

Parental eligibility and take-up of SCHIP: The roles of parental health, employment, and family structure

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Parental Eligibility and Enrollment

- Lack of insurance among parents with children enrolled in the State Children's Health Insurance Program (SCHIP) remains a substantial and growing problem (Kenney & Cook, 2007)
 - Almost 40% of the 3.9 million children enrolled in SCHIP in 2005 had at least one uninsured parent
 - Two-thirds of children enrolled in SCHIP live in families where neither parent is covered by employer-sponsored insurance (ESI)
 - Three-quarters are from families in which at least one parent is not covered by ESI

The link between children's and parents' insurance status

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- Rates of child uninsurance are lower when eligibility is extended to parents (Ku & Broaddus, 2004; Dubay & Kenney, 2001)
- Retention of already-enrolled children is improved when parents enroll (Sommers, 2006)
- As of January 2007, 11 states had implemented waivers to cover parents under SCHIP (Artiga & Mann, 2007), but 2007 Center for Medicare and Medicaid Services directives have limited state expansions to parents (Cohen & Marks, 2009; Robert Wood Johnson Foundation, 2009)

Parental Employment Status and Insurance

- Only 42% of low-income working parents have private coverage (Kaiser Family Foundation, 2007)
- Low-income children whose parents both work are more likely to have private coverage than those in other low-income households (Rolett et al., 2001; Weinick & Monheit, 1999)
- Nearly 80% of children with two full-time workers had ESI offers, compared to (Clemans-Cope et al., 2007):
 - 66% of children in families with one full-time worker had ESI offers
 - 23% of children in families with only part-time workers had ESI

Health Status and Insurance

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- Fair or poor health is associated with reduced labor force participation, fewer work hours, lower wages, and reduced annual earnings (Hadley, 2003)
- Among low-income parents, uninsured parents are more likely than insured parents to be in fair or poor health (Corman et al., 2009)

Research Overview

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- NJ FamilyCare (NJFC; New Jersey's SCHIP) offered eligibility to parents of children in the program
 - Below 200% of the Federal Poverty Level (FPL)
 - ✦ \$36,800 in 2003 for a family of four (\$44,100 in 2009)
- Research Objectives:
 - To estimate NJFC eligibility rates among parents
 - ✦ What % of parents in the income-eligible range lack other insurance?
 - To identify which parents enroll in NJ FamilyCare
 - ✦ Parental employment status
 - ✦ Parental health status
 - ✦ Family structure

NJ FamilyCare Family Health Survey, 2003

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- Telephone survey conducted between May and September 2003
- Covers health status, access to care, insurance coverage, health care utilization, and enrollment status in NJ FamilyCare
- Families were randomly selected if they had one or more children enrolled in NJFC in the year prior to May 2002 (N=679)
 - 52% response rate
 - Final analytic sample: N=418

Outcome: Eligibility

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One-parent families

- One parent eligible
- No parent eligible

Two-parent families

- No parents eligible
- One parent eligible
- Both parents eligible

Outcome: Take-up

(# enrolled *among those NJFC-eligible*)

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One-parent families

- One parent enrolled
- No parent enrolled

Two-parent families

- No parents enrolled
- One parent enrolled
- Both parents enrolled

Employment Status

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One-parent families

- Parent works full-time
- Parent is part-time, unemployed, or not in labor force

Two-parent families

- **At least one** parent works full-time
- **Both parents are** part-time, unemployed, or not in labor force

Health Status

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Number of parents in family who report having at least one serious or morbid symptom

- **Serious symptoms:**

- Likely to represent underlying disease that could cause death or disability if untreated
- Asked about 7 symptoms
- **Examples:**
 - ✦ Loss of consciousness or fainting
 - ✦ Chest pain lasting more than a minute

