



## *Fast Facts from EBRI*

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### **Health Coverage: Highs and Lows Among the States**

WASHINGTON—What state has the highest percentage of its residents covered by employment-based health insurance? What state has the lowest percentage? How much difference is there between the two?

A recent study by the nonpartisan Employee Benefit Research Institute (EBRI) provides the answers:

- Highest coverage rate: New Hampshire, 77.0 percent.
- Lowest coverage rate: New Mexico, 51.3 percent.
- Difference: 25.7 percentage points.

The EBRI study has a complete listing for all states and the District of Columbia. Here are the 10 states with the highest and lowest percentages of coverage:

#### **Highest Health Insurance Coverage Rate:**

New Hampshire – 77.0 percent.  
Minnesota – 73.5 percent.  
New Jersey – 71.5 percent.  
Connecticut – 71.4 percent.  
Hawaii – 70.9 percent.

Ohio – 70.9 percent.  
Delaware – 70.5 percent.  
Maryland – 70.4 percent.  
Iowa – 70.1 percent.  
Pennsylvania – 69.9 percent.

#### **Lowest Health Insurance Coverage Rate:**

New Mexico – 51.3 percent.  
Montana – 53.4 percent.  
Louisiana – 55.1 percent.  
Mississippi – 56.0 percent.  
Arizona – 56.7 percent.

Texas – 54.2 percent.  
Arkansas – 54.8 percent.  
California – 56.9 percent.  
Oklahoma – 57.3 percent.  
Florida – 57.8 percent.

The November 2005 *EBRI Issue Brief*, the source of these figures, notes that the states with the lowest coverage rates generally are in the south-central United States, areas where a smaller proportion of the population was eligible for employment-based benefits. The states with the highest percentage of coverage generally are in the Northeast, Mid-Atlantic, and Upper Midwest, areas with a tradition of wider benefits coverage. In addition, states in the Southwest tend to have a larger immigrant population, which typically does not work for employers that offer health insurance benefits. The study, “Sources of Health Insurance and Characteristics of the Uninsured: Analysis of the March 2005 Current Population Survey,” is available at: [www.ebri.org/pdf/briefspdf/EBRI\\_IB\\_11-2005.pdf](http://www.ebri.org/pdf/briefspdf/EBRI_IB_11-2005.pdf)

Another EBRI study, “The Impact of Immigration on Health Coverage in the United States,” may help explain the coverage levels in several states. That study appeared in the June 2005 *EBRI Notes* and is available at [www.ebri.org/pdf/notespdf/EBRI\\_Notes\\_06-2005.pdf](http://www.ebri.org/pdf/notespdf/EBRI_Notes_06-2005.pdf).

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