) | 19.7 (1.56) | 47.1 (1.89) |
| Never married | 26.8 (0.98) | 20.2 (0.90) | 53.7 (1.20) |

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 Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, Medicare and military plans.

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.

⁴GED is General Educational Development high school equivalency diploma.

NOTES: Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2013, Family Core component.



Table 10. Percentages of persons under age 65 with private health insurance coverage who were enrolled in a high-deductible health plan, in a high-deductible health plan without a health savings account, and in a consumer-directed health plan, and who were in a family with a flexible spending account for medical expenses, by year: United States, 2008–March 2013

| Year | Enrolled in a high-deductible health plan (HDHP) ¹ | Enrolled in an HDHP without a health savings account (HSA) ² | Enrolled in a consumer-directed health Plan (CDHP) ³ | In a family with a flexible spending account (FSA) for medical expenses |
|------------------|---|---|---|---|
| | Percent (standard error) | | | |
| 2008 | 19.2 (0.55) | 14.1 (0.46) | 5.2 (0.29) | 18.7 (0.58) |
| 2009 | 22.5 (0.58) | 15.9 (0.43) | 6.6 (0.33) | 20.4 (0.50) |
| 2010 | 25.3 (0.54) | 17.6 (0.46) | 7.7 (0.33) | 20.4 (0.50) |
| 2011 | 29.0 (0.54) | 19.9 (0.41) | 9.2 (0.35) | 21.4 (0.53) |
| 2012 | 31.1 (0.57) | 20.3 (0.42) | 10.8 (0.34) | 21.6 (0.45) |
| 2013 (Jan.–Mar.) | 32.5 (1.19) | 21.6 (0.98) | 10.9 (0.75) | 22.8 (0.84) |

¹An HDHP was defined in 2013 as a health plan with an annual deductible of at least \$1,250 for self-only coverage and \$2,500 for family coverage. The deductible is adjusted annually for inflation. Deductibles for previous years are included in the [Technical Notes](#).

²An HSA is a tax-advantaged account or fund that can be used to pay for medical expenses. It must be coupled with an HDHP.

³A CDHP is an HDHP coupled with an HSA.

NOTES: The measures of HDHP enrollment, CDHP enrollment, and being in a family with an FSA for medical expenses are not mutually exclusive. Therefore, a person may be counted in more than one measure. The individual components of HDHPs may not add up to the total, due to rounding. Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.

Table 11. Percentages of persons under age 65 with private health insurance coverage who were enrolled in a high-deductible health plan, by year and source of coverage: United States, 2008–March 2013

| Year | Employment-based ¹ | Directly purchased ² |
|------------------|-------------------------------|---------------------------------|
| | Percent (standard error) | |
| 2008 | 17.1 (0.53) | 44.7 (1.84) |
| 2009 | 20.2 (0.59) | 46.9 (1.84) |
| 2010 | 23.3 (0.54) | 48.0 (1.48) |
| 2011 | 26.9 (0.53) | 52.4 (1.49) |
| 2012 | 29.2 (0.60) | 54.7 (1.61) |
| 2013 (Jan.–Mar.) | 30.3 (1.18) | 57.8 (3.30) |

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

²Private insurance that was originally obtained through direct purchase or through other means not related to employment.

NOTES: For persons under age 65, approximately 8% of private health plans were directly purchased. Estimates for 2013 are based on data collected from January through March. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2008–2013, Family Core component.



Technical Notes

The Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) is releasing selected estimates of health insurance coverage for the civilian noninstitutionalized U.S. population based on data from the 2013 National Health Interview Survey (NHIS), along with comparable estimates from the 2008–2012 NHIS.

Three measures of lack of health insurance coverage are provided: (a) uninsured at the time of interview, (b) uninsured at least part of the year prior to interview (which also includes persons uninsured for more than a year), and (c) uninsured for more than a year at the time of interview. To reflect different policy-relevant perspectives, different time frames are used to measure lack of insurance coverage. The measure of uninsured at the time of interview provides an estimate of persons who at any given time may have experienced barriers to obtaining needed health care. The estimate of persons who were uninsured at any time in the year prior to interview provides an annual caseload of persons who may experience these barriers. This measure includes persons who have insurance at the time of interview but who had a period of noncoverage in the year prior to interview, as well as those who are currently uninsured and who may have been uninsured for a long period of time. Finally, the measure of lack of coverage for more than a year provides an estimate of those with a persistent lack of coverage who may be at high risk of not obtaining preventive services or care for illness and injury. These three measures of lack of coverage are not mutually exclusive, and a given individual may be counted in more than one of the measures. Estimates of enrollment in public and private coverage are also provided.

This report also includes estimates of three types of consumer-directed private health care. Consumer-directed health care may enable individuals to have more control over when and how they access care, what types of care they use, and how much they spend on health care services.

