Full Report

Parents' Views of Children's Health Insurance Programs: A Survey of Denied Applicants for Kaiser Permanente's Child Health Plan

Prepared by

The Center for Children's Access to Health Care Institute for Health Policy Studies University of California, San Francisco

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FULL REPORT

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A Survey of Denied Applicants for Kaiser Permanente's Child Health Plan

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BACKGROUND

In 1998, over 2 million children in California under the age of 18 had no health insurance, public or private (Schauffler and Brown, 2000). These numbers are a significant concern because uninsured children are far less likely than their insured counterparts to obtain needed health care (Newacheck et al., 1998; Holl et al., 1995; Hafner-Eaton, 1994; Stoddard et al., 1994; Kogan et al.,1995). Recently, both the public and private sectors have taken action to reduce the number of children without health coverage. In 1997, Congress created the State Child Health Insurance Program (SCHIP) as part of the federal Balanced Budget Act. SCHIP provides states with funds to extend health insurance to children whose parents cannot afford to pay the premiums of private insurance, but have family incomes too high to qualify for Medicaid. With its SCHIP funds, California established the Healthy Families program in 1998 which, in its initial stages, offered health insurance to uninsured children who live between 100% and 200% of the federal poverty level and do not qualify for Medi-Cal. Program eligibility parameters have since increased to cover children with incomes between 200% and 250% of the federal poverty level. In addition to creating Healthy Families, California simultaneously elected to expand the Medi-Cal program to cover all children with incomes below 100% of the poverty level, thereby accelerating the implementation of a policy that was to be phased in over time.

In addition to these significant public sector reforms, the private sector has also joined the effort to extend health insurance to uninsured children in California. In the spring of 1997, Kaiser Permanente announced that it would commit \$100 million over five years to help extend coverage to uninsured children. This effort, called "Kaiser Permanente Cares for Kids," includes coalition building, school-based demonstration projects and public policy work. Kaiser Permanente Cares for Kids also includes a program called the "Child Health Plan," which offers subsidized Kaiser Permanente membership to certain uninsured children. At its inception, the Child Health Plan was open to uninsured children with family incomes between 200% and 275% of the federal poverty level (roughly \$26,000 and \$36,000 a year for a family of three in 1999). Families were charged \$25 to \$35 per month per child, with a maximum cost of three children per family regardless of family size. (Eligibility for the Child Health Plan was raised as of January 2000 to cover children with incomes between 250% to 300% of the federal poverty level in response to the changes in eligibility for Healthy Families.) Kaiser Permanente began accepting applications for the Child Health Plan in July 1998 with active enrollment

beginning in September that year. The rate of enrollment was far slower than expected, however. The initial enrollment target for 1999 was about 7,400 enrolled children by the end of the year; yet only 1,232 children were actually enrolled at that point.

While the reasons for the slower-than-expected enrollment are speculative, one factor is clear: a significant proportion of applicants to the Child Health Plan was actually ineligible for the program. Between September and December 1998, 83% of all applicants were found to be ineligible. Children were found to be ineligible because they had insurance coverage within 90 days of the application and/or had family incomes that were too high. However, the most common reason for the denials was "low income," meaning that the family's income was below 200% of the federal poverty level, and, hence, the child was likely eligible for either Healthy Families or Medi-Cal. In fact, data from December 1998 indicated that as many as 79% of the denied applicants were found ineligible for this reason. At the time these applicants were denied by the Child Health Plan (September 1998 to July 1999), income eligibility for Healthy Families was 100% to 200% of the federal poverty level, depending on the child's age. Income eligibility for Medi-Cal was below 100% of the federal poverty except for young children, for whom eligibility was 133% of the federal poverty level.

The purpose of this study was to understand why so many parents attempted to enroll their child in a program for which they were ineligible, particularly given that they were likely eligible for a program with lower premium contribution and more comprehensive benefits, such as dental coverage. Specifically, we sought to determine if the eligibility criteria as communicated by Kaiser Permanente were unclear, if parents preferred to enroll their child in a private program as opposed to government-sponsored programs or if there were other reasons. To assess this, we interviewed the parents who submitted applications on behalf of their children to the Child Health Plan but were not enrolled because their family incomes were too low. By gaining insight into the reasons why so many ineligible families applied for the program, we intended to identify changes that could be considered by either the Child Health Plan or government-sponsored programs to better direct families to appropriate insurance programs for their children, and ultimately, to assist more of California's children in obtaining health insurance coverage. Therefore, in addition to presenting results of the survey, we offer suggestions for the Child Health Plan, as well as Healthy Families and Medi-Cal, for improving outreach and enrollment procedures and materials.

¹ Children denied Child Health Plan coverage due to low incomes were likely but not necessarily eligible for Healthy Families or Medi-Cal because some of these children who applied could be disqualified from Healthy Families or Medi-Cal due to their immigration status.

METHODS

Research Questions and Study Objectives

Considerable speculation exists as to why parents might choose to enroll in a private health insurance program rather than government-sponsored insurance programs. It is speculated that parents believe that government program beneficiaries receive inferior treatment by health care professionals. It is also believed that the process of enrolling children in government programs is so burdensome and invasive that parents are unable or unwilling to complete the process. Some evidence suggests that some parents associate government programs with welfare, and therefore consider them less desirable (Guendelman et al.,1999; Kaiser Commission on Medicaid and the Uninsured, 2000; Feld et al.,1998). However, little research has been conducted to thoroughly test these assumptions. Moreover, no studies have examined why parents might choose to enroll their children in a private, subsidized insurance program that is significantly more expensive than the government-sponsored alternatives.

The key research questions for this study revolved around these issues. Specifically, we sought to learn why parents attempted to enroll their child in Kaiser Permanente's Child Health Plan when their child was likely eligible for other, no-cost or low-cost government insurance programs. Toward this end, the study attempted to assess whether the Child Health Plan enrollment procedures, attitudes about public programs or other factors contributed to the high rate of applications among ineligible children.

The study had three principle objectives:

Objective I: To determine why parents elected to apply for the Child Health Plan for which their child(ren) were not eligible when the child(ren) were likely eligible for Healthy Families or Medi-Cal;

Objective II: To learn about parents' experiences with the Child Health Plan enrollment process and views about the application and informational materials; and,

Objective III: To assess parents' views about the Child Health Plan, Healthy Families and Medi-Cal.

Study Subjects and Procedures

Our goal was to obtain 500 completed phone surveys. Potential subjects included parents of children ages 0 to 19 who completed an application for the Child Health Plan but were denied coverage because their family incomes were lower than the eligibility rules. Only one child per household was included regardless of the number of children within that household upon whose behalf the parent applied and were subsequently denied coverage.

A random sample of 759 applicants who met these criteria was drawn from the Child Health Plan applicant database. Of these, 12 were removed from the sample because they were either duplicate names, multiple children in the same family or were ineligible due to age.

Parents of children in the sample were contacted initially via mail to inform them about the study and to request their participation. The mailing, written in both English and Spanish, included a letter of introduction, a study information sheet, information about alternative sources of no-cost and low-cost health insurance for children, and a \$10 gift certificate to a major statewide drug store chain as an incentive to participate in the study. The gift certificate incentive was provided to all parents who were contacted by mail regardless of whether or not they consented to participate. The mailing also included a postcard asking parents to return it to the researchers if they did not want to participate.

To assess the adequacy of the survey instrument in terms of response rate, length, format, and comprehension, a pilot test was conducted of 5 parents prior to undertaking the full survey. Based on the findings from the pilot test, the instruments were revised.

Parents were telephoned by a survey research firm to request their consent to participate and to conduct the interview if consent was granted. Both English- and Spanish-speaking interviewers were available to conduct the survey with parents selecting their preferred language. Telephone calls were made to the sample between October 11, 1999 and

November 7, 1999. Up to 20 attempts were made to contact each family. The calls were staggered over different times of the day and days of the week. All interview break-offs and refusals were contacted at least once to attempt to convince them to complete the interview.

The disposition of the sample is presented in Appendix A. A total of 357 potential respondents (or 48% of the sample) were considered non-contacts. Another 73 refused to participate, either by mailing in the postcard indicating that they did not want to be called or by telling the surveyor at the time of the call. In total, 317 calls were completed, of which 242 (76%) were in English and 75 (24%) were in Spanish. This translates into an overall response rate of 42%.

Data Collection and Analysis

All parents who met the selection criteria and agreed to participate were interviewed using a survey instrument developed by the research team. It assessed parents' knowledge about the eligibility criteria for the Child Health Plan and their familiarity with and attitudes towards no-cost and low-cost children's health insurance programs. The telephone survey is a composite of tested surveys designed to elicit similar information.

