



# Children's Health Coverage Rate Now at Historic High of 95 Percent

by Joan Alker and Alisa Chester

## Key Findings

- The share of children with health insurance coverage improved to a **historic high rate of 95.2 percent in 2015**. Between 2013 and 2015, approximately 1.7 million children gained coverage—largely through Medicaid and the Children's Health Insurance Program (CHIP). By contrast, employer-sponsored coverage for children remained stable from 2013 to 2015. This time period coincided with implementation of the major provisions of the Affordable Care Act (ACA).
- **These coverage gains were widespread across age, income, race, and ethnicity.** American Indian/Alaska Native children, Hispanic children, and children with family income between 100 and 200 percent of the Federal Poverty Level continue to have the highest rates of uninsurance, but all groups of children saw improvements between 2013 and 2015.
- **Forty-one states saw improvements in coverage rates, with only one state, Wyoming, moving backwards during this period.** California saw the largest decline in the number of uninsured children. Half of all remaining uninsured children in the United States live in the South—almost one in five live in Texas.

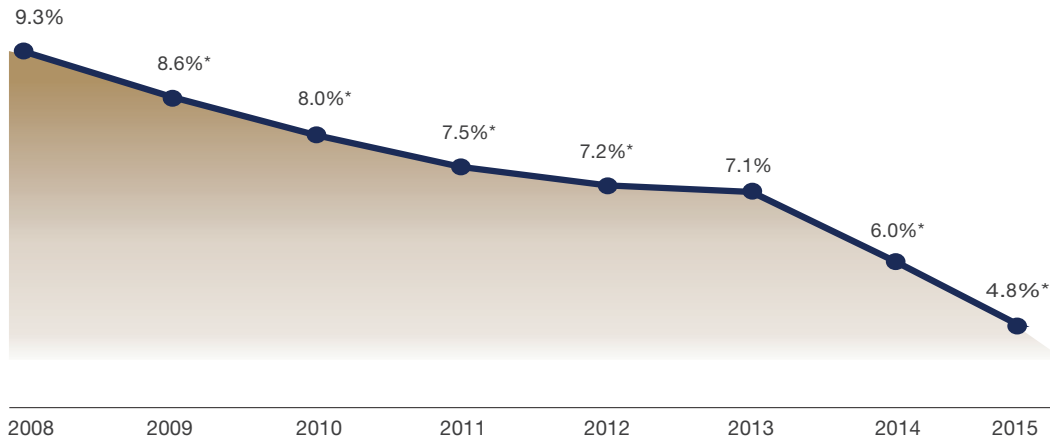
## Children's Health Coverage and the Affordable Care Act

Recently released data from the U.S. Census Bureau examining health insurance coverage rates in 2015 find that, for the period 2013-2015, children's uninsured levels experienced the largest two-year decline on record; this decline coincided with the implementation of most of the provisions of the Affordable Care Act.<sup>1</sup> The U.S. saw the rate of uninsured children decline from 7.1 percent to 4.8 percent during this time period (See Figure 1).<sup>2</sup> Many studies have concluded that the recent large declines in uninsurance are attributable to the Affordable Care Act.<sup>3</sup> The number of uninsured children in the U.S. has been cut almost in half since 2008, a time period when both the Children's Health Insurance Program Reauthorization Act (CHIPRA) and the Affordable Care Act were enacted.

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**Figure 1. Rate of Uninsured Children, 2008-2015**



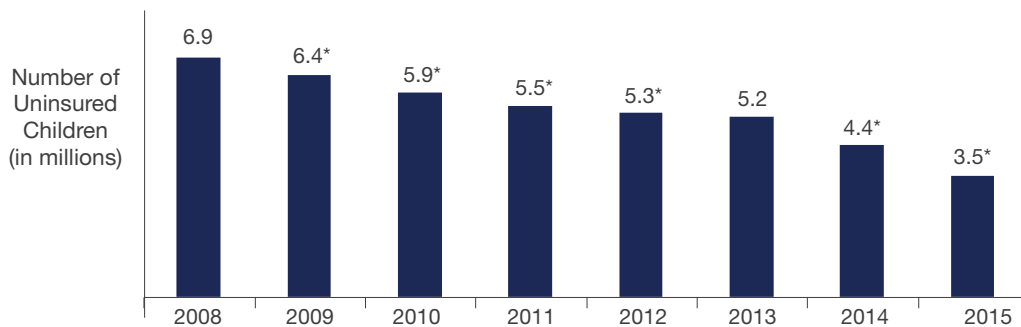
\* Change is significant at the 90% confidence level. 2013 was the only year that did not show a significant one-year decline in the national rate of uninsured children. The Census began collecting data for the health insurance series in 2008, therefore there is no significance available for 2008

Coverage gains were widespread across all parts of the country, with 41 states showing a statistically significant decline in the percent of uninsured children, one state (Wyoming) showing an increase, and nine states seeing no significant change (most of these states saw a decline, but it was not statistically significant). Coverage improvements also affected children of all ages, races, ethnicities, and income levels. However, some groups of children are disproportionately represented among the

uninsured (older children, Hispanic children, and those living in the South).

The number of uninsured children in the U.S. declined by almost one-third (32.5 percent) during this two-year period, dropping from 5.2 million in 2013 to 3.5 million in 2015. This means that 1.7 million children gained health coverage during the period that the major coverage provisions of the Affordable Care Act (ACA) were implemented.

