

## **Health Insurance Coverage Bulletin**

Abstract of Auxiliary Data for the March 2023 Annual Social  
and Economic Supplement to the Current Population Survey

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## INTRODUCTION

The Current Population Survey Annual Social and Economic Supplement (CPS ASEC)—also known as the March CPS Supplement—is the data source most often used for estimating health insurance coverage in the United States.<sup>1</sup> The survey asks respondents about their health insurance coverage during the previous calendar year, and those who answer “no” to every question about each major type of insurance coverage are considered uninsured.<sup>2</sup> Because the insurance questions are not mutually exclusive, the March CPS captures multiple sources of health insurance during the year.

The survey generates nationally representative estimates of health insurance coverage and includes limited information on health expenditures and the cost of health insurance.<sup>3</sup> However, several important characteristics of health insurance that are particularly relevant to employer-sponsored coverage are not contained in the March CPS.

To address these limitations, the U.S. Department of Labor’s (DOL) Employee Benefits Security Administration (EBSA) generates additional variables, imputes - assigns value to - certain

characteristics regarding employment and insurance that can then be linked to the March CPS data file. The resulting Auxiliary Data not only produces new variables, but also clarifies variables included in the March CPS, such as size (number of employees) and sector (private, federal, or state/local) of employment, that do not necessarily represent the size and sector of the employer that provides health insurance coverage.<sup>4</sup>

While the March CPS reports whether coverage is from an employer, for *insured workers*, it does not distinguish between current and former employers as the source of that coverage. It also does not report whether, for *all* workers, the employer offers health insurance.<sup>5</sup> To fill these gaps, EBSA first imputes current versus former employer coverage for insured workers, then imputes offers of coverage for all workers.<sup>6</sup> For those deemed to be covered by a former employer, EBSA imputes employer size, employer sector, and whether coverage comes through the Consolidated Omnibus Budget Reconciliation Act (COBRA) or a retiree plan. For all those with employer-sponsored health insurance (ESI), EBSA also imputes coverage characteristics such as the funding arrangement, plan type, and union arrangement. Finally, actuarial value, which represents the average benefit richness of an employer-sponsored health insurance plan, is

<sup>1</sup> Additional information on the survey can be found at <https://www.census.gov/data/datasets/time-series/demo/cps/cps-asec.html>.

<sup>2</sup> The survey logic should detect people who are ever covered by a given insurance type or who are uninsured all year. However, a large part of the research community treats the CPS as producing point-in-time estimates for the uninsured and for each insurance type. Starting with the March 2019 CPS, equivalent point-in-time variables that look at insurance status at the time of the survey are available.

<sup>3</sup> Variables on health expenditures and premium costs were introduced in the March 2011 CPS. While premiums have not been tabulated, tables on out-of-pocket expenditures are included in the Bulletin.

<sup>4</sup> The CPS is a self-reported household survey, and there is some concern that respondents are referencing the size of the establishment they work for instead of the size of the actual employer when asked about employer size. While it is impossible to validate employer size in the private sector, EBSA assigns all state and Federal workers to the largest employer size category (1,000 or more) in its dataset.

<sup>5</sup> The CPS captures point-in-time offers of coverage for March 2023, but the Auxiliary Data is based on CY 2022 employment and insurance variables.

<sup>6</sup> If coverage is from a current employer, then, by default, the employer provides health insurance. The imputation is for workers with coverage from a former employer and for workers without coverage in their own name.

imputed only to employees with health insurance in their own name from their current employer. These covered employees are active plan participants or have active coverage.

Because individuals can have multiple sources of coverage in a year, EBSA creates tables that assign a “primary” source of coverage for the year based on the following hierarchy: (1) ESI,<sup>7</sup> (2) Medicare, (3) private non-group coverage, (4) Medicaid or CHIP, and (5) military or other public insurance.<sup>8</sup> This hierarchy allows us to avoid counting individuals more than once across coverage categories. Because the March CPS does not report how long an individual is covered by each type of insurance, “primary” coverage should not be construed as the most important source of coverage in a year.<sup>9</sup>

Imputations for funding arrangement, self-insured, and fully insured are based on file tabulations from the Agency for Healthcare Research and Quality’s 2020–2022 Medical Expenditure Panel Survey, Insurance Component (MEPS-IC). The self-insured category includes persons covered by plans reported as partly or completely self-insured.<sup>10</sup> In addition, level-funding of plans for employers size 200 or less, based on data from the 2022 KFF Employer Health Benefits Survey (EHBS) is now imputed

<sup>7</sup> ESI is reported hierarchically by sector with private sector taking precedence over public sector. In addition, when a person has both Medicare and ESI, the primary source of coverage is dependent on age, employment status, and employer size, per Medicare regulations. For workers or spouses who are age 65 or over, ESI is the primary payer if the employer size is greater than 20. For those younger than 65, ESI is the primary payer if the employer size is 100 or more. When ESI is designated as primary, we say that Medicare is the secondary payer (MSP).

<sup>8</sup> For the tables in this Bulletin, Medicaid, CHIP, military, and other public insurance are all combined into a single, non-Medicare “other public insurance” category.

for both fully and self-insured plans, given both types could report as level-funded in the survey. Plan-type imputations use information from both the MEPS-IC and the 2022 EHBS, as well as Federal Employees Health Benefits Program data for the Federal sector.

The methodology for union imputations was updated last year. These imputations are still based on both the CPS and the 2008 Panel, Wave 6 (2010 data) of the Survey of Income and Program Participation (SIPP). However, for retiree and COBRA coverage, union coverage has been updated with trends from the 2010 – 2020 Group Health Plans Bulletins (GHPB), comprised of Form 5500 data on certain employer-sponsored welfare benefits plans on collectively bargained health insurance.

Actuarial values (AVs) are based on plan level and summary data from the 2022 EHBS, with trends from KFF analyses of the Truven Health Analytics MarketScan Commercial Databases, and the 2020 Health Care Cost Institute (HCCI) Health Care Cost and Utilization Report. In addition, the MEPS claims data that underlies the AV calculations has been compared with the more

<sup>9</sup> The March CPS asks which months the person was enrolled in each coverage. However, the subannual results are reported as all, part-year, or none for private, public, and Medicaid coverages only.

<sup>10</sup> This partition of self-insured differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that was subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2023.

<https://www.dol.gov/sites/default/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

robust 2021 Merative™ MarketScan® Commercial Claims data and adjusted based on the comparison, to be more representative.

While Exchange coverage has not been edited on the CPS, subsidy receipt has been adjusted to include all persons under 400% of poverty, to more closely align with CMS estimates from the Effectuated Enrollment Report for 2022. For the first time since it's been included in the ASEC, the survey undercounts exchange enrollment.

The COVID-19 public health emergency (PHE) ended in April of 2023, with some provisions (including COBRA enrollment extensions) not ending until July of that year. It is unclear if the data reported in the 2023 March CPS (particularly with respect to response rates by income band), remains affected by the PHE itself, or if there are broader, more general issues with respect to response rates affecting the insurance estimates.

EBSA advises caution when interpreting imputed variables for small sample sizes. Users should refrain from reporting statistics at the state level for imputed variables, such as funding, union coverage, plan types, and coverage from a former employer.

## HIGHLIGHTS

- The total population represented in the March 2023 CPS was 330.6 million, of which 0.7 million were infants with no insurance status for 2022. Excluding these infants, the calendar year (CY) 2022 population was 330.0 million. Of these, 304.0 million (92 percent) were covered by at least one form of insurance in 2022, either private or public, and the remaining 25.9 million (8 percent) were classified as uninsured. Of the insured, 179.8 million (59 percent) had ESI; 61.6 million (20 percent) had Medicare; 32.8 million (11 percent) had non-ESI private coverage; and 72.6 million (24 percent) had other (non-Medicare) public coverage, which includes both Medicaid and CHIP as well as Tricare.<sup>11</sup>
- Of the 272.1 million under age 65, 246.8 million (91 percent) were insured in 2022, and 25.3 million (9 percent) were uninsured.
- We assigned “primary coverage” using the coverage hierarchy described in the Introduction. For those insured in CY 2022, 170.7 million (56 percent) had ESI as their primary source of coverage, 59.0 million (19 percent) had Medicare, 18.4 million (6 percent) had non-ESI private coverage, and 56.0 million (18 percent) had other public coverage.

- Of the 170.9 million workers reported in the March 2023 CPS, 82.4 million (48 percent) were covered in 2022 through a current employer and 34.0 million (20 percent) were eligible but not enrolled in their employer’s plan (with 13 percent of these eligible workers uninsured).<sup>12</sup> Additionally, 54.6 million (31.9 percent) were not offered coverage by their employer (either being ineligible or the employer not offering coverage to any employee). Of this group, 20 percent were uninsured.
- Health insurance offer rates were higher with larger employers; the share of uninsured workers dropped as employer size increased.
- The rate of self-insurance generally increased with employer size for private sector.
- Smaller (size <200) employers are increasingly using level-funding as a way to potentially save money on premium costs. Given the complicated nature of this coverage, small employers may report this coverage as either self- or fully insured. Among those with coverage from a smaller employer, 34 percent have level-funded coverage (with 47 percent for self-insured and 31 percent for fully insured).
- Of the 179.8 million with ESI in 2022, 159.4 million (89 percent) had coverage through a current employer (either as a policyholder or dependent), 4.2 million (2 percent) had coverage through COBRA, and 16.1 million (9

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<sup>11</sup> Persons may be counted in more than one category. This Bulletin includes Tricare in other public coverage, which differs from the Census publication, where Tricare is included with private health insurance.

<https://www.census.gov/library/publications/2023/demo/p60-281.html>.

<sup>12</sup> Workers are identified by the CPS variable WEXP whose universe includes those persons age 15+. A value of 13 corresponds to a nonworker. Employer size for all workers is included on the Auxiliary data file as EMPSIZE. Note: This differs from NEWSIZE, which is the size of employer providing ESI coverage.

percent) had retiree coverage. Unsurprisingly, persons with either COBRA or retiree coverage were heavily concentrated in larger employer-sponsored plans. Of the 96.0 million who had coverage in their own name (as a policyholder), 82.4 million (86 percent) had coverage from a current employer, 2.5 million (3 percent) had COBRA, and 11.1 million (12 percent) had retiree coverage.

- Of those with ESI, 50 percent were enrolled in a Preferred Provider Organization (PPO) plan. The remaining individuals were covered, in descending order, by high deductible health insurance plans (HDHP), Health Maintenance Organizations (HMO), or Point-of-Service (POS) plans.<sup>13</sup>
- Union health insurance coverage was more predominant in the public sector than the private sector. For active enrollees, 40 percent involve union coverage in the public sector versus 8 percent in the private sector. For retirees, the difference is less substantial, with 50 percent union coverage in the public sector and 34 percent in the private sector.
- The actuarial values represent average plan “richness”—the share of covered expenses the plan pays for claims incurred by an average population—for active workers with coverage in their own name. The actuarial values show, in general, overall plan richness at 86 percent,<sup>14</sup>

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<sup>13</sup> High deductible health insurance plans include, but are not limited to, IRS-qualified HDHP plans.

<sup>14</sup> While our average actuarial value calculation uses the in-network parameters for PPO and POS coverage, the 86% amount is consistent with that found from both HCCI and KFF’s analysis of Truven data, both of which look at spending for persons with ESI and not type of coverage held.

meaning, on average, a plan would pay 86 percent of covered expenses over a standard population.<sup>15</sup>

- Out-of-pocket spending appeared to increase with age for those under age 65 and was generally higher for those with private insurance coverage or Medicare than it was for those who had either other public coverage or were uninsured. Average out-of-pocket costs for those with other public coverage were lowest, followed closely by the uninsured. In general, both groups had lower costs, on average, than their same-age counterparts in other groups.<sup>16</sup>
- For persons ever insured during CY 2022, the vast majority, almost 99 percent, were also insured in March 2023. Of the total “Full Year Uninsured” in CY 2022, 92 percent were uninsured in March 2023 (point-in-time).
- For persons under age 65 with non-employer-sponsored private health insurance, 56 percent (11.8 million) got their insurance through the exchange.<sup>17</sup> The variation ranged from 52 percent for those aged 18-25 to 58 percent for those aged 26-64. For persons with coverage through the exchange, 86 percent received a subsidy.

<sup>15</sup> AV parameters are usually based on in-network cost-sharing, but expenses are an average of in and out of network spending.

<sup>16</sup> The exception includes disabled children with Medicare, which as a group, had a very small number of records.

<sup>17</sup> Thirty-six percent of all age groups with non-employer-sponsored coverage got coverage through the exchange, but there was relatively little exchange coverage among those 65 and older.

