

STATISTICAL BRIEF #420

August 2013

The Uninsured in America, 1996-2012: Estimates for the U.S. Civilian Noninstitutionalized Population under Age 65

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Introduction

Estimates of the health insurance status of the U.S. civilian noninstitutionalized population are critical to policymakers and others concerned with access to medical care and the cost and quality of that care. Health insurance helps people get timely access to medical care and protects them against the risk of expensive and unanticipated medical events. Compared to people with health care coverage, uninsured people are less likely to visit a doctor, have a usual source of medical care, receive preventive services, or have a recommended test or prescription filled.¹

Timely and reliable estimates of the population's health insurance status are essential to evaluate the costs and expected impact of public policy intervention in this area, such as efforts to expand coverage or to alter the way in which private and public insurance is financed.

The Household Component of the Medical Expenditure Panel Survey (MEPS-HC), conducted since 1996, provides critical information for evaluating trends in the health insurance status of the population. This Statistical Brief presents estimates on the uninsured in America under age 65 for calendar years 1996 through 2011, as well as the first part of the year for 1996 through 2012. All differences between estimates discussed in the text are statistically significant at the 0.05 level unless otherwise noted.

Findings

The MEPS-HC collects data that can be used to produce estimates of the uninsured for three different periods within a calendar year: at any time during the year, during the first part of the year, and for the entire year.² Estimates of the uninsured vary substantially depending on the time period in consideration (figures 1 and 2). In 2011, the latest year for which all three measures are available, 25.2 percent of the population under age 65 (non-elderly) was uninsured at some point during the year (67.3 million persons), 21.1 percent was uninsured during the first part of the year (56.1 million persons), and 14.5 percent was uninsured for the entire year (38.7 million persons).

Highlights

- In 2011, 25.2 percent of the population was uninsured at some point during the year, 21.1 percent was uninsured during the first part of the year, and 14.5 percent was uninsured for the entire year.²
- The percentage of non-elderly individuals (under age 65) uninsured for the full year² increased from 13.5 percent in 1996 to 14.5 percent in 2011.
- From 1996 to 2011, the percentage of children (under age 18) uninsured all year² decreased from 9.8 percent to 5.7 percent.
- The number and percentage of children (under age 18) covered by only public insurance increased between 1996 and 2011 from 15.5 to 28.4 million and from 21.7 to 38.3 percent.

¹IOM (Institute of Medicine). 2009. *America's Uninsured Crisis: Consequences for Health and Health Care*. Washington, D.C.: The National Academies Press. Taylor, A., Cohen, J., and Machlin, S. "Being uninsured in 1996 compared to 1987: How has the experience of the uninsured changed over time?" *Health Services Research*, December 2001: 36(6) Part II: 16-31. Weinick, R.M., Zuvekas, S.H., and Drilea, S. Research Findings No. 3: Agency for Healthcare Research and Quality, Rockville, MD.

² These estimates include a small proportion of persons who were not in scope for the entire year.

A comparison of estimates during the time period from 1996 through 2011 shows that the percentage of the population under 65 uninsured at any time during the year fluctuated during the period and was 2.5 percentage points lower in 2011 than 1996 (25.2 versus 27.7 percent) (figure 1). However, the number of nonelderly persons uninsured at any time during the year was 3.3 million higher in 2012 than 1996 (67.3 versus 64.0 million) (figure 2) due to population growth. The percentage of nonelderly individuals uninsured for the full year was 1.0 percentage point higher in 2011 than 1996 (14.5 versus 13.5 percent).

In the most recent MEPS-HC estimates available for the first part of 2012, 21.6 percent of the non-elderly population (57.4 million people) was uninsured during the period (figures 1 and 2).

