



# Most Uninsured Children Are in Families Served by Government Programs

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**M**any children remain uninsured despite being eligible for public insurance coverage (Dubay and Kenney 1996; Selden, Banthin, and Cohen 1998). Estimates from 1996, prior to the implementation of the Children's Health Insurance Program (CHIP), suggest that as many as 40 percent of all uninsured children were eligible for but not enrolled in Medicaid (Selden et al. 1998). With the advent of national welfare reform and CHIP, the share of uninsured children who are eligible for public programs has likely risen.

Using estimates drawn from the 1997 National Survey of America's Families (NSAF), this brief examines the potential of certain federal programs for reaching the families of uninsured children. We focus here on four particular programs: the National School Lunch Program; the Special Supplemental Program for Women, Infants, and Children (WIC); the Food Stamp program; and the Unemployment Compensation Program.<sup>1</sup> The first three of these are operated by the U.S. Department of Agriculture (USDA); the last is overseen by the U.S. Department of Labor. These programs rely on very different enrollment procedures and require different documentation as compared with Medicaid and CHIP. At the same time, they serve many families with children who should be eligible for Medicaid and CHIP.

Our findings suggest that almost three-quarters of all low-income uninsured children and about 60 percent of all uninsured children live in families that participate in the National School Lunch, WIC, Food Stamp, or Unemployment Compensation programs. The National School Lunch Program—serving families with about 4 million low-income uninsured children—appears to be a particularly efficient vehicle for identifying uninsured children who are eligible for Medicaid or CHIP coverage.

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## Data and Methods

The NSAF is a national household survey that provides information on over 100,000 children and nonelderly adults representing the noninstitutionalized civilian population under age 65 (Brick et al. 1999). The NSAF oversamples the low-income population (those with incomes below 200 percent of the federal poverty level [FPL]) and the population in 13 states<sup>2</sup> and provides reliable estimates for the nation. Detailed information on health insurance coverage and other characteristics was collected on up to two sampled children in each household (one age 5 or under and one between ages 6 and 17). The adult who knew the most about each child's education and health care—the primary caregiver—was the respondent. Interviewers asked primary caregivers about children's current and past year's enrollment in private

and public insurance and followed up with a confirmation question if respondents did not identify any coverage (Rajan, Zuckerman, and Brennan 1999).<sup>3</sup> Overall, information was collected on 34,439 children.<sup>4</sup>

Participation in the National School Lunch<sup>5</sup> and WIC<sup>6</sup> programs was measured at the family level. If primary caregivers reported that at least one individual in the family received free or reduced-price lunches at school or participated in WIC in calendar year 1996, the family as a whole was considered a participant in the National School Lunch or WIC programs. Participation was measured by the enrollment of someone in the child's family, but not necessarily the sampled child whose insurance status was assessed. Therefore, our estimates of how many children can be reached through other programs assume that all children in the household are being reached, not just the child who participates. Participation in these two programs was only assessed for families with incomes that were estimated to be below 200 percent of the FPL based on information provided during the interview.<sup>7</sup> A family's participation in the Food Stamp program was indicated by the reported receipt of benefits at the time the NSAF was administered in 1997; its participation in the Unemployment Compensation Program was demonstrated by the receipt of benefits in calendar year 1996.<sup>8,9</sup>

We also assessed the demographic and socioeconomic characteristics of the uninsured children whose families participated in these programs. These characteristics include the child's age, race/ethnicity, and immigration status; the educational attainment of the primary caregiver; the family structure, income, and work status; and the region and state in which the family lived.

### Extent of Program Participation

Table 1 shows the number of children in families that received benefits during 1996 or 1997 from any or all of the National School Lunch, WIC, Food Stamp, or Unemployment Compensation programs, along with the number of these children who were uninsured and who lived in families with incomes

below 200 percent of the FPL. The proportions of low-income and all uninsured children covered by these programs are also presented. We find that an estimated 16.8 million low-income children resided in families in which at least one child received benefits from the National School Lunch Program during 1996. The NSAF indicates that almost 23 percent of low-income children residing in families that received benefits from this program in 1996 were uninsured at the time that the survey was administered in 1997 (3.9 million divided by 16.8 million). We estimate that about 3.9 million low-income uninsured children—60 percent of all low-income uninsured children and almost half of all uninsured children—resided in families that participated in the National School Lunch Program.

