

NATIONAL HEALTH INTERVIEW SURVEY EARLY RELEASE PROGRAM

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, 2014

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Highlights

- In 2014, 36.0 million persons of all ages (11.5%) were uninsured at the time of interview, 51.6 million (16.5%) had been uninsured for at least part of the year prior to interview, and 26.3 million (8.4%) had been uninsured for more than a year at the time of interview.
- Among persons under age 65, 63.6% (170.4 million) were covered by private health insurance plans at the time of interview. This includes 2.2% (5.9 million) covered by private plans through the Health Insurance Marketplace or state-based exchanges at the time of interview between January and December 2014. The proportion with exchange coverage increased from 1.4% (3.7 million) in the first quarter of 2014 (January–March) to 2.5% (6.7 million) in the fourth quarter of 2014 (October–December).
- Among adults aged 18–64, the percentage who were uninsured at the time of interview decreased from 20.4% in 2013 to 16.3% in 2014.
- Among adults aged 19–25, the percentage who were uninsured at the time of interview decreased from 26.5% in 2013 to 20.0% in 2014.
- In 2014, the percentage of persons under age 65 who were uninsured at the time of interview varied by state. For example, 2.5% were uninsured in Hawaii, whereas 21.5% were uninsured in Oklahoma and Texas.

Introduction

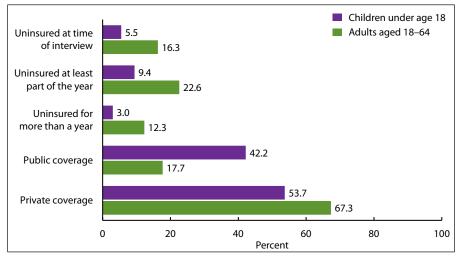
The Centers for Disease Control and Prevention's (CDC) National Center for Health Statistics (NCHS) is releasing selected estimates of health insurance coverage for the civilian noninstitutionalized U.S. population based on data from the 2014 National Health Interview Survey (NHIS), along with comparable estimates from the 2009–2013 NHIS. Estimates for 2014 are based on data for 111,682 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 (Tables 1 and 2). Estimates of public and private coverage are also presented (Table 3). Table 3 also includes estimates for 1997 and 2005.

Additional tables present estimates of uninsurance, 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.

Figure 1. Percentage of persons without health insurance, by age group using three measures of noncoverage, and percentage of persons with health insurance at time of interview, by coverage type and age group: United States, 2014



NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2014, Family Core component.

For individuals with private health insurance, estimates are presented in Tables 10 and 11 for enrollment in highdeductible healthplans (HDHPs), enrollment in consumer-directed health plans (CDHPs), and being in a family with a flexible spending account (FSA) for medical expenses.

This report includes four tables that address regional and state differences. Tables 12 and 13 present estimates of uninsurance, public coverage, and private coverage by each state's Affordable Care Act (ACA) of 2010 (P.L. 111-148, P.L. 111–152) implementation characteristics. Specifically, Table 12 presents estimates by state Medicaid expansion status as of October 31, 2013. Table 13 shows estimates by state Health Insurance Marketplace type. Expanded regional and state-level estimates of uninsurance at the time of interview, and public and private coverage, are presented in Tables 14 and 15. Statespecific health insurance estimates are presented for all 50 states and the District of Columbia for persons of all ages, persons under age 65, and adults aged 18-64; and for 40 states for children aged 0-17.

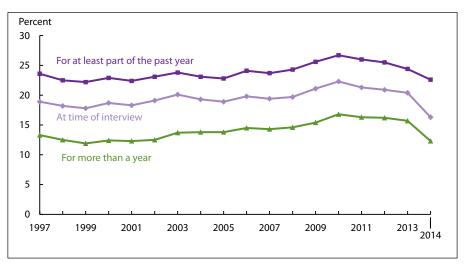
Most of the tables in this report provide estimates prior to and after implementation of the Health Insurance Marketplaces and Medicaid expansion provisions that began in January 2014. The 2014 estimates after implementation are based on a full year of data collected from January through December 2014 and, therefore, are centered around the midpoint of this period.

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.

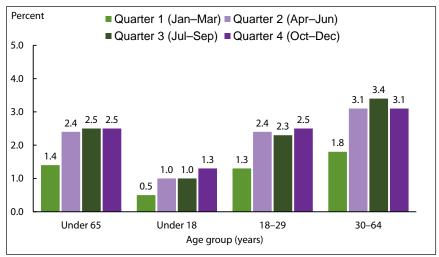
Estimates for each calendar quarter, by selected demographics, are also available as a separate set of tables through the ER program. For more information about NHIS and the ER Program, see the Technical Notes and the Additional Early Release Program Products sections at the end of this report.

Figure 2. Percentages of adults aged 18-64 who lacked health insurance coverage at time of interview, for at least part of the past year, or for more than a year: United States, 1997-2014



NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997–2014, Family Core componen

Figure 3. Percentage of persons under age 65 with private health insurance obtained through the Health Insurance Marketplace or state-based exchanges, by age group and quarter: United States, 2014



NOTES: Data include persons who have purchased a private health insurance plan through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111–148, P.L. 111–152). All persons who have exchange-based coverage are considered to have private health insurance. Data are based on household interviews of a sample of the civilian noninstitutionalized

population.
DATA SOURCE: CDC/NCH5, National Health Interview Survey, 2014, Family Core component.

Results

Lack of health insurance coverage

In 2014, the percentage of persons uninsured at the time of interview was 11.5% (36.0 million) for persons of all ages, 13.3% (35.7 million) for persons under age 65, 5.5% (4.0 million) for children aged 0-17, 16.3% (31.7 million) for adults aged 18-64, and 20.0% (6.0 million) for adults aged 19-25 (Tables 1 and 2). Adults aged 18-64 were almost

three times as likely as children to be uninsured at the time of interview (Table 1 and Figure 1).

The percentage of persons uninsured for at least part of the year was 16.5% (51.6 million) for persons of all ages, based on data from 2014 (Tables 1 and 2). Among persons under age 65, 19.0% (50.8 million) were uninsured for at least part of the year. Adults aged 18-64 were more than twice as likely (22.6%) as children (9.4%) to experience this lack of coverage (Table 1 and Figure 1). Among adults aged 19-25, 26.9% had

been uninsured for at least part of the past year.

Regarding persistent lack of coverage, 8.4% (26.3 million) of persons of all ages had been uninsured for more than a year (Tables 1 and 2). Among persons under age 65, 9.7% (26.1 million) had been uninsured for more than a year. Adults aged 18–64 were more than four times as likely (12.3%) as children (3.0%) to have been uninsured for more than a year (Table 1 and Figure 1). Among adults aged 19–25, the percentage uninsured for more than a year was 14.2% (Table 1).

From 2013 to 2014, significant decreases were noted in the percentages of persons who were uninsured at the time of interview among persons of all ages, those under age 65, those aged 18–64, those aged 19–25 and children aged 0–17. The largest decrease was for adults aged 19–25, from 26.5% in 2013 to 20.0% in 2014.

For all age groups except children, significant decreases were seen in the percentages of persons who were uninsured at least part of the year prior to interview between 2013 and 2014. The largest decrease was for adults aged 19–25, from 31.3% in 2013 to 26.9% in 2014.

For all age groups, decreases were noted from 2013 to 2014 in the percentage of persons who had been uninsured for more than a year. For this measure of persistent lack of coverage, the largest decrease was for adults aged 19–25, from 19.8% in 2013 to 14.2% in 2014.

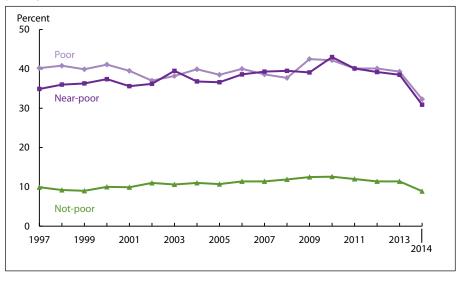
The percentages of adults aged 18–64 who were uninsured at the time of interview, who lacked coverage for at least part of the past year, and who had been uninsured for more than a year had generally increased from 1997 to 2010, but decreased from 2010 to 2014 (Figure 2).

Among children aged 0-17, the percentage who were uninsured at the time of interview has generally decreased, from 13.9% in 1997 to 5.5% in 2014 (Table 3).

Public and private coverage

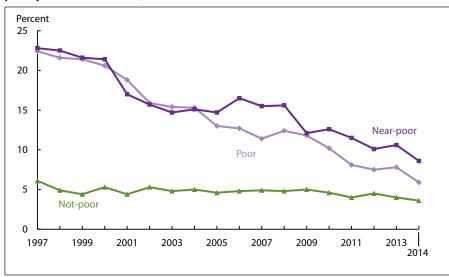
In 2014, 24.5% of persons under age 65 were covered by public health plans at the time of interview (Table 3). More than two-fifths of children were

Figure 4. Percentage of adults aged 18–64 who were uninsured at the time of interview, by poverty status: United States, 1997–2014



NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997–2014, Family Core component.

Figure 5. Percentage of children under age 18 who were uninsured at the time of interview, by poverty status: United States, 1997–2014



NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. DATA SOURCE: CDC/NCHS, National Health Interview Survey, 1997–2014, Family Core component.

covered by a public plan(42.2%), compared with 17.7% of adults aged 18–64 (Table 3 and Figure 1). Public coverage among adults aged 18–64 increased from 16.7% in 2013 to 17.7% in 2014. Public coverage among adults aged 19–25 was 19.1% in 2014 (Table 3), a significant increase from 2013 (16.1%). Between 2013 and 2014, no significant changes were seen in the percentage of persons with public coverage among persons of all ages, those under 65, and children aged 0–17.

Among adults aged 18–64, public coverage increased between 1997 (10.2%) and 2014 (17.7%) (Table 3). Among children, the percentage with public coverage almost doubled between 1997 (21.4%) and 2014 (42.2%).

Among persons under age 65, 63.6% (170.4 million) were covered by private health insurance plans at the time of interview in 2014 (Table 3). This includes 2.2% (5.9 million) covered by private plans obtained through the Health Insurance Marketplace or statebased exchanges. A significant increase

was noted in the percentage of persons under age 65 covered by plans obtained through the Health Insurance Marketplace or state-based exchanges, from 1.4% (3.7 million) in the first quarter of 2014 (January through March) to 2.5% (6.7 million) in the fourth quarter of 2014 (October through December) (Figure 3).