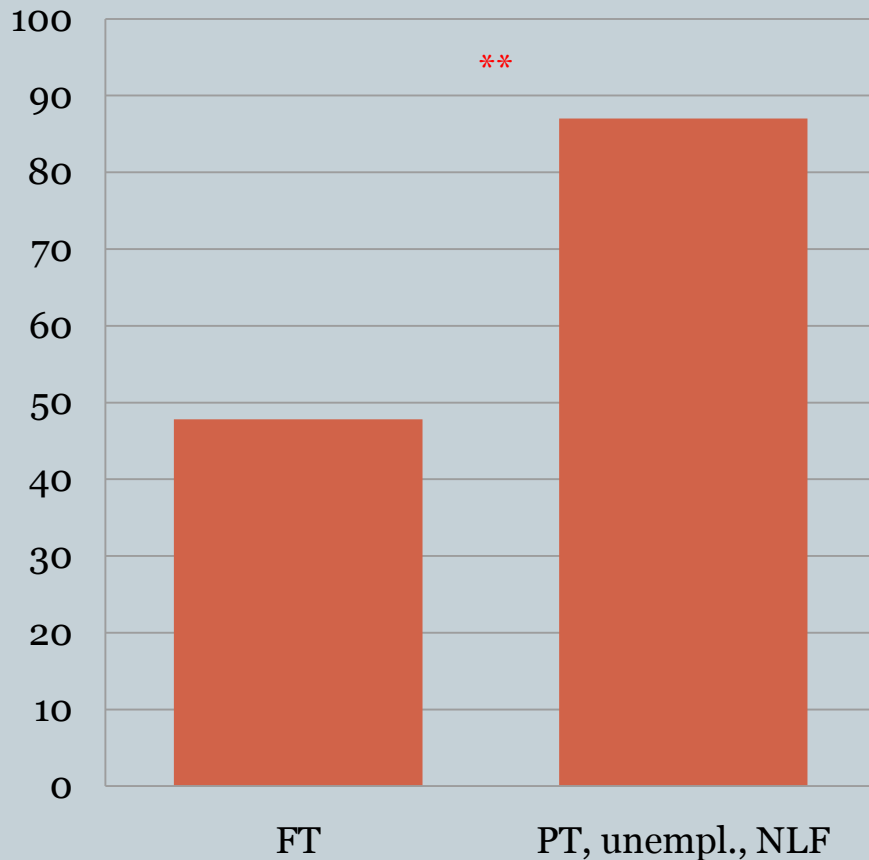
- **Morbid symptoms:**

- Having large negative effect on daily life
- Asked about 8 symptoms
- **Examples:**
 - ✦ Anxiety, nervousness, or fear keeping you from doing usual amount of work or social activity
