



Health Insurance Benefits at Private Employers, Estimates from MEPS-Insurance Component: 2008–2024

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Abstract

Employer-sponsored insurance (ESI) is the primary source of health insurance coverage for individuals under age 65 in the United States. This Research Findings report uses data from the 2008-2024 Medical Expenditure Panel Survey–Insurance Component to examine trends in private-sector ESI benefits, including eligibility, offers, enrollment, coverage, premiums, employee contributions, and deductibles.

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Introduction

Employer-sponsored insurance (ESI) is the primary source of health insurance coverage for individuals under age 65. This Research Findings report uses data from the Medical Expenditure Panel Survey-Insurance Component (MEPS-IC) private sector national tables to describe trends in employer coverage, premiums, and deductibles from 2008 to 2024, focusing primarily on changes from 2023 to 2024. 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.

This Research Findings report describes trends and patterns in ESI for private sector employees, overall and by firm size (small firms with fewer than 50 employees versus large firms with 50 or more employees). All differences discussed in the text are statistically significant at the 0.05 level. All dollar estimates are nominal (not adjusted for inflation).

Findings

Enrollment rates and number of covered employees (figures 1-2)

The overall enrollment rate – the percentage of private sector employees covered by a health insurance plan offered by their employers – was 47.1 percent in 2024 and did not change significantly compared to 2023 (figure 1). Enrollment rates vary substantially by firm size, with 26.8 percent enrolled at small firms, compared to 54.3 percent at large firms, in 2024.

The total number of private sector workers enrolled in a health insurance plan offered by their employers was 65.6 million, with 9.8 million in firms with fewer than 50 employees and 56.0 million in large firms. There were no statistically significant changes from 2023 (figure 2).

Offer rates (figure 3)

The offer rate—or the percentage of employees working at an establishment that offered insurance—did not change significantly overall or by firm size from 2023 to 2024 (figure 3). Nationally, 85.1 percent of employees worked in an establishment that offered insurance in 2024. Across all years, offer rates were lower in small firms compared to large firms. In 2024, the offer rate among small firms was 50.5 percent, compared to 97.4 percent in large firms. Over the period from 2008 to 2024, offer rates declined by over 10 percentage points among small firms, from 61.6 percent in 2008 to 50.5 percent in 2024.

Eligibility rates (figure 4)

Overall, 80.2 percent of employees were eligible for insurance at private sector establishments that offered insurance coverage in 2024 (figure 4). These rates were not statistically different from 2023. Eligibility rates were similar for small (79.6%) and large firms (80.3%).

Highlights

- In 2024, average health insurance premiums were \$8,486 for single coverage, \$16,931 for employee-plus-one coverage, and \$24,540 for family coverage, representing increases of 3.7, 4.9 and 2.5 percent, respectively, from 2023.
- Average employee contributions in 2024 increased from the previous year by 9.1 percent for single coverage (\$1,789) and 5.2 percent for employee-plus-one coverage (\$4,707).
- Average deductibles for single plans increased by 8.0 percent to \$2,085 and average family deductibles increased by 8.8 percent to \$4,063 from 2023 to 2024.
- The offer rate, total number of enrollees and take up rates did not change significantly overall or by firm size from 2023 to 2024.
- Over the period from 2008 to 2024, offer rates declined by over 10 percentage points among small firms, from 61.6 percent in 2008 to 50.5 percent in 2024.
- From 2008 to 2024, the overall take-up rate fell by 9.7 percentage points (from 78.7 to 69.0 percent) and take-up rates fell by similar amounts in small and large firms.

Take-up rates (figure 5)

The overall take-up rate for employees at private sector establishments who were eligible for insurance did not show a statistically significant change from 2023 (68.8%) to 2024 (69.0%) (figure 5). In 2024, the take-up rate among large firms (69.4%) remained higher than in small firms (66.6%), as has been true in every year since 2008. From 2008 to 2024, the overall take-up rate fell by 9.7 percentage points (from 78.7% to 69.0%) and take-up rates fell by similar amounts in small (9.4 percentage points) and large firms (9.9 percentage points).

Premiums (figures 6-9)

In 2024, average health insurance premiums were \$8,486 for single coverage, \$16,931 for employee-plus-one coverage and \$24,540 for family coverage, representing increases of 3.7, 4.9, and 2.5 percent, respectively, relative to 2023 (figures 6-9). In 2024, average premiums were lower for small firms than for large firms for single, employee-plus-one, and family coverage. Small and large firms both contributed to the overall growth in premiums for single and employee-plus-one coverage from 2023 to 2024. The overall growth in family premiums was driven by an 8.5 percent annual increase in small firm premiums.

The 2024 increases followed above average increases of 7.8, 8.0, and 9.2 percent between 2022 and 2023 for single, employee-plus-one, and family coverage, respectively. The 2022 to 2023 increases exceeded average annual growth rates from 2008 to 2024 which were 4.2, 4.4, and 4.4 percent for single, employee-plus-one, and family coverage, respectively.

Employee premium contributions (figures 10-12)

Average employee contributions for single coverage (\$1,789) and employee-plus-one (\$4,707) coverage increased by 9.1 and 5.2 percent respectively, from 2023 to 2024 (Figures 10 and 11). Year-over-year growth in employee contributions for single coverage was driven by large firms, with an increase of 10.8 percent to \$1,796. Employee contributions for family coverage in 2024 (\$7,216) were not significantly different from 2023, overall or by firm size (Figure 12). Between 2008 and 2016, small firm employee contributions for family coverage grew at an average annual rate of 3.4 percent before beginning to increase more rapidly, with an average annual growth rate of 7.4 percent between 2016 and 2024.

Deductibles (figures 13-15)

Compared to 2023, the percentage of enrollees in health insurance plans with deductibles in 2024 was not significantly different either for firms overall (88.0%) or for small (86.9%) or large (88.2%) firms (figure 13). From 2008 to 2024, the percentage of enrollees with a deductible increased by 16.0 percentage points among small firms and by 17.6 percentage points among large firms.

After several years of no significant changes, average single plan deductibles increased from 2023 to 2024 by 8.0 percent to \$2,085, and average family deductibles increased by 8.8 percent to \$4,063 (figures 14 and 15). Average single and family deductibles were higher in small than in large firms for all years 2008 to 2024. In 2024, average single deductibles were \$2,474 in small firms, compared to \$2,007 in large firms, and family deductibles were \$5,087 in small firms, compared to \$3,920 in large firms. Increases in deductibles between 2023 and 2024 were driven by large firms, with increases of 10.1 and 10.5 percent for single and family deductibles, respectively. There were no significant changes in average deductible amounts in small firms.

From 2008 to 2017, single and family deductible amounts doubled, with an average annual growth rate of 8.5 percent for single coverage and 8.3 percent for family coverage over this period. From 2017 to 2024, deductibles grew at a slower rate of 2.1 percent for single coverage and 2.6 percent for family coverage.

Definitions

Single coverage

Single coverage is health insurance that covers the employee only.

