

Health Care

By the Numbers

UNINSURANCE

by Ben Palmquist with Matthew Jacquez

Roughly 30 million people in the U.S. were uninsured for the entirety of 2019 and 40 million were uninsured at least part of the year. During the pandemic, millions of workers and their families lost insurance coverage when their jobs were cut. Even in a normal year, millions lose coverage because a routine change in employment, income, marital or family status makes people ineligible to remain on Medicaid or a private insurance plan. More than half a million kids lost insurance coverage from 2016 to 2018 alone, and by blocking Medicaid expansion, politicians in twelve states are denying insurance and denying health care to 4.7 million people. Of course, health *coverage* is no guarantee of health *care*: as our report on underinsurance shows, insurance companies use copays, deductibles, benefit limitations and narrow provider networks to prevent people with insurance from getting care, and by building coverage gaps into Medicare, underfunding Medicaid, and propping up a patchwork insurance system, Congress has done the same. A just health care system leaves no one—not a single person—uninsured.

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How Many People Are Uninsured?

It Depends Who You Count...

Most surveys count people as insured if they have partial coverage at the time they take the survey, but millions of people thus categorized as “insured” find themselves uninsured during the course of each year or are left out of these statistics altogether.

38,125,200 to 43,000,000

Total number of people uninsured at some point during the course of a typical year ¹

26.8 million

Additional number of people who lost insurance in the spring of 2020 because their insurance was tied to a job they lost to COVID-19 ²

28.6 to 30.7 million

Number of people in the U.S. uninsured at a single point in time in a typical year, pre-COVID-19, depending on the survey methodology ³

31.5 million

Projected people who will be uninsured in 2021, up from previous estimates due to COVID-19 ⁴

10.8 to 16.1%

Percent of adults (19-64) who are completely uninsured at a single point in time in a typical year, depending on the survey methodology ⁵

3.6 to 12.9%

Percent of people with a gap in insurance coverage each year, depending on the survey methodology ⁶

10,663,200 to 19,300,000

Number of people who experience a gap in coverage each year ⁷

37,200,000

Projected no. of people uninsured (at one point in time) by 2028 if current policies continue ⁸

4,917,954

Number of people exclude from Census counts of the uninsured because they are institutionalized in prisons, nursing homes, mental health hospitals, or another facility, 2018 ⁹

22

Number of states in which more than 10% of the population was uninsured in 2017 ¹⁰

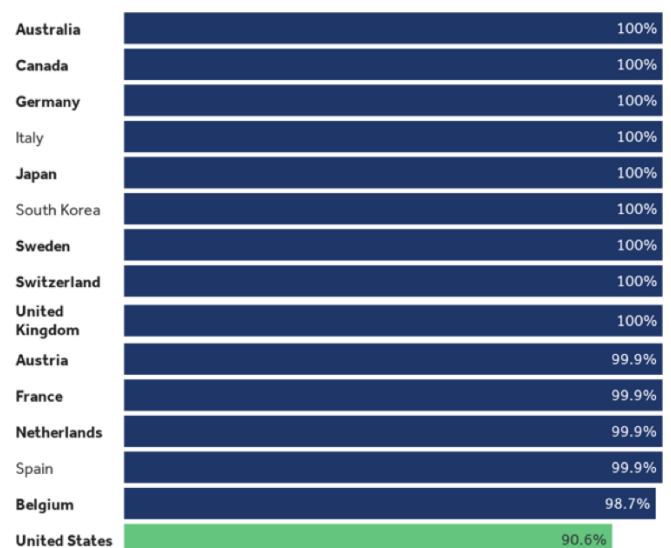
0.0%

Uninsurance rate in Australia, Canada, the Czech Republic, Denmark, Finland, Greece, Iceland, Ireland, Israel, Italy, South Korea, Latvia, New Zealand, Norway, Portugal, Slovenia, Spain, Sweden, Switzerland, and the United Kingdom ¹¹

9.4%

Uninsurance rate in United States ¹²

Percent of total population covered by private and/or public health insurance, 2018 or nearest year



Source: [Peterson-KFF Health Tracker](#)

... and What You Define as “Insured”

Most surveys consider people “insured” even if only some of their body parts, medical needs, and medical providers are covered, and even if cost barriers and administrative barriers prevent them from ever getting care.

