

# Health Statistics from the U.S. Census Bureau

Find health stats in one place on [census.gov](http://census.gov)

The Census Bureau releases statistics on disability, fertility, health care industries, health insurance, and more. We even collect data on international HIV/AIDS and health care access for other agencies.

We release health statistics in forms ranging from press releases, briefs and reports, to data sets and mapping tools. Some of our surveys, like the American Community Survey (ACS), ask questions about several health topics, while other programs, like Small Area Health Insurance Estimates (SAHIE), focus exclusively on one topic: health insurance coverage. (See back page for details)

## 2014 Health Statistics:

### Quarterly Releases:

- **Mar 12** Q4 2013, **Jun 11** Q1 2014, **Sep 11** Q2 2014, **Dec 10** Q3 2014: *Quarterly Services Report*: health care industries by NAICS 62 codes
- Released by state on a rolling basis throughout Q1, Q2, Q3, Q4: LEHD: *Quarterly Workforce Indicators (QWI)*: health care industries industry by NAICS 62 codes

### Annual & Periodic Releases:

- **Jan 23**: 2012 Annual Survey of State Government Finances: preliminary: spending on public health and hospitals
- **Mar 13**: Small Area Health Insurance Estimates (SAHIE) 2012 Highlights report
- **Mar 26**: 2012 Economic Census Advance Report and Briefing (census conducted every five years): health care industries
- **Apr 9**: 2012 Annual Capital Expenditures Survey: spending on health care structures and equipment
- **April 16**: Facts for Features: Mother's Day (May 11): fertility
- **April 16**: Statement by Census Bureau Director John H. Thompson on Improved Health Insurance Questions in the Current Population Survey (CPS)
- **April 24**: 2012 Nonemployer Statistics: health care industries, health workers by NAICS codes
- **May 29**: County Business Patterns: 2012: health care industries
- **Jun 12**: ZIP Code Business Patterns: 2012: health care industries
- **Jun**: Statistics of U.S. Businesses: health care industries
- **Jun**: Fertility of Women in the United States: 2012: fertility
- **Jul**: HIV/AIDS Surveillance Data Base: annual release (International)
- **Jul**: 2012 Annual Survey of State Government Finances: revised: spending on public health and hospitals
- **Jul**: Working with Disability in the United States: 2008-2012: disability
- **Sep**: Health Insurance in the United States: 2013 (from CPS and ACS)\*
- **Sep**: ACS 1-Year Estimates: 2013: disability, fertility, and health insurance coverage\*\*
- **Oct**: ACS 3-Year Estimates: 2011-2013: disability, fertility, and health insurance coverage\*\*
- **Dec**: ACS 5-Year Estimates: 2009-2013: disability, fertility, and health insurance coverage\*\*

\*NOTE: Based on more than a decade of comprehensive research to improve the measure of the Nation's uninsured population and give the country better data, the Census Bureau redesigned the health insurance coverage questions for the Current Population Survey. The CPS will act to provide an accurate baseline for 2013 to facilitate the assessment of the impact of the Affordable Care Act implemented in 2014. Additionally, the ACS has collected health insurance coverage information since 2008 and provides additional measures at the nation, state and local levels on an annual basis.

\*\*The Census Bureau disseminates ACS statistics through tables on American FactFinder.

Health  
Datapalooza  
June 2-3, 2014

### Health topics on census.gov

- Disability
- Expenses & Investments
- Fertility
- Health Care Industries
- Health Insurance
- HIV/AIDS
- Small Area Health Insurance Estimates (SAHIE)

### Sources for Health Statistics

See back page for details.

- American Community Survey (ACS)
- Annual Capital Expenditures Survey
- Annual Survey of Public Employment & Payroll
- County Business Patterns
- Current Population Survey (CPS)
- Economic Census (2012)
- Longitudinal Employer-Household Data (LEHD)
- Nonemployer Statistics
- Quarterly Services Survey
- Service Annual Survey
- Small Area Health Insurance Estimates (SAHIE)
- Statistics of U.S. Businesses
- Survey of Income & Program Participation (SIPP)



# U.S. Census Bureau Sources for Health Statistics

## Demographic Statistics:

**American Community Survey (ACS):** Provides 1-year, 3-year, and 5-year estimates on health insurance, disabilities, fertility, industries and occupations for areas with populations of 65,000+ (1-year), 20,000+ (3-year), and all areas (5-year).  
[www.census.gov/acs/www/](http://www.census.gov/acs/www/)

**Current Population Survey (CPS):** Is the primary source for labor force statistics in the U.S. Supplemental surveys measure social well-being in the areas of disability, fertility, and health insurance coverage.  
[www.census.gov/cps/](http://www.census.gov/cps/)

**Small Area Health Insurance Estimates (SAHIE):** Produces model-based estimates of health insurance coverage for states and counties by age, sex, and income categories from many data sources. SAHIE includes estimates by race and Hispanic origin at the state level.  
[www.census.gov/did/www/sahie/](http://www.census.gov/did/www/sahie/)

**Survey of Income & Program Participation (SIPP):** Measures the effectiveness of existing federal, state, and local programs. SIPP estimates future costs and coverage.  
[www.census.gov/sipp/](http://www.census.gov/sipp/)

## Economic Statistics:

**Annual Capital Expenditures Survey (ACES):** Provides national data on expenditures for new and used structures and equipment by nonfarm businesses.  
[www.census.gov/econ/aces/](http://www.census.gov/econ/aces/)

**Annual Survey of Public Employment & Payroll:** Provides data on employment, including the number of federal, state, and local civilian government employees, and payroll by government function, including health and hospitals.  
[www.census.gov/govs/apes/](http://www.census.gov/govs/apes/)

**County Business Patterns:** Provides subnational economic data by industry, including number of establishments, employment and payroll.  
[www.census.gov/econ/cbp/](http://www.census.gov/econ/cbp/)

