

The Florida Children's Health Insurance Study 2007

**Prepared for the
Florida Healthy Kids Corporation**

Prepared By

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1. INTRODUCTION

The statewide Florida Children's Health Insurance Study provides detailed information about the health coverage status of children in the state of Florida. This survey was last conducted in 2002 by the Institute for Child Health Policy (ICHP). The Florida Healthy Kids Corporation Board of Directors requested that the ICHP update this study in 2007. The objectives of 2007 Florida Children's Health Insurance Study are to: (1) develop statewide estimates of uninsured children in Florida, (2) compare the demographic, economic, and health status characteristics of uninsured children to insured children, and (3) develop estimates of Florida KidCare Program eligibility.

This report covers the following topics:

1. A description of the survey instrument
2. An overview of the sample design and data collection
3. Estimates of insured children by coverage type and uninsured children in Florida
4. The length of time children have had coverage or have been uninsured
5. Socio-demographic and health characteristics of insured and uninsured children
6. Employment and insurance status of parents of insured and uninsured children
7. Children's access to a usual source of care
8. Reported knowledge of KidCare programs
9. Estimates of KidCare program eligibility
10. Characteristics of children who are uninsured and eligible for KidCare
11. Demographic characteristics of respondents

2. SURVEY INSTRUMENT

The Florida Children's Health Insurance Survey collects information about the number and characteristics of children who are uninsured and about their potential eligibility for the Healthy Kids, MediKids, and Medicaid Programs. In addition, the survey contains the Children with Special Health Care Needs (CSHCN) Screener, an instrument designed to assess whether a child has special health care needs. This instrument is used to provide estimates of the number of children potentially eligible for the Children's Medical Services Network (CMSN).

The Children's Health Insurance Survey contains detailed questions about each household member's health insurance coverage, the children's health status, and demographic questions. The survey also was designed to collect information for the purposes of estimating KidCare program eligibility. Information about the relationship of household members to one another was collected, which was critical to form family units for the purpose of subsidized health insurance program eligibility estimation. In addition, the survey included detailed questions about the various sources of income for each household member, including questions that allowed us to take into account income exclusions and disregards that are used in practice in assessing program eligibility. The survey also collected information about the children's citizenship status. In addition, respondents were asked detailed health information about the child who has the greatest health care need living in the household using the CSHCN Screener. If a respondent indicated that all children were healthy and no one child had a greater health care need, the respondent was asked to answer these detailed health questions about the child who had the next birthday in the household. Staff from the Department of Children and Families, the Florida Healthy Kids Corporation, and the Children's Medical Services Network reviewed the survey instrument for accuracy in collecting the necessary information to estimate program eligibility, and they were consulted throughout the process of developing the survey questions and the subsequent estimations of program eligibility.

3. SAMPLE DESIGN AND DATA COLLECTION

The sampling plan included families in each of Florida's sixty-seven counties. Using findings from prior health insurance studies in Florida and county poverty statistics, counties at higher risk for having uninsured children were oversampled in order to get more robust information about uninsured families. Results reported at the child level were weighted to the appropriate universe size of children in each county. Results reported at the household level were weighted to the appropriate universe size of households with children under age 19 in each county. Population estimates for 2006 from the University of Florida Bureau of Economic and Business Research were used to determine these appropriate universes. For Florida overall, the estimated population of children age 18 and under is 4,349,080, and the estimated number of households with children age 18 and under is 2,366,951.¹

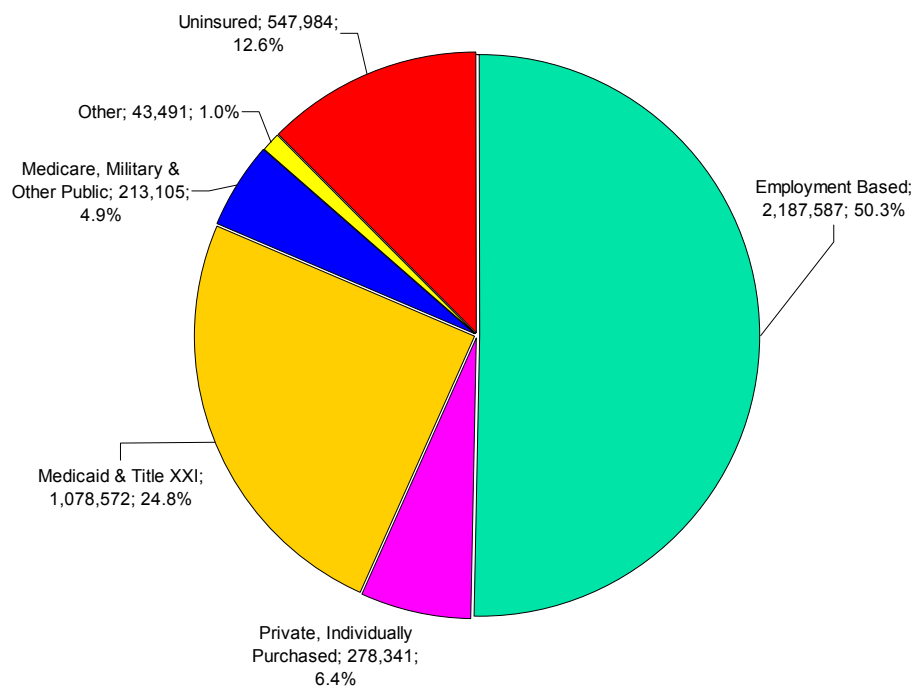
The Bureau of Economic and Business Research at the University of Florida conducted the telephone surveys using computer-assisted-telephone-interviewing (CATI). A random digit dialing approach was used to contact households. Respondents were then asked whether or not at least one child under the age of 19 resided in the household. If households did not meet this criterion, the interview was terminated. Therefore, only respondents whose household contained a child under the age of 19 are included in this report. Interviews were conducted in English, Spanish, and Haitian Creole. Each interview took approximately 25 minutes to complete. The total number of surveys targeted was 2,400, and 2,220 interviews of households with children under age 19 were obtained between August 2007 and November 2007. These completed interviews include families from each of Florida's sixty-seven counties. A total of 8,750 household members, including 4,202 children and 4,548 adults, are represented in these surveys. Using a 95 percent confidence interval, the responses reported for the overall population of children are within ± 1.51 percentage points of the "true" response. For results reported for the population of *households* with children age 18 and under, the survey responses range from within ± 2.08 percentage points of the "true" response.²

4. ESTIMATES OF UNINSURED AND INSURED CHILDREN IN FLORIDA

Figure 1 summarizes Florida's children's insurance status. Results from the 2007 Children's Health Insurance Survey indicate that approximately 12.6% of all children in the state of Florida are uninsured, or approximately 548,000 children. This estimate is similar to the 2004 estimate of 12.1% obtained by the Florida Health Insurance Survey. In the United States overall, 10.5% of children were uninsured in 2004 and 11.7% were uninsured in 2006. The child uninsurance rate in the United States decreased after the enactment of SCHIP to a low of 10.5% in 2004 and has increased in each of the following years (U.S. Census Bureau 2007).

