

Medicaid and CHIP 101

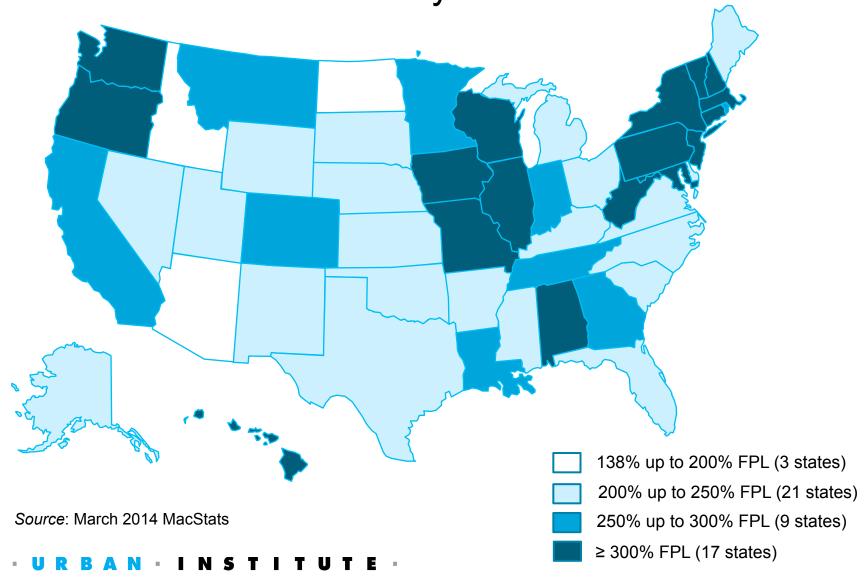
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Tackling Health Disparities in Children

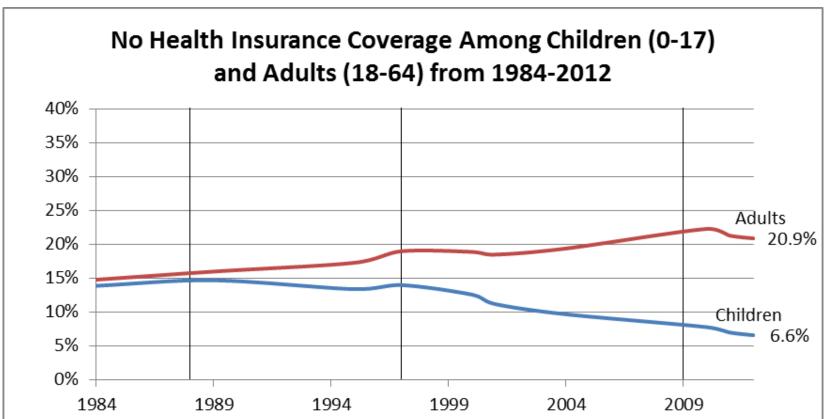
Medicaid and CHIP for Children: Background

- Medicaid expansions for children in the 1980s and early 90s
 - designed to reduce uninsurance among poor children;
- The Children's Health Insurance Program, added in 1997
 - designed to reduce uninsurance among near poor and other low income children without affordable health insurance options and to increase Medicaid take up among eligible children
 - CHIP was reauthorized in 2009 and has received federal funding extensions in 2010 and in 2014
- Medicaid provides comprehensive benefit package for children with little or no premiums or cost sharing; States have more flexibility over the design of their CHIP program, but studies show CHIP plans tend to have actuarial values close to Medicaid
- In 2013, Medicaid and CHIP covered 38.7 and 8.1 million children, respectively over the course of the year

