

Health Insurance Coverage Bulletin

Abstract of Auxiliary Data for the March 2017 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 includes limited information on health expenditures and the cost of health insurance.² However, several important characteristics of health insurance that are particularly relevant to employer sponsored coverage are not contained in the March CPS.

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

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

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.⁴ EBSA imputes variables first for those covered by employer sponsored insurance (ESI) on whether coverage is from a current or former employer, and then, for all workers, whether their employer offers health insurance coverage.⁵ EBSA then imputes size and sector for those determined 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 also imputed. Finally, actuarial value, which represents the average value of an active employer sponsored health insurance plan, is imputed to active employees with health insurance in their own name.

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

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

³ The CPS is a self-reported household survey and there is some concern that respondents are referencing the size of the establishment they work for

instead of the size of the actual employer when asked about employer size. While it is impossible to validate employer size in the private sector, EBSA does assign all state and Federal workers to the largest employer size (1000 or more) in its dataset.

⁴ The CPS does capture point-in-time offers of coverage for March 2017, but the Auxiliary Data is based on CY 2016 employment and insurance variables.

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

Individuals can have multiple sources of coverage in a given year, and so EBSA creates tables that assign individuals to a “primary” source of coverage for the year based on the following hierarchy: ESI,⁶ Medicare, private non-group coverage, Medicaid or CHIP, and military or other public.⁷ 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 2014 – 2016 Medical Expenditure Panel Survey Insurance Component (MEPS-IC) 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.⁸ Plan type imputations use information from both the MEPS-IC and the 2016 KFF/HRET Employer Health Benefits Survey, as well as Federal Employees Health Benefits (FEHB) program data for the federal sector. The union imputations are based on both the CPS itself for those for 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) updated with trends in union coverage from both the National Health Interview Survey (NHIS) and later SIPP survey questions.⁹ Actuarial values are based on the National Compensation Survey (NCS) as well as plan level data from the 2016 KFF/HRET Employer Health Benefits Survey.

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.¹⁰ It is also worth noting that state estimates as shown below do not match those reported by Census (“Health Insurance Coverage in the United States: 2016”). Census uses the American Community Survey (ACS) for its state-level estimates which has a larger sample size and can give better estimates for smaller geographical areas.

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

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

⁸ Note that this partition differs in concept from the estimates in the *Group Health Plans Report* by representing the total ESI covered population rather than only the subset that were subject to reporting on a Form 5500. See

Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2016, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2017-appendix-a.pdf>.

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

¹⁰ See technical appendix at <https://www.dol.gov/agencies/ebsa/researchers/data/auxiliary-data>.

HIGHLIGHTS

- The total population represented by the March 2017 CPS was 320.4 million persons. Of these, 292.3 million (91 percent) were covered by at least one form of insurance in 2016, either private or public, with the remaining 28.1 million (9 percent) classified as uninsured. Of the insured, 178.5 million (61 percent) had employer sponsored insurance (ESI), 53.4 million (18 percent) had Medicare, 52.0 million (18 percent) had some type of other private coverage, and 75.4 million (26 percent) had some type of other public coverage, which includes both Medicaid and CHIP.¹¹
- Of the 271.1 million people under age 65, 243.6 million (90 percent) were insured in 2016 and 27.5 million (10 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 2016, 169.0 million (58 percent) persons had ESI as their primary source of coverage, 50.2 million (17 percent) had Medicare, 25.0 million (9 percent) had non-ESI private coverage and 48.1 million (16 percent) had some type of other public coverage.
- Of 164.8 million workers reported in the March 2017 CPS, 77.7 million (47 percent) had coverage in 2016 through a current employer and another 31.5 million (19 percent) were eligible but not enrolled in their

employer’s plan (with 16 percent of these being uninsured).

- In addition, for those 55.5 million who were not offered coverage by their employer (either due to being ineligible or the employer not offering coverage), 22 percent were uninsured.
- The offer rates of health insurance are higher for workers in larger employers, and the share of uninsured workers drops precipitously by size.¹²
- Self-insured coverage is more prevalent in the private sector. Moreover, the rate of self-insurance increases with employer size.
- Of 178.5 million persons with ESI in calendar year 2016, 159.3 million (89 percent) had coverage through a current employer (either as a policyholder or dependent), 3.2 million (2 percent) had coverage through COBRA and 16.0 million (9 percent) had retiree coverage. Of the 90.1 million who had coverage in their own name (as a policyholder), 77.7 million (86 percent) had coverage from a current employer, 1.7 million (2 percent) had COBRA and 10.7 million (12 percent) had retiree coverage. Unsurprisingly, both COBRA and retiree coverage were heavily concentrated in larger employer sponsored plans.
- 53 percent of those covered through ESI were enrolled in a Preferred Provider Organization (PPO) plan. The remaining individuals were covered, in descending order, by a high deductible (HDED) health insurance

¹¹ Persons may be counted in more than one category.

¹² Employer size is defined as the total number of employees working for a given employer.

plan or a Health Maintenance Organization (HMO) and were least likely to be enrolled in a Point of Service (POS) plan.¹³

- 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 nearly five times more likely for retirees than for actives, while the prevalence in the public sector for retiree vs. active was 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 85 percent (on average a plan would pay 85 percent of covered expenses over an average population).
- 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. Average out-of-pocket costs for those with other public coverage, which includes Medicaid and CHIP, are lowest, followed closely by the uninsured, with both groupings having lower costs than the average in the same age grouping.
- A comparison of health insurance coverage at the time of survey questionnaire to coverage during the prior

(CY 2016) year shows that almost all (98 percent) persons insured in CY 2016 were also insured at the time of the questionnaire. Of those persons never insured in CY 2016, 91 percent were still uninsured at the time of the survey. Looking, however, at the actual counts of persons we see very little difference in the number of coverages in CY 2016 (292.3 million) versus those covered at time of questionnaire (289.6 million).

- Roughly 23 percent of younger (under age 35) individuals with non-employer based private health insurance got their insurance through the exchange. This increased to more than 34 percent for those aged 55 to 64.

¹³ High deductible health insurance plans include, but are not limited to, IRS qualified HDHP plans. The data underlying the plan type classification (from the KFF/HRET Employer Health Benefits Survey) had high deductible plans classified first in the hierarchy by type (for example, plans

that are both high deductible and PPO plans are shown as high deductible plans). Thus, persons in plans that are both high deductible and PPO, are shown as being in high deductible plans.

**Table 1A. Health Insurance Coverage from All Sources
by State: CY 2016**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
U.S.	320.4	292.3	178.5	135.4	45.2	53.4	52.0	75.4	28.1
Alabama	4.8	4.4	2.6	1.9	0.7	0.9	0.7	1.3	0.4
Alaska	0.7	0.6	0.4	0.2	0.2	0.1	*	0.2	0.1
Arizona	6.9	6.1	3.4	2.6	0.8	1.2	0.9	1.8	0.8
Arkansas	2.9	2.7	1.5	1.1	0.4	0.6	0.6	0.8	0.2
California	39.2	36.2	20.7	15.6	5.4	5.6	6.2	11.0	3.0
Colorado	5.5	5.0	3.2	2.5	0.7	0.8	0.9	1.2	0.5
Connecticut	3.6	3.4	2.2	1.6	0.6	0.5	0.6	0.8	0.2
Delaware	0.9	0.9	0.5	0.4	0.1	0.2	0.1	0.3	0.1
District of Columbia	0.7	0.7	0.4	0.3	0.2	0.1	0.1	0.2	*
Florida	20.5	18.1	9.7	7.4	2.3	4.1	4.5	4.5	2.5
Georgia	10.3	9.0	5.4	4.0	1.5	1.4	1.3	2.3	1.3
Hawaii	1.4	1.3	0.9	0.6	0.3	0.2	0.1	0.4	0.1
Idaho	1.7	1.5	0.9	0.7	0.2	0.3	0.4	0.4	0.1
Illinois	12.6	11.7	7.4	5.9	1.5	2.0	2.3	2.6	0.9
Indiana	6.5	6.1	3.8	3.1	0.8	1.1	1.0	1.5	0.4
Iowa	3.1	2.9	1.9	1.5	0.4	0.5	0.6	0.6	0.2
Kansas	2.9	2.6	1.7	1.3	0.4	0.5	0.6	0.5	0.2
Kentucky	4.4	4.1	2.2	1.7	0.6	0.8	0.8	1.1	0.3
Louisiana	4.6	4.1	2.2	1.6	0.6	0.8	0.5	1.4	0.5
Maine	1.3	1.2	0.7	0.6	0.2	0.3	0.2	0.3	0.1
Maryland	5.9	5.6	3.7	2.4	1.3	1.0	1.0	1.3	0.4
Massachusetts	6.8	6.4	4.2	3.2	1.0	1.0	1.0	1.6	0.4
Michigan	9.9	9.3	6.1	4.8	1.4	1.8	1.5	2.4	0.6
Minnesota	5.4	5.1	3.4	2.7	0.7	0.9	1.3	0.9	0.3
Mississippi	2.9	2.6	1.4	1.0	0.4	0.5	0.4	0.9	0.4
Missouri	5.9	5.4	3.4	2.7	0.7	1.1	1.1	1.0	0.5
Montana	1.0	1.0	0.5	0.4	0.2	0.2	0.2	0.3	0.1
Nebraska	1.9	1.7	1.1	0.9	0.3	0.3	0.4	0.3	0.1
Nevada	2.9	2.7	1.6	1.3	0.4	0.5	0.4	0.7	0.3
New Hampshire	1.3	1.2	0.8	0.7	0.2	0.2	0.2	0.2	0.1
New Jersey	8.9	8.2	5.5	4.1	1.5	1.5	1.3	1.6	0.7
New Mexico	2.0	1.8	0.9	0.5	0.3	0.4	0.2	0.7	0.2
New York	19.5	18.4	11.3	8.1	3.4	3.4	3.0	5.0	1.1

Continued....

