Why Health Insurance Matters for Children

A great deal of public attention has been given to the gains in children's health insurance coverage made in recent years. But while public program expansions have driven significant increases in the number of children who are insured, more than 9 million still lack health insurance—that's one out of every eight children.[1] This fact sheet discusses several important reasons why health insurance makes a real difference in children's lives.

Six Good Reasons Why Children Should Have Health Insurance

1. Children with insurance are more likely to have a usual source of care.
2. Children with insurance are more likely to have access to preventive care.
3. Children with insurance get the health care services they need.
4. Insuring children will help close the racial disparities gap.
5. Health insurance helps improve social and emotional development.
6. Insured children are better equipped to do well in school.

More than 9 million children in the U.S. are currently missing out on the benefits—both physical and developmental—that health insurance provides. From enabling access to basic health care services to preventing problems that can make a difference for a lifetime, health insurance matters for children. It is time that all children be given the same opportunity for a healthy start.

1 Children with insurance are more likely to have a *usual source of care*.

A ***usual source of care*** is the medical provider a person sees regularly for primary care. For a child, this is usually a pediatrician. Having a usual source of care helps ensure that the provider knows the child's medical history. It also helps ensure that the family has a person they are comfortable consulting on a regular basis about any health care needs the child may have. The provider is often available for urgent and after-hours care. He or she also helps the family obtain any specialty services the child may need and follows up after the child sees a specialist.

Children who have a usual source of care are more likely to be up-to-date with their immunizations, and having a usual source of care is associated with better health, receiving cost-effective care, and reducing health disparities.[2, 3]

- Children with insurance are eight times more likely to have a usual source of care.[4]
- In 2003, uninsured children were 2.7 times more likely than insured children not to have seen a health care provider in the previous 12 months.[5]

State Studies:
Pennsylvania

A study comparing children in Pennsylvania before and one year after they got public health insurance coverage found that children were 11 times more likely to lack a usual source of care when they were uninsured than they were after becoming insured.[6]

2 Children with insurance are more likely to have access to *preventive care*.

Preventive care, also known as ***"well-child" care***, includes basic health services such as immunizations, hearing and vision screenings, monitoring a child's growth and development, and answering parents' questions about their child's health.

- Children in public programs are one-and-one-half times more likely to obtain well-child care than uninsured children.[7]
- In 2003, uninsured children were more than twice as likely to have gone without a preventive care visit in the past year as children who had insurance.[8]

State Studies:
Colorado

A study comparing children in Colorado before and after they got public health insurance coverage found an increase in the proportion who saw a provider for preventive care during the first year of coverage.[9]

3 Children with insurance get the *health care services they need*.

Access to health care services is often measured by whether a child has an ***"unmet need."*** This can be any kind of health care a parent reports the child has gone without. Frequently reported unmet needs include dental care and vision care, but some children also go without prescription drugs, mental health services, and other kinds of important health care if they are uninsured and their families cannot afford these services.

- Uninsured children are 10 times more likely to have an unmet health care need than insured children.[10]
- Only about 6 percent of children with insurance and 9 percent of children with public insurance had an unmet health care need in 2003, compared to 31.2 percent of uninsured children.[11]
- Uninsured children are four times more likely to have an unmet dental health care need than insured children.[12]

State Studies:
Massachusetts

A study comparing children in Massachusetts before and after getting public health insurance coverage found that the percent with an unmet need nearly disappeared, falling from 5 percent to less than 1 percent, after children obtained coverage.[13]

Pennsylvania

A study comparing children in Pennsylvania before and one year after getting public health insurance coverage found that only 16 percent of children reported an unmet need or delayed care after getting coverage, compared to 57 percent before the children had coverage.[14]

4 Insuring children will help close the *racial disparities* gap.

Racial and ethnic groups in the U.S. continue to experience major differences in health access, treatment, and outcomes compared to whites. Many forces contribute to these ***health disparities***, but lack of health insurance is by far the largest contributor. People of color—including children—continue to be disproportionately uninsured.

