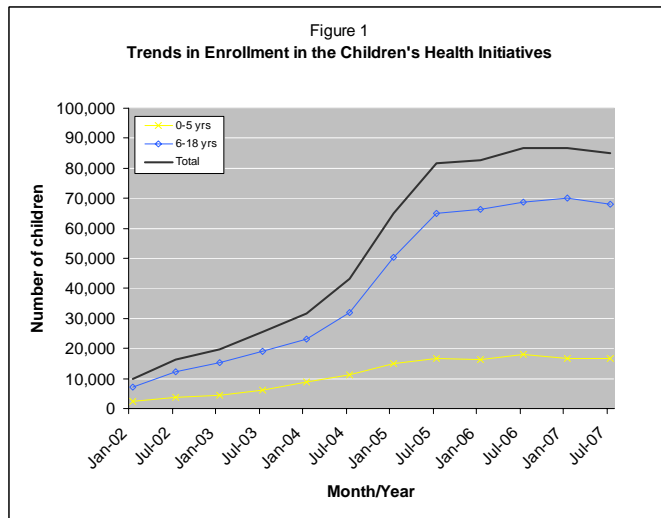


**THE IMPACT OF HEALTHY KIDS ON ACCESS,
HEALTH STATUS AND COSTS**

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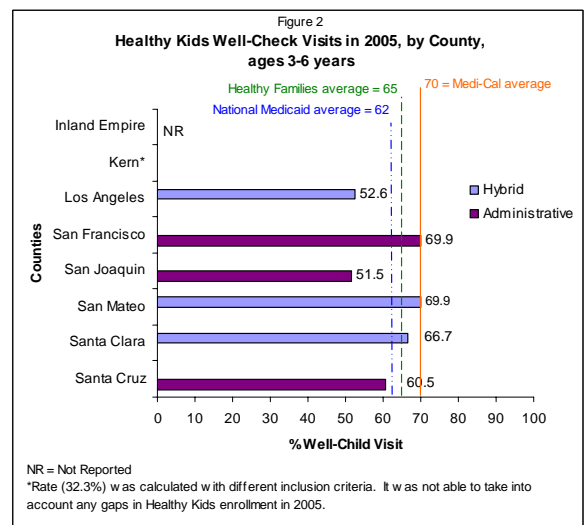
Several California counties have formed Children's Health Initiatives (CHIs) and designed locally-funded and operated health insurance programs known as Healthy Kids. As of July 2007, Healthy Kids programs have collectively covered more than 86,000 children in 22 of California's most populous counties (Figure 1).



Healthy Kids programs have improved access to health care services including preventive care.

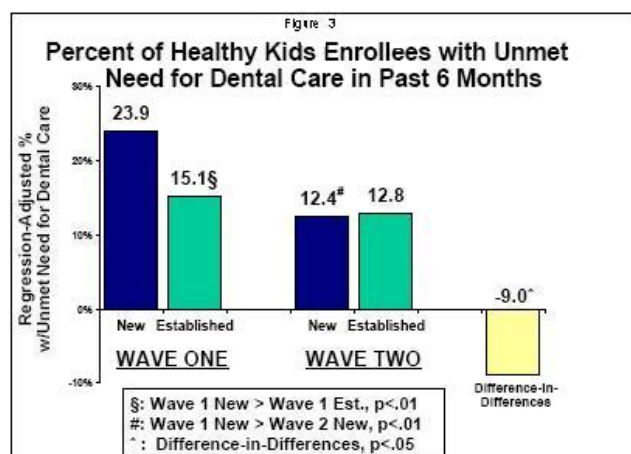
- The Healthy Kids program delivers preventive care at rates similar to other public programs (Figure 2). Children ages 3-6 years who were enrolled in six county Healthy Kids programs in 2005 received a Well-Child check at rates (range: 53% to 70%) similar to Medi-Cal (70%) and Healthy Families enrollees (65%).ⁱ
- Over two-thirds of Healthy Kids enrollees in Los Angeles and other counties made a preventive health visit within six months of enrollment.^{i, ii}

- In Los Angeles County the percent of children enrolled in Healthy Kids programs with a usual source of medical care increased by 14.7 percentage points after enrollment.ⁱⁱ
- In San Mateo, 88% of Healthy Kids participants reported having a usual source of care and 70% of parents reported being very satisfied with care received.ⁱⁱⁱ
- Nearly three quarters of Healthy Kids enrollees in Los Angeles had made an ambulatory care visit in the previous six months, significantly higher than in the period before enrollment.ⁱⁱ
- 16% of children ages 0-5 and 9% of adolescents ages 6-18 years, enrolled in Healthy Kids programs visited the emergency department in 2005. Emergency department use for those enrolled in Healthy Kids was lower in both age groups compared to Medi-Cal (38% and 24%, respectively) and Healthy Families (27% and 18%, respectively) in these same counties.ⁱ
- Insured children are substantially less likely to use the emergency department as a usual source of care compared to uninsured children (1% vs. 8%).^{iv}



Healthy Kids programs have improved access to needed dental care.