29%

Portion of people with no dental coverage ¹³

62%

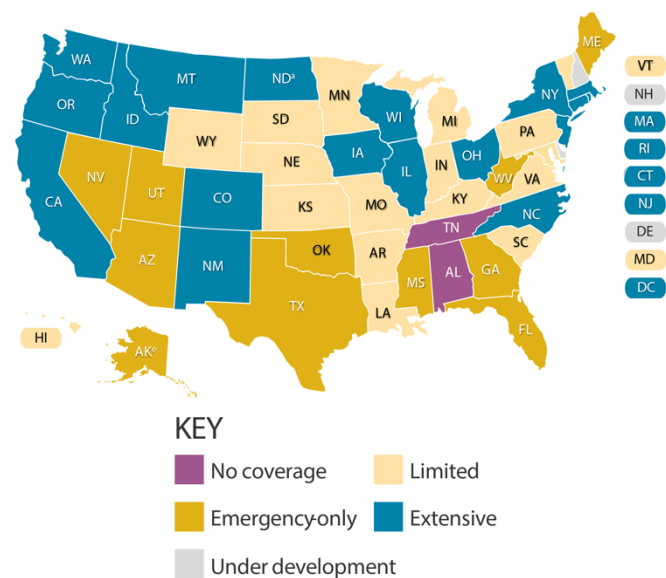
Portion of seniors with no dental coverage ¹⁴

22

Number of states that provide no Medicaid coverage for hearing aids ¹⁵

32

Number of states that provide no dental coverage or limited dental coverage for adults on Medicaid ¹⁶



SOURCE: [Center for Health Care Strategies](https://dignityandrights.org/HealthStatistics)

89%

Portion of seniors with no long-term care insurance ¹⁷

88%

Percent of seniors with no Medicaid ¹⁸

52%

Portion of people who will develop a disability in their later years and need long-term services and supports ¹⁹

1 in 3

Portion of people 65-69 applying for long-term care insurance who are denied coverage by insurance companies. 52% of people over 75 are denied coverage. ²⁰

0.5%

Percent of employers offering long-term care insurance to employees ²¹

74%

Portion of ACA marketplace plans that limit coverage of providers through narrow networks ²²

100%

Portion of states in which Medicaid covers a narrow network of providers

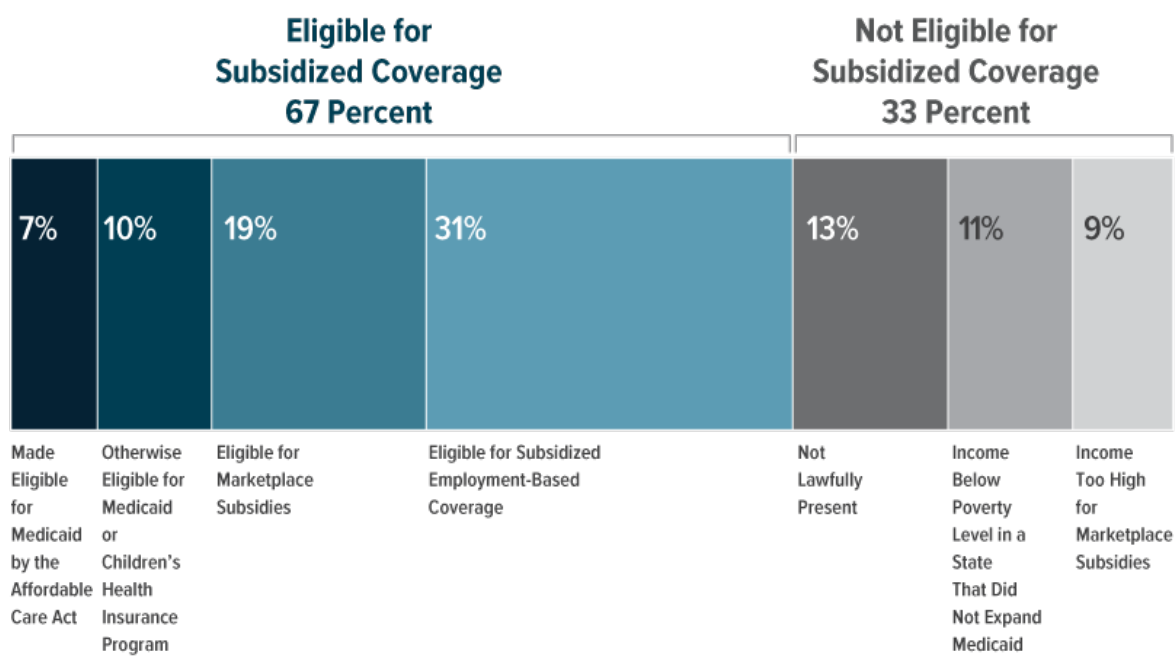
For statistics on financial and administrative barriers to care, see our fact sheet on Underinsurance at <https://dignityandrights.org/HealthStatistics>.

Why Are People Uninsured?

The U.S. insurance system is fractured between multiple public and private insurance plans, letting millions of people fall through the cracks. Cost barriers, changes in job- and income-based insurance eligibility, discrimination against undocumented immigrants, people with disabilities and people with legal records, state leaders’ decisions to block Medicaid expansion, and onerous eligibility and bureaucratic requirements all keep people uninsured.

