

# Coverage Erosion among Kids: Exploring the Increase in Uninsured Children Nationally and at the State Level, 2016 to 2017

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## Background

- Reducing the number of children without health insurance coverage has long been a focus of national and state health policy
- Children's Health Insurance Program (CHIP) established in 1997 and expanded in the CHIP Reauthorization Act of 2009
- Patient Protection and Affordable Care Act (ACA) implemented in 2014
- ACA coverage provisions targeted primarily uninsured adults, but also affected children through enhanced outreach
- Previously, children saw year-over-year decreases in uninsurance

## Research Objective

To examine: 1) national and state-level changes in health insurance coverage for children from 2016 to 2017, and 2) variation in the rate of uninsured children by race/ethnicity, income, and parental education.

## Study Design

Public Use Microdata Sample (PUMS) annual files of the 2008-2017 American Community Survey (ACS)

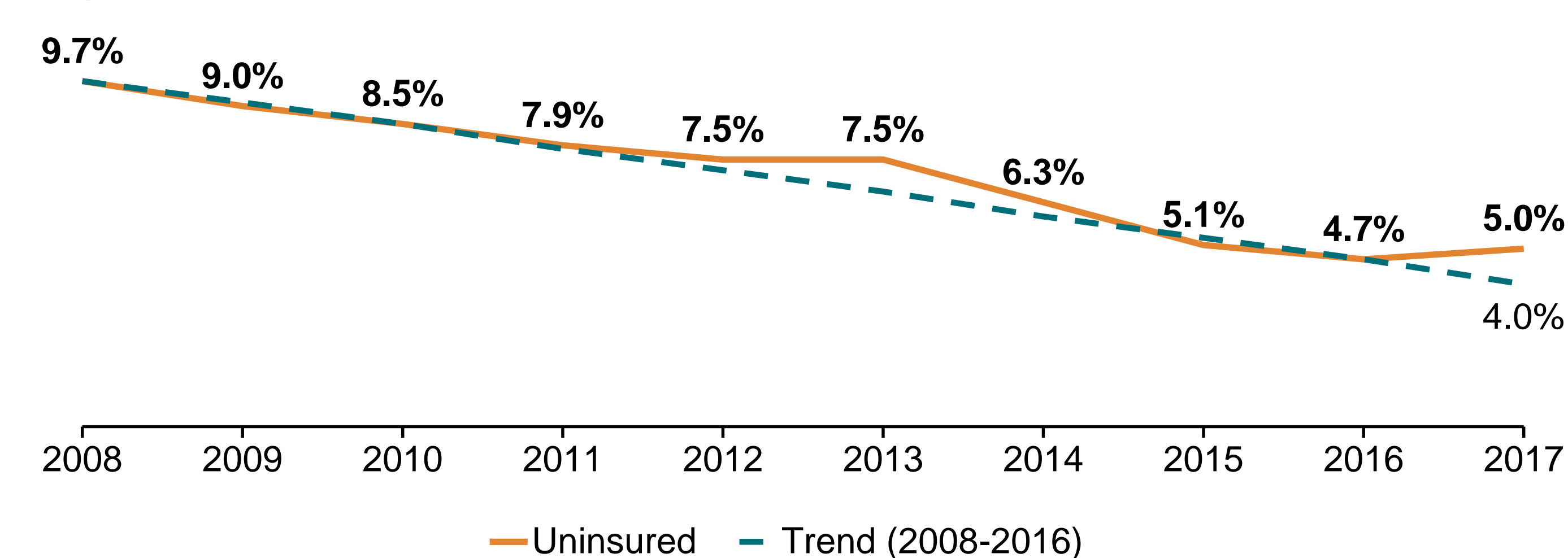
- Nationally representative data
- Large sample of children (aged 0-18) in all 50 states and DC
- We used PUMS to create policy relevant custom variables such as family income and poverty status (that are not found in the pre-tabulated estimates available on American FactFinder)
- Coverage defined as uninsurance, employer-sponsored insurance (ESI), individual, and Medicaid

## Principal Findings

### National Changes, Children's Health Insurance, 2016 to 2017

- Rate of uninsured children increased to 5.0% in 2017, reversing a long decline (0.6% point average decrease, 2008 to 2016; Figure 1)
- Increased uninsurance was driven by decreases in Medicaid and individual coverage, despite gains in ESI (Figure 2)
- Increases were seen across demographic groups (Figure 3)

