# Health Insurance Coverage Among Young Adults Aged 19 to 34: 2018 and 2019

American Community Survey Briefs

By Douglas Conway Issued December 2020 ACSBR/20-02

#### INTRODUCTION

Health insurance coverage provides a means for financing health care costs, which helps to increase access to health care services and reduce individual out-of-pocket medical expenses. Health insurance coverage and changes over time may vary due to differences in demographic composition of the population, economic conditions, and policy changes. Several such policy changes occurred when provisions of the Patient Protection and Affordable Care Act (ACA) went into effect.

For example, in 2010, the Young Adult Provision of the ACA enabled young adults under the age of 26 to remain as dependents on their parents' health insurance plans.<sup>1</sup> Young adults 26 years and older may receive coverage through their employer, through public coverage, or through purchase on the healthcare marketplace. Young adults may be less likely to purchase health insurance coverage, and, thus, may be more likely to be uninsured than other age groups.

#### WHAT IS HEALTH INSURANCE COVERAGE?

This brief presents state-level estimates of health insurance coverage using data from the American Community Survey (ACS). The ACS asks respondents to report their coverage at the time of interview, and the U.S. Census Bureau conducts the ACS throughout the year. The resulting measure of health insurance coverage, therefore, reflects an annual average of current comprehensive health insurance coverage status.\* This uninsured rate measures a different concept than the measure based on the Current Population Survey Annual Social and Economic Supplement (CPS ASEC).

For reporting purposes, the ACS broadly classifies health insurance coverage as private insurance or public insurance. The ACS defines private health insurance as a plan provided through an employer or a union, coverage purchased directly by an individual from an insurance company or through an exchange (such as healthcare.gov), or through TRICARE. Public insurance coverage includes federal programs, such as Medicare, Medicaid, the Children's Health Insurance Program (CHIP), individual state health plans, CHAMPVA (Civilian Health and Medical Program at the Department of Veterans Affairs), as well as care provided by the Department of Veterans Affairs.

In the ACS, people are considered insured if they were covered by any of these types of health insurance at time of interview. People are considered uninsured if they were not covered by any of these types of health insurance at the time of interview or if they only had coverage through the Indian Health Service (IHS), as IHS coverage is not considered comprehensive.



U.S. Department of Commerce U.S. CENSUS BUREAU census.gov

<sup>&</sup>lt;sup>1</sup> Prior to implementation, health insurers set an age limit for children to be covered as dependents on their parents' plan. For some plans, that age was 19, or in other cases, it was 22 for full-time students. Additional provisions of the ACA went into effect on January 1, 2014, including the expansion of Medicaid eligibility and the establishment of health insurance marketplaces (e.g., healthcare.gov). For information on health insurance coverage for young adults aged 19 to 34 in 2010 and in 2015, see "Another Look at Health Insurance Coverage Rates for Young Adults," <www.census.gov/newsroom/blogs /random-samplings/2018/09/another\_look\_at\_heal.html>.

<sup>\*</sup> Comprehensive health insurance covers basic health care needs. This definition excludes single-service plans such as accident, disability, dental, vision, or prescription medicine plans.

Although younger people are generally considered to be healthy, a National Research Council report found that young adults (under the age of 26) had a worse health profile than adolescents.<sup>2</sup> Young adults have higher rates of injury and mental illness and may be more likely to engage in risky behaviors, which could impact later health and well-being. Health problems arising in young adulthood could lead to poor health and disability in later adulthood. Young adults are also less likely to report a usual source of care.<sup>3</sup> Thus, health insurance coverage for young adults ensures access to preventive health services and promotes well-being.

This brief uses data from the 2018 and 2019 American Community Surveys (ACS) to examine the uninsured rate and to compare changes in the uninsured rate among young adults aged 19 to 34 in the 50 states and the District of Columbia.<sup>4, 5</sup> The large sample size of the ACS allows for an examination of the over-

<sup>2</sup> Institute of Medicine and National Research Council, 2015, *Investing in the Health and Well-Being of Young Adults*, Washington, DC, The National Academies Press, <a href="https://doi.org/10.17226/18869">https://doi.org/10.17226/18869</a>>.

