



Changes in Characteristics of Chronically Uninsured Adults: Early Release of Estimates From the National Health Interview Survey, 2010–September 2016

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Highlights

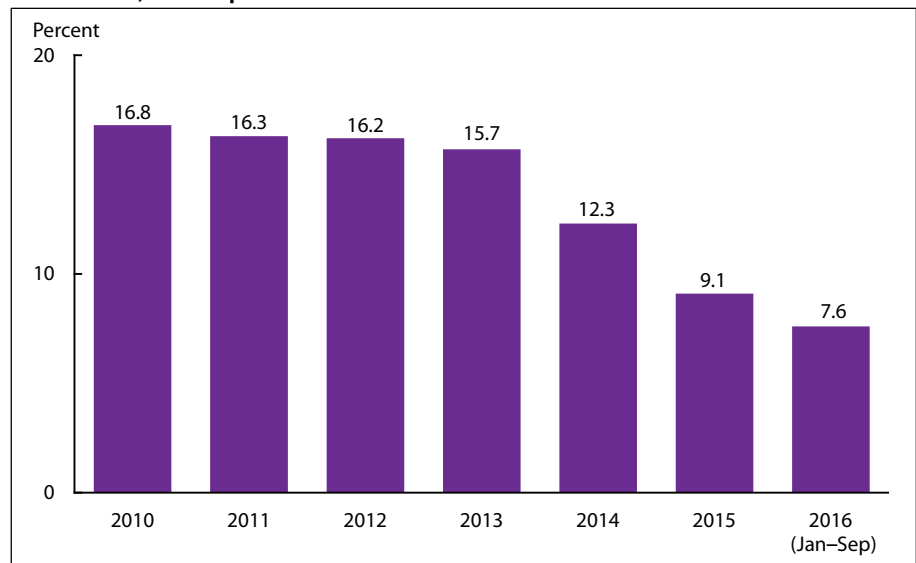
- Among adults aged 18–64, the percentage who were chronically uninsured has decreased from 16.8% in 2010 to 7.6% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, from 2010 to the first 9 months of 2016, the percentage who were aged 18–25 decreased from 23.4% to 16.0%, and the percentage who were aged 35–44 increased from 21.9% to 26.8%.
- In 2010, the percentage of chronically uninsured adults who were non-Hispanic white was larger than the percentage who were Hispanic. However, in the first 9 months of 2016, Hispanics composed the largest racial and ethnic group among the chronically uninsured.
- Among chronically uninsured adults aged 18–64, from 2010 to the first 9 months of 2016, the percentage who were unemployed decreased from 16.3% to 10.1%, and the percentage who were employed increased from 62.5% to 67.5%.
- The percentage of chronically uninsured adults aged 18–64 who lived in the South was higher than that for any other region, and this percentage increased from 44.6% in 2010 to 54.7% in the first 9 months of 2016.

Introduction

In the first 9 months of 2016, 24.3 million (12.3%) adults aged 18–64 were uninsured at the time of interview—18.2 million fewer adults than in 2010 (1). Within the remaining uninsured population, some individuals are uninsured for only a short period of time, while others are chronically uninsured or without coverage for more than 1 year. The chronically uninsured differ in many ways from the short-term uninsured. Previous research suggests that persons who were uninsured for more than 1 year have less access to and use of health care services compared with persons who were uninsured for shorter periods of time (2). Except for the first figure, this report does not present estimates of prevalence or risk of being chronically uninsured—rather, it examines selected characteristics of the chronically uninsured adult population aged 18–64, and how these have changed between 2010 and the first 9 months of 2016. Estimates for 2010–2015 are based on full years of data from the National Health Interview Survey (NHIS), and 2016 estimates are based on data collected during the first 9 months of 2016.

This report is produced by the NHIS Early Release (ER) Program, which releases selected preliminary estimates prior to final microdata release. These estimates are available from the NHIS website at: <https://www.cdc.gov/nchs/nhis.htm>. For more information about NHIS and the ER Program, see the [Technical Notes](#) and [Additional Early Release Program Products](#) sections of this report.

Figure 1. Percentage of adults aged 18–64 who were chronically uninsured, by year: United States, 2010–September 2016

