New Analysis Highlights Uncertainty and Churn in Pediatric Health Insurance Coverage in 200 Words

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The rate of uninsured children in the U.S. is at its highest point in a decade. Even short gaps in children's coverage can ruin families' finances or create delays in care. Now, a new *JAMA* analysis shows that we have to look longitudinally to get the full picture of the tremendous uncertainty and disruption, or "churn," in pediatric health insurance coverage, as well as the importance of public insurance programs for children.

The authors used a microsimulation model to estimate the proportion of children who were uninsured or covered by Medicaid or the Children's Health Insurance Program (CHIP) at any point in childhood. They estimated that 42% were uninsured at some point, while 61% were enrolled in Medicaid or CHIP. Even youth with commercial coverage through their parents' employment experienced disruptions to coverage with only 26% remaining continuously enrolled throughout childhood.

In an accompanying commentary, PolicyLab's Aditi Vasan and colleague Erica Eliason unpack the impact of this fragmented insurance landscape, and how these findings show the need for policies that support continuous coverage, such as multi-year or 12-month continuous Medicaid eligibility. They also highlight PolicyLab research showing that more working families are opting into public coverage for their children, and commercially insured children with special health care needs are more likely to be "underinsured."

Medicaid and CHIP form the backbone of pediatric health coverage. As costs for commercial family coverage rise, cuts to Medicaid and CHIP funding—combined with greater restrictions on eligibility and rolling back of early childhood continuous eligibility policies—are taking us in the wrong direction, making it harder to ensure

children have access to care they need to thrive.

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