<sup>3</sup> Peterson-Kaiser Family Foundation Health System Tracker (Access and Coverage/Usual Source of Care), <www.healthsystemtracker.org/indicator /access-affordability/usual-source-care/>.

<sup>4</sup> The U.S. Census Bureau reviewed this data product for unauthorized disclosure of confidential information and approved the disclosure avoidance practices applied to this release. CBDRB-FY20-POP001-0200.

<sup>5</sup> The Current Population Survey Annual Social and Economic Supplement (CPS ASEC) is the leading source of nationallevel estimates of health insurance coverage. For a comparison of ACS and CPS ASEC measures of health insurance coverage, see <www.census.gov/programs -surveys/cps/technical-documentation /user-notes/health-insurance-user-notes /health-ins-cov-meas-asec-acs.html> and <www.census.gov/topics/health /health-insurance/guidance.html>. all uninsured rate for specific demographic groups and subnational geographies. This brief first examines the relationship between age and health insurance coverage and describes changes in the uninsured rate between 2018 and 2019 by single year of age for the nation. Next, the brief focuses on the uninsured rate and changes in uninsurance among young adults aged 19 to 34 by state.<sup>6</sup>

Estimates are limited to the civilian noninstitutionalized population in the 50 states and the District of Columbia.

#### HIGHLIGHTS

- In 2019, 15.6 percent of young adults aged 19 to 34 were uninsured, higher than the uninsured rate for children under the age of 19 (5.7 percent), other working-age adults 35 to 64 years (11.3 percent), and adults 65 and older (0.8 percent) (Figure 1).
- Young adults aged 26 had the highest uninsured rate among all single years of age, at 18.3 percent in 2019 (Figure 2).
- In 2019, the District of Columbia (5.2 percent) and Massachusetts (5.6 percent) had among the lowest uninsured rates among states for young adults aged 19 to 34, while Texas had the highest

uninsured rate (29.2 percent) for this age group (Figure 3).<sup>7</sup>

- In 2019, the uninsured rate was higher for young adults aged 26 to 34 than for those aged 19 to 25 in 22 states (Figure 4). The percentage of young adults aged 19 to 25 without health coverage was significantly higher than the percentage uninsured among those aged 26 to 34 in three states—Missouri, New Mexico, and Texas.<sup>8</sup>
- The percentage of uninsured young adults increased in ten states and decreased in four states between 2018 and 2019 (Figure 5).

#### UNINSURED RATES BY SINGLE YEAR OF AGE

In 2019, young adults aged 19 to 34 had higher uninsured rates on average (15.6 percent) compared to children under the age of 19 (5.7 percent), other working-age adults 35 to 64 years (11.3 percent), and adults 65 and older (0.8 percent) (Figure 1).

Young adults face changes in eligibility for coverage at age 19 and at age 26. For example, at age 19, young adults are no longer eligible for public coverage through the Children's Health Insurance Program (CHIP) in most states. The percentage of 19-year-olds without health insurance coverage (14.3 percent) was 4.8 percentage points higher than the percentage of 18-year-olds lacking coverage

<sup>&</sup>lt;sup>6</sup> The Census Bureau conducts the ACS throughout the year, and the ACS asks respondents to report their coverage at the time of interview. If respondents report having no coverage, they are considered uninsured at the time of interview. The resulting measure, therefore, reflects an annual average of current health coverage status.

<sup>&</sup>lt;sup>7</sup> The uninsured rates for young adults in the District of Columbia and Massachusetts were not statistically different from one another.

<sup>&</sup>lt;sup>8</sup> There was no significant difference in the uninsured rate for young adults aged 19 to 25 and those aged 26 to 34 in the other 25 states and the District of Columbia in 2019.



(Figure 2). Another key change in eligibility occurs at age 26, when young adults are no longer eligible for dependent coverage through a parent's health insurance plan. The percentage of uninsured 26-year-olds (18.3 percent) was 3.6 percentage points higher than the percentage of 25-year-olds without health insurance coverage.<sup>9</sup> In addition, in 2019, young adults aged 26 had the highest uninsured rate among all single years of age, followed by 17.5 percent of 27-year-olds (Figure 2).