SAS (Statistical Analysis System) was used to analyze the data using descriptive analyses to summarize the findings (SAS Institute, 1985). Simple analytic approaches were used to calculate frequency distributions. Where appropriate, statistical tests of significance were used to evaluate the meaningfulness of differences between English-speaking and Spanish-speaking respondents (DiLiorio F, 1991; Sincich T, 1982). For dichotomous and other categorical data, chi-square analyses were used to test for significant differences between groups. A .05 level of statistical significance (two tailed test) was used as a cut off. Cases with missing item responses were deleted from the relevant analyses. Only statistically significant differences are mentioned in the text.

RESULTS

Demographic and Health Characteristics

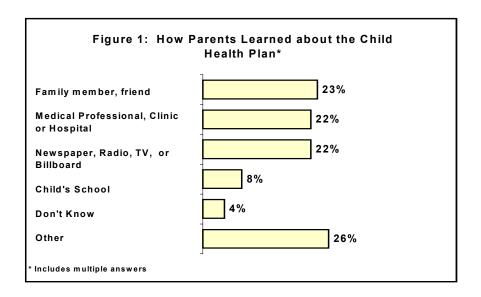
As Table 1 demonstrates, the majority (62%) of children in the sample were under the age of 11, though 38% were between the ages of 11 and 19. Overall, more boys were represented in the sample. Nearly 60% of the respondents identified their child as Hispanic, including 45.4% of the English-speaking respondents. One-fifth of the children were White, non-Hispanic and 11.5% were African American. About half of the respondents had incomes below \$20,000, another 29.8% reported incomes between \$20,000 and \$30,000, and 20.8% had incomes above \$30,000. Levels of parental education varied significantly between the English- and Spanish-speaking respondents, with over half (52.7%) of the Spanish-speaking respondents indicating that they had less than a high school education compared to 9.5% of the English-speaking respondents. In contrast, nearly one-fifth of the English-speaking respondents reported that they were college graduates compared to 4% of the Spanish-speaking respondents.

The majority of families (88.6%) had at least one parent employed. Only 11.4% of the respondents indicated that there was no employed adult in their household. English-speaking respondents tended to have smaller families than Spanish speakers, with 12% reporting 2 persons in the household compared to only 4.1% of the Spanish speakers.

The vast majority of children (91.8%) were reported to be in excellent or good health. (Table 1) However, children of Spanish-speaking respondents were significantly less likely than children of English-speaking respondents to say that their children had excellent or good health status (79.7% vs. 95.5%). In turn, children of Spanish-speaking respondents were more likely to report their children as being in fair or poor health, with one in five falling in this category.

Child Health Plan Outreach and Enrollment

Outreach for the Child Health Plan initially involved information sharing with statewide childrenrelated organizations and schools, as well as some community service announcements and radio PSAs. Parents in this survey reported that they learned about the Child Health Plan primarily from family members or friends, a medical professional, clinic or hospital, the media or some other unspecified source (Figure 1, Table 2). Only a small proportion of respondents (7.9%) learned about the program through their child's school. Some differences were found



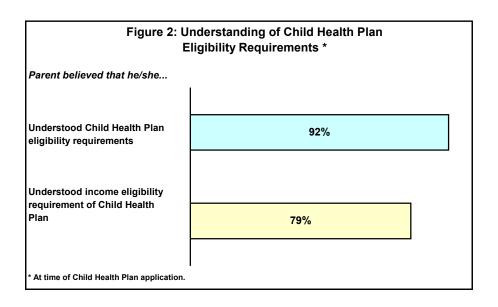
between English- and Spanish-speaking respondents. For example, English speakers were far more likely to identify a medical professional, clinic or hospital as a source.

The vast majority of parents (71%) obtained the application through the mail after calling the Child Health Plan's toll free line. Kaiser Permanente medical centers proved to be the second most common source of the applications, though only 13.9% of the respondents reported to have used this vehicle. Just as a relatively small proportion of parents learned about the program through schools, so did a small proportion obtain the application through schools.

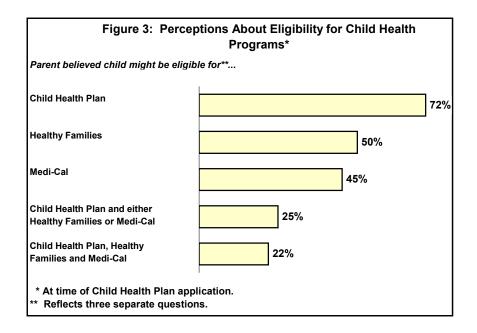
Understanding of Eligibility Requirements

Since a large number of applications for the Child Health Plan were rejected because children were ineligible, we sought to learn if the parents believed that they understood the eligibility criteria or applied mistakenly. The overwhelming majority of respondents (92.4%) indicated that they believed they understood the general eligibility requirements such as age

requirements (Figure 2, Table 3). Moreover, nearly 80% reported that they specifically understood the income criteria when they applied to the Child Health Plan. These findings are surprising given that such a high proportion of the rejected applications were denied coverage because the families' incomes were too low for the program. Altogether, 71.9% of the respondents indicated that they believed that their child was eligible for the program. Whether the high degree to which parents misunderstood the eligibility requirements was due to lack of clarity of the program's informational materials or the failure of parents to carefully review the documents accompanying the application which described the eligibility rules is unclear. When parents were denied enrollment in the Child Health Plan, Kaiser Permanente sent them a letter that specified the reason for denial.



Many parents also believed that their children were eligible for Healthy Families and Medi-Cal. Approximately 50% of the parents believed that their child was eligible for Healthy Families and 45.4% thought their child was eligible for Medi-Cal (Figure 3, Table 3).



Although these figures are lower than the 71.9% who believed their child was eligible for the Child Health Plan, the proportion of parents who believed that their child was eligible for all programs is relatively high. We calculated that 22% of all respondents believed that their child was eligible for all three programs and 25% thought their child was eligible for the Child Health Plan and either Healthy Families or Medi-Cal. This reflects significant confusion about eligibility requirements for all of the programs.

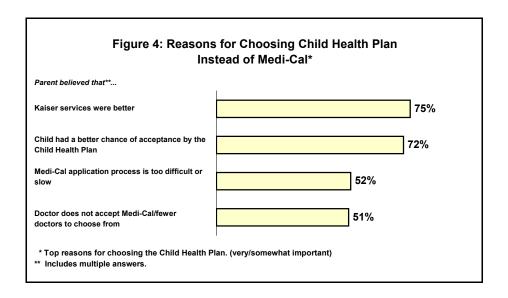
Applications to Other Programs

We calculated that 64% of the parents believed their child was eligible for Healthy Families and/or Medi-Cal. However, only 15.1% actually applied for another program at the time the application for the Child Health Plan was submitted. Nearly 40% of those who applied for another program applied for Healthy Families and 31.3% for Medi-Cal (Table 4). Subsequent to being denied Child Health Plan coverage, 40.1% of parents applied to the Healthy Families program for their child and 27.4% applied for Medi-Cal.

Reasons for Applying for the Child Health Plan Instead of Medi-Cal

As indicated, it is possible and likely that as many as nearly half of the respondents believed that their child might be eligible for both Medi-Cal and the Child Health Plan. Of these, the vast majority applied for the Child Health Plan only. We sought to better understand the reasons why parents would elect to apply for the Child Health Plan rather than Medi-Cal.

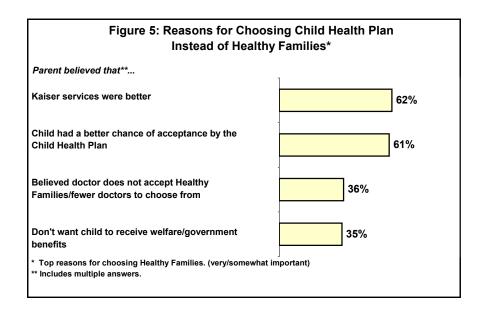
Parents were asked to rate various reasons (as "very important," "somewhat important," "not important," or "don't know") for choosing the Child Health Plan.



Parents identified two primary reasons for applying for the Child Health Plan over Medi-Cal: they believed that Kaiser Permanente medical services were better than those offered through Medi-Cal (74.6%) and they believed their children had a better chance of being accepted by the Child Health Plan (72%) (Figure 4, Table 5). These reasons were identified as very important or somewhat important in choosing the Child Health Plan by approximately three-quarters of the respondents. Other top-rated reasons included parents' belief that the application process is too difficult or slow (51.7%), a belief that their doctor does not accept Medi-Cal and/or Medi-Cal has fewer doctors to choose from (50.8%) and a belief that Medi-Cal requires too much private information (49.2%).

