National Uninsured Rate Remains Largely Unchanged at 7.7 Percent in the Third Quarter of 2023

This newly released data from the National Health Interview Survey indicates no statistically significant change in the uninsured rate from the first or second quarter of 2023 and a continued steady decline in uninsurance since 2020.

KEY POINTS

- According to newly released data from the National Health Interview Survey, in Q3 2023 the national uninsured rate for all ages was 7.7 percent, or 25.6 million individuals.
- Quarter-to-quarter changes in the national uninsured rate during the first three quarters of 2023 are not statistically significant; however, overall trends indicate a steady decline in uninsurance since 2020.
- An estimated 11.4 percent of adults ages 18-64 and 3.4 percent of children under age 18 were uninsured in Q3 2023. Compared to Q1 2020, the uninsured rates for adults and children have decreased by 2.5 and 1.4 percentage points, respectively.
- Relative to the first quarter of 2023, the percentage of individuals reporting public coverage in Q3 2023 was slightly higher for adults ages 18-64 (22.9 percent vs. 22.4 percent) as well as for children (44.8 percent vs. 42.3 percent), though neither of these differences is statistically significant.
- For both adults and children, the percentage of individuals reporting private coverage in Q3 2023 was slightly lower compared to Q1 2023, though these changes are not statistically significant.
- Data from Q2 and Q3 2023 provide estimates of insurance coverage during the first six months after the resumption of regular Medicaid renewal operations by some states. Future federal survey data releases will provide more evidence on the effect of this process on health insurance coverage.

BACKGROUND

In recent years, a number of federal policies have aimed to support health insurance coverage. The Families First Coronavirus Response Act (FFCRA) provided states with additional federal financial support if they met certain conditions including agreeing to maintain the enrollment of most Medicaid beneficiaries during a period that began in March 2020 and ended on March 31, 2023. The 2021 American Rescue Plan Act (ARP) and the 2022 Inflation Reduction Act (IRA) increased Marketplace premium tax credits for individuals and families with incomes between 100 and 400 percent of the Federal Poverty Level (FPL) and extended eligibility for Marketplace premium tax credits to those with income above 400 percent of the FPL. The Biden-Harris Administration also took administrative actions, such as extending and establishing special enrollment periods for Marketplace coverage. At the state level, seven states have implemented the Affordable Care Act (ACA) Medicaid expansions since 2020 (UT, ID, NE, OK, MO, SD, and NC).

These policies, combined with a strong labor market, have contributed to increased insurance coverage. Between 2019 and Q2 2023, the percent of Americans of all ages without health coverage fell from 10.3

percent to 7.2 percent, the lowest rate recorded since national data on insurance coverage has been tracked.[1] Increases in health coverage were particularly large for Black and Hispanic adults, who historically have had low rates of coverage relative to other demographic groups.

This Data Point examines newly released data from the National Health Interview Survey (NHIS) for the third quarter of 2023 to assess recent changes in health coverage. The first six months of return to regular renewals in the Medicaid program are covered in this data release. Future federal survey data will provide further understanding of the ongoing effects of this process on national health coverage.

METHODS

We analyzed data from the NHIS including newly released data providing insurance coverage estimates for Q3 2023. The NHIS, which is administered by the National Center for Health Statistics, is the largest nationally representative survey focused primarily on the health of the civilian, noninstitutionalized US population. As such, it provides a reliable and consistent data source for assessing long-term changes in health coverage. Because the survey's response rate fell in early 2020 as a result of the COVID-19 pandemic, NHIS results in 2020 may not be as reliable for comparisons to survey results from prior years. Since 2021, response rates have more closely resembled pre-pandemic levels. More details on NHIS data collection can be found in a previous ASPE report.[2]

The quarterly estimates are from the NHIS Early Release Program, which provides a limited set of summary statistics on health coverage and other outcomes. For health coverage, the Early Release data include national estimates of health coverage by broad categories. Because only a single measure of public coverage is reported, it is not possible to analyze changes in Medicaid coverage specifically. Similarly, employer-sponsored insurance, which represents the majority of private insurance, is not separately identified, but rather included in the private insurance category. Estimates of the uninsured rate and public and private coverage are provided for broad demographic groups. All estimates are unadjusted percentages based on preliminary data files and are released prior to final data editing and final weighting. Because of a smaller sample size, quarterly estimates have wider confidence intervals than annual estimates.

