

# NEVADA'S UNINSURED POPULATION

## Nevada's Uninsured Population

### Executive Summary

This report examines Nevada's uninsured population. Its objective is to furnish a composite of Nevada's uninsured population so that stakeholders have the requisite data to develop a set of policy prescriptions and enhance administrative capacity in service of health insurance coverage expansion, given the consequences of uninsurance. These consequences include: limited access to health care, adverse health outcomes, medical debt, economic losses, and burdens on governmental financial resources.

Our team collected data from the American Community Survey (ACS) for 2013-2017 (ACS 5-Year Data) to construct a demographic, social, and economic profile of Nevada's uninsured. As a resource, ACS is distinctive in its comprehensive and extensive collection of vital attributes of the population in the United States. It is an ongoing survey conducted by the U.S. Census Bureau for multiple geographies, across a wide array of social, housing, economic, and demographic subjects. No other source affords such wide-ranging metrics on the characteristics of the uninsured. That they can be obtained from a single source adds value by ensuring comparability across indicators. However, the data is not without its limitations:

- There is a time lag in the data. The most recent year of data availability is 2017, and 5-year estimates for 2018 are expected to be released in December 2019. That means that the information contained in this report is current through 2017 and does not reflect any changes in the uninsured population since that time. This may be especially important in that the number of uninsured people increased nationwide for the first time since the implementation of the Affordable Care Act (ACA), perhaps as a result of uncertainty around repeal-and-replace efforts in that year. It is not yet known whether the spike in the uninsured rate was an anomaly, or reflects a more permanent health care development.
- Estimates from the ACS are "period" estimates, not "point-in-time" estimates. As such, they should be interpreted with caution: they do not describe the population at any given time but rather the averages in the period over which the data was collected. The 5-year estimates, as used primarily in this report, have the advantage of greater statistical reliability and precision over the 1-year estimates, though the latter are more current. Moreover, as the data is obtained from a survey, it should not be construed as a population count; the basis is the ACS sample, and, like all samples, is subject to error.
- While cross-tabulation of some data (e.g., age by sex) is available in the ACS, this does not hold true for the data on health insurance coverage. It is limited to aggregate counts for selected groups. Furthermore, the lack of individual-level data precludes more granular analysis, particularly interaction effects across groups (e.g., Latino young adults with some college as a percentage of the uninsured).

The Urban Institute additionally provided the Guinn Center with data on program eligibility amongst those without health care coverage for 2019.

The Guinn Center finds that Nevada’s uninsured population is comprised primarily of young adults, Latinos, the less educated, workers, and lower income individuals. Highlighted findings include the following:

- In Nevada, 397,974 people, or 14.0 percent of the state population, are uninsured. The national average is 10.5 percent, and Nevada’s rate is sixth highest in the nation.
- Nevada’s uninsured population is concentrated heavily in Clark County, though some rural/frontier counties have higher uninsurance rates.
- Non-elderly adults make up more than four-fifths of the uninsured population in Nevada (81.0 percent); young adults (26 to 34 years of age) comprise the largest share (21.8 percent).
- White individuals make up 60.6 percent of the uninsured population, followed by African Americans (8.0 percent), and Asians (6.6 percent). Latinos represent just over one-third of Nevada’s population (35.9 percent) but 59.1 percent of its uninsured population.
- Nearly one in three uninsured individuals in Nevada, or 32.4 percent, is a non-citizen.
- Individuals with a high school diploma or less comprise 62.8 percent of Nevada’s uninsured.
- Employed Nevadans make up a disproportionate share of the uninsured population—over three-fifths, or 62.9 percent.
- Nevadans with household incomes ranging from \$25,000 to \$49,999 are most heavily concentrated amongst the uninsured (31.6 percent).
- Individuals in poverty make up more than one-quarter of the Nevada’s uninsured population (26.0 percent).
- More than half of Nevadans (55.8 percent) are eligible for Medicaid/CHIP and/or Marketplace tax credits but uninsured. The remainder, or 44.2 percent, are ineligible for insurance coverage.

Reaching Nevada’s uninsured likely will necessitate a diverse mix of strategies, including increased outreach and education to those who are eligible but struggle to navigate the complexities of the health insurance system, and policy interventions if gains in coverage amongst the ineligible is a state objective.



## Nevada's Uninsured Population

### Introduction

The enactment of the Patient Protection and Affordable Care Act (ACA) of 2010 expanded health insurance coverage to millions of individuals in the United States. In 2013, the year before the ACA was implemented fully, about 45.6 million people (14.9 percent) nationwide lacked health insurance coverage.<sup>1</sup> By 2017, approximately 12.4 million individuals had gained coverage, with the total number of uninsured declining to roughly 33.2 million people nationwide.<sup>2</sup> This amounts to a 27.2 percent reduction in the uninsured population and 4.4 percentage-point decrease in the uninsurance rate.

Despite what has been characterized as “historic gains in health insurance coverage” that have been attributed to key provisions in the ACA, such as Medicaid expansion and the provision of Marketplace subsidies, the remaining uninsured comprises a not-insubstantial percentage of the U.S. population: more than one in ten individuals, or 10.5 percent.<sup>3</sup>

Research shows that, nationwide, the uninsured tend to be non-elderly adults and come from low-income families with at least one worker in the family, with people of color—particularly Latinos—having a higher risk of uninsurance than white individuals.<sup>4</sup> While there is some statewide variation in the characteristics of the uninsured, particularly as adoption of Medicaid expansion has not been universal, and regional distinctions persist, commonalities across recent state-level studies suggest that the data reflects national patterns.<sup>5</sup>

A recent report released by the Commonwealth Fund revealed that not only did Nevada rank 48<sup>th</sup> in the nation for overall health care but that its uninsured rate was the highest of all Medicaid expansion states in the continental United States. (Only Alaska, which is a Medicaid expansion state, has a higher rate).<sup>6</sup> The Commonwealth Fund’s findings suggest that an analysis of Nevada’s uninsured population is warranted, as no such study yet has been conducted, and the state’s uninsurance rate is fairly high.<sup>7</sup>

Uninsurance has both micro- and macro-level consequences. For individuals, it limits health care access, leading to adverse health outcomes, which, at its extreme, can mean higher mortality rates.<sup>8</sup> Relative to their insured counterparts, the uninsured are more likely to go without care; some may forgo preventive care and postpone or avoid treatment for chronic conditions.<sup>9</sup> Uninsured individuals are likely to be in worse health than those with coverage, translating into a reduction of their earning ability.<sup>10</sup> Medical debt is an ongoing concern for the uninsured.<sup>11</sup> For employers, poorer health amongst the uninsured increases absenteeism, which, in turn, can affect labor productivity, business profitability, and, more broadly, economic growth.<sup>12</sup> Moreover, uncompensated care cost Nevada hospitals \$174 million in 2016.<sup>13</sup> Federal, state, and local governments, along with private entities help defray these costs.<sup>14</sup> However, the opportunity cost of this forgone revenue is the diversion of funding away from other programs and services.<sup>15</sup>

Policy makers and program officials recognize that targeted interventions may help reach population sub-groups that are amongst the uninsured and help to reduce their numbers. But the viability of a

suite of potential policy solutions rests on a comprehensive understanding of who the uninsured are so that interventions (and even legislation) can be tailored effectively.

The objective of this report is to furnish a composite of Nevada’s uninsured population so that the state’s Department of Health and Human Services (DHHS), the governor, legislators, and other stakeholders have the requisite data to develop a set of policy prescriptions and enhance administrative capacity in service of health insurance coverage expansion.<sup>a</sup>

To construct a profile of Nevada’s uninsured population, our team collected data from the American Community Survey (ACS) for 2013-2017 (ACS 5-Year Data; referred to hereafter as 2017), which is the most recent year for which these estimates can be obtained. With the exception of program eligibility, as discussed below, and the time series in Figure 2, which is based on ACS 5-year data for 2010-2017 and ACS 1-year data for 2009, data in this analysis is 2013-2017 ACS 5-Year Data.

As a resource, ACS is distinctive in its comprehensive and extensive collection of vital attributes of the population in the United States. It is an ongoing survey conducted by the U.S. Census Bureau for multiple geographies, across a wide array of social, housing, economic, and demographic subjects.<sup>16</sup> No other source affords such wide-ranging metrics on the characteristics of the uninsured. That they can be obtained from a single source adds value by ensuring comparability across indicators. However, the data is not without its limitations:

- There is a time lag in the data. The most recent year of data availability is 2017, and 5-year estimates for 2018 are expected to be released in December 2019.<sup>17</sup> That means that the information contained in this report is current through 2017 and thus does not reflect any changes in the uninsured population since that time. This may be especially important in that the number of uninsured people increased nationwide for the first time since the implementation of the Affordable Care Act (ACA), perhaps as a result of uncertainty around repeal-and-replace efforts in that year.<sup>18</sup> It is not yet known whether the spike in the uninsured rate was an anomaly or a more permanent health care development.
- Estimates from the ACS are “period” estimates, not “point-in-time” estimates.<sup>19</sup> As such, they should be interpreted with caution: they do not describe the population at any given time but rather the averages in the period over which the data was collected.<sup>20</sup> The 5-year estimates, as used primarily in this report, have the advantage of greater statistical reliability and precision over the 1-year estimates, though the latter are more current.<sup>21</sup> Moreover, as the data is obtained from a survey, it should not be construed as a population count; the basis is the ACS sample, and, like all samples, is subject to error.<sup>22</sup>
- While cross-tabulation of some data (e.g., age by sex) is available in the ACS, this does not hold true for the data on health insurance coverage. It is limited to aggregate counts for selected groups. Furthermore, the lack of individual-level data precludes more granular analysis, particularly interaction effects across groups (e.g., Latino young adults with some college as a percentage of the uninsured).

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<sup>a</sup> This report was produced in collaboration with the Nevada Department of Health and Human Services.

The report proceeds as follows:

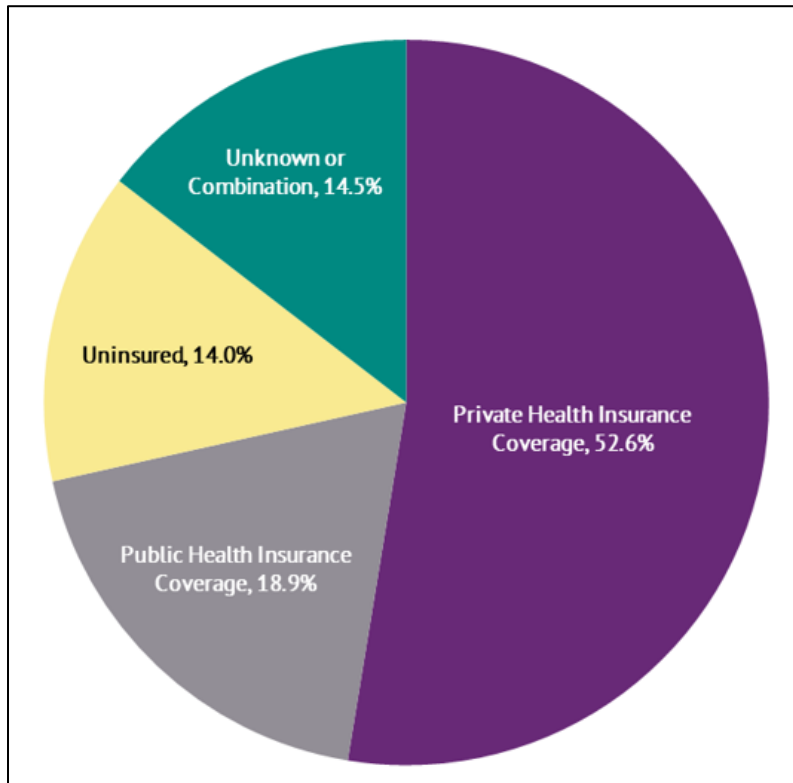
- In the next section, we provide an overview of the uninsurance landscape in Nevada, which includes the distribution of insurance coverage in the state, uninsured rates over time, a comparative national assessment, and a county-level breakdown.
- The subsequent section contains a demographic, social, and economic profile of Nevada’s uninsured. We evaluate metrics on age, sex, race, ethnicity, nativity and citizenship, disability status, educational attainment, employment status, work experience, class of worker, household income, and poverty. We perform a distributional analysis, whereby counts of demographic groups within categories are calculated as percentages of the uninsured. Each group’s share of the total population is included, as well, such that overrepresentation amongst the uninsured is conveyed readily. This type of analysis is distinct from one that focuses on the uninsurance rate, which is defined as the percentage of the uninsured within a demographic group. However, there are some pronounced disparities across uninsurance rates, and we discuss these in kind, though we neither graph this data nor present it in tabular form (see Note 2, below). Notes:
  - 1) While many studies limit their data to only the non-elderly, adult population (i.e., people ages 19 to 64), we broaden our scope to include the total population (or the total universe for which the metrics are determined, per ACS). While it is true that children and the elderly tend to have higher coverage rates than other adults—through Medicaid and the Children’s Health Insurance Program (CHIP; in Nevada, SCHIP, or Nevada Check Up) for the former and Medicare for the latter—a considerable number of children and seniors in Nevada are uninsured, and we would be remiss in excluding them.<sup>23</sup>
  - 2) Appendix A contains the data used to construct the figures in this section. These tables provide a tabulation of each group in Nevada, for the uninsured and total population (or the total universe for which the metrics are determined, per ACS), as the counts are not displayed graphically. The percentages are duplicated in these tables for the reader’s convenience. In addition, each table presents the data by county, with statewide totals in bold. While the county-level numbers are too small to draw any meaningful conclusions, they offer a level of detail that may be of interest to some readers.
  - 3) Appendix B is a compendium of graphs that compares the distribution of uninsured for each metric against the six other states in the Intermountain West (Arizona, California, Colorado, New Mexico, Texas, and Utah) and the U.S. average.
- The last section concludes an examination of health insurance eligibility amongst the uninsured in Nevada, the data for which was provided to the Guinn Center courtesy of the Urban Institute. While the demographic, social, and economic characteristics of Nevada’s uninsured population lend insight into uninsurance in the state, the metrics do not map neatly onto program eligibility, as certain groups face barriers to insurance coverage that is not immediately apparent in the ACS estimates. This data distinguishes between those individuals who are ineligible for insurance and those who are eligible but remain uninsured. Identification of these sub-populations can help DHHS and policymakers curate effective strategies for coverage expansion.



## Overview of Uninsurance in Nevada

Last year, Nevada tied with Idaho as the nation’s fastest-growing states (2.1 percent), with its population reaching nearly 2.9 million in 2017.<sup>24</sup> While most Nevadans have some form of health insurance coverage, nearly 400,000 individuals are uninsured. Figure 1 provides a breakdown of health insurance coverage in Nevada.

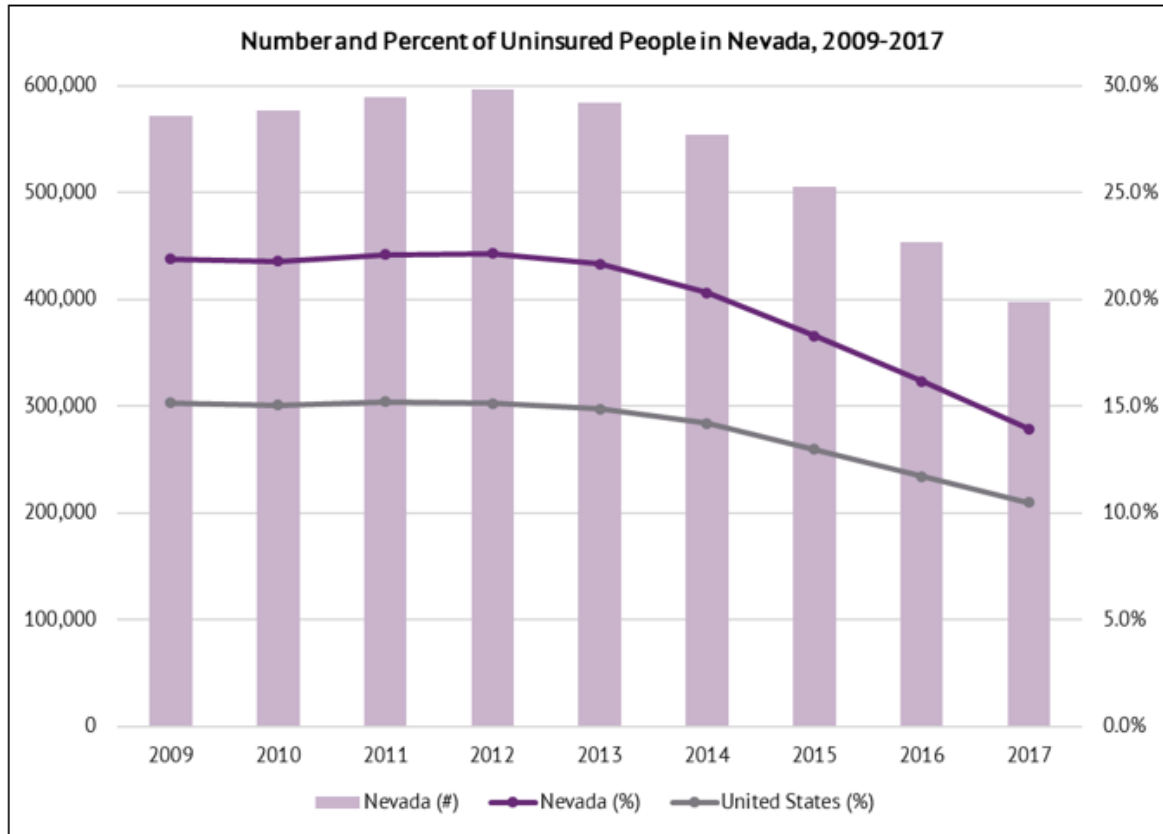
**Figure 1. Health Insurance Coverage in Nevada, by Type, 2017**



About 1.5 million Nevadans, or more than half of the population (52.6 percent), have private health insurance coverage. This includes employer-based insurance (45.9 percent), direct-purchase insurance (5.5 percent), and Tricare/Military Coverage (1.2 percent). More than 500,000 individuals in Nevada (18.9 percent) have public health insurance coverage: Medicare (5.8 percent), Medicaid/Mean-Tested Coverage (12.6 percent), or Veterans Affairs (VA) Coverage (0.5 percent). Those with unknown or combination coverage are included amongst the insured population (14.5 percent). The remainder is the uninsured population, or 397,974 Nevadans. This amounts to 14.0 percent of the total, which is 3.5 percentage points higher than the national average of 10.5 percent uninsured.

Nevada has made gains in health insurance coverage since the full implementation of the ACA in 2014, as shown in Figure 2.

**Figure 2. Number and Percent of Uninsured People in Nevada, 2009-2017**



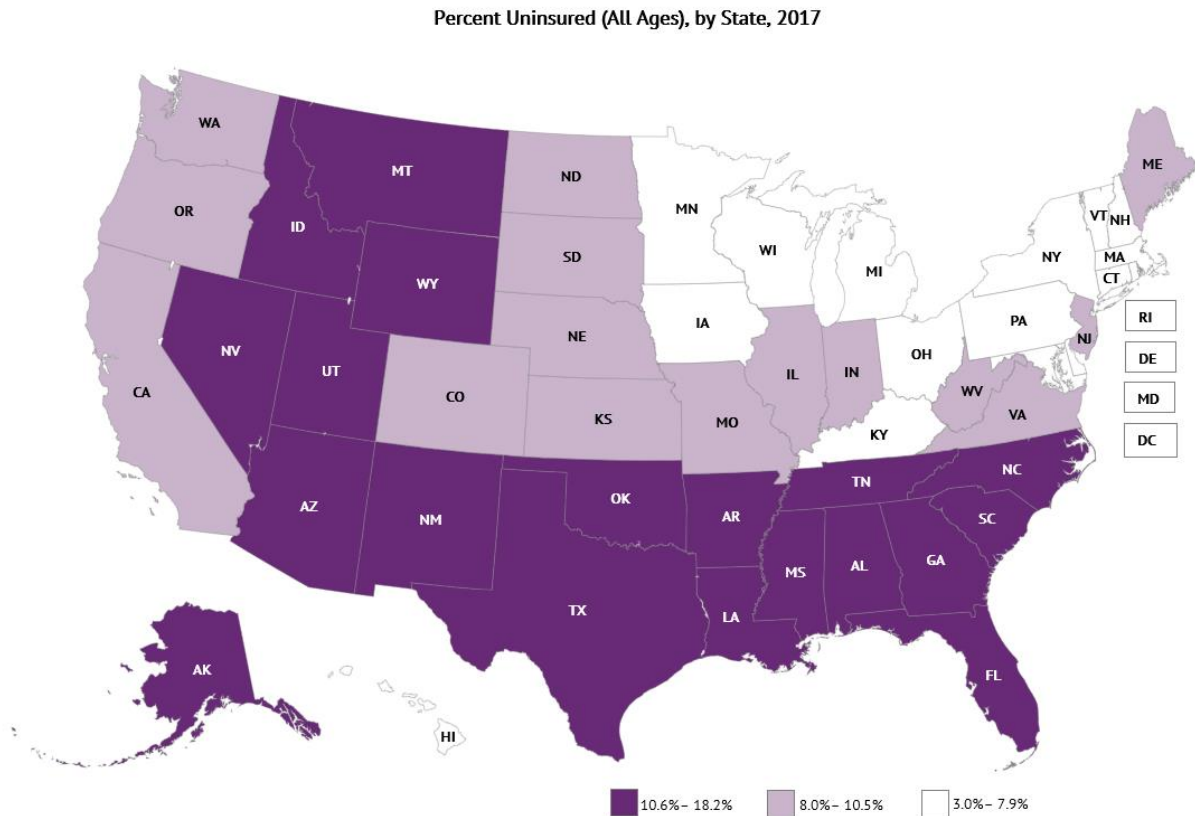
In 2009, 571,615 Nevadans were uninsured, but by 2017, that number had declined to 397,974, for a 30.4 percent decrease. In 2013, the year before the ACA was implemented fully, an estimated 583,791 people (21.7 percent) lacked health insurance coverage in Nevada. By 2017, an additional 185,817 Nevadans had gained coverage, for 31.8 percent decrease in the uninsured population.





In comparative national context, however, Nevada’s uninsurance rate is relatively high. Figure 3 is a map of the United States; the most deeply shaded states have an uninsurance rate that is higher than the national average of 10.5 percent. There are 19 such states in total.

**Figure 3. Percent Uninsured (All Ages), by State, 2017**



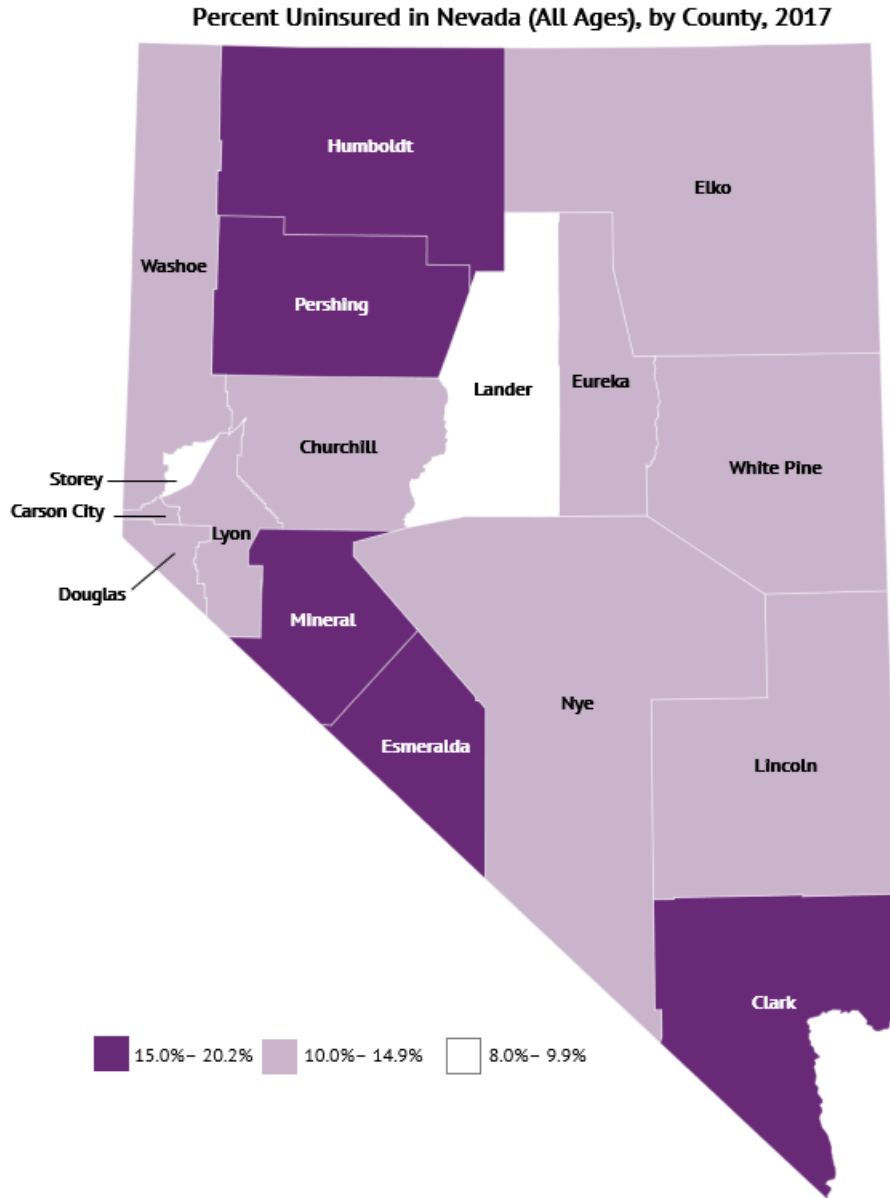
Nevada has the sixth-highest rate of uninsured in the nation at 14.0 percent. The top six, in descending order, are: Texas (18.2 percent), Alaska (15.5 percent), Florida (14.9 percent), Oklahoma (14.9 percent), Georgia (14.8 percent), and Nevada (14.0 percent). As noted previously, only Alaska outpaces Nevada amongst Medicaid expansion states in its uninsurance rate.

Medicaid expansion tends to correlate loosely with higher rates of insurance coverage. That is, of the states with the lowest uninsured rates (shaded white), all but Wisconsin—which covers adults up to 100 percent of FPL in Medicaid—had adopted expansion as of 2017.<sup>25</sup> But amongst the states with uninsurance rates that are higher than the national average, seven (including Alaska and Nevada) had expanded Medicaid by 2017: Arizona, Arkansas, Louisiana, Montana, and New Mexico. The remaining 12 states are not Medicaid expansion states or had not adopted expansion as of 2017. Moreover, 14 non-Medicaid expansion states (as of 2017) have lower uninsurance rates than Nevada.<sup>b</sup>

<sup>b</sup> These states are: Alabama, Idaho, Kansas, Maine, Mississippi, Missouri, Nebraska, North Carolina, South Carolina, South Dakota, Tennessee, Utah, Virginia, and Wyoming.

Nevada’s uninsured population is concentrated heavily in Clark County, though some rural/frontier counties have higher uninsurance rates, as shown in the map in Figure 4.

**Figure 4. Percent Uninsured in Nevada (All Ages), by County, 2017**



In Clark County, 307,434 people are uninsured, representing 77.2 percent of the uninsured population in the state and 14.7 percent of the total county population. Mineral County (15.3 percent), Humboldt County (16.0 percent), Pershing County (16.5 percent), and Esmeralda County (20.2 percent) have higher uninsurance rates than Clark County, but, collectively, their total number of uninsured individuals is 4,372.

