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Healthcare Affordability Across the Generations: An Age-30 and Life-Stage Comparison

Prepared by the Ohio Common Ground Research Center

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Executive Summary

This report compares healthcare affordability across five American generations (Silent, Baby Boomer, Generation X, Millennial, and Generation Z) using two complementary methods. Part I compares generations at the same life stage using Census median household income by age-bracket of householder — the income of households actually near a given age. Part II presents the same premium data against all-household median income and against national Medicare and out-of-pocket spending trends, to show how the broader U.S. healthcare financing environment changed over the same period.

Both methods point to the same direction of change: at comparable ages, Millennials have faced a substantially larger share of household income going to family health insurance premiums than Generation X did. The size of that difference depends on which income measure is used — a genuine finding in itself, not a flaw in the analysis — and this report presents both rather than picking one.

This is a Research Center product: it is descriptive, not prescriptive. It documents what the underlying federal and survey data show, states plainly where population, timing, or survey-design limitations affect how a figure should be read and does not recommend any policy response.

Key Findings

- At age 25, on an age-bracket income basis, Millennials spent 30.6%-31.2% of household income on family health insurance premiums, more than double the 14.0% Generation X spent at the same age.
- At age 30, the same comparison shows 29.7%-29.8% for Millennials against 18.7% for Generation X — still a substantial increase, though a smaller one than at age 25.
- The choice of income denominator materially changes the size of the affordability gap: using all-household income instead of age-bracket income can shift a ratio by as much as 8 percentage points for the same premium and year (Generation X at age 50, 2022: 29.4%-30.1% versus 21.6%-22.1%).
- The share of Medicare's total income financed by the payroll tax fell from 64.9% in 1976 to 35.7% in 2022, driven by the growth of Medicare Part B and Part D — financed mainly by beneficiary premiums and general revenue — relative to payroll-tax-funded Part A.
- Nominal household out-of-pocket health spending per capita rose roughly 16-fold between 1966 and 2022; this report has not yet adjusted that figure for inflation.
- Silent and Baby Boomer generations could not be included in the earliest life-stage comparisons because no continuous employer-premium survey data exists before 1996.

1. Purpose

This report presents two complementary comparisons of healthcare affordability across five American generations (Silent, Baby Boomer, Generation X, Millennial, and Generation Z), built from Census Bureau, Centers for Medicare & Medicaid Services (CMS), Agency for Healthcare Research and Quality (AHRQ), and KFF (Kaiser Family Foundation) source data spanning 1966 through 2022.

Part I leads: it compares generations using Census median household income by age-bracket of householder — the income of households near a given age, not the income of every household in the

country. Part II follows, presenting the same premium data against all-household median income and against national financing trends, to show how the broader U.S. healthcare financing environment changed over the same period. The two parts answer related but distinct questions and are kept separate so a reader can see which number answers which question.

Neither part is a fully population-matched measurement. No public source reports employer family health premiums broken out by the age of the insured household, so both parts describe a national premium figure divided by a more or less age-relevant income figure, not a complete household-specific accounting. That limitation is stated wherever it affects how a figure should be read.

PART I — LIFE-STAGE COMPARISON USING AGE-BRACKET HOUSEHOLD INCOME

This part uses Census median household income by age-bracket of householder (Table H-10) rather than all-household median income — the income of households whose head is actually near the age being compared.

2. The Age-Bracket Life-Course Table

Census Table H-10 reports median household income in ten-year age-of-householder brackets (25-34, 35-44, and so on), not single years of age. A 30-year-old's household is therefore assigned the 25-34 bracket median, the closest available Census measure, not an estimate for age 30 specifically. Table H-10 is available for 16 of the 18 calendar years this report tracks; 1961 and 1966 predate the Current Population Survey Annual Social and Economic Supplement series, which begins in 1967. Census's household universe also changed from age 14-and-older to age 15-and-older beginning March 1980, a change that would principally affect the youngest income bracket.

Premium figures for family employer-sponsored health coverage come from two major employer-health-benefit survey sources: AHRQ's Medical Expenditure Panel Survey-Insurance Component (MEPS-IC), which has published a continuous, unbroken national family-premium series since 1996, and KFF's annual Employer Health Benefits Survey, which began in 1999. MEPS-IC surveys private-sector establishments; KFF surveys private and nonfederal public employers, a related but not identical universe. Where both surveys are available for a given year (2003 onward), this report shows the range spanned by the two, rather than treating either as the single correct figure. For 1996 through 2002, MEPS-IC is used alone: KFF's own published historical series carries a documented note that pre-2003 figures were revised in later reports, so this report anchors those years to MEPS-IC's continuous series instead of a KFF vintage that KFF itself describes as superseded.