Overview

Overall, one-third of the 29.8 million people who were uninsured for all of 2019 were legally prohibited from receiving Medicaid, Medicare or insurance subsidies. Two-thirds were legally eligible, but prices, bureaucratic requirements or other barriers kept them uninsured.



Source: [Congressional Budget Office](#) ²³

Legal Exclusion from Medicaid, Medicare and Public Subsidies

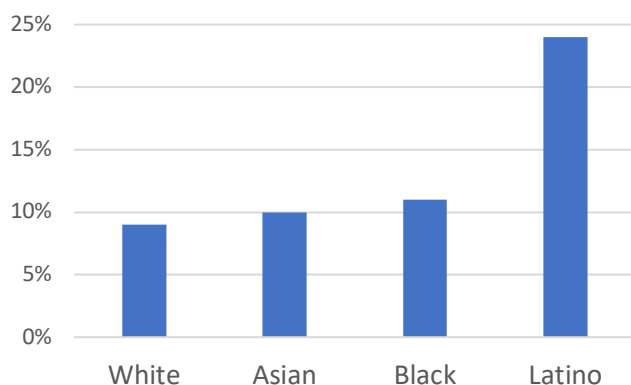
Federal and state law discriminatorily excludes whole classes of people from public insurance programs and insurance subsidies. Undocumented immigrants are explicitly written out of the Affordable Care Act, Medicaid, Medicare and other federal and state policies. Recent documented immigrants and people with new disabilities face years-long waiting periods for Medicaid and Medicare. People who have been incarcerated face hiring discrimination that excludes them from job-based insurance. California has demonstrated that states, counties and cities can take action to cover people when federal law fails them, but few states and localities have taken action so far.

4.9 million

Number people uninsured because undocumented immigrants are denied public insurance and health insurance subsidies ²⁴

24%

Portion of Latinx people who are entirely uninsured, versus 9% of White people, 10% of Asians and Pacific Islanders and 11% of Black people. ²⁵



5 years

Period that documented immigrants arriving in the U.S. must wait before becoming eligible for public insurance programs and subsidies

2 years

Period that people with disabilities must wait before becoming eligible for Medicaid

2,223,813

Number of people with disabilities who are uninsured ²⁶

38.6%

Percent of previously incarcerated men who are entirely uninsured ²⁷

5x

Unemployment rate in 2018 among formerly incarcerated people (27.3% compared to 5.2% among the general U.S. population)

43.6% and 35.2%

Unemployment rate for formerly incarcerated Black women and men in 2018 ²⁸

23.2% and 18.4%

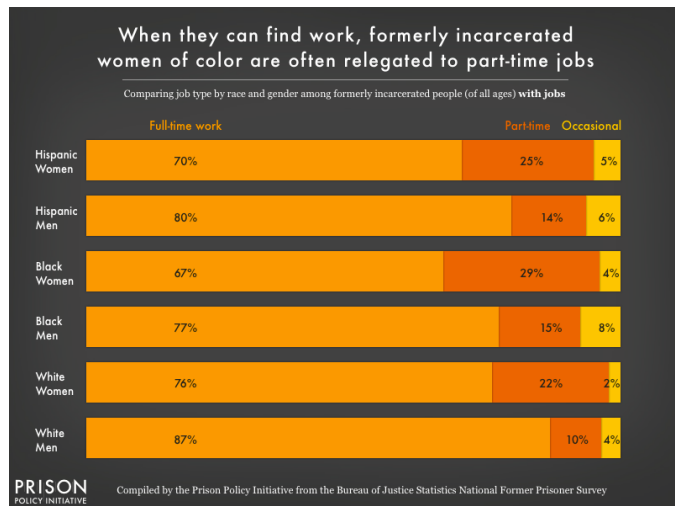
Unemployment rate for formerly incarcerated White women and men in 2018 ²⁹

5.2%

Unemployment rate for the general U.S. population in 2018 ³⁰

33%, 30% and 24%

Percent of formerly incarcerated Black, Latina and White women, respectively, who were employed, but in part-time or occasional jobs—jobs that almost never provide health insurance—in 2018. Among formerly incarcerated Black, Latino, and White men with employment, 23%, 20% and 14% were in part-time or occasional jobs.³¹



Source: [Prison Policy Initiative](#)

265,845

Estimated undocumented children and young adults enrolled in Medicaid through California's expansion³²

0

Number of states that have followed California in expanding Medicaid to undocumented young adults³³

70-89%

Percent of uninsured San Francisco residents (including undocumented residents) who gained coverage through the city's publicly financed health care program³⁴

Prohibitive Cost Barriers

12.6 million

Number of people who are eligible for insurance but cannot afford it³⁵

4 in 10

Portion of adults who cannot afford an unexpected expense of \$400³⁶

11.5%

Percent of currently employed workers who have no insurance³⁷

9 in 10

Uninsured workers who do not accept employer-sponsored coverage report cost as the main reason for declining³⁸