**Table 1A. Health Insurance Coverage from All Sources by State: CY 2022 (numbers in millions)**

State	Total Population	Total Insured	ESI Total <sup>1</sup>	ESI Private Sector <sup>2</sup>	ESI Public Sector	Medicare	Other Private Insurance <sup>3</sup>	Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Total USA</b>	<b>330.0</b>	<b>304.0</b>	<b>179.8</b>	<b>135.6</b>	<b>44.5</b>	<b>61.6</b>	<b>32.8</b>	<b>72.6</b>	<b>25.9</b>
Alabama	5.0	4.6	2.9	2.2	0.7	1.0	0.3	1.0	0.4
Alaska	0.7	0.6	0.4	0.2	0.2	0.1	*	0.2	0.1
Arizona	7.2	6.5	3.8	3.0	0.7	1.4	0.6	1.7	0.8
Arkansas	3.0	2.8	1.4	1.0	0.4	0.6	0.3	0.9	0.2
California	38.7	36.3	20.0	15.0	5.1	6.4	3.7	10.7	2.4
Colorado	5.7	5.3	3.3	2.6	0.7	1.0	0.4	1.2	0.4
Connecticut	3.6	3.4	2.1	1.5	0.6	0.7	0.3	0.8	0.2
Delaware	1.0	1.0	0.6	0.4	0.2	0.2	0.1	0.2	0.1
DC	0.7	0.6	0.4	0.3	0.2	0.1	*	0.2	*
Florida	22.2	19.8	10.1	7.7	2.4	4.8	3.3	4.1	2.3
Georgia	10.9	9.5	5.5	4.2	1.4	1.8	1.0	2.1	1.4
Hawaii	1.4	1.4	0.9	0.6	0.3	0.3	0.1	0.4	*
Idaho	1.9	1.8	1.1	0.8	0.3	0.4	0.2	0.4	0.2
Illinois	12.3	11.5	7.5	6.1	1.4	2.3	0.9	2.4	0.8
Indiana	6.8	6.4	3.8	3.1	0.8	1.3	0.7	1.4	0.4
Iowa	3.2	3.1	1.9	1.5	0.4	0.7	0.4	0.6	0.1
Kansas	2.9	2.7	1.7	1.3	0.4	0.5	0.3	0.5	0.2
Kentucky	4.5	4.2	2.2	1.5	0.7	1.1	0.4	1.1	0.3
Louisiana	4.5	4.2	2.2	1.6	0.6	0.8	0.3	1.4	0.4
Maine	1.4	1.3	0.7	0.6	0.2	0.4	0.2	0.3	*
Maryland	6.2	5.7	3.9	2.4	1.5	1.0	0.6	1.1	0.5
Massachusetts	6.9	6.6	4.2	3.3	0.9	1.3	0.6	1.6	0.2

**Table 1A. Health Insurance Coverage from All Sources by State: CY 2022 (numbers in millions)**

State	Total Population	Total Insured	ESI Total <sup>1</sup>	ESI Private Sector <sup>2</sup>	ESI Public Sector	Medicare	Other Private Insurance <sup>3</sup>	Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
Michigan	10.0	9.7	6.3	5.0	1.3	2.1	0.9	2.0	0.3
Minnesota	5.6	5.5	3.4	2.7	0.7	1.1	0.9	1.2	0.2
Mississippi	2.9	2.6	1.4	1.0	0.4	0.6	0.3	0.7	0.3
Missouri	6.1	5.6	3.4	2.7	0.7	1.1	0.7	1.1	0.4
Montana	1.1	1.0	0.6	0.4	0.2	0.2	0.2	0.3	0.1
Nebraska	1.9	1.8	1.1	0.9	0.2	0.4	0.3	0.4	0.1
Nevada	3.2	2.8	1.7	1.2	0.4	0.6	0.3	0.7	0.3
New Hampshire	1.4	1.3	0.9	0.7	0.2	0.3	0.2	0.2	0.1
New Jersey	9.2	8.6	5.6	4.3	1.3	1.6	0.9	1.6	0.5
New Mexico	2.1	1.9	0.8	0.5	0.3	0.4	0.1	0.8	0.2
New York	19.5	18.4	10.3	7.2	3.1	3.7	1.5	5.5	1.1
North Carolina	10.7	9.6	5.4	4.1	1.3	2.1	1.1	2.2	1.2
North Dakota	0.8	0.7	0.5	0.4	0.1	0.1	0.1	0.1	*
Ohio	11.6	11.2	6.6	4.9	1.7	2.5	1.1	2.6	0.5
Oklahoma	3.9	3.5	2.0	1.4	0.6	0.7	0.4	1.0	0.5
Oregon	4.2	4.0	2.3	1.7	0.6	0.9	0.5	1.1	0.3
Pennsylvania	12.7	12.0	7.6	5.9	1.8	2.6	1.5	2.4	0.7
Rhode Island	1.1	1.0	0.6	0.5	0.1	0.2	0.1	0.3	*
South Carolina	5.3	4.8	2.6	2.0	0.7	1.1	0.6	1.2	0.4
South Dakota	0.9	0.8	0.5	0.4	0.1	0.2	0.1	0.1	0.1
Tennessee	7.0	6.5	3.7	2.7	1.0	1.5	0.8	1.4	0.5
Texas	29.9	24.8	15.0	11.8	3.2	4.2	2.7	5.8	5.1
Utah	3.3	3.1	2.2	1.7	0.5	0.4	0.4	0.5	0.2

**Table 1A. Health Insurance Coverage from All Sources by State: CY 2022 (numbers in millions)**

State	Total Population	Total Insured	ESI Total <sup>1</sup>	ESI Private Sector <sup>2</sup>	ESI Public Sector	Medicare	Other Private Insurance <sup>3</sup>	Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
Vermont	0.6	0.6	0.4	0.3	0.1	0.1	0.1	0.2	*
Virginia	8.5	7.9	5.0	3.6	1.4	1.4	0.8	1.7	0.6
Washington	7.7	7.3	4.6	3.4	1.2	1.3	0.8	1.6	0.4
West Virginia	1.7	1.7	0.9	0.6	0.3	0.4	0.1	0.5	0.1
Wisconsin	5.8	5.5	3.5	2.7	0.8	1.1	0.7	1.0	0.3
Wyoming	0.6	0.5	0.3	0.2	0.1	0.1	0.1	0.1	*

NOTE: Estimates by coverage sources are not mutually exclusive; total population does not equal the sum by sources as persons can be covered by more than one type of health insurance during the year. Persons with ESI coverage from two sources (self/spouse or both parents) can appear in both public and private sector totals.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1</sup>/ Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

<sup>2</sup>/ Private sector includes the self-employed.

<sup>3</sup>/ Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>4</sup>/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>5</sup>/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 1B. Health Insurance Coverage from All Sources by Age: CY 2022 (numbers in millions)**

Type of Insurance	All Ages	Age <18	Ages 18-25	Ages 26-64	Ages 65+
<b>Total Population</b>	<b>330.0</b>	<b>71.8</b>	<b>34.8</b>	<b>165.5</b>	<b>57.9</b>
Total Insured	304.0	68.1	30.2	148.5	57.2
Employer Sponsored Insurance <sup>1</sup>	179.8	39.4	20.4	106.4	13.5
Policyholder	96.0	0.1	6.1	79.5	10.3
Dependent	85.2	39.3	14.6	28.0	3.3
Medicare	61.6	0.4	0.5	6.6	54.1
Other Private Insurance <sup>2</sup>	32.8	3.8	2.8	14.4	11.8
Policyholder	23.4	0.1	1.3	11.5	10.5
Dependent	9.4	3.8	1.5	2.9	1.3
Other Public Coverage <sup>3</sup>	72.6	27.3	7.8	30.4	7.0
Total Uninsured <sup>4</sup>	25.9	3.7	4.6	17.0	0.6

NOTE: Estimates by coverage sources are not mutually exclusive; total population does not equal the sum by source as persons can be covered by more than one type of health insurance during the year.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1</sup>/ Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

<sup>2</sup>/ Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>3</sup>/ Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>4</sup>/ Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 1C. Health Insurance Coverage from Primary Source by State: CY 2022 (numbers in millions)**

State	Total Population	Total Insured	ESI Total <sup>1</sup>	ESI Private Sector <sup>2</sup>	ESI Public Sector	Medicare	Other Private Insurance <sup>3</sup>	Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Total USA</b>	<b>330.0</b>	<b>304.0</b>	<b>170.7</b>	<b>132.9</b>	<b>37.8</b>	<b>59.0</b>	<b>18.4</b>	<b>56.0</b>	<b>25.9</b>
Alabama	5.0	4.6	2.7	2.1	0.6	0.9	0.2	0.8	0.4
Alaska	0.7	0.6	0.3	0.2	0.1	0.1	*	0.2	0.1
Arizona	7.2	6.5	3.6	3.0	0.6	1.3	0.3	1.3	0.8
Arkansas	3.0	2.8	1.4	1.0	0.3	0.6	0.2	0.7	0.2
California	38.7	36.3	19.2	14.7	4.5	6.2	2.4	8.6	2.4
Colorado	5.7	5.3	3.2	2.6	0.6	1.0	0.2	1.0	0.4
Connecticut	3.6	3.4	1.9	1.5	0.5	0.7	0.1	0.7	0.2
Delaware	1.0	1.0	0.5	0.4	0.2	0.2	*	0.2	0.1
DC	0.7	0.6	0.4	0.3	0.1	0.1	*	0.1	*
Florida	22.2	19.8	9.7	7.6	2.0	4.6	2.6	2.9	2.3
Georgia	10.9	9.5	5.3	4.1	1.2	1.8	0.8	1.6	1.4
Hawaii	1.4	1.4	0.8	0.6	0.2	0.3	*	0.3	*
Idaho	1.9	1.8	1.0	0.8	0.2	0.4	0.1	0.3	0.2
Illinois	12.3	11.5	7.1	5.9	1.2	2.2	0.3	1.9	0.8
Indiana	6.8	6.4	3.7	3.0	0.7	1.2	0.4	1.1	0.4
Iowa	3.2	3.1	1.8	1.4	0.4	0.6	0.1	0.5	0.1
Kansas	2.9	2.7	1.7	1.3	0.4	0.5	0.1	0.4	0.2
Kentucky	4.5	4.2	2.1	1.5	0.5	1.0	0.2	0.9	0.3
Louisiana	4.5	4.2	2.0	1.6	0.5	0.8	0.1	1.2	0.4
Maine	1.4	1.3	0.7	0.6	0.1	0.4	0.1	0.2	*
Maryland	6.2	5.7	3.7	2.4	1.3	1.0	0.3	0.8	0.5
Massachusetts	6.9	6.6	4.0	3.2	0.8	1.2	0.2	1.2	0.2

**Table 1C. Health Insurance Coverage from Primary Source by State: CY 2022 (numbers in millions)**

State	Total Population	Total Insured	ESI Total <sup>1</sup>	ESI Private Sector <sup>2</sup>	ESI Public Sector	Medicare	Other Private Insurance <sup>3</sup>	Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
Michigan	10.0	9.7	5.8	4.8	1.0	2.0	0.4	1.5	0.3
Minnesota	5.6	5.5	3.2	2.6	0.6	1.0	0.4	0.8	0.2
Mississippi	2.9	2.6	1.3	1.0	0.3	0.6	0.2	0.5	0.3
Missouri	6.1	5.6	3.3	2.6	0.7	1.1	0.4	0.9	0.4
Montana	1.1	1.0	0.5	0.4	0.1	0.2	0.1	0.2	0.1
Nebraska	1.9	1.8	1.1	0.9	0.2	0.4	0.1	0.3	0.1
Nevada	3.2	2.8	1.6	1.2	0.4	0.5	0.1	0.6	0.3
New Hampshire	1.4	1.3	0.8	0.6	0.2	0.3	0.1	0.1	0.1
New Jersey	9.2	8.6	5.4	4.2	1.1	1.5	0.5	1.3	0.5
New Mexico	2.1	1.9	0.8	0.5	0.3	0.4	0.1	0.6	0.2
New York	19.5	18.4	9.5	6.8	2.6	3.5	1.0	4.4	1.1
North Carolina	10.7	9.6	5.1	4.1	1.0	2.1	0.7	1.7	1.2
North Dakota	0.8	0.7	0.5	0.4	0.1	0.1	0.1	0.1	*
Ohio	11.6	11.2	6.3	4.8	1.6	2.4	0.4	2.0	0.5
Oklahoma	3.9	3.5	1.9	1.3	0.5	0.7	0.2	0.8	0.5
Oregon	4.2	4.0	2.2	1.7	0.5	0.8	0.2	0.8	0.3
Pennsylvania	12.7	12.0	7.1	5.7	1.4	2.5	0.6	1.8	0.7
Rhode Island	1.1	1.0	0.6	0.5	0.1	0.2	*	0.2	*
South Carolina	5.3	4.8	2.5	1.9	0.5	1.1	0.3	0.9	0.4
South Dakota	0.9	0.8	0.5	0.4	0.1	0.2	0.1	0.1	0.1
Tennessee	7.0	6.5	3.6	2.7	0.9	1.5	0.4	1.0	0.5
Texas	29.9	24.8	14.4	11.7	2.7	4.1	1.7	4.6	5.1
Utah	3.3	3.1	2.1	1.6	0.4	0.4	0.3	0.4	0.2

**Table 1C. Health Insurance Coverage from Primary Source by State: CY 2022 (numbers in millions)**

State	Total Population	Total Insured	ESI Total <sup>1</sup>	ESI Private Sector <sup>2</sup>	ESI Public Sector	Medicare	Other Private Insurance <sup>3</sup>	Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
Vermont	0.6	0.6	0.3	0.3	0.1	0.1	*	0.1	*
Virginia	8.5	7.9	4.7	3.5	1.2	1.4	0.5	1.3	0.6
Washington	7.7	7.3	4.4	3.4	1.0	1.3	0.4	1.3	0.4
West Virginia	1.7	1.7	0.9	0.6	0.2	0.4	0.1	0.4	0.1
Wisconsin	5.8	5.5	3.3	2.6	0.8	1.1	0.3	0.8	0.3
Wyoming	0.6	0.5	0.3	0.2	0.1	0.1	*	0.1	*

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured. Persons with ESI coverage from two sources (self/spouse or both parents) will appear in private sector if either source of coverage is private sector.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are only counted in the Medicare column.

<sup>2/</sup> Private sector includes the self-employed.

<sup>3/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>4/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>5/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 1D. Health Insurance Coverage from Primary Source by Age: CY 2022 (numbers in millions)**

Type of Insurance	All Ages	Age <18	Ages 18-25	Ages 26-64	Ages 65+
<b>Total Population</b>	<b>330.0</b>	<b>71.8</b>	<b>34.8</b>	<b>165.5</b>	<b>57.9</b>
Total Insured	304.0	68.1	30.2	148.5	57.2
Employer Sponsored Insurance <sup>1</sup>	170.7	39.4	20.4	106.2	4.7
Policyholder	89.0	0.1	6.1	79.4	3.5
Dependent	81.6	39.3	14.3	26.8	1.2
Medicare	59.0	0.4	0.4	6.1	52.1
Other Private Insurance <sup>2</sup>	18.4	3.5	2.5	12.1	0.3
Policyholder	11.2	0.1	1.2	9.7	0.3
Dependent	7.2	3.4	1.3	2.4	0.1
Other Public Coverage <sup>3</sup>	56.0	24.8	6.9	24.1	0.1
<b>Total Uninsured<sup>4</sup></b>	<b>25.9</b>	<b>3.7</b>	<b>4.6</b>	<b>17.0</b>	<b>0.6</b>

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only as Medicare.