Approximately 9.2 million low-income children are estimated to reside in families that received benefits from the WIC Program during 1996. About 17 percent of the children living in these families—or 1.5 million children—were uninsured at the time of the survey. Altogether, about one in four low-income uninsured children live in families that received WIC benefits at some point during 1996. We estimate that the WIC Program could reach an additional 620,000 low-income uninsured children in families that do not participate in the National School Lunch Program.

According to the NSAF, approximately 8.6 million low-income children resided in families that received benefits from the Food Stamp program at the time of the survey. Only 8 percent of these children were uninsured, which means that about 651,000 low-income uninsured children live in families that received food stamps. We estimate that the Food Stamp program could reach an additional 68,000 low-income uninsured children who do not participate in the National School Lunch or WIC programs.

The NSAF also indicates that there were about 629,000 low-income uninsured children whose families received income from Unemployment Compensation programs in 1996. Among these uninsured children, about a quarter—or 158,000—lived in families that did not participate in the National School Lunch, WIC, or Food Stamp programs.

Altogether, 73 percent of all low-income uninsured children and 62 percent of all uninsured children lived in families that participated in the National School Lunch, WIC, Food Stamp, or Unemployment Compensation programs. Thus, outreach efforts directed through these programs could target nearly three-quarters of low-income uninsured children, the vast majority of whom are likely to be eligible for Medicaid or CHIP coverage.

### Program Participation by Child and Family Characteristics

Table 2 presents the share of low-income uninsured children whose families participated in the School Lunch, WIC, Food Stamp, and Unemployment Compensation programs in 1996 or 1997, by various demographic and socioeconomic characteristics. Participation varies by program, by child and family characteristics, and by geographic location.

The School Lunch Program could reach a high proportion of low-income uninsured children who are school age; fully three-quarters of low-income uninsured children ages 6 to 11 and 65 percent of low-income uninsured children ages 12 to 17 live in families who participate. In contrast, only 38 percent of low-income uninsured children under age 6 live in families that participate in the National School Lunch Program. The WIC program offers greater potential for reaching low-income, uninsured preschool children. About half of all low-income uninsured children under age 6 live in families that participate in WIC.

The capacity to reach low-income uninsured children through the School Lunch, WIC, Food Stamp, and Unemployment Compensation Programs varies by race and birthplace. Overall, 81 percent of Hispanic and 78 percent of black low-income uninsured children could be reached through these programs, while a smaller percentage of other, primarily white, non-Hispanic low-income children could be targeted (66 percent). A slightly higher proportion of low-income uninsured children in foreign-born families relative to uninsured children born in the United States, 76 percent versus 73 percent, could be

**Table 1  
Program Participation of Families with Uninsured Children, 1996–97**

Federal Income Guidelines	Children in Families Receiving Benefits <sup>a</sup>	Low-Income Children in Families Receiving Benefits <sup>a</sup>	Low-Income Uninsured Children in These Families <sup>a</sup>	Low-Income Uninsured Children in These Families Not Participating in Programs Above <sup>a</sup>	Low-Income Uninsured Children in These Families (%) <sup>a</sup>	All Uninsured Children in These Families (%) <sup>a</sup>
National School Lunch Program <sup>b</sup>	18,022,857 (342,367)	16,784,151 (338,257)	3,855,333 (186,263)		60.1 (1.8)	48.5 (1.6)
Free meals if income below 130% FPL; reduced-price meals if income between 130% and 185% FPL						
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) <sup>c</sup>	9,847,941 (286,190)	9,191,740 (283,658)	1,529,649 (110,582)	617,715 <sup>f</sup> (63,348)	23.8 (1.6)	19.0 (1.3)
Income below 185% FPL						
Food Stamp Program <sup>d</sup>	8,903,522 (276,926)	8,578,058 (278,206)	651,377 (88,110)	67,935 <sup>e</sup> (15,721)	10.2 (1.3)	7.8 (1.0)
Income below 130% FPL						
Unemployment Compensation <sup>e</sup>	5,103,907 (199,172)	2,327,813 (149,640)	629,478 (80,651)	158,019 <sup>h</sup> (47,901)	9.8 (1.1)	10.3 (0.9)
Participation in School Lunch, WIC, Food Stamp, or Unemployment Compensation Programs	26,622,157 (349,593)	22,335,896 (345,188)	4,699,003 (210,042)		73.2 (1.6)	61.5 (1.5)

*Source:* Urban Institute tabulations from the 1997 National Survey of America's Families (NSAF).  
*Note:* Insurance coverage is measured at the time of the survey.