**Table 1A. Health Insurance Coverage from All Sources
by State: CY 2016**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
North Carolina	10.1	9.0	5.2	3.9	1.4	1.7	2.1	2.4	1.1
North Dakota	0.7	0.7	0.5	0.3	0.1	0.1	0.1	0.1	0.1
Ohio	11.5	10.8	6.7	5.2	1.5	2.1	1.7	2.8	0.6
Oklahoma	3.9	3.5	2.1	1.6	0.6	0.7	0.5	1.0	0.4
Oregon	4.1	3.9	2.3	1.8	0.5	0.8	0.9	1.2	0.2
Pennsylvania	12.6	12.0	7.9	6.4	1.6	2.5	2.6	2.7	0.6
Rhode Island	1.1	1.0	0.6	0.4	0.2	0.2	0.2	0.2	0.1
South Carolina	4.9	4.5	2.6	1.9	0.8	1.0	0.9	1.3	0.4
South Dakota	0.9	0.8	0.5	0.4	0.1	0.2	0.2	0.2	0.1
Tennessee	6.7	5.9	3.4	2.8	0.7	1.2	1.0	1.7	0.7
Texas	27.7	23.4	14.9	11.5	3.6	3.6	3.4	5.7	4.2
Utah	3.1	2.7	2.0	1.6	0.4	0.3	0.5	0.4	0.4
Vermont	0.6	0.6	0.3	0.3	0.1	0.1	0.1	0.2	*
Virginia	8.2	7.4	4.9	3.3	1.7	1.3	0.9	1.6	0.8
Washington	7.3	6.8	4.1	3.0	1.2	1.2	1.0	1.9	0.5
West Virginia	1.8	1.7	0.9	0.7	0.3	0.4	0.2	0.6	0.1
Wisconsin	5.8	5.4	3.5	2.8	0.7	1.0	0.9	1.1	0.4
Wyoming	0.6	0.5	0.3	0.2	0.1	0.1	0.1	0.1	0.1

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

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

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

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

2/ Private sector includes the self-employed.

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

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

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

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

**Table 1B. Health Insurance Coverage from All Sources
by Age: CY 2016**
(numbers in millions)

Coverage Type	Age				
	Total	< 18	18- 25	26- 64	65+
Total Population	320.4	74.0	33.9	163.1	49.3
Total Insured	292.3	70.1	29.7	143.8	48.7
Employer Sponsored Insurance 1/	178.5	41.1	20.5	103.3	13.5
Policyholder	90.1	0.1	5.2	75.2	9.6
Dependent	95.7	41.1	16.2	34.0	4.4
Medicare	53.4	0.2	0.4	6.9	45.8
Other Private Insurance 2/	52.0	8.1	5.2	24.7	14.0
Policyholder	33.2	0.2	1.9	18.8	12.3
Dependent	20.6	7.9	3.4	7.0	2.3
Other Public Coverage 3/	75.4	30.9	8.1	29.5	7.0
Total Uninsured 4/	28.1	3.9	4.2	19.4	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.

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

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

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

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

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

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

**Table 1C. Health Insurance Coverage from Primary Source
by State: CY 2016**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
U.S.	320.4	292.3	169.0	131.6	37.4	50.2	25.0	48.1	28.1
Alabama	4.8	4.4	2.5	1.9	0.6	0.8	0.3	0.8	0.4
Alaska	0.7	0.6	0.4	0.2	0.1	0.1	*	0.2	0.1
Arizona	6.9	6.1	3.2	2.5	0.7	1.1	0.4	1.3	0.8
Arkansas	2.9	2.7	1.4	1.1	0.3	0.6	0.3	0.5	0.2
California	39.2	36.2	19.7	15.2	4.5	5.3	3.7	7.4	3.0
Colorado	5.5	5.0	3.1	2.4	0.6	0.8	0.4	0.7	0.5
Connecticut	3.6	3.4	2.1	1.5	0.5	0.5	0.2	0.5	0.2
Delaware	0.9	0.9	0.5	0.4	0.1	0.2	*	0.2	0.1
District of Columbia	0.7	0.7	0.4	0.3	0.1	0.1	0.1	0.1	*
Florida	20.5	18.1	9.2	7.2	1.9	3.9	2.3	2.7	2.5
Georgia	10.3	9.0	5.3	4.0	1.3	1.3	0.8	1.7	1.3
Hawaii	1.4	1.3	0.8	0.6	0.2	0.2	0.1	0.2	0.1
Idaho	1.7	1.5	0.9	0.7	0.2	0.3	0.2	0.2	0.1
Illinois	12.6	11.7	7.0	5.7	1.3	1.9	1.1	1.7	0.9
Indiana	6.5	6.1	3.7	3.0	0.7	1.0	0.5	0.9	0.4
Iowa	3.1	2.9	1.8	1.4	0.4	0.5	0.2	0.4	0.2
Kansas	2.9	2.6	1.6	1.3	0.3	0.4	0.3	0.3	0.2
Kentucky	4.4	4.1	2.1	1.6	0.5	0.8	0.5	0.7	0.3
Louisiana	4.6	4.1	2.1	1.6	0.4	0.7	0.3	1.0	0.5
Maine	1.3	1.2	0.7	0.5	0.2	0.3	0.1	0.2	0.1
Maryland	5.9	5.6	3.4	2.3	1.1	0.9	0.5	0.8	0.4
Massachusetts	6.8	6.4	4.0	3.2	0.8	0.9	0.4	1.0	0.4
Michigan	9.9	9.3	5.6	4.6	1.0	1.7	0.6	1.4	0.6
Minnesota	5.4	5.1	3.3	2.7	0.6	0.9	0.5	0.5	0.3
Mississippi	2.9	2.6	1.3	1.0	0.3	0.5	0.2	0.6	0.4
Missouri	5.9	5.4	3.2	2.6	0.6	1.1	0.5	0.6	0.5
Montana	1.0	1.0	0.5	0.4	0.1	0.2	0.1	0.2	0.1
Nebraska	1.9	1.7	1.1	0.9	0.2	0.3	0.2	0.2	0.1
Nevada	2.9	2.7	1.6	1.3	0.3	0.5	0.2	0.5	0.3
New Hampshire	1.3	1.2	0.8	0.6	0.2	0.2	0.1	0.1	0.1
New Jersey	8.9	8.2	5.2	3.9	1.2	1.4	0.6	1.0	0.7
New Mexico	2.0	1.8	0.8	0.5	0.3	0.3	0.1	0.5	0.2
New York	19.5	18.4	10.6	7.8	2.8	3.1	1.5	3.1	1.1

Continued....

**Table 1C. Health Insurance Coverage from Primary Source
by State: CY 2016**
(numbers in millions)

State	Total Population	Insured	Employer Sponsored Insurance 1/			Medicare	Other Private Insurance 3/	Other Public Coverage 4/	Uninsured 5/
			Total	Private Sector 2/	Public Sector				
North Carolina	10.1	9.0	4.9	3.8	1.1	1.6	1.0	1.5	1.1
North Dakota	0.7	0.7	0.4	0.3	0.1	0.1	0.1	0.1	0.1
Ohio	11.5	10.8	6.3	5.1	1.3	1.9	0.8	1.8	0.6
Oklahoma	3.9	3.5	2.0	1.5	0.5	0.7	0.2	0.6	0.4
Oregon	4.1	3.9	2.1	1.7	0.4	0.7	0.3	0.7	0.2
Pennsylvania	12.6	12.0	7.4	6.1	1.3	2.3	0.8	1.4	0.6
Rhode Island	1.1	1.0	0.6	0.4	0.1	0.2	0.1	0.1	0.1
South Carolina	4.9	4.5	2.4	1.8	0.6	0.9	0.4	0.7	0.4
South Dakota	0.9	0.8	0.4	0.4	0.1	0.2	0.1	0.1	0.1
Tennessee	6.7	5.9	3.3	2.7	0.6	1.1	0.4	1.1	0.7
Texas	27.7	23.4	14.2	11.3	3.0	3.5	1.8	3.9	4.2
Utah	3.1	2.7	1.9	1.6	0.4	0.3	0.2	0.2	0.4
Vermont	0.6	0.6	0.3	0.2	0.1	0.1	0.1	0.1	*
Virginia	8.2	7.4	4.6	3.2	1.5	1.2	0.4	1.1	0.8
Washington	7.3	6.8	3.9	2.9	1.0	1.1	0.5	1.2	0.5
West Virginia	1.8	1.7	0.9	0.6	0.2	0.4	0.1	0.4	0.1
Wisconsin	5.8	5.4	3.4	2.8	0.6	0.9	0.3	0.8	0.4
Wyoming	0.6	0.5	0.3	0.2	0.1	0.1	*	0.1	0.1

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

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

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

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

2/ Private sector includes the self-employed.

