

Health Insurance Coverage Bulletin

Abstract of Auxiliary Data for the March 2018 Annual Social
and Economic Supplement to the Current Population Survey

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INTRODUCTION

The Current Population Survey Annual Social and Economic Supplement (CPS ASEC) (also called the March CPS) is the data source most often used for estimating health insurance coverage in the United States. The survey asks respondents about their health insurance coverage during the previous calendar year. Specifically, it asks separate questions about each major type of insurance coverage, and those who answer “no” to every question on type of coverage are considered uninsured.¹ Because the insurance questions are not mutually exclusive, the March CPS captures multiple sources of health insurance during the year.

The survey generates nationally representative estimates of health insurance coverage and includes limited information on health expenditures and the cost of health insurance.² However, several important characteristics of health insurance which are particularly relevant to employer sponsored coverage are not contained in the March CPS.

¹ The survey logic should detect people who are ever covered by a given insurance type, or who are uninsured all year. However, the CPS is treated by a large part of the research community as producing point-in-time estimates for the uninsured, as well as for each insurance type. Starting with the March 2014 CPS, as released in the Fall of 2014, there is also a single point-in-time variable available which looks at whether persons are insured or uninsured at the time of the survey itself.

² Variables on health expenditures and premium costs were introduced on the March 2011 CPS. While premiums have not been tabulated, tables on out-of-pocket expenditures are included in the Bulletin.

To address these shortcomings, the U.S. Department of Labor’s (DOL) Employee Benefits Security Administration (EBSA) generates additional variables and imputes certain characteristics regarding employment and insurance, and then links this data to the March CPS data file. The resulting Auxiliary Data not only produces new variables, but also clarifies variables included in the March CPS, such as size (number of employees) and sector (private, Federal, or state/local) of employment, which do not necessarily represent the size and sector of the employer that provides health insurance coverage.³

While the March CPS reports whether coverage is from an employer, for *insured workers*, it does not distinguish between current and former employers as the source of that coverage; nor does it report whether, for *all workers*, the employer offers health insurance.⁴ To fill these gaps, EBSA first imputes current versus former employer coverage for insured workers, then imputes offers of coverage for all workers.⁵ For those deemed to be covered by a former employer, EBSA imputes employer size, employer sector, and whether coverage comes through COBRA or a retiree plan. For all those with employer sponsored health insurance, EBSA also imputes coverage characteristics such as the

³ The CPS is a self-reported household survey and there is some concern that respondents are referencing the size of the establishment they work for instead of the size of the actual employer when asked about employer size. While it is impossible to validate employer size in the private sector, EBSA does assign all state and Federal workers to the largest employer size (1000 or more) in its dataset.

⁴ The CPS does capture point-in-time offers of coverage for March 2018, but the Auxiliary Data is based on CY 2017 employment and insurance variables.

⁵ If coverage is from a current employer, then by default the employer provides health insurance. The imputation is for those workers with coverage from a former employer as well as for those workers without coverage in own name.

funding arrangement, plan type, and union arrangement. Finally, actuarial value, which represents the average value of an active employer sponsored health insurance plan, is imputed to active employees with health insurance in their own name.

Because individuals can have multiple sources of coverage in a given year, EBSA creates tables that assign a “primary” source of coverage for the year based on the following hierarchy: (1) employer sponsored insurance (ESI),⁶ (2) Medicare, (3) private non-group coverage, (4) Medicaid or CHIP, and (5) military or other public.⁷ This hierarchy allows us to avoid counting individuals more than once across coverage categories. Because the March CPS does not ask how long an individual is covered by each type of insurance, “primary” coverage should not be construed as the most important source of coverage in a given year.

Imputations for funding arrangement, self-insured and fully insured, are based on 2015 – 2017 Medical Expenditure Panel Survey Insurance Component (MEPS-IC) file tabulations from the Agency for Healthcare Research and Quality (AHRQ). The self-insured category includes persons covered by plans reported as

⁶ When a person has both Medicare and ESI, the primary source of coverage is dependent on employment status, size of employer and age of person per Medicare regulations. For workers or their spouses who are age 65 or over, ESI is the primary payer if the employer size is greater than 20; while for those younger than 65, ESI is the primary payer if the employer size is 100 or more. When ESI is designated as primary, we say that Medicare is the secondary payer (MSP).

⁷ For the tables as shown below, Medicaid, CHIP, military and other public are all combined into a single non-Medicare “other public insurance” category.

⁸ Note that this partition differs in concept from the estimates in the *Group Health Plans Report* by representing the total ESI covered population, rather

partly or completely self-insured.⁸ Plan-type imputations use information from both the MEPS-IC and the 2017 Kaiser Family Foundation Employer Health Benefits Survey (EHBS), as well as Federal Employees Health Benefits (FEHB) Program data for the Federal sector. Union imputations are based on both the CPS and the 2008 Panel, Wave 6 (2010 data) of the Survey of Income and Program Participation (SIPP), updated with trends in union coverage from both the National Health Interview Survey (NHIS) and later SIPP survey questions.⁹ Actuarial values are based on the National Compensation Survey (NCS) and plan-level data from the 2017 EHBS.

EBSA advises caution when interpreting imputed variables for small sample sizes. Users should refrain from reporting statistics at the state level for imputed variables, such as funding, union coverage, plan types, and coverage from a former employer.¹⁰ It is also worth noting that the state estimates shown below do not match those reported by the Census Bureau (“Health Insurance Coverage in the United States: 2017”). For its state-level estimates, Census uses the American Community Survey (ACS), which has a larger sample size and can offer accurate estimates at

than only the subset that were subject to reporting on a Form 5500. See *Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports*, U.S. Department of Labor, Employee Benefits Security Administration, October 2017, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2018-appendix-a.pdf>.

⁹ The union imputation was not performed on persons with coverage from self-employment. More detail can be found in the technical appendix.

¹⁰ More detail can be found in the technical appendix.

a more granular level (such as small states and in some cases MSAs) for smaller geographical areas.

HIGHLIGHTS

- The total population represented in the March 2018 CPS was 323.2 million. Of this number, 294.6 million (91 percent) were covered by at least one form of insurance in 2017, either private or public, and the remaining 28.5 million (9 percent) were classified as uninsured. Of the insured, 181.0 million (61 percent) had ESI, 55.6 million (19 percent) had Medicare, 51.8 million (18 percent) had non-ESI private coverage, and 76.3 million (26 percent) had non-Medicare public coverage, which includes both Medicaid and CHIP.¹¹
- Of the 272.1 million under age 65, 244.2 million (90 percent) were insured in 2017 and 27.9 million (10 percent) were uninsured.
- We assign “primary coverage,” using the coverage hierarchy as mentioned in the Introduction. For those insured in calendar year 2017, 172.5 million (59 percent) had ESI as their primary source of coverage, 51.8 million (18 percent) had Medicare, 22.9 million (8 percent) had non-ESI private coverage, and 47.5 million (16 percent) had some type of other (non-Medicare) public coverage.
- Of the 166.4 million workers reported in the March 2018 CPS, 80.9 million (49 percent) were covered in 2017 through a current employer and 31.3 million (19 percent) were eligible but not enrolled in their employer’s plan. Of

those eligible but not enrolled, 5.4 million (17 percent) were uninsured.

- In addition, of the 54.2 million who were not offered coverage by their employer (either being ineligible or the employer not offering coverage to any employee), 23 percent were uninsured.
- Health insurance offer rates are higher with larger employers; the share of uninsured workers drops precipitously as employer size increases.
- Self-insured coverage is more prevalent in the private sector. Moreover, the rate of self-insurance increases with employer size.
- Of the 181.0 million persons with ESI in 2017, 164.6 million (91 percent) had coverage through a current employer (either as a policyholder or dependent), 3.1 million (2 percent) had coverage through COBRA, and 13.4 million (7 percent) had retiree coverage. Of the 91.8 million who had coverage in their own name (as a policyholder), 80.9 million (88 percent) had coverage from a current employer, 1.5 million (2 percent) had COBRA, and 9.3 million (10 percent) had retiree coverage. Unsurprisingly, both COBRA and retiree coverage were heavily concentrated in larger employer sponsored plans.
- Of those with ESI, 50 percent were enrolled in a Preferred Provider Organization (PPO) plan. The remaining

¹¹ Persons may be counted in more than one category.

individuals were covered, in descending order, by high deductible health insurance plans (HDED),¹² Health Maintenance Organizations (HMO), or Point-of-Service (POS) plans.

- Union health insurance coverage was more prevalent in the public sector than the private sector. In the private sector, union coverage accounted for almost half of retiree coverage and less than 10 percent of active coverage. Prevalence rates in the public sector were more similar, 52 percent for retirees and 40 percent for actives.
- The actuarial values represent average plan “richness”—the share of covered expenses paid by the plan for claims incurred by an average population—for active workers with coverage in their own name. The actuarial values show, in general, overall plan richness at 84 percent—on average, a plan would pay 84 percent of covered expenses over a standard population.
- Out-of-pocket spending appears to increase with age, and was higher for those with either private insurance coverage or Medicare than for those with other public or no coverage. Average out-of-pocket costs for those with other public coverage (which includes Medicaid and CHIP) were lowest, followed closely by the uninsured. Both groups had lower costs, on average, than their same-age counterparts in other groups.
- A comparison of health insurance coverage at the time of survey questionnaire (March 2018 point-in-time) to coverage during the prior (CY 2017) year shows that the vast majority, 98 percent, of those insured in CY 2017 were also insured in March of 2018. Of those persons never insured in CY 2017, 92 percent were still uninsured in March of 2018. There was very little difference, however, in the number covered in CY 2017 (294.6 million) versus those covered at time of questionnaire (292.3 million).
- Roughly 21 percent of individuals age 35 and under with non-employer based private health insurance got their insurance through the exchange. This increased to 35 percent for those aged 55 to 64.

¹² High deductible health insurance plans include, but are not limited to, IRS qualified HDHP plans.

