Fact Sheet: Health Insurance Coverage 2013

The Census Bureau has been consistently collecting key information to measure the extent of health insurance coverage in America since the 1980's. In this fact sheet, we explore the various Census Bureau sources of data on health insurance coverage.

Current Population Survey (CPS)

Key fact: This annual survey produces health insurance coverage estimates for the nation and for population subgroups.

- Questions re-designed this year to provide a good baseline for coverage in 2013 before major provisions of the Affordable Care Act went into effect in 2014, so that we can assess the impact of the law after it is in effect.
- We begin by asking respondents about their current coverage, and whether it started before or after January of the prior year. Follow-up questions determine if the coverage was continuous; if not, whether there was any kind of coverage during the gaps; and whether there was any additional coverage during that time.
- The new method is intended to capture health insurance coverage better than the old method, improving respondent recall of when they were covered by health insurance by working backwards through time about specific months of coverage.
- New questions added this year to measure Marketplace participation. Questions also added on employer-sponsored insurance offers and take-up. Revised questions included on Medical Out-of-Pocket expenses.
- Estimates are provided for the nation and states based on a sample of approximately 68,000 addresses in the Annual Social and Economic Supplement of the CPS. Coverage data are shown by type of health insurance (direct-purchase insurance, employment-based insurance, Medicare, etc.)
- Data at the national level are shown for various demographic characteristics, including family status, race and Hispanic origin, age, metropolitan residence, income and work experience.
- Due to re-designed questions, 2013 data are not comparable to CPS data collected in earlier years. The 2013 data will be available in September 2014. Next year, once we have collected the CPS data about 2014, we will be able to provide estimates of year-to-year change in coverage using a consistent methodology.

American Community Survey (ACS)



Key fact: A nationwide survey designed to provide communities with reliable and timely demographic, social, economic and housing data every year.

- The ACS has asked about health insurance coverage since 2008 and produces
 estimates for national, state, and local areas annually, and the questions have
 remained unchanged during the CPS redesign. Combined with other sociodemographic statistics from this rich source of data, the ACS is a valuable
 resource for assessing the Affordable Care Act.
- Respondents are asked whether they are currently covered by a health insurance plan.
- Single-year data currently available for areas and groups of 65,000 or more, including counties, cities and all congressional districts, as well as for the nation and states, and for areas and groups of 20,000 or more, based on three-year estimates. Starting in December 2013, the ACS began providing data for the nation's smallest areas, such as census tracts and block groups.
- Provides data on types of coverage, such as through an employer, Medicare or Medicaid. Tabulated data products in the ACS include information on whether coverage is public or private.
- Largest survey: more than 3 million addresses annually.
- Data are cross-tabulated by a variety of demographic characteristics.

Small Area Health Insurance Estimates (SAHIE)

Key fact: Currently the only Census Bureau source of single-year health insurance data for every county.

- Data products are model-based and combine data from the American Community Survey (ACS), demographic population estimates, aggregated federal tax returns, participation records for the Supplemental Nutrition Assistance Program (SNAP), County Business Patterns, Medicaid and the Children's Health Insurance Program (CHIP) participation records and the 2010 Census.
- Data are provided by age, sex, income category and (for states only) race and Hispanic origin. The data pertain to those under age 65.
- Produces annual estimates of health insurance coverage for states and each of the nation's counties. A limited set of estimates was first published in 2005 for calendar year 2000; a broader set of estimates was published for 2005 and 2006. The 2012 estimates were released in March 2014; the 2013 estimates are tentatively scheduled for release in March 2015.



• These health insurance coverage estimates are now based on ACS data in place of Current Population Survey data. Due to the increased information available from the ACS, coverage estimates for additional income categories of particular interest to health care changes are included.

Survey of Income and Program Participation (SIPP)

Key fact: This longitudinal survey shows how long people are covered by health insurance, or how long they go without it, over a period of time.

- SIPP provides monthly health insurance coverage data across a period of several years. Data can identify patterns of changes in health insurance coverage status over time, and how they vary across demographic and economic groups.
- In 2014, a new method of collecting all of the SIPP content was implemented. The 2014 (wave 1) survey produces data for 2013, providing a baseline prior to the implementation of major provisions of the Affordable Care Act in 2014.
- The new SIPP method will continue to collect data on types of coverage (direct-purchase insurance, employment-based insurance, Medicare, etc.), employer-sponsored insurance offers and take-up, and Medical Out-of-Pocket expenses. The new question on Marketplace participation was added, beginning in the 2015 (wave 2) survey.
- Data were first collected in 1984 and are released on a periodic basis.
- The most recent Census Bureau publication on longitudinal health insurance coverage was for the 1996-1999 period.

National Health Interview Survey (NHIS)

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

- Data are available on a quarterly basis (In September, the NHIS estimates will reflect estimates concerning January to March of 2014).
- Coverage data are shown by type of health insurance (direct-purchase insurance, employment-based insurance, Medicare, etc.)
- Three measures are provided for the uninsured: uninsured at the time of the interview, uninsured at least part of the year prior to the interview, and uninsured for more than a year at the time of the interview.



- National-level information shown by a variety of demographic characteristics, including poverty status, race and Hispanic origin, age, and sex.
- State-level estimates of persons uninsured at the time of the interview are provided, as are estimates of those with public or private coverage, for more than 40 states with the largest populations. However, state-level estimates are feasible for additional states.
- Health insurance estimates are available periodically from 1959, and annually since 1989.
- Enables policymakers to examine health insurance in relation to health, health behaviors and health care utilization.

Medical Expenditure Panel Survey (MEPS)

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

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

Health Industries

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

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



- County Business Patterns
- Nonemployer Statistics
- 2012 Economic Census (Data on ambulatory health care services to be released in November 2014)
- Statistics of U.S. Businesses
- Service Annual Survey
- Quarterly Services Survey
- Quarterly Workforce Indicators