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

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

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

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

Table 1D. Health Insurance Coverage from Primary Source
by Age: CY 2016
(numbers in millions)

	Age				
	Total	< 18	18- 25	26- 64	65+
Total Population	320.4	74.0	33.9	163.1	49.3
Total Insured	292.3	70.1	29.7	143.8	48.7
Employer Sponsored Insurance 1/	169.0	41.1	20.4	102.7	4.8
Policyholder	83.1	0.1	5.2	74.8	3.0
Dependent	86.0	41.0	15.3	27.8	1.8
Medicare	50.2	0.2	0.3	6.5	43.3
Other Private Insurance 2/	25.0	5.2	3.5	15.7	0.5
Policyholder	14.0	0.2	1.4	12.1	0.3
Dependent	11.0	5.1	2.1	3.6	0.1
Other Public Coverage 3/	48.1	23.6	5.4	18.9	0.2
Total Uninsured 4/	28.1	3.9	4.2	19.4	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: Totals may not equal the sum of the components due to rounding.

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

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

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

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

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

**Table 2. Insurance Coverage of Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2016**
(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	164.8	147.6	112.2	86.8	25.4	8.1	14.1	13.2	17.2
	Coverage through current employer	77.7	77.7	77.3	62.2	15.1	0.4	0.0	0.0	0.0
	Eligible, not enrolled	31.5	26.5	15.8	10.8	4.9	2.2	4.0	4.6	5.0
	Employer offers, not eligible	21.4	17.8	8.6	5.9	2.7	2.7	3.2	3.4	3.6
	Employer doesn't offer	34.2	25.6	10.5	7.9	2.6	2.9	6.9	5.2	8.6
Employer Size Under 50	Total	56.2	46.6	27.7	23.4	4.3	4.7	8.6	5.6	9.6
	Coverage through current employer	14.0	14.0	13.6	13.1	0.6	0.4	0.0	0.0	0.0
	Eligible, not enrolled	8.9	7.2	3.7	2.7	1.0	0.8	1.7	1.0	1.7
	Employer offers, not eligible	7.1	5.8	2.4	1.7	0.7	1.1	1.3	0.9	1.4
	Employer doesn't offer	26.1	19.6	8.0	5.9	2.0	2.4	5.6	3.6	6.5
Employer Size 50-99	Total	11.5	10.3	8.1	6.9	1.2	0.4	0.8	0.9	1.2
	Coverage through current employer	5.7	5.7	5.7	5.2	0.5	*	0.0	0.0	0.0
	Eligible, not enrolled	2.5	2.0	1.2	0.8	0.4	0.2	0.3	0.3	0.4
	Employer offers, not eligible	1.5	1.3	0.7	0.4	0.2	0.2	0.2	0.2	0.2
	Employer doesn't offer	1.8	1.2	0.5	0.4	0.1	0.1	0.3	0.4	0.6
Employer Size 100-499	Total	20.0	18.4	15.3	12.6	2.7	0.7	1.2	1.2	1.5
	Coverage through current employer	11.4	11.4	11.4	9.9	1.5	0.0	0.0	0.0	0.0
	Eligible, not enrolled	4.2	3.5	2.3	1.6	0.7	0.3	0.5	0.5	0.7
	Employer offers, not eligible	2.6	2.2	1.1	0.7	0.4	0.3	0.4	0.4	0.4
	Employer doesn't offer	1.8	1.3	0.6	0.4	0.1	0.1	0.3	0.3	0.5
Employer Size 500+	Total	77.1	72.3	61.1	43.9	17.2	2.3	3.4	5.5	4.8
	Coverage through current employer	46.6	46.6	46.6	34.0	12.5	0.0	0.0	0.0	0.0
	Eligible, not enrolled	15.9	13.8	8.6	5.7	2.8	1.0	1.5	2.7	2.2
	Employer offers, not eligible	10.1	8.5	4.4	3.0	1.5	1.1	1.3	1.8	1.6
	Employer doesn't offer	4.5	3.4	1.5	1.1	0.4	0.3	0.7	1.0	1.1

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

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

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

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

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

2/ Private sector includes the self-employed.

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

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

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

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

**Table 2A. Insurance Coverage of Full Time Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2016**

(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	131.4	118.1	96.0	74.8	21.2	3.6	10.0	8.5	13.3
	Coverage through current employer	74.1	74.1	73.9	59.4	14.4	0.3	0.0	0.0	0.0
	Eligible, not enrolled	25.5	21.2	12.8	8.7	4.1	1.4	3.3	3.6	4.3
	Employer offers, not eligible	9.4	7.2	3.3	2.1	1.2	0.7	1.6	1.6	2.2
	Employer doesn't offer	22.3	15.6	6.1	4.5	1.5	1.2	5.0	3.3	6.8
Employer Size Under 50	Total	41.0	33.5	21.5	18.7	2.8	2.0	6.4	3.6	7.5
	Coverage through current employer	13.1	13.1	12.8	12.3	0.5	0.3	0.0	0.0	0.0
	Eligible, not enrolled	7.3	5.8	3.0	2.2	0.8	0.5	1.4	0.8	1.5
	Employer offers, not eligible	3.2	2.4	0.9	0.7	0.3	0.2	0.8	0.4	0.8
	Employer doesn't offer	17.5	12.3	4.8	3.6	1.2	1.0	4.2	2.3	5.2
Employer Size 50-99	Total	9.6	8.5	7.1	6.1	1.0	0.2	0.6	0.6	1.0
	Coverage through current employer	5.5	5.5	5.5	5.0	0.5	*	0.0	0.0	0.0
	Eligible, not enrolled	2.0	1.6	1.0	0.7	0.3	0.1	0.3	0.2	0.4
	Employer offers, not eligible	0.8	0.7	0.3	0.2	0.1	0.1	0.1	0.1	0.2
	Employer doesn't offer	1.2	0.7	0.3	0.2	*	*	0.2	0.2	0.5
Employer Size 100-499	Total	17.0	15.7	13.8	11.5	2.3	0.3	0.8	0.9	1.3
	Coverage through current employer	11.1	11.1	11.1	9.7	1.4	0.0	0.0	0.0	0.0
	Eligible, not enrolled	3.5	2.9	1.9	1.3	0.6	0.1	0.4	0.4	0.6
	Employer offers, not eligible	1.3	1.0	0.5	0.3	0.2	0.1	0.2	0.2	0.3
	Employer doesn't offer	1.1	0.8	0.3	0.2	0.1	*	0.2	0.2	0.4
Employer Size 500+	Total	63.8	60.3	53.6	38.5	15.1	1.0	2.1	3.5	3.5
	Coverage through current employer	44.5	44.5	44.5	32.5	12.0	0.0	0.0	0.0	0.0
	Eligible, not enrolled	12.7	10.9	6.9	4.6	2.3	0.6	1.2	2.2	1.8
	Employer offers, not eligible	4.1	3.2	1.6	0.9	0.6	0.3	0.5	0.8	0.9
	Employer doesn't offer	2.6	1.8	0.7	0.6	0.2	0.1	0.4	0.5	0.8

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

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

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

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

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

2/ Private sector includes the self-employed.

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

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

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

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

**Table 2B. Insurance Coverage of Part Time Workers from Primary Source
by Employer Offers of Health Insurance and Employer Size: CY 2016**

(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	33.4	29.5	16.2	12.0	4.1	4.6	4.1	4.7	3.8
	Coverage through current employer	3.5	3.5	3.5	2.8	0.7	0.1	0.0	0.0	0.0
	Eligible, not enrolled	6.1	5.4	3.0	2.1	0.8	0.8	0.7	0.9	0.7
	Employer offers, not eligible	11.9	10.6	5.3	3.8	1.5	1.9	1.6	1.8	1.3
	Employer doesn't offer	11.9	10.0	4.5	3.4	1.1	1.7	1.9	2.0	1.8
Employer Size Under 50	Total	15.2	13.0	6.2	4.7	1.4	2.6	2.3	2.0	2.1
	Coverage through current employer	0.9	0.9	0.8	0.8	*	0.1	0.0	0.0	0.0
	Eligible, not enrolled	1.6	1.4	0.7	0.5	0.2	0.2	0.2	0.2	0.2
	Employer offers, not eligible	3.9	3.4	1.5	1.0	0.4	0.9	0.6	0.5	0.5
	Employer doesn't offer	8.7	7.3	3.2	2.4	0.8	1.4	1.4	1.3	1.4
Employer Size 50-99	Total	1.9	1.7	1.0	0.8	0.2	0.2	0.2	0.3	0.2
	Coverage through current employer	0.2	0.2	0.2	0.2	*	*	0.0	0.0	0.0
	Eligible, not enrolled	0.4	0.4	0.2	0.2	0.1	*	0.1	0.1	*
	Employer offers, not eligible	0.7	0.6	0.3	0.2	0.1	0.1	0.1	0.1	0.1
	Employer doesn't offer	0.6	0.5	0.3	0.2	0.1	*	0.1	0.1	0.1
Employer Size 100-499	Total	3.0	2.7	1.5	1.2	0.4	0.4	0.4	0.4	0.3
	Coverage through current employer	0.3	0.3	0.3	0.3	0.1	0.0	0.0	0.0	0.0
	Eligible, not enrolled	0.7	0.6	0.4	0.3	0.1	0.1	0.1	0.1	0.1
	Employer offers, not eligible	1.3	1.2	0.6	0.4	0.2	0.2	0.2	0.2	0.1
	Employer doesn't offer	0.6	0.6	0.3	0.2	0.1	0.1	0.1	0.1	0.1
Employer Size 500+	Total	13.3	12.1	7.4	5.4	2.1	1.4	1.3	2.0	1.2
	Coverage through current employer	2.1	2.1	2.1	1.5	0.6	0.0	0.0	0.0	0.0
	Eligible, not enrolled	3.3	2.9	1.7	1.2	0.5	0.4	0.3	0.6	0.3
	Employer offers, not eligible	6.0	5.4	2.9	2.1	0.8	0.8	0.8	1.0	0.6
	Employer doesn't offer	1.9	1.7	0.8	0.6	0.2	0.2	0.3	0.4	0.3

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

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

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

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

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

2/ Private sector includes the self-employed.

