



N O V E M B E R

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SUCCESS IN THE EMPIRE STATE: HEALTH INSURANCE COVERAGE TRENDS

A Closer Look at the Reduction of Uninsured New Yorkers after the Affordable Care Act Coverage Expansions

Background

New York State has been a leader in implementing the Affordable Care Act (ACA) effectively and expanding health insurance coverage for nearly 1 million additional residents since the law took effect. This data snapshot examines trends in insurance coverage in New York State before and after the major coverage expansions of the ACA were implemented. The ACA was signed into law in 2010, but most major provisions aimed at expanding coverage took effect at the beginning of 2014. The ACA gave states the option to expand Medicaid to adults earning below 138% of the federal poverty level (FPL), and established subsidies for low- and moderate-income individuals and families to purchase private coverage through health insurance marketplaces. New York was one of the 31 states that chose to expand Medicaid eligibility.

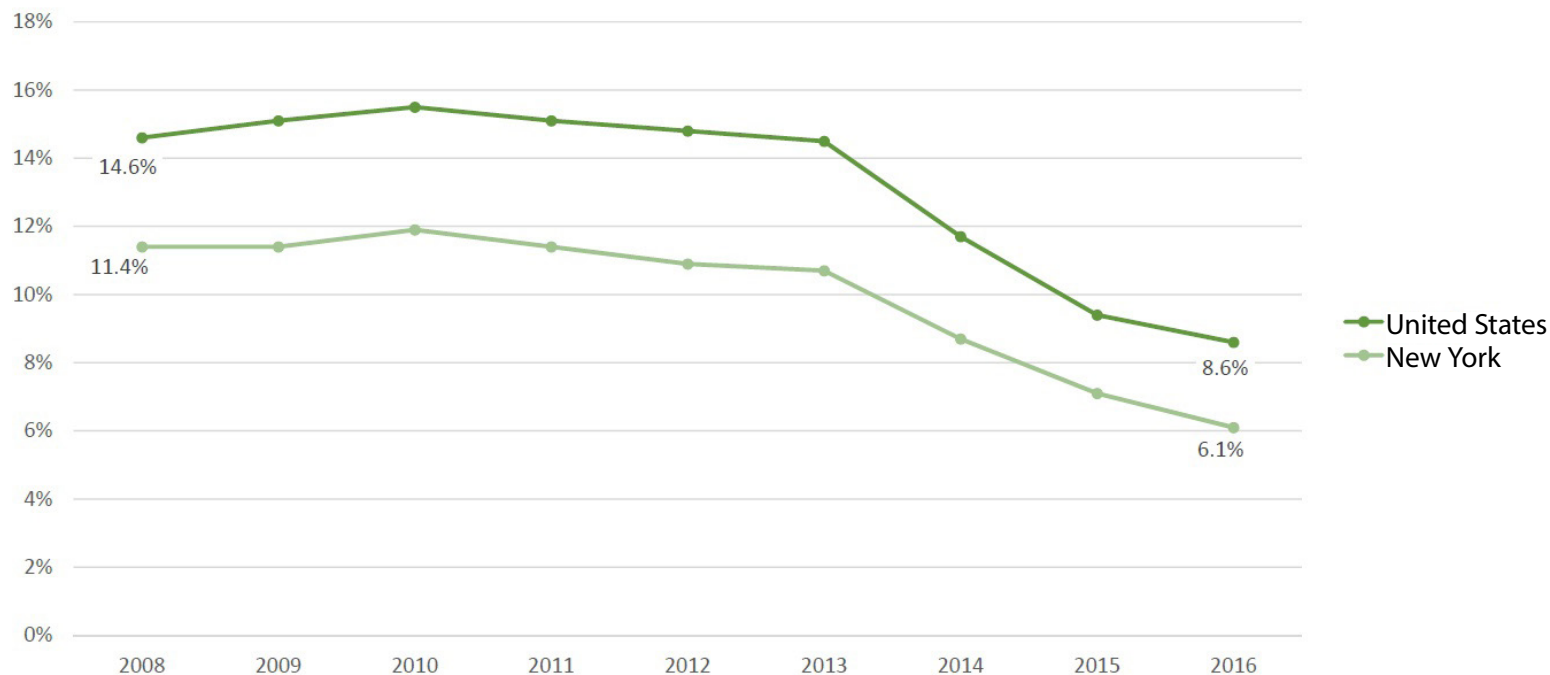
The New York State of Health Marketplace, opened in 2013, was designed for individuals and families without employer-sponsored or public insurance. It allowed for direct purchase of private health coverage from various insurance carriers. These marketplace plans, called Qualified Health Plans (QHPs) are available at a variety of “metal” (coverage) levels and costs. Individuals earning up to 400% of the FPL qualify for federal subsidies to assist with the payment of the monthly premiums and other cost sharing. In 2016, a new Essential Plan was added for lower-income individuals, in place of a QHP. Individuals earning below 150% of the FPL pay no premium for the Essential Plan, and individuals earning below 200% of the FPL pay \$20 per month.

Key Findings

- Between 2013 and 2016, the uninsured rate declined drastically. The proportion of the uninsured population in New York State declined by 42.8% (about 900,000 people) from 2013 to 2016.
- Coverage gains were spread nearly universally across different cohorts of the population and across the State.
- Uninsured rates declined more than 40% for most racial groups, age groups, and income levels within New York.
- Non-citizens still have the highest uninsured rates, at 24.1%. Non-citizens are about five times more likely to be uninsured than citizens.
- Every Congressional district in New York State saw decreases in the uninsured rate of at least 29%. Most saw at least a 40% reduction in the uninsured population, and the decline was more than 50% in 6 of the 27 districts.
- Every county in New York State saw declines in the proportion of individuals without health insurance coverage. Most saw drops of at least 40%. Urban and densely populated areas saw the most dramatic declines.
- Enrollment in the individual marketplace has increased every year since its introduction. The addition of the Essential Plan helped increase marketplace enrollment totals by 56% in 2016.