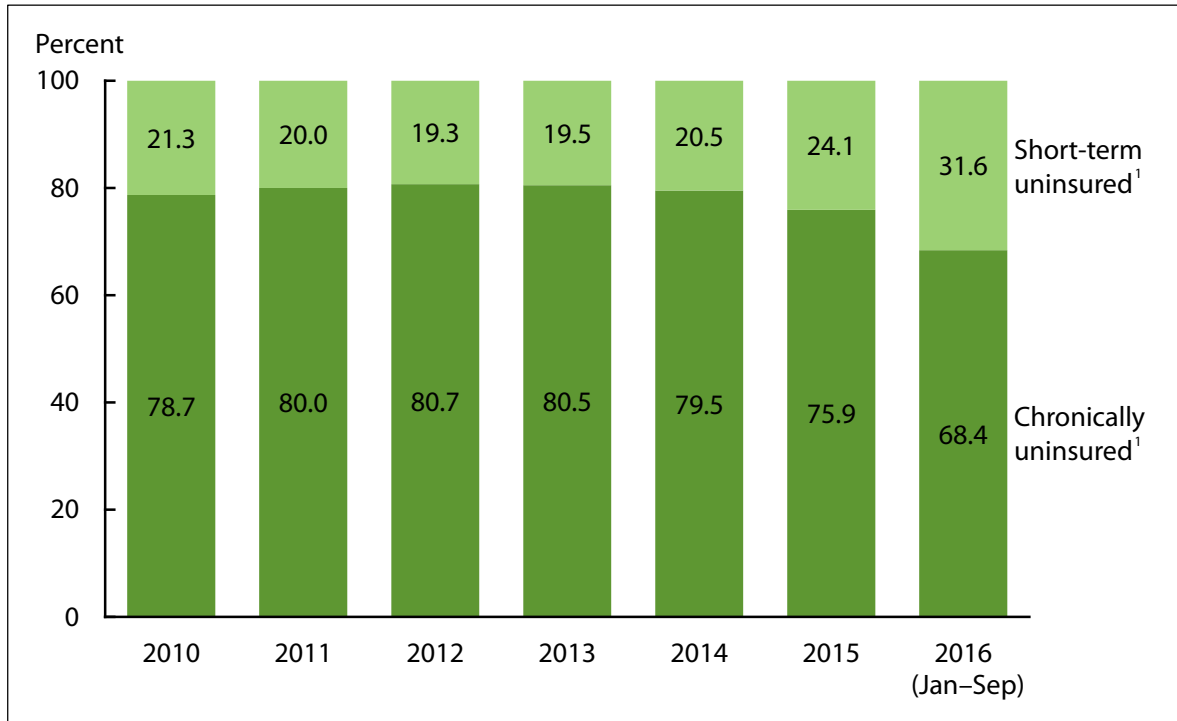


NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. The decrease in the percentage of adults aged 18–64 who were chronically uninsured from 2010–September 2016 followed a significant quadratic trend ($p < 0.05$). Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, 7.6% of adults aged 18–64 were chronically uninsured (Figure 1).
- Among adults aged 18–64, the percentage who were chronically uninsured decreased from 16.8% in 2010 to 7.6% in the first 9 months of 2016. However, the decrease occurred primarily from 2013 to the first 9 months of 2016; the percentage was stable before then.

Figure 2. Percent distribution of adults aged 18–64 who were uninsured, by length of time uninsured and year: United States, 2010–September 2016



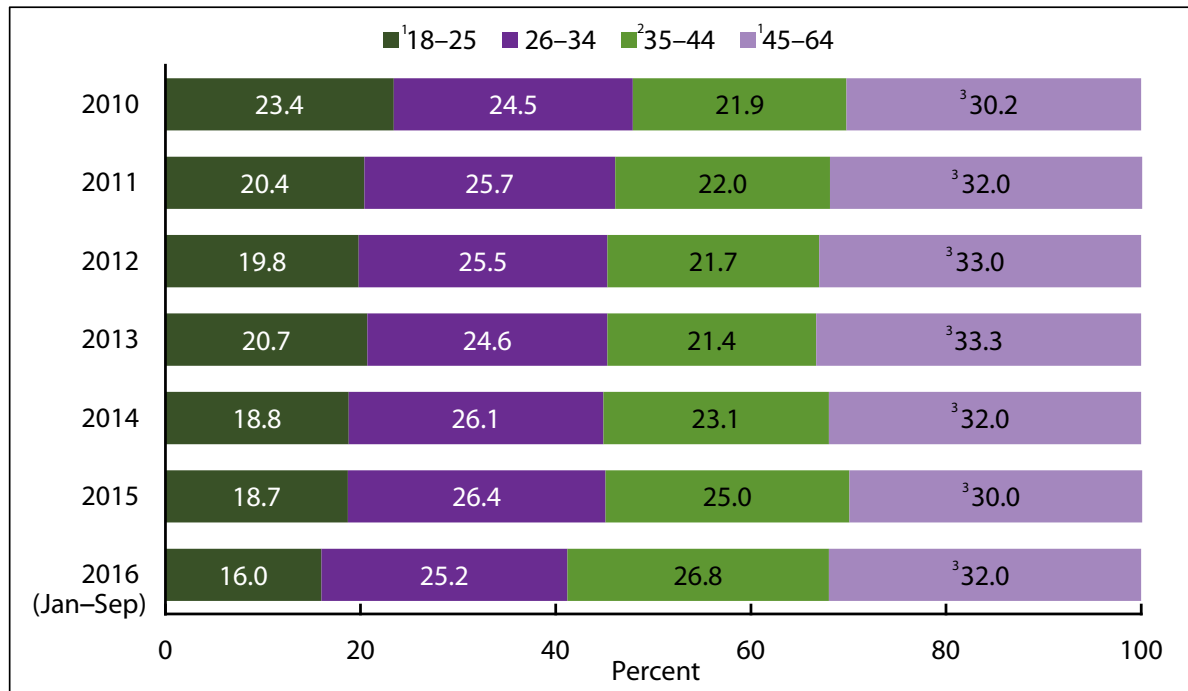
¹Significant cubic trend from 2010–September 2016 ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Short-term uninsured was defined as having lacked coverage for 1 year or less. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among uninsured adults aged 18–64, 31.6% were short-term uninsured and 68.4% were chronically uninsured (Figure 2).
- Within each year from 2010 to the first 9 months of 2016, the percentage of uninsured adults aged 18–64 who were chronically uninsured was significantly larger than the percentage who were short-term uninsured.
- Among uninsured adults aged 18–64, the percentage who were chronically uninsured increased from 78.7% in 2010 to 80.7% in 2012, remained stable between 2012 and 2014, and then decreased from 79.5% in 2014 to 68.4% in the first 9 months of 2016.

Figure 3. Percent distribution of adults aged 18–64 who were chronically uninsured, by age group and year: United States, 2010–September 2016



¹Significant cubic trend from 2010–September 2016 ($p < 0.05$).

