

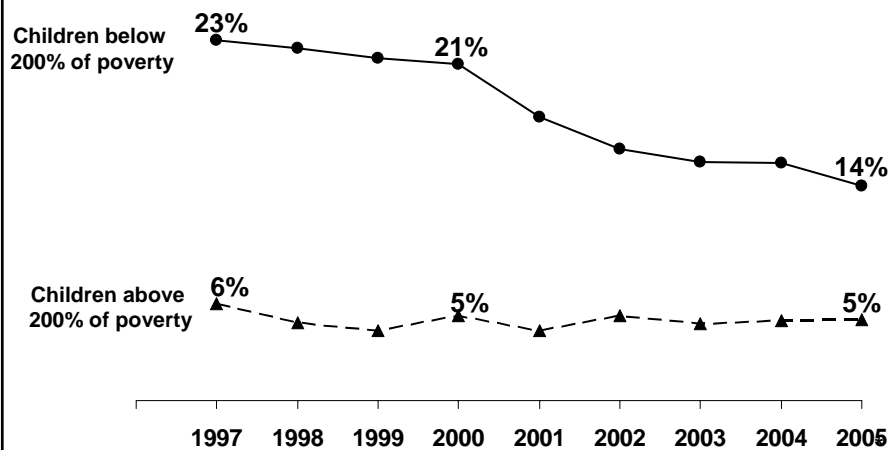
# Resuming the Path to Health Coverage for Children and Parents

Presented by:  
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Tuesday, January 9, 2007

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Medicaid and the Uninsured

Figure 1

## Percentage of Children Without Health Insurance, By Poverty Level, 1997-2005

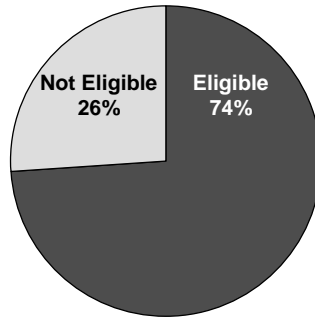


Source: L. Ku, "Medicaid: Improving Health, Saving Lives," Center on Budget and Policy Priorities analysis of National Health Interview Survey data, August 2005.

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Figure 2

## Distribution of Uninsured Children by Eligibility for Medicaid/SCHIP, 2004



SOURCE: Urban Institute analysis of 2005 CPS for KCMU.

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Figure 3

## Major Findings

### 6<sup>th</sup> Annual Survey of State Policies and Procedures in Medicaid and SCHIP

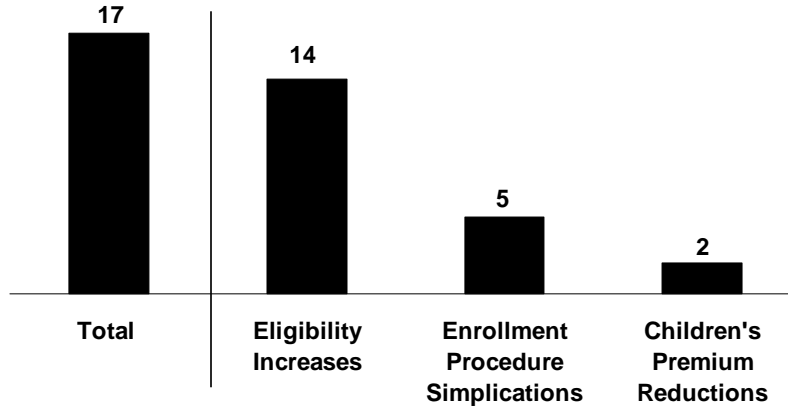
#### Between July 2005 and July 2006:

- **States showed renewed enthusiasm for covering the uninsured, especially children.**
  - Some have major initiatives to cover children.
  - Most retained or advanced efforts to facilitate enrollment.
  - Eligibility for low-income parents still lags behind.
- **However, a new federal law complicates state efforts to simplify enrollment and renewal procedures.**
  - U.S. citizens are now required to document citizenship and identity when they apply for or renew Medicaid.
  - Enrollment declines seen in some states.