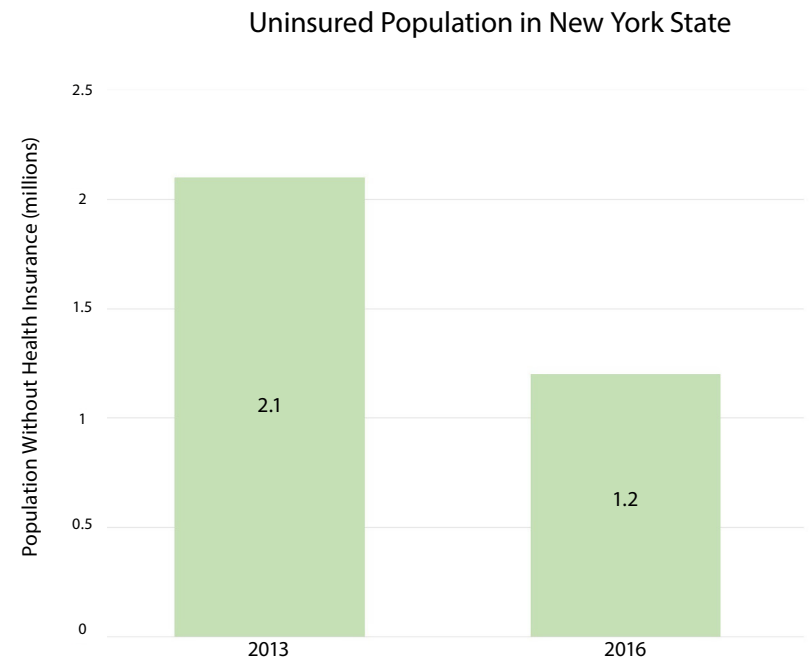
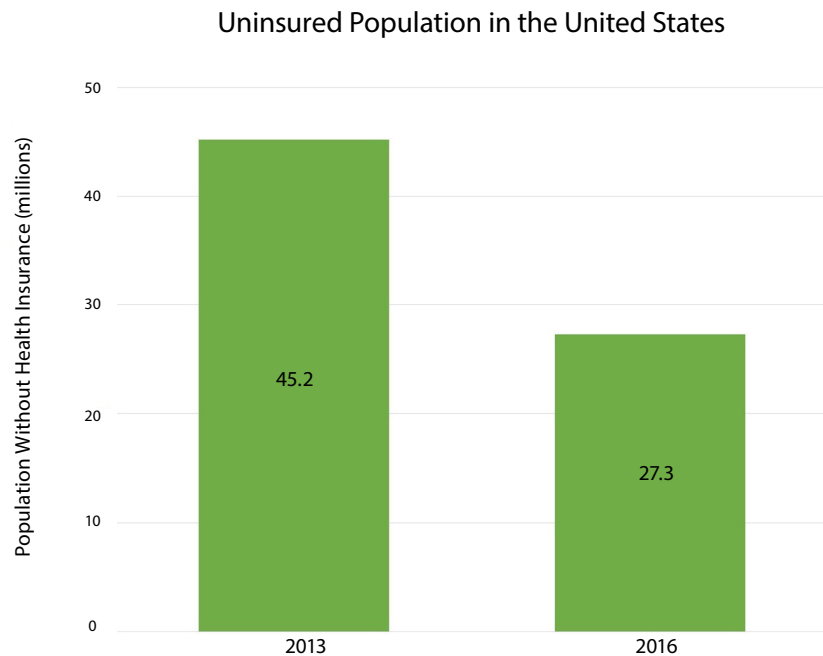
The Uninsured Rate in New York State is Below the National Average, and has Declined Steadily since 2013

Proportion of the Population that is Uninsured in New York and Nationally, 2008–2016



SOURCE: Barnett, Jessica C. and Edward R. Berchick, Current Population Reports, P60-260, Health Insurance Coverage in the United States: 2016, U.S. Government Printing Office, Washington, DC, 2017. Supplemental data showing detailed information by insurance type: Table HIC-4_ACS. Health Insurance Coverage Status and Type of Coverage by State All People: 2008 to 2016. Retrieved from: <https://www.census.gov/library/publications/2017/demo/p60-260.html>

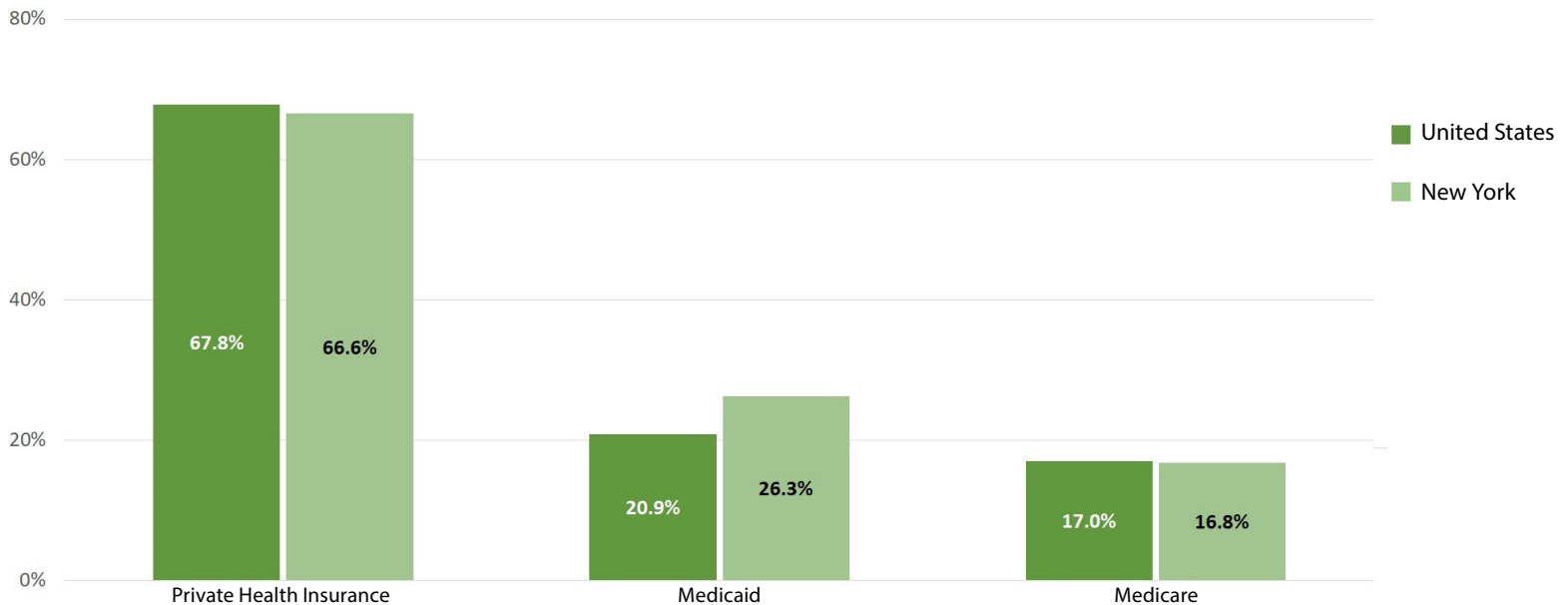
Since 2013, the Uninsured Population has Declined by 17.9 Million Nationwide (40.0%) and by 900,000 (42.8%) in New York



SOURCE: Barnett, Jessica C. and Edward R. Berchick, Current Population Reports, P60-260, Health Insurance Coverage in the United States: 2016, U.S. Government Printing Office, Washington, DC, 2017. Supplemental data showing detailed information by insurance type: Table HIC-4_ACS. Health Insurance Coverage Status and Type of Coverage by State All People: 2008 to 2016. Retrieved from: <https://www.census.gov/library/publications/2017/demo/p60-260.html>

New York Relies More Heavily on Medicaid Compared to the Nation

Proportion of the Population in New York and Nationally with Medicare, Medicaid, or Private Health Insurance, 2016