**Table 1A. Health Insurance Coverage from All Sources
by State: CY 2017**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
U.S.	323.2	294.6	181.0	139.2	44.2	55.6	51.8	76.3	28.5
Alabama	4.8	4.3	2.5	1.9	0.7	0.9	0.6	1.3	0.5
Alaska	0.7	0.6	0.4	0.2	0.2	0.1	*	0.3	0.1
Arizona	7.0	6.3	3.6	2.7	1.0	1.3	0.9	2.0	0.7
Arkansas	2.9	2.6	1.5	1.1	0.3	0.6	0.4	0.8	0.3
California	39.3	36.2	20.8	16.0	5.1	5.8	6.2	11.1	3.1
Colorado	5.5	5.0	3.4	2.7	0.7	0.8	0.9	1.2	0.5
Connecticut	3.6	3.4	2.1	1.6	0.5	0.7	0.5	0.9	0.2
Delaware	1.0	0.9	0.6	0.4	0.2	0.2	0.1	0.2	0.1
District of Columbia	0.7	0.7	0.4	0.3	0.2	0.1	0.1	0.2	*
Florida	20.9	18.3	10.1	7.7	2.5	4.5	4.2	4.3	2.6
Georgia	10.3	9.0	5.5	4.2	1.4	1.5	1.0	2.5	1.3
Hawaii	1.4	1.3	0.9	0.6	0.3	0.3	0.1	0.4	0.1
Idaho	1.7	1.6	0.9	0.7	0.2	0.3	0.4	0.4	0.2
Illinois	12.6	11.7	8.0	6.5	1.5	2.1	2.0	2.3	0.9
Indiana	6.6	6.2	4.1	3.3	0.8	1.1	0.9	1.5	0.4
Iowa	3.1	3.0	2.0	1.5	0.5	0.5	0.6	0.7	0.1
Kansas	2.9	2.6	1.6	1.2	0.4	0.5	0.5	0.6	0.3
Kentucky	4.4	4.2	2.3	1.8	0.6	0.9	0.8	1.2	0.2
Louisiana	4.5	4.1	2.1	1.6	0.6	0.8	0.6	1.4	0.5
Maine	1.3	1.2	0.7	0.5	0.2	0.3	0.2	0.4	0.1
Maryland	6.0	5.6	3.7	2.3	1.4	1.0	1.0	1.3	0.3
Massachusetts	6.8	6.6	4.5	3.6	1.0	1.1	1.1	1.6	0.2
Michigan	9.9	9.3	6.1	4.9	1.3	1.9	1.6	2.4	0.6
Minnesota	5.6	5.3	3.4	2.8	0.7	1.0	1.1	1.2	0.3
Mississippi	3.0	2.6	1.4	1.0	0.4	0.5	0.3	0.8	0.3
Missouri	6.0	5.5	3.5	2.9	0.7	1.1	1.1	1.1	0.5
Montana	1.0	1.0	0.5	0.4	0.2	0.2	0.2	0.3	0.1
Nebraska	1.9	1.7	1.1	0.9	0.2	0.3	0.4	0.3	0.2
Nevada	3.0	2.7	1.6	1.3	0.3	0.6	0.4	0.7	0.3
New Hampshire	1.3	1.2	0.8	0.7	0.2	0.3	0.3	0.2	0.1
New Jersey	9.0	8.4	5.4	4.2	1.3	1.6	1.9	1.7	0.6
New Mexico	2.0	1.8	0.8	0.5	0.3	0.4	0.2	0.8	0.2
New York	19.8	18.7	11.1	8.0	3.3	3.4	3.7	5.3	1.1

Continued....

**Table 1A. Health Insurance Coverage from All Sources
by State: CY 2017**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance /1			Medicare	Other Private Insurance /3	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
North Carolina	10.3	9.3	5.3	4.2	1.2	1.8	1.8	2.4	1.0
North Dakota	0.7	0.7	0.4	0.3	0.1	0.1	0.1	0.1	0.1
Ohio	11.5	10.9	7.3	5.6	1.8	2.1	1.4	2.8	0.7
Oklahoma	3.8	3.4	2.1	1.7	0.5	0.7	0.6	0.9	0.5
Oregon	4.2	4.0	2.3	1.8	0.6	0.9	0.8	1.1	0.2
Pennsylvania	12.6	11.8	7.5	5.8	1.8	2.5	2.4	2.7	0.8
Rhode Island	1.0	1.0	0.6	0.5	0.2	0.2	0.3	0.2	0.1
South Carolina	5.0	4.5	2.6	1.9	0.7	1.0	0.8	1.3	0.5
South Dakota	0.9	0.8	0.5	0.4	0.1	0.2	0.2	0.2	0.1
Tennessee	6.7	6.0	3.4	2.7	0.7	1.3	1.1	1.8	0.7
Texas	28.1	23.4	15.0	11.8	3.4	3.8	3.4	5.6	4.7
Utah	3.1	2.8	2.1	1.6	0.5	0.4	0.6	0.4	0.3
Vermont	0.6	0.6	0.4	0.3	0.1	0.1	0.1	0.1	*
Virginia	8.3	7.5	5.0	3.6	1.4	1.3	1.4	1.8	0.8
Washington	7.4	7.0	4.3	3.2	1.1	1.2	1.3	2.0	0.4
West Virginia	1.8	1.6	0.9	0.7	0.3	0.4	0.2	0.6	0.2
Wisconsin	5.8	5.4	3.6	2.9	0.7	1.0	0.9	1.1	0.4
Wyoming	0.6	0.5	0.3	0.2	0.1	0.1	0.1	0.1	0.1

NOTE: Estimates by coverage sources are not mutually exclusive; total population does not equal the sum by sources as persons can be covered by more than one type of health insurance during the year. Persons with employer sponsored insurance (ESI) coverage from two sources (self/spouse or both parents) can appear in both public and private sector totals.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents.

2/ Private sector includes the self-employed.

3/ Other Private Insurance (OPHI) includes any other nongovernment health insurance, including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

5/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 1B. Health Insurance Coverage from All Sources
by Age: CY 2017**
(numbers in millions)

Coverage Type	Age				
	Total	< 18	18-25	26-64	65+
Total Population	323.2	74.0	34.1	164.0	51.1
Total Insured	294.6	70.0	29.6	144.6	50.4
Employer Sponsored Insurance 1/	181.0	41.8	20.6	105.2	13.4
Policyholder	91.8	0.1	5.5	76.7	9.6
Dependent	97.6	41.8	16.2	35.2	4.4
Medicare	55.6	0.3	0.3	7.4	47.6
Other Private Insurance 2/	51.8	8.1	5.0	24.5	14.2
Policyholder	32.9	0.2	1.8	18.4	12.5
Dependent	20.7	8.0	3.3	7.1	2.3
Other Public Coverage 3/	76.3	31.1	8.3	29.6	7.4
Total Uninsured 4/	28.5	3.9	4.5	19.4	0.7

NOTE: Estimates by coverage sources are not mutually exclusive; total population does not equal the sum by source as persons can be covered by more than one type of health insurance during the year.

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Employer Sponsored Insurance (ESI) is defined as any insurance provided by a current or former employer to workers and their dependents.

2/ Other Private Insurance (OPHI) includes any other nongovernment health insurance, including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

4/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 1C. Health Insurance Coverage from Primary Source
by State: CY 2017**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
U.S.	323.2	294.6	172.5	135.4	37.1	51.8	22.9	47.5	28.5
Alabama	4.8	4.3	2.4	1.8	0.6	0.8	0.3	0.8	0.5
Alaska	0.7	0.6	0.4	0.2	0.1	0.1	*	0.2	0.1
Arizona	7.0	6.3	3.5	2.6	0.8	1.1	0.4	1.3	0.7
Arkansas	2.9	2.6	1.4	1.1	0.3	0.5	0.2	0.5	0.3
California	39.3	36.2	20.0	15.6	4.3	5.5	3.3	7.4	3.1
Colorado	5.5	5.0	3.3	2.6	0.6	0.7	0.4	0.7	0.5
Connecticut	3.6	3.4	2.0	1.5	0.4	0.6	0.2	0.6	0.2
Delaware	1.0	0.9	0.5	0.4	0.1	0.2	0.1	0.1	0.1
District of Columbia	0.7	0.7	0.4	0.3	0.1	0.1	0.1	0.1	*
Florida	20.9	18.3	9.5	7.5	2.0	4.3	2.0	2.5	2.6
Georgia	10.3	9.0	5.3	4.1	1.2	1.4	0.5	1.7	1.3
Hawaii	1.4	1.3	0.8	0.6	0.2	0.2	*	0.2	0.1
Idaho	1.7	1.6	0.9	0.7	0.2	0.3	0.2	0.2	0.2
Illinois	12.6	11.7	7.6	6.3	1.3	1.9	0.8	1.4	0.9
Indiana	6.6	6.2	3.8	3.2	0.6	1.0	0.4	0.9	0.4
Iowa	3.1	3.0	1.9	1.5	0.4	0.5	0.2	0.4	0.1
Kansas	2.9	2.6	1.5	1.2	0.3	0.5	0.2	0.4	0.3
Kentucky	4.4	4.2	2.2	1.7	0.4	0.9	0.4	0.8	0.2
Louisiana	4.5	4.1	2.0	1.5	0.5	0.8	0.3	1.0	0.5
Maine	1.3	1.2	0.7	0.5	0.2	0.3	0.1	0.2	0.1
Maryland	6.0	5.6	3.4	2.3	1.2	0.9	0.5	0.8	0.3
Massachusetts	6.8	6.6	4.3	3.5	0.9	1.0	0.4	0.9	0.2
Michigan	9.9	9.3	5.5	4.6	0.9	1.8	0.6	1.4	0.6
Minnesota	5.6	5.3	3.3	2.7	0.6	0.9	0.4	0.7	0.3
Mississippi	3.0	2.6	1.4	1.0	0.3	0.5	0.2	0.6	0.3
Missouri	6.0	5.5	3.4	2.8	0.6	1.0	0.5	0.6	0.5
Montana	1.0	1.0	0.5	0.4	0.1	0.2	0.1	0.2	0.1
Nebraska	1.9	1.7	1.1	0.9	0.2	0.3	0.1	0.2	0.2
Nevada	3.0	2.7	1.5	1.3	0.3	0.5	0.2	0.4	0.3
New Hampshire	1.3	1.2	0.8	0.7	0.2	0.2	0.1	0.1	0.1
New Jersey	9.0	8.4	5.1	4.0	1.1	1.5	0.8	1.0	0.6
New Mexico	2.0	1.8	0.8	0.5	0.3	0.4	0.1	0.6	0.2
New York	19.8	18.7	10.5	7.7	2.8	3.1	1.7	3.3	1.1

Continued....