Using the Nevada State Office of Rural Health’s classification of urban counties (Carson City, Clark County, and Washoe County) versus rural/frontier counties (the remaining 14 counties in the state), we evaluated the extent to which there is an urban-rural divide in uninsurance rates.<sup>26</sup>

The data suggests that there is not. Nevada’s rural/frontier population is 268,660 (9.4 percent of the total), and its urban population is 2,584,033 (90.6 percent of the total). The number of uninsured individuals residing in rural/frontier counties is 32,199, while the total uninsured residents of urban counties is 365,775. Thus, the uninsurance rate in rural/frontier counties is 12.0 percent, while that in the urban counties is 14.2 percent. Uninsured individuals in Carson City, Clark County, and Washoe County comprise 91.9 percent of the total uninsured in Nevada, while the other 14 counties’ share is 8.1 percent.

### **Demographic, Social, and Economic Characteristics of Nevada’s Uninsured Population**

This section evaluates metrics on age, sex, race, ethnicity, nativity and citizenship, disability status, educational attainment, employment status, work experience, class of worker, household income, and poverty.

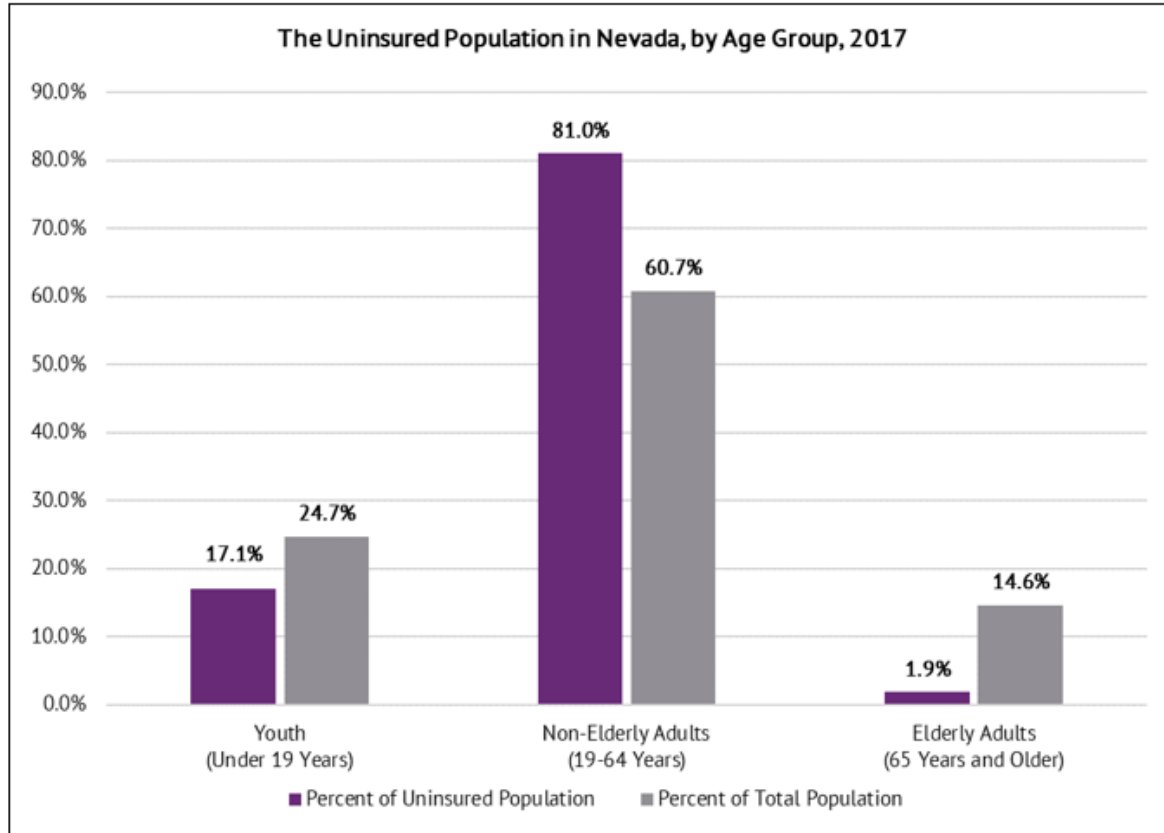
#### ***Age***

Figure 5 presents the distribution of the uninsured population in Nevada by age group: youth (under 19 years), non-elderly adults (19 to 64 years), and elderly adults (65 years and older). This is an age classification scheme that permits an assessment of the broad contours of the uninsured population. Age groups are disaggregated in Figure 6 into nine cohorts for further analysis.

Non-elderly adults make up more than four-fifths of the uninsured population in Nevada (81.0 percent). They are trailed distantly by youth (17.1 percent) and then by the elderly (1.9 percent). The distribution of the data conforms to our expectations that non-elderly adults are uninsured in greater numbers than their younger and older counterparts.

This is a function of population size but also a result of more limited access to federal and state health insurance programs. Medicaid and SCHIP (Nevada Check Up) extend no-cost or low-cost health coverage to the state’s eligible children at higher family income levels than adults, while Medicare offers coverage to most adults beginning at age 65.<sup>27</sup> Given the range of coverage options available to children (i.e., those under 19 years of age), it is notable that almost 20 percent of the uninsured are youths, though they may not meet certain qualifying criteria. However, nearly one in ten children, or 9.7 percent of those under 19 years of age, is uninsured.

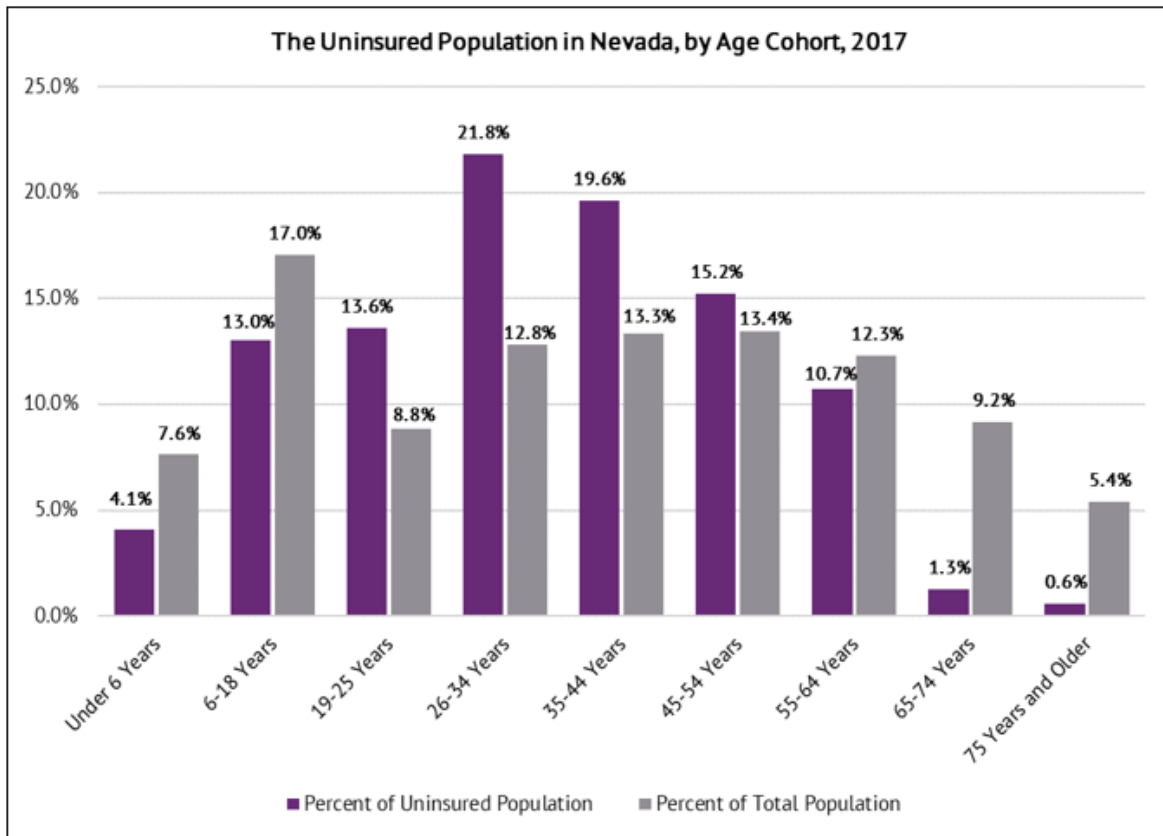
**Figure 5. The Uninsured Population in Nevada, by Age Group, 2017**



Further disaggregation of the data illuminates the variation across age cohorts within the non-elderly adult category (Figure 6). The uninsurance rate of those aged 26 to 44 is 22.1 percent. Amongst Nevada’s uninsured population, young adults (26 to 34 years of age) and those in early middle age (35 to 44 years of age) comprise the largest shares, at 21.8 percent and 19.6 percent, respectively. On each side of these age bands, there is a drop-off, with those aged 19 to years making up 13.6 percent of the uninsured, and those aged 45 to 54 years forming 15.2 percent of the uninsured.

However, these four age cohorts are overrepresented in Nevada’s uninsured relative to their percentages of total population, with the largest gap in those aged 26 to 34 years (one-fifth of the uninsured but only 12.8 percent of total population). The disproportionate representation of young adults amongst Nevada’s uninsured population may be attributed, at least in part, to the “Under-26” coverage rule of the ACA, whereby individuals can remain on their parents’ health insurance policy until their 26<sup>th</sup> birthday.<sup>28</sup> A lag may exist between loss of coverage and the ability to find an affordable coverage option, though 26 year olds initially are not restricted to the Open Enrollment period and may qualify for Special Enrollment in the Marketplace within 60 day of aging out of a plan.<sup>29</sup> But other factors may play a role in this generational tendency toward uninsurance, such as financial insecurity, declining wages, and student loan debt.<sup>30</sup>

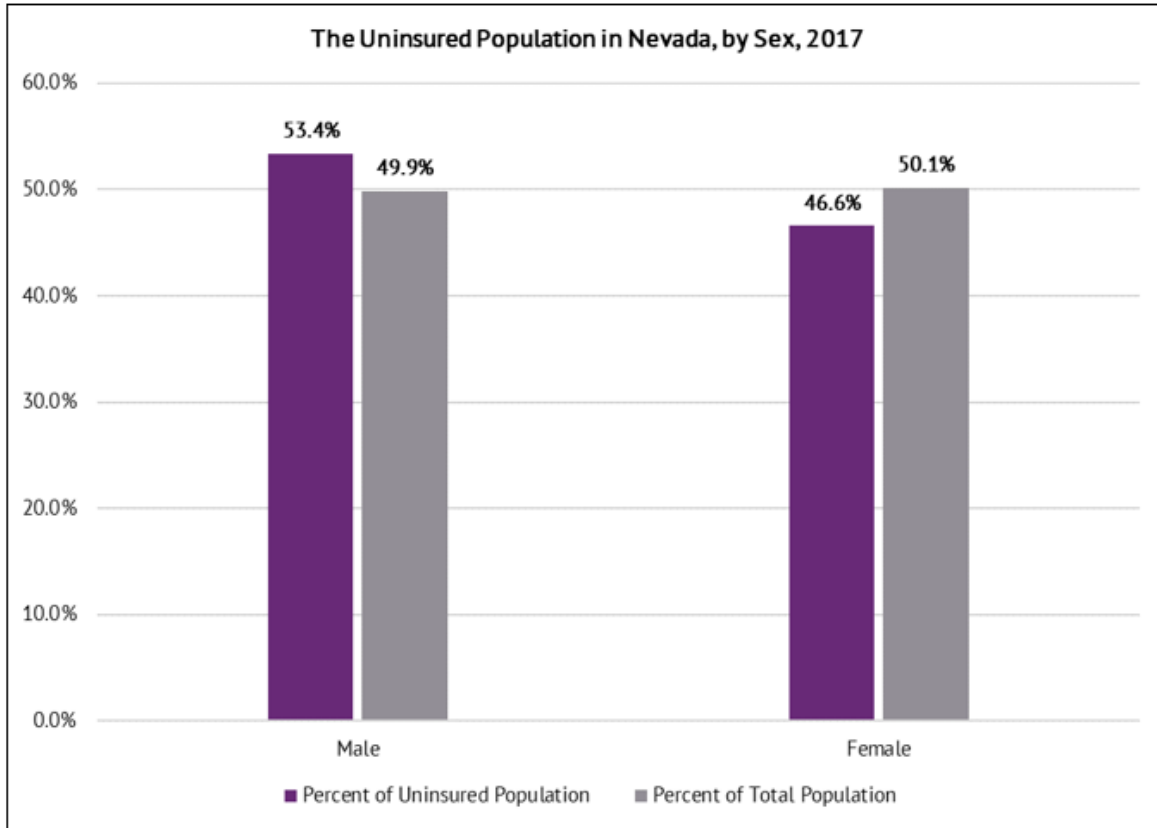
Figure 6. The Uninsured Population in Nevada, by Age Cohort, 2017



*Sex*

The uninsured population in Nevada is almost evenly split between men and women, though male Nevadans represent a greater share of the uninsured, as shown in Figure 7, and have higher rates of uninsurance than their female counterparts. An estimated 212,476 of Nevada’s men are uninsured, for 53.4 percent of the total uninsured population. In contrast, 222,423 female Nevadans are uninsured, for 46.6 percent of the total uninsured.

**Figure 7. The Uninsured Population in Nevada, by Sex, 2017**

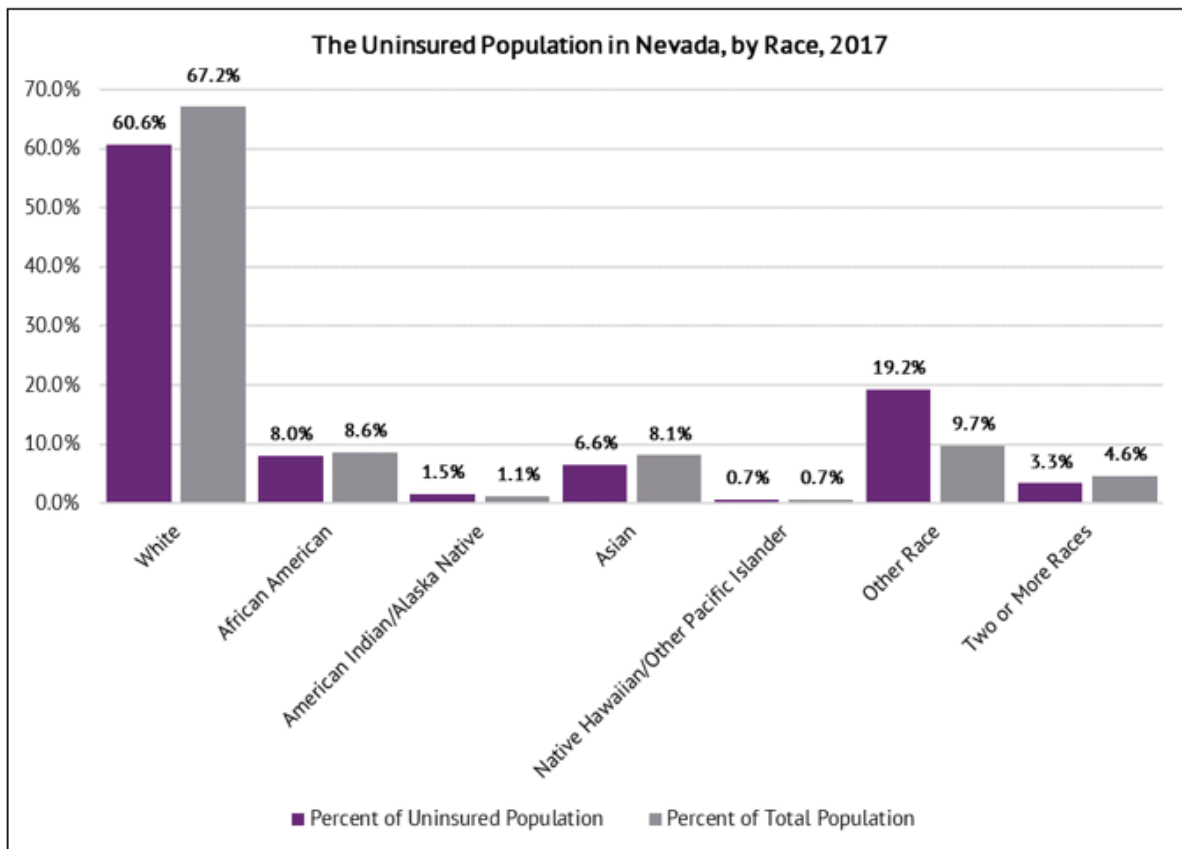


**Race**

Figure 8 shows the racial breakdown of the uninsured population in Nevada. The demographic distribution of uninsurance largely corresponds with the state’s population as a whole. Only those identifying as Other Race are overrepresented relative to their total population share (19.2 percent versus 9.7 percent). White individuals make up 67.2 percent of the total population and 60.6 percent of the uninsured population. Given the composition of the population, each racial group’s share of the uninsured is relatively small. African Americans comprise 8.0 percent of the uninsured, followed by Asians (6.6 percent), Two or More Races (3.3 percent), American Indians/Alaska Natives (1.5 percent), and Native Hawaiians/Other Pacific Islanders (0.7 percent).

There are marked disparities in uninsurance rates across racial groups, however. Those identifying as biracial/multiracial (i.e., Two or More Races) have the lowest uninsurance rate at 10.1 percent, followed by Asians, with an uninsurance rate of 11.3 percent. In contrast, American Indians/Alaska Natives (19.2 percent) and those identifying as Other Race have the highest uninsurance rates (27.6 percent).

**Figure 8. The Uninsured Population in Nevada, by Race, 2017**



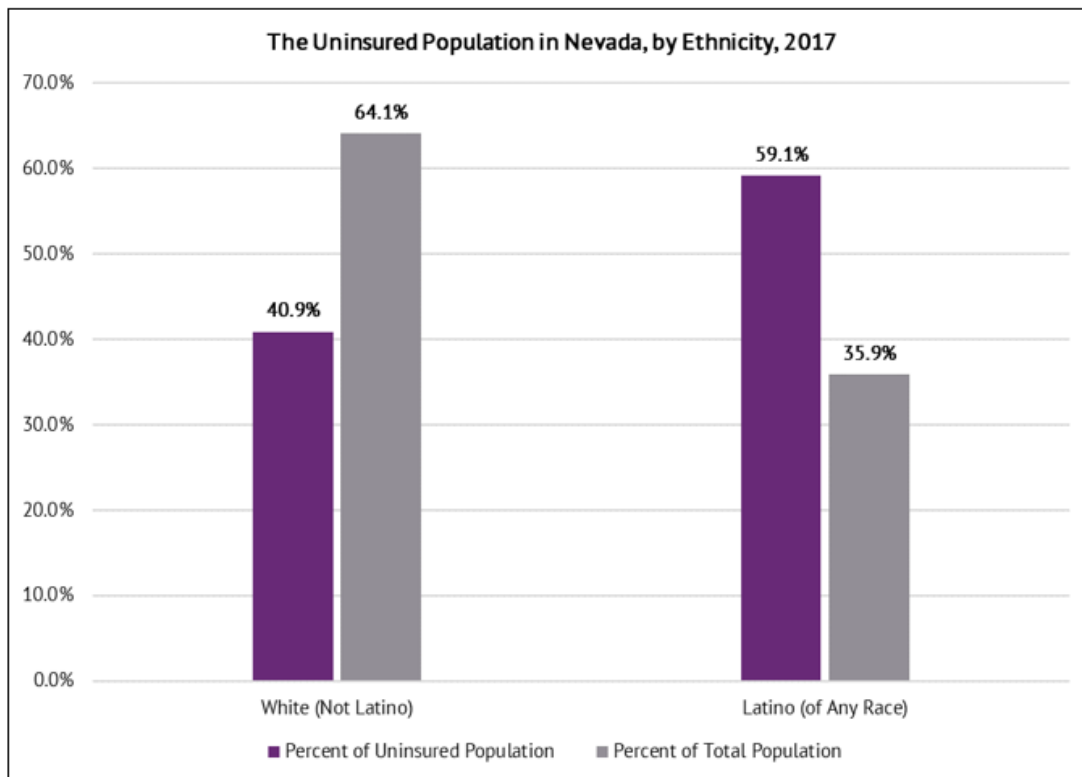
## Ethnicity

The distribution of the uninsured population, by ethnicity—specifically, white (not Latino) and Latino (of any race)—is displayed in Figure 9. Note that the binary comparison and the specification of white (not Latino) means that the percentages in Figure 9 differ from those for racial categories in Figure 8. In Nevada, Latinos represent just over one-third of Nevada’s population (35.9 percent) but 59.1 percent of its uninsured population. The distribution of non-Latino white individuals is nearly a mirror image of that for Latinos: 64.1 percent of total population and 40.9 percent of the uninsured population. Nearly one-quarter of Latinos (23.8 percent) in Nevada are uninsured, while just 9.2 percent of non-Latino white individuals are uninsured.

The high rates of Latino uninsurance are something of a puzzle. It is possible that some Latinos lack health insurance because they are unauthorized immigrants, as has been suggested, but we cannot infer that Nevada’s unauthorized immigrant population is disproportionately Latino.<sup>31</sup> Nor can we assume that all unauthorized immigrants lack health insurance coverage; nationally, less than half of unauthorized immigrants (about 45.0 percent) are uninsured.<sup>32</sup> Some Latinos are not citizens but are lawfully residing in the United States, though non-citizens do face some barriers in accessing coverage, which we discuss in the next sub-section.

One possible driver is that many Latinos are young. In Nevada, the median age of Latinos is 27.8, while the median age of the population as a whole is 37.7.<sup>33</sup> And, as discussed previously, it is this age cohort that is overrepresented amongst the uninsured.<sup>34</sup>

**Figure 9. The Uninsured Population in Nevada, by Ethnicity, 2017**



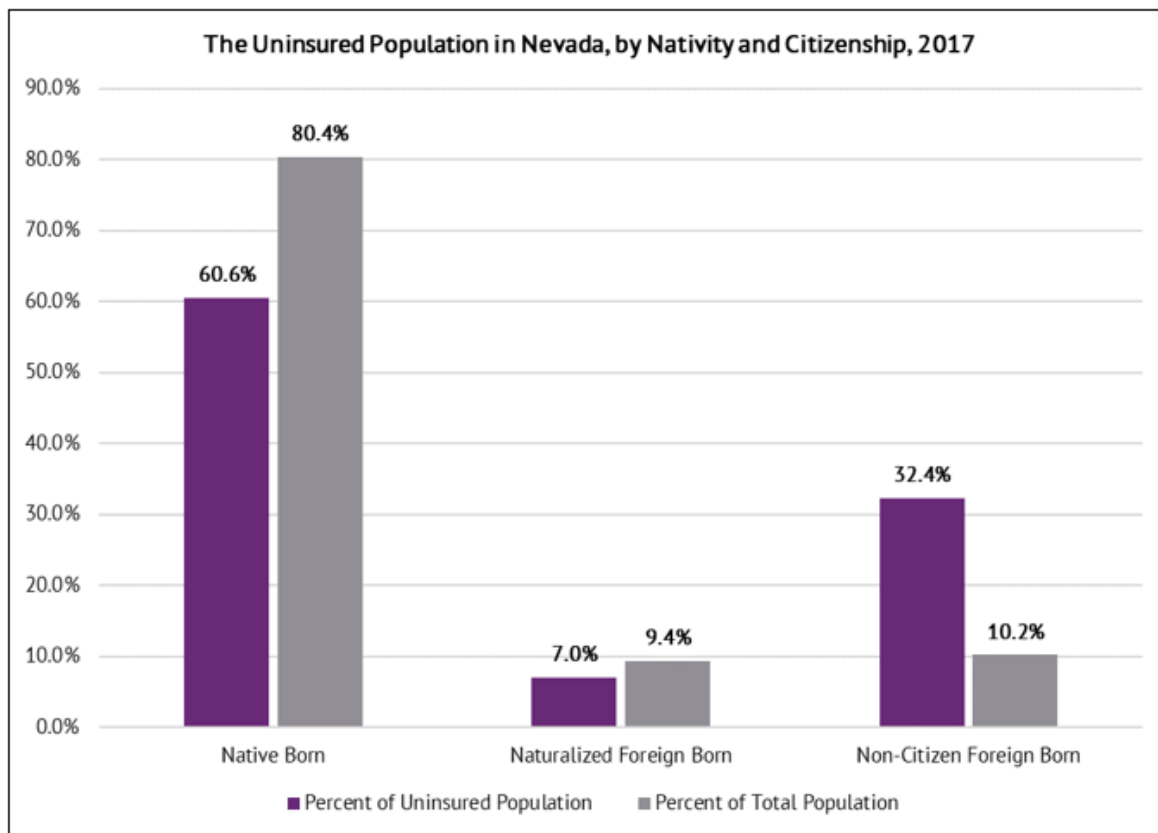


### Nativity and Citizenship

The total number of uninsured native-born citizens in Nevada is 241,098, which represents 60.6 percent of Nevada’s uninsured population. Collectively, American citizens—both native born and naturalized foreign born—form the largest share of the uninsured (67.6 percent). But nearly one in three uninsured individuals, or 32.4 percent, is a non-citizen who is foreign born. And foreign-born non-citizens have disproportionately higher rates of uninsurance than citizens. While each 10.5 percent of native born and naturalized citizens are uninsured, almost half of non-citizens (44.2 percent) are uninsured.

