

Health Insurance Coverage Bulletin

Abstract of Auxiliary Data for the March 2013 Annual Social and
Economic Supplement to the Current Population Survey

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INTRODUCTION

The March Annual Social and Economic Supplement to the Current Population Survey (March CPS) is the data source most often used for estimating health insurance coverage in the U.S. population. 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 The insurance questions are not mutually exclusive and thus the March CPS captures multiple sources of health insurance during the year.

The survey generates nationally representative estimates of health insurance coverage and has recently added 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.

To address these limitations, the U.S. Department of Labor’s (DOL) Employee Benefits Security Administration (EBSA) generates additional variables and imputes certain characteristics

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.

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 have been included in this year’s Bulletin.

regarding employment and insurance and then links this data to the March CPS data file. The resulting Auxiliary Data not only generates and imputes new variables, but also clarifies variables included in the March CPS such as the size (number of employees)³ and sector of employment, that do not necessarily represent the size and sector of the employer that provides health insurance coverage.

While the March CPS reports if health insurance coverage is from an employer, it does not report if the person’s current or former employer is providing the coverage or, for all workers, whether these employers offer health insurance. EBSA imputes variables first for those covered by ESI on whether coverage is from a current or former employer, and then, for all workers, whether their employer offers health insurance coverage.⁴ EBSA then imputes size and sector for those imputed to have coverage from a former employer, as well as if this insurance has been obtained through COBRA or a retiree plan. In addition, coverage characteristics such as the funding arrangement and plan type, as well as if coverage was provided under a union arrangement, are imputed. Finally, actuarial value, which represents the average value of an active employer sponsored health insurance plan, is

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 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.

imputed to active employees with health insurance in their own name.

Individuals can have multiple sources of coverage in a given year, and EBSA creates tables that assign individuals to a “primary” source of coverage for the year based on the following hierarchy: ESI;⁵ Medicare; private non-group coverage; Medicaid or SCHIP; and military or other public. Using this hierarchy avoids double counting of individuals across coverage categories. However, given that the March CPS does not ask how long an individual is covered by each type of insurance they have, the label “primary” coverage should not be construed as the most important source of coverage in a given year.

The funding arrangement imputations, self-insured and fully-insured, are based on 2010 through 2012 Medical Expenditure Panel Survey (MEPS) Insurance Component file tabulations from the Agency for Healthcare Research and Quality (AHRQ). The self-insured plan category includes persons covered by plans reported to be partly or completely self-insured.⁶ The union

⁵ 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).

⁶ Note that this partition 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 2010 Form 5500 Annual Reports*, U.S.

imputations are based on both the CPS itself for those of whom union coverage and membership was asked, as well as the 2008 Panel, Wave 6 (2010 data) of the Survey of Income and Program Participation (SIPP)⁷. Actuarial values are based on plan data from the National Compensation Survey (NCS, 2005) and the 2006 through 2012 Kaiser/HRET Employer Health Benefits Surveys.

Finally, EBSA advises caution when interpreting imputed variables for small sample sizes. Users should refrain from reporting statistics at the state level for such imputed variables as funding, union coverage, plan types, and coverage from a former employer.⁸

Department of Labor, Employee Benefits Security Administration, March 2014, at <http://www.dol.gov/ebsa/pdf/ACA-ARC2013-Revised.pdf>.

⁷ The union imputation was not performed on persons with coverage from self-employment.

⁸ See technical appendix at <http://www.dol.gov/ebsa>.

HIGHLIGHTS

- The total population represented by the March 2013 CPS was 311.1 million persons. Of these, 263.2 million (85 percent) were covered by at least one form of insurance in 2012, either private or public, with the remaining 48.0 million (15 percent) classified as uninsured. Of the insured, 170.9 million (65 percent) had employer sponsored insurance (ESI), 48.9 million (19 percent) had Medicare, 37.4 million (14 percent) had some type of other private coverage, and 63.5 million (24 percent) had some type of other public coverage, which includes both Medicaid and SCHIP.⁹
- Of the 267.8 million people under age 65, 220.5 million (82 percent) were insured in 2012 and 47.3 million (18 percent) were uninsured.
- We define ‘primary coverage’ by restricting coverage to a single source of insurance based on a hierarchy (described in the Introduction, above). For those insured in calendar year 2012, 160.0 million (61 percent) persons had ESI as their primary source of coverage, 45.9 million (17 percent) had Medicare, 17.8 million (7 percent) had non-ESI private coverage and 39.4 million (15 percent) had some type of other public coverage.
- Of 157.3 million workers reported in the March 2013 CPS, 74.0 million (47 percent) had coverage in 2012 through a current employer and another 32.0 million (20 percent) were eligible but not enrolled in their employer’s plan (with slightly over one-third of these being uninsured).
- In addition, for those 51.4 million who were not offered coverage by their employer (either due to being ineligible or the employer not offering coverage), just over one third were uninsured.
- While offer rates of health insurance are higher for workers in larger employers, the effective uninsured rates vary somewhat less by employer size.¹⁰
- Self-insured coverage is more predominant in the private sector, while fully-insured coverage is more likely in the public sector. Moreover, the rate of self-insurance increases with employer size.
- Of 170.9 million persons with ESI in calendar year 2012, 150.5 million (88 percent) had coverage through a current employer (either as a policyholder or dependent), 4.2 million (2 percent) had coverage through COBRA and 16.1 million (9 percent) had retiree coverage. Of the 88.3 million who had coverage in their own name (as a policyholder), 74.0 million (84 percent) had coverage from a current employer, 2.6 million (3 percent) had COBRA

⁹ Persons may be counted in more than one category.

¹⁰ Employer size is defined for as the total number of employees working for a given employer.

and 11.7 million (13 percent) had retiree coverage. Unsurprisingly, both COBRA and retiree coverage were heavily concentrated in larger employer sponsored plans.

- More than half of those covered through ESI were enrolled in a Preferred Provider Organization (PPO) plan. The remaining individuals were covered by a high deductible (HDHD)¹¹ health insurance plan or a Health Maintenance Organization (HMO) and were least likely to be enrolled in a Point of Service (POS) plan.
- Health insurance coverage obtained through a union accounted for a higher percentage of coverage in the public sector than the private sector. Within the private sector, union coverage was over three times more likely for retirees than for actives (45% vs. 12%) while the prevalence in the public sector for retiree vs. active is much more similar.
- 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 88 percent (on

average a plan would pay 88 percent of covered expenses over an average population)¹².

- Out of pocket spending appears to increase with age, and is higher for those with either private insurance coverage or Medicare as compared to those with other public or no coverage. Except for those under age 18, average out of pocket costs for the uninsured are lower than those of the insured in the same age grouping.

¹¹ High deductible health insurance plans include, but are not limited to, IRS qualified HDHP plans. The data underlying the plan type classification (from the Kaiser/HRET Employer Health Benefits Survey) had high deductible plans classified first in the hierarchy by type (for example, plans which are both high deductible and PPO plans are shown as high deductible plans). Thus persons in plans which are both PPO and high deductible are shown as being in high deductible plans.

¹² Updated KFF/HRET survey data as well as revisions to the program that calculated the actuarial values and updated private insurance estimates in the CMS National Health Accounts all combined to contribute to the decrease in overall actuarial values from last year’s preliminary estimates.