²Significant quadratic trend from 2010–September 2016 ($p < 0.05$).

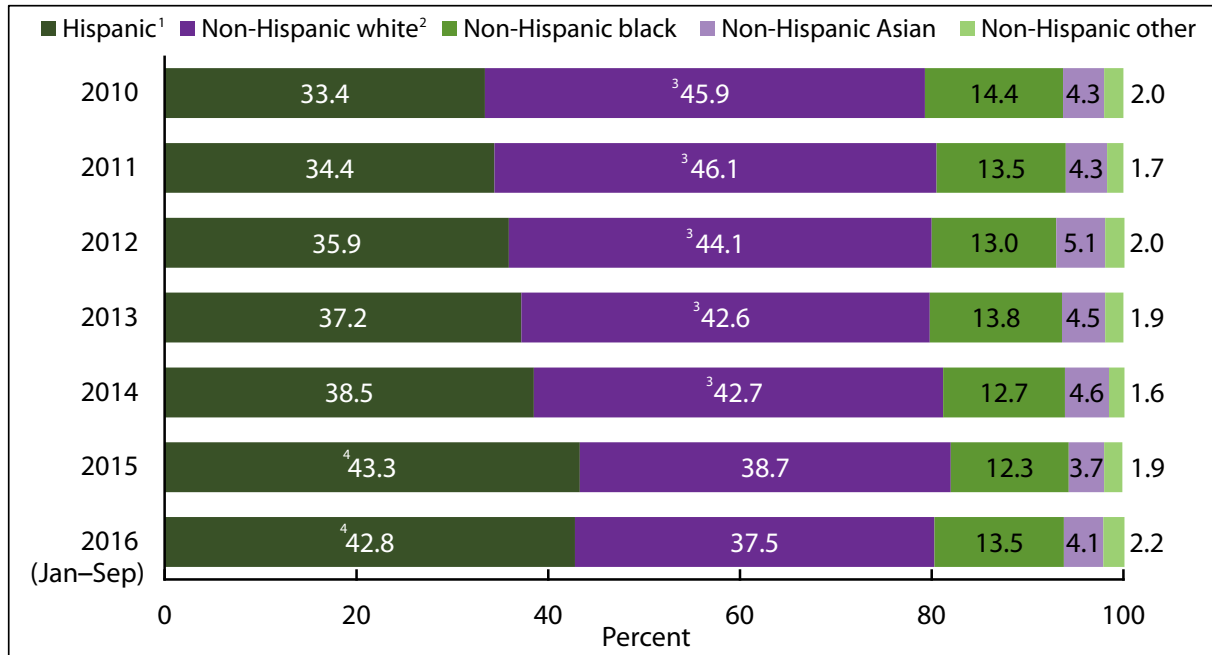
³Significantly larger than the percentage of adults aged 18–25, 26–34, and 35–44 ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016 among chronically uninsured adults aged 18–64, 16.0% were aged 18–25, 25.2% were aged 26–34, 26.8% were aged 35–44, and 32.0% were aged 45–64 (Figure 3).
- Within each year from 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, the percentage who were aged 45–64 was significantly larger than that of any other age group examined.
- Among chronically uninsured adults aged 18–64, the percentage who were aged 18–25 decreased from 23.4% in 2010 to 20.4% in 2011, remained stable between 2011 and 2013, and then continued to decrease to 18.8% in 2014 and 16.0% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who were aged 26–34 between 2010 (24.5%) and the first 9 months of 2016 (25.2%).
- Among chronically uninsured adults aged 18–64, the percentage who were aged 35–44 remained stable from 2010 to 2013, and then increased from 21.4% in 2013 to 26.8% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who were aged 45–64 increased from 30.2% in 2010 to 32.0% in 2011, remained stable between 2011 and 2014, and then decreased from 32.0% in 2014 to 30.0% in 2015. There was no significant change in the percentage who were aged 45–64 between 2015 and the first 9 months of 2016.

Figure 4. Percent distribution of adults aged 18–64 who were chronically uninsured, by race and ethnicity and year: United States, 2010–September 2016



¹Significant linear increase from 2010–September 2016 ($p < 0.05$).

²Significant linear decrease from 2010–September 2016 ($p < 0.05$).

³Significantly larger than the percentage who were Hispanic, non-Hispanic black, non-Hispanic Asian, and non-Hispanic other race ($p < 0.05$).