Non-citizens confront specific challenges in obtaining health insurance coverage through the Marketplace and such federal programs as Medicaid. Marketplace coverage requires that immigrants be “lawfully present,” which is defined as having “qualified non-citizen” immigration status (e.g., lawful permanent residents) without a waiting period, amongst other legal categories.<sup>35</sup> On the other hand, Medicaid (and CHIP) mandate a five-year waiting period before a “qualified non-citizen” can receive coverage, though there are some exceptions.<sup>36</sup> Nevada began covering lawfully residing children in Medicaid and SCHIP (Nevada Check Up) without the five-year waiting period requirement on January 1, 2019; any related expansion of coverage would not be reflected in the data used in this report.<sup>37</sup>

**Figure 10. The Uninsured Population in Nevada, by Nativity and Citizenship, 2017**

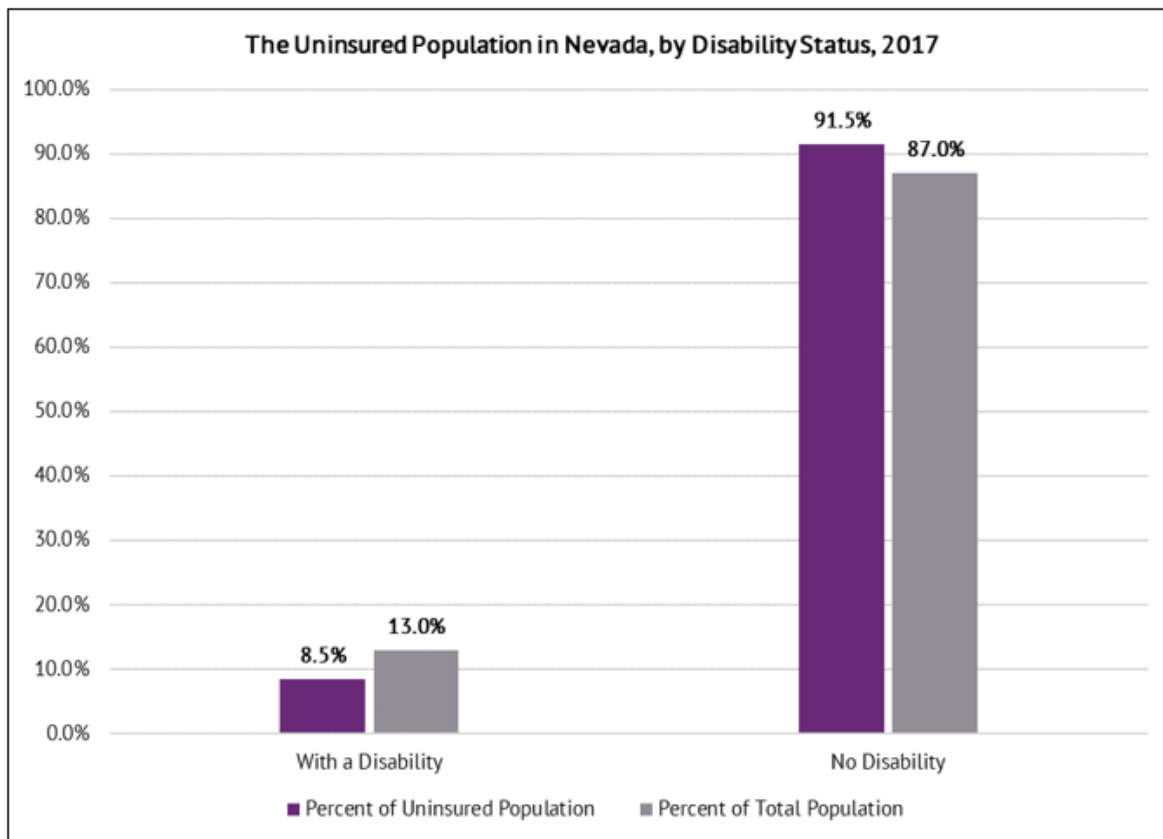


Unauthorized immigrants face their own barriers to coverage, such as eligibility restrictions that exclude their participation in the Marketplace, Medicare, and Medicaid/CHIP.<sup>38</sup> Although we do not know the uninsurance rate amongst the unauthorized immigration population in Nevada, we previously noted that the national rate is 45.0 percent. Data shows that an estimated 210,000 Nevada residents were unauthorized immigrants in 2017.<sup>39</sup> This amounts to about 7.4 percent of the total state population. If the national average uninsurance rate for unauthorized immigrants holds in Nevada, that would mean that roughly 94,500 unauthorized immigrants were not covered, or approximately 23.7 percent of the uninsured population.

### *Disability Status*

Consonant with proportions of total population, Nevada’s uninsured is tilted heavily toward those without a disability, as shown in Figure 11. An estimated 364,217 of Nevada’s abled individuals are uninsured, for 91.5 percent of the total uninsured population. In contrast, 33,757 disabled Nevadans are uninsured, for 8.5 percent of the total. Although many disabled individuals receive health coverage through Medicare or Medicaid, some do not, as they may not meet the criteria for the Supplemental Security Income disability standard under Medicaid, they exceed income eligibility threshold, and/or they fail the asset test.<sup>40</sup>

**Figure 11. The Uninsured Population in Nevada, by Disability Status, 2017**

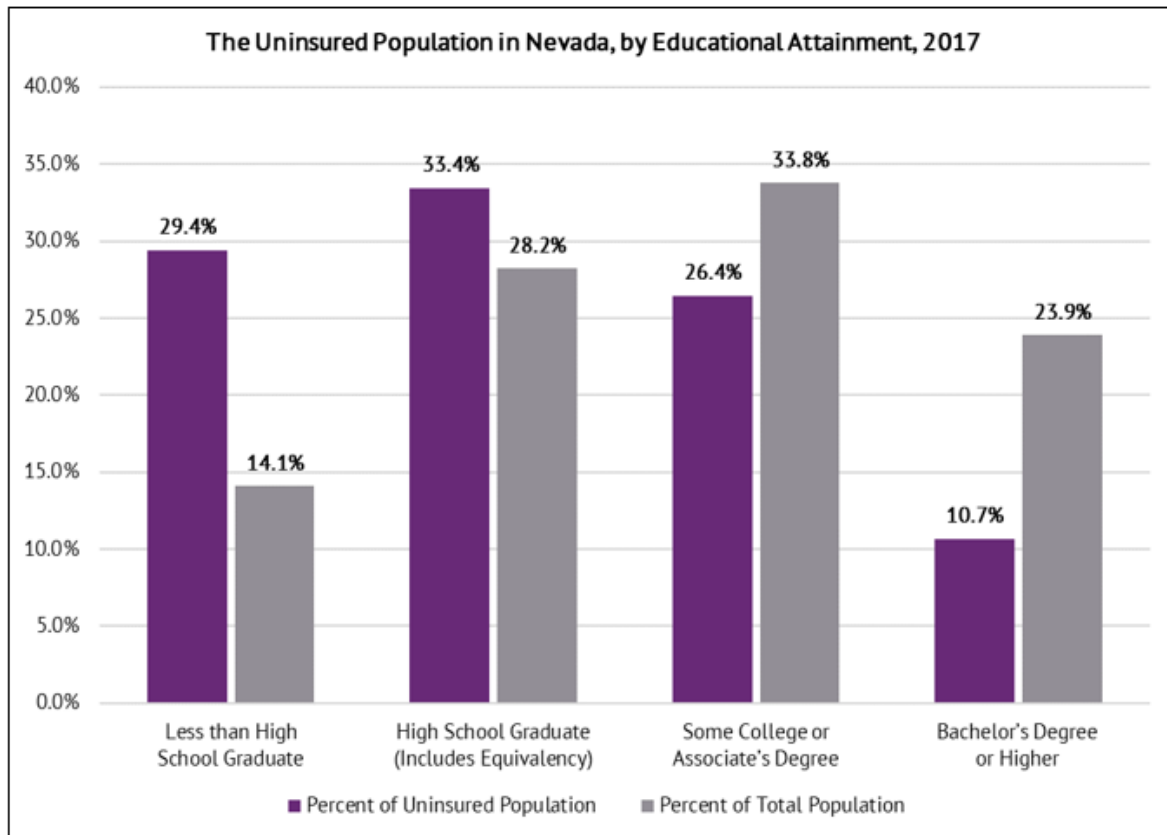


**Educational Attainment**

Uninsurance in Nevada appears to be inversely related to educational attainment, as Figure 12 illustrates. There is a clear demarcation between those who have a high school diploma or less and those who have attended college and/or received a degree from an institution of higher learning. Those without a high school diploma make up 14.1 percent of Nevada’s total population but 29.4 percent of its uninsured. High school graduates are slightly overrepresented at 33.4 percent of the uninsured and 28.2 percent of total state population but form the highest share of the uninsured. With at least some higher education, groups are less uninsured than their total population shares.

Uninsurance rates within groups decrease in educational attainment. Amongst those without a high school diploma, 30.3 percent are uninsured. High school graduates have an uninsurance rate of 17.2 percent, those with some college or an Associate’s degree have an uninsurance rate of 11.4 percent, and those with a Bachelor’s degree or higher have an uninsurance rate of 6.5 percent. One-fifth of individuals with a high school diploma or less, or 21.6 percent, are uninsured. And collectively, they comprise 62.8 percent of Nevada’s uninsured. Possible reasons for the overrepresentation of the less educated amongst the uninsured include a lower likelihood of access to employer-sponsored insurance or direct-purchase coverage and lower levels of health insurance literacy.<sup>41</sup>

**Figure 12. The Uninsured Population in Nevada, by Educational Attainment, 2017**

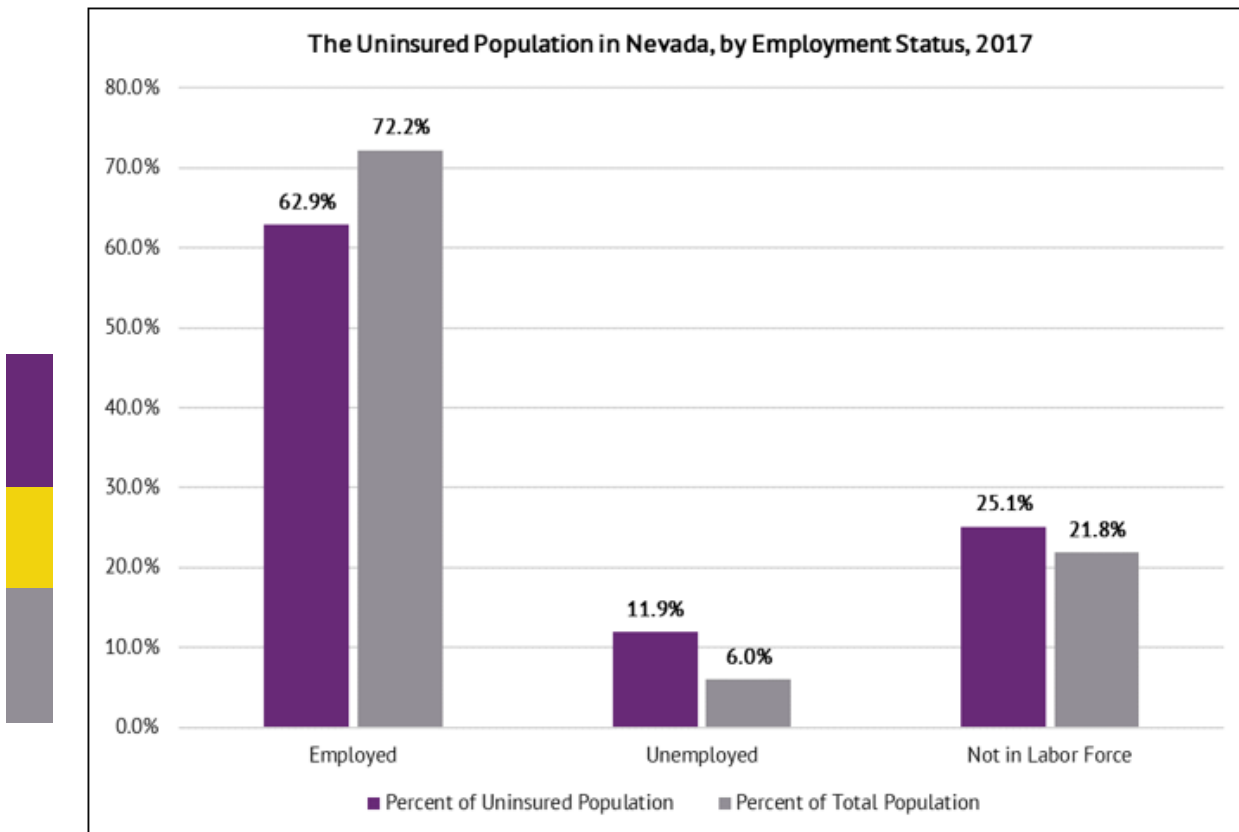


### Employment Status

As Figure 13 illustrates, relative to share of total population, Nevada’s unemployed individuals are overrepresented amongst the uninsured (6.0 percent of total population and 11.9 percent of the uninsured). Unemployed Nevadans have the highest uninsurance rate amongst all groups. Of the unemployed, 37.3 percent are uninsured. They are followed by those who are not in the labor force at 21.4 percent and then by employed Nevadans at 16.2 percent.

However, more than 200,000 Nevadans are employed but uninsured. In fact, employed Nevadans make up a disproportionate share of the uninsured population—over three-fifths, or 62.9 percent. This suggests that working individuals in Nevada are vulnerable to uninsurance. There are two main reasons why workers may lack health insurance coverage. First, under the ACA, employers with 50 full-time equivalent (FTE) workers must provide health insurance to employees who work at least 30 hours per week or pay a penalty.<sup>42</sup> If an individual is working but for a smaller organization or for fewer than 30 hours per week, that person may not have access to employer-sponsored insurance (ESI), as the employer is not required to offer health insurance as a benefit. (We will discuss this in more detail in the next two sub-sections.) Second, some workers who receive an ESI offer may decline coverage if the employee contribution is too high or the offer is unaffordable.<sup>43</sup>

**Figure 13. The Uninsured Population in Nevada, by Employment Status, 2017**

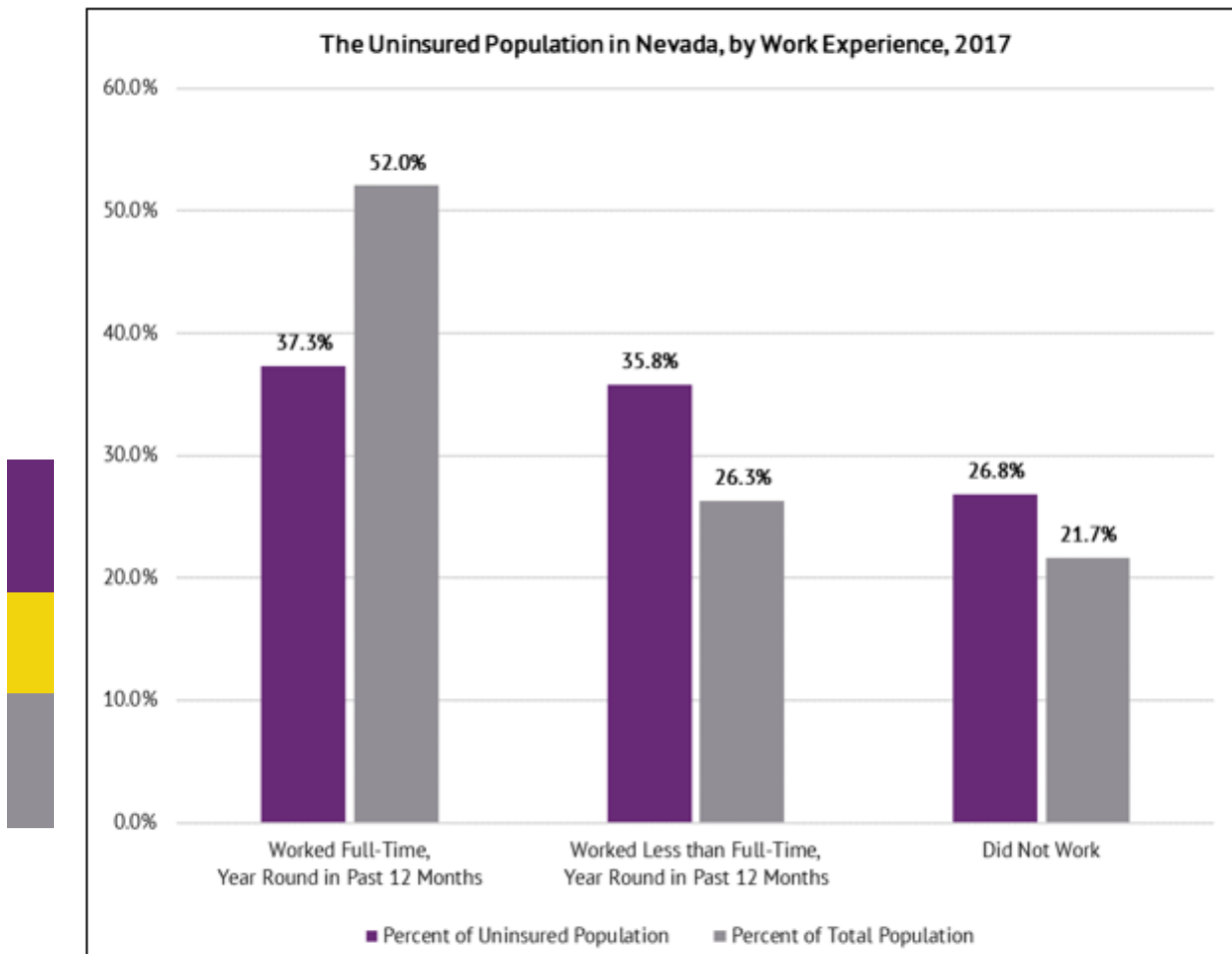


### Work Experience

Among the uninsured, 37.3 percent worked full-time, year round, in the preceding 12 months. That slightly outpaces those that worked less than full-time, year round, in the prior 12 months (35.8 percent), and those that did not work (26.8 percent). Thus, it is full-time workers that make up the largest share of the uninsured population in Nevada. However, just under one-half (48.0 percent) of the state’s working-age population either were not full-time workers or were not working. Amongst those that are not full-time workers, more than one in four (25.4 percent) were uninsured, and among those that are not working, 23.1 percent lacked coverage.

Part-time, seasonal, and/or temporary workers tend not to have access to coverage through their jobs, as employers are not required to provide health insurance to them under the ACA, and many opt not to do so.<sup>44</sup> Part-time and seasonal work, which is often low-wage, as well, is concentrated in the retail, accommodations, and food services sectors.<sup>45</sup> In Nevada, recent data indicates that 11.6 percent of private sector (i.e., non-governmental, non-farm) employees worked in retail trade, and 25.7 percent of private sector employees worked in accommodations and food services.<sup>46</sup>

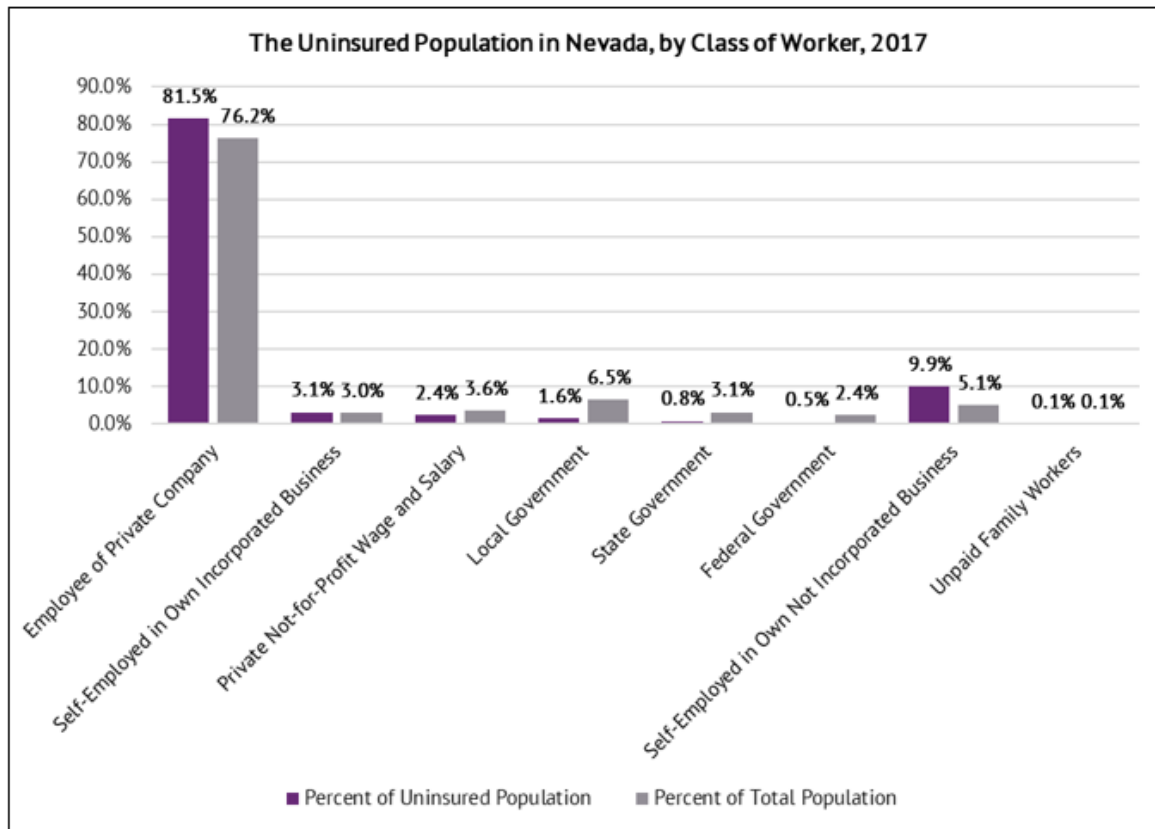
**Figure 14. The Uninsured Population in Nevada, by Work Experience, 2017**



*Class of Worker*

Nevadans who are employees of private companies make up the most significant share of the uninsured population, as shown in Figure 15. Of the uninsured, 81.5 percent are workers at private companies. The next-highest share is those who are self-employed in their own, not incorporated businesses, at 9.9 percent. At 76.2 percent of the total population and 5.1 percent of the total population, respectively, there is only slight overrepresentation for each of these classes amongst the uninsured. Collectively, the other six classes of workers comprise the smallest share of Nevada’s uninsured, at just over 8.5 percent of the total.

**Figure 15. The Uninsured Population in Nevada, by Class of Worker, 2017**



Employees of private companies may represent a large share of the uninsured in Nevada because of the ACA employer mandate. As noted previously, companies with at least 50 full-time equivalent (FTE) workers are required to provide health insurance to employees that work 30 or more hours per week or face a penalty. Below that threshold, employers may offer health coverage, but it is not obligatory. Estimates obtained from the State Health Access Data Assistance Center (SHADAC) indicate that 43.2 percent of Nevadans work at companies with 50 or fewer employees that offer coverage.<sup>47</sup>

With respect to the self-employed in their own, not incorporated businesses, as one report notes, “In order to get health insurance, entrepreneurs must directly purchase coverage on the individual market, or seek coverage through a public program or a family member’s job-based coverage if applicable. If their incomes are too low, they may not be able to qualify for premium tax credits to purchase a private plan.”<sup>48</sup> Thus, self-employed Nevadans often encounter obstacles to coverage, which may explain why they make up a relatively considerable share of the uninsured.

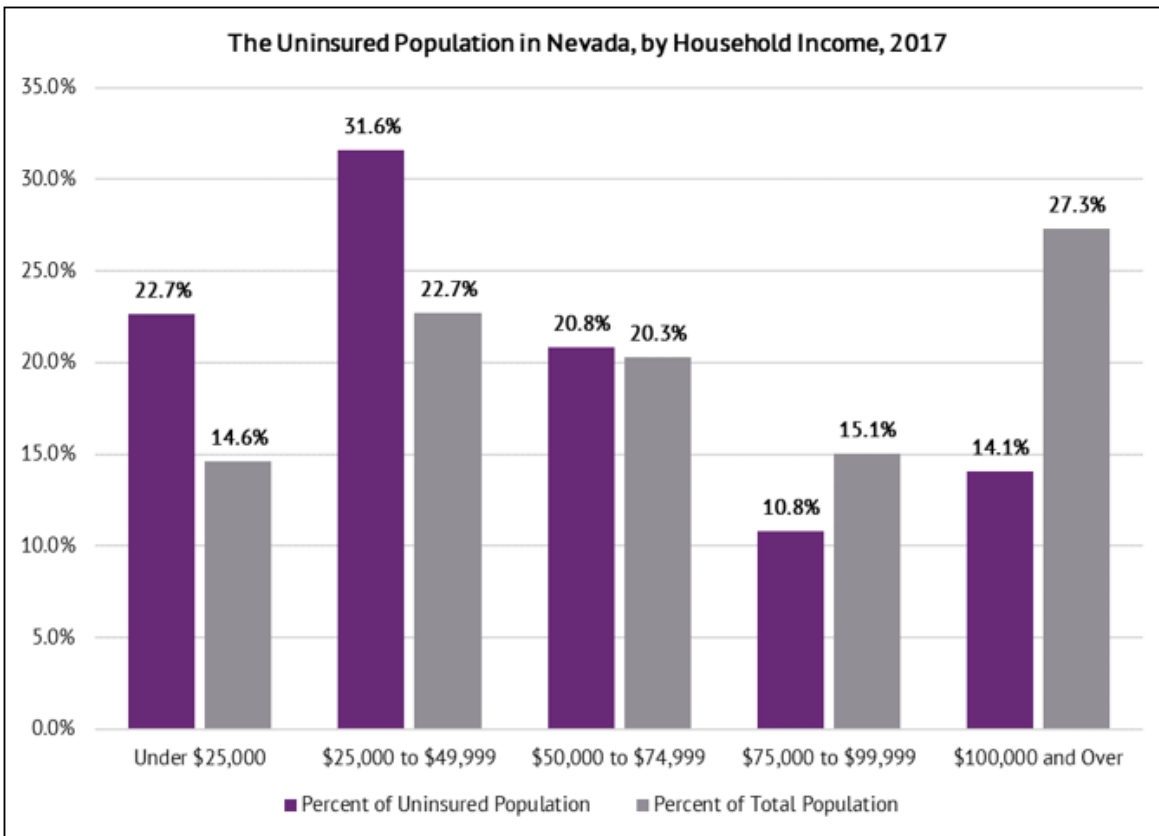
### *Household Income*

As Figure 16 indicates, lower income Nevadans, like their counterparts in other states, are concentrated more heavily amongst the uninsured than those with higher levels of income. But it is not those in the lowest income quintile (under \$25,000; 22.7 percent) who account for the largest proportion of the uninsured but rather households in the second-lowest quintile (\$25,000 to \$49,999). Households in the second quintile make up a larger share of the uninsured population (31.6 percent) than their representation in the state’s total population (22.7 percent). Nearly one in five households in this income bracket (19.4 percent) are uninsured. Although we will discuss poverty further in the next sub-section, we observe here that, depending on household size, some in this group may exceed the poverty guidelines that would make them Medicaid-eligible but have a low enough income that a Marketplace offer effectively may be unaffordable.

Middle-income households (\$50,000 to \$74,999) comprise a fairly substantial share of the uninsured, as well, at 20.8 percent, with 14.3 percent of these households uninsured. The second-highest income quintile makes up 10.8 percent of the uninsured, while the highest income households in Nevada represent 14.1 percent of the uninsured. Their uninsurance rates are 10.0 percent and 7.2 percent, respectively. Insofar as the most high-income Nevada households make up a not-inconsiderable share of the uninsured, it is possible that some in this quintile forgo health insurance if they need to purchase directly from the Marketplace but exceed the phase-out for federal subsidies; health coverage may be unaffordable for this group, as well.<sup>49</sup>



**Figure 16. The Uninsured Population in Nevada, by Household Income, 2017**



### Poverty

In 2017, the poverty line for an individual was \$12,060; for families/households of two, it was \$16,240, for families/households of three, it was \$20,420, and for four-person families/households, it was \$24,600.<sup>50</sup> Figure 17 compares Nevadans in poverty with those not in poverty, as shares of the uninsured.