**Economic Census (2012):** Profiles all U.S. national and local economies, businesses and activities every five years. Statistics for health care industries are provided at the national, state, metro- and micropolitan area, county and place levels.  
[www.census.gov/econ/census/](http://www.census.gov/econ/census/)

**Longitudinal Employer-Household Data (LEHD):** This program combines federal, state and Census Bureau data on employers and employees to create statistics on employment, earnings, and job flows at detailed levels of geography and by sex, age and industry.  
<http://lehd.did.census.gov/>

**Nonemployer Statistics:** Provides national, state, county and zip code-level economic data for businesses that have no paid employees and are subject to federal income tax. The data are number of businesses and total receipts by industry.  
[www.census.gov/econ/nonemployer/](http://www.census.gov/econ/nonemployer/)

**Quarterly Services Survey:** Produces the most comprehensive data available on service activity in the U.S. The only source of timely estimates of revenue and expenses for selected service industries, including the health care industry.  
[www.census.gov/services/index.html](http://www.census.gov/services/index.html)

**Service Annual Survey:** Provides estimates of revenue and other measures for most traditional service industries, including health care, at the national level.  
[www.census.gov/services/index.html](http://www.census.gov/services/index.html)

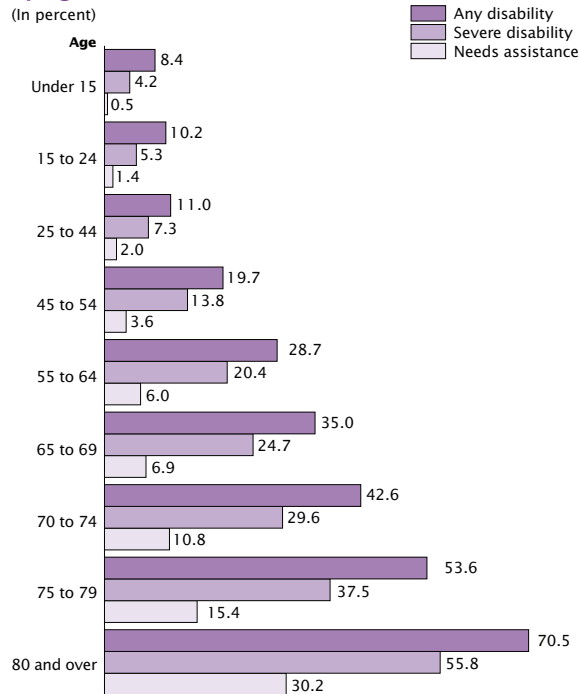
**Statistics of U.S. Businesses:** Provides annual data by geography, industry and size, including the number of firms and establishments, employment and payroll.  
[www.census.gov/econ/susb/](http://www.census.gov/econ/susb/)

# Statistics About People With Disabilities

*Disability is an umbrella term for impairments, activity limitations, and participation restrictions*

The Census Bureau collects disability data primarily through the American Community Survey (ACS) and the Survey of Income and Program Participation (SIPP). The definitions of disability are not always alike so take caution when making comparisons across surveys. Generally, the SIPP estimates of disability prevalence are broader and encompass a greater number of activities on which disability status are assessed. The ACS has a more narrow definition and provides estimates for states, counties, and metropolitan areas.

**Disability Prevalence and the Need for Assistance by Age: 2010**  
(In percent)



## Americans with Disabilities Reports

The Americans with Disabilities Report is the primary product for disseminating disability information from the SIPP. Using data from the supplemental questionnaires on Adult and Child Functional Limitations, the report provides estimates of the size and characteristics of the community dwelling people with disabilities in the United States. The most recent report was Americans with Disabilities: 2010 ([www.census.gov/prod/2012pubs/p70-131.pdf](http://www.census.gov/prod/2012pubs/p70-131.pdf)), which showed:

- Approximately 56.7 million people (18.7 percent) of the 303.9 million in the civilian noninstitutionalized population had a disability in 2010. About 38.3 million people (12.6 percent) had a severe disability.
- The percentage of people with a disability was statistically unchanged from 2005. However, when adjusted for the aging of the population, the disability rate dropped from 18.6 percent to 18.1 percent.
- Four in 10 individuals aged 21 to 64 with a disability were employed (41.1 percent) compared with 8 in 10 adults without disabilities (79.1 percent).
- At 10.8 percent, adults aged 15 to 64 with severe disabilities were more likely to experience persistent poverty (continuous poverty over a 24-month period) than adults with nonsevere disabilities (4.9 percent) and those with no disability (3.8 percent).

You can find information about disability data products at [www.census.gov/people/disability](http://www.census.gov/people/disability)

## Disability Rates for Counties and Places

### American Community Survey Data

Information about disability status in states, counties, places, and other sub-national geographies comes from the ACS. We disseminate these statistics through a variety of products, including tables on American FactFinder ([http://factfinder2.census.gov/bk/mk/navigation/1.0/en/d\\_people\\_disability:DISABILITY/](http://factfinder2.census.gov/bk/mk/navigation/1.0/en/d_people_disability:DISABILITY/)), data briefs like “Disability Characteristics of Income-Based Government Assistance Recipients in the United States: 2011” ([www.census.gov/prod/2013pubs/acsbr11-12.pdf](http://www.census.gov/prod/2013pubs/acsbr11-12.pdf)), and reports like the forthcoming “Working with a Disability in the United States: 2008-2012” (release date/URL TBA).

#### ACS disability data highlights:

- West Virginia had the highest disability rate in 2012 at 19 percent. Utah had the lowest at 9 percent. ([http://factfinder2.census.gov/bk/mk/table/1.0/en/ACS/12\\_1YR/R1810.US01PRF](http://factfinder2.census.gov/bk/mk/table/1.0/en/ACS/12_1YR/R1810.US01PRF))
- South Dakota was among the states with the highest employment to population ratio for people with disabilities at 52 percent. West Virginia was among the lowest at 24 percent ([http://factfinder2.census.gov/bk/mk/table/1.0/en/ACS/12\\_1YR/R1811.US01PRF](http://factfinder2.census.gov/bk/mk/table/1.0/en/ACS/12_1YR/R1811.US01PRF)).