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Figure 4

### One-Third of States Expanded Access to Medicaid and SCHIP, July 2005-2006

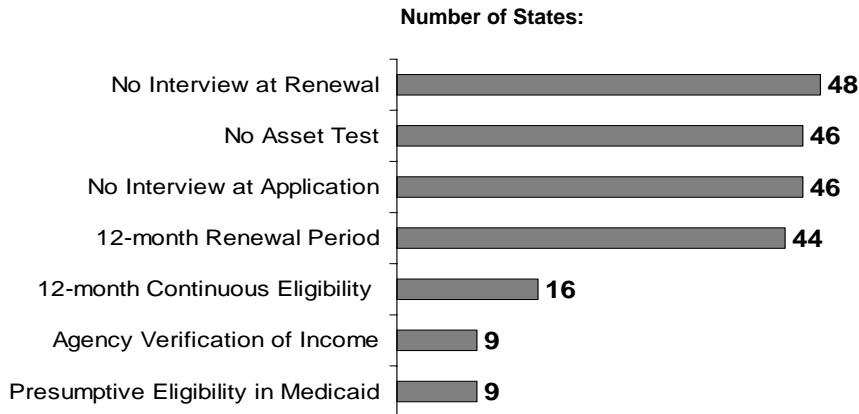


SOURCE: Based on a national survey conducted by the Center on Budget and Policy Priorities for KCMU, 2006.

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Figure 5

### Simplifying Enrollment and Renewal: Strategies States are Using in Children's Health Coverage Programs, July 2006

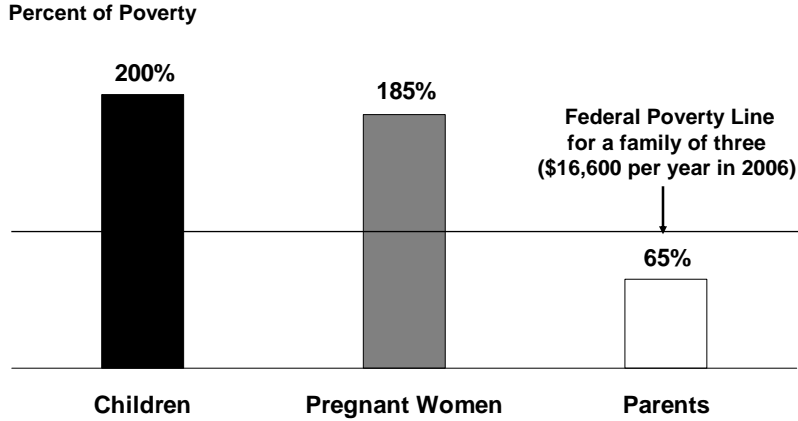


SOURCE: Based on a national survey conducted by the Center on Budget and Policy Priorities for KCMU, 2006.

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Figure 6

### Median Medicaid/SCHIP Income Eligibility Threshold for Children, Pregnant Women, and Working Parents, July 2006

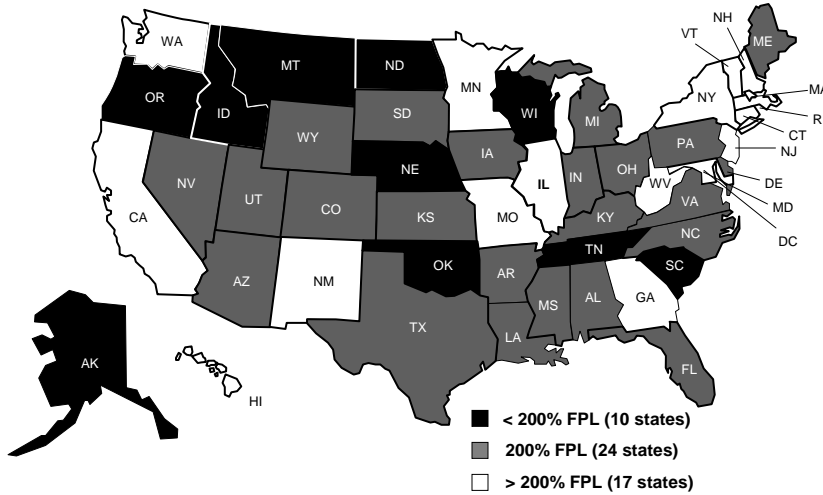


Note: Eligibility levels for parents based on the income threshold applied to a working parent in a family of three.  
SOURCE: Based on a national survey conducted by the Center on Budget and Policy Priorities for KCMU, 2006.

