The following tables and appendix are supplemental to a Commonwealth Fund issue brief, S. R. Collins, M. Z. Gunja, and M. M. Doty, Following the ACA Repeal-and-Replace Effort, Where Does the U.S. Stand on Insurance Coverage? Findings from the Commonwealth Fund Afffordable Care Act Tracking Survey, March-June 2017 (The Commonwealth Fund, September 2017), available on the Fund's website at: http://www.commonwealthfund.org/publications/issue-briefs/2017/sep/post-aca-repeal-and-replace-health-insurance-coverage.

Table 1. Demographics of Overall Sample, Uninsured Adults, and Adults by Coverage Source

|  | Total adults (ages 19-64) | Uninsured adults | Total current marketplace and Medicaid enrollees* | Enrolled in a private health plan through the marketplace | Enrolled in Medicaid | Enrolled in employersponsored insurance |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Unweighted n | 4,813 | 739 | 1,204 | 460 | 740 | 2,199 |
| Percent distribution | 100\% | 14.0\% | 21.8\% | 8.5\% | 13.4\% | 51.5\% |
| Millions | 190 | 27 | 42 | 16 | 25 | 98 |
| Age |  |  |  |  |  |  |
| 19-34 | 34 | 40 | 36 | 28 | 41 | 32 |
| 19-25 | 16 | 16 | 18 | 12 | 22 | 14 |
| 26-34 | 18 | 24 | 18 | 16 | 20 | 19 |
| 35-49 | 31 | 33 | 33 | 33 | 33 | 31 |
| 50-64 | 33 | 23 | 30 | 38 | 26 | 34 |
| Race/Ethnicity |  |  |  |  |  |  |
| Non-Hispanic White | 61 | 43 | 52 | 56 | 49 | 69 |
| Black | 13 | 15 | 17 | 16 | 18 | 10 |
| Latino | 17 | 36 | 20 | 18 | 22 | 12 |
| U.S.-born Latinos | 8 | 10 | 11 | 9 | 13 | 8 |
| Foreign-born Latinos | 9 | 26 | 9 | 9 | 9 | 5 |
| Asian/Pacific Islander | 5 | 1 | 5 | 5 | 5 | 4 |
| Other/Mixed | 2 | 2 | 4 | 4 | 4 | 2 |
| Poverty status |  |  |  |  |  |  |
| Below 138\% poverty | 27 | 50 | 47 | 25 | 61 | 9 |
| 138\%-249\% poverty | 21 | 27 | 28 | 27 | 29 | 16 |
| 250\%-399\% poverty | 19 | 11 | 10 | 18 | 6 | 25 |
| 400\% poverty or more | 33 | 12 | 15 | 31 | 4 | 50 |
| Health status |  |  |  |  |  |  |
| Fair/Poor health status, or any chronic condition or disability^ | 52 | 48 | 60 | 51 | 67 | 47 |
| No health problem | 48 | 52 | 40 | 49 | 33 | 53 |
| Political affiliation |  |  |  |  |  |  |
| Democrat | 30 | 22 | 35 | 38 | 33 | 30 |
| Republican | 20 | 14 | 13 | 15 | 12 | 24 |
| Independent | 23 | 24 | 20 | 16 | 22 | 24 |
| Something else | 16 | 20 | 20 | 23 | 19 | 14 |
| State Medicaid expansion decision** |  |  |  |  |  |  |
| Expanded Medicaid | 62 | 48 | 71 | 62 | 77 | 62 |
| Did not expand Medicaid | 38 | 52 | 29 | 38 | 23 | 38 |
| Marketplace type ${ }^{* * *}$ |  |  |  |  |  |  |
| State-based marketplace | 31 | 24 | 38 | 34 | 41 | 30 |
| Federally facilitated marketplace | 69 | 76 | 62 | 66 | 59 | 70 |
| Region |  |  |  |  |  |  |
| Northeast | 17 | 11 | 19 | 19 | 19 | 17 |
| Midwest | 21 | 14 | 21 | 18 | 23 | 23 |
| South | 38 | 52 | 31 | 36 | 27 | 38 |
| West | 24 | 23 | 29 | 27 | 30 | 22 |
| Adult work status |  |  |  |  |  |  |
| Full-time | 54 | 41 | 34 | 50 | 23 | 73 |
| Part-time | 14 | 20 | 19 | 17 | 20 | 10 |
| Not working | 32 | 38 | 47 | 32 | 57 | 17 |
| Employer size^^ |  |  |  |  |  |  |
| 1-24 employees | 27 | 54 | 42 | 52 | 33 | 15 |
| 25-99 employees | 14 | 15 | 14 | 14 | 15 | 15 |
| 100-499 employees | 14 | 9 | 13 | 12 | 13 | 15 |
| 500 or more employees | 41 | 18 | 27 | 18 | 35 | 53 |
| Education level |  |  |  |  |  |  |
| High school or less | 38 | 63 | 50 | 40 | 57 | 25 |
| Some college/technical school | 31 | 23 | 29 | 29 | 30 | 31 |
| College graduate or higher | 31 | 13 | 20 | 29 | 13 | 44 |