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

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

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

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

Table 3A. All Persons with Employer Sponsored Insurance
by State, Funding Status and Sector Providing Coverage: CY 2016
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Self-Insured	Fully Insured	Total	Self-Insured	Fully Insured
U.S.	178.5	134.4	83.1	51.3	44.0	17.5	26.6
Alabama	2.6	1.9	1.2	0.7	0.7	0.3	0.4
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.4	2.6	1.8	0.8	0.8	0.3	0.5
Arkansas	1.5	1.1	0.7	0.4	0.4	0.2	0.2
California	20.7	15.5	7.1	8.3	5.3	1.7	3.6
Colorado	3.2	2.5	1.6	0.9	0.7	0.3	0.4
Connecticut	2.2	1.6	1.0	0.6	0.6	0.3	0.3
Delaware	0.5	0.4	0.3	0.1	0.1	0.1	0.1
District of Columbia	0.4	0.3	0.1	0.1	0.2	*	0.1
Florida	9.7	7.4	4.6	2.8	2.3	0.9	1.4
Georgia	5.4	4.0	2.8	1.2	1.4	0.6	0.8
Hawaii	0.9	0.6	0.2	0.4	0.3	*	0.2
Idaho	0.9	0.7	0.4	0.2	0.2	0.1	0.1
Illinois	7.4	5.9	3.8	2.1	1.5	0.7	0.8
Indiana	3.8	3.1	2.2	0.9	0.7	0.4	0.3
Iowa	1.9	1.5	1.0	0.5	0.4	0.2	0.2
Kansas	1.7	1.3	0.9	0.4	0.4	0.1	0.2
Kentucky	2.2	1.7	1.0	0.6	0.6	0.3	0.3
Louisiana	2.2	1.6	1.1	0.6	0.6	0.2	0.3
Maine	0.7	0.6	0.3	0.2	0.2	0.1	0.1
Maryland	3.7	2.4	1.5	0.8	1.3	0.3	1.0
Massachusetts	4.2	3.2	2.0	1.2	0.9	0.3	0.6
Michigan	6.1	4.8	2.9	1.9	1.4	0.5	0.9
Minnesota	3.4	2.7	1.8	1.0	0.7	0.3	0.3
Mississippi	1.4	1.0	0.6	0.4	0.4	0.1	0.2
Missouri	3.4	2.7	1.7	0.9	0.7	0.3	0.3
Montana	0.5	0.4	0.2	0.2	0.2	0.1	0.1
Nebraska	1.1	0.9	0.6	0.2	0.3	0.1	0.2
Nevada	1.6	1.3	0.7	0.6	0.3	0.1	0.2
New Hampshire	0.8	0.7	0.4	0.3	0.2	0.1	0.1
New Jersey	5.5	4.1	2.6	1.4	1.4	0.6	0.8
New Mexico	0.9	0.5	0.4	0.2	0.3	0.1	0.2
New York	11.3	8.1	4.6	3.5	3.3	1.2	2.1

Continued....

**Table 3A. All Persons with Employer Sponsored Insurance
by State, Funding Status and Sector Providing Coverage: CY 2016**
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured
North Carolina	5.2	3.9	2.6	1.3	1.3	0.6	0.7
North Dakota	0.5	0.3	0.2	0.1	0.1	*	0.1
Ohio	6.7	5.2	3.4	1.8	1.5	0.6	0.9
Oklahoma	2.1	1.5	0.9	0.7	0.6	0.2	0.4
Oregon	2.3	1.7	0.9	0.8	0.5	0.2	0.3
Pennsylvania	7.9	6.3	4.2	2.2	1.5	0.6	0.9
Rhode Island	0.6	0.4	0.2	0.2	0.2	*	0.1
South Carolina	2.6	1.8	1.3	0.6	0.8	0.4	0.4
South Dakota	0.5	0.4	0.2	0.1	0.1	*	0.1
Tennessee	3.4	2.8	1.7	1.0	0.7	0.3	0.4
Texas	14.9	11.5	7.6	3.9	3.5	1.5	2.0
Utah	2.0	1.6	0.9	0.6	0.4	0.2	0.3
Vermont	0.3	0.3	0.1	0.1	0.1	*	0.1
Virginia	4.9	3.2	2.2	1.0	1.6	0.6	1.1
Washington	4.1	3.0	1.9	1.1	1.1	0.4	0.7
West Virginia	0.9	0.7	0.4	0.2	0.3	0.1	0.2
Wisconsin	3.5	2.8	1.8	1.0	0.7	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: Nonzero cells with under 50,000 persons are marked with a ***.

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

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2016, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2017-appendix-a.pdf>.

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

**Table 3B. All Persons with Employer Sponsored Insurance
by Size, Funding Status and Sector Providing Coverage: CY 2016**

(numbers in millions)

Employer Size	Total			Private Sector 1/			Public Sector		
	Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured	Total	Self-Insured 2/	Fully Insured
Total	178.5	100.6	77.9	134.4	83.1	51.3	44.0	17.5	26.6
Less than 10 Employees	10.8	1.9	8.8	10.4	1.9	8.5	0.4	0.1	0.3
10 - 49 Employees	16.0	2.6	13.4	15.1	2.5	12.6	0.9	0.1	0.8
50 - 99 Employees	11.6	2.2	9.4	10.3	2.0	8.3	1.2	0.2	1.1
100 - 499 Employees	24.7	10.2	14.4	20.8	9.3	11.5	3.9	1.0	2.9
500 - 999 Employees	12.4	6.2	6.3	9.6	5.2	4.5	2.8	1.0	1.8
1,000 or more Employees	103.0	77.4	25.6	68.2	62.3	5.9	34.9	15.2	19.7

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

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

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2016, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2017-appendix-a.pdf>.

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

**Table 3C. All Persons with Employer Sponsored Insurance
by State, Policyholder Status and Sector Providing Coverage: CY 2016**

(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
U.S.	178.5	134.4	67.1	67.4	44.0	23.0	21.0
Alabama	2.6	1.9	0.9	1.0	0.7	0.4	0.3
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.4	2.6	1.3	1.3	0.8	0.4	0.4
Arkansas	1.5	1.1	0.6	0.6	0.4	0.2	0.1
California	20.7	15.5	7.7	7.7	5.3	2.7	2.6
Colorado	3.2	2.5	1.3	1.2	0.7	0.4	0.3
Connecticut	2.2	1.6	0.8	0.8	0.6	0.3	0.3
Delaware	0.5	0.4	0.2	0.2	0.1	0.1	0.1
District of Columbia	0.4	0.3	0.2	0.1	0.2	0.1	0.1
Florida	9.7	7.4	3.9	3.5	2.3	1.2	1.1
Georgia	5.4	4.0	2.1	1.9	1.4	0.7	0.7
Hawaii	0.9	0.6	0.4	0.3	0.3	0.1	0.1
Idaho	0.9	0.7	0.3	0.4	0.2	0.1	0.1
Illinois	7.4	5.9	2.8	3.1	1.5	0.8	0.7
Indiana	3.8	3.1	1.5	1.6	0.7	0.4	0.4
Iowa	1.9	1.5	0.7	0.7	0.4	0.2	0.2
Kansas	1.7	1.3	0.6	0.7	0.4	0.2	0.2
Kentucky	2.2	1.7	0.9	0.8	0.6	0.3	0.2
Louisiana	2.2	1.6	0.9	0.8	0.6	0.3	0.2
Maine	0.7	0.6	0.3	0.3	0.2	0.1	0.1
Maryland	3.7	2.4	1.2	1.2	1.3	0.7	0.6
Massachusetts	4.2	3.2	1.6	1.7	0.9	0.5	0.5
Michigan	6.1	4.8	2.4	2.4	1.4	0.7	0.7
Minnesota	3.4	2.7	1.3	1.4	0.7	0.3	0.3
Mississippi	1.4	1.0	0.5	0.5	0.4	0.2	0.1
Missouri	3.4	2.7	1.3	1.3	0.7	0.4	0.3
Montana	0.5	0.4	0.2	0.2	0.2	0.1	0.1
Nebraska	1.1	0.9	0.4	0.4	0.3	0.1	0.1
Nevada	1.6	1.3	0.6	0.7	0.3	0.2	0.2
New Hampshire	0.8	0.7	0.3	0.3	0.2	0.1	0.1
New Jersey	5.5	4.1	2.0	2.1	1.4	0.7	0.7
New Mexico	0.9	0.5	0.3	0.3	0.3	0.2	0.2
New York	11.3	8.1	4.1	4.0	3.3	1.7	1.6

Continued....