**Table 1A. Health Insurance Coverage from All Sources
by State: CY 2012**
(numbers in millions)

	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.	311.1	263.2	170.9	130.5	43.0	48.9	37.4	63.5	48.0
Alabama	4.8	4.1	2.6	1.9	0.8	0.9	0.6	1.1	0.7
Alaska	0.7	0.6	0.4	0.2	0.2	0.1	0.1	0.2	0.1
Arizona	6.6	5.4	3.2	2.4	0.8	1.0	0.7	1.7	1.2
Arkansas	2.9	2.4	1.3	1.0	0.3	0.6	0.3	0.7	0.5
California	38.0	31.2	19.2	14.8	4.8	4.9	4.3	8.4	6.8
Colorado	5.2	4.5	3.0	2.4	0.6	0.7	0.8	0.9	0.7
Connecticut	3.5	3.2	2.3	1.8	0.5	0.6	0.5	0.6	0.3
Delaware	0.9	0.8	0.5	0.4	0.1	0.2	0.1	0.2	0.1
District of Columbia	0.6	0.6	0.4	0.2	0.1	0.1	0.1	0.2	*
Florida	19.2	15.1	8.9	6.7	2.3	3.7	2.4	3.7	4.1
Georgia	9.7	7.8	5.1	3.9	1.3	1.4	1.0	1.9	1.9
Hawaii	1.4	1.3	0.9	0.6	0.3	0.2	0.1	0.3	0.1
Idaho	1.6	1.3	0.8	0.6	0.3	0.3	0.2	0.3	0.3
Illinois	12.7	11.0	7.5	6.1	1.5	1.9	1.6	2.3	1.7
Indiana	6.3	5.5	3.7	3.0	0.7	1.1	0.7	1.2	0.8
Iowa	3.0	2.7	1.7	1.4	0.4	0.5	0.5	0.6	0.3
Kansas	2.8	2.5	1.6	1.2	0.4	0.5	0.5	0.6	0.4
Kentucky	4.4	3.7	2.3	1.8	0.6	0.7	0.4	1.0	0.7
Louisiana	4.5	3.6	2.4	1.8	0.6	0.7	0.4	1.0	0.8
Maine	1.3	1.2	0.8	0.6	0.2	0.2	0.2	0.4	0.1
Maryland	5.9	5.2	3.8	2.5	1.4	0.8	0.7	0.9	0.7
Massachusetts	6.6	6.3	4.2	3.3	1.0	1.1	0.7	1.6	0.3
Michigan	9.7	8.7	6.1	4.9	1.3	1.8	1.1	1.9	1.1
Minnesota	5.4	4.9	3.3	2.8	0.6	0.8	1.0	0.9	0.4
Mississippi	2.9	2.5	1.4	1.0	0.4	0.5	0.3	0.7	0.4
Missouri	6.0	5.2	3.4	2.8	0.7	1.1	0.9	1.0	0.8
Montana	1.0	0.8	0.5	0.3	0.2	0.2	0.2	0.2	0.2
Nebraska	1.9	1.6	1.1	0.8	0.2	0.3	0.4	0.3	0.2
Nevada	2.7	2.1	1.4	1.1	0.3	0.4	0.2	0.4	0.6
New Hampshire	1.3	1.2	0.9	0.7	0.2	0.2	0.1	0.2	0.2
New Jersey	8.7	7.5	5.5	4.2	1.4	1.4	0.9	1.2	1.2
New Mexico	2.1	1.6	0.9	0.5	0.5	0.3	0.2	0.5	0.5
New York	19.3	17.1	10.9	7.8	3.2	3.2	2.0	4.8	2.2

Continued....

**Table 1A. Health Insurance Coverage from All Sources
by State: CY 2012**
(numbers in millions)

	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	9.7	8.0	4.9	3.6	1.4	1.7	1.2	2.1	1.7
North Dakota	0.7	0.6	0.4	0.3	0.1	0.1	0.1	0.1	0.1
Ohio	11.4	10.0	6.7	5.1	1.7	2.0	1.3	2.2	1.4
Oklahoma	3.7	3.1	1.9	1.4	0.5	0.6	0.4	0.9	0.6
Oregon	3.9	3.3	2.0	1.5	0.5	0.6	0.7	0.8	0.6
Pennsylvania	12.7	11.2	7.5	6.0	1.6	2.1	1.9	2.2	1.5
Rhode Island	1.0	0.9	0.6	0.4	0.2	0.2	0.1	0.2	0.1
South Carolina	4.7	4.0	2.6	2.0	0.6	0.8	0.6	0.9	0.7
South Dakota	0.8	0.7	0.4	0.3	0.1	0.1	0.2	0.2	0.1
Tennessee	6.4	5.5	3.2	2.6	0.7	1.2	0.8	1.5	0.9
Texas	26.1	19.7	12.9	9.9	3.2	3.1	2.2	5.0	6.4
Utah	2.9	2.4	1.8	1.4	0.4	0.3	0.4	0.4	0.4
Vermont	0.6	0.6	0.4	0.2	0.1	0.1	0.1	0.2	*
Virginia	8.0	7.0	4.9	3.4	1.6	1.2	1.1	1.6	1.0
Washington	6.9	5.9	3.9	3.1	0.9	1.0	0.8	1.7	0.9
West Virginia	1.8	1.5	1.0	0.7	0.3	0.4	0.2	0.4	0.3
Wisconsin	5.6	5.1	3.4	2.6	0.8	0.9	0.8	1.1	0.5
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 ESI coverage from two sources (self/spouse or both parents) can appear in both public and private sector totals.

NOTE: Non-zero cells with under 50,000 persons are marked with a "*".

1/ Employer Sponsored Insurance (ESI) is defined to be 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 non government health insurance including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2012**
(numbers in millions)

	Age				
	Total	< 18	18- 25	26- 64	65+
Total Population	311.1	74.2	34.2	159.4	43.3
Total Insured	263.2	67.6	25.4	127.5	42.6
Employer Sponsored Insurance 1/	170.9	41.1	15.7	99.7	14.4
Policyholder	88.3	0.4	4.7	72.5	10.8
Dependent	89.2	40.9	11.5	32.4	4.4
Medicare	48.9	0.8	0.4	7.6	40.1
Other Private Insurance 2/	37.4	5.2	6.0	14.8	11.5
Policyholder	21.8	0.1	0.7	10.3	10.6
Dependent	17.5	5.1	5.4	5.5	1.6
Other Public Coverage 3/	63.5	28.7	6.3	21.3	7.2
Total Uninsured 4/	48.0	6.6	8.8	31.9	0.6

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.

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

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

3/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2012**
(numbers in millions)

	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.	311.1	263.2	160.0	124.7	35.3	45.9	17.8	39.4	48.0
Alabama	4.8	4.1	2.4	1.8	0.6	0.9	0.3	0.6	0.7
Alaska	0.7	0.6	0.4	0.2	0.1	0.1	*	0.1	0.1
Arizona	6.6	5.4	3.1	2.4	0.7	1.0	0.3	1.0	1.2
Arkansas	2.9	2.4	1.2	1.0	0.2	0.6	0.1	0.5	0.5
California	38.0	31.2	18.3	14.3	4.0	4.6	2.6	5.7	6.8
Colorado	5.2	4.5	2.9	2.3	0.5	0.6	0.4	0.5	0.7
Connecticut	3.5	3.2	2.1	1.7	0.4	0.5	0.2	0.4	0.3
Delaware	0.9	0.8	0.5	0.4	0.1	0.2	*	0.1	0.1
District of Columbia	0.6	0.6	0.3	0.2	0.1	0.1	*	0.1	*
Florida	19.2	15.1	8.1	6.4	1.8	3.6	1.2	2.2	4.1
Georgia	9.7	7.8	4.7	3.7	1.1	1.3	0.6	1.2	1.9
Hawaii	1.4	1.3	0.8	0.6	0.2	0.2	0.1	0.2	0.1
Idaho	1.6	1.3	0.8	0.6	0.2	0.3	0.1	0.2	0.3
Illinois	12.7	11.0	7.1	5.8	1.2	1.8	0.7	1.5	1.7
Indiana	6.3	5.5	3.5	2.8	0.6	1.0	0.3	0.7	0.8
Iowa	3.0	2.7	1.7	1.3	0.3	0.5	0.3	0.3	0.3
Kansas	2.8	2.5	1.5	1.1	0.3	0.4	0.2	0.4	0.4
Kentucky	4.4	3.7	2.2	1.7	0.5	0.7	0.2	0.6	0.7
Louisiana	4.5	3.6	2.2	1.7	0.5	0.6	0.2	0.6	0.8
Maine	1.3	1.2	0.7	0.5	0.2	0.2	0.1	0.2	0.1
Maryland	5.9	5.2	3.6	2.4	1.1	0.7	0.3	0.5	0.7
Massachusetts	6.6	6.3	4.0	3.2	0.8	1.0	0.3	1.0	0.3
Michigan	9.7	8.7	5.4	4.4	0.9	1.7	0.5	1.1	1.1
Minnesota	5.4	4.9	3.2	2.7	0.5	0.8	0.4	0.5	0.4
Mississippi	2.9	2.5	1.3	1.0	0.3	0.5	0.2	0.5	0.4
Missouri	6.0	5.2	3.2	2.6	0.6	1.0	0.4	0.6	0.8
Montana	1.0	0.8	0.5	0.3	0.1	0.2	0.1	0.1	0.2
Nebraska	1.9	1.6	1.0	0.8	0.2	0.3	0.2	0.1	0.2
Nevada	2.7	2.1	1.4	1.1	0.3	0.4	0.1	0.2	0.6
New Hampshire	1.3	1.2	0.8	0.6	0.1	0.2	0.1	0.1	0.2
New Jersey	8.7	7.5	5.2	4.0	1.1	1.3	0.4	0.7	1.2
New Mexico	2.1	1.6	0.9	0.5	0.4	0.3	0.1	0.3	0.5
New York	19.3	17.1	10.1	7.4	2.7	3.0	1.0	3.1	2.2

Continued....