Notes: * Includes those currently enrolled in marketplace coverage, those who are enrolled in Medicaid, and those who signed up for coverage through the marketplace but are not sure if it is Medicaid or private coverage. ${ }^{* *}$ The following states expanded their Medicaid program and began enrolling individuals in January 2017 or earlier: AK, AR, AZ, CA, CO, CT, DE, HI, IA, IN, IL, KY, LA, MA, MD, MI, MN, MT, ND, NH, NJ, NM, NV, NY, OH, OR, PA, RI, VT, WA, WV, and the District of Columbia. All other states were considered to have not expanded. *** The following states have state-based marketplaces: CA, CO, CT, ID, MA, MD, MN, NY, RI, VT, WA, and the District of Columbia. All other states were considered to have federally facilitated marketplaces. ^At least one of the following chronic conditions: hypertension or high blood pressure; heart disease; diabetes; asthma, emphysema, or lung disease; or high cholesterol. ^^ Base: full- and part-time employed adults ages 19-64.
—Not applicable.
Data: The Commonwealth Fund Affordable Care Act Tracking Survey, March-June 2017.

Table 2. Uninsured Rates Among Adults, 2013-2017

|  | Uninsured adults (ages 19-64) |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | 2013 | 2014 | 2015 | 2016 | 2017 |
| Unweighted n | 1,112 | 894 | 702 | 642 | 739 |
| Percent distribution | 19.9\% | 14.8\% | 13.3\% | 12.7\% | 14.0\% |
| Millions | 37 | 28 | 25 | 24 | 27 |
| Age |  |  |  |  |  |
| 19-34 | 28 | 18 | 19 | 18 | 16 |
| 19-25 | 31 | 19 | 16 | 17 | 14 |
| 26-34 | 26 | 18 | 23 | 19 | 18 |
| 35-49 | 18 | 15 | 13 | 11 | 15 |
| 50-64 | 14 | 11 | 8 | 9 | 10 |
| Race/Ethnicity |  |  |  |  |  |
| Non-Hispanic White | 16 | 12 | 9 | 9 | 10 |
| Black | 21 | 20 | 18 | 13 | 17 |
| Latino | 36 | 23 | 26 | 29 | 30 |
| U.S.-born Latino | 24 | * | * | 14 | 17 |
| Foreign-born Latino | 47 | * | * | 43 | 42 |
| Asian/Pacific Islander | 18 | 10 | 8 | 9 | 5 |
| Other/Mixed | 23 | 12 | 14 | 11 | 13 |
| Poverty status |  |  |  |  |  |
| Below 138\% poverty | 35 | 24 | 25 | 24 | 26 |
| 138\%-249\% poverty | 32 | 22 | 16 | 16 | 18 |
| 250\%-399\% poverty | 12 | 10 | 7 | 8 | 8 |
| 400\% poverty or more | 4 | 3 | 2 | 2 | 5 |
| Health status |  |  |  |  |  |
| Fair/Poor health status, or any chronic condition or disability^ | 20 | 16 | 14 | 13 | 13 |
| No health problem | 20 | 14 | 13 | 12 | 15 |
| Political affiliation |  |  |  |  |  |
| Democrat | 18 | 13 | 10 | 10 | 10 |
| Republican | 11 | 11 | 8 | 8 | 10 |
| Independent | 19 | 14 | 15 | 12 | 15 |
| Something else | 28 | 19 | 17 | 16 | 17 |
| State Medicaid expansion decision** |  |  |  |  |  |
| Expanded Medicaid | 18 | 12 | 10 | 10 | 11 |
| Did not expand Medicaid | 23 | 19 | 18 | 16 | 19 |
| Marketplace type*** |  |  |  |  |  |
| State-based marketplace | 19 | 10 | 11 | 10 | 11 |
| Federally facilitated marketplace | 20 | 17 | 15 | 14 | 15 |
| Region |  |  |  |  |  |
| Northeast | 13 | 12 | 8 | 10 | 9 |
| Midwest | 17 | 13 | 8 | 8 | 9 |
| South | 24 | 19 | 18 | 16 | 19 |
| West | 21 | 12 | 13 | 13 | 14 |
| Adult work status |  |  |  |  |  |
| Full-time | 14 | 12 | 10 | 9 | 11 |
| Part-time | 29 | 19 | 14 | 17 | 20 |
| Not working | 25 | 17 | 18 | 17 | 17 |
| Employer size^^ |  |  |  |  |  |
| 1-24 employees | 32 | 25 | 21 | 24 | 25 |
| 25-99 employees | 20 | 17 | 17 | 14 | 13 |
| 100-499 employees | 13 | 8 | 9 | 6 | 8 |
| 500 or more employees | 7 | 6 | 4 | 3 | 5 |
| Education level |  |  |  |  |  |
| High school or less | 28 | 23 | 22 | 22 | 23 |
| Some college/technical school | 19 | 14 | 11 | 11 | 11 |
| College graduate or higher | 10 | 5 | 5 | 3 | 6 |

