# **Statistical Brief #24:**

# The Uninsured in America — 1996-2002 Estimates for the Civilian Noninstitutionalized Population Under Age 65

By: Jeffrey A. Rhoades, Ph.D. and Joel W. Cohen, Ph.D.

### Introduction

Estimates of the health insurance status of the U.S. civilian noninstitutionalized (community) population are critical to policymakers and others concerned with access to medical care and the cost and quality of that care. Health insurance helps people get timely access to medical care and protects them against the risk of expensive and unanticipated medical events. Compared to people with healthcare coverage, uninsured people are less likely to visit a doctor, have a usual source of medical care, receive preventive services, or have a recommended test or prescription filled (Taylor, Cohen, and Machlin, 2001; Weinick, Zuvekas, and Drilea, 1997).

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

The Medical Expenditure Panel Survey (MEPS), an annual household survey sponsored by the Agency for Healthcare Research and Quality (AHRQ), provides critical data for evaluating trends in the health insurance status of the population. This *Statistical Brief* presents data from calendar years 1996 through 2001, as well as the first half of 2002. Unless otherwise noted, only differences that are statistically significant at the 0.05 level are discussed in the text.

# **Briefly Stated**

- The number of uninsured Americans under age 65 varied significantly depending on the definition of the time period for being uninsured. In 2001, 25.9% of the population was uninsured at some point during the year, 18.8% was uninsured throughout the first half of the year, and 13.1% was uninsured for the entire year.
- Overall, the percent and number of non-elderly individuals uninsured from 1996 to 1999 declined. These trends did not continue into 2000 and 2001.
- From 1996 to 2001, the number and percent of children uninsured all year decreased from 7.0 million to 5.6 million, and from 10.4% to 8.2%.
- The number and percent of children covered only by public insurance increased between 1996 and 2001 by 3.2 million, from 10.9 million to 14.1 million, and from 16.2% to 20.4%.

# **Findings**

MEPS produces estimates of the uninsured for three different periods within a year: at any time during the year, throughout the first half of the year, or the entire year. In 2001, the latest year for which all three measures are available, 25.9% of the population under age 65 (non-elderly) was uninsured at some point during the year, 18.8% was uninsured throughout the first half of the year, and 13.1% was uninsured the entire year (Figure 1). The number of people uninsured varied up to twofold, depending on the time period of being uninsured. In 2001, 61.9 million people were uninsured at some point during the year, 45.7 million were uninsured throughout the first half of the year, and 31.3 million people were uninsured all year (Figure 2).

From 1996 to 1999, the percent of the population uninsured at some point during the year declined from 27.0% to 24.8%, and the percent uninsured all year declined from 13.8% to 12.2% (Figure 1). The number of non-elderly individuals uninsured for the full year decreased from 32.1 million in 1997 to 28.7 million in 1999 (Figure 2). The data in Figures 1 and 2 also show a decline in the percent and number of non-elderly individuals uninsured from 1996 or 1997 to 1999. These trends did not continue through 2000 and 2001, however.

For the first half of 2002, the most recent MEPS estimates available, 18.5% (45.9 million) of the non-elderly population was uninsured (Figures 1 and 2).

From 1996 to 2001, the percent and number of children (under age 18) who were uninsured declined. The percent of children who were uninsured the entire year declined by 2.2 percentage points, from 10.4% to 8.2% (Figure 3). The number of children uninsured for the entire year declined by 1.4 million, from 7.0 million to 5.6 million (Figure 4). Concurrently, the percent and number of children covered only with public insurance increased 4.2 percentage points (from 16.2% to 20.4%, as shown in Figure 3), and by 3.2 million (from 10.9 million to 14.1 million, as shown in Figure 4). On the other hand, the percent of children with private insurance declined between 1998 and 2001, from 60.3% to 57.0% (Figure 3).

## **Definitions**

#### Uninsured

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

#### **Public Coverage**

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

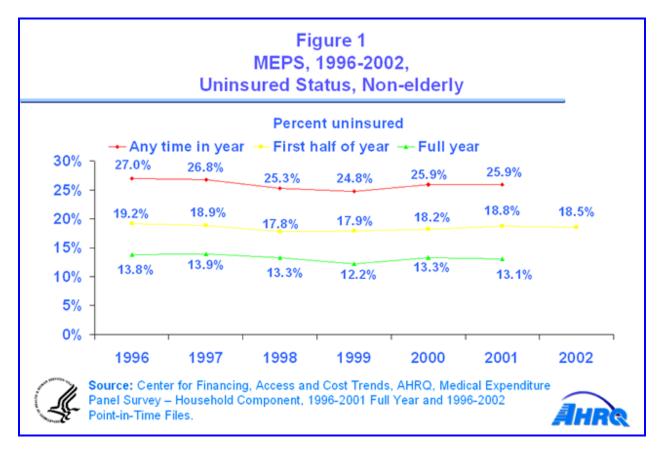
## **Private Coverage**

Private health insurance was defined as non-public insurance that provides coverage for hospital and physician care (including Medigap coverage).