Employee-plus-one coverage

Health insurance coverage for an employee and the employee's spouse or an employee and the employee's child, at a lower premium level than family coverage. If premiums differed for employee-plus-spouse and employee-plus-child coverage, information for employee-plus-child coverage was collected.

Family coverage

A health insurance plan that covers the employee and one or more family members (spouse and/or children as defined by the plan). For the MEPS-IC survey, family coverage is any coverage other than single and employee-plus-one. Some plans offer more than one rate for family coverage, depending on family size and composition. If more than one rate is offered, survey respondents are asked to report costs for a family of four.

Enrollment rate

The enrollment rate is the percentage of all employees enrolled in their employer's health insurance at establishments both offering and not offering health insurance.

Offer rate

The offer rate is the percentage of employees who work at establishments that offer health insurance.

Eligible employees

Eligible employees are those that are allowed to enroll in employer-sponsored coverage offered by their employer. Common eligibility criteria include a minimum number of hours worked per pay period or a minimum length of service with the employer.

Employee

An employee is a person on the actual payroll. This definition excludes temporary and contract workers but includes the owner or manager if that person works at the firm.

Establishment

An establishment is a single physical location of a business.

Health insurance plan

A health insurance plan is an insurance contract that provides hospital and/or physician coverage to an employee for an agreed-upon fee (premium) for a defined benefit period.

Take-up rate

The take-up rate is the percentage of eligible employees who enroll in health insurance coverage through their employer at establishments that offer insurance.

Deductible

A deductible is a fixed dollar amount during the benefit period—usually a year—that an insured person pays before the insurer starts to make payments for covered medical services.

About MEPS-IC

The MEPS-IC is a survey of private sector business establishments and state and local governments that collects information on employer-sponsored health insurance, such as whether insurance is offered, enrollments, types of plans, and premiums. The survey is conducted annually by the U.S. Census Bureau under the sponsorship of the Agency for Healthcare Research and Quality (AHRQ). A total sample of approximately 42,519 private sector establishments was selected for the 2024 survey, with 4.6 percent of the sample determined to be out of scope during the data collection process. The response rate for the private sector was 51.2 percent of the remaining in-scope sample units. Private-sector responses to the 2024 survey were collected from May 2024 through April 2025.

Data Source

This Research Findings report summarizes data from 2008 through 2024 MEPS-IC. The data are available on the MEPS website at https://meps.ahrq.gov/survey_comp/Insurance.jsp.

References

Medical Expenditure Panel Survey Insurance Component: Technical Notes and Survey Documentation. Rockville, MD: Agency for Healthcare Research and Quality. https://meps.ahrq.gov/survey_comp/ic_technical_notes.shtml.

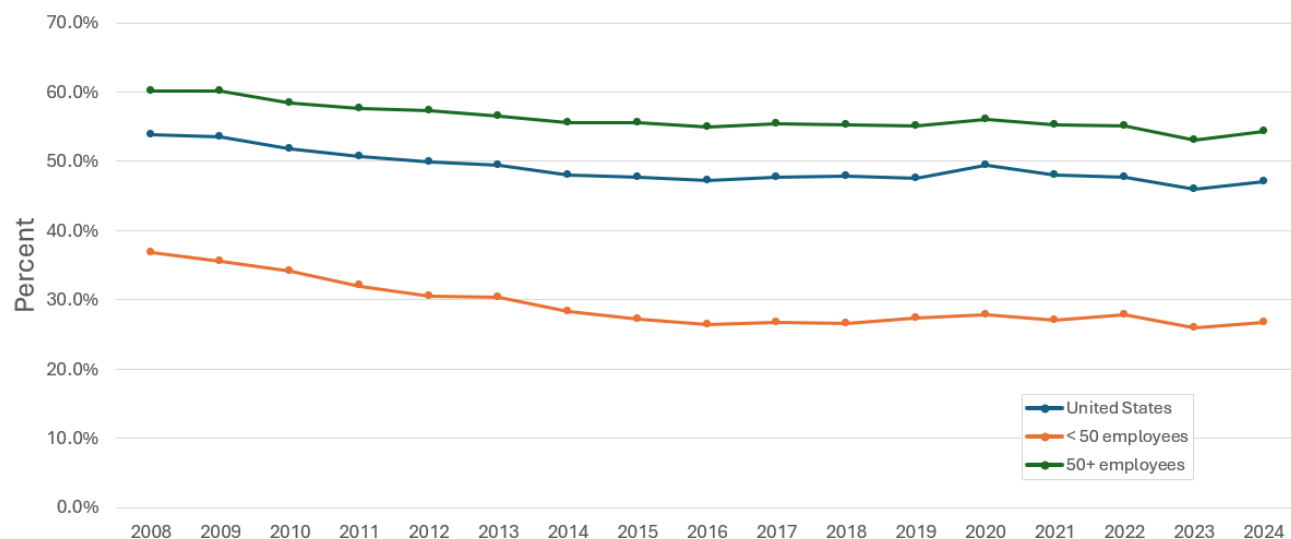
Davis, K. Sample Design of the 2020 Medical Expenditure Panel Survey Insurance Component. Methodology Report #34. Rockville, MD: AHRQ; August 2021. https://meps.ahrq.gov/data_files/publications/mr34/mr34.pdf.

AHRQ welcomes questions and comments from readers of this publication who are interested in obtaining more information about access, cost, use, financing, and quality of healthcare in the United States. We also invite you to tell us how you are using this Research Finding and other MEPS data and tools and to share suggestions on how MEPS products might be enhanced to further meet your needs. Please email us at MEPSProjectDirector@ahrq.hhs.gov or send a letter to the address below:

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Tables and Figures

Figure 1. Enrollment Rate: Percentage of all private-sector employees enrolled in employer-sponsored health insurance, overall and by firm size, 2008–2024