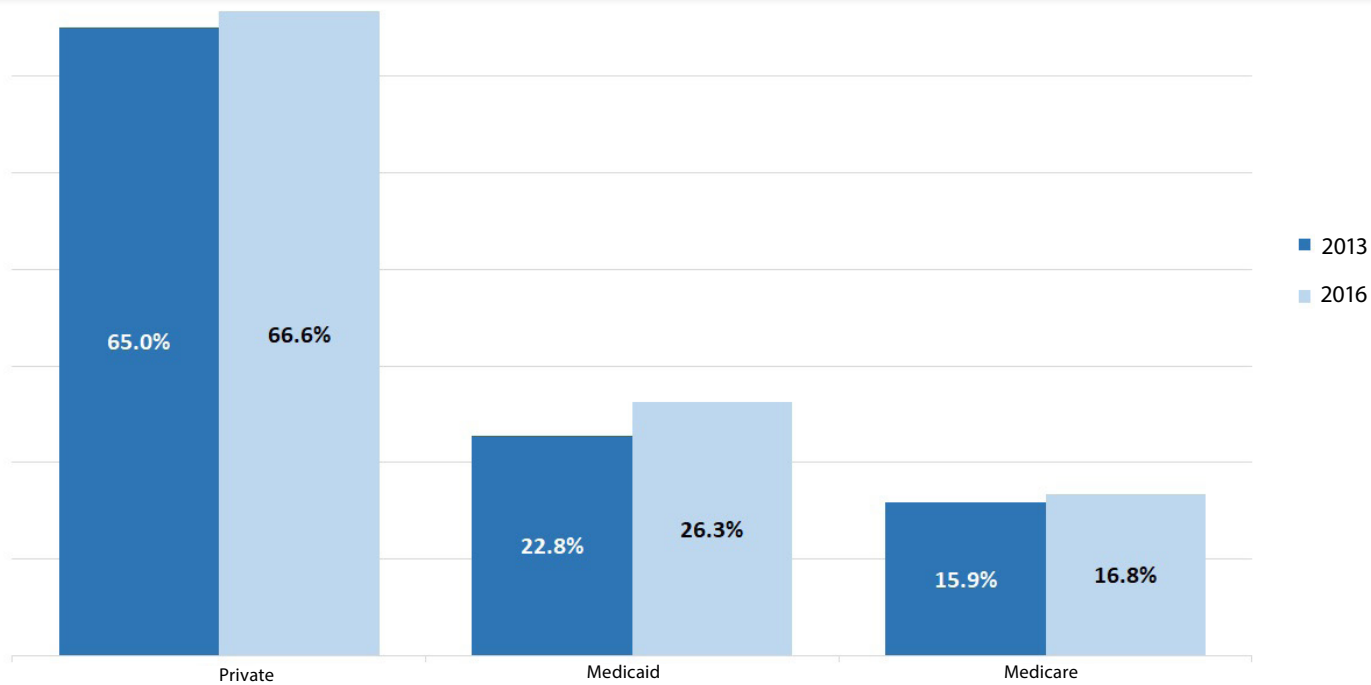


NOTE: Individuals with more than one type of coverage in a calendar year are counted in all applicable categories.

SOURCE: Barnett, Jessica C. and Edward R. Berchick, Current Population Reports, P60-260, Health Insurance Coverage in the United States: 2016, U.S. Government Printing Office, Washington, DC, 2017. Supplemental data showing detailed data by insurance type: Table HIC-4_ACS. Health Insurance Coverage Status and Type of Coverage by State All People: 2008 to 2016. Retrieved from: <https://www.census.gov/library/publications/2017/demo/p60-260.html>

The Proportion of New Yorkers with Coverage Increased for all Insurance Types

Proportion of the Population in New York with Medicare, Medicaid, or Private Health Insurance, 2013 and 2016



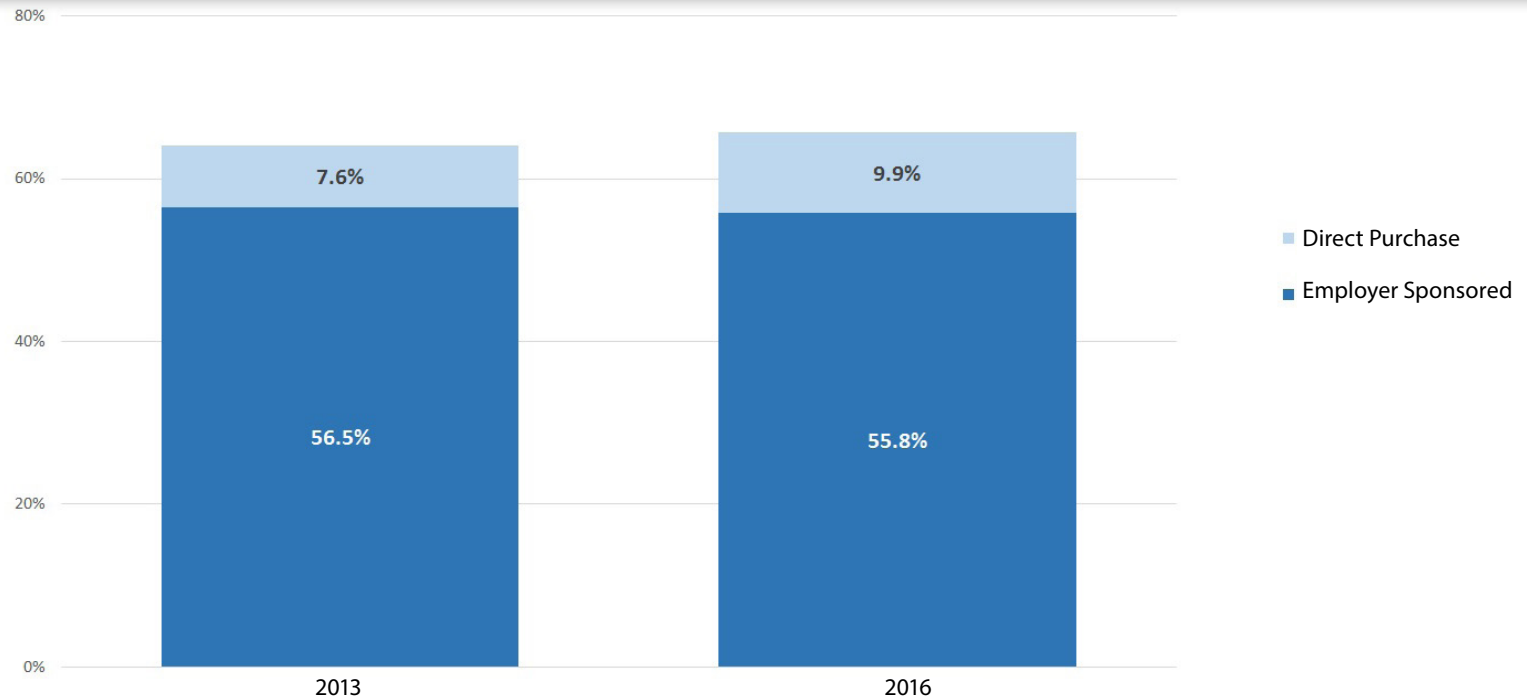
NOTE: Individuals with more than one type of coverage in a calendar year are counted in all applicable categories.

SOURCE: Barnett, Jessica C. and Edward R. Berchick, Current Population Reports, P60-260, Health Insurance Coverage in the United States: 2016, U.S. Government Printing Office, Washington, DC, 2017.

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The Proportion of Individuals with Direct-Purchase Insurance has Increased Since 2013, While the Proportion with Employer-Sponsored Coverage Remained Steady

Proportion of the Population with Employer-Sponsored or a Direct-Purchase Private Health Insurance Plan in New York, 2013–2016



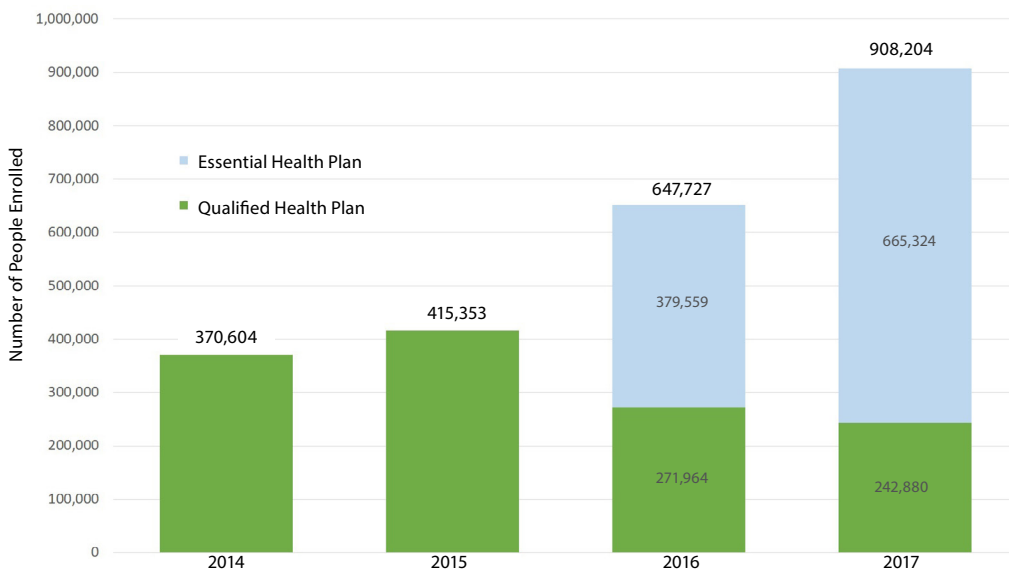
NOTE: Individuals with more than one type of coverage in a calendar year are counted in all applicable categories.