FINDINGS

To put the most recent data in historical context, Figure 1 plots the national uninsured rates for the U.S. population (all ages) since 2000. Each data point except the last one (for Q3 2023) represents an annual estimate from the NHIS. From 2000 to 2010, the uninsured rate fluctuated with a slight upward trend. In 2010, the rate was 16 percent. For non-elderly adults, the uninsured rate was higher, at 22.3 percent, while for children it was lower, at 7.8 percent (data not shown).

The ACA was enacted in March 2010. Its first significant coverage provision, which allowed young adults to stay on their parents' insurance until age 26, went into effect in September of that year.[3] The ACA's Medicaid expansion and private insurance reforms went into effect in January 2014. The impact of these policies is evident in the graph: by 2015 the uninsured rate had fallen to 9.1 percent, a decline of over 40 percent compared to 2010. The rate stayed at roughly that level the next three years before increasing in 2019.[a] As noted, beginning in 2020, several policies were enacted to support health coverage during the pandemic. The annual uninsured rate fell from 10.3 percent in 2019 to 9.7 percent in 2020 and then fell again in the next

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[a] The NHIS underwent a survey redesign in 2019. Though the questions used to assess health coverage did not change, the questionnaire design and sample weighting were revised. An analysis conducted by the National Center for Health Statistics concluded that the redesign may have caused the uninsured rate for adults to increase by 0.7 percentage points. See https://www.cdc.gov/nchs/data/nhis/earlyrelease/EReval202009-508.pdf for further details.

two years. In 2022, the uninsured rate for the full population was 8.4 percent. In Q3 2023, the uninsured rate was 7.7 percent,[4] which is not significantly different from the estimated uninsured rate of 7.4 percent for the first six months of 2023.[5] The uninsured rate for Q3 2023 corresponds to 25.6 million people without health insurance.

Figure 1. **National Uninsured Rate, All Ages (2000 – Q3 2023)**
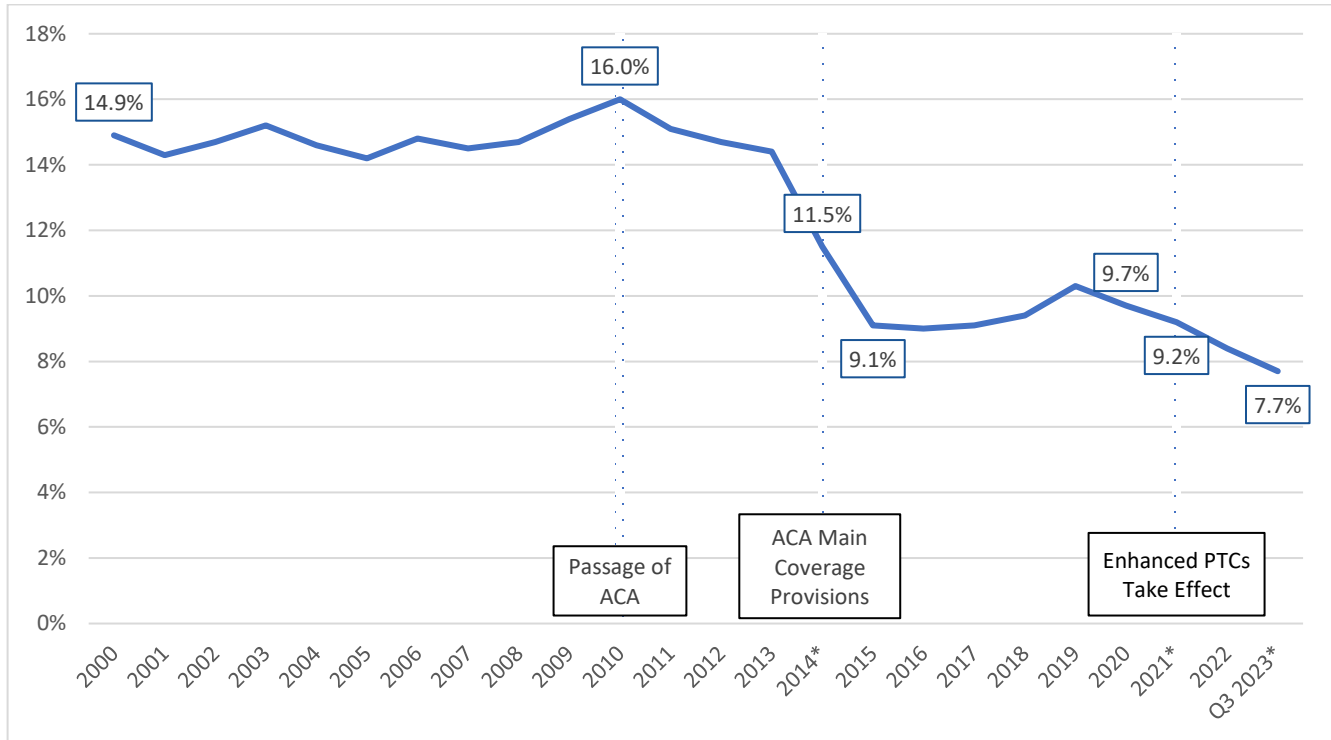
Source: National Health Interview Survey's Health Insurance Coverage Reports, 2000-2022.
https://www.cdc.gov/nchs/nhis/healthinsurancecoverage.htm; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023.
https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf
Note: *The ACA's individual and employer responsibility provisions, state insurance Exchanges, Medicaid expansions, and subsidies went into effect in 2014. The ARPA's premium tax credit provisions were effective for PY2021 and PY2022, and the IRA extended these provisions for PY2023 through PY2025.
Beginning in 2004, two additional questions were added to the NHIS insurance section to reduce potential errors in reporting Medicare and Medicaid status, resulting in two methods to estimate uninsurance. Beginning in 2005, all estimates were calculated using Method 2. Please see "Technical Notes" for the Early Release of Health Insurance Estimates Based on Data From the 2010 National Health Interview Survey for more information.