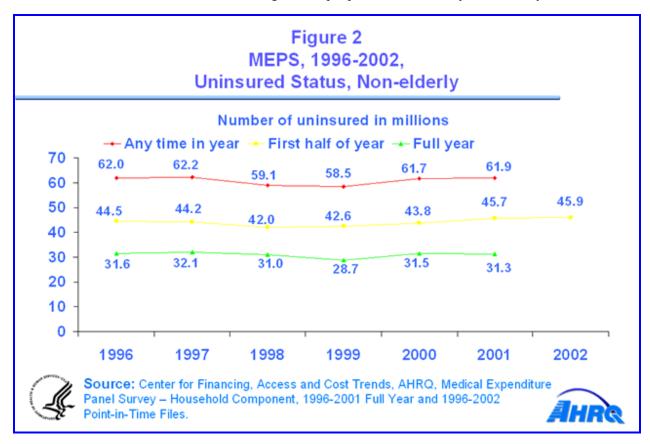
### **Source of Data**

The estimates presented in this *Statistical Brief* come from the MEPS Household Component. MEPS, which is cosponsored by AHRQ and the National Center for Health Statistics (NCHS), is a nationally representative survey of the U.S. civilian noninstitutionalized population. MEPS collects detailed data for both individuals and households on demographic characteristics, health conditions, health status, use of medical care services, charges and payments, access to care, satisfaction with care, health insurance coverage, income, and employment. Other MEPS components collect data on the use, charges, and payments reported by medical care providers; data on residents of licensed or certified nursing homes; and data on the supply side of the health insurance market. For a detailed description of the MEPS survey design, see J. Cohen (1997) and S. Cohen (1997).

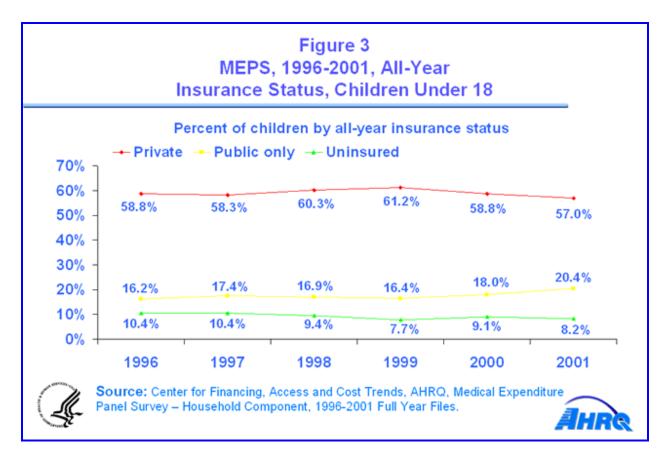
MEPS data are released to the public in a number of formats, including public use data files and the printed *MEPS Research Findings* and *MEPS Highlights* series. The numbers shown in this *Statistical Brief* are drawn from analyses conducted by the MEPS staff from the following public use files: 1996-2000 Full-Year Consolidated Data Files HC-012, HC-020, HC-028, HC-038, and HC-050, and 2001 Full-Year Population Characteristics Data File HC-055. Point in Time estimates for years 1996-2002 were derived from Data Files HC-001, HC-005, HC-009, HC-013, HC-022, HC-034, and HC-053.



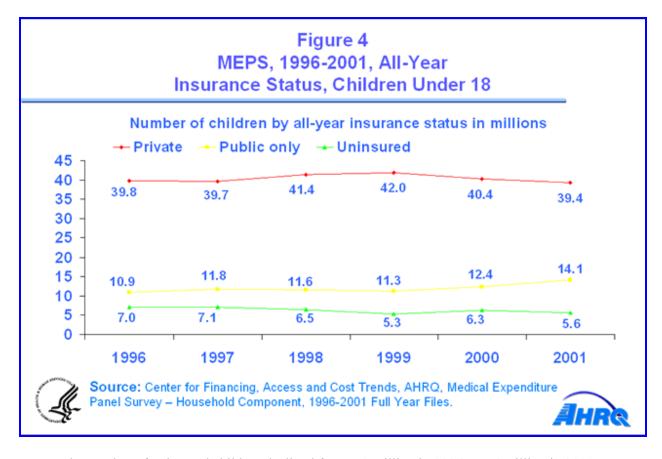
**Note:** The estimates of the uninsured are highest for people uninsured at any time in the year.



**Note:** The number of people uninsured varied up to twofold, depending on the time period used to define being uninsured.



**Note:** The percent of children uninsured all year declined from 10.4% in 1996 to 8.2% in 2001. Percents add to less than 100, since individuals who did not have the same insurance status all year are not shown.



**Note:** The number of uninsured children declined from 7.0 million in 1996 to 5.6 million in 2001.