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Figure 7

### Children's Eligibility for Medicaid/SCHIP by Income, July 2006

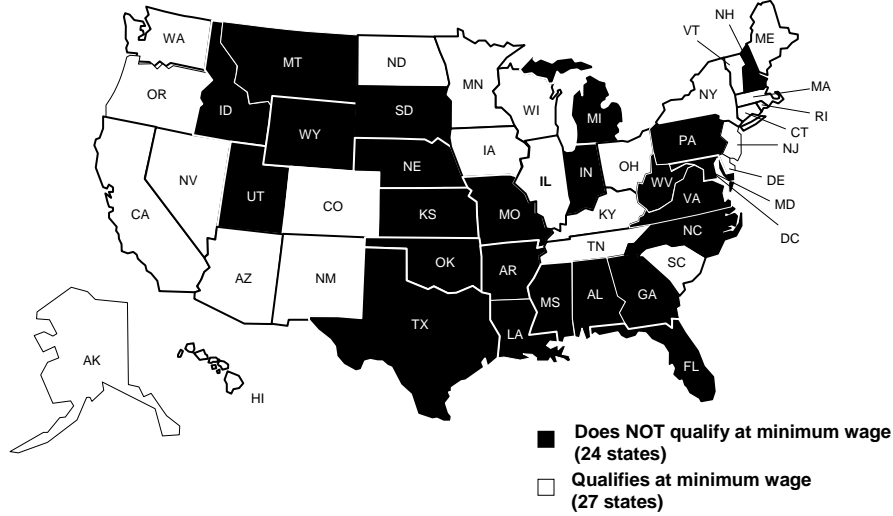


\*The Federal Poverty Line (FPL) for a family of three in 2006 is \$16,600 per year.  
SOURCE: Based on a national survey conducted by the Center on Budget and Policy Priorities for KCMU, 2006.

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Figure 8

### Medicaid Eligibility for Working Parents by Federal Minimum Wage, July 2006



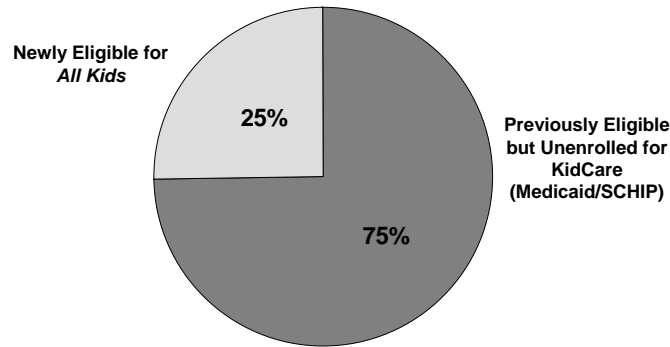
\*A parent in a family of three working full time at federal minimum wage earns \$893 per month

SOURCE: Based on a national survey conducted by the Center on Budget and Policy Priorities for KCMU, 2006.

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Figure 9

### Increase in Children's Enrollment with Implementation of Illinois' All Kids



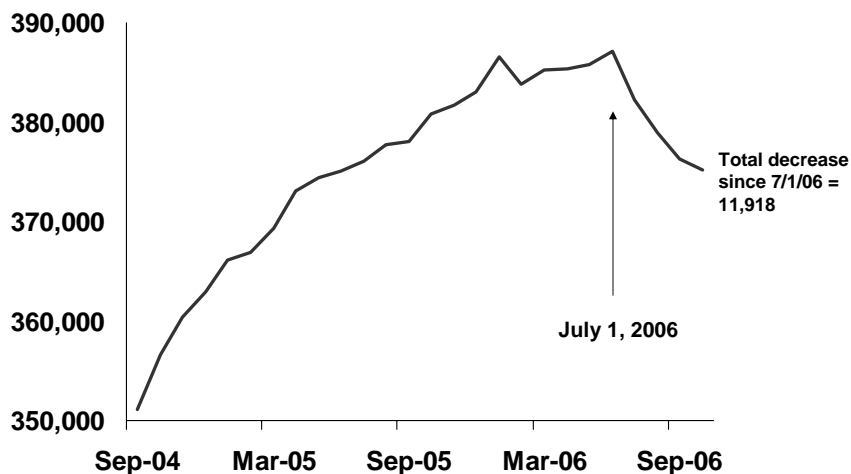
Increase in Total Enrollment  
November 2005 – November 2006:  
94,703

SOURCE: Illinois Department of Healthcare and Family Services

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Figure 10

### Monthly Net Enrollment of Children in Virginia's FAMIS Plus (Medicaid)



SOURCE: Virginia Department of Medical Assistance Services

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Figure 11

### Conclusions

- **With a brighter fiscal outlook, many states are building on Medicaid/SCHIP to reduce the number of uninsured, especially children.**
- **Federal policy on funding and simplification will affect states' progress on children's health coverage:**
  - Sufficient federal SCHIP funding will determine whether currently enrolled children maintain coverage and whether additional children can be covered.
  - Since most children with public coverage are covered by Medicaid, sustaining coverage through that program is key.
  - Continued efforts to design simple and efficient enrollment systems that are family-friendly are pivotal to further progress.

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