The Disability Employment Tabulation 2008-2010 (3-year ACS data) is available through American FactFinder ([factfinder2.census.gov](http://factfinder2.census.gov)) beginning March 14, 2013. This 49-table tabulation, which shows the disability status and diversity of the labor force and population 16 and over, is based on the American Community Survey (ACS) three-year data 2008-2010 ([www.census.gov/acs](http://www.census.gov/acs)).

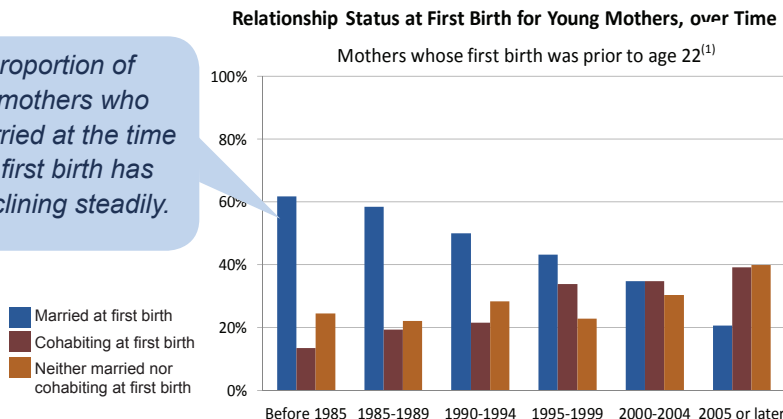


# Fertility

## Birth Rates and Fertility History

The Census Bureau uses three separate surveys to collect information about birth rates, fertility history, and multipartner fertility.

*The proportion of young mothers who were married at the time of their first birth has been declining steadily.*



The **American Community Survey (ACS)**, administered continually throughout the year, collects information on birth rates by asking a single question of women aged 15 to 50:

*“Have you given birth to any children in the past 12 months?”*

The **Current Population Survey (CPS)** includes a Fertility Supplement in June of every other year. This supplement includes four questions, asked of women aged 15 to 50:

*“Altogether how many children have you ever given birth to?”*

*“In what year was your first child born?”\**

*“At the time when your first child was born, were you married?”*

*“At the time when your first child was born, did you have a boyfriend or partner in the household?”*

The redesigned Survey of Income and Program Participation (SIPP), for which the data were first collected in the spring of 2014, asks for a complete fertility history for all respondents aged 15 and up. The survey, which follows the same individuals for four years, asks both men and women:

*“How many children have you ever (given birth to / biologically fathered)?”*

*“What is each child’s date of birth?”*

*“Do all of your biological children have the same biological (mother/ father)?”*

*“Are you a grandparent?”*

\* Prior to the 2012 Fertility Supplement, the CPS asked women about their most recent birth. The questions were changed in 2012 to reduce redundancy with the ACS.

“Multipartner fertility measures coming in 2015.”

## Fertility Data Sources:

- The total number of children ever born (CPS, SIPP)
- Total fertility over time (The CPS has data going back to 1976)
- Characteristics of women with recent births (ACS, SIPP)
- Age at first birth (CPS, SIPP)
- Age at last birth (SIPP)
- Changes in relationship status at first birth over time (CPS)
- The fertility patterns of both women (ACS, CPS, SIPP) and men (SIPP)
- The number of grandparents (SIPP)
- An over-time picture of individuals’ fertility in the context of their health insurance, jobs, education, and living arrangements (SIPP)

These data are available nationally (ACS, CPS, SIPP), as well as for states, counties, and census tracts (ACS):

ACS data are available through American FactFinder:  
<http://factfinder2.census.gov>

CPS data are available through DataFerrett:  
<http://dataferrett.census.gov>

2014 SIPP data will be available through DataFerrett in 2015.



# Statistics for Health Care Industries

## Get Smart About Your Industry

The U.S. Census Bureau measures America's people, places, and economy. We provide a wealth of timely, relevant, and quality statistics that are essential resources for analyzing Health Care Industries and more.

### Economic Census

Used as a valuable complement to annual current survey data. Updated every 5 years; includes the number of establishments; employment and payroll; and the only source of local area business revenue.

[business.census.gov](http://business.census.gov)

### Annual Capital Expenditures Survey

Provides statistics on business spending for new and used structures and equipment at the national level.

[census.gov/econ/aces](http://census.gov/econ/aces)

### Service Annual Survey

Contains data on revenue and other measures for both taxable and tax-exempt service industry firms at the national level.

[census.gov/services](http://census.gov/services)

### Quarterly Services Survey

Provides timely estimates of revenue and expenses on a quarterly basis for selected service industries at the national level.

[census.gov/services](http://census.gov/services)

### County Business Patterns

Find annual information about establishments with paid employees down to the county level.

[census.gov/econ/cbp](http://census.gov/econ/cbp)

### Nonemployer Statistics

Find annual information about businesses with no paid employees down to the county level.

[census.gov/econ/nonemployer](http://census.gov/econ/nonemployer)

### Statistics of U.S. Businesses

Find annual data for businesses by size, number of firms, employment and payroll down to the county level.

[census.gov/econ/susb](http://census.gov/econ/susb)

## Data Tools

### Industry Statistics Portal

We have created a simple to use menu to provide you with all the available data sources by industry. There are also links to economic data in American FactFinder, Industry Snapshots, definitions, and more.

[census.gov/econ/isp](http://census.gov/econ/isp)



### 2012 Economic Census

The 2012 Economic Census Advance Report, which covers almost all 2 and 3-digit NAICS codes for the US, was just released in March. More detailed industry, geography, and subject series are being released on a flow basis. For the full release schedule go to: [www.census.gov/econ/census/schedule](http://www.census.gov/econ/census/schedule)

The Health Care sector was not only the largest employer in the U.S. in 2012 (with nearly 18.6 million employees – an increase of almost 11% over 2007) but this sector also reported the highest annual payroll (\$804.4 billion).

