



MEPS Insurance Component Chartbook 2017



Medical Expenditure Panel Survey Insurance Component 2017 Chartbook

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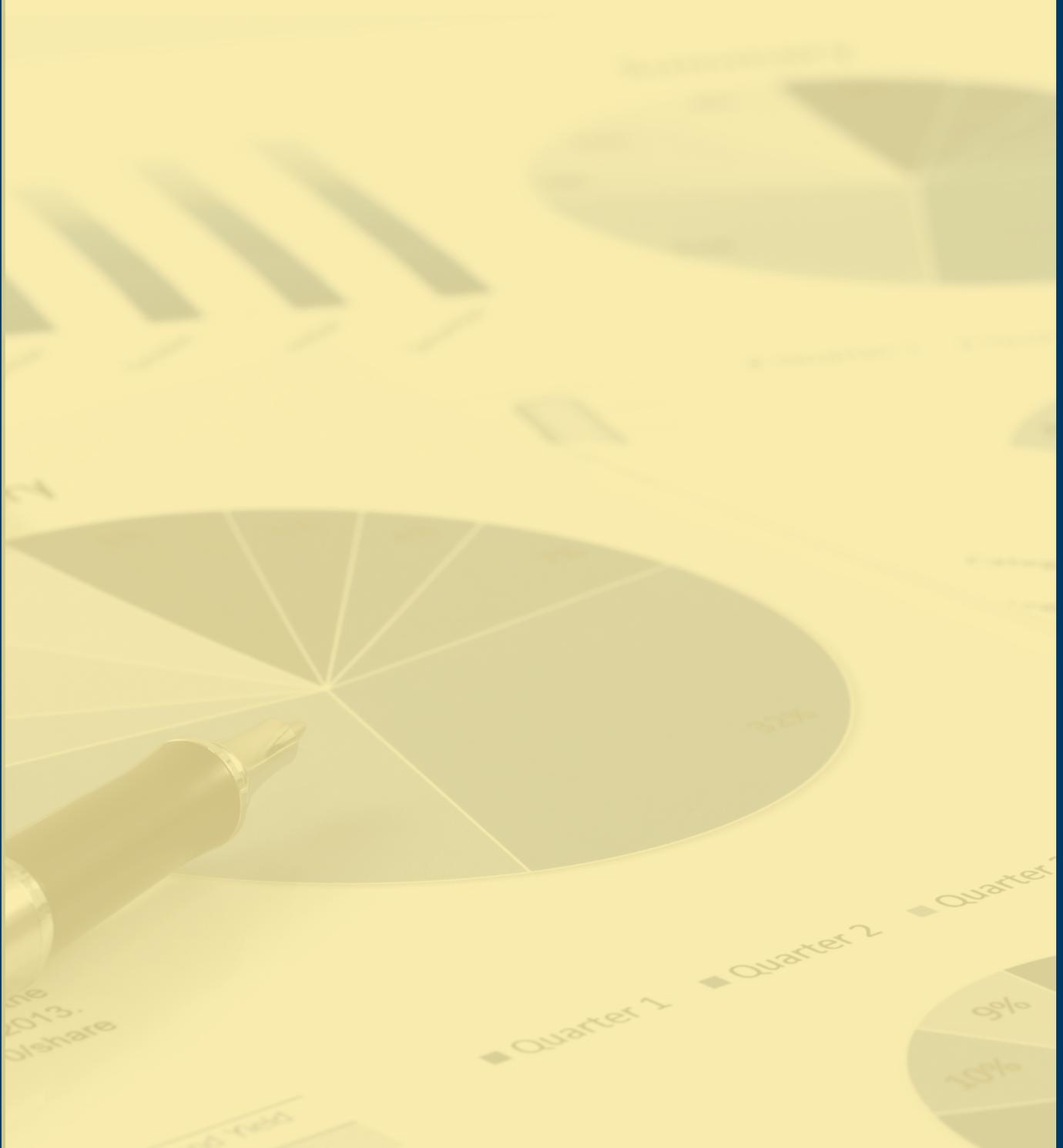
The data used in this report are from the Insurance Component of the Medical Expenditure Panel Survey. Information about this survey, including sample design, data collection, sample sizes, and response rates, can be found at https://meps.ahrq.gov/survey_comp/Insurance.jsp.

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Introduction



Introduction

The Medical Expenditure Panel Survey Insurance Component (MEPS-IC) is an annual survey of private employers and State and local governments. The MEPS-IC produces national and State-level estimates of employer-sponsored insurance, including offered plans, costs, employee eligibility, and number of enrollees. The MEPS-IC is sponsored by the Agency for Healthcare Research and Quality and is fielded by the U.S. Census Bureau.

This chartbook provides both single-year and multiyear trend analyses using private-sector MEPS-IC data from 2004 to 2017. To best convey key information from the MEPS-IC, the report is presented in five sections: Health Insurance Offer Rates; Employee Eligibility and Enrollment; Health Insurance Premiums; Employee and Employer Premium Contributions; and Employee Cost Sharing. Each section provides charts and discussion with links to MEPS-IC data tables that contain the estimates and standard errors for each exhibit.

Many of the estimates in this publication are categorized by firm sizes that are relevant to recent changes in national healthcare policy. Note that the firm-size categories used in the charts and tables are based on actual employment counts rather than full-time equivalent (FTE) counts, because the MEPS-IC does not collect FTE employment figures.

Each section discusses the estimates to highlight trends and differences by employer and workforce characteristics. If a comparison of estimates is presented in the discussion, any differences are statistically significant at the 0.05 level, unless otherwise noted. In some cases, differences noted in the text, in estimates as well as statistical significance of comparisons, may vary slightly from calculations performed using data in the exhibits or MEPS-IC data available on the MEPS website due to rounding.

In addition, compared with tests performed in the 2016 MEPS-IC Chartbook, tests performed in this year's chartbook used estimates containing additional digits after the decimal place. This change may have resulted in different conclusions than the 2016 chartbook regarding comparisons of estimates. All dollar estimates are nominal (not adjusted for inflation).

Background

The IC is one of three annual component surveys that make up MEPS. The other two components are the Household Component (HC) and the Medical Provider Component (MPC). The HC is a nationally representative survey of the U.S. civilian noninstitutionalized population that collects data at both the person and household levels. The MPC collects information from a sample of physicians, hospitals, home health agencies, and pharmacies that provided services to HC respondents.

The MEPS-IC uses two independent samples: the private sector and the public sector. The private-sector sample is composed of about 42,000 business establishments from more than 7 million establishments found on the Business Register at the U.S. Census Bureau, with 5.4 percent of the sample determined during the data collection process to be out of scope. In 2017, the response rate for the private sector was 65.8 percent of the remaining in-scope sample units.

An establishment is a single business entity or location. Firms (also often referred to as companies) can include one or more establishments. An example of a multi-establishment firm is a chain of grocery stores, where the establishments of the firm are the sites of the individual grocery stores. The charts and tables in this publication report characteristics within firm-based size categories.

The public-sector sample of the MEPS-IC selects almost 3,000 State and local government agencies. However, this report focuses only on the private sector. Additional information on MEPS-IC sampling can be found in *Sample Design of the 2017 Medical Expenditure Panel Survey Insurance Component* (Davis, 2018).

There was no MEPS-IC survey to collect 2007 data due to the transition from retrospective to current-year data collection. This methodological change improved the accuracy and timeliness of the IC estimates. More information about this design change can be found in *Switching From Retrospective to Current-Year Data Collection in the Medical Expenditure Panel Survey - Insurance Component* (Kearney & Sommers, 2007).

Data Presentation

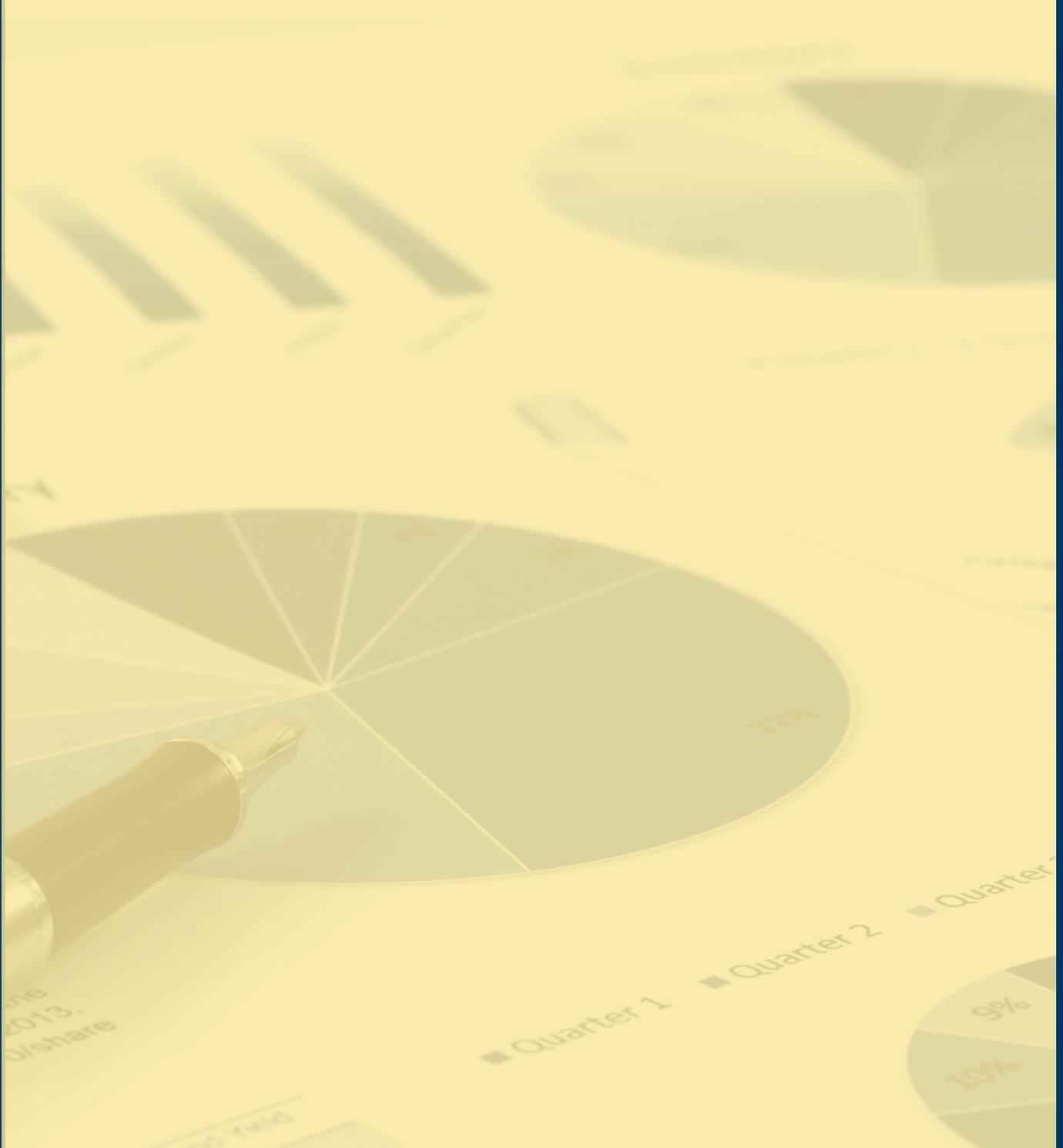
For purposes of the analyses presented in this chartbook, the District of Columbia is treated as a State. In addition, exhibits are organized by category (e.g., premium type, firm size), so references to exhibits in the text may not be in numeric order (e.g., Exhibits 3.1, 3.3, and 3.5 instead of 3.1, 3.2, and 3.3).

References

Davis K. Sample design of the 2017 Medical Expenditure Panel Survey Insurance Component. Methodology Report #31. Rockville, MD: Agency for Healthcare Research and Quality; July 2018. https://meps.ahrq.gov/data_files/publications/mr31/mr31.shtml. Accessed August 17, 2018.

Kearney A, Sommers J. Switching from retrospective to current-year data collection in the Medical Expenditure Panel Survey - Insurance Component. ICES-III: Third International Conference on Establishment Surveys, Conference Proceedings, Montréal, Québec, Canada; June 2007.

Executive Summary



Overview

Employer-sponsored insurance (ESI) is the primary source of health insurance coverage for individuals under age 65. This chartbook uses data for private-sector establishments in the Medical Expenditure Panel Survey-Insurance Component (MEPS-IC) to describe trends in employer coverage, premiums, and benefits from 2004 to 2017. The MEPS-IC is an annual survey of private employers and State and local governments and is designed to be representative of all 50 States and the District of Columbia. The large sample size (about 42,000 private-sector establishments), combined with a response rate of 65.8 percent in 2017, permits analyses of variations in ESI by firm size and across States that are not readily available from other sources.

Examining trends by firm size and across States is important due to variation in insurance markets along these dimensions. Historically, insurance markets have differed by firm size due to smaller firms' more limited ability to pool risk and their higher administrative costs compared with larger firms. State variation in ESI markets may reflect differences in employment patterns, healthcare prices, and utilization, as well as differences in State approaches to regulating private insurance and administering Medicaid.

The period presented in the chartbook, 2004 to 2017, shows trends through a period of change in national healthcare policy that could have affected national ESI trends, as well as trends by firm size. This chartbook describes trends and patterns in ESI overall, by firm size, and by State. All differences noted are at the 0.05 significance level unless otherwise specified. All dollar estimates are nominal (not adjusted for inflation).

Summary of Findings

Employee Enrollment in Health Insurance

Between 2016 and 2017, there was no significant change in the overall percentage of private-sector employees enrolled in a health insurance plan offered by their employers ("enrollment rate"). There was also no significant change in the enrollment rate in any firm-size category.

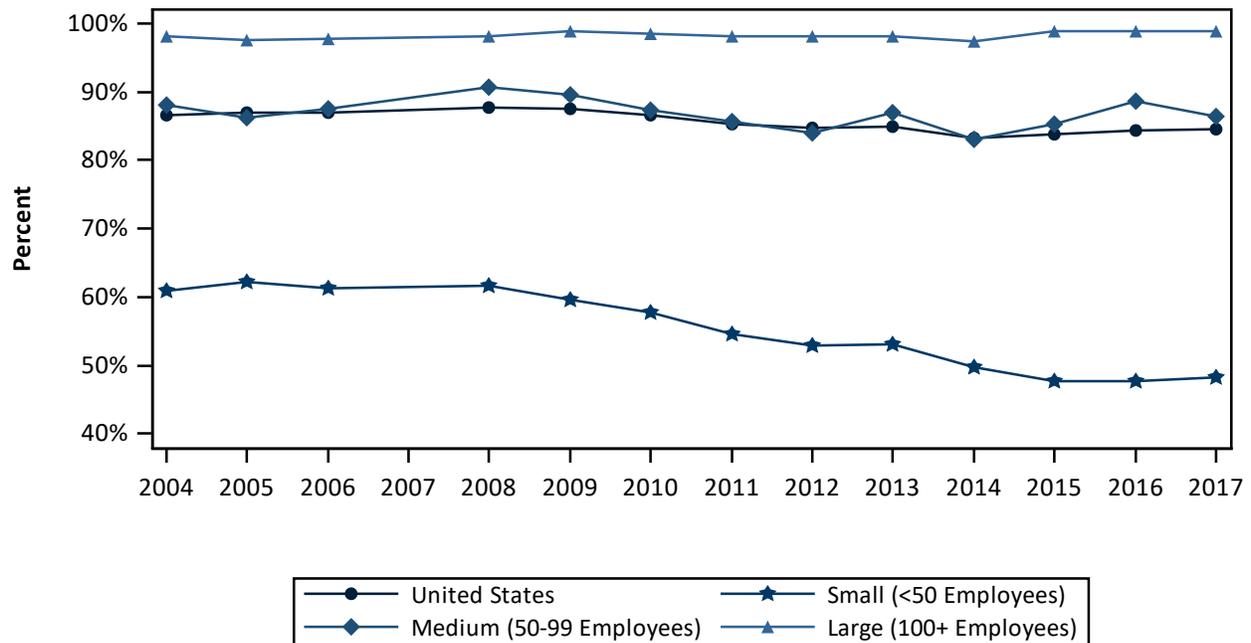
The enrollment rate reflects the combination of employers' decisions about offering health insurance and employee eligibility for such coverage, as well as employees' decisions to take up coverage if eligible. Offer rates, eligibility rates, and take-up rates, as well as coverage rates among employees offered insurance, are described further below.

Availability of Coverage: Offer Rates

There was no significant change in the overall percentage of employees working at establishments where insurance was offered ("the offer rate") between 2016 (84.3 percent) and 2017 (84.5 percent). In addition, there were no significant year-to-year changes between 2014 and 2016 (Exhibit ES.1).

While there were no significant year-to-year changes between 2014 and 2017, offer rates increased from 83.2 percent in 2014 to 84.5 percent in 2017, after decreasing by 1.7 percentage points from 2013 to 2014. These changes resulted in no significant difference in offer rates between 2013 and 2017. Between 2004 and 2013, the overall percentage of employees who worked for employers that offered health insurance declined from 86.7 percent to 84.9 percent, with almost all of the decline occurring between 2009 and 2012.

Exhibit ES.1
Percentage of private-sector employees in establishments that offer health insurance, by firm size, 2004-2017

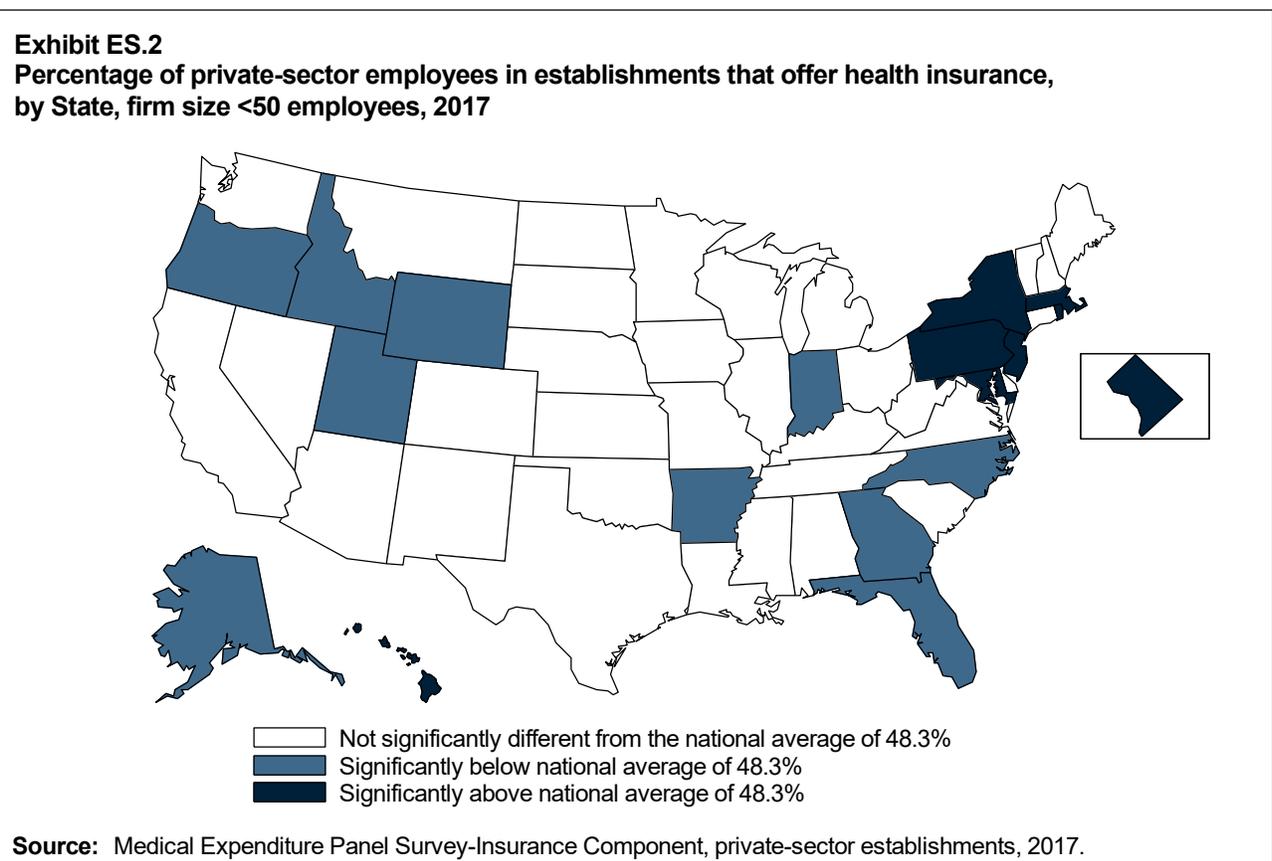


Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

There were no significant changes in offer rates at medium (50 to 99 employees) and large (100 or more employees) employers from 2016 to 2017 (88.6 percent in 2016 and 86.3 percent in 2017 for medium employers and 98.9 percent for large employers in both years). There were also no significant changes in the offer rates at small employers (fewer than 50 employees) between 2016 (47.7 percent) and 2017 (48.3 percent) or between 2015 and 2016. This period of relative stability for small firms followed a 7-year period between 2008 and 2015 during which offer rates declined from 61.6 percent to 47.6 percent. From 2016 to 2017, offer rates in the smallest firms (fewer than 10 workers) increased by 2.4 percentage points to 30.8 percent, the first significant year-to-year increase in offer rates at firms of this size in the 2004 to 2017 period (Section 1, Exhibit 1.2).

Since almost all large firms offer health insurance coverage, offer rates among small firms are an important factor contributing to overall State ESI offer rates, along with the distribution of employers by firm size in the State. Nationwide, a little less than half (48.3 percent) of employees of small firms (fewer than 50 employees) worked at establishments that offered insurance. However, the availability of workplace coverage varied substantially across the country (Exhibit ES.2).

States with small-employer offer rates exceeding the national average were the District of Columbia, Hawaii, Maryland, Massachusetts, New Jersey, New York, Pennsylvania, and Rhode Island. (Exhibit ES.2). States with small-employer offer rates below the national average were Alaska, Arkansas, Florida, Georgia, Idaho, Indiana, North Carolina, Oregon, Utah, and Wyoming (Exhibit ES.2).

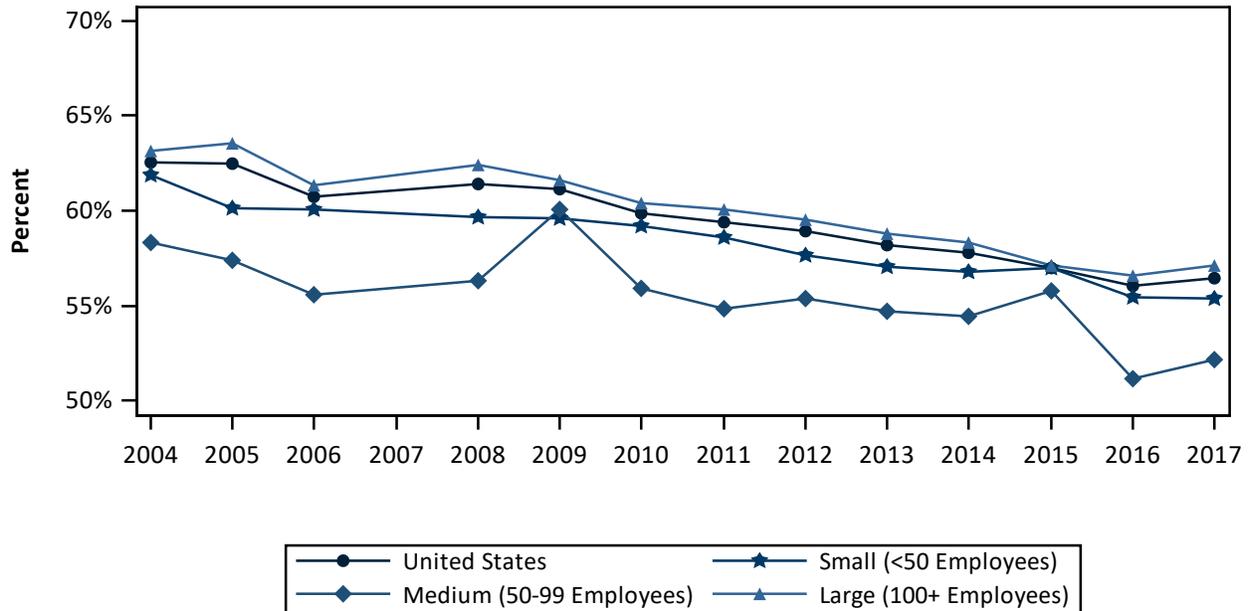


Employee Coverage, Eligibility, and Take-Up

Among establishments that offered insurance, 56.5 percent of employees were enrolled in coverage through their employer (the “coverage rate”) and 76.8 percent were eligible for health insurance (the “eligibility rate”). Among eligible employees, 73.5 percent were enrolled in their employer’s health insurance (the “take-up rate”) (Exhibit ES.3, Exhibit ES.4, Exhibit ES.5).

Exhibit ES.3: Coverage Rate

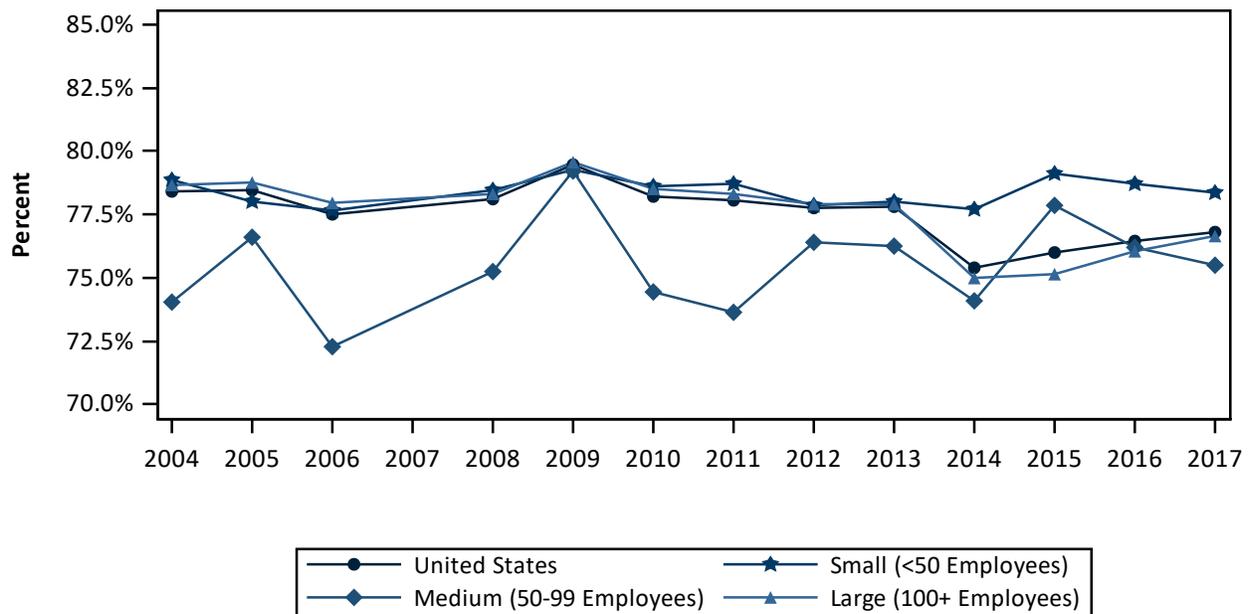
Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, all employees in establishments that offer health insurance.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit ES.4: Eligibility Rate

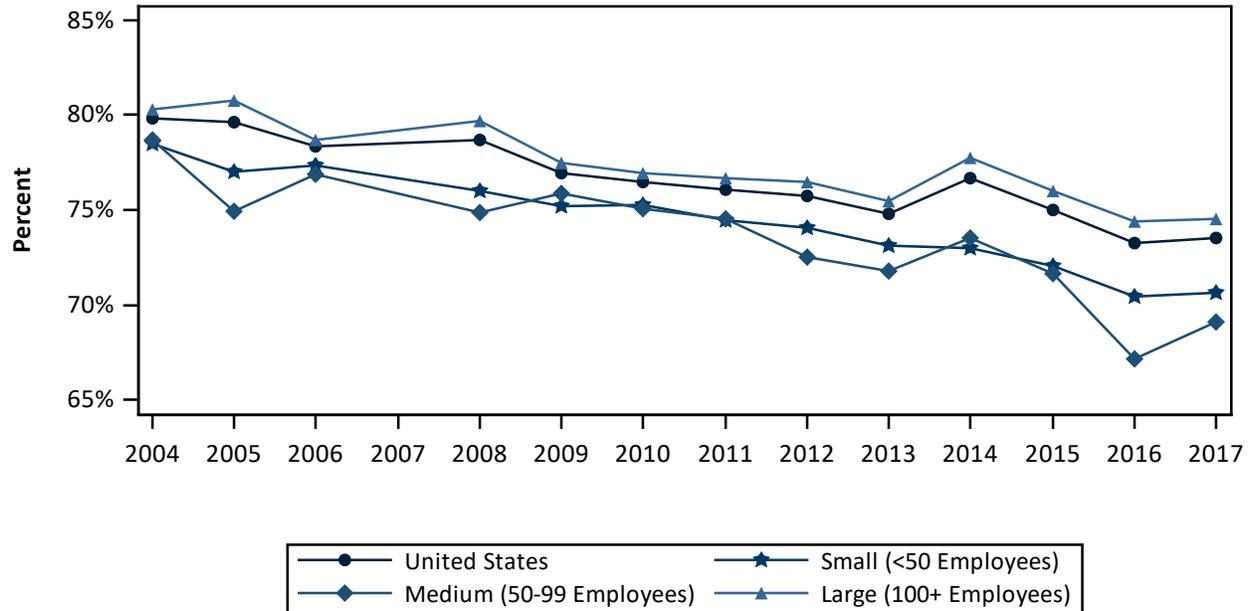
Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, all employees in establishments that offer health insurance.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit ES.5: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, eligible employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

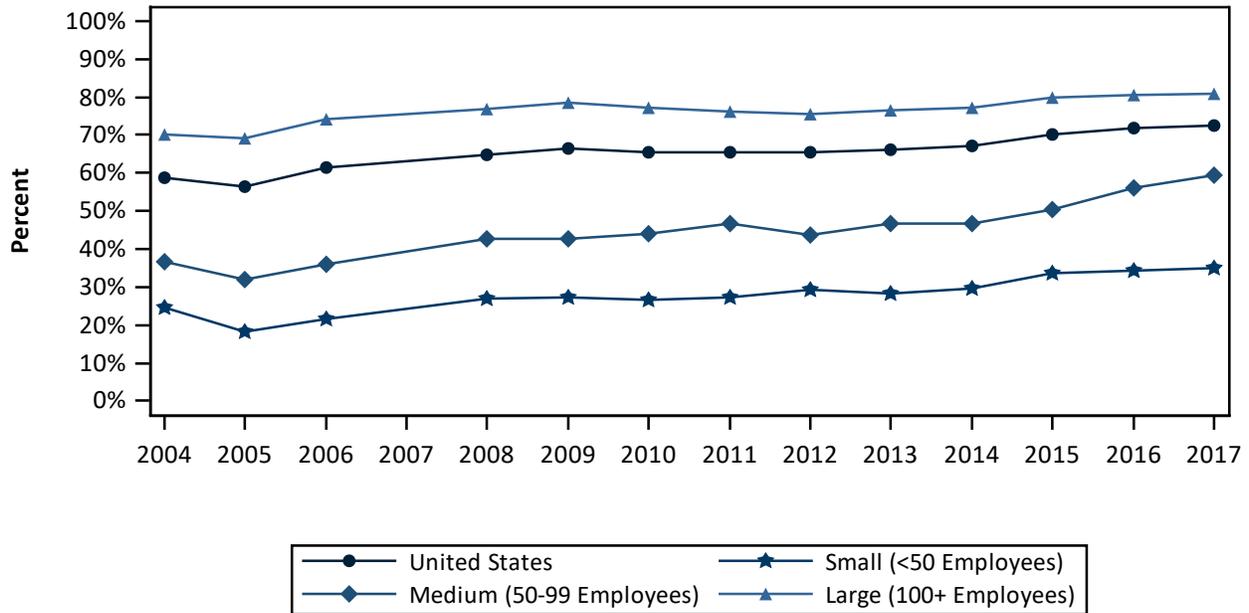
There were no significant changes in coverage, eligibility, or take-up rates between 2016 and 2017. However, coverage, eligibility, and take-up rates in 2017 were lower than earlier in the 2004 to 2017 period. Specifically, coverage rates were significantly lower in 2017 than in all years from 2004 to 2014 and eligibility rates were significantly lower than in all years from 2004 to 2013 except 2006. Take-up rates were significantly lower in 2017 than in all years from 2004 to 2015.

Choice of Plans

There was no significant change in the percentage of employees with a choice of plans between 2016 and 2017 (71.7 percent in 2016 and 72.4 percent in 2017). This followed a period where these rates increased by 3.2 percentage points from 2014 to 2015 and by 1.5 percentage points from 2015 to 2016 ($p < 0.10$). The availability of plan choice was significantly higher in 2017 than in 2004 for small employers (34.9 percent vs. 24.7 percent), medium employers (59.3 percent vs. 36.7 percent), and large employers (81.0 percent vs. 70.2 percent) (Exhibit ES.6).

Exhibit ES.6

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

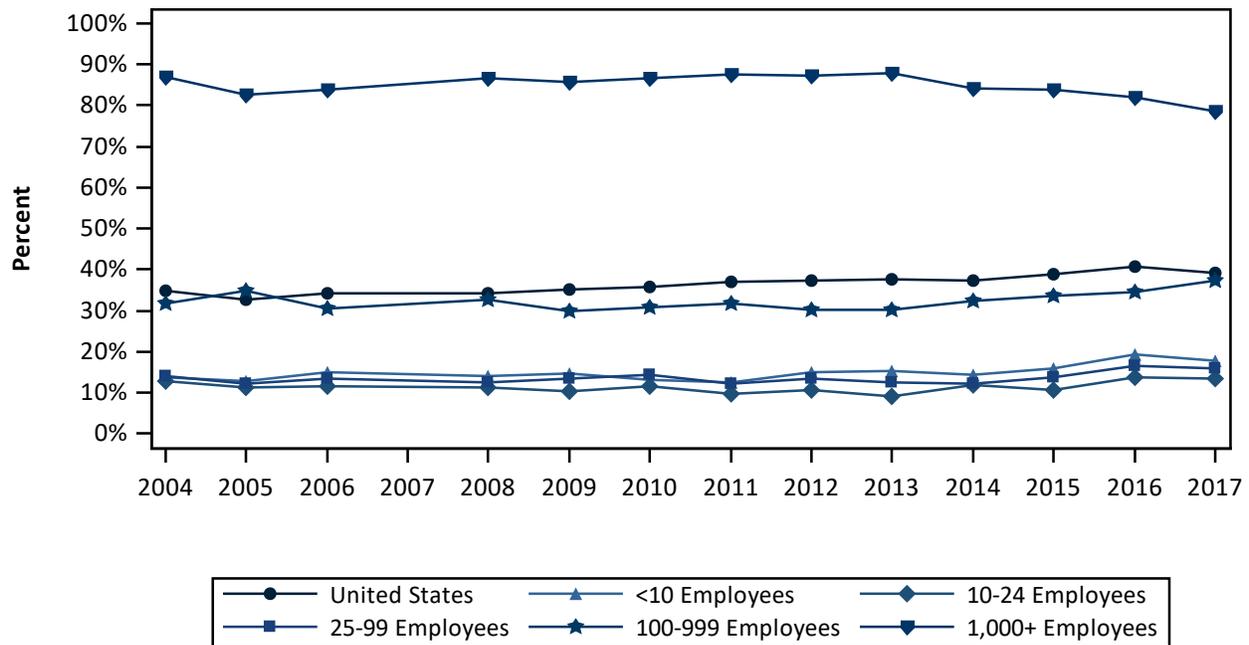
Self-Insured Plans

Between 2015 and 2017, the percentage of offering establishments that self-insured at least one plan first rose and then fell back to its 2015 level in 2017 (39.0 percent in 2015, 40.7 percent in 2016, 39.2 percent in 2017; $p < 0.10$ for the 2016 to 2017 decline) (Exhibit ES.7). The largest firms were the only firm size category to experience a significant change in the percentage of establishments that self-insured at least one plan from 2016 to 2017, falling from 81.9 percent to 78.6 percent. This decline brought the 2017 level for the largest firms to its lowest level in the 2004 to 2017 period.

Among employers that offered insurance, 13.3 percent to 17.7 percent of establishments in the three firm-size categories with fewer than 100 workers self-insured at least one plan in 2017. By contrast, 37.2 percent and 78.6 percent of offering establishments in firms with 100 to 999 and 1,000 or more employees, respectively, self-insured at least one plan. There were similar differences by firm size in the percentage of eligible employees who worked for an employer that self-insured at least one plan (Section 1, Exhibit 1.12).

Exhibit ES.7

Percentage of private-sector establishments that offer health insurance that self-insure at least one plan, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Premiums

In 2017, average annual health insurance premiums per enrolled employee with private-sector employer coverage were \$6,368 for single coverage, \$12,789 for employee-plus-one coverage, and \$18,687 for family coverage. These amounts represent increases of 4.4 percent for single coverage and 5.5 percent for both employee-plus-one and family coverage over 2016 levels (Exhibit ES.8).

The 2016 to 2017 growth rates for single premiums and employee-plus-one premiums (4.4 percent and 5.5 percent, respectively) were higher than the growth rates for these types of coverage from 2014 to 2015 and 2015 to 2016, which ranged from 2.2 percent to 2.7 percent. The 2016 to 2017 growth rate for family premiums (5.5 percent) was higher than the growth rate for 2015 to 2016 (2.2 percent). Between 2004 and 2017, premiums for the three types of coverage grew by between 71.9 percent and 86.8 percent (average annual growth rates of between 4.3 percent and 4.9 percent, data not shown).

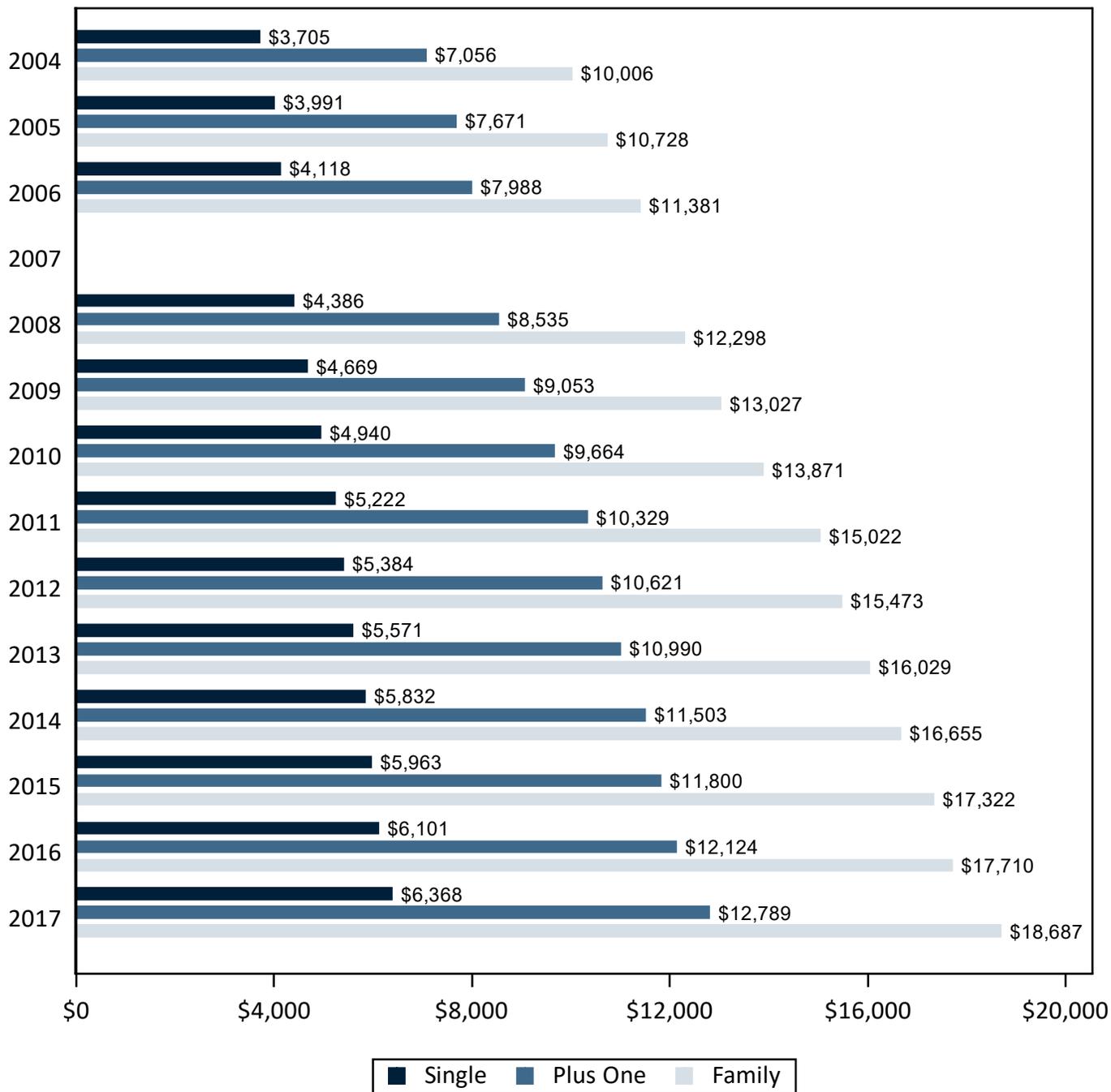
From 2016 to 2017, growth rates for all three types of premiums were close to smoothed longer term growth rates (data not shown). Specifically, there were no significant differences between the 2016 to 2017 growth rates and the average annual growth rate from 2004 to 2017 for single coverage (4.4 percent vs. 4.3 percent), employee-plus-one coverage (5.5 percent vs. 4.7 percent), or family coverage (5.5 percent vs. 4.9 percent) (Exhibit ES.9).

From 2010 through 2017, average single premiums were lower in medium firms (50 to 99 employees) than in small (fewer than 50 employees) or large firms (100 or more employees) ($p < 0.10$ for the differences in 2017) (Exhibit ES.10). From 2004 to 2017, there were no significant differences by firm size in the growth of single premiums, as single premiums grew by 70.6 percent (\$3,763 to \$6,421) in small firms, 66.1 percent (\$3,711 to \$6,163) in medium firms, and 73.1 percent (\$3,684 to \$6,377) in large firms (Exhibit ES.10).

In 2004, employee-plus-one premiums were higher in small firms (\$7,373) than in medium firms (\$6,945) or large firms (\$7,002). From 2004 to 2017, however, employee-plus-one premiums grew more rapidly in large firms (83.9 percent) than in medium firms (71.8 percent) and small firms (70.3 percent). By 2017, average employee-plus-one premiums in large firms (\$12,878) were higher than in medium firms (\$11,931) and small firms (\$12,558) ($p < 0.10$) (Exhibit ES.11).

Exhibit ES.8

Average total premiums per enrolled employee for single, employee-plus-one, and family coverage, 2004-2017

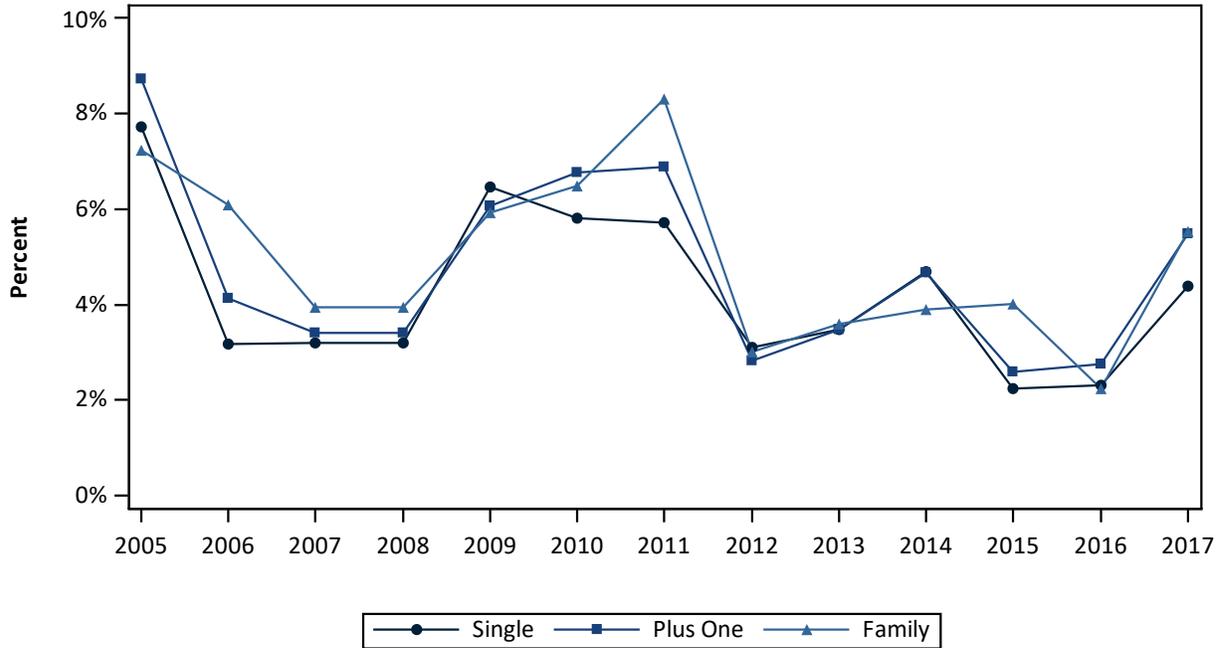


Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit ES.9

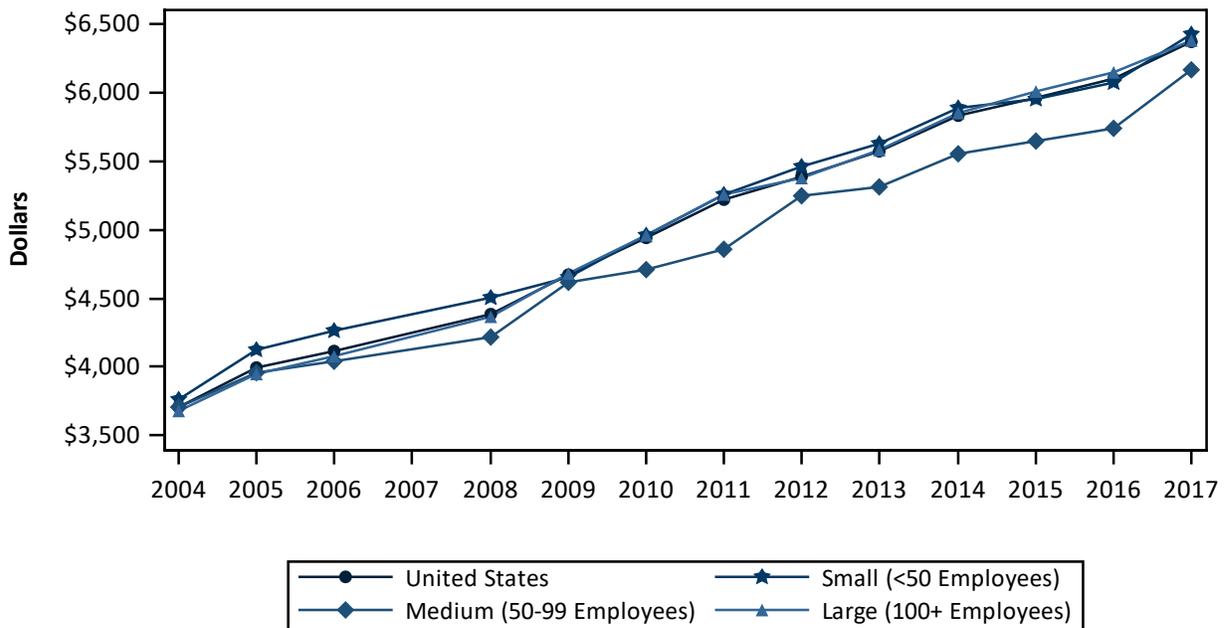
Percentage change in total premiums from previous year per enrolled employee for single, employee-plus-one, and family coverage, 2005-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Therefore, growth rates were annualized over the 2006-2008 period.

Exhibit ES.10

Average total single premium per enrolled employee, by firm size, 2004-2017

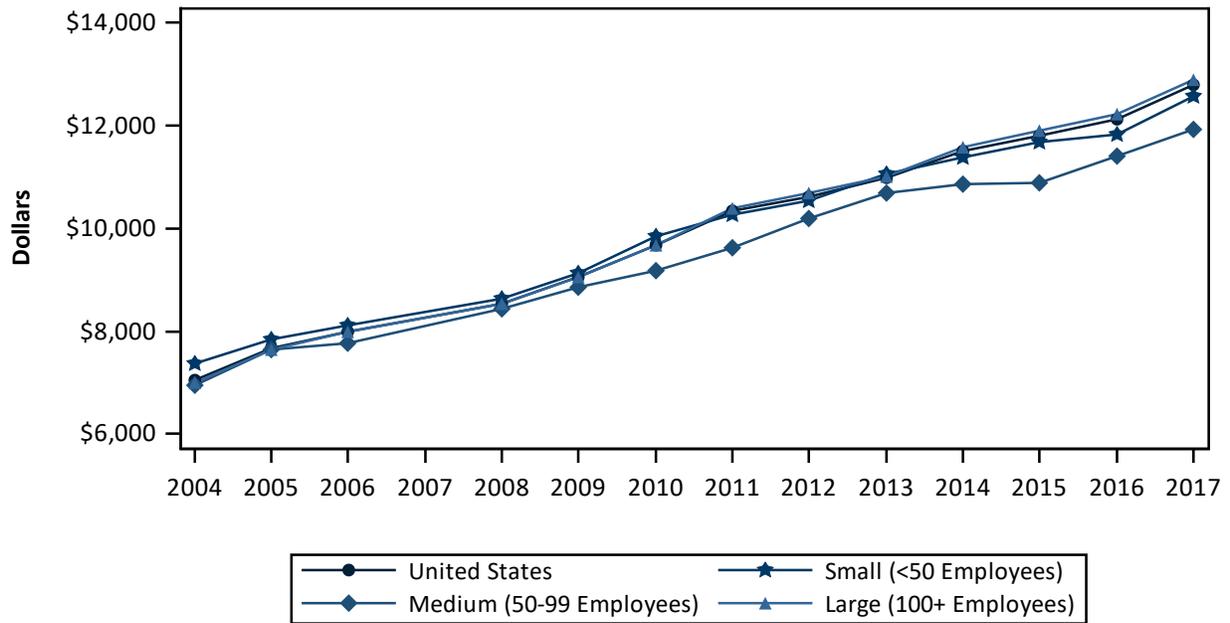


Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit ES.11

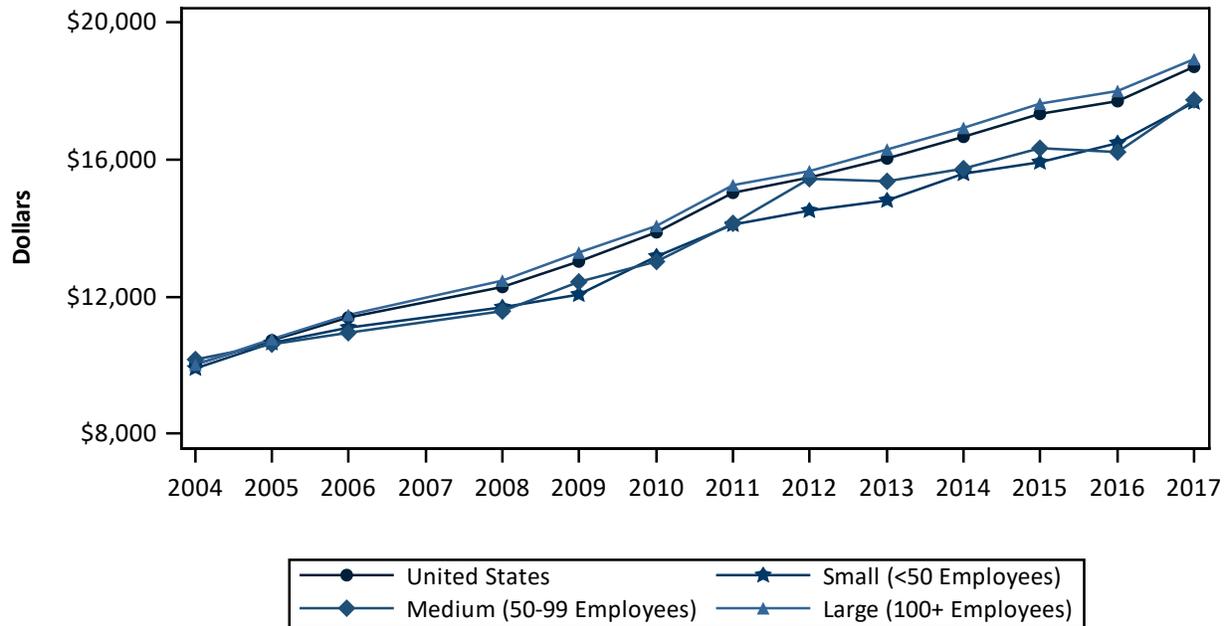
Average total employee-plus-one premium per enrolled employee, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

In 2004, there were no statistically significant differences in average family premiums by firm size. However, from 2004 to 2017, family premiums grew faster at large firms than at smaller firms (88.8 percent in firms with 100 or more employees vs. 74.3 percent in firms with 50 to 99 employees and 78.3 percent in firms with fewer than 50 employees). Thus, by 2017, family premiums in the largest firms (\$18,911) were about 7 percent higher than in firms with 50 to 99 employees (\$17,735) and firms with fewer than 50 employees (\$17,649) (Exhibit ES.12).

Exhibit ES.12**Average total family premium per enrolled employee, by firm size, 2004-2017**

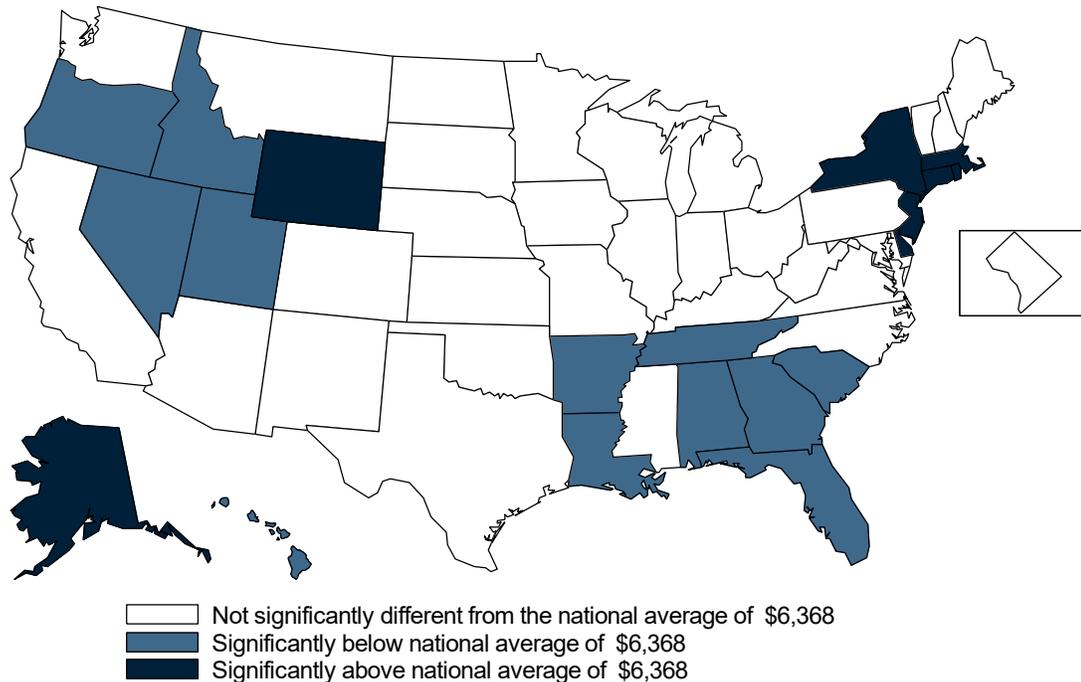
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

One factor that may partially explain higher family premiums in larger firms is they are much more likely to offer employee-plus-one coverage than smaller firms (e.g., 95.5 percent of employees in firms with 1,000 or more employees have offers of employee-plus-one coverage compared with 63.8 percent of employees in firms with fewer than 10 employees) (Section 1, Exhibit 1.13). Thus, at large firms, two-person families are less likely to be included in the risk pool for family policies, and average family premiums would tend to be higher than they would have been if two-person families were in the family policy risk pool along with larger families. At many small firms, on the other hand, workers seeking coverage for themselves and a single dependent may purchase a family policy if no employee-plus-one coverage is offered, which would tend to make the average family policy premium lower in those firms.

In total, 12 States had average annual premiums for single coverage that were significantly lower than the national average of \$6,368. These States were Alabama, Arkansas, Florida, Georgia, Hawaii, Idaho, Louisiana, Nevada, Oregon, South Carolina, Tennessee, and Utah. Another 8 States had average annual single premiums that were significantly higher than the national average. These States were Alaska, Connecticut, Delaware, Massachusetts, New Jersey, New York, Rhode Island, and Wyoming (Exhibit ES.13).

Exhibit ES.13
Average total single premium per enrolled employee, by State, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Employee Premium Contributions

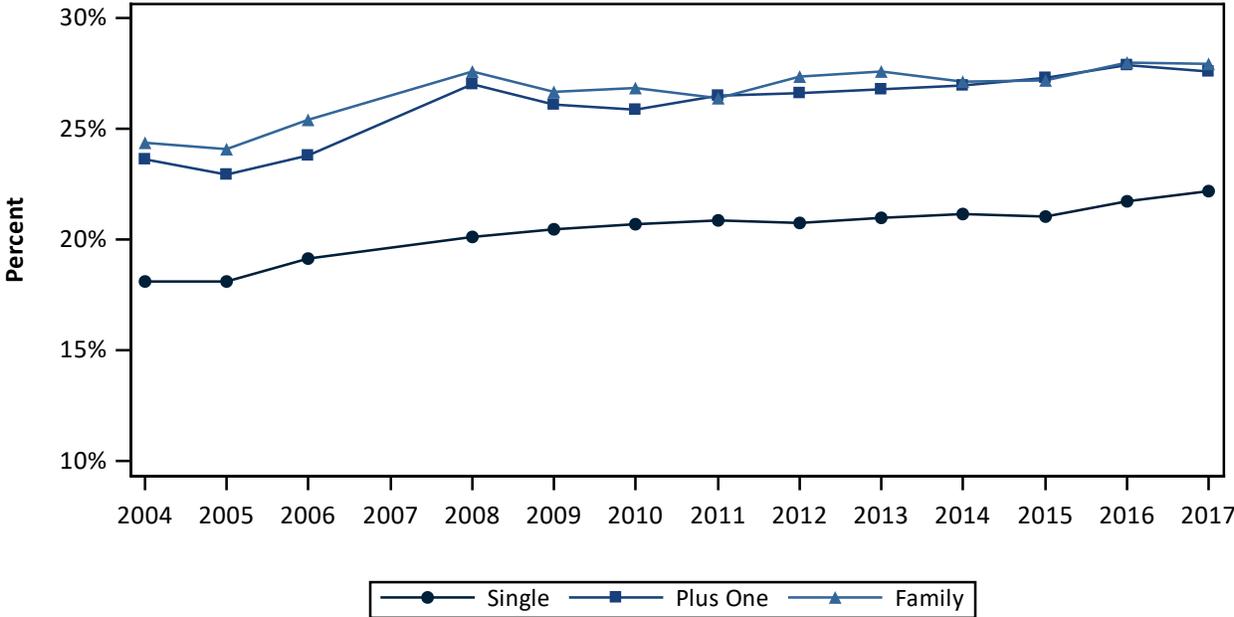
In 2017, enrolled employees paid 22.2 percent of total premiums for single coverage, 27.6 percent for employee-plus-one coverage, and 27.9 percent for family coverage (Exhibit ES.14). The percentages of premiums paid by enrolled employees in 2017 for these three coverage types were not significantly different from their 2016 levels.

Average employee contributions in 2017 were \$1,415 for single coverage, \$3,531 for employee-plus-one coverage, and \$5,218 for family coverage, representing increases of 6.8 percent, 4.6 percent, and 5.3 percent, respectively, over 2016 levels. (Exhibit ES.15).

From 2004 to 2017, the percentage of premiums contributed by employees increased by 4.1 percentage points, 4.0 percentage points, and 3.5 percentage points for single, employee-plus-one, and family coverage, respectively (Exhibit ES.14). This was because employee contributions increased more rapidly than employer contributions over the entire period for each type of coverage (Section 4, Exhibits 4.1, 4.3, 4.4, and 4.5).

Exhibit ES.14

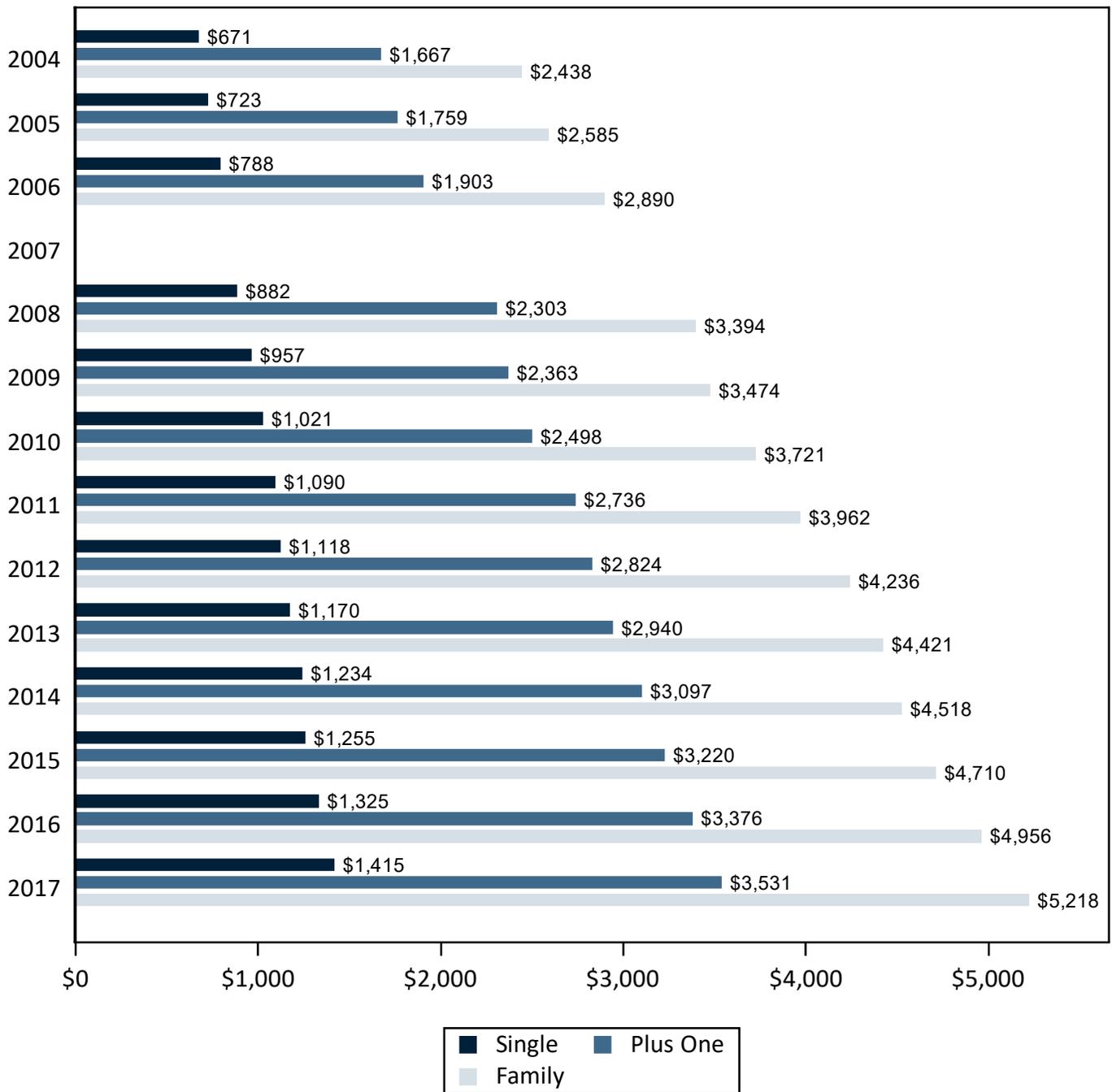
Average percentage of premium contributed by employees for single, employee-plus-one, and family coverage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit ES.15

Average annual employee contribution (in dollars) for single, employee-plus-one, and family coverage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

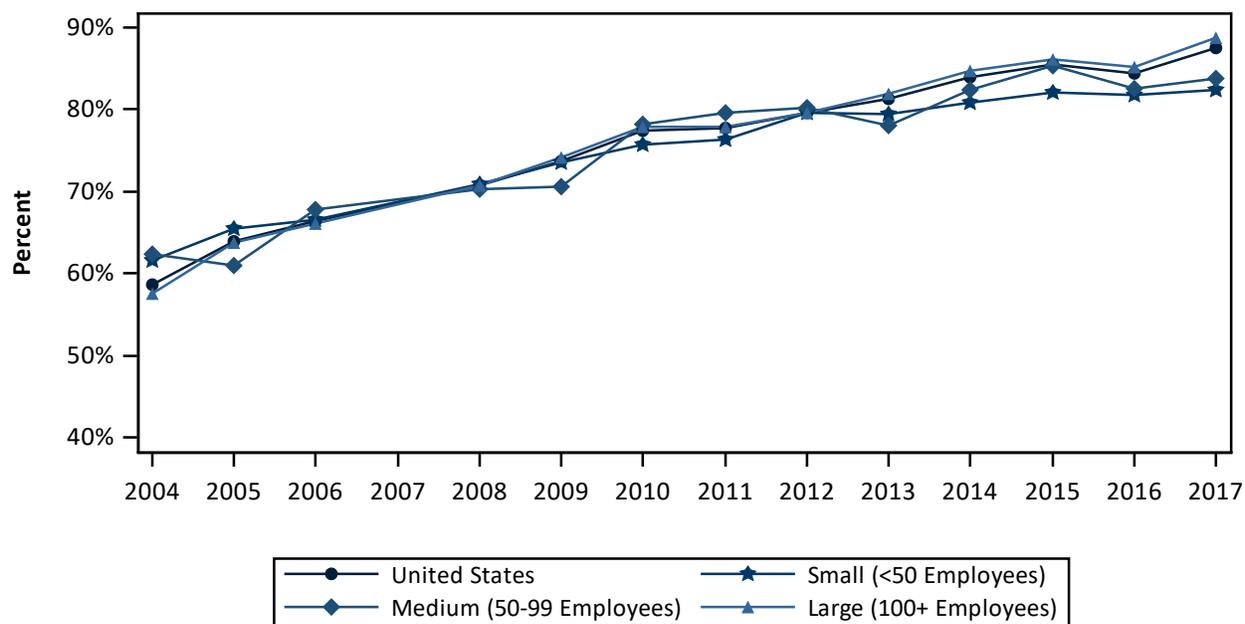
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Plan Benefits: Deductibles

The percentage of enrolled employees in a health insurance plan with a deductible increased from 2016 (84.5 percent) to 2017 (87.5 percent) (Exhibit ES.16). Except for 2011 and 2016, this percentage increased in every year from 2004 to 2017 ($p < 0.10$ in 2013). From 2004 to 2017, the percentage of enrollees in plans with deductibles increased from 58.7 percent to 87.5 percent.

Among enrollees with deductibles, the average individual deductible increased from \$1,696 in 2016 to \$1,808 in 2017 (Figure ES.17). The average family deductible increased from \$3,069 in 2016 to \$3,396 in 2017 (Section 5, Exhibit 5.3). Average individual deductibles were higher in small (\$2,136) and medium firms (\$2,361) than in large firms (\$1,681) in 2017. Family deductibles were also higher in small (\$4,447) and medium firms (\$4,218) than in large firms (\$3,195) in 2017.

Exhibit ES.16
Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by firm size, 2004-2017

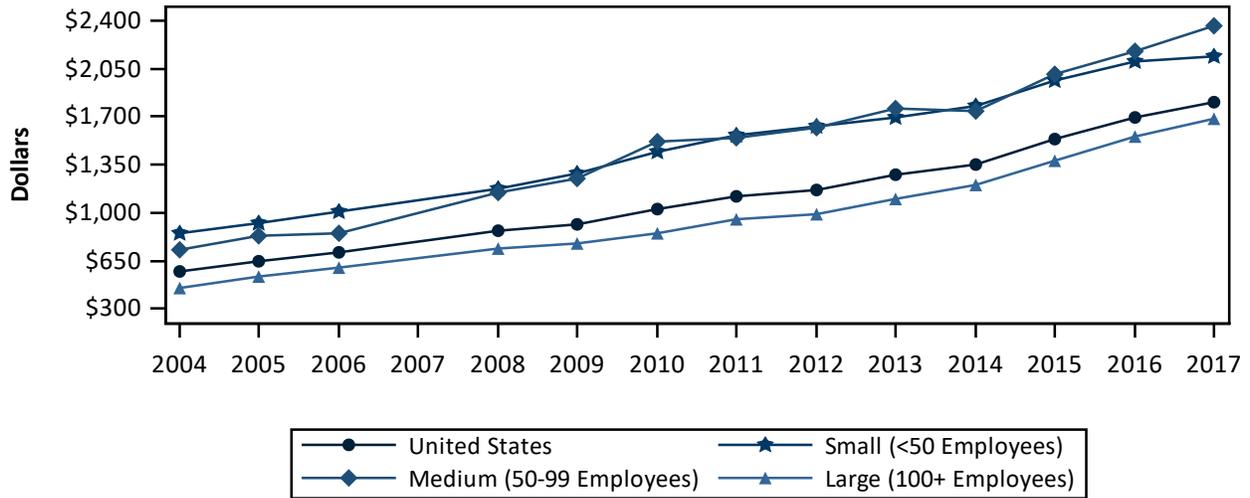


Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit ES.17

Average individual deductible (in dollars) per employee enrolled with single coverage in a health insurance plan with a deductible, overall and by firm size, 2004-2017



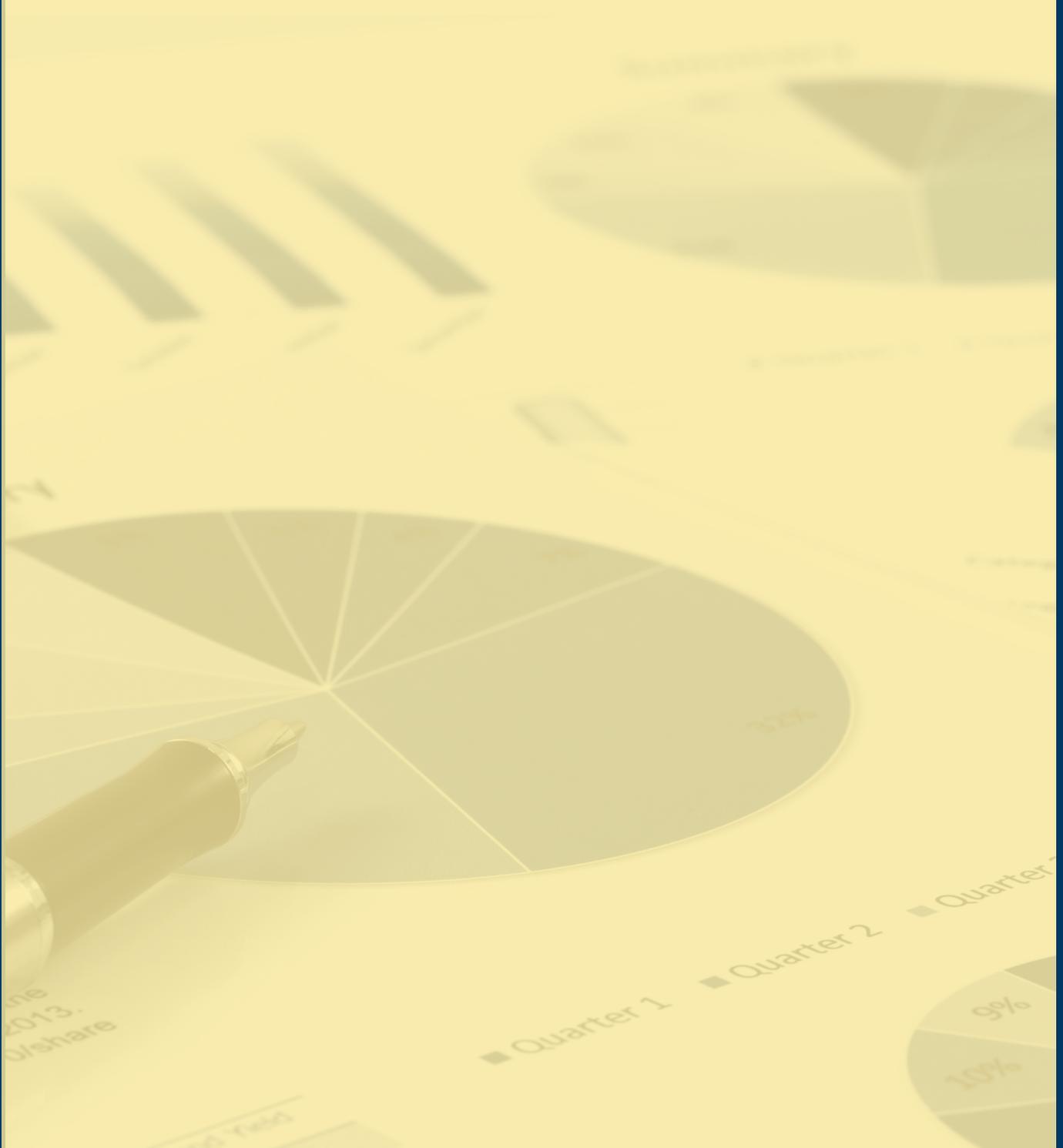
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. In 2015, the methodology for calibrating the upper edit bound for the individual deductible amount changed, causing the average individual deductible per employee enrolled with single coverage in a health insurance plan with a deductible to increase by about 5 percent at the national level in 2015 relative to the earlier methodology.

Conclusion

AHRQ hopes this chartbook helps to make MEPS-IC data more readily usable by providing trends nationally and by firm size, by presenting national and State-level estimates in one document, and by providing additional firm-size cuts relevant to recent policy changes. More information is available at www.meps.ahrq.gov. AHRQ welcomes feedback on additional ways to make the data more usable to the public.

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Section I: Health Insurance Offer Rates



Health Insurance Offer Rates

Availability of Coverage to Active Employees and Retirees

In 2017, almost all employees (98.9 percent) in firms with 100 or more employees worked at establishments that offered health insurance. In comparison, about half (48.3 percent) of employees at firms with fewer than 50 employees worked where health insurance was offered (Exhibit 1.1).

Historically, smaller employers have been less likely to offer coverage than larger employers for a number of reasons, including:

- Smaller risk pools, which result in higher premium costs (holding benefits constant),
- Higher administrative costs, and
- Lack of dedicated staff to select and administer health benefits.

Because of changes in national healthcare policy, employers began facing new incentives regarding their employer-sponsored insurance decisions. For example, starting in 2014 and throughout the 2014 through 2017 period, most people were required to either obtain health insurance or make an individual shared responsibility payment. Employer shared responsibility provisions began to take effect for employers with 100 or more full-time-equivalent employees in 2015 and for employers with 50 or more employees in 2016.

This section presents estimates of the percentage of employees who work where coverage is offered (the “offer rate”). It also provides information on the characteristics of offered coverage, including the availability of dependent coverage, choice of plans, and retiree coverage. In addition, this section presents estimates of the percentage of offering establishments that self-insure at least one plan.

Offer Rates Overall and by Firm Size, 2004 to 2017

All Employers

- There was no significant change in the overall percentage of employees working at establishments where insurance was offered (“the offer rate”) between 2016 (84.3 percent) and 2017 (84.5 percent). In addition, there were no significant year-to-year changes between 2014 and 2016 (Exhibit 1.1).
- While there were no significant year-to-year changes between 2014 and 2017, offer rates increased from 83.2 percent in 2014 to 84.5 percent in 2017, after decreasing by 1.7 percentage points from 2013 to 2014. These changes resulted in no significant difference in offer rates between 2013 and 2017.
- Between 2004 and 2013, the overall percentage of employees who worked for employers that offered health insurance declined from 86.7 percent to 84.9 percent, with almost all of the decline occurring between 2009 and 2012. During that time, offer rates declined in each year ($p < 0.10$ for 2012).

Small Employers (Firms With Fewer Than 50 Employees)

- There were no significant changes in the offer rates at small employers between 2016 (47.7 percent) and 2017 (48.3 percent) or between 2015 and 2016. This period of relative stability followed a 7-year period between 2008 and 2015 during which offer rates declined from 61.6 percent to 47.6 percent, with significant declines in every year except 2013 (Exhibit 1.1).
- From 2016 to 2017, offer rates in the smallest firms (fewer than 10 workers) increased by 2.4 percentage points to 30.8 percent, the first significant year-to-year increase in offer rates at firms of this size in the 2004 to 2017 period. This increase offset a 2.0 percentage point decline from 2015 to 2016 ($p < 0.10$). Between 2008 and 2015, offer rates at the smallest firms declined each year (except 2012 and 2013), falling from 45.0 percent in 2008 to 30.4 percent in 2015 (Exhibit 1.2).
- There was no statistically significant change in offer rates for employees in firms with 10 to 24 workers between 2016 (54.0 percent) and 2017 (52.8 percent) or between 2015 and 2016. However, between 2013 and 2015, offer rates at such firms declined by a total of 6.7 percentage points, 3.8 percentage points from 2013 to 2014 and 2.9 percentage points from 2014 to 2015 ($p < 0.10$). Offer rates for employers of this size were relatively stable from 2004 to 2008 but declined by 10.2 percentage points between 2008 and 2013, from 69.5 percent in 2008 to 59.3 percent in 2013 (Exhibit 1.2).