 - ✦ Knee or hip pain (not due to injury) making it difficult to walk a block or up a flight of stairs

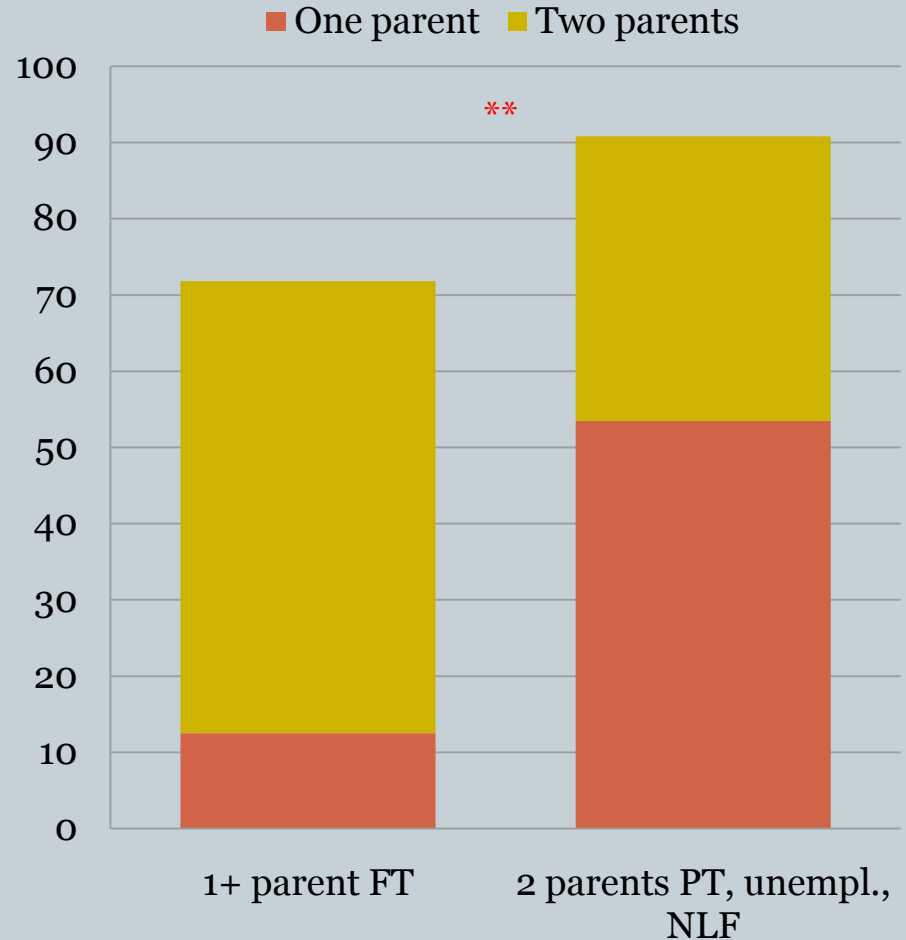
Percentage of parents eligible for NJFC by employment status, 2003