Generation	Age	Year	Bracket	Age-Bracket Income	Total Family Premium	Worker Contribution	Total Premium %	Worker Contribution %
Silent	60	1996	55-64	\$39,815	\$4,954 (MEPS-IC)	\$1,275	12.4%	3.2%
Boomer	50	2005	45-54	\$62,424	\$10,728-\$10,880*	not confirmed	17.2%-17.4%	not confirmed
Boomer	60	2015	55-64	\$62,802	\$17,322-\$17,545*	\$4,955	27.6%-27.9%	7.9%
Gen X	25	1997	25-34	\$38,174	\$5,332 (MEPS-IC)	\$1,306	14.0%	3.4%

Generation	Age	Year	Bracket	Age-Bracket Income	Total Family Premium	Worker Contribution	Total Premium %	Worker Contribution %
Gen X	30	2002	25-34	\$45,330	\$8,469 (MEPS-IC)	\$1,987	18.7%	4.4%
Gen X	40	2012	35-44	\$63,629	\$15,473-\$15,745*	\$4,316	24.3%-24.7%	6.8%
Gen X	50	2022	45-54	\$101,500	\$21,931-\$22,463*	\$6,106	21.6%-22.1%	6.0%
Millennial	25	2013	25-34	\$52,416	\$16,029-\$16,351*	\$4,565	30.6%-31.2%	8.7%
Millennial	30	2018	25-34	\$65,890	\$19,565-\$19,616*	\$5,547	29.7%-29.8%	8.4%

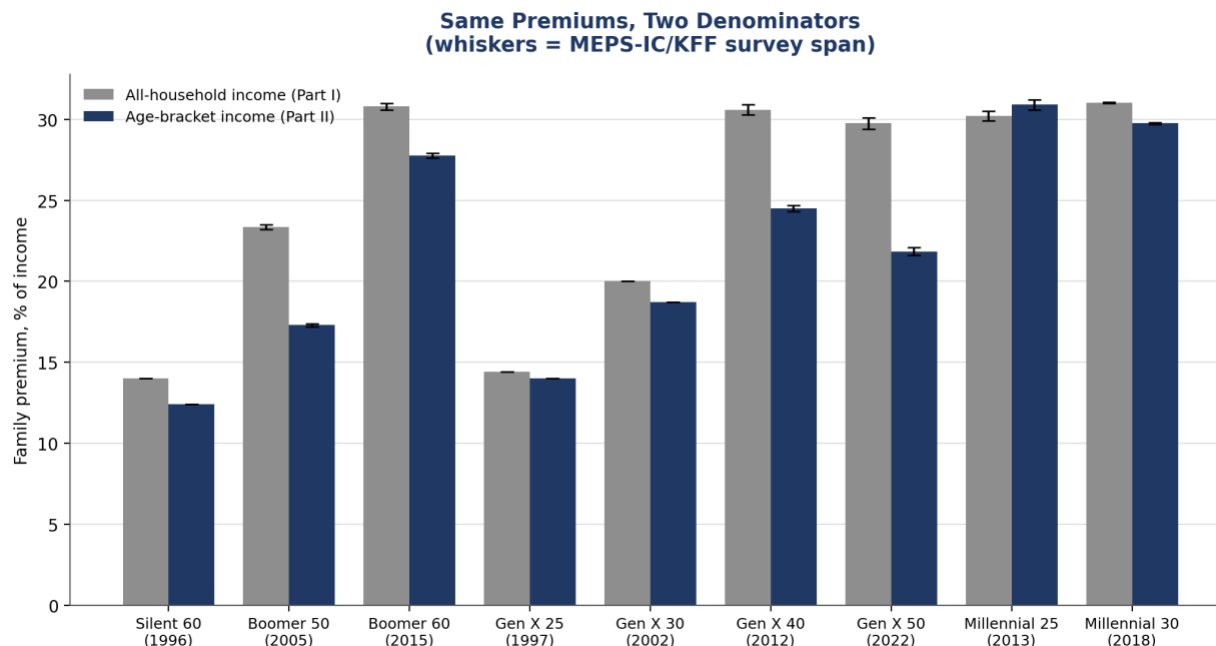
**Ranges show MEPS-IC at one end and KFF at the other, for the same calendar year: AHRQ's federal MEPS-IC survey and KFF's independent Employer Health Benefits Survey, two closely related but not identical measurements; neither is treated as more authoritative than the other.*

The 2002 family premium (\$8,469) is AHRQ's published overall family-premium figure for that year (MEPS-IC Table II.D.1, "Average total family premium per enrolled employee at private-sector establishments that offer health insurance"), matching AHRQ's own Statistical Brief #50, which independently reports the same figure and confirms that the \$1,987 average employee contribution represents 23.5% of it. 1996 and 1997 use the same table series.

Two affordability metrics are shown side by side because they answer different questions. Total premium % of income describes the cost of a family health plan as an element of total employment compensation, including the employer's share. Worker contribution % of income describes the amount a household actually pays directly toward that plan and is the closer measure of direct household cash burden. Both are legitimate, and neither should stand alone: total premium answers "what did family coverage cost as compensation," while worker contribution answers "what did the household actually pay." By the worker-contribution measure, the share of age-bracket income going directly to premium payments roughly doubled between Gen X at age 30 (4.4%) and Millennial at age 30 (8.4%) -- a comparable magnitude of change to the total-premium measure, though a smaller absolute share throughout.

3. The Denominator Finding

Age-bracket income is higher than all-household median income in 8 of the 9 rows above, because the all-household figure includes lower-income retiree and non-working households in a way a working-age bracket largely does not. As a result, the premium-to-income ratio computed on bracket income runs lower than the same ratio computed on all-household income in most rows — sometimes substantially: Gen X at age 50 (2022) falls from a 29.4%-30.1% range on all-household income to a 21.6%-22.1% range on bracket income, roughly an 8-percentage-point difference from the denominator alone.