Additional Health Insurance
Marketplace or state-based exchange
estimates by age, sex, race/ethnicity, and
poverty status are available for the fourth
quarter of 2014 (based on data collected
from October through December)
through the Early Release Program
(http://www.cdc.gov/nchs/data/nhis/
earlyrelease/

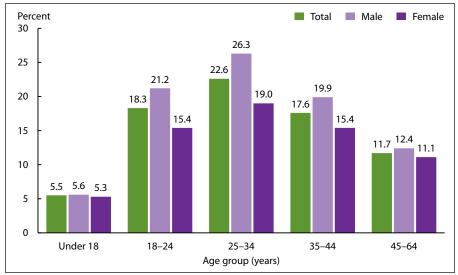
Q_Estimates_2010_2014_Q 4.pdf).

More than two-thirds of adults aged 18–64 were covered by a private plan (67.3%), compared with 53.7% of children under age 18 (Table 3 and Figure 1). Among adults aged 19–25, 61.9% were covered by a private plan. Among adults aged 18–64, 2.7% (5.2 million) were covered by private plans obtained through the Health Insurance Marketplace or state-based exchanges. Among children under age 18 and adults aged 19-25, 0.9% and 1.9%, respectively, were covered by private plans obtained through the Health Insurance Marketplace or state-based exchanges. Among children under age 18, adults aged 18-29, and adults aged 30-64, a significant increase was seen in the percentages with private coverage obtained through the Health Insurance Marketplace or state-based exchanges between the first quarter of 2014 (January through March) and the fourth quarter of 2014 (October through December) (Figure 3).

For all age groups except children aged 0–17, increases were observed between 2013 and 2014 in the percentage of persons covered by a private plan (Table 3).

The percentage with private coverage generally decreased among persons under age 65 between 1997 and 2014 (Table 3) but remained stable from 2010 to 2013. Among adults aged 18–64, private coverage was more than 5 percentage points lower in 2014 (67.3%) than in 1997 (72.8%). Among children,

Figure 6. Percentage of persons under age 65 without health insurance coverage at the time of interview, by age group and sex: United States, 2014



NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population. DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2014, Family Core component.

private coverage decreased between 1997 (66.2%) and 2014 (53.7%).

Health insurance coverage, by poverty status

In 2014, 22.3% of poor, 23.5% of near-poor, and 7.6% 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, 62.1% of poor, 41.1% of near-poor, and 9.9% of not-poor persons in this age group had public coverage. Private coverage was highest among those who were not-poor (83.7%) and lowest among those who were poor (16.6%).

Among adults aged 18–64, 32.3% of poor, 30.9% of near-poor, and 8.9% of not-poor adults did not have health insurance coverage at the time of interview (Table 5). During the same period, 46.6% of poor, 29.6% of near-poor, and 8.5% of not-poor adults in this age group had public coverage. Private coverage was highest among those who were not-poor (83.9%) and lowest among those who were poor (21.9%).

Among children aged 0–17, 5.9% of poor, 8.6% of near-poor, and 3.6% of not-poor children did not have health insurance coverage at the time of interview (Table 6). During the same period, 87.3% of poor, 64.3% of near-poor, and 14.4% of not-poor children had

public coverage. Private coverage among children was highest among those who were not-poor (83.1%) and lowest among those who were poor (8.0%).

Among persons under age 65 who were poor, near-poor, or not-poor, a significant decrease was seen in the percentage who were uninsured between 2013 and 2014 (Table 4). For poor persons under age 65, an increase was noted from 2013 to 2014 in the percentage of persons with public coverage, from 59.0% to 62.1%. For near-poor and not-poor persons under age 65, significant increases were seen between 2013 and 2014 in the percentage of persons covered by a private plan.

Among adults aged 18–64, for every poverty status group, a significant decrease was seen in the percentage who were uninsured between 2013 and 2014 (Table 5). Among poor adults aged 18–64, the percentage who were uninsured decreased from 39.3% to 32.3%, the percentage with public coverage increased from 42.4% to 46.6%, and the percentage with private coverage increased from 19.0% to 21.9% from 2013 to 2014.

Among adults in this age group who were near-poor, the percentage who were uninsured decreased from 38.5% to 30.9%, the percentage with public coverage increased from 26.6% to 29.6%, and the percentage with private coverage

increased from 36.4% to 41.2% between 2013 and 2014.

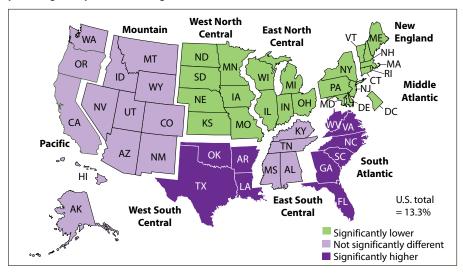
Among adults aged 18–64 who were not-poor, the percentage who were uninsured decreased from 11.4% to 8.9% between 2013 and 2014. Private coverage increased from 81.2% in 2013 to 83.9% in 2014. There was no change in the percentage with public coverage from 2013 to 2014.

Among poor and near-poor children, a significant decrease was noted in the percentages who were uninsured between 2013 and 2014 (Table 6). The percentage who were uninsured decreased from 7.8% to 5.9% among poor children between 2013 and 2014. Among near-poor children, the percentage who were uninsured decreased from 10.6% to 8.6% between 2013 and 2014. There were no significant changes in public coverage among poor, near-poor, and not-poor children between 2013 and 2014. Among not-poor children, the percentage with private coverage increased from 81.2% in 2013 to 83.1%in 2014. There were no significant changes in private coverage among children who were poor or near-poor between 2013 and 2014.

The percentage of poor adults aged 18–64 who were uninsured remained relatively stable from 1997 through 2013, with a significant decrease between 2013 and 2014 (Figure 4). Among nearpoor and not-poor adults in this age group, a generally increasing trend was seen from 1997 to 2010 in the percentage who were uninsured. However, there has been a decreasing trend from 2010 to 2014 in the uninsured among near-poor and not-poor adults.

The percentage of poor and near-poor children who were uninsured at the time of interview decreased from 1997 through 2014 (Figure 5). However, the rate of decline during this period was greater for poor children. 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 2006, and then decreased from 2006 through 2014. The percentage of not-poor children who were uninsured at the time of interview has generally decreased from 6.1% in 1997 to 3.6% in 2014.

Figure 8. Uninsured at the time of interview, comparing expanded regions and national percentages for persons under age 65: United States, 2014



NOTES: Expanded regions are based on a subdivision of the four census regions into nine divisions. For this report, the nine census divisions were modified by moving Delaware, the District of Columbia, and Maryland into the Middle Atlantic Division. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2014, Family Core component.

Health insurance coverage, by selected demographic characteristics

Age and sex

In 2014, adults aged 25–34 were the most likely (22.6%) to lack health insurance coverage at the time of interview (Table 7). Among persons under age 65, children aged 0–17 were the most likely to have public coverage (42.2%), and adults aged 45–64 were the most likely to have private coverage (71.5%). Among adults in age groups 18–24, 25–34, 35–44, and 45–64, men were more likely than women to lack health insurance coverage at the time of interview (Figure 6).

Race/ethnicity

In 2014, among persons under age 65, 25.2% of Hispanic, 13.5% of non-Hispanic black, 10.6% of non-Hispanic white persons were uninsured at the time of interview (Table 8). Public coverage was highest among those who were non-Hispanic black (40.3%). Private coverage was highest among those who were non-Hispanic white (73.6%) and non-Hispanic Asian (73.4%).

For Hispanic persons under age 65, the percentage uninsured decreased from 30.3% in 2013 to 25.2% in 2014. For

non-Hispanic white persons under age 65, the percentage uninsured decreased from 12.1% in 2013 to 9.8% in 2014. For non-Hispanic black persons under age 65, the percentage uninsured decreased from 18.9% in 2013 to 13.5% in 2014. For non-Hispanic Asian persons under age 65, the percentage uninsured decreased from 13.8% in 2013 to 10.6% in 2014.

Other demographic characteristics

Among adults aged 18–64 who lacked a high school diploma, 34.0% were uninsured at the time of interview (Table 9). This rate is greater than three times the rate for those with more than a high school education (10.0%). Public health plan coverage was highest among those who lacked a high school diploma (34.0%) and lowest among those with more than a high school education (12.2%). Private coverage was highest among those who had more than a high school education (79.1%) and lowest among those who lacked a high school diploma (33.3%).

Among currently unemployed adults aged 18–64, 38.7% lacked coverage at the time of interview (Table 9). Among employed adults in the same age group, 14.9% were uninsured. Public health plan coverage was lowest among employed adults (9.5%) and highest among those who were not in the workforce (41.0%). Among employed

adults, 76.2% had private coverage. This rate is almost three times as high as for those who were unemployed (29.6%).

Adults aged 18–64 with family income less than 100%, and between 100% and up to and including 138%, of the federal poverty level (FPL) were the most likely to be uninsured relative to other income groups. Adults aged 18–64 with family incomes less than 100% FPL were the most likely to have public coverage. Those with family income greater than 400% FPL were the most likely to have private health insurance coverage.

Married adults aged 18–64 were less likely to be uninsured at the time of interview than those who were widowed, 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

In 2014, 36.9% of persons under age 65 with private health insurance were enrolled in an HDHP, including 13.3% who were enrolled in a CDHP (an HDHP with a health savings account [HSA]) and 23.6% who were enrolled in an HDHP without an HSA (Figure 7 and Table 10). (See Technical Notes for definitions of HDHP, CDHP, and HSA.) Among those with private insurance, the percentage who were enrolled in an HDHP increased between 2013 (33.9%) and 2014 (36.9%).

HDHPs constitute a significant share of both employment-based and directly purchased health plans. Based on data from 2014, among persons under age 65 with private health insurance, 36.2% with employment-based coverage were enrolled in an HDHP (Table 11), an increase from 2013 (32.0%). Also in that age group, 54.1% with directly purchased private health plans were enrolled in an HDHP in 2014. This was a decrease from 2013 (56.4%).

In 2014, among persons under age 65 with private health insurance, 21.2% were in a family that had an FSA for medical expenses (Table 10). (See Technical Notes for definition of FSA.)

Health insurance coverage, by state Medicaid expansion status

Under provisions of ACA, states have the option to expand Medicaid coverage to those with low income. Health insurance estimates by state Medicaid expansion status (as of October 31, 2013), including the District of Columbia, are presented for all persons under age 65, children aged 0–17, and adults aged 18–64 (Table 12). (See Technical Notes for definitions of Medicaid expansion status.)