**Table 1C. Health Insurance Coverage from Primary Source
by State: CY 2012**
(numbers in millions)

	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	9.7	8.0	4.6	3.5	1.1	1.6	0.5	1.2	1.7
North Dakota	0.7	0.6	0.4	0.3	0.1	0.1	0.1	*	0.1
Ohio	11.4	10.0	6.1	4.7	1.4	1.9	0.6	1.4	1.4
Oklahoma	3.7	3.1	1.7	1.4	0.4	0.5	0.2	0.6	0.6
Oregon	3.9	3.3	1.9	1.4	0.4	0.6	0.3	0.5	0.6
Pennsylvania	12.7	11.2	7.1	5.7	1.3	2.0	0.7	1.4	1.5
Rhode Island	1.0	0.9	0.6	0.4	0.1	0.2	0.1	0.1	0.1
South Carolina	4.7	4.0	2.4	1.9	0.5	0.8	0.3	0.5	0.7
South Dakota	0.8	0.7	0.4	0.3	0.1	0.1	0.1	0.1	0.1
Tennessee	6.4	5.5	3.1	2.5	0.6	1.2	0.4	0.9	0.9
Texas	26.1	19.7	12.3	9.6	2.7	2.9	1.1	3.4	6.4
Utah	2.9	2.4	1.7	1.3	0.4	0.3	0.2	0.3	0.4
Vermont	0.6	0.6	0.3	0.2	0.1	0.1	*	0.1	*
Virginia	8.0	7.0	4.6	3.3	1.3	1.1	0.5	0.8	1.0
Washington	6.9	5.9	3.7	3.0	0.7	0.9	0.3	1.0	0.9
West Virginia	1.8	1.5	0.9	0.6	0.3	0.3	0.1	0.2	0.3
Wisconsin	5.6	5.1	3.2	2.5	0.7	0.8	0.4	0.7	0.5
Wyoming	0.6	0.5	0.3	0.2	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: Non-zero cells with under 50,000 persons are marked with a ***.

1/ Employer Sponsored Insurance (ESI) is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2012**
(numbers in millions)

	Age				
	Total	< 18	18- 25	26- 64	65+
Total Population	311.1	74.2	34.2	159.4	43.3
Total Insured	263.2	67.6	25.4	127.5	42.6
Employer Sponsored Insurance 1/	160.0	41.1	15.7	98.8	4.5
Policyholder	79.8	0.4	4.7	71.9	2.9
Dependent	80.2	40.7	11.1	26.9	1.5
Medicare	45.9	0.7	0.4	7.2	37.7
Other Private Insurance 2/	17.8	3.5	4.9	9.1	0.3
Policyholder	7.3	0.1	0.6	6.4	0.2
Dependent	10.5	3.3	4.3	2.7	0.1
Other Public Coverage 3/	39.4	22.4	4.4	12.5	0.2
Total Uninsured 4/	48.0	6.6	8.8	31.9	0.6

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: Non-zero cells with under 50,000 persons are marked with a "***".

1/ Employer Sponsored Insurance (ESI) is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2. Insurance Coverage of Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2012**
(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	157.3	128.5	103.1	79.8	23.4	6.7	10.6	8.1	28.8
	Coverage through current employer	74.0	74.0	73.5	58.0	15.4	0.5	0.0	0.0	0.0
	Eligible, not enrolled	32.0	20.6	11.7	8.5	3.2	1.9	3.8	3.2	11.4
	Employer offers, not eligible	19.8	13.9	7.6	5.5	2.1	1.7	2.4	2.2	5.9
	Employer doesn't offer	31.5	20.1	10.3	7.8	2.6	2.6	4.4	2.8	11.4
Employer Size Under 50	Total	55.8	40.4	26.6	22.8	3.8	4.1	6.1	3.7	15.4
	Coverage through current employer	14.4	14.4	13.9	13.2	0.7	0.5	0.0	0.0	0.0
	Eligible, not enrolled	10.5	6.4	3.1	2.3	0.8	0.8	1.5	0.9	4.2
	Employer offers, not eligible	6.2	4.1	2.0	1.5	0.5	0.6	0.8	0.6	2.1
	Employer doesn't offer	24.6	15.6	7.6	5.7	1.9	2.1	3.7	2.1	9.1
Employer Size 50-99	Total	11.4	9.1	7.6	6.5	1.1	0.4	0.6	0.5	2.2
	Coverage through current employer	5.5	5.5	5.5	4.9	0.6	*	0.0	0.0	0.0
	Eligible, not enrolled	2.6	1.6	0.9	0.7	0.2	0.1	0.3	0.2	1.1
	Employer offers, not eligible	1.5	1.0	0.5	0.4	0.1	0.2	0.2	0.2	0.5
	Employer doesn't offer	1.7	1.0	0.6	0.4	0.1	0.1	0.2	0.1	0.7
Employer Size 100-499	Total	19.0	16.1	13.9	11.3	2.6	0.6	0.9	0.8	2.9
	Coverage through current employer	10.5	10.5	10.5	8.9	1.6	0.0	0.0	0.0	0.0
	Eligible, not enrolled	4.2	2.6	1.6	1.2	0.4	0.2	0.5	0.4	1.5
	Employer offers, not eligible	2.5	1.8	1.1	0.7	0.3	0.2	0.3	0.2	0.7
	Employer doesn't offer	1.7	1.1	0.7	0.5	0.2	0.1	0.2	0.2	0.6
Employer Size 500+	Total	71.2	63.0	55.1	39.3	15.8	1.7	3.1	3.1	8.3
	Coverage through current employer	43.5	43.5	43.5	31.0	12.5	0.0	0.0	0.0	0.0
	Eligible, not enrolled	14.6	10.0	6.1	4.3	1.8	0.7	1.6	1.7	4.6
	Employer offers, not eligible	9.6	7.0	4.0	2.8	1.2	0.7	1.1	1.2	2.6
	Employer doesn't offer	3.5	2.4	1.5	1.1	0.4	0.2	0.4	0.3	1.0

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: Non-zero cells with under 50,000 persons are marked with a "**".

1/ Employer Sponsored Insurance is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2A. Insurance Coverage of Full Time Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2012**
(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	123.3	102.3	87.8	68.0	19.8	2.7	6.9	4.9	21.0
	Coverage through current employer	69.8	69.8	69.5	54.7	14.8	0.3	0.0	0.0	0.0
	Eligible, not enrolled	25.7	15.9	9.3	6.7	2.6	1.1	3.0	2.5	9.8
	Employer offers, not eligible	8.4	5.3	3.1	2.2	0.9	0.4	1.0	0.9	3.1
	Employer doesn't offer	19.4	11.3	5.9	4.4	1.5	0.9	2.9	1.5	8.1
Employer Size Under 50	Total	39.4	28.3	20.2	17.7	2.5	1.7	4.2	2.2	11.1
	Coverage through current employer	13.1	13.1	12.8	12.1	0.6	0.3	0.0	0.0	0.0
	Eligible, not enrolled	8.3	4.8	2.3	1.7	0.6	0.5	1.3	0.7	3.6
	Employer offers, not eligible	2.7	1.5	0.7	0.6	0.2	0.1	0.4	0.3	1.1
	Employer doesn't offer	15.3	8.9	4.3	3.2	1.1	0.8	2.5	1.2	6.4
Employer Size 50-99	Total	9.4	7.6	6.6	5.7	1.0	0.2	0.4	0.4	1.8
	Coverage through current employer	5.3	5.3	5.3	4.7	0.6	*	0.0	0.0	0.0
	Eligible, not enrolled	2.2	1.3	0.8	0.5	0.2	0.1	0.2	0.2	1.0
	Employer offers, not eligible	0.7	0.4	0.2	0.2	0.1	*	0.1	0.1	0.3
	Employer doesn't offer	1.2	0.7	0.4	0.3	0.1	0.1	0.1	0.1	0.6
Employer Size 100-499	Total	16.0	13.7	12.4	10.2	2.2	0.2	0.6	0.5	2.3
	Coverage through current employer	10.1	10.1	10.1	8.6	1.6	0.0	0.0	0.0	0.0
	Eligible, not enrolled	3.4	2.1	1.3	0.9	0.4	0.1	0.4	0.3	1.4
	Employer offers, not eligible	1.2	0.8	0.5	0.4	0.2	*	0.1	0.1	0.5
	Employer doesn't offer	1.3	0.8	0.5	0.4	0.1	0.1	0.1	0.1	0.5
Employer Size 500+	Total	58.4	52.7	48.5	34.4	14.1	0.6	1.7	1.9	5.7
	Coverage through current employer	41.3	41.3	41.3	29.4	12.0	0.0	0.0	0.0	0.0
	Eligible, not enrolled	11.7	7.8	4.9	3.5	1.4	0.4	1.2	1.3	3.9
	Employer offers, not eligible	3.8	2.6	1.6	1.1	0.6	0.2	0.4	0.4	1.2
	Employer doesn't offer	1.6	1.0	0.7	0.5	0.2	*	0.2	0.1	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: Non-zero cells with under 50,000 persons are marked with a ***.

