

# COVERING KIDS: Children's Access to Health Care Results from a Statewide Oregon Survey

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## STUDY OBJECTIVES

- To hear directly from low income
  Oregon parents about the barriers
  to accessing health insurance
  coverage for their children.
- To explore potential links between health insurance status and access to healthcare services for Oregon's children.



### STUDY METHODS

 Survey of a random sample drawn from all families with children (age 1-19) enrolled in the food stamp program as of January 31, 2005.

Total sample size is 2,681.



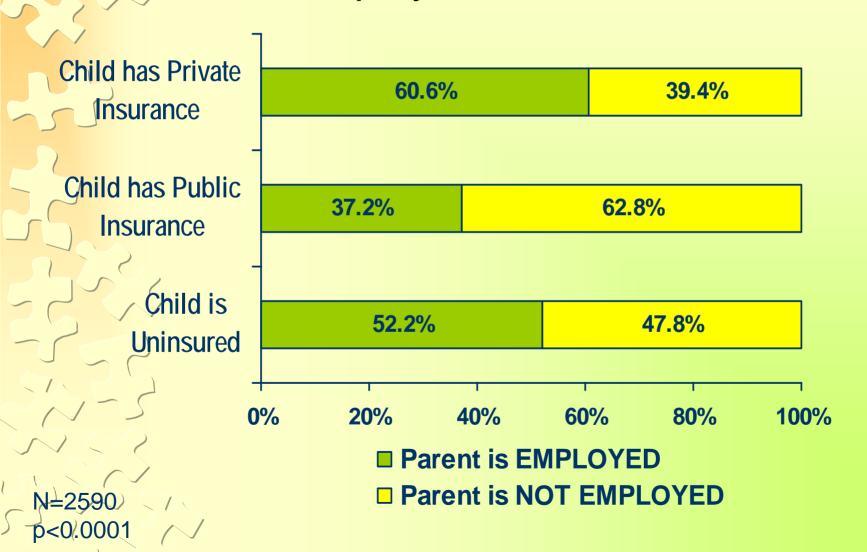
- Sample is representative based on key demographic variables: age, gender, race/ethnicity.
- We would expect that virtually all of these children qualify for the State Children's Health Insurance Program (SCHIP), but found that 10.9% are uninsured.



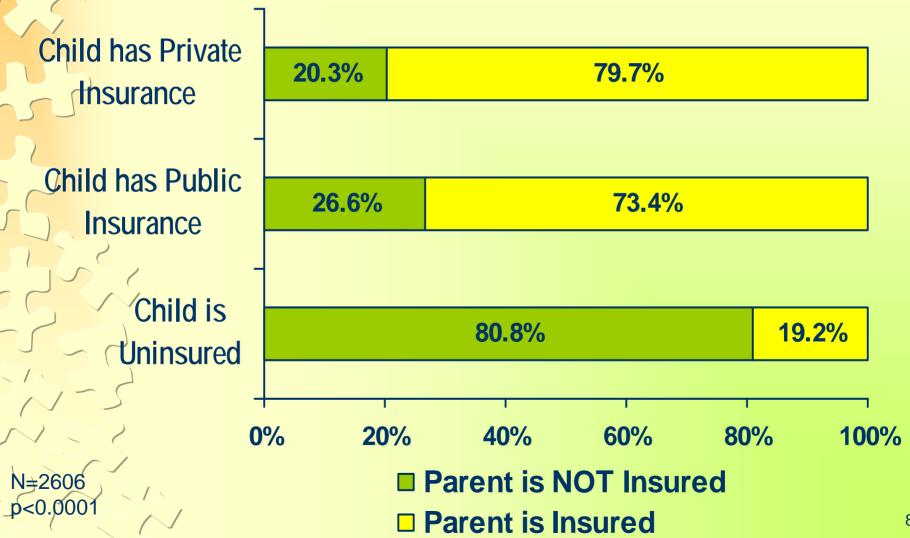
Among Oregon children in the food stamp population, higher rates of uninsurance were associated with being:

