



**ZERO TO THREE**  
Early connections last a lifetime

# AMERICA'S BABIES NEED AFFORDABLE HEALTH CARE

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# Why Is Access to Health Care So Important for Low-Income Babies and Young Children?



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- **Good health is critical for growth**
  - Babies need regular care to monitor growth, receive vaccines on schedule, and treat childhood diseases
  - Physical development is inextricably intertwined with cognitive and social-emotional development in young children
- **Primary Care Providers are the sentinels for young children's development**
  - Babies and toddlers may not see other early childhood professionals, but 95% of them see a primary care physician
  - Critical role in screening, treating, or referring for many developmental issues
- **Babies and toddlers who are poor or near-poor are at greater risk for developmental problems**
  - 44% of all children < 3 have 1 to 2 risk factors; 17% have 3 or more
  - As risk factors accumulate, the likelihood of developmental delay increases
- **Unaddressed stress and adverse experiences contribute to costly health problems in adulthood**

# Today's small Number



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# 3.2%

*Percentage of young children who are uninsured (Source: Urban Institute)*

**This remarkable achievement is no accident.** It is the result of 50 years of steady advancement in the federal commitment to healthy children, making sure all children in America can get the health care needed for positive development. It is the result first of Medicaid, then CHIP, and then the Affordable Care Act.



# How the ACA Helps Babies and Toddlers

## Coverage became a family affair

- Many adults gained coverage they previously couldn't afford, including 11 million adults in Medicaid expansion states.
- Covering more parents led to more children being covered, as they become more familiar with insurance systems and become better advocates for their children
- 900,000 children under the age of 5 would lose coverage under partial ACA repeal
- Parent coverage resulted in more children enrolled in Medicaid and CHIP, cutting the uninsured rate of eligible children in half.

## ACA makes preventive care routine

- Families have no copays for prevention and wellness services, making them more likely to get immunizations and regular screenings
- Uninsured young children are much less likely to see a doctor for preventive care (68% compared with 92% of insured children)

## No pre-existing conditions or lifetime caps ensure babies with long-term health needs can access care

### ACA emphasizes healthy pregnancies

- With the Essential Health Benefits (EHB) requirement in the ACA, all plans had to cover maternity and newborn care
  - Prior to the ACA, 62% of plans in the individual market did not include such coverage
- The ACA required insurance to cover breast pumps for nursing mothers and amended federal labor laws to require employers to protect breastfeeding mothers' ability to pump at work, enabling babies to benefit longer



# Healthy Parents Lead to Healthy Kids

- **Insured parents have access to much-needed health care, including medical services, substance abuse treatment, and mental health services, that help them provide a safe and nurturing home for their children**
  - Maternal depression can be identified and treated before it negatively impacts a baby's social-emotional development
  - When parents are unable to receive treatment for chronic illness or pain it can contribute to parental stress, which can be especially harmful to young children.
  - Mothers covered by Medicaid are more likely than uninsured mothers to have a regular source of care, a doctor visit, and to receive preventative care
- **Parents' mental health or substance abuse problems can have a detrimental impact on their young children's social-emotional development**
  - Nearly 30% of people who receive health insurance coverage through the Medicaid expansion either have a mental disorder or a substance use disorder
  - New research indicates that Medicaid expansion has not only resulted in improved access to medical benefits, but has also improved access to behavioral health treatment for newly eligible enrollees



# How Medicaid Helps Babies and Toddlers

## **EPSDT wraps the most vulnerable children in a comprehensive blanket of care**

- Early, Periodic Screening, Diagnosis, and Treatment (EPSDT)
- These medically necessary services include screenings and treatments that are designed to identify and treat developmental delays or diseases as early as possible

## **Helps provide equity in health care coverage for children of color**

- Medicaid/CHIP covers more than half of all Black, Hispanic, and American Indian and Alaska Native children

## **Medicaid backstops other systems for children**

- Medicaid funding is also used by states to provide critical Part C Early Intervention services to children birth to three
- Most children in foster care are automatically eligible for Medicaid
- Medicaid coverage is key element in finding permanent adoptive homes for special needs children



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## The Promise of Early and Lifelong Health

- **Children with Medicaid/CHIP coverage had significantly lower rates of forgoing medical care, prescription drugs, dental care, specialist care, mental health care, and vision care because it was unaffordable**
- **Children's and mothers' access to health insurance during pregnancy and in the first months of life is linked to significant reductions in infant mortality, childhood deaths, and the incidence of low birthweight**
- **Children enrolled in Medicaid have been shown to have better health, educational, and employment outcomes into adulthood**
- **Children enrolled in Medicaid protect the whole family from financial hardship by decreasing the probability of debt and bankruptcy for families**
  - In 2010, Medicaid lifted an estimated 2.6 million to 3.4 million individuals out of poverty

# Current Threats to Health Care for Babies and Parents



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## Major cuts to federal Medicaid funding could:

- Put constraints on benefits, payments, and coverage
  - Wouldn't account for:
    - Medical technology (new Rx drug or treatments)
    - Epidemics (Zika/flu outbreak)
    - Public Health Crises (obesity, opioid addiction)
    - Shifts in health demographics (more aging enrollees)
    - Natural disaster health impacts (Hurricane Katrina)
  - Historically guaranteed Medicaid benefits, including EPSDT, could be denied or constricted
- Decrease opportunities for Medicaid innovation with less costly populations, including young children
- Decrease economic security and increased long-term health care costs
- Put pressure on other children's programs in state budgets



Thank You!



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