

National Health Interview Survey Early Release Program

Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, 2019

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What's New

 Estimates of health insurance coverage based on full year 2019 and 6-month intervals are provided.

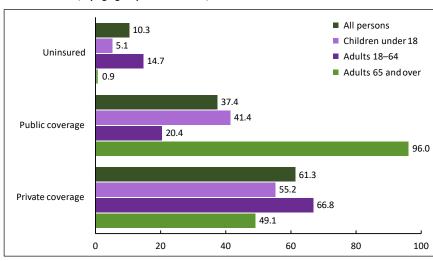
Highlights

- In 2019, 33.2 million (10.3%) persons of all ages were uninsured at the time of interview. In the second half of 2019, 35.7 million persons of all ages (11.0%) were uninsured—significantly higher than the first 6 months of 2019 (30.7 million, 9.5%).
- In 2019, among adults aged 18–64, 14.7% were uninsured at the time of interview, 20.4% had public coverage, and 66.8% had private health insurance coverage.
- Among children aged 0–17 years, 5.1% were uninsured, 41.4% had public coverage, and 55.2% had private health insurance coverage.
- Among adults aged 18–64, men (16.3%) were more likely than women (13.1%) to be uninsured.
- Among adults aged 18–64,
 Hispanic adults (29.7%) were
 more likely than non-Hispanic
 black (14.7%), non-Hispanic white
 (10.5%) and non-Hispanic Asian
 (7.5%) to be uninsured.
- Among adults aged 18–64, 4.4%
 (8.7 million) were covered by private health insurance plans obtained through the Health Insurance Marketplace or state-based exchanges.

This report presents full-year estimates of health insurance coverage for the civilian noninstitutionalized U.S. population based on data from the January–December 2019 National Health Interview Survey (NHIS). These estimates are being published prior to final editing and final weighting to provide access to the most recent information from NHIS. Estimates are disaggregated by age group, sex, poverty status, race and ethnicity, and state Medicaid expansion status. Estimates of exchange-based coverage by sex, poverty status, and race and ethnicity are also included. Detailed appendix tables contain all estimates presented in the figures, additional estimates by 6-month intervals, and estimates for selected population characteristics.

In 2019, the NHIS questionnaire was redesigned to better meet the needs of data users. See Technical Notes for more information on the potential impact of the redesign on insurance estimates. Quarterly estimates for 2019 by age group and poverty status, as well as more information about NHIS and the ER Program, are available from the NHIS website at https://www.cdc.gov/nchs/nhis.htm.

Figure 1. Percentages of persons who were uninsured or had public or private coverage at the time of interview, by age group: United States, 2019



NOTES: Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons were also defined as uninsured if they 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. Public coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- In 2019, among persons of all ages, 10.3% were uninsured, 37.4% had public coverage, and 61.3% had private coverage at the time of interview (Figure 1).
- Adults aged 18-64 (14.7%) were the most likely to be uninsured, followed by children aged 0-17 years (5.1%), and adults aged 65 and over (0.9%).
- Adults aged 65 and over (96.0%) were the most likely to have public coverage, followed by children aged 0–17 years (41.4%) and adults aged 18–64 (20.4%).
- Adults aged 18–64 (66.8%) were the most likely to have private coverage, followed by children aged 0–17 years (55.2%), and adults aged 65 and over (49.1%).

■ January-June, 2019 13.7 July-December, 2019 Uninsured 15.6 20.4 Public coverage 20.4 67.7 Private coverage 65.9 0 40 60 80 20 100

Figure 2. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by 6-month interval: United States, January–December 2019

NOTES: Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons were also defined as uninsured if they 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. Public coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- Among adults aged 18–64, the percentage who were uninsured at the time of interview increased from 13.7% in January through June 2019 to 15.6% in July through December 2019 (Figure 2).
- Among adults aged 18–64, the percentage who had public coverage at the time of interview did not change between January through June 2019 (20.4%) and July through December 2019 (20.4%).
- Among adults aged 18–64, the percentage who had private coverage at the time of interview from January through June 2019 (67.7%) was significantly higher than July through December 2019 (65.9%).

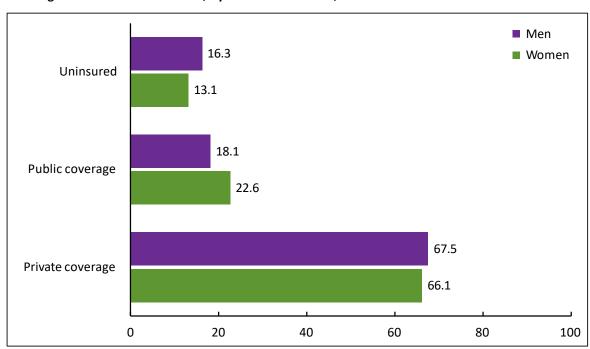


Figure 3. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by sex: United States, 2019

NOTES: Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons were also defined as uninsured if they 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. Public coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- In 2019, among adults aged 18–64, men (16.3%) were more likely than women (13.1%) to be uninsured at the time of interview (Figure 3).
- Men (18.1%) were less likely than women (22.6%) to have public coverage at the time of interview.
- The percentage of men (67.5%) with private coverage at the time of interview was higher than, but not significantly different from, the percentage of women (66.1%) with private coverage at the time of interview.