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One-parent households



Two-parent households

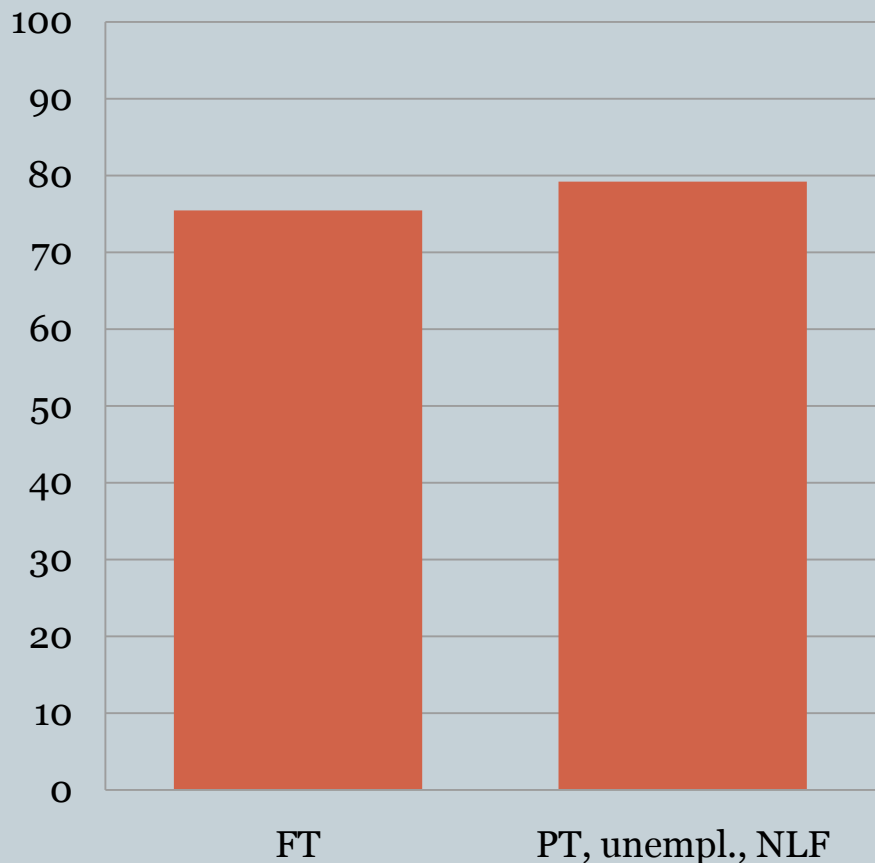


FT= full-time; PT = part-time; NLF = not in labor force; * p<0.05; ** p<.01

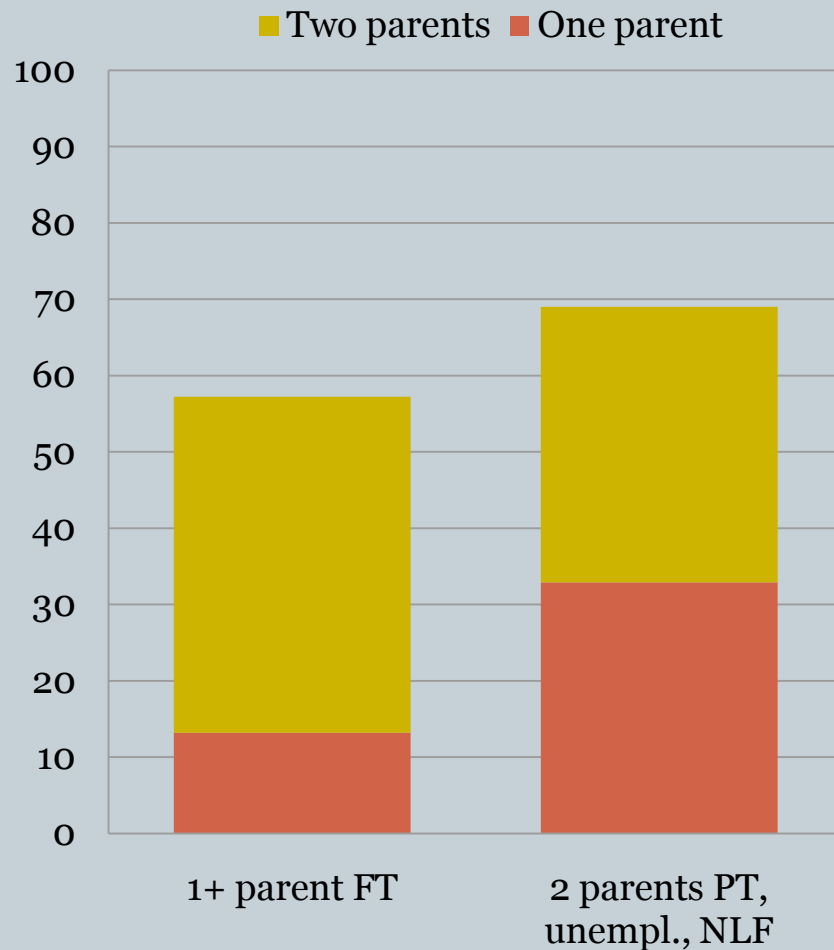
Percentage of *eligible* parents who enroll in NJFC, by employment status, 2003