Figure 1 also summarizes the sources of insurance coverage for children who are covered.³ One-half of Florida's children (50.3%) were reported to have employment-based insurance coverage, one-fourth (24.8%) had public coverage through Medicaid or Title XXI (SCHIP) programs, 6.4% were covered through private non-group coverage, 4.9% had other forms of public coverage (e.g., Medicare and military-related), and 1% had some other form of coverage.

Figure 1: Children's Health Insurance Coverage in Florida, 2007



5. DURATION OF COVERAGE AND UNINSURANCE

Most uninsured children are uninsured for an extended period of time. Almost two-thirds of uninsured children (62%) in Florida have been without coverage for more than one year (Figure 2). Most insured children (87%) have had coverage for more than one year (Figure 3).

Figure 2: Length of Time without Health Coverage

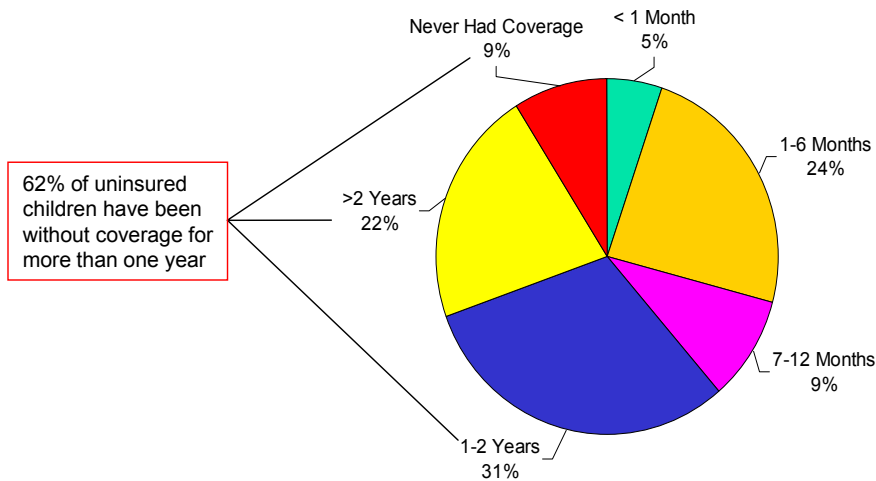
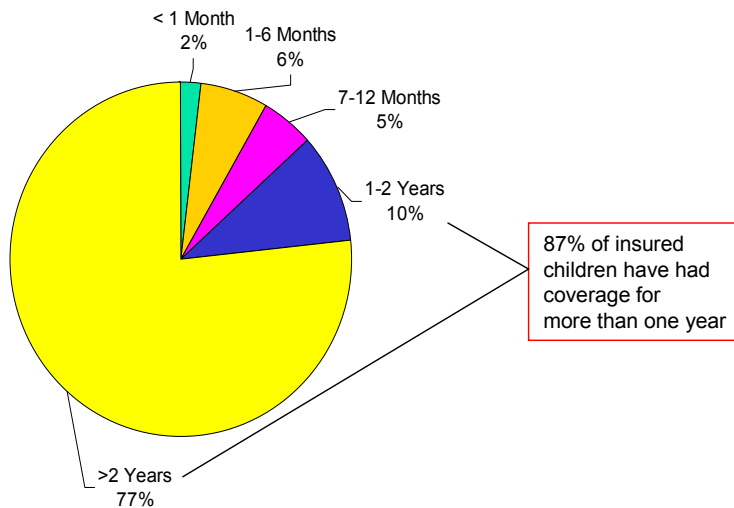


Figure 3: Length of Time with Coverage

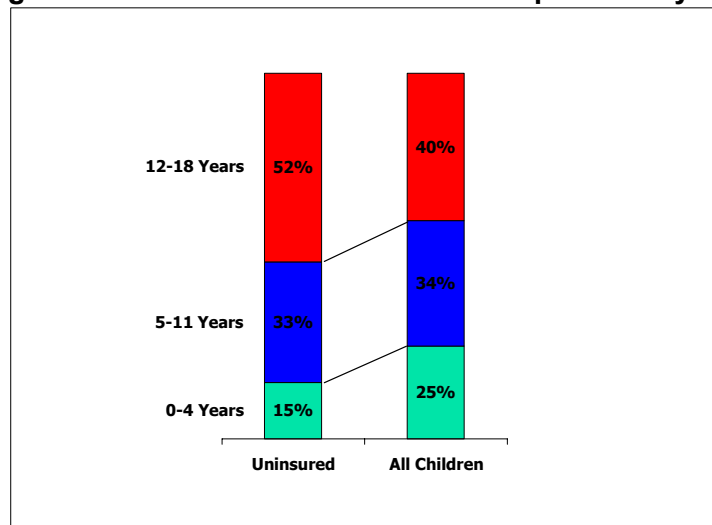


6. SOCIO-DEMOGRAPHIC AND HEALTH CHARACTERISTICS OF INSURED AND UNINSURED CHILDREN

Age and Health Coverage

Children 12-18 years of age account for just over one-half of Florida's uninsured children, and they are disproportionately likely to be uninsured. Whereas children 12-18 years old represent 40% of the child population in Florida, they represent 52% of Florida's uninsured children (Figure 4).

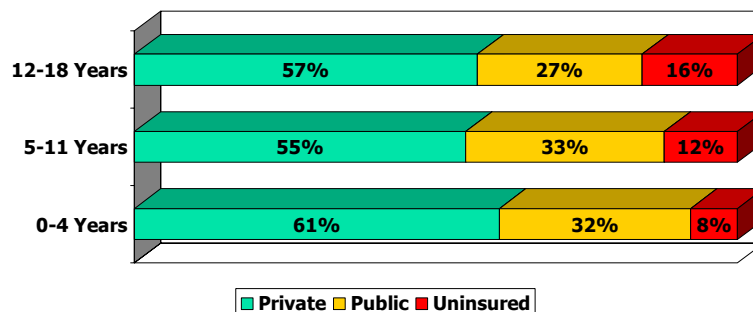
Figure 4: Uninsured Children versus Population by Age



*Column percentages may not sum to 100% due to rounding.

Children 0-4 years old are least likely to be uninsured (8%) and are somewhat more likely to have private health coverage. Children ages 12-18 years old are most likely to be uninsured (16%) and least likely to have public health coverage (Figure 5).

Figure 5: Children's Health Insurance Coverage by Age

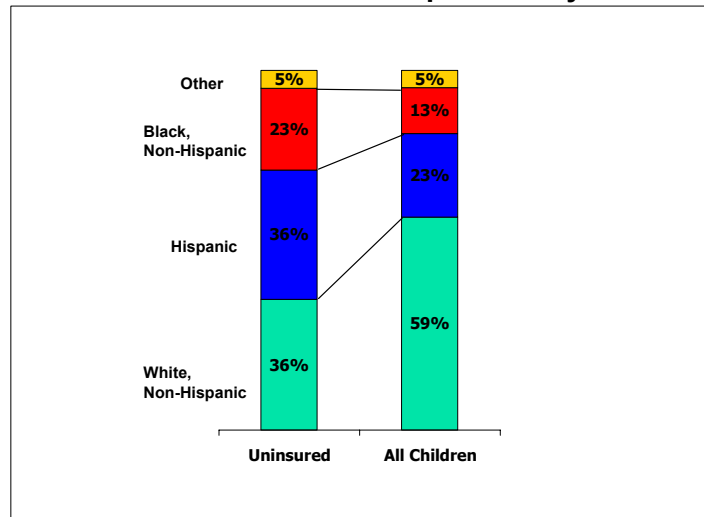


*Row percentages may not sum to 100% due to rounding.

