



Louisiana Children Health Uninsured Rates Census 2019

Louisiana Budget Project
October 2020



Summary

In 2019, the United States and Louisiana continued a disturbing trend: a steady increase in the number and share of children without health insurance.

For Louisiana, this trend resulted in a child uninsured rate of 4.4% in 2019, leaving more than 50,000 kids without coverage. Nationally, the uninsured rate for children climbed to 5.7% in 2019 - an increase of about 320,000 more uninsured children nationwide. These coverage losses took place prior to the Covid-19 pandemic and during a year of low unemployment after a decade of economic growth.

The erosion in coverage comes after years of significant gains in coverage for children, including accelerated gains after the Affordable Care Act was enacted in 2014.¹ After a decade of bipartisan support and sustained effort, the Pelican State hit an historic low in both the number and rate of uninsured children in 2017 - the reference year for this report - with 36,000 children (or 3.1%) going without health insurance coverage.

Despite positive progress in expanding Medicaid eligibility in 2016 to cover low income adults, including parents, Louisiana's efforts have not been enough to counter harmful national trends.² Sustained assaults on the nation's health care policy since President Trump took office in 2016 have coincided with an erosion of hard won gains on both the national and state level.³

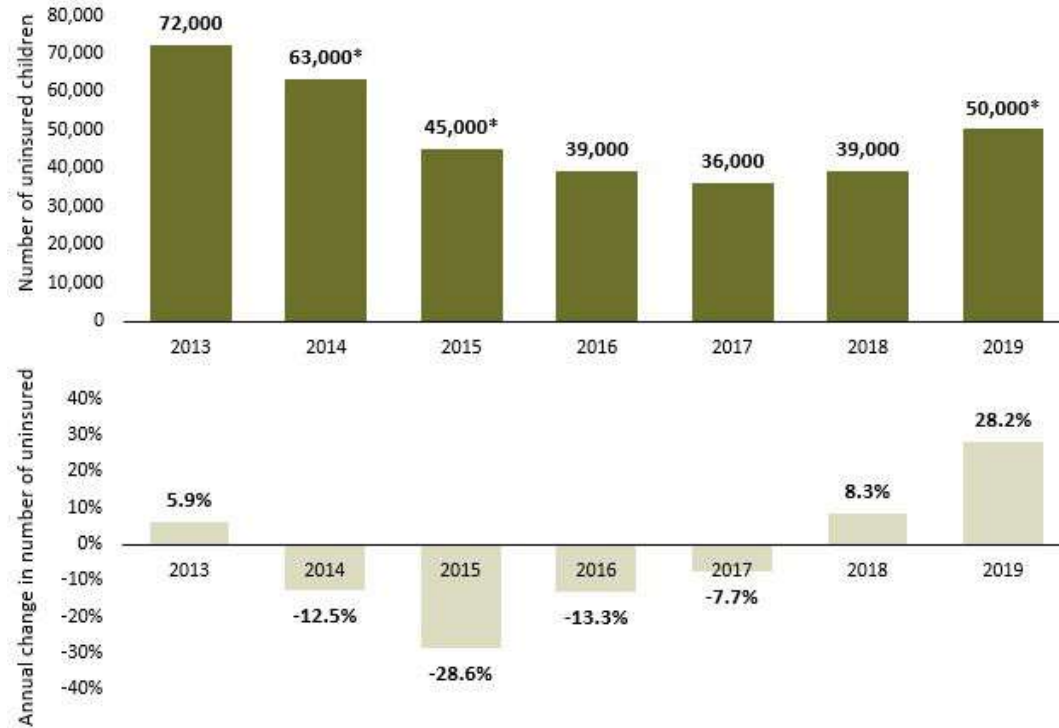
Our state has been a leader in protecting health care coverage for children in the past, and it can be again through a renewed effort to serve the youngest Louisianans.

KEY FINDINGS

- ❖ **50,000** Louisiana children were uninsured in 2019, an increase of **28.2%** or **11,000**.
- ❖ **4.4%** Louisiana children were uninsured in 2019, a full percentage point increase.
- ❖ Louisiana's **low income children** comprise the largest share of uninsured children.
- ❖ **3.8%** of Louisiana's youngest children, under 6 years, were uninsured in 2019.
- ❖ **Public health insurance** is vitally important in Louisiana where Medicaid and LaCHIP cover half of all children.