Medium Employers (Firms With 50 to 99 Employees)

- There was no significant change in offer rates at medium employers (50 to 99 employees) from 2016 (88.6 percent) to 2017 (86.3 percent). In 2016, the first year that the federally mandated employer shared responsibility provisions took effect for firms of this size, offer rates increased by 3.3 percentage points, from 85.3 percent in 2015 to 88.6 percent in 2016 (Exhibit 1.1).
- Offer rates in 2017 for medium employers were not significantly higher than in 2015, but they were higher than in 2014 ($p < 0.10$) (Exhibit 1.1).
- From 2013 to 2014, offer rates for employers of this size declined by 4.0 percentage points, after increasing by 2.9 percentage points from 2012 to 2013 ($p < 0.10$), resulting in no significant difference in the 2012 and 2014 offer rates at medium employers (Exhibit 1.1).
- Between 2008 and 2012, offer rates at medium employers declined from 90.7 percent to 84.1 percent (Exhibit 1.1).

Large Employers (Firms With 100 or More Employees)

- The offer rate at large firms (100 or more employees) was unchanged in the 2-year period between 2015 (98.8 percent) and 2017 (98.9 percent) (Exhibit 1.1).
- Offer rates at firms with 100 to 999 employees were unchanged between 2016 and 2017, after increasing from 2015 to 2016 ($p < 0.10$) (Exhibit 1.2).
- While there were no significant year-to-year changes in offer rates at firms with 1,000 or more employees in the 2015 to 2017 period, offer rates at the largest employers were slightly lower in 2017 (99.5 percent) than in 2015 (99.8 percent, $p < 0.10$) (Exhibit 1.2).

- Offer rates at large employers (100 or more employees) increased from 97.3 percent in 2014 to 98.8 percent in 2015, the first year that the federally mandated employer shared responsibility provisions took effect for firms of this size. This increase occurred after a 0.7 percentage point decline from 2013 to 2014 and raised the 2015 offer rate for large employers above that for 2013 (Exhibit 1.1).
- The 2014 to 2015 increase in offer rates for large employers occurred among employers with 100 to 999 employees and those with 1,000 or more employees. Offer rates for employers with 100 to 999 employees increased from 92.7 percent in 2014 to 96.1 percent in 2015, offsetting the decline that occurred from 2013 (95.2 percent) to 2014 (92.7 percent). Offer rates for the largest employers increased from 99.1 percent to 99.8 percent from 2014 to 2015 (Exhibit 1.2).

Offer Rates by State, 2017

- Nationwide, 84.5 percent of all private-sector employees worked at establishments that offered insurance. The availability of workplace coverage varied substantially across the country (Exhibit 1.3). This variation was driven in part by differences in the distribution of workers by employer size across States (data not shown) and by differences across States in offer rates at smaller employers (Exhibit 1.4).
- States with offer rates exceeding the national average were Arizona, District of Columbia, Hawaii, Kentucky, Maryland, Massachusetts, New York, and Pennsylvania (Exhibit 1.3).
- States with offer rates below the national average in 2017 were Alaska, Arkansas, Idaho, Maine, Montana, New Mexico, North Carolina, Oregon, South Dakota, Utah, Vermont, and Wyoming (Exhibit 1.3).

Offer Rates at Small Employers, by State, 2017

- Nationwide, a little less than half (48.3 percent) of employees of small firms (fewer than 50 employees) worked at establishments that offered insurance. However, the availability of workplace coverage varied substantially across the country (Exhibit 1.4).
- States with small-employer offer rates exceeding the national average were the District of Columbia, Hawaii, Maryland, Massachusetts, New Jersey, New York, Pennsylvania, and Rhode Island (Exhibit 1.4).
- States with small-employer offer rates below the national average were Alaska, Arkansas, Florida, Georgia, Idaho, Indiana, North Carolina, Oregon, Utah, and Wyoming (Exhibit 1.4).

Offer Rates at Employers That Are Predominantly Low Wage vs. Higher Wage Establishments, by Firm Size, 2004 to 2017

- In 2017, workers at predominantly low-wage small employers (fewer than 50 employees) faced offer rates that were less than half the rate at small employers with higher wages (24.2 percent vs. 57.6 percent) (Exhibit 1.5). (Predominantly low-wage establishments are defined as those where 50 percent or more of an establishment's workforce were low wage. Wage levels used in the question about the wage distribution in the MEPS-IC questionnaire have

been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.)

- There were no significant changes in offer rates between 2016 and 2017 for any of the four subgroups of establishments jointly defined by firm size and wage level (Exhibit 1.5).
- There were no significant changes in offer rates at small employers with higher wages (establishments that were not predominantly low wage) between 2015 (58.4 percent) and 2017 (57.6 percent). Between 2014 and 2015, offer rates at such employers declined by 2.6 percentage points, which followed a 4.6 percentage point decline from 2013 to 2014. The total percentage point decline that occurred from 2013 to 2015 (7.2 percentage points) is about the same as that from 2008 to 2013 (7.6 percentage points). Offer rates at higher wage small employers in 2017 (57.6 percent) were 14.8 percentage points lower than in 2004 (72.4 percent) (Exhibit 1.5).
- There were no significant changes in offer rates at low-wage small employers between 2015 and 2017. Between 2014 and 2015, offer rates at such employers declined from 26.6 percent to 23.1 percent. This decrease followed a period of no significant change from 2012 to 2014. Offer rates at low-wage small employers declined by 10.5 percentage points between 2004 (38.5 percent) and 2012 (28.0 percent). Most of the decline in offer rates at low-wage small employers in this period occurred after 2008 (Exhibit 1.5).
- Offer rates at large employers (50 or more employees) with a predominantly low-wage workforce remained at a relatively high level in 2017 (94.0 percent). In the 2-year period between 2014 and 2016, offer rates at such employers increased by a total of 4.9 percentage points, composed of 1.8 percentage points between 2015 and 2016 and 3.1 percentage points between 2014 and 2015. These increases more than offset the 2.8 percentage point decline from 2013 to 2014 and brought the 2016 offer rate at large, predominantly low-wage employers (94.5 percent) to one of the highest rates in the 2004-2016 period, where it remained in 2017 (94.0 percent) (Exhibit 1.5).

Offer Rates by Industry, 2017

- Workers in mining and manufacturing had the highest likelihood of working where health insurance was offered (94.3 percent) while workers in the agriculture, fisheries, and forestry sector had the lowest offer rate (62.2 percent) among all industry sectors. Workers in construction and the other services category also had relatively low offer rates (74.4 percent and 75.2 percent, respectively) (Exhibit 1.6).
- Among workers at small firms (fewer than 50 employees), those employed in mining and manufacturing (67.1 percent) or wholesale trade (70.4 percent) had the highest likelihood of working where health insurance was offered (Exhibit 1.7).

Offer Rates by Selected Employer Characteristics, 2017

- Workers at nonprofit employers were more likely to work where health insurance was offered (92.8 percent) than workers at for-profit employers. Among for-profit employers, the

offer rate was higher at incorporated employers (85.3 percent) than at unincorporated employers (74.1 percent) (Exhibit 1.8).

- Offer rates increased with the firm's age, from 47.6 percent at firms 0 to 4 years old to 57.2 percent, 70.8 percent, and 93.3 percent for firms ages 5-9 years, 10-19 years, and 20 or more years, respectively (Exhibit 1.8).
- Workers at establishments that were part of firms with two or more locations had higher offer rates than those with only one location (98.5 percent vs. 64.1 percent) (Exhibit 1.8).
- Offer rates increased with the percentage of workers at the establishment who worked full time. Workers at establishments where 75 percent or more of the employees worked full time had an offer rate of 90.3 percent, compared with 81.6 percent, 76.7 percent, and 53.7 percent for workers at establishments with 50 to 74 percent, 25 to 49 percent, and 0 to 24 percent full-time employees, respectively (Exhibit 1.8).
- Employees in higher wage establishments were more likely to work where health insurance was offered than those in predominantly low-wage establishments (88.4 percent vs. 71.8 percent) (Exhibit 1.8).

Offer Rates by Selected Employer Characteristics and Firm Size, 2017

- Among large firms (100 or more employees), employees who worked at an employer that had been in business fewer than 20 years were less likely to be offered health insurance than employees at older firms. Offer rates ranged from 92.4 to 97.6 percent at employers in business fewer than 20 years versus 99.3 percent for employers in business 20 years or more (Exhibit 1.9).
- Also among large firms, the offer rate increased with the concentration of full-time workers. In 2017, the offer rate increased from 93.2 percent for employers with 0 to 24 percent full-time workers to 98.2 percent for employers with 25 to 49 percent full-time workers, and then to 99.5 and 99.4 percent for employers with 50 to 74 percent and 75 percent or more full-time workers, respectively (Exhibit 1.10).
- Overall, 48.3 percent of workers in establishments that were part of firms with fewer than 50 workers were offered coverage in 2017 (Exhibit 1.1). However, there was substantial variation by establishment characteristics. For example, compared with other categories (e.g., for profit, only one location), offer rates were notably higher for small employers that:
 - Were nonprofit (62.0 percent),
 - Were in business for 20 or more years (61.6 percent),
 - Had more than one location (73.4 percent),
 - Had workforces with 75 percent or more of employees working full time (60.9 percent), or
 - Had workforces that were not predominantly low wage (57.6 percent) (Exhibits 1.9 and 1.10).
- Offer rates were lower for workers in predominantly low-wage establishments than in higher wage establishments, regardless of whether they worked at a firm with fewer than 50 workers

(24.2 percent vs. 57.6 percent), 50 to 99 workers (72.7 percent vs. 92.0 percent), or 100 or more workers (97.3 percent vs. 99.3 percent) (Exhibit 1.10).

Availability of Self-Insured Plans, 2004 to 2017

- Among employers that offered insurance, 13.3 percent to 17.7 percent of establishments in the three firm size categories with fewer than 100 workers self-insured at least one plan in 2017. By contrast, 37.2 percent and 78.6 percent of offering establishments in firms with 100 to 999 and 1,000 or more employees, respectively, self-insured at least one plan. There were similar differences by firm size in the percentage of eligible employees who worked for an employer that self-insured at least one plan (Exhibits 1.11 and 1.12).
- Between 2015 and 2017, the percentage of offering establishments that self-insured at least one plan first rose and then fell back to its 2015 level in 2017 (39.0 percent in 2015, 40.7 percent in 2016, 39.2 percent in 2017; $p < 0.10$ for the 2016 to 2017 decline) (Exhibit 1.11).
- The largest firms were the only firm size category to experience a significant change in the percentage of establishments that self-insured at least one plan from 2016 to 2017, falling from 81.9 percent to 78.6 percent. This decline brought the 2017 level for the largest firms to its lowest level in the 2004 to 2017 period (Exhibit 1.11).
- Among employers who offered insurance, there was no significant change from 2016 to 2017 in the overall percentage of eligible employees who worked for an employer that self-insured at least one plan (57.3 percent in 2016 and 58.2 percent in 2017). However, employers with 100 to 999 workers experienced an increase in this measure from 37.4 percent in 2016 to 42.0 percent in 2017, a rate higher than those observed from 2004 to 2013 (Exhibit 1.12).
- In 2016, the percentage of eligible employees at the largest firms who worked for an employer that self-insured declined, but there was no significant change in 2017. Both the 2016 and 2017 rates for the largest employers (82.8 percent in 2016 and 82.2 percent in 2017) were lower than rates from 2008 to 2015, which ranged from 85.8 percent to 89.0 percent) (Exhibit 1.12).

Availability of Dependent Coverage, 2017

- In 2017, 98.3 percent of all workers who were eligible for single coverage were also offered coverage for their dependents. The likelihood of a dependent coverage offer increased with firm size. In 2017, the percentage of eligible employees who were offered coverage for their dependents was:
 - 83.0 percent in firms with fewer than 10 workers,
 - 91.9 percent in firms with 10 to 24 workers,
 - 97.6 percent in firms with 25 to 99 employees,
 - 99.1 percent in firms with 100 to 999 employees, and
 - 99.9 percent in firms with 1,000 or more employees (Exhibit 1.13).
- In 2017, 91.6 percent of all eligible workers were offered employee-plus-one coverage as an option in addition to an offer of single coverage. The likelihood of employee-plus-one

coverage as an option increased with firm size. In 2017, the percentage of eligible workers with an offer of employee-plus-one coverage was:

- 63.8 percent in firms with fewer than 10 employees,
- 79.6 percent in firms with 10 to 24 workers,
- 88.8 percent in firms with 25 to 99 employees, 91.9 percent in firms with 100 to 999 employees, and
- 95.5 percent in firms with 1,000 or more employees (Exhibit 1.13).

Availability of a Choice of Plans at Employers That Offer Health Insurance, by Firm Size, 2004-2017

- The likelihood that a worker at an offering establishment had a choice of plans increased with firm size in all years from 2004 to 2017. In 2017, the percentage of workers with a choice of plans was 34.9 percent in firms with fewer than 50 employees, 59.3 percent in firms with 50 to 99 employees, and 81.0 percent in firms with 100 or more workers (Exhibit 1.14).
- There was no significant change in the percentage of employees with a choice of plans between 2016 and 2017 (71.7 percent in 2016 and 72.4 percent in 2017). This followed a period where these rates increased by 3.2 percentage points from 2014 to 2015 and by 1.5 percentage points from 2015 to 2016 ($p < 0.10$). The 2015 to 2016 increase reflected a significant increase in plan choice for medium employers (50 to 99 employees) and the 2014 to 2015 change reflected significant increases for small (fewer than 50 employees) and large employers (100 or more employees) (Exhibit 1.14).
- The availability of plan choice was significantly higher in 2017 than in 2004 for small employers (34.9 percent vs. 24.7 percent), medium employers (59.3 percent vs. 36.7 percent), and large employers (81.0 percent vs. 70.2 percent) (Exhibit 1.14).

Availability of a Choice of Plans at Employers That Offer Health Insurance, by Industry and Selected Employer Characteristics, 2017

- Workers in financial services and real estate and in retail trade were more likely to be offered a choice of plans than workers in all other industries (Exhibit 1.15). Exhibit 1.16 shows variation by firm size.
- Workers at for-profit, unincorporated employers were less likely to be offered a choice of plans than workers at for-profit incorporated employers or at nonprofit employers (68.5 percent vs. 73.1 percent and 72.6 percent, respectively) (Exhibit 1.17). Exhibit 1.18 shows variation by firm size.
- Workers in firms in business for 20 or more years were more likely to be offered a choice of plans (76.1 percent) than employees at younger firms (59.6 percent, 53.6 percent, and 59.9 percent at firms in business for 0 to 4, 5 to 9, and 10 to 19 years, respectively) (Exhibit 1.17).

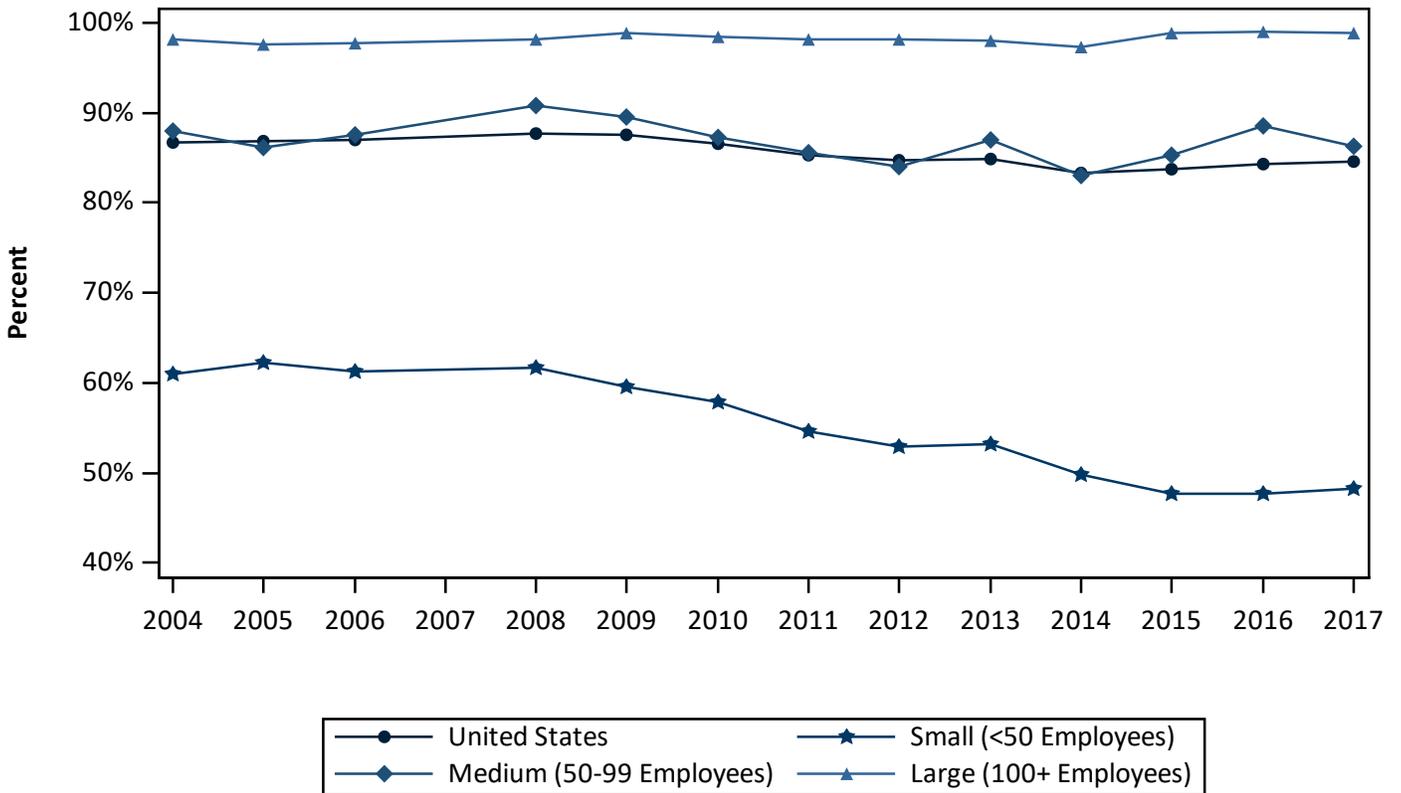
- Workers at establishments that were part of firms with two or more locations were more likely to be offered a choice of plans than those at firms with only one location (82.2 percent vs. 50.3 percent) (Exhibit 1.17).
- Workers at establishments where 0 to 24 percent of employees worked full time were less likely to be offered a choice of plans than workers at other establishments (63.9 percent compared with a range of 70.6 percent to 75.7 percent for establishments with 25 percent or more full-time workers) (Exhibit 1.17). Exhibit 1.19 shows variation by firm size.
- Workers in predominantly low-wage establishments were less likely to be offered a choice of plans than workers in higher wage establishments if they worked for a medium employer (51.7 percent vs. 61.9 percent) (Exhibit 1.19). However, there was no significant difference in the likelihood of being offered a choice of plans for U.S. workers overall (72.4 percent for low-wage employers and higher wage employers, Exhibit 1.17) or in small and large firms (Exhibit 1.19).

Availability of Retiree Coverage, 2004 to 2017

- In 2017, workers who retired from establishments that were part of the largest employers (1,000 or more workers) were the most likely to be offered retiree coverage. In 2017, 27.6 percent of these large employers offered coverage to retirees under age 65, a decline from the 2016 rate of 32.4 percent (Exhibit 1.20). A smaller percentage, 20.3 percent in 2017, offered coverage to retirees age 65 and over, a decline from the 2016 rate of 24.8 percent (Exhibit 1.21).
- In contrast, in 2017, between 1.6 percent and 7.0 percent of establishments in firms in all other size categories (fewer than 10, 10 to 24, 25 to 99, and 100 to 999 workers) offered retiree coverage to retirees under age 65 or age 65 and over (Exhibits 1.20 and 1.21).
- The availability of retiree coverage in the largest firms declined by 17.2 percentage points (under age 65) and 21.8 percentage points (age 65 and over) between 2004 and 2017. In 2004, 44.8 percent and 42.1 percent of establishments in the largest firms offered coverage to retirees under age 65 and age 65 and over, respectively. By 2017, 27.6 percent of the largest employers offered retiree coverage to retirees under age 65 and 20.3 percent offered retiree coverage to retirees age 65 and over (Exhibits 1.20 and 1.21).

Exhibit 1.1

Percentage of private-sector employees in establishments that offer health insurance, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.1

Percentage of private-sector employees in establishments that offer health insurance, by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	86.7%	86.9%	86.9%	87.7%	87.6%	86.5%	85.3%	84.7%	84.9%	83.2%	83.8%	84.3%	84.5%
<50	61.0%	62.2%	61.2%	61.6%	59.6%	57.8%	54.7%	52.9%	53.1%	49.8%	47.6%	47.7%	48.3%
50-99	88.0%	86.2%	87.6%	90.7%	89.6%	87.3%	85.6%	84.1%	87.0%	83.0%	85.3%	88.6%	86.3%
100+	98.2%	97.5%	97.7%	98.2%	98.8%	98.5%	98.1%	98.2%	98.0%	97.3%	98.8%	98.9%	98.9%

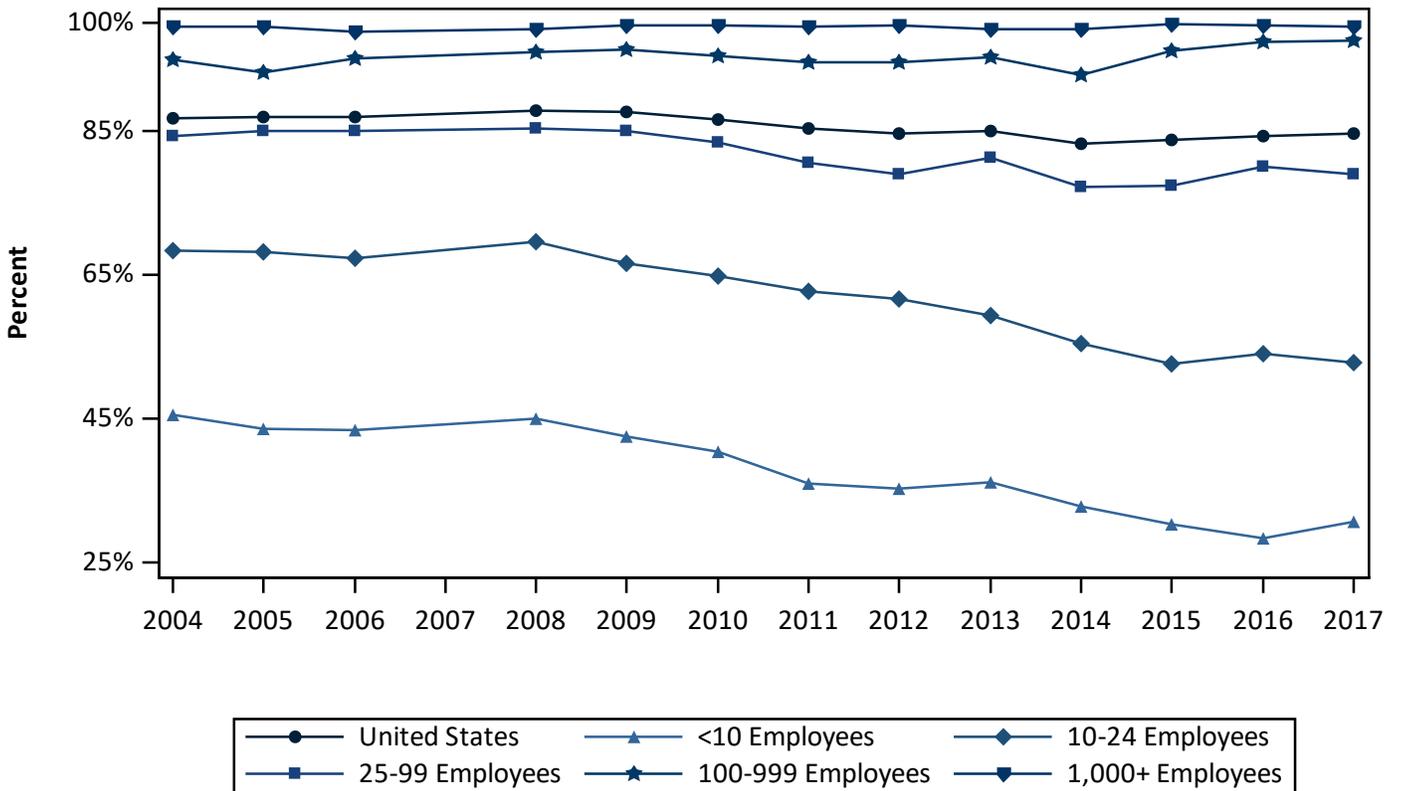
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 1.2

Percentage of private-sector employees in establishments that offer health insurance, by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.2

Percentage of private-sector employees in establishments that offer health insurance, by detailed firm size, 2004-2017

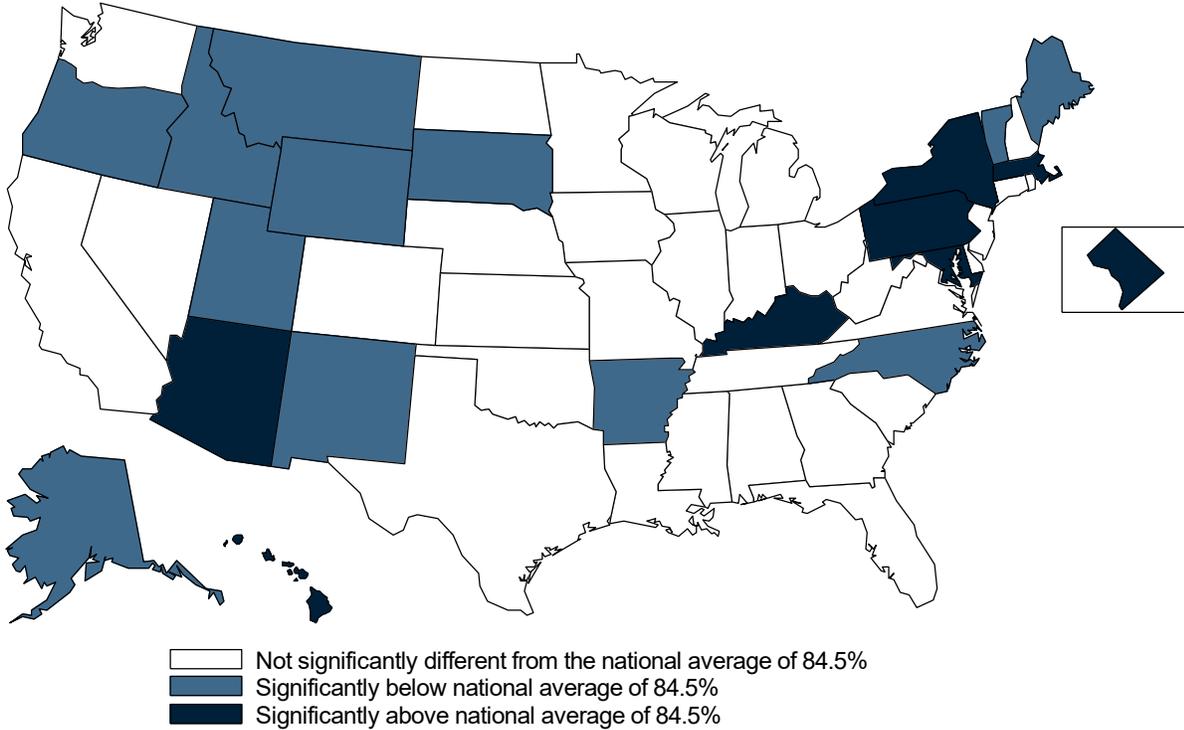
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	86.7%	86.9%	86.9%	87.7%	87.6%	86.5%	85.3%	84.7%	84.9%	83.2%	83.8%	84.3%	84.5%
<10	45.5%	43.7%	43.3%	45.0%	42.5%	40.5%	36.0%	35.3%	36.2%	32.9%	30.4%	28.4%	30.8%
10-24	68.4%	68.2%	67.4%	69.5%	66.6%	64.7%	62.7%	61.7%	59.3%	55.5%	52.6%	54.0%	52.8%
25-99	84.2%	85.0%	85.0%	85.3%	85.0%	83.3%	80.6%	78.9%	81.2%	77.2%	77.3%	80.1%	78.9%
100-999	94.8%	93.0%	95.1%	95.9%	96.3%	95.4%	94.4%	94.6%	95.2%	92.7%	96.1%	97.3%	97.5%
1,000+	99.5%	99.4%	98.7%	99.0%	99.7%	99.6%	99.5%	99.6%	99.1%	99.1%	99.8%	99.6%	99.5%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

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Exhibit 1.3
Percentage of private-sector employees in establishments that offer health insurance,
by State, 2017

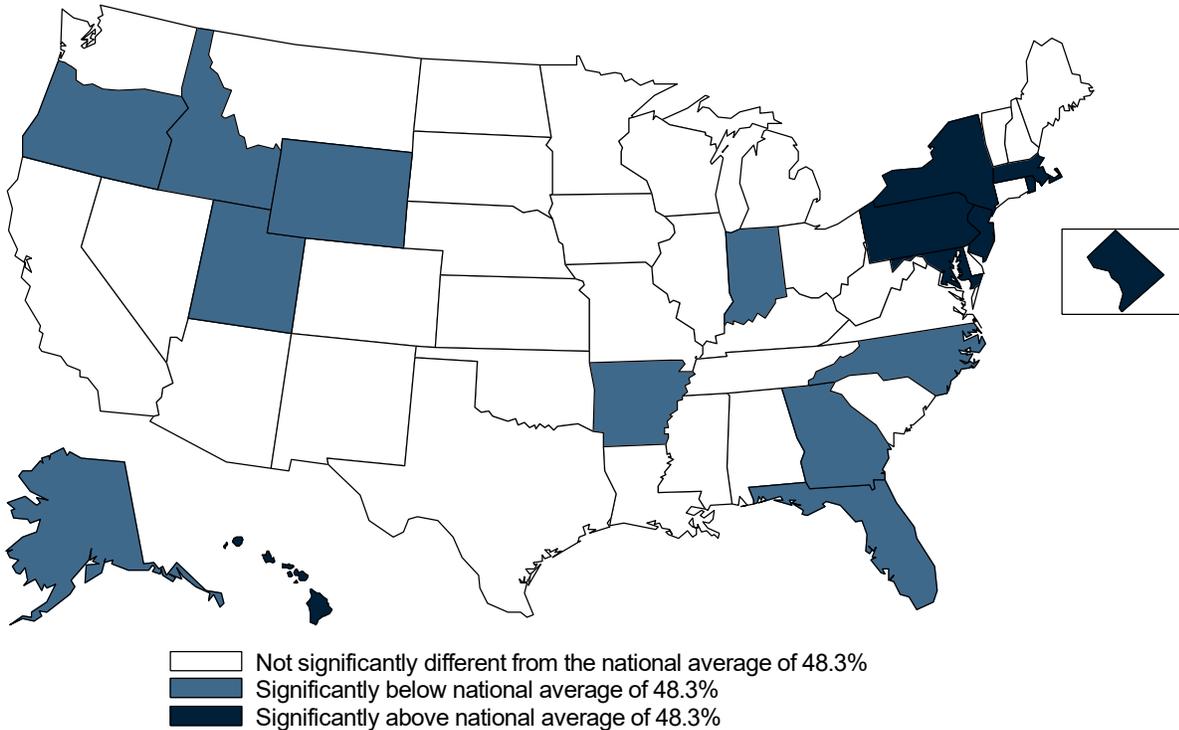


Alabama	84.9%	Kentucky	87.2%*	North Dakota	83.7%
Alaska	72.5%*	Louisiana	85.3%	Ohio	85.8%
Arizona	87.4%*	Maine	79.5%*	Oklahoma	82.7%
Arkansas	78.6%*	Maryland	87.3%*	Oregon	77.7%*
California	83.8%	Massachusetts	90.2%*	Pennsylvania	87.6%*
Colorado	82.6%	Michigan	85.2%	Rhode Island	86.1%
Connecticut	86.1%	Minnesota	82.9%	South Carolina	84.2%
Delaware	83.4%	Mississippi	85.4%	South Dakota	81.8%*
District of Columbia	92.3%*	Missouri	86.3%	Tennessee	86.6%
Florida	82.9%	Montana	73.2%*	Texas	85.0%
Georgia	82.1%	Nebraska	81.9%	Utah	79.7%*
Hawaii	92.1%*	Nevada	86.2%	Vermont	74.6%*
Idaho	74.5%*	New Hampshire	83.8%	Virginia	84.5%
Illinois	86.7%	New Jersey	85.3%	Washington	84.5%
Indiana	81.6%	New Mexico	79.9%*	West Virginia	83.5%
Iowa	83.6%	New York	87.5%*	Wisconsin	82.6%
Kansas	84.5%	North Carolina	79.1%*	Wyoming	69.5%*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.
Note: * Indicates the estimate is statistically different from the national average of 84.5 percent at $p < 0.05$.
For data points and standard errors for this exhibit, select here.

Exhibit 1.4

Percentage of private-sector employees in establishments that offer health insurance, by State, firm size <50 employees, 2017

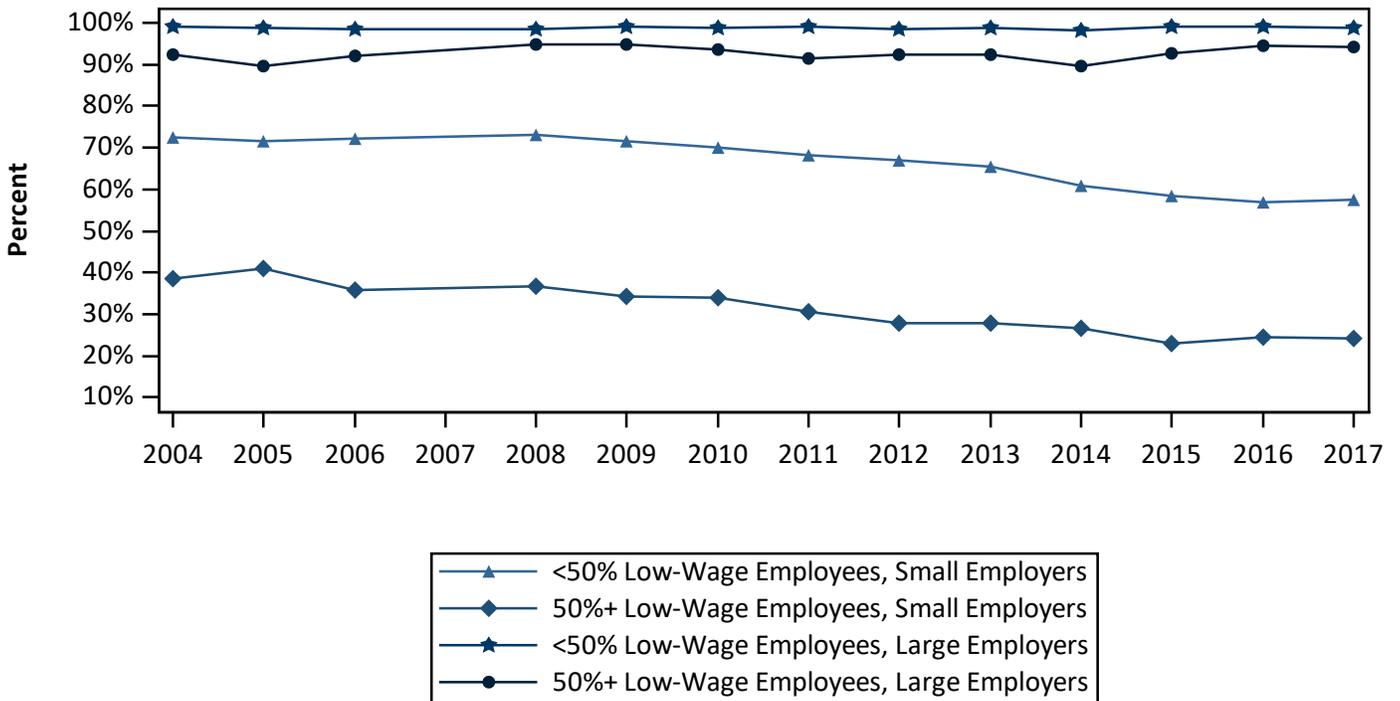


Alabama	44.7%	Kentucky	53.9%	North Dakota	54.0%
Alaska	30.6%*	Louisiana	51.4%	Ohio	48.3%
Arizona	45.5%	Maine	44.7%	Oklahoma	46.0%
Arkansas	33.5%*	Maryland	57.8%*	Oregon	37.5%*
California	50.2%	Massachusetts	66.3%*	Pennsylvania	56.4%*
Colorado	45.1%	Michigan	52.2%	Rhode Island	59.6%*
Connecticut	54.2%	Minnesota	49.6%	South Carolina	43.0%
Delaware	48.3%	Mississippi	50.6%	South Dakota	44.9%
District of Columbia	67.0%*	Missouri	48.3%	Tennessee	47.1%
Florida	38.7%*	Montana	42.1%	Texas	43.0%
Georgia	38.0%*	Nebraska	46.7%	Utah	33.7%*
Hawaii	89.2%*	Nevada	43.2%	Vermont	42.1%
Idaho	34.9%*	New Hampshire	48.2%	Virginia	49.3%
Illinois	49.3%	New Jersey	56.6%*	Washington	51.2%
Indiana	40.2%*	New Mexico	44.7%	West Virginia	44.6%
Iowa	47.9%	New York	59.6%*	Wisconsin	40.6%
Kansas	50.3%	North Carolina	33.6%*	Wyoming	38.9%*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.
Note: * Indicates the estimate is statistically different from the national average of 48.3 percent at $p < 0.05$.
For data points and standard errors for this exhibit, select here.

Exhibit 1.5

Percentage of private-sector employees in establishments that offer health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017



Key: Small employer = fewer than 50 employees. Large employer = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 1.5

Percentage of private-sector employees in establishments that offer health insurance, by the percentage of the establishment's workforce that is low wage, by firm size, 2004-2017

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
<50% Low-Wage Employees, Small Employers	72.4%	71.6%	72.2%	73.2%	71.6%	70.2%	68.0%	66.8%	65.6%	61.0%	58.4%	56.9%	57.6%
50%+ Low-Wage Employees, Small Employers	38.5%	41.1%	35.8%	36.8%	34.3%	34.1%	30.6%	28.0%	28.0%	26.6%	23.1%	24.4%	24.2%
<50% Low-Wage Employees, Large Employers	99.1%	98.7%	98.4%	98.4%	99.1%	98.9%	98.9%	98.6%	98.7%	98.2%	98.9%	98.9%	98.7%
50%+ Low-Wage Employees, Large Employers	92.5%	89.4%	92.1%	94.8%	94.7%	93.5%	91.4%	92.2%	92.4%	89.6%	92.7%	94.5%	94.0%

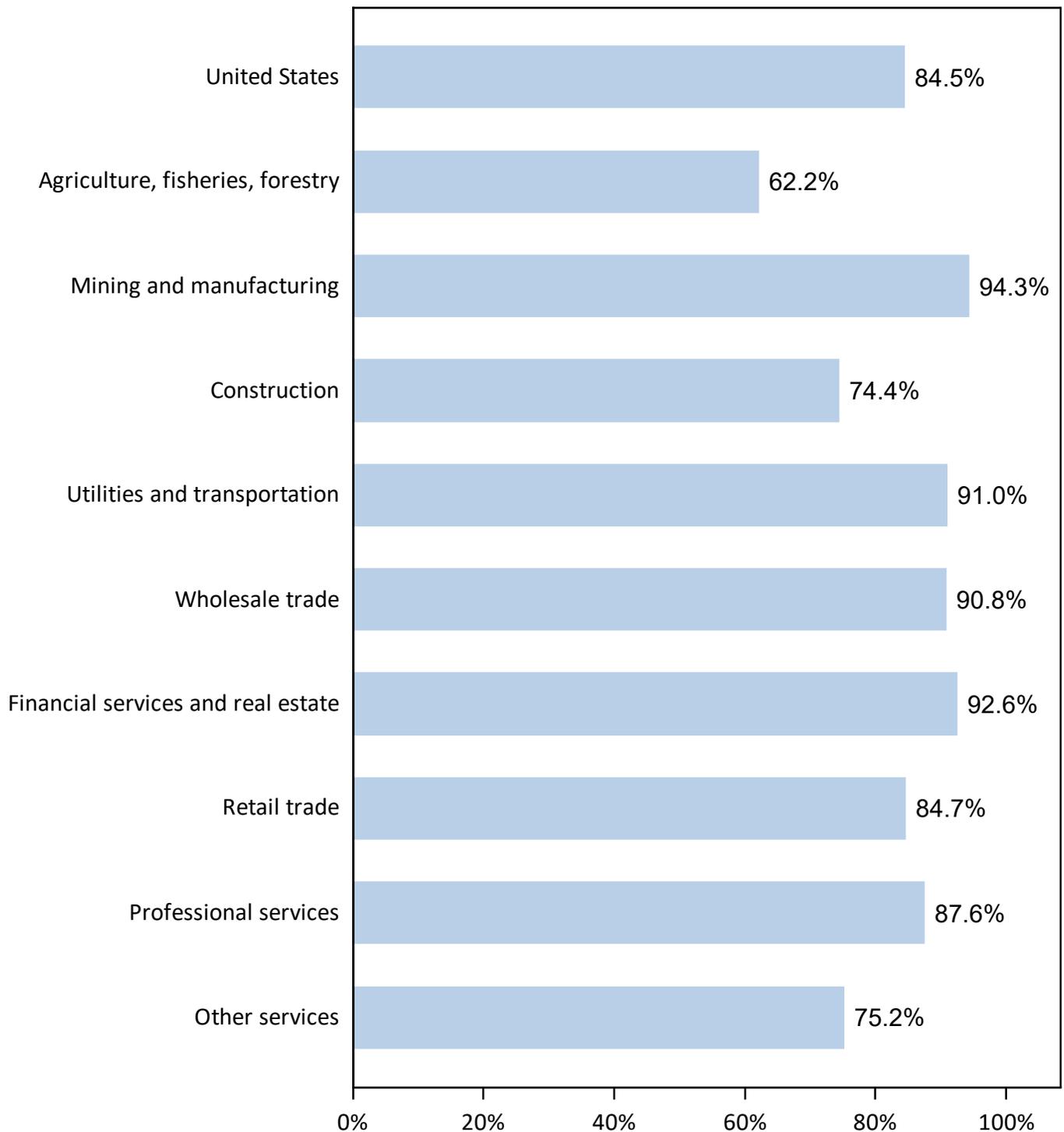
Key: Small employers = fewer than 50 employees. Large employers = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

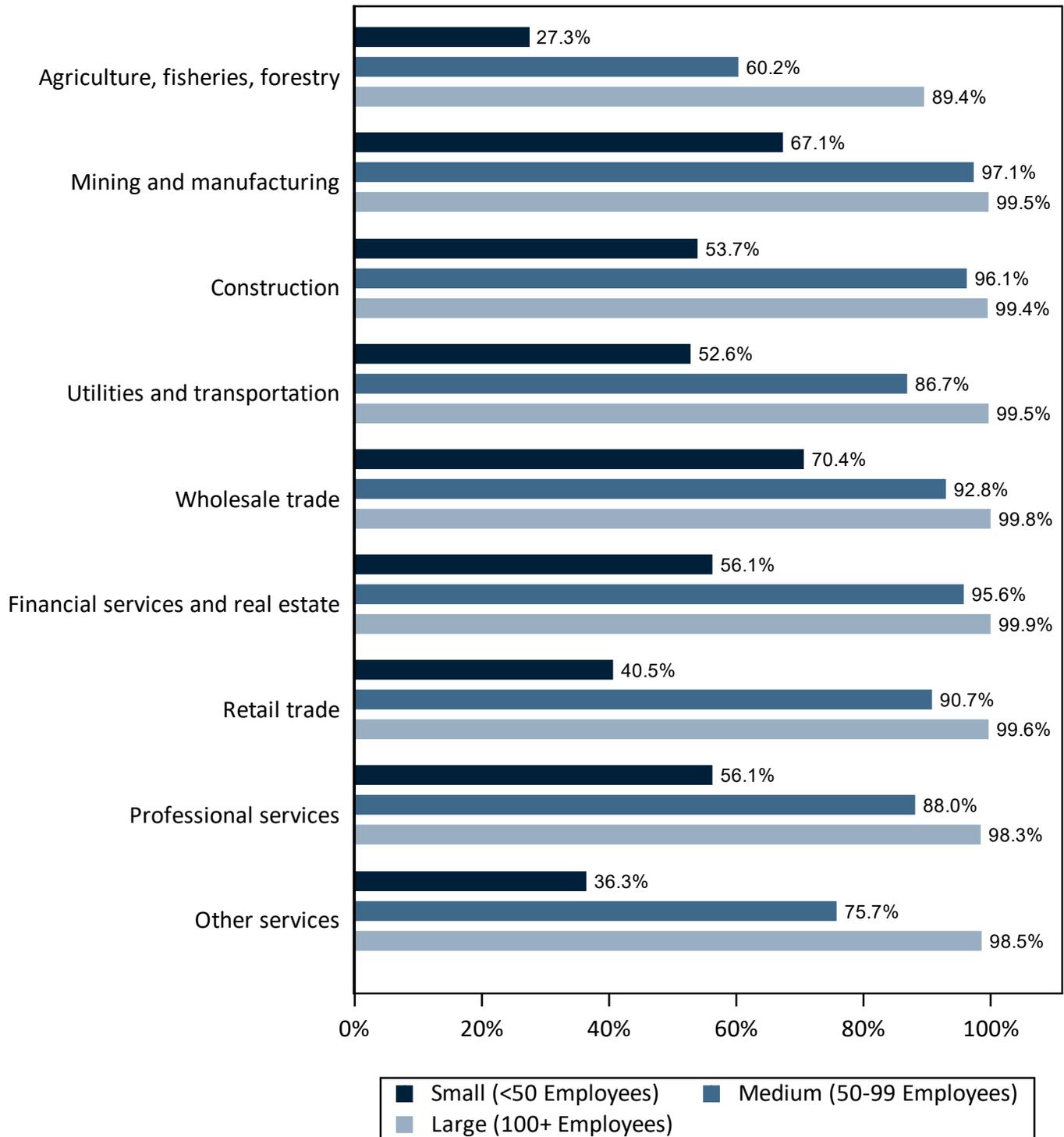
For data points and standard errors for this exhibit, select here.

Exhibit 1.6
Percentage of private-sector employees in establishments that offer health insurance, overall and by industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

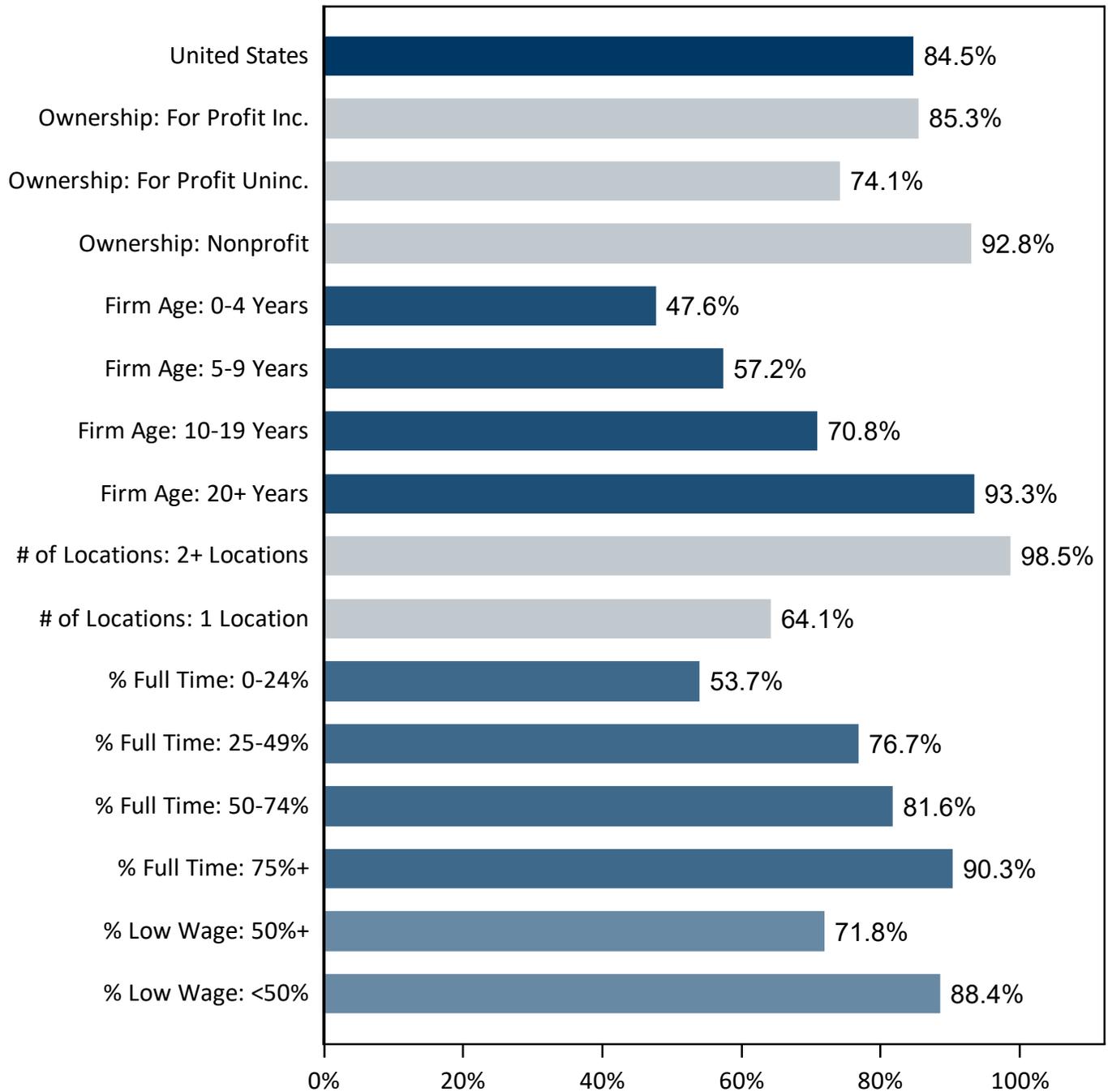
Exhibit 1.7
Percentage of private-sector employees in establishments that offer health insurance, by firm size and industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 1.8

Percentage of private-sector employees in establishments that offer health insurance, overall and by selected characteristics, 2017



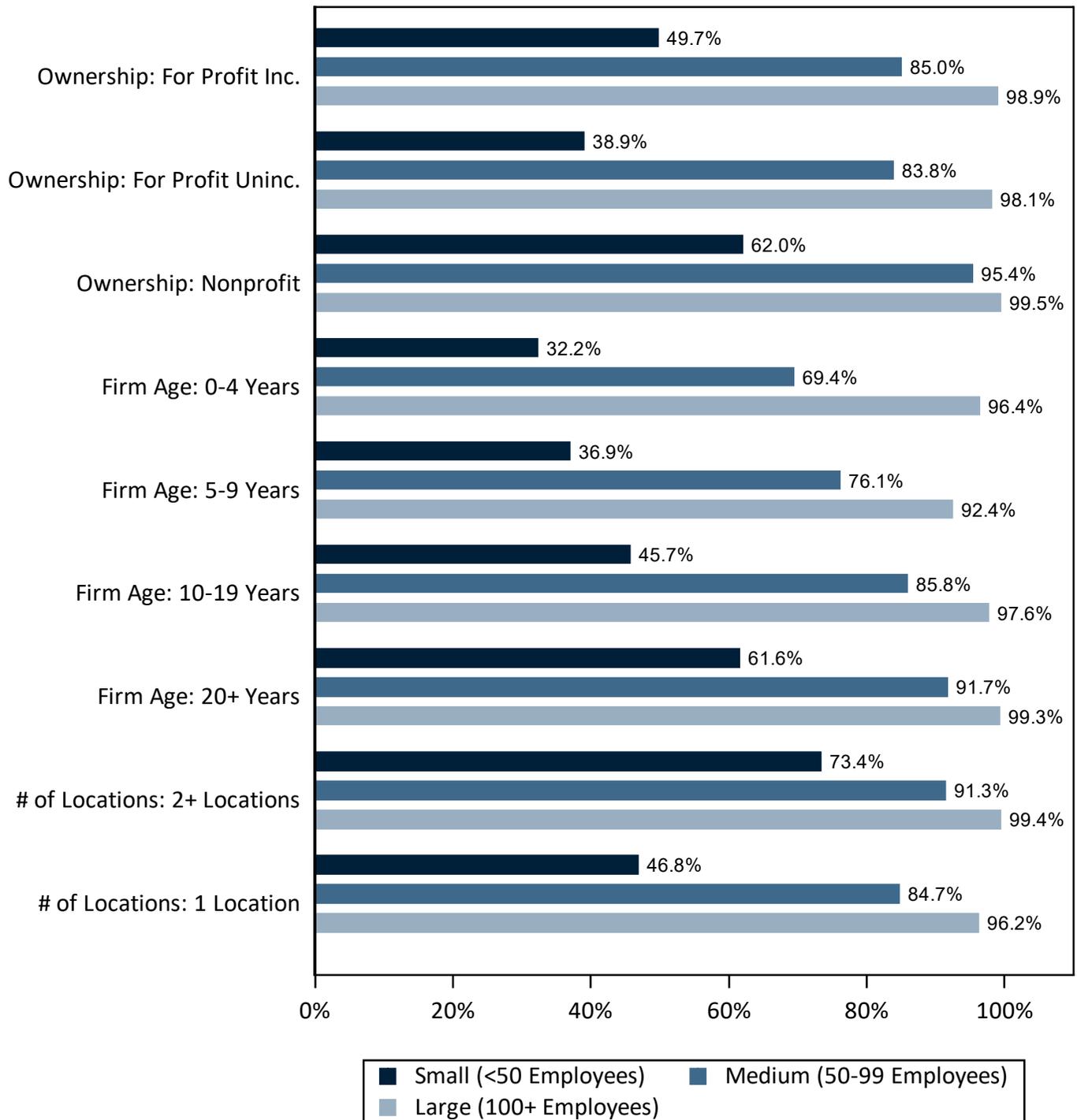
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

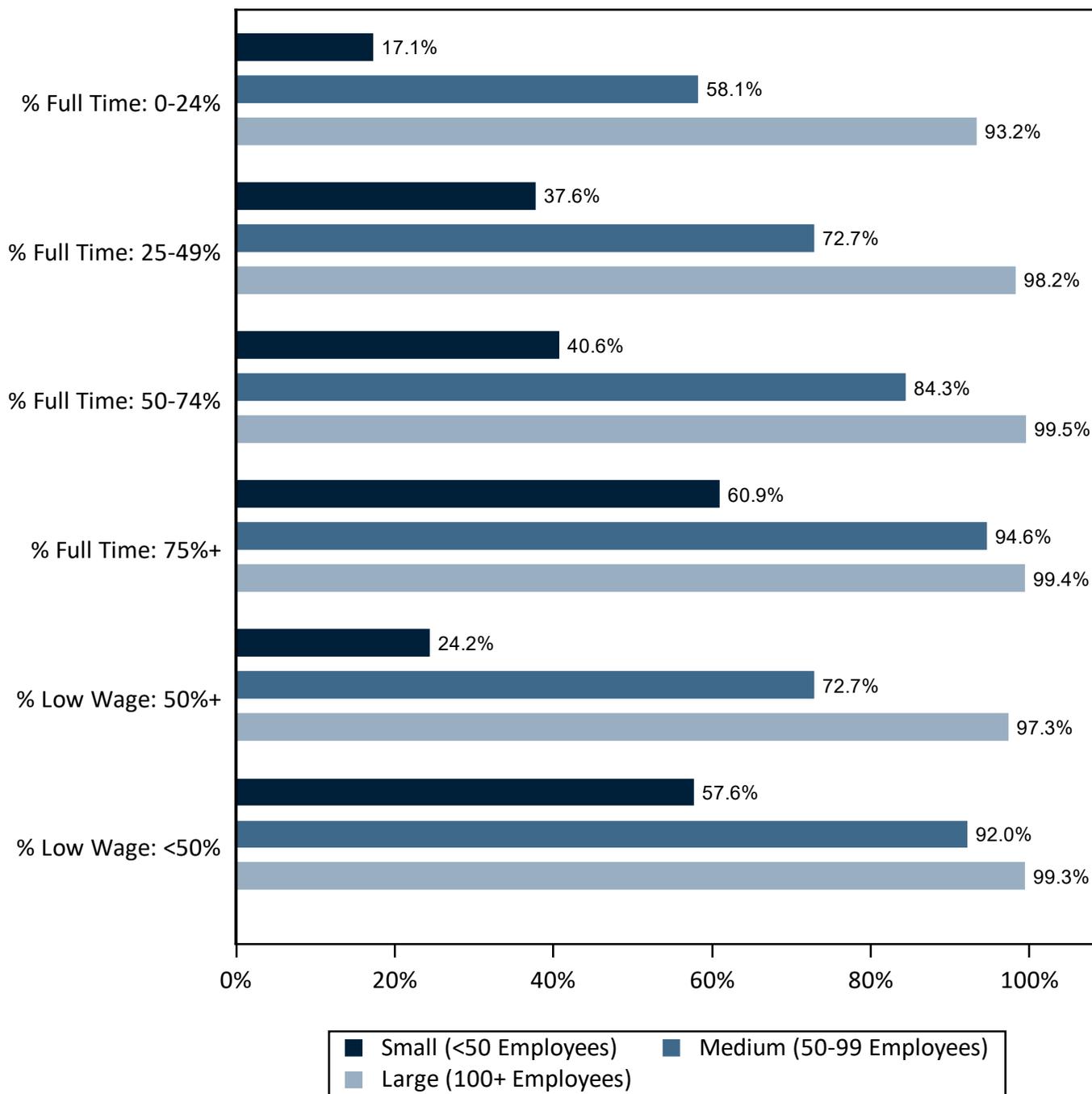
Exhibit 1.9

Percentage of private-sector employees in establishments that offer health insurance, by firm size and selected characteristics (ownership type, age of firm, number of locations), 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 1.10
Percentage of private-sector employees in establishments that offer health insurance, by firm size and selected characteristics (% full time, % low wage), 2017



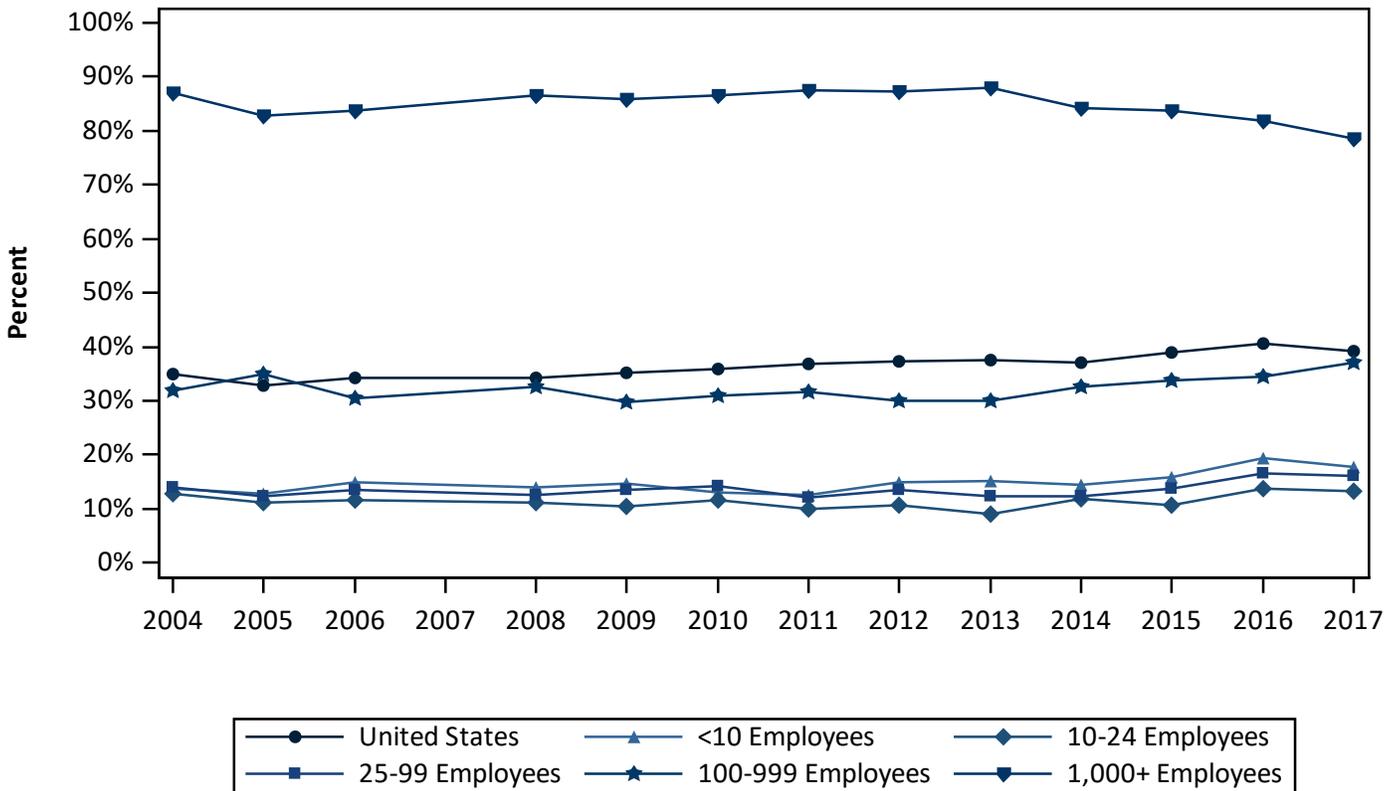
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 1.11

Percentage of private-sector establishments that offer health insurance that self-insure at least one plan, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.11

Percentage of private-sector establishments that offer health insurance that self-insure at least one plan, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	35.0%	32.7%	34.4%	34.2%	35.1%	35.8%	36.9%	37.2%	37.6%	37.2%	39.0%	40.7%	39.2%
<10	13.7%	12.7%	14.9%	14.0%	14.6%	13.1%	12.6%	14.9%	15.2%	14.4%	15.8%	19.3%	17.7%
10-24	12.7%	11.2%	11.6%	11.1%	10.4%	11.6%	9.9%	10.7%	9.0%	12.0%	10.6%	13.6%	13.3%
25-99	13.9%	12.2%	13.5%	12.6%	13.4%	14.3%	12.2%	13.5%	12.4%	12.2%	13.7%	16.6%	16.0%
100-999	31.8%	34.9%	30.6%	32.7%	29.9%	30.9%	31.7%	30.1%	30.1%	32.5%	33.7%	34.4%	37.2%
1,000+	87.0%	82.7%	83.8%	86.5%	85.8%	86.6%	87.5%	87.1%	88.0%	84.2%	83.8%	81.9%	78.6%

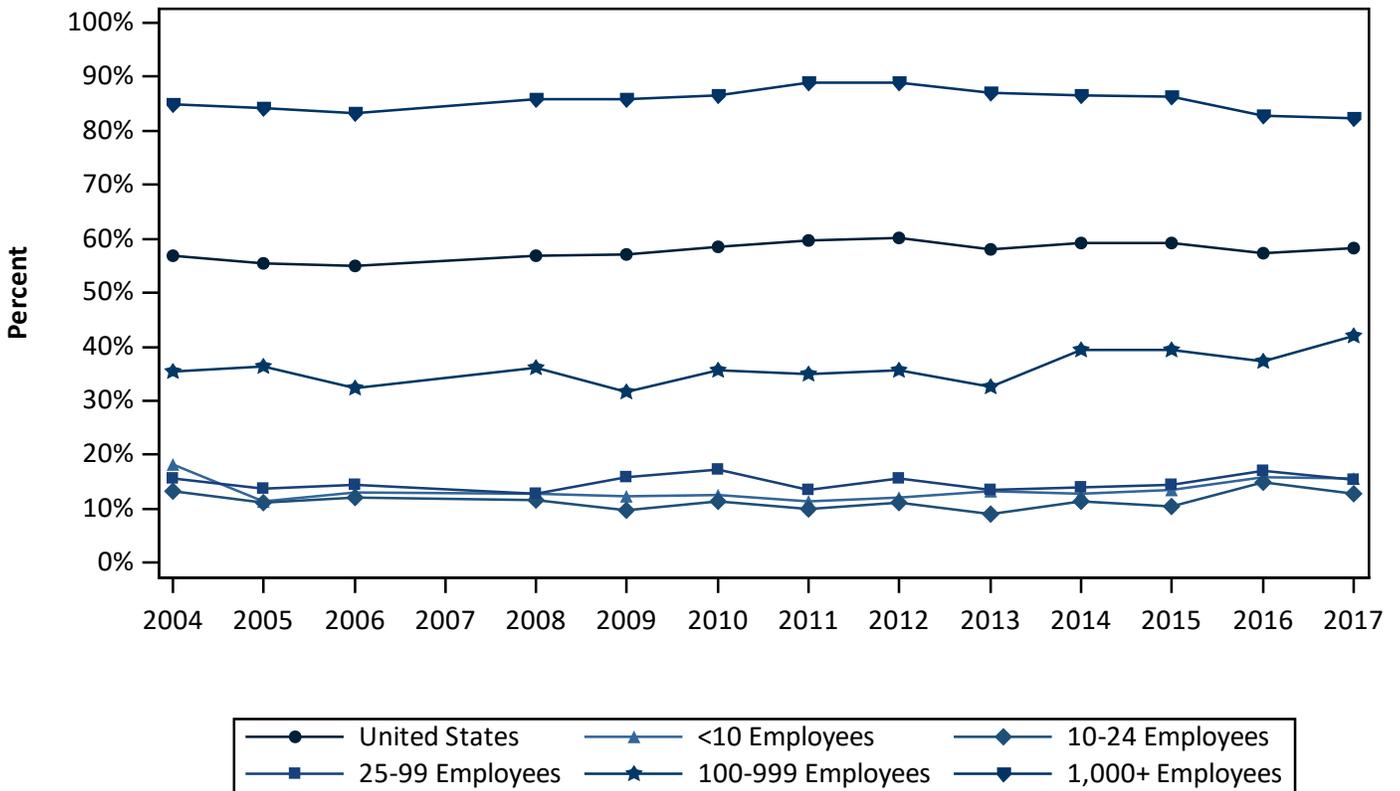
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 1.12

Among establishments that offer insurance, percentage of eligible employees in establishments that self-insure at least one plan, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.12

Among establishments that offer insurance, percentage of eligible employees in establishments that self-insure at least one plan, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	57.0%	55.5%	54.9%	56.8%	57.2%	58.4%	59.6%	60.1%	58.1%	59.2%	59.1%	57.3%	58.2%
<10	18.3%	11.3%	13.1%	12.9%	12.3%	12.5%	11.5%	12.0%	13.2%	12.9%	13.5%	15.7%	15.6%
10-24	13.3%	11.2%	12.0%	11.5%	9.8%	11.5%	10.1%	11.1%	9.1%	11.4%	10.5%	14.9%	12.8%
25-99	15.7%	13.8%	14.4%	12.8%	16.0%	17.3%	13.5%	15.5%	13.4%	14.0%	14.5%	17.1%	15.3%
100-999	35.5%	36.3%	32.4%	36.1%	31.7%	35.7%	35.0%	35.7%	32.6%	39.5%	39.5%	37.4%	42.0%
1,000+	84.8%	84.2%	83.4%	85.9%	85.8%	86.6%	89.0%	89.0%	86.9%	86.6%	86.4%	82.8%	82.2%

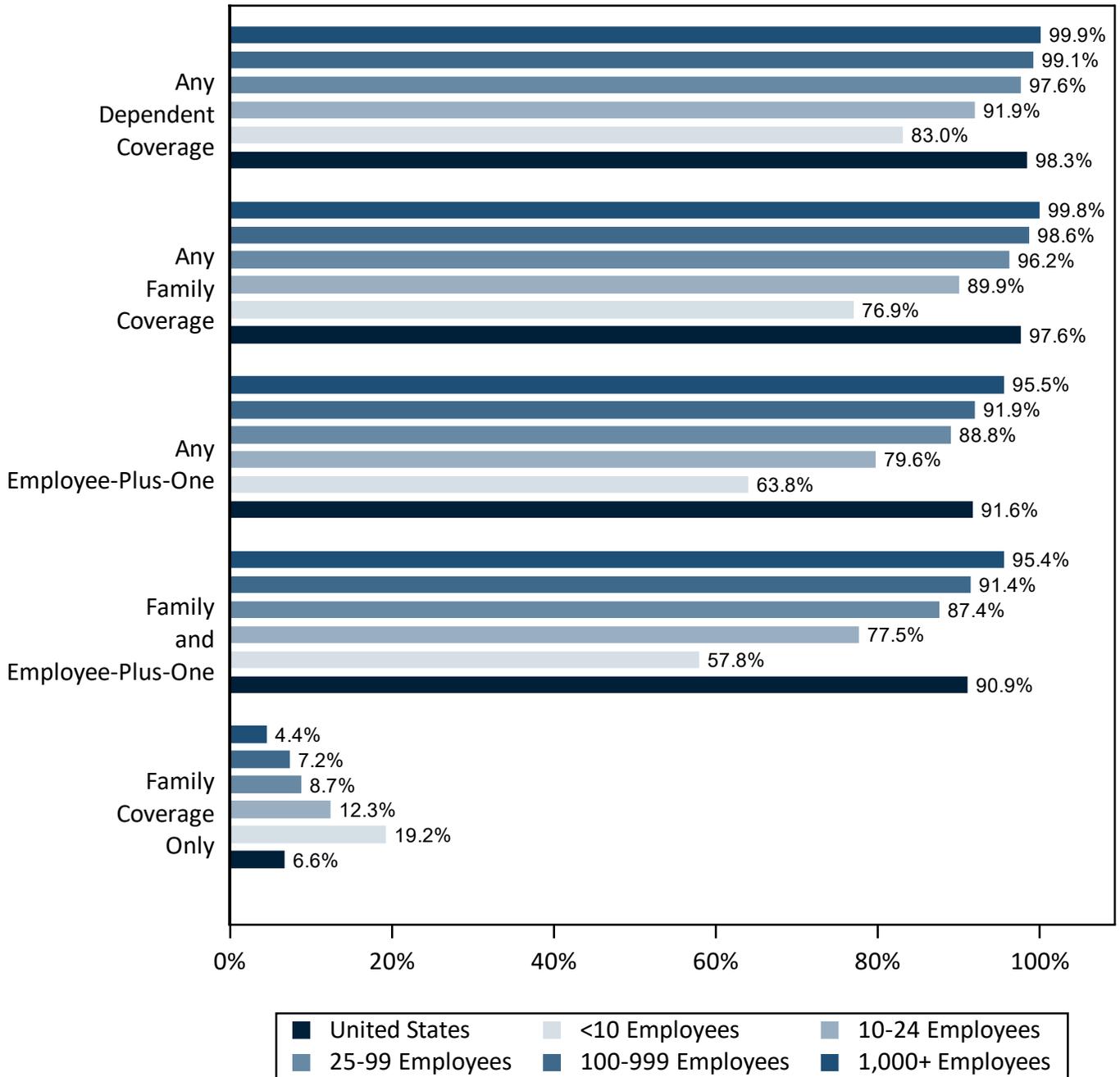
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 1.13

Percentage of eligible private-sector employees in establishments that offer family coverage and employee-plus-one coverage among establishments that offer coverage, overall and by detailed firm size, 2017



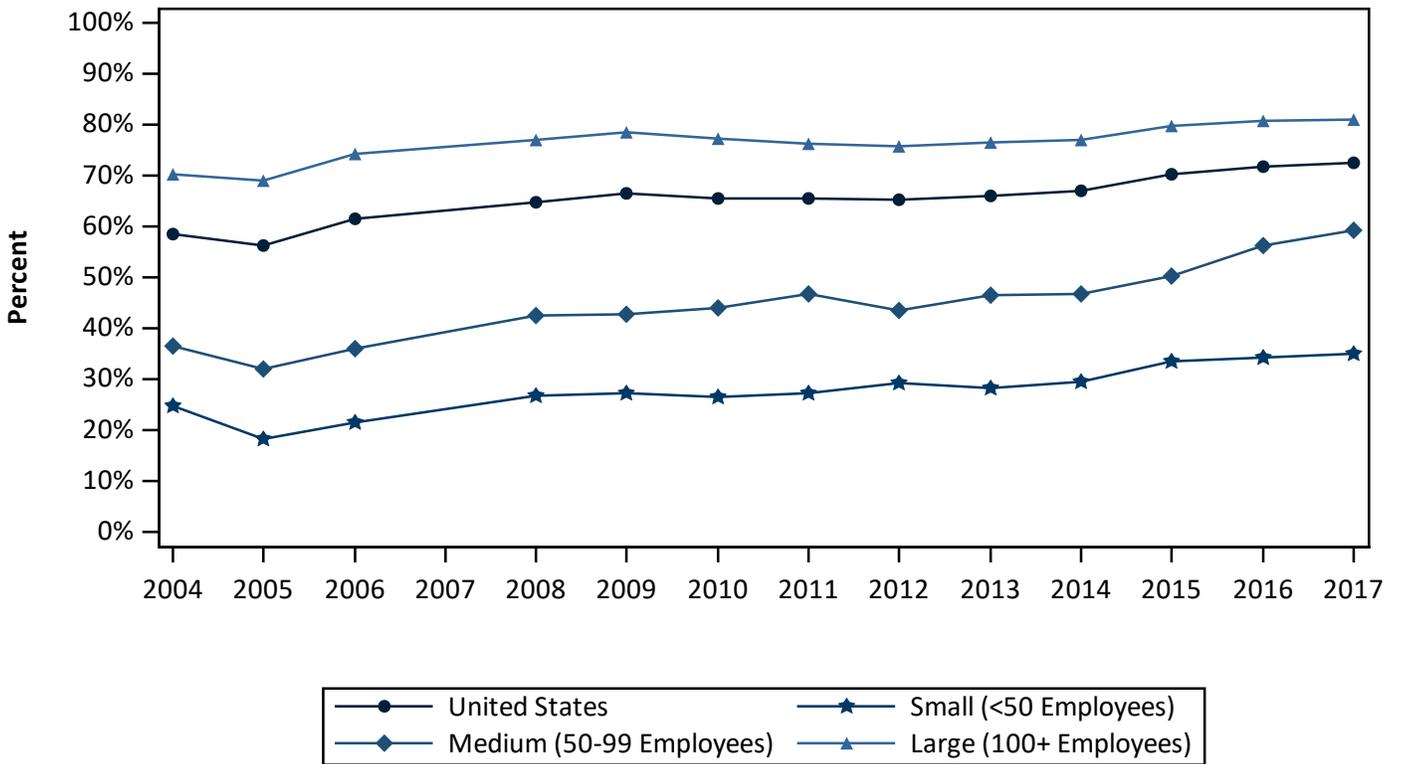
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: This exhibit does not include estimates for "Employee-plus-one only." These estimates can be calculated by subtracting the estimates for "Family and Employee-Plus-One" from the estimates for "Any Employee-Plus-One."

For data points and standard errors for this exhibit, select here.