Income Eligibility Levels for Children in Medicaid/ CHIP by State



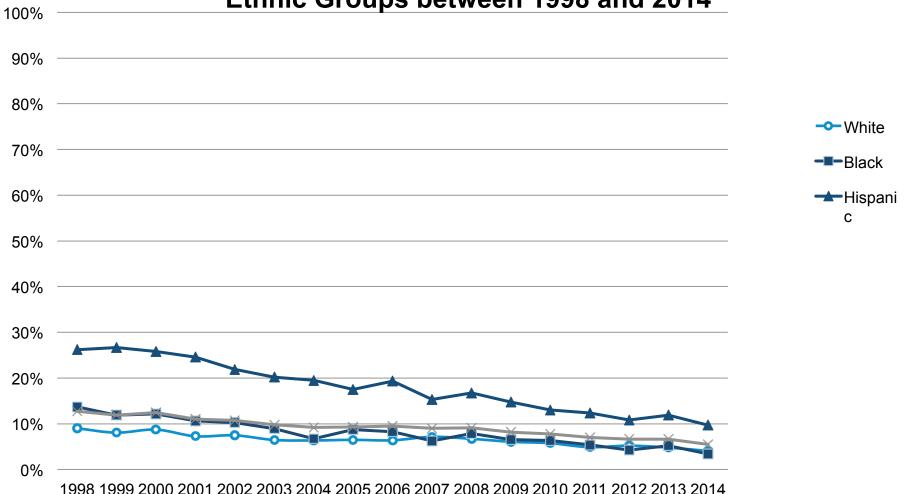
Uninsurance has Decreased Among Children While Increasing for Adults



Source: "Table 124. No health insurance coverage among persons under age 65, by selected characteristics: United States, selected years 1984-2011" NHIS Trend Tables. Available at http://www.cdc.gov/nchs/data/hus/2012/124.pdf; Early Release of Selected Estimates Based on Data From the 2012 National Health Interview Survey. Available at

http://www.cdc.gov/nchs/data/nhis/earlyrelease/earlyrelease201306.pdf

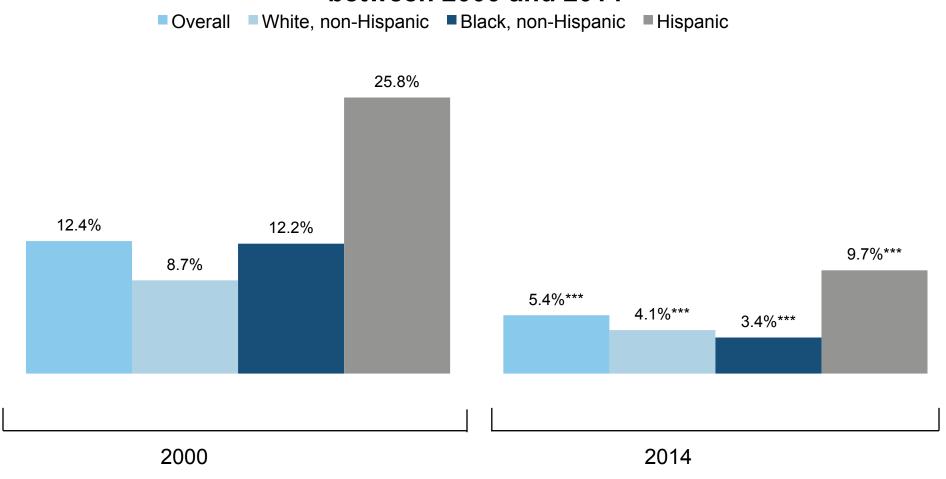
Uninsurance Rates Narrowed for Children in Different Racial and Ethnic Groups between 1998 and 2014



Source: Preliminary Urban Institute Tabulations of 1998-2014 National Health Interview Survey

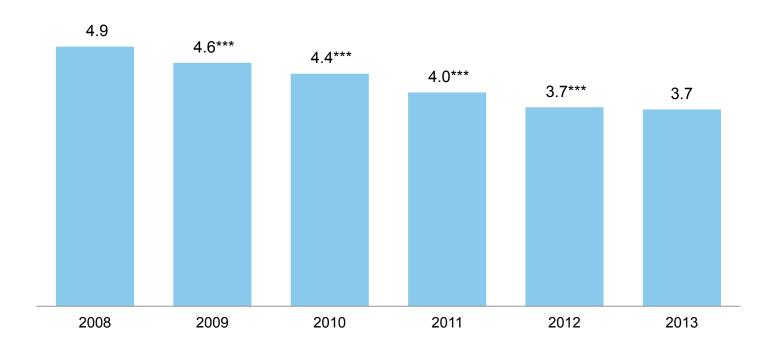
Notes: Children defined as ages 0 to 17. Uninsured is at the time of the survey. White and black indicate non-Hispanic white and non-Hispanic black, respectively.

Uninsurance dropped for Children in Different Racial and Ethnic Groups between 2000 and 2014



Source: Preliminary Urban Institute Tabulations of 2000 and 2014 National Health Interview Surveys Notes: Children defined as ages 0 to 17. Health insurance coverage is defined at the time of survey. White and black indicate non-Hispanic white and non-Hispanic black, respectively. *, **, and *** signify that point estimate for 2014 is different from 2000 at the p < 0.10 , < .05, < .01 level, respectively.

