

The Composition of Children Enrolled in Medicaid and CHIP

A Summary

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Over the past 25 years, children's eligibility for public health insurance coverage has grown substantially. In 2010, as many as 40 million children had coverage through Medicaid and CHIP at some point during the year (MACPAC 2012). Our paper, from which this fact sheet is drawn, relies on information from multiple household surveys to examine changes over the past decade in the racial and ethnic composition of children covered by Medicaid/CHIP and in the insurance distribution of children in different racial and ethnic groups; it also assesses whether the composition of Medicaid/CHIP enrollees varies for children in different racial and ethnic groups by geographic location, income, and other factors.

- Medicaid and CHIP have grown in importance over the past decade, particularly among minority children. The two programs covered over a third of all children in 2010, over a fifth of white children, and more than half of all Hispanic and black children (figure 1).
- Children covered by Medicaid/CHIP in each of the three racial and ethnic groups examined tend to live in different areas of the country (table 1):
 - White children covered by Medicaid/CHIP are much more likely than their Hispanic and black counterparts to live outside metropolitan statistical areas (MSAs)—over 33 percent of the white children covered by Medicaid or CHIP live outside an MSA, compared with approximately 15 and 8 percent, respectively, of their black and Hispanic counterparts.
 - White children covered by Medicaid/CHIP are more likely than black and Hispanic children to live in the Midwest; they are less likely than black children to live in the South and less likely than Hispanic children to live in the West. Overall, between 50 and 60 percent of black children covered by Medicaid or CHIP live in the South, while around 45 percent of the Hispanic children covered by Medicaid or CHIP live in the West.

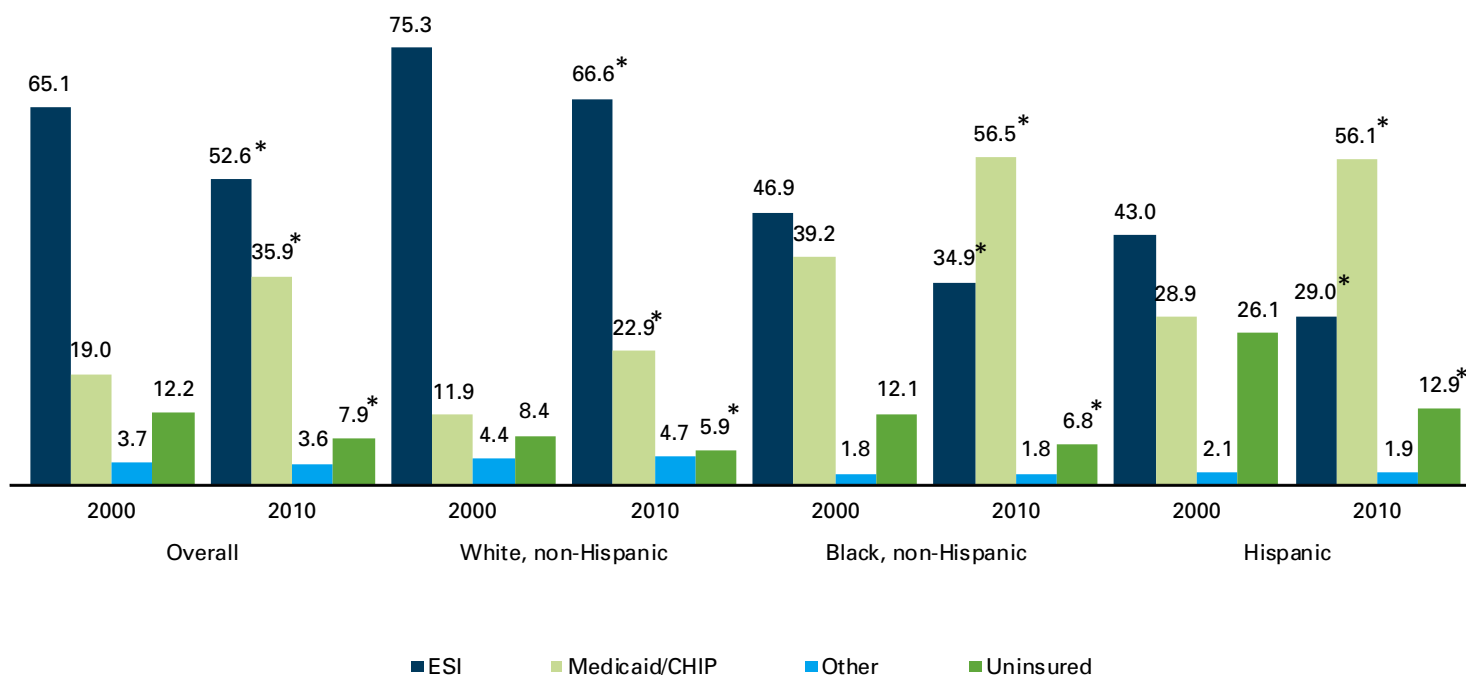
- The picture of health status is complex. White children with Medicaid/CHIP coverage are more likely to be characterized as being in excellent or very good health, but also more likely to meet the definition of having a special health care need. Black children covered by Medicaid or CHIP in 2010 were more likely to have been diagnosed with ADHD/ADD or asthma than black children in those programs in 2000 (table 1).

