Health Insurance Coverage
Statistics from the Census Bureau

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US Census Bureau

FESAC
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Census Bureau Statistics on Health

Social Determinants of Health
- Age
- Ancestry
- Commuting patterns (distance/time)
- Disability
- Educational attainment
- Employer type (industry, class of work)
- Employment status
- Fertility
- Food stamps receipt
- Grandparents as caregivers
- Household and family composition
- Housing value
- Income and earnings amounts
- Labor force status
- Language spoken and English ability
- Marital status
- Mobility
- Nativity status/citizenship
- Number of children
- Other income sources
- Perceived Health status
- Poverty
- Race and ethnicity
- School enrollment
- Sex
- Transportation to work
- Type of work (occupation)
- Veterans Disability
- Veterans status
- Wealth
- Well-being: basic needs, consumer durables, ability to get help, food security, fear of crime

Physical Determinants of Health
- Housing
  - Age of housing
  - Plumbing
  - Heating
  - Housing cost (monthly)
  - Housing conditions

Health care costs and financing
- Health care costs (Insured/not)
- Types of health insurance
- Spells of health insurance
- Employer health insurance take-up
- Reasons not covered
- Out-of-pocket spending (MOOP)
- Family Care

Health care services
- Accessability
- Health Care Workers
- Number of medical personnel
- Availability of medical offices/hospitals
- Types of medical services
- Utilization of health services
People by Type of Health Insurance Coverage: 1999 to 2012

- Any private coverage
- Employment-based coverage
- Government coverage
- Uninsured rate
American Community Survey
Health Insurance by type, small geography

American Community Survey (ACS)

Is this person CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark “Yes” or “No” for EACH type of coverage in items a – h.

a. Insurance through a current or former employer or union (of this person or another family member)
   Yes  No
b. Insurance purchased directly from an insurance company (by this person or another family member)
   Yes  No
c. Medicare, for people 65 and older, or people with certain disabilities
   Yes  No
d. Medicaid, Medical Assistance, or any kind of government assistance plan for those with low incomes or a disability
   Yes  No
e. TRICARE or other military health care
   Yes  No
f. VA (including those who have ever used or enrolled for VA health care)
   Yes  No
g. Indian Health Service
   Yes  No
h. Any other type of health insurance or health coverage plan – Specify
   

Figure 3.
Change in Percentage of Young Adults Aged 19 to 25 With Private Health Insurance for the United States and Puerto Rico: 2009 to 2011

Note: A state abbreviation surrounded by the “*” symbol denotes the value for the state’s change is statistically different from zero.

ACS Enhancement: Small Area Health Insurance Estimates (SAHIE)

Only source of single-year estimates of health insurance coverage for every county in the U.S.
Survey of Income and Program Participation

- Cross-sectional and longitudinal
- Transitions, churning
- Core and Topical Module questions
- Focus on low-income
- 3, 4, and 5 year panels, since 1984
- Follows people when they move
- National level primarily, state
- Current panel started 2008
- Re-designed SIPP 2014

Health Status by Age: 2010

Source: Survey of Income and Program Participation, 2010
## ACS Medicaid Undercount

<table>
<thead>
<tr>
<th></th>
<th>Count</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Original Uninsured</td>
<td>40.9 million</td>
<td>15.4%</td>
</tr>
<tr>
<td>Estimate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Partially Adjusted</td>
<td>37.7 million</td>
<td>14.2%</td>
</tr>
<tr>
<td>Uninsured Estimate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: 2008 American Community Survey
The Young and Uninsured in 2012

In 2012, young adults age 19 to 34 years old had the highest uninsured rates of any other age group (26.9 percent). Historically, many young adults lost access to health insurance when they moved away from home or graduated from college. Young adults transitioning into entry-level or part-time jobs may not have access to employer-sponsored health plans. Eligibility for public health plans, such as Medicaid, is determined by factors such as income level, disability, and citizenship status.

This infographic highlights statistics about uninsured young adults using data from the 2008 through 2012 American Community Surveys (ACS). The ACS collects data on health insurance coverage to enable federal agencies to more accurately distribute resources and better understand state and local health insurance needs.

The 18 million uninsured 19- to 34-year-olds in 2012 accounted for 40 percent of the uninsured population under the age of 65.