Louisiana had the largest single-year increase in number of uninsured children in over a decade

Number of uninsured children (top) and change in number of uninsured children (bottom)



Source: LBP analysis of U.S. Census Bureau, ACS, HIC-05 2008-2019. * Statistically significant change at 90% confidence level.

Louisiana's historic increase.

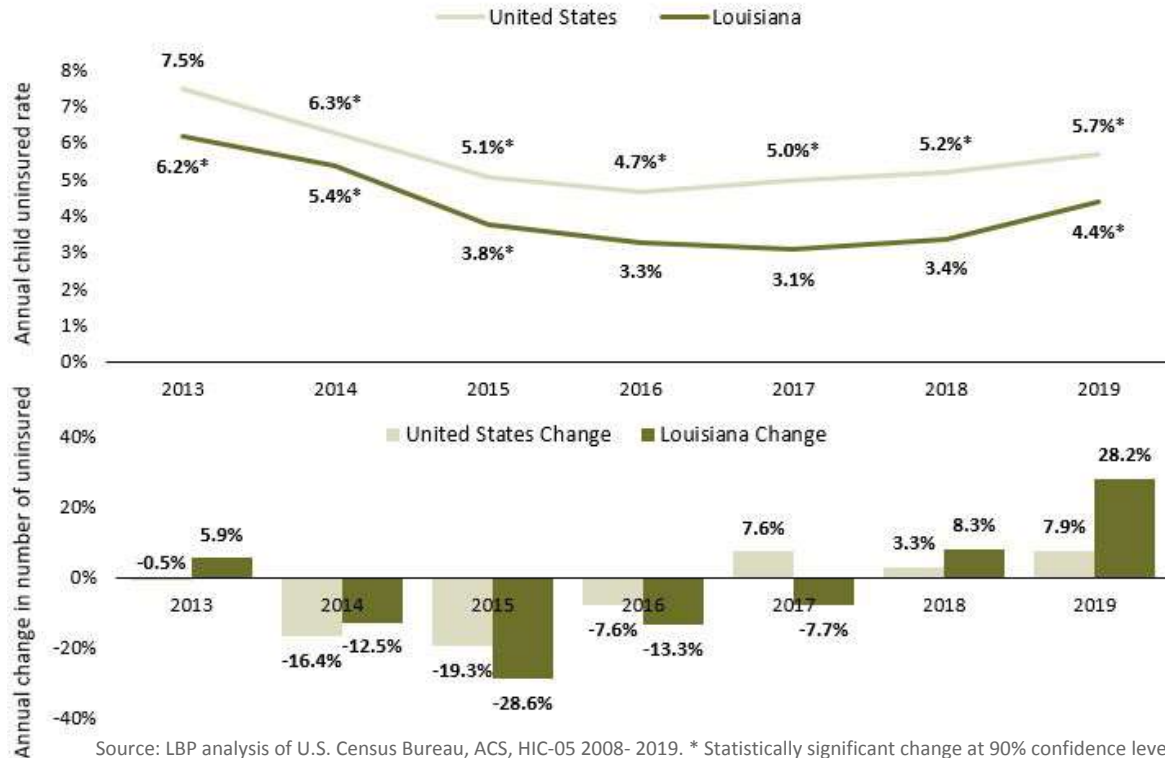
In 2019, Louisiana experienced the largest single year increase in the number of uninsured children since the U.S. Census Bureau started keeping track in 2008.

After a decade of sustained economic growth, the number of Louisiana children without health insurance rose sharply to an estimated 50,000 kids, an increase of 11,000 or 28.2% from the prior year. The state hit a historic low in 2017 at 36,000 children or 3.1%.

This historic increase means that too many families across Louisiana entered the Covid-19 pandemic without the peace of mind of knowing their children were covered with health insurance.

Long a leader in covering children with health insurance, Louisiana, like the nation, is losing ground

Annual uninsured rate (top) and year-over-year change in number of uninsured children (bottom)



Source: LBP analysis of U.S. Census Bureau, ACS, HIC-05 2008-2019. * Statistically significant change at 90% confidence level.