**Table 1C. Health Insurance Coverage from Primary Source
by State: CY 2017**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
North Carolina	10.3	9.3	5.1	4.1	1.0	1.7	0.8	1.6	1.0
North Dakota	0.7	0.7	0.4	0.3	0.1	0.1	0.1	0.1	0.1
Ohio	11.5	10.9	6.9	5.5	1.5	2.0	0.5	1.5	0.7
Oklahoma	3.8	3.4	2.0	1.6	0.4	0.6	0.2	0.5	0.5
Oregon	4.2	4.0	2.2	1.7	0.5	0.8	0.3	0.6	0.2
Pennsylvania	12.6	11.8	7.1	5.6	1.5	2.4	0.7	1.6	0.8
Rhode Island	1.0	1.0	0.6	0.4	0.1	0.2	0.1	0.1	0.1
South Carolina	5.0	4.5	2.4	1.9	0.5	1.0	0.3	0.7	0.5
South Dakota	0.9	0.8	0.4	0.3	0.1	0.2	0.1	0.1	0.1
Tennessee	6.7	6.0	3.3	2.6	0.7	1.2	0.5	1.1	0.7
Texas	28.1	23.4	14.5	11.6	2.9	3.5	1.7	3.7	4.7
Utah	3.1	2.8	2.0	1.6	0.5	0.3	0.3	0.2	0.3
Vermont	0.6	0.6	0.3	0.2	0.1	0.1	0.1	0.1	*
Virginia	8.3	7.5	4.7	3.5	1.2	1.2	0.6	1.0	0.8
Washington	7.4	7.0	4.1	3.1	1.0	1.1	0.6	1.2	0.4
West Virginia	1.8	1.6	0.9	0.7	0.2	0.4	0.1	0.3	0.2
Wisconsin	5.8	5.4	3.4	2.8	0.6	1.0	0.4	0.6	0.4
Wyoming	0.6	0.5	0.3	0.2	0.1	0.1	*	0.1	0.1

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured. Persons with ESI coverage from two sources (self/spouse or both parents) will appear in private sector if either source of coverage is private sector.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column.

2/ Private sector includes the self-employed.

3/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

5/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 1D. Health Insurance Coverage from Primary Source
by Age: CY 2017**
(numbers in millions)

Coverage Type	Age				
	Total	< 18	18- 25	26- 64	65+
Total Population	323.2	74.0	34.1	164.0	51.1
Total Insured	294.6	70.0	29.6	144.6	50.4
Employer Sponsored Insurance 1/	172.5	41.8	20.6	104.6	5.5
Policyholder	85.4	0.1	5.5	76.4	3.5
Dependent	87.0	41.7	15.1	28.3	2.0
Medicare	51.8	0.3	0.2	7.0	44.3
Other Private Insurance 2/	22.9	4.7	3.2	14.5	0.5
Policyholder	13.0	0.1	1.3	11.2	0.4
Dependent	9.9	4.6	1.9	3.3	0.1
Other Public Coverage 3/	47.5	23.2	5.6	18.5	0.2
Total Uninsured 4/	28.5	3.9	4.5	19.4	0.7

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured.

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column.

2/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

4/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 2A. Insurance Coverage of Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2017**
(numbers in millions)

Employer Size	Employer Offer Status	Total Workers	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
				Total	Private Sector 2/	Public Sector				
Total	Total	166.4	148.7	114.8	89.6	25.2	7.8	13.1	13.0	17.7
	Coverage through current employer	80.9	80.9	80.5	64.8	15.7	0.4	0.0	0.0	0.0
	Eligible, not enrolled	31.3	25.9	15.3	10.8	4.6	1.9	3.9	4.7	5.4
	Employer offers, not eligible	21.5	17.5	8.7	6.2	2.5	2.5	3.0	3.3	4.0
	Employer doesn't offer	32.7	24.4	10.2	7.8	2.4	2.9	6.3	5.0	8.3
Employer Size Under 50	Total	55.8	46.0	27.8	23.8	3.9	4.6	8.1	5.5	9.9
	Coverage through current employer	14.1	14.1	13.7	13.1	0.5	0.4	0.0	0.0	0.0
	Eligible, not enrolled	7.9	6.3	3.4	2.5	0.9	0.6	1.4	0.9	1.6
	Employer offers, not eligible	7.7	6.1	2.6	2.0	0.6	1.1	1.4	1.0	1.6
	Employer doesn't offer	26.1	19.4	8.1	6.2	1.9	2.5	5.2	3.6	6.7
Employer Size 50-99	Total	11.7	10.6	8.6	7.4	1.2	0.4	0.7	0.8	1.1
	Coverage through current employer	6.2	6.2	6.2	5.7	0.6	*	0.0	0.0	0.0
	Eligible, not enrolled	2.4	2.0	1.2	0.9	0.4	0.1	0.3	0.3	0.5
	Employer offers, not eligible	1.6	1.3	0.7	0.5	0.2	0.1	0.2	0.2	0.3
	Employer doesn't offer	1.5	1.1	0.5	0.4	0.1	0.1	0.2	0.3	0.4
Employer Size 100-499	Total	20.2	18.6	15.6	13.1	2.6	0.7	1.0	1.2	1.7
	Coverage through current employer	12.1	12.1	12.1	10.5	1.5	0.0	0.0	0.0	0.0
	Eligible, not enrolled	4.1	3.3	2.0	1.5	0.6	0.3	0.4	0.6	0.8
	Employer offers, not eligible	2.7	2.2	1.1	0.8	0.4	0.3	0.4	0.4	0.5
	Employer doesn't offer	1.4	1.0	0.4	0.3	0.1	0.1	0.2	0.3	0.4
Employer Size 500+	Total	78.7	73.6	62.7	45.3	17.4	2.1	3.4	5.5	5.0
	Coverage through current employer	48.5	48.5	48.5	35.5	13.1	0.0	0.0	0.0	0.0
	Eligible, not enrolled	16.8	14.2	8.7	5.9	2.8	0.9	1.7	2.9	2.6
	Employer offers, not eligible	9.6	8.0	4.2	2.9	1.3	1.0	1.1	1.7	1.6
	Employer doesn't offer	3.7	2.9	1.2	0.9	0.3	0.2	0.6	0.8	0.8

NOTE: Workers are defined as any person age 15 and up who worked at all during the calendar year.

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private insurance (OPHI), other public coverage, and uninsured.

NOTE: Nonzero cells with under 50,000 persons are marked with a ***.

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column. Therefore, one may have "Coverage through current employer" and yet appear in the Medicare column rather than in the ESI column.

2/ Private sector includes the self-employed.

3/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

5/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 2B. Insurance Coverage of Full-Time Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2017**
(numbers in millions)

Employer Size	Employer Offer Status	Full-Time Workers	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
				Total	Private Sector 2/	Public Sector				
Total	Total	133.7	120.0	98.6	77.3	21.2	3.4	9.6	8.4	13.7
	Coverage through current employer	76.9	76.9	76.7	61.8	14.9	0.3	0.0	0.0	0.0
	Eligible, not enrolled	25.6	20.9	12.5	8.7	3.8	1.2	3.3	3.9	4.6
	Employer offers, not eligible	9.7	7.2	3.4	2.3	1.1	0.6	1.6	1.5	2.5
	Employer doesn't offer	21.5	14.9	5.9	4.5	1.4	1.3	4.7	3.0	6.6
Employer Size Under 50	Total	40.8	33.2	21.6	18.9	2.7	2.1	6.0	3.5	7.6
	Coverage through current employer	13.0	13.0	12.8	12.3	0.5	0.3	0.0	0.0	0.0
	Eligible, not enrolled	6.8	5.4	2.9	2.1	0.8	0.4	1.3	0.8	1.4
	Employer offers, not eligible	3.5	2.6	1.0	0.8	0.2	0.3	0.8	0.5	0.9
	Employer doesn't offer	17.4	12.1	4.9	3.7	1.2	1.1	3.9	2.2	5.3
Employer Size 50-99	Total	9.9	8.9	7.6	6.6	1.0	0.2	0.5	0.5	1.0
	Coverage through current employer	5.9	5.9	5.9	5.4	0.5	*	0.0	0.0	0.0
	Eligible, not enrolled	2.1	1.7	1.1	0.7	0.3	0.1	0.3	0.3	0.4
	Employer offers, not eligible	0.8	0.6	0.4	0.2	0.1	0.1	0.1	0.1	0.2
	Employer doesn't offer	1.0	0.7	0.3	0.2	0.1	*	0.2	0.2	0.3
Employer Size 100-499	Total	17.5	16.1	14.2	12.0	2.2	0.3	0.8	0.9	1.4
	Coverage through current employer	11.7	11.7	11.7	10.2	1.5	0.0	0.0	0.0	0.0
	Eligible, not enrolled	3.4	2.8	1.7	1.2	0.5	0.2	0.4	0.5	0.7
	Employer offers, not eligible	1.5	1.1	0.6	0.4	0.2	0.1	0.2	0.2	0.4
	Employer doesn't offer	1.0	0.6	0.2	0.2	0.1	0.1	0.2	0.2	0.3
Employer Size 500+	Total	65.5	61.8	55.2	39.9	15.3	0.8	2.2	3.6	3.8
	Coverage through current employer	46.3	46.3	46.3	33.9	12.4	0.0	0.0	0.0	0.0
	Eligible, not enrolled	13.3	11.1	6.8	4.6	2.3	0.5	1.4	2.4	2.2
	Employer offers, not eligible	3.9	2.9	1.5	0.9	0.6	0.2	0.5	0.7	1.0
	Employer doesn't offer	2.1	1.5	0.6	0.5	0.1	0.1	0.4	0.4	0.6

NOTE: Full-time workers are defined as any person age 15 and up who worked at all during the calendar year, where hours at longest job held were 35 or greater.

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private insurance (OPHI), other public coverage, and uninsured.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column. Therefore, one may have "Coverage through current employer" and yet appear in the Medicare column rather than in the ESI column.

2/ Private sector includes the self-employed.