To focus on recent trends, Figure 2 presents quarterly data on health coverage from the start of the pandemic (Q1 2020) through the most recent data (Q3 2023). Data are reported separately for non-elderly adults (ages 18 to 64) and children (ages 0 to 17). For both age groups, the uninsured rate was generally trending down over this period. Between Q2 and Q3 2023, the rate increased slightly for adults and decreased for children, though neither of these changes are statistically significant.

Because of sampling variability, it is difficult to interpret quarter-to-quarter changes, which are often not statistically significant. To better understand the overall trends, we fit linear regressions since Q1 2020 to the two data series reported in Figure 2. For adults, the regression results indicate a statistically significant average decline of 0.2 percentage points per quarter from Q1 2020 to Q3 2023. For children, the slope of the best fit line is smaller in absolute value but still statistically significant, implying an average quarterly decline of the uninsured rate of 0.1 percentage points per quarter during the same time frame.

Figure 2. Quarterly Uninsured Rate, Populations Ages 18-64 and Ages 0-17 (Q1 2020 – Q3 2023)
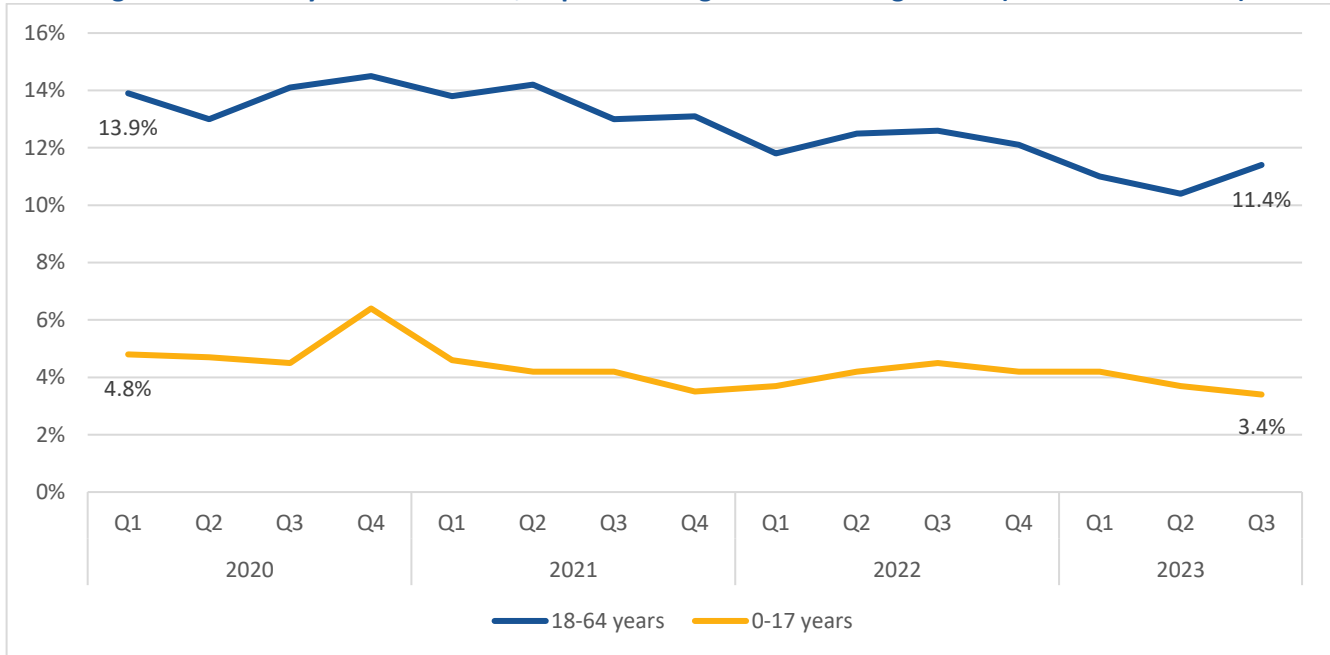
Source: National Health Interview Survey's Health Insurance Coverage Reports.
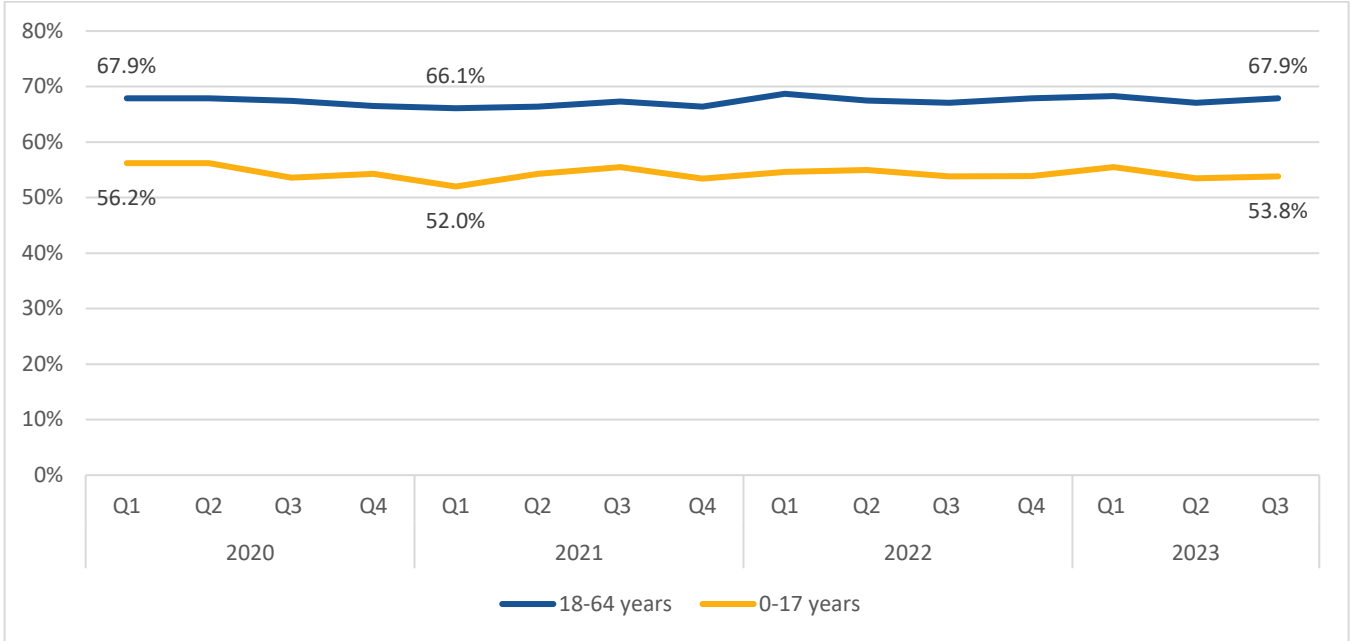https://www.cdc.gov/nchs/nhis/healthinsurancecoverage.htm; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023.
https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf

The uninsured rate for adults increased by one percentage point between Q2 and Q3 2023, though this change was not statistically significant. However, cutting the data by income reveals greater variability. The uninsured rate for non-elderly adults with incomes below 100 percent of the FPL went up by 3.8 percentage points and the rate for those with incomes between 100 and 200 percent of the FPL increased by 5.3 percentage points (data not shown). Because the confidence intervals are wide, the former change was not statistically significant at the .05 level. The latter change was statistically significant. For non-elderly adults with incomes between 200 and 400 percent of the FPL, the uninsured rate fell by a statistically insignificant 1.7 percentage points.