Source: 2012 Economic Census – Advance Report

### Need Help?

#### Your Small Business Advocate

The Small Business Ombudsman office can help you understand and use Census Bureau data.

[census.gov/osbo](http://census.gov/osbo)

#### Regional Offices

Call or visit the Regional Office that serves your state for local data assistance, workshops, and presentations.

[census.gov/regions](http://census.gov/regions)

#### Business Help Site

Get help with your business forms and access electronic reporting options.

[bhs.econ.census.gov](http://bhs.econ.census.gov)



# Industry Statistics Portal

## 2012 NAICS: 621 - Ambulatory health care services

[GUIDE TO ALL DATA SOURCES](#)

[ECONOMIC DATA IN AFF](#)

[DEFINITION & COMPARABILITY](#)

**2012 NAICS SEARCH**

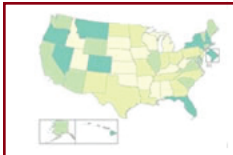
Enter a NAICS code or Title

[RELATED INDUSTRIES](#)

[Collapse list](#) [Expand list](#)

- ISP Home
- 62 - Health care and social assistance
  - 621 - Ambulatory health care services
    - 6211 - Offices of physicians
    - 6212 - Offices of dentists
    - 6213 - Offices of other health practitioners
    - 6214 - Outpatient care centers
    - 6215 - Medical and diagnostic laboratories
    - 6216 - Home health care services
    - 6219 - Other ambulatory health care services

[SELECTED VISUALIZATIONS](#)



### Guide to All Census Bureau Data Sources for This Industry

Source & Description	Frequency	Latest Data	Geography	Industry
<a href="#">Quarterly Financial Report (QFRI)</a>	Quarterly	4Q 2013	U.S.	Selected 3 digits
<a href="#">Quarterly Services Survey (QSS)</a>	Quarterly	4Q 2013	U.S.	Selected Services 2- thru 4-digits
<a href="#">Quarterly Workforce Indicators (QWI)</a>			metro areas	Selected 2- thru 4-digits
<a href="#">Annual Capital Expenditure Survey (ACES)</a>				Selected 2- thru 6-digits
<a href="#">County Business Patterns (CBP)</a>			states, metros, ZIP areas	Selected 2- thru 6-digits
<a href="#">Nonemployer Statistics</a>			states, counties	Selected 2- thru 6-digits
<a href="#">Service Annual Survey</a>				Selected Services 3- thru 6-digits
<a href="#">Statistics of U.S. Business (SUSBI)</a>			states, counties	Selected 2- thru 6-digits
<a href="#">Business Expenses (BES)</a>				Selected 2- thru 5-digits
<a href="#">Economic Census (EC)</a>			states, places,	2- thru 6-digits
<a href="#">Economic Census of Manufacturing and Nonmetallic Mineral Product Industries (IA)</a>			commonwealth and territories, and the US	2- thru 5 digits
<a href="#">Survey of Business Owners (SBO)</a>	Every 5 years	2007	U.S., states, counties, cities, metro areas	Selected 2- thru 6-digits

SELECT AN INDUSTRY

- 21 - Mining, quarrying, and oil and gas extraction
- 22 - Utilities
- 23 - Construction
- 31-33 - Manufacturing
- 42 - Wholesale trade
- 44-45 - Retail trade
- 48-49 - Transportation and warehousing
- 51 - Information
- 52 - Finance and insurance
- 53 - Real estate and rental and leasing
- 54 - Professional, scientific, and technical services
- 55 - Management of companies and enterprises
- 56 - Administrative and support and waste management and remediation services
- 61 - Educational services
- 62 - Health care and social assistance
- 71 - Arts, entertainment, and recreation
- 72 - Accommodation and food services
- 81 - Other services (except public)

### Economic Census: Industry Snapshots

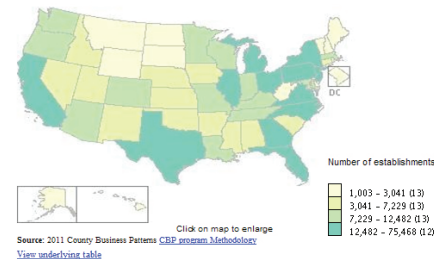
Ambulatory Health Care Services (NAICS 621)

[Change NAICS](#)

Change Geography:  [Apply](#)

2011 Number of establishments |  [Change Map](#)

[Compare your business industry averages](#)



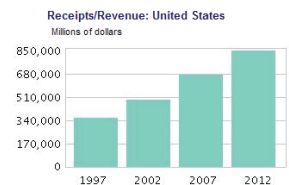
The *Industry Snapshots* present key statistics from the Economic Census and per capita ratios using data from Population Estimates. Data from County Business Patterns may also be shown when information from the 2012 Economic Census are not yet available. See the Economic Census [release schedule](#) and the [Snapshot FAQs](#) for more information.

Data for 2007 and prior years are not shown when the information is not comparable due to NAICS changes. See the [Definitions and Comparability](#) tab in the [Industry Statistics Portal](#) for more information.

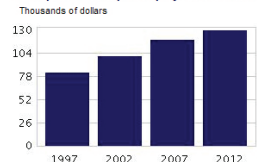
Data for some industries are only available from the Economic Census for the U.S. and by State. See the [Geographic Coverage Tables](#) for more information.

#### Key Industry Statistics: United States

	1997	2002	2007	2012	07-12 % Chg
Number of establishments	455,381	489,021	547,561	582,798	6.4%
Receipts/Revenue (\$ Millions)	355,441	488,619	688,453	842,841	26.1%
Annual payroll (\$ Millions)	155,864	203,341	274,711	344,316	25.3%
Total employment	4,413,614	4,924,908	5,703,441	6,574,255	15.3%
Receipts/Revenue per establishment (\$1,000)	781	999	1,221	1,446	18.5%
Receipts/Revenue per employee (\$1,000)	81	99	117	128	9.4%
Receipts/Revenue per \$ of payroll	2.3	2.4	2.4	2.4	.6%
Payroll per employee (\$)	35,314	41,288	48,166	52,373	8.7%
Employees per establishment	9.7	10.1	10.4	11.3	8.3%
Receipts/Revenue per capita (\$)	1,334	1,698	2,129	2,797	31.4%
Population per establishment	585	588	550	539	-2.1%



#### Receipts/Revenue per Employee: United States



\* Data has not yet been released. [Click here](#) for the full 2012 Econ Census release schedule.