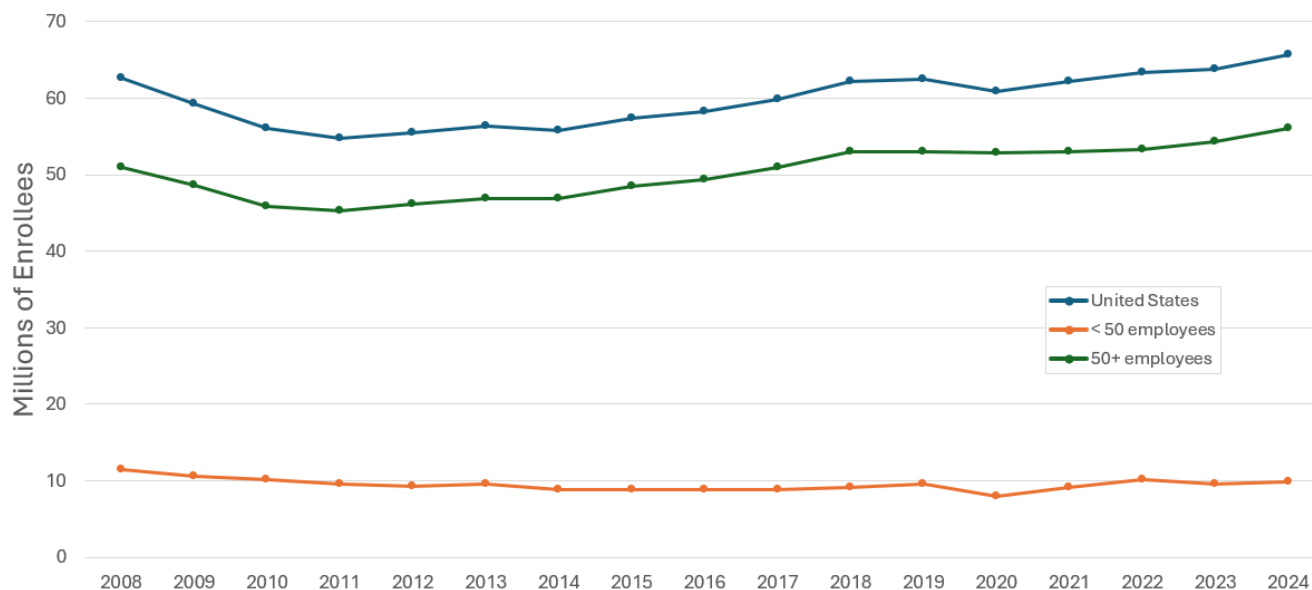


	United States (%)	<50 employees (%)	50+ employees (%)
2008	53.9	36.8	60.2
2009	53.5	35.5	60.2
2010	51.8	34.2	58.4
2011	50.6	32.0	57.7
2012	49.9	30.5	57.3
2013	49.4	30.3	56.6
2014	48.1	28.3	55.6
2015	47.8	27.1	55.5
2016	47.2	26.5	54.9
2017	47.7	26.7	55.4
2018	47.8	26.6	55.3
2019	47.6	27.3	55.1
2020	49.5	27.8	56.1
2021	48.0	27.1	55.3
2022	47.7	27.9	55.2
2023	46.0	26.0	53.1
2024	47.1	26.8	54.3

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

Denominator: Within each category, all employees in establishments.

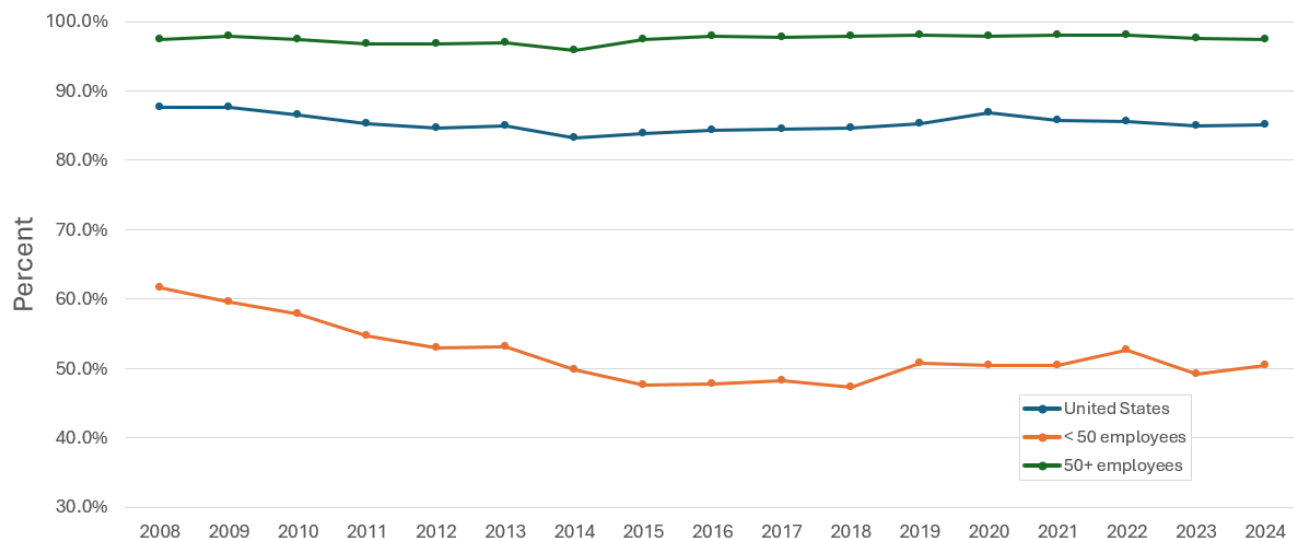
Figure 2. Total number (in millions) of private-sector enrollees in employer-sponsored health insurance, overall and by firm size, 2008–2024



	United States (millions)	<50 employees (millions)	50+ employees (millions)
2008	62.6	11.5	51.0
2009	59.2	10.6	48.6
2010	56.1	10.2	45.9
2011	54.8	9.5	45.3
2012	55.4	9.3	46.1
2013	56.3	9.5	46.8
2014	55.8	8.9	46.9
2015	57.3	8.9	48.4
2016	58.2	8.9	49.3
2017	59.9	8.9	51.0
2018	62.1	9.1	53.0
2019	62.5	9.6	53.0
2020	60.8	7.9	52.8
2021	62.2	9.2	53.0
2022	63.4	10.1	53.3
2023	63.8	9.5	54.3
2024	65.6	9.8	56.0

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

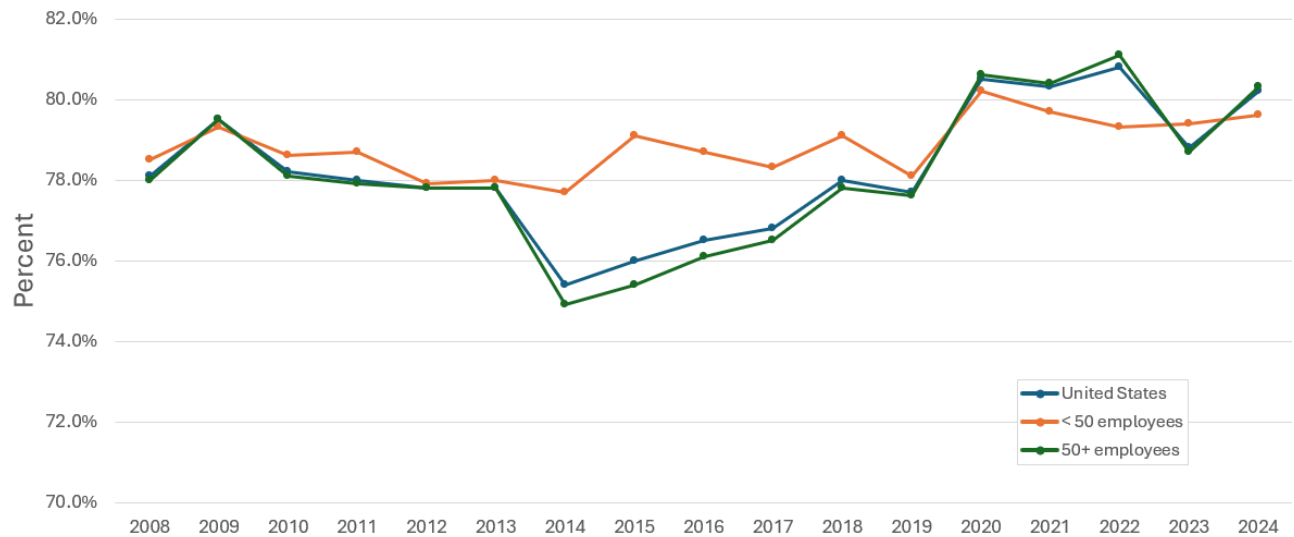
Figure 3. Offer rate: Percentage of private-sector employees in establishments that offer health insurance, overall and by firm size, 2008–2024