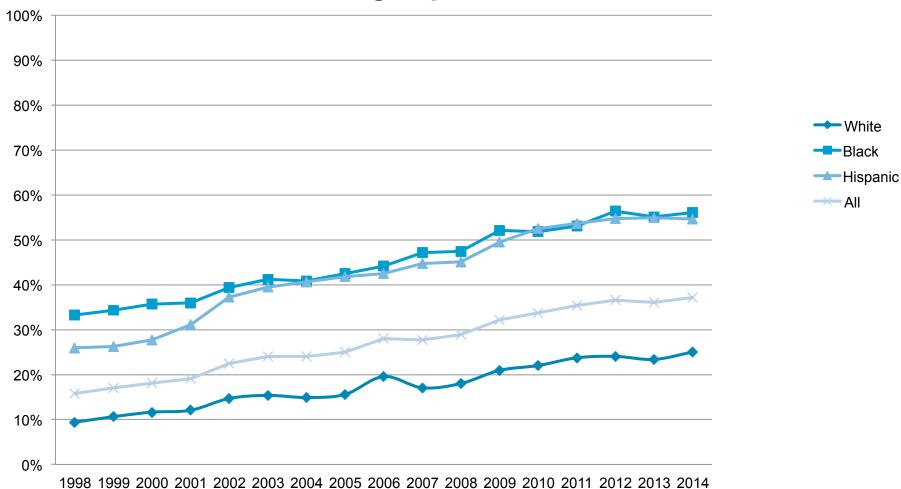
Number (in millions) of Uninsured Children Eligible for Medicaid or the Children's Health Insurance Program



Source: April 2015 The Urban Institute. Tabulations of the Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model developed by Victoria Lynch under a grant from the Robert Wood Johnson Foundation based on American Community Survey (ACS) data from the Integrated Public Use Microdata Series (IPUMS) from 2008-2013.

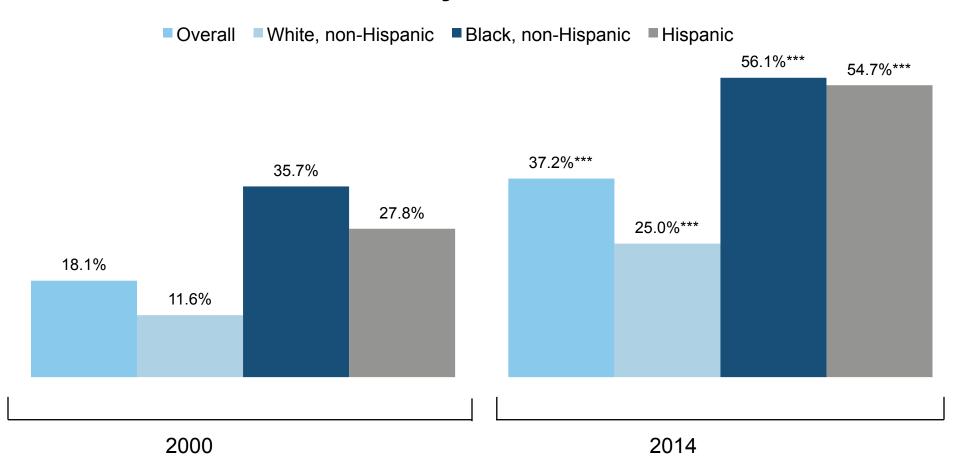
Notes: Estimates reflect an adjustment for the misreporting of coverage on the ACS. *** indicates difference from prior year is significant at the .01 level. Children defined as ages 0 to18.