- a. Standard errors for each estimate are given in parentheses.
- b. Represents children in families in which at least one child received benefits from the School Lunch Program in 1996.
- c. Represents children in families in which at least one child received benefits from the WIC program in 1996.
- d. Represents children in families that were receiving Food Stamp benefits at the time the NSAF was administered in 1997.
- e. Represents children in families in which at least one person received Unemployment Compensation in 1996.
- f. Represents low-income uninsured children in families that received WIC benefits but not School Lunch Program benefits.
- g. Represents low-income uninsured children in families that received Food Stamp benefits but not School Lunch Program or WIC benefits.
- h. Represents low-income uninsured children in families that received Unemployment Compensation but not School Lunch Program, WIC, or Food Stamp benefits.

**Table 2**  
**Low-Income Uninsured Children in Families Enrolled in Public Programs, 1996–97**

	School Lunch Program <sup>a</sup>		WIC <sup>b</sup>		Food Stamps <sup>c</sup>		Unemployment Compensation <sup>d</sup>		Any of These Four Programs		
	(No.)	(%)	(No.)	(%)	(No.)	(%)	(No.)	(%)	(No.)	(%)	(S.E.) <sup>e</sup>
<b>Child Characteristics</b>											
Age											
0–5	750,155	38	950,634	48	166,680	8	141,556	7	1,344,959	68	(2.3)
6–11	1,600,824	75	286,925	13	170,786	8	225,583	11	1,677,171	79	(2.8)
12–17	1,504,354	65	292,089	13	313,911	14	262,340	11	1,676,873	72	(2.3)
Race/Ethnicity											
Hispanic	1,458,105	68	648,256	30	205,241	10	178,316	8	1,741,253	81	(2.0)
Black (non-Hispanic)	807,612	70	188,309	16	221,043	19	84,311	7	909,594	78	(3.3)
Other (non-Hispanic)	1,589,616	51	693,085	22	225,093	7	366,851	12	2,048,156	66	(3.0)
Immigration Status											
U.S. born	3,283,363	58	1,364,738	24	546,610	10	587,757	10	4,100,098	73	(1.8)
Foreign born	571,970	73	164,911	21	104,768	13	41,721	5	598,905	76	(3.9)
<b>Family Characteristics</b>											
Educational Status <sup>f</sup>											
No HS diploma or GED	1,641,659	70	620,443	26	290,301	12	207,254	9	1,895,474	80	(2.2)
HS diploma or GED, no bachelor's degree	2,094,712	57	865,933	23	354,628	10	401,191	11	2,639,825	71	(2.2)
Bachelor's degree or higher	118,961	35	43,272	13	6,448	2	21,034	6	163,705	49	(5.9)
Work status of parent(s)											
Two full-time workers	683,261	65	225,691	22	39,697	4	211,220	20	835,654	80	(3.4)
One full-time worker	2,285,849	60	962,360	25	308,282	8	278,292	7	2,768,739	72	(2.1)
Part-time worker(s) only, no full-time workers	335,655	52	129,995	20	106,874	17	66,156	10	443,805	69	(5.7)
Not working	547,674	62	211,604	24	196,300	22	73,811	8	647,910	73	(3.6)
Family Structure											
Single-parent household	1,376,979	61	432,532	19	342,711	15	210,820	9	1,649,338	73	(2.5)
Two-parent household	2,232,796	59	1,022,827	27	246,109	7	411,970	11	2,786,604	74	(2.2)
No parents in household	245,558	63	74,289	19	62,557	16	6,688	2	263,061	68	(4.9)
Family Income											
Less than 50% FPL	688,303	62	299,040	27	268,947	24	35,038	3	826,989	75	(3.8)
50–100% FPL	1,265,554	65	497,365	26	241,962	12	265,863	14	1,496,907	77	(2.6)
100–150% FPL	1,322,484	63	512,626	24	73,120	3	148,726	7	1,598,877	76	(2.8)
150–200% FPL	578,992	46	220,617	18	67,348	5	179,851	14	776,230	62	(3.8)
<b>Geographic Location</b>											
Region											
Northeast	365,972	51	130,622	18	66,737	9	80,500	11	460,227	64	(4.1)
Midwest	595,897	60	251,603	25	78,867	8	112,762	11	734,029	74	(4.3)
South	1,705,665	61	560,906	20	336,514	12	185,737	7	2,065,097	73	(2.2)
West	1,187,800	63	586,517	31	169,258	9	250,480	13	1,439,650	76	(3.0)
State											
Alabama	82,473	66	19,597	16	40,069	32	9,410	7	98,757	79	(4.4)
California	700,323	66	314,980	30	92,151	9	115,318	11	854,048	81	(3.3)
Colorado	53,083	51	14,650	14	9,235	9	4,938	5	64,400	62	(4.2)
Florida	248,409	53	128,574	28	38,531	8	14,847	3	317,709	68	(3.8)
Massachusetts	26,980	46	10,319	18	6,371	11	4,950	8	35,531	61	(7.7)
Michigan	58,910	56	13,329	13	8,337	8	17,428	17	77,356	74	(5.8)
Minnesota	24,786	54	12,170	26	1,412	3	4,584	10	33,091	72	(7.2)
Mississippi	85,077	67	28,723	23	37,214	29	12,025	9	100,324	79	(3.4)
New Jersey	65,136	57	12,791	11	10,663	9	13,998	12	79,603	69	(4.4)
New York	194,224	57	63,585	19	34,624	10	37,891	11	239,765	70	(3.4)
Texas	589,108	64	204,591	22	115,480	13	57,982	6	682,203	74	(2.8)
Washington	24,252	39	16,727	27	6,354	10	10,963	17	38,756	62	(4.1)
Wisconsin	35,203	55	10,135	16	3,284	5	10,478	16	41,634	65	(3.6)

