



# Health Insurance Coverage: Early Release of Estimates From the National Health Interview Survey, January–June 2020

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## What’s New

- Estimates of health insurance coverage based on data from January through June 2020 are provided.

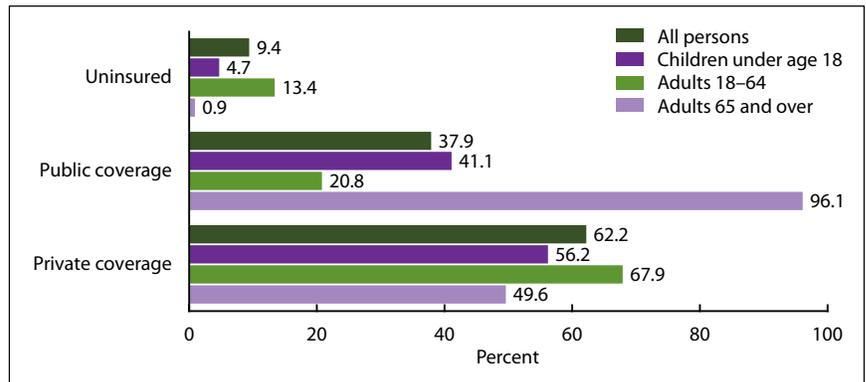
## Highlights

- From January through June 2020, 30.4 million persons of all ages (9.4%) were uninsured at the time of interview. This is lower than, but not significantly different from, 2019 where 33.2 million persons of all ages (10.3%) were uninsured.
- From January through June 2020, among adults aged 18–64, 13.4% were uninsured at the time of interview, 20.8% had public coverage, and 67.9% had private health insurance coverage.
- Among children aged 0–17 years, 4.7% were uninsured, 41.1% had public coverage, and 56.2% had private health insurance coverage.
- Among adults aged 18–64, those who were poor (21.8%) and near poor (23.9%) were more likely than those who were not poor (8.8%) to be uninsured.
- Among adults aged 18–64, Hispanic adults (26.5%) were more likely than non-Hispanic black (13.2%), non-Hispanic white (9.7%), and non-Hispanic Asian (9.3%) adults to be uninsured.
- Among adults aged 18–64, 8.4 million (4.3%) were covered by private health insurance plans obtained through the Health Insurance Marketplace or state-based exchanges.

This report presents estimates of health insurance coverage for the civilian noninstitutionalized U.S. population based on data from the January–June 2020 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 age, sex, poverty status, race and ethnicity, and state Medicaid expansion status also are included. Detailed appendix tables contain all estimates presented in the figures, additional estimates for 2019, 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 2020 by age group and poverty status, and more information about NHIS and the Early Release (ER) Program, are available from the [NHIS website](#).

**Figure 1. Percentages of persons who were uninsured or had public or private coverage at the time of interview, by age group: United States, January–June 2020**

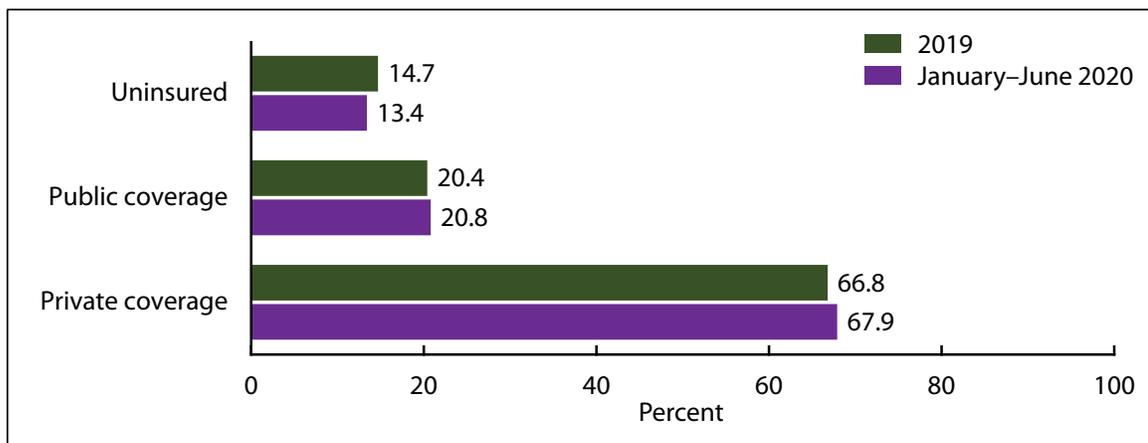


NOTES: Persons were defined as uninsured if they did not have any private health insurance, Medicare, Medicaid, Children’s Health Insurance Program (CHIP), state-sponsored or other government plan, or military plan. Persons also were defined as uninsured if they had only Indian Health Service coverage 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. SOURCE: National Center for Health Statistics, National Health Interview Survey, 2020.

- From January through June 2020, among persons of all ages, 9.4% were uninsured, 37.9% had public coverage, and 62.2% had private coverage at the time of interview (Figure 1).

- Adults aged 18–64 were the most likely to be uninsured (13.4%), followed by children aged 0–17 years (4.7%) and adults aged 65 and over (0.9%).
- Adults aged 65 and over were the most likely to have public coverage (96.1%), followed by children aged 0–17 years (41.1%) and adults aged 18–64 (20.8%).
- Adults aged 18–64 were the most likely to have private coverage (67.9%), followed by children aged 0–17 years (56.2%) and adults aged 65 and over (49.6%).