**Figure 2. Number of Uninsured Children in the United States, 2008-2015**



\* Change is significant at the 90% confidence level. 2013 was the only year that did not show a significant one-year decline in the national rate of uninsured children. The Census began collecting data for the health insurance series in 2008, therefore there is no significance available for 2008



Children’s uninsurance rates have been declining over the past 30 years as a result of a phased-in expansion of Medicaid to all children below the poverty level in the 1980s and the creation of CHIP in 1997. The Affordable Care Act built on this progress by ensuring that states’ maintained their children’s coverage level.<sup>4</sup> However, in 2013, children’s coverage rates stagnated. The historic improvement for children between 2013 and 2015 is no doubt due largely to the impact of the Affordable Care Act. Some provisions affecting children were phased in over the course of 2014 and 2015,<sup>5</sup> and some of the early kinks in enrollment and

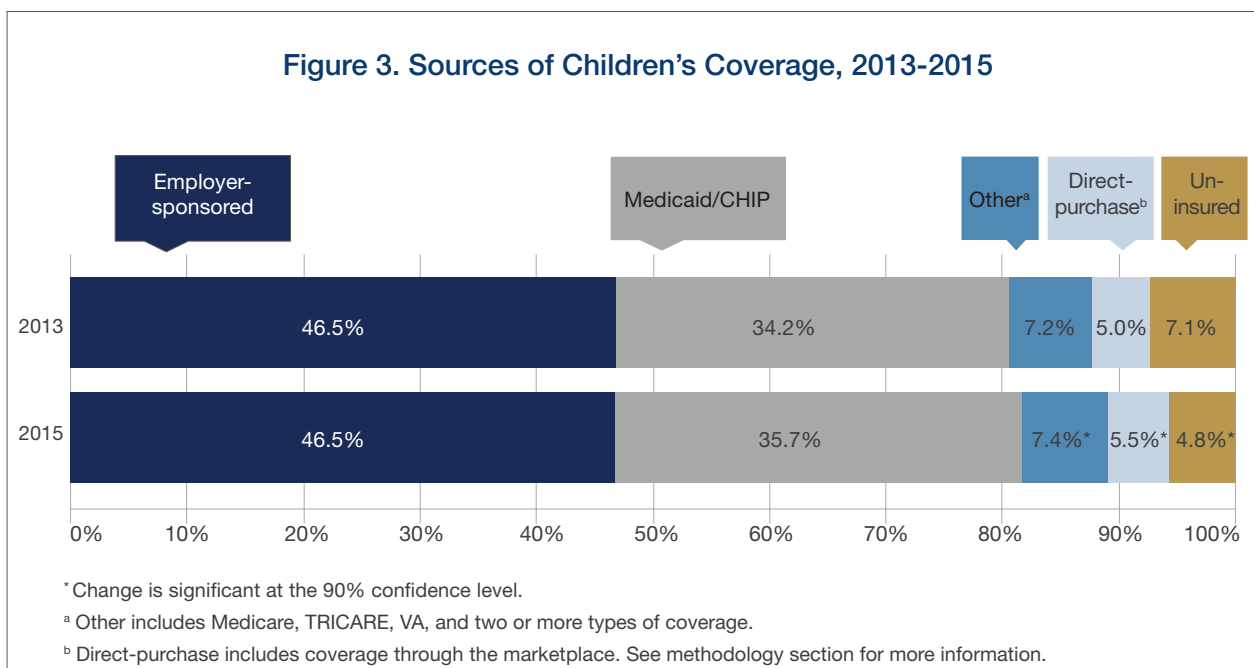
technology associated with the new coverage marketplaces were ironed out during this period.

As public programs mature, enrollment can be expected to increase.<sup>6</sup> This may explain the strong continuation of the positive trend that we observed in last year’s report, which analyzed data from 2013 to 2014.<sup>7</sup> Parent uninsured rates have declined significantly since enactment of the ACA, and this improvement is likely reflected in improved children’s uninsured rates as well.<sup>8</sup> Research has shown that extending new coverage to parents results in more children obtaining coverage.<sup>9</sup>

## Employer Coverage Remained Stable during This Period

A major question raised by the advent of the ACA was how the new law would affect the mix of coverage sources—i.e., employer-sponsored versus public coverage. Employer-sponsored coverage remains the largest single source of coverage for all children; for low-income children, with family income below 200 percent of the Federal Poverty Level (FPL), Medicaid and CHIP continue to be the largest source of coverage. Employer-sponsored insurance was stable during the two-year period examined. Medicaid/CHIP coverage grew from 34.2 percent to 35.7 percent from 2013 to 2015.

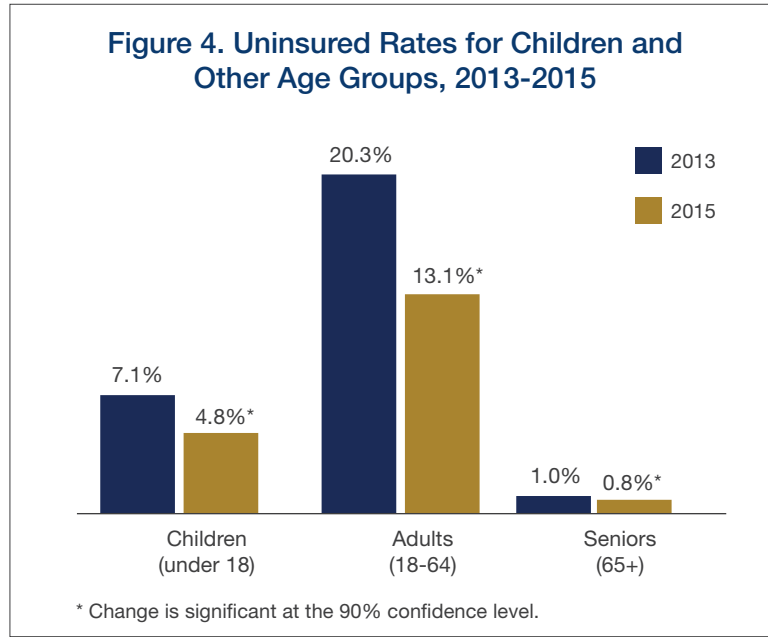
**Figure 3. Sources of Children’s Coverage, 2013-2015**





