

Introduction

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“Bobby,” a preschooler, was bitten by a mosquito – a common enough childhood experience. When Bobby scratched the bite, though, it became infected. His parents, wanting to do the right thing for their son, took him to a physician, who prescribed an antibiotic. Bobby’s father worked, but his family was poor and money was too tight for them to be able to buy the medication right away, especially after paying the cost of a doctor’s visit.

While they waited, the infection grew dangerously out of control. As a result, Bobby required three days of hospitalization, including administration of intravenous antibiotics.

The total bill for Bobby’s mosquito bite was approximately \$2,500 – more than 100 times the cost of the prescription medication his family could not afford to purchase on their limited income. In Bobby’s case, as in thousands of others like it, an ounce of prevention (in the form of state health care assistance to families with children) could have gone a long way toward reducing child suffering – and unnecessary taxpayer expense.¹

Access to health care for children is a continuing concern of policymakers, with good reason. As the above anecdote illustrates, failure to get timely medical care can lead to unnecessary illness and greater expense in the long run. While access to health care is a complex issue, insurance coverage is one important factor linking children with health care. A number of studies indicate that children who have health insurance have better access to health care, whether access is measured by having a usual source of medical care, a regular physician or by having made at least one visit to a doctor or dentist in the past year.² Low-income uninsured children are more likely to have an unmet medical need than are their insured counterparts.³ Because children are rapidly developing organisms, regular monitoring and timely intervention to identify developmental or health problems is necessary to prevent minor problems from having major developmental consequences. By improving access to care, health insurance is one critical factor in identifying and addressing health problems in children.⁴

In this report, experts in research and policy discuss what we know about increasing health coverage for low-income children, what we don’t know, and how state and local communities are working to increase coverage for children. The last article discusses the policy implications of information presented by the expert speakers. Finally, brief snapshots of promising local programs and a resources section direct the interested reader to additional sources of information.