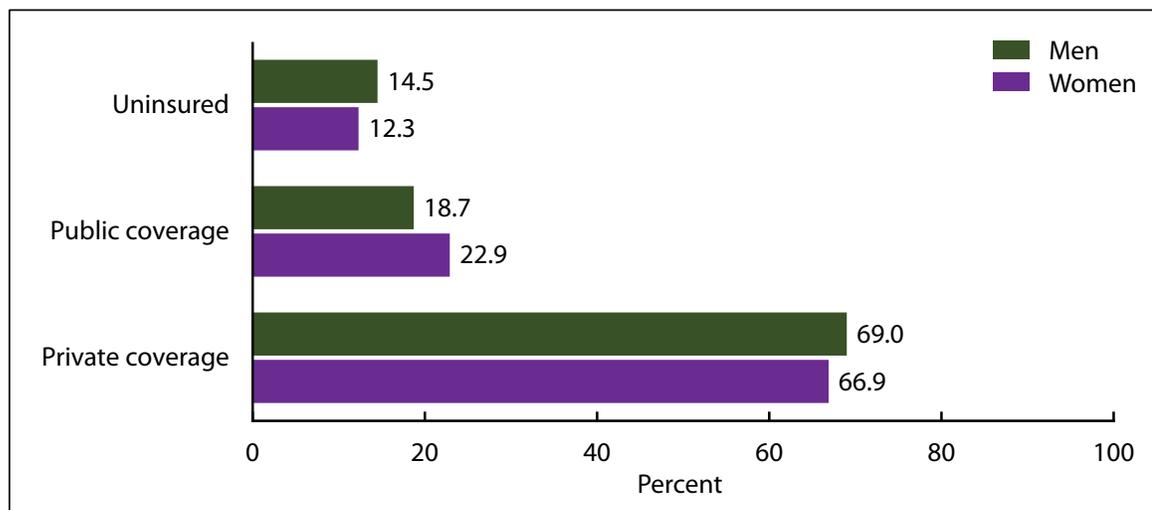
**Figure 2. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by year: United States, 2019–June 2020**



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 also were 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. Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population. SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

- Among adults aged 18–64, the percentage who were uninsured at the time of interview from January through June 2020 (13.4%) was lower than, but not statistically different from, the percentage who were uninsured in 2019 (14.7%) (Figure 2).
- Among adults aged 18–64, the percentage who had public coverage at the time of interview did not change significantly between 2019 (20.4%) and January through June 2020 (20.8%).
- Among adults aged 18–64, the percentage who had private coverage at the time of interview from January through June 2020 (67.9%) was higher than, but not statistically different from, the percentage who had private coverage in 2019 (66.8%).

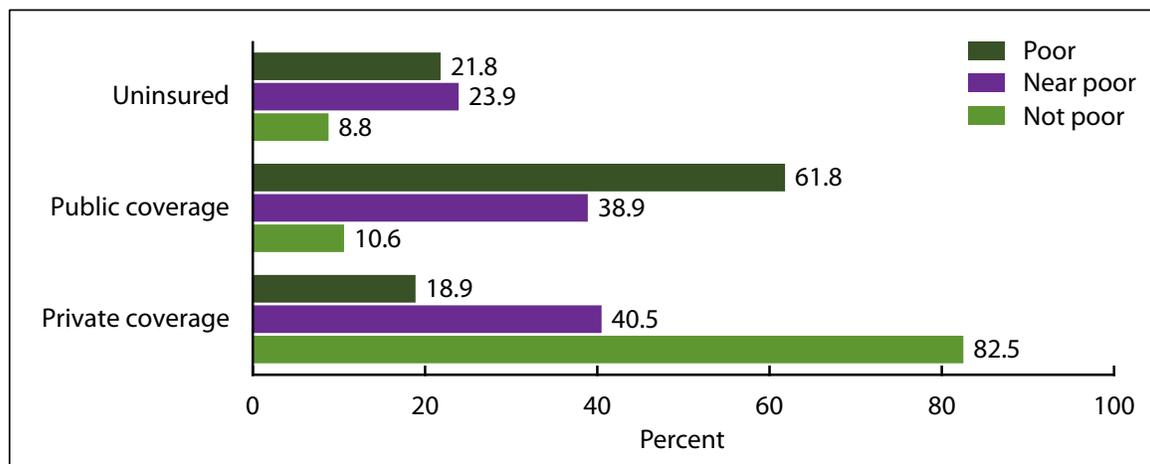
**Figure 3. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by sex: United States, January–June 2020**



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 also were 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. SOURCE: National Center for Health Statistics, National Health Interview Survey, 2020.

- From January through June 2020, among adults aged 18–64, the percentage of men who were uninsured at the time of interview (14.5%) was higher than, but not significantly different from, the percentage of women who were uninsured at the time of interview (12.3%) (Figure 3).
- Men (18.7%) were less likely than women (22.9%) to have public coverage at the time of interview.
- The observed percentage of men with private coverage at the time of interview (69.0%) was higher than, but not significantly different from, the percentage of women with private coverage at the time of interview (66.9%).

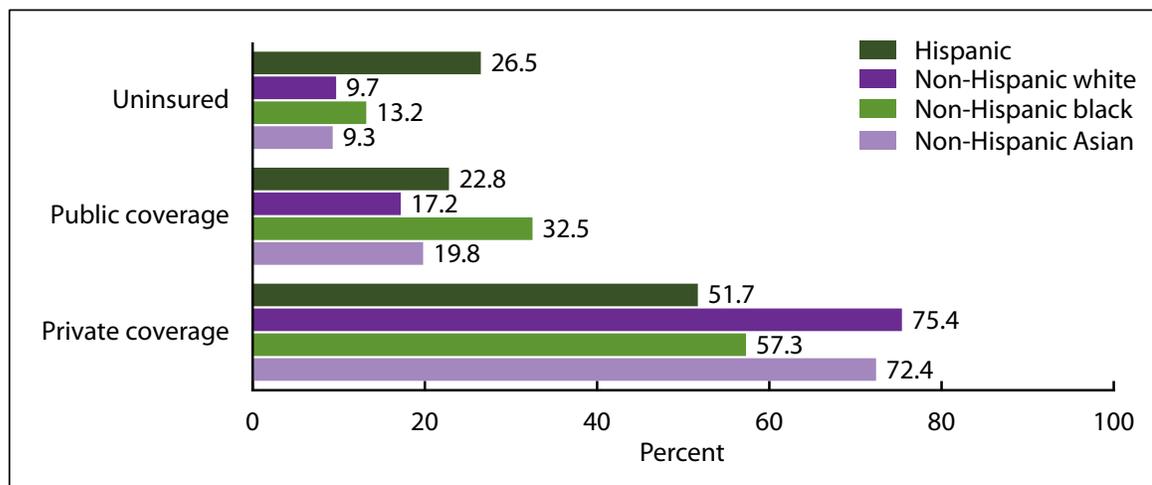
**Figure 4. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by poverty status: United States, January–June 2020**



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 also were 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.  
SOURCE: National Center for Health Statistics, National Health Interview Survey, 2020.