Source: 1997, 2002, 2007, and 2012 Economic Census and Population Estimates  
 Data in this Snapshot include only establishments with paid employees. See [Industry Snapshot FAQs](#). All figures are in current dollars for the period shown, and do not reflect changes in prices. For information on how these data are derived, see the Methodology text from the [Economic Census and Population Estimates](#).  
 For more statistics about this industry, see the [Industry Statistics Portal](#).

**Industry Snapshots** present 2012 Economic Census statistics for over 1,000 NAICS industries. These reports will be released weekly on a flow basis. Features include:

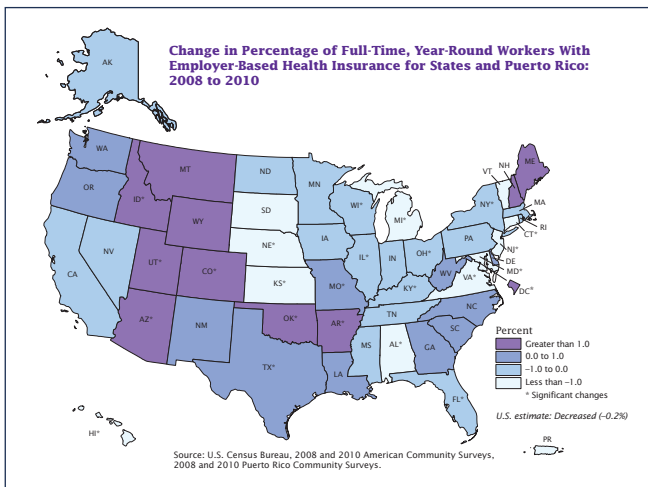
- National and state level data in table format, and a map for state and county level breakdowns.
- Key statistics (# of establishments, payroll, employment, and sales), as well as ratios and historic data from previous economic censuses.
- Trend charts to quickly identify how the industry has changed over time.
- A tool to compare your business to industry averages.

# Statistics for Health Insurance Coverage

*Health, income, and poverty statistics combine to give a measure of economic well-being*

## Data Sources:

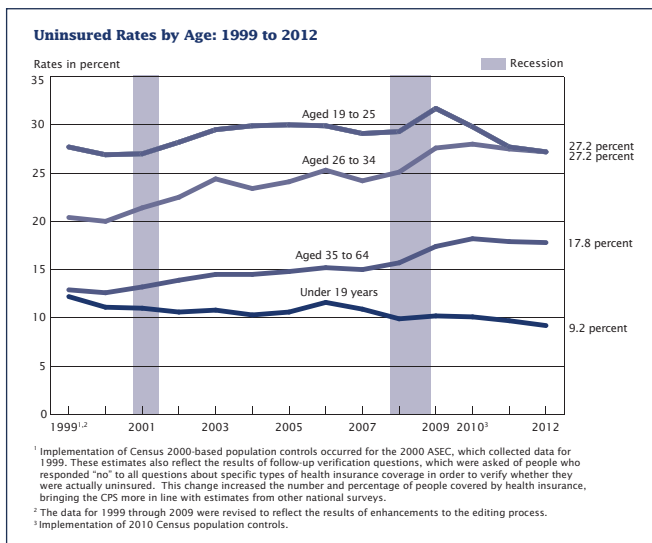
American Community Survey (ACS) – Due to the large sample size of the ACS, information about different types of health insurance coverage is available for states, counties, and other small geographies. In 2008, the ACS began asking questions about the health insurance status of respondents.



able for states, counties, and other small geographies. In 2008, the ACS began asking questions about the health insurance status of respondents.

*The ACS can show changes in employer-based coverage across states over time.*

Current Population Survey's Annual Social and Economic Supplement (CPS ASEC) – Starting in 2014, the CPS ASEC collects data both about past-year coverage (as was the case before the 2014) and current coverage.



The CPS ASEC also has added questions about health insurance receipt through marketplaces and whether it was subsidized, so that it reflects recent changes in health insurance laws.

*The CPS can track types of health insurance back to 1987.*

Survey of Income and Program Participation (SIPP) – By asking the same people about their health insurance over several years, SIPP can identify patterns in people's coverage over time.

*Because SIPP follows people across several years time, we can find out whether their coverage was continuous or irregular across time.*

Although people's health insurance situations can ultimately be simplified into whether they have coverage or not, health insurance coverage is a complex, dynamic subject that reaches far beyond one simple "yes" or "no." In addition to finding out if a person is covered, several Census data sources find out how a person is covered. People can get coverage through private sources like through an employer, by buying it, or through TRICARE. Coverage may also come through public programs such as Medicare, VA Care, Medicaid, or state and local means-tested assistance. There are people who have multiple kinds and others who have switched between kinds, and Census Bureau data can specifically identify all those types of coverage.

In addition to health insurance, the CPS and SIPP ask questions about health status and out-of-pocket spending on premiums and non-premium spending on medical services. In the SIPP, there are questions about people's medical utilization; for instance, going to the hospital, doctors or dentists.

## Accessing Census Health Insurance Data

- Tables and maps using ACS data can be found at [factfinder2.census.gov](http://factfinder2.census.gov)
- Generate tables using the CPS Table Creator [www.census.gov/cps/data/cpstablecreator.html](http://www.census.gov/cps/data/cpstablecreator.html), or look up reports and historical tables on the Health and Disability Statistics Branch website [www.census.gov/hhes/www/hlthins/](http://www.census.gov/hhes/www/hlthins/)
- Public use files let you access the data directly, available through DataFerrett [dataferrett.census.gov](http://dataferrett.census.gov) or on Census FTP sites.
- Release of 2013 ACS and CPS ASEC data will be in September 2014.



