

Mitigating the Loss of Private Insurance With Public Coverage for the Under-65 Population: 2008 to 2012

American Community Survey Briefs

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Issued September 2013
ACSB/12-11

INTRODUCTION

In periods of economic downturn, the ability of individuals to access and afford private health insurance becomes more limited. Federal, state, and local programs exist to improve disadvantaged individuals' access to health care in the form of public coverage, including coverage for some of those who have become economically disadvantaged during those periods. This report uses 1-year American Community Survey (ACS) data to examine changes in the uninsured rate of people under age 65¹ and the ability of this public "safety net" to either partially or wholly compensate for decreases in private health insurance during two periods: from 2008 to 2010 and from 2010 to 2012.²

CHANGES IN COVERAGE OF THE UNDER-65 POPULATION IN THE UNITED STATES: 2008 to 2010

According to American Community Survey data, from 2008 to 2010, unemployment³ increased from 6.4 percent to 10.8 percent, and the median income for families with at least one person under age 65 fell from \$69,102 to \$64,902 (in 2012 dollars). The United States also saw an increase in the poverty rate (13.3 percent to 15.3 percent), and the percentage of households with public cash assistance rose from 2.3

¹ Given that most adults over the age of 64 are eligible for Medicare, a form of public coverage, the reports seeks to eliminate the effects of an aging population by looking at people under the age of 65.

² Trends in health insurance coverage were very similar from 2008 to 2009 and from 2009 to 2010, as were the trends from 2010 to 2011 and from 2011 to 2012.

³ Of the civilian labor force, aged 16 to 64.

DEFINITIONS

Private health insurance: Health insurance provided through an employer or a union, a plan purchased by an individual from an insurance company, or TRICARE or other military health coverage.

Public coverage: Includes the federal programs Medicare, Medicaid and other medical assistance programs, VA Health Care; the Children's Health Insurance Program (CHIP); and individual state health plans.

percent to 2.9 percent. As expected in such a period of economic decline, the percentage of people under the age of 65 with only private health insurance⁴ decreased from 66.1 percent to 62.5 percent (Table 1). Making up for some of that loss, public health coverage increased 2.4 percentage points, from 17.4 percent to 19.8 percent. However, that increase was not large enough to offset the 3.6 percentage point loss in private health insurance. The result was a net 1.1⁵ percentage point increase in the uninsured rate from 2008 to 2010.

⁴ This report divides the population into three mutually exclusive categories: 1) Uninsured, 2) With private insurance only, and 3) With public coverage. Individuals with both private insurance and public coverage fall into the "with public coverage" category. For the purposes of the report, any reference to "private insurance" should be treated as "with private insurance only."

⁵ Apparent discrepancy is due to rounding.

Table 1.
Coverage by Type of Health Insurance
 (Civilian noninstitutionalized population under age 65)

Characteristic	2008		2010		2012		Difference 2008–2010	Difference 2010–2012
	Percent	Margin of error (\pm) ¹	Percent	Margin of error (\pm) ¹	Percent	Margin of error (\pm) ¹	Percent ²	Percent ²
With private health insurance only. . .	66.1	0.1	62.5	0.1	62.2	0.1	*-3.6	*-0.4
With public coverage	17.4	0.1	19.8	0.1	20.9	0.1	*2.4	*1.1
Uninsured	16.5	0.1	17.7	0.1	16.9	0.1	*1.1	*-0.7

* Statistically different from zero at the 90 percent confidence level.

¹ Data are based on a sample and are subject to sampling variability. A margin of error is a measure of an estimate's variability. The larger the margin of error is in relation to the size of the estimate, the less reliable the estimate. This number when added to and subtracted from the estimate forms the 90 percent confidence interval.

² Differences are calculated with unrounded numbers, which may produce different results from using the rounded values in the table.

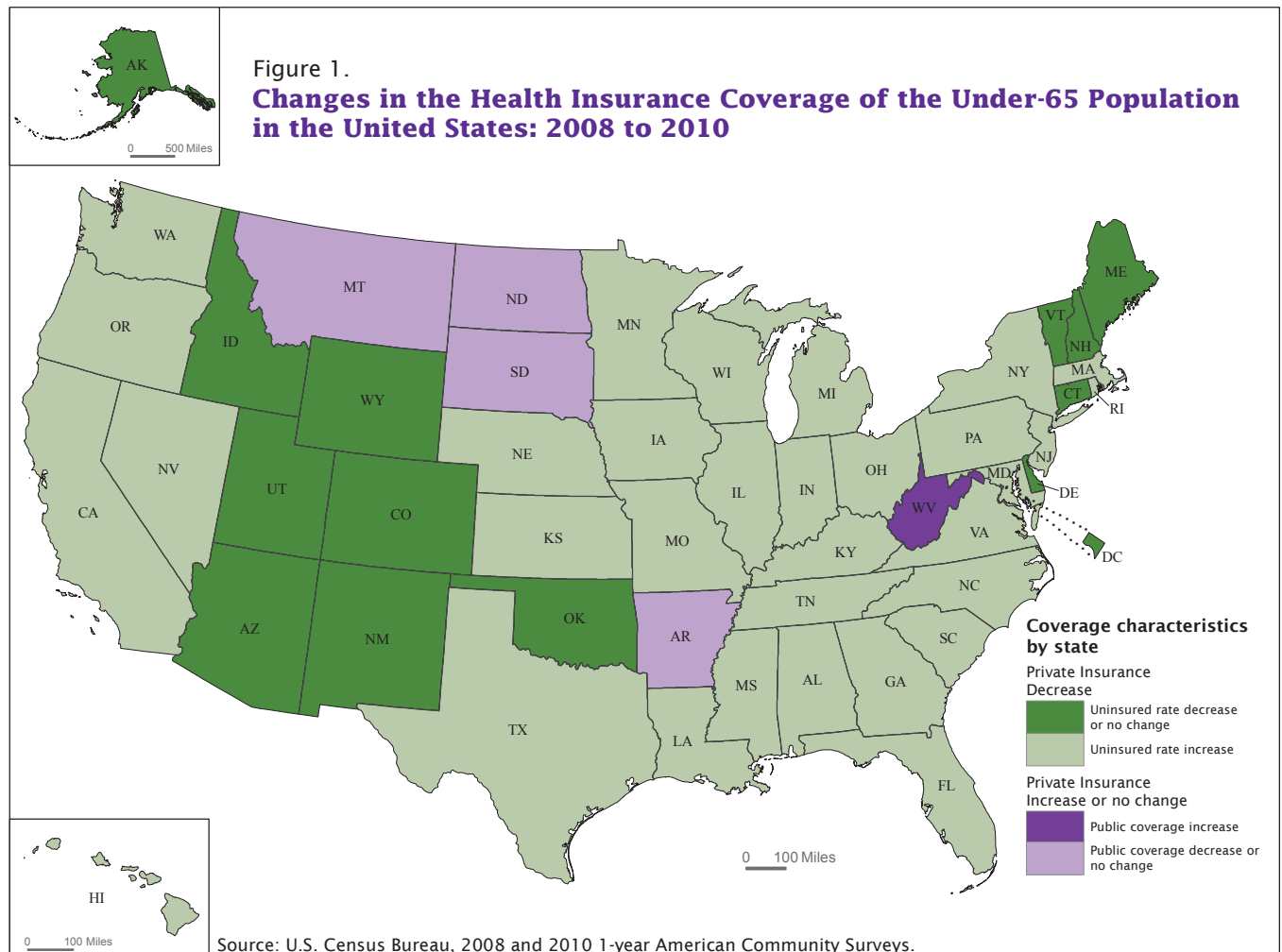
Sources: U.S. Census Bureau 2008, 2010, and 2012 1-year American Community Surveys.

