

Children's Health Insurance

DEFINITION

Children's health insurance is the percentage of children below age 19 who were covered by any kind of public or private health insurance, including Medicaid, during the previous calendar year.

SIGNIFICANCE

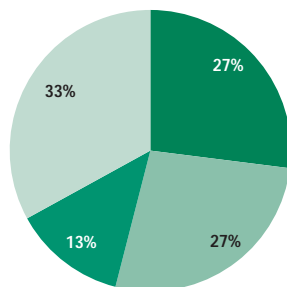
Children's health insurance status is the major determinant in whether children have access to care.¹ Children who lack insurance coverage are more likely to have poorer health outcomes, have fewer well-child visits, and are more likely to delay seeking medical care.² Insured children are more likely than uninsured children to receive medical care for common conditions like asthma and ear infections – illness that if left untreated can have life-long consequences and lead to more serious health problems.³ Children without health insurance often have poorer school attendance and lower school achievement.⁴ Children are more likely to use health care when their parents are insured and have access to health care.⁵

RItE Care/RItE Share, Rhode Island's Medicaid managed care health insurance program, is available to children and families who qualify based on family income. RItE Care also serves as the health care delivery system for specific groups of children who qualify

for Medical Assistance based on a disability or because they are in foster care or receiving an adoption subsidy. As of December 31, 2004, two-thirds (80,953) of the RItE Care members who qualified based on family income were children under age 19.⁶ There were 44,199 low-income parents enrolled in RItE Care as of December 31, 2004.⁷ Of these parents, 10,098 (23%) received RItE Care because they were enrolled in the Family Independence Program (FIP).⁸

Children Under Age 19 Without Health Insurance, by Poverty Level, Rhode Island, 2003

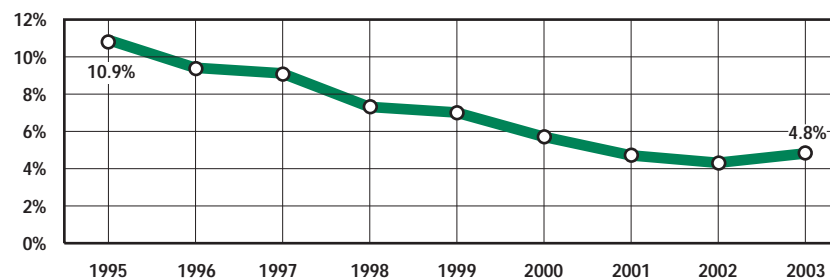
- 27% ■ Income less than 100% of Poverty
- 27% ■ Income 100% to 174% of Poverty
- 13% ■ Income 175% to 249% of Poverty
- 33% ■ Income greater than 250% of Poverty



n = 15,000

Source: U.S. Bureau of Census, Current Population Survey, 2002-2004, three-year average. Compiled by The Annie E. Casey Foundation. These data reflect only those who were uninsured throughout the entire year and do not include those who were insured for only part of the year.

Children Without Health Insurance, Rhode Island, 1995 - 2003



Source: U.S. Census Bureau, Current Population Survey, 1994-2004, three-year averages, compiled by Rhode Island KIDS COUNT. Data are for children under 18 years of age.

◆ As of 2003, 4.8% of Rhode Island's children under age 18 were uninsured, compared to 11.6% of children nationally.⁹ The rate of uninsured children in Rhode Island has been reduced by 56% over the past nine years.¹⁰

◆ Like many other states, Rhode Island also provides health insurance to children up to their 19th birthday. In Rhode Island, 5.8% of children under age 19 were uninsured, compared to 12.0% nationally.¹¹

◆ As of 2003, there were 15,000 uninsured children under age 19 in Rhode Island. Of these, an estimated 10,000 Rhode Island children were eligible for RItE Care but uninsured.¹² Two thirds of Rhode Island's uninsured children live in working families.¹³

◆ During 2004, 2,142 adults and 3,734 children participated in RItE Share.¹⁴ RItE Share, Rhode Island's health insurance premium assistance program, enables eligible families with access to employer-sponsored insurance to participate in their employer's insurance plan and receive wrap-around benefits such as co-pays for doctor visits and prescriptions through Medical Assistance.¹⁵

Table 12.