Reasons for Applying for the Child Health Plan Instead of Healthy Families

We also wanted to understand why parents might prefer the Child Health Plan instead of Healthy Families. Thus, we asked parents to respond to a list of potential reasons why they applied for the Child Health Plan instead of Healthy Families (Figure 5, Table 6). Respondents cited two primary motivations for choosing the Child Health Plan instead of Healthy Families: a belief that Kaiser Permanente medical services were better than those offered by Healthy Families (62.2%) and a belief that their child had a better chance of acceptance in the Child Health Plan (60.6%). These were the two most commonly cited reasons.



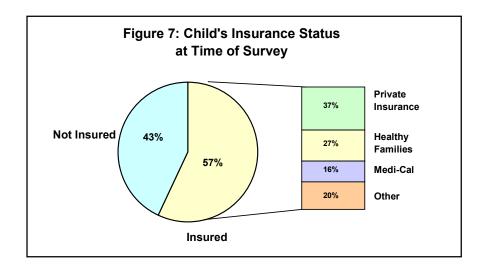
Perceptions of the Medi-Cal and Healthy Families Programs

Respondents were asked to rate the Medi-Cal and Healthy Families programs as "very good," "good," "bad," "very bad," or "don't know enough to say." A high proportion of respondents indicated that they didn't know enough about the programs to say, particularly with respect to Healthy Families (Figure 6, Table 7). Although 41.5% indicated that they believed that Healthy Families was a very good or good program, over half (56%) said that they didn't know enough to say. The same pattern held for Medi-Cal, though the proportions were somewhat less skewed. While 45.2% reported that they consider Medi-Cal to be a very good or good program, only 36.8% indicated that they did not know enough to say. No statistical differences were found in perceptions of Medi-Cal and Healthy Families by language spoken.

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	Very Good Program	Good Program	Bad/Very Bad Program	Don't Know Enough to Say
Medi-Cal	12%	33%	18%	37%
Healthy Families	17%	24%	3%	56%

Insurance Status at Time of Survey

As a means of providing context for understanding the survey results, we asked respondents to provide information about their children's current health insurance status. Particularly, we asked if they could access insurance for their children through the parents' employment, whether the child was currently insured and, if so, by whom. Interestingly, nearly a third said that their child had access to insurance through a parents' employer (though no differentiation was made between access to that insurance at no cost, at partial cost or full cost to the parent). However, English-speaking respondents were twice as likely to report the availability of employment-based insurance than Spanish-speaking respondents. More parents (57%) reported that their child was insured at the time of the survey than those (43%) who indicated that their child was still uninsured (Figure 7).



Again, English-speaking respondents were far more likely to say that their child was currently insured compared to Spanish-speaking respondents (64.5% vs. 33.3%). Of those with insurance, 43% received public insurance (27.6% had Healthy Families and 16% had Medi-Cal), 37% had private insurance, and another 20% had "other."

Comments about Child Health Plan, Healthy Families and Medi-Cal

As a final question, respondents were asked if they had any comments about the Child Health Plan, Healthy Families or Medi-Cal. (A complete list of categorized comments can be found in Appendix B.) One hundred thirty-one respondents (41%) offered comments covering issues related to frustrations with the enrollment process for the Child Health Plan, confusion about eligibility rules governing all three programs, interest in obtaining insurance for their children and various views about Kaiser Permanente, Healthy Families and Medi-Cal (Table 9). The greatest number and proportion of comments (n=32;24.4%) related to respondents' interest in Kaiser Permanente and a desire to get such coverage for themselves or their child. A number of parents said that they specifically wanted Kaiser coverage for their children or themselves. One parent said, "I wish I could put [my son] in a Kaiser health plan. I wouldn't even mind paying for it. I am not very happy with the doctors who are seeing him now [through Medi-Cal.] He used to see the doctors at Kaiser." The second most frequently stated comment related to the respondent's confusion about why their child was denied coverage. "I feel that they made a bad decision in denying health insurance for my kid," one parent said. "I would really like them to inform me as to why the application for health insurance was denied." In some cases, the lack of information was due to language barriers. At least four respondents said that they could not understand the English letter that they received informing them that their child was denied. Similarly, parents said that they found the eligibility requirements unclear. "I don't know why [Kaiser Permanente] didn't explain the eligibility standards better," one respondent commented.

Essentially equivalent numbers of respondents stated that they thought the income eligibility requirements for the Child Health Plan are too restricted and said that the income requirements are unclear. One respondent said "Kaiser Permanente has a good program going on; but they should reconsider the criteria they have set on household family income, since it is geared on helping low income families." Another parent said, "We applied for Kaiser Permanente but we were denied due to low income. We applied for Healthy Families, but we were denied due to high income. Where do we fit? We have an uninsured child with no insurance. I felt misled. First we qualify and then we don't. Where do we get insurance?"

Several respondents also expressed confusion about which of the several children's health insurance programs their children might be eligible for. Many parents said that they were anxious to get health insurance for their children, but didn't know how to get it. One parent said "I would like to know how I can obtain health insurance for my children. I don't want to go without health insurance. It is so difficult." A number of parents reported that their child was

currently enrolled in Healthy Families or that they wanted to enroll their child in the program because they thought it was a good program. Some of the other comments related to problems with the enrollment process, disappointment with being denied coverage, and their child being denied Healthy Families coverage.

SUMMARY

In 1997, Kaiser Permanente inaugurated the Child Health Plan, a program designed to offer subsidized Kaiser membership to uninsured children in California with incomes between 200% and 250% of the federal poverty level. During the first year of the program, enrollment levels were low. This was due, in part, to the large number of children denied coverage because their family incomes were too low, and hence, the children were potentially eligible for Healthy Families or Medi-Cal. The purpose of this study was to determine why parents elected to apply for the Child Health Plan when their child was likely eligible for another, lower cost program. In addition, we sought to learn about parents' experiences with the Child Health Plan enrollment process and views about the application and informational materials and to assess their views about the Child Health Plan, Healthy Families and Medi-Cal. Our study has several notable findings as outlined below.

 Parents were confused about the eligibility criteria for the Child Health Plan, as well as for Healthy Families and Medi-Cal.

Parents were clearly confused about the eligibility criteria for the Child Health Plan as well as Healthy Families and Medi-Cal. This finding is supported by the high degree to which respondents reported that they understood the eligibility requirements for the Child Health Plan, including the income criteria, and believed that their child met these, even though they did not. Relatively large proportions of respondents also believed that their children were simultaneously eligible for Healthy Families and/or Medi-Cal. While the reasons for this confusion were not specifically explored in this study, previous studies have found that the complex maze of multiple programs in states like California, with different eligibility requirements, application processes and benefit packages, contributes to, if not directly causes, such confusion among parents (Gardner S, 1989; Harvey B, 1991; Halfon et al.,1995).

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² Income eligibility requirements for the Child Health Plan were raised in early 2000 to cover children with incomes between 250% to 300% of the federal poverty level in response to the changes in eligibility for Healthy Families.

• The top two reasons cited for choosing Child Health Plan: Kaiser Permanente services are better and a better chance of program acceptance.

Parents in this study elected to apply for the Child Health Plan over Healthy Families and Medi-Cal primarily because they believed that Kaiser Permanente medical services were better, and they thought they had a better chance of being accepted by the program. Nearly 75% of respondents cited better services as a "very important" or "important" reason for choosing the Child Health Plan over Medi-Cal and about 62% indicated this as the reason for choosing the Child Health Plan over Healthy Families. Seventy-two percent of parents believed that their child had a better chance of being accepted by Medi-Cal, and 61% reported better chances of acceptance by the Child Health Plan.

The large proportion of respondents citing better Kaiser Permanente services suggests that they are confused about the role and operations of Medi-Cal and Healthy Families. Parents appear to view Medi-Cal and Healthy Families as public programs which provide public health care. They appear to not understand that children enrolled in these programs can generally select private plans, such as Kaiser Permanente, and that Healthy Families and Medi-Cal managed care are simply payers which serve to facilitate enrollment in health plans. This study suggests that parents tend to perceive only the public component of this equation. This view may be a remnant of earlier days of fee-for-service Medi-Cal, when the number and selection of providers available to beneficiaries was severely restricted.

Despite responses indicating that Kaiser Permanente services are better, parents tended to rate Medi-Cal and Healthy Families fairly high. When asked about how they would rate Medi-Cal and Healthy Families, a high proportion of respondents indicated that they didn't know enough about the programs to say. However, among those who did have an opinion, the majority rated the programs as "very good" or "good" (though respondents were more likely to rate Healthy Families highly than Medi-Cal).