1/ Employer Sponsored Insurance is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 Part Time Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2012**

(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	34.0	26.2	15.4	11.8	3.6	3.9	3.7	3.2	7.8
	Coverage through current employer	4.1	4.1	4.0	3.3	0.7	0.1	0.0	0.0	0.0
	Eligible, not enrolled	6.3	4.7	2.4	1.8	0.6	0.8	0.8	0.7	1.6
	Employer offers, not eligible	11.5	8.6	4.5	3.3	1.2	1.3	1.4	1.3	2.9
	Employer doesn't offer	12.1	8.8	4.4	3.4	1.1	1.7	1.5	1.2	3.3
Employer Size Under 50	Total	16.4	12.1	6.4	5.1	1.4	2.3	1.9	1.5	4.3
	Coverage through current employer	1.3	1.3	1.1	1.1	*	0.1	0.0	0.0	0.0
	Eligible, not enrolled	2.2	1.6	0.8	0.5	0.2	0.4	0.3	0.2	0.6
	Employer offers, not eligible	3.6	2.6	1.3	1.0	0.3	0.5	0.4	0.4	1.0
	Employer doesn't offer	9.3	6.7	3.3	2.5	0.8	1.3	1.2	0.9	2.6
Employer Size 50-99	Total	2.0	1.5	1.0	0.8	0.2	0.2	0.2	0.2	0.4
	Coverage through current employer	0.3	0.3	0.3	0.2	*	0.0	0.0	0.0	0.0
	Eligible, not enrolled	0.4	0.3	0.2	0.2	*	*	*	*	0.1
	Employer offers, not eligible	0.8	0.6	0.3	0.2	0.1	0.1	0.1	0.1	0.2
	Employer doesn't offer	0.5	0.3	0.2	0.2	*	*	*	*	0.1
Employer Size 100-499	Total	2.9	2.3	1.4	1.1	0.4	0.3	0.3	0.3	0.6
	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	0.8	0.6	0.3	0.2	0.1	0.1	0.1	0.1	0.2
	Employer offers, not eligible	1.3	1.0	0.6	0.4	0.2	0.2	0.1	0.1	0.3
	Employer doesn't offer	0.5	0.4	0.2	0.1	*	0.1	0.1	0.1	0.1
Employer Size 500+	Total	12.8	10.3	6.6	4.9	1.7	1.0	1.4	1.3	2.5
	Coverage through current employer	2.2	2.2	2.2	1.6	0.6	0.0	0.0	0.0	0.0
	Eligible, not enrolled	2.9	2.2	1.2	0.9	0.3	0.3	0.4	0.3	0.7
	Employer offers, not eligible	5.8	4.4	2.4	1.8	0.6	0.5	0.8	0.7	1.4
	Employer doesn't offer	1.9	1.4	0.8	0.6	0.2	0.2	0.2	0.2	0.4

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: Non-zero cells with under 50,000 persons are marked with a ***.

1/ Employer Sponsored Insurance is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

4/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2012**
(numbers in millions)

	Total	Private Sector 1/			Public Sector		
		Total	Self-Insured 2/	Fully-Insured	Total	Self-Insured 2/	Fully-Insured
U.S.	170.9	129.2	78.0	51.2	41.7	16.0	25.7
Alabama	2.6	1.8	1.1	0.7	0.8	0.3	0.5
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.2	2.4	1.6	0.8	0.8	0.3	0.5
Arkansas	1.3	1.0	0.6	0.4	0.3	0.1	0.2
California	19.2	14.6	7.2	7.4	4.6	1.5	3.1
Colorado	3.0	2.4	1.5	0.9	0.6	0.2	0.4
Connecticut	2.3	1.8	1.2	0.6	0.5	0.2	0.3
Delaware	0.5	0.4	0.3	0.1	0.1	*	0.1
District of Columbia	0.4	0.2	0.1	0.1	0.1	*	0.1
Florida	8.9	6.7	4.2	2.4	2.3	1.0	1.3
Georgia	5.1	3.8	2.5	1.4	1.2	0.6	0.7
Hawaii	0.9	0.6	0.2	0.4	0.3	*	0.2
Idaho	0.8	0.6	0.4	0.2	0.3	0.1	0.2
Illinois	7.5	6.1	3.8	2.3	1.4	0.5	0.9
Indiana	3.7	3.0	1.9	1.0	0.7	0.4	0.3
Iowa	1.7	1.4	0.9	0.5	0.4	0.2	0.2
Kansas	1.6	1.2	0.7	0.5	0.4	0.1	0.3
Kentucky	2.3	1.8	1.2	0.6	0.6	0.2	0.3
Louisiana	2.4	1.8	1.1	0.7	0.6	0.3	0.3
Maine	0.8	0.6	0.3	0.2	0.2	0.1	0.1
Maryland	3.8	2.5	1.6	0.9	1.3	0.4	1.0
Massachusetts	4.2	3.2	1.9	1.3	1.0	0.5	0.5
Michigan	6.1	4.9	3.1	1.8	1.3	0.5	0.7
Minnesota	3.3	2.7	1.9	0.8	0.6	0.3	0.3
Mississippi	1.4	1.0	0.7	0.3	0.4	0.2	0.2
Missouri	3.4	2.7	1.8	1.0	0.7	0.3	0.4
Montana	0.5	0.3	0.2	0.2	0.2	*	0.1
Nebraska	1.1	0.8	0.6	0.3	0.2	0.1	0.1
Nevada	1.4	1.1	0.7	0.5	0.3	0.1	0.2
New Hampshire	0.9	0.7	0.4	0.3	0.2	0.1	0.1
New Jersey	5.5	4.2	2.6	1.6	1.4	0.5	0.8
New Mexico	0.9	0.5	0.3	0.2	0.4	0.2	0.3
New York	10.9	7.7	3.8	3.9	3.1	1.1	2.0

Continued....

**Table 3A. All Persons with Employer Sponsored Insurance
by State, Funding Status and Sector Providing Coverage: CY 2012**
(numbers in millions)

	Total	Private Sector 1/			Public Sector		
		Total	Self-Insured 2/	Fully-Insured	Total	Self-Insured 2/	Fully-Insured
North Carolina	4.9	3.6	2.3	1.3	1.3	0.5	0.8
North Dakota	0.4	0.3	0.2	0.1	0.1	*	0.1
Ohio	6.7	5.1	3.2	1.9	1.6	0.6	1.0
Oklahoma	1.9	1.4	0.9	0.5	0.5	0.2	0.3
Oregon	2.0	1.5	1.0	0.5	0.5	0.2	0.3
Pennsylvania	7.5	6.0	3.7	2.2	1.6	0.6	0.9
Rhode Island	0.6	0.4	0.2	0.2	0.2	0.1	0.1
South Carolina	2.6	2.0	1.2	0.8	0.6	0.3	0.3
South Dakota	0.4	0.3	0.2	0.2	0.1	*	0.1
Tennessee	3.2	2.6	1.7	0.9	0.7	0.3	0.4
Texas	12.9	9.9	6.3	3.5	3.1	1.3	1.8
Utah	1.8	1.3	0.7	0.6	0.4	0.1	0.3
Vermont	0.4	0.2	0.1	0.1	0.1	*	0.1
Virginia	4.9	3.4	2.1	1.2	1.6	0.3	1.2
Washington	3.9	3.1	1.8	1.3	0.9	0.3	0.6
West Virginia	1.0	0.7	0.4	0.2	0.3	0.1	0.2
Wisconsin	3.4	2.6	1.6	1.0	0.8	0.3	0.4
Wyoming	0.3	0.2	0.1	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: Non-zero cells with under 50,000 persons are marked with a "**".