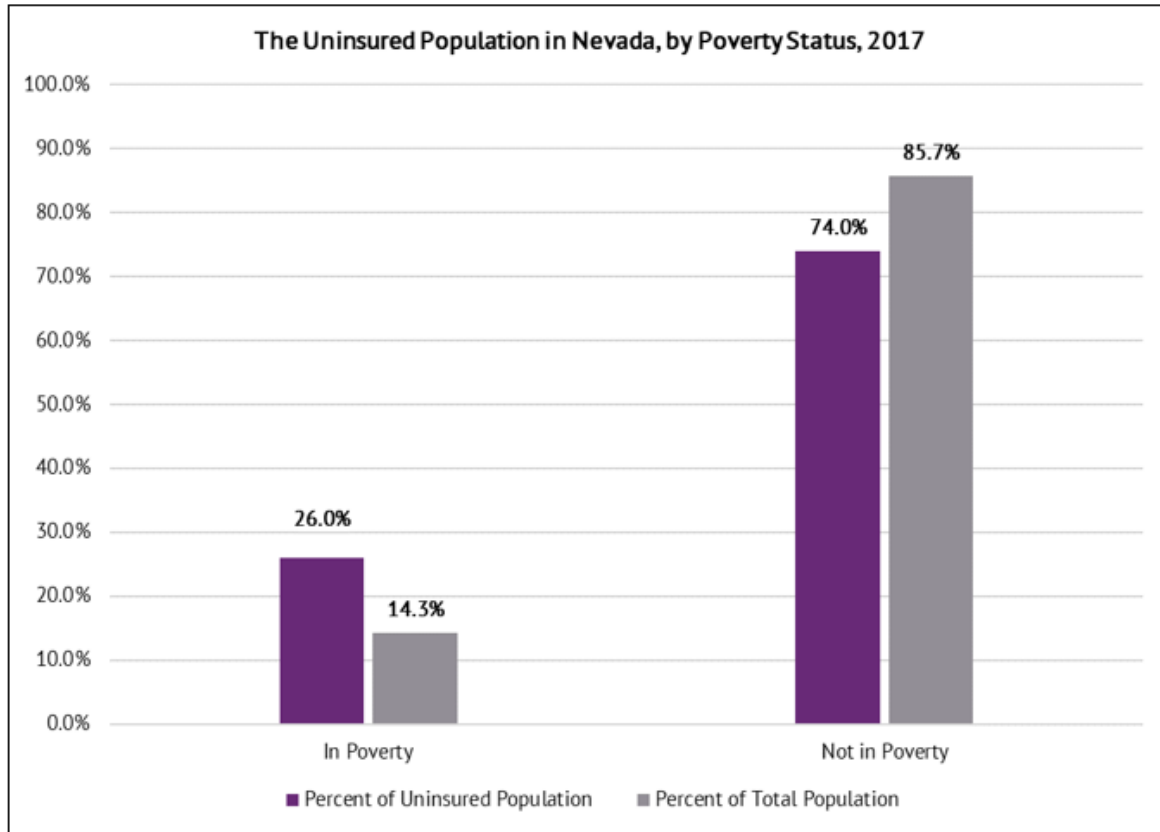
Individuals in poverty make up more than one-quarter of the state’s uninsured population (26.0 percent). The 2.4 million Nevadans who do not live in poverty represent 74.0 percent of the uninsured. Amongst individuals living in poverty, 25.4 percent are uninsured, while those above the poverty line have an uninsurance rate of 12.1 percent.

As the previous sub-section demonstrated, it is those Nevadans with household incomes in the second lowest quintile (\$25,000 to \$49,999) that are most heavily concentrated amongst the uninsured, which are not necessarily those in poverty. And yet, while we know the federal poverty guidelines for 2017, as outlined above, as well as the number of people in poverty, we could not locate data on the number of uninsured by household size. This is a crucial piece of missing information that could explain the disconnect between the distribution of the uninsured along



income categories versus those that are defined as in poverty, particularly as income-based eligibility varies by household size, and family members may qualify for different types of coverage.<sup>51</sup>

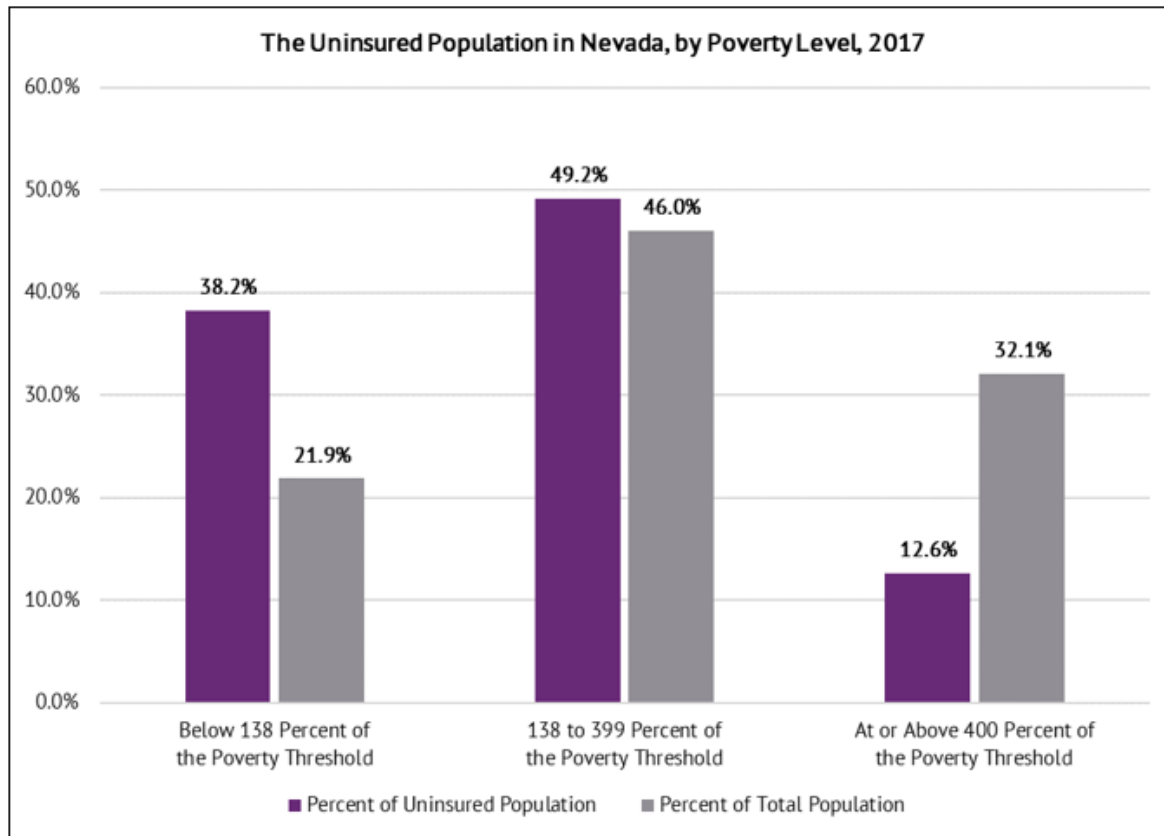
**Figure 17. The Uninsured Population in Nevada, by Poverty Status, 2017**



The distribution of the uninsured population, by poverty level, is shown in Figure 18. A considerable percentage of the uninsured is below 138 percent of the poverty threshold (38.2 percent). However, those between 138 percent to 399 percent of the poverty threshold constitute nearly a majority of the uninsured in Nevada (49.2 percent). Those at or above 400 percent of the poverty threshold make up 12.6 percent of the uninsured population. Amongst those Nevadans below 138 percent of the poverty threshold, 24.4 percent are uninsured. The uninsurance rate for those between 138 percent to 399 percent of the poverty threshold is 14.9 percent, while that for individuals at or above 400 percent of the poverty threshold is 5.5 percent.

These thresholds are especially salient, as they largely correspond to income levels relative to household size established under the ACA. As noted previously, individuals with incomes below 138 percent of FPL are potentially eligible for Medicaid. (Federal statute specifies 133 percent of FPL, but “[t]he The ACA also set a single income eligibility disregard equal to 5 percentage points of the FPL”; this means that eligibility is at an effective level of 138 percent of FPL.)<sup>52</sup>

**Figure 18. The Uninsured Population in Nevada, by Poverty Level, 2017**



While individuals or families with incomes below 100 percent of FPL are not barred from purchasing insurance directly from the Marketplace, such coverage likely is unaffordable, as they do not qualify for financial subsidies. In Nevada, these subsidies are available only to those with FPL levels from 138 percent of FPL to 400 percent of FPL. These include cost-sharing reductions (CSRs) for those in the 138-250 percent of FPL range, which are discounts for deductibles, copayments, and coinsurance but require enrollment in a Marketplace plan in the Silver category, and the Advanced Premium Tax Credit (APTC), which immediately reduces monthly payments for enrollees.<sup>53</sup> Although APTC eligibility technically ranges from 100 to 400 percent of FPL, the effective eligibility for this credit in Medicaid expansion states, such as Nevada, is 138 to 400 percent of FPL, as those below the lower bound are Medicaid-eligible and thus do not qualify for subsidized coverage on the Marketplace.<sup>54</sup> Eligibility for the APTC phases out above 400 percent of FPL.<sup>55</sup>

These thresholds provide a rough estimate for those who may be eligible for health insurance in Nevada and are uninsured, though there are some limitations. The ACS data includes those at 400 percent of FPL in its top threshold, whereas the APTC phase-out is above 400 percent of FPL, meaning that it is not distributed to match the ACA's income guidelines precisely; some who qualify for the APTC may be included in the group that does not. Generally, the data does not align perfectly with program eligibility, as income is not the only basis for that determination. We examine program eligibility more closely in the next section.

## Health Insurance Eligibility in Nevada

Our analysis of the demographic, social, and economic characteristics of Nevada’s uninsured shows that individuals and households that lack health insurance coverage are distributed across all population strata. Young and old, white individuals and people of color, the employed and the unemployed—the plight of uninsurance is one that nearly 400,000 Nevadans face daily. However, some groups are represented disproportionately amongst the uninsured. These include, but are not limited to, young adults, Latinos, the less educated, workers, and lower income individuals. Low socioeconomic status seems to be associated with uninsurance in the state.

While some Nevadans may meet the income qualifications for insurance, either through Medicare, Medicaid, or the Marketplace, they may be disqualified from coverage for other criteria, such as citizenship status. Some are eligible but face obstacles that limit access, including language barriers, inadequate health insurance literacy, and/or a lack of eligibility awareness, amongst others. And others may qualify for coverage through offers that meet the technical definition of affordability but are not so in practice, especially given that, in Nevada, “costs of living are outpacing median household income statewide.”<sup>56</sup> Rising premiums have compounded the problem, and, in this context, some people assume the risk of forgoing health insurance.<sup>57</sup>

Reaching Nevada’s uninsured likely will necessitate a diverse mix of strategies, including increased outreach and education to those who are eligible but struggle to navigate the complexities of the health insurance system, and policy interventions if gains in coverage amongst the ineligible is a state objective. Table 1 provides estimates of the eligible uninsured and the non-eligible uninsured in Nevada, prepared for the Guinn Center by the Urban Institute. To construct the estimates, the Urban Institute used its proprietary Health Insurance Policy Simulation Model. The data presented in Table 1, unlike that in other sections of this report, captures only non-elderly adults and is for 2019, rather than 2017.

**Table 1. Uninsured Nonelderly People in Nevada by Eligibility Type, Current Law 2019**

Uninsured Nonelderly People in Nevada by Eligibility Type, Current Law 2019		
	Number of Uninsured People, 2019	Percent of Total Uninsured
<b>Total</b>	403,000	100%
Program Eligibility		
Medicaid/CHIP-Eligible	148,000	37%
Marketplace Tax Credit-Eligible	77,000	19%
Family Income at or Below 200% of FPL	26,000	6%
Family Income Above 200% of FPL	51,000	13%
Ineligible for Tax Credit Because of Affordable ESI Offer	49,000	12%
Ineligible Because of Immigration Status	109,000	27%
Ineligible Because of Higher Income	20,000	5%

Source: The Urban Institute’s Health Insurance Policy Simulation Model (HIPSM), 2019

More than half of uninsured Nevadans (225,000; 55.8 percent) are eligible but uninsured. The remainder—178,000, or 44.2 percent—are ineligible for insurance coverage. Of the eligible uninsured population, 65.8 percent are Medicaid/CHIP-eligible, and 34.2 percent are Marketplace Tax Credit-eligible. From a distributional standpoint, 37.0 percent of the uninsured are Medicaid/CHIP-eligible, while 27.0 percent of the uninsured lack coverage because of immigration status. By way of comparison, nationally, Medicaid/CHIP-eligible individuals represented 25.0 percent of the uninsured population, and 16.2 percent were ineligible because of immigration status in 2017.<sup>58</sup>

According to the Urban Institute, those in the former group, as well as those who are Marketplace tax credit-eligible with family incomes at or below 200 percent of FPL (26,000 individuals in Nevada; 6.0 percent of the total uninsured) are prime candidates for outreach and enrollment efforts “because the coverage available to them is subsidized the most.”<sup>59</sup> (The latter group is eligible for considerable federal subsidies, including APTC and CSRs.)<sup>60</sup>

Affordability is likely to be an issue for those with incomes above 400 percent of FPL but no employer-sponsored insurance (ESI) (20,000 individuals in Nevada; 5.0 percent of the total uninsured), as that is the threshold of APTC phase-out.<sup>61</sup> It may be even more pronounced for those who are Marketplace tax credit-eligible with family incomes above 200 percent of FPL (51,000 individuals in Nevada; 13.0 percent of the total uninsured), given that their incomes are lower than those above the 400 percent of FPL threshold, their tax credits (APTC) are smaller, and only those with incomes up to 250 percent of FPL qualify for CSRs on a Silver Plan.<sup>62</sup>

Those who are ineligible for tax credits (APTC) because of an affordable ESI offer, which amounts to 49,000 Nevadans (12.0 percent of the total uninsured), may encounter the most serious affordability of all. In 2017, affordability of employer coverage was defined as an employee contribution that was less than 9.69 percent of household income.<sup>63</sup> As the Urban Institute explains, “[s]ome of these people are caught in the ‘family glitch,’ where all family members are denied access to [M]arketplace financial assistance because one adult worker has an offer of affordable single coverage, even though family coverage is very costly relative to income.”<sup>64</sup>

Unauthorized immigrants, as we have discussed earlier in this report, are ineligible for most coverage as a result of their immigration status. Using data for 2017, we observed that about 210,000 Nevadans were unauthorized immigrants, and using the national uninsurance rate for the unauthorized population (45.0 percent), we estimated that roughly 94,500 unauthorized immigrants in Nevada were uninsured. The Urban Institute places their number at 109,000, which suggests that our findings comport, as population in the state, overall, is likely to have grown between 2017 and 2019.

As federal health care reform remains in flux, states have taken the lead in pioneering solutions for their uninsured populations. But as decision makers in Nevada consider options, they must tailor and scale them to the state’s structural dimensions. For example, California recently expanded health care benefits to unauthorized immigrants between the ages of 19 and 25 through its Medi-Cal program; however, it instituted a state version of the individual mandate to pay the expected \$98

million in costs.<sup>65</sup> As Nevada has no state income tax, it would be difficult to secure additional revenue to finance such a program in a similar manner.

As another example, the Basic Health Program (BHP) is a coverage program authorized under Section 1331 of the ACA that two states—Minnesota (“MinnesotaCare”) and New York (“Essential Plan”)—established in 2015 to offer low-cost insurance options to certain residents, including those that are Marketplace-eligible but struggle with affordability (i.e., income between 133 percent and 200 percent of FPL) and lawfully present non-citizens with income that does not exceed 133 percent of FPL but do not qualify for Medicaid as a result of their immigration status.<sup>66</sup> Minnesota’s uninsurance rate is 5.4 percent, which is 47<sup>th</sup>-lowest in the nation, and New York’s is 7.6 percent, for a ranking of 36<sup>th</sup>-lowest.<sup>67</sup> At least to a certain extent, their low uninsurance rates may be attributed to take-up of this federally available coverage option.

But a BHP may not be practicable for Nevada: states need a large Marketplace pool to make it feasible—those with direct-purchase insurance in the state represent only 5.5 percent of the population, as detailed with respect to Figure 1—and it is unknown how many individuals in the Marketplace are below 200 percent of FPL and what the nature of its risk mix is; a significantly healthier pool under 200 percent of FPL could drain the exchange. An actuarial study that determines the intersection of risk mix (health) and wealth likely would be necessary to evaluate the viability of a BHP for Nevada.<sup>68</sup>

Nevada continues to explore policy solutions, as well, having recognized the need to stabilize its health insurance market and reduce the number of Nevadans without health insurance. In fact, increased access to affordable health care in Nevada is the subject of a legislatively-commissioned study on the feasibility a public health insurance plan for all residents of the state via passage of Senate Concurrent Resolution (SCR) 10 in the 80<sup>th</sup> (2019) Session.<sup>69</sup> With one of the highest uninsurance rates in the nation and a population that is only growing, Nevada’s decision makers should explore all possible remedies, not only to minimize the problem, but to ensure that its residents continue to thrive.



## Appendix A: Demographic, Social, and Economic Characteristics of the Uninsured: Counts and Percentages

### Age

The Uninsured Population in Nevada, by Age Group and County, 2017								
	Youth (Under 19 Years)		Non-Elderly Adults (19-64 Years)		Elderly Adults (65 Years and Older)		County Total	
	N	%	N	%	N	%	N	%
Carson City	1,037	17.1%	4,922	81.0%	115	1.9%	6,074	100.0%
Churchill	617	19.2%	2,590	80.4%	13	0.4%	3,220	100.0%
Clark	51,297	16.7%	250,096	81.3%	6,041	2.0%	307,434	100.0%
Douglas	1,069	20.9%	3,930	77.0%	106	2.1%	5,105	100.0%
Elko	1,137	20.9%	4,224	77.5%	91	1.7%	5,452	100.0%
Esmeralda	29	13.1%	193	86.9%	0	0.0%	222	100.0%
Eureka	29	12.3%	206	87.7%	0	0.0%	235	100.0%
Humboldt	768	28.5%	1,881	69.7%	48	1.8%	2,697	100.0%
Lander	109	19.6%	448	80.4%	0	0.0%	557	100.0%
Lincoln	210	42.9%	280	57.1%	0	0.0%	490	100.0%
Lyon	1,305	21.6%	4,640	76.9%	89	1.5%	6,034	100.0%
Mineral	143	21.2%	522	77.3%	10	1.5%	675	100.0%
Nye	739	13.5%	4,642	85.0%	77	1.4%	5,458	100.0%
Pershing	194	24.9%	584	75.1%	0	0.0%	778	100.0%
Storey	25	7.4%	315	92.6%	0	0.0%	340	100.0%
Washoe	9,191	17.6%	42,286	80.9%	790	1.5%	52,267	100.0%
White Pine	189	20.2%	747	79.8%	0	0.0%	936	100.0%
<b>Nevada Total</b>	<b>68,088</b>	<b>17.1%</b>	<b>322,506</b>	<b>81.0%</b>	<b>7,380</b>	<b>1.9%</b>	<b>397,974</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

Total Population in Nevada, by Age Group and County, 2017								
	Youth (Under 19 Years)		Non-Elderly Adults (19-64 Years)		Elderly Adults (65 Years and Older)		County Total	
	N	%	N	%	N	%	N	%
Carson City	11,764	22.5%	30,467	58.3%	10,056	19.2%	52,287	100.0%
Churchill	5,791	25.0%	13,186	57.0%	4,175	18.0%	23,152	100.0%
Clark	524,367	25.1%	1,277,738	61.2%	286,701	13.7%	2,088,806	100.0%
Douglas	9,004	19.0%	26,320	55.6%	12,006	25.4%	47,330	100.0%
Elko	15,258	29.5%	31,405	60.7%	5,066	9.8%	51,729	100.0%
Esmeralda	202	18.4%	585	53.3%	310	28.3%	1,097	100.0%
Eureka	417	24.2%	1,057	61.3%	249	14.5%	1,723	100.0%
Humboldt	5,020	29.8%	9,896	58.7%	1,955	11.6%	16,871	100.0%
Lander	1,617	27.7%	3,344	57.2%	884	15.1%	5,845	100.0%
Lincoln	1,150	24.5%	2,449	52.2%	1,097	23.4%	4,696	100.0%
Lyon	12,150	23.4%	29,357	56.4%	10,503	20.2%	52,010	100.0%
Mineral	921	20.9%	2,548	57.9%	930	21.1%	4,399	100.0%
Nye	7,752	18.1%	22,891	53.4%	12,210	28.5%	42,853	100.0%
Pershing	1,163	24.7%	2,635	55.9%	916	19.4%	4,714	100.0%
Storey	491	12.7%	2,131	55.2%	1,238	32.1%	3,860	100.0%
Washoe	104,313	23.6%	272,422	61.5%	66,205	14.9%	442,940	100.0%
White Pine	2,324	27.7%	4,565	54.5%	1,492	17.8%	8,381	100.0%
<b>Nevada Total</b>	<b>703,704</b>	<b>24.7%</b>	<b>1,732,996</b>	<b>60.7%</b>	<b>415,993</b>	<b>14.6%</b>	<b>2,852,693</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

*Age (cont'd)*

<b>The Uninsured Population in Nevada, by Age Cohort and County, 2017</b>																				
	Under 6 Years		6-18 Years		19-25 Years		26-34 Years		35-44 Years		45-54 Years		55-64 Years		65-74 Years		75 Years and Older		County Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Carson City	174	2.9%	863	14.2%	755	12.4%	990	16.3%	1,120	18.4%	1,315	21.6%	742	12.2%	105	1.7%	10	0.2%	<b>6,074</b>	<b>100.0%</b>
Churchill	83	2.6%	534	16.6%	553	17.2%	445	13.8%	549	17.0%	574	17.8%	469	14.6%	6	0.2%	7	0.2%	<b>3,220</b>	<b>100.0%</b>
Clark	12,233	4.0%	39,064	12.7%	41,485	13.5%	68,367	22.2%	61,876	20.1%	46,806	15.2%	31,562	10.3%	4,151	1.4%	1,890	0.6%	<b>307,434</b>	<b>100.0%</b>
Douglas	342	6.7%	727	14.2%	857	16.8%	818	16.0%	870	17.0%	719	14.1%	666	13.0%	89	1.7%	17	0.3%	<b>5,105</b>	<b>100.0%</b>
Elko	290	5.3%	847	15.5%	634	11.6%	1,349	24.7%	1,014	18.6%	668	12.3%	559	10.3%	6	0.1%	85	1.6%	<b>5,452</b>	<b>100.0%</b>
Esmeralda	0	0.0%	29	13.1%	84	37.8%	24	10.8%	24	10.8%	38	17.1%	23	10.4%	0	0.0%	0	0.0%	<b>222</b>	<b>100.0%</b>
Eureka	12	5.1%	17	7.2%	15	6.4%	36	15.3%	41	17.4%	82	34.9%	32	13.6%	0	0.0%	0	0.0%	<b>235</b>	<b>100.0%</b>
Humboldt	186	6.9%	582	21.6%	446	16.5%	529	19.6%	451	16.7%	262	9.7%	193	7.2%	19	0.7%	29	1.1%	<b>2,697</b>	<b>100.0%</b>
Lander	13	2.3%	96	17.2%	27	4.8%	89	16.0%	60	10.8%	132	23.7%	140	25.1%	0	0.0%	0	0.0%	<b>557</b>	<b>100.0%</b>
Lincoln	0	0.0%	210	42.9%	88	18.0%	12	2.4%	72	14.7%	103	21.0%	5	1.0%	0	0.0%	0	0.0%	<b>490</b>	<b>100.0%</b>
Lyon	242	4.0%	1,063	17.6%	646	10.7%	1,073	17.8%	775	12.8%	1,220	20.2%	926	15.3%	72	1.2%	17	0.3%	<b>6,034</b>	<b>100.0%</b>
Mineral	30	4.4%	113	16.7%	57	8.4%	212	31.4%	91	13.5%	76	11.3%	86	12.7%	7	1.0%	3	0.4%	<b>675</b>	<b>100.0%</b>
Nye	77	1.4%	662	12.1%	531	9.7%	1,001	18.3%	1,079	19.8%	908	16.6%	1,123	20.6%	77	1.4%	0	0.0%	<b>5,458</b>	<b>100.0%</b>
Pershing	81	10.4%	113	14.5%	45	5.8%	240	30.8%	109	14.0%	54	6.9%	136	17.5%	0	0.0%	0	0.0%	<b>778</b>	<b>100.0%</b>
Storey	0	0.0%	25	7.4%	53	15.6%	49	14.4%	35	10.3%	53	15.6%	125	36.8%	0	0.0%	0	0.0%	<b>340</b>	<b>100.0%</b>
Washoe	2,530	4.8%	6,661	12.7%	7,767	14.9%	11,526	22.1%	9,767	18.7%	7,511	14.4%	5,715	10.9%	558	1.1%	232	0.4%	<b>52,267</b>	<b>100.0%</b>
White Pine	25	2.7%	164	17.5%	73	7.8%	101	10.8%	167	17.8%	139	14.9%	267	28.5%	0	0.0%	0	0.0%	<b>936</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>16,318</b>	<b>4.1%</b>	<b>51,770</b>	<b>13.0%</b>	<b>54,116</b>	<b>13.6%</b>	<b>86,861</b>	<b>21.8%</b>	<b>78,100</b>	<b>19.6%</b>	<b>60,660</b>	<b>15.2%</b>	<b>42,769</b>	<b>10.7%</b>	<b>5,090</b>	<b>1.3%</b>	<b>2,290</b>	<b>0.6%</b>	<b>397,974</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

*Age (cont'd)*

<b>Total Population in Nevada, by Age Cohort and County, 2017</b>																				
	<b>Under 6 Years</b>		<b>6-18 Years</b>		<b>19-25 Years</b>		<b>26-34 Years</b>		<b>35-44 Years</b>		<b>45-54 Years</b>		<b>55-64 Years</b>		<b>65-74 Years</b>		<b>75 Years and Older</b>		<b>County Total</b>	
	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
Carson City	3,403	6.5%	8,361	16.0%	4,240	8.1%	5,664	10.8%	5,783	11.1%	7,117	13.6%	7,663	14.7%	5,960	11.4%	4,096	7.8%	<b>52,287</b>	<b>100.0%</b>
Churchill	1,999	8.6%	3,792	16.4%	1,899	8.2%	2,531	10.9%	2,381	10.3%	3,063	13.2%	3,312	14.3%	2,566	11.1%	1,609	6.9%	<b>23,152</b>	<b>100.0%</b>
Clark	162,808	7.8%	361,559	17.3%	186,544	8.9%	274,700	13.2%	291,268	13.9%	281,859	13.5%	243,367	11.7%	179,856	8.6%	106,845	5.1%	<b>2,088,806</b>	<b>100.0%</b>
Douglas	2,399	5.1%	6,605	14.0%	2,948	6.2%	3,992	8.4%	4,612	9.7%	6,194	13.1%	8,574	18.1%	7,331	15.5%	4,675	9.9%	<b>47,330</b>	<b>100.0%</b>
Elko	4,614	8.9%	10,644	20.6%	4,549	8.8%	6,939	13.4%	6,675	12.9%	6,908	13.4%	6,334	12.2%	3,321	6.4%	1,745	3.4%	<b>51,729</b>	<b>100.0%</b>
Esmeralda	29	2.6%	173	15.8%	130	11.9%	66	6.0%	116	10.6%	100	9.1%	173	15.8%	215	19.6%	95	8.7%	<b>1,097</b>	<b>100.0%</b>
Eureka	106	6.2%	311	18.0%	59	3.4%	117	6.8%	230	13.3%	311	18.0%	340	19.7%	136	7.9%	113	6.6%	<b>1,723</b>	<b>100.0%</b>
Humboldt	1,538	9.1%	3,482	20.6%	1,118	6.6%	2,109	12.5%	2,152	12.8%	2,180	12.9%	2,337	13.9%	1,217	7.2%	738	4.4%	<b>16,871</b>	<b>100.0%</b>
Lander	502	8.6%	1,115	19.1%	409	7.0%	675	11.5%	624	10.7%	674	11.5%	962	16.5%	544	9.3%	340	5.8%	<b>5,845</b>	<b>100.0%</b>
Lincoln	267	5.7%	883	18.8%	365	7.8%	335	7.1%	495	10.5%	670	14.3%	584	12.4%	706	15.0%	391	8.3%	<b>4,696</b>	<b>100.0%</b>
Lyon	3,745	7.2%	8,405	16.2%	3,304	6.4%	5,406	10.4%	5,925	11.4%	6,924	13.3%	7,798	15.0%	6,873	13.2%	3,630	7.0%	<b>52,010</b>	<b>100.0%</b>
Mineral	323	7.3%	598	13.6%	266	6.0%	614	14.0%	350	8.0%	564	12.8%	754	17.1%	456	10.4%	474	10.8%	<b>4,399</b>	<b>100.0%</b>
Nye	2,130	5.0%	5,622	13.1%	2,621	6.1%	3,342	7.8%	4,099	9.6%	5,399	12.6%	7,430	17.3%	7,483	17.5%	4,727	11.0%	<b>42,853</b>	<b>100.0%</b>
Pershing	346	7.3%	817	17.3%	191	4.1%	624	13.2%	529	11.2%	626	13.3%	665	14.1%	669	14.2%	247	5.2%	<b>4,714</b>	<b>100.0%</b>
Storey	165	4.3%	326	8.4%	168	4.4%	277	7.2%	405	10.5%	598	15.5%	683	17.7%	891	23.1%	347	9.0%	<b>3,860</b>	<b>100.0%</b>
Washoe	32,296	7.3%	72,017	16.3%	42,899	9.7%	57,326	12.9%	53,951	12.2%	59,179	13.4%	59,067	13.3%	42,331	9.6%	23,874	5.4%	<b>442,940</b>	<b>100.0%</b>
White Pine	661	7.9%	1,663	19.8%	376	4.5%	782	9.3%	980	11.7%	1,159	13.8%	1,268	15.1%	825	9.8%	667	8.0%	<b>8,381</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>217,331</b>	<b>7.6%</b>	<b>486,373</b>	<b>17.0%</b>	<b>252,086</b>	<b>8.8%</b>	<b>365,499</b>	<b>12.8%</b>	<b>380,575</b>	<b>13.3%</b>	<b>383,525</b>	<b>13.4%</b>	<b>351,311</b>	<b>12.3%</b>	<b>261,380</b>	<b>9.2%</b>	<b>154,613</b>	<b>5.4%</b>	<b>2,852,693</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.