In 2014, adults aged 18–64 residing in Medicaid expansion states were less likely to be uninsured than those residing in nonexpansion states. In Medicaid expansion states, the percentage of those uninsured decreased from 18.4% in 2013 to 13.3% in 2014. In nonexpansion states, the percentage uninsured decreased from 22.7% in 2013 to 19.6% in 2014.

In 2014, adults aged 18–64 in Medicaid expansion states were more likely to have public coverage (19.9%) than those in nonexpansion states (15.3%). In Medicaid expansion states, an increase was observed in public coverage from 17.7% in 2013 to 19.9% in 2014. In nonexpansion states, there was no significant change in public coverage between 2013 and 2014.

In 2014, among adults aged 18–64, those in Medicaid expansion states were more likely to have private coverage (68.1%) than those in nonexpansion states (66.5%). Among adults aged 18–64 in Medicaid expansion states, the percentage with private coverage increased from 65.2% in 2013 to 68.1% in 2014. Among adults aged 18–64 in nonexpansion states, the percentage with private coverage increased from 63.2% in 2013 to 66.5% in 2014.

Health insurance coverage, by state Health Insurance Marketplace type

Health insurance estimates by state Health Insurance Marketplace type (as of October 31, 2013), including the District of Columbia, are presented for all persons under age 65, children aged 0–17, and adults aged 18–64 (Table 13). (See Technical Notes for definitions of Marketplace types.) In 2014, adults aged 18–64 in states with a federally facilitated Marketplace were more likely to be uninsured than those in states with a state-based Marketplace or states with a partnership Marketplace. Decreases were seen in the uninsured rates between 2013 and 2014 in states with a state-based Marketplace, a partnership Marketplace, and a federally facilitated Marketplace for persons under age 65 and for adults aged 18–64. For children in states with a state-based Marketplace, a decrease was noted in the uninsured rate between 2013 and 2014.

In 2014, adults aged 18–64 in states with a state-based Marketplace were more likely to have public coverage than those in states with a partnership Marketplace or federally facilitated Marketplace. Among those in states with a state-based Marketplace, the percentage with public coverage increased from 18.4% in 2013 to 20.6% in 2014. There were no significant changes between 2013 and 2014 in the percentages of adults aged 18–64 with public coverage in states with a partnership Marketplace or federally facilitated Marketplace.

In 2014, adults aged 18–64 in states with a partnership Marketplace were more likely to have private coverage than those in states with state-based exchanges or those in states with a federally facilitated Marketplace. Among those in states with a federally facilitated Marketplace, the percentage with private coverage increased from 63.6% in 2013 to 66.9% in 2014. Among those in states with a state-based Marketplace, the percentage with private coverage increased from 64.1% in 2013 to 67.0% in 2014.

Health insurance coverage in regions and states

The U.S. Census Bureau divides the United States into four regions. Based on data from 2014 NHIS, lack of health insurance coverage at the time of interview among adults aged 18–64 was greatest in the South region (20.7%) (Table 9). The highest rates of public coverage were in the Northeast (19.2%) and West (18.9%), and the highest rates of private coverage were in the Northeast (70.9%) and Midwest (71.9%).

Alternatively, the United States may be divided into nine expanded regions (Figure 8). Table 14 presents health insurance estimates for persons of all ages, persons under age 65, adults aged 18–64, and children aged 0–17 for these nine expanded regions. (See Technical Notes for definitions of the expanded regions, which are similar to but not exactly the same as Census divisions.)

In 2014, for persons under age 65, rates of uninsurance at the time of interview were significantly higher than the national average of 13.3% in the South Atlantic and West South Central regions (Table 7). By contrast, rates of uninsurance were significantly lower than the national average in the New England, Middle Atlantic, East North Central, and West North Central regions.

In the United States overall, 24.5% of persons under age 65 had public coverage. Public coverage rates for this age group ranged from 19.1% in the West North Central region to 29.5% in the East South Central region (Table 14). The West North Central and West South Central regions had rates that were significantly lower than the national average. The East South Central and Pacific regions had rates that were significantly above the national average.

In the United States overall, 63.6% of persons under age 65 had private coverage. Private coverage rates for this age group ranged from 58.5% in the West South Central region to 72.4% in the West North Central region (Table 14). The New England, Middle Atlantic, East North Central, and West North Central regions had rates significantly above the national average. In contrast, rates of private coverage were significantly lower than the national average in the South Atlantic and West South Central regions.

State-specific health insurance estimates are presented for all 50 states and the District of Columbia for persons of all ages, persons under age 65, and adults aged 18–64, and for 40 states for children aged 0–17 (Table 15). Estimates are not presented for all 50 states and the District of Columbia for children due to considerations of sample size and precision.

Nationally, in 2014, 13.3% of persons under age 65 lacked health insurance coverage at the time of

interview (Table 15). Rates of uninsurance were significantly higher than the national average in Alaska, Arizona, Florida, Mississippi, Nevada, North Carolina, Oklahoma, and Texas. By contrast, rates of uninsurance at the time of interview in Connecticut, Delaware, District of Columbia, Hawaii, Iowa, Maryland, Massachusetts, Michigan, Minnesota, New Hampshire, New Jersey, New York, North Dakota, Ohio, Pennsylvania, Rhode Island, Vermont, West Virginia, and Wisconsin were significantly lower than the national average of 13.3%.

In the United States overall in 2014, 5.5% of children lacked coverage at the time of interview, but among the 40 states shown in Table 15, rates were significantly higher than the national average in Arizona, Nevada, Oklahoma, Texas, and Utah. In contrast, rates of uninsurance at the time of interview in Indiana, Maryland, Massachusetts, Michigan, Minnesota, Pennsylvania, and West Virginia were significantly lower than the national average of 5.5%.

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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, 2009–2014

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			
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	14.4 (0.26)	17.8 (0.27)	10.7 (0.23)
2014	11.5 (0.23)	16.5 (0.25)	8.4 (0.19)
Under 65 years			
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	16.6 (0.30)	20.4 (0.32)	12.4 (0.27)
2014	13.3 (0.26)	19.0 (0.29)	9.7 (0.22)
0–17 years			
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	6.5 (0.26)	10.0 (0.33)	3.6 (0.20)
2014	5.5 (0.27)	9.4 (0.40)	3.0 (0.19)
18–64 years			
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	20.4 (0.37)	24.4 (0.38)	15.7 (0.34)
2014	16.3 (0.31)	22.6 (0.34)	12.3 (0.27)
19–25 years			
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	26.5 (0.71)	31.3 (0.79)	19.8 (0.61)
2014	20.0 (0.65)	26.9 (0.73)	14.2 (0.56)

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.

²In references to "part of the past year" and "more than a year," a year is defined as the 12 months prior to interview.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2009–2014, 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, 2014

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 (millions)	
All ages			
2009	46.3	58.5	32.8
2010	48.6	60.3	35.7
2011	46.3	58.7	34.2
2012	45.5	57.5	34.1
2013	44.8	55.4	33.4
2014	36.0	51.6	26.3
Under 65 years			
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	44.3	54.7	33.1
2014	35.7	50.8	26.1
0–17 years			
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	4.8	7.3	2.6
2014	4.0	6.9	2.2
18–64 years			
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	39.6	47.4	30.5
2014	31.7	44.0	23.9
19–25 years			
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	8.0	9.5	6.0
2014	6.0	8.1	4.3

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.

²In references to "part of the past year" and "more than a year," a year is defined as the 12 months prior to interview.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2009–2014, 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, 1997–2014

	Uninsured ¹ at the time of		Private health insurance
Age group and year	interview	Public health plan coverage ²	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)
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	14.4 (0.26)	33.8 (0.36)	59.5 (0.49)
2014	11.5 (0.23)	34.6 (0.37)	61.8 (0.45)
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)
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	16.6 (0.30)	23.8 (0.35)	61.0 (0.52)
2014	13.3 (0.26)	24.5 (0.36)	63.6 (0.46)
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)
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	6.5 (0.26)	42.2 (0.70)	52.6 (0.76)
2014	5.5 (0.27)	42.2 (0.65)	53.7 (0.68)
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)
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	20.4 (0.37)	16.7 (0.30)	64.2 (0.47)
2014	16.3 (0.31)	17.7 (0.32)	67.3 (0.43)

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, 1997–2014—Continued

Age group and year	Uninsured ¹ at the time of interview	Public health plan coverage ²	Private health insurance coverage ³
_		Percent (standard error)	
9–25 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)
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	26.5 (0.71)	16.1 (0.54)	58.1 (0.84)
2014	20.0 (0.65)	19.1 (0.64)	61.9 (0.88)

¹A person was defined as uninsured if he or she did not have any private health insurance, Medicare, Medicard, 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. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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, 2009–2014

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)			
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	27.3 (0.68)	59.0 (0.81)	14.7 (0.72)
2014	22.3 (0.66)	62.1 (0.80)	16.6 (0.69)
Near-poor (≥100% and <200% FPL)			
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	29.3 (0.70)	39.1 (0.77)	33.4 (0.79)
2014	23.5 (0.60)	41.1 (0.74)	37.3 (0.81)
Not-poor (≥200% FPL)			
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	9.6 (0.24)	10.5 (0.29)	81.2 (0.39)
2014	7.6 (0.20)	9.9 (0.28)	83.7 (0.36)
Unknown			
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	20.5 (0.76)	24.2 (0.94)	56.8 (1.24)
2014	15.0 (0.80)	22.2 (0.91)	64.1 (1.24)

¹FPL is federal poverty level. Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those with incomes 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 Technical Notes. Estimates may differ from estimates that are based on both reported and imputed income.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

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. A small number of persons were covered by both public and private plans and were included in both categories.

^{&#}x27;Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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, 2009–2014

December that well are division	Uninsured ² at the time of	Dublish salah alam sama 3	Private health insurance
Poverty status ¹ and year	interview	Public health plan coverage ³	coverage ⁴
		Percent (standard error)	
Poor (<100% FPL)			
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	39.3 (1.00)	42.4 (0.95)	19.0 (0.97)
2014	32.3 (0.93)	46.6 (0.95)	21.9 (0.92)
Near-poor (≥100% and <200% FPL)			
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	38.5 (0.84)	26.6 (0.78)	36.4 (0.78)
2014	30.9 (0.72)	29.6 (0.76)	41.2 (0.81)
Not-poor (≥200% FPL)			
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	11.4 (0.27)	8.9 (0.26)	81.2 (0.37)
2014	8.9 (0.23)	8.5 (0.26)	83.9 (0.35)
Unknown			
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	24.3 (0.87)	17.6 (0.77)	59.5 (1.11)
2014	17.2 (0.88)	17.2 (0.81)	67.0 (1.20)

¹FPL is federal poverty level. Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those with incomes 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 Technical Notes. Estimates may differ from estimates that are based on both reported and imputed income.