From the ages of 26 to 64, the uninsured rate generally declined with age. Between the ages of 64 and 65, the uninsured rate declined sharply, because most adults 65 and older have access to public health coverage through Medicare. In 2019, the percentage of adults aged 65 without health insurance coverage (1.9 percent) was 5.6 percentage points lower than the uninsured rate for 64-year-olds (7.5 percent).

Between 2018 and 2019, the percentage of people without health insurance increased for many single-year ages, including for children, young adults, and many working-age adults over 40. Among young adults, the uninsured rate increased for those aged 19 through 21, as well as for those aged 24 and 26. Between 2018 and 2019, the uninsured rate fell by 0.5 percentage points for 25-year-olds to 14.7 percent. However, this rate was significantly higher than the national uninsured rate (9.2 percent). The uninsured rates for young adults aged 27 through 34 were not statistically different between 2018 and 2019.

#### STATE ESTIMATES OF UNINSURED RATES FOR YOUNG ADULTS

The ACS, with its large sample size, provides an opportunity to examine differences in health coverage and changes in coverage across states and the District of Columbia. During 2019, 15.6 percent of young adults aged 19 to 34 had no health insurance coverage. Yet, the uninsured rate for young adults varied widely by state (Figure 3; see also Appendix Table 1).

In 2019, the District of Columbia and Massachusetts had among the lowest uninsured rates for young adults (5.2 percent and 5.6 percent, respectively).<sup>10</sup> In contrast, in Texas, 29.2 percent of young adults aged 19 to 34 had no health coverage (Appendix Table 1). The percentage of young adults without health insurance was 23 percent or higher in five southern states—Florida (23.6 percent), Georgia (23.7 percent), Oklahoma (25.0 percent),

<sup>&</sup>lt;sup>9</sup> In 2019, the uninsured rate for young adults aged 25 was not statistically different from the uninsured rate for young adults aged 19 and 20, and 23 and 24.

<sup>&</sup>lt;sup>10</sup> In 2019, the uninsured rate for 19- to 34-year-olds in the District of Columbia was not statistically different from the uninsured rate for young adults aged 19 to 34 in Massachusetts.



Mississippi (25.6 percent), and Texas (29.2 percent).<sup>11</sup>

The ACA provided the option for states to expand Medicaid eligibility to people whose income-to-poverty ratio fell under a specific threshold.<sup>12</sup> On or before January 1, 2019, 32 states and the District of Columbia expanded Medicaid

<sup>12</sup> For a list of the states and their Medicaid expansion status as of January 1, 2019, see Appendix Table 1: Percent Uninsured and Change in Percent Uninsured for Young Adults Aged 19 to 34 by State: 2018 and 2019. eligibility ("expansion states"), while 18 states opted not to expand Medicaid eligibility ("nonexpansion states"). As young adults age out of coverage under CHIP or lose eligibility for dependent coverage under their parents' private health coverage, they may access coverage through other sources, including Medicaid, if they meet certain income eligibility criteria. In 2019, the uninsured rate for young adults aged 19 to 34 also varied by state Medicaid expansion status. Specifically, in 2019, the percentage of 19- to 34-year-olds without any health insurance coverage was 10.5 percentage points higher in

nonexpansion states (22.3 percent), compared with expansion states (11.8 percent) (Figure 3).

Young adults face changes in eligibility for coverage at the ages of 19 and 26. At the age of 19, young adults are no longer eligible for public coverage through the CHIP in most states, but may still be covered as a dependent on a parent's health insurance plan. At the age of 26, young adults are no longer eligible to be covered as a dependent through a parent's health insurance plan, but may access public coverage if they meet certain requirements, including having income

<sup>&</sup>lt;sup>11</sup> In 2019, the uninsured rate for young adults aged 19 to 34 in Florida was not statistically different from the uninsured rate for young adults aged 19 to 34 in Georgia. In addition, the uninsured rate for young adults aged 19 to 34 was not statistically different in Mississippi and Oklahoma.



