

Reaching out in Rural Areas Children's Medicaid and CHIP Participation

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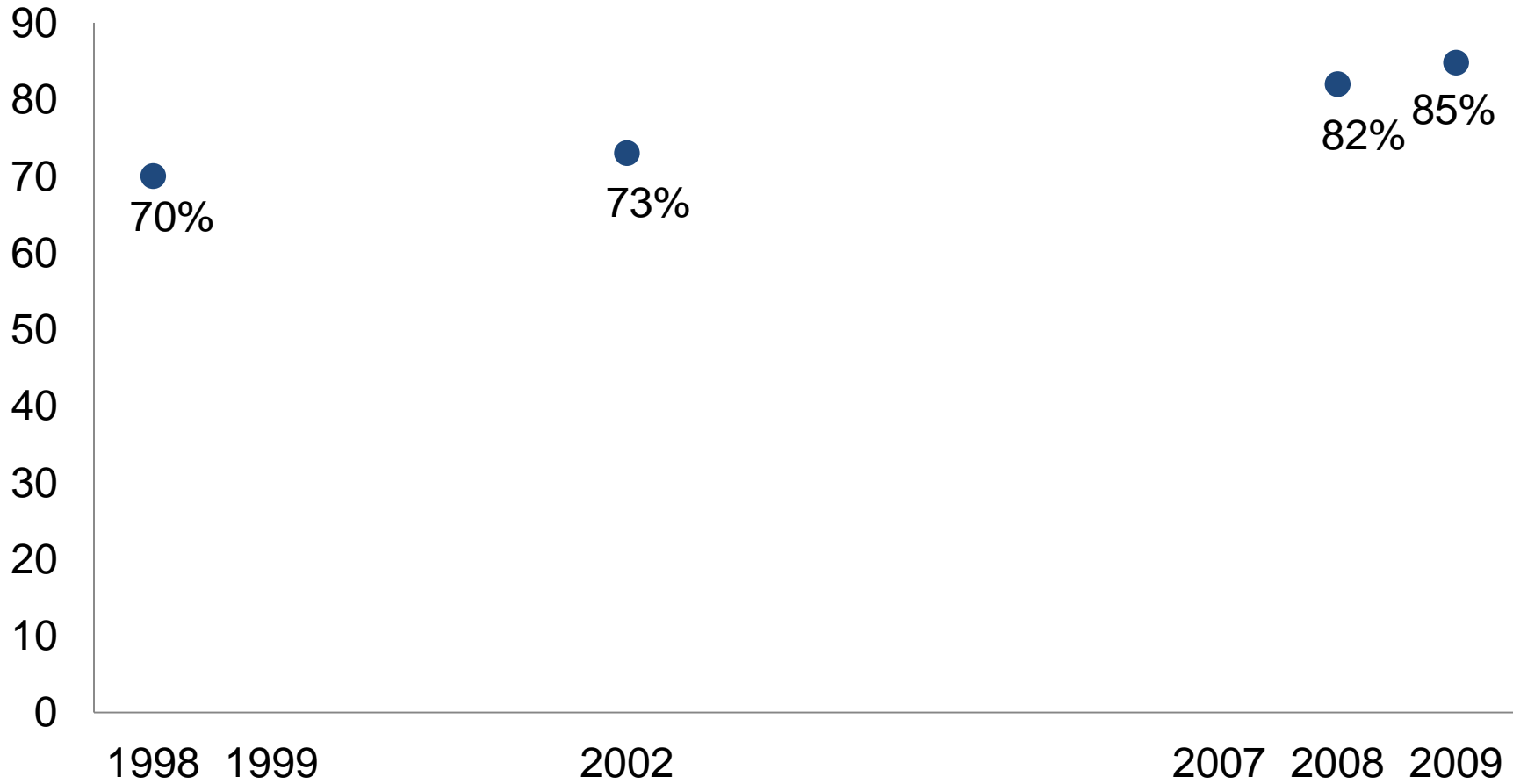
Genevieve Kenney and Mike Huntress

The Urban Institute



Participation rates rising

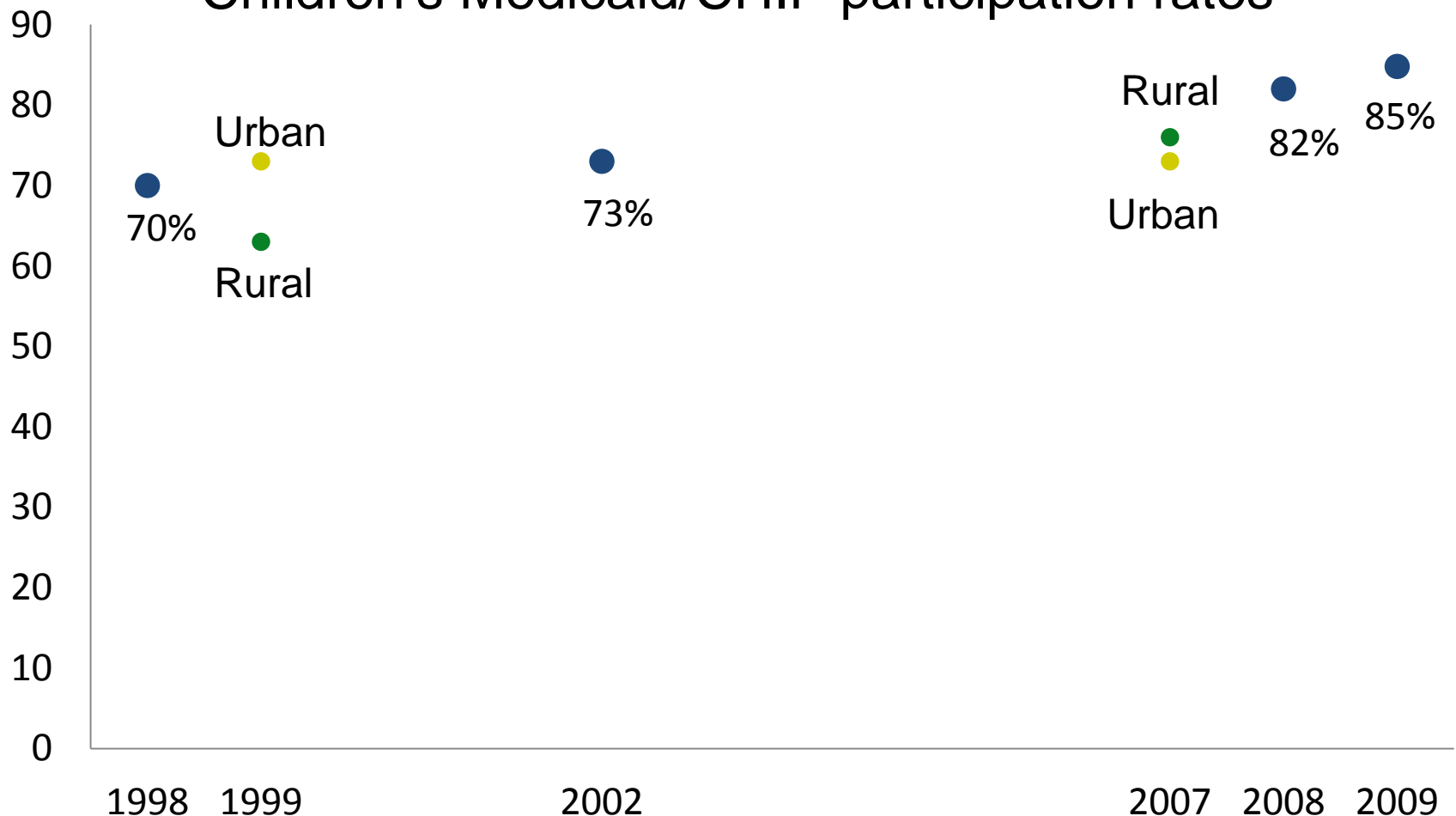
Children's Medicaid/CHIP participation rates



Sources: J Holahan, et al., *The Future of Children* 13(1):55-79. TM Selden, et al., *Health Affairs* 23(5):39-50.
GM Kenney, et al., *Health Affairs* doi:10.1377/hlthaff.2010.0747. GM Kenney et al.,
http://www.urban.org/health_policy/url.cfm?ID=412379.

Recently, small rural-urban differences

Children's Medicaid/CHIP participation rates



Sources: J Holahan, et al., *The Future of Children* 13(1):55-79. TM Selden, et al., *Health Affairs* 23(5):39-50. GM Kenney, et al., *Health Affairs* doi:10.1377/hlthaff.2010.0747. GM Kenney, et al., http://www.urban.org/health_policy/url.cfm?ID=412379. J King, et al., *Inquiry* 47(2):150-61.

Presentation overview

- How do most recent participation rates vary across rural and urban areas?
- Where do eligible but uninsured children live?
- What are the characteristics of rural eligible but uninsured children?