\$6,015

Average annual worker premiums for an employer-based insurance plan³⁹

\$5,335

Average annual deductible on a high-deductible family plan⁴⁰

\$8,150 and \$16,300

Out-of-pocket maximums for individuals and families, respectively, under the Affordable Care Act⁴¹

\$16,300

Out-of-pocket maximum allowed by the ACA for a family plan in 2020⁴²

Precarity of Insurance Tied to Jobs

People frequently change jobs and experience shifts in income. Tying people's health insurance to jobs thus leads to people lose insurance coverage all the time. This is especially true for low-income workers, whose jobs are precarious and whose hours and income are highly variable. In addition, women are more likely to hold part-time or occasional jobs, work in service sectors, or do unpaid caregiving—all forms of essential work that rarely come with health insurance benefits. Women of color, not surprisingly, are disproportionately affected.

1 in 3

Portion of adults with employer-sponsored insurance every two years who experience a change in primary health insurance (34.6%)⁴³



46.7%

Percentage of people with poverty-level incomes who find themselves uninsured at some point each year⁴⁴

54%

Portion of low-income people experiencing a gap in coverage who could not get needed medical care in the past year because of the cost⁴⁵

22%

Percent of uninsured nonelderly adults who said they were uninsured because the person who carried the health coverage in their family lost their job or changed employers⁴⁶

Over 1 in 10

Uninsured workers were uninsured because of a marital status change, the death of a spouse or parent, or loss of eligibility due to age or leaving school⁴⁷

2.2x

Rate at which women choose to work part-time jobs compared to men (largely because women tend to carry more family caregiving responsibilities)⁴⁸

39%, 45%, 51% and 66%

Percentage of non-citizen, Latina, Black, and White women under 65, respectively, who have employer-based insurance⁴⁹

12%, 16%, 23% and 30%

Probability of White, Asian, Latinx, and Black people losing insurance coverage within a year⁵⁰

2.6x

Higher likelihood that women are insured under someone else's (usually a spouse's) name compared to men.⁵¹ This deprives millions of women autonomy by pushing them into double dependency on employers and on men.

For more on coverage gaps as people move in and out of insurance eligibility, see our Losing Insurance Coverage fact sheet at <https://dignityandrights.org/HealthStatistics>.

Exclusionary Bureaucratic Barriers

Medicaid and workers' compensations are supposed to cover medical care for people with low incomes and people with work-related injuries, illnesses and disabilities, but people who rely on these programs face a battery of bureaucratic barriers like so-called "work requirements" that are specifically designed to save money by disqualifying and disenrolling people so that they cannot receive care.

6.7 million

Number of people who are eligible for Medicaid or CHIP but are unenrolled ⁵²

18,164

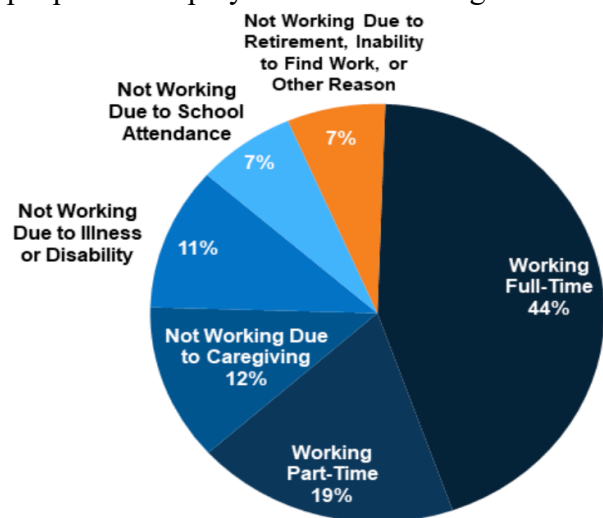
Number of people in Arkansas who were pushed out of Medicaid in 2018 by the state's so-called "work requirement," a bureaucratic maneuver designed to deny people eligibility ⁵³

80,000 + 17,000

Number of people who would have been pushed out of Medicaid in Michigan and New Hampshire, respectively, had state lawmakers enacted exclusionary paperwork requirements ⁵⁴

63%

Percent of adults 19-64 on Medicaid who are working full or part time. The vast majority of people not employed are not working for a reason ⁵⁵



Total = 23.5 million

Source: [Kaiser Family Foundation](#)

79%

Percent of people subject to Medicaid work-reporting requirements who have at least one worker in their family ⁵⁶

8.5%

County unemployment rate above which Michigan lawmakers would have exempted people from repeatedly filling out burdensome employment-and-job-hunting forms to remain eligible for Medicaid. Had the courts not blocked Michigan's plan, this racially motivated policy would have exempted people in majority-white counties from this bureaucratic burden while forcing people in counties with more Black, Latinx, Arab, and other people of color to fill out forms or be disenrolled. ⁵⁷

20%

Increase in workers' compensation claims denied by insurance companies and employers from 2013-2017. ⁵⁸ Workers with long-term musculoskeletal injuries or chronic illnesses caused by toxic exposure are disproportionately denied.