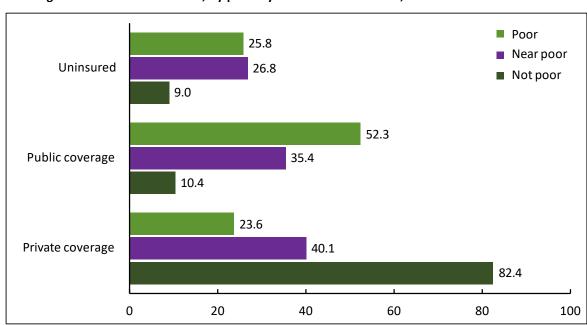


Figure 4. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by poverty status: United States, 2019

NOTES: Poor persons were defined as those with incomes less than 100% of the federal poverty level (FPL); near-poor persons have incomes 100% to less than 200% of the FPL; not-poor persons have incomes that are 200% of the FPL or greater. Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons were also defined as uninsured if they 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. Public coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- In 2019, among adults aged 18–64, the percentage who were uninsured at the time of interview was higher among those who were poor (25.8%) and near poor (26.8%) compared with those who were not poor (9.0%) (Figure 4).
- The percentage who had public coverage was highest among those who were poor (52.3), followed by those who were near poor (35.4%) and those who were not poor (10.4%).
- The percentage who had private coverage was lowest among those who were poor (23.6%), followed by those who were near poor (40.1%) and those who were not poor (82.4%).

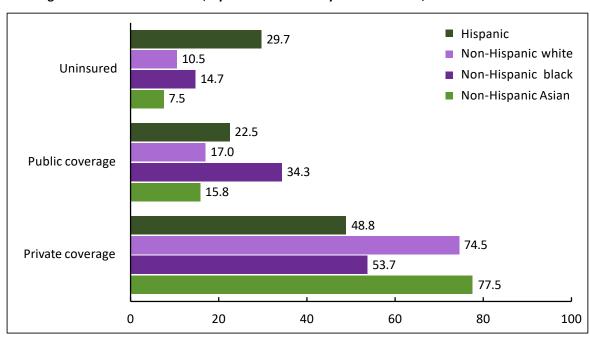


Figure 5. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by race and ethnicity: United States, 2019

NOTES: Non-Hispanic adults of other races or multiple races were not included in the analysis. Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons were also defined as uninsured if they 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. Public coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- In 2019, 29.7% of Hispanic, 14.7% of non-Hispanic black, 10.5% of non-Hispanic white, and 7.5% of non-Hispanic Asian adults aged 18–64 were uninsured at the time of interview (Figure 5). Hispanic adults were the most likely to lack health insurance coverage, followed by non-Hispanic black, non-Hispanic white, and non-Hispanic Asian adults.
- Among adults aged 18–64, 34.3% of non-Hispanic black, 22.5% of Hispanic, 17.0% of non-Hispanic white, and 15.8% of non-Hispanic Asian adults had public coverage at the time of interview. Non-Hispanic black adults were the most likely to have public coverage, followed by Hispanic adults. Non-Hispanic white and non-Hispanic Asian adults were the least likely to have public coverage.
- Non-Hispanic Asian (77.5%) and non-Hispanic white (74.5%) adults were more likely than non-Hispanic black (53.7%) and Hispanic (48.8%) adults to have private coverage at the time of interview. Non-Hispanic black adults were more likely have private coverage than Hispanic adults.

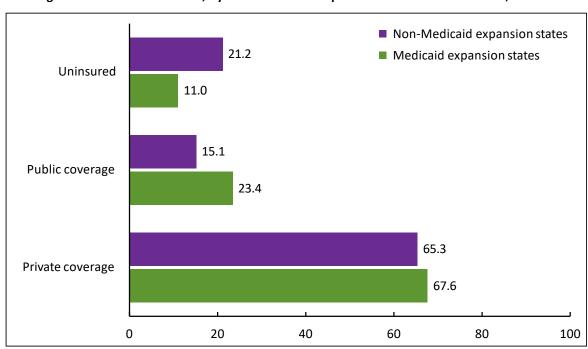


Figure 6. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by state Medicaid expansion status: United States, 2019

NOTES: Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children's Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons were also defined as uninsured if they 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. Public coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. Private coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- In 2019, among adults aged 18–64, those living in non-Medicaid expansion states (21.2%) were about twice as likely as those living in Medicaid expansion states (11.0%) to be uninsured at the time of interview (Figure 6).
- Among adults aged 18–64, those living in non-Medicaid expansion states (15.1%) were less likely than those living in expansion states (23.4%) to have public coverage at the time of interview.
- Among adults aged 18–64, those living in non-Medicaid expansion states (65.3%) were less likely than those living in Medicaid expansion states (67.6%) to have private coverage at the time of interview.

3.7 Total Male 3.5 Female 3.9 Poor 3.0 Near poor 5.3 Not poor 3.2 Hispanic 3.8 Non-Hispanic white 3.6 Non-Hispanic black 2.9 0 2 4 6 8 10

Figure 7. Percentage of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by selected characteristics: United States, 2019

NOTES: Poor persons were defined as those with incomes less than 100% of the federal poverty level (FPL); near-poor persons have incomes 100% to less than 200% of the FPL; not-poor persons have incomes that are 200% of the FPL or greater. Exchange-based coverage is a private health insurance plan purchased through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act (ACA) of 2010 (P.L. 111–148, P.L. 111–152). Data are based on household interviews of a sample of the civilian noninstitutionalized population.

- In 2019, among persons under age 65, 3.7% were covered by exchange-based coverage (Figure 7).
- Exchange-based coverage was higher among those who were near poor (5.3%) compared with those who were poor (3.0%) and those who were not poor (3.2%).
- Exchange-based coverage did not vary significantly by sex or race and ethnicity.