 $NOTE: Data \ are \ based \ on \ household \ interviews \ of \ a \ sample \ of \ the \ civilian \ noninstitutionalized \ population.$

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. A small number of persons were covered by both public and private plans and were included in both categories.

^{&#}x27;Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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, 2009–2014

December status 1 and as	Uninsured ² at the time of	Dublish salah alam sama 3	Private health insurance
Poverty status ¹ and year	interview	Public health plan coverage ³	coverage ⁴
		Percent (standard error)	
Poor (<100% FPL)			
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	7.8 (0.62)	86.1 (0.88)	7.7 (0.69)
2014	5.9 (0.52)	87.3 (0.72)	8.0 (0.62)
Near-poor (≥100% and <200% FPL)			
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	10.6 (0.72)	64.4 (1.16)	27.3 (1.17)
2014	8.6 (0.65)	64.3 (1.23)	29.4 (1.19)
Not-poor (≥200% FPL)			
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	4.0 (0.28)	15.6 (0.62)	81.2 (0.65)
2014	3.6 (0.28)	14.4 (0.56)	83.1 (0.58)
Unknown			
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	9.2 (1.00)	43.7 (2.16)	48.6 (2.20)
2014	8.0 (1.41)	37.9 (2.01)	54.8 (2.05)

¹FPL is federal poverty level. Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those with incomes 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 Technical Notes. Estimates may differ from estimates that are based on both reported and imputed income.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

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. A small number of persons were covered by both public and private plans and were included in both categories.

^{&#}x27;Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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 group and sex: United States, 2014

	Uninsured ¹ at the time of		Private health insurance
Age group and sex	interview	Public health plan coverage ²	coverage ³
		Percent (standard error)	
Age group (years)			
All ages	11.5 (0.23)	34.6 (0.37)	61.8 (0.45)
Jnder 65	13.3 (0.26)	24.5 (0.36)	63.6 (0.46)
0–17	5.5 (0.27)	42.2 (0.65)	53.7 (0.68)
18-64	16.3 (0.31)	17.7 (0.32)	67.3 (0.43)
18–24	18.3 (0.61)	20.9 (0.67)	61.8 (0.84)
25-34	22.6 (0.52)	16.3 (0.49)	61.9 (0.64)
35-44	17.6 (0.51)	14.4 (0.42)	68.5 (0.64)
45-64	11.7 (0.31)	18.9 (0.42)	71.5 (0.50)
55 and over	0.8 (0.09)	95.0 (0.24)	51.2 (0.84)
9–25	20.0 (0.65)	19.1 (0.64)	61.9 (0.88)
Sex			
∕lale:			
All ages	12.9 (0.28)	32.2 (0.40)	62.1 (0.48)
Under 65	14.7 (0.31)	22.8 (0.39)	63.8 (0.50)
0–17	5.6 (0.33)	42.0 (0.75)	53.8 (0.76)
18–64	18.3 (0.38)	15.2 (0.36)	67.7 (0.47)
18–24	21.2 (0.90)	17.2 (0.83)	62.4 (1.14)
25-34	26.3 (0.73)	11.4 (0.52)	63.0 (0.77)
35-44	19.9 (0.68)	11.5 (0.54)	69.1 (0.79)
45–64	12.4 (0.39)	18.3 (0.52)	71.4 (0.59)
65 and over	0.8 (0.13)	94.4 (0.31)	51.0 (0.94)
19–25	23.1 (0.93)	14.8 (0.77)	62.8 (1.10)
emale:			
Allages	10.2 (0.22)	37.0 (0.39)	61.5 (0.47)
Under 65	11.9 (0.26)	26.1 (0.39)	63.4 (0.49)
0–17	5.3 (0.30)	42.5 (0.72)	53.6 (0.77)
18–64	14.3 (0.30)	20.1 (0.36)	66.9 (0.46)
18–24	15.4 (0.66)	24.7 (0.91)	61.1 (1.09)
25–34	19.0 (0.59)	21.0 (0.68)	60.8 (0.74)
35–44	15.4 (0.51)	17.2 (0.51)	67.9 (0.68)
45–64	11.1 (0.34)	19.4 (0.45)	71.6 (0.54)
65 and over	0.8 (0.09)	95.5 (0.29)	51.4 (0.89)
19–25	16.9 (0.70)	23.4 (0.88)	60.9 (1.08)

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. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

Table 8. 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 race/ethnicity and year: United States, 2009–2014

Race/ethnicity and year	Uninsured ¹ at the time of interview	Public health plan coverage²	Private health insurance coverage ³
		Percent (standard error)	
Hispanic or Latino	-		
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	30.3 (0.66)	33.4 (0.62)	37.0 (0.76)
2014	25.2 (0.59)	34.6 (0.78)	41.2 (0.89)
Non-Hispanic white, single race			
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	12.1 (0.29)	17.9 (0.38)	71.6 (0.53)
2014	9.8 (0.25)	18.1 (0.41)	73.6 (0.50)
Non-Hispanic black, single race			
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	18.9 (0.51)	37.5 (0.92)	44.9 (1.01)
2014	13.5 (0.49)	40.3 (0.76)	47.7 (0.86)
Non-Hispanic Asian, single race			
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	13.8 (0.81)	17.5 (1.00)	69.4 (1.27)
2014	10.6 (0.61)	16.7 (0.86)	73.4 (1.01)
Non-Hispanic other races and multiple races	• •	-	
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	16.0 (1.17)	35.9 (1.75)	50.1 (1.97)
2014	12.8 (1.30)	36.2 (1.69)	52.7 (2.01)

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. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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, 2014

Selected characteristic	Uninsured ¹ at the time of interview	Public health plan coverage²	Private health insurance coverage ³
	Percent (standard error)		
Race/ethnicity		, ,	
Hispanic or Latino	33.7 (0.76)	20.6 (0.73)	46.4 (0.86)
Non-Hispanic:	,	,	()
White, single race	11.6 (0.29)	14.6 (0.36)	75.3 (0.47)
Black, single race	17.7 (0.60)	30.5 (0.73)	53.4 (0.84)
Asian, single race	12.5 (0.65)	13.7 (0.84)	74.5 (1.01)
Other races and multiple races	19.5 (1.65)	25.2 (1.51)	56.9 (2.06)
Region			
Northeast	11.2 (0.45)	19.2 (0.83)	70.9 (0.85)
Midwest	12.9 (0.48)	16.5 (0.66)	71.9 (0.84)
South	20.7 (0.62)	17.1 (0.49)	63.7 (0.75)
West	16.3 (0.56)	18.9 (0.69)	66.0 (0.89)
Education			
Less than high school	34.0 (0.88)	34.0 (0.87)	33.3 (0.85)
High school diploma or GED ⁴	22.2 (0.50)	23.0 (0.53)	56.2 (0.63)
More than high school	10.0 (0.25)	12.2 (0.29)	79.1 (0.39)
Employment status			
Employed	14.9 (0.32)	9.5 (0.24)	76.2 (0.39)
Unemployed	38.7 (1.07)	32.3 (1.13)	29.6 (1.01)
Not in workforce	15.4 (0.46)	41.0 (0.66)	47.1 (0.68)
Poverty status ⁵	, ,	,	, ,
<100% FPL	32.3 (0.93)	46.6 (0.95)	21.9 (0.92)
≥100% and ≤138% FPL	33.8 (1.07)	37.2 (1.09)	30.3 (1.13)
>138% and ≤250% FPL	25.8 (0.60)	21.1 (0.64)	54.9 (0.75)
>250% and ≤400% FPL	12.6 (0.42)	10.5 (0.43)	78.3 (0.55)
>400% FPL	4.1 (0.20)	5.7 (0.29)	91.3 (0.33)
Unknown	14.8 (0.75)	14.8 (0.71)	71.8 (1.08)
Marital status	, ,	,	, ,
Married	12.0 (0.32)	12.9 (0.34)	76.4 (0.45)
Widowed	17.5 (1.59)	33.8 (1.91)	51.2 (2.13)
Divorced or separated	18.6 (0.54)	27.9 (0.82)	55.3 (0.84)
Living with partner	27.7 (0.91)	19.3 (0.75)	54.0 (1.06)
Never married	20.2 (0.46)	22.3 (0.51)	58.6 (0.65)

A 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. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

⁵FPL is federal poverty level. Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. The percentage of respondents with "Unknown" poverty status for this five-level categorization is 10.0%. This value is greater than the corresponding value for the three-level poverty categorization because of greater uncertainty when assigning individuals to more detailed poverty groups. For more information on poverty status, see Technical Notes. Estimates may differ from estimates that are based on both reported and imputed income.

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, 2009–2014

Year	Enrolled in high- deductible health plan (HDHP) ¹	Enrolled in HDHP without health savings account (HSA) ²	Enrolled in consumer- directed health plan (CDHP) ³	In family with flexible spending account (FSA) for medical expenses
	-	Percent (star	ndard error)	
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	33.9 (0.68)	22.2 (0.48)	11.7 (0.43)	21.6 (0.48)
2014	36.9 (0.77)	23.6 (0.52)	13.3 (0.47)	21.2 (0.49)

¹An HDHP was defined in 2014 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 Technical Notes.

NOTES: The measures of HDHP enrollment, CDHP enrollment, and being in a family with an FSA for medical expenses are not mutually exdusive. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2009–2014, Family Core component.

Table 11. Percentage 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, 2009–2014

Year	Employment-based ¹	Directly purchased ²
	Percent (st	tandard error)
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	32.0 (0.67)	56.4 (1.50)
2014	36.2 (0.73)	54.1 (1.43)

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

NOTES: For persons under age 65, approximately 8% of private health plans were directly purchased from 2009 through 2013. In 2014, 10% of private plans were directly purchased. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

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.