Notes: * Data on foreign-born status are not available. ${ }^{* *}$ We categorize states as expansion states if their state expanded their Medicaid program as of January of the survey year. ${ }^{* * *}$ We categorize states as state-based marketplace or federally facilitated marketplace according to the marketplace type of the survey year.
${ }^{\wedge}$ At least one of the following chronic conditions: hypertension or high blood pressure; heart disease; diabetes; asthma, emphysema, or lung disease; or high cholesterol. ^^ Base: full- and part-time employed adults ages 19-64.
Data: The Commonwealth Fund Affordable Care Act Tracking Surveys, July-Sept. 2013, April-June 2014, March-May 2015, Feb.-April 2016, and March-June 2017.

Table 3. Demographics of Total Adults and Uninsured Adults, 2013 and 2017

|  | Total adults (ages 19-64) |  | Uninsured adults (ages 19-64) |  |
| :---: | :---: | :---: | :---: | :---: |
|  | 2013 | 2017 | 2013 | 2017 |
| Unweighted n | 6,132 | 4,813 | 1,112 | 739 |
| Percent distribution | 100\% | 100\% | 19.9\% | 14.0\% |
| Millions | 186 | 190 | 37 | 27 |
| Age |  |  |  |  |
| 19-34 | 32 | 34 | 46 | 40 |
| 19-25 | 15 | 16 | 23 | 16 |
| 26-34 | 18 | 18 | 23 | 24 |
| 35-49 | 32 | 31 | 29 | 33 |
| 50-64 | 33 | 33 | 23 | 23 |
| Race/Ethnicity |  |  |  |  |
| Non-Hispanic White | 63 | 61 | 50 | 43 |
| Black | 12 | 13 | 13 | 15 |
| Latino | 16 | 17 | 29 | 36 |
| U.S.-born Latino | 7 | 8 | 9 | 10 |
| Foreign-born Latino | 9 | 9 | 20 | 26 |
| Asian/Pacific Islander | 4 | 5 | 3 | 1 |
| Other/Mixed | 2 | 2 | 3 | 2 |
| Poverty status |  |  |  |  |
| Below 138\% poverty | 30 | 27 | 52 | 50 |
| 138\%-249\% poverty | 18 | 21 | 29 | 27 |
| 250\%-399\% poverty | 20 | 19 | 12 | 11 |
| 400\% poverty or more | 32 | 33 | 6 | 12 |
| Health status |  |  |  |  |
| Fair/Poor health status, or any chronic condition or disability^ | 47 | 52 | 47 | 48 |
| No health problem | 53 | 48 | 53 | 52 |
| Political affiliation |  |  |  |  |
| Democrat | 30 | 30 | 28 | 22 |
| Republican | 20 | 20 | 11 | 14 |
| Independent | 24 | 23 | 22 | 24 |
| Something else | 16 | 16 | 22 | 20 |
| State Medicaid expansion decision** |  |  |  |  |
| Expanded Medicaid | 59 | 62 | 53 | 48 |
| Did not expand Medicaid | 41 | 38 | 46 | 52 |
| Marketplace type*** |  |  |  |  |
| State-based marketplace | 36 | 31 | 33 | 24 |
| Federally facilitated marketplace | 64 | 69 | 66 | 76 |
| Region |  |  |  |  |
| Northeast | 17 | 17 | 12 | 11 |
| Midwest | 22 | 21 | 18 | 14 |
| South | 38 | 38 | 46 | 52 |
| West | 23 | 24 | 25 | 23 |
| Adult work status |  |  |  |  |
| Full-time | 53 | 54 | 39 | 41 |
| Part-time | 12 | 14 | 18 | 20 |
| Not working | 33 | 32 | 42 | 38 |
| Employer size^^ |  |  |  |  |
| 1-24 employees | 26 | 27 | 48 | 54 |
| 25-99 employees | 17 | 14 | 19 | 15 |
| 100-499 employees | 15 | 14 | 11 | 9 |
| 500 or more employees | 41 | 41 | 17 | 18 |
| Education level |  |  |  |  |
| High school or less | 39 | 38 | 56 | 63 |
| Some college/technical school | 30 | 31 | 29 | 23 |
| College graduate or higher | 29 | 31 | 14 | 13 |