Source: Urban Institute calculations from the 1997 National Survey of America's Families (NSAF).

Note: Insurance coverage is measured at the time of the survey.

- Represents children in families in which at least one child received benefits from the School Lunch Program in 1996.
- Represents children in families in which at least one child received benefits from the WIC program in 1996.
- Represents children in families that were receiving Food Stamp benefits at the time the NSAF was administered in 1997.
- Represents children in families in which at least one person received Unemployment Compensation in 1996.
- Standard error.
- Represents status of child's primary caregiver.

identified through these programs, although the proportions are not statistically different from one another. Overall, Hispanic children represent over one-third of all the low-income uninsured children whose families participate in any of these programs, while foreign-born children represent a smaller proportion, 13 percent, of uninsured children participating in any of these programs (results not shown).

These programs could reach about 76 percent of all uninsured children in families below 150 percent of the FPL and about 62 percent of the uninsured children whose family incomes are between 150 percent and 200 percent of the FPL. Similarly, they could reach higher proportions of low-income uninsured children whose parents lack a high school diploma or general equivalency diploma (GED) relative to uninsured children whose parents have more education.

Table 2 also shows that the capacity to direct Medicaid and CHIP enrollment efforts to low-income uninsured children through these programs varies across regions and states. Specifically, smaller percentages of low-income uninsured children in the Northeast could be reached through these programs relative to other regions of the country. Among the 13 states oversampled in the NSAF, Alabama, California, and Mississippi exhibit the highest percentage of low-income uninsured children who could be reached through these programs, at about 80 percent, while Massachusetts, Colorado, and Washington exhibit the lowest proportion, at about 61 percent.

## Policy Implications

Over the last several years, federal and state governments have been working to overcome barriers that prevent eligible children from gaining insurance coverage. Many resources are now being devoted to outreach efforts aimed at increasing Medicaid and CHIP enrollment among eligible uninsured children.<sup>10</sup> Under CHIP, which was enacted in 1997, states are entitled to approximately \$40 billion through the year 2007 to expand insurance coverage for children and are mandated to develop outreach strategies as part of their CHIP plans. The welfare reform legis-

lation of 1996, which “delinked” Medicaid from welfare, provided states with additional funds to ensure that children continue to receive Medicaid coverage under the new Temporary Assistance for Needy Families (TANF) program.