Sex

The Uninsured Population in Nevada, by Sex and County, 2017						
	Male		Female		County Total	
	N	%	N	%	N	%
Carson City	3,321	54.7%	2,753	45.3%	6,074	100.0%
Churchill	1,598	49.6%	1,622	50.4%	3,220	100.0%
Clark	163,634	53.2%	143,800	46.8%	307,434	100.0%
Douglas	2,799	54.8%	2,306	45.2%	5,105	100.0%
Elko	2,547	46.7%	2,905	53.3%	5,452	100.0%
Esmeralda	94	42.3%	128	57.7%	222	100.0%
Eureka	144	61.3%	91	38.7%	235	100.0%
Humboldt	1,221	45.3%	1,476	54.7%	2,697	100.0%
Lander	263	47.2%	294	52.8%	557	100.0%
Lincoln	261	53.3%	229	46.7%	490	100.0%
Lyon	3,265	54.1%	2,769	45.9%	6,034	100.0%
Mineral	327	48.4%	348	51.6%	675	100.0%
Nye	3,143	57.6%	2,315	42.4%	5,458	100.0%
Pershing	397	51.0%	381	49.0%	778	100.0%
Storey	241	70.9%	99	29.1%	340	100.0%
Washoe	28,742	55.0%	23,525	45.0%	52,267	100.0%
White Pine	479	51.2%	457	48.8%	936	100.0%
<b>Nevada Total</b>	<b>212,476</b>	<b>53.4%</b>	<b>185,498</b>	<b>46.6%</b>	<b>397,974</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding.

Total Population in Nevada, by Sex and County, 2017						
	Male		Female		County Total	
	N	%	N	%	N	%
Carson City	26,143	50.0%	26,144	50.0%	52,287	100.0%
Churchill	11,538	49.8%	11,614	50.2%	23,152	100.0%
Clark	1,037,583	49.7%	1,051,223	50.3%	2,088,806	100.0%
Douglas	23,835	50.4%	23,495	49.6%	47,330	100.0%
Elko	26,651	51.5%	25,078	48.5%	51,729	100.0%
Esmeralda	480	43.8%	617	56.2%	1,097	100.0%
Eureka	844	49.0%	879	51.0%	1,723	100.0%
Humboldt	8,692	51.5%	8,179	48.5%	16,871	100.0%
Lander	3,265	55.9%	2,580	44.1%	5,845	100.0%
Lincoln	2,308	49.1%	2,388	50.9%	4,696	100.0%
Lyon	26,211	50.4%	25,799	49.6%	52,010	100.0%
Mineral	2,128	48.4%	2,271	51.6%	4,399	100.0%
Nye	21,428	50.0%	21,425	50.0%	42,853	100.0%
Pershing	2,418	51.3%	2,296	48.7%	4,714	100.0%
Storey	1,875	48.6%	1,985	51.4%	3,860	100.0%
Washoe	222,417	50.2%	220,523	49.8%	442,940	100.0%
White Pine	4,388	52.4%	3,993	47.6%	8,381	100.0%
<b>Nevada Total</b>	<b>1,422,204</b>	<b>49.9%</b>	<b>1,430,489</b>	<b>50.1%</b>	<b>2,852,693</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding.

Race

The Uninsured Population in Nevada, by Race and County, 2017																
	White		African American		American Indian/ Alaska Native		Asian		Native Hawaiian/ Other Pacific Islander		Other Race		Two or More Races		County Total	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Carson City	4,372	72.0%	65	1.1%	190	3.1%	52	0.9%	29	0.5%	1,122	18.5%	244	4.0%	<b>6,074</b>	<b>100.0%</b>
Churchill	2,548	79.1%	145	4.5%	276	8.6%	15	0.5%	34	1.1%	127	3.9%	75	2.3%	<b>3,220</b>	<b>100.0%</b>
Clark	173,049	56.3%	29,759	9.7%	2,324	0.8%	23,422	7.6%	2,192	0.7%	66,262	21.6%	10,426	3.4%	<b>307,434</b>	<b>100.0%</b>
Douglas	3,936	77.1%	97	1.9%	347	6.8%	67	1.3%	38	0.7%	516	10.1%	104	2.0%	<b>5,105</b>	<b>100.0%</b>
Elko	4,243	77.8%	37	0.7%	694	12.7%	62	1.1%	15	0.3%	308	5.6%	93	1.7%	<b>5,452</b>	<b>100.0%</b>
Esmeralda	139	62.6%	0	0.0%	20	9.0%	0	0.0%	0	0.0%	63	28.4%	0	0.0%	<b>222</b>	<b>100.0%</b>
Eureka	235	100.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	<b>235</b>	<b>100.0%</b>
Humboldt	2,264	83.9%	0	0.0%	192	7.1%	0	0.0%	0	0.0%	240	8.9%	1	0.0%	<b>2,697</b>	<b>100.0%</b>
Lander	427	76.7%	3	0.5%	98	17.6%	0	0.0%	29	5.2%	0	0.0%	0	0.0%	<b>557</b>	<b>100.0%</b>
Lincoln	270	55.1%	0	0.0%	166	33.9%	0	0.0%	0	0.0%	54	11.0%	0	0.0%	<b>490</b>	<b>100.0%</b>
Lyon	5,066	84.0%	40	0.7%	237	3.9%	66	1.1%	0	0.0%	437	7.2%	188	3.1%	<b>6,034</b>	<b>100.0%</b>
Mineral	241	35.7%	0	0.0%	365	54.1%	0	0.0%	0	0.0%	27	4.0%	42	6.2%	<b>675</b>	<b>100.0%</b>
Nye	3,584	65.7%	398	7.3%	104	1.9%	67	1.2%	5	0.1%	1,180	21.6%	120	2.2%	<b>5,458</b>	<b>100.0%</b>
Pershing	679	87.3%	0	0.0%	42	5.4%	6	0.8%	0	0.0%	51	6.6%	0	0.0%	<b>778</b>	<b>100.0%</b>
Storey	334	98.2%	6	1.8%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	<b>340</b>	<b>100.0%</b>
Washoe	39,168	74.9%	1,318	2.5%	937	1.8%	2,442	4.7%	367	0.7%	6,009	11.5%	2,026	3.9%	<b>52,267</b>	<b>100.0%</b>
White Pine	815	87.1%	0	0.0%	79	8.4%	0	0.0%	0	0.0%	30	3.2%	12	1.3%	<b>936</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>241,370</b>	<b>60.6%</b>	<b>31,868</b>	<b>8.0%</b>	<b>6,071</b>	<b>1.5%</b>	<b>26,199</b>	<b>6.6%</b>	<b>2,709</b>	<b>0.7%</b>	<b>76,426</b>	<b>19.2%</b>	<b>13,331</b>	<b>3.3%</b>	<b>397,974</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding.

*Race (cont'd)*

<b>Total Population in Nevada, by Race and County, 2017</b>																
	<b>White</b>		<b>African American</b>		<b>American Indian/ Alaska Native</b>		<b>Asian</b>		<b>Native Hawaiian/ Other Pacific Islander</b>		<b>Other Race</b>		<b>Two or More Races</b>		<b>County Total</b>	
	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>	<u>N</u>	<u>%</u>
Carson City	42,500	81.3%	640	1.2%	1,243	2.4%	1,313	2.5%	55	0.1%	4,906	9.4%	1,630	3.1%	<b>52,287</b>	<b>100.0%</b>
Churchill	19,644	84.8%	523	2.3%	1,036	4.5%	579	2.5%	34	0.1%	387	1.7%	949	4.1%	<b>23,152</b>	<b>100.0%</b>
Clark	1,288,652	61.7%	231,596	11.1%	13,073	0.6%	202,925	9.7%	15,388	0.7%	232,836	11.1%	104,336	5.0%	<b>2,088,806</b>	<b>100.0%</b>
Douglas	41,792	88.3%	277	0.6%	955	2.0%	708	1.5%	145	0.3%	1,947	4.1%	1,506	3.2%	<b>47,330</b>	<b>100.0%</b>
Elko	45,299	87.6%	372	0.7%	2,909	5.6%	516	1.0%	121	0.2%	1,556	3.0%	956	1.8%	<b>51,729</b>	<b>100.0%</b>
Esmeralda	988	90.1%	8	0.7%	26	2.4%	0	0.0%	0	0.0%	68	6.2%	7	0.6%	<b>1,097</b>	<b>100.0%</b>
Eureka	1,694	98.3%	0	0.0%	29	1.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	<b>1,723</b>	<b>100.0%</b>
Humboldt	14,914	88.4%	63	0.4%	787	4.7%	43	0.3%	3	0.0%	623	3.7%	438	2.6%	<b>16,871</b>	<b>100.0%</b>
Lander	5,209	89.1%	3	0.1%	421	7.2%	3	0.1%	29	0.5%	120	2.1%	60	1.0%	<b>5,845</b>	<b>100.0%</b>
Lincoln	4,383	93.3%	2	0.0%	166	3.5%	33	0.7%	0	0.0%	93	2.0%	19	0.4%	<b>4,696</b>	<b>100.0%</b>
Lyon	44,742	86.0%	512	1.0%	1,245	2.4%	571	1.1%	109	0.2%	2,711	5.2%	2,120	4.1%	<b>52,010</b>	<b>100.0%</b>
Mineral	2,733	62.1%	19	0.4%	1,179	26.8%	204	4.6%	0	0.0%	74	1.7%	190	4.3%	<b>4,399</b>	<b>100.0%</b>
Nye	35,624	83.1%	1,264	2.9%	723	1.7%	729	1.7%	164	0.4%	3,290	7.7%	1,059	2.5%	<b>42,853</b>	<b>100.0%</b>
Pershing	4,243	90.0%	3	0.1%	152	3.2%	75	1.6%	7	0.1%	184	3.9%	50	1.1%	<b>4,714</b>	<b>100.0%</b>
Storey	3,600	93.3%	24	0.6%	51	1.3%	73	1.9%	0	0.0%	13	0.3%	99	2.6%	<b>3,860</b>	<b>100.0%</b>
Washoe	352,831	79.7%	9,813	2.2%	7,078	1.6%	23,782	5.4%	2,651	0.6%	27,684	6.3%	19,101	4.3%	<b>442,940</b>	<b>100.0%</b>
White Pine	7,521	89.7%	18	0.2%	604	7.2%	56	0.7%	5	0.1%	114	1.4%	63	0.8%	<b>8,381</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>1,916,369</b>	<b>67.2%</b>	<b>245,137</b>	<b>8.6%</b>	<b>31,677</b>	<b>1.1%</b>	<b>231,610</b>	<b>8.1%</b>	<b>18,711</b>	<b>0.7%</b>	<b>276,606</b>	<b>9.7%</b>	<b>132,583</b>	<b>4.6%</b>	<b>2,852,693</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

*Ethnicity*

<b>The Uninsured Population in Nevada, by Ethnicity and County, 2017</b>						
	<b>White (Not Latino)</b>		<b>Latino (of Any Race)</b>		<b>County Total</b>	
	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Carson City	3,024	54.5%	2,521	45.5%	<b>5,545</b>	<b>100.0%</b>
Churchill	1,761	64.7%	962	35.3%	<b>2,723</b>	<b>100.0%</b>
Clark	88,146	36.0%	156,859	64.0%	<b>245,005</b>	<b>100.0%</b>
Douglas	3,192	71.4%	1,278	28.6%	<b>4,470</b>	<b>100.0%</b>
Elko	2,766	60.2%	1,831	39.8%	<b>4,597</b>	<b>100.0%</b>
Esmeralda	103	51.0%	99	49.0%	<b>202</b>	<b>100.0%</b>
Eureka	235	100.0%	0	0.0%	<b>235</b>	<b>100.0%</b>
Humboldt	1,298	51.8%	1,207	48.2%	<b>2,505</b>	<b>100.0%</b>
Lander	339	78.5%	93	21.5%	<b>432</b>	<b>100.0%</b>
Lincoln	219	67.6%	105	32.4%	<b>324</b>	<b>100.0%</b>
Lyon	3,998	72.0%	1,557	28.0%	<b>5,555</b>	<b>100.0%</b>
Mineral	239	62.7%	142	37.3%	<b>381</b>	<b>100.0%</b>
Nye	3,099	64.5%	1,707	35.5%	<b>4,806</b>	<b>100.0%</b>
Pershing	510	69.8%	221	30.2%	<b>731</b>	<b>100.0%</b>
Storey	319	95.5%	15	4.5%	<b>334</b>	<b>100.0%</b>
Washoe	22,784	49.4%	23,296	50.6%	<b>46,080</b>	<b>100.0%</b>
White Pine	683	77.3%	200	22.7%	<b>883</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>132,715</b>	<b>40.9%</b>	<b>192,093</b>	<b>59.1%</b>	<b>324,808</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population for whom ethnicity is determined.

<b>Total Population in Nevada, by Ethnicity and County, 2017</b>						
	<b>White (Not Latino)</b>		<b>Latino (of Any Race)</b>		<b>County Total</b>	
	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>	<b>N</b>	<b>%</b>
Carson City	35,773	74.3%	12,368	25.7%	<b>48,141</b>	<b>100.0%</b>
Churchill	17,138	84.6%	3,119	15.4%	<b>20,257</b>	<b>100.0%</b>
Clark	921,053	58.9%	643,197	41.1%	<b>1,564,250</b>	<b>100.0%</b>
Douglas	38,441	86.9%	5,779	13.1%	<b>44,220</b>	<b>100.0%</b>
Elko	34,783	73.4%	12,601	26.6%	<b>47,384</b>	<b>100.0%</b>
Esmeralda	880	83.7%	171	16.3%	<b>1,051</b>	<b>100.0%</b>
Eureka	1,668	98.5%	26	1.5%	<b>1,694</b>	<b>100.0%</b>
Humboldt	11,123	71.2%	4,500	28.8%	<b>15,623</b>	<b>100.0%</b>
Lander	3,951	71.5%	1,576	28.5%	<b>5,527</b>	<b>100.0%</b>
Lincoln	4,238	94.7%	238	5.3%	<b>4,476</b>	<b>100.0%</b>
Lyon	39,651	82.5%	8,385	17.5%	<b>48,036</b>	<b>100.0%</b>
Mineral	2,569	84.4%	474	15.6%	<b>3,043</b>	<b>100.0%</b>
Nye	33,197	84.6%	6,056	15.4%	<b>39,253</b>	<b>100.0%</b>
Pershing	3,522	78.2%	984	21.8%	<b>4,506</b>	<b>100.0%</b>
Storey	3,368	93.2%	245	6.8%	<b>3,613</b>	<b>100.0%</b>
Washoe	282,450	72.7%	106,012	27.3%	<b>388,462</b>	<b>100.0%</b>
White Pine	6,606	85.8%	1,089	14.2%	<b>7,695</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>1,440,411</b>	<b>64.1%</b>	<b>806,820</b>	<b>35.9%</b>	<b>2,247,231</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population for whom ethnicity is determined.

*Nativity and Citizenship*

<b>The Uninsured Population in Nevada, by Nativity, Citizenship, and County, 2017</b>								
	Native Born		Naturalized Foreign Born		Non-Citizen Foreign Born		County Total	
	N	%	N	%	N	%	N	%
Carson City	4,443	73.1%	207	3.4%	1,424	23.4%	<b>6,074</b>	<b>100.0%</b>
Churchill	2,550	79.2%	7	0.2%	663	20.6%	<b>3,220</b>	<b>100.0%</b>
Clark	174,988	56.9%	23,645	7.7%	108,801	35.4%	<b>307,434</b>	<b>100.0%</b>
Douglas	4,161	81.5%	190	3.7%	754	14.8%	<b>5,105</b>	<b>100.0%</b>
Elko	4,425	81.2%	87	1.6%	940	17.2%	<b>5,452</b>	<b>100.0%</b>
Esmeralda	128	57.7%	3	1.4%	91	41.0%	<b>222</b>	<b>100.0%</b>
Eureka	235	100.0%	0	0.0%	0	0.0%	<b>235</b>	<b>100.0%</b>
Humboldt	2,186	81.1%	106	3.9%	405	15.0%	<b>2,697</b>	<b>100.0%</b>
Lander	529	95.0%	1	0.2%	27	4.8%	<b>557</b>	<b>100.0%</b>
Lincoln	412	84.1%	0	0.0%	78	15.9%	<b>490</b>	<b>100.0%</b>
Lyon	5,089	84.3%	142	2.4%	803	13.3%	<b>6,034</b>	<b>100.0%</b>
Mineral	638	94.5%	0	0.0%	37	5.5%	<b>675</b>	<b>100.0%</b>
Nye	4,142	75.9%	117	2.1%	1,199	22.0%	<b>5,458</b>	<b>100.0%</b>
Pershing	629	80.8%	55	7.1%	94	12.1%	<b>778</b>	<b>100.0%</b>
Storey	340	100.0%	0	0.0%	0	0.0%	<b>340</b>	<b>100.0%</b>
Washoe	35,380	67.7%	3,452	6.6%	13,435	25.7%	<b>52,267</b>	<b>100.0%</b>
White Pine	823	87.9%	0	0.0%	113	12.1%	<b>936</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>241,098</b>	<b>60.6%</b>	<b>28,012</b>	<b>7.0%</b>	<b>128,864</b>	<b>32.4%</b>	<b>397,974</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

<b>Total Population in Nevada, by Nativity, Citizenship, and County, 2017</b>								
	Native Born		Naturalized Foreign Born		Non-Citizen Foreign Born		County Total	
	N	%	N	%	N	%	N	%
Carson City	46,410	88.8%	2,389	4.6%	3,488	6.7%	<b>52,287</b>	<b>100.0%</b>
Churchill	21,561	93.1%	435	1.9%	1,156	5.0%	<b>23,152</b>	<b>100.0%</b>
Clark	1,620,368	77.6%	225,645	10.8%	242,793	11.6%	<b>2,088,806</b>	<b>100.0%</b>
Douglas	43,753	92.4%	1,942	4.1%	1,635	3.5%	<b>47,330</b>	<b>100.0%</b>
Elko	47,232	91.3%	1,787	3.5%	2,710	5.2%	<b>51,729</b>	<b>100.0%</b>
Esmeralda	969	88.3%	28	2.6%	100	9.1%	<b>1,097</b>	<b>100.0%</b>
Eureka	1,703	98.8%	5	0.3%	15	0.9%	<b>1,723</b>	<b>100.0%</b>
Humboldt	14,978	88.8%	783	4.6%	1,110	6.6%	<b>16,871</b>	<b>100.0%</b>
Lander	5,178	88.6%	303	5.2%	364	6.2%	<b>5,845</b>	<b>100.0%</b>
Lincoln	4,563	97.2%	44	0.9%	89	1.9%	<b>4,696</b>	<b>100.0%</b>
Lyon	48,556	93.4%	1,265	2.4%	2,189	4.2%	<b>52,010</b>	<b>100.0%</b>
Mineral	4,168	94.7%	82	1.9%	149	3.4%	<b>4,399</b>	<b>100.0%</b>
Nye	39,534	92.3%	1,527	3.6%	1,792	4.2%	<b>42,853</b>	<b>100.0%</b>
Pershing	4,280	90.8%	231	4.9%	203	4.3%	<b>4,714</b>	<b>100.0%</b>
Storey	3,734	96.7%	68	1.8%	58	1.5%	<b>3,860</b>	<b>100.0%</b>
Washoe	379,126	85.6%	30,609	6.9%	33,205	7.5%	<b>442,940</b>	<b>100.0%</b>
White Pine	8,085	96.5%	53	0.6%	243	2.9%	<b>8,381</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>2,294,198</b>	<b>80.4%</b>	<b>267,196</b>	<b>9.4%</b>	<b>291,299</b>	<b>10.2%</b>	<b>2,852,693</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

*Disability Status*

<b>The Uninsured Population in Nevada, by Disability Status and County, 2017</b>						
	With a Disability		No Disability		County Total	
	N	%	N	%	N	%
Carson City	1,218	20.1%	4,856	79.9%	<b>6,074</b>	<b>100.0%</b>
Churchill	301	9.3%	2,919	90.7%	<b>3,220</b>	<b>100.0%</b>
Clark	24,353	7.9%	283,081	92.1%	<b>307,434</b>	<b>100.0%</b>
Douglas	467	9.1%	4,638	90.9%	<b>5,105</b>	<b>100.0%</b>
Elko	460	8.4%	4,992	91.6%	<b>5,452</b>	<b>100.0%</b>
Esmeralda	0	0.0%	222	100.0%	<b>222</b>	<b>100.0%</b>
Eureka	17	7.2%	218	92.8%	<b>235</b>	<b>100.0%</b>
Humboldt	364	13.5%	2,333	86.5%	<b>2,697</b>	<b>100.0%</b>
Lander	70	12.6%	487	87.4%	<b>557</b>	<b>100.0%</b>
Lincoln	0	0.0%	490	100.0%	<b>490</b>	<b>100.0%</b>
Lyon	759	12.6%	5,275	87.4%	<b>6,034</b>	<b>100.0%</b>
Mineral	92	13.6%	583	86.4%	<b>675</b>	<b>100.0%</b>
Nye	1,088	19.9%	4,370	80.1%	<b>5,458</b>	<b>100.0%</b>
Pershing	11	1.4%	767	98.6%	<b>778</b>	<b>100.0%</b>
Storey	38	11.2%	302	88.8%	<b>340</b>	<b>100.0%</b>
Washoe	4,380	8.4%	47,887	91.6%	<b>52,267</b>	<b>100.0%</b>
White Pine	139	14.9%	797	85.1%	<b>936</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>33,757</b>	<b>8.5%</b>	<b>364,217</b>	<b>91.5%</b>	<b>397,974</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

<b>Total Population in Nevada, by Disability Status and County, 2017</b>						
	With a Disability		No Disability		County Total	
	N	%	N	%	N	%
Carson City	12,197	23.3%	40,090	76.7%	<b>52,287</b>	<b>100.0%</b>
Churchill	3,460	14.9%	19,692	85.1%	<b>23,152</b>	<b>100.0%</b>
Clark	258,104	12.4%	1,830,702	87.6%	<b>2,088,806</b>	<b>100.0%</b>
Douglas	7,304	15.4%	40,026	84.6%	<b>47,330</b>	<b>100.0%</b>
Elko	6,172	11.9%	45,557	88.1%	<b>51,729</b>	<b>100.0%</b>
Esmeralda	187	17.0%	910	83.0%	<b>1,097</b>	<b>100.0%</b>
Eureka	303	17.6%	1,420	82.4%	<b>1,723</b>	<b>100.0%</b>
Humboldt	2,105	12.5%	14,766	87.5%	<b>16,871</b>	<b>100.0%</b>
Lander	720	12.3%	5,125	87.7%	<b>5,845</b>	<b>100.0%</b>
Lincoln	800	17.0%	3,896	83.0%	<b>4,696</b>	<b>100.0%</b>
Lyon	9,938	19.1%	42,072	80.9%	<b>52,010</b>	<b>100.0%</b>
Mineral	935	21.3%	3,464	78.7%	<b>4,399</b>	<b>100.0%</b>
Nye	11,115	25.9%	31,738	74.1%	<b>42,853</b>	<b>100.0%</b>
Pershing	760	16.1%	3,954	83.9%	<b>4,714</b>	<b>100.0%</b>
Storey	974	25.2%	2,886	74.8%	<b>3,860</b>	<b>100.0%</b>
Washoe	53,747	12.1%	389,193	87.9%	<b>442,940</b>	<b>100.0%</b>
White Pine	1,560	18.6%	6,821	81.4%	<b>8,381</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>370,381</b>	<b>13.0%</b>	<b>2,482,312</b>	<b>87.0%</b>	<b>2,852,693</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding.

*Educational Attainment*

<b>The Uninsured Population in Nevada, by Educational Attainment and County, 2017</b>										
	Less than High School Graduate		High School Graduate (Includes Equivalency)		Some College or Associate's Degree		Bachelor's Degree or Higher		County Total	
	N	%	N	%	N	%	N	%	N	%
Carson City	1,192	27.8%	1,528	35.7%	1,201	28.0%	361	8.4%	<b>4,282</b>	<b>100.0%</b>
Churchill	660	32.2%	657	32.0%	584	28.5%	149	7.3%	<b>2,050</b>	<b>100.0%</b>
Clark	63,875	29.8%	71,896	33.5%	54,864	25.6%	24,017	11.2%	<b>214,652</b>	<b>100.0%</b>
Douglas	534	16.8%	1,088	34.2%	1,318	41.5%	239	7.5%	<b>3,179</b>	<b>100.0%</b>
Elko	1,074	29.2%	1,285	34.9%	994	27.0%	328	8.9%	<b>3,681</b>	<b>100.0%</b>
Esmeralda	35	32.1%	49	45.0%	20	18.3%	5	4.6%	<b>109</b>	<b>100.0%</b>
Eureka	36	18.8%	91	47.6%	45	23.6%	19	9.9%	<b>191</b>	<b>100.0%</b>
Humboldt	327	22.0%	681	45.9%	421	28.4%	54	3.6%	<b>1,483</b>	<b>100.0%</b>
Lander	38	9.0%	202	48.0%	114	27.1%	67	15.9%	<b>421</b>	<b>100.0%</b>
Lincoln	58	30.2%	105	54.7%	17	8.9%	12	6.3%	<b>192</b>	<b>100.0%</b>
Lyon	1,213	29.7%	1,482	36.3%	1,226	30.0%	162	4.0%	<b>4,083</b>	<b>100.0%</b>
Mineral	78	16.4%	184	38.7%	134	28.2%	79	16.6%	<b>475</b>	<b>100.0%</b>
Nye	1,214	29.0%	1,605	38.3%	1,052	25.1%	317	7.6%	<b>4,188</b>	<b>100.0%</b>
Pershing	138	25.6%	168	31.2%	170	31.5%	63	11.7%	<b>539</b>	<b>100.0%</b>
Storey	2	0.8%	173	66.0%	34	13.0%	53	20.2%	<b>262</b>	<b>100.0%</b>
Washoe	10,517	29.8%	10,730	30.4%	10,555	29.9%	3,507	9.9%	<b>35,309</b>	<b>100.0%</b>
White Pine	158	23.4%	291	43.2%	175	26.0%	50	7.4%	<b>674</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>81,149</b>	<b>29.4%</b>	<b>92,215</b>	<b>33.4%</b>	<b>72,924</b>	<b>26.4%</b>	<b>29,482</b>	<b>10.7%</b>	<b>275,770</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population 26 years and over.