3/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

5/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 2C. Insurance Coverage of Part-Time Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2017**

(numbers in millions)

Employer Size	Employer Offer Status	Part-Time Workers	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
				Total	Private Sector 2/	Public Sector				
Total	Total	32.7	28.7	16.2	12.3	3.9	4.4	3.6	4.6	4.0
	Coverage through current employer	4.0	4.0	3.8	3.0	0.8	0.1	0.0	0.0	0.0
	Eligible, not enrolled	5.7	4.9	2.8	2.1	0.7	0.7	0.6	0.8	0.8
	Employer offers, not eligible	11.8	10.4	5.3	3.9	1.4	1.9	1.4	1.8	1.5
	Employer doesn't offer	11.2	9.5	4.3	3.3	1.0	1.7	1.6	2.0	1.7
Employer Size Under 50	Total	15.1	12.8	6.2	5.0	1.3	2.5	2.0	2.0	2.3
	Coverage through current employer	1.1	1.1	0.9	0.9	*	0.1	0.0	0.0	0.0
	Eligible, not enrolled	1.2	1.0	0.5	0.4	0.1	0.2	0.1	0.1	0.2
	Employer offers, not eligible	4.1	3.5	1.6	1.2	0.4	0.8	0.6	0.5	0.6
	Employer doesn't offer	8.7	7.3	3.2	2.5	0.7	1.4	1.3	1.4	1.4
Employer Size 50-99	Total	1.8	1.6	1.0	0.8	0.2	0.2	0.2	0.3	0.2
	Coverage through current employer	0.3	0.3	0.3	0.2	*	*	0.0	0.0	0.0
	Eligible, not enrolled	0.3	0.3	0.2	0.1	*	0.1	*	*	*
	Employer offers, not eligible	0.7	0.7	0.4	0.3	0.1	0.1	0.1	0.1	0.1
	Employer doesn't offer	0.5	0.4	0.2	0.1	0.1	0.1	0.1	0.1	0.1
Employer Size 100-499	Total	2.7	2.4	1.5	1.1	0.4	0.3	0.3	0.4	0.3
	Coverage through current employer	0.4	0.4	0.4	0.3	0.1	0.0	0.0	0.0	0.0
	Eligible, not enrolled	0.6	0.5	0.3	0.2	0.1	0.1	0.1	0.1	0.1
	Employer offers, not eligible	1.2	1.1	0.6	0.4	0.2	0.2	0.2	0.2	0.1
	Employer doesn't offer	0.4	0.4	0.2	0.1	*	*	0.1	0.1	*
Employer Size 500+	Total	13.1	11.8	7.5	5.4	2.1	1.3	1.1	1.9	1.3
	Coverage through current employer	2.2	2.2	2.2	1.6	0.7	0.0	0.0	0.0	0.0
	Eligible, not enrolled	3.6	3.1	1.9	1.4	0.5	0.4	0.4	0.5	0.4
	Employer offers, not eligible	5.7	5.1	2.7	2.0	0.8	0.8	0.6	1.0	0.6
	Employer doesn't offer	1.6	1.4	0.7	0.5	0.2	0.1	0.2	0.4	0.2

NOTE: Part-time workers are defined as any person age 15 and up who worked at all during the calendar year, where hours at longest job held were under 35.

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private insurance (OPHI), other public coverage, and uninsured.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column. Therefore, one may have "Coverage through current employer" and yet appear in the Medicare column rather than in the ESI column.

2/ Private sector includes the self-employed.

3/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

5/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3A. All Persons with Employer Sponsored Insurance
by State, Funding Status, and Sector Providing Coverage: CY 2017**
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured
U.S.	181.0	138.1	84.3	53.8	43.0	16.9	26.0
Alabama	2.5	1.8	1.2	0.6	0.6	0.2	0.4
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.6	2.7	1.9	0.7	0.9	0.4	0.5
Arkansas	1.5	1.1	0.7	0.4	0.3	0.1	0.2
California	20.8	15.9	7.1	8.8	4.9	1.6	3.4
Colorado	3.4	2.7	1.7	1.0	0.7	0.2	0.4
Connecticut	2.1	1.6	1.0	0.6	0.5	0.2	0.3
Delaware	0.6	0.4	0.3	0.1	0.2	0.1	0.1
District of Columbia	0.4	0.3	0.1	0.1	0.2	*	0.2
Florida	10.1	7.6	4.8	2.8	2.4	0.9	1.5
Georgia	5.5	4.2	2.6	1.6	1.3	0.6	0.8
Hawaii	0.9	0.6	0.2	0.4	0.3	0.1	0.2
Idaho	0.9	0.7	0.5	0.3	0.2	0.1	0.1
Illinois	8.0	6.5	4.3	2.2	1.5	0.7	0.8
Indiana	4.1	3.3	2.2	1.1	0.8	0.3	0.4
Iowa	2.0	1.5	1.0	0.5	0.4	0.2	0.3
Kansas	1.6	1.2	0.8	0.4	0.4	0.1	0.3
Kentucky	2.3	1.8	1.1	0.7	0.5	0.3	0.3
Louisiana	2.1	1.5	0.9	0.6	0.6	0.2	0.4
Maine	0.7	0.5	0.3	0.2	0.2	0.1	0.1
Maryland	3.7	2.3	1.4	1.0	1.4	0.3	1.1
Massachusetts	4.5	3.5	2.1	1.4	1.0	0.4	0.6
Michigan	6.1	4.8	2.8	2.0	1.2	0.5	0.7
Minnesota	3.4	2.8	1.9	0.9	0.7	0.3	0.3
Mississippi	1.4	1.0	0.6	0.4	0.4	0.2	0.2
Missouri	3.5	2.8	1.8	1.0	0.7	0.3	0.4
Montana	0.5	0.4	0.2	0.1	0.2	0.1	0.1
Nebraska	1.1	0.9	0.6	0.3	0.2	0.1	0.1
Nevada	1.6	1.3	0.6	0.6	0.3	0.1	0.2
New Hampshire	0.8	0.7	0.4	0.3	0.2	0.1	0.1
New Jersey	5.4	4.1	2.3	1.8	1.2	0.6	0.7
New Mexico	0.8	0.5	0.3	0.2	0.3	0.1	0.2
New York	11.1	7.9	4.4	3.5	3.2	1.3	1.9

Continued....

**Table 3A. All Persons with Employer Sponsored Insurance
by State, Funding Status, and Sector Providing Coverage: CY 2017**
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured
North Carolina	5.3	4.2	2.9	1.3	1.1	0.6	0.6
North Dakota	0.4	0.3	0.2	0.1	0.1	0.1	0.1
Ohio	7.3	5.6	3.8	1.9	1.7	0.7	1.0
Oklahoma	2.1	1.6	1.0	0.6	0.5	0.2	0.3
Oregon	2.3	1.8	0.9	0.8	0.6	0.2	0.4
Pennsylvania	7.5	5.8	3.9	1.9	1.7	0.7	1.0
Rhode Island	0.6	0.5	0.2	0.2	0.1	*	0.1
South Carolina	2.6	1.9	1.3	0.6	0.7	0.3	0.4
South Dakota	0.5	0.3	0.2	0.2	0.1	*	0.1
Tennessee	3.4	2.7	1.7	0.9	0.7	0.3	0.4
Texas	15.0	11.7	7.8	3.9	3.3	1.5	1.8
Utah	2.1	1.6	1.0	0.6	0.5	0.2	0.3
Vermont	0.4	0.3	0.1	0.1	0.1	*	0.1
Virginia	5.0	3.6	2.2	1.4	1.4	0.4	1.0
Washington	4.3	3.2	2.0	1.2	1.1	0.5	0.6
West Virginia	0.9	0.7	0.5	0.2	0.3	0.1	0.1
Wisconsin	3.6	2.9	1.9	1.0	0.7	0.3	0.3
Wyoming	0.3	0.2	0.1	0.1	0.1	*	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, October 2017, at

<https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2018-appendix-a.pdf>.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3B. All Persons with Employer Sponsored Insurance
by Size, Funding Status, and Sector Providing Coverage: CY 2017**
(numbers in millions)

Employer Size	Total			Private Sector 1/			Public Sector		
	Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured
Total	181.0	101.2	79.8	138.1	84.3	53.8	43.0	16.9	26.0
Less than 10 Employees	11.0	1.9	9.1	10.7	1.9	8.8	0.2	*	0.2
10 - 49 Employees	15.8	2.5	13.3	15.0	2.4	12.6	0.8	0.1	0.7
50 - 99 Employees	12.4	2.4	10.0	11.2	2.3	9.0	1.2	0.2	1.0
100 - 499 Employees	25.3	10.4	14.9	21.5	9.4	12.1	3.8	0.9	2.9
500 - 999 Employees	12.5	6.0	6.5	9.9	5.2	4.7	2.6	0.8	1.7
1,000 or more Employees	104.0	77.9	26.0	69.7	63.1	6.6	34.3	14.8	19.5

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Nonzero cells with under 50,000 persons are marked with a "*".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, October 2017, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2018-appendix-a.pdf>.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3C. All Persons with Employer Sponsored Insurance
by State, Policyholder Status, and Sector Providing Coverage: CY 2017**
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
U.S.	181.0	138.1	69.3	68.8	43.0	22.5	20.4
Alabama	2.5	1.8	0.9	0.9	0.6	0.3	0.3
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.6	2.7	1.3	1.4	0.9	0.5	0.5
Arkansas	1.5	1.1	0.6	0.6	0.3	0.2	0.2
California	20.8	15.9	8.2	7.7	4.9	2.5	2.4
Colorado	3.4	2.7	1.4	1.3	0.7	0.4	0.3
Connecticut	2.1	1.6	0.8	0.8	0.5	0.3	0.3
Delaware	0.6	0.4	0.2	0.2	0.2	0.1	0.1
District of Columbia	0.4	0.3	0.2	0.1	0.2	0.1	0.1
Florida	10.1	7.6	4.0	3.7	2.4	1.3	1.1
Georgia	5.5	4.2	2.2	2.0	1.3	0.7	0.6
Hawaii	0.9	0.6	0.4	0.3	0.3	0.2	0.1
Idaho	0.9	0.7	0.3	0.4	0.2	0.1	0.1
Illinois	8.0	6.5	3.0	3.4	1.5	0.8	0.7
Indiana	4.1	3.3	1.6	1.7	0.8	0.4	0.4
Iowa	2.0	1.5	0.7	0.8	0.4	0.2	0.2
Kansas	1.6	1.2	0.6	0.6	0.4	0.2	0.2
Kentucky	2.3	1.8	1.0	0.8	0.5	0.3	0.2
Louisiana	2.1	1.5	0.8	0.8	0.6	0.3	0.3
Maine	0.7	0.5	0.3	0.2	0.2	0.1	0.1
Maryland	3.7	2.3	1.2	1.1	1.4	0.7	0.7
Massachusetts	4.5	3.5	1.7	1.9	1.0	0.5	0.5
Michigan	6.1	4.8	2.3	2.5	1.2	0.7	0.6
Minnesota	3.4	2.8	1.3	1.4	0.7	0.3	0.3
Mississippi	1.4	1.0	0.6	0.5	0.4	0.2	0.1
Missouri	3.5	2.8	1.4	1.4	0.7	0.4	0.3
Montana	0.5	0.4	0.2	0.2	0.2	0.1	0.1
Nebraska	1.1	0.9	0.4	0.5	0.2	0.1	0.1
Nevada	1.6	1.3	0.6	0.6	0.3	0.2	0.1
New Hampshire	0.8	0.7	0.3	0.4	0.2	0.1	0.1
New Jersey	5.4	4.1	2.0	2.1	1.2	0.6	0.6
New Mexico	0.8	0.5	0.3	0.3	0.3	0.2	0.2
New York	11.1	7.9	4.2	3.8	3.2	1.6	1.6

Continued....