Technical Notes

All estimates in this report are based on preliminary data. The 2019 estimates are being released prior to final data editing and final weighting to provide access to the most recent information from NHIS. Previously, differences between estimates calculated using preliminary data files and final data files were typically less than 0.1 percentage point. In 2019, the NHIS questionnaire was redesigned to better meet the needs of data users. The redesign aimed to improve the measurement of covered health topics, reduce respondent burden by shortening the length of the questionnaire, harmonize overlapping content with other federal surveys, establish a long-term structure of ongoing and periodic topics, and incorporate advances in survey methodology and measurement. For more information about the redesigned NHIS, visit the website at: https://www.cdc.gov/nchs/nhis/2019_quest_redesign.htm.

Data source

Data used to produce this ER report are derived from the Sample Adult and Sample Child components from the January–December 2019 NHIS. NHIS is a nationally representative household survey conducted throughout the year to collect information on health status, health-related behaviors, and health care access and utilization. The NHIS interview begins by identifying everyone who usually lives or stays in the household. Then, one "sample adult" aged 18 and over and one "sample child" aged 17 years and under (if any children live in the household) are randomly selected. Information about the sample adults is collected from the sample adults themselves unless they are physically or mentally unable to report, in which case a knowledgeable proxy can answer for them. Information about the sample child is collected from a parent or adult who is knowledgeable about and responsible for the health care of the sample child. This respondent may or may not also be the sample adult. Data analysis was based on information collected on 32,391 sample adults and 9,293 sample children. 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

The National Center for Health Statistics (NCHS) creates survey sampling weights to produce representative national estimates. The base weight is equal to the inverse of the probability of selection of the sample address. In 2019, the adjustment method changed to incorporate more robust multilevel models predictive of response propensity. Nonresponse-adjusted weights are further calibrated to U.S. Census Bureau population projections and American Community Survey (ACS) 1-year estimates for age, sex, race and ethnicity, educational attainment, census division, and metropolitan statistical area status. Prior to 2019, calibration was only to age, sex, and race and ethnicity projections. These changes to the nonresponse adjustment approach and the calibration methods have the potential to impact the weighted survey estimates. See the "2019 questionnaire redesign and comparison of estimates to earlier years" section below and https://www.cdc.gov/nchs/nhis.htm for more details.

Point estimates and estimates of their variances were calculated using SUDAAN software (RTI International, Research Triangle Park, N.C.) to account for the complex sample design of NHIS, taking into account stratum and primary sampling unit identifiers. The Taylor series linearization method was chosen for variance estimation.

All estimates shown meet the NCHS standards of reliability as specified in "National Center for Health Statistics Data Presentation Standards for Proportions" (1). All differences discussed are statistically significant unless otherwise noted. Differences between percentages 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.

2019 questionnaire redesign and comparison of estimates to earlier years

In 2019, the NHIS questionnaire was redesigned to better meet the needs of data users. Due to changes in weighting and design methodology, direct comparisons between estimates for 2019 and earlier years should be made with caution, as the impact of these changes has not been fully evaluated at this time. A working paper entitled, "Preliminary Evaluation of the Impact of the 2019 National Health Interview Survey Questionnaire Redesign and Weighting Adjustments on Early Release Program Estimates," available from the Early Release Program homepage, discusses both these issues in greater detail for three indicators of insurance coverage (lack of health insurance [uninsured], public health plan coverage, and private health insurance coverage). However, the discussion of these health insurance indicators is limited to adults aged 18–64.

The increase in the percentage of adults aged 18–64 who were uninsured at the time of interview—from 13.3% in 2018 to 14.7% in 2019—appears to be part of an increasing trend since 2016. The change in weighting approach may account for some (but not all) of the increase between 2018 and 2019.

For public health plan coverage, the increase in the percentage of adults aged 18–64 who were covered by public coverage—from 19.4% in 2018 to 20.4% in 2019—appears to reverse a general decline since 2016. Questionnaire design and weighting adjustment effects may have shifted estimates in opposing directions, leading to no overall impact. The increase observed between 2018 and 2019 is likely to reflect an actual change over time.

For private coverage, the decrease in the percentage of adults aged 18–64 who were covered by private coverage—from 68.9% in 2018 to 66.8% in 2019—appears to be part of a decreasing trend since 2015. Questionnaire design and weighting adjustment effects

may have shifted estimates in opposing directions, leading to no overall impact. The decrease observed between 2018 and 2019 is likely to reflect an actual change over time.

References

1. Parker JD, Talih M, Malec DJ, Beresovsky V, Carroll M, Gonzalez Jr JF, et al. National Center for Health Statistics data presentation standards for proportions. National Center for Health Statistics. Vital Health Stat 2(175). 2017. Available from: https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf.