CHANGES IN COVERAGE OF THE UNDER-65 POPULATION AMONG STATES: 2008 to 2010

Given the fact that states have different policies and programs, it is not surprising that their safety nets have varied effects on the

uninsured rate when faced with decreases in private insurance. Between 2008 and 2010, all but 5 states had decreases in private insurance, and of those 45 states and the District of Columbia, only Rhode Island and Wyoming did

not have a statistically significant increase in public coverage. In 32 of these 45 states, the loss of private insurance outpaced the gains in public coverage, resulting in an increase in the uninsured rate. Hawaii had among the largest



declines in private insurance (5.9 percentage points),⁶ but it also had among the largest rises in public coverage (4.5 percentage points, Table 2).⁷ Comparatively, Kansas had less of decrease of private coverage (3.8 percentage points), but its public coverage increased by only 0.9 percentage points, giving it the largest net increase in its uninsured rate (2.9 percentage points).⁸

In the remaining 13 states (Alaska, Arizona, Colorado, Connecticut, Delaware, Idaho, Maine, New Hampshire, New Mexico, Oklahoma, Utah, Vermont, and Wyoming) and the District of Columbia, the increase in public coverage was enough to offset the loss of private insurance.⁹ In fact, there was such an increase in public coverage in Arizona, Colorado, and New Mexico that the uninsured rate decreased from 2008 to 2010.

Arkansas, Montana, North Dakota, South Dakota, and West Virginia were the five states that did not have a statistically significant change in the percentage of people under the age of 65 with private insurance. Given there was no loss of private health insurance to mitigate, it is not surprising that public coverage did not change in almost all of those states. Only West Virginia had a statistically significant increase, adding 1.3 percentage points to the percent of

⁶ Hawaii's change in private insurance only is not statistically different from that of Delaware, Florida, Indiana, Michigan, Nevada, Oregon, Rhode Island, Vermont, or Wisconsin.

⁷ Hawaii's change in public coverage is not statistically different from that of Arizona, Connecticut, Delaware, Florida, Maryland, Michigan, New Mexico, Oregon, Vermont, or Wisconsin.

⁸ Kansas' change in the percent uninsured is not statistically different from Kentucky, Nevada, Rhode Island, South Dakota, or Wyoming.

⁹ Wyoming's increase in public coverage was not statistically significant, but the state did not have a change in the uninsured rate after a statistically significant decrease in private insurance.

under-65 population with public coverage.

CHANGES IN COVERAGE OF THE UNDER-65 POPULATION AMONG METRO AREAS: 2008 to 2010

The trend for the nation and the states was also seen in the country's 25 largest metropolitan statistical areas. All but the San Antonio-New Braunfels, TX Metro Area had a statistically significant decrease in the percentage of people under the age of 65 with private insurance. The San Antonio-New Braunfels, TX Metro Area also did not have a significant change in the percentage of people under the age of 65 with public coverage, as well as no significant change in the uninsured rate of that population.

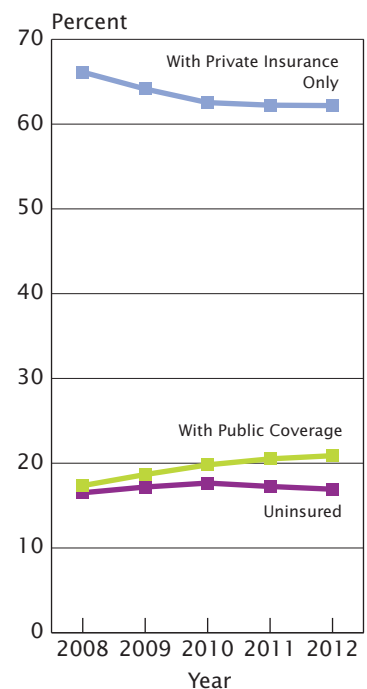
Of the 24 metro areas that had decreases in private insurance, all had increases in the percentage of people under the age of 65 with public coverage. In both the Dallas-Fort Worth-Arlington, TX Metro Area and the Phoenix-Mesa-Glendale, AZ Metro Area, this increase was large enough to cause the uninsured rate to decline, dropping 0.8 and 1.0 percentage points, respectively (Table 3).¹⁰ In six other metro areas (Baltimore-Towson, MD; Denver-Aurora-Broomfield, CO; Orlando-Kissimmee-Sanford, FL; Pittsburgh, PA; San Diego-Carlsbad-San Marcos, CA; and Tampa-St. Petersburg-Clearwater, FL), the increase was only enough to compensate for the decrease, resulting in no statistical change in the uninsured rate. In the remaining 16 metro areas, the increase in public coverage was not enough to prevent the uninsured rate from climbing.

¹⁰ The decline in the uninsured rate in the Dallas-Fort Worth-Arlington, TX Metro Area and the decline in the uninsured rate of the Phoenix-Mesa-Glendale, AZ Metro Area are not statistically different.