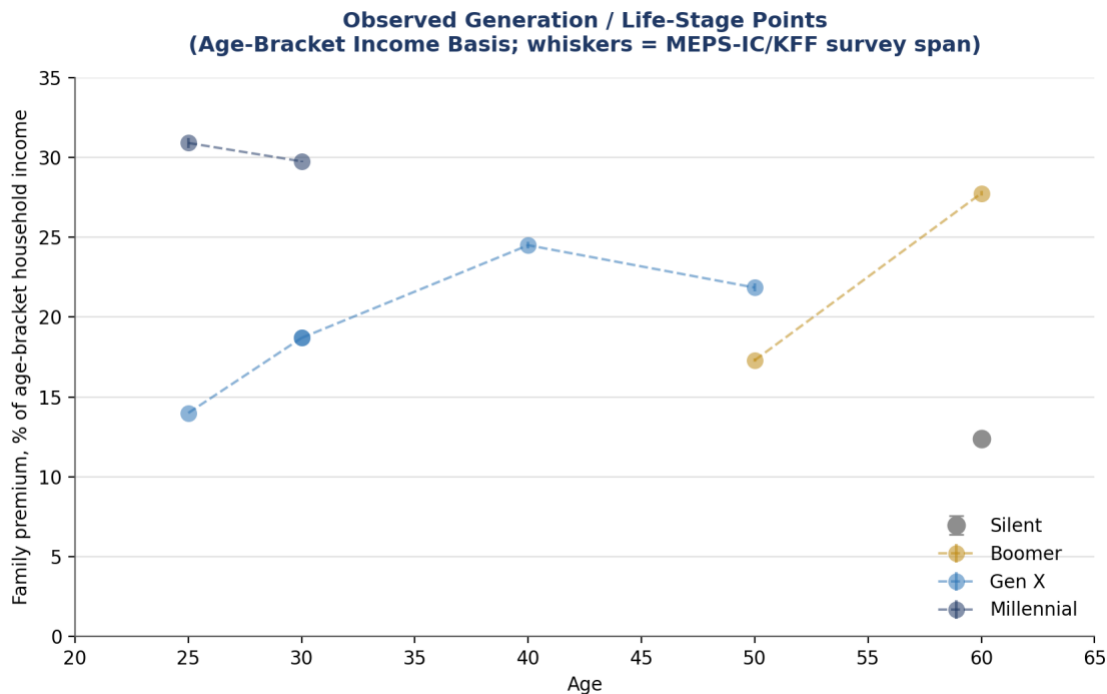


Millennial at age 25 (2013) is the one exception, running higher on the bracket-specific basis (30.6%-31.2%) than on all-household income (29.9%-30.5%) — the correction does not move uniformly in one direction. Two further caveats: a household's age bracket is not the same as the household being employed — a bracket includes unemployed, disabled, studying, and caregiving householders alongside working ones — and the premium figure itself remains a national number, not a bracket-specific one.

The most comparable same-age observations this data supports are Gen X versus Millennial at ages 25 and 30, using the same Census income bracket for each pair. At age 25, Gen X's ratio was 14.0% against Millennial's 30.6%-31.2%. At age 30, Gen X was 18.7% against Millennial's 29.7%-29.8%.

4. Affordability by Age and Generation, Age-Bracket Basis

Plotting the bracket-specific ratios by age, one line per generation, shows a different shape than the all-household version in Part II (§8). Whiskers mark the MEPS-IC/KFF span for years where both surveys exist; single points for 1996, 1997, and 2002 reflect years with only one available source.



Each point on this chart mixes two things that move together: age (the horizontal axis) and calendar year, which differs for every generation at every age. The dashed lines connecting points within a generation connect period observations assigned to that generation at successive life stages; they are not a longitudinal trajectory and should not be read as evidence of what aging itself does to affordability, since calendar-year and age effects cannot be separated in this design. Gen X's line rises from age 25 to 40 and then declines slightly by age 50; Boomer's age-60 point (27.6%-27.9%) is the highest point in the chart, rather than blending into a shared cluster with Gen X and Millennial. This is a materially different pattern from Part II's all-household version, which is itself informative about how much that pattern depends on the choice of denominator.

PART II — THE HEALTHCARE FINANCING ENVIRONMENT

This part uses national period statistics — figures describing the country as a whole in a given calendar year, not any specific age group — as context for how the underlying premium and financing figures moved over time.

5. The Age-30 Comparison, National Basis

	Silent (1966)	Boomer (1985)	Gen X (2002)	Millennial (2018)	Gen Z (2034)
Median household income (nominal)	NOT FOUND	\$23,618	\$42,409	\$63,179	NOT YET OBSERVED
Family insurance premium, total	NOT AVAILABLE	NOT AVAILABLE	\$8,469 (MEPS-IC)	\$19,565-\$19,616*	NOT YET OBSERVED
Worker-paid premium share	NOT AVAILABLE	NOT AVAILABLE	\$1,987	\$5,547	NOT YET OBSERVED

	Silent (1966)	Boomer (1985)	Gen X (2002)	Millennial (2018)	Gen Z (2034)
Deductible, single coverage, among workers with a deductible††	NOT AVAILABLE	NOT AVAILABLE	NOT AVAILABLE	\$1,573	NOT YET OBSERVED
Out-of-pocket spending, per capita (national avg.)	\$89.90	\$379.15	\$764.05	\$1,223.54	NOT YET OBSERVED
Medicare HI payroll tax rate	0.35% / 0.35%, capped \$6,600	1.35% / 1.35%, capped \$39,600	1.45% / 1.45%, uncapped	1.45% / 1.45%, uncapped**	NOT YET OBSERVED
Uninsured rate	NOT FOUND	NOT FOUND	13.9%	8.5%	NOT YET OBSERVED
Family premium, % of income	—	—	20.0%	31.0%	NOT YET OBSERVED
Family premium, weeks of median income	—	—	10.4	16.1	NOT YET OBSERVED

This table does not sum family premium and out-of-pocket spending into a single "total household burden" figure. The premium is a household-level number describing a specific family plan; the out-of-pocket figure is a national per-capita average (CMS National Health Expenditure Accounts), covering a different population and unit. Combining them would treat two figures with different units as though they measured the same thing. A household-level out-of-pocket figure (from MEPS's Household Component) exists but has not been resolved to one consistent definition across the years this report covers and is not substituted here.