Notes: ** We categorize states as expansion states if their state expanded their Medicaid program as of January of the survey year. *** We categorize states as state-based marketplace or federally facilitated marketplace according to the marketplace type of the survey year. ^ At least one of the following chronic conditions: hypertension or high blood pressure; heart disease; diabetes; asthma, emphysema, or lung disease; or high cholesterol. ^^ Base: full- and part-time employed adults ages 19-64.
Data: The Commonwealth Fund Affordable Care Act Tracking Surveys, July-Sept. 2013 and March-June 2017.

Table 4. Premium Assistance and Cost-Sharing Protections Under the Affordable Care Act, for 2017

| FPL | Income | Premium contribution as a share of income | Cost-sharing limits | Actuarial value: Silver plan |
| :---: | :---: | :---: | :---: | :---: |
| 100\% - < $138 \%$ | $\begin{aligned} & \text { S: } \$ 11,880-S:<\$ 16,394 \\ & \text { F: } \$ 24,300-F:<\$ 33,534 \end{aligned}$ | 2.04\% | $\begin{aligned} & \text { S: } \$ 2,350 \\ & \text { F: } \$ 4,700 \end{aligned}$ | 94\% |
| 138\%-149\% | $\begin{aligned} & \text { S: } \$ 16,394-<\$ 17,820 \\ & \text { F: } \$ 33,534-<\$ 36,450 \end{aligned}$ | 3.06\%-4.08\% |  | 94\% |
| 150\%-199\% | $\begin{aligned} & \text { S: } \$ 17,820-<\$ 23,760 \\ & \text { F: } \$ 36,450-<\$ 48,600 \end{aligned}$ | 4.08\%-6.43\% |  | 87\% |
| 200\%-249\% | $\begin{aligned} & \text { S: } \$ 23,760-<\$ 29,700 \\ & \text { F: } \$ 48,600-<\$ 60,750 \end{aligned}$ | 6.43\%-8.21\% | $\begin{aligned} & \text { S: \$5,700 } \\ & \text { F: } \$ 11,400 \end{aligned}$ | 73\% |
| 250\%-299\% | $\begin{aligned} & \text { S: } \$ 29,700-<\$ 35,640 \\ & \text { F: } \$ 60,750-<\$ 72,900 \end{aligned}$ | 8.21\% - 9.69\% | $\begin{aligned} & \text { S: } \$ 7,150 \\ & \text { F: } \$ 14,300 \end{aligned}$ | 70\% |
| 300\%-399\% | $\begin{aligned} & \text { S: } \$ 35,640-<\$ 47,520 \\ & \text { F: } \$ 72,900-<\$ 97,200 \end{aligned}$ | 9.69\% |  | 70\% |
| 400\%+ | $\begin{aligned} & \text { S: \$47,520+ } \\ & \text { F: \$97,200+ } \end{aligned}$ | - |  | - |

