

Medicaid:

A Critical Support for Babies and Families



Medicaid provides health coverage to 42 percent of children under 3. But proposals to restructure Medicaid could put needed critical services for young children and their families at risk.

Access to affordable health care means infants and toddlers can receive the critical services and treatment they need to build a strong foundation for their futures. Recognizing that healthier babies today means a stronger America tomorrow, Congress has historically prioritized health care access for children. Thanks to investments in Medicaid and the Children's Health Insurance Program, 97 percent of children under age 3 had health insurance in 2016, with nearly half (48.9 percent) receiving it through Medicaid and CHIP. Proposals to change the structure of Medicaid threaten to undo decades of progress on young children's health and could prove devastating to the more than 5 million infants and toddlers covered by Medicaid and CHIP today.

How does Medicaid make a difference for infants and toddlers?

- Children with Medicaid coverage are more likely than uninsured children to regularly see a doctor and receive preventive health care. Routine checkups and preventive care, such as vaccinations, helps prevent more costly health issues as children get older.
- Children covered by Medicaid are guaranteed Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefits, which emphasize early detection of harmful risk factors, followed diagnosis and treatment.
- Low-income parents who have Medicaid coverage are more likely to have access to medical services, substance abuse treatment, and mental health services that help them provide a safer and more nurturing home.
- Research shows that children enrolled in Medicaid in early childhood have better long-term health, educational, and employment outcomes than those who were uninsured. This also benefits our economy for the long-term.

How would proposed changes to Medicaid harm infants, toddlers and their families?

- Last year, Congress proposed structural changes to Medicaid that would drastically reduce federal Medicaid funding over time and shift costs to the states.
- This additional cost burden on the states could lead to difficult choices about how to spend Medicaid dollars and could limit benefits and services or restrict eligibility and enrollment.
- Young children are more likely to rely on Medicaid than older children, so contractions in funding would have more significant effects on them.
- If forced to spend more on health care, states may choose to reduce investments in other critical areas like education, child care, and family supports.
- In many cases, low-income families would bear much of the increased cost through higher co-payments and deductibles, which could lead to delay in medical treatment and result in long-term health problems.

Oppose changes to the structure of Medicaid that would lead to families losing coverage and access to the services children need to stay healthy.

For more information, visit <https://www.zerotothree.org/policy-and-advocacy/physical-health> or contact Bernard Fulton, Director of Government Affairs at bfulton@zerotothree.org.