Data:

2008-2009 American Community Survey

- Annual survey fielded continuously over a 12 month period
 - About 700,000 children sampled each year
 - High response rates
 - Sample in every county
 - Representative sample frame
- Allows more precise state and local estimates than previously possible

Information collected by ACS

- Information needed to determine eligibility
 - Income, marital status, education, occupation, functional limitation, etc.
 - Activity limitations/disability status
- Information on health insurance coverage
 - In 2008, for the first time, households were asked about insurance coverage status

ACS mail questionnaire

health insurance question

Is this person CURRENTLY covered by any of the following health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a-h

- a) Insurance through a current or former employer or union (of this person or another family member)
 - b) Insurance purchased directly from an insurance company (of this person or another family member)
 - c) Medicare, for people age 65 and over, or people with certain disabilities
 - d) Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
 - e) TRICARE or other military health care
 - f) VA (including those who have ever enrolled for or used VA health care)
 - g) Indian Health Service
 - h) Any other type of health insurance or health coverage plan- specify
-

Methods

- Apply simulation model to determine eligibility of each child, taking into account:
 - State eligibility guidelines
 - Family characteristics, including income, immigration status, and imputed documentation status
- Determine insurance status of each child
 - Edit rules to address concern that the ACS may understate Medicaid and CHIP coverage*

* We applied edit rules that build on those developed by the Census Bureau to account for the concern about understating Medicaid and CHIP coverage. The edits increased the estimated number of children with Medicaid/CHIP and reduced the estimated number of uninsured children—the revised ACS uninsured estimate for children is very close to the estimate from the National Health Interview Survey.

Methods, cont.

- Calculate participation rate as:

(# eligible children enrolled in Medicaid/CHIP)

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(# children eligible children enrolled in
Medicaid/CHIP

+ # eligible children who are uninsured)

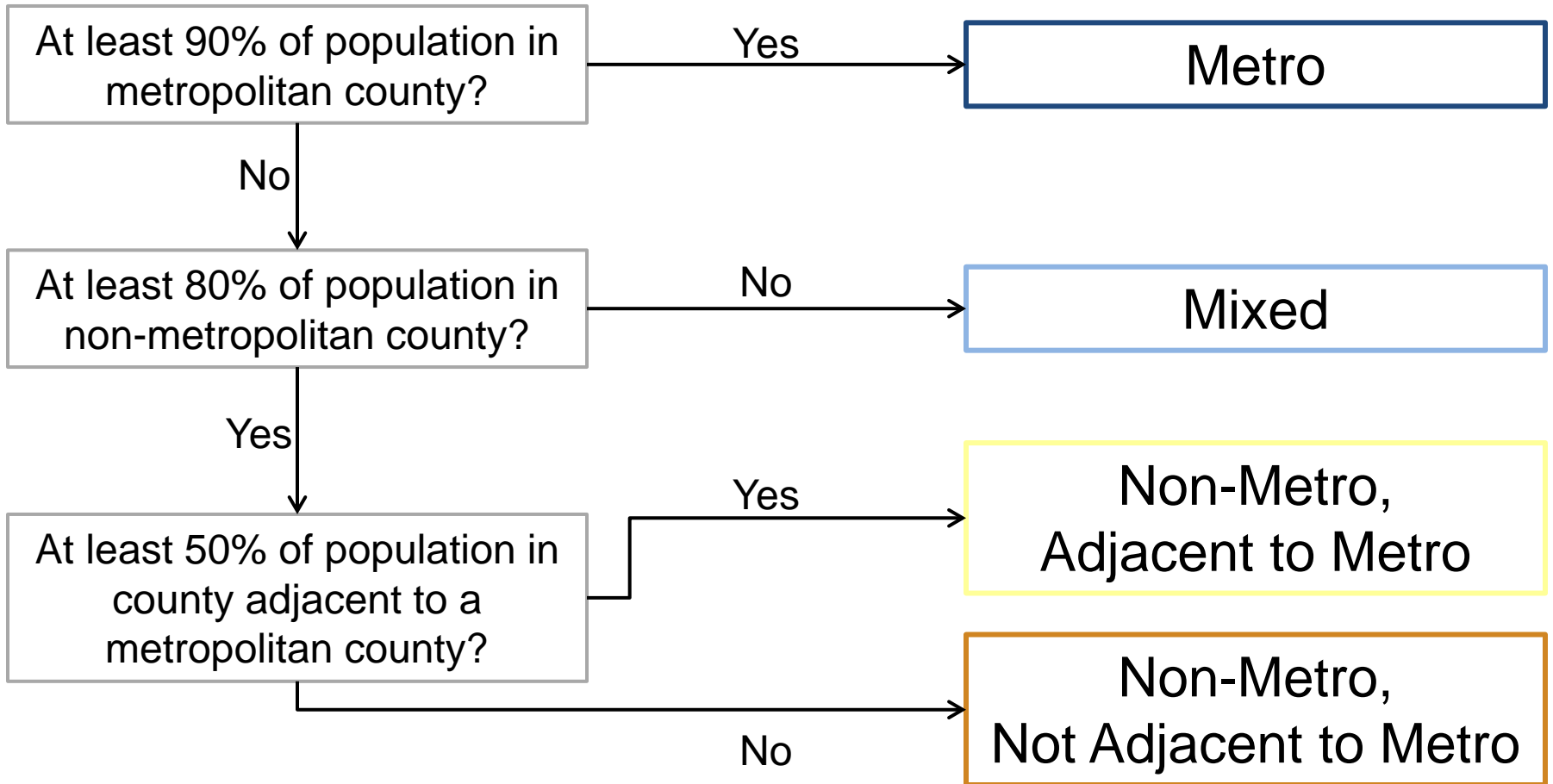
All estimates use weights provided by the Census Bureau and standard errors use replicate weights that take into account the complex nature of the sample design.

ACS local area geographic boundaries

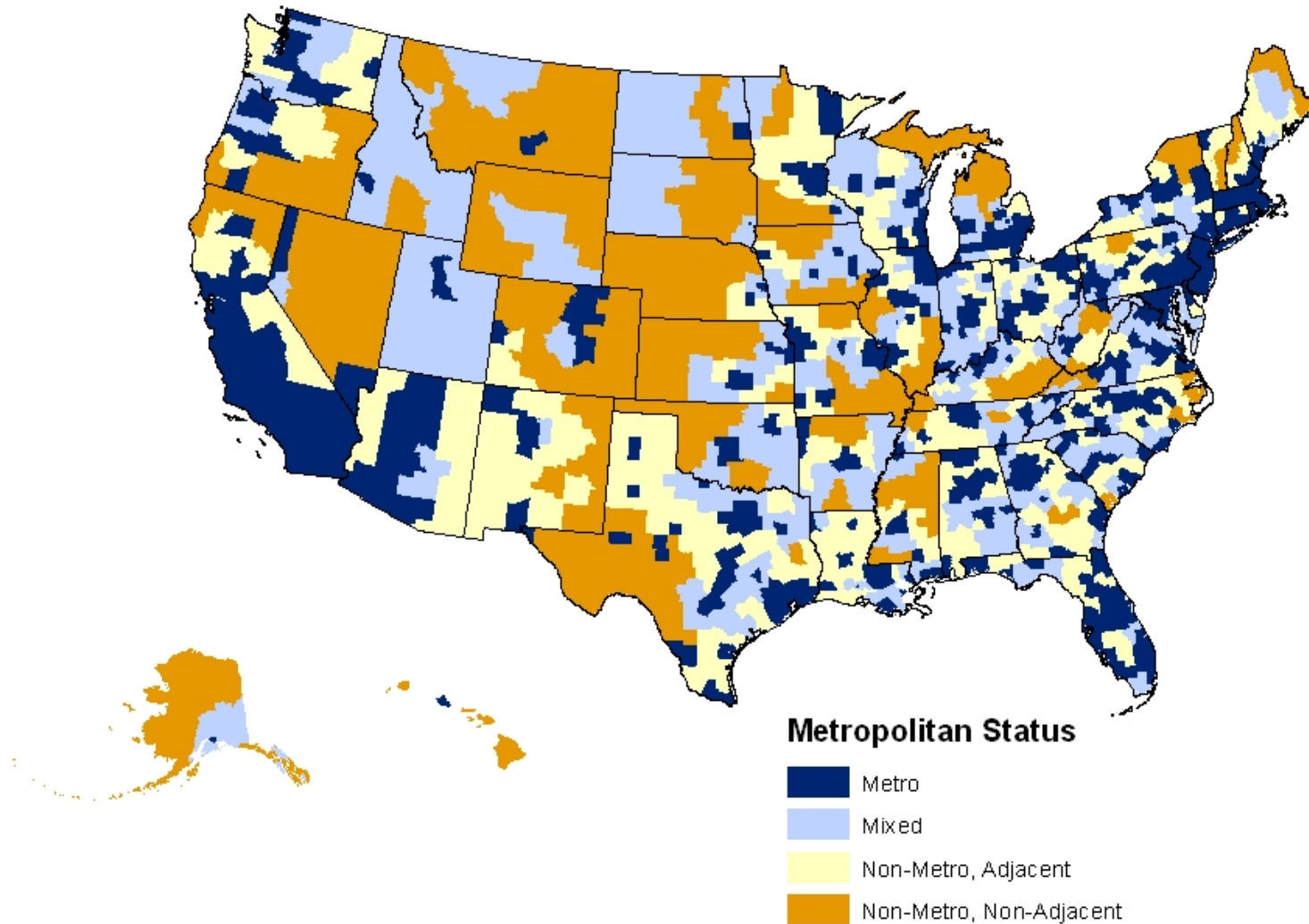
- Public use micro data areas (PUMAs)
 - Mutually exclusive areas
 - Contain population of about 100,000
 - Do not cross state lines
 - Generally follow the boundaries of county groups, single counties, or census-defined "places"

Measuring “rural” in the ACS

In each PUMA, is:



Metropolitan Status by Public Use Microdata Area



Notes: Metropolitan status indicator is produced by the Urban Institute and is based on the US Department of Agriculture's Economic Research Service's county-level Rural-Urban Continuum Codes. Public Use Microdata Areas are Census-constructed, mutually exclusive geographic entities that do not cross state lines and that generally follow the boundaries of county groups, single counties, or census-defined "places."