One federal effort has involved bringing together federal departments that serve children in order to identify ways to enroll more children in Medicaid and CHIP (DHHS 1998, 1999). The Interagency Task Force on Children’s Health Insurance Outreach led a number of government agencies to identify ways to use other government programs to reach uninsured children (DHHS 1998, 1999). One of the problems in designing outreach strategies is the absence of information on how best to target outreach efforts. The analysis presented here suggests that government programs, especially those operated by the USDA, are indeed already serving families with large numbers of uninsured children and thus represent a very promising outreach tool—especially for reaching uninsured Medicaid-eligible children. Because fewer uninsured children in families with incomes between 150 percent and 200 percent of the FPL participate in these programs as compared with families with even lower incomes, our findings suggest that these programs will reach proportionally more Medicaid-eligible than CHIP-eligible children.

The key question is how to effectively use these programs to enroll uninsured children who are eligible for public health insurance (The Children’s Partnership 1999). Florida has been recognized as one of the first states to utilize schools to reach uninsured children, and in 1996 the Florida Healthy Kids program was the recipient of the 1996 Innovations in American Government Award. Several states have modeled their CHIP programs after Florida’s approach, but new complexities have been introduced under CHIP because states are now required to screen children for Medicaid eligibility and enroll eligibles in Medicaid. President Clinton has asked the secretaries of education, health and human services, and agriculture to identify effective school-based strategies that can be replicated throughout the nation (DHHS 1999).

Some localities are building outreach efforts around the School Lunch Program, which, according to the NSAF, serves the families of an estimated 60 percent of all low-income uninsured children. The USDA added a health insurance information box to its prototype application forms, although no information is available on how widely used the new prototype forms are. Other efforts have included sending informational flyers to parents and positioning trained volunteers at schools to answer questions and help complete applications (Pulos and Lee 1999). States that have attempted to coordinate children’s health insurance coverage with the National School Lunch Program have faced a number of barriers, including the need to protect the privacy of lunch program applicants and the fact that Medicaid and CHIP programs require more information (e.g., details on income, other sources of health insurance, and immigration status) than the National School Lunch Program (Pulos and Lee 1999). One suggestion has been to use participation in the National School Lunch Program as presumptive proof of eligibility for health insurance (“A Sensible Way to Improve Kid Care” 1999). It will be important to identify how programs can successfully overcome these hurdles, because these data suggest that removing such barriers could yield substantial reductions in the number of children who are uninsured.

To be successful, outreach and enrollment efforts must address other barriers as well. Focus groups conducted in California in 1998 suggest that there are many reasons that uninsured children do not obtain public coverage (Lake Snell Perry & Associates 1998). The issues included confusion about the eligibility criteria, frustration with the enrollment process, the negative image associated with enrolling in a program so closely linked to welfare, and concerns about the quality of health care services available through public programs. An additional issue for immigrant families in California was the concern that enrollment could threaten their immigration status. Informing the parents who participate in the National School Lunch Program that their uninsured

children are eligible for public coverage may be only one part of the solution; it may also be necessary to address these other concerns.

While these data indicate that the majority of uninsured children live in families that participate in other government programs, a large number of uninsured children—over 1.5 million—live in low-income families that do not participate in these programs. Identifying these children and getting them health insurance coverage may pose even greater obstacles. Recent evidence also suggests that growing numbers of children and families are not participating in other programs, such as Food Stamps, for which they are eligible (Zedlewski and Brauner 1999). If the objective is to provide insurance and other benefits to low-income children, new strategies may be required in the era of federal welfare reform.

## Notes

1. Because of data issues, we do not report estimates of the number of uninsured children who live in families that participate in either the Head Start or the Section 8 Housing programs, although preliminary estimates suggest that only a small number of additional children would be reached. Data from the second round of the National Survey of America's Families will permit a more accurate assessment for Head Start and Section 8 programs and will allow an assessment of the number of uninsured children whose families received the Earned Income Tax Credit.

2. The 13 selected states are Alabama, California, Colorado, Florida, Massachusetts, Michigan, Minnesota, Mississippi, New Jersey, New York, Texas, Washington, and Wisconsin.

3. In part, the inclusion of a confirmation question in the NSAF reduces the number of children identified as uninsured to levels below those identified by the Current Population Survey (CPS). Differences between the NSAF and CPS may also arise because the NSAF collects data on insurance coverage at the time of the survey, but CPS data pertain to insurance coverage during the previous calendar year.