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

Table 12. 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 age group, state Medicaid expansion status, and year: United States, 2009–2014

Age group, state Medicaid expansion status, and year	Uninsured ¹ at the time of interview	Public health plan coverage ²	Private health insurance coverage ³
Under 65 years			
Medicaid expansion states ⁴			
2009	15.4 (0.37)	20.7 (0.56)	65.3 (0.73)
2019	16.4 (0.42)	21.8 (0.54)	63.1 (0.70)
2010	15.3 (0.35)	23.1 (0.56)	62.9 (0.72)
2011	15.0 (0.34)	23.1 (0.50)	63.3 (0.63)
2012	• •	23.1 (0.30)	62.3 (0.68)
2013	14.9 (0.40)	25.6 (0.49)	
	10.9 (0.29)	23.0 (0.49)	64.9 (0.59)
Non-Medicaid expansion states ⁵	20.0 (0.60)	21.2 (0.54)	(0.1 (0.00)
2009	20.0 (0.60)	21.3 (0.54)	60.1 (0.80)
2010	20.3 (0.48)	22.1 (0.51)	59.0 (0.76)
2011	19.6 (0.50)	22.7 (0.50)	59.1 (0.78)
2012	19.2 (0.45)	24.0 (0.55)	58.3 (0.75)
2013	18.4 (0.48)	23.4 (0.51)	59.6 (0.80)
2014	16.0 (0.44)	23.2 (0.52)	62.1 (0.76)
0–17 years			
Medicaid expansion states ⁴	()		()
2009	5.9 (0.43)	36.3 (1.09)	59.5 (1.15)
2010	6.7 (0.46)	38.2 (1.05)	56.5 (1.06)
2011	5.9 (0.33)	40.2 (1.11)	55.4 (1.09)
2012	5.3 (0.32)	40.4 (1.00)	55.9 (1.07)
2013	5.6 (0.33)	41.3 (0.86)	54.5 (0.95)
2014	4.3 (0.33)	41.0 (0.84)	56.2 (0.88)
Non-Medicaid expansion states ⁵			
2009	10.8 (0.68)	39.4 (1.00)	51.3 (1.20)
2010	9.0 (0.47)	41.7 (0.99)	50.7 (1.08)
2011	8.3 (0.46)	42.0 (1.02)	50.9 (1.11)
2012	8.0 (0.46)	43.9 (1.11)	49.4 (1.07)
2013	7.5 (0.40)	43.1 (1.12)	50.5 (1.23)
2014	6.7 (0.43)	43.5 (1.06)	51.0 (1.11)
18–64 years			
Medicaid expansion states ⁴			
2009	19.0 (0.43)	14.7 (0.43)	67.5 (0.63)
2010	20.1 (0.47)	15.5 (0.40)	65.6 (0.62)
2011	18.9 (0.41)	16.6 (0.41)	65.8 (0.61)
2012	18.5 (0.39)	16.7 (0.38)	66.0 (0.53)
2013	18.4 (0.49)	17.7 (0.44)	65.2 (0.65)
2014	13.3 (0.34)	19.9 (0.46)	68.1 (0.56)
Non-Medicaid expansion states ⁵			
2009	23.6 (0.65)	14.2 (0.44)	63.6 (0.71)
2010	24.8 (0.58)	14.4 (0.45)	62.2 (0.70)
2011	24.1 (0.60)	15.1 (0.42)	62.3 (0.71)
2012	23.7 (0.54)	16.1 (0.44)	61.8 (0.69)
2013	22.7 (0.59)	15.6 (0.41)	63.2 (0.69)
2014	19.6 (0.54)	15.3 (0.41)	66.5 (0.69)

A 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. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

⁴States moving forward with Medicaid expansion include AZ, AR, CA, CO, CT, DE, DC, HI, IL, IA, KY, MD, MA, MI, MN, NV, NJ, NM, NY, ND, OH, OR, RI, VT, WA, and WV (as of October 31, 2013).

⁵States not moving forward with Medicaid expansion include AL, AK, FL, GA, ID, IN, KS, LA, ME, MS, MO, MT, NE, NH, NC, OK, PA, SC, SD, TN, TX, UT, VA, WI, and WY (as of October 31, 2013).

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2009–2014, Family Core component.

Table 13. 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 age group, state Health Insurance Marketplace type, and year: United States, 2009–2014

Age group, state Health Insurance Marketplace type, and year	Uninsured ¹ at the time of interview	Public health plan coverage ²	Private health insurance coverage ³
Under 65 years			
tate-based Marketplace states ⁴			
2009	16.1 (0.52)	20.7 (0.68)	64.3 (0.89)
2010	16.3 (0.46)	21.6 (0.66)	63.2 (0.80)
2011	15.9 (0.46)	23.6 (0.70)	61.8 (0.88)
2012	15.2 (0.43)	24.2 (0.66)	61.8 (0.83)
2013	15.2 (0.48)	25.0 (0.56)	61.0 (0.83)
2014	11.1 (0.38)	26.4 (0.63)	63.7 (0.78)
artnership Marketplace states ⁵	11.1 (0.50)	20.1 (0.03)	03.7 (0.70)
2009	14.1 (0.76)	21.1 (1.39)	66.7 (1.98)
2010	14.7 (0.76)	22.5 (1.15)	64.8 (1.73)
2010			
2011	14.3 (0.71)	22.7 (1.28)	64.5 (1.72) 66.7 (1.53)
2012	14.1 (0.70)	20.8 (1.12)	66.7 (1.53)
	14.2 (0.83)	21.8 (1.07)	65.6 (1.42)
2014	10.2 (0.57)	24.4 (1.06)	67.2 (1.28)
ederally Facilitated Marketplace			
tates ⁶	10.0 (0.53)	21.2 (0.52)	(1.2 (0.74)
2009	19.0 (0.53)	21.2 (0.52)	61.2 (0.74)
2010	20.1 (0.48)	22.1 (0.50)	59.1 (0.70)
2011	18.8 (0.45)	22.6 (0.47)	60.0 (0.71)
2012	18.6 (0.41)	23.6 (0.50)	59.3 (0.67)
2013	17.9 (0.44)	23.3 (0.49)	60.2 (0.74)
2014	15.3 (0.40)	23.3 (0.50)	62.8 (0.69)
0–17 years			
tate-based Marketplace states ⁴			
2009	6.9 (0.61)	36.5 (1.31)	57.9 (1.31)
2010	6.7 (0.50)	38.0 (1.32)	56.4 (1.31)
2011	6.4 (0.47)	40.9 (1.43)	54.2 (1.39)
2012	5.4 (0.43)	42.2 (1.37)	53.9 (1.46)
2013	5.7 (0.37)	42.8 (1.05)	52.6 (1.18)
2014	4.2 (0.40)	42.0 (1.11)	54.9 (1.13)
artnership Marketplace states ⁵	, ,	, ,	, ,
2009	3.1 (0.68)	37.7 (2.78)	62.0 (3.23)
2010	4.1 (0.78)	40.7 (2.21)	57.9 (2.31)
2011	4.2 (0.53)	39.6 (2.44)	58.0 (2.39)
2012	3.6 (0.69)	38.5 (2.20)	59.9 (2.26)
2013	4.2 (0.53)	38.4 (1.95)	59.2 (2.08)
2014	3.2 (0.51)	40.8 (1.88)	58.4 (1.99)
ederally Facilitated Marketplace	3.2 (0.3 1)	10.0 (1.00)	30.1 (1.55)
tates ⁶			
2009	10.0 (0.60)	38.5 (0.95)	53.0 (1.13)
2010	9.2 (0.48)	40.7 (0.91)	51.3 (0.97)
2010	8.0 (0.40)	41.4 (0.93)	51.8 (1.01)
2012			
	7.9 (0.41) 7.5 (0.39)	42.7 (1.00) 42.6 (1.02)	50.8 (0.98) 51.3 (1.11)
2013			

Table 13. 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 age, state Health Insurance Marketplace type, and year: United States, 2009–2014 —Continued

Age group, state Health Insurance Marketplace type, and year	Uninsured ¹ at the time of interview	Public health plan coverage ²	Private health insurance coverage ³
		Percent (standard error)	
18–64 years			
State-based Marketplace states4			
2009	19.6 (0.61)	14.6 (0.53)	66.8 (0.82)
2010	19.9 (0.52)	15.3 (0.48)	65.9 (0.68)
2011	19.5 (0.53)	17.1 (0.52)	64.7 (0.75)
2012	18.8 (0.50)	17.7 (0.49)	64.7 (0.69)
2013	18.7 (0.60)	18.4 (0.52)	64.1 (0.80)
2014	13.6 (0.45)	20.6 (0.57)	67.0 (0.75)
Partnership Marketplace states⁵			
2009	18.5 (0.97)	14.5 (1.04)	68.5 (1.70)
2010	18.9 (1.12)	15.3 (0.90)	67.6 (1.59)
2011	18.4 (0.92)	15.9 (0.87)	67.1 (1.52)
2012	18.1 (0.85)	13.9 (0.79)	69.3 (1.36)
2013	17.9 (0.98)	15.7 (0.91)	68.0 (1.29)
2014	12.8 (0.68)	18.2 (0.98)	70.5 (1.22)
ederally Facilitated Marketplace states ⁶			
2009	22.6 (0.57)	14.3 (0.41)	64.5 (0.65)
2010	24.5 (0.56)	14.7 (0.43)	62.2 (0.66)
2011	23.0 (0.54)	15.1 (0.39)	63.3 (0.64)
2012	22.8 (0.48)	16.1 (0.41)	62.7 (0.61)
2013	22.0 (0.54)	15.9 (0.41)	63.6 (0.64)
2014	18.6 (0.49)	15.8 (0.41)	66.9 (0.63)

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. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

⁴State-based Marketplace states are CA, CO, CT, DC, HI, ID, KY, MD, MA, MN, NV, NM, NY, OR, RI, VT, and WA (as of October 31, 2013).

⁵Partnership Marketplace states are AR, DE, IL, IA, MI, NH, and WV (as of October 31, 2013).