Race/Ethnicity and Health Coverage

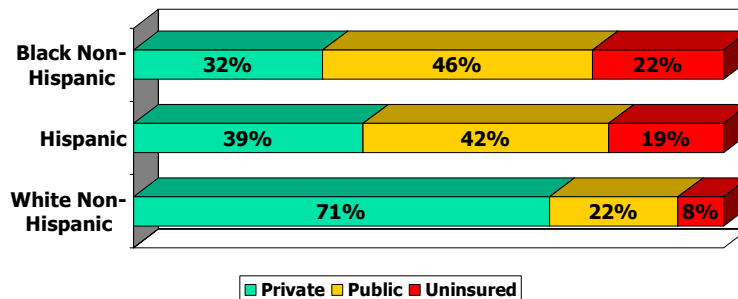
Hispanic and non-Hispanic black children account for a disproportionate share of uninsured children in Florida compared to the overall child population. Non-Hispanic black children account for 13% of the overall child population, but represent 23% of uninsured children. Hispanic children account for 23% of the overall child population, but represent 36% of uninsured children (Figure 6).

Figure 6: Uninsured Children versus Population by Race and Ethnicity



Non-Hispanic white children are much more likely to have private coverage and less likely to be uninsured than Hispanic and non-Hispanic black children. More than 40% of Hispanic and non-Hispanic black children have public coverage, compared to 22% of non-Hispanic white children (Figure 7). About 19% of Hispanic children and 22% of Black non-Hispanic children are uninsured.⁴

Figure 7: Children’s Health Insurance Coverage by Race and Ethnicity

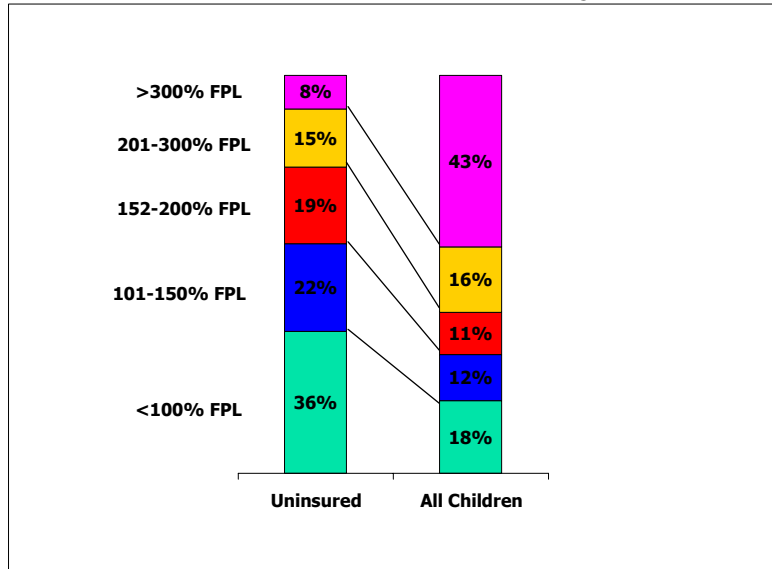


*Row percentages may not sum to 100% due to rounding

Income and Health Coverage

Approximately 41% of children in Florida come from poor or near-poor families - households with income at or below 200% of the Federal Poverty Level (FPL), which is \$41,300 for a family of four in 2007. However, these low-income children account for more than three-fourths (77%) of uninsured children in Florida (Figure 8).

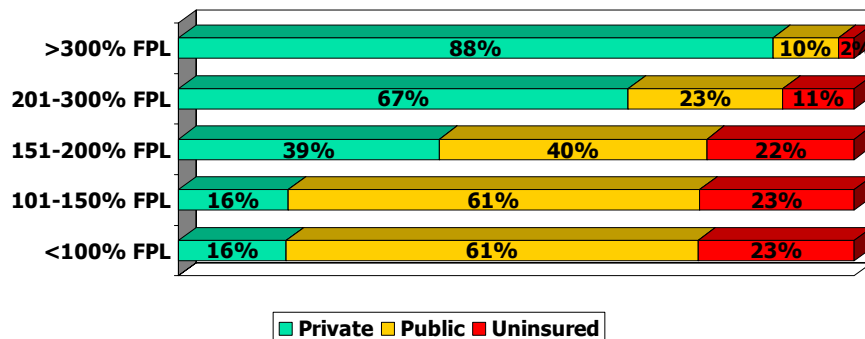
Figure 8: Uninsured Children versus Population by Federal Poverty Level



*Column percentages may not sum to 100% due to rounding.

The majority of the lowest income children in Florida, those below 150% of the FPL, have public health coverage. However, a significant proportion of low-income children lack coverage: more than one in five children in households with incomes between 0-200% of the FPL are uninsured (Figure 9).