Limitations

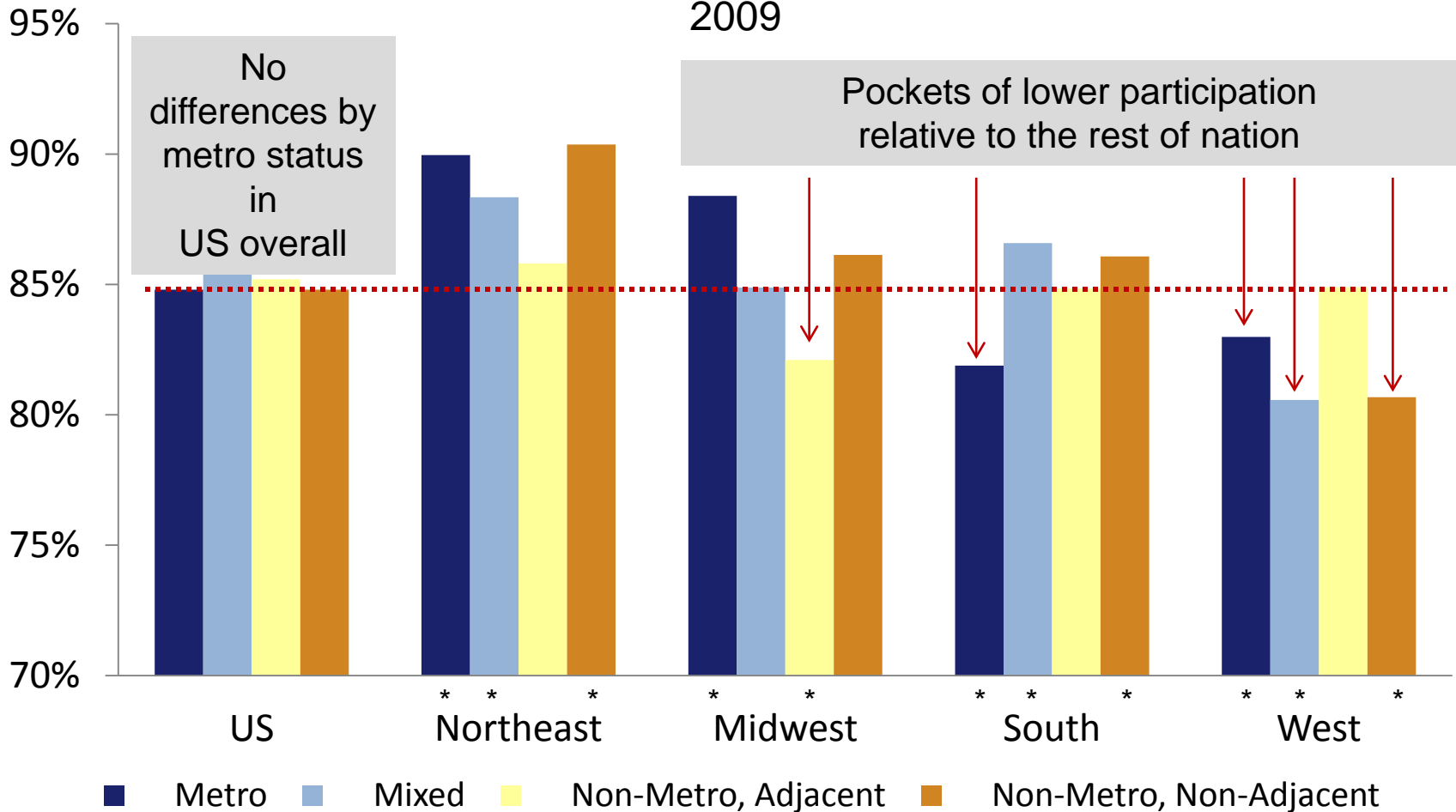
- Despite efforts to improve the validity of the ACS estimates, coverage estimates may still include measurement error, which could introduce bias into our estimates
- Medicaid/CHIP eligibility simulation model also has measurement error
- Estimates for some areas with relatively small sample sizes (such as non-metro non-adjacent areas in the Northeast) are less precise because of the relatively smaller sample sizes available for them

Presentation overview

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Participation varies by region and rural

Participation rates among children ages 0-18,
2009



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS.

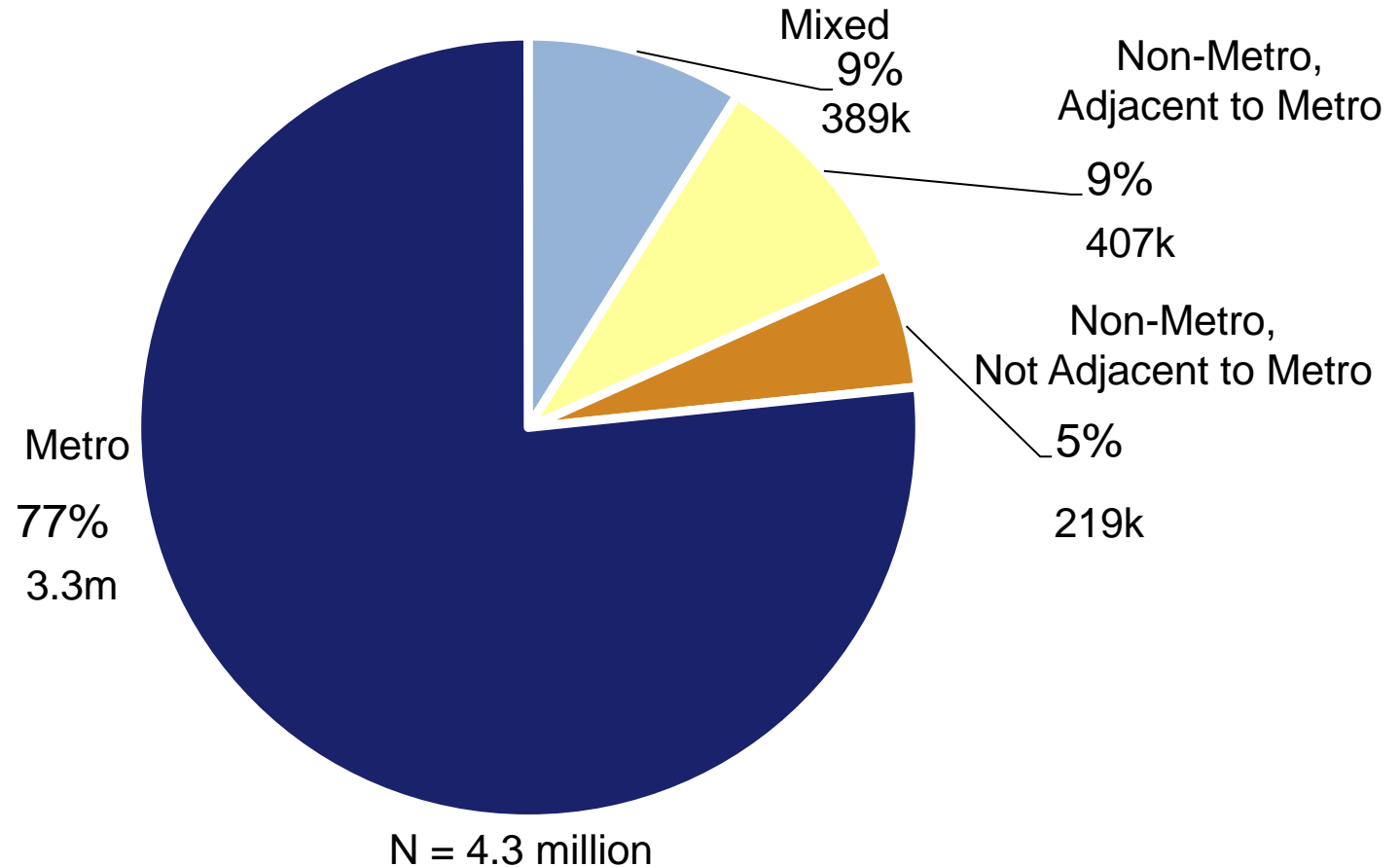
*Significantly different from rest of the nation at 0.10 level.