Exhibit 1.14

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.14

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	58.6%	56.3%	61.4%	64.8%	66.5%	65.6%	65.5%	65.3%	66.0%	67.0%	70.2%	71.7%	72.4%
<50	24.7%	18.2%	21.5%	26.8%	27.3%	26.7%	27.2%	29.3%	28.4%	29.6%	33.6%	34.2%	34.9%
50-99	36.7%	32.1%	36.0%	42.5%	42.8%	44.1%	46.8%	43.7%	46.6%	46.8%	50.2%	56.2%	59.3%
100+	70.2%	69.0%	74.3%	76.9%	78.5%	77.3%	76.3%	75.7%	76.5%	77.0%	79.7%	80.7%	81.0%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

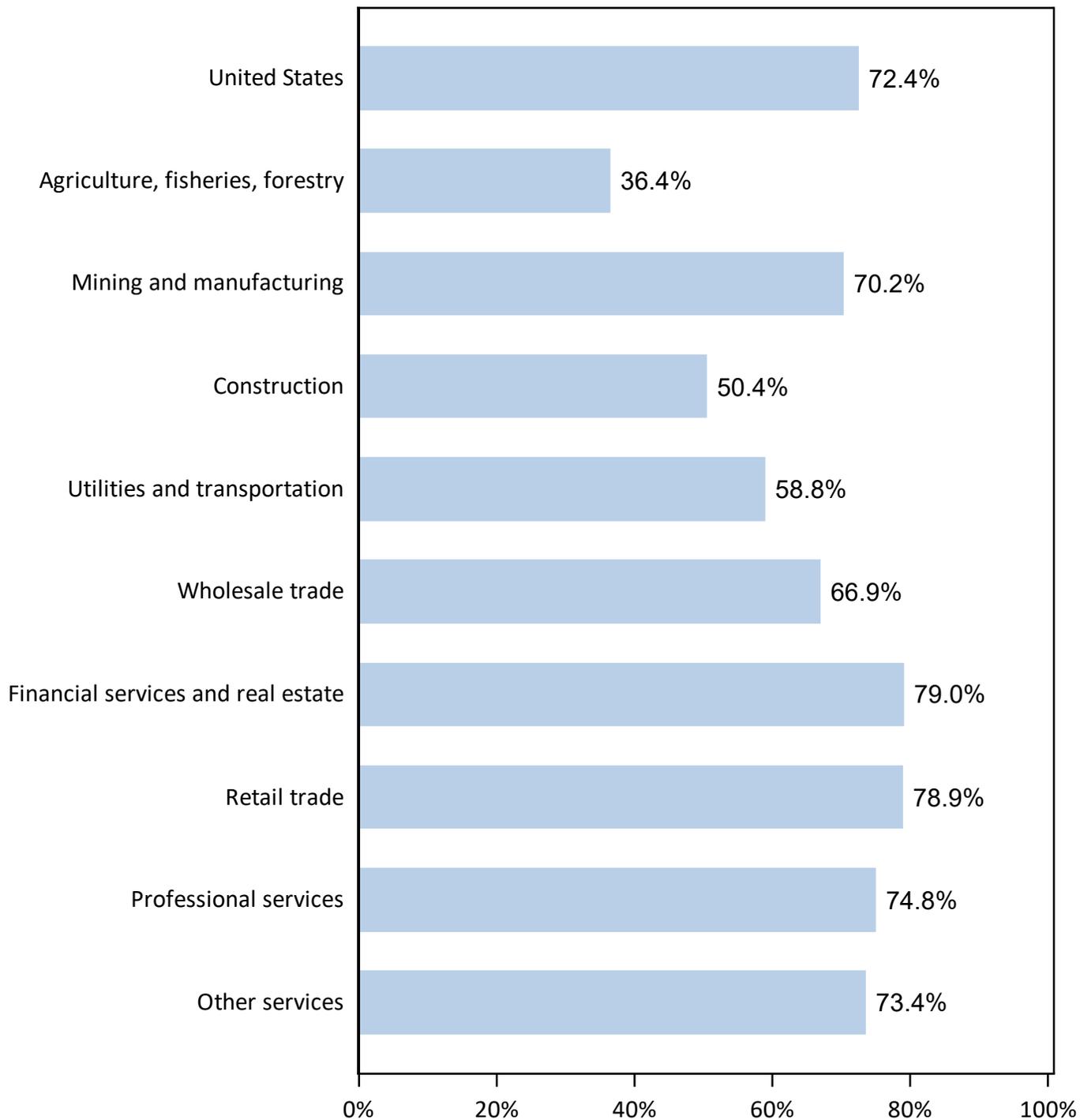
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 1.15

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, overall and by industry, 2017



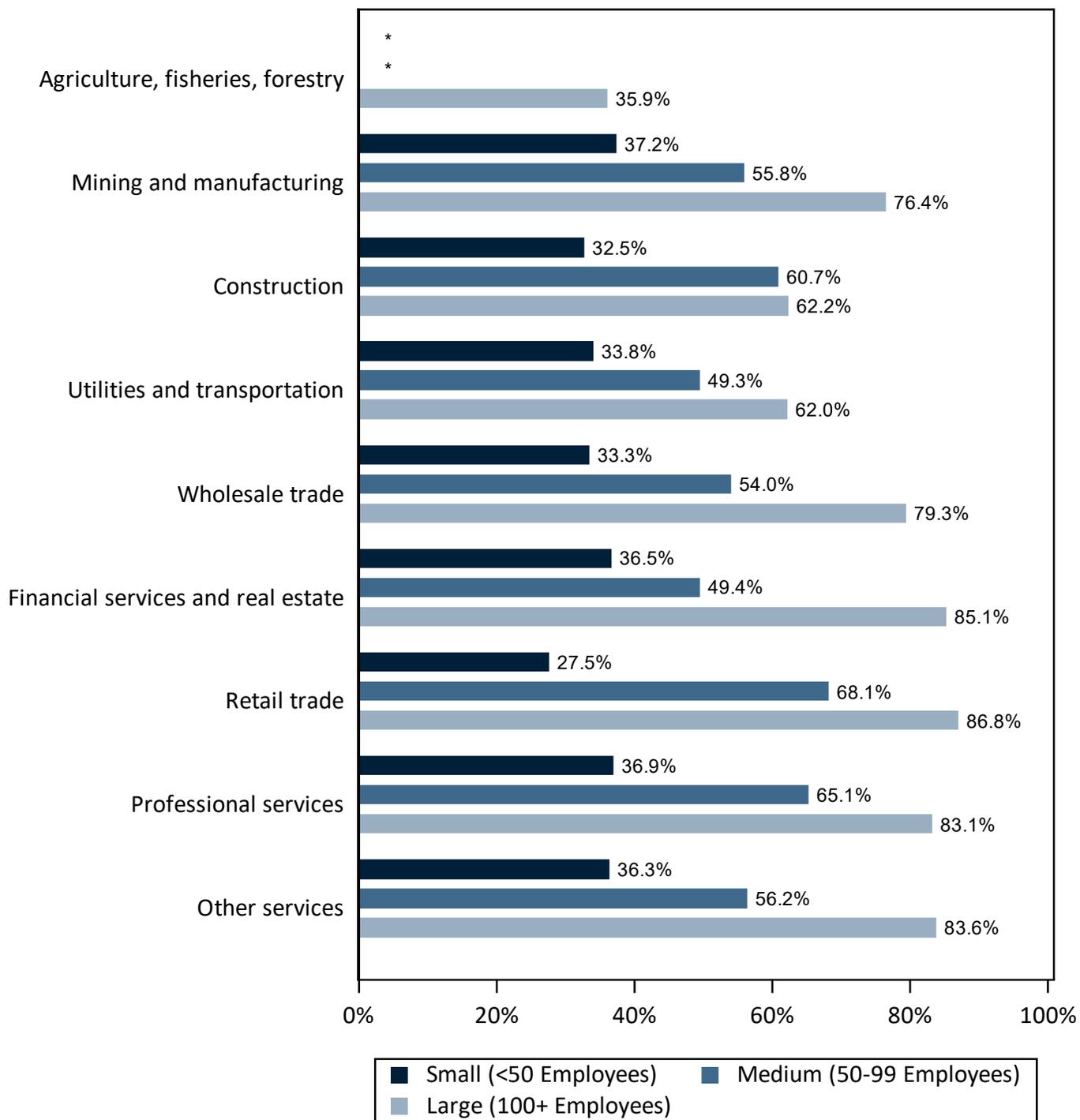
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

For data points and standard errors for this exhibit, select here.

Exhibit 1.16

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, by firm size and industry, 2017



* Estimate was suppressed due to insufficient sample size.

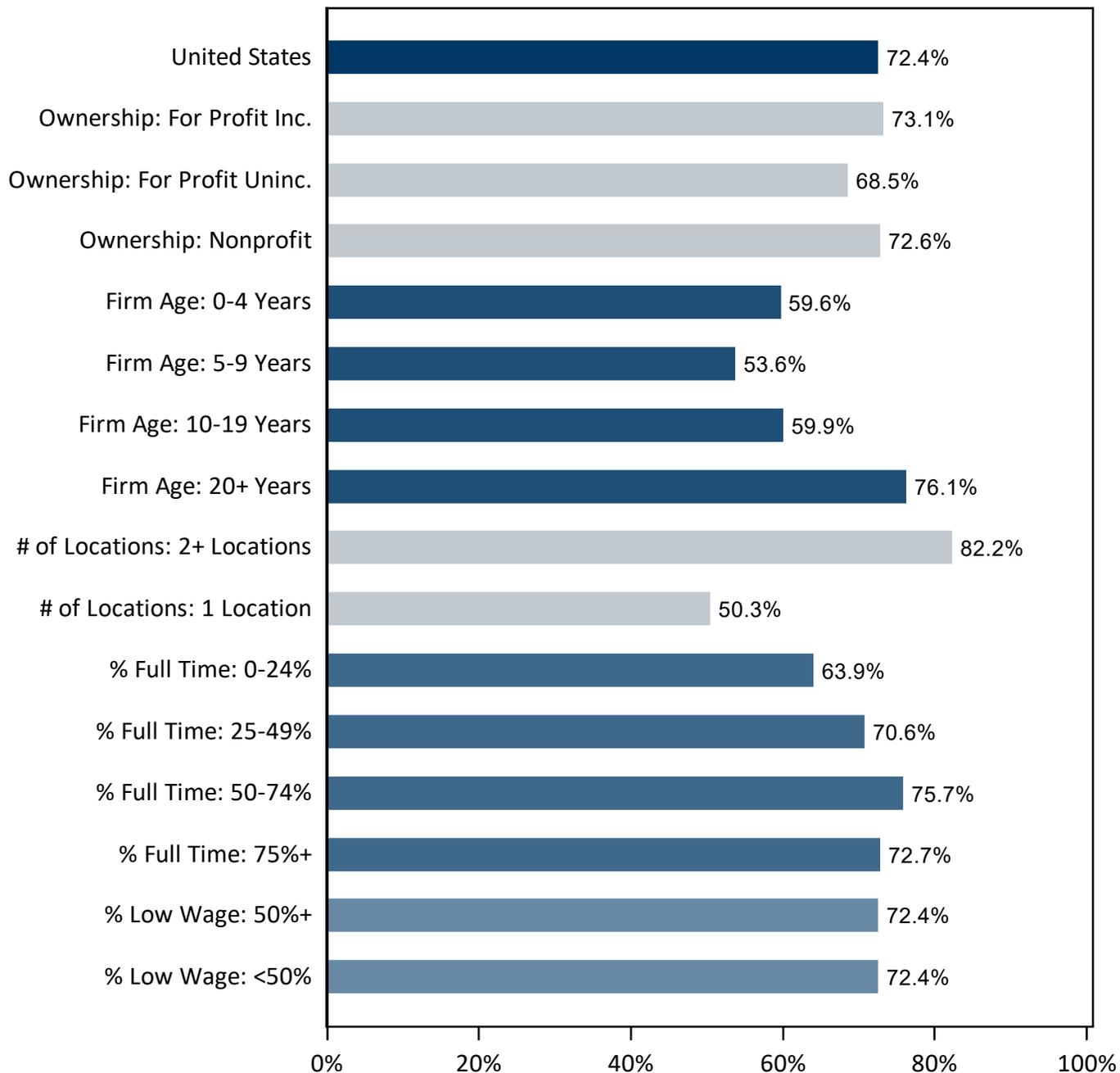
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

For data points and standard errors for this exhibit, select here.

Exhibit 1.17

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, overall and by selected characteristics, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

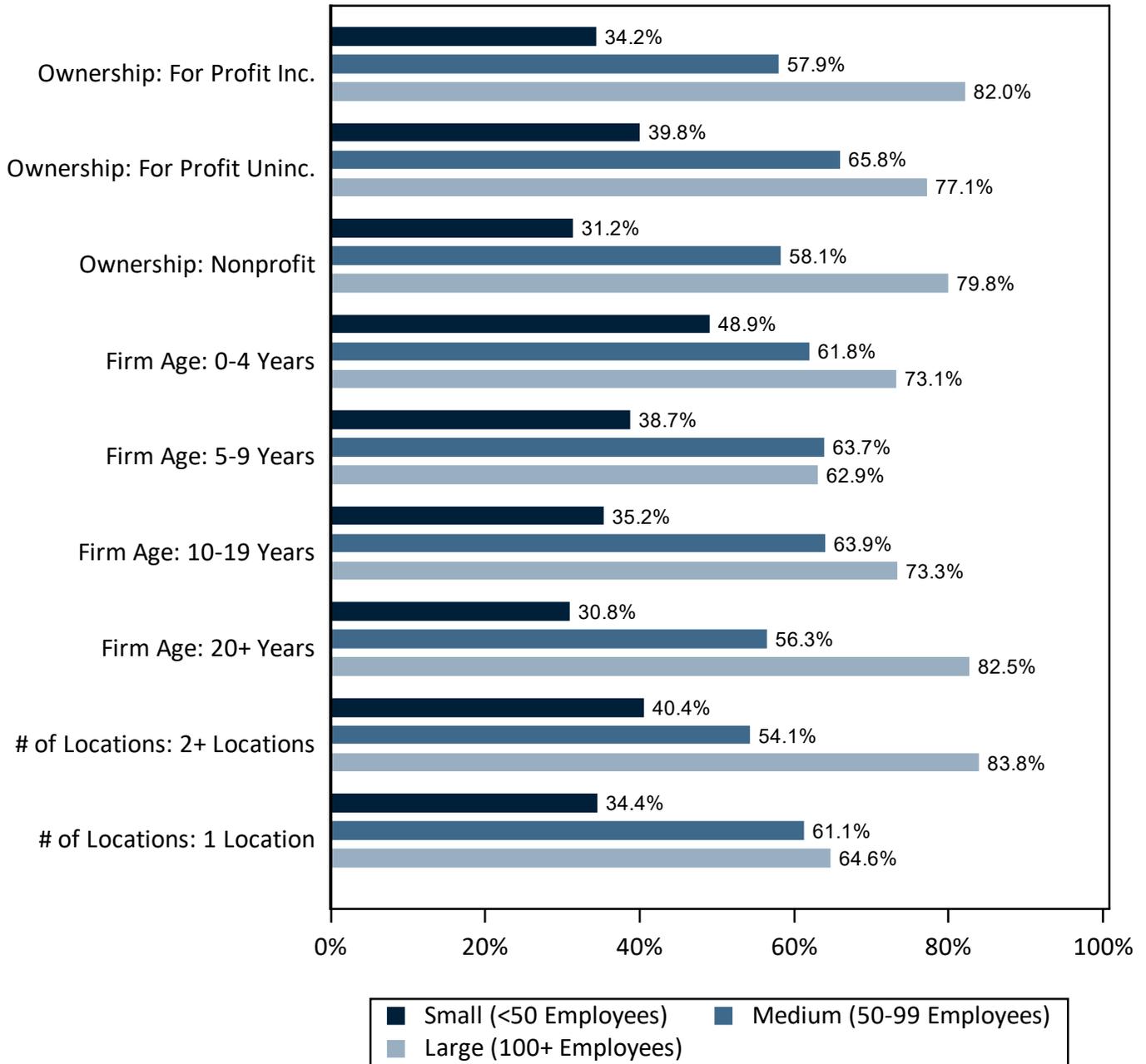
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 1.18

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, by firm size and selected characteristics (ownership type, age of firm, number of locations), 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

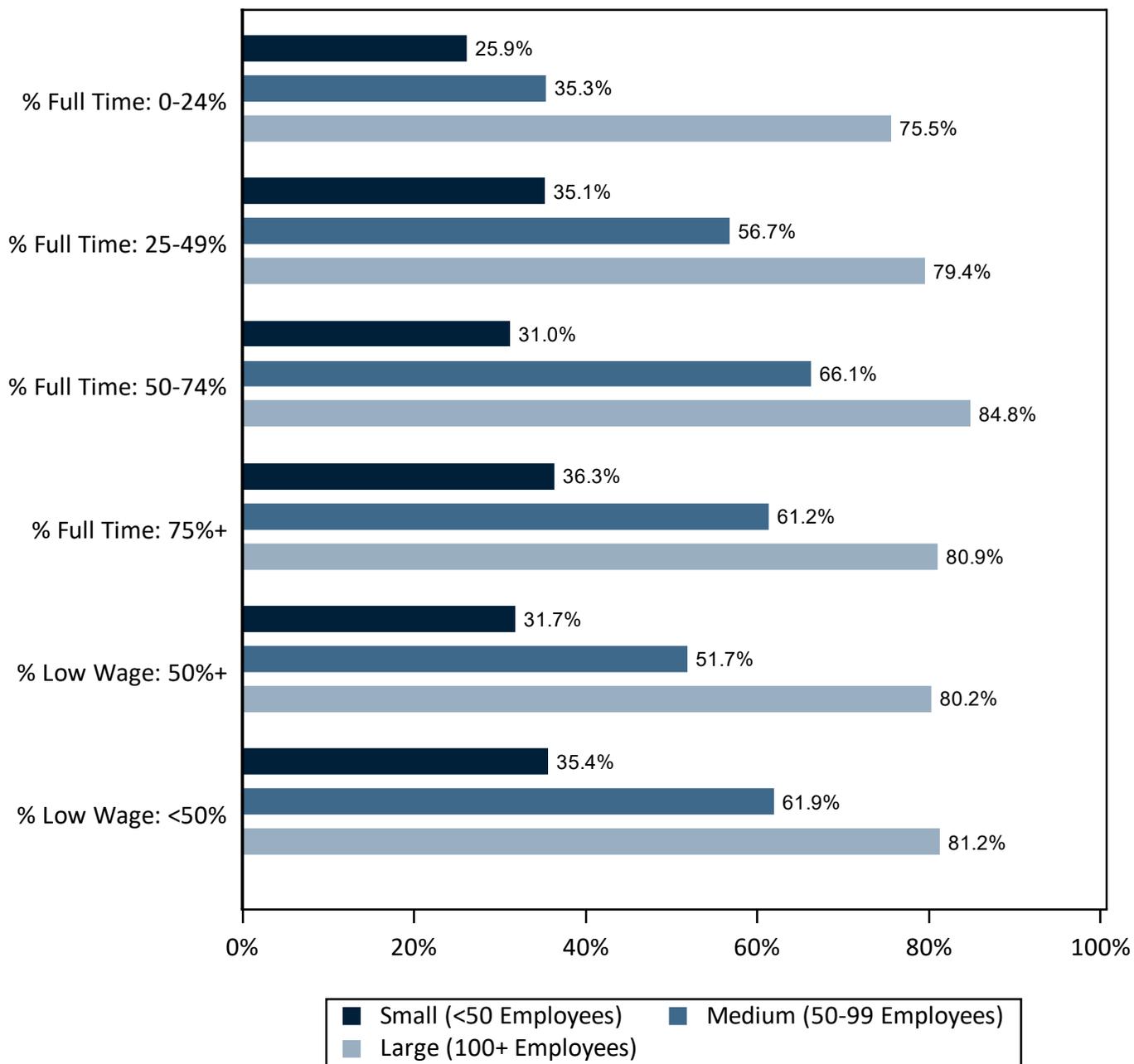
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 1.19

Percentage of private-sector employees working in establishments that offer two or more health insurance plans, by firm size and selected characteristics (% full time, % low wage), 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

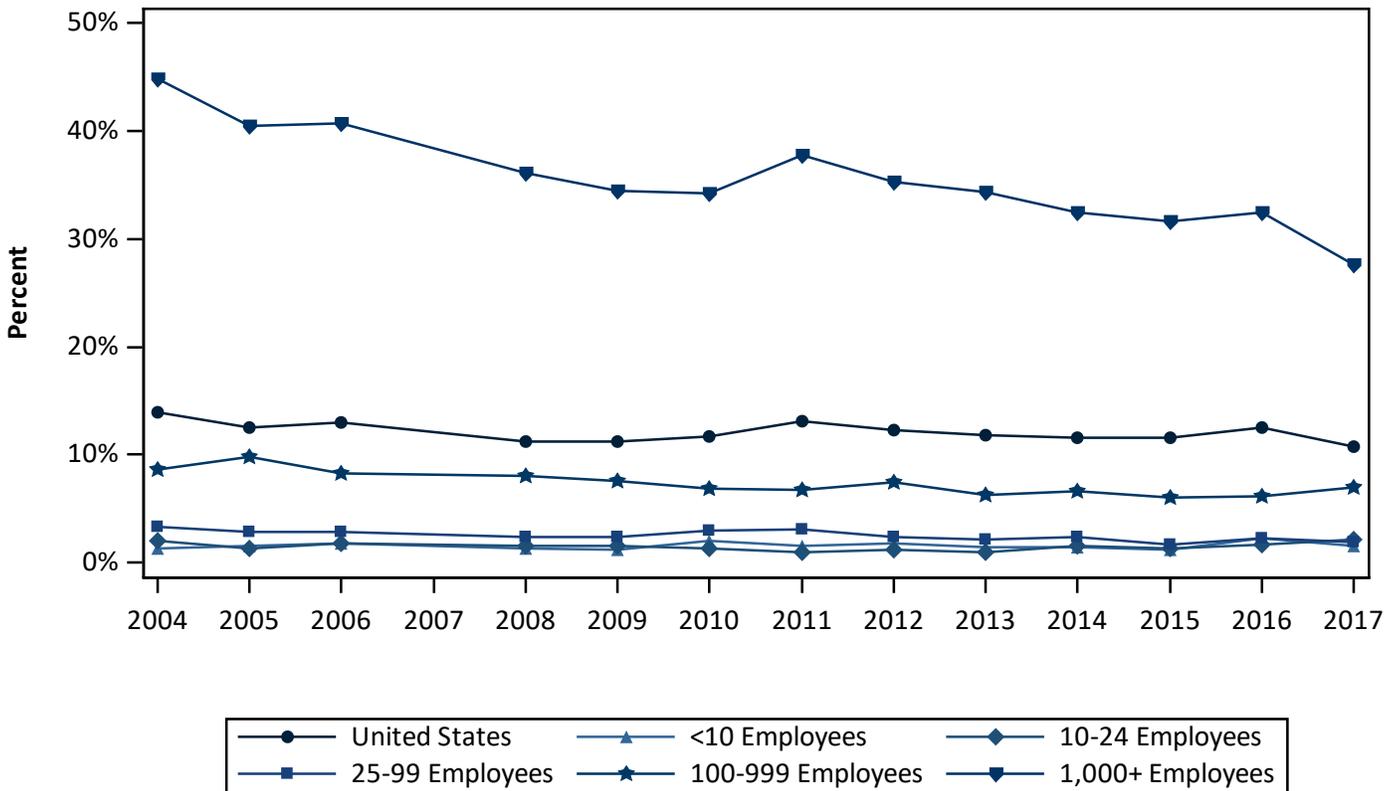
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 1.20

Among establishments offering health insurance, percentage offering coverage to retirees under age 65, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.20

Among establishments offering health insurance, percentage offering coverage to retirees under age 65, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	14.0%	12.5%	13.0%	11.2%	11.2%	11.6%	13.1%	12.3%	11.9%	11.6%	11.6%	12.5%	10.8%
<10	1.3%	1.6%	1.8%	1.4%	1.2%	2.0%	1.6%	1.8%	1.4%	1.4%	1.2%	2.3%	1.6%
10-24	2.1%	1.3%	1.8%	1.6%	1.6%	1.4%	1.0%	1.2%	1.0% †	1.5%	1.3%	1.7%	2.1%
25-99	3.3%	2.9%	2.9%	2.4%	2.4%	3.0%	3.1%	2.4%	2.2%	2.4%	1.7%	2.3%	1.9%
100-999	8.7%	9.8%	8.3%	8.0%	7.5%	6.9%	6.8%	7.4%	6.3%	6.6%	6.0%	6.2%	7.0%
1,000+	44.8%	40.5%	40.6%	36.1%	34.5%	34.2%	37.7%	35.3%	34.3%	32.5%	31.6%	32.4%	27.6%

† Estimate does not meet standard of reliability or precision.

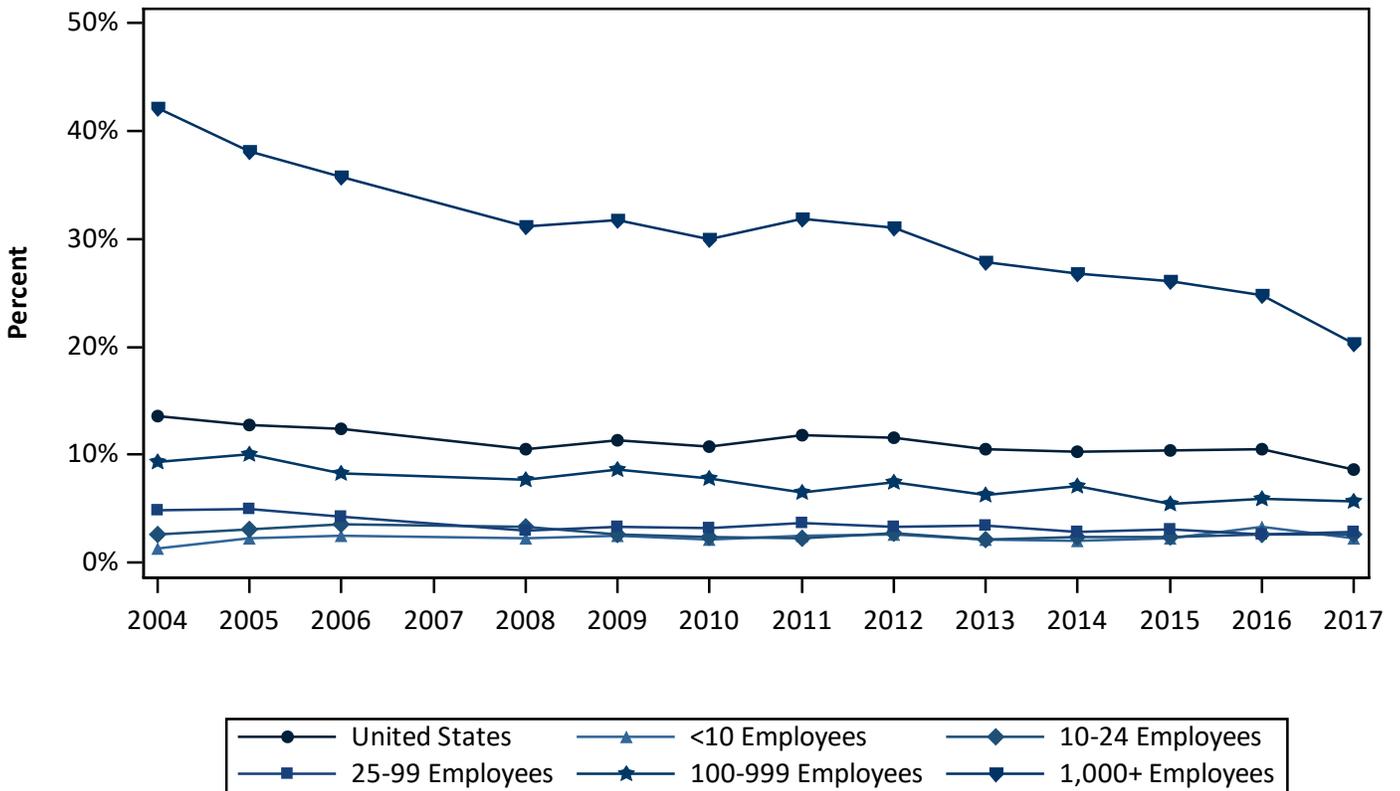
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 1.21

Among establishments offering health insurance, percentage offering coverage to retirees age 65 and over, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 1.21

Among establishments offering health insurance, percentage offering coverage to retirees age 65 and over, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	13.6%	12.7%	12.4%	10.5%	11.3%	10.8%	11.9%	11.6%	10.5%	10.3%	10.4%	10.5%	8.6%
<10	1.4%	2.3%	2.5%	2.3%	2.6%	2.2%	2.5%	2.6%	2.1%	2.0%	2.2%	3.4%	2.3%
10-24	2.6%	3.1%	3.6%	3.4%	2.7%	2.3%	2.3%	2.8%	2.2%	2.4%	2.4%	2.7%	2.7%
25-99	4.9%	5.0%	4.3%	2.9%	3.4%	3.3%	3.7%	3.4%	3.4%	2.9%	3.1%	2.6%	2.9%
100-999	9.4%	10.1%	8.3%	7.7%	8.6%	7.8%	6.5%	7.5%	6.3%	7.1%	5.5%	5.9%	5.7%
1,000+	42.1%	38.1%	35.7%	31.1%	31.8%	29.9%	31.9%	31.1%	27.8%	26.8%	26.1%	24.8%	20.3%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

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Section 2: Employee Eligibility and Enrollment



Employee Eligibility and Enrollment

In 2017, 47.7 percent of private-sector employees (59.9 million workers) were enrolled in a health plan through their employer (“the enrollment rate”). Among establishments that offered insurance, 56.5 percent of employees were enrolled in coverage through their employer (the “coverage rate”) and 76.8 percent were eligible for health insurance (the “eligibility rate”). Among eligible employees, 73.5 percent were enrolled in their employer’s health insurance (the “take-up rate”).

This section presents estimates for 2004 to 2017 for private-sector employees for the following:

- Enrollment rate (percentage of all employees enrolled in their employer’s health insurance plan regardless of whether the establishment offered health insurance). (Note that in this calculation the number of enrollees is equal to zero at employers that do not offer coverage),
- Coverage rate (percentage of all employees enrolled in their employer’s health insurance plan at establishments that offered health insurance),
- Eligibility rate (percentage of employees eligible for health insurance through their employer at establishments offering health insurance), and
- Take-up rate (percentage of eligible employees who enrolled in their employer’s health insurance).

The coverage rate is equal to the eligibility rate multiplied by the take-up rate, and the enrollment rate is equal to the coverage rate multiplied by the offer rate (the percentage of employees who work at employers that offer insurance). Information on offer rates can be found in Section 1.

This section also presents estimates for 2004 to 2017 for the percentage of enrollees in single, employee-plus-one, and family coverage and examines variation in coverage, eligibility, and take-up rates by firm size, industry, and other employer characteristics. It also presents coverage rates by the State in which the establishment was located.

Changes From 2004 to 2017

Overall

- Between 2016 and 2017, there was no significant change in the overall percentage of private-sector employees enrolled in a health insurance plan offered by their employers (“enrollment rate”). However, the number of enrollees increased from 58.2 million to 59.9 million in this period ($p < 0.10$) (Exhibits 2.1 and 2.2).
- Among employees in establishments that offered health insurance, there were no significant changes in coverage, eligibility, or take-up rates between 2016 and 2017. However, coverage, eligibility, and take-up rates in 2017 were lower than earlier in the 2004 to 2017

period. Specifically, coverage rates were significantly lower in 2017 than in all years from 2004 to 2014 and eligibility rates were significantly lower than in all years from 2004 to 2013 except 2006. Take-up rates were significantly lower in 2017 than in all years from 2004 to 2015 (Exhibits 2.3, 2.5, and 2.7).

- Between 2004 and 2016, coverage rates declined by 6.6 percentage points, with significant year-to-year declines in 2006, 2010, and 2016 ($p < 0.10$). The decline between 2004 and 2013 reflects a decline in take-up rates as there was no long-term significant decline in eligibility rates between 2004 and 2013. In contrast, the decline between 2013 and 2016 reflects a decline in the eligibility rate as well as the take-up rate (Exhibits 2.3, 2.5, and 2.7).

By Firm Size

- Between 2016 and 2017, there was no significant change in the enrollment rate in any firm-size category and no significant change in the number of enrollees in small firms (fewer than 50 employees) and medium firms (50-99 employees). However, the number of enrollees in large firms (100 or more employees) increased from 45.3 to 46.9 million ($p < 0.10$) (Exhibits 2.1 and 2.2).
- There were no significant changes in coverage, eligibility, or take-up rates in large firms (100 or more employees) between 2016 and 2017. Within the large firm category, there were also no significant changes at firms with 100 to 999 and with 1,000 or more employees (Exhibits 2.3 through 2.8).
- Coverage rates in large firms (100 or more employees) were relatively stable between 2015 and 2016 (57.1 percent in 2015 and 56.6 percent in 2016), after declining from 58.3 percent to 57.1 percent between 2014 and 2015 ($p < 0.10$). The 1.7 percentage point decline between 2014 and 2016 for large firms mainly reflects a decline in take-up rates in this 2-year period, as there were no significant changes in large firms' eligibility rates. Large firm take-up rates fell by 1.8 percentage points from 2014 to 2015 and by 1.6 percentage points from 2015 to 2016. From 2013 to 2014, there were no significant changes in coverage rates for employees in large firms due to offsetting changes from a decline in eligibility (2.9 percentage points) and an increase in take-up rates (2.3 percentage points) (Exhibits 2.3, 2.5, and 2.7).
- There were no significant changes in coverage, eligibility, or take-up rates in small or medium firms between 2016 and 2017. However, between 2015 and 2016, coverage rates declined by 1.5 percentage points in small firms (fewer than 50 employees, $p < 0.10$) and by 4.6 percentage points in medium firms (50-99 employees). These declines reflect decreases in take-up rates, as there were no significant changes in eligibility rates at small or medium firms. From 2013 to 2014 and from 2014 to 2015, there were no significant changes in coverage, eligibility, or take-up rates for employees in small firms. Comparing rates in 2013 and 2015 for medium firms, there were also no significant changes in coverage, eligibility, or take-up rates (Exhibits 2.3, 2.5, and 2.7).
- Between 2004 and 2013, coverage rates fell for employees in small, medium, and large firms ($p < 0.10$ for medium firms). Over this entire period, coverage rates declined by 4.4

percentage points for employees overall (from 62.6 percent in 2004 to 58.2 percent in 2013), although many of the year-to-year changes were not statistically significant. The decrease in coverage rates across the three firm-size categories reflected declining take-up rates, since eligibility rates did not significantly change between 2004 and 2013 for employees in any of these categories (Exhibits 2.3, 2.5, and 2.7).

Changes From 2004 to 2017 by Percentage of Establishment's Workforce That Is Low Wage and by Firm Size

- Between 2016 and 2017, coverage rates at large low-wage employers (50 or more employees and 50 percent or more of the establishment's workforce earning less than \$12.00 per hour) increased from 27.4 percent to 29.5 percent and eligibility rates increased from 49.7 percent to 51.9 percent ($p < 0.10$). There was no significant change in the take-up rate for large low-wage employers in this period. There were also no significant changes in coverage, eligibility, or take-up rates in the 2016 to 2017 period for small low-wage employers or for small or large higher-wage employers (Exhibits 2.9, 2.10, and 2.11).
- Between 2015 and 2016, there were no significant changes in coverage rates, eligibility rates, or take-up rates for employees of large low-wage employers. In the previous year, coverage rates had declined by 3.9 percentage points for employees at such firms due to a 6.3 percentage point decline in take-up rates. The 2014 to 2015 decline in take-up rates at large low-wage employers reversed a 6.0 percentage point increase from 2013 to 2014. Eligibility rates at such employers, which had declined by 9.9 percentage points between 2013 and 2014, remained at this lower level in 2015 (48.0 percent) and 2016 (49.7 percent). Despite the 2016 to 2017 increase in eligibility rates for large low-wage employers ($p < 0.10$), the rate in 2017 (51.9 percent) remained below the 2013 level (59.4 percent) (Exhibits 2.9, 2.10, and 2.11).
- Similar to trends at large low-wage employers, there were no significant changes in coverage rates, eligibility rates, or take-up rates for workers in small low-wage employers between 2015 and 2016. Coverage rates for workers at such employers had declined by 3.7 percentage points from 2014 to 2015 ($p < 0.10$), reflecting a 6.5 percentage point decline in take-up rates (Exhibits 2.9, 2.10, and 2.11).
- For employees at higher wage large employers, coverage rates declined by 2.2 percentage points between 2015 and 2016, reflecting a decline in take-up rates of 2.2 percentage points. Coverage rates and take-up rates at higher wage small firms declined by 1.6 percentage points and 1.9 percentage points, respectively. There were no significant changes in eligibility rates for employees at higher wage employers of either size (Exhibits 2.9, 2.10, and 2.11).
- In 2004, employees in small and large low-wage employers had similar coverage rates (41.4 percent and 41.0 percent, respectively). Between 2004 and 2013, coverage rates declined for employees at both small and large low-wage employers, with some differences in the exact timing of the declines. Despite these differences, employees at small and large low-wage

employers ended the period with almost identical coverage rates (33.3 percent at small employers and 33.2 percent at large employers in 2013) (Exhibit 2.9).

In 2014 and 2015, coverage rates at large low-wage employers were lower than at small low-wage employers ($p < 0.10$ for 2014). However, in both 2016 and 2017, there was no significant difference between coverage rates at small and large low-wage employers (28.9 percent and 29.5 percent in 2017, respectively) (Exhibit 2.9).

- Between 2004 and 2017, coverage rates declined by 7.7 and 7.0 percentage points, respectively, at small and large higher wage employers. Throughout the 2004 to 2017 period, coverage rates were higher at large higher wage employers than at small higher wage employers (Exhibit 2.9).
- Eligibility rates at small low-wage employers were lower than at large low-wage employers for most years in the 2004 to 2013 period. However, between 2013 and 2014, eligibility rates at large low-wage employers fell by 9.9 percentage points. This decline brought the 2014 eligibility rates for such employers in line with those for small low-wage employers. In 2015, eligibility rates at small low-wage employers were higher than at large low-wage employers ($p < 0.10$). In both 2016 and 2017, there was no significant difference between eligibility rates for workers at small and large low-wage employers (Exhibit 2.10).
- Between 2004 and 2013, take-up rates declined for workers at employers in all four wage/size categories. While workers at small low-wage employers had higher take-up rates than those at large low-wage employers in most years from 2004 through 2013, the 2013 to 2014 rise in the take-up rate at large low-wage employers brought their rate to a level that was not significantly different from the 2014 level for small low-wage employers (Exhibit 2.11).
- From 2014 to 2016, take-up rates followed similar patterns at large and small low-wage employers and there were no significant differences between rates at these employers. Take-up rates at large and small low-wage employers declined from 2014 to 2015, and there were no significant changes in rates between 2015 and 2016 for either type of employer (Exhibit 2.11).

Estimates by Selected Characteristics, 2017

Differences by Firm Size, 2017

- In 2017, enrollment rates varied significantly across all firm sizes. Workers in firms with fewer than 50 employees had the lowest enrollment rate (26.7 percent), workers in medium firms (50-99 employees) had an enrollment rate of 45.0 percent, and workers in large firms (100 or more employees) had the highest enrollment rate (56.5 percent) (Exhibit 2.1).
- In 2017, the coverage rate was significantly lower in medium firms compared with small and large firms. Workers in small firms had a lower coverage rate (55.4 percent) than workers in large firms (57.1 percent), which were both higher than the coverage rate in medium firms (52.2 percent) (Exhibit 2.3).

- The different enrollment rates between small and large firms in 2017 reflect higher offer rates and coverage rates at large employers compared with small employers. The higher enrollment rate for large firms compared with medium firms also reflects higher offer rates and coverage rates at large firms compared with medium firms. The higher enrollment rate for medium firms compared with small firms is driven by the higher offer rate at medium firms, since workers in medium firms had a lower coverage rate than workers in small firms (Exhibits 1.1, 2.1, and 2.3).
- In 2017, workers in small firms had higher eligibility rates and lower take-up rates than workers in large firms. The lower coverage rate for workers in medium firms compared with small firms was driven by the lower eligibility rate for workers in medium firms compared with workers in small firms. The lower coverage rate for workers in medium firms compared with large firms was driven by the lower take-up rate for workers in medium firms compared with large firms since there was no significant difference in eligibility rates for workers in medium and large firms (Exhibits 2.3, 2.5, and 2.7).
- The coverage rate in 2017 for workers in the smallest firms (fewer than 10 employees) was higher than coverage rates for workers in the four other firm sizes (10-24, 25-99, 100-999, and 1,000 or more employees). This higher coverage rate reflects the higher eligibility rate for workers in the smallest firms compared with workers in all other firm-size categories and higher take-up rates compared with workers in all but the very largest firms (Exhibits 2.4, 2.6, and 2.8).
- Workers in the largest firms (1,000 or more employees) had a higher coverage rate than workers in firms with 10 to 24, 25 to 99 workers, and 100 to 999 workers due to a higher take-up rate. The take-up rate in the largest firms was higher than in all other firm-size categories ($p < 0.10$ for the comparison with the smallest firms) (Exhibits 2.4, 2.6, and 2.8).

Differences by State, 2017

- The coverage rate varied by State in 2017, although most States were not significantly different from the national average of 56.5 percent. Five States were significantly below the national average: Massachusetts (51.8 percent), New Jersey (52.1 percent), New Mexico (49.9 percent), Rhode Island (51.2 percent), and Vermont (48.0 percent). The five States significantly above the national average were Hawaii (61.5 percent), Idaho (61.4 percent), Michigan (61.8 percent), Montana (61.8 percent), and South Carolina (60.5 percent) (Exhibit 2.12).

Differences by Industry, 2017

- Employees working in mining and manufacturing had a higher coverage rate (78.3 percent) than any other sector. The high coverage rate in mining and manufacturing was due to a higher eligibility rate than all other sectors (95.4 percent) and a higher take-up rate (82.0 percent) than all sectors except utilities and transportation and financial services and real estate (Exhibits 2.13, 2.14, and 2.15).

- Employees working in utilities and transportation, wholesale trade, and financial services and real estate also had relatively high coverage rates (70.4 percent, 71.9 percent, and 74.4 percent, respectively). These rates were also due to a combination of high eligibility rates (88.0 percent, 90.3 percent, and 92.1 percent, respectively) and high take-up rates (80.0 percent, 79.7 percent, and 80.8 percent, respectively) (Exhibits 2.13, 2.14, and 2.15).
- Conversely, employees working in retail trade and in other services had lower coverage rates than most sectors (39.2 percent and 36.7 percent, respectively), a product of having lower eligibility rates (57.6 percent and 60.2 percent, respectively) and lower take-up rates (68.1 percent and 61.0 percent, respectively) than most other sectors (Exhibits 2.13, 2.14, and 2.15).

Differences by Selected Firm Characteristics, 2017

- Employees in establishments that were for profit and unincorporated had a lower coverage rate than employees in establishments that were either nonprofit or for profit and incorporated (50.6 percent vs. 56.1 percent and 57.7 percent, respectively). The eligibility rate was higher at for-profit incorporated establishments (78.3 percent) than at for-profit unincorporated establishments (73.1 percent) and nonprofit establishments (73.5 percent). Employees in nonprofit establishments had a higher take-up rate than those in for-profit unincorporated establishments or for-profit incorporated establishments (76.3 percent vs. 69.3 percent and 73.8 percent, respectively) (Exhibits 2.16, 2.17, and 2.18).
- Employees in firms that were 20 years old or older had a higher coverage rate (57.8 percent) than employees in firms that were less than 5 years old, 5 to 9 years old, and 10 to 19 years old (51.2 percent, 51.3 percent, and 51.6 percent, respectively). Since there were no significant differences in eligibility rates, the differences in coverage rates were due to a higher take-up rate for employees in firms 20 years old or older versus younger firms (75.2 percent vs. rates of 67.2 percent or 67.3 percent) (Exhibits 2.16, 2.17, and 2.18).
- Employees in firms with multiple locations had a higher coverage rate than those with a single location (58.2 percent vs. 52.7 percent). Since there was no difference in eligibility rates for firms with multiple locations and firms with a single location (76.8 percent for both), the difference in coverage rates was due to a higher take-up rate in firms with multiple locations (75.7 percent vs. 68.6 percent) (Exhibits 2.16, 2.17, and 2.18).
- The coverage rate increased directly with the percentage of full-time employees at an establishment, increasing from 14.0 percent for employees in establishments with 0 to 24 percent full-time employees to 66.2 percent in establishments with 75 percent or more full-time employees. The eligibility rate followed the same pattern, increasing from 26.3 percent to 87.2 percent. Take-up rates also followed a similar pattern, increasing from 53.2 percent in establishments with 0 to 24 percent full-time employees to 75.9 percent in firms with 75 percent or more full-time employees ($p < 0.10$ for the comparison between the two lowest categories) (Exhibits 2.16, 2.17, and 2.18).
- Employees in higher wage establishments (less than 50 percent of the employees earned less than \$12.00 an hour) had more than double the coverage rate of employees in predominantly

low-wage establishments (50 percent or more of the employees earned less than \$12.00 an hour) (63.2 percent vs. 29.5 percent). This difference was due to both a higher eligibility rate (83.0 percent vs. 51.6 percent) and a higher take-up rate (76.1 percent vs. 57.1 percent) among employees in higher wage establishments compared with those in predominantly low-wage establishments (Exhibits 2.16, 2.17, and 2.18).

Enrollment in Single, Employee-Plus-One, and Family Coverage

Overall

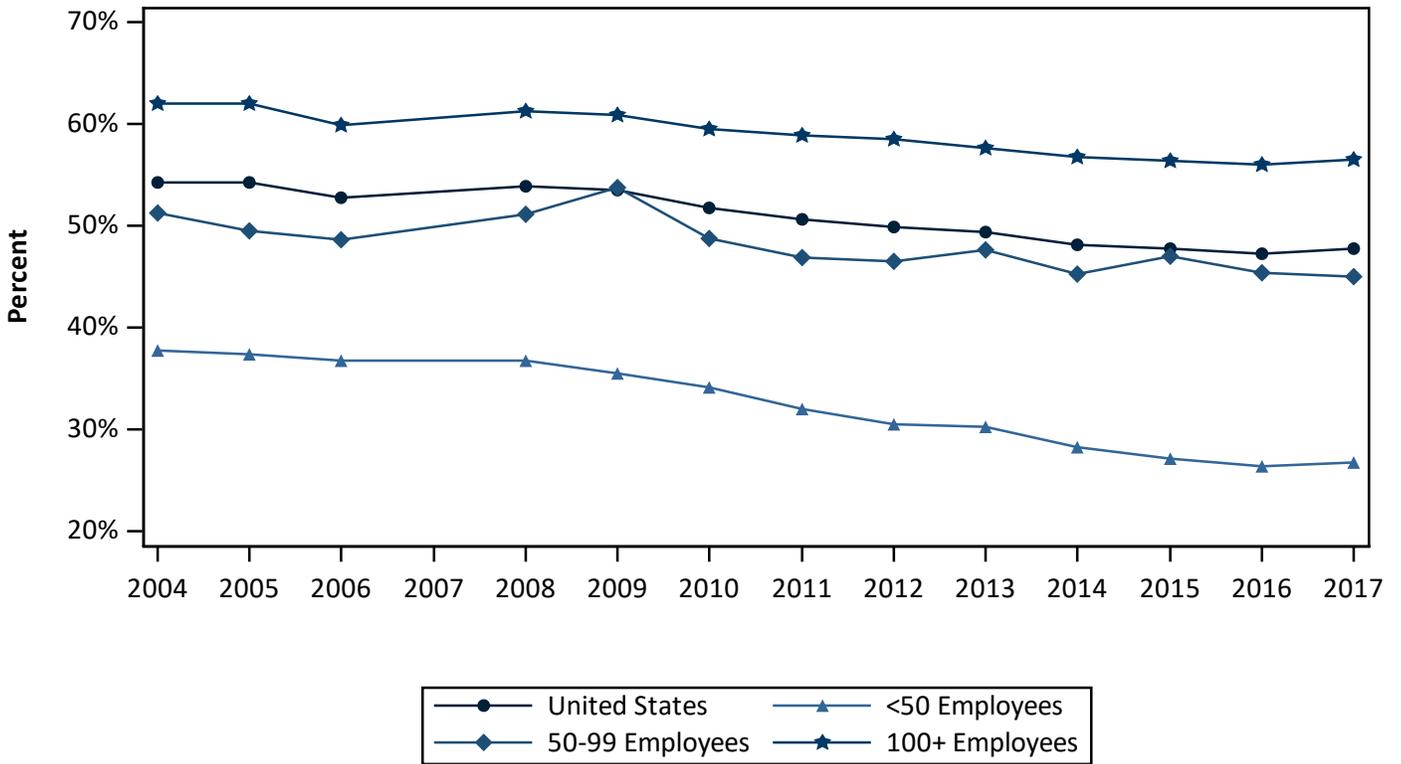
- In 2017, 54.6 percent of enrollees had single coverage, 19.0 percent had employee-plus-one coverage, and 26.5 percent had family coverage (Exhibits 2.19, 2.20, and 2.21).
- Between 2016 and 2017, the percentage of enrollees with single coverage declined from 55.3 percent to 54.6 percent ($p < 0.10$) and the percentage with employee-plus-one coverage increased from 17.8 percent to 19.0 percent. There was no significant change in the percentage of enrollees with family coverage (Exhibits 2.19, 2.20, and 2.21).
- Between 2004 and 2017, the percentage of enrollees with single coverage increased from 47.3 percent to 54.6 percent and the percentage with employee-plus-one coverage increased from 17.4 percent to 19.0 percent. The percentage with family coverage decreased from 35.2 percent to 26.5 percent (Exhibits 2.19, 2.20, and 2.21).

By Firm Size

- In 2017, a lower percentage of enrollees in large firms than in small and medium firms enrolled in single coverage (52.1 percent vs. 63.5 percent and 63.3 percent, respectively). A higher percentage enrolled in employee-plus-one coverage (20.2 percent vs. 13.9 percent and 15.8 percent, respectively) and family coverage (27.7 percent vs. 22.6 percent and 20.9 percent, respectively) (Exhibits 2.19, 2.20, and 2.21).
- The percentage of enrollees with employee-plus-one coverage increased with firm size in every year from 2008 through 2017 (Exhibit 2.20).
- Between 2016 and 2017, the percentage of enrollees in large firms (100 or more employees) enrolled in single coverage declined from 53.1 percent to 52.1 percent and the percentage with employee-plus-one coverage increased from 18.6 percent to 20.2 percent. There was no significant change in the percentage with family coverage at large firms. There were also no significant changes in single, employee-plus-one, and family coverage at small or medium firms in this period (Exhibits 2.19, 2.20, and 2.21).
- The 2016 to 2017 decline in single coverage at large firms occurred at firms with 100 to 999 employees ($p < 0.10$) while the increase in employee-plus-one coverage occurred both at firms with 100 to 999 employees and firms with 1,000 or more employees. While there was no significant change in family coverage overall or in the large firm category (100 or more employees), the percentage of enrollees with family coverage in firms with 1,000 or more employees declined from 30.0 percent in 2016 to 29.1 percent in 2017 ($p < 0.10$) (Exhibits 2.22, 2.23, and 2.24).

Exhibit 2.1: Enrollment Rate

Percentage of all private-sector employees enrolled in health insurance offered by their employers, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, all employees in all establishments.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.1: Enrollment Rate

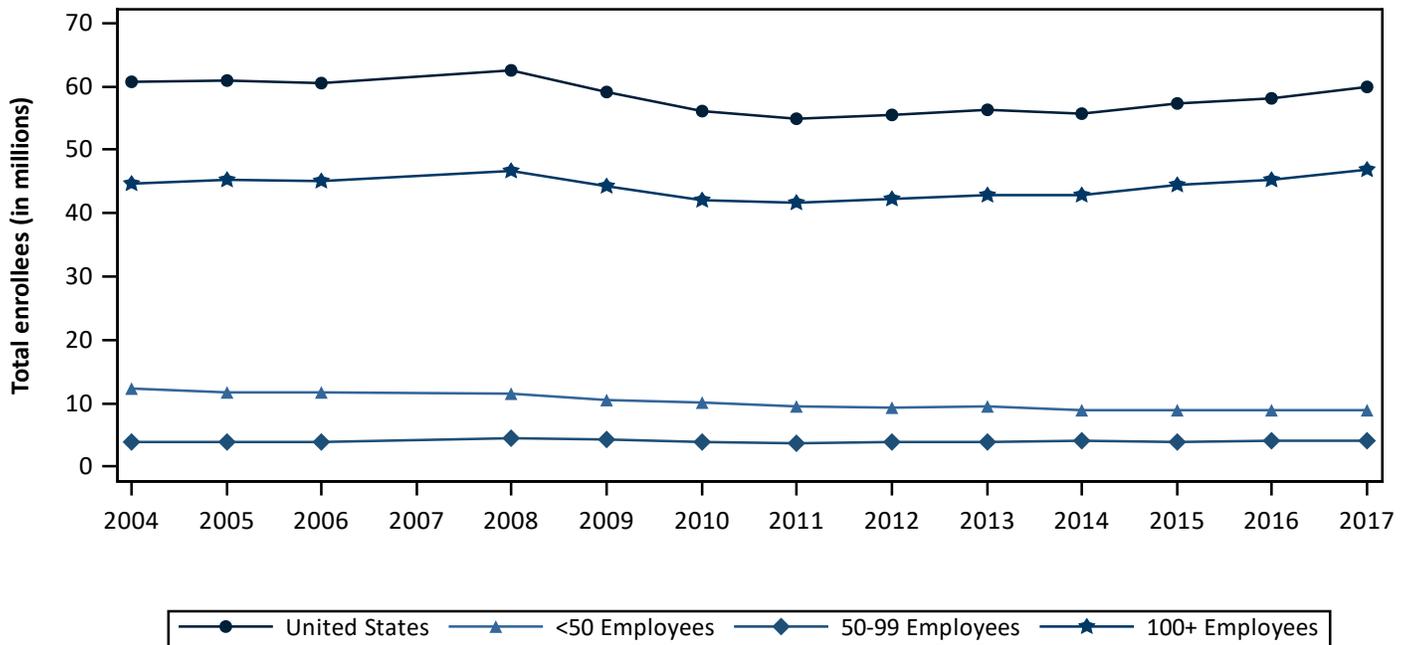
Percentage of all private-sector employees enrolled in health insurance offered by their employers, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	54.2%	54.3%	52.8%	53.9%	53.5%	51.8%	50.6%	49.9%	49.4%	48.1%	47.8%	47.2%	47.7%
<50	37.7%	37.4%	36.8%	36.8%	35.5%	34.2%	32.0%	30.5%	30.3%	28.3%	27.1%	26.5%	26.7%
50-99	51.3%	49.4%	48.7%	51.1%	53.8%	48.8%	46.9%	46.6%	47.6%	45.2%	47.0%	45.4%	45.0%
100+	62.0%	62.0%	59.9%	61.3%	60.9%	59.5%	58.9%	58.5%	57.7%	56.7%	56.4%	56.0%	56.5%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, all employees in all establishments.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 2.2: Number Enrolled

Total number (in millions) of private-sector employees enrolled in health insurance offered by their employers, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.2: Number Enrolled

Total number (in millions) of private-sector employees enrolled in health insurance offered by their employers, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	60.8	60.9	60.5	62.6	59.2	56.1	54.8	55.4	56.3	55.8	57.3	58.2	59.9
<50	12.3	11.7	11.6	11.5	10.6	10.2	9.5	9.3	9.5	8.9	8.9	8.9	8.9
50-99	3.9	3.9	3.8	4.4	4.3	3.8	3.7	3.8	4.0	4.1	4.0	4.0	4.1
100+	44.6	45.3	45.1	46.7	44.3	42.1	41.6	42.3	42.9	42.8	44.4	45.3	46.9

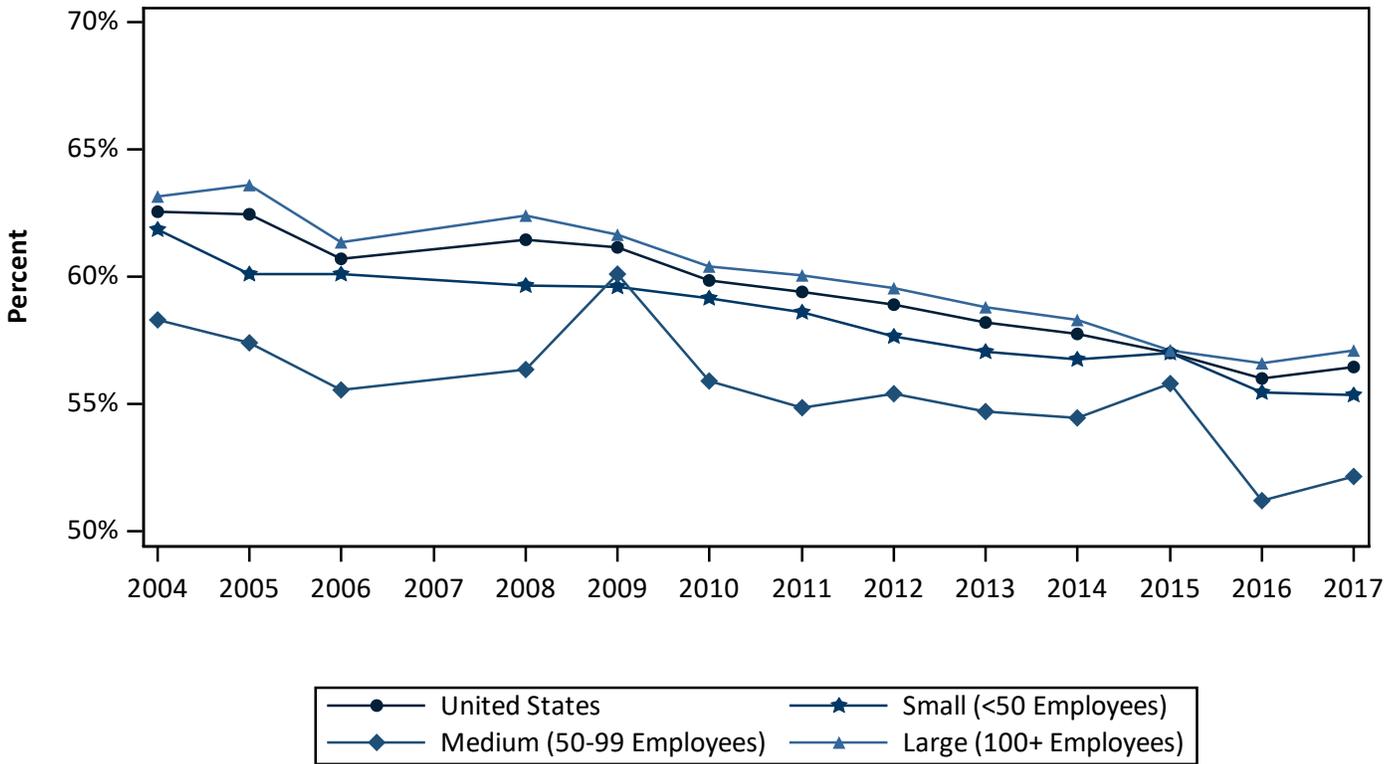
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. The sum of estimates by firm size may differ from the U.S. total due to rounding.

For data points and standard errors for this exhibit, select here.

Exhibit 2.3: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.3: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	62.6%	62.5%	60.7%	61.4%	61.1%	59.8%	59.4%	58.9%	58.2%	57.8%	57.0%	56.0%	56.5%
<50	61.9%	60.1%	60.1%	59.7%	59.6%	59.2%	58.6%	57.7%	57.1%	56.8%	57.0%	55.5%	55.4%
50-99	58.3%	57.4%	55.6%	56.3%	60.1%	55.9%	54.9%	55.4%	54.7%	54.5%	55.8%	51.2%	52.2%
100+	63.2%	63.6%	61.4%	62.4%	61.6%	60.4%	60.0%	59.5%	58.8%	58.3%	57.1%	56.6%	57.1%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

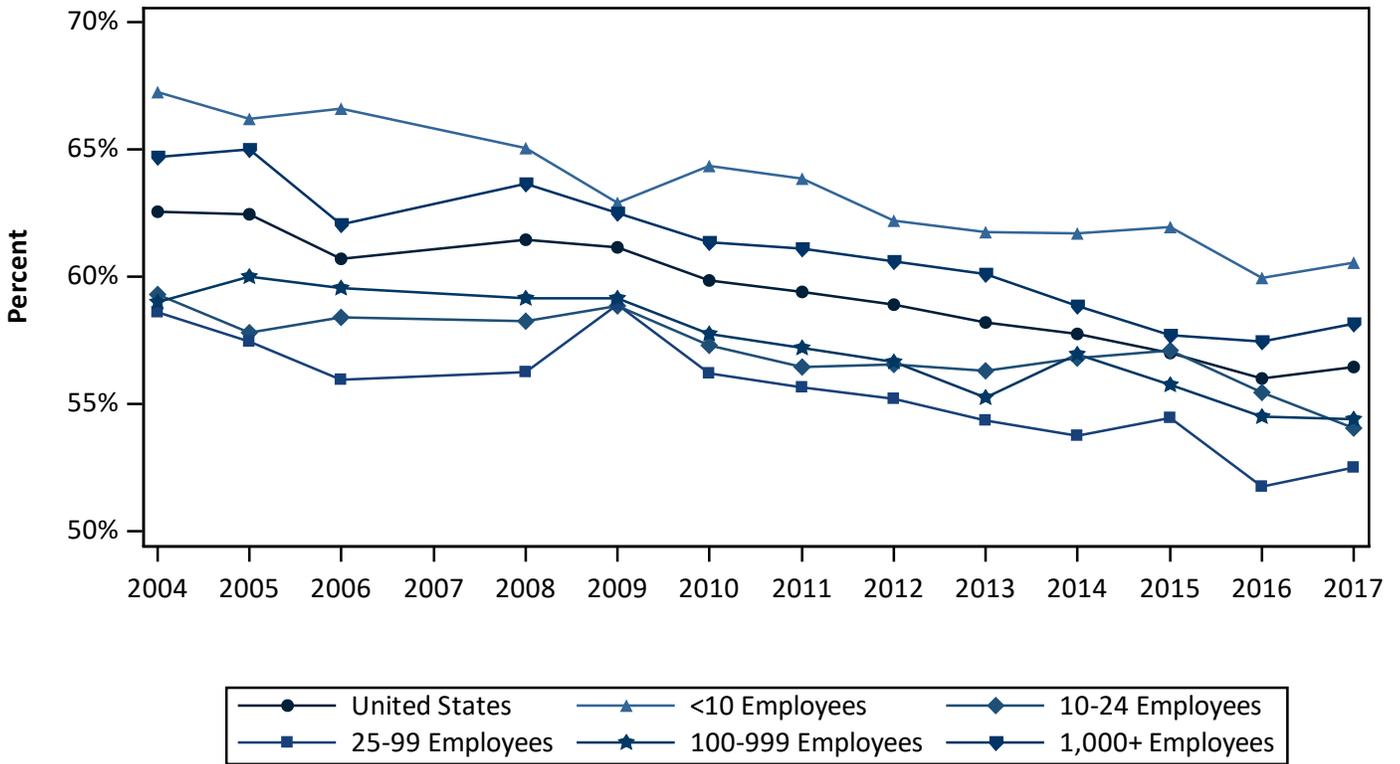
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.4: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.4: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	62.6%	62.5%	60.7%	61.4%	61.1%	59.8%	59.4%	58.9%	58.2%	57.8%	57.0%	56.0%	56.5%
<10	67.3%	66.2%	66.6%	65.0%	62.9%	64.4%	63.9%	62.2%	61.8%	61.7%	61.9%	60.0%	60.6%
10-24	59.3%	57.8%	58.4%	58.2%	58.8%	57.3%	56.5%	56.5%	56.3%	56.8%	57.1%	55.5%	54.1%
25-99	58.6%	57.4%	55.9%	56.3%	58.9%	56.2%	55.7%	55.2%	54.4%	53.8%	54.5%	51.8%	52.5%
100-999	59.0%	60.0%	59.5%	59.1%	59.2%	57.7%	57.2%	56.6%	55.3%	56.9%	55.8%	54.5%	54.4%
1,000+	64.7%	65.0%	62.1%	63.7%	62.5%	61.4%	61.1%	60.6%	60.1%	58.8%	57.7%	57.5%	58.1%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

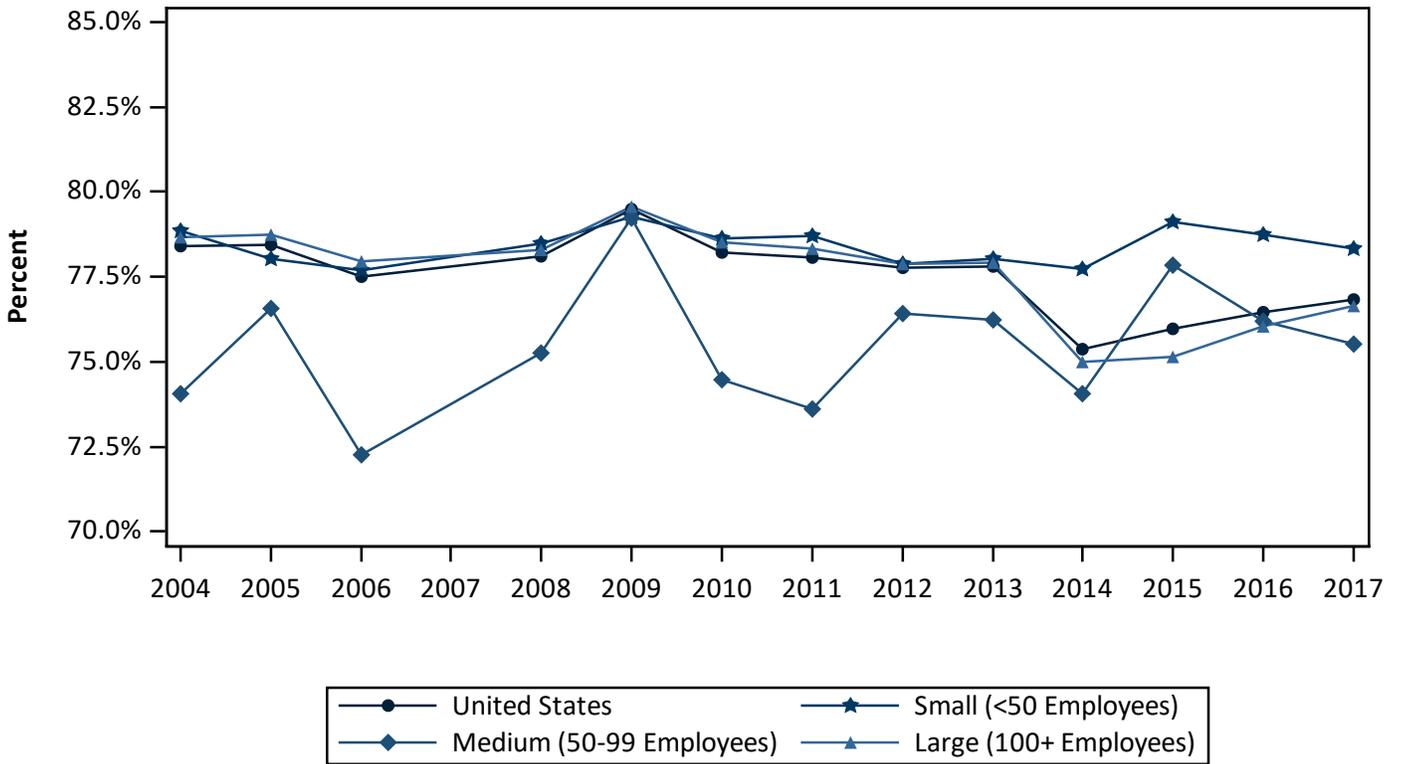
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.5: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, all employees in establishments that offer health insurance.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.5: Eligibility Rate

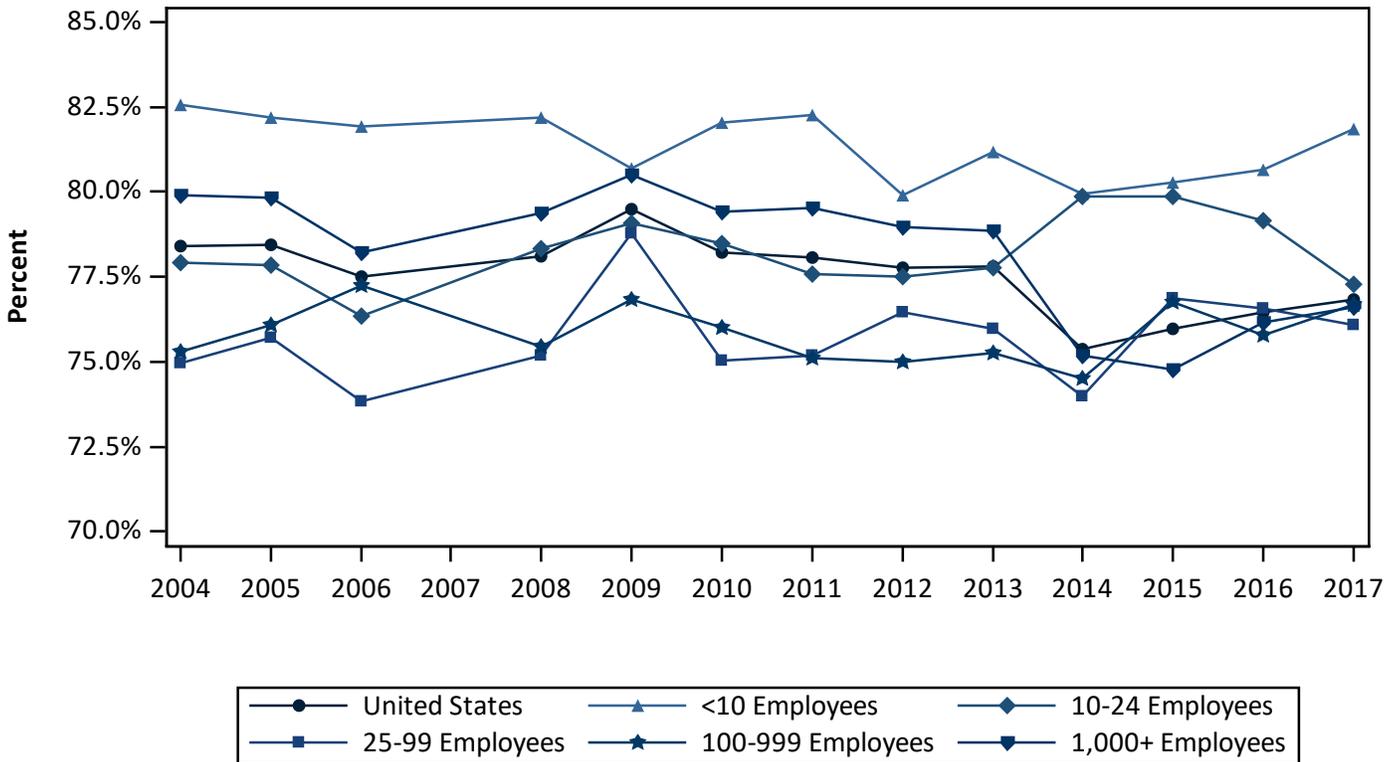
Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	78.4%	78.5%	77.5%	78.1%	79.5%	78.2%	78.0%	77.8%	77.8%	75.4%	76.0%	76.5%	76.8%
<50	78.8%	78.0%	77.7%	78.5%	79.3%	78.6%	78.7%	77.9%	78.0%	77.7%	79.1%	78.7%	78.3%
50-99	74.1%	76.6%	72.3%	75.3%	79.2%	74.5%	73.6%	76.4%	76.2%	74.1%	77.8%	76.2%	75.5%
100+	78.7%	78.8%	77.9%	78.3%	79.6%	78.5%	78.3%	77.9%	77.9%	75.0%	75.2%	76.0%	76.6%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, all employees in establishments that offer health insurance.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 2.6: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.6: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	78.4%	78.5%	77.5%	78.1%	79.5%	78.2%	78.0%	77.8%	77.8%	75.4%	76.0%	76.5%	76.8%
<10	82.5%	82.2%	81.9%	82.2%	80.7%	82.1%	82.2%	79.9%	81.2%	79.9%	80.3%	80.6%	81.8%
10-24	77.9%	77.8%	76.3%	78.3%	79.1%	78.5%	77.6%	77.5%	77.8%	79.8%	79.9%	79.2%	77.3%
25-99	75.0%	75.7%	73.8%	75.2%	78.8%	75.0%	75.2%	76.4%	76.0%	74.0%	76.9%	76.6%	76.1%
100-999	75.3%	76.1%	77.2%	75.4%	76.8%	76.0%	75.1%	75.0%	75.3%	74.5%	76.8%	75.8%	76.7%
1,000+	79.9%	79.8%	78.2%	79.4%	80.5%	79.4%	79.5%	79.0%	78.9%	75.2%	74.8%	76.2%	76.6%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

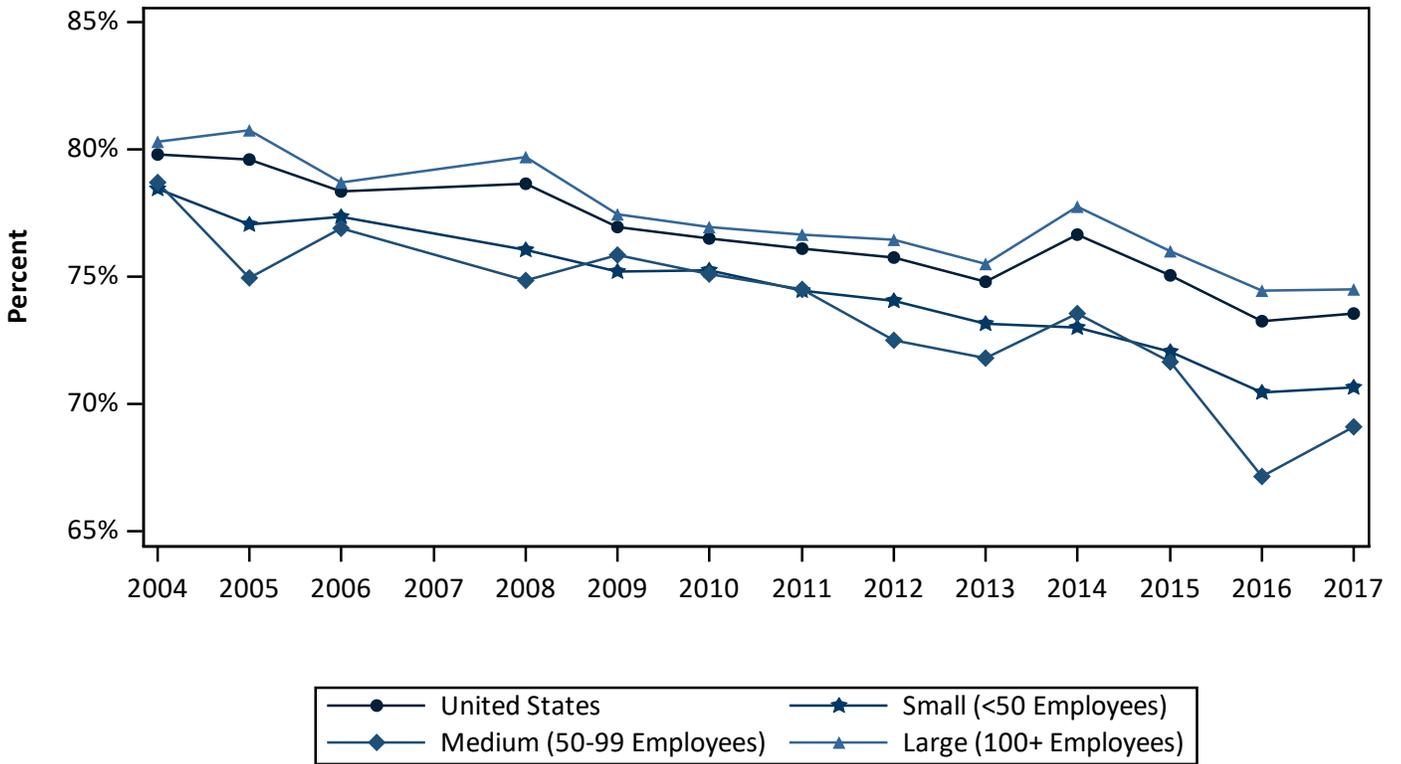
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.7: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, eligible employees in establishments that offer health insurance.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.7: Take-Up Rate

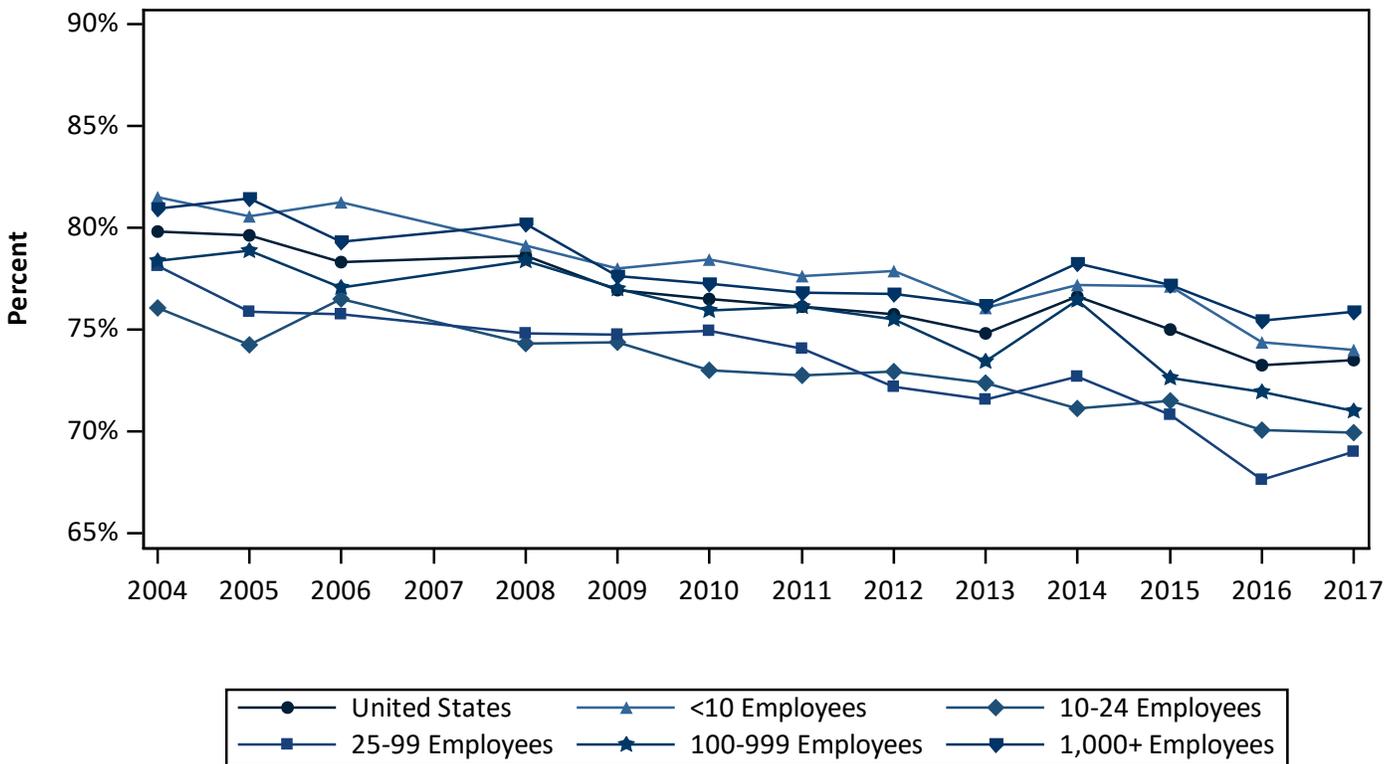
Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	79.8%	79.6%	78.3%	78.7%	76.9%	76.5%	76.1%	75.8%	74.8%	76.7%	75.0%	73.3%	73.5%
<50	78.5%	77.0%	77.4%	76.0%	75.2%	75.3%	74.4%	74.1%	73.1%	73.0%	72.1%	70.4%	70.7%
50-99	78.7%	74.9%	76.9%	74.9%	75.9%	75.1%	74.5%	72.5%	71.8%	73.5%	71.7%	67.2%	69.1%
100+	80.3%	80.7%	78.7%	79.7%	77.5%	76.9%	76.7%	76.4%	75.5%	77.8%	76.0%	74.4%	74.5%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Denominator: Within each category, eligible employees in establishments that offer health insurance.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 2.8: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, eligible employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.8: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	79.8%	79.6%	78.3%	78.7%	76.9%	76.5%	76.1%	75.8%	74.8%	76.7%	75.0%	73.3%	73.5%
<10	81.5%	80.5%	81.3%	79.2%	78.0%	78.5%	77.7%	77.9%	76.1%	77.2%	77.1%	74.4%	74.0%
10-24	76.1%	74.3%	76.5%	74.3%	74.4%	73.0%	72.8%	73.0%	72.4%	71.2%	71.5%	70.1%	69.9%
25-99	78.1%	75.9%	75.8%	74.8%	74.8%	74.9%	74.1%	72.2%	71.6%	72.7%	70.8%	67.6%	69.0%
100-999	78.4%	78.9%	77.1%	78.4%	77.0%	76.0%	76.2%	75.5%	73.4%	76.4%	72.7%	71.9%	71.0%
1,000+	81.0%	81.4%	79.3%	80.2%	77.6%	77.3%	76.8%	76.8%	76.2%	78.3%	77.2%	75.4%	75.9%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

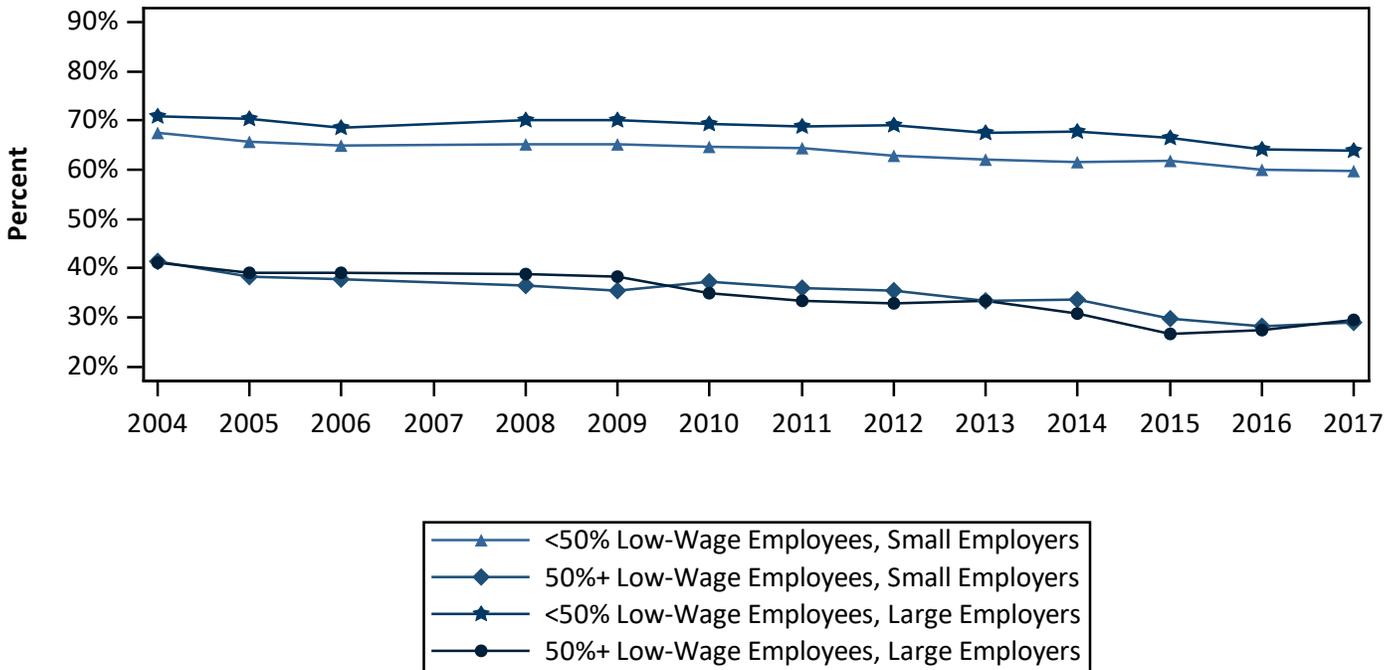
Denominator: Within each category, eligible employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.9: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017



Key: Small employer = fewer than 50 employees. Large employer = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 2.9: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
<50% Low-Wage Employees, Small Employers	67.4%	65.7%	64.9%	65.1%	65.1%	64.7%	64.3%	62.9%	62.1%	61.6%	61.7%	60.1%	59.7%
50%+ Low-Wage Employees, Small Employers	41.4%	38.2%	37.6%	36.4%	35.5%	37.2%	35.8%	35.5%	33.3%	33.5%	29.8%	28.2%	28.9%
<50% Low-Wage Employees, Large Employers	70.8%	70.2%	68.6%	70.0%	70.0%	69.3%	68.8%	69.0%	67.5%	67.8%	66.3%	64.1%	63.8%
50%+ Low-Wage Employees, Large Employers	41.0%	39.1%	39.1%	38.7%	38.3%	34.8%	33.3%	32.9%	33.2%	30.6%	26.7%	27.4%	29.5%

Key: Small employers = fewer than 50 employees. Large employers = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

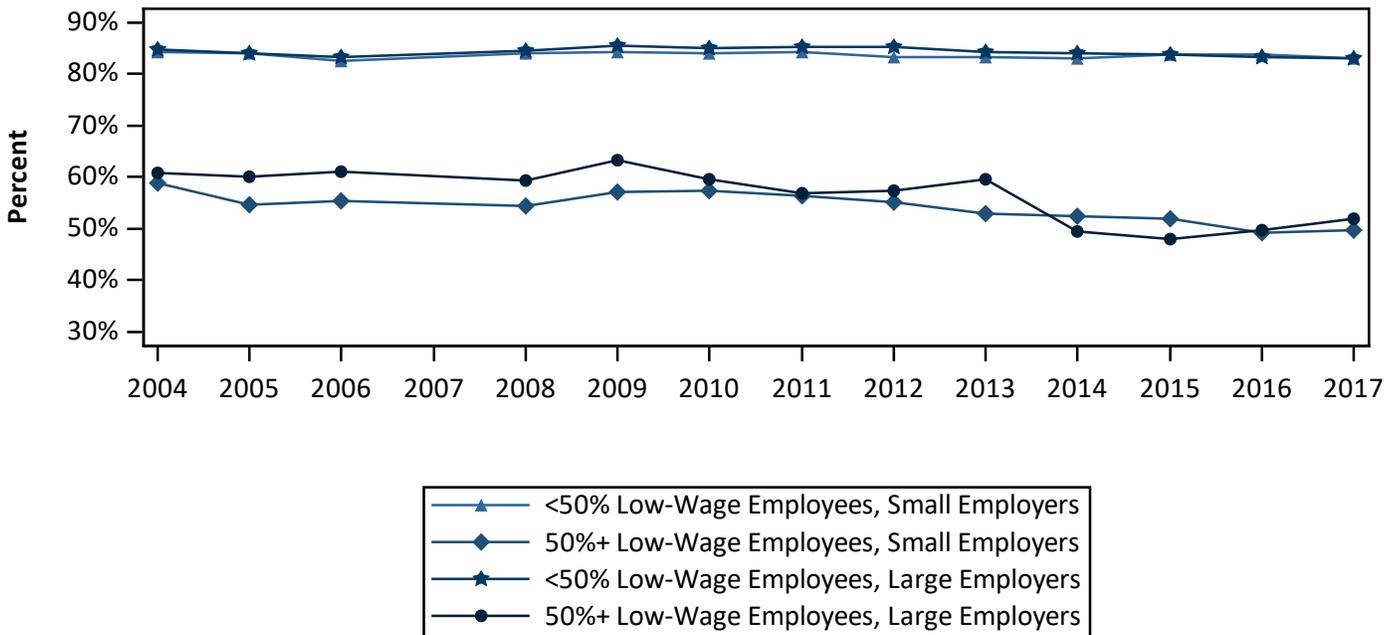
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

[For data points and standard errors for this exhibit, select here.](#)

Exhibit 2.10: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017



Key: Small employer = fewer than 50 employees. Large employer = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 2.10: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
<50% Low-Wage Employees, Small Employers	84.2%	84.0%	82.5%	84.1%	84.3%	84.0%	84.3%	83.2%	83.3%	83.0%	83.8%	83.8%	83.0%
50%+ Low-Wage Employees, Small Employers	58.8%	54.5%	55.4%	54.3%	57.1%	57.4%	56.4%	55.2%	52.9%	52.5%	51.9%	49.1%	49.6%
<50% Low-Wage Employees, Large Employers	84.8%	84.1%	83.3%	84.6%	85.4%	85.0%	85.3%	85.4%	84.3%	84.0%	83.8%	83.4%	83.0%
50%+ Low-Wage Employees, Large Employers	60.7%	59.9%	61.1%	59.4%	63.3%	59.6%	56.9%	57.4%	59.4%	49.5%	48.0%	49.7%	51.9%

Key: Small employers = fewer than 50 employees. Large employers = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

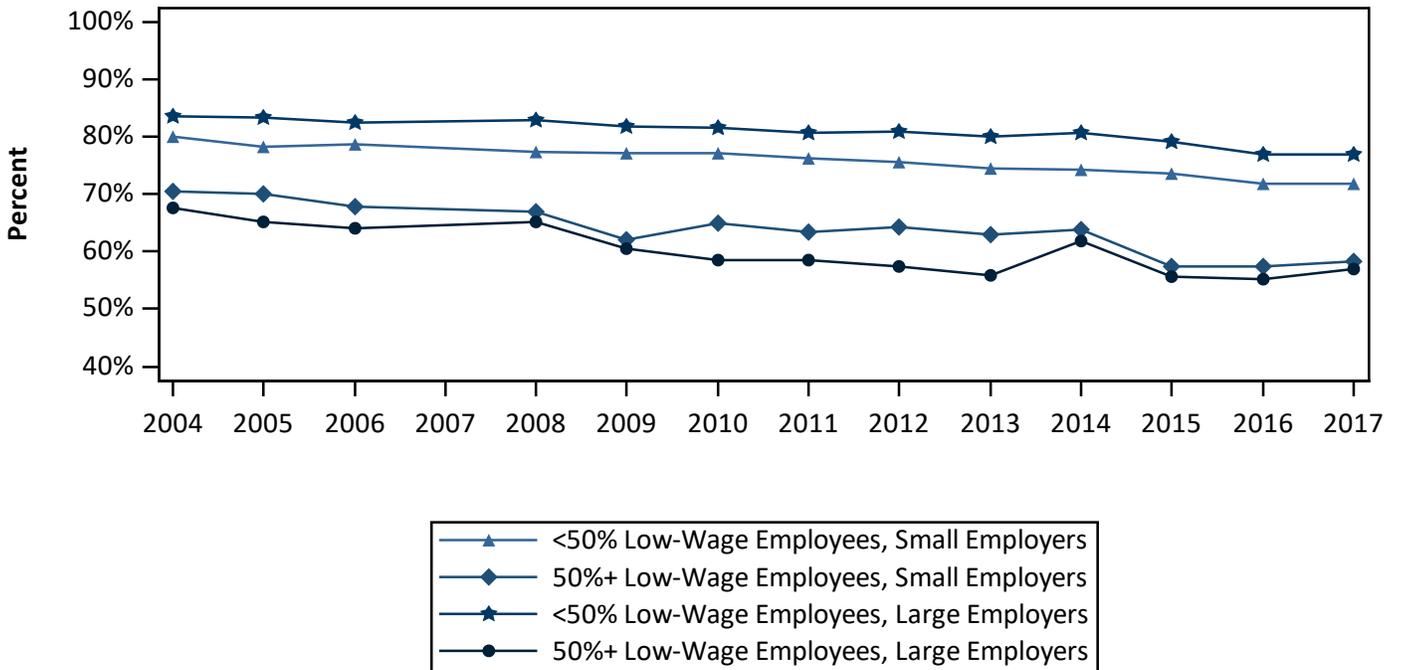
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 2.11: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017



Key: Small employer = fewer than 50 employees. Large employer = 50 or more employees.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, eligible employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 2.11: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance, by the percentage of the establishment's workforce that is low wage and by firm size, 2004-2017

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
<50% Low-Wage Employees, Small Employers	80.0%	78.2%	78.7%	77.4%	77.2%	77.0%	76.3%	75.6%	74.5%	74.2%	73.6%	71.7%	71.9%
50%+ Low-Wage Employees, Small Employers	70.4%	70.1%	67.9%	67.0%	62.1%	64.9%	63.5%	64.3%	63.0%	63.9%	57.4%	57.5%	58.3%
<50% Low-Wage Employees, Large Employers	83.5%	83.4%	82.4%	82.8%	81.9%	81.5%	80.7%	80.8%	80.0%	80.7%	79.1%	76.9%	76.9%
50%+ Low-Wage Employees, Large Employers	67.5%	65.2%	64.0%	65.1%	60.5%	58.4%	58.5%	57.3%	55.9%	61.9%	55.6%	55.2%	57.0%

Key: Small employers = fewer than 50 employees. Large employers = 50 or more employees.

