



# MEPS Insurance Component Chartbook 2016



# Medical Expenditure Panel Survey Insurance Component 2016 Chartbook

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Rockville, MD 20857  
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**AHRQ Publication No. 17-0034-EF**  
**September 2017**



## Acknowledgments

This chartbook was prepared by Jessica Vistnes, G. Edward Miller, Philip Cooper, David Kashihara, Patricia Keenan, Asako Moriya, and Barbara Schone of the Center for Financing, Access, and Cost Trends (CFACT) in the Agency for Healthcare Research and Quality (AHRQ). Primary editing was performed by Jessica Vistnes and Edward Miller.

The authors appreciate the efforts of Lily Trofimovich, Zhengyi Fang, Darya Leyzarovich, Bidong Liu, Bryan Sayer, and Donna Harradine of Social and Scientific Systems in preparing the exhibits in the chartbook, the data production work of Brandon Flanders of the U.S. Census Bureau, and the production assistance of Doreen Bonnett, Nicole Shulman and Michelle Roberts of AHRQ.

Reviewers of this publication were Joel W. Cohen, Director of CFACT; Steve Machlin, Director of the Division of Statistical Research and Methods in CFACT; and Steve Hill, Julie Hudson, and Samuel Zuvekas, Senior Economists in the Division of Research and Modeling in CFACT.

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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](https://meps.ahrq.gov/survey_comp/Insurance.jsp).

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### **Suggested Citation**

Medical Expenditure Panel Survey Insurance Component 2016 Chartbook. Rockville, MD: Agency for Healthcare Research and Quality; September 2017. AHRQ Publication No. 17-0034-EF. [https://meps.ahrq.gov/mepsweb/data\\_files/publications/cb21/cb21.pdf](https://meps.ahrq.gov/mepsweb/data_files/publications/cb21/cb21.pdf).

# 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 2003 to 2016. 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 Contributions; and Employee Cost Sharing. Each section provides charts and discussion with links to MEPS-IC data tables in the Appendix 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 for recent changes in national health care 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, appendixes, or MEPS-IC data available on the MEPS website due to rounding. 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 40,000 business establishments from more than 7 million establishments found on the Business Register at the U.S. Census Bureau. In 2016, the survey response rate was 67.6 percent.

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 2014 Medical Expenditure Panel Survey Insurance Component* (Davis, 2015).

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 2014 Medical Expenditure Panel Survey Insurance Component*. Methodology Report #30. Rockville, MD: Agency for Healthcare Research and Quality; June 2015. [https://meps.ahrq.gov/data\\_files/publications/mr30/mr30.shtml](https://meps.ahrq.gov/data_files/publications/mr30/mr30.shtml)

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.

Keenan P, Miller, GE, Vistnes, J. *Results from the 2016 MEPS-IC Private-Sector National Tables*. Statistical Brief #503. Rockville, MD: Agency for Healthcare Research and Quality; July 2017. [https://meps.ahrq.gov/data\\_files/publications/st503/stat503.shtml](https://meps.ahrq.gov/data_files/publications/st503/stat503.shtml). Accessed August 15, 2017.



# 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 2003 to 2016. 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 establishments), combined with a response rate of 67.6 percent in 2016, 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 because of variation in insurance markets along these dimensions. Insurance markets differ 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, health care prices, and utilization, as well as differences in State approaches to regulating private insurance and administering Medicaid.

The period presented in the chartbook, 2003 to 2016, shows trends through a period of change in national health policy that could have affected national ESI trends, as well as trends by firm size. Starting in 2014, most people were required to either obtain health insurance or make an individual shared responsibility payment. The 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 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***

From 2015 to 2016, 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") and no significant change in the enrollment rates at small (fewer than 50 employees), medium (50 to 99 employees), or large firms (100 or more employees). There was also no significant change in the number of enrollees overall or by firm size in this period (data shown in Exhibits 2.1 and 2.2 in Section 2). In 2016, 58.2 million private-sector employees were enrolled in their employer's health plan. Also in 2016, 47.2 percent of employees were enrolled in a health plan through their employer, 26.5 percent at small employers, 45.4 percent at medium employers, and 56.0 percent at large employers.

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.

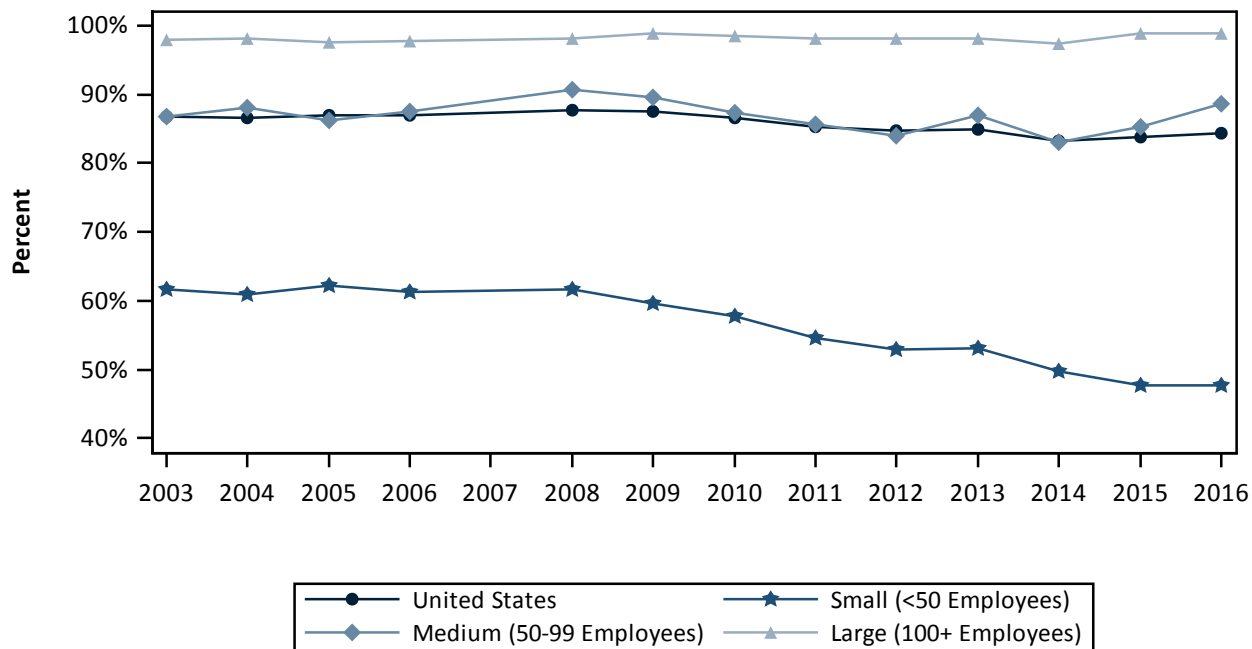
## Availability of Coverage: Offer Rates

There was no significant change in the overall percentage of employees working at establishments that offer insurance (“the offer rate”) between 2015 (83.8 percent) and 2016 (84.3 percent) (Exhibit ES.1). Between 2014 and 2015, the percentage of employees working where insurance was offered increased by 0.6 percentage points (from 83.2 percent to 83.8 percent,  $p < 0.10$ ), partially offsetting a 1.7 percentage point decline from 2013 to 2014. Between 2003 and 2013, the percentage of employees at firms of all sizes who worked for employers that offered health insurance declined from 86.8 percent to 84.9 percent, with almost all the decline occurring between 2009 and 2012.

While the offer rate at large firms (100 or more employees) was unchanged in this period (98.9 percent in 2016), the offer rate at medium employers (50 to 99 employees) increased from 85.3 percent in 2015 to 88.6 percent in 2016, the first year that the federally mandated employer shared responsibility provisions took effect for firms of this size. With respect to small firms (fewer than 50 employees), the offer rate was unchanged from 2015 to 2016. Over the longer term, however, offer rates at small firms declined from 61.6 percent in 2008 to 47.7 percent in 2016.

**Exhibit ES.1**

**Percentage of private-sector employees in establishments that offer health insurance, by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

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, nearly half (47.7 percent) of employees of small firms (fewer than 50 employees) worked at establishments that offered insurance. However, there was substantial variation in the availability of workplace coverage across the country (Exhibit ES.2).

States with small-employer offer rates exceeding the national average were:

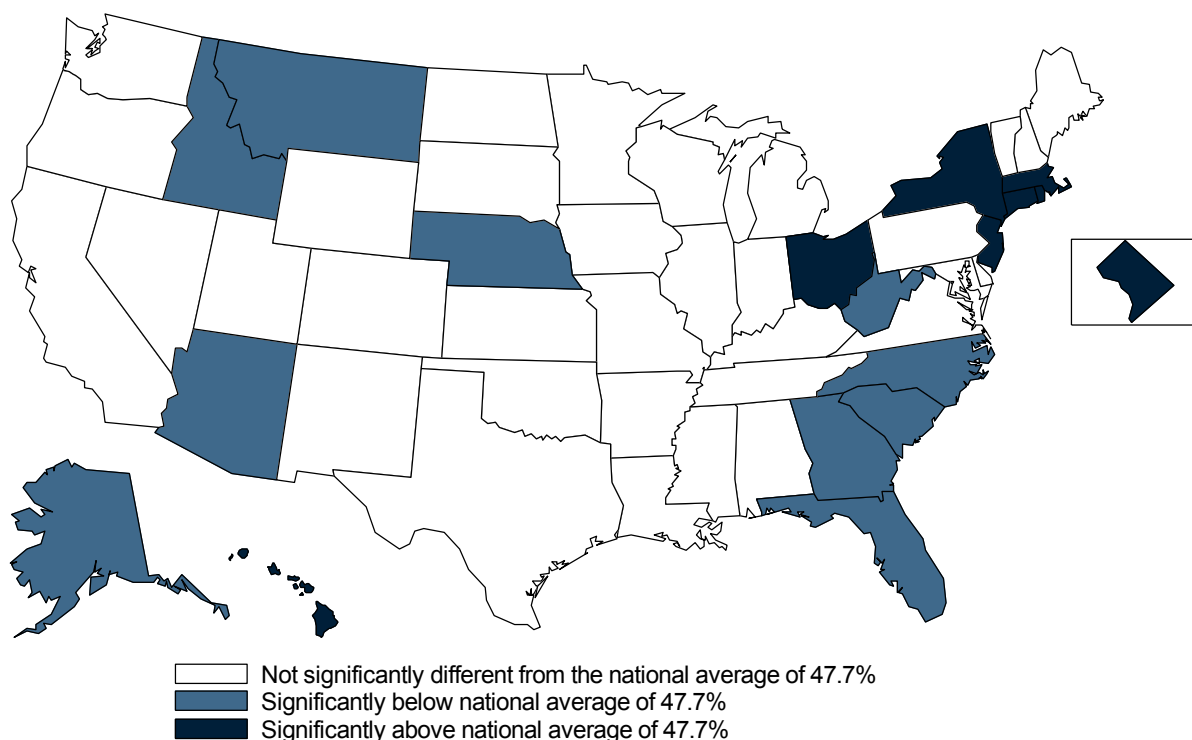
- Connecticut (56.3 percent),
- District of Columbia (65.6 percent),
- Hawaii (89.4 percent),
- Massachusetts (58.0 percent),
- New Jersey (56.9 percent),
- New York (54.5 percent),
- Ohio (57.3 percent), and
- Rhode Island (61.6 percent) (Exhibit ES.2).

States with small-employer offer rates below the national average were:

- Alaska (31.2 percent),
- Arizona (39.0 percent),
- Florida (39.2 percent),
- Georgia (38.2 percent),
- Idaho (34.7 percent),
- Montana (32.5 percent),
- Nebraska (36.2 percent),
- North Carolina (39.4 percent),
- South Carolina (34.4 percent), and
- West Virginia (38.7 percent) (Exhibit ES.2).

## Exhibit ES.2

### Percentage of private-sector employees in establishments that offer health insurance, by State, firm size <50 employees, 2016



### ***Employee Coverage, Eligibility, and Take-Up***

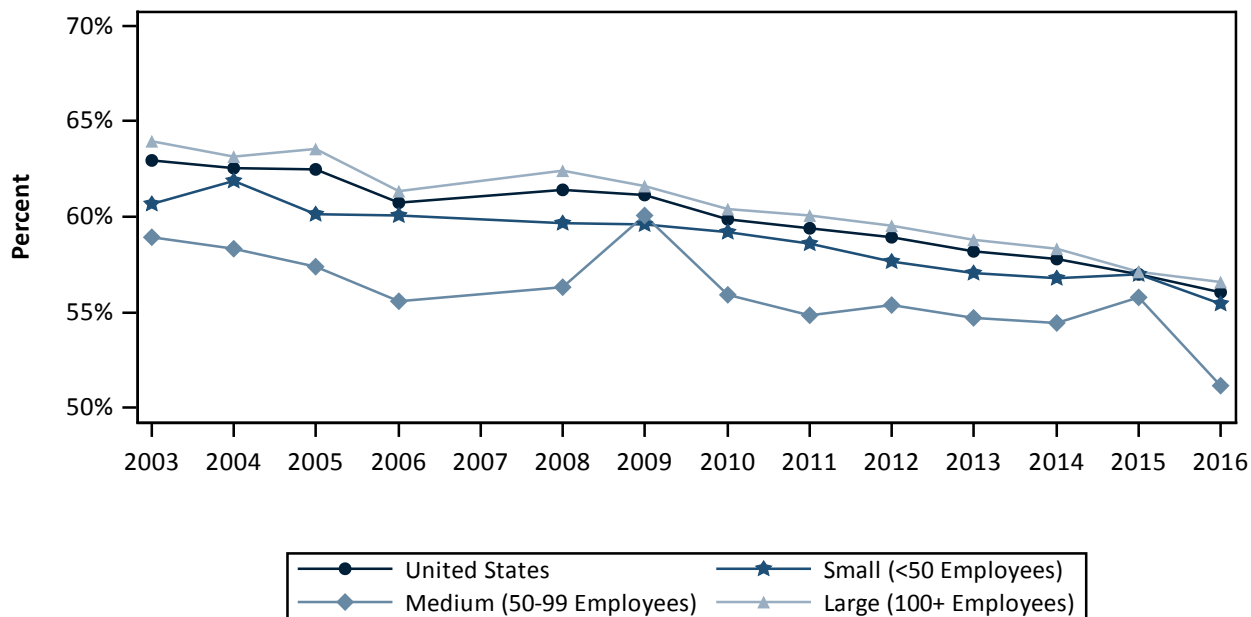
Among establishments that offered insurance, 76.5 percent of employees were eligible for health insurance in 2016 (the “eligibility rate”), and among eligible employees, 73.3 percent were enrolled (the “take-up rate”). Thus, 56.0 percent of all employees in establishments that offered health insurance were enrolled in coverage through their employer (the “coverage rate”).

Among employees in establishments that offered health insurance, there was a 1 percentage point decline ( $p < 0.10$ ) in coverage rates between 2015 (57.0 percent) and 2016 (56.0 percent) (Exhibit ES.3). Underlying this change is lack of a significant change in eligibility rates (76.0 percent in 2015 and 76.5 percent in 2016, Exhibit ES.4) and a decline in take-up rates from 75.0 percent to 73.3 percent (Exhibit ES.5). Take-up rates in 2016 were the lowest observed throughout the 2003-2016 period, and the 2015-2016 decline contributed to the longer term downward trend in take-up rates that occurred from 2003 to 2013.

There were no year-to-year changes in eligibility rates between 2014 and 2016. However, eligibility rates were higher in 2016 (76.5 percent) than in 2014 (75.4 percent). Despite the increase in eligibility rates in 2016 relative to 2014, eligibility rates in 2016 remained lower than those observed throughout the 2003-2013 period.

### 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, 2003-2016



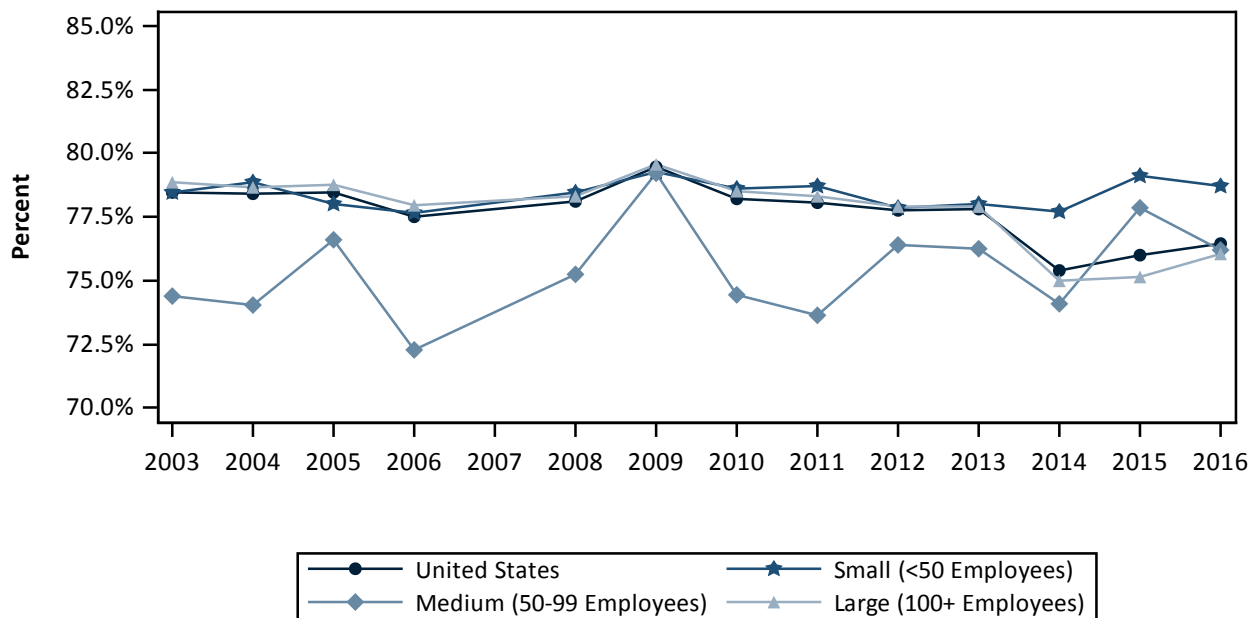
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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, 2003-2016



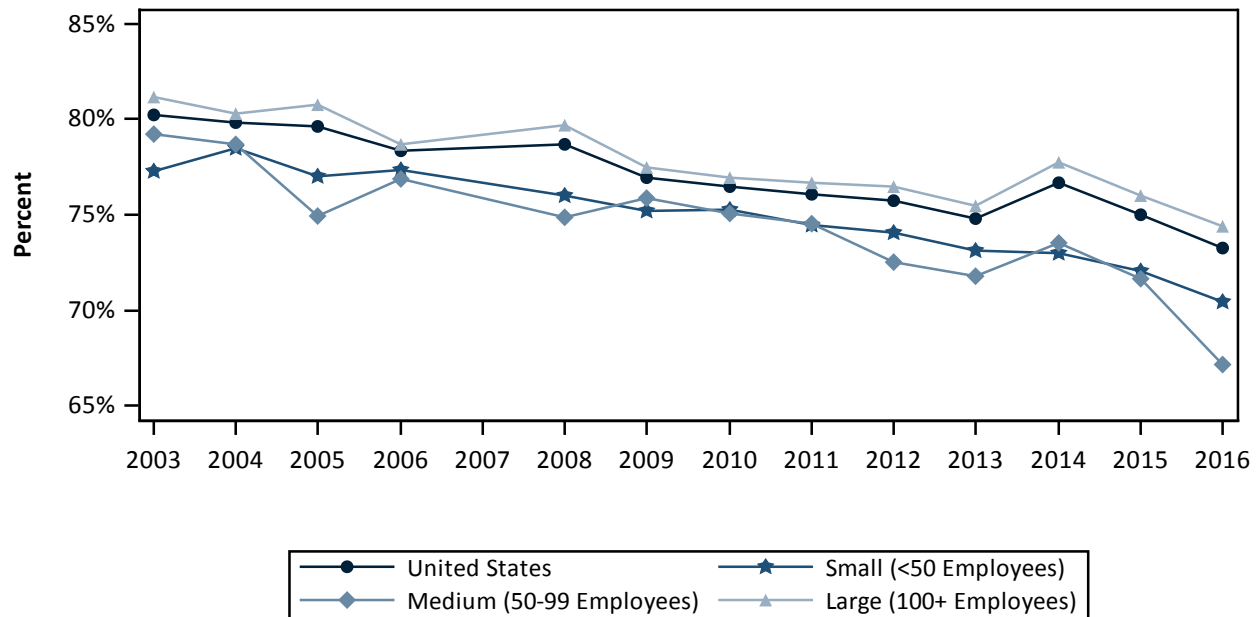
Source: Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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, 2003-2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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.

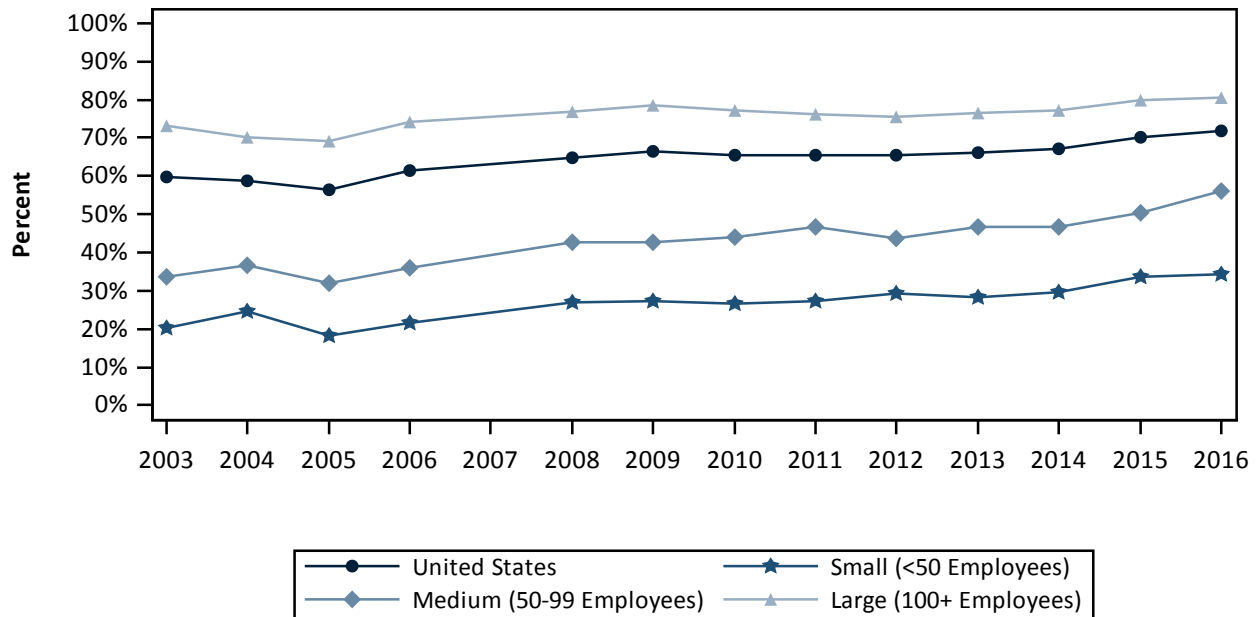
### Choice of Plans

A greater percentage of employees who were offered health insurance had a choice of two or more plans at the workplace in 2016 (71.7 percent) than in 2015 (70.2 percent). This increase followed an increase of 3.2 percentage points from 2014 to 2015. The 2015 to 2016 increase reflected a significant increase in plan choice for medium employers (50 to 99 employees) but not for employers of other sizes (Exhibit ES.6).

In contrast, the 2014 to 2015 change reflected significant increases in plan choice for small (fewer than 50 employees) and large employers (100 or more employees) but not for medium employers (50 to 99 employees). The availability of plan choice was significantly higher in 2016 than in 2003 for small employers (34.2 percent vs. 20.3 percent), medium employers (56.2 percent vs. 33.6 percent), and large employers (80.7 percent vs. 73.1 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, 2003-2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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

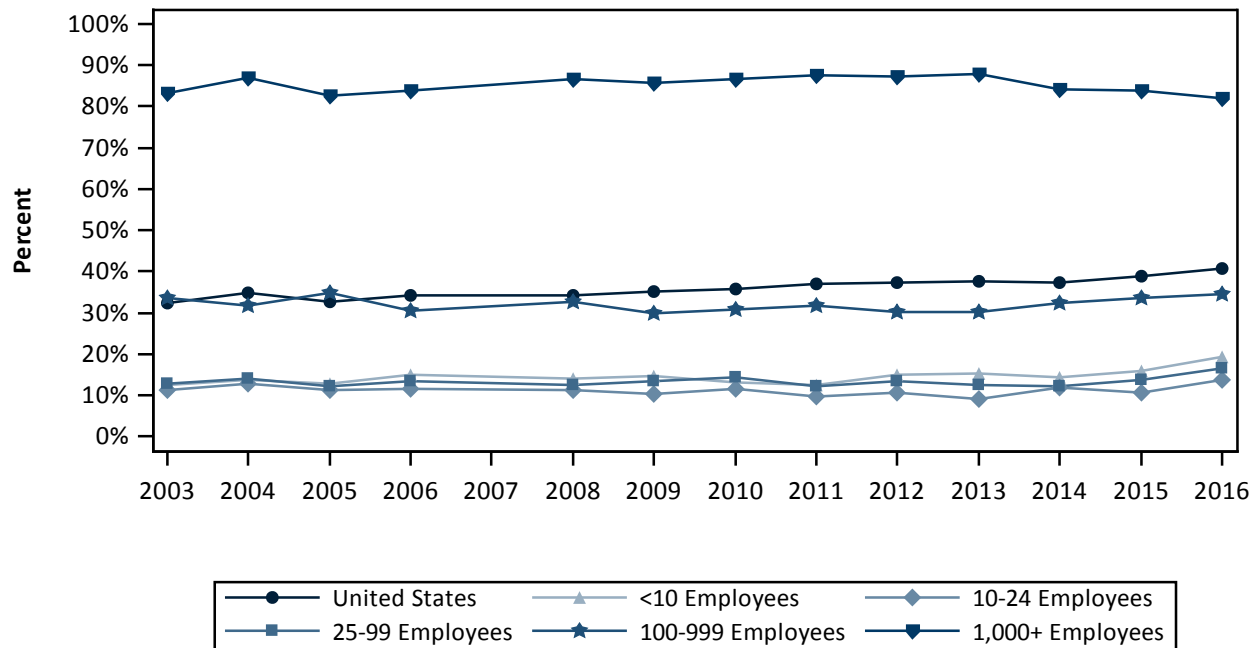
Overall, between 2015 (39.0 percent) and 2016 (40.7 percent), there was an increase in the percentage of offering establishments that self-insured at least one plan (Exhibit ES.7). This percentage increased for establishments in firms with fewer than 10 workers, 10-24 workers, and 25-99 workers but decreased in firms with 1,000 or more workers (from 83.8 percent in 2015 to 81.9 percent in 2016,  $p < 0.10$ ).

Among offering establishments, rates of self-insurance varied by firm size. Among employers that offered insurance, 13.6 percent to 19.3 percent of establishments in smaller firms (firm size categories with fewer than 100 workers) self-insured at least one plan in 2016. By contrast, 34.4 percent and 81.9 percent of offering establishments in firms with 100 to 999 employees and with 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.



### 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, 2003-2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

## Premiums

In 2016, average annual health insurance premiums per enrollee with private-sector employer coverage were \$6,101 for single coverage, \$12,124 for employee-plus-one coverage, and \$17,710 for family coverage, representing increases of 2.3 percent for single coverage, 2.7 percent for employee-plus-one coverage, and 2.2 percent for family coverage over 2015 levels (Exhibit ES.8).

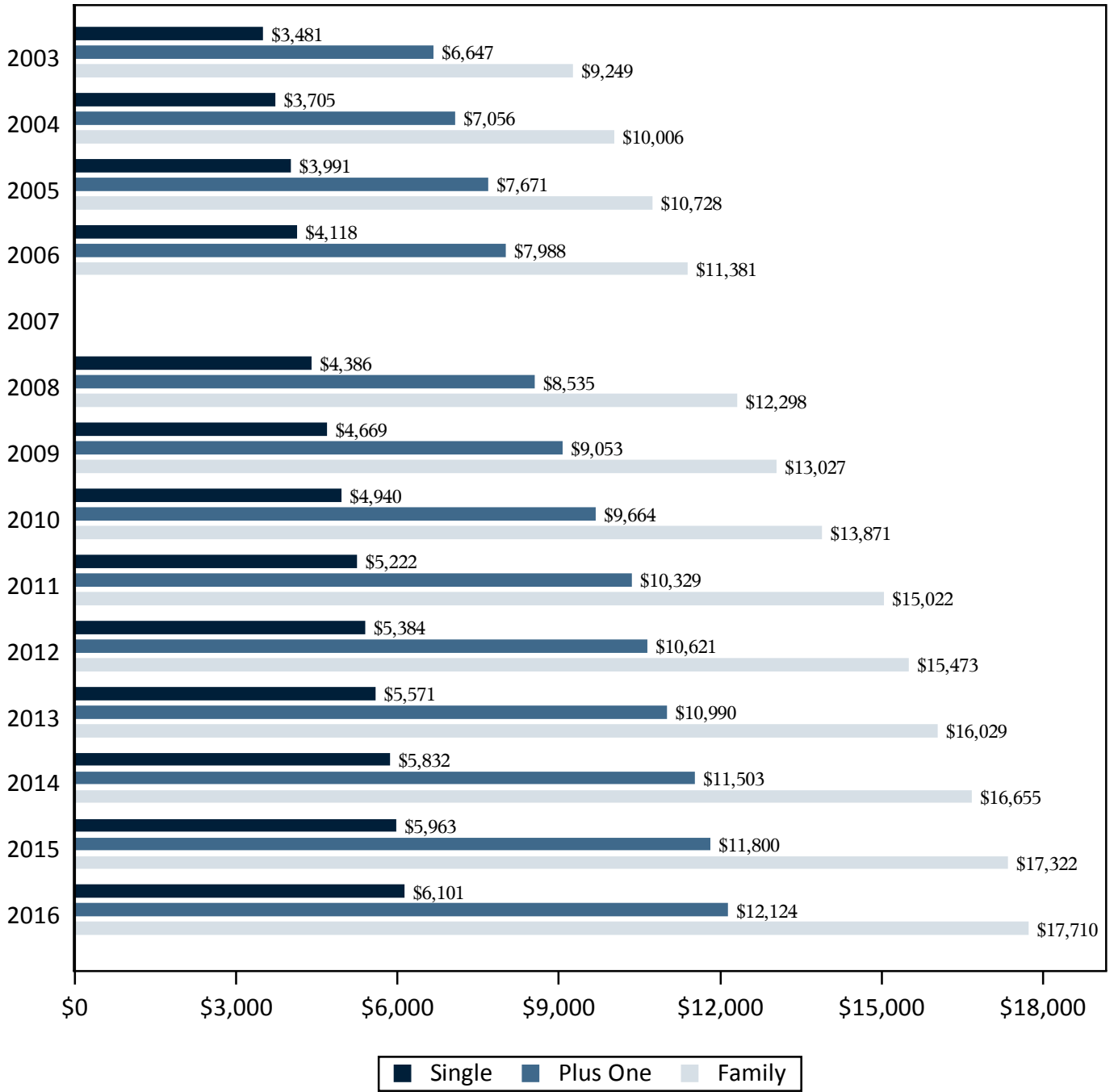
The 2015 to 2016 growth rates for single premiums and employee-plus-one premiums were similar to the growth rates from 2014 to 2015 (2.2 percent and 2.6 percent, respectively), while the 2015 to 2016 growth rate for family premiums was lower than the growth rate for 2014 to 2015 (4.0 percent) ( $p < 0.10$ ). Between 2003 and 2016, premiums for the three types of coverage grew by between 75.3 percent and 91.5 percent (average annual growth rates of between 4.4 percent and 5.1 percent) (Exhibit ES.8).

Premium growth rates showed substantial variation over the 13 years from 2003 to 2016. In the most recent 5-year period from 2011 to 2016, premium growth rates for all three types of coverage were relatively low, averaging between 3.2 and 3.3 percent per year (Exhibit ES.9).

Another period of relatively slow growth for all three types of coverage lasted from 2005 to 2008, with average annual growth rates ranging from 3.2 to 4.6 percent. There were also two periods of relatively higher premium growth for the three types of coverage: from 2003 to 2005, when average annual growth rates were between 7.1 and 7.7 percent, and from 2008 to 2011, when average annual growth rates were between 6.0 and 6.9 percent (Exhibit ES.9).

**Exhibit ES.8**

**Average total premiums per enrolled employee for single, employee-plus-one, and family coverage, 2003-2016**

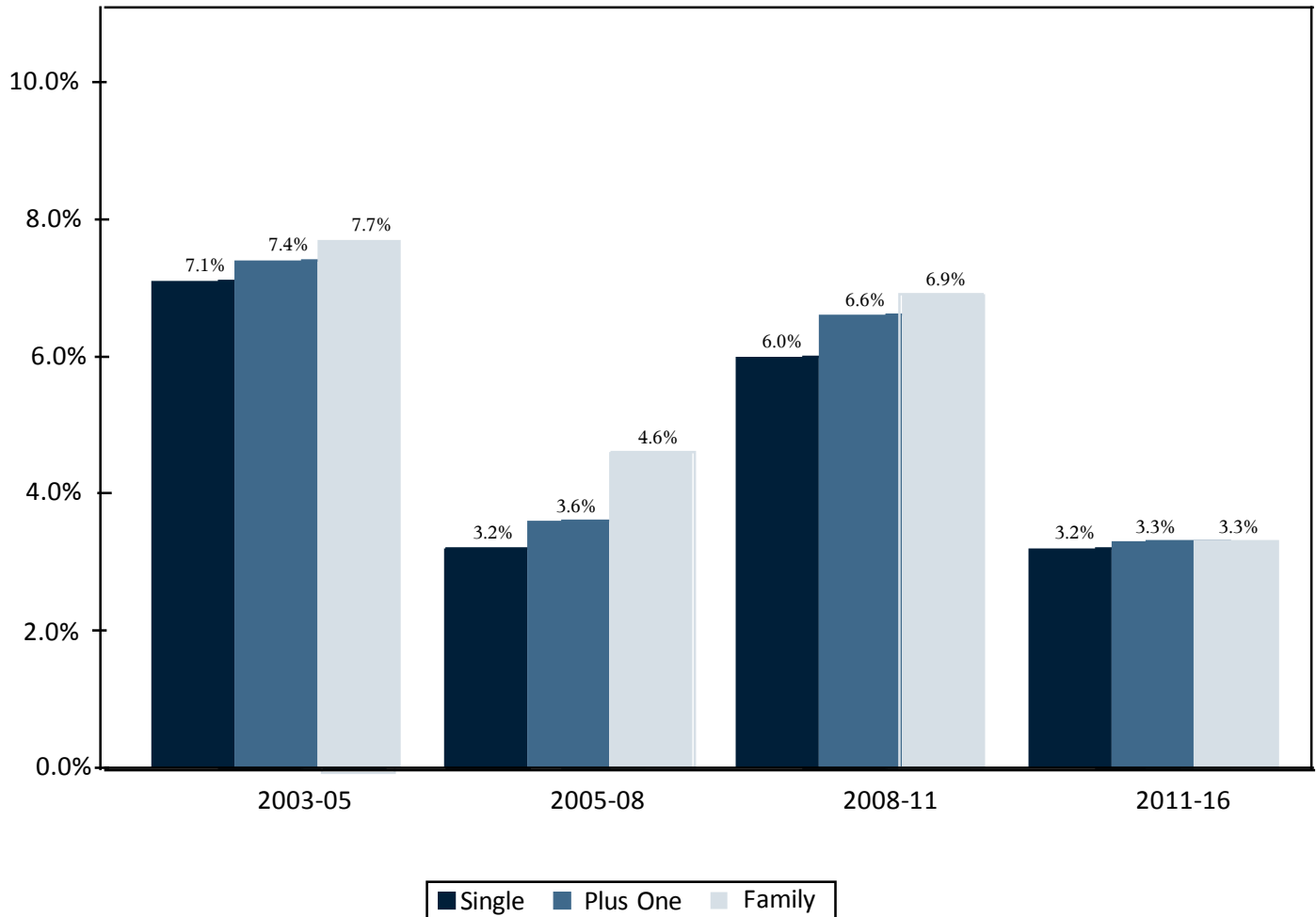


**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

**Exhibit ES.9**

**Average annual growth rates in total premiums per enrolled employee for single, employee-plus-one, and family coverage, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

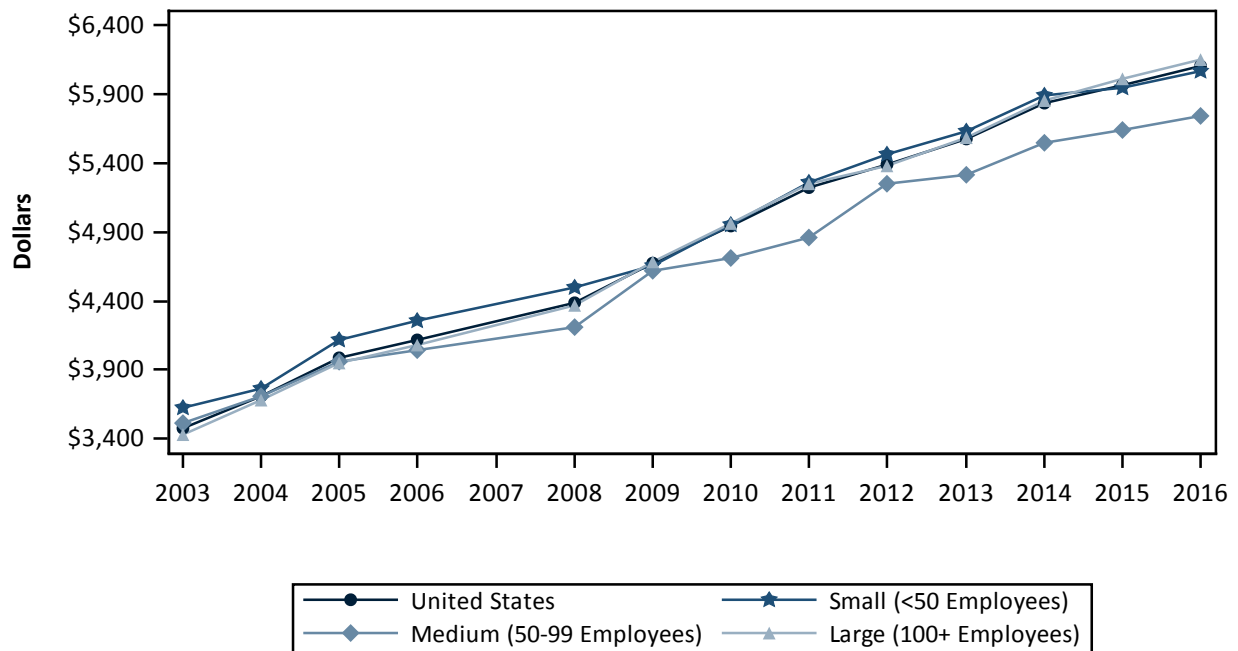
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

In 2003, average single premiums were lower in firms with 100 or more employees (\$3,430) than in firms with fewer than 50 employees (\$3,623). From 2003 to 2016, however, single premiums increased more rapidly in the largest firms than in the smallest firms (79.2 percent vs. 67.5 percent). Thus, by 2016, there was no significant difference in single premiums between firms with 100 or more employees (\$6,146) and firms with fewer than 50 employees (\$6,070). In 2016, single premiums were about 6 to 7 percent higher in the largest firms (\$6,146) and the smallest firms (\$6,070) than in firms with 50 to 99 employees (\$5,743) (Exhibit ES.10).

In 2003, there were no statistically significant differences in employee-plus-one premiums by firm size. From 2003 to 2016, however, employee-plus-one premiums grew more slowly in firms with 50 to 99 employees (65.0 percent) than in firms with 100 or more employees (85.0 percent). By 2016, average employee-plus-one premiums in firms with 50 to 99 employees (\$11,389) were about 7 percent lower than in the largest firms (\$12,225) (Exhibit ES.11).

**Exhibit ES.10**

**Average total single premium per enrolled employee, by firm size, 2003-2016**

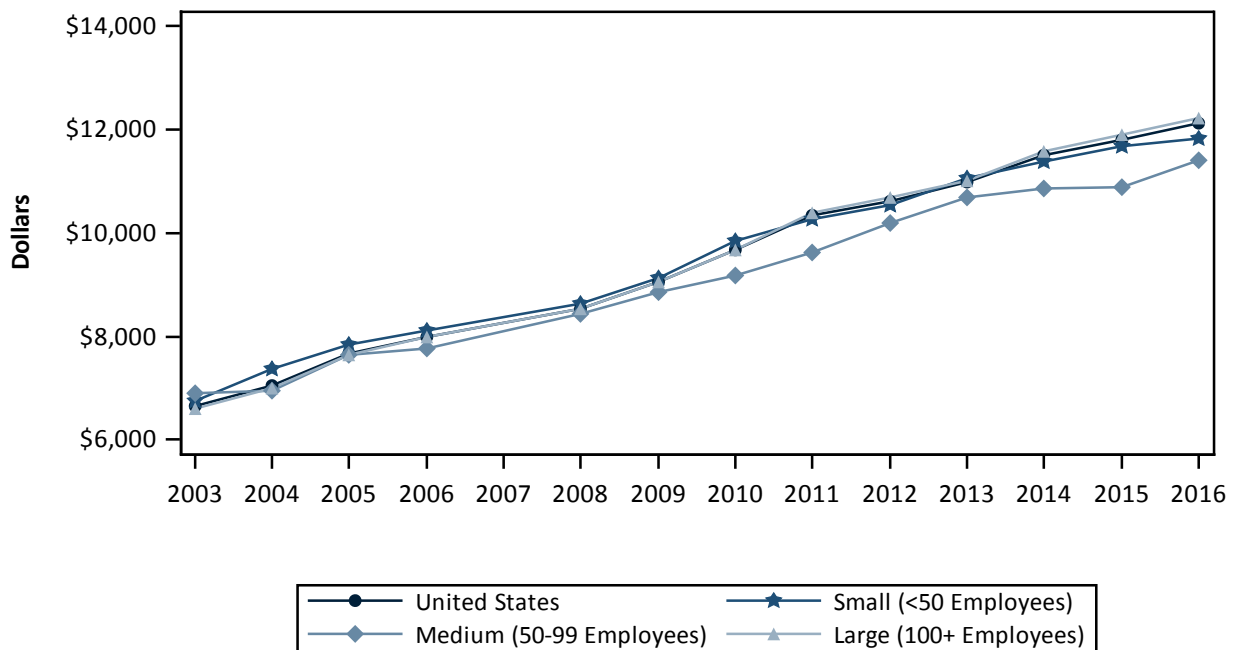


**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

**Exhibit ES.11**

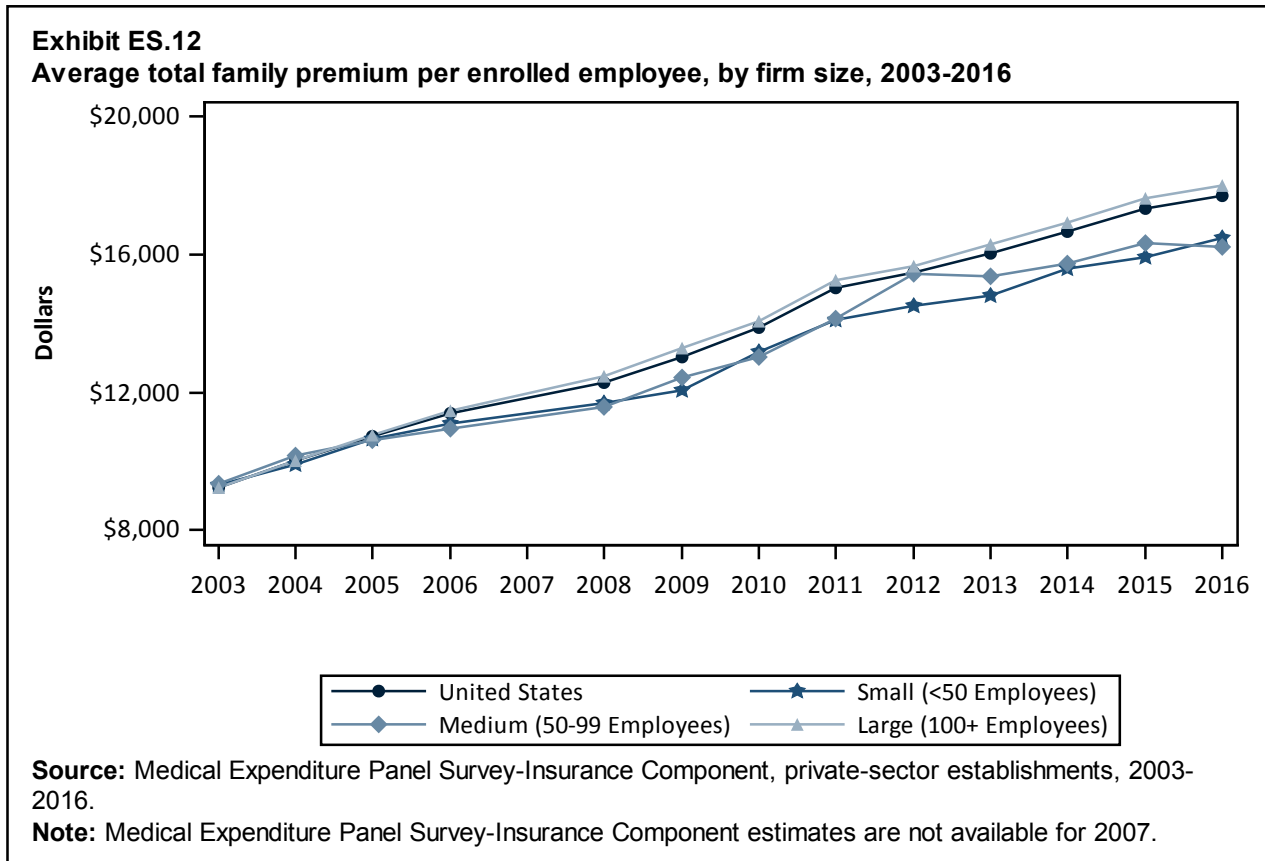
**Average total employee-plus-one premium per enrolled employee, by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

In 2003, there were no statistically significant differences in average family premiums by firm size. However, from 2003 to 2016, family premiums grew faster at the largest firms than at smaller firms (95.1 percent in firms with 100 or more employees vs. 73.3 percent in firms with 50 to 99 employees and 76.7 percent in firms with fewer than 50 employees). Thus, by 2016, family premiums in the largest firms (\$18,000) were about 11 percent higher than in firms with 50 to 99 employees (\$16,214) and about 9 percent higher than in firms with fewer than 50 employees (\$16,471) (Exhibit ES.12).



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., 95.2 percent of employees in firms with 1,000 or more employees have offers of employee-plus-one coverage compared with 61.3 percent of employees in firms with fewer than 10 employees) (data shown in Section 1, Exhibit 1.13). Therefore, at large firms, two-person families are not likely to be included in the risk pool for family policies. 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.

Ten States had average annual premiums for single coverage that were significantly lower than the national average of \$6,101 (Exhibit ES.13). These States were:

- Alabama (\$5,536),
- Arkansas (\$5,341),
- Hawaii (\$5,863),
- Idaho (\$5,594),

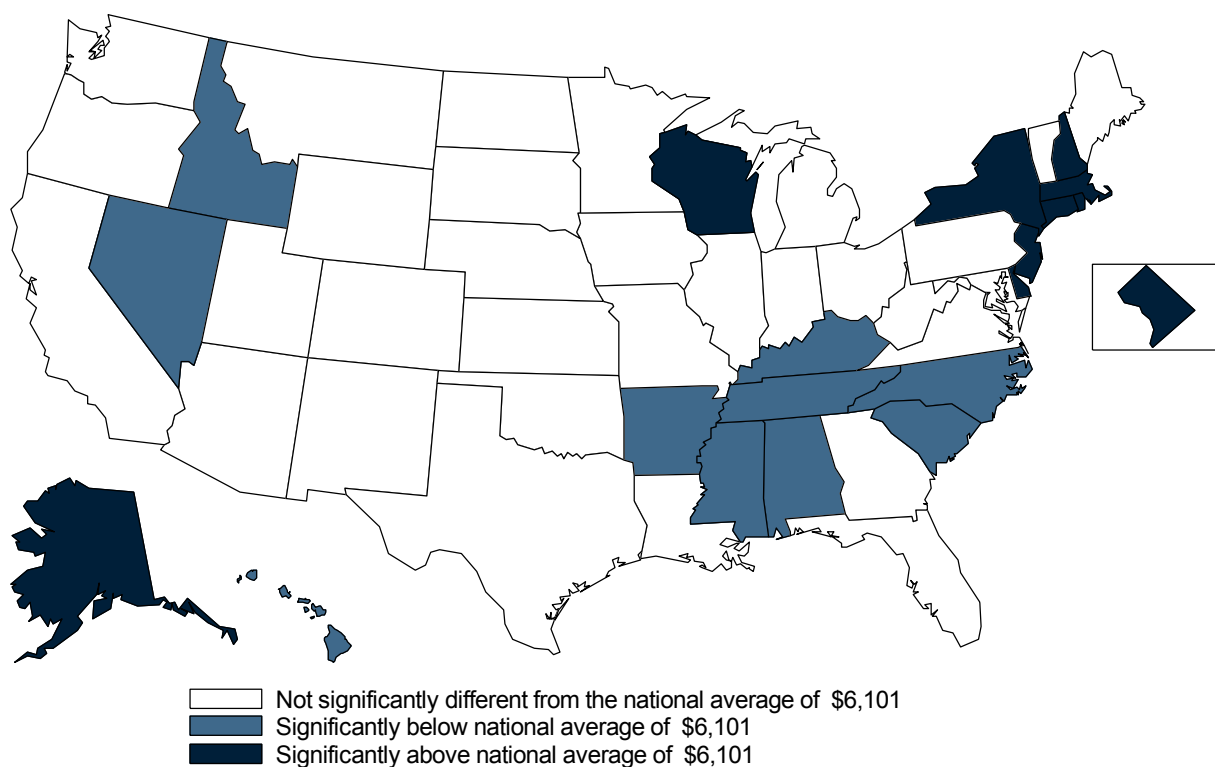
- Kentucky (\$5,758),
- Mississippi (\$5,642),
- Nevada (\$5,490),
- North Carolina (\$5,717),
- South Carolina (\$5,797), and
- Tennessee (\$5,543) (Exhibit ES.13).

There were also 10 States that had average annual single premiums that were significantly higher than the national average (Exhibit ES.13). These States were:

- Alaska (\$7,886),
- Connecticut (\$6,545),
- Delaware (\$6,522),
- District of Columbia (\$6,504),
- Massachusetts (\$6,621),
- New Hampshire (\$6,637),
- New Jersey (\$6,492),
- New York (\$6,614),
- Rhode Island (\$6,665), and
- Wisconsin (\$6,386) (Exhibit ES.13).

**Exhibit ES.13**

**Average total single premium per enrolled employee, by State, 2016**

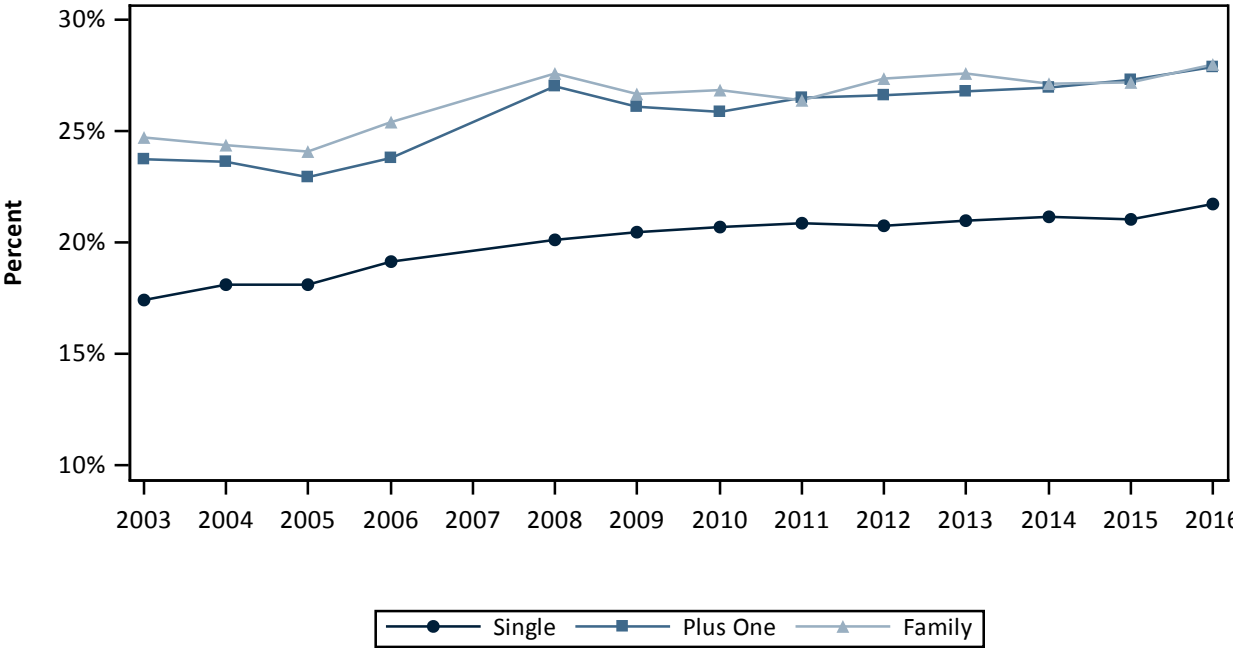


### Employee Premium Contributions

In 2016, enrolled employees paid 21.7 percent of total premiums for single coverage, 27.8 percent for employee-plus-one coverage, and 28.0 percent for family coverage (Exhibit ES.14). The employee shares of total premiums for single and family coverage in 2016 increased by 0.6 percentage points and 0.8 percentage points, respectively ( $p < 0.10$  for both coverage types) over 2015 levels. Average employee contributions in 2016 were \$1,325 (for single coverage), \$3,376 (for employee-plus-one coverage), and \$4,956 (for family coverage), representing increases of 5.6 percent, 4.8 percent, and 5.2 percent, respectively, over 2015 levels (Exhibit ES.15).

From 2003 to 2016, the percentage of total premiums contributed by employees increased by 4.3 percentage points, 4.1 percentage points, and 3.3 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 (data not shown).

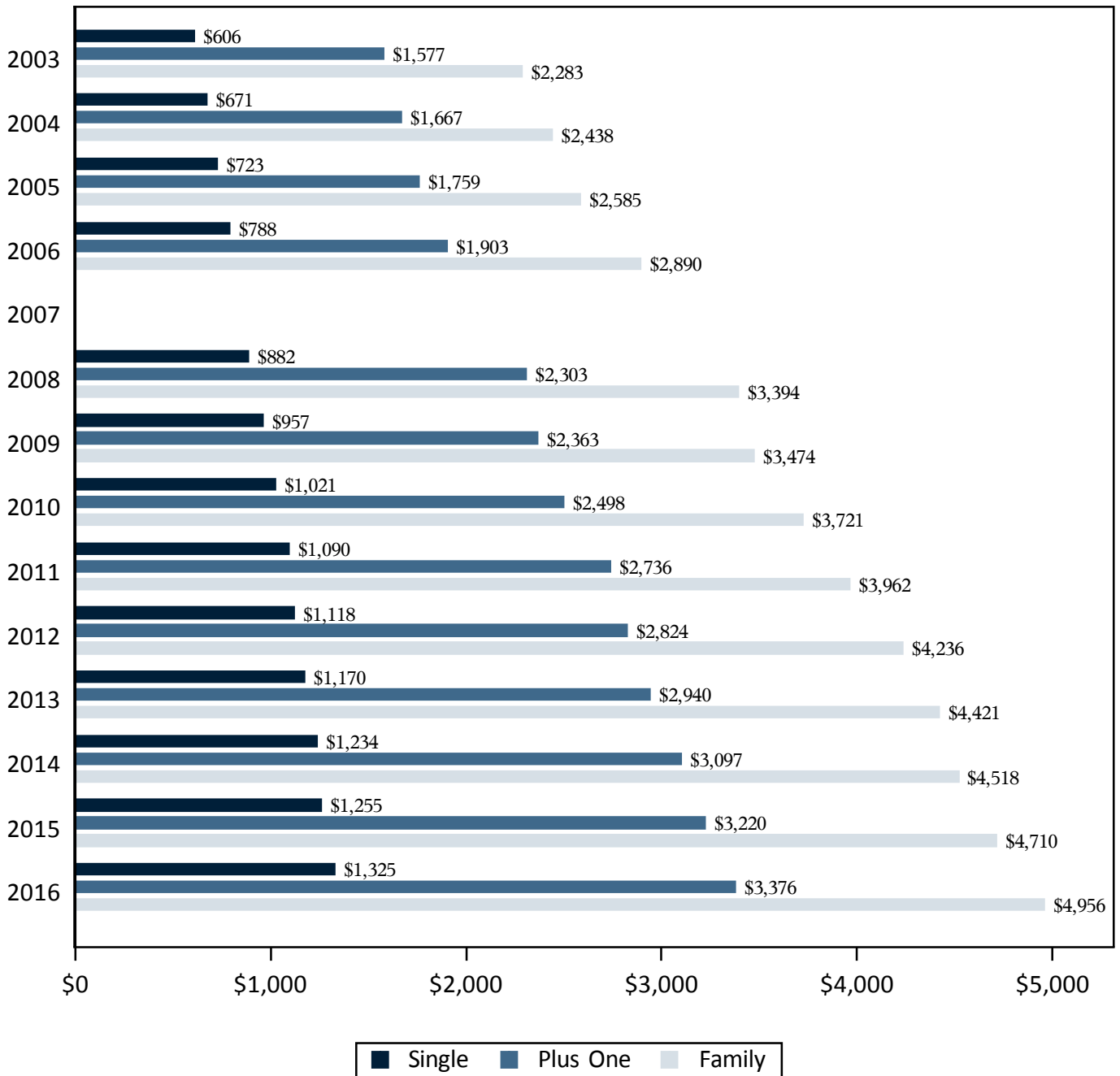
**Exhibit ES.14**  
**Average percentage of premium contributed by employees for single, employee-plus-one, and family coverage, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

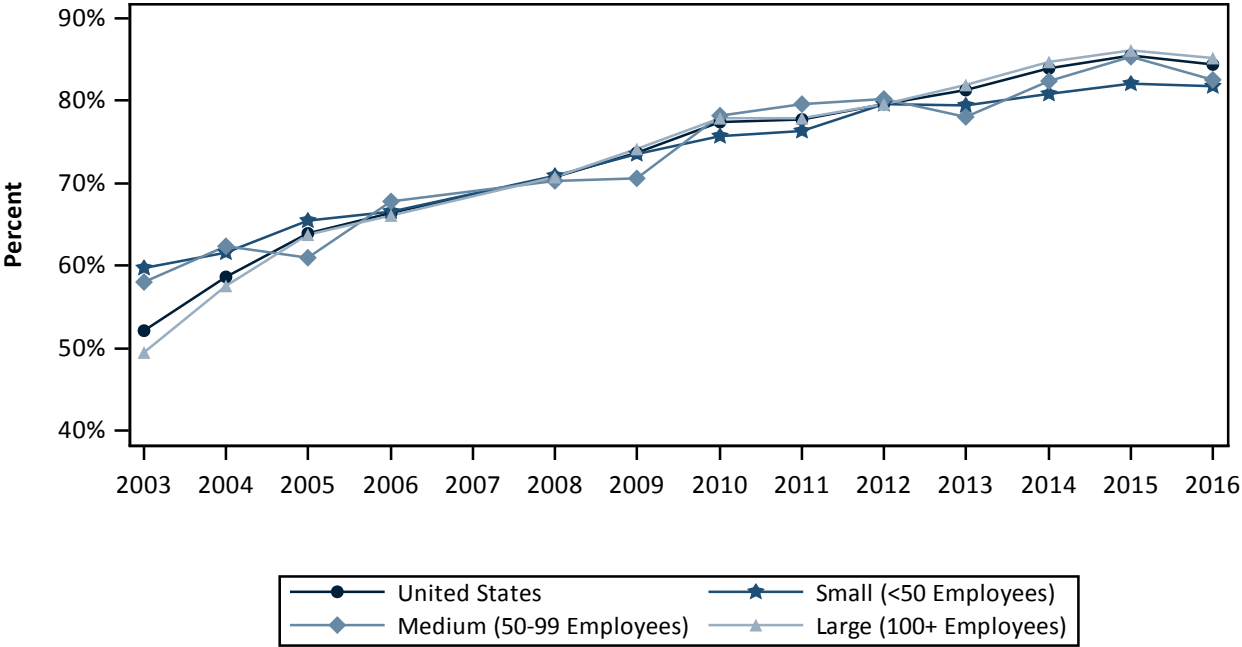


### Plan Benefits: Deductibles

There was no statistically significant change in the overall percentage of enrollees in a health insurance plan with a deductible from 2015 (85.4 percent) to 2016 (84.5 percent) (Exhibit ES.16). There were also no significant changes in this measure for any of the three firm-size categories. From 2003 to 2015, there was a significant increase in the overall percentage of enrollees with a deductible (at  $p < 0.10$  or better) in every year except from 2010 to 2011.

Among enrolled employees in single-coverage plans with deductibles, average individual deductibles rose from \$1,541 in 2015 to \$1,696 in 2016 (an increase of 10.1 percent), while average family deductibles rose from \$2,915 in 2015 to \$3,069 in 2016 (an increase of 5.3 percent) (Exhibit ES.17). Average individual deductibles were higher in small (\$2,105) and medium firms (\$2,173) than in large firms (\$1,558) in 2016. Family deductibles were also higher in small (\$3,940) and medium firms (\$3,840) than in large firms (\$2,887) in 2016.

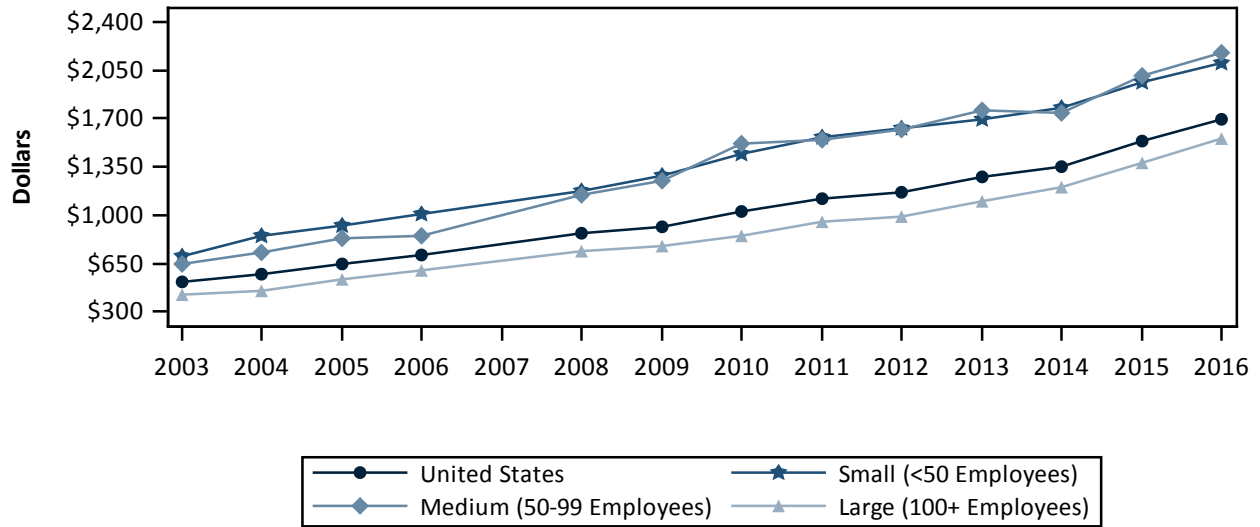
**Exhibit ES.16**  
**Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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 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 ongoing policy changes. More information is available at <https://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 2016, almost all employees (98.9 percent) in firms with 100 or more employees worked at establishments that offered health insurance. In comparison, about half (47.7 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 health care policy, small and large employers began facing new incentives regarding their employer-sponsored insurance decisions. For example, starting in 2014, 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, 2003 to 2016**

#### **All Employers**

- There was no significant change in the overall percentage of employees working at establishments where insurance was offered (“the offer rate”) between 2015 (83.8 percent) and 2016 (84.3 percent) (Exhibit 1.1).
- Between 2014 and 2015, the percentage of employees working where insurance was offered increased by 0.6 percentage points (from 83.2 percent to 83.8 percent,  $p < 0.10$ ), partially offsetting a 1.7 percentage point decline from 2013 to 2014.
- Between 2003 and 2013, the percentage of employees at firms of all sizes who worked for employers that offered health insurance declined from 86.8 percent to 84.9 percent, with almost all the decline occurring between 2009 and 2012. During that time, offer rates declined between 2009 and 2010 (1.1 percentage points), between 2010 and 2011 (1.2 percentage points), and between 2011 and 2012 (0.6 percentage points,  $p < 0.10$ ).

### **Small Employers (Firms With Fewer Than 50 Employees)**

- Offer rates at small employers were unchanged between 2015 and 2016 (47.7 percent in 2016). Between 2014 and 2015, they declined from 49.8 percent to 47.6 percent, a 2.2 percentage point decline. This decline followed a 3.3 percentage point decline from 2013 to 2014. Offer rates at small employers declined by an average of 2.2 percentage points per year between 2008 and 2012, which was not significantly different from either of the year-to-year declines between 2013 and 2015 (Exhibit 1.1).
- From 2015 to 2016, offer rates in the smallest firms (fewer than 10 workers) declined by 2.0 percentage points to 28.4 percent ( $p < 0.10$ ). This decline followed two years of declines, from 2014 to 2015 (2.5 percentage points) and 2013 to 2014 (3.3 percentage points), that occurred after a period of relative stability in offer rates from 2011 to 2013. From 2008 to 2011, offer rates in the smallest firms declined each year, falling from 45.0 percent to 36.0 percent, an average decline of 3.0 percentage points per year (Exhibit 1.2).
- Between 2015 and 2016, there was no statistically significant change in offer rates for employees in firms with 10 to 24 workers (54.0 percent in 2016). However, between 2014 and 2015, offer rates at such firms declined by 2.9 percentage points ( $p < 0.10$ ), which followed a 3.8 percentage point decline from 2013 to 2014. Offer rates for employers of this size were relatively stable from 2003 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)**

- The offer rate at medium employers (50 to 99 employees) increased from 85.3 percent in 2015 to 88.6 percent in 2016, the first year that the federally mandated employer shared responsibility provisions took effect for firms of this size (Exhibit 1.1).
- Between 2014 and 2015, there was no significant change in the offer rate at medium employers (Exhibit 1.1).
- From 2013 to 2014, offer rates for employers of this size declined from 87.0 percent to 83.0 percent. This decline offset the 2.9 percentage point increase that occurred between 2012 and 2013 ( $p < 0.10$ ) (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 between 2015 and 2016 (98.9 percent in 2016). Previously, offer rates at large employers had increased from 97.3 percent in 2014 to 98.8 percent in 2015, the first year that the Affordable Care Act's employer shared responsibility provisions took effect for firms of this size. This increase more than offset the 0.7 percentage point decline that occurred from 2013 to 2014 for large firms (Exhibit 1.1).
- While overall offer rates were unchanged for employees at firms with 100 or more workers between 2015 and 2016, at firms with 100 to 999 employees they increased (from 96.1 percent to 97.3 percent,  $p < 0.10$ ) and at firms with 1,000 or more employees they decreased (from 99.8 percent to 99.6 percent,  $p < 0.10$ ) (Exhibit 1.2).
- The 2014-2015 increase in offer rates for large employers occurred at 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, 2016**

- Nationwide, 84.3 percent of employees at firms of all sizes worked at establishments that offered insurance. There was substantial variation in the availability of workplace coverage across the country. This 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 (Exhibits 1.3 and 1.4).
- Before the Affordable Care Act was passed in 2010, two States, Hawaii and Massachusetts, had implemented State-level employer mandates. However, Massachusetts repealed their mandate in 2013. In 2016, both States had higher offer rates than the national average (96.8 percent in Hawaii and 87.6 percent in Massachusetts vs. 84.3 percent for the Nation). Other States with offer rates exceeding the national average were the District of Columbia, Nevada, and Virginia (Exhibit 1.3).
- States with offer rates below the national average in 2016 were Alaska, Florida, Idaho, Maine, Montana, Nebraska, New Mexico, North Carolina, Oregon, South Carolina, South Dakota, Vermont, and Wyoming (Exhibit 1.3).