SOURCE: Barnett, Jessica C. and Edward R. Berchick, Current Population Reports, P60-260, Health Insurance Coverage in the United States: 2016, U.S. Government Printing Office, Washington, DC, 2017.

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The Introduction of the Essential Plan in 2016 Helped Increase Total Enrollment in the Individual Marketplace

New York Marketplace Enrollment, 2014–2017



Qualified Health Plans (QHPs) are marketplace plans currently available for individuals earning more than 200% of the FPL. They include a wide range of coverage levels and premiums. Individuals with income below 400% of the FPL are eligible for federal subsidies.

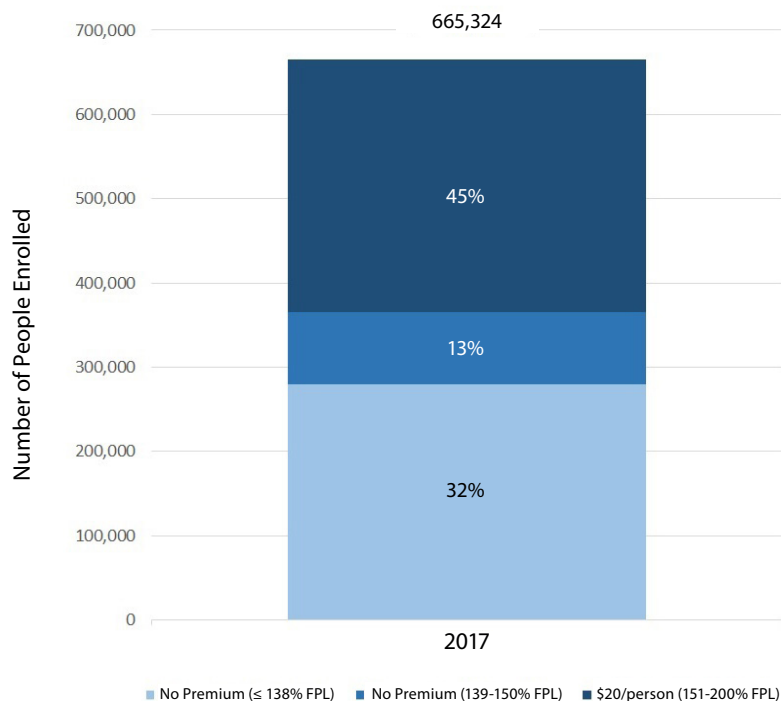
Essential Plans (EPs) were introduced in 2016. They are available for individuals aged 19-64 earning less than 200% of the FPL, and premiums are either \$0 or \$20 per month depending on income.

NOTE: Enrollment counts are as of the end of the open enrollment period (April 15th for 2014, February 28th for 2015, January 31st for 2016 and 2017).

SOURCE: New York State of Health. May 2017. "2017 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2017openenrollmentreport>, accessed October 2017; New York State of Health. May 2016. "2016 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2016openenrollmentreport>, accessed October 2017; New York State of Health. July 2015. "2015 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2015openenrollmentreport>, accessed October 2017; New York State of Health. June 2014. "2014 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2014openenrollmentreport>, accessed October 2017.

In 2017, 55% of Essential Plan Enrollees Paid No Monthly Premium

Essential Plan Enrollment



Eligibility for the Essential Plan (EP)

There are two groups of individuals enrolled in Essential Plans:

1. Individuals with lower incomes who would have been eligible for State-only Medicaid prior to 2016 (income of less than or equal to 138% of the FPL). These individuals pay no monthly premium.
2. Individuals with incomes over the Medicaid eligibility levels who would have been enrolled in a Qualified Health Plan at a higher cost absent the EP. Individuals earning between 139% and 150% of the FPL pay no premium, while individuals earning 151%–200% of the FPL pay \$20 per person per month.

NOTE: Enrollment counts are as of the end of the open enrollment period (January 31, 2017).

SOURCE: New York State of Health. May 2017. "2017 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2017openenrollmentreport>, accessed October 2017.

In 2017, 41% of Qualified Health Plan (QHP) Enrollees in New York Paid the Full Premium Amount without a Subsidy

QHP Enrollment

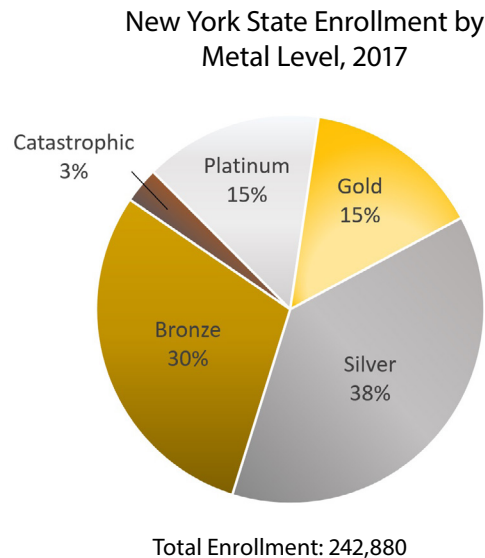
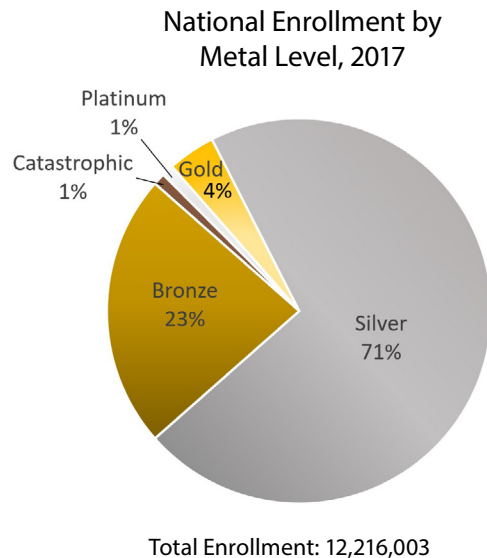


- **Advanced Premium Tax Credits (APTCs)** are available for those earning less than 400% of the federal poverty level (FPL) and who are not eligible for the Essential Plan.
- **Cost-Sharing Reductions (CSRs)** lower co-payments, deductibles, and maximum out-of-pocket costs for those earning 201%–250% of the FPL.
- As of 2016, individuals earning 200% of the FPL and below are automatically enrolled in the Essential Plan and are not eligible for a QHP.

NOTE: Enrollment counts are as of the end of the open enrollment period (January 31, 2017).

SOURCE: New York State of Health. May 2017. "2017 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2017openenrollmentreport>, accessed October 2017.

New York has More Enrollment in Gold and Platinum Qualified Health Plans Relative to the Nation



Platinum: 90% of medical costs paid through monthly premium, 10% paid out-of-pocket.