Figure 3 presents trends in private coverage for non-elderly adults and children. For both groups, private coverage rates were fairly stable between Q1 2020 and Q3 2023: roughly two-thirds of non-elderly adults and just over 50 percent of children had private insurance. Results for public coverage are reported in Figure 4. In Q3 2023, 22.9 percent of non-elderly adults reported public coverage. This is not significantly different from the estimates for Q1 and Q2 2023 (22.4 percent and 24.8 percent respectively). For children, the Q3 2023 estimate of 44.8 percent is also not significantly different from Q1 or Q2. As with the uninsured rate, we used linear regression to estimate the trend since Q1 2020. For adults, the regression for the quarterly data presented in Figure 4 imply that the percentage of people with public coverage increased by an average of 0.2 percentage points per quarter from Q1 2020 to Q3 2023, which is statistically significant at the .01 level. For children, the trend is less pronounced (0.15 percentage points per quarter) and less precisely estimated (p=.086).

Figure 3. Private Insurance Coverage Populations Ages 18-64 and 0-17 (Q1 2020 – Q3 2023)

Source: Interactive Quarterly Early Release Estimates. https://wwwn.cdc.gov/NHISDataQueryTool/ER_Quarterly/index_quarterly.html; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023. https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf

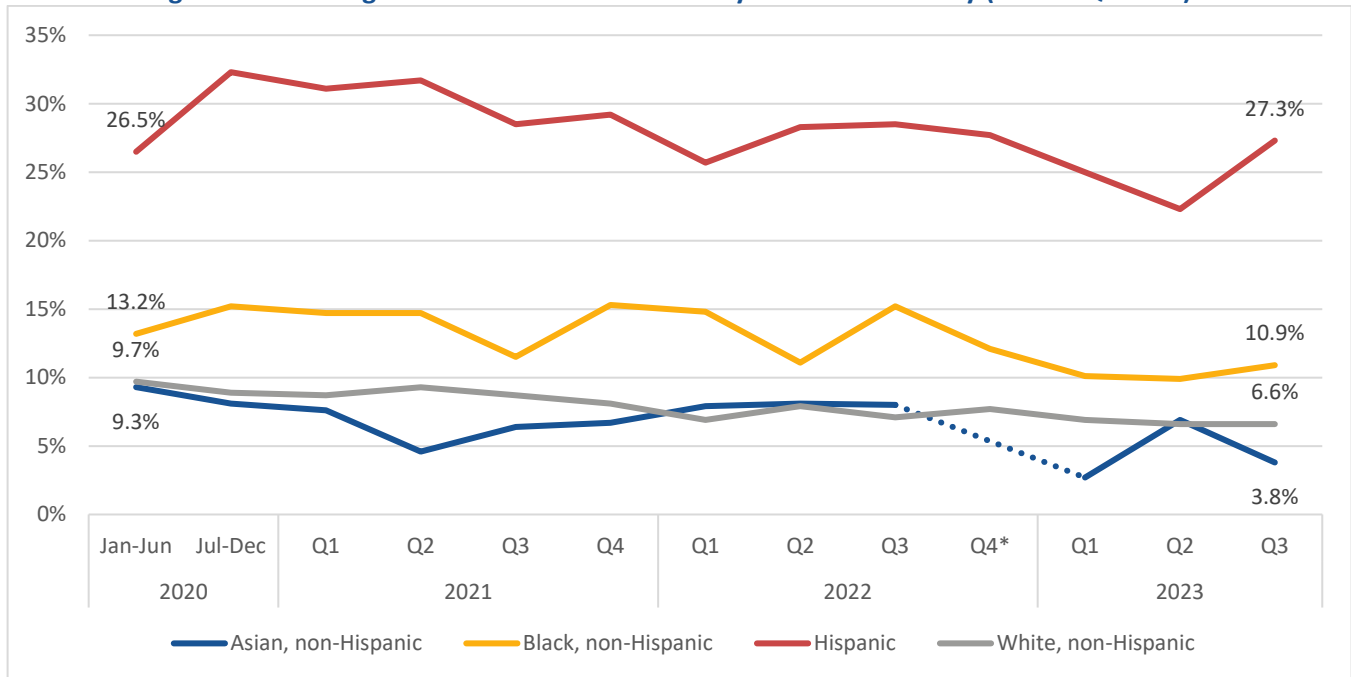**Figure 4. Public Coverage Populations Ages 18-64 and 0-17 (Q1 2020 – Q3 2023)**
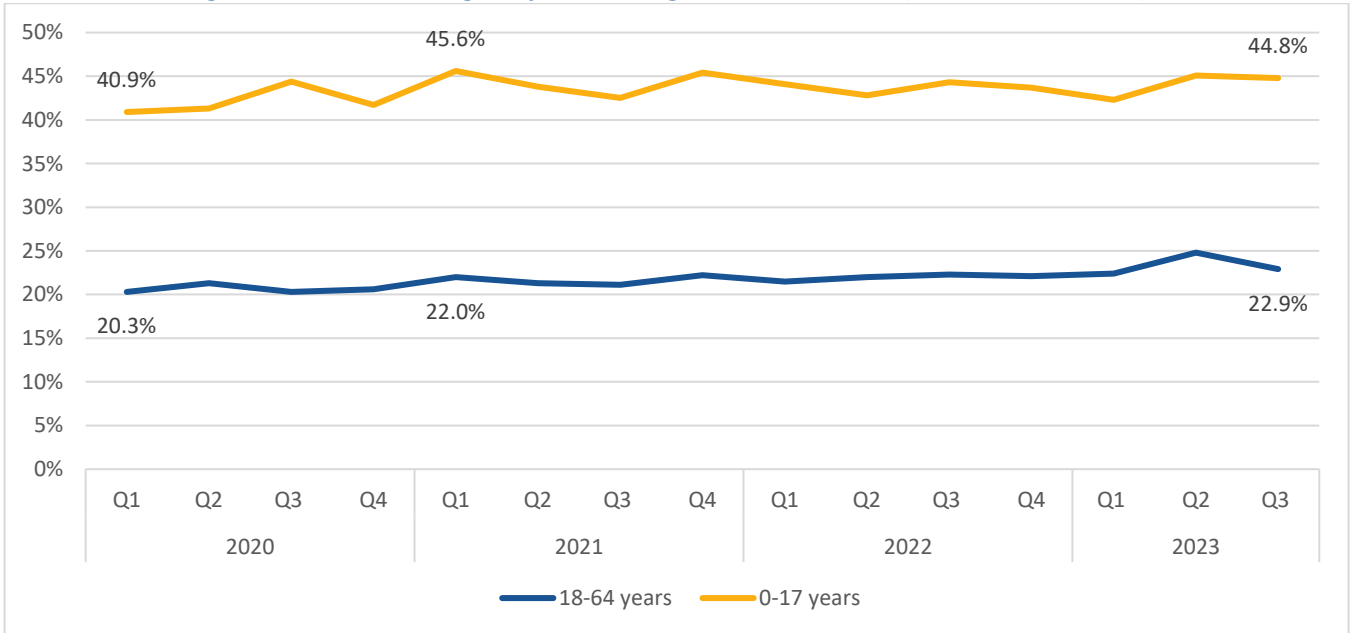
Source: National Health Interview Survey's Health Insurance Coverage Reports. https://www.cdc.gov/nchs/nhis/healthinsurancecoverage.htm; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023. https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf

It is well documented that the ACA significantly reduced disparities in coverage related to race and ethnicity, though significant disparities remain.[6] Figure 5 reports trends in the uninsured rate for White, Black, Asian, and Hispanic adults between the ages 18 and 64 since 2020.[b] Because of small sample sizes, the estimates are even more variable and imprecise than the results for all non-elderly adults and children. For all groups, the uninsured rate is significantly lower than prior to the ACA (data not shown). Throughout the time period shown, Hispanic adults were more likely to be uninsured than other demographic groups. The uninsured rate for Hispanics fell from 29.3 percent in 2020 to 22.3 percent in Q2 2023, before increasing to 27.3 percent in Q3 2023. Because the sample sizes are small, the difference between the estimates for Q2 and Q3 is not statistically significant.

Figure 6 presents private coverage rates for non-elderly adults by race and ethnicity. For the most part, private coverage rates were stable over the nearly four-year period. One exception to this is the private coverage rate for Asian non-elderly adults which increased by roughly 7 percentage points between early 2020 and Q3 2023.

Figure 7 presents comparable comparisons for public coverage. Throughout the full period, Black non-elderly adults were most likely to have public coverage, with rates above 30 percent in most quarters. In Q3 2023, 34.6 percent of Black adults reported having public coverage. Slightly over one-quarter (26.1 percent) of Hispanic non-elderly adults reported public coverage in Q3 2023. Among Whites and Asians, the public coverage rates for Q3 2023 were 19.6 and 16.5 percent, respectively.