Figure 9: Children’s Health Insurance Coverage by Federal Poverty Level

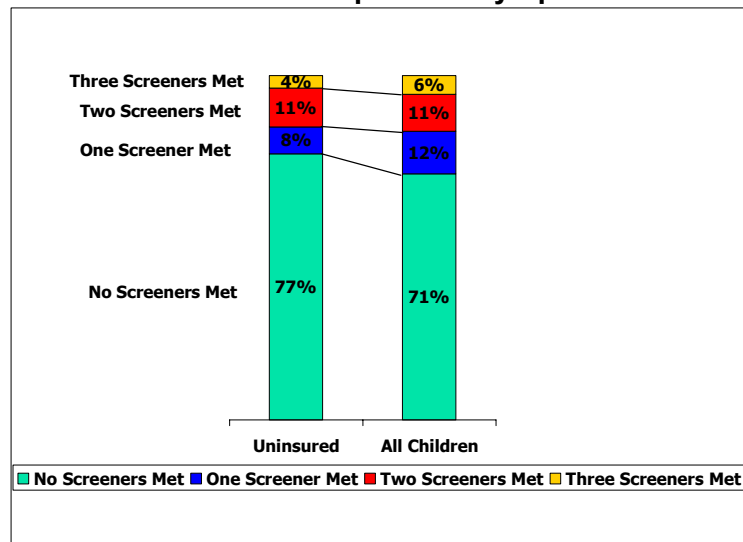


*Row percentages may not sum to 100% due to rounding

Special Health Care Needs and Health Coverage

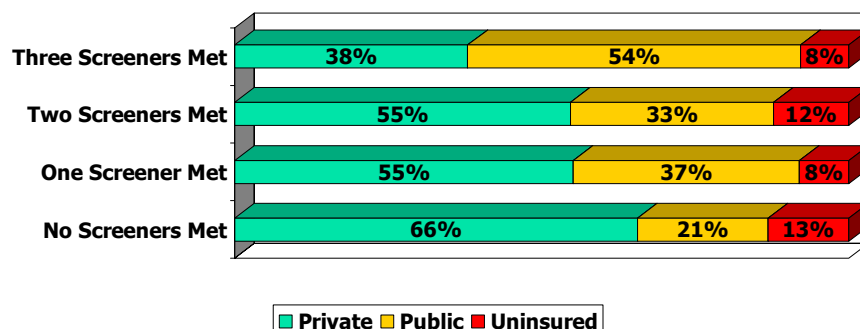
The CSHCN Screener was used to identify whether the household had a child who (1) has activity limitations, (2) needs medications, and/or (3) has an above-routine need for medical services.⁵ Children can be categorized into more than one category. The percentage of CSHCN is similar between uninsured children and the overall child population in Florida, with more than 30% of households having children who meet one or more of the domains (Figure 10).

Figure 10: Uninsured Children versus Population by Special Health Care Needs



Although the proportion of children with chronic conditions is similar between insured and uninsured children, the proportion of CSHCN varies by the type of coverage among those who are insured. Children with greater severity health conditions are more likely to have public health coverage than children without chronic health conditions (Figure 11).

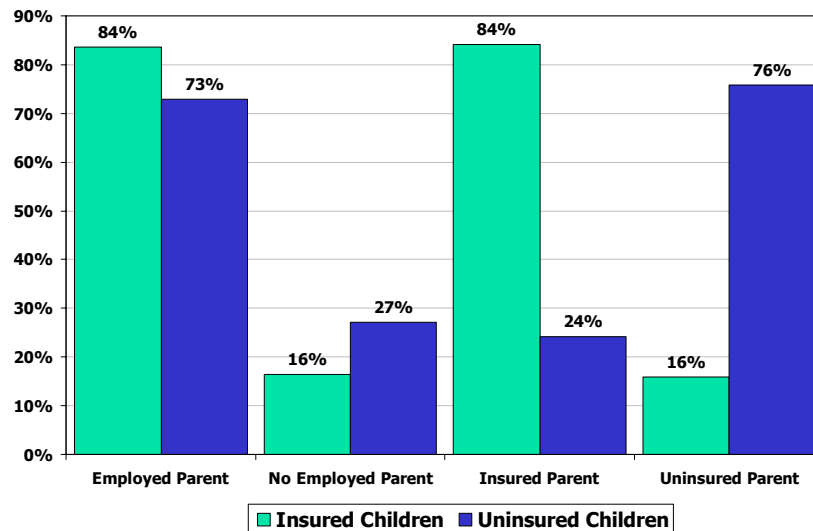
Figure 11: Children's Health Insurance Coverage by Special Health Care Needs



7. PARENT EMPLOYMENT AND INSURANCE STATUS

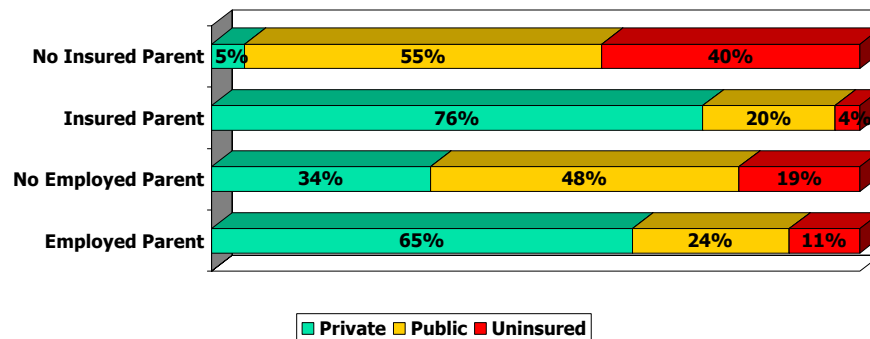
Although uninsured children are more likely to have no employed parents in their household than insured children, most insured and uninsured children have at least one employed parent (84% and 73% respectively). In contrast, 84% of insured children have an insured parent in the household, whereas only 24% of uninsured children have an insured parent (Figure 12).

Figure 12: Parent Employment and Insurance Status for Insured and Uninsured Children



Children with no employed parents in the household and those with uninsured parents are much more likely to have public health coverage compared to children who have an employed or insured parent in the household (Figure 13).

Figure 13: Children's Health Insurance Coverage by Parent Employment and Insurance Status

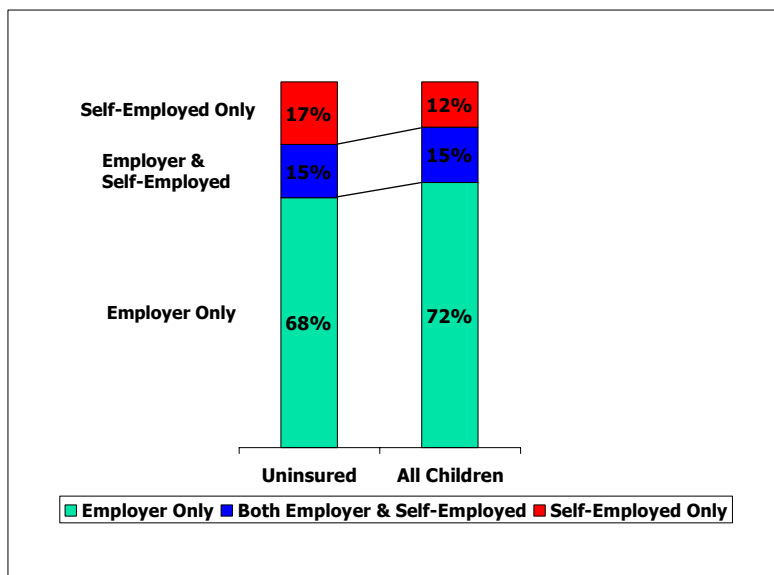


*Row percentages may not sum to 100% due to rounding

Parent Employment Characteristics and Health Coverage: Self-Employed Parents

Among children with an employed parent in the household, children of self-employed parents account for 12% all children with an employed parent in the household, but represent 17% of uninsured children (Figure 14).⁶

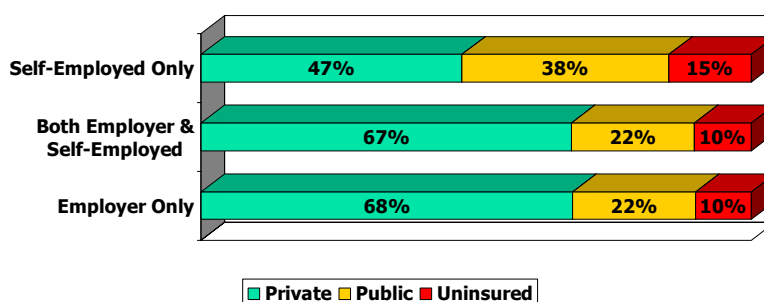
Figure 14: Uninsured Children versus Population by Parent Self-Employment Status for Children with an Employed Parent in the Household



*Column percentages may not sum to 100% due to rounding.