55% to 81%

Percent of workers with occupational illnesses who never file a workers' comp claim to receive medical care or disability payments for their illness ⁵⁹

21%

Percent of the cost of worker injuries that is actually covered by workers' compensation insurance, which is supposed to cover the cost of all such injuries. 16% of costs are shifted onto the government, 13% onto private health insurance, and 50% onto workers and their families. ⁶⁰

Exclusionary Income and Asset Tests for Medicaid

By separating and sorting people according to imagined notions of deservingness, Medicaid, like all means-tested programs, defines eligibility according to arbitrary limits that let many people fall through the cracks as their incomes change over time.

Eligibility is especially stringent in the twelve states that have refused to expand Medicaid. And all over the country, seniors and people with disabilities are forced to spend themselves into poverty in order to qualify for long-term care.

\$3,103

Annual income above which parents in Alabama become ineligible for Medicaid (slightly more for families with 3+ people) ⁶¹

\$2,000

Level to which seniors in most states must spend down their assets in order to qualify for long-term care and lower cost-sharing through Medicaid ⁶³

11

Number of states in which annual income limits for parents to qualify for Medicaid are less than \$10,000 ⁶²

11%

Percent of uninsured nonelderly adults who lost Medicaid because a new job, an increase in income or no longer being pregnant made them ineligible according to their state's rules ⁶⁴

State Lawmakers' Refusal to Expand Medicaid

Governors and legislators in twelve states have refused to expand Medicaid to people with incomes above the poverty line, a decision that has left millions of people uninsured and unable to get care. Medicaid expansion gets people the health care they need, saves lives, saves states money, and is an overwhelmingly popular policy among voters, but these lawmakers refuse to budge, choosing to weaponize racist, classist, and sexist stigma against people on Medicaid for their own political gain rather than meeting the needs of their constituents.

4.7 million

Number of people left uninsured by state governments that, as of June 2020, refused to expand Medicaid. This was up 1.9 million because as people's jobs were cut due to COVID-19, so was their employer-based insurance. ⁶⁵

90%

Portion of the up-front cost of Medicaid expansion paid by the federal government ⁶⁷

4.4 - 4.7%

Percent reduction range in state spending on traditional Medicaid associated with Medicaid expansion ⁶⁸

12

Number of states in which political leaders have refused to expand Medicaid ⁶⁶

14 - 30%

States' savings on mental health care, corrections and uncompensated care after Medicaid expansion⁶⁹

3.8

Number of jobs created for every \$100,000 increase in public spending on Medicaid⁷⁰

6

As of 2020, the number of states in which the public has expanded Medicaid through a ballot initiative, overruling intransigent public officials. These states were Idaho, Maine, Missouri, Nebraska, Oklahoma, and Utah.⁷¹

16%

Reduction in evictions, bankruptcies, wage garnishments, and similar legal and financial burdens for people who enrolled in Medicaid through Michigan's Medicaid expansion⁷²

- 80%

Reduction in the number of people with catastrophic medical expenditures achieved through Oregon's 2008 Medicaid expansion. In addition, 57% fewer people ended up with medical debt and 24% fewer had to borrow money to pay bills or skip bill payments.⁷³

Essential Workers and Families Left Behind by Employer-Based Insurance

Tying health insurance to jobs makes all workers vulnerable to losing insurance if they leave or lose a job, but especially hurts the tens of millions of people who are left out of employer-based insurance completely. Millions of low-wage workers, workers in part-time or seasonal jobs, employees of small businesses, workers in informal sectors, and these workers' families are denied insurance and thus denied health care. Employer-based insurance also leaves out people who can't work, whether because they're in school, caring for a child or adult, or are dealing with an illness or disability. All this hurts our public health and makes all workers and families vulnerable to losing insurance coverage. It especially hurts immigrants, people of color, and women, who are the people who most often work in these essential jobs and take on these added responsibilities.

Most Uninsured Families Are Working

84.7%

Percent of uninsured people under 65 who are in working families. 73.2% of uninsured families have a full-time worker and 11.5% have a part-time worker. Just 15.4% have no formal employment.⁷⁴

71%

Percent of nonelderly uninsured workers who work for an employer that does not offer health benefits⁷⁵

Essential Workers Are Often Uninsured

Essential workers perform essential services for society, but are very often paid low wages and denied health insurance. Women, immigrants, people of color, or small business employees are especially likely to work essential jobs yet be uninsured.