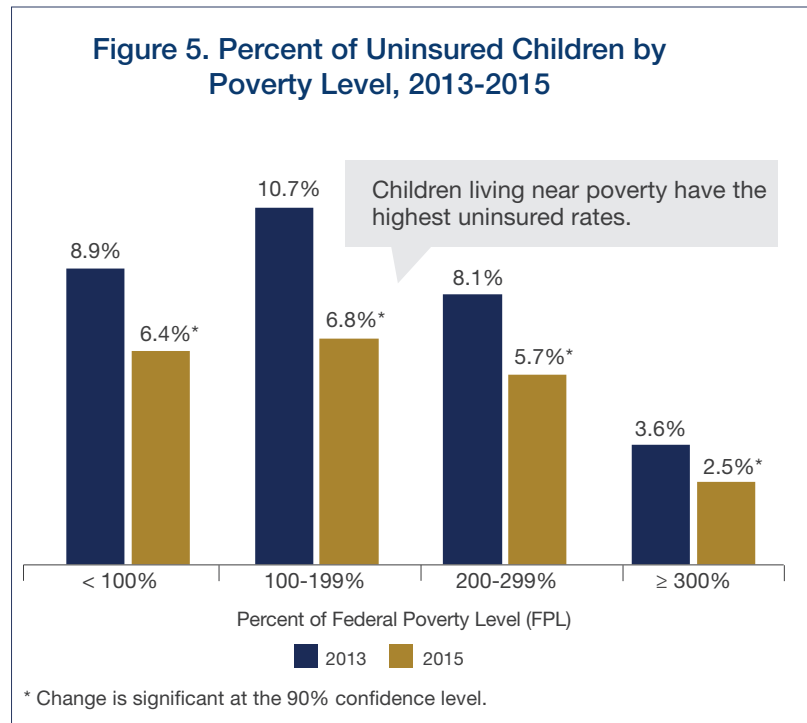
## Children Are Covered at Higher Rate than Adults, but the Gap Is Narrowing

As a result of Medicaid and CHIP expansions that were not available to adults in most states, children were covered at a much higher rate than adults prior to enactment of the ACA. This gap is narrowing as a result of the ACA, which has resulted in substantial improvements in the uninsured rate for non-elderly adults. Children are covered at a historic high of 95.2 percent but continue to lag behind seniors, who have the highest rate of coverage at 99.2 percent.



## Coverage Gains Were Widespread; Near Poor Children Have the Highest Rate of Uninsurance

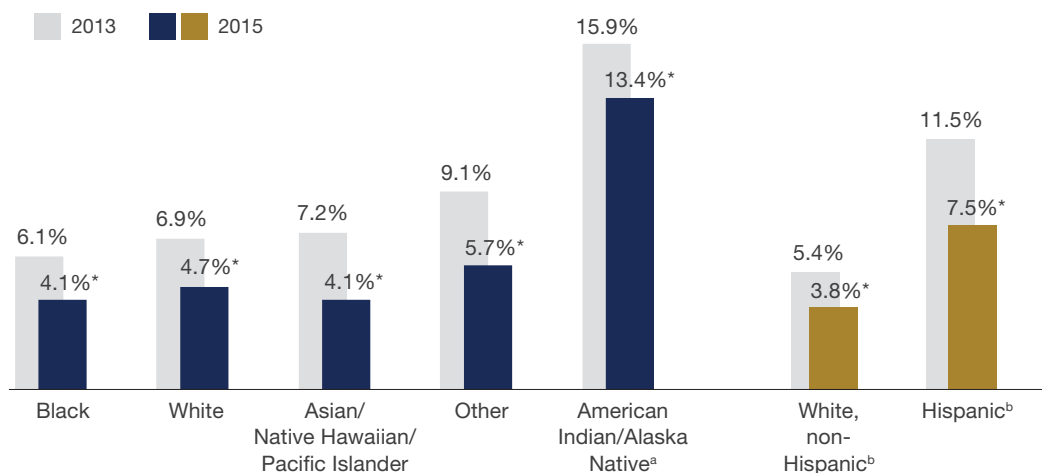
As Figure 5 shows, children at all income levels saw improvements in their coverage rates from 2013 to 2015. Children on the brink of poverty with incomes between 100 and 200 percent of the Federal Poverty Level continue to show the highest rates of uninsurance.



## Hispanic Children Saw Considerable Improvement, but Still Lag Behind

Children across all racial groups saw improvements, with American Indian/Alaska Natives still having the highest uninsured rate (access to the Indian Health Service is not considered coverage by the Census Bureau). Hispanic children, who can be of any race, continue to lag substantially behind, with a coverage rate of 92.5 percent.<sup>10</sup> White children who are not Hispanic enjoy the highest rate of coverage at 96.2 percent, but Black and Asian children are not far behind at 95.9 percent.

**Figure 6. Children’s Uninsured Rate by Race and Ethnicity, 2013-2015**



\* Change is significant at the 90% confidence level.

<sup>a</sup> Indian Health Service is not considered comprehensive coverage. See the methodology section for more information.

<sup>b</sup> For simplicity, racial and ethnic data are displayed in this chart, but Hispanic refers to a person’s ethnicity and these individuals may be of any race. See the methodology section for more information.

As Figure 7 shows, uninsured children are more likely to be school-aged. As children age, they are more likely to become uninsured.<sup>11</sup>



**Figure 7. Uninsurance Rates by Age, 2013-2015**

	2013	2015
Under 6 years old	5.7%	4.0%*
6 to 17 years old	7.8%	5.2%*

\* Change is significant at the 90% confidence level.