	United States (%)	<50 employees (%)	50+ employees (%)
2008	87.7	61.6	97.4
2009	87.6	59.6	97.9
2010	86.5	57.8	97.4
2011	85.3	54.7	96.8
2012	84.7	52.9	96.8
2013	84.9	53.1	96.9
2014	83.2	49.8	95.8
2015	83.8	47.6	97.4
2016	84.3	47.7	97.9
2017	84.5	48.3	97.7
2018	84.6	47.3	97.9
2019	85.3	50.7	98.0
2020	86.9	50.5	97.9
2021	85.7	50.4	98.1
2022	85.6	52.6	98.0
2023	84.9	49.2	97.6
2024	85.1	50.5	97.4

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

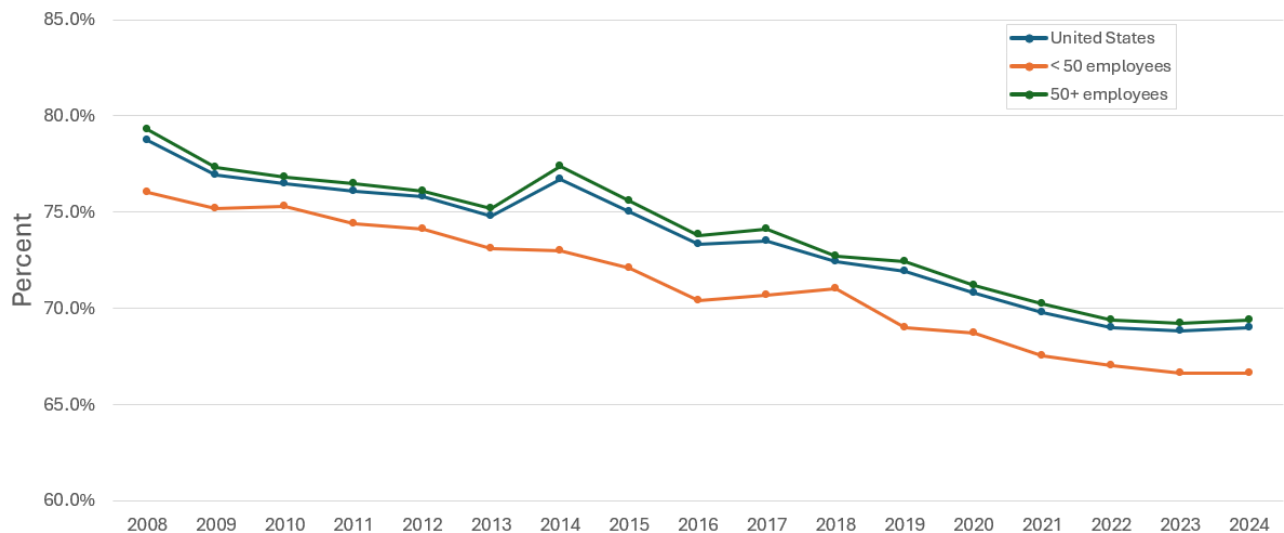
Figure 4. Eligibility rate: Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by firm size, 2008–2024



	United States (%)	<50 employees (%)	50+ employees (%)
2008	78.1	78.5	78.0
2009	79.5	79.3	79.5
2010	78.2	78.6	78.1
2011	78.0	78.7	77.9
2012	77.8	77.9	77.8
2013	77.8	78.0	77.8
2014	75.4	77.7	74.9
2015	76.0	79.1	75.4
2016	76.5	78.7	76.1
2017	76.8	78.3	76.5
2018	78.0	79.1	77.8
2019	77.7	78.1	77.6
2020	80.5	80.2	80.6
2021	80.3	79.7	80.4
2022	80.8	79.3	81.1
2023	78.8	79.4	78.7
2024	80.2	79.6	80.3

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

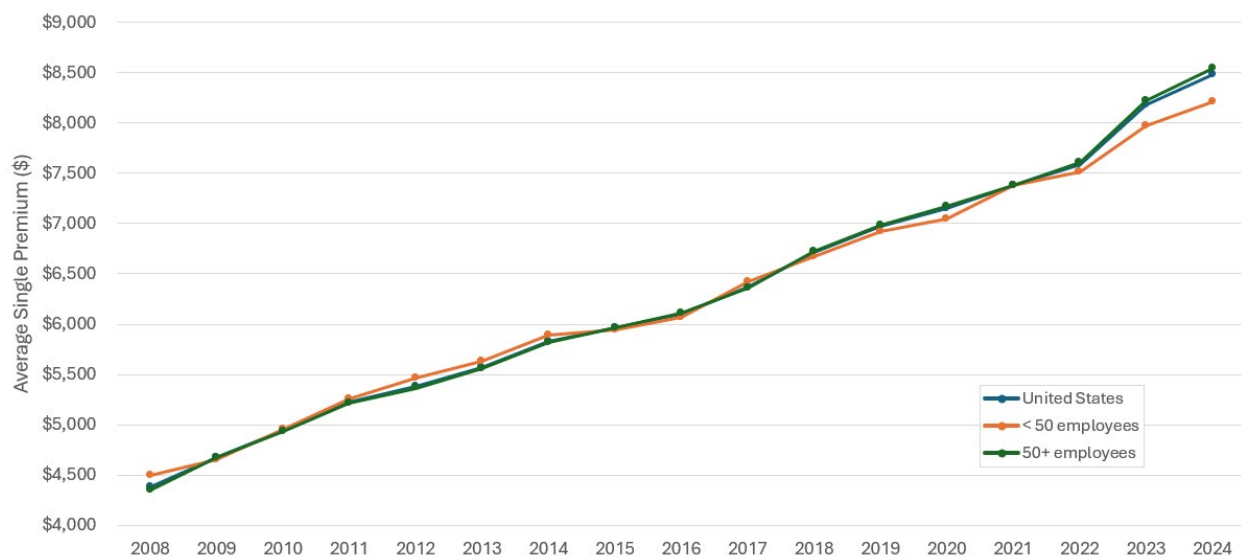
Figure 5. Take-up rate: Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2008–2024