### **Offer Rates at Small Employers, by State, 2016**

- Nationwide, nearly half (47.7 percent) of employees of small firms (fewer than 50 employees) worked at establishments that offered insurance. However, there was substantial variation in the availability of workplace coverage across the country (Exhibit 1.4).
- Similar to the estimates for all employers, small-employer offer rates in Hawaii and Massachusetts were higher than that for the Nation in 2016 (89.4 percent in Hawaii and 58.0 percent in Massachusetts vs. 47.7 percent for the Nation). Other States with small-employer offer rates exceeding the national average were Connecticut, the District of Columbia, New Jersey, New York, Ohio, and Rhode Island (Exhibit 1.4).
- States with small-employer offer rates below the national average were Alaska, Arizona, Florida, Georgia, Idaho, Montana, Nebraska, North Carolina, South Carolina, and West Virginia (Exhibit 1.4).

### **Offer Rates at Employers That Are Predominantly Low Wage vs. Higher Wage Establishments, by Firm Size, 2004 to 2016**

*Note: Data in this subsection do not include estimates for 2003 because of definitional differences with the 2004 to 2015 estimates.*

- In 2016, 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 (24.4 percent vs. 56.9 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 2016, low-wage employees were defined as those earning less than \$11.50 per hour.)

- There was no significant change in offer rates at low-wage small employers (fewer than 50 employees) between 2015 and 2016. Between 2014 and 2015, offer rates at such employers declined from 26.6 percent to 23.1 percent. This followed a period of no significant change from 2012 to 2014. Offer rates at low-wage small employers declined by 11.9 percentage points between 2004 (38.5 percent) and 2014 (26.6 percent). Most of the decline in offer rates at low-wage small employers in this period occurred after 2008 (Exhibit 1.5).
- There was no significant change in offer rates at small employers with higher wages (establishments that were not predominantly low wage) between 2015 and 2016. 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 2016 (56.9 percent) were 15.5 percentage points lower than in 2004 (72.4 percent) (Exhibit 1.5).
- In the 2-year period between 2014 and 2016, offer rates at large employers (50 or more employees) with a predominantly low-wage workforce increased by a total of 4.9 percentage points, 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 at these employers and brought the 2016 offer rate at such employers (94.5 percent) to one of the highest rates in the 2004-2016 period (Exhibit 1.5).
- At large employers with a higher wage workforce, there was no change in offer rates from 2015 to 2016 (98.9 percent in both years). From 2014 to 2015, offer rates at such employers increased from 98.2 percent to 98.9 percent, offsetting a 0.5 percentage point decline from 2013 to 2014 (Exhibit 1.5).

### ***Offer Rates by Industry, 2016***

- Workers in mining and manufacturing had the highest likelihood of working where health insurance was offered (94.1 percent) while workers in agriculture, fisheries, and forestry had the lowest offer rate (56.5 percent) among all industry sectors. Workers in construction and the other services category also had relatively low offer rates (74.0 percent and 73.9 percent, respectively) (Exhibit 1.6).
- Among workers at small firms (fewer than 50 employees), those employed in mining and manufacturing (65.1 percent) or wholesale trade (69.1 percent) had the highest likelihood of working where health insurance was offered (Exhibit 1.7).

### ***Offer Rates by Selected Employer Characteristics, 2016***

- Workers at nonprofit employers were more likely to work where health insurance was offered (93.9 percent) than workers at for-profit employers. Among for-profit employers, the offer rate was higher at incorporated employers (85.0 percent) than at unincorporated employers (72.2 percent) (Exhibit 1.8).
- Offer rates increased with the firm's age, from 46.6 percent at firms 0 to 4 years old to 59.0 percent, 69.8 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 (98.7 percent vs. 63.7 percent) (Exhibit 1.8).
- Offer rates increased with the percentage of workers at the employee's 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 80.2 percent, 76.4 percent, and 54.5 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 (88.1 percent vs. 72.1 percent) (Exhibit 1.8).

### ***Offer Rates by Selected Employer Characteristics and Firm Size, 2016***

- 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 87.2 to 97.5 percent at employers in business fewer than 20 years vs. 99.5 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 2016, the offer rate increased from 91.2 percent for employers with 0 to 24 percent full-time workers to 98.8 percent and 98.9 percent for employers with 25 to 49 percent and 50 to 74 percent full-time workers, respectively, to 99.6 percent for employers with 75 percent or more full-time workers (Exhibit 1.10).
- Overall, 47.7 percent of workers in establishments that were part of firms with fewer than 50 workers were offered coverage in 2016 (Exhibit 1.1). However, there was substantial variation by establishment characteristics. For example, offer rates were notably higher in small employers that were nonprofit (64.0 percent), were in business for 20 or more years (61.1 percent), had more than one location (77.2 percent), had workforces where 75 percent or more of employees worked full time (60.9 percent), or had workforces that were not predominantly low wage (56.9 percent) compared with other categories (e.g., for profit, only one location) (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 (24.4 percent vs. 56.9 percent), 50 to 99 workers (72.2 percent vs. 94.4 percent), or 100 or more workers (97.4 percent vs. 99.4 percent) (Exhibit 1.10).

### ***Availability of Self-Insured Plans, 2003 to 2016***

- Among employers that offered insurance, 13.6 percent to 19.3 percent of establishments in the three firm size categories with fewer than 100 workers self-insured at least one plan in 2016. By contrast, 34.4 percent and 81.9 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).
- Overall, between 2015 (39.0 percent) and 2016 (40.7 percent), there was an increase in the percentage of offering establishments that self-insured at least one plan. This percentage increased for establishments in firms with fewer than 10 workers, 10 to 24 workers, and 25 to

99 workers but decreased in firms with 1,000 or more workers (from 83.8 percent in 2015 to 81.9 percent in 2016,  $p < 0.10$ ) (Exhibit 1.11).

- Among employers who offered insurance, the overall percentage of eligible employees who worked for an employer that self-insured at least one plan decreased from 2015 (59.1 percent) to 2016 (57.3 percent). This percentage increased for eligible employees at employers with 10 to 24 workers (from 10.5 percent to 14.9 percent between 2015 and 2016) but decreased at those with 1,000 or more employees (from 86.4 percent to 82.8 percent) (Exhibit 1.12).

### ***Availability of Dependent Coverage, 2016***

- In 2016, 98.4 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 2016, 84.5 percent of eligible employees in firms with fewer than 10 workers, 92.9 percent in firms with 10 to 24 workers, 97.6 percent in firms with 25 to 99 employees, 99.2 percent in firms with 100 to 999 employees, and 100 percent in firms with 1,000 or more employees were offered coverage for their dependents (Exhibit 1.13).
- In 2016, 90.9 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 generally increased with firm size. In 2016, the percentage of eligible workers with an offer of employee-plus-one coverage increased from 61.3 percent in firms with fewer than 10 employees to 78.7 percent in firms with 10 to 24 workers, 89.6 percent and 89.9 percent in firms with 25 to 99 and 100 to 999 employees, respectively, and 95.2 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, 2003-2016***

- The likelihood that a worker had a choice of plans increased with firm size in all years from 2003 to 2016. In 2016, the percentage of workers with a choice of plans was 34.2 percent in firms with fewer than 50 employees, 56.2 percent in firms with 50 to 99 employees, and 80.7 percent in firms with 100 or more workers (Exhibit 1.14).
- A greater percentage of employees who were offered health insurance had a choice of two or more plans at the workplace in 2016 (71.7 percent) than in 2015 (70.2 percent). This increase followed an increase of 3.2 percentage points from 2014 to 2015. The 2015 to 2016 increase reflected a significant increase in plan choice for medium employers (50 to 99 employees) but not for employers of other sizes. In contrast, the 2014-2015 change reflected significant increases in plan choice for small (fewer than 50 employees) and large employers (100 or more employees) but not for medium employers (50 to 99 employees) (Exhibit 1.14).
- The availability of plan choice was significantly higher in 2016 than in 2003 for small employers (34.2 percent vs. 20.3 percent), medium employers (56.2 percent vs. 33.6 percent), and large employers (80.7 percent vs. 73.1 percent) (Exhibit 1.14).

## ***Availability of a Choice of Plans at Employers That Offer Health Insurance, by Industry and Selected Employer Characteristics, 2016***

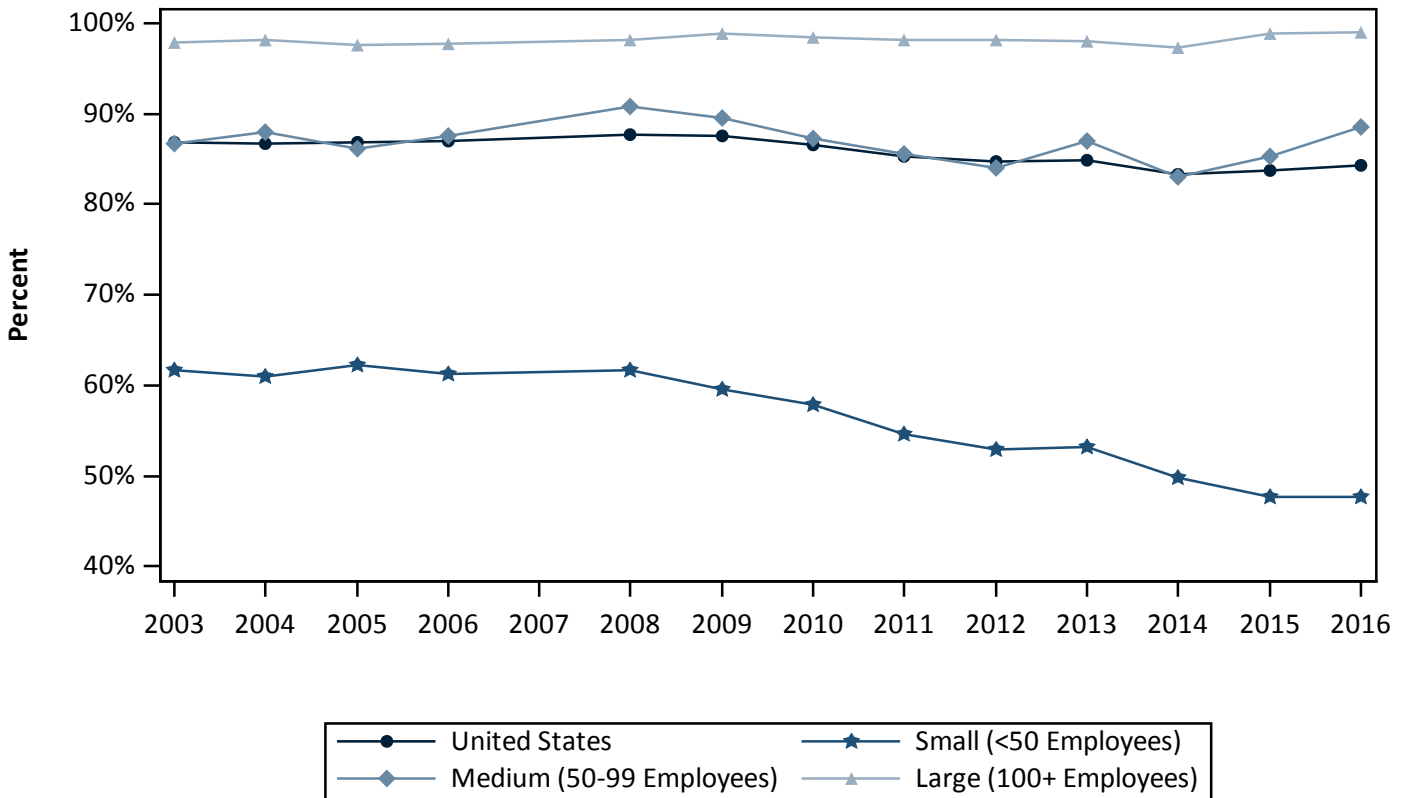
- Workers in construction were less likely to be offered a choice of plans than workers in all other industries except agriculture, fisheries, and forestry (Exhibit 1.15). There was no significant difference in the estimates for workers in construction and those in agriculture, fisheries, and forestry. Exhibit 1.16 shows variation by firm size.
- Workers at for-profit, incorporated employers were more likely to be offered a choice of plans than workers at for-profit unincorporated employers (72.3 percent vs. 68.7 percent) (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 (74.9 percent) than employees at younger firms (59.3 percent, 57.1 percent, and 60.4 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 (80.9 percent vs. 51.5 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 (64.7 percent compared with a range of 72.0 percent to 72.7 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 (45.1 percent vs. 59.2 percent) or a large employer (78.4 percent vs. 81.3 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 (70.9 percent for low-wage employers and 71.9 percent for higher wage employers), which may reflect different firm size distributions among predominantly low-wage and higher wage employers (Exhibit 1.17).

## ***Availability of Retiree Coverage, 2003 to 2016***

- In 2016, 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 2016, 32.4 percent of these large employers offered coverage to retirees under age 65. A smaller percentage, 24.8 percent, offered coverage to retirees age 65 and over. In contrast, in 2016, between 1.7 percent and 6.2 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 declined between 2003 and 2016. In 2003, 42.3 percent and 40.9 percent of establishments in the largest firms offered coverage to retirees under age 65 and age 65 and over, respectively. By 2016, 32.4 percent of the largest employers offered retiree coverage to retirees under age 65 and 24.8 percent offered retiree coverage to retirees age 65 and over. There was no significant change in offers of coverage to retirees under age 65 or age 65 and over between 2015 and 2016 for establishments in the largest firms (Exhibits 1.20 and 1.21).

**Exhibit 1.1**

**Percentage of private-sector employees in establishments that offer health insurance, by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	86.8%	86.7%	86.9%	86.9%	87.7%	87.6%	86.5%	85.3%	84.7%	84.9%	83.2%	83.8%	84.3%
<50	61.6%	61.0%	62.2%	61.2%	61.6%	59.6%	57.8%	54.7%	52.9%	53.1%	49.8%	47.6%	47.7%
50-99	86.7%	88.0%	86.2%	87.6%	90.7%	89.6%	87.3%	85.6%	84.1%	87.0%	83.0%	85.3%	88.6%
100+	97.9%	98.2%	97.5%	97.7%	98.2%	98.8%	98.5%	98.1%	98.2%	98.0%	97.3%	98.8%	98.9%

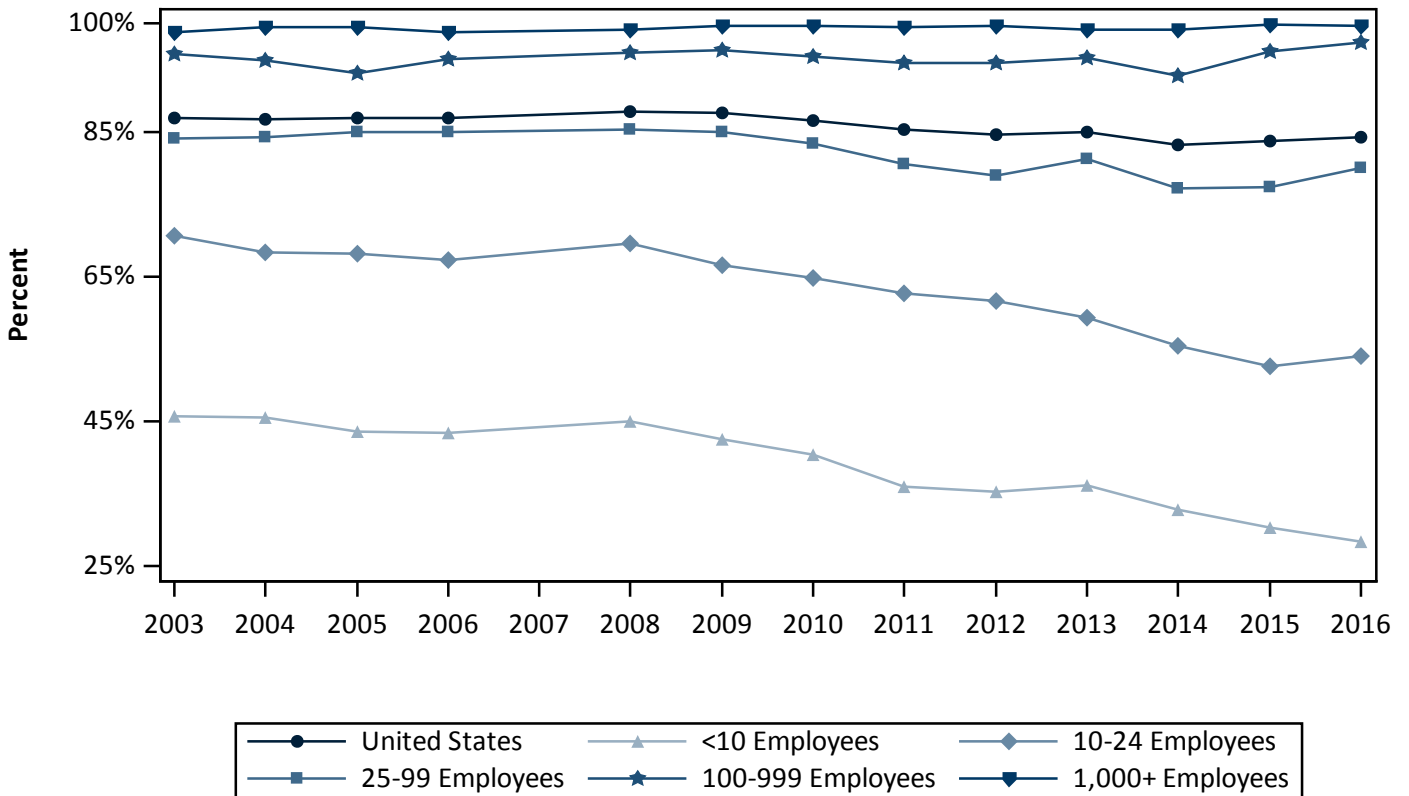
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

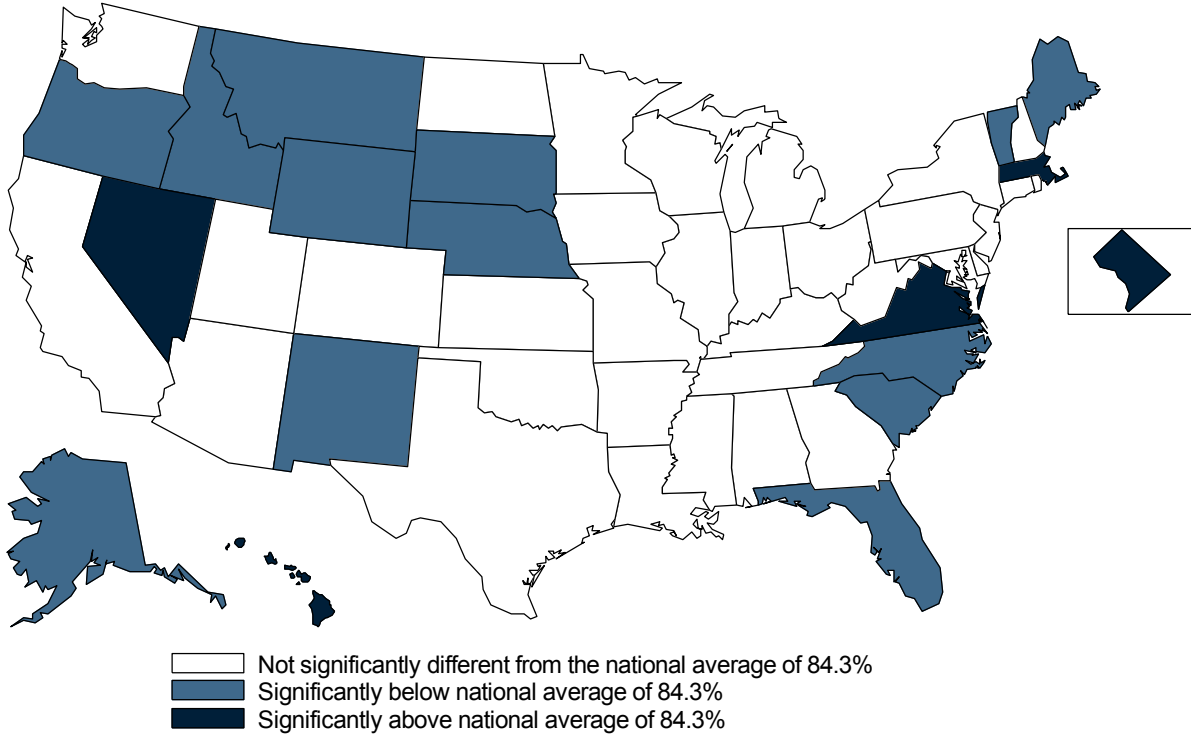
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	86.8%	86.7%	86.9%	86.9%	87.7%	87.6%	86.5%	85.3%	84.7%	84.9%	83.2%	83.8%	84.3%
<10	45.8%	45.5%	43.7%	43.3%	45.0%	42.5%	40.5%	36.0%	35.3%	36.2%	32.9%	30.4%	28.4%
10-24	70.6%	68.4%	68.2%	67.4%	69.5%	66.6%	64.7%	62.7%	61.7%	59.3%	55.5%	52.6%	54.0%
25-99	84.1%	84.2%	85.0%	85.0%	85.3%	85.0%	83.3%	80.6%	78.9%	81.2%	77.2%	77.3%	80.1%
100-999	95.8%	94.8%	93.0%	95.1%	95.9%	96.3%	95.4%	94.4%	94.6%	95.2%	92.7%	96.1%	97.3%
1,000+	98.7%	99.5%	99.4%	98.7%	99.0%	99.7%	99.6%	99.5%	99.6%	99.1%	99.1%	99.8%	99.6%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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 1.3**  
**Percentage of private-sector employees in establishments that offer health insurance,**  
**by State, 2016**

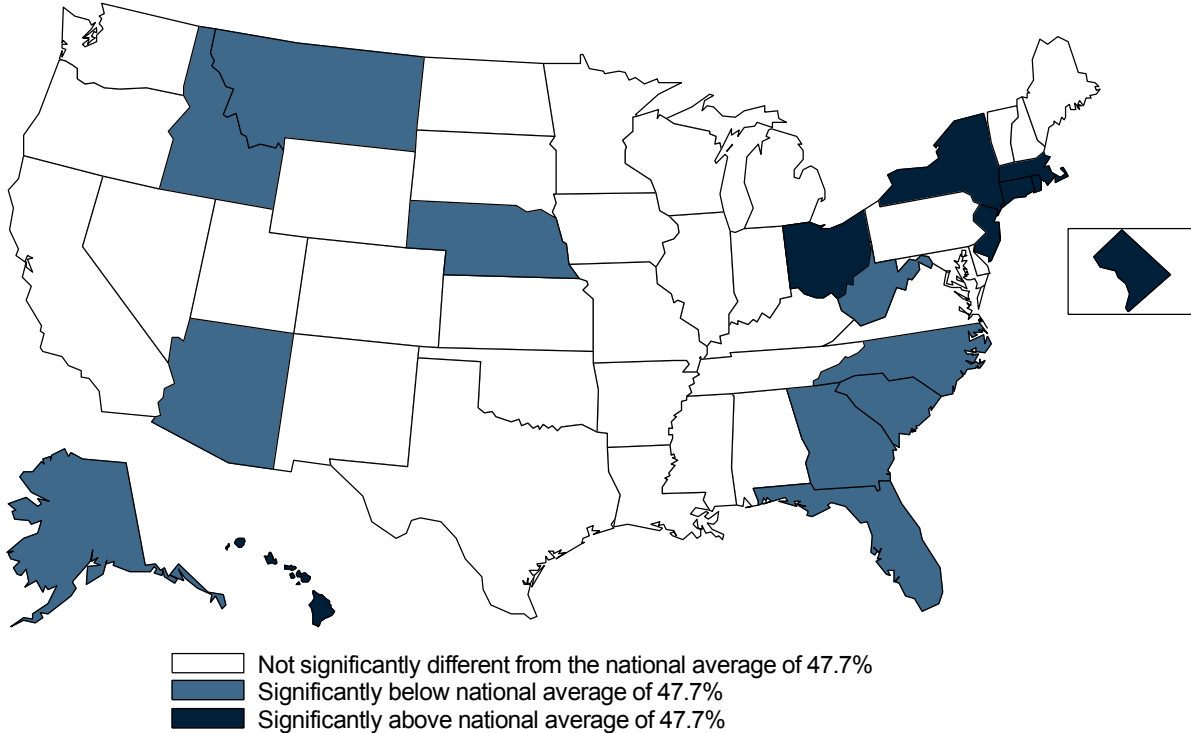


Alabama	85.7%	Kentucky	83.5%	North Dakota	82.7%
Alaska	75.2%*	Louisiana	82.6%	Ohio	87.0%
Arizona	83.5%	Maine	79.9%*	Oklahoma	85.8%
Arkansas	82.6%	Maryland	84.1%	Oregon	79.5%*
California	84.8%	Massachusetts	87.6%*	Pennsylvania	85.0%
Colorado	82.9%	Michigan	82.2%	Rhode Island	86.9%
Connecticut	86.4%	Minnesota	84.2%	South Carolina	81.3%*
Delaware	81.2%	Mississippi	83.3%	South Dakota	81.2%*
District of Columbia	92.9%*	Missouri	83.8%	Tennessee	86.4%
Florida	81.2%*	Montana	66.2%*	Texas	84.8%
Georgia	84.9%	Nebraska	79.1%*	Utah	83.1%
Hawaii	96.8%*	Nevada	87.2%*	Vermont	78.5%*
Idaho	75.6%*	New Hampshire	84.4%	Virginia	86.9%*
Illinois	85.6%	New Jersey	85.9%	Washington	82.1%
Indiana	84.1%	New Mexico	80.6%*	West Virginia	81.0%
Iowa	85.3%	New York	85.5%	Wisconsin	84.9%
Kansas	82.5%	North Carolina	81.5%*	Wyoming	72.1%*

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of 84.3 percent at  $p < 0.05$ .  
**For data points and standard errors for this exhibit select here.**

**Exhibit 1.4**

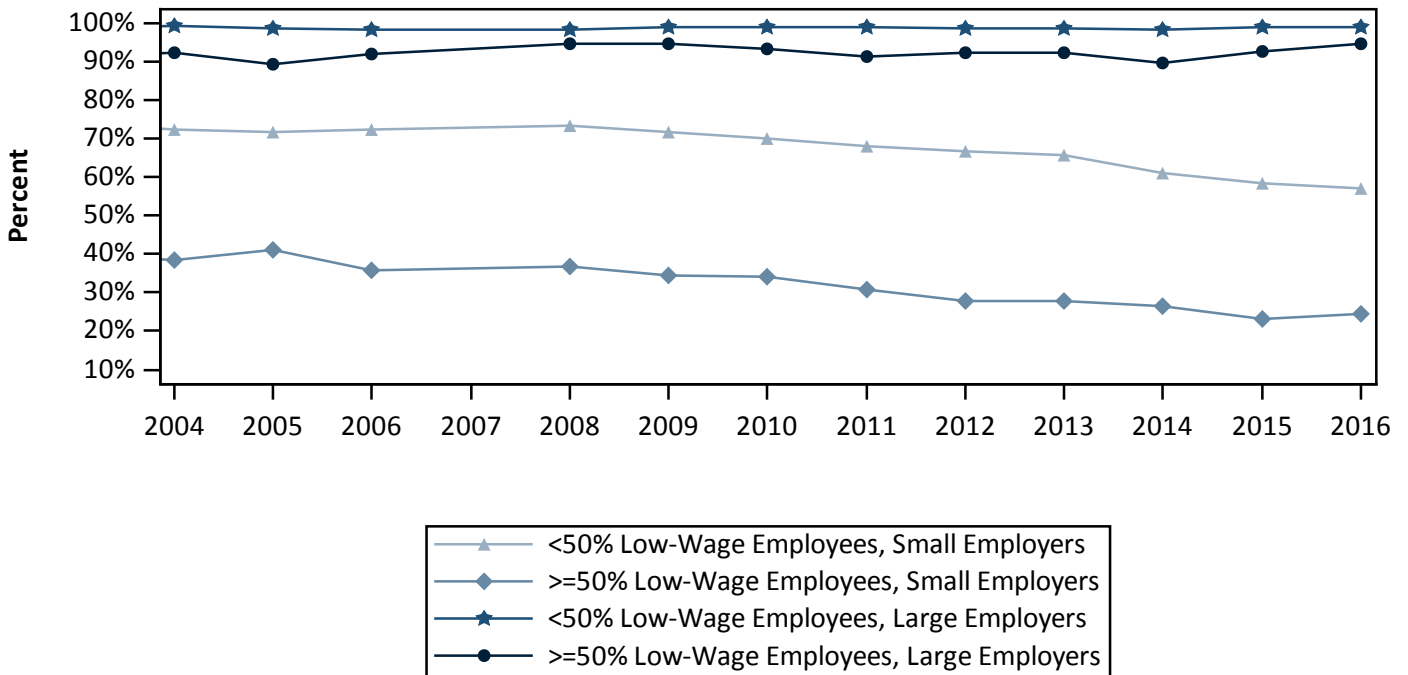
**Percentage of private-sector employees in establishments that offer health insurance, by State, firm size <50 employees, 2016**



Alabama	48.1%	Kentucky	47.2%	North Dakota	53.3%
Alaska	31.2%*	Louisiana	49.0%	Ohio	57.3%*
Arizona	39.0%*	Maine	47.2%	Oklahoma	54.9%
Arkansas	40.2%	Maryland	49.0%	Oregon	42.5%
California	50.8%	Massachusetts	58.0%*	Pennsylvania	53.2%
Colorado	46.5%	Michigan	46.2%	Rhode Island	61.6%*
Connecticut	56.3%*	Minnesota	45.7%	South Carolina	34.4%*
Delaware	40.6%	Mississippi	45.4%	South Dakota	51.3%
District of Columbia	65.6%*	Missouri	45.5%	Tennessee	42.7%
Florida	39.2%*	Montana	32.5%*	Texas	43.2%
Georgia	38.2%*	Nebraska	36.2%*	Utah	42.2%
Hawaii	89.4%*	Nevada	55.0%	Vermont	48.0%
Idaho	34.7%*	New Hampshire	51.9%	Virginia	52.4%
Illinois	45.7%	New Jersey	56.9%*	Washington	44.7%
Indiana	41.9%	New Mexico	44.8%	West Virginia	38.7%*
Iowa	48.5%	New York	54.5%*	Wisconsin	50.9%
Kansas	45.9%	North Carolina	39.4%*	Wyoming	41.6%
<b>Source:</b> Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.					
<b>Note:</b> * Indicates the estimate is statistically different from the national average of 47.7 percent at $p < 0.05$ .					
<b>For data points and standard errors for this exhibit select here.</b>					

**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, 2004-2016**



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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 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, 2004-2016**

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
<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%
>=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%
<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%
>=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%

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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

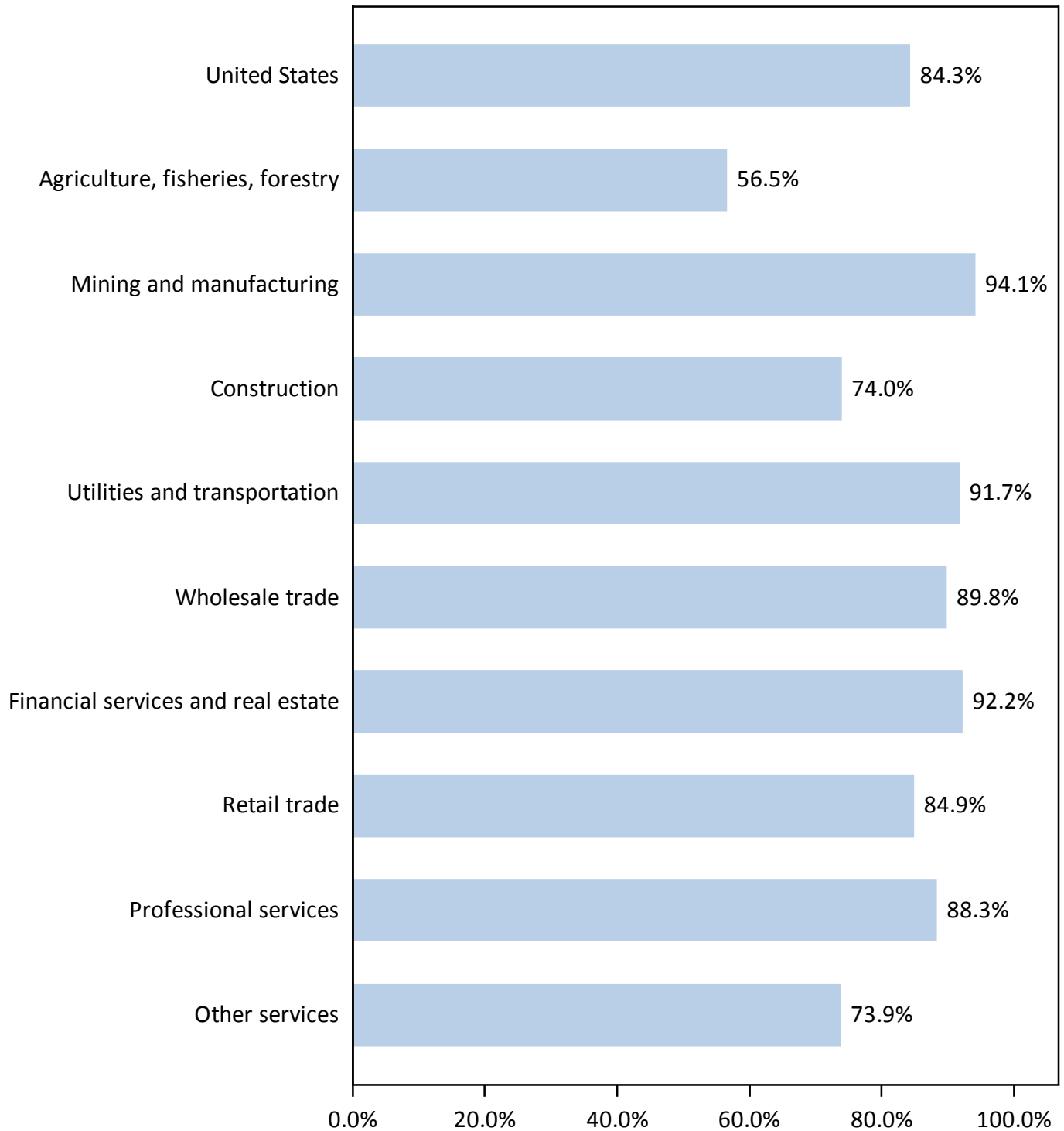
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 per hour.

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



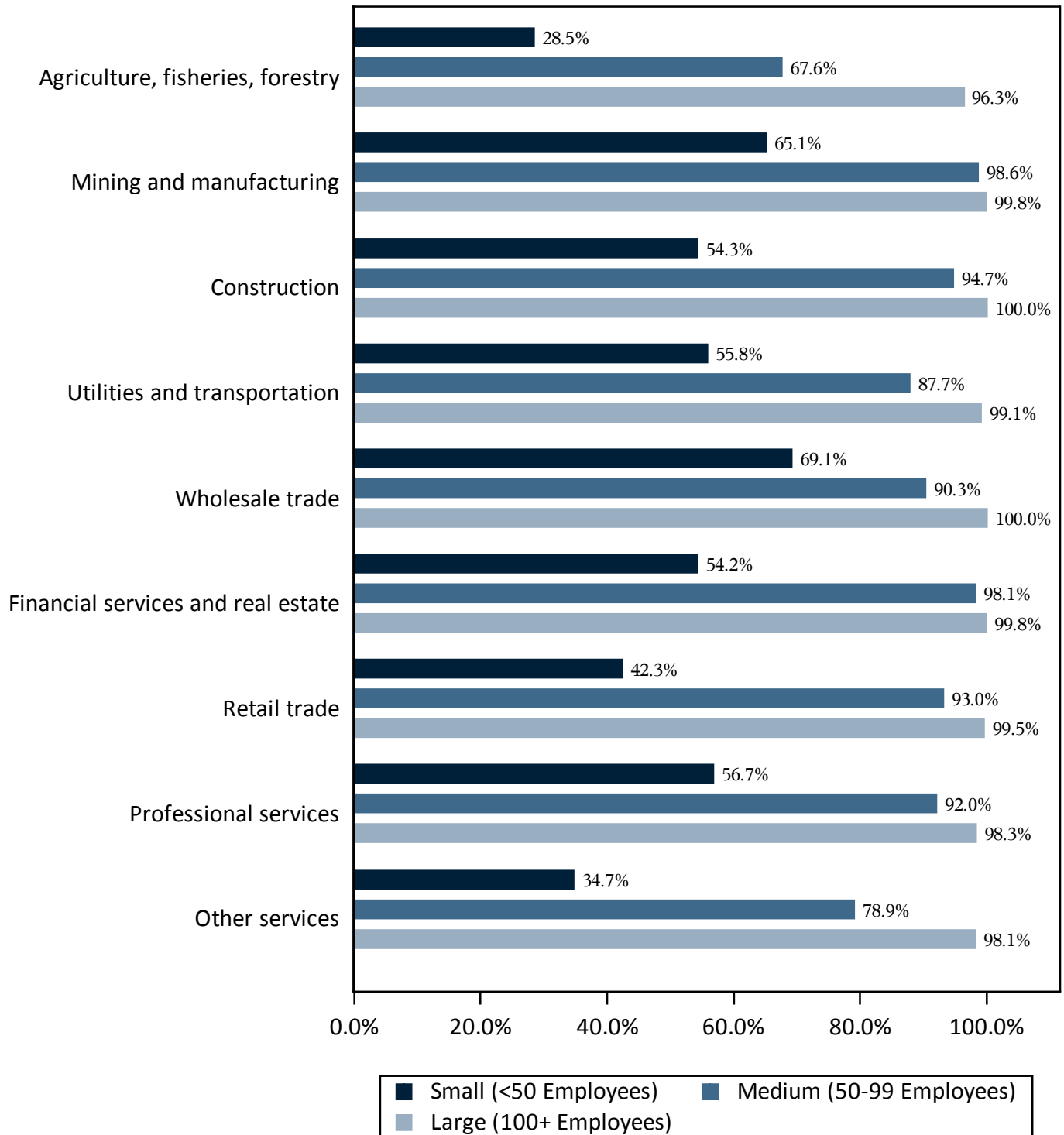
**Exhibit 1.6**

**Percentage of private-sector employees in establishments that offer health insurance, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**For data points and standard errors for this exhibit select here.**

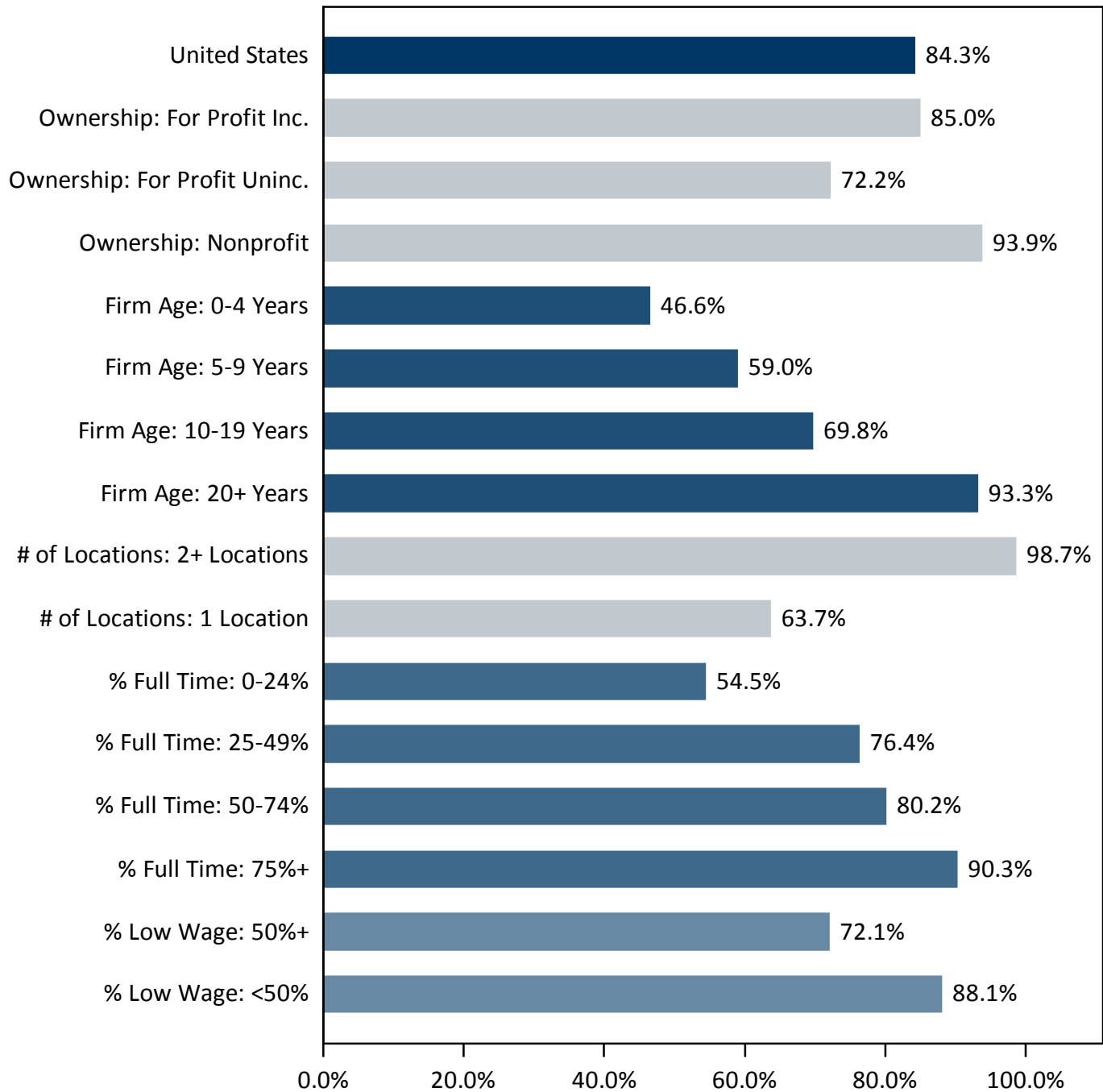
**Exhibit 1.7**  
**Percentage of private-sector employees in establishments that offer health insurance, by firm size and industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**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, 2016



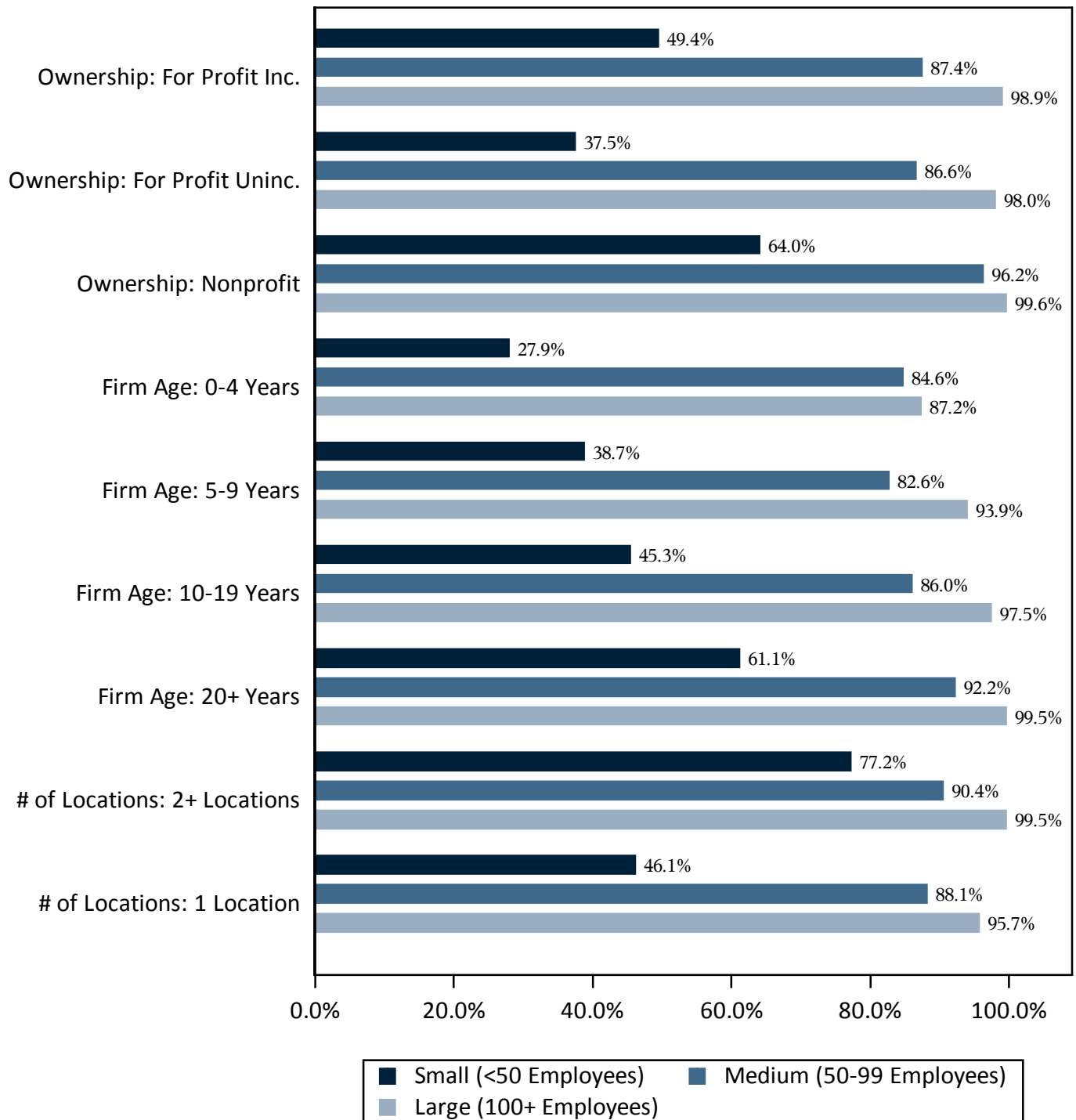
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

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

**Exhibit 1.9**

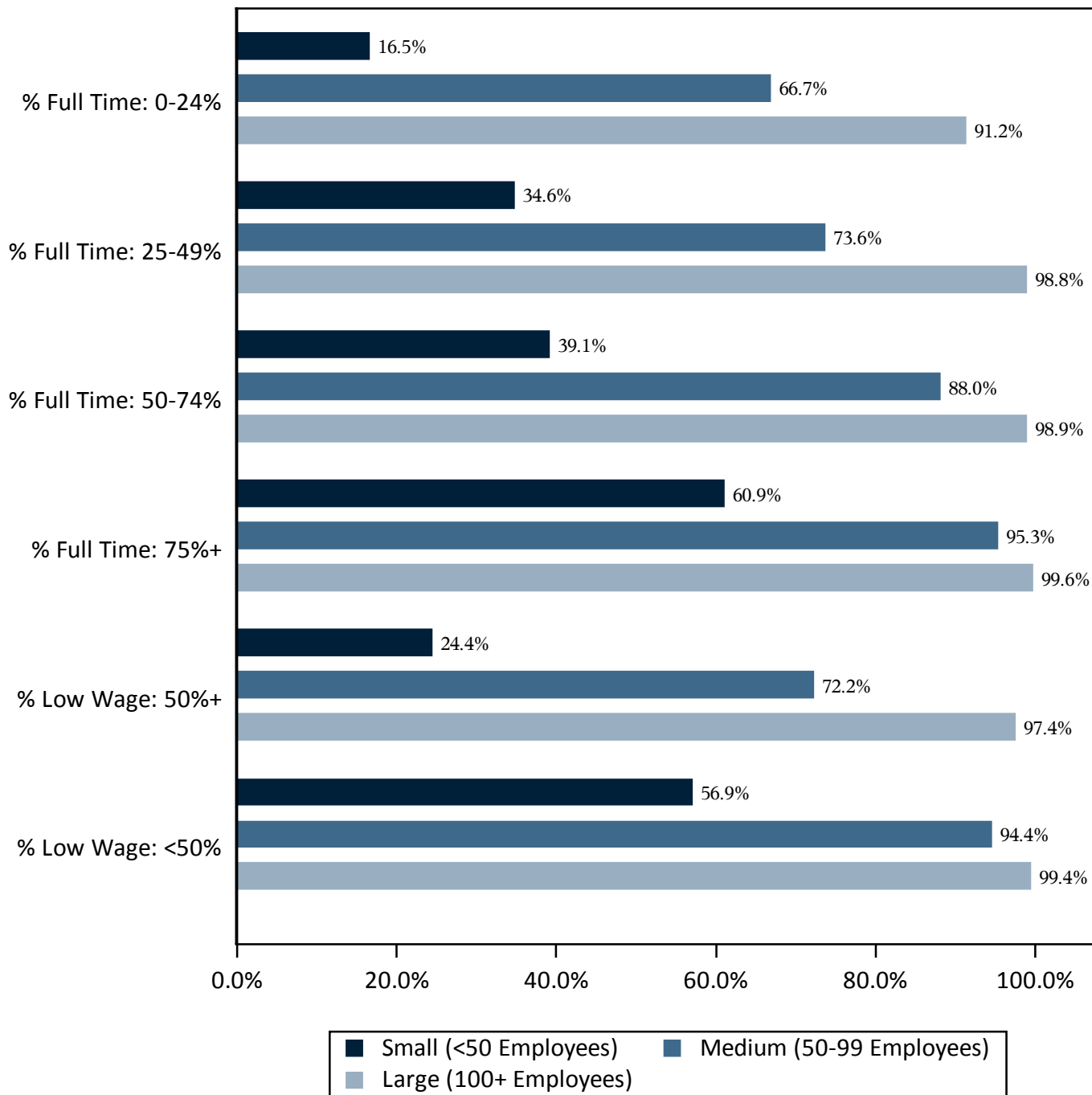
**Percentage of private-sector employees in establishments that offer health insurance, by firm size and selected characteristics (ownership type, age of firm, number of locations), 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**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), 2016**



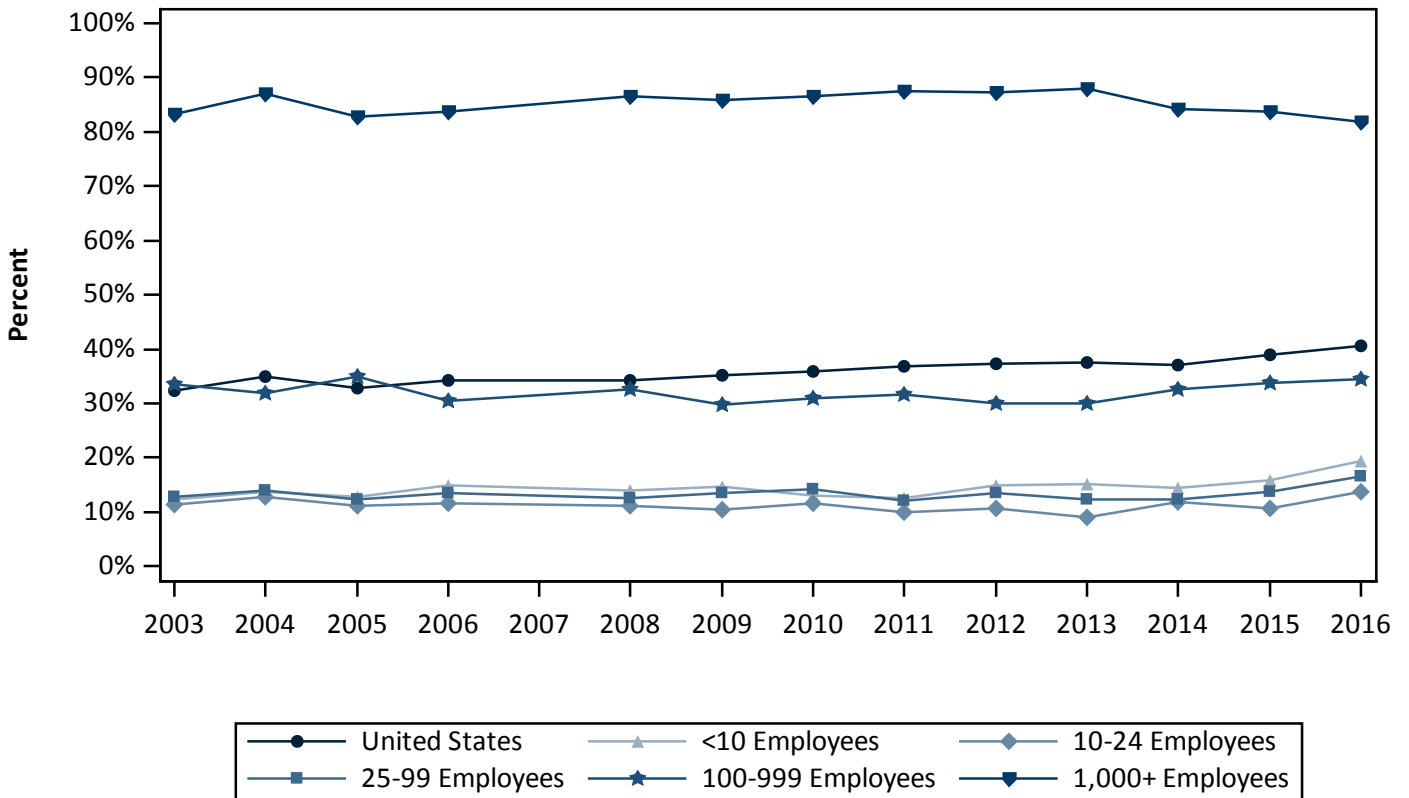
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	32.4%	35.0%	32.7%	34.4%	34.2%	35.1%	35.8%	36.9%	37.2%	37.6%	37.2%	39.0%	40.7%
<10	12.4%	13.7%	12.7%	14.9%	14.0%	14.6%	13.1%	12.6%	14.9%	15.2%	14.4%	15.8%	19.3%
10-24	11.3%	12.7%	11.2%	11.6%	11.1%	10.4%	11.6%	9.9%	10.7%	9.0%	12.0%	10.6%	13.6%
25-99	12.7%	13.9%	12.2%	13.5%	12.6%	13.4%	14.3%	12.2%	13.5%	12.4%	12.2%	13.7%	16.6%
100-999	33.5%	31.8%	34.9%	30.6%	32.7%	29.9%	30.9%	31.7%	30.1%	30.1%	32.5%	33.7%	34.4%
1,000+	83.2%	87.0%	82.7%	83.8%	86.5%	85.8%	86.6%	87.5%	87.1%	88.0%	84.2%	83.8%	81.9%

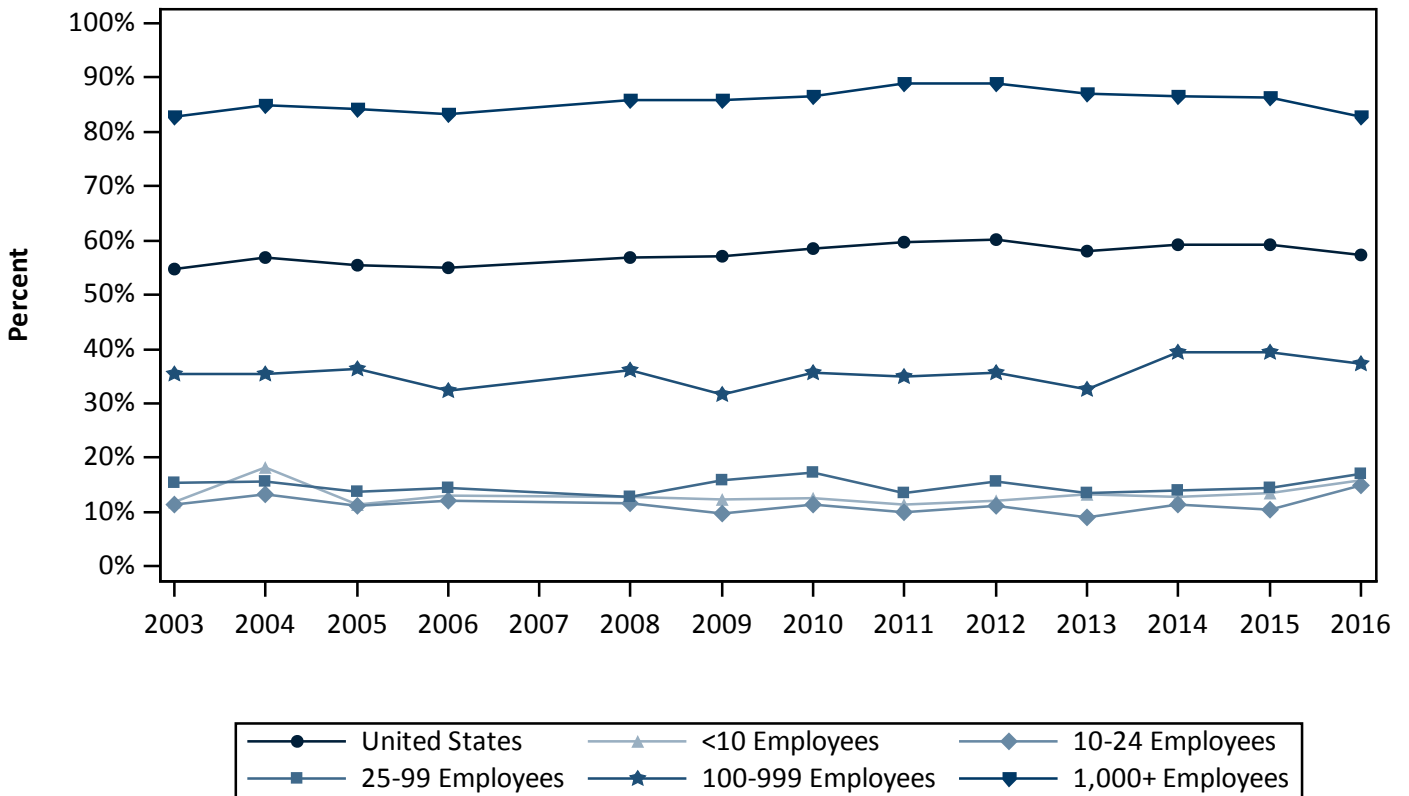
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	54.7%	57.0%	55.5%	54.9%	56.8%	57.2%	58.4%	59.6%	60.1%	58.1%	59.2%	59.1%	57.3%
<10	11.8%	18.3%	11.3%	13.1%	12.9%	12.3%	12.5%	11.5%	12.0%	13.2%	12.9%	13.5%	15.7%
10-24	11.3%	13.3%	11.2%	12.0%	11.5%	9.8%	11.5%	10.1%	11.1%	9.1%	11.4%	10.5%	14.9%
25-99	15.3%	15.7%	13.8%	14.4%	12.8%	16.0%	17.3%	13.5%	15.5%	13.4%	14.0%	14.5%	17.1%
100-999	35.4%	35.5%	36.3%	32.4%	36.1%	31.7%	35.7%	35.0%	35.7%	32.6%	39.5%	39.5%	37.4%
1,000+	82.8%	84.8%	84.2%	83.4%	85.9%	85.8%	86.6%	89.0%	89.0%	86.9%	86.6%	86.4%	82.8%

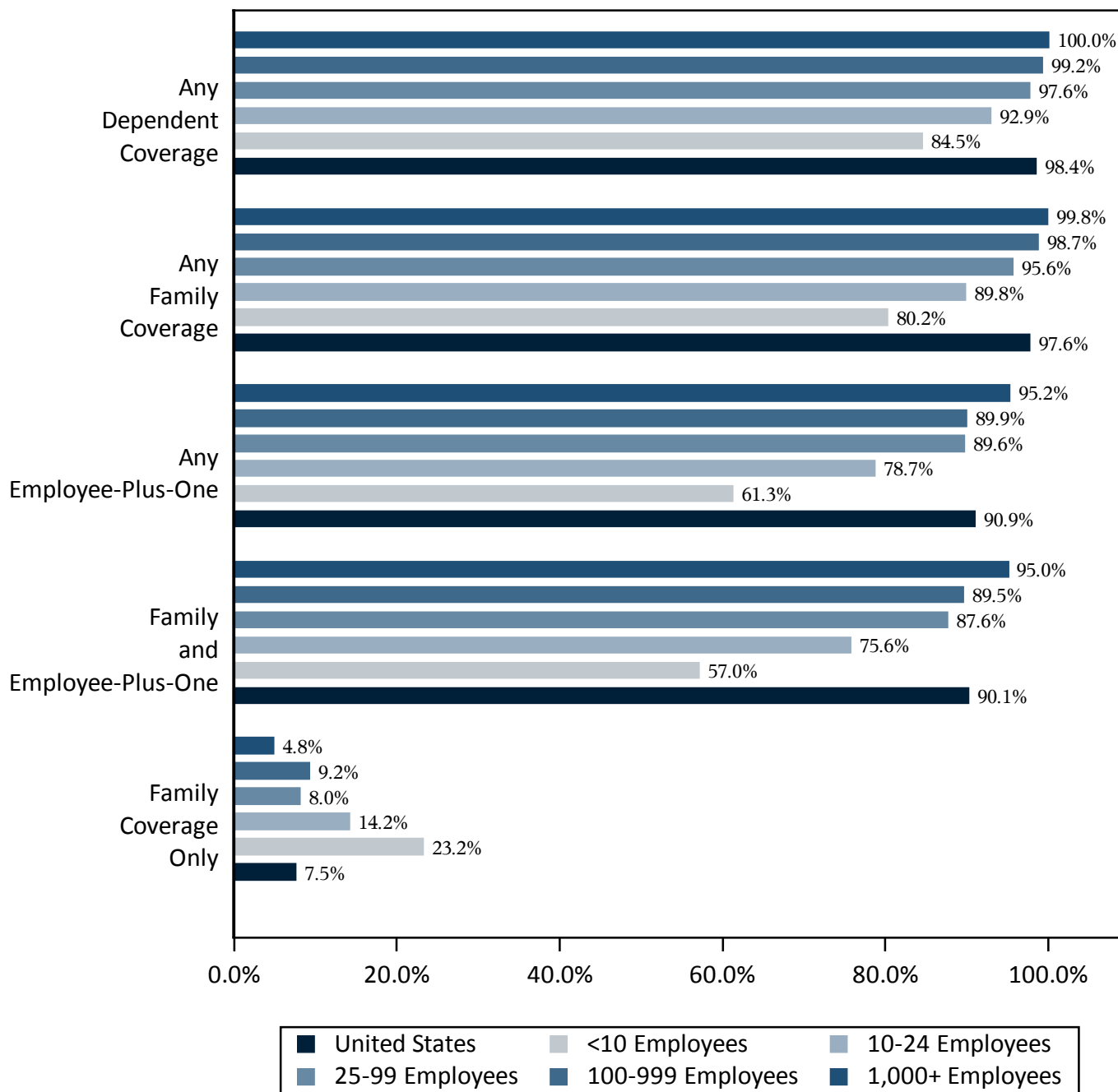
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

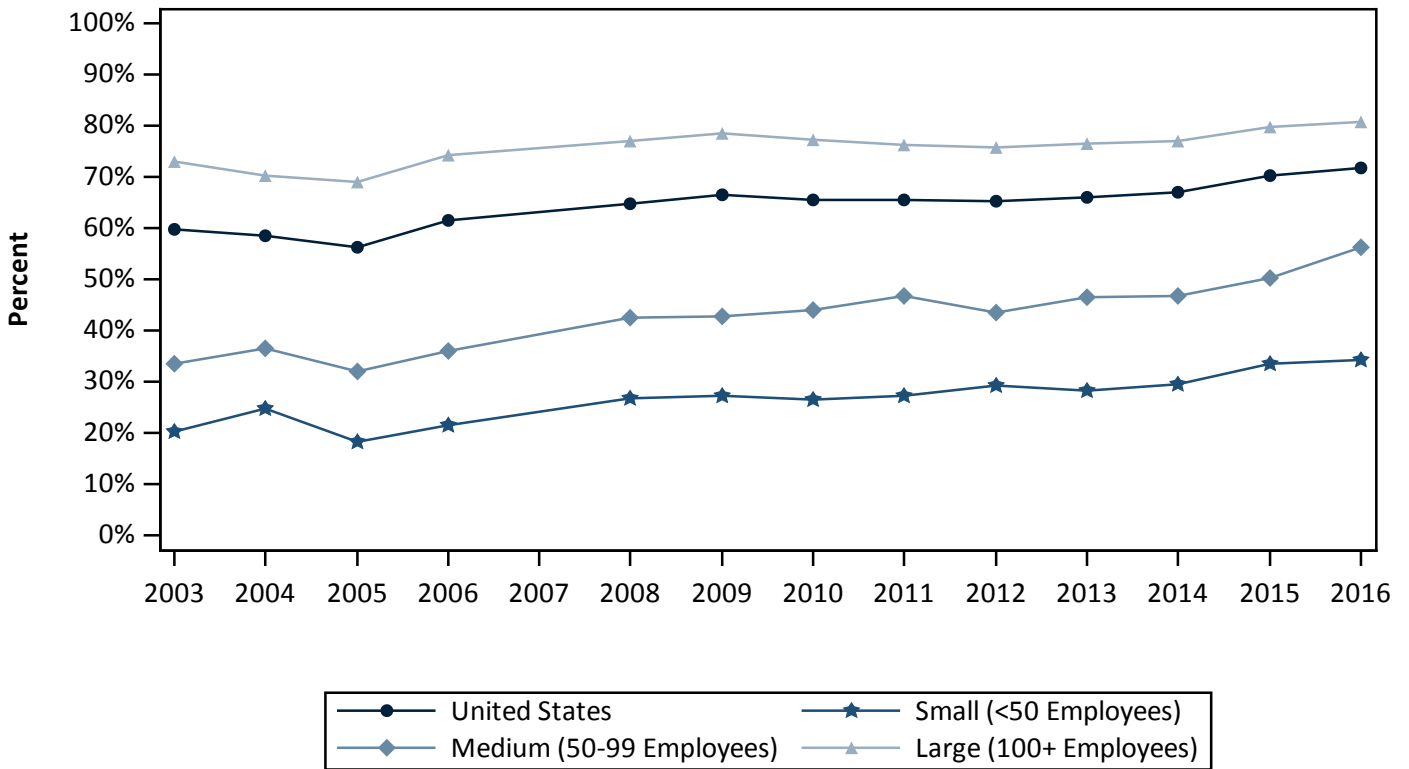
**Note:** This exhibit does not include estimates for "Employee-plus-one only." These estimates can be calculated by subtracting the estimates for "Family and Employee-Plus-One" from the estimates for "Any Employee-Plus-One."