- From January through June 2020, among adults aged 18–64, the percentage who were uninsured at the time of interview was higher among those who were poor (21.8%) and near poor (23.9%) compared with those who were not poor (8.8%) (Figure 4).
- The percentage who had public coverage was highest among those who were poor (61.8), followed by those who were near poor (38.9%) and not poor (10.6%).
- The percentage who had private coverage was lowest among those who were poor (18.9%), followed by those who were near poor (40.5%) and not poor (82.5%).

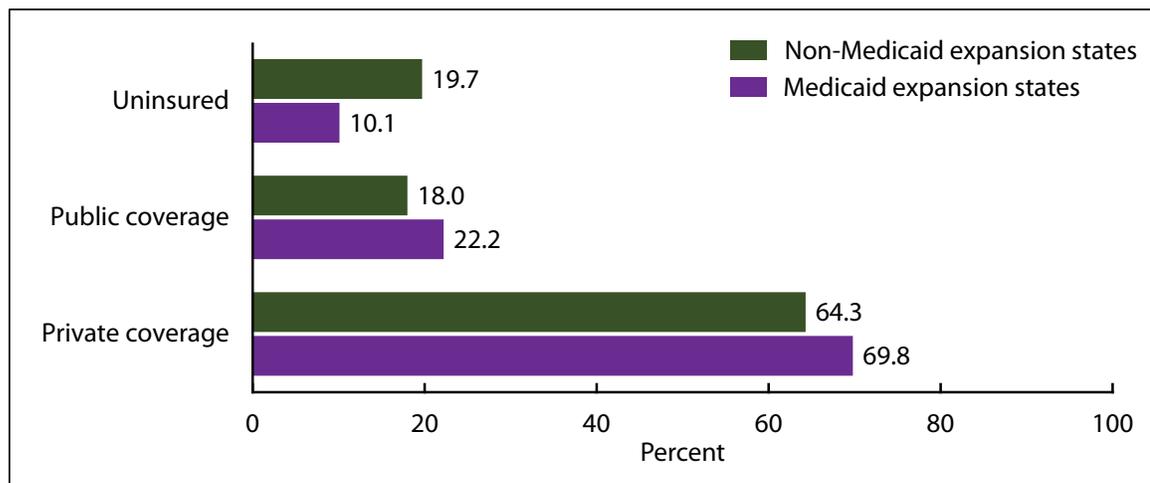
**Figure 5. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by race and ethnicity: United States, January–June 2020**



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 also were 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.  
 SOURCE: National Center for Health Statistics, National Health Interview Survey, 2020.

- From January through June 2020, 26.5% of Hispanic, 13.2% of non-Hispanic black, 9.7% of non-Hispanic white, and 9.3% 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 adults. Non-Hispanic white and non-Hispanic Asian adults were least likely to be uninsured.
- Among adults aged 18–64, 32.5% of non-Hispanic black, 22.8% of Hispanic, 19.8% of non-Hispanic Asian, and 17.2% of non-Hispanic white adults had public coverage at the time of interview. Non-Hispanic black adults were more likely to have public coverage than Hispanic, non-Hispanic white, and non-Hispanic Asian adults.
- Non-Hispanic white (75.4%) and non-Hispanic Asian (72.4%) adults were more likely than non-Hispanic black (57.3%) and Hispanic (51.7%) adults to have private coverage at the time of interview. Non-Hispanic black adults were more likely to have private coverage than Hispanic adults.

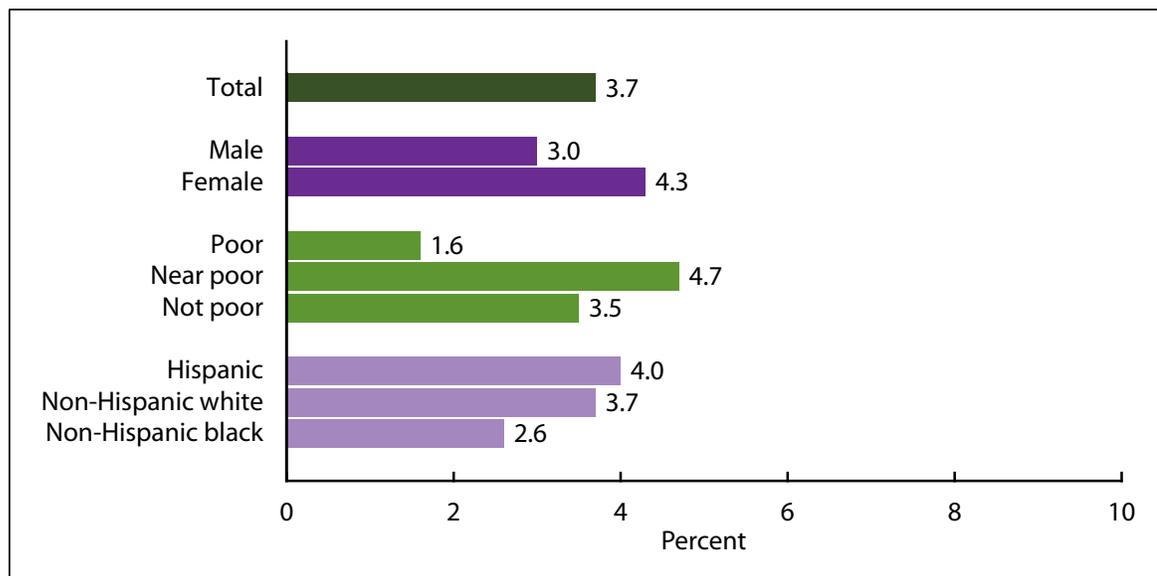
**Figure 6. Percentages of adults aged 18–64 who were uninsured or had public or private coverage at the time of interview, by state Medicaid expansion status: United States, January–June 2020**



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 also were 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. SOURCE: National Center for Health Statistics, National Health Interview Survey, 2020.