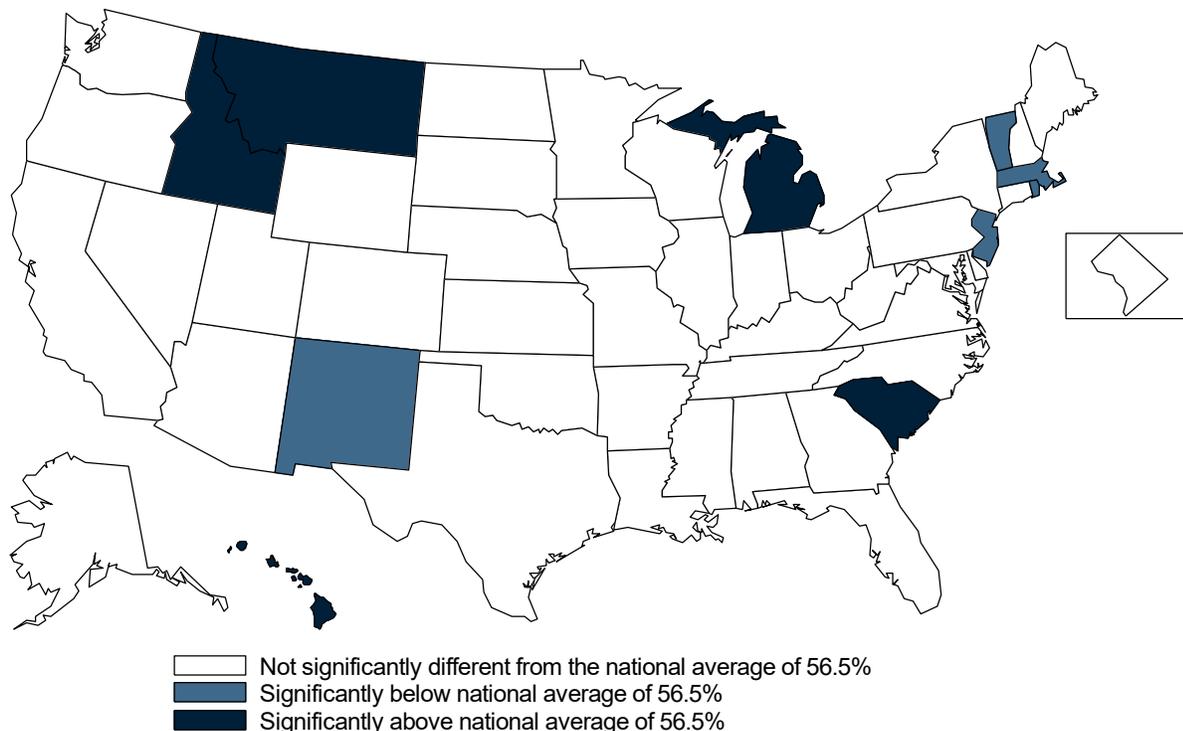
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Denominator: Within each category, eligible employees in establishments that offer health insurance.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 2.12: Coverage Rate
Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, by State, 2017



Alabama	59.3%	Kentucky	59.5%	North Dakota	58.6%
Alaska	56.7%	Louisiana	51.8%	Ohio	57.6%
Arizona	55.6%	Maine	55.2%	Oklahoma	57.7%
Arkansas	61.3%	Maryland	53.4%	Oregon	60.9%
California	56.8%	Massachusetts	51.8%*	Pennsylvania	56.8%
Colorado	56.4%	Michigan	61.8%*	Rhode Island	51.2%*
Connecticut	55.9%	Minnesota	58.3%	South Carolina	60.5%*
Delaware	53.4%	Mississippi	55.7%	South Dakota	57.1%
District of Columbia	54.7%	Missouri	59.0%	Tennessee	52.4%
Florida	59.4%	Montana	61.8%*	Texas	55.7%
Georgia	56.6%	Nebraska	58.7%	Utah	57.9%
Hawaii	61.5%*	Nevada	53.7%	Vermont	48.0%*
Idaho	61.4%*	New Hampshire	52.5%	Virginia	53.0%
Illinois	56.6%	New Jersey	52.1%*	Washington	60.5%
Indiana	58.2%	New Mexico	49.9%*	West Virginia	58.3%
Iowa	54.4%	New York	52.7%	Wisconsin	59.8%
Kansas	56.3%	North Carolina	56.5%	Wyoming	56.2%

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

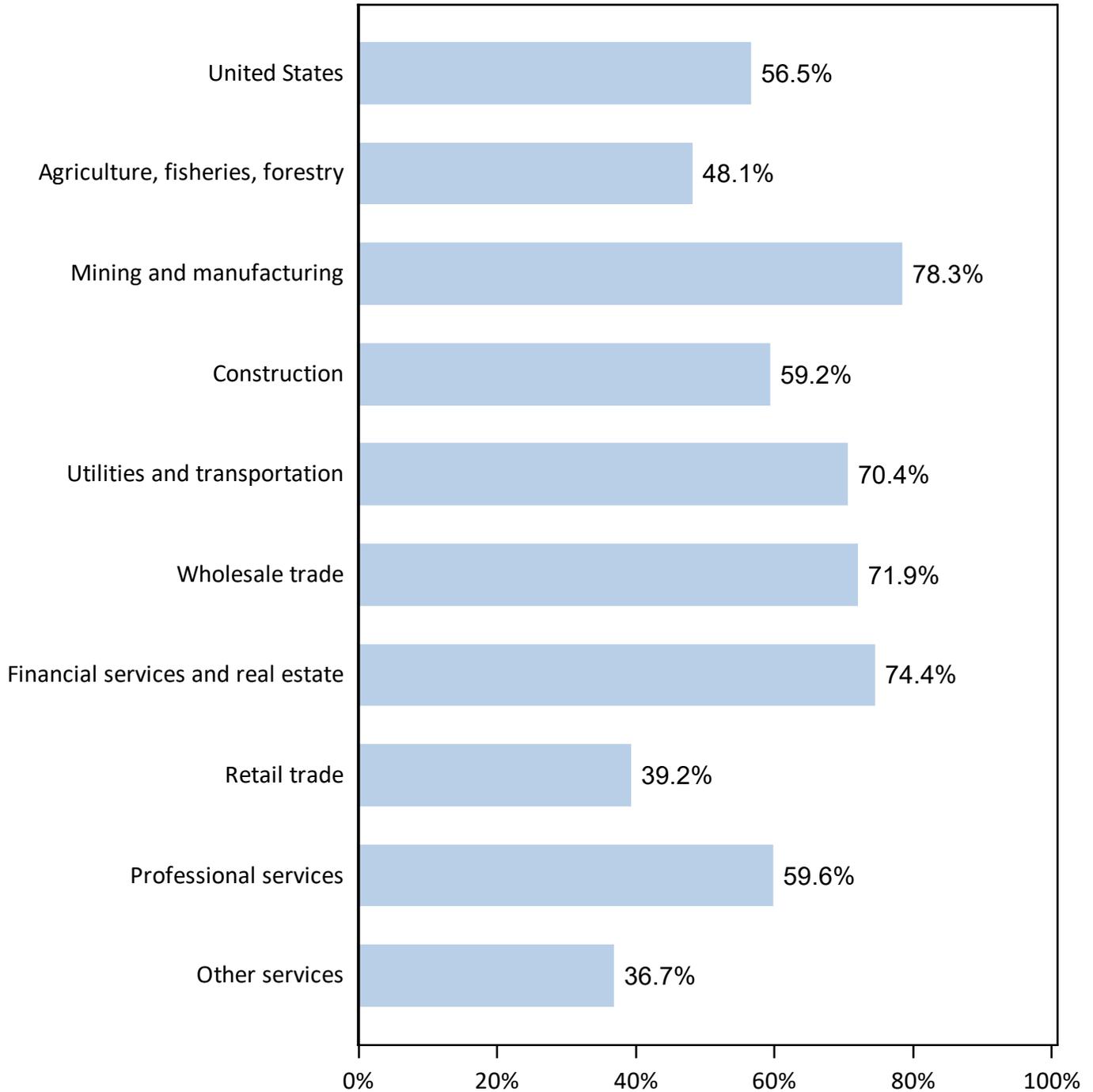
Denominator: Within each State, all employees in establishments that offer health insurance.

Note: * Statistically different from national average of 56.5 percent at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 2.13: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by industry, 2017



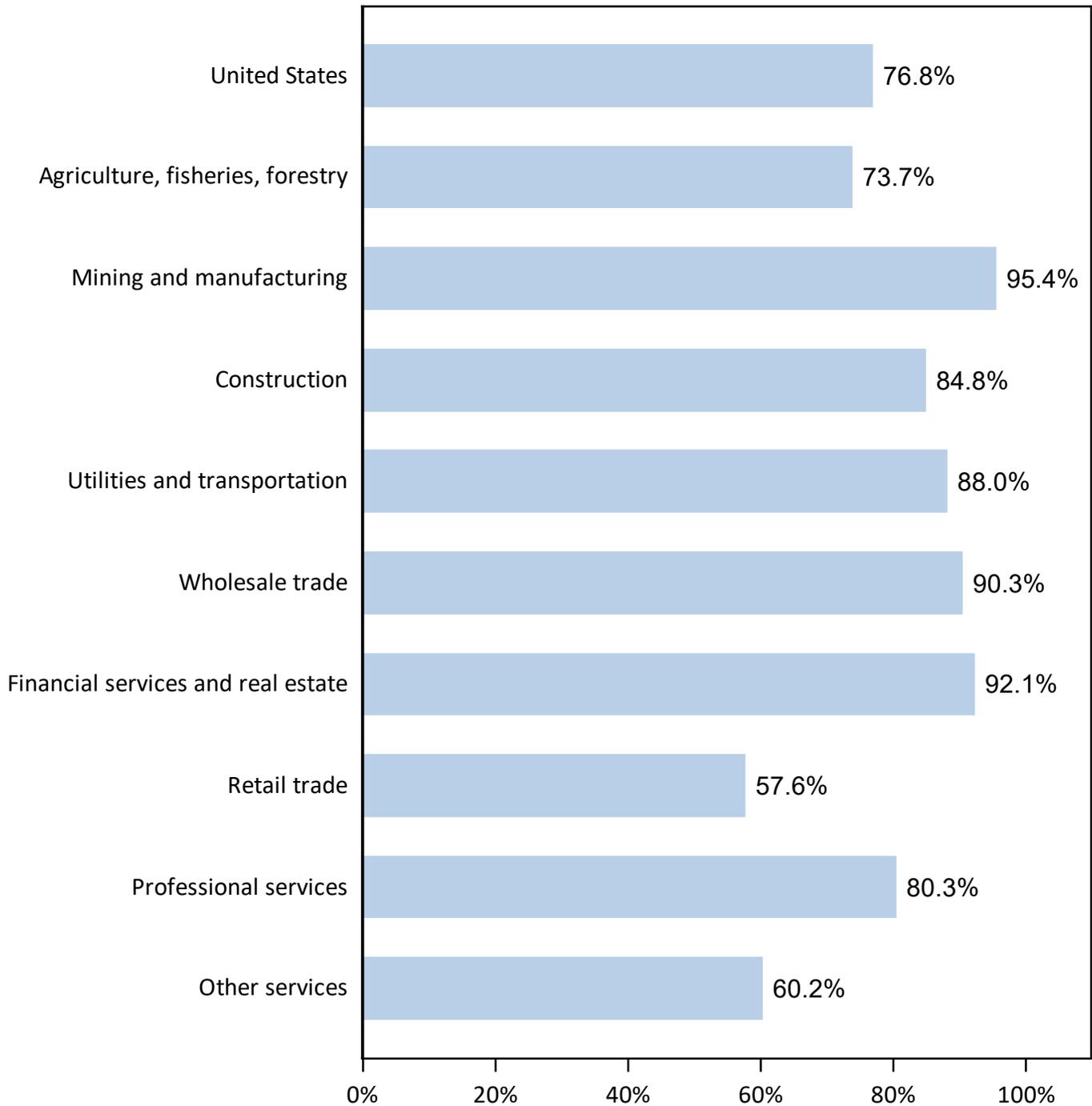
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

For data points and standard errors for this exhibit, select here.

Exhibit 2.14: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by industry, 2017



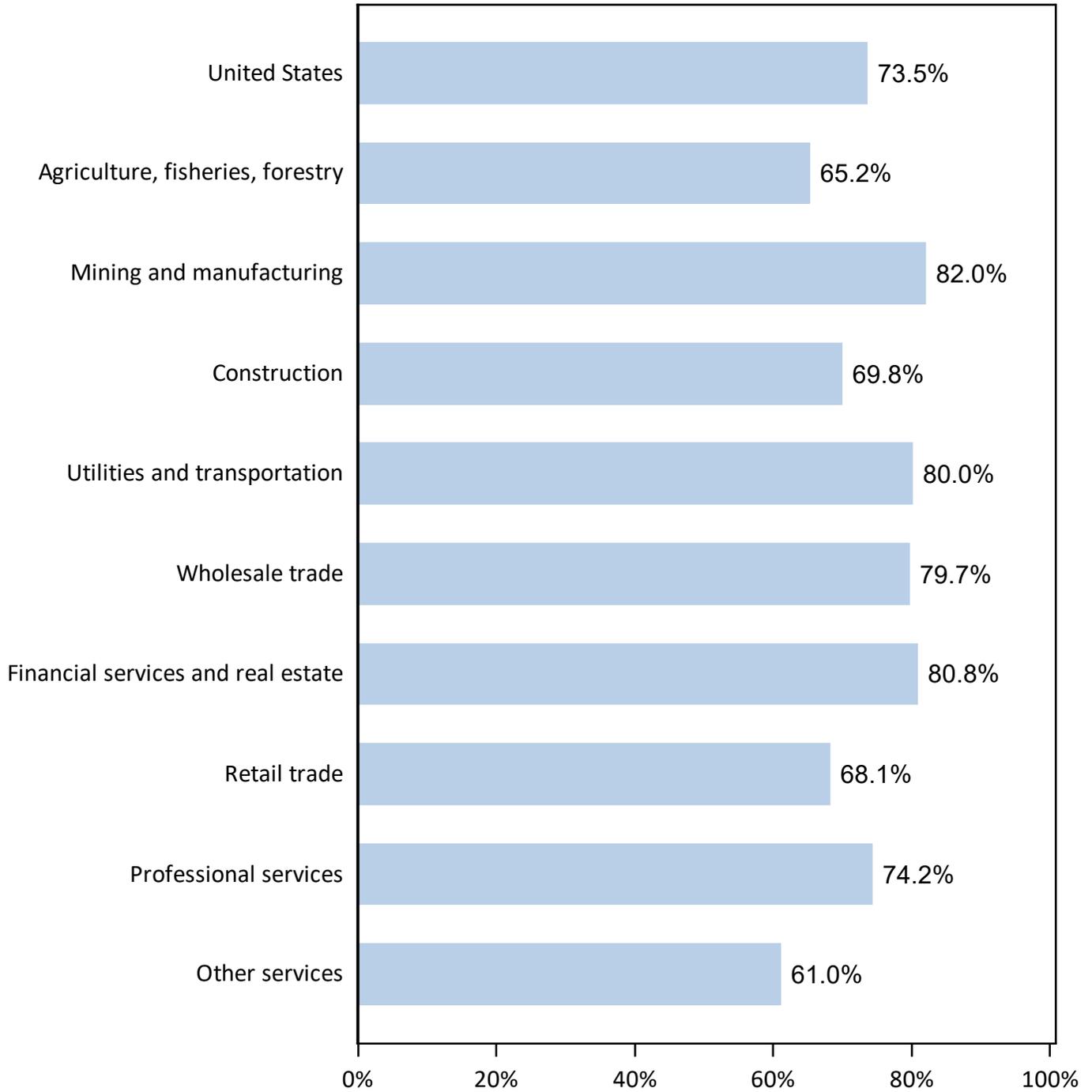
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Denominator: Within each category, all employees in establishments that offer health insurance.

For data points and standard errors for this exhibit, select here.

Exhibit 2.15: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by industry, 2017



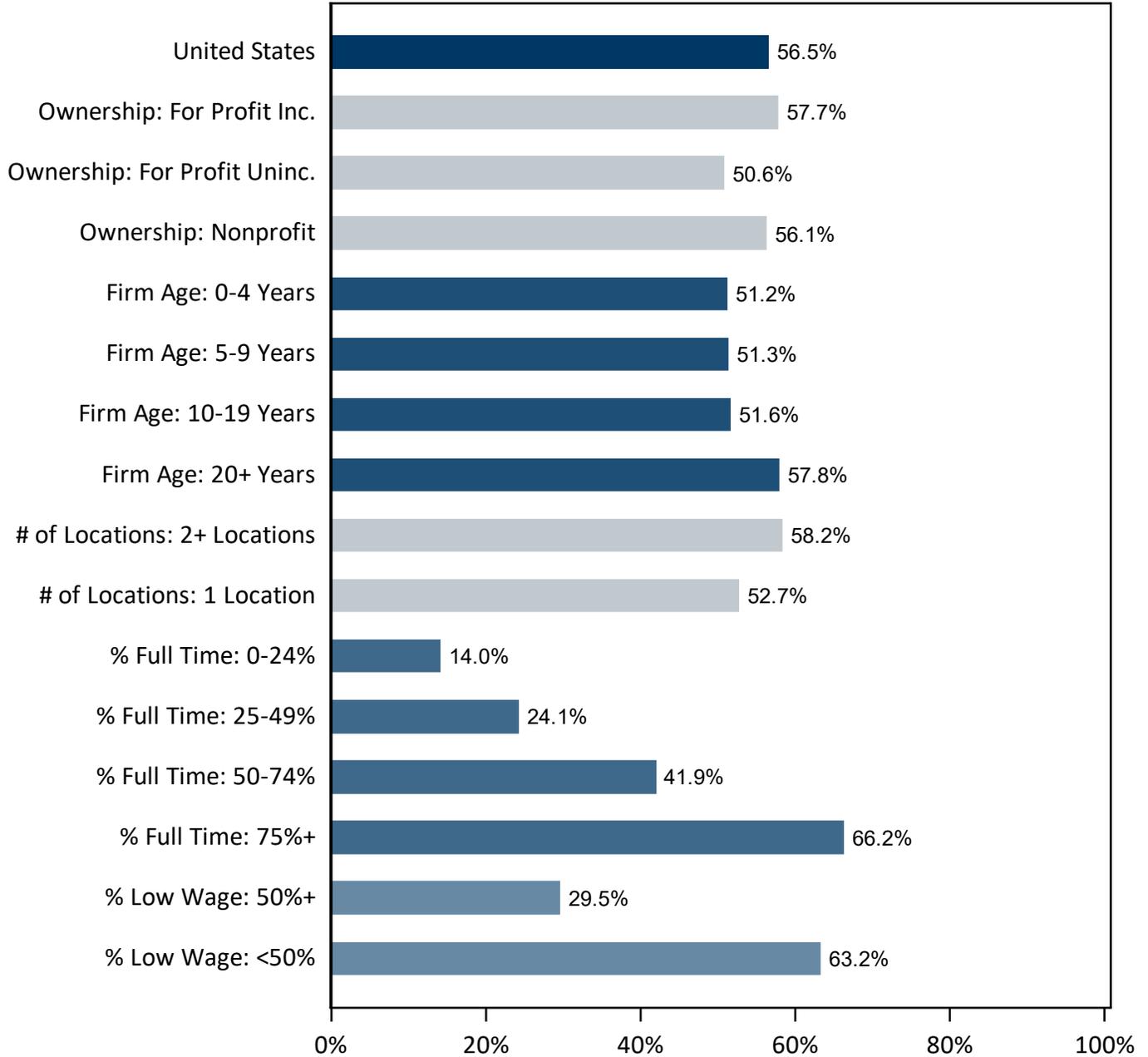
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Denominator: Within each category, eligible employees in establishments that offer health insurance.

For data points and standard errors for this exhibit, select here.

Exhibit 2.16: Coverage Rate

Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by selected characteristics, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

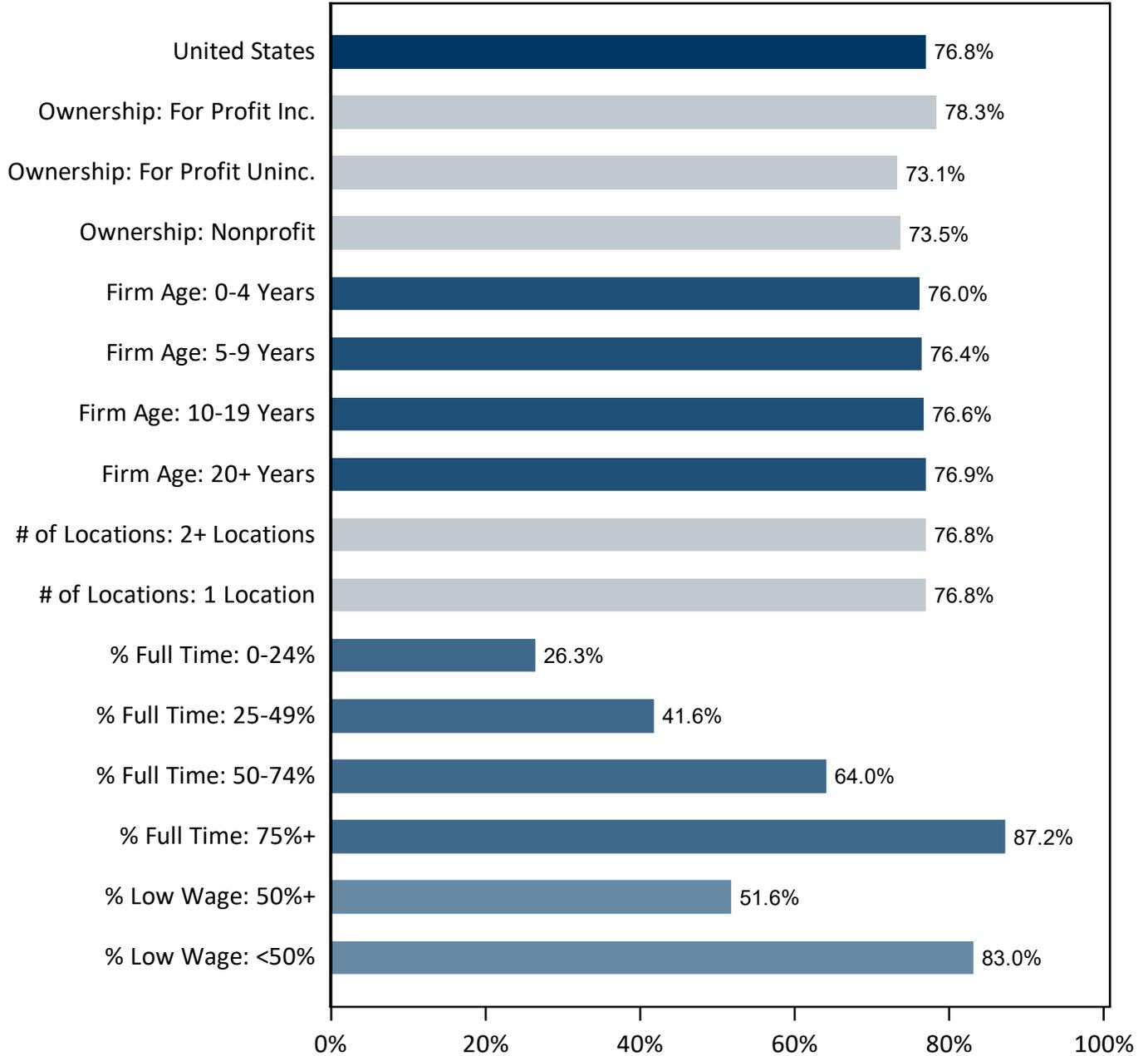
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 2.17: Eligibility Rate

Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by selected characteristics, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

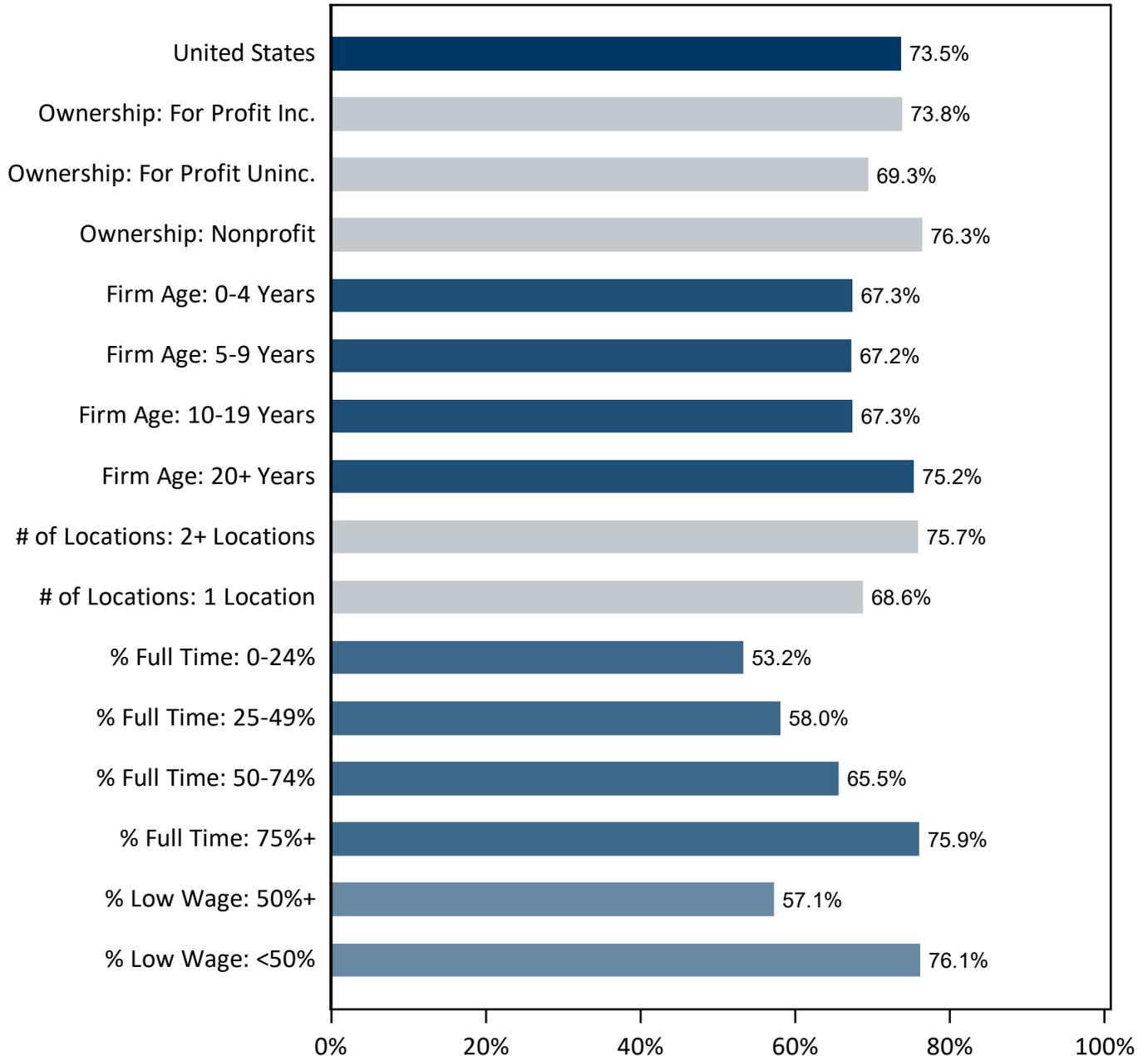
Denominator: Within each category, all employees in establishments that offer health insurance.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 2.18: Take-Up Rate

Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by selected characteristics, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

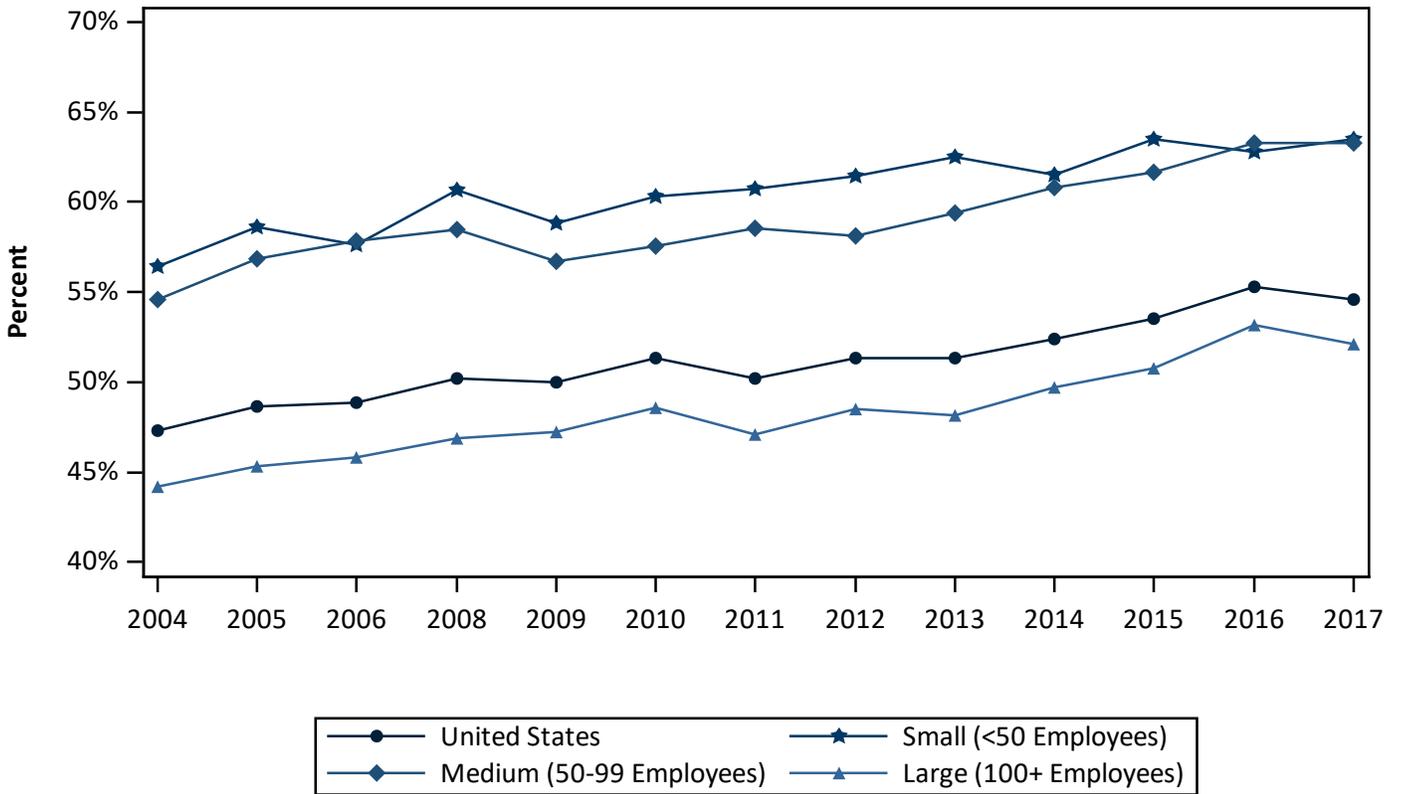
Denominator: Within each category, eligible employees in establishments that offer health insurance.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 2.19

Percentage of private-sector employees enrolled in a health insurance plan who take single coverage, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.19

Percentage of private-sector employees enrolled in a health insurance plan who take single coverage, overall and by firm size, 2004-2017

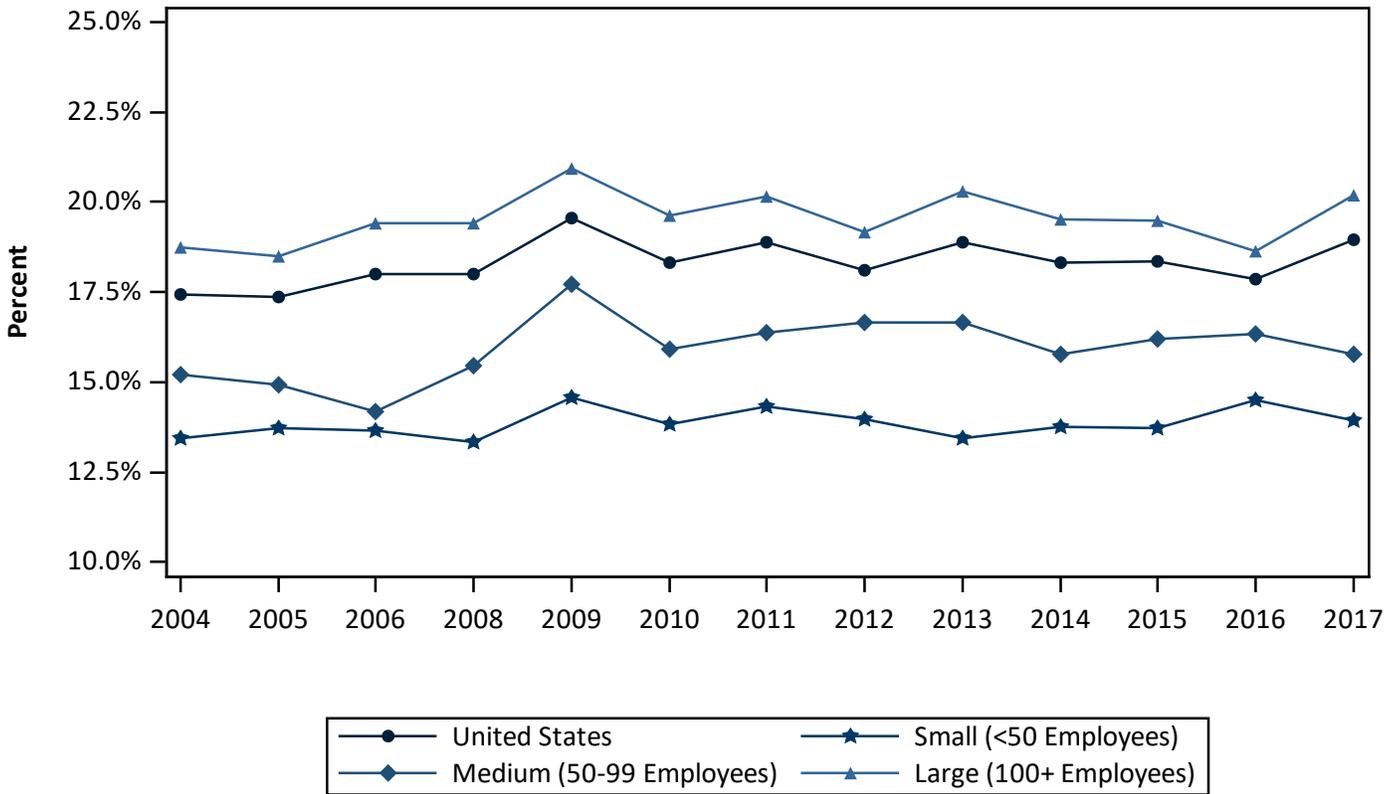
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	47.3%	48.6%	48.9%	50.2%	50.0%	51.3%	50.2%	51.3%	51.3%	52.4%	53.5%	55.3%	54.6%
<50	56.4%	58.6%	57.7%	60.7%	58.8%	60.3%	60.8%	61.4%	62.5%	61.5%	63.5%	62.8%	63.5%
50-99	54.6%	56.8%	57.9%	58.5%	56.7%	57.6%	58.6%	58.1%	59.4%	60.8%	61.7%	63.3%	63.3%
100+	44.2%	45.4%	45.8%	46.9%	47.2%	48.6%	47.1%	48.5%	48.1%	49.7%	50.8%	53.1%	52.1%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.20

Percentage of private-sector employees enrolled in a health insurance plan who take employee-plus-one coverage, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.20

Percentage of private-sector employees enrolled in a health insurance plan who take employee-plus-one coverage, overall and by firm size, 2004-2017

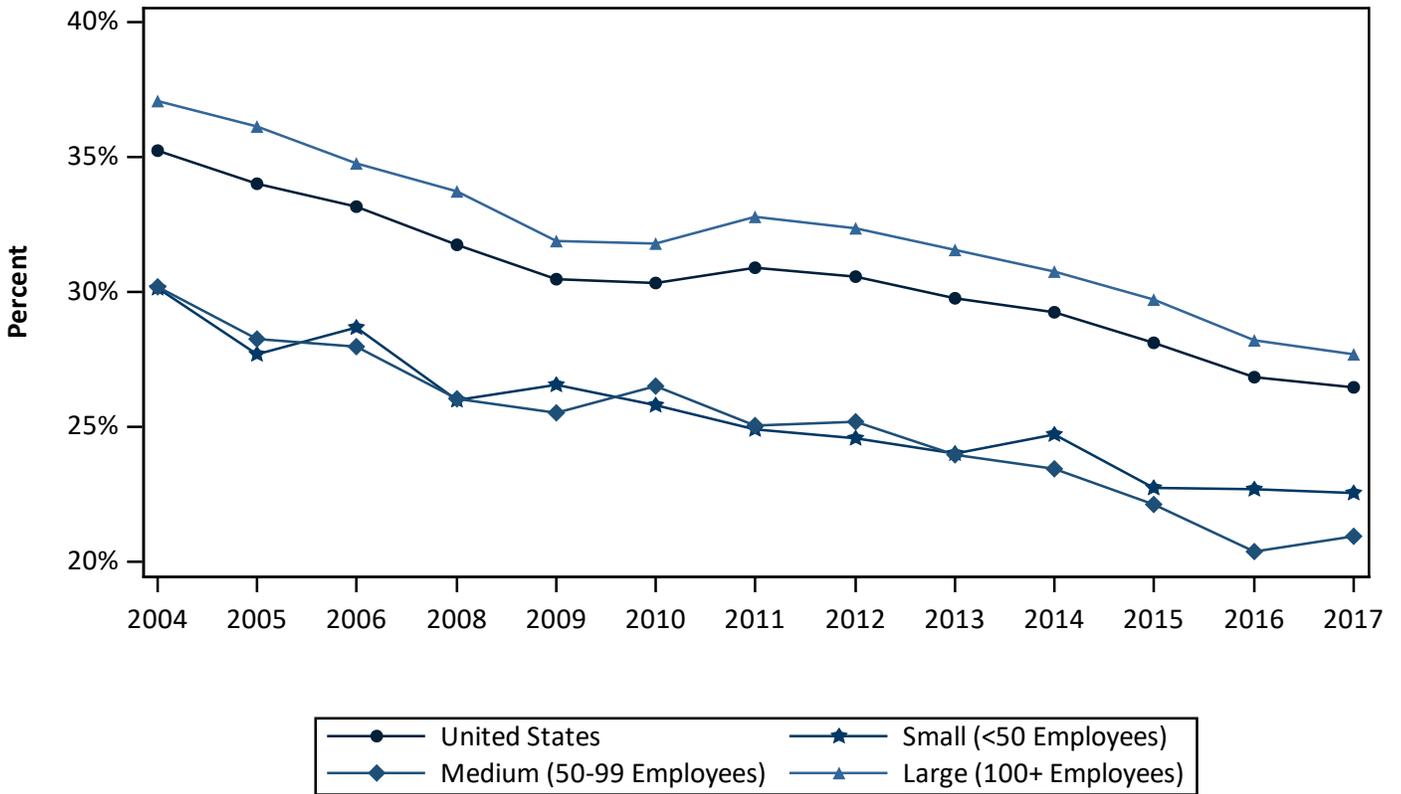
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	17.4%	17.3%	18.0%	18.0%	19.5%	18.3%	18.9%	18.1%	18.9%	18.3%	18.4%	17.8%	19.0%
<50	13.4%	13.7%	13.7%	13.3%	14.6%	13.8%	14.3%	14.0%	13.4%	13.8%	13.7%	14.5%	13.9%
50-99	15.2%	14.9%	14.2%	15.4%	17.7%	15.9%	16.4%	16.7%	16.6%	15.8%	16.2%	16.3%	15.8%
100+	18.8%	18.5%	19.4%	19.4%	20.9%	19.6%	20.1%	19.2%	20.3%	19.5%	19.5%	18.6%	20.2%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.21

Percentage of private-sector employees enrolled in a health insurance plan who take family coverage, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.21

Percentage of private-sector employees enrolled in a health insurance plan who take family coverage, overall and by firm size, 2004-2017

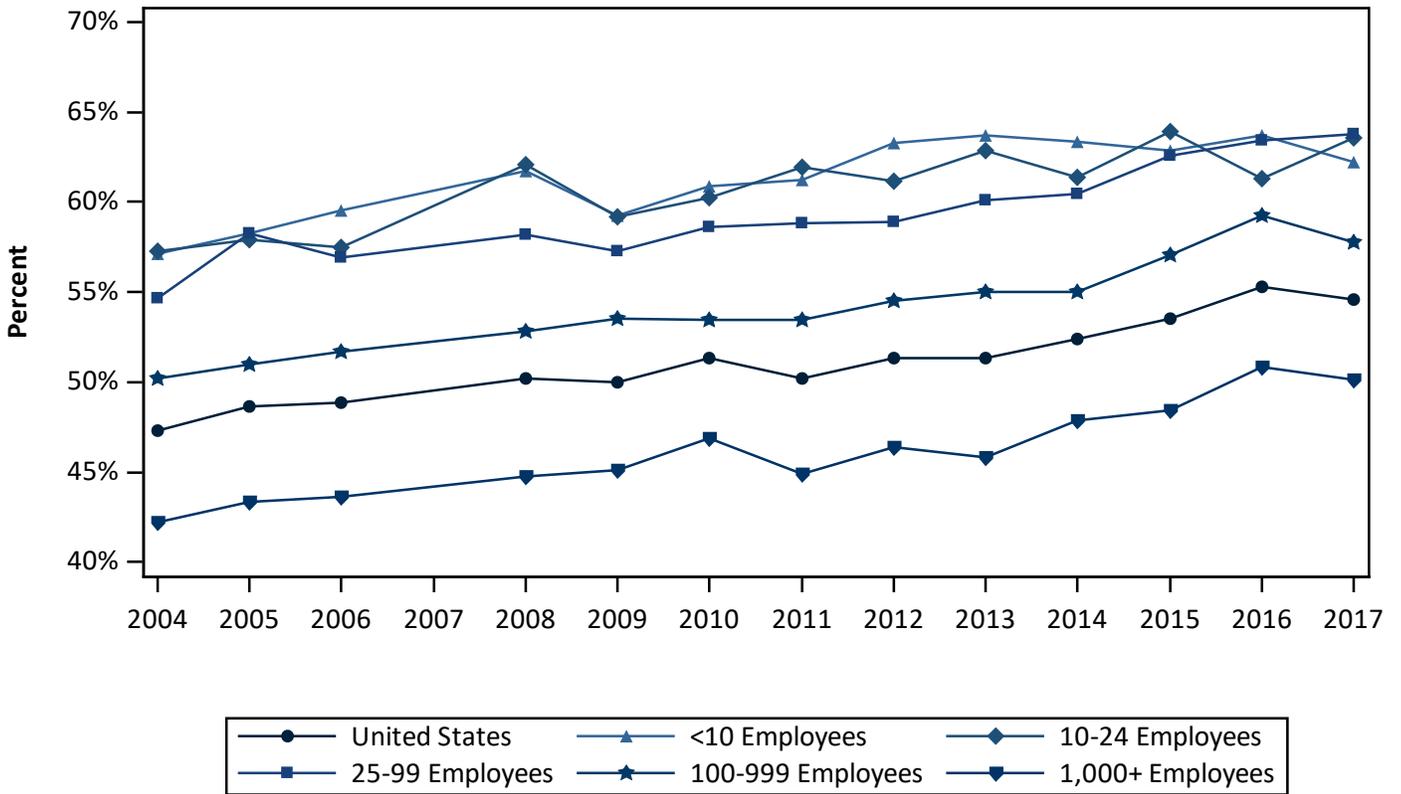
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	35.2%	34.0%	33.2%	31.8%	30.5%	30.3%	30.9%	30.6%	29.8%	29.3%	28.1%	26.8%	26.5%
<50	30.1%	27.7%	28.7%	26.0%	26.6%	25.8%	24.9%	24.6%	24.0%	24.7%	22.8%	22.7%	22.6%
50-99	30.2%	28.3%	28.0%	26.1%	25.5%	26.5%	25.1%	25.2%	24.0%	23.4%	22.1%	20.4%	20.9%
100+	37.1%	36.2%	34.8%	33.7%	31.9%	31.8%	32.8%	32.4%	31.6%	30.8%	29.7%	28.2%	27.7%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.22

Percentage of private-sector employees enrolled in a health insurance plan who take single coverage, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.22

Percentage of private-sector employees enrolled in a health insurance plan who take single coverage, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	47.3%	48.6%	48.9%	50.2%	50.0%	51.3%	50.2%	51.3%	51.3%	52.4%	53.5%	55.3%	54.6%
<10	57.1%	58.2%	59.5%	61.7%	59.2%	60.9%	61.2%	63.3%	63.7%	63.4%	62.8%	63.7%	62.2%
10-24	57.3%	57.9%	57.4%	62.1%	59.2%	60.2%	61.9%	61.2%	62.8%	61.4%	63.9%	61.3%	63.6%
25-99	54.6%	58.2%	56.9%	58.2%	57.3%	58.6%	58.8%	58.9%	60.1%	60.4%	62.5%	63.4%	63.8%
100-999	50.2%	51.0%	51.7%	52.8%	53.5%	53.5%	53.5%	54.5%	55.0%	55.0%	57.1%	59.2%	57.7%
1,000+	42.2%	43.3%	43.7%	44.8%	45.1%	46.9%	44.9%	46.4%	45.8%	47.8%	48.5%	50.8%	50.1%

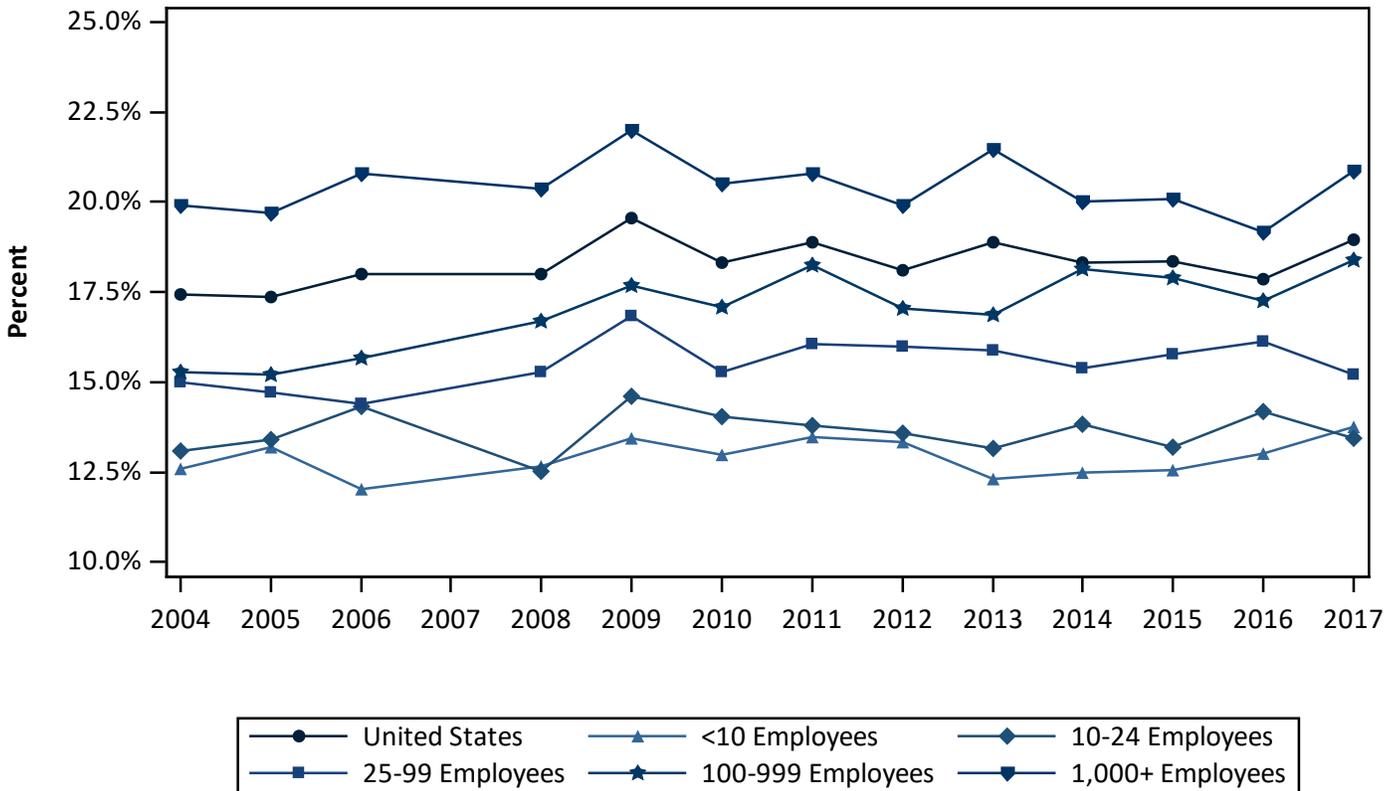
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.23

Percentage of private-sector employees enrolled in a health insurance plan who take employee-plus-one coverage, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.23

Percentage of private-sector employees enrolled in a health insurance plan who take employee-plus-one coverage, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	17.4%	17.3%	18.0%	18.0%	19.5%	18.3%	18.9%	18.1%	18.9%	18.3%	18.4%	17.8%	19.0%
<10	12.6%	13.2%	12.0%	12.7%	13.4%	13.0%	13.5%	13.3%	12.3%	12.5%	12.6%	13.0%	13.7%
10-24	13.1%	13.4%	14.3%	12.5%	14.6%	14.0%	13.8%	13.6%	13.2%	13.8%	13.2%	14.2%	13.5%
25-99	15.0%	14.7%	14.4%	15.3%	16.8%	15.3%	16.1%	16.0%	15.9%	15.4%	15.8%	16.1%	15.2%
100-999	15.3%	15.2%	15.7%	16.7%	17.7%	17.1%	18.2%	17.0%	16.9%	18.1%	17.9%	17.3%	18.4%
1,000+	19.9%	19.7%	20.8%	20.4%	22.0%	20.5%	20.8%	19.9%	21.4%	20.0%	20.1%	19.2%	20.8%

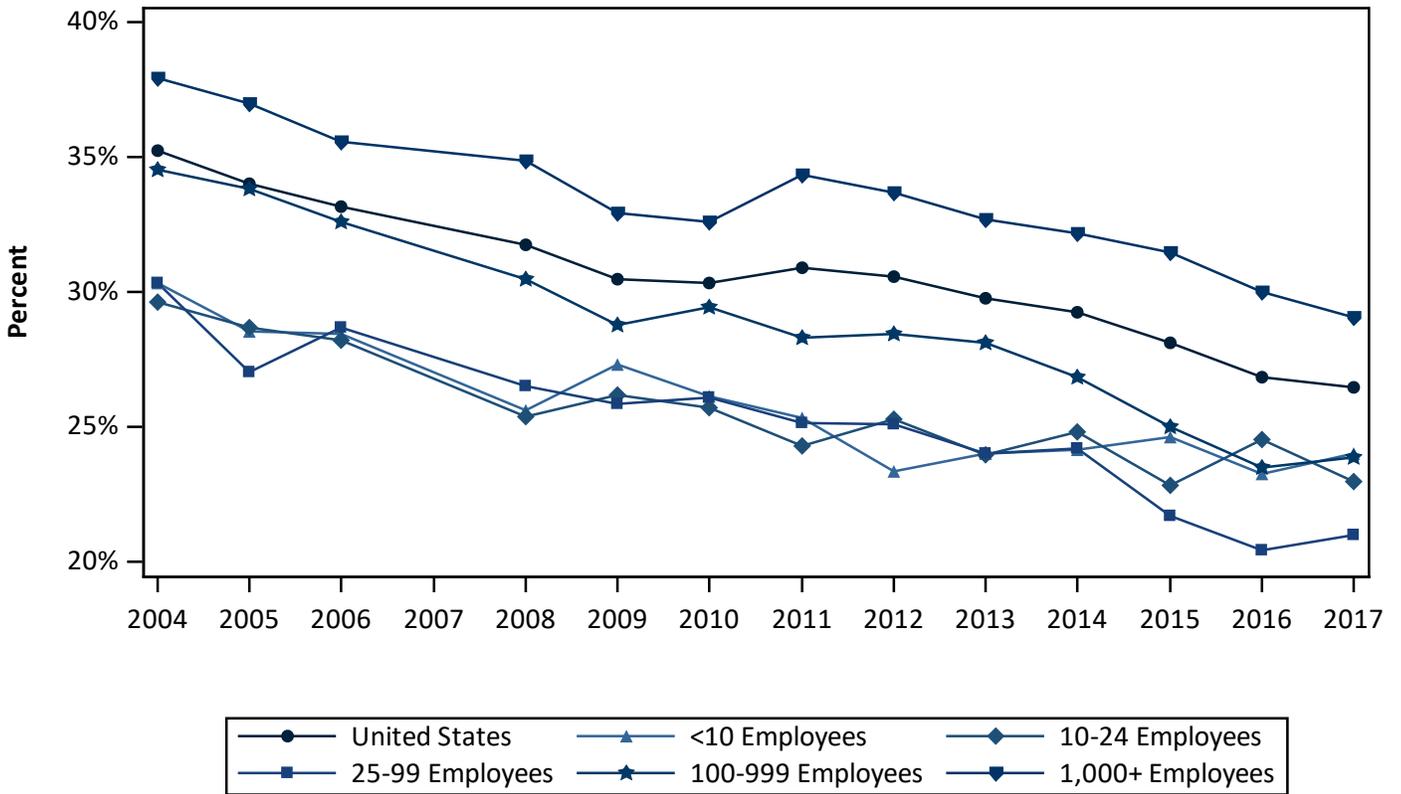
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 2.24

Percentage of private-sector employees enrolled in a health insurance plan who take family coverage, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 2.24

Percentage of private-sector employees enrolled in a health insurance plan who take family coverage, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	35.2%	34.0%	33.2%	31.8%	30.5%	30.3%	30.9%	30.6%	29.8%	29.3%	28.1%	26.8%	26.5%
<10	30.3%	28.6%	28.4%	25.6%	27.3%	26.1%	25.3%	23.4%	24.0%	24.1%	24.6%	23.3%	24.0%
10-24	29.6%	28.7%	28.2%	25.4%	26.2%	25.7%	24.3%	25.3%	24.0%	24.8%	22.9%	24.5%	23.0%
25-99	30.3%	27.0%	28.7%	26.5%	25.9%	26.1%	25.1%	25.1%	24.0%	24.2%	21.7%	20.5%	21.0%
100-999	34.5%	33.8%	32.6%	30.5%	28.8%	29.5%	28.3%	28.5%	28.1%	26.8%	25.0%	23.5%	23.9%
1,000+	37.9%	37.0%	35.5%	34.9%	32.9%	32.6%	34.3%	33.7%	32.7%	32.2%	31.5%	30.0%	29.1%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

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Section 3: Health Insurance Premiums



Health Insurance Premiums

In 2017, average annual health insurance premiums per enrolled employee with private-sector employer coverage were \$6,368 for single coverage, \$12,789 for employee-plus-one coverage, and \$18,687 for family coverage. These amounts represent increases of 4.4 percent for single coverage and 5.5 percent for both employee-plus-one and family coverage over 2016 levels.

The 2016 to 2017 growth rate for single premiums and employee-plus-one premiums (4.4 percent and 5.5 percent, respectively) were higher than the growth rates for these types of coverage from 2014 to 2015 and 2015 to 2016, which ranged from 2.2 percent to 2.7 percent. The 2016 to 2017 growth rate for family premiums (5.5 percent) was higher than the growth rate for 2015 to 2016 (2.2 percent).

Between 2004 and 2017, premiums for the three types of coverage grew by between 71.9 percent and 86.8 percent (average annual growth rates between 4.3 percent and 4.9 percent). In 2017, five States had average annual premiums that were lower than the national average and six States had average annual premiums that were higher than the national average for all three types of coverage.

This section presents information on recent growth rates in total premiums for single, employee-plus-one, and family coverage and trends in growth rates from 2004 to 2017, overall and by firm size. This section also examines variation in premiums in 2017 by firm size, State where the employer is located, industry, and other employer characteristics. Finally, this section presents information on the distribution of premiums, overall and by firm size.

Premium Growth Rates: Comparison of 2016-2017 With Recent Years

- Average health insurance premiums in 2017 were \$6,368 (single coverage), \$12,789 (employee-plus-one coverage), and \$18,687 (family coverage), representing increases from 2016 levels of 4.4 percent for single coverage and 5.5 percent for both employee-plus-one and family coverage (Exhibits 3.1 and 3.2).
- The 2016 to 2017 annual growth rate for family coverage was higher than the 2.2 percent increase from 2015 to 2016. The 2016 to 2017 growth rates for single and employee-plus-one coverage were higher than the 2014 to 2015 and 2015 to 2016 growth rates for these types of coverage, which ranged from 2.2 percent to 2.7 percent (Exhibit 3.2).

Premium Growth Rates From 2004 to 2017

- Between 2004 and 2017, premiums for all types of coverage increased substantially but at a somewhat faster rate for family coverage than for single or employee-plus-one coverage. Premiums grew by 71.9 percent for single coverage (\$3,705 to \$6,368), 81.3 percent for

employee-plus-one coverage (\$7,056 to \$12,789), and 86.8 percent for family coverage (\$10,006 to \$18,687) (Exhibit 3.1).

- In the 13 years from 2004 to 2017, annual premium growth rates ranged from 2.2 percent to 7.7 percent for single coverage, from 2.6 percent to 8.7 percent for employee-plus-one coverage, and from 2.2 percent to 8.3 percent for family coverage (Exhibit 3.2).
- From 2016 to 2017, growth rates for all three types of premiums were close to smoothed longer term growth rates. Specifically, there were no significant differences between the 2016 to 2017 growth rates and the average annual growth rate from 2004 to 2017 for single coverage (4.4 percent vs. 4.3 percent), employee-plus-one coverage (5.5 percent vs. 4.7 percent), or family coverage (5.5 percent vs. 4.9 percent) (Exhibit 3.2, data on average annual growth rates not shown).

Premiums by Firm Size, 2004 to 2017

- From 2010 through 2017, average single premiums were lower in medium firms (50 to 99 employees) than in small firms (fewer than 50 employees) or large firms (100 or more employees) ($p < 0.10$ for the differences in 2017) (Exhibit 3.3).
- From 2004 to 2017, there were no significant differences by firm size in the growth of single premiums, as single premiums grew by 70.6 percent (\$3,763 to \$6,421) in small firms, 66.1 percent (\$3,711 to \$6,163) in medium firms, and 73.1 percent (\$3,684 to \$6,377) in large firms (Exhibit 3.3).
- In 2004, employee-plus-one premiums were higher in small firms (\$7,373) than in medium firms (\$6,945) or large firms (\$7,002). From 2004 to 2017, however, employee-plus-one premiums grew more rapidly in large firms (83.9 percent) than in medium firms (71.8 percent) and small firms (70.3 percent). By 2017, average employee-plus-one premiums in large firms (\$12,878) were higher than in medium firms (\$11,931) and small firms (\$12,558) ($p < 0.10$) (Exhibit 3.4).
- In 2004, there were no statistically significant differences in average family premiums by firm size. However, from 2004 to 2017, family premiums grew faster at large firms than at smaller firms (88.8 percent in firms with 100 or more employees vs. 74.3 percent in firms with 50 to 99 employees and 78.3 percent in firms with fewer than 50 employees). Thus, by 2017, family premiums in the largest firms (\$18,911) were about 7 percent higher than in firms with 50 to 99 employees (\$17,735) and firms with fewer than 50 employees (\$17,649) (Exhibit 3.5).
- Family premiums grew faster from 2016 to 2017 than from 2015 to 2016 in medium firms (9.4 percent vs. -0.7 percent) and large firms (5.1 percent vs. 2.2 percent) (Exhibit 3.5).
- Estimates by detailed firm-size categories show that in 2017 the largest firms (1,000 or more employees) had higher average family premiums (\$19,064) than any other firm-size category. For single coverage, firms with fewer than 10 employees (\$6,695) had higher average premiums than any other firm-size category (Exhibit 3.6).

- One factor that may partially explain higher family premiums in larger firms is they are much more likely to offer employee-plus-one coverage than smaller firms (e.g., 95.5 percent of employees in firms with 1,000 or more employees have offers of employee-plus-one coverage compared with 63.8 percent of employees in firms with fewer than 10 employees) (Exhibit 1.13). Thus, at large firms, two-person families are less likely to be included in the risk pool for family policies, and average family premiums would tend to be higher than they would have been if two-person families were in the family policy risk pool along with larger families. At many small firms, on the other hand, workers seeking coverage for themselves and a single dependent may purchase a family policy if no employee-plus-one coverage is offered, which would tend to make the average family policy premium lower in those firms.

Premiums by State, 2017

- In total, 12 States had average annual premiums for single coverage that were significantly lower than the national average of \$6,368. These States were Alabama, Arkansas, Florida, Georgia, Hawaii, Idaho, Louisiana, Nevada, Oregon, South Carolina, Tennessee, and Utah. Another 8 States had average annual single premiums that were significantly higher than the national average. These States were Alaska, Connecticut, Delaware, Massachusetts, New Jersey, New York, Rhode Island, and Wyoming (Exhibit 3.7).
- Fourteen States had average annual premiums for employee-plus-one coverage that were significantly lower than the national average of \$12,789. These States were Arizona, Arkansas, Georgia, Idaho, Kentucky, Maine, Mississippi, Nevada, New Mexico, North Carolina, Oregon, Tennessee, Utah, and Virginia. Thirteen States had average annual employee-plus-one premiums that were significantly above the national average. These States were Alaska, Connecticut, Delaware, Massachusetts, Michigan, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, Vermont, West Virginia, and Wyoming (Exhibit 3.8).
- In 2017, the average annual family premium was \$18,687. Fourteen States had average annual family premiums that were significantly lower than the national average. These States were Alabama, Arkansas, Florida, Idaho, Iowa, Kentucky, Louisiana, Maine, Mississippi, Nevada, North Dakota, South Dakota, Tennessee, and Utah. Eight States had family premiums that were significantly above the national average. These States were Alaska, Connecticut, District of Columbia, Massachusetts, New Jersey, New York, West Virginia, and Wyoming (Exhibit 3.9).
- In 2017, average annual premiums for single, employee-plus-one, and family coverage were \$6,368, \$12,789, and \$18,687 respectively. Five States had average annual premiums that were significantly lower than the national average for all three types of coverage. These States were Arkansas, Idaho, Nevada, Tennessee, and Utah. Six States (Alaska, Connecticut, Massachusetts, New Jersey, New York, and Wyoming) had average annual premiums that were significantly higher than the national average for all three types of coverage (Exhibits 3.7, 3.8, and 3.9).

Premiums by Industry Category, 2017

- In 2017, enrolled employees in professional services had higher average single premiums (\$6,815), employee-plus-one premiums (\$13,488), and family premiums (\$19,787) than enrolled employees in any other industry sector ($p < 0.10$ for the difference in family premiums with financial services and real estate) (Exhibits 3.10, 3.11, and 3.12).
- Enrolled employees in the agriculture, fisheries, and forestry sector had average single premiums (\$4,673) that were lower than premiums for enrolled employees in any other industry category. In most cases, they also had lower premiums for dependent coverage. Average employee-plus-one premiums (\$11,000) were significantly lower in the agriculture, fisheries, and forestry sector than in all other industry sectors except construction and retail trade ($p < 0.10$ for the differences with the utilities and transportation and other services sectors). Average family premiums (\$15,427) in the agriculture, fisheries, and forestry sector were significantly lower than in all other industry sectors except construction (Exhibits 3.10, 3.11, and 3.12).

Premiums by Selected Employer Characteristics, 2017

- Premiums for all three types of coverage for nonprofit employers were higher than premiums for unincorporated and incorporated for-profit employers (\$7,198 vs. \$6,273 and \$6,201, respectively, for single coverage; \$14,053 vs. \$13,005 and \$12,468, respectively, for employee-plus-one coverage; and \$20,382 vs. \$18,931 and \$18,306, respectively, for family coverage) (Exhibits 3.13, 3.14, and 3.15).
- In 2017, enrolled employees in firms that were 20 years old or more had higher single premiums (\$6,473) than those in firms that were 10 to 19 years old (\$6,049), 5 to 9 years old (\$5,954), or 0 to 4 years old (\$5,782). Enrolled employees in firms that were 20 years old or older also had higher employee-plus-one and family premiums than those in firms that were 10 to 19 years old and 5 to 9 years old (Exhibits 3.13, 3.14, and 3.15).
- Enrolled employees in firms with multiple locations had higher premiums than those in single-location firms for single coverage (\$6,443 vs. \$6,210), employee-plus-one coverage (\$12,925 vs. \$12,357), and family coverage (\$18,972 vs. \$17,820) (Exhibits 3.13, 3.14, and 3.15).
- Enrolled employees in establishments with less than 25 percent of employees working full time had lower premiums than enrollees in establishments with 50 to 74 percent full-time workers, and 75 to 100 percent full-time workers, for single coverage (\$5,991 vs. \$6,387 and \$6,380, respectively) and family coverage (\$16,713 vs. \$18,810 and \$18,724, respectively) (Exhibits 3.13 and 3.15).
- In 2017, enrolled employees in predominantly low-wage establishments (50 percent or more of employees earn less than \$12.00 per hour) had lower average premiums than those in higher wage establishments for single coverage (\$5,966 vs. \$6,427), employee-plus-one

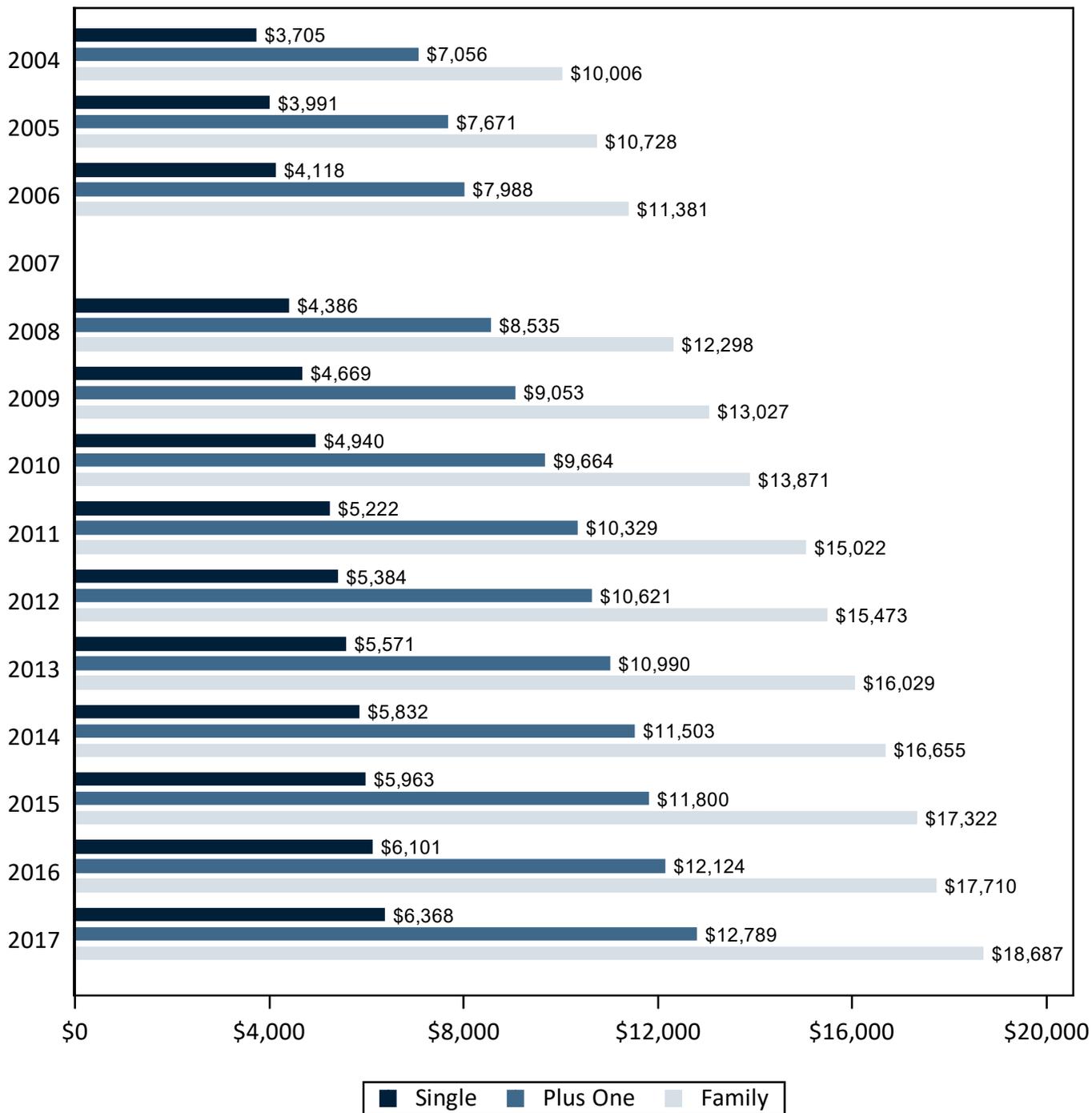
coverage (\$11,772 vs. \$12,874), and family coverage (\$16,966 vs. \$18,816) (Exhibits 3.13, 3.14, and 3.15).