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~1m eligible but uninsured children live outside metro areas

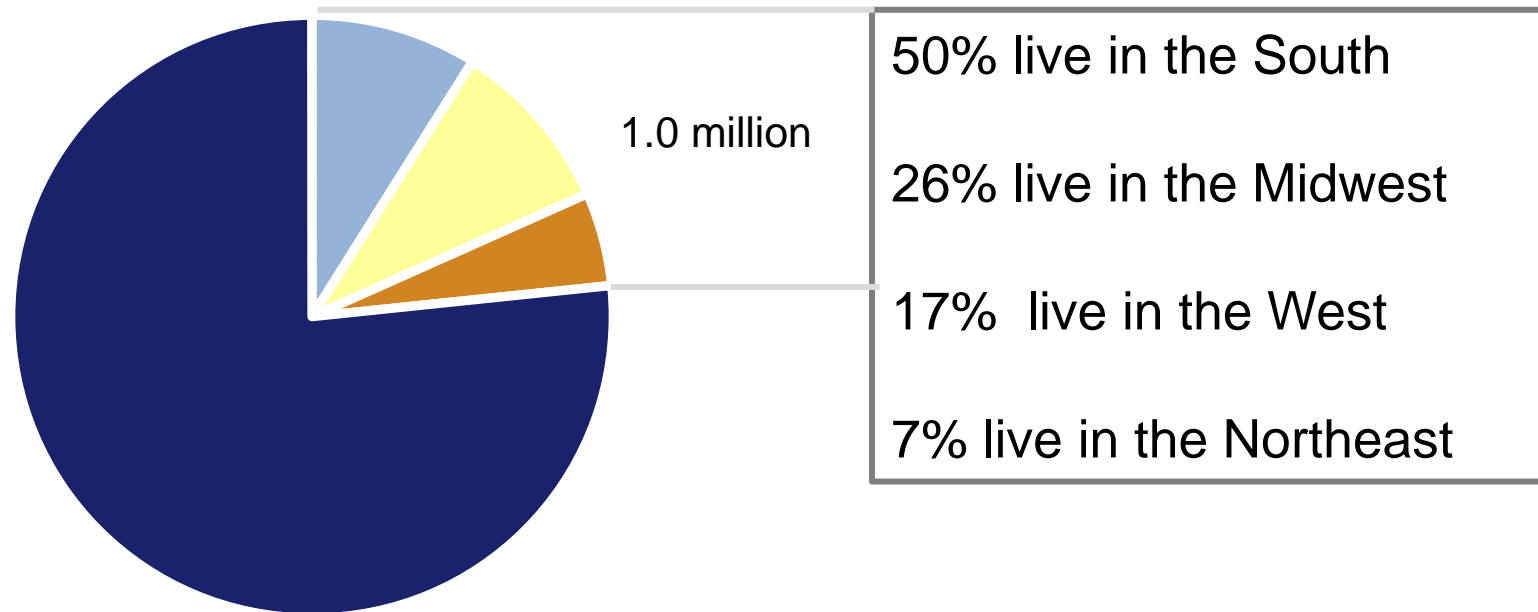
Residence of eligible but uninsured children, 2009



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model, based on data from the 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for underreporting of Medicaid/CHIP coverage on the ACS.

~1m eligible but uninsured children live outside metro areas

Residence of eligible but uninsured children, 2009



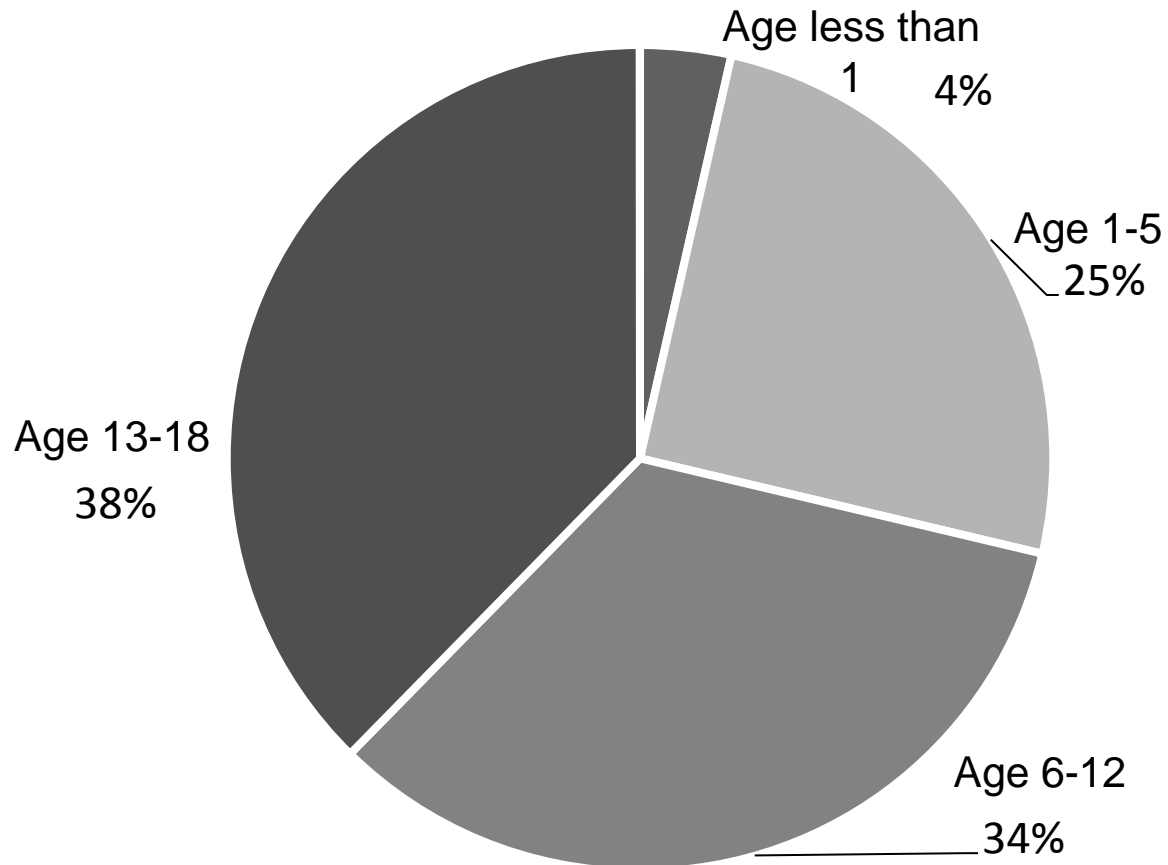
Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model, based on data from the 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for underreporting of Medicaid/CHIP coverage on the ACS.

Presentation overview

- How do most recent participation rates vary across rural and urban areas?
- Where do eligible but uninsured children live?
- What are the characteristics of rural eligible but uninsured children?
 - Age
 - Income
 - Race/ethnicity
 - Citizenship
 - Language
 - Food stamp participation

Eligible but uninsured children by age

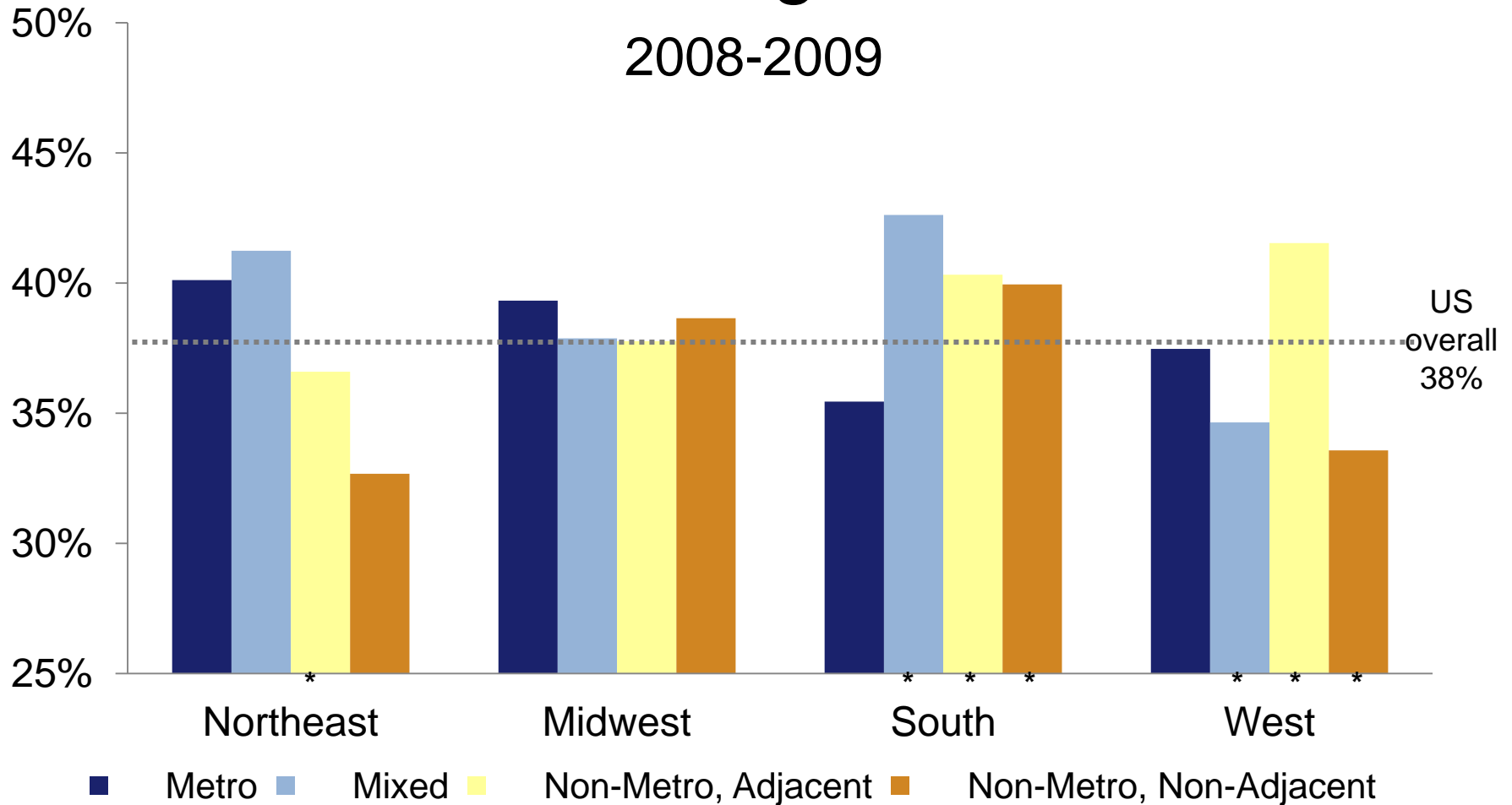
2008-2009



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for underreporting of Medicaid/CHIP coverage on the ACS.

