Exploring Pediatric Underinsurance to Understand Health Care Access and Affordability

Statement of Problem

Pediatric underinsurance occurs when children's health coverage is inadequate, inconsistent, or has out-of-pocket costs large enough to put access to necessary care out of reach for families. It has been associated with lower reported quality of care, forgone care, and unmet health needs, and is of particular concern for children with chronic conditions. Though the proportion of children without health insurance has generally declined over the past decade, it has coincided with a rise in the prevalence of pediatric underinsurance. It is currently estimated that 1 in 3 children in the United States is underinsured.

The challenges of underinsurance differ for families with private or public insurance coverage. Decreasing adequacy of commercial or employer-sponsored insurance, which covers half of children in the United States, is likely the result of commercial plans that have experienced substantial growth in premiums and deductibles throughout the past decade. On the other hand, families enrolled in public insurance may experience more frequent gaps in coverage.

Description

Building on work that explored the shifting pediatric health coverage landscape for working families, PolicyLab is exploring the issue of pediatric underinsurance to better understand it related to specific populations, and to make recommendations to inform state and federal efforts to ensure children have access to coverage that meets their needs.

Underinsurance Among Children With Special Health Care Needs

Children with special health care needs often require frequent and intense care and are at elevated risk for hospitalizations, emergency department visits and unplanned doctor's visits. However, little research to date has examined the prevalence in underinsurance across the wide spectrum of children's special health care needs.

In a JAMA Network Open study, our team examined the prevalence of underinsurance among this population based on child medical complexity and income levels. In this cross-sectional study, the odds of being underinsured were not uniform among children with special health care needs. We found that both medical complexity and daily functional limitations led to increased odds of underinsurance among this population.

Additionally, we found a concentration of underinsurance among middle-income families of children with special health care needs whose incomes surpassed eligibility thresholds for dependent Medicaid coverage.

Underinsurance Among Immigrant Populations

Our team continues building evidence around this issue and is studying the landscape of underinsurance among immigrant populations. While it is consistently shown that children in immigrant families face substantially higher rates of uninsurance than their peers, little is known about how immigrant families experience underinsurance. State-level policies, language barriers, and economic disparities may create unique challenges for immigrant families that result in higher rates of pediatric underinsurance compared to other children.

PolicyLab researchers are currently examining the prevalence of underinsurance among children in immigrant families to elucidate the mechanisms of health insurance coverage and care access that may differentially impact immigrant families. Preliminary findings show that higher rates of underinsurance among first and second generation immigrant children are largely due to coverage that is inadequate to meet their health care needs.

Future work aims to understand the potential differential impact of insurance type on the risk of underinsurance and devise solutions to optimize coverage among all children, regardless of where they were born.

Next Steps

As health care and insurance costs continue to rise, more research is needed to inform state and federal efforts to ensure that all children have access to insurance coverage—public or private—that meets their needs. We are pursuing further work to understand the impact of underinsurance on children and to devise solutions that optimize coverage for all children.

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