<sup>2/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>3/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>4/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 2A. Insurance Coverage of Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022 (in millions)**

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>All Sizes, Total</b>	<b>170.9</b>	<b>155.4</b>	<b>116.3</b>	<b>92.0</b>	<b>24.3</b>	<b>10.0</b>	<b>10.6</b>	<b>18.5</b>	<b>15.5</b>
All Sizes, Coverage through current employer	82.4	82.4	82.0	66.8	15.2	0.4	0.0	0.0	0.0
All Sizes, Eligible not enrolled	34.0	29.6	17.0	12.2	4.8	2.9	2.7	7.0	4.4
All Sizes, Employer offers, not eligible	18.9	16.3	7.5	5.5	1.9	2.9	2.0	4.0	2.6
All Sizes, Employer doesn't offer	35.7	27.1	9.8	7.5	2.3	3.8	6.0	7.5	8.6
<b>Under Size 25, Total</b>	<b>55.7</b>	<b>46.9</b>	<b>27.2</b>	<b>23.7</b>	<b>3.5</b>	<b>5.3</b>	<b>6.8</b>	<b>7.7</b>	<b>8.8</b>
Under Size 25, Coverage through current employer	15.1	15.1	14.8	14.3	0.6	0.3	0.0	0.0	0.0
Under Size 25, Eligible not enrolled	7.0	5.9	3.0	2.3	0.8	0.6	1.0	1.2	1.1
Under Size 25, Employer offers, not eligible	6.1	5.2	2.0	1.6	0.5	1.1	0.9	1.2	1.0
Under Size 25, Employer doesn't offer	27.5	20.8	7.4	5.6	1.8	3.2	4.9	5.3	6.7

**Table 2A. Insurance Coverage of Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022 (in millions)**

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Size 25 through 99, Total</b>	<b>11.4</b>	<b>10.3</b>	<b>7.6</b>	<b>6.5</b>	<b>1.1</b>	<b>0.7</b>	<b>0.7</b>	<b>1.3</b>	<b>1.2</b>
Size 25 through 99, Coverage through current employer	5.2	5.2	5.2	4.7	0.5	*	0.0	0.0	0.0
Size 25 through 99, Eligible not enrolled	2.8	2.3	1.3	0.9	0.4	0.2	0.3	0.5	0.4
Size 25 through 99, Employer offers, not eligible	1.6	1.4	0.6	0.5	0.1	0.2	0.2	0.4	0.2
Size 25 through 99, Employer doesn't offer	1.9	1.4	0.5	0.4	0.1	0.2	0.3	0.5	0.5
<b>Size 100 through 499, Total</b>	<b>19.5</b>	<b>18.4</b>	<b>15.1</b>	<b>12.7</b>	<b>2.3</b>	<b>0.9</b>	<b>0.7</b>	<b>1.8</b>	<b>1.1</b>
Size 100 through 499, Coverage through current	11.2	11.2	11.2	9.9	1.3	*	0.0	0.0	0.0
Size 100 through 499, Eligible not enrolled	4.8	4.2	2.6	1.9	0.7	0.5	0.3	0.9	0.6
Size 100 through 499, Employer offers, not eligible	2.1	1.9	0.9	0.7	0.2	0.3	0.2	0.5	0.2
Size 100 through 499, Employer doesn't offer	1.4	1.1	0.4	0.3	0.1	0.1	0.2	0.4	0.3

**Table 2A. Insurance Coverage of Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022 (in millions)**

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Size 500 or more, Total</b>	<b>84.3</b>	<b>79.8</b>	<b>66.4</b>	<b>49.2</b>	<b>17.3</b>	<b>3.2</b>	<b>2.5</b>	<b>7.6</b>	<b>4.5</b>
Size 500 or more, Coverage through current employer	50.8	50.8	50.8	37.9	12.9	*	0.0	0.0	0.0
Size 500 or more, Eligible not enrolled	19.5	17.2	10.1	7.2	3.0	1.6	1.2	4.4	2.3
Size 500 or more, Employer offers, not eligible	9.1	7.9	3.9	2.8	1.1	1.3	0.7	2.0	1.2
Size 500 or more, Employer doesn't offer	4.8	3.8	1.6	1.2	0.4	0.3	0.6	1.3	1.0

NOTE: Workers are defined as any person age 15 and up who worked at all during the calendar year.

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private insurance (OPHI), other public coverage, and uninsured.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column. Therefore, one may have "Coverage through current employer" and yet appear in the Medicare column rather than in the ESI column.

<sup>2/</sup> Sector represents sector of coverage; private sector includes the self-employed.

<sup>3/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>4/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>5/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

<sup>6/</sup> State and Federal workers have been recoded to the largest firm size (Tool variable EMPSIZE).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 2B. Insurance Coverage of Full-Time Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022**  
 (numbers in millions)

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>All Sizes, Total</b>	<b>139.8</b>	<b>127.4</b>	<b>101.7</b>	<b>80.7</b>	<b>21.0</b>	<b>5.2</b>	<b>7.8</b>	<b>12.7</b>	<b>12.4</b>
All Sizes, Coverage through current employer	77.9	77.9	77.7	63.3	14.4	0.2	0.0	0.0	0.0
All Sizes, Eligible not enrolled	28.8	24.9	14.6	10.4	4.2	2.2	2.3	5.8	3.9
All Sizes, Employer offers, not eligible	9.3	7.6	3.5	2.5	1.0	1.0	1.1	2.0	1.7
All Sizes, Employer doesn't offer	23.8	17.0	5.8	4.5	1.4	1.8	4.5	4.8	6.8
<b>Under Size 25, Total</b>	<b>41.3</b>	<b>34.3</b>	<b>21.5</b>	<b>19.0</b>	<b>2.5</b>	<b>2.5</b>	<b>5.1</b>	<b>5.1</b>	<b>7.0</b>
Under Size 25, Coverage through current employer	13.7	13.7	13.6	13.0	0.5	0.2	0.0	0.0	0.0
Under Size 25, Eligible not enrolled	5.9	5.0	2.5	1.9	0.7	0.5	0.9	1.1	1.0
Under Size 25, Employer offers, not eligible	2.9	2.3	0.9	0.7	0.2	0.3	0.5	0.5	0.6
Under Size 25, Employer doesn't offer	18.7	13.3	4.5	3.5	1.1	1.5	3.7	3.5	5.4

**Table 2B. Insurance Coverage of Full-Time Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022**  
 (numbers in millions)

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Size 25 through 99, Total</b>	<b>9.6</b>	<b>8.6</b>	<b>6.7</b>	<b>5.8</b>	<b>0.9</b>	<b>0.4</b>	<b>0.6</b>	<b>0.9</b>	<b>1.0</b>
Size 25 through 99, Coverage through current employer	4.9	4.9	4.9	4.5	0.4	*	0.0	0.0	0.0
Size 25 through 99, Eligible not enrolled	2.4	2.0	1.2	0.8	0.3	0.2	0.3	0.4	0.4
Size 25 through 99, Employer offers, not eligible	0.8	0.7	0.3	0.2	0.1	0.1	0.1	0.2	0.2
Size 25 through 99, Employer doesn't offer	1.4	0.9	0.3	0.2	0.1	0.1	0.2	0.3	0.5
<b>Size 100 through 499, Total</b>	<b>17.2</b>	<b>16.2</b>	<b>13.8</b>	<b>11.7</b>	<b>2.1</b>	<b>0.6</b>	<b>0.5</b>	<b>1.3</b>	<b>1.0</b>
Size 100 through 499, Coverage through current	10.8	10.8	10.8	9.6	1.3	*	0.0	0.0	0.0
Size 100 through 499, Eligible not enrolled	4.2	3.6	2.3	1.7	0.7	0.4	0.2	0.7	0.5
Size 100 through 499, Employer offers, not eligible	1.2	1.0	0.4	0.3	0.1	0.1	0.1	0.3	0.2
Size 100 through 499, Employer doesn't offer	1.0	0.8	0.3	0.2	0.1	*	0.2	0.3	0.3

**Table 2B. Insurance Coverage of Full-Time Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022**  
 (numbers in millions)

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Size 500 or more, Total</b>	<b>71.8</b>	<b>68.3</b>	<b>59.7</b>	<b>44.2</b>	<b>15.5</b>	<b>1.7</b>	<b>1.6</b>	<b>5.3</b>	<b>3.5</b>
Size 500 or more, Coverage through current employer	48.4	48.4	48.4	36.2	12.2	*	0.0	0.0	0.0
Size 500 or more, Eligible not enrolled	16.3	14.3	8.6	6.1	2.6	1.2	0.9	3.6	2.0
Size 500 or more, Employer offers, not eligible	4.3	3.6	1.9	1.3	0.6	0.4	0.3	1.0	0.7
Size 500 or more, Employer doesn't offer	2.7	2.0	0.7	0.6	0.2	0.1	0.4	0.7	0.8

NOTE: Full time workers are defined as any person age 15 and up who worked at all during the calendar year, where hours at longest job held were 35 or greater.

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private insurance (OPHI), other public coverage, and uninsured.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column. Therefore, one may have "Coverage through current employer" and yet appear in the Medicare column rather than in the ESI column.

<sup>2/</sup> Sector represents sector of coverage; private sector includes the self-employed.

<sup>3/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>4/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>5/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

<sup>6/</sup> State and Federal workers have been recoded to the largest firm size (Tool variable EMPSIZE).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 2C. Insurance Coverage of Part-Time Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022**  
 (numbers in millions)

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>All Sizes, Total</b>	<b>31.1</b>	<b>28.0</b>	<b>14.6</b>	<b>11.3</b>	<b>3.3</b>	<b>4.8</b>	<b>2.8</b>	<b>5.8</b>	<b>3.1</b>
All Sizes, Coverage through current employer	4.5	4.5	4.3	3.5	0.8	0.2	0.0	0.0	0.0
All Sizes, Eligible not enrolled	5.2	4.7	2.4	1.8	0.6	0.7	0.4	1.1	0.5
All Sizes, Employer offers, not eligible	9.6	8.7	3.9	3.0	0.9	1.9	0.9	2.0	0.9
All Sizes, Employer doesn't offer	11.9	10.1	4.0	3.0	1.0	2.1	1.4	2.6	1.8
<b>Under Size 25, Total</b>	<b>14.4</b>	<b>12.6</b>	<b>5.7</b>	<b>4.6</b>	<b>1.0</b>	<b>2.8</b>	<b>1.6</b>	<b>2.6</b>	<b>1.8</b>
Under Size 25, Coverage through current employer	1.4	1.4	1.3	1.2	*	0.1	0.0	0.0	0.0
Under Size 25, Eligible not enrolled	1.0	0.9	0.5	0.4	0.1	0.1	0.1	0.2	0.1
Under Size 25, Employer offers, not eligible	3.2	2.8	1.1	0.9	0.2	0.8	0.4	0.6	0.3
Under Size 25, Employer doesn't offer	8.8	7.5	2.8	2.1	0.7	1.7	1.2	1.8	1.4

**Table 2C. Insurance Coverage of Part-Time Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022**  
 (numbers in millions)

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Size 25 through 99, Total</b>	<b>1.8</b>	<b>1.7</b>	<b>0.9</b>	<b>0.7</b>	<b>0.2</b>	<b>0.3</b>	<b>0.1</b>	<b>0.4</b>	<b>0.2</b>
Size 25 through 99, Coverage through current employer	0.3	0.3	0.2	0.2	*	*	0.0	0.0	0.0
Size 25 through 99, Eligible not enrolled	0.3	0.3	0.2	0.1	0.1	*	*	0.1	*
Size 25 through 99, Employer offers, not eligible	0.7	0.7	0.3	0.3	0.1	0.1	*	0.2	*
Size 25 through 99, Employer doesn't offer	0.5	0.5	0.2	0.1	0.1	0.1	*	0.2	0.1
<b>Size 100 through 499, Total</b>	<b>2.4</b>	<b>2.2</b>	<b>1.2</b>	<b>1.0</b>	<b>0.2</b>	<b>0.3</b>	<b>0.2</b>	<b>0.5</b>	<b>0.2</b>
Size 100 through 499, Coverage through current	0.4	0.4	0.4	0.3	0.1	*	0.0	0.0	0.0
Size 100 through 499, Eligible not enrolled	0.6	0.6	0.3	0.2	0.1	0.1	0.1	0.1	*
Size 100 through 499, Employer offers, not eligible	0.9	0.9	0.4	0.4	0.1	0.2	0.1	0.2	0.1
Size 100 through 499, Employer doesn't offer	0.4	0.4	0.1	0.1	*	0.1	*	0.1	0.1

**Table 2C. Insurance Coverage of Part-Time Workers from Primary Source, by Employer Offers of Health Insurance and Employer Size: CY 2022**  
 (numbers in millions)

Employer Size <sup>6</sup> and Offer Status	Total Workers	Insured workers	Workers with ESI <sup>1</sup>	Workers with ESI, Private Sector <sup>2</sup>	Workers with ESI, Public Sector <sup>2</sup>	Workers with Medicare	Workers with Other Private Insurance <sup>3</sup>	With Other Public Coverage <sup>4</sup>	Uninsured <sup>5</sup>
<b>Size 500 or more, Total</b>	<b>12.5</b>	<b>11.5</b>	<b>6.8</b>	<b>5.0</b>	<b>1.8</b>	<b>1.4</b>	<b>0.9</b>	<b>2.4</b>	<b>1.0</b>
Size 500 or more, Coverage through current employer	2.4	2.4	2.4	1.8	0.6	0.0	0.0	0.0	0.0
Size 500 or more, Eligible not enrolled	3.2	2.9	1.5	1.1	0.4	0.4	0.3	0.8	0.3
Size 500 or more, Employer offers, not eligible	4.7	4.3	2.0	1.5	0.6	0.8	0.4	1.0	0.5
Size 500 or more, Employer doesn't offer	2.1	1.8	0.8	0.6	0.2	0.2	0.2	0.6	0.3

NOTE: Part time workers are defined as any person age 15 and up who worked at all during the calendar year, where hours at longest job held were under 35.

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private insurance (OPHI), other public coverage, and uninsured.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer, are counted only in the Medicare column. Therefore, one may have "Coverage through current employer" and yet appear in the Medicare column rather than in the ESI column.

<sup>2/</sup> Sector represents sector of coverage; private sector includes the self-employed.

<sup>3/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>4/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans', and military coverage.