Medicaid/CHIP Coverage Rates Increased for Children in different Racial and Ethnic groups between 1998 and 2014



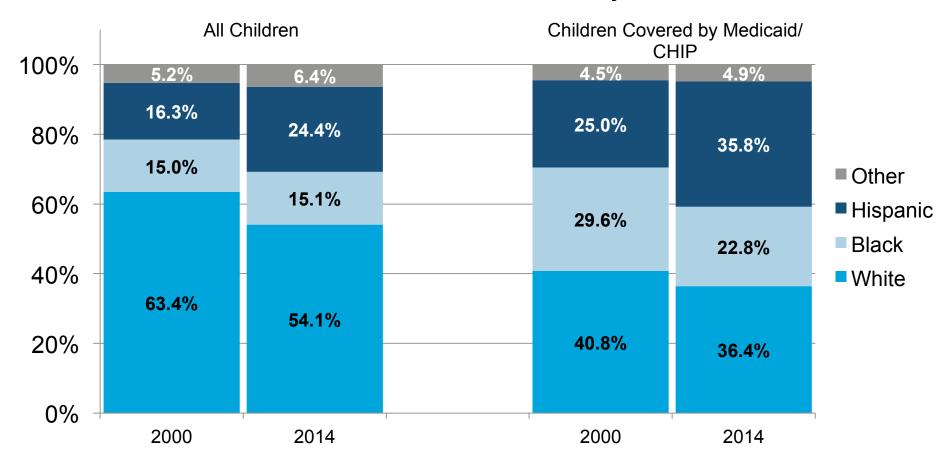
Source: Preliminary Urban Institute Tabulations of 1998-2014 National Health Interview Surveys Notes: Children defined as ages 0 to 17. Medicaid/CHIP indicates any reported Medicaid or CHIP coverage. White and black indicate non-Hispanic white and non-Hispanic black respectively.

Medicaid/CHIP Coverage among Children by Race/Ethnicity in 2000 and 2014



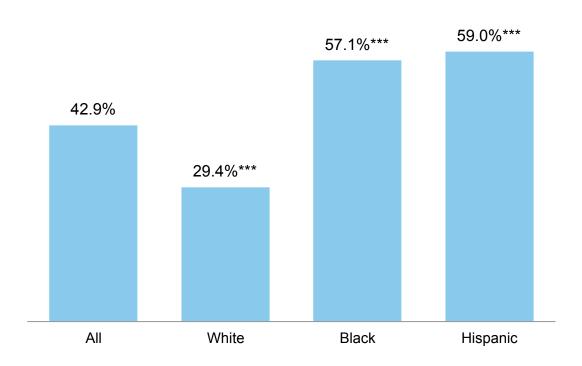
Source: Preliminary Urban Institute Tabulations of 2000 and 2014 National Health Interview Surveys Notes: Children defined as ages 0 to 17. Health insurance coverage is defined at the time of survey. Medicaid/CHIP is any reported Medicaid or CHIP coverage. *, **, and *** signify that point estimate for 2014 is different from 2000 at the p < 0.10 , < .05, < .01 level, respectively.

Racial/Ethnic Makeup of All Children and Children Covered by Medicaid/CHIP



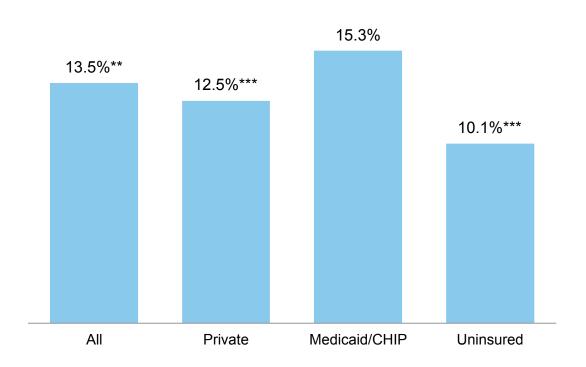
Source: Preliminary Urban Institute Tabulations of 2000 and 2014 National Health Interview Surveys Notes: Children defined as ages 0 to 17. Health insurance coverage is defined at the time of survey. Medicaid/CHIP is any reported Medicaid or CHIP coverage. White and black indicate non-Hispanic white and non-Hispanic black, respectively.

Percent of Children with Asthma Covered by Medicaid/CHIP in 2014 by Race/Ethnicity