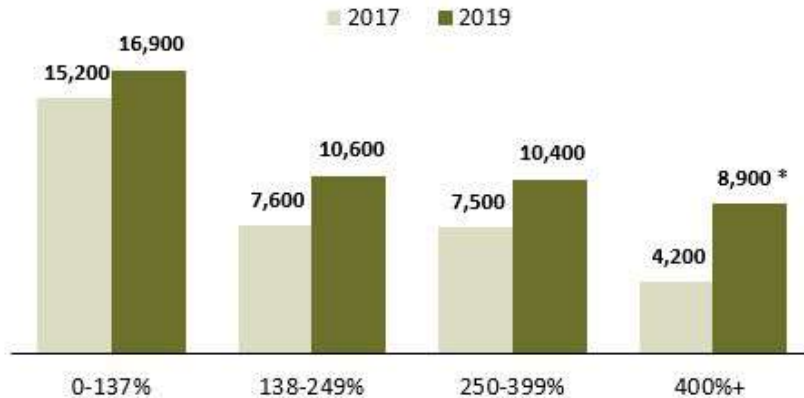
Harmful trends accelerate.

Louisiana has long been a national leader in covering children, with an uninsured rate consistently below the national average. This progress is at risk, as the gap between the national uninsured rate and Louisiana's rate has narrowed, as both continue to climb.

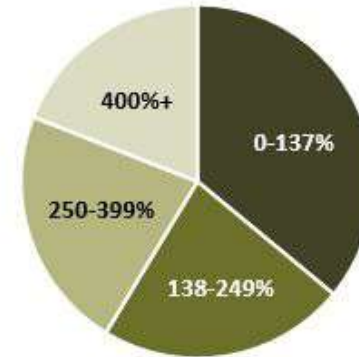
Since taking office in 2017, the Trump administration has enacted policies that have eroded coverage gains for families. These policy changes include the repeal of the Affordable Care Act (ACA) individual mandate,⁴ cuts to outreach and enrollment support for the ACA marketplace,⁵ a hostile stance toward immigrant families that has sown confusion and likely caused many in this already vulnerable population to forgo coverage,⁶ and "red tape" barriers that make it harder to enroll and remain enrolled in Medicaid and LaCHIP.⁷