CHANGES IN COVERAGE OF THE UNDER-65 POPULATION IN THE UNITED STATES: 2010 to 2012

Although many of the economic indicators continued to decline between 2010 and 2012, they did so at a slower rate than from 2008 to 2010. The median income of families with at least one person under 65 decreased, but only by \$816 (in 2012 dollars), compared with a \$4200 drop from 2008 to 2010. The poverty rate decreased by 1.4 fewer percentage points (2.0 percentage points between 2008 and 2010 compared with 0.6 percentage points between 2010 and 2012), and the percentage of households with cash public assistance remained steady at 2.9 percent. Employment rebounded, as

Figure 2.
Coverage by Type of Health Insurance: 2012
(Civilian noninstitutionalized population under age 65)



Source: U.S. Census Bureau 2008, 2009, 2010, 2011, and 2012 1-year American Community Surveys.

the unemployment rate¹¹ decreased by 1.4 percentage points during the latter period.

The decrease in percentage of people under the age of 65 with only private health insurance also started to rebound from 2010 to 2012, as it fell only 0.4 percentage points compared with the 3.6 percentage point decrease from 2008 to 2010 (Table 1). Parallel with the smaller decrease in private health insurance, there also was a smaller increase in the percentage of people under the age of 65 with public health coverage. Public coverage grew from 19.8 percent to 20.9 percent, less than the 2.4 percentage point increase from 2008 to 2010.

¹¹ Of the civilian labor force, aged 16 to 64.

Even though the increase in public coverage was smaller from 2010 to 2012 than from 2008 to 2010, those gains outnumbered the relatively smaller loss of private insurance. Facing a less substantial decrease in private insurance, the increase in public insurance lowered the uninsured rate of people under the age of 65 by 0.7 percentage points to 16.9 percent in 2012.

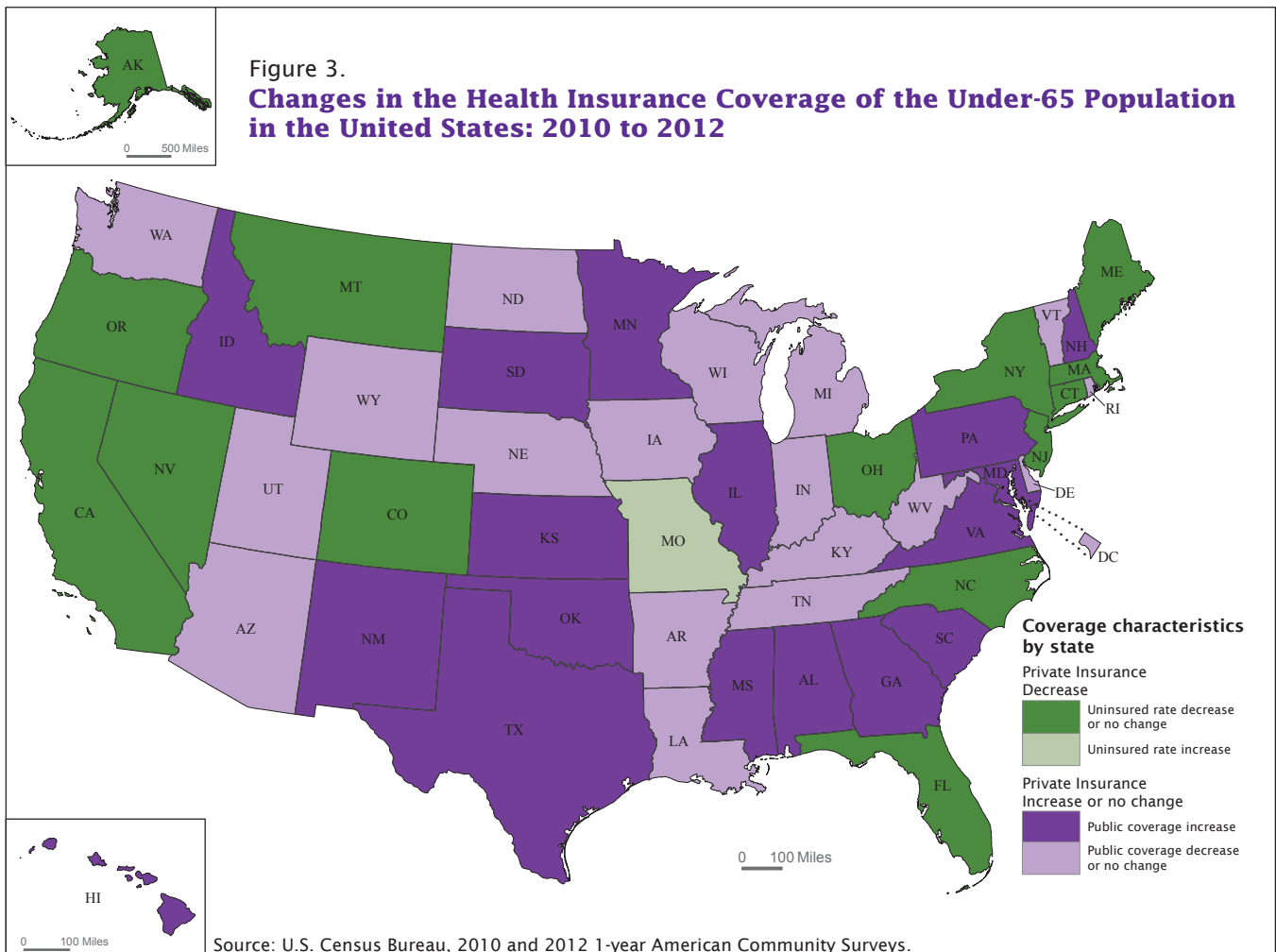
CHANGES IN COVERAGE OF THE UNDER-65 POPULATION AMONG STATES: 2010 to 2012

Even though the United States saw a decrease in the percentage of people under the age of 65 with private health insurance from 2010 to 2012, most states (32) and the District of Columbia did not have a

statistically significant change. Of these 33, 14 states and the District of Columbia also had no statistical change in the percentage of people under age 65 with public coverage.¹² Only Arizona had a decrease in public coverage, and the result was a 1.0 percentage point increase in Arizona's uninsured rate for people under 65 (Table 2). The remaining 17 states of the 32 whose private insurance rate did not change had increases in public coverage. In most of these states,¹³ the increase in public coverage caused a reduction in the uninsured

¹² Arkansas, Delaware, Indiana, Iowa, Louisiana, Nebraska, North Dakota, Rhode Island, Tennessee, Utah, Washington, West Virginia, Wisconsin, and Wyoming.

¹³ Alabama, Georgia, Hawaii, Idaho, Illinois, Kansas, Maryland, Minnesota, Mississippi, New Mexico, Pennsylvania, Texas, and Virginia.



rate. However, in New Hampshire, Oklahoma, South Carolina, and South Dakota, the increase was not large enough to produce a statistical change in the uninsured rate.

