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7521 Main Street, Suite 103  
Ralston, Nebraska 68127

(402) 597-3100 P  
(402) 597-2705 F

<http://voicesforchildren.com>

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February 25, 2015

To: Members of the Health and Human Services Committee  
From: Aubrey Mancuso, Policy Coordinator – Economic Stability and Health  
Re: **Support for LB 472**

Voices for Children is in support of LB 472. Although children are already eligible for Medicaid at a higher income level, this bill would allow uninsured parents with incomes between about 60% and 133% of the Federal Poverty Level (FPL) access to health insurance.

There are multiple ways in which children benefit from parental health insurance. The first is that **extending Medicaid coverage to parents has a spillover benefit for children**. The Children's Health Insurance Program (CHIP) and the income eligibility increase for the program in 2009 have helped to decrease the number of uninsured children in the state. However, in 2013 about 17,000 children eligible for public health insurance remained uninsured.<sup>1</sup> Several studies have shown a correlation between parental and child insurance rates. One study found that nearly 75% of uninsured children have at least one uninsured parent and that states that expand Medicaid to parents show uninsured rates among low-income children that are over 40% lower.<sup>2</sup>

**Parents are also more likely to have better knowledge of the health care system and better utilize care on behalf of their children if they themselves are insured.** One study found that providing Medicaid to uninsured children results in a 14% increase in well-child visits, while extending coverage to both children and parents increases well-child visits by 24%. The opposite was also true. Having an uninsured parent reduces the probability of a well-child visit by 3.5% among publicly insured children and by 11.8% among privately insured children.<sup>3</sup>

Finally, **children benefit from having healthy parents who are better able to care for their needs.** Adults who lack health insurance are more likely to delay or fail to seek treatment for physical or mental health issues.<sup>4</sup> These issues can ultimately impact a parent's ability to adequately care for their children.

For these reasons, we support the efforts in LB 472 to expand health insurance to more low income parents. We also hope that several important

<sup>1</sup> U.S. Census Bureau, 2011 American Community Survey, Table B27016

<sup>2</sup> Lambrew, J.M. 2001. Health Insurance: A Family Affair. (The Commonwealth Fund, New York).

<sup>3</sup> Gifford, E.J., R. Weech-Maldano, P. Farley-Short. 2005. Low-Income Children's Preventive Services Use: Implications of Parents' Medicaid Status. Health Care Financing Review. 26(4), 81-94

<sup>4</sup> Kaiser Family Foundation, Five Basic Facts on the Uninsured, September 2009

considerations will be kept in mind as the process of obtaining a Medicaid waiver moves forward:

- 1) The Children's Health Insurance Program (CHIP) and Medicaid provide much more robust pediatric benefits for children than most private insurance plans including the Early and Periodic Screening Diagnostic and Treatment (EPSDT) provisions that aim to ensure that developmental issues are identified and addressed in a timely manner. **When making changes to the overall Medicaid health delivery system, we need to ensure that we continue to preserve public coverage options for lower income children.**
- 2) The effectiveness of wellness incentives can be limited due to inadequate outreach. In the first year of a similar program in Iowa, only 15% of enrollees had engaged in the required wellness activities.<sup>5</sup> **Any requirements that potentially require an increased financial contribution from participants should be accompanied by robust and comprehensive outreach efforts that ensure participants are fully informed about program requirements.**

We urge the committee to keep these principals in mind in moving forward on making changes to the Medicaid program and we urge the committee to advance LB 472. Thank you.

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<sup>5</sup> Alker (2015) Georgetown Center for Children and Families: Early Returns from Iowa's Health and Wellness Plan: Are Healthy Behavior Programs Working?