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	59.7%	58.6%	56.3%	61.4%	64.8%	66.5%	65.6%	65.5%	65.3%	66.0%	67.0%	70.2%	71.7%
<50	20.3%	24.7%	18.2%	21.5%	26.8%	27.3%	26.7%	27.2%	29.3%	28.4%	29.6%	33.6%	34.2%
50-99	33.6%	36.7%	32.1%	36.0%	42.5%	42.8%	44.1%	46.8%	43.7%	46.6%	46.8%	50.2%	56.2%
100+	73.1%	70.2%	69.0%	74.3%	76.9%	78.5%	77.3%	76.3%	75.7%	76.5%	77.0%	79.7%	80.7%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

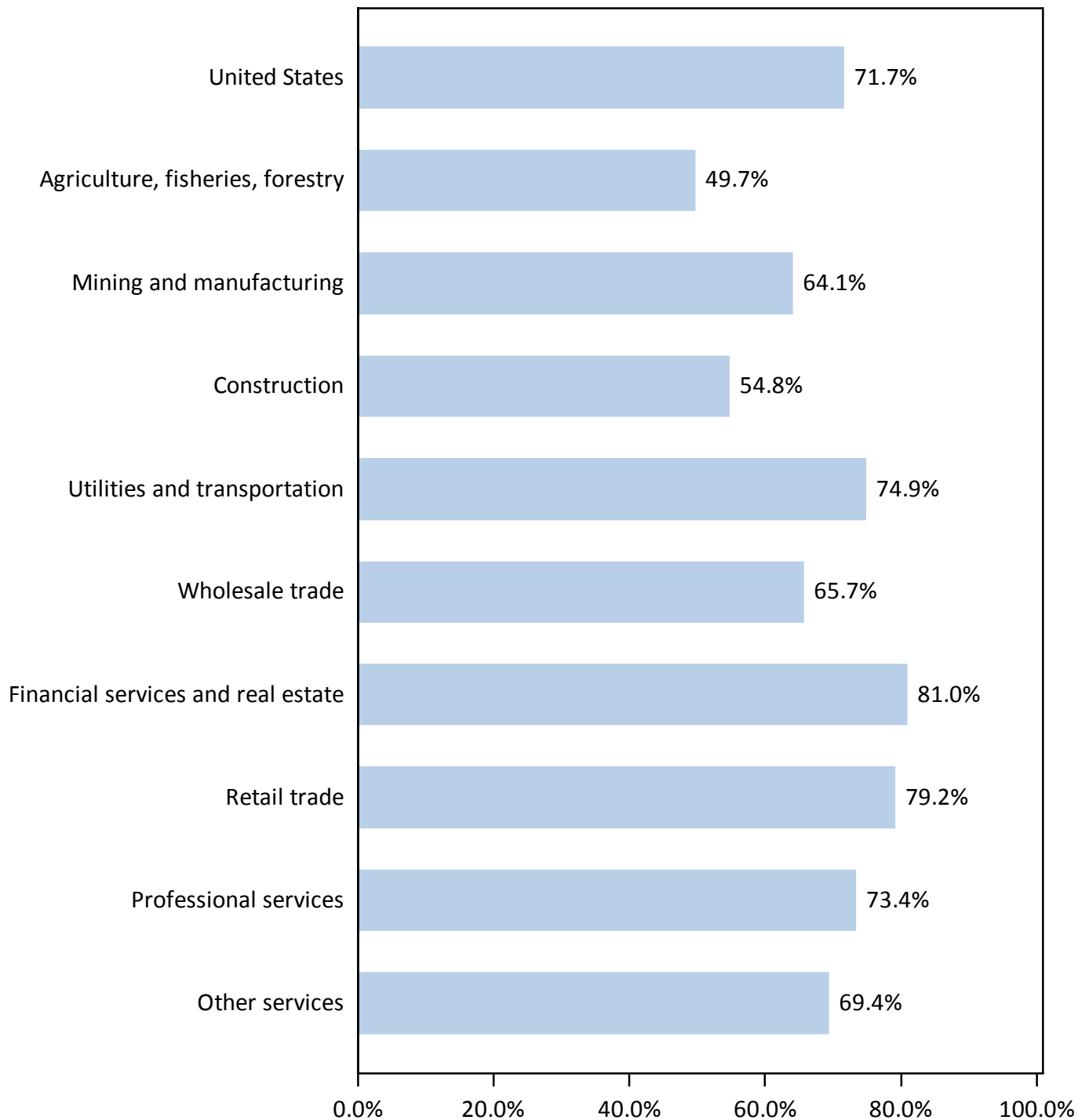
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**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, 2016**



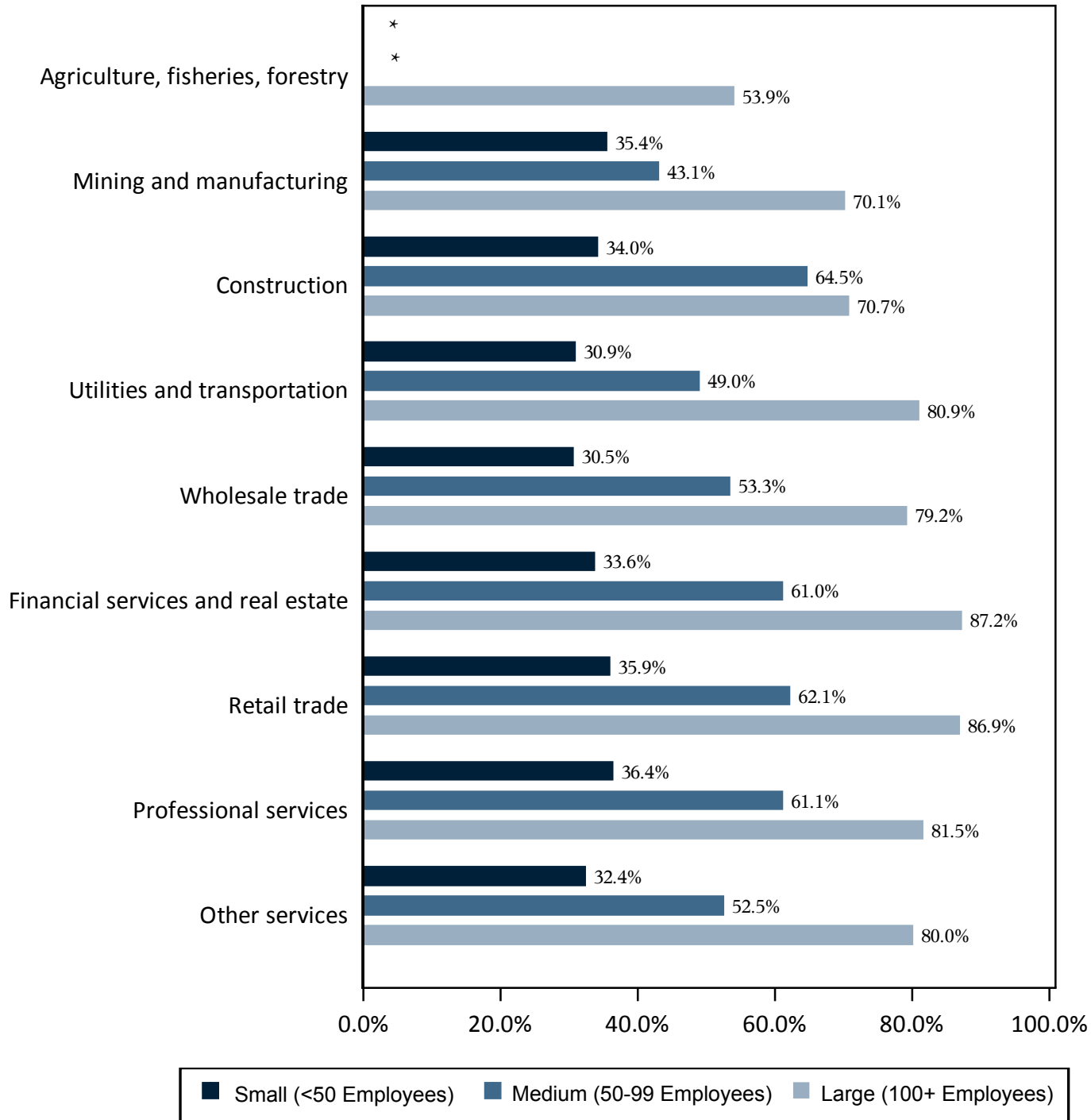
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**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, 2016**



\*Estimate was suppressed due to insufficient sample size.

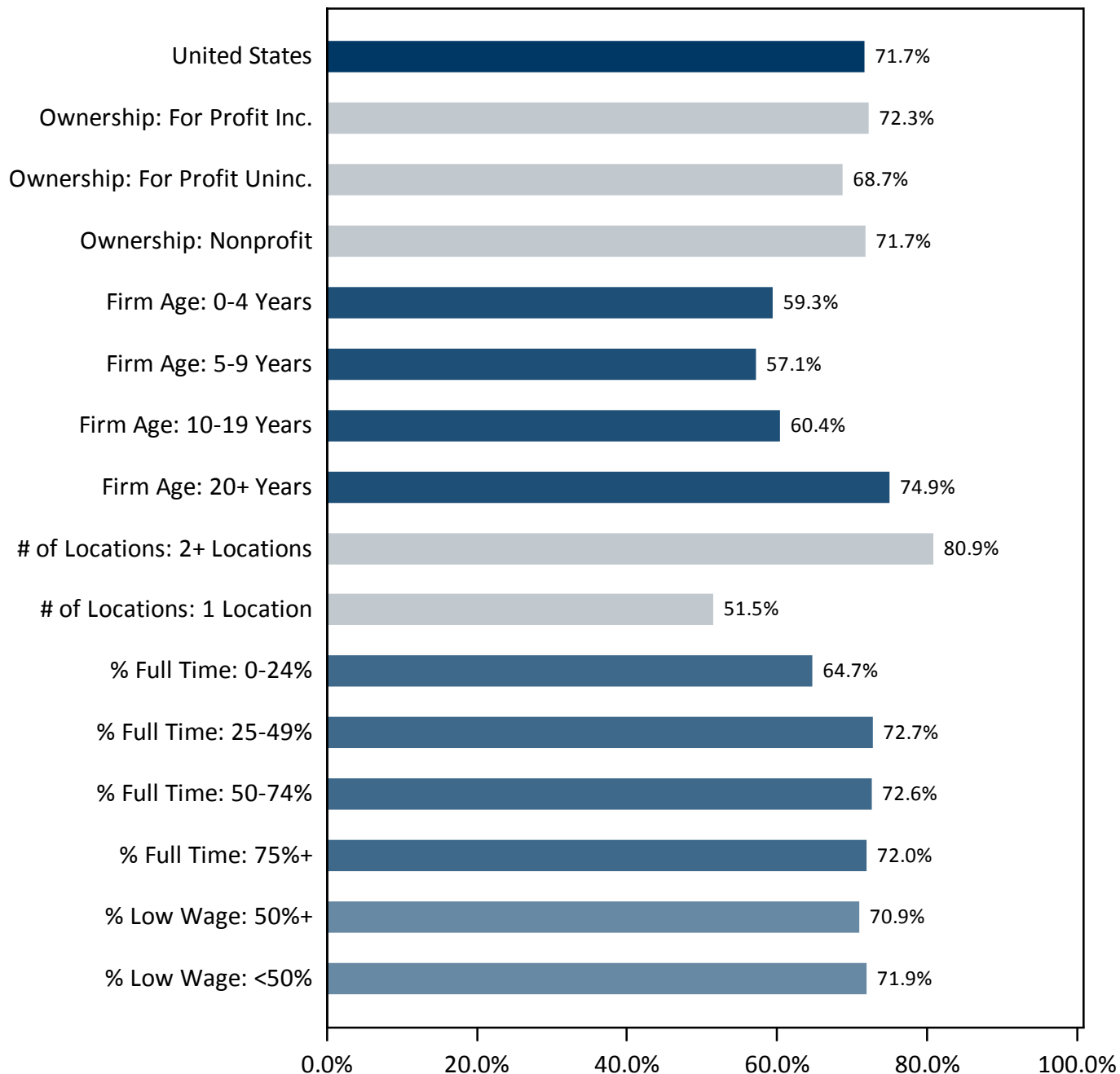
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**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, 2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

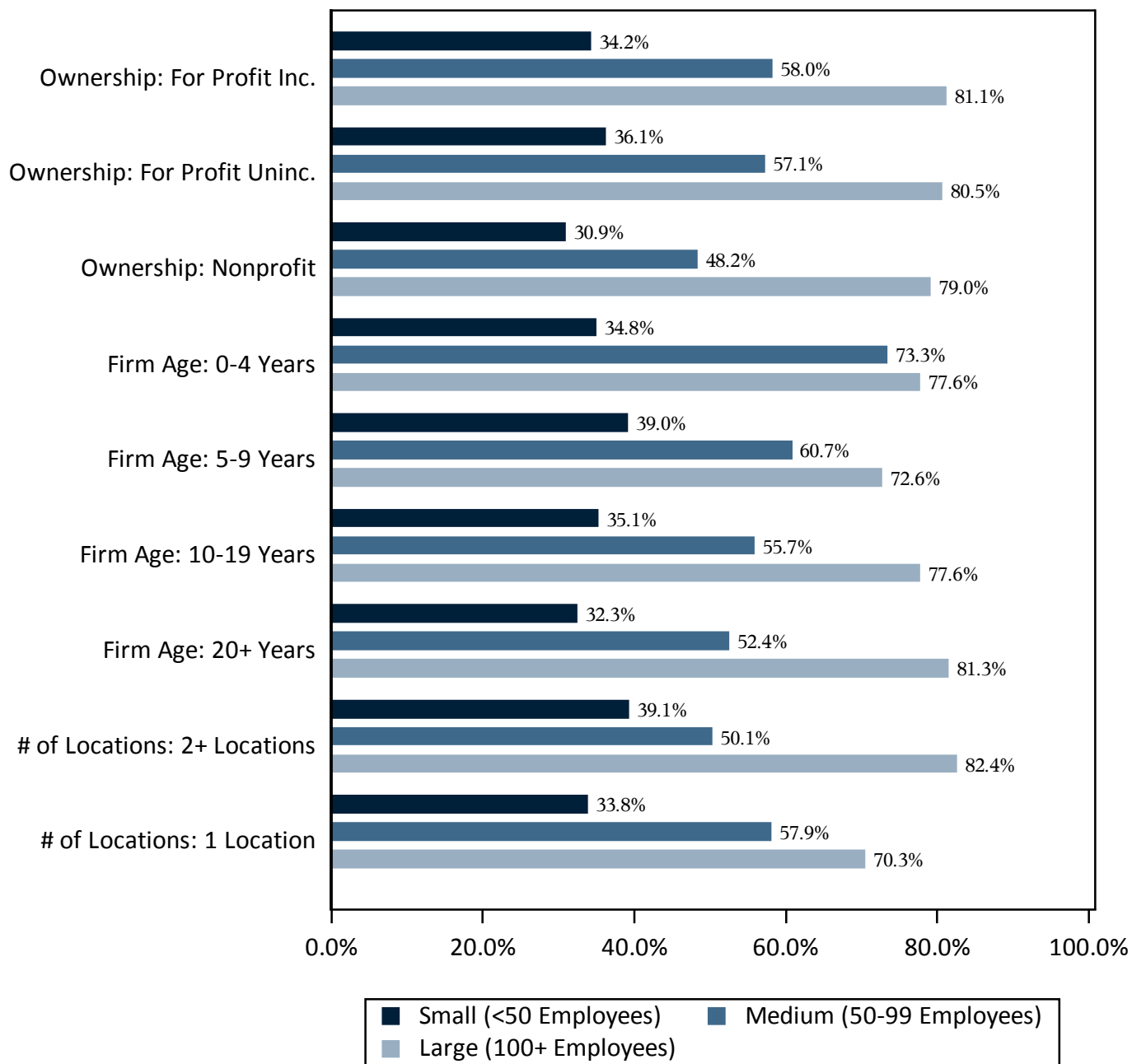
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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), 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

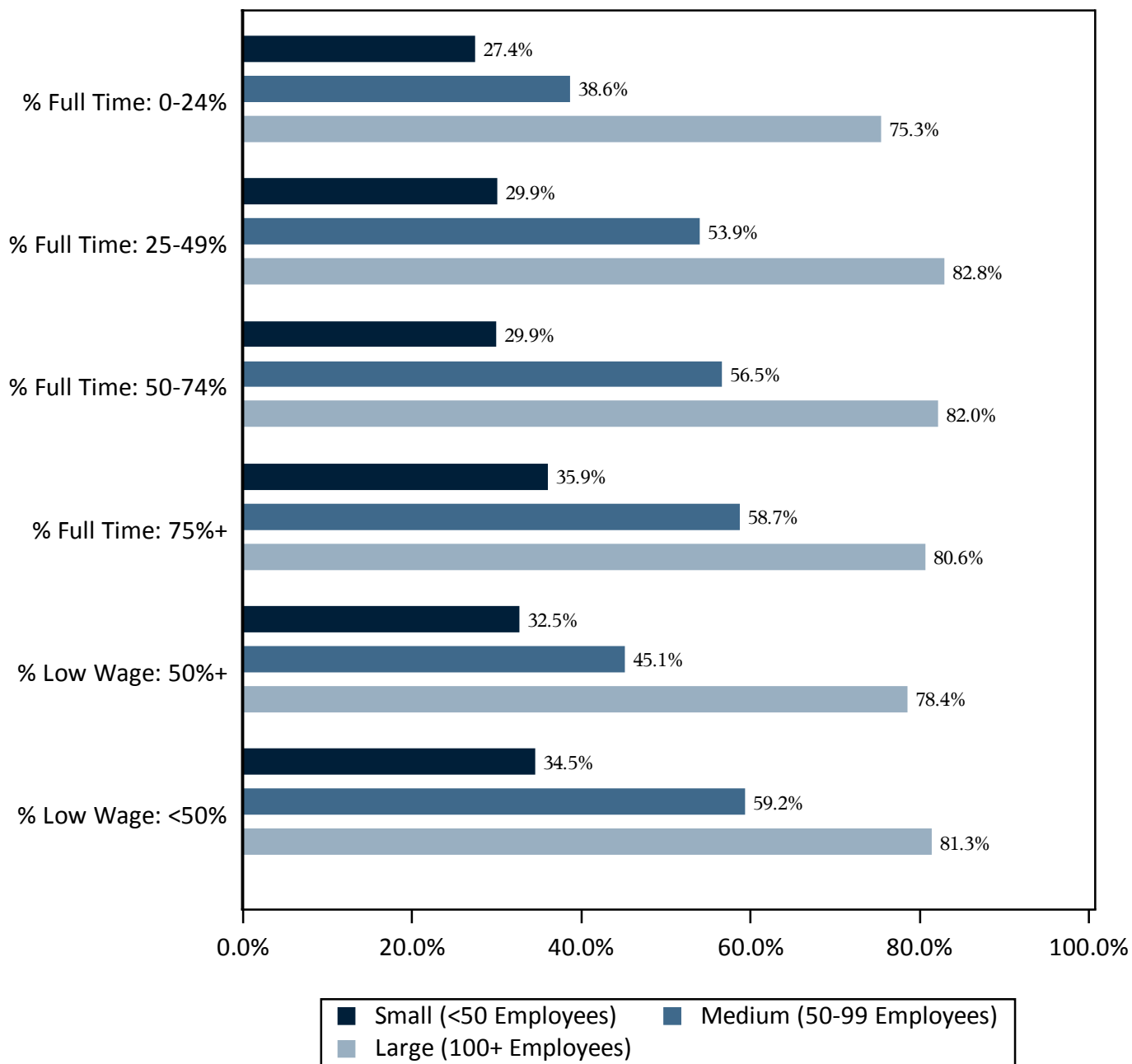
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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), 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

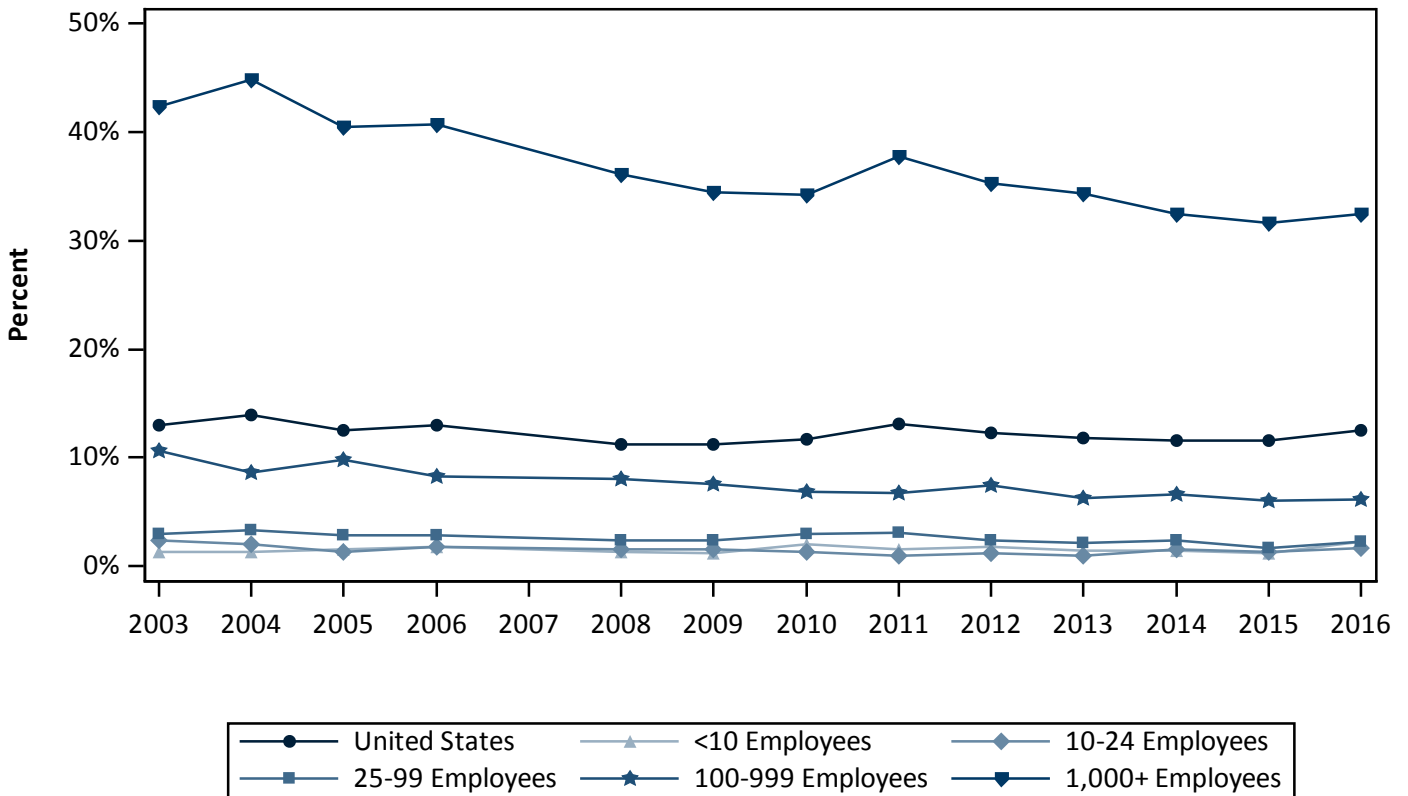
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	13.0%	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	1.3%	1.3%	1.6%	1.8%	1.4%	1.2%	2.0%	1.6%	1.8%	1.4%	1.4%	1.2%	2.3%
10-24	2.4%	2.1%	1.3%	1.8%	1.6%	1.6%	1.4%	1.0%	1.2%	1.0% †	1.5%	1.3%	1.7%
25-99	3.0%	3.3%	2.9%	2.9%	2.4%	2.4%	3.0%	3.1%	2.4%	2.2%	2.4%	1.7%	2.3%
100-999	10.6%	8.7%	9.8%	8.3%	8.0%	7.5%	6.9%	6.8%	7.4%	6.3%	6.6%	6.0%	6.2%
1,000+	42.3%	44.8%	40.5%	40.6%	36.1%	34.5%	34.2%	37.7%	35.3%	34.3%	32.5%	31.6%	32.4%

† Estimate does not meet standard of reliability or precision.

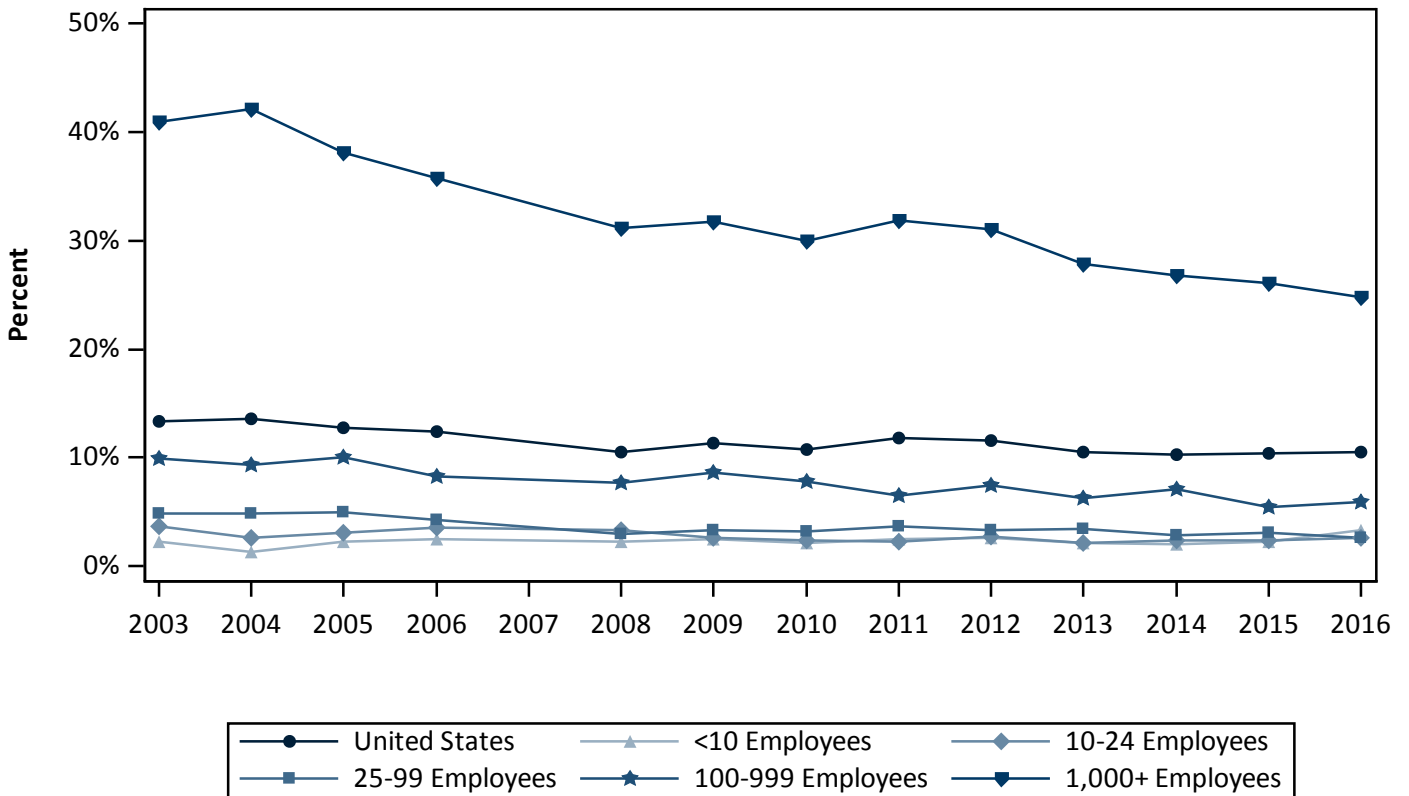
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	13.3%	13.6%	12.7%	12.4%	10.5%	11.3%	10.8%	11.9%	11.6%	10.5%	10.3%	10.4%	10.5%
<10	2.3%	1.4%	2.3%	2.5%	2.3%	2.6%	2.2%	2.5%	2.6%	2.1%	2.0%	2.2%	3.4%
10-24	3.7%	2.6%	3.1%	3.6%	3.4%	2.7%	2.3%	2.3%	2.8%	2.2%	2.4%	2.4%	2.7%
25-99	4.9%	4.9%	5.0%	4.3%	2.9%	3.4%	3.3%	3.7%	3.4%	3.4%	2.9%	3.1%	2.6%
100-999	9.9%	9.4%	10.1%	8.3%	7.7%	8.6%	7.8%	6.5%	7.5%	6.3%	7.1%	5.5%	5.9%
1,000+	40.9%	42.1%	38.1%	35.7%	31.1%	31.8%	29.9%	31.9%	31.1%	27.8%	26.8%	26.1%	24.8%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

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



# Section 2: Employee Eligibility and Enrollment



## Employee Eligibility and Enrollment

In 2016, 47.2 percent of private-sector employees (58.2 million workers) were enrolled in a health plan through their employer (“the enrollment rate”). Among establishments that offered insurance, 76.5 percent of employees were eligible for health insurance through their employer in 2016 (the “eligibility rate”). Among eligible employees, 73.3 percent were enrolled in their employer’s health insurance (the “take-up rate”). Thus, 56.0 percent of all employees in establishments that offered health insurance were enrolled in coverage through their employer (the “coverage rate”).

This section presents estimates for private-sector employees. The section examines trends from 2003 to 2016 in the following rates:

- Enrollment rate (percentage of all employees enrolled in their employer’s health insurance plan regardless of whether the establishment offered health insurance),
- 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).

Note that 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), and the coverage rate is equal to the eligibility rate multiplied by the take-up rate. Information on offer rates can be found in Section 1.

This section also examines variation in coverage, eligibility, and take-up rates by firm size, industry, and other employer characteristics and examines coverage rates by the State in which the establishment was located.

### ***Changes From 2003 to 2016***

#### **Overall**

- Between 2015 and 2016, 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 overall number of enrollees (Exhibits 2.1 and 2.2).
- Among employees in establishments that offered health insurance, there was a 1 percentage point decline in coverage rates ( $p < 0.10$ ) between 2015 (57.0 percent) and 2016 (56.0 percent). Underlying this change was lack of a significant change in eligibility rates (76.0 percent in 2015 and 76.5 percent in 2016) and a decline in take-up rates from 75.0 percent to 73.3 percent (Exhibits 2.3, 2.5, and 2.7).
- There were no significant year-to-year changes in eligibility rates between 2014 and 2016. However, eligibility rates were higher in 2016 (76.5 percent) than in 2014 (75.4 percent).

Despite the increase in eligibility rates in 2016 relative to 2014, eligibility rates in 2016 remained lower than those observed throughout the 2003-2013 period (Exhibit 2.5).

- Take-up rates in 2016 were the lowest observed throughout the 2003-2016 period, and the 2015-2016 decline resumed the longer term downward trend in take-up rates that occurred from 2003 to 2013 (Exhibit 2.7).
- Over the 2013-2015 period, there were no significant year-to-year changes in coverage rates, but the coverage rate in 2015 was 1.2 percentage points lower than in 2013. The 2.2 percentage point decline between 2013 and 2016 continued the 4.8 percentage point decline in coverage rates observed between 2003 and 2013 (Exhibit 2.3).
- The decline in coverage rates between 2003 and 2013 reflects a decline in take-up rates as there was no long-term significant decline in eligibility rates between 2003 and 2013. In contrast, when comparing rates in 2013 with those in 2016, the decline in coverage rates 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 2015 and 2016, there was no significant change in the enrollment rate or the number of enrollees in small (fewer than 50 employees), medium (50-99 employees), and large (100 or more employees) firms (Exhibits 2.1 and 2.2).
- Coverage rates for employees in large firms (100 or more employees) remained relatively stable in 2016 at 56.6 percent, 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 mainly reflects a decline in take-up rates in this 2-year period, as there was no significant change in eligibility rates for large-firm employees. Take-up rates for employees in large firms fell by 1.8 percentage points from 2014 to 2015 and by 1.6 percentage points from 2015 to 2016. (Exhibits 2.3, 2.5, and 2.7).
- Within the large firm category, take-up rates at firms with 1,000 or more employees declined by 1.1 percentage points ( $p < 0.10$ ) between 2014 and 2015 and by 1.8 percentage points between 2015 and 2016. For workers in firms with 100 to 999 employees, take-up rates declined by 3.7 percentage points between 2014 and 2015 but there was no significant change between 2015 and 2016 (Exhibit 2.8).
- 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), following a year with no significant changes. The 2015 to 2016 coverage-rate declines reflect declines in take-up rates for both small and medium employers, as there were no significant changes in eligibility rates at such firms (Exhibits 2.3, 2.5, and 2.7).
- For employees in small firms (fewer than 50 employees), the 1.5 percentage point decline in the coverage rate between 2015 and 2016 ( $p < 0.10$ ), noted above, was not accompanied by any significant changes in the offer rate or the enrollment rate. For employees in medium firms (50 to 99 employees), there was no significant change in the enrollment rate from 2015 to 2016, reflecting offsetting effects of a 4.6 percentage point decline in the coverage rate and a 3.3 percentage point increase in the offer rate. For large firms (100 or more employees), there was no significant change in the enrollment rate, the coverage rate, or the offer rate from 2015 to 2016 (Exhibits 2.1 and 2.3 and Exhibit 1.1 for the offer rate).
- Between 2003 and 2013, coverage rates fell for employees in all firm size categories. Over this period, coverage rates declined by 4.8 percentage points for employees overall (from 63.0 percent in 2003 to 58.2 percent in 2013). The decrease in coverage rates across all firm

size categories reflected declining take-up rates, since eligibility rates did not significantly change between 2003 and 2013 for employees in any firm size category (Exhibits 2.3, 2.5, and 2.7).

- From 2013 to 2014, there were no significant changes in coverage rates for employees in any firm size category. For employees in smaller firms (fewer than 100 workers), this was because there were no significant changes in eligibility or take-up rates. For employees in large firms (100 or more employees), this was due to offsetting changes in eligibility (a decline of 2.9 percentage points) and take-up rates (an increase of 2.3 percentage points) (Exhibits 2.3, 2.5, and 2.7).
- Between 2014 and 2016, coverage rates fell by 3.3 percentage points ( $p < 0.10$ ) for workers in medium firms and by 1.7 percentage points for workers in large firms. These declines were driven by declines in take-up rates (6.3 percentage points and 3.4 percentage points in medium and large firms, respectively) since eligibility rates did not change for workers in any firm size between 2014 and 2016 (Exhibits 2.3, 2.5, and 2.7).
- At small firms, despite the decline in coverage rates between 2015 and 2016 ( $p < 0.10$ ), there was no significant difference between 2014 and 2016 coverage rates. However, take-up rates fell by 2.6 percentage points between 2014 and 2016 for workers at small firms (Exhibits 2.3 and 2.7).

### ***Changes From 2004 to 2016 by Percentage of Establishment's Workforce That Is Low Wage and by Firm Size***

- Between 2015 and 2016, there were no significant changes in coverage rates, eligibility rates, or take-up rates for employees in large low-wage employers (50 or more employees and 50 percent or more of the establishment's workforce earning less than \$11.50 per hour). 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 both 2015 (48.0 percent) and 2016 (49.7 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). (Estimates for 2003 are not included because of definitional differences with the 2004 to 2016 estimates.) 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).

Between 2013 and 2015, coverage rates at large low-wage employers were lower than at small low-wage employers ( $p < 0.10$  for 2014), but by 2016, there was no significant difference between coverage rates at small low-wage employers (28.2 percent) and large low-wage employers (27.4 percent) (Exhibit 2.9).

- Between 2004 and 2016, coverage rates declined by 7.3 and 6.7 percentage points, respectively, at small and large higher wage employers. Throughout the 2004–2016 period, coverage rates were higher at large higher wage employers than at small higher wage employers (Exhibit 2.9).
- Between 2004 and 2013, eligibility rates declined by 5.9 percentage points at small low-wage employers. At large low-wage employers, despite some variability over time, there was no significant difference in eligibility rates between 2004 and 2013. Due to these different trends, eligibility rates at small low-wage employers were lower than those at large low-wage employers in 2013. However, between 2013 and 2014, eligibility rates at large low-wage employers fell by 9.9 percentage points. This decline brought eligibility rates for such employers closer to those for small low-wage employers in 2014. By 2016, there was no significant difference between eligibility rates for workers at large low-wage employers and those at small low-wage employers (Exhibit 2.10).
- Between 2004 and 2013, take-up rates declined for workers at employers in all 4 wage and size categories. While workers at small low-wage employers had higher take-up rates than those at large low-wage employers from 2010 to 2013, the 2013–2014 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, 2016***

### ***Differences by Firm Size, 2016***

- In 2016, enrollment rates varied significantly across all firm sizes. Workers in firms with fewer than 50 employees had the lowest enrollment rate (26.5 percent), workers in medium firms (50–99 employees) had an enrollment rate of 45.4 percent, and workers in firms with 100 or more employees had the highest enrollment rate (56.0 percent) (Exhibit 2.1).
- Coverage rates were significantly lower in medium firms (50–99 employees) relative to small and large firms. Workers in firms with fewer than 50 employees had a similar coverage rate (55.5 percent) to workers in firms with 100 or more employees (56.6 percent), which were both higher than the coverage rate in medium firms (51.2 percent) (Exhibit 2.3).
- Since coverage rates did not vary by firm size for workers in small and large firms, their different enrollment rates reflect higher offer rates at large employers compared with small employers. The higher enrollment rate for workers in large firms compared with workers in

medium firms reflects higher offer rates and coverage rates for workers in large firms compared with workers in medium firms. The higher enrollment rate for workers in medium firms compared with workers in small firms is driven by the higher offer rate in medium firms, since workers in medium firms had a lower coverage rate than workers in small firms (Exhibits 1.1 and 2.1).

- In 2016, workers in small firms had higher eligibility rates and lower take-up rates than workers in large firms. These differences were offsetting, which resulted in no significant differences in coverage rates between workers in small and large firms. The lower coverage rate for workers in medium firms compared with small firms was driven by the lower eligibility and take-up rates for workers in medium firms relative to workers in small firms ( $p < 0.10$  for the eligibility rate comparison). The lower coverage rate for workers in medium firms relative to large firms was driven by lower take-up rates for workers in medium firms relative to large firms since there were no differences in eligibility rates for workers in medium and large firms (Exhibits 2.3, 2.5, and 2.7).
- Coverage rates in 2016 for workers in the smallest firms (fewer than 10 employees) were higher than coverage rates for workers in the four other firm sizes (10-24, 25-99, 100-999, and 1,000 or more employees). These higher coverage rates reflect higher eligibility rates for workers in the smallest firms relative to workers in all other firm size categories except those with 10 to 24 employees and higher take-up rates relative to workers in all but the very largest firms (Exhibits 2.4, 2.6, and 2.8).
- Coverage rates were also higher in 2016 for workers in firms with 10 to 24 employees relative to workers in firms with 25 to 99 employees (55.5 percent and 51.8 percent, respectively) due to higher eligibility rates (79.2 percent and 76.6 percent, respectively,  $p < 0.10$ ) and higher take-up rates (70.1 percent and 67.6 percent, respectively) (Exhibits 2.4, 2.6, and 2.8).
- Workers in the largest firms (1,000 or more employees) had coverage rates that were higher than workers in firms with 25 to 99 workers and 100 to 999 workers due to higher take-up rates (Exhibits 2.4, 2.6, and 2.8).

### ***Differences by State, 2016***

- The coverage rate varied by State in 2016, although most States were not significantly different from the national average of 56.0 percent. Four States were significantly below the national average: Nevada (49.3 percent), New Mexico (50.6 percent), New York (50.3 percent), and Rhode Island (47.7 percent). The States significantly above the national average were Arkansas (61.2 percent), Hawaii (64.3 percent), Mississippi (61.4 percent), North Carolina (60.1 percent), and North Dakota (60.4 percent) (Exhibit 2.12).

### ***Differences by Industry, 2016***

- Employees working in mining and manufacturing had a coverage rate of 74.9 percent, higher than every other sector ( $p < 0.10$  for wholesale trade) except utilities and transportation. The high coverage rate in mining and manufacturing was due to a higher eligibility rate in that sector (91.6 percent) and a higher take-up rate (81.7 percent) compared with many other sectors (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 (72.1 percent, 72.0 percent, and 71.2

percent, respectively). This was also due to a combination of high eligibility rates (88.5 percent, 90.6 percent, and 90.6 percent, respectively) and high take-up rates (81.5 percent, 79.4 percent, and 78.5 percent, respectively) (Exhibits 2.13, 2.14, and 2.15).

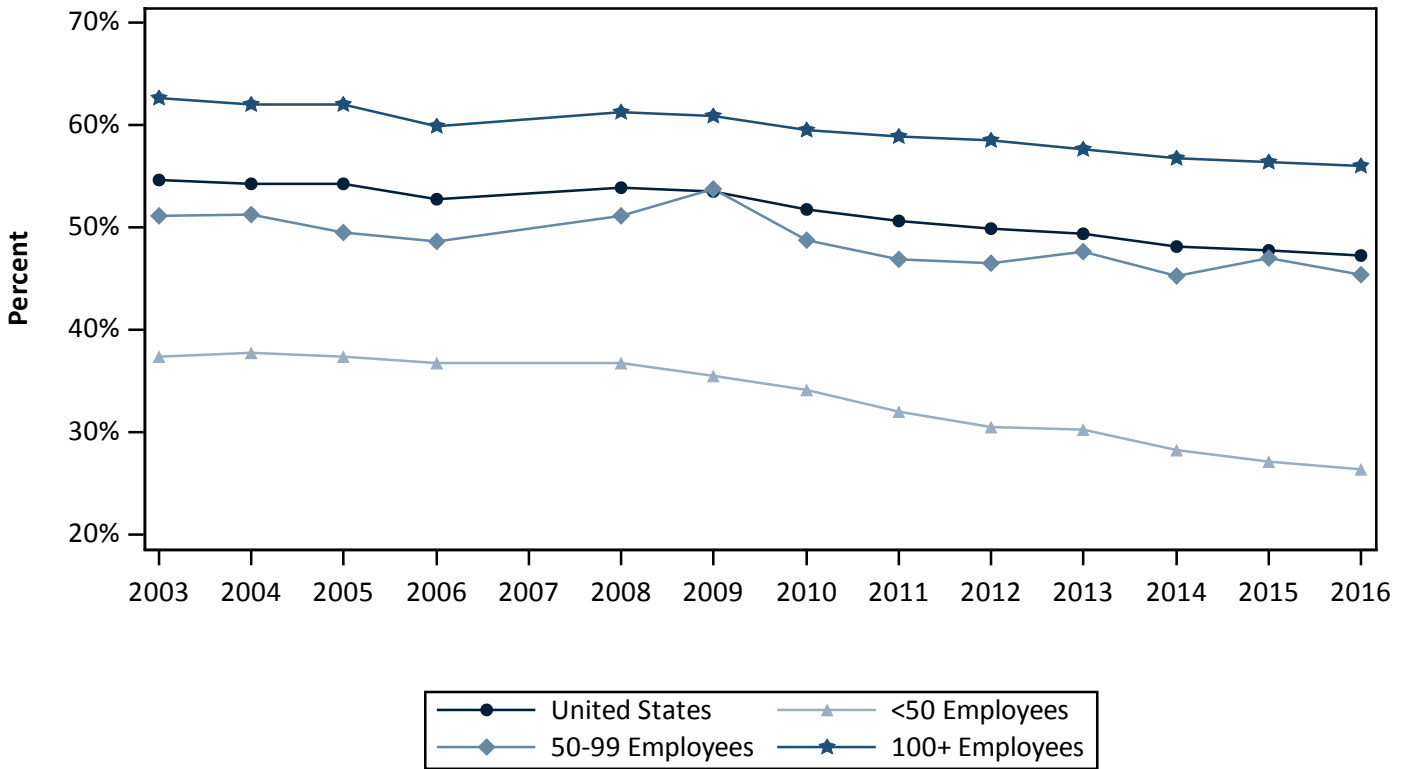
- Conversely, employees working in retail trade and other services had the lowest coverage rates (38.9 percent and 35.5 percent, respectively), a product of having the lowest eligibility rates (63.3 percent and 57.8 percent, respectively) and the lowest take-up rates (61.5 percent and 61.4 percent, respectively) compared with all other sectors (Exhibits 2.13, 2.14, and 2.15).

### ***Differences by Selected Firm Characteristics, 2016***

- 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 (51.1 percent vs. 59.2 percent and 56.3 percent, respectively). Eligibility rates were highest at for-profit incorporated establishments (77.6 percent) and lowest at for-profit unincorporated establishments (72.0 percent), with nonprofit establishments falling in the middle (75.5 percent). Employees in for-profit unincorporated establishments and for-profit incorporated establishments had the lowest take-up rate among ownership types (71.0 percent and 72.5 percent, respectively) and employees in nonprofit establishments had the highest take-up rate (78.4 percent) (Exhibits 2.16, 2.17, and 2.18).
- Employees in firms that were 20 years old or older had a higher coverage rate (57.3 percent) than employees in firms that were less than 5 years old, 5 to 9 years old, and 10 to 19 years old (49.9 percent, 49.0 percent, and 52.8 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 (74.6 percent vs. 66.6 percent, 66.2 percent, and 69.3, respectively, for firms less than 5 years old, 5 to 9 years old, and 10 to 19 years old) (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 (57.5 percent vs. 52.7 percent). Since there was no significant difference in eligibility rates for firms with multiple locations and firms with a single location (76.7 percent vs. 76.0 percent), the differences in coverage rates were due to a higher take-up rate in firms with multiple locations (75.0 percent vs. 69.3 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 13.2 percent for employees in establishments with 0 to 24 percent full-time employees to 65.8 percent in establishments with 75 percent or more full-time employees. The eligibility rate followed the same pattern, increasing from 23.2 percent to 86.8 percent. Take-up rates also followed a similar pattern, increasing from 57.0 percent in establishments with 0 to 24 percent full-time employees to 75.8 percent in firms with 75 percent or more full-time employees (Exhibits 2.16, 2.17, and 2.18).
- Employees in higher wage establishments (less than 50 percent of the employees earned less than \$11.50 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 \$11.50 an hour) (63.4 percent vs. 27.5 percent). This was due to both a higher eligibility rate (83.5 percent vs. 49.7 percent) and a higher take-up rate (76.0 percent vs. 55.4 percent) among employees in higher wage establishments compared with those in predominantly low-wage establishments (Exhibits 2.16, 2.17, and 2.18).

**Exhibit 2.1: Enrollment Rate**

**Percentage of all private-sector employees enrolled in health insurance offered by their employers, overall and by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

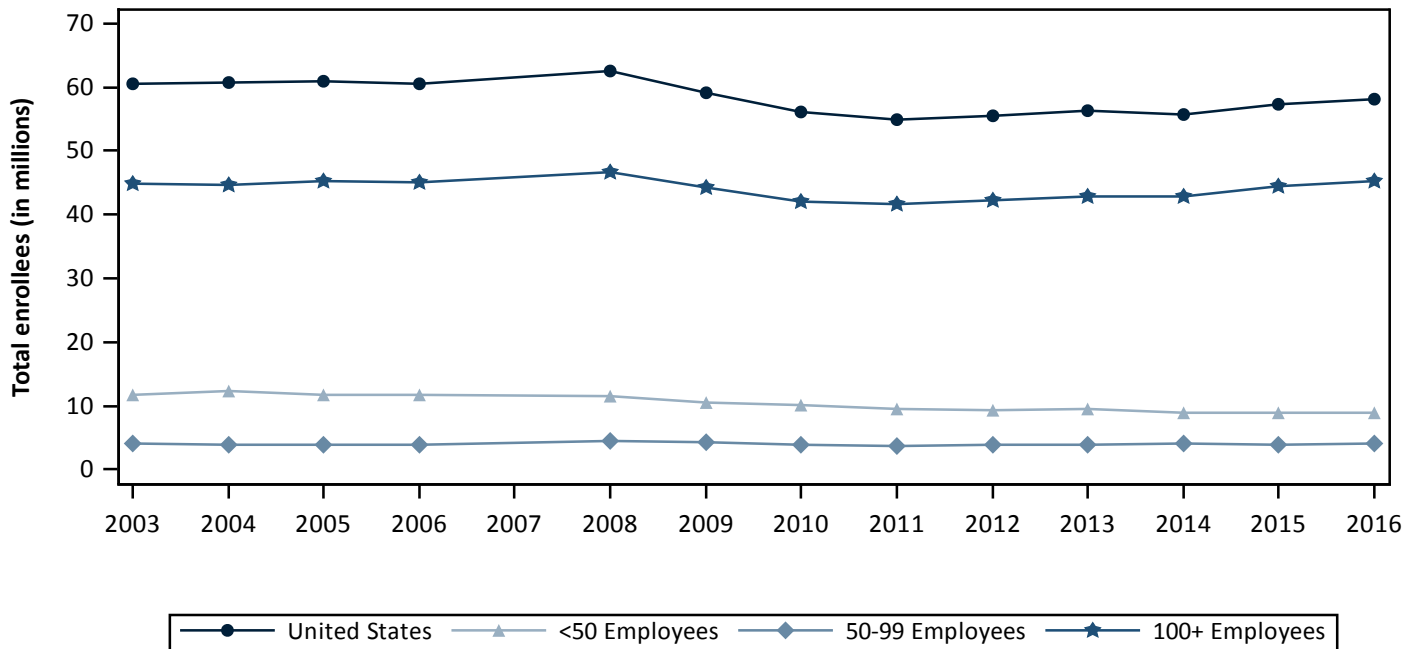
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	54.7%	54.2%	54.3%	52.8%	53.9%	53.5%	51.8%	50.6%	49.9%	49.4%	48.1%	47.8%	47.2%
<50	37.4%	37.7%	37.4%	36.8%	36.8%	35.5%	34.2%	32.0%	30.5%	30.3%	28.3%	27.1%	26.5%
50-99	51.1%	51.3%	49.4%	48.7%	51.1%	53.8%	48.8%	46.9%	46.6%	47.6%	45.2%	47.0%	45.4%
100+	62.6%	62.0%	62.0%	59.9%	61.3%	60.9%	59.5%	58.9%	58.5%	57.7%	56.7%	56.4%	56.0%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	60.6	60.8	60.9	60.5	62.6	59.2	56.1	54.8	55.4	56.3	55.8	57.3	58.2
<50	11.7	12.3	11.7	11.6	11.5	10.6	10.2	9.5	9.3	9.5	8.9	8.9	8.9
50-99	4.0	3.9	3.9	3.8	4.4	4.3	3.8	3.7	3.8	4.0	4.1	4.0	4.0
100+	44.9	44.6	45.3	45.1	46.7	44.3	42.1	41.6	42.3	42.9	42.8	44.4	45.3

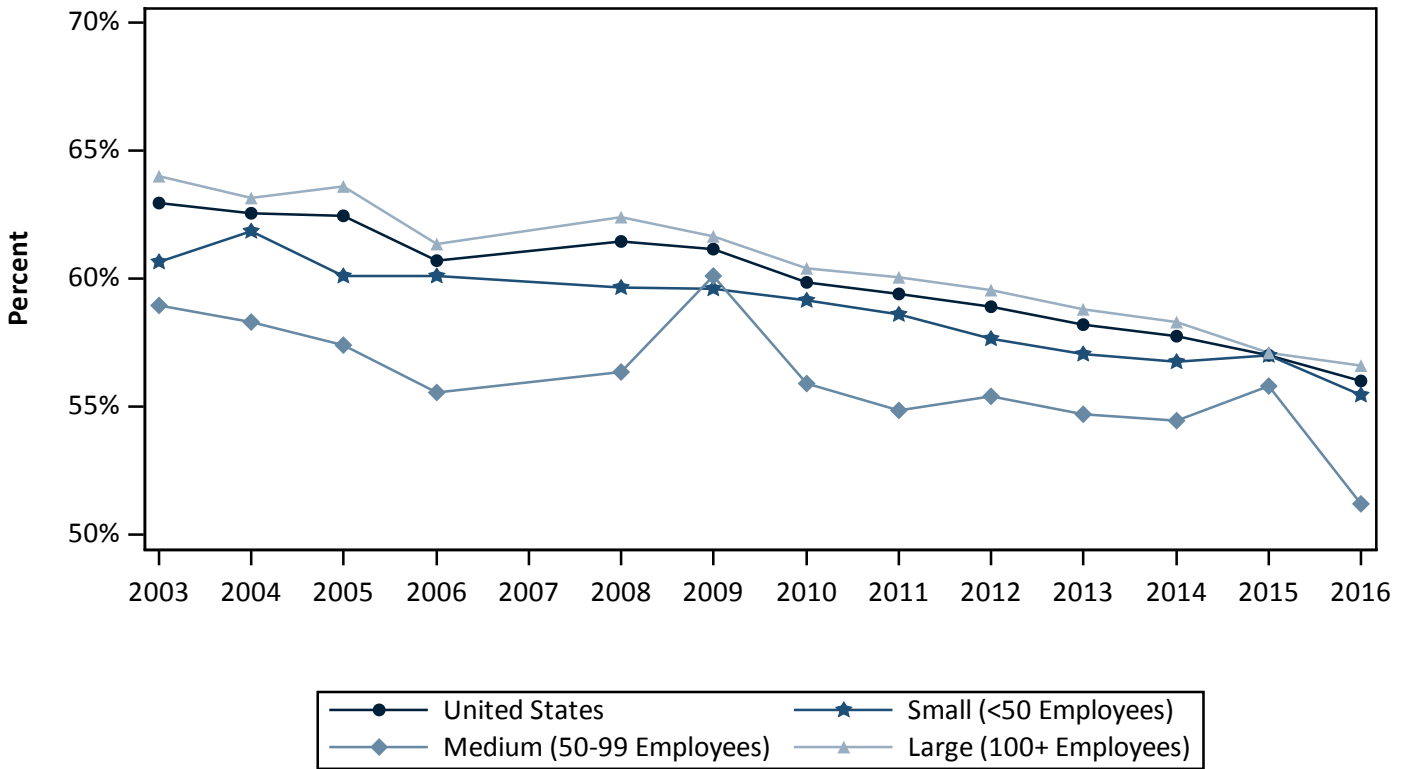
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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**

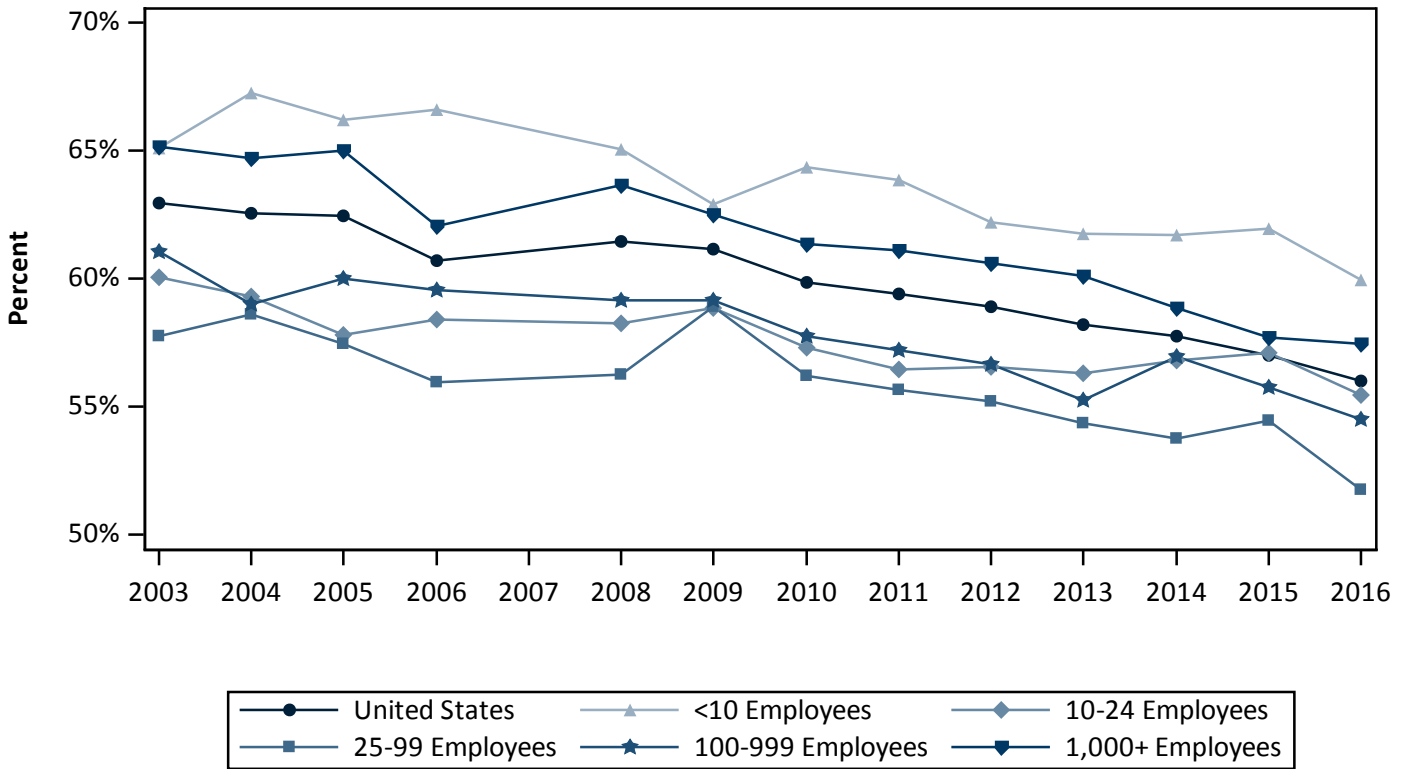
**Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	63.0%	62.6%	62.5%	60.7%	61.4%	61.1%	59.8%	59.4%	58.9%	58.2%	57.8%	57.0%	56.0%
<50	60.7%	61.9%	60.1%	60.1%	59.7%	59.6%	59.2%	58.6%	57.7%	57.1%	56.8%	57.0%	55.5%
50-99	58.9%	58.3%	57.4%	55.6%	56.3%	60.1%	55.9%	54.9%	55.4%	54.7%	54.5%	55.8%	51.2%
100+	64.0%	63.2%	63.6%	61.4%	62.4%	61.6%	60.4%	60.0%	59.5%	58.8%	58.3%	57.1%	56.6%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	63.0%	62.6%	62.5%	60.7%	61.4%	61.1%	59.8%	59.4%	58.9%	58.2%	57.8%	57.0%	56.0%
<10	65.1%	67.3%	66.2%	66.6%	65.0%	62.9%	64.4%	63.9%	62.2%	61.8%	61.7%	61.9%	60.0%
10-24	60.1%	59.3%	57.8%	58.4%	58.2%	58.8%	57.3%	56.5%	56.5%	56.3%	56.8%	57.1%	55.5%
25-99	57.7%	58.6%	57.4%	55.9%	56.3%	58.9%	56.2%	55.7%	55.2%	54.4%	53.8%	54.5%	51.8%
100-999	61.1%	59.0%	60.0%	59.5%	59.1%	59.2%	57.7%	57.2%	56.6%	55.3%	56.9%	55.8%	54.5%
1,000+	65.1%	64.7%	65.0%	62.1%	63.7%	62.5%	61.4%	61.1%	60.6%	60.1%	58.8%	57.7%	57.5%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

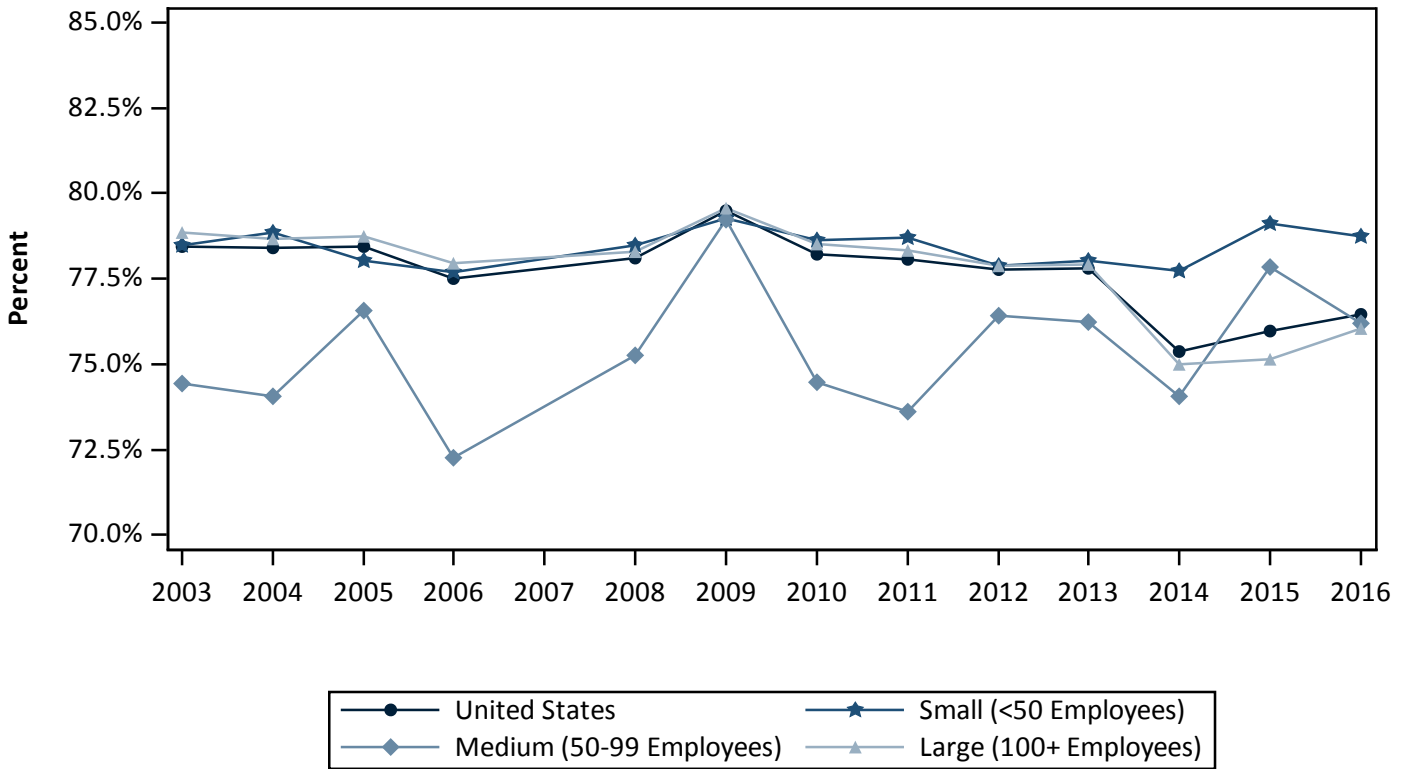
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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**

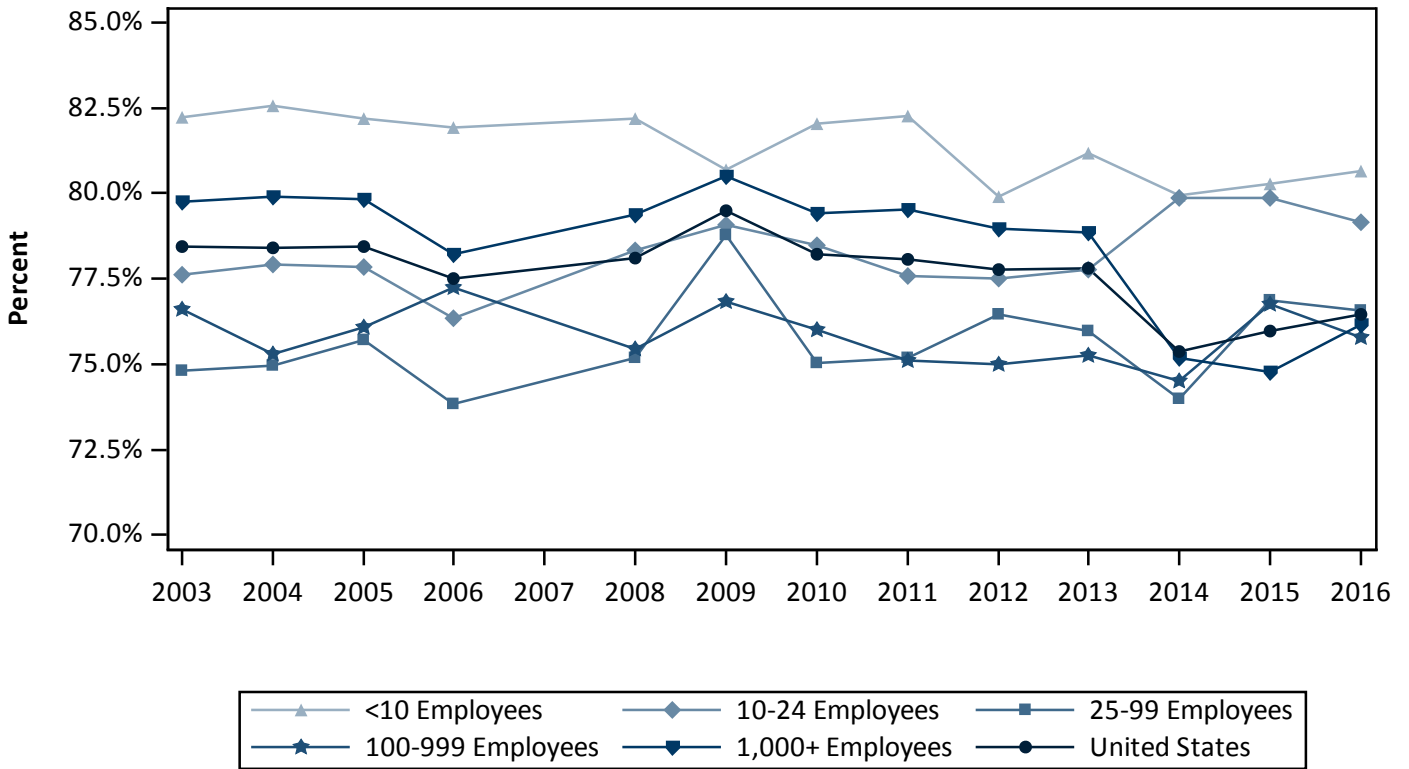
**Percentage of private-sector employees eligible for health insurance at establishments that offer health insurance, overall and by firm size, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	78.5%	78.4%	78.5%	77.5%	78.1%	79.5%	78.2%	78.0%	77.8%	77.8%	75.4%	76.0%	76.5%
<50	78.5%	78.8%	78.0%	77.7%	78.5%	79.3%	78.6%	78.7%	77.9%	78.0%	77.7%	79.1%	78.7%
50-99	74.4%	74.1%	76.6%	72.3%	75.3%	79.2%	74.5%	73.6%	76.4%	76.2%	74.1%	77.8%	76.2%
100+	78.8%	78.7%	78.8%	77.9%	78.3%	79.6%	78.5%	78.3%	77.9%	77.9%	75.0%	75.2%	76.0%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	78.5%	78.4%	78.5%	77.5%	78.1%	79.5%	78.2%	78.0%	77.8%	77.8%	75.4%	76.0%	76.5%
<10	82.2%	82.5%	82.2%	81.9%	82.2%	80.7%	82.1%	82.2%	79.9%	81.2%	79.9%	80.3%	80.6%
10-24	77.6%	77.9%	77.8%	76.3%	78.3%	79.1%	78.5%	77.6%	77.5%	77.8%	79.8%	79.9%	79.2%
25-99	74.8%	75.0%	75.7%	73.8%	75.2%	78.8%	75.0%	75.2%	76.4%	76.0%	74.0%	76.9%	76.6%
100-999	76.6%	75.3%	76.1%	77.2%	75.4%	76.8%	76.0%	75.1%	75.0%	75.3%	74.5%	76.8%	75.8%
1,000+	79.7%	79.9%	79.8%	78.2%	79.4%	80.5%	79.4%	79.5%	79.0%	78.9%	75.2%	74.8%	76.2%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