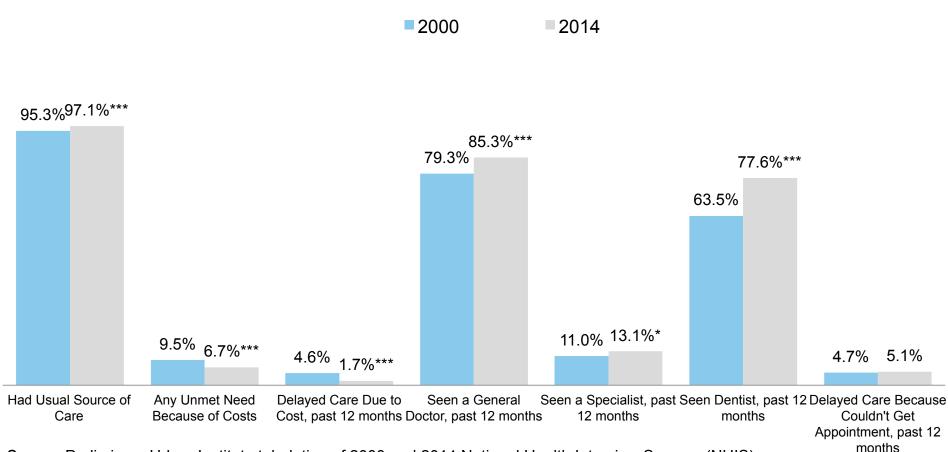
Source: Preliminary Urban Institute Tabulations of 2014 National Health Interview Surveys (NHIS) Notes: Children defined as ages 0 to 17. Health insurance coverage is defined at the time of survey. Medicaid/CHIP is any reported Medicaid or CHIP coverage. White and black indicate non-Hispanic white and non-Hispanic black, respectively. With Asthma signifies that child had ever been told they have asthma. *, **, and *** signify that the estimate for each racial/ethnic group is different from all children at the p < 0.10, < .05, < .01 level, respectively.

Percent of Children with Asthma by Coverage Type in 2014



Sources: Preliminary Urban Institute tabulation of 2014 National Health Interview Surveys (NHIS) Notes: Children defined as 0-17. Uninsured is defined at time of survey. Health insurance coverage is defined at the time of survey. Medicaid/CHIP is any reported Medicaid or CHIP coverage. With asthma signifies that child had ever been told they have asthma. *, **, and *** signify that the estimate for the uninsured and for private coverage is different from Medicaid/CHIP at the p < 0.10 , < .05, < .01 level, respectively.

Access to Care for Children Covered by Medicaid/CHIP

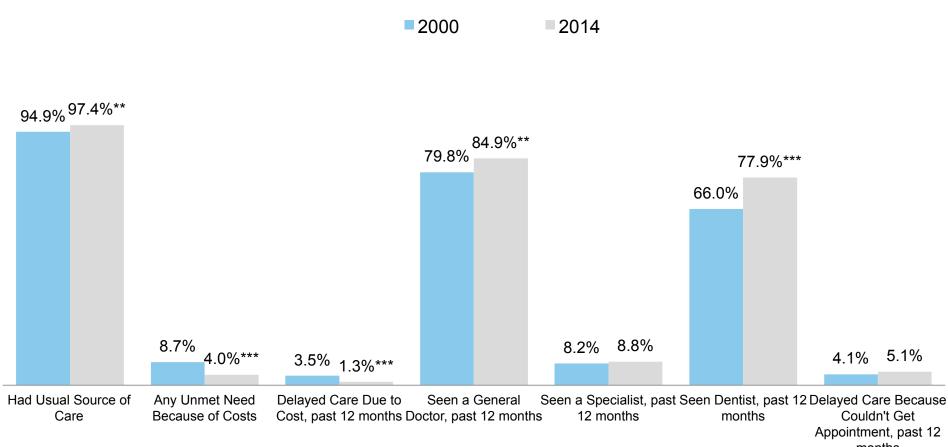


Source: Preliminary Urban Institute tabulation of 2000 and 2014 National Health Interview Surveys (NHIS)

Notes: Children defined as 0-17. Health insurance coverage is defined at the time of survey. Medicaid/CHIP is any reported Medicaid or CHIP coverage. Any unmet need includes medical care, dental care, mental health care, prescription drugs and eyeglasses. *

and *** signify that point estimate for 2014 is different from 2000 at the p < 0.10 and p < .01 level, respectively.

