

FACT SHEET

FAQs about the Census Bureau Official Health Insurance Rate

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Each year, the Census Bureau releases data on health insurance coverage in the United States, and the National Women's Law Center analyzes these data to provide a picture of how women and their families are faring. The following frequently asked questions take a closer look at what the Census Bureau numbers tell us—and don't tell us—about health insurance.

1. What does the health insurance rate tell us?

Each year, the Census Bureau releases new estimates of the number of Americans who have health insurance. The data reveal how many Americans had health insurance in the previous year and the source of their insurance. Additionally, the data can be broken down many ways, including by income level, age, race, or sex.

The data is based on a national survey that asks respondents about their health insurance coverage in the previous calendar year. Respondents are considered insured if they were covered by any type of health insurance at any time in the previous year. Respondents are considered "uninsured" if they lacked health insurance for the entire previous calendar year.

2. Where does this data come from?

Every month, the Census Bureau surveys approximately 50,000 households to estimate the unemployment rate. This is known as the Current Population Survey (CPS). Once a year, they ask additional questions on health coverage and income. This supplement is known as the Annual Social and Economic Supplement (ASEC). The ASEC questions regarding health insurance explore whether each member of the respondent household had insurance coverage throughout the previous calendar year, and if so, what kind of coverage. According to the Census Bureau, the ASEC is the most widely used source of data on health insurance coverage in the U.S.

3. What types of insurance are measured?

The Census Bureau divides health insurance into two categories: private coverage or government coverage. Private coverage is defined as coverage an individual would hold through an employer or a union or purchase on their own from a private company. Government coverage refers to publicly-financed insurance such as Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and several types of military health insurance.

4. What does it mean to be uninsured?

Americans categorized as uninsured lacked health insurance for the entire previous year, meaning they did not

receive health insurance through their employer or the government, or buy it themselves. If they received health insurance for even part of the year, they would be considered insured.

5. What doesn't the official health insurance rate tell us?

Because the Census Bureau asks about health insurance for the entire previous year, the data can't tell us how many Americans had health insurance for only part of year or were insured at the time of the survey. Some Americans only had health insurance for a few months out of year, but despite periods of being uninsured, they would be counted as part of the insured rate. And, others could have been uninsured when they participated in the survey, but would be considered insured if they had coverage the previous year. Similarly, the health insurance rate doesn't tell us how long uninsured Americans have gone without coverage – for some, it could be much longer than just the previous year covered in the survey.

6. How will these rates change as a result of the Affordable Care Act?

The Affordable Care Act –also known as Obamacare – has many provisions that make it easier and more affordable for Americans to gain health insurance. As the law is fully implemented in 2014, the rate of uninsured Americans should drop as the number of Americans with health insurance increases. Already, we have seen the rate of health coverage increase for young Americans as they are included in their parents' health insurance plan up to age 26, as a result of health care reform.