Premium Distributions, 2017

- In 2017, premium distributions for all three types of coverage showed substantial variation as the 90th percentile value was more than twice as large as the 10th percentile value for single premiums (\$8,900 vs. \$4,000), employee-plus-one premiums (\$18,000 vs. \$8,100), and family premiums (\$26,000 vs. \$12,000) (Exhibit 3.16).
- Single and employee-plus-one premiums for establishments in small firms (fewer than 50 employees) showed more variability than premiums for large firms (100 or more employees). In particular, premiums for both types of coverage were lower in small firms than in large firms at the 10th, 25th, and 50th percentiles but were *higher* at the 90th percentile. By contrast, family premiums in small firms were lower than premiums in the largest firms throughout the entire distribution (i.e., at the 10th, 25th, 50th, 75th, and 90th percentiles) (Exhibit 3.16).

Exhibit 3.1

Average total premiums per enrolled employee for single, employee-plus-one, and family coverage, 2004-2017



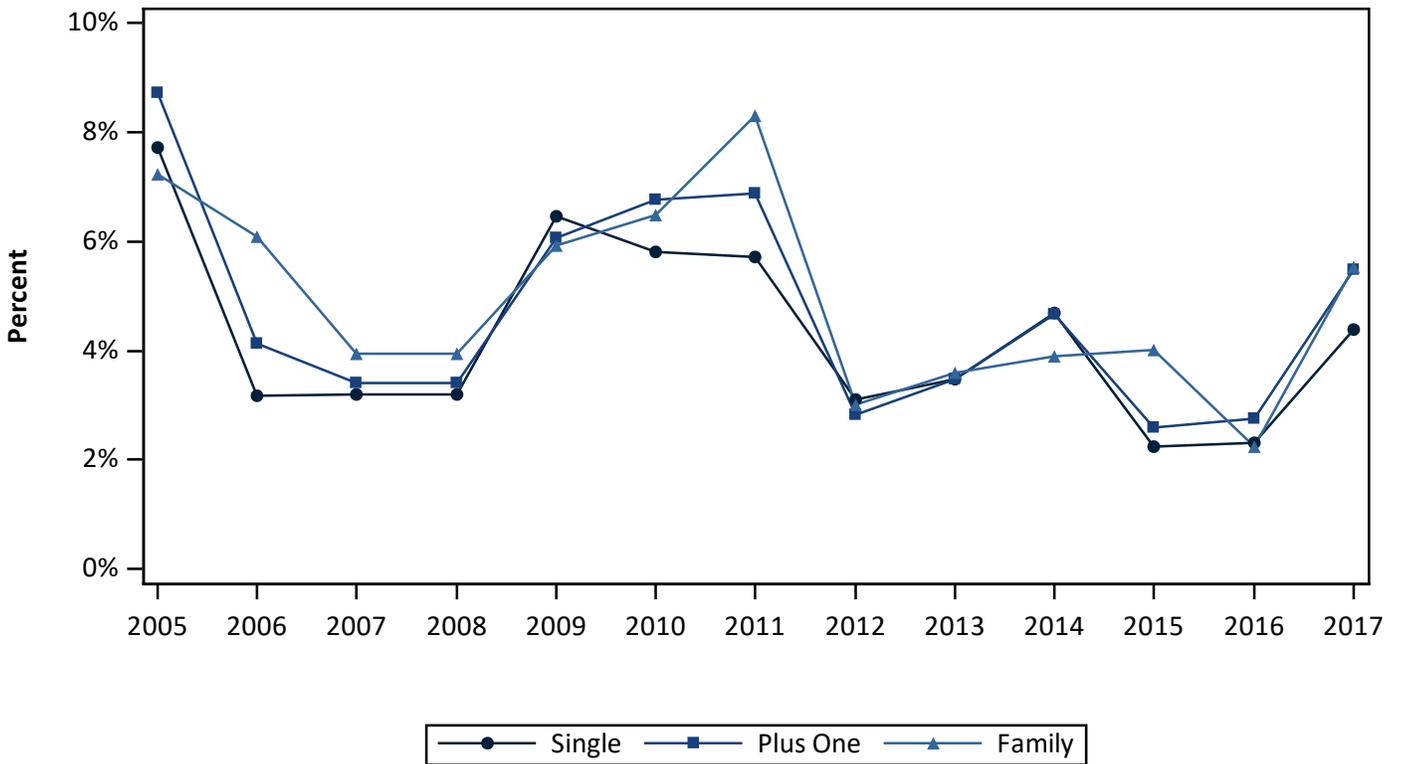
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 3.2

Percentage change in total premiums from previous year per enrolled employee for single, employee-plus-one, and family coverage, 2005-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Therefore, growth rates were annualized over the 2006-2008 period.

Data for Exhibit 3.2

Percentage change in total premiums from previous year per enrolled employee for single, employee-plus-one, and family coverage, 2005-2017

Coverage	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Single	7.7%	3.2%	3.2%	3.2%	6.5%	5.8%	5.7%	3.1%	3.5%	4.7%	2.2%	2.3%	4.4%
Plus One	8.7%	4.1%	3.4%	3.4%	6.1%	6.7%	6.9%	2.8%	3.5%	4.7%	2.6%	2.7%	5.5%
Family	7.2%	6.1%	4.0%	4.0%	5.9%	6.5%	8.3%	3.0%	3.6%	3.9%	4.0%	2.2%	5.5%

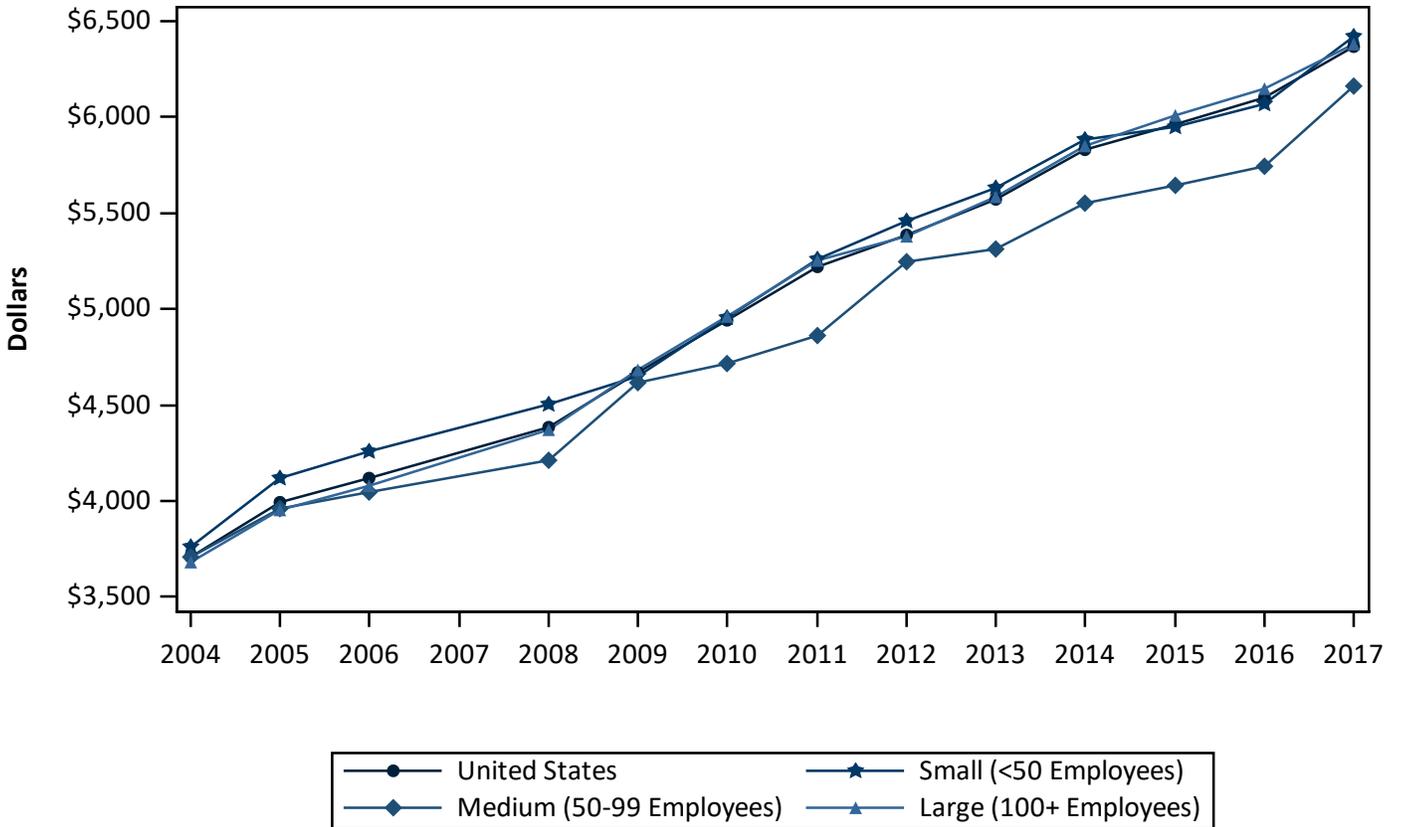
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Therefore, growth rates were annualized over the 2006-2008 period.

For data points and standard errors for this exhibit, select here.

Exhibit 3.3

Average total single premium per enrolled employee, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 3.3
Average total single premium per enrolled employee, by firm size, 2004-2017

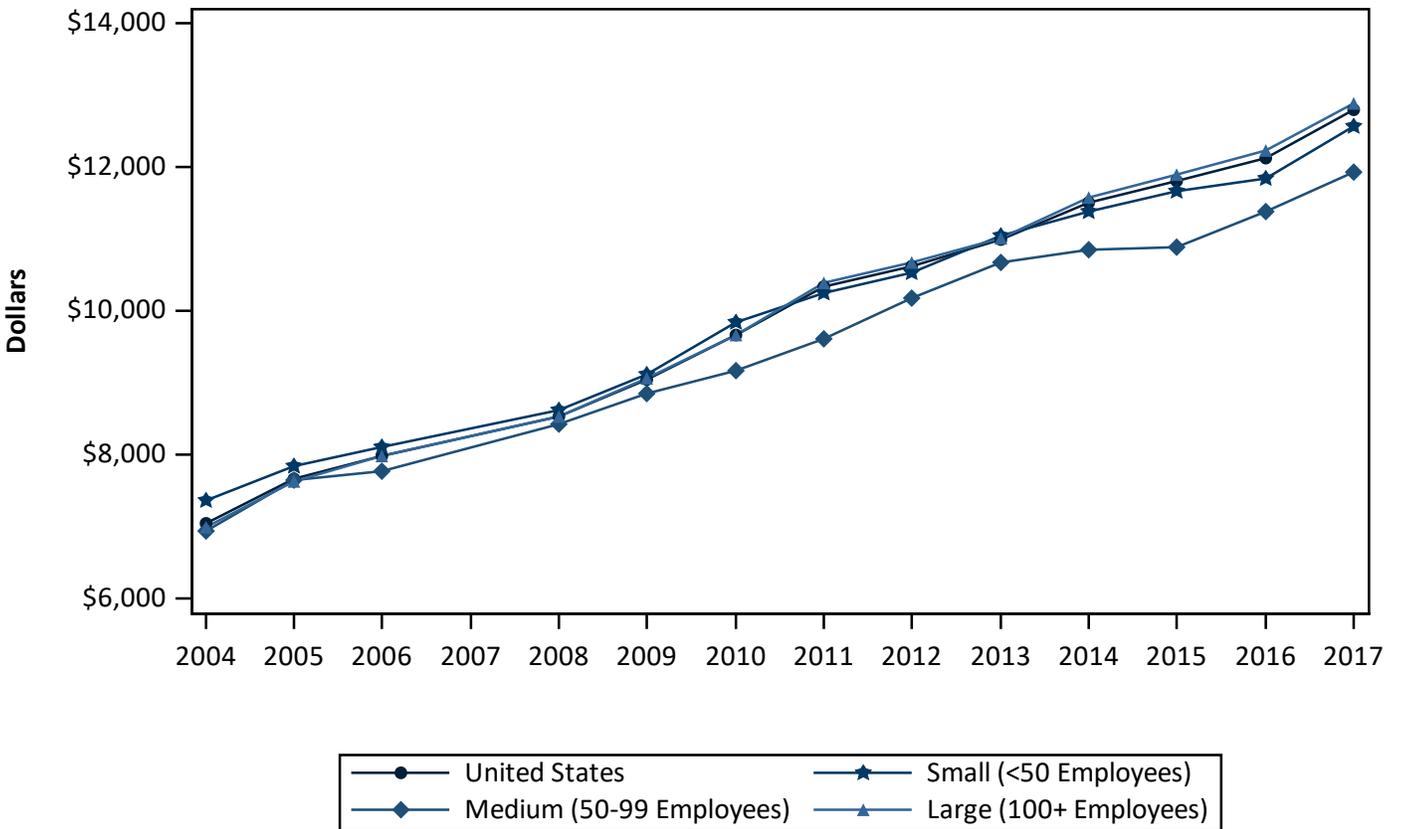
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$3,705	\$3,991	\$4,118	\$4,386	\$4,669	\$4,940	\$5,222	\$5,384	\$5,571	\$5,832	\$5,963	\$6,101	\$6,368
<50	\$3,763	\$4,121	\$4,260	\$4,501	\$4,652	\$4,956	\$5,258	\$5,460	\$5,628	\$5,886	\$5,947	\$6,070	\$6,421
50-99	\$3,711	\$3,962	\$4,045	\$4,215	\$4,614	\$4,713	\$4,861	\$5,246	\$5,314	\$5,549	\$5,642	\$5,743	\$6,163
100+	\$3,684	\$3,950	\$4,080	\$4,370	\$4,681	\$4,959	\$5,252	\$5,378	\$5,584	\$5,851	\$6,006	\$6,146	\$6,377

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 3.4

Average total employee-plus-one premium per enrolled employee, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 3.4

Average total employee-plus-one premium per enrolled employee, by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$7,056	\$7,671	\$7,988	\$8,535	\$9,053	\$9,664	\$10,329	\$10,621	\$10,990	\$11,503	\$11,800	\$12,124	\$12,789
<50	\$7,373	\$7,841	\$8,105	\$8,631	\$9,124	\$9,850	\$10,253	\$10,524	\$11,050	\$11,386	\$11,666	\$11,833	\$12,558
50-99	\$6,945	\$7,645	\$7,774	\$8,421	\$8,852	\$9,166	\$9,615	\$10,178	\$10,673	\$10,845	\$10,885	\$11,389	\$11,931
100+	\$7,002	\$7,640	\$7,981	\$8,527	\$9,058	\$9,669	\$10,394	\$10,672	\$11,006	\$11,571	\$11,892	\$12,225	\$12,878

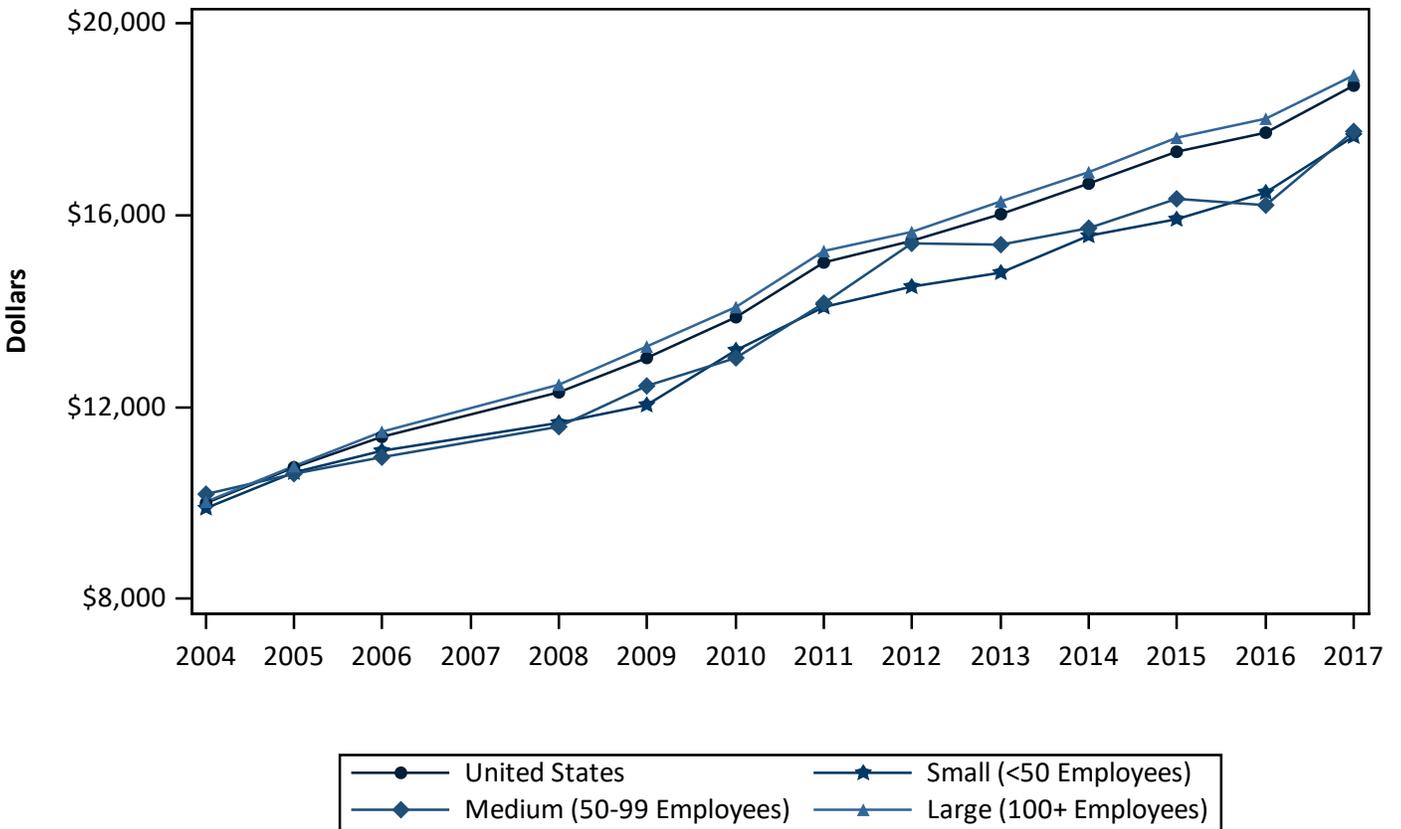
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 3.5

Average total family premium per enrolled employee, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 3.5

Average total family premium per enrolled employee, by firm size, 2004-2017

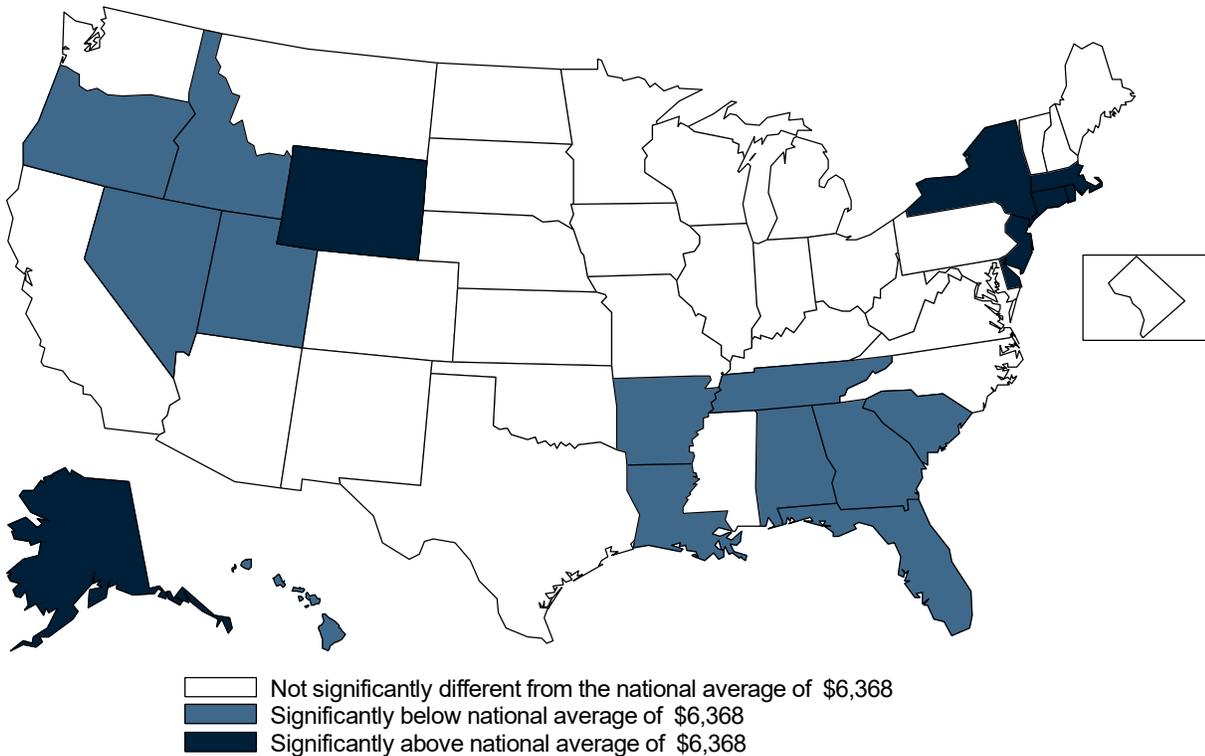
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$10,006	\$10,728	\$11,381	\$12,298	\$13,027	\$13,871	\$15,022	\$15,473	\$16,029	\$16,655	\$17,322	\$17,710	\$18,687
<50	\$9,898	\$10,632	\$11,095	\$11,679	\$12,041	\$13,170	\$14,086	\$14,496	\$14,787	\$15,575	\$15,919	\$16,471	\$17,649
50-99	\$10,172	\$10,619	\$10,954	\$11,578	\$12,431	\$13,019	\$14,151	\$15,421	\$15,376	\$15,732	\$16,336	\$16,214	\$17,735
100+	\$10,019	\$10,754	\$11,471	\$12,468	\$13,271	\$14,074	\$15,245	\$15,641	\$16,284	\$16,903	\$17,612	\$18,000	\$18,911

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 3.6			
Average total premiums per enrolled employee for single, employee-plus-one, and family coverage, overall and by firm size, 2017			
Firm Size	Single	Employee-Plus-One	Family
United States	\$6,368	\$12,789	\$18,687
Firm size in 3 categories			
<50	\$6,421	\$12,558	\$17,649
50-99	\$6,163	\$11,931	\$17,735
100+	\$6,377	\$12,878	\$18,911
Firm size in 5 categories			
<10	\$6,695	\$13,211	\$17,789
10-24	\$6,329	\$12,364	\$17,741
25-99	\$6,222	\$12,059	\$17,597
100-999	\$6,254	\$12,763	\$18,400
1,000+	\$6,428	\$12,915	\$19,064
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.			
For data points and standard errors for this exhibit, select here.			

Exhibit 3.7
Average total single premium per enrolled employee, by State, 2017

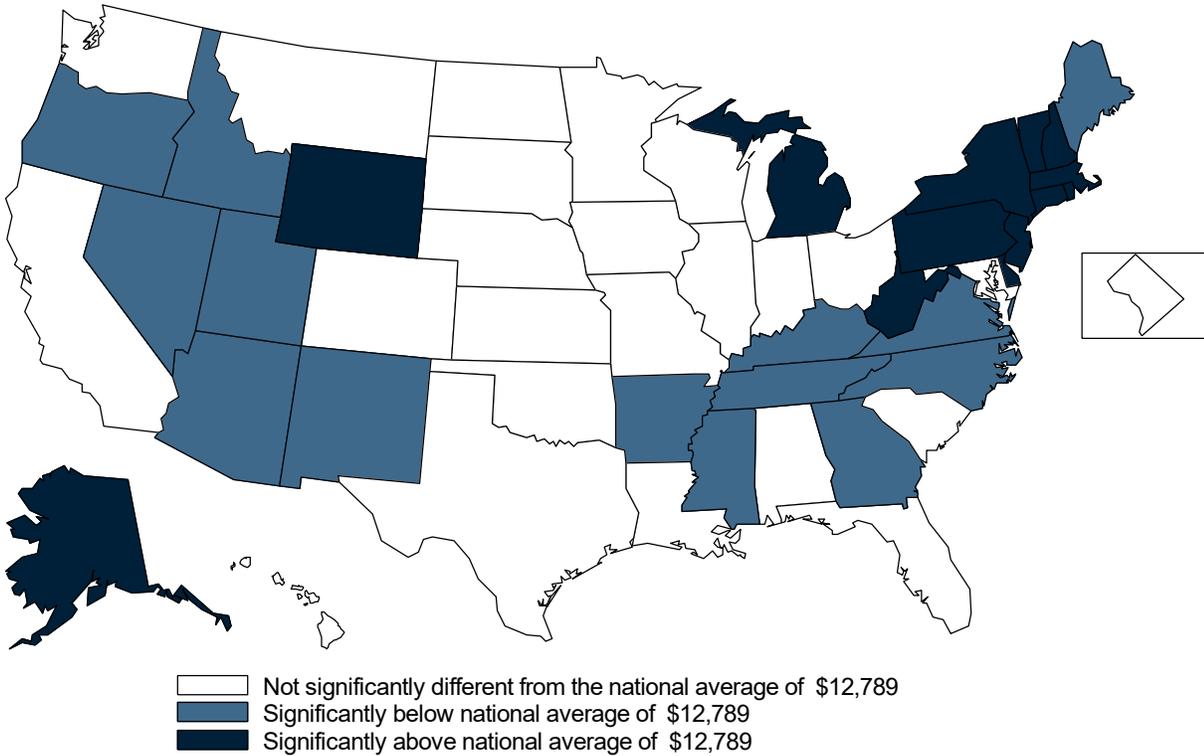


Alabama	\$6,075*	Kentucky	\$6,101	North Dakota	\$6,341
Alaska	\$7,964*	Louisiana	\$6,026*	Ohio	\$6,247
Arizona	\$6,217	Maine	\$6,132	Oklahoma	\$6,236
Arkansas	\$5,722*	Maryland	\$6,577	Oregon	\$6,081*
California	\$6,295	Massachusetts	\$7,031*	Pennsylvania	\$6,522
Colorado	\$6,456	Michigan	\$6,388	Rhode Island	\$7,048*
Connecticut	\$7,012*	Minnesota	\$6,268	South Carolina	\$6,079*
Delaware	\$7,046*	Mississippi	\$5,878	South Dakota	\$6,533
District of Columbia	\$6,704	Missouri	\$6,354	Tennessee	\$6,006*
Florida	\$6,068*	Montana	\$6,763	Texas	\$6,202
Georgia	\$5,849*	Nebraska	\$6,305	Utah	\$5,568*
Hawaii	\$6,039*	Nevada	\$5,756*	Vermont	\$6,551
Idaho	\$5,858*	New Hampshire	\$6,670	Virginia	\$6,299
Illinois	\$6,493	New Jersey	\$7,074*	Washington	\$6,495
Indiana	\$6,162	New Mexico	\$6,275	West Virginia	\$6,574
Iowa	\$6,128	New York	\$7,309*	Wisconsin	\$6,437
Kansas	\$6,107	North Carolina	\$6,348	Wyoming	\$7,257*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.
Note: * Indicates the estimate is statistically different from the national average of \$6,368 at $p < 0.05$.
For data points and standard errors for this exhibit, select here.

Exhibit 3.8

Average total employee-plus-one premium per enrolled employee, by State, 2017



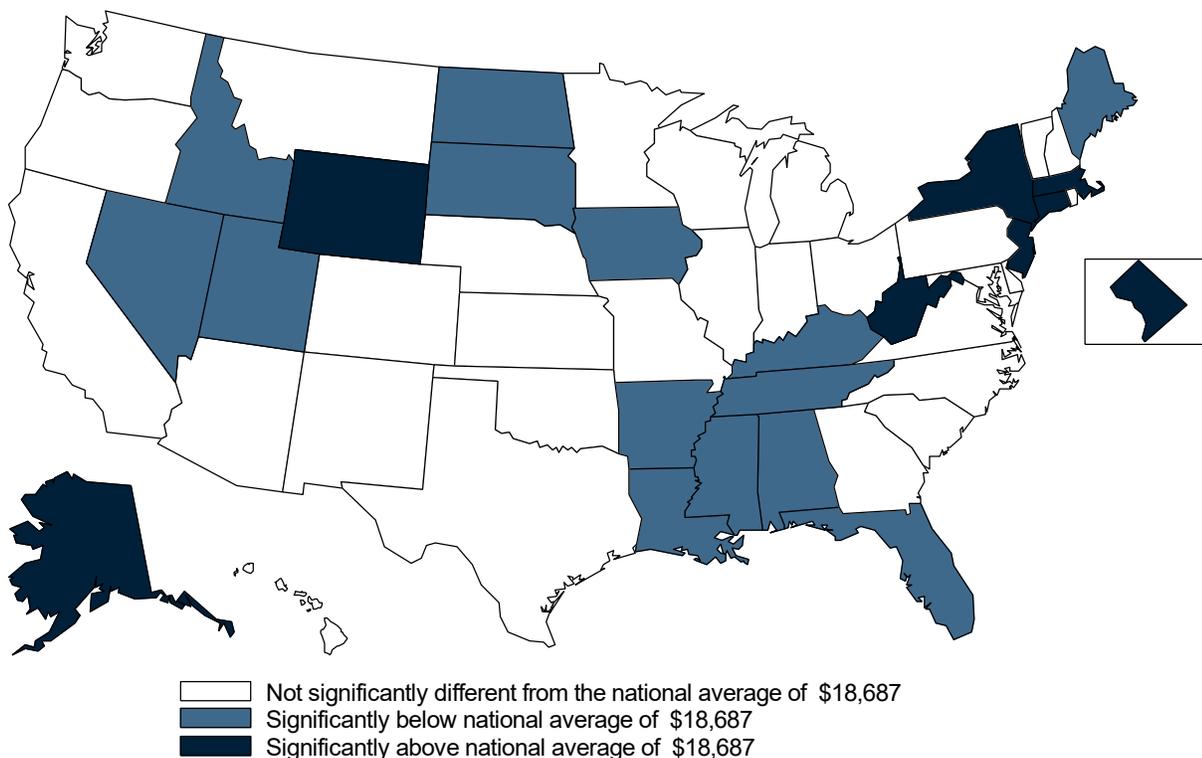
Alabama	\$12,416	Kentucky	\$11,487*	North Dakota	\$12,278
Alaska	\$15,528*	Louisiana	\$12,486	Ohio	\$12,654
Arizona	\$11,646*	Maine	\$11,942*	Oklahoma	\$12,400
Arkansas	\$10,793*	Maryland	\$12,990	Oregon	\$11,677*
California	\$12,628	Massachusetts	\$14,147*	Pennsylvania	\$13,441*
Colorado	\$13,180	Michigan	\$13,686*	Rhode Island	\$14,075*
Connecticut	\$13,886*	Minnesota	\$12,965	South Carolina	\$12,358
Delaware	\$14,139*	Mississippi	\$11,214*	South Dakota	\$12,569
District of Columbia	\$13,471	Missouri	\$12,781	Tennessee	\$11,844*
Florida	\$12,334	Montana	\$12,274	Texas	\$12,512
Georgia	\$12,150*	Nebraska	\$12,529	Utah	\$11,634*
Hawaii	\$12,358	Nevada	\$11,429*	Vermont	\$13,684*
Idaho	\$11,505*	New Hampshire	\$13,875*	Virginia	\$11,650*
Illinois	\$13,704	New Jersey	\$14,138*	Washington	\$12,575
Indiana	\$12,544	New Mexico	\$11,496*	West Virginia	\$14,162*
Iowa	\$12,183	New York	\$14,200*	Wisconsin	\$13,002
Kansas	\$12,615	North Carolina	\$11,985*	Wyoming	\$13,475*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of \$12,789 at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 3.9
Average total family premium per enrolled employee, by State, 2017



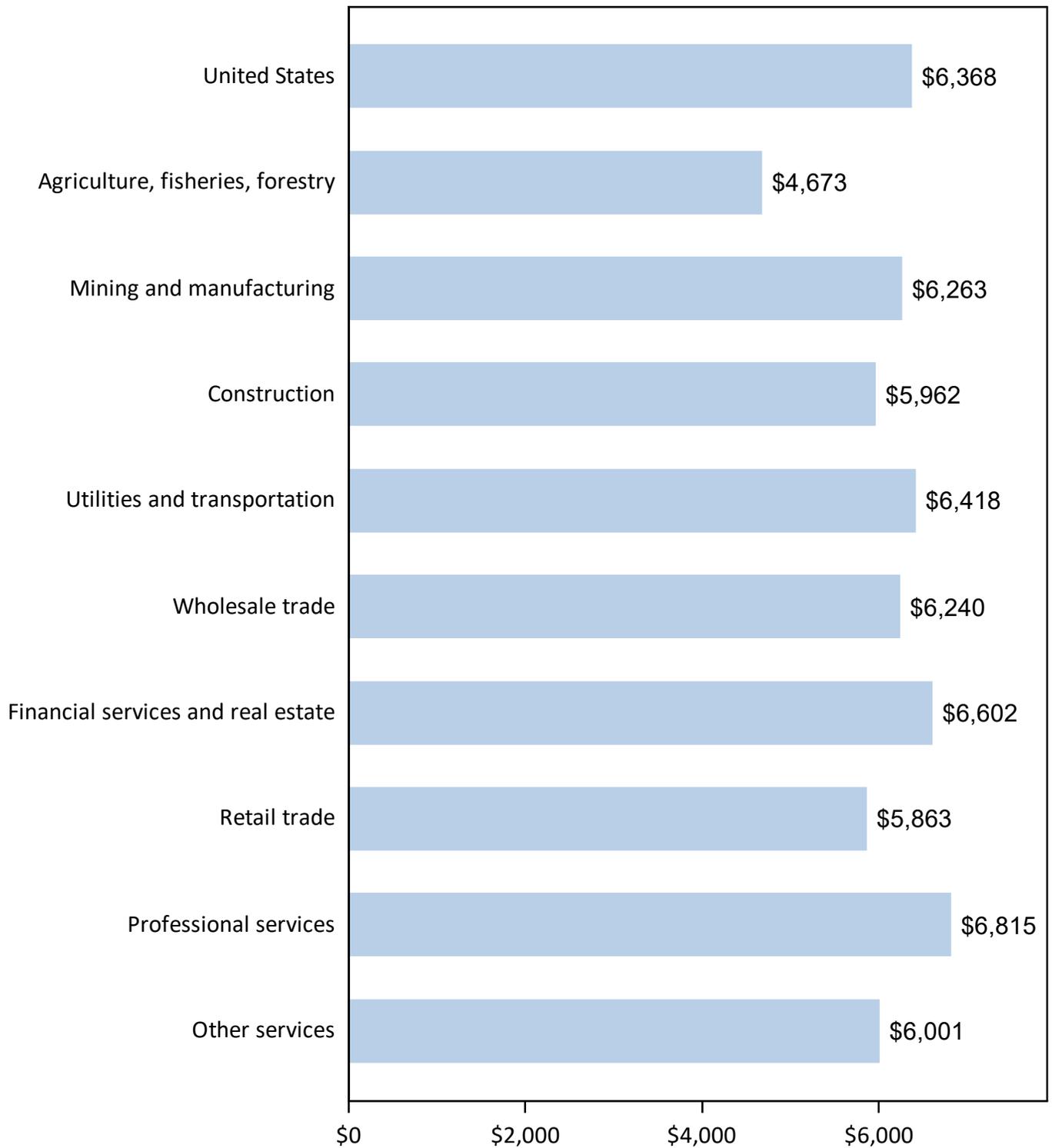
Alabama	\$16,902*	Kentucky	\$16,948*	North Dakota	\$17,886*
Alaska	\$22,417*	Louisiana	\$17,400*	Ohio	\$18,185
Arizona	\$18,432	Maine	\$17,422*	Oklahoma	\$18,252
Arkansas	\$16,663*	Maryland	\$18,915	Oregon	\$17,953
California	\$18,730	Massachusetts	\$21,053*	Pennsylvania	\$18,589
Colorado	\$19,339	Michigan	\$18,929	Rhode Island	\$18,387
Connecticut	\$20,020*	Minnesota	\$18,507	South Carolina	\$18,241
Delaware	\$19,407	Mississippi	\$17,343*	South Dakota	\$17,695*
District of Columbia	\$20,960*	Missouri	\$18,763	Tennessee	\$17,349*
Florida	\$17,189*	Montana	\$17,932	Texas	\$18,252
Georgia	\$17,703	Nebraska	\$18,199	Utah	\$16,350*
Hawaii	\$18,512	Nevada	\$17,221*	Vermont	\$18,552
Idaho	\$17,168*	New Hampshire	\$19,230	Virginia	\$18,264
Illinois	\$19,656	New Jersey	\$20,669*	Washington	\$19,472
Indiana	\$18,253	New Mexico	\$18,738	West Virginia	\$20,252*
Iowa	\$17,086*	New York	\$21,317*	Wisconsin	\$18,785
Kansas	\$18,229	North Carolina	\$18,101	Wyoming	\$21,355*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of \$18,687 at $p < 0.05$.

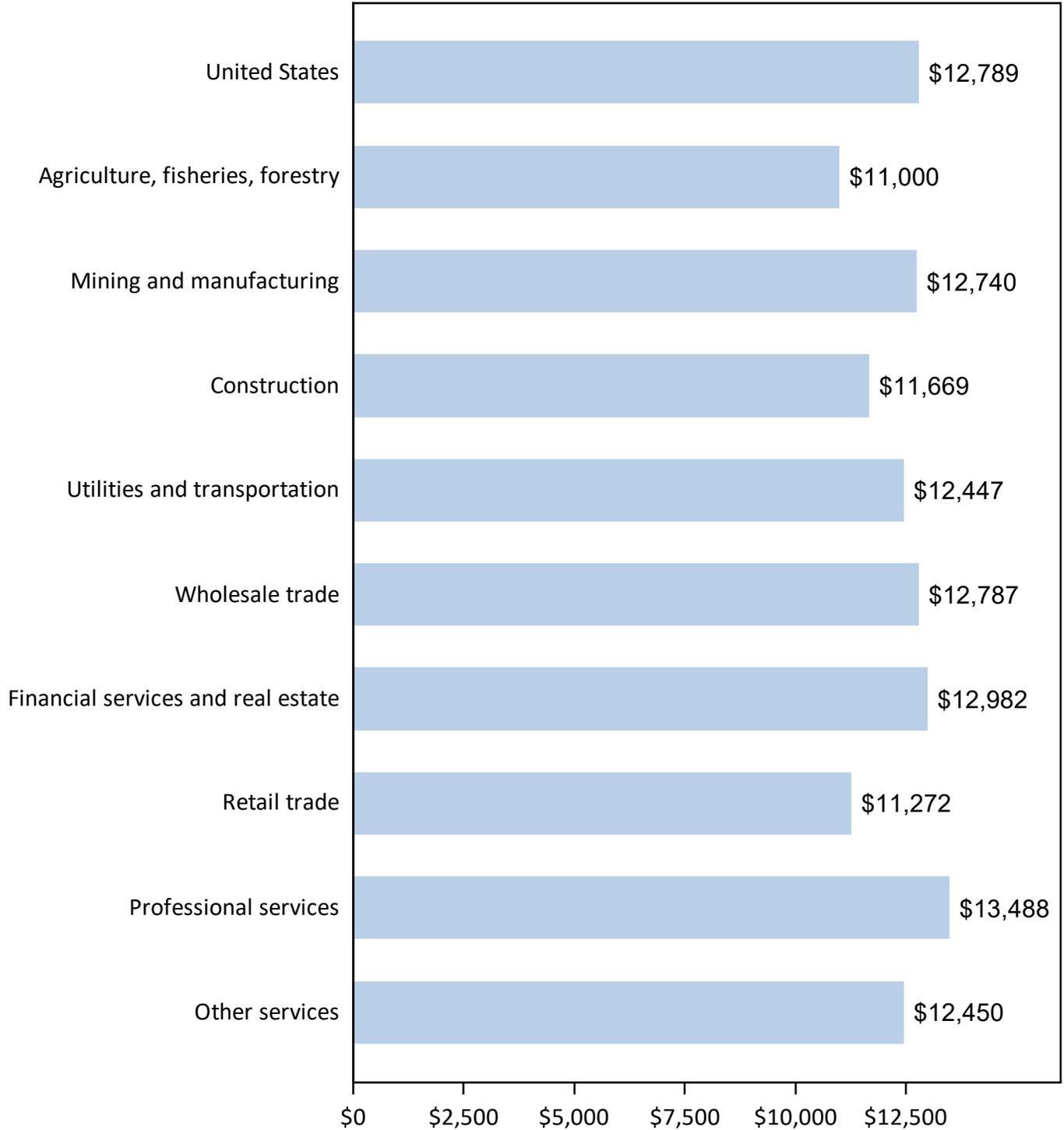
For data points and standard errors for this exhibit, select here.

Exhibit 3.10
Average total single premium per enrolled employee, overall and by industry, 2017



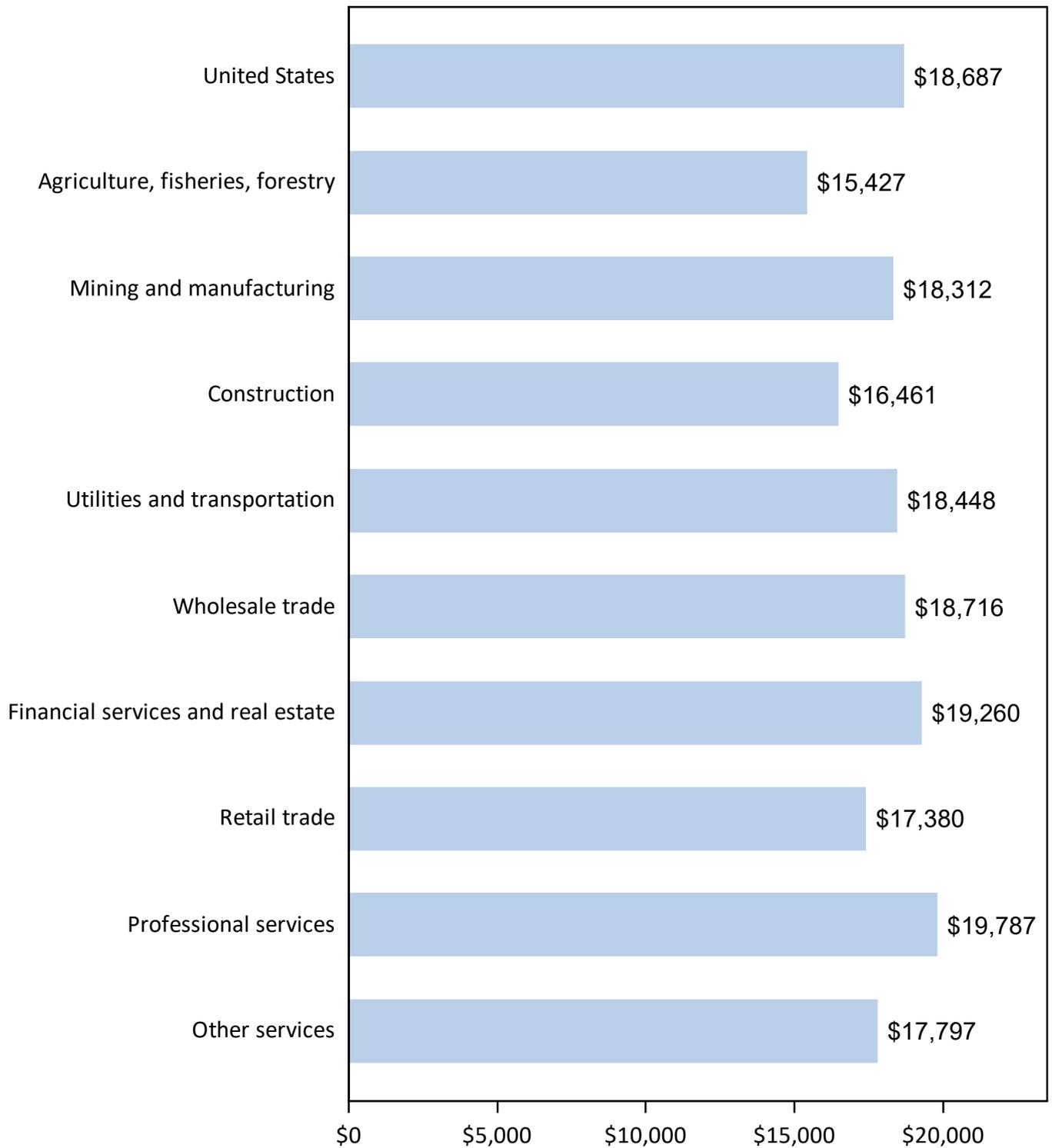
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 3.11
Average total employee-plus-one premium per enrolled employee, overall and by industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

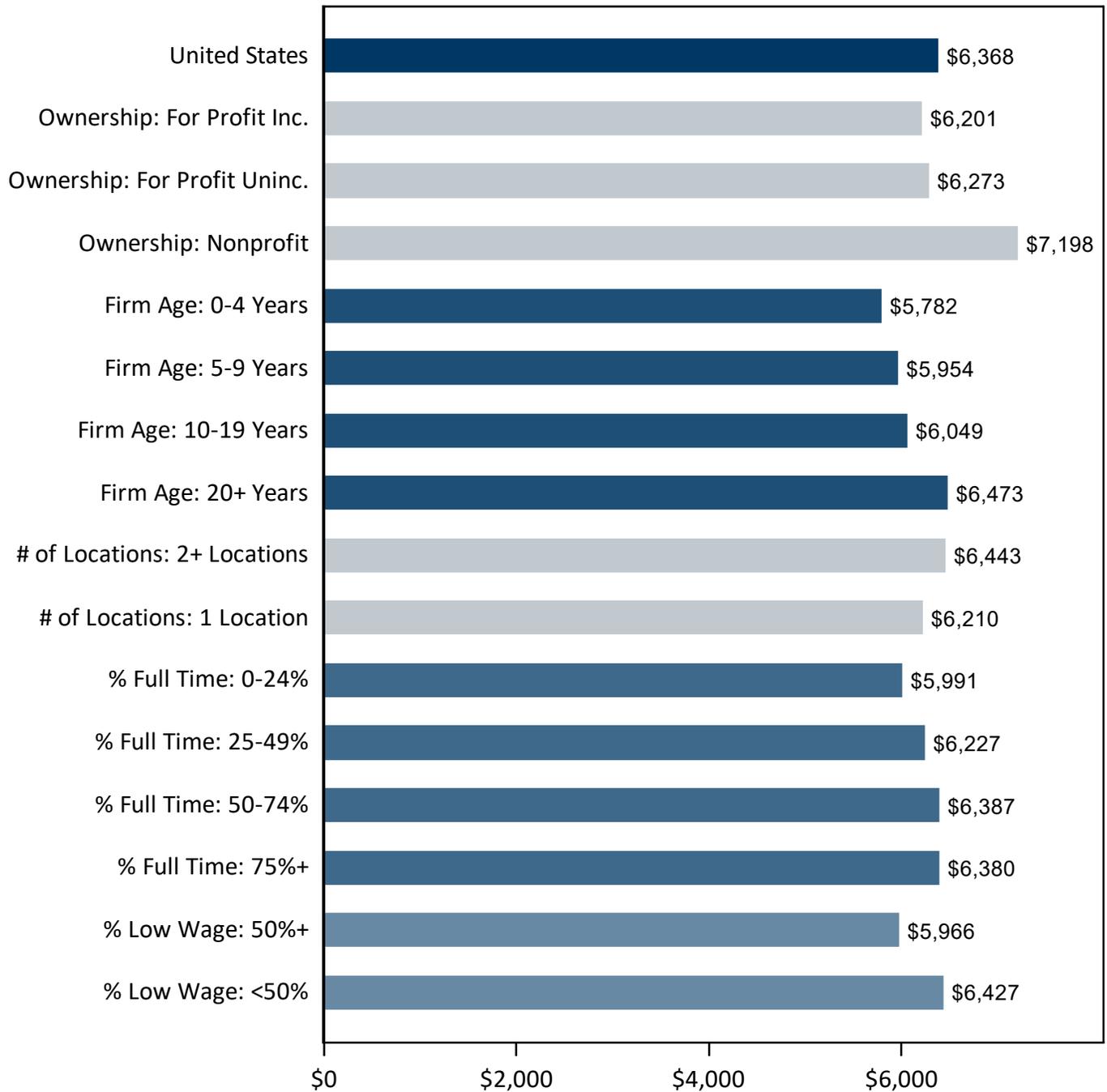
Exhibit 3.12
Average total family premium per enrolled employee, overall and by industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 3.13

Average total single premium per enrolled employee, overall and by selected characteristics, 2017



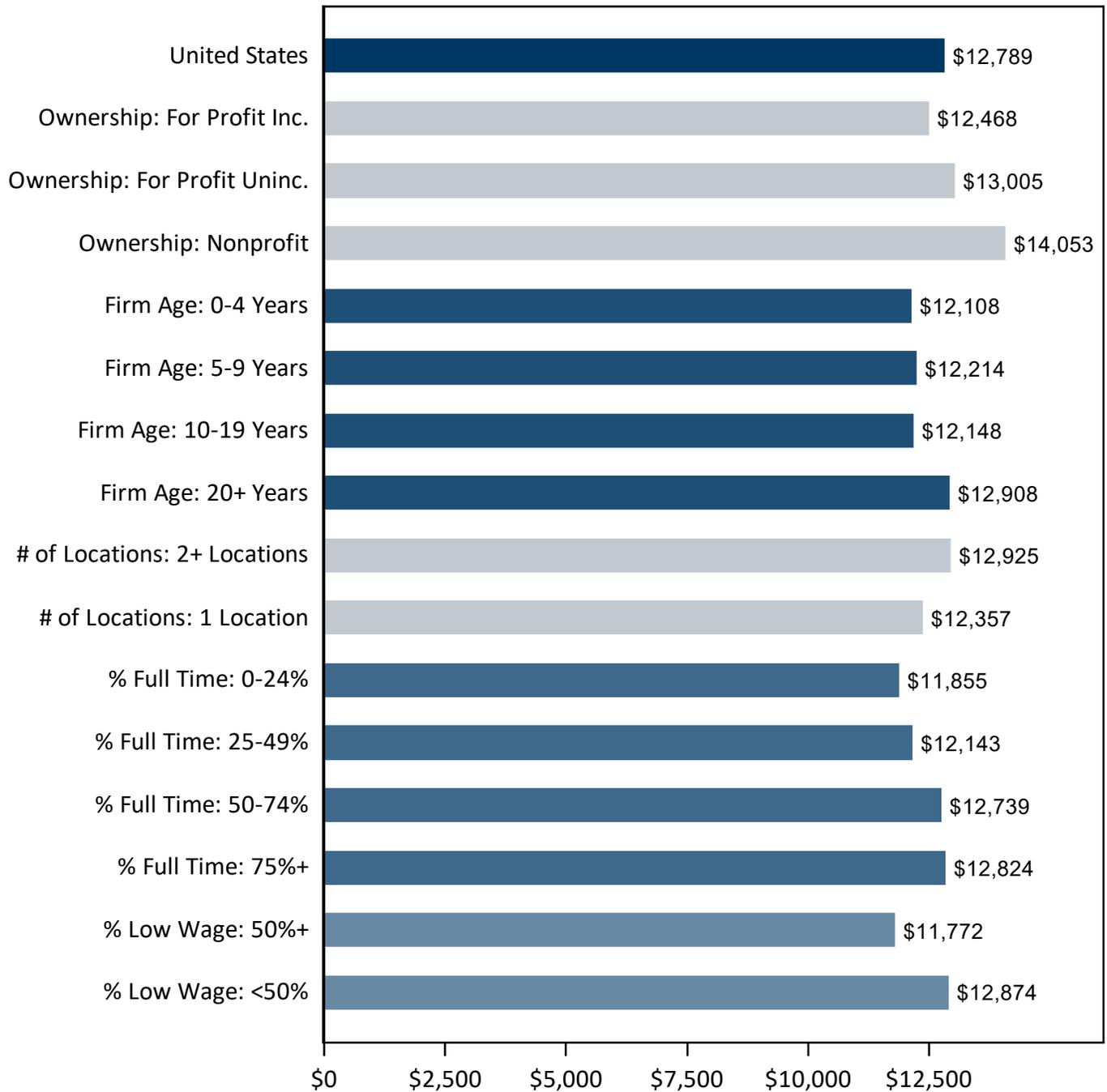
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 3.14

Average total employee-plus-one premium per enrolled employee, overall and by selected characteristics, 2017

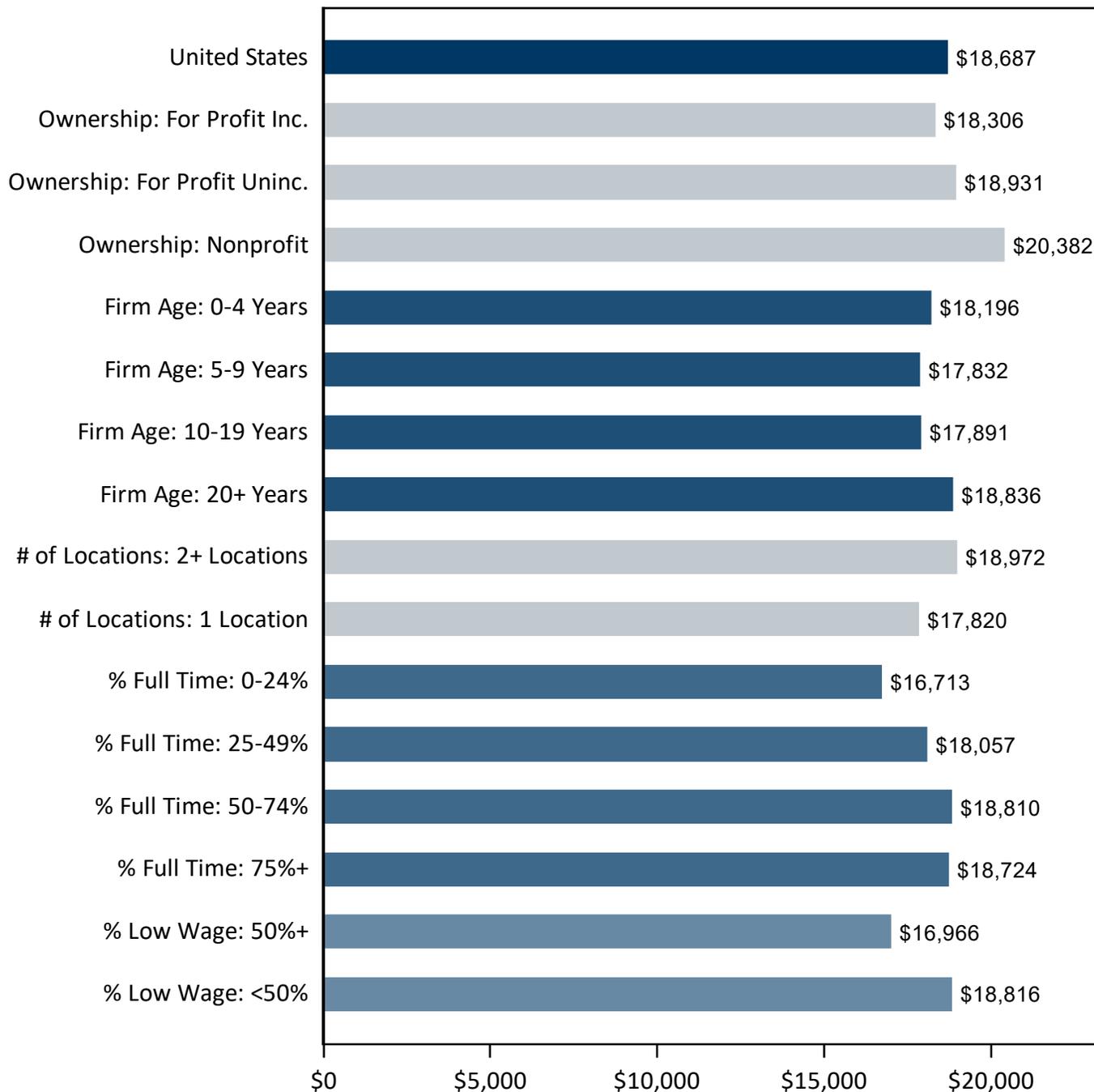


Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 3.15
Average total family premium per enrolled employee, overall and by selected characteristics, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 3.16 Premium distributions for employees enrolled in single, employee-plus-one, and family coverage, overall and by firm size, 2017					
Coverage	Estimate	Total	<50 employees	50-99 employees	100 or more employees
Single	Average (mean)	\$6,368	\$6,421	\$6,163	\$6,377
	10 percentile	\$4,000	\$3,600	\$3,600	\$4,200
	25 percentile	\$5,000	\$4,700	\$4,600	\$5,100
	50 percentile (median)	\$6,200	\$6,000	\$5,800	\$6,200
	75 percentile	\$7,400	\$7,700	\$7,200	\$7,400
	90 percentile	\$8,900	\$9,600	\$9,200	\$8,700
Employee-plus-one	Average (mean)	\$12,789	\$12,558	\$11,931	\$12,878
	10 percentile	\$8,100	\$6,600	\$6,600	\$8,500
	25 percentile	\$10,000	\$9,300	\$9,000	\$10,000
	50 percentile (median)	\$13,000	\$12,000	\$11,000	\$13,000
	75 percentile	\$15,000	\$15,000	\$15,000	\$15,000
	90 percentile	\$18,000	\$19,000	\$17,000	\$18,000
Family	Average (mean)	\$18,687	\$17,649	\$17,735	\$18,911
	10 percentile	\$12,000	\$10,000	\$11,000	\$13,000
	25 percentile	\$15,000	\$14,000	\$14,000	\$16,000
	50 percentile (median)	\$18,000	\$17,000	\$18,000	\$19,000
	75 percentile	\$22,000	\$21,000	\$20,000	\$22,000
	90 percentile	\$26,000	\$25,000	\$25,000	\$26,000
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017. For data points and standard errors for this exhibit, select here.					

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Section 4: Employee and Employer Premium Contributions



Employee and Employer Premium Contributions

In 2017, enrolled employees paid 22.2 percent of total premiums for single coverage, 27.6 percent for employee-plus-one coverage, and 27.9 percent for family coverage. The percentages of premiums paid by enrolled employees in 2017 for these three coverage types were not significantly different from their 2016 levels.

Average employee contributions in 2017 were \$1,415 for single coverage, \$3,531 for employee-plus-one coverage, and \$5,218 for family coverage, representing increases of 6.8 percent, 4.6 percent, and 5.3 percent, respectively, over 2016 levels. At the same time, average employer contributions in 2017 increased by 3.7 percent, 5.8 percent, and 5.6 percent for single, employee-plus-one, and family coverage, respectively, over 2016 levels.

This section examines how employee and employer premium contributions changed between 2004 and 2017, both in nominal dollars and as a percentage of annual premiums per enrolled employee. This section also examines variation in employee premium contributions by coverage type, State where the enrolled employee's establishment was located, firm size, industry, and other employer characteristics. In addition, this section presents the distribution of employee contributions by firm size.

Employee and Employer Premium Contributions, 2004 to 2017

- In 2017, enrolled employees paid 22.2 percent of total premiums for single coverage, 27.6 percent for employee-plus-one coverage, and 27.9 percent for family coverage. The employee shares of total premiums for all three coverage types were not significantly different from their 2016 levels (Exhibits 4.1, 4.6, 4.8, and 4.10).
- Employees enrolled in single coverage contributed a smaller share of premiums than employees enrolled in employee-plus-one and family coverage in all years from 2004 to 2017 (Exhibit 4.1).
- Average employee contributions in 2017 were \$1,415 for single coverage, \$3,531 for employee-plus-one coverage, and \$5,218 for family coverage, representing increases of 6.8 percent, 4.6 percent, and 5.3 percent, respectively, over 2016 levels. There were also statistically significant annual increases in average employee contributions for each coverage type in most years from 2004 to 2016 (Exhibit 4.2).
- Average employer contributions in 2017 were \$4,953 for single coverage, \$9,258 for employee-plus-one coverage, and \$13,469 for family coverage, representing increases of 3.7 percent, 5.8 percent, and 5.6 percent, respectively, over 2016 levels. Similar to employee contributions, there were statistically significant annual increases in average employer contributions for each coverage type in most years from 2004 to 2016 (Exhibits 4.3, 4.4, and 4.5).

- From 2004 to 2017, the percentage of premiums contributed by employees increased by 4.1 percentage points, 4.0 percentage points, and 3.5 percentage points for single, employee-plus-one, and family coverage, respectively. This was because employee contributions increased more rapidly than employer contributions from 2004 to 2017 for each type of coverage (Exhibits 4.1, 4.3, 4.4, and 4.5).

Employee Premium Contributions by Firm Size, 2004 to 2017

Percentage Contributed for Single Coverage

- The percentage of single-coverage premiums paid by employees in large firms (100 or more employees) increased by 0.9 percentage points, from 21.9 percent in 2016 to 22.8 percent in 2017. In contrast, the percentage of single premiums paid by employees in medium firms (50 to 99 employees) decreased by 2.4 percentage points ($p < 0.10$), from 24.3 percent in 2016 to 21.9 percent in 2017. The percentage of single-coverage premiums paid by employees in small firms (fewer than 50 employees) in 2017 (20.0 percent) was unchanged from its 2016 level (Exhibit 4.6).
- In 2017, enrolled employees in small firms (fewer than 50 employees) contributed a significantly lower percentage of single premiums than those in larger firms ($p < 0.10$ for the difference between small and medium firms), which was true in almost all years between 2004 and 2016. There was no significant difference in the percentage of single-coverage premiums paid by employees in medium firms (50 to 99 employees) and large firms (100 or more employees) in 2017 (Exhibit 4.6).
- In 2017, employees with single coverage in the smallest firms (fewer than 10 employees) paid 17.1 percent of their premiums, which was lower than the percentages paid by enrolled employees in larger firms:
 - 20.9 percent in firms with 10 to 24 employees,
 - 21.8 percent in firms with 25 to 99 employees,
 - 22.2 percent in firms with 100 to 999 employees, and
 - 23.0 percent in firms with 1,000 or more employees (Exhibit 4.12).
- One factor behind the lower percentage of single premiums contributed by enrolled employees in the smallest firms (fewer than 10 employees) than in larger firms is the much higher percentage of these small-firm enrollees with no required employee premium contribution. In 2017, for example, 52.3 percent of employees with single coverage in firms with fewer than 10 employees had no required premium contribution. In contrast, only 14.3 percent and 3.9 percent of employees with single coverage in firms with 100 to 999 employees and with 1,000 or more employees, respectively, were not required to contribute to single premiums (Exhibits 4.12 and 4.14).

- Between 2016 and 2017, the percentage of enrolled employees with no required employee contribution for single coverage decreased by 5.6 percentage points in firms with fewer than 10 employees (Exhibit 4.14).

Percentage Contributed for Dependent Coverage

- In all years between 2004 and 2017, enrolled employees in small firms (fewer than 50 employees) paid either a percentage that was not significantly different or a higher percentage of premiums for employee-plus-one and family coverage than enrolled employees in large firms (100 or more employees). Enrolled employees in medium firms (50 to 99 employees) contributed the same or a larger share of premiums for both types of coverage than those in both small and large firms over the entire period (Exhibits 4.8 and 4.10).
- In 2017, employees with employee-plus-one coverage in the smallest firms (fewer than 10 employees) and the largest firms (1,000 or more employees) paid a lower percentage of their premium (22.4 percent and 25.7 percent, respectively) than enrollees in the three other firm-size categories:
 - 32.8 percent in firms with 10 to 24 employees,
 - 35.3 percent in firms with 25 to 99 employees, and
 - 30.1 percent in firms with 100 to 999 employees (Exhibit 4.12).
- In 2017, employees with family coverage in the smallest firms paid a lower percentage of their premium (22.5 percent) than enrollees in the four other firm-size categories. Within the largest four firm size categories, those in the largest firms (1000 or more employees) paid a lower percentage of their family premium in 2017 than enrollees in the other categories:
 - 32.6 percent in firms with 10 to 24 employees,
 - 34.1 percent in firms with 25 to 99 employees,
 - 29.7 percent in firms with 100 to 999 employees, and
 - 26.6 percent in firms with 1000 or more employees (Exhibit 4.12).
- In 2017, the percentage of enrolled employees with no required premium contribution for employee-plus-one coverage was higher for employees in firms with fewer than 10 employees (49.7 percent) and with 10 to 24 employees (22.4 percent) than in other firm-size categories:
 - 11.2 percent in firms with 25 to 99 employees,
 - 5.5 percent in firms with 100 to 999 employees, and
 - 4.3 percent in firms with 1,000 or more employees (Exhibit 4.15).

- In 2017, the percentage of enrolled employees with no required premium contribution for family coverage was higher for employees in firms with fewer than 10 employees (52.0 percent) and with 10 to 24 employees (27.3 percent) than in other firm-size categories:
 - 19.5 percent in firms with 25 to 99 employees,
 - 8.7 percent in firms with 100 to 999 employees, and
 - 3.1 percent in firms with 1,000 or more employees (Exhibit 4.16).

Employee Contributions for Single Coverage (Dollar Amount)

- In 2017, enrolled employees in smaller firms contributed a smaller dollar amount for their single coverage (\$1,287 in firms with fewer than 50 employees and \$1,349 in firms with 50 to 99 employees) than employees in large firms (\$1,451) ($p < 0.10$ for the difference between medium and large firms) (Exhibit 4.7).
- Enrolled employees in firms with fewer than 10 employees contributed a smaller dollar amount for their single coverage (\$1,143) in 2017 than those in the four other firm-size categories:
 - \$1,324 in firms with 10 to 24 employees,
 - \$1,356 in firms with 25 to 99 employees
 - \$1,390 in firms with 100 to 999 employees, and
 - \$1,477 in firms with 1,000 or more employees (Exhibit 4.13).

Employee Contributions for Dependent Coverage (Dollar Amount)

- In 2017, employee premium contributions for employee-plus-one coverage were highest in firms with 50 to 99 employees (\$4,358) and higher in firms with fewer than 50 employees (\$3,760) than in firms with 100 or more employees (\$3,445) (Exhibit 4.9).
- In the more detailed firm-size categories, the amounts paid by employees with employee-plus-one coverage in the smallest firms (fewer than 10 employees, \$2,965) and in the largest firms (1,000 and more employees, \$3,319) were lower than that for enrolled employees in the three other firm-size categories (Exhibit 4.13).
- Enrolled employees with family coverage in firms with 50 to 99 employees contributed a higher dollar amount (\$5,738) than enrollees in firms with 100 or more employees (\$5,154) ($p < 0.10$). Employees with family coverage in firms with fewer than 50 employees contributed \$5,413 (Exhibit 4.11).
- In the more detailed firm-size categories, employees with family coverage in firms with fewer than 10 employees contributed the lowest dollar amount (\$4,004) in 2017. Among enrolled employees with family coverage in larger firms (10 or more employees), enrollees in firms with 1,000 or more employees contributed a lower dollar amount (\$5,063) than enrollees in the three other firm-size categories (Exhibit 4.13).

Trends in Employee Contributions (Dollar Amount)

- Between 2016 and 2017, employee premium contributions at large firms (100 or more employees) increased for all types of coverage: by 8.0 percent (from \$1,343 to \$1,451) for single coverage, by 4.2 percent (from \$3,307 to \$3,445) for employee-plus-one coverage, and by 3.7 percent (from \$4,971 to \$5,154, $p < 0.10$) for family coverage. (Exhibits 4.7, 4.9, and 4.11).
- At small firms (fewer than 50 employees), employee premium contributions for employee-plus-one and family coverage increased by 8.1 percent (from \$3,479 to \$3,760, $p < 0.10$) and 20.0 percent (from \$4,510 to \$5,413), respectively, between 2016 and 2017 (Exhibits 4.9 and 4.11).
- Between 2004 and 2017, employee premium contributions for single coverage increased more rapidly in small firms (fewer than 50 employees) than in medium firms (50 to 99 employees) or large firms (100 or more employees) (135.3 percent vs. 88.1 percent and 104.4 percent, respectively). In contrast, employee premium contributions for employee-plus-one coverage increased more rapidly in large firms (100 or more employees) than in small firms (fewer than 50 employees) (117.4 percent vs. 98.0 percent, $p < 0.10$). The aggregate growth rate of employee premium contributions for family coverage over this entire period did not vary by firm size (Exhibits 4.7, 4.9, and 4.11).
- The more rapid increase in single-coverage employee contributions at small firms than at medium or large firms from 2004 to 2017 was primarily due to a greater percentage point increase in the share of premiums paid by employees. The employee contribution increased by 5.5 percentage points vs. 2.6 percentage points and 3.5 percentage points, respectively ($p < 0.10$ for the small vs. medium comparison). This was because the growth rate of total single premiums did not vary significantly by firm size over this period (Exhibits 3.6, 4.6, and 4.7).

Employee Premium Contributions by State, 2017

- The percentage of premiums paid by enrollees with single coverage varied by State in 2017, from 11.2 percent in Hawaii to 26.2 percent in Alabama. States where the enrollee's share of single-coverage premiums was higher than the national average of 22.2 percent were Maryland, Massachusetts, Rhode Island, and Virginia. States where the enrollee's share of single-coverage premiums was lower than the national average were the District of Columbia, Hawaii, Idaho, Montana, North Dakota, Oregon, Utah, Washington, and Wyoming (Exhibit 4.17).
- The percentage of premiums paid by enrollees with employee-plus-one coverage also varied by State, from 19.9 percent in Wyoming to 34.2 percent in Louisiana. States where the enrollee's share of employee-plus-one premiums was higher than the national average of 27.6 percent were Florida, Louisiana, North Carolina, Texas, and Virginia. States where the enrollee's share of employee-plus-one premiums was lower than the national average were Michigan, Missouri, New York, Washington, West Virginia, and Wyoming (Exhibit 4.18).

- In 2017, the percentage of premiums paid by family-coverage enrollees varied by State, from 18.6 percent in West Virginia to 34.3 percent in Louisiana. States where the enrollee's share of family-coverage premiums was higher than the national average of 27.9 percent were Arizona, Delaware, Florida, Louisiana, Maryland, North Carolina, Texas, and Virginia. States where the enrollee's share was lower than the national average were Idaho, Iowa, Michigan, Missouri, Ohio, West Virginia, and Wyoming (Exhibit 4.19).
- The dollar amount of average single-coverage employee contributions also varied by State, from \$675 in Hawaii to \$1,747 in Massachusetts. States with employee premium contributions for single coverage that exceeded the national average of \$1,415 were Connecticut, Maryland, Massachusetts, New Hampshire, New Jersey, Pennsylvania, Rhode Island, and Virginia. States with employee premium contributions that were smaller than the national average were the District of Columbia, Hawaii, Idaho, Kansas, Montana, Nevada, North Dakota, Oregon, Utah, Washington, and Wyoming (Exhibit 4.20).
- The dollar amount of average employee contributions for employee-plus-one coverage varied by State, from \$2,687 in Wyoming to \$4,476 in Alaska. States with employee premium contributions for employee-plus-one coverage that exceeded the national average of \$3,531 were Alaska, Florida, Louisiana, Maryland, New Hampshire, and Rhode Island. States with employee contributions for employee plus-one coverage that were smaller than the national average were Idaho, Kentucky, Maine, Michigan, Missouri, Oregon, Washington, West Virginia, and Wyoming (Exhibit 4.21).
- In 2017, the dollar amount of average family-coverage employee contributions varied by State, from \$3,646 in Michigan to \$6,533 in Delaware. States with employee contributions for family coverage that exceeded the national average of \$5,218 were Alaska, Arizona, Delaware, Louisiana, Maryland, New York, and Virginia. States with employee contributions for family coverage that were smaller than the national average were Idaho, Indiana, Iowa, Michigan, Missouri, Ohio, Utah, and West Virginia (Exhibit 4.22).

Employee Premium Contributions by Industry, 2017

- In 2017, enrollees working in retail trade paid a higher percentage of their single premiums (27.7 percent) than enrollees in any other industry group ($p < 0.10$ for the difference between retail trade and construction or other services). Enrollees working in agriculture, fisheries, and forestry paid a lower percentage (15.0 percent) than enrollees in any other industry group (Exhibit 4.23).
- Enrollees working in mining and manufacturing paid a lower percentage of employee-plus-one premiums (23.5 percent) than enrollees in any other industry group except agriculture, fisheries, and forestry (28.5 percent) ($p < 0.10$ for the difference between mining and manufacturing and wholesale trade) (Exhibit 4.24).
- Enrollees working in retail trade paid a higher percentage of family premiums (35.3 percent) than enrollees in any other industry group except agriculture, fisheries, and forestry (30.4 percent) ($p < 0.10$ for the difference between retail trade and other services). Enrollees

working in mining and manufacturing paid a lower percentage (22.7 percent) than enrollees in any other industry group (Exhibit 4.25).

Employee Premium Contributions by Selected Employer Characteristics, 2017

- In 2017, enrollees working for nonprofit employers contributed a lower percentage of premiums than enrollees working for for-profit incorporated and for-profit unincorporated employers for all coverage types:
 - 17.4 percent vs. 23.1 percent and 24.2 percent for single coverage,
 - 23.9 percent vs. 28.0 percent and 30.3 percent for employee-plus-one coverage, and
 - 25.0 percent vs. 28.5 percent and 28.6 percent for family coverage (Exhibits 4.26, 4.27, and 4.28).
- Enrolled employees in firms that were 20 years old or older paid lower percentages of premiums for employee-plus-one and family coverage (26.8 percent and 27.0 percent, respectively) than enrolled employees in the other three firm-age categories (0-4, 5-9, and 10-19 years) ($p < 0.10$ for the difference in the employee-plus-one estimates between the oldest and youngest firms) (Exhibits 4.27 and 4.28).
- Employees in firms with two or more locations contributed a higher percentage for single coverage but a lower percentage for employee-plus-one and family coverage than those with a single location (Exhibits 4.26, 4.27, and 4.28).
- Enrollees in establishments with 75 percent or more full-time employees paid a lower percentage of premiums for single coverage than enrollees in establishments where less than 75 percent of employees worked full time (Exhibit 4.26).

Employee Premium Contributions in Predominantly Low Wage vs. Higher Wage Establishments, 2004 to 2017

- In 2017, enrollees in establishments that were predominantly low wage (50 percent or more of employees earned less than \$12.00 per hour) contributed a larger percentage of their premiums than those in higher wage establishments. Employees in low-wage establishments contributed 26.9 percent, 34.2 percent, and 35.7 percent of their premiums for single, employee-plus-one, and family coverage, respectively. In higher wage establishments, the percentages were 21.6 percent, 27.1 percent, and 27.4 percent (Exhibits 4.29, 4.31, and 4.33).
- Enrolled employees in predominantly low-wage establishments contributed a larger percentage of their premiums for single, employee-plus-one, and family coverage than those in higher wage establishments in all years between 2004 and 2017 (Exhibits 4.29, 4.31, and 4.33).
- Comparing 2004 and 2017, there were no significant differences between low-wage and higher wage establishments in the percentage point increases in the shares of total premiums paid by employees for single and employee-plus-one coverage. Over this entire period, the

percentage of single and employee-plus-one premiums paid by employees increased by 4.1 percentage points and 5.5 percentage points, respectively, in low-wage establishments. For higher wage establishments, the percentage of single and employee-plus-one premiums paid by employees increased by 4.5 percentage points and 4.4 percentage points, respectively. In contrast, there was a larger percentage point increase in the share of premiums paid by employees for family coverage in low-wage establishments over this period (7.8 percentage points) than in higher wage establishments (3.6 percentage points) (Exhibits 4.29, 4.31, and 4.33).

