Table III.A.2.e Percent of State and local governments offering health insurance by plan provider arrangement and other plan options by census division and government type and size: United States, 2015

Census division/ government type and size	Two or more plans	Conventional indemnity	Any managed care	Exclusive provider	Mixed provider	With waiting period
United States	47.3%	8.4%	93.8%	29.1%	84.9%	57.3%
Census division:						
New England	69.8%	8.9%	96.7%	48.2%	85.6%	50.0%
Middle Atlantic	35.5%	8.9% *	93.0%	24.8%	91.1%	43.2%
East North Central	35.3%	3.5% *	98.0%	24.7%	83.7%	60.9%
West North Central	46.4%	12.0%	89.6%	11.6%	82.8%	57.9%
South Atlantic	48.8%	11.1%*	90.3%	18.3%	83.4%	67.1%
East South Central	29.9%	8.5% *	91.8%	5.1%	89.6%	69.9%
West South Central	57.6%	13.1%	93.4%	49.2%	75.8%	58.1%
Mountain	49.7%	6.1%*	94.0%	20.5%	83.2%	60.7%
Pacific	66.9%	4.7% *	95.8%	57.0%	91.3%	53.3%
Government type and size:						
State governments	81.0%	0.0%	100.0%	38.6%	95.3%	55.0%
Local governments:						
Less than 250 employees	39.0%	9.2%	92.6%	26.4%	82.8%	55.4%
250-999 employees	70.0%	6.3%	97.2%	35.2%	90.6%	59.2%
1,000-4,999 employees	71.4%	6.3%	97.3%	40.2%	91.9%	69.9%
5,000-9,999 employees	78.1%	1.7%*	100.0%	34.6%	95.4%	71.7%
10,000 or more employees	85.2%**	0.5%**	100.0%	52.3%**	87.3%**	81.3%**

Source: Agency for Healthcare Research and Quality, Center for Financing, Access and Cost Trends. 2015 Medical Expenditure Panel Survey-Insurance Component.

Note: Definitions and descriptions of the methods used for this survey can be found in the Technical Appendix.

Table III.A.2.e Standard errors for percent of State and local governments offering health insurance by plan provider arrangement and other plan options by census division and government type and size: United States, 2015

Census division/ government type and size	Two or more plans	Conventional indemnity	Any managed care	Exclusive provider	Mixed provider	With waiting period
United States	1.77%	1.04%	0.96%	1.57%	1.42%	1.80%
Census division:						
New England	4.68%	2.12%	1.48%	4.48%	2.70%	4.51%
Middle Atlantic	4.81%	3.62% *	3.57%	4.26%	3.68%	5.49%
East North Central	4.11%	1.55% *	1.33%	4.37%	4.17%	4.62%
West North Central	5.10%	3.56%	3.51%	3.32%	4.11%	5.03%
South Atlantic	4.74%	3.49% *	3.47%	3.19%	4.22%	4.89%
East South Central	3.66%	2.62% *	2.60%	1.50%	2.77%	4.37%
West South Central	5.18%	3.69%	2.75%	5.26%	4.83%	5.19%
Mountain	5.66%	2.66% *	2.66%	4.20%	4.25%	5.60%
Pacific	6.10%	2.19% *	2.18%	5.74%	2.62%	5.44%
Government type and size:						
State governments	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Local governments:						
Less than 250 employees	2.22%	1.38%	1.28%	2.06%	1.88%	2.36%
250-999 employees	2.13%	0.98%	0.65%	2.06%	1.20%	2.24%
1,000-4,999 employees	2.43%	1.32%	0.84%	2.54%	1.44%	2.56%
5,000-9,999 employees	1.37%	1.40%*	0.00%	2.53%	1.04%	2.10%
10,000 or more employees	0.19%**	0.01%**	0.00%	0.60%**	0.16%**	1.03%**

Source: Agency for Healthcare Research and Quality, Center for Financing, Access and Cost Trends. 2015 Medical Expenditure Panel Survey-Insurance Component.

Note: Definitions and descriptions of the methods used for this survey can be found in the Technical Appendix.

Estimates for Insurance to Retirees are now located in Table III.A.2.h.

<sup>\*</sup> Figure does not meet standard of reliability or precision.

<sup>\*\*</sup> Positive standard error is the result of one or more non-certainty unit(s) in a size category that has historically contained only certainty units. Estimates for Insurance to Retirees are now located in Table III.A.2.h.

<sup>\*</sup> Figure does not meet standard of reliability or precision.

<sup>\*\*</sup> Positive standard error is the result of one or more non-certainty unit(s) in a size category that has historically contained only certainty units. Standard errors of zero indicate that all governments in the category are in the survey.