Share of eligible but uninsured children who are age 13-18

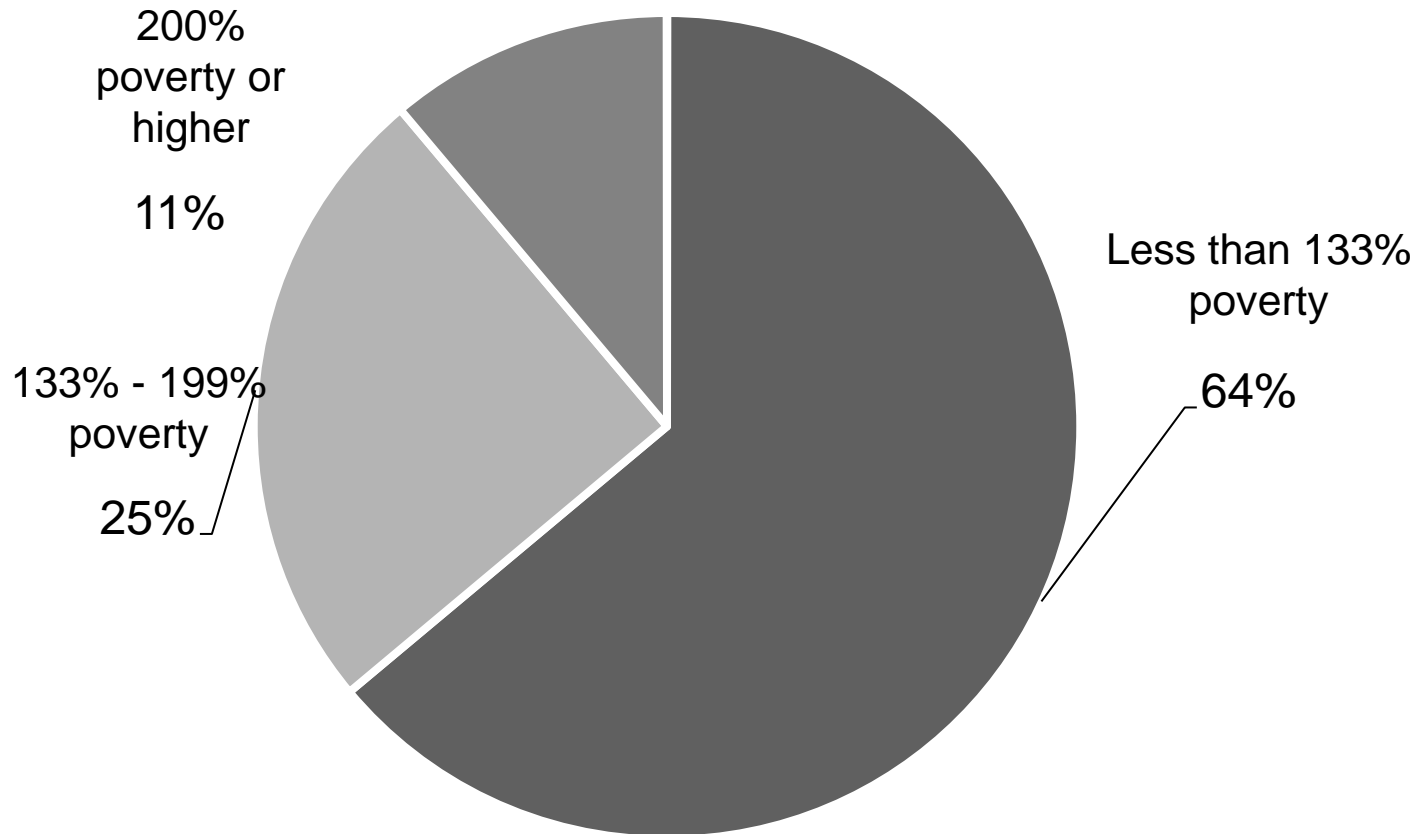
2008-2009



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. *Significantly different from estimate for metro areas in the region at 0.10 level.

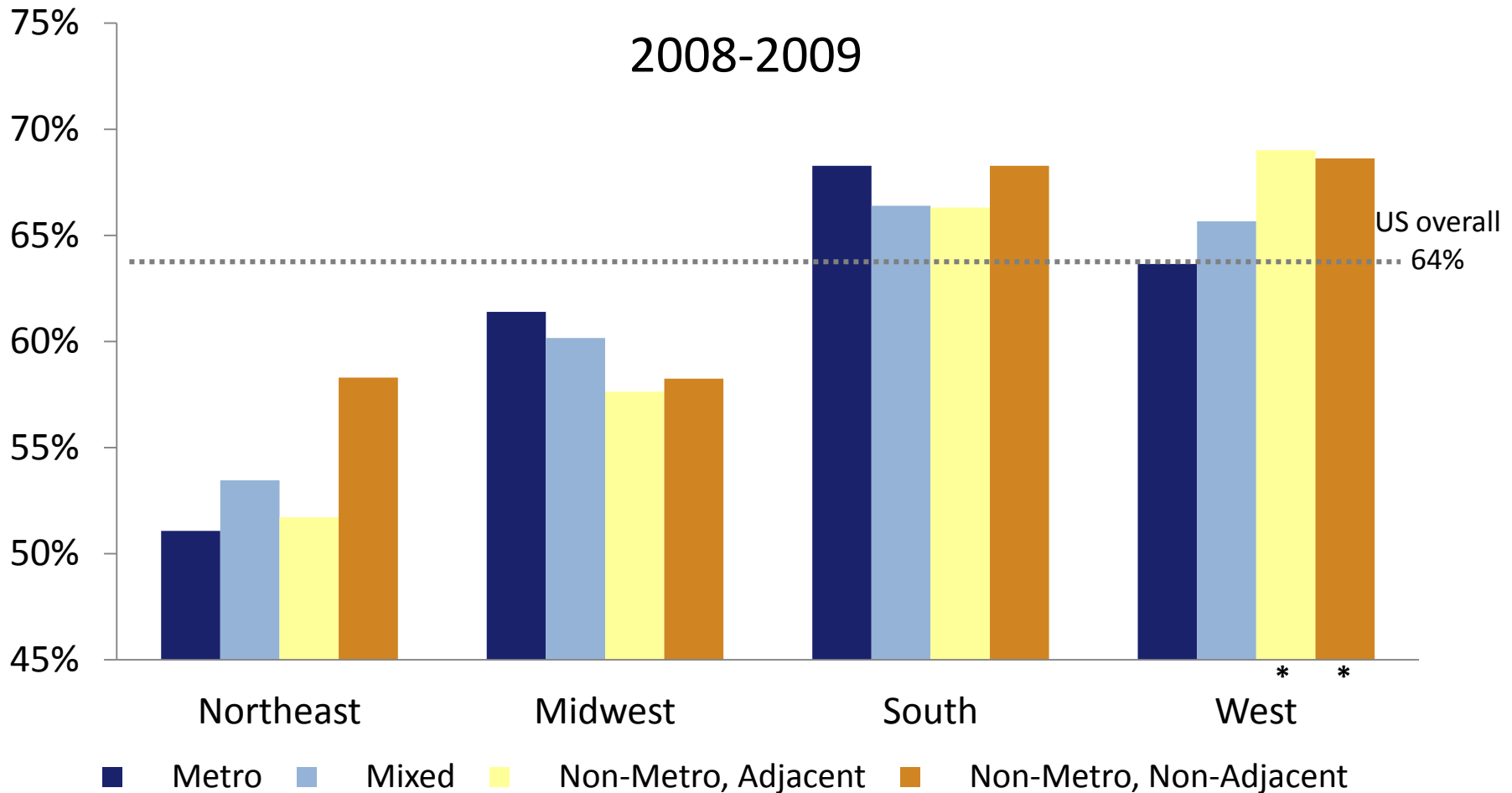
Eligible but uninsured children by family income