This analysis indicates how important state and federal Medicaid and CHIP policies are for children, particularly for the large and growing share of black and Hispanic children who rely on public health insurance coverage. Given their geographic location, white and black children covered by Medicaid and CHIP will be most affected by policies implemented by states in the Midwest and South (with the South being relatively more important for black children and the Midwest for white children), whereas policies implemented by states in both the South and the West will have the greatest potential impact for Hispanic children.

The differences in the residential distribution of children of different races and ethnicities covered by Medicaid and CHIP may also affect their access to care and service use patterns. Full implementation of the Affordable Care Act (ACA) is projected to lead to further increases in Medicaid and CHIP coverage for children due to the combination of the new outreach and enrollment efforts, the expansion of Medicaid eligibility, and the individual requirement to have health insurance coverage. However, some states have indicated that they may not implement the Medicaid expansion; other states may not be as aggressive about their ACA-related outreach and enrollment efforts. Moreover, the future of CHIP, and of public coverage for children more generally, is uncertain beyond 2015. In addition, federal budget issues have led some to call for block grants in Medicaid.

These possible changes make it all the more important to monitor how federal and state policies affect children overall, especially black and Hispanic children who rely heavily on Medicaid and CHIP coverage.

Figure 1. Change in Health Insurance Coverage of Children by Race/Ethnicity, 2000 and 2010 (percent)



Sources: 2000 and 2010 National Health Interview Surveys (NHIS).

Notes: Children are age 0–17. Health insurance coverage is defined at the time of the survey. Employer-sponsored insurance (ESI) is defined as those who report coverage through an employer (including self-employed), union, or the military (TRICARE/CHAMPVA). Medicaid/CHIP includes Medicaid and CHIP, other government or public coverage, and private coverage that the government either helped pay for or that was obtained through the government. Children who report more than one type of health insurance coverage at the time of the survey are assigned to a single coverage category based on a hierarchy of ESI, Medicaid/CHIP, and other coverage, except children dually enrolled in Medicaid and Medicare, who are categorized as having other coverage.

* Significantly different from zero at the .05 level, using a two-tailed test.

Note

This fact sheet summarizes “The Composition of Children Enrolled in Medicaid and CHIP: Variation over Time and by Race and Ethnicity” by Christine Coyer and Genevieve M. Kenney, Low-Income Working Families Paper 22, February 2013.

Reference

Medicaid and CHIP Payment and Access Commission (MACPAC). 2012. “Report to Congress on Medicaid and CHIP: March 2012.” Washington, DC: MACPAC.

The Low-Income Working Families project investigates the risks faced by millions of families and their children, whose household earnings are insufficient to meet their basic needs. The project applies rigorous research methods and cross-cutting expertise, from housing to health care, to identify private and public strategies that can improve these families’ well-being. The Low-Income Working Families project is supported by the Annie E. Casey Foundation.

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Table 1. Change in Characteristics of All Children and among Those with Insurance through Medicaid/CHIP by Race/Ethnicity, 2000 and 2010