<sup>5/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

<sup>6/</sup> State and Federal workers have been recoded to the largest firm size (Tool variable EMPSIZE).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3A. All Persons with Employer-Sponsored Insurance, by State, Funding Status, and Sector Providing Coverage: CY 2022**  
 (numbers in millions)

State	Total ESI	Private Sector, Total	Private Sector, Self-Insured <sup>2</sup>	Private Sector, Fully Insured	Public Sector, Total	Public Sector, Self-Insured	Public Sector, Fully Insured
<b>Total USA</b>	<b>179.8</b>	<b>135.5</b>	<b>78.9</b>	<b>56.6</b>	<b>44.3</b>	<b>22.8</b>	<b>21.5</b>
Alabama	2.9	2.2	1.3	0.8	0.7	0.4	0.2
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.8	3.0	1.7	1.3	0.7	0.3	0.4
Arkansas	1.4	1.0	0.6	0.4	0.4	0.3	0.1
California	20.0	14.9	6.2	8.8	5.1	1.9	3.2
Colorado	3.3	2.6	1.5	1.1	0.7	0.4	0.3
Connecticut	2.1	1.5	0.8	0.7	0.5	0.3	0.2
Delaware	0.6	0.4	0.3	0.2	0.2	0.1	*
DC	0.4	0.3	0.1	0.1	0.2	*	0.1
Florida	10.1	7.7	4.4	3.3	2.4	1.3	1.0
Georgia	5.5	4.2	2.6	1.6	1.4	0.9	0.5
Hawaii	0.9	0.6	0.2	0.4	0.3	0.1	0.2
Idaho	1.1	0.8	0.5	0.3	0.3	0.1	0.2
Illinois	7.5	6.1	3.5	2.6	1.4	0.7	0.7
Indiana	3.8	3.0	2.0	1.1	0.8	0.4	0.3
Iowa	1.9	1.5	0.9	0.6	0.4	0.2	0.2
Kansas	1.7	1.3	0.9	0.4	0.4	0.2	0.2
Kentucky	2.2	1.5	1.0	0.5	0.6	0.4	0.2
Louisiana	2.2	1.6	0.8	0.7	0.6	0.4	0.3
Maine	0.7	0.6	0.3	0.3	0.2	0.1	0.1
Maryland	3.9	2.4	1.4	1.0	1.5	0.7	0.8
Massachusetts	4.2	3.3	2.0	1.3	0.9	0.6	0.4

**Table 3A. All Persons with Employer-Sponsored Insurance, by State, Funding Status, and Sector Providing Coverage: CY 2022**  
 (numbers in millions)

State	Total ESI	Private Sector, Total	Private Sector, Self-Insured <sup>2</sup>	Private Sector, Fully Insured	Public Sector, Total	Public Sector, Self-Insured	Public Sector, Fully Insured
Michigan	6.3	5.0	2.8	2.2	1.3	0.7	0.6
Minnesota	3.4	2.7	1.8	0.8	0.7	0.4	0.3
Mississippi	1.4	1.0	0.6	0.4	0.4	0.2	0.1
Missouri	3.4	2.7	1.6	1.1	0.7	0.3	0.4
Montana	0.6	0.4	0.2	0.2	0.2	0.1	0.1
Nebraska	1.1	0.9	0.6	0.3	0.2	0.1	0.1
Nevada	1.7	1.2	0.6	0.6	0.4	0.2	0.2
New Hampshire	0.9	0.7	0.4	0.3	0.2	0.1	0.1
New Jersey	5.6	4.3	2.6	1.6	1.3	0.6	0.8
New Mexico	0.8	0.5	0.3	0.2	0.3	0.1	0.2
New York	10.3	7.2	4.1	3.0	3.1	1.6	1.5
North Carolina	5.4	4.1	2.6	1.5	1.3	0.9	0.4
North Dakota	0.5	0.4	0.2	0.2	0.1	0.1	0.1
Ohio	6.6	4.9	3.4	1.5	1.7	1.0	0.7
Oklahoma	2.0	1.4	0.8	0.6	0.6	0.3	0.3
Oregon	2.3	1.7	0.9	0.8	0.6	0.2	0.4
Pennsylvania	7.6	5.9	3.4	2.5	1.8	0.8	0.9
Rhode Island	0.6	0.5	0.3	0.2	0.1	0.1	0.1
South Carolina	2.6	2.0	1.2	0.8	0.7	0.4	0.2
South Dakota	0.5	0.4	0.3	0.2	0.1	0.1	*
Tennessee	3.7	2.7	1.7	1.1	1.0	0.6	0.4
Texas	15.0	11.8	7.4	4.4	3.1	1.9	1.3
Utah	2.2	1.7	0.9	0.8	0.5	0.2	0.3

**Table 3A. All Persons with Employer-Sponsored Insurance, by State, Funding Status, and Sector Providing Coverage: CY 2022**  
 (numbers in millions)

State	Total ESI	Private Sector, Total <sup>1</sup>	Private Sector, Self-Insured <sup>2</sup>	Private Sector, Fully Insured	Public Sector, Total	Public Sector, Self-Insured	Public Sector, Fully Insured
Vermont	0.4	0.3	0.2	0.1	0.1	0.1	*
Virginia	5.0	3.6	2.3	1.2	1.4	0.6	0.8
Washington	4.6	3.4	2.1	1.3	1.2	0.4	0.8
West Virginia	0.9	0.6	0.4	0.2	0.3	0.2	0.1
Wisconsin	3.5	2.7	1.5	1.1	0.8	0.5	0.4
Wyoming	0.3	0.2	0.1	0.1	0.1	0.1	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1</sup>/ Private sector includes the self-employed.

<sup>2</sup>/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2023.

<https://www.dol.gov/sites/dolgov/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3B. All Persons with Employer-Sponsored Insurance, by Size, Funding Status and Sector Providing Coverage: CY 2022 (numbers in millions)**

Employer Size <sup>1</sup>	Total ESI	Total ESI, Self- Insured	Total ESI, Fully Insured	Private Sector, <sup>2</sup> Total	Private Sector, Self- Insured <sup>3</sup>	Private Sector, Fully Insured	Public Sector, Total	Public Sector, Self- Insured	Public Sector, Fully Insured
<b>Total</b>	<b>179.8</b>	<b>101.7</b>	<b>78.1</b>	<b>135.5</b>	<b>78.9</b>	<b>56.6</b>	<b>44.3</b>	<b>22.8</b>	<b>21.5</b>
Less than 10 Employees	12.3	2.2	10.1	12.0	2.2	9.9	0.3	0.1	0.2
10 through 24 Employees	15.7	1.8	13.9	14.8	1.7	13.1	0.9	0.1	0.8
25 through 99 Employees	10.0	2.0	8.0	8.8	1.7	7.1	1.2	0.2	0.9
100 through 499 Employees	22.5	10.2	12.4	19.2	8.7	10.5	3.4	1.5	1.8
500 through 999 Employees	12.9	6.6	6.3	10.1	5.4	4.7	2.8	1.3	1.5
1000 or more Employees	106.4	78.9	27.5	70.6	59.3	11.4	35.7	19.6	16.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Size of employer providing ESI (NEWSIZE).

<sup>2/</sup> Private sector includes the self-employed.

<sup>3/</sup> Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2023.

<https://www.dol.gov/sites/dolgov/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3C. All Persons with Employer-Sponsored Insurance, by State, Policyholder Status and Sector Providing Coverage: CY 2022 (in millions)**

State	Total ESI	Private Sector, Total	Private Sector, Policyholders	Private Sector, Dependents <sup>2</sup>	Public Sector, Total	Public Sector, Policyholders	Public Sector, Dependents
<b>Total USA</b>	<b>179.8</b>	<b>135.5</b>	<b>72.0</b>	<b>63.5</b>	<b>44.3</b>	<b>23.9</b>	<b>20.3</b>
Alabama	2.9	2.2	1.2	1.0	0.7	0.4	0.3
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.8	3.0	1.6	1.4	0.7	0.4	0.3
Arkansas	1.4	1.0	0.6	0.5	0.4	0.2	0.2
California	20.0	14.9	8.2	6.7	5.1	2.7	2.4
Colorado	3.3	2.6	1.4	1.2	0.7	0.4	0.3
Connecticut	2.1	1.5	0.8	0.7	0.5	0.3	0.3
Delaware	0.6	0.4	0.2	0.2	0.2	0.1	0.1
DC	0.4	0.3	0.2	0.1	0.2	0.1	0.1
Florida	10.1	7.7	4.3	3.4	2.4	1.3	1.0
Georgia	5.5	4.2	2.3	1.9	1.4	0.7	0.7
Hawaii	0.9	0.6	0.4	0.2	0.3	0.2	0.1
Idaho	1.1	0.8	0.4	0.4	0.3	0.1	0.1
Illinois	7.5	6.1	3.1	2.9	1.4	0.8	0.6
Indiana	3.8	3.0	1.5	1.5	0.8	0.4	0.4
Iowa	1.9	1.5	0.7	0.8	0.4	0.2	0.2
Kansas	1.7	1.3	0.7	0.6	0.4	0.2	0.2
Kentucky	2.2	1.5	0.9	0.7	0.6	0.4	0.3
Louisiana	2.2	1.6	0.9	0.7	0.6	0.4	0.3
Maine	0.7	0.6	0.3	0.3	0.2	0.1	0.1
Maryland	3.9	2.4	1.3	1.1	1.5	0.7	0.8
Massachusetts	4.2	3.3	1.6	1.7	0.9	0.5	0.5

**Table 3C. All Persons with Employer-Sponsored Insurance, by State, Policyholder Status and Sector Providing Coverage: CY 2022 (in millions)**

State	Total ESI	Private Sector, Total	Private Sector, Policyholders	Private Sector, Dependents <sup>2</sup>	Public Sector, Total	Public Sector, Policyholders	Public Sector, Dependents
Michigan	6.3	5.0	2.5	2.5	1.3	0.7	0.6
Minnesota	3.4	2.7	1.3	1.4	0.7	0.4	0.4
Mississippi	1.4	1.0	0.6	0.4	0.4	0.2	0.1
Missouri	3.4	2.7	1.4	1.3	0.7	0.4	0.3
Montana	0.6	0.4	0.2	0.2	0.2	0.1	0.1
Nebraska	1.1	0.9	0.4	0.4	0.2	0.1	0.1
Nevada	1.7	1.2	0.7	0.6	0.4	0.2	0.2
New Hampshire	0.9	0.7	0.3	0.3	0.2	0.1	0.1
New Jersey	5.6	4.3	2.1	2.2	1.3	0.7	0.7
New Mexico	0.8	0.5	0.3	0.2	0.3	0.2	0.1
New York	10.3	7.2	4.1	3.1	3.1	1.6	1.5
North Carolina	5.4	4.1	2.4	1.7	1.3	0.8	0.4
North Dakota	0.5	0.4	0.2	0.2	0.1	0.1	0.1
Ohio	6.6	4.9	2.5	2.4	1.7	0.8	0.9
Oklahoma	2.0	1.4	0.7	0.6	0.6	0.4	0.3
Oregon	2.3	1.7	0.9	0.8	0.6	0.3	0.3
Pennsylvania	7.6	5.9	3.1	2.8	1.8	0.9	0.8
Rhode Island	0.6	0.5	0.2	0.2	0.1	0.1	0.1
South Carolina	2.6	2.0	1.1	0.9	0.7	0.4	0.3
South Dakota	0.5	0.4	0.2	0.2	0.1	*	*
Tennessee	3.7	2.7	1.5	1.3	1.0	0.5	0.5
Texas	15.0	11.8	6.3	5.5	3.1	1.9	1.3
Utah	2.2	1.7	0.7	1.0	0.5	0.2	0.3

**Table 3C. All Persons with Employer-Sponsored Insurance, by State, Policyholder Status and Sector Providing Coverage: CY 2022 (in millions)**

State	Total ESI	Private Sector, <sup>1</sup> Total	Private Sector, Policyholders	Private Sector, Dependents <sup>2</sup>	Public Sector, Total	Public Sector, Policyholders	Public Sector, Dependents
Vermont	0.4	0.3	0.1	0.1	0.1	*	0.1
Virginia	5.0	3.6	1.8	1.8	1.4	0.8	0.6
Washington	4.6	3.4	1.9	1.5	1.2	0.7	0.5
West Virginia	0.9	0.6	0.3	0.3	0.3	0.1	0.1
Wisconsin	3.5	2.7	1.3	1.3	0.8	0.4	0.5
Wyoming	0.3	0.2	0.1	0.1	0.1	0.1	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a \*\*.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Private sector includes the self-employed.

<sup>2/</sup> Dependents only include those who are not also policyholders.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 3D. All Persons with Employer-Sponsored Insurance, by State, Funding Status and Policyholder Status: CY 2022 (numbers in millions)**

State	Total ESI	Self-Insured, <sup>1</sup> Total	Self-Insured, Policyholders	Self-Insured, Dependents <sup>2</sup>	Fully Insured, Total	Fully Insured, Policyholders	Fully Insured, Dependents
<b>Total USA</b>	<b>179.8</b>	<b>101.7</b>	<b>53.8</b>	<b>47.9</b>	<b>78.1</b>	<b>42.2</b>	<b>35.9</b>
Alabama	2.9	1.8	0.9	0.8	1.1	0.6	0.5
Alaska	0.4	0.2	0.1	0.1	0.2	0.1	0.1
Arizona	3.8	2.1	1.1	1.0	1.7	0.9	0.7
Arkansas	1.4	0.9	0.5	0.4	0.5	0.3	0.2
California	20.0	8.1	4.3	3.8	11.9	6.6	5.3
Colorado	3.3	1.9	1.0	0.9	1.4	0.8	0.6
Connecticut	2.1	1.2	0.6	0.6	0.9	0.5	0.4
Delaware	0.6	0.4	0.2	0.2	0.2	0.1	0.1
DC	0.4	0.2	0.1	0.1	0.3	0.2	0.1
Florida	10.1	5.8	3.2	2.5	4.3	2.4	1.9
Georgia	5.5	3.5	1.9	1.6	2.0	1.1	0.9
Hawaii	0.9	0.3	0.2	0.1	0.6	0.3	0.2
Idaho	1.1	0.6	0.3	0.3	0.5	0.2	0.3
Illinois	7.5	4.2	2.1	2.1	3.3	1.8	1.5
Indiana	3.8	2.4	1.2	1.2	1.4	0.7	0.7
Iowa	1.9	1.1	0.5	0.6	0.8	0.4	0.4
Kansas	1.7	1.1	0.5	0.5	0.7	0.4	0.3
Kentucky	2.2	1.4	0.8	0.6	0.8	0.4	0.3
Louisiana	2.2	1.2	0.7	0.5	1.0	0.6	0.4
Maine	0.7	0.4	0.2	0.2	0.3	0.2	0.2
Maryland	3.9	2.1	1.1	1.0	1.9	0.9	0.9
Massachusetts	4.2	2.6	1.2	1.3	1.7	0.8	0.8

**Table 3D. All Persons with Employer-Sponsored Insurance, by State, Funding Status and Policyholder Status: CY 2022 (numbers in millions)**

State	Total ESI	Self-Insured, Total	Self-Insured, Policyholders	Self-Insured, Dependents <sup>2</sup>	Fully Insured, Total	Fully Insured, Policyholders	Fully Insured, Dependents
Michigan	6.3	3.5	1.8	1.7	2.8	1.4	1.3
Minnesota	3.4	2.3	1.1	1.2	1.1	0.6	0.5
Mississippi	1.4	0.8	0.5	0.4	0.5	0.3	0.2
Missouri	3.4	1.9	1.1	0.9	1.4	0.8	0.7
Montana	0.6	0.3	0.2	0.1	0.3	0.2	0.1
Nebraska	1.1	0.8	0.4	0.4	0.4	0.2	0.2
Nevada	1.7	0.8	0.5	0.4	0.8	0.5	0.4
New Hampshire	0.9	0.5	0.3	0.2	0.4	0.2	0.2
New Jersey	5.6	3.2	1.6	1.6	2.4	1.2	1.2
New Mexico	0.8	0.4	0.2	0.2	0.4	0.2	0.2
New York	10.3	5.7	3.2	2.5	4.6	2.6	2.0
North Carolina	5.4	3.5	2.1	1.4	1.9	1.1	0.8
North Dakota	0.5	0.3	0.1	0.1	0.2	0.1	0.1
Ohio	6.6	4.4	2.2	2.2	2.2	1.2	1.1
Oklahoma	2.0	1.1	0.6	0.5	0.9	0.5	0.4
Oregon	2.3	1.1	0.6	0.6	1.2	0.7	0.5
Pennsylvania	7.6	4.3	2.3	2.0	3.4	1.8	1.6
Rhode Island	0.6	0.3	0.2	0.2	0.3	0.1	0.1
South Carolina	2.6	1.7	0.9	0.7	1.0	0.6	0.4
South Dakota	0.5	0.3	0.1	0.2	0.2	0.1	0.1
Tennessee	3.7	2.3	1.2	1.1	1.5	0.8	0.7
Texas	15.0	9.3	5.0	4.3	5.7	3.2	2.5
Utah	2.2	1.1	0.5	0.6	1.0	0.4	0.6

**Table 3D. All Persons with Employer-Sponsored Insurance, by State, Funding Status and Policyholder Status: CY 2022 (numbers in millions)**

State	Total ESI	Self-Insured, <sup>1</sup> Total	Self-Insured, Policyholders	Self-Insured, Dependents <sup>2</sup>	Fully Insured, Total	Fully Insured, Policyholders	Fully Insured, Dependents
Vermont	0.4	0.2	0.1	0.1	0.1	0.1	0.1
Virginia	5.0	3.0	1.5	1.4	2.0	1.0	1.0
Washington	4.6	2.5	1.4	1.1	2.1	1.2	0.9
West Virginia	0.9	0.6	0.3	0.3	0.3	0.2	0.2
Wisconsin	3.5	2.0	1.0	1.0	1.5	0.7	0.7
Wyoming	0.3	0.2	0.1	0.1	0.1	0.1	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2023.