# Statement by Census Bureau Director John H. Thompson on Improved Health Insurance Questions in the Current Population Survey

[http://www.census.gov/newsroom/releases/archives/health\\_care\\_insurance/cb14-67.html](http://www.census.gov/newsroom/releases/archives/health_care_insurance/cb14-67.html)

The recent changes to the Current Population Survey's questions related to health insurance coverage are the culmination of 14 years of research and two national tests in 2010 and 2013 clearly showing the revised questions provide more precise measures of health insurance through improved respondent recall.

This change was announced in September 2013 and implemented because the evidence showed that reengineering the questions provides demonstrably more accurate results. The Census Bureau only implements changes in survey methodology based on research, testing, and evidence presented for peer review.

The revised questions were implemented in the Current Population Survey beginning in February 2014 in time for data collection covering calendar year 2013, and thus will provide a more accurate baseline for assessments of changes in insurance coverage, including that of the Affordable Care Act.

## Additional Background

Based on more than a decade of comprehensive research to improve the measure of the Nation's uninsured population and give the country better data, the U.S. Census Bureau redesigned the health insurance coverage questions for the Current Population Survey. The new method captures current health insurance coverage, in addition to coverage throughout the entire year. Results from two separate national tests of the new questions in 2010 and 2013 showed that the new method captured health insurance coverage better than the old method. Specifically, it improved the respondent recall of when they were covered by health insurance and then works backward through time about specific months of coverage. Based on the test results and 14 years of research, the new questions were included in this the February, March, and April CPS (reflecting the collection of data for 2013). The CPS will act to provide an accurate baseline for 2013 to facilitate the assessment of the impact of the Affordable Care Act implemented in 2014.

Additionally, the American Community Survey, the largest household survey conducted by the Census Bureau, has collected health insurance coverage information since 2008 and provides additional measures of health insurance coverage at the nation, state, and local levels on an annual basis. However, unlike the Current Population Survey, the ACS only asks respondents about a specific point in time.

## Published Research

### 2013 Content Test

Changing the CPS Health Insurance Questions And The Implications On The Uninsured Rate: Redesign and Production Estimates

[http://www.census.gov/hhes/www/hlthins/publications/sehsd\\_wp\\_2014-16.pdf](http://www.census.gov/hhes/www/hlthins/publications/sehsd_wp_2014-16.pdf)

### 2010 Survey of Health Insurance and Program Participation

SHADAC Report: SHADAC Analysis of the Survey of Health Insurance and Program Participation

[http://www.shadac.org/files/shadac/publications/SHIPP\\_final\\_report.pdf](http://www.shadac.org/files/shadac/publications/SHIPP_final_report.pdf)

### Previous Research Leading to the Redesigned Questionnaire

2009: Findings from a Pretest of a New Approach to Measuring Health Insurance in the Current Population Survey

<http://www.census.gov/srd/papers/pdf/rsm2009-07.pdf>

2007: Measuring Health Insurance in the U.S.

<http://www.census.gov/srd/papers/pdf/rsm2007-11.pdf>

2002: The Effects of Person-Level VS. Household-Level Questionnaire Design on Survey Estimates and Data Quality

<http://www.census.gov/srd/papers/pdf/rsm2002-05.pdf>



# HIV/AIDS Surveillance Data Base

## International epidemiological information

### About

The U.S. Census Bureau compiles, evaluates, and analyzes selected health and related data for all countries. The Health Studies Branch maintains and updates the **HIV/AIDS Surveillance Data Base**, which is a compilation of information on HIV prevalence from available studies from all countries and areas of the world with at least 5,000 population, with the exception of Northern America (including the United States) and U.S. territories.

Using this information, the Census Bureau tracks patterns and trends in HIV infection among sub-populations within countries. This information is then used to estimate AIDS mortality and is incorporated into our population projections.

### Purpose

- To provide researchers, policymakers and donor agencies with the most complete, up-to-date information on the status and trends of HIV seroprevalence in countries in Africa, Asia, Eastern Europe, Latin America and the Caribbean, and Oceania.
- To produce and disseminate reports on the status and trends of HIV/AIDS epidemics.
- To assist in the development of improved tools and models to determine HIV/AIDS levels, trends, and program impacts.

### Products

- **HIV/AIDS Surveillance Data Base**
  - Over 150,000 data records
  - Based on over 13,000 source citations
- **Research notes**
  - Country profiles describing patterns and trends of HIV seroprevalence
  - Maps showing the distribution of HIV seroprevalence by region and by population group
- **Periodic reports, for example:**
  - The AIDS Pandemic in the 21st Century
  - The Demographic Impacts of HIV/AIDS
  - Sexually Transmitted Diseases in Sub-Saharan Africa
  - An Epidemiological Review of HIV/AIDS in Sub-Saharan Africa
- **Modeling and Estimation of the Impact of HIV/AIDS**
- **Internet web site**
  - Maps
  - Software
  - [www.census.gov/population/international/](http://www.census.gov/population/international/)

### Users of Our Products

- U.S. Agency for International Development
- The Joint United Nations Programme on HIV/AIDS (UNAIDS)
- The World Health Organization (WHO)
- Other U.S. Government Agencies such as
  - Centers for Disease Control and Prevention (CDC)
  - National Institutes of Health (NIH)
  - Office of the U.S. Global AIDS Coordinator
- Researchers
- Policy makers
- Donors
- Non-governmental organizations

### Data Sources

- Articles published in journals, professional papers, official statistics, newspapers, and magazines focusing on HIV/AIDS
- International and regional HIV/AIDS conferences
  - abstract books
  - poster presentations
  - oral presentations
- Bibliographic compilations
- Country Reports
- Online medical and scientific journal articles and conferences

### Resources

- Subscriptions to medical and scientific journals related to HIV/AIDS
- Abstract books from international and regional HIV/AIDS conferences since 1987
- Collection of over 5,000 articles, papers, etc., on topics such as sexual behavior, sexually transmitted infections, tuberculosis, condom use, modeling the epidemic, and HIV/AIDS transmission to children.