**2018's premium is a MEPS-IC/KFF range (\$19,565-\$19,616); the two surveys agree closely enough that the headline ratio is effectively unchanged either way. **The ACA's Additional Medicare Tax (0.9% on Medicare wages, RRTA compensation, and self-employment income above filing-status-specific thresholds — \$200,000 for single filers, \$250,000 married filing jointly, \$125,000 married filing separately, as of 2018) is not shown in the median household's rate above, since a median-income household falls below all three thresholds. ††KFF reports \$1,573 as the average deductible among covered workers enrolled in a plan with a general annual deductible; averaged across all covered workers, including those with no deductible, KFF separately reports a lower figure (approximately \$1,350).*

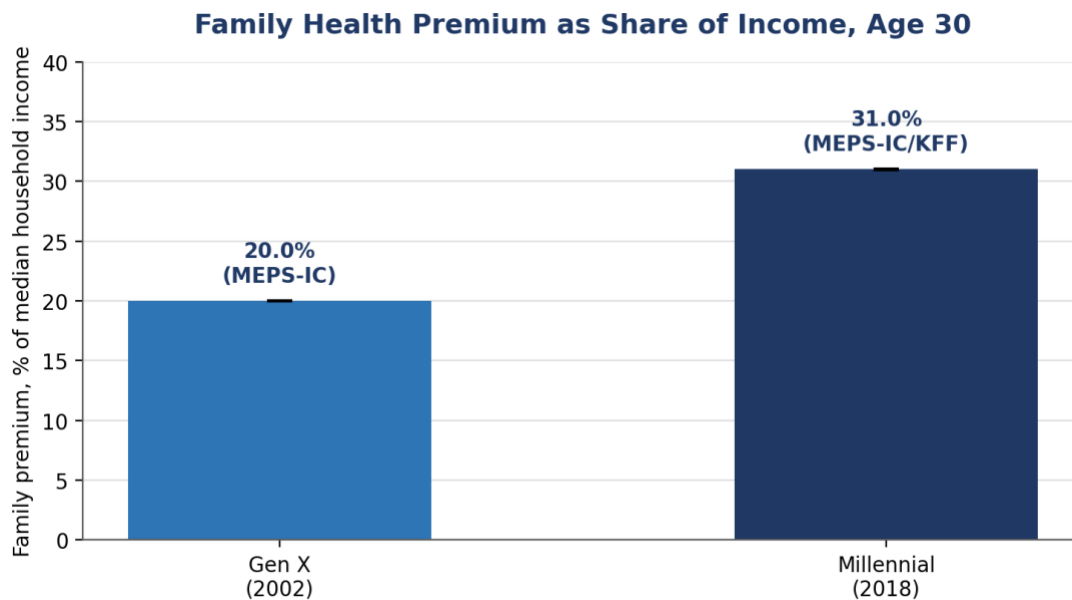
The 2002 uninsured rate (13.9%) reconciles directly against Census Table HIB-1's own workbook: the "All Races, Both Sexes" block reports 285,933.4 thousand total people and 39,775.9 thousand not covered for 2002, which is 13.911 percent, rounding to the published 13.9 percent. The corresponding male rate (15.4%) and female rate (12.5%) are each different figures resting on populations roughly half the size of the combined total shown here.

The 2002 and 2018 uninsured rates come from different points in an evolving measurement series: the Current Population Survey's health insurance questions were revised in 2011, again with a full questionnaire redesign in 2014, and again with a processing change in 2017. The two figures in this table are not a fully homogeneous time series, and a reader should not infer a smooth year-by-year path between them.

6. What the National Table Shows

Gen X and Millennial are the only generational pair with complete enough data to compute this national ratio (family premium as a share of all-household median income) at age 30. Between those two points, the ratio rose from 20.0% of household income in 2002 to a 31.0% range in 2018. Measured in weeks of the median household's annual income, the same premium grew from about 10.4 weeks to about 16.1

weeks. Part I's age-bracket-matched version of the same comparison (§2-3) is 18.7% to a 29.7%-29.8% range — smaller in both years, though the direction of change is the same.



Silent and Boomer cannot be added to this specific comparison: both years predate the start of the continuous MEPS-IC premium series this report relies on (1996). What is available for those two generations at age 30 — out-of-pocket spending, and the HI payroll tax rate and cap status — shows a different part of the picture: nominal out-of-pocket spending per capita was \$89.90 in 1966 and \$379.15 in 1985, a period when the payroll-tax side of Medicare financing was near its historical high (see §10).

Gen Z's age-30 observation falls in 2034, beyond the period this report covers, and is left blank rather than projected.