- From January through June 2020, among adults aged 18–64, those living in non-Medicaid expansion states (19.7%) were about twice as likely as those living in Medicaid expansion states (10.1%) to be uninsured at the time of interview (Figure 6).
- For public coverage, among adults aged 18–64, those living in non-Medicaid expansion states (18.0%) were less likely than those living in Medicaid expansion states (22.2%) to have this type of coverage at the time of interview.
- For private coverage, among adults aged 18–64, those living in non-Medicaid expansion states (64.3%) were less likely than those living in Medicaid expansion states (69.8%) to have this type of coverage at the time of interview.

**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, January–June 2020**



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 (ACA) of 2010 (P.L. 111–148, P.L. 111–152). 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. Data are based on household interviews of a sample of the civilian noninstitutionalized population.  
SOURCE: National Center for Health Statistics, National Health Interview Survey, 2020.

- From January through June 2020, 3.7% of persons under age 65 had exchange-based coverage ([Figure 7](#)).
- Males (3.0%) were less likely than females (4.3%) to have exchange-based coverage.
- Exchange-based coverage was higher among those who were near poor (4.7%) compared with those who were poor (1.6%) and not poor (3.5%). Exchange-based coverage was higher among those who were not poor compared with those who were poor.
- Exchange-based coverage was higher among non-Hispanic white adults (3.7%) than non-Hispanic black adults (2.6%). The observed difference in exchange-based coverage between Hispanic adults (4.0%) and non-Hispanic black adults was not statistically significant.

## Technical Notes

All estimates in this report are based on preliminary data. The 2020 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: [https://www.cdc.gov/nchs/nhis/2019\\_quest\\_redesign.htm](https://www.cdc.gov/nchs/nhis/2019_quest_redesign.htm).

### Data source

Data used to produce this ER report were derived from the Sample Adult and Sample Child components from the 2019–June 2020 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 for the January through June 2020 NHIS was based on information collected on 14,041 sample adults and 3,842 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 1-year estimates for age, sex, race and ethnicity, educational attainment, census division, and metropolitan statistical area status. Due to the COVID-19 pandemic, NHIS data collection switched to a telephone-only mode beginning March 19, 2020. While this change had little impact on Quarter 1 (January–March), lower response rates and differences in respondent characteristics for Quarter 2 (April–June) were observed. Comparisons of demographic distributions between Quarter 2 and Quarter 1 (and Quarter 2 of 2019) revealed that telephone-only data collection led to an over-representation of more affluent households, including a greater proportion of homeowners, among the participating sample. Though NHIS survey weights account for some of this change, differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. More information can be found at: <https://www.cdc.gov/nchs/data/earlyrelease/nonresponse202102-508.pdf>. 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 “2019 questionnaire redesign and comparison of estimates to earlier years” and the NHIS website (<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 of 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 little 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 little overall impact. The decrease observed between 2018 and 2019 is likely to reflect an actual change over time.

## Reference

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](https://www.cdc.gov/nchs/data/series/sr_02/sr02_175.pdf).

## Suggested citation

Cohen RA, Terlizzi EP, Cha AE, Martinez ME. Health insurance coverage: Early release of estimates from the National Health Interview Survey, January–June 2020. National Center for Health Statistics. February 2021. DOI: <https://dx.doi.org/10.15620/cdc:100469>.

**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–June 2020**

Age group (years) and 6-month interval	Uninsured <sup>1</sup> at the time of interview	Public health plan coverage <sup>2</sup>	Private health insurance coverage <sup>3</sup>
All ages			
2019 (full year)	10.3 (9.7–10.8)	37.4 (36.6–38.3)	61.3 (60.2–62.4)
January–June	9.5 (8.9–10.1)	37.4 (36.4–38.4)	62.1 (60.9–63.4)
July–December	11.0 (10.2–11.8)	37.5 (36.3–38.7)	60.5 (59.1–61.8)
2020 (January–June)	9.4 (8.6–10.2)	37.9 (36.8–39.1)	62.2 (60.8–63.6)
Under 65			
2019 (full year)	12.1 (11.4–12.8)	26.0 (25.1–26.9)	63.7 (62.5–64.8)
January–June	11.2 (10.5–11.9)	26.1 (25.0–27.2)	64.5 (63.2–65.8)
July–December	13.0 (12.1–13.9)	26.0 (24.9–27.1)	62.8 (61.4–64.3)
2020 (January–June)	11.1 (10.2–12.1)	26.3 (24.9–27.7)	64.7 (63.1–66.4)
0–17			
2019 (full year)	5.1 (4.5–5.7)	41.4 (39.8–43.0)	55.2 (53.4–57.0)
January–June	4.4 (3.7–5.0)	41.6 (39.7–43.5)	55.8 (53.8–57.8)
July–December	5.8 (5.0–6.7)	41.2 (39.2–43.2)	54.7 (52.4–57.0)
2020 (January–June)	4.7 (3.8–5.8)	41.1 (38.3–43.9)	56.2 (53.5–58.9)
18–64			
2019 (full year)	14.7 (13.9–15.4)	20.4 (19.6–21.2)	66.8 (65.7–67.9)
January–June	13.7 (12.9–14.6)	20.4 (19.4–21.4)	67.7 (66.5–69.0)
July–December	15.6 (14.6–16.7)	20.4 (19.2–21.6)	65.9 (64.5–67.2)
2020 (January–June)	13.4 (12.3–14.6)	20.8 (19.6–22.0)	67.9 (66.4–69.4)
65 and over			
2019 (full year)	0.9 (0.6–1.3)	96.0 (95.5–96.5)	49.1 (47.6–50.7)
January–June	0.7 (0.4–1.1)	96.0 (95.3–96.6)	49.8 (48.0–51.7)
July–December	1.0 (0.5–1.8)	96.0 (95.2–96.7)	48.4 (46.2–50.6)
2020 (January–June)	0.9 (0.4–1.6)	96.1 (95.2–96.8)	49.6 (47.6–51.6)

<sup>1</sup>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 also were 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.