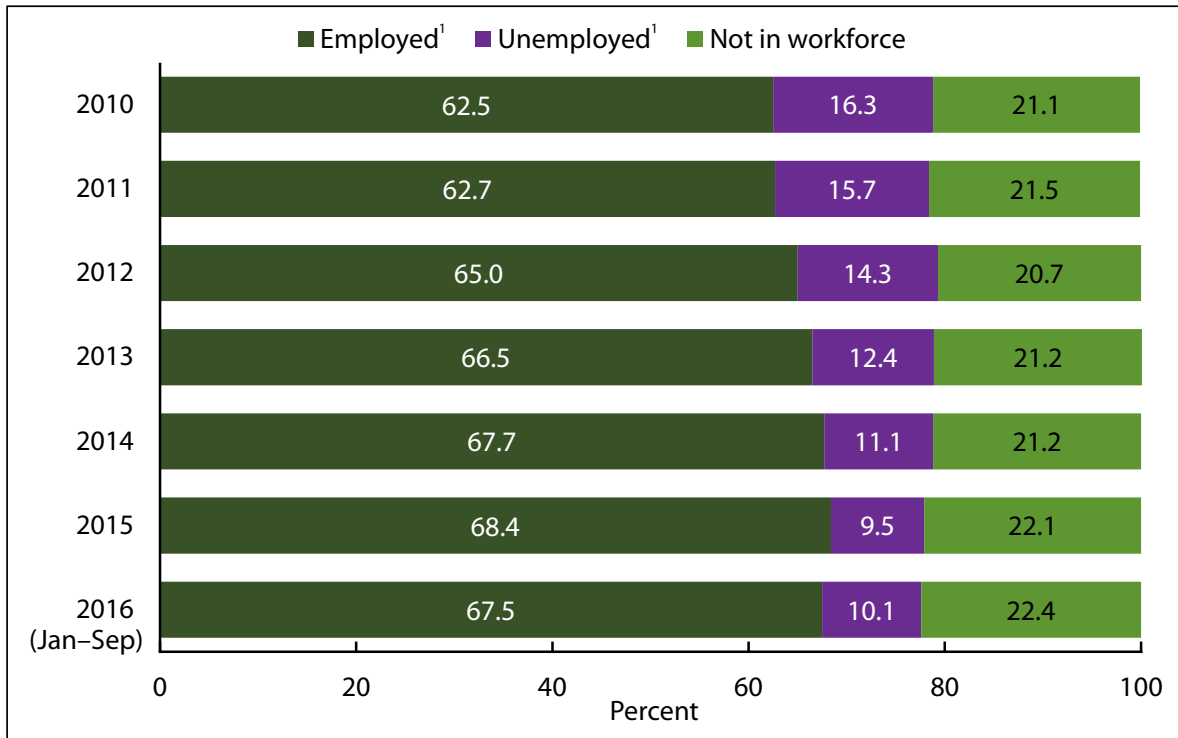
⁴Significantly larger than the percentage who were non-Hispanic white, non-Hispanic black, non-Hispanic Asian, and non-Hispanic other race ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 42.8% were Hispanic, 37.5% were non-Hispanic white, 13.5% were non-Hispanic black, 4.1% were non-Hispanic Asian, and 2.2% were non-Hispanic other race (Figure 4).
- From 2010 to 2014, the largest percentage of chronically uninsured adults aged 18–64 were non-Hispanic white. However, in 2015 and the first 9 months of 2016, those who were Hispanic made up the largest percentage of the chronically uninsured.
- Among chronically uninsured adults aged 18–64, the percentage who were Hispanic increased from 33.4% in 2010 to 42.8% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who were non-Hispanic white decreased from 45.9% in 2010 to 37.5% in the first 9 months of 2016.
- From 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, there were no significant changes in the percentages who were non-Hispanic black, non-Hispanic Asian, and non-Hispanic other race.

Figure 5. Percent distribution of adults aged 18–64 who were chronically uninsured, by employment status and year: United States, 2010–September 2016



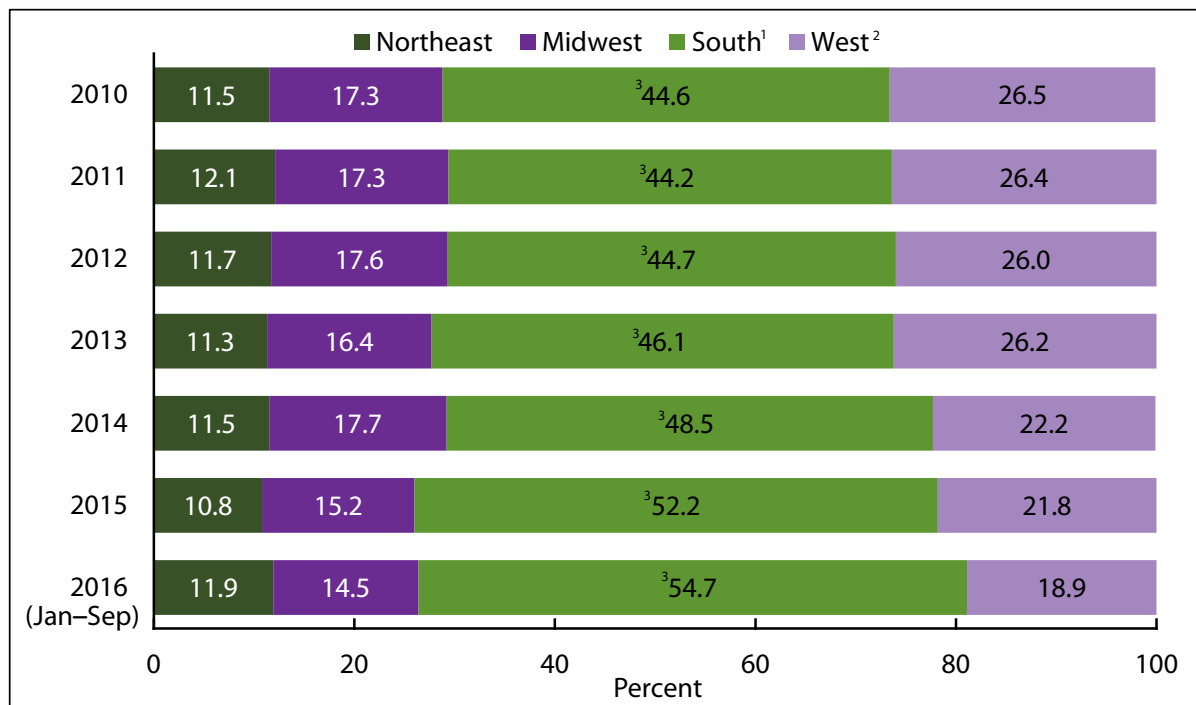
¹Significant cubic trend from 2010–September 2016 ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 67.5% were employed, 10.1% were unemployed, and 22.4% were not in the workforce (Figure 5).
- Among chronically uninsured adults aged 18–64, the percentage who were employed remained stable from 2010 to 2011, then increased from 62.7% in 2011 to 67.7% in 2014, and then remained stable through the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who were unemployed remained stable from 2010 to 2011, then decreased from 15.7% in 2011 to 9.5% in 2015, and then remained stable through the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who were not in the workforce from 2010 (21.1%) to the first 9 months of 2016 (22.4%).