Low-income children remain the largest share of Louisiana's uninsured

Number of uninsured children by Federal Poverty Level (FPL) in Louisiana



Uninsured children by FPL in Louisiana in 2019

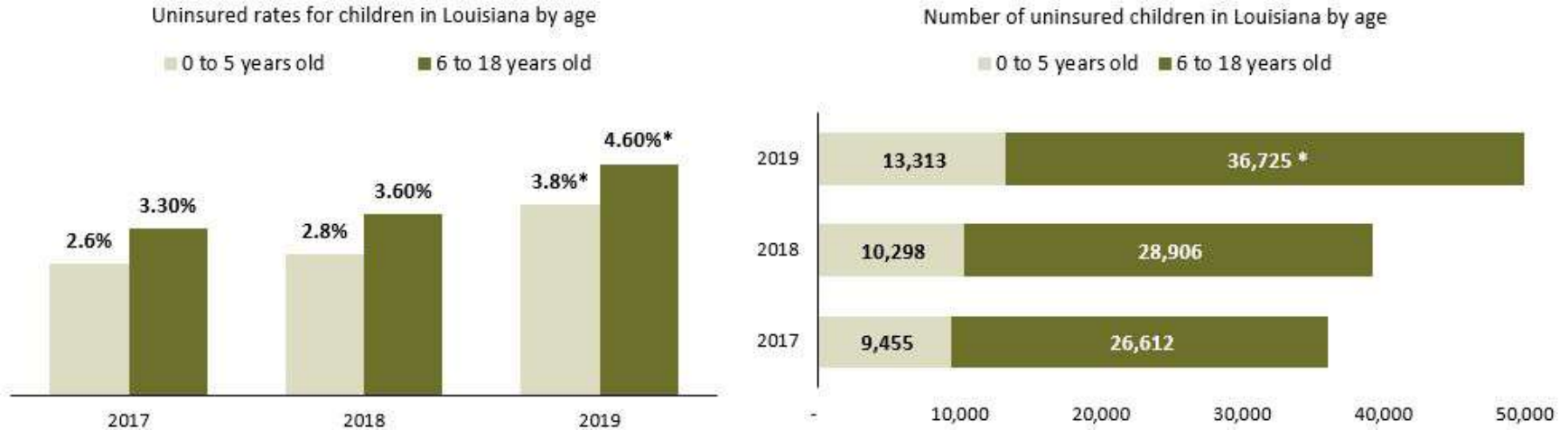


Source: Louisiana Budget Project analysis of U.S. Census Bureau, American Community Survey, 1-year (B27016) * Statistically significant change at 90% confidence level.

Poverty impacts coverage.

Louisiana's high poverty rate means public health insurance programs such as the Children's Health Insurance Program (LaCHIP in Louisiana) play a vital role in covering our children. In 2019, children in households below 250% of the federal poverty level (FPL), nearest the eligibility cut off of 255% for LaCHIP, accounted for more than half of uninsured children. While Census numbers and CHIP eligibility criteria are not a direct match, these numbers are consistent with estimates of eligible and unenrolled children.⁸ Louisiana could likely cut its child uninsured rate in half by ensuring that all LaCHIP eligible children were enrolled. Children in more affluent households - those earning above 400% FPL - saw a large increase in the number of uninsured children between 2017 and 2019; they continue to comprise the smallest share of uninsured children. (See Methodology for more information.)

The share and number of uninsured children increased for both young and school-aged children



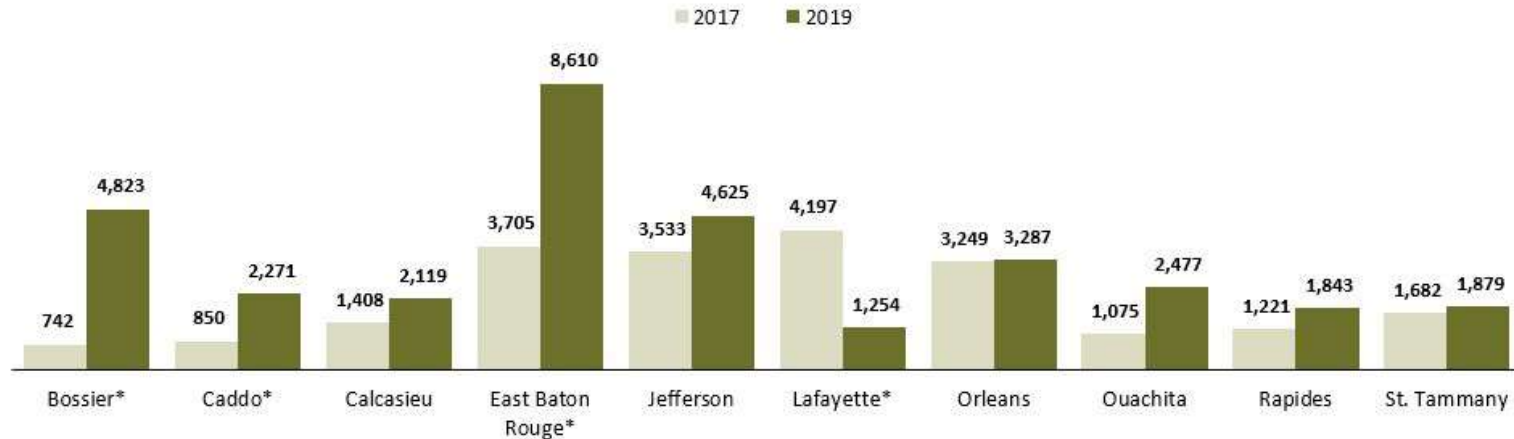
Source: Louisiana Budget Project analysis of U.S. Census Bureau, American Community Survey, 1- year (S2701). * Statistically significant change at 90% confidence level.

Louisiana's youngest residents, children under 6, are losing ground, too.

This vulnerable population saw an increase in both their uninsured rates and number of uninsured children. Unfortunately, the number of uninsured children is increasing at a slightly faster pace for children under 6 (41% from 2017 to 2019) than for school-age children (38% from 2017 to 2019). These early developmental years provide an opportunity to set children up for success throughout life by connecting them with health care providers early and raising the likelihood that any health-related issues are diagnosed and treated early.