Source: U.S. Census Bureau, 2019 American Community Survey, 1-Year Estimates.

below a certain threshold. Comparing uninsured rates for young adults aged 19 to 25 with those for young adults aged 26 to 34 may reveal differences in coverage patterns based on these differences in eligibility.

In 2019, the uninsured rate was higher for young adults aged 26 to 34 (16.1 percent) than it was for their counterparts aged 19 to 25 (14.9 percent) (Figure 4). Among states, the uninsured rate was higher for young adults aged 26 to 34 than for those aged 19 to 25 in 22 states (Figure 4). While it appears in Figure 4 that this relationship holds in most states, the uninsured rate was not statistically different between 19- to 25-year-olds and their counterparts, those aged 26 to 34, in 25 states and the District of Columbia. The percentage of young adults aged 19 to 25 without health coverage was significantly higher than the percentage uninsured among those aged 26 to 34 in three states— Missouri, New Mexico, and Texas.<sup>13</sup>

<sup>&</sup>lt;sup>13</sup> Missouri and Texas are nonexpansion states. In New Mexico, although there was no statistical differences in the proportion of young adults aged 19 to 25 and 26 to 34 covered by public coverage, young adults aged 26 to 34 were more likely to be covered by private coverage (54.6 percent) than their younger counterparts aged 19 to 25 (48.0 percent). About 47.7 percent of young adults aged 26 to 34 held employment-based coverage, compared with 40.7 percent of those aged 19 to 25.



40

<sup>1</sup> Expanded Medicaid eligibility as of January 1, 2014.

<sup>2</sup> Expanded Medicaid eligibility after January 1, 2014, and on or before January 1, 2015.

<sup>3</sup> Expanded Medicaid eligibility after January 1, 2015, and on or before January 1, 2016.

<sup>4</sup> Expanded Medicaid eligibility after January 1, 2016, and on or before January 1, 2017.

<sup>5</sup> Expanded Medicaid eligibility after January 1, 2018, and on or before January 1, 2019.

Note: For information on confidentiality protection, sampling error, nonsampling error, and definitions, see

<https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf>.

Source: U.S. Census Bureau, 2019 American Community Survey, 1-Year Estimates.

Figure 4.

**Uninsured Rate and Difference in Uninsured Rate Among** 

Young Adults Aged 19 to 25 and 26 to 34 by State: 2019

### **ب** 19-25

Age -25 26-34



2018	2019
	۲

(Civilian noninstitutionalized population. ): Changes in estimates for 2018 and 2019 are not statistically different from zero at the 90 percent confidence level)



<sup>1</sup> Expanded Medicaid eligibility as of January 1, 2014.

<sup>2</sup> Expanded Medicaid eligibility after January 1, 2014, and on or before January 1, 2015.

<sup>3</sup> Expanded Medicaid eligibility after January 1, 2015, and on or before January 1, 2016.

<sup>4</sup> Expanded Medicaid eligibility after January 1, 2016, and on or before January 1, 2017.

<sup>5</sup> Expanded Medicaid eligibility after January 1, 2018, and on or before January 1, 2019.

Note: For information on confidentiality protection, sampling error, nonsampling error, and definitions in the American Community Survey, see <a href="https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf">https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf</a>. Source: U.S. Census Bureau, 2018 and 2019 American Community Survey, 1-Year Estimates.

#### CHANGE IN STATE UNINSURED RATES FOR YOUNG ADULTS: 2018 AND 2019

Between 2018 and 2019, the percentage of young adults aged 19 to 34 without health insurance coverage increased from 15.2 percent to 15.6 percent, a 0.4 percentage point increase. Yet, changes in coverage varied across states. The percentage of uninsured young adults increased in ten states and decreased in four states between 2018 and 2019 (Figure 5). Specifically, the uninsured rate for young adults increased in California, Colorado, Delaware, Kentucky, Louisiana, Massachusetts, Michigan, Minnesota, Mississippi, and Missouri. Of these ten states with increases, two states-Mississippi and Missourihad not expanded Medicaid eligibility, but eight states had expanded Medicaid eligibility.