Figure 1. Uninsured Children in the United States, 2008 to 2017



## Principal Findings Cont'd

### National Changes, Children's Health Insurance, 2016 to 2017

Figure 2. Children's Health Insurance, 2016 to 2017

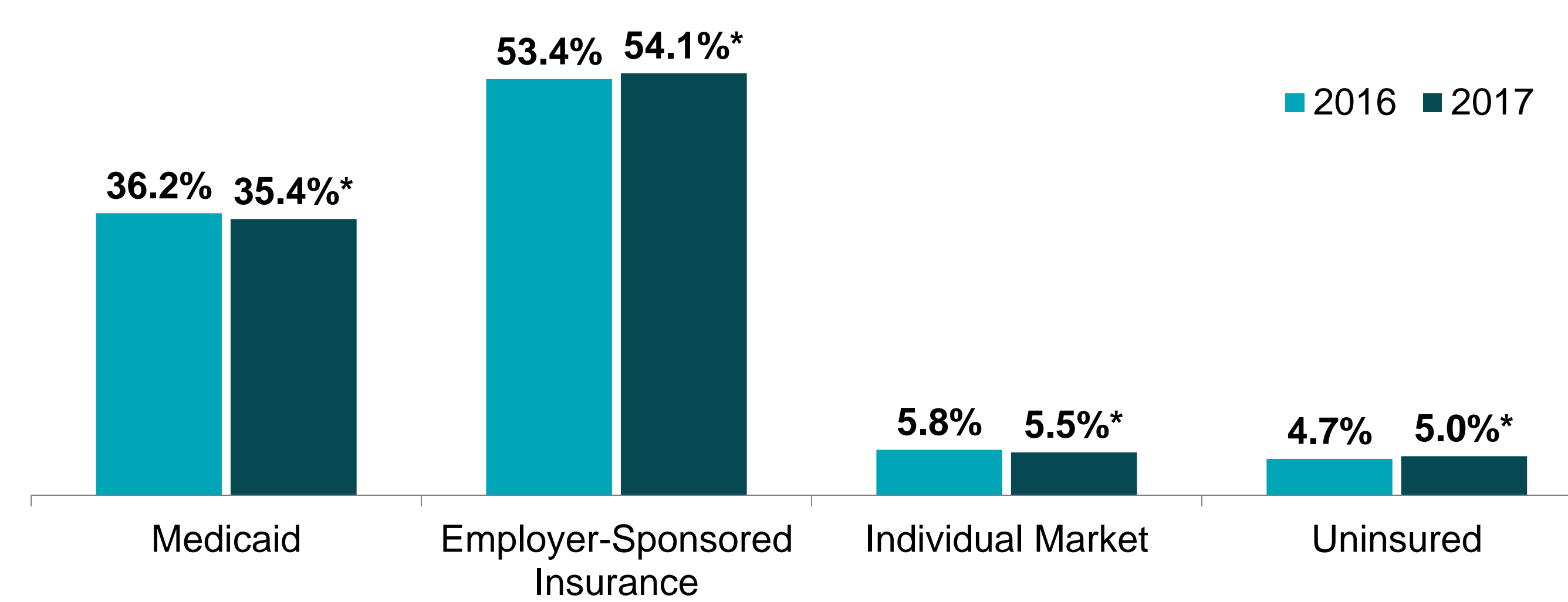
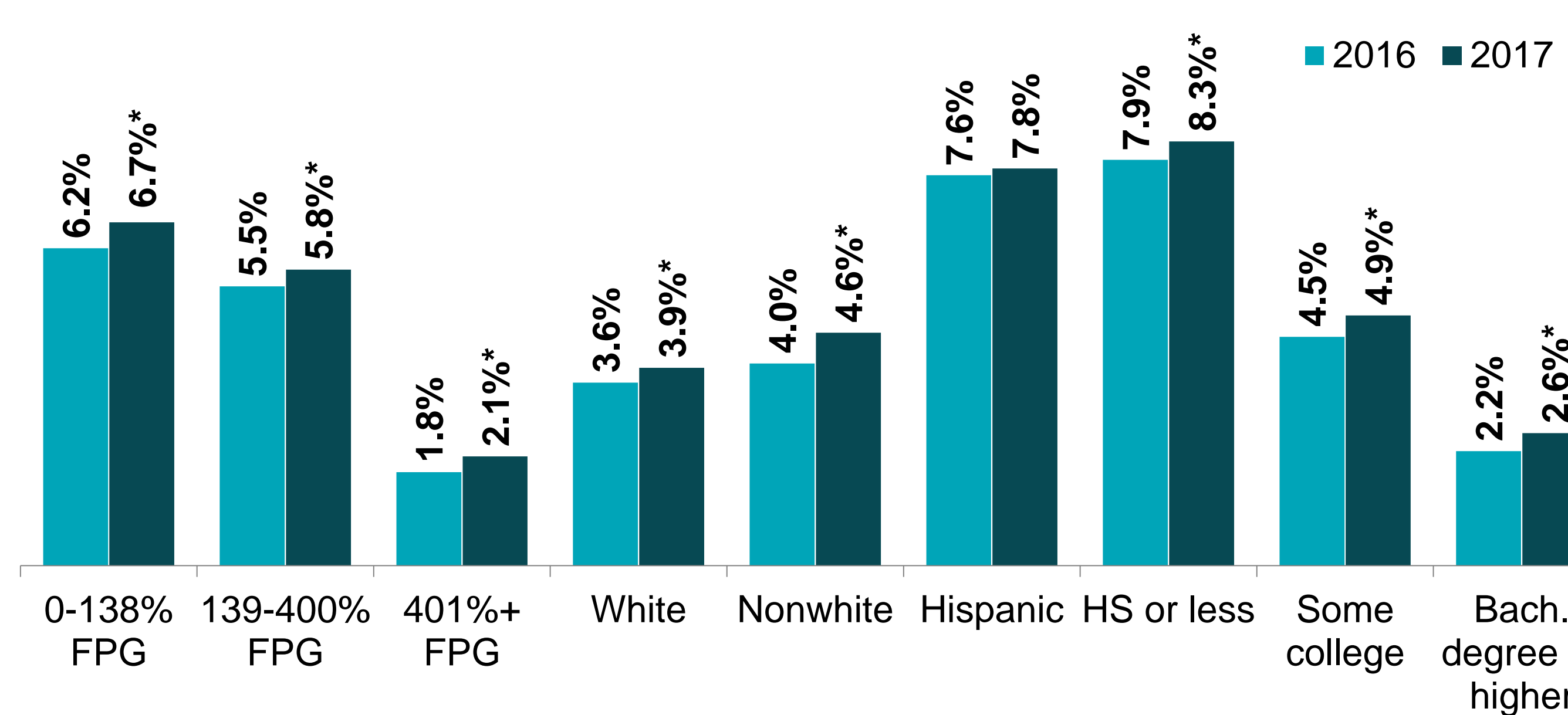


