Health Insurance Status of Young Adults, Ages 19-25, 2013

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Introduction

Estimates of the health insurance status of the U.S. civilian noninstitutionalized population are critical to policymakers and others concerned with access to medical care and the cost and quality of that care. Health insurance helps people get timely access to medical care and protects them against the risk of expensive and unanticipated medical events. Young adults are less likely to be covered by health insurance than their older counterparts.

Using information from the Household Component of the Medical Expenditure Panel Survey (MEPS-HC), this Statistical Brief provides estimates of uninsured rates for the U.S. civilian noninstitutionalized population between the ages of 19 and 25. Variations in uninsured rates for both anytime during the year and the entire year are examined by race/ethnicity, sex, student status, and region. All differences between estimates discussed in the text are statistically significant at the 0.05 level unless otherwise noted.

Findings

According to the MEPS-HC, 27.1 percent (73.0 million people, estimate not shown) of the population under age 65 were uninsured at some time in 2013 and 15.6 percent (42.0 million people, estimate not shown) were uninsured for the entire calendar year. When examining the coverage experience by age subgroups, 43.1 percent (13.1 million people, estimate not shown) of young adults ages 19–25 were uninsured at some point in 2013 and 22.9 percent (6.9 million people, estimate not shown) were uninsured for the entire calendar year (figure 1). These uninsured percentages were higher (47.9 and 27.5 percent, respectively) for young adults ages 19–25 in 2009 (estimates not shown).

For young adults ages 19–25, Hispanics were substantially more likely than black non-Hispanics, white non-Hispanics, Asian non-Hispanics, or other non-Hispanics to lack health insurance during 2013. Among Hispanic young adults, 61.0 percent were uninsured for at least part of 2013, while 40.7 percent were uninsured for the entire year. In contrast, 34.7 percent of white non-Hispanics between the ages of 19 and 25 were uninsured for at least part of the year, while 15.9 percent were uninsured for the entire year (figure 2).

Young adult males were more likely than their female counterparts to lack health insurance for all of 2013. Among young adult males, 26.6 percent were uninsured for the entire year (figure 3).

Among young adults, the percentage uninsured for the entire year or any part of the year varied by student status. Full-time students were the least likely to be uninsured for the entire year (11.6 percent) or any part of the year (23.7 percent) in 2013. This compares to part-time students (22.4 and 45.2 percent, respectively) and those that were not students (27.9 and 50.2 percent, respectively) (figure 4).

Health insurance status varied by region for young adults. Young adults living in the South and West were the most likely to be uninsured for all of 2013 (both 26.8 percent). In contrast, the percentages of those ages 19–25 in the Northeast and Midwest who were uninsured for the entire year were 13.2 and 19.8 percent, respectively (figure 5).
Data Source
The estimates shown in this Statistical Brief are drawn from analyses conducted by the MEPS staff from the following public use file: 2013 Full Year Population Characteristics (HC-157).

Definitions
Uninsured
People who did not have health insurance coverage for their entire period of eligibility during the survey year were classified as uninsured for the entire year. People who lacked coverage for at least one month during the year were classified as ever uninsured during the year. People who were covered only by noncomprehensive State-specific programs (e.g., The Maryland Kidney Disease Program) or private single-service plans (e.g., coverage for dental or vision care only, coverage for accidents or specific diseases) were considered to be uninsured.

Race/ethnicity
Classification by race/ethnicity was based on information reported for each family member. Respondents were asked if each family member's race was best described as American Indian, Alaska Native, Asian, black, white, Pacific Islander, or other. They were also asked if each family member's main national origin or ancestry was Puerto Rican; Cuban; Mexican, Mexicano, Mexican American, or Chicano; other Latin American; or other Spanish. All persons whose main national origin or ancestry was reported in one of these Hispanic groups, regardless of racial background, were classified as Hispanic. MEPS respondents who reported other races and were non-Hispanic were included in the other category. For this analysis, the following classification by race and ethnicity was used: Hispanic (of any race), black non-Hispanic, white non-Hispanic, Asian non-Hispanic, and other non-Hispanic.

Student status
Student status (full-time student, part-time student, or not a student) was determined for the reference period for the sample person as reported by the respondent. A full-time student was a student for the entirety of their reference period while a part-time student was a student for a portion of their reference period. A nonstudent was a sample person who was not a student for their entire reference period.

Region
Each MEPS sampled person was classified as living in one the following four regions as defined by the U.S. Census Bureau:

- South: Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida, Kentucky, Tennessee, Alabama, Mississippi, Arkansas, Louisiana, Oklahoma, and Texas.

About MEPS-HC
MEPS-HC is a nationally representative longitudinal survey that collects detailed information on health care utilization and expenditures, health insurance, and health status, as well as a wide variety of social, demographic, and economic characteristics for the U.S. civilian noninstitutionalized population. It is co-sponsored by the Agency for Healthcare Research and Quality and the National Center for Health Statistics.

For more information about MEPS, call the MEPS information coordinator at AHRQ (301-427-1656) or visit the MEPS Web site at http://www.meps.ahrq.gov/.

References
For a detailed description of the MEPS-HC survey design, sample design, and methods used to minimize sources of nonsampling error, see the following publications:


**Suggested Citation**

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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 health care in the United States. We also invite you to tell us how you are using this Statistical Brief 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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Figure 1. Percentage uninsured by age, persons under age 65, 2013

Figure 2. Percentage uninsured by race/ethnicity, ages 19–25, 2013

Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 2013
Figure 3. Percentage uninsured by sex, ages 19–25, 2013

Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 2013

Figure 4. Percentage uninsured by student status, ages 19–25, 2013

Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 2013
Figure 5. Percentage uninsured by region, ages 19–25, 2013

Source: Center for Financing, Access, and Cost Trends, AHRQ, Household Component of the Medical Expenditure Panel Survey, 2013