2008-2009



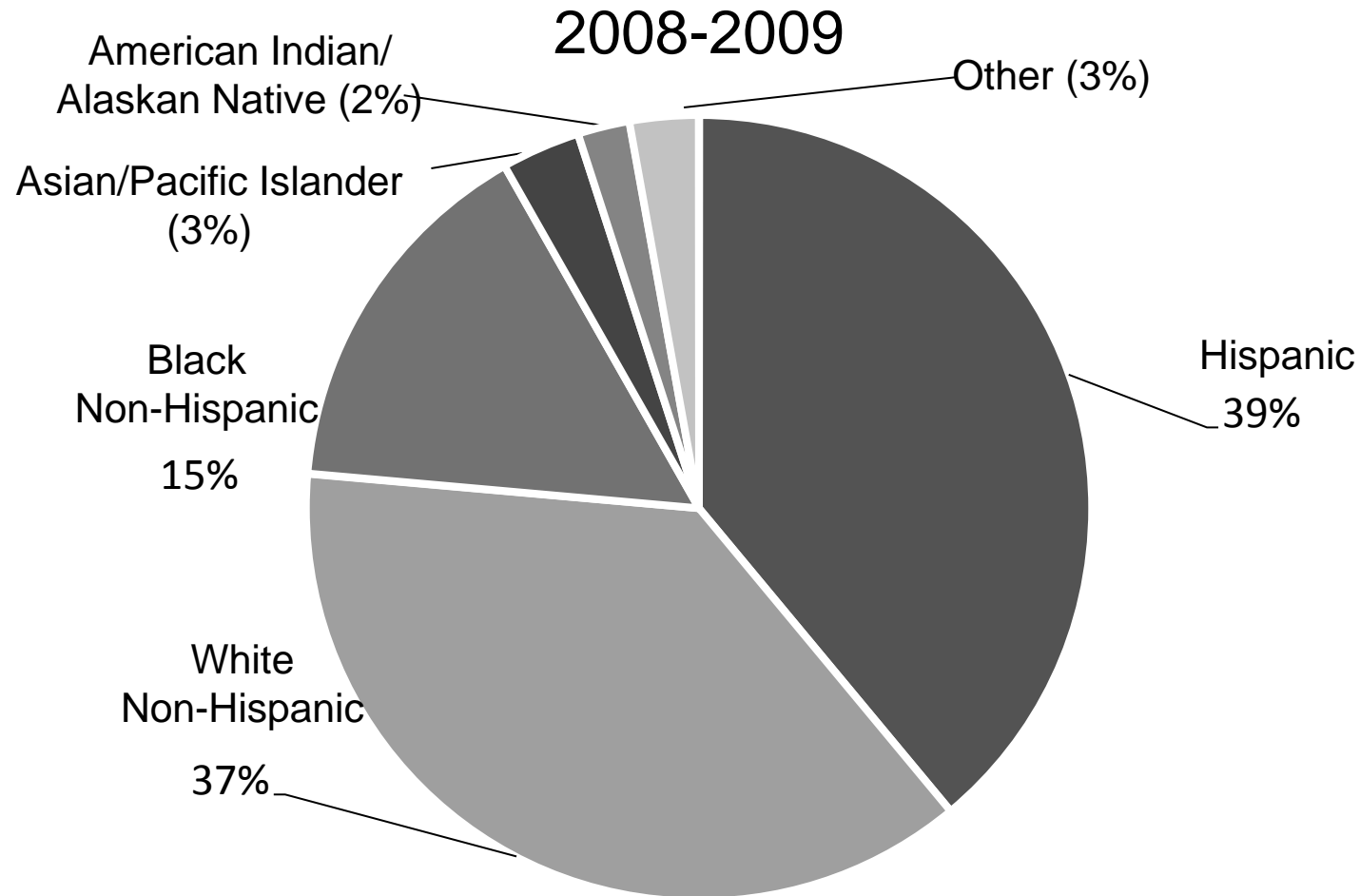
Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for underreporting of Medicaid/CHIP coverage on the ACS.

Share of eligible but uninsured children who are in families with incomes <133% poverty



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. *Significantly different from estimate for metro areas in the region at 0.10 level.

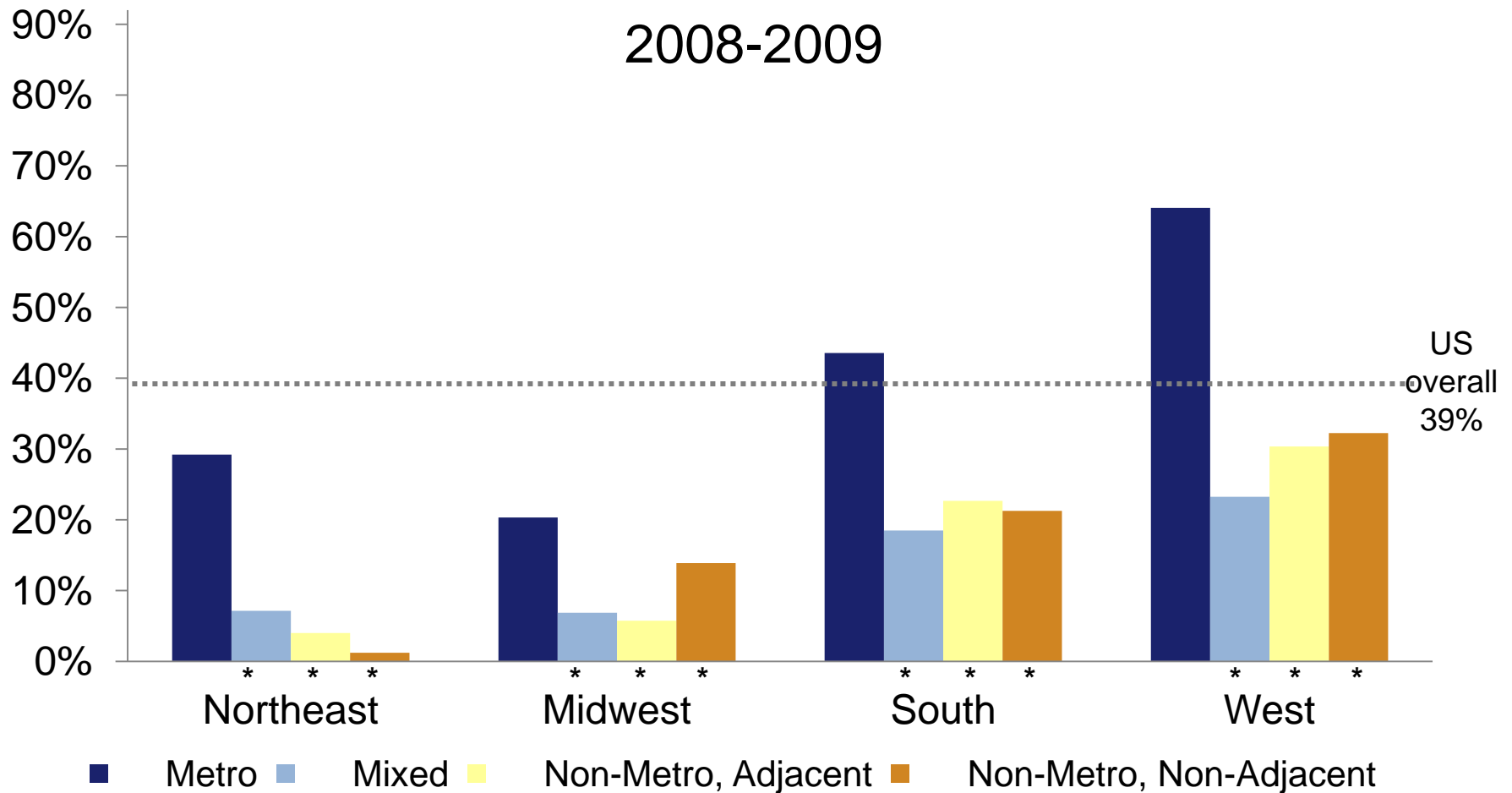
Eligible but uninsured children by race/ethnicity



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for underreporting of Medicaid/CHIP coverage on the ACS.

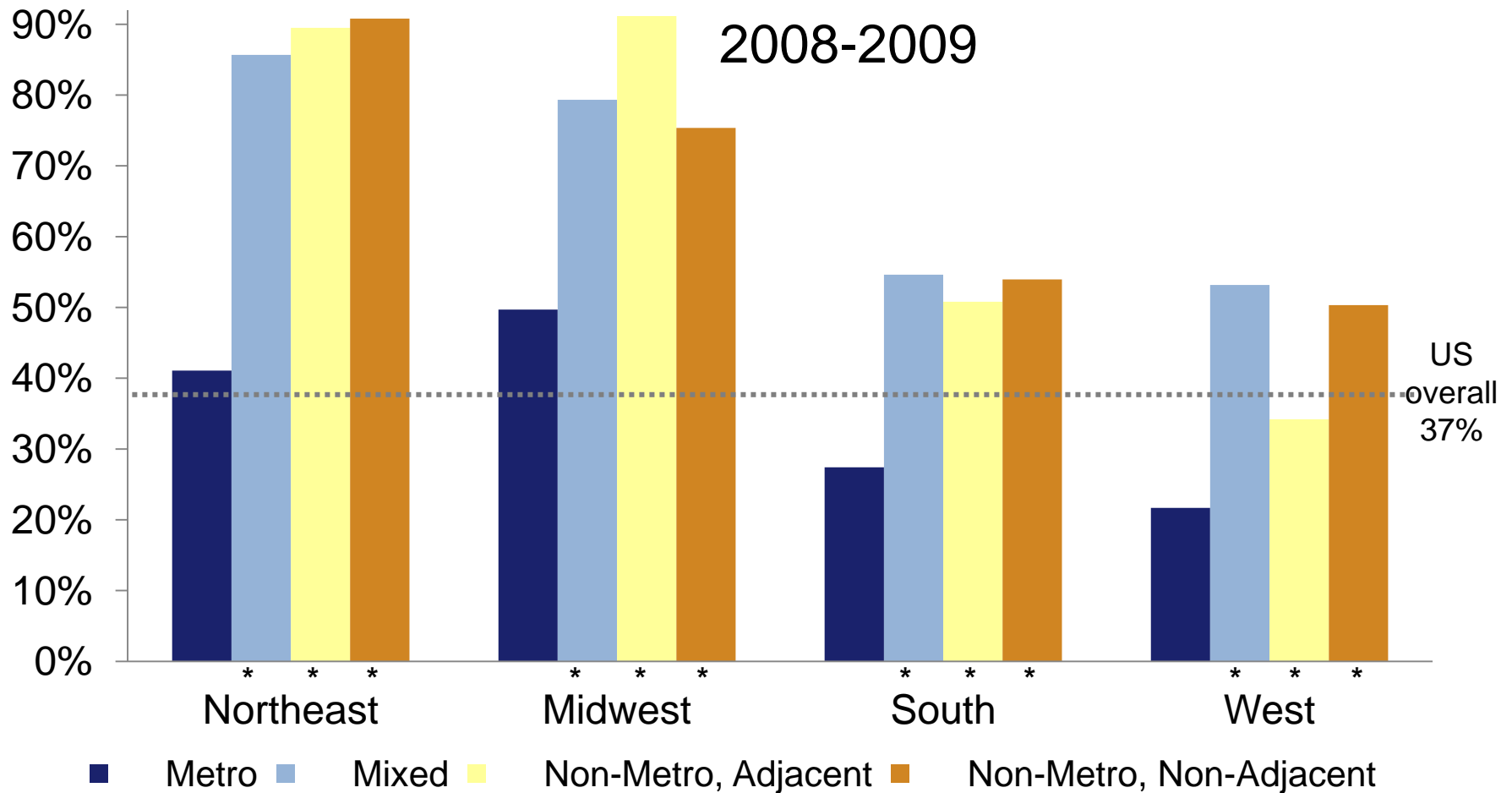
Share of eligible but uninsured children who are Hispanic

2008-2009



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. *Significantly different from estimate for metro areas in the region at 0.10 level.