Kentucky, Michigan, and Vermont saw increases in the rate of private insurance. In all three of these states, the percentage of people under the age of 65 with public health coverage did not change statistically, but the uninsured rate fell due to the increase in private insurance.

Following the trend of the United States as a whole, 15 states had a statistical decrease in private insurance from 2010 to 2012. Of these, only Alaska did not have an increase in public coverage. However, Alaska's uninsured rate for people under age 65 did not statistically change. In Missouri, there was an increase in public coverage, but the greater loss in private insurance caused an increase in the uninsured rate. The increases in public coverage cancelled the effect of the loss in private insurance in Connecticut, Maine, Montana, Nevada, and North Carolina, which had no statistical change in their uninsured rates. However, gains in public coverage drove the uninsured rate down in California, Colorado, Florida, Massachusetts, New Jersey, New York, Ohio, and Oregon.

CHANGES IN COVERAGE OF THE UNDER-65 POPULATION AMONG METRO AREAS: 2010 to 2012

As was the case with states, most of the 25 largest metropolitan areas did not have a statistical change in the percentage of people under the age of 65 with private health insurance (16, Table 3). The Detroit-Warren-Livonia, MI; Phoenix-Mesa-Glendale, AZ; Pittsburgh, PA; San Antonio-New

Braunfels, TX; and Seattle-Tacoma-Bellevue, WA metropolitan areas also saw no change in the percentage of people under the age of 65 with public coverage. Even without a change in private insurance, the remaining 11 of those 16 metropolitan areas (Atlanta-Sandy Springs-Marietta, GA; Baltimore-Towson, MD; Chicago-Joliet-Naperville, IL-IN-WI; Houston-Sugar Land-Baytown, TX; Los Angeles-Long Beach-Santa Ana, CA; Miami-Fort Lauderdale-Pompano Beach, FL; Portland-Vancouver-Hillsboro, OR-WA; San Diego-Carlsbad-San Marcos, CA; San Francisco-Oakland-Fremont, CA; Tampa-St. Petersburg-Clearwater, FL; and Washington-Arlington-Alexandria, DC-VA-MD-WV) had increases in the percentage of people under the age of 65 with public coverage.

In eight metropolitan areas, the 2008 to 2010 decrease in the percentage of people under the age of 65 with private health insurance continued through 2012 (Boston-Cambridge-Quincy, MA-NH; Dallas-Fort Worth-Arlington, TX; Denver-Aurora-Broomfield, CO; New York-Northern New Jersey-Long Island, NY-NJ-PA; Orlando-Kissimmee-Sanford, FL; Philadelphia-Camden-Wilmington, PA-NJ-DE-MD; Riverside-San Bernardino-Ontario, CA; and St. Louis, MO-IL). However, each of these metropolitan areas avoided a decrease in the overall uninsured rate because of an increase in public coverage. Additionally, the public coverage gains in the Boston-Cambridge-Quincy, MA-NH; New York-Northern New Jersey-Long Island, NY-NJ-PA; and Riverside-San Bernardino-Ontario, CA metropolitan areas resulted in a decrease in the uninsured rate.

The Minneapolis-St. Paul-Bloomington, MN-WI Metro Area was the only one of the 25 largest

metropolitan areas that had an increase in the percentage of people under the age of 65 with private health insurance from 2010 to 2012. Because of this increase, the uninsured rate decreased, even though the percentage of people under the age of 65 with only public coverage did not significantly change.

SOURCE AND ACCURACY

The most current data presented in this report are based on the ACS sample interviewed from January 2012 through December 2012. Data from the 2008 and 2010 ACS are included to examine change. The estimates based on this sample describe the actual average values of person, household, and housing unit characteristics over this period of collection. Sampling error is the uncertainty between an estimate based on a sample and the corresponding value that would be obtained if the estimate were based on the entire population (as from a census). Measures of sampling error are provided in the form of margins of error for all estimates included in this report. All comparative statements in this report have undergone statistical testing, and comparisons are significant at the 90 percent level unless otherwise noted. In addition to sampling error, nonsampling error may be introduced during any of the operations used to collect and process survey data such as editing, reviewing, or keying data from questionnaires. For more information on sampling and estimation methods, confidentiality protection, and sampling and nonsampling errors, please see the 2012 ACS Accuracy of the Data document located at www.census.gov/acs/www/Downloads/data_documentation/Accuracy/ACS_Accuracy_of_Data_2012.pdf.

Table 2.

Coverage by Type of Health Insurance by State

(Civilian noninstitutionalized population under age 65)