2.4 million

Number of essential workers in just six key work roles who were uninsured in 2018: ⁷⁶

Each figure represents about 100,000 people in a particular occupation



No health insurance coverage



With health insurance coverage

Maids and housekeeping cleaners

29%
Nearly one
in three



Cashiers

16%
Nearly
one in six



Cooks

27%
More than
one in four



Child-care workers

13%
Nearly one
in seven



Waiters and waitresses

22%
More than
one in five



Nursing assistants

11%
More than
one in ten



Source: [Washington Post](#)

53%

Portion of farmworkers who are uninsured ⁷⁷

29.1%

Percent of building cleaning service workers without insurance, over 60% of whom are people of color and over 40% of whom are immigrants. ⁷⁸

10.4%

Percent of child care workers without insurance. 95% of workers are women and 45% are of color. ⁷⁹

12.1%

Percent of grocery workers without insurance ⁸⁰

14.8%

Percent of trucking, warehouse, and postal service workers without insurance ⁸¹

24%

Portion of small-business employees who are entirely uninsured ⁸²

14.6%

Percentage of private-sector employers with fifty or fewer workers who offered insurance in 2014 but not in 2015 ⁸³

16% and 12%

Percent of home health aides and nursing assistants in nursing homes, respectively, who are uninsured. Home care workers are paid just \$17,500 a year on average, and residential care aids just \$21,100. ⁸⁴

12% vs. 5%

Percent of licensed practical nurses in nursing homes and home care who are uninsured (12%) compared with registered nurses (5%) ⁸⁵

11.5%

Percent of all nursing home staff who are uninsured⁸⁶

3.1%

Percent of hospital workers who are uninsured ⁸⁷

12.0%

Percent of licensed practical nurses in nursing homes and home care that are uninsured, compared with 5.1% of registered nurses ⁸⁸

Uninsured Moms and Kids

515,000

Number of kids who lost insurance from 2016 to 2018. This increase was due to a small increase among White kids and a large increase among Latinx kids with immigrant parents. ⁹⁴

32

Number of states experiencing declines in child enrollment in Medicaid and CHIP 2018 ⁹⁵

56%

Among people whose jobs (and thus their insurance) were cut during the first months of the COVID-19 pandemic, the percent who were women⁸⁹

24%

Percent of construction workers without health insurance in 2018 ⁹⁰

48%

Percent of Latinx construction workers without health insurance in 2018. By comparison, 13% of White non-Latinx workers were uninsured. ⁹¹

+ 50%

Increased likelihood construction workers have employment-based insurance if they are members of a union ⁹²

2x

Increased likelihood unionized construction workers have their premiums fully paid by their employers compared to non-unionized workers ⁹³

3x

Rate at which uninsurance increased for children in states that refused to expand Medicaid compared to those that did ⁹⁶

60 days

Point at which most mothers and transgender parents are cut off from Medicaid after giving birth in the 12 states that have refused to expand Medicaid ⁹⁷

Inequitable Coverage

6, 10, 18, 19, 21, 27 & 31%

Respective uninsurance rates for White, Black, Latinx, and Native people, people without high school degrees, people who are unemployed, and people without citizenship, respectively. ⁹⁸

49.2%

Percent of the uninsured who lived in the South in 2017 (a region home to 38% of the U.S. population and 55% of the Black population) ⁹⁹

13.1%

Percent of Latinx kids with immigrant parents who were uninsured in 2018 (compared to 3.8% of non-Latinx White kids) ¹⁰⁰

12.6%

Percentage of Native children who were uninsured in 2017 (compared to 4.9% for White kids) ¹⁰¹

7x

Likelihood that a low-income person on Medicaid will experience a period of uninsurance compared to a wealthier person on private insurance ¹⁰²

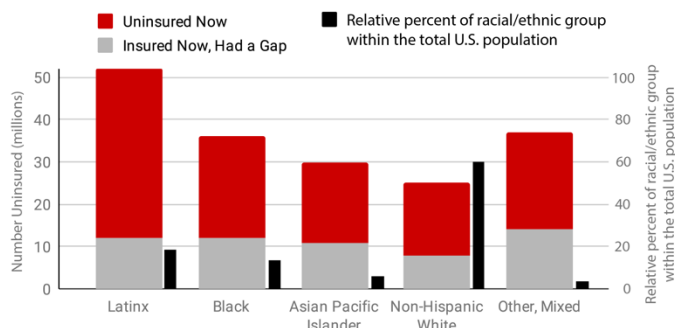
1 in 3

Portion of uninsured people in California who have incomes below \$25,000 ¹⁰³

38.6%

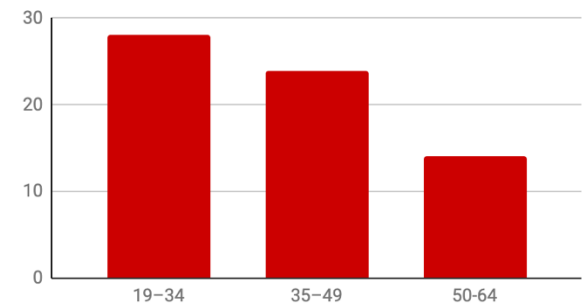
Percent of previously incarcerated men who are entirely uninsured ¹⁰⁴