<https://www.dol.gov/sites/dolgov/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

<sup>2/</sup> Dependents only include those who are not also policyholders.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 4. All Persons with Employer-Sponsored Insurance by Policyholder Status, Sector, and Size of Employer Providing Coverage: CY 2022**  
 (numbers in millions)

Employer Size <sup>1</sup> , Sector <sup>2</sup> and Policyholder Status <sup>3</sup>	Total ESI	Current Employer	Former Employer, Total	Former Employer, COBRA	Former Employer, Retiree
<b>All Sizes, All Sectors, Total</b>	<b>179.8</b>	<b>159.4</b>	<b>20.3</b>	<b>4.2</b>	<b>16.1</b>
All Sizes, Private Sector, Total	135.5	127.8	7.7	3.7	4.0
All Sizes, Public Sector, Total	44.3	31.6	12.6	0.5	12.1
All Sizes, All Sectors, Policyholders	96.0	82.4	13.6	2.5	11.1
All Sizes, Private Sector, Policyholders	72.0	67.2	4.9	2.2	2.6
All Sizes, Public Sector, Policyholders	23.9	15.2	8.7	0.2	8.5
All Sizes, All Sectors, Dependents	83.8	77.0	6.7	1.7	5.0
All Sizes, Private Sector, Dependents	63.5	60.6	2.8	1.5	1.4
All Sizes, Public Sector, Dependents	20.3	16.4	3.9	0.3	3.6
<b>Under Size 25, All Sectors, Total</b>	<b>28.0</b>	<b>27.8</b>	<b>0.1</b>	*	<b>0.1</b>
Under Size 25, Private Sector, Total	26.8	26.7	0.1	*	0.1
Under Size 25, Public Sector, Total	1.2	1.2	*	*	*
Under Size 25, All Sectors, Policyholders	15.2	15.1	0.1	0.0	0.1
Under Size 25, Private Sector, Policyholders	14.7	14.6	0.1	0.0	0.1
Under Size 25, Public Sector, Policyholders	0.6	0.6	*	0.0	*
Under Size 25, All Sectors, Dependents	12.8	12.7	0.1	*	0.1
Under Size 25, Private Sector, Dependents	12.1	12.1	0.1	*	0.1
Under Size 25, Public Sector, Dependents	0.6	0.6	*	*	*

**Table 4. All Persons with Employer-Sponsored Insurance by Policyholder Status, Sector, and Size of Employer Providing Coverage: CY 2022**  
 (numbers in millions)

Employer Size <sup>1</sup> , Sector <sup>2</sup> and Policyholder Status <sup>3</sup>	Total ESI	Current Employer	Former Employer, Total	Former Employer, COBRA	Former Employer, Retiree
<b>Size 25 through 99, All Sectors, Total</b>	<b>10.0</b>	<b>9.5</b>	<b>0.5</b>	<b>0.3</b>	<b>0.3</b>
Size 25 through 99, Private Sector, Total	8.8	8.5	0.4	0.2	0.1
Size 25 through 99, Public Sector, Total	1.2	1.0	0.2	*	0.2
Size 25 through 99, All Sectors, Policyholders	5.5	5.2	0.3	0.2	0.2
Size 25 through 99, Private Sector, Policyholders	4.9	4.7	0.2	0.1	0.1
Size 25 through 99, Public Sector, Policyholders	0.6	0.5	0.1	*	0.1
Size 25 through 99, All Sectors, Dependents	4.5	4.3	0.2	0.1	0.1
Size 25 through 99, Private Sector, Dependents	3.9	3.7	0.1	0.1	*
Size 25 through 99, Public Sector, Dependents	0.6	0.5	*	*	*
<b>Size 100 through 499, All Sectors, Total</b>	<b>22.5</b>	<b>21.2</b>	<b>1.3</b>	<b>0.5</b>	<b>0.9</b>
Size 100 through 499, Private Sector, Total	19.2	18.3	0.8	0.5	0.4
Size 100 through 499, Public Sector, Total	3.4	2.8	0.5	*	0.5
Size 100 through 499, All Sectors, Policyholders	12.1	11.2	0.9	0.3	0.6
Size 100 through 499, Private Sector, Policyholders	10.4	9.9	0.5	0.3	0.2
Size 100 through 499, Public Sector, Policyholders	1.7	1.3	0.4	*	0.4
Size 100 through 499, All Sectors, Dependents	10.5	10.0	0.5	0.2	0.3
Size 100 through 499, Private Sector, Dependents	8.8	8.5	0.3	0.2	0.1
Size 100 through 499, Public Sector, Dependents	1.7	1.5	0.2	*	0.1

**Table 4. All Persons with Employer-Sponsored Insurance by Policyholder Status, Sector, and Size of Employer Providing Coverage: CY 2022**  
 (numbers in millions)

Employer Size <sup>1</sup> , Sector <sup>2</sup> and Policyholder Status <sup>3</sup>	Total ESI	Current Employer	Former Employer, Total	Former Employer, COBRA	Former Employer, Retiree
<b>Size 500 through 999, All Sectors, Total</b>	<b>12.9</b>	<b>10.9</b>	<b>2.0</b>	<b>0.8</b>	<b>1.2</b>
Size 500 through 999, Private Sector, Total	10.1	8.9	1.1	0.7	0.4
Size 500 through 999, Public Sector, Total	2.8	2.0	0.9	0.1	0.8
Size 500 through 999, All Sectors, Policyholders	6.8	5.5	1.4	0.5	0.9
Size 500 through 999, Private Sector, Policyholders	5.4	4.6	0.8	0.5	0.3
Size 500 through 999, Public Sector, Policyholders	1.5	0.9	0.6	*	0.6
Size 500 through 999, All Sectors, Dependents	6.1	5.4	0.6	0.3	0.4
Size 500 through 999, Private Sector, Dependents	4.7	4.3	0.4	0.3	0.1
Size 500 through 999, Public Sector, Dependents	1.4	1.1	0.3	*	0.2
<b>Size 1000 or more, All Sectors, Total</b>	<b>106.4</b>	<b>90.1</b>	<b>16.3</b>	<b>2.7</b>	<b>13.6</b>
Size 1000 or more, Private Sector, Total	70.6	65.4	5.3	2.3	3.0
Size 1000 or more, Public Sector, Total	35.7	24.7	11.0	0.4	10.6
Size 1000 or more, All Sectors, Policyholders	56.3	45.4	10.9	1.5	9.4
Size 1000 or more, Private Sector, Policyholders	36.7	33.4	3.3	1.3	2.0
Size 1000 or more, Public Sector, Policyholders	19.6	12.0	7.6	0.2	7.4
Size 1000 or more, All Sectors, Dependents	50.1	44.7	5.4	1.2	4.2
Size 1000 or more, Private Sector, Dependents	34.0	32.0	1.9	0.9	1.0
Size 1000 or more, Public Sector, Dependents	16.1	12.7	3.4	0.2	3.2

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Size of employer providing ESI (NEWSIZE).

<sup>2/</sup> Private sector includes the self-employed.

<sup>3/</sup> Dependents only include those who are not also policyholders.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 5A. All Persons with Employer-Sponsored Insurance by State and Plan Type (Private Sector Only): CY 2022 (numbers in millions)**

<b>State</b>	<b>Total ESI</b>	<b>Total Private<sup>1</sup></b>	<b>HMO<sup>2</sup></b>	<b>PPO<sup>3</sup></b>	<b>POS<sup>4</sup></b>	<b>HDED<sup>5</sup></b>
<b>Total USA</b>	<b>179.8</b>	<b>135.5</b>	<b>16.5</b>	<b>64.8</b>	<b>13.6</b>	<b>40.6</b>
Alabama	2.9	2.2	0.2	1.1	0.2	0.7
Alaska	0.4	0.2	*	0.1	*	*
Arizona	3.8	3.0	0.4	1.5	0.3	0.8
Arkansas	1.4	1.0	0.1	0.5	0.1	0.3
California	20.0	14.9	4.0	6.1	1.5	3.3
Colorado	3.3	2.6	0.3	1.3	0.2	0.8
Connecticut	2.1	1.5	0.2	0.7	0.1	0.4
Delaware	0.6	0.4	*	0.2	*	0.2
DC	0.4	0.3	*	0.1	*	0.1
Florida	10.1	7.7	1.0	3.5	0.8	2.4
Georgia	5.5	4.2	0.3	2.0	0.5	1.3
Hawaii	0.9	0.6	0.1	0.2	0.1	0.2
Idaho	1.1	0.8	*	0.4	0.1	0.3
Illinois	7.5	6.1	0.5	3.0	0.7	1.8
Indiana	3.8	3.0	0.2	1.9	0.3	0.7
Iowa	1.9	1.5	0.2	0.6	0.2	0.5
Kansas	1.7	1.3	0.1	0.7	0.1	0.4
Kentucky	2.2	1.5	0.1	0.8	0.2	0.4
Louisiana	2.2	1.6	0.1	0.7	0.2	0.6
Maine	0.7	0.6	0.1	0.2	0.1	0.2
Maryland	3.9	2.4	0.3	1.0	0.3	0.8
Massachusetts	4.2	3.3	0.4	1.6	0.2	1.1

**Table 5A. All Persons with Employer-Sponsored Insurance by State and Plan Type (Private Sector Only): CY 2022 (numbers in millions)**

State	Total ESI	Total Private <sup>1</sup>	HMO <sup>2</sup>	PPO <sup>3</sup>	POS <sup>4</sup>	HDED <sup>5</sup>
Michigan	6.3	5.0	0.8	2.4	0.5	1.3
Minnesota	3.4	2.7	0.2	1.2	0.2	1.1
Mississippi	1.4	1.0	0.1	0.5	0.1	0.3
Missouri	3.4	2.7	0.2	1.3	0.3	0.8
Montana	0.6	0.4	*	0.2	*	0.1
Nebraska	1.1	0.9	0.1	0.5	0.1	0.2
Nevada	1.7	1.2	0.2	0.6	0.1	0.3
New Hampshire	0.9	0.7	0.1	0.3	0.1	0.2
New Jersey	5.6	4.3	0.6	1.9	0.4	1.3
New Mexico	0.8	0.5	0.1	0.2	0.1	0.2
New York	10.3	7.2	0.8	3.7	0.8	1.9
North Carolina	5.4	4.1	0.3	2.1	0.4	1.3
North Dakota	0.5	0.4	*	0.1	*	0.2
Ohio	6.6	4.9	0.3	2.5	0.4	1.7
Oklahoma	2.0	1.4	0.1	0.7	0.2	0.4
Oregon	2.3	1.7	0.2	0.8	0.2	0.6
Pennsylvania	7.6	5.9	0.8	2.6	0.6	1.9
Rhode Island	0.6	0.5	0.1	0.2	*	0.2
South Carolina	2.6	2.0	0.1	1.0	0.2	0.7
South Dakota	0.5	0.4	*	0.2	*	0.2
Tennessee	3.7	2.7	0.3	1.5	0.3	0.7
Texas	15.0	11.8	1.3	5.6	1.1	3.8
Utah	2.2	1.7	0.3	0.8	0.2	0.4

**Table 5A. All Persons with Employer-Sponsored Insurance by State and Plan Type (Private Sector Only): CY 2022 (numbers in millions)**

State	Total ESI	Total Private <sup>1</sup>	HMO <sup>2</sup>	PPO <sup>3</sup>	POS <sup>4</sup>	HDED <sup>5</sup>
Vermont	0.4	0.3	*	0.1	*	0.1
Virginia	5.0	3.6	0.2	1.6	0.2	1.5
Washington	4.6	3.4	0.2	1.8	0.4	1.1
West Virginia	0.9	0.6	*	0.3	0.1	0.2
Wisconsin	3.5	2.7	0.4	1.4	0.3	0.5
Wyoming	0.3	0.2	*	0.1	*	0.1

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Private sector includes the self-employed.

<sup>2/</sup> HMO stands for Health Maintenance Organization.

<sup>3/</sup> PPO stands for Preferred Provider Organization.

<sup>4/</sup> POS stands for Point-of-Service plan.