## Who Are the Remaining Uninsured Children?

Recent analysis shows that the majority (73 percent) of uninsured children are eligible for public coverage (primarily Medicaid or CHIP) but are not currently enrolled. Undocumented immigrant children constitute only 5 percent of the remaining uninsured children.<sup>12</sup>

Just over half of the remaining uninsured children reside in seven states: Texas, California, Florida, Georgia, Arizona, Ohio, and

Pennsylvania. Texas has the largest number of uninsured children by far, with almost one in five uninsured children (19.3 percent) living there in 2015. A disproportionate number of uninsured children live in the South, which is home to 38.3 percent of all children, but 49.5 percent of uninsured children. (See Appendix Table 5).

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**Figure 8. More than Half of the Nation's Uninsured Children Reside in Six States**

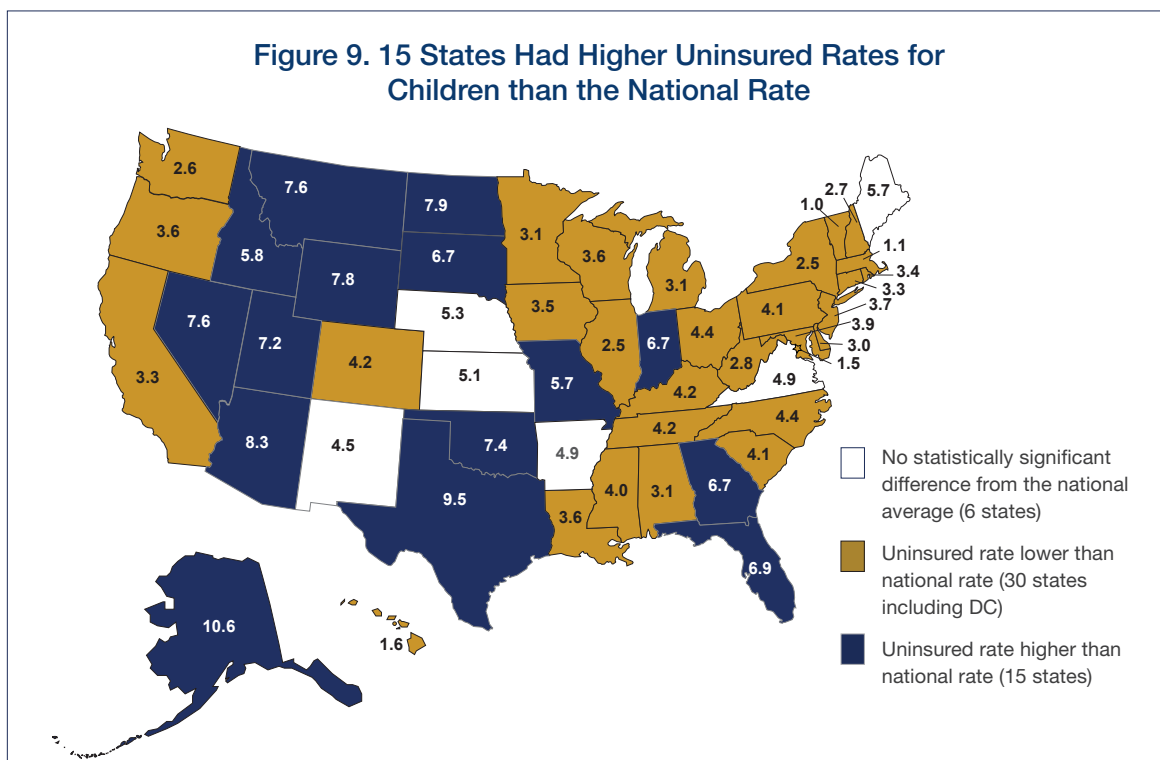
State	2014 Number of Uninsured Children	As a Share of Total Uninsured Children
Texas	682,000	19.3%
California	302,000	8.5%
Florida	284,000	8.0%
Georgia	166,000	4.7%
Arizona	134,000	3.8%
Ohio	115,000	3.3%
Pennsylvania	111,000	3.1%
<b>Seven State Total</b>	<b>1,795,000</b>	<b>50.8%</b>
<b>National Total</b>	<b>3,534,000</b>	

Note: Numbers are rounded to the nearest thousand.

## How Are States Doing?

The gains for children were widespread across the country, with 41 states experiencing a statistically significant decline in the rate of uninsured children between 2013 and 2015 (See Appendix Table 4). Only one state (Wyoming) showed an increase in both the number and rate of uninsured children. The remaining nine states saw no statistically significant change (AK, DC, AR, IA, MD, ME, NE, ND, SD).

As Figure 9 shows, 15 states now have uninsured rates that are higher than the national average of 4.8 percent. These states are clustered in the Mountain West but also include Alaska, Arizona, Florida, Georgia, Indiana, Missouri, Oklahoma and Texas. Thirty states have rates of uninsured children lower than the national average, including all of New England except for Maine. The states with the lowest and highest uninsured rates are shown in Figure 10.



**Figure 10. States with the Lowest and Highest Rates of Uninsured Children, 2015**

States with Lowest Uninsured Rates	
Vermont	1.0
Massachusetts	1.1
District of Columbia	1.5
Hawaii	1.6
New York, Illinois	2.5

States with Highest Uninsured Rates	
Alaska	10.6
Texas	9.5
Arizona	8.3
North Dakota	7.9
Wyoming	7.8



## Which States Saw the Greatest Improvement?

With respect to the rate of uninsured children, Nevada saw the most significant decline from 2013 to 2015. As Figure 11 shows, Nevada’s rate dropped more than 7 percentage points, from just under 15 percent to 7.6 percent—by far the largest decline achieved in any state. Four states (Florida, Colorado, California, and New Mexico) saw declines of around 4 percentage points. As a state’s uninsured rate drops, it becomes harder to make improvements—thus Washington’s gains are especially impressive, with an uninsured rate that fell to 2.6 percent in 2015.

