

Health Care Coverage

The child support program promotes children's health by establishing and enforcing medical support orders. The program can meet its responsibility to secure health care coverage for the children in its caseload by collaborating with private insurers, employers, Medicaid, CHIP, and, soon, new state health insurance Exchanges. The child support program can also help parents be consistent providers for their children by connecting them to health care coverage and services.



Why should the child support program secure health care coverage for children and their parents?

The child support program has a statutory responsibility to secure private or public health care coverage for each of the children in its caseload by establishing and enforcing medical child support orders that require parents to obtain health care coverage or provide for their children's health care needs.¹ Health care coverage is essential for children—without it they are less likely to receive necessary health care services, including preventive care such as childhood immunizations.²

Parents' access to health care coverage matters to their children because uninsured adults have poorer health, and parents who experience poor health have a harder time meeting the responsibilities of parenthood compared to healthy parents.³ Health care issues can also interfere with employment.

How can increasing health care coverage improve child support outcomes?

Providing for children's health care is a basic responsibility of the child support program. By connecting children to the right coverage for them—coverage through either of their parents' employers, Medicaid, CHIP, state health insurance Exchanges, or other options—the child support program can assure that children will have continuous, stable access to health care as they grow up, and that the resources of both parents are being used most effectively for each child. Utilizing the full range of health care coverage resources available to children can help families with limited incomes find a balance that best meets their children's health care needs so that provision of medical support does not interfere with parents meeting their cash child support obligations.

In addition, helping parents access health care coverage and other health care services can make them better parents and better providers, which directly improves child support outcomes.

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What does the child support program do to increase health care coverage?

The child support program's medical support responsibilities include the establishment and enforcement of private health insurance or public health care coverage requirements against either or both parents; the establishment and enforcement of cash payments by either parent to fund premiums, co-payments, and extraordinary or uncovered medical expenses; and cash payments for Medicaid cost reimbursement.

While the child support program has long been involved with securing health care coverage for children, in the past, it has focused more narrowly on private coverage available through a noncustodial parent's employer rather than taking full advantage of the many coverage options available to children. However, the Deficit Reduction Act of 2005 provided that the child support agency may look to either or both parents to provide medical support, including health care coverage and cash payments.⁴ This broader look at children's health care coverage is relatively new to the child support program. In recognition that this area is evolving quickly along with national health care policy, states currently have great flexibility to innovate to increase children's health care coverage by considering the range of available coverage options, including private insurance, Medicaid, and CHIP.⁵

To connect children to employer-sponsored coverage, states send a National Medical Support Notice to the parent's employer requiring the employer to enroll the child if insurance is available at a reasonable cost. However, many families in the child support program do not have access to private insurance offered by a parent's employer and are disproportionately eligible for Medicaid and CHIP.⁶ State experience shows that issuing a National Medical Support Notice to the noncustodial parent's employer only results in the child being enrolled in a health plan from 10 to 23 percent of the time.⁷

While private insurance is important for children who have access to it, most uninsured children in custodial families (79 percent) are eligible for Medicaid or CHIP, so improved linkages between Child Support and Medicaid and CHIP could significantly increase health care coverage for these children.⁸ State child support programs can provide information about health care coverage plans to the families they serve, assist them in enrolling in Medicaid or CHIP as part of the medical support establishment process, and enhance data sharing and targeted outreach to help families enroll and stay enrolled in Medicaid or CHIP. To identify private, public, and community insurance options and prices in each state, the U.S. Department of Health and Human Services has created a tool that is available at: <http://finder.healthcare.gov/>.

Child support programs can also play an important role in increasing parents' health care coverage, particularly low-income noncustodial parents who have historically not had access to coverage. In 2014, eligibility for the Medicaid program will be expanded to include all near-poor adults, and state health insurance Exchanges will provide many quality coverage options to choose from, as well as tax credits to help parents afford the coverage.

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Examples of ways that state child support programs are increasing health care coverage:

Michigan—MiSTITCH (Michigan Strategies to Increase the Children's Health Care)

What it does: The Michigan Office of Child Support partnered with the Michigan Primary Care Association and the Young Men's Christian Association of Greater Grand Rapids, both CHIPRA outreach grantees, to conduct CHIP outreach and enrollment assistance. For example, the Michigan Primary Care Association provides outreach specialists to enroll any uninsured children in the child support system who are referred by local child support offices. The partners also mailed information about CHIP and other coverage options to families in the child support program.

Results: Five counties participated with 3,000 letters being mailed to parents who had a child without coverage information recorded on the child support system. The percentage of children with health care coverage information identified was 18 percent higher for children whose parents received an outreach letter compared to a control group that did not receive a letter when measured over a three-month period.⁹

New Jersey—NJKiDS & Medical Support: Early Connection to Coverage

What it does: New Jersey piloted a three-year early intervention project that combined the use of medical support facilitators and court mediation workshops to: gather and record health care coverage information prior to court, educate families about available coverage (employer-sponsored and other private insurance, CHIP, and Medicaid) to help them make informed choices, facilitate application and enrollment, and provide available coverage information prior to the mediation workshop and/or court hearing to assist the court in making an informed decision. Medical support facilitators conducted outreach to families in advance of their mediation or court date to ascertain available coverage in an effort to increase the number of children in the child support caseload that have coverage.

New Jersey (continued)

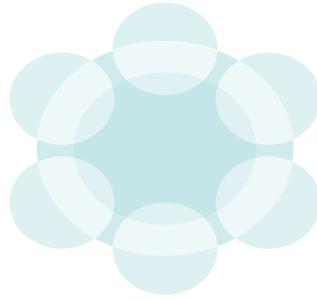
Results: Of the cases processed through the pilot, approximately 86 percent of the child support orders included medical support compared to the statewide average of 53 percent. Also, approximately 94 percent of the pilot cases were enrolled in a health care plan (employer/private insurance, CHIP, or Medicaid) prior to the mediation or court date. In addition, judges, hearing officers, and staff found that the managed negotiation process improves the participation and cooperation of the parties in the establishment of their order.

New York—Low Income Support Obligation Performance Improvement Act

What it does: Effective July 15, 2011, New York employers will begin reporting the availability of dependent health care coverage through the state's new hire and quarterly wage reporting systems.¹⁰ This legislation increases access to available health insurance or public coverage for children served through the child support program, increases program efficiency, and reduces employer and agency administrative costs. Automated reporting on availability of employer-sponsored family health insurance will expedite issuance of the National Medical Support Notice to employers resulting in earlier enrollment and coverage for children. This will also help identify children not covered by employer-sponsored insurance so that their parents can be encouraged to enroll them in Medicaid and CHIP.¹¹

The Massachusetts and Vermont child support programs are also enhancing their collaboration with Medicaid and CHIP to improve children's health care coverage.

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References

Examples provided in the *Promoting Child Well-Being & Family Self-Sufficiency* Fact Sheet Series are funded using child support program matching funds and other funding sources.

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