The percentage and number of uninsured children (under age 18) declined from 1996 to 2011. The percentage of children who were uninsured for the entire year declined 4.1 percentage points, from 9.8 to 5.7 percent and the number declined by 2.8 million (from 7.0 to 4.2 million) (figures 3 and 4). The percentage of children covered by public insurance only increased 16.6 percentage points (from 21.7 to 38.3 percent, as shown in figure 3) and the number increased by 12.9 million (from 15.5 to 28.4 million). The percentage of children with private insurance declined between 1996 and 2011 by 11.7 percentage points, from 67.7 to 56.0 percent; and the number of children with private insurance declined by 6.9 million, from 48.4 to 41.5 million.

Data Source

The estimates shown in this Statistical Brief are drawn from analyses conducted by the MEPS staff from the following public use files: 1996–2010 Full Year Consolidated Data files (HC-012, HC-020, HC-028, HC-038, HC-050, HC-060, HC-070, HC-079, HC-089, HC-097, HC-105, HC-113, HC-121, HC-129, HC-138) and the 2011 Full Year Population Characteristics File (HC-141). Point-in-Time estimates for years 1996–2012 were derived from data files HC-001, HC-005, HC-009, HC-013, HC-022, HC-034, HC-053, HC-064, HC-075, HC-084, HC-093, HC-101, HC-109, HC-117, HC-125, HC-134, and from HC-143 (May 2013) for the first part of 2012.

Definitions

First part of year reference period

The reference period for the first interview during a year spans from January 1 through the date of interview and ranges from about 1 to 7 months.

Uninsured

People who did not have insurance coverage at any time during the survey year were classified as uninsured for the full year. People who did not have coverage during the period from January of the survey year through the time of their first interview in that year were classified as uninsured during the first part of the year. (Interviews were typically conducted from February to June.) People who lacked coverage for at least one month during the year were classified as uninsured at any time during the year. People who were covered only by noncomprehensive State-specific programs (e.g., The Maryland Kidney Disease Program) or private single service plans (e.g., coverage for dental or vision care only, coverage for accidents or specific diseases) were considered to be uninsured.

Public only coverage

People were considered to have public only health insurance coverage if they were not covered by private insurance and they were covered by Medicare, Medicaid, TRICARE, or other public hospital and physician coverage.

Private coverage

Private health insurance coverage was defined as nonpublic insurance that provided coverage for hospital and physician care (including Medigap coverage).

About MEPS-HC

MEPS-HC is a nationally representative longitudinal survey that collects detailed information on health care utilization and expenditures, health insurance, and health status, as well as a wide variety of social, demographic, and economic characteristics for the U.S. civilian noninstitutionalized population. It is co-sponsored by the Agency for Healthcare Research and Quality and the National Center for Health Statistics.

For more information about MEPS, call the MEPS information coordinator at AHRQ (301) 427-1656 or visit the MEPS Web site at <http://www.meps.ahrq.gov/>.

References

For a detailed description of the MEPS-HC survey design, sample design, and methods used to minimize sources of nonsampling error, see the following publications:

Cohen, J. *Design and Methods of the Medical Expenditure Panel Survey Household Component*. MEPS Methodology Report No. 1. AHCPR Pub. No. 97-0026. Rockville, MD. Agency for Health Care Policy and Research, 1997. http://www.meps.ahrq.gov/mepsweb/data_files/publications/mr1/mr1.pdf

Cohen, S. *Sample Design of the 1996 Medical Expenditure Panel Survey Household Component*. MEPS Methodology Report No. 2. AHCPR Pub. No. 97-0027. Rockville, MD. Agency for Health Care Policy and Research, 1997. http://www.meps.ahrq.gov/mepsweb/data_files/publications/mr2/mr2.pdf

Cohen, S. Design Strategies and Innovations in the Medical Expenditure Panel Survey. *Medical Care*, July 2003: 41(7) Supplement: III-5-III-12.