Figure 6. Percent distribution of adults aged 18–64 who were chronically uninsured, by region and year: United States, 2010–September 2016



¹Significant linear increase from 2010–September 2016 ($p < 0.05$).

²Significant linear decrease from 2010–September 2016 ($p < 0.05$).

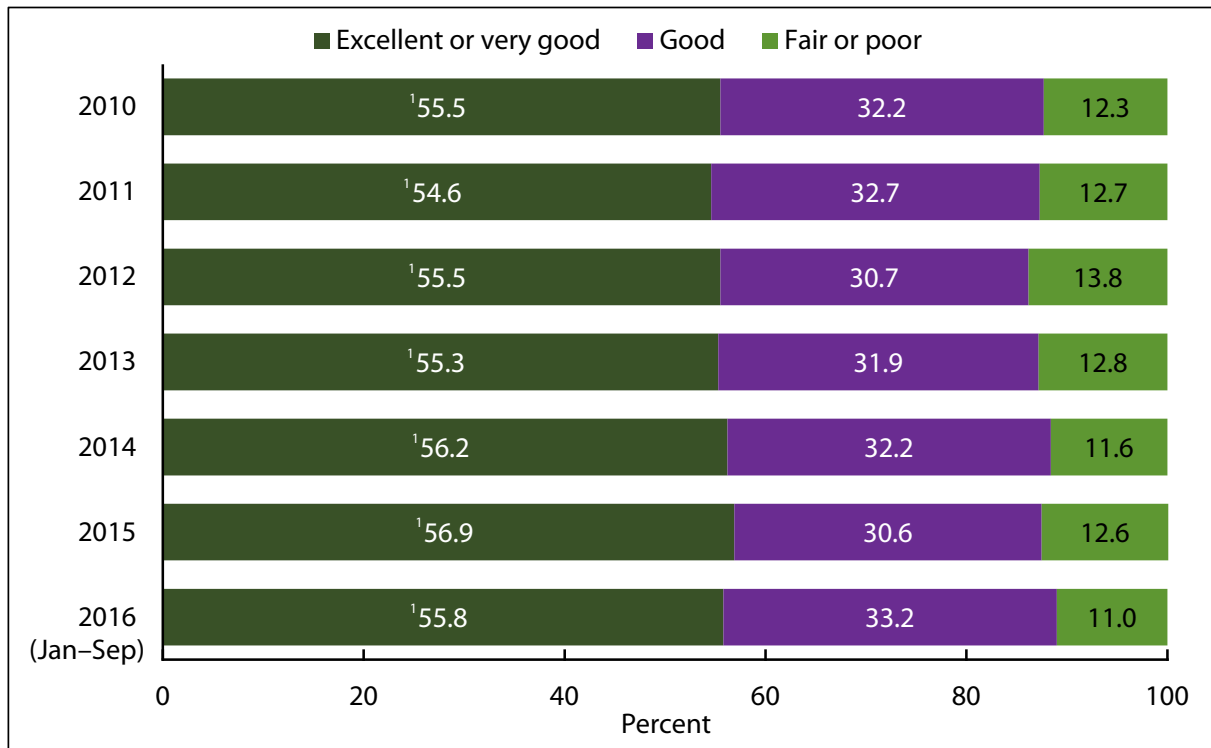
³Significantly larger than the percentage who live in the Northeast, Midwest, or West ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 11.9% lived in the Northeast, 14.5% lived in the Midwest, 54.7% lived in the South, and 18.9% lived in the West (Figure 6).
- Within each year from 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, the percentage who lived in the South was larger than that of any other region.
- Among chronically uninsured adults aged 18–64, the percentage who lived in the South increased from 44.6% in 2010 to 54.7% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, the percentage who lived in the West decreased from 26.5% in 2010 to 18.9% in the first 9 months of 2016.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who lived in the Midwest from 2010 (17.3%) to the first 9 months of 2016 (14.5%). The observed difference between 2010 and the first 9 months of 2016 did not meet the usual criterion for statistical significance ($p = 0.078$).
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who lived in the Northeast from 2010 (11.5%) to the first 9 months of 2016 (11.9%).

Figure 7. Percent distribution of adults aged 18–64 who were chronically uninsured, by health status and year: United States, 2010–September 2016



¹Significantly larger than the percentage who rated their health as good or fair or poor ($p < 0.05$).

NOTES: Chronically uninsured was defined as having lacked coverage for more than 1 year. Data are based on household interviews of a sample of the civilian noninstitutionalized population. Estimates may not add to 100 due to rounding.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

- In the first 9 months of 2016, among chronically uninsured adults aged 18–64, 55.8% rated their health as excellent or very good, 33.2% rated their health as good, and 11.0% rated their health as fair or poor (Figure 7).
- Within each year from 2010 to the first 9 months of 2016, among chronically uninsured adults aged 18–64, the percentage who rated their health as excellent or very good was larger than the percentage who rated their health as good or fair or poor.
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who rated their health as excellent or very good from 2010 (55.5%) to the first 9 months of 2016 (55.8%).
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who rated their health as good from 2010 (32.2%) to the first 9 months of 2016 (33.2%).
- Among chronically uninsured adults aged 18–64, there was no significant change in the percentage who rated their health as fair or poor from 2010 (12.3%) to the first 9 months of 2016 (11.0%).