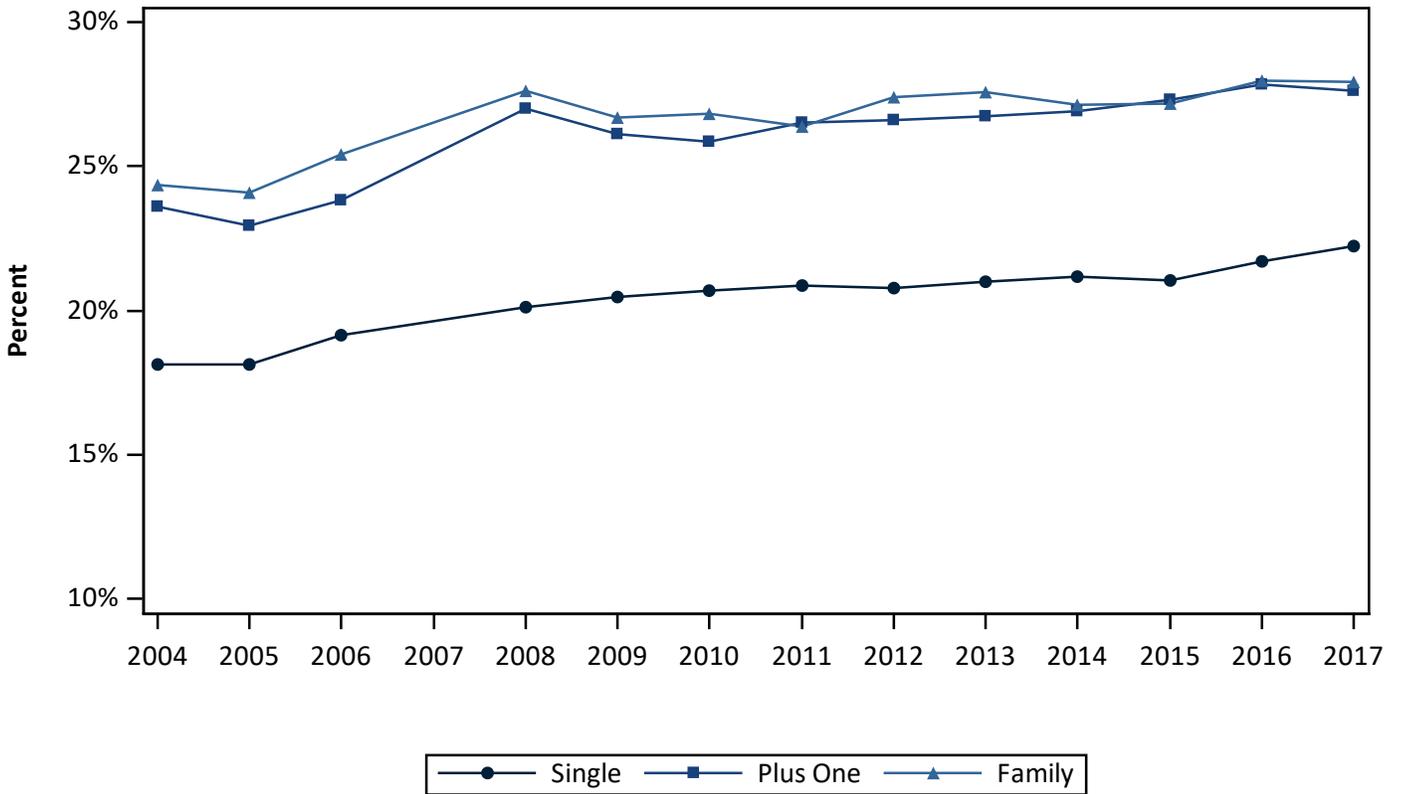
- In 2017, enrollees in low-wage establishments had higher premium contributions than their counterparts in higher wage establishments. Average employee contributions were \$1,605, \$4,030, and \$6,048 for single, employee-plus-one, and family coverage, respectively, in predominantly low-wage establishments and \$1,386, \$3,489, and \$5,156 in higher wage establishments (Exhibits 4.30, 4.32, and 4.34).

Distributions of Employee Contributions, Overall and by Firm Size, 2017

- In 2017, the average employee premium contribution was about 13 to 18 percent higher than the median (50th percentile) employee premium contribution for all three types of coverage: single coverage (\$1,415 vs. \$1,200), employee-plus-one coverage (\$3,531 vs. \$3,100), and family coverage (\$5,218 vs. \$4,600) (Exhibit 4.35).
- In 2017, the employee premium contribution distribution for all three coverage types showed substantial variation as enrolled employees at the top end of the distribution (90th percentile) paid much larger amounts than those at the bottom end of the distribution (10th percentile):
 - For single coverage, \$2,800 vs. \$0,
 - For employee-plus-one coverage, \$6,700 vs. \$730, and
 - For family coverage, \$10,000 vs. \$660 (Exhibit 4.35).
- In 2017, enrolled employees in firms with fewer than 50 employees had lower required contributions for all coverage types at the 10th and 25th percentiles of the distribution than enrolled employees in firms with 100 or more employees (Exhibit 4.35).
- Enrolled employees in smaller firms (fewer than 100 employees) had no required employee contribution at the 10th percentile for all coverage types except employee-plus-one coverage in firms with 50 to 99 employees. Enrolled employees in firms with fewer than 50 employees also had no required contributions at the 25th percentile for all coverage types (Exhibit 4.35).
- At the 75th percentile, employee contributions for employee-plus-one and family coverage were higher for enrolled employees in firms with fewer than 50 employees and firms with 50 to 99 employees than in firms with 100 or more employees. At the 90th percentile, employee contributions for all coverage types were higher for enrolled employees in smaller firms than in firms with 100 or more employees (Exhibit 4.35).

Exhibit 4.1

Average percentage of premium contributed by employees for single, employee-plus-one, and family coverage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.1

Average percentage of premium contributed by employees for single, employee-plus-one, and family coverage, 2004-2017

Coverage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
Single	18.1%	18.1%	19.1%	20.1%	20.5%	20.7%	20.9%	20.8%	21.0%	21.2%	21.1%	21.7%	22.2%
Plus One	23.6%	22.9%	23.8%	27.0%	26.1%	25.8%	26.5%	26.6%	26.7%	26.9%	27.3%	27.8%	27.6%
Family	24.4%	24.1%	25.4%	27.6%	26.7%	26.8%	26.4%	27.4%	27.6%	27.1%	27.2%	28.0%	27.9%

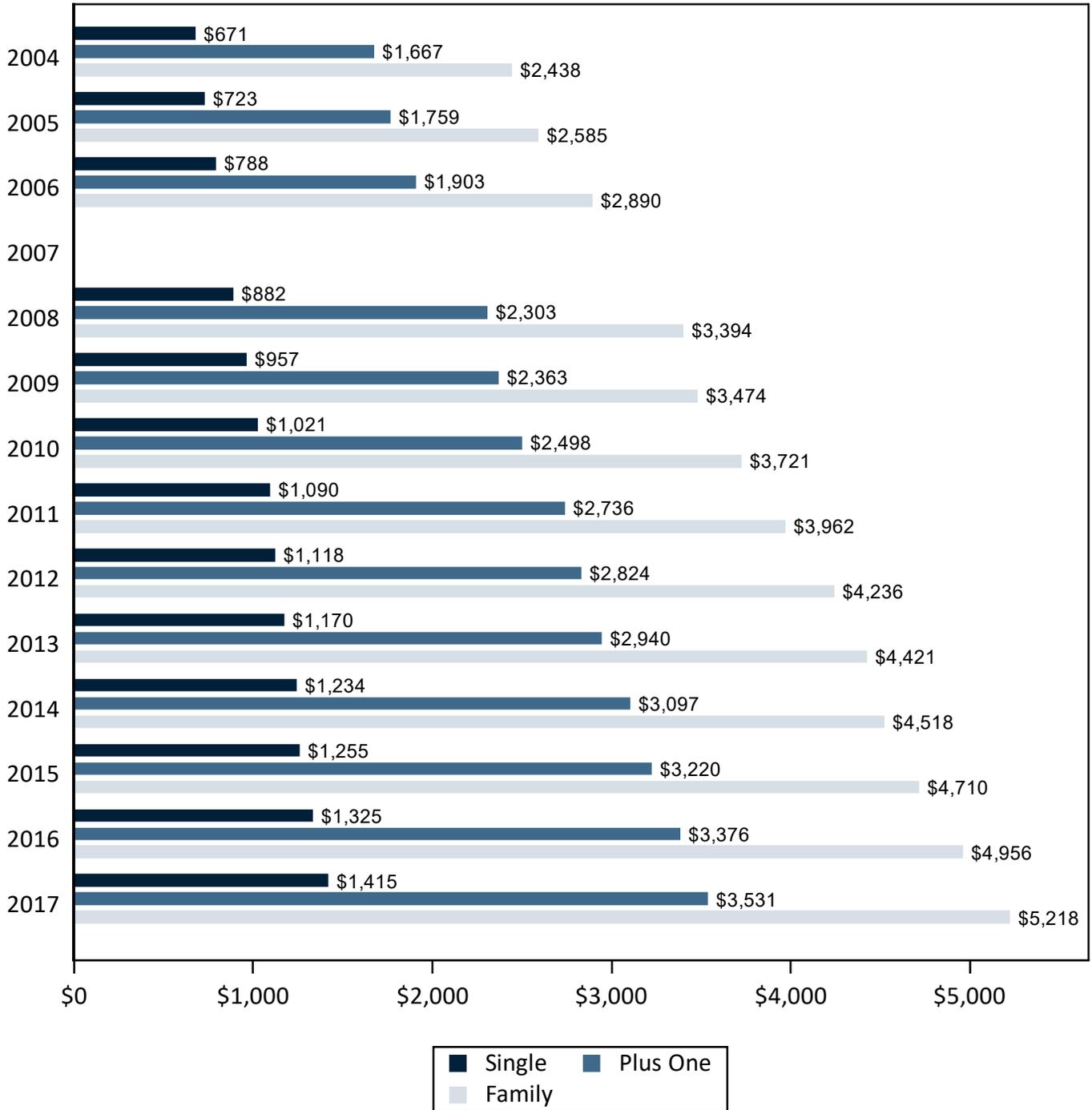
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.2

Average annual employee contribution (in dollars) for single, employee-plus-one, and family coverage, 2004-2017



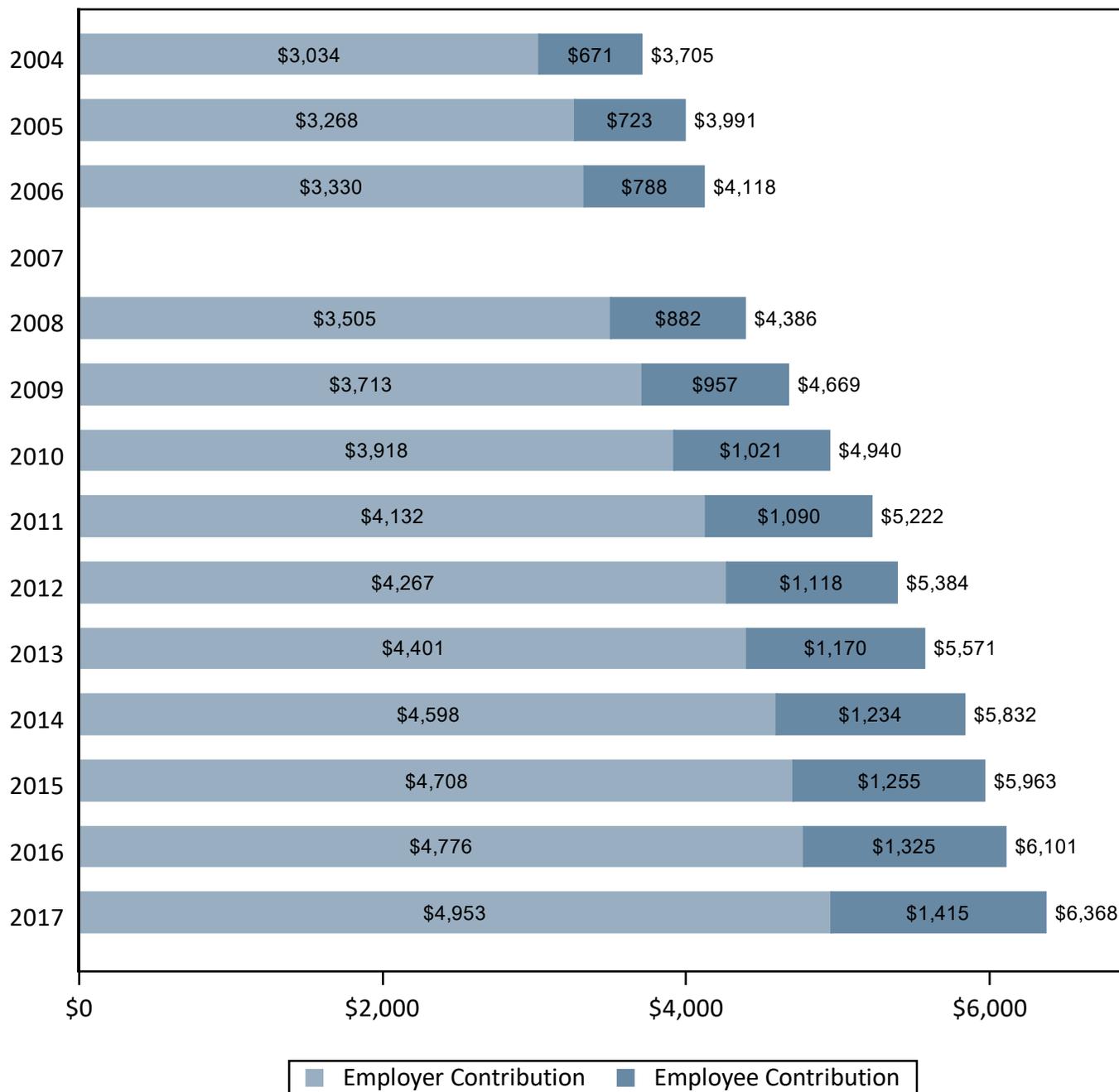
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.3

Average annual employee contribution, employer contribution, and total premium for single coverage, 2004-2017



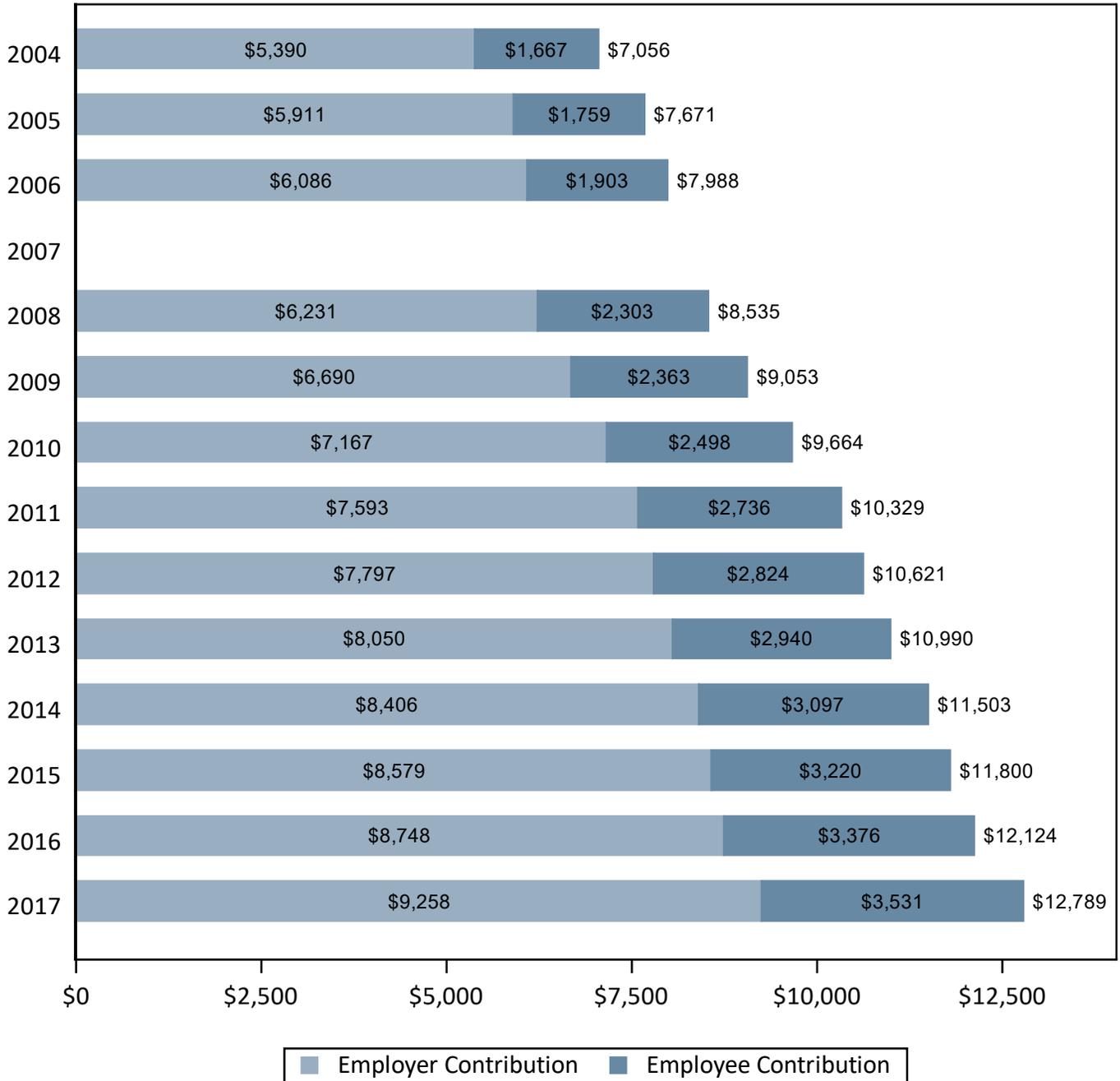
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. The sum of employee and employer contributions may not exactly equal the total premium due to rounding.

For data points and standard errors for this exhibit, select here.

Exhibit 4.4

Average annual employee contribution, employer contribution, and total premium for employee-plus-one coverage, 2004-2017



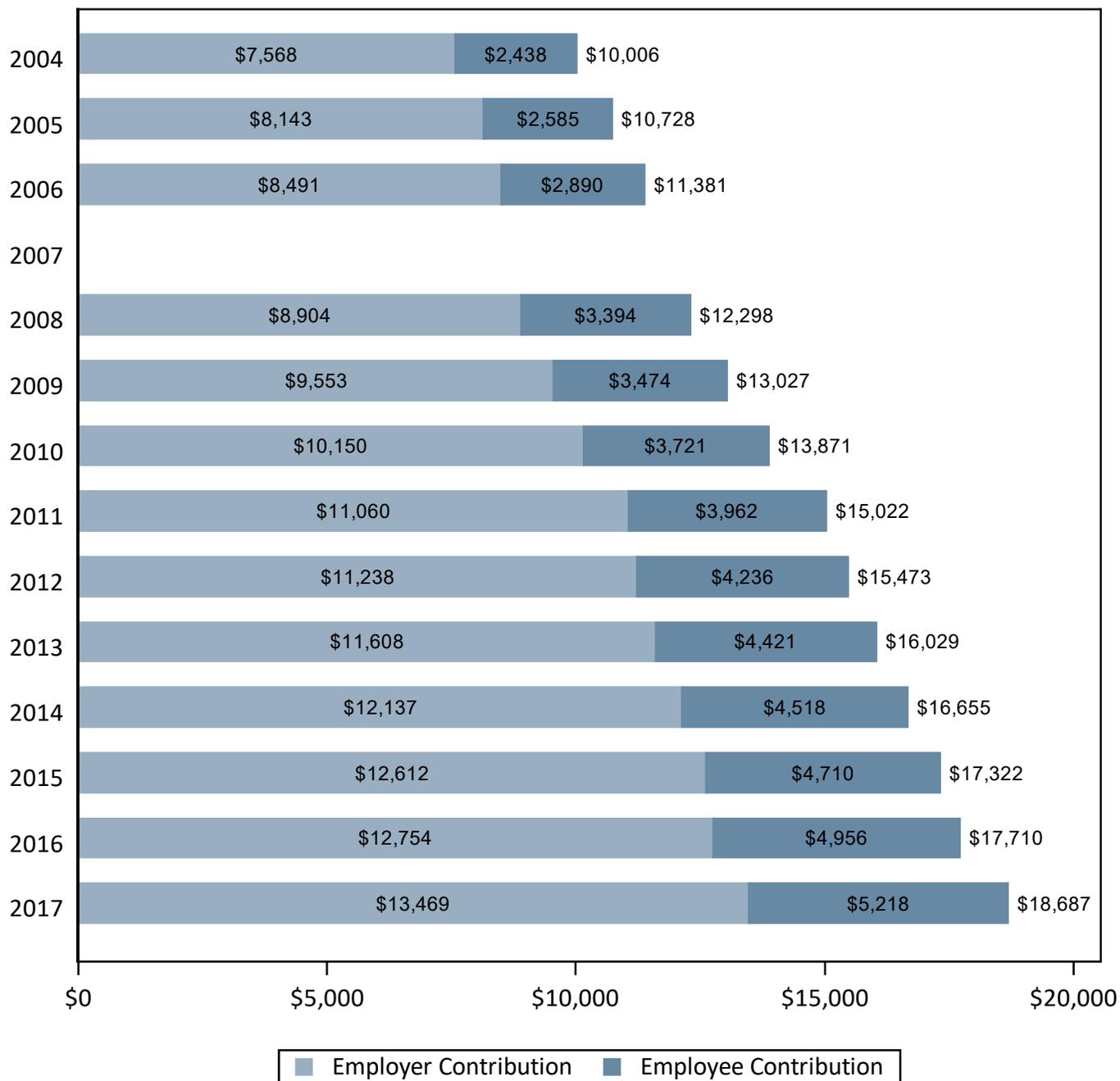
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. The sum of employee and employer contributions may not exactly equal the total premium due to rounding.

For data points and standard errors for this exhibit, select here.

Exhibit 4.5

Average annual employee contribution, employer contribution, and total premium for family coverage, 2004-2017



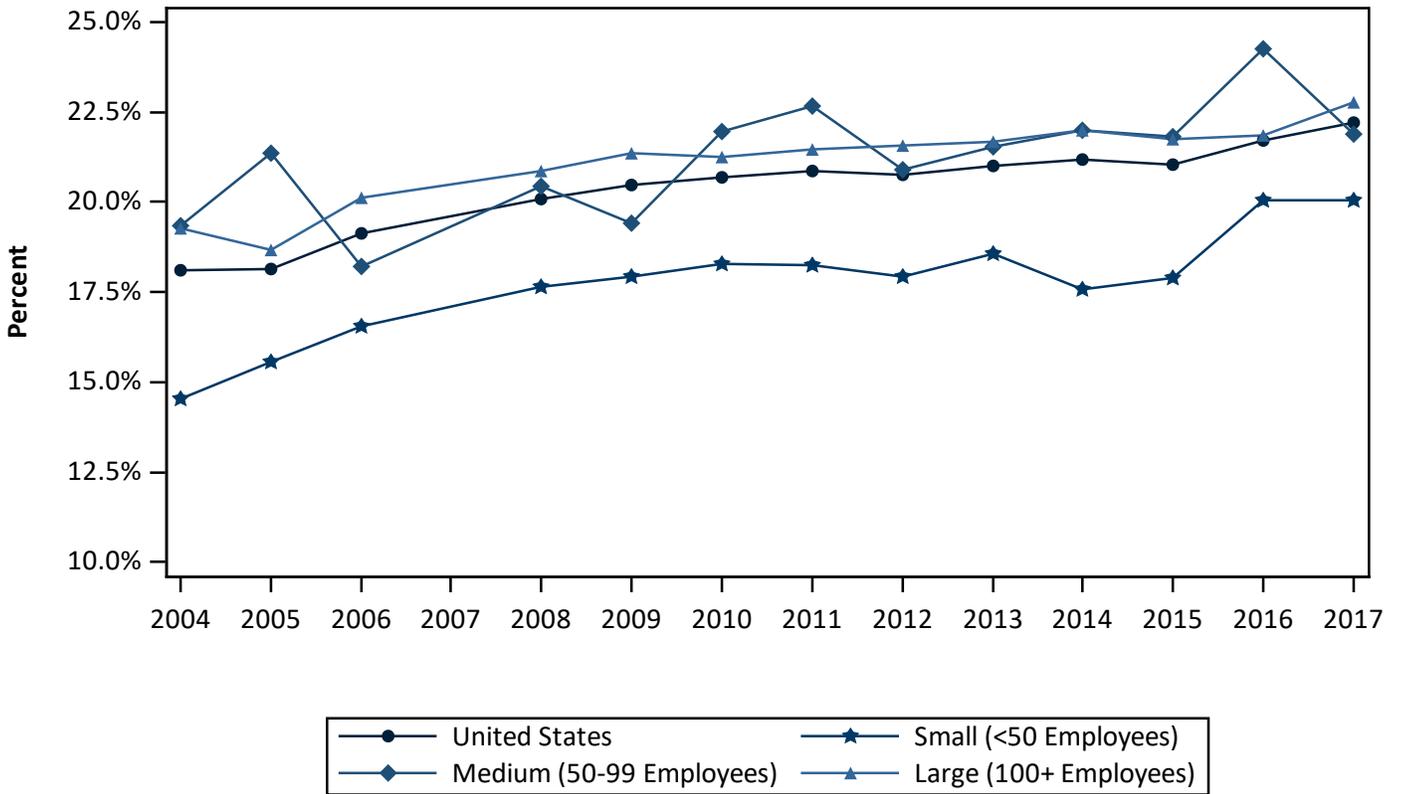
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. The sum of employee and employer contributions may not exactly equal the total premium due to rounding.

For data points and standard errors for this exhibit, select [here](#).

Exhibit 4.6

Average percentage of premium contributed by employees for single coverage, by firm size, 2004-2017



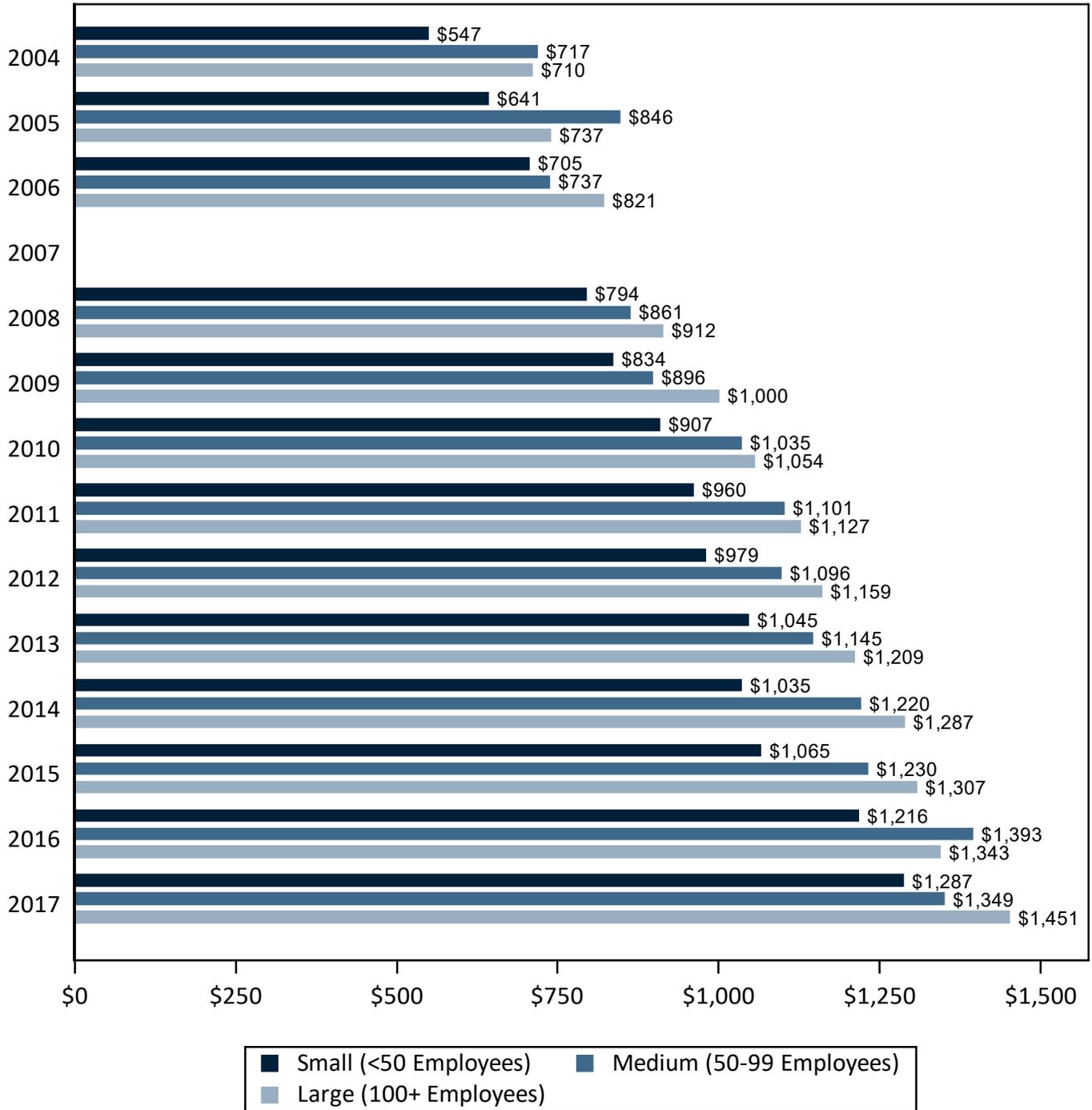
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.6													
Average percentage of premium contributed by employees for single coverage, by firm size, 2004-2017													
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	18.1%	18.1%	19.1%	20.1%	20.5%	20.7%	20.9%	20.8%	21.0%	21.2%	21.1%	21.7%	22.2%
<50	14.5%	15.5%	16.5%	17.6%	17.9%	18.3%	18.3%	17.9%	18.6%	17.6%	17.9%	20.0%	20.0%
50-99	19.3%	21.4%	18.2%	20.4%	19.4%	22.0%	22.7%	20.9%	21.5%	22.0%	21.8%	24.3%	21.9%
100+	19.3%	18.7%	20.1%	20.9%	21.4%	21.3%	21.5%	21.6%	21.7%	22.0%	21.8%	21.9%	22.8%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 4.7

Average annual employee contribution (in dollars) for single coverage, by firm size, 2004-2017



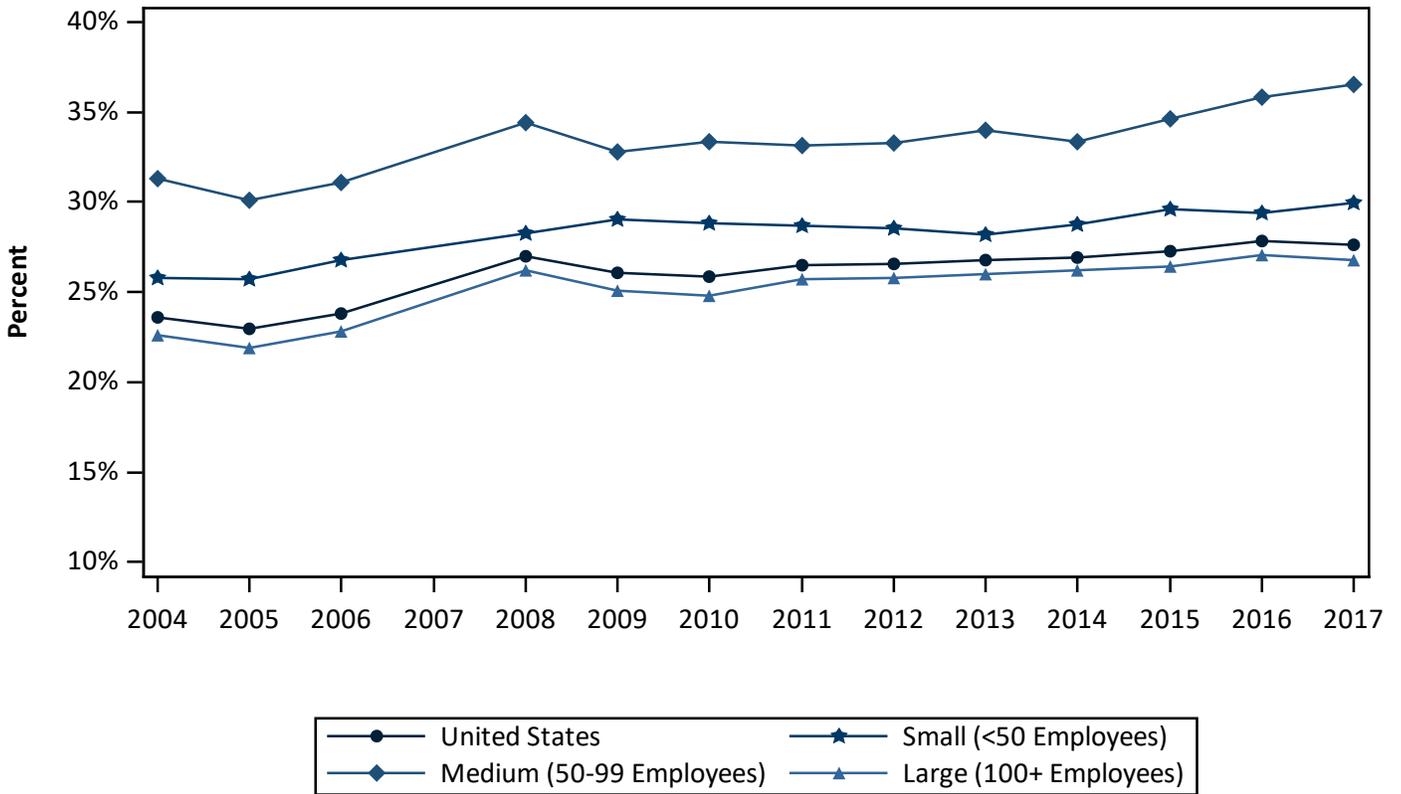
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.8

Average percentage of premium contributed by employees for employee-plus-one coverage, by firm size, 2004-2017



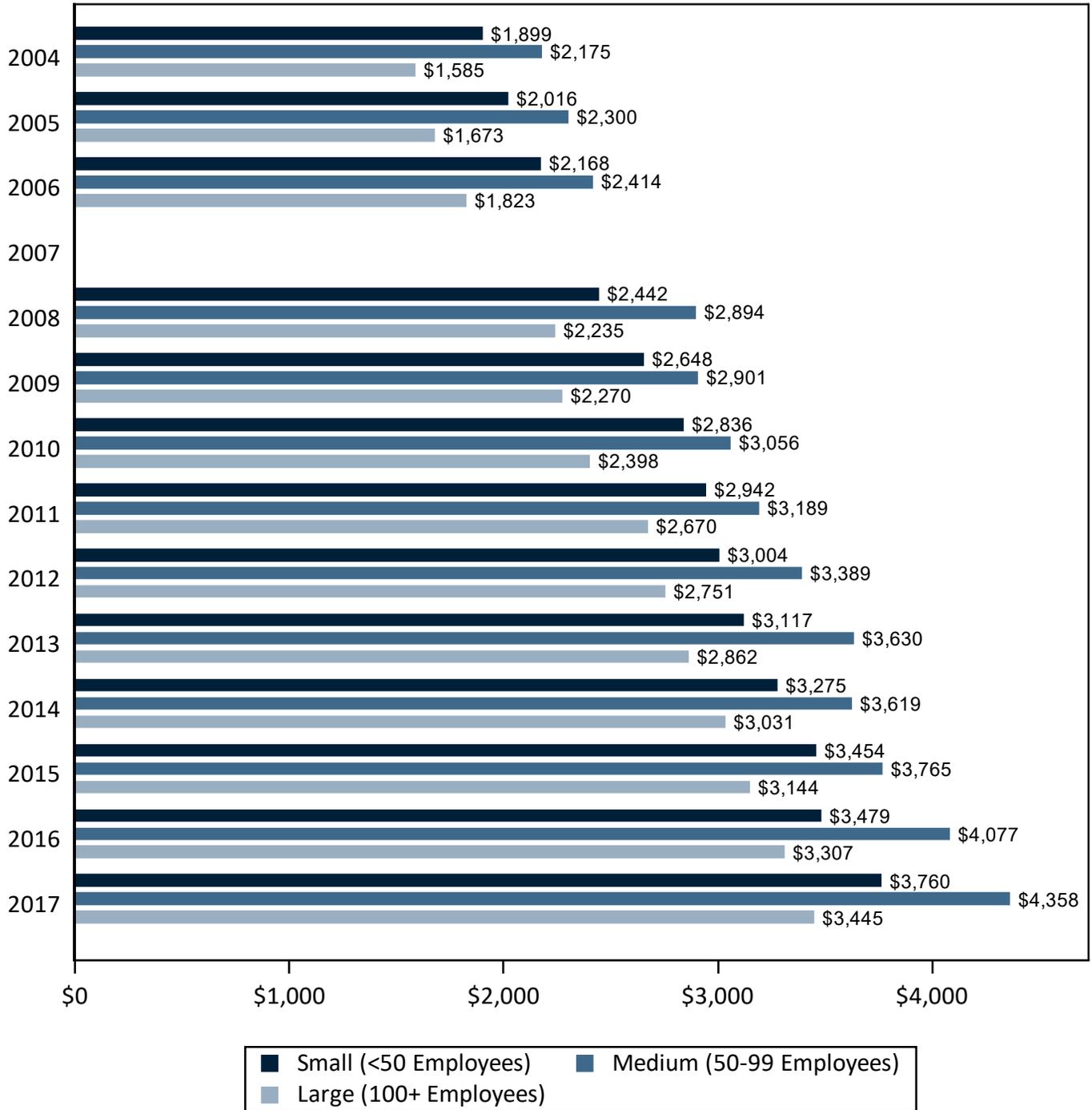
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.8													
Average percentage of premium contributed by employees for employee-plus-one coverage, by firm size, 2004-2017													
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	23.6%	22.9%	23.8%	27.0%	26.1%	25.8%	26.5%	26.6%	26.7%	26.9%	27.3%	27.8%	27.6%
<50	25.8%	25.7%	26.7%	28.3%	29.0%	28.8%	28.7%	28.5%	28.2%	28.8%	29.6%	29.4%	29.9%
50-99	31.3%	30.1%	31.1%	34.4%	32.8%	33.3%	33.2%	33.3%	34.0%	33.4%	34.6%	35.8%	36.5%
100+	22.6%	21.9%	22.8%	26.2%	25.1%	24.8%	25.7%	25.8%	26.0%	26.2%	26.4%	27.0%	26.7%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 4.9

Average annual employee contribution (in dollars) for employee-plus-one coverage, by firm size, 2004-2017



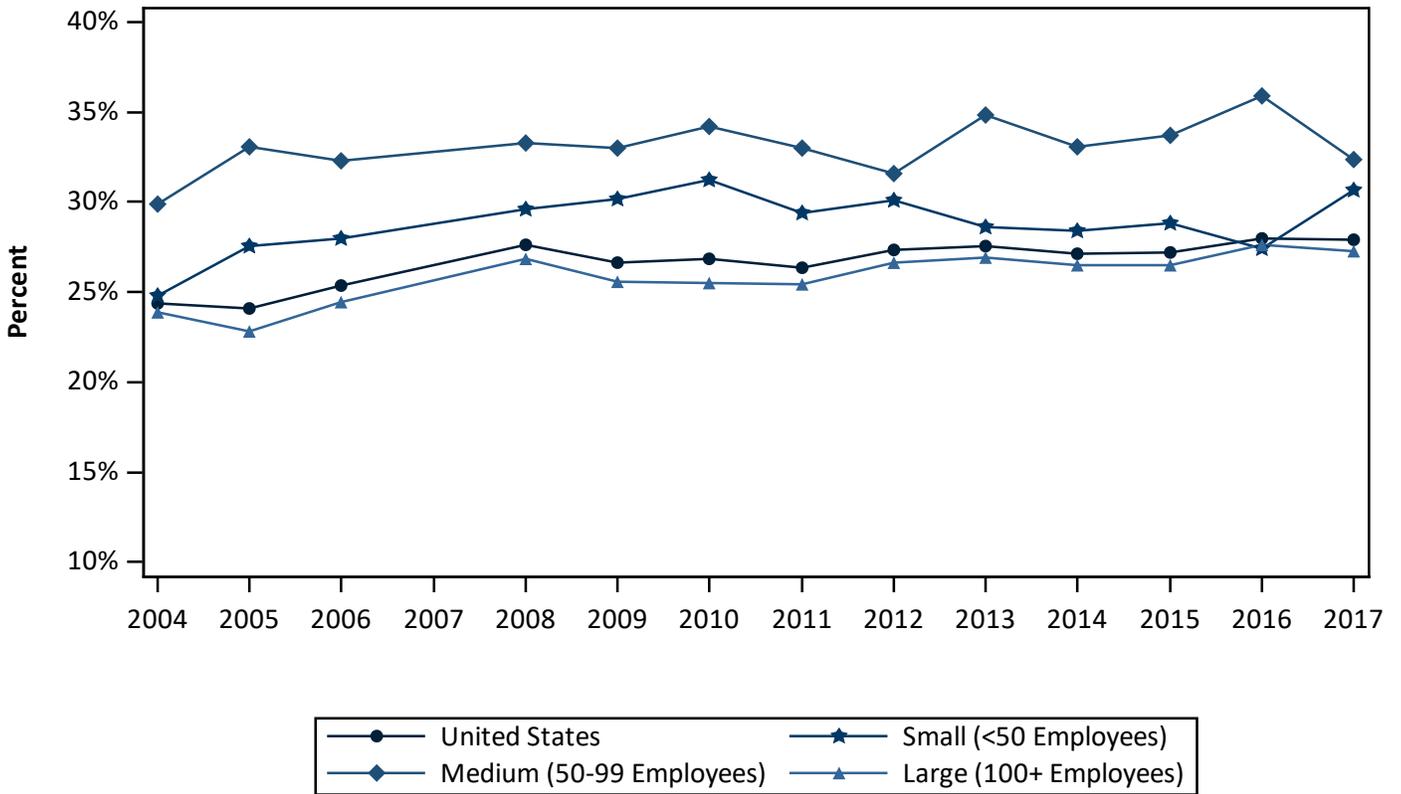
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.10

Average percentage of premium contributed by employees for family coverage, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.10

Average percentage of premium contributed by employees for family coverage, by firm size, 2004-2017

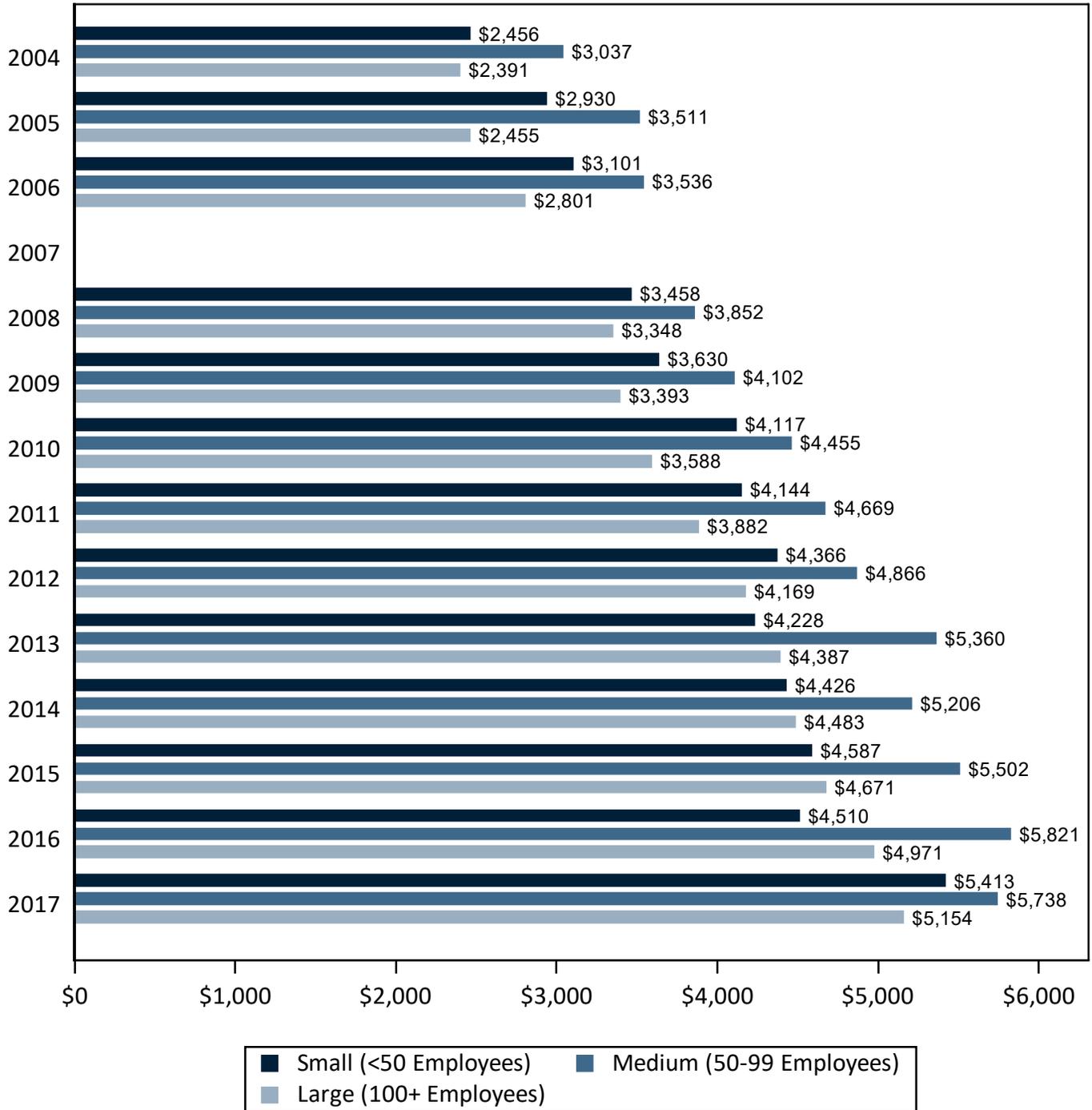
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	24.4%	24.1%	25.4%	27.6%	26.7%	26.8%	26.4%	27.4%	27.6%	27.1%	27.2%	28.0%	27.9%
<50	24.8%	27.6%	28.0%	29.6%	30.1%	31.3%	29.4%	30.1%	28.6%	28.4%	28.8%	27.4%	30.7%
50-99	29.9%	33.1%	32.3%	33.3%	33.0%	34.2%	33.0%	31.6%	34.9%	33.1%	33.7%	35.9%	32.4%
100+	23.9%	22.8%	24.4%	26.9%	25.6%	25.5%	25.5%	26.7%	26.9%	26.5%	26.5%	27.6%	27.3%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.11
Average annual employee contribution (in dollars) for family coverage, by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

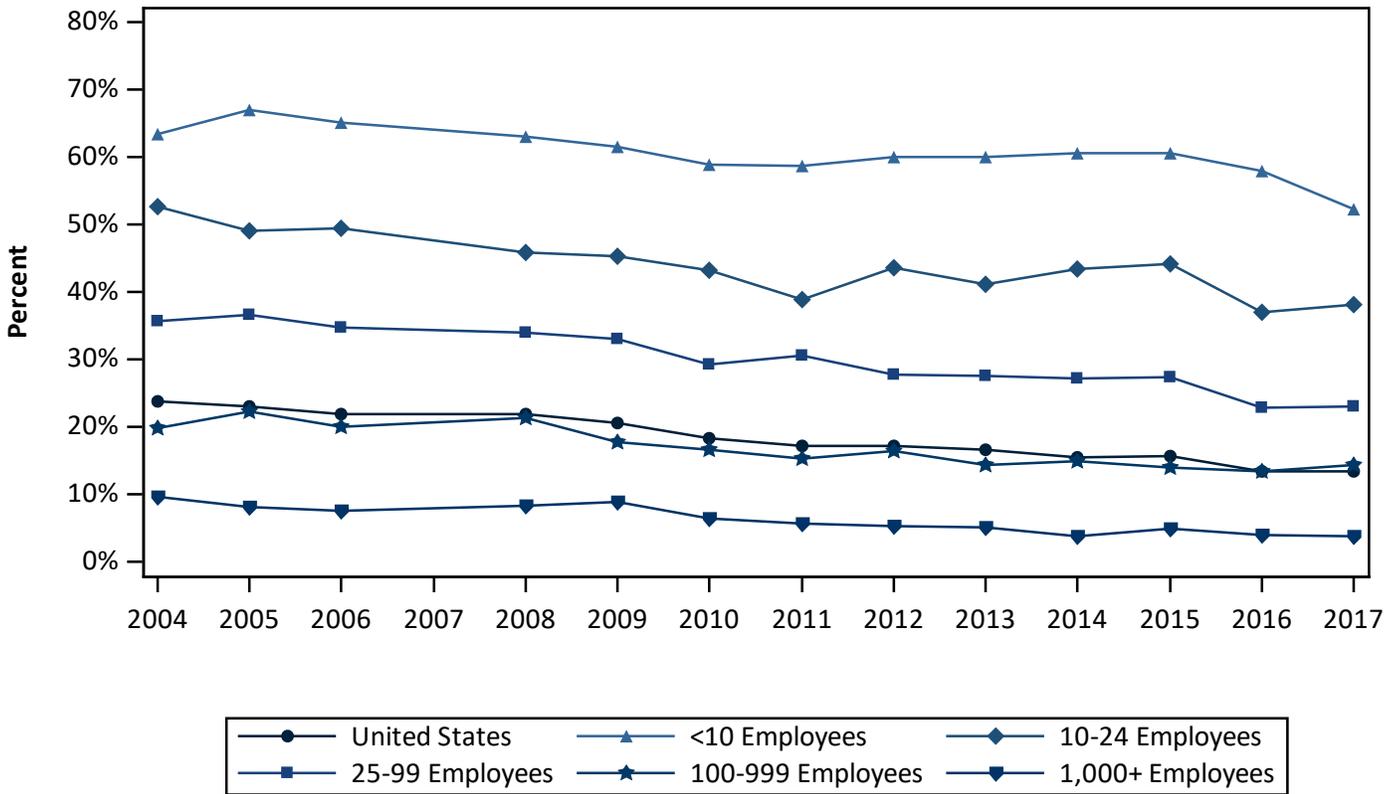
For data points and standard errors for this exhibit, select here.

Exhibit 4.12			
Average percentage of premium contributed by employees for single, employee-plus-one, and family coverage, by firm size, 2017			
Number of Employees	Single	Employee-Plus-One	Family
United States	22.2%	27.6%	27.9%
Firm size in 3 categories			
<50	20.0%	29.9%	30.7%
50-99	21.9%	36.5%	32.4%
100+	22.8%	26.7%	27.3%
Firm size in 5 categories			
<10	17.1%	22.4%	22.5%
10-24	20.9%	32.8%	32.6%
25-99	21.8%	35.3%	34.1%
100-999	22.2%	30.1%	29.7%
1,000+	23.0%	25.7%	26.6%
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.			
For data points and standard errors for this exhibit, select here.			

Exhibit 4.13			
Average premium (in dollars) contributed by employees for single, employee-plus-one, and family coverage, by firm size, 2017			
Number of Employees	Single	Employee-Plus-One	Family
United States	\$1,415	\$3,531	\$5,218
Firm size in 3 categories			
<50	\$1,287	\$3,760	\$5,413
50-99	\$1,349	\$4,358	\$5,738
100+	\$1,451	\$3,445	\$5,154
Firm size in 5 categories			
<10	\$1,143	\$2,965	\$4,004
10-24	\$1,324	\$4,050	\$5,789
25-99	\$1,356	\$4,253	\$5,996
100-999	\$1,390	\$3,835	\$5,458
1,000+	\$1,477	\$3,319	\$5,063
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.			
For data points and standard errors for this exhibit, select here.			

Exhibit 4.14

Percentage of single coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.14

Percentage of single coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	23.7%	23.1%	21.9%	22.0%	20.6%	18.3%	17.3%	17.1%	16.6%	15.6%	15.8%	13.5%	13.4%
<10	63.4%	67.0%	65.1%	63.0%	61.4%	58.8%	58.6%	60.0%	59.9%	60.6%	60.5%	57.9%	52.3%
10-24	52.7%	49.1%	49.4%	46.0%	45.4%	43.3%	38.9%	43.5%	41.2%	43.5%	44.2%	36.9%	38.2%
25-99	35.7%	36.7%	34.7%	34.0%	33.1%	29.2%	30.6%	27.7%	27.6%	27.2%	27.5%	22.9%	23.1%
100-999	19.9%	22.2%	20.0%	21.4%	17.7%	16.7%	15.2%	16.5%	14.4%	14.9%	13.9%	13.4%	14.3%
1,000+	9.7%	8.2%	7.7%	8.3%	8.9%	6.5%	5.7%	5.3%	5.2%	3.7%	4.9%	4.1%	3.9%

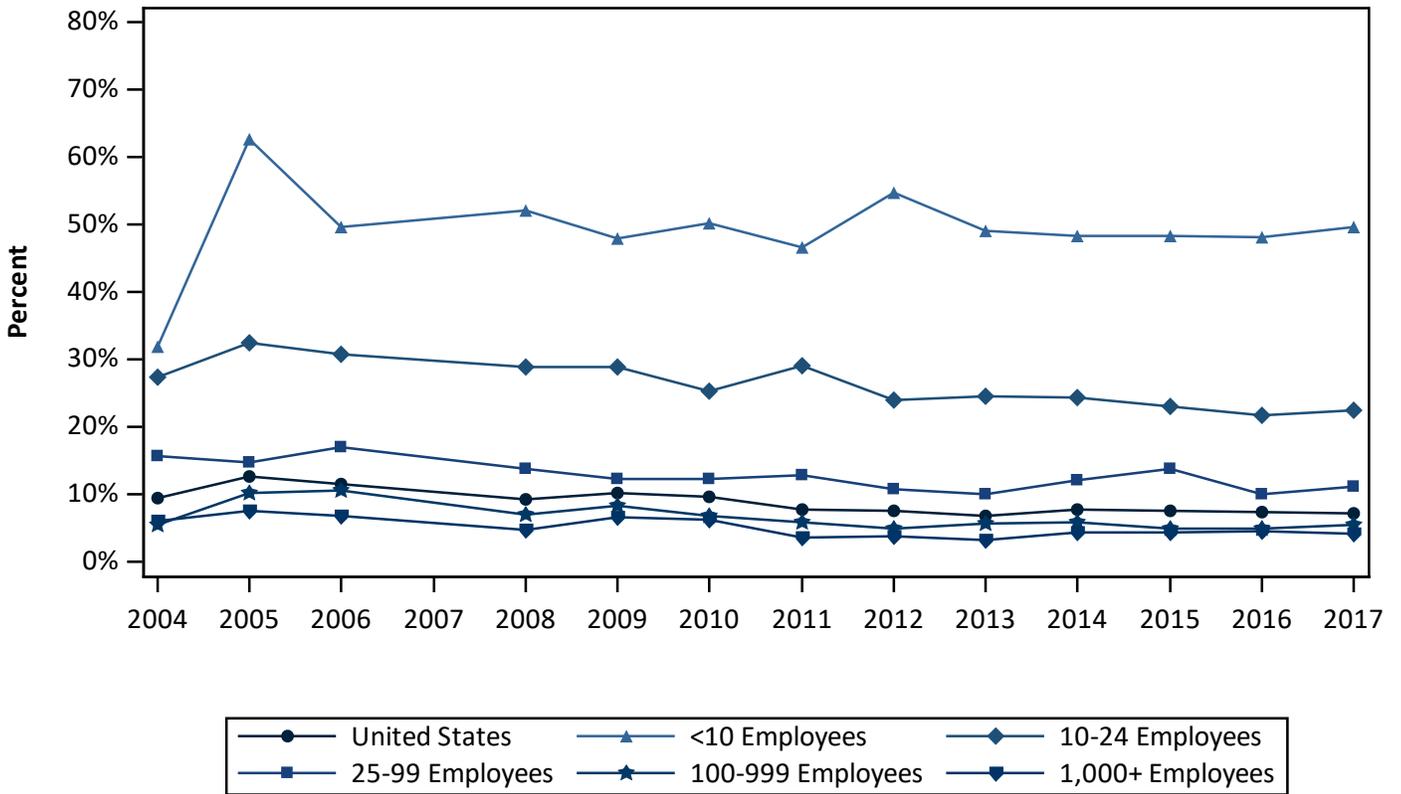
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.15

Percentage of employee-plus-one coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.15

Percentage of employee-plus-one coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	9.5%	12.7%	11.6%	9.4%	10.3%	9.8%	7.9%	7.7%	6.9%	7.8%	7.6%	7.4%	7.3%
<10	31.8%	62.7%	49.5%	52.1%	47.9%	50.1%	46.6%	54.7%	49.0%	48.3%	48.3%	48.2%	49.7%
10-24	27.4%	32.5%	30.8%	29.0%	28.8%	25.3%	29.1%	24.0%	24.5%	24.3%	23.1%	21.8%	22.4%
25-99	15.6%	14.7%	17.1%	13.8%	12.3%	12.4%	12.8%	10.9%	10.0%	12.1%	13.9%	10.1%	11.2%
100-999	5.6%	10.2%	10.5%	7.1%	8.3%	6.8%	5.9%	5.0%	5.6%	5.8%	4.9%	5.0%	5.5%
1,000+	6.1%	7.6%	6.9%	4.8%	6.6%	6.2%	3.7%	3.7%	3.3%	4.4%	4.3%	4.6%	4.3%

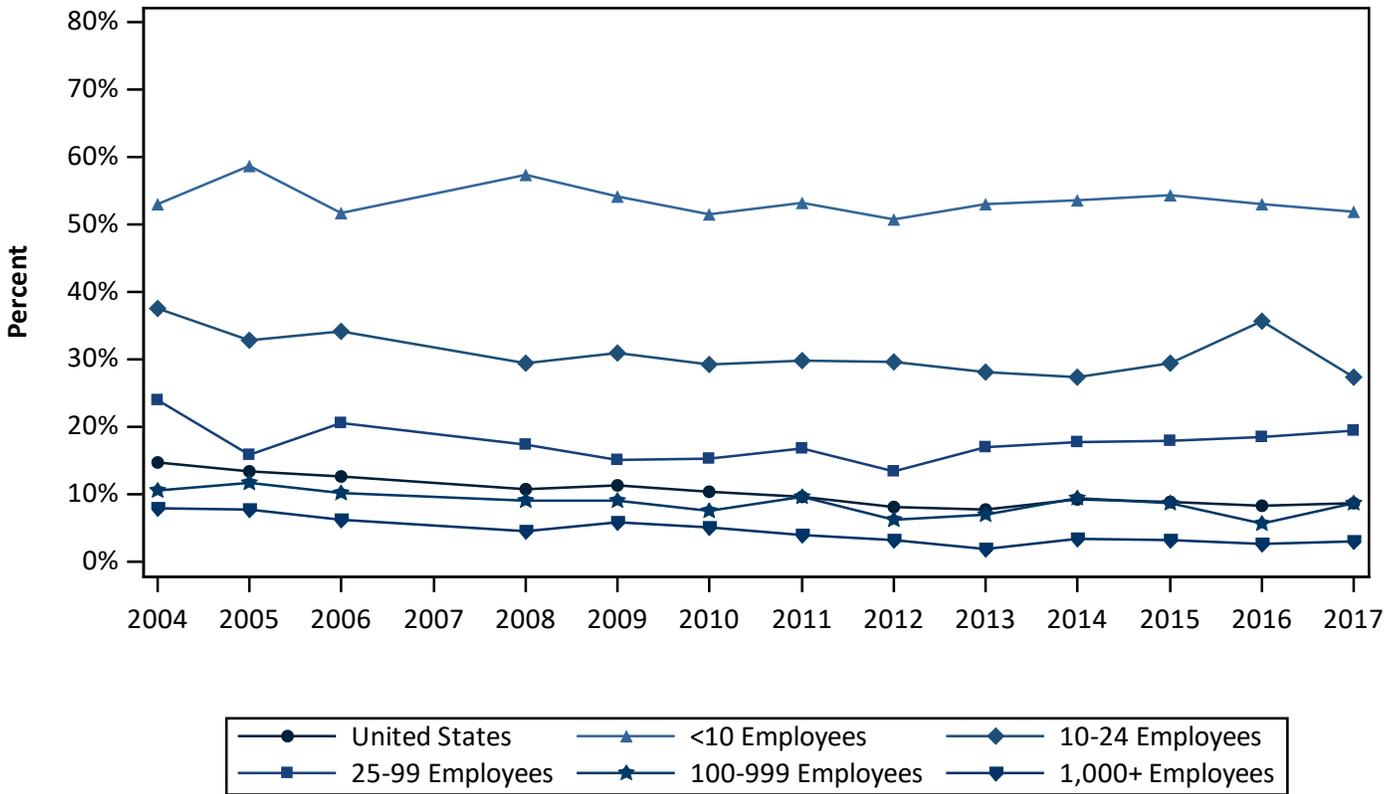
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.16

Percentage of family coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 4.16

Percentage of family coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	14.7%	13.4%	12.6%	10.7%	11.4%	10.4%	9.7%	8.1%	7.9%	9.2%	8.9%	8.3%	8.8%
<10	53.0%	58.7%	51.7%	57.3%	54.2%	51.4%	53.2%	50.9%	53.0%	53.6%	54.4%	52.9%	52.0%
10-24	37.5%	32.9%	34.1%	29.5%	31.0%	29.2%	29.8%	29.6%	28.2%	27.4%	29.5%	35.8%	27.3%
25-99	24.0%	15.9%	20.5%	17.4%	15.1%	15.3%	16.9%	13.4%	17.0%	17.7%	17.9%	18.6%	19.5%
100-999	10.7%	11.7%	10.3%	9.0%	9.1%	7.6%	9.6%	6.3%	7.0%	9.6%	8.7%	5.8%	8.7%
1,000+	7.9%	7.7%	6.3%	4.6%	5.9%	5.1%	4.0%	3.3%	2.0%	3.4%	3.3%	2.7%	3.1%

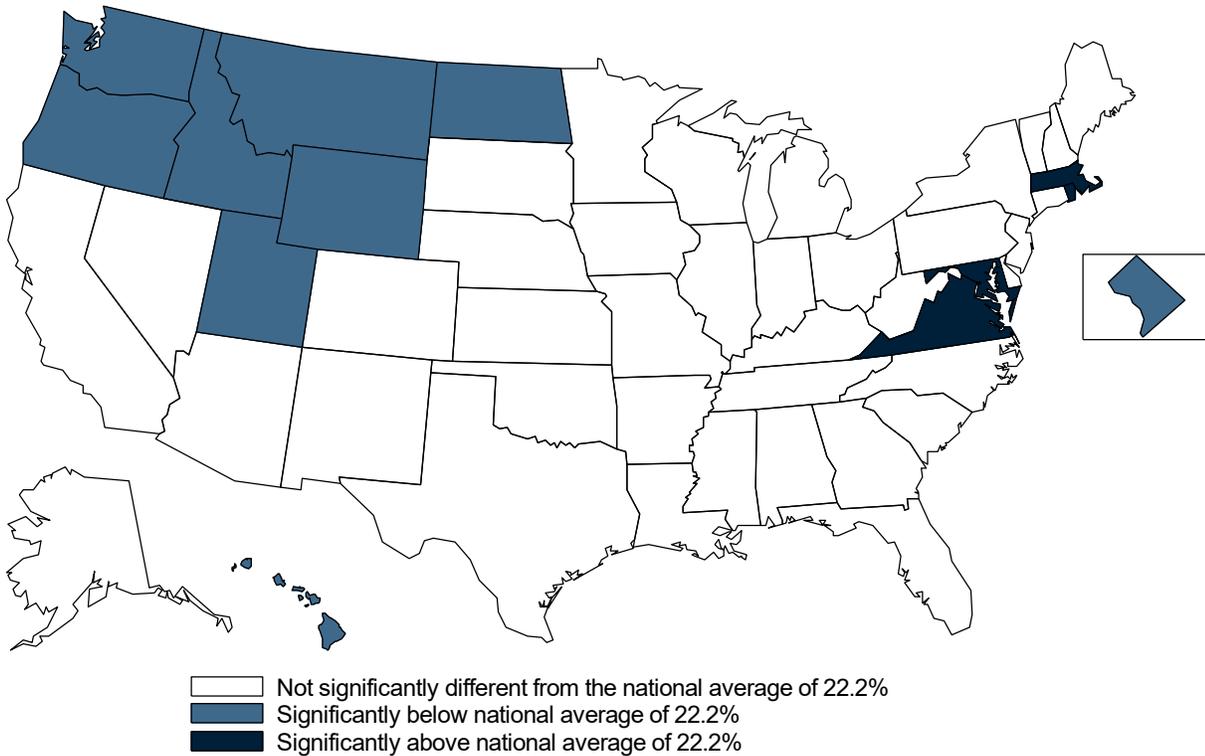
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 4.17

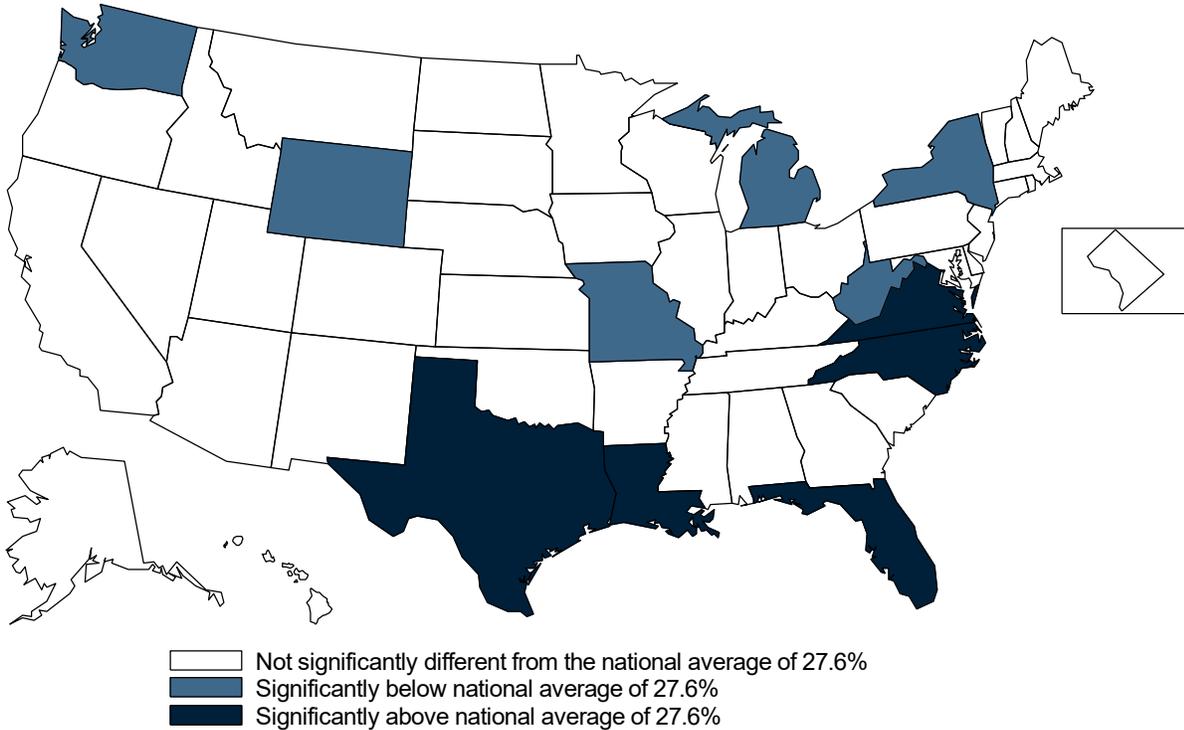
Average percentage of premium contributed by employees for single coverage, by State, 2017



Alabama	26.2%	Kentucky	23.8%	North Dakota	18.6%*
Alaska	19.0%	Louisiana	24.3%	Ohio	22.2%
Arizona	24.5%	Maine	21.4%	Oklahoma	22.2%
Arkansas	21.9%	Maryland	26.0%*	Oregon	16.8%*
California	22.8%	Massachusetts	24.9%*	Pennsylvania	23.7%
Colorado	21.3%	Michigan	21.7%	Rhode Island	24.2%*
Connecticut	23.8%	Minnesota	21.7%	South Carolina	22.0%
Delaware	21.8%	Mississippi	22.3%	South Dakota	22.1%
District of Columbia	19.0%*	Missouri	20.7%	Tennessee	23.8%
Florida	23.8%	Montana	16.6%*	Texas	21.8%
Georgia	22.2%	Nebraska	21.4%	Utah	19.6%*
Hawaii	11.2%*	Nevada	21.8%	Vermont	22.6%
Idaho	15.0%*	New Hampshire	24.7%	Virginia	25.8%*
Illinois	21.3%	New Jersey	22.5%	Washington	13.9%*
Indiana	23.7%	New Mexico	21.3%	West Virginia	20.6%
Iowa	22.1%	New York	21.5%	Wisconsin	22.7%
Kansas	20.0%	North Carolina	21.9%	Wyoming	15.9%*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.
Note: * Indicates the estimate is statistically different from the national average of 22.2 percent at $p < 0.05$.
For data points and standard errors for this exhibit, select here.

Exhibit 4.18
Average percentage of premium contributed by employees for employee-plus-one coverage,
by State, 2017



Alabama	27.0%	Kentucky	25.1%	North Dakota	26.1%
Alaska	28.8%	Louisiana	34.2%*	Ohio	25.2%
Arizona	31.0%	Maine	26.2%	Oklahoma	33.1%
Arkansas	29.8%	Maryland	31.5%	Oregon	26.2%
California	28.5%	Massachusetts	25.6%	Pennsylvania	26.6%
Colorado	28.1%	Michigan	20.9%*	Rhode Island	27.9%
Connecticut	26.7%	Minnesota	25.8%	South Carolina	28.5%
Delaware	26.3%	Mississippi	29.3%	South Dakota	30.0%
District of Columbia	27.5%	Missouri	22.9%*	Tennessee	29.8%
Florida	33.9%*	Montana	26.7%	Texas	30.4%*
Georgia	29.9%	Nebraska	28.5%	Utah	27.3%
Hawaii	25.1%	Nevada	31.4%	Vermont	28.0%
Idaho	25.5%	New Hampshire	30.0%	Virginia	30.9%*
Illinois	24.8%	New Jersey	26.3%	Washington	22.9%*
Indiana	26.0%	New Mexico	28.3%	West Virginia	21.4%*
Iowa	27.1%	New York	24.9%*	Wisconsin	25.9%
Kansas	25.2%	North Carolina	31.2%*	Wyoming	19.9%*

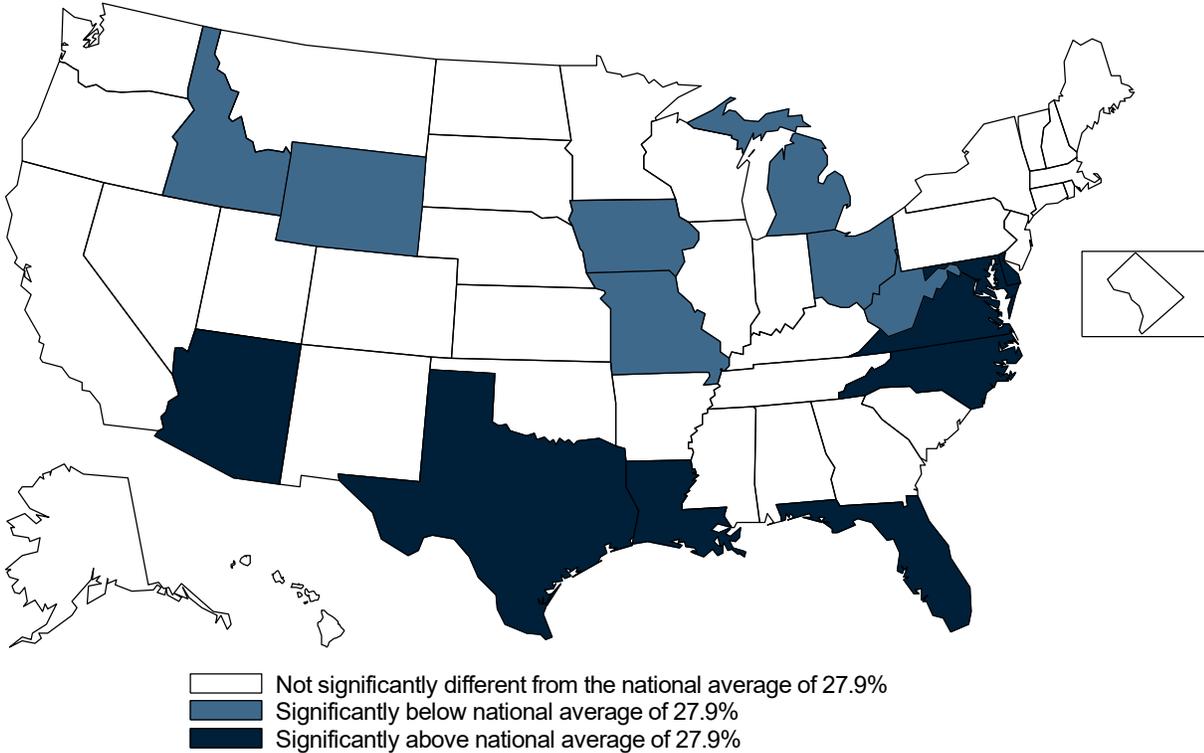
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of 27.6 percent at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 4.19

Average percentage of premium contributed by employees for family coverage, by State, 2017

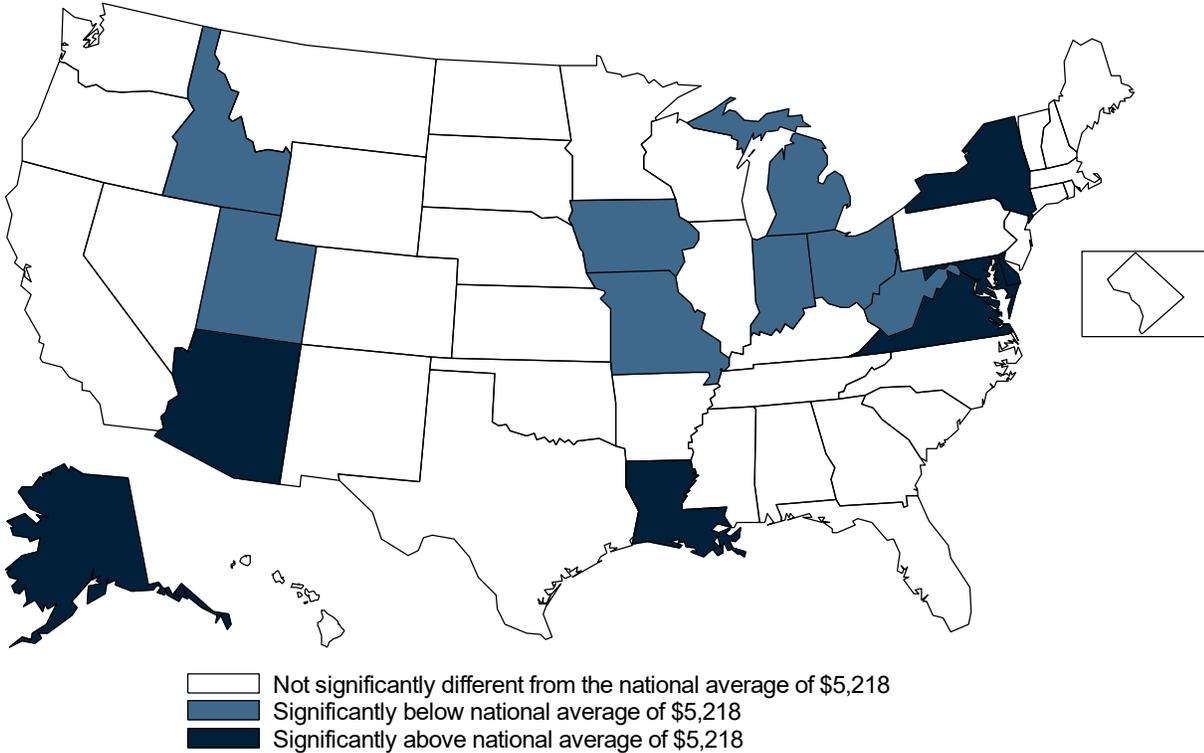


Alabama	27.4%	Kentucky	28.1%	North Dakota	26.2%
Alaska	27.9%	Louisiana	34.3%*	Ohio	23.3%*
Arizona	32.6%*	Maine	27.7%	Oklahoma	31.8%
Arkansas	28.5%	Maryland	32.0%*	Oregon	27.9%
California	28.6%	Massachusetts	26.5%	Pennsylvania	28.9%
Colorado	27.2%	Michigan	19.3%*	Rhode Island	29.2%
Connecticut	27.1%	Minnesota	27.0%	South Carolina	28.8%
Delaware	33.7%*	Mississippi	29.6%	South Dakota	32.2%
District of Columbia	28.9%	Missouri	24.8%*	Tennessee	30.1%
Florida	32.4%*	Montana	27.0%	Texas	31.8%*
Georgia	30.9%	Nebraska	26.7%	Utah	26.8%
Hawaii	25.5%	Nevada	32.1%	Vermont	26.9%
Idaho	24.9%*	New Hampshire	29.0%	Virginia	34.1%*
Illinois	23.2%	New Jersey	26.3%	Washington	23.9%
Indiana	24.9%	New Mexico	28.0%	West Virginia	18.6%*
Iowa	24.9%*	New York	27.6%	Wisconsin	25.8%
Kansas	26.6%	North Carolina	32.2%*	Wyoming	22.8%*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.
Note: * Indicates the estimate is statistically different from the national average of 27.9 percent at $p < 0.05$.
For data points and standard errors for this exhibit, select here.