 A high proportion of children obtained insurance subsequent to applying for the Child Health Plan.

As a means of providing context for understanding the survey results, we asked respondents to provide information about their children's current health insurance status. Forty percent of the respondents indicated that they had subsequently applied for Healthy Families

and 27.4% had applied for Medi-Cal. Surprisingly, nearly 60% of the respondents reported that their child was insured at the time of the survey. Of those with insurance, children were most likely to have private insurance (37.6%). Another 27.6% were enrolled in Healthy Families, 16% had Medi-Cal and 20% in "other." Given the relatively low incomes of these families, it is unexpected to find so many children to have obtained private insurance.

• Parents learned about the Child Health Plan primarily through informal sources.

Finally, the parents in this study learned about the Child Health Plan primarily through family members or friends, the media, a medical professional, clinic or hospital, or another, unspecified source. Only a small proportion of respondents learned about the program through their child's school. The relatively high proportion of respondents who indicated that they learned about the program through the media is surprising, since there was very little advertising through newspapers, billboards, television and radio. It may be that parents confused the Child Health Plan with Healthy Families and Medi-Cal, which received substantial media coverage.

SUGGESTIONS FOR PROGRAM IMPROVEMENT

Although the original focus of this study was the Child Health Plan, the findings have implications for Healthy Families and Medi-Cal as well. To be sure, these findings offer suggested direction for the Child Health Plan, particularly with respect to addressing the confusion over the program's eligibility requirements and purpose as described below. However, our findings tend to relate more to Healthy Families and Medi-Cal which, for various reasons, parents elected to bypass in favor of the Child Health Plan. Hence, the recommendations encompass these programs as well.

Results from this study suggest that parents are confused about the various eligibility rules and enrollment processes that govern the various programs. These findings are consistent with other research that has shown that eligibility criteria and enrollment procedures are difficult to understand (Kaiser Commission on Medicaid and the Uninsured, 2000; Kaiser Family Foundation, 1989; Ellwood M, 1999; Schwalberg et al.,1999). Our findings suggest that the Child Health Plan, Healthy Families and Medi-Cal could better inform parents about eligibility rules as well as how to initiate the enrollment process. To address this problem, we

offer three suggestions, each with different levels of complexity and difficulty. We have organized these recommendations in terms of the ease of implementation with the easiest steps listed first.

1. More effectively communicate eligibility criteria for the Child Health Plan.

The Child Health Plan could seek to communicate more clearly the program's eligibility criteria to the public. At a minimum, this could include an information campaign with clear messages about eligibility rules that uses more formal methods of reaching out than the informal avenues cited by respondents in this study, such as friends and family, and medical professionals. While informal avenues of communication are essential as the findings here demonstrate, the opportunities for misinformation conveyed through informal means are greater. Outreach plans could also include closer coordination with Healthy Families and Medi-Cal. Since this study was fielded, efforts have been made by the Child Health Plan and state officials to coordinate outreach efforts among Medi-Cal, Healthy Families and the Child Health Plan, which may improve communication with consumers. However, coordination should be carefully planned and executed so as to improve the public's understanding and knowledge about programs. The state agencies responsible for Healthy Families and Medi-Cal have implemented a uniform outreach and enrollment effort through a joint application form and a media campaign covering both programs. Ironically, these well-intentioned efforts may have contributed to the confusion by blurring the distinctions between the programs and unintentionally conveying an impression that parents have a choice among the various programs. Parents need understandable messages about the eligibility criteria and other important distinctions between the programs. It is also clear from this study that parents need to be informed that Healthy Families and Medi-Cal, for the most part, are not health plans, but rather financial mechanisms for enrolling children in health plans and that children can generally be enrolled in either public or private plans, including Kaiser Permanente.

2. Simplify the eligibility rules and enrollment process for all programs.

As important as clear communication is, there is a limit to which this can resolve the confusion that parents experience in understanding eligibility rules and enrollment processes. Given the multitude of children's programs that currently exist and the complexity of eligibility rules governing them, it is difficult to convey genuinely clear information about the programs. Consequently, it may be unreasonable to expect that parents can discern which program's eligibility is a match for their child. As this and other studies demonstrate, families face other real and perceived enrollment barriers to Medi-Cal and Healthy Families – as well as the Child Health Plan – such as burdensome applications and requirements for extensive documentation. Thus, additional steps may be needed to assist parents to navigate the current maze of children's health insurance programs to enroll their children. As others have suggested, the programs could:

- Make income eligibility rules consistent for children of all ages across Medi-Cal, Healthy
 Families and the Child Health Plan so that a family only has to apply for one program for all
 their children, regardless of age;
- Fully uncouple Medi-Cal from the welfare system to remove the multiple eligibility criteria
 that evolved from the historical link to welfare and to ensure that applications are assessed
 by health departments;
- Adopt "presumptive eligibility" for Medi-Cal and Healthy Families whereby children would be
 presumed eligible, based on a statement of family income and other fundamental
 information, for the period of time during which the application is being processed.

3. Integrate children's health insurance programs.

One solution to problems of children's access to health programs would be the elimination of the complex array of fragmented programs and various eligibility criteria. Many have proposed that California integrate these various programs (see, for example, Kronick et al.,1999; Dorn S, 1999; Hughes D, 1992). However, categorical programs continue to flourish

with at least five major state-operated children's health programs in California³ and two major private sector children's programs (Kaiser Permanente's Child Health Plan and CaliforniaKids). While California used its SCHIP funds to create a stand-alone program independent of Medi-Cal, it could consider combining these two programs. A single program would greatly reduce the current confusion among consumers. In addition, the state could take steps to integrate the other children's health programs into a single, simplified and seamless system. The most straightforward method of integration would be through the use of technology to meld the various programs into a unified administrative and eligibility system that is unnoticeable to the consumer.

CONCLUSION

The creation of the Child Health Plan, along with Healthy Families and the recent Medi-Cal expansions, provides an opportunity to help low income children obtain health insurance and needed health care. However, it is clear that the availability of health insurance, even highly subsidized or free coverage, is not sufficient. Parents have experienced considerable confusion about the programs, particularly with respect to eligibility criteria, causing some children to not enroll. In order to help parents take advantage of the opportunities to cover their children, all programs, whether public or private, could aggressively simplify their eligibility criteria and enrollment processes as well as effectively communicate with the public about benefits. While it may not be feasible to completely redesign the current system or achieve needed improvements through an administrative overlay that is invisible to consumers, relieving parents of the burden of navigating overly complex eligibility rules and confusing enrollment processes would go far in ensuring that California's children obtain needed health care coverage.

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³ Access for Infants and Mothers/AIM, Healthy Families, Medi-Cal, Child Health and Disability Prevention/CHDP, California Children's Services/CCS

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TABLES: SURVEY DATA

TABLE 1: Demographic and Health Characteristics of Survey Population

Percent Distribution of Selected Characteristics

	ALL (CHILDREN	ENGLISH*		S	PANISH*
	n	percent	n	percent	n	percent
Age (n=313)						
< 5 years old	99	31.6	78	32.5	21	28.8
5-10 years	95	30.4	72	30.0	23	31.5
11-19 years	119	38.0	90	37.5	29	39.7
Child's Sex (n=315)						
Male	171	54.3	133	55.0	38	52.0
Female	144	45.7	109	45.0	35	48.0
Race/Ethnicity (n=314)						
Hispanic	183	58.3	109	45.4	74	100.0
White, non-Hispanic	63	20.1	63	26.3	0	0.0
African American, non-Hispanic	36	11.5	36	15.0	0	0.0
Other, non-Hispanic	31	10.1	31	13.3	0	0.0
Carlot, Hori Thoparile	0.		•			••
Less than high school (n=315)	62	19.7	23	9.5	39	52.7
High school	109	34.6	84	34.9	25	33.8
Technical school	17	5.4	15	6.2	2	2.7
Some college	76	24.1	71	29.5	5	6.8
College graduate	51	16.2	48	19.9	3	4.0
Parent Employment Status (n=315)						
Two employed parents	88	28.0	66	27.4	22	29.7
One employed parent	191	60.6	142	58.9	49	66.2
No employed parent	36	11.4	33	13.7	3	4.1
People in Household (n=315)						
2	2 32	10.2	29	12.0	3	4.1
3		34.3	90	37.3	18	24.3
4		28.2	61	25.4	28	37.8
5+		27.3	61	25.3	25	33.8
		21.0	•	_0.0		00.0
Perceived Health Status of Child (n =316)						
Excellent or good	290	91.8	231	95.5	59	79.7
Fair or poor	26	8.2	11	4.5	15	20.3