State	Type	2008		2010		2012		Difference 2008– 2010	Difference 2010– 2012
		Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹		
Alabama	With private health insurance only	64.6	0.6	61.0	0.7	60.4	0.6	*-3.6	-0.5
	With public coverage	20.1	0.4	22.2	0.5	24.0	0.4	*2.1	*1.9
	Uninsured	15.3	0.4	16.8	0.4	15.5	0.4	*1.5	*-1.3
Alaska	With private health insurance only	63.2	1.3	60.8	1.4	58.7	1.4	*-2.3	*-2.1
	With public coverage	16.3	1.1	17.9	1.0	19.0	1.0	*1.5	1.1
	Uninsured	20.5	1.1	21.3	1.1	22.3	1.1	0.8	1.1
Arizona	With private health insurance only	58.9	0.6	56.5	0.6	56.4	0.6	*-2.4	-0.1
	With public coverage	20.5	0.5	24.1	0.5	23.2	0.4	*3.6	*-0.9
	Uninsured	20.6	0.4	19.4	0.4	20.4	0.5	*-1.2	*1.0
Arkansas	With private health insurance only	55.2	0.8	54.1	0.8	55.0	0.6	-1.1	0.9
	With public coverage	25.0	0.5	25.6	0.5	25.8	0.6	0.7	0.2
	Uninsured	19.8	0.6	20.3	0.6	19.2	0.4	0.5	*-1.1
California	With private health insurance only	62.3	0.2	58.7	0.2	58.2	0.2	*-3.7	*-0.4
	With public coverage	18.5	0.2	20.6	0.2	21.7	0.2	*2.2	*1.0
	Uninsured	19.2	0.2	20.7	0.2	20.1	0.2	*1.5	*-0.6
Colorado	With private health insurance only	69.7	0.5	67.3	0.6	66.3	0.6	*-2.4	*-1.0
	With public coverage	11.8	0.4	14.9	0.5	17.1	0.5	*3.1	*2.2
	Uninsured	18.5	0.5	17.8	0.5	16.6	0.4	*-0.7	*-1.2
Connecticut	With private health insurance only	75.6	0.7	72.1	0.7	70.0	0.6	*-3.6	*-2.0
	With public coverage	14.4	0.6	17.6	0.5	19.5	0.5	*3.2	*1.9
	Uninsured	10.0	0.5	10.4	0.4	10.5	0.4	0.4	0.1
Delaware	With private health insurance only	70.5	1.5	66.3	1.5	65.7	1.1	*-4.2	-0.6
	With public coverage	18.0	1.1	22.4	1.4	24.1	1.2	*4.5	1.6
	Uninsured	11.5	0.9	11.3	0.9	10.3	0.8	-0.3	-1.0
District of Columbia	With private health insurance only	65.9	1.2	63.9	1.3	64.8	1.3	*-2.0	0.8
	With public coverage	25.8	1.3	27.7	1.3	28.6	1.2	*1.9	0.9
	Uninsured	8.3	0.7	8.4	0.7	6.6	0.6	0.1	*-1.8
Florida	With private health insurance only	60.8	0.3	55.8	0.4	54.9	0.3	*-5.0	*-0.9
	With public coverage	15.1	0.2	18.8	0.2	20.9	0.3	*3.7	*2.1
	Uninsured	24.2	0.3	25.4	0.3	24.2	0.2	*1.3	*-1.2
Georgia	With private health insurance only	62.8	0.4	59.3	0.5	59.3	0.4	*-3.5	-0.1
	With public coverage	17.1	0.3	18.8	0.3	20.0	0.3	*1.7	*1.3
	Uninsured	20.1	0.4	21.9	0.4	20.7	0.3	*1.8	*-1.2
Hawaii	With private health insurance only	78.7	1.0	72.8	1.0	72.5	0.9	*-5.9	-0.3
	With public coverage	13.7	0.7	18.2	0.9	19.6	0.8	*4.5	*1.4
	Uninsured	7.6	0.6	9.0	0.5	8.0	0.5	*1.4	*-1.0
Idaho	With private health insurance only	65.7	1.0	63.0	0.9	62.1	1.1	*-2.7	-0.9
	With public coverage	14.9	0.6	16.7	0.8	19.3	0.9	*1.8	*2.6
	Uninsured	19.4	0.7	20.2	0.8	18.6	0.7	0.9	*-1.7
Illinois	With private health insurance only	68.8	0.4	64.6	0.3	64.7	0.3	*-4.2	0.1
	With public coverage	17.4	0.2	19.9	0.3	20.8	0.2	*2.5	*0.9
	Uninsured	13.9	0.3	15.5	0.2	14.5	0.2	*1.6	*-1.0
Indiana	With private health insurance only	69.1	0.5	64.6	0.5	64.8	0.5	*-4.5	0.2
	With public coverage	15.7	0.4	18.5	0.4	18.8	0.3	*2.8	0.3
	Uninsured	15.2	0.4	16.9	0.4	16.4	0.4	*1.7	*-0.5
Iowa	With private health insurance only	74.8	0.6	71.2	0.6	71.6	0.6	*-3.6	0.4
	With public coverage	15.2	0.5	18.0	0.6	18.6	0.4	*2.8	0.6
	Uninsured	10.0	0.4	10.8	0.4	9.8	0.4	*0.8	*-1.0
Kansas	With private health insurance only	73.5	0.7	69.7	0.7	69.4	0.6	*-3.8	-0.3
	With public coverage	13.5	0.5	14.4	0.5	16.1	0.4	*0.9	*1.7
	Uninsured	13.0	0.5	15.9	0.5	14.4	0.4	*2.9	*-1.4
Kentucky	With private health insurance only	63.1	0.6	59.8	0.7	60.9	0.6	*-3.4	*1.1
	With public coverage	21.8	0.5	22.7	0.5	23.0	0.5	*0.9	0.3
	Uninsured	15.1	0.4	17.5	0.4	16.1	0.4	*2.5	*-1.5
Louisiana	With private health insurance only	57.5	0.6	54.5	0.6	55.0	0.5	*-3.0	0.5
	With public coverage	23.3	0.5	25.3	0.5	25.8	0.5	*2.1	0.4
	Uninsured	19.2	0.4	20.2	0.5	19.3	0.4	*1.0	*-0.9

See notes at end of table.

Table 2.

Coverage by Type of Health Insurance by State—Con.

(Civilian noninstitutionalized population under age 65)