**Table 3C. All Persons with Employer Sponsored Insurance
by State, Policyholder Status and Sector Providing Coverage: CY 2016**
(numbers in millions)

State	Total	Private Sector 1/			Public Sector		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
North Carolina	5.2	3.9	2.0	1.8	1.3	0.7	0.6
North Dakota	0.5	0.3	0.2	0.2	0.1	0.1	0.1
Ohio	6.7	5.2	2.6	2.6	1.5	0.7	0.7
Oklahoma	2.1	1.5	0.8	0.8	0.6	0.3	0.2
Oregon	2.3	1.7	0.9	0.9	0.5	0.3	0.2
Pennsylvania	7.9	6.3	3.1	3.2	1.5	0.7	0.8
Rhode Island	0.6	0.4	0.2	0.2	0.2	0.1	0.1
South Carolina	2.6	1.8	1.0	0.9	0.8	0.4	0.3
South Dakota	0.5	0.4	0.2	0.2	0.1	*	*
Tennessee	3.4	2.8	1.4	1.4	0.7	0.4	0.3
Texas	14.9	11.5	5.5	5.9	3.5	1.9	1.6
Utah	2.0	1.6	0.6	1.0	0.4	0.2	0.2
Vermont	0.3	0.3	0.1	0.1	0.1	*	*
Virginia	4.9	3.2	1.6	1.6	1.6	0.8	0.8
Washington	4.1	3.0	1.6	1.4	1.1	0.6	0.5
West Virginia	0.9	0.7	0.3	0.3	0.3	0.1	0.1
Wisconsin	3.5	2.8	1.3	1.5	0.7	0.3	0.4
Wyoming	0.3	0.2	0.1	0.1	0.1	*	0.1

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

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

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

1/ Private sector includes the self-employed.

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

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

Table 3D. All Persons with Employer Sponsored Insurance
by State, Funding Status and Policyholder Status: CY 2016
(numbers in millions)

State	Total	Self-Insured 1/			Fully-Insured		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
U.S.	178.5	100.6	50.1	50.5	77.9	40.0	37.9
Alabama	2.6	1.5	0.7	0.7	1.1	0.6	0.6
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.4	2.1	1.1	1.0	1.3	0.7	0.6
Arkansas	1.5	0.9	0.5	0.4	0.6	0.3	0.3
California	20.7	8.8	4.4	4.4	11.9	6.0	6.0
Colorado	3.2	1.9	1.0	0.9	1.3	0.7	0.6
Connecticut	2.2	1.3	0.6	0.7	0.9	0.4	0.5
Delaware	0.5	0.4	0.2	0.2	0.2	0.1	0.1
District of Columbia	0.4	0.1	0.1	0.1	0.3	0.2	0.1
Florida	9.7	5.5	2.9	2.6	4.2	2.2	2.0
Georgia	5.4	3.4	1.7	1.7	2.0	1.1	0.9
Hawaii	0.9	0.3	0.2	0.1	0.6	0.3	0.3
Idaho	0.9	0.5	0.2	0.3	0.4	0.2	0.2
Illinois	7.4	4.5	2.2	2.3	2.9	1.4	1.5
Indiana	3.8	2.6	1.2	1.4	1.2	0.6	0.6
Iowa	1.9	1.2	0.6	0.6	0.7	0.4	0.3
Kansas	1.7	1.0	0.5	0.6	0.6	0.4	0.3
Kentucky	2.2	1.3	0.7	0.6	0.9	0.5	0.4
Louisiana	2.2	1.3	0.7	0.6	0.9	0.5	0.4
Maine	0.7	0.4	0.2	0.2	0.3	0.2	0.1
Maryland	3.7	1.9	0.9	1.0	1.8	1.0	0.8
Massachusetts	4.2	2.4	1.1	1.2	1.8	0.9	0.9
Michigan	6.1	3.3	1.6	1.7	2.8	1.4	1.4
Minnesota	3.4	2.1	1.0	1.1	1.3	0.6	0.7
Mississippi	1.4	0.8	0.4	0.4	0.6	0.3	0.3
Missouri	3.4	2.1	1.0	1.1	1.3	0.7	0.6
Montana	0.5	0.3	0.1	0.1	0.3	0.1	0.1
Nebraska	1.1	0.7	0.3	0.4	0.4	0.2	0.2
Nevada	1.6	0.8	0.4	0.4	0.8	0.4	0.4
New Hampshire	0.8	0.4	0.2	0.2	0.4	0.2	0.2
New Jersey	5.5	3.2	1.6	1.7	2.3	1.1	1.1
New Mexico	0.9	0.5	0.3	0.2	0.4	0.2	0.2
New York	11.3	5.8	2.9	2.8	5.6	2.9	2.7

Continued....

**Table 3D. All Persons with Employer Sponsored Insurance
by State, Funding Status and Policyholder Status: CY 2016**

(numbers in millions)

State	Total	Self-Insured 1/			Fully-Insured		
		Total	Policyholders	Dependents 2/	Total	Policyholders	Dependents 2/
North Carolina	5.2	3.2	1.7	1.5	2.0	1.1	0.9
North Dakota	0.5	0.2	0.1	0.1	0.2	0.1	0.1
Ohio	6.7	4.1	2.1	2.0	2.6	1.3	1.3
Oklahoma	2.1	1.1	0.6	0.5	1.0	0.5	0.5
Oregon	2.3	1.1	0.6	0.6	1.1	0.6	0.5
Pennsylvania	7.9	4.8	2.4	2.5	3.1	1.5	1.6
Rhode Island	0.6	0.3	0.1	0.1	0.3	0.2	0.2
South Carolina	2.6	1.6	0.8	0.8	1.0	0.5	0.4
South Dakota	0.5	0.3	0.1	0.1	0.2	0.1	0.1
Tennessee	3.4	2.0	1.0	1.0	1.4	0.7	0.7
Texas	14.9	9.1	4.5	4.6	5.8	2.9	2.9
Utah	2.0	1.1	0.4	0.7	0.9	0.4	0.5
Vermont	0.3	0.2	0.1	0.1	0.2	0.1	0.1
Virginia	4.9	2.8	1.3	1.5	2.1	1.1	1.0
Washington	4.1	2.3	1.2	1.1	1.8	1.0	0.8
West Virginia	0.9	0.6	0.3	0.3	0.4	0.2	0.2
Wisconsin	3.5	2.1	1.0	1.2	1.4	0.6	0.8
Wyoming	0.3	0.2	0.1	0.1	0.1	0.1	0.1

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

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

1/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2016, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2017-appendix-a.pdf>.

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

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

Table 4. All Persons with Employer Sponsored Insurance
by Policyholder Status, Sector and Size of Employer Providing Coverage: CY 2016
(numbers in millions)

Employer Size	Sector 1/	Total	Current Employer	Former Employer		
				Total	COBRA	Retiree
Total	Total	178.5	159.3	19.2	3.2	16.0
	Private Sector	134.4	127.3	7.2	2.7	4.4
	Public Sector	44.0	32.0	12.0	0.5	11.5
	Policyholders	90.1	77.7	12.4	1.7	10.7
	Private Sector	67.1	62.6	4.5	1.5	3.0
	Public Sector	23.0	15.1	7.9	0.2	7.7
	Dependents 2/	88.4	81.6	6.8	1.5	5.3
	Private Sector	67.4	64.7	2.6	1.2	1.4
	Public Sector	21.0	16.9	4.1	0.3	3.8
Less than 50 Employees	Total	26.8	26.6	0.1	*	0.1
	Private Sector	25.5	25.4	0.1	*	0.1
	Public Sector	1.2	1.2	*	0.0	*
	Policyholders	14.1	14.0	0.1	*	0.1
	Private Sector	13.5	13.4	0.1	*	0.1
	Public Sector	0.6	0.6	*	0.0	*
	Dependents 2/	12.7	12.6	*	*	*
	Private Sector	12.0	12.0	*	*	*
	Public Sector	0.6	0.6	*	0.0	0.0
50 - 99 Employees	Total	11.6	11.1	0.4	0.1	0.4
	Private Sector	10.3	10.0	0.3	0.1	0.2
	Public Sector	1.2	1.1	0.2	*	0.2
	Policyholders	6.0	5.7	0.3	*	0.3
	Private Sector	5.4	5.2	0.2	*	0.1
	Public Sector	0.6	0.5	0.1	*	0.1
	Dependents 2/	5.6	5.4	0.1	*	0.1
	Private Sector	5.0	4.9	0.1	*	0.1
	Public Sector	0.6	0.6	*	*	*
100 - 499 Employees	Total	24.7	23.5	1.1	0.4	0.8
	Private Sector	20.8	20.1	0.7	0.3	0.3
	Public Sector	3.9	3.4	0.5	*	0.4
	Policyholders	12.2	11.4	0.8	0.2	0.6
	Private Sector	10.4	9.9	0.4	0.2	0.2
	Public Sector	1.8	1.5	0.3	*	0.3
	Dependents 2/	12.5	12.1	0.4	0.1	0.2
	Private Sector	10.4	10.2	0.2	0.1	0.1
	Public Sector	2.1	1.9	0.1	*	0.1

Continued....

