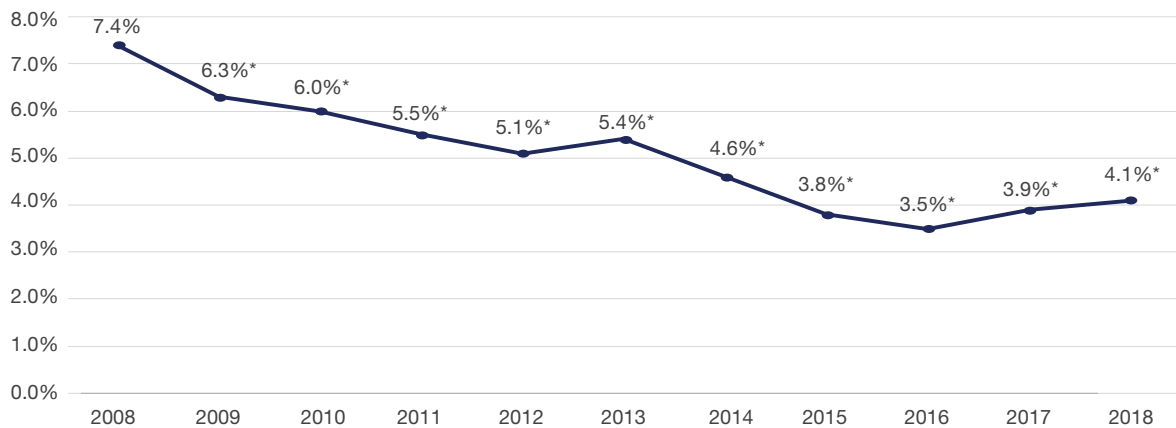




Rate of Uninsured Infants and Toddlers on the Rise

The percentage of infants and toddlers without health insurance is growing. The overall rate of uninsured children under 3 increased significantly for the first time in several years, growing from 3.5 percent in 2016 to 4.1 percent in 2018 (see Figure 1). This trend mirrors the national increase in the uninsured rate for all children under 19, as well as children under 6. Both groups showed statistically significant increases during the same two-year period.¹

Figure 1. Rate of Uninsured Children under 3, 2008-2018



Source: Georgetown University Center for Children and Families analysis of the U.S. Census 2008-2018 American Community Survey (ACS) data using Integrated Public Use Microdata (IPUMS) via usa.ipums.org/usa.

* Change is significant at the 90% confidence level and relative to the prior year indicated.

Seven states showed the fastest growth in uninsured infants and toddlers between 2016 and 2018 (see Table 1).² Available³ data from the 40 remaining states show no statistically significant increase or decrease during the two-year period.

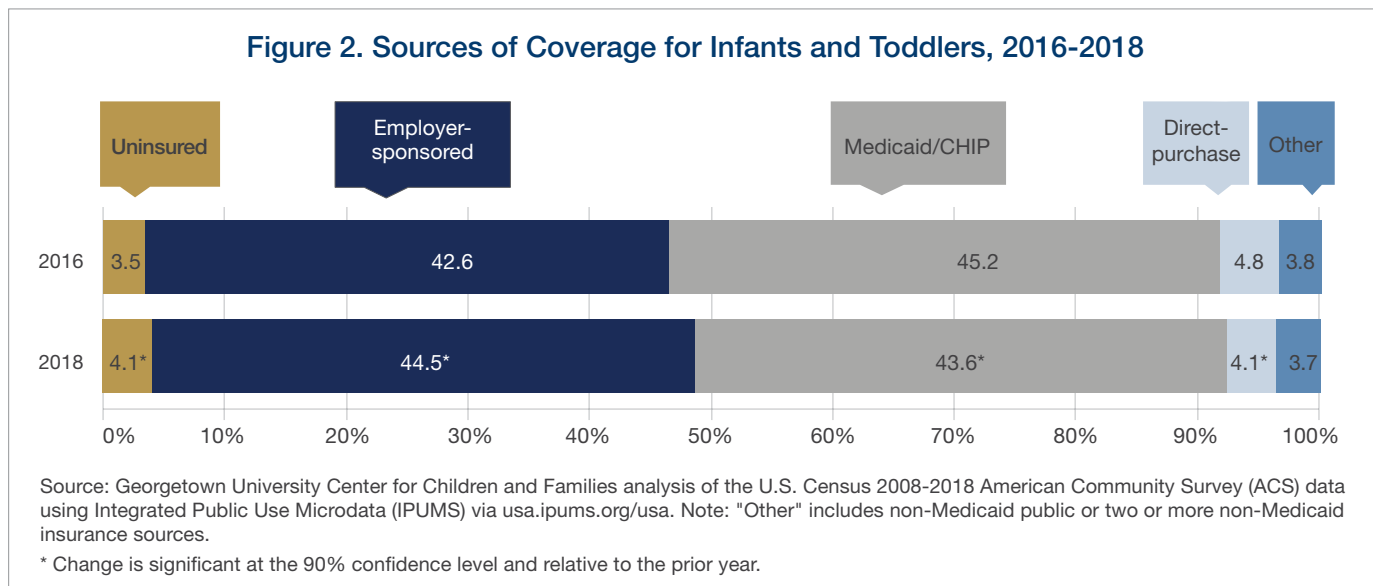
Table 1. States with Statistically Significant Two-Year Change in the Rate of Uninsured Infants and Toddlers