<b>Total Population in Nevada, by Educational Attainment and County, 2017</b>										
	Less than High School Graduate		High School Graduate (Includes Equivalency)		Some College or Associate's Degree		Bachelor's Degree or Higher		County Total	
	N	%	N	%	N	%	N	%	N	%
Carson City	4,614	12.7%	10,344	28.5%	13,321	36.7%	8,004	22.1%	<b>36,283</b>	<b>100.0%</b>
Churchill	1,642	10.6%	4,778	30.9%	6,212	40.2%	2,830	18.3%	<b>15,462</b>	<b>100.0%</b>
Clark	202,425	14.7%	396,928	28.8%	455,151	33.0%	323,391	23.5%	<b>1,377,895</b>	<b>100.0%</b>
Douglas	2,259	6.4%	8,707	24.6%	14,691	41.5%	9,721	27.5%	<b>35,378</b>	<b>100.0%</b>
Elko	5,153	16.1%	9,143	28.6%	11,949	37.4%	5,677	17.8%	<b>31,922</b>	<b>100.0%</b>
Esmeralda	67	8.8%	336	43.9%	225	29.4%	137	17.9%	<b>765</b>	<b>100.0%</b>
Eureka	109	8.7%	529	42.4%	438	35.1%	171	13.7%	<b>1,247</b>	<b>100.0%</b>
Humboldt	1,782	16.6%	3,689	34.4%	3,600	33.5%	1,662	15.5%	<b>10,733</b>	<b>100.0%</b>
Lander	631	16.5%	1,486	38.9%	1,193	31.2%	509	13.3%	<b>3,819</b>	<b>100.0%</b>
Lincoln	287	9.0%	1,057	33.2%	1,136	35.7%	701	22.0%	<b>3,181</b>	<b>100.0%</b>
Lyon	5,361	14.7%	11,475	31.4%	14,386	39.4%	5,334	14.6%	<b>36,556</b>	<b>100.0%</b>
Mineral	433	13.5%	1,119	34.8%	1,205	37.5%	455	14.2%	<b>3,212</b>	<b>100.0%</b>
Nye	4,672	14.4%	11,952	36.8%	12,052	37.1%	3,804	11.7%	<b>32,480</b>	<b>100.0%</b>
Pershing	522	15.5%	1,238	36.8%	988	29.4%	612	18.2%	<b>3,360</b>	<b>100.0%</b>
Storey	166	5.2%	1,014	31.7%	1,282	40.0%	739	23.1%	<b>3,201</b>	<b>100.0%</b>
Washoe	36,729	12.4%	69,858	23.6%	100,681	34.0%	88,460	29.9%	<b>295,728</b>	<b>100.0%</b>
White Pine	678	11.9%	1,896	33.4%	2,113	37.2%	994	17.5%	<b>5,681</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>267,530</b>	<b>14.1%</b>	<b>535,549</b>	<b>28.2%</b>	<b>640,623</b>	<b>33.8%</b>	<b>453,201</b>	<b>23.9%</b>	<b>1,896,903</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population 26 years and over.

*Employment Status*

<b>The Uninsured Population in Nevada, by Employment Status and County, 2017</b>								
	Employed		Unemployed		Not in Labor Force		County Total	
	N	%	N	%	N	%	N	%
Carson City	3,153	64.1%	629	12.8%	1,140	23.2%	<b>4,922</b>	<b>100.0%</b>
Churchill	1,750	67.6%	242	9.3%	598	23.1%	<b>2,590</b>	<b>100.0%</b>
Clark	157,036	62.8%	30,048	12.0%	63,012	25.2%	<b>250,096</b>	<b>100.0%</b>
Douglas	2,723	69.3%	356	9.1%	851	21.7%	<b>3,930</b>	<b>100.0%</b>
Elko	2,800	66.3%	435	10.3%	989	23.4%	<b>4,224</b>	<b>100.0%</b>
Esmeralda	141	73.1%	10	5.2%	42	21.8%	<b>193</b>	<b>100.0%</b>
Eureka	206	100.0%	0	0.0%	0	0.0%	<b>206</b>	<b>100.0%</b>
Humboldt	1,218	64.8%	216	11.5%	447	23.8%	<b>1,881</b>	<b>100.0%</b>
Lander	236	52.7%	91	20.3%	121	27.0%	<b>448</b>	<b>100.0%</b>
Lincoln	161	57.5%	5	1.8%	114	40.7%	<b>280</b>	<b>100.0%</b>
Lyon	2,504	54.0%	522	11.3%	1,614	34.8%	<b>4,640</b>	<b>100.0%</b>
Mineral	245	46.9%	141	27.0%	136	26.1%	<b>522</b>	<b>100.0%</b>
Nye	2,547	54.9%	740	15.9%	1,355	29.2%	<b>4,642</b>	<b>100.0%</b>
Pershing	432	74.0%	56	9.6%	96	16.4%	<b>584</b>	<b>100.0%</b>
Storey	111	35.2%	47	14.9%	157	49.8%	<b>315</b>	<b>100.0%</b>
Washoe	27,157	64.2%	4,912	11.6%	10,217	24.2%	<b>42,286</b>	<b>100.0%</b>
White Pine	488	65.3%	54	7.2%	205	27.4%	<b>747</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>202,908</b>	<b>62.9%</b>	<b>38,504</b>	<b>11.9%</b>	<b>81,094</b>	<b>25.1%</b>	<b>322,506</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population 19 to 64 years.

<b>Total Population in Nevada, by Employment Status and County, 2017</b>								
	Employed		Unemployed		Not in Labor Force		County Total	
	N	%	N	%	N	%	N	%
Carson City	22,317	73.2%	1,750	5.7%	6,400	21.0%	<b>30,467</b>	<b>100.0%</b>
Churchill	8,575	65.0%	699	5.3%	3,912	29.7%	<b>13,186</b>	<b>100.0%</b>
Clark	920,409	72.0%	79,616	6.2%	277,713	21.7%	<b>1,277,738</b>	<b>100.0%</b>
Douglas	18,545	70.5%	1,061	4.0%	6,714	25.5%	<b>26,320</b>	<b>100.0%</b>
Elko	24,489	78.0%	994	3.2%	5,922	18.9%	<b>31,405</b>	<b>100.0%</b>
Esmeralda	417	71.3%	13	2.2%	155	26.5%	<b>585</b>	<b>100.0%</b>
Eureka	825	78.1%	0	0.0%	232	21.9%	<b>1,057</b>	<b>100.0%</b>
Humboldt	7,633	77.1%	500	5.1%	1,763	17.8%	<b>9,896</b>	<b>100.0%</b>
Lander	2,565	76.7%	222	6.6%	557	16.7%	<b>3,344</b>	<b>100.0%</b>
Lincoln	1,624	66.3%	92	3.8%	733	29.9%	<b>2,449</b>	<b>100.0%</b>
Lyon	18,946	64.5%	1,957	6.7%	8,454	28.8%	<b>29,357</b>	<b>100.0%</b>
Mineral	1,513	59.4%	421	16.5%	614	24.1%	<b>2,548</b>	<b>100.0%</b>
Nye	13,296	58.1%	1,761	7.7%	7,834	34.2%	<b>22,891</b>	<b>100.0%</b>
Pershing	2,045	77.6%	96	3.6%	494	18.7%	<b>2,635</b>	<b>100.0%</b>
Storey	1,541	72.3%	73	3.4%	517	24.3%	<b>2,131</b>	<b>100.0%</b>
Washoe	203,199	74.6%	13,914	5.1%	55,309	20.3%	<b>272,422</b>	<b>100.0%</b>
White Pine	3,114	68.2%	139	3.0%	1,312	28.7%	<b>4,565</b>	<b>100.0%</b>
<b>Nevada Total</b>	<b>1,251,053</b>	<b>72.2%</b>	<b>103,308</b>	<b>6.0%</b>	<b>378,635</b>	<b>21.8%</b>	<b>1,732,996</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population 19 to 64 years.



*Work Experience*

The Uninsured Population in Nevada, by Work Experience and County, 2017								
	Worked Full-Time, Year Round in Past 12 Months		Worked Less than Full-Time, Year Round in Past 12 Months		Did Not Work		County Total	
	N	%	N	%	N	%	N	%
Carson City	1,734	35.2%	2,001	40.7%	1,187	24.1%	4,922	100.0%
Churchill	1,041	40.2%	1,001	38.6%	548	21.2%	2,590	100.0%
Clark	94,720	37.9%	86,570	34.6%	68,806	27.5%	250,096	100.0%
Douglas	1,493	38.0%	1,756	44.7%	681	17.3%	3,930	100.0%
Elko	1,655	39.2%	1,618	38.3%	951	22.5%	4,224	100.0%
Esmeralda	131	67.9%	10	5.2%	52	26.9%	193	100.0%
Eureka	179	86.9%	27	13.1%	0	0.0%	206	100.0%
Humboldt	564	30.0%	904	48.1%	413	22.0%	1,881	100.0%
Lander	136	30.4%	173	38.6%	139	31.0%	448	100.0%
Lincoln	39	13.9%	189	67.5%	52	18.6%	280	100.0%
Lyon	1,311	28.3%	1,671	36.0%	1,658	35.7%	4,640	100.0%
Mineral	115	22.0%	211	40.4%	196	37.5%	522	100.0%
Nye	1,164	25.1%	1,951	42.0%	1,527	32.9%	4,642	100.0%
Pershing	242	41.4%	232	39.7%	110	18.8%	584	100.0%
Storey	81	25.7%	100	31.7%	134	42.5%	315	100.0%
Washoe	15,443	36.5%	16,918	40.0%	9,925	23.5%	42,286	100.0%
White Pine	374	50.1%	182	24.4%	191	25.6%	747	100.0%
<b>Nevada Total</b>	<b>120,422</b>	<b>37.3%</b>	<b>115,514</b>	<b>35.8%</b>	<b>86,570</b>	<b>26.8%</b>	<b>322,506</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population 19 to 64 years.

Total Population in Nevada, by Work Experience and County, 2017								
	Worked Full-Time, Year Round in Past 12 Months		Worked Less than Full-Time, Year Round in Past 12 Months		Did Not Work		County Total	
	N	%	N	%	N	%	N	%
Carson City	16,582	54.4%	7,841	25.7%	6,044	19.8%	30,467	100.0%
Churchill	6,208	47.1%	3,430	26.0%	3,548	26.9%	13,186	100.0%
Clark	665,490	52.1%	331,418	25.9%	280,830	22.0%	1,277,738	100.0%
Douglas	12,978	49.3%	7,385	28.1%	5,957	22.6%	26,320	100.0%
Elko	18,957	60.4%	7,196	22.9%	5,252	16.7%	31,405	100.0%
Esmeralda	310	53.0%	142	24.3%	133	22.7%	585	100.0%
Eureka	694	65.7%	158	14.9%	205	19.4%	1,057	100.0%
Humboldt	5,615	56.7%	2,625	26.5%	1,656	16.7%	9,896	100.0%
Lander	2,064	61.7%	695	20.8%	585	17.5%	3,344	100.0%
Lincoln	1,168	47.7%	664	27.1%	617	25.2%	2,449	100.0%
Lyon	13,795	47.0%	7,464	25.4%	8,098	27.6%	29,357	100.0%
Mineral	1,191	46.7%	675	26.5%	682	26.8%	2,548	100.0%
Nye	9,058	39.6%	5,641	24.6%	8,192	35.8%	22,891	100.0%
Pershing	1,606	60.9%	548	20.8%	481	18.3%	2,635	100.0%
Storey	1,034	48.5%	644	30.2%	453	21.3%	2,131	100.0%
Washoe	142,882	52.4%	78,158	28.7%	51,382	18.9%	272,422	100.0%
White Pine	2,370	51.9%	967	21.2%	1,228	26.9%	4,565	100.0%
<b>Nevada Total</b>	<b>902,002</b>	<b>52.0%</b>	<b>455,651</b>	<b>26.3%</b>	<b>375,343</b>	<b>21.7%</b>	<b>1,732,996</b>	<b>100.0%</b>

*Note:* Percentages may not sum to 100 due to rounding. Universe is population 19 to 64 years.

*Class of Worker*

There is no table for Class of Worker, as ACS provides only percentages for this metric (i.e., no counts). Imputation would have resulted in “fuzzy” estimates. Additionally, county-level data is available only for Clark County and Washoe County.

### Household Income

The Uninsured Population in Nevada, by Household Income and County, 2017												
	Under \$25,000		\$25,000 to \$49,999		\$50,000 to \$74,999		\$75,000 to \$99,999		\$100,000 and Over		County Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Carson City	1,344	22.2%	2,532	41.7%	949	15.6%	467	7.7%	774	12.8%	6,066	100.0%
Churchill	975	30.3%	1,098	34.1%	489	15.2%	491	15.2%	167	5.2%	3,220	100.0%
Clark	68,632	22.4%	96,097	31.3%	64,829	21.1%	33,177	10.8%	44,175	14.4%	306,910	100.0%
Douglas	1,139	22.3%	1,386	27.1%	1,334	26.1%	524	10.3%	722	14.1%	5,105	100.0%
Elko	1,159	21.3%	1,353	24.8%	1,059	19.4%	553	10.2%	1,322	24.3%	5,446	100.0%
Esmeralda	20	9.0%	104	46.8%	24	10.8%	0	0.0%	74	33.3%	222	100.0%
Eureka	65	27.7%	0	0.0%	62	26.4%	19	8.1%	89	37.9%	235	100.0%
Humboldt	550	20.4%	614	22.8%	474	17.6%	720	26.7%	339	12.6%	2,697	100.0%
Lander	101	18.3%	158	28.7%	191	34.7%	67	12.2%	34	6.2%	551	100.0%
Lincoln	310	63.7%	107	22.0%	37	7.6%	0	0.0%	33	6.8%	487	100.0%
Lyon	1,433	23.8%	2,341	38.8%	986	16.4%	615	10.2%	652	10.8%	6,027	100.0%
Mineral	163	24.1%	175	25.9%	143	21.2%	162	24.0%	32	4.7%	675	100.0%
Nye	1,414	25.9%	1,635	30.0%	1,368	25.1%	642	11.8%	397	7.3%	5,456	100.0%
Pershing	103	13.3%	240	31.0%	263	34.0%	65	8.4%	103	13.3%	774	100.0%
Storey	26	7.8%	144	43.0%	48	14.3%	52	15.5%	65	19.4%	335	100.0%
Washoe	12,353	23.8%	17,161	33.1%	10,263	19.8%	5,307	10.2%	6,795	13.1%	51,879	100.0%
White Pine	168	18.0%	279	29.9%	235	25.2%	129	13.8%	121	13.0%	932	100.0%
<b>Nevada Total</b>	<b>89,955</b>	<b>22.7%</b>	<b>125,424</b>	<b>31.6%</b>	<b>82,754</b>	<b>20.8%</b>	<b>42,990</b>	<b>10.8%</b>	<b>55,894</b>	<b>14.1%</b>	<b>397,017</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding. Universe is household population.

Total Population in Nevada, by Household Income and County, 2017												
	Under \$25,000		\$25,000 to \$49,999		\$50,000 to \$74,999		\$75,000 to \$99,999		\$100,000 and Over		County Total	
	N	%	N	%	N	%	N	%	N	%	N	%
Carson City	8,980	17.2%	13,239	25.4%	11,059	21.2%	6,484	12.4%	12,416	23.8%	52,178	100.0%
Churchill	4,083	17.7%	5,708	24.8%	4,233	18.4%	3,503	15.2%	5,534	24.0%	23,061	100.0%
Clark	305,380	14.7%	480,458	23.1%	424,900	20.4%	313,947	15.1%	559,277	26.8%	2,083,962	100.0%
Douglas	5,917	12.5%	9,606	20.3%	10,622	22.5%	7,842	16.6%	13,303	28.1%	47,290	100.0%
Elko	5,388	10.5%	8,043	15.6%	8,298	16.1%	9,644	18.7%	20,140	39.1%	51,513	100.0%
Esmeralda	225	20.5%	356	32.5%	246	22.4%	104	9.5%	166	15.1%	1,097	100.0%
Eureka	239	13.9%	93	5.4%	343	19.9%	306	17.8%	742	43.1%	1,723	100.0%
Humboldt	1,696	10.1%	3,200	19.0%	2,688	15.9%	3,131	18.6%	6,151	36.5%	16,866	100.0%
Lander	625	10.7%	793	13.6%	639	11.0%	1,247	21.4%	2,525	43.3%	5,829	100.0%
Lincoln	932	19.9%	918	19.6%	1,151	24.6%	678	14.5%	1,008	21.5%	4,687	100.0%
Lyon	7,901	15.2%	13,711	26.4%	11,687	22.5%	7,658	14.7%	10,988	21.2%	51,945	100.0%
Mineral	1,056	24.0%	993	22.6%	803	18.3%	713	16.2%	827	18.8%	4,392	100.0%
Nye	9,277	21.7%	10,830	25.3%	10,307	24.1%	5,235	12.2%	7,159	16.7%	42,808	100.0%
Pershing	810	17.2%	1,085	23.1%	987	21.0%	843	18.0%	971	20.7%	4,696	100.0%
Storey	273	7.1%	1,012	26.4%	963	25.1%	675	17.6%	911	23.8%	3,834	100.0%
Washoe	61,563	14.0%	94,050	21.4%	85,980	19.6%	64,803	14.8%	132,742	30.2%	439,138	100.0%
White Pine	1,309	15.6%	1,750	20.9%	2,102	25.1%	1,383	16.5%	1,821	21.8%	8,365	100.0%
<b>Nevada Total</b>	<b>415,654</b>	<b>14.6%</b>	<b>645,845</b>	<b>22.7%</b>	<b>577,008</b>	<b>20.3%</b>	<b>428,196</b>	<b>15.1%</b>	<b>776,681</b>	<b>27.3%</b>	<b>2,843,384</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding. Universe is household population.

Poverty

The Uninsured Population in Nevada, by Poverty Status and County, 2017						
	In Poverty		Not in Poverty		County Total	
	N	%	N	%	N	%
Carson City	828	25.7%	2,392	74.3%	3,220	100.0%
Churchill	79,636	26.0%	226,512	74.0%	306,148	100.0%
Clark	1,276	25.1%	3,810	74.9%	5,086	100.0%
Douglas	1,324	24.3%	4,118	75.7%	5,442	100.0%
Elko	6	2.7%	216	97.3%	222	100.0%
Esmeralda	19	8.1%	216	91.9%	235	100.0%
Eureka	659	24.4%	2,038	75.6%	2,697	100.0%
Humboldt	74	13.3%	483	86.7%	557	100.0%
Lander	322	65.7%	168	34.3%	490	100.0%
Lincoln	1,970	32.7%	4,055	67.3%	6,025	100.0%
Lyon	151	22.4%	524	77.6%	675	100.0%
Mineral	1,661	30.4%	3,797	69.6%	5,458	100.0%
Nye	190	24.4%	588	75.6%	778	100.0%
Pershing	70	20.6%	270	79.4%	340	100.0%
Storey	13,414	25.8%	38,661	74.2%	52,075	100.0%
Washoe	163	17.4%	773	82.6%	936	100.0%
White Pine	1,259	20.8%	4,796	79.2%	6,055	100.0%
<b>Nevada Total</b>	<b>103,022</b>	<b>26.0%</b>	<b>293,417</b>	<b>74.0%</b>	<b>396,439</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding. Universe is population for whom poverty status is determined.

Total Population in Nevada, by Poverty Status and County, 2017						
	In Poverty		Not in Poverty		County Total	
	N	%	N	%	N	%
Carson City	7,698	14.7%	44,517	85.3%	52,215	100.0%
Churchill	3,241	14.0%	19,840	86.0%	23,081	100.0%
Clark	304,296	14.6%	1,775,219	85.4%	2,079,515	100.0%
Douglas	4,647	9.8%	42,589	90.2%	47,236	100.0%
Elko	5,931	11.5%	45,650	88.5%	51,581	100.0%
Esmeralda	75	6.8%	1,022	93.2%	1,097	100.0%
Eureka	173	10.0%	1,550	90.0%	1,723	100.0%
Humboldt	1,535	9.1%	15,313	90.9%	16,848	100.0%
Lander	769	13.2%	5,076	86.8%	5,845	100.0%
Lincoln	568	12.1%	4,128	87.9%	4,696	100.0%
Lyon	7,148	13.8%	44,784	86.2%	51,932	100.0%
Mineral	894	20.3%	3,505	79.7%	4,399	100.0%
Nye	7,388	17.3%	35,369	82.7%	42,757	100.0%
Pershing	709	15.0%	4,005	85.0%	4,714	100.0%
Storey	300	7.8%	3,560	92.2%	3,860	100.0%
Washoe	58,642	13.3%	381,144	86.7%	439,786	100.0%
White Pine	1,092	13.0%	7,289	87.0%	8,381	100.0%
<b>Nevada Total</b>	<b>405,106</b>	<b>14.3%</b>	<b>2,434,560</b>	<b>85.7%</b>	<b>2,839,666</b>	<b>100.0%</b>

Note: Percentages may not sum to 100 due to rounding. Universe is population for whom poverty status is determined.

Poverty (cont'd)

The Uninsured Population in Nevada, by Poverty Level and County, 2017								
	Below 138 Percent of the Poverty Threshold		138 to 399 Percent of the Poverty Threshold		At or Above 400 Percent of the Poverty Threshold		County Total	
	N	%	N	%	N	%	N	%
Carson City	2,135	35.3%	3,040	50.2%	880	14.5%	6,055	100.0%
Churchill	1,171	36.4%	1,792	55.7%	257	8.0%	3,220	100.0%
Clark	116,221	38.0%	152,088	49.7%	37,839	12.4%	306,148	100.0%
Douglas	1,763	34.7%	2,606	51.2%	717	14.1%	5,086	100.0%
Elko	1,639	30.1%	2,499	45.9%	1,304	24.0%	5,442	100.0%
Esmeralda	100	45.0%	48	21.6%	74	33.3%	222	100.0%
Eureka	65	27.7%	45	19.1%	125	53.2%	235	100.0%
Humboldt	952	35.3%	1,434	53.2%	311	11.5%	2,697	100.0%
Lander	116	20.8%	410	73.6%	31	5.6%	557	100.0%
Lincoln	366	74.7%	91	18.6%	33	6.7%	490	100.0%
Lyon	2,769	46.0%	2,661	44.2%	595	9.9%	6,025	100.0%
Mineral	237	35.1%	352	52.1%	86	12.7%	675	100.0%
Nye	1,960	35.9%	2,853	52.3%	645	11.8%	5,458	100.0%
Pershing	234	30.1%	461	59.3%	83	10.7%	778	100.0%
Storey	81	23.8%	171	50.3%	88	25.9%	340	100.0%
Washoe	21,517	41.3%	23,687	45.5%	6,871	13.2%	52,075	100.0%
White Pine	216	23.1%	667	71.3%	53	5.7%	936	100.0%
<b>Nevada Total</b>	<b>151,542</b>	<b>38.2%</b>	<b>194,905</b>	<b>49.2%</b>	<b>49,992</b>	<b>12.6%</b>	<b>396,439</b>	<b>100.0%</b>

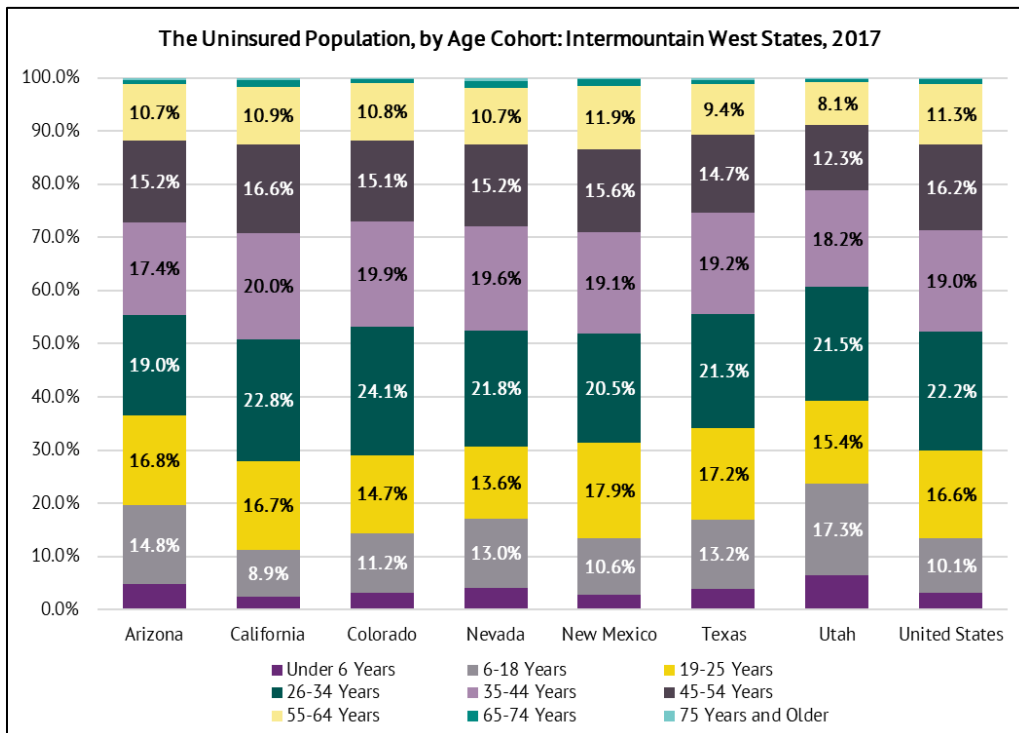
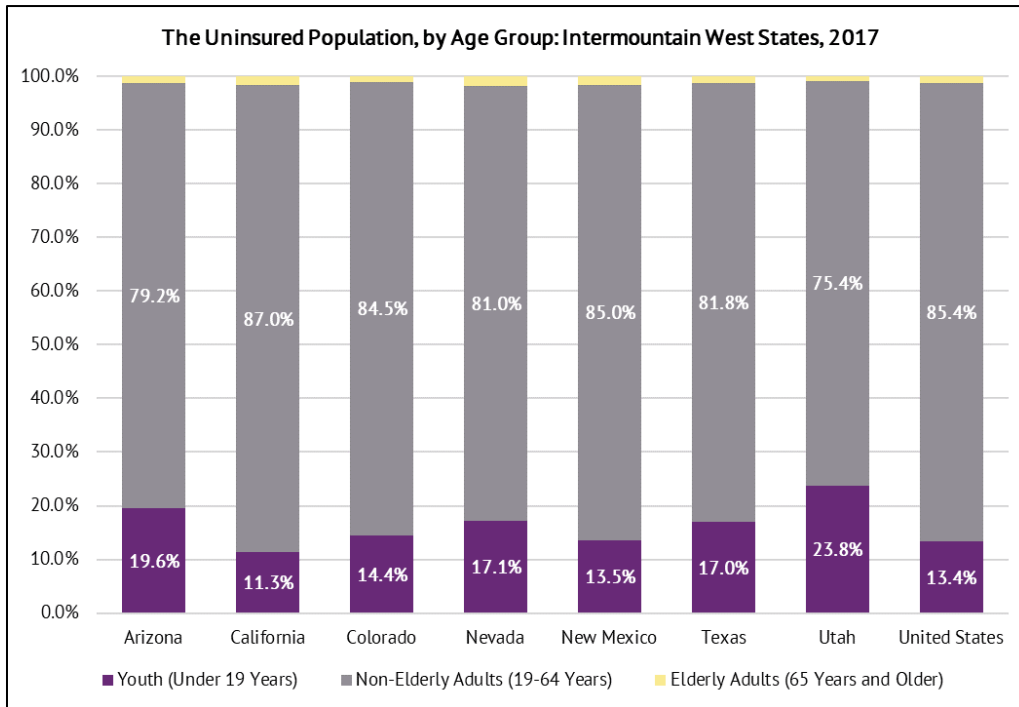
Note: Percentages may not sum to 100 due to rounding. Universe is population for whom poverty status is determined.

