MEDICAID PUTTING INDIANA CHILDREN ON A PATH TO SUCCESS

Medicaid and Hoosier Healthwise (CHIP) provide health insurance for Indiana children; bring federal dollars into the state; and help children grow into healthy, productive adults.

PROVIDING HEALTH INSURANCE FOR INDIANA CHILDREN AND FAMILIES

Children make up 55% of Indiana residents covered by Medicaid and Hoosier Healthwise.

This equals 800,565 Indiana children, including:

- 100% of children in foster care
- 74% of children who live in or near poverty
- 50% of children born to moms covered by Medicaid
- 43% of children with disabilities or special health care needs such as diabetes and asthma
- 41% of infants, toddlers, and preschoolers

WHERE MEDICAID FITS IN: CHILDREN'S COVERAGE IN INDIANA

HELPING CHILDREN SUCCEED IN SCHOOL AND LIFE

CHILDREN WITH MEDICAID

- MISS LESS SCHOOL
- DO BETTER IN SCHOOL
- GRADUATE AND ATTEND COLLEGE
- BECOME HEALTHIER ADULTS
- EARN HIGHER WAGES
- PAY MORE IN TAXES

ENSURING HEALTHY DEVELOPMENT FROM THE START

Medicaid guarantees access to care for children through its Early and Periodic Screening, Diagnostic and Treatment benefit, known as EPSDT.

EPSDT is one of the best ways Medicaid helps vulnerable children stay healthy and on track with their peers. It:

- Identifies problems early
- Checks children's health at periodic intervals
- Provides development, vision, and hearing screenings to detect problems
- Performs diagnostic tests to identify risks
- Provides treatment for any problems found
WE MUST PROTECT CHILDREN’S COVERAGE

AFTER YEARS OF PROGRESS, WE’RE LOSING GROUND

- In 2017, the number of uninsured children increased for the first time in a decade. 276,000 more U.S. children became uninsured, and progress in covering Indiana children stalled.
- In 2018, the number of children enrolled in Medicaid and CHIP fell by about 840,000 nationwide.

These data show that children’s health coverage is headed in the wrong direction—an alarming trend that cannot be ignored.

KEEP MEDICAID STRONG

Medicaid faces serious threats in states where enrollment barriers such as work reporting requirements, budget cuts, and moves to block grant or cap Medicaid funding are being proposed. Actions like these prevent Medicaid from doing its job of providing health insurance. We must prevent harmful changes that add costly administrative burden for states while also taking away people’s health coverage.

KEEP CHILDREN COVERED

States have made historic gains in covering children. But, with coverage rates stalling or headed in the wrong direction, we must double down on efforts to reach and enroll eligible children, focus on system improvements to keep them covered, and ensure that parents have health insurance, so they can keep themselves and their families healthy.