State	Type	2008		2010		2012		Difference 2008– 2010	Difference 2010– 2012
		Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹		
Maine	With private health insurance only	63.7	1.0	61.9	0.9	60.2	1.0	*-1.8	*-1.6
	With public coverage	24.2	0.9	26.2	0.8	27.5	1.0	*2.0	*1.3
	Uninsured	12.2	0.6	12.0	0.6	12.3	0.6	-0.2	0.3
Maryland	With private health insurance only	75.1	0.5	71.1	0.5	70.6	0.5	*-4.0	-0.5
	With public coverage	12.9	0.4	16.3	0.5	17.8	0.4	*3.4	*1.5
	Uninsured	12.0	0.3	12.6	0.3	11.7	0.3	*0.6	*-0.9
Massachusetts	With private health insurance only	76.7	0.5	73.1	0.5	72.1	0.4	*-3.6	*-1.1
	With public coverage	18.9	0.4	21.8	0.4	23.5	0.4	*2.9	*1.7
	Uninsured	4.4	0.2	5.0	0.2	4.4	0.2	*0.6	*-0.6
Michigan	With private health insurance only	67.9	0.4	62.8	0.4	63.4	0.4	*-5.0	*0.6
	With public coverage	19.6	0.3	22.9	0.3	23.3	0.3	*3.3	0.4
	Uninsured	12.5	0.2	14.3	0.2	13.3	0.2	*1.8	*-1.0
Minnesota	With private health insurance only	76.6	0.4	73.0	0.5	73.5	0.4	*-3.6	0.5
	With public coverage	13.9	0.3	16.7	0.4	17.4	0.4	*2.8	*0.6
	Uninsured	9.5	0.3	10.3	0.3	9.1	0.2	*0.8	*-1.2
Mississippi	With private health insurance only	56.2	0.8	52.2	0.9	52.0	0.7	*-3.9	-0.2
	With public coverage	24.6	0.7	27.0	0.6	28.3	0.5	*2.4	*1.4
	Uninsured	19.2	0.6	20.8	0.6	19.6	0.4	*1.5	*-1.2
Missouri	With private health insurance only	68.3	0.5	66.2	0.5	64.7	0.5	*-2.1	*-1.5
	With public coverage	17.4	0.4	18.6	0.4	19.5	0.4	*1.2	*0.9
	Uninsured	14.3	0.4	15.2	0.3	15.8	0.4	*0.9	*0.6
Montana	With private health insurance only	64.4	1.3	63.3	1.3	59.6	1.1	-1.2	*-3.7
	With public coverage	15.3	0.8	16.5	1.0	19.2	0.9	1.1	*2.7
	Uninsured	20.2	1.0	20.2	0.9	21.3	0.7	Z	1.0
Nebraska	With private health insurance only	74.5	0.7	71.0	0.8	71.2	0.8	*-3.5	0.2
	With public coverage	13.1	0.5	15.8	0.6	15.9	0.5	*2.6	0.1
	Uninsured	12.3	0.6	13.2	0.4	12.9	0.5	*0.9	-0.3
Nevada	With private health insurance only	65.9	0.8	61.0	0.8	59.2	0.8	*-4.9	*-1.8
	With public coverage	10.9	0.6	13.6	0.6	15.6	0.6	*2.7	*2.0
	Uninsured	23.2	0.8	25.4	0.6	25.2	0.7	*2.2	-0.3
New Hampshire	With private health insurance only	76.1	0.9	73.7	1.1	72.9	1.1	*-2.5	-0.7
	With public coverage	12.0	0.7	13.6	0.7	14.8	0.8	*1.6	*1.2
	Uninsured	11.9	0.7	12.8	0.8	12.3	0.7	0.9	-0.4
New Jersey	With private health insurance only	73.6	0.4	70.1	0.4	69.5	0.4	*-3.4	*-0.6
	With public coverage	12.9	0.3	14.9	0.3	16.0	0.3	*2.0	*1.1
	Uninsured	13.5	0.3	15.0	0.3	14.5	0.4	*1.4	*-0.5
New Mexico	With private health insurance only	53.1	1.0	50.7	1.0	50.5	0.8	*-2.5	-0.2
	With public coverage	23.3	0.8	26.9	0.8	28.3	0.7	*3.6	*1.4
	Uninsured	23.6	0.7	22.4	0.8	21.2	0.6	*-1.2	*-1.2
New York	With private health insurance only	66.2	0.3	63.1	0.3	62.5	0.2	*-3.2	*-0.5
	With public coverage	20.8	0.2	23.4	0.3	25.0	0.2	*2.6	*1.6
	Uninsured	13.0	0.2	13.5	0.2	12.5	0.2	*0.6	*-1.1
North Carolina	With private health insurance only	64.1	0.4	60.4	0.4	59.2	0.4	*-3.8	*-1.2
	With public coverage	18.4	0.3	20.5	0.3	21.7	0.3	*2.1	*1.3
	Uninsured	17.5	0.3	19.1	0.3	19.1	0.3	*1.6	-0.1
North Dakota	With private health insurance only	76.3	1.2	76.6	1.2	77.1	1.0	0.2	0.5
	With public coverage	12.0	0.9	12.1	0.9	11.4	0.7	0.1	-0.7
	Uninsured	11.6	0.9	11.3	0.8	11.6	0.8	-0.3	0.3
Ohio	With private health insurance only	70.3	0.3	66.0	0.3	65.2	0.4	*-4.3	*-0.7
	With public coverage	16.7	0.3	19.8	0.3	21.4	0.3	*3.1	*1.6
	Uninsured	13.0	0.3	14.2	0.3	13.3	0.2	*1.2	*-0.9
Oklahoma	With private health insurance only	59.5	0.7	57.3	0.6	56.9	0.4	*-2.1	-0.5
	With public coverage	19.1	0.5	21.0	0.4	21.9	0.3	*1.9	*0.9
	Uninsured	21.4	0.5	21.7	0.4	21.2	0.4	0.3	-0.5
Oregon	With private health insurance only	67.7	0.7	62.7	0.7	61.6	0.6	*-5.0	*-1.0
	With public coverage	14.2	0.5	17.6	0.5	20.9	0.5	*3.4	*3.4
	Uninsured	18.1	0.5	19.8	0.5	17.4	0.5	*1.7	*-2.4

See notes at end of table.

Table 2.

Coverage by Type of Health Insurance by State—Con.

(Civilian noninstitutionalized population under age 65)

