

# Health safety net for undocumented kids works, study finds

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For some low-income, undocumented children, seeing a doctor or nurse when they are sick may not be an option.

Going through childhood without health coverage and fear of interacting with the [health care system](#) means less access to vaccines, asthma

treatment, dental, and vision care.

A study at San Diego State University's School of Public Health, however, shows a California [program](#) to expand public health programs to undocumented immigrant children greatly reduced disparities in coverage rates.

"These are some of the largest coverage disparities that still exist," said Brandy Lipton, an assistant professor and health economist in the division of health management and policy. The Affordable Care Act, she noted, which reformed health insurance in the U.S. and expanded Medicaid in many states, isn't open to undocumented kids or adults.

"We've had these large expansions in public coverage for most children going back to the 1980s, but they generally have excluded undocumented children," Lipton said. "Most states don't provide public coverage options for undocumented kids."

The research team, however, found a 34% reduction in the rate of uninsured non-citizens in California following implementation of Health for All Kids in May 2016. Health for All Kids allowed children under the age of 19 in families at qualifying income levels to enroll in Medi-Cal (Medicaid and Children's Health Insurance Program or CHIP in California) regardless of immigration status.

The team looked at changes in coverage rates through 2018, before Health for All Kids was extended to young adults up to age 26.

"Five other states had actually expanded Medicaid coverage to undocumented kids before California did," Lipton said, "but there is really limited evidence on what those policies actually do."

Results were published July 6 in the July issue of *Health Affairs*, a top-

tier peer-reviewed journal on health policy.

For the purposes of the study, the researchers examined coverage rates for non-citizen children, a status easier to determine than whether they are documented or not.

Prior to the expansion, the uninsured rate among non-citizen children in California "was quite high," Lipton said, about 26% compared to only 7% for citizen children in families with incomes low enough to qualify for Medi-Cal coverage. That figure dropped to 10% in California by the end of 2018 after as many as 130,000 undocumented children enrolled for health coverage.

Medi-Cal coverage alone was up 21% compared with rates for non-citizen children in California before the expansion.

"This is an example of a policy that really did a pretty good job of closing that gap, not entirely, but closing a good portion of that gap."

Nationally, about three of every ten children receive coverage through public programs like Medicaid and CHIP.

Lipton noted there is plenty of evidence on the benefits of expanding Medicaid to [low-income](#) children in general, and increasing access to health care services, both in short-term and long-term effects. "Gaining Medicaid coverage from childhood has long-run effects in terms of adult socioeconomic status, educational attainment and adult health as well," she said.

The researchers validated the effects of Health for All Kids through a variety of comparisons to changes seen among low-income citizen children over the same period and in states without similar programs. The study also accounted for previously adopted children's health

initiatives that provide coverage to undocumented children at a local level (some of which have enrollment caps and age limits), and examined differences across areas with different rates of [health coverage](#) available through a [children's](#) program in Kaiser Permanente service areas.

Jefferson Nguyen, co-author of the study and a May graduate of the master of [public health](#) program, said he hopes its findings lead to discussion in other states of health care expansion, its feasibility, and the peace of mind it would bring to low-income, undocumented families.

Melody K. Schiaffino, co-author of the study and an assistant professor in the School of Public Health, said she believes this study will be important in demonstrating the potential for state and local programs to improve coverage for the most vulnerable sectors of our population, representing a critical investment in [health](#) equity.

**More information:** Brandy J. Lipton et al, California's Health4All Kids Expansion And Health Insurance Coverage Among Low-Income Noncitizen Children, *Health Affairs* (2021). [DOI: 10.1377/hlthaff.2021.00096](#)

Provided by San Diego State University

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