	United States (%)	<50 employees (%)	50+ employees (%)
2008	78.7	76.0	79.3
2009	76.9	75.2	77.3
2010	76.5	75.3	76.8
2011	76.1	74.4	76.5
2012	75.8	74.1	76.1
2013	74.8	73.1	75.2
2014	76.7	73.0	77.4
2015	75.0	72.1	75.6
2016	73.3	70.4	73.8
2017	73.5	70.7	74.1
2018	72.4	71.0	72.7
2019	71.9	69.0	72.4
2020	70.8	68.7	71.2
2021	69.8	67.5	70.2
2022	69.0	67.0	69.4
2023	68.8	66.6	69.2
2024	69.0	66.6	69.4

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

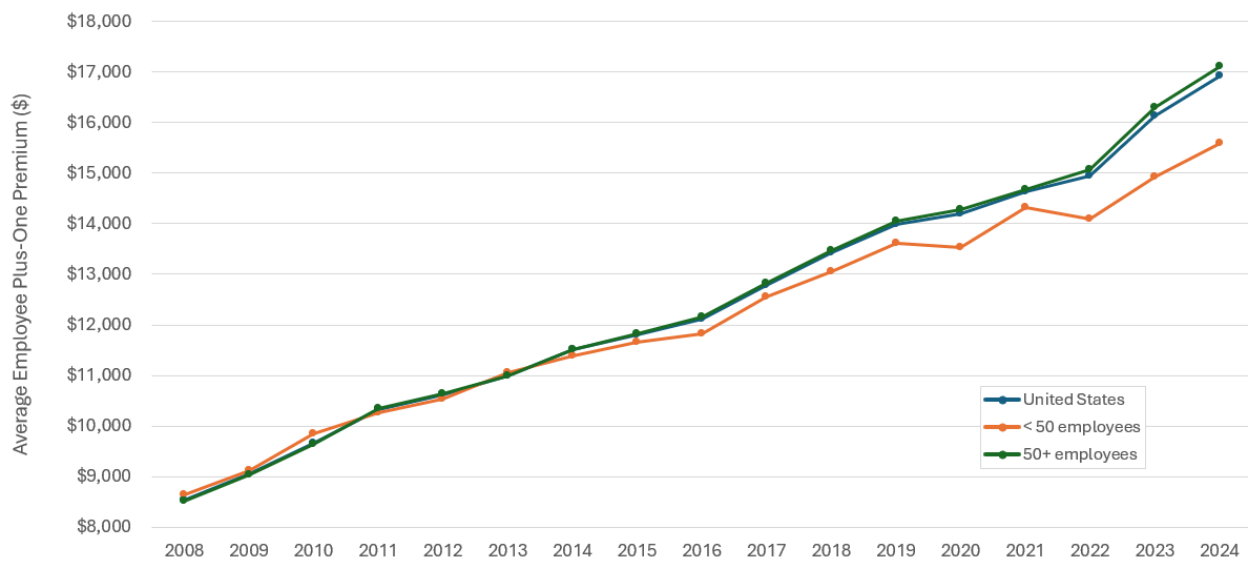
Figure 6. Average total single premium per enrolled private-sector employee, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	4,386	4,501	4,354
2009	4,669	4,652	4,674
2010	4,940	4,956	4,935
2011	5,222	5,258	5,213
2012	5,384	5,460	5,365
2013	5,571	5,628	5,556
2014	5,832	5,886	5,819
2015	5,963	5,947	5,967
2016	6,101	6,070	6,108
2017	6,368	6,421	6,357
2018	6,715	6,667	6,725
2019	6,972	6,920	6,983
2020	7,149	7,045	7,167
2021	7,380	7,382	7,380
2022	7,590	7,513	7,607
2023	8,182	7,974	8,223
2024	8,486	8,215	8,540

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

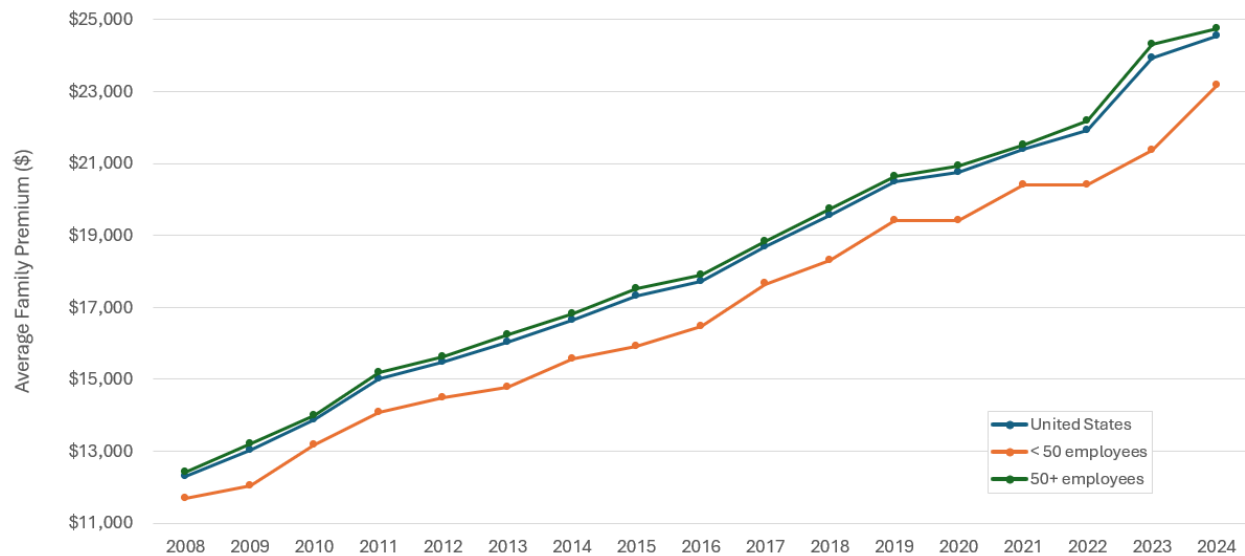
Figure 7. Average total employee plus-one premium per enrolled private-sector employee, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	8,535	8,631	8,519
2009	9,053	9,124	9,042
2010	9,664	9,850	9,635
2011	10,329	10,253	10,341
2012	10,621	10,524	10,636
2013	10,990	11,050	10,982
2014	11,503	11,386	11,519
2015	11,800	11,666	11,817
2016	12,124	11,833	12,166
2017	12,789	12,558	12,818
2018	13,425	13,044	13,475
2019	13,989	13,619	14,044
2020	14,191	13,522	14,271
2021	14,634	14,326	14,677
2022	14,943	14,093	15,066
2023	16,141	14,917	16,303
2024	16,931	15,583	17,116