⁶Federally Facilitated Marketplace states are AL, AK, AZ, FL, GA, IN, KS, LA, ME, MS, MO, MT, NE, NJ, NC, ND, OH, OK, PA, SC, SD, TN, TX, UT, VA, WI, and WY (as of October 31, 2013). NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

Table 14. 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 expanded region: United States, 2014

Age group and expanded region ¹	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage ⁴	
rige group and expanded region	Percent (standard error)			
	- Teresite (Standard Cirol)			
All ages				
All states	11.5 (0.23)	34.6 (0.37)	61.8 (0.45)	
New England	5.3 (0.57)	36.3 (1.64)	68.5 (1.75)	
Middle Atlantic	8.6 (0.41)	35.2 (0.83)	65.3 (0.88)	
East North Central	9.0 (0.46)	35.0 (0.91)	66.6 (1.11)	
West North Central	8.8 (0.53)	30.0 (1.18)	71.0 (1.03)	
South Atlantic	14.0 (0.65)	37.0 (0.89)	56.2 (1.16)	
East South Central	11.2 (0.79)	39.3 (2.01)	58.3 (1.97)	
West South Central	18.0 (0.69)	31.0 (1.09)	56.6 (1.32)	
Mountain	12.6 (0.85)	32.5 (1.69)	62.3 (2.12)	
Pacific	11.3 (0.50)	35.0 (0.88)	59.0 (1.10)	
Under 65 years				
All states	13.3 (0.26)	24.5 (0.36)	63.6 (0.46)	
New England	6.3 (0.65)	24.5 (1.79)	70.4 (1.86)	
Middle Atlantic	10.1 (0.45)	24.3 (0.77)	66.8 (0.92)	
East North Central	10.5 (0.54)	24.3 (0.95)	67.0 (1.19)	
West North Central	10.1 (0.60)	19.1 (0.86)	72.4 (1.09)	
South Atlantic	16.5 (0.73)	26.0 (0.88)	58.6 (1.28)	
East South Central	13.1 (0.95)	29.5 (2.18)	59.6 (2.37)	
West South Central	20.3 (0.77)	22.3 (0.89)	58.5 (1.33)	
Mountain	14.5 (1.00)	22.4 (1.60)	64.6 (2.09)	
Pacific	12.7 (0.57)	26.4 (0.90)	61.9 (1.13)	
0–17 years				
All states	5.5 (0.27)	42.2 (0.65)	53.7 (0.68)	
New England	2.4 (0.64)	35.9 (3.16)	63.2 (3.03)	
Middle Atlantic	3.7 (0.68)	40.9 (1.65)	56.4 (1.69)	
East North Central	3.5 (0.53)	41.1 (1.52)	57.9 (1.67)	
West North Central	3.7 (0.57)	34.8 (1.71)	64.3 (1.74)	
South Atlantic	5.5 (0.78)	48.6 (1.60)	46.2 (1.81)	
East South Central	5.1 (0.80)	48.6 (3.24)	47.8 (3.16)	
West South Central	10.5 (0.76)	42.5 (1.91)	48.2 (1.96)	
Mountain	7.9 (0.79)	35.6 (2.88)	58.4 (2.79)	
Pacific	4.8 (0.64)	43.3 (1.57)	52.7 (1.67)	

Table 14. 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 expanded region: United States, 2014—Continued

Age group and expanded region ¹	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage ⁴
	Percent (standard error)		
18–64 years			
All states	16.3 (0.31)	17.7 (0.32)	67.3 (0.43)
New England	7.6 (0.80)	20.9 (1.63)	72.7 (1.69)
Middle Atlantic	12.3 (0.54)	18.7 (0.91)	70.4 (0.94)
East North Central	13.1 (0.65)	18.0 (0.84)	70.4 (1.13)
West North Central	12.6 (0.80)	13.1 (0.80)	75.5 (1.12)
South Atlantic	20.6 (0.90)	17.5 (0.79)	63.2 (1.15)
East South Central	16.1 (1.17)	22.3 (1.85)	64.0 (2.15)
West South Central	24.4 (1.03)	13.7 (0.67)	62.9 (1.20)
Mountain	17.5 (1.33)	16.3 (1.23)	67.5 (1.92)
Pacific	15.8 (0.64)	19.9 (0.78)	65.4 (1.04)

^{&#}x27;The New England region includes CT, ME, MA, NH, RI, and VT. The Middle Atlantic region includes DE, DC, MD, NJ, NY, and PA. The East North Central region includes IL, IN, MI, OH, and WI. The West North Central region includes IA, KS, MN, MO, NE, ND, and SD. The South Atlantic region includes FL, GA, NC, SC, VA, and WV. The East South Central region includes AL, KY, MS, and TN. The West South Central region includes AR, LA, OK, and TX. The Mountain region includes AZ, CO, ID, MT, NV, NM, UT, and WY. The Padfic region includes AK, CA, HI, OR, and WA

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. 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. A small number of persons were covered by both public and private plans and were included in both categories.

Includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

Table 15. Percentages of persons in states who lacked health insurance coverage, had public health plan coverage, or had private health insurance coverage at the time of interview, by age group: United States, 2014

Age group and selected states ¹	Uninsured ² at the time of interview	Public health plan coverage³	Private health insurance coverage ⁴	
	Percent (standard error)			
All ages	-			
All states ⁵	11.5 (0.20)	34.6 (0.33)	61.8 (0.38)	
Alabama	9.8 (1.48)	38.7 (2.68)	62.0 (3.02)	
Alaska	19.4 (1.99)	28.6 (2.52)	58.9 (3.09)	
Arizona	14.6 (1.50)	38.2 (2.30)	52.9 (2.66)	
Arkansas	10.9 (1.56)	36.6 (2.67)	61.6 (3.04)	
California	12.0 (0.51)	34.9 (0.88)	57.5 (1.09)	
Colorado	9.5 (1.28)	27.5 (2.16)	70.7 (2.49)	
Connecticut	7.0 (1.25)	35.9 (2.60)	64.1 (2.94)	
Delaware	4.4 (1.01)	38.2 (2.65)	68.5 (2.86)	
District of Columbia	3.0 (0.87)	39.7 (2.78)	64.3 (3.07)	
Florida	15.3 (1.00)	39.4 (1.61)	51.8 (1.31)	
Georgia	14.2 (1.44)	33.5 (1.32)	58.1 (1.80)	
Hawaii	*2.0 (0.69)	43.9 (2.73)	69.2 (2.86)	
Idaho	13.3 (1.51)	43.9 (2.73) 29.6 (2.25)		
Illinois	10.3 (0.96)	29.6 (2.25) 34.2 (1.57)	66.5 (2.63) 66.0 (1.77)	
Indiana	12.0 (1.41)			
Indiana Iowa	5.6 (0.96)	32.7 (2.25) 29.3 (2.10)	64.7 (2.59) 75.0 (2.26)	
Kansas	9.0 (1.16)	33.1 (2.12)	70.1 (2.33)	
Kentucky	10.9 (1.35)	43.8 (2.38)	53.0 (2.70)	
Louisianna	12.9 (1.49)	38.1 (2.39)	55.9 (2.76)	
Maine	11.3 (1.42)	36.9 (2.40)	60.9 (2.74)	
Maryland	7.9 (1.27)	34.6 (2.48)	67.1 (2.77)	
Massachusetts	2.6 (0.72)	38.7 (2.46)	71.0 (2.59)	
Michigan	8.0 (0.99)	35.5 (1.96)	67.7 (2.44)	
Minnesota	5.7 (1.06)	27.4 (2.26)	76.3 (2.43)	
Mississippi	14.9 (1.66)	38.5 (2.52)	56.4 (2.90)	
Missouri	12.4 (1.53)	30.9 (2.38)	65.3 (2.77)	
Montana	11.2 (1.60)	42.0 (2.77)	61.5 (3.09)	
Nebraska	11.2 (1.40)	31.1 (2.28)	66.4 (2.62)	
Nevada	15.0 (1.58)	32.8 (2.31)	57.8 (2.75)	
New Hampshire	8.0 (1.26)	28.8 (2.33)	74.5 (2.54)	
New Jersey	9.4 (1.13)	27.1 (1.90)	72.9 (2.15)	
New Mexico	11.3 (1.49)	49.5 (2.61)	49.2 (2.95)	
New York	9.4 (0.77)	39.9 (1.41)	57.5 (1.60)	
North Carolina	14.8 (1.17)	38.0 (1.73)	54.9 (2.61)	
North Dakota	6.0 (1.13)	27.0 (2.34)	79.4 (2.41)	
Ohio	7.6 (0.65)	37.3 (1.70)	64.6 (1.87)	
Oklahoma	18.1 (1.64)	39.1 (2.30)	50.0 (2.66)	
Oregon	8.8 (1.29)	41.0 (2.50)	58.8 (2.82)	
Pennsylvania	7.9 (0.84)	34.2 (1.92)	69.8 (1.58)	
Rhode Island	6.4 (1.13)	31.2 (2.36)	70.2 (2.63)	
South Carolina	14.5 (1.71)	39.7 (2.64)	53.5 (3.04)	
South Dakota	8.5 (1.27)	31.5 (2.35)	72.4 (2.55)	
Tennessee	10.8 (1.42)	36.9 (2.44)	60.1 (2.80)	
Texas	19.4 (0.76)	28.3 (0.99)	57.2 (1.31)	
Utah	12.9 (1.32)	22.4 (1.82)	73.1 (2.19)	
Vermont	8.6 (1.49)	33.6 (2.79)	66.8 (3.14)	
Virginia	10.8 (1.30)	31.3 (2.15)	67.0 (2.46)	
Washington	9.8 (1.24)	31.7 (2.15)	66.0 (2.47)	
West Virginia	7.6 (1.21)	43.0 (2.50)	59.6 (2.80)	
Wisconsin	6.3 (1.17)	33.7 (2.53)	73.5 (2.67)	
Wyoming	10.9 (1.49)	20.9 (2.16)	75.3 (2.59)	

Table 15. Percentages of persons in states who lacked health insurance coverage, had public health plan coverage, or had private health insurance coverage at the time of interview, by age group: United States, 2014 —Continued

