Carsey Institute: Families Shifting From Private To Public Health Insurance For Children

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DURHAM, N.H. – Families are increasingly relying on public health insurance plans to provide coverage for their children, a growing trend that researchers say is tied to job losses, coverage changes to private health insurance plans, and expanded access to public plans, according to new research from the Carsey Institute at the University of New Hampshire.

The trend is particularly pronounced within rural and inner-city areas, which traditionally have had lower coverage rates than suburban areas.

“When people become unemployed, not only do they lose their employment-based private insurance, but, with the loss of income, families may become newly eligible for public plans. In addition, the generally poor economy and expanded eligibility for public plans may also play less direct roles in the shifting rates of health insurance among children,” the researchers said.

Public health insurance for children is provided principally through Medicaid and the State Children’s Health Insurance Program (SCHIP). Congress is considering a wide range of significant funding cuts to both programs as part of the negotiations over the budget deficit, with proposals ranging from cutting $100 billion over ten years to $1 trillion over the same period.

The key findings of this research show:

- Health insurance coverage among children increased 1.3 percentage points from 2008 to 2009 in the United States, with the most growth in central cities and rural areas.
- The Northeast continues to have the highest rate of coverage, with more than 95 percent of children covered. The South has the lowest coverage rates, at 89 percent.
- Forty-four states plus Washington, DC and Puerto Rico had a significant increase in the number of children covered by public health insurance.
- Twenty-seven states saw a decrease in private health insurance coverage for children.
- Children in Midwestern central cities experienced the largest shift from private to public insurers in 2009; private insurance coverage fell 4.3 percentage points, while public coverage rose by 6.5 percentage points.

Approximately 9 percent of children nationwide are not covered by any form of insurance. More than half these children are eligible for coverage through Medicaid or SCHIP.

“Research demonstrates that most of these eligible children come from states with low participation rates and are disproportionately Hispanic. Because those who have health insurance are healthier overall and, more importantly, because healthy children are more likely to become healthy adults, focusing on covering eligible children should remain at the forefront of the nation’s agenda,” the researchers said.
The complete report about this research, “Total Children Covered by Health Insurance Increased in 2009,” is available at http://www.carseyinstitute.unh.edu/CarseySearch/search.php?id=168.

This research is based upon U.S. Census Bureau estimates from the 2008 and 2009 American Community Survey released in September 2009 and 2010, and on Bureau of Labor Statistics data from 2009.

The Carsey Institute conducts policy research on vulnerable children, youth, and families and on sustainable community development. The institute gives policy makers and practitioners the timely, independent resources they need to effect change in their communities. For more information about the Carsey Institute, go to www.carseyinstitute.unh.edu.

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**GRAPHIC**
Change in Children’s Health Insurance Coverage Type, 2008-2009
http://www.unh.edu/news/img/carsey_healthinsurance.jpg

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