	Overall			Full-Year Medicaid/CHIP											
	2000 (%)	2010 (%)	Difference (% point)	Total			White, Non-Hispanic			Black, Non-Hispanic			Hispanic		
	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)
Sex															
Female	48.8	48.9	0.0	50.1	48.9	-1.2	49.0	48.9	-0.1	49.9	49.6	-0.3	51.7	49.1	-2.6
Male	51.2	51.1	0.0	49.9	51.1	1.2	51.0	51.1	0.1	50.1	50.4	0.3	48.3	50.9	2.6
Citizenship															
Noncitizen	3.3	3.0	-0.4	2.3	3.4	1.2 *	1.5	1.5	0.0	0.9	2.4	1.5	4.0	4.6	0.7
Anyone in HIU noncitizen ^a	12.7	16.3	3.6 *	17.0	25.4	8.3 *	4.4	4.3	-0.1	3.9	6.3	2.3	46.2	57.9	11.7 *
Family composition															
Two parents	72.5	68.8	-3.7 *	42.8	48.7	5.9 *	54.3	50.2	-4.1	19.5	24.8	5.3 *	50.0	61.2	11.2 *
Single mother, no father present	21.8	24.2	2.3 *	47.3	41.4	-5.8 *	34.8	35.8	0.9	69.2	64.5	-4.8	42.7	33.5	-9.1 *
Other	5.7	7.1	1.4 *	9.9	9.9	0.0	10.8	14.0	3.2	11.3	10.7	-0.5	7.3	5.3	-2.0
Parent education^b															
Less than high school	13.6	12.9	-0.7	34.8	27.8	-7.0 *	21.3	14.0	-7.4 *	33.6	22.8	-10.8 *	55.8	45.3	-10.5 *
High school	24.0	20.5	-3.5 *	34.2	31.8	-2.4	37.5	36.0	-1.4	36.2	29.3	-6.9 *	26.0	29.8	3.8
More than high school	62.4	66.6	4.2 *	31.0	40.4	9.4 *	41.2	50.0	8.8 *	30.2	47.9	17.7 *	18.2	24.9	6.7 *
Household income															
Less than 100% of FPL	19.3	25.6	6.3 *	57.9	56.6	-1.3	47.0	47.4	0.4	65.0	65.6	0.6	65.4	60.0	-5.4 *
100–150% of FPL	10.4	11.4	1.0	19.1	19.0	-0.1	21.1	20.2	-0.9	17.8	16.9	-0.9	17.6	19.7	2.1
150–200% of FPL	10.2	9.6	-0.6	10.5	10.8	0.3	13.8	13.0	-0.8	7.9	8.2	0.3	9.2	10.3	1.2
200–300% of FPL	17.3	15.3	-2.0 *	7.5	8.5	1.0	10.6	11.7	1.1	5.5	6.4	0.9	5.7	6.8	1.2
300–400% of FPL	14.6	11.7	-2.9 *	3.0	2.6	-0.3	4.1	3.8	-0.3	2.8	1.7	-1.1	1.3	1.8	0.5
More than 400% of FPL	28.2	26.4	-1.9 *	2.0	2.4	0.4	3.5	4.0	0.4	1.0	1.2	0.2	0.9	1.4	0.5
Census region															
Northeast	18.6	15.6	-3.0 *	20.4	15.1	-5.3 *	19.9	15.0	-4.9 *	18.2	15.0	-3.2	23.8	14.9	-8.9 *
Midwest	24.7	23.7	-1.1	19.8	22.6	2.9	24.2	35.5	11.3 *	21.9	25.0	3.1	9.4	9.0	-0.4
South	35.2	35.9	0.7	37.5	37.6	0.1	40.2	33.6	-6.5 *	51.8	52.5	0.7	20.8	33.2	12.4 *
West	21.5	24.9	3.4 *	22.3	24.7	2.3	15.7	15.9	0.2	8.1	7.5	-0.6	45.9	42.9	-3.0
Health status															
Excellent/very good	82.8	81.8	-1.1	69.5	71.9	2.4	72.0	75.1	3.1	67.7	66.2	-1.5	69.7	72.8	3.1
Good	15.3	16.0	0.6	25.6	23.7	-1.8	22.1	21.4	-0.7	27.3	27.6	0.3	26.5	23.3	-3.2
Fair/poor	1.8	2.3	0.5 *	5.0	4.4	-0.6	5.9	3.5	-2.4 *	4.9	6.2	1.2	3.8	3.9	0.1

(continued)

Table 1. Change in Characteristics of All Children and among Those with Insurance through Medicaid/CHIP by Race/Ethnicity, 2000 and 2010 *(continued)*

	Overall			Full-Year Medicaid/CHIP											
				Total			White, Non-Hispanic			Black, Non-Hispanic			Hispanic		
	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)	2000 (%)	2010 (%)	Difference (% point)
Ever told child has															
ADHD/ADD ^c	6.2	7.8	1.6 *	7.8	11.2	3.4 *	11.7	16.1	4.4	7.3	14.1	6.8 *	3.5	5.0	1.4
Asthma	12.4	13.6	1.3 *	16.7	17.1	0.4	17.7	17.6	0.0	18.4	23.4	5.0 *	13.9	12.7	-1.2
Autism	0.3	0.9	0.6 *	0.5	1.1	0.6 *	0.8	1.8	1.0	0.3	0.5	0.2	0.3	0.7	0.4
Cerebral palsy	0.6	0.2	-0.4 *	1.2	0.4	-0.8 *	1.3	0.6	-0.8	1.4	0.3	-1.1 *	0.8	0.3	-0.5
Congenital heart disease	1.3	1.2	-0.2	1.8	1.4	-0.3	1.8	1.9	0.1	1.4	1.5	0.1	2.0	0.7	-1.3
Down syndrome	0.1	0.2	0.0	0.2	0.2	0.0	0.1	0.1	0.0	0.3	0.1	-0.2	0.3	0.3	0.0
Mental retardation	0.7	0.6	-0.1	1.8	0.9	-0.9 *	2.2	1.6	-0.6	1.9	0.8	-1.1	1.1	0.5	-0.6
Other developmental delay	3.1	4.4	1.3 *	5.3	5.9	0.6	6.8	8.5	1.7	5.8	5.3	-0.5	2.6	3.7	1.1
Sample size	13,376	11,277		2,401	3,934		698	978		679	1,004		939	1,762	

Sources: 2000 and 2010 National Health Interview Surveys (NHIS).

Notes: Children are age 0 to 17. Health insurance coverage is full-year coverage under Medicaid/CHIP at the time of the survey.

* Significantly different from zero at the .05 level, using a two-tailed test.

^a HIU stands for health insurance unit, which is similar to the nuclear family and defined as the members of the family who are generally eligible for the same private health insurance plan.

^b Defined among children with parent(s) in the household.

^c Question only asked for children age 2 to 17.