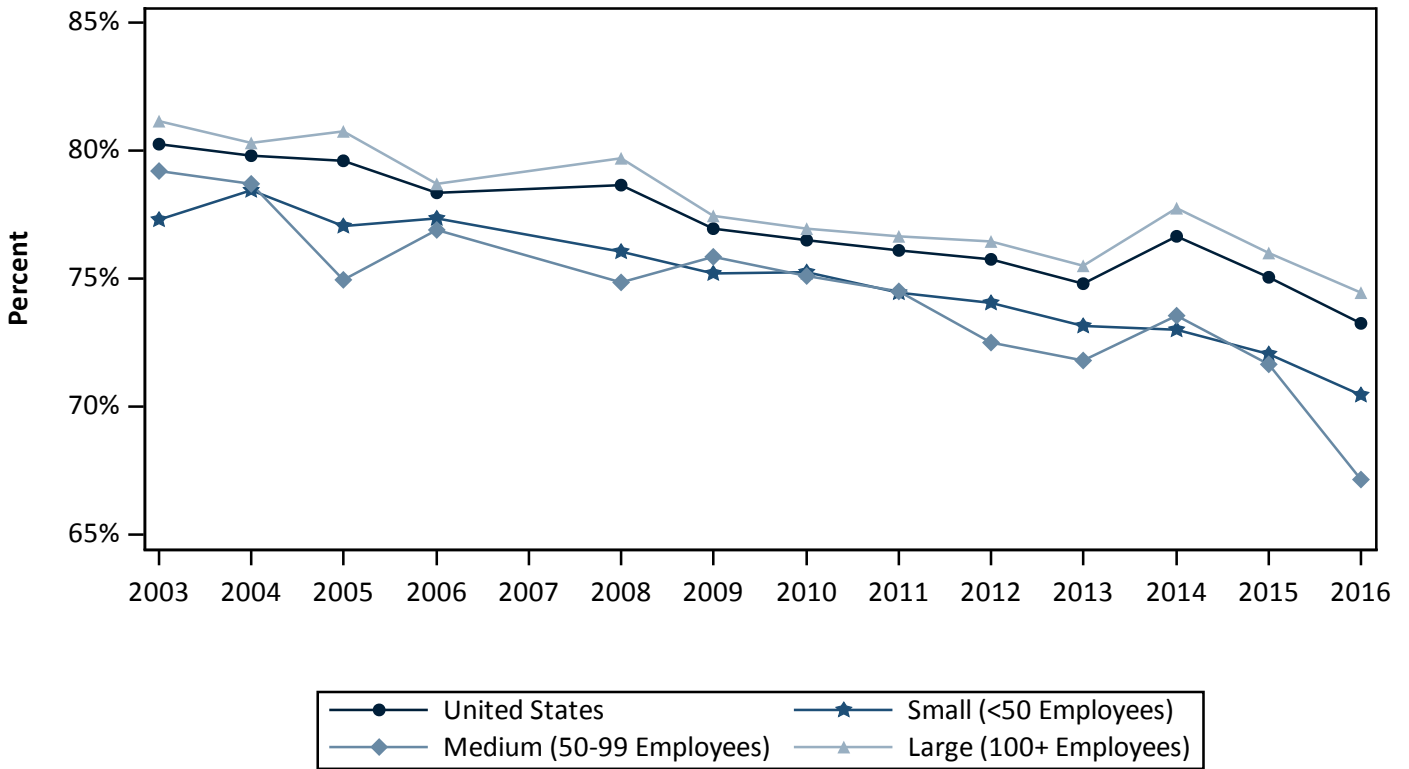
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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**

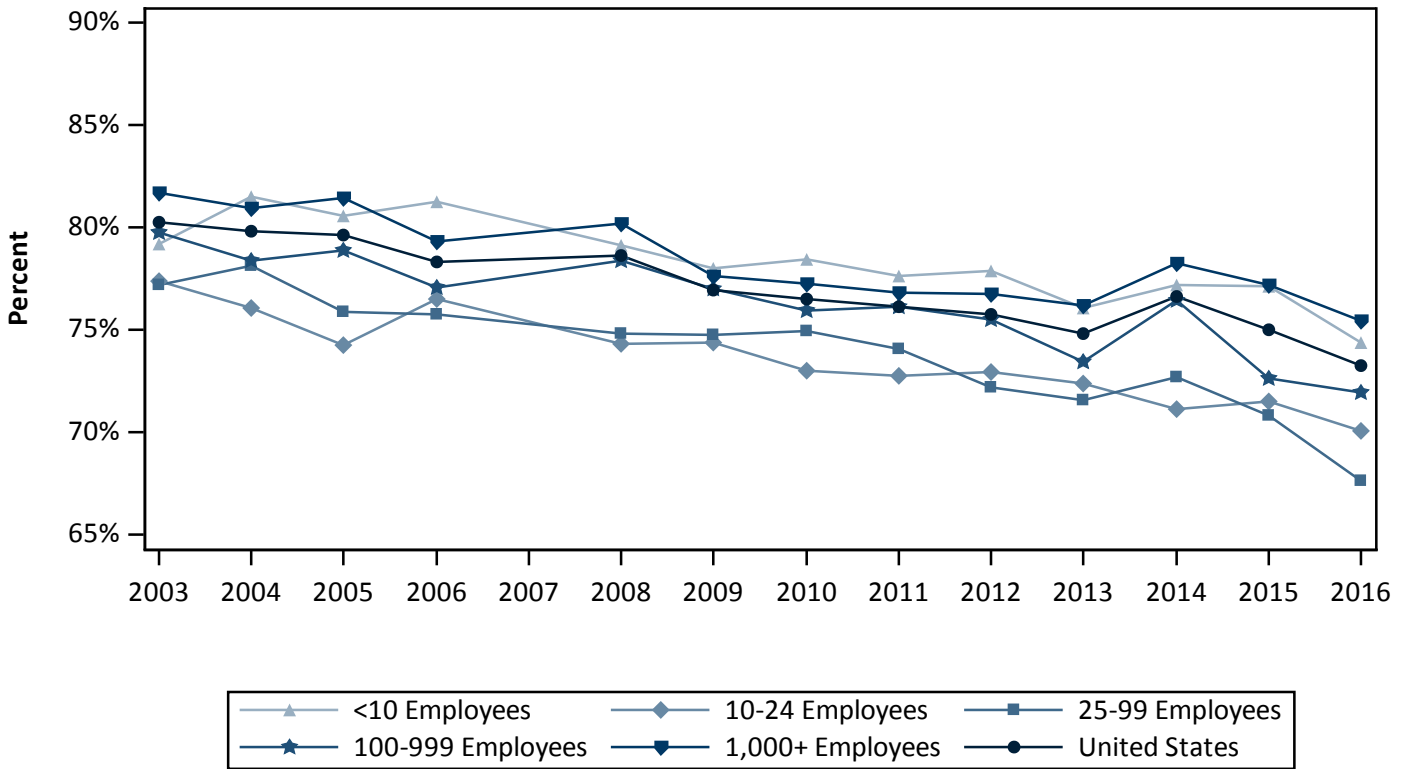
**Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by firm size, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	80.3%	79.8%	79.6%	78.3%	78.7%	76.9%	76.5%	76.1%	75.8%	74.8%	76.7%	75.0%	73.3%
<50	77.3%	78.5%	77.0%	77.4%	76.0%	75.2%	75.3%	74.4%	74.1%	73.1%	73.0%	72.1%	70.4%
50-99	79.2%	78.7%	74.9%	76.9%	74.9%	75.9%	75.1%	74.5%	72.5%	71.8%	73.5%	71.7%	67.2%
100+	81.2%	80.3%	80.7%	78.7%	79.7%	77.5%	76.9%	76.7%	76.4%	75.5%	77.8%	76.0%	74.4%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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**

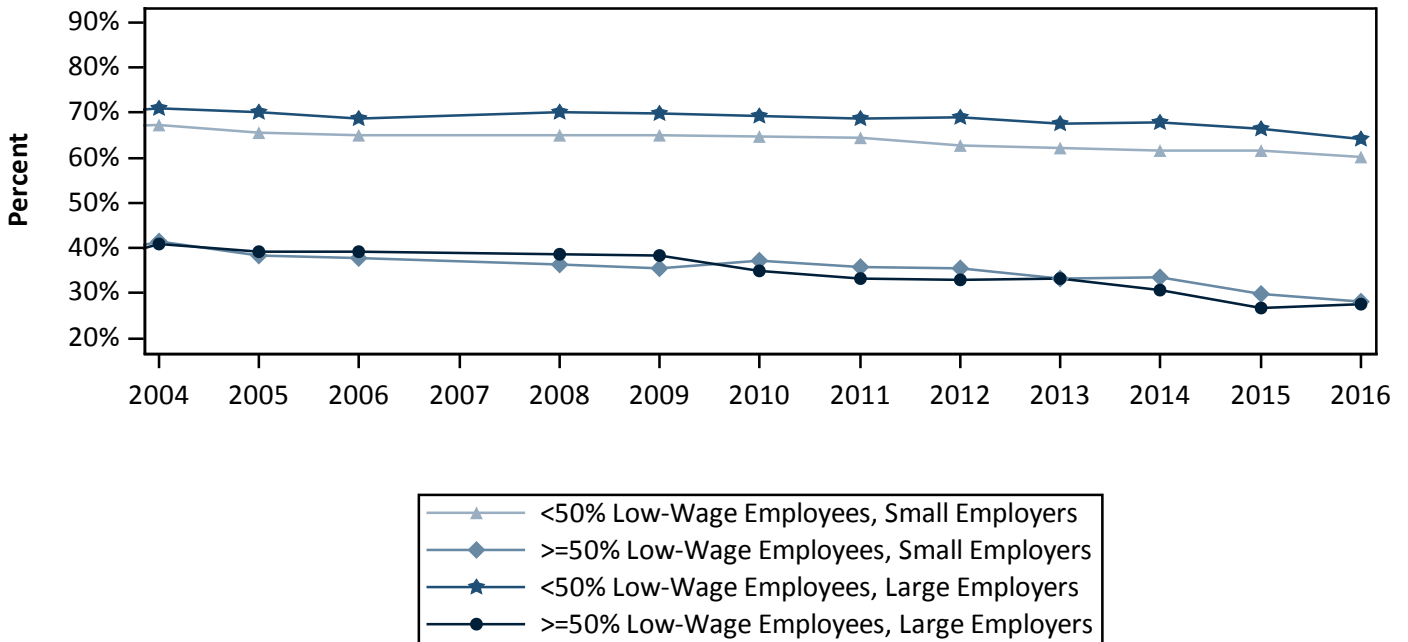
**Percentage of eligible private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by detailed firm size, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	80.3%	79.8%	79.6%	78.3%	78.7%	76.9%	76.5%	76.1%	75.8%	74.8%	76.7%	75.0%	73.3%
<10	79.2%	81.5%	80.5%	81.3%	79.2%	78.0%	78.5%	77.7%	77.9%	76.1%	77.2%	77.1%	74.4%
10-24	77.4%	76.1%	74.3%	76.5%	74.3%	74.4%	73.0%	72.8%	73.0%	72.4%	71.2%	71.5%	70.1%
25-99	77.2%	78.1%	75.9%	75.8%	74.8%	74.8%	74.9%	74.1%	72.2%	71.6%	72.7%	70.8%	67.6%
100-999	79.7%	78.4%	78.9%	77.1%	78.4%	77.0%	76.0%	76.2%	75.5%	73.4%	76.4%	72.7%	71.9%
1,000+	81.7%	81.0%	81.4%	79.3%	80.2%	77.6%	77.3%	76.8%	76.8%	76.2%	78.3%	77.2%	75.4%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2004-2016



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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 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, 2004-2016

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
<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%
>=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%
<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%
>=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%

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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

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

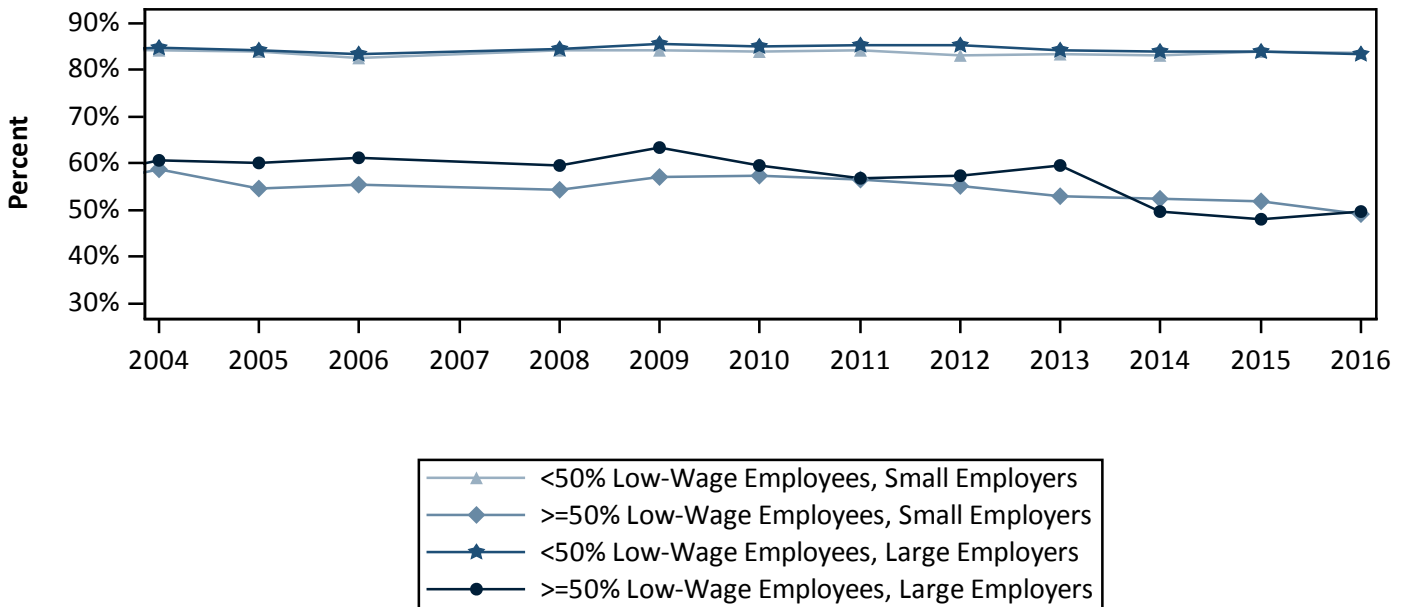
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 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, 2004-2016



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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 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, 2004-2016

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
<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%
>=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%
<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%
>=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%

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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

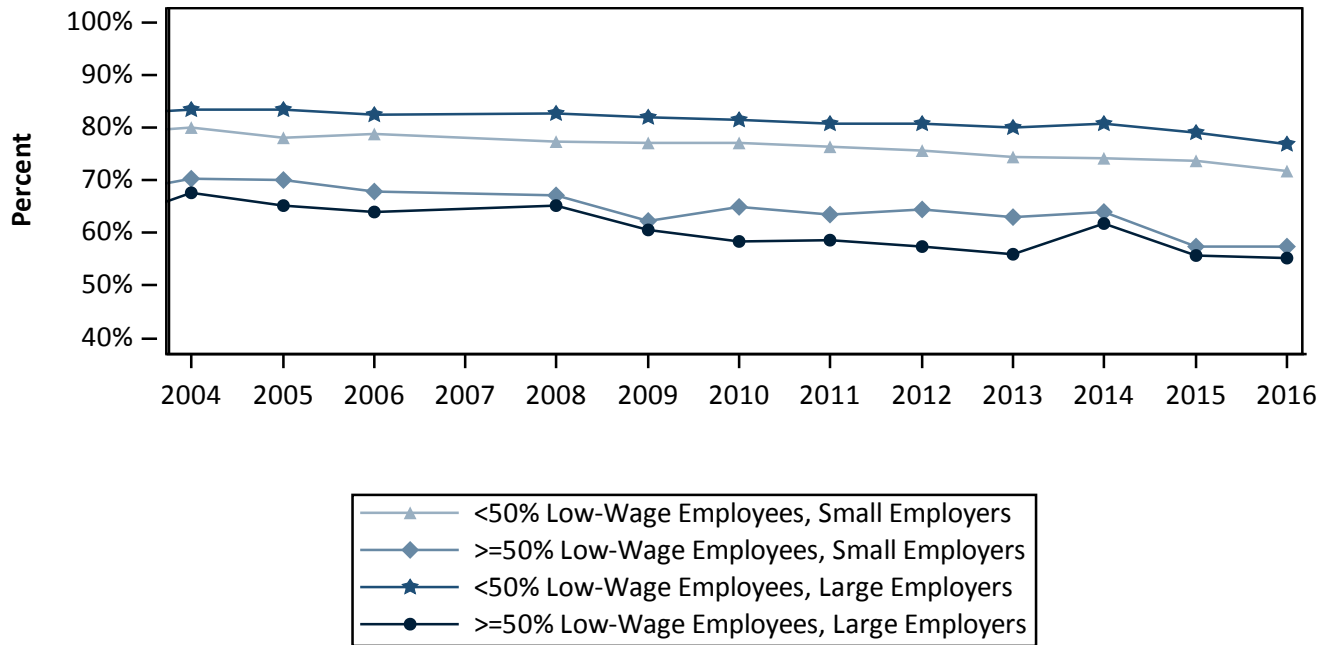
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 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, 2004-2016**



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

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 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, 2004-2016**

Low Wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
<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%
>=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%
<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%
>=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%

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

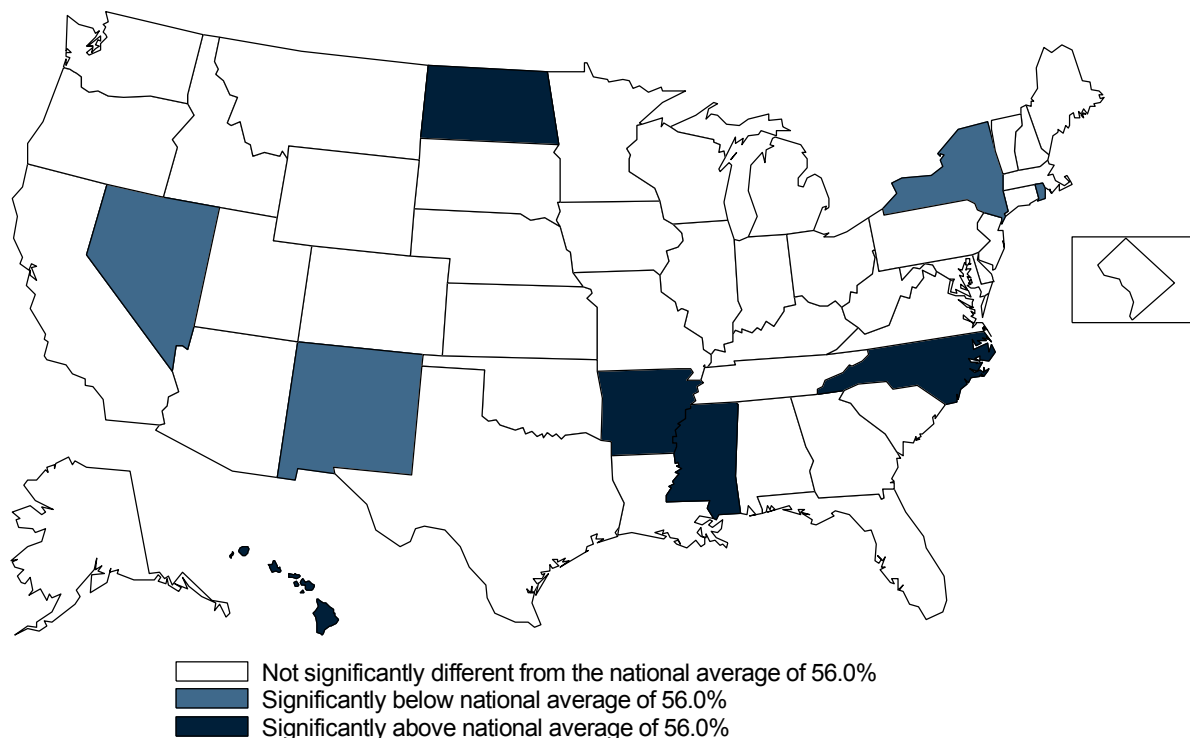
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates. Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 per hour.

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

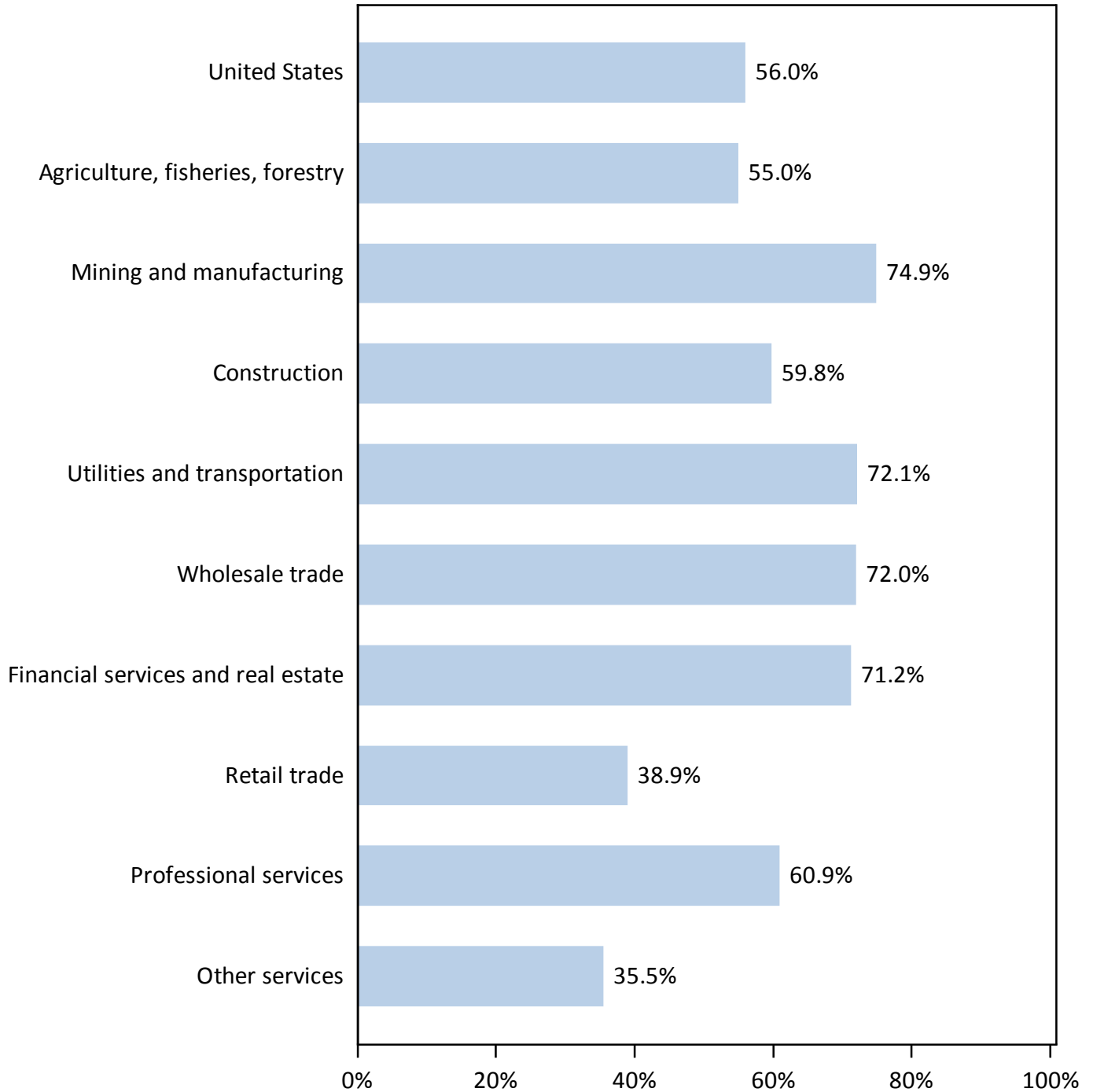
**Exhibit 2.12: Coverage Rate**  
**Percentage of private-sector employees who are enrolled in health insurance**  
**at establishments that offer health insurance, by State, 2016**



Alabama	59.0%	Kentucky	60.5%	North Dakota	60.4%*
Alaska	53.7%	Louisiana	59.4%	Ohio	51.5%
Arizona	54.6%	Maine	54.6%	Oklahoma	53.7%
Arkansas	61.2%*	Maryland	53.6%	Oregon	60.6%
California	57.1%	Massachusetts	55.2%	Pennsylvania	57.6%
Colorado	52.0%	Michigan	58.9%	Rhode Island	47.7%*
Connecticut	55.5%	Minnesota	58.4%	South Carolina	57.8%
Delaware	58.0%	Mississippi	61.4%*	South Dakota	56.2%
District of Columbia	55.0%	Missouri	57.4%	Tennessee	54.5%
Florida	55.6%	Montana	54.7%	Texas	57.3%
Georgia	56.9%	Nebraska	60.3%	Utah	56.7%
Hawaii	64.3%*	Nevada	49.3%*	Vermont	53.0%
Idaho	58.7%	New Hampshire	52.8%	Virginia	53.3%
Illinois	57.3%	New Jersey	53.5%	Washington	60.1%
Indiana	57.5%	New Mexico	50.6%*	West Virginia	52.4%
Iowa	56.1%	New York	50.3%*	Wisconsin	53.0%
Kansas	58.7%	North Carolina	60.1%*	Wyoming	55.9%

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Denominator:** Within each state, all employees in establishments that offer health insurance.  
**Note:** \* Statistically different from national average of 56.0 percent at  $p < 0.05$ .  
**For data points and standard errors for this exhibit select here.**

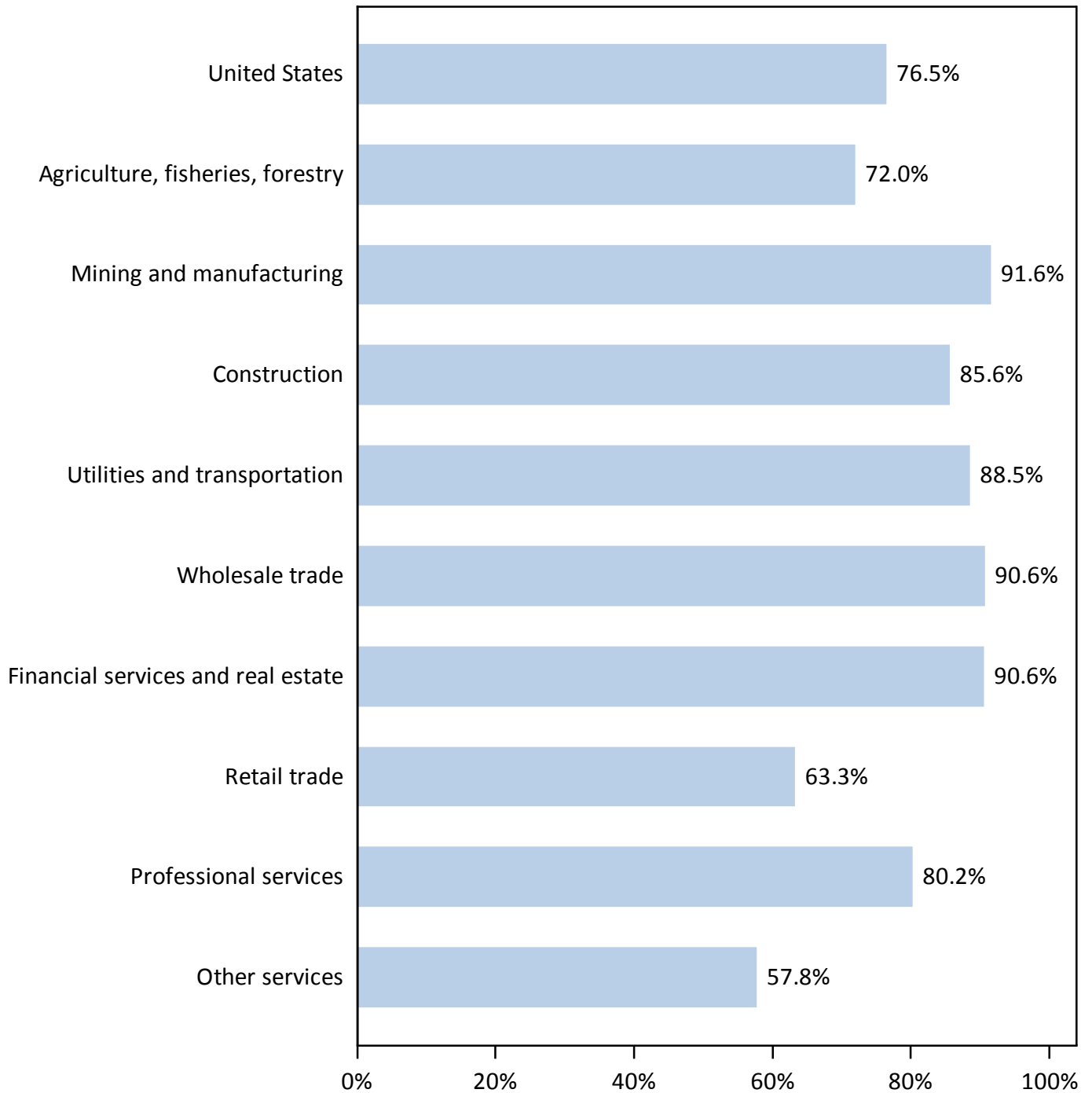
**Exhibit 2.13: Coverage Rate**  
**Percentage of private-sector employees who are enrolled in health insurance at establishments that offer health insurance, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**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, 2016**



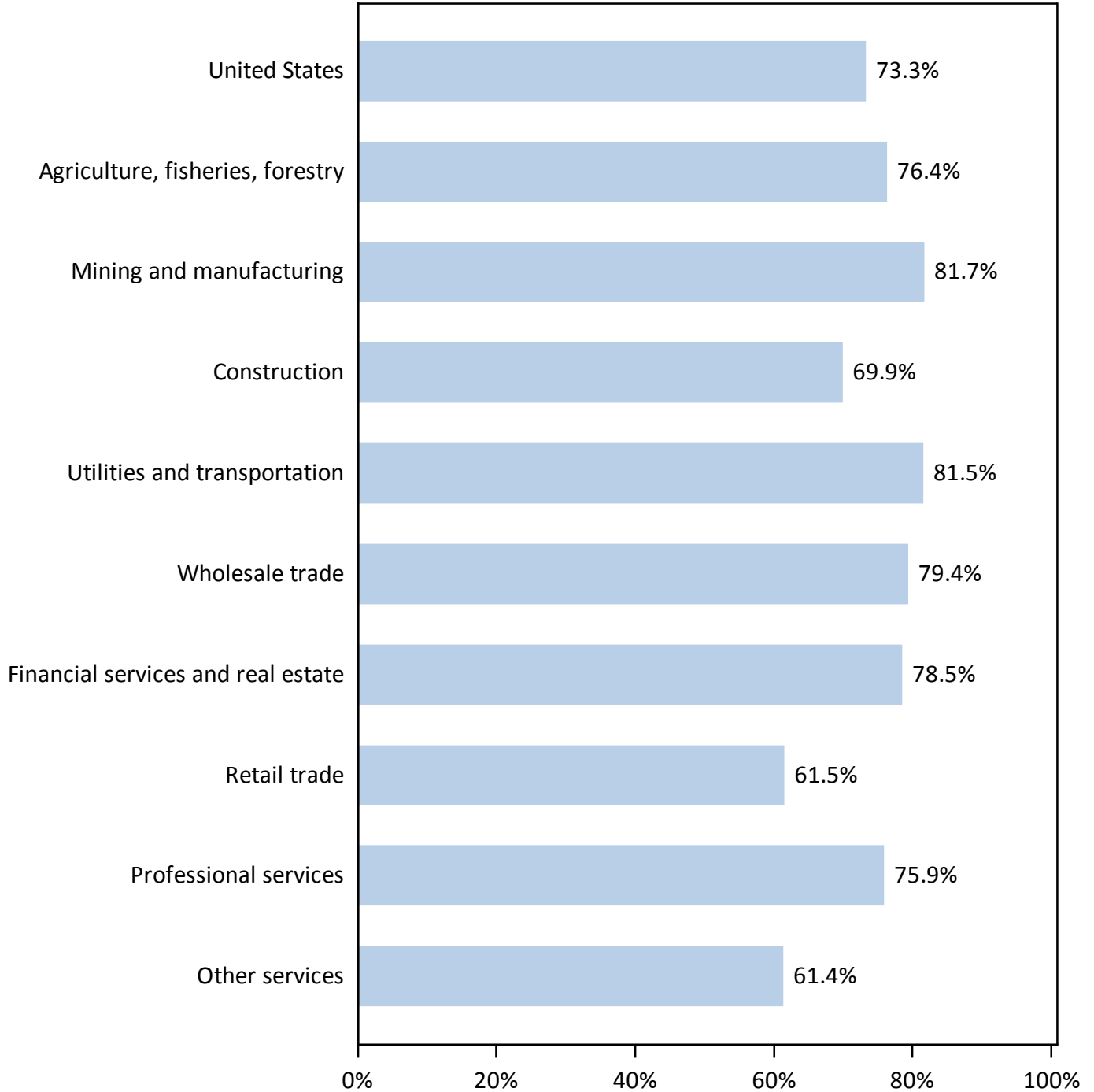
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**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, 2016**

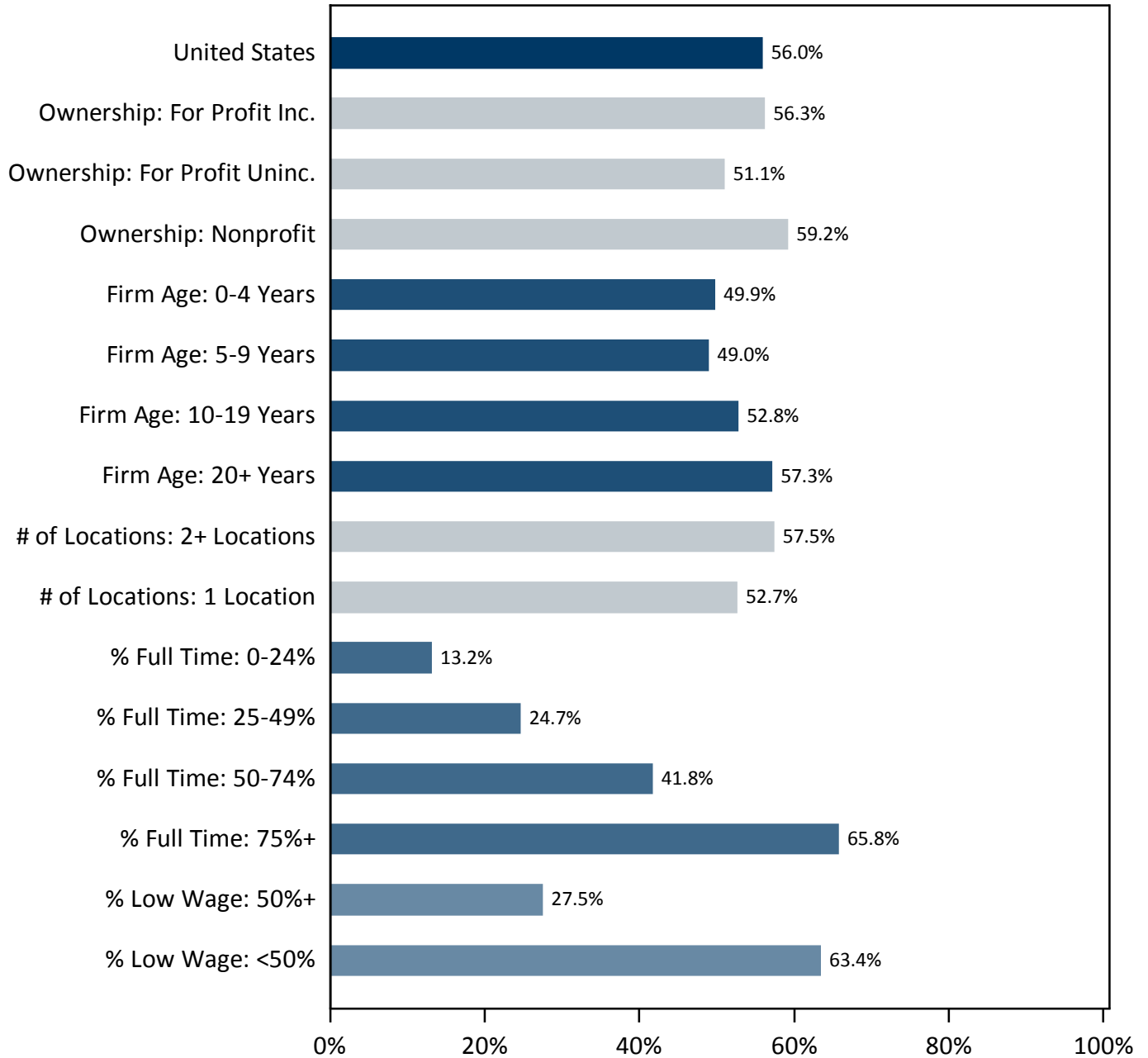


**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**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, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

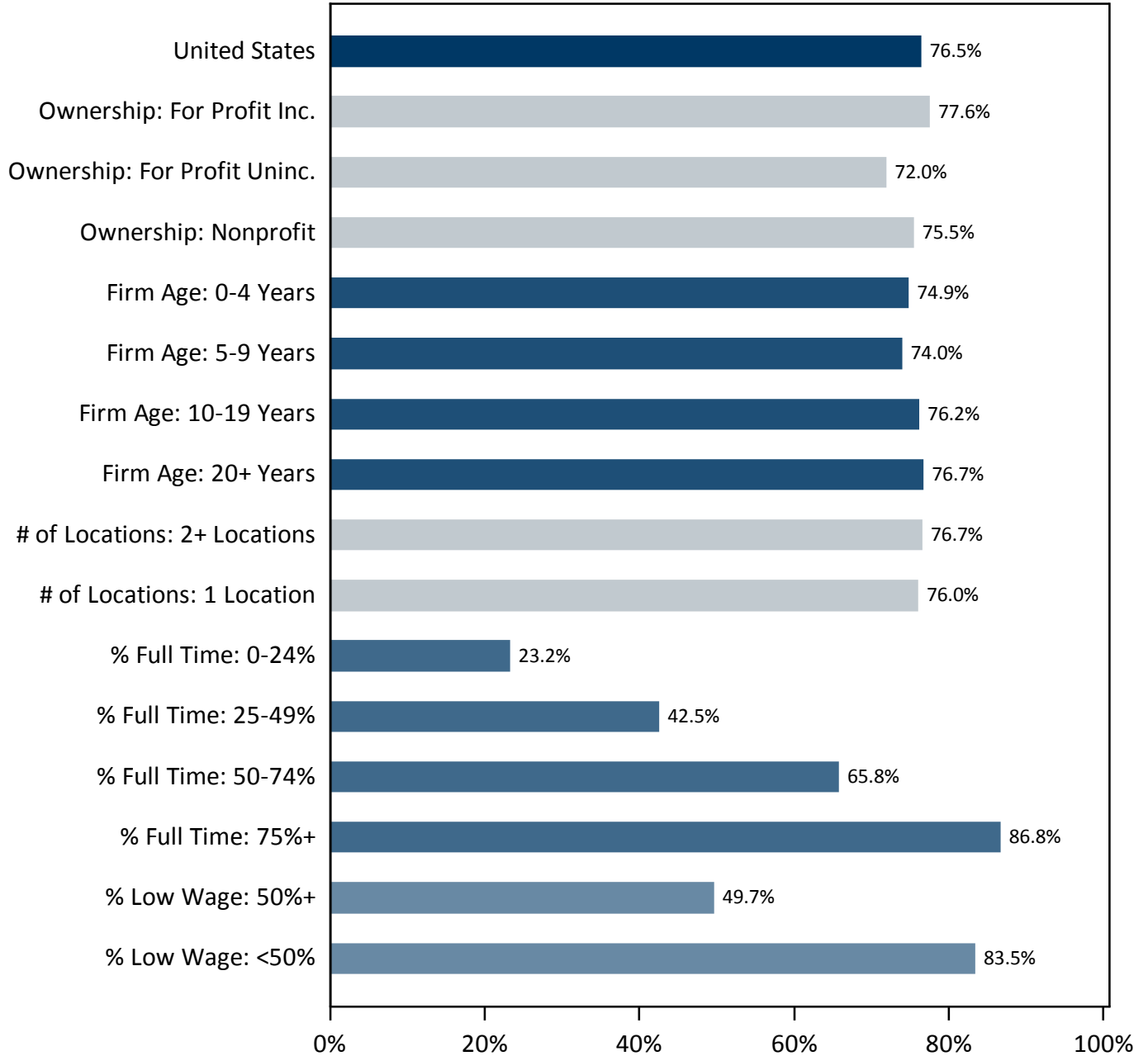
**Denominator:** Within each category, all employees in establishments that offer health insurance.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

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

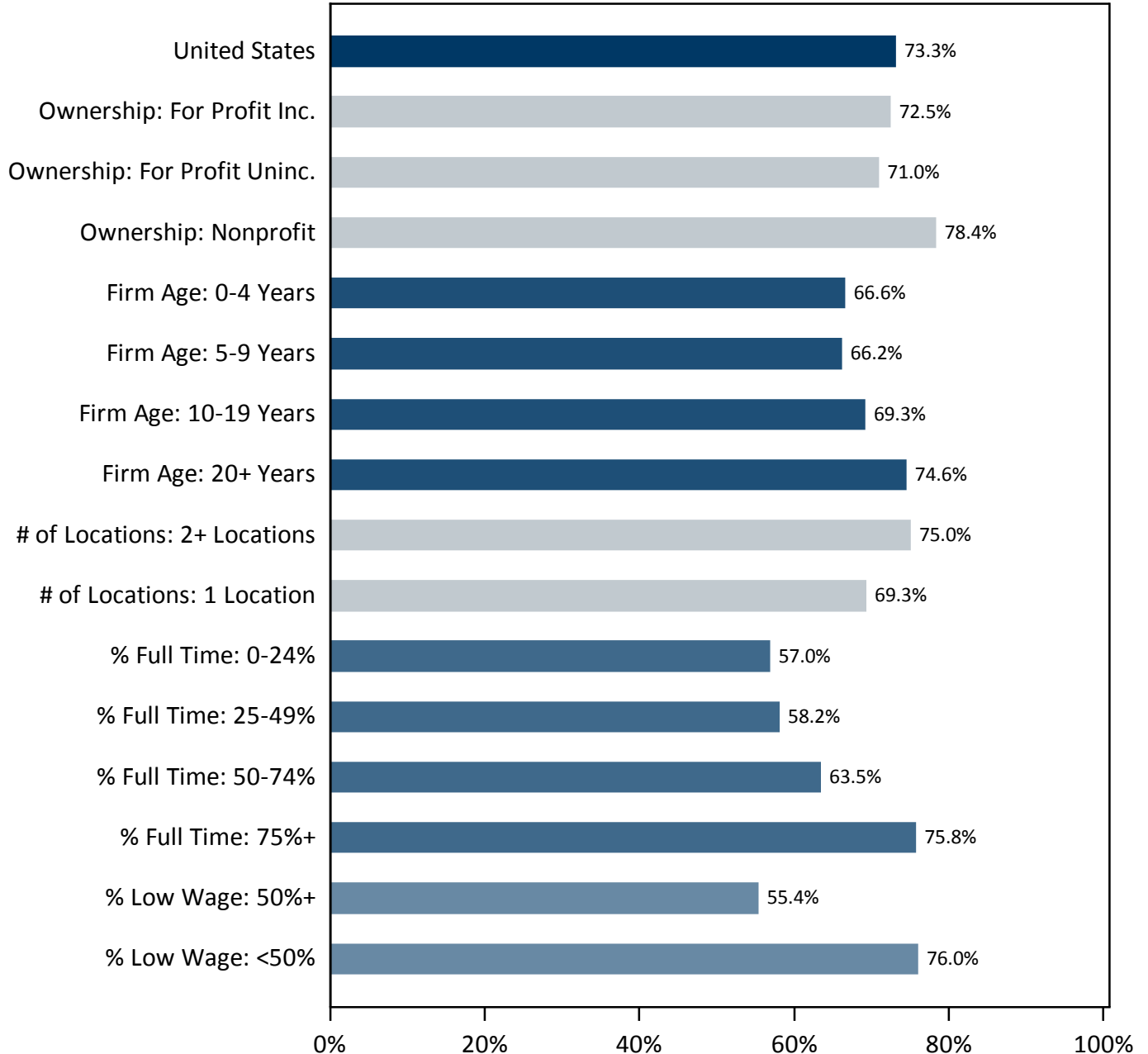
**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**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 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

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

# Section 3: Health Insurance Premiums



## Health Insurance Premiums

In 2016, average annual health insurance premiums per enrollee with private-sector employer coverage were \$6,101 for single coverage, \$12,124 for employee-plus-one coverage, and \$17,710 for family coverage. These amounts represent increases of 2.3 percent for single coverage, 2.7 percent for employee-plus-one coverage, and 2.2 percent for family coverage over 2015 levels.

The 2015 to 2016 growth rates for single premiums and employee-plus-one premiums were similar to the growth rates from 2014 to 2015 (2.2 percent and 2.6 percent, respectively). However, the 2015 to 2016 growth rate for family premiums was lower than the growth rate for 2014 to 2015 (4.0 percent) ( $p < 0.10$ ).

Between 2003 and 2016, premiums for the three types of coverage grew by between 75.3 percent and 91.5 percent (average annual growth rates of between 4.4 percent and 5.1 percent). Premium growth rates showed substantial variation over the 13 years from 2003 to 2016. In the most recent 5-year period from 2011 to 2016, premium growth rates for all three types of coverage were relatively low, averaging between 3.2 and 3.3 percent per year.

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 2003 to 2016, overall and by firm size. This section also examines variation in premiums in 2016 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 2015-2016 With Recent Years***

- Average health insurance premiums in 2016 were \$6,101 (single coverage), \$12,124 (employee-plus-one coverage), and \$17,710 (family coverage), representing increases of 2.3 percent, 2.7 percent, and 2.2 percent, respectively, over 2015 levels. The 2015 to 2016 annual growth rate for family coverage was lower than the 4.0 percent increase from 2014 to 2015 ( $p < 0.10$ ), while the 2015 to 2016 growth rates for single and employee-plus-one coverage were similar to the 2014 to 2015 growth rates (2.2 percent and 2.6 percent, respectively) (Exhibits 3.1 and 3.2).
- The 2015 to 2016 growth rates for single, employee-plus-one, and family premiums were all lower than the corresponding growth rates for 2003 to 2004, 2004 to 2005, 2008 to 2009, 2009 to 2010, 2010 to 2011, and 2013 to 2014 ( $p < 0.10$  for the comparisons of the 2015 to 2016 rates with 2013 to 2014 rates for employee-plus-one and family premiums). In addition, the 2015 to 2016 growth rate for family premiums was lower than the growth rates from 2005 to 2006 and 2014 to 2015 ( $p < 0.10$ ). There were no significant differences in growth rates for any of the three types of coverage when comparing the 2015 to 2016 rates and the rates from 2006 to 2007, 2007 to 2008, 2011 to 2012, or 2012 to 2013 (Exhibit 3.2).

### ***Premium Growth Rates From 2003 to 2016***

- Between 2003 and 2016, 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 75.3 percent for single coverage (\$3,481 to \$6,101), 82.4 percent for

employee-plus-one coverage (\$6,647 to \$12,124), and 91.5 percent for family coverage (\$9,249 to \$17,710) (Exhibit 3.1). These increases represented average annual growth rates of 4.4 percent for single coverage, 4.7 percent for employee-plus-one coverage, and 5.1 percent for family coverage (Exhibit 3.2).

- Premium growth rates varied over the 13 years from 2003 to 2016. In the most recent 5-year period, from 2011 to 2016, average annual growth rates for single, employee-plus-one, and family coverage were all relatively low (between 3.2 percent and 3.3 percent). Another period of slower growth for all three types of coverage lasted from 2005 to 2008, with average annual growth rates ranging from 3.2 percent to 4.6 percent (Exhibits 3.2 and 3.3).
- There were also two periods of relatively higher premium growth for the three types of coverage: from 2003 to 2005, when average annual growth rates were between 7.1 percent and 7.7 percent, and from 2008 to 2011, when average annual growth rates were between 6.0 percent and 6.9 percent (Exhibits 3.2 and 3.3).

### ***Premiums by Firm Size, 2003 to 2016***

- In 2003, average single premiums were lower in firms with 100 or more employees (\$3,430) than in firms with fewer than 50 employees (\$3,623). From 2003 to 2016, however, single premiums increased more rapidly in the largest firms than in the smallest firms (79.2 percent vs. 67.5 percent). Thus, by 2016, there was no significant difference in single premiums between firms with 100 or more employees (\$6,146) and firms with fewer than 50 employees (\$6,070) (Exhibit 3.4).
- In 2016, single premiums were about 6 to 7 percent higher in the largest firms (\$6,146) and the smallest firms (\$6,070) than in firms with 50 to 99 employees (\$5,743) (Exhibit 3.4).
- In 2003, there were no statistically significant differences in employee-plus-one premiums by firm size. From 2003 to 2016, however, employee-plus-one premiums grew more slowly in firms with 50 to 99 employees (65.0 percent) than in firms with 100 or more employees (85.0 percent). By 2016, average employee-plus-one premiums in firms with 50 to 99 employees (\$11,389) were about 7 percent lower than in the largest firms (\$12,225) (Exhibit 3.5).
- In 2003, there were no statistically significant differences in average family premiums by firm size. However, from 2003 to 2016, family premiums grew faster at the largest firms than at smaller firms (95.1 percent in firms with 100 or more employees vs. 73.3 percent in firms with 50 to 99 employees and 76.7 percent in firms with fewer than 50 employees). Thus, by 2016, family premiums in the largest firms (\$18,000) were about 11 percent higher than in firms with 50 to 99 employees (\$16,214) and about 9 percent higher than in firms with fewer than 50 employees (\$16,471) (Exhibit 3.6).
- Estimates by detailed firm-size categories show that the largest firms (1,000 or more employees) had higher average family premiums (\$18,121) than any other firm-size category. For single coverage, firms with fewer than 10 employees (\$6,340) had higher average premiums than firms with 10 to 24 employees (\$6,100,  $p < 0.10$ ), 25 to 99 employees (\$5,786), and 100 to 999 employees (\$6,084) (Exhibit 3.7).
- 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., 95.2 percent of employees in firms with 1,000 or more employees have offers of employee-plus-one coverage compared with 61.3 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 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, 2016***

- In 2016, average annual premiums for single, employee-plus-one, and family coverage were \$6,101, \$12,124, and \$17,710, respectively. Five States had average annual premiums that were significantly lower than the national average for all three types of coverage. These States were Alabama, Arkansas, Hawaii, Mississippi, and Nevada. Five States (Alaska, Connecticut, Massachusetts, New Hampshire, and New York) had average annual premiums that were significantly higher than the national average for all three types of coverage (Exhibits 3.8, 3.9, and 3.10).
- In total, 10 States had average annual premiums for single coverage that were significantly lower than the national average of \$6,101. These States were Alabama, Arkansas, Hawaii, Idaho, Kentucky, Mississippi, Nevada, North Carolina, South Carolina, and Tennessee. Another 10 States had average annual single premiums that were significantly higher than the national average. These States were Alaska, Connecticut, Delaware, District of Columbia, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island, and Wisconsin (Exhibit 3.8).
- Ten States had average annual premiums for employee-plus-one coverage that were significantly lower than the national average of \$12,124. These States were Alabama, Arkansas, Hawaii, Iowa, Mississippi, Missouri, Nevada, North Carolina, South Carolina, and Utah. Nine States had average annual employee-plus-one premiums that were significantly above the national average. These States were Alaska, Connecticut, Massachusetts, New Hampshire, New York, Ohio, Pennsylvania, Rhode Island, and Wisconsin (Exhibit 3.9).
- In 2016, the average annual family premium was \$17,710. Ten States had average annual family premiums that were significantly lower than the national average. These States were Alabama, Arkansas, Hawaii, Iowa, Kentucky, Mississippi, Missouri, Nebraska, Nevada, and North Dakota. Eight States had family premiums that were significantly above the national average. These States were Alaska, Connecticut, Delaware, District of Columbia, Massachusetts, New Hampshire, New York, and Wyoming (Exhibit 3.10).

### ***Premiums by Industry Category, 2016***

- In 2016, establishments in professional services had higher average single premiums (\$6,499), employee-plus-one premiums (\$12,701), and family premiums (\$18,784) than any other industry category except financial services and real estate. Similarly, establishments in financial services and real estate had higher average single premiums (\$6,494) and employee-plus one premiums (\$12,570) than any other industry category except professional services ( $p < 0.10$  for the difference in employee-plus-one premiums with utilities and transportation). In addition, financial services and real estate had higher family premiums (\$18,415) than any other industry categories except professional services and utilities and transportation (Exhibits 3.11, 3.12, and 3.13).

- Establishments in agriculture, fisheries, and forestry had average single premiums (\$4,931) and employee-plus-one premiums (\$9,382) that were lower than premiums for any other industry category ( $p < 0.10$  for the difference in employee-plus-one premiums with retail trade). Compared with establishments in agriculture, fisheries, and forestry, establishments in professional services and financial services and real estate had single and employee-plus-one premiums that were about 30 to 35 percent higher (Exhibits 3.11 and 3.12).

### **Premiums by Selected Employer Characteristics, 2016**

- In 2016, predominantly low-wage establishments (50 percent or more of employees earn less than \$11.50 per hour) had lower average premiums than higher wage establishments for single coverage (\$5,525 vs. \$6,183), employee-plus-one coverage (\$11,175 vs. \$12,208), and family coverage (\$16,719 vs. \$17,781) (Exhibits 3.14, 3.15, and 3.16).
- Premiums for all three types of coverage for nonprofit employers were higher than premiums for unincorporated and incorporated for-profit employers (\$6,971 vs. \$5,829 and \$5,925, respectively, for single coverage; \$13,552 vs. \$11,481 and \$11,831, respectively, for employee-plus-one coverage; and \$19,885 vs. \$16,927 and \$17,327, respectively, for family coverage) (Exhibits 3.14, 3.15, and 3.16).
- In 2016, establishments in firms that were 20 years old or more had higher premiums than establishments in firms that were 10 to 19 years old, 5 to 9 years old, or 0 to 4 years old (\$6,227 vs. \$5,724, \$5,464, and \$5,568, respectively, for single coverage; \$12,298 vs. \$11,619, \$10,522, and \$11,224, respectively, for employee-plus-one coverage; and \$17,903 vs. \$17,344, \$15,671, and \$16,043, respectively, for family coverage) (Exhibits 3.14, 3.15, and 3.16).
- Establishments in firms with multiple locations had higher premiums than establishments in single-location firms for family coverage (\$18,056 vs. \$16,670), employee-plus-one coverage (\$12,267 vs. \$11,704), and single coverage (\$6,211 vs. \$5,877) (Exhibits 3.14, 3.15, and 3.16).

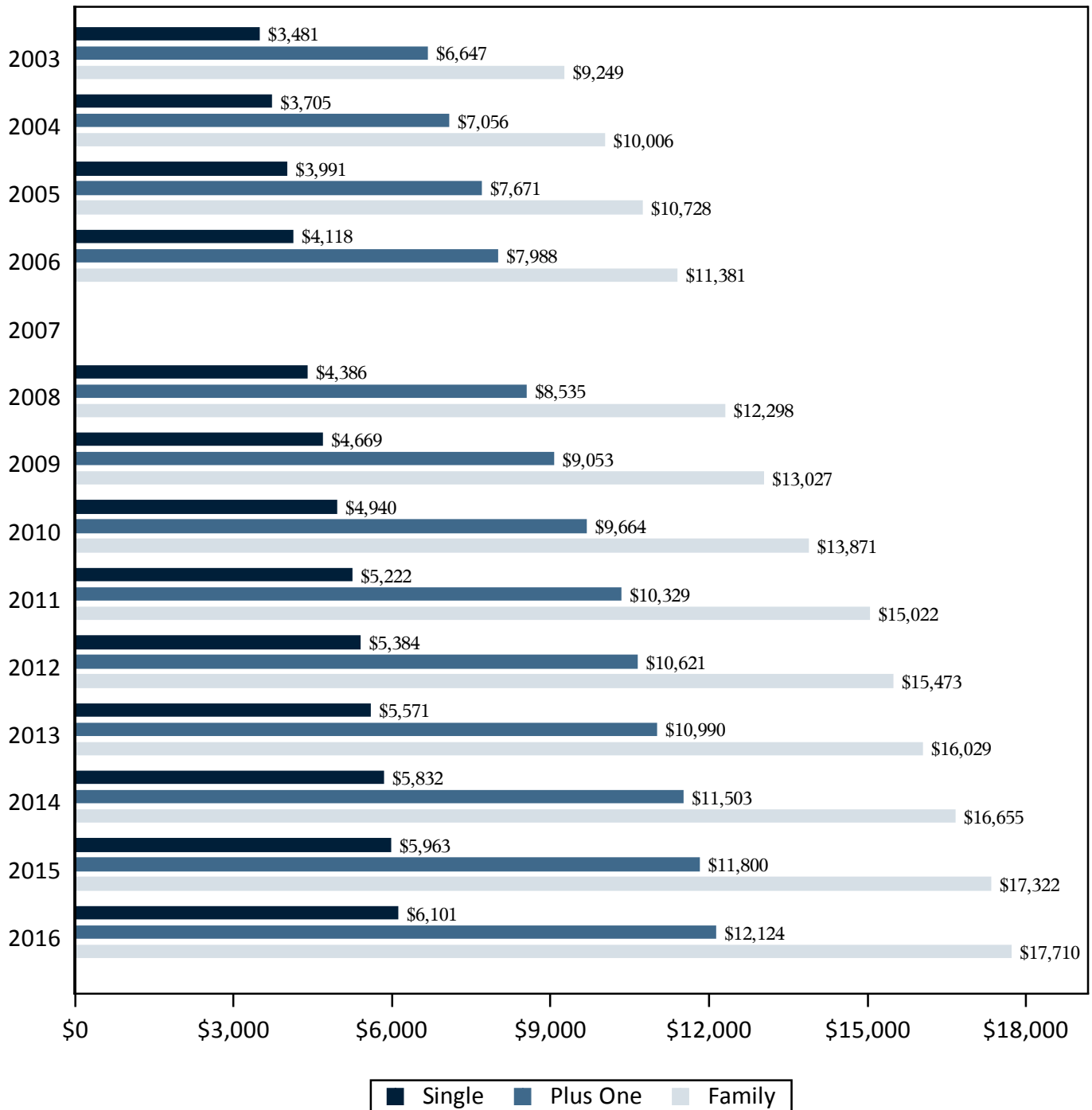
### **Premium Distributions, 2016**

- In 2016, premium distributions for all three types of coverage showed substantial variation as the 90<sup>th</sup> percentile value was more than twice as large as the 10<sup>th</sup> percentile value for single premiums (\$8,500 vs. \$3,700), employee-plus-one premiums (\$17,000 vs. \$7,700), and family premiums (\$24,000 vs. \$11,000) (Exhibit 3.17).
- Single and employee-plus-one premiums for establishments in firms with fewer than 50 employees showed more variability than premiums for firms with 100 or more employees. In particular, premiums for both types of coverage were lower in the smallest firms than in the largest firms at the 10<sup>th</sup>, 25<sup>th</sup>, and 50<sup>th</sup> percentiles but were *higher* at the 90<sup>th</sup> percentile (\$9,100 vs. \$8,400 for single coverage and \$18,000 vs. \$17,000 for employee-plus-one coverage). Family premiums in the smallest firms were lower than premiums in the largest firms at the 10<sup>th</sup>, 25<sup>th</sup>, 50<sup>th</sup>, and 75<sup>th</sup> percentiles, while 90<sup>th</sup> percentile premiums were the same (\$24,000) (Exhibit 3.17).
- Premiums for all three types of coverage were lower in firms with 50 to 99 employees than in the largest firms at the 10<sup>th</sup>, 25<sup>th</sup>, and 50<sup>th</sup> percentiles of the premium distributions, and family premiums for firms with 50 to 99 employees were also lower at the 75<sup>th</sup> percentile. In contrast, there were no statistically significant differences in premiums for single, employee-

plus-one, or family coverage across these two firm-size categories at the 90<sup>th</sup> percentile of the premium distribution (Exhibit 3.17).