Ezzati-Rice, T.M., Rohde, F., Greenblatt, J. *Sample Design of the Medical Expenditure Panel Survey Household Component, 1998–2007*. Methodology Report No. 22. March 2009. Agency for Healthcare Research and Quality, Rockville, MD. http://www.meps.ahrq.gov/mepsweb/data_files/publications/mr22/mr22.pdf

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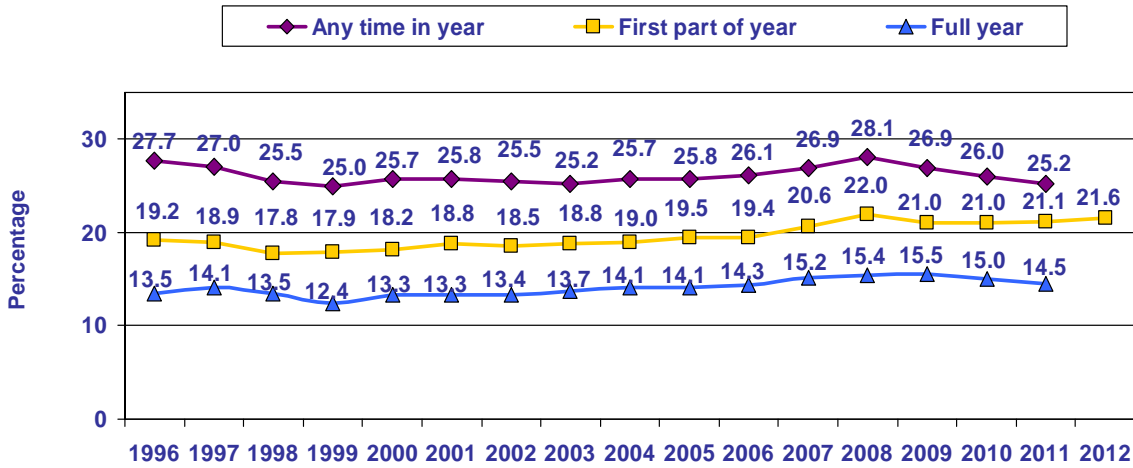
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AHRQ welcomes questions and comments from readers of this publication who are interested in obtaining more information about access, cost, use, financing, and quality of health care in the United States. We also invite you to tell us how you are using this Statistical Brief and other MEPS data and tools and to share suggestions on how MEPS products might be enhanced to further meet your needs. Please email us at MEPSProjectDirector@ahrq.hhs.gov or send a letter to the address below:

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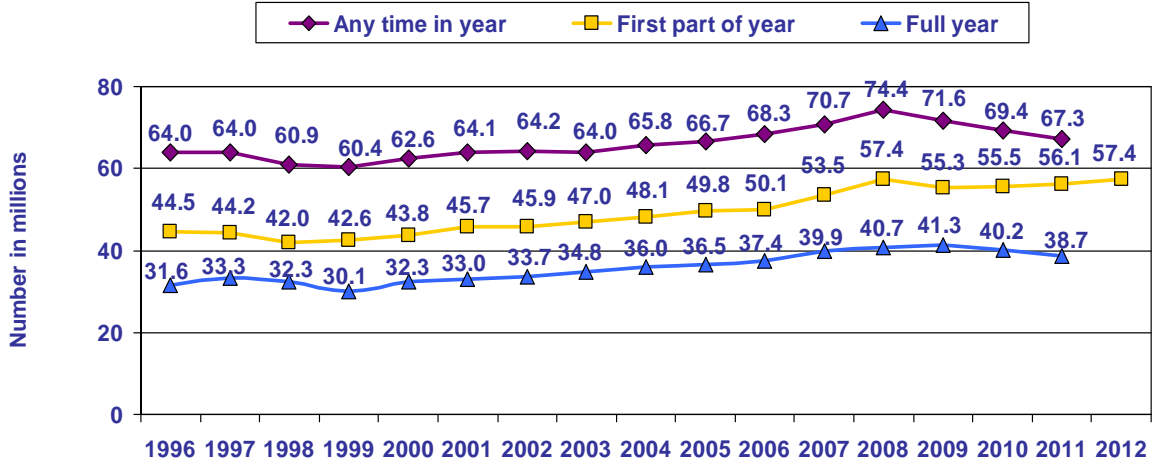
**Figure 1. MEPS, 1996–2012:
Percentage uninsured, under age 65**



Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 1996–2011 Full Year and 1996–2012 Point-in-Time Files



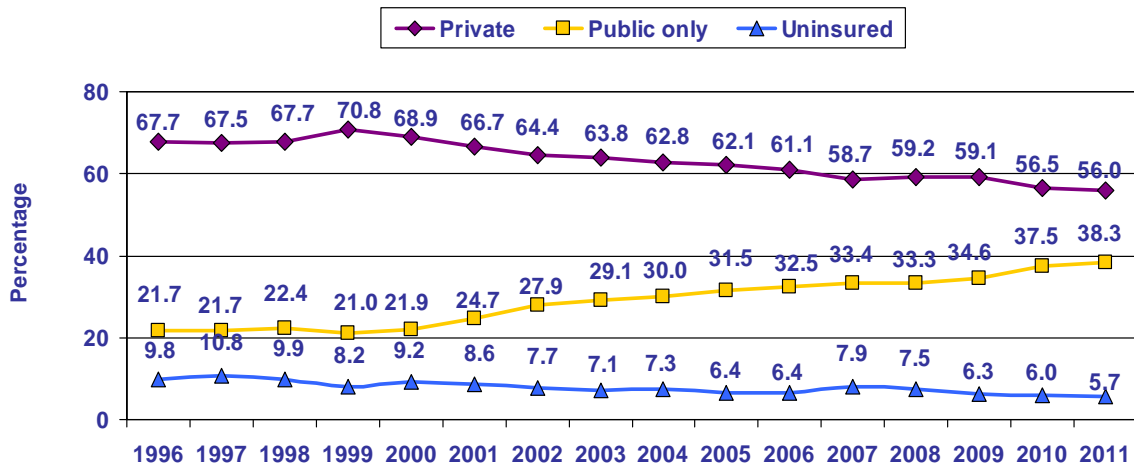
**Figure 2. MEPS, 1996–2012:
Number of uninsured, under age 65**



Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 1996–2011 Full Year Files and 1996–2012 Point-in-Time Files



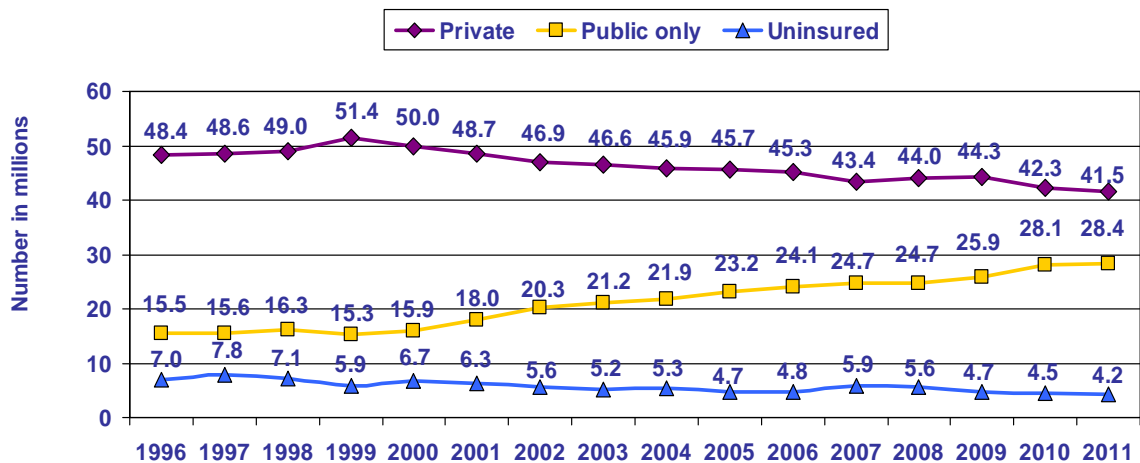
Figure 3. MEPS, 1996–2011: Percentage of children (under age 18) by full year insurance status



Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 1996–2011 Full Year Files



Figure 4. MEPS, 1996–2011: Number of children (under age 18) by full year insurance status



Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 1996–2011 Full Year Files