Access to care for Black, non-Hispanic Children Covered by Medicaid/CHIP



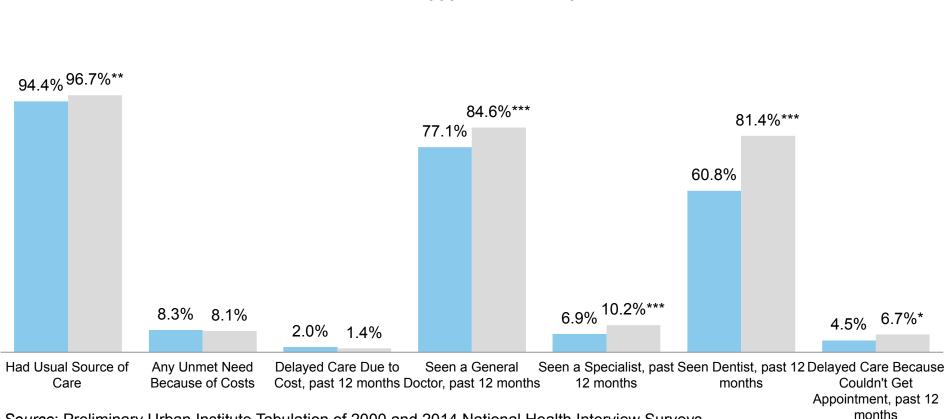
Source: Preliminary Urban Institute Tabulations of 2000 and 2014 National Health Interview Surveys

Notes: Children defined as ages 0 to17. Health insurance coverage defined at the time of survey. Medicaid/CHIP includes Medicaid and CHIP. Any unmet need includes medical care, dental care, mental health care, prescription drugs and eyeglasses. *, **, and *** signify that point estimate for 2014 is different from 2000 at the p < 0.10 , < .05, < .01 level, respectively.

Access to Care for Hispanic Children Covered by Medicaid/ CHIP

2014

2000

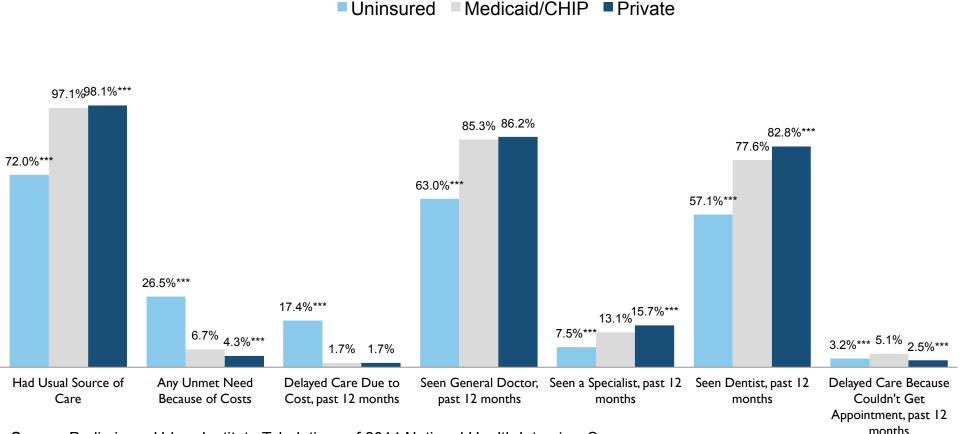


Source: Preliminary Urban Institute Tabulation of 2000 and 2014 National Health Interview Surveys

Notes: Children defined as ages 0 to 17. Health insurance coverage defined at the time of survey. Medicaid/CHIP includes Medicaid and CHIP. Any unmet need includes medical care, dental care, mental health care, prescription drugs and eyeglasses.

*, **, and *** signify that the point estimate for 2014 is different from 2000 at the p < 0.10, < .05, < .01 level, respectively.

Access to Care for Children in 2014 by Coverage Type



Source: Preliminary Urban Institute Tabulations of 2014 National Health Interview Surveys

Notes: Children defined as 0-17. Health insurance coverage defined at the time of survey. Medicaid/CHIP includes Medicaid and CHIP. Any unmet need includes medical care, dental care, mental health care, prescription drugs and eyeglasses. *, **, and *** signify that the estimate for the uninsured and for private coverage is different from Medicaid/CHIP at the p < 0.10 , < .05, < .01 level, respectively.

Health and Other Long Term Impacts of Medicaid/CHIP

- Limited evidence of how CHIP and Medicaid affect health and functioning of children in near term
- But growing evidence that Medicaid/CHIP coverage in early life has long term effects
 - •More years of eligibility in childhood associated with fewer hospitalizations and ED visits for blacks at age 25; improved teenage health and better educational and economic outcomes in young adulthood
 - Increased Medicaid coverage during pregnancy found to be associated with reductions in obesity and fewer hospitalizations related to diabetes/obesity in early adulthood

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