4. The household response rate for the NSAF is 70 percent (Brick et al.

1999). Responses to the interviews are weighted to reflect the design features of the sample, including the oversampling of low-income households in 13 states, and contain adjustments for nonresponse and undercoverage. We compute variance estimates using a replication method that adjusts for the survey's complex sample design. Flores-Cervantes, Brick, and DiGaetano (1999) describe this method and its application to the NSAF in detail. We use imputed data for health insurance, income, and other variables with missing values. Imputed values account for 1.3 percent or less of all observations for health insurance (Dipko et al. 1999).

5. Families with children age 5 or older were asked whether someone received benefits from the free or reduced-cost lunch program at school. The NSAF also assessed family participation in the School Breakfast Program. Ninety-seven percent of uninsured children with family participation in either program lived in families that received free or reduced-cost lunches; including breakfast-only families did not significantly change our estimates.

6. Families with children under age 6 were asked whether anyone received benefits from the WIC program.

7. An income measure defined during the administration of the survey was used for determining who would be asked the school lunch and WIC questions. Thus, we may be missing some families that participated in these programs, and a small portion (6 percent) of the families that responded to this question were reclassified as having incomes higher than 200 percent of the FPL.

8. Although insurance coverage and Food Stamp program participation reflect the family's status at the time of the survey, School Lunch, WIC, and Unemployment Compensation participation was measured for calendar year 1996. Thus, we may be missing some uninsured children whose families did not participate in these latter programs in calendar year 1996 but who participated at the time of the survey in 1997; at the same time, some of the children who were uninsured at the time of the survey may not have been uninsured at the time the family participated in these programs. However, since being currently uninsured and being uninsured during the last 12 months is highly correlated (the correlation coefficient is over 80 percent), there is a high likelihood that the child was

uninsured when the family was participating in these programs.

9. To the extent possible, we have compared our estimates of program participants to administrative counts of participants. Our estimates appear reasonable when compared to administrative data, especially in light of conceptual differences between the NSAF estimates and the administrative data. Government sources (U.S. Congress 1998) report that 14.6 million children received free or reduced-price lunches in calendar year 1996, while our data indicate that about 18 million children lived in families that received free or reduced-price lunches (we cannot identify who received free or reduced-price lunches in a family). Government statistics (DHHS 1999) indicate that 5.6 million children received WIC benefits each month in 1996, while our data indicate that 7.1 million children under age 6 lived in families that received WIC benefits at some point during 1996 (we cannot identify who received WIC benefits in a particular family). The NSAF reports that 8.9 million children lived in families that received food stamps at a point in time during 1997, while administrative records (DHHS 1999) indicate that about 9.6 million children received food stamps on a monthly basis in 1998. Administrative data on recipients of unemployment compensation do not indicate whether there are children under age 18 in the household and thus cannot be made comparable to the NSAF estimates. However, we estimate that about 6 million nonelderly adults received Unemployment Compensation benefits in 1996, while administrative data indicate that there were 8.1 million beneficiaries in that year (U.S. Congress 1998).

10. For a summary of outreach strategies, see Health Resources and Services Administration (1999).

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### Discussion Papers

- No. 17. *Current and Former Welfare Recipients: How Do They Differ?* Pamela J. Loprest and Sheila R. Zedlewski. November 1999.
- No. 15. *Sources of Support and Income Inequality among America's Children*. Gregory Acs and Megan Gallagher. October 1999.
- No. 13. *Declines in Food Stamp and Welfare Participation: Is There a Connection?* Sheila R. Zedlewski and Sarah Brauner. October 1999.
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This series presents findings from the National Survey of America's Families (NSAF). First administered in 1997, the NSAF is a survey of 44,461 households with and without telephones that are representative of the nation as a whole and of 13 selected states (Alabama, California, Colorado, Florida, Massachusetts, Michigan, Minnesota, Mississippi, New Jersey, New York, Texas, Washington, and Wisconsin). As in all surveys, the data are subject to sampling variability and other sources of error. Additional information about the survey is available at the Urban Institute Web site: <http://www.urban.org>.

The NSAF is part of *Assessing the New Federalism*, a multiyear project to monitor and assess the devolution of social programs from the federal to the state and local levels. Alan Weil is the project director. The project analyzes changes in income support, social services, and health programs. In collaboration with Child Trends, the project studies child and family well-being.

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