**Figure 11: States with the Greatest Decline in Rate of Uninsured Children, 2013-2015**

State	2013 Percent Uninsured	2015 Percent Uninsured	2013-2015 Percentage Point Change in Uninsured
Nevada	14.9	7.6	-7.3*
Florida	11.1	6.9	-4.1*
Colorado	8.2	4.2	-4.1*
California	7.4	3.3	-4.0*
New Mexico	8.5	4.5	-4.0*
Mississippi	7.6	4.0	-3.6*
Arizona	11.9	8.3	-3.6*
Washington	5.9	2.6	-3.3*
Idaho	8.9	5.8	-3.2*
Texas	12.6	9.5	-3.2*

\* Change is significant at the 90% confidence level. Change in percent of uninsured children may not sum to total due to rounding.

California and Washington saw an extremely impressive decline of 55 percent in the *number* of uninsured children, with approximately 371,000 children gaining coverage in California and 52,000 in Washington. Colorado and Nevada reduced their number of uninsured children by almost half.

**Figure 12: States with the Greatest Decline in Number of Uninsured Children, 2013-2015**

State	2013 Number Uninsured	2015 Number Uninsured	2013-2015 Change in Number of Uninsured	Percent Change
California	673,000	302,000	-371,000*	-55.1%
Texas	888,000	682,000	-206,000*	-23.2%
Florida	445,000	284,000	-161,000*	-36.2%
Georgia	238,000	166,000	-72,000*	-30.2%
New York	171,000	104,000	-67,000*	-39.3%
Arizona	192,000	134,000	-58,000*	-30.0%
Washington	95,000	43,000	-52,000*	-55.1%
Illinois	125,000	75,000	-50,000*	-40.0%
Colorado	102,000	52,000	-50,000*	-48.7%
Nevada	99,000	50,000	-48,000*	-48.8%

\* Change is significant at the 90% confidence level. Numbers are rounded to the nearest thousand. Change in number of uninsured may not sum to total due to rounding.





## Conclusion

The children's health coverage rate nationally now stands at a historic high of 95.2 percent. The Affordable Care Act, which maintained and enhanced existing Medicaid and CHIP coverage for children, led to widespread declines in the number and rate of uninsured children from 2013 to 2015. These gains were widespread across income, racial, and geographic lines. Of the remaining uninsured children, half live in the South, with one in five living in Texas. Whether or not this positive trend continues depends to a large extent on the future strength of Medicaid, CHIP, and the Affordable Care Act.

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## Methodology

### Data Source

This brief analyzes single-year estimates of summary data from the 2013 and 2015 American Community Survey (ACS). The U.S. Census Bureau publishes ACS summary data on American Fact Finder. Where only number estimates are available, percent estimates and their standard errors were computed based on formulas provided in the 2015 ACS's "Instructions for Applying Statistical Testing to ACS 1-Year Data."

### Margin of Error

The published Census Bureau data provide a 90 percent margin of error (potential error bounds for any given data point). Except where noted, reported differences of rate or number estimates (either between groups, coverage sources, or years) are statistically significant within a 90 percent margin of error.

Georgetown CCF does not take the 90 percent margin of error into account when ranking states by the number and percent of uninsured children by state. Minor differences in state rankings may not be statistically significant.

### Percent Change

Percent change measures differences relative to the size of what is being measured. Percent change is useful in assessing a state's progress in reducing its population of uninsured children by comparing the decline to the size of the population at the starting point. In this report, percent change refers to change in uninsured children from 2013 to 2015 compared to the original population of uninsured children in 2013.

### Geographic Location

We report regional data for the U.S. as defined by the Census Bureau. The ACS produces single-year estimates for all geographic areas with a population of 65,000 or more, which includes all regions, states (including DC), and county and county equivalents.

### Poverty Status

Data on poverty levels include only those individuals for whom the poverty status can be determined for the last year. Therefore, this population is slightly smaller than the total non-institutionalized population of the U.S. (the universe used to calculate all other data in the brief). The Census determines an individual's poverty status by comparing that person's income in the last 12 months to poverty thresholds that account for family size and composition, as well as various types of income.

### Health Coverage

Data on sources of health insurance coverage are point-in-time estimates that convey whether a person has coverage at the time of the survey. Individuals can report more than one source of coverage, so such totals may add to more than 100 percent. Additionally, the estimates are not adjusted to address the Medicaid undercount often found in surveys, which may be accentuated by the absence of state-specific health insurance program names in the ACS.

We report children covered by Medicare, TRICARE/military, VA, or two or more types of health insurance as being covered by an "other"



source of health coverage. The Census Bureau provides the following categories of coverage for respondents to indicate source of health insurance: current or former employer, purchased directly from an insurance company, Medicare, Medicaid or means-tested (includes CHIP), TRICARE or other military health coverage, VA, Indian Health Service (IHS), or other. People who indicate IHS as their only source of health coverage do not have comprehensive coverage and are considered to be uninsured.

### **Demographic Characteristics**

“Children” are defined as those under the age of 18.

We report data for all seven race categories and two ethnicity categories for which the ACS provides one-year health insurance coverage estimates. The U.S. Census Bureau recognizes and reports race and Hispanic origin (i.e., ethnicity) as separate and distinct concepts.

To report on an individual’s race, we merge the data for “Asian alone” and “Native Hawaiian or other Pacific Islander alone.” In addition, we report the ACS category “some other race alone” and “two or more races” as “other.” Except for “other,” all racial categories refer to respondents who indicated belonging to only one race.