Exhibit 4.22

Average annual employee contribution (in dollars) for family coverage, by State, 2017



Alabama	\$4,640	Kentucky	\$4,764	North Dakota	\$4,684
Alaska	\$6,264*	Louisiana	\$5,977*	Ohio	\$4,243*
Arizona	\$6,006*	Maine	\$4,825	Oklahoma	\$5,808
Arkansas	\$4,748	Maryland	\$6,048*	Oregon	\$5,009
California	\$5,359	Massachusetts	\$5,571	Pennsylvania	\$5,377
Colorado	\$5,267	Michigan	\$3,646*	Rhode Island	\$5,374
Connecticut	\$5,429	Minnesota	\$4,998	South Carolina	\$5,261
Delaware	\$6,533*	Mississippi	\$5,137	South Dakota	\$5,702
District of Columbia	\$6,054	Missouri	\$4,654*	Tennessee	\$5,223
Florida	\$5,568	Montana	\$4,845	Texas	\$5,809
Georgia	\$5,466	Nebraska	\$4,854	Utah	\$4,374*
Hawaii	\$4,713	Nevada	\$5,529	Vermont	\$4,996
Idaho	\$4,275*	New Hampshire	\$5,578	Virginia	\$6,233*
Illinois	\$4,557	New Jersey	\$5,431	Washington	\$4,657
Indiana	\$4,547*	New Mexico	\$5,255	West Virginia	\$3,758*
Iowa	\$4,262*	New York	\$5,878*	Wisconsin	\$4,842
Kansas	\$4,848	North Carolina	\$5,833	Wyoming	\$4,863

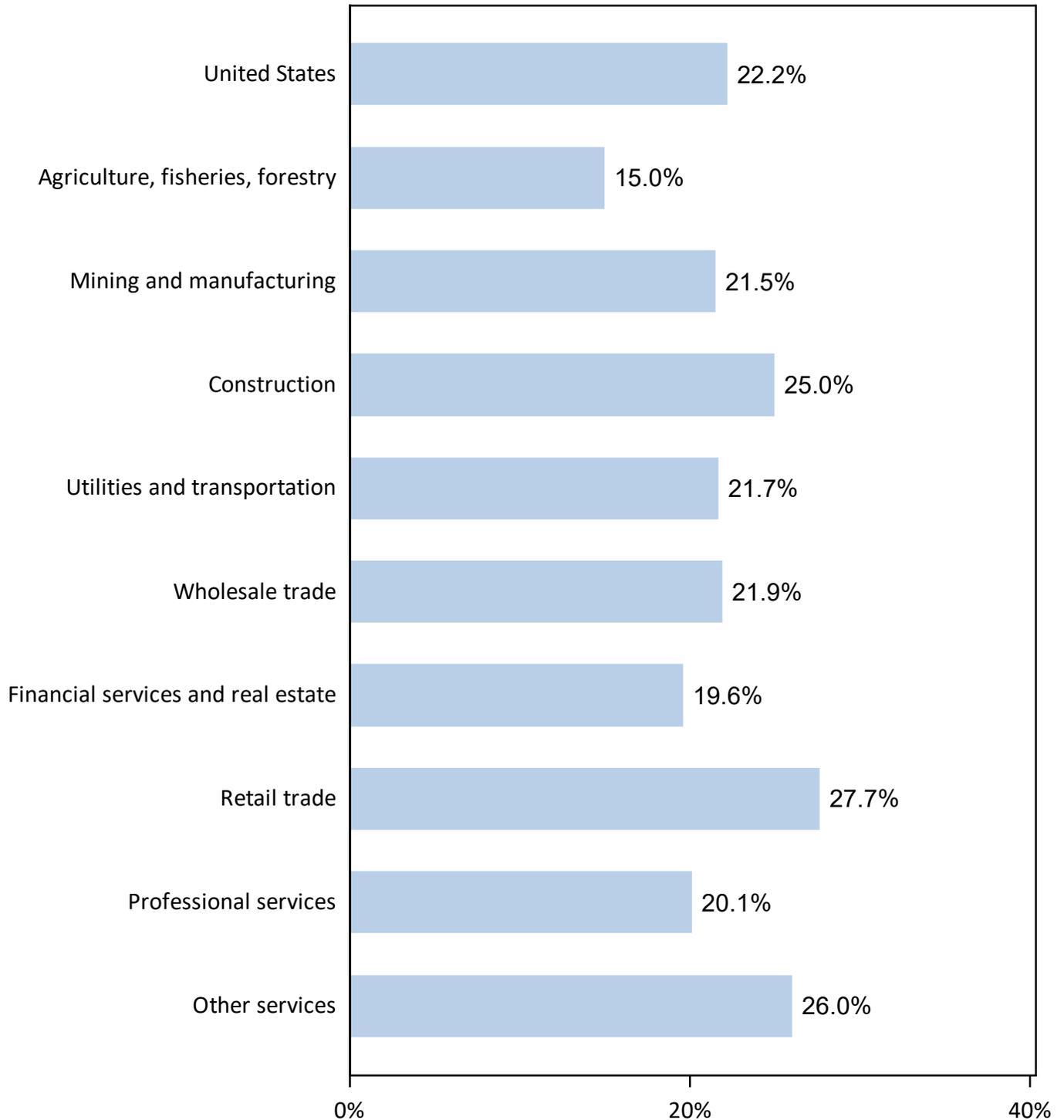
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of \$5,218 at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 4.23

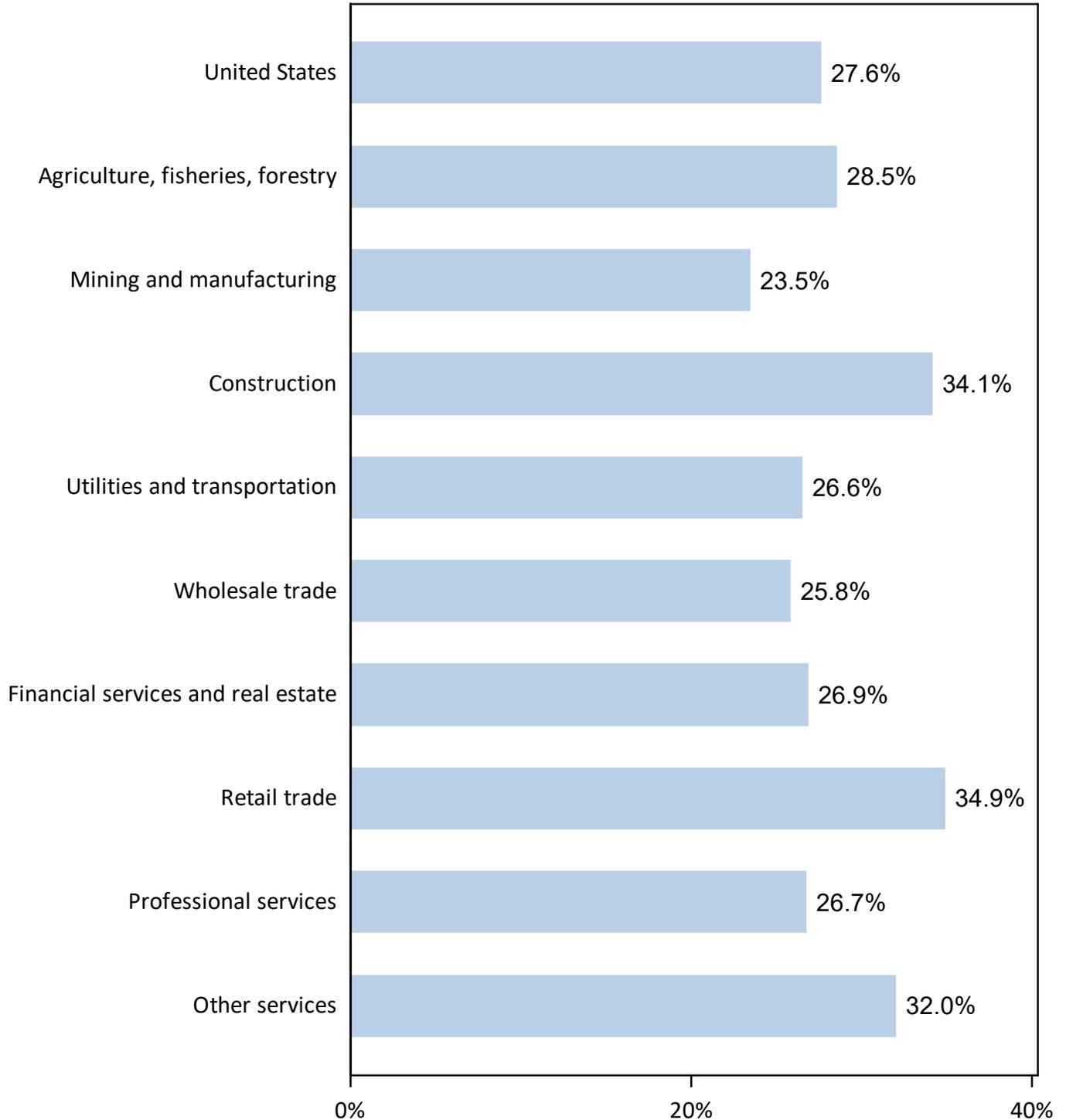
Average percentage of premium contributed by employees for single coverage, overall and by industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 4.24

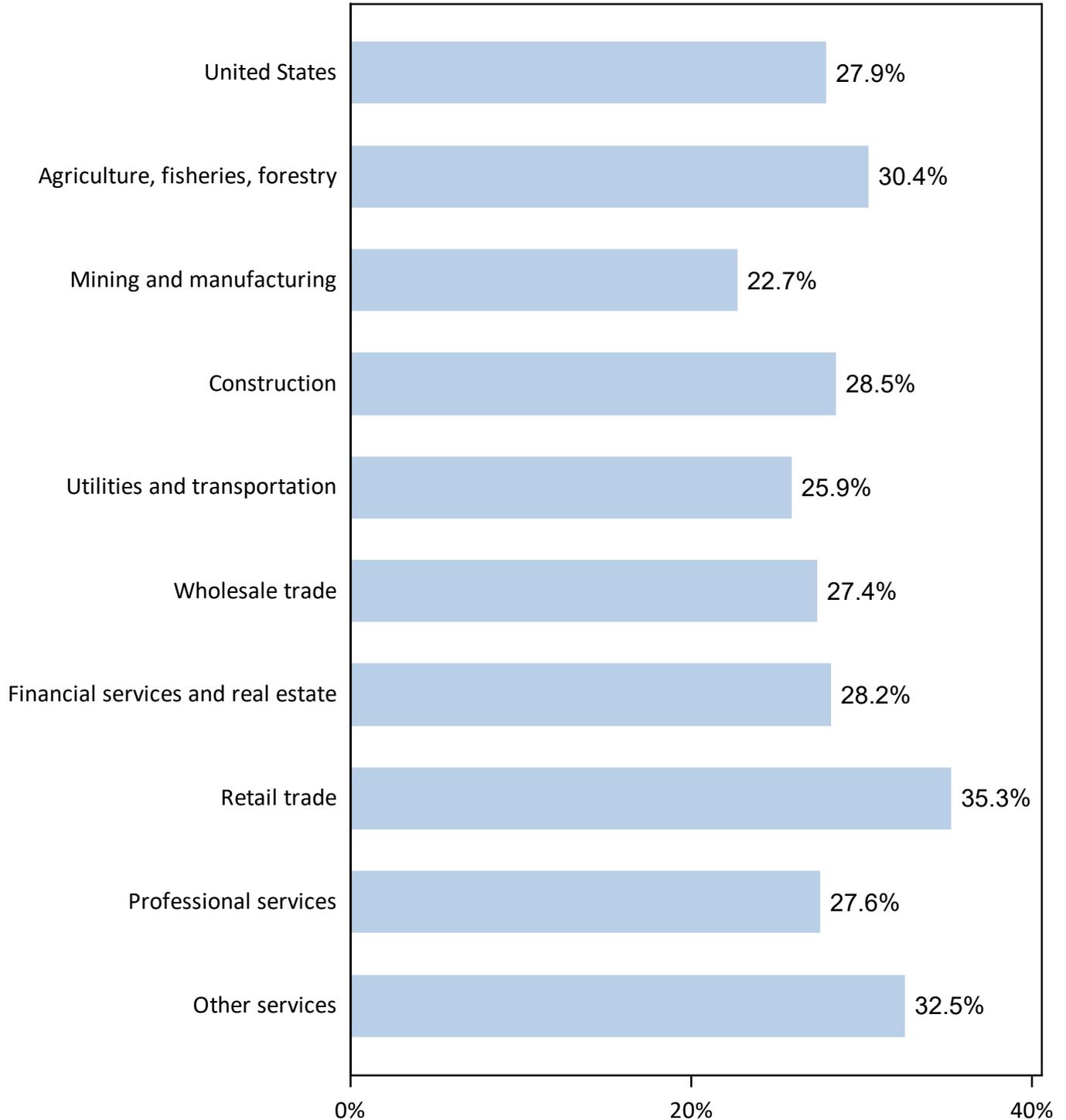
Average percentage of premium contributed by employees for employee-plus-one coverage, overall and by industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 4.25

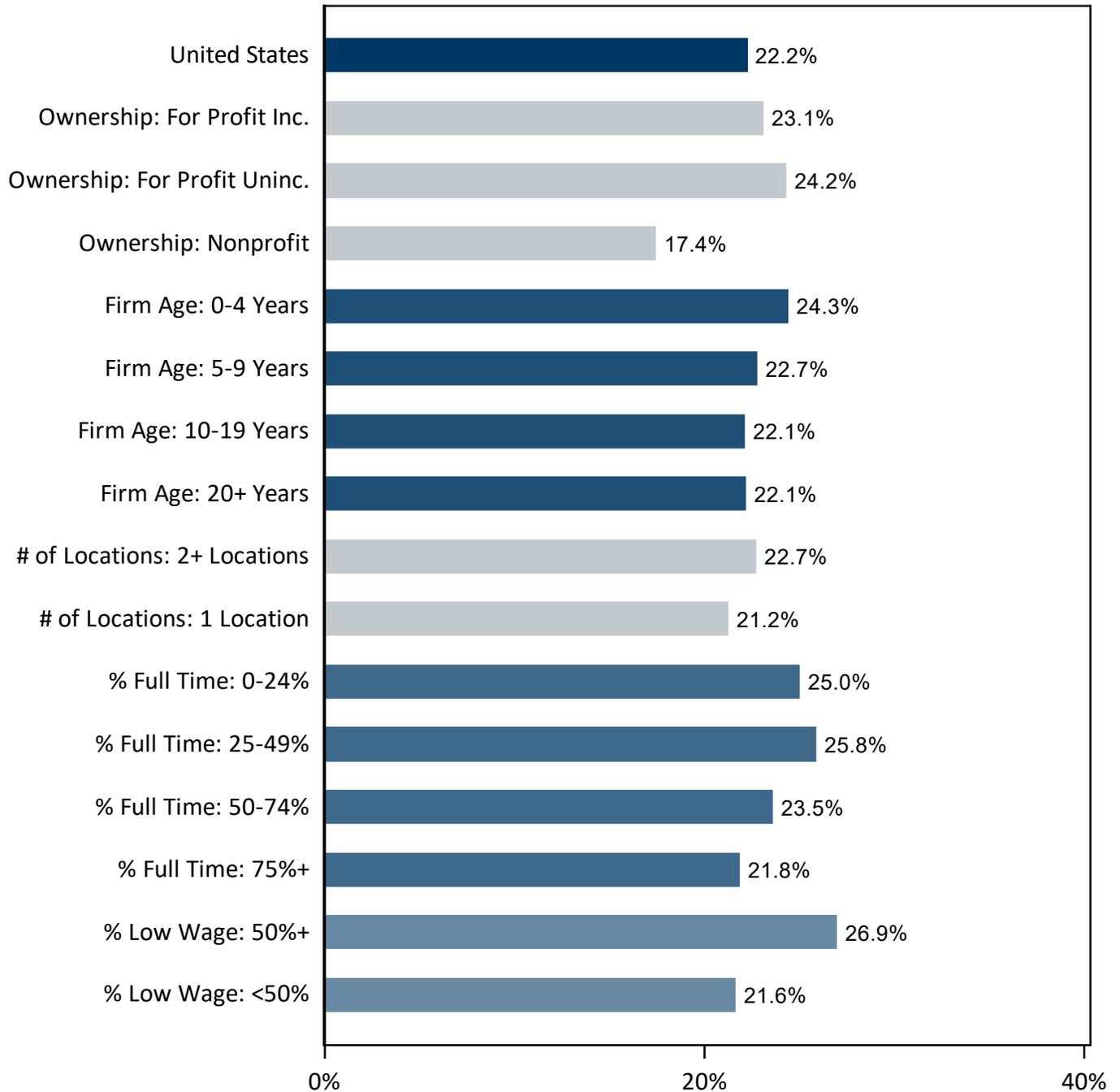
Average percentage of premium contributed by employees for family coverage, overall and by industry, 2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.
For data points and standard errors for this exhibit, select here.

Exhibit 4.26

Average percentage of premium contributed by employees for single coverage, overall and by selected characteristics, 2017



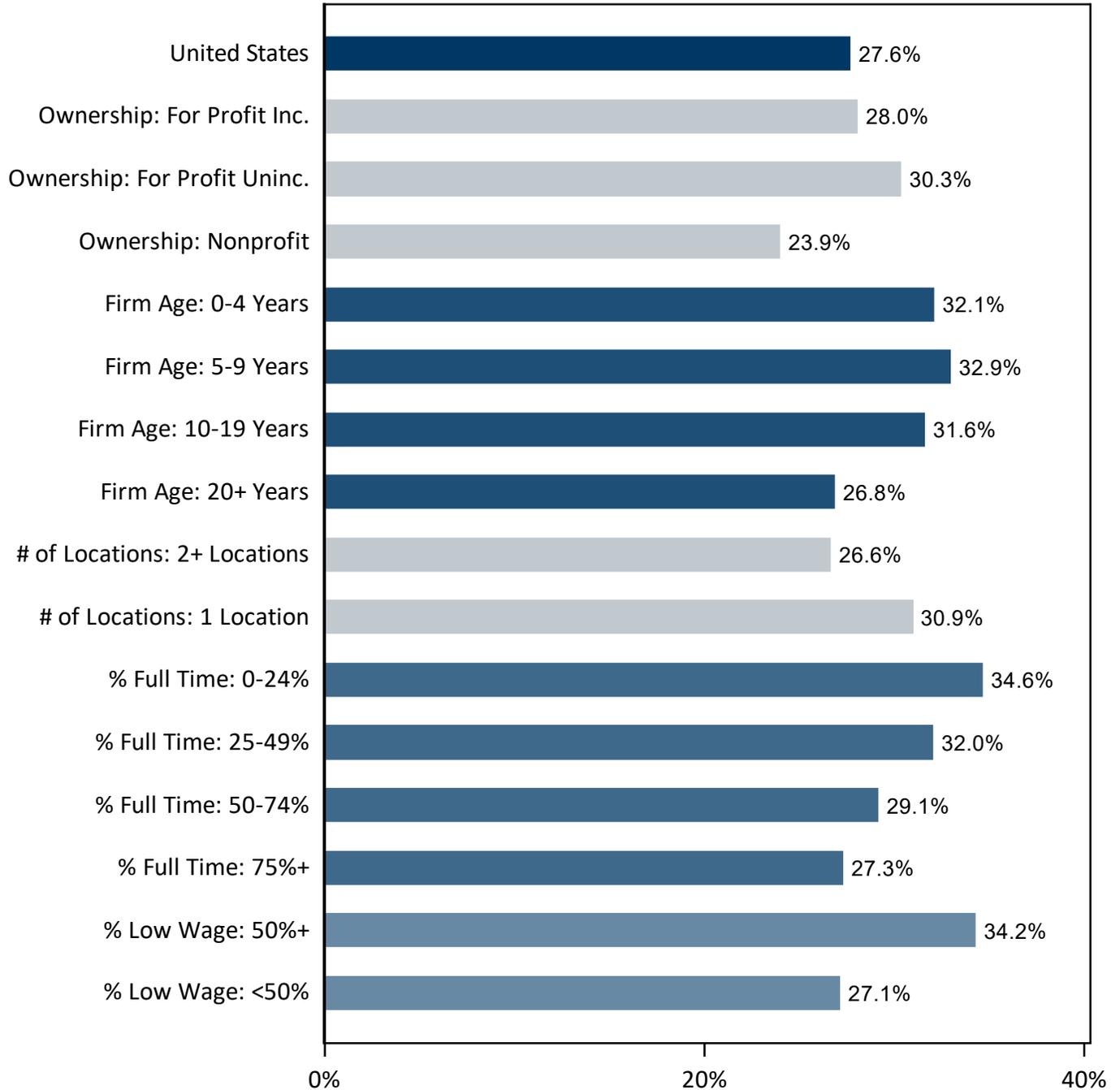
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 4.27

Average percentage of premium contributed by employees for employee-plus-one coverage, overall and by selected characteristics, 2017



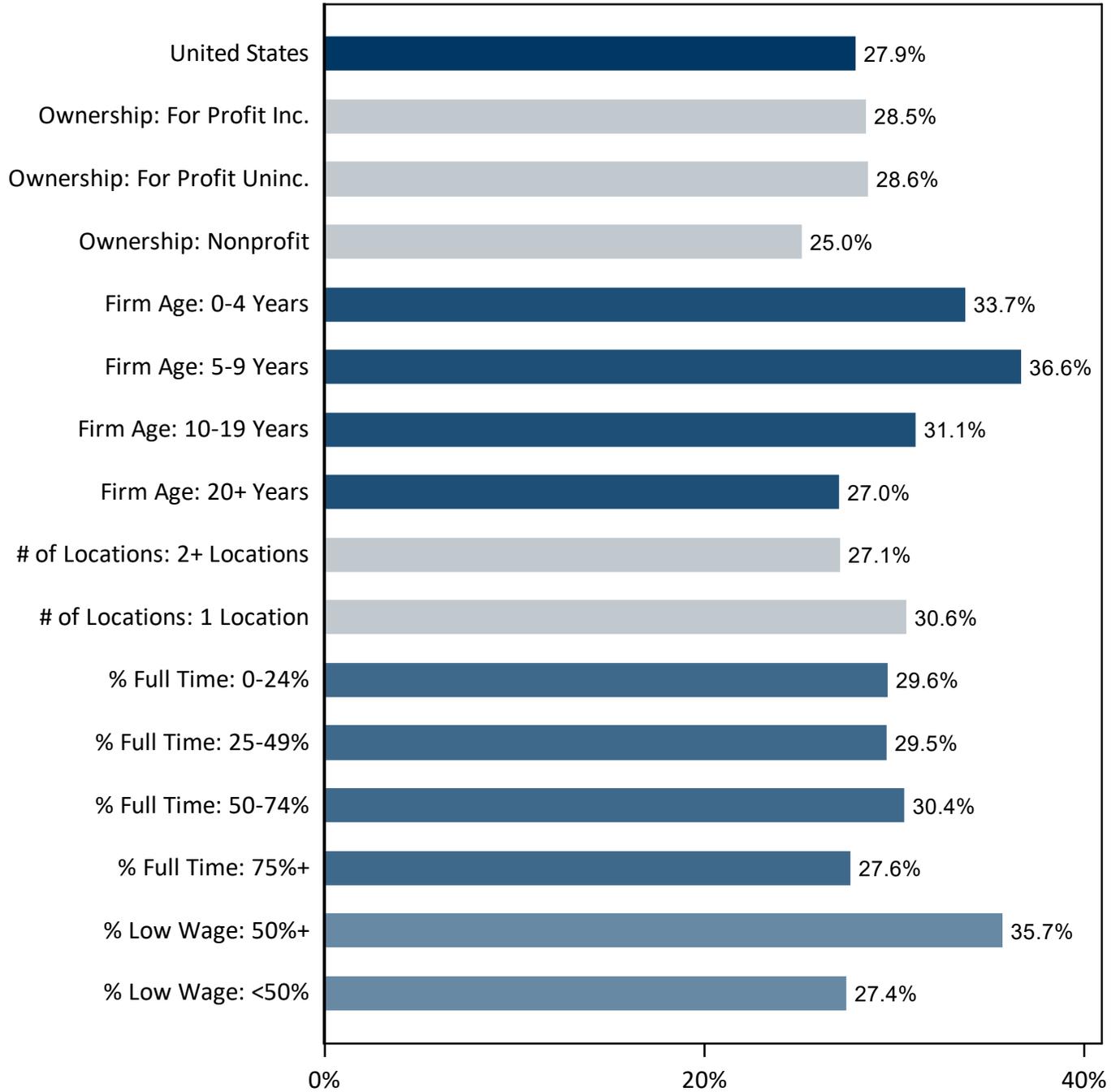
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 4.28

Average percentage of premium contributed by employees for family coverage, overall and by selected characteristics, 2017



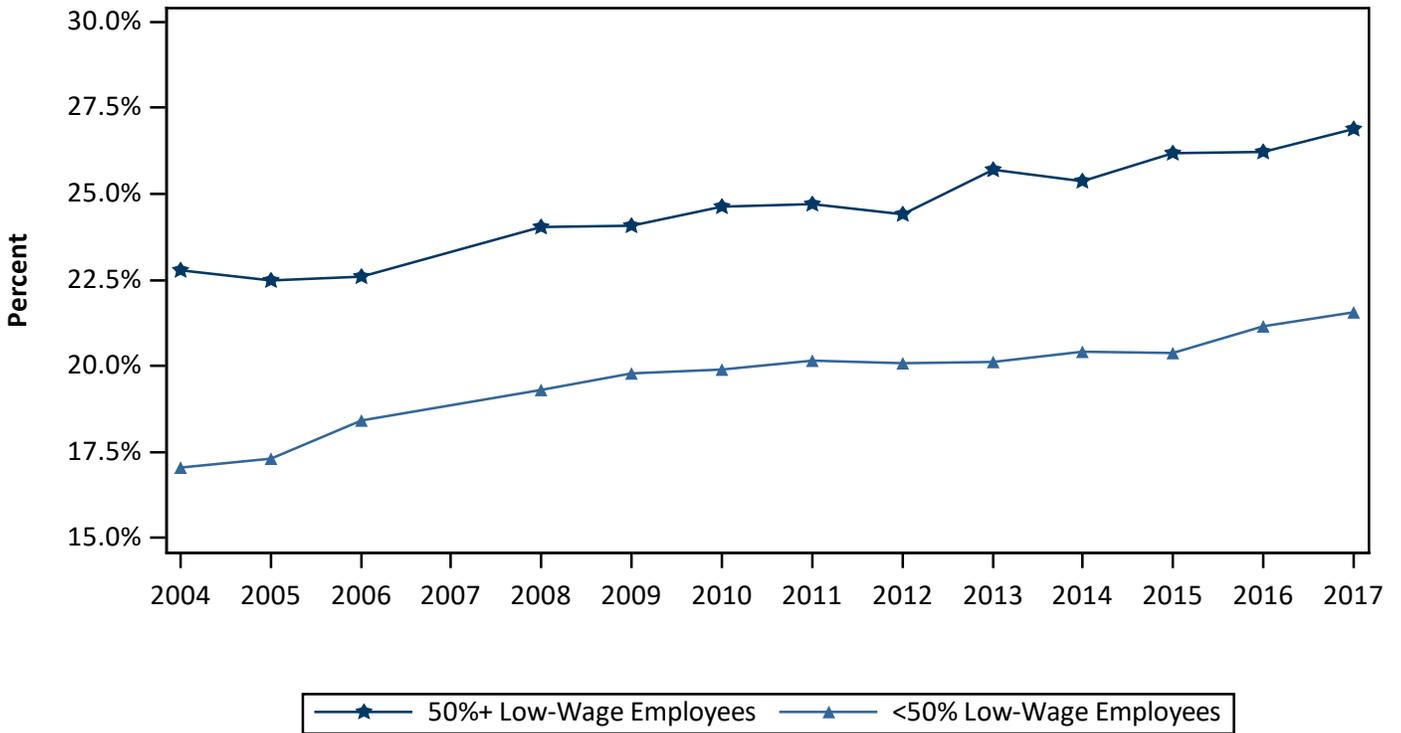
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

Note: “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2017. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$12.00 per hour in 2017.

For data points and standard errors for this exhibit, select here.

Exhibit 4.29

Average percentage of premium contributed by employees for single coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 4.29

Average percentage of premium contributed by employees for single coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017

Low wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
50%+ Low-Wage Employees	22.8%	22.5%	22.6%	24.0%	24.1%	24.6%	24.7%	24.4%	25.7%	25.4%	26.2%	26.2%	26.9%
<50% Low-Wage Employees	17.1%	17.3%	18.4%	19.3%	19.8%	19.9%	20.2%	20.1%	20.1%	20.4%	20.4%	21.1%	21.6%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

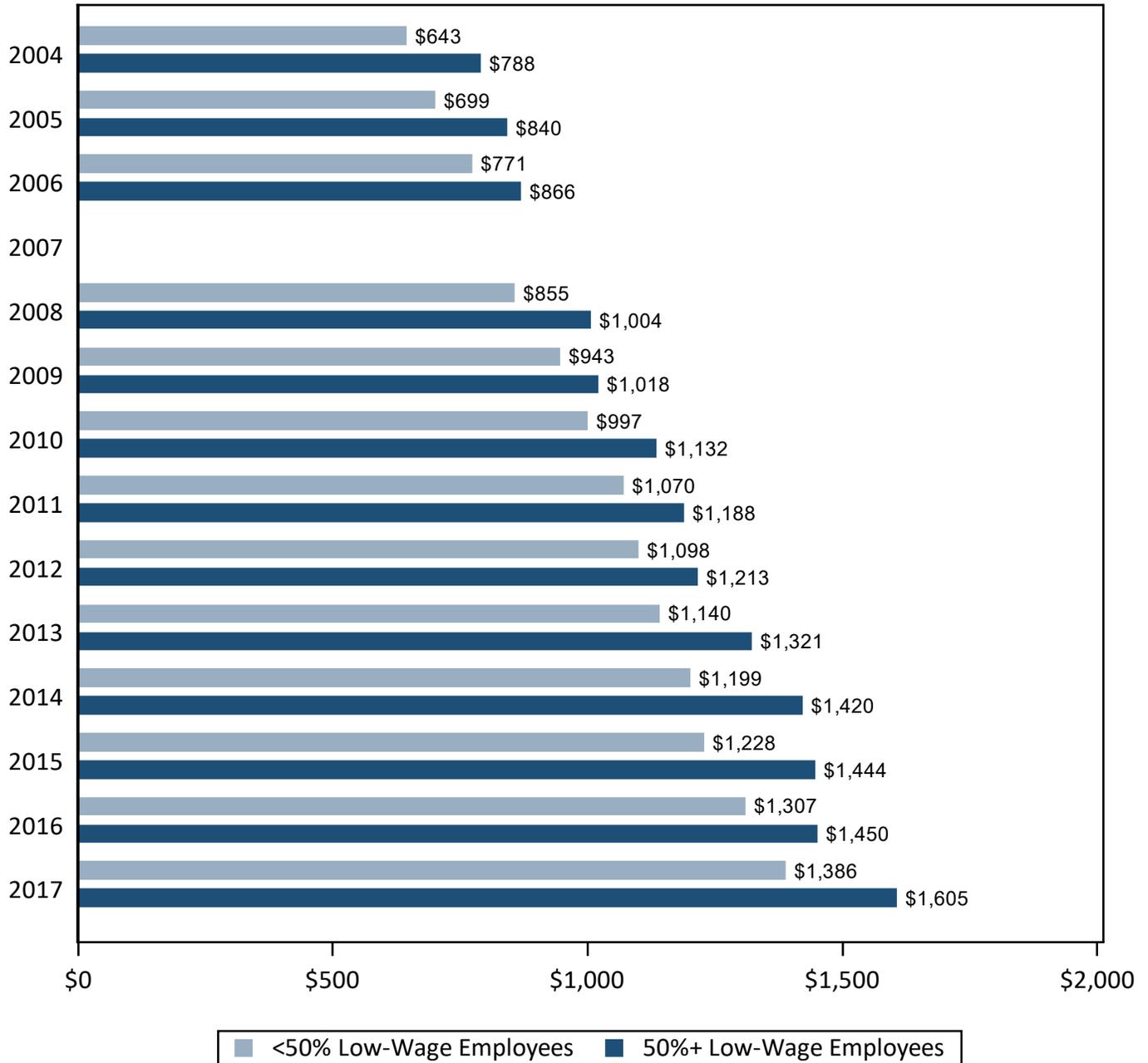
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 4.30

Average total employee contribution (in dollars) per employee for single coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017



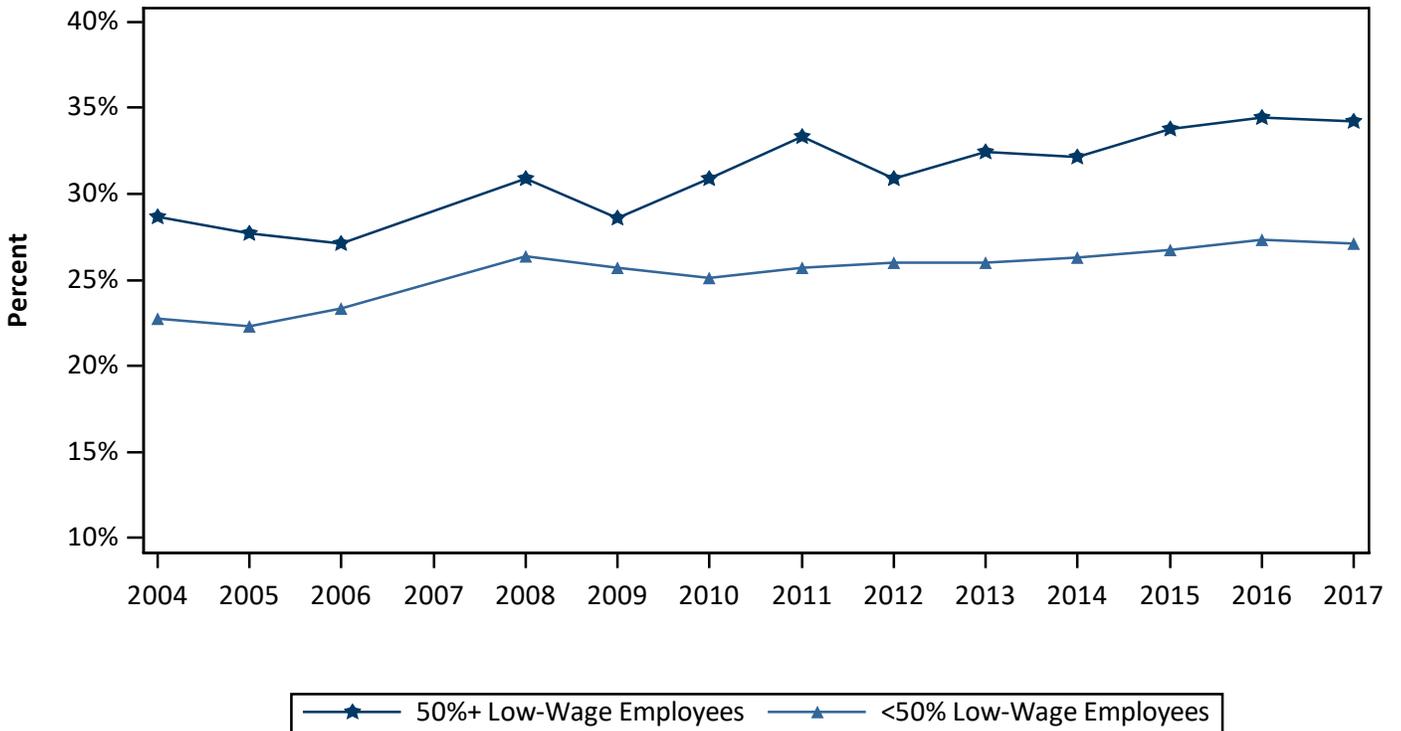
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 4.31

Average percentage of premium contributed by employees for employee-plus-one coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 4.31

Average percentage of premium contributed by employees for employee-plus-one coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017

Low wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
50%+ Low-Wage Employees	28.7%	27.7%	27.1%	30.9%	28.6%	30.9%	33.3%	30.9%	32.4%	32.1%	33.8%	34.4%	34.2%
<50% Low-Wage Employees	22.7%	22.3%	23.3%	26.3%	25.7%	25.1%	25.7%	26.0%	26.0%	26.3%	26.7%	27.3%	27.1%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

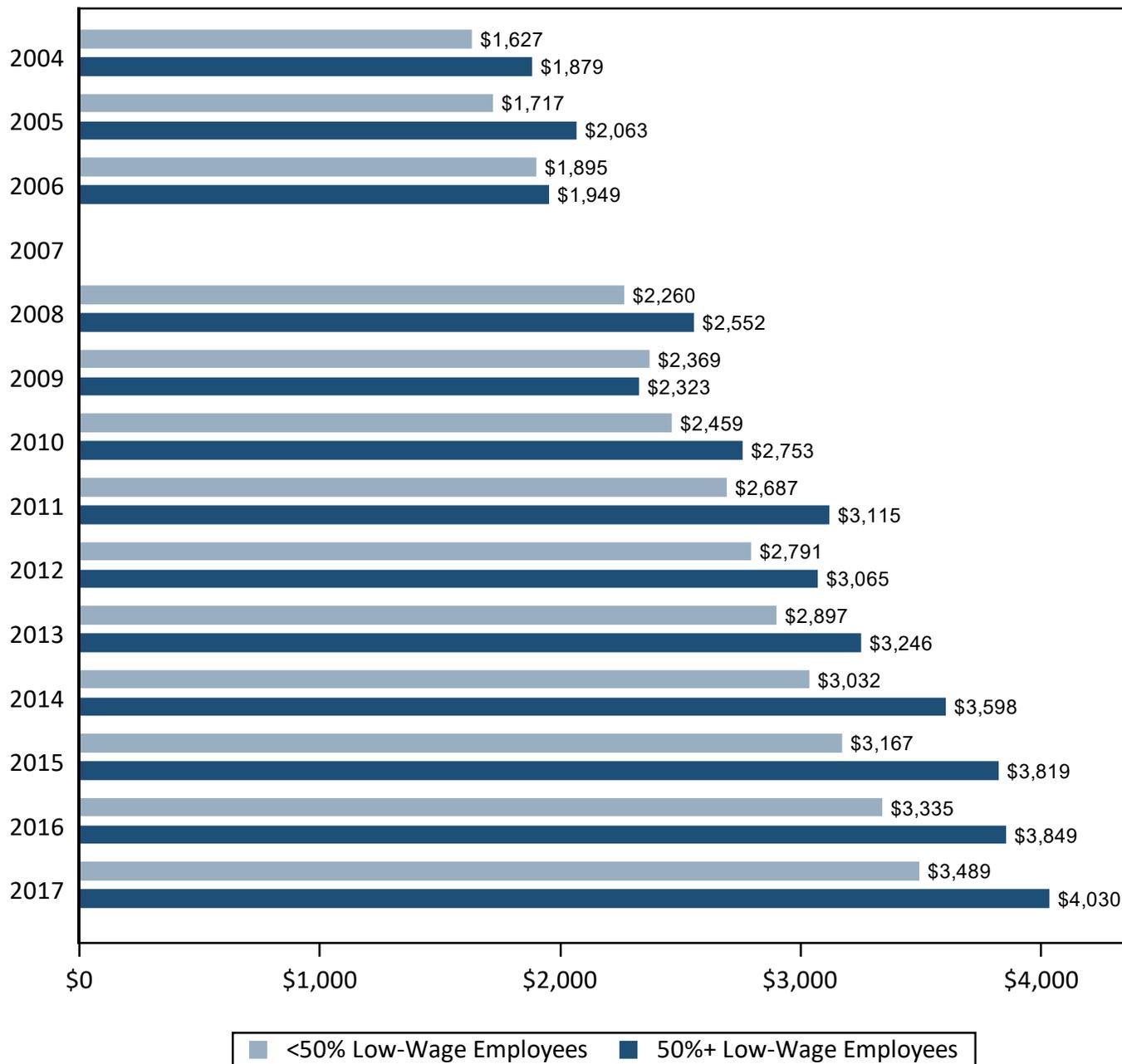
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 4.32

Average total employee contribution (in dollars) per employee for employee-plus-one coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017



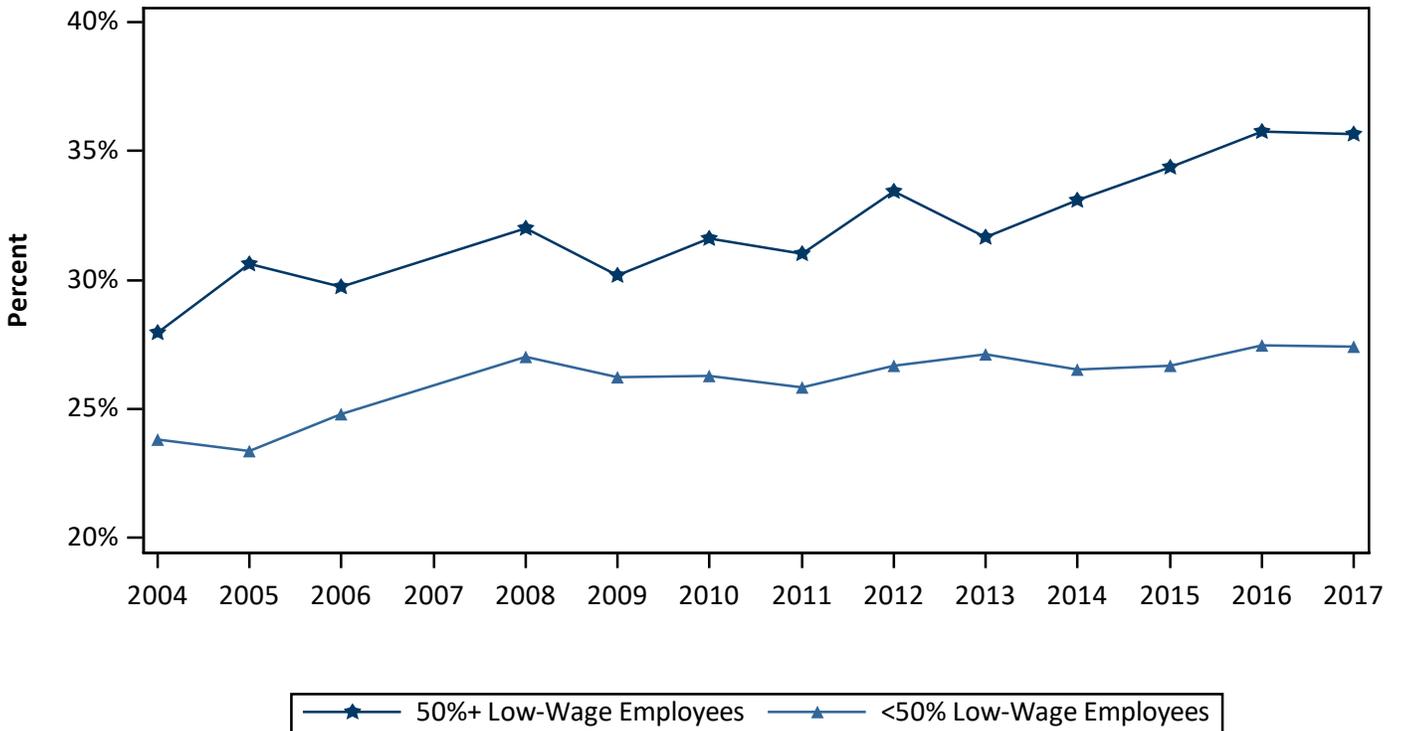
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 4.33

Average percentage of premium contributed by employees for family coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

Data for Exhibit 4.33

Average percentage of premium contributed by employees for family coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017

Low wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
50%+ Low-Wage Employees	27.9%	30.6%	29.7%	32.0%	30.2%	31.6%	31.0%	33.4%	31.7%	33.1%	34.4%	35.8%	35.7%
<50% Low-Wage Employees	23.8%	23.4%	24.8%	27.0%	26.2%	26.3%	25.9%	26.7%	27.1%	26.5%	26.7%	27.5%	27.4%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

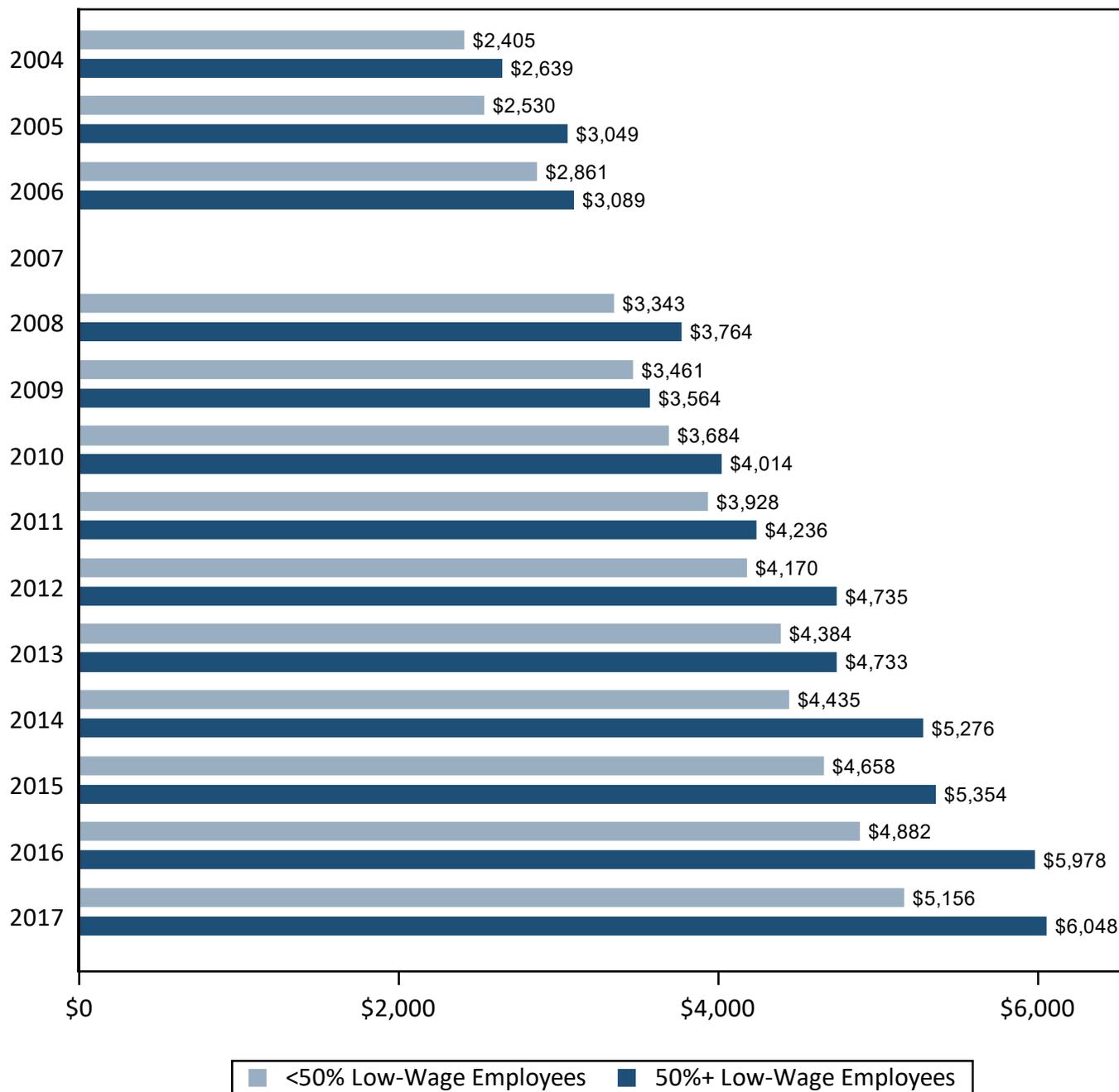
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 4.34

Average total employee contribution (in dollars) per employee for family coverage, by the percentage of the establishment's workforce that is low wage, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2017, low-wage employees were defined as those earning less than \$12.00 per hour.

For data points and standard errors for this exhibit, select here.

Exhibit 4.35
Distributions of employee contribution (in dollars) for single, employee-plus-one, and family coverage, by firm size, 2017

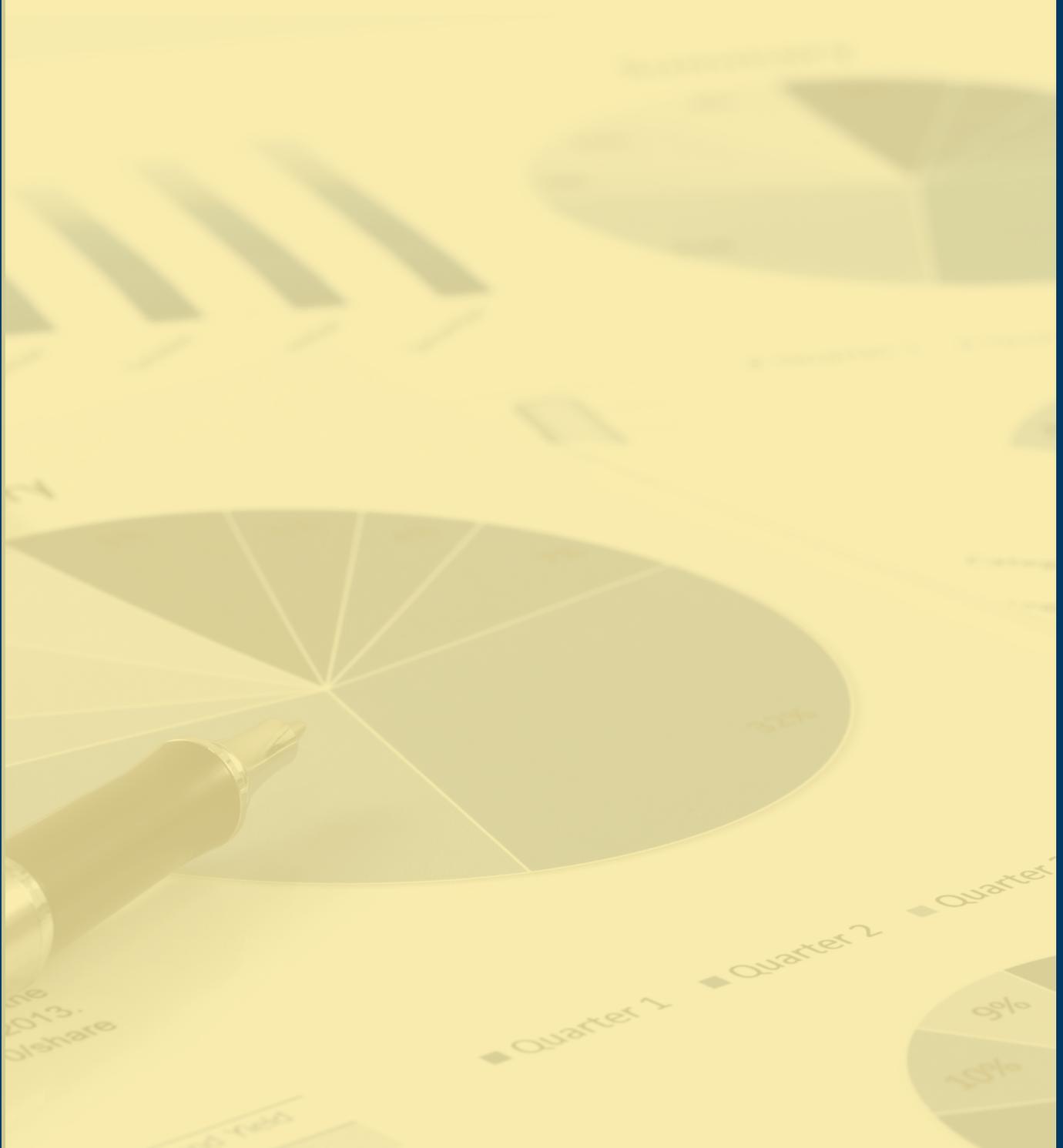
Coverage	Estimate	Total	<50 employees	50-99 employees	100 or more employees
Single	Average (mean)	\$1,415	\$1,287	\$1,349	\$1,451
	10 percentile	\$0	\$0	\$0	\$320
	25 percentile	\$650	\$0	\$370 †	\$780
	50 percentile (median)	\$1,200	\$860	\$1,200	\$1,300
	75 percentile	\$1,900	\$2,100	\$1,900	\$1,800
	90 percentile	\$2,800	\$3,200	\$3,000	\$2,600
Employee-plus-one	Average (mean)	\$3,531	\$3,760	\$4,358	\$3,445
	10 percentile	\$730	\$0	\$540 †	\$1,000
	25 percentile	\$1,900	\$0	\$2,100	\$2,000
	50 percentile (median)	\$3,100	\$3,100	\$3,800	\$3,100
	75 percentile	\$4,600	\$5,800	\$6,000	\$4,400
	90 percentile	\$6,700	\$8,500	\$8,400	\$6,300
Family	Average (mean)	\$5,218	\$5,413	\$5,738	\$5,154
	10 percentile	\$660 †	\$0	\$0	\$1,600
	25 percentile	\$2,800	\$0	\$1,200 †	\$3,000
	50 percentile (median)	\$4,600	\$4,300	\$4,900	\$4,600
	75 percentile	\$6,700	\$8,800	\$8,600	\$6,500
	90 percentile	\$10,000	\$13,000	\$13,000	\$9,300

† Estimate does not meet standard of reliability or precision.

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2017.

For data points and standard errors for this exhibit, select here.

Section 5: Employee Cost Sharing



Employee Cost Sharing

As healthcare costs in the United States have increased faster than the costs of other goods and services, employers have responded by shifting more of the cost of healthcare to employees by increasing cost-sharing provisions such as deductibles, coinsurance rates, and copayments and by raising the level of maximum out-of-pocket limits. A deductible is the amount an enrollee must pay before healthcare services are covered by the health plan. Coinsurance rates are the percentage of healthcare service expenses paid by the enrollee, and copayments are fixed dollar amounts paid by the enrollee for each healthcare service. Maximum out-of-pocket limits are the maximum amount the enrollee would pay for covered services in a given year.

High-deductible health plans, as defined in this chartbook, are plans with deductibles at or above annual thresholds set by the Internal Revenue Service for plans to qualify for Health Savings Accounts. In 2017, the thresholds were \$1,300 for single coverage and \$2,600 for family coverage.

Cost-sharing provisions may vary for different types of healthcare services. The deductibles reported in this section are general annual deductibles that must be met before many services are covered by the health plan. The reported coinsurance rates and copayments are cost-sharing measures for physician office visits to general practitioners.

When plans differentiate between in-network and out-of-network providers, the deductibles, coinsurance rates, and copayments reported in this section are for in-network providers. Reported maximum out-of-pocket payments refer to enrollee payments for all covered health services.

From 2004 to 2017, there were large changes in the cost-sharing provisions of employer-sponsored health plans. For example, the percentage of enrolled employees in plans with a deductible increased by 28.8 percentage points (from 58.7 percent in 2004 to 87.5 percent in 2017). Enrollment also shifted away from plans that structured their cost sharing for physician office visits as copayments to plans that used coinsurance rates. The percentage of enrollees in plans with coinsurance rates increased from 19.0 percent in 2004 to 37.6 percent in 2017, while the percentage of enrollees in plans with copayments declined from 77.3 percent in 2004 to 59.2 percent in 2017.

The level of maximum out-of-pocket payments for single enrollees in plans with a maximum individual out-of-pocket payment more than doubled, rising from \$2,118 in 2004 to \$4,246 in 2017, and it rose from \$4,456 in 2004 to \$8,183 in 2017 for family enrollees with a maximum family out-of-pocket payment. From 2004 to 2017, the percentage of single enrollees in high-deductible health plans increased from 12.2 percent to 53.0 percent and the percentage of family enrollees increased from 9.1 percent to 51.9 percent.

This section presents information on trends from 2004 to 2017, overall and by firm size, in:

- The percentage of enrolled employees in plans with a deductible,
- The percentages of enrolled employees in plans that have coinsurance rates and copayments for physician office visits, and

- The average deductibles, coinsurance rates, and copayments among enrolled employees in plans with these cost-sharing provisions, and
- The percentage of single and family enrollees in plans with a maximum-out-of-pocket-limit and the average maximum-out of pocket limit in such plans, and
- The percentage of single and family enrollees in high-deductible health plans.

Finally, this section presents information on cost-sharing provisions by State for 2017.

Individual and Family Deductibles, 2004 to 2017

- The percentage of enrolled employees in a health insurance plan with a deductible increased from 2016 (84.5 percent) to 2017 (87.5 percent). Except for 2011 and 2016, this percentage increased in every year from 2004 to 2017 ($p < 0.10$ in 2013). From 2004 to 2017, the percentage of enrollees in plans with deductibles increased from 58.7 percent to 87.5 percent (Exhibit 5.1).
- Among enrollees with deductibles, the average individual deductible increased from \$1,696 in 2016 to \$1,808 in 2017. The average family deductible increased from \$3,069 in 2016 to \$3,396 in 2017 (Exhibits 5.2 and 5.3).
- Between 2004 and 2017, average individual deductibles rose from \$573 to \$1,808 while average family deductibles rose from \$1,143 to \$3,396. Individual and family deductibles increased every year from 2004 to 2017 (Exhibits 5.2 and 5.3).

Differences by Firm Size

- In 2004, enrolled employees in large firms (100 or more employees) were less likely to be in a plan with a deductible than those in small (fewer than 50 employees) and medium (50 to 99 employees) firms (57.6 percent vs. 61.6 percent and 62.5 percent, respectively). In 2017, that pattern was reversed and enrolled employees in large firms were more likely to be in a plan with a deductible than those in small and medium firms (88.8 percent vs. 82.3 percent and 83.7 percent, respectively) (Exhibit 5.1).
- In almost all years between 2005 and 2012, there was no significant difference between small and large firms in the percentage of enrollees in plans with a deductible. However, in every year from 2013 to 2017, enrolled employees at large firms were more likely than those at small firms to be in plans with a deductible (Exhibit 5.1).
- Among enrollees with deductibles, average individual deductibles were higher in small and medium firms than in large firms over the entire period from 2004 to 2017. In 2017, average individual deductibles were \$2,136 and \$2,361 in small firms and medium firms, respectively, compared with \$1,681 in large firms (Exhibit 5.2).
- From 2008 through 2016, there was no significant difference between average individual deductibles for enrolled employees in small and medium firms. However, in 2017, the average individual deductible was lower for enrollees in small firms than in medium firms (\$2,136 vs. \$2,361) (Exhibit 5.2).
- Family deductibles were higher in small and medium firms than in large firms throughout the 2004 to 2017 period. In 2017, average family deductibles were \$4,447 and \$4,218 in small

and medium firms, respectively, compared with \$3,195 in large firms. There was no significant difference in family deductibles at small and medium firms in 2017 (Exhibit 5.3).

Deductibles by State, 2017

- In 2017, 87.5 percent of enrolled employees were in plans with a deductible. This figure was lower in California, District of Columbia, Hawaii, Massachusetts, New Jersey, New York and Rhode Island. It was not significantly different from the national average in Alaska, Connecticut, Delaware, Illinois, Louisiana, Maryland, Nevada, New Mexico, Pennsylvania, and Virginia. In the remaining States, the percentage of enrolled employees in a plan with a deductible was higher than the national average (Exhibit 5.4).
- Among enrolled employees in plans with individual deductibles, the average deductible was \$1,808 in 2017. Nine States had individual deductibles that were higher than the national average: Maine, Minnesota, Missouri, Montana, New Hampshire, North Carolina, South Dakota, Tennessee, and Texas. Fourteen States had individual deductibles that were lower than the national average: Alabama, Arkansas, District of Columbia, Hawaii, Kansas, Louisiana, Maryland, Massachusetts, Michigan, New Jersey, North Dakota, Oklahoma, Pennsylvania, and Washington (Exhibit 5.5).
- Among enrolled employees in plans with family deductibles, the average deductible was \$3,396 in 2017. Ten States had family deductibles that were higher than the national average: Connecticut, Florida, Maine, Minnesota, Nebraska, New Hampshire, South Dakota, Tennessee, Texas, and Utah. Twelve States had family deductibles that were lower than the national average: Alabama, District of Columbia, Hawaii, Idaho, Louisiana, Maryland, Massachusetts, Michigan, New Jersey, New Mexico, Washington, and Wyoming (Exhibit 5.6).

Coinsurance Rates for Physician Office Visits, 2004 to 2017

- From 2016 to 2017, the percentage of enrolled employees in a health insurance plan with a coinsurance rate for physician office visits increased from 34.9 percent to 37.6 percent (Exhibit 5.7).
- From 2004 to 2016, the percentage of enrolled employees in plans with coinsurance rates increased from 19.0 percent to 34.9 percent. There were significant increases in the percentage of enrolled employees with a coinsurance rate in 2006 and 2010 and then in each year from 2012 to 2015 (Exhibit 5.7).
- Between 2016 and 2017, there was no significant change in average coinsurance rates among enrollees in plans with a coinsurance rate (20.5 percent in 2016 and 20.1 percent in 2017). Average coinsurance rates increased from 18.6 percent in 2004 to 20.1 percent in 2017 (Exhibit 5.8).

Differences by Firm Size

- Enrolled employees in large firms (100 or more employees) were more likely to have plans with coinsurance rates than those in small (fewer than 50 employees) and medium (50 to 99 employees) firms in all years from 2004 to 2017. In 2017, 41.9 percent of enrollees in large firms had coinsurance rates compared with 22.1 percent and 21.8 percent in small and medium firms, respectively (Exhibit 5.7).

- Between 2004 and 2017, the percentage of enrolled employees in health plans with a coinsurance rate increased for all enrollees, regardless of firm size. However, the increase was larger among enrolled employees in large firms (21.5 percentage points) than in small and medium firms (6.6 percentage points and 7.4 percentage points, respectively) (Exhibit 5.7).
- Throughout the 2004 to 2017 period, average coinsurance rates for enrolled employees in large firms were lower than those in small firms. They were also lower in large firms than in medium firms in every year from 2011 to 2017. In 2017, average coinsurance rates were 19.8 percent in large firms vs. 22.2 percent and 21.9 percent in small and medium firms, respectively (Exhibit 5.8).

Coinsurance Rates by State, 2017

- In 2017, 37.6 percent of enrolled employees in the United States had plans with coinsurance rates for physician office visits. This percentage was lower in 10 States: Alabama, California, District of Columbia, Hawaii, Massachusetts, Michigan, New Jersey, New Mexico, Pennsylvania, and Rhode Island. This percentage was higher than the national average in 10 States: Alaska, Indiana, Iowa, Minnesota, Montana, North Dakota, Tennessee, Washington, Wisconsin, and Wyoming (Exhibit 5.9).
- Among enrolled employees in plans with coinsurance rates for physician office visits, the average coinsurance rate was 20.1 percent in 2017. The rate was lower in Delaware, Hawaii, Massachusetts, New York, Rhode Island, and Wisconsin. The rate was higher in Idaho, Iowa, Nebraska, South Carolina, Utah, Virginia, and Wyoming (Exhibit 5.10).

Copayments for Physician Office Visits, 2004 to 2017

- From 2016 to 2017, there was no statistically significant change in the overall percentage of enrollees in a health insurance plan with a copayment (60.6 percent in 2016 and 59.2 percent in 2017). From 2004 to 2017, the percentage of enrollees with a copayment fell by 18.1 percentage points, from 77.3 percent in 2004 to 59.2 percent in 2017 (Exhibit 5.11).
- For enrolled employees in plans with copayments, the average copayment increased from \$25.89 to \$26.50 between 2016 and 2017. From 2004 to 2017, average copayments increased from \$18.01 to \$26.50, with significant year-to-year increases in every year except 2015 (Exhibit 5.12).

Differences by Firm Size

- In 2004, there were no significant differences by firm size in the percentage of enrolled employees who were in plans with copayments. However, in almost all years from 2005 to 2017, the percentages in large firms (100 or more employees) were lower than in small (fewer than 50 employees) and medium (50 to 99 employees) firms (Exhibit 5.11).
- Between 2004 and 2017, the percentage of enrolled employees in health plans with a copayment decreased for all enrollees, regardless of firm size. However, the decrease was more pronounced among enrolled employees in large firms (20.9 percentage points) than in small and medium firms (7.0 percentage points and 9.9 percentage points, respectively) (Exhibit 5.11).

- Throughout the 2004 to 2017 period, average copayments for enrolled employees in large firms were lower than in small and medium firms. In 2017, the average copayment for a physician office visit was \$25.99 in large firms vs. \$28.21 and \$27.36 in small and medium firms, respectively (Exhibit 5.12).

Copayments by State, 2017

- In 2017, 59.2 percent of enrolled employees in the United States had plans with copayments for physician office visits. This figure was lower in Alaska, Indiana, Maine, Minnesota, Montana, North Dakota, Ohio, Tennessee, Vermont, Wisconsin, and Wyoming. It was higher in Alabama, California, District of Columbia, Hawaii, Massachusetts, Mississippi, Nevada, New Jersey, New Mexico, Oklahoma, Pennsylvania, and Rhode Island (Exhibit 5.13).
- Among plans with copayments, the average copayment was \$26.50 in 2017. This figure was lower in California, District of Columbia, Hawaii, Maryland, Massachusetts, Oregon, Pennsylvania, Rhode Island, Utah, Vermont, and West Virginia. It was higher in Alabama, Arkansas, Colorado, Florida, Georgia, Idaho, Indiana, Kansas, Louisiana, Minnesota, Missouri, Nebraska, Texas, and Wyoming (Exhibit 5.14).

Maximum Out-Of-Pocket Payment

- There was no significant change in the overall percentage of single enrollees in a health insurance plan with an individual maximum out-of-pocket payment from 2016 to 2017 (93.5 percent in 2016 and 93.4 percent in 2017). From 2004 to 2017, the percentage of single enrollees in a plan with an individual maximum out-of-pocket payment increased by 22.5 percentage points, from 70.9 percent in 2004 to 93.4 percent in 2017 (Exhibit 5.15).
- From 2016 to 2017, there was no significant difference in the percentage of family enrollees in a plan with a family maximum out-of-pocket payment (94.0 percent in 2016 and 94.4 percent in 2017). From 2004 to 2017, the percentage of family enrollees in a plan with a family maximum out-of-pocket payment increased by 27.1 percentage points, from 67.3 percent in 2004 to 94.4 percent in 2017 (Exhibit 5.16).
- For single enrollees in plans with an individual maximum out-of-pocket payment, the average maximum payment increased from \$4,099 in 2016 to \$4,246 in 2017. From 2004 to 2017, the individual maximum out-of-pocket payment more than doubled, rising from \$2,118 to \$4,246 (Exhibit 5.17).
- For family enrollees in a plan with a family maximum out-of-pocket payment, the average family maximum out-of-pocket payment increased from \$7,881 in 2016 to \$8,183 in 2017. From 2004 to 2017, the family maximum out-of-pocket payment increased from \$4,456 to \$8,183 (Exhibit 5.18).

Differences by Firm Size

- In all years from 2004 to 2017, the percentage of single enrollees in a plan with an individual maximum out-of-pocket payment was higher in large firms (100 or more employees) than in small firms (fewer than 50 employees). It was also higher in large firms than in medium

firms (50 to 99 employees) in most years during this period ($p < 0.10$ in 2006, 2012, 2015, and 2017) (Exhibit 5.15).

- In all years from 2005 to 2017, the percentage of family enrollees in a plan with a family maximum out-of-pocket payment was higher in large firms than in small firms (Exhibit 5.16).
- In all years from 2005 to 2017, average maximum individual out-of-pocket payments for single enrollees were lower in large firms than in small firms. They were also lower in large firms than in medium firms in most years in this period (Exhibit 5.17).
- In 2017, the individual average maximum out-of-pocket payment for single enrollees with a maximum was highest in medium firms (\$4,678) and higher in small firms (\$4,446) than in large firms (\$4,158) (Exhibit 5.17).
- In almost all years from 2004 to 2017, average maximum family out-of-pocket payments for family enrollees were lower in large firms than in small firms. In 2017, the average family maximum out-of-pocket payment was highest in small firms (\$8,821) and higher in medium firms (\$8,605) than in large firms (\$8,066) (Exhibit 5.18).

High-Deductible Health Plans

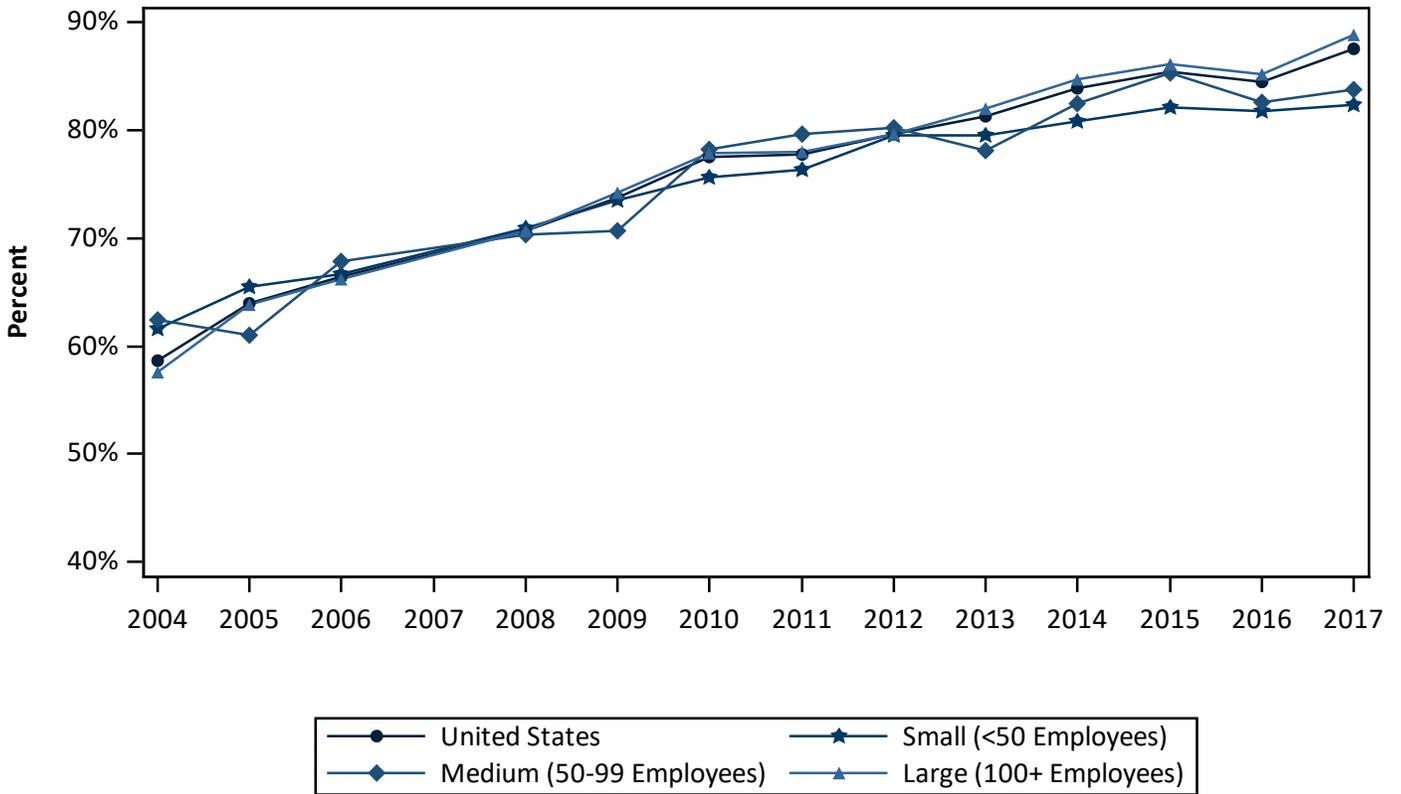
- The percentage of single enrollees in a high-deductible health plan increased from 47.1 percent in 2016 to 53.0 percent in 2017 (Exhibit 5.19).
- From 2004 to 2017, the percentage of single enrollees in a high-deductible health plan increased in each year as it rose from 12.2 percent in 2004 to 53.0 percent in 2017 (Exhibit 5.19).
- From 2016 to 2017, the percentage of family enrollees in a high-deductible health plan increased from 44.4 percent to 51.9 percent (Exhibit 5.20).
- The percentage of family enrollees in a high-deductible health plan increased every year from 2004 to 2017 except 2006 (Exhibit 5.20).

Differences by Firm Size

- From 2004 to 2017, the percentage of single enrollees in a high-deductible health plan was lower in large firms (100 or more employees) than in small firms (fewer than 50 employees) and medium firms (50 to 99 employees) (Exhibit 5.19).
- In 2017, the percentage of single enrollees in high-deductible health plans was lowest in large firms (51.8 percent) and higher in medium firms (58.9 percent) than in small firms (55.1 percent) ($p < 0.10$ for the small and medium comparison) (Exhibit 5.19).
- From 2004 to 2017, the percentage of family enrollees in high-deductible health plans was lower in large firms than in small firms. It was also lower than in medium firms in all years but 2017. In 2017, 51.3 percent of family enrollees in large firms were in high-deductible health plans vs. 55.2 percent in small firms (Exhibit 5.20).

Exhibit 5.1

Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit 5.1

Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	58.7%	63.9%	66.4%	70.7%	73.8%	77.5%	77.8%	79.6%	81.3%	83.9%	85.4%	84.5%	87.5%
<50	61.6%	65.5%	66.6%	70.9%	73.5%	75.7%	76.3%	79.5%	79.5%	80.8%	82.1%	81.7%	82.3%
50-99	62.5%	61.1%	67.9%	70.3%	70.6%	78.2%	79.6%	80.3%	78.0%	82.4%	85.3%	82.5%	83.7%
100+	57.6%	63.8%	66.2%	70.7%	74.2%	77.8%	77.9%	79.6%	81.9%	84.6%	86.1%	85.2%	88.8%

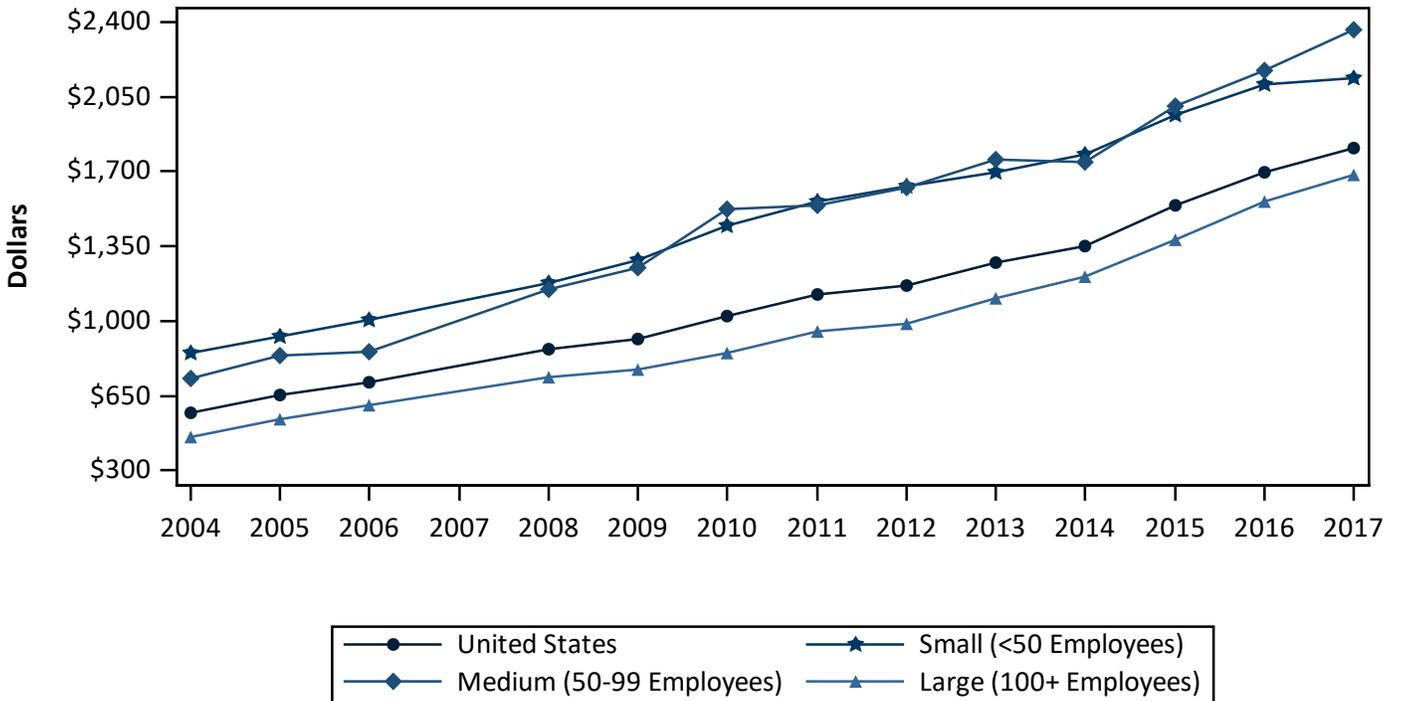
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.2

Average individual deductible (in dollars) per employee enrolled with single coverage in a health insurance plan with a deductible, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

In 2015, the methodology for calibrating the upper edit bound for the individual deductible amount changed, causing the average individual deductible per employee enrolled with single coverage in a health insurance plan with a deductible to increase by about 5 percent at the national level in 2015 relative to the earlier methodology.