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 2010 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, March 2014, at <http://www.dol.gov/ebsa/pdf/ACA-ARC2013-Revised.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 2012**

(numbers in millions)

	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	170.9	93.9	76.9	129.2	78.0	51.2	41.7	16.0	25.7
Less than 10 Employees	11.8	1.5	10.3	11.4	1.4	10.0	0.3	*	0.3
10 - 49 Employees	15.9	2.3	13.6	14.8	2.2	12.6	1.1	0.1	1.0
50 - 99 Employees	11.1	1.8	9.4	9.8	1.6	8.1	1.4	0.2	1.2
100 - 499 Employees	22.7	8.8	13.9	18.9	7.8	11.1	3.8	0.9	2.8
500 - 999 Employees	11.8	5.4	6.4	9.1	4.6	4.6	2.7	0.8	1.8
1,000 or more Employees	97.7	74.2	23.4	65.2	60.4	4.8	32.5	13.9	18.6

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

NOTE: Non-zero cells with under 50,000 persons are marked with a "**".

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 2010 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, March 2014, at <http://www.dol.gov/ebsa/pdf/ACA-ARC2013-Revised.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 2012**

(numbers in millions)

	Total	Private Sector 1/			Public Sector		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
U.S.	170.9	129.2	65.8	63.4	41.7	22.6	19.1
Alabama	2.6	1.8	1.0	0.9	0.8	0.4	0.3
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.2	2.4	1.2	1.2	0.8	0.4	0.4
Arkansas	1.3	1.0	0.5	0.4	0.3	0.2	0.1
California	19.2	14.6	7.3	7.3	4.6	2.4	2.3
Colorado	3.0	2.4	1.1	1.3	0.6	0.3	0.3
Connecticut	2.3	1.8	0.9	0.9	0.5	0.2	0.2
Delaware	0.5	0.4	0.2	0.2	0.1	0.1	0.1
District of Columbia	0.4	0.2	0.2	0.1	0.1	0.1	*
Florida	8.9	6.7	3.6	3.0	2.3	1.4	0.9
Georgia	5.1	3.8	1.9	1.9	1.2	0.7	0.6
Hawaii	0.9	0.6	0.4	0.2	0.3	0.1	0.1
Idaho	0.8	0.6	0.3	0.3	0.3	0.1	0.1
Illinois	7.5	6.1	3.1	3.0	1.4	0.8	0.6
Indiana	3.7	3.0	1.5	1.5	0.7	0.4	0.3
Iowa	1.7	1.4	0.7	0.7	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	0.9	0.8	0.6	0.3	0.2
Louisiana	2.4	1.8	0.9	0.9	0.6	0.3	0.3
Maine	0.8	0.6	0.3	0.3	0.2	0.1	0.1
Maryland	3.8	2.5	1.3	1.2	1.3	0.7	0.7
Massachusetts	4.2	3.2	1.5	1.7	1.0	0.5	0.5
Michigan	6.1	4.9	2.4	2.5	1.3	0.6	0.6
Minnesota	3.3	2.7	1.4	1.4	0.6	0.3	0.3
Mississippi	1.4	1.0	0.5	0.5	0.4	0.2	0.1
Missouri	3.4	2.7	1.4	1.3	0.7	0.4	0.3
Montana	0.5	0.3	0.2	0.2	0.2	0.1	0.1
Nebraska	1.1	0.8	0.4	0.4	0.2	0.1	0.1
Nevada	1.4	1.1	0.6	0.5	0.3	0.2	0.2
New Hampshire	0.9	0.7	0.3	0.3	0.2	0.1	0.1
New Jersey	5.5	4.2	1.9	2.2	1.4	0.7	0.7
New Mexico	0.9	0.5	0.3	0.2	0.4	0.2	0.2
New York	10.9	7.7	4.1	3.6	3.1	1.6	1.5

Continued....

**Table 3C. All Persons with Employer Sponsored Insurance
by State, Policyholder Status and Sector Providing Coverage: CY 2012**

(numbers in millions)

	Total	Private Sector 1/			Public Sector		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
North Carolina	4.9	3.6	1.8	1.7	1.3	0.8	0.5
North Dakota	0.4	0.3	0.2	0.2	0.1	0.1	0.1
Ohio	6.7	5.1	2.6	2.5	1.6	0.8	0.8
Oklahoma	1.9	1.4	0.7	0.7	0.5	0.3	0.2
Oregon	2.0	1.5	0.8	0.7	0.5	0.3	0.2
Pennsylvania	7.5	6.0	3.1	2.9	1.6	0.8	0.7
Rhode Island	0.6	0.4	0.2	0.2	0.2	0.1	0.1
South Carolina	2.6	2.0	1.0	1.0	0.6	0.4	0.2
South Dakota	0.4	0.3	0.2	0.2	0.1	0.1	*
Tennessee	3.2	2.6	1.3	1.3	0.7	0.3	0.3
Texas	12.9	9.9	5.1	4.7	3.1	1.8	1.3
Utah	1.8	1.3	0.5	0.8	0.4	0.2	0.2
Vermont	0.4	0.2	0.1	0.1	0.1	0.1	0.1
Virginia	4.9	3.4	1.7	1.6	1.6	0.8	0.8
Washington	3.9	3.1	1.7	1.4	0.9	0.5	0.4
West Virginia	1.0	0.7	0.4	0.3	0.3	0.2	0.2
Wisconsin	3.4	2.6	1.2	1.4	0.8	0.4	0.4
Wyoming	0.3	0.2	0.1	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: Non-zero cells with under 50,000 persons are marked with a ***.

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 2012**
(numbers in millions)

	Total	Self-Insured 1/			Fully-Insured		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
U.S.	170.9	93.9	48.0	45.9	76.9	40.3	36.6
Alabama	2.6	1.4	0.8	0.6	1.2	0.6	0.6
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.2	1.9	0.9	1.0	1.3	0.7	0.6
Arkansas	1.3	0.7	0.4	0.3	0.6	0.3	0.2
California	19.2	8.8	4.3	4.4	10.5	5.3	5.1
Colorado	3.0	1.7	0.8	0.9	1.3	0.6	0.7
Connecticut	2.3	1.4	0.6	0.7	0.9	0.5	0.5
Delaware	0.5	0.3	0.2	0.2	0.2	0.1	0.1
District of Columbia	0.4	0.1	0.1	*	0.2	0.2	0.1
Florida	8.9	5.2	2.8	2.3	3.7	2.2	1.6
Georgia	5.1	3.0	1.6	1.5	2.0	1.1	1.0
Hawaii	0.9	0.2	0.1	0.1	0.6	0.3	0.3
Idaho	0.8	0.5	0.2	0.2	0.4	0.2	0.2
Illinois	7.5	4.3	2.1	2.1	3.2	1.7	1.5
Indiana	3.7	2.3	1.1	1.2	1.4	0.7	0.7
Iowa	1.7	1.0	0.5	0.5	0.7	0.4	0.3
Kansas	1.6	0.8	0.4	0.4	0.7	0.4	0.4
Kentucky	2.3	1.4	0.8	0.7	0.9	0.5	0.4
Louisiana	2.4	1.4	0.7	0.7	1.0	0.5	0.5
Maine	0.8	0.4	0.2	0.2	0.4	0.2	0.2
Maryland	3.8	2.0	1.0	1.0	1.9	1.0	0.9
Massachusetts	4.2	2.4	1.1	1.3	1.8	0.9	0.9
Michigan	6.1	3.6	1.8	1.8	2.5	1.2	1.3
Minnesota	3.3	2.2	1.1	1.1	1.2	0.6	0.6
Mississippi	1.4	0.9	0.4	0.4	0.5	0.3	0.2
Missouri	3.4	2.1	1.1	1.0	1.4	0.8	0.6
Montana	0.5	0.2	0.1	0.1	0.3	0.2	0.1
Nebraska	1.1	0.7	0.3	0.3	0.4	0.2	0.2
Nevada	1.4	0.8	0.4	0.4	0.6	0.4	0.3
New Hampshire	0.9	0.5	0.2	0.2	0.4	0.2	0.2
New Jersey	5.5	3.1	1.4	1.6	2.4	1.2	1.3
New Mexico	0.9	0.5	0.3	0.2	0.5	0.3	0.2
New York	10.9	4.9	2.6	2.4	5.9	3.1	2.8

Continued....