The uninsured rate decreased in Montana, New York, North Dakota, and Virginia over the same period. Each of these four states had expanded Medicaid eligibility as of January 1, 2019. There were 36 states and the District of Columbia that did not have a statistically significant change in the percentage of young adults aged 19 to 34 without health coverage.

Young adults in Delaware, Louisiana, and Mississippi experienced among the largest

#### WHAT IS THE AMERICAN COMMUNITY SURVEY?

The American Community Survey (ACS) is a nationwide survey designed to provide communities with reliable and timely demographic, social, economic, and housing data for the nation, states, congressional districts, counties, places, and other localities every year. It has an annual sample size of about 3.5 million addresses across the United States and Puerto Rico and includes both housing units and group quarters (e.g., nursing facilities and prisons).\* The ACS is conducted in every county throughout the nation and every municipio in Puerto Rico (the Puerto Rico Community Survey). Beginning in 2006, ACS 1-year data have been released annually for geographic areas with populations of 65,000 and greater. For information on the ACS sample design and other topics, visit <www.census.gov/acs>.

\* While people living in group quarters are sampled in the ACS, those living in institutional group quarters (e.g., nursing homes or correctional facilities) are not included in the poverty universe.

increases in the uninsured rate between 2018 and 2019.<sup>14</sup> States with the largest declines in the percentage of uninsured young adults included Montana, North Dakota, and Virginia. Notably, Virginia expanded Medicaid eligibility in 2019.

#### CONCLUSION

This brief examined the uninsured rate and changes in the uninsured rate for young adults aged 19 to 34 between 2018 and 2019. In 2019, young adults had the highest uninsured rate of any broad age group, in part because of changes in eligibility for coverage at ages 19 and 26. There was substantial variation in the uninsured rate across states, ranging from 5.2 percent in the District of Columbia to 29.2 percent in Texas.<sup>15</sup> Between 2018 and 2019, the uninsured rate increased in 10 states, but declined in 4 states. Most states saw no significant change in the uninsured rate for young adults aged 19 to 34.

Understanding health insurance coverage patterns is important for understanding access to health care services and promoting positive health outcomes for young adults.

<sup>&</sup>lt;sup>14</sup> The change in the uninsured rate for young adults aged 19 to 34 between 2018 and 2019 in Delaware, Louisiana, and Mississippi was not statistically different from the change in the uninsured rate among young adults aged 19 to 34 in Colorado, Kentucky, Minnesota, and Missouri.

<sup>&</sup>lt;sup>15</sup> The uninsured rate in Massachusetts (5.6 percent) was not statistically different from the uninsured rate in the District of Columbia in 2019.

#### SOURCE AND ACCURACY

The data presented in this brief are based on the ACS sample interviewed from January 2018 through December 2018 (2018 ACS) and the ACS sample interviewed from January 2019 through December 2019 (2019 ACS). The estimates based on these samples describe the average values of person, household, and housing unit characteristics over the period of collection. Data presented in this brief are subject to sampling and nonsampling error. Sampling error is the uncertainty between an

estimate based on a sample and the corresponding value that would be obtained if the estimates were based on the entire population (as from a census). Measures of sampling error are provided in the form of margins of error for all estimates included in this brief. All comparative statements in this brief have undergone statistical testing, and comparisons are significant at the 90 percent confidence level unless otherwise noted. In addition to sampling error, nonsampling error may be introduced during any of the operations used to collect and process survey data such as editing, reviewing, or keying data from questionnaires. For more information on sampling and estimation methods, confidentiality protection, and sampling and nonsampling errors, please see the 2019 ACS Accuracy of the Data document located at <https://www2.census.gov /programs-surveys/acs/tech \_docs/accuracy/ACS \_Accuracy\_of\_Data\_2019.pdf>.