### Exhibit 3.1

## Average total premiums per enrolled employee for single, employee-plus-one, and family coverage, 2003-2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

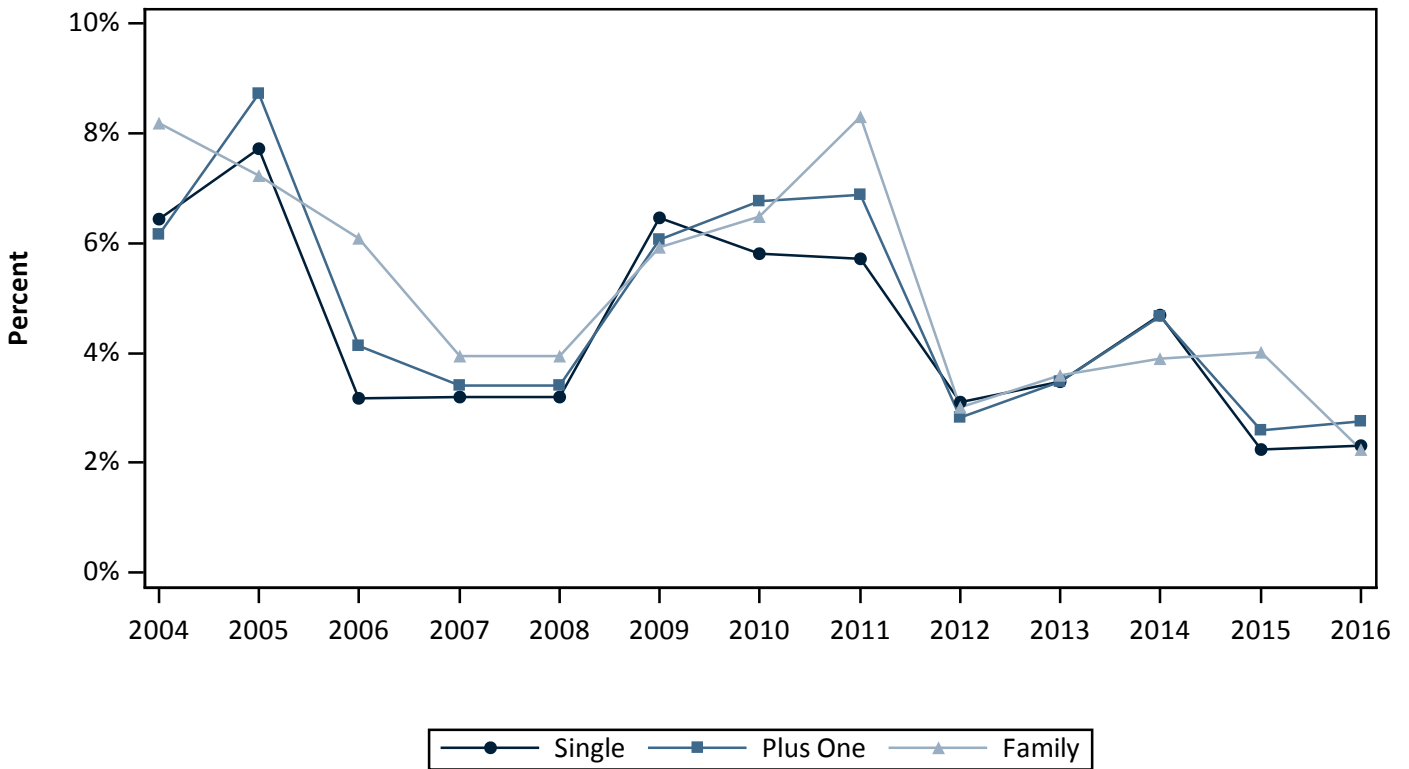
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

**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, 2004-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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, 2004-2016**

Coverage	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Single	6.4%	7.7%	3.2%	3.2%	3.2%	6.5%	5.8%	5.7%	3.1%	3.5%	4.7%	2.2%	2.3%
Plus One	6.2%	8.7%	4.1%	3.4%	3.4%	6.1%	6.7%	6.9%	2.8%	3.5%	4.7%	2.6%	2.7%
Family	8.2%	7.2%	6.1%	4.0%	4.0%	5.9%	6.5%	8.3%	3.0%	3.6%	3.9%	4.0%	2.2%

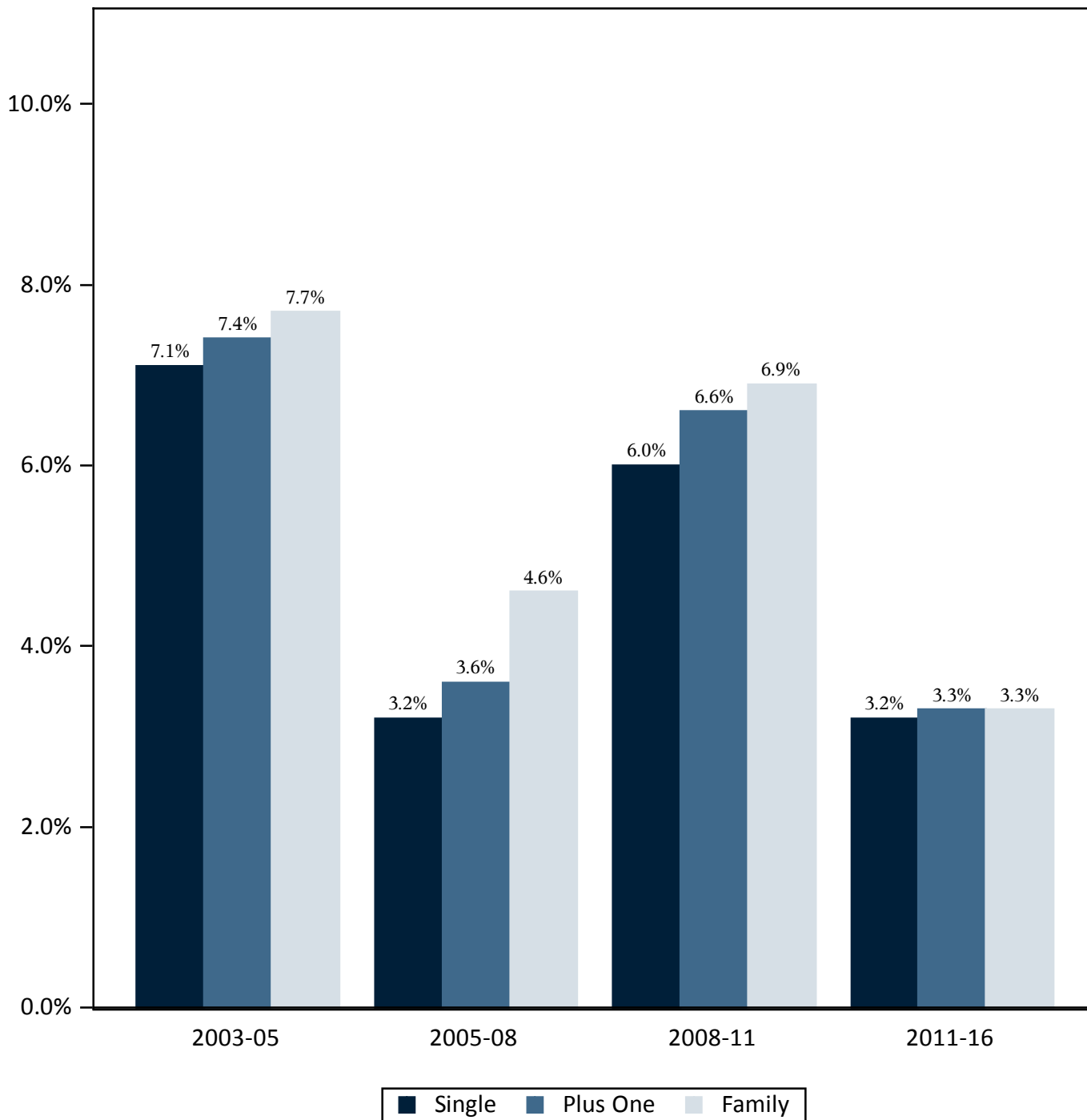
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 annual growth rates in total premiums per enrolled employee for single, employee-plus-one, and family coverage, 2003-2016**

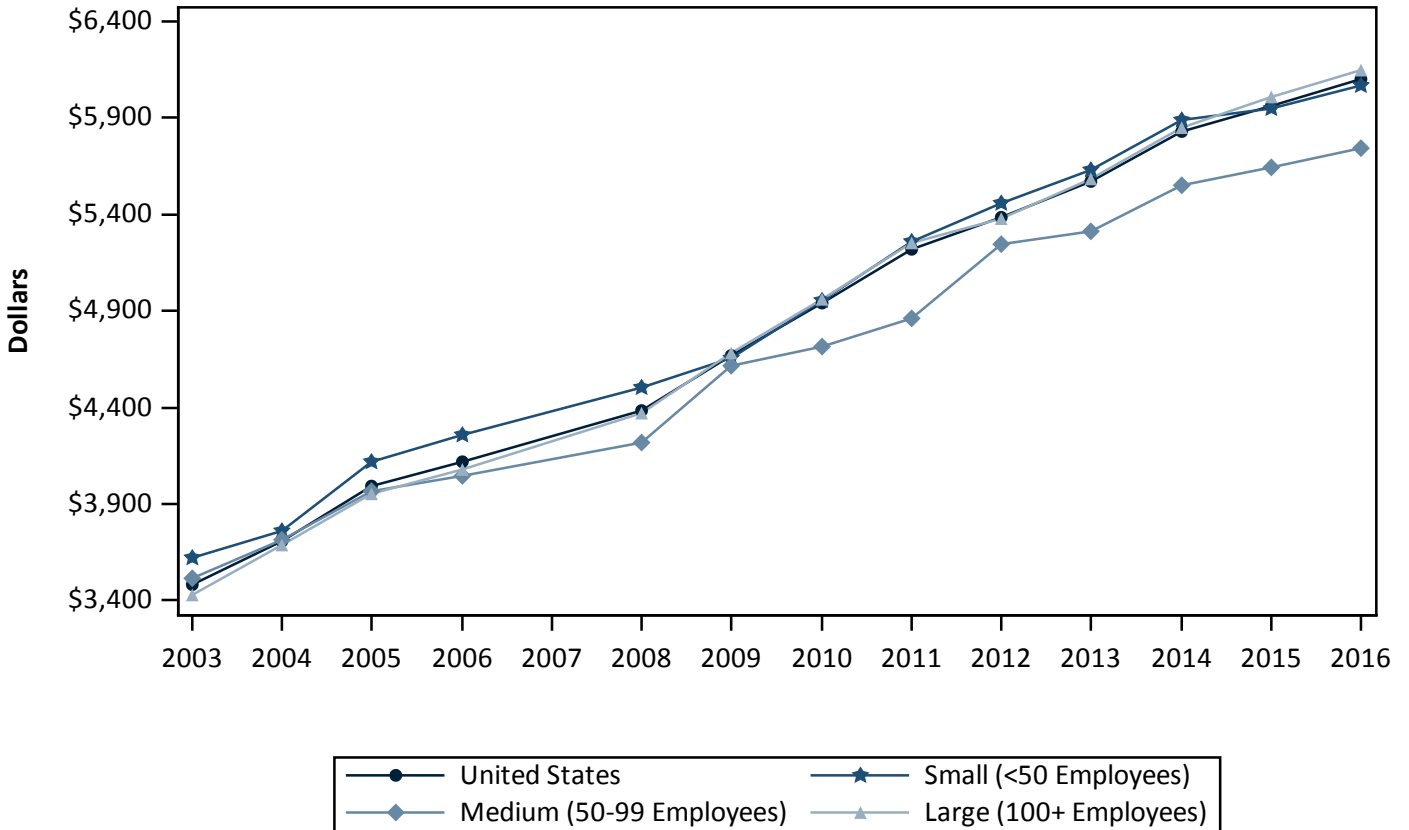


**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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 single premium per enrolled employee, by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

**Data for Exhibit 3.4**  
**Average total single premium per enrolled employee, by firm size, 2003-2016**

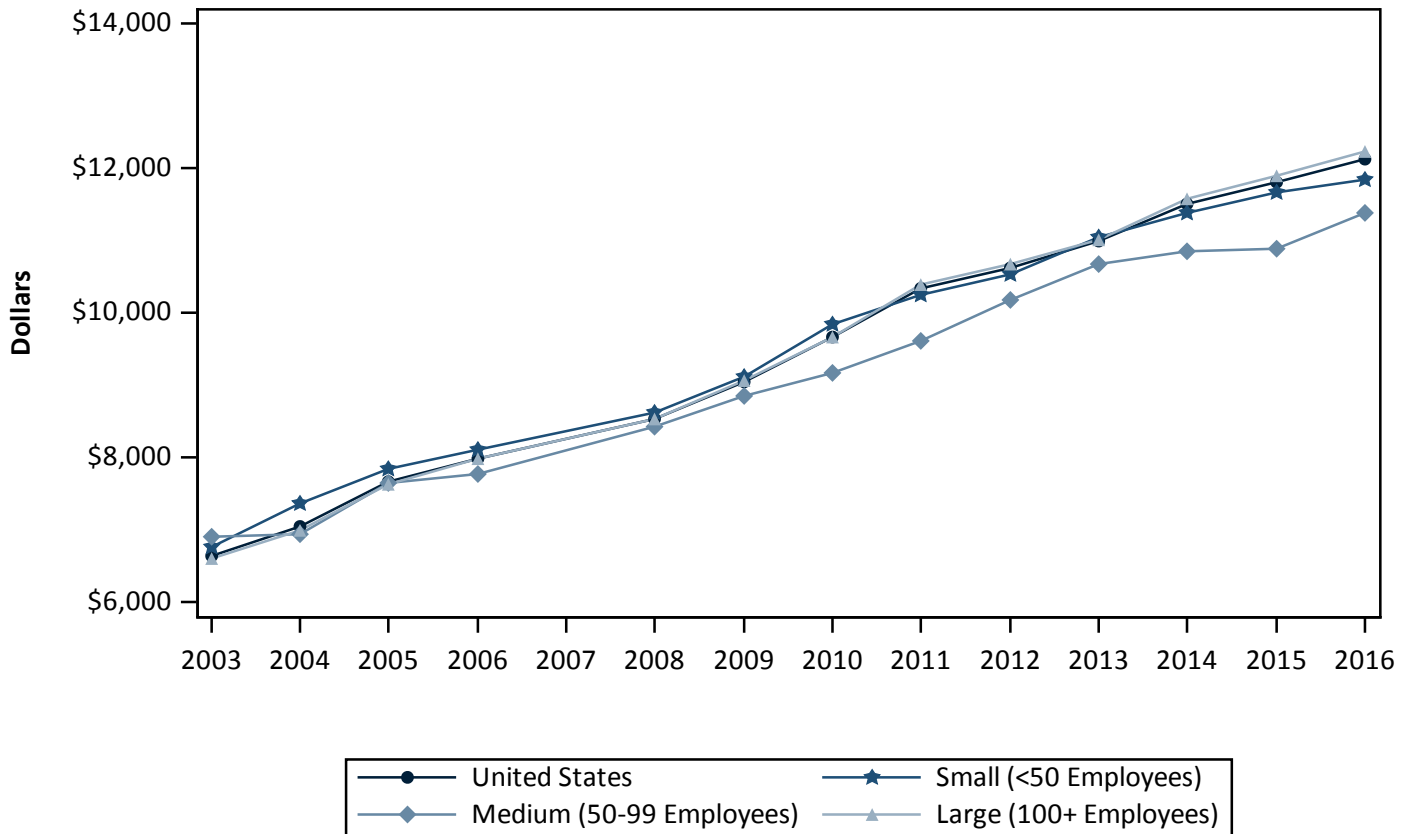
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	\$3,481	\$3,705	\$3,991	\$4,118	\$4,386	\$4,669	\$4,940	\$5,222	\$5,384	\$5,571	\$5,832	\$5,963	\$6,101
<50	\$3,623	\$3,763	\$4,121	\$4,260	\$4,501	\$4,652	\$4,956	\$5,258	\$5,460	\$5,628	\$5,886	\$5,947	\$6,070
50-99	\$3,513	\$3,711	\$3,962	\$4,045	\$4,215	\$4,614	\$4,713	\$4,861	\$5,246	\$5,314	\$5,549	\$5,642	\$5,743
100+	\$3,430	\$3,684	\$3,950	\$4,080	\$4,370	\$4,681	\$4,959	\$5,252	\$5,378	\$5,584	\$5,851	\$6,006	\$6,146

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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 employee-plus-one premium per enrolled employee, by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

**Data for Exhibit 3.5**

**Average total employee-plus-one premium per enrolled employee, by firm size, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	\$6,647	\$7,056	\$7,671	\$7,988	\$8,535	\$9,053	\$9,664	\$10,329	\$10,621	\$10,990	\$11,503	\$11,800	\$12,124
<50	\$6,763	\$7,373	\$7,841	\$8,105	\$8,631	\$9,124	\$9,850	\$10,253	\$10,524	\$11,050	\$11,386	\$11,666	\$11,833
50-99	\$6,903	\$6,945	\$7,645	\$7,774	\$8,421	\$8,852	\$9,166	\$9,615	\$10,178	\$10,673	\$10,845	\$10,885	\$11,389
100+	\$6,607	\$7,002	\$7,640	\$7,981	\$8,527	\$9,058	\$9,669	\$10,394	\$10,672	\$11,006	\$11,571	\$11,892	\$12,225

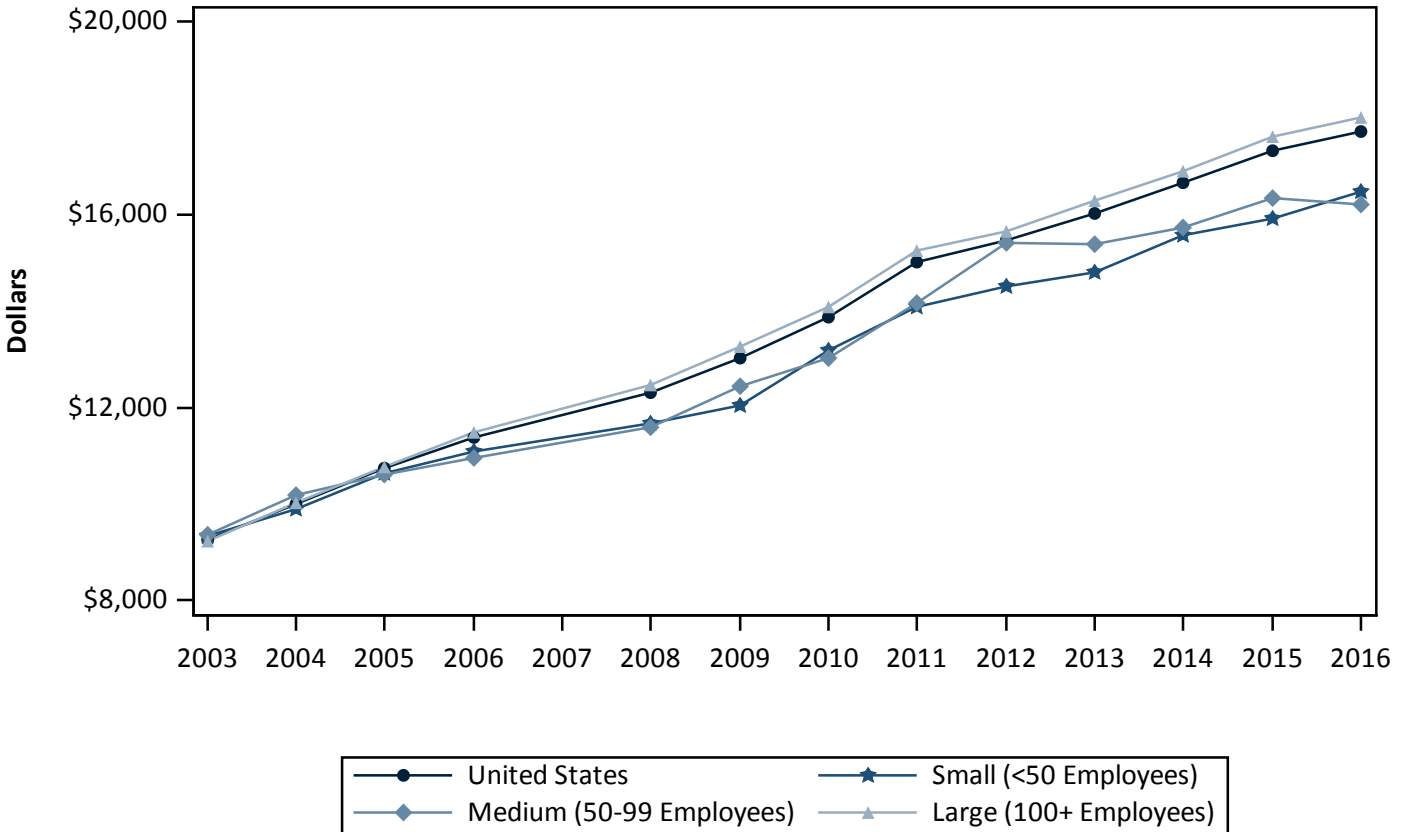
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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 family premium per enrolled employee, by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

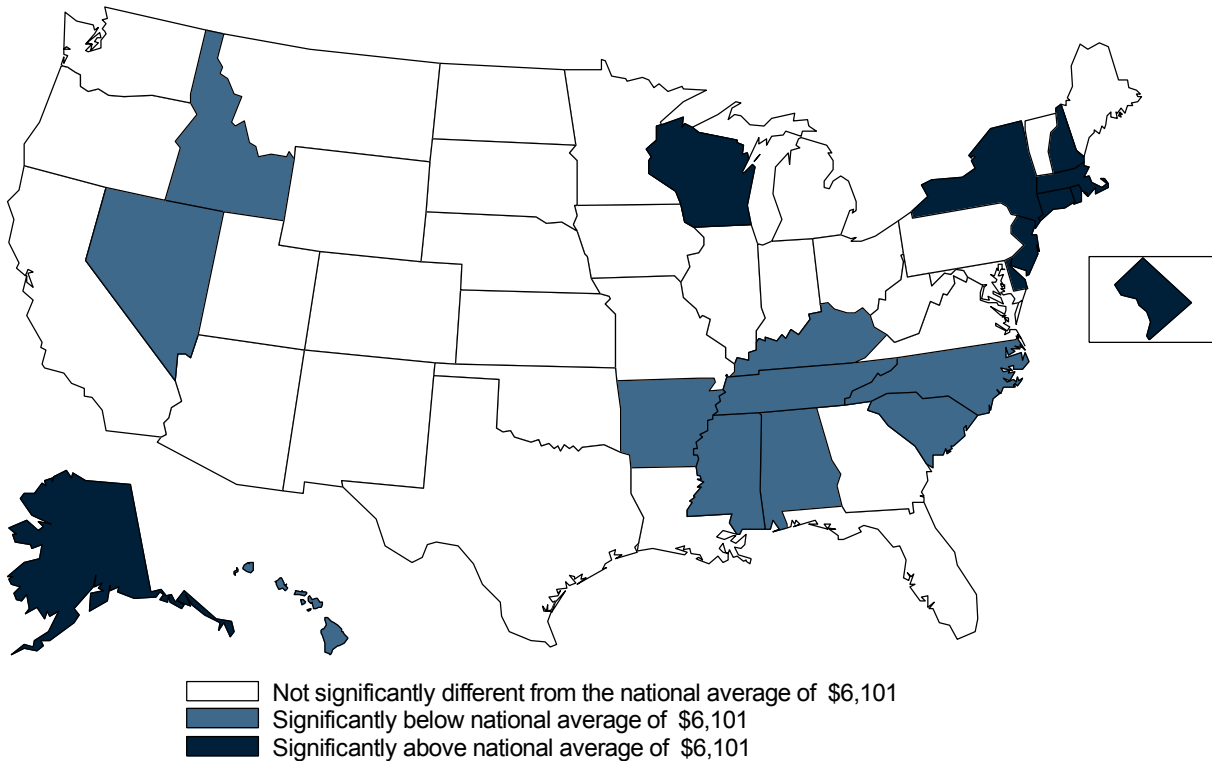
**Data for Exhibit 3.6**  
**Average total family premium per enrolled employee, by firm size, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	\$9,249	\$10,006	\$10,728	\$11,381	\$12,298	\$13,027	\$13,871	\$15,022	\$15,473	\$16,029	\$16,655	\$17,322	\$17,710
<50	\$9,321	\$9,898	\$10,632	\$11,095	\$11,679	\$12,041	\$13,170	\$14,086	\$14,496	\$14,787	\$15,575	\$15,919	\$16,471
50-99	\$9,354	\$10,172	\$10,619	\$10,954	\$11,578	\$12,431	\$13,019	\$14,151	\$15,421	\$15,376	\$15,732	\$16,336	\$16,214
100+	\$9,226	\$10,019	\$10,754	\$11,471	\$12,468	\$13,271	\$14,074	\$15,245	\$15,641	\$16,284	\$16,903	\$17,612	\$18,000

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.  
**For data points and standard errors for this exhibit select here.**

<b>Exhibit 3.7</b>			
<b>Average total premiums per enrolled employee for single, employee-plus-one, and family coverage, overall and by firm size, 2016</b>			
<b>Firm Size</b>	<b>Single</b>	<b>Employee-plus-one</b>	<b>Family</b>
<b>United States</b>	\$6,101	\$12,124	\$17,710
<b>Firm size in 3 categories</b>			
<b>&lt;50</b>	\$6,070	\$11,833	\$16,471
<b>50-99</b>	\$5,743	\$11,389	\$16,214
<b>100+</b>	\$6,146	\$12,225	\$18,000
<b>Firm size in 5 categories</b>			
<b>&lt;10</b>	\$6,340	\$12,155	\$16,148
<b>10-24</b>	\$6,100	\$11,971	\$16,736
<b>25-99</b>	\$5,786	\$11,444	\$16,310
<b>100-999</b>	\$6,084	\$12,291	\$17,600
<b>1,000+</b>	\$6,174	\$12,203	\$18,121
<b>Source:</b> Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.			
<b>For data points and standard errors for this exhibit select here.</b>			

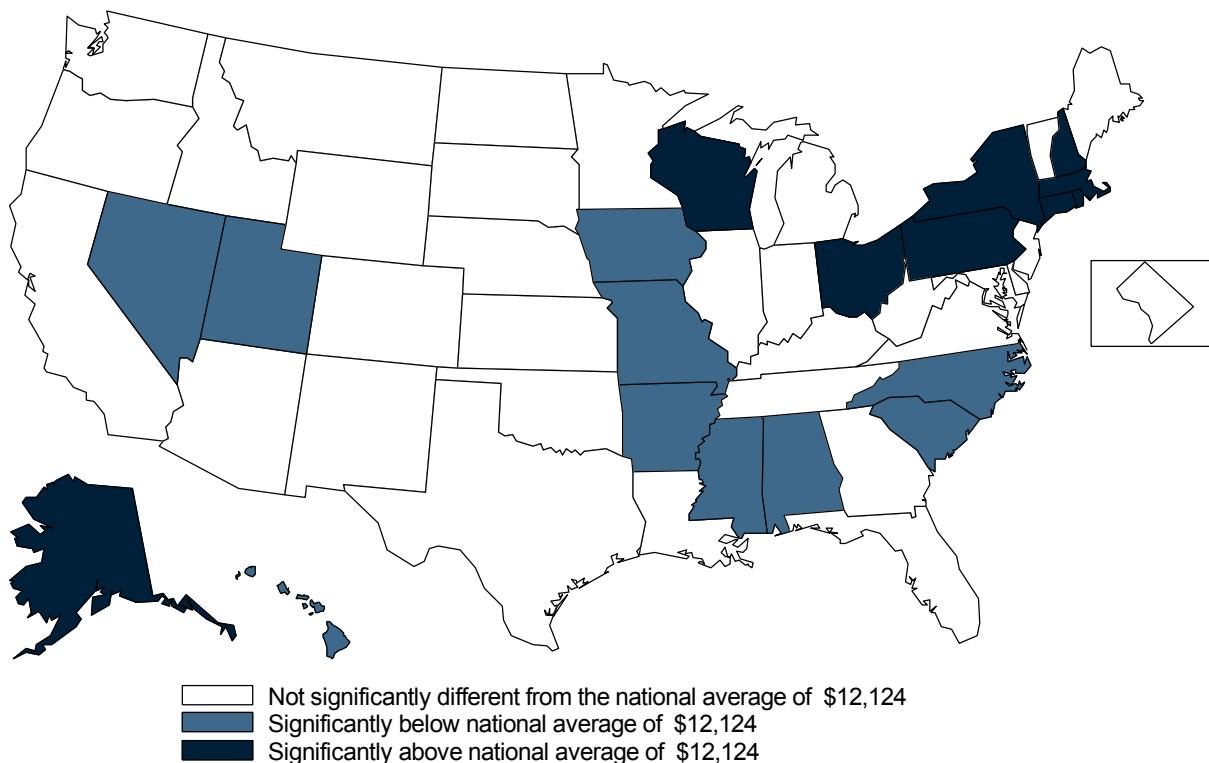
**Exhibit 3.8**  
**Average total single premium per enrolled employee, by State, 2016**



Alabama	\$5,536*	Kentucky	\$5,758*	North Dakota	\$6,155
Alaska	\$7,886*	Louisiana	\$5,735	Ohio	\$6,291
Arizona	\$6,046	Maine	\$6,212	Oklahoma	\$5,784
Arkansas	\$5,341*	Maryland	\$6,158	Oregon	\$5,974
California	\$6,054	Massachusetts	\$6,621*	Pennsylvania	\$6,201
Colorado	\$5,972	Michigan	\$5,906	Rhode Island	\$6,665*
Connecticut	\$6,545*	Minnesota	\$6,030	South Carolina	\$5,797*
Delaware	\$6,522*	Mississippi	\$5,642*	South Dakota	\$5,881
District of Columbia	\$6,504*	Missouri	\$5,881	Tennessee	\$5,543*
Florida	\$6,260	Montana	\$6,442	Texas	\$5,869
Georgia	\$6,055	Nebraska	\$6,088	Utah	\$6,117
Hawaii	\$5,863*	Nevada	\$5,490*	Vermont	\$6,338
Idaho	\$5,594*	New Hampshire	\$6,637*	Virginia	\$6,180
Illinois	\$6,268	New Jersey	\$6,492*	Washington	\$6,433
Indiana	\$6,130	New Mexico	\$6,240	West Virginia	\$6,340
Iowa	\$5,893	New York	\$6,614*	Wisconsin	\$6,386*
Kansas	\$5,844	North Carolina	\$5,717*	Wyoming	\$6,509

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of \$6,101 at  $p < 0.05$ .  
**For data points and standard errors for this exhibit select here.**

**Exhibit 3.9**  
**Average total employee-plus-one premium per enrolled employee, by State, 2016**

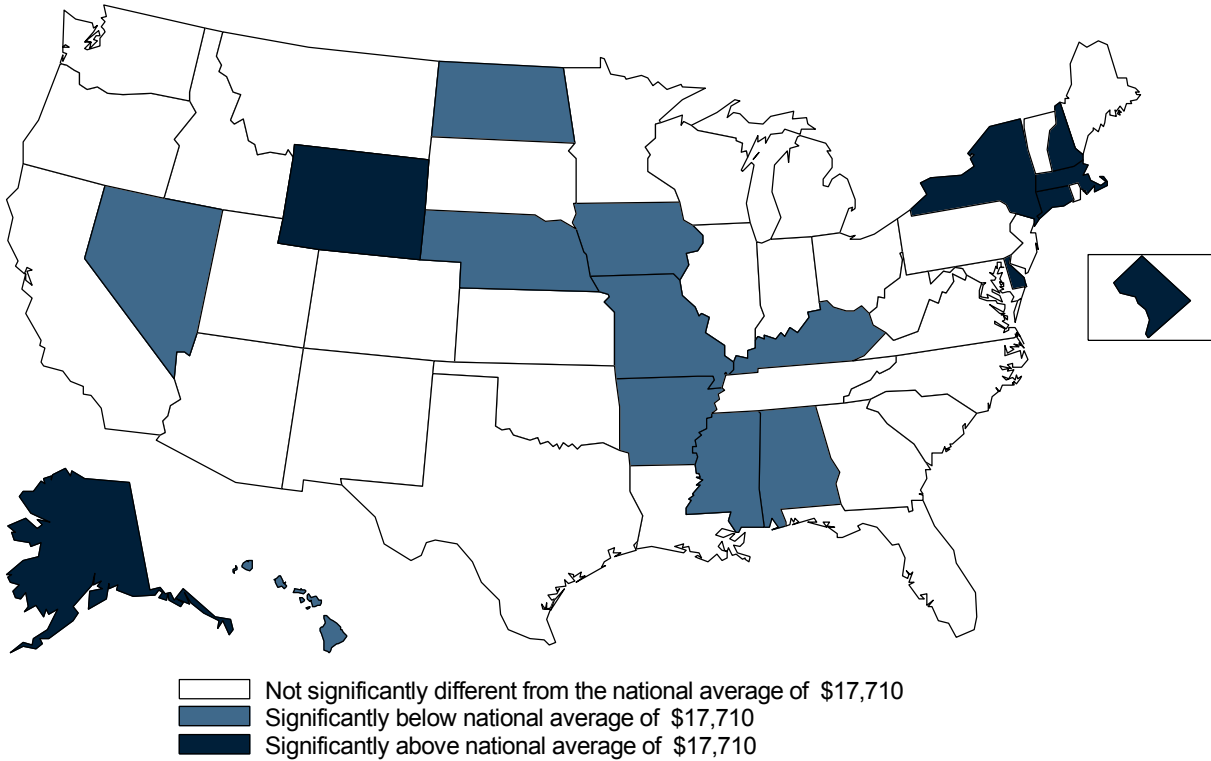


Alabama	\$10,220*	Kentucky	\$11,800	North Dakota	\$11,391
Alaska	\$15,017*	Louisiana	\$11,594	Ohio	\$12,731*
Arizona	\$11,803	Maine	\$12,245	Oklahoma	\$11,612
Arkansas	\$9,997*	Maryland	\$12,146	Oregon	\$12,321
California	\$12,107	Massachusetts	\$13,592*	Pennsylvania	\$12,773*
Colorado	\$12,456	Michigan	\$12,274	Rhode Island	\$13,387*
Connecticut	\$13,077*	Minnesota	\$11,669	South Carolina	\$11,320*
Delaware	\$12,153	Mississippi	\$10,868*	South Dakota	\$12,070
District of Columbia	\$12,948	Missouri	\$11,045*	Tennessee	\$11,509
Florida	\$11,909	Montana	\$11,911	Texas	\$12,074
Georgia	\$11,716	Nebraska	\$11,746	Utah	\$11,073*
Hawaii	\$11,498*	Nevada	\$10,269*	Vermont	\$12,884
Idaho	\$11,771	New Hampshire	\$14,138*	Virginia	\$11,847
Illinois	\$12,632	New Jersey	\$12,521	Washington	\$12,576
Indiana	\$12,409	New Mexico	\$11,196	West Virginia	\$12,119
Iowa	\$11,282*	New York	\$12,855*	Wisconsin	\$13,136*
Kansas	\$11,548	North Carolina	\$11,158*	Wyoming	\$12,878

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of \$12,124 at  $p < 0.05$ .  
**For data points and standard errors for this exhibit select here.**



**Exhibit 3.10**  
**Average total family premium per enrolled employee, by State, 2016**



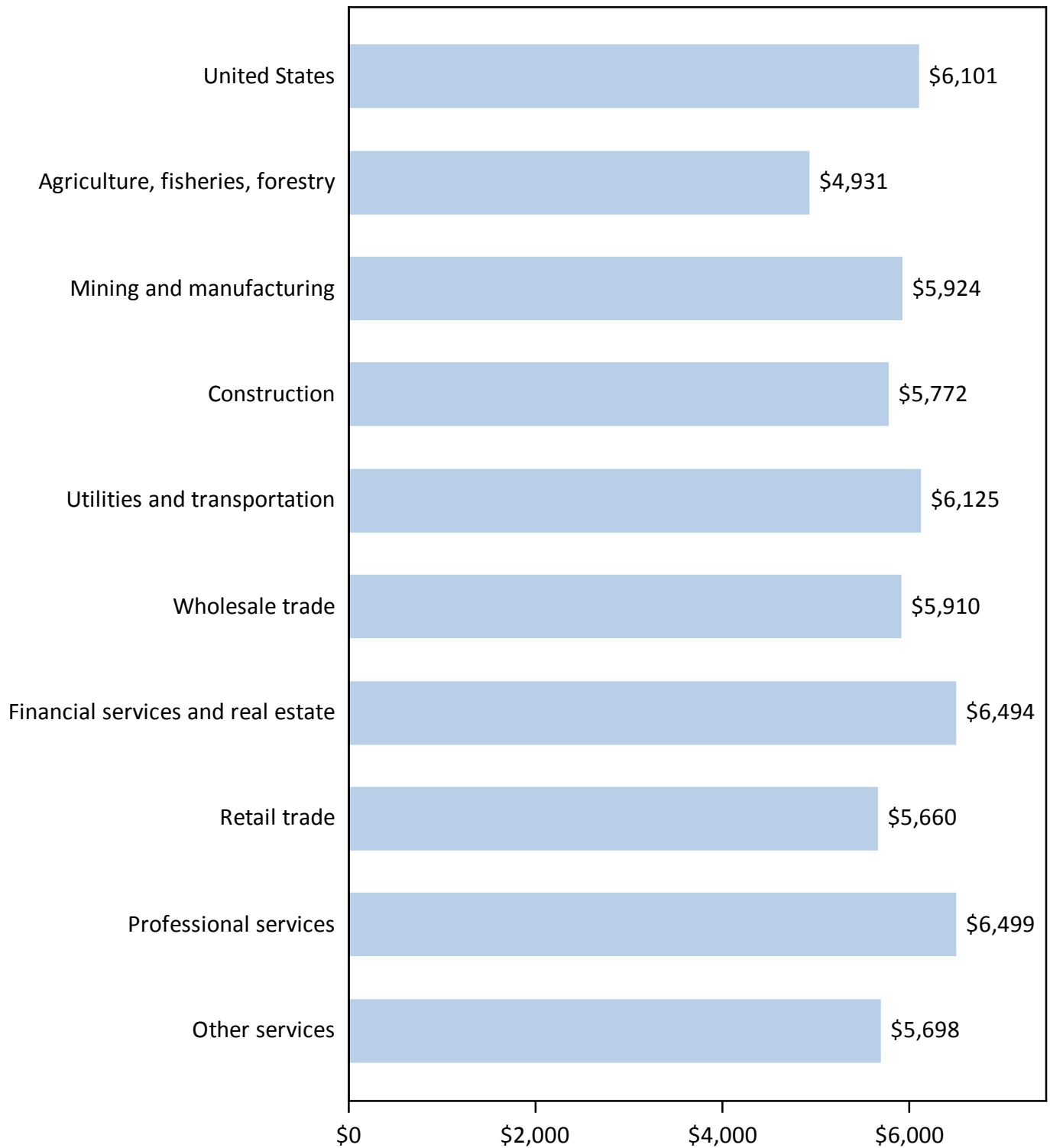
Alabama	\$16,098*	Kentucky	\$16,678*	North Dakota	\$16,804*
Alaska	\$22,490*	Louisiana	\$17,330	Ohio	\$17,523
Arizona	\$17,484	Maine	\$17,987	Oklahoma	\$16,646
Arkansas	\$14,929*	Maryland	\$18,519	Oregon	\$17,127
California	\$17,458	Massachusetts	\$18,955*	Pennsylvania	\$17,900
Colorado	\$17,459	Michigan	\$17,113	Rhode Island	\$18,010
Connecticut	\$18,637*	Minnesota	\$17,545	South Carolina	\$17,673
Delaware	\$18,648*	Mississippi	\$15,765*	South Dakota	\$17,117
District of Columbia	\$18,864*	Missouri	\$16,638*	Tennessee	\$16,721
Florida	\$17,989	Montana	\$17,835	Texas	\$17,529
Georgia	\$18,252	Nebraska	\$16,617*	Utah	\$17,025
Hawaii	\$16,362*	Nevada	\$16,133*	Vermont	\$17,795
Idaho	\$17,499	New Hampshire	\$19,066*	Virginia	\$17,945
Illinois	\$18,510	New Jersey	\$18,242	Washington	\$18,301
Indiana	\$17,996	New Mexico	\$16,954	West Virginia	\$17,260
Iowa	\$16,123*	New York	\$19,375*	Wisconsin	\$17,477
Kansas	\$16,784	North Carolina	\$16,986	Wyoming	\$19,617*

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of \$17,710 at  $p < 0.05$ .

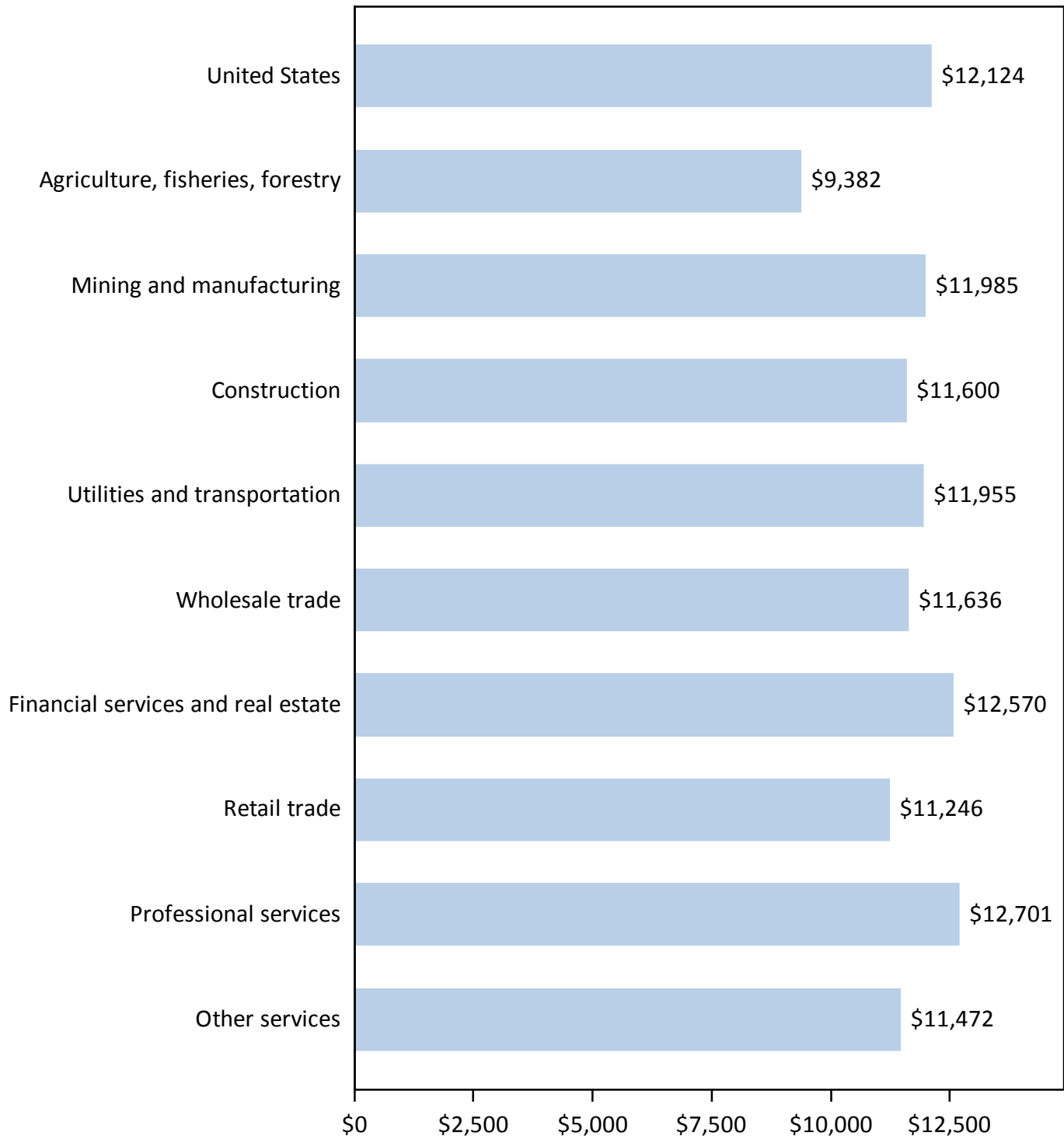
**For data points and standard errors for this exhibit select here.**

**Exhibit 3.11**  
**Average total single premium per enrolled employee, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**For data points and standard errors for this exhibit select here.**

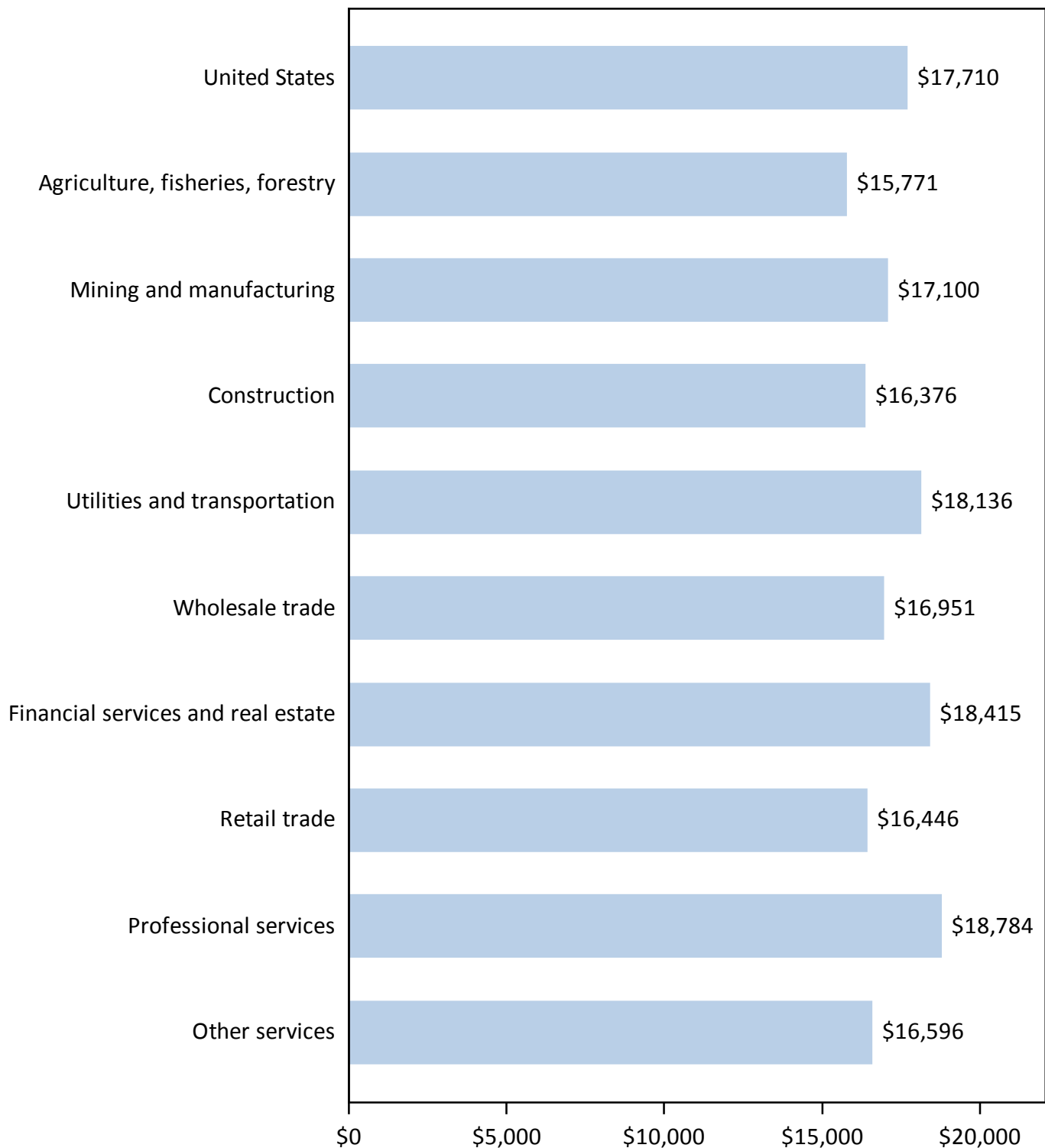
**Exhibit 3.12**  
**Average total employee-plus-one premium per enrolled employee, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**For data points and standard errors for this exhibit select here.**

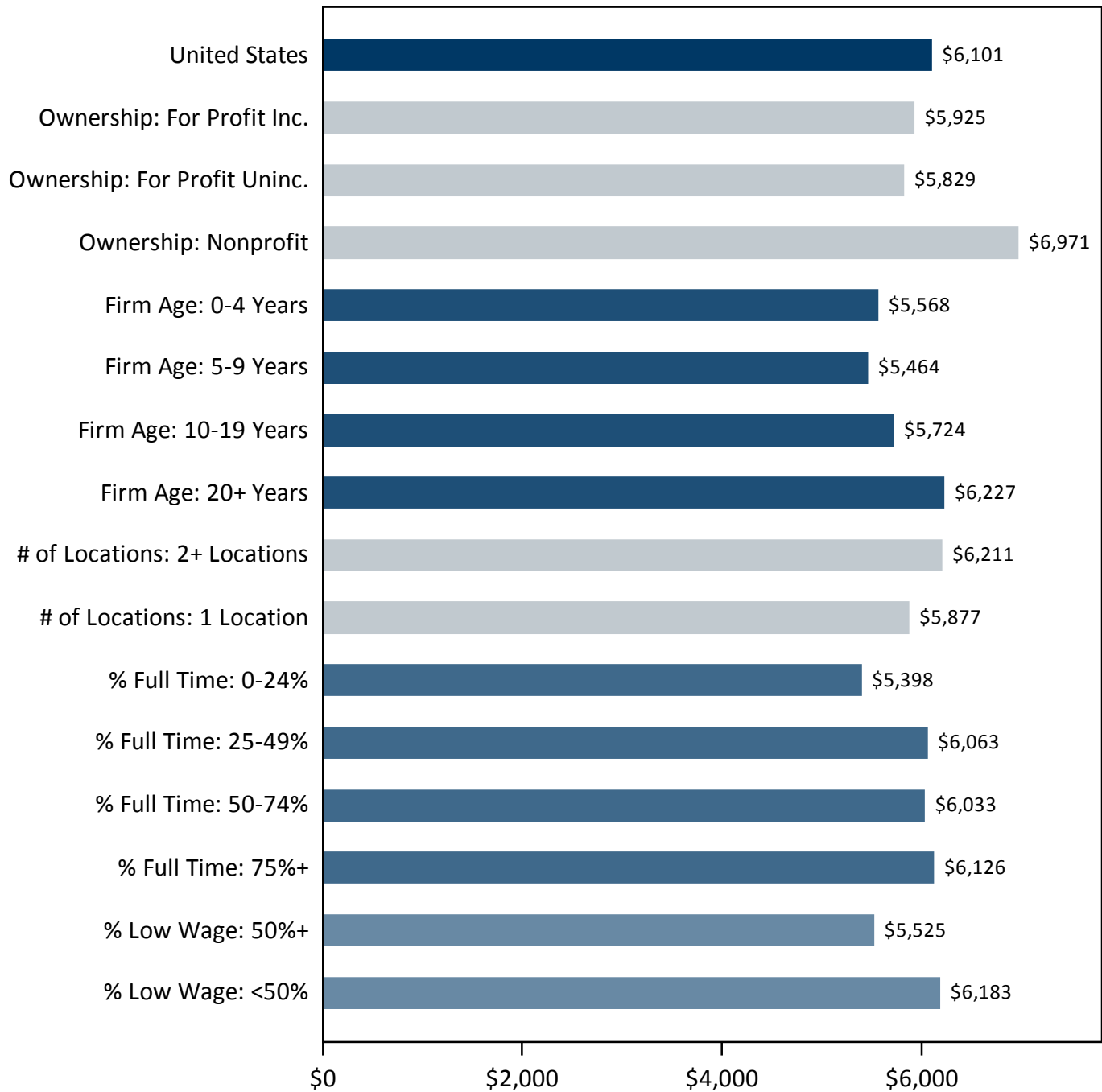
**Exhibit 3.13**

**Average total family premium per enrolled employee, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**For data points and standard errors for this exhibit select here.**

**Exhibit 3.14**  
**Average total single premium per enrolled employee, overall and by selected characteristics, 2016**



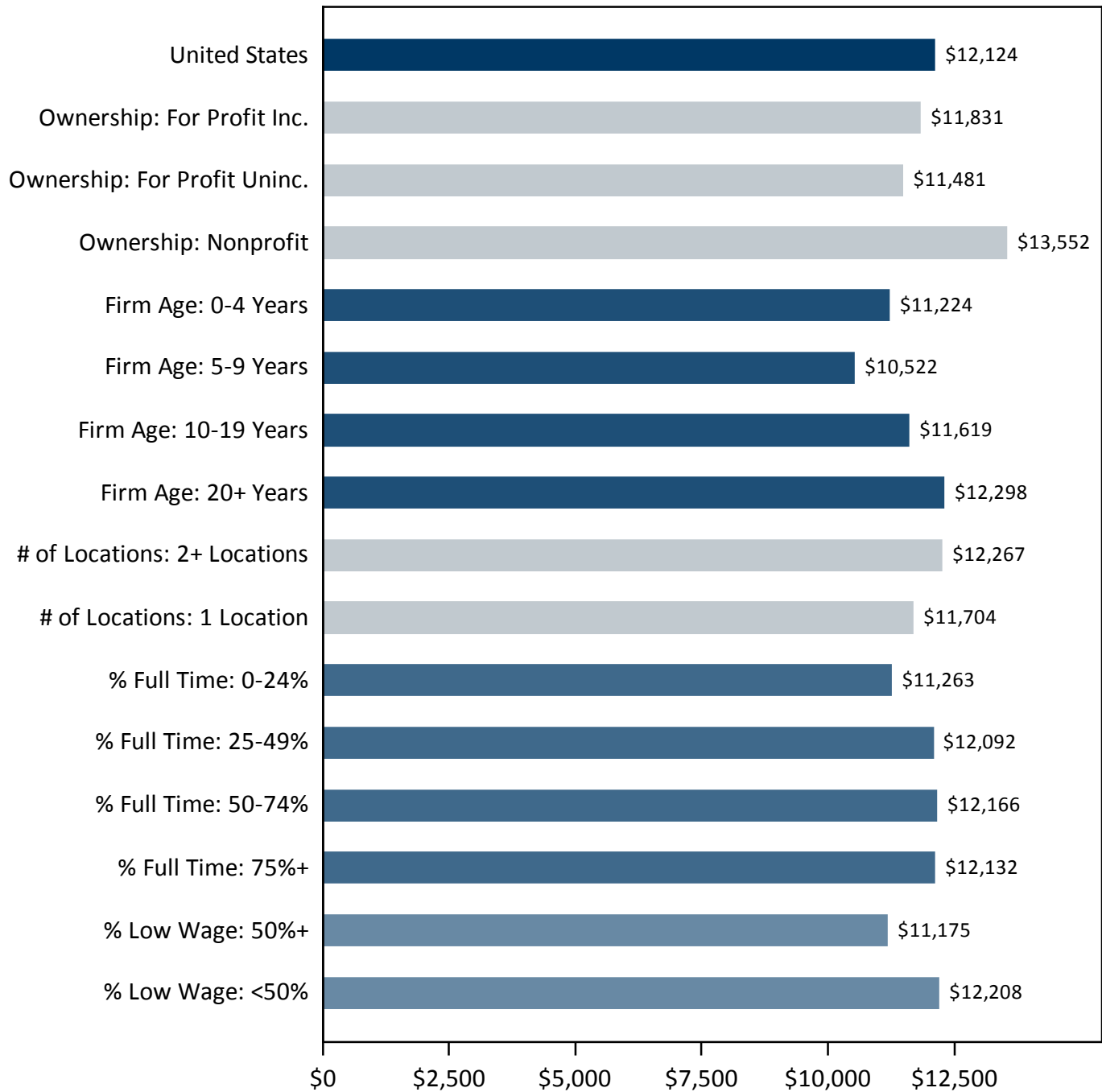
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

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

### Exhibit 3.15

#### Average total employee-plus-one premium per enrolled employee, overall and by selected characteristics, 2016

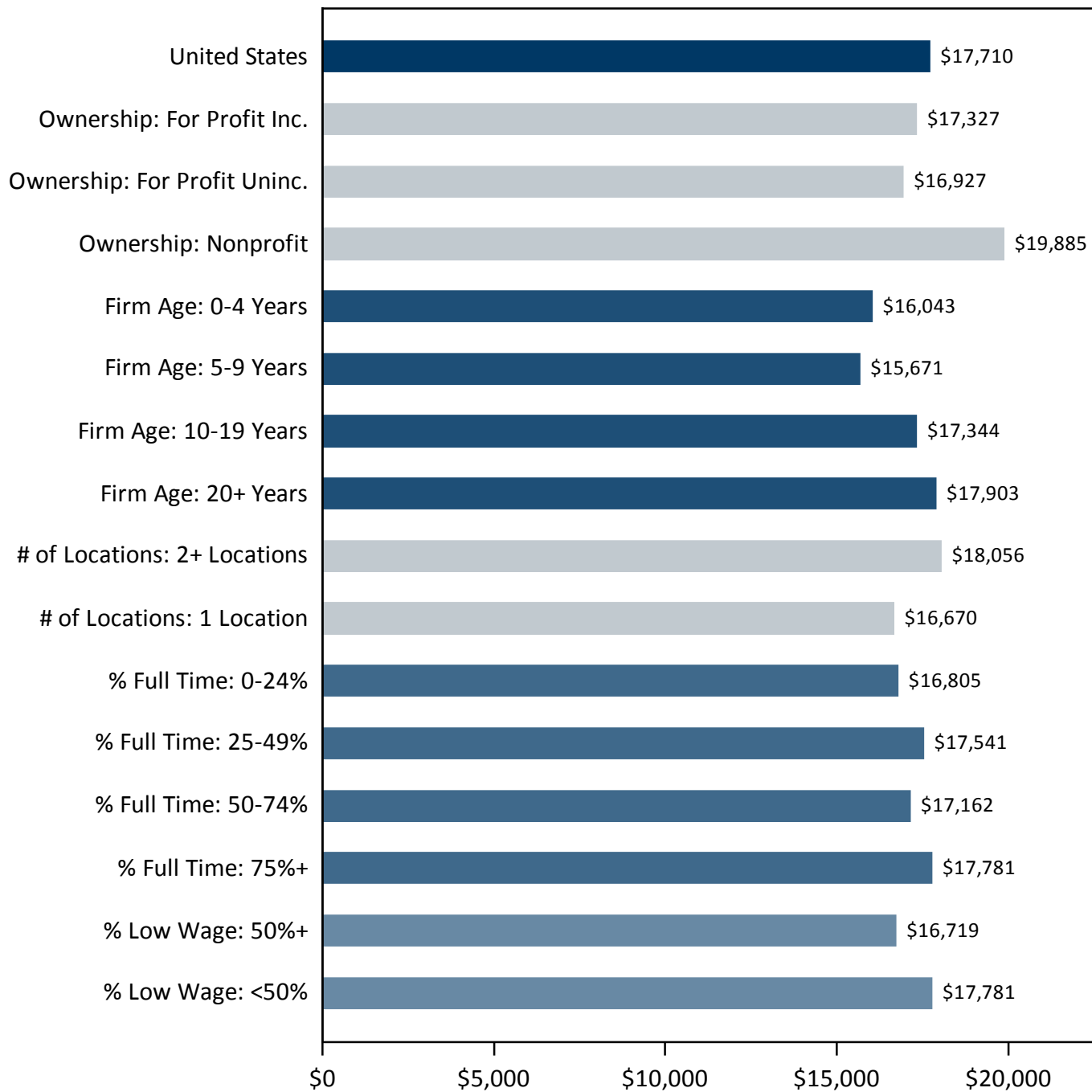


**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

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

**Exhibit 3.16**  
**Average total family premium per enrolled employee, overall and by selected characteristics, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

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

<b>Exhibit 3.17</b>					
<b>Premium distributions for employees enrolled in single, employee-plus-one, and family coverage, overall and by firm size, 2016</b>					
<b>Coverage</b>	<b>Estimate</b>	<b>Total</b>	<b>&lt;50 employees</b>	<b>50-99 employees</b>	<b>100 or more employees</b>
<b>Single</b>	Average (mean)	\$6,101	\$6,070	\$5,743	\$6,146
	10 percentile	\$3,700	\$3,600	\$3,300	\$3,900
	25 percentile	\$4,800	\$4,500	\$4,200	\$5,000
	50 percentile (median)	\$6,000	\$5,700	\$5,500	\$6,000
	75 percentile	\$7,200	\$7,200	\$7,000	\$7,100
	90 percentile	\$8,500	\$9,100	\$8,500	\$8,400
<b>Employee-plus-one</b>	Average (mean)	\$12,124	\$11,833	\$11,389	\$12,225
	10 percentile	\$7,700	\$6,500	\$6,600	\$8,000
	25 percentile	\$9,600	\$8,400	\$8,600	\$9,900
	50 percentile (median)	\$12,000	\$11,000	\$11,000	\$12,000
	75 percentile	\$14,000	\$14,000	\$14,000	\$14,000
	90 percentile	\$17,000	\$18,000	\$17,000	\$17,000
<b>Family</b>	Average (mean)	\$17,710	\$16,471	\$16,214	\$18,000
	10 percentile	\$11,000	\$9,200	\$9,600	\$12,000
	25 percentile	\$14,000	\$12,000	\$12,000	\$15,000
	50 percentile (median)	\$18,000	\$16,000	\$16,000	\$18,000
	75 percentile	\$21,000	\$20,000	\$20,000	\$21,000
	90 percentile	\$24,000	\$24,000	\$23,000	\$24,000
<b>Source:</b> Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016. <b>For data points and standard errors for this exhibit select here.</b>					



# Section 4: Employee and Employer Contributions



## Employee and Employer Premium Contributions

In 2016, enrolled employees paid 21.7 percent of total premiums for single coverage, 27.8 percent for employee-plus-one coverage, and 28.0 percent for family coverage. Average employee contributions in 2016 were \$1,325 (for single coverage), \$3,376 (for employee-plus-one coverage), and \$4,956 (for family coverage), representing increases of 5.6 percent, 4.8 percent, and 5.2 percent, respectively, over 2015 levels.

At the same time, average employer contributions in 2016 increased by 1.4 percent and 2.0 percent for single and employee-plus-one coverage ( $p < 0.10$  for both coverage types), respectively, over 2015 levels. The average employer contribution for family coverage in 2016 was not significantly different from the average contribution in 2015.

The more rapid growth in employee contributions compared with employer contributions between 2015 and 2016 resulted in 0.6 percentage-point and 0.8 percentage-point increases in the percentage of total premiums paid by employees for single and family coverage, respectively ( $p < 0.10$  for both coverage types). The percentage of premiums paid by employees for employee-plus-one coverage in 2016 was not significantly different from the percentage in 2015.

This section examines how employee and employer premium contributions changed between 2003 and 2016, both in nominal dollars and as a percentage of annual per-enrollee premiums. 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, the distribution of employee contributions by firm size is presented.

### ***Employee and Employer Premium Contributions, 2003 to 2016***

- In 2016, enrolled employees paid 21.7 percent of total premiums for single coverage, 27.8 percent for employee-plus-one coverage, and 28.0 percent for family coverage. The employee shares of total premiums for single and family coverage in 2016 increased by 0.6 percentage points and 0.8 percentage points, respectively ( $p < 0.10$  for both coverage types) over 2015 levels. These statistically significant increases are due to more rapid growth in employee contributions compared with employer contributions for single and family coverage between 2015 and 2016 (Exhibits 4.1, 4.3, 4.4, and 4.5).
- 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 2003 to 2016 (Exhibit 4.1).
- Average employee contributions in 2016 were \$1,325 (for single coverage), \$3,376 (for employee-plus-one coverage), and \$4,956 (for family coverage), representing increases of 5.6 percent, 4.8 percent, and 5.2 percent, respectively, over 2015 levels. This finding is consistent with statistically significant annual increases in average employee contributions for each coverage type seen in most years from 2003 to 2015 (Exhibit 4.2).
- Average employer contributions in 2016 for single and employee-plus-one coverage were \$4,776 and \$8,748, respectively, representing increases of 1.4 percent and 2.0 percent ( $p < 0.10$  for both coverage types) over 2015 levels. The average employer contribution for family coverage in 2016 (\$12,754) was not significantly different from the average contribution in 2015. Similar to employee contributions, there were statistically significant annual increases

in average employer contributions for each coverage type in most years from 2003 to 2015 (Exhibits 4.3, 4.4, and 4.5).

- From 2003 to 2016, the percentage of premiums contributed by employees increased by 4.3 percentage points, 4.1 percentage points, and 3.3 percentage points for single, employee-plus-one, and family coverage, respectively. This was because employee contributions increased more rapidly than employer contributions over the entire period for each type of coverage (Exhibits 4.1, 4.3, 4.4, and 4.5).

## ***Employee Premium Contributions by Firm Size, 2003 to 2016***

### **Percentage Contributed for Single Coverage**

- The percentage of single coverage premiums paid by enrolled employees in small firms (fewer than 50 employees) increased by 2.1 percentage points between 2015 (17.9 percent) and 2016 (20.0 percent). This is the first time since 2003 that an annual percentage point change in this estimate for small firm enrollees was statistically significant (Exhibit 4.6).
- The percentage of single coverage premiums paid by employees in medium firms (50 to 99 employees) increased by 2.5 percentage points, from 21.8 percent in 2015 to 24.3 percent in 2016 ( $p < 0.10$ ). There was no statistically significant change in the percentage of single coverage premiums paid by employees in large firms (100 or more employees) between 2015 (21.8 percent) and 2016 (21.9 percent) (Exhibit 4.6).
- In 2016, enrolled employees in small firms (fewer than 50 employees) contributed a lower percentage of single premiums than those in larger firms, and this was true in almost all years between 2003 and 2015. Among enrolled employees in firms with 50 or more employees in 2016, those in medium firms (50 to 99 employees) paid a higher percentage of single premiums than those in large firms (100 or more employees). In most years between 2003 and 2015, there were no significant differences between enrolled employees in medium firms and those in large firms (Exhibit 4.6).
- In 2016, employees with single coverage in the smallest firms (fewer than 10 employees) paid 14.5 percent of their premiums, which was lower than the percentages paid by enrolled employees in larger firms (21.3 percent, 23.8 percent, 22.2 percent, and 21.7 percent in firms with 10 to 24 employees, 25 to 99 employees, 100 to 999 employees, and 1,000 or more employees, respectively) (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 2016, for example, 57.9 percent of employees with single coverage in firms with fewer than 10 employees had no required premium contribution. In contrast, only 13.4 percent and 4.1 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 2015 and 2016, the percentage of enrolled employees with no required employee contribution for single coverage decreased by 2.3 percentage points nationally and by 7.3 percentage points and 4.6 percentage points in firms with 10-24 employees and 25-99 employees, respectively (Exhibit 4.14).

## Percentage Contributed for Dependent Coverage

- In all years between 2003 and 2016, enrolled employees in small firms (fewer than 50 employees) paid either the same 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 2016, employees with employee-plus-one coverage in the smallest firms (fewer than 10 employees) paid a lower percentage of their premium (21.7 percent) than enrollees in the four other firm size categories (30.2 percent, 34.8 percent, and 32.1 percent, and 25.3 percent) in firms with 10 to 24 employees, 25 to 99 employees, 100 to 999 employees, and 1000 or more employees, respectively ( $p < 0.10$  for the difference between the estimates for the smallest and largest firms) (Exhibit 4.12).
- Employees with employee-plus-one coverage in firms with 25 to 99 employees paid 34.8 percent of their premium in 2016, a higher percentage than enrolled employees in the four other firm size categories. Within the large-firm category (100 or more employees), in 2016, employees with employee-plus-one coverage in firms with 100 to 999 employees paid a higher percentage of their premiums than those with 1,000 or more employees (32.1 percent vs. 25.3 percent) (Exhibit 4.12).
- In 2016, employees with family coverage in the smallest firms paid a lower percentage of their premium (21.4 percent) than enrollees in the four other firm size categories (26.1 percent, 35.0 percent, 32.5 percent, and 26.2 percent in firms with 10 to 24 employees, 25 to 99 employees, 100 to 999 employees, and 1000 or more employees, respectively) (Exhibit 4.12).
- Employees with family coverage in firms with 25 to 99 employees paid 35.0 percent of their premium in 2016, a higher percentage than enrolled employees in firms with fewer than 10, 10 to 24, and 1,000 or more employees. Within the large-firm category (100 or more employees), those in firms with 100 to 999 employees paid a higher percentage of their family premium in 2016 than those with 1,000 or more employees (32.5 percent vs. 26.2 percent) (Exhibit 4.12).
- In 2016, the percentage of enrolled employees with no required premium contribution for employee-plus-one and family coverage was higher for employees in firms with fewer than 10 employees (48.2 percent and 52.9 percent, respectively) and with 10 to 24 employees (21.8 percent and 35.8 percent, respectively) than in firms with 25 to 99 employees (10.1 percent and 18.6 percent, respectively), 100 to 999 employees (5.0 percent and 5.8 percent, respectively), and 1,000 or more employees (4.6 percent and 2.7 percent, respectively) (Exhibits 4.15 and 4.16).

## Employee Contributions for Single Coverage (Dollar Amount)

- In 2016, enrolled employees in small firms contributed a smaller dollar amount for their single coverage (\$1,216) than employees in larger firms (\$1,393 in firms with 50 to 99 employees and \$1,343 in firms with 100 or more employees) (Exhibit 4.7).
- Enrolled employees in firms with fewer than 10 employees contributed a smaller dollar amount for their single coverage (\$919) in 2016 than those in the four other firm size categories

(\$1,302, \$1,375, \$1,348, and \$1,341 in firms with 10 to 24 employees, 25 to 99 employees, 100 to 999 employees, and 1,000 or more employees, respectively) (Exhibit 4.13).

## Employee Contributions for Dependent Coverage (Dollar Amount)

- In 2016, employees with employee-plus-one coverage in firms with 50 to 99 employees had higher employee premium contributions (\$4,077) than employees in firms with fewer than 50 employees (\$3,479) and with 1,000 or more employees (\$3,307) (Exhibit 4.9).
- In the more detailed firm size categories, the amount paid by employees with employee-plus-one coverage in the smallest firms (fewer than 10 employees, \$2,637) was lower than that for enrolled employees in the four other firm size categories ( $p < 0.10$  for the comparison with the largest firms). The amount paid by employees with employee-plus-one coverage in the largest firms (1,000 or more employees) was lower than for enrolled employees in firms with 10 to 24, 25 to 99, and 100 to 999 employees (Exhibit 4.13).
- Among enrolled employees with family coverage in small, medium, and large firms, employees with family coverage in firms with 50 to 99 employees contributed the highest dollar amount (\$5,821), and employees with family coverage in firms with fewer than 50 contributed the lowest dollar amount (\$4,510) in 2016. Employees with family coverage in firms with 100 or more employees contributed \$4,971 (Exhibit 4.11).
- In the more detailed firm size categories, employees with family coverage in firms with 25 to 99 employees and 100 to 999 employees contributed a higher dollar amount in 2016 (\$5,706 and \$5,726, respectively) than employees with family coverage in the three other firm size categories (fewer than 10 employees, 10 to 24 employees, and 1,000 or more employees) (Exhibit 4.13).

## Trends in Employee Contributions (Dollar Amount)

- Between 2015 and 2016, single employee premium contributions in small firms (fewer than 50 employees) and medium firms (50 to 99 employees) increased by 14.2 percent (from \$1,065 to \$1,216) and 13.3 percent (from \$1,230 to \$1,393,  $p < 0.10$ ), respectively (Exhibits 4.7, 4.9, and 4.11).
- At large firms (100 or more employees), employee premium contributions for employee-plus-one and family coverage increased by 5.2 percent (from \$3,144 to \$3,307) and 6.4 percent (from \$4,671 to \$4,971), respectively, between 2015 and 2016. (Exhibits 4.9 and 4.11).
- Comparing contributions in 2016 to those in 2003, the aggregate growth rate of employee premium contributions for single coverage over this entire period did not vary by firm size. 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) or medium firms (50 to 99 employees) (121 percent vs. 94.7 percent and 88.5 percent, respectively). Similarly, employee premium contributions for family coverage increased more rapidly in large firms than in small firms (126.6 percent vs. 80.8 percent) (Exhibits 4.7, 4.9, and 4.11).
- The more rapid increase in family-coverage employee contributions at large firms (100 or more employees) than at small firms (fewer than 50 employees) from 2003 to 2016 was due to a combination of a more rapid increase in total family premiums at large firms over this period and a greater percentage point increase in the share of premiums paid by employees

(3.8 percentage points vs. 0.6 percentage points) (Exhibits 3.6 and 4.10). In contrast, the percentage point increase in the share of employee-plus-one premiums paid by employees did not vary significantly by firm size over this period and the more rapid increase in employee-plus-one enrollee contributions at large firms was primarily due to a greater increase in premiums at large firms compared with smaller firms (Exhibits 3.5 and 4.8).

### ***Employee Premium Contributions by State, 2016***

- The percentage of premiums paid by enrollees with single coverage varied by State in 2016, from 12.0 percent in Hawaii to 27.3 percent in Alabama. States where the enrollee's share of single-coverage premiums was higher than the national average of 21.7 percent were Alabama, Florida, Illinois, Maryland, Massachusetts, New Hampshire, New Jersey, and Rhode Island. States where the enrollee's share of single-coverage premiums was lower than the national average were Alaska, California, Hawaii, Idaho, North Dakota, Oregon, Utah, Washington, West Virginia, and Wyoming (Exhibit 4.17).
- The percentage of premiums paid by enrollees with employee-plus-one coverage also varied by State, from 19.2 percent in Alaska to 35.2 percent in Missouri. States where the enrollee's share of employee-plus-one premiums was higher than the national average of 27.8 percent were Arkansas, Florida, Louisiana, Mississippi, Missouri, North Carolina, South Dakota, and Texas. States where the enrollee's share of employee-plus-one premiums was lower than the national average were Alaska, Indiana, Michigan, Ohio, Pennsylvania, Utah, West Virginia, and Wisconsin (Exhibit 4.18).
- In 2016, the percentage of premiums paid by family-coverage enrollees varied by State, from 20.1 percent in Michigan to 36.1 percent in Missouri. States where the enrollee's share of family-coverage premiums was higher than the national average of 28.0 percent were Arkansas, Florida, Louisiana, Mississippi, Missouri, New Jersey, South Dakota, Texas, and Virginia. States where the enrollee's share was lower than the national average were Alaska, Indiana, Michigan, New York, Ohio, Pennsylvania, Utah, West Virginia, and Wisconsin (Exhibit 4.19).
- The dollar amount of average single-coverage employee contributions also varied by State, from \$703 in Hawaii to \$1,745 in New Jersey. States with employee premium contributions for single coverage that exceeded the national average of \$1,325 were Alabama, District of Columbia, Florida, Illinois, Maryland, Massachusetts, New Hampshire, New Jersey, Rhode Island, and Virginia. States with employee premium contributions that were smaller than the national average were California, Hawaii, Idaho, North Carolina, North Dakota, Oklahoma, Oregon, South Dakota, Texas, Utah, and Washington (Exhibit 4.20).
- The dollar amount of average employee contributions for employee-plus-one coverage varied by State, from \$2,647 in Utah to \$4,179 in Florida. States with employee premium contributions for employee-plus-one coverage that exceeded the national average of \$3,376 were Florida, Illinois, Massachusetts, Missouri, and Texas. States with employee contributions for employee plus-one coverage that were smaller than the national average were Alaska, Indiana, Iowa, Michigan, Minnesota, Nevada, Ohio, Utah, and West Virginia (Exhibit 4.21).
- In 2016, the dollar amount of average family-coverage employee contributions varied by State, from \$3,439 in Michigan to \$6,297 in Florida. States with employee contributions for family coverage that exceeded the national average of \$4,956 were District of Columbia, Florida, Georgia, Louisiana, Maryland, Missouri, New Jersey, Texas, and Virginia. States

with employee contributions for family coverage that were smaller than the national average were Hawaii, Indiana, Iowa, Michigan, Ohio, Oregon, Utah, West Virginia, and Wisconsin (Exhibit 4.22).