Gold: 80% of medical costs paid through monthly premium, and 20% paid out-of-pocket.

Silver: 70% of medical costs paid through monthly premium, and 30% paid out-of-pocket. This is the only plan option for individuals receiving cost-sharing reductions.

Bronze: 60% of medical costs paid through monthly premium, and 40% paid out-of-pocket.

Catastrophic: Lowest monthly premium, highest out-of-pocket costs (available to individuals under 30, or with proven financial hardship).

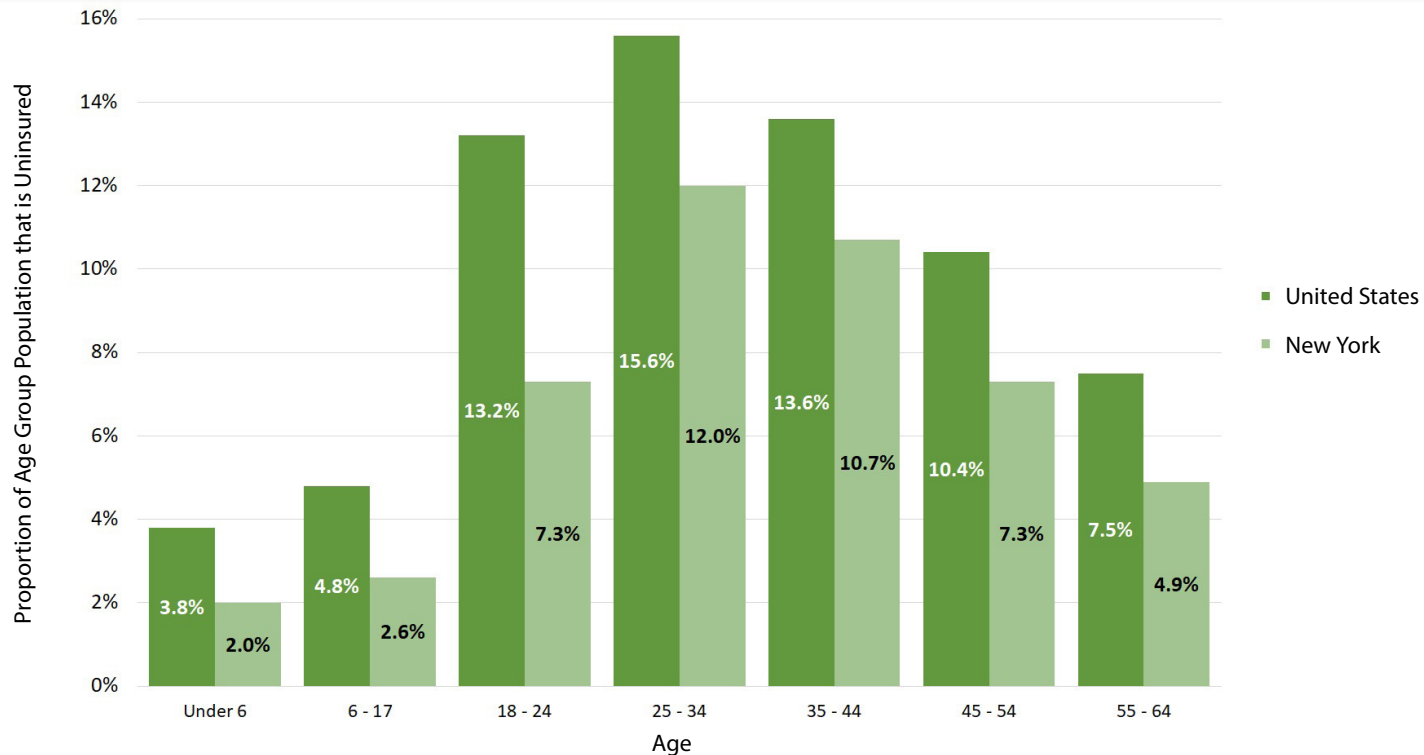
New York does not permit use of age as a factor when determining health insurance premiums, which may help explain the relatively higher enrollment in Platinum and Gold plans. Older and younger individuals are charged similar premiums which keeps premium levels relatively lower for older individuals. Hence, older individuals may be more likely to choose plans with higher levels of coverage.

NOTE: Enrollment counts are as of the end of the open enrollment period (January 31, 2017).

SOURCE: New York State of Health, May 2017. "2017 Open Enrollment Report," <https://info.nystateofhealth.ny.gov/2017openenrollmentreport>, accessed October 2017; Kaiser Family Foundation "Marketplace Enrollment by Metal Level," <https://www.kff.org/health-reform/state-indicator/2017-marketplace-plan-selections-by-metal-level/?dataView=1¤tTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>, accessed October 2017

New York State has Lower Uninsured Rates than the Nation in Every Non-Elderly Age Group

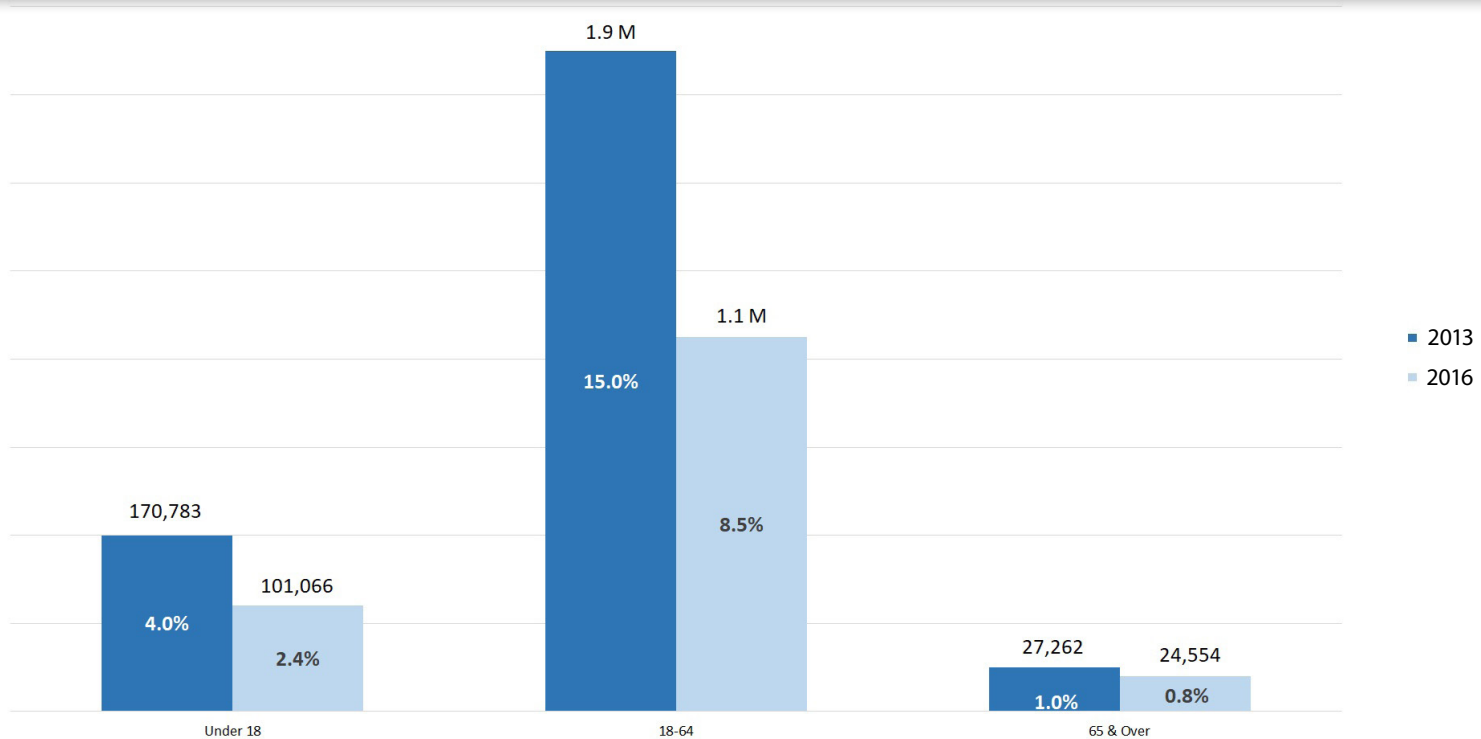
Proportion of the Non-Elderly Population Uninsured by Age Group, 2016



SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

The Proportion of Uninsured in New York Declined Across All Age Groups

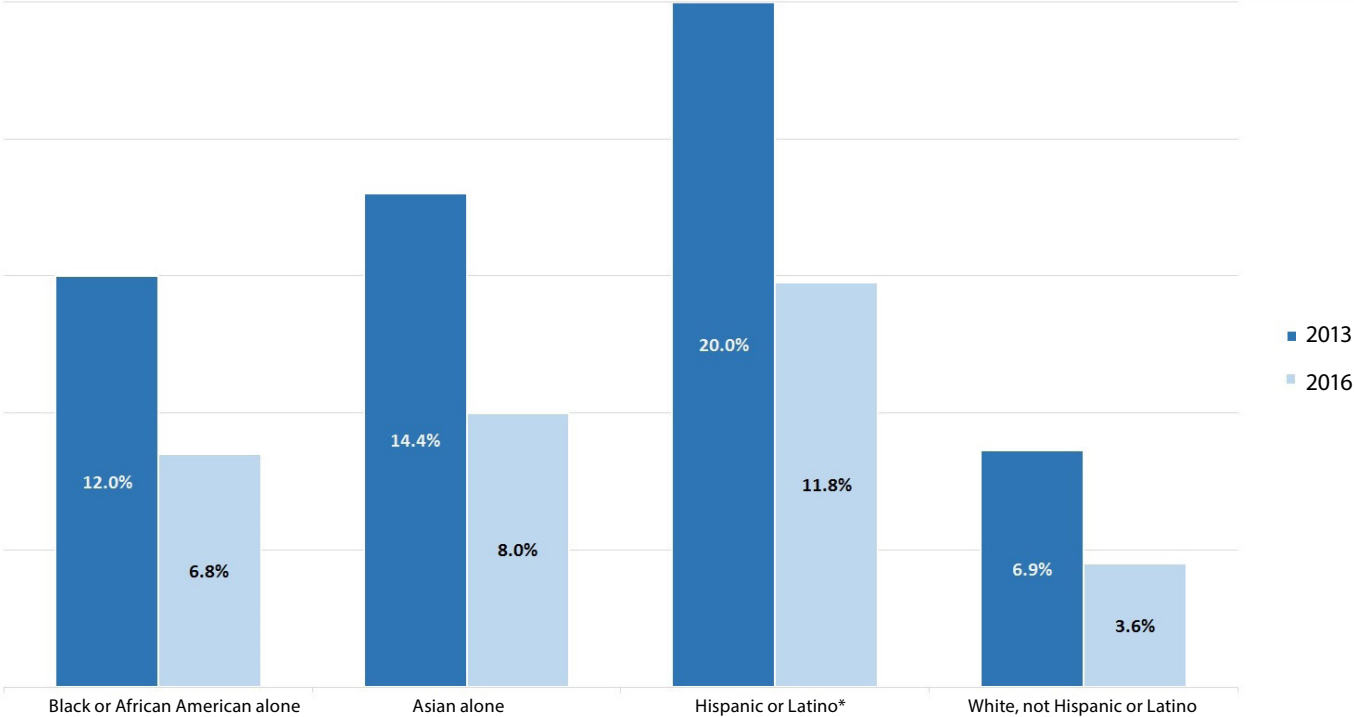
Proportion of the Population That is Uninsured in New York by Age Group, 2013 and 2016



SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

Uninsured Rates Declined Across all Racial Groups in New York, but Hispanic or Latino Individuals Are Still Most Likely to be Without Coverage

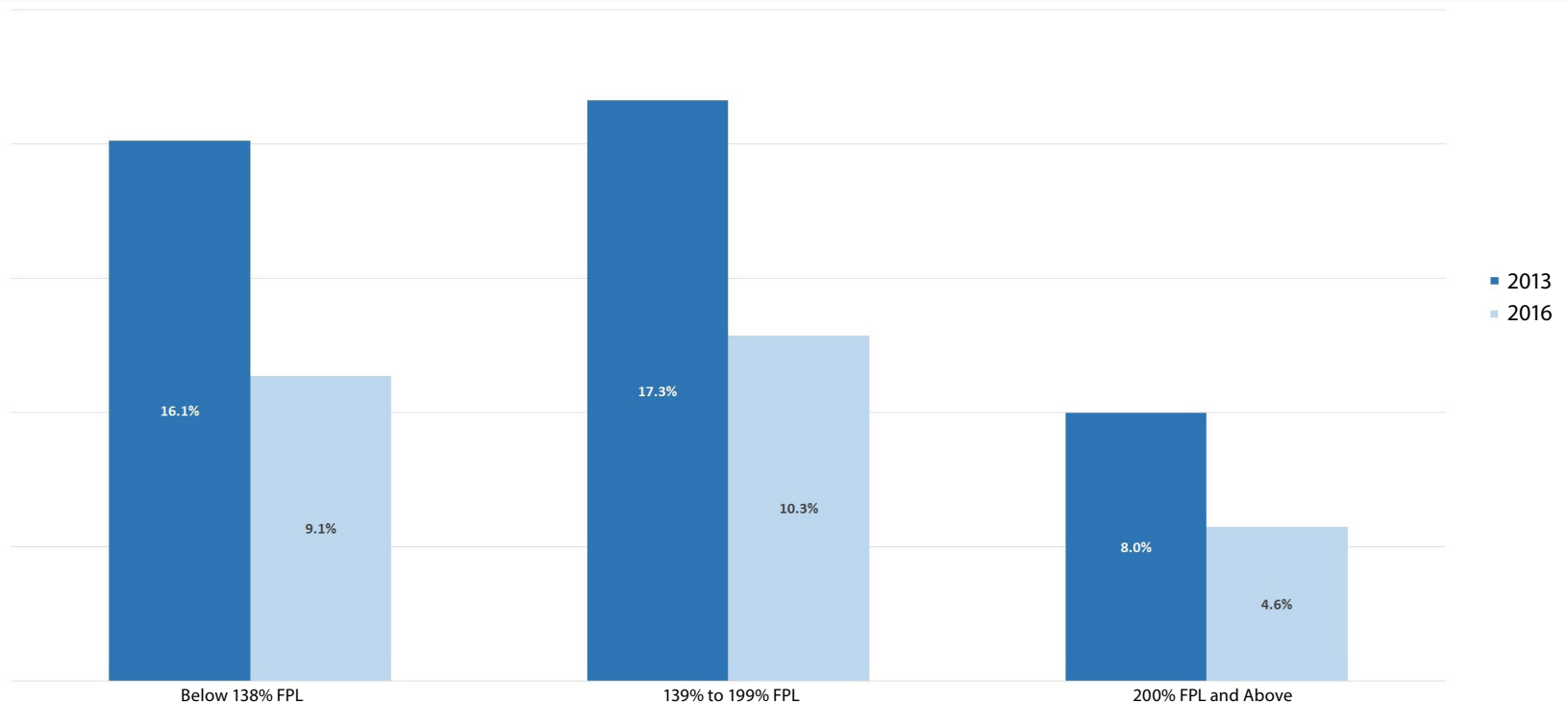
Proportion of the Population That is Uninsured in New York by Race and Ethnicity, 2013 and 2016