Total Population in Nevada, by Poverty Level and County, 2017								
	Below 138 Percent of the Poverty Threshold		138 to 399 Percent of the Poverty Threshold		At or Above 400 Percent of the Poverty Threshold		County Total	
	N	%	N	%	N	%	N	%
Carson City	12,551	24.0%	22,918	43.9%	16,746	32.1%	52,215	100.0%
Churchill	4,890	21.2%	11,296	48.9%	6,895	29.9%	23,081	100.0%
Clark	462,524	22.2%	976,259	46.9%	640,732	30.8%	2,079,515	100.0%
Douglas	7,118	15.1%	20,691	43.8%	19,427	41.1%	47,236	100.0%
Elko	8,267	16.0%	20,308	39.4%	23,006	44.6%	51,581	100.0%
Esmeralda	283	25.8%	544	49.6%	270	24.6%	1,097	100.0%
Eureka	239	13.9%	654	38.0%	830	48.2%	1,723	100.0%
Humboldt	2,626	15.6%	6,658	39.5%	7,564	44.9%	16,848	100.0%
Lander	898	15.4%	2,239	38.3%	2,708	46.3%	5,845	100.0%
Lincoln	888	18.9%	2,241	47.7%	1,567	33.4%	4,696	100.0%
Lyon	11,690	22.5%	25,135	48.4%	15,107	29.1%	51,932	100.0%
Mineral	1,306	29.7%	2,074	47.1%	1,019	23.2%	4,399	100.0%
Nye	11,159	26.1%	20,911	48.9%	10,687	25.0%	42,757	100.0%
Pershing	996	21.1%	2,538	53.8%	1,180	25.0%	4,714	100.0%
Storey	576	14.9%	1,676	43.4%	1,608	41.7%	3,860	100.0%
Washoe	93,706	21.3%	186,528	42.4%	159,552	36.3%	439,786	100.0%
White Pine	1,599	19.1%	4,012	47.9%	2,770	33.1%	8,381	100.0%
<b>Nevada Total</b>	<b>621,316</b>	<b>21.9%</b>	<b>1,306,682</b>	<b>46.0%</b>	<b>911,668</b>	<b>32.1%</b>	<b>2,839,666</b>	<b>100.0%</b>

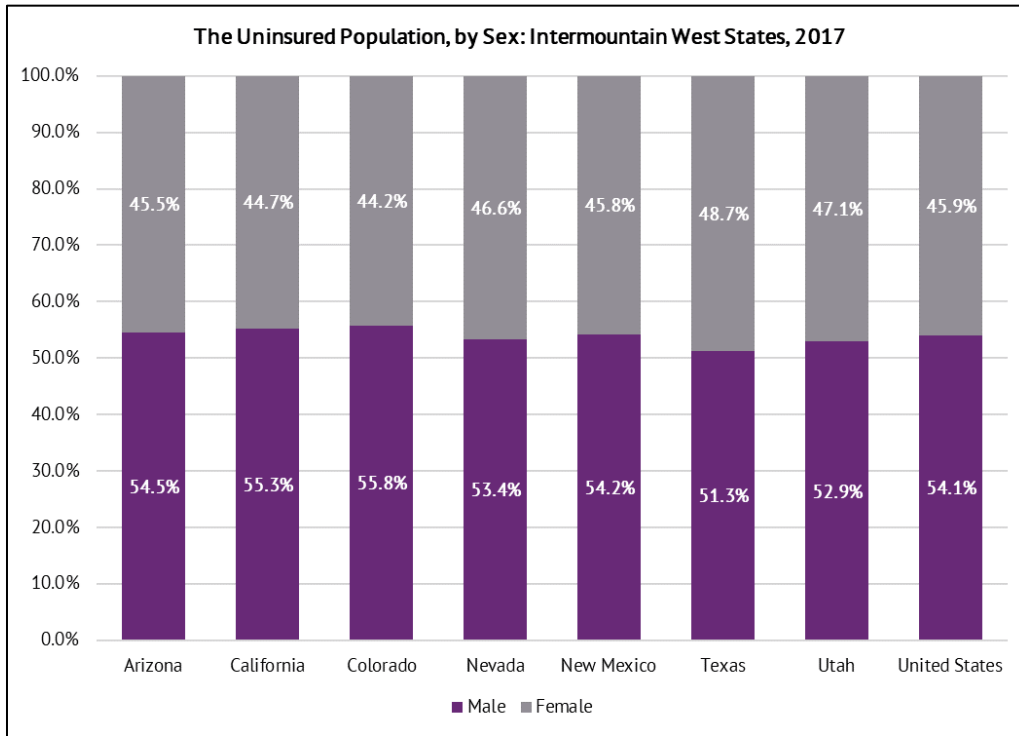
Note: Percentages may not sum to 100 due to rounding. Universe is population for whom poverty status is determined.