Children whose parents are self-employed are more likely to have public coverage (38%) or be uninsured (15%) than children who have at least one parent who works for an employer (Figure 15). Approximately two-thirds of children who have a parent who works for an employer have private coverage compared to 47% of children with self-employed parents.

Figure 15: Children’s Health Insurance Coverage by Parent Self-Employment Status

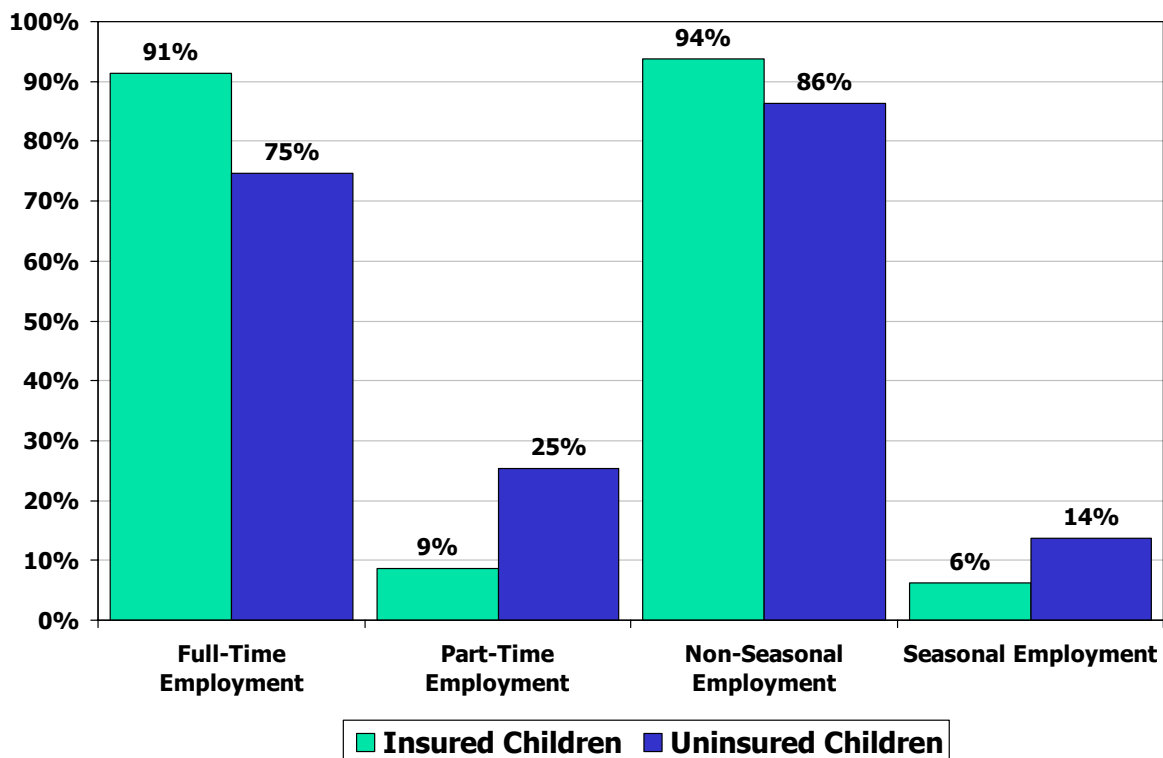


*Row percentages may not sum to 100% due to rounding

Parent Employment Characteristics and Health Coverage: Part-Time and Seasonal Employment

Among children with an employed parent in the household, uninsured children are more likely to have parents with only part-time employment whereas insured children are more likely to have a parent who is employed full-time. One-fourth of uninsured children have parents who are employed part-time only compared to 9% of insured children (Figure 16). Uninsured children are also more likely to have parents who have only seasonal employment compared to insured children (14% versus 6%).

Figure 16: Parents' Part-Time and Seasonal Employment Status for Insured and Uninsured Children



8. USUAL SOURCE OF CARE

Table 1 summarizes whether children have a usual source of care by their coverage type. Only 58% of uninsured children were reported to have a usual source of care compared to more than 90% of children with private or public health coverage.

Although the usual source of care for the majority of insured and uninsured children was a doctor's office, families of uninsured children were less likely (63%) to report a doctor's office as their usual source of care compared to those with public coverage (74%) or private coverage (94%). Families of uninsured children were more likely to report using walk-in clinics or the emergency room as their children's usual source of care than were families of insured children.

Parents who reported that they did not have a usual source of care for their children were asked their reasons for not having a usual source of care. The reason cited most frequently by respondents was that their child was seldom sick. However, families of uninsured children were less likely to cite this reason and more likely to cite lack of health insurance and the cost of medical care as reasons for not having a usual source of care compared to families of children with private or public health coverage.

	Private Coverage	Public Coverage	Uninsured
Does your child currently have a particular doctor's office, clinic, health center, or other place that you would take him or her if he or she was sick or you needed advice about his/her health?			
Yes	97.5%	91.3%	57.5%
No	2.5%	8.7%	42.5%
If usual source of care, what type of place is it?			
Hospital emergency room	0.3%	3.2%	5.4%
Hospital clinic	0.9%	2.0%	2.1%
Doctor's office outside a hospital	94.2%	74.2%	63.4%
Doctor's office inside a hospital	1.4%	4.6%	1.3%
HMO-run clinic	0.6%	2.2%	0.6%
Community health center	0.1%	3.3%	3.4%
School clinic	0.1%	0.3%	2.6%
Local health department	0.1%	2.9%	2.9%
Walk-in clinic or urgent care center	0.8%	1.6%	6.3%
Other [†]	1.5%	5.8%	12.1%