State	Type	2008		2010		2012		Difference 2008– 2010	Difference 2010– 2012
		Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent ²	Percent ²
Pennsylvania	With private health insurance only	72.2	0.3	68.6	0.4	68.4	0.3	*-3.5	-0.2
	With public coverage	17.3	0.3	19.5	0.3	20.2	0.3	*2.2	*0.6
	Uninsured	10.5	0.2	11.9	0.2	11.5	0.2	*1.4	*-0.4
Rhode Island	With private health insurance only	70.6	1.1	66.9	1.3	67.3	1.2	*-3.7	0.4
	With public coverage	17.7	1.0	19.1	1.0	19.9	1.0	1.4	0.7
	Uninsured	11.7	0.8	14.0	0.8	12.9	0.7	*2.3	*-1.1
South Carolina	With private health insurance only	61.9	0.6	58.7	0.7	57.8	0.7	*-3.2	-0.9
	With public coverage	18.9	0.4	21.1	0.5	22.6	0.5	*2.2	*1.5
	Uninsured	19.2	0.4	20.2	0.5	19.6	0.5	*1.0	-0.6
South Dakota	With private health insurance only	70.0	1.3	69.2	1.3	68.9	1.0	-0.8	-0.3
	With public coverage	17.1	1.2	16.5	1.0	17.8	0.7	-0.6	*1.3
	Uninsured	12.9	0.8	14.4	1.0	13.3	0.7	*1.5	-1.0
Tennessee	With private health insurance only	64.6	0.5	60.8	0.6	60.9	0.6	*-3.8	0.1
	With public coverage	20.7	0.4	22.8	0.5	23.0	0.5	*2.1	0.2
	Uninsured	14.8	0.4	16.5	0.4	16.1	0.4	*1.7	-0.4
Texas	With private health insurance only	57.6	0.2	54.7	0.3	54.7	0.3	*-2.9	0.1
	With public coverage	16.7	0.2	19.1	0.2	20.3	0.2	*2.5	*1.1
	Uninsured	25.7	0.2	26.2	0.2	25.0	0.2	*0.5	*-1.2
Utah	With private health insurance only	73.1	0.7	70.3	0.7	71.2	0.7	*-2.8	0.9
	With public coverage	10.6	0.5	12.9	0.6	12.9	0.5	*2.3	Z
	Uninsured	16.4	0.6	16.8	0.6	15.9	0.5	0.4	*-0.9
Vermont	With private health insurance only	66.0	1.2	62.3	1.2	64.8	1.3	*-3.7	*2.5
	With public coverage	24.0	1.1	28.4	1.1	27.6	1.2	*4.4	-0.7
	Uninsured	10.1	0.7	9.4	0.8	7.6	0.6	-0.7	*-1.7
Virginia	With private health insurance only	74.9	0.5	71.9	0.4	71.7	0.4	*-3.0	-0.1
	With public coverage	12.0	0.3	13.4	0.3	14.0	0.3	*1.3	*0.6
	Uninsured	13.1	0.3	14.7	0.3	14.3	0.3	*1.7	*-0.5
Washington	With private health insurance only	69.2	0.5	65.4	0.4	65.4	0.5	*-3.8	Z
	With public coverage	16.7	0.4	18.5	0.3	18.7	0.3	*1.8	0.3
	Uninsured	14.1	0.3	16.1	0.4	15.9	0.3	*2.0	-0.3
West Virginia	With private health insurance only	59.1	1.0	58.0	1.2	58.2	0.9	-1.1	0.2
	With public coverage	23.4	0.7	24.8	0.8	24.6	0.7	*1.3	-0.2
	Uninsured	17.5	0.7	17.3	0.7	17.2	0.6	-0.2	Z
Wisconsin	With private health insurance only	74.1	0.5	69.0	0.5	69.4	0.4	*-5.1	0.4
	With public coverage	15.9	0.4	20.2	0.4	20.3	0.4	*4.3	0.1
	Uninsured	10.1	0.3	10.8	0.3	10.4	0.3	*0.7	*-0.5
Wyoming	With private health insurance only	69.9	1.4	67.0	1.6	65.4	1.7	*-3.0	-1.5
	With public coverage	14.6	1.1	16.1	1.2	17.1	1.2	1.5	0.9
	Uninsured	15.5	1.0	16.9	1.2	17.5	1.1	1.4	0.6

* Statistically different from zero at the 90 percent confidence level.

Z Represents or rounds to zero.

¹ Data are based on a sample and are subject to sampling variability. A margin of error is a measure of an estimate's variability. The larger the margin of error is in relation to the size of the estimate, the less reliable the estimate. This number when added to and subtracted from the estimate forms the 90 percent confidence interval.² Differences are calculated with unrounded numbers, which may produce different results from using the rounded values in the table.

Sources: U.S. Census Bureau, 2008, 2010, and 2012 1-year American Community Surveys.

Table 3.

Coverage by Type of Health Insurance by Metropolitan Area

(Civilian noninstitutionalized population under age 65)

Metropolitan area	Type	2008		2010		2012		Difference 2008– 2010	Difference 2010– 2012
		Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹		
Atlanta-Sandy Springs- Marietta, GA	With private health insurance only	66.7	0.6	63.0	0.6	63.3	0.6	*-3.7	0.3
	With public coverage	13.8	0.4	15.4	0.4	16.5	0.4	*1.6	*1.0
	Uninsured	19.5	0.5	21.6	0.5	20.2	0.5	*2.1	*-1.4
Baltimore-Towson, MD.	With private health insurance only	74.9	0.7	71.2	0.8	71.1	0.8	*-3.7	Z
	With public coverage	14.4	0.5	17.5	0.7	19.0	0.7	*3.1	*1.5
	Uninsured	10.7	0.5	11.3	0.5	9.9	0.4	0.6	*-1.4
Boston-Cambridge- Quincy, MA-NH	With private health insurance only	78.6	0.6	75.8	0.6	74.8	0.5	*-2.8	*-0.9
	With public coverage	16.5	0.5	18.6	0.6	20.3	0.5	*2.1	*1.7
	Uninsured	4.9	0.3	5.6	0.3	4.8	0.2	*0.7	*-0.8
Chicago-Joliet- Naperville, IL-IN-WI	With private health insurance only	69.1	0.4	64.5	0.4	64.6	0.4	*-4.6	0.1
	With public coverage	16.1	0.3	18.9	0.3	19.8	0.3	*2.8	*0.9
	Uninsured	14.9	0.4	16.6	0.3	15.6	0.2	*1.8	*-1.0
Dallas-Fort Worth- Arlington, TX	With private health insurance only	61.3	0.6	60.1	0.6	58.4	0.5	*-1.2	*-1.7
	With public coverage	13.4	0.3	15.4	0.4	17.3	0.4	*2.0	*1.9
	Uninsured	25.3	0.4	24.5	0.5	24.3	0.5	*-0.8	-0.3
Denver-Aurora- Broomfield, CO	With private health insurance only	71.1	0.6	68.2	0.8	66.9	0.8	*-3.0	*-1.3
	With public coverage	10.9	0.4	14.4	0.6	16.6	0.7	*3.5	*2.2
	Uninsured	18.0	0.6	17.4	0.7	16.5	0.7	-0.5	-0.9
Detroit-Warren-Livonia, MI	With private health insurance only	68.0	0.6	62.6	0.6	63.3	0.5	*-5.4	0.7
	With public coverage	19.0	0.4	22.4	0.5	22.8	0.5	*3.5	0.3
	Uninsured	13.0	0.3	15.0	0.4	13.9	0.3	*1.9	*-1.1
Houston-Sugar Land- Baytown, TX	With private health insurance only	59.2	0.6	55.2	0.6	55.3	0.6	*-4.0	0.2
	With public coverage	14.6	0.4	17.5	0.4	19.2	0.4	*2.9	*1.7
	Uninsured	26.2	0.5	27.3	0.5	25.4	0.5	*1.1	*-1.9
Los Angeles-Long Beach-Santa Ana, CA	With private health insurance only	58.9	0.4	55.5	0.4	55.6	0.4	*-3.4	Z
	With public coverage	18.4	0.3	19.8	0.3	21.1	0.3	*1.5	*1.3
	Uninsured	22.7	0.3	24.6	0.3	23.3	0.2	*1.9	*-1.3
Miami-Fort Lauderdale- Pompano Beach, FL	With private health insurance only	58.9	0.6	52.4	0.7	52.0	0.6	*-6.5	-0.4
	With public coverage	13.5	0.4	16.4	0.4	18.9	0.4	*2.8	*2.6
	Uninsured	27.5	0.5	31.2	0.5	29.1	0.5	*3.7	*-2.2
Minneapolis-St. Paul- Bloomington, MN-WI	With private health insurance only	78.7	0.6	74.4	0.6	75.5	0.5	*-4.3	*1.1
	With public coverage	12.3	0.5	15.5	0.5	15.8	0.4	*3.2	0.3
	Uninsured	9.0	0.4	10.1	0.4	8.8	0.4	*1.1	*-1.4
New York-Northern New Jersey-Long Island, NY-NJ-PA	With private health insurance only	67.0	0.3	63.5	0.3	62.9	0.3	*-3.5	*-0.5
	With public coverage	18.8	0.3	21.2	0.2	22.5	0.2	*2.4	*1.3
	Uninsured	14.2	0.2	15.3	0.2	14.5	0.2	*1.1	*-0.8
Orlando-Kissimmee- Sanford, FL	With private health insurance only	64.4	1.2	59.7	0.9	58.0	1.0	*-4.7	*-1.7
	With public coverage	12.6	0.6	16.8	0.7	18.8	0.7	*4.2	*2.0
	Uninsured	23.0	1.0	23.5	0.7	23.2	0.7	0.5	-0.3
Philadelphia-Camden- Wilmington, PA-NJ- DE-MD	With private health insurance only	73.6	0.4	70.2	0.5	68.5	0.5	*-3.4	*-1.7
	With public coverage	16.0	0.3	18.2	0.4	20.2	0.4	*2.2	*2.0
	Uninsured	10.4	0.4	11.6	0.3	11.2	0.3	*1.2	-0.3
Phoenix-Mesa- Glendale, AZ	With private health insurance only	62.1	0.6	59.3	0.7	59.4	0.7	*-2.8	0.1
	With public coverage	17.6	0.6	21.4	0.6	20.8	0.5	*3.8	-0.6
	Uninsured	20.3	0.5	19.3	0.5	19.8	0.5	*-1.0	0.5
Pittsburgh, PA	With private health insurance only	72.6	0.8	71.2	0.8	71.9	0.7	*-1.4	0.7
	With public coverage	17.9	0.6	18.9	0.7	18.6	0.6	*1.0	-0.3
	Uninsured	9.5	0.5	9.9	0.4	9.5	0.3	0.4	-0.4
Portland-Vancouver- Hillsboro, OR-WA	With private health insurance only	72.5	0.9	66.9	0.9	67.2	0.7	*-5.5	0.3
	With public coverage	12.6	0.7	15.9	0.6	17.5	0.5	*3.2	*1.6
	Uninsured	14.9	0.6	17.2	0.7	15.3	0.6	*2.3	*-1.9
Riverside-San Bernardino-Ontario, CA	With private health insurance only	58.4	0.7	53.5	0.7	52.4	0.7	*-4.9	*-1.1
	With public coverage	19.6	0.6	22.9	0.5	24.8	0.5	*3.3	*1.9
	Uninsured	21.9	0.6	23.6	0.5	22.8	0.6	*1.6	*-0.8
St. Louis, MO-IL	With private health insurance only	73.4	0.6	70.1	0.6	68.9	0.7	*-3.3	*-1.2
	With public coverage	15.5	0.5	17.3	0.5	18.2	0.5	*1.8	*0.9
	Uninsured	11.1	0.4	12.6	0.5	12.8	0.5	*1.5	0.3