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Table I. Percentages (and 95% confidence intervals) of persons who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by age group and 6-month interval: United States, 2019

Age group (years) and 6-month interval	Uninsured ¹ at the time of interview	Public health plan coverage²	Private health insurance coverage ³
All ages			
2019 (full year)	10.3 (9.7–10.8)	37.4 (36.6-38.3)	61.3 (60.2-62.4)
Jan–Jun	9.5 (8.9–10.1)	37.4 (36.4-38.4)	62.1 (60.9-63.4)
Jul–Dec	11.0 (10.2-11.8)	37.5 (36.3-38.7)	60.5 (59.1-61.8)
Under 65			
2019 (full year)	12.1 (11.4–12.8)	26.0 (25.1-26.9)	63.7 (62.5-64.8)
Jan–Jun	11.2 (10.5–11.9)	26.1 (25.0-27.2)	64.5 (63.2-65.8)
Jul-Dec	13.0 (12.1–13.9)	26.0 (24.9-27.1)	62.8 (61.4-64.3)
0–17			
2019 (full year)	5.1 (4.5–5.7)	41.4 (39.8-43.0)	55.2 (53.4-57.0)
Jan–Jun	4.4 (3.7–5.0)	41.6 (39.7-43.5)	55.8 (53.8-57.8)
Jul–Dec	5.8 (5.0-6.7)	41.2 (39.2-43.2)	54.7 (52.4-57.0)
18–64			
2019 (full year)	14.7 (13.9–15.4)	20.4 (19.6-21.2)	66.8 (65.7-67.9)
Jan-Jun	13.7 (12.9–14.6)	20.4 (19.4-21.4)	67.7 (66.5-69.0)
Jul–Dec	15.6 (14.6–16.7)	20.4 (19.2-21.6)	65.9 (64.5-67.2)
65 and over			
2019 (full year)	0.9 (0.6–1.3)	96.0 (95.5-96.5)	49.1 (47.6–50.7)
Jan–Jun	0.7 (0.4–1.1)	96.0 (95.3-96.6)	49.8 (48.0-51.7)
Jul-Dec	1.0 (0.5–1.8)	96.0 (95.2-96.7)	48.4 (46.2-50.6)

Persons were defined as uninsured if they 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. Persons were also defined as uninsured if they 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.

²Public health plan coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

³Private health insurance coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

Table II. Number (millions) of persons who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by age group and 6-month interval: United States, 2019

Age group (years) and 6-month interval	Uninsured ¹ at the time of interview	Public health plan coverage²	Private health insurance coverage ³
All ages			
2019 (full year)	33.2	121.4	198.7
Jan–Jun	30.7	121.0	201.0
Jul-Dec	35.7	121.7	196.2
Under 65			
2019 (full year)	32.8	70.6	172.7
Jan–Jun	30.4	70.8	175.0
Jul-Dec	35.2	70.5	170.4
0–17			
2019 (full year)	3.7	30.3	40.4
Jan–Jun	3.2	30.4	40.8
Jul-Dec	4.3	30.1	40.0
18–64			
2019 (full year)	29.0	40.3	132.3
Jan–Jun	27.2	40.3	134.1
Jul-Dec	30.9	40.4	130.5
65 and over			
2019 (full year)	0.5	50.8	26.0
Jan–Jun	0.4	50.2	26.1
Jul-Dec	0.5	51.2	25.8

¹Persons were defined as uninsured if they 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. Persons were also defined as uninsured if they 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.

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

 $SOURCE: National\ Center\ for\ Health\ Statistics, National\ Health\ Interview\ Survey,\ 2019.$

Table III. Percentages (and 95% confidence intervals) of persons under age 65 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by sex, age group, and 6-month interval: United States, 2019

Sex, age group (years), and 6-month interval	Uninsured ¹ at the time of interview	Public health plan coverage²	Private health insurance coverage
Male			
Under 65			
2019 (full year)	13.2 (12.3–14.1)	24.7 (23.6-25.9)	63.9 (62.4-65.4)
Jan–Jun	12.4 (11.5–13.5)	25.0 (23.7-26.4)	64.3 (62.7-65.9)
Jul–Dec	13.9 (12.6–15.2)	24.4 (23.0-25.9)	63.5 (61.6-65.4)
0–17			
2019 (full year)	5.1 (4.4–5.8)	42.1 (40.1-44.2)	54.5 (52.2-56.7)
Jan–Jun	4.7 (3.8–5.6)	42.8 (40.4-45.3)	54.1 (51.5-56.6)
Jul–Dec	5.5 (4.4–6.7)	41.4 (38.7-44.1)	54.9 (52.0-57.7)
18–64			
2019 (full year)	16.3 (15.1–17.4)	18.1 (17.0-19.2)	67.5 (66.1-69.0)
Jan–Jun	15.4 (14.2–16.7)	18.2 (16.9-19.6)	68.3 (66.5-70.0)
Jul–Dec	17.1 (15.5–18.8)	17.9 (16.4–19.6)	66.8 (64.8-68.8)
Female			
Under 65			
2019 (full year)	11.0 (10.4–11.7)	27.3 (26.2-28.4)	63.4 (62.2-64.7)
Jan–Jun	10.0 (9.2–10.7)	27.1 (25.7-28.5)	64.7 (63.1-66.3)
Jul–Dec	12.1 (11.1–13.1)	27.6 (26.2-28.9)	62.2 (60.6-63.7)
0–17			
2019 (full year)	5.1 (4.4–6.0)	40.6 (38.5-42.8)	56.0 (53.8-58.2)
Jan–Jun	4.0 (3.2-5.0)	40.3 (37.6-43.1)	57.6 (55.0-60.2)
Jul–Dec	6.2 (5.0–7.6)	41.0 (38.1-43.9)	54.4 (51.5-57.4)
18–64			
2019 (full year)	13.1 (12.4–13.9)	22.6 (21.6-23.6)	66.1 (64.9-67.3)
Jan–Jun	12.1 (11.1–13.1)	22.4 (21.1-23.8)	67.2 (65.6-68.8)
Jul–Dec	14.2 (13.1–15.3)	22.8 (21.4–24.2)	64.9 (63.4–66.4)

Persons were defined as uninsured if they 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. Persons were also defined as uninsured if they 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.

