



SPECIAL FEDERAL DATA RELEASE EDITION 2020

Announcements

U.S. Census Bureau Releases Uninsurance Data from 2019 ACS and CPS



In September, the U.S. Census Bureau released 2019 estimates from two large-scale federal data surveys: the [American Community Survey \(ACS\)](#) and the [Current Population Survey \(CPS\)](#). Both are key sources of data on income, poverty, and health insurance coverage, in addition to a range of other economic and demographic characteristics for the U.S. population. [Estimates from the surveys](#) varied in their reports of uninsurance in 2019, with the ACS reporting a significant rise in point-in-time uninsured rates (8.9% to 9.2%) and the CPS seeing a drop in uninsured rates (from 8.5% to 8.0%) for the entire year.

Related Resources. SHADAC has produced several focused, informative blogs and accompanying infographics as part of our continued coverage on the federal data releases of annual U.S. health insurance coverage estimates:

- [2019 ACS: Rising National Uninsured Rate Echoed Across 19 States; Virginia Only State to See Decrease \(Infographics\)](#)
- [2019 ACS: Insurance Coverage Overall Fell Nationwide and among the States, with Private and Public Coverage Declines Seen at the State Level](#)
- [New Subsidized Marketplace Data and Other Data Tables Now Available from the 2019 American Community Survey \(ACS\)](#)

SHADAC and the U.S. Census Bureau's Annual Data Release Webinar - September 23, 2020

SHADAC hosted experts from the United States Census Bureau for a [webinar](#) on to discuss their most recent estimates of health insurance coverage from the 2019 Current Population Survey (CPS) and American Community Survey (ACS). The ACS found that the uninsured rate (all ages) rose from 8.9% in 2018 to 9.2% in 2019—representing 1.07 million more people without insurance. The webinar also covered state-level changes in uninsurance, as well as changes by coverage types (public, private, individual marketplace, and more). A [recording of the webinar](#) as well as [slides](#) from the presentation are now available to view and download.



Updated SHADAC Resource: 2019 State and County-Level Uninsured Tables



Annual [state and county-level uninsurance tables](#) were recently released by SHADAC. Using uninsurance estimates from the [American Community Survey \(ACS\)](#), the tables include 2019 rates of uninsurance for all states and territories and for all counties with a population greater than 65,000. The tables also show changes in uninsurance from 2018 to 2019 and indicate state-level uninsurance rates by characteristics (e.g., age, race/ethnicity, and poverty level).

SHADAC Brief Comparing Federal Government Surveys that Count the Uninsured (2019)

SHADAC has [updated our annual brief](#) "Comparing Federal Government Surveys that Count the Uninsured" that provides comparisons of uninsurance estimates from four federal surveys: The American Community Survey (ACS), the Current Population Survey (CPS), the Medical Expenditure Panel Survey – Household Component (MEPS-HC), and the National Health Interview Survey (NHIS). SHADAC revises this brief each year to include current and historical national estimates of uninsurance, the most recent available state-level estimates from these surveys, and to discuss the main reasons for variation in the estimates across surveys. This year found more variation in rates of uninsurance across the four surveys.



Newly Available Data

2019 BRFSS and YRBSS Public Data Files Now Available from the CDC

The [2019 Behavioral Risk Factor Surveillance System \(BRFSS\) Data Set](#) and [2019 Youth Risk Behavior Surveillance System \(YRBSS\) Data Set](#) have been released by the Centers for Disease Control and Prevention (CDC). The BRFSS and YRBSS collect state data from all 50 states, the District of Columbia, and three U.S. territories on health-related risk behaviors, chronic health conditions, and use of preventive services. Estimates of obesity, binge drinking, smoking, for adults and for children, as well as measures of chronic disease, activity limitations, and unhealthy days for the adult population across all states are discussed in a recent [SHADAC blog post](#) and have recently been posted on SHADAC's [State Health Compare](#) web tool.

Now Available: National, State-level, and Metro Area Data from 2019 MEPS-IC



The Agency for Healthcare Research and Quality (AHRQ) released [national estimates](#) and [state and metro area estimates](#) from the 2019 Medical Expenditure Panel Survey – Insurance Component (MEPS-IC) on private sector employer-sponsored insurance (ESI) coverage, premiums, and deductibles. [Estimates](#) for this past year showed national average premiums for both single and family coverage registering record highs at \$6,972 and \$20,486, respectively. Nationwide, enrollment in high-deductible health plans (HDHPs) also continued its steady climb, as over half of workers with ESI (50.5 percent) enrolled in this type of coverage plan in 2019. For a harmonized version of the MEPS, please see the University of Minnesota IPUMS Health Surveys [here](#).

State Health Compare New Measure: Adverse Childhood Experiences (ACEs)

A new [blog post](#) from SHADAC details a newly added measure to our State Health Compare data tool—adverse childhood experiences (ACEs). Nationwide, an estimated 18.6% of all children (age 0-17) had multiple ACEs in 2017-2018, 23.3% had one ACE. The ACEs measure defines events for children (0-17 years) that have had traumatic events (such as witnessing or experiencing, violence, abuse, neglect, or self-harm; or growing up in a household with substance misuse, mental health problems, and instability), as these events can lead to a variety of negative health outcomes in adults. [Estimates](#) for this measure can be broken down among different demographic groups, and are available across the states and over time.

Additional News

Covered California: Lessons from Insurance Coverage Transitions Pre and Post COVID-19 Pandemic



A [new report](#) from Covered California found that thus far in 2020, the California individual marketplace has reached the highest number of covered members (over 1.53 million) since its launch in 2014. While data from previous years showed those who left the individual marketplace did so due to enrollment in employer-sponsored insurance (ESI) coverage, the arrival of the COVID-19 pandemic caused a reversal in trend that saw many who lost ESI coverage turn to the individual marketplace to sign up for coverage during California's coronavirus-driven special enrollment period (SEP).

Journal Article on "US Adults' Preferences for Public Allocation of a Vaccine for Coronavirus Disease"

The *JAMA Open Network* has recently published [a collaborative article](#) from researchers at the University of Minnesota School of Public Health, the Johns Hopkins Bloomberg School of Public Health and SHADAC, which used results from a survey study to explore public preferences for allocation of a coronavirus vaccine once it is available. Among other findings, results showed that participant responses aligned with experts' recommendations for vaccine priority populations. For more information on the SHADAC COVID-19 Survey see our resources, including [chartbooks](#) and [briefs](#), here.



Recommended Reading

[Census Data Show Largest Annual Increase in Number of Uninsured Children in More Than a Decade](#)

Joan Alker, Georgetown CFF Blog

[Updating the Essential Health Benefit Benchmark Plan: An Unexpected Path to Fill Coverage Gaps?](#)

CHIR Blog

[Energy, Water and Broadband: Three Services Crucial To Health Equity](#)

Pamela Russo, RWJF Culture of Health Blog

[How years of underfunding public health left Texas ill prepared for the pandemic](#)

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