Uninsured children live in all areas of Louisiana, while some regions saw larger increases

Number of uninsured children by parish in Louisiana for 2017 and 2019



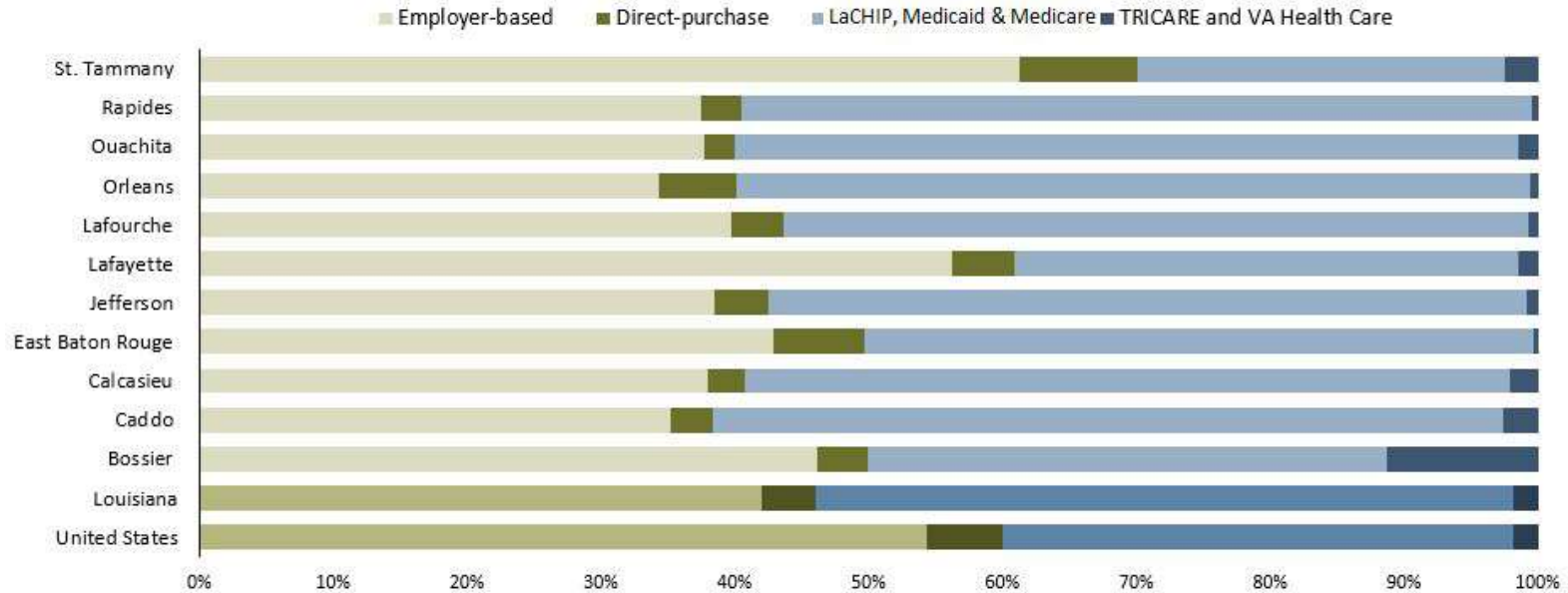
Source: Louisiana Budget Project analysis of U.S. Census Bureau, American Community Survey, 1- year (B27010) * Statistically significant change from 2017 to 2019 at 90% confidence level.

The number of uninsured children spiked in several of the largest parishes in the state.

Where a child lives in Louisiana may impact how likely they are to have health insurance. Bossier, Caddo and East Baton Rouge parishes saw large and significant increases in the number of uninsured children from 2017 to 2019. Orleans and St. Tammany have maintained relatively stable numbers of uninsured, with an uninsured rates also below the state average. Lafayette was the only parish to show a decrease in the number of uninsured children between 2017 and 2019. (See Methodology for more information on parish-level data.)