²Public health plan coverage includes Medicaid, CHIP, state-sponsored or other government-sponsored health plan, Medicare, and military plans. A small number of persons were covered by both public and private plans and were included in both categories.

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

SOURCE: National Center for Health Statistics, National Health Interview Survey, 2019.

Table IV. Percentages (and 95% confidence intervals) of persons under age 65 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by poverty status, age group, and 6-month interval: United States, 2019

Poverty status ¹ , age group (years), and 6-month interval	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage ⁴
Poor			
Under 65			
2019 (full year)	18.3 (16.2–20.5)	65.3 (63.0-67.5)	18.2 (16.3-20.3)
Jan–Jun	15.5 (13.2–18.1)	68.5 (65.2–71.7)	17.6 (14.6–20.9)
Jul–Dec	20.9 (18.1–23.8)	62.2 (58.9-65.4)	18.9 (16.4–21.5)
0–17			
2019 (full year)	5.1 (3.8–6.8)	87.8 (85.3–90.1)	8.9 (7.1–11.1)
Jan–Jun	3.4 (1.7–6.1)	90.4 (86.8–93.3)	7.9 (5.2–11.2)
Jul–Dec	6.8 (4.7–9.4)	85.4 (81.1–89.0)	9.9 (7.0–13.6)
18–64			
2019 (full year)	25.8 (23.0–28.9)	52.3 (49.4–55.1)	23.6 (20.9–26.5)
Jan–Jun	22.6 (19.1–26.3)	55.8 (51.7–59.8)	23.2 (19.0–27.9)
Jul–Dec	28.8 (25.2–32.7)	49.1 (45.3–52.9)	23.9 (20.9–27.1)
Near poor			
Under 65			
2019 (full year)	20.1 (18.6–21.6)	47.0 (45.1–48.9)	35.4 (33.6–37.2)
Jan–Jun	18.7 (16.5–21.0)	47.6 (45.1–50.0)	36.4 (33.8–39.0)
Jul–Dec	21.5 (19.2–23.9)	46.4 (43.6–49.2)	34.3 (32.1–36.6)
0–17			
2019 (full year)	6.5 (5.2–8.0)	70.3 (67.7–72.8)	25.8 (23.1–28.5)
Jan–Jun	6.1 (4.5–8.0)	69.8 (65.8–73.6)	27.1 (23.0–31.6)
Jul–Dec	7.0 (5.1–9.2)	70.8 (66.6–74.8)	24.3 (21.0–27.9)
18–64			
2019 (full year)	26.8 (24.9–28.8)	35.4 (33.3–37.5)	40.1 (38.3–42.0)
Jan–Jun	25.1 (22.2–28.2)	36.2 (33.6–38.9)	41.1 (38.6–43.6)
Jul–Dec	28.5 (25.8–31.4)	34.6 (31.6–37.7)	39.2 (36.6–41.9)
Not poor			
Under 65			
2019 (full year)	7.9 (7.3–8.4)	11.8 (11.2–12.5)	82.0 (81.1–82.8)
Jan–Jun	7.4 (6.8–8.0)	11.6 (10.8–12.4)	82.7 (81.7–83.6)
Jul–Dec	8.4 (7.6–9.3)	12.1 (11.2–13.0)	81.2 (79.9–82.5)
0–17			
2019 (full year)	4.3 (3.6–5.1)	16.3 (14.9–17.8)	80.7 (79.1–82.2)
Jan–Jun	3.7 (3.0–4.5)	16.1 (14.5–17.9)	81.5 (79.7–83.2)
Jul–Dec	4.9 (3.9–6.2)	16.6 (14.8–18.4)	79.9 (77.7–81.9)
18–64			
2019 (full year)	9.0 (8.4–9.6)	10.4 (9.8–11.0)	82.4 (81.6–83.2)
Jan–Jun	8.5 (7.9–9.2)	10.2 (9.4–11.0)	83.1 (82.1–84.1)
Jul-Dec	9.5 (8.6–10.6)	10.6 (9.8–11.5)	81.6 (80.4–82.9)

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 for that year (Semega JL, Kollar MA, Creamer J, Mohanty A. Income and poverty in the United States: 2018. Current Population Reports, P60–266. 2019). Poor persons were defined as those with incomes less than 100% of the federal poverty level (FPL); near-poor persons have incomes 100% to less than 200% of the FPL; not-poor persons have incomes that are 200% of the FPL or greater. The percentage of respondents under age 65 with unknown poverty status in 2019 was 7.6%. Persons with unknown poverty status are not shown in this table. Estimates may differ from estimates that are based on both reported and imputed income.

²Persons were defined as uninsured if they 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. Persons were also defined as uninsured if they 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.

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

Private health insurance coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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

SOURCE: National Center for Health Statistics, National Health Interview Survey, 2019.