We report “Hispanic or Latino,” as “Hispanic.” As this refers to a person’s ethnicity, Hispanic and non-Hispanic individuals may be of any race. We report data for both “white” children and “white non-Hispanic children.” The former refers to all children whose race is reported as white, without regard to their ethnicity; the latter category refers to children who reported their race as white and do not report their ethnicity as Hispanic. For more detail on how the ACS defines racial and ethnic groups, see “American Community Survey and Puerto Rico Community Survey 2015 Subject Definitions.”



Appendix Table 1. Number of Uninsured Children Under 18, 2013 and 2015

State	2013 Number Uninsured	2013 State Ranking in Number of Uninsured	2015 Number Uninsured	2015 State Ranking in Number of Uninsured
United States	5,234,000	-	3,534,000	-
Alabama	48,000	22	34,000	22
Alaska	22,000	13	20,000	14
Arizona	192,000	47	134,000	47
Arkansas	39,000	19	35,000	23
California	673,000	50	302,000	50
Colorado	102,000	39	52,000	32
Connecticut	34,000	17	25,000	16
Delaware	9,000	4	6,000	4
District of Columbia **	3,000	1	2,000	2
Florida	445,000	49	284,000	49
Georgia	238,000	48	166,000	48
Hawaii	9,000	4	5,000	3
Idaho	38,000	18	25,000	16
Illinois	125,000	41	75,000	38
Indiana	130,000	42	106,000	44
Iowa	30,000	16	26,000	19
Kansas	44,000	21	37,000	24
Kentucky	60,000	26	43,000	27
Louisiana	63,000	28	40,000	26
Maine	15,000	10	14,000	10
Maryland	59,000	25	52,000	32
Massachusetts	21,000	12	16,000	12
Michigan	90,000	33	68,000	36
Minnesota	72,000	29	39,000	25
Mississippi	56,000	24	29,000	20
Missouri	98,000	36	80,000	40
Montana	22,000	13	17,000	13
Nebraska	25,000	15	25,000	16
Nevada	99,000	37	50,000	31
New Hampshire	10,000	6	7,000	5
New Jersey	112,000	40	75,000	38
New Mexico	43,000	20	22,000	15
New York	171,000	46	104,000	43
North Carolina	144,000	44	99,000	42
North Dakota	13,000	8	13,000	9
Ohio	141,000	43	115,000	46
Oklahoma	95,000	34	71,000	37
Oregon	50,000	23	31,000	21
Pennsylvania	147,000	45	111,000	45
Rhode Island	12,000	7	7,000	5
South Carolina	73,000	30	44,000	29
South Dakota	13,000	8	14,000	10
Tennessee	85,000	31	62,000	34
Texas	888,000	51	682,000	51
Utah	85,000	31	65,000	35
Vermont	4,000	2	1,000	1
Virginia	101,000	38	91,000	41
Washington	95,000	34	43,000	27
West Virginia	20,000	11	11,000	7
Wisconsin	61,000	27	46,000	30
Wyoming	8,000	3	11,000	7

Note: Numbers are rounded to nearest thousand. CCF does not take margin of error into account when ranking states by the number of uninsured children.

\*\* Relative standard error exceeds 30% for 2015 number of uninsured children.



Appendix Table 2. Percent of Uninsured Children Under 18, 2013 and 2015

State	2013 Percent Uninsured	2013 State Ranking in Percent of Uninsured	2015 Percent Uninsured	2015 State Ranking in Percent of Uninsured
United States	7.1	-	4.8	-
Alabama	4.3	10	3.1	11
Alaska	11.6	48	10.6	51
Arizona	11.9	49	8.3	49
Arkansas	5.5	20	4.9	32
California	7.4	36	3.3	14
Colorado	8.2	39	4.2	26
Connecticut	4.3	10	3.3	14
Delaware	4.5	13	3.0	10
District of Columbia **	2.4	2	1.5	3
Florida	11.1	47	6.9	42
Georgia	9.6	44	6.7	39
Hawaii	3.0	3	1.6	4
Idaho	8.9	42	5.8	38
Illinois	4.2	9	2.5	5
Indiana	8.2	39	6.7	39
Iowa	4.1	8	3.5	17
Kansas	6.1	31	5.1	34
Kentucky	5.9	28	4.2	26
Louisiana	5.7	24	3.6	18
Maine	5.9	28	5.7	36
Maryland	4.4	12	3.9	22
Massachusetts	1.5	1	1.1	2
Michigan	4.0	6	3.1	11
Minnesota	5.6	22	3.1	11
Mississippi	7.6	37	4.0	23
Missouri	7.0	35	5.7	36
Montana	10.1	46	7.6	45
Nebraska	5.5	20	5.3	35
Nevada	14.9	51	7.6	45
New Hampshire	3.8	5	2.7	8
New Jersey	5.6	22	3.7	21
New Mexico	8.5	41	4.5	31
New York	4.0	6	2.5	5
North Carolina	6.3	32	4.4	29
North Dakota	7.9	38	7.9	48
Ohio	5.3	15	4.4	29
Oklahoma	10.0	45	7.4	44
Oregon	5.8	27	3.6	18
Pennsylvania	5.4	17	4.1	24
Rhode Island	5.4	17	3.4	16
South Carolina	6.7	34	4.1	24
South Dakota	6.3	32	6.7	39
Tennessee	5.7	24	4.2	26
Texas	12.6	50	9.5	50
Utah	9.5	43	7.2	43
Vermont	3.1	4	1.0	1
Virginia	5.4	17	4.9	32
Washington	5.9	28	2.6	7
West Virginia	5.3	15	2.8	9
Wisconsin	4.7	14	3.6	18
Wyoming	5.7	24	7.8	47

Note: CCF does not take margin of error into account when ranking states by the number of uninsured children.

\*\* Relative standard error exceeds 30% for 2015 percent of uninsured children.