### Data Presentation Formats

- PowerPoint
- Graphs
- Maps
- Tables
- Internet ready formats



# Population Division's International Programs

## Demographic and Economic Studies

Combining exceptional access to foreign data with the expertise of our staff, we analyze a wide range of demographic, socioeconomic, and health issues. Much of this work is available from the International Data Base (IDB), an online source of demographic and socioeconomic statistics for all countries of the world available at <[www.census.gov/population/international/data/](http://www.census.gov/population/international/data/)>. The IDB provides quick access to specialized information, with emphasis on demographic measures, for individual countries or selected groups of countries.

## Technical Assistance

The International Programs Center for Technical Assistance provides capacity building technical assistance and training to national statistical organizations. It has been working with other national statistical organizations for more than 60 years and in over 100 countries. Assistance to any country generally begins with a request from a statistical office to a donor agency for assistance with particular statistical needs. Typically, this involves a three-way partnership between the donor agency, the national statistical organization, and the Census Bureau in setting objectives, designing a strategy and work plan for capacity building, and monitoring progress toward objectives.

## Global Population Mapping and Spatial Analysis

The U.S. Census Bureau has a unique program to develop global, subnational population data and maps for use in international humanitarian relief and crisis planning. Online products provide current data on population patterns according to both administrative areas (global) and 100-meter grid squares (Haiti, Pakistan, and Rwanda). Population data are projected forward to the present and linked to subnational geography, to allow mapping of population density and other variables. We also provide technical assistance in census mapping to other countries, and the Census Bureau Library maintains an International Collection with 115,000 foreign demographic publications.

The Health Studies Branch is funded under the President's Emergency Plan for AIDS Relief (PEPFAR) through the United States Agency for International Development (USAID).



**PEPFAR**  
U.S. President's Emergency Plan for AIDS Relief



**USAID**  
FROM THE AMERICAN PEOPLE

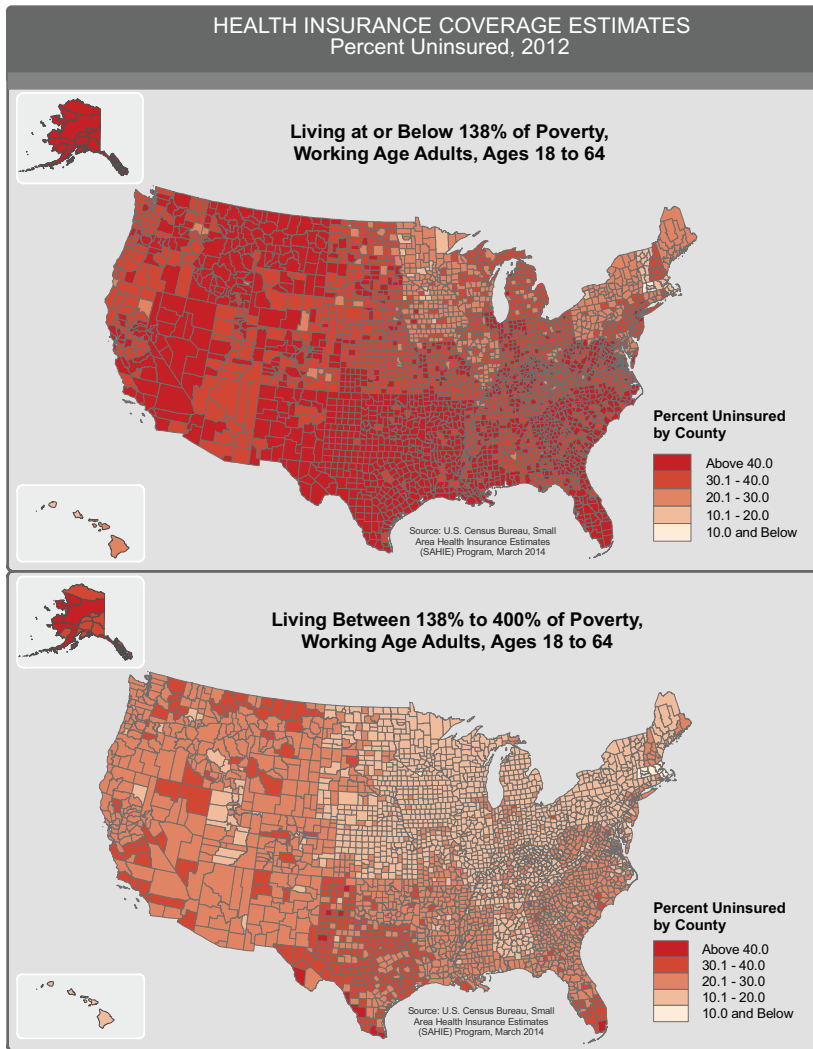
The staff has a background in public health, epidemiology, statistics, demography, database management, social science analysis, thematic mapping, and graphical presentation. The Health Studies Branch is a Joint United Nations Programme on HIV/AIDS (UNAIDS) Collaborating Centre on HIV/AIDS Surveillance and Modeling.

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[www.census.gov/population/international/](http://www.census.gov/population/international/)

# Small Area Health Insurance Estimates (SAHIE) for Your State and County

Use Our Interactive Data and Mapping Tool

Health care law changes will increase access to health care by allowing Medicaid to cover families with incomes less than or equal to 138 percent of the poverty threshold in states that have signed up for Medicaid expansion.



U.S. Department of Commerce Economic and Statistics Administration U.S. CENSUS BUREAU

Beginning with the SAHIE 2012 release, the 138 percent to 400 percent IPR (Income-to-Poverty Ratio) category related to the recent health care law changes is now available (138-400% IPR). This will become increasingly useful in the future as the recent increase in Medicaid enrollment begins to show up in the SAHIE.