Table V. Percentages (and 95% confidence intervals) of persons under age 65 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by race and ethnicity, age group, and 6-month interval: United States, 2019

Race and ethnicity ¹ , age group (years), and 6-month interval	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage ⁴
Hispanic			
Under 65			
2019 (full year)	22.1 (20.3-23.9)	34.7 (32.7-36.7)	44.3 (42.1-46.4)
Jan–Jun	20.0 (18.1-22.1)	35.0 (32.7-37.4)	45.8 (43.7-47.9)
Jul-Dec	24.1 (21.6-26.8)	34.4 (31.8-37.0)	42.7 (39.6-45.9)
0–17			
2019 (full year)	7.2 (6.0-8.6)	58.7 (55.9-61.5)	35.4 (32.7-38.1)
Jan–Jun	6.0 (4.6-7.7)	60.1 (56.8-63.4)	34.9 (32.0-38.0)
Jul-Dec	8.4 (6.8-10.2)	57.2 (52.9-61.5)	35.8 (31.9-39.8)
18–64			
2019 (full year)	29.7 (27.4-32.0)	22.5 (20.4-24.7)	48.8 (46.5-51.1)
Jan–Jun	27.2 (24.6-29.9)	22.2 (19.5-25.2)	51.4 (49.0-53.8)
Jul–Dec	32.1 (28.7-35.6)	22.8 (20.3-25.5)	46.2 (42.8-49.6)
Non-Hispanic white			
Under 65			
2019 (full year)	9.0 (8.4-9.7)	19.6 (18.7–20.7)	73.3 (72.2-74.3)
Jan–Jun	8.4 (7.7-9.1)	20.0 (18.9-21.1)	73.6 (72.4–74.8)
Jul-Dec	9.7 (8.8–10.6)	19.3 (18.0-20.7)	72.9 (71.4–74.4)
0–17			
2019 (full year)	4.5 (3.7-5.4)	27.9 (26.1-29.8)	69.3 (67.4–71.1)
Jan–Jun	3.8 (3.0-4.7)	28.3 (26.3-30.5)	69.6 (67.5-71.7)
Jul-Dec	5.2 (4.0-6.7)	27.5 (25.1–30.0)	68.9 (66.3-71.4)
18–64			
2019 (full year)	10.5 (9.8–11.2)	17.0 (16.1–18.0)	74.5 (73.5–75.5)
Jan–Jun	9.8 (9.1–10.7)	17.4 (16.3–18.5)	74.8 (73.6–76.1)
Jul–Dec	11.1 (10.1–12.1)	16.7 (15.4–18.1)	74.2 (72.8–75.6)
Non-Hispanic black			
Under 65			
2019 (full year)	11.6 (10.2–13.0)	42.8 (40.0-45.6)	48.5 (46.0-50.9)
Jan–Jun	10.7 (9.1–12.4)	41.9 (38.9-44.9)	50.4 (47.2-53.7)
Jul-Dec	12.4 (10.3–14.8)	43.7 (39.9–47.5)	46.5 (43.5–49.6)
0–17			
2019 (full year)	3.5 (2.5–4.9)	64.5 (60.1–68.7)	35.1 (31.1–39.3)
Jan–Jun	3.2 (1.7–5.5)	61.0 (55.0–66.7)	39.3 (33.7-45.1)
Jul–Dec	3.9 (2.3-6.0)	68.1 (61.8–73.9)	30.8 (25.1–37.0)
18–64			
2019 (full year)	14.7 (12.9–16.7)	34.3 (31.5–37.1)	53.7 (51.3–56.0)
Jan–Jun	13.6 (11.7–15.8)	34.2 (31.5–36.9)	54.9 (51.8–57.9)
Jul–Dec	15.7 (12.8–18.8)	34.5 (30.6–38.5)	52.5 (49.3–55.7)
See footnotes at the end of table.			

Table V. Percentages (and 95% confidence intervals) of persons under age 65 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by race and ethnicity, age group, and 6-month interval: United States, 2019—cont.

Race and ethnicity ¹ , age group (years), and 6-month interval	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage⁴
Non-Hispanic Asian			
Under 65			
2019 (full year)	6.6 (5.0-8.7)	17.5 (15.1–20.2)	76.6 (73.5–79.5)
Jan-Jun	6.2 (3.7–9.7)	17.1 (14.0–20.7)	77.4 (73.4–81.0)
Jul-Dec	7.1 (4.5–10.5)	17.9 (14.0–22.4)	75.8 (70.9–80.2)
0–17			
2019 (full year)	3.2 (1.6-5.7)	24.1 (19.6-29.1)	73.2 (68.2–77.8)
Jan–Jun	*	23.1 (18.0-28.9)	75.5 (69.6-80.8)
Jul-Dec	*	25.2 (17.4-34.3)	70.8 (61.5-78.9)
18–64			
2019 (full year)	7.5 (5.6-9.9)	15.8 (13.2-18.7)	77.5 (74.2-80.5)
Jan–Jun	7.4 (4.4–11.6)	15.5 (12.0-19.7)	77.9 (73.1-82.1)
Jul–Dec	7.6 (4.7–11.6)	16.1 (12.5–20.2)	77.1 (72.6–81.2)
Non-Hispanic, other races and multiple races			
Under 65			
2019 (full year)	14.6 (11.4–18.2)	34.5 (28.9-40.3)	52.9 (46.7-59.0)
Jan–Jun	15.6 (11.5-20.4)	33.4 (28.0-39.2)	52.6 (46.2-58.9)
Jul-Dec	13.5 (9.6-18.2)	35.6 (28.3-43.4)	53.2 (45.1-61.2)
0–17			
2019 (full year)	5.9 (3.5-9.3)	45.3 (38.0-52.8)	50.4 (42.6-58.3)
Jan–Jun	6.6 (3.2-11.8)	45.6 (37.9–53.6)	49.5 (41.1–57.9)
Jul-Dec	*	44.9 (34.5-55.6)	51.5 (40.9-62.0)
18–64			
2019 (full year)	21.1 (17.0–25.8)	26.2 (20.6-32.5)	54.8 (48.1-61.3)
Jan–Jun	22.9 (17.1–29.5)	23.5 (18.1–29.5)	55.1 (47.5–62.5)
Jul-Dec	19.4 (14.1–25.6)	29.0 (21.4-37.5)	54.4 (45.5-63.1)

^{*}Estimate is not shown, as it does not meet NCHS standards of reliability.