Number Uninsured by Race/Ethnicity, in Millions



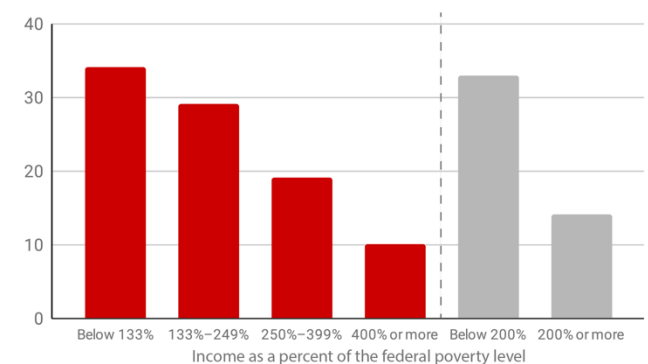
Source: [The Commonwealth Fund](#)

Number Uninsured in Millions, by Age



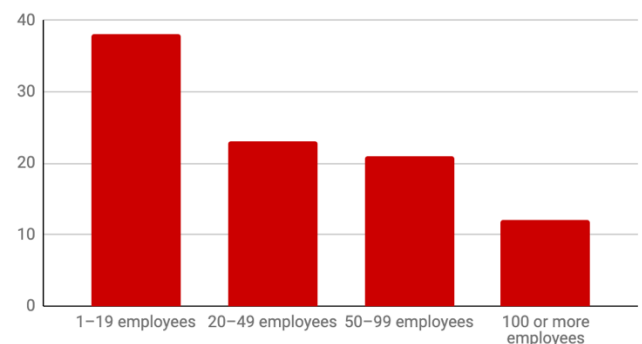
Source: [The Commonwealth Fund](#)

Number Uninsured in Millions, by Poverty Status



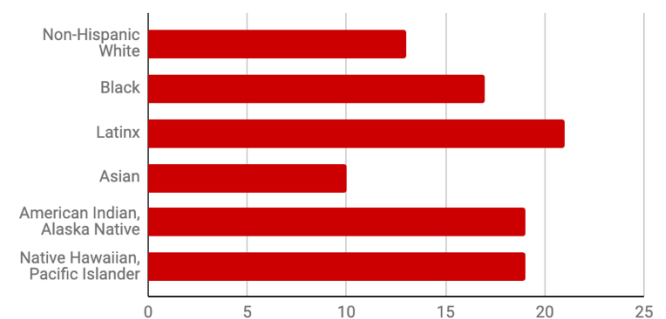
Source: [The Commonwealth Fund](#)

Number Uninsured in Millions, by Employer Size



Source: [The Commonwealth Fund](#)

Percent of people who did not see a doctor in the last year because of cost in 2018



Source: [Kaiser Family Foundation \(KFF\)](#)

Precarity of Life Without Coverage and Care

45,000 to 68,000

Number of people who die unnecessary preventable deaths each year because they are left uninsured ¹⁰⁵

500,000

Number of people who will die unnecessarily in the next 7 to 11 years if 30 million people continue to be left uninsured ¹⁰⁶

34 million

Number of people who knew a friend or family member who died in the last five years after being unable to afford medical treatment ¹⁰⁷

5,279

Estimated number of people who will die over the next 10 years from being uninsured if 12 states continue to block Medicaid expansion ¹⁰⁸

3 in 10

People without insurance avoided going to the doctor when they needed medical attention ¹⁰⁹

2 to 4 million

Estimated number of people who would be able to become self-employed if they did not have to stay in their current job to keep their employer sponsored insurance ¹¹⁰

1.3 million

Number of people with diabetes who are uninsured. Not having insurance coverage in the U.S.'s pay-or-you-don't-get-treatment health care system puts people with diabetes at serious risk of health complications and even death. ¹¹¹

44%

Percent of married women who were insured as dependents (compared to 16% of men) ¹¹²

70%

Percent chance a marriage won't end in divorce even if there are marital issues if one spouse is dependent on the other for health insurance ¹¹³

3

People died every hour due to a lack of health insurance in 2010 ¹¹⁴

134,120

Number of people who died prematurely due to a lack of health coverage between 2005 and 2010 ¹¹⁵

