

Data Brief 253: Expected Source of Payment at Emergency Department Visits for Adults Aged 18–64 for the United States and in the Five Most Populous States, 2012

Data table for Figure 1. Percentage distribution of expected source of payment for emergency department visits made by adults aged 18–64: United States, 2012

	Percent	Standard error
Private	33	1
Medicare ^{1,2}	9	< 1
Medicaid ¹	21	1
No insurance ¹	20	1
Workers' compensation and other ^{1,2}	5	1
Unknown or blank ^{1,2}	11	2

¹Significantly different from private ($p < 0.05$).

²Significantly different from Medicaid and no insurance ($p < 0.05$).

NOTES: Among adults aged 18–64, there were 27,500,000 emergency department visits with private insurance as the expected source of payment, 17,608,000 with Medicaid, 16,728,000 with no insurance, 8,970,000 with unknown or blank, 7,482,000 with Medicare, and 4,141,000 with workers' compensation or other types of insurance. No insurance is defined as having only self-pay, no charge, charity, or a combination of these types as payment sources.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2012.

Data Brief 253: Expected Source of Payment at Emergency Department Visits for Adults Aged 18–64 for the United States and in the Five Most Populous States, 2012

Data table for Figure 2. Percentage of emergency department visits made by adults aged 18–64 with private insurance as the expected source of payment, by state: United States, 2012

	Percent	Standard error
United States	33	1
California	35	5
Florida	24	5
Illinois ¹	27	3
New York ^{2,3}	35	2
Texas	35	4

¹Significantly different from United States ($p < 0.05$).

²Significantly different from Florida ($p < 0.05$).

³Significantly different from Illinois ($p < 0.05$).

NOTE: Among adults aged 18–64, there were 82,427,000 emergency department visits in the United States, 8,426,000 in California, 6,539,000 in Texas, 5,842,000 in Florida, 4,590,000 in New York, and 3,328,000 in Illinois.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2012.

Data Brief 253: Expected Source of Payment at Emergency Department Visits for Adults Aged 18–64 for the United States and in the Five Most Populous States, 2012

Data table for Figure 3. Percentage of emergency department visits made by adults aged 18–64 with Medicaid as the expected source of payment, by state: United States, 2012

	Percent	Standard error
United States	21	1
California	23	4
Florida ^{1,2}	15	3
Illinois ^{1–3}	29	2
New York ^{1,3}	30	3
Texas ^{1,2,4,5}	12	2

¹Significantly different from United States ($p < 0.05$).

²Significantly different from California ($p < 0.05$).

³Significantly different from Florida ($p < 0.05$).

⁴Significantly different from Illinois ($p < 0.05$).

⁵Significantly different from New York ($p < 0.05$).

NOTE: Among adults aged 18–64, there were 82,427,000 emergency department visits in the United States, 8,426,000 in California, 6,539,000 in Texas, 5,842,000 in Florida, 4,590,000 in New York, and 3,328,000 in Illinois.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2012.

Data Brief 253: Expected Source of Payment at Emergency Department Visits for Adults Aged 18–64 for the United States and in the Five Most Populous States, 2012

Data table for Figure 4. Percentage of emergency department visits made by adults aged 18–64 with no insurance as the expected source of payment, by state: United States, 2012

	Percent	Standard error
United States	20	1
California	17	3
Florida	21	5
Illinois	22	4
New York ^{1,2}	15	2
Texas ^{1,3,4}	28	4

¹Significantly different from United States ($p < 0.05$).

²Significantly different from Illinois ($p < 0.05$).

³Significantly different from California ($p < 0.05$).

⁴Significantly different from New York ($p < 0.05$).

NOTES: Among adults aged 18–64, there were 82,427,000 emergency department visits in the United States, 8,426,000 in California, 6,539,000 in Texas, 5,842,000 in Florida, 4,590,000 in New York, and 3,328,000 in Illinois. No insurance is defined as having only self-pay, no charge, charity, or a combination of these types as payment sources.

SOURCE: NCHS, National Hospital Ambulatory Medical Care Survey, 2012.