- Hispanic
- Older than 14 years of age
- Living in a household earning between 133%-185% of the Federal Poverty Level
- Having an uninsured parent

## Over Half of the Uninsured Children Had Employed Parents

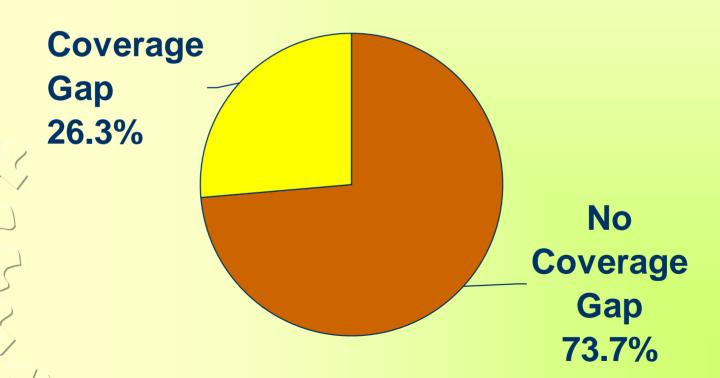


# A High Percentage of Uninsured Children Had Uninsured Parents



# Insurance Coverage Gaps

"At any time in the last 12 months, was your child without health insurance?"



# Why Did Your Child Go Without Health Insurance Coverage?

- 20.7% My child is not eligible for the
   Oregon Health Plan because of my income.
- 20.3% The person whose health insurance covered my child was no longer eligible for coverage (due to reasons like job change or part-time work).
- 16.5% We could not afford to pay the premiums for insurance provided at work.

# "Other" Reported Reasons for Children's Coverage Gaps

- Problems with the OHP application process.
- Missing the OHP re-certification window.
- Confusion about OHP premiums and children's eligibility if parents no longer eligible.

#### Why Was Your Child Uninsured?

"Because I owe money to OHP for back premiums when they dropped adults from the health plans..."

"We own our own business and could not afford insurance premiums...had to wait 6 months to apply for OHP..."

"My employer does not offer insurance, and I don't make enough to get it on my own, and OHP denied us..."

"Their dad was supposed to get them covered through his work, but the costs was too much, and it didn't happen..."

# Impacts: Access to Care

In the past 12 months...

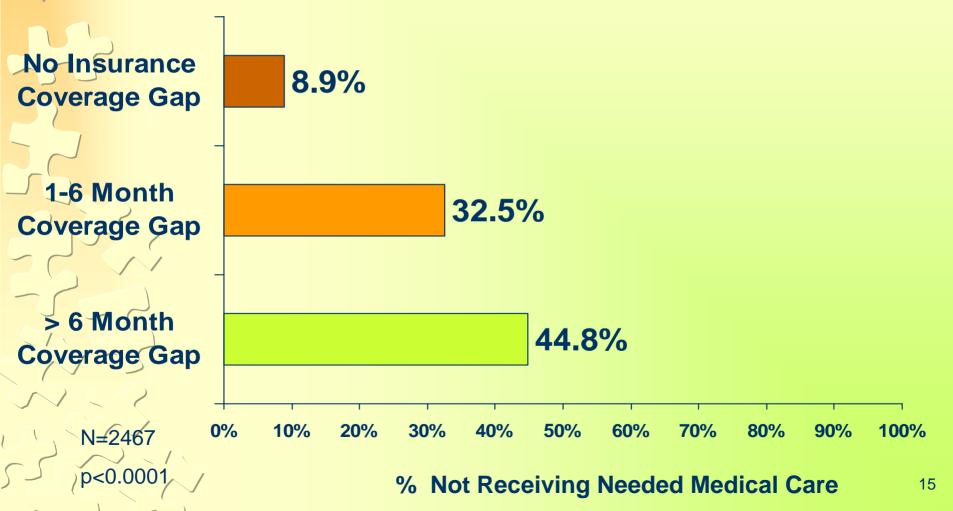
- 1 in 3 uninsured children did not visit a primary care provider.
- 4 out of 5 uninsured children did not get necessary dental care.