Notes: FPL refers to federal poverty level. Income levels based on 2016 FPL. Actuarial values are the average percent of medical costs covered by a health plan. $S$ = single; $F=$ family of four.
Data: Internal Revenue Service, Internal Revenue Bulletin, Rev. Proc. 2016-24 (IRS, May 2, 2016); and "Payment Protection and Affordable Care Act, HHS Notice of Benefit and Payment Parameters for 2017, Final Rule," Federal Register, March 8, 2016 81(45):12204-352.

## Appendix. Comparison of Uninsured Estimates from Recent Surveys

There are several surveys that have tracked changes in insurance coverage since the implementation of the Affordable Care Act's major coverage expansions. These surveys use slightly different methods, but were conducted over similar periods, with a baseline survey measuring the uninsured rate prior to implementation of the health reform law's major coverage provisions. Although the surveys have produced slightly different estimates, they are directionally the same, showing a significant decline in the rate and number of uninsured adults in the United States.

Survey Estimates of Changes in U.S. Uninsured Rates Since 2013

|  | Pre-implementation <br> uninsured rate (\%) <br> $[95 \% ~ C I]$ | Post-implementation <br> uninsured rate (\%) <br> $[95 \% \mathrm{CI}]$ | Millions of uninsured |
| :--- | :--- | :--- | :--- |
| Survey | $19.9 \%$ | $14.0 \%$ | $[12.7 \%-15.5 \%]$ |

Notes: Confidence intervals are shown when they were reported by the organization.
— Estimates were not reported.
${ }^{1}$ The Commonwealth Fund Affordable Care Act Tracking Survey, March-June 2017.
${ }^{2}$ R. A. Cohen, M. E. Martinez, and E. P. Zammitti, Health Insurance Coverage: Early Release of Estimates from the National Health Interview Survey, January-March 2017 (National Center for Health Statistics, Aug. 2017).
${ }^{3}$ Z. Auter, U.S. Uninsured Rate Edges Up Slightly (Gallup-Healthways Well-Being Index, April 10, 2017).

## Methodological Differences Between Private Surveys

| Survey | Population | Time frame | Sample frame | Response rate |
| :--- | :--- | :--- | :--- | :--- | :--- |
| The Commonwealth Fund Affordable Care <br> Act Tracking Survey | U.S. adults, <br> ages 19 to 64 | July-Sept. 2013 to <br> March-June 2017 | Dual-frame, random-digit <br> dialing telephone survey | 2013: 20.1\% <br> 2017: 9.6\% |
| National Health Interview Survey ${ }^{2,3}$ | U.S. adults, <br> ages 18 to 64 | 2013 to January- <br> March 2017 | Multistage area <br> probability design | $80 \%$ |

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## HOW THIS STUDY WAS CONDUCTED

The Commonwealth Fund Affordable Care Act Tracking Survey, March-June 2017, was conducted by SSRS from March 28 to June 20, 2017. The survey consisted of 15-minute telephone interviews in English or Spanish and was conducted among a random, nationally representative sample of 4,813 adults, ages 19 to 64, living in the United States. Overall, 1,198 interviews were conducted on landline telephones and 3,615 interviews on cellular phones.

This survey is the fifth in a series of Commonwealth Fund surveys to track the implementation and impact of the Affordable Care Act. The first was conducted by SSRS from July 15 to September 8, 2013, by telephone among a random, nationally representative U.S. sample of 6,132 adults ages 19 to 64 . The survey had an overall margin of sampling error of +/- 1.8 percentage points at the 95 percent confidence level.