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

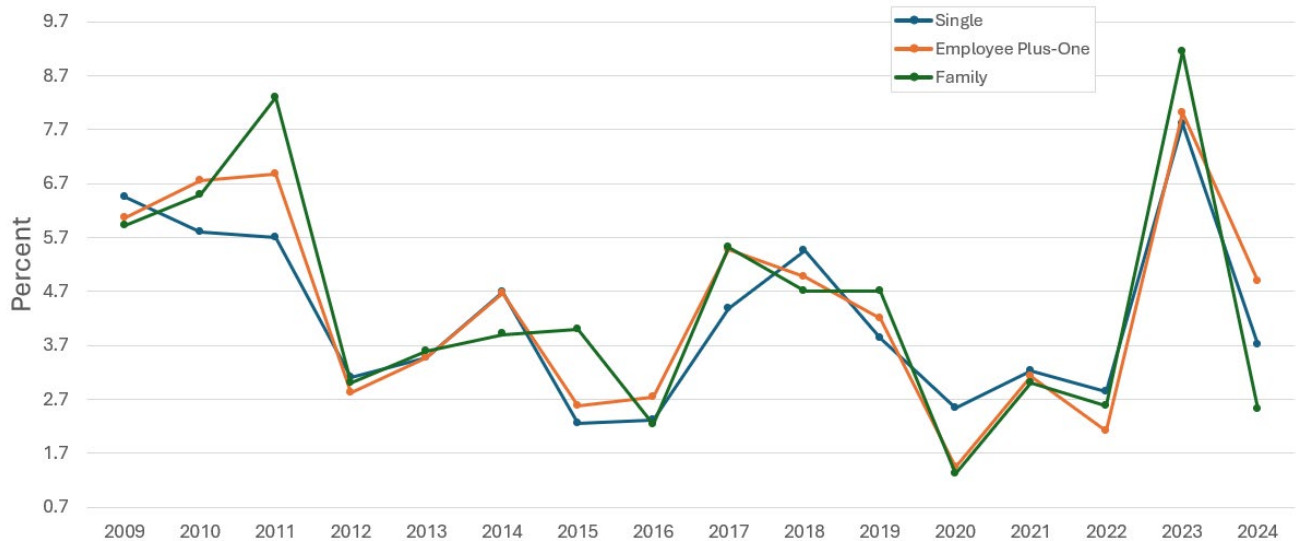
Figure 8. Average total family premium per enrolled private-sector employee, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	12,298	11,679	12,408
2009	13,027	12,041	13,210
2010	13,871	13,170	13,999
2011	15,022	14,086	15,175
2012	15,473	14,496	15,626
2013	16,029	14,787	16,224
2014	16,655	15,575	16,824
2015	17,322	15,919	17,524
2016	17,710	16,471	17,893
2017	18,687	17,649	18,839
2018	19,565	18,296	19,743
2019	20,486	19,417	20,645
2020	20,758	19,416	20,923
2021	21,381	20,406	21,523
2022	21,931	20,406	22,166
2023	23,938	21,351	24,312
2024	24,540	23,170	24,734

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

Figure 9. Percentage change in total premiums (from previous year) per enrolled private-sector employee for single, employee-plus-one, and family coverage, 2009–2024 ¹

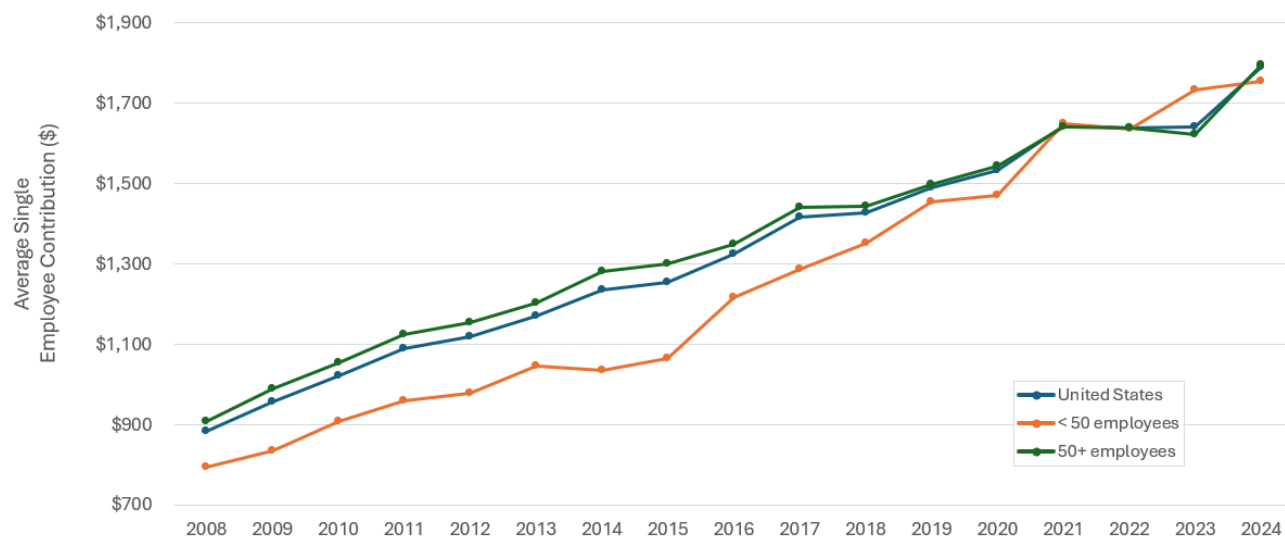


	Single (%)	Employee Plus-One (%)	Family (%)
2009	6.5	6.1	5.9
2010	5.8	6.7	6.5
2011	5.7	6.9	8.3
2012	3.1	2.8	3.0
2013	3.5	3.5	3.6
2014	4.7	4.7	3.9
2015	2.2	2.6	4.0
2016	2.3	2.7	2.2
2017	4.4	5.5	5.5
2018	5.4	5.0	4.7
2019	3.8	4.2	4.7
2020	2.5	1.4	1.3
2021	3.2	3.1	3.0
2022	2.8	2.1	2.6
2023	7.8	8.0	9.2
2024	3.7	4.9	2.5

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

¹ Estimates of the percent increases in premium were not available for 2008 because MEPS IC data were not collected in 2007.