**Table 3C. All Persons with Employer Sponsored Insurance
by State, Policyholder Status, and Sector Providing Coverage: CY 2017**
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
North Carolina	5.3	4.2	2.3	1.9	1.1	0.7	0.4
North Dakota	0.4	0.3	0.2	0.2	0.1	0.1	0.1
Ohio	7.3	5.6	2.7	2.9	1.7	0.8	0.9
Oklahoma	2.1	1.6	0.8	0.8	0.5	0.3	0.2
Oregon	2.3	1.8	0.9	0.9	0.6	0.3	0.3
Pennsylvania	7.5	5.8	2.9	2.9	1.7	0.9	0.9
Rhode Island	0.6	0.5	0.2	0.2	0.1	0.1	0.1
South Carolina	2.6	1.9	1.0	0.9	0.7	0.4	0.3
South Dakota	0.5	0.3	0.2	0.2	0.1	0.1	0.1
Tennessee	3.4	2.7	1.3	1.3	0.7	0.4	0.4
Texas	15.0	11.7	5.9	5.9	3.3	1.8	1.5
Utah	2.1	1.6	0.6	0.9	0.5	0.2	0.3
Vermont	0.4	0.3	0.1	0.1	0.1	0.1	0.1
Virginia	5.0	3.6	1.8	1.8	1.4	0.8	0.6
Washington	4.3	3.2	1.6	1.6	1.1	0.6	0.5
West Virginia	0.9	0.7	0.3	0.3	0.3	0.1	0.1
Wisconsin	3.6	2.9	1.4	1.5	0.7	0.3	0.4
Wyoming	0.3	0.2	0.1	0.1	0.1	*	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined as any insurance provided by a current or former employer to workers and their dependents.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ Dependents only include those who are not also policyholders.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3D. All Persons with Employer Sponsored Insurance
by State, Funding Status, and Policyholder Status: CY 2017**
(numbers in millions)

State	Total	Self-Insured 1/			Fully Insured		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
U.S.	181.0	101.2	50.5	50.8	79.8	41.3	38.5
Alabama	2.5	1.4	0.7	0.7	1.1	0.5	0.5
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.6	2.4	1.1	1.2	1.2	0.6	0.6
Arkansas	1.5	0.9	0.4	0.4	0.6	0.3	0.3
California	20.8	8.7	4.4	4.3	12.2	6.3	5.9
Colorado	3.4	1.9	1.0	0.9	1.4	0.8	0.6
Connecticut	2.1	1.2	0.6	0.6	0.9	0.5	0.4
Delaware	0.6	0.4	0.2	0.2	0.2	0.1	0.1
District of Columbia	0.4	0.1	0.1	0.1	0.3	0.2	0.1
Florida	10.1	5.8	3.0	2.7	4.3	2.3	2.0
Georgia	5.5	3.2	1.7	1.5	2.3	1.2	1.1
Hawaii	0.9	0.3	0.2	0.1	0.6	0.4	0.3
Idaho	0.9	0.5	0.3	0.3	0.4	0.2	0.2
Illinois	8.0	5.0	2.3	2.7	3.0	1.5	1.5
Indiana	4.1	2.6	1.3	1.3	1.5	0.8	0.7
Iowa	2.0	1.2	0.5	0.6	0.8	0.4	0.4
Kansas	1.6	1.0	0.5	0.5	0.6	0.3	0.3
Kentucky	2.3	1.4	0.7	0.7	1.0	0.5	0.4
Louisiana	2.1	1.1	0.6	0.6	1.0	0.5	0.5
Maine	0.7	0.4	0.2	0.2	0.4	0.2	0.2
Maryland	3.7	1.7	0.8	0.8	2.0	1.0	1.0
Massachusetts	4.5	2.4	1.1	1.3	2.1	1.0	1.0
Michigan	6.1	3.3	1.6	1.7	2.7	1.4	1.3
Minnesota	3.4	2.2	1.0	1.2	1.2	0.6	0.6
Mississippi	1.4	0.8	0.4	0.4	0.6	0.3	0.2
Missouri	3.5	2.1	1.1	1.1	1.4	0.7	0.7
Montana	0.5	0.3	0.1	0.1	0.2	0.1	0.1
Nebraska	1.1	0.7	0.3	0.4	0.4	0.2	0.2
Nevada	1.6	0.8	0.4	0.4	0.8	0.4	0.4
New Hampshire	0.8	0.5	0.2	0.3	0.4	0.2	0.2
New Jersey	5.4	2.9	1.4	1.5	2.5	1.2	1.3
New Mexico	0.8	0.5	0.2	0.2	0.4	0.2	0.2
New York	11.1	5.7	3.0	2.7	5.4	2.8	2.6

Continued....

**Table 3D. All Persons with Employer Sponsored Insurance
by State, Funding Status, and Policyholder Status: CY 2017**
(numbers in millions)

State	Total	Self-Insured 1/			Fully Insured		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
North Carolina	5.3	3.4	1.9	1.5	1.9	1.1	0.8
North Dakota	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Ohio	7.3	4.4	2.1	2.3	2.9	1.4	1.5
Oklahoma	2.1	1.1	0.6	0.6	1.0	0.5	0.4
Oregon	2.3	1.1	0.6	0.5	1.2	0.6	0.6
Pennsylvania	7.5	4.6	2.3	2.3	2.9	1.5	1.4
Rhode Island	0.6	0.3	0.1	0.2	0.3	0.2	0.2
South Carolina	2.6	1.6	0.8	0.7	1.0	0.6	0.4
South Dakota	0.5	0.2	0.1	0.1	0.2	0.1	0.1
Tennessee	3.4	2.0	1.0	1.0	1.4	0.7	0.7
Texas	15.0	9.3	4.7	4.6	5.8	3.0	2.8
Utah	2.1	1.2	0.5	0.7	0.9	0.4	0.5
Vermont	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Virginia	5.0	2.6	1.3	1.3	2.4	1.2	1.1
Washington	4.3	2.5	1.2	1.2	1.8	1.0	0.8
West Virginia	0.9	0.6	0.3	0.3	0.3	0.2	0.2
Wisconsin	3.6	2.2	1.1	1.1	1.4	0.7	0.7
Wyoming	0.3	0.2	0.1	0.1	0.1	0.1	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined as any insurance provided by a current or former employer to workers and their dependents.

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, October 2017, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2018-appendix-a.pdf>.

2/ Dependents only include those who are not also policyholders.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 4. All Persons with Employer Sponsored Insurance
by Policyholder Status, Sector, and Size of Employer Providing Coverage: CY 2017**
(numbers in millions)

Employer Size	Sector 1/	Total	Current Employer	Former Employer		
				Total	COBRA	Retiree
Total	Total	181.0	164.6	16.5	3.1	13.4
	Private Sector	138.1	131.5	6.5	2.6	3.9
	Public Sector	43.0	33.0	9.9	0.5	9.5
	Policyholders	91.8	80.9	10.9	1.5	9.3
	Private Sector	69.3	65.2	4.0	1.3	2.7
	Public Sector	22.5	15.7	6.8	0.2	6.6
	Dependents 2/	89.2	83.6	5.6	1.5	4.1
	Public Sector	68.8	66.3	2.5	1.3	1.2
Less than 50 Employees	Total	26.8	26.7	0.1	*	0.1
	Private Sector	25.7	25.6	0.1	*	0.1
	Public Sector	1.1	1.1	*	0.0	*
	Policyholders	14.2	14.1	0.1	*	0.1
	Private Sector	13.6	13.6	0.1	*	0.1
	Public Sector	0.5	0.5	*	0.0	*
	Dependents 2/	12.7	12.6	*	*	*
	Public Sector	12.1	12.1	*	*	*
50 - 99 Employees	Total	12.4	12.1	0.4	0.1	0.3
	Private Sector	11.2	11.0	0.2	0.1	0.1
	Public Sector	1.2	1.1	0.1	*	0.1
	Policyholders	6.5	6.2	0.3	0.1	0.2
	Private Sector	5.8	5.7	0.1	0.1	0.1
	Public Sector	0.7	0.6	0.1	*	0.1
	Dependents 2/	6.0	5.8	0.1	0.1	0.1
	Public Sector	5.4	5.3	0.1	0.1	*
100 - 499 Employees	Total	25.3	24.3	1.0	0.3	0.7
	Private Sector	21.5	20.9	0.6	0.3	0.3
	Public Sector	3.8	3.4	0.5	*	0.4
	Policyholders	12.8	12.1	0.7	0.2	0.5
	Private Sector	10.9	10.5	0.4	0.2	0.2
	Public Sector	1.8	1.5	0.3	*	0.3
	Dependents 2/	12.6	12.2	0.3	0.1	0.2
	Public Sector	10.6	10.4	0.2	0.1	0.1
Public Sector	2.0	1.8	0.1	*	0.1	

Continued....

**Table 4. All Persons with Employer Sponsored Insurance
by Policyholder Status, Sector, and Size of Employer Providing Coverage: CY 2017**
(numbers in millions)

Employer Size	Sector 1/	Total	Current Employer	Former Employer		
				Total	COBRA	Retiree
500 - 999 Employees	Total	12.5	10.8	1.7	0.5	1.1
	Private Sector	9.9	9.0	0.9	0.5	0.5
	Public Sector	2.6	1.9	0.7	0.1	0.7
	Policyholders	6.3	5.2	1.0	0.3	0.8
	Private Sector	4.9	4.4	0.5	0.2	0.3
	Public Sector	1.3	0.8	0.5	*	0.5
	Dependents 2/	6.2	5.6	0.6	0.3	0.3
	Private Sector	5.0	4.6	0.4	0.3	0.1
	Public Sector	1.3	1.0	0.2	*	0.2
1,000 or more Employees	Total	104.0	90.7	13.3	2.0	11.2
	Private Sector	69.7	65.1	4.7	1.6	3.0
	Public Sector	34.3	25.6	8.6	0.4	8.2
	Policyholders	52.2	43.3	8.8	1.0	7.8
	Private Sector	34.0	31.1	2.9	0.8	2.1
	Public Sector	18.2	12.3	5.9	0.2	5.7
	Dependents 2/	51.8	47.4	4.5	1.0	3.4
	Private Sector	35.7	34.0	1.7	0.8	0.9
	Public Sector	16.1	13.4	2.7	0.2	2.5

NOTE: Employer Sponsored Insurance (ESI) is defined as any insurance provided by a current or former employer to workers and their dependents.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ Dependents only include those who are not also policyholders.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 5A. All Persons with Employer Sponsored Insurance
by State and Plan Type (Private Sector Only): CY 2017**
(numbers in millions)

