

State Policy Choices and Young Children

Highlights from an Update of Improving the Odds: Health, Early Care/Education, and Family Support Policies Affecting Children Birth to Five

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NCCP's *Improving the Odds* Project provides state profiles of key policy choices that affect the well-being and school readiness of young children birth to five years. Below are highlights from a recent update of these profiles. See complete state profiles at: www.nccp.org/profiles/.

SELECTED HEALTH POLICIES

The EPSDT (Early and Periodic Screening, Diagnosis, and Treatment) program is Medicaid's comprehensive child health benefits package which requires states to fund well-child health care and screening for physical and mental health, vision, hearing, and dental conditions. Treatment and other services to correct or ameliorate conditions identified through screening are covered for children under EPSDT, whether or not they are part of the state Medicaid plan for adults. The American Academy of Pediatrics (AAP) recommends a schedule of screenings for children of different ages that some, but not all states follow:

- ◆ For children under age 1, five states – Georgia, Indiana, North Dakota, Vermont and West Virginia – **meet or exceed** the AAP requirements for an infant's first year.
- ◆ Eighteen states have set screening requirements that offer two or three **fewer** screens than those recommended by AAP.

Two states that offer **fewer** than the recommended number of screens in a child's first year – Arkansas and Maine – report that less than 60 percent of scheduled screens are performed.

Preventive health care and treatment are essential supports for the well-being and development of *all* young children. For young immigrant children (birth to five), 20 states offer Medicaid/CHIP coverage to all or most legal immigrants. Pregnant immigrant women can qualify for Medicaid in 25 states.

Metabolic screens of newborns help reduce disabilities in children by identifying treatable conditions. For example, PKU (phenylketonuria) is a disorder that can be identified with a metabolic screen; brain damage and mental retardation can be prevented by giving children with PKU a special diet. Forty-one states require all 28 recommended screens for newborns, seven more states than in 2008.



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SELECTED EARLY CARE AND EDUCATION

Child Care subsidy eligibility levels affect families' ability to access licensed child care, and may also affect family income by reducing the costs of child care and enabling parents to work.

- ◆ Currently, 17 states set levels **at or above** 200 percent of the federal poverty line (the federal poverty level for a family of three in 2009 is \$18,310).
- ◆ Eighteen states **lowered** their eligibility levels in 2009, including six states that had previously set levels at or above 200 percent of the FPL.

Prekindergarten and Head Start programs are critical elements in states' early childhood systems that promote school readiness. States that have substantially **increased** investments in state prekindergar-

ten programs include Alabama, Colorado, and Virginia. Two states, Alaska and Rhode Island, have newly established state pre-kindergarten programs. In Illinois and Ohio, **decreases** in funding for prekindergarten programs are expected to reduce children's access to these programs. (*NCCP's Early Childhood State Policy Profiles will include additional information on prekindergarten programs in its Winter 2010 update*)

Quality Improvement Rating Systems use policies, assessment tools, and professional development strategies to strengthen the quality of early childhood programs. Currently, 19 states operate state-wide Quality Improvement Rating Systems, with several other states currently developing or piloting systems.

PARENTING AND FAMILY ECONOMIC SUPPORTS

Family economic security policies can be especially important to families with young children, a group most at-risk of experiencing financial hardship. States vary in their policies that determine minimum wage and income tax exemption.

- ◆ Currently, 15 states set minimum hourly wages at levels that **exceed** the federal minimum wage (\$7.25); five states have established a state minimum wage **lower** than the federal level, ranging from \$6.25 in Arkansas to \$2.65 in Kansas.

- ◆ Among states that tax income, 30 states provide an income tax exemption for single parent families below the federal poverty line (the federal poverty level for a family of three in 2009 is \$18,310). Twelve states do not allow any income tax exemption.

Family planning services support the well-being of low-income women and their families. Twenty-seven states currently implement waivers to allow otherwise ineligible women to receive Medicaid.

SOURCES

HEALTH

U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. 2009. *The Annual EPSDT report (Form CMS-416)*. http://www.cms.hhs.gov/MedicaidEarlyPeriodicScrn/03_StateAgencyResponsibilities.asp (accessed Nov. 18, 2009).

New Option for States to Provide Federally Funded Medicaid and CHIP Coverage to Additional Immigrant Children and Pregnant Women. Kaiser Commission on Key Facts, The Henry J. Kaiser Family Foundation. July 2009. <http://www.kff.org/medicaid/upload/7933.pdf> (accessed Nov. 11, 2009).

National Newborn Screening and Genetics Resource Center. 2009. National Newborn Screening Status Report. <http://genes-r-us.uthscsa.edu/nbsdisorders.htm> (accessed Oct. 23, 2009).

EARLY CARE AND EDUCATION

Schulman, Karen; Blank, Helen. *State Child Care Assistance Policies 2009: Most States Hold the Line, But Some Lose Ground in Hard Times*. National Women's Law Center. <http://www.nwlc.org/pdf/StateChildCareAssistancePoliciesReport09.pdf> (accessed Oct. 23, 2009).

Votes Count: Legislative Action on Pre-K Fiscal Year 2010. Pre-K Now: A Campaign of the Pew Center on the States. 2009. http://www.preknow.org/documents/LegislativeReport_Oct2009.pdf (accessed Nov. 24, 2009).

U.S. Department of Health & Human Services, Administration for Children and Families, National Child Care Information and Technical Assistance Center. 2009. *QRIS Definition and Statewide Systems*. <http://nccic.acf.hhs.gov/pubs/qrs-defsystems.html> (accessed Nov. 16, 2009).

PARENTING AND ECONOMIC SUPPORTS

U.S. Department of Labor, Employment Standards Administration. 2009. *Minimum Wage Laws in the States, July 2009*. <http://www.dol.gov/whd/minwage/america.htm> (accessed Oct. 28, 2009).

Oliff, Phil; Singham, Ashali. 2009. *The Impact of State Income Taxes on Low-Income Families in 2008*. Center on Budget and Policy Priorities. <http://www.cbpp.org/files/11-4-09sfp.pdf> (accessed Nov. 9, 2009).

State Medicaid Family Planning Eligibility Expansions, State Policies in Brief, as of October 19, 2009. Guttmacher Institute. http://www.guttmacher.org/statecenter/spibs/spib_SMFPE.pdf (accessed through <http://www.statehealthfacts.org> on Oct. 28, 2009).

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To learn more about Improving the Odds for Young Children, please go to: www.nccp.org/projects/improvingtheodds.html.