

Fact Sheet: Health Insurance Coverage: 2015

In this fact sheet, we explore the various Census Bureau sources of data on health insurance coverage.

Current Population Survey Annual Social and Economic Supplement (CPS ASEC)

Key fact: Produces national-level estimates on health insurance coverage for a wide range of population subgroups.

- The CPS ASEC produces national-level estimates for a wide range of demographic and economic characteristics, including family status, race and Hispanic origin, age, metropolitan residence, income, poverty status, and work experience.
- The survey collects detailed income and employment information, making it possible to view changes in health insurance coverage in relation to changes in the overall economic well-being of the nation.
- Due to re-designed health insurance questions, estimates for calendar year 2013 and later years are not comparable to the estimates from 2012 or earlier.

American Community Survey (ACS)

Key fact: Produces estimates on health insurance coverage at the national and subnational levels.

- The ACS is the largest survey that collects health insurance coverage data (3.5 million addresses annually), making it possible to assess changes in health insurance coverage at the sub-national level.
- The survey provides single-year estimates for states, counties, cities, and congressional districts. Since December 2013, the ACS also produces estimates for the nation's smallest areas, such as census tracts and block groups, based on 5-year estimates.
- The ACS can provide historic comparisons of health insurance coverage rates, since its health insurance questions have not changed since first introduced in 2008.

Small Area Health Insurance Estimates (SAHIE)

Key fact: Only source of single-year health insurance coverage estimates for every county.

- SAHIE are the only single-year estimates on health insurance coverage published annually for each of the nation's counties and states. The estimates are available by age, sex, income category and (for states only) by race and Hispanic origin. The income categories include all incomes, 0-138, 138-400, 0-200, 0-250 and 0-400 percent of poverty. The data pertain to the population under age 65.
- SAHIE are model-based estimates that combine health insurance survey estimates with timely administrative data and population estimates. SAHIE provide "enhanced" American Community Survey (ACS) 1-year estimates that typically have smaller margins of error and lower year-to-year volatility than those from the ACS alone.
- The estimates are available annually from 2005 onwards. Starting with the 2008 estimates, SAHIE were modeled using the ACS, and, prior to that, SAHIE were modeled using the Current Population Survey Annual Social and Economic Supplement (CPS ASEC).

Survey of Income and Program Participation (SIPP)

Key fact: Provides information on how long people are covered by health insurance, or how long they go without it, over a period of time.

- SIPP provides monthly health insurance coverage data across a period of several years. Data can identify patterns of health insurance coverage dynamics, as well as variation across demographic and economic groups.
- In 2014, the SIPP introduced a new method of collecting data. The 2014 (wave 1) survey produces estimates for 2013, providing a baseline prior to the implementation of major provisions of the Affordable Care Act in 2014.
- Starting with the 2014 Panel, the SIPP also collects information on employer-sponsored insurance offers and take-up, as well as on medical out-of-pocket expenses. Starting with 2015, the SIPP asks a question on marketplace participation in the prior calendar year.

National Health Interview Survey (NHIS)

Key fact: Data collected by Census Bureau but published by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention.

- Data are available on a quarterly basis.
- Coverage data are shown by type of health insurance (direct-purchase insurance, employment-based insurance, Medicare, etc.)
- Three measures are provided for the uninsured: uninsured at the time of the interview, uninsured at least part of the year prior to the interview, and uninsured for more than a year at the time of the interview.
- National-level information shown by a variety of demographic characteristics, including poverty status, race and Hispanic origin, age, and sex.
- State-level estimates of persons uninsured at the time of the interview are provided, as are estimates of those with public or private coverage. In 2014, the NHIS provided state-level estimates for all 50 states and the District of Columbia for persons of all ages, persons under age 65 and adults ages 18-64. State-level estimates were provided for 40 states for children ages 0-17. The provisions of state-level estimates are based on considerations of sample size and precision.
- Health insurance estimates are available periodically from 1959, and annually since 1989.
- These data enable policymakers to examine health insurance in relation to health, health behaviors and health care utilization.

Medical Expenditure Panel Survey (MEPS)

Key fact: Data collected by Census Bureau and other agencies but published by the Department of Health and Human Services.

- A set of large-scale surveys of families and individuals, their medical providers (doctors, hospitals, pharmacies, etc.) and employers across the United States.
- Collects data on the specific health services that Americans use, how frequently they use them, the cost of these services and how they are paid for, as well as data on the cost, scope and breadth of health insurance held by and available to U.S. workers.
- Began in 1996.

Health Industries

The Census Bureau also provides data on health care providers and health insurance industries from a variety of surveys and programs that collect data on businesses. Such industries are found in two different sectors of the economy. One is finance and insurance, which comprises establishments primarily engaged in financial transactions or in facilitating them. Much of this information would pertain to the direct life, health, and medical insurance carriers industry.

The other sector is health care and social assistance. Industries in this sector are arranged in a continuum starting with those providing medical care exclusively and finishing with those providing only social assistance. It includes scores of relevant industries, such as hospitals, HMO medical centers, home health care services and blood and organ banks. Data are available for these industries by using the following sources:

- [County Business Patterns](#) (Data for 2013 for states and counties on establishments and employment).
 - [Health and Medical Insurance](#).
 - [Healthcare and Social Assistance](#).
- [Nonemployer Statistics](#) (Data for 2013 for states, counties and metro areas on establishments and receipts).
 - Nonemployer statistics does not have insurance carriers past the 4-digit level.
 - [Healthcare and Social Assistance](#).
- [2012 Economic Census](#) (Data on establishments, employment, revenues, and sales; at the national level in the Industry Series and to the place level in the Geographic Area Series).
 - [Industry Series- Health and Medical Assistance](#).
 - [Industry Series- Healthcare and Social Assistance](#).
 - [Geographic Area Series- Health and Medical Assistance](#).
 - [Geographic Area Series- Healthcare and Social Assistance](#).
- [Statistics of U.S. Businesses](#).
- [Service Annual Survey](#).
- [Quarterly Services Survey](#).
- [Quarterly Workforce Indicators](#).

[Industry Snapshot for Direct Health and Medical Insurance Carriers](#)

[Industry Snapshot for Healthcare and Social Assistance](#)