^{*}Language in which the survey was conducted. Figures in bold are statistically significant at <.05

TABLE 2: Child Health Plan Outreach and Enrollment

	ALL C	HILDREN	E	NGLISH*	SPANISH	
	n	percent	n	percent	n	percent
n = 317						
How parent learned about the Child Health Plan**						
Family member/friend	74	23.3	59	24.4	15	20.0
Newspaper, radio, TV, billboard	70	22.1	54	22.3	16	21.3
Medical professional, clinic or hospital	68	21.5	58	24.0	10	13.3
Child's school	25	7.9	18	7.4	٨	٨
Other	81	25.6	56	23.1	25	33.3
Don't know	14	4.4	٨	٨	٨	٨
Where parent obtained application form**						
In mail after request by 800 number	225	71.0	178	73.6	47	62.7
Kaiser Permanente medical center	44	13.9	30	12.4	14	18.7
Child's school	21	6.6	15	6.2	٨	٨
Other	21	6.6	15	6.2	٨	٨
Don't know	10	3.2	٨	٨	٨	٨

^{*} Language in which the survey was conducted

^{**} Some respondents gave more than one answer

[^] Figures not shown due to small cell size

Figures in bold are statistically significant at <.05

TABLE 3: Understanding Eligibility Requirements

	ALL CHILDREN		ENGLISH*		S	PANISH*
	n	percent	n	percent	n	percent
n = 317 Child Health Plan						
Parents believed They understood eligibility requirements for the Child Health Plan at the time of application	293	92.4	223	92.2	70	93.3
They understood income eligibility for the Child Health Plan	250	78.9	196	81.0	54	72.0
Their child was eligible for the Child Health Plan	228	71.9	178	73.6	50	66.7
Healthy Families and Medi-Cal						
Parents thought Their child might be eligible for Healthy Families	159	50.2	119	49.2	40	53.3
Their child might be eligible for Medi-Cal	144	45.4	107	44.2	37	49.3

^{*}Language in which the survey was conducted

TABLE 4: Applications to Other Programs

	ALL	ALL CHILDREN		NGLISH*	SI	PANISH*
	n	percent	n	percent	n	percent
n = 317						
Applied for other programs at time of Child Health Plan application	48	15.1	32	13.2	16	21.3
Other programs applied for at the time of Child Health Plan application** (n = 48)						
Medi-Cal	15	31.3	٨	٨	٨	٨
Healthy Families	19	39.6	٨	٨	٨	٨
Other	8	16.7	٨	٨	٨	٨
Don't know	9	18.8	۸	٨	٨	٨
Applied for Healthy Families since Child Health Plan denial	127	40.1	93	38.4	34	45.3
Applied for Medi-Cal since Child Health Plan denial	87	27.4	67	27.7	20	26.7

^{*}Language in which the survey was conducted

^{**} Some respondents gave more than one answer

[^] Figures not shown due to small cell size

TABLE 5: Reasons for Applying for the Child Health Plan Instead of Medi-Cal*

	n	ALL CHILDREN
n = 118	n	percent
Believed Kaiser medical services were better		
Very/Somewhat Important	88	74.6
Believed child had a better chance of acceptance by the Child Health Plan Very/Somewhat Important	85	72.0
Believed Medi-Cal application process is too difficult or slow Very/Somewhat Important	61	51.7
Believed doctor does not accept Medi-Cal / fewer doctors to choose from Very/Somewhat Important	60	50.9
Believed Medi-Cal requires too much private information Very/Somewhat Important	58	49.2
Don't want child to receive Medi-Cal or other government benefits Very/Somewhat Important	45	38.1
Had bad experience with Medi-Cal in the past Very/Somewhat Important	31	26.3
Child previously denied Medi-Cal coverage	30	25.4
Believed Medi-Cal application forms are not available in Spanish** (n = 30) Very/Somewhat Important	18	60.0
Fear of having to pay benefits back because of immigration status** (n = 30) Very/Somewhat Important	18	60.0

^{*} Some respondents gave more than one answer

^{**} Asked only of Spanish-speaking respondents

TABLE 6: Reasons for Applying for the Child Health Plan Instead of Healthy Families*

		ALL CHILDREN
	n	percent
n = 127		
Believed Kaiser medical services were better	70	60.0
Very/Somewhat Important	79	62.2
Believed child had a better chance of acceptance by the Child Health Plan		
Very/Somewhat Important	77	60.6
Believed doctor does not accept Healthy Families / fewer doctors to choose from		
Very/Somewhat Important	45	35.4
Don't want child to receive welfare/government benefits		
Very/Somewhat Important	44	34.6
Believed Healthy Families application process is too difficult or slow		
Very/Somewhat Important	43	34.1
Policy and Healthy Families has higher out of posket evenes		
Believed Healthy Families has higher out-of-pocket expense	44	20.0
Very/Somewhat Important	41	32.3
Child previously denied Healthy Families coverage		
Very/Somewhat Important	37	29.1
Believed Healthy Families requires too much private information		
Very/Somewhat Important	32	25.2
voi y comownat important	02	20.2
Had bad experience with Healthy Families in the past		
Very/Somewhat Important	16	12.6
Healthy Families application forms are not available in Spanish** (n = 30)		
Very/Somewhat Important	6	20.0
Fear of having to pay back benefits because of immigration status** (n = 30)	10	22.2
Very/Somewhat Important	10	33.3

^{*} Some respondents gave more than one answer

^{**} Asked only of Spanish-speaking respondents

TABLE 7: Perceptions of Medi-Cal and Healthy Families Programs

			ALL CHILDREN			SPANISH		
		n	percent	n	percent	n	percent	
n = 316								
Perception of the He	ealthy Families Program							
	Very good program	54	17.1	43	17.8	11.0	14.7	
	Good program	77	24.4	59	24.5	18	24.0	
	Bad/very bad program	^	٨	٨	٨	٨	٨	
	Don't know enough to say	177	56.0	132	54.8	45	60.0	
Perception of the Mo	edi-Cal Program							
	Very good program	38	12.0	26	10.8	12	16.0	
	Good program	105	33.2	86	35.7	19	25.3	
	Bad/very bad program	57	18.0	48	19.9	٨	٨	
	Don't know enough to say	116	36.8	81	33.6	35	46.7	

^{*} Language in which the survey was conducted

[^] Figures not shown due to small cell size

TABLE 8: Insurance Status at Time of Survey

		ALL CHILDREN		ENGLISH*		SPANIS	
		n	percent	n	percent	n p	ercent
n = 317							
Child could get insurance through parents' em	nployer	102	32.2	88	36.4	14	18.7
Child currently has insurance		181	57.1	156	64.5	25	33.3
Type of Incurence** A	(n = 101)						
Type of Insurance** ^	(ii = ioi) Private						
	insurance***	68	37.6	٨	٨	٨	^
	Medi-Cal	29	16.0	٨	٨	٨	۸
	Healthy Families	50	27.6	٨	٨	٨	٨
	Other	36	20.0	٨	٨	٨	٨

^{*}Language in which the survey was conducted

Figures in bold are statistically significant at <.05

^{**} Some respondents gave more than one answer

^{***} Through parent's employer, union or purchased directly from insurance company

[^] Figures not shown due to small cell size

TABLE 9: Comments about the Kaiser Permanente Child Health Plan, Healthy Families and Medi-Cal*

	ALL CHILDREN	
	n**	percent
n = 131		
I like Kaiser Permanente	32	24.4
I want Kaiser coverage for my child	17	12.9
Other positive comments	8	6.1
I have Kaiser coverage and I am happy with it	6	4.6
I want Kaiser coverage for adults	1	8.0
I don't understand why my child was denied coverage	16	12.2
I need more/better information about how to obtain insurance for my child	15	11.5
The Child Health Plan income eligibility requirements are unclear	14	10.7
The income eligibility requirements for the Child Health Plan are too low/ complaints	13	9.9
and suggestions to change income eligibility requirements		
My shild is now in Llockhy Comilion/ Like Llockhy Comilion	12	9.2
My child is now in Healthy Families/ I like Healthy Families	12	9.2
Insurance is important/ I want any insurance coverage for my child	11	8.4
insurance is important i want any insurance coverage for my child	11	0.4
Miscellaneous	11	8.4
Misocianicous	11	0.4

^{*} Some responses were placed in multiple categories as noted in Appendix B

^{**} Additional categories are in Appendix B, therefore the sum of n's in the table do not add up to 131

APPENDIX A SAMPLE DISPOSITION

NAMES PULLED	759
REMOVED FROM SAMPLE*	12
FINAL SAMPLE	747
Non contacts	
Bad addresses	14
No answer/busy	80
Non-residential/non-working	175
Broke off call	23
Language/health problems	16
Answering machines	49
Refusals	
On phone	12
Via postcard	61
COMPLETED INTERVIEWS	317

^{* 9} children were duplicate or multiple children in the same family;

³ children lived in households where no adult was available to participate in the survey

APPENDIX B

ADDITIONAL COMMENTS FROM SURVEY RESPONDENTS

At the close of the telephone interview, survey respondents were asked "Do you have any comments about Kaiser Permanente Child Health Plan, Healthy Families or Medi-Cal that you would like to share?" Their comments are presented below.