See notes at end of table.

Table 3.

Coverage by Type of Health Insurance by Metropolitan Area—Con.

(Civilian noninstitutionalized population under age 65)

Metropolitan area	Type	2008		2010		2012		Difference 2008– 2010	Difference 2010– 2012
		Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent	Margin of error (±) ¹	Percent ²	Percent ²
San Antonio-New Braunfels, TX.	With private health insurance only	56.9	1.0	56.2	1.0	56.9	0.9	–0.6	0.6
	With public coverage	20.7	0.8	21.6	0.7	21.9	0.7	1.0	0.3
	Uninsured	22.5	0.8	22.1	0.8	21.2	0.7	–0.3	–0.9
San Diego-Carlsbad- San Marcos, CA	With private health insurance only	66.1	0.8	64.4	0.7	63.4	0.8	*–1.7	–1.0
	With public coverage	14.9	0.6	16.0	0.6	17.5	0.6	*1.0	*1.5
	Uninsured	19.0	0.6	19.6	0.6	19.1	0.7	0.6	–0.5
San Francisco-Oakland- Fremont, CA	With private health insurance only	74.5	0.6	70.9	0.6	70.8	0.6	*–3.6	–0.2
	With public coverage	13.2	0.4	15.2	0.5	16.1	0.5	*1.9	*0.9
	Uninsured	12.2	0.5	13.9	0.4	13.2	0.4	*1.7	*–0.7
Seattle-Tacoma- Bellevue, WA	With private health insurance only	74.7	0.7	70.4	0.6	70.5	0.6	*–4.3	Z
	With public coverage	13.1	0.4	15.0	0.5	15.0	0.4	*1.9	Z
	Uninsured	12.2	0.4	14.6	0.5	14.5	0.5	*2.4	Z
Tampa-St. Petersburg- Clearwater, FL.	With private health insurance only	62.1	0.8	57.7	0.9	56.8	0.8	*–4.4	–0.9
	With public coverage	16.0	0.7	20.1	0.7	21.9	0.6	*4.1	*1.9
	Uninsured	21.9	0.6	22.3	0.7	21.3	0.6	0.4	*–1.0
Washington-Arlington- Alexandria, DC-VA- MD-WV	With private health insurance only	77.8	0.4	74.3	0.5	74.3	0.5	*–3.5	–0.1
	With public coverage	10.3	0.3	12.3	0.3	13.1	0.3	*2.0	*0.8
	Uninsured	12.0	0.3	13.4	0.3	12.7	0.3	*1.4	*–0.7

* Statistically different from zero at the 90 percent confidence level.

Z Represents or rounds to zero.

¹ Data are based on a sample and are subject to sampling variability. A margin of error is a measure of an estimate's variability. The larger the margin of error is in relation to the size of the estimate, the less reliable the estimate. This number when added to and subtracted from the estimate forms the 90 percent confidence interval.

² Differences are calculated with unrounded numbers, which may produce different results from using the rounded values in the table.

Sources: U.S. Census Bureau, 2008, 2010, and 2012 1-year American Community Surveys.