- ¹ 38,125,200 according to the Census Bureau and 43,800,000 according to The Commonwealth Fund. 38.1252 million = 27.426 million + (1 – 96.4%) x 296.2 million. See Berchick, Edward (November 2019), “Health Insurance Coverage in the United States: 2018,” U.S. Census Bureau, p. 3-5, <https://www.census.gov/content/dam/Census/library/publications/2019/demo/p60-267.pdf>; Collins, Sara R., Herman K. Bhupal and Michelle M. Doty (February 2019), “Health Insurance Coverage Eight Years After the ACA: Fewer Uninsured Americans and Shorter Coverage Gaps, But More Underinsured,” The Commonwealth Fund, p. 23, https://www.commonwealthfund.org/sites/default/files/2019-02/Collins_hlt_ins_coverage_8_years_after_ACA_2018_biennial_survey_sb.pdf.
- ² Garfield, Rachel “Eligibility for ACA Health Coverage Following Job Loss” Kaiser Family Foundation (May 13, 2020). <https://www.kff.org/coronavirus-covid-19/issue-brief/eligibility-for-aca-health-coverage-following-job-loss/>. For comparative estimates of workers losing coverage (not counting dependents), see Economic Policy Institute: <https://www.epi.org/blog/16-2-million-workers-have-likely-lost-employer-provided-health-insurance-since-the-coronavirus-shock-began/>.
- ³ The number of people uninsured all year long in 2017 or 2018 was 28.6 million according to The Census Bureau, 28.9 million according to Kaiser Family Foundation, 30.1 million according to Urban Institute, 30.4 million according to The Commonwealth Fund and 30.7 million according to the Centers for Medicare & Medicaid Services. See Census Bureau, “Table S2701: Selected Characteristics of Health Insurance Coverage in the United States,” 2018 American Community Survey, <https://data.census.gov/cedsci/table?q=insurance&tid=ACST1Y2018.S2701&hidePreview=false>; Tolbert, Jennifer, Kendal Orgera & Anthony Damico (December 13, 2019), “Key Facts about the Uninsured Population,” Kaiser Family Foundation, <https://www.kff.org/uninsured/issue-brief/key-facts-about-the-uninsured-population/>; Blumberg, Linda (July 2018), “Characteristics of the Remaining Uninsured: An Update,” Urban Institute, https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf; Gunja, Munira Z. & Sara R. Collins (Aug. 28, 2019), “Who Are the Remaining Uninsured, and Why Do They Lack Coverage? Findings from the Commonwealth Fund Biennial Health Insurance Survey, 2018,” Commonwealth Fund, <https://www.commonwealthfund.org/publications/issue-briefs/2019/aug/who-are-remaining-uninsured-and-why-do-they-lack-coverage>. CMS: “Table 22: Health Insurance Enrollment and Uninsured; Number of Enrollees and Annual Percent Change, Calendar Years 1987- 2018” <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/NationalHealthExpendData/NationalHealthAccountsHistorical>.
- ⁴ Congressional Budget Office (September 2020), “Federal Subsidies for Health Insurance Coverage for People Under 65: 2020 to 2030,” <https://www.cbo.gov/publication/56650>.
- ⁵ For a comparison of rates from the Current Population Survey, Commonwealth Fund Affordable Care Act Tracking Survey, Commonwealth Fund Biennial Health Insurance Survey, Gallup Healthways Well-Being Index, National Health Interview Survey, and Urban Institute Health Reform Monitoring Survey, see Collins et al. (February 2019), footnote 1.; Also see Tolbert et al. (December 13, 2019), footnote 3.
- ⁶ 3.9% according to the Census Bureau, 10% according to the Commonwealth Fund, and 12.9% according to the Centers for Disease Control and Prevention. See Berchick (November 2019), footnote 1; Collins (February 2019), footnote 1; and Okoro, Catherine (February 24, 2017), “Surveillance for Health Care Access and Health Services Use, Adults Aged 18-64 Years – Behavioral Risk Factor Surveillance System, United States, 2014,” Centers for Disease Control and Prevention, <https://www.cdc.gov/mmwr/volumes/66/ss/ss6607a1.htm>.
- ⁷ The Census Bureau reports that at least 3.6% of the 296.2 million people who were covered at least part of the year experienced a gap in coverage 2018, The Commonwealth Fund reports that 19.3 million did and the CDC reports that 10,860,000 people under 65 did. See Berchick (November 2019), footnote 1; Collins et al. (February 2019), footnote 1; and Centers for Disease Control and Prevention (2019), “Table P-12b. Frequency distribution (number in thousands) of any period without health insurance coverage during the past 12 months,” 2018 National Health Interview Survey, https://ftp.cdc.gov/pub/Health_Statistics/NCHS/NHIS/SHS/2018_SHS_Table_P-12.pdf.
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