Age group and selected states ¹	Uninsured ² at the time of interview	Public health plan coverage³	Private health insurance coverage ⁴	
	Percent (standard error)			
Under 65 years				
All states ⁵	13.3 (0.22)	24.5 (0.33)	63.6 (0.41)	
Alabama	11.8 (1.74)	28.0 (2.77)	63.4 (3.38)	
Alaska	21.2 (2.19)	22.2 (2.54)	58.6 (3.43)	
Arizona	16.9 (1.70)	28.7 (2.34)	55.9 (2.93)	
Arkansas	12.7 (1.80)	25.9 (2.71)	62.7 (3.41)	
California	13.4 (0.56)	26.8 (0.93)	60.6 (1.18)	
Colorado	10.7 (1.42)	18.4 (2.04)	71.8 (2.70)	
Connecticut	8.0 (1.42)	25.6 (2.62)	67.2 (3.21)	
Delaware	5.4 (1.21)	25.7 (2.68)	70.6 (3.18)	
District of Columbia	3.3 (0.98)	32.4 (2.92)	64.7 (3.40)	
Florida	18.8 (1.11)	26.0 (1.41)	55.9 (1.47)	
Georgia	16.1 (1.65)	24.7 (1.41)	59.8 (2.05)	
Hawaii	*2.5 (0.87)	26.1 (2.81)	72.8 (3.24)	
Idaho	15.2 (1.72)	19.7 (2.18)	66.6 (2.94)	
Illinois	12.0 (1.13)	24.3 (1.79)	65.5 (1.92)	
Indiana	13.8 (1.60)	22.9 (2.23)	64.5 (2.89)	
lowa	6.4 (1.10)	18.8 (2.00)	76.4 (2.47)	
Kansas	10.8 (1.37)	19.5 (2.00)	71.8 (2.59)	
Kentucky	12.5 (1.53)	36.0 (2.53)	53.3 (3.00)	
Louisianna	15.2 (1.73)	27.5 (2.46)	58.4 (3.09)	
Maine	13.8 (1.72)	24.2 (2.44)	63.9 (3.12)	
Maryland	9.3 (1.46)	24.8 (2.47)	67.3 (3.06)	
Massachusetts	3.2 (0.87)	25.8 (2.47)	72.2 (2.88)	
Michigan		25.0 (2.47)		
Minnesota	9.3 (1.12)		67.5 (2.70)	
	6.5 (1.19)	18.6 (2.14)	76.7 (2.65)	
Mississippi	18.0 (1.95)	26.2 (2.55)	57.9 (3.27)	
Missouri	14.2 (1.75)	20.0 (2.29)	67.2 (3.07)	
Montana	14.6 (2.01)	24.9 (2.82)	63.5 (3.58)	
Nebraska	12.8 (1.63)	20.8 (2.25)	67.6 (2.96)	
Nevada	17.6 (1.82)	21.3 (2.24)	63.1 (3.01)	
New Hampshire	9.5 (1.52)	14.9 (2.11)	76.9 (2.84)	
New Jersey	10.8 (1.28)	15.8 (1.71)	74.4 (2.34)	
New Mexico	14.0 (1.82)	37.4 (2.89)	50.5 (3.41)	
New York	11.0 (0.89)	30.3 (1.47)	60.0 (1.77)	
North Carolina	17.3 (1.30)	28.2 (1.98)	56.2 (2.93)	
North Dakota	7.3 (1.35)	10.6 (1.82)	84.1 (2.47)	
Ohio	8.9 (0.78)	26.3 (1.86)	66.6 (2.06)	
Oklahoma	21.5 (1.91)	28.3 (2.39)	52.0 (3.02)	
Oregon	10.7 (1.56)	28.5 (2.60)	62.3 (3.18)	
Pennsylvania	9.5 (1.02)	21.0 (1.48)	70.8 (1.83)	
Rhode Island	7.4 (1.28)	22.1 (2.32)	73.1 (2.82)	
South Carolina	17.1 (1.97)	29.3 (2.72)	54.4 (3.40)	
South Dakota	10.4 (1.50)	17.9 (2.15)	72.7 (2.85)	
Tennessee	12.5 (1.61)	27.3 (2.48)	62.1 (3.08)	
Texas	21.5 (0.83)	20.4 (0.87)	59.0 (1.38)	
Utah	14.4 (1.46)	13.2 (1.61)	74.6 (2.36)	
Vermont	9.8 (1.74)	25.6 (2.91)	65.3 (3.62)	
Virginia	12.5 (1.49)	20.7 (2.08)	68.3 (2.73)	
Washington	10.9 (1.37)	23.3 (2.12)	67.3 (2.68)	
West Virginia	9.0 (1.42)	33.4 (2.67)	59.9 (3.17)	
Wisconsin	7.5 (1.39)	20.4 (2.42)	74.7 (2.98)	
Wyoming	11.9 (1.64)	13.5 (1.97)	76.3 (2.80)	

Table 15. Percentages of persons in states who lacked health insurance coverage, had public health plan coverage, or had private health insurance coverage at the time of interview, by age group: United States, 2014 —Continued

Age group and selected states ¹	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage ⁴	
	Percent (standard error)			
18-64 years				
All states ⁵	16.3 (0.26)	17.7 (0.29)	67.3 (0.37)	
Alabama	14.8 (2.05)	20.7 (2.46)	68.3 (3.10)	
Alaska	24.6 (1.69)	14.2 (2.05)	63.3 (3.11)	
Arizona	19.5 (1.01)	22.4 (2.22)	59.4 (2.87)	
Arkansas	15.6 (2.50)	17.7 (2.31)	68.0 (3.10)	
California	16.7 (0.67)	20.4 (0.77)	63.9 (1.10)	
Colorado	13.3 (1.43)	12.3 (1.74)	75.1 (2.52)	
Connecticut	10.0 (2.55)	20.5 (2.35)	70.3 (2.91)	
Delaware	*6.0 (2.23)	20.2 (2.35)	74.8 (2.79)	
District of Columbia	†	27.1 (2.63)	69.6 (2.99)	
Florida	23.0 (1.34)	16.9 (1.20)	61.0 (1.32)	
Georgia	20.2 (2.21)	16.5 (1.28)	64.3 (1.96)	
Hawaii	†	22.0 (2.56)	76.2 (2.89)	
Idaho	21.9 (1.81)	10.4 (1.71)	68.9 (2.84)	
Illinois	15.0 (1.26)	17.4 (1.49)	69.2 (1.78)	
Indiana	18.3 (2.09)	13.9 (1.84)	68.8 (2.70)	
lowa	8.4 (1.51)	13.1 (1.71)	79.2 (2.26)	
Kansas				
Kentucky	13.9 (1.87)	12.8 (1.71)	75.0 (2.43)	
Louisianna	15.6 (2.00)	29.5 (2.35)	56.6 (2.80)	
	18.9 (2.16)	20.0 (2.14)	62.1 (2.85)	
Maine	16.9 (0.95)	18.4 (2.11)	66.1 (2.82)	
Maryland	12.3 (2.13)	18.7 (2.23)	70.9 (2.85)	
Massachusetts	*3.8 (1.84)	23.7 (2.32)	73.8 (2.63)	
Michigan	11.6 (1.30)	19.9 (1.82)	69.8 (2.61)	
Minnesota	8.0 (1.52)	13.5 (1.86)	79.4 (2.42)	
Mississippi	22.4 (1.57)	17.0 (2.14)	63.0 (3.02)	
Missouri	16.9 (1.97)	14.0 (1.94)	70.4 (2.80)	
Montana	18.0 (1.81)	19.9 (2.55)	64.8 (3.35)	
Nebraska	16.9 (2.14)	10.4 (1.69)	73.9 (2.67)	
Nevada	20.4 (1.86)	15.0 (1.94)	66.4 (2.81)	
New Hampshire	11.6 (2.07)	9.4 (1.63)	80.5 (2.43)	
New Jersey	12.9 (1.44)	11.9 (1.47)	76.3 (2.12)	
New Mexico	18.7 (2.36)	27.6 (2.65)	55.7 (3.22)	
New York	12.9 (0.90)	25.1 (1.42)	63.3 (1.72)	
North Carolina	22.5 (1.84)	16.9 (1.70)	62.5 (2.69)	
North Dakota	9.3 (1.92)	8.7 (1.61)	83.7 (2.31)	
Ohio	10.9 (0.91)	21.3 (1.52)	69.6 (1.87)	
Oklahoma	26.6 (1.78)	19.2 (2.09)	55.8 (2.88)	
Oregon	13.3 (2.00)	21.3 (2.28)	67.1 (2.87)	
Pennsylvania	11.9 (1.20)	13.8 (1.45)	75.6 (1.73)	
Rhode Island	9.0 (1.75)	18.3 (2.13)	74.7 (2.63)	
South Carolina	21.0 (2.03)	22.9 (2.43)	57.7 (3.13)	
South Dakota	13.4 (1.32)	11.9 (1.81)	75.8 (2.63)	
Tennessee	14.8 (2.10)	20.5 (2.22)	66.8 (2.84)	
Texas	25.7 (1.03)	11.7 (0.66)	63.5 (1.19)	
Utah	16.2 (1.78)	10.5 (1.51)	75.0 (2.35)	
Vermont	9.1 (1.24)	21.1 (2.64)	70.0 (3.25)	
Virginia	15.2 (1.66)	15.6 (1.81)	70.9 (2.49)	
Washington	13.3 (1.77)	16.7 (1.86)	71.2 (2.47)	
West Virginia	12.2 (2.05)	27.8 (2.47)	62.7 (2.92)	
Wisconsin	8.7 (1.91)	14.1 (2.04)	78.4 (2.65)	
Wyoming	15.2 (1.63)	10.0 (1.71)	76.3 (2.66)	

Table 15. Percentages of persons in states who lacked health insurance coverage, had public health plan coverage, or had private health insurance coverage at the time of interview, by age group: United States, 2014 —Continued