*Column percentages may not sum to 100% due to rounding

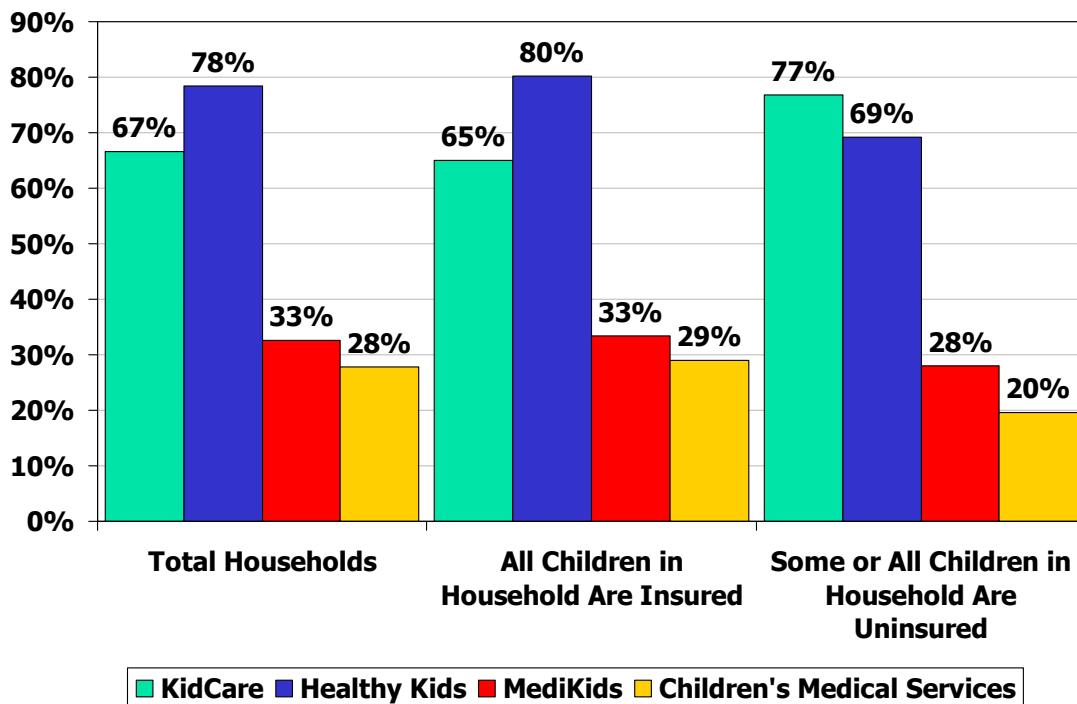
[†]Most of the uninsured who indicated "other" for their usual place of care, indicated "clinic" but did not specify the type of clinic. Military bases were frequently cited as a usual source of care for those with coverage who indicated "other."

9. KNOWLEDGE OF KIDCARE PROGRAMS

Three-quarters of all respondents (76%) indicated that they had heard of at least one of the following: KidCare, Healthy Kids, MediKids, or the Children's Medical Services Network. The greatest recognition was of the Healthy Kids Program, with 78% of respondents indicating that they had heard of the Healthy Kids Program. Sixty-seven percent of respondents stated that they had heard of KidCare, 33% indicated they had heard of MediKids, and 28% had heard of the Children's Medical Services Network.

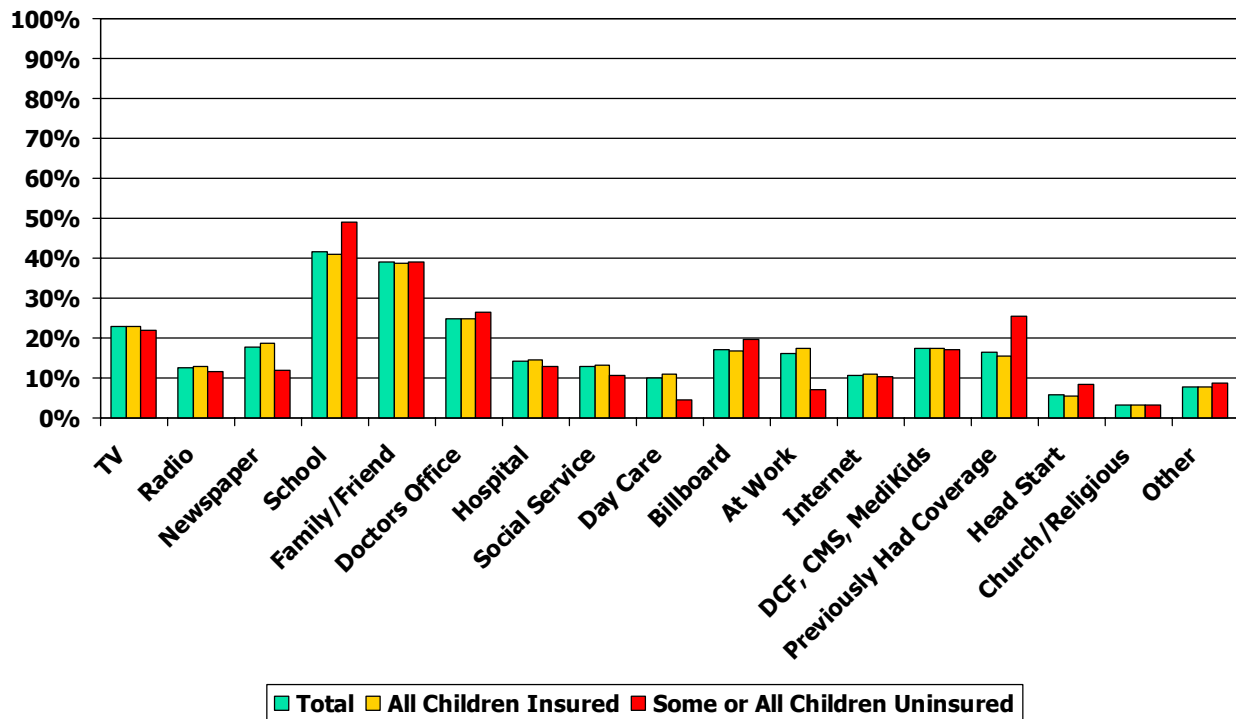
The percentage of families familiar with KidCare program components varied by their children's insurance status (Figure 17). Households with uninsured children were more likely to have heard of KidCare and less likely to be familiar with specific program components compared to households whose children have health coverage.

Figure 17: Knowledge of KidCare Programs by Insurance Status



Families who were familiar with KidCare programs were asked how they heard about the program. Families were most likely to indicate that they learned about KidCare programs from their children’s school, a family or friend, or a doctor’s office (Figure 18). There were some variations by the children’s insurance status. Households with uninsured children were more likely to report having learned about the programs from their children’s school or having had a child previously enrolled in the program than households with no uninsured children. Households with no uninsured children were more likely to report having heard of the programs through the newspaper, their children’s day care, or their place of employment than households with uninsured children.

Figure 18: Percentage of Households Who Heard of KidCare Programs by Information Source and Children’s Insurance Status



10. ESTIMATES OF KIDCARE PROGRAM ELIGIBILITY

KidCare Program eligibility estimates were calculated using the detailed income and household member relationships provided by the respondents and the child's age and citizenship status.