**Table 4. All Persons with Employer Sponsored Insurance
by Policyholder Status, Sector and Size of Employer Providing Coverage: CY 2016**
(numbers in millions)

Employer Size	Sector 1/	Total	Current Employer	Former Employer		
				Total	COBRA	Retiree
500 - 999 Employees	Total	12.4	10.5	2.0	0.6	1.4
	Private Sector	9.6	8.6	1.0	0.5	0.5
	Public Sector	2.8	1.9	1.0	0.1	0.9
	Policyholders	6.1	4.9	1.2	0.3	0.9
	Private Sector	4.6	4.0	0.6	0.3	0.3
	Public Sector	1.4	0.8	0.6	*	0.6
	Dependents 2/	6.4	5.6	0.8	0.3	0.5
	Private Sector	5.0	4.6	0.4	0.2	0.2
	Public Sector	1.4	1.0	0.3	*	0.3
1,000 or more Employees	Total	103.0	87.6	15.5	2.1	13.3
	Private Sector	68.2	63.1	5.0	1.7	3.3
	Public Sector	34.9	24.4	10.4	0.4	10.0
	Policyholders	51.8	41.7	10.0	1.1	8.9
	Private Sector	33.3	30.0	3.2	1.0	2.3
	Public Sector	18.5	11.7	6.8	0.1	6.7
	Dependents 2/	51.3	45.8	5.4	1.0	4.4
	Private Sector	34.9	33.1	1.8	0.8	1.0
	Public Sector	16.3	12.7	3.6	0.3	3.4

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

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

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

1/ Private sector includes the self-employed.

2/ 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 2016
(numbers in millions)

State	Total	Private Sector 1/				
		Total Private	HMO 2/	PPO 3/	POS 4/	HDED 5/
U.S.	178.5	134.4	17.1	68.7	11.6	37.0
Alabama	2.6	1.9	0.1	0.9	0.2	0.7
Alaska	0.4	0.2	*	0.1	*	0.1
Arizona	3.4	2.6	0.1	1.5	0.2	0.7
Arkansas	1.5	1.1	*	0.6	0.1	0.3
California	20.7	15.5	4.9	6.2	1.2	3.1
Colorado	3.2	2.5	0.3	1.4	0.2	0.6
Connecticut	2.2	1.6	0.1	0.9	0.1	0.4
Delaware	0.5	0.4	0.1	0.2	*	0.1
District of Columbia	0.4	0.3	*	0.1	*	0.1
Florida	9.7	7.4	1.2	3.8	0.7	1.7
Georgia	5.4	4.0	0.3	2.7	0.4	0.6
Hawaii	0.9	0.6	0.1	0.2	0.1	0.3
Idaho	0.9	0.7	*	0.4	0.1	0.2
Illinois	7.4	5.9	0.6	3.2	0.6	1.5
Indiana	3.8	3.1	0.1	1.9	0.3	0.8
Iowa	1.9	1.5	0.1	0.7	0.1	0.5
Kansas	1.7	1.3	0.1	0.7	0.1	0.5
Kentucky	2.2	1.7	0.1	0.9	0.2	0.5
Louisiana	2.2	1.6	0.1	1.0	0.2	0.3
Maine	0.7	0.6	*	0.2	0.1	0.2
Maryland	3.7	2.4	0.4	1.1	0.2	0.6
Massachusetts	4.2	3.2	0.8	1.3	0.3	0.8
Michigan	6.1	4.8	0.8	2.2	0.5	1.4
Minnesota	3.4	2.7	0.1	1.3	0.2	1.1
Mississippi	1.4	1.0	*	0.5	0.1	0.4
Missouri	3.4	2.7	0.1	1.6	0.3	0.6
Montana	0.5	0.4	*	0.2	*	0.1
Nebraska	1.1	0.9	*	0.5	0.1	0.2
Nevada	1.6	1.3	0.3	0.7	0.1	0.2
New Hampshire	0.8	0.7	0.1	0.3	*	0.2
New Jersey	5.5	4.1	0.7	2.1	0.3	0.9
New Mexico	0.9	0.5	0.1	0.3	*	0.1
New York	11.3	8.1	1.4	3.5	0.7	2.6

Continued....

**Table 5A. All Persons with Employer Sponsored Insurance
by State and Plan Type (Private Sector Only): CY 2016**
(numbers in millions)

State	Total	Private Sector 1/				
		Total Private	HMO 2/	PPO 3/	POS 4/	HDDED 5/
North Carolina	5.2	3.9	0.3	2.0	0.4	1.2
North Dakota	0.5	0.3	*	0.1	*	0.3
Ohio	6.7	5.2	0.3	2.9	0.4	1.6
Oklahoma	2.1	1.5	0.1	0.6	0.1	0.7
Oregon	2.3	1.7	0.2	0.8	0.2	0.5
Pennsylvania	7.9	6.3	0.6	3.5	0.5	1.7
Rhode Island	0.6	0.4	*	0.2	*	0.3
South Carolina	2.6	1.8	0.1	1.1	0.1	0.4
South Dakota	0.5	0.4	*	0.2	*	0.2
Tennessee	3.4	2.8	0.2	1.5	0.3	0.8
Texas	14.9	11.5	0.6	6.1	0.9	3.9
Utah	2.0	1.6	0.2	0.9	0.1	0.3
Vermont	0.3	0.3	*	0.1	*	0.1
Virginia	4.9	3.2	0.3	1.7	0.3	0.9
Washington	4.1	3.0	0.2	1.6	0.3	0.9
West Virginia	0.9	0.7	*	0.4	0.1	0.2
Wisconsin	3.5	2.8	0.2	1.7	0.3	0.6
Wyoming	0.3	0.2	*	0.1	*	0.1

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

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

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

1/ Private sector includes the self-employed.

2/ HMO stands for Health Maintenance Organization.

3/ PPO stands for Preferred Provider Organization.

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

5/ HDDED 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 2016**
(numbers in millions)

Sector 1/	Employer Size	Self-Insured 2/					Fully Insured					Total				
		Total	HMO 3/	PPO 4/	POS 5/	HDDED 6/	Total	HMO 3/	PPO 4/	POS 5/	HDDED 6/	Total	HMO 3/	PPO 4/	POS 5/	HDDED 6/
Total	Total	100.6	7.6	59.6	3.5	29.9	77.9	17.8	34.2	10.4	15.5	178.5	25.3	93.7	14.0	45.4
	Less than 50 employees	4.6	*	2.8	0.4	1.3	22.2	4.2	8.1	4.7	5.2	26.8	4.2	10.9	5.1	6.5
	50 - 99 employees	2.2	*	1.3	0.2	0.7	9.4	1.6	3.8	1.7	2.4	11.6	1.6	5.0	1.9	3.0
	100 - 499 employees	10.2	0.5	6.9	0.5	2.4	14.4	2.8	6.3	1.2	4.2	24.7	3.2	13.2	1.7	6.5
	500 - 999 employees	6.2	0.3	4.2	0.3	1.3	6.3	1.1	2.7	0.6	1.8	12.4	1.5	7.0	0.9	3.1
	1,000 or more employees	77.4	6.7	44.3	2.1	24.3	25.6	8.1	13.3	2.2	1.9	103.0	14.9	57.6	4.3	26.2
Private Sector	Total	83.1	6.2	49.2	3.1	24.6	51.3	10.9	19.4	8.5	12.5	134.4	17.1	68.7	11.6	37.0
	Less than 50 employees	4.4	*	2.7	0.4	1.2	21.1	3.9	7.7	4.5	5.0	25.5	4.0	10.4	4.9	6.3
	50 - 99 employees	2.0	*	1.2	0.2	0.6	8.3	1.4	3.3	1.6	2.0	10.3	1.4	4.5	1.8	2.7
	100 - 499 employees	9.3	0.4	6.3	0.4	2.1	11.5	2.3	4.9	1.0	3.3	20.8	2.7	11.2	1.4	5.4
	500 - 999 employees	5.2	0.3	3.5	0.3	1.1	4.5	0.7	1.9	0.5	1.3	9.6	1.0	5.4	0.8	2.4
	1,000 or more employees	62.3	5.4	35.5	1.8	19.5	5.9	2.5	1.7	1.0	0.8	68.2	7.9	37.2	2.8	20.3
Public Sector	Total	17.5	1.4	10.3	0.4	5.3	26.6	6.9	14.7	1.9	3.0	44.0	8.3	25.1	2.3	8.4
	Less than 50 employees	0.2	0.0	0.1	*	*	1.1	0.2	0.4	0.2	0.2	1.2	0.2	0.5	0.2	0.3
	50 - 99 employees	0.2	0.0	0.1	0.0	*	1.1	0.1	0.5	0.1	0.3	1.2	0.1	0.6	0.1	0.4
	100 - 499 employees	1.0	*	0.6	0.1	0.2	2.9	0.5	1.4	0.2	0.8	3.9	0.5	2.0	0.3	1.1
	500 - 999 employees	1.0	*	0.7	*	0.2	1.8	0.4	0.8	0.1	0.5	2.8	0.4	1.5	0.1	0.7
	1,000 or more employees	15.2	1.3	8.8	0.3	4.8	19.7	5.7	11.6	1.3	1.2	34.9	6.9	20.4	1.6	5.9

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

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

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

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2016, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2017-appendix-a.pdf>.

3/ HMO stands for Health Maintenance Organization.

4/ PPO stands for Preferred Provider Organization.