### ***Employee Premium Contributions by Industry, 2016***

- In 2016, enrollees working in retail trade paid a higher percentage of their single premiums (28.0 percent) than enrollees in any other industry group (Exhibit 4.23).
- Enrollees working in construction and retail trade paid a higher percentage of employee-plus-one premiums (36.7 percent and 34.1 percent, respectively) than enrollees in any other industry group (Exhibit 4.24).
- Enrollees working in retail trade and other services paid a higher percentage of family premiums (35.7 percent and 32.9 percent, respectively) than enrollees in any other industry group except construction (31.7 percent) (Exhibit 4.25).

### ***Employee Premium Contributions by Selected Employer Characteristics, 2016***

- In 2016, enrollees working for nonprofit employers contributed a lower percentage of premiums for single and employee-plus-one coverage (16.5 percent and 24.3 percent, respectively) than enrollees in for-profit incorporated employers (23.0 percent and 28.6 percent, respectively) and for-profit unincorporated employers (23.7 percent and 30.0 percent, respectively) (Exhibits 4.26 and 4.27).
- The percentage of family premiums paid by enrollees was highest among for-profit unincorporated employers (31.4 percent) and lowest among nonprofit employers (24.4 percent). The percentage of family premiums paid by enrollees with for-profit incorporated employers was 28.4 percent (Exhibit 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 27.3 percent, respectively) than enrolled employees in the other three firm age categories (0-4, 5-9, and 10-19 years) (Exhibits 4.27 and 4.28).
- Employees in firms with two or more locations contributed a lower percentage for employee-plus-one and family coverage than those with a single location (Exhibits 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 50 percent of employees worked full time (Exhibit 4.26).

### ***Employee Premium Contributions in Predominantly Low Wage vs. Higher Wage Establishments, 2004 to 2016***

- In 2016, enrollees in establishments that were predominantly low wage (50 percent or more of employees earned less than \$11.50 per hour) contributed a larger percentage of their premiums than those in higher wage establishments. Employees in low-wage establishments contributed 26.2 percent, 34.4 percent, and 35.8 percent of their premiums for single, employee-plus-one, and family coverage, respectively, compared with 21.1 percent, 27.3 percent, and 27.5 percent in higher wage establishments (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 2016 (Exhibits 4.29, 4.31, and 4.33).
- The percentage of single and family premiums contributed by employees in higher wage establishments increased by 0.7 percentage points and 0.8 percentage points ( $p < 0.10$ ), respectively, between 2015 and 2016. There were no statistically significant changes for any coverage type in low-wage establishments in this period. (Exhibits 4.29, 4.31, and 4.33).
- Comparing 2004 and 2016, 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. The percentage of single and employee-plus-one premiums paid by employees increased by 3.4 percentage points and 5.7 percentage points, respectively, in low-wage establishments and by 4.0 percentage points and 4.6 percentage points, respectively, in higher wage establishments over this entire period. 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 (7.9 percentage points) than in higher wage establishments (3.7 percentage points) (Exhibits 4.29, 4.31, and 4.33).
- In 2016, enrollees in low-wage establishments had higher premium contributions than their counterparts in higher wage establishments. Average employee contributions were \$1,450, \$3,849, and \$5,978 for single, employee-plus-one, and family coverage, respectively, in predominantly low-wage establishments and \$1,307, \$3,335, and \$4,882 in higher wage establishments (Exhibits 4.30, 4.32, and 4.34).

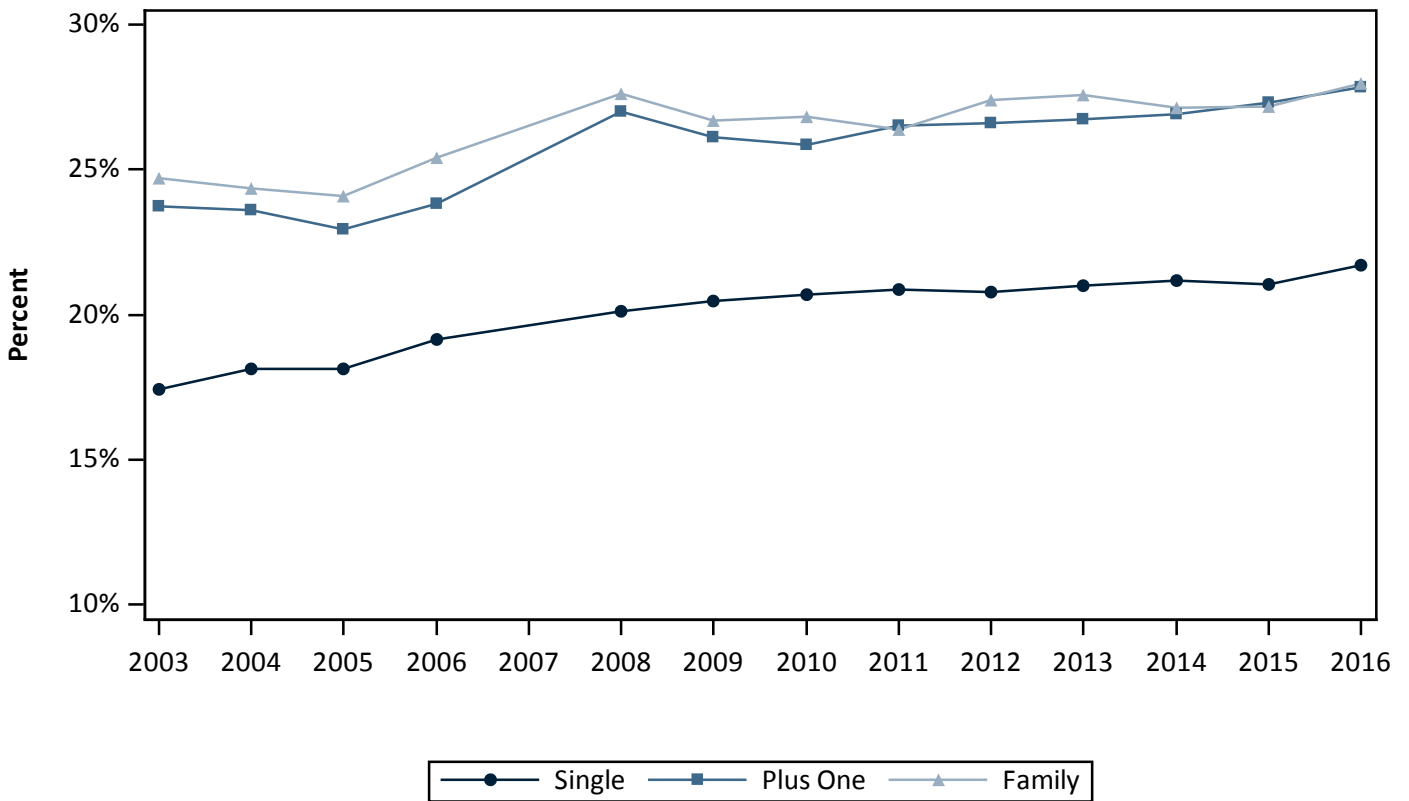
### ***Distributions of Employee Contributions, Overall and by Firm Size, 2016***

- In 2016, the average employee premium contribution was about 10 to 13 percent higher than the median (50th percentile) employee premium contribution for all three types of coverage: single coverage (\$1,325 vs. \$1,200), employee-plus-one coverage (\$3,376 vs. \$3,000), and family coverage (\$4,956 vs. \$4,400) (Exhibit 4.35).
- In 2016, 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 (\$2,600 vs. \$0), employee-plus-one coverage (\$6,200 vs. \$750), and family coverage (\$9,500 vs. \$890) (Exhibit 4.35).
- In 2016, enrolled employees in firms with fewer than 50 employees had lower required contributions for all coverage types at the 10<sup>th</sup> and 25<sup>th</sup> percentiles of the distribution than enrolled employees in firms with 100 or more employees (Exhibit 4.35).
- Enrolled employees in smaller firms (fewer than 50 employees and 50 to 99 employees) had no required employee contribution at the 10<sup>th</sup> 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 25<sup>th</sup> percentile for single and family coverage (Exhibit 4.35).
- Employee premium contributions for all coverage types were lower at the 25<sup>th</sup> percentile for enrollees in firms with fewer than 50 employees than for enrollees in firms with 50 to 99 employees and 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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Coverage	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
Single	17.4%	18.1%	18.1%	19.1%	20.1%	20.5%	20.7%	20.9%	20.8%	21.0%	21.2%	21.1%	21.7%
Plus One	23.7%	23.6%	22.9%	23.8%	27.0%	26.1%	25.8%	26.5%	26.6%	26.7%	26.9%	27.3%	27.8%
Family	24.7%	24.4%	24.1%	25.4%	27.6%	26.7%	26.8%	26.4%	27.4%	27.6%	27.1%	27.2%	28.0%

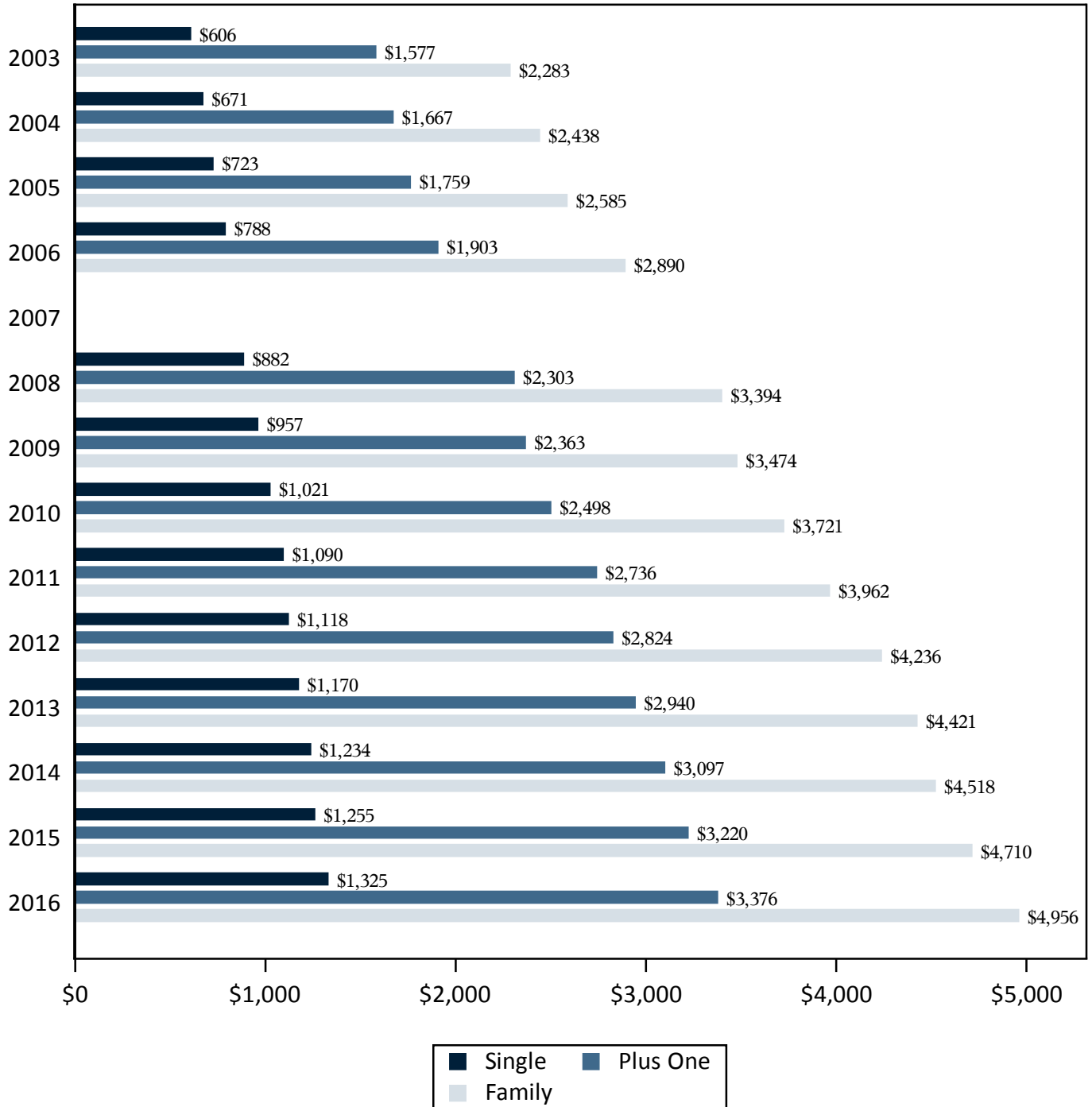
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016



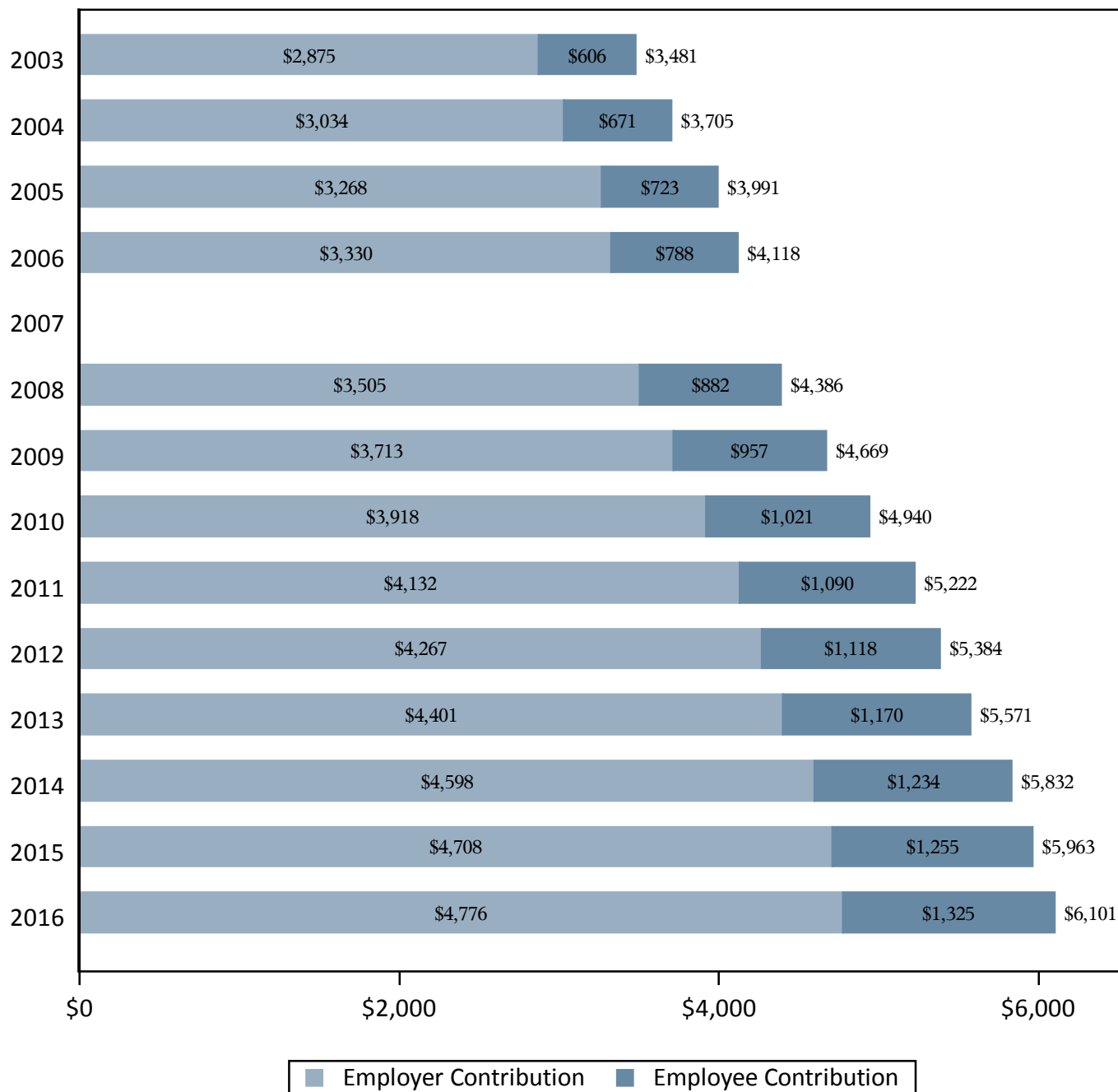
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016



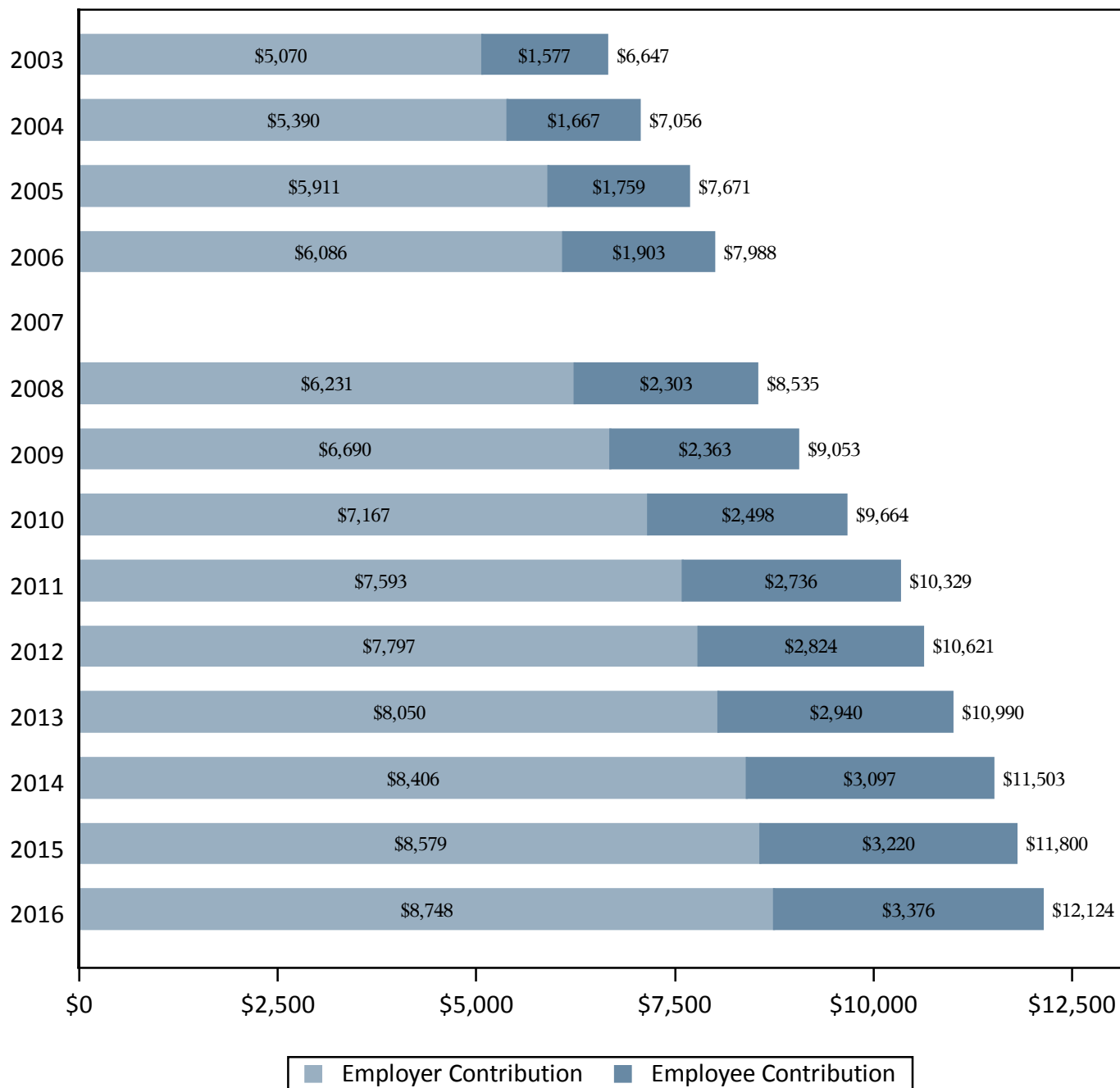
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016



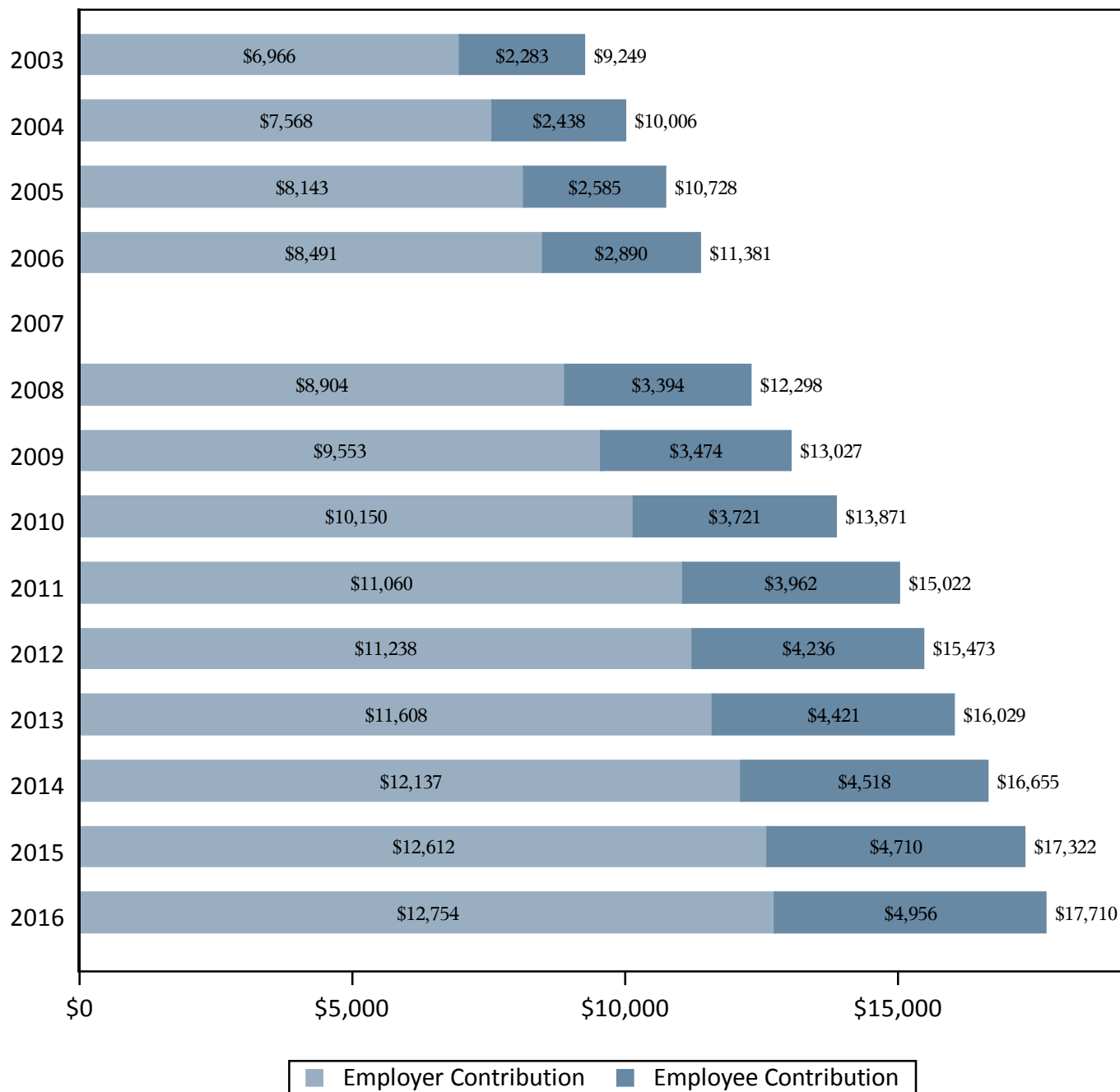
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016



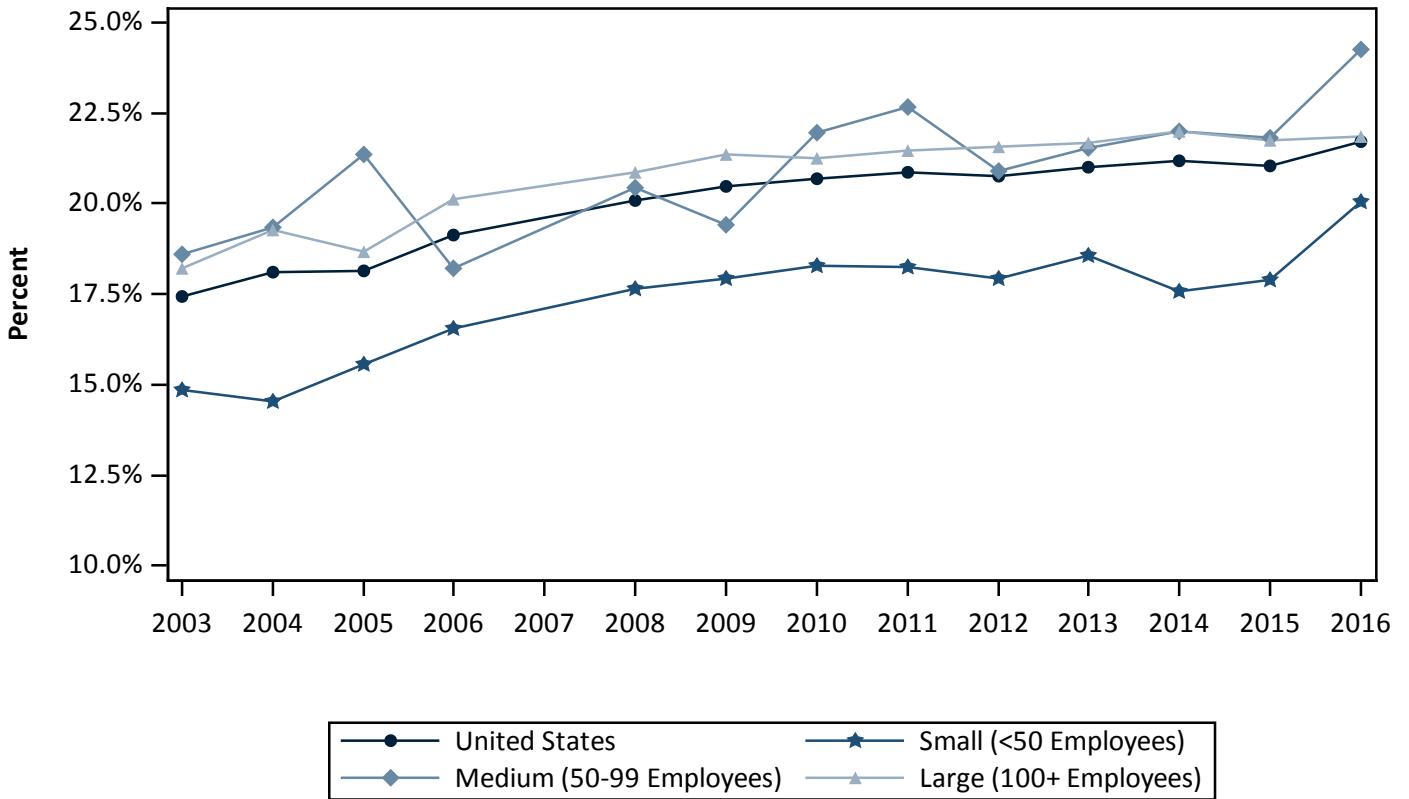
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



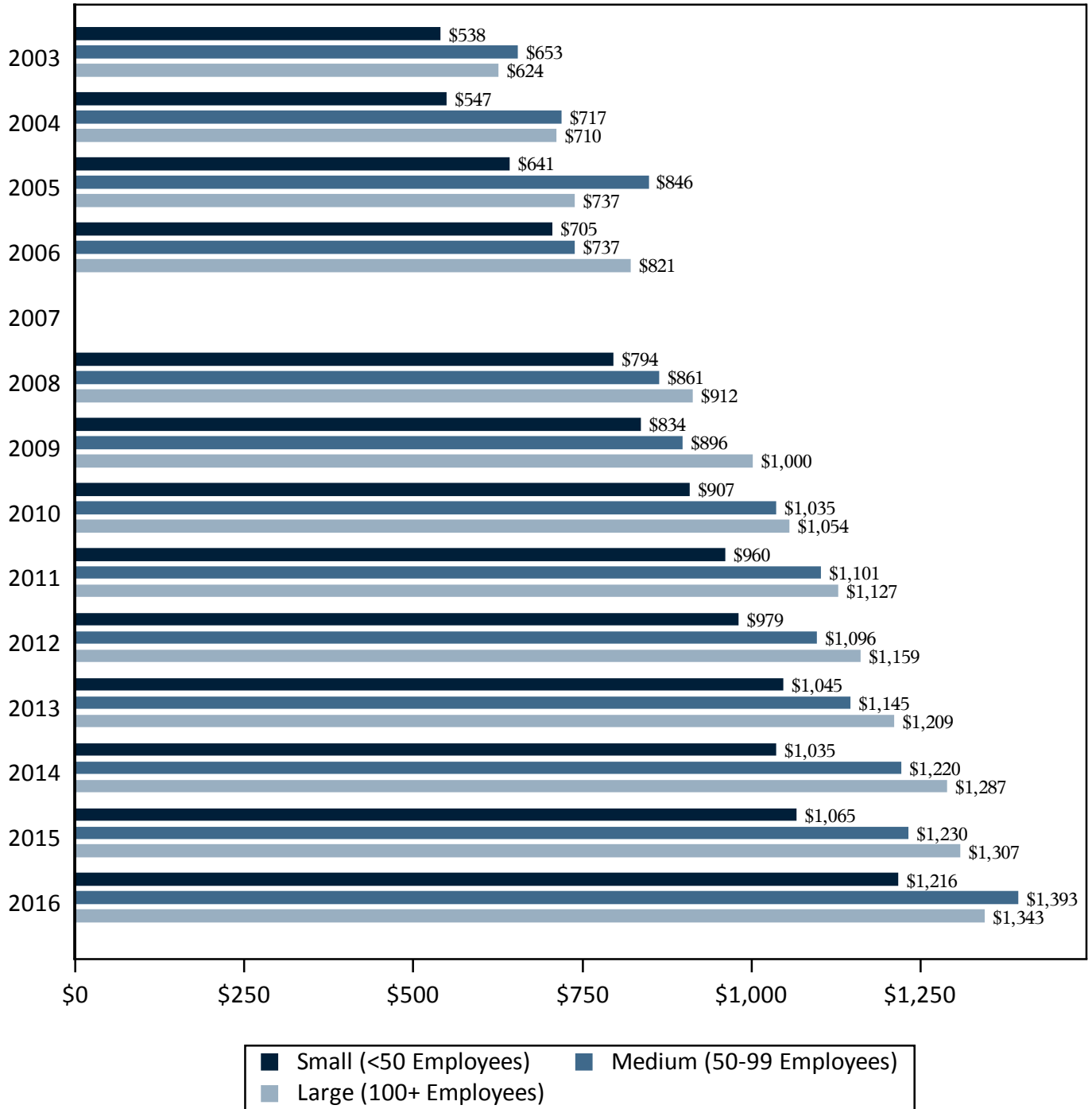
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

<b>Data for Exhibit 4.6</b>													
<b>Average percentage of premium contributed by employees for single coverage, by firm size, 2003-2016</b>													
<b>Number of Employees</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>	<b>2016</b>
U.S.	17.4%	18.1%	18.1%	19.1%	20.1%	20.5%	20.7%	20.9%	20.8%	21.0%	21.2%	21.1%	21.7%
<50	14.9%	14.5%	15.5%	16.5%	17.6%	17.9%	18.3%	18.3%	17.9%	18.6%	17.6%	17.9%	20.0%
50-99	18.6%	19.3%	21.4%	18.2%	20.4%	19.4%	22.0%	22.7%	20.9%	21.5%	22.0%	21.8%	24.3%
100+	18.2%	19.3%	18.7%	20.1%	20.9%	21.4%	21.3%	21.5%	21.6%	21.7%	22.0%	21.8%	21.9%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**



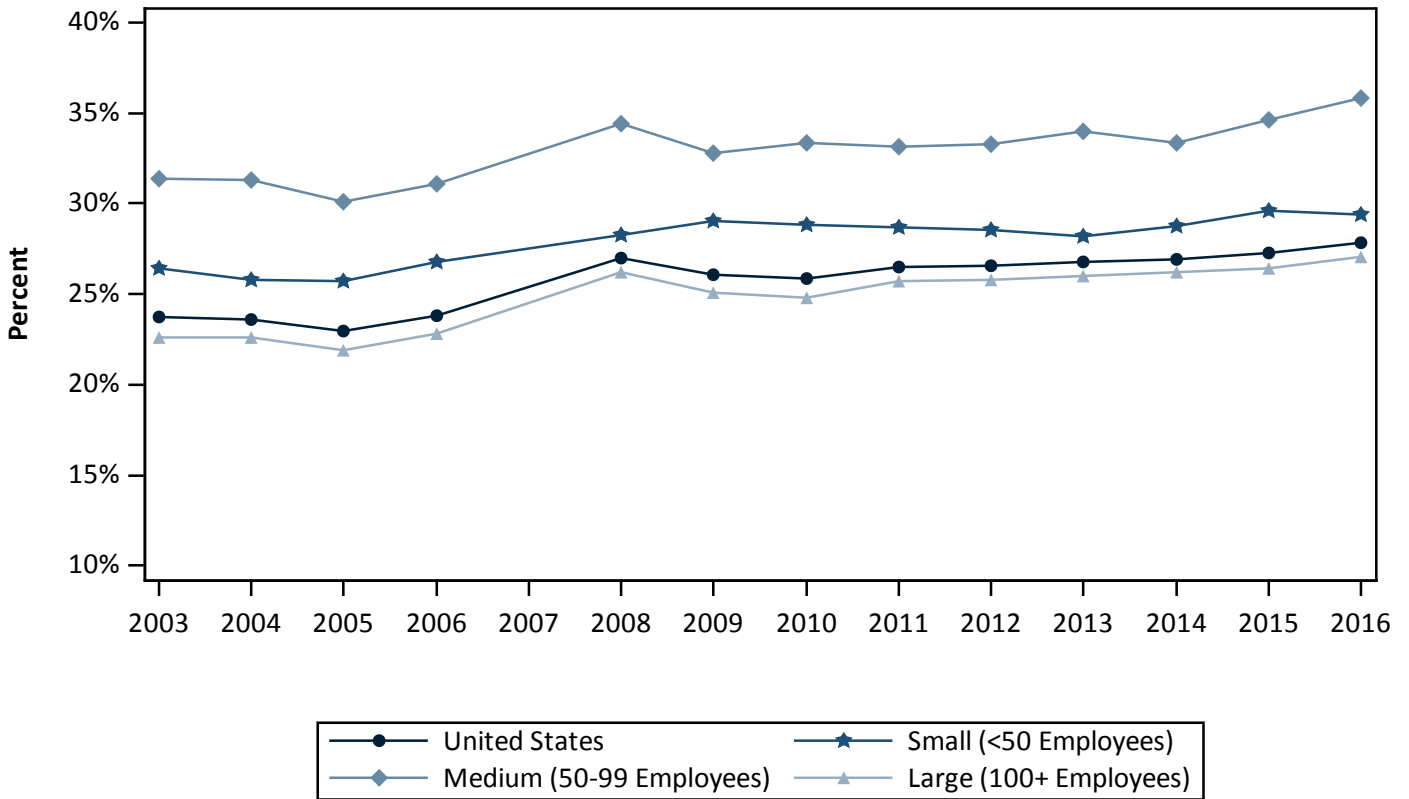
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	23.7%	23.6%	22.9%	23.8%	27.0%	26.1%	25.8%	26.5%	26.6%	26.7%	26.9%	27.3%	27.8%
<50	26.4%	25.8%	25.7%	26.7%	28.3%	29.0%	28.8%	28.7%	28.5%	28.2%	28.8%	29.6%	29.4%
50-99	31.3%	31.3%	30.1%	31.1%	34.4%	32.8%	33.3%	33.2%	33.3%	34.0%	33.4%	34.6%	35.8%
100+	22.6%	22.6%	21.9%	22.8%	26.2%	25.1%	24.8%	25.7%	25.8%	26.0%	26.2%	26.4%	27.0%

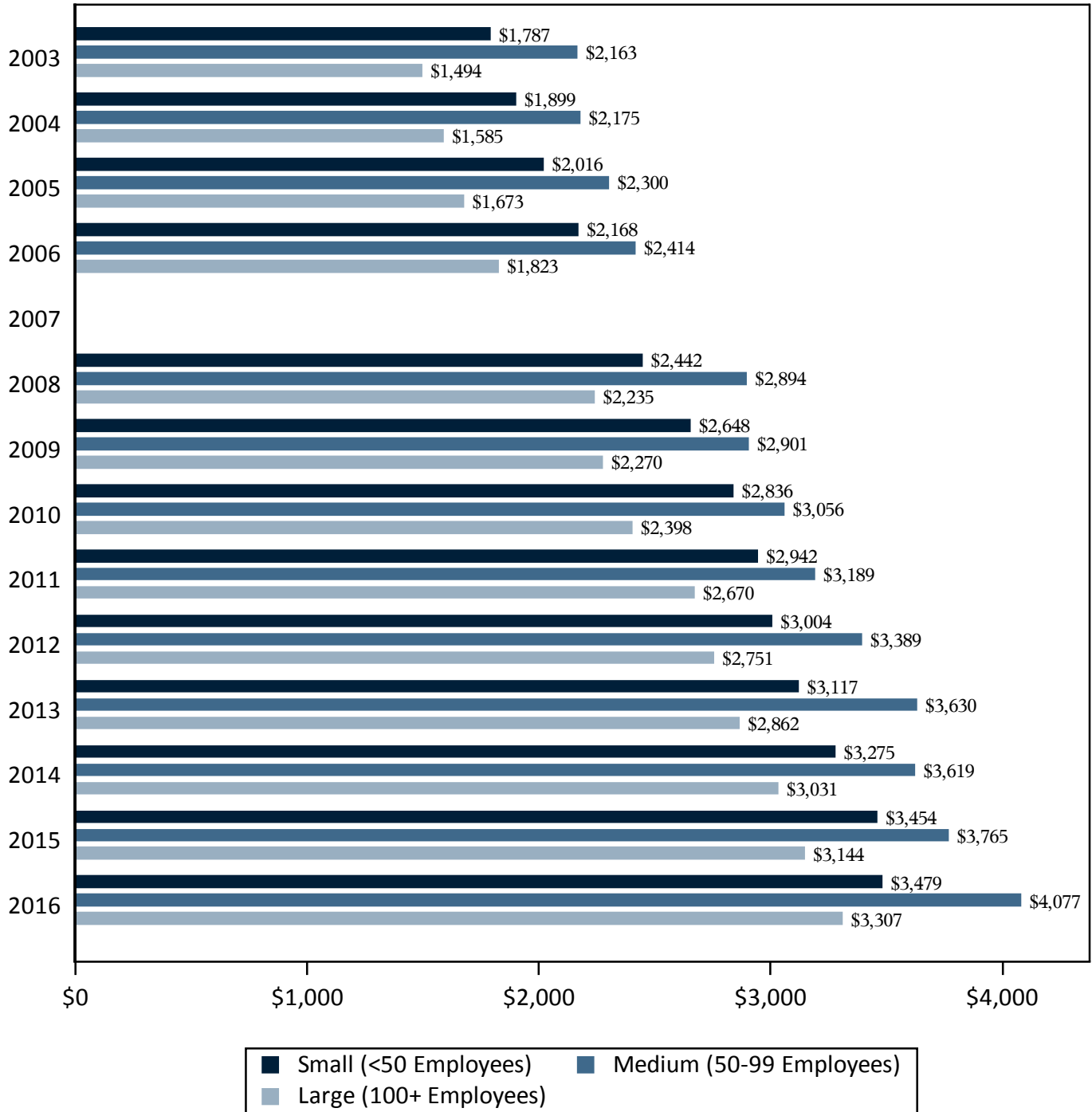
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

**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, 2003-2016**



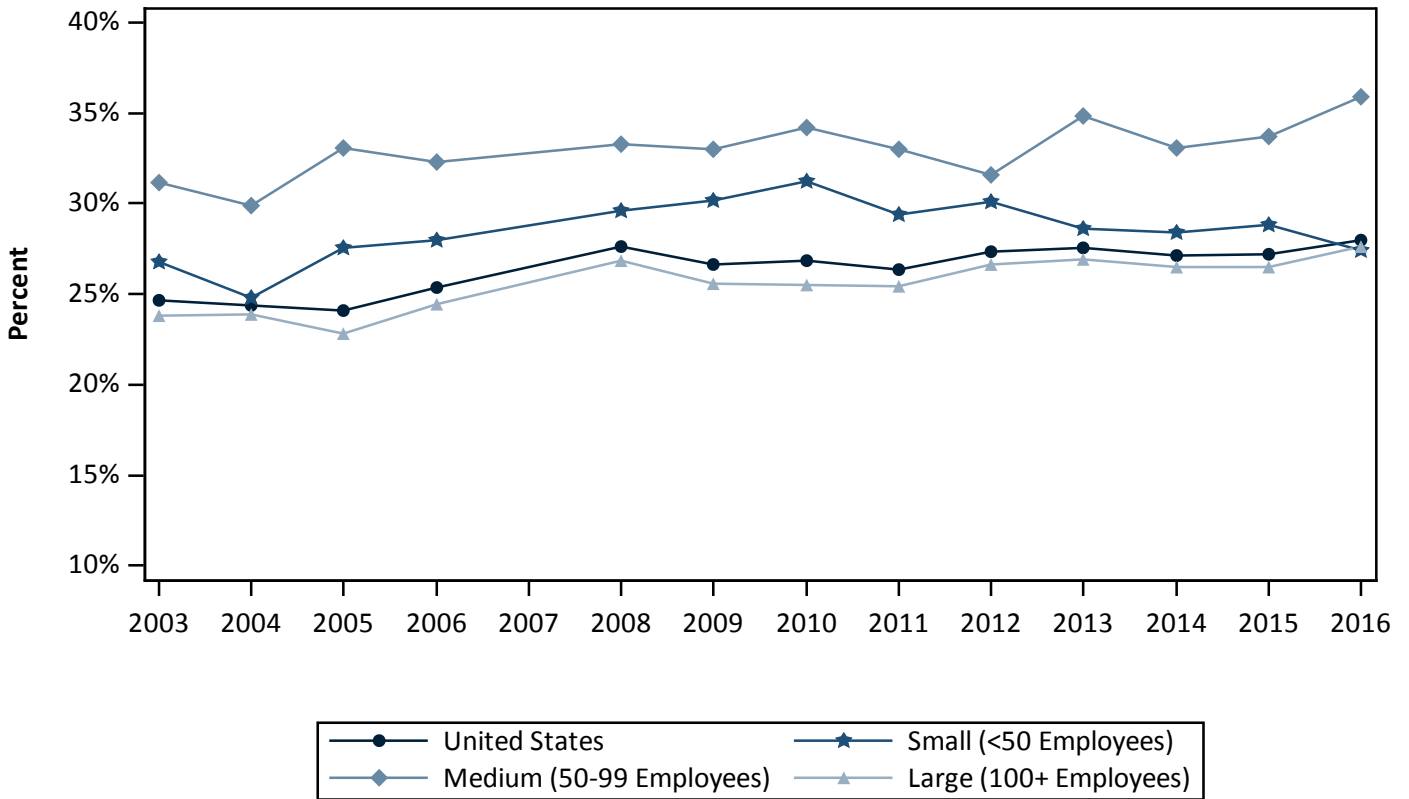
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

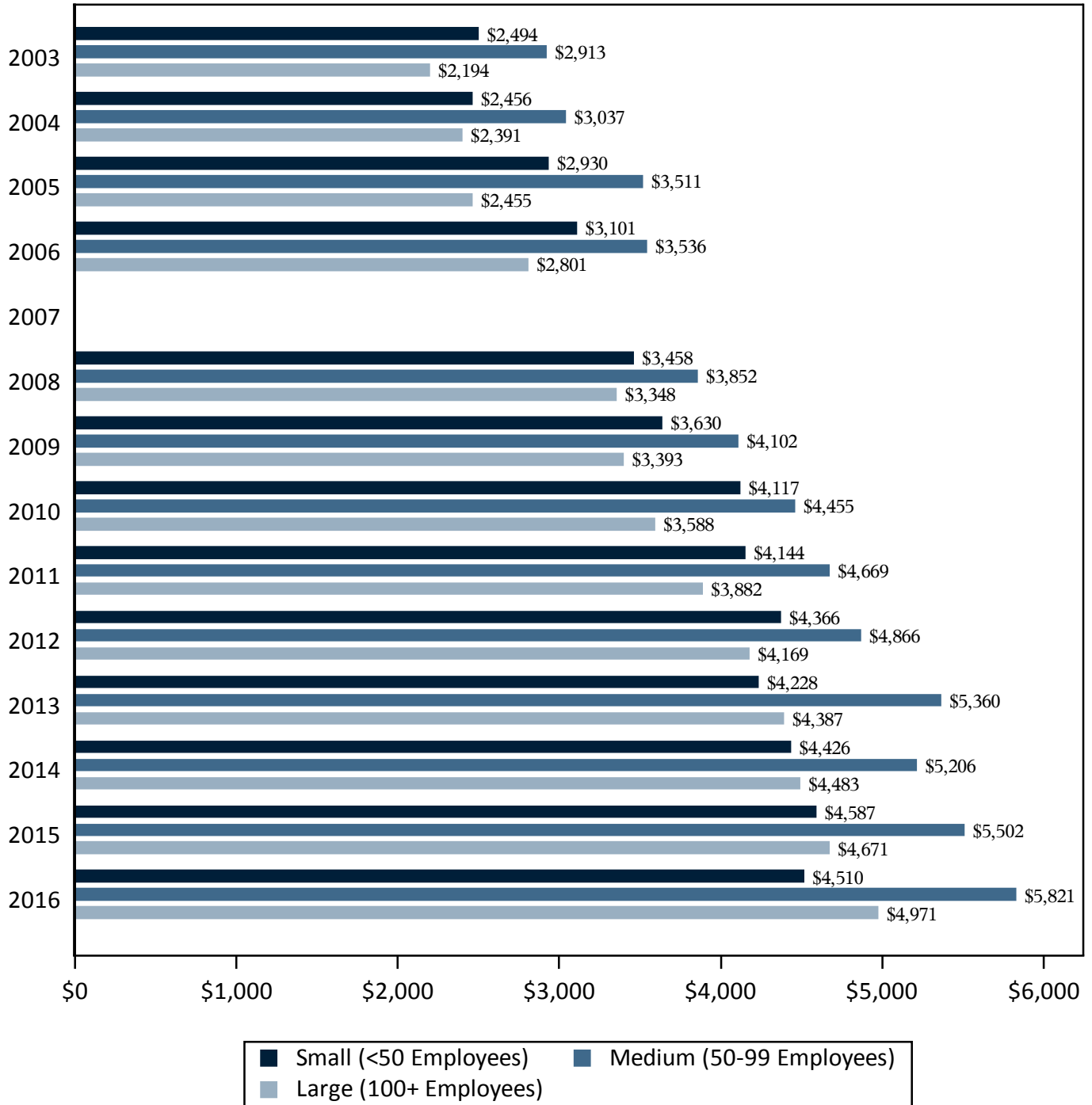
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	24.7%	24.4%	24.1%	25.4%	27.6%	26.7%	26.8%	26.4%	27.4%	27.6%	27.1%	27.2%	28.0%
<50	26.8%	24.8%	27.6%	28.0%	29.6%	30.1%	31.3%	29.4%	30.1%	28.6%	28.4%	28.8%	27.4%
50-99	31.1%	29.9%	33.1%	32.3%	33.3%	33.0%	34.2%	33.0%	31.6%	34.9%	33.1%	33.7%	35.9%
100+	23.8%	23.9%	22.8%	24.4%	26.9%	25.6%	25.5%	25.5%	26.7%	26.9%	26.5%	26.5%	27.6%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

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

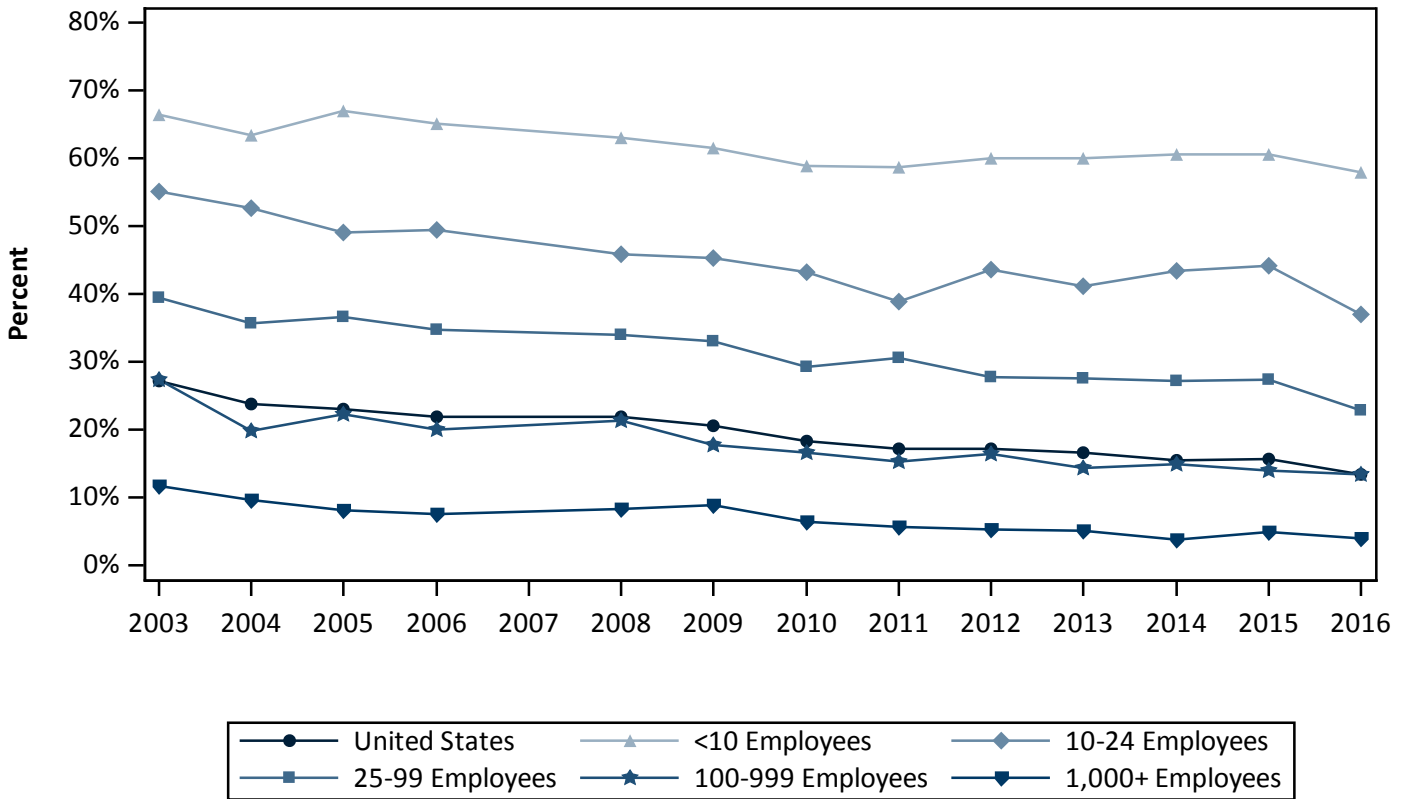
**For data points and standard errors for this exhibit select [here](#).**

<b>Exhibit 4.12</b>			
<b>Average percentage of premium contributed by employees for single, employee-plus-one, and family coverage, by firm size, 2016</b>			
<b>Number of Employees</b>	<b>Single</b>	<b>Employee Plus One</b>	<b>Family</b>
<b>United States</b>	21.7%	27.8%	28.0%
<b>Firm size in 3 categories</b>			
<b>&lt;50</b>	20.0%	29.4%	27.4%
<b>50-99</b>	24.3%	35.8%	35.9%
<b>100+</b>	21.9%	27.0%	27.6%
<b>Firm size in 5 categories</b>			
<b>&lt;10</b>	14.5%	21.7%	21.4%
<b>10-24</b>	21.3%	30.2%	26.1%
<b>25-99</b>	23.8%	34.8%	35.0%
<b>100-999</b>	22.2%	32.1%	32.5%
<b>1,000+</b>	21.7%	25.3%	26.2%
<b>Source:</b> Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.			
<b>For data points and standard errors for this exhibit select here.</b>			

<b>Exhibit 4.13</b>			
<b>Average premium (in dollars) contributed by employees for single, employee-plus-one, and family coverage, by firm size, 2016</b>			
<b>Number of Employees</b>	<b>Single</b>	<b>Employee-Plus-One</b>	<b>Family</b>
<b>United States</b>	\$1,325	\$3,376	\$4,956
<b>Firm size in 3 categories</b>			
<b>&lt;50</b>	\$1,216	\$3,479	\$4,510
<b>50-99</b>	\$1,393	\$4,077	\$5,821
<b>100+</b>	\$1,343	\$3,307	\$4,971
<b>Firm size in 5 categories</b>			
<b>&lt;10</b>	\$919	\$2,637	\$3,452
<b>10-24</b>	\$1,302	\$3,611	\$4,371
<b>25-99</b>	\$1,375	\$3,986	\$5,706
<b>100-999</b>	\$1,348	\$3,942	\$5,726
<b>1,000+</b>	\$1,341	\$3,087	\$4,744
<b>Source:</b> Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.			
<b>For data points and standard errors for this exhibit select here.</b>			

**Exhibit 4.14**

**Percentage of single coverage enrollees with no employee premium contribution, overall and by detailed firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	27.3%	23.7%	23.1%	21.9%	22.0%	20.6%	18.3%	17.3%	17.1%	16.6%	15.6%	15.8%	13.5%
<10	66.4%	63.4%	67.0%	65.1%	63.0%	61.4%	58.8%	58.6%	60.0%	59.9%	60.6%	60.5%	57.9%
10-24	55.1%	52.7%	49.1%	49.4%	46.0%	45.4%	43.3%	38.9%	43.5%	41.2%	43.5%	44.2%	36.9%
25-99	39.4%	35.7%	36.7%	34.7%	34.0%	33.1%	29.2%	30.6%	27.7%	27.6%	27.2%	27.5%	22.9%
100-999	27.3%	19.9%	22.2%	20.0%	21.4%	17.7%	16.7%	15.2%	16.5%	14.4%	14.9%	13.9%	13.4%
1,000+	11.7%	9.7%	8.2%	7.7%	8.3%	8.9%	6.5%	5.7%	5.3%	5.2%	3.7%	4.9%	4.1%

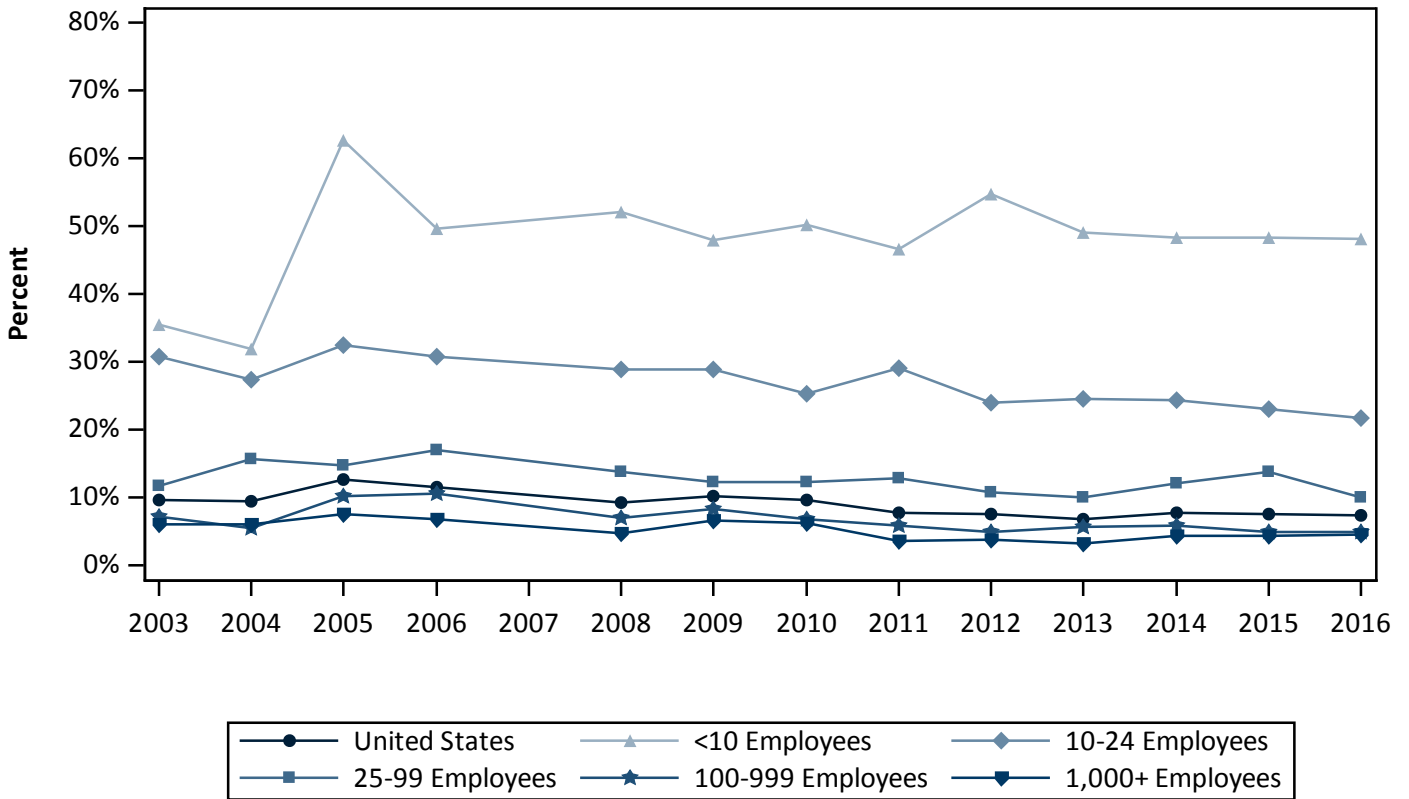
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	9.6%	9.5%	12.7%	11.6%	9.4%	10.3%	9.8%	7.9%	7.7%	6.9%	7.8%	7.6%	7.4%
<10	35.4%	31.8%	62.7%	49.5%	52.1%	47.9%	50.1%	46.6%	54.7%	49.0%	48.3%	48.3%	48.2%
10-24	30.8%	27.4%	32.5%	30.8%	29.0%	28.8%	25.3%	29.1%	24.0%	24.5%	24.3%	23.1%	21.8%
25-99	11.7%	15.6%	14.7%	17.1%	13.8%	12.3%	12.4%	12.8%	10.9%	10.0%	12.1%	13.9%	10.1%
100-999	7.3%	5.6%	10.2%	10.5%	7.1%	8.3%	6.8%	5.9%	5.0%	5.6%	5.8%	4.9%	5.0%
1,000+	6.1%	6.1%	7.6%	6.9%	4.8%	6.6%	6.2%	3.7%	3.7%	3.3%	4.4%	4.3%	4.6%

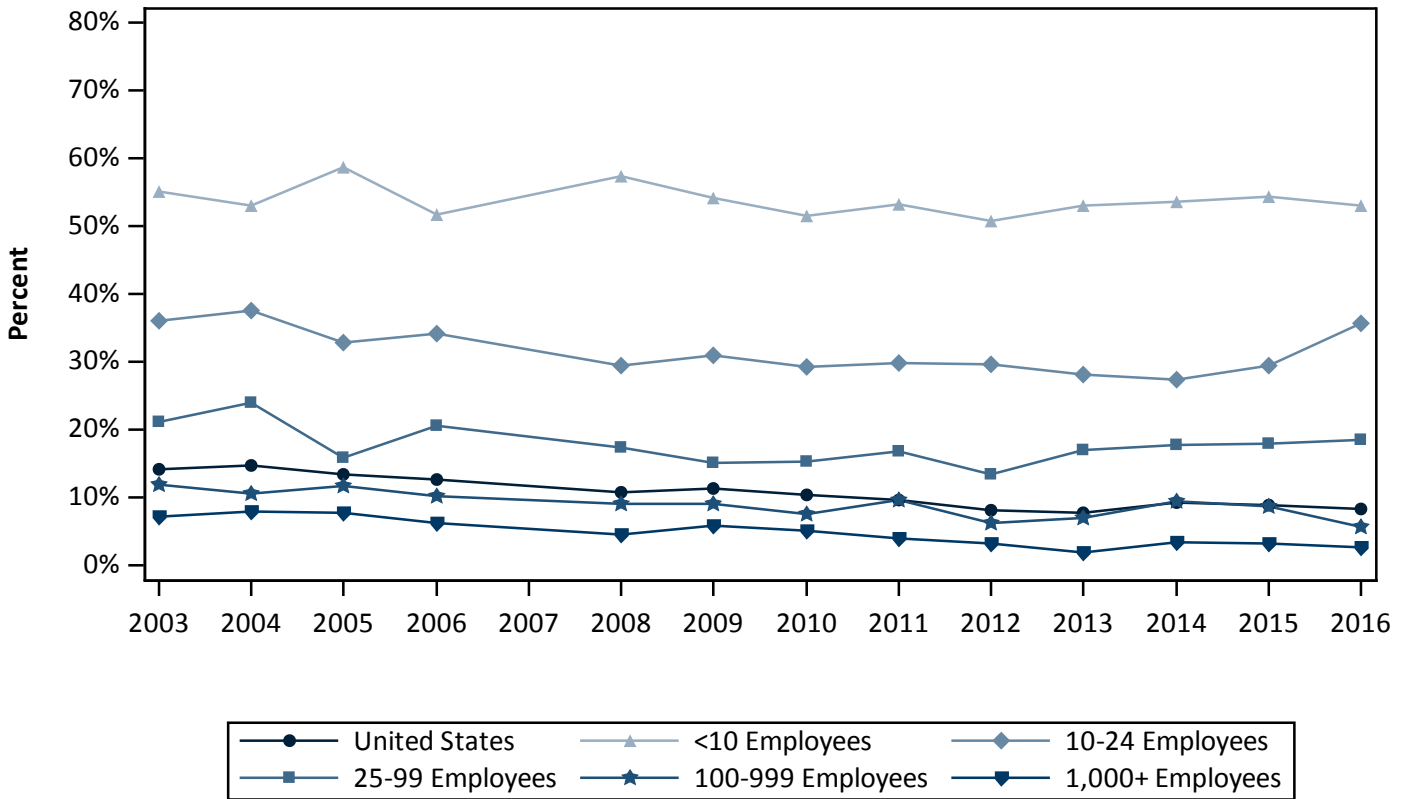
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	14.2%	14.7%	13.4%	12.6%	10.7%	11.4%	10.4%	9.7%	8.1%	7.9%	9.2%	8.9%	8.3%
<10	55.0%	53.0%	58.7%	51.7%	57.3%	54.2%	51.4%	53.2%	50.9%	53.0%	53.6%	54.4%	52.9%
10-24	36.0%	37.5%	32.9%	34.1%	29.5%	31.0%	29.2%	29.8%	29.6%	28.2%	27.4%	29.5%	35.8%
25-99	21.2%	24.0%	15.9%	20.5%	17.4%	15.1%	15.3%	16.9%	13.4%	17.0%	17.7%	17.9%	18.6%
100-999	11.9%	10.7%	11.7%	10.3%	9.0%	9.1%	7.6%	9.6%	6.3%	7.0%	9.6%	8.7%	5.8%
1,000+	7.3%	7.9%	7.7%	6.3%	4.6%	5.9%	5.1%	4.0%	3.3%	2.0%	3.4%	3.3%	2.7%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

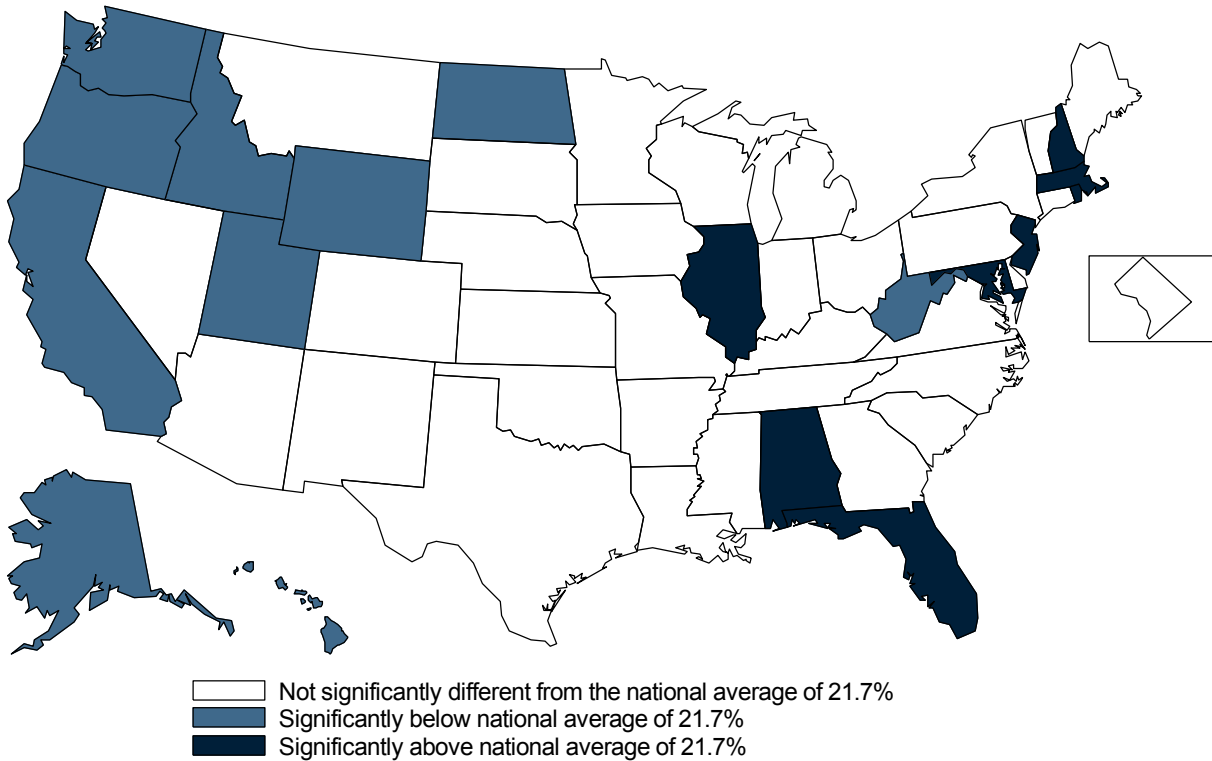
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