Families in this income range will be able to receive tax credits for their health insurance through health insurance exchanges. This two-panel map shows county uninsured rates of working age adults, ages 18 to 64, by the IPR category, less than 138 percent of the poverty threshold (Medicaid Expansion level), and by the newest IPR category, 138 percent to 400 percent of the poverty threshold (Exchange Subsidy range).

SAHIE 2013 to be released in spring of 2015

The U.S. Census Bureau's Small Area Health Insurance Estimates (SAHIE) program produces timely estimates for all counties and states by detailed demographic and income groups. The SAHIE program releases single-year estimates of health insurance coverage for every county in the U.S. The estimates are model-based and consistent with the American Community Survey (ACS).

SAHIE data can be used to analyze geographic variation in health insurance coverage, as well as disparities in coverage by race/ethnicity, sex, age, and income levels that reflect thresholds for state and federal assistance programs. Because consistent estimates are available from 2008 to 2012, SAHIE reflects annual changes over time.

You can also access state and county data tables. The tables allow you to easily select a demographic and income group of interest.

[www.census.gov/did/www/sahie/data/index.html](http://www.census.gov/did/www/sahie/data/index.html)

ID	Name	Demographic Group		Uninsured			Insured			
		Number	MOE	Number	MOE	%	%MOE	Number	MOE	%
08005	Arapahoe County, CO	525,063	0	92,348	4,725	17.6	0.9	432,714	4,725	82.4
08007	Archuleta County, CO	9,567	0	2,013	178	21.0	1.9	7,555	178	79.0
08009	Baca County, CO	2,793	0	595	55	21.3	2.0	2,197	55	78.7
08011	Bent County, CO	3,334	0	572	58	17.2	1.7	2,761	58	82.8
08013	Boulder County, CO	262,224	0	35,864	2,617	13.6	1.0	226,560	2,617	86.4
08014	Broomfield County, CO	51,592	0	5,283	550	10.2	1.1	46,309	550	89.8
08015	Chaffee County, CO	12,927	0	2,407	213	18.6	1.6	10,521	213	81.4
08017	Cheyenne County, CO	1,519	0	360	32	23.7	2.1	1,160	32	76.3
08019	Clear Creek County, CO	7,530	0	941	95	12.5	1.3	6,589	95	87.5
08021	Conejos County, CO	6,882	0	1,391	124	20.2	1.8	5,491	124	79.8
08023	Costilla County, CO	2,729	0	764	64	28.0	2.3	1,965	64	72.0
08025	Crowley County, CO	2,480	0	441	45	17.8	1.8	2,039	45	82.2
08027	Custer County, CO	3,006	0	621	61	20.6	2.0	2,386	61	79.4
08029	Delta County, CO	23,273	0	5,061	397	21.7	1.7	18,213	397	78.3
08031	Denver County, CO	555,777	0	105,889	5,439	19.1	1.0	449,888	5,439	80.9
08033	Dolores County, CO	1,582	0	375	33	23.5	2.1	1,218	33	76.5
08035	Douglas County, CO	271,021	0	20,361	1,909	7.5	0.7	250,660	1,909	92.5
08037	Eagle County, CO	47,940	0	10,583	864	22.1	1.8	37,357	864	77.9
08039	Elbert County, CO	20,376	0	2,619	237	12.9	1.2	17,757	237	87.1



# Examples of SAHIE statistics at work:

## County Health Rankings

Collaboration between Robert Wood Johnson and University of Wisconsin. Measures the health of every county and ranks them within states. Uses SAHIE's county uninsured population under age 65 as a yearly input into the ranking model.

[www.countyhealthrankings.org](http://www.countyhealthrankings.org)

## Governing, The States and Localities

Presents 2009 SAHIE data in an interactive map that illustrates the under age 65 population by state and county. The website promotes SAHIE data from census.gov and provides a link to the respective data.

[www.governing.com/gov-data/health/2009-small-area-health-insurance-coverage-estimates.html](http://www.governing.com/gov-data/health/2009-small-area-health-insurance-coverage-estimates.html)

## State Coverage Initiatives

Access to resources that provide a broad analysis of ACA, responsibilities of states, and implementation deadlines. Links to SAHIE to help plan for implementation of the law.

[www.statecoverage.org/health-reform-resources/115/state?page=9](http://www.statecoverage.org/health-reform-resources/115/state?page=9)

## Center for Mississippi, Health Policy

Presents SAHIE data in a fact sheet that examines uninsured non-elderly adults at the county level in Mississippi, and highlights the groups that may be eligible for premium subsidies through a Health Insurance Exchange or coverage through the expansion of Medicaid authorized under the ACA.

[www.mshealthpolicy.com/documents/SAHIEFactSheetAug2012.pdf](http://www.mshealthpolicy.com/documents/SAHIEFactSheetAug2012.pdf)

## Appalachian Regional Commission

Used SAHIE to analyze disparities in health care resources across Appalachian counties.

[www.arc.gov/assets/research\\_reports/HealthCareDisparitiesChapter1.pdf](http://www.arc.gov/assets/research_reports/HealthCareDisparitiesChapter1.pdf)

## Center for Disease Control and Prevention (CDC)

The CDC's National Breast and Cervical Cancer Early Detection Program funds the SAHIE program and uses the estimates to determine funding allocation. SAHIE produces estimates of income-eligible women by age group. Most state programs chose income eligibility at 0-200 or 0-250 percent of the poverty threshold.

[www.cdc.gov/cancer/nbccedp/](http://www.cdc.gov/cancer/nbccedp/)

## Kansas Association of Local Health Departments

Used SAHIE as a core indicator to determine the Health of Kansas counties.

[www.kalhd.org/attachments/wysiwyg/5/CrawfordCoreIndicators.pdf](http://www.kalhd.org/attachments/wysiwyg/5/CrawfordCoreIndicators.pdf)

## University of Texas

Used SAHIE to analyze the number of insured in border counties in Texas. "Persistent Disparities in the Use of Health Care Along the US-Mexico Border" published in the November 2011 Journal of the American Academy of Dermatology.