State	Total	Private Sector 1/				
		Total Private	HMO 2/	PPO 3/	POS 4/	HDED 5/
U.S.	181.0	138.1	18.2	67.5	12.7	39.6
Alabama	2.5	1.8	0.1	0.9	0.2	0.7
Alaska	0.4	0.2	*	0.1	*	0.1
Arizona	3.6	2.7	0.2	1.7	0.3	0.6
Arkansas	1.5	1.1	*	0.6	0.1	0.4
California	20.8	15.9	5.6	5.6	1.2	3.5
Colorado	3.4	2.7	0.4	1.4	0.2	0.7
Connecticut	2.1	1.6	0.1	0.9	0.1	0.4
Delaware	0.6	0.4	0.1	0.2	*	0.1
District of Columbia	0.4	0.3	*	0.1	*	0.1
Florida	10.1	7.6	0.9	3.6	0.8	2.3
Georgia	5.5	4.2	0.3	2.7	0.4	0.8
Hawaii	0.9	0.6	0.1	0.2	*	0.3
Idaho	0.9	0.7	*	0.4	*	0.2
Illinois	8.0	6.5	0.6	3.6	0.8	1.5
Indiana	4.1	3.3	0.2	2.0	0.3	0.8
Iowa	2.0	1.5	0.1	0.8	0.1	0.6
Kansas	1.6	1.2	*	0.6	0.1	0.4
Kentucky	2.3	1.8	0.1	0.8	0.2	0.7
Louisiana	2.1	1.5	0.1	0.9	0.2	0.3
Maine	0.7	0.5	0.1	0.2	0.1	0.2
Maryland	3.7	2.3	0.4	1.0	0.2	0.7
Massachusetts	4.5	3.5	0.9	1.6	0.3	0.8
Michigan	6.1	4.8	0.9	2.0	0.4	1.5
Minnesota	3.4	2.8	0.1	1.2	0.3	1.2
Mississippi	1.4	1.0	0.1	0.6	0.1	0.3
Missouri	3.5	2.8	0.2	1.6	0.3	0.8
Montana	0.5	0.4	*	0.2	*	0.2
Nebraska	1.1	0.9	*	0.4	0.1	0.4
Nevada	1.6	1.3	0.2	0.6	0.1	0.3
New Hampshire	0.8	0.7	0.2	0.3	*	0.2
New Jersey	5.4	4.1	0.8	1.8	0.4	1.1
New Mexico	0.8	0.5	0.1	0.3	*	0.1
New York	11.1	7.9	1.2	3.4	0.7	2.6

Continued....

**Table 5A. All Persons with Employer Sponsored Insurance
by State and Plan Type (Private Sector Only): CY 2017**
(numbers in millions)

State	Total	Private Sector 1/				
		Total Private	HMO 2/	PPO 3/	POS 4/	HDED 5/
North Carolina	5.3	4.2	0.3	2.2	0.4	1.2
North Dakota	0.4	0.3	*	0.1	*	0.2
Ohio	7.3	5.6	0.3	3.1	0.5	1.7
Oklahoma	2.1	1.6	0.1	0.8	0.2	0.5
Oregon	2.3	1.8	0.3	0.8	0.2	0.5
Pennsylvania	7.5	5.8	0.6	3.3	0.5	1.5
Rhode Island	0.6	0.5	*	0.1	*	0.3
South Carolina	2.6	1.9	0.1	1.0	0.2	0.6
South Dakota	0.5	0.3	*	0.1	*	0.2
Tennessee	3.4	2.7	0.2	1.6	0.2	0.6
Texas	15.0	11.7	0.9	5.8	1.1	4.0
Utah	2.1	1.6	0.2	0.8	0.1	0.4
Vermont	0.4	0.3	*	0.1	*	0.1
Virginia	5.0	3.6	0.5	1.7	0.3	1.0
Washington	4.3	3.2	0.2	1.7	0.3	0.9
West Virginia	0.9	0.7	*	0.3	0.1	0.2
Wisconsin	3.6	2.9	0.2	1.6	0.3	0.8
Wyoming	0.3	0.2	*	0.1	*	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined as any insurance provided by a current or former employer to workers and their dependents.

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ HMO stands for Health Maintenance Organization.

3/ PPO stands for Preferred Provider Organization.

4/ POS stands for Point-of-Service plan.

5/ HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 5B. All Persons with Employer Sponsored Insurance
by Sector and Size of Employer Providing Coverage, by Funding and Plan Type: CY 2017**
(numbers in millions)

Sector 1/	Employer Size	Self-Insured 2/					Fully Insured					Total				
		Total	HMO 3/	PPO 4/	POS 5/	HDED 6/	Total	HMO 3/	PPO 4/	POS 5/	HDED 6/	Total	HMO 3/	PPO 4/	POS 5/	HDED 6/
	Total	101.2	5.9	58.6	5.8	30.9	79.8	21.7	31.2	8.4	18.5	181.0	27.6	89.8	14.2	49.5
Total	Less than 50 employees	4.4	0.2	2.4	0.4	1.4	22.4	3.6	9.2	4.5	5.1	26.8	3.8	11.6	4.9	6.5
	50 - 99 employees	2.4	0.1	1.4	0.2	0.7	10.0	1.5	4.4	2.0	2.2	12.4	1.6	5.8	2.2	2.9
	100 - 499 employees	10.4	0.8	6.5	0.3	2.8	14.9	4.0	5.4	1.0	4.5	25.3	4.8	11.9	1.3	7.3
	500 - 999 employees	6.0	0.6	3.6	0.2	1.7	6.5	1.9	2.4	0.3	1.9	12.5	2.4	6.0	0.5	3.6
	1,000 or more employees	77.9	4.2	44.7	4.7	24.3	26.0	10.8	9.8	0.6	4.8	104.0	15.0	54.5	5.4	29.1
Private Sector	Total	84.3	4.9	48.4	5.2	25.8	53.8	13.3	19.1	7.5	13.9	138.1	18.2	67.5	12.7	39.6
	Less than 50 employees	4.3	0.2	2.3	0.4	1.4	21.4	3.5	8.8	4.3	5.0	25.7	3.6	11.1	4.6	6.3
	50 - 99 employees	2.3	0.1	1.3	0.2	0.6	9.0	1.4	3.9	1.8	1.9	11.2	1.5	5.2	2.0	2.6
	100 - 499 employees	9.4	0.7	5.8	0.3	2.6	12.1	3.3	4.4	0.9	3.5	21.5	4.0	10.2	1.2	6.1
	500 - 999 employees	5.2	0.5	3.1	0.2	1.5	4.7	1.4	1.6	0.3	1.4	9.9	1.9	4.7	0.4	2.9
	1,000 or more employees	63.1	3.4	35.8	4.2	19.7	6.6	3.8	0.5	0.3	2.0	69.7	7.2	36.3	4.5	21.7
Public Sector	Total	16.9	1.0	10.2	0.6	5.2	26.0	8.4	12.1	0.9	4.7	43.0	9.3	22.2	1.5	9.9
	Less than 50 employees	0.2	*	0.1	*	*	0.9	0.1	0.4	0.2	0.2	1.1	0.1	0.5	0.2	0.2
	50 - 99 employees	0.2	*	0.1	*	*	1.0	0.1	0.5	0.2	0.3	1.2	0.1	0.6	0.2	0.3
	100 - 499 employees	0.9	*	0.6	*	0.3	2.9	0.8	1.1	0.1	1.0	3.8	0.8	1.7	0.1	1.2
	500 - 999 employees	0.8	0.1	0.5	*	0.2	1.7	0.4	0.7	0.1	0.5	2.6	0.5	1.3	0.1	0.7
	1,000 or more employees	14.8	0.8	8.8	0.5	4.6	19.5	7.0	9.3	0.4	2.8	34.3	7.8	18.2	0.9	7.4

NOTE: Employer Sponsored Insurance (ESI) is defined as any insurance provided by a current or former employer to workers and their dependents.

NOTE: Nonzero cells with under 50,000 persons are marked with a ***.

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, October 2017, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2018-appendix-a.pdf>.

3/ HMO stands for Health Maintenance Organization.

4/ PPO stands for Preferred Provider Organization.

5/ POS stands for Point-of-Service plan.

6/ HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 6. Persons with Employer Sponsored Insurance (ESI)
by Sector Providing Coverage, Funding, and Union Membership: CY 2017**
(numbers in millions)

ESI Type	Total ESI	Private Sector			Public Sector		
		Total	Self-Insured	Fully Insured	Total	Self-Insured	Fully Insured
Total ESI	176.6	133.6	83.4	50.2	43.0	16.9	26.1
Union	32.2	13.8	9.6	4.2	18.4	7.5	10.8
Not Union	144.4	119.7	73.8	46.0	24.6	9.4	15.3
Total Current Employer	160.1	127.0	78.4	48.6	33.1	13.2	19.8
Union	24.7	11.5	7.8	3.7	13.2	5.4	7.8
Not Union	135.4	115.5	70.6	44.9	19.8	7.8	12.0
Total Former Employer: COBRA	3.1	2.6	1.9	0.7	0.5	0.2	0.3
Union	0.6	0.4	0.3	0.1	0.2	0.1	0.2
Not Union	2.4	2.2	1.6	0.6	0.2	0.1	0.1
Total Former Employer: Retiree	13.4	3.9	3.1	0.9	9.5	3.5	6.0
Union	6.8	2.0	1.6	0.4	4.9	2.0	2.8
Not Union	6.6	2.0	1.5	0.5	4.6	1.5	3.1

NOTE: ESI is defined as any insurance provided by a current or former employer to workers and their dependents. For this table only, the ESI population excludes those whose only source of ESI is self-employment.

NOTE: Totals may not equal the sum of the components due to rounding.

SOURCE: U.S. Department of Labor, EBSA Calculations based on the Current Population Survey, Annual Social and Economic Supplements with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 7. Average Actuarial Values for Active Employer Sponsored Insurance (ESI) Policyholders
by Sector of Employer Providing Coverage, Funding, and Plan Type: CY 2017**

Sector 1/	Plan Type	Self-Insured 2/		Fully Insured		Total	
		Policy-holders (in millions)	Average Actuarial Value	Policy-holders (in millions)	Average Actuarial Value	Policy-holders (in millions)	Average Actuarial Value
Private Sector	Total	38.5	0.824	26.8	0.855	65.2	0.837
	HMO 3/	2.3	0.872	6.5	0.903	8.8	0.895
	PPO 4/	22.0	0.833	9.7	0.854	31.7	0.839
	POS 5/	2.4	0.876	3.9	0.884	6.3	0.881
	HDED 6/	11.7	0.787	6.7	0.792	18.5	0.789
Public Sector	Total	6.3	0.859	9.4	0.879	15.7	0.871
	HMO 3/	0.3	0.893	3.1	0.917	3.5	0.915
	PPO 4/	3.9	0.870	4.1	0.881	8.0	0.876
	POS 5/	0.2	0.911	0.4	0.905	0.6	0.907
	HDED 6/	1.9	0.823	1.8	0.804	3.7	0.814

NOTE: Active ESI Policyholders are those with coverage in own name from a current employer.