#### Appendix Table 1. Percent Uninsured and Change in Percent Uninsured for Young Adults Aged 19 to 34 by State: 2018 and 2019

(Civilian noninstituionalized population. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see <a href="https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf">https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf</a>)

			2019		2018			Change 2019 less 2018	
State	Medicaid expansion state?	Total number uninsured	Percent uninsured	Margin of error <sup>1</sup> (±)	Total number uninsured	Percent uninsured	Margin of error <sup>1</sup> (±)	Change in percent uninsured	Margin of error <sup>1</sup> (±)
United States		69,505	15.6	0.1	69,575	15.2	0.1	*0.4	0.20
Alabama	No	998	19.1	0.9	997	19.8	0.9	-0.8	1.30
Alaska	+Yes	158	21.1	1.9	161	19.1	1.8	2.0	2.60
Arizona	Yes	1,540	18.1	0.7	1,512	17.3	0.8	0.9	1.10
Arkansas	Yes	609	16.5	1.1	622	15.5	0.9	1.0	1.40
California	Yes	8,970	12.4	0.2	9,029	11.8	0.2	*0.6	0.30
Colorado	Yes	1,315	13.4	0.7	1,295	11.9	0.6	*1.5	0.90
Connecticut	Yes	723	9.8	0.8	722	9.2	0.8	0.6	1.10
Delaware	Yes	192	12.8	1.7	194	9.8	1.5	*3.0	2.30
District of Columbia	Yes	223	5.2	1.3	224	4.0	0.8	1.2	1.50
Florida	No	4,151	23.6	0.5	4,149	23.5	0.5	0.1	0.70
Georgia	No	2,239	23.7	0.7	2,227	23.2	0.7	0.5	0.90
Hawaii	Yes	262	8.4	1.2	273	7.5	1.0	0.9	1.60
Idaho	No	367	20.4	1.5	359	19.4	1.4	1.0	2.10
Illinois	Yes	2,686	12.4	0.4	2,716	12.1	0.4	0.3	0.60
Indiana	+Yes	1,422	14.3	0.6	1,406	13.6	0.7	0.7	0.90
lowa	Yes	656	9.1	0.8	655	9.0	0.6	0.1	1.00
Kansas	No	607	15.8	0.9	607	15.3	0.8	0.5	1.20
Kentucky	Yes	908	11.6	0.8	913	10.0	0.7	*1.6	1.10
Louisiana	#Yes	960	16.4	0.8	978	14.4	0.8	*2.0	1.20
Maine	No	251	13.8	1.4	247	14.8	1.3	-1.1	1.90
Maryland	Yes	1,227	10.8	0.6	1,241	10.4	0.6	0.3	0.90
Massachusetts	Yes	1,571	5.6	0.5	1,573	5.0	0.4	*0.6	0.60
Michigan	^Yes	2,083	10.5	0.4	2,092	9.6	0.3	*0.8	0.50
Minnesota	Yes	1,167 590	8.7 25.6	0.6	1,172	7.1 23.6	0.5 1.2	*1.5	0.70 1.70
Mississippi	No No	1,268	18.1	0.8	1,271	16.7	0.7	*1.5	1.10
Missouri	+Yes	213	12.4	1.4	210	14.3	1.3	*-2.0	1.10
Nebraska	No	407	14.3	0.9	409	14.3	1.0	-0.4	1.40
Nevada	Yes	651	17.9	1.0	641	17.8	1.0	0.1	1.40
New Hampshire	^Yes	270	12.0	1.2	269	10.6	1.0	1.4	1.60
New Jersey	Yes	1,764	13.7	0.6	1,777	13.5	0.6	0.2	0.80
New Mexico.	Yes	429	16.6	1.4	429	16.6	1.2	Z	1.80
New York	Yes	4,319	9.0	0.3	4,361	9.4	0.3	*-0.4	0.40
North Carolina	No	2,137	19.7	0.6	2,112	19.1	0.6	0.6	0.90
North Dakota	Yes	179	9.7	1.5	183	12.7	1.2	*-2.9	1.90
Ohio	Yes	2,402	11.5	0.4	2,401	11.4	0.4	Z	0.60
Oklahoma	No	833	25.0	0.8	832	25.0	0.8	Z	1.20
Oregon	Yes	893	12.2	0.7	894	13.1	0.8	-0.9	1.10
Pennsylvania	^Yes	2,617	9.9	0.4	2,629	9.7	0.4	0.2	0.60
Rhode Island	Yes	237	8.0	1.6	238	7.7	1.2	0.3	2.00
South Carolina	No	1,023	19.0	1.0	1,020	19.1	1.0	-0.1	1.40
South Dakota	No	178	18.3	1.4	184	18.4	1.6	-0.1	2.10
Tennessee	No	1,427	17.1	0.8	1,407	17.1	0.7	Z	1.00
Texas	No	6,446	29.2	0.5	6,390	28.9	0.4	0.3	0.70
Utah	No	770	13.7	0.9	758	13.7	0.9	-0.1	1.30
Vermont	Yes	129	7.5	1.3	129	6.8	1.1	0.7	1.70
Virginia	-Yes	1,741	13.5	0.6	1,761	15.2	0.6	*-1.7	0.80
Washington.	Yes	1,667	11.8	0.6	1,660	11.3	0.5	0.6	0.80
West Virginia	Yes No	332 1,180	12.0 10.4	1.2 0.6	338 1,184	12.1 10.3	1.2 0.5	Z Z	1.70 0.70
Wisconsin	No	1,180	21.0		1,184	10.3	2.7	2.8	4.10
<u>vvyonning</u>	0/1	1 110	21.0	J	1 112	10.1	۷./	2.8	4.10