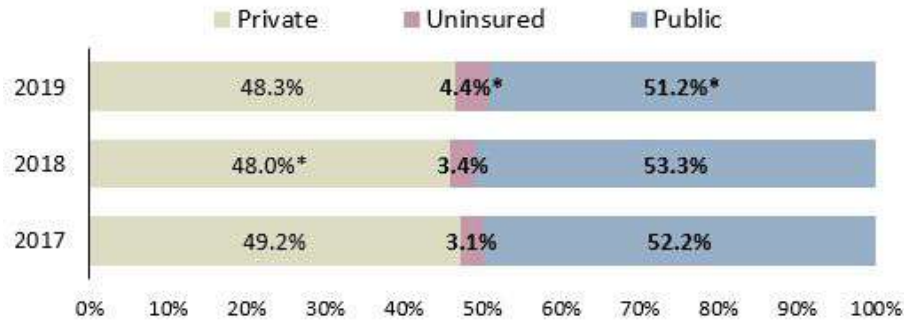
More than half of Louisiana children are covered by Medicaid though parishes vary on sources of health insurance coverage

Source of coverage for children with a single source of insurance, which accounts for more than 93% of all insured children



Source: Louisiana Budget Project analysis of U.S. Census Bureau, American Community Survey, 1- year (B27010). See Methodology for more information on Medicaid undercount.

Losses in public and private health insurance coverage contribute to growing uninsured rate
Source of health insurance coverage for children in Louisiana



Source: Louisiana Budget Project analysis of U.S. Census Bureau, American Community Survey, HIC-05.
* Statistically significant change at 90% confidence level.

Public health insurance plays a vital role.

Decreases in both private and public health-insurance rates contributed to the rise in uninsured rates. Amid a rise in uninsured rates, Louisiana's children's enrollment in Medicaid and LaCHIP decreased 6.6% from 2018 to 2019. While sources of insurance vary among the state's largest parishes, public health insurance options, including Medicaid, LaCHIP and TRICARE continue to play a vital role.

Conclusion

Louisiana, like the nation, has seen an erosion in health insurance coverage rates for children over the past few years. This trend is reversible.

Health insurance coverage is vital for healthy families and healthy communities. It is an essential pre-condition for children to get the early care they need to thrive - both now and in the future. Research shows that being insured leads to better health, education and economic outcomes.⁹

The COVID-19 pandemic and ensuing economic downturn have only made matters worse for families and children - especially families of color.¹⁰ It will be some time before we know the full extent of the impact on children health insurance coverage, but we can assume it has not been positive.

Our state has been a leader in protecting health care coverage for children in the past, and it can be again through a renewed commitment to ensuring that all children have high quality, affordable, and comprehensive health coverage to give them the best start in life.

Methodology

The data in this report is based on the U.S. Census Bureau's annual American Community Survey (ACS), which is published each September.

Age: In 2017, the Census updated the “child” age category in this survey from Under 18 to Under 19. The Health Insurance Historical (HIC) Tables were updated to reflect the change in data for 2016 and earlier making historical comparisons possible. However, the B-Series and S-Series were not updated and historical comparisons should not be made prior to 2017 except in the case of the “under 6” category which was unaffected by the update.

Geography: The estimates at the parish level are based on all Louisiana parishes for which data is available. Single year estimates are available for geographic areas of 65,000 or more. Due to the relatively small sample size at the parish level, the data has high coefficients of variation ranging from 15 to 60 at the parish level. Despite the high level of uncertainty inherent in these small sample sizes, parish level data is included in this report as the most accurate and current data available.

Poverty: The number of uninsured children by federal poverty level is based on the number of children for whom poverty levels may be determined. Therefore, the total number of uninsured children by FPL is slightly lower than for all children. The Census' definition of income varies considerably from how state Medicaid and CHIP programs measure income for purposes of determining eligibility including differences in how income is counted, household size is determined, and other factors. The FPL estimates should not be used as a direct match for Medicaid eligibility.

Source of coverage: ACS data does not correct for the Medicaid “undercount” that is found when comparing survey data to state administrative data; so, there is likely a higher level of public health insurance coverage than reported.



Related LBP Reports

This report is the latest in a series of publications based on the Census Bureau data release this fall. Related LBP publications in the series include:

- ❖ “Poverty in Louisiana: Census 2019” a chart book on poverty and income, and
- ❖ “Louisiana loses ground on uninsured rate along with the nation,” a policy brief on overall health insurance coverage in Louisiana in 2019.