<sup>5/</sup> HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 5B. All Persons with Employer-Sponsored Insurance by Sector and Size of Employer Providing Coverage, Funding, and Plan Type: CY 2022**  
 (numbers in millions)

Sector and Size <sup>1</sup>	Self-Insured, <sup>3</sup> Total	Self-Insured, HMO <sup>4</sup>	Self-Insured, PPO <sup>5</sup>	Self-Insured, POS <sup>6</sup>	Self-Insured, HDED <sup>7</sup>	Fully Insured, Total	Fully Insured, HMO	Fully Insured, PPO	Fully Insured, POS	Fully Insured, HDED	Total, Total	Total, HMO	Total, PPO	Total, POS	Total, HDED
<b>All Sectors, All Sizes</b>	<b>101.7</b>	<b>7.0</b>	<b>57.2</b>	<b>5.1</b>	<b>32.4</b>	<b>78.1</b>	<b>15.7</b>	<b>33.5</b>	<b>10.2</b>	<b>18.6</b>	<b>179.8</b>	<b>22.7</b>	<b>90.7</b>	<b>15.3</b>	<b>51.0</b>
All Sectors, Under Size 25	4.0	0.4	2.3	0.2	1.1	24.0	3.1	9.7	5.2	5.9	28.0	3.5	12.1	5.4	7.0
All Sectors, Size 25 through 99	2.0	0.2	1.1	0.1	0.6	8.0	1.0	3.4	1.6	2.0	10.0	1.1	4.6	1.7	2.6
All Sectors, Size 100 through 499	10.2	0.4	6.5	0.6	2.7	12.4	1.8	3.6	1.9	5.0	22.5	2.1	10.2	2.6	7.7
All Sectors, Size 500 through 999	6.6	0.2	4.4	0.3	1.8	6.3	0.8	2.1	0.9	2.5	12.9	1.0	6.5	1.1	4.3
All Sectors, Size 1000 or more	78.9	5.9	42.9	3.9	26.2	27.5	9.1	14.6	0.6	3.2	106.4	15.0	57.5	4.5	29.4
<b>Private Sector,<sup>2</sup> All Sizes</b>	<b>78.9</b>	<b>5.4</b>	<b>44.2</b>	<b>4.2</b>	<b>25.1</b>	<b>56.6</b>	<b>11.1</b>	<b>20.6</b>	<b>9.4</b>	<b>15.5</b>	<b>135.5</b>	<b>16.5</b>	<b>64.8</b>	<b>13.6</b>	<b>40.6</b>
Private Sector, Under Size 25	3.8	0.3	2.2	0.2	1.1	22.9	2.9	9.3	5.0	5.7	26.8	3.3	11.6	5.2	6.7
Private Sector, Size 25 through 99	1.7	0.2	1.0	0.1	0.5	7.1	0.9	2.9	1.5	1.8	8.8	1.0	3.9	1.6	2.3
Private Sector, Size 100 through 499	8.7	0.3	5.5	0.5	2.3	10.5	1.5	3.0	1.7	4.3	19.2	1.8	8.5	2.3	6.6
Private Sector, Size 500 through 999	5.4	0.2	3.5	0.2	1.4	4.7	0.6	1.5	0.7	1.8	10.1	0.8	5.1	1.0	3.3
Private Sector, Size 1000 or more	59.3	4.5	31.9	3.1	19.8	11.4	5.1	3.8	0.4	2.0	70.6	9.6	35.7	3.5	21.8

**Table 5B. All Persons with Employer-Sponsored Insurance by Sector and Size of Employer Providing Coverage, Funding, and Plan Type: CY 2022  
(numbers in millions)**

Sector and Size <sup>1</sup>	Self-Insured, <sup>3</sup> Total	Self-Insured, HMO <sup>4</sup>	Self-Insured, PPO <sup>5</sup>	Self-Insured, POS <sup>6</sup>	Self-Insured, HDED <sup>7</sup>	Fully Insured, Total	Fully Insured, HMO	Fully Insured, PPO	Fully Insured, POS	Fully Insured, HDED	Total, Total	Total, HMO	Total, PPO	Total, POS	Total, HDED
<b>Public Sector, All Sizes</b>	<b>22.8</b>	<b>1.5</b>	<b>13.0</b>	<b>0.9</b>	<b>7.3</b>	<b>21.5</b>	<b>4.6</b>	<b>12.9</b>	<b>0.8</b>	<b>3.1</b>	<b>44.3</b>	<b>6.2</b>	<b>26.0</b>	<b>1.7</b>	<b>10.4</b>
Public Sector, Under Size 25	0.1	*	0.1	*	*	1.1	0.2	0.4	0.2	0.3	1.2	0.2	0.5	0.2	0.3
Public Sector, Size 25 through 99	0.2	*	0.2	*	0.1	0.9	0.1	0.5	0.1	0.2	1.2	0.1	0.7	0.1	0.3
Public Sector, Size 100 through 499	1.5	0.1	1.0	0.1	0.4	1.8	0.2	0.6	0.2	0.7	3.4	0.3	1.6	0.3	1.1
Public Sector, Size 500 through 999	1.3	*	0.8	0.0	0.4	1.5	0.2	0.6	0.1	0.6	2.8	0.2	1.4	0.1	1.0
Public Sector, Size 1000 or more	19.6	1.4	11.0	0.8	6.5	16.1	3.9	10.8	0.1	1.2	35.7	5.3	21.8	0.9	7.7

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1</sup>/ Size of employer providing ESI (NEWSIZE).

<sup>2</sup>/ Private sector includes the self-employed.

<sup>3</sup>/ Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S.

Department of Labor, Employee Benefits Security Administration, September 2023. <https://www.dol.gov/sites/dolgov/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

<sup>4</sup>/ HMO stands for Health Maintenance Organization.

<sup>5</sup>/ PPO stands for Preferred Provider Organization.

<sup>6</sup>/ POS stands for Point-of-Service plan.

<sup>7</sup>/ HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 5C. All Persons with Employer-Sponsored Insurance by Sector, Funding, and Plan Type: CY 2022 (numbers in millions)**

Sector and Size	Self-Insured, <sup>2</sup> Total	Self-Insured, HMO <sup>3</sup>	Self-Insured, PPO <sup>4</sup>	Self-Insured, POS <sup>5</sup>	Self-Insured, HDDED <sup>6</sup>	Fully Insured, Total	Fully Insured, HMO	Fully Insured, PPO	Fully Insured, POS	Fully Insured, HDDED	Total, Total	Total, HMO	Total, PPO	Total, POS	Total, HDDED
<b>All Sectors, Total</b>	<b>101.7</b>	<b>7.0</b>	<b>57.2</b>	<b>5.1</b>	<b>32.4</b>	<b>78.1</b>	<b>15.7</b>	<b>33.5</b>	<b>10.2</b>	<b>18.6</b>	<b>179.8</b>	<b>22.7</b>	<b>90.7</b>	<b>15.3</b>	<b>51.0</b>
All Sectors, Policy Holders	53.8	3.6	30.4	2.7	17.1	42.2	8.3	18.2	5.6	10.0	96.0	12.0	48.6	8.3	27.1
All Sectors, Dependents	47.9	3.3	26.8	2.4	15.3	35.9	7.4	15.4	4.6	8.6	83.8	10.7	42.2	6.9	23.9
<b>Private Sector,<sup>1</sup> Total</b>	<b>78.9</b>	<b>5.4</b>	<b>44.2</b>	<b>4.2</b>	<b>25.1</b>	<b>56.6</b>	<b>11.1</b>	<b>20.6</b>	<b>9.4</b>	<b>15.5</b>	<b>135.5</b>	<b>16.5</b>	<b>64.8</b>	<b>13.6</b>	<b>40.6</b>
Private Sector, Policy Holders	41.4	2.8	23.3	2.2	13.0	30.7	5.9	11.2	5.2	8.4	72.0	8.7	34.5	7.4	21.4
Private Sector, Dependents	37.5	2.6	20.9	1.9	12.1	25.9	5.2	9.4	4.2	7.1	63.5	7.8	30.3	6.1	19.2
<b>State/Local, Total</b>	<b>22.8</b>	<b>1.5</b>	<b>13.0</b>	<b>0.9</b>	<b>7.3</b>	<b>11.5</b>	<b>3.1</b>	<b>4.6</b>	<b>0.8</b>	<b>3.1</b>	<b>34.3</b>	<b>4.6</b>	<b>17.6</b>	<b>1.7</b>	<b>10.4</b>
State/Local, Policyholders	12.4	0.8	7.1	0.5	4.1	6.1	1.6	2.4	0.4	1.6	18.5	2.4	9.5	0.9	5.7
State/Local, Dependents	10.4	0.7	6.0	0.4	3.2	5.4	1.4	2.1	0.4	1.5	15.8	2.2	8.1	0.8	4.7

**Table 5C. All Persons with Employer-Sponsored Insurance by Sector, Funding, and Plan Type: CY 2022 (numbers in millions)**

Sector and Size	Self-Insured, Total	Self-Insured, HMO <sup>3</sup>	Self-Insured, PPO <sup>4</sup>	Self-Insured, POS <sup>5</sup>	Self-Insured, HDED <sup>6</sup>	Fully Insured, Total	Fully Insured, HMO	Fully Insured, PPO	Fully Insured, POS	Fully Insured, HDED	Total, Total	Total, HMO	Total, PPO	Total, POS	Total, HDED
<b>Federal, Total</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>10.0</b>	<b>1.6</b>	<b>8.4</b>	<b>0.0</b>	<b>0.0</b>	<b>10.0</b>	<b>1.6</b>	<b>8.4</b>	<b>0.0</b>	<b>0.0</b>
Federal, Policyholders	0.0	0.0	0.0	0.0	0.0	5.4	0.8	4.6	0.0	0.0	5.4	0.8	4.6	0.0	0.0
Federal, Dependents	0.0	0.0	0.0	0.0	0.0	4.6	0.8	3.8	0.0	0.0	4.6	0.8	3.8	0.0	0.0

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Non-zero cells with under 50,000 persons are marked with a \*\*.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Private sector includes the self-employed.

<sup>2/</sup> Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S.

Department of Labor, Employee Benefits Security Administration, September 2023. <https://www.dol.gov/sites/dolgov/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

<sup>3/</sup> HMO stands for Health Maintenance Organization.

<sup>4/</sup> PPO stands for Preferred Provider Organization.

<sup>5/</sup> POS stands for Point-of-Service plan.

<sup>6/</sup> HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 6. Persons with Employer-Sponsored Insurance (excluding self-employed) by Sector of Employer Providing Coverage, Funding, and Union Membership: CY 2022 (numbers in millions)**

Union Status	Total ESI <sup>1</sup>	Private Sector, Total	Private Sector, Self-Insured	Private Sector, Fully Insured	Public Sector, Total	Public Sector, Self-Insured	Public Sector, Fully Insured
<b>Total ESI</b>	<b>173.5</b>	<b>129.2</b>	<b>77.5</b>	<b>51.7</b>	<b>44.3</b>	<b>22.8</b>	<b>21.5</b>
Total, Union	31.0	12.1	7.7	4.4	18.9	9.8	9.1
Total, Not Union	142.5	117.1	69.8	47.3	25.4	13.0	12.4
Current Employer, Total	153.2	121.5	72.3	49.2	31.6	16.7	15.0
Current Employer, Union	22.6	10.1	6.3	3.9	12.5	6.5	6.1
Current Employer, Not Union	130.5	111.4	66.0	45.4	19.1	10.2	8.9
Former Employer, COBRA, Total	4.2	3.7	2.4	1.3	0.5	0.2	0.3
Former Employer, COBRA, Union	1.0	0.6	0.4	0.2	0.3	0.1	0.2
Former Employer, COBRA, Not Union	3.2	3.1	2.0	1.1	0.2	0.1	0.1
Former Employer, Retiree, Total	16.1	4.0	2.9	1.1	12.1	5.9	6.2
Former Employer, Retiree, Union	7.4	1.4	1.0	0.3	6.0	3.2	2.8
Former Employer, Retiree, Not Union	8.7	2.6	1.9	0.8	6.1	2.7	3.4

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> For this table only, the ESI population excludes those whose only source of ESI is self-employment. NEWSECTOR2 may be used for persons that are both ESI policyholders and dependents when NEWSECTOR status is self-employed.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 7. Average Actuarial Values for Active ESI Policyholders by Sector of Employer Providing Coverage, Funding and Plan Type: CY 2022**

Sector and Plan Type	Self-Insured <sup>2</sup> Policyholders (in millions)	Self-Insured Average AV	Fully Insured Policyholders (in millions)	Fully Insured Average AV	Total Policyholders (in millions)	Total Average AV
<b>Private Sector,<sup>1</sup> Total</b>	<b>38.0</b>	<b>0.863</b>	<b>29.2</b>	<b>0.853</b>	<b>67.2</b>	<b>0.859</b>
Private Sector, HMO <sup>3</sup>	2.6	0.882	5.5	0.891	8.1	0.888
Private Sector, PPO <sup>4</sup>	21.4	0.875	10.7	0.860	32.1	0.870
Private Sector, POS <sup>5</sup>	2.1	0.875	5.0	0.840	7.1	0.850
Private Sector, HDED <sup>6</sup>	11.9	0.834	8.0	0.827	19.9	0.831
<b>Public Sector, Total</b>	<b>8.1</b>	<b>0.875</b>	<b>7.1</b>	<b>0.874</b>	<b>15.2</b>	<b>0.874</b>
Public Sector, HMO	0.5	0.958	1.6	0.949	2.1	0.951
Public Sector, PPO	4.6	0.887	4.1	0.861	8.7	0.875
Public Sector, POS	0.3	0.905	0.3	0.862	0.6	0.883
Public Sector, HDED	2.7	0.835	1.1	0.819	3.8	0.830

NOTE: Active Employer Sponsored Insurance (ESI) Policyholders are those with coverage in own name from a current employer.

NOTE: Actuarial values represent "average plan richness": the share of covered expenses paid by the plan for claims incurred by an average population.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Private sector includes the self-employed.

<sup>2/</sup> Self-insured includes persons covered by plans reported to be partly or completely self-insured. This differs in concept from the estimates in the Group Health Plans Report by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500. See Group Health Plans Report: Abstract of 2021 Form 5500 Annual Reports, U.S. Department of Labor, Employee Benefits Security Administration, September 2023.

<https://www.dol.gov/sites/dolgov/files/EBSA/researchers/statistics/retirement-bulletins/annual-report-on-self-insured-group-health-plans-2024-appendix-a.pdf>.

<sup>3/</sup> HMO stands for Health Maintenance Organization.

<sup>4/</sup> PPO stands for Preferred Provider Organization.

<sup>5/</sup> POS stands for Point-of-Service plan.

<sup>6/</sup> HDED stands for high deductible health plans (which includes but is not limited to IRS qualified HDHP plans).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 8. Persons with Employer-Sponsored Insurance, by Funding Status, for Smaller (<200) Firms:<sup>1</sup> CY 2022 (numbers in millions)**

Funding Status	Level-Funded	Not Level-Funded	Total
Self-Insured	4.1	4.6	8.6
Fully Insured	11.5	25.7	37.2
<b>Total</b>	<b>15.5</b>	<b>30.3</b>	<b>45.8</b>

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1</sup>/ Size of employer providing ESI (NEWSIZE\_200 includes an imputed size break at 200).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 9. Persons with Employer-Sponsored Insurance, by Funding Status, Size, and Sector Providing Coverage: CY 2022 (numbers in millions)**

	Private Sector, Self- or Level- Funded	Private Sector, Fully Funded	Public Sector, Self- or Level- Funded	Public Sector, Fully Funded	All Sectors, Self- or Level- Funded	All Sectors, Fully Funded
<b>All Sizes<sup>1</sup></b>	<b>89.4</b>	<b>46.1</b>	<b>23.7</b>	<b>20.5</b>	<b>113.2</b>	<b>66.6</b>
Under Size 25	11.0	15.8	0.4	0.8	11.5	16.5
Size 25 through 99	3.8	5.0	0.6	0.6	4.4	5.6
Size 100 through 199	3.7	3.2	0.5	0.4	4.2	3.6
Size 199 through 499	6.3	6.1	1.2	1.1	7.5	7.2
Size 500 through 999	5.4	4.7	1.3	1.5	6.6	6.3
Size 1000 or more	59.3	11.4	19.6	16.1	78.9	27.5

NOTE: Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents.