7. Each Generation's Life Course, National Basis

The age-30 column above is one slice of a larger series. The table below extends the national-basis comparison to every observed life stage with a usable premium figure; the age-bracket-specific version of the same rows appears in §2.

Generation	Age	Year	Household Income	Family Premium	Premium, % of Income	Premium, Weeks of Income
Silent	60	1996	\$35,492	\$4,954 (MEPS-IC)	14.0%	7.3
Silent	67	2003	\$43,318	N/A — Medicare-age*	—	—
Silent	75	2011	\$50,054	N/A — Medicare-age*	—	—
Boomer	50	2005	\$46,326	\$10,728-\$10,880†	23.2%-23.5%	12.0-12.2
Boomer	60	2015	\$56,516	\$17,322-\$17,545†	30.6%-31.0%	15.9-16.1

Generation	Age	Year	Household Income	Family Premium	Premium, % of Income	Premium, Weeks of Income
Boomer	67	2022	\$74,580	N/A — Medicare-age*	—	—
Gen X	25	1997	\$37,005	\$5,332 (MEPS-IC)	14.4%	7.5
Gen X	30	2002	\$42,409	\$8,469 (MEPS-IC)	20.0%	10.4
Gen X	40	2012	\$51,017	\$15,473-\$15,745†	30.3%-30.9%	15.8-16.0
Gen X	50	2022	\$74,580	\$21,931-\$22,463†	29.4%-30.1%	15.3-15.7
Millennial	25	2013	\$53,585***	\$16,029-\$16,351†	29.9%-30.5%	15.6-15.9
Millennial	30	2018	\$63,179	\$19,565-\$19,616†	31.0%-31.0%	16.1

Silent (age 67 and 75) and Boomer (age 67) are coded not applicable rather than populated with a working-age employer premium, since those households are Medicare-eligible and a national working-age family-plan average is not a representative cost concept for them. This is not a claim that employer coverage disappears at 65 — some Medicare-age households retain it, particularly through continued employment, with Medicare as secondary coverage — only that the national working-age figure is not the right number for that group.

Generation	Age	Year	Medicare Part B Standard Monthly Premium	Annualized
Silent	67	2003	\$58.70	\$704.40
Silent	75	2011	\$115.40 (standard) / \$96.40 (most continuing beneficiaries, held-harmless)	\$1,384.80 / \$1,156.80
Boomer	67	2022	\$170.10	\$2,041.20

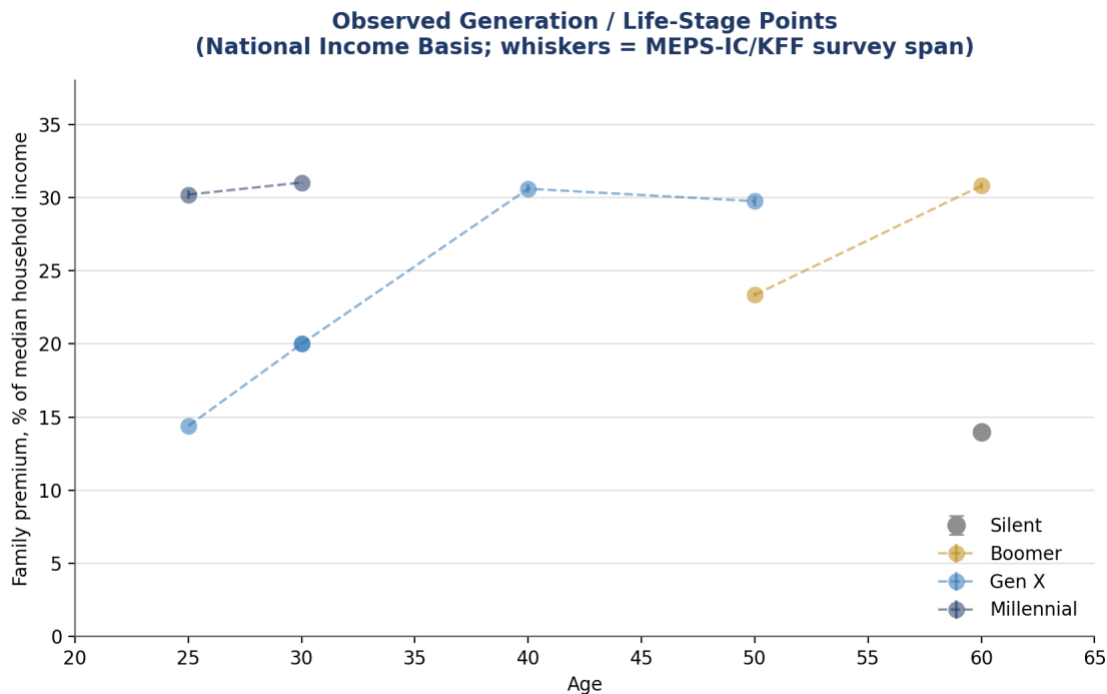
Medicare Part B is a standardized Medicare-age premium measure, not a complete picture of Medicare-age healthcare financing — Part D, Medigap, Medicare Advantage premiums, deductibles, coinsurance, and any retiree employer coverage also factor into what a 67- or 75-year-old household may pay and are not captured here.

†Ranges for 2005, 2012, 2015, and 2022 show the MEPS-IC/KFF span for that year (see §2). 1996, 1997, and 2002 use MEPS-IC alone. ***2013 uses the redesigned Census income methodology, for consistency with 2018 and 2022, which are only available on that basis.