<sup>2</sup>Public 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.

<sup>3</sup>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.

NOTES: Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

**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–June 2020**

Age group (years) and 6-month interval	Uninsured <sup>1</sup> at the time of interview	Public health plan coverage <sup>2</sup>	Private health insurance coverage <sup>3</sup>
All ages			
2019 (full year)	33.2	121.4	198.7
January–June	30.7	121.0	201.0
July–December	35.7	121.7	196.2
2020 (January–June)	30.4	123.0	201.8
Under 65			
2019 (full year)	32.8	70.6	172.7
January–June	30.4	70.8	175.0
July–December	35.2	70.5	170.4
2020 (January–June)	30.0	71.0	175.0
0–17			
2019 (full year)	3.7	30.3	40.4
January–June	3.2	30.4	40.8
July–December	4.3	30.1	40.0
2020 (January–June)	3.4	29.9	40.9
18–64			
2019 (full year)	29.0	40.3	132.3
January–June	27.2	40.3	134.1
July–December	30.9	40.4	130.5
2020 (January–June)	26.5	41.1	134.1
65 and over			
2019 (full year)	0.5	50.8	26.0
January–June	0.4	50.2	26.1
July–December	0.5	51.2	25.8
2020 (January–June)	0.5	52.0	26.8

<sup>1</sup>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 also were 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.

<sup>2</sup>Public 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.

<sup>3</sup>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.

NOTES: Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

**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–June 2020**

Sex, age group (years), and 6-month interval	Uninsured <sup>1</sup> at the time of interview	Public health plan coverage <sup>2</sup>	Private health insurance coverage <sup>3</sup>
Male			
Under 65			
2019 (full year)	13.2 (12.3–14.1)	24.7 (23.6–25.9)	63.9 (62.4–65.4)
January–June	12.4 (11.5–13.5)	25.0 (23.7–26.4)	64.3 (62.7–65.9)
July–December	13.9 (12.6–15.2)	24.4 (23.0–25.9)	63.5 (61.6–65.4)
2020 (January–June)	11.8 (10.7–13.0)	24.8 (23.5–26.2)	65.5 (63.7–67.2)
0–17			
2019 (full year)	5.1 (4.4–5.8)	42.1 (40.1–44.2)	54.5 (52.2–56.7)
January–June	4.7 (3.8–5.6)	42.8 (40.4–45.3)	54.1 (51.5–56.6)
July–December	5.5 (4.4–6.7)	41.4 (38.7–44.1)	54.9 (52.0–57.7)
2020 (January–June)	4.8 (3.5–6.4)	40.9 (37.7–44.1)	56.3 (53.1–59.5)
18–64			
2019 (full year)	16.3 (15.1–17.4)	18.1 (17.0–19.2)	67.5 (66.1–69.0)
January–June	15.4 (14.2–16.7)	18.2 (16.9–19.6)	68.3 (66.5–70.0)
July–December	17.1 (15.5–18.8)	17.9 (16.4–19.6)	66.8 (64.8–68.8)
2020 (January–June)	14.5 (13.1–16.1)	18.7 (17.2–20.2)	69.0 (67.2–70.8)
Female			
Under 65			
2019 (full year)	11.0 (10.4–11.7)	27.3 (26.2–28.4)	63.4 (62.2–64.7)
January–June	10.0 (9.2–10.7)	27.1 (25.7–28.5)	64.7 (63.1–66.3)
July–December	12.1 (11.1–13.1)	27.6 (26.2–28.9)	62.2 (60.6–63.7)
2020 (January–June)	10.3 (9.2–11.6)	27.7 (25.6–29.8)	64.1 (61.9–66.2)
0–17			
2019 (full year)	5.1 (4.4–6.0)	40.6 (38.5–42.8)	56.0 (53.8–58.2)
January–June	4.0 (3.2–5.0)	40.3 (37.6–43.1)	57.6 (55.0–60.2)
July–December	6.2 (5.0–7.6)	41.0 (38.1–43.9)	54.4 (51.5–57.4)
2020 (January–June)	4.6 (3.5–5.9)	41.2 (37.6–44.9)	56.2 (52.8–59.5)
18–64			
2019 (full year)	13.1 (12.4–13.9)	22.6 (21.6–23.6)	66.1 (64.9–67.3)
January–June	12.1 (11.1–13.1)	22.4 (21.1–23.8)	67.2 (65.6–68.8)
July–December	14.2 (13.1–15.3)	22.8 (21.4–24.2)	64.9 (63.4–66.4)
2020 (January–June)	12.3 (10.9–13.9)	22.9 (20.9–24.9)	66.9 (64.7–69.0)

<sup>1</sup>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 also were 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.

<sup>2</sup>Public 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.

<sup>3</sup>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.