These and many other LBP publications may be found on our website at labudget.org.

1. Alker, J. and Pham, O., “Nation’s Uninsured Rate for Children Drops to Another Historic Low in 2016,” Georgetown University Center for Children and Families, October 2017, <https://ccf.georgetown.edu/2017/10/22/nationwide-rate-of-uninsured-children-reaches-historic-low/#:~:text=Nationwide%2095.5%20percent%20of%20children,the%20ACA%20was%20fully%20implemented>
2. Roy, S., Wilson, F., Chen, Li-Wu, Kim, J., and Yu, F. “The Impact of Medicaid Expansion for Adults Under the ACA on Preventive Care for Children Evidence From the Southern United States” September 10, 2020, https://journals.lww.com/lww-medicalcare/Abstract/9000/The_Impact_of_Medicaid_Expansion_for_Adults_Under.98272.aspx
3. Alker, J. and Corcoran, A., “Children’s Uninsured Rate Rises by Largest Annual Jump in More Than a Decade,” Georgetown University Center for Children and Families, October 2020, <https://ccf.georgetown.edu/2020/10/08/childrens-uninsured-rate-rises-by-largest-annual-jump-in-more-than-a-decade-2/>
4. Congressional Budget Office, “Federal Subsidies for People Under Age 65: 2019 to 2029,” May 2019, available at: <https://www.cbo.gov/system/files/115th-congress-2017-2018/reports/53826-healthinsurancecoverage.pdf>.
5. Centers for Medicaid and Medicare (CMS) “Trends in Subsidized and Unsubsidized Enrollment,” August 12, 2019, available at: <https://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/Trends-Subsidized-Unsubsidized-Enrollment-BY17-18.pdf>
6. Halye, J., Kenney, G., Bernstein, H., and Gonzalez, D., “One in Five Adults in Immigrant Families with Children Reported Chilling Effects on Public Benefit Receipt in 2019,” Urban Institute, June 18, 2020, <https://www.urban.org/research/publication/one-five-adults-immigrant-families-children-reported-chilling-effects-public-benefit-receipt-2019>
7. Brooks, T., Park, E., and Roygardner, L., “Medicaid and CHIP Enrollment Decline Suggests the Child Uninsured Rate May Rise Again,” Georgetown University Center for Children and Families, May 2019, <https://ccf.georgetown.edu/2019/05/28/medicaid-andchip-enrollment-decline/>; Brooks, T., “Child Enrollment in Medicaid and CHIP Remains Down in 2019,” Georgetown University Center for Children and Families, SayAhh! Blog, February 18, 2020, available at: <https://ccf.georgetown.edu/2020/02/18/child-enrollment-in-medicaidand-chip-remains-down-in-2019/#:~:text=As%20of%20October%202019%2C%20the,enrollment%20data%20posted%20by%20CMS>.
8. Haley, J., Kenney, G., Wang Pan, C., Wang R., Lynch, V., and Buettgens, M., “Progress in Children’s Coverage Continued to Stall Out in 2018,” Urban Institutes, October 1, 2020, <https://www.urban.org/research/publication/progress-childrens-coverage-continued-stall-out-2018>
9. Wagnerman, K., Chester, A., and Alker, J., “Medicaid Is A Smart Investment in Children,” Georgetown University Center for Children and Families, March 2017, available at: <https://ccf.georgetown.edu/wp-content/uploads/2017/03/MedicaidSmartInvestment.pdf>.
10. Butkus, N. “Race, unemployment and COVID-19 in Louisiana” Louisiana Budget Project, June 17, 2020, available at: <https://www.labudget.org/2020/06/race-unemployment-and-covid-19-in-louisiana/>



Louisiana Budget Project

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The Louisiana Budget Project (LBP) monitors and reports on public policy and how it affects Louisiana's low- to moderate-income families. We believe that the lives of Louisianans can be improved through profound change in public policy, brought about by: creating a deeper understanding of the state budget and budget-related issues, looking at the big picture of how the budget impacts citizens, encouraging citizens to be vocal about budget issues that are important to them, and providing insight and leadership to drive the policy debate.

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