National attention to consumer-directed health care increased following enactment of the Medicare Prescription Drug Improvement and Modernization Act of 2003 (P.L. 108–173), which established tax-advantaged health savings accounts (HSAs) (1). In 2007, three additional questions were added to the health insurance section of NHIS to monitor enrollment in consumer-directed health care among persons with private health insurance. Estimates for 2013 are provided for enrollment in high-deductible health plans (HDHPs), plans with high deductibles coupled with HSAs (i.e., consumer-directed health plans; CDHPs), and being in a family with a flexible spending account (FSA) for medical expenses not otherwise covered. For a more complete description of consumer-directed health care, see “Definitions of selected terms” below.

The 2013 health insurance 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 2013 are stratified by age group, sex, race/ethnicity, poverty status, marital status, employment status, region, and educational attainment.

Data source

NHIS is a multistage probability sample survey of the civilian noninstitutionalized population of the United States and is the source of data for this report. The survey is conducted continuously throughout the year for NCHS by interviewers from the U.S. Census Bureau.

NHIS is a comprehensive health survey that can be used to relate health insurance coverage to health outcomes

and health care utilization. It has a low item nonresponse rate (about 1%) for the health insurance questions. Because NHIS is conducted throughout the year—yielding a nationally representative sample each month—data can be analyzed monthly or quarterly to monitor health insurance coverage trends.

The fundamental structure of the current NHIS oversamples Hispanic, black, and Asian populations. Visit the NCHS website at:

<http://www.cdc.gov/nchs/nhis.htm> for more information on the design, content, and use of NHIS.

The data for this report are derived from the Family Core component of the 2008–2013 NHIS, which collects information on all family members in each household. Data analyses for the 2013 NHIS were based on 24,658 persons in the Family Core.

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:

http://www.cdc.gov/nchs/data/series/sr_02/sr02_130.pdf. Estimates were calculated using NHIS survey weights, which are calibrated to census totals for sex, age, and race/ethnicity of the U.S. civilian noninstitutionalized population. Weights for 2008–2011 were derived from 2000-census-based population estimates. Beginning with 2012 NHIS data, weights were derived from 2010-census-based population estimates.

An error was made in the poststratification component of weights for 2008 for the preliminary estimates used in this report. The error affected “nonminority” person weights. Compared with the corrected weight estimates, those made with the original weights generally differ by 0.01 percentage point, and variances generally differ by 0.001 percentage point.

Point estimates and estimates of their variances were calculated using SUDAAN software to account for the



complex sample design of NHIS, taking into account stratum and primary sampling unit (PSU) identifiers. The Taylor series linearization method was chosen for variance estimation.

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.

Definitions of selected terms

Health insurance coverage—

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, 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. 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 any private health insurance, Medicare, Medicaid, CHIP, state-sponsored or other government-sponsored health plan, or military plan at the time of interview. 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. The analyses excluded persons with unknown health insurance status (about 1% of respondents each year).

Data on health insurance status were edited using an automated system based on logic checks and keyword searches. Information from follow-up questions, such as plan name(s), was used to reassign insurance status and type of coverage to avoid misclassification. For comparability, the estimates for all years were created using these same procedures.

Directly purchased coverage—

Private insurance that was originally obtained through direct purchase or through other means not related to employment.

Employment-based coverage—

Private insurance that was originally obtained through a present or former employer or union or a professional association.

For persons with private health insurance, a question was asked regarding the annual deductible of each private health insurance plan. For plans considered to be HDHPs, a follow-up question was asked regarding special accounts or funds used to pay for medical expenses: an HSA or a health reimbursement account (HRA). Lastly, a question was asked about family enrollment in an FSA for medical expenses.

High-deductible health plan (HDHP)—An HDHP was defined in 2013 as a private health plan with an annual deductible of at least \$1,250 for self-only coverage or \$2,500 for family coverage. The deductible is adjusted annually for inflation. For 2010 through 2012, the annual deductible for self-only coverage was \$1,200 and for family coverage was \$2,400. For 2009, the annual deductible for self-only coverage was \$1,150 and for family coverage was \$2,300. For 2008, the annual deductible for self-only coverage was \$1,100 and for family coverage was \$2,200.

Consumer-directed health plan (CDHP)—A CDHP is defined as an HDHP with a special account to pay for medical expenses. Unspent funds are carried over to subsequent years. A person is considered to have a CDHP if there was a “yes” response to the following question: *With this plan, is there a special account or fund that can be used to pay for medical*

expenses? The accounts are sometimes referred to as Health Savings Accounts (HSAs), Health Reimbursement Accounts (HRAs), Personal Care accounts, Personal Medical funds, or Choice funds, and are different from Flexible Spending Accounts.

Health savings account (HSA)—

An HSA is a tax-advantaged account or fund that can be used to pay for medical expenses. It must be coupled with an HDHP. The funds contributed to the account are not subject to federal income tax at the time of deposit. Unlike with FSAs, HSA funds roll over and accumulate year to year if not spent. HSAs are owned by the individual. Funds may be used to pay for qualified medical expenses at any time without federal tax liability. HSAs may also be referred to as Health Reimbursement Accounts (HRAs), Personal Care accounts, Personal Medical funds, or Choice funds, and the term “HSA” in this report includes accounts that use these alternative names.