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



**Exhibit 4.17**

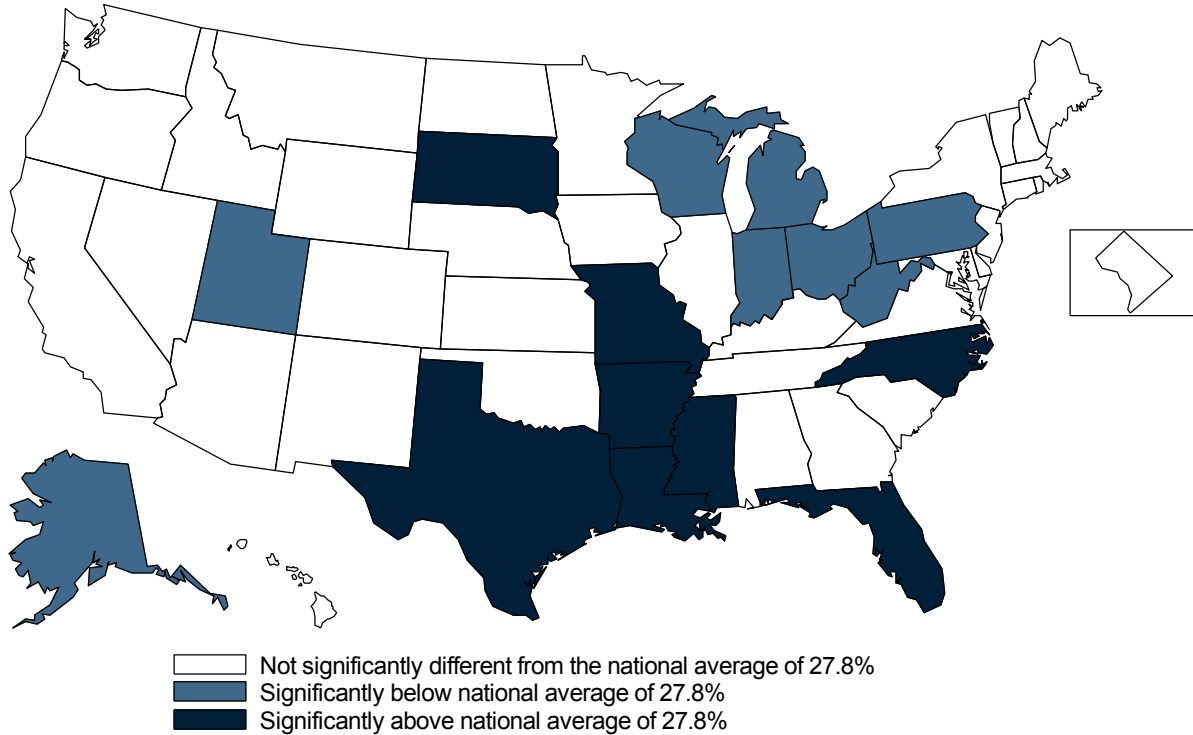
**Average percentage of premium contributed by employees for single coverage, by State, 2016**



Alabama	27.3%*	Kentucky	22.4%	North Dakota	18.8%*
Alaska	16.7%*	Louisiana	22.4%	Ohio	21.5%
Arizona	21.2%	Maine	21.8%	Oklahoma	20.6%
Arkansas	23.1%	Maryland	24.3%*	Oregon	17.2%*
California	18.9%*	Massachusetts	25.2%*	Pennsylvania	21.6%
Colorado	23.2%	Michigan	20.9%	Rhode Island	24.2%*
Connecticut	22.9%	Minnesota	22.9%	South Carolina	23.5%
Delaware	21.6%	Mississippi	24.8%	South Dakota	20.4%
District of Columbia	23.0%	Missouri	21.9%	Tennessee	22.2%
Florida	25.0%*	Montana	21.2%	Texas	20.4%
Georgia	23.3%	Nebraska	23.9%	Utah	19.0%*
Hawaii	12.0%*	Nevada	22.5%	Vermont	22.0%
Idaho	15.6%*	New Hampshire	25.3%*	Virginia	24.1%
Illinois	23.7%*	New Jersey	26.9%*	Washington	15.3%*
Indiana	21.0%	New Mexico	20.8%	West Virginia	19.0%*
Iowa	21.4%	New York	20.5%	Wisconsin	21.9%
Kansas	21.6%	North Carolina	20.8%	Wyoming	18.4%*

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of 21.7 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, 2016**

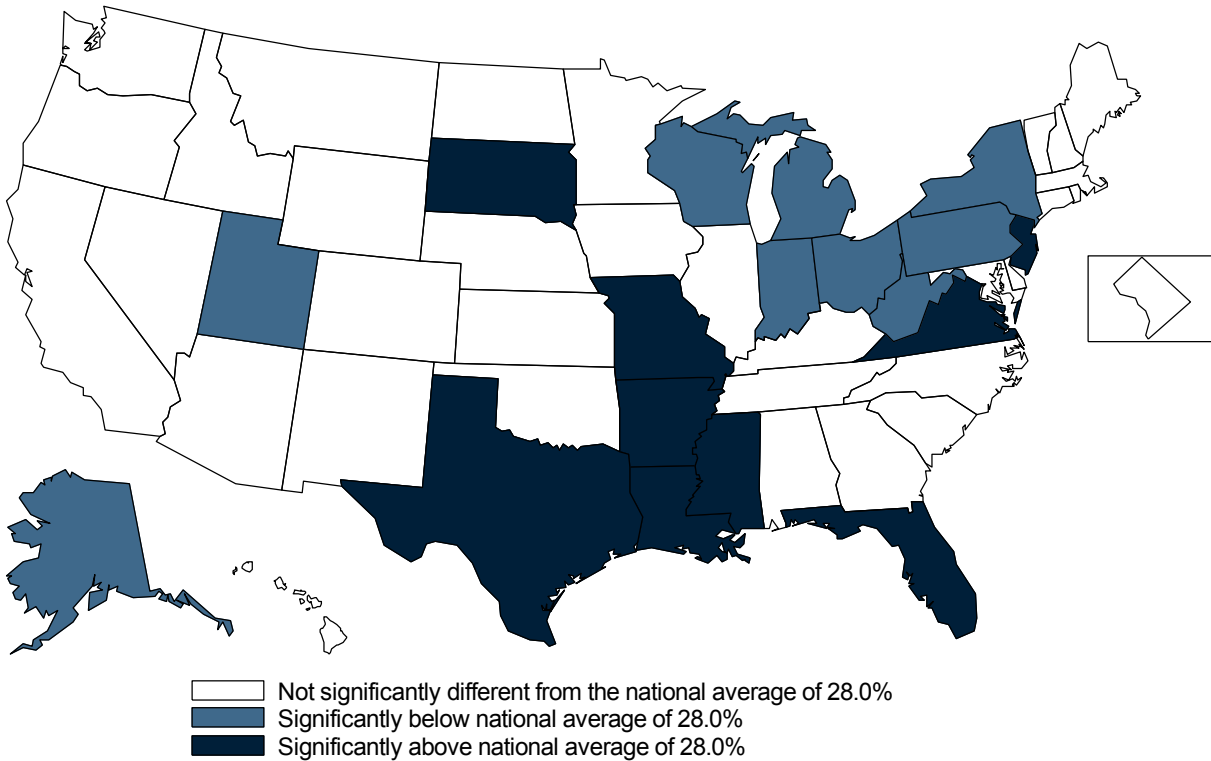


Alabama	29.5%	Kentucky	24.6%	North Dakota	28.2%
Alaska	19.2%*	Louisiana	32.3%*	Ohio	24.3%*
Arizona	26.0%	Maine	28.6%	Oklahoma	28.8%
Arkansas	32.4%*	Maryland	30.0%	Oregon	25.2%
California	26.3%	Massachusetts	27.9%	Pennsylvania	25.0%*
Colorado	29.4%	Michigan	21.8%*	Rhode Island	26.6%
Connecticut	25.3%	Minnesota	25.0%	South Carolina	27.9%
Delaware	29.4%	Mississippi	32.3%*	South Dakota	30.8%*
District of Columbia	26.3%	Missouri	35.2%*	Tennessee	28.5%
Florida	35.1%*	Montana	30.4%	Texas	31.5%*
Georgia	29.0%	Nebraska	29.9%	Utah	23.9%*
Hawaii	28.1%	Nevada	29.4%	Vermont	26.3%
Idaho	27.1%	New Hampshire	25.9%	Virginia	29.4%
Illinois	29.4%	New Jersey	29.5%	Washington	26.3%
Indiana	21.4%*	New Mexico	30.7%	West Virginia	23.9%*
Iowa	24.4%	New York	26.2%	Wisconsin	23.5%*
Kansas	27.7%	North Carolina	31.7%*	Wyoming	29.5%

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of 27.8 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, 2016**

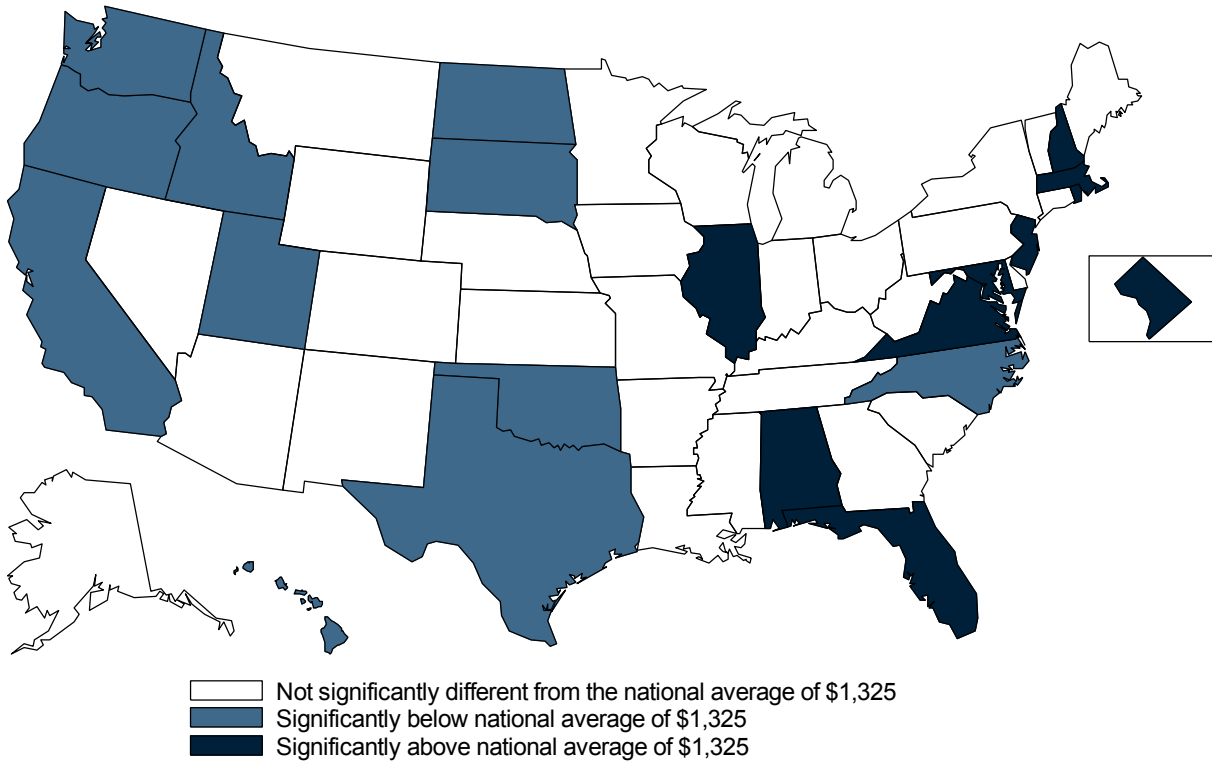


Alabama	29.1%	Kentucky	28.4%	North Dakota	27.0%
Alaska	21.5%*	Louisiana	33.6%*	Ohio	22.7%*
Arizona	30.3%	Maine	26.1%	Oklahoma	30.4%
Arkansas	32.9%*	Maryland	29.6%	Oregon	24.5%
California	27.7%	Massachusetts	26.7%	Pennsylvania	25.5%*
Colorado	27.6%	Michigan	20.1%*	Rhode Island	28.0%
Connecticut	28.4%	Minnesota	27.4%	South Carolina	28.3%
Delaware	28.9%	Mississippi	34.3%*	South Dakota	31.5%*
District of Columbia	29.0%	Missouri	36.1%*	Tennessee	28.0%
Florida	35.0%*	Montana	31.2%	Texas	32.3%*
Georgia	30.2%	Nebraska	28.9%	Utah	23.3%*
Hawaii	26.6%	Nevada	31.5%	Vermont	26.7%
Idaho	29.6%	New Hampshire	27.0%	Virginia	32.6%*
Illinois	27.5%	New Jersey	31.7%*	Washington	27.5%
Indiana	23.2%*	New Mexico	32.2%	West Virginia	23.7%*
Iowa	26.7%	New York	24.2%*	Wisconsin	21.8%*
Kansas	27.8%	North Carolina	28.4%	Wyoming	25.2%

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of 28.0 percent at  $p < 0.05$ .  
**For data points and standard errors for this exhibit select here.**

**Exhibit 4.20**

**Average annual employee contribution (in dollars) for single coverage, by State, 2016**



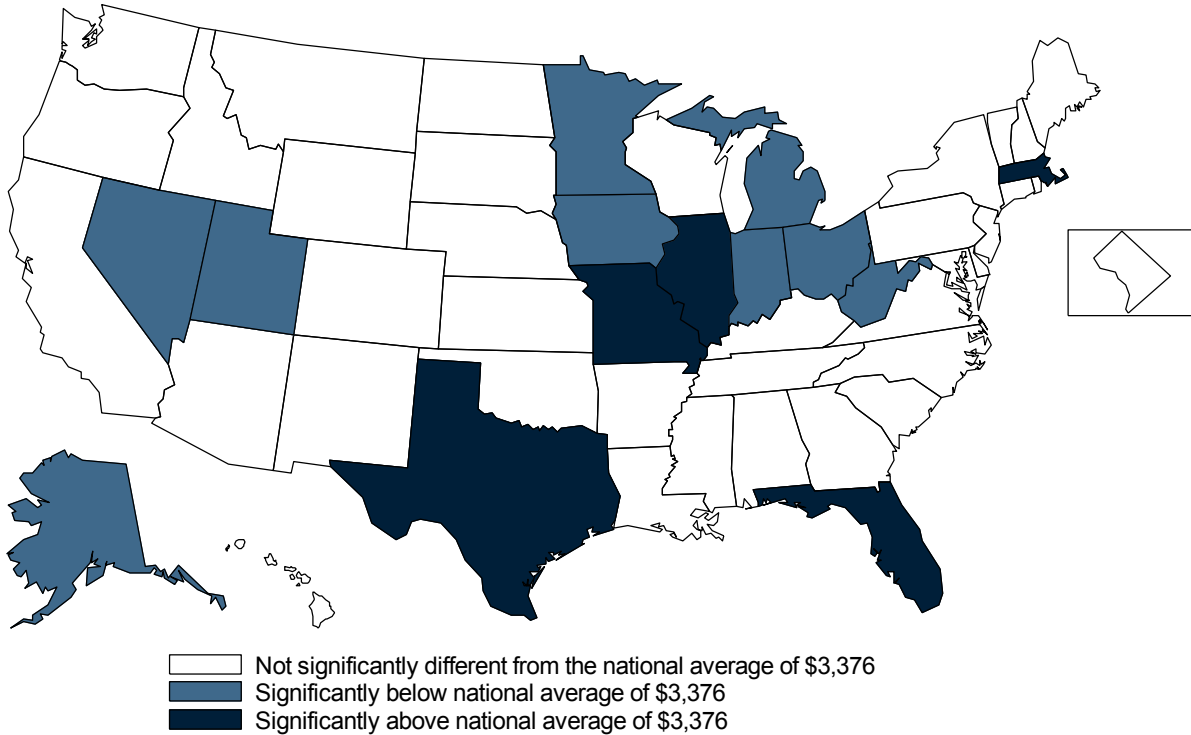
Alabama	\$1,510*	Kentucky	\$1,290	North Dakota	\$1,155*
Alaska	\$1,319	Louisiana	\$1,282	Ohio	\$1,351
Arizona	\$1,283	Maine	\$1,357	Oklahoma	\$1,189*
Arkansas	\$1,235	Maryland	\$1,494*	Oregon	\$1,028*
California	\$1,146*	Massachusetts	\$1,670*	Pennsylvania	\$1,340
Colorado	\$1,385	Michigan	\$1,236	Rhode Island	\$1,614*
Connecticut	\$1,498	Minnesota	\$1,380	South Carolina	\$1,361
Delaware	\$1,407	Mississippi	\$1,400	South Dakota	\$1,200*
District of Columbia	\$1,493*	Missouri	\$1,288	Tennessee	\$1,230
Florida	\$1,568*	Montana	\$1,367	Texas	\$1,197*
Georgia	\$1,409	Nebraska	\$1,456	Utah	\$1,162*
Hawaii	\$703*	Nevada	\$1,235	Vermont	\$1,395
Idaho	\$872*	New Hampshire	\$1,678*	Virginia	\$1,487*
Illinois	\$1,488*	New Jersey	\$1,745*	Washington	\$984*
Indiana	\$1,289	New Mexico	\$1,299	West Virginia	\$1,208
Iowa	\$1,259	New York	\$1,357	Wisconsin	\$1,401
Kansas	\$1,265	North Carolina	\$1,189*	Wyoming	\$1,195

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of \$1,325 at  $p < 0.05$ .

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

**Exhibit 4.21**  
**Average annual employee contribution (in dollars) for employee-plus-one coverage**  
**by State, 2016**



Alabama	\$3,013	Kentucky	\$2,905	North Dakota	\$3,207
Alaska	\$2,879*	Louisiana	\$3,742	Ohio	\$3,095*
Arizona	\$3,070	Maine	\$3,497	Oklahoma	\$3,343
Arkansas	\$3,240	Maryland	\$3,638	Oregon	\$3,100
California	\$3,182	Massachusetts	\$3,788*	Pennsylvania	\$3,194
Colorado	\$3,668	Michigan	\$2,674*	Rhode Island	\$3,563
Connecticut	\$3,306	Minnesota	\$2,913*	South Carolina	\$3,155
Delaware	\$3,579	Mississippi	\$3,508	South Dakota	\$3,722
District of Columbia	\$3,400	Missouri	\$3,882*	Tennessee	\$3,279
Florida	\$4,179*	Montana	\$3,625	Texas	\$3,799*
Georgia	\$3,400	Nebraska	\$3,509	Utah	\$2,647*
Hawaii	\$3,237	Nevada	\$3,015*	Vermont	\$3,391
Idaho	\$3,192	New Hampshire	\$3,667	Virginia	\$3,488
Illinois	\$3,713*	New Jersey	\$3,691	Washington	\$3,304
Indiana	\$2,656*	New Mexico	\$3,437	West Virginia	\$2,902*
Iowa	\$2,751*	New York	\$3,374	Wisconsin	\$3,089
Kansas	\$3,203	North Carolina	\$3,535	Wyoming	\$3,802

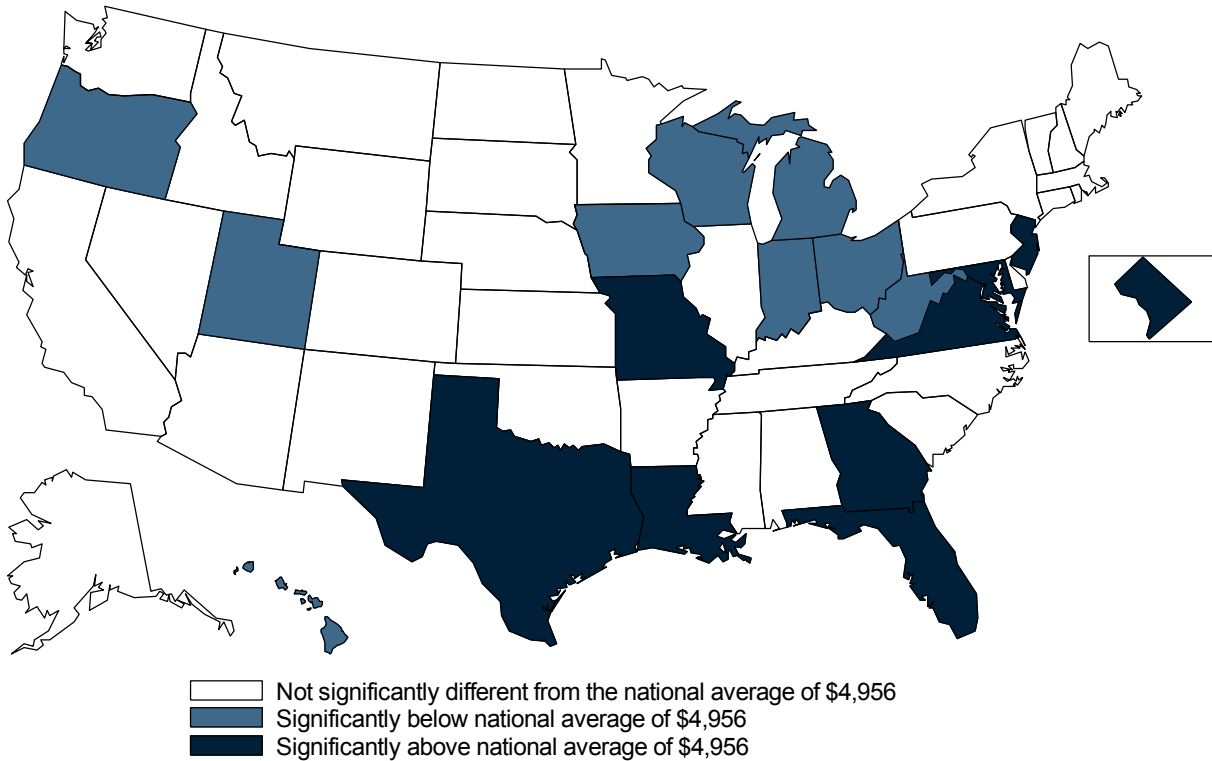
**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of \$3,376 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, 2016**



Alabama	\$4,686	Kentucky	\$4,737	North Dakota	\$4,536
Alaska	\$4,843	Louisiana	\$5,817*	Ohio	\$3,969*
Arizona	\$5,305	Maine	\$4,699	Oklahoma	\$5,061
Arkansas	\$4,917	Maryland	\$5,478*	Oregon	\$4,200*
California	\$4,829	Massachusetts	\$5,052	Pennsylvania	\$4,560
Colorado	\$4,822	Michigan	\$3,439*	Rhode Island	\$5,035
Connecticut	\$5,296	Minnesota	\$4,803	South Carolina	\$5,007
Delaware	\$5,393	Mississippi	\$5,408	South Dakota	\$5,386
District of Columbia	\$5,476*	Missouri	\$6,003*	Tennessee	\$4,689
Florida	\$6,297*	Montana	\$5,570	Texas	\$5,660*
Georgia	\$5,506*	Nebraska	\$4,808	Utah	\$3,966*
Hawaii	\$4,354*	Nevada	\$5,089	Vermont	\$4,751
Idaho	\$5,171	New Hampshire	\$5,148	Virginia	\$5,857*
Illinois	\$5,085	New Jersey	\$5,785*	Washington	\$5,028
Indiana	\$4,175*	New Mexico	\$5,460	West Virginia	\$4,092*
Iowa	\$4,306*	New York	\$4,679	Wisconsin	\$3,817*
Kansas	\$4,669	North Carolina	\$4,832	Wyoming	\$4,948

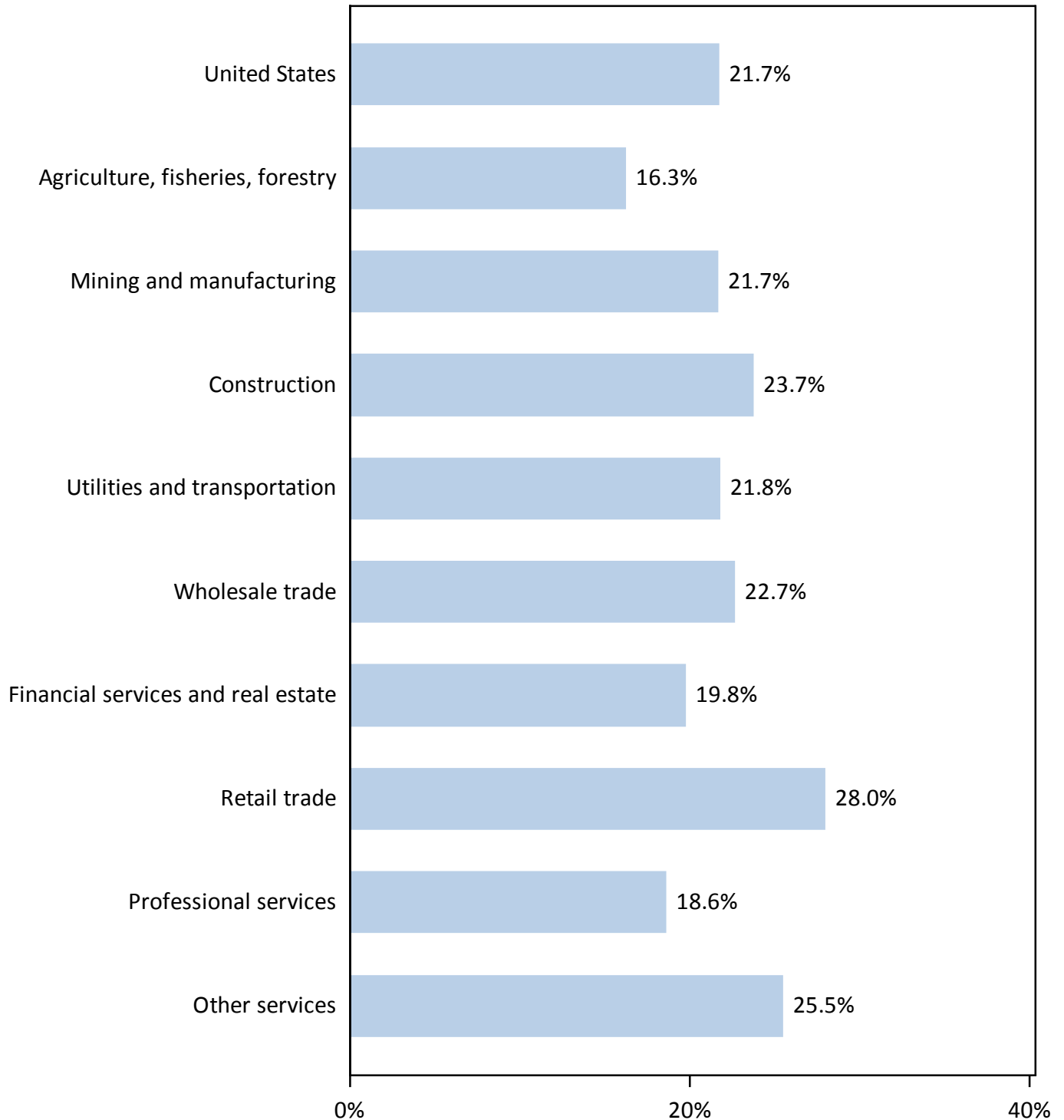
**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of \$4,956 at  $p < 0.05$ .

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

**Exhibit 4.23**

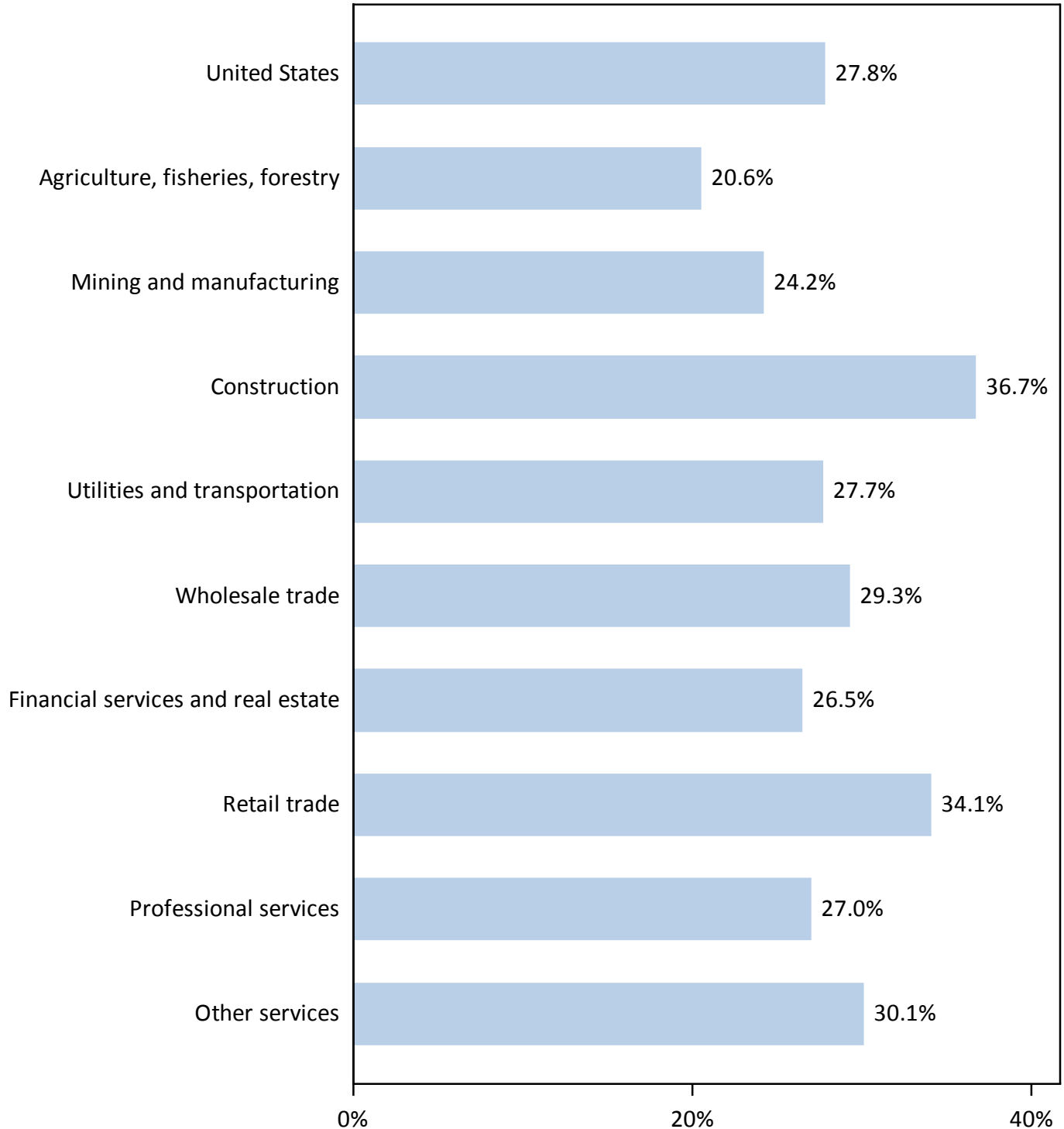
**Average percentage of premium contributed by employees for single coverage, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**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, 2016**

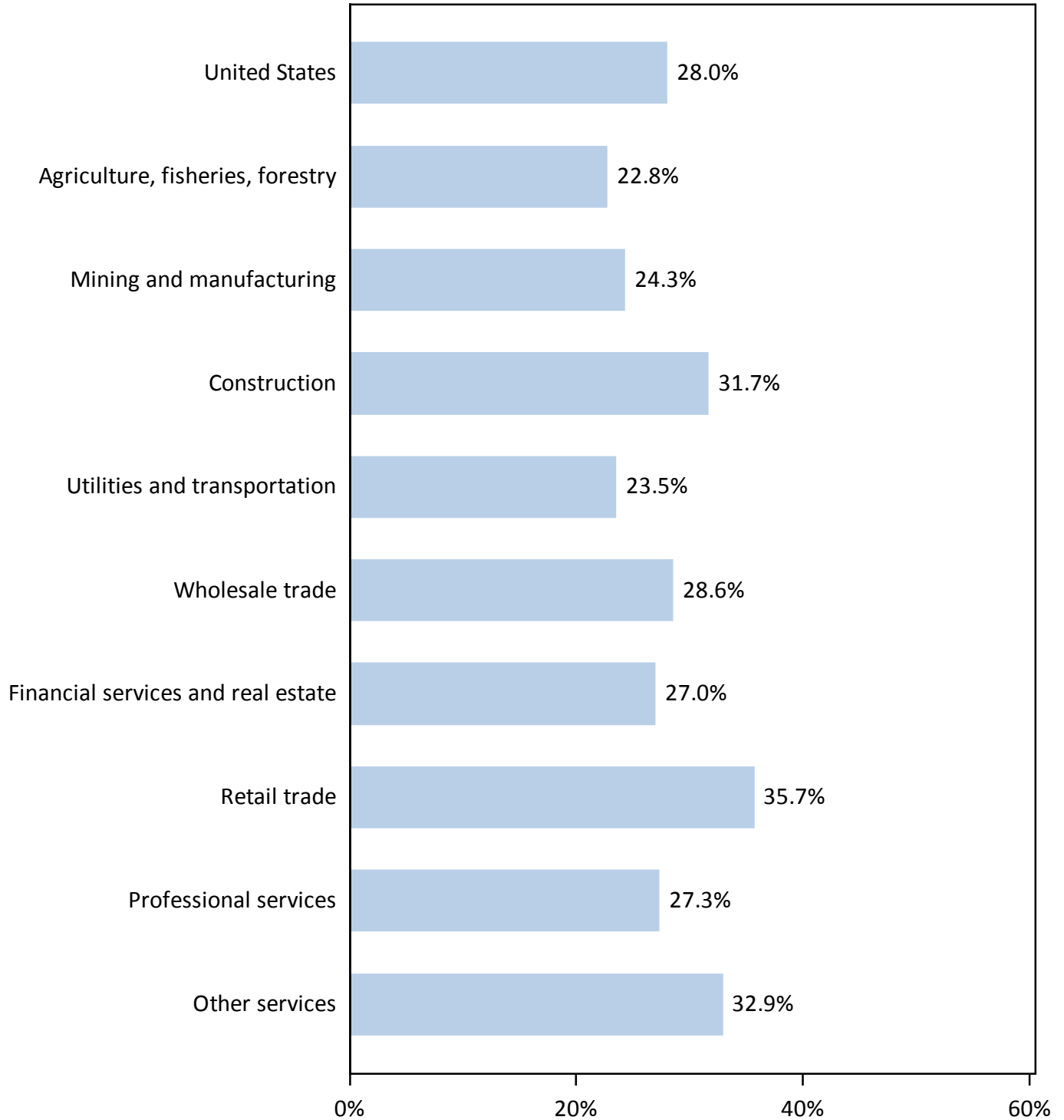


**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**For data points and standard errors for this exhibit select here.**



**Exhibit 4.25**

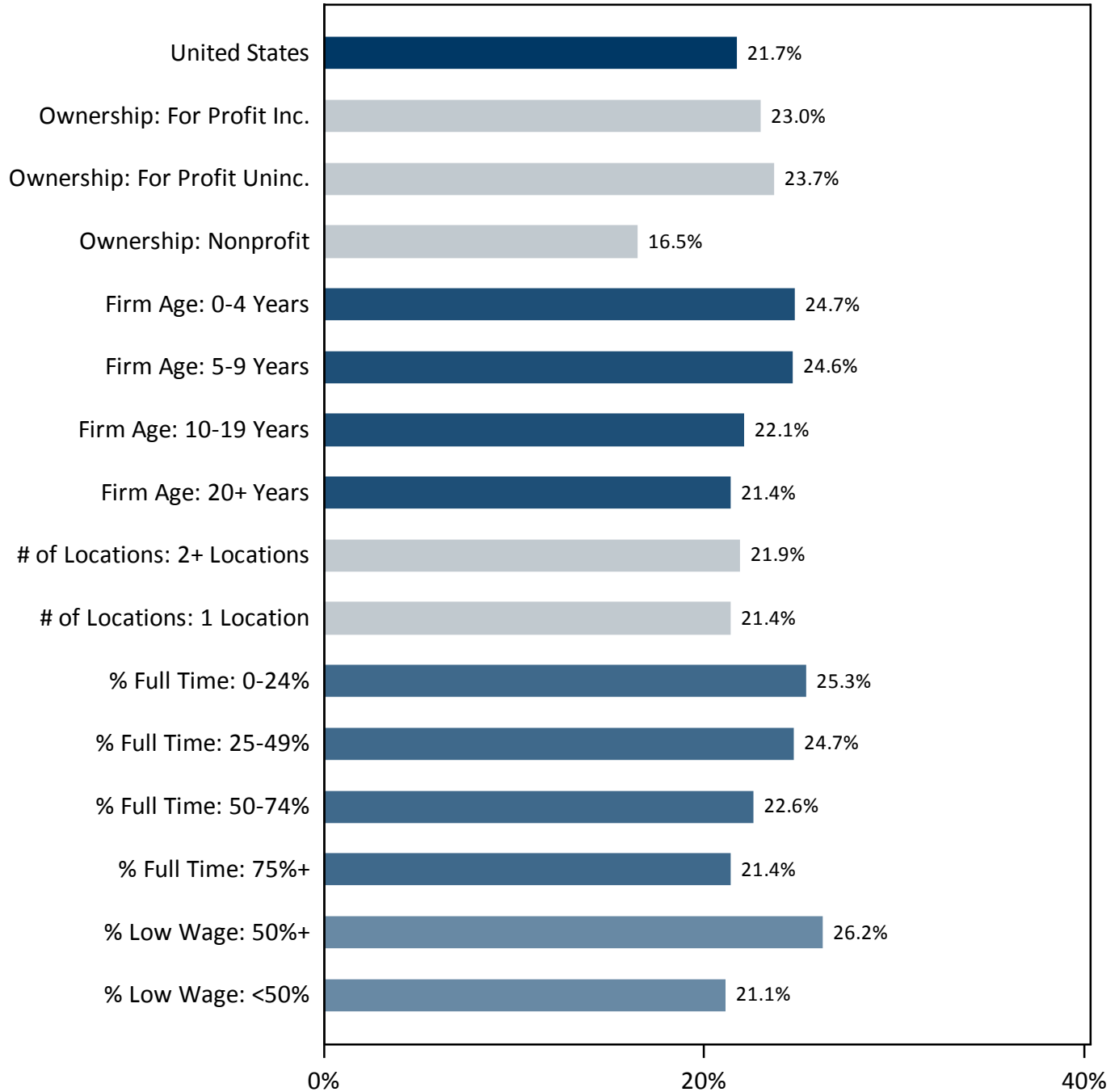
**Average percentage of premium contributed by employees for family coverage, overall and by industry, 2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.  
**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, 2016



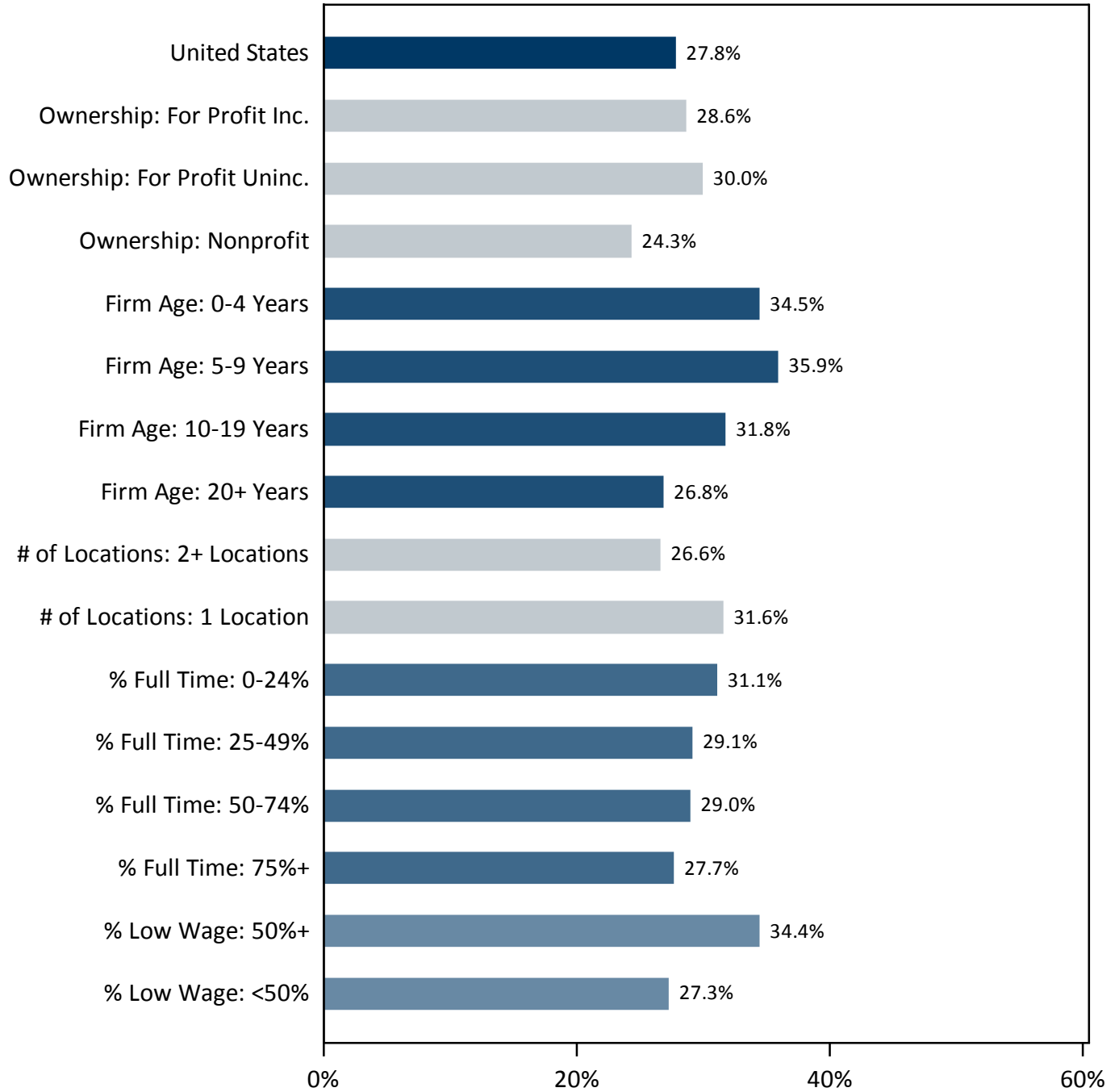
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2016**



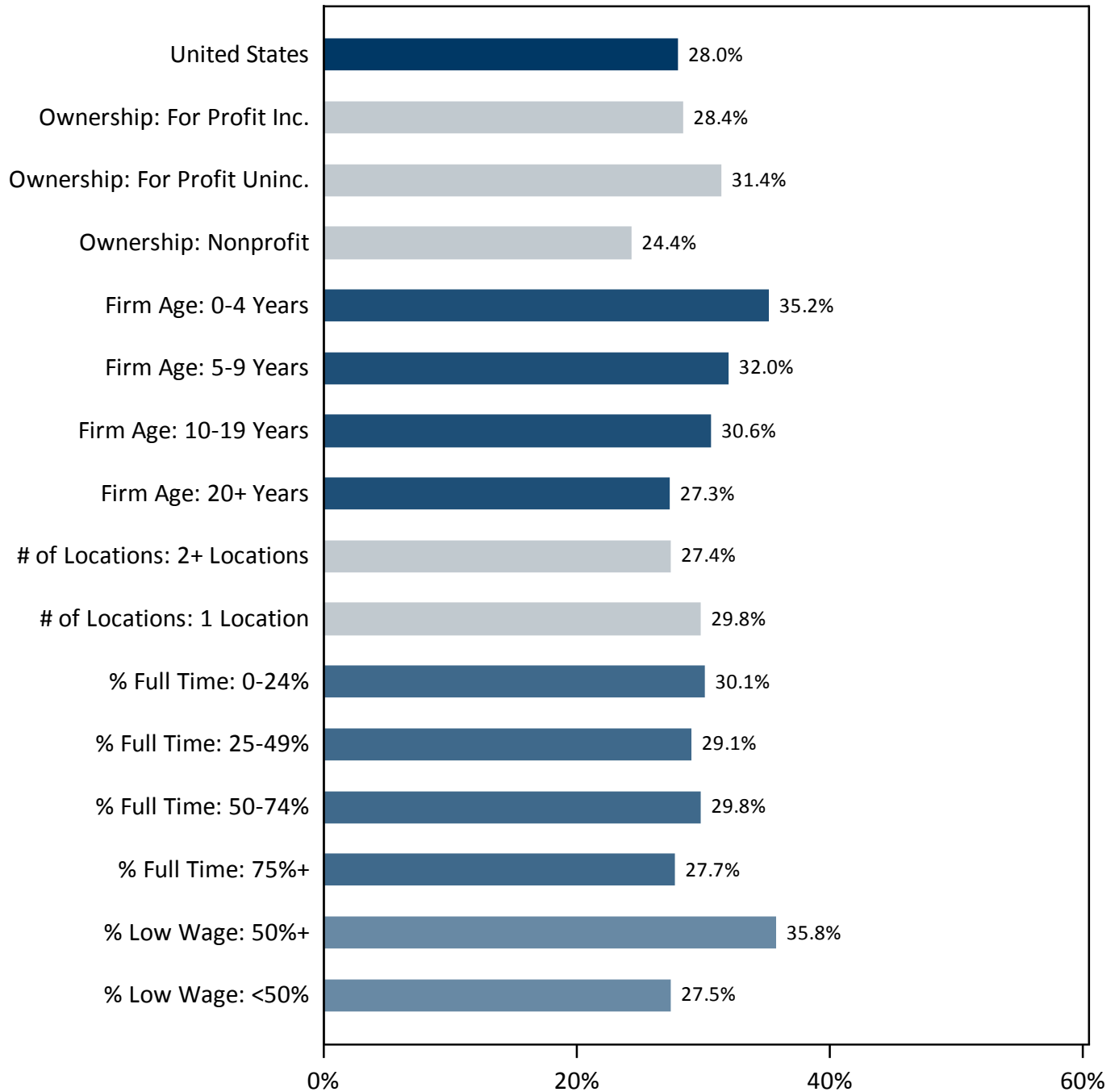
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2016**



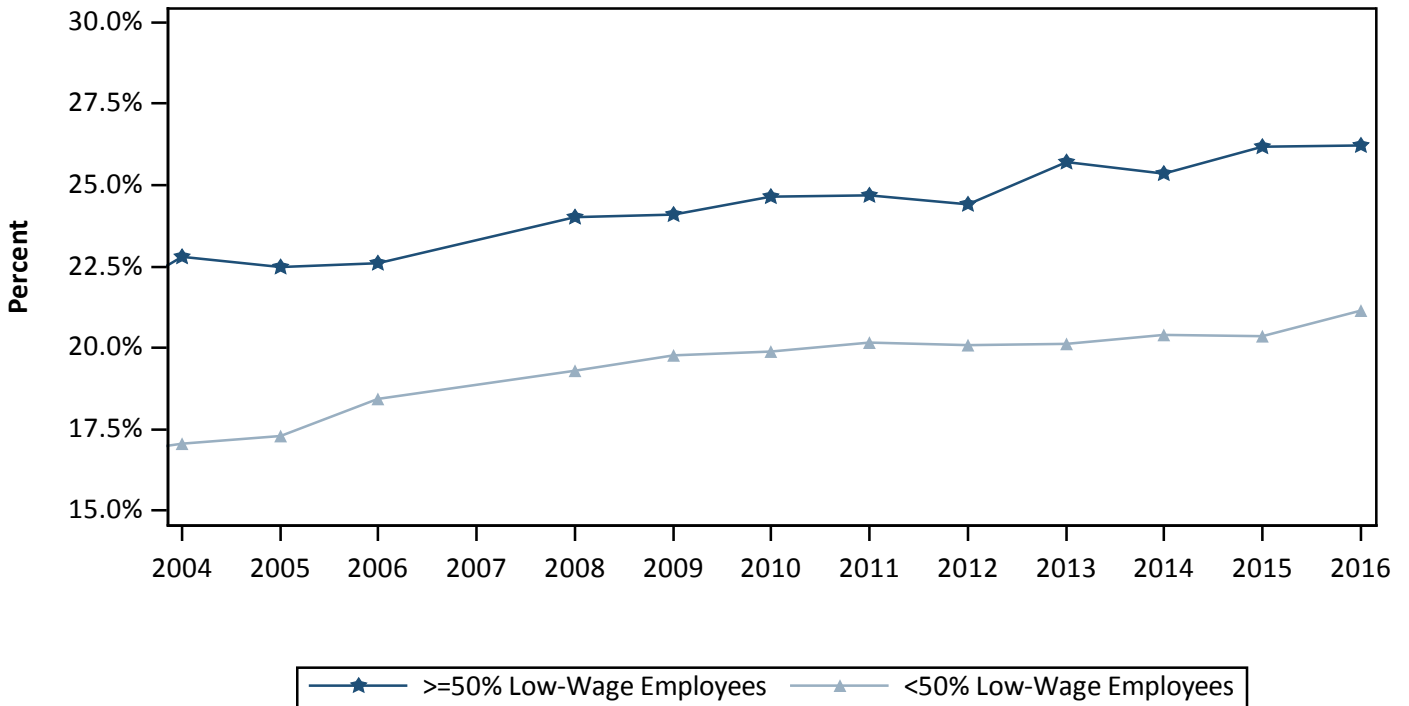
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.

**Note:** “% Full Time” refers to the percentage of the establishment’s workforce that worked full time in 2016. “% Low Wage” refers to the percentage of the establishment’s workforce that earned less than \$11.50 per hour in 2016.

**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, 2004-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 2016, low-wage employees were defined as those earning less than \$11.50 per hour.

Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016**

Low wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
>=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%
<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%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

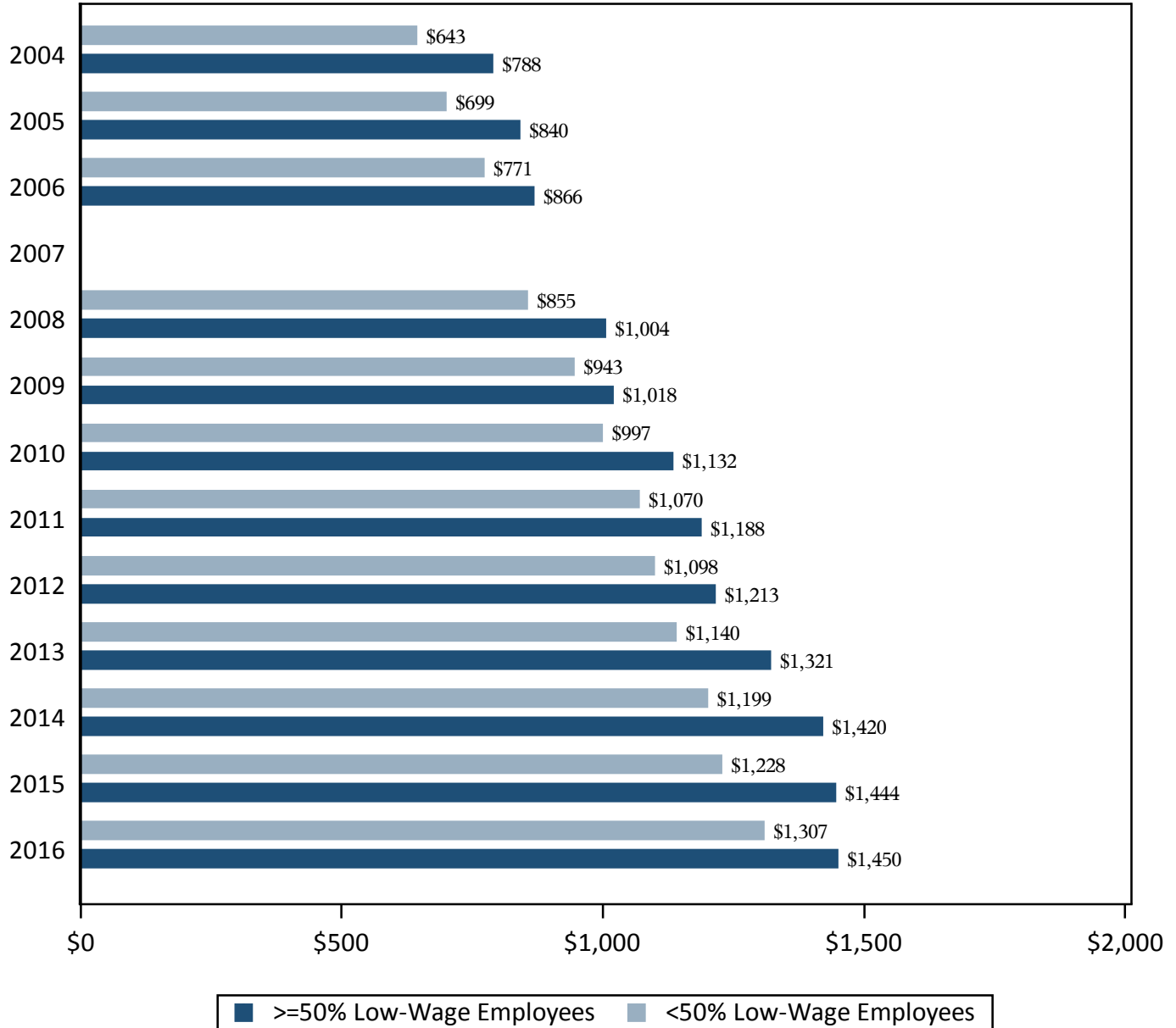
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 per hour. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016



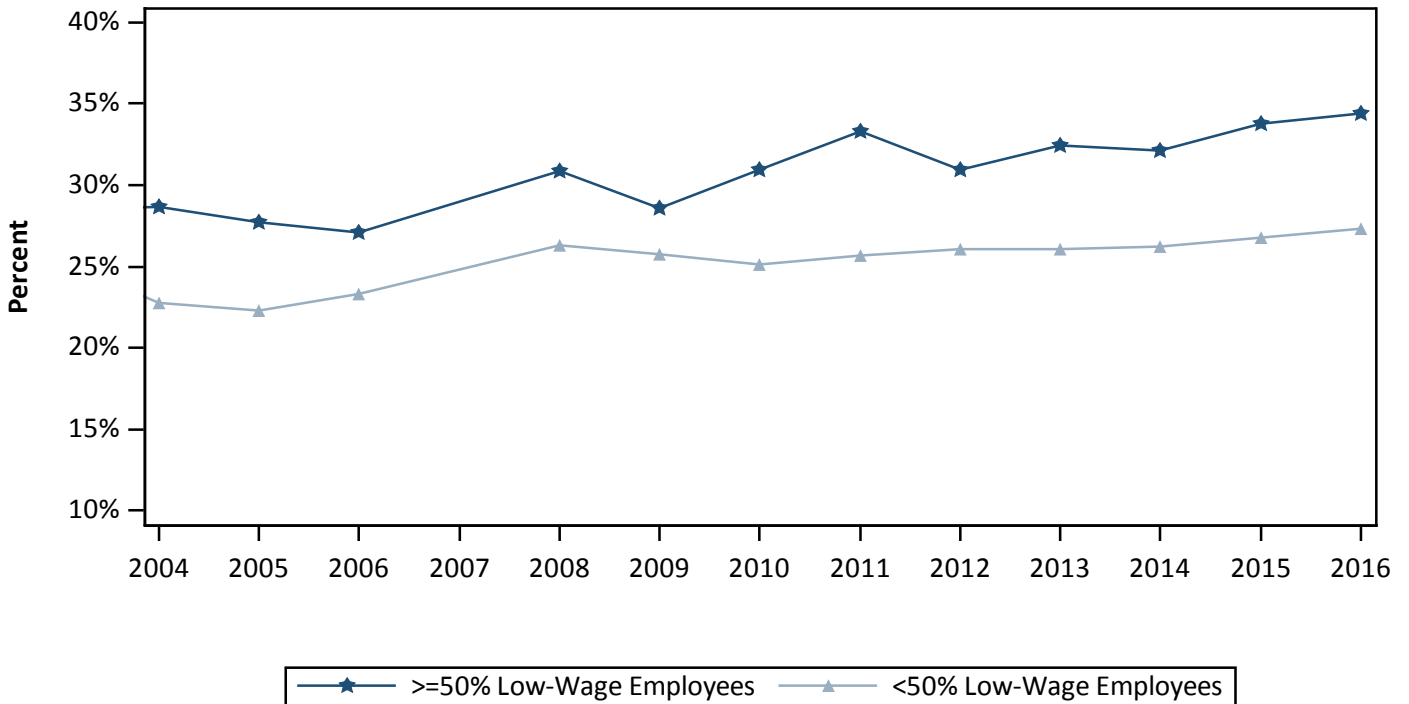
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 2016, low-wage employees were defined as those earning less than \$11.50 per hour. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 2016, low-wage employees were defined as those earning less than \$11.50 per hour.

Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016**

Low wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
>=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%
<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%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

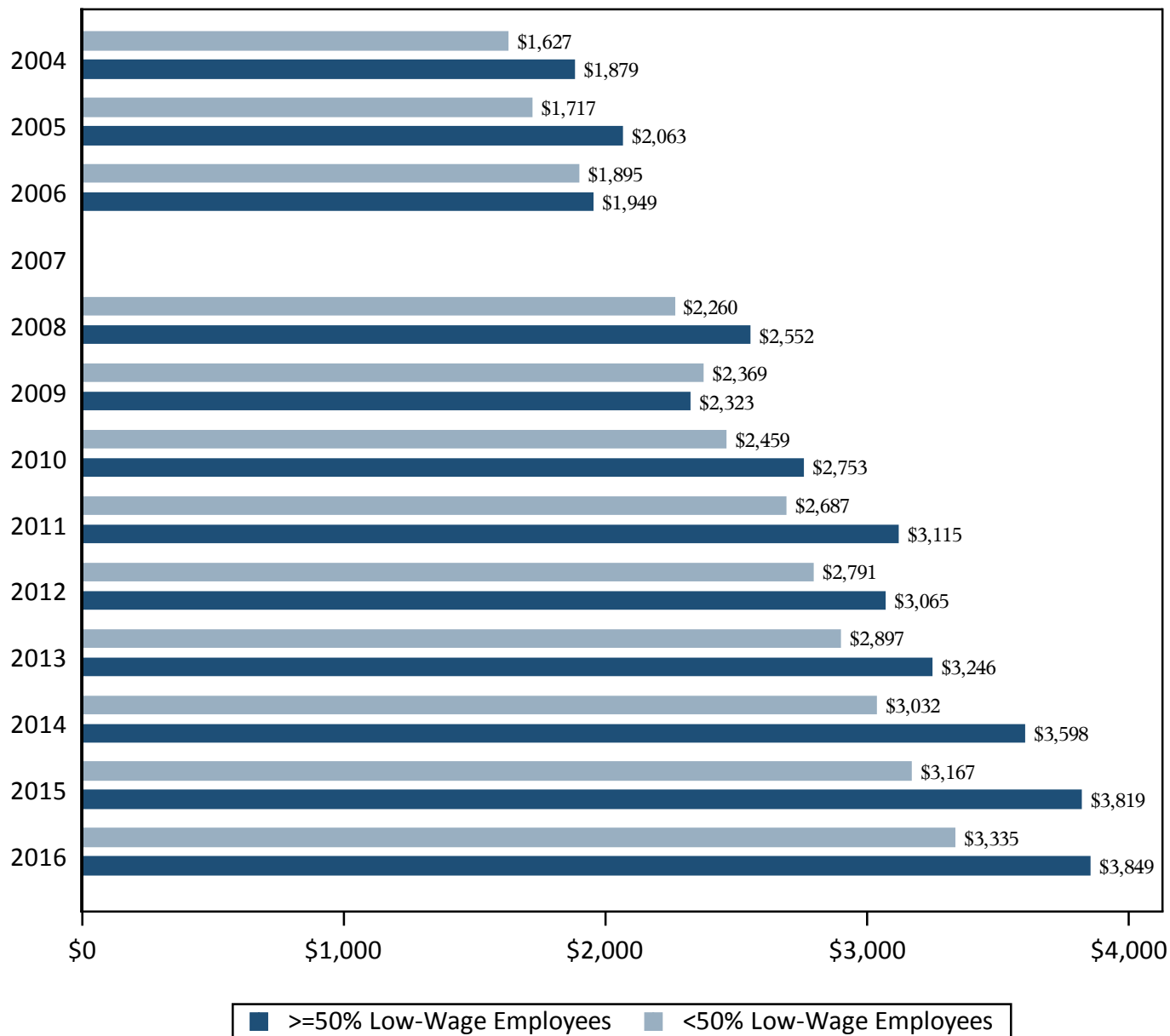
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 per hour. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 2016, low-wage employees were defined as those earning less than \$11.50 per hour. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 2016, low-wage employees were defined as those earning less than \$11.50 per hour.

Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016**

Low wage	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
>=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%
<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%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

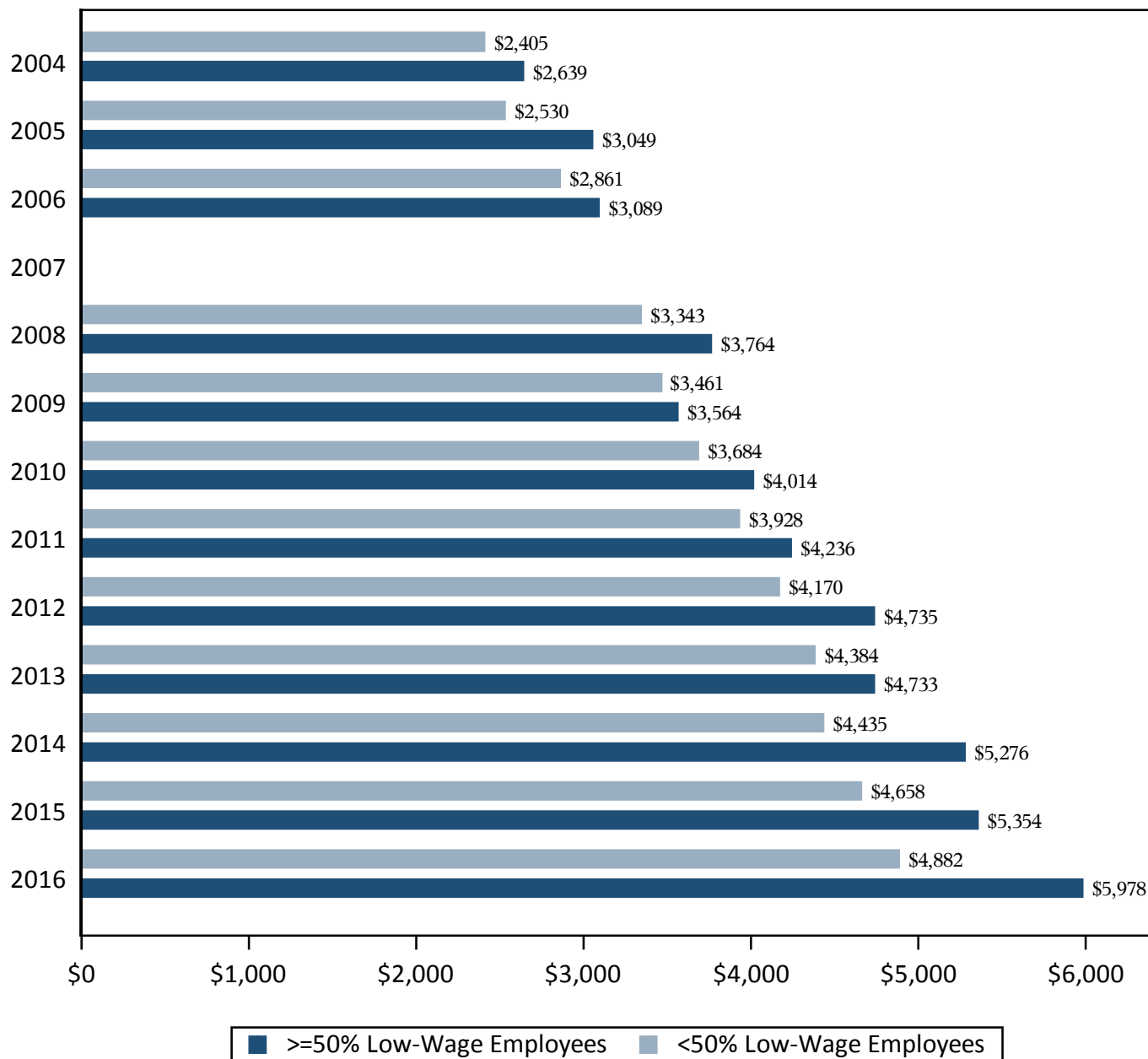
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

Wage levels in the MEPS-IC questionnaires have been adjusted to account for changing wages over time. In 2016, low-wage employees were defined as those earning less than \$11.50 per hour. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

**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, 2004-2016



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2004-2016.

**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 2016, low-wage employees were defined as those earning less than \$11.50 per hour. Estimates for 2003 are not included in this exhibit because of definitional differences with the 2004 to 2016 estimates.

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

<b>Exhibit 4.35</b>					
<b>Distributions of employee contribution (in dollars) for single, employee-plus-one, and family coverage, by firm size, 2016</b>					
<b>Coverage</b>	<b>Estimate</b>	<b>Total</b>	<b>&lt;50 employees</b>	<b>50-99 employees</b>	<b>100 or more employees</b>
<b>Single</b>	Average (mean)	\$1,325	\$1,216	\$1,393	\$1,343
	10 percentile	\$0	\$0	\$0	\$240
	25 percentile	\$600	\$0	\$350	\$720
	50 percentile (median)	\$1,200	\$810	\$1,200	\$1,200
	75 percentile	\$1,800	\$2,000	\$2,000	\$1,700
	90 percentile	\$2,600	\$3,000	\$2,800	\$2,500
<b>Employee-plus-one</b>	Average (mean)	\$3,376	\$3,479	\$4,077	\$3,307
	10 percentile	\$750	\$0	\$840 †	\$1,100
	25 percentile	\$1,900	\$40 †	\$2,200	\$2,000
	50 percentile (median)	\$3,000	\$3,000	\$3,600	\$2,900
	75 percentile	\$4,400	\$5,200	\$5,600	\$4,100
	90 percentile	\$6,200	\$7,600	\$7,600	\$5,800
<b>Family</b>	Average (mean)	\$4,956	\$4,510	\$5,821	\$4,971
	10 percentile	\$890	\$0	\$0	\$1,600
	25 percentile	\$2,700	\$0	\$1,900 †	\$2,900
	50 percentile (median)	\$4,400	\$3,300	\$5,100	\$4,400
	75 percentile	\$6,400	\$7,200	\$8,600	\$6,200
	90 percentile	\$9,500	\$12,000	\$13,000	\$8,700
† Estimate does not meet standard of reliability or precision.					
<b>Source:</b> Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2016.					
<b>For data points and standard errors for this exhibit select here.</b>					

# Section 5: Employee Cost Sharing



## Employee Cost Sharing

As health care 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 health care to employees by increasing cost-sharing provisions such as deductibles, coinsurance rates, and copayments. A deductible is the amount an enrollee must pay before health care services are covered by the health plan. Coinsurance rates are the percentage of health care service expenses paid by the enrollee, and copayments are fixed dollar amounts paid by the enrollee for each health care service.

Cost-sharing provisions may vary for different types of health care 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.

From 2003 to 2016, the percentage of enrolled employees in plans with a deductible increased by 32.4 percentage points (from 52.1 percent to 84.5 percent). 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 19.5 percent in 2003 to 34.9 percent in 2016, while the percentage of enrollees in plans with copayments declined from 77.1 percent in 2003 to 60.6 percent in 2016. These changes in cost-sharing provisions may have resulted, at least in part, from a shift in plan types over this time, away from health maintenance organizations (HMOs) and toward preferred provider organizations (PPOs).

MEPS-IC data indicate that the percentage of establishments offering plans with “exclusive providers” (HMOs and other plan types with this provider arrangement) declined from 38.4 percent to 30.9 percent from 2003 to 2016 (data not shown). At the same time, employers increasingly offered plans with a “mixed provider network,” such as PPO and point-of-service (POS) plans (67.4 percent in 2003 to 73.9 percent in 2016; data not shown).

Among enrolled employees in plans with deductibles, average individual deductibles rose from \$518 in 2003 to \$1,696 in 2016 while average family deductibles rose from \$1,079 in 2003 to \$3,069 in 2016. Among enrollees with cost sharing for physician office visits, average coinsurance rates increased from 18.0 percent in 2003 to 20.5 percent in 2016, while copayment amounts increased from \$16.51 in 2003 to \$25.89 in 2016. From 2015 to 2016, there was an increase in the average coinsurance rate from 20.1 percent to 20.5 percent and an increase in the average copayment amount from \$25.04 to \$25.89.

This section presents information on trends from 2003 to 2016 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 average deductibles, coinsurance rates, and copayments among enrolled employees in plans with these cost-sharing provisions. Trends in cost-sharing provisions are presented overall and by firm size. Information on cost-sharing provisions is presented by State for 2016.

## ***Individual and Family Deductibles***

- The percentage of enrolled employees in a health insurance plan with a deductible did not change significantly from 2015 (85.4 percent) to 2016 (84.5 percent) (Exhibit 5.1). With the exception of the 2010-2011 period, this was the only time from 2003 to 2016 there was not a significant increase in the percentage of enrollees with a deductible ( $p < 0.10$  for the increase from 2012 to 2013).
- From 2003 to 2010, the percentage of enrollees in plans with deductibles increased by an average of 3.6 percentage points per year, from 52.1 percent in 2003 to 77.5 percent in 2010. From 2010 to 2016, the percentage of enrollees with a deductible increased from 77.5 to 84.5 percent, an average increase of 1.2 percentage points per year (Exhibit 5.1).