Read this table's rows within a generation, not across generations at the same row position: Silent age 67 (2003) and Gen X age 30 (2002) are different ages in different years, not a like-for-like comparison. The most comparable same-age observations on the national basis are Gen X versus Millennial at ages 25 and 30, the same pair that is also cleaner on the age-bracket basis in Part I.

8. Affordability by Age and Generation, National Basis

Plotting every row above with age on the horizontal axis and generation as a separate line produces the all-household version of the comparison; the age-bracket-specific version appears in §4. Whiskers mark the MEPS-IC/KFF span where both surveys exist.



As in §4, each point here mixes age with calendar year; the dashed lines connect each generation's period observations at successive life stages rather than isolating an age effect. Gen X, Millennial, and Boomer's working-age points cluster in the 29%-31% range across ages 25 through 60 largely because their observed years for those ages fall between 2011 and 2022, a period when the national premium-to-income ratio was already elevated — not because reaching a given age itself drives the ratio to 30%. Part I's version (§4) does not show the same convergence, evidence of how much this pattern depends on the all-household denominator specifically.

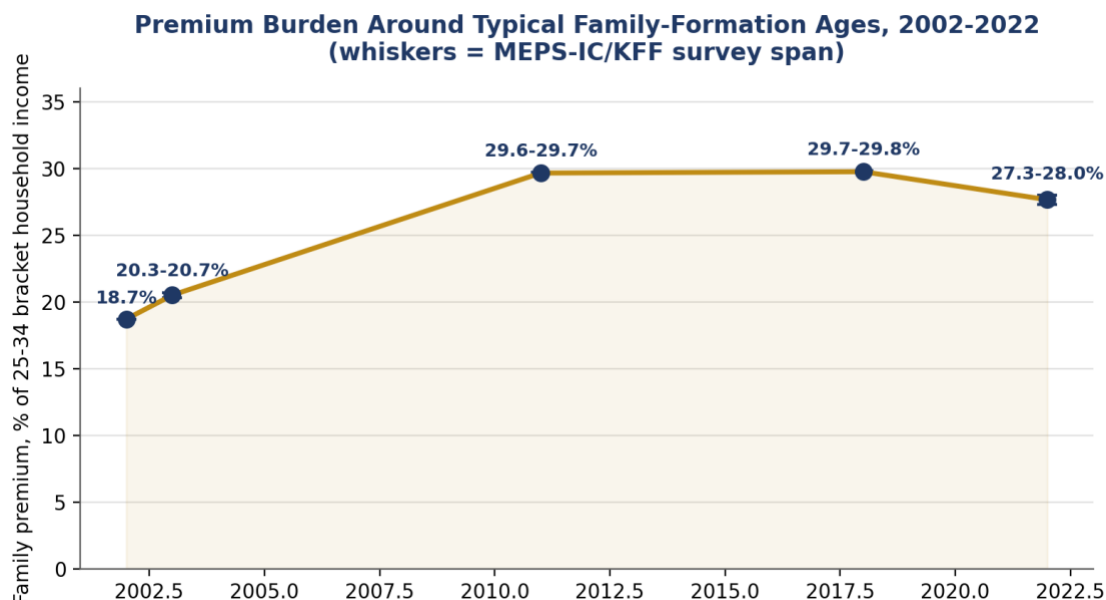
Silent's single point (age 60, 1996, 14.0%) sits well below the others, reflecting that it is the only Silent working-age observation with usable premium data in this series, not that Silent faced a smaller burden generally.

9. Healthcare Affordability Around Typical Family-Formation Ages

This section holds a different variable fixed than §6-8: instead of a fixed age, it uses each year's actual mean age at first birth (from NCHS natality data), joined to income and premium data for the same year. Five years have a confirmed mean age at first birth: 2002, 2003, 2011, 2018, and 2022. Income uses the 25-34 Census bracket, since the confirmed ages at first birth (25.1 to 27.4) all fall within it.

Year	Mean Age at First Birth	25-34 Bracket Income	Family Premium	Premium, % of Bracket Income
2002	25.1	\$45,330	\$8,469 (MEPS-IC)	18.7%
2003	25.2	\$44,779	\$9,068-\$9,249*	20.3%-20.7%
2011	25.6	\$50,774	\$15,022-\$15,073*	29.6%-29.7%
2018	26.9	\$65,890	\$19,565-\$19,616*	29.7%-29.8%
2022	27.4	\$80,240	\$21,931-\$22,463*	27.3%-28.0%

*Ranges show the MEPS-IC/KFF span for each year (see §2); note that for 2003 the order reverses from other years — MEPS-IC (\$9,249) is higher than KFF (\$9,068) that year specifically.