Change in Uninsured Rates 2008–2012

Since the implementation of the September 23, 2010 policy change that allows dependents to remain on their parents’ health insurance plan until their 26th birthday, the trend in health care coverage for the 19- to 25-year-old age group has seen a significant shift, while the trend for 26- to 34-year-olds has remained relatively stable.
Supplemental Poverty Measure (SPM)

- Based on National Academy of Sciences expert panel recommendations
- Census Bureau, in collaboration with BLS, has produced the report for three years
- It will not replace the official poverty measure, but complement it
- Includes after-tax and transfer income and subtracts non-discretionary expenses - work expenses, child care, child support and medical out of pocket expenses.
- As a result, increases in insurance purchase or premium costs could increase poverty, while increases in government transfers could decrease poverty
Uninsured rate for adults, aged 18-64, for NHIS, ACS, CPS, MEPS, SIPP

* MEPS and SIPP estimate the uninsured rate for all the year
What the Census Bureau Collects in the Future
Exchanges and the Health Insurance Marketplace

Health insurance exchanges

- ASEC: Was that coverage through the [Health Insurance Marketplace/state-specific exchange]?
- SIPP: Did you get any of your health coverage through the Health Insurance Exchange during 2013? For example, in [your state], there are Exchange Programs through the [Health Insurance Marketplace/state-specific exchange].

SHOP plans

- ASEC: Small businesses can offer health coverage to their employees through the [SHOP Marketplace/state-specific exchange]. Is the coverage at all related to the [SHOP Marketplace/state-specific exchange]?
- SIPP: see exchange question above
Subsidized Premiums

Premiums

• ASEC: Was there a monthly premium for this plan?
• SIPP: Was there a monthly premium for your health coverage during 2013?

Subsidized premiums

• ASEC: Was the cost of the premium subsidized based on family income?
• SIPP: Was the cost of the premium subsidized based on your family income?
(Re)classifying Health Insurance Types

Option 1: Use existing categories and flag people with exchange-based and subsidized coverage

Option 2: Create new categories of coverage, reassigning people from existing plan types when necessary
Changes to the American Community Survey (ACS)

ACS Content Test

Cognitive interviews (2015-2016), Content test (2017-2018), Implementation in 2019

Testing modifications to Question 16:

Limit over-reporting of direct purchase

Improve reporting of state-based medical assistance

Understand how exchange-based coverage is reported
Changes to the American Community Survey (ACS)

Addition of question on exchanges:

• Prior testing suggested only subsidy-related possible

• New testing will determine if one question on exchange participation is possible.

17. a. Is there a monthly premium for this plan? A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription costs.

  □ Yes
  □ No

b. Is the cost of the premium subsidized based on family income?

  □ Yes
  □ No
ESI Take-Up Questions

Employer-Sponsored Insurance (ESI) Take-Up questions are available in both the CPS Redesign and SIPP-EHC

CPS Redesign:
• Four questions
• Copied from the February CPS Contingent Worker Supplement
• Reference Period: Point-in-Time

SIPP-EHC:
• Two questions
• Similar to CPS questions
• Reference Period: Calendar Year

2008 SIPP has take-up questions
(In percent)

<table>
<thead>
<tr>
<th>Year</th>
<th>Other health insurance</th>
<th>Too costly</th>
<th>Other reasons</th>
<th>No need or want</th>
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<tbody>
<tr>
<td>1997</td>
<td>77.0</td>
<td>21.6</td>
<td>4.6</td>
<td>4.7</td>
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<tr>
<td>2002</td>
<td>73.9</td>
<td>21.3</td>
<td>4.8</td>
<td>3.5</td>
</tr>
<tr>
<td>2005</td>
<td>71.7</td>
<td>23.4</td>
<td>4.3</td>
<td>2.1</td>
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<tr>
<td>2010</td>
<td>66.4</td>
<td>27.4</td>
<td>4.2</td>
<td>2.5</td>
</tr>
</tbody>
</table>

Notes: "Other reasons" category is composed of write-ins. Categories do not sum to 100 percent since respondents may select more than one category.

Additional Reasons Not Insured

SIPP-EHC provides several more questions on reasons for being uninsured that should be useful for ACA analyses.

**Why did not obtain coverage:**

**Direct Purchase**
- For 2015 survey (asking about 2014), question will be changed to ask specifically about *Health Exchange Coverage*

**Medical Assistance (Medicaid)**

**Why coverage ended:**
- Asked about ESI, Direct-Purchase, Medical Assistance, Military, and Other plans

Questions asked for all ages (including children)
SIPP Enhancement

Thus, SIPP does not only ask about employment-based coverage among working adults. Regardless of employment status or age, SIPP now asks why respondents have not enrolled specifically in:

• Exchange/Direct-Purchase Insurance
• Medicaid

Including reasons such as:

• Too expensive
• Denied/not eligible
• Healthy (didn’t need coverage)
• Dissatisfied/Don’t believe in insurance
• Too difficult or confusing
Contact

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