Share of eligible but uninsured children who are White non-Hispanic



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. *Significantly different from estimate for metro areas in the region at 0.10 level.

Share of eligible but uninsured children who are Black non-Hispanic

- Black children constitute around 20% of eligible but uninsured children in:
 - Metro areas in the Northeast, Midwest and South
 - Mixed and non-metro areas in the South
- They make up a very small fraction of eligible but uninsured children in other areas

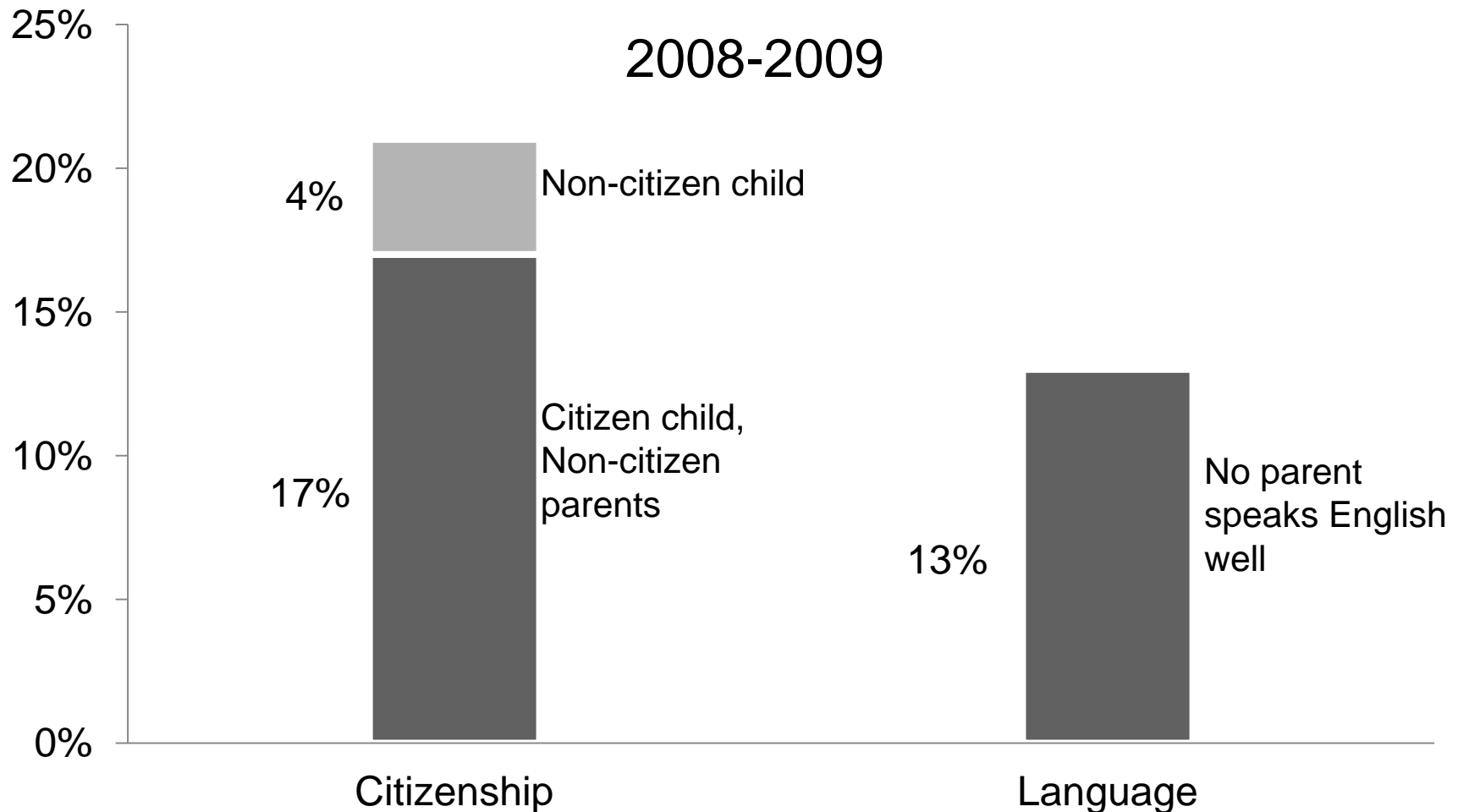
Share of eligible but uninsured children who are Asian/Pacific Islander

- About 7% in metro areas in the Northeast
- About 5% in metro areas in the West
- About 3% in metro areas in the South and Midwest
- Asian/Pacific Islander children make up a very small fraction of eligible but uninsured children in other areas

Share of eligible but uninsured children who are American Indian/Alaskan Native

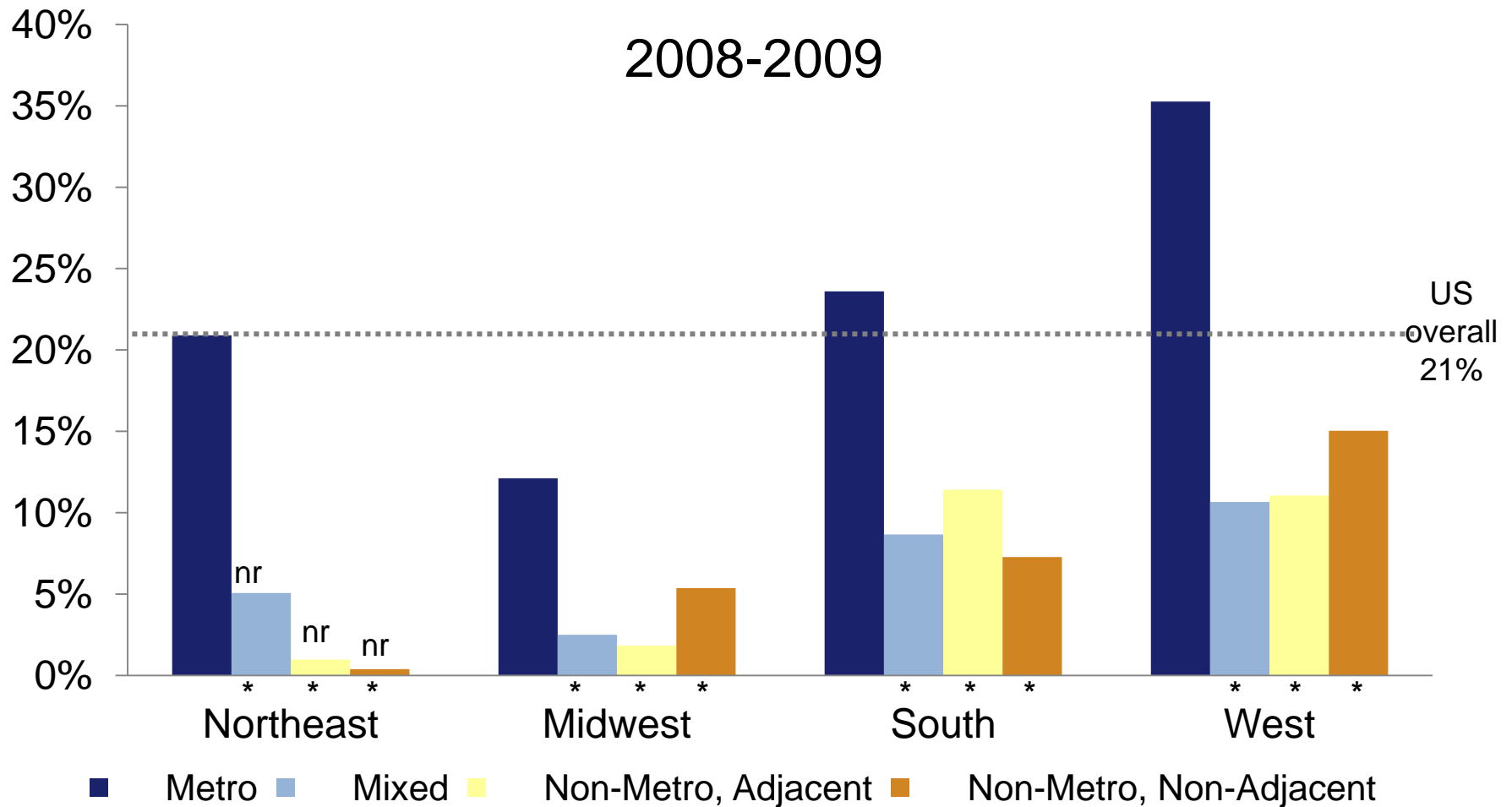
- In the West:
 - About 31 % in non-metro adjacent areas
 - About 17% in mixed areas
 - About 11% percent in non-metro, non-adjacent areas
- In the Midwest:
 - About 7% to 8% in mixed and non-metro areas
- American Indian/ Alaskan Native children make up a very small share of the eligible but uninsured in other areas.

