For Immediate Release
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Report: NATIONAL APPROACH NEEDED TO ADDRESS GROWING RANKS OF UNINSURED PARENTS

New York City, May 4, 2009 – As Congressional committees work to craft comprehensive health care reform, researchers at Columbia University’s National Center for Children in Poverty (NCCP) are calling for increased attention to one group in particular: low-income parents.

Parents are among those most vulnerable to the nation’s current health care deficiencies. Last week, NCCP researchers released Making Parents’ Health Care a Priority, a fact sheet created to call attention to the key factors that contribute to the problem and make the case for increased federal support.

An estimated 14,000 Americans are losing health coverage every day, and though some find coverage again, this happens at a much slower rate. The number of uninsured in the country currently hovers at around 47 million, and experts predict that this number will rise to 54 million by 2019 if nothing is done. Many of those in the growing ranks of the uninsured are parents working in low-wage jobs that often lack employer-provided health insurance.

For parents with low-wage jobs and no employer coverage, private health insurance is far too expensive, and income limits and other barriers to receiving public health insurance mean that millions are excluded from the coverage they desperately need.

“There has been a lot of progress in expanding coverage for children,” notes Kinsey Alden Dinan, senior policy associate at NCCP, “but while covering all children is critical, to be healthy, children need healthy parents.”

When parents lack health coverage, they are less likely to enroll their children in public health insurance programs or regularly access health care for their children. In addition, uninsured parents often lack access to needed treatments and preventive care, impeding their ability to care for their children and jeopardizing their job security and ability to work. And if a chronic or life-threatening medical condition surfaces, the associated costs can leave uninsured parents and their families facing financial devastation.

Currently, only a third of states offer public health insurance programs for parents with income up to 200 percent of the poverty level (which research has demonstrated is the minimum level of income families need to get by). More than half of states set income limits for parents’ eligibility far below the poverty level, and the 2009 CHIP expansion prohibits new waivers covering adults. Finally, many of the state programs available to parents at higher income levels have limited services, high premiums, enrollment caps and wait lists that create barriers to accessing care.
Some states have taken steps to expand parents’ access to coverage, but a national approach is needed. “The current patchwork of state policies leaves parents with limited and uneven access to coverage,” explains NCCP policy associate Jodie Briggs, who coauthored the study. “The only way to address this problem is with bold action at the federal level.”

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The National Center for Children in Poverty (NCCP) is the nation’s leading public policy center dedicated to promoting the economic security, health and well-being of America’s low-income families and children. Part of Columbia University’s Mailman School of Public Health, NCCP uses research to inform policy and practice with the goal of ensuring positive outcomes for the next generation.

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