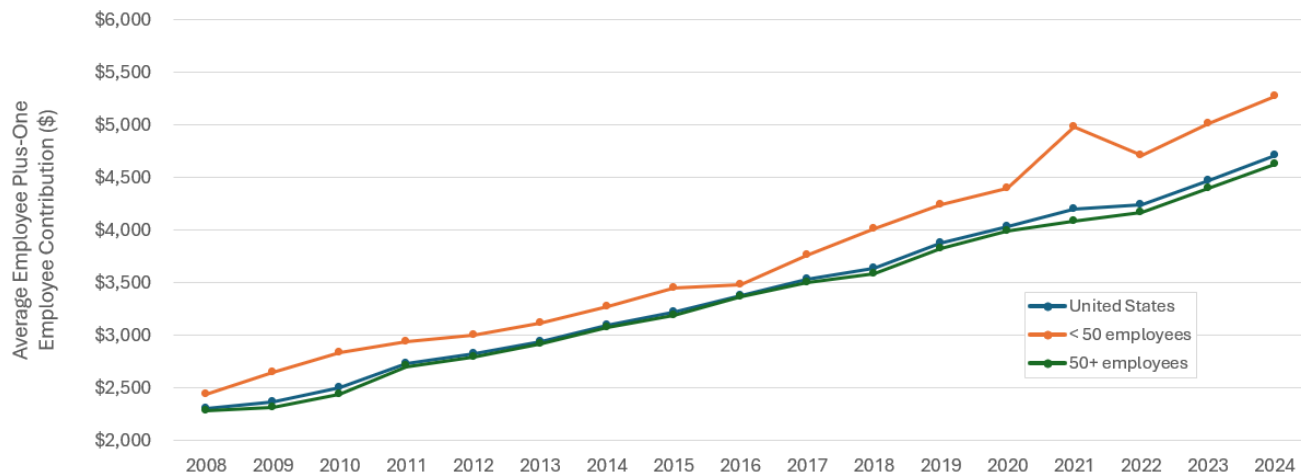
Figure 10. Average annual employee contribution for single coverage, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	882	794	907
2009	957	834	989
2010	1,021	907	1,053
2011	1,090	960	1,124
2012	1,118	979	1,153
2013	1,170	1,045	1,203
2014	1,234	1,035	1,280
2015	1,255	1,065	1,299
2016	1,325	1,216	1,348
2017	1,415	1,287	1,441
2018	1,427	1,351	1,443
2019	1,489	1,454	1,497
2020	1,532	1,469	1,543
2021	1,643	1,650	1,641
2022	1,637	1,635	1,637
2023	1,640	1,734	1,621
2024	1,789	1,755	1,796

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

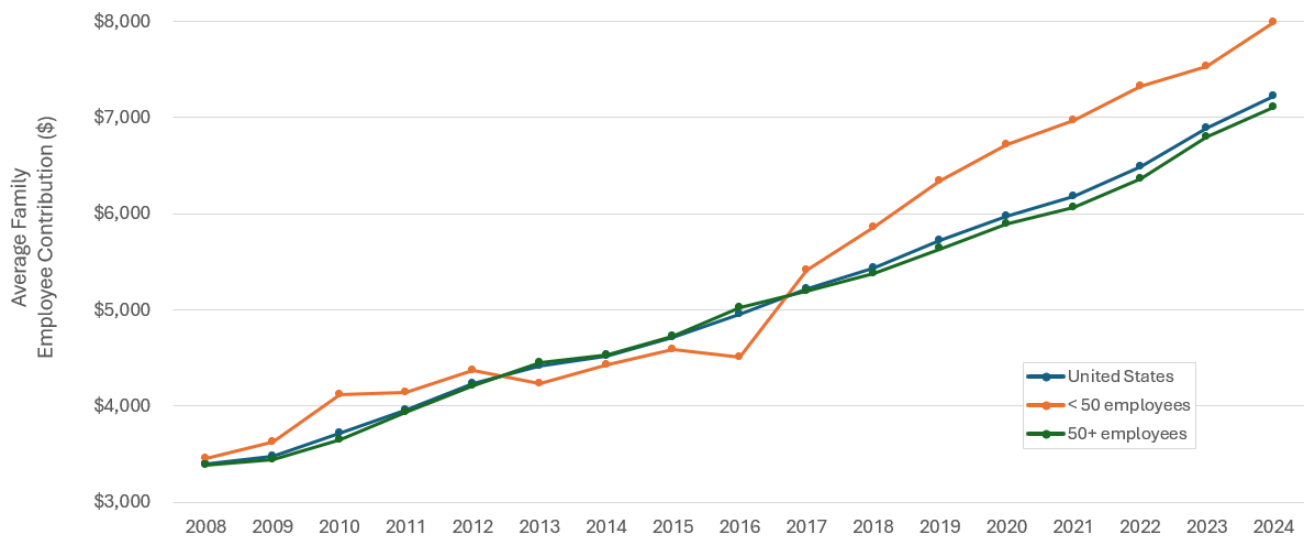
Figure 11. Average annual employee contribution for employee plus-one coverage, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	2,303	2,442	2,281
2009	2,363	2,648	2,318
2010	2,498	2,836	2,444
2011	2,736	2,942	2,705
2012	2,824	3,004	2,797
2013	2,940	3,117	2,916
2014	3,097	3,275	3,073
2015	3,220	3,454	3,190
2016	3,376	3,479	3,362
2017	3,531	3,760	3,503
2018	3,634	4,017	3,584
2019	3,881	4,244	3,827
2020	4,035	4,398	3,992
2021	4,199	4,984	4,090
2022	4,237	4,711	4,169
2023	4,473	5,010	4,402
2024	4,707	5,274	4,629

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

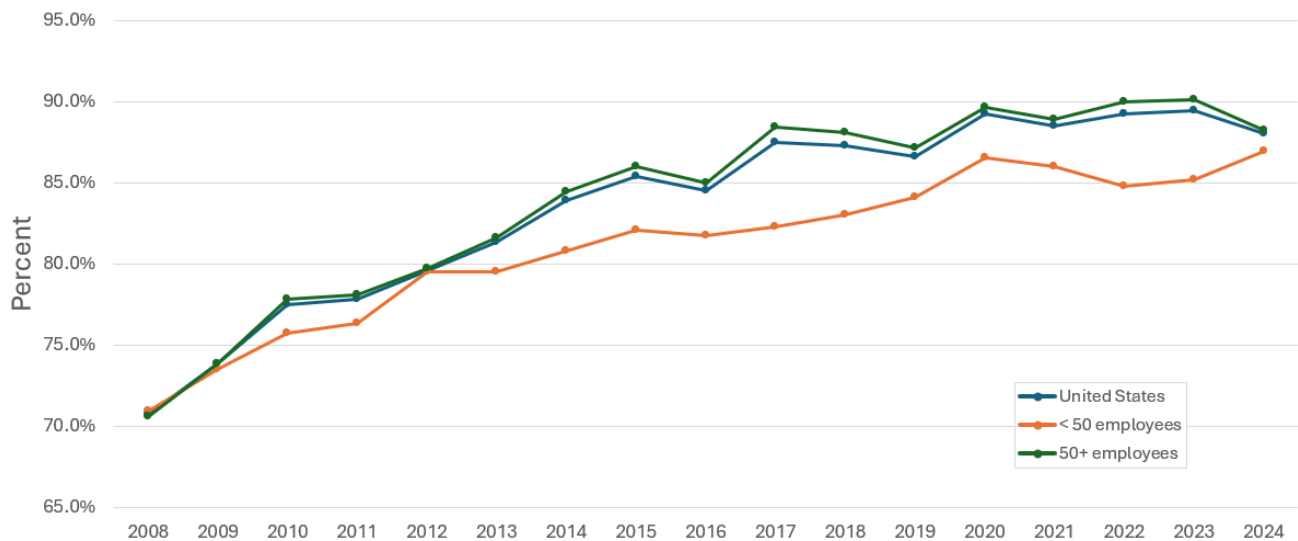
Figure 12. Average annual employee contribution for family coverage, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	3,394	3,458	3,383
2009	3,474	3,630	3,445
2010	3,721	4,117	3,649
2011	3,962	4,144	3,933
2012	4,236	4,366	4,215
2013	4,421	4,228	4,451
2014	4,518	4,426	4,532
2015	4,710	4,587	4,728
2016	4,956	4,510	5,022
2017	5,218	5,413	5,190
2018	5,431	5,854	5,372
2019	5,726	6,341	5,635
2020	5,978	6,714	5,887
2021	6,174	6,967	6,059
2022	6,492	7,324	6,364
2023	6,889	7,529	6,796
2024	7,216	7,984	7,107