Summary

The landscape of health insurance coverage in the United States has changed from 2010 to the first 9 months of 2016. During this time period, among adults aged 18–64, the percentage who were uninsured has decreased—more than 18 million adults have gained health care coverage since 2010 (1). Among the remaining uninsured, the majority had lacked coverage for more than 1 year, (were chronically uninsured). However, from 2010 to the first 9 months of 2016, the percentage of adults who were chronically uninsured decreased overall and as a percentage of all uninsured adults. As these shifts toward gaining insurance took place, there was uncertainty about whether the characteristics of the chronically uninsured would change as well. For example, there was concern that those who were young and healthy would be less likely to sign up for coverage (3), and would therefore make up a larger proportion of the chronically uninsured.

The proportion of the chronically uninsured population that report they were in good or very good or excellent health has not changed between 2010 and the first 9 months of 2016. However, the proportion who were Hispanic, employed, aged 35–44, and who lived in the South has increased. It is important to note that despite making up a larger proportion of the chronically uninsured, this does not indicate an increase in prevalence or risk of being chronically uninsured within these groups. These populations have still had significant gains in health insurance coverage during this time period. For example, the percentage of Hispanic adults aged 18–64 who were uninsured at the time of interview decreased 18.5 percentage points from 2010 to the first 9 months of 2016 (1).

The chronically uninsured are of special interest because they have a persistent lack of coverage, and may be at higher risk of not obtaining preventive services or care for illness and injury (2). A recent study found that this persistent lack of coverage, as reflected in those who had been uninsured for more than 1 year, was associated with less use of health services and access to care, compared with those who had been uninsured for 1 year or less (2). Additionally, reasons for being uninsured may differ for those who are chronically uninsured and those who have been uninsured for a shorter amount of time, and therefore may require different solutions to acquire access to needed care (4). It can be useful to differentiate the chronically uninsured from those who have been uninsured for a short period of time to better identify those populations with the highest risk of not receiving necessary care.

Table 1. Percentage (and standard error) of adults aged 18–64 and percent distribution (and standard error) of uninsured adults aged 18–64, by length of time spent uninsured: United States, 2010–September 2016

Insurance status	2010	2011	2012	2013	2014	2015	2016 (Jan–Sep)
Percent overall							
Chronically uninsured ¹	16.8 (0.30)	16.3 (0.31)	16.2 (0.29)	15.7 (0.34)	12.3 (0.27)	9.1 (0.22)	7.6 (0.31)
Short-term uninsured ¹	4.6 (0.12)	4.1 (0.11)	3.9 (0.10)	3.8 (0.11)	3.2 (0.10)	2.9 (0.11)	3.5 (0.13)
Percent distribution of uninsured, by length of time uninsured ²							
Chronically uninsured ¹	78.7 (0.49)	80.0 (0.49)	80.7 (0.49)	80.5 (0.53)	79.5 (0.58)	75.9 (0.75)	68.4 (1.12)
Short-term uninsured ¹	21.3 (0.49)	20.0 (0.49)	19.3 (0.49)	19.5 (0.53)	20.5 (0.58)	24.1 (0.75)	31.6 (1.12)

¹Chronically uninsured was defined as having lacked coverage for more than 1 year, while short-term uninsured was defined as having lacked coverage for 1 year or less. In references to “1 year or less” and “more than 1 year,” 1 year is defined as the 12 months prior to interview. In 2016, answer categories concerning the length of noncoverage for those who were currently uninsured were modified. Therefore, 2016 estimates of uninsured for “1 year or less” and “more than 1 year” may not be completely comparable to previous years. For more information on this change, see Technical Notes.

²A person was defined as uninsured if he or she did not have any 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.

NOTE: Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

Table 2. Percent distribution (and standard error) of adults aged 18–64 who were chronically uninsured, by selected demographic characteristics and year: United States, 2010–September 2016