Age group and selected states ¹	Uninsured ² at the time of interview	Public health plan coverage³	Private health insurance coverage ⁴
0–17 years			
All states	5.5 (0.23)	42.2 (0.61)	53.7 (0.65)
Alabama	*3.8 (1.68)	47.2 (5.24)	50.5 (5.36)
Arizona	11.2 (2.13)	42.1 (3.98)	48.6 (4.11)
California	5.0 (0.58)	43.3 (1.69)	52.3 (1.70)
Colorado	*4.2 (1.44)	33.1 (4.01)	63.8 (4.18)
Florida	6.6 (1.03)	52.3 (2.62)	41.4 (2.56)
Georgia	5.5 (0.94)	45.9 (2.99)	48.3 (2.95)
Idaho	*3.5 (1.33)	36.1 (4.14)	62.6 (4.26)
Illinois	*3.6 (1.26)	43.2 (3.30)	55.1 (3.15)
Indiana	3.3 (1.31)	43.9 (4.31)	54.5 (4.41)
Iowa	1.7 (0.92)	32.5 (4.01)	69.8 (4.01)
Kansas	4.5 (1.40)	33.5 (3.82)	64.8 (3.94)
Kentucky	4.1 (1.52)	53.6 (4.57)	44.3 (4.65)
Louisianna	4.5 (1.69)	49.5 (4.86)	47.8 (4.96)
Maine	3.7 (1.67)	42.9 (5.26)	56.8 (5.37)
Maryland	1.9 (1.08)	39.6 (4.65)	58.7 (4.78)
Massachusetts	1.3 (0.96)	32.6 (4.78)	67.3 (4.88)
Michigan	3.3 (1.06)	38.2 (3.46)	61.3 (4.01)
Minnesota	2.6 (1.25)	31.8 (4.31)	69.8 (4.34)
Mississippi	5.6 (1.92)	52.2 (4.98)	43.7 (5.05)
Missouri	6.0 (2.01)	38.3 (4.90)	57.2 (5.09)
Nebraska	*3.5 (1.41)	44.6 (4.57)	53.2 (4.68)
Nevada	10.1 (2.33)	37.9 (4.46)	54.1 (4.68)
New Jersey	*4.3 (1.43)	27.9 (3.77)	68.5 (3.99)
New Mexico	*3.3 (1.51)	60.0 (4.94)	38.5 (5.01)
New York	5.1 (1.38)	46.4 (2.62)	49.5 (2.85)
North Carolina	5.6 (1.18)	53.7 (3.61)	41.9 (3.83)
Ohio	*3.4 (1.10)	40.3 (3.65)	58.1 (3.45)
Oklahoma	10.1 (2.22)	48.5 (4.37)	43.7 (4.43)
Oregon	*3.0 (1.49)	49.7 (5.19)	48.2 (5.30)
Pennsylvania	*2.4 (0.97)	42.3 (3.16)	56.5 (3.18)
Rhode Island	*3.2 (1.40)	31.7 (4.41)	68.9 (4.48)
South Dakota	*2.9 (1.31)	32.9 (4.36)	64.9 (4.52)
Tennessee	*6.4 (1.94)	44.8 (4.70)	49.9 (4.82)
Texas	11.7 (0.93)	40.5 (2.12)	48.8 (2.24)
Utah	11.1 (1.91)	18.2 (2.79)	73.8 (3.25)
Virginia	*4.4 (1.58)	36.0 (4.38)	60.6 (4.55)
Washington	*4.3 (1.43)	41.2 (4.13)	56.5 (4.25)
West Virginia	†	47.7 (4.99)	52.9 (5.09)
Wisconsin	*4.0 (1.71)	38.7 (5.09)	63.6 (5.13)
Wyoming	*4.9 (1.79)	20.8 (3.99)	76.1 (4.28)

^{*} Estimate has a relative standard error (RSE) greater than 30% and less than or equal to 50% and should be used with caution as it does not meet standards of reliability or precision. †Estimate has an RSE of greater than 50% and is not shown.

¹ Estimates are presented for fewer than 50 states and the District of Columbia for children aged 0–17 due to considerations of sample size and precision.

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. 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. A small number of persons were covered by both public and private plans and were included in both categories.

Includes 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.

⁵Includes all 50 states and the District of Columbia.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

DATA SOURCE: CDC/NCHS, National Health Interview Survey, 2014, 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 2014 National Health Interview Survey (NHIS), along with comparable estimates from the 2009–2013 NHIS.

To reflect different policy-relevant perspectives, 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. The three time frames are defined as:

- 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.
- Uninsured at any time in the year prior to interview provides an annual caseload of persons who may experience barriers to obtaining needed health care. 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.
- Uninsured 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 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 for three types of consumer-directed private health care. Consumer-directed health care may enable individuals to have more control overwhen 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 new questions were added to the health insurance section of NHIS to monitor enrollment in consumerdirected health care among persons with private health insurance. Estimates are provided for enrollment in highdeductible healthplans (HDHPs), plans with high deductibles coupled with HSAs (i.e., consumer-directed health plans or 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 2014 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 2014 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 by NCHS through an agreement with 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 2009–2014 NHIS, which collects information on all family members in each household. Data analyses for the 2014 NHIS were based on 111,682 persons in the Family Core.

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), were 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. The analyses excluded persons with unknown health insurance status (about 1% of respondents each year).

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_165.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 2009–2011 were derived from 2000 census-based population estimates. Beginning with 2012 NHIS data, weights were derived from 2010 census-based population estimates.

Point estimates and estimates of their variances were calculated using SUDAAN software (RTI International, Research Triangle Park, N.C.) 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.

Trends in coverage were generally assessed using Joinpoint regression (2), which characterizes trends as joined linear segments. A Joinpoint is the year where two segments with different slopes meet. Joinpoint software uses statistical criteria to determine the fewest number of segments necessary to characterize a trend and the year(s) when segments begin and end. Trends from 2010 to 2014 were also evaluated using logistic regression analysis.

State-specific health insurance estimates are presented for all 50 states and the District of Columbia for persons of all ages, persons under age 65, and adults aged 18–64. State-specific estimates are presented for 40 states for children aged 0–17. Estimates are not presented for all 50 states and the District of Columbia for children due to considerations of sample size and precision. All states had at least 1,000 interviews for persons of all ages. Estimates for children in states that did not have at least 300 children with completed interviews are not presented.

For the 10 states with the largest populations (California, Florida, Georgia, Illinois, Michigan, New York, North Carolina, Ohio, Pennsylvania, and Texas), standard errors (SEs) were calculated using SUDAAN. Because of small sample sizes and limitations in the NHIS design, similarly estimated SEs for other states could be statistically unstable or negatively biased; consequently, for states other than the largest 10 states, an estimated design effect was used to calculate SEs. For this report, the design effect, deff, of a percentage is the ratio of the sampling variance of the percentage (taking into account the complex NHIS sample design) to the sampling variance of the percentage from a simple random sample (SRS) based on the same observed number of persons.

Therefore, for each health insurance measure and domain, SEs for smaller states were calculated by multiplying the SRS SE by A, where A is the average value of the square root of deff over the 10 most populous states. Values of A ranged from 1.55 for children who were uninsured to 2.30 for persons under 65 with private coverage.

Calculation of SEs of the differences between state and expanded regional estimates and national estimates accounted for correlations.

Unless otherwise noted, all estimates shown meet the NCHS standard of having less than or equal to 30% relative standard error. Differences between percentages orrates were evaluated using two-sided significance tests at the 0.05 level. All differences discussed are significant unless otherwise noted. 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 Private health insurance

coverage—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, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care.

Public health plan coverage—

Includes Medicaid, Children's Health Insurance Program (CHIP), statesponsored 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.

Uninsured—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.

Directly purchased coverage—

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

Employment-based coveragePrivate insurance that was originally

obtained through a present or former employer or union or a professional association.

Exchange-based coverage—A private health insurance plan purchased through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act (ACA). of 2010 (P.L. 111–148, P.L. 111–152) In response to ACA, several new questions were added to NHIS to capture health care plans obtained through exchange-based coverage.

In general, if a family member is reported to have coverage through the exchange, that report is considered accurate unless there is other information (e.g., plan name or information about premiums) that clearly contradicts that report. Similarly, if a family member is not reported to have coverage through the exchange, that report is considered accurate unless there is other information that clearly contradicts that report. For a more complete discussion of the procedures used in the classification of exchange-based coverage, see http://www.cdc.gov/nchs/nhis/insurance

http://www.cdc.gov/nchs/nhis/insurance .htm.

Based on these classification procedures, an average of 2.2% (SE, 0.10) of persons under age 65, 2.7% (SE, 0.11) of adults aged 18-64, 0.9% (SE, 0.11) of children under age 18, and 1.9% (SE, 0.17) of adults aged 19-25, had exchange-based private health insurance coverage in 2014. This equates to 5.9 million persons under age 65 and 5.2 million adults aged 18-64, 0.7 million children, and 0.6 million adults aged 19-25. If these procedures had not been used and reports of coverage through the exchanges (or lack thereof) had been taken at face value, the estimate would have been higher. For example, an average of 3.0% (7.9 million) of persons under age 65 would have been reported to have obtained their coverage through exchanges over the full year of 2014.

High-deductible health plan (HDHP)—For persons with private health insurance, a question was asked regarding the annual deductible of each private health insurance plan. An HDHP was defined in 2013 and 2014 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.

Consumer-directed health plan (CDHP)—Defined as an HDHP with a special account to pay for medical expenses. Unspent funds are carried over to subsequent years. For plans considered to be HDHPs, a follow-up question was asked regarding these special accounts. 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)—

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 FSAs, HSA funds roll over and accumulate year to year if not spent. HSAs are owned by the individual. Funds may be used to payfor 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 pretax dollars of their own money for their use throughout the year to reimburse themselves for their out-ofpocket 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; a person may be counted in more than one measure.

Medicaid expansion status— Under provisions of the Affordable Care Act (ACA) of 2010 (P.L. 111–148, P.L. 111–152), states have the option to expand Medicaid eligibility to cover adults who have income up to and including 138% of the federal poverty level. There is no deadline for states to choose to implement the Medicaid expansion, and they may do so at any time. As of October 31, 2013, 26 states and the District of Columbia are moving forward with Medicaid expansion.

Health Insurance Marketplace—

A resource where individuals, families, and small businesses can learn about their health coverage options; compare health insurance plans based on cost, benefits, and other important features; choose a plan; and enroll in coverage. The marketplace also provides information on programs that help people with lowto-moderate income and resources pay for coverage. There are three types of Health Insurance Marketplaces: (a) a State-based Marketplace set up and operated solely by the state; (b) a hybrid Partnership Marketplace in which the state runs certain functions and makes key decisions and may tailor the marketplace to local needs and market conditions, but which is operated by the federal government; and (c) the Federally Facilitated Marketplace operated solely by the federal government.

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 (3–8). Persons categorized as "Poor" have a ratio less than 1.0 (i.e., their family income was below the poverty threshold); "Nearpoor" 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 (12.3% in 2009, 12.2% in 2010, 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, and 8.8% in 2014) 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 2009–2013 (available from: http://www.cdc.gov/nchs/nhis/quest_data_related_1997_forward.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* [9]) 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

Expanded regions—Based on a subdivision of the four regions into nine divisions. For this report, the nine Census divisions were modified by moving Delaware, the District of Columbia, and Maryland into the Middle Atlantic division. This approach was used previously by Holahan et al. (10).

Additional Early Release Program Products

Two additional periodical reports are published through the NHIS ER Program. Early Release of Selected Estimates Based on Data From the National Health Interview Survey (11) 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 (12) 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 asneeded 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: about September (with data from the first quarter), about December (with data from the first two quarters), and about March of the following year (with data from the first three quarters). NHIS data users can analyze these files through the NCHS Research Data Centers 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 and click on the National Health Interview Survey (NHIS) researchers button.

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