NOTE: Actuarial values represent "average plan richness": the share of covered expenses paid by the plan for claims incurred by an average population.

NOTE: Totals may not equal the sum of the components due to rounding.

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, October 2017, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2018-appendix-a.pdf>.

3/ HMO stands for Health Maintenance Organization.

4/ PPO stands for Preferred Provider Organization.

5/ POS stands for Point-of-Service plan.

6/ HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys and the BLS National Compensation Survey.

**Table 8A. Mean Out-of-Pocket Spending
by Age and Primary Insurance: CY 2017**

Age		Total Population	Insured	Employer Sponsored Insurance 1/		Medicare	Other Private Insurance 2/		Other Public Coverage 3/	Uninsured 4/
				Policyholders	Dependents		Policyholders	Dependents		
All Ages	Population (millions)	323.2	294.6	85.4	87.0	51.8	13.0	9.9	47.5	28.5
	% of Population	100%	91%	26%	27%	16%	4%	3%	15%	9%
	Out-of-Pocket Spending	\$ 832	\$ 871	\$ 1,112	\$ 758	\$ 1,250	\$ 1,224	\$ 596	\$ 192	\$ 430
< 18	Population (millions)	74.0	70.0	0.1	41.7	0.3	0.1	4.6	23.2	3.9
	% of Population	100%	95%	0%	56%	0%	0%	6%	31%	5%
	Out-of-Pocket Spending	\$ 311	\$ 315	\$ 468	\$ 429	\$ 194	\$ 382	\$ 395	\$ 96	\$ 227
18-25	Population (millions)	34.1	29.6	5.5	15.1	0.2	1.3	1.9	5.6	4.5
	% of Population	100%	87%	16%	44%	1%	4%	5%	16%	13%
	Out-of-Pocket Spending	\$ 385	\$ 403	\$ 447	\$ 486	\$ 249	\$ 437	\$ 388	\$ 138	\$ 263
26-54	Population (millions)	122.3	106.4	58.0	21.5	3.1	7.4	2.4	14.0	15.9
	% of Population	100%	87%	47%	18%	3%	6%	2%	11%	13%
	Out-of-Pocket Spending	\$ 881	\$ 939	\$ 1,000	\$ 1,201	\$ 782	\$ 1,040	\$ 812	\$ 291	\$ 490
55-64	Population (millions)	41.7	38.2	18.4	6.8	3.9	3.9	0.8	4.4	3.5
	% of Population	100%	92%	44%	16%	9%	9%	2%	11%	8%
	Out-of-Pocket Spending	\$ 1,358	\$ 1,431	\$ 1,579	\$ 1,576	\$ 1,222	\$ 1,818	\$ 1,413	\$ 445	\$ 562
65+	Population (millions)	51.1	50.4	3.5	2.0	44.3	0.4	0.1	0.2	0.7
	% of Population	100%	99%	7%	4%	87%	1%	0%	0%	1%
	Out-of-Pocket Spending	\$ 1,340	\$ 1,350	\$ 1,568	\$ 2,176	\$ 1,297	\$ 1,709	\$ 1,572	\$ 225	\$ 620

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured.

NOTE: Out-of-pocket spending does not include spending on premiums, but does include spending on OTC health related items (POTC-VAL) and medical care equipment (PMED-VAL).

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer are counted only in the Medicare column.

2/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

4/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 8B. Mean Out-of-Pocket Spending by Persons with Spending
by Age and Primary Insurance: CY 2017**

Age		Population with Spending	Insured	Employer Sponsored Insurance 1/		Medicare	Other Private Insurance 2/		Other Public Coverage 3/	Uninsured 4/
				Policyholders	Dependents		Policyholders	Dependents		
All Ages	Population (millions)	266.3	247.1	77.9	73.1	46.6	11.4	7.7	30.3	19.2
	% of Population	100%	93%	29%	27%	17%	4%	3%	11%	7%
	Out-of-Pocket Spending	\$ 1,010	\$ 1,039	\$ 1,219	\$ 903	\$ 1,390	\$ 1,395	\$ 761	\$ 300	\$ 640
< 18	Population (millions)	52.4	50.2	0.1	33.4	0.1	0.1	3.4	13.1	2.2
	% of Population	100%	96%	0%	64%	0%	0%	6%	25%	4%
	Out-of-Pocket Spending	\$ 438	\$ 440	\$ 681	\$ 535	\$ 412	\$ 573	\$ 540	\$ 170	\$ 402
18-25	Population (millions)	25.1	22.5	4.4	12.2	0.1	1.0	1.4	3.4	2.7
	% of Population	100%	89%	17%	49%	1%	4%	6%	13%	11%
	Out-of-Pocket Spending	\$ 521	\$ 530	\$ 560	\$ 601	\$ 447	\$ 594	\$ 510	\$ 227	\$ 445
26-54	Population (millions)	104.6	93.4	52.9	19.3	2.5	6.5	2.1	10.2	11.2
	% of Population	100%	89%	51%	18%	2%	6%	2%	10%	11%
	Out-of-Pocket Spending	\$ 1,030	\$ 1,070	\$ 1,097	\$ 1,338	\$ 966	\$ 1,185	\$ 954	\$ 399	\$ 699
55-64	Population (millions)	37.5	34.9	17.3	6.3	3.4	3.6	0.8	3.5	2.7
	% of Population	100%	93%	46%	17%	9%	10%	2%	9%	7%
	Out-of-Pocket Spending	\$ 1,508	\$ 1,567	\$ 1,674	\$ 1,683	\$ 1,408	\$ 1,964	\$ 1,568	\$ 568	\$ 740
65+	Population (millions)	46.6	46.1	3.3	1.8	40.4	0.3	0.1	0.1	0.5
	% of Population	100%	99%	7%	4%	87%	1%	0%	0%	1%
	Out-of-Pocket Spending	\$ 1,469	\$ 1,475	\$ 1,660	\$ 2,328	\$ 1,421	\$ 1,846	\$ 1,754	\$ 322	\$ 900

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured.

NOTE: Out-of-pocket spending does not include spending on premiums, but does include spending on OTC health related items (POTC-VAL) and medical care equipment (PMED-VAL).

NOTE: Totals may not equal the sum of the components due to rounding.

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer are counted only in the Medicare column.

2/ OPHI includes any other nongovernment health insurance, including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

4/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 8C. Mean Out-of-Pocket (OOP) Spending for Persons with Employer Sponsored Insurance
by Age and Plan Type: CY 2017**

Age	Plan Type	Total Employer Sponsored Insurance 1/		Employer Sponsored Insurance with OOP Spending 1/	
		Policyholders	Dependents	Policyholders	Dependents
All Ages	Total	\$ 1,150	\$ 780	\$ 1,257	\$ 925
	HMO 2/	\$ 1,141	\$ 763	\$ 1,252	\$ 903
	PPO 3/	\$ 1,168	\$ 815	\$ 1,273	\$ 966
	POS 4/	\$ 1,002	\$ 700	\$ 1,095	\$ 836
	HDED 5/	\$ 1,168	\$ 748	\$ 1,278	\$ 889
< 18	Total	\$ 468	\$ 430	\$ 681	\$ 536
	HMO 2/	\$ 32	\$ 404	\$ 159	\$ 505
	PPO 3/	\$ 787	\$ 437	\$ 973	\$ 546
	POS 4/	\$ 6	\$ 436	\$ 25	\$ 544
	HDED 5/	\$ 313	\$ 428	\$ 394	\$ 532
18-25	Total	\$ 447	\$ 487	\$ 561	\$ 602
	HMO 2/	\$ 487	\$ 485	\$ 606	\$ 594
	PPO 3/	\$ 474	\$ 481	\$ 598	\$ 588
	POS 4/	\$ 338	\$ 436	\$ 412	\$ 565
	HDED 5/	\$ 414	\$ 511	\$ 520	\$ 642
26-54	Total	\$ 1,001	\$ 1,204	\$ 1,098	\$ 1,341
	HMO 2/	\$ 914	\$ 1,188	\$ 1,004	\$ 1,328
	PPO 3/	\$ 1,010	\$ 1,336	\$ 1,107	\$ 1,491
	POS 4/	\$ 941	\$ 855	\$ 1,029	\$ 961
	HDED 5/	\$ 1,053	\$ 1,078	\$ 1,156	\$ 1,192
55-64	Total	\$ 1,600	\$ 1,580	\$ 1,697	\$ 1,687
	HMO 2/	\$ 1,806	\$ 1,391	\$ 1,945	\$ 1,482
	PPO 3/	\$ 1,587	\$ 1,592	\$ 1,675	\$ 1,693
	POS 4/	\$ 1,229	\$ 1,384	\$ 1,313	\$ 1,470
	HDED 5/	\$ 1,602	\$ 1,718	\$ 1,699	\$ 1,855
65+	Total	\$ 1,598	\$ 1,896	\$ 1,670	\$ 2,002
	HMO 2/	\$ 1,510	\$ 1,760	\$ 1,601	\$ 1,893
	PPO 3/	\$ 1,685	\$ 1,965	\$ 1,748	\$ 2,060
	POS 4/	\$ 1,500	\$ 2,595	\$ 1,581	\$ 2,635
	HDED 5/	\$ 1,519	\$ 1,666	\$ 1,592	\$ 1,782

NOTE: Means do not match those shown in the employer sponsored insurance (ESI) columns of Tables 8A and 8B due to the inclusion of Medicare and ESI.

NOTE: Out-of-pocket spending does not include spending on premiums, but does include spending on OTC health related items (POTC-VAL) and medical care equipment (PMED-VAL).

1/ ESI is defined as any insurance provided by a current or former employer to workers and their dependents. In this table, ESI includes persons with Medicare.

2/ HMO stands for Health Maintenance Organization.

3/ PPO stands for Preferred Provider Organization.

4/ POS stands for Point-of-Service plan.