Figure 5. Adults Ages 18-64 Without Insurance by Race and Ethnicity (2020 – Q3 2023)

Source: National Health Interview Survey's Health Insurance Coverage Reports.
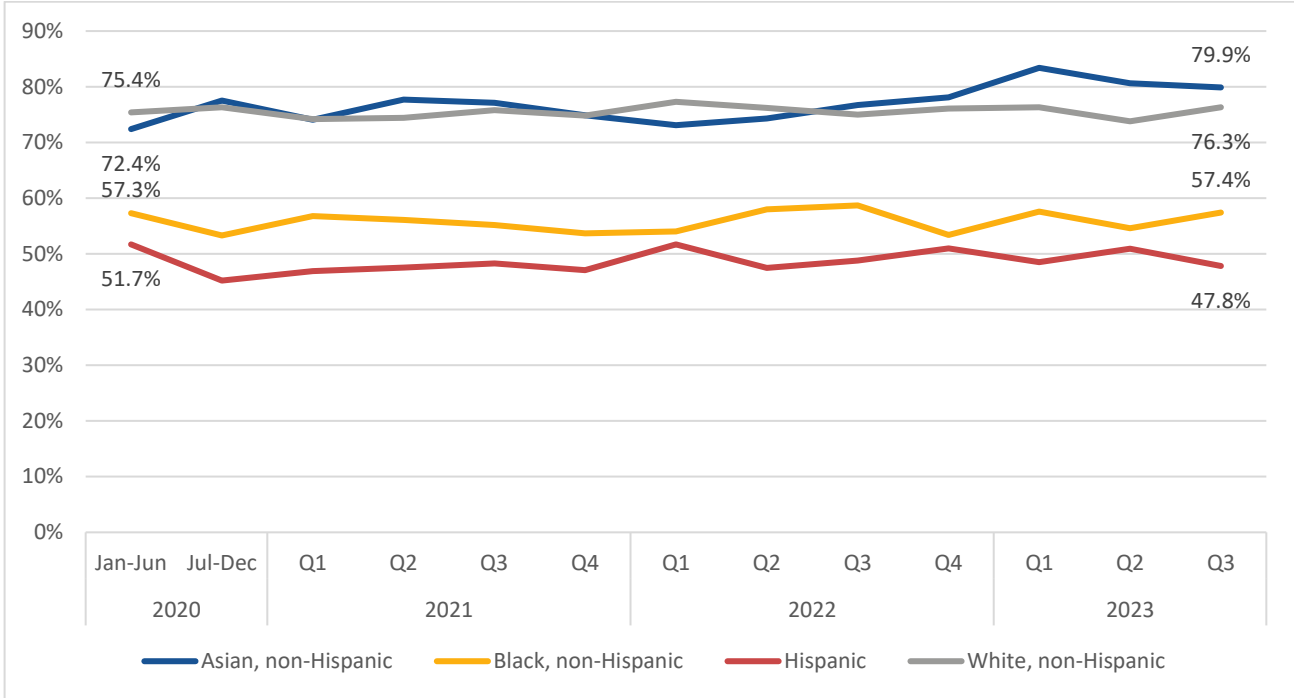https://www.cdc.gov/nchs/nhis/healthinsurancecoverage.htm; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023.
https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf
Note: *Estimate for non-Hispanic Asians is not shown for Q4 2022, as it does not meet NCHS standards of reliability.

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[b] Quarterly estimates by race and ethnicity are not available for 2020. Instead, we report estimates for six-month periods (Q1/Q2 and Q3/Q4).

Figure 6. Adults Ages 18-64 With Private Coverage by Race and Ethnicity (2020 – Q3 2023)

Source: National Health Interview Survey's Health Insurance Coverage Reports.
https://www.cdc.gov/nchs/nhis/healthinsurancecoverage.htm; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023.
https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf