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

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

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

Table 6. Persons with Employer Sponsored Insurance (ESI)
by Sector Providing Coverage, Funding and Union Membership: CY 2016
(numbers in millions)

ESI Type	Total ESI	Private Sector			Public Sector		
		Total	Self-Insured	Fully Insured	Total	Self-Insured	Fully Insured
Total ESI	174.0	130.0	82.2	47.7	44.1	17.5	26.6
Union	33.8	14.7	10.4	4.3	19.1	7.7	11.4
Not Union	140.2	115.3	71.9	43.4	24.9	9.8	15.2
Total Current Employer	154.8	122.8	76.7	46.1	32.1	12.7	19.3
Union	25.0	12.1	8.3	3.8	12.9	5.1	7.8
Not Union	129.8	110.7	68.4	42.3	19.1	7.6	11.5
Total Former Employer: COBRA	3.2	2.7	2.1	0.7	0.5	0.2	0.3
Union	0.7	0.4	0.4	0.1	0.3	0.1	0.2
Not Union	2.5	2.3	1.7	0.6	0.2	0.1	0.1
Total Former Employer: Retiree	16.0	4.4	3.5	0.9	11.5	4.6	7.0
Union	8.1	2.2	1.7	0.5	5.9	2.5	3.4
Not Union	7.9	2.3	1.8	0.5	5.6	2.1	3.5

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

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

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

**Table 7. Average Actuarial Values for Active Employer Sponsored Insurance (ESI) Policyholders
by Sector of Employer Providing Coverage, Funding and Plan Type: CY 2016**

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	37.3	0.835	25.3	0.852	62.6	0.842
	HMO 3/	2.8	0.871	5.3	0.904	8.1	0.892
	PPO 4/	22.2	0.849	9.5	0.851	31.6	0.850
	POS 5/	1.3	0.882	4.3	0.867	5.6	0.870
	HDED 6/	11.1	0.792	6.2	0.798	17.2	0.794
Public Sector	Total	6.1	0.873	9.0	0.884	15.1	0.880
	HMO 3/	0.5	0.920	2.4	0.930	2.9	0.928
	PPO 4/	3.7	0.889	4.8	0.870	8.5	0.878
	POS 5/	0.1	0.928	0.7	0.895	0.8	0.901
	HDED 6/	1.8	0.824	1.1	0.839	2.9	0.830

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

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

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

1/ Private sector includes the self-employed.

2/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2014 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2016, at <https://www.dol.gov/sites/default/files/ebsa/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2017-appendix-a.pdf>.

3/ HMO stands for Health Maintenance Organization.

4/ PPO stands for Preferred Provider Organization.

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

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

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

**Table 8A. Mean Out-of-Pocket Spending
by Age and Primary Insurance: CY 2016**

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)	320.4	292.3	83.1	86.0	50.2	14.0	11.0	48.1	28.1
	% of Population	100%	91%	26%	27%	16%	4%	3%	15%	9%
	Out-of-Pocket Spending	\$ 807	\$ 841	\$ 1,022	\$ 687	\$ 1,367	\$ 1,130	\$ 663	\$ 207	\$ 453
< 18	Population (millions)	74.0	70.1	0.1	41.0	0.2	0.2	5.1	23.6	3.9
	% of Population	100%	95%	0%	55%	0%	0%	7%	32%	5%
	Out-of-Pocket Spending	\$ 310	\$ 314	\$ 649	\$ 427	\$ 130	\$ 488	\$ 420	\$ 93	\$ 231
18-25	Population (millions)	33.9	29.7	5.2	15.3	0.3	1.4	2.1	5.4	4.2
	% of Population	100%	88%	15%	45%	1%	4%	6%	16%	12%
	Out-of-Pocket Spending	\$ 401	\$ 422	\$ 457	\$ 487	\$ 257	\$ 461	\$ 505	\$ 174	\$ 249
26-54	Population (millions)	121.8	106.0	56.7	21.2	2.9	8.2	2.6	14.3	15.8
	% of Population	100%	87%	47%	17%	2%	7%	2%	12%	13%
	Out-of-Pocket Spending	\$ 812	\$ 860	\$ 917	\$ 1,001	\$ 894	\$ 1,022	\$ 917	\$ 316	\$ 492
55-64	Population (millions)	41.3	37.8	18.1	6.6	3.6	4.0	1.0	4.6	3.5
	% of Population	100%	91%	44%	16%	9%	10%	2%	11%	9%
	Out-of-Pocket Spending	\$ 1,296	\$ 1,344	\$ 1,439	\$ 1,472	\$ 1,386	\$ 1,611	\$ 1,573	\$ 479	\$ 774
65+	Population (millions)	49.3	48.7	3.0	1.8	43.3	0.3	0.1	0.2	0.6
	% of Population	100%	99%	6%	4%	88%	1%	0%	0%	1%
	Out-of-Pocket Spending	\$ 1,409	\$ 1,421	\$ 1,473	\$ 1,743	\$ 1,411	\$ 1,224	\$ 882	\$ 476	\$ 400

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

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

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

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

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

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

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

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

**Table 8B. Mean Out-of-Pocket Spending by Persons with Spending
by Age and Primary Insurance: CY 2016**

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)	265.3	246.4	76.2	72.7	45.6	12.5	8.7	30.6	18.9
	% of Population	100%	93%	29%	27%	17%	5%	3%	12%	7%
	Out-of-Pocket Spending	\$ 974	\$ 997	\$ 1,113	\$ 812	\$ 1,506	\$ 1,273	\$ 832	\$ 325	\$ 672
< 18	Population (millions)	52.5	50.3	0.1	33.1	0.1	0.1	3.9	13.0	2.2
	% of Population	100%	96%	0%	63%	0%	0%	7%	25%	4%
	Out-of-Pocket Spending	\$ 436	\$ 438	\$ 818	\$ 529	\$ 232	\$ 639	\$ 553	\$ 169	\$ 404
18-25	Population (millions)	25.6	23.1	4.3	12.5	0.2	1.1	1.6	3.4	2.5
	% of Population	100%	90%	17%	49%	1%	4%	6%	13%	10%
	Out-of-Pocket Spending	\$ 531	\$ 543	\$ 550	\$ 596	\$ 479	\$ 581	\$ 659	\$ 273	\$ 419
26-54	Population (millions)	104.7	93.6	51.9	19.2	2.4	7.3	2.2	10.5	11.1
	% of Population	100%	89%	50%	18%	2%	7%	2%	10%	11%
	Out-of-Pocket Spending	\$ 945	\$ 974	\$ 1,002	\$ 1,105	\$ 1,073	\$ 1,151	\$ 1,081	\$ 429	\$ 700
55-64	Population (millions)	37.2	34.6	17.2	6.2	3.1	3.7	0.9	3.5	2.7
	% of Population	100%	93%	46%	17%	8%	10%	2%	9%	7%
	Out-of-Pocket Spending	\$ 1,438	\$ 1,470	\$ 1,517	\$ 1,564	\$ 1,577	\$ 1,739	\$ 1,698	\$ 633	\$ 1,019
65+	Population (millions)	45.2	44.8	2.8	1.7	39.8	0.3	0.1	0.1	0.4
	% of Population	100%	99%	6%	4%	88%	1%	0%	0%	1%
	Out-of-Pocket Spending	\$ 1,536	\$ 1,544	\$ 1,558	\$ 1,854	\$ 1,535	\$ 1,375	\$ 1,137	\$ 614	\$ 627

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

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

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

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

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

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

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

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

**Table 8C. Mean Out-of-Pocket (OOP) Spending for Persons with Employer Sponsored Insurance
by Age and Plan Type: CY 2016**

Age	Plan Type	Total Employer Sponsored Insurance 1/		Employer Sponsored Insurance with OOP Spending 1/	
		Policyholders	Dependents	Policyholders	Dependents
All Ages	Total	\$ 1,076	\$ 716	\$ 1,169	\$ 843
	HMO 2/	\$ 1,006	\$ 680	\$ 1,099	\$ 806
	PPO 3/	\$ 1,120	\$ 744	\$ 1,214	\$ 872
	POS 4/	\$ 1,054	\$ 742	\$ 1,150	\$ 870
	HDED 5/	\$ 1,030	\$ 672	\$ 1,119	\$ 796
< 18	Total	\$ 649	\$ 427	\$ 818	\$ 530
	HMO 2/	\$ 299	\$ 416	\$ 299	\$ 518
	PPO 3/	\$ 810	\$ 446	\$ 1,017	\$ 550
	POS 4/	\$ 170	\$ 446	\$ 259	\$ 544
	HDED 5/	\$ 916	\$ 391	\$ 1,116	\$ 490
18-25	Total	\$ 456	\$ 487	\$ 550	\$ 596
	HMO 2/	\$ 445	\$ 440	\$ 536	\$ 542
	PPO 3/	\$ 508	\$ 492	\$ 604	\$ 603
	POS 4/	\$ 418	\$ 457	\$ 506	\$ 558
	HDED 5/	\$ 378	\$ 513	\$ 465	\$ 625
26-54	Total	\$ 917	\$ 1,003	\$ 1,003	\$ 1,107
	HMO 2/	\$ 855	\$ 885	\$ 947	\$ 990
	PPO 3/	\$ 951	\$ 1,021	\$ 1,037	\$ 1,123
	POS 4/	\$ 897	\$ 1,105	\$ 984	\$ 1,229
	HDED 5/	\$ 891	\$ 1,002	\$ 971	\$ 1,104
55-64	Total	\$ 1,444	\$ 1,487	\$ 1,522	\$ 1,580
	HMO 2/	\$ 1,292	\$ 1,302	\$ 1,350	\$ 1,427
	PPO 3/	\$ 1,469	\$ 1,569	\$ 1,551	\$ 1,648
	POS 4/	\$ 1,456	\$ 1,768	\$ 1,542	\$ 1,854
	HDED 5/	\$ 1,475	\$ 1,330	\$ 1,556	\$ 1,427
65+	Total	\$ 1,650	\$ 1,740	\$ 1,732	\$ 1,823
	HMO 2/	\$ 1,547	\$ 1,804	\$ 1,649	\$ 1,897
	PPO 3/	\$ 1,730	\$ 1,837	\$ 1,812	\$ 1,924
	POS 4/	\$ 1,878	\$ 1,495	\$ 1,942	\$ 1,597
	HDED 5/	\$ 1,462	\$ 1,541	\$ 1,534	\$ 1,604

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

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

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

In this table, ESI includes persons with Medicare.