I like Kaiser Permanente

A. I want Kaiser coverage for my child

- I was pleased with the payments of \$76 per month. My son was a member before, but
 they could not find his number in the computer from the past. I was very disappointed
 and contacted the membership department. I got a letter of denial. Since I had been a
 member in the past, I knew Kaiser is a good hospital and has good insurance. I wanted
 my son to be a member. I am just very disappointed.
- I spoke to someone from Kaiser twice, with no results. My daughter cannot go 3 months
 without health care. I can't understand why she was denied. They offered lower
 premiums for low-income families, but she was denied. I want her to be with Kaiser.
 They are a good hospital.*
- In the future, can we apply for this program for my son? I like this program, since I used to have medical insurance with Kaiser. I much prefer this program over Healthy Families or Medi-Cal.
- I wish I could put him in a Kaiser health plan. I wouldn't even mind paying for it. I am not very happy with the doctors who are seeing him now (through Medi-Cal). He used to see the doctors at Kaiser.
- I am not familiar with the Healthy Families program. Medi-Cal is okay. It will do for now but I would like to have Kaiser as our health plan. I wish they would loosen the qualifications for those who apply for it. I would like my niece to receive this insurance also. One more thing, I would also like to have some feedback as to the results of this interview in writing.
- I wanted Kaiser Permanente Child Health Plan for my daughter, but I have no problem ending up with Healthy Families. I find it to be a very good program and very reasonable.*
- I like to have the Kaiser plan for my children.
- Yes. I wish they would reconsider (My child)'s application for health insurance. I do believe Kaiser's health plan for children is one of the best in the market today.
- Kaiser is a good program. Unfortunately, they denied my application for my son. The sad part about the program is that it is supposed to help low-income families, but the requirements are tied up in so much red tape.*
- I would've have liked to have stayed with Kaiser, but we were under the category for 200 dollars. Well, I wish (My child) could've kept the physician she was born with.
- I would like to have Kaiser because I like their coverage. I used to have Kaiser, and I think it is an excellent insurance.

^{*} Response placed in more than one category.

- I didn't get the \$10 voucher for Rite-Aid. Anyway, I'm really happy with the service that I
 get from Kaiser. I hope my children can get the coverage.*
- I am happy with the Kaiser Permanente program. I wonder if there is any way I could get back into that program for my son. He just turned 19, and we want him to be in a Kaiser program.
- I would really like to get Kaiser child health insurance or Healthy Families for my kids. I
 do hope they would reconsider my application, since it is a much better program than
 Medi-Cal.*
- I felt really bad. I wanted my kids to be on Kaiser, but my income didn't help me to qualify for the coverage.
- My daughter was denied by Kaiser for the health insurance. I do hope they will reconsider the case of my daughter.
- Yes. Kaiser Permanente should really lighten up on the program, for it is geared to helping low-income families, like my family. When I applied, (My child) was in the best of health. She still is today, but it would have been nice if we would have had Kaiser Permanente Child Health Plan as our health plan for (My child).*

B. Other positive comments

- I'm glad Kaiser has the Cares for Kids program because a lot of people need it.
- I have a good very impression of Kaiser, but later I wasn't able to afford it.
- Kaiser is a good insurance and I have no problems with them.
- Kaiser Permanente Child Health Plan is a very good program.
- Kaiser Permanente Child Health Plan is a very good program, and I am disappointed that my daughter was denied coverage.
- Kaiser Permanente has a good program going on; but they should reconsider the criteria they have set on household family income, since it is geared on helping lower-income families.
- Healthy Families and Kaiser's Child Health Plan are really excellent programs. They help families who are self-employed. Otherwise, it would have been difficult to secure health insurance for their kids.
- Yes. I cannot wait to have my coverage with Kaiser to kick in. It is a lot better than having Medi-Cal.*

Have Kaiser and happy with it

- I'm very happy with Kaiser. I've had that program for over twenty years, and I hope they don't change their quality of service.
- The Kaiser Permanente Child Health Plan is a very good program, especially for families who cannot afford to pay the full amount. Plus, the service offered at Kaiser is excellent.
- Kaiser has a magnificent program, and the doctors' medical responsibilities are well covered.
- I am very happy with Kaiser Permanente's doctors for (My child).
- Kaiser has been very good to us. Both of my children were born under their coverage.
 Their service is great.
- I am happy with Kaiser Permanente Child Health Plan. I have had it for my son for the past two months. I am very pleased to have the insurance coverage for my son.

^{*}Response placed in more than one category.

C. I want Kaiser for adults

 I applied for Healthy Families, but they gave us Kaiser. I would like to insure my wife with Kaiser, also.*

D. I don't understand why my child was denied coverage by the Kaiser Permanente Child Health Plan

- Their rates are going up substantially. After applying twice and being turned down both times, I was never told why. I am living on social security only. I would like to be contacted and shown how to qualify for a hospital plan for my daughter.
- I want to know why (My child) is not qualified for the program. They are not answering my question. They keep giving me different applications to fill out, but so far he is not qualified. No one is answering that question.
- I spoke to someone from Kaiser twice, with no results. My daughter cannot go 3 months without health care. I can't understand why she was denied. They offered lower premiums for low-income families, but she was denied. I want her to be with Kaiser. They are a good hospital.*
- Could they please inform me in writing as to why I didn't meet the qualifications for this
 insurance program? I am so confused. However, we need to be notified in Spanish. I
 won't understand the correspondence well if we are notified in English. It has to be
 written in Spanish.
- I would like to know why they turned down my application for health insurance for my daughter. Now I am stuck with a health insurance program with my employer that I believe I am paying way too much for.
- I don't understand why we were denied by Kaiser. They responded to us in a letter in English, which I found very difficult to comprehend. I hope they will notify us in Spanish in the future.
- I want to know why I only received a response on one of my kids, when I applied for two kids
- I would like to know why they turned down my application for health insurance with Cares for Kids of Kaiser Permanente. They did not explain or say anything about the denial or rejection for health insurance.
- I don't understand why I am not eligible. If I apply with Healthy Families, I am told that I would gain money throughout the years. If I apply at Kaiser, I am told I would gain very little.
- I feel that they made a bad decision in denying health insurance for my kid. I would really like them to inform me as to why the application for health insurance was denied.
- I haven't used any services from Cares for Kids for Kaiser, Healthy Families or Medi-Cal. I received a letter that I wasn't eligible, but they never gave me any specific reasons.
- I want more information why (My child) was not qualified. I also want more information about Healthy Families and Medi-Cal.*
- Although my son was denied by Healthy Families for an existing problem, I do not see why my daughter would also be denied health insurance.*
- I need to get insurance for my two kids. One will be a teenager soon. I was denied coverage; because they said our annual income was too high, which is not so.*

^{*} Response placed in more than one category.

E. I don't understand why my child was denied coverage by the Kaiser Permanente Child Health Plan

- Their rates are going up substantially. After applying twice and being turned down both times, I was never told why. I am living on social security only. I would like to be contacted and shown how to qualify for a hospital plan for my daughter.
- I want to know why (My child) is not qualified for the program. They are not answering my question. They keep giving me different applications to fill out, but so far he is not qualified. No one is answering that question.
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- I would like to know why they turned down my application for health insurance with Cares for Kids of Kaiser Permanente. They did not explain or say anything about the denial or rejection for health insurance.
- I don't understand why I am not eligible. If I apply with Healthy Families, I am told that I would gain money throughout the years. If I apply at Kaiser, I am told I would gain very little.
- I feel that they made a bad decision in denying health insurance for my kid. I would really like them to inform me as to why the application for health insurance was denied.
- I haven't used any services from Cares for Kids for Kaiser, Healthy Families or Medi-Cal. I received a letter that I wasn't eligible, but they never gave me any specific reasons.
- I want more information why (My child) was not qualified. I also want more information about Healthy Families and Medi-Cal.*
- Although my son was denied by Healthy Families for an existing problem, I do not see why my daughter would also be denied health insurance.*
- I need to get insurance for my two kids. One will be a teenager soon. I was denied coverage; because they said our annual income was too high, which is not so.*

^{*}Response placed in more than one category.