**Table 3D. All Persons with Employer Sponsored Insurance
by State, Funding Status and Policyholder Status: CY 2012**

(numbers in millions)

	Total	Self-Insured 1/			Fully-Insured		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
North Carolina	4.9	2.8	1.5	1.3	2.0	1.1	1.0
North Dakota	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Ohio	6.7	3.8	2.0	1.8	2.9	1.4	1.5
Oklahoma	1.9	1.1	0.6	0.5	0.8	0.5	0.3
Oregon	2.0	1.1	0.6	0.5	0.9	0.5	0.4
Pennsylvania	7.5	4.4	2.3	2.1	3.2	1.6	1.5
Rhode Island	0.6	0.3	0.1	0.1	0.3	0.1	0.2
South Carolina	2.6	1.5	0.8	0.7	1.1	0.6	0.5
South Dakota	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Tennessee	3.2	2.0	1.0	1.0	1.3	0.7	0.6
Texas	12.9	7.6	4.0	3.6	5.3	2.9	2.4
Utah	1.8	0.9	0.3	0.5	0.9	0.4	0.5
Vermont	0.4	0.1	0.1	0.1	0.2	0.1	0.1
Virginia	4.9	2.4	1.2	1.2	2.5	1.3	1.2
Washington	3.9	2.0	1.1	0.9	1.9	1.0	0.9
West Virginia	1.0	0.5	0.3	0.2	0.5	0.2	0.2
Wisconsin	3.4	1.9	0.9	1.0	1.5	0.7	0.8
Wyoming	0.3	0.2	0.1	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: Non-zero cells with under 50,000 persons are marked with a "**".

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 2010 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, March 2014, at <http://www.dol.gov/ebsa/pdf/ACA-ARC2013-Revised.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 2012**
(numbers in millions)

Employer Size	Sector 1/ Policyholders	Total	Current Employer	Former Employer		
				Total	COBRA	Retiree
Total	Total	170.9	150.5	20.4	4.2	16.1
	Private Sector	129.2	118.6	10.6	3.5	7.1
	Public Sector	41.7	31.9	9.8	0.7	9.1
	Dependents 2/ Private Sector	88.3	74.0	14.4	2.6	11.7
	Public Sector	65.8	58.5	7.3	2.2	5.0
	Dependents 2/ Private Sector	22.6	15.5	7.1	0.4	6.7
	Public Sector	82.5	76.6	6.0	1.6	4.4
	Dependents 2/ Public Sector	63.4	60.1	3.3	1.3	2.0
Less than 50 Employees	Total	27.6	27.4	0.2	*	0.2
	Private Sector	26.2	26.0	0.2	*	0.2
	Public Sector	1.4	1.4	*	*	*
	Dependents 2/ Private Sector	14.5	14.3	0.1	*	0.1
	Public Sector	13.8	13.7	0.1	*	0.1
	Dependents 2/ Private Sector	0.7	0.7	*	*	*
	Public Sector	13.1	13.1	0.1	*	*
	Dependents 2/ Public Sector	12.4	12.4	0.1	*	*
50 - 99 Employees	Total	11.1	10.6	0.5	0.1	0.4
	Private Sector	9.8	9.4	0.4	0.1	0.3
	Public Sector	1.4	1.3	0.1	0.0	0.1
	Dependents 2/ Private Sector	5.9	5.5	0.3	0.1	0.3
	Public Sector	5.2	4.9	0.3	0.1	0.2
	Dependents 2/ Private Sector	0.7	0.6	0.1	0.0	0.1
	Public Sector	5.3	5.1	0.1	0.1	0.1
	Dependents 2/ Public Sector	4.6	4.5	0.1	0.1	0.1
100 - 499 Employees	Total	22.7	21.3	1.3	0.4	0.9
	Private Sector	18.9	17.9	1.0	0.4	0.6
	Public Sector	3.8	3.4	0.4	*	0.4
	Dependents 2/ Private Sector	11.5	10.5	1.0	0.3	0.7
	Public Sector	9.6	8.9	0.7	0.3	0.4
	Dependents 2/ Private Sector	1.9	1.6	0.3	*	0.3
	Public Sector	11.2	10.8	0.4	0.1	0.2
	Dependents 2/ Public Sector	9.3	9.0	0.3	0.1	0.2
Dependents 2/ Public Sector	1.8	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 2012**
(numbers in millions)

Employer Size	Sector 1/	Total	Current Employer	Former Employer		
				Total	COBRA	Retiree
500 - 999 Employees	Total	11.8	9.6	2.2	0.7	1.4
	Private Sector	9.1	7.6	1.5	0.7	0.8
	Public Sector	2.7	1.9	0.7	0.1	0.6
	Policyholders	6.1	4.5	1.5	0.5	1.1
	Private Sector	4.6	3.6	1.0	0.4	0.6
	Public Sector	1.5	0.9	0.5	0.1	0.5
	Dependents 2/	5.7	5.0	0.7	0.3	0.4
	Public Sector	4.5	4.0	0.5	0.2	0.2
1,000 or more Employees	Total	97.7	81.5	16.1	2.9	13.3
	Private Sector	65.2	57.6	7.6	2.3	5.3
	Public Sector	32.5	23.9	8.6	0.6	8.0
	Policyholders	50.4	39.0	11.4	1.8	9.6
	Private Sector	32.6	27.4	5.2	1.4	3.8
	Public Sector	17.8	11.7	6.2	0.3	5.8
	Dependents 2/	47.3	42.5	4.7	1.1	3.6
	Public Sector	32.6	30.2	2.4	0.9	1.5
	Public Sector	14.7	12.3	2.4	0.2	2.1

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

NOTE: Non-zero cells with under 50,000 persons are marked with a ""*"".

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 2012**

(numbers in millions)

	Total	Private Sector 1/				
		Total Private	HMO 2/	PPO 3/	POS 4/	HDED 5/
U.S.	170.9	129.2	18.0	76.0	10.2	25.1
Alabama	2.6	1.8	0.1	0.9	0.1	0.7
Alaska	0.4	0.2	*	0.1	*	0.1
Arizona	3.2	2.4	0.2	1.6	0.2	0.4
Arkansas	1.3	1.0	0.1	0.6	0.1	0.2
California	19.2	14.6	4.6	6.9	1.0	2.2
Colorado	3.0	2.4	0.3	1.5	0.2	0.5
Connecticut	2.3	1.8	0.2	1.0	0.1	0.4
Delaware	0.5	0.4	0.1	0.2	*	0.1
District of Columbia	0.4	0.2	*	0.1	*	*
Florida	8.9	6.7	0.9	4.2	0.4	1.1
Georgia	5.1	3.8	0.5	2.4	0.2	0.7
Hawaii	0.9	0.6	0.2	0.2	*	0.2
Idaho	0.8	0.6	*	0.4	0.1	0.1
Illinois	7.5	6.1	0.9	3.7	0.5	0.9
Indiana	3.7	3.0	0.2	2.0	0.3	0.6
Iowa	1.7	1.4	0.1	0.9	0.1	0.3
Kansas	1.6	1.2	0.1	0.6	0.1	0.4
Kentucky	2.3	1.8	0.1	1.1	0.2	0.4
Louisiana	2.4	1.8	0.1	1.2	0.2	0.3
Maine	0.8	0.6	0.1	0.3	0.1	0.2
Maryland	3.8	2.5	0.3	1.6	0.2	0.4
Massachusetts	4.2	3.2	0.9	1.5	0.2	0.6
Michigan	6.1	4.9	0.8	2.6	0.3	1.2
Minnesota	3.3	2.7	0.2	1.6	0.2	0.8
Mississippi	1.4	1.0	*	0.6	0.1	0.3
Missouri	3.4	2.7	0.1	1.9	0.2	0.5
Montana	0.5	0.3	*	0.2	*	0.1
Nebraska	1.1	0.8	*	0.6	0.1	0.1
Nevada	1.4	1.1	0.2	0.7	0.1	0.1
New Hampshire	0.9	0.7	0.1	0.4	0.1	0.1
New Jersey	5.5	4.2	0.6	2.4	0.4	0.8
New Mexico	0.9	0.5	0.1	0.3	0.1	0.1
New York	10.9	7.7	1.6	3.7	0.6	1.8

Continued....