## **Deductibles by Firm Size**

- Enrolled employees in large firms (100 or more employees) were less likely to be in a plan with a deductible than those in small firms (fewer than 50 employees) in 2003. By 2016, however, that pattern was reversed (Exhibit 5.1).
- In 2003, 49.6 percent of enrolled employees at large employers (100 or more employees) were in plans with a deductible compared with 59.7 percent and 58.0 percent of enrollees in firms with fewer than 50 employees and with 50 to 99 employees, respectively. This pattern continued in 2004. Between 2005 and 2012, however, there were no significant differences by firm size in the percentage of enrolled employees in health plans with a deductible (Exhibit 5.1).
- Between 2012 and 2016, the percentage of enrolled employees with a deductible increased from 79.5 percent to 81.7 percent at small employers (fewer than 50 employees) but increased from 79.6 percent to 85.2 percent at large employers (100 or more employees). In every year from 2013 to 2016, enrolled employees at large employers were more likely to be in plans with deductibles than enrolled employees in firms with fewer than 50 employees (Exhibit 5.1).
- For enrollees with deductibles, average individual deductibles were higher in smaller firms (fewer than 100 employees) than in large firms (100 or more employees) over the entire period from 2003 to 2016. In 2016, average individual deductibles were \$2,105 and \$2,173 in firms with fewer than 50 employees and with 50 to 99 employees, respectively, compared with \$1,558 in firms with 100 or more employees. There has been no significant difference between average individual deductibles for enrolled employees in firms with fewer than 50 employees and with 50 to 99 employees since 2006 (Exhibit 5.2).
- Family deductibles were also higher in smaller firms (fewer than 100 employees) than in large firms (100 or more employees) throughout the 2003-2016 period. In 2016, average family deductibles were \$3,940 and \$3,840 in firms with fewer than 50 employees and with 50 to 99 employees, respectively, compared with \$2,887 in firms with 100 or more employees (Exhibit 5.3).

## **Deductibles by State**

- In 2016, 84.5 percent of enrolled employees were in plans with a deductible. This figure was lower in California, District of Columbia, Hawaii, Massachusetts, and New York. The percentage of enrollees with a deductible was not significantly different from the national average in Arizona, Connecticut, Florida, Illinois, Nevada, New Jersey, North Carolina,

Oregon, Pennsylvania, Rhode Island, Utah, Virginia, and West Virginia. In the remaining 33 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 \$1,696 in 2016. Thirteen States had individual deductibles that were higher than the national average: Arizona, Colorado, Connecticut, Kentucky, Maine, Missouri, Montana, New Hampshire, North Carolina, Oregon, South Dakota, Tennessee, and Texas. Fourteen States had individual deductibles that were lower than the national average: Alabama, Arkansas, California, District of Columbia, Hawaii, Illinois, Louisiana, Massachusetts, Michigan, New Jersey, New Mexico, Utah, Virginia, and Washington (Exhibit 5.5).
- Among enrolled employees in plans with family deductibles, the average deductible was \$3,069 in 2016. Nine States had family deductibles that were higher than the national average: Arizona, Connecticut, Maine, Missouri, New Hampshire, Oregon, South Dakota, Tennessee, and Wisconsin. Seven States had family deductibles that were lower than the national average: Alabama, Arkansas, District of Columbia, Illinois, New Jersey, Utah, and Virginia (Exhibit 5.6).

### ***Coinsurance Rates for Physician Office Visits***

- From 2003 to 2016, the percentage of enrolled employees in plans with coinsurance rates increased from 19.5 percent to 34.9 percent. There were significant year-to-year increases in the percentage of enrolled employees with a coinsurance rate from 2005 to 2006 and from 2009 to 2010 and then each year from 2011 to 2015 (Exhibit 5.7).
- The percentage of enrolled employees in a health insurance plan that had a coinsurance rate for physician office visits did not change significantly from 2015 (35.0 percent) to 2016 (34.9 percent) (Exhibit 5.7).
- Enrolled employees in large firms (100 or more employees) were more likely to have plans with coinsurance rates than enrolled employees in smaller firms in all years from 2003 to 2016. In 2016, 38.9 percent of enrollees in firms with 100 or more employees had coinsurance rates compared with 20.6 percent and 21.5 percent in firms with fewer than 50 employees and with 50 to 99 employees, respectively (Exhibit 5.7).
- Between 2003 and 2016, the percentage of enrolled employees in health plans with a coinsurance rate increased for all enrollees, regardless of firm size. However, the increase was more pronounced among enrolled employees in firms with 100 or more employees (17.9 percentage points) than in smaller firms (5.4 and 6.9 percentage point increases at firms with fewer than 50 employees and with 50 to 99 employees, respectively) (Exhibit 5.7).
- Among enrolled employees in plans with physician office visit coinsurance rates, average coinsurance rates increased from 18.0 percent in 2003 to 20.5 percent in 2016 (Exhibit 5.8).
- Average coinsurance rates rose from 20.1 percent in 2015 to 20.5 percent in 2016, an increase of 0.4 percentage points. This increase followed increases of 0.6 percentage points from 2013 to 2014 and 0.3 percentage points from 2014 to 2015 ( $p < 0.10$ ) (Exhibit 5.8).
- From 2013 to 2014, average coinsurance rates for enrolled employees at firms with 100 or more employees increased from 18.8 to 19.5 percent, but there was no significant change in smaller firms. In contrast, from 2014 to 2015, average coinsurance rates for enrolled employees at firms with fewer than 50 employees increased from 21.5 to 22.6 percent, while there was no significant change at larger employers. From 2015 to 2016, the average

coinsurance rate for all firms increased from 20.1 to 20.5 percent, but there were no significant changes in coinsurance rates within any of the three firm-size categories (Exhibit 5.8).

- Average coinsurance rates for enrolled employees in large firms (100 or more employees) were lower than those for enrolled employees in small firms (fewer than 50 employees) over the entire period and were lower than those for enrolled employees in firms with 50 to 99 employees in 2003 and from 2011 to 2016. In 2016, average coinsurance rates were 22.2 percent and 22.3 percent for enrolled employees in firms with fewer than 50 employees and with 50 to 99 employees, respectively, compared with 20.2 percent for enrolled employees in firms with 100 or more employees (Exhibit 5.8).
- In 2016, 34.9 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, Nevada, New Mexico, North Carolina, Pennsylvania, and Rhode Island. The percentage of enrolled employees with a coinsurance rate was higher than the national average in 15 States: Alaska, Arizona, Connecticut, Idaho, Indiana, Minnesota, Mississippi, Montana, Nebraska, North Dakota, Ohio, Utah, Washington, Wisconsin, and Wyoming (Exhibit 5.9).
- Among enrolled employees in plans with coinsurance rates for physician office visits, the average coinsurance rate was 20.5 percent in 2016. The rate was lower in Arizona, Delaware, Hawaii, Illinois, Massachusetts, Missouri, Pennsylvania, and Rhode Island. The rate was higher in Maine, Montana, New Mexico, South Carolina, Tennessee, and Wyoming (Exhibit 5.10).

### ***Copayments for Physician Office Visits***

- There was no statistically significant change in the overall percentage of enrollees in a health insurance plan with a copayment from 2015 (59.9 percent) to 2016 (60.6 percent). Over the entire period, the percentage of enrollees with a copayment fell by 16.5 percentage points, from 77.1 percent in 2003 to 60.6 percent in 2016 (Exhibit 5.11).
- In 2003 and 2004, the percentages of enrolled employees in plans with copayments were similar for enrollees in firms of all sizes. However, in almost all years from 2005 to 2016, the percentages of enrolled employees with copayments in large firms (100 or more employees) were lower than those in smaller firms (Exhibit 5.11).
- For enrolled employees in plans with copayments, the average copayment increased from \$25.04 to \$25.89 between 2015 and 2016. From 2003 to 2016, average copayments increased by about 57 percent (from \$16.51 to \$25.89), with significant year-to-year increases in every 2-year period except 2014 to 2015 (Exhibit 5.12).
- Average copayments for enrolled employees in firms with 100 or more employees were lower than those for enrolled employees in firms with fewer than 50 employees and with 50 to 99 employees throughout the 2003-2016 period. In 2016, the average copayment for a physician office visit was \$27.82 for enrolled employees in firms with fewer than 50 employees, \$27.43 for enrolled employees in firms with 50 to 99 employees, and \$25.28 for enrolled employees in firms with 100 or more employees (Exhibit 5.12).
- In 2015, 60.6 percent of enrolled employees in the United States had plans with copayments for physician office visits. This figure was lower in Alaska, Arizona, Connecticut, Idaho, Indiana, Minnesota, Montana, Nebraska, North Dakota, Ohio, Vermont, Wisconsin, and

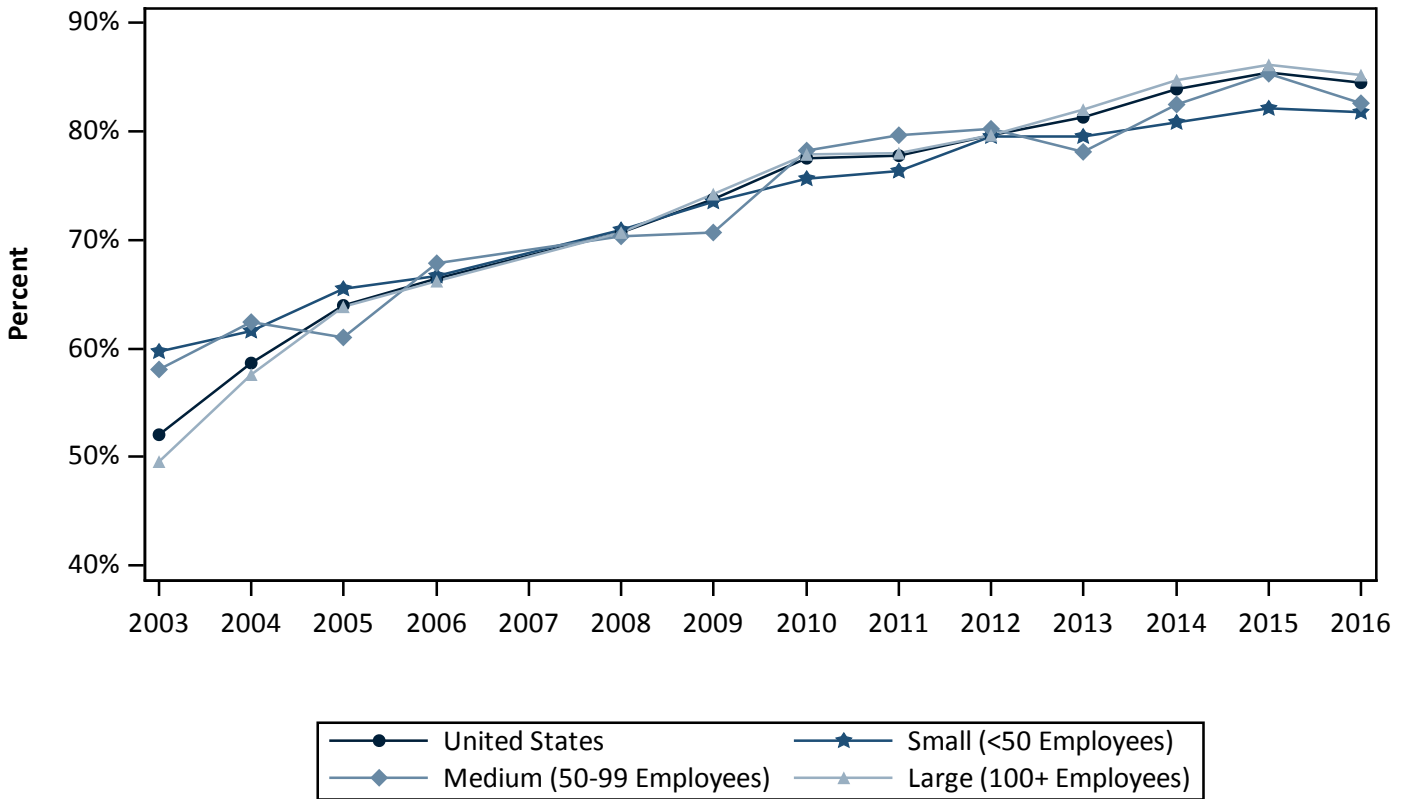


Wyoming. The percentage of enrolled employees with a copayment was higher in Alabama, California, Hawaii, New Jersey, New Mexico, Oklahoma, and Rhode Island (Exhibit 5.13).

- Among plans with copayments, the average copayment was \$25.89 in 2016. This figure was lower in Arizona, Delaware, District of Columbia, Hawaii, Maine, Maryland, Nevada, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Dakota, Utah, Vermont, Virginia, and West Virginia. The average copayment was higher in Alabama, Arkansas, Kansas, Louisiana, Minnesota, Mississippi, Montana, Oklahoma, South Carolina, Texas, Wisconsin, and Wyoming (Exhibit 5.14).

**Exhibit 5.1**

**Percentage of private-sector enrolled employees in a health insurance plan with a deductible, overall and by firm size, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	52.1%	58.7%	63.9%	66.4%	70.7%	73.8%	77.5%	77.8%	79.6%	81.3%	83.9%	85.4%	84.5%
<50	59.7%	61.6%	65.5%	66.6%	70.9%	73.5%	75.7%	76.3%	79.5%	79.5%	80.8%	82.1%	81.7%
50-99	58.0%	62.5%	61.1%	67.9%	70.3%	70.6%	78.2%	79.6%	80.3%	78.0%	82.4%	85.3%	82.5%
100+	49.6%	57.6%	63.8%	66.2%	70.7%	74.2%	77.8%	77.9%	79.6%	81.9%	84.6%	86.1%	85.2%

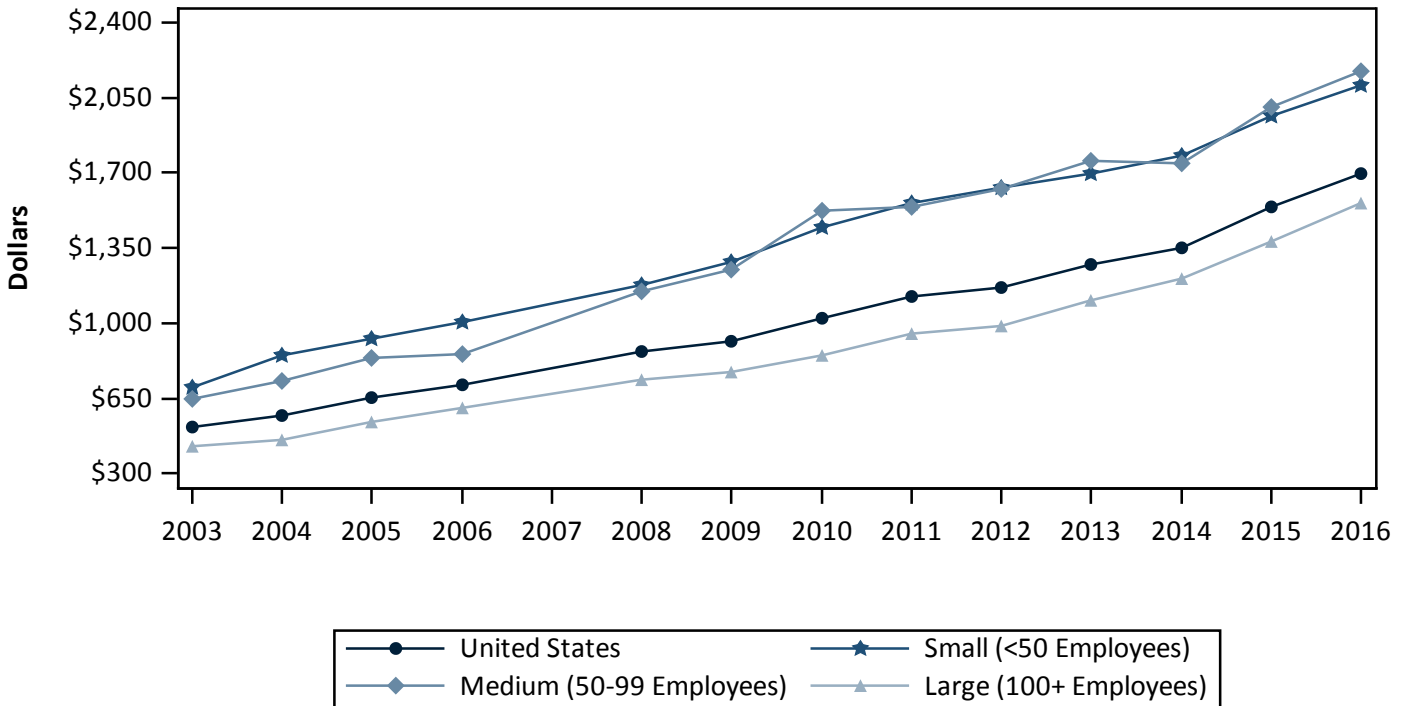
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	\$518	\$573	\$652	\$714	\$869	\$917	\$1,025	\$1,123	\$1,167	\$1,273	\$1,353	\$1,541	\$1,696
<50	\$703	\$849	\$929	\$1,007	\$1,177	\$1,283	\$1,447	\$1,561	\$1,628	\$1,695	\$1,777	\$1,964	\$2,105
50-99	\$647	\$733	\$836	\$855	\$1,149	\$1,249	\$1,522	\$1,543	\$1,622	\$1,755	\$1,744	\$2,008	\$2,173
100+	\$427	\$457	\$539	\$605	\$740	\$774	\$852	\$951	\$989	\$1,106	\$1,205	\$1,383	\$1,558

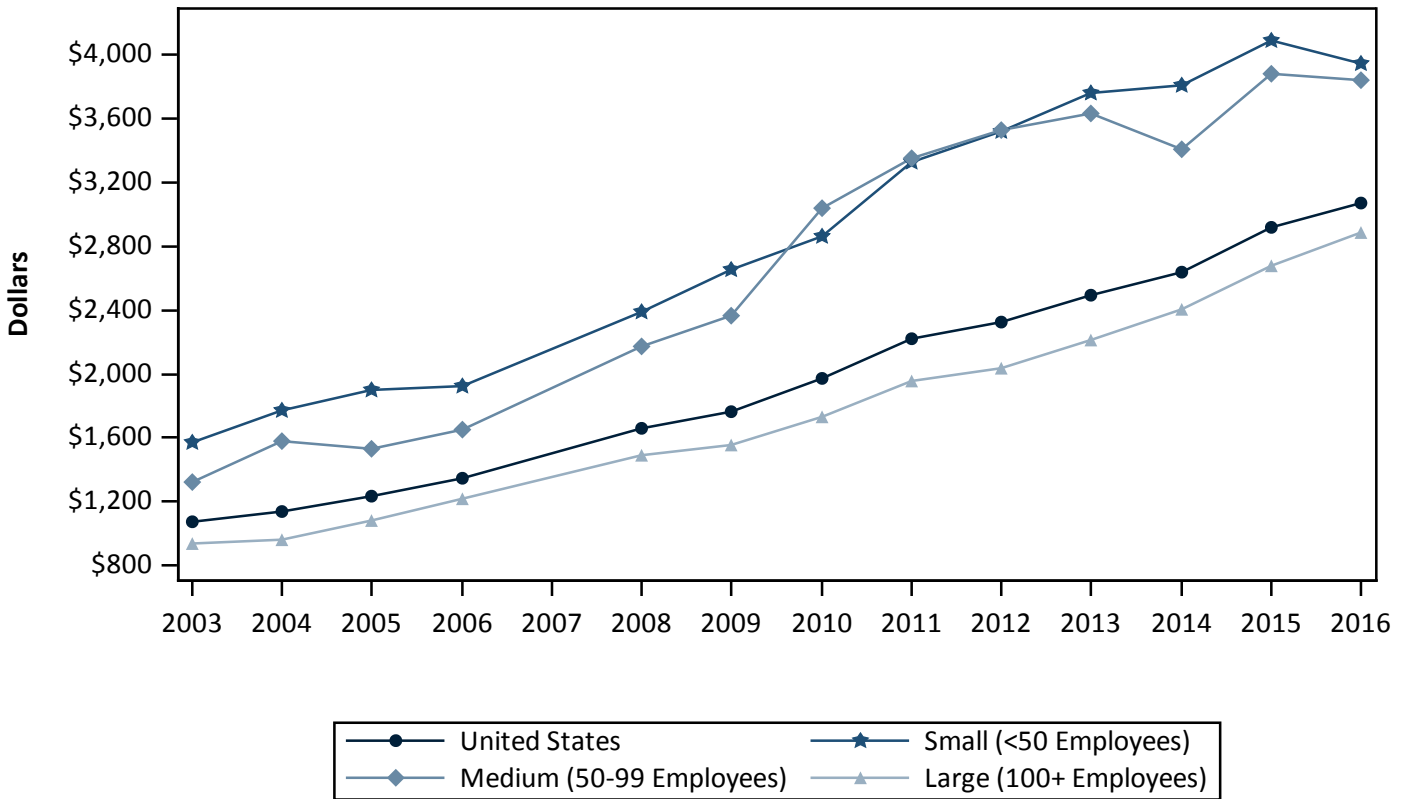
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

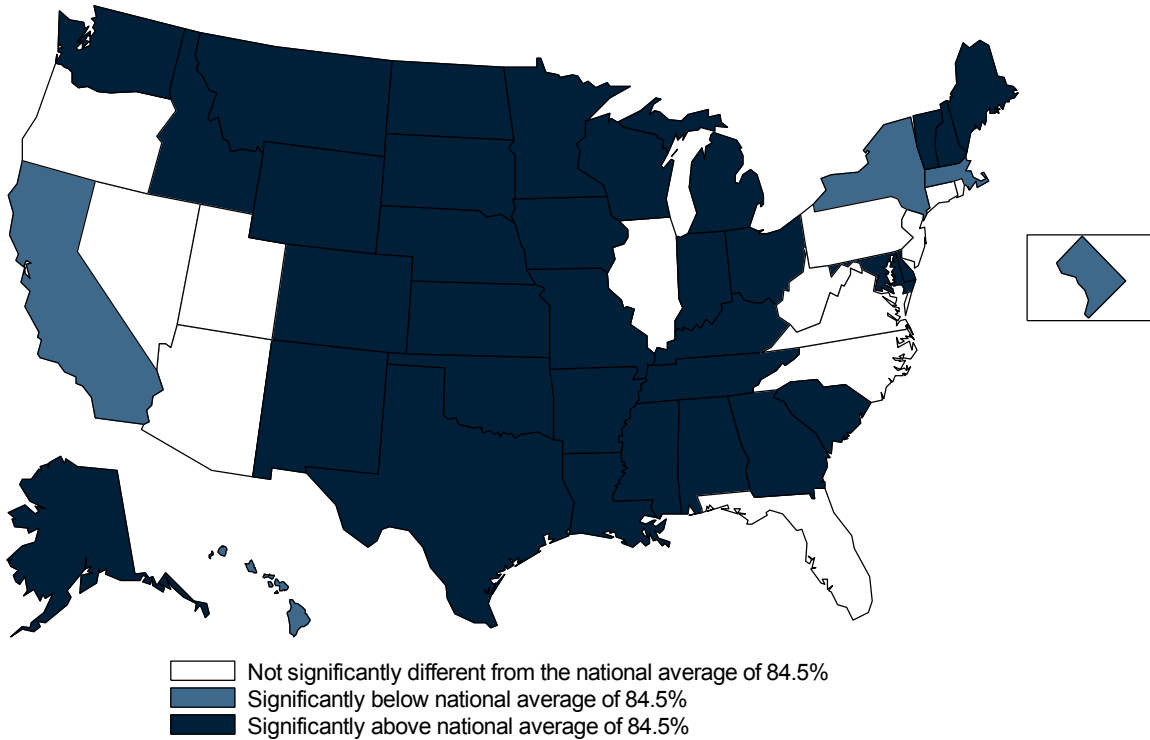
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	\$1,079	\$1,143	\$1,232	\$1,351	\$1,658	\$1,761	\$1,975	\$2,220	\$2,322	\$2,491	\$2,640	\$2,915	\$3,069
<50	\$1,575	\$1,771	\$1,899	\$1,923	\$2,389	\$2,652	\$2,857	\$3,329	\$3,515	\$3,761	\$3,810	\$4,090	\$3,940
50-99	\$1,326	\$1,577	\$1,534	\$1,649	\$2,173	\$2,362	\$3,040	\$3,349	\$3,523	\$3,634	\$3,404	\$3,875	\$3,840
100+	\$937	\$959	\$1,082	\$1,215	\$1,488	\$1,552	\$1,734	\$1,954	\$2,038	\$2,215	\$2,408	\$2,676	\$2,887

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2016**



Alabama	91.9%*	Kentucky	96.0%*	North Dakota	94.4%*
Alaska	95.8%*	Louisiana	90.8%*	Ohio	94.9%*
Arizona	88.5%	Maine	94.4%*	Oklahoma	93.2%*
Arkansas	95.5%*	Maryland	88.7%*	Oregon	87.1%
California	61.6%*	Massachusetts	77.5%*	Pennsylvania	82.2%
Colorado	89.7%*	Michigan	91.4%*	Rhode Island	83.5%
Connecticut	87.6%	Minnesota	94.7%*	South Carolina	95.1%*
Delaware	90.4%*	Mississippi	94.3%*	South Dakota	96.8%*
District of Columbia	75.0%*	Missouri	88.9%*	Tennessee	93.6%*
Florida	82.5%	Montana	96.6%*	Texas	91.8%*
Georgia	91.3%*	Nebraska	97.4%*	Utah	87.0%
Hawaii	40.1%*	Nevada	83.0%	Vermont	94.7%*
Idaho	96.7%*	New Hampshire	91.6%*	Virginia	80.5%
Illinois	83.8%	New Jersey	83.1%	Washington	91.8%*
Indiana	92.4%*	New Mexico	90.2%*	West Virginia	89.7%
Iowa	93.1%*	New York	71.6%*	Wisconsin	95.6%*
Kansas	95.3%*	North Carolina	88.2%	Wyoming	94.2%*

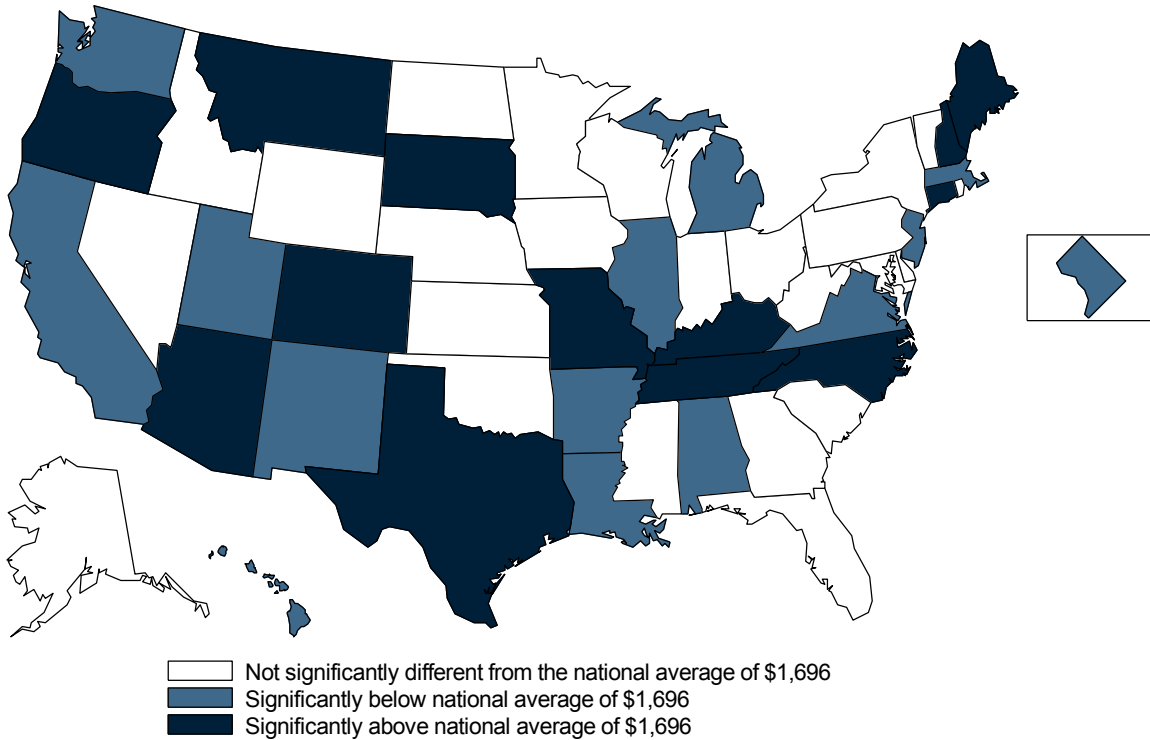
**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**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 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, 2016**



Alabama	\$1,205*	Kentucky	\$1,905*	North Dakota	\$1,695
Alaska	\$1,707	Louisiana	\$1,494*	Ohio	\$1,781
Arizona	\$1,958*	Maine	\$2,103*	Oklahoma	\$1,787
Arkansas	\$1,418*	Maryland	\$1,727	Oregon	\$1,950*
California	\$1,476*	Massachusetts	\$1,391*	Pennsylvania	\$1,603
Colorado	\$1,880*	Michigan	\$1,379*	Rhode Island	\$1,583
Connecticut	\$1,959*	Minnesota	\$1,782	South Carolina	\$1,719
Delaware	\$1,567	Mississippi	\$1,709	South Dakota	\$1,889*
District of Columbia	\$1,181*	Missouri	\$2,009*	Tennessee	\$2,142*
Florida	\$1,694	Montana	\$2,039*	Texas	\$1,872*
Georgia	\$1,738	Nebraska	\$1,710	Utah	\$1,438*
Hawaii	\$988*	Nevada	\$1,634	Vermont	\$1,819
Idaho	\$1,732	New Hampshire	\$2,434*	Virginia	\$1,523*
Illinois	\$1,474*	New Jersey	\$1,515*	Washington	\$1,379*
Indiana	\$1,866	New Mexico	\$1,301*	West Virginia	\$1,758
Iowa	\$1,659	New York	\$1,789	Wisconsin	\$1,828
Kansas	\$1,715	North Carolina	\$1,963*	Wyoming	\$1,746

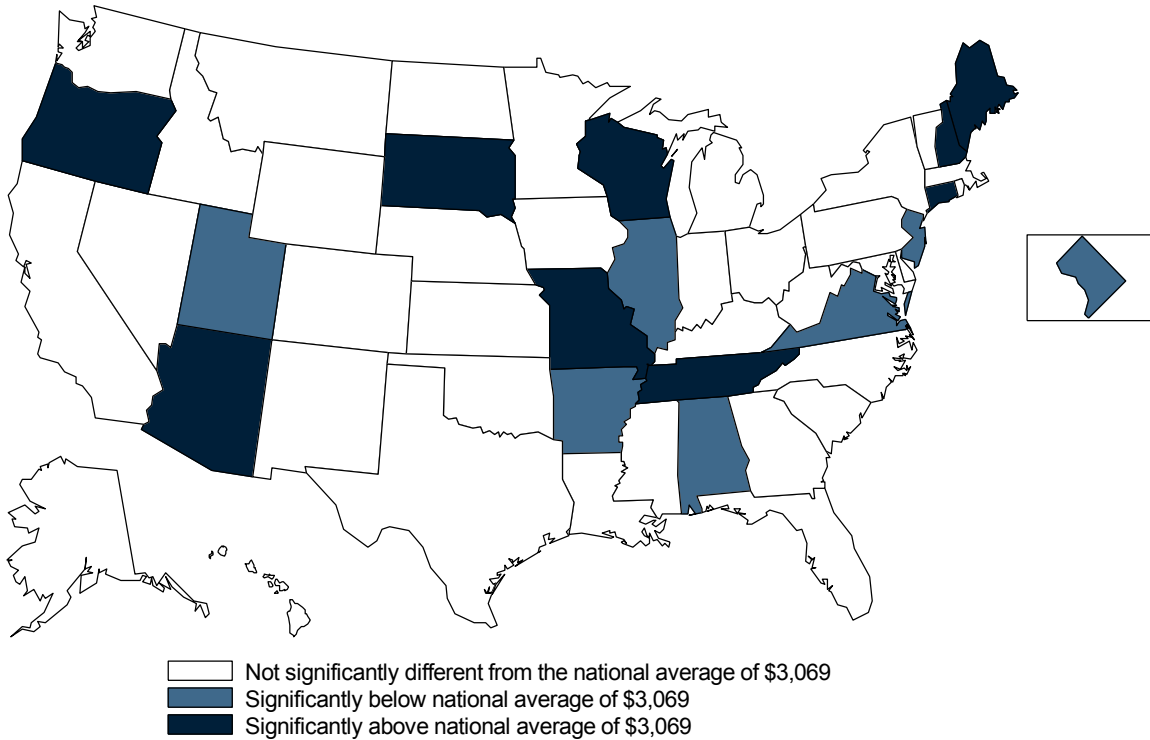
**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of \$1,696 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, 2016**

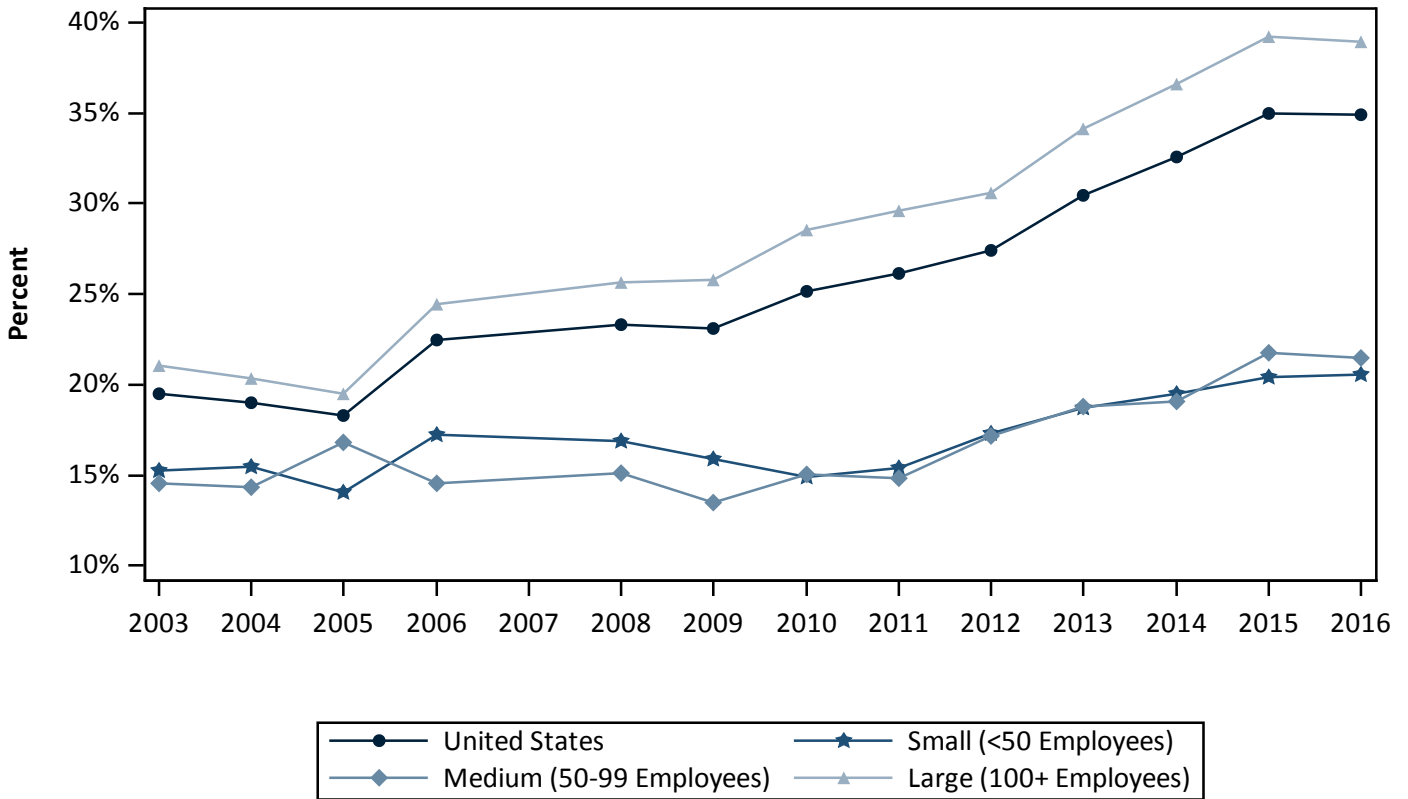


Alabama	\$2,193*	Kentucky	\$3,520	North Dakota	\$2,877
Alaska	\$2,845	Louisiana	\$2,738	Ohio	\$3,119
Arizona	\$3,652*	Maine	\$3,714*	Oklahoma	\$3,051
Arkansas	\$2,632*	Maryland	\$3,100	Oregon	\$3,988*
California	\$2,790	Massachusetts	\$2,746	Pennsylvania	\$3,030
Colorado	\$3,481	Michigan	\$2,834	Rhode Island	\$2,912
Connecticut	\$4,041*	Minnesota	\$3,295	South Carolina	\$3,133
Delaware	\$3,112	Mississippi	\$3,111	South Dakota	\$3,767*
District of Columbia	\$2,234*	Missouri	\$3,773*	Tennessee	\$3,662*
Florida	\$3,118	Montana	\$3,590	Texas	\$3,185
Georgia	\$2,950	Nebraska	\$3,424	Utah	\$2,606*
Hawaii	\$2,358	Nevada	\$2,712	Vermont	\$3,145
Idaho	\$3,410	New Hampshire	\$4,992*	Virginia	\$2,683*
Illinois	\$2,628*	New Jersey	\$2,689*	Washington	\$2,747
Indiana	\$3,391	New Mexico	\$2,724	West Virginia	\$3,156
Iowa	\$2,921	New York	\$3,099	Wisconsin	\$3,534*
Kansas	\$3,056	North Carolina	\$3,215	Wyoming	\$3,024

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.  
**Note:** \* Indicates the estimate is statistically different from the national average of \$3,069 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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	19.5%	19.0%	18.3%	22.4%	23.3%	23.1%	25.1%	26.1%	27.4%	30.4%	32.6%	35.0%	34.9%
<50	15.2%	15.5%	14.0%	17.2%	16.9%	15.9%	14.9%	15.4%	17.3%	18.7%	19.5%	20.4%	20.6%
50-99	14.6%	14.4%	16.8%	14.5%	15.1%	13.5%	15.1%	14.8%	17.2%	18.8%	19.1%	21.8%	21.5%
100+	21.0%	20.4%	19.5%	24.4%	25.6%	25.7%	28.5%	29.6%	30.6%	34.1%	36.6%	39.2%	38.9%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

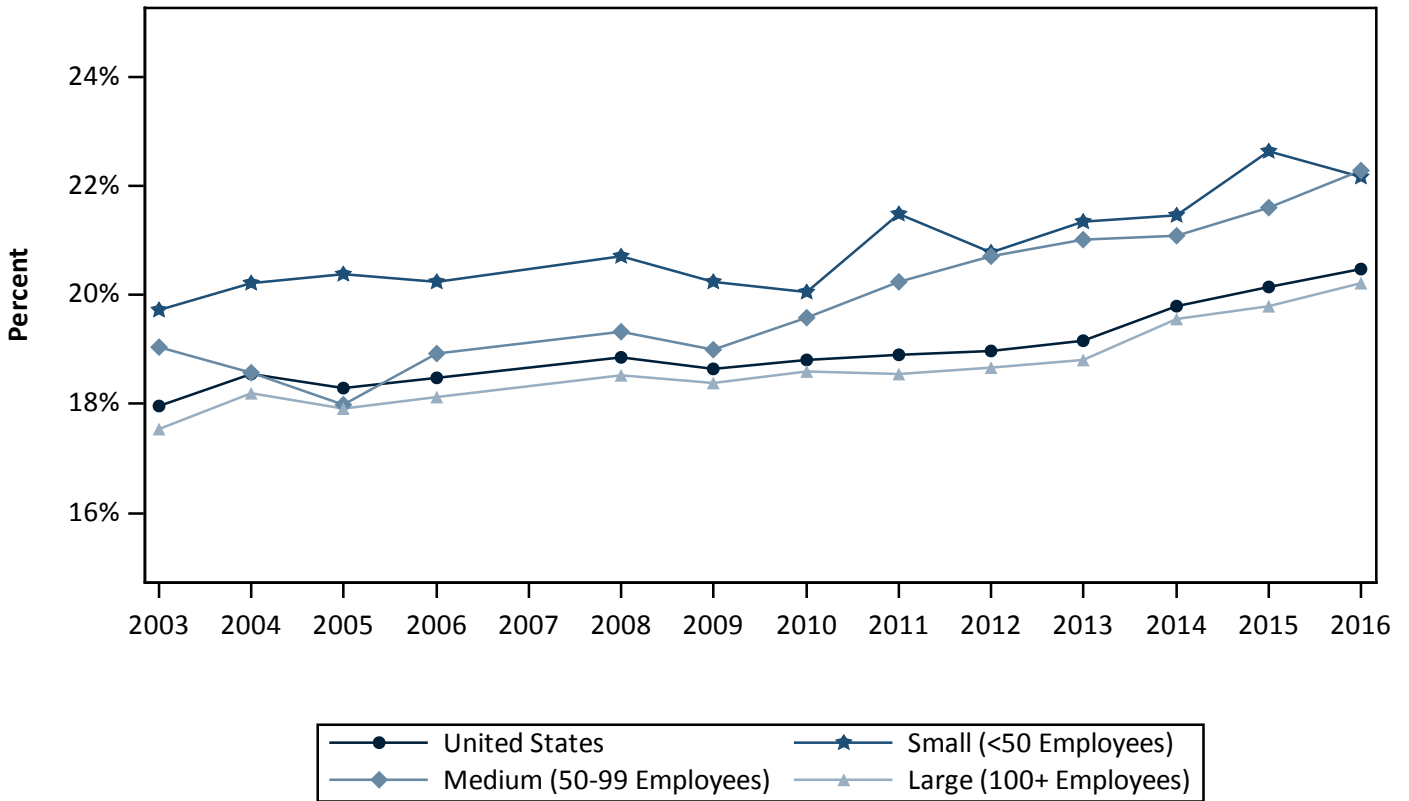
**Note:** Medical Expenditure Panel Survey-Insurance Component estimates are not available for 2007.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

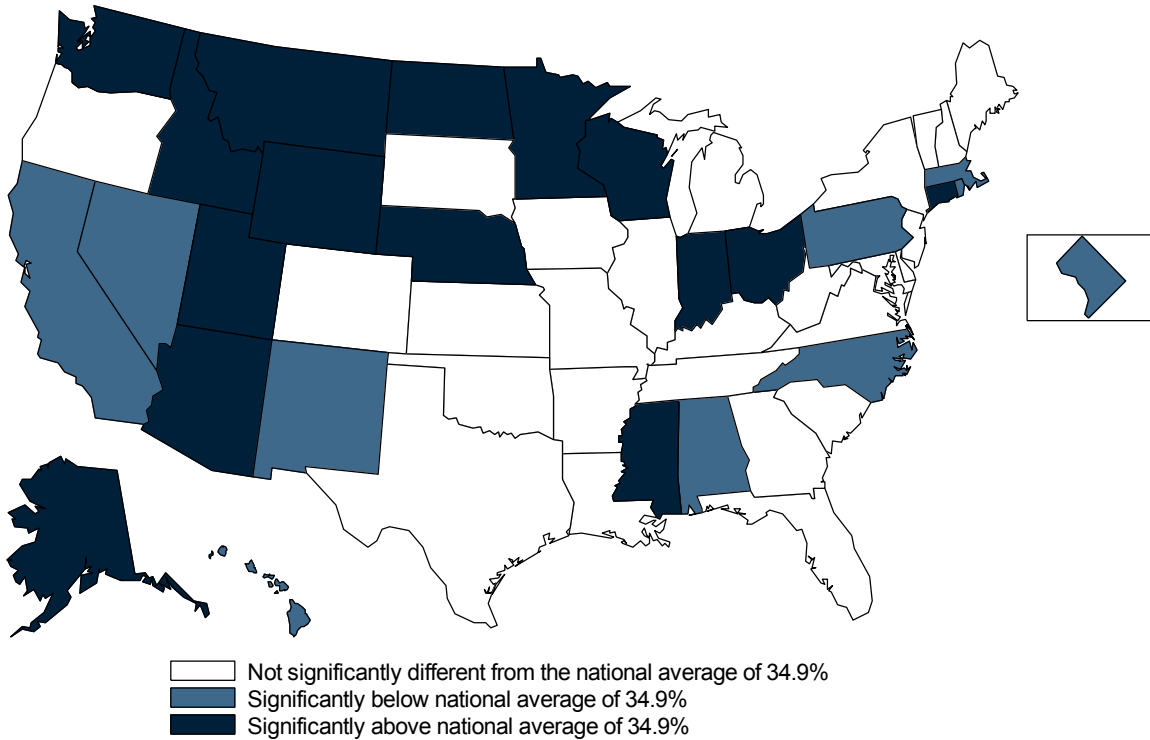
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	18.0%	18.6%	18.3%	18.5%	18.9%	18.6%	18.8%	18.9%	19.0%	19.2%	19.8%	20.1%	20.5%
<50	19.7%	20.2%	20.4%	20.2%	20.7%	20.2%	20.0%	21.5%	20.8%	21.3%	21.5%	22.6%	22.2%
50-99	19.0%	18.6%	18.0%	18.9%	19.3%	19.0%	19.6%	20.2%	20.7%	21.0%	21.1%	21.6%	22.3%
100+	17.5%	18.2%	17.9%	18.1%	18.5%	18.4%	18.6%	18.5%	18.7%	18.8%	19.5%	19.8%	20.2%

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2016**



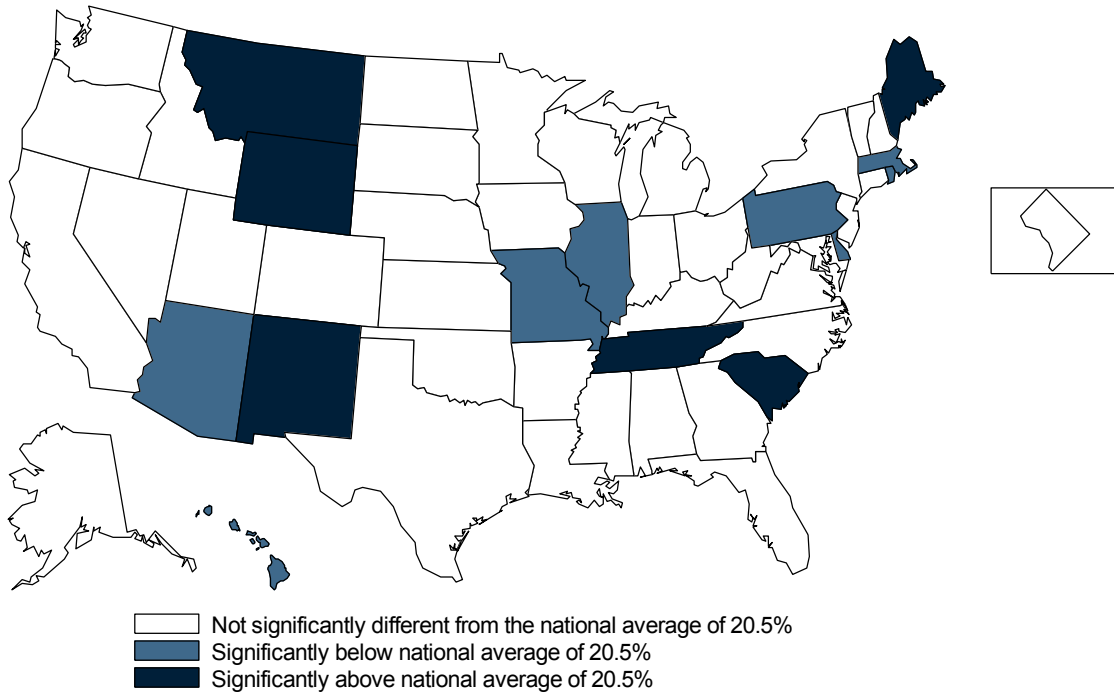
Alabama	27.1%*	Kentucky	42.3%	North Dakota	51.9%*
Alaska	52.5%*	Louisiana	35.2%	Ohio	43.1%*
Arizona	44.4%*	Maine	38.0%	Oklahoma	32.6%
Arkansas	33.7%	Maryland	34.2%	Oregon	38.9%
California	27.6%*	Massachusetts	24.5%*	Pennsylvania	28.8%*
Colorado	35.9%	Michigan	31.8%	Rhode Island	23.4%*
Connecticut	50.1%*	Minnesota	46.6%*	South Carolina	37.3%
Delaware	43.1%	Mississippi	47.3%*	South Dakota	33.2%
District of Columbia	24.9%*	Missouri	38.2%	Tennessee	40.5%
Florida	33.3%	Montana	46.0%*	Texas	35.2%
Georgia	32.6%	Nebraska	47.7%*	Utah	43.5%*
Hawaii	27.8%*	Nevada	23.6%*	Vermont	31.7%
Idaho	47.6%*	New Hampshire	34.7%	Virginia	31.6%
Illinois	32.1%	New Jersey	30.8%	Washington	49.0%*
Indiana	43.4%*	New Mexico	23.3%*	West Virginia	39.4%
Iowa	35.1%	New York	33.8%	Wisconsin	53.1%*
Kansas	41.6%	North Carolina	26.3%*	Wyoming	44.3%*

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of 34.9 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, 2016**



Alabama	20.5%	Kentucky	20.4%	North Dakota	19.7%
Alaska	20.7%	Louisiana	21.6%	Ohio	20.8%
Arizona	18.2%*	Maine	21.9%*	Oklahoma	20.5%
Arkansas	21.0%	Maryland	21.2%	Oregon	22.3%
California	20.8%	Massachusetts	18.0%*	Pennsylvania	18.5%*
Colorado	20.0%	Michigan	20.3%	Rhode Island	18.7%*
Connecticut	20.8%	Minnesota	21.8%	South Carolina	22.3%*
Delaware	18.3%*	Mississippi	22.4%	South Dakota	21.5%
District of Columbia	21.4%	Missouri	19.5%*	Tennessee	22.0%*
Florida	21.2%	Montana	24.1%*	Texas	21.0%
Georgia	20.3%	Nebraska	20.1%	Utah	20.2%
Hawaii	16.7%*	Nevada	21.3%	Vermont	21.9%
Idaho	21.0%	New Hampshire	18.3%	Virginia	19.8%
Illinois	19.2%*	New Jersey	21.2%	Washington	19.8%
Indiana	19.3%	New Mexico	23.8%*	West Virginia	20.7%
Iowa	19.8%	New York	19.7%	Wisconsin	20.0%
Kansas	21.8%	North Carolina	22.6%	Wyoming	22.7%*

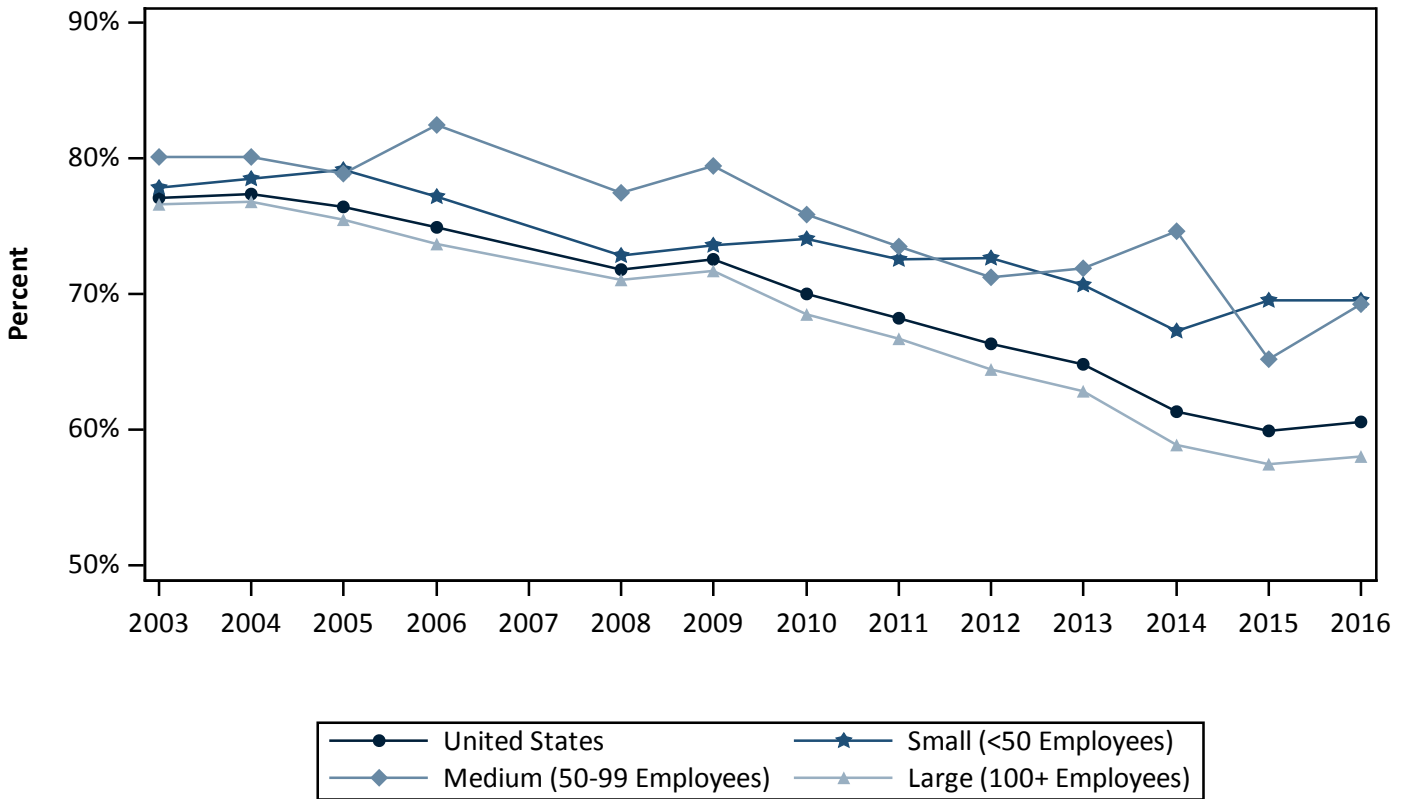
**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of 20.5 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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	77.1%	77.3%	76.4%	74.9%	71.8%	72.6%	70.0%	68.2%	66.3%	64.8%	61.3%	59.9%	60.6%
<50	77.9%	78.5%	79.2%	77.2%	72.8%	73.6%	74.0%	72.6%	72.7%	70.6%	67.3%	69.6%	69.5%
50-99	80.1%	80.1%	78.9%	82.4%	77.5%	79.4%	75.8%	73.5%	71.2%	71.9%	74.6%	65.2%	69.3%
100+	76.6%	76.8%	75.5%	73.7%	71.1%	71.7%	68.5%	66.7%	64.5%	62.9%	58.9%	57.4%	58.1%

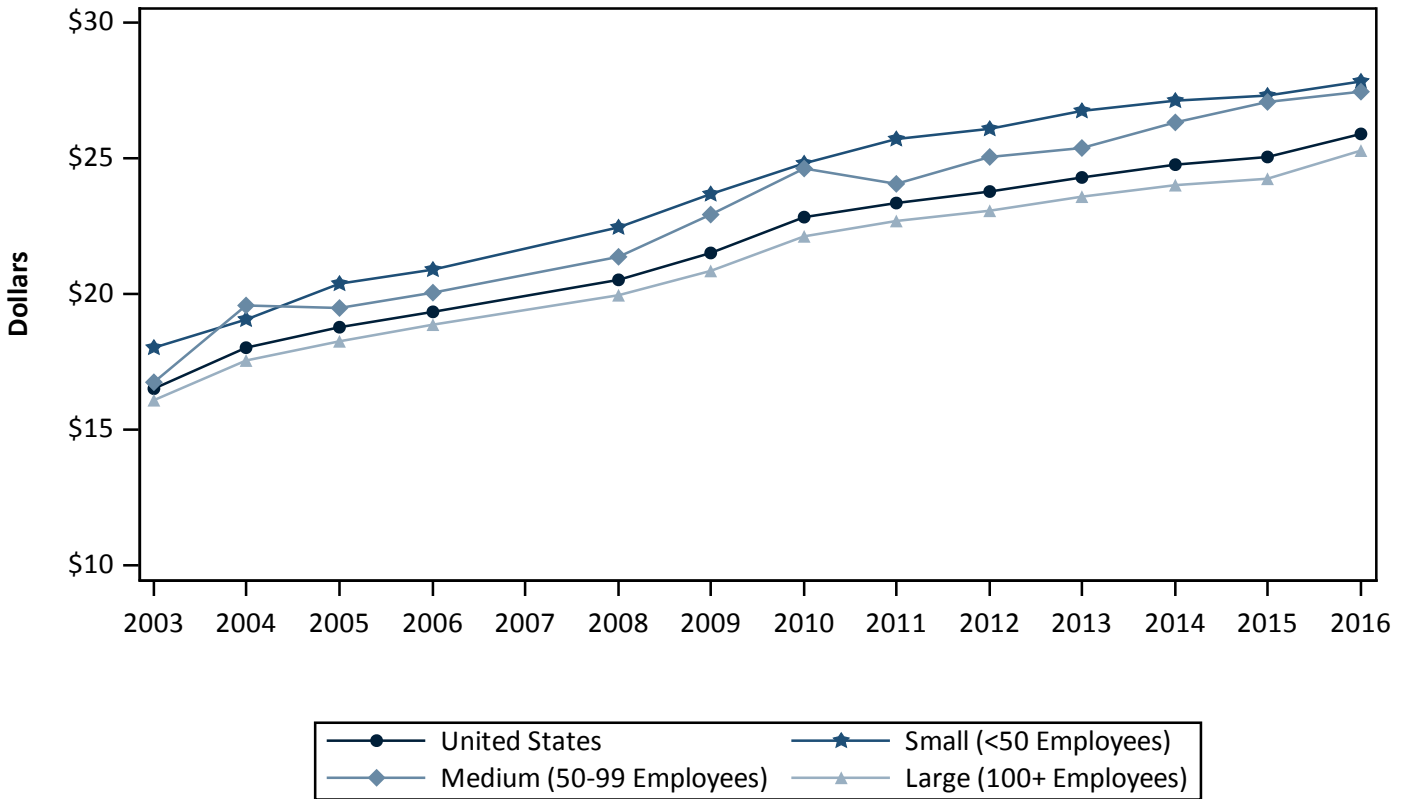
**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2003-2016**



**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.  
**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, 2003-2016**

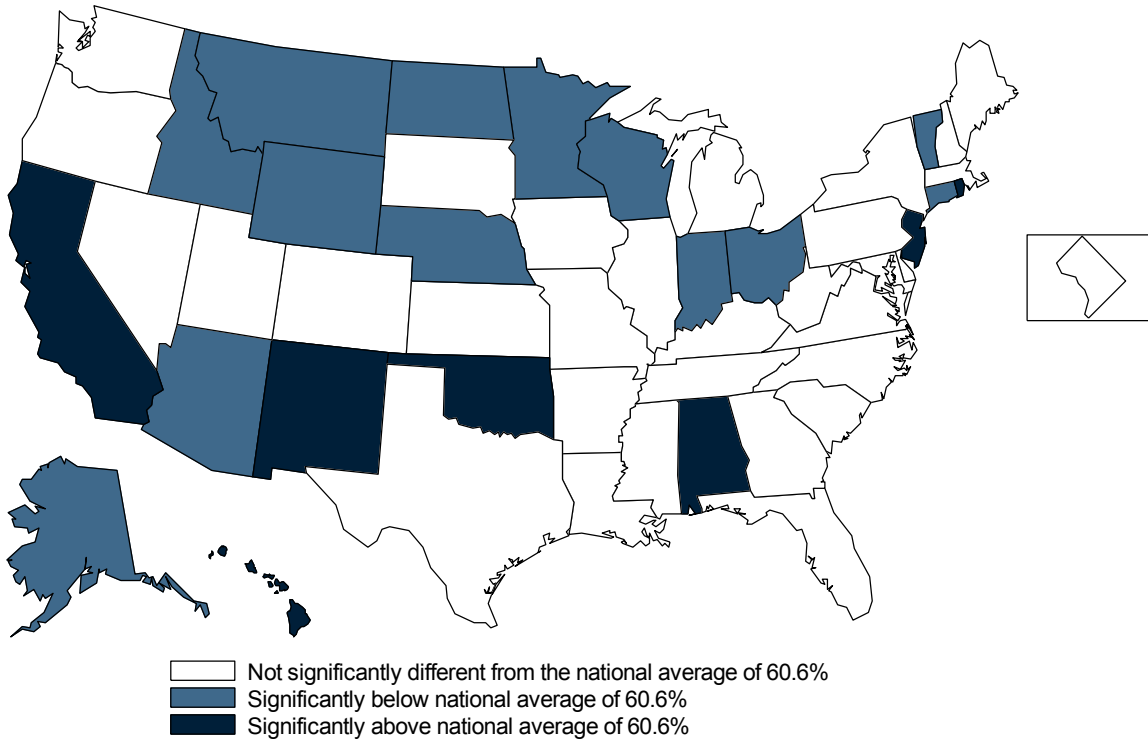
Number of Employees	2003	2004	2005	2006	2008	2009	2010	2011	2012	2013	2014	2015	2016
U.S.	\$16.51	\$18.01	\$18.76	\$19.33	\$20.53	\$21.53	\$22.82	\$23.34	\$23.77	\$24.31	\$24.77	\$25.04	\$25.89
<50	\$18.02	\$19.05	\$20.40	\$20.88	\$22.43	\$23.66	\$24.79	\$25.71	\$26.07	\$26.75	\$27.14	\$27.30	\$27.82
50-99	\$16.78	\$19.57	\$19.49	\$20.03	\$21.38	\$22.93	\$24.62	\$24.05	\$25.05	\$25.37	\$26.29	\$27.06	\$27.43
100+	\$16.09	\$17.58	\$18.25	\$18.85	\$19.96	\$20.86	\$22.13	\$22.68	\$23.07	\$23.60	\$24.03	\$24.25	\$25.28

**Source:** Medical Expenditure Panel Survey-Insurance Component, private-sector establishments, 2003-2016.

**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, 2016**



Alabama	69.4%*	Kentucky	54.6%	North Dakota	43.9%*
Alaska	49.5%*	Louisiana	58.0%	Ohio	50.0%*
Arizona	51.5%*	Maine	55.8%	Oklahoma	67.4%*
Arkansas	61.9%	Maryland	61.3%	Oregon	60.5%
California	69.4%*	Massachusetts	66.3%	Pennsylvania	64.9%
Colorado	53.8%	Michigan	66.4%	Rhode Island	68.4%*
Connecticut	42.3%*	Minnesota	37.3%*	South Carolina	59.3%
Delaware	52.3%	Mississippi	58.4%	South Dakota	62.2%
District of Columbia	65.3%	Missouri	57.4%	Tennessee	54.5%
Florida	65.6%	Montana	37.4%*	Texas	60.4%
Georgia	66.6%	Nebraska	45.7%*	Utah	55.8%
Hawaii	68.9%*	Nevada	67.3%	Vermont	51.5%*
Idaho	51.6%*	New Hampshire	56.5%	Virginia	60.0%
Illinois	63.8%	New Jersey	69.5%*	Washington	55.1%
Indiana	49.0%*	New Mexico	77.8%*	West Virginia	61.9%
Iowa	55.8%	New York	60.4%	Wisconsin	45.0%*
Kansas	57.4%	North Carolina	64.4%	Wyoming	45.4%*

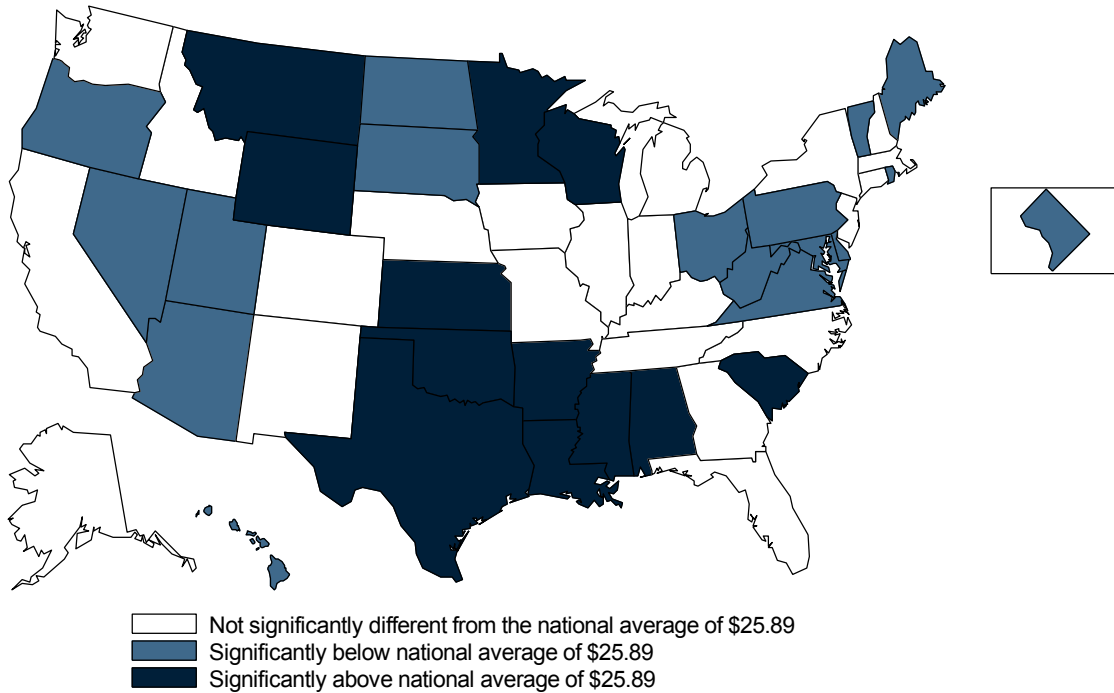
**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of 60.6 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, 2016**



Alabama	\$29.50*	Kentucky	\$25.22	North Dakota	\$24.75*
Alaska	\$26.58	Louisiana	\$29.42*	Ohio	\$24.28*
Arizona	\$24.70*	Maine	\$23.41*	Oklahoma	\$28.29*
Arkansas	\$27.32*	Maryland	\$22.49*	Oregon	\$24.70*
California	\$25.41	Massachusetts	\$24.91	Pennsylvania	\$22.72*
Colorado	\$25.14	Michigan	\$25.57	Rhode Island	\$21.03*
Connecticut	\$26.55	Minnesota	\$27.80*	South Carolina	\$27.16*
Delaware	\$23.74*	Mississippi	\$27.87*	South Dakota	\$24.51*
District of Columbia	\$20.39*	Missouri	\$26.11	Tennessee	\$26.61
Florida	\$26.28	Montana	\$27.97*	Texas	\$28.70*
Georgia	\$26.64	Nebraska	\$26.07	Utah	\$23.36*
Hawaii	\$16.64*	Nevada	\$24.33*	Vermont	\$21.98*
Idaho	\$27.18	New Hampshire	\$26.21	Virginia	\$24.02*
Illinois	\$26.32	New Jersey	\$25.93	Washington	\$24.36
Indiana	\$26.63	New Mexico	\$27.30	West Virginia	\$23.64*
Iowa	\$25.50	New York	\$26.41	Wisconsin	\$29.35*
Kansas	\$27.13*	North Carolina	\$26.85	Wyoming	\$27.78*

**Source:** Medical Expenditure Panel Survey - Insurance Component, private-sector establishments, 2016.

**Note:** \* Indicates the estimate is statistically different from the national average of \$25.89 at  $p < 0.05$ .

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



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