Figure 7. Adults Ages 18-64 with Public Insurance by Race and Ethnicity (2020 – Q3 2023)
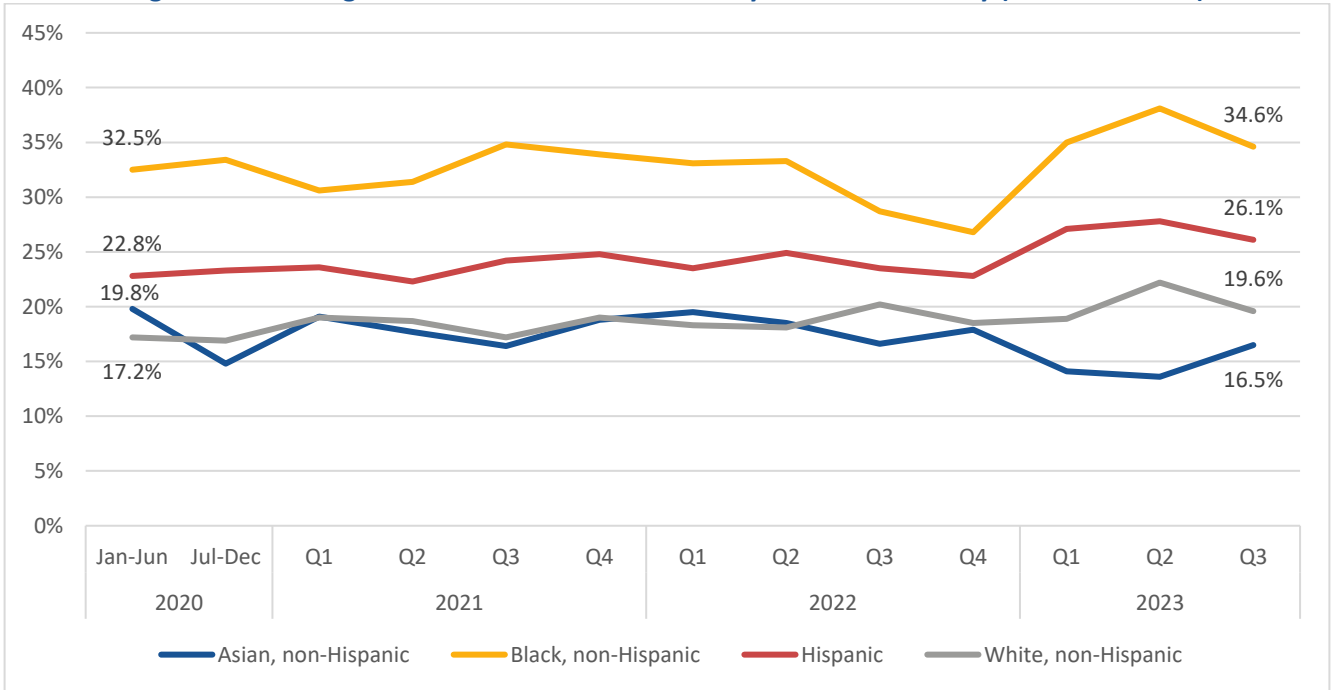
Source: National Health Interview Survey's Health Insurance Coverage Reports.
https://www.cdc.gov/nchs/nhis/healthinsurancecoverage.htm; Health Insurance Coverage: Early Release of Quarterly Estimates From the National Health Interview Survey, July 2022–September 2023.
https://www.cdc.gov/nchs/data/nhis/earlyrelease/Quarterly_Estimates_2023_Q13.pdf

DISCUSSION

The data analyzed in this paper include the most recent data from the NHIS, a critical survey for tracking changes in the insurance coverage of Americans. However, as recent as these data are, the number of people with insurance and the type of coverage they hold may have changed since Q3 2023.

One reason is the end of Medicaid continuous enrollment condition, which effectively kept states from disenrolling most individuals from Medicaid between February 2020 and March 2023. Numerous analyses projected that the resumption of regular eligibility renewal operations would lead to a decrease in Medicaid coverage and an increase in the number of uninsured relative to the historically low level observed at the end of the COVID-19 PHE.[7,8] Although the continuous enrollment condition ended on March 31, 2023, most states did not resume regular Medicaid renewal operations immediately and full renewals of all Medicaid-enrolled individuals are scheduled to take at least 12 months in most states.[9] This delay may explain why the NHIS data for Q2 and Q3 2023 do not show significant decreases in public health coverage. As states complete renewals for their full Medicaid and Children's Health Insurance Program (CHIP) population, it is possible that the uninsured rate will increase further.

At the same time, the NHIS data reported here also do not capture known increases in private coverage through the ACA Marketplaces. As of December 31, 2023, CMS data shows that approximately 15 percent of plan selections (2.4 million) in states that use HealthCare.gov, were made by individuals who were previously enrolled in Medicaid or CHIP coverage. By the end of the Open Enrollment Period on January 16, 2024, nearly 4.2 million more individuals with household incomes under 250 percent of the FPL enrolled in Marketplace coverage in states that use HealthCare.gov compared to last year. This further indicates that lower-income individuals and families have enrolled in quality Marketplace coverage as states continue their post-COVID redeterminations of Medicaid and CHIP eligibility. Overall, 21 million individuals have selected a Marketplace plan during the 2024 Open Enrollment Period, an increase of roughly 5 million relative to 2023.[10,11]

CONCLUSION

This Data Point presents trends in health coverage through Q3 2023, the most recent data available from the NHIS. Consistent with previous reports, the results indicate that the percentage of Americans without insurance is significantly lower than in 2020. The data do not indicate statistically significant changes in the uninsured rate or sources of coverage in the first 3 quarters of 2023. In future quarters, the percentage of Americans with public health coverage is expected to decline as states continue the process of returning to normal Medicaid renewal operations. Future reports will provide more insights on the extent to which individuals disenrolling from Medicaid move to other sources of coverage or become uninsured.

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