- I would like to know how and why they came to the conclusion that we refused medical
 attention for my son, when he actually did have his eye surgery. I just wished they did a
 proper investigation before they came to the conclusion they did. I have already sent in
 the proper paper stating that (My child) did have the eye surgery. Hopefully, I'll get the
 insurance for (My child).
- Yes. Kaiser Permanente should really lighten up on the program, for it is geared to helping low-income families, like my family. When I applied, (My child) was in the best of health. She still is today, but it would have been nice if we would have had Kaiser Permanente Child Health Plan as our health plan for (My child).*

F. I need more/better information about how to obtain insurance for my child

- I've never even heard of the other programs they offer. I think they should tell the public more about the other programs they might be considered eligible for.
- I would like to get a better understanding as to whether (My child) is gualified or not.
- In the future, can we apply for this program for my son? I like this program, since I used to have medical insurance with Kaiser. I much prefer this program over Healthy Families or Medi-Cal.*
- I would like to know how I can obtain health insurance for my children. I don't want to go without health insurance. It is so difficult.*
- I am not very aware of programs available to us. The public in general doesn't know what programs they can avail of. We are so uniformed. We need insurance.*
- I don't know what to do as to how to get some medical insurance for my family. It is so confusing. I have medical insurance, but it is for catastrophic emergencies only. How do I apply for the others? What are the qualifications? Can they send the letters in Spanish?
- I have not received the ten dollar voucher for Rite-Aid that was promised to me. Also I would like to get information on how to get health insurance for my other son.*
- I think that we will qualify for the California Kids program. You didn't mention it. We would like to know more about that program.
- We applied for Kaiser Permanente, but we were denied due to low income. We applied
 for Healthy Families, but we were denied due to high income. Where do we fit? We
 have an uninsured child with no insurance. I felt mislead. First we qualify, then we don't.
 Where do we get insurance?*
- I hope to get my son any medical insurance. He isn't well. How do I get Medi-Cal?*
- I want more information why (My child) was not qualified. I also want more information about Healthy Families and Medi-Cal.*
- Yes. I would like to get more details on the health insurance.
- I was not informed of Healthy Families before, and it was nice to know about it from you.
- I want to know if my 6 month old baby can qualify for health care. Where and how do I
 go about it?
- I would like to know what health insurance is available for my kid.

G. The income eligibility requirements are unclear

• I applied for my three children with Kaiser, but they turned down all three children. They said my income was too low. I don't understand why.

^{*}Response placed in more than one category.

- How do they go about putting people in the program? My income is low.
- It stinks that I didn't qualify because of my income, which is so small. Why is that?
- I would like to understand the income requirements. How do we make too much money? To my knowledge, we do meet the requirements.
- I just do not understand why my income is too much for Kaiser and yet I make too much for Medi-Cal.
- I'm confused about the income guideline. At the time when I applied, I met the income that was required to be eligible for the program. I still got denied.
- I don't know what to do. I make too much for Medi-Cal, but not enough for Kaiser Permanente. I just wish there would be some type of help for me.
- They should explain more about the requirements, because they said that I had to make over \$22,000 and less than \$27,000 a year. That is my household income, so I don't see why (My child) was not eligible.
- I don't know why they didn't explain the eligibility standards better.
- We applied for Kaiser Permanente, but we were denied due to low income. We applied for Healthy Families, but we were denied due to high income. Where do we fit? We have an uninsured child with no insurance. I felt mislead. First we qualify, then we don't. Where do we get insurance?*
- I am being bounced around by Healthy Families and Kaiser Permanente Child Health Plan. I am in a situation wherein the family income is between the limits of both programs. It is very frustrating not having insurance for my daughter.*
- It makes me mad that I was right in the middle of the income bracket. My kids met all the requirements, and I still was denied the coverage. I have a medical condition, and I pay my own insurance with Kaiser; but I really need help for these kids. Healthy Families said I was \$200 dollars too rich; and, therefore, I have no way to get my kids covered. I really do wish these insurance companies would make up their minds.*
- I am under the impression that the Kaiser Permanente Child Health Plan is for low-income families, where the income requirement is \$27,000 annually. I do hope they will reconsider my application for Healthy Families.*
- I was denied coverage by Healthy Families. They say my income is too much, but I am
 not a rich man. I think what I earn a year is just right to support my family. We do need
 to have health coverage for the kids.*

H. The income eligibility requirements are too low/ complaints & suggestions to change income eligibility requirements

- I don't think it is fair to have to qualify financially when I was paying up to that point.
- I wish they would change their income requirement. I think they should base it on income for the prior year that you paid taxes and not on the current monthly income from the month before.
- As far as Kaiser, I think they should not be based on household incomes. What I found
 out is that if a person has a very low income, they are not eligible for the Kids Health
 Plan. If those people have very low incomes, that is one of the reasons they are asking
 for help.
- According to the denial that I received, they told me that I would have to make between

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^{*}Response placed in more than one category.

- \$33,000 and \$50,000 a year. Well, if you're considered eligible by those standards, then those people selected aren't people who can't afford to pay, but people who can afford this and a lot of other things as well.
- They should not make you ineligible when you are making less than \$32,000. I think it is not fair that you have to make more than \$30,000 to be able to receive help for insurance.
- I feel that Kaiser Permanente Child Health Plan was very unfair in turning us down. If I
 had the income they required me to have, I would not need the health insurance they
 offered. The program is supposed to help low-income families, or is it?
- Kaiser is a good program. Unfortunately, they denied my application for my son. The sad part about the program is that it is supposed to help low-income families, but the requirements are tied up in so much red tape.*
- I wish they could be more accessible. I think they should lower the income bracket, because what I make for the year is less than what they need to be eligible.
- I consider it unfair, the way we weren't eligible for the insurance due to the income requirements.
- When I signed up for the insurance coverage for my four kids, I was really very disappointed with the system for denying the health insurance my kids needed. Kaiser health insurance is geared to helping low-income families? I think not.
- Yes. The Kaiser representative I had contact with was very rude and impolite. Also, the
 Kaiser program is geared to helping low-income families to secure health insurance for
 the children. But is it? My income was too high for me to be eligible for Medi-Cal, yet it
 was supposedly too low for Kaiser health insurance.*
- Yes. I would like them to reconsider the requirements they have in place in order to make it easier for families with low-income to obtain insurance for the family.
- I would like to get insurance for (My child). She'll be a year old soon. The program is supposed to help low-income families secure health insurance. Why are the requirements so strict?*

I. My child is now in Healthy Families/I like Healthy Families

- Healthy Families offers a very good program. I'm happy with them.
- I have (My child) insured with Healthy Families, and I am happy with the program.
- The Healthy Families was a blessing for me, for I really was getting frustrated that I would not be able to get health insurance for my son.
- Healthy Families has a good program.
- When we were approved for Kaiser in December 1998, I took (My child) to the doctor.
 Then my income dropped last January, so I had to drop the insurance. However, the bill
 they sent me didn't cover the services last December while she was still covered. Why
 was that? But it's okay now. I have Healthy Families, and I take her to Kaiser.*
- I am just happy that (My child) has Healthy Families insurance.
- I am so glad to have Healthy Families as my insurance. It has been a blessing to have for my family. The care we receive is simply exemplary.
- I am very pleased to have Healthy Families. It is an excellent program. Also they did not discriminate as to the previous medical conditions of an applicant.

^{*}Response placed in more than one category.

- Healthy Families is an excellent program. I just wished we had been approved on this
 program six months ago, for we really do need to have the security it affords.
- I have Healthy Families for (My child), and I am pleased to have it for her.
- I am happy that (My child) has Healthy Families as his health insurance coverage. I'll be using it for the first time next week when I take him to see the dentist.
- Healthy Families is a good program to have. For families like myself with low incomes, it helps us a great deal.