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup>Size of employer providing ESI (NEWSIZE\_200 includes an imputed size break at 200).

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 10A. Mean Out-of-Pocket Spending by Age, Insurance and Plan Type: CY 2022**

Age	Total Population	Total Insured	ESI <sup>1</sup> Policyholders	ESI Dependents	Medicare	Other Private Insurance <sup>2</sup> Policyholders	Other Private Insurance Dependents	Other Public Coverage <sup>3</sup>	Uninsured <sup>4</sup>
<b>All Ages, Population (millions)</b>	<b>330.0</b>	<b>304.0</b>	<b>89.0</b>	<b>81.6</b>	<b>59.0</b>	<b>11.2</b>	<b>7.2</b>	<b>56.0</b>	<b>25.9</b>
All Ages, % Distribution	100%	92%	27%	25%	18%	3%	2%	17%	8%
All Ages, OOP \$	\$896.61	\$931.40	\$1,235.47	\$809.06	\$1,229.47	\$1,424.37	\$836.76	\$225.91	\$488.81
<b>Under Age 18, Population (millions)</b>	<b>71.8</b>	<b>68.1</b>	<b>0.1</b>	<b>39.3</b>	<b>0.4</b>	<b>0.1</b>	<b>3.4</b>	<b>24.8</b>	<b>3.7</b>
Under Age 18, % Distribution	100%	95%	0%	55%	1%	0%	5%	35%	5%
Under Age 18, OOP \$	\$367.66	\$366.77	\$582.02	\$526.94	\$69.55	\$720.46	\$407.58	\$110.89	\$383.83
<b>Ages 18 through 25, Population (millions)</b>	<b>34.8</b>	<b>30.2</b>	<b>6.1</b>	<b>14.3</b>	<b>0.4</b>	<b>1.2</b>	<b>1.3</b>	<b>6.9</b>	<b>4.6</b>
Ages 18 through 25, % Distribution	100%	87%	17%	41%	1%	3%	4%	20%	13%
Ages 18 through 25, OOP \$	\$576.34	\$606.39	\$725.82	\$750.43	\$667.25	\$687.61	\$603.47	\$187.33	\$379.14
<b>Ages 26 through 54, Population (millions)</b>	<b>124.1</b>	<b>110.2</b>	<b>60.8</b>	<b>20.3</b>	<b>2.9</b>	<b>6.2</b>	<b>1.7</b>	<b>18.3</b>	<b>13.9</b>
Ages 26 through 54, % Distribution	100%	89%	49%	16%	2%	5%	1%	15%	11%
Ages 26 through 54, OOP \$	\$974.10	\$1,029.58	\$1,172.45	\$1,135.28	\$988.02	\$1,251.11	\$1,500.51	\$327.89	\$532.64

**Table 10A. Mean Out-of-Pocket Spending by Age, Insurance and Plan Type: CY 2022**

Age	Total Population	Total Insured	ESI <sup>1</sup> Policyholders	ESI Dependents	Medicare	Other Private Insurance <sup>2</sup> Policyholders	Other Private Insurance Dependents	Other Public Coverage <sup>3</sup>	Uninsured <sup>4</sup>
<b>Ages 55 through 64, Population (millions)</b>	<b>41.4</b>	<b>38.3</b>	<b>18.5</b>	<b>6.5</b>	<b>3.2</b>	<b>3.5</b>	<b>0.8</b>	<b>5.7</b>	<b>3.1</b>
Ages 55 through 64, % Distribution	100%	92%	45%	16%	8%	8%	2%	14%	8%
Ages 55 through 64, OOP \$	\$1,299.28	\$1,355.12	\$1,501.89	\$1,431.63	\$1,226.41	\$1,996.36	\$1,591.06	\$443.35	\$612.95
<b>Ages 65 and over, Population (millions)</b>	<b>57.9</b>	<b>57.2</b>	<b>3.5</b>	<b>1.2</b>	<b>52.1</b>	<b>0.3</b>	<b>0.1</b>	<b>0.1</b>	<b>0.6</b>
Ages 65 and over, % Distribution	100%	99%	6%	2%	90%	0%	0%	0%	1%
Ages 65 and over, OOP \$	\$1,291.59	\$1,302.33	\$1,816.31	\$1,846.63	\$1,256.80	\$1,348.60	\$1,822.74	\$271.43	\$336.22

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured.

NOTE: Out of pocket spending does not include spending on premiums but does include spending on OTC health related items (OTC-VAL) and medical care equipment (PMED-VAL).

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer are counted only in the Medicare column.

<sup>2/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>3/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans' and military coverage.

<sup>4/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 10B. Mean Out-of-Pocket Spending by Persons with Spending >\$0 by Age, Insurance and Plan Type: CY 2022**

Age	Total Population	Total Insured	ESI <sup>1</sup> Policyholders	ESI Dependents	Medicare	Other Private Insurance <sup>2</sup> Policyholders	Other Private Insurance Dependents	Other Public Coverage <sup>3</sup>	Uninsured <sup>4</sup>
<b>All Ages, Population (millions)</b>	<b>269.3</b>	<b>252.2</b>	<b>82.1</b>	<b>68.1</b>	<b>51.4</b>	<b>9.8</b>	<b>5.6</b>	<b>35.0</b>	<b>17.1</b>
All Ages, % Distribution	100%	94%	31%	25%	19%	4%	2%	13%	6%
All Ages, OOP \$	\$1,098.71	\$1,122.95	\$1,338.81	\$969.45	\$1,410.60	\$1,623.21	\$1,071.90	\$361.07	\$741.34
<b>Under Age 18, Population (millions)</b>	<b>49.5</b>	<b>47.4</b>	<b>0.1</b>	<b>31.4</b>	<b>0.1</b>	<b>0.1</b>	<b>2.5</b>	<b>13.3</b>	<b>2.1</b>
Under Age 18, % Distribution	100%	96%	0%	63%	0%	0%	5%	27%	4%
Under Age 18, OOP \$	\$533.42	\$527.39	\$731.08	\$659.93	\$200.63	\$1,031.24	\$559.45	\$207.90	\$666.57
<b>Ages 18 through 25, Population (millions)</b>	<b>26.2</b>	<b>23.3</b>	<b>5.2</b>	<b>11.7</b>	<b>0.3</b>	<b>0.9</b>	<b>1.0</b>	<b>4.3</b>	<b>2.9</b>
Ages 18 through 25, % Distribution	100%	89%	20%	45%	1%	4%	4%	16%	11%
Ages 18 through 25, OOP \$	\$764.98	\$784.42	\$852.40	\$917.42	\$1,027.26	\$854.44	\$802.54	\$303.23	\$607.04
<b>Ages 26 through 54, Population (millions)</b>	<b>106.0</b>	<b>96.5</b>	<b>56.2</b>	<b>18.1</b>	<b>2.3</b>	<b>5.5</b>	<b>1.4</b>	<b>13.1</b>	<b>9.5</b>
Ages 26 through 54, % Distribution	100%	91%	53%	17%	2%	5%	1%	12%	9%
Ages 26 through 54, OOP \$	\$1,139.95	\$1,175.70	\$1,269.27	\$1,277.03	\$1,257.56	\$1,411.68	\$1,752.74	\$459.05	\$776.73

**Table 10B. Mean Out-of-Pocket Spending by Persons with Spending >\$0 by Age, Insurance and Plan Type: CY 2022**

Age	Total Population	Total Insured	ESI <sup>1</sup> Policyholders	ESI Dependents	Medicare	Other Private Insurance <sup>2</sup> Policyholders	Other Private Insurance Dependents	Other Public Coverage <sup>3</sup>	Uninsured <sup>4</sup>
<b>Ages 55 through 64, Population (millions)</b>	<b>36.3</b>	<b>34.1</b>	<b>17.5</b>	<b>5.9</b>	<b>2.6</b>	<b>3.1</b>	<b>0.7</b>	<b>4.3</b>	<b>2.2</b>
Ages 55 through 64, % Distribution	100%	94%	48%	16%	7%	9%	2%	12%	6%
Ages 55 through 64, OOP \$	\$1,482.19	\$1,521.17	\$1,594.46	\$1,587.66	\$1,487.01	\$2,234.81	\$1,795.85	\$591.72	\$873.79
<b>Ages 65 and over, Population (millions)</b>	<b>51.2</b>	<b>50.9</b>	<b>3.3</b>	<b>1.1</b>	<b>46.1</b>	<b>0.2</b>	<b>0.1</b>	<b>0.1</b>	<b>0.4</b>
Ages 65 and over, % Distribution	100%	99%	6%	2%	90%	0%	0%	0%	1%
Ages 65 and over, OOP \$	\$1,458.82	\$1,466.00	\$1,948.58	\$1,991.88	\$1,419.81	\$1,612.16	\$2,084.27	\$369.96	\$542.67

NOTE: Estimates in this table have persons assigned to a single source of insurance coverage based on the following hierarchy: Employer Sponsored Insurance (ESI), Medicare, other private health insurance (OPHI), other public coverage, and uninsured.

NOTE: Out of pocket spending does not include spending on premiums but does include spending on OTC health related items (POTC-VAL) and medical care equipment (PMED-VAL).

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Employer Sponsored Insurance (ESI) is defined to be any insurance provided by a current or former employer to workers and their dependents. Persons with ESI and Medicare, where Medicare is the primary payer are counted only in the Medicare column.

<sup>2/</sup> Other Private Insurance (OPHI) includes any other non-government health insurance including but not limited to individual private insurance.

<sup>3/</sup> Other Public Coverage includes but is not limited to Medicaid, the Children's Health Insurance Program (CHIP), Tricare, veterans' and military coverage.

<sup>4/</sup> Persons who do not report any insurance coverage are assumed to be uninsured for the entire year.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 11A. Point-in-Time versus Ever Insured by Age: CY 2022 vs. Date of Questionnaire (numbers in millions)**

<b>2022 Ever Insured by Age</b>	<b>2023 PIT (Date of Questionnaire) Insured</b>	<b>2023 PIT (Date of Questionnaire) Uninsured</b>	<b>2023 (Date of Questionnaire) Total</b>
<b>Total All Ages</b>	<b>304.1</b>	<b>26.5</b>	<b>330.6</b>
<b>Infants<sup>1</sup></b>	<b>0.6</b>	<b>0.1</b>	<b>0.7</b>
Total, Under Age 18	68.1	3.8	71.8
Total Ages 18 through 25	30.1	4.7	34.8
Total Ages 26 through 54	109.8	14.2	124.1
Total Ages 55 through 64	38.2	3.2	41.4
Total Ages 65 and Over	57.2	0.6	57.9
<b>Insured All Ages</b>	<b>301.5</b>	<b>2.5</b>	<b>304.0</b>
Insured, Under Age 18	67.6	0.5	68.1
Insured Ages 18 through 25	29.8	0.4	30.2
Insured Ages 26 through 54	108.9	1.3	110.2
Insured Ages 55 through 64	38.0	0.3	38.3
Insured Ages 65 and Over	57.2	*	57.2
<b>Full Year Uninsured All Ages</b>	<b>2.0</b>	<b>23.9</b>	<b>25.9</b>
Full Year Uninsured, Under Age 18	0.5	3.2	3.7
Full Year Uninsured Ages 18 through 25	0.3	4.3	4.6
Full Year Uninsured Ages 26 through 54	0.9	12.9	13.9
Full Year Uninsured Ages 55 through 64	0.2	2.9	3.1
Full Year Uninsured Ages 65 and Over	*	0.6	0.6

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Infants are those born in CY 2023 and are included in the PIT 2023 universe but are not assigned an insurance status for the prior year (2022). They are defined in the Tool data as those age 0 and with NEWWT\_LASTYR = 0.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 11B. Point-in-Time versus Ever Insured by State: CY 2022 vs. Date of Questionnaire (numbers in millions)**

State	2023 PIT Insured, 2022 Insured	2023 PIT Insured, 2022 Uninsured	2023 PIT Insured, 2022 No Status (Infant) <sup>1</sup>	2023 PIT Uninsured, 2022 Insured	2023 PIT Uninsured, 2022 Uninsured	2023 PIT Uninsured, 2022 No Status (Infant) <sup>1</sup>
<b>Total USA</b>	<b>301.5</b>	<b>2.0</b>	<b>0.6</b>	<b>2.5</b>	<b>23.9</b>	<b>0.1</b>
Alabama	4.5	*	*	*	0.4	0.0
Alaska	0.6	*	*	*	0.1	0.0
Arizona	6.4	0.1	*	0.1	0.7	0.0
Arkansas	2.8	*	*	*	0.2	0.0
California	36.1	0.2	0.1	0.2	2.2	0.0
Colorado	5.3	*	0.0	0.1	0.4	0.0
Connecticut	3.4	*	*	*	0.1	0.0
Delaware	1.0	*	*	*	0.1	0.0
DC	0.6	*	*	*	*	0.0
Florida	19.6	0.2	*	0.2	2.2	*
Georgia	9.4	0.1	*	0.1	1.3	0.0
Hawaii	1.4	*	*	*	*	0.0
Idaho	1.8	*	*	*	0.1	0.0
Illinois	11.4	0.1	*	0.1	0.8	0.0
Indiana	6.3	*	*	0.1	0.4	0.0
Iowa	3.0	*	*	*	0.1	0.0
Kansas	2.6	*	*	*	0.2	0.0
Kentucky	4.1	*	*	*	0.3	0.0
Louisiana	4.1	*	*	*	0.4	0.0
Maine	1.3	*	*	*	*	0.0
Maryland	5.7	*	*	0.1	0.5	0.0
Massachusetts	6.6	*	*	*	0.2	0.0

