

**Public release date: 21-Oct-2008**

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## **Although mom, dad have health insurance through work, kids may go without**

***New research to be published in the Journal of the American Medical Association finds parents often can't afford to pay extra to cover their kids***

PORTLAND, Ore. – New research at Oregon Health & Science University reveals millions of children from low- to middle-income families are going without health insurance, even when at least one parent has private health insurance through his or her employer.

"They just can't afford to insure their kids. And this scenario is not just for low-income families. We found that many middle-income families, households earning between \$24,000 and \$75,000 annually couldn't afford the cost to insure their child," said principal investigator Jennifer DeVoe, M.D., D.Phil., an assistant professor of family medicine, OHSU School of Medicine

The new study, "Uninsured Children and Adolescents With Insured Parents" will be published in the *Journal of the American Medical Association* online Tuesday, Oct. 21, at 10 a.m. EDT and in print in the Oct. 22/29 edition. This is one of the first such studies looking at the characteristics of uninsured children younger than 19 whose parents are insured.

"This study highlights the vulnerabilities of children in the current system. It shows how our health care system is not working to insure access to coverage and health care. It has become unaffordable. It is unsustainable. As a family physician, I often see patients who have health care insurance for themselves but can't afford to insure their children," said DeVoe.

"One of the motivating stories from my practice was this young mother with asthma who came to see me with bronchitis. On her way out, she apologetically asked me to examine her son's lungs. When I asked if her son had a regular doctor, her scared eyes told me – even before she said the words – that he had lost his insurance. When I asked why she had insurance and her

son did not, she told me that the cost of his coverage was more than her net earnings," DeVoe said.

DeVoe used 2002 – 2005 survey data from the Medical Expenditure Panel Survey – Household Component (MEPS-HC), which is a large-scale survey of households across the United States. The survey and also this study is supported by the Agency for Healthcare Research and Quality. Data revealed that 2 million to 3 million families have at least one insured parent and an uninsured child and that nearly 90 percent of the parents were privately insured.

Analyses of the data revealed that middle-income families were most likely to experience this discordant income pattern. DeVoe also found that families fitting this profile were more likely to be Hispanic, from single-parent families and living with parents who had less than a high school education. Higher percentages of uninsured children lived in the West and the South. It also was shown that children whose parents had public health care coverage (state or federally supported health insurance) were more likely to be insured compared with those with privately covered parents.

While some of the uninsured children could likely qualify for public insurance, many of the families appeared to fall into an income gap of earning too much for public insurance, but not enough to afford private insurance. Also, in recent qualitative studies of Oregon families, DeVoe found that parents fitting this profile may be able to pay to insure their children but can't afford to use the insurance due to unaffordable co-pays and other health care expenses, so they did not believe the cost of the health insurance was worth it.

As one parent reported: "It was insanely expensive. Per paycheck, they were (her employer health program) taking out \$200...so you have the co-pays and everything else, and by the time you are done...it's like 'where's rent, where's food, where are living expenses?'"

Another parent noted that health coverage was not accessible to single-income families: "It is almost deemed a luxury nowadays to have health insurance, which is a really sad fact."

For families who might qualify for public insurance, there are still significant barriers to gaining consistent, stable coverage. The process is often confusing and complicated.

DeVoe points out that numerous studies have established that children with insurance have more consistent access to health care services, which contributes to better health overall and higher rates of preventive services.

Nicholas Westfall, a second-year OHSU School of Medicine student, spent last summer working with DeVoe interviewing Oregon parents. During most of Westfall's childhood, his own parents could not afford health insurance for him and his siblings, despite the fact that his father worked full time as a commercial and self-employed mason.

"It was always a roller coaster as far as health insurance went. We worried every time one of us got sick. I can recall many times when one of us kids had to help pay our own health care costs. It was not fair to our parents or us. Now the situation is getting worse for many Americans. It does not seem right that a working American family cannot afford health care. This is why I am so intrigued by our state's and our country's struggle to provide adequate care for children, not to mention millions of adults without care," said Westfall.

DeVoe said her findings make her feel a sense of urgency. The short-term solution she suggests is to reduce enrollment barriers and expand eligibility for the State Children's Health Insurance Program (SCHIP) so more of these children get access to health care coverage. What is the long-term solution? DeVoe believes that the entire system has to change.

"We need to roll up our sleeves in this country and get to work reforming our system for everyone in the family."

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Other researchers on this study include: Carrie Tillotson, M.P.H., OHSU; and Lorraine Wallace, Ph.D., University of Tennessee Graduate School of Medicine, Department of Family Medicine.

To view a photo of DeVoe and to view this release online and watch a video of DeVoe talking about her research please visit:

[http://www.ohsu.edu/xd/about/news\\_events/news/devoe102108.cfm](http://www.ohsu.edu/xd/about/news_events/news/devoe102108.cfm)

This link will be available after the embargo lifts.

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more than 3,400 students and trainees. OHSU is the source of more than 200 community outreach programs that bring health and education services to every county in the state.

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