State	2016 Percent of Uninsured Children Under 3	2018 Percent of Uninsured Children Under 3	2016 - 2018 Percentage Point Change
United States	3.5	4.1	0.6
Georgia	5.4	7.0	1.6
Illinois	1.9	3.0	1.1
Kentucky	2.1	4.0	1.9
Ohio	3.4	5.0	1.6
Texas	6.2	7.5	1.3
Washington	1.2	1.9	0.7
Wisconsin	2.6	4.5	1.9

Source: Georgetown University CCF analysis of the 2008-2017 Integrated Public Use Microdata Series (IPUMS) American Community Survey data.

Note: Change is significant at the 90% confidence level.

The share of children under age 3 covered by Medicaid also declined significantly between 2016 and 2018, adding a troubling dimension to the nation’s first backslide in children’s coverage in many years (see Figure 2). Medicaid coverage declines are also reflected in state-level child enrollment data.⁴



Health care coverage losses for infants and toddlers are particularly troubling given the need for stable access to health care during the early years, when a child’s brain develops most rapidly. Consistent coverage helps to ensure that children receive regular check-ups, immunizations and developmental screenings that set them on the path for healthy development.

Given the rapid pace of development in the earliest years of life, the American Academy (AAP) of Pediatrics recommends more frequent well-child visits for younger children compared to pre-school and school-aged children. The AAP’s *Bright Futures* guidelines recommends 12 well-child visits before age 3 to identify and prevent or mitigate developmental delays or preventable diseases before they worsen.⁵

When uninsured young children miss out on these well child visits, their families also miss out on the opportunity to connect with other support systems. Well-child visits offer one of the few opportunities to systematically reach young children and their families before they enter kindergarten and connect families with needed preventive services or supports.⁶ Addressing preventable delays and conditions early can improve health outcomes and school readiness in the short term, and has the potential to reset a child’s trajectory toward lifelong healthy development and success in school and life.

Methodology: Data suppression rules were applied to portions of this analysis to strengthen reliability, leaving some states out. For more information about the methodology, visit <https://ccf.georgetown.edu/2020/03/31/rate-of-uninsured-infants-and-toddlers-on-the-rise>.

¹ J. Alker, O. Pham, "Nation's Progress on Children's Health Coverage Reverses Course," Center for Children and Families (November 2018), available at <https://ccf.georgetown.edu/2018/11/21/nations-progress-on-childrens-health-coverage-reverses-course/>. Also see E.W. Burak, M. Clark, L. Roygardner, "Nation's Youngest Children Lose Health Coverage at an Alarming Rate," Center for Children and Families (December 2019), available at <https://ccf.georgetown.edu/2019/12/09/nations-youngest-children-lose-health-coverage-at-an-alarming-rate/>.

² Source: Georgetown University CCF analysis of the 2008-2017 Integrated Public Use Microdata Series (IPUMS) American Community Survey data.

³ Data suppression rules were applied to portions of this analysis to strengthen reliability, leaving some states out of the analysis. See methodology for more information.

⁴ American Academy of Pediatrics and Bright Futures, "Recommendations for Preventative Pediatric Health" (Elk Grove, IL: American Academy of Pediatrics, February 2017), available at https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf.

⁵ T. Brooks, E. Park, L. Roygardner, "Medicaid and CHIP Enrollment Decline Suggests the Child Uninsured Rate May Rise Again," Center for Children and Families (May 2019), available at <https://ccf.georgetown.edu/2019/05/28/medicaid-and-chip-enrollment-decline/>.

⁶ E. Burak, "Promoting Young Children's Healthy Development in Medicaid and the Children's Health Insurance Program (CHIP)" (Washington: Georgetown University Center for Children and Families, October 2018), available at <https://ccf.georgetown.edu/2018/10/17/promoting-young-childrens-healthy-development-in-medicaid-and-the-childrens-health-insurance-program-chip/>.