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One-parent households



Two-parent households

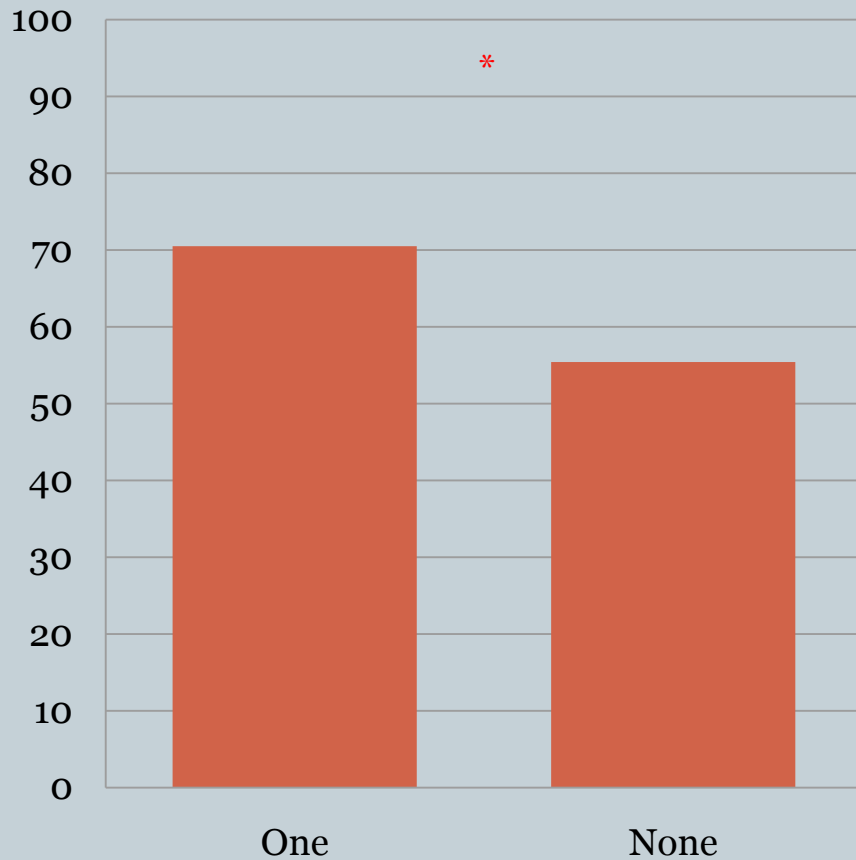


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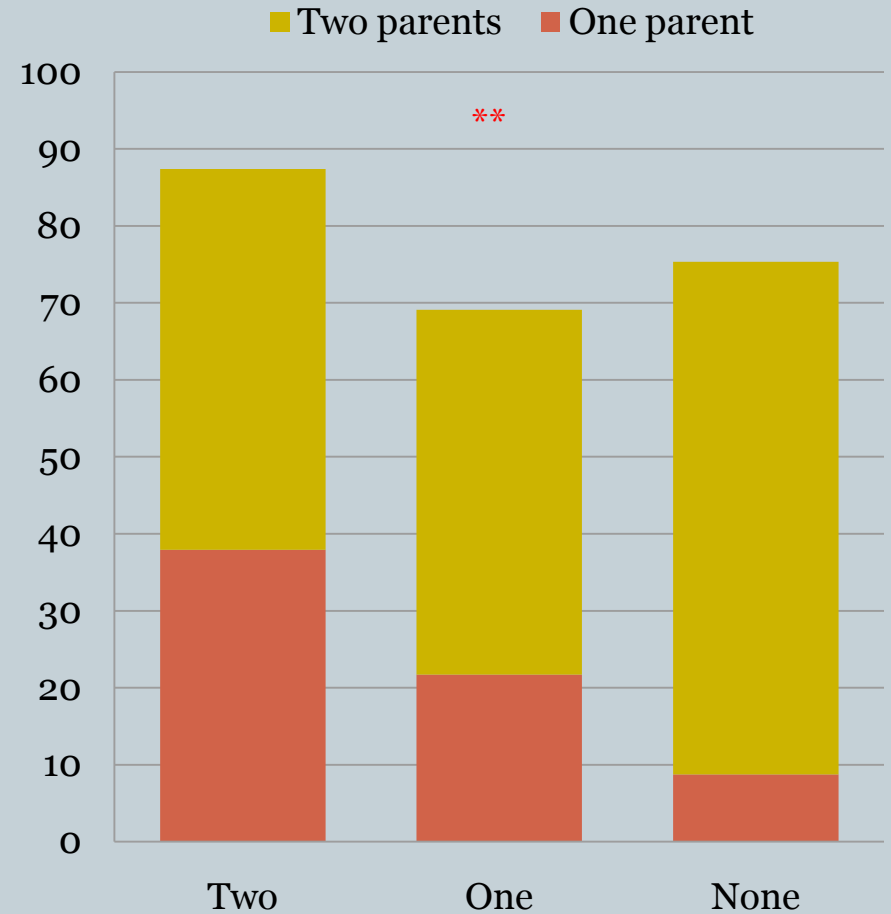
Percentage of parents eligible for NJFC, by health status, 2003