NOTES: Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

**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–June 2020**

Poverty status <sup>1</sup> , age group (years), and 6-month interval	Uninsured <sup>2</sup> at the time of interview	Public health plan coverage <sup>3</sup>	Private health insurance coverage <sup>4</sup>
Poor			
Under 65			
2019 (full year)	18.3 (16.2–20.5)	65.3 (63.0–67.5)	18.2 (16.3–20.3)
January–June	15.5 (13.2–18.1)	68.5 (65.2–71.7)	17.6 (14.6–20.9)
July–December	20.9 (18.1–23.8)	62.2 (58.9–65.4)	18.9 (16.4–21.5)
2020 (January–June)	15.6 (12.3–19.4)	72.0 (67.9–75.9)	14.5 (11.5–17.8)
0–17			
2019 (full year)	5.1 (3.8–6.8)	87.8 (85.3–90.1)	8.9 (7.1–11.1)
January–June	3.4 (1.7–6.1)	90.4 (86.8–93.3)	7.9 (5.2–11.2)
July–December	6.8 (4.7–9.4)	85.4 (81.1–89.0)	9.9 (7.0–13.6)
2020 (January–June)	*	89.9 (85.1–93.6)	6.7 (4.2–9.9)
18–64			
2019 (full year)	25.8 (23.0–28.9)	52.3 (49.4–55.1)	23.6 (20.9–26.5)
January–June	22.6 (19.1–26.3)	55.8 (51.7–59.8)	23.2 (19.0–27.9)
July–December	28.8 (25.2–32.7)	49.1 (45.3–52.9)	23.9 (20.9–27.1)
2020 (January–June)	21.8 (17.2–27.0)	61.8 (56.4–67.0)	18.9 (15.1–23.2)
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)
January–June	18.7 (16.5–21.0)	47.6 (45.1–50.0)	36.4 (33.8–39.0)
July–December	21.5 (19.2–23.9)	46.4 (43.6–49.2)	34.3 (32.1–36.6)
2020 (January–June)	18.0 (15.7–20.4)	50.9 (47.9–53.9)	34.3 (31.4–37.3)
0–17			
2019 (full year)	6.5 (5.2–8.0)	70.3 (67.7–72.8)	25.8 (23.1–28.5)
January–June	6.1 (4.5–8.0)	69.8 (65.8–73.6)	27.1 (23.0–31.6)
July–December	7.0 (5.1–9.2)	70.8 (66.6–74.8)	24.3 (21.0–27.9)
2020 (January–June)	6.7 (4.8–9.1)	73.6 (69.6–77.3)	22.6 (18.7–26.8)
18–64			
2019 (full year)	26.8 (24.9–28.8)	35.4 (33.3–37.5)	40.1 (38.3–42.0)
January–June	25.1 (22.2–28.2)	36.2 (33.6–38.9)	41.1 (38.6–43.6)
July–December	28.5 (25.8–31.4)	34.6 (31.6–37.7)	39.2 (36.6–41.9)
2020 (January–June)	23.9 (20.7–27.3)	38.9 (35.3–42.6)	40.5 (37.0–44.1)
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)
January–June	7.4 (6.8–8.0)	11.6 (10.8–12.4)	82.7 (81.7–83.6)
July–December	8.4 (7.6–9.3)	12.1 (11.2–13.0)	81.2 (79.9–82.5)
2020 (January–June)	7.5 (6.7–8.4)	12.5 (11.3–13.7)	81.9 (80.6–83.2)
0–17			
2019 (full year)	4.3 (3.6–5.1)	16.3 (14.9–17.8)	80.7 (79.1–82.2)
January–June	3.7 (3.0–4.5)	16.1 (14.5–17.9)	81.5 (79.7–83.2)
July–December	4.9 (3.9–6.2)	16.6 (14.8–18.4)	79.9 (77.7–81.9)
2020 (January–June)	3.6 (2.7–4.6)	18.2 (15.9–20.7)	80.0 (77.5–82.4)
18–64			
2019 (full year)	9.0 (8.4–9.6)	10.4 (9.8–11.0)	82.4 (81.6–83.2)
January–June	8.5 (7.9–9.2)	10.2 (9.4–11.0)	83.1 (82.1–84.1)
July–December	9.5 (8.6–10.6)	10.6 (9.8–11.5)	81.6 (80.4–82.9)
2020 (January–June)	8.8 (7.8–9.8)	10.6 (9.4–11.8)	82.5 (81.2–83.8)

\*Estimate is not shown, as it does not meet National Center for Health Statistics standards of reliability.

<sup>1</sup>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 and Semega J, Kollar M, Shrider EA, Creamer J. Income and poverty in the United States: 2019. Current Population Reports, P60-270. 2020 ). 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 was 7.6% in 2019 and 8.0% in the first two quarters of 2020. 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.

<sup>2</sup>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 also were 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.

<sup>3</sup>Public 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.

<sup>4</sup>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.

NOTES: Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April-June). Differences observed in estimates between January-June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

**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–June 2020**

Race and ethnicity <sup>1</sup> , age group (years), and 6-month interval	Uninsured <sup>2</sup> at the time of interview	Public health plan coverage <sup>3</sup>	Private health insurance coverage <sup>4</sup>
Hispanic			
Under 65			
2019 (full year)	22.1 (20.3–23.9)	34.7 (32.7–36.7)	44.3 (42.1–46.4)
January–June	20.0 (18.1–22.1)	35.0 (32.7–37.4)	45.8 (43.7–47.9)
July–December	24.1 (21.6–26.8)	34.4 (31.8–37.0)	42.7 (39.6–45.9)
2020 (January–June)	19.7 (17.1–22.5)	33.9 (31.0–36.8)	47.9 (44.3–51.4)
0–17			
2019 (full year)	7.2 (6.0–8.6)	58.7 (55.9–61.5)	35.4 (32.7–38.1)
January–June	6.0 (4.6–7.7)	60.1 (56.8–63.4)	34.9 (32.0–38.0)
July–December	8.4 (6.8–10.2)	57.2 (52.9–61.5)	35.8 (31.9–39.8)
2020 (January–June)	6.4 (4.3–9.1)	55.8 (51.5–60.0)	40.4 (36.0–44.9)
18–64			
2019 (full year)	29.7 (27.4–32.0)	22.5 (20.4–24.7)	48.8 (46.5–51.1)
January–June	27.2 (24.6–29.9)	22.2 (19.5–25.2)	51.4 (49.0–53.8)
July–December	32.1 (28.7–35.6)	22.8 (20.3–25.5)	46.2 (42.8–49.6)
2020 (January–June)	26.5 (22.9–30.3)	22.8 (20.0–25.8)	51.7 (47.7–55.6)
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)
January–June	8.4 (7.7–9.1)	20.0 (18.9–21.1)	73.6 (72.4–74.8)
July–December	9.7 (8.8–10.6)	19.3 (18.0–20.7)	72.9 (71.4–74.4)
2020 (January–June)	8.3 (7.5–9.2)	19.8 (18.3–21.4)	74.1 (72.4–75.7)
0–17			
2019 (full year)	4.5 (3.7–5.4)	27.9 (26.1–29.8)	69.3 (67.4–71.1)
January–June	3.8 (3.0–4.7)	28.3 (26.3–30.5)	69.6 (67.5–71.7)
July–December	5.2 (4.0–6.7)	27.5 (25.1–30.0)	68.9 (66.3–71.4)
2020 (January–June)	4.0 (3.0–5.3)	28.1 (25.1–31.2)	69.8 (66.5–73.0)
18–64			
2019 (full year)	10.5 (9.8–11.2)	17.0 (16.1–18.0)	74.5 (73.5–75.5)
January–June	9.8 (9.1–10.7)	17.4 (16.3–18.5)	74.8 (73.6–76.1)
July–December	11.1 (10.1–12.1)	16.7 (15.4–18.1)	74.2 (72.8–75.6)
2020 (January–June)	9.7 (8.7–10.8)	17.2 (15.9–18.6)	75.4 (73.9–76.9)
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)
January–June	10.7 (9.1–12.4)	41.9 (38.9–44.9)	50.4 (47.2–53.7)
July–December	12.4 (10.3–14.8)	43.7 (39.9–47.5)	46.5 (43.5–49.6)
2020 (January–June)	11.0 (9.3–12.9)	41.6 (37.7–45.6)	49.9 (46.0–53.9)
0–17			
2019 (full year)	3.5 (2.5–4.9)	64.5 (60.1–68.7)	35.1 (31.1–39.3)
January–June	3.2 (1.7–5.5)	61.0 (55.0–66.7)	39.3 (33.7–45.1)
July–December	3.9 (2.3–6.0)	68.1 (61.8–73.9)	30.8 (25.1–37.0)
2020 (January–June)	5.0 (3.0–7.7)	65.6 (59.7–71.2)	30.3 (25.3–35.6)
18–64			
2019 (full year)	14.7 (12.9–16.7)	34.3 (31.5–37.1)	53.7 (51.3–56.0)
January–June	13.6 (11.7–15.8)	34.2 (31.5–36.9)	54.9 (51.8–57.9)
July–December	15.7 (12.8–18.8)	34.5 (30.6–38.5)	52.5 (49.3–55.7)
2020 (January–June)	13.2 (11.0–15.7)	32.5 (28.5–36.8)	57.3 (53.2–61.4)