NOTE: * Hispanic or Latino category includes individuals who may also identify with another racial group
SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

Similar Decreases in the Uninsured Rate Occurred Above and Below 200% of the FPL

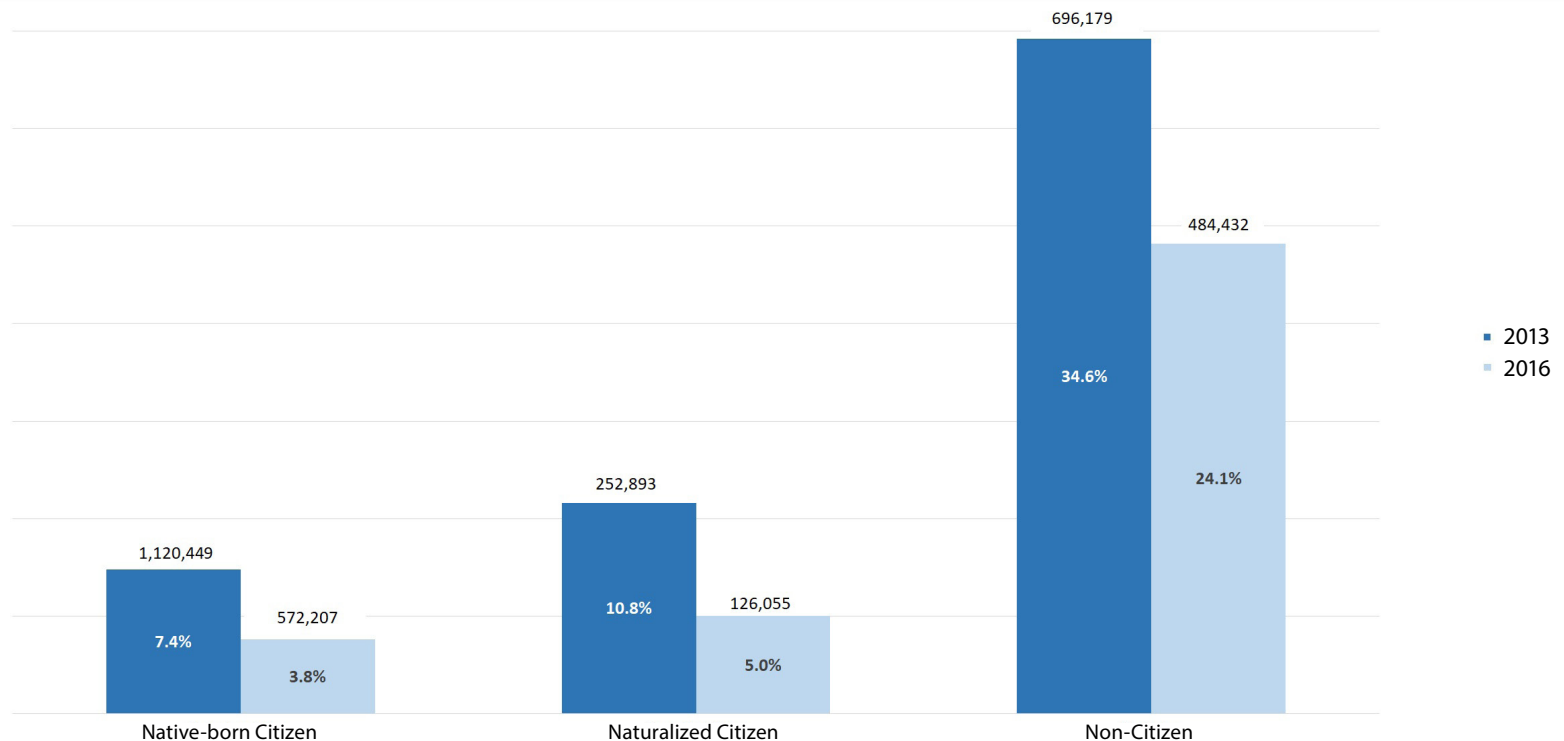
Proportion of the Population That is Uninsured in New York by Income Relative to FPL, 2013 and 2016



SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

Uninsured Rates Declined Across All Categories of U.S. Citizenship, but Non-Citizens are Still Far More Likely to be Uninsured than Citizens

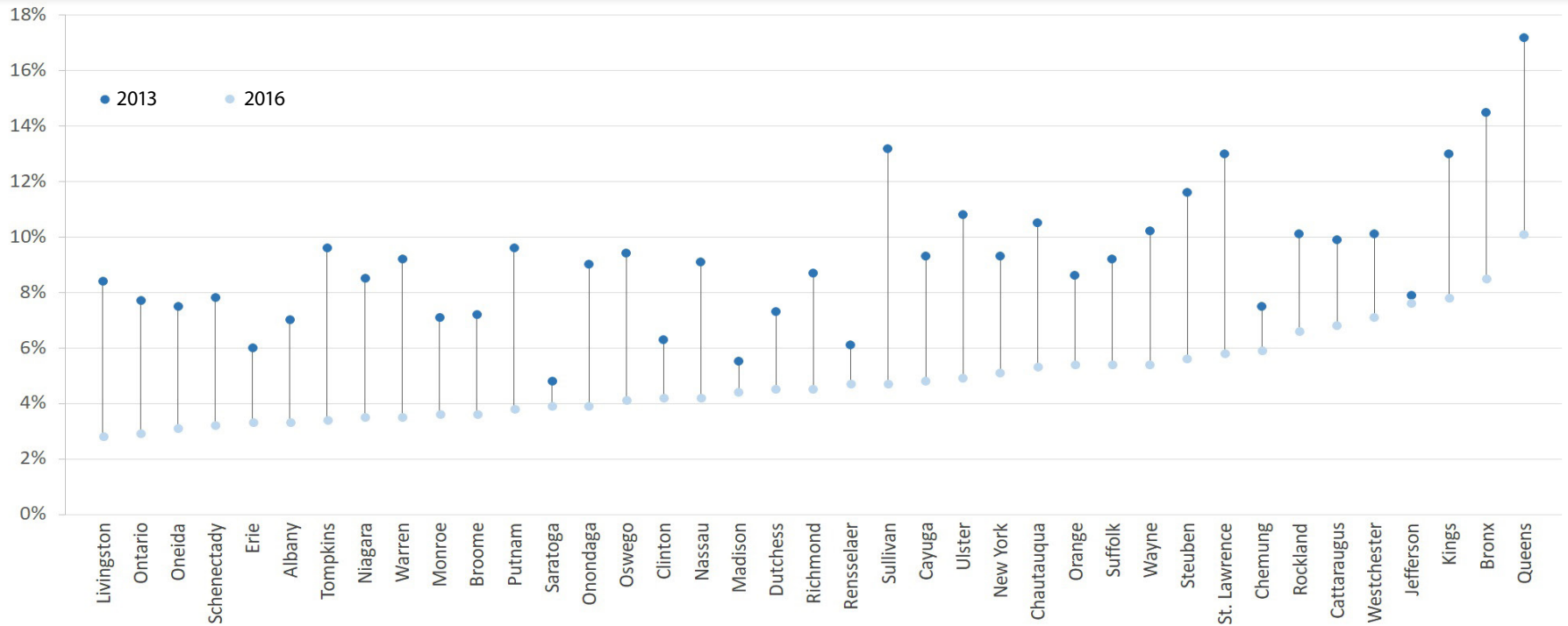
Proportion of the Population That is Uninsured in New York by Citizenship Status, 2013 and 2016



SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

Uninsured Rates Declined in Every County Between 2013 and 2016

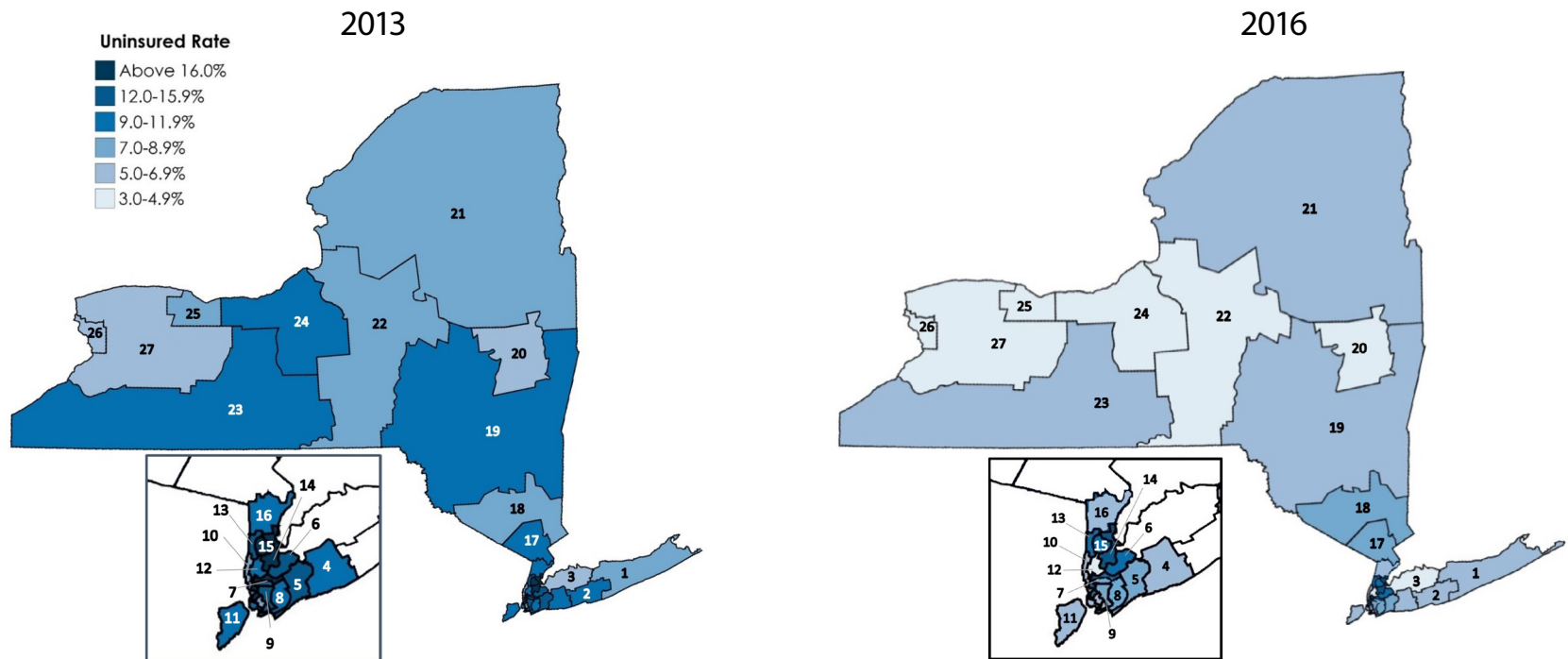
Proportion of the Population That is Uninsured in New York by County



NOTE: Only counties with yearly American Community Survey (ACS) data were included in this chart. These counties all have more than 60,000 inhabitants.

SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

Uninsured Rates Declined in Every Congressional District in New York State Between 2013 and 2016



SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

In 2016, Uninsured Rates were Lower in Every Congressional District, and Rates Declined the Most in Areas Where they had been Highest

District Number	% Uninsured in 2013	% Uninsured in 2016	Difference (Percentage)	Number of Individuals Gaining Coverage
1	8.2%	5.0%	-39.0%	22,865
2	9.8%	5.7%	-41.8%	29,401
3	6.9%	3.6%	-47.8%	23,364
4	11.1%	5.0%	-55.0%	42,894
5	14.2%	7.7%	-45.8%	47,199
6	15.2%	10.2%	-32.9%	32,266
7	16.9%	9.2%	-45.6%	57,553
8	10.6%	7.0%	-34.0%	24,558
9	13.2%	7.3%	-44.7%	43,310
10	8.2%	5.8%	-29.3%	17,763
11	9.5%	5.5%	-42.1%	28,182
12	9.1%	3.9%	-57.1%	37,349
13	14.9%	9.2%	-38.3%	38,629
14	21.9%	12.1%	-44.8%	74,042
15	16.0%	9.3%	-41.9%	48,059
16	10.2%	6.2%	-39.2%	29,010
17	10.5%	7.4%	-29.5%	22,427
18	8.2%	4.7%	-42.7%	24,442
19	9.2%	5.0%	-45.7%	29,755
20	6.8%	3.6%	-47.1%	23,103
21	8.8%	5.1%	-42.1%	25,851
22	7.3%	3.6%	-50.7%	26,453
23	10.3%	5.9%	-42.7%	31,933
24	9.1%	4.3%	-52.8%	34,504
25	7.3%	3.6%	-50.7%	26,147
26	6.8%	3.2%	-52.9%	25,896
27	6.4%	3.5%	-45.3%	19,872

SOURCE: U.S. Census Bureau. American Community Survey (S2701: Health Insurance Coverage Status). Retrieved from: https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_S2701&prodType=table and https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_16_1YR_S2701&prodType=table

Data Sources

This publication makes use of coverage data from the U.S. Census Bureau and the New York State of Health Marketplace. More details on the data are provided below:

- The U.S. Census Bureau's national and State-level coverage data were retrieved from the Current Population Survey, Annual Social and Economic Supplement (CPS ASEC).
 - The CPS ASEC provides an estimate of health insurance coverage at any time during the calendar year.
 - More information about the CPS ASEC can be found at: <https://www.census.gov/topics/health/health-insurance/guidance/cps-asec.html>
- American Community Survey (ACS) provided State demographics as well as county- and congressional district-level data. The ACS has a larger sample size, allowing for more detailed analyses by geography and for certain subgroups.
 - The ACS measures health insurance coverage at the time of the interview.
 - More information about the ACS can be found at: <https://www.census.gov/programs-surveys/acs/>
- A detailed report on national coverage estimates using these data sources, as well as more information on the methods used for measuring insurance coverage, is available at:
 - Barnett, Jessica C. and Edward R. Berchick, Current Population Reports, P60-260, Health Insurance Coverage in the United States: 2016, U.S. Government Printing Office, Washington, DC, 2017: <https://www.census.gov/content/dam/Census/library/publications/2017/demo/p60-260.pdf>
- Data on enrollment in the individual marketplace was retrieved from the New York State of Health annual enrollment reports.
 - Reports can be found at <https://info.nystateofhealth.ny.gov/enrollmentdata>
 - Enrollment in the marketplace plans are recorded following the open enrollment period, beginning in November of the previous year. In 2014, the open enrollment period ran until April 15th. It was gradually cut shorter in proceeding years.