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One-parent households



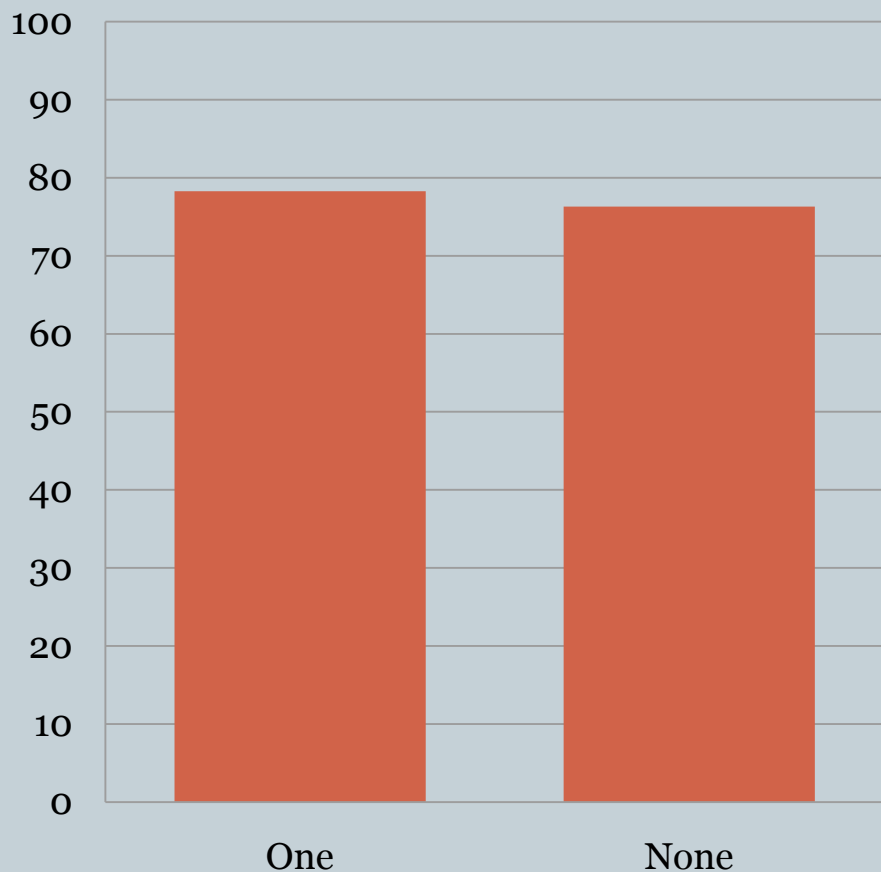
Two-parent households



Percentage of *eligible* parents who enroll in NJFC, by health status, 2003

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One-parent households



Two-parent households



Summary of Findings

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Eligibility

- 64% of single-parent and 75% of two-parent families in income-eligible range were eligible for NJFC
 - Speaks to the substantial need for coverage among low-income families
- Nearly $\frac{1}{2}$ of single-parent and $\frac{3}{4}$ of two-parent families with at least one full-time worker had one or more parents eligible
 - Demonstrates that most low-income families are working full-time and still do not have insurance

Take-Up

- 78% of single-parent and 59% of two-parent *eligible* families enrolled in NJFC
- Still, roughly $\frac{1}{2}$ of eligible families overall did not enroll
- Possible explanations: lack of awareness, stigma, citizenship issues, other barriers to enrollment
- Outreach and simplification of enrollment processes could increase take-up among eligibles

Summary of Findings – employment and health status

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Eligibility

- Higher among those employed part-time or not at all
 - 41% of single-parent and 14% of two-parent families had no full-time workers
- Higher among those with 1+ serious or morbid health symptom
 - 56% of single-parent and 55% of two-parent families had at least one parent with such symptoms

Take-Up

- Higher among two-parent families with no full-time worker
- Higher among two-parent families where at least one parent had 1+ serious or morbid health symptoms

Strengths and Limitations

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- A large sample of parents who could be eligible
- Available data on eligibility and enrollment status of each parent, as well as parent's health and employment status
- Sample too small for multivariate analysis