- Nearly all children who had a dental visit in the eight central California CHIs received diagnostic (88%) and preventive (83%) dental services and about half (49%) received some type of restorative dental care (fillings).^v
- The percent of Healthy Kids enrollees in Los Angeles with dental care increased by 14.4 percentage points after enrollment. The percent of Healthy Kids enrollees in Los Angeles with a usual source of dental care increased by 27.5 percentage points after enrollment.ⁱⁱ
- Unmet need for dental care decreased by 9.0 percentage points for Los Angeles Healthy Kids enrollees (Figure 3).ⁱⁱ
- In all age groups in 2005, CHIs reported dental use rates far above the national Medicaid averages. Healthy Kids enrollees 4-6 years of age had a dental visit at rates of 56 to 86%, compared to the national Medicaid average of 46%.ⁱ



Healthy Kids programs have had a positive impact on children's health status.

- In Santa Clara County, children who were continuously insured by Healthy Kids for one year were significantly less likely to be in fair/poor health and to have functional impairments than the group of newly insured children (15.9% vs. 28.5% and 4.5% vs. 8.4%, respectively).^{vi}

CHIs have had other benefits to families and communities including schools.

- For children with special health care needs, those with health insurance had significantly fewer missed school days (by 35%).^{vii}
- A child's health coverage reduces the number of days parents have to miss work because of a sick child. Among families with children with special health care needs, an average of 41% of parents with an uninsured child missed days at work or stopped work to care for the child compared to 26% of parents with an insured child.^{iv}

CHIs have helped reduce unnecessary hospitalization and save health care costs.

- Healthy Kids programs have reduced hospitalizations by 2% for preventable conditions such as asthma, pneumonia, urinary tract infections, over a seven year period compared to counties without CHIs.^{viii}
- Healthy Kids programs have prevented as many as 1,000 hospitalizations among children in California
- If Healthy Kids had been operational statewide, an additional 4,300 hospitalizations might have been prevented in California over the past seven years.^{viii}
- CHIs are saving the state over \$6.7 million in hospital costs. If implemented in other counties as well, the savings could be an additional \$30.1 million.^{viii}

ⁱ Feifer C, Arpawong TE, Nascimento LM, Stevens GD, Cousineau MR. Outcomes from Children's Health Initiatives in California. USC Center for Community Health Studies, March 2007.

ⁱⁱ Howell E, Dubay L, Palmer L. The Impact of the Los Angeles Healthy Kids Program on Access to Care, Use of Services, and Health Status. The Urban Institute, July 2007.

ⁱⁱⁱ Howell EM, Hughes D, Kenney GM, Sullivan J, Rubenstein J. Evaluation of the San Mateo County Children's Health Initiative, Second Annual Report. The Urban Institute, August 2005.

^{iv} Cousineau MR, Stevens GD, Arpawong TE, Raffi E, Chen A. The Association of Children's Health Insurance with Health Care Access, Outcomes, and Cost. USC Center for Community Health Studies, July 2007.

^v Phipps K and Diring J. Dental Utilization in Eight Central California Children's Health Initiatives' Healthy Kids Programs. California HealthCare Foundation, December 2006.

^{vi} Howell EM and Trenholm C. The Effect of New Insurance Coverage on the Health Status of Low-Income Children in Santa Clara County. Health Services Research. April 2007;42(2):867-889.

^{vii} Denboba D, McPherson MG, Kenney MK, Strickland B, Newacheck PW. Achieving family and provider partnerships for children with special health care needs. Pediatrics. 2006 Oct;118(4):1607-15.

^{viii} Cousineau MR, Stevens GD, Pickering T. Preventable Child Hospitalizations in California Counties with Child Health Insurance Expansion Initiatives. USC Center for Community Health Studies, July 6, 2007.