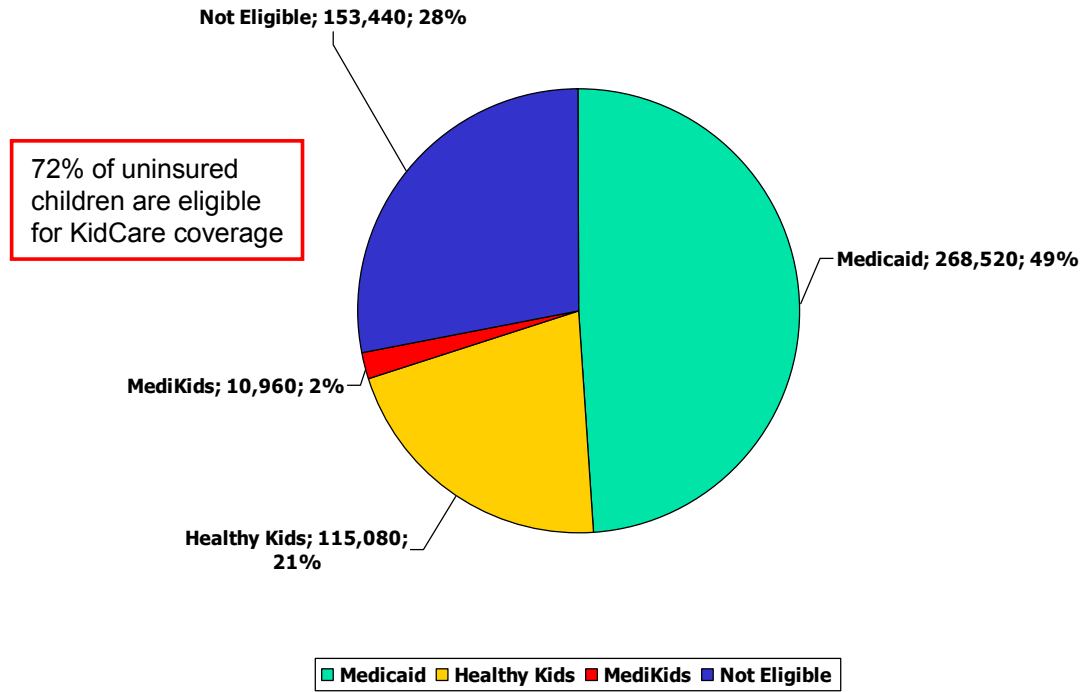
All Children

Approximately 48% of Florida's children are eligible for free or subsidized KidCare coverage: 34% are eligible for Medicaid, 12% are eligible for the Florida Healthy Kids Program, and 2% are eligible for MediKids. Approximately 7% of households (in all income categories) had a child who met the Children's Medical Services Network clinical eligibility criteria.⁷ Of those who met the CMSN clinical eligibility criteria, approximately 75% were eligible for either Medicaid or Title XXI coverage.

Uninsured Children

Approximately 72% of uninsured children in Florida are eligible for free or subsidized KidCare coverage: 49% are eligible for Medicaid, 2% are eligible for MediKids, and 21% are eligible for Healthy Kids (Figure 19). These estimates are consistent with recently published national estimates that 74% of uninsured children in the United States are eligible for Medicaid or SCHIP (Dubay, Holahan, and Cook 2007). Approximately 3% of children who are uninsured and eligible for free or subsidized coverage also meet the CMSN clinical eligibility criteria.

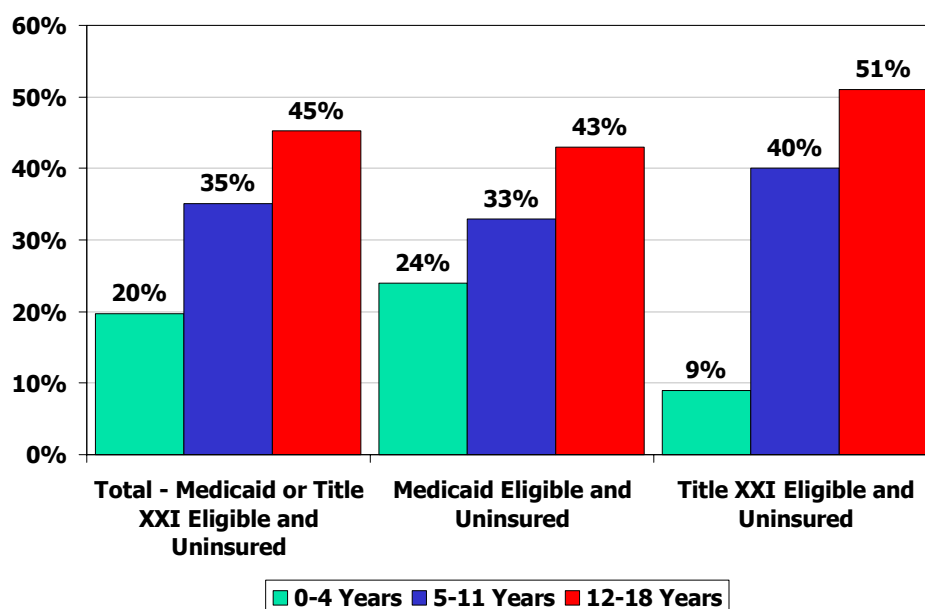
Figure 19: Florida KidCare Eligibility of Uninsured Children



11. CHARACTERISTICS OF THE ELIGIBLE UNINSURED CHILDREN

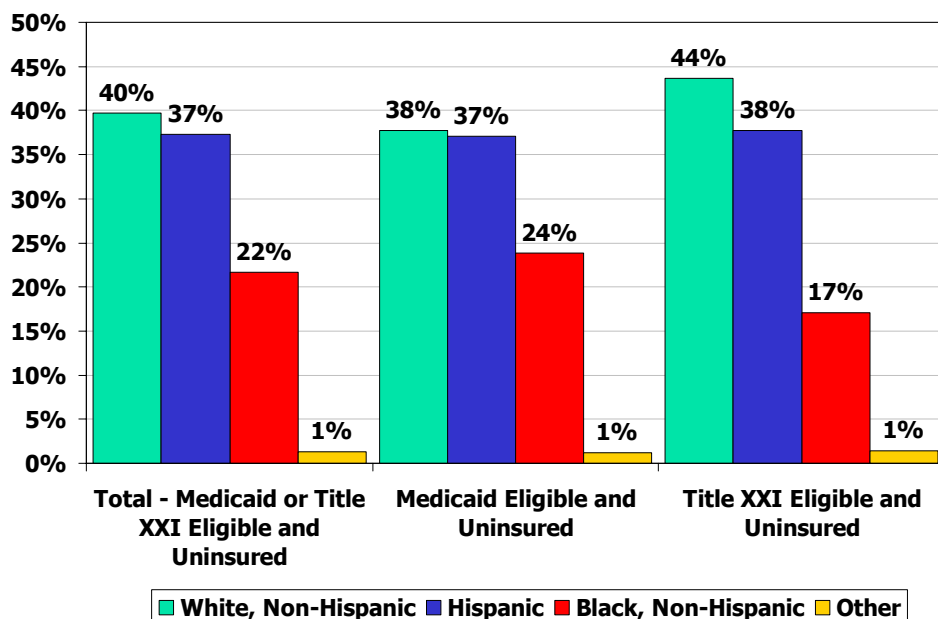
Approximately 20% of children who are uninsured but eligible for free or subsidized KidCare coverage are ages 0-4, 35% are ages 5-11, and 45% are ages 12-18 (Figure 20).

Figure 20: Age Categories of Uninsured Children Who are Eligible for Florida KidCare



Forty percent of eligible but uninsured children are non-Hispanic white, 37% are Hispanic, and 22% are non-Hispanic black (Figure 21).

Figure 21: Race and Ethnicity of Uninsured Children Who are Eligible for Florida KidCare



12. RESPONDENT CHARACTERISTICS

The average age of the respondents was 40 years old. Eleven percent of respondents had less than a high school diploma, 17% had a high school degree or equivalent, 55% had some college education, and 17% had a BA degree or higher (Figure 22). The majority of respondents were non-Hispanic white (62%), 21% were Hispanic, and 11% were non-Hispanic black (Figure 23).