The second survey in the series was conducted by SSRS from April 9 to June 2, 2014, by telephone among a random, nationally representative U.S. sample of 4,425 adults ages 19 to 64. The survey had an overall margin of sampling error of +/- 2.1 percentage points at the 95 percent confidence level. The sample for the April-June 2014 survey was designed to increase the likelihood of surveying respondents who were most likely eligible for new coverage options under the ACA. As such, respondents in the July-September 2013 survey who said they were uninsured or had individual coverage were asked if they could be recontacted for the April-June 2014 survey. SSRS also recontacted households reached through its omnibus survey of adults who were uninsured or had individual coverage prior to the first open enrollment period for 2014 marketplace coverage.

This third survey in the series was conducted by SSRS from March 9 to May 3, 2015, by telephone among a random, nationally representative U.S. sample of 4,881 adults, ages 19 to 64. The March-May 2015 sample was also designed to increase the likelihood of surveying respondents who had gained coverage under the ACA. SSRS recontacted households reached through their omnibus survey of adults between November 5, 2014, and February 1, 2015, who were uninsured, had individual coverage, had a marketplace plan, or had public insurance. The survey has an overall margin of sampling error of $+/-2.1$ percentage points at the 95 percent confidence level.

The fourth survey in the series was conducted by SSRS from February 2 to April 5, 2016, by telephone among a random, nationally representative U.S. sample of 4,802 adults, ages 19 to 64. The February-April 2016 sample was also designed
to increase the likelihood of surveying respondents who had gained coverage under the ACA. Interviews in wave 4 were obtained through two sources: 1) stratified RDD sample, using the same methodology as in waves 1, 2 and 3 ; and 2) households reached through the SSRS omnibus where interviews were previously completed with respondents ages 19 to 64 who were uninsured, had individual coverage, had a marketplace plan, or had public insurance. The survey has an overall margin of sampling error of $+/-2.0$ percentage points at the 95 percent confidence level.

The March-June 2017 sample was also designed to increase the likelihood of surveying respondents who had gained coverage under the ACA. Interviews in wave 5 were obtained through two sources: 1) stratified RDD sample, using the same methodology as in waves 1,2,3 and 4; and 2) households reached through the SSRS omnibus where interviews were previously completed with respondents ages 19 to 64 who were uninsured, had individual coverage, had a marketplace plan, or had public insurance.

As in all waves of the survey, SSRS oversampled adults with incomes below 250 percent of poverty to further increase the likelihood of surveying respondents eligible for the coverage options as well as allow separate analyses of responses of lowincome households.

The data are weighted to correct for oversampling uninsured and direct-purchase respondents, the stratified sample design, the overlapping landline and cellular phone sample frames, and disproportionate nonresponse that might bias results. The data are weighted to the U.S. 19-to-64 adult population by age, by state, gender by state, race/ethnicity by state, education by state, household size, geographic division, and population density using the U.S. Census Bureau's 2015 American Community Survey. Data are weighted to household telephone use parameters using the CDC's 2016 National Health Interview Survey.

The resulting weighted sample is representative of the approximately 190 million U.S. adults ages 19 to 64. Data for income, and subsequently for federal poverty level, were imputed for cases with missing data, utilizing a standard regression imputation procedure. The survey has an overall margin of sampling error of $+/-2.1$ percentage points at the 95 percent confidence level. The landline portion of the main sample survey achieved a 16.5 percent response rate and the cellular phone main-sample component achieved a 9.7 percent response rate. The overall response rate, including the prescreened sample, was 9.6 percent.


[^0]:    ${ }^{1}$ The Commonwealth Fund Affordable Care Act Tracking Survey, March-June 2017.
    ${ }^{2}$ R. A. Cohen, M. E. Martinez, and E. P. Zammitti, Health Insurance Coverage: Early Release of Estimates from the National Health Interview Survey, January-March 2017 (National Center for Health Statistics, Aug. 2017).
    ${ }^{3}$ About the National Health Interview Survey (National Center for Health Statistics, July 2017).
    ${ }^{4}$ Z. Auter, U.S. Uninsured Rate Edges Up Slightly (Gallup-Healthways Well-Being Index, April 10, 2017).
    ${ }^{5}$ K. Finegold and M. Z. Gunja, Survey Data on Health Insurance Coverage for 2013 and 2014, ASPE issue brief (Office of the Assistant Secretary for Planning and Evaluation, Oct. 31, 2014).
    ${ }^{6}$ Health Reform Monitoring Survey: HRMS Frequently Asked Questions (Urban Institute, 2016).