'Hispanic origin and race are two separate and distinct categories. Persons of Hispanic or Latino origin may be of any race or combination of races. Hispanic or Latino origin includes persons of Mexican, Puerto Rican, Cuban, Central and South American, or Spanish origin. Race is based on a respondent's description of their own racial background. More than one race may be reported. For conciseness, the text, tables, and figures in this report use shorter versions of the 1997 Office of Management and Budget terms for race and Hispanic or Latino origin. For example, the category "not Hispanic, black or African American, single race" is referred to as "non-Hispanic black" in the text, tables, and figures. Estimates for non-Hispanic or sort of multiple races, are combined into the "non-Hispanic, other races and multiple races" category.

²Persons were defined as uninsured if they 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. Persons were also defined as uninsured if they 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.

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

⁴Private health insurance coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

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

Table VI. Percentages (and 95% confidence intervals) of persons under age 65 who lacked health insurance coverage, had public health plan coverage, and had private health insurance coverage at the time of interview, by state Medicaid expansion status, age group, and 6-month interval: United States, 2019

State Medicaid expansion status ¹ , age group (years), and 6-month interval	Uninsured ² at the time of interview	Public health plan coverage ³	Private health insurance coverage ⁴
Madisaid augustas status			
Medicaid expansion states ⁵			
Under 65 years	01/06 07	27.0 (26.7. 20.0)	6F 0 (62 0 66 2)
2019 (full year)	9.1 (8.6–9.7)	27.8 (26.7–28.9)	65.0 (63.8–66.2)
Jan-Jun	8.2 (7.5–8.9)	27.4 (25.9–28.9)	66.2 (64.7–67.7)
Jul-Dec	10.0 (9.3–10.8)	28.2 (26.8–29.6)	63.8 (62.2–65.5)
0–17 years	((/
2019 (full year)	3.9 (3.3–4.6)	40.3 (38.3–42.2)	57.6 (55.5–59.7)
Jan–Jun	3.2 (2.6–4.0)	40.2 (37.8–42.5)	58.2 (56.0–60.3)
Jul–Dec	4.6 (3.6–5.7)	40.3 (37.7–43.0)	57.0 (54.0–60.0)
18–64 years			
2019 (full year)	11.0 (10.4–11.6)	23.4 (22.3–24.5)	67.6 (66.4–68.8)
Jan–Jun	10.0 (9.1–10.9)	22.8 (21.4-24.4)	69.1 (67.5–70.6)
Jul–Dec	11.9 (11.2–12.8)	23.9 (22.6-25.3)	66.2 (64.6-67.8)
Non-Medicaid expansion states ⁶			
Under 65 years			
2019 (full year)	17.1 (15.8–18.5)	23.0 (21.5-24.6)	61.4 (59.0-63.8)
Jan–Jun	16.2 (14.8–17.7)	23.9 (22.2-25.6)	61.6 (59.0-64.2)
Jul-Dec	18.1 (16.4–19.8)	22.2 (20.5-24.0)	61.1 (58.5-63.8)
0–17 years			
2019 (full year)	7.0 (6.0–8.1)	43.2 (40.1–46.3)	51.5 (47.9–55.0)
Jan-Jun	6.1 (4.9–7.5)	43.8 (40.0–47.6)	52.0 (48.0–56.1)
Jul-Dec	7.8 (6.5–9.3)	42.5 (39.2–45.9)	50.9 (47.2–54.6)
18–64 years	,	((
2019 (full year)	21.2 (19.6–22.8)	15.1 (14.0–16.3)	65.3 (63.2–67.3)
Jan-Jun	20.2 (18.4–22.1)	16.1 (15.0–17.2)	65.4 (63.1–67.6)
Jul-Dec	22.1 (20.0–24.3)	14.2 (12.7–15.7)	65.2 (62.8–67.6)

¹ Under provisions of the Affordable Care Act of 2010 (P.L. 111–148, P.L. 111–152), states have the option to expand Medicaid eligibility to cover adults who have incomes up to and including 138% of the federal poverty level. There is no deadline for states to choose to implement the Medicaid expansion, and they may do so at any time. As of January 1, 2019, 33 states and the District of Columbia moved forward with Medicaid expansion.

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

²Persons were defined as uninsured if they 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. Persons were also defined as uninsured if they 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.

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

Private health insurance coverage includes any comprehensive private insurance plan (including health maintenance and preferred provider organizations). These plans include those obtained through an employer, purchased directly, purchased through local or community programs, or purchased through the Health Insurance Marketplace or a state-based exchange. 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.

⁵For 2019, states moving forward with Medicaid expansion included: Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Hawaii, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, Vermont, Virginia, Washington, and West Virginia. The District of Columbia also moved forward with Medicaid expansion.