Eligible but uninsured children by citizenship and language status



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for underreporting of Medicaid/CHIP coverage on the ACS.

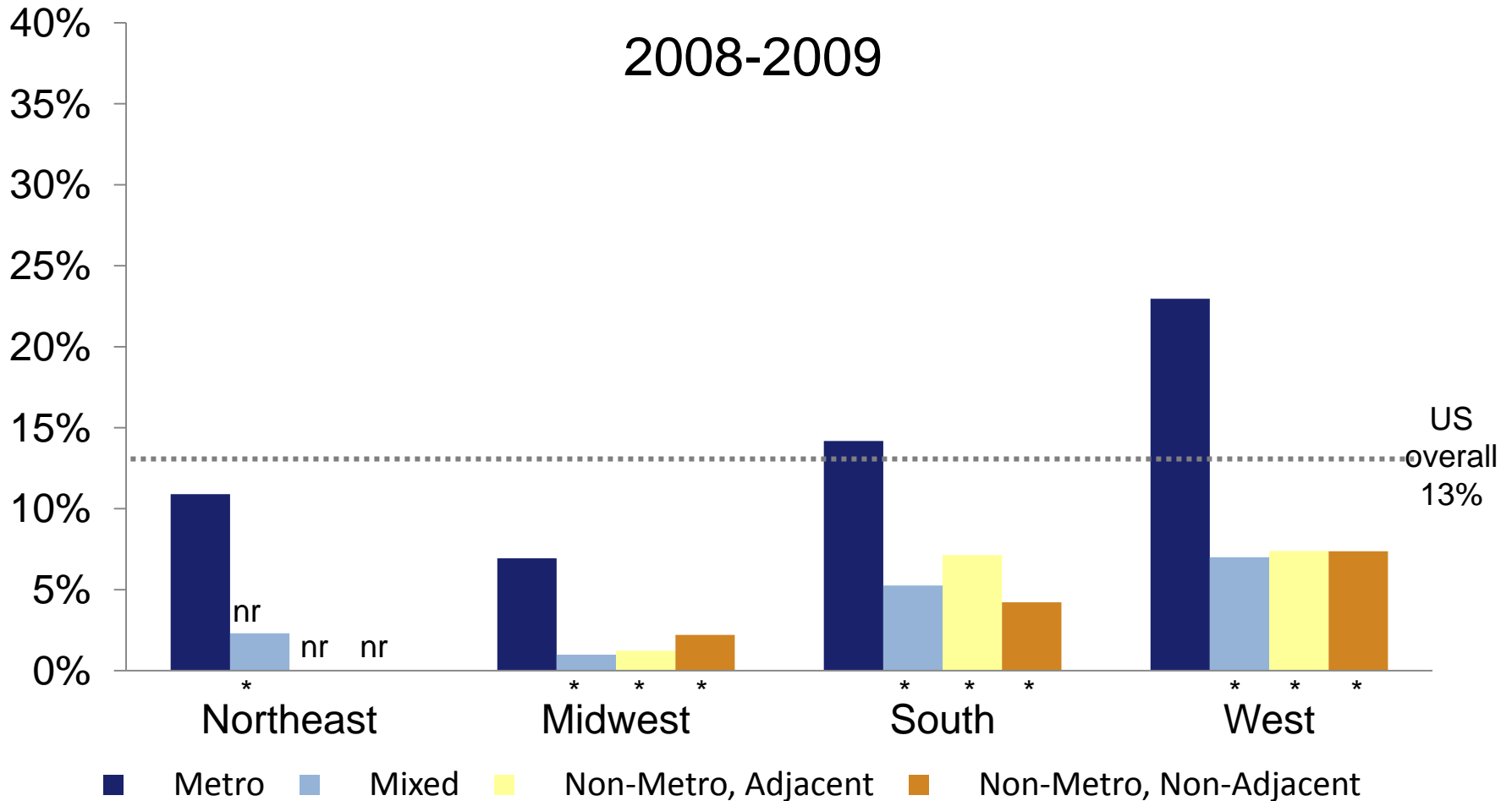
Share of eligible but uninsured children who are non-citizens or live with no citizen parents



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. *Significantly different from estimate for metro areas in the region at 0.10 level. nr estimate does not meet reliability standard.

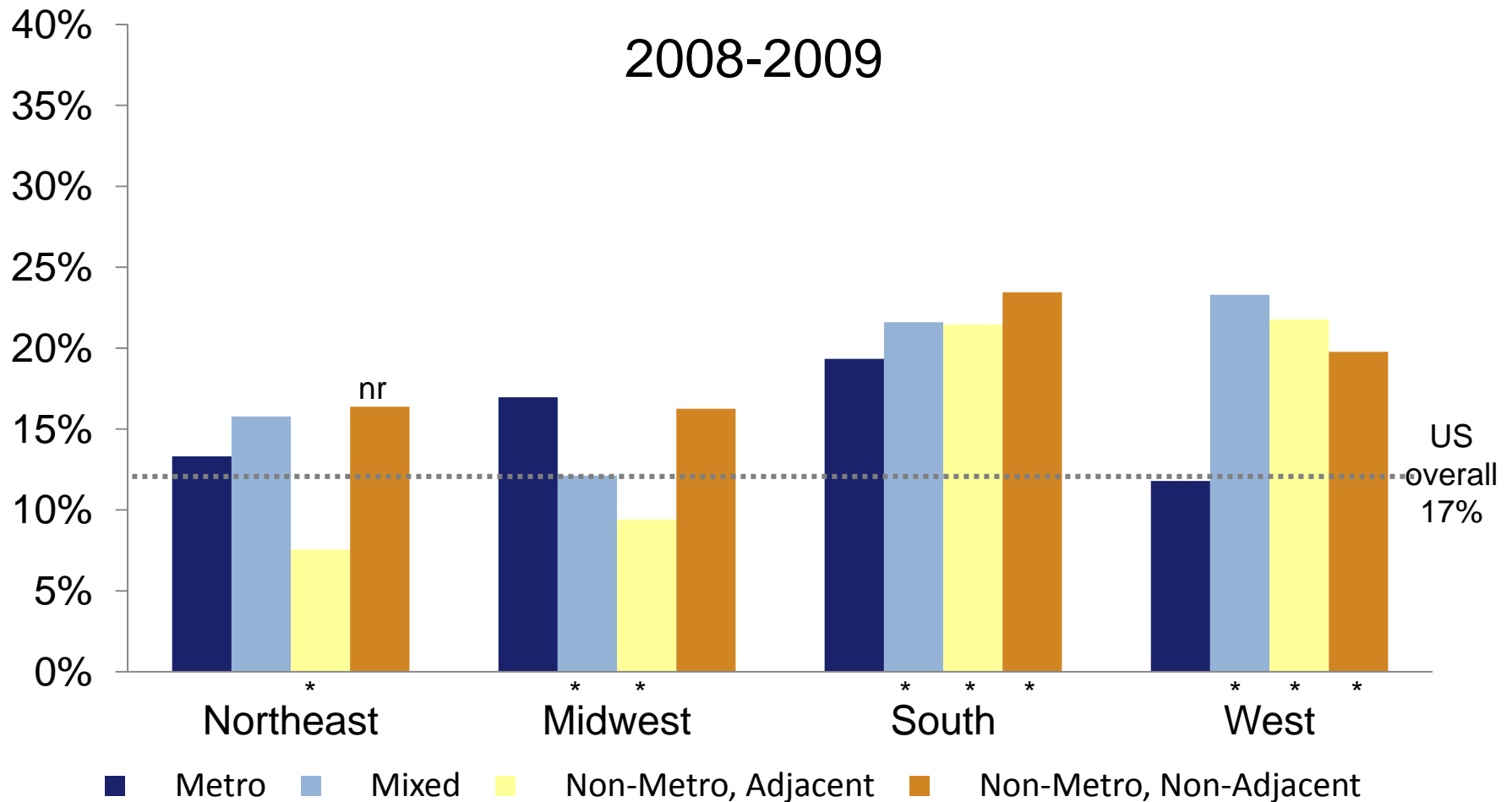
Share of eligible but uninsured children with no parent who speaks English well

2008-2009



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. Estimates include children living with parents only. *Significantly different from estimate for metro areas in the region at 0.10 level. nr estimate does not meet reliability standard.

Share of eligible but uninsured children who receive food stamps



Source: Analysis of Urban Institute Health Policy Center's ACS Medicaid/ CHIP Eligibility Simulation Model, based on data from the 2008 and 2009 American Community Survey (ACS). Notes: Estimates reflect an adjustment for the underreporting of Medicaid/CHIP coverage on the ACS. *Significantly different from estimate for metro areas in the region at 0.10 level. nr estimate does not meet reliability standard.

Conclusions

- Participation rates across rural-urban areas: similar nationally, but differ for some regions
- About 1 million eligible but uninsured children live in mixed or non-metro areas. Compared to children in metro areas:
 - In some regions: substantial differences in age, income, food stamp participation
 - In all regions: substantial differences in race/ethnicity, language, citizenship
- Tailored outreach strategies (e.g., by age, race/ethnicity) may be useful in some areas