Figure 3. Uninsured Children by Demographic Group, 2016 to 2017

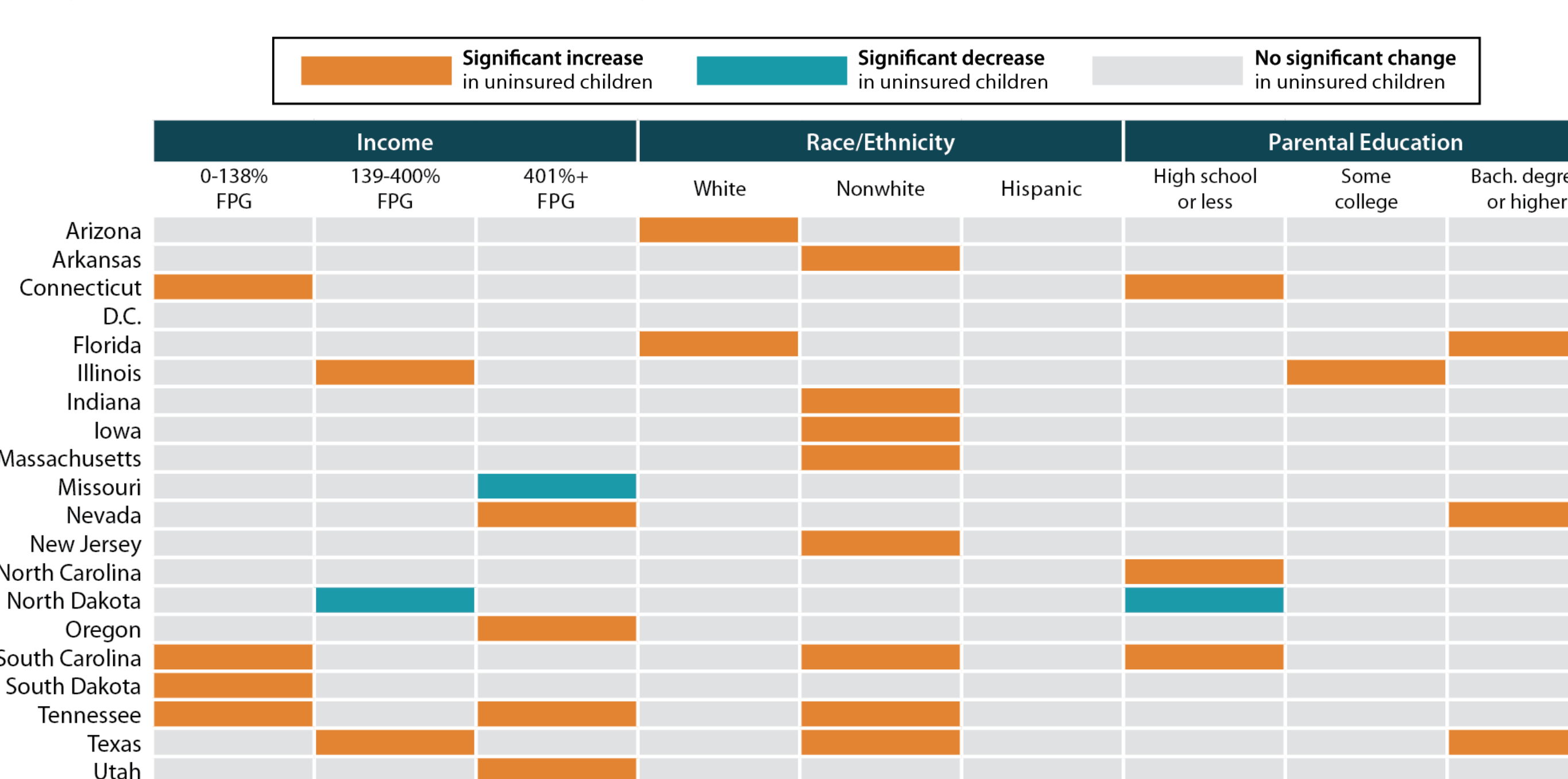


### State-Level Changes, Children's Health Insurance, 2016 to 2017

State coverage changes reflected the national picture:

- Increased uninsurance in 4 states, increased ESI in 5 states
- Decreased Medicaid in 2 states, decreased individual in 7 states
- At the state level, increases in uninsurance were particularly prevalent among Nonwhite children (Figure 4)

Figure 4. State-Level Changes by Demographic Group, 2016 to 2017



## Principal Findings Cont'd

### State-Level Variation, Uninsured Children, 2017

- Ranged from 10.7% in Texas to 1.4% in Vermont (Figure 5)
- Variation by race/ethnicity and family income persisted (Figure 6)