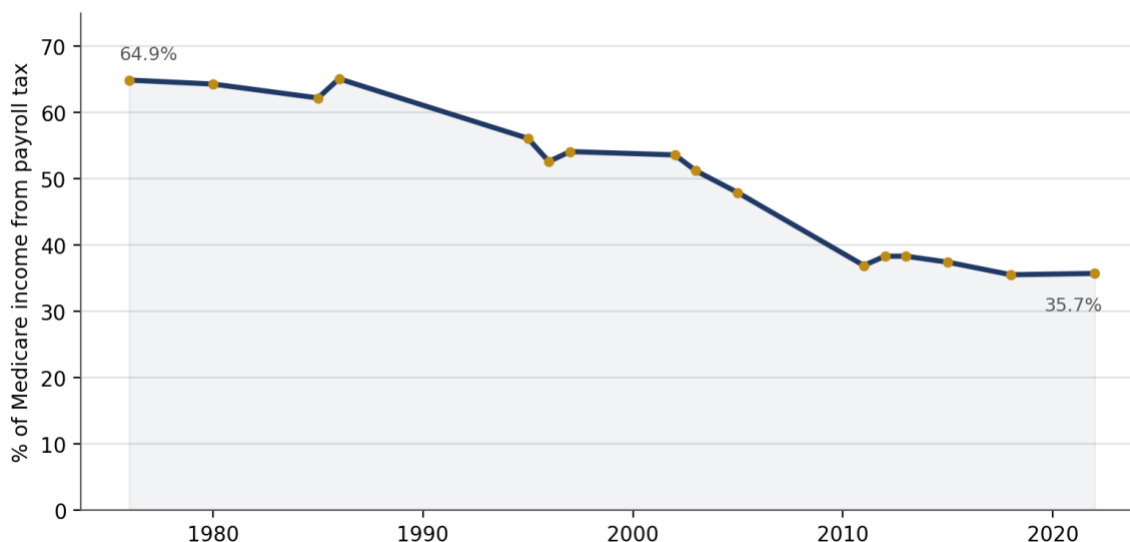


This section describes a calendar year matched to a national mean age at first birth, not first-time-parent households specifically. The employer family premium used here is a national figure, not specific to new parents; mean age at first birth describes mothers, not the Census-defined householder used for the income figure. What this table adds over §6-8 is timing resolution: the ratio rose from a roughly 19-21% range in 2002-2003 to a roughly 28-30% range by 2011, then held roughly flat through 2022. That the increase occurred between the 2003 and 2011 observations is what this data supports; whether it was gradual, concentrated in particular years, or affected by the 2008-09 recession would require an annual series this report does not yet include.

10. Medicare's Shifting Financing Base

Independent of the age comparisons above, Medicare's own income-side data shows a substantial long-term shift: the share of Medicare's total income financed by the payroll tax fell from 64.9% in 1976 to 35.7% in 2022. The underlying components are documented in the Medicare Trustees' own annual reports; this report assembles them into one continuous ratio across 46 years.

Medicare's Shifting Financing Base, 1976-2022



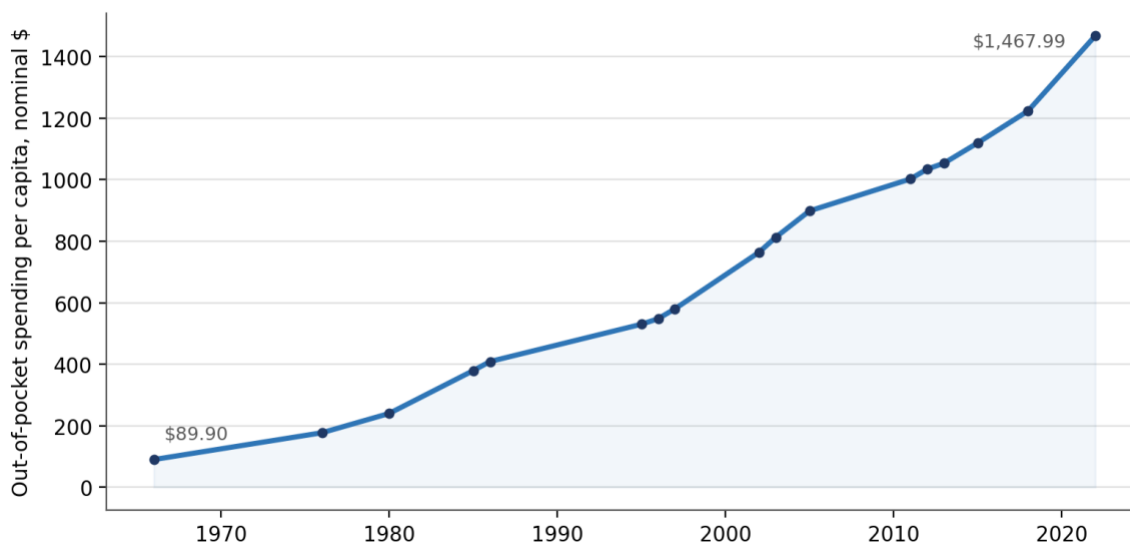
The mechanism matters as much as the trend. Hospital Insurance's own payroll-tax share of its own income barely moved across this span — 88%-94% financed by payroll tax in every year measured. The shift happened because Part B, and later Part D, both financed primarily through beneficiary premiums and general tax revenue rather than the payroll tax, grew to make up a much larger share of total Medicare spending than they did in 1976.

These ratios are computed from the income-side tables of the annual Medicare Trustees Reports for each plotted year (1976, 1980, 1985, 1986, 1995-1997, 2002-2003, 2005, 2011-2013, 2015, 2018, 2022): total income to each trust fund (payroll taxes, premiums, general revenue transfers, and interest) versus the payroll-tax line specifically, HI and SMI reported separately per each year's report and combined for the figures shown here.

11. U.S. Out-of-Pocket Health Spending Per Capita

U.S. out-of-pocket health spending per capita (National Health Expenditure Accounts, 1960-2024 release, Summary Table 1) rose from \$89.90 in 1966 to \$1,467.99 in 2022, a roughly 16-fold increase in nominal dollars.