Appendix Table 3. Change in the Number of Uninsured Children Under 18, 2013 to 2015

State	2013 Number Uninsured	2015 Number Uninsured	2013-2015 Change in Number of Uninsured	2013-2015 Percent Change
United States	5,234,000	3,534,000	-1,700,000 *	-32.5%
California	673,000	302,000	-371,000 *	-55.1%
Texas	888,000	682,000	-206,000 *	-23.2%
Florida	445,000	284,000	-161,000 *	-36.2%
Georgia	238,000	166,000	-72,000 *	-30.2%
New York	171,000	104,000	-67,000 *	-39.3%
Arizona	192,000	134,000	-58,000 *	-30.0%
Washington	95,000	43,000	-52,000 *	-55.1%
Colorado	102,000	52,000	-50,000 *	-48.7%
Illinois	125,000	75,000	-50,000 *	-40.0%
Nevada	99,000	50,000	-48,000 *	-48.8%
North Carolina	144,000	99,000	-45,000 *	-31.1%
New Jersey	112,000	75,000	-38,000 *	-33.5%
Pennsylvania	147,000	111,000	-36,000 *	-24.4%
Minnesota	72,000	39,000	-33,000 *	-45.3%
South Carolina	73,000	44,000	-28,000 *	-39.1%
Mississippi	56,000	29,000	-27,000 *	-47.7%
Ohio	141,000	115,000	-26,000 *	-18.7%
Indiana	130,000	106,000	-24,000 *	-18.2%
Oklahoma	95,000	71,000	-24,000 *	-25.2%
Louisiana	63,000	40,000	-23,000 *	-36.9%
Tennessee	85,000	62,000	-23,000 *	-27.2%
Michigan	90,000	68,000	-22,000 *	-24.3%
New Mexico	43,000	22,000	-21,000 *	-48.0%
Utah	85,000	65,000	-20,000 *	-23.2%
Oregon	50,000	31,000	-19,000 *	-38.1%
Missouri	98,000	80,000	-18,000 *	-18.3%
Kentucky	60,000	43,000	-17,000 *	-28.1%
Wisconsin	61,000	46,000	-15,000 *	-24.6%
Alabama	48,000	34,000	-14,000 *	-29.9%
Idaho	38,000	25,000	-13,000 *	-34.7%
Virginia	101,000	91,000	-11,000	-10.4%
West Virginia	20,000	11,000	-10,000 *	-46.9%
Connecticut	34,000	25,000	-9,000 *	-25.4%
Kansas	44,000	37,000	-8,000 *	-17.2%
Maryland	59,000	52,000	-7,000	-11.8%
Arkansas	39,000	35,000	-5,000	-12.0%
Massachusetts	21,000	16,000	-5,000 *	-24.6%
Montana	22,000	17,000	-5,000 *	-23.9%
Hawaii	9,000	5,000	-4,000 *	-46.0%
Iowa	30,000	26,000	-4,000	-14.0%
Rhode Island	12,000	7,000	-4,000 *	-37.2%
Delaware	9,000	6,000	-3,000 *	-33.0%
New Hampshire	10,000	7,000	-3,000 *	-31.9%
Vermont	4,000	1,000	-3,000 *	-67.8%
Alaska	22,000	20,000	-2,000	-10.0%
District of Columbia**	3,000	2,000	-1,000	-31.3%
Maine	15,000	14,000	-1,000	-6.1%
Nebraska	25,000	25,000	-1,000	-2.6%
North Dakota	13,000	13,000	1,000	5.5%
South Dakota	13,000	14,000	1,000	7.0%
Wyoming	8,000	11,000	3,000 *	36.8%

\* Indicates change is significant at 90% confidence level. Numbers are rounded to nearest thousand. Change in number of uninsured children may not sum to total due to rounding. See methodology for explanation of percent change.

\*\* Relative standard error exceeds 30% for 2015 percent of uninsured children.



Appendix Table 4. Change in the Percent of Uninsured Children, 2013 to 2015

State	2013 Percent Uninsured	2015 Percent Uninsured	2013-2015 Percentage Point Change
United States	7.1	4.8	-2.3*
Nevada	14.9	7.6	-7.3*
Florida	11.1	6.9	-4.1*
Colorado	8.2	4.2	-4.1*
California	7.4	3.3	-4.0*
New Mexico	8.5	4.5	-4.0*
Mississippi	7.6	4.0	-3.6*
Arizona	11.9	8.3	-3.6*
Washington	5.9	2.6	-3.3*
Idaho	8.9	5.8	-3.2*
Texas	12.6	9.5	-3.2*
Georgia	9.6	6.7	-2.9*
South Carolina	6.7	4.1	-2.7*
Oklahoma	10.0	7.4	-2.6*
Minnesota	5.6	3.1	-2.5*
Montana	10.1	7.6	-2.5*
West Virginia	5.3	2.8	-2.5*
Utah	9.5	7.2	-2.3*
Oregon	5.8	3.6	-2.2*
Louisiana	5.7	3.6	-2.1*
Vermont	3.1	1.0	-2.1*
Rhode Island	5.4	3.4	-2.0*
North Carolina	6.3	4.4	-2.0*
New Jersey	5.6	3.7	-1.8*
Kentucky	5.9	4.2	-1.6*
Illinois	4.2	2.5	-1.6*
New York	4.0	2.5	-1.6*
Tennessee	5.7	4.2	-1.6*
Delaware	4.5	3.0	-1.5*
Indiana	8.2	6.7	-1.5*
Hawaii	3.0	1.6	-1.4*
Alabama	4.3	3.1	-1.3*
Pennsylvania	5.4	4.1	-1.3*
Missouri	7.0	5.7	-1.3*
New Hampshire	3.8	2.7	-1.1*
Wisconsin	4.7	3.6	-1.1*
Kansas	6.1	5.1	-1.1*
Alaska	11.6	10.6	-1.0
Connecticut	4.3	3.3	-1.0*
Ohio	5.3	4.4	-1.0*
Michigan	4.0	3.1	-0.9*
District of Columbia **	2.4	1.5	-0.8
Arkansas	5.5	4.9	-0.6
Iowa	4.1	3.5	-0.6
Virginia	5.4	4.9	-0.6*
Maryland	4.4	3.9	-0.5
Massachusetts	1.5	1.1	-0.4*
Maine	5.9	5.7	-0.3
Nebraska	5.5	5.3	-0.2
North Dakota	7.9	7.9	-0.1
South Dakota	6.3	6.7	0.4
Wyoming	5.7	7.8	2.1*

\* Indicates change is significant at 90% confidence level. Change in percent of uninsured children may not sum to total due to rounding.

