PROVIDING HEALTH INSURANCE FOR SOUTH DAKOTA CHILDREN AND FAMILIES

Children make up 68% of South Dakota residents covered by Medicaid and CHIP.

This equals 78,791 South Dakota children, including:

- 100% of children in foster care
- 76% of children who live in or near poverty
- 50% of children born to moms covered by Medicaid
- 45% of children with disabilities or special health care needs such as diabetes and asthma
- 39% of infants, toddlers, and preschoolers

WHERE MEDICAID FITS IN: CHILDREN'S COVERAGE IN SOUTH DAKOTA

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, including 3,000 in South Dakota.

- In 2018, the number of children enrolled in Medicaid and CHIP fell by about **840,000 nationwide**—including 1,907 in South Dakota.

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

WE MUST PROTECT CHILDREN’S COVERAGE

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.