

**Table 13 - MEPS****Medical Utilization and Expenditures of the Uninsured: Non Elderly Population****Calendar Year 2002 - Uninsured Point in Time**

Category	Population (Millions)	Distribution of Population	Uninsured (Millions)	Distribution of Uninsured	Percent Uninsured by Category
TOTAL POPULATION	253.7	100.0%	47.7	100.0%	18.8%
TOTAL HEALTH CARE SPENDING					
None	41.5	16.4%	17.3	36.2%	41.6%
\$1-100	21.1	8.3%	5.2	11.0%	24.8%
\$100-250	30.7	12.1%	5.8	12.1%	18.8%
\$250-500	32.3	12.7%	5.2	11.0%	16.2%
\$500-1000	35.7	14.1%	4.5	9.4%	12.6%
\$1000-2500	43.1	17.0%	4.9	10.3%	11.4%
\$2,500-\$5,000	24.4	9.6%	2.7	5.6%	10.9%
More than \$5,000	24.9	9.8%	2.2	4.5%	8.7%
SELF/OUT OF POCKET SPENDING					
None	60.1	23.7%	19.4	40.7%	32.3%
\$1-100	62.5	24.6%	8.0	16.7%	12.7%
\$100-250	40.1	15.8%	6.0	12.6%	15.0%
\$250-500	33.2	13.1%	5.0	10.4%	15.0%
\$500-1000	28.9	11.4%	4.2	8.8%	14.5%
\$1000-2500	20.6	8.1%	3.5	7.3%	17.0%
More than \$2500	8.3	3.3%	1.7	3.5%	20.3%
HOSPITAL SPENDING*					
None	239.2	94.3%	45.7	95.9%	19.1%
\$1-2,500	3.0	1.2%	0.7	1.5%	23.5%
\$2,500-5,000	4.0	1.6%	0.4	0.9%	10.6%
\$5,000-10,000	3.9	1.5%	0.5	1.1%	12.9%
\$10,000-50,000	3.2	1.3%	0.3	0.6%	9.2%
AMBULATORY VISITS					
None	71.8	28.3%	23.2	48.6%	32.3%
1-2	73.0	28.8%	12.2	25.6%	16.7%
3-5	47.9	18.9%	6.1	12.9%	12.8%
6 or more	61.0	24.0%	6.1	12.9%	10.1%
ER/ED VISITS					
None	220.2	86.8%	41.8	87.5%	19.0%
1	25.7	10.1%	4.5	9.5%	17.7%
2 or more	7.8	3.1%	1.4	2.9%	17.9%
HOSPITAL DISCHARGES					
None	238.9	94.2%	45.5	95.5%	19.1%
1	12.2	4.8%	1.9	3.9%	15.1%
2 or more	2.6	1.0%	0.3	0.7%	12.1%

\* Annual hospital expenditures are below \$50,000 for virtually all (99.7 percent or more) of the total population and the population of uninsured persons.

These estimates are based on ERIU tabulations of 2002 Medical Expenditure Panel Survey (MEPS) data collected by the Agency for Healthcare Research and Quality (AHRQ). The MEPS employs an overlapping panel design and collects data on two calendar years for each respondent. The tabulations reported here are based on responses to interview Rounds 3, 4, and 5 of Panel 6 and Rounds 1, 2, and 3 of Panel 7, which cover calendar year 2002 for both panels. Coverage status is obtained at the initial interview. At each subsequent interview, respondents are asked about whether their coverage has changed since the last interview and, if so, how and when. Respondents report whether they were covered by any public or private source of health insurance (Medicare, Medicaid, SCHIP, TRICARE/CHAMPUS, other public coverage, employment-based private, other private health insurance). Respondents are considered uninsured if they respond “no” to all of the coverage options; they are not asked directly if they are uninsured. A person may gain or lose coverage during a year and these data permit estimates of the number lacking coverage at a particular point in time, at some time during the year, and throughout the entire year. We label those who are without health insurance for the entire year as “all-year uninsured,” and those without health insurance for at least one month and up to twelve months as “ever uninsured.” The “point-in-time uninsured” estimates include those without coverage in the first round of the calendar year (Round 3 for those who entered the survey in 2001, and Round 1 for those who entered the survey in 2002).

For further discussion of issues related to counting the uninsured see "[Counting and Characterizing the Uninsured](#)," by Pamela Farley Short, and ERIU [Research Highlight 1: A Revolving Door: How Individuals Move In and Out of Health Insurance Coverage](#)