Flexible spending account (FSA) for medical expenses—A person is considered to be in a family with an FSA if there was a “yes” response to the following question: *[Do you/Does anyone in your family] have a Flexible Spending Account for health expenses? These accounts are offered by some employers to allow employees to set aside pre-tax dollars of their own money for their use throughout the year to reimburse themselves for their out-of-pocket expenses for health care. With this type of account, any money remaining in the account at the end of the year, following a short grace period, is lost to the employee.*

The measures of HDHP enrollment, CDHP enrollment, and being in a family with an FSA for medical expenses are not mutually exclusive. Therefore, a person may be counted in more than one measure.

Education—The categories of education are based on the years of school completed or highest degree obtained for persons aged 18 and over.

Employment—Employment status is assessed at the time of interview and is obtained for persons



aged 18 and over. In this release, it is presented only for persons aged 18–64.

Hispanic or Latino origin and race—Hispanic or Latino origin and race are two separate and distinct categories. Persons of Hispanic or Latino origin may be of any race or combination of races. Hispanic or Latino origin includes persons of Mexican, Puerto Rican, Cuban, Central and South American, or Spanish origin. Race is based on the family respondent's description of his or her own race background, as well as the race background of other family members. More than one race may be reported for a person. For conciseness, the text, tables, and figures in this report use shorter versions of the 1997 Office of Management and Budget (OMB) terms for race and Hispanic or Latino origin. For example, the category "Not Hispanic or Latino, black or African American, single race" is referred to as "non-Hispanic black, single race" in the text, tables, and figures. Estimates for non-Hispanic persons of races other than white only, black only, and Asian only, or of multiple races, are combined into the "Other races and multiple races" category.

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) defined by the U.S. Census Bureau for that year (2–7). Persons categorized as "Poor" have a ratio less than 1.0 (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 remaining group of respondents is coded as "Unknown" with respect to poverty status. The percentage of respondents with unknown poverty status (15.8% in 2008, 12.3% in 2009, 12.2% in 2010, 11.5% in 2011, 11.4% in 2012 and 9.6% in the first quarter of 2013) is disaggregated by age and insurance status in [Tables 4, 5, and 6](#).

For more information on unknown income and unknown poverty status, see the *NHIS Survey Description* document for 2008–2012 (available from:

<http://www.cdc.gov/nchs/nhis.htm>).

NCHS imputes income for approximately 30% of NHIS records. The imputed income files are released a few months after the annual release of NHIS microdata and are not available for the ER updates. Therefore, ER health insurance estimates stratified by poverty status are based on reported income only and may differ from similar estimates produced later [e.g., in *Health, United States* (8)] that are based on both reported and imputed income.

Region—In the geographic classification of the U.S. population, states are grouped into the following four regions used by the U.S. Census Bureau:

| Region | States included |
|-----------|--|
| Northeast | Maine, Vermont, New Hampshire, Massachusetts, Connecticut, Rhode Island, New York, New Jersey, and Pennsylvania |
| Midwest | Ohio, Illinois, Indiana, Michigan, Wisconsin, Minnesota, Iowa, Missouri, North Dakota, South Dakota, Kansas, and Nebraska |
| South | Delaware, Maryland, District of Columbia, West Virginia, Virginia, Kentucky, Tennessee, North Carolina, South Carolina, Georgia, Florida, Alabama, Mississippi, Louisiana, Oklahoma, Arkansas, and Texas |
| West | Washington, Oregon, California, Nevada, New Mexico, Arizona, Idaho, Utah, Colorado, Montana, Wyoming, Alaska, and Hawaii |

Additional Early Release Program Products

Two additional periodical reports are published through the ER Program. *Early Release of Selected Estimates Based on Data From the National Health Interview Survey* (9) is published quarterly and provides estimates of 15 selected measures of health, including insurance coverage. Other measures of health include estimates of 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.

Wireless Substitution: Early Release of Estimates From the National Health Interview Survey (10) is published in June and December 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:

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

In addition to these reports, preliminary microdata files containing selected NHIS variables are produced as part of the ER Program. For each data collection year (January through December), these variables are made available three times: in about September (with data from the first quarter), in about December (with data from the first two quarters), and in about March of the next year (with data from the first three quarters). NHIS data users can analyze these files through the [NCHS Research Data Center](#) without having to wait for the final annual NHIS microdata files to be released.

New measures and products may be added as work continues and in response to changing data needs. Feedback on these releases is welcome ([e-mail](#)).



Announcements about ERs, other new data releases, and publications, as well as corrections related to NHIS, will be sent to members of the HISUSERS electronic mailing list. To join, visit the CDC website at: <http://www.cdc.gov/subscribe.html>.

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