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–June 2020—Con.**

Race and ethnicity <sup>1</sup> , age group (years), and 6-month interval	Uninsured <sup>2</sup> at the time of interview	Public health plan coverage <sup>3</sup>	Private health insurance coverage <sup>4</sup>
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)
January–June	6.2 (3.7–9.7)	17.1 (14.0–20.7)	77.4 (73.4–81.0)
July–December	7.1 (4.5–10.5)	17.9 (14.0–22.4)	75.8 (70.9–80.2)
2020 (January–June)	8.4 (6.5–10.7)	20.9 (16.3–26.2)	72.3 (67.2–77.0)
0–17			
2019 (full year)	3.2 (1.6–5.7)	24.1 (19.6–29.1)	73.2 (68.2–77.8)
January–June	*	23.1 (18.0–28.9)	75.5 (69.6–80.8)
July–December	*	25.2 (17.4–34.3)	70.8 (61.5–78.9)
2020 (January–June)	*	25.3 (19.8–31.5)	72.0 (64.9–78.3)
18–64			
2019 (full year)	7.5 (5.6–9.9)	15.8 (13.2–18.7)	77.5 (74.2–80.5)
January–June	7.4 (4.4–11.6)	15.5 (12.0–19.7)	77.9 (73.1–82.1)
July–December	7.6 (4.7–11.6)	16.1 (12.5–20.2)	77.1 (72.6–81.2)
2020 (January–June)	9.3 (7.0–12.0)	19.8 (14.9–25.6)	72.4 (67.0–77.4)
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)
January–June	15.6 (11.5–20.4)	33.4 (28.0–39.2)	52.6 (46.2–58.9)
July–December	13.5 (9.6–18.2)	35.6 (28.3–43.4)	53.2 (45.1–61.2)
2020 (January–June)	10.6 (6.7–15.6)	40.7 (34.1–47.5)	52.2 (45.1–59.3)
0–17			
2019 (full year)	5.9 (3.5–9.3)	45.3 (38.0–52.8)	50.4 (42.6–58.3)
January–June	6.6 (3.2–11.8)	45.6 (37.9–53.6)	49.5 (41.1–57.9)
July–December	*	44.9 (34.5–55.6)	51.5 (40.9–62.0)
2020 (January–June)	*	49.8 (41.2–58.4)	50.1 (42.1–58.1)
18–64			
2019 (full year)	21.1 (17.0–25.8)	26.2 (20.6–32.5)	54.8 (48.1–61.3)
January–June	22.9 (17.1–29.5)	23.5 (18.1–29.5)	55.1 (47.5–62.5)
July–December	19.4 (14.1–25.6)	29.0 (21.4–37.5)	54.4 (45.5–63.1)
2020 (January–June)	16.0 (10.3–23.3)	34.2 (25.8–43.3)	53.7 (43.9–63.3)

\*Estimate is not shown, as it does not meet National Center for Health Statistics standards of reliability.

<sup>1</sup>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 respondents' descriptions 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 persons of races other than white only, black only, and Asian only, or of multiple races, are combined into the "non-Hispanic, other races and multiple races" category.

<sup>2</sup>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 also were 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.

<sup>3</sup>Public 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.

<sup>4</sup>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.