# Impacts: Access to Care

- Compared to Insured Children, the Uninsured Children in this study were...
- 6 times more likely to have no usual source of care.
- 3 times more likely to go to the Emergency Department for regular care.

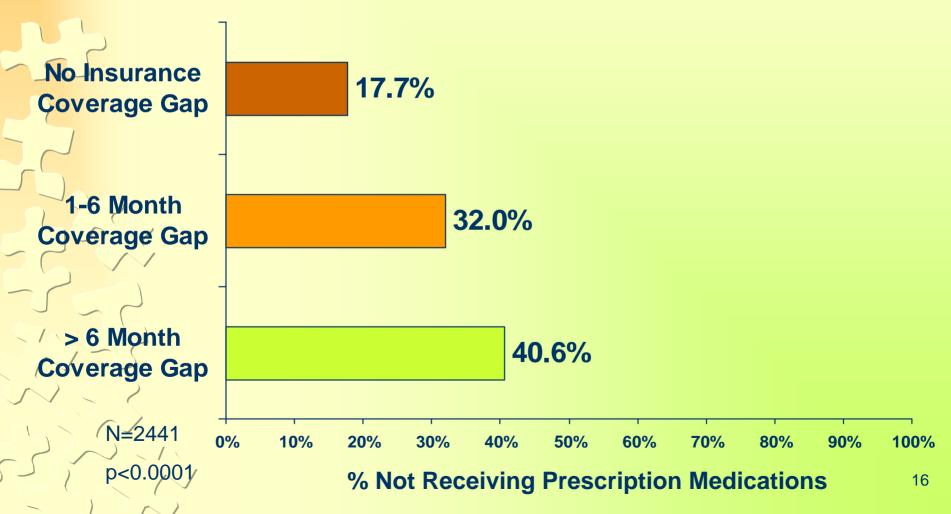
# Children With Insurance Gaps Had the Highest Rates of Unmet Medical Need

"In the Past 12 Months, My Child Needed Medical Care but Did Not Receive It."



# Children With Insurance Gaps Had the Highest Rates of Unmet Prescription Medication Need

"In the Past 12 Months, My Child Did Not Receive Prescription Medications Due to Cost."



# When Parents Were Asked to Identify Three Changes that Would Make it Easier to Stay Enrolled...

- √72.6% said it would be easier if you
  did not have to re-enroll your child in
  the OHP every 6 months.
- √ 35.5% said it would be easier if your child did not have to go without health coverage for 6 months.
- √ 34.1% said they would like to be able to apply on-line.

#### In Conclusion

- Despite eligibility for public or private coverage, Oregon's low-income families have children who are uninsured or experience gaps in their healthcare coverage.
  - Cost and administrative hurdles are the major reasons for families not carrying insurance coverage for their children.

#### In Conclusion

- Lack of health insurance is associated with significantly higher rates of unmet healthcare needs for many of Oregon's children.
- Many of these children have parents who are employed; however, no employer-sponsored coverage is offered, premiums are too expensive, or dependent coverage is not available.

## In Conclusion

 Children are more likely to remain uninsured if their parents are also uninsured.

 Gaps in coverage lead to the same problems as not having any coverage at all.



- Targeted efforts to maximize enrollment and retention of eligible children:
  - Eliminating or reducing the required period of uninsurance.
  - Simplifying the Oregon Health Plan renewal process.
  - Extending the OHP re-enrollment period from 6 to 12 months.
  - Streamlining the OHP application process.
  - Explore ways to lower the cost of coverage for families who have access to employer-sponsored insurance.
- Explore ways to contain the rising cost of healthcare.

#### **ACKNOWLEDGEMENTS**



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