Figure 22: Respondent Educational Attainment

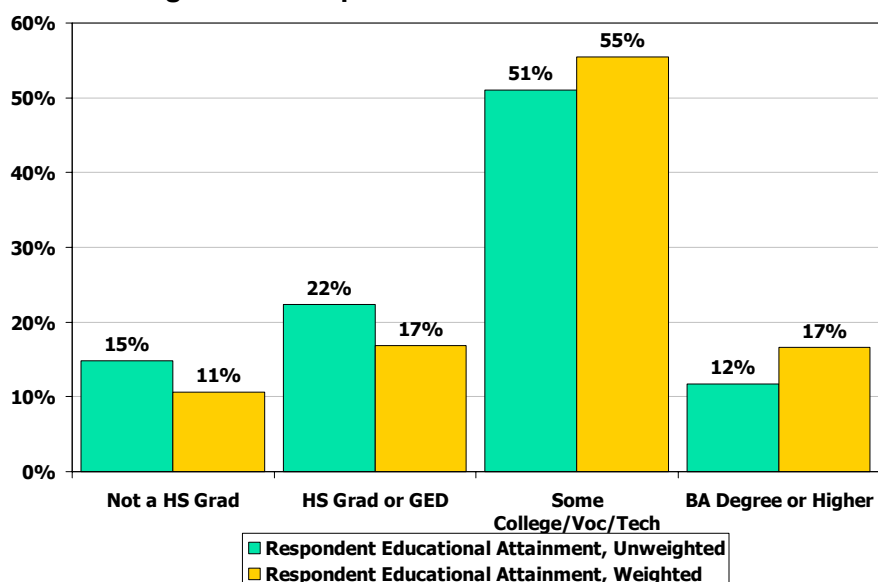
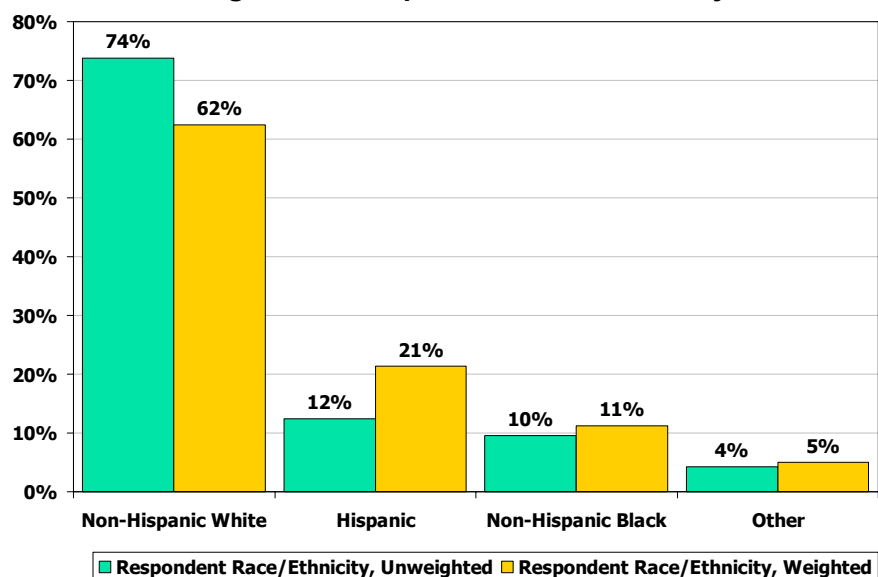


Figure 23: Respondent Race/Ethnicity



13. SUMMARY

- The overall percentage of uninsured children in Florida is 12.6% in 2007.
- Approximately 548,000 of Florida's children are currently uninsured.
- 62% of uninsured children were without health coverage for more than one year.
- The following segments of the child population are disproportionately at risk for being uninsured: children ages 12-18, Hispanic children, non-Hispanic black children, children in households below 200% of the FPL, and children whose parents are uninsured.
- Almost three-fourths of uninsured children have an employed parent in the household. However, uninsured children are more likely to have parents who are self-employed, employed part-time, or employed seasonally than insured children.
- Approximately 30% of Florida's households with children have a child with a chronic condition as identified by the CSHCN screener, and children with chronic conditions are more likely to have public coverage than children without chronic conditions.
- The majority of households of both insured and uninsured children reported that their child had a usual source of care. However, uninsured children were less likely to have a usual source of care and more likely to use the emergency room and walk-in clinics as their usual source of care than insured children.
- Overall, there is good name recognition of the Florida KidCare Program. Households with uninsured children were more likely to have learned about KidCare from their children's school or having had prior experience with the program than households without uninsured children.
- 72% of uninsured children in Florida are eligible for KidCare coverage.

NOTES

¹ Estimates of the number of households with children under age 19 in Florida were computed by June Nogle, Ph.D. (a social demographer at ICHP), using population data from the University of Florida Bureau of Economic and Business Research and the U.S. Census Bureau.

² The confidence intervals are presented for hypothetical items with uniformly distributed responses. These numbers are a “worst case” generality presented for reference purposes only.

³ Children with multiple sources of insurance coverage were assigned to mutually exclusive categories, following the approach used by the Kaiser Commission on Medicaid and the Uninsured (Schwartz, Hoffman, and Cook 2007). Because Medicaid coverage is frequently under-reported, everyone who indicates that they have Medicaid coverage is assigned to Medicaid. The assignment of health plan coverage type was assigned in the following priority: Medicaid, Title XXI programs, employment based insurance, other public coverage (including Medicare and military-related coverage), individually purchased private coverage, and other coverage.

⁴ This is somewhat different than national estimates which find that 22% of Hispanic children and 13% of Black non-Hispanic children are uninsured (Schwartz, Hoffman, and Cook 2007).

⁵ The CSHCN Screener was asked only for the child in the household with the greatest health care needs. If no children in the household had health problems, the respondent answered these questions for the child with the next birthday.

⁶ The category of “employer and self-employed” includes children who have a parent who is both self-employed and works for an employer as well as children who have one parent who is self-employed and another parent who works for an employer.

⁷ CMSN eligibility was estimated using the CSHCN screener. Children were considered eligible if they were classified as having functional limitations and required medications or if they had functional limitations and had an above-routine need for medical services.

REFERENCES

Dubay, L., J. Holahan, A. Cook. 2007. “The Uninsured and the Affordability of Health Insurance Coverage.” *Health Affairs* 26(1): w22-w30.

Schwartz, K., C. Hoffman, A. Cook. 2007. “Health Insurance Coverage of America’s Children.” Kaiser Commission on Medicaid and the Uninsured [accessed on December 7, 2007]. Available at: <http://www.kff.org/uninsured/7609.cfm>.

U.S. Census Bureau. 2007. “Income, Poverty, and Health Insurance Coverage in the United States: 2006.” Current Population Reports, P60-223 [accessed on December 7, 2007]. Available at: <http://www.census.gov/hhes/www/hlthins/hlthin06.html>.