## Appendix B: Demographic, Social, and Economic Characteristics of the Uninsured in the Intermountain West States

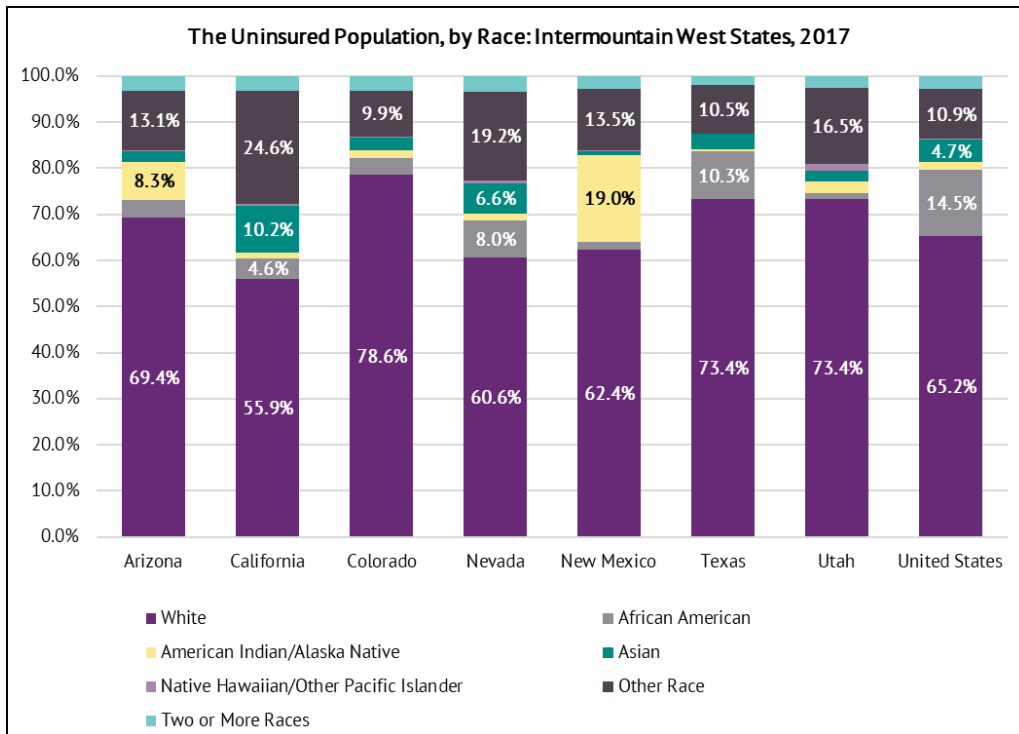
### Age



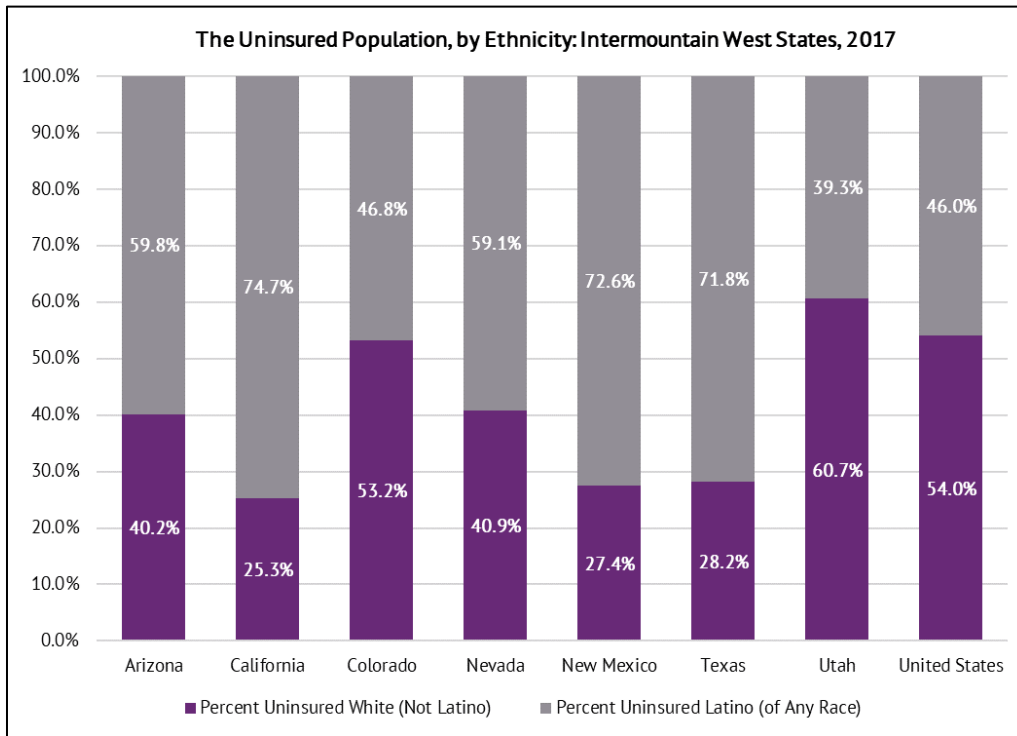
*Sex*



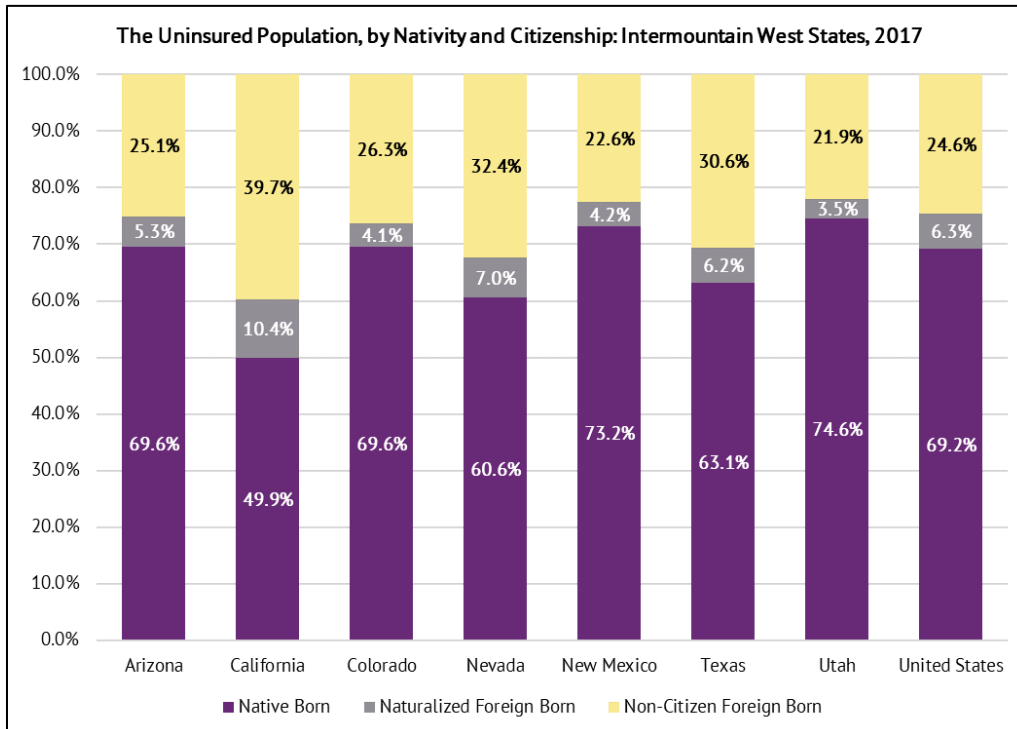
*Race*



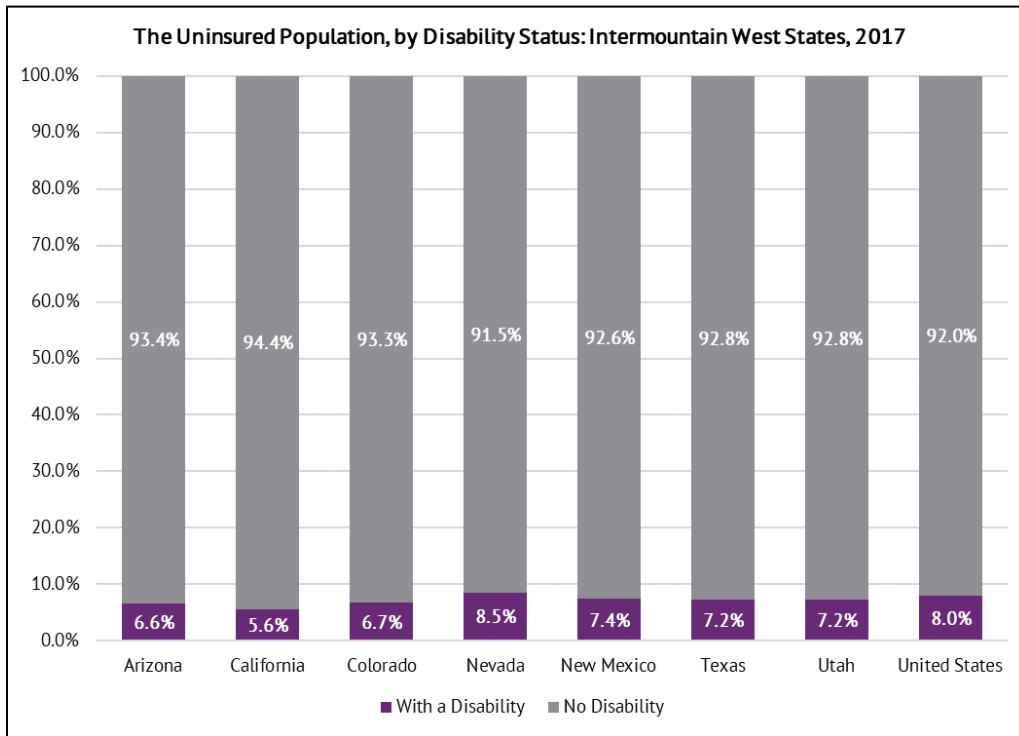
*Ethnicity*



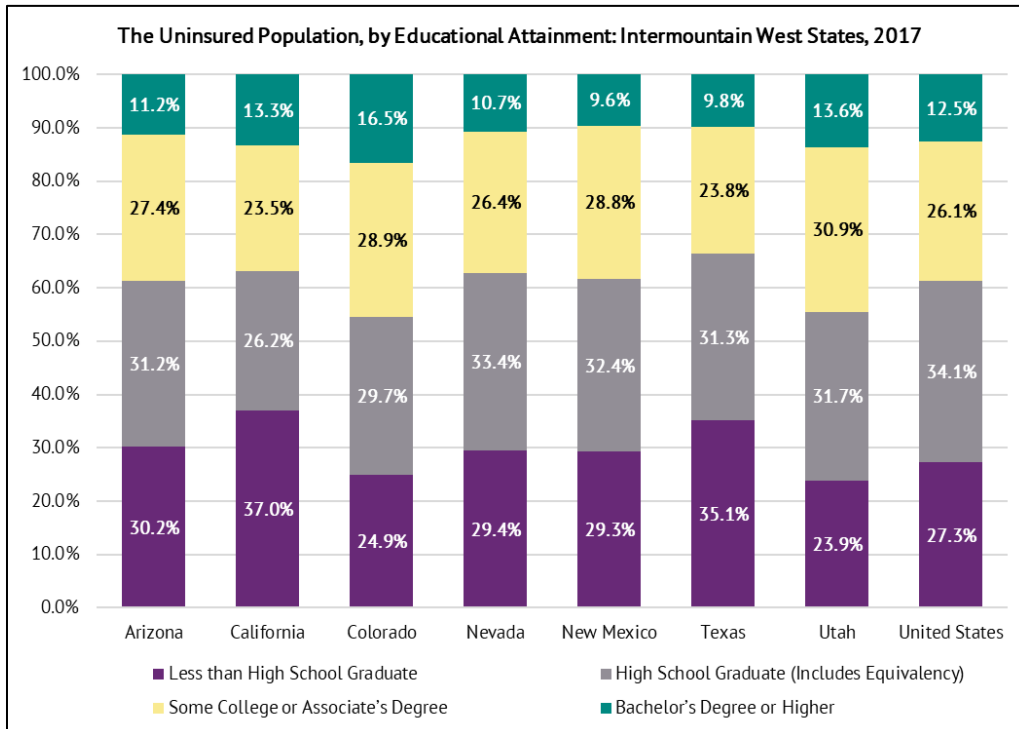
*Nativity and Citizenship*



*Disability Status*

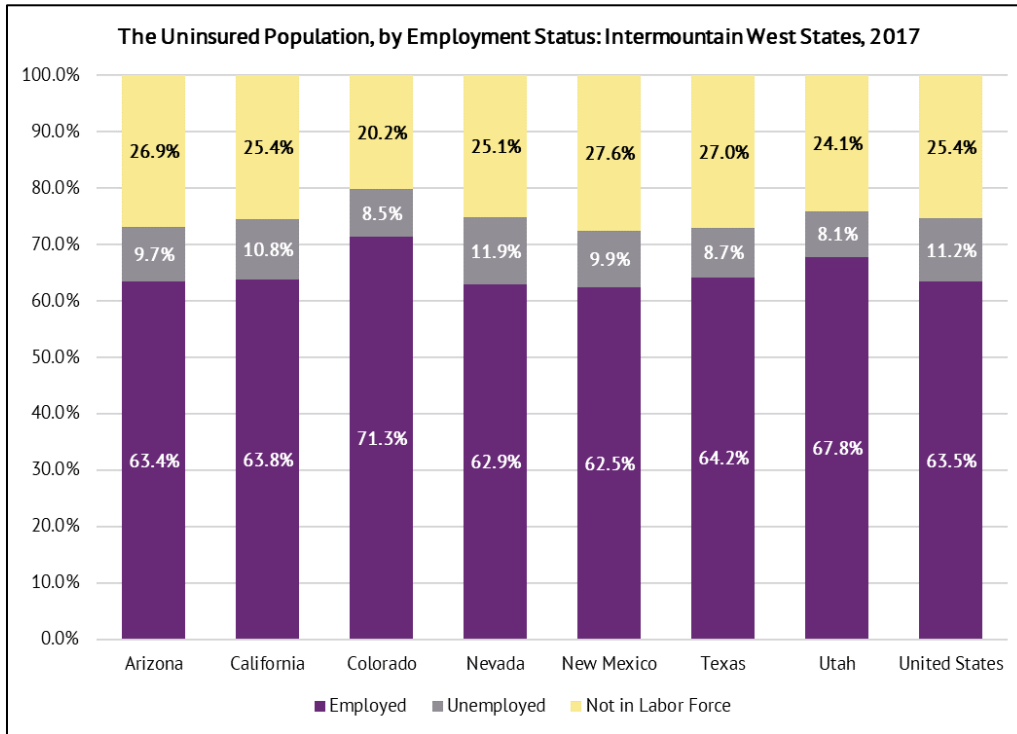


*Educational Attainment*

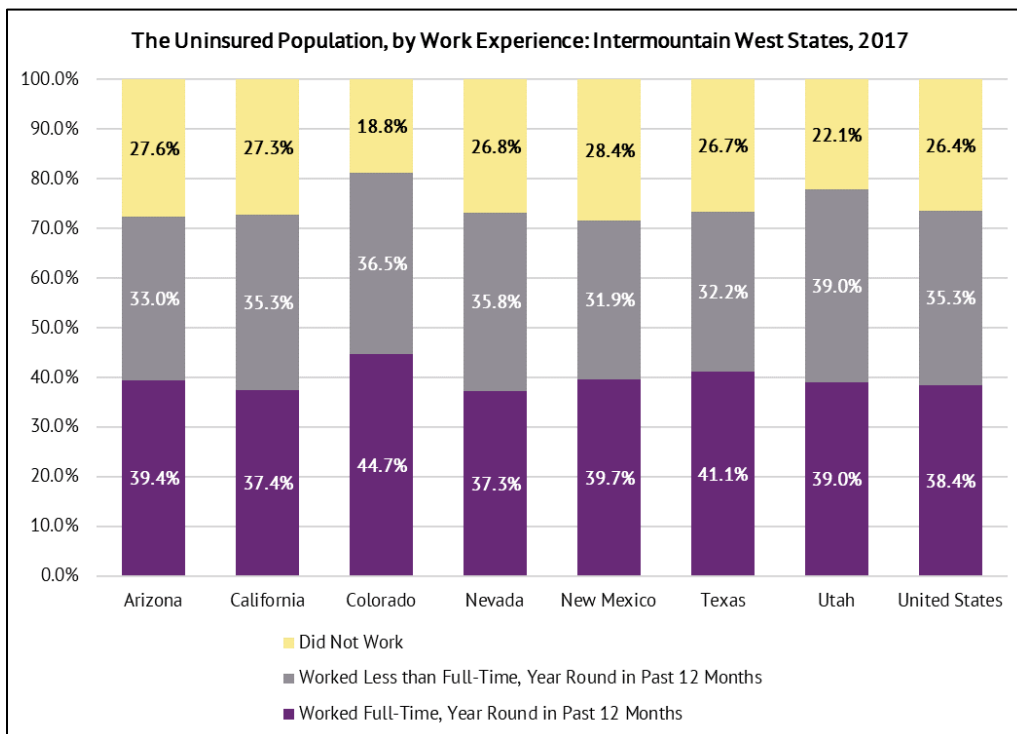




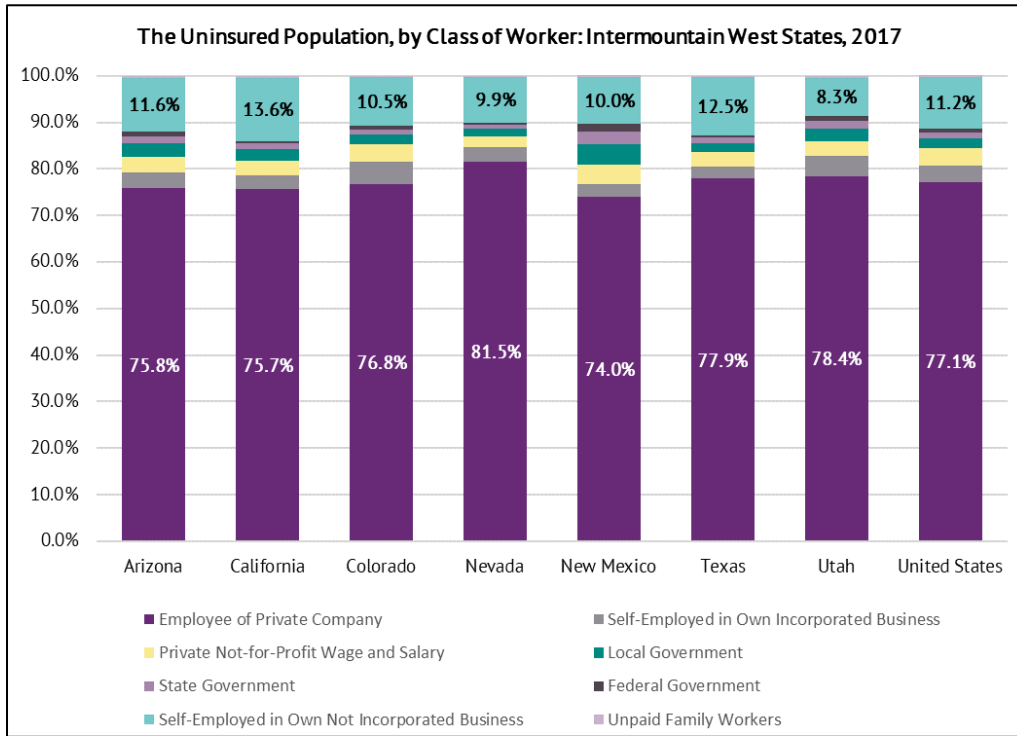
*Employment Status*



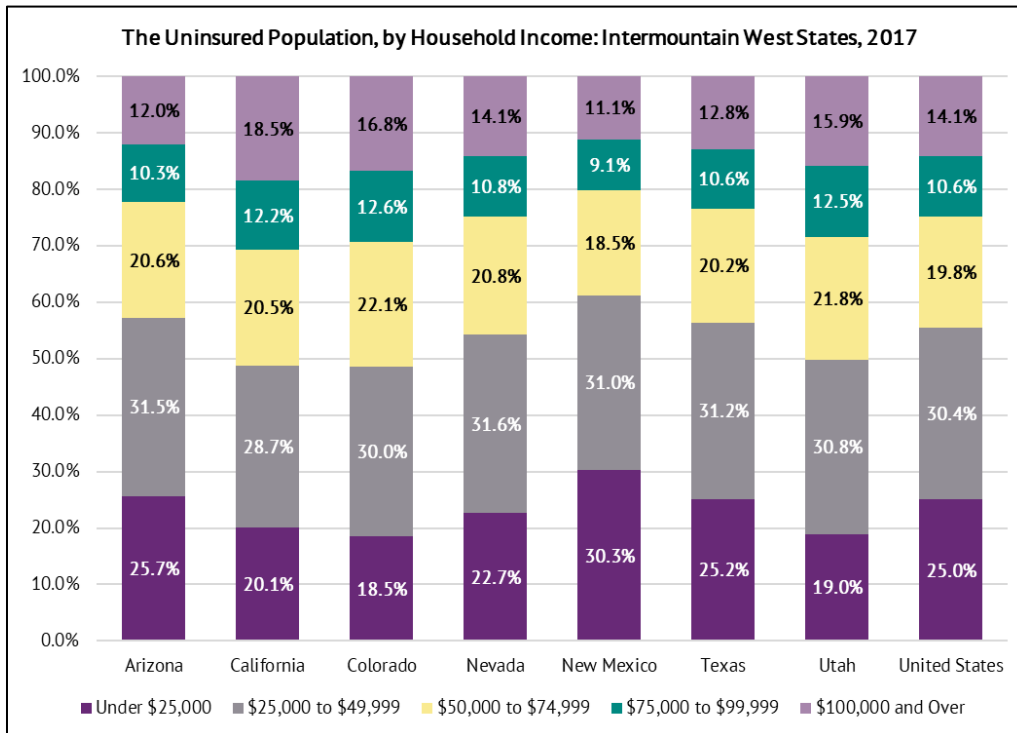
*Work Experience*



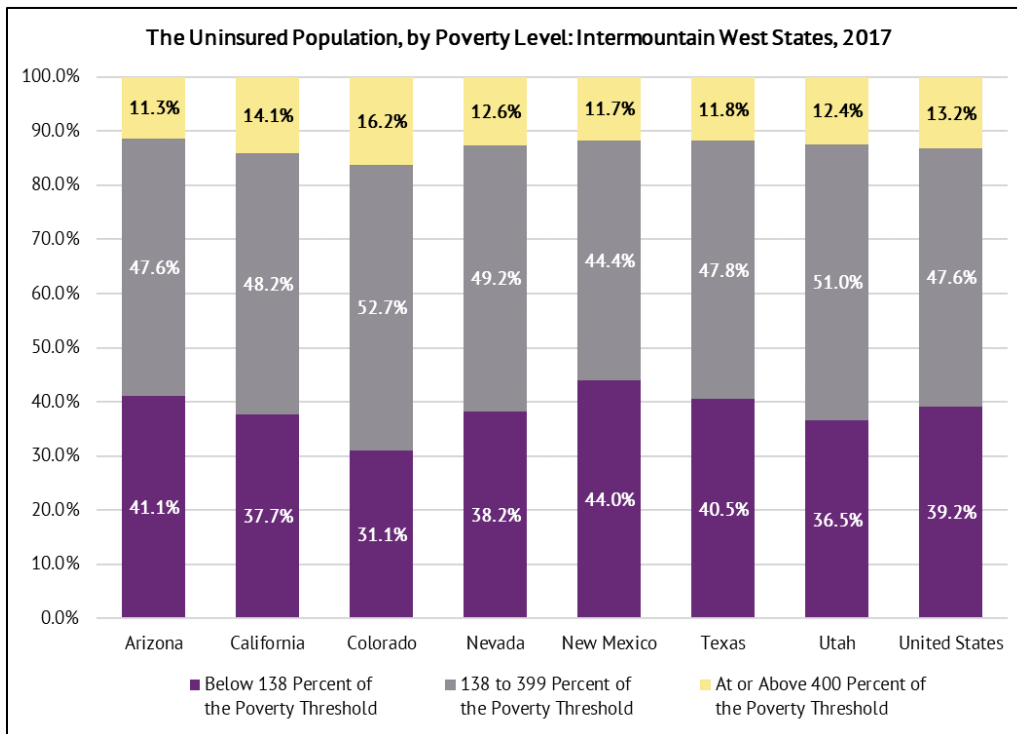
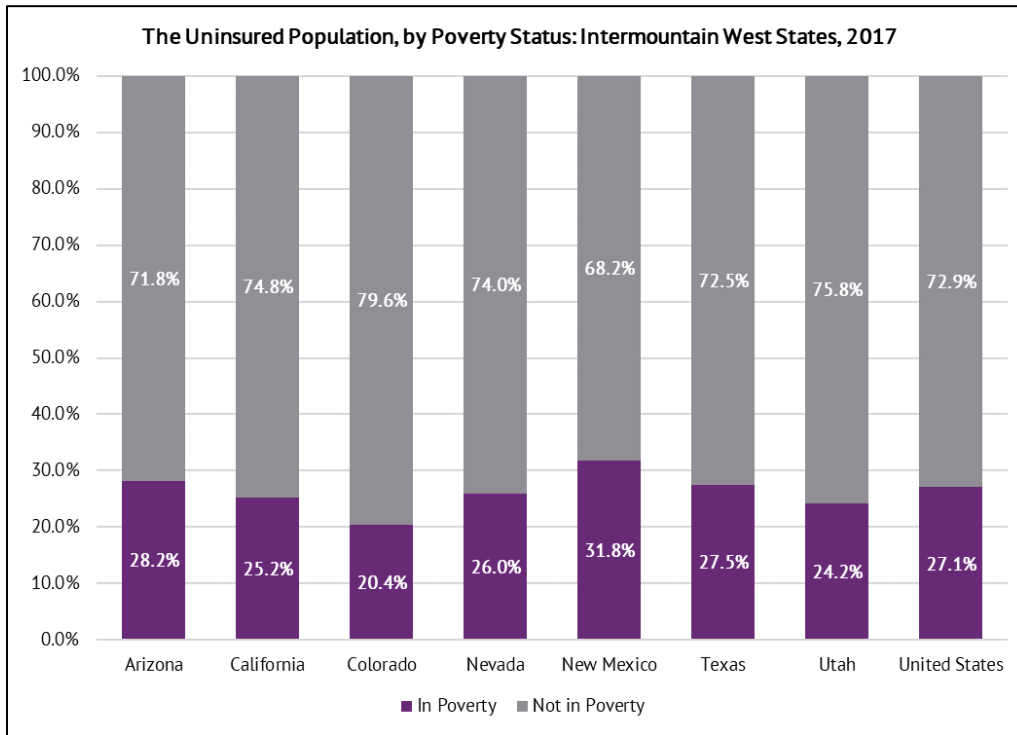
*Class of Worker*



*Household Income*



Poverty



## References

- <sup>1</sup> On full ACA implementation, see: Charles Courtemanche, James Marton, and Aaron Yelowitz. 2016. “Who Gained Insurance Coverage in 2014, the First Year of Full ACA Implementation?” *Health Economics*. Vol. 25, no. 6. Available: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5071696/>. Data on number of uninsured Americans in 2013 obtained from the American Community Survey.
- <sup>2</sup> American Community Survey.
- <sup>3</sup> On the attribution of health insurance coverage gains to the ACA, see: Henry J. Kaiser Family Foundation. “Key Facts about the Uninsured Population.” December 7, 2018. Available: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.
- <sup>4</sup> Henry J. Kaiser Family Foundation. “Key Facts about the Uninsured Population.” December 7, 2018. Available: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.
- <sup>5</sup> Paul Fronstin. “2018 Edition – California’s Uninsured.” California Health Care Foundation | Employee Benefit Research Institute. August 6, 2018. Available: <https://www.chcf.org/publication/2018-edition-californias-uninsured-progress-universal-coverage/>; Peter Newell. 2019. “Reaching the Five Percent: A Profile of Western and Central New Yorkers Without Health Coverage.” Health Foundation for Western & Central New York | United Hospital Fund. Available: [https://uhfnyc.org/media/filer\\_public/eb/2b/eb2bab4d-9575-4330-9853-2bbe2fbf442d/uninsured-westerncentralny-20190423.pdf](https://uhfnyc.org/media/filer_public/eb/2b/eb2bab4d-9575-4330-9853-2bbe2fbf442d/uninsured-westerncentralny-20190423.pdf); Brendan Riley. “Profiling North Carolina’s Uninsured: How Expanding Medicaid Can Make a Difference.” North Carolina Justice Center. January 29, 2019. Available: <https://www.ncjustice.org/publications/profiling-north-carolinas-uninsured-how-expanding-medicaid-can-make-a-difference/>; and Laura Skopec and Joshua Aarons. 2018. “A Profile of Virginia’s Uninsured, 2016.” Urban Insitute. Prepared for The Virginia Health Care Foundation. Available: <http://www.vhcf.org/wp-content/uploads/2018/03/Profile-of-Virginias-Uninsured-28Feb2018.pdf>.
- <sup>6</sup> Megan Messerly. “Nevada Ranks Near Last in Overall Health Care Despite Gains in Number of Insured Adults, Children.” *The Nevada Independent*. June 12, 2019. Available: <https://thenevadaindependent.com/article/nevada-ranks-near-last-in-overall-health-care-despite-gains-in-number-of-insured-adults-children>.
- <sup>7</sup> Assemblyman Michael C. Sprinkle, Chairman, Assembly Committee on Health and Human Services. 79<sup>th</sup> Session. “Minutes of the Meeting of the Assembly Committee on Health and Human Services.” May 12, 2017. Available: <https://www.leg.state.nv.us/Session/79th2017/Minutes/Assembly/HHS/Final/1096.pdf>.
- <sup>8</sup> Henry J. Kaiser Family Foundation. “Key Facts about the Uninsured Population.” December 7, 2018. Available: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.
- <sup>9</sup> Henry J. Kaiser Family Foundation. “Key Facts about the Uninsured Population.” December 7, 2018. Available: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.
- <sup>10</sup> Texas Alliance for Health Care. 2019. “The Impact of Uninsurance on Texas’ Economy.” Available: [http://wrgh.org/docs/The\\_Impact\\_of\\_Uninsurance\\_on\\_Texas\\_Economy\\_20190108.pdf](http://wrgh.org/docs/The_Impact_of_Uninsurance_on_Texas_Economy_20190108.pdf).
- <sup>11</sup> Henry J. Kaiser Family Foundation. “Key Facts about the Uninsured Population.” December 7, 2018. Available: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.
- <sup>12</sup> Texas Alliance for Health Care. 2019. “The Impact of Uninsurance on Texas’ Economy.” Available: [http://wrgh.org/docs/The\\_Impact\\_of\\_Uninsurance\\_on\\_Texas\\_Economy\\_20190108.pdf](http://wrgh.org/docs/The_Impact_of_Uninsurance_on_Texas_Economy_20190108.pdf).
- <sup>13</sup> Medicaid and CHIP Payment and Access Commission. 2019. “Report to Congress on Medicaid and CHIP.” Available: <https://www.macpac.gov/wp-content/uploads/2019/03/March-2019-Report-to-Congress-on-Medicaid-and-CHIP.pdf>.
- <sup>14</sup> Teresa A. Coughlin, John Holahan, Kyle Caswell, and Megan McGrath. “Uncompensated Care for the Uninsured in 2013: A Detailed Examination.” Henry J. Kaiser Family Foundation. May 30, 2014. Available: <https://www.kff.org/report-section/uncompensated-care-for-the-uninsured-in-2013-a-detailed-examination-sources-of-funding-for-uncompensated-care/>.
- <sup>15</sup> Texas Alliance for Health Care. 2019. “The Impact of Uninsurance on Texas’ Economy.” Available: [http://wrgh.org/docs/The\\_Impact\\_of\\_Uninsurance\\_on\\_Texas\\_Economy\\_20190108.pdf](http://wrgh.org/docs/The_Impact_of_Uninsurance_on_Texas_Economy_20190108.pdf).
- <sup>16</sup> U.S. Department of Commerce, Bureau of the Census. “American Community Survey (ACS): About the American Community Survey.” Available: <https://www.census.gov/programs-surveys/acs/about.html>; and U.S. Department of Commerce, Bureau of the Census. “American Community Survey (ACS): Subjects Included in the Survey.” Available: <https://www.census.gov/programs-surveys/acs/guidance/subjects.html>.
- <sup>17</sup> U.S. Department of Commerce, Bureau of the Census. “American Community Survey (ACS): 2018 Data Release New and Notable.” Available: [https://www.census.gov/programs-surveys/acs/news/data-releases/2018/release.html#par\\_text\\_image](https://www.census.gov/programs-surveys/acs/news/data-releases/2018/release.html#par_text_image).

- <sup>18</sup> On the increase in the number of uninsured people in 2017, see: Henry J. Kaiser Family Foundation. “Key Facts about the Uninsured Population.” December 7, 2018. Available: <https://www.kff.org/uninsured/fact-sheet/key-facts-about-the-uninsured-population/>.
- <sup>19</sup> U.S. Department of Commerce, Bureau of the Census. 2018. “Understanding and Using American Community Survey Data: What All Data Users Need to Know.” Available: [https://www.census.gov/content/dam/Census/library/publications/2018/acs/acs\\_general\\_handbook\\_2018.pdf](https://www.census.gov/content/dam/Census/library/publications/2018/acs/acs_general_handbook_2018.pdf).
- <sup>20</sup> U.S. Department of Commerce, Bureau of the Census. “American Community Survey Multiyear Accuracy of the Data (5-year 2013-2017).” Available: [https://www2.census.gov/programs-surveys/acs/tech\\_docs/accuracy/MultiyearACSAccuracyofData2017.pdf?#](https://www2.census.gov/programs-surveys/acs/tech_docs/accuracy/MultiyearACSAccuracyofData2017.pdf?#).
- <sup>21</sup> U.S. Department of Commerce, Bureau of the Census. 2018. “Understanding and Using American Community Survey Data: What All Data Users Need to Know.” Available: [https://www.census.gov/content/dam/Census/library/publications/2018/acs/acs\\_general\\_handbook\\_2018.pdf](https://www.census.gov/content/dam/Census/library/publications/2018/acs/acs_general_handbook_2018.pdf).
- <sup>22</sup> U.S. Department of Commerce, Bureau of the Census. “American Community Survey Multiyear Accuracy of the Data (5-year 2013-2017).” Available: [https://www2.census.gov/programs-surveys/acs/tech\\_docs/accuracy/MultiyearACSAccuracyofData2017.pdf?#](https://www2.census.gov/programs-surveys/acs/tech_docs/accuracy/MultiyearACSAccuracyofData2017.pdf?#).
- <sup>23</sup> Brendan Riley. “Profiling North Carolina’s Uninsured: How Expanding Medicaid Can Make a Difference.” North Carolina Justice Center. January 29, 2019. Available: <https://www.ncjustice.org/publications/profiling-north-carolinas-uninsured-how-expanding-medicaid-can-make-a-difference/>; and Deborah Bachrach and Jocelyn Guyer. 2013. “Advance Premium Tax Credits and Cost-Sharing Reductions: A Primer for Assistors.” Manatt Health Solutions | Robert Wood Johnson Foundation. Available: [http://www.orpca.org/OEW\\_Enrollment/Premium-Tax-Credits-and-Cost-Sharing-Reductions.pdf](http://www.orpca.org/OEW_Enrollment/Premium-Tax-Credits-and-Cost-Sharing-Reductions.pdf).
- <sup>24</sup> U.S. Department of Commerce, Bureau of the Census. “Nevada and Idaho Are the Nation’s Fastest-Growing States.” Release Number CB18-193. December 19, 2018. Available: <https://www.census.gov/newsroom/press-releases/2018/estimates-national-state.html>.
- <sup>25</sup> Henry J. Kaiser Family Foundation. “Status of State Medicaid Expansion Decisions: Interactive Map.” May 13, 2019. Available: <https://www.kff.org/medicaid/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/>.
- <sup>26</sup> Nevada State Office of Rural Health. 2019. “Nevada Rural and Frontier Health Data Book – Ninth Edition.” Available: [https://med.unr.edu/Documents/med/statewide/reports/Nevada\\_Rural\\_and\\_Frontier\\_Health\\_Data\\_Book\\_-\\_9th\\_Edition\(0\)\(0\).pdf](https://med.unr.edu/Documents/med/statewide/reports/Nevada_Rural_and_Frontier_Health_Data_Book_-_9th_Edition(0)(0).pdf).
- <sup>27</sup> Centers for Medicare & Medicaid Services. “Children’s Health Coverage Programs in Nevada.” Available: <https://www.insurekidsnow.gov/coverage/nv/index.html>; Nevada Health Link. “Family Scenarios.” Available: <https://www.nevadahealthlink.com/start-here/about-the-aca/family-scenarios/>; Henry J. Kaiser Family Foundation. “Medicaid and CHIP Income Eligibility Limits for Children as a Percent of the Federal Poverty Level.” Available: <https://www.kff.org/health-reform/state-indicator/medicaid-and-chip-income-eligibility-limits-for-children-as-a-percent-of-the-federal-poverty-level/>; and Patricia Barry. “Do You Qualify for Medicare?” *AARP Bulletin*. March 1, 2016. Available: <https://www.aarp.org/health/medicare-insurance/info-04-2011/medicare-eligibility.html>.
- <sup>28</sup> U.S. Department of Health & Human Services. “Young Adult Coverage.” Available: <https://www.hhs.gov/healthcare/about-the-aca/young-adult-coverage/index.html>.
- <sup>29</sup> On Special Enrollment for “age outs,” see: U.S. Department of Labor, Employee Benefits Security Administration. “Young Adults and the Affordable Care Act: Protecting Young Adults and Eliminating Burdens on Businesses and Families FAQs.” Available: <https://www.dol.gov/agencies/ebsa/about-ebsa/our-activities/resource-center/faqs/young-adult-and-aca>.
- <sup>30</sup> Erin Hemlin. 2017. “What’s Happened to Millennials since the ACA? Unprecedented Coverage & Improved Access to Benefits.” Young Invincibles. Available: <http://younginvincibles.org/wp-content/uploads/2017/05/YI-Health-Care-Brief-2017.pdf>.
- <sup>31</sup> Raoul Lowery Contreras. “Why So Many Hispanics Are Still Uninsured.” *The Hill*. March 10, 2017. Available: <https://thehill.com/blogs/pundits-blog/healthcare/323380-why-so-many-hispanics-are-still-uninsured>.
- <sup>32</sup> Henry J. Kaiser Family Foundation. “Health Coverage of Immigrants.” February 15, 2019. Available: <https://www.kff.org/disparities-policy/fact-sheet/health-coverage-of-immigrants/>.
- <sup>33</sup> American Community Survey.
- <sup>34</sup> Raoul Lowery Contreras. “Why So Many Hispanics Are Still Uninsured.” *The Hill*. March 10, 2017. Available: <https://thehill.com/blogs/pundits-blog/healthcare/323380-why-so-many-hispanics-are-still-uninsured>.
- <sup>35</sup> Centers for Medicare & Medicaid Services. “Coverage for Lawfully Present Immigrants.” Available: <https://www.healthcare.gov/immigrants/lawfully-present-immigrants/>.
- <sup>36</sup> Centers for Medicare & Medicaid Services. “Coverage for Lawfully Present Immigrants.” Available: <https://www.healthcare.gov/immigrants/lawfully-present-immigrants/>.

- <sup>37</sup> Henry J. Kaiser Family Foundation. “Medicaid/CHIP Coverage of Lawfully-Residing Immigrant Children and Pregnant Women.” Available: <https://www.kff.org/health-reform/state-indicator/medicaid-chip-coverage-of-lawfully-residing-immigrant-children-and-pregnant-women>.
- <sup>38</sup> Samantha Artiga and Maria Diaz. “Health Coverage and Care of Undocumented Immigrants.” Henry J. Kaiser Family Foundation. July 15, 2019. Available: <https://www.kff.org/disparities-policy/issue-brief/health-coverage-and-care-of-undocumented-immigrants/>.
- <sup>39</sup> Pew Research Center. “Unauthorized Immigrant Population Trends for States, Birth Countries and Regions.” June 12, 2019. Available: <https://www.pewhispanic.org/interactives/unauthorized-trends/>.
- <sup>40</sup> Brendan Riley. 2019. “Profiling North Carolina’s Uninsured: How Expanding Medicaid Can Make a Difference.” North Carolina Justice Center Health Advocacy Project. Available: [https://www.ncjustice.org/wp-content/uploads/2019/01/HAP-Report\\_How-Expanding-Medicaid-Can-Make-a-Difference.pdf](https://www.ncjustice.org/wp-content/uploads/2019/01/HAP-Report_How-Expanding-Medicaid-Can-Make-a-Difference.pdf).
- <sup>41</sup> Minnesota Department of Health. 2018. “Minnesota’s Uninsured in 2017: Rates and Characteristics.” Minnesota Department of Health/Health Economics Program | University of Minnesota School of Public Health | State Health Access Data Assistance Center (SHADAC). Available: <https://www.health.state.mn.us/data/economics/docs/mnha2017unins.pdf>.
- <sup>42</sup> Paul N. Van de Water. “Raising Threshold for Health Reform’s Employer Mandate Would Put More Workers at Risk.” Center on Budget and Policy Priorities. September 12, 2018. Available: <https://www.cbpp.org/research/health/raising-threshold-for-health-reforms-employer-mandate-would-put-more-workers-at-risk>.
- <sup>43</sup> Sara R. Collins and David C. Radley. “The Cost of Employer Insurance Is a Growing Burden for Middle-Income Families.” Commonwealth Fund. December 7, 2018. Available: <https://www.commonwealthfund.org/publications/issue-briefs/2018/dec/cost-employer-insurance-growing-burden-middle-income-families>.
- <sup>44</sup> Brendan Riley. “Profiling North Carolina’s Uninsured: How Expanding Medicaid Can Make a Difference.” North Carolina Justice Center. January 29, 2019. Available: <https://www.ncjustice.org/publications/profiling-north-carolinas-uninsured-how-expanding-medicaid-can-make-a-difference/>.
- <sup>45</sup> Marcus Dillender, Carolyn Heinrich, and Susan Houseman. 2016. “Effects of the Affordable Care Act on Part-Time Employment: Early Evidence.” Available: [https://my.vanderbilt.edu/carolynheinrich/files/2016/06/DHH\\_Effects-ACA-on-Part-time-employment-6-9-16.pdf](https://my.vanderbilt.edu/carolynheinrich/files/2016/06/DHH_Effects-ACA-on-Part-time-employment-6-9-16.pdf).
- <sup>46</sup> Nevada Department of Employment, Training & Rehabilitation. “Industry Employment by Sector CES (Seasonally Adjusted) - June 2019.” Available: <http://nevadaworkforce.com/industry-employment-by-sector>.
- <sup>47</sup> State Health Access Data Assistance Center (SHADAC). 2017. “Percent of Workers in Establishments that Offer Coverage (Nevada).” Available: <http://statehealthcompare.shadac.org/table/155/percent-of-workers-in-establishments-that-offer-coverage-by-firm-size#30/80.81/24/192>.
- <sup>48</sup> Brendan Riley. “Profiling North Carolina’s Uninsured: How Expanding Medicaid Can Make a Difference.” North Carolina Justice Center. January 29, 2019. Available: <https://www.ncjustice.org/publications/profiling-north-carolinas-uninsured-how-expanding-medicaid-can-make-a-difference/>.
- <sup>49</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. “Characteristics of the Remaining Uninsured: An Update.” Urban Institute | Robert Wood Johnson Foundation. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).
- <sup>50</sup> U.S. Department of Health and Human Services. “Annual Update of the HHS Poverty Guidelines; Notice by the Health and Human Services Department on 01/31/2017.” *Federal Register*. <https://www.federalregister.gov/documents/2017/01/31/2017-02076/annual-update-of-the-hhs-poverty-guidelines>.
- <sup>51</sup> On qualification for different types of coverage within families, see: Nevada Health Link. “Family Scenarios.” Available: <https://www.nevadahealthlink.com/start-here/about-the-aca/family-scenarios/>.
- <sup>52</sup> Medicaid and CHIP Payment and Access Commission. “Medicaid Expansion to the New Adult Group.” Available: <https://www.macpac.gov/subtopic/medicaid-expansion/>.
- <sup>53</sup> Nevada Health Link. “Tax Credits & Subsidies.” Available: <https://www.nevadahealthlink.com/start-here/about-the-aca/financial-assistance/>.
- <sup>54</sup> Nevada Health Link. “Tax Credits & Subsidies.” Available: <https://www.nevadahealthlink.com/start-here/about-the-aca/financial-assistance/>; Nevada Health Link. “Income-Based Costs.” Available: <https://www.nevadahealthlink.com/start-here/income-based-costs/>; Nevada Health Link. “Advanced Premium Tax Credit (APTC).” Available: <https://www.nevadahealthlink.com/glossary/advance-premium-tax-credit-aptc/>; and Henry J. Kaiser Family Foundation. “Explaining Health Care Reform: Questions About Health Insurance Subsidies.” November 20, 2018. Available: <https://www.kff.org/health-reform/issue-brief/explaining-health-care-reform-questions-about-health/>.
- <sup>55</sup> U.S. Department of the Treasury, Internal Revenue Service. “Eligibility for the Premium Tax Credit.” Available: <https://www.irs.gov/affordable-care-act/individuals-and-families/eligibility-for-the-premium-tax-credit>.

<sup>56</sup> Nancy E. Brune, Meredith A. Levine, and Jaewon Kim. 2019. "A Step Up: Economic and Financial Security for Nevada's Families." Guinn Center | UNLV Greenspun College of Urban Affairs. Page 17. Available: <https://guinncenter.org/wp-content/uploads/2019/04/Guinn-Brookings-NV-Family-Ec-Report-2019.pdf>.

<sup>57</sup> John Tozzi. "Why Some Americans Are Risking It and Skipping Health Insurance." *Bloomberg*. March 26, 2018. Available: <https://www.bloomberg.com/news/features/2018-03-26/why-some-americans-are-risking-it-and-skipping-health-insurance>.

<sup>58</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. "Characteristics of the Remaining Uninsured: An Update." Urban Institute | Robert Wood Johnson Foundation. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).

<sup>59</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. "Characteristics of the Remaining Uninsured: An Update." Urban Institute | Robert Wood Johnson Foundation. Page 9. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).

<sup>60</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. "Characteristics of the Remaining Uninsured: An Update." Urban Institute | Robert Wood Johnson Foundation. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).

<sup>61</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. "Characteristics of the Remaining Uninsured: An Update." Urban Institute | Robert Wood Johnson Foundation. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).

<sup>62</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. "Characteristics of the Remaining Uninsured: An Update." Urban Institute | Robert Wood Johnson Foundation. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).

<sup>63</sup> U.S. Department of the Treasury, Internal Revenue Service. "Rev. Proc. 2016-24: 26 CFR 601.105: Examination of Returns and Claims for Refund, Credit, or Abatement; Determination of Correct Tax Liability." Available: <https://www.irs.gov/pub/irs-drop/rp-16-24.pdf>.

<sup>64</sup> Linda J. Blumberg, John Holahan, Michael Karpman, and Caroline Elmendorf. 2018. "Characteristics of the Remaining Uninsured: An Update." Urban Institute | Robert Wood Johnson Foundation. Page 9. Available: [https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update\\_2.pdf](https://www.urban.org/sites/default/files/publication/98764/2001914-characteristics-of-the-remaining-uninsured-an-update_2.pdf).

<sup>65</sup> Devan Cole and Sarah Moon. "California Gov Signs Health Care Bill Extending Coverage to Some Undocumented Residents." *CNN*. July 10, 2019. Available: <https://www.cnn.com/2019/07/10/politics/california-gavin-newsom-medicaid-coverage-undocumented-immigrants/index.html>.

<sup>66</sup> Centers for Medicare & Medicaid Services. "Basic Health Program." Available: <https://www.medicaid.gov/basic-health-program/index.html>.

<sup>67</sup> American Community Survey.

<sup>68</sup> Guinn Center conversation with health insurance policy expert.

<sup>69</sup> Nevada State Legislature. 80<sup>th</sup> (2019) Session. "Senate Concurrent Resolution No. 10: As Enrolled." Available: [https://www.leg.state.nv.us/Session/80th2019/Bills/SCR/SCR10\\_EN.pdf](https://www.leg.state.nv.us/Session/80th2019/Bills/SCR/SCR10_EN.pdf).

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