⁶For 2019, states not moving forward with Medicaid expansion included: Alabama, Florida, Georgia, Idaho, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

Table VII. Percentage (and 95% confidence interval) and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by 6-month interval and selected characteristics: United States, 2019

6-month interval and selected characteristics	Percent (95% confidence interval)	Number in millions
2019 (full year)		
Age group (years)		
Under 65	3.7 (3.4–4.0)	10.0
0–17	1.7 (1.4–2.1)	1.3
18–64	4.4 (4.0–4.8)	8.7
Sex		
Male	3.5 (3.1–3.9)	4.7
Female	3.9 (3.5–4.4)	5.3
Poverty status ¹		
Poor	3.0 (2.2–4.0)	1.1
Near poor	5.3 (4.6-6.1)	2.8
Not poor	3.2 (2.9–3.5)	5.8
Race and ethnicity ²		
Hispanic	3.8 (3.1–4.6)	2.1
Non-Hispanic white	3.6 (3.2–4.0)	5.5
Non-Hispanic black	2.9 (2.2–3.9)	1.0
Medicaid expansion status ³		
Medicaid expansion states ⁴	3.3 (3.0-3.8)	5.7
Non-Medicaid expansion states ⁵	4.3 (3.8–4.9)	4.3
Jan-Jun 2019		
Age group (years)		
Under 65	3.8 (3.5–4.2)	10.4
0–17	1.8 (1.5–2.3)	1.3
18–64	4.6 (4.1–5.0)	9.0
Sex		
Male	3.5 (3.0–4.0)	4.7
Female	4.2 (3.7–4.7)	5.7
Poverty status ¹		
Poor	3.6 (2.5–5.1)	1.2
Near poor	5.1 (4.2–6.2)	2.7
Not poor	3.2 (2.9–3.6)	5.9
Race and ethnicity ²		
Hispanic	3.9 (3.1–4.9)	2.2
Non-Hispanic white	3.7 (3.2–4.2)	5.7
Non-Hispanic black	3.0 (2.2–3.9)	1.0
Medicaid expansion status ³		
Medicaid expansion states ⁴	3.4 (3.0–3.9)	5.8
Non-Medicaid expansion states ⁵	4.5 (3.7–5.4)	4.5

See footnotes at the end of table.

Table VII. Percentage (and 95% confidence interval) and number in millions of persons under age 65 who had exchange-based private health insurance coverage at the time of interview, by 6-month interval and selected characteristics: United States, 2019—cont.

6-month interval and selected characteristics	Percent (95% confidence interval)	Number in millions
Jul-Dec 2019		
Age group (years)		
Under 65	3.6 (3.1–4.0)	9.7
0–17	1.6 (1.2–2.2)	1.2
18–64	4.3 (3.7–4.8)	8.5
Sex		
Male	3.5 (2.9–4.1)	4.7
Female	3.6 (3.1–4.3)	5.0
Poverty status ¹		
Poor	2.5 (1.6–3.7)	0.9
Near poor	5.5 (4.4–6.7)	2.9
Not poor	3.1 (2.7–3.6)	5.7
Race and ethnicity ²		
Hispanic	3.7 (2.8–4.7)	2.0
Non-Hispanic white	3.5 (2.9–4.1)	5.4
Non-Hispanic black	2.9 (1.7–4.7)	1.0
Medicaid expansion status ³		
Medicaid expansion states ⁴	3.3 (2.7–3.9)	5.6
Non-Medicaid expansion states ⁵	4.1 (3.5–4.7)	4.1

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 for that year (Semega JL, Kollar MA, Creamer J, Mohanty A. Income and poverty in the United States: 2018. Current Population Reports, P60–266. 2019). Poor persons were defined as those with incomes less than 100% of the federal poverty level (FPL); near-poor persons have incomes 100% to less than 200% of the FPL; not-poor persons have incomes that are 200% of the FPL or greater. The percentage of respondents under age 65 with unknown poverty status in 2019 was 7.6%. Persons with unknown poverty status are not shown in this table. Estimates may differ from estimates that are based on both reported and imputed income.

²Hispanic origin and race are two separate and distinct categories. Persons of Hispanic origin may be of any race or combination of races. Hispanic origin includes persons of Mexican, Puerto Rican, Cuban, Central and South American, or Spanish origin. Race is based on a respondent's description of their own racial background. More than one race may be reported. For conciseness, the text, tables, and figures in this report use shorter versions of the 1997 Office of Management and Budget terms for race and Hispanic or Latino origin. For example, the category "not Hispanic, black or African American, single race" is referred to as "non-Hispanic black" in the text, tables, and figures.

³Under provisions of the Affordable Care Act of 2010 (P.L. 111–148, P.L. 111–152), states have the option to expand Medicaid eligibility to cover adults who have income up to and including 138% of the federal poverty level. There is no deadline for states to choose to implement the Medicaid expansion, and they may do so at any time. As of January 1, 2019, 33 states and the District of Columbia moved forward with Medicaid expansion.

For 2019, states moving forward with Medicaid expansion included: Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Hawaii, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Montana, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, Vermont, Virginia, Washington, and West Virginia. The District of Columbia also moved forward with Medicaid expansion.

For 2019, states not moving forward with Medicaid expansion included: Alabama, Florida, Georgia, Idaho, Kansas, Mississippi, Missouri, Nebraska, North Carolina, Oklahoma, South Carolina, South Carolina, South Dakota, Tennessee, Texas, Utah, Wisconsin, and Wyoming.

NOTES: Exchange-based coverage is a private health insurance plan purchased through the Health Insurance Marketplace or state-based exchanges that were established as part of the Affordable Care Act of 2010 (P.L. 111–148, P.L. 111–152). Data are based on household interviews of a sample of the civilian noninstitutionalized population.