Exhibit 5.2

Average individual deductible (in dollars) per employee enrolled with single coverage in a health insurance plan with a deductible, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$573	\$652	\$714	\$869	\$917	\$1,025	\$1,123	\$1,167	\$1,273	\$1,353	\$1,541	\$1,696	\$1,808
<50	\$849	\$929	\$1,007	\$1,177	\$1,283	\$1,447	\$1,561	\$1,628	\$1,695	\$1,777	\$1,964	\$2,105	\$2,136
50-99	\$733	\$836	\$855	\$1,149	\$1,249	\$1,522	\$1,543	\$1,622	\$1,755	\$1,744	\$2,008	\$2,173	\$2,361
100+	\$457	\$539	\$605	\$740	\$774	\$852	\$951	\$989	\$1,106	\$1,205	\$1,383	\$1,558	\$1,681

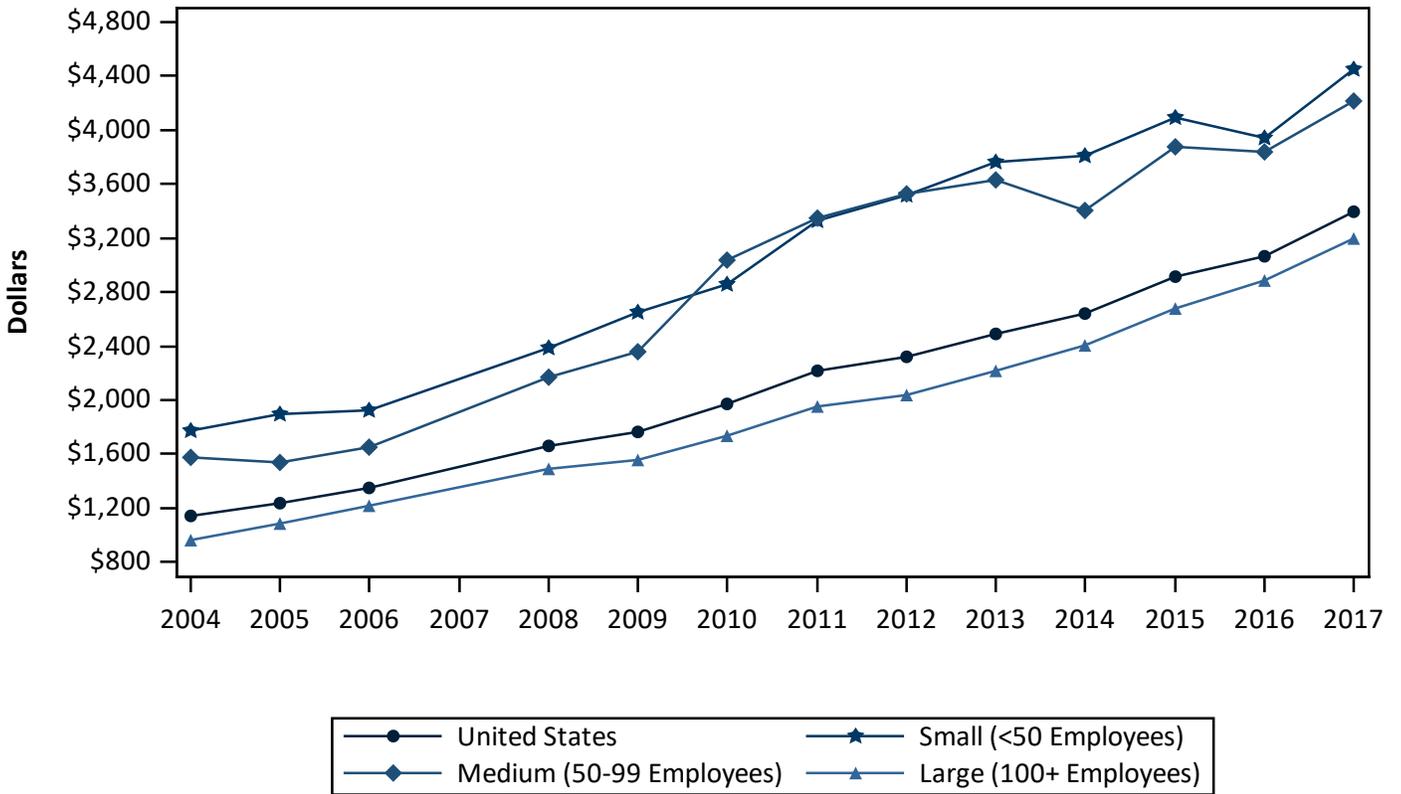
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. In 2015, the methodology for calibrating the upper edit bound for the individual deductible amount changed, causing the average individual deductible per employee enrolled with single coverage in a health insurance plan with a deductible to increase by about 5 percent at the national level in 2015 relative to the earlier methodology.

For data points and standard errors for this exhibit, select here.

Exhibit 5.3

Average family deductible (in dollars) per employee enrolled with family coverage in a health insurance plan with a deductible, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit 5.3

Average family deductible (in dollars) per employee enrolled with family coverage in a health insurance plan with a deductible, overall and by firm size, 2004-2017

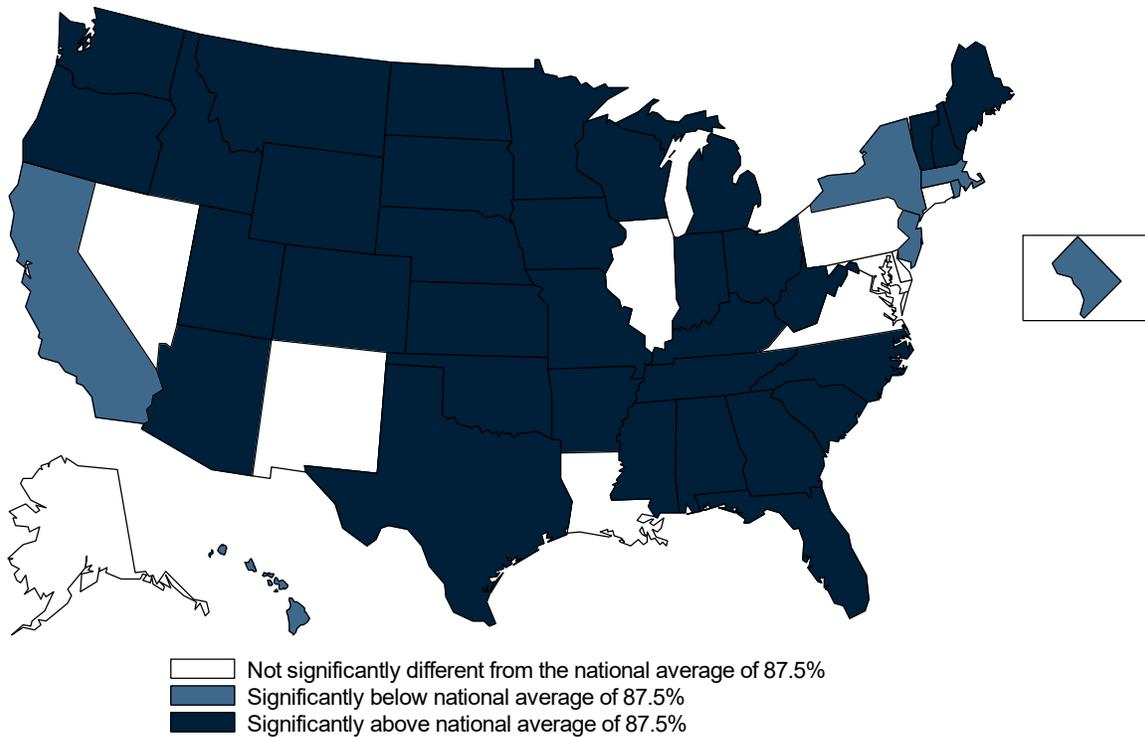
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$1,143	\$1,232	\$1,351	\$1,658	\$1,761	\$1,975	\$2,220	\$2,322	\$2,491	\$2,640	\$2,915	\$3,069	\$3,396
<50	\$1,771	\$1,899	\$1,923	\$2,389	\$2,652	\$2,857	\$3,329	\$3,515	\$3,761	\$3,810	\$4,090	\$3,940	\$4,447
50-99	\$1,577	\$1,534	\$1,649	\$2,173	\$2,362	\$3,040	\$3,349	\$3,523	\$3,634	\$3,404	\$3,875	\$3,840	\$4,218
100+	\$959	\$1,082	\$1,215	\$1,488	\$1,552	\$1,734	\$1,954	\$2,038	\$2,215	\$2,408	\$2,676	\$2,887	\$3,195

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.4
Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by State, 2017



Alabama	93.6%*	Kentucky	96.4%*	North Dakota	97.2%*
Alaska	88.7%	Louisiana	88.8%	Ohio	95.2%*
Arizona	93.5%*	Maine	93.9%*	Oklahoma	95.1%*
Arkansas	92.9%*	Maryland	88.2%	Oregon	93.7%*
California	69.9%*	Massachusetts	73.2%*	Pennsylvania	89.0%
Colorado	94.3%*	Michigan	91.4%*	Rhode Island	79.4%*
Connecticut	85.5%	Minnesota	93.9%*	South Carolina	92.8%*
Delaware	90.2%	Mississippi	94.9%*	South Dakota	97.5%*
District of Columbia	66.6%*	Missouri	93.9%*	Tennessee	93.5%*
Florida	92.3%*	Montana	99.3%*	Texas	93.6%*
Georgia	92.0%*	Nebraska	94.4%*	Utah	94.5%*
Hawaii	38.2%*	Nevada	86.7%	Vermont	94.5%*
Idaho	93.7%*	New Hampshire	93.2%*	Virginia	86.7%
Illinois	86.7%	New Jersey	79.9%*	Washington	95.9%*
Indiana	94.3%*	New Mexico	86.9%	West Virginia	93.0%*
Iowa	94.4%*	New York	75.2%*	Wisconsin	97.1%*
Kansas	92.5%*	North Carolina	92.8%*	Wyoming	98.1%*

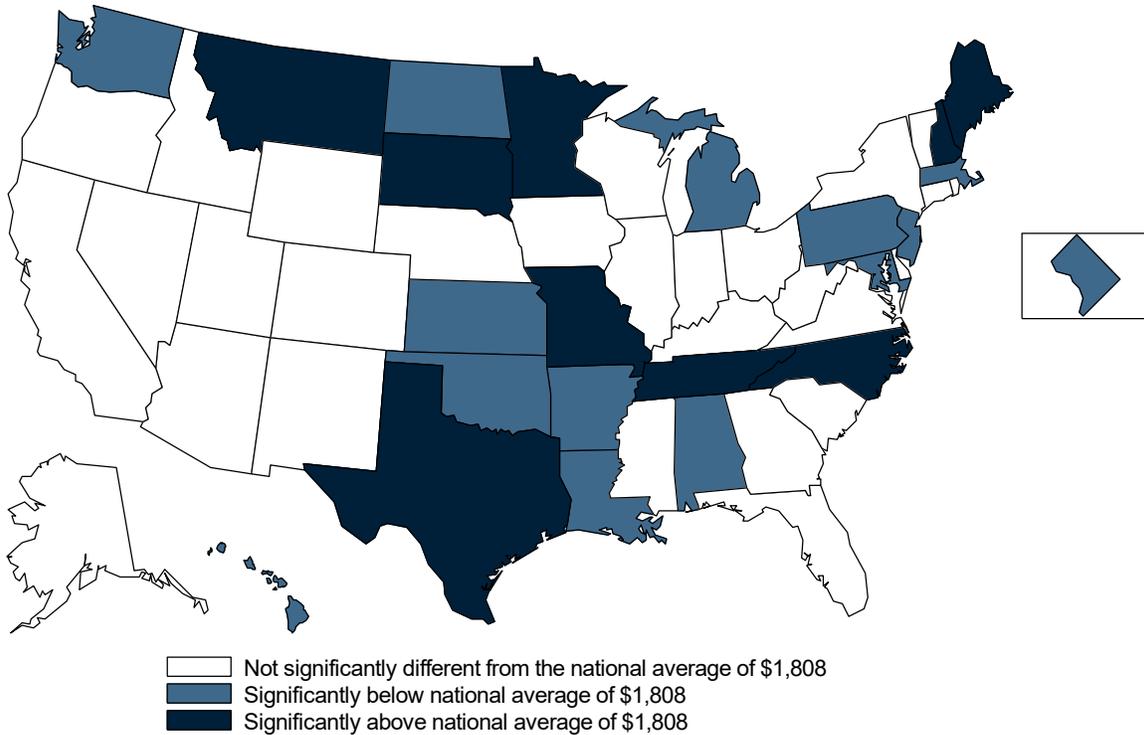
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of 87.5 percent at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 5.5

Average individual deductible (in dollars) per employee enrolled with single coverage in a health insurance plan with a deductible, overall and by State, 2017



Alabama	\$1,243*	Kentucky	\$1,878	North Dakota	\$1,499*
Alaska	\$1,856	Louisiana	\$1,607*	Ohio	\$1,946
Arizona	\$1,985	Maine	\$2,305*	Oklahoma	\$1,596*
Arkansas	\$1,384*	Maryland	\$1,536*	Oregon	\$1,688
California	\$1,772	Massachusetts	\$1,479*	Pennsylvania	\$1,639*
Colorado	\$1,951	Michigan	\$1,567*	Rhode Island	\$1,808
Connecticut	\$1,924	Minnesota	\$1,966*	South Carolina	\$1,684
Delaware	\$1,821	Mississippi	\$1,739	South Dakota	\$2,019*
District of Columbia	\$1,360*	Missouri	\$2,016*	Tennessee	\$2,086*
Florida	\$1,954	Montana	\$2,162*	Texas	\$2,158*
Georgia	\$1,889	Nebraska	\$1,922	Utah	\$1,815
Hawaii	\$863*	Nevada	\$1,654	Vermont	\$1,926
Idaho	\$1,778	New Hampshire	\$2,303*	Virginia	\$1,771
Illinois	\$1,693	New Jersey	\$1,456*	Washington	\$1,463*
Indiana	\$1,797	New Mexico	\$1,635	West Virginia	\$1,829
Iowa	\$1,842	New York	\$1,687	Wisconsin	\$1,990
Kansas	\$1,623*	North Carolina	\$1,975*	Wyoming	\$1,789

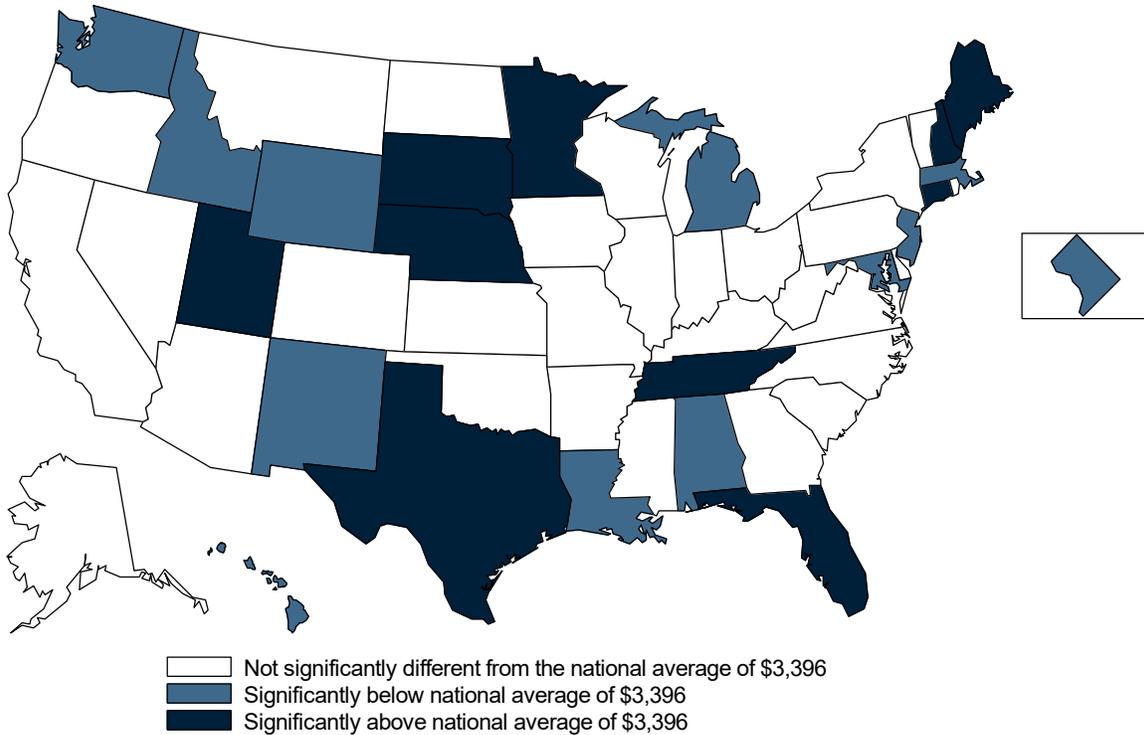
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of \$1,808 at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 5.6

Average family deductible (in dollars) per employee enrolled with family coverage in a health insurance plan with a deductible, overall and by State, 2017



Alabama	\$2,238*	Kentucky	\$3,517	North Dakota	\$3,050
Alaska	\$3,252	Louisiana	\$2,760*	Ohio	\$3,371
Arizona	\$3,483	Maine	\$4,032*	Oklahoma	\$3,246
Arkansas	\$3,207	Maryland	\$2,807*	Oregon	\$3,395
California	\$3,184	Massachusetts	\$2,747*	Pennsylvania	\$3,082
Colorado	\$3,721	Michigan	\$2,659*	Rhode Island	\$3,481
Connecticut	\$4,008*	Minnesota	\$3,739*	South Carolina	\$3,296
Delaware	\$3,676	Mississippi	\$3,508	South Dakota	\$3,892*
District of Columbia	\$2,571*	Missouri	\$3,618	Tennessee	\$3,993*
Florida	\$4,044*	Montana	\$3,326	Texas	\$3,837*
Georgia	\$3,735	Nebraska	\$4,299*	Utah	\$3,993*
Hawaii	\$1,819*	Nevada	\$3,196	Vermont	\$3,632
Idaho	\$2,825*	New Hampshire	\$4,381*	Virginia	\$3,460
Illinois	\$3,048	New Jersey	\$2,827*	Washington	\$2,920*
Indiana	\$4,020	New Mexico	\$2,792*	West Virginia	\$3,213
Iowa	\$3,427	New York	\$3,226	Wisconsin	\$3,745
Kansas	\$3,450	North Carolina	\$3,671	Wyoming	\$3,028*

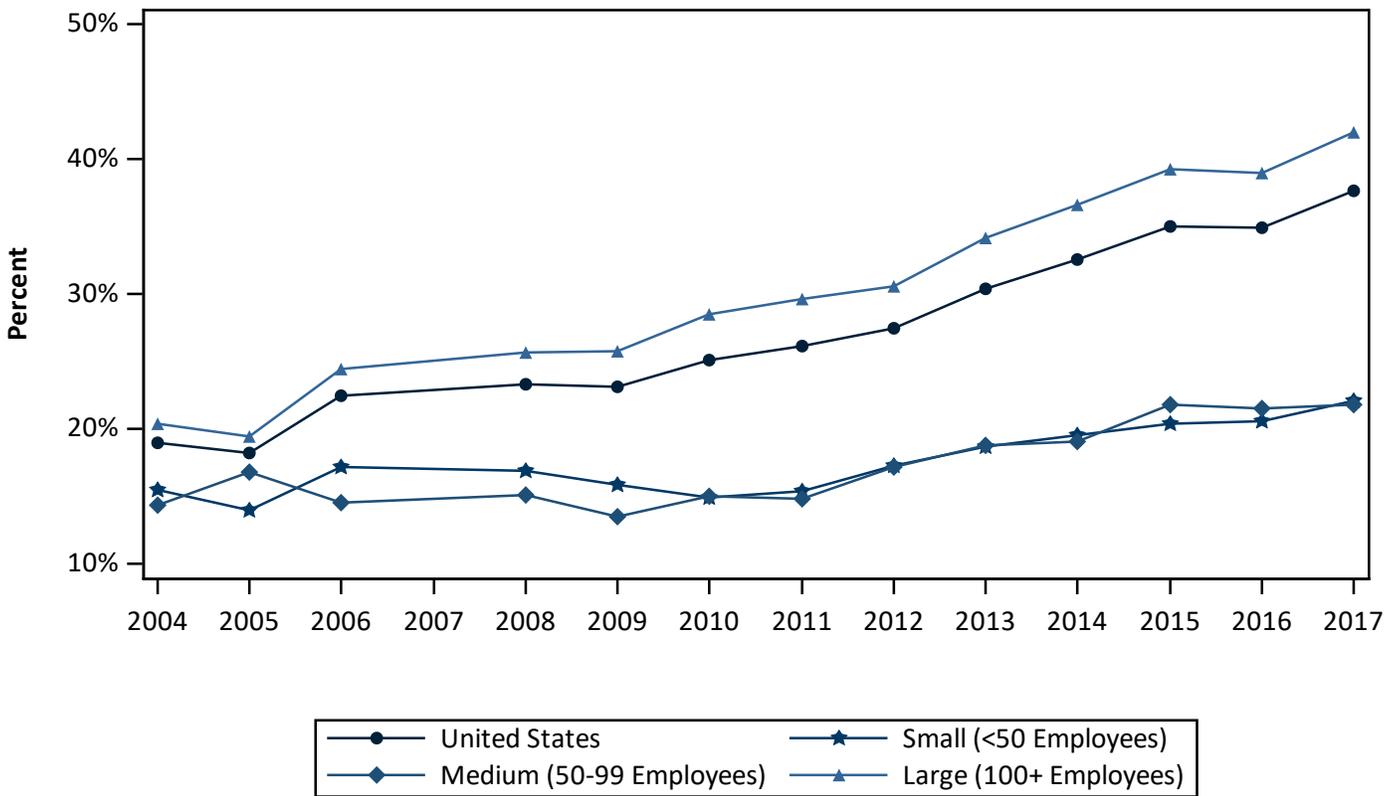
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of \$3,396 at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 5.7

Percentage of private-sector enrolled employees in a health insurance plan with a physician visit coinsurance rate, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit 5.7

Percentage of private-sector enrolled employees in a health insurance plan with a physician visit coinsurance rate, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	19.0%	18.3%	22.4%	23.3%	23.1%	25.1%	26.1%	27.4%	30.4%	32.6%	35.0%	34.9%	37.6%
<50	15.5%	14.0%	17.2%	16.9%	15.9%	14.9%	15.4%	17.3%	18.7%	19.5%	20.4%	20.6%	22.1%
50-99	14.4%	16.8%	14.5%	15.1%	13.5%	15.1%	14.8%	17.2%	18.8%	19.1%	21.8%	21.5%	21.8%
100+	20.4%	19.5%	24.4%	25.6%	25.7%	28.5%	29.6%	30.6%	34.1%	36.6%	39.2%	38.9%	41.9%

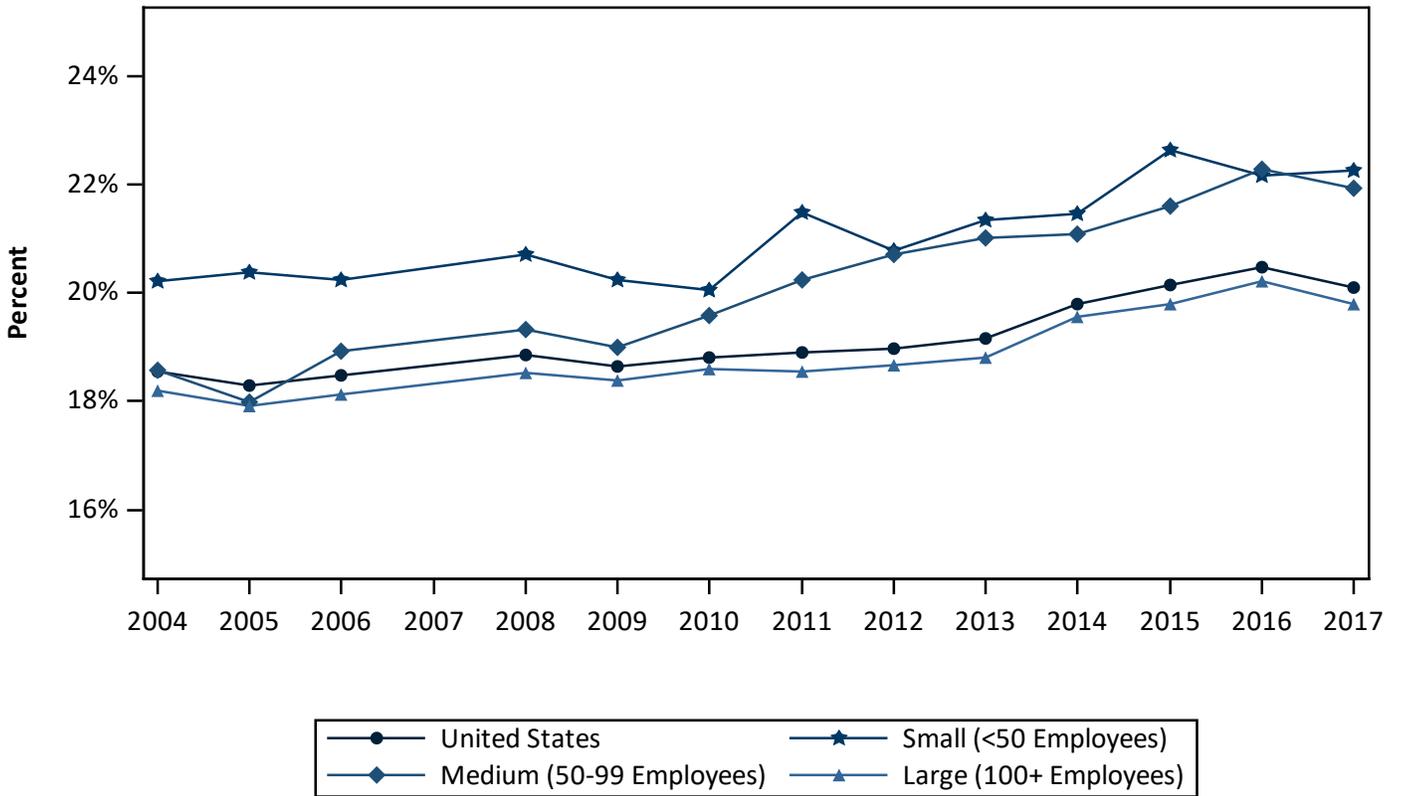
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.8

Average coinsurance rate (in percent) for a physician office visit per employee enrolled in a health insurance plan with a physician visit coinsurance rate, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit 5.8

Average coinsurance rate (in percent) for a physician office visit per employee enrolled in a health insurance plan with a physician visit coinsurance rate, overall and by firm size, 2004-2017

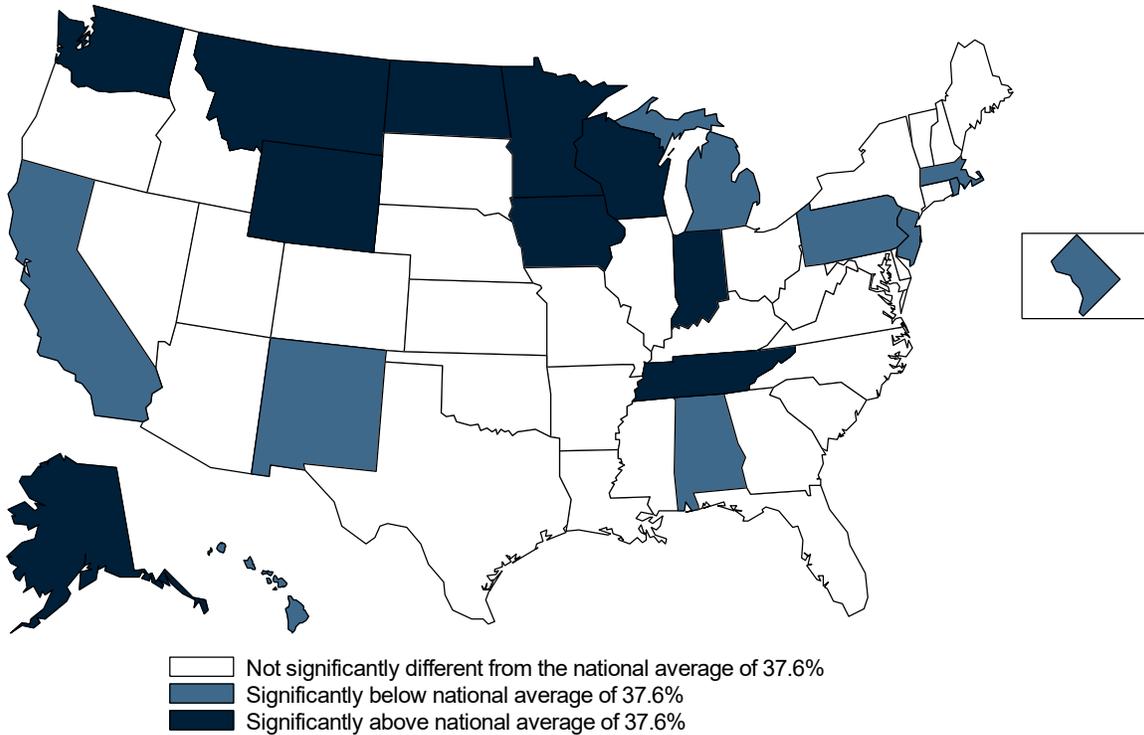
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	18.6%	18.3%	18.5%	18.9%	18.6%	18.8%	18.9%	19.0%	19.2%	19.8%	20.1%	20.5%	20.1%
<50	20.2%	20.4%	20.2%	20.7%	20.2%	20.0%	21.5%	20.8%	21.3%	21.5%	22.6%	22.2%	22.2%
50-99	18.6%	18.0%	18.9%	19.3%	19.0%	19.6%	20.2%	20.7%	21.0%	21.1%	21.6%	22.3%	21.9%
100+	18.2%	17.9%	18.1%	18.5%	18.4%	18.6%	18.5%	18.7%	18.8%	19.5%	19.8%	20.2%	19.8%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.9
Percentage of private-sector enrolled employees in a health insurance plan
with a physician visit coinsurance rate, overall and by State, 2017



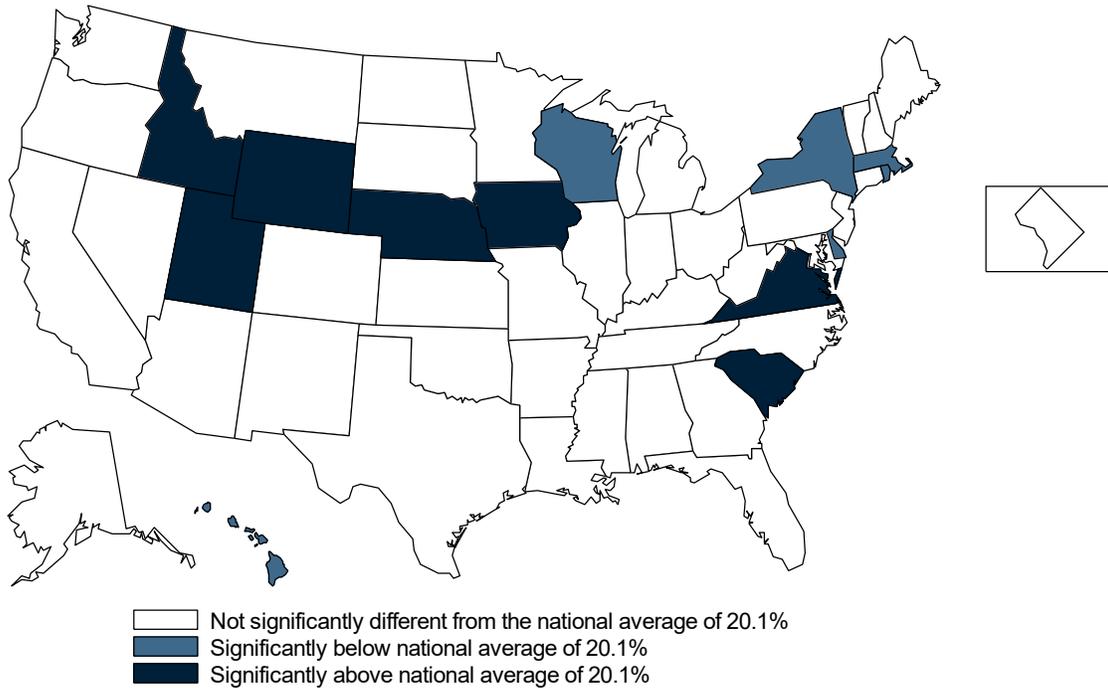
Alabama	28.0%*	Kentucky	34.6%	North Dakota	52.8%*
Alaska	53.3%*	Louisiana	38.4%	Ohio	39.5%
Arizona	48.3%	Maine	40.4%	Oklahoma	32.6%
Arkansas	36.1%	Maryland	35.5%	Oregon	39.2%
California	30.8%*	Massachusetts	23.9%*	Pennsylvania	29.4%*
Colorado	42.0%	Michigan	31.1%*	Rhode Island	30.0%*
Connecticut	33.7%	Minnesota	50.4%*	South Carolina	41.0%
Delaware	38.1%	Mississippi	35.3%	South Dakota	32.8%
District of Columbia	22.1%*	Missouri	41.8%	Tennessee	48.9%*
Florida	42.9%	Montana	56.5%*	Texas	35.6%
Georgia	44.9%	Nebraska	42.1%	Utah	44.8%
Hawaii	27.1%*	Nevada	33.3%	Vermont	40.2%
Idaho	40.9%	New Hampshire	40.3%	Virginia	33.5%
Illinois	33.5%	New Jersey	30.3%*	Washington	47.8%*
Indiana	46.8%*	New Mexico	23.3%*	West Virginia	45.8%
Iowa	47.9%*	New York	39.7%	Wisconsin	56.3%*
Kansas	42.9%	North Carolina	34.5%	Wyoming	61.1%*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of 37.6 percent at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 5.10
Average coinsurance rate (in percent) for a physician office visit
per employee enrolled in a health insurance plan with a physician visit
coinsurance rate, overall and by State, 2017



Alabama	20.1%	Kentucky	19.3%	North Dakota	19.0%
Alaska	19.5%	Louisiana	21.0%	Ohio	21.1%
Arizona	20.8%	Maine	19.8%	Oklahoma	20.4%
Arkansas	21.7%	Maryland	19.3%	Oregon	21.1%
California	21.1%	Massachusetts	17.7%*	Pennsylvania	19.1%
Colorado	20.4%	Michigan	19.6%	Rhode Island	16.1%*
Connecticut	18.8%	Minnesota	20.2%	South Carolina	21.9%*
Delaware	16.4%*	Mississippi	20.6%	South Dakota	20.8%
District of Columbia	20.0%	Missouri	19.6%	Tennessee	21.4%
Florida	20.5%	Montana	20.2%	Texas	19.5%
Georgia	21.1%	Nebraska	21.0%*	Utah	22.4%*
Hawaii	16.7%*	Nevada	20.9%	Vermont	22.2%
Idaho	21.9%*	New Hampshire	20.7%	Virginia	21.9%*
Illinois	20.1%	New Jersey	21.1%	Washington	18.6%
Indiana	19.9%	New Mexico	20.7%	West Virginia	18.5%
Iowa	21.7%*	New York	17.3%*	Wisconsin	18.9%*
Kansas	21.6%	North Carolina	21.0%	Wyoming	22.6%*

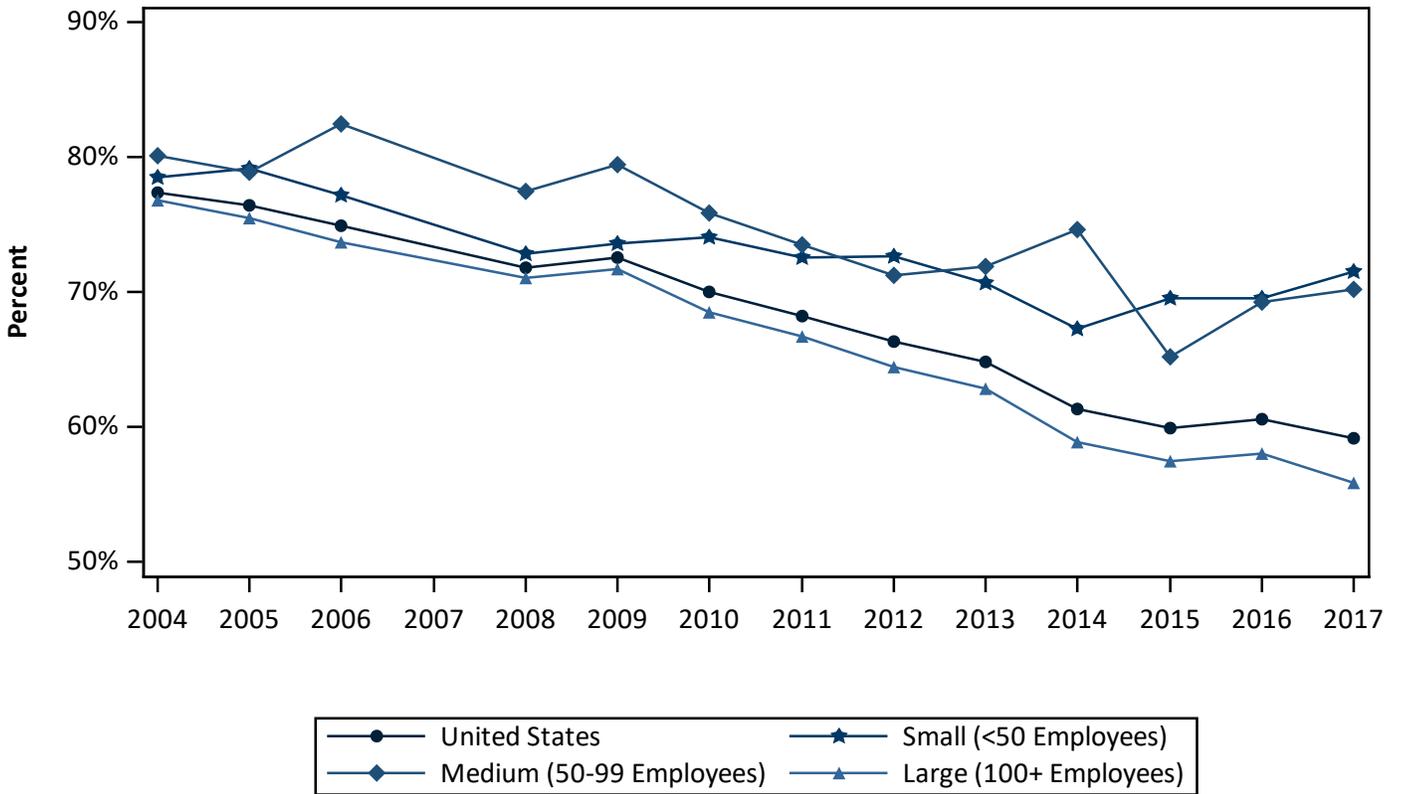
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of 20.1 percent at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 5.11

Percentage of private-sector enrolled employees in a health insurance plan with a copayment for a physician office visit, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit 5.11

Percentage of private-sector enrolled employees in a health insurance plan with a copayment for a physician office visit, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	77.3%	76.4%	74.9%	71.8%	72.6%	70.0%	68.2%	66.3%	64.8%	61.3%	59.9%	60.6%	59.2%
<50	78.5%	79.2%	77.2%	72.8%	73.6%	74.0%	72.6%	72.7%	70.6%	67.3%	69.6%	69.5%	71.5%
50-99	80.1%	78.9%	82.4%	77.5%	79.4%	75.8%	73.5%	71.2%	71.9%	74.6%	65.2%	69.3%	70.2%
100+	76.8%	75.5%	73.7%	71.1%	71.7%	68.5%	66.7%	64.5%	62.9%	58.9%	57.4%	58.1%	55.9%

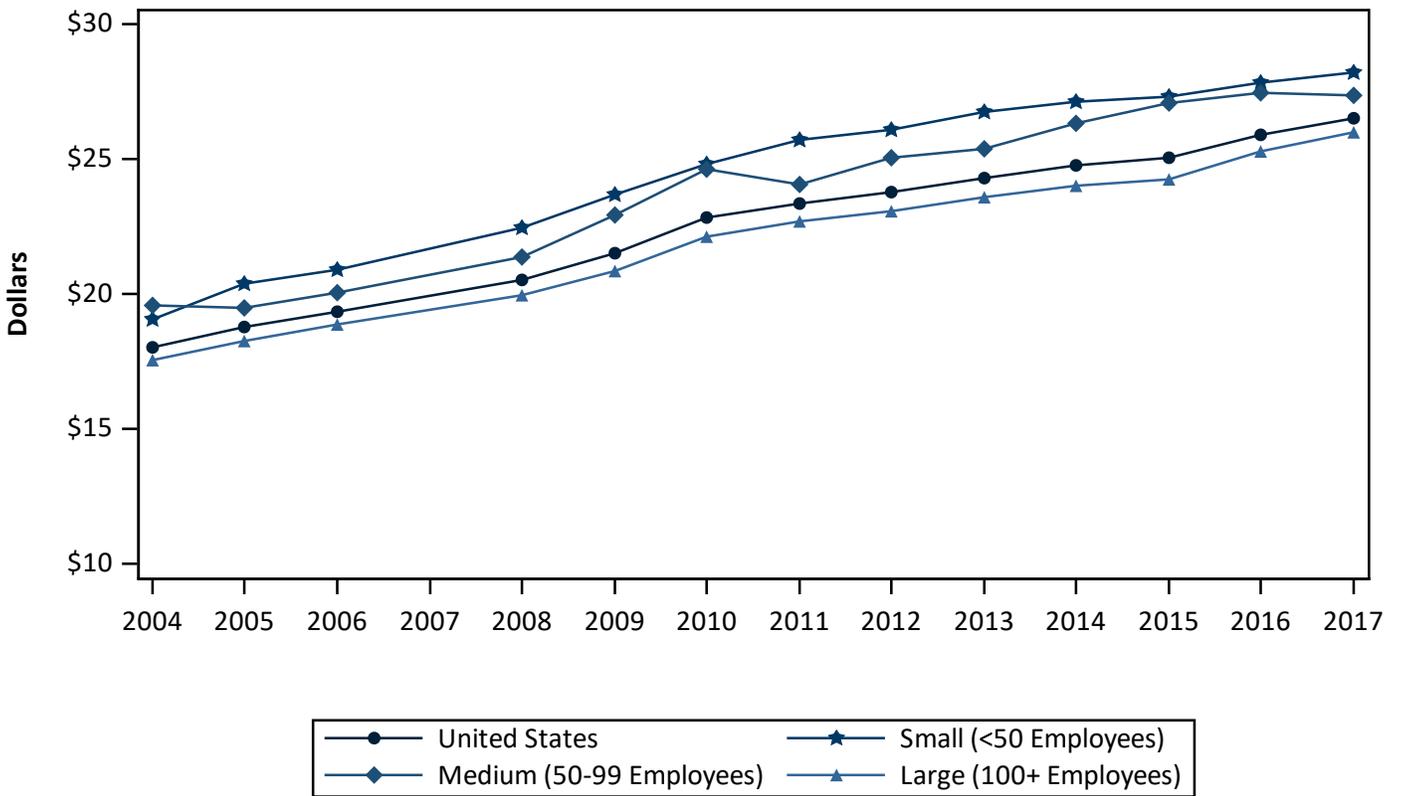
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.12

Average copayment (in dollars) for a physician office visit per employee enrolled in a health insurance plan with a physician visit copayment, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Exhibit 5.12

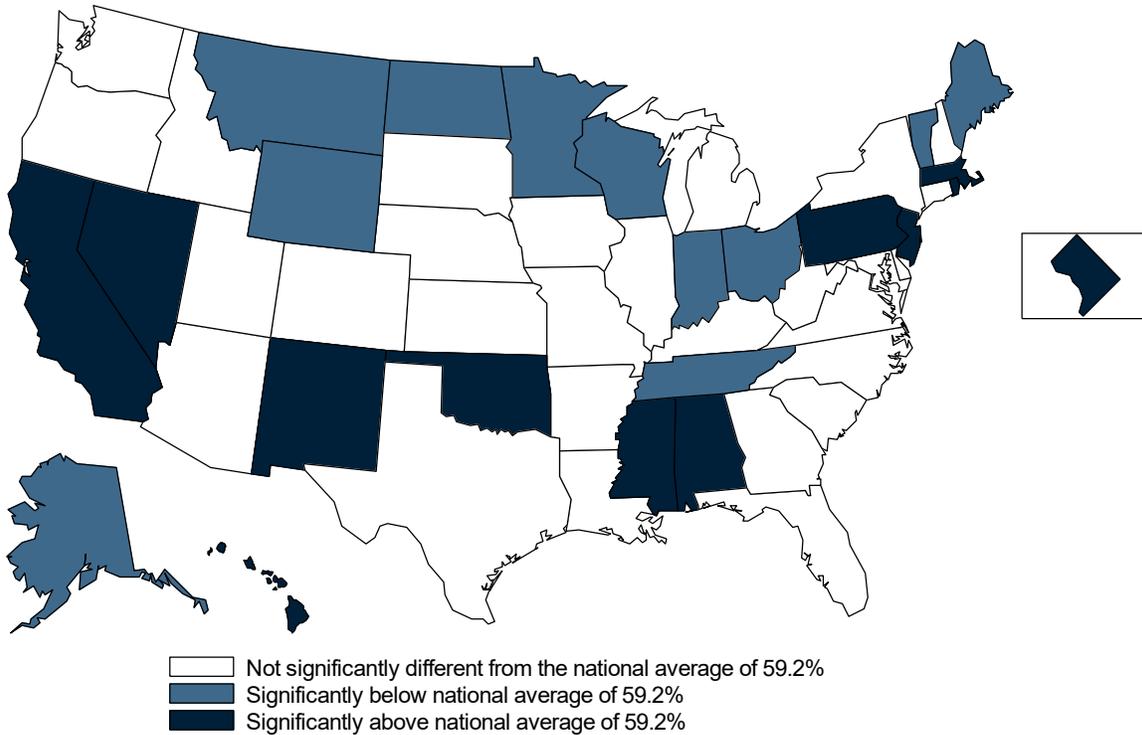
Average copayment (in dollars) for a physician office visit per employee enrolled in a health insurance plan with a physician visit copayment, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$18.01	\$18.76	\$19.33	\$20.53	\$21.53	\$22.82	\$23.34	\$23.77	\$24.31	\$24.77	\$25.04	\$25.89	\$26.50
<50	\$19.05	\$20.40	\$20.88	\$22.43	\$23.66	\$24.79	\$25.71	\$26.07	\$26.75	\$27.14	\$27.30	\$27.82	\$28.21
50-99	\$19.57	\$19.49	\$20.03	\$21.38	\$22.93	\$24.62	\$24.05	\$25.05	\$25.37	\$26.29	\$27.06	\$27.43	\$27.36
100+	\$17.58	\$18.25	\$18.85	\$19.96	\$20.86	\$22.13	\$22.68	\$23.07	\$23.60	\$24.03	\$24.25	\$25.28	\$25.99

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.13
Percentage of private-sector enrolled employees in a health insurance plan with a copayment for a physician office visit, overall and by State, 2017



Alabama	73.4%*	Kentucky	64.7%	North Dakota	47.2%*
Alaska	45.4%*	Louisiana	59.7%	Ohio	48.2%*
Arizona	51.3%	Maine	49.6%*	Oklahoma	68.8%*
Arkansas	61.4%	Maryland	62.4%	Oregon	62.3%
California	66.7%*	Massachusetts	69.9%*	Pennsylvania	69.4%*
Colorado	53.3%	Michigan	64.6%	Rhode Island	71.7%*
Connecticut	55.7%	Minnesota	36.0%*	South Carolina	56.1%
Delaware	57.2%	Mississippi	73.8%*	South Dakota	61.8%
District of Columbia	67.2%*	Missouri	58.3%	Tennessee	51.7%*
Florida	54.9%	Montana	45.8%*	Texas	59.4%
Georgia	53.6%	Nebraska	55.2%	Utah	54.2%
Hawaii	71.4%*	Nevada	68.5%*	Vermont	43.8%*
Idaho	61.3%	New Hampshire	54.7%	Virginia	57.6%
Illinois	60.9%	New Jersey	68.1%*	Washington	60.5%
Indiana	49.5%*	New Mexico	72.2%*	West Virginia	53.5%
Iowa	53.8%	New York	55.3%	Wisconsin	39.0%*
Kansas	57.0%	North Carolina	64.9%	Wyoming	37.7%*

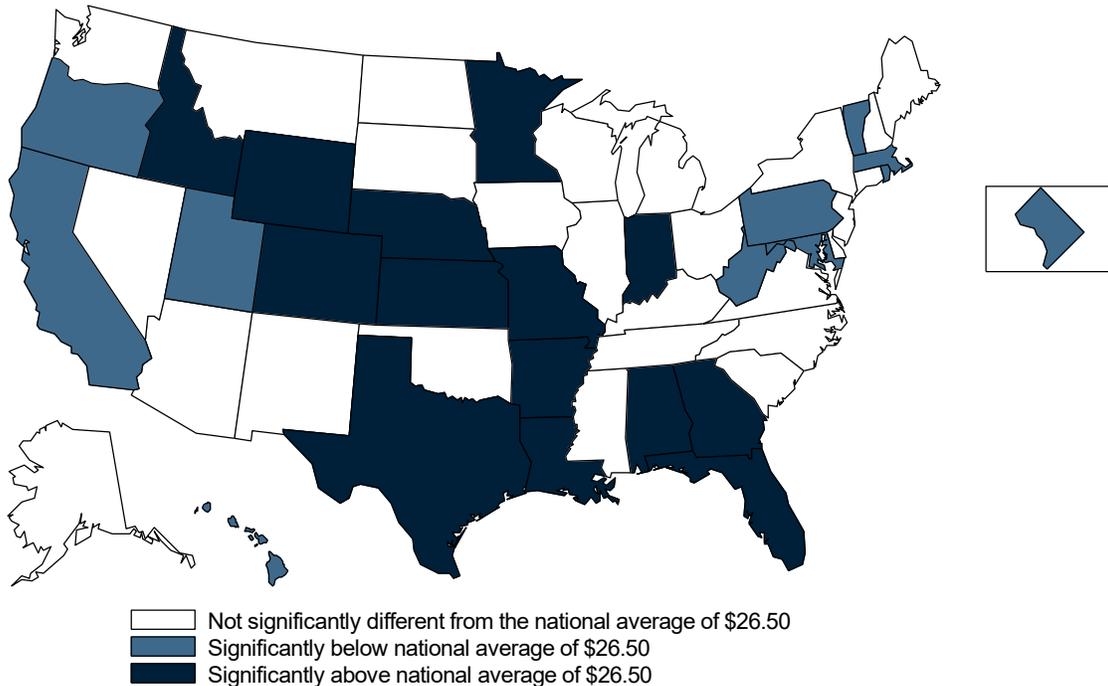
Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.

Note: * Indicates the estimate is statistically different from the national average of 59.2 percent at $p < 0.05$.

For data points and standard errors for this exhibit, select here.

Exhibit 5.14

Average copayment (in dollars) for a physician office visit per employee enrolled in a health insurance plan with a physician visit copayment, overall and by State, 2017

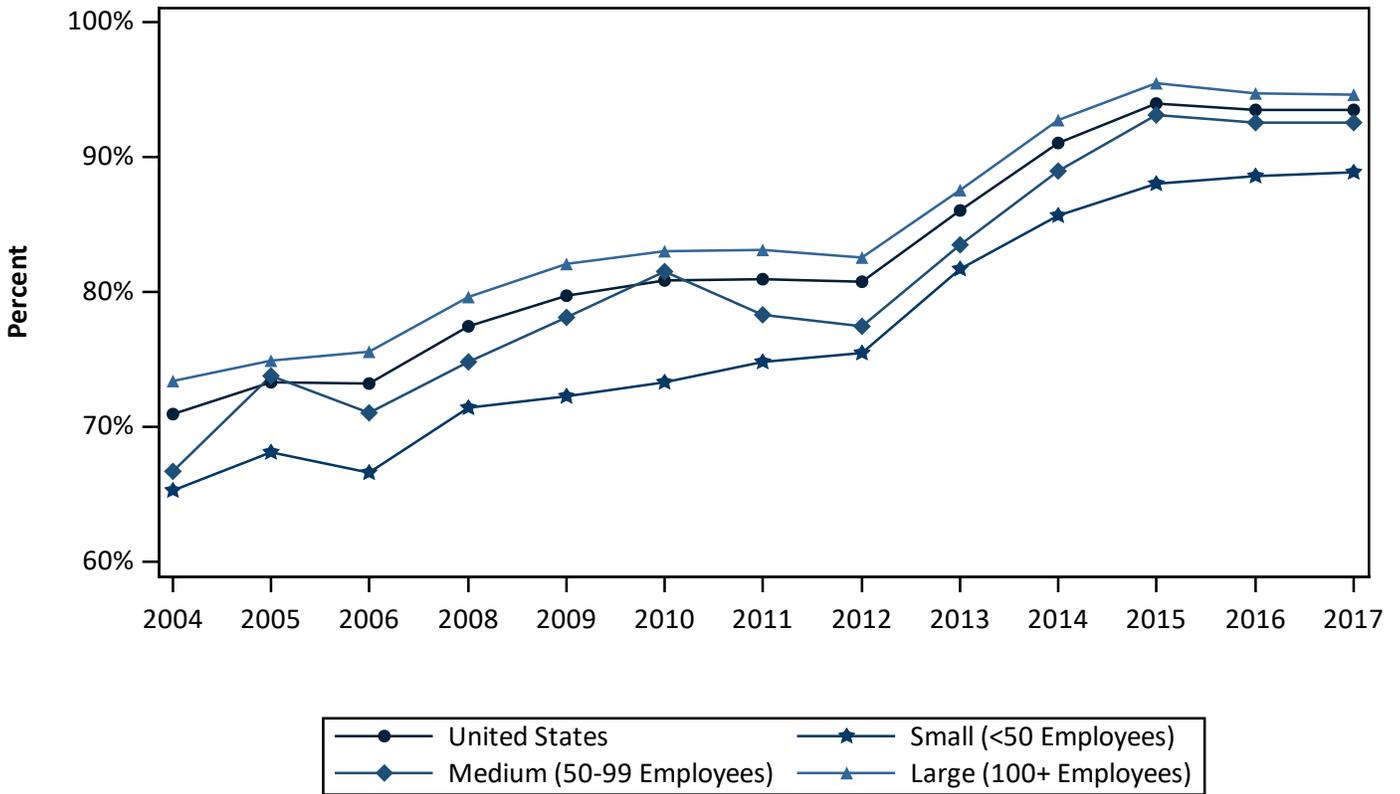


Alabama	\$29.29*	Kentucky	\$26.00	North Dakota	\$26.09
Alaska	\$27.81	Louisiana	\$30.37*	Ohio	\$26.88
Arizona	\$27.77	Maine	\$26.25	Oklahoma	\$27.16
Arkansas	\$28.36*	Maryland	\$23.26*	Oregon	\$24.99*
California	\$25.13*	Massachusetts	\$23.99*	Pennsylvania	\$24.17*
Colorado	\$28.32*	Michigan	\$25.59	Rhode Island	\$22.40*
Connecticut	\$27.21	Minnesota	\$30.24*	South Carolina	\$26.13
Delaware	\$26.34	Mississippi	\$28.18	South Dakota	\$25.94
District of Columbia	\$22.64*	Missouri	\$28.24*	Tennessee	\$27.20
Florida	\$28.86*	Montana	\$26.11	Texas	\$27.73*
Georgia	\$29.98*	Nebraska	\$28.02*	Utah	\$23.86*
Hawaii	\$16.03*	Nevada	\$25.54	Vermont	\$22.39*
Idaho	\$27.85*	New Hampshire	\$26.73	Virginia	\$26.88
Illinois	\$27.03	New Jersey	\$25.18	Washington	\$25.36
Indiana	\$28.34*	New Mexico	\$25.69	West Virginia	\$24.67*
Iowa	\$25.74	New York	\$26.11	Wisconsin	\$26.37
Kansas	\$28.76*	North Carolina	\$26.83	Wyoming	\$28.36*

Source: Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2017.
Note: * Indicates the estimate is statistically different from the national average of \$26.50 at $p < 0.05$.
For data points and standard errors for this exhibit, select here.

Exhibit 5.15

Percentage of private-sector employees enrolled with single coverage in a health insurance plan with an individual maximum out-of-pocket payment, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 5.15

Percentage of private-sector employees enrolled with single coverage in a health insurance plan with an individual maximum out-of-pocket payment, overall and by firm size, 2004-2017

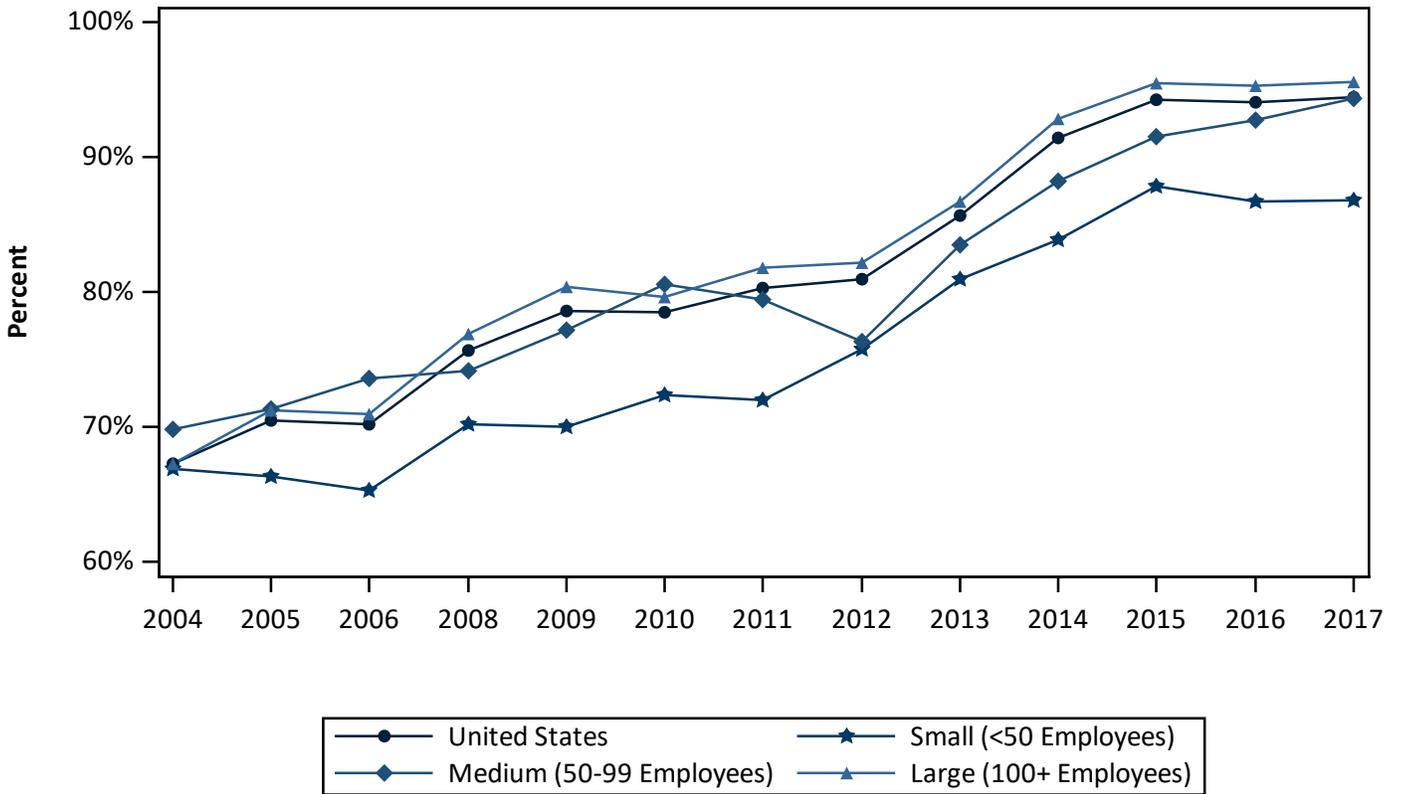
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	70.9%	73.3%	73.2%	77.4%	79.7%	80.8%	81.0%	80.7%	86.0%	91.1%	93.9%	93.5%	93.4%
<50	65.3%	68.1%	66.6%	71.4%	72.3%	73.3%	74.8%	75.4%	81.7%	85.7%	88.1%	88.6%	88.8%
50-99	66.7%	73.7%	71.0%	74.8%	78.1%	81.5%	78.3%	77.4%	83.5%	88.9%	93.1%	92.5%	92.5%
100+	73.4%	75.0%	75.6%	79.6%	82.1%	83.0%	83.1%	82.6%	87.6%	92.7%	95.5%	94.7%	94.6%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.16

Percentage of private-sector employees enrolled with family coverage in a health insurance plan with a family maximum out-of-pocket payment, overall and by firm size, 2004-2017



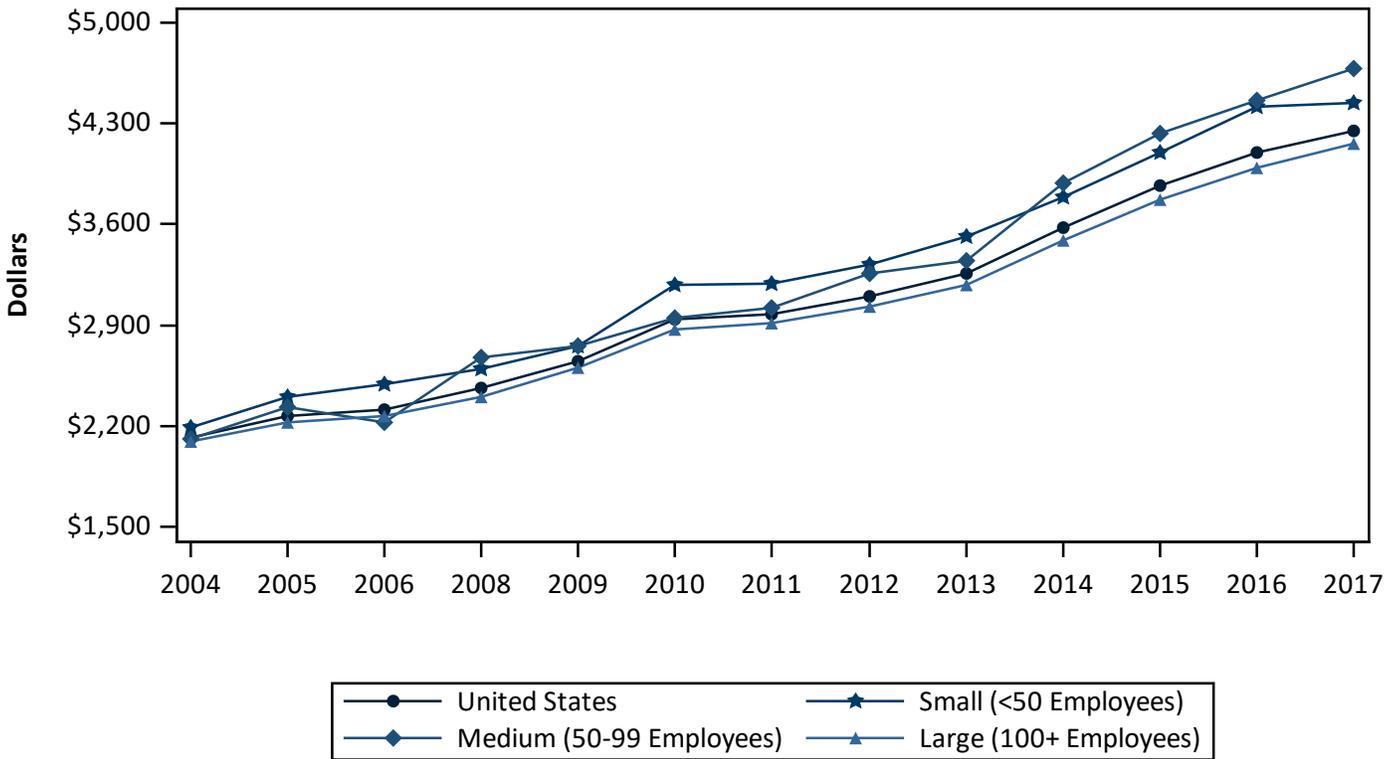
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 5.16													
Percentage of private-sector employees enrolled with family coverage in a health insurance plan with a family maximum out-of-pocket payment, overall and by firm size, 2004-2017													
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	67.3%	70.5%	70.2%	75.7%	78.6%	78.5%	80.3%	80.9%	85.7%	91.4%	94.3%	94.0%	94.4%
<50	66.9%	66.3%	65.3%	70.2%	70.0%	72.3%	72.0%	75.8%	80.9%	83.8%	87.8%	86.7%	86.8%
50-99	69.8%	71.4%	73.6%	74.1%	77.2%	80.6%	79.5%	76.4%	83.5%	88.2%	91.5%	92.7%	94.3%
100+	67.2%	71.3%	71.0%	76.9%	80.4%	79.6%	81.8%	82.1%	86.7%	92.9%	95.4%	95.3%	95.6%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 5.17

Average individual maximum out-of-pocket payment (in dollars) per employee enrolled with single coverage in a health insurance plan with an individual maximum out-of-pocket payment, overall and by firm size, 2004-2017



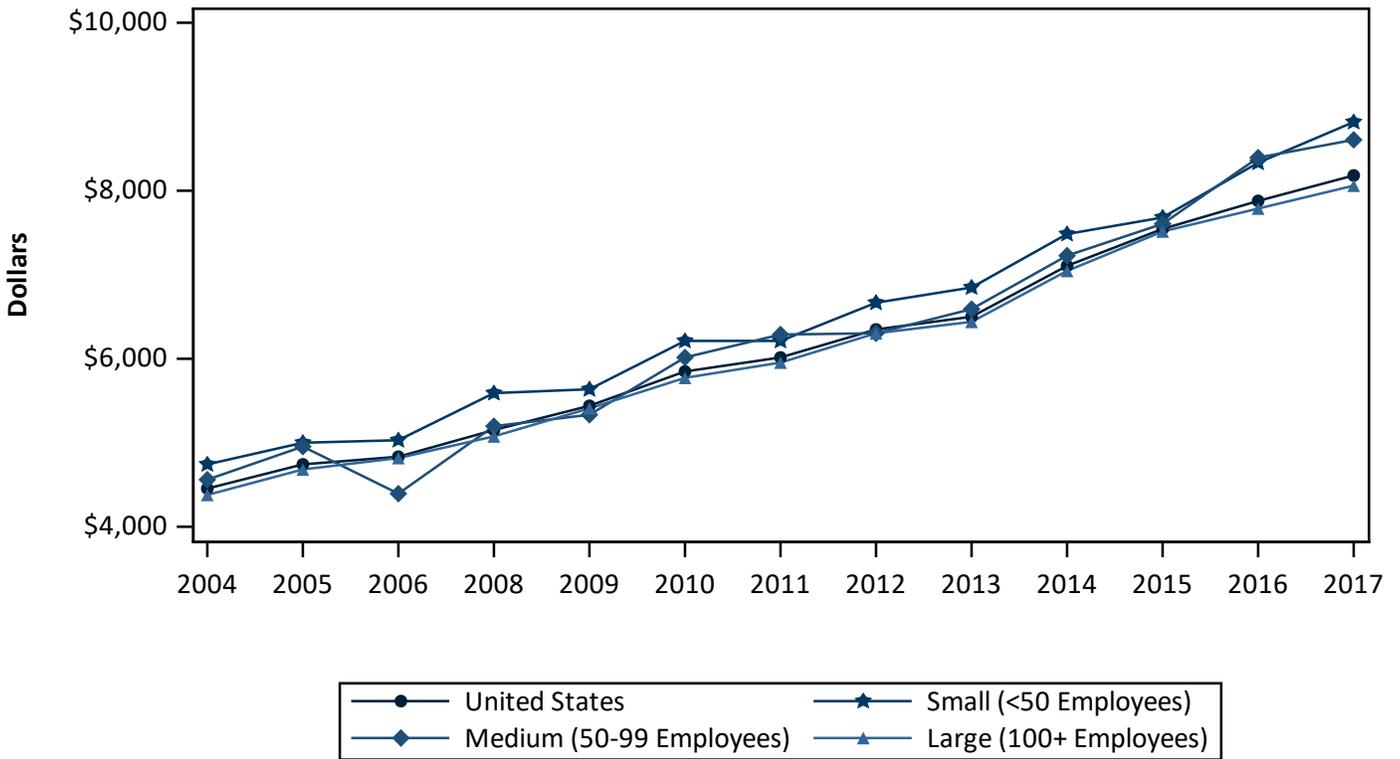
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 5.17													
Average individual maximum out-of-pocket payment (in dollars) per employee enrolled with single coverage in a health insurance plan with an individual maximum out-of-pocket payment, overall and by firm size, 2004-2017													
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$2,118	\$2,274	\$2,316	\$2,466	\$2,649	\$2,939	\$2,980	\$3,099	\$3,259	\$3,575	\$3,865	\$4,099	\$4,246
<50	\$2,192	\$2,407	\$2,492	\$2,601	\$2,758	\$3,177	\$3,191	\$3,321	\$3,515	\$3,787	\$4,096	\$4,420	\$4,446
50-99	\$2,110	\$2,332	\$2,228	\$2,675	\$2,757	\$2,952	\$3,019	\$3,263	\$3,346	\$3,885	\$4,230	\$4,463	\$4,678
100+	\$2,095	\$2,228	\$2,275	\$2,405	\$2,608	\$2,874	\$2,920	\$3,026	\$3,182	\$3,489	\$3,774	\$3,992	\$4,158

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.
For data points and standard errors for this exhibit, select here.

Exhibit 5.18

Average family maximum out-of-pocket payment (in dollars) per employee enrolled with family coverage in a health insurance plan with a family maximum out-of-pocket payment, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Data for Exhibit 5.18

Average family maximum out-of-pocket payment (in dollars) per employee enrolled with family coverage in a health insurance plan with a family maximum out-of-pocket payment, overall and by firm size, 2004-2017

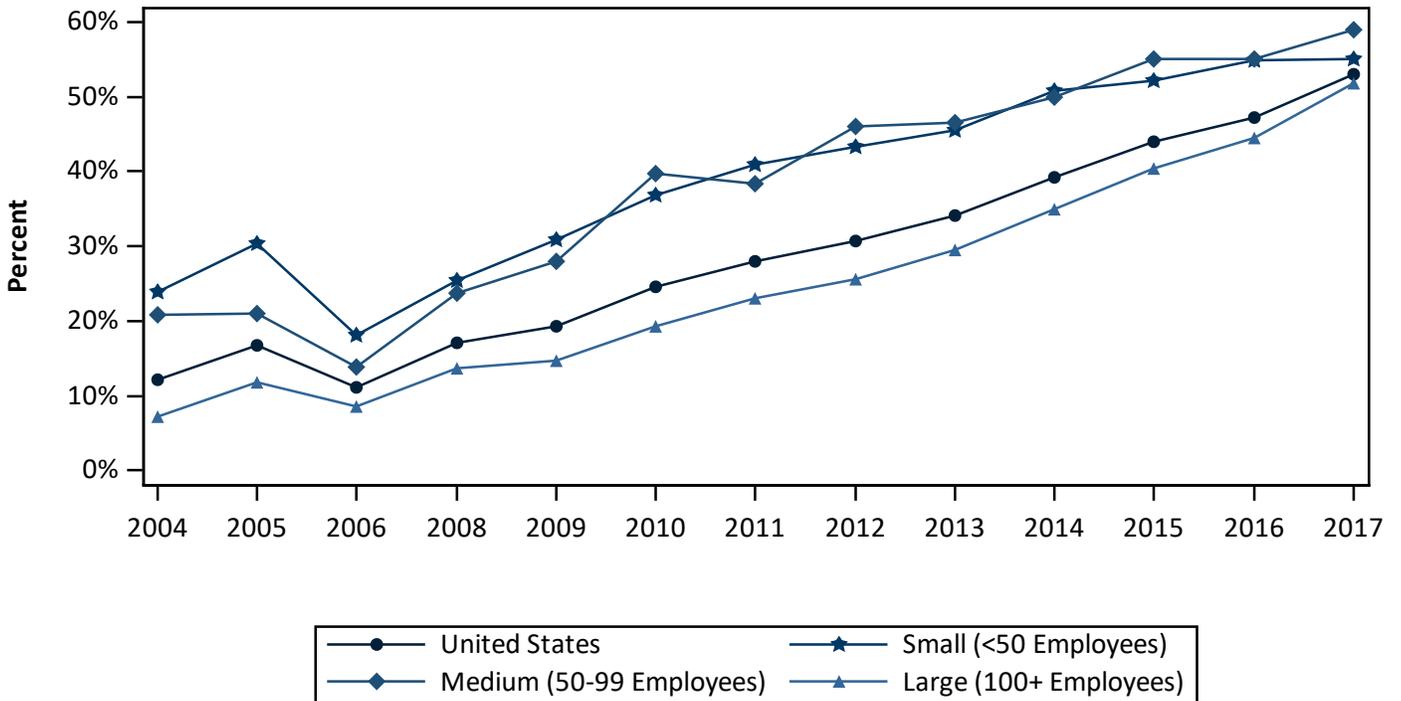
Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	\$4,456	\$4,745	\$4,832	\$5,156	\$5,438	\$5,854	\$6,010	\$6,356	\$6,500	\$7,114	\$7,542	\$7,881	\$8,183
<50	\$4,743	\$5,000	\$5,032	\$5,594	\$5,638	\$6,209	\$6,210	\$6,671	\$6,843	\$7,488	\$7,676	\$8,330	\$8,821
50-99	\$4,566	\$4,959	\$4,403	\$5,207	\$5,340	\$6,015	\$6,296	\$6,299	\$6,594	\$7,228	\$7,608	\$8,393	\$8,605
100+	\$4,383	\$4,684	\$4,823	\$5,076	\$5,410	\$5,779	\$5,961	\$6,311	\$6,440	\$7,050	\$7,519	\$7,785	\$8,066

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.
Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

For data points and standard errors for this exhibit, select here.

Exhibit 5.19

Percentage of private-sector employees enrolled with single coverage in a high-deductible health insurance plan, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Single coverage plans are classified as “high deductible” if the individual deductible met or exceeded the Internal Revenue Service (IRS) threshold for a high-deductible plan in a given year. In 2017, the individual deductible threshold was \$1,300. Note that plans must also meet other requirements to be considered a high-deductible plan by the IRS.

Data for Exhibit 5.19

Percentage of private-sector employees enrolled with single coverage in a high-deductible health insurance plan, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	12.2%	16.8%	11.1%	17.1%	19.2%	24.6%	28.0%	30.7%	34.1%	39.2%	43.9%	47.1%	53.0%
<50	23.9%	30.3%	18.0%	25.4%	30.8%	36.8%	40.9%	43.3%	45.6%	50.7%	52.1%	54.9%	55.1%
50-99	20.8%	21.0%	13.9%	23.7%	28.0%	39.8%	38.3%	46.1%	46.5%	50.0%	55.0%	55.0%	58.9%
100+	7.2%	11.9%	8.6%	13.6%	14.7%	19.3%	23.1%	25.5%	29.4%	35.0%	40.5%	44.5%	51.8%

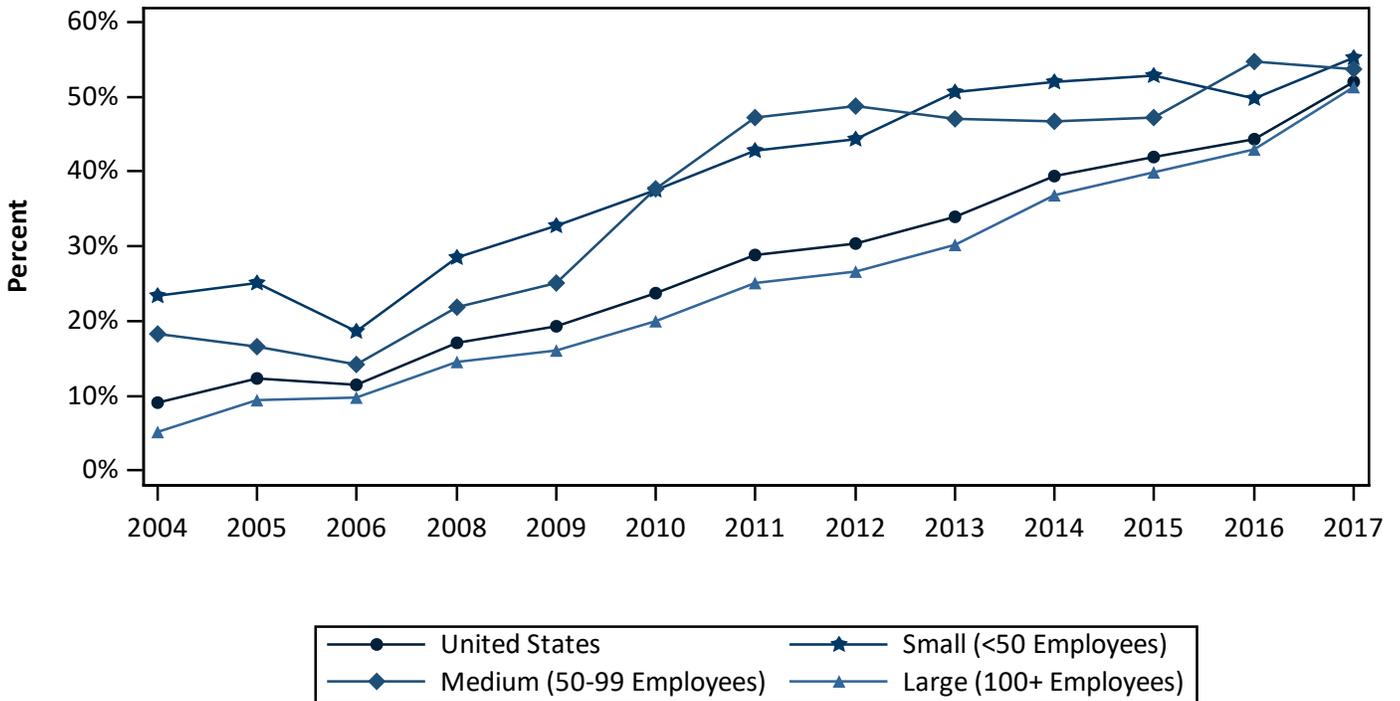
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Single coverage plans are classified as “high deductible” if the individual deductible met or exceeded the Internal Revenue Service (IRS) threshold for a high-deductible plan in a given year. In 2017, the individual deductible threshold was \$1,300. Note that plans must also meet other requirements to be considered a high-deductible plan by the IRS.

For data points and standard errors for this exhibit, select here.

Exhibit 5.20

Percentage of private-sector employees enrolled with family coverage in a high-deductible health insurance plan, overall and by firm size, 2004-2017



Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Family coverage plans are classified as “high deductible” if the family deductible met or exceeded the Internal Revenue Service (IRS) threshold for a high-deductible plan in a given year. In 2017, the family deductible threshold was \$2,600. Note that plans must also meet other requirements to be considered a high-deductible plan by the IRS.

Data for Exhibit 5.20

Percentage of private-sector employees enrolled with family coverage in a high-deductible health insurance plan, overall and by firm size, 2004-2017

Number of Employees	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017
U.S.	9.1%	12.3%	11.5%	17.1%	19.3%	23.7%	28.8%	30.3%	33.9%	39.4%	41.9%	44.4%	51.9%
<50	23.4%	25.1%	18.6%	28.5%	32.7%	37.5%	42.7%	44.3%	50.6%	51.9%	52.7%	49.8%	55.2%
50-99	18.2%	16.6%	14.3%	21.8%	25.0%	37.7%	47.1%	48.8%	47.1%	46.6%	47.2%	54.6%	53.7%
100+	5.2%	9.5%	9.8%	14.6%	16.2%	20.0%	25.1%	26.6%	30.2%	36.8%	39.8%	42.9%	51.3%

Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2017.

Note: Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Family coverage plans are classified as “high deductible” if the family deductible met or exceeded the Internal Revenue Service (IRS) threshold for a high-deductible plan in a given year. In 2017, the family deductible threshold was \$2,600. Note that plans must also meet other requirements to be considered a high-deductible plan by the IRS.

For data points and standard errors for this exhibit, select here.