2/ HMO stands for Health Maintenance Organization.

3/ PPO stands for Preferred Provider Organization.

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

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

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

**Table 9A. Point-in-Time, 2017, versus Ever Insured in Prior Year
by Age: CY 2016 vs. date of questionnaire**

(numbers in millions)

2016 Insurance Status	Age	2017 Point-in-Time (PIT) Insurance Status		
		PIT Insured	PIT Uninsured	Total
Ever Insured in Year	All Ages	287.2	5.1	292.3
	<18	68.8	1.3	70.1
	18- 25	29.0	0.8	29.7
	26- 54	103.6	2.3	106.0
	55- 64	37.2	0.6	37.8
	65+	48.6	0.1	48.7
Never Insured in Year	All Ages	2.4	25.6	28.1
	<18	0.6	3.3	3.9
	18- 25	0.3	3.8	4.2
	26- 54	1.1	14.7	15.8
	55- 64	0.3	3.2	3.5
	65+	0.0	0.6	0.6
Total	All Ages	289.6	30.7	320.4
	<18	69.4	4.6	74.0
	18- 25	29.3	4.6	33.9
	26- 54	104.8	17.0	121.8
	55- 64	37.5	3.8	41.3
	65+	48.6	0.7	49.3

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

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

**Table 9B. Point-in-Time, 2017, versus Ever Insured in Prior Year
by State: CY 2016 vs. date of questionnaire**

(numbers in millions)

State	2017 Point-in-Time (PIT) Insurance Status			
	PIT Insured		PIT Uninsured	
	Ever insured in 2016	Never Insured in 2016	Ever insured in 2016	Never Insured in 2016
U.S.	287.2	2.4	5.1	25.6
Alabama	4.3	*	0.1	0.4
Alaska	0.6	*	*	0.1
Arizona	5.9	*	0.1	0.8
Arkansas	2.7	*	*	0.2
California	35.7	0.3	0.5	2.7
Colorado	4.9	*	0.1	0.5
Connecticut	3.3	*	*	0.2
Delaware	0.9	*	*	0.1
District of Columbia	0.6	*	*	*
Florida	17.6	0.2	0.5	2.2
Georgia	8.8	0.1	0.2	1.2
Hawaii	1.3	*	*	0.1
Idaho	1.5	*	*	0.1
Illinois	11.5	0.1	0.1	0.9
Indiana	5.9	*	0.1	0.4
Iowa	2.9	*	*	0.1
Kansas	2.6	*	0.1	0.2
Kentucky	4.0	*	0.1	0.2
Louisiana	4.0	*	0.1	0.4
Maine	1.2	*	*	0.1
Maryland	5.5	0.1	0.1	0.3
Massachusetts	6.4	*	0.1	0.3
Michigan	9.1	0.1	0.2	0.5
Minnesota	5.0	0.1	0.1	0.3
Mississippi	2.6	*	*	0.3
Missouri	5.3	*	0.1	0.4
Montana	1.0	*	*	0.1
Nebraska	1.7	*	*	0.1
Nevada	2.6	*	*	0.2
New Hampshire	1.2	*	*	0.1
New Jersey	8.0	0.1	0.1	0.6
New Mexico	1.8	*	*	0.2
New York	18.2	0.1	0.2	1.0

Continued....

**Table 9B. Point-in-Time, 2017, versus Ever Insured in Prior Year
by State: CY 2016 vs. date of questionnaire**

(numbers in millions)

State	2017 Point-in-Time (PIT) Insurance Status			
	PIT Insured		PIT Uninsured	
	Ever insured in 2016	Never Insured in 2016	Ever insured in 2016	Never Insured in 2016
North Carolina	8.8	0.1	0.2	1.0
North Dakota	0.7	*	*	0.1
Ohio	10.6	0.1	0.2	0.5
Oklahoma	3.4	*	0.1	0.4
Oregon	3.8	*	0.1	0.2
Pennsylvania	11.8	0.1	0.2	0.5
Rhode Island	1.0	*	*	*
South Carolina	4.4	*	0.1	0.4
South Dakota	0.8	*	*	0.1
Tennessee	5.9	*	0.1	0.7
Texas	22.7	0.4	0.7	3.9
Utah	2.7	*	0.1	0.4
Vermont	0.6	*	*	*
Virginia	7.2	0.1	0.1	0.8
Washington	6.6	0.1	0.1	0.5
West Virginia	1.6	*	*	0.1
Wisconsin	5.3	*	0.1	0.4
Wyoming	0.5	*	*	0.1

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

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

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

**Table 10: Persons with Other Private Health Insurance (OPHI)
by Age and Type of Coverage: CY 2016**

(numbers in millions)

		OPHI in CY 2016		
		Total	Exchange	Not Exchange
Age	Total	52.0	10.0	42.0
	<18	8.1	1.8	6.3
	18 - 34	10.6	2.5	8.1
	35 - 54	11.7	2.9	8.8
	55 - 64	7.5	2.5	4.9
	65+	14.0	0.2	13.8

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

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

DATA SOURCES, UPDATES AND REVISIONS

This section briefly outlines the process and data sources used in the creation of the March 2017 Auxiliary Data. Greater detail on the current imputations and edits performed in order to provide estimates of employer sponsored insurance for calendar year (CY) 2016 can be found in “Technical Appendix: March 2017 CPS Auxiliary Data.”¹⁴

The starting data set is the March 2017 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 2013 through 2015.
- For persons with coverage from a former employer, it was necessary to impute both sector and size of the

employer providing the coverage. This was done using the most recent three years of data (2014-2016) 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 KFF/HRET Employer Health Benefits Surveys were used to impute funding status and type of coverage for those with ESI as well as to help partition coverage from a former employer into retiree and COBRA.¹⁵ Data from the FEHB program 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), updated with trends in union coverage from both the National Health Interview Survey (NHIS) and later SIPP survey questions, was used to provide the basis of the union imputation for those with coverage from a former employer (either COBRA or retiree).¹⁶ 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.
- Actuarial analysis performed by ARC for EBSA using data from the National Compensation Survey (NCS) from the Bureau of Labor Statistics formed the basis of our actuarial value (AV) data.¹⁷ The AV distributions

¹⁴ See technical appendix at <https://www.dol.gov/agencies/ebsa/researchers/data/auxiliary-data>.

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

¹⁶ 2010 data.

¹⁷ “Final Report: Analysis of Actuarial Values and Plan Funding Using Plans from the National Compensation Survey,” compiled for the Office of Policy and Research (OPR), Employee Benefits Security Administration (EBSA), Department of Labor (DOL) by Actuarial Research Corporation (ARC), May 12, 2017. <https://www.dol.gov/sites/default/files/ebsa/researchers/analysis/health-and->

and means from the analysis were augmented with plan level data from the 2016 KFF/HRET Employer Health Benefits Survey and imputed onto active policyholder records.

- The out of pocket expenditure variable, as tabulated and presented on the Auxiliary Data file, is the sum of the raw CPS variables POTC-VAL and PMED-VAL. No editing was performed.
- For a subset of persons with OPHI, imputations for persons with individual coverage through ACA exchanges have been imputed onto the Auxiliary Data file based on reports released from CMS.¹⁸ No distinction has been made by type of exchange (state vs. Federal). In addition, flags have been added to the data to denote if a person resides in a Medicaid expansion state as of 2016.
- A newly constructed variable indicating point-in-time ESI policyholder status has been added to the auxiliary data file. While it was not explicitly tabulated, it was used in the assignment and imputation of employer offer status.

The revisions to the CPS itself for March 2014 were extensive and included redesigned questions for income and insurance (including exchange-based coverage) as well as new questions on employer offers and employee take-ups. For March 2015, the largest change was the release of the variable that clarified the source of health insurance from outside the household. In

welfare/analysis-of-actuarial-values-and-plan-funding-using-plans-from-the-national-compensation-survey.pdf.

¹⁸ “June 12, 2017 Effectuated Enrollment Snapshot Report.”

<https://downloads.cms.gov/files/effectuated-enrollment-snapshot-report-06-12-17.pdf>.

addition, missing from the March 2015 data, as released, was the 1960 Census State Code (which includes region as the first digit). ARC has again recoded the FIPS code to match the prior format and has included the variable on the data file. There were no changes for either the March 2016 or March 2017 CPS data.

As with last year, the CPS data released by Census in September was recoded to be consistent in format with that released in prior years and does not include any new questions asked. Separate research files, released by Census, contain a point-in-time health insurance yes/no variable (NOW_ANYCOV), as well as the variable on insurance coverage from outside the household (OUTTYP).¹⁹ We have included these variables in our Auxiliary Data.

Estimates of coverage for CY 2016 are similar to those from CY 2015, and both individual and Medicaid coverage prevalence appear to have stabilized. This is a change from the pattern found last year when there were continued Medicaid expansions and private insurance exchanges continuing enrollment. The number of uninsured individuals has dropped only slightly.

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