J. Insurance is important/I want any insurance coverage for my child

- I spoke to someone from Kaiser twice, with no results. My daughter cannot go 3 months without health care. I can't understand why she was denied. They offered lower premiums for low-income families, but she was denied. I want her to be with Kaiser. They are a good hospital.*
- I wanted Kaiser Permanente Child Health Plan for my daughter; but I have no problem ending up with Healthy Families. I find it to be a very good program and very reasonable.*
- I would like to know how I can obtain health insurance for my children. I don't want to go without health insurance. It is so difficult.*
- I am not very aware of programs available to us. The public in general doesn't know what programs they can avail of. We are so uniformed. We need insurance.*
- I hope to get my son any medical insurance. He isn't well. How do I get Medi-Cal?*
- Yes. It would be nice to have Healthy Families health insurance for my son. It would take a big burden off my shoulders knowing I have Healthy Families insurance.
- I am being bounced around by Healthy Families and Kaiser Permanente Child Health Plan. I am in a situation wherein the family income is between the limits of both programs. It is very frustrating not having insurance for my daughter.*
- It makes me mad that I was right in the middle of the income bracket. My kids met all the requirements, and I still was denied the coverage. I have a medical condition, and I pay my own insurance with Kaiser; but I really need help for these kids. Healthy Families said I was \$200 dollars too rich; and, therefore, I have no way to get my kids covered. I really do wish these insurance companies would make up their minds.*
- I was denied coverage by Healthy Families. They say my income is too much, but I am
 not a rich man. I think what I earn a year is just right to support my family. We do need
 to have health coverage for the kids.*
- I would like to get insurance for (My child). She'll be a year old soon. The program is supposed to help low-income families secure health insurance. Why are the requirements so strict?*
- I need to get insurance for my two kids. One will be a teenager soon. I was denied coverage; because they said our annual income was too high, which is not so.*

K. Miscellaneous

• For the Healthy Families plan, I filled out all the paperwork and sent in a checkup. They claimed they never received it.

^{*}Response placed in more than one category.

- I was not told that (My child) wasn't eligible due to income requirements. As a result, I lost coverage for 10 to 11 months, because I was not notified at all. I had to call and found out too late. They should be more conscientious about these things.
- I have gotten mail informing about Healthy Families, but I have not received any application forms as yet.
- Yes. The Kaiser representative I had contact with was very rude and impolite. Also, the
 Kaiser program is geared to helping low-income families to secure health insurance for
 the children. But is it? My income was too high for me to be eligible for Medi-Cal, yet it
 was supposedly too low for Kaiser health insurance.*
- I was given a ten-dollar voucher to do the survey by your company. When I tried to redeem the voucher at Rite-Aid, the people at Rite-Aid turned the voucher down, saying that it was not valid.
- I have not received the ten dollar voucher for Rite-Aid that was promised to me. Also I would like to get information on how to get health insurance for my other son.
- I was given a voucher for ten dollars for use at Rite-Aid, but I was told at Rite-Aid the voucher had no value. All I want to know is what is going on with these vouchers?
- I appreciate the gift card for doing the survey. Thank you very much.
- I would like to apply again.

L. Problems with Medi-Cal

- I wish that there were insurance available for low-income families, other than Medi-Cal.
 Also, it would be a great benefit if insurance were available for the whole family, not just for children.*
- Medi-Cal is unfair. They penalize people who work or make too much money, even though they still need the coverage.
- I wish I could put him in a Kaiser health plan. I wouldn't even mind paying for it. I am not very happy with the doctors who are seeing him now (through Medi-Cal). He used to see the doctors at Kaiser.*
- I thought it was unfair that we were denied. I don't want Medi-Cal, perhaps Healthy Kids.
 I may be able to do that. I believe in paying for my way, so I don't want a handout.
 I will only go for Medi-Cal if I have no choice.*
- I would really like to get Kaiser child health insurance or Healthy Families for my kids. I
 do hope they would reconsider my application, since it is a much better program than
 Medi-Cal.*
- Yes. I cannot wait to have my coverage with Kaiser to kick in. It is a lot better than having Medi-Cal.*
- I wish they would send me a questionnaire. I have lots of suggestions I would like to make, especially to Medi-Cal. I think the government treats the working people bad who, at one point, have to apply for Medi-Cal. We are not applying for anything for free. Eventually that money will come out of our pockets, whether it's in tax money or medical bills. So, if at any point you can send me a questionnaire, I will be more than glad to answer it; because I don't like to keep my mouth shut.

^{*}Response placed in more than one category.

I like Medi-Cal

I heard that Medi-Cal is a good program, but we are not in any programs right now.

M. Enrollment process is confusing/ complicated/ or slow

Program not specified

- They make it sound too easy to apply to the program; but when you decide to apply, the procedure takes forever. It gets to a point where you don't want to deal with the process any more.
- I have other children, so I'd like to resubmit an application. I didn't understand the application the first time around. It's so confusing. I wish someone helped us out.
- The application procedure is very confusing. I would like them to simplify or clarify it.

Healthy Families

- It took me three months to qualify for Healthy Families. I was pretty upset.
- The whole process was very difficult from start to finish. The first attempt was at the 800 number; they gave me another number. Then my application with Healthy Families was lost, and I had to send another application in. It took several months before I was approved. Nobody I talked to seemed to know anything.

N. I was denied Healthy Families coverage for my child

- The children don't qualify for Healthy Families until the child is a year old. Medi-Cal doesn't cover until you have more than 2,000 dollars monthly out-of-pocket expense. If Kaiser could cover kids in that gray area, it would be great.
- I applied for Healthy Families, but they gave us Kaiser. I would like to insure my wife with Kaiser, also.*
- We applied for Kaiser Permanente, but we were denied due to low income. We applied
 for Healthy Families, but we were denied due to high income. Where do we fit? We
 have an uninsured child with no insurance. I felt mislead. First we qualify, then we don't.
 Where do we get insurance?*
- I am under the impression that the Kaiser Permanente Child Health Plan is for low-income families, where the income requirement is \$27,000 annually. I do hope they will reconsider my application for Healthy Families.*
- I was denied coverage by Healthy Families. They say my income is too much, but I am
 not a rich man. I think what I earn a year is just right to support my family. We do need
 to have health coverage for the kids.*

O. I'm disappointed with Kaiser because my child was denied coverage

- I was upset with Kaiser. When I got a divorce, they said I didn't make enough money to qualify for coverage. My kids have been with Kaiser all their lives.
- I don't like Kaiser anymore. I applied for margin and was denied. Then I applied for my mother for personal coverage, and she was denied. I can't believe that they wouldn't give approval, because I was not asking for insurance for free. All I wanted was coverage for my sick mother. These are some of the reasons I dislike Kaiser.

^{*}Response placed in more than one category.

- I am very disappointed with Kaiser Permanente in the way they handled my application for health insurance for my son. I may not have the annual income they required, but that is all I can pay. I have Blue Shield insurance for my son, and I can afford to pay \$135 monthly premiums.
- I think Kaiser does not work. They are not here to help anybody; they are only interested in the money they are going to receive. There should be more programs to help families like mine, instead of programs that make it harder for us to get help.
- I do have Kaiser health insurance for my son, but it is through my work. I do believe I am
 paying way too much for it. Hopefully, I can secure a better program for (My child), such
 as Healthy Families.

P. Everyone deserves health insurance/ It should be easier to obtain

- I wish that there were insurance available for low-income families, other than Medi-Cal.
 Also, it would be a great benefit if insurance were available for the whole family, not just for children.*
- I think it should be easier to get health insurance. Being what this country is, there should be health insurance for everybody and nobody should be denied. I can understand that they would deny welfare, but I don't think they should deny health insurance.
- Give all school-aged kids a chance for medical services.
- It's good that they have Healthy Families program for those who do not qualify for Medi-Cal, but I hope it would be offered also to the adults. I don't have health insurance, and adults also need to seek medical attention.

Q. General complaints about the Kaiser Permanente Child Health Plan

- I do not feel that I should have been denied. I was willing to pay out of my own pocket.
- If I can pay for it monthly, even just a small amount, we should qualify for it. We shouldn't be excluded from the plan.
- I applied for Kaiser, because I wanted our whole family to be in one program. I am unhappy that we were denied. I think that the questionnaire they asked me to fill out to apply for the program was not fair, because it didn't leave me room to explain. I really believe that we should have been accepted into the program.

R. My child was inappropriately denied by the Child Health Plan due to a pre-existing condition

- I was upset when (My child) was denied coverage. They looked up her records with my permission and found she had had asthma in the past. (Kaiser doctors were the ones who had diagnosed her.) Then she was denied for a pre-exciting condition. I feel this was a unfair decision on Kaisers' part.
- I think that they were mistaken in their denial. They denied him due to autism, which is not a medical condition, but a learning disorder. I have never charged any medical expense due to autism. They are very ill-informed.
- Although my son was denied by Healthy Families for an existing problem, I do not see why my daughter would also be denied health insurance*

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^{*}Response placed in more than one category.

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