Table 1. Percentage of young adults aged 19–25, by health insurance coverage status at time of interview and 6-month interval: United States, January 2009–June 2012

	He	Health insurance coverage status				
6-month interval	Uninsured ¹	Private ²	Public ³			
		Percent (standard error)				
2009 (January–June)	31.8 (1.25)	54.2 (1.44)	14.1 (0.94)			
2009 (July-December)	33.6 (0.83)	51.0 (0.93)	15.8 (0.68)			
2010 (January–June)	34.3 (1.01)	50.8 (1.15)	15.3 (0.79)			
2010 (July-December)	33.4 (1.01)	51.3 (1.16)	16.0 (0.79)			
2011 (January–June)	28.9 (0.98)	55.7 (1.17)	16.1 (0.73)			
2011 (July-December)	26.8 (0.99)	56.7 (1.21)	17.5 (0.78)			
2012 (January–June)	26.2 (1.07)	57.2 (1.31)	17.7 (0.74)			

¹Includes persons without private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government-sponsored health plan, or military plan. A person was also defined as uninsured if he or she had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

²Includes persons who had any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. A small number of persons were covered by both public and private plans and were included in both categories.

³Includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare (disability), and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

NOTES: The 2012 health insurance estimates are being released prior to final data editing and final weighting, to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage point from estimates based on final files. For comparison purposes, preliminary data from 2009–2011 are used. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: CDC/NCHS, National Health Interview Survey, January 2009–June 2012.

Table 2. Percentage of privately-insured adults aged 19–34 who were uninsured at some time in the past 12 months, by age group and 6-month interval: United States, January 2009–June 2012

	Age group				
6-month interval	19–25 years	26–34 years			
Percent uninsured at some time in the past 12 months ¹ (standard error)					
2009 (January-June)	9.9 (1.02)	7.5 (0.84)			
2009 (July-December)	8.8 (0.68)	6.3 (0.51)			
2010 (January-June)	9.9 (0.88)	6.3 (0.54)			
2010 (July-December)	9.8 (0.83)	7.1 (0.59)			
2011 (January-June)	13.1 (0.81)	8.0 (0.63)			
2011 (July-December)	7.5 (0.66)	7.3 (0.56)			
2012 (January–June)	6.9 (0.62)	8.2 (0.65)			

¹Based on the question "In the past 12 months, was there any time when [person] did not have any health insurance or coverage?"

NOTES: Private coverage is any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. The 2012 health insurance estimates are being released prior to final data editing and final weighting, to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage point from estimates based on final files. For comparison purposes, preliminary data from 2009–2011 are used. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: CDC/NCHS, National Health Interview Survey, January 2009-June 2012.

Table 3. Percent distribution of categories of policyholder, by year, among privately-insured young adults aged 19–25: United States, January 2009–June 2012

	Category of policyholder ¹					
Year	Policyholder is not in household	Policyholder is someone living with young adult	Policyholder is young adult	Total		
	Percent (standard error)					
2009	16.2 (1.68)	41.2 (1.38)	42.6 (1.30)	100.0		
2010	16.7 (1.23)	42.1 (1.12)	41.2 (1.01)	100.0		
2011	22.7 (1.51)	45.7 (1.29)	31.6 (0.89)	100.0		
2012 (January–June)	25.5 (2.31)	46.9 (1.98)	27.6 (1.23)	100.0		

¹Based on the question "Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder. In whose name is this plan?" The answer categories "In own name," "Someone else in family," and "Person not in household" are mutually exclusive.

NOTES: Private coverage is any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. The 2012 health insurance estimates are being released prior to final data editing and final weighting, to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage point from estimates based on final files. For comparison purposes, preliminary data from 2009–2011 are used. Data are based on household interviews of a sample of the civilian noninstitutionalized population. The estimates for 2012 are based on data collected from January through June.

SOURCE: CDC/NCHS, National Health Interview Survey, January 2009-June 2012.

Table 4. Percent distribution of policyholder and source of coverage, by age group and year, among privately-insured adults aged 19–34: United States, January 2009–June 2012

	Year				
Age group, policyholder ¹ , and source of coverage	2009	2010 Percent (sta	2011 ndard error)	2012 (January–June)	
19–25 years					
Policyholder ¹ , employer-based ²	35.4 (1.20)	33.2 (0.91)	26.9 (0.77)	23.2 (1.24)	
Policyholder ¹ , directly purchased ³	7.4 (0.65)	8.2 (0.58)	4.9 (0.38)	4.8 (0.56)	
Not policyholder ¹ , employer-based ²	51.6 (1.32)	52.8 (0.99)	63.3 (0.99)	67.6 (1.26)	
Not policyholder ¹ , directly purchased ³	5.6 (0.53)	5.8 (0.47)	4.9 (0.44)	4.5 (0.58)	
Total	100.0	100.0	100.0	100.0	
26-34 years					
Policyholder ¹ , employer-based ²	67.0 (0.64)	65.7 (0.65)	66.7 (0.57)	65.0 (0.78)	
Policyholder ¹ , directly purchased ³	5.4 (0.37)	6.3 (0.38)	6.5 (0.41)	6.3 (0.50)	
Not policyholder ¹ , employer-based ²	26.1 (0.68)	26.2 (0.54)	25.0 (0.50)	27.0 (0.64)	
Not policyholder ¹ , directly purchased ³	1.5 (0.19)	1.8 (0.22)	1.9 (0.19)	1.7 (0.26)	
Total	100.0	100.0	100.0	100.0	

¹Based on the question "Health insurance plans are usually obtained in one person's name even if other family members are covered. That person is called the policyholder. In whose name is this plan?" The answer categories "In own name," "Someone else in family," and "Person not in household" are mutually exclusive.

NOTES: Private coverage is any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, or purchased through local or community programs. Private coverage excludes plans that pay for only one type of service, such as accidents or dental care. The 2012 health insurance estimates are being released prior to final data editing and final weighting, to provide access to the most recent information from the National Health Interview Survey. The resulting estimates for persons without health insurance are generally 0.1–0.3 percentage points lower than those based on the editing procedures used for the final data files. Occasionally, due to decisions made for the final data editing and weighting, estimates based on preliminary editing procedures may differ by more than 0.3 percentage points from estimates based on final files. For comparison purposes, preliminary data from 2009–2011 are used. Data are based on household interviews of a sample of the civilian noninstitutionalized population. The estimates for 2012 are based on data collected from January through June.

SOURCE: CDC/NCHS, National Health Interview Survey, January 2009–June 2012.

²Based on the question "Which one of these categories best describes how this plan was obtained?" Respondents are considered to have employment-based coverage if they obtain coverage through employer, through union, or through the workplace.

³Refers to private insurance that was originally obtained through direct purchase or through other means not related to employment.