**Table 5A. All Persons with Employer Sponsored Insurance
by State and Plan Type (Private Sector Only): CY 2012**

(numbers in millions)

	Total	Private Sector 1/				
		Total Private	HMO 2/	PPO 3/	POS 4/	HDED 5/
North Carolina	4.9	3.6	0.3	2.3	0.3	0.7
North Dakota	0.4	0.3	*	0.1	*	0.2
Ohio	6.7	5.1	0.4	3.3	0.6	0.9
Oklahoma	1.9	1.4	0.1	0.9	0.1	0.3
Oregon	2.0	1.5	0.2	0.9	0.1	0.3
Pennsylvania	7.5	6.0	0.7	3.6	0.5	1.2
Rhode Island	0.6	0.4	0.1	0.2	*	0.2
South Carolina	2.6	2.0	0.1	1.2	0.2	0.4
South Dakota	0.4	0.3	*	0.2	*	0.1
Tennessee	3.2	2.6	0.2	1.8	0.2	0.4
Texas	12.9	9.9	0.8	6.3	0.8	2.0
Utah	1.8	1.3	0.2	0.7	0.1	0.3
Vermont	0.4	0.2	*	0.1	*	0.1
Virginia	4.9	3.4	0.5	1.9	0.2	0.7
Washington	3.9	3.1	0.3	2.0	0.3	0.4
West Virginia	1.0	0.7	*	0.4	*	0.2
Wisconsin	3.4	2.6	0.3	1.7	0.3	0.4
Wyoming	0.3	0.2	*	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: Non-zero cells with under 50,000 persons are marked with a "**".

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 2012**
(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	Total	93.9	8.5	66.1	3.1	16.2	76.9	18.3	36.4	8.3	13.9	170.9	26.8	102.6	11.4	30.1
	Less than 50 employees	3.8	0.5	2.2	0.2	1.0	23.9	3.8	9.7	4.5	5.9	27.6	4.2	11.9	4.7	6.8
	50 - 99 employees	1.8	0.2	1.1	0.1	0.3	9.4	1.3	3.8	1.8	2.4	11.1	1.5	5.0	1.9	2.7
	100 - 499 employees	8.8	0.3	6.6	0.6	1.3	13.9	3.1	6.5	1.0	3.3	22.7	3.4	13.1	1.6	4.6
	500 - 999 employees	5.4	0.2	4.1	0.3	0.7	6.4	1.4	3.0	0.4	1.6	11.8	1.6	7.1	0.8	2.3
	1,000 or more employees	74.2	7.4	52.1	1.9	12.9	23.4	8.7	13.5	0.5	0.8	97.7	16.0	65.6	2.4	13.7
Private Sector	Total	78.0	7.2	54.5	2.8	13.5	51.2	10.7	21.5	7.4	11.6	129.2	18.0	76.0	10.2	25.1
	Less than 50 employees	3.6	0.4	2.1	0.2	0.9	22.6	3.6	9.1	4.4	5.5	26.2	4.1	11.1	4.6	6.5
	50 - 99 employees	1.6	0.2	1.0	0.1	0.3	8.1	1.2	3.3	1.7	2.0	9.8	1.4	4.4	1.8	2.2
	100 - 499 employees	7.8	0.3	5.8	0.6	1.2	11.1	2.4	5.2	0.8	2.6	18.9	2.7	11.0	1.4	3.8
	500 - 999 employees	4.6	0.2	3.4	0.3	0.6	4.6	1.0	2.0	0.3	1.2	9.1	1.2	5.5	0.6	1.8
	1,000 or more employees	60.4	6.1	42.1	1.6	10.5	4.8	2.4	1.8	0.2	0.3	65.2	8.6	44.0	1.9	10.8
Public Sector	Total	16.0	1.3	11.6	0.3	2.7	25.7	7.6	15.0	0.8	2.3	41.7	8.9	26.6	1.2	5.1
	Less than 50 employees	0.2	*	0.1	*	*	1.2	0.2	0.6	0.1	0.3	1.4	0.2	0.7	0.1	0.4
	50 - 99 employees	0.2	*	0.1	*	*	1.2	0.2	0.5	0.2	0.4	1.4	0.2	0.6	0.2	0.5
	100 - 499 employees	0.9	*	0.7	*	0.1	2.8	0.6	1.3	0.2	0.7	3.8	0.7	2.1	0.2	0.8
	500 - 999 employees	0.8	*	0.7	*	0.1	1.8	0.4	0.9	0.1	0.4	2.7	0.4	1.6	0.1	0.5
	1,000 or more employees	13.9	1.2	10.0	0.2	2.4	18.6	6.2	11.6	0.3	0.5	32.5	7.5	21.6	0.5	2.9

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

NOTE: Non-zero cells with under 50,000 persons are marked with a ***.

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 2010 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, March 2014, at <http://www.dol.gov/ebsa/pdf/ACA-ARC2013-Revised.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
by Sector Providing Coverage, Funding and Union Membership: CY 2012**
(numbers in millions)

	Total ESI	Private Sector			Public Sector		
		Total	Self-Insured	Fully-Insured	Total	Self-Insured	Fully-Insured
Total ESI	165.4	123.6	77.2	46.5	41.8	16.0	25.8
Union	35.7	17.4	12.3	5.1	18.4	7.3	11.0
Not Union	129.7	106.3	64.9	41.3	23.4	8.7	14.7
Total Current Employer	145.0	113.1	68.9	44.2	32.0	12.3	19.7
Union	27.0	13.5	9.1	4.4	13.5	5.3	8.2
Not Union	118.1	99.5	59.8	39.7	18.5	7.0	11.5
Total Former Employer: COBRA	4.2	3.5	2.6	0.9	0.7	0.3	0.4
Union	1.1	0.7	0.5	0.2	0.4	0.2	0.2
Not Union	3.1	2.8	2.1	0.7	0.3	0.1	0.2
Total Former Employer: Retiree	16.1	7.1	5.6	1.4	9.1	3.4	5.7
Union	7.7	3.2	2.7	0.5	4.5	1.9	2.6
Not Union	8.5	3.9	3.0	0.9	4.6	1.5	3.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be 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.

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 ESI Policyholders
by Sector of Employer Providing Coverage, Funding and Plan Type: CY 2012**

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	33.5	0.880	25.0	0.867	58.5	0.874
	HMO 3/	3.2	0.915	5.1	0.921	8.3	0.919
	PPO 4/	23.5	0.890	10.4	0.873	33.9	0.884
	POS 5/	1.2	0.899	3.8	0.867	5.0	0.875
	HDED 6/	5.7	0.816	5.7	0.807	11.4	0.812
Public Sector	Total	6.1	0.864	9.4	0.898	15.5	0.884
	HMO 3/	0.5	0.955	2.7	0.947	3.3	0.948
	PPO 4/	4.4	0.865	5.3	0.884	9.7	0.876
	POS 5/	0.1	0.945	0.4	0.911	0.5	0.920
	HDED 6/	1.0	0.803	0.9	0.824	2.0	0.813

NOTE: Active Employer Sponsored Insurance (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.

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 2010 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, March 2014, at <http://www.dol.gov/ebsa/pdf/ACA-ARC2013-Revised.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 2012**

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)	311.1	263.2	79.8	80.2	45.9	7.3	10.5	39.4	48.0
	% of Population	100%	85%	26%	26%	15%	2%	3%	13%	15%
	Out of Pocket Spending	\$ 728	\$ 778	\$ 940	\$ 664	\$ 1,129	\$ 1,269	\$ 679	\$ 207	\$ 454
< 18	Population (millions)	74.2	67.6	0.4	40.7	0.7	0.1	3.3	22.4	6.6
	% of Population	100%	91%	0%	55%	1%	0%	5%	30%	9%
	Out of Pocket Spending	\$ 312	\$ 309	\$ 359	\$ 409	\$ 94	\$ 1,028	\$ 558	\$ 92	\$ 340
18-25	Population (millions)	34.2	25.4	4.7	11.1	0.4	0.6	4.3	4.4	8.8
	% of Population	100%	74%	14%	32%	1%	2%	13%	13%	26%
	Out of Pocket Spending	\$ 447	\$ 513	\$ 478	\$ 664	\$ 283	\$ 1,170	\$ 480	\$ 134	\$ 257
26-54	Population (millions)	121.0	94.4	54.3	20.7	3.5	4.1	2.1	9.6	26.5
	% of Population	100%	78%	45%	17%	3%	3%	2%	8%	22%
	Out of Pocket Spending	\$ 767	\$ 845	\$ 869	\$ 916	\$ 863	\$ 1,043	\$ 1,133	\$ 401	\$ 490
55-64	Population (millions)	38.5	33.1	17.6	6.2	3.6	2.2	0.6	2.9	5.4
	% of Population	100%	86%	46%	16%	9%	6%	2%	8%	14%
	Out of Pocket Spending	\$ 1,126	\$ 1,194	\$ 1,235	\$ 1,309	\$ 1,075	\$ 1,580	\$ 1,194	\$ 551	\$ 710
65+	Population (millions)	43.3	42.6	2.9	1.5	37.7	0.2	0.1	0.2	0.6
	% of Population	100%	99%	7%	4%	87%	1%	0%	0%	1%
	Out of Pocket Spending	\$ 1,198	\$ 1,205	\$ 1,289	\$ 1,411	\$ 1,186	\$ 2,584	\$ 550	\$ 330	\$ 733

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).

