



UCLA CENTER FOR HEALTH POLICY RESEARCH

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**494,000 MORE OF CALIFORNIA'S CHILDREN HAD HEALTH INSURANCE
COVERAGE IN 2003 THAN IN 2001**

Medi-Cal and Healthy Families prove very effective in covering children as employment-based coverage declined between 2001 and 2003.

Los Angeles, CA – More than 1.1 million children under age 19 were uninsured for all or part of the year in 2003—a significant drop from the 1.5 million who had no insurance in 2001, according to a new report released by the UCLA Center for Health Policy Research.

“This is good news for California’s children but we cannot stop here. We need to assure continuous coverage for all the state’s children by strengthening and expanding Medi-Cal and Healthy Families” says E. Richard Brown, founding director of the Center and lead author of the study.

Children’s Insurance Coverage Increases as Result of Public Program Expansion is the Center’s first study based on data from the 2003 California Health Interview Survey (CHIS 2003). The fact sheet examines children’s health insurance coverage, and children who are uninsured but eligible for coverage through public programs. It also describes how the profile has changed since 2001. CHIS 2003 provides the most recent information available on health insurance coverage of Californians, both statewide and at the county level. The study was funded by grants from The California Wellness Foundation and The California Endowment.

Children’s coverage through a parent’s employment-based insurance dropped 4.3 percentage points from 2001, while children’s Medi-Cal or Healthy Families coverage increased 5.2 percentage points. The authors conclude that Medi-Cal and Healthy Families were effective in covering children as employment-based coverage declined for both children and adults between 2001 and 2003. If children’s Medi-Cal and Healthy Families enrollment had increased only as much as adult enrollment in these programs, an additional 487,000 children would have been uninsured in 2003.

The effectiveness of these public programs in assuring that children are covered for health care expenses, combined with the availability of federal matching funds for Medi-Cal and Healthy Families expenditures, underscores their potential for offsetting at least some of the loss in job-based insurance.

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The study also examines the importance of the county-based health insurance programs in filling gaps in coverage for California’s children. “Local public and private resources were key to initiating innovative programs,” noted Shana Alex Lavarreda, a Senior Research Associate at the Center, “but they are unsustainable without support from federal and state funds.” Most have already reached their enrollment caps.

Brown noted that continuous eligibility of children in Medi-Cal played a major role in the dramatic change in the numbers of children now covered, together with the extensive effort and resources invested in outreach and enrollment by State and local agencies, voluntary organizations, and local children’s health insurance expansion programs.

For more information about the California Health Interview Survey, please visit www.chis.ucla.edu.

The California Health Interview Survey (CHIS) is a collaboration of the UCLA Center for Health Policy Research, the California Department of Health Services and the Public Health Institute.

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Some Online Resources:

Children Now:	www.childrennow.org
PICO California:	www.picocalifornia.org
Children’s Defense Fund California	http://www.cdfca.org
The Children’s Partnership	www.childrenpartnership.org
The 100% Campaign	www.100percentcampaign.org