Selected characteristic	2010	2011	2012	2013	2014	2015	2016 (Jan–Sep)
Sex							
Male	58.2 (0.46)	57.4 (0.49)	56.3 (0.46)	55.7 (0.47)	57.2 (0.57)	59.5 (0.66)	59.7 (0.71)
Female	41.8 (0.46)	42.6 (0.49)	43.7 (0.46)	44.3 (0.47)	42.8 (0.57)	40.5 (0.66)	40.3 (0.71)
Age group (years)							
18–25	23.4 (0.44)	20.4 (0.44)	19.8 (0.50)	20.7 (0.50)	18.8 (0.59)	18.7 (0.60)	16.0 (0.99)
26–34	24.5 (0.58)	25.7 (0.51)	25.5 (0.51)	24.6 (0.57)	26.1 (0.60)	26.4 (0.69)	25.2 (1.00)
35–44	21.9 (0.47)	22.0 (0.43)	21.7 (0.46)	21.4 (0.52)	23.1 (0.56)	25.0 (0.69)	26.8 (0.80)
45–64	30.2 (0.55)	32.0 (0.54)	33.0 (0.54)	33.3 (0.69)	32.0 (0.73)	30.0 (0.73)	32.0 (0.91)
Race and ethnicity							
Hispanic	33.4 (1.24)	34.4 (1.21)	35.9 (1.18)	37.2 (1.35)	38.5 (1.36)	43.3 (1.40)	42.8 (1.98)
Non-Hispanic, white only	45.9 (1.15)	46.1 (1.09)	44.1 (1.11)	42.6 (1.20)	42.7 (1.19)	38.7 (1.26)	37.5 (1.78)
Non-Hispanic, black only	14.4 (0.73)	13.5 (0.65)	13.0 (0.64)	13.8 (0.60)	12.7 (0.63)	12.3 (0.67)	13.5 (1.01)
Non-Hispanic, Asian only	4.3 (0.26)	4.3 (0.30)	5.1 (0.36)	4.5 (0.28)	4.6 (0.36)	3.7 (0.37)	4.1 (0.55)
Non-Hispanic, other races	2.0 (0.39)	1.7 (0.16)	2.0 (0.19)	1.9 (0.17)	1.6 (0.17)	1.9 (0.25)	2.2 (0.37)
Region							
Northeast	11.5 (0.48)	12.1 (0.50)	11.7 (0.75)	11.3 (1.06)	11.5 (0.91)	10.8 (0.89)	11.9 (1.35)
Midwest	17.3 (0.75)	17.3 (0.68)	17.6 (0.68)	16.4 (0.82)	17.7 (0.91)	15.2 (1.02)	14.5 (1.45)
South	44.6 (1.15)	44.2 (1.13)	44.7 (1.11)	46.1 (1.27)	48.5 (1.38)	52.2 (1.35)	54.7 (3.24)
West	26.5 (1.12)	26.4 (1.10)	26.0 (0.91)	26.2 (1.05)	22.2 (1.04)	21.8 (1.05)	18.9 (2.36)
Poverty status¹							
Poor	29.3 (0.71)	28.8 (0.70)	29.8 (0.72)	29.3 (0.73)	31.1 (0.86)	28.4 (0.93)	29.7 (1.37)
Near poor	34.3 (0.71)	34.6 (0.75)	35.3 (0.65)	34.4 (0.70)	35.8 (0.98)	35.1 (0.90)	35.2 (1.50)
Not poor	36.5 (0.82)	36.5 (0.80)	34.9 (0.73)	36.3 (0.77)	33.1 (0.82)	36.5 (0.94)	35.1 (1.52)
Employment status							
Employed	62.5 (0.59)	62.7 (0.56)	65.0 (0.57)	66.5 (0.56)	67.7 (0.62)	68.4 (0.74)	67.5 (1.05)
Unemployed	16.3 (0.49)	15.7 (0.47)	14.3 (0.41)	12.4 (0.45)	11.1 (0.48)	9.5 (0.54)	10.1 (0.53)
Not in workforce	21.1 (0.50)	21.5 (0.50)	20.7 (0.45)	21.2 (0.52)	21.2 (0.62)	22.1 (0.60)	22.4 (1.06)
Health status²							
Excellent or very good	55.5 (0.68)	54.6 (0.68)	55.5 (0.71)	55.3 (0.68)	56.2 (0.75)	56.9 (0.90)	55.8 (1.15)
Good	32.2 (0.60)	32.7 (0.63)	30.7 (0.58)	31.9 (0.66)	32.2 (0.74)	30.6 (0.84)	33.2 (0.80)
Fair or poor	12.3 (0.40)	12.7 (0.40)	13.8 (0.48)	12.8 (0.44)	11.6 (0.46)	12.6 (0.64)	11.0 (0.90)

¹Based on family income and family size, using the U.S. Census Bureau's poverty thresholds. "Poor" persons are defined as those below the poverty threshold, "near poor" persons have incomes of 100% to less than 200% of the poverty threshold, and "not poor" persons have incomes of 200% of the poverty threshold or greater. The percentages of respondents with unknown poverty status were 11.5% in 2011, 11.4% in 2012, 10.2% in 2013, 8.8% in 2014, 8.8% in 2015, and 7.9% in the first three quarters of 2016. Estimates for persons with unknown poverty status are not shown separately. For more information on the unknown income and poverty status categories, see the *Survey Description* document for the 2015 National Health Interview Survey, available from: <https://www.cdc.gov/nchs/nhis.htm>. The estimates shown in this report may differ from estimates based on both reported and imputed income.

²Health status data were obtained by asking respondents to assess their own health and that of family members living in the same household as excellent, very good, good, fair, or poor. The analyses exclude adults with unknown health status.

NOTES: A person was defined as uninsured if he or she did not have any 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. Chronically uninsured was defined as having lacked coverage for more than 1 year. A person was identified as having lacked coverage for more than 1 year based on the response to the following question: "Not including Single Service Plans, about how long has it been since [you/Alias] last had health care coverage?" In references to "more than 1 year," 1 year is defined as the 12 months prior to interview. In 2016, answer categories concerning the length of noncoverage for those who were currently uninsured were modified. Therefore, 2016 estimates of "uninsured for more than 1 year" may not be completely comparable to previous years. For more information on this change, see Technical Notes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: NCHS, National Health Interview Survey, 2010–2016, Family Core component.

Technical Notes

The National Center for Health Statistics (NCHS) is releasing selected estimates of characteristics of the chronically uninsured for the civilian noninstitutionalized U.S. population based on data from the January 2010–September 2016 National Health Interview Survey (NHIS).

The estimates are being released prior to final data editing and final weighting to provide access to the most recent information from NHIS. Differences between estimates calculated using preliminary data files and final data files are typically less than 0.1 percentage point. However, preliminary estimates of persons without health insurance coverage are generally 0.1–0.3 percentage points lower than the final estimates due to the editing procedures used for the final data files.