Children Under Age 19 Receiving Medical Assistance, Rhode Island, December 2004

CITY/TOWN	RItE Care FIP	RItE Care Non-FIP	SSI	Katie Becket Provision	Adoption Subsidy	Foster Care	Total
Barrington	43	191	15	40	11	6	306
Bristol	154	547	34	15	18	17	785
Burrillville	155	529	38	23	57	43	845
Central Falls	1,876	2,720	256	4	12	13	4,881
Charlestown	74	215	12	10	12	6	329
Coventry	245	1,142	74	57	89	42	1,649
Cranston	1,065	3,370	224	134	84	49	4,926
Cumberland	230	788	62	76	54	20	1,230
East Greenwich	55	209	14	52	12	5	347
East Providence	853	1,983	144	61	61	51	3,153
Exeter	50	122	5	7	19	16	219
Foster	27	106	3	8	21	4	169
Glocester	45	239	19	13	39	31	386
Hopkinton	69	297	9	6	8	2	391
Jamestown	13	74	6	9	12	2	116
Johnston	362	1,050	70	28	20	19	1,549
Lincoln	171	602	37	44	28	16	898
Little Compton	6	65	3	3	1	2	80
Middletown	121	451	39	28	13	22	674
Narragansett	72	316	18	17	12	40	475
New Shoreham	0	17	2	0	0	0	19
Newport	806	1,053	110	20	19	31	2,039
North Kingstown	248	769	51	65	19	4	1,156
North Providence	387	1,034	80	30	38	59	1,628
North Smithfield	55	209	11	22	15	34	346
Pawtucket	3,582	5,588	546	46	76	116	9,954
Portsmouth	69	332	12	41	12	14	480
Providence	13,382	17,272	2,011	72	1,130	1,125	34,992
Richmond	40	170	15	9	10	24	268
Scituate	64	292	13	28	25	11	433
Smithfield	61	321	16	31	22	10	461
South Kingstown	221	597	51	47	43	15	974
Tiverton	119	429	28	20	12	11	619
Warren	182	367	18	18	19	11	615
Warwick	831	2,969	227	147	129	101	4,404
West Greenwich	17	124	4	12	15	8	180
West Warwick	508	1,649	107	18	57	21	2,360
Westerly	243	919	67	33	12	16	1,290
Woonsocket	2,228	3,085	407	36	88	115	5,959
<i>Out of State/Unknown</i>	<i>10</i>	<i>2</i>	<i>39</i>	<i>0</i>	<i>0</i>	<i>2</i>	<i>53</i>
<i>Core Cities</i>	<i>22,382</i>	<i>31,367</i>	<i>3,437</i>	<i>196</i>	<i>1,382</i>	<i>1,421</i>	<i>60,185</i>
<i>Remainder of State</i>	<i>6,347</i>	<i>20,845</i>	<i>1,421</i>	<i>1,134</i>	<i>942</i>	<i>711</i>	<i>31,400</i>
<i>Rhode Island</i>	<i>28,739</i>	<i>52,214</i>	<i>4,897</i>	<i>1,330</i>	<i>2,324</i>	<i>2,134</i>	<i>91,638</i>

Source of Data for Table/Methodology

Rhode Island Department of Human Services, MMIS Database, December 31, 2004.

Core Cities are Central Falls, Newport, Pawtucket, Providence, West Warwick and Woonsocket.

From September 2003 through March 2004, children with special health care needs were voluntarily transitioned from fee-for-service Medical Assistance to managed care RItE Care. Children who were transitioned into RItE Care included those who qualify for Medical Assistance because they receive SSI, adoption subsidy or qualify for the Katie Beckett provision. Certain groups of children, including those with commercial health insurance, were not included in the transition to RItE Care. The columns SSI, Katie Beckett and Adoption Subsidy include children in fee-for-service Medicaid and (managed care) RItE Care as of December 31, 2004.

The Providence numbers may include some foster children who live in other towns because the DHS database lists foster children as Providence residents for administrative purposes.

References for Indicator

¹ Ku, L. & Nimalendran, S. (2004). *Improving children's health: A chartbook about the roles of Medicaid and SCHIP*. Washington, DC: Center on Budget and Policy Priorities.

² Yu, S. M., Bellamy, H.A., Kogan, M.D., Dunbar, J.L., Schwalberg, R.H., & Schuster, M.A. (2002). Factors that influence receipt of recommended preventive pediatric health and dental care. *Pediatrics*, 110(6), 73-81.

³ *Children's health - Why health insurance matters*. (2002). Washington, DC: The Kaiser Commission on Medicaid and the Uninsured.

^{4,15} Park, H.G. & Oliver, L. (2004). Is SCHIP SHIP-SHAPE? *State Legislatures*. Washington DC: National Conference of State Legislatures.

⁵ *Progressive platform for the states - 2004 candidate briefing book*. (2004). Washington, DC: Center for Policy Alternatives.

^{6,7,14} Rhode Island Department of Human Services, MMIS Database, December 31, 2004.

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