Figure 5. Rates of Uninsured Children in the States, 2017

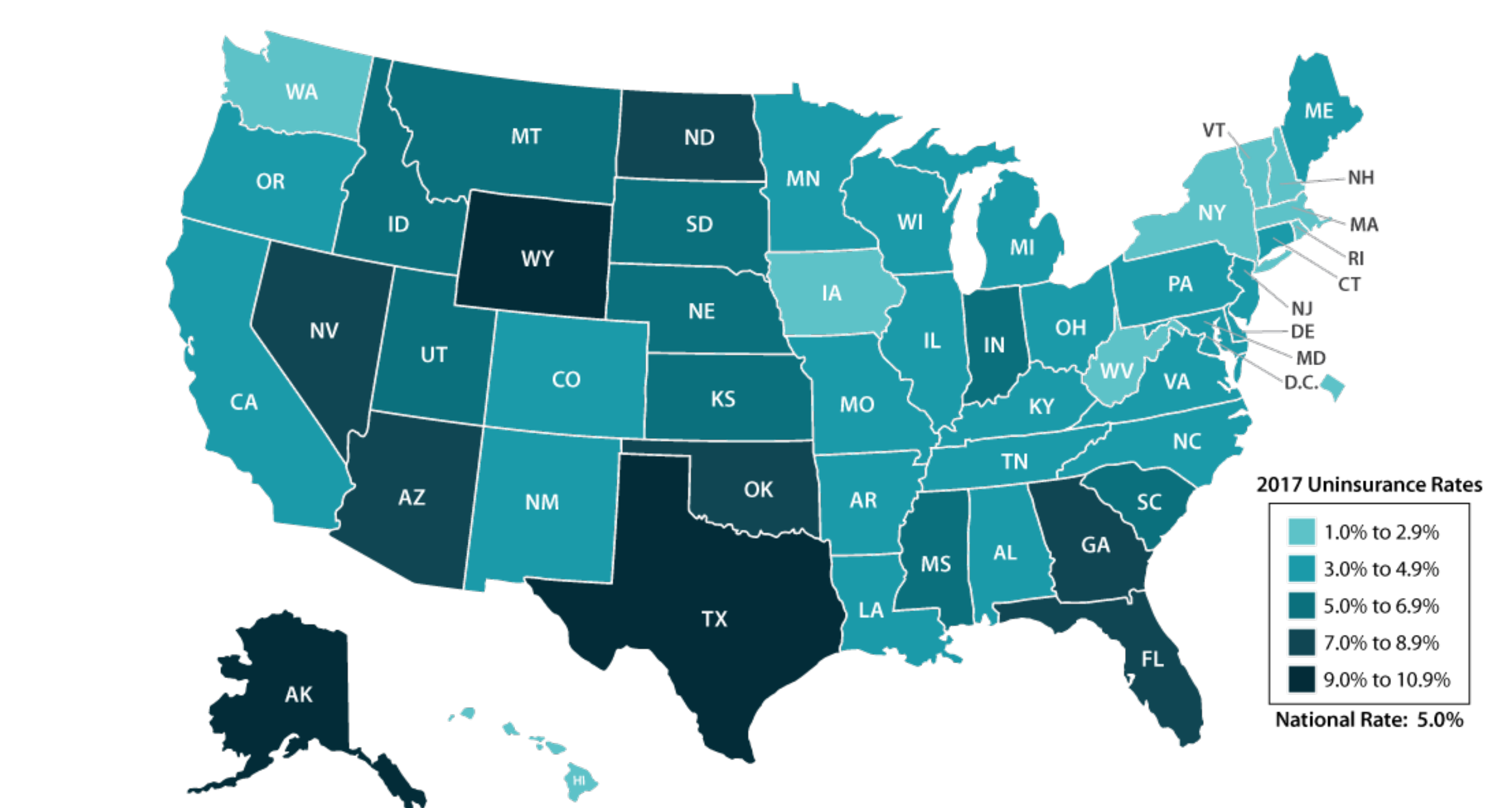


Figure 6. States with Highest & Lowest Rates of Uninsured Children, 2017

Low Income		High Income		White		Nonwhite		Hispanic	
Lowest State Rates		Lowest State Rates		Lowest State Rates		Lowest State Rates		Lowest State Rates	
1. VT	1.2% <sup>^</sup>	1. VT	0.4% <sup>^</sup>	1. MA	1.0%	1. DC	1.7% <sup>^</sup>	1. HI	0.8% <sup>^</sup>
2. MA	2.0%	2. DE	0.5% <sup>^</sup>	2. DC	1.1% <sup>^</sup>	2. NH	1.8% <sup>^</sup>	2. DC	0.8% <sup>^</sup>
3. WV	2.9%	3. RI	0.6% <sup>^</sup>	3. VT	1.5% <sup>^</sup>	3. MA	2.3%	3. MA	1.9%
4. HI	3.1%	4. HI	0.7% <sup>^</sup>	4. RI	1.6%	4. RI	2.4% <sup>^</sup>	4. NH	2.6% <sup>^</sup>
5. LA	3.2%	5. NH	0.7% <sup>^</sup>	5. CT	2.1%	5. MI	2.5%	5. IA	2.8% <sup>^</sup>
Highest State Rates		Highest State Rates		Highest State Rates		Highest State Rates		Highest State Rates	
1. WY	16.6%	1. TX	4.5%	1. WY	7.3%	1. WY	19.1% <sup>^</sup>	1. WY	19.4% <sup>^</sup>
2. ND	16.1%	2. AK	4.4% <sup>^</sup>	2. TX	6.9%	2. MT	16.3%	2. GA	16.1%
3. TX	12.6%	3. OK	4.1%	3. FL	6.3%	3. AK	15.1%	3. UT	15.5%
4. SD	11.6%	4. NV	3.9%	4. AK	6.2%	4. AK	12.8%	4. TX	14.3%
5. UT	11.3%	5. FL	3.8%	5. MS	5.9%	5. ND	12.1%	5. AK	12.3%
<b>U.S.</b>	<b>6.7%</b>	<b>U.S.</b>	<b>2.1%</b>	<b>U.S.</b>	<b>3.9%</b>	<b>U.S.</b>	<b>4.6%</b>	<b>U.S.</b>	<b>7.8%</b>

Notes: Estimates with relative standard errors greater than 30% are indicated by <sup>^</sup>. Estimates with no observed sample cases excluded.

## Conclusion

Uninsurance rose nationally among children. Increases were seen across demographic groups, and driven by decreases in Medicaid and individual coverage.

## Implications for Policy or Practice

- Close to 4 million uninsured children in 2017
- Decisions by state policy makers have considerable impact on children's insurance rates
  - More than one-third of children are covered by Medicaid or CHIP
- Uninsured children have more unmet healthcare needs