**Table 11B. Point-in-Time versus Ever Insured by State: CY 2022 vs. Date of Questionnaire (numbers in millions)**

State	2023 PIT Insured, 2022 Insured	2023 PIT Insured, 2022 Uninsured	2023 PIT Insured, 2022 No Status (Infant) <sup>1</sup>	2023 PIT Uninsured, 2022 Insured	2023 PIT Uninsured, 2022 Uninsured	2023 PIT Uninsured, 2022 No Status (Infant) <sup>1</sup>
Michigan	9.6	*	*	0.1	0.3	*
Minnesota	5.4	*	*	*	0.1	*
Mississippi	2.6	*	*	*	0.3	0.0
Missouri	5.5	*	*	0.1	0.4	0.0
Montana	1.0	*	*	*	0.1	*
Nebraska	1.8	*	*	*	0.1	0.0
Nevada	2.8	*	*	*	0.3	0.0
New Hampshire	1.3	0.0	*	*	0.1	*
New Jersey	8.6	*	*	*	0.5	0.0
New Mexico	1.9	*	*	*	0.2	0.0
New York	18.3	0.1	*	0.1	1.0	0.0
North Carolina	9.5	*	*	0.1	1.1	0.0
North Dakota	0.7	*	*	*	*	0.0
Ohio	11.1	0.1	*	0.1	0.4	*
Oklahoma	3.5	*	*	*	0.4	*
Oregon	4.0	*	0.0	*	0.2	0.0
Pennsylvania	12.0	0.1	*	0.1	0.6	*
Rhode Island	1.0	*	*	*	*	0.0
South Carolina	4.8	*	*	*	0.4	0.0
South Dakota	0.8	*	*	*	0.1	*
Tennessee	6.4	*	*	0.1	0.5	*
Texas	24.5	0.4	0.1	0.3	4.7	*
Utah	3.1	*	*	*	0.2	*

**Table 11B. Point-in-Time versus Ever Insured by State: CY 2022 vs. Date of Questionnaire (numbers in millions)**

State	2023 PIT Insured, 2022 Insured	2023 PIT Insured, 2022 Uninsured	2023 PIT Insured, 2022 No Status (Infant) <sup>1</sup>	2023 PIT Uninsured, 2022 Insured	2023 PIT Uninsured, 2022 Uninsured	2023 PIT Uninsured, 2022 No Status (Infant) <sup>1</sup>
Vermont	0.6	*	*	*	*	0.0
Virginia	7.8	*	*	0.1	0.6	*
Washington	7.2	*	*	0.1	0.4	*
West Virginia	1.7	*	*	*	0.1	0.0
Wisconsin	5.5	*	*	*	0.3	*
Wyoming	0.5	*	*	*	*	*

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

<sup>1/</sup> Infants are those born in CY 2023 and are included in the PIT 2023 universe but are not assigned an insurance status for the prior year (2022). They are defined in the Tool data as those age 0 and with NEWWT\_LASTYR = 0.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 12. Persons with Other Private Health Insurance by Age and Type of Coverage: CY 2022 (numbers in millions)**

Age	OPHI, Total	OPHI, Exchange	OPHI, Not Exchange
<b>Total</b>	<b>32.8</b>	<b>11.8</b>	<b>21.0</b>
Under Age 18	3.8	2.1	1.8
Ages 18 through 25	2.8	1.5	1.4
Ages 26 through 54	9.4	5.4	4.0
Ages 55 through 64	5.0	2.9	2.1
Ages 65 and Over	11.8	*	11.8

NOTE: Non-zero cells with under 50,000 persons are marked with a "\*".

NOTE: Totals may not equal the sum of their components due to rounding.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements primarily from AHRQ's Medical Expenditure Panel Surveys.

**Table 13. Persons with Exchange Coverage by Subsidy: CY 2022 (numbers in millions)**

<b>Income Band (Federal Poverty Level, FPL)</b>	<b>Subsidized</b>	<b>Not Subsidized</b>	<b>Total</b>
<b>Total</b>	<b>10.2</b>	<b>1.7</b>	<b>11.8</b>
Less than 250% of the FPL	5.1	0.0	5.1
250%-399% of the FPL	3.1	0.0	3.1
At least 400% of the FPL	2.0	1.7	3.6

NOTE: Totals may not equal the sum of their components due to rounding.

SOURCE: U.S. Department of Labor, EBSA calculations based on the Current Population Survey, Annual Social and Economic Supplement, with enhancements based on CMS Effectuated Enrollment Report.

## DATA SOURCES, UPDATES, AND REVISIONS

This section briefly outlines the process and data sources used in the creation of the March 2023 Auxiliary Data as well as how the survey has changed over time and affected our work. Greater detail on the current imputations and edits performed to provide estimates of employer-sponsored insurance for calendar year (CY) 2022 can be found in “Technical Appendix: March 2023 CPS Auxiliary Data.”<sup>18</sup>

### PROCESS AND DATA SOURCES:

The starting data set is the March 2023 CPS. It was enhanced as follows:

- While the March CPS reports whether coverage is from an employer, it does not distinguish between current and former employers as the source of coverage for insured workers. It also does not report whether, for all workers, the employer offers health coverage. To fill these gaps, EBSA first imputes current versus former employer coverage for insured workers, then imputes offers of coverage for all workers. For the offers of coverage imputation, if point-in-time employment appeared to be consistent with employment during CY 2022, we first used

the point-in-time offer status variable, as published on the CPS. If it was still unassigned, we used the second set of point-in-time offer status variables with the expanded universe. If neither provided a value, we used data from the 2019–2021 Medical Expenditure Panel Surveys, Household Component (MEPS-HC) to impute a value.<sup>19</sup>

- For persons with coverage from a former employer, we imputed both sector and size of the employer providing the coverage using the most recent three years of data (2020–2022) from the Medical Expenditure Panel Survey, Insurance Component (MEPS-IC), as provided by the Agency for Healthcare Research and Quality (AHRQ).
- We used tabulations from the MEPS-IC along with partitions and trend data from the Employer Health Benefit Survey (EHBS) to impute funding status and type of coverage for those with ESI, as well as to classify coverage from a former employer as either retiree or COBRA.<sup>20</sup> In addition, EHBS is used to impute level-funded status for smaller employers. We used Federal Employees Health Benefits (FEHB) Program data for estimates at the Federal level.
- We used the March CPS to identify workers with union coverage from a current employer, as one-quarter of workers on the March CPS were asked about union membership and coverage.<sup>21</sup> Conditional probabilities

<sup>18</sup> Cathi Callahan and Rodelle Williams, Actuarial Research Corporation, 2024.

<sup>19</sup> The MEPS-HC consolidated file for 2022 is expected to be released in August of 2024. This data file is released on a more delayed schedule compared to the MEPS-IC data, which is obtained through custom tabulations directly from AHRQ.

<sup>20</sup> As noted previously, funding status is an imputation and this partition differs in concept from the estimates in the Self-Insured Group Health Plan Bulletin by representing the total ESI covered population, rather than only the subset that were subject to reporting on a Form 5500.

<sup>21</sup> Only those in month in sample 4 and 8 are asked this subset of questions which includes union coverage.

obtained from Wave 6 data of the 2008 panel of the Survey of Income and Program Participation (SIPP) were updated with the relationship in the trend in collectively bargained coverage from the GHPBs for those with private sector active vs. retiree coverage, to provide the basis of the union imputation for coverage from a former employer—whether it was from the Consolidated Omnibus Budget Reconciliation Act (COBRA) or retiree.<sup>22</sup> Public sector was not adjusted, as the active union trend remained relatively flat over time.

- Mean benefits and out-of-pocket expenditures for employer-sponsored insurance from Health Care Cost Institute and KFF analysis of Truven MarketScan data were used to determine target levels of actuarial value. Plan-level data from the 2022 EHBS was imputed onto active (non-COBRA, non-retiree) policyholder records.
- The out-of-pocket expenditure variable, as tabulated and presented on the Auxiliary Data file, is the sum of the raw CPS variables POTC-VAL and PMED-VAL. No editing was performed.
- For those with individual coverage through Affordable Care Act (ACA) exchanges, the coverage variable is included unedited on the Auxiliary Data file, with no distinction made by type of exchange coverage (state vs. Federal). The subsidy flag was edited based on enrollment

and subsidy level reports released by the Centers for Medicare & Medicaid Services, using the process described in the Technical Appendix.<sup>23</sup> In addition, flags have been added to the data to denote whether a person resides in a Medicaid expansion state.

## CPS REVISIONS:

The March 2014 CPS was extensively revised, with redesigned questions for income and insurance (including exchange-based coverage), as well as new questions on employer offers and employee take-ups. Data for March 2014 through March 2018 were released in the prior format without the new questions, though some data had been released via research files.<sup>24</sup> The first regular release of the expanded data, with updated processing by the Census Bureau, was in September 2019 with the March 2019 CPS.

For March 2015, a new variable that clarified the source of health insurance from outside the household was added. In addition, the 1960 Census State Code, which includes region as the first digit, was missing from the March 2015 data. The state Federal Information Processing System (FIPS) code was recoded to match the prior format and included the variable on the data file. There were no changes for the March 2016, March 2017, or March 2018 CPS data.

Estimates of coverage for CY 2018 for most types of insurance are similar to those from CY 2017, but a direct comparison could

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<sup>22</sup> 2010 data.

<sup>23</sup> Effectuated Enrollment: Early 2023 Snapshot and Full Year 2022 Average, Centers for Medicare and Medicaid Services, Table 5 (March 15, 2023).  
<https://www.cms.gov/files/document/early-2023-and-full-year-2022-effectuated-enrollment-report.pdf>.

<sup>24</sup> CPS ASEC Research Files, Census Bureau (2018).

<https://www.census.gov/data/datasets/time-series/demo/health-insurance/cps-asec-research-files.html>.

not be made to the estimates in the previous Health Bulletin since the 2019 CPS data used a new processing system. Comparison tables released by the Census Bureau were based on the 2018 Bridge File released in April of 2019, rather than the March 2018 production file released in the fall of 2018.<sup>25</sup> One notable difference in the CY 2018 Auxiliary Data was that the number of persons reported to have other private health insurance (not ESI) dropped substantially, affecting nonhierarchical coverage counts and bringing the CPS estimate more in line with other surveys of health insurance coverage. This pattern continued with the current release. Historically, the CPS overcounted other private health insurance coverage, but the new processing system and survey redesign have improved these estimates. Counts by hierarchical or “primary” insurance status were less affected, as many of those with other private health insurance previously had this coverage in addition to ESI.

## COVID-19 PUBLIC HEALTH EMERGENCY:

The March 2019 Auxiliary Data file represented a break in the time series and estimates from it should not be compared to previous years. The March 2020 data was expected to allow for

<sup>25</sup> Edward R. Berchick, Jessica C. Barnett, and Rachel D. Upton, Health Insurance Coverage in the United States: 2018, Census Bureau, Report No. P60-267 (Nov. 8, 2019).

<https://www.census.gov/library/publications/2019/demo/p60-267.html>.

<sup>26</sup> Non-Response Rates. <https://www.census.gov/programs-surveys/cps/technical-documentation/methodology/non-response-rates.html>. In May of 2021, the Census Bureau released a working paper (Coronavirus Infects Surveys, Too: Survey Nonresponse Bias and the Coronavirus Pandemic. Rothbaum, Jonathan. Bee, Adam. U.S. Census Bureau. May 3, 2021. <https://www.census.gov/content/dam/Census/library/working-papers/2020/demo/sehsd-wp2020-10.pdf>) that noted non-respondents tended to be more strongly associated with income, and the patterns were different by education, Hispanic origin, nativity, and citizenship when compared to

two years of consistent data. However, the emergence of the COVID-19 public health emergency in the spring of 2020 occurred as interviews began for the CPS Annual Social and Economic Supplement (ASEC). Interviews for the ASEC began on March 15, 2020, and were only performed via telephone rather than a combination of phone and in-person due to COVID-19. This resulted in a higher non-response rate compared to prior years, and, as such, multi-year comparisons are not possible at this time.<sup>26</sup>

Similarly, the March 2021 file should not be compared to the March 2020 file. While response rates improved with the March 2021 ASEC, they did not return to pre-pandemic levels.<sup>27</sup> As a result, the Census Bureau compared March 2021 health insurance estimates to those from March 2019. Additionally, the March 2022 file used 2020 Census based weights rather than the 2010 based weights that were used for the 2020 and 2021 files, and Census tabulations comparing the two years used reweighted March 2021 (CY 2020) data rather than directly comparing to the previously reported results.

respondents. A file with experimental weights was also released, which, when tabulated, show a revision to the income distribution from the original release. However, the Census Bureau classified the non-response adjusted weights as experimental and noted that there are no plans to incorporate them into the health insurance estimates. So, we are not incorporating these weights into this analysis.

<sup>27</sup> How Did the Pandemic Affect Survey Response: Using Administrative Data to Evaluate Nonresponse in the 2021 Current Population Survey Annual Social and Economic Supplement. Jonathan Rothbaum, Charles Hokayem. September 14, 2021. <https://www.census.gov/newsroom/blogs/research-matters/2021/09/pandemic-affect-survey-response.html>.

The Census Bureau has noted that, in years prior to 2020, non-respondents were similar to respondents, while for March 2020, non-respondents tended to be more strongly associated with income, and the patterns were different by education, Hispanic origin, nativity, and citizenship. In a working paper that was released in the spring of 2021, the Census Bureau noted that, “higher income households were considerably more likely to respond to the CPS ASEC”.<sup>28</sup> This resulted in overstating income by 2.8% at the mean in the March 2020 file. Non-response bias improved in March 2021 but did not return to pre-pandemic levels. “Since 2020, survey nonresponse has continued to bias income statistics upward by about 2%”.<sup>29</sup> This could explain why the survey did not show the increases in Medicaid enrollment that were reported by the Centers for Medicare & Medicaid Services during the public health emergency. Similarly, for the March 2022 and March 2023 surveys, non-response remained high and non-respondents were dissimilar to respondents.

Beyond survey administration and response issues noted above, it should be noted that during the PHE, the Employee Benefits Security Administration and the Internal Revenue Service released a rule that temporarily extended the time people had to elect and pay for COBRA coverage and the time for people to elect special enrollment in group health plans, with this extension in effect for all of CY 2022. The extent of the impact this rule may have had on counts of covered persons or continuation of coverage that may otherwise have ended is unclear.

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<sup>28</sup> Coronavirus Infects Surveys, Too: Survey Nonresponse Bias and the Coronavirus Pandemic. Rothbaum, Jonathan. Bee, Adam. U.S. Census Bureau. (May 3, 2021). <https://www.census.gov/content/dam/Census/library/working-papers/2020/demo/sehsd-wp2020-10.pdf>.

<sup>29</sup> How has the Pandemic Continued to Affect Survey Non-Response? Rothbaum, Jonathan. Bee, Adam. U.S. Census Bureau. (September 13, 2022). <https://www.census.gov/newsroom/blogs/research-matters/2022/09/how-did-the-pandemic-affect-survey-response.html>.