Household Out-of-Pocket Spending Per Capita, 1966-2022



This figure is nominal, not inflation-adjusted, and is a national per-capita average (CMS National Health Expenditure Accounts), not a household-specific or age-specific figure. It captures a different population and unit than the household comparisons in Part I and should not be read as what any specific household paid out of pocket.

Interpretive Considerations

A few points of interpretation apply across this entire report and are worth stating together, in one place, rather than only where each first arises.

- The premium figure used throughout is a national number; it does not vary by the age of the insured household. Only the income denominator is age-specific (Part I) or all-household (Part II). Neither part is a fully population-matched measurement of what any specific household paid.
- Total family premium includes both the employer and employee share. It measures the cost of a family health plan as an element of total compensation, not what a household pays directly out of pocket. Worker contribution, shown alongside total premium in this report's tables, is the closer measure of direct household cost.
- Part I and Part II answer different questions and are not two independent confirmations of the same finding. Part I asks what a household near a given age faced, relative to the income of households near that age. Part II asks what the national financing environment looked like in a given year. Where the two produce different-sized effects, that difference is itself informative about how much the all-household denominator was masking.
- Where this report shows a range rather than a single premium figure (2003 onward), the range reflects two federal or federally-adjacent survey sources — AHRQ's MEPS-IC and KFF's Employer Health Benefits Survey — that measure closely related but not identical employer populations. It is not a statistical confidence interval.
- Two figures in this report (the 2002 and 2018 uninsured rates) come from different points in an evolving Current Population Survey measurement series and should not be read as a smooth, fully comparable trend.

Limitations and What This Report Does Not Claim

- Age-bracket income is available for 16 of 18 years and 6 age brackets, but age-bracket-specific premium data does not appear to exist in any public source, from either MEPS-IC or KFF. Part I corrects the income denominator but still uses a national premium figure as the numerator.
- MEPS-IC and KFF measure closely related but not identical populations: MEPS-IC covers private-sector establishments, while KFF covers private and nonfederal public employers. The range shown between them reflects both ordinary survey-to-survey variation and this universe difference; it should not be read as a formal confidence interval.
- The 1980 Census universe change (age 14-and-older to 15-and-older) has not been assessed for how much it affects the youngest income bracket specifically.
- Only life stages with a usable premium figure are shown in §7 (12 of 22 currently observed generation-by-life-stage cells); the remaining ten observed cells have no premium data at all, since they predate the continuous MEPS-IC series (1996).
- Three Medicare-age cells (Silent at 67 and 75, Boomer at 67) are coded not applicable for a working-age employer premium; Medicare Part B is shown as a standardized alternative, not a complete Medicare-age cost picture.
- Section 9 describes a calendar year matched to a national mean age at first birth, not first-time-parent households specifically.
- The out-of-pocket and Medicare financing figures in §10-11 are national-level series, not part of either part's household comparison, and use different units than the premium-to-income ratios (per-capita versus per-household).
- The total family premium used throughout this report includes both the employer and employee share. It represents the cost of a family health plan as an element of total compensation, not the amount a household pays directly out of pocket; the employee-only contribution, shown separately in §2 and §5, is the closer measure of direct household cost.
- A CPI-adjusted and wage-indexed version of the out-of-pocket per-capita series, comparing real growth in healthcare costs to real growth in wages over the same period, is planned as a companion analysis.

Future Research

- Complete the CPI-adjusted and wage-indexed companion series for out-of-pocket spending per capita, so real (inflation-adjusted) growth can be compared directly against wage growth over the same period.
- Assess whether the March 1980 Census age-of-householder universe change (14-and-older to 15-and-older) materially affects the youngest income bracket used in this report's age-25 comparisons.
- Continue monitoring for any public data source that reports employer family health premiums broken out by the age of the insured household or primary policyholder, which would remove this report's central population-matching limitation.
- Extend the life-stage comparison to Generation Z as observations become available; Generation Z's earliest tracked life stages do not begin until 2029 under this report's generation-to-calendar-year framework.
- Populate the remaining generation-by-life-stage cells that currently lack usable premium data, using whatever variables are available for those years and life stages.

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Conclusion

This report compared healthcare affordability across five American generations using both a life-stage-matched income measure and a national financing-environment measure. Both approaches point in the same direction: at comparable ages, Millennials have faced a substantially larger share of household income going to family health insurance premiums than Generation X did — more than double at age 25, and roughly two-thirds higher at age 30, on an age-bracket income basis. The size of that difference depends materially on which income measure is used, and this report presents both rather than treating either alone as the definitive figure.

Independent of these life-stage comparisons, this report also documents a substantial long-term shift in how Medicare itself is financed, away from payroll-tax funding and toward beneficiary premiums and general revenue, and a large nominal increase in national out-of-pocket health spending that has not yet been adjusted for inflation in this analysis.

This report does not evaluate what, if anything, should be done about these trends, consistent with the Research Center's editorial independence. It documents what the available federal and survey data show, and states plainly where that data cannot yet answer a fuller question — most notably, the absence of any public source reporting employer family health premiums specific to the age of the insured household. Future editions of this report may extend the life-stage comparison to additional generations and years as data becomes available and may add the inflation-adjusted companion analysis identified in Future Research.

Revision History

Version 1.0 — September 2, 2026 — Initial publication.