- African American and Hispanic children are more likely to be uninsured than white children. Nearly one in five Hispanic children and one in seven African American children are uninsured, compared to about one in 13 white children.[15]
- Among uninsured children, more than 40 percent of Hispanic children went without any medical care during 2003, compared to only a quarter of non-Hispanic white children.[16]

State Studies:
New York

In New York, there were significant racial disparities in the rate of unmet health care needs and use of a usual source of care among applicants to the state's SCHIP program. After a year on the program, however, there were no significant differences between white, African American, and Hispanic children for these indicators. All children had improved health care access compared to before they enrolled in the program.[18]

- Among African American children, those who are uninsured are 20 times more likely than those who have insurance to forgo needed medical care.
- Among Hispanic children, those who are uninsured are 10 times more likely than those who have insurance to forgo needed medical care.[17]

5 Health insurance helps improve *social and emotional development*.

Social and emotional development is the process through which children learn how to interact with other people, communicate their ideas and feelings to others, build friendships, and learn. It helps prepare children for school and equips them to do well there, and it promotes overall well-being.[19]

Having health insurance makes it more likely that children will receive regular care, contributing to early detection of developmental problems and improving chances for successful treatment. When performed early, simple tests like hearing and vision screenings catch problems that, if untreated, can impair children's ability to use language to communicate and participate in social situations.[20]

Basic screenings for hearing and vision problems are less likely among uninsured children:

- Uninsured children are nearly one-and-a-half times more likely to have missed a hearing screening than children who are insured.
- Uninsured children are also almost one-and-a-half times more likely to have missed a vision screening than children who are insured.[21]

In addition, both parents and children benefit from being able to talk with health care professionals about issues affecting social and emotional development. Parents can, for example, discuss disciplinary methods, determine if their child's behavior is age-appropriate, and receive guidance on what to look for as their child grows older. Older children can talk with their doctors about healthy lifestyle choices.[22]

Health insurance matters for social and emotional development because insurance is such an important factor in how often children get well-child care, where many of these evaluations occur. In addition, since having a usual source of care is far more common among insured children, they are more likely to have doctors who track and monitor their development over time.

6 Insured children are better equipped to *do well in school*.

A child's ***success in school*** can be measured in different ways (grades, attendance, developing social skills, building friendships, etc.) and is the result of many different factors, including family support, family resources, physical development, social and emotional development, and school environment. And although having health insurance is not by itself a ticket to academic success, it plays an important role in ensuring that children are in good health and are prepared to begin school. Being in good health means a child can do things like attend school regularly, see the chalkboard, hear the teacher, and participate in classroom and recess activities—all essential parts of succeeding in school.

Inadequate preventive care can put children at a disadvantage in terms of how prepared they are to enter school.[23]

- Uninsured children with poorly controlled chronic diseases like asthma can suffer poor academic performance if their health condition causes them to miss many days of school.[24] For example, children miss more than 14 million days of school each year because of asthma.[25] Insurance improves children's access to the medications and treatment they need to control chronic diseases, allowing them to miss fewer days of school.
- In 2000, the Surgeon General's annual report noted that children miss more than 51 million hours of school every year because of dental-related illness.[26] Children with health insurance have better access to dental care, so they can get treatment for dental problems like cavities, tooth decay, and gum disease. Again, health insurance acts as a bridge to better school performance by allowing children to get the care they need and thus to miss fewer days of school due to dental-related illness.

State Initiatives:

California

California's Healthy Start Initiative showed that children who enrolled in health insurance improved attendance and school performance by 68 percent.[27]

Missouri

Missouri's Managed Care Plus (MC+) initiatives showed that Missouri's Children's Health Coverage Program decreased student absences by 39 percent.[28]

Endnotes

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[14] J. Lave, et al., op. cit.

[15] 2002-2004 U.S. Census data merge, op. cit.

[16] Ibid.

[17] Ibid.

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[21] Ibid.

[22] Ibid.

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