NOTES: Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

**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–June 2020**

State Medicaid expansion status <sup>1</sup> , age group (years), and 6-month interval	Uninsured <sup>2</sup> at the time of interview	Public health plan coverage <sup>3</sup>	Private health insurance coverage <sup>4</sup>
Medicaid expansion states <sup>5</sup>			
Under 65			
2019 (full year)	9.1 (8.6–9.7)	27.8 (26.7–28.9)	65.0 (63.8–66.2)
January–June	8.2 (7.5–8.9)	27.4 (25.9–28.9)	66.2 (64.7–67.7)
July–December	10.0 (9.3–10.8)	28.2 (26.8–29.6)	63.8 (62.2–65.5)
2020 (January–June)	8.4 (7.5–9.3)	26.9 (25.1–28.8)	67.0 (65.1–68.8)
0–17			
2019 (full year)	3.9 (3.3–4.6)	40.3 (38.3–42.2)	57.6 (55.5–59.7)
January–June	3.2 (2.6–4.0)	40.2 (37.8–42.5)	58.2 (56.0–60.3)
July–December	4.6 (3.6–5.7)	40.3 (37.7–43.0)	57.0 (54.0–60.0)
2020 (January–June)	3.5 (2.5–4.8)	39.5 (36.6–42.6)	59.4 (56.5–62.2)
18–64			
2019 (full year)	11.0 (10.4–11.6)	23.4 (22.3–24.5)	67.6 (66.4–68.8)
January–June	10.0 (9.1–10.9)	22.8 (21.4–24.4)	69.1 (67.5–70.6)
July–December	11.9 (11.2–12.8)	23.9 (22.6–25.3)	66.2 (64.6–67.8)
2020 (January–June)	10.1 (9.2–11.2)	22.2 (20.6–24.0)	69.8 (68.0–71.5)
Non-Medicaid expansion states <sup>6</sup>			
Under 65			
2019 (full year)	17.1 (15.8–18.5)	23.0 (21.5–24.6)	61.4 (59.0–63.8)
January–June	16.2 (14.8–17.7)	23.9 (22.2–25.6)	61.6 (59.0–64.2)
July–December	18.1 (16.4–19.8)	22.2 (20.5–24.0)	61.1 (58.5–63.8)
2020 (January–June)	16.3 (14.4–18.3)	25.1 (23.1–27.2)	60.5 (57.5–63.5)
0–17			
2019 (full year)	7.0 (6.0–8.1)	43.2 (40.1–46.3)	51.5 (47.9–55.0)
January–June	6.1 (4.9–7.5)	43.8 (40.0–47.6)	52.0 (48.0–56.1)
July–December	7.8 (6.5–9.3)	42.5 (39.2–45.9)	50.9 (47.2–54.6)
2020 (January–June)	7.0 (5.0–9.5)	44.0 (38.6–49.5)	50.3 (44.9–55.6)
18–64			
2019 (full year)	21.2 (19.6–22.8)	15.1 (14.0–16.3)	65.3 (63.2–67.3)
January–June	20.2 (18.4–22.1)	16.1 (15.0–17.2)	65.4 (63.1–67.6)
July–December	22.1 (20.0–24.3)	14.2 (12.7–15.7)	65.2 (62.8–67.6)
2020 (January–June)	19.7 (17.4–22.2)	18.0 (16.5–19.7)	64.3 (61.8–66.8)

<sup>1</sup>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.

<sup>2</sup>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 also were 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.

<sup>3</sup>Public 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.

<sup>4</sup>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.

<sup>5</sup>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. Beginning with 2020, two states were added to this grouping: Idaho and Utah.

<sup>6</sup>For 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. Beginning with 2020, two states have been removed from this grouping: Idaho and Utah.

NOTES: Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.

**Table VII. Percentage (and 95% confidence interval) and number (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–June 2020**

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 <sup>1</sup>		
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 <sup>2</sup>		
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 <sup>3</sup>		
Medicaid expansion states <sup>4</sup>	3.3 (3.0–3.8)	5.7
Non-Medicaid expansion states <sup>5</sup>	4.3 (3.8–4.9)	4.3
January–June 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 <sup>1</sup>		
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 <sup>2</sup>		
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 <sup>3</sup>		
Medicaid expansion states <sup>4</sup>	3.4 (3.0–3.9)	5.8
Non-Medicaid expansion states <sup>5</sup>	4.5 (3.7–5.4)	4.5

See footnotes at the end of table.

**Table VII. Percentage (and 95% confidence interval) and number (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–June 2020—Con.**

6-month interval and selected characteristics	Percent (95% confidence interval)	Number in millions
July–December 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 <sup>1</sup>		
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 <sup>2</sup>		
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 <sup>3</sup>		
Medicaid expansion states <sup>4</sup>	3.3 (2.7–3.9)	5.6
Non-Medicaid expansion states <sup>5</sup>	4.1 (3.5–4.7)	4.1
January–June 2020		
Age group (years)		
Under 65	3.7 (3.4–4.0)	10.0
0–17	2.1 (1.6–2.7)	1.5
18–64	4.3 (3.9–4.7)	8.4
Sex		
Male	3.0 (2.6–3.5)	4.1
Female	4.3 (3.8–5.0)	5.9
Poverty status <sup>1</sup>		
Poor	1.6 (1.0–2.6)	0.5
Near poor	4.7 (3.7–5.8)	2.3
Not poor	3.5 (3.2–3.9)	6.8
Race and ethnicity <sup>2</sup>		
Hispanic	4.0 (3.0–5.2)	2.2
Non-Hispanic white	3.7 (3.3–4.2)	5.8
Non-Hispanic black	2.6 (1.7–3.8)	0.9
Medicaid expansion status <sup>3</sup>		
Medicaid expansion states <sup>4</sup>	3.6 (3.2–4.0)	6.3
Non-Medicaid expansion states <sup>5</sup>	3.9 (3.3–4.6)	3.6

<sup>1</sup>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 and Semega J, Kollar M, Shrider EA, Creamer J. Income and poverty in the United States: 2019. Current Population Reports, P60–270. 2020). 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 was 7.6% in 2019 and 8.0% in the first two quarters of 2020. 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.

<sup>2</sup>Hispanic 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 respondents' descriptions 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.

<sup>3</sup>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 income up to and including 138% of the FPL. 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.

<sup>4</sup>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. Beginning with 2020, two states were added to this grouping: Idaho and Utah.

<sup>5</sup>For 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. Beginning with 2020, two states have been removed from this grouping: Idaho and Utah.

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). Due to the COVID-19 pandemic, National Health Interview Survey data collection switched to a telephone-only mode beginning March 19, 2020. This resulted in lower response rates and differences in respondent characteristics for Quarter 2 (April–June). Differences observed in estimates between January–June 2020 and earlier time periods may be partially or fully attributable to these changes. Data are based on household interviews of a sample of the civilian noninstitutionalized population.

SOURCE: National Center for Health Statistics, National Health Interview Surveys, 2019 and 2020.