

## A Sampling Bias in Identifying Children in Foster Care Using Medicaid Data

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**BACKGROUND:** Prior research identified foster care children using Medicaid eligibility codes specific to foster care, but it is unknown whether these codes capture all foster care children.

**OBJECTIVES:** To describe the sampling bias in relying on Medicaid eligibility codes to identify foster care children.

**METHODS:** Using foster care administrative files linked to Medicaid data, we describe the proportion of children whose Medicaid eligibility was correctly encoded as foster child during a 1-year follow-up period following a new episode of foster care. Sampling bias is described by comparing claims in mental health, emergency department (ED), and other ambulatory settings among correctly and incorrectly classified foster care children.

**RESULTS:** Twenty-eight percent of the 5683 sampled children were incorrectly classified in Medicaid eligibility files. In a multivariate logistic regression model, correct classification was associated with duration of foster care (>9 vs <2 months, odds ratio [OR] 7.67, 95% confidence interval [CI] 7.17-7.97), number of placements (>3 vs 1 placement, OR 4.20, 95% CI 3.14-5.64), and placement in a group home among adjudicated dependent children (OR 1.87, 95% CI 1.33-2.63). Compared with incorrectly classified children, correctly classified foster care children were 3 times more likely to use any services, 2 times more likely to visit the ED, 3 times more likely to make ambulatory visits, and 4 times more likely to use mental health care services ( $P < .001$  for all comparisons).

**CONCLUSIONS:** Identifying children in foster care using Medicaid eligibility files is prone to sampling bias that over-represents children in foster care who use more services.

### Journal:

[Ambulatory Pediatrics](#)

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