1/ Employer Sponsored Insurance (ESI) is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 2012**

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)	260.0	224.9	74.1	68.2	41.6	6.8	8.9	25.2	35.1
	% of Population	100%	86%	29%	26%	16%	3%	3%	10%	14%
	Out of Pocket Spending	\$ 871	\$ 910	\$ 1,012	\$ 780	\$ 1,246	\$ 1,370	\$ 796	\$ 323	\$ 620
< 18	Population (millions)	53.7	49.6	0.3	33.3	0.4	0.1	2.7	12.8	4.1
	% of Population	100%	92%	0%	62%	1%	0%	5%	24%	8%
	Out of Pocket Spending	\$ 431	\$ 422	\$ 504	\$ 500	\$ 166	\$ 1,105	\$ 686	\$ 160	\$ 540
18-25	Population (millions)	26.0	20.0	3.9	8.9	0.2	0.5	3.7	2.7	6.0
	% of Population	100%	77%	15%	34%	1%	2%	14%	11%	23%
	Out of Pocket Spending	\$ 588	\$ 651	\$ 573	\$ 822	\$ 424	\$ 1,314	\$ 563	\$ 214	\$ 379
26-54	Population (millions)	105.4	85.2	50.5	18.8	3.0	3.8	1.9	7.3	20.1
	% of Population	100%	81%	48%	18%	3%	4%	2%	7%	19%
	Out of Pocket Spending	\$ 881	\$ 936	\$ 935	\$ 1,010	\$ 1,015	\$ 1,132	\$ 1,251	\$ 529	\$ 646
55-64	Population (millions)	35.2	30.7	16.7	5.8	3.3	2.1	0.5	2.3	4.5
	% of Population	100%	87%	48%	16%	9%	6%	1%	7%	13%
	Out of Pocket Spending	\$ 1,232	\$ 1,286	\$ 1,296	\$ 1,399	\$ 1,200	\$ 1,672	\$ 1,338	\$ 691	\$ 857
65+	Population (millions)	39.7	39.3	2.8	1.4	34.7	0.2	0.1	0.1	0.4
	% of Population	100%	99%	7%	4%	87%	1%	0%	0%	1%
	Out of Pocket Spending	\$ 1,306	\$ 1,308	\$ 1,362	\$ 1,526	\$ 1,288	\$ 2,848	\$ 665	\$ 448	\$ 1,157

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).

1/ Employer Sponsored Insurance (ESI) is defined to be 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/ Other Private Insurance (OPHI) includes any other non government health insurance including but not limited to individual private insurance.

3/ Other Public Coverage includes but is not limited to Medicaid, the State Children's Health Insurance Program (SCHIP), 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 Spending for Persons with Employer Sponsored Insurance
by Age and Plan Type: CY 2012**

Age	Plan Type	Total Employer Sponsored Insurance 1/		Employer Sponsored Insurance with OOP Spending 1/	
		Policyholders	Dependents	Policyholders	Dependents
All Ages	Total	\$ 986	\$ 685	\$ 1,059	\$ 803
	HMO 2/	\$ 1,024	\$ 689	\$ 1,097	\$ 813
	PPO 3/	\$ 986	\$ 688	\$ 1,061	\$ 806
	POS 4/	\$ 1,001	\$ 699	\$ 1,069	\$ 828
	HDED 5/	\$ 947	\$ 667	\$ 1,013	\$ 778
< 18	Total	\$ 359	\$ 409	\$ 504	\$ 500
	HMO 2/	\$ 367	\$ 344	\$ 534	\$ 425
	PPO 3/	\$ 289	\$ 412	\$ 421	\$ 503
	POS 4/	\$ 204	\$ 435	\$ 279	\$ 542
	HDED 5/	\$ 702	\$ 443	\$ 860	\$ 539
18-25	Total	\$ 478	\$ 667	\$ 573	\$ 824
	HMO 2/	\$ 435	\$ 969	\$ 521	\$ 1,209
	PPO 3/	\$ 499	\$ 657	\$ 599	\$ 812
	POS 4/	\$ 321	\$ 568	\$ 370	\$ 707
	HDED 5/	\$ 501	\$ 475	\$ 604	\$ 581
26-54	Total	\$ 873	\$ 918	\$ 940	\$ 1,013
	HMO 2/	\$ 929	\$ 930	\$ 999	\$ 1,027
	PPO 3/	\$ 865	\$ 905	\$ 934	\$ 1,001
	POS 4/	\$ 941	\$ 897	\$ 1,009	\$ 991
	HDED 5/	\$ 825	\$ 961	\$ 882	\$ 1,046
55-64	Total	\$ 1,244	\$ 1,300	\$ 1,305	\$ 1,392
	HMO 2/	\$ 1,231	\$ 1,212	\$ 1,283	\$ 1,327
	PPO 3/	\$ 1,267	\$ 1,288	\$ 1,332	\$ 1,375
	POS 4/	\$ 1,158	\$ 1,542	\$ 1,216	\$ 1,638
	HDED 5/	\$ 1,209	\$ 1,323	\$ 1,265	\$ 1,404
65+	Total	\$ 1,369	\$ 1,449	\$ 1,429	\$ 1,543
	HMO 2/	\$ 1,384	\$ 1,324	\$ 1,448	\$ 1,392
	PPO 3/	\$ 1,340	\$ 1,528	\$ 1,399	\$ 1,626
	POS 4/	\$ 1,508	\$ 1,637	\$ 1,547	\$ 1,827
	HDED 5/	\$ 1,424	\$ 1,173	\$ 1,492	\$ 1,254

NOTE: Means do not match those shown in the ESI columns of Tables 8A and 8B due to the inclusion in this table of persons with 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/ Employer Sponsored Insurance (ESI) is defined to be 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.

DATA SOURCES, UPDATES AND REVISIONS

This section briefly outlines the process and data sources used in the creation of the March 2013 Auxiliary Data. Greater detail on the current imputations and edits performed in order to provide estimates of employer sponsored insurance for calendar year (CY) 2012 can be found in “Technical Appendix: March 2013 CPS Auxiliary Data.”¹³

The starting data set is the March 2013 Annual Social and Economic Supplement (ASEC) to the Current Population Survey. The following enhancements were then made:

- While the March CPS reports if a person has employer sponsored insurance, it does not give information on whether employers provide health insurance nor does it distinguish between coverage from current or former employers. It was therefore necessary to impute whether ESI coverage was from a current or former employer and for workers, whether health insurance was offered by their employer. This was done using the Medical Expenditure Panel Survey, Household Component (MEPS-HC) for years 2010 through 2012.
- For persons with coverage from a former employer, it was necessary to impute both sector and size of the employer

¹³ Cathi Callahan and Rodelle Williams, Actuarial Research Corporation, 2014.

providing the coverage. This was done using the most recent three years of data (2010-2012) from the Medical Expenditure Panel Survey, Insurance Component (MEPS-IC), as provided by the Agency for Healthcare Research and Quality (AHRQ).

- Data from both the MEPS-IC and partitions and trends from the Kaiser/HRET Employer Health Benefits Surveys were used to impute funding status¹⁴ and type of coverage for those with ESI as well as to help partition coverage from a former employer into retiree and COBRA. Data from the Federal Employees Health Benefits Program (FEHBP) was used to provide estimates at the Federal level.
- Data from Wave 6 of the 2008 panel of the Survey of Income and Program Participation (SIPP)¹⁵ was used to provide the basis of the union imputation for those with coverage from a former employer (either COBRA or retiree). The March CPS was used for those with coverage from a current employer, as one quarter of workers were asked about union membership and coverage.
- Prior actuarial analysis done for EBSA using the National Compensation Survey (2005) was used, along with health plan details from the 2006 through 2012 Kaiser/HRET

¹⁴ 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.

¹⁵ 2010 data.

Employer Health Benefits Survey, to calculate actuarial values and impute these values 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.