Estimates for 2010 through September 2016 are stratified by year, sex, age group, race and ethnicity, region, poverty status, employment status, and self-reported health status.

Data source

Data used to produce this Early Release (ER) report are derived from the NHIS Family Core from January 2010 through September 2016. This component collects information on all family members in each household. Data analysis was based on information collected on 691,965 persons in the Family Core. Visit the NHIS website at: <https://www.cdc.gov/nchs/nhis.htm> for more information about the design, content, and use of NHIS.

Estimation procedures

NCHS creates survey weights for each calendar quarter of the NHIS sample. The NHIS data weighting procedure is described in more detail at: https://www.cdc.gov/nchs/data/series/sr_02/sr02_165.pdf. Estimates were calculated using the NHIS survey weights, which are calibrated to census totals for sex, age, and race and ethnicity of the U.S. civilian noninstitutionalized population. Weights for the 2010 and 2011 NHIS data were derived from 2000 census-based population estimates. Weights for the 2012, 2013, 2014, 2015, and 2016 NHIS data were derived from 2010 census-based population estimates.

Point estimates and estimates of their variances were calculated using SUDAAN software to account for the complex sample design of NHIS. The Taylor series linearization method was chosen for variance estimation. Trends were evaluated using logistic regression analysis.

Unless otherwise noted, all estimates shown meet the NCHS standard of having less than or equal to 30% relative standard error. Differences between percentages or rates were evaluated using two-sided significance tests at the 0.05 level. Lack of comment regarding the difference between any two estimates does not necessarily mean that the difference was tested and found to be not significant.

Estimates of percent distribution may not always add to 100% due to rounding.

Definitions of selected terms

Lack of health insurance coverage at interview—A person was defined as uninsured if, at the time of interview, he or she did not have any private health insurance, Medicare, Medicaid, 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. For comparability, the estimates for all years were created using these same definitions. Health insurance information is collected for all persons in a family and is reported on an individual basis.

Chronically uninsured—A person was defined as chronically uninsured if he or she was uninsured at the time of interview, and indicated that he or she had lacked health insurance coverage for more than 1 year. Persons who were chronically uninsured were identified by asking those who were uninsured at the time of interview the following question (HILAST): *Not including Single Service Plans, about how long has it been since [you/Alias] last had health care coverage?* In 2016, the answer categories for the HILAST questions were modified to align NHIS responses with those of other national federal surveys. Therefore, 2016 estimates of “uninsured for more than 1 year” may not be completely comparable to previous years. Prior to 2016, the answer categories for the HILAST question were: 6 months or less; more than 6 months, but not more than 1 year ago; more than 1 year, but not more than 3 years ago; more than 3 years; and never. Beginning in 2016, the answer categories for the HILAST question are: 6 months or less; more than 6 months, but less than 1 year; 1 year; more than 1 year, but less than 3 years; 3 years or more; and never.

Poverty status—Poverty categories are based on the ratio of the family’s income in the previous calendar year to the appropriate poverty threshold (given the family’s size and number of children), as defined by the U.S. Census Bureau. Persons categorized as “poor” have a poverty ratio less than 100% (i.e., their family income was below the poverty threshold); “near poor” persons have incomes of 100% to less than 200% of the poverty threshold; and “not poor” persons have incomes that are 200% of the poverty threshold or greater. The percentage of respondents with unknown poverty status from January 2010 through September 2016 averaged 10.1%. For more information on unknown income and unknown poverty status, see the NHIS *Survey Description* document for 2015 at: <https://www.cdc.gov/nchs/nhis.htm>.

Employment status—Employment status is assessed at the time of interview and is obtained for persons aged 18 and over. For the purposes of this report, adults were classified as “employed” if they reported that they either worked at or had a job or business at any time during the 1-week period preceding the interview. This includes working for pay at a job or business, with a job or business

but not at work, and working but not for pay at a family-owned job or business. Adults were classified as “unemployed” if they were looking for work during the 1-week period preceding the interview, and “not in the workforce” if they were not working at a job or business and were not looking for work during the 1-week period preceding the interview.

Additional Early Release Program Products

Additional reports are published through the Early Release (ER) Program.

Early Release of Selected Estimates Based on Data From the National Health Interview Survey is published quarterly and provides estimates of 15 selected measures of health. Measures of health include estimates of health insurance, having a usual place to go for medical care, obtaining needed medical care, influenza vaccination, pneumococcal vaccination, obesity, leisure-time physical activity, current smoking, alcohol consumption, HIV testing, general health status, personal care needs, serious psychological distress, diagnosed diabetes, and asthma episodes and current asthma.

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey is published quarterly and provides detailed estimates of health insurance coverage.

Wireless Substitution: Early Release of Estimates From the National Health Interview Survey is published biannually and provides selected estimates of telephone coverage in the United States.

Other ER reports and tabulations on special topics are released on an as-needed basis; see

<https://www.cdc.gov/nchs/nhis/releases.htm>.

In addition to these reports, preliminary microdata files containing selected National Health Interview Survey (NHIS) variables are produced as part of the ER Program. For the 2016 NHIS, these files are made available four times: September 2016, November 2016, February 2017, and May 2017. NHIS data users can analyze these files through the National Center for Health Statistics Research Data Center without having to wait for the final annual NHIS microdata files to be released.

New measures may be added as work continues and in response to changing data needs. Feedback on these releases is welcome (nhislist@cdc.gov).

Announcements about Early Releases, other new data releases, publications, or corrections related to NHIS will be sent to members of the HISUSERS e-mail list. To join, visit the Centers for Disease Control and Prevention website at <https://www.cdc.gov/subscribe.html>.

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