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SPECIAL FEDERAL DATA RELEASE EDITION

September 2018

Announcements

Census Bureau Releasing 2017 CPS and ACS Coverage Estimates This Week



The U.S. Census Bureau will release 2017 health insurance coverage estimates from the Current Population Survey (CPS) and the American Community Survey (ACS) on Tuesday, September 11th, with the full release of ACS data on American

<u>FactFinder</u> scheduled for Thursday, September 13th. Be sure to watch the <u>SHADAC blog</u> for data digests throughout the week.

September 18th SHADAC Data Release Webinar with Census Experts: Register Now

SHADAC researchers will team up with Census Bureau experts to discuss the new 2017 data from the American Community survey (ACS) and the Current Population Survey (CPS) during a webinar on September 18th. Speakers will give an overview of the new national and state coverage estimates and will explain: when to use estimates from which survey; how to access the estimates via Census reports and American FactFinder; and how to access state-level estimates from the ACS using SHADAC state-level tables. Register for this event.

Coming Soon: SHADAC's Annual County-Level Uninsured Tables for 2017



Stay tuned for annual county-level uninsurance tables from SHADAC. Using uninsurance estimates from the American Community Survey (ACS), the tables will include 2017 rates of uninsurance for all states and territories and for all counties with a population greater

than 65,000. The tables will also show changes in uninsurance from 2016 to 2017 and indicate state-level uninsurance rates by characteristics (e.g., age, race/ethnicity, and poverty level). Click here to access SHADAC's ACS county-level uninsured tables for data year 2016.

Also on the Horizon: SHADAC's Comparison of Federal Government Surveys that Count the Uninsured (Annual Brief)

With the release of new insurance coverage estimates, SHADAC will update our annual brief, "Comparing Federal Government Surveys that Count the Uninsured." This brief provides comparisons of uninsurance estimates from five federal surveys: The American Community Survey (ACS), the Current Population Survey (CPS), the Medical Expenditure Panel Survey – Household Component (MEPS-HC), the National Health Interview Survey (NHIS), and the Behavioral Risk Factor Surveillance System (BRFSS). We revise this brief each year to include current and historical national estimates of uninsurance along with the most recent available state-level estimates from these surveys. We also discuss the main reasons for variation in the estimates across surveys. Access last year's brief.

Newly Available Data

Early-Release Estimates from 2018 NHIS Show Stable Uninsured Rates



The National Center for Health Statistics (NCHS) released the <u>first early estimates</u> of national uninsurance levels for 2018 from the National Health Interview Survey (NHIS). Nationwide, the uninsurance rate among non-elderly adults was 12.5% in the first quarter of 2018, statistically unchanged from 12.1% in the same period in 2017. Additionally, the new estimates show that uninsurance rates were statistically unchanged across age, race/ethnicity, and income groups from the first quarter of 2017 to the first quarter of 2018.

However, the rate of private coverage among non-elderly adults (ages 18-64) with incomes below 100% of the federal poverty level (FPL) decreased to 21.4% in the first quarter of 2018 from 29.2% in the first quarter of 2017. Learn more on the SHADAC blog.

BRFSS: 2017 State Estimates of Health Behaviors and Health Outcomes

The Centers for Disease Control and Prevention (CDC) released the <u>2017 Behavioral Risk Factor Surveillance System (BRFSS) Data Set</u>. BRFSS collects state data from all 50 states, the District of Columbia, and three U.S. territories about U.S. residents regarding their health-related risk behaviors, chronic health conditions, and use of preventive services. Estimates of obesity, binge drinking, smoking, chronic disease, and activity limitations are available on SHADAC's <u>State Health Compare</u> for all states and can be viewed by educational attainment and race/ethnicity.

2017 MEPS-IC Data: ESI Offer Rate Held Steady, but Premiums Continued to Rise and More Employees Enrolled in High Deductible Plans

The Agency for Healthcare Research and Quality (AHRQ) released <u>national estimates</u> and <u>state and metro area estimates</u> from the 2017 Medical Expenditure Panel Survey – Insurance Component (MEPS-IC) on private sector employer-sponsored insurance (ESI) coverage, premiums, and deductibles. The percent of employees nationwide working at establishments that offer coverage was statistically stable at 84.5 percent in 2017. However, 2017 premiums for single-coverage ESI grew by 4.4 percent compared to 2016—an increase that was double the 2.2 percent growth seen from 2015 to 2016. The percent of employees enrolled in high-deductible health plans also increased from 2016 to 2017, growing from 42.6 percent to 48.7 percent.

Access the SHADAC blog for an overview of the state estimates from the 2017 MEPS-IC.

SHADAC's <u>State Health Compare</u> has been updated to include 2017 MEPS data. National and state-level estimates for the years 2002 to 2017 are available for the following indicators: workers in establishments that offer coverage, average annual ESI premium, and employee contributions to premiums.

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