\* The difference between age groups is not statistically different from one another at the 90 percent confidence level.

^ Expanded Medicaid eligibility after January 1, 2014 and on or before January 1, 2015.

+ Expanded Medicaid eligibility after January 1, 2015 and on or before January 1, 2016.

# Expanded Medicaid eligibility after January 1, 2016 and on or before January 1, 2017.

- Expanded Medicaid eligibility after January 1, 2018 and on or before January 1, 2019.

Z Represents or rounds to zero.

<sup>1</sup> Data are based on a sample and are subject to sampling variability. A margin of error is a measure of an estimate's variability. The larger the margin of error in relation to the size of the estimate, the less reliable the estimate. When added to and subtracted from the estimate, the margin of error forms the 90 percent confidence interval.

Note: Differences are calculated with unrounded numbers, which may produce different results from using the rounded values in the table. Source: U.S. Census Bureau, 2018 and 2019 American Community Survey, 1-Year Estimates.

## Appendix Table 2. Percent Uninsured and Difference in Percent Uninsured Among Young Adults Aged 19 to 25 and 26 to 34 by State: 2019

(Civilian noninstitutionalized population. For information on confidentiality protection, sampling error, nonsampling error, and definitions, see <a href="https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf">https://www2.census.gov/programs-surveys/acs/tech\_docs/accuracy/ACS\_Accuracy\_of\_Data\_2019.pdf</a>)