5/ HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 9A. Point-in-Time, 2018, versus Ever Insured in Prior Year
by Age: CY 2017 vs. Date of Questionnaire**
(numbers in millions)

2017 Insurance Status	Age	2018 Point-in-Time (PIT) Insurance Status		
		PIT Insured	PIT Uninsured	Total
Total	All Ages	292.3	30.9	323.2
	<18	69.3	4.7	74.0
	18- 25	29.3	4.8	34.1
	26- 54	105.4	17.0	122.3
	55- 64	37.9	3.8	41.7
	65+	50.4	0.7	51.1
Ever Insured in Year	All Ages	290.0	4.6	294.6
	<18	68.7	1.3	70.0
	18- 25	28.9	0.7	29.6
	26- 54	104.3	2.1	106.4
	55- 64	37.7	0.5	38.2
	65+	50.3	0.1	50.4
Never Insured in Year	All Ages	2.3	26.3	28.5
	<18	0.6	3.4	3.9
	18- 25	0.4	4.1	4.5
	26- 54	1.1	14.9	15.9
	55- 64	0.2	3.4	3.5
	65+	0.1	0.6	0.7

NOTE: Totals may not equal the sum of the components due to rounding.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 9B. Point-in-Time, 2018, versus Ever Insured in Prior Year
by State: CY 2017 vs. Date of Questionnaire**
(numbers in millions)

State	2018 Point-in-Time (PIT) Insurance Status			
	PIT Insured		PIT Uninsured	
	Ever Insured in 2017	Never Insured in 2017	Ever Insured in 2017	Never Insured in 2017
U.S.	290.0	2.3	4.6	26.3
Alabama	4.2	*	0.1	0.5
Alaska	0.6	*	*	0.1
Arizona	6.2	0.1	0.2	0.6
Arkansas	2.6	*	0.1	0.3
California	35.9	0.2	0.3	3.0
Colorado	5.0	*	0.1	0.4
Connecticut	3.3	*	0.1	0.2
Delaware	0.9	*	*	0.1
District of Columbia	0.6	*	*	*
Florida	18.1	0.1	0.2	2.5
Georgia	8.7	0.1	0.2	1.2
Hawaii	1.3	*	*	0.1
Idaho	1.5	*	*	0.2
Illinois	11.6	0.1	0.1	0.8
Indiana	6.0	0.1	0.1	0.3
Iowa	2.9	*	*	0.1
Kansas	2.6	*	*	0.3
Kentucky	4.2	*	*	0.2
Louisiana	4.0	*	0.1	0.4
Maine	1.2	*	*	0.1
Maryland	5.6	*	0.1	0.3
Massachusetts	6.6	*	0.1	0.2
Michigan	9.2	0.1	0.1	0.5
Minnesota	5.3	0.1	0.1	0.2
Mississippi	2.6	*	0.1	0.3
Missouri	5.4	0.1	0.1	0.4
Montana	1.0	*	*	0.1
Nebraska	1.6	*	*	0.2
Nevada	2.6	*	0.1	0.3
New Hampshire	1.2	*	*	0.1
New Jersey	8.3	*	0.1	0.6
New Mexico	1.8	*	*	0.2
New York	18.4	0.1	0.2	0.9

Continued....

**Table 9B. Point-in-Time, 2018, versus Ever Insured in Prior Year
by State: CY 2017 vs. Date of Questionnaire**
(numbers in millions)

State	2018 Point-in-Time (PIT) Insurance Status			
	PIT Insured		PIT Uninsured	
	Ever Insured in 2017	Never Insured in 2017	Ever Insured in 2017	Never Insured in 2017
North Carolina	9.1	*	0.1	1.0
North Dakota	0.7	*	*	0.1
Ohio	10.7	*	0.2	0.6
Oklahoma	3.3	*	0.1	0.4
Oregon	3.9	*	0.1	0.2
Pennsylvania	11.6	0.1	0.2	0.8
Rhode Island	1.0	*	*	0.1
South Carolina	4.3	*	0.1	0.5
South Dakota	0.8	*	*	0.1
Tennessee	6.0	0.1	0.1	0.6
Texas	22.8	0.3	0.6	4.4
Utah	2.7	*	0.1	0.3
Vermont	0.6	*	*	*
Virginia	7.3	0.1	0.2	0.7
Washington	6.9	*	0.1	0.4
West Virginia	1.6	*	*	0.1
Wisconsin	5.3	*	0.1	0.4
Wyoming	0.5	*	*	0.1

NOTE: Nonzero cells with under 50,000 persons are marked with a "**".

NOTE: Totals may not equal the sum of the components due to rounding.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 10: Persons with Other Private Health Insurance (OPHI)
by Age and Type of Coverage: CY 2017**
(numbers in millions)

		OPHI in CY 2017		
		Total	Exchange	Not Exchange
Age	Total	51.8	9.9	41.9
	<18	8.1	1.0	7.2
	18 - 34	10.3	2.9	7.4
	35 - 54	11.8	3.4	8.4
	55 - 64	7.4	2.6	4.8
	65+	14.2	0.1	14.1

NOTE: Totals may not equal the sum of the components due to rounding.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

DATA SOURCES, UPDATES, AND REVISIONS

This section briefly outlines the process and data sources used in the creation of the March 2018 Auxiliary Data. Greater detail on the current imputations and edits performed in order to provide estimates of employer sponsored insurance for calendar year (CY) 2017 can be found in “Technical Appendix: March 2018 CPS Auxiliary Data.”¹³

The starting data set is the March 2018 CPS. It was enhanced as follows:

- As noted previously, while the March CPS reports whether coverage is from an employer, for insured workers, it does not distinguish between current and former employers as the source of that coverage; nor does it report whether, for all workers, the employer offers health insurance. To fill these gaps, EBSA first imputes current versus former employer coverage for insured workers, then imputes offers of coverage for all workers. For the latter imputation, we used the point-in-time offer status variable, as published in a Census research file, when possible.¹⁴ Otherwise, we used data from the 2014-2016 Medical

Expenditure Panel Surveys, Household Component (MEPS-HC).

- For persons with coverage from a former employer, we imputed both sector and size of the employer providing the coverage using the most recent three years of data (2015–2017) from the Medical Expenditure Panel Survey Insurance Component (MEPS-IC), as provided by the Agency for Healthcare Research and Quality (AHRQ).
- We used tabulations from the MEPS-IC along with partitions and trend data from the EHBS to both impute funding status and type of coverage for those with ESI, as well as to classify coverage from a former employer as either retiree or COBRA.¹⁵ We used FEHB program data for estimates at the Federal level.
- Data from Wave 6 of the 2008 panel of the Survey of Income and Program Participation (SIPP), updated with trends in union coverage from both the National Health Interview Survey (NHIS) and later SIPP survey questions, provide the basis of the union imputation for coverage from a former employer, COBRA or retiree.¹⁶ We used the March CPS to identify those with coverage from a current employer, as one-quarter of workers were asked about union membership and coverage.

¹³ Cathi Callahan and Rodelle Williams, Actuarial Research Corporation, 2019.

¹⁴ If point-in-time employment appeared to be consistent with employment during CY 2017.

¹⁵ As noted previously, funding status is an imputation and this partition differs in concept from the estimates in the Self-Insured Group Health Plan Bulletin by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500.

¹⁶ 2010 data.

- An actuarial analysis performed by Actuarial Research Corporation (ARC),¹⁷ using data from the BLS NCS, formed the basis of our actuarial value (AV) data. The AV distributions and means from the analysis were augmented with plan-level data from the 2017 EHBS and imputed onto active policyholder records.
- The out-of-pocket expenditure variable, as tabulated and presented on the Auxiliary Data file, is the sum of the raw CPS variables POTC-VAL and PMED-VAL. No editing was performed.
- For a subset of persons with OPHI, imputations for persons with individual coverage through ACA exchanges have been imputed onto the Auxiliary Data file based on reports released from CMS.¹⁸ No distinction has been made by type of exchange (state vs. Federal). In addition, as of 2017, flags have been added to the data to denote whether a person resides in a Medicaid expansion state.
- A newly constructed variable indicating point-in-time ESI policyholder status has been added to the auxiliary data file. While it was not explicitly tabulated, it was used in the assignment and imputation of employer offer status.

¹⁷ “Final Report: Analysis of Actuarial Values and Plan Funding Using Plans from the National Compensation Survey”, compiled for the Office of Policy and Research (OPR), Employee Benefits Security Administration (EBSA), Department of Labor (DOL) by Actuarial Research Corporation (ARC), May 12, 2017, [https://www.dol.gov/sites/default/files/ebsa/researchers/analysis/health-and-](https://www.dol.gov/sites/default/files/ebsa/researchers/analysis/health-and-welfare/analysis-of-actuarial-values-and-plan-funding-using-plans-from-the-national-compensation-survey.pdf)

The March 2014 CPS was extensively revised, with redesigned questions for income and insurance (including exchange-based coverage), as well as new questions on employer offers and employee take-ups. For March 2015, a new variable that clarified the source of health insurance from outside the household was added. In addition, the 1960 Census State Code, which includes region as the first digit, was missing from the March 2015 data. ARC recoded the FIPS code to match the prior format and has included the variable on the data file. There were no changes for the March 2016, March 2017 or March 2018 CPS data.

As with last year, the CPS data released by Census in September was recoded to be consistent in format with that released in prior years and does not include any new questions asked. Separate research files, released by Census,¹⁹ contain a point-in-time health insurance yes/no variable (NOW_ANYCOV) and the variable on insurance coverage from outside the household (OUTTYP). We have included these variables in our Auxiliary Data. Additionally, Census releases a research file including point-in-time information concerning health insurance offering by employers and employee eligibility (along with reasons for ineligibility or non-enrollment). This data is used to inform the employer offer imputation.

Estimates of coverage for CY 2017 are similar to those from CY 2016, and both individual and Medicaid coverage prevalence appear to have stabilized, with the slight changes in the rates (not

[welfare/analysis-of-actuarial-values-and-plan-funding-using-plans-from-the-national-compensation-survey.pdf](https://www.dol.gov/sites/default/files/ebsa/researchers/analysis/health-and-welfare/analysis-of-actuarial-values-and-plan-funding-using-plans-from-the-national-compensation-survey.pdf).

¹⁸ “First Half of 2017 Average Effectuated Enrollment Data,” <https://www.cms.gov/CCIIO/Programs-and-Initiatives/Health-Insurance-Marketplaces/Downloads/2017-12-13-2017-Effectuated-Enrollment-Data.pdf>.

¹⁹ Census Bureau. <https://www.census.gov/data/datasets/time-series/demo/health-insurance/cps-asec-research-files.html>.

statistically significant at the 0.05 level). In CY 2015, Medicaid and individual private insurance were rising, but CY 2016 remained level. The number of uninsured individuals in CY 2017 has also stabilized.