\*\* Relative standard error exceeds 30% for 2015 percent of uninsured children.



**Appendix Table 5: A Disproportionate Share of Uninsured Children Live in the South**

Region	Child Population	Share of the Population	Number of Uninsured Children	Share of Nation's Uninsured Children
Midwest	15,617,000	21.2%	644,000	18.2%
Northeast	11,879,000	16.2%	361,000	10.2%
South	28,181,000	38.3%	1,751,000	49.5%
West	17,815,000	24.2%	778,000	22.0%
<b>Total</b>	<b>73,492,000</b>	<b>100.0%</b>	<b>3,534,000</b>	<b>100.0%</b>

Numbers are represented in thousands.

Midwest - IA, IN, IL, KS, MI, MN, MO, NE, ND, OH, SD, WI

Northeast - CT, ME, MA, NH, NJ, NY, PA, RI, VT

South - AL, AR, DC, DE, FL, GA, KY, LA, MD, MS, NC, OK, SC, TN, TX, VA, WV

West - AZ, AK, CA, CO, HI, ID, MT, NV, NM, OR, UT, WA, WY

## Endnotes

<sup>1</sup> Unless otherwise indicated, all data in this report are from a Georgetown Center for Children and Families analysis of the American Community Survey. Please see the Methodology section for further detail.

<sup>2</sup> Children in poverty also declined during this period from 22.2 percent to 20.7 percent.

<sup>3</sup> For example, see Molly Frea, Jonathan Gruber, and Benjamin Sommers, "Premium Subsidies, the Mandate, and Medicaid Expansion: Coverage Effects of the Affordable Care Act," National Bureau of Economic Research (April 2016), available at <http://www.nber.org/papers/w22213.pdf>; Larisa Antonisse, Rachel Garfield, Robin Rudowitz, and Samantha Artiga, "The Effects of Medicaid Expansion under the ACA: Findings from a Literature Review," Kaiser Family Foundation (June 2016), available at <http://kff.org/medicaid/issue-brief/the-effects-of-medicaid-expansion-under-the-aca-findings-from-a-literature-review/>.

<sup>4</sup> The Affordable Care Act includes a provision known as the "maintenance of effort" which prevents states from lowering their income eligibility levels for children and/or making it harder for children to enroll in Medicaid or CHIP. This provision is in effect until 2019 under current law.

<sup>5</sup> For example, the movement from separate state CHIP programs into Medicaid of children aged 6-18 with family income between 100 and 133 percent of the federal poverty level was phased in for many states over the year 2014. This eliminated premiums for some children, which are a barrier to enrollment for low-income families.

<sup>6</sup> Genevieve Kenney et al., "Children Eligible for Medicaid or CHIP: Who Remains Uninsured and Why?" *Academic Pediatrics* 15 (3 Suppl) (May-June 2015): S36-S43, available at <https://www.ncbi.nlm.nih.gov/pubmed/25906959>.

<sup>7</sup> Joan Alker and Alisa Chester, *Children's Health Insurance Rates in 2014: ACA Results in Significant Improvements*, Georgetown Center for Children and Families (November 2015), available at <http://ccf.georgetown.edu/wp-content/uploads/2015/10/ACS-report-2015.pdf>.

<sup>8</sup> Genevieve Kenney et al., *A Look at Early ACA Implementation: State and National Medicaid Patterns for Adults in 2014*, Urban Institute and Robert Wood Johnson Foundation (September 2016), available at <http://www.urban.org/research/publication/look-early-aca-implementation-state-and-national-medicaid-patterns-adults-2014>.

<sup>9</sup> Lisa Dubay and Genevieve Kenney, "Expanding Public Health Insurance to Parents: Effects on Children's Coverage under Medicaid," *HSR: Health Services Research* 38, no. 5 (October 2003): 1283-1302, available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1360947/>.

<sup>10</sup> Forthcoming analysis by the Georgetown Center for Children and Families and the National Council of La Raza will examine trends for Hispanic children in more detail.

<sup>11</sup> Jessica Barnett and Marna Vornovitsky, "Health Insurance Coverage in the United States: 2015," U.S. Census Bureau, Current Population Reports, Report Number P60-257 (September 2016), available at <http://www.census.gov/content/dam/Census/library/publications/2016/demo/p60-257.pdf>.

<sup>12</sup> The reported eligible but uninsured rate (73 percent) includes 66.5 percent of uninsured children eligible for Medicaid or CHIP and 6.2 percent of uninsured children eligible for Marketplace tax credits. Linda Blumberg et al., *Who Are the Remaining Uninsured and What Do Their Characteristics Tell Us about How to Reach Them?* Urban Institute (March 2016), available at <http://www.urban.org/research/publication/who-are-remaining-uninsured-and-what-do-their-characteristics-tell-us-about-how-reach-them>.



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Georgetown University Center for  
Children and Families  
McCourt School of Public Policy  
Box 571444  
3300 Whitehaven Street, NW, Suite  
5000  
Washington, DC 20057-1485  
Phone (202) 687-0880  
Email [childhealth@georgetown.edu](mailto:childhealth@georgetown.edu)



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