State		Aged 2	6-34	Aged 1	9-25	Differences in uninsured groups	
State	Expansion state?	Percent uninsured	Margin of error <sup>1</sup> (±)	Percent uninsured	Margin of error <sup>1</sup> (±)	Percent	Margin of error <sup>1</sup> (±)
United States		16.10	0.10	14.90	0.20	*1.2	0.20
Alabama	No	20.20	1.20	17.60	1.20	*2.6	1.80
Alaska	+Yes	21.80	2.60	20.00	3.40	1.8	4.30
Arizona	Yes	18.00	0.90	18.30	1.10	-0.3	1.40
Arkansas	Yes	17.40	1.40	15.40	1.50	2.0	2.10
California	Yes	12.90	0.30	11.60	0.40	*1.3	0.50
Colorado	Yes	13.60	0.80	13.10	0.90	0.5	1.30
Connecticut	Yes	11.40	1.00	7.80	1.20	*3.5	1.60
Delaware	Yes	13.60	2.10	11.90	2.90	1.7	3.60
District of Columbia	Yes	4.50	1.30	6.60	2.50	-2.2	2.90
Florida	No	25.00	0.70	21.70	0.80	*3.3	1.10
Georgia	No	23.10	0.80	24.40	1.10	-1.3	1.40
Hawaii	Yes	7.70	1.30	9.60	1.70	-1.9	2.10
Idaho	No	21.60	1.90	18.80	2.20	2.8	2.90
Illinois	Yes	12.70	0.60	11.90	0.70	0.9	0.90
Indiana	+Yes	15.10	0.90	13.30	0.70	*1.8	1.10
lowa	Yes	9.50	1.00	8.70	1.10	0.8	1.50
Kansas	No	16.60	1.30	14.80	1.00	*1.8	1.60
Kentucky	Yes	12.00	1.00	11.20	1.10	0.7	1.50
Louisiana	#Yes	18.00	1.20	14.20	1.20	*3.8	1.70
Maine	No	14.10	1.50	13.40	2.20	0.6	2.70
Maryland	Yes	12.10	1.00	8.90	0.80	*3.2	1.20
•	Yes	6.10	0.60	4.90	0.80	*1.2	0.90
Massachusetts	^Yes	11.20	0.60	9.60	0.70	*1.6	0.90
0	Yes	9.20	0.80	7.90	0.50	*1.3	1.00
Minnesota			1.80	24.30		2.5	2.60
Mississippi	No	26.70	0.90	24.30 19.30	1.80 1.20	2.5 *-2.1	
Missouri	No	17.20				1	1.50
	+Yes	12.90	1.80	11.70	2.00	1.2	2.60
Nebraska	No	14.50	1.30	14.00	1.20	0.6	1.80
Nevada	Yes	18.30	1.20	17.30	1.80	1.0	2.20
New Hampshire	^Yes	13.90	1.90	9.60	1.40	*4.4	2.40
New Jersey	Yes	14.40	0.70	12.70	0.90	*1.8	1.10
New Mexico.	Yes	14.80	1.80	18.90	1.80	*-4.1	2.50
New York	Yes	10.30	0.40	7.10	0.50	*3.1	0.60
North Carolina	No	21.30	0.80	17.70	0.90	*3.6	1.20
North Dakota	Yes	11.40	2.10	7.70	1.70	*3.8	2.70
Ohio	Yes	12.30	0.60	10.40	0.60	*1.9	0.90
Oklahoma	No	25.70	1.10	24.10	1.20	1.6	1.60
Oregon	Yes	13.00	1.00	11.10	1.20	*1.9	1.60
Pennsylvania	^Yes	10.40	0.60	9.20	0.60	*1.2	0.80
Rhode Island	Yes	9.40	2.10	6.30	2.10	*3.1	3.00
South Carolina	No	20.00	1.20	17.80	1.50	*2.2	1.90
South Dakota	No	17.40	1.70	19.30	2.30	-1.9	2.90
Tennessee	No	17.90	1.10	16.10	1.00	*1.8	1.40
Texas	No	28.60	0.60	30.00	0.60	*-1.4	0.90
Utah	No	14.00	1.20	13.30	1.20	0.7	1.60
Vermont	Yes	8.20	1.80	6.80	1.80	1.4	2.50
Virginia	-Yes	13.80	0.80	13.10	0.90	0.8	1.20
Washington	Yes	11.80	0.70	11.80	1.00	Z	1.20
West Virginia	Yes	12.10	1.40	12.00	2.20	0.1	2.60
Wisconsin	No	10.70	0.80	9.90	0.80	0.9	1.10
Wyoming	No	21.90	3.90	19.60	4.90	2.3	6.20

\* DIfferences between age groups are statistically different from zero at the 90 percent confidence level.

^ Expanded Medicaid eligibility after January 1, 2014, and on or before January 1, 2015.

+ Expanded Medicaid eligibility after January 1, 2015, and on or before January 1, 2016.

# Expanded Medicaid eligibility after January 1, 2016, and on or before January 1, 2017.

- Expanded Medicaid eligibility after January 1, 2018, and on or before January 1, 2019.

Z Represents or rounds to zero.

<sup>1</sup> Data are based on a sample and are subject to sampling variability. A margin of error is a measure of an estimate's variability. The larger the margin of error in relation to the size of the estimate, the less reliable the estimate. When added to and subtracted from the estimate, the margin of error forms the 90 percent confidence interval.

Note: Differences are calculated with unrounded numbers, which may produce different results from using the rounded values in the table. Source: U.S. Census Bureau, 2019 American Community Survey, 1-Year Estimates.