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

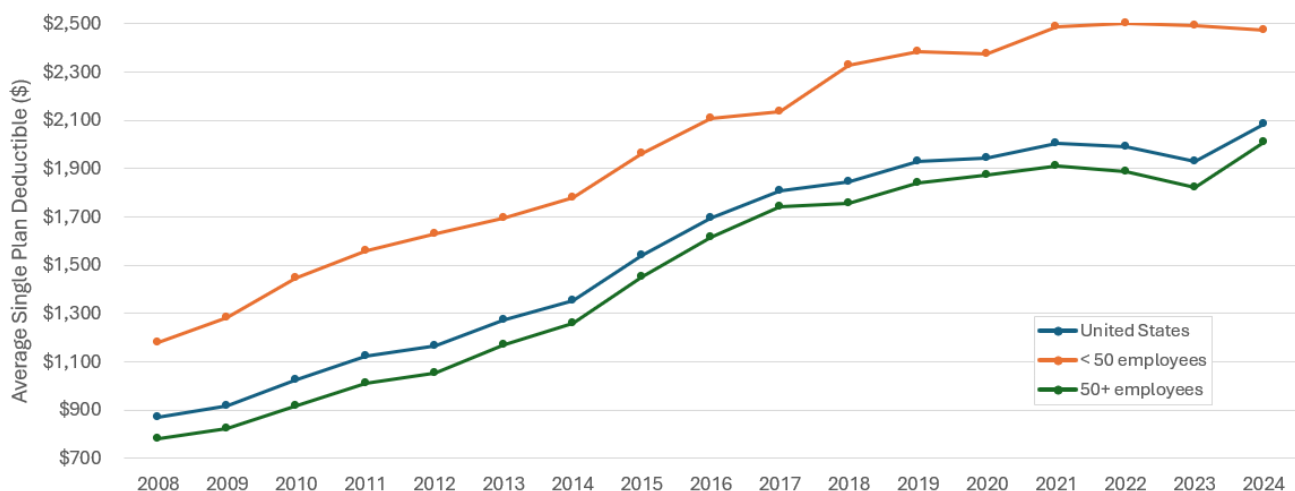
Figure 13. Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by firm size, 2008–2024



	United States (%)	<50 employees (%)	50+ employees (%)
2008	70.7	70.9	70.6
2009	73.8	73.5	73.8
2010	77.5	75.7	77.8
2011	77.8	76.3	78.1
2012	79.6	79.5	79.7
2013	81.3	79.5	81.6
2014	83.9	80.8	84.4
2015	85.4	82.1	86.0
2016	84.5	81.7	85.0
2017	87.5	82.3	88.4
2018	87.3	83.0	88.1
2019	86.6	84.1	87.1
2020	89.2	86.5	89.6
2021	88.5	86.0	88.9
2022	89.2	84.8	90.0
2023	89.4	85.2	90.1
2024	88.0	86.9	88.2

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey–Insurance Component, private-sector establishments, 2008–2024.

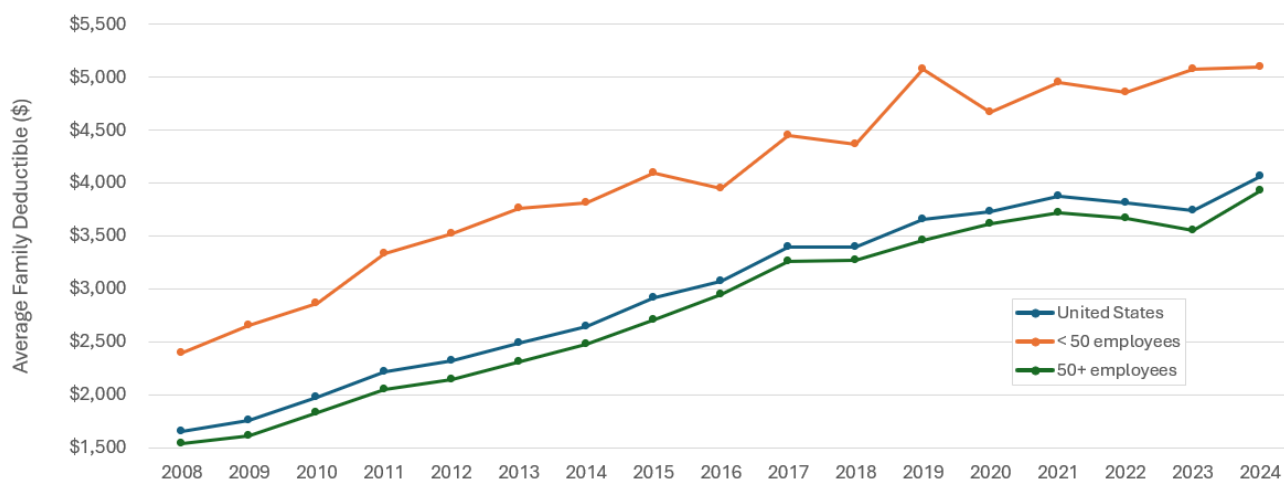
Figure 14. Average deductible per private-sector employee with single coverage in a health insurance plan with a deductible, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	869	1,177	782
2009	917	1,283	822
2010	1,025	1,447	917
2011	1,123	1,561	1,010
2012	1,167	1,628	1,051
2013	1,273	1,695	1,169
2014	1,353	1,777	1,259
2015	1,541	1,964	1,451
2016	1,696	2,105	1,615
2017	1,808	2,136	1,743
2018	1,846	2,327	1,754
2019	1,931	2,386	1,839
2020	1,945	2,376	1,873
2021	2,004	2,485	1,911
2022	1,992	2,499	1,887
2023	1,930	2,493	1,823
2024	2,085	2,474	2,007

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.

Figure 15. Average deductible per private-sector enrollee in family coverage with a deductible, overall and by firm size, 2008–2024



	United States (\$)	<50 employees (\$)	50+ employees (\$)
2008	1,658	2,389	1,535
2009	1,761	2,652	1,610
2010	1,975	2,857	1,827
2011	2,220	3,329	2,052
2012	2,322	3,515	2,142
2013	2,491	3,761	2,307
2014	2,640	3,810	2,476
2015	2,915	4,090	2,704
2016	3,069	3,940	2,944
2017	3,396	4,447	3,254
2018	3,392	4,364	3,263
2019	3,655	5,067	3,452
2020	3,722	4,666	3,609
2021	3,868	4,945	3,717
2022	3,811	4,854	3,660
2023	3,733	5,074	3,547
2024	4,063	5,087	3,920

Source: Center for Financing, Access, and Cost Trends, AHRQ, Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2008–2024.