

# How Covering Adults Through Medicaid Expansion Helps Children

Studies focused on children have found multiple benefits from state Medicaid expansions as a result of passage of the Affordable Care Act (ACA). Expansion under the ACA covers lower-income parents and other adults and the effect of increasing access to health care for parents and would-be parents benefits children in many ways. Early in life benefits include lower infant mortality rates, improved birth outcomes and better prenatal health, and extend through improvements in the rates of children getting their own health coverage. Better health coverage translates into better health care and health treatment resulting in better health and multiple subsequent positive outcomes for children and families. Another key benefit for children is the economic security of having all members of a family insured thus reducing exposure to high medical expenses.

## What covering adults through Medicaid expansions means

- ▶ increased opportunities for parents to obtain health coverage
- ▶ financial security for families
- ▶ healthier mothers, babies, caregivers
- ▶ positive effects for children and families
- ▶ increased health coverage enrollment for children

## Low parental Medicaid eligibility income limits in non-expansion states mean Medicaid expansions significantly increase opportunities for parents to obtain health coverage.

A higher percentage of parents get health coverage in states that have expanded Medicaid. This is because eligibility limits for Medicaid are much lower for parents in non-expansion states.<sup>1</sup> For example, a family of three in Texas cannot earn more than 15% of the federal poverty level (FPL) for the parent(s) to qualify for Medicaid. This means in Texas, a Medicaid non-expansion state, if a family of three earns more than \$323 per month the parents are not able to qualify for Medicaid. And uninsured residents, both parents and non-parents, in non-expansion states often work low-wage jobs that don't provide health coverage.<sup>2</sup> Typically, these jobs are in industries like hospitality, retail sales, restaurants, construction and lower-wage health care work like personal care aides.



All ten states that have still not enacted Medicaid expansion have lower income limits for Medicaid eligibility for parents than expansion states where it is at least 138 percent of the poverty level:

## Medicaid Eligibility Levels for Parents – Non-Expansion States

| State          | Parent eligibility level (Percent of FPL) | Monthly income limit (Family of 3) |
|----------------|---|------------------------------------|
| Alabama        | 18%                                       | \$387                              |
| Florida        | 27%                                       | \$581                              |
| Georgia        | 30%                                       | \$646                              |
| Kansas         | 38%                                       | \$818                              |
| Mississippi    | 27%                                       | \$581                              |
| South Carolina | 67%                                       | \$1,442                            |
| Tennessee      | 105%                                      | \$2,259                            |
| Texas          | 15%                                       | \$323                              |
| Wisconsin      | 100%                                      | \$2,152                            |
| Wyoming        | 45%                                       | \$968                              |

Source: Brooks, T. et al., "A Look at Medicaid and CHIP Eligibility, Enrollment, and Renewal Policies During the Unwinding of Continuous Enrollment and Beyond" (KFF and Georgetown University Center for Children and Families: June 2024)

## Medicaid expansion is associated with more financial security for families.

Studies have found that parents who gain Medicaid coverage experience fewer difficulties<sup>3</sup> paying family medical bills and that their children have lower medical expenses,<sup>4</sup> indicating that parental coverage can provide financial protection for the whole family. It is well established in research that Medicaid protects against large, unexpected expenses that result from injury or sickness and promotes financial security.<sup>5,6,7</sup>

## Medicaid expansion is associated with healthier mothers, babies, and caregivers.

Expanding Medicaid eligibility is likely to improve coverage<sup>8</sup> rates for women of reproductive age which can help address health issues like mental health<sup>9</sup> conditions and increase the chance of receiving preconception health counseling and folic acid<sup>10</sup> as well as early prenatal care.<sup>11</sup> Women in expansion states are also more likely to have stable coverage<sup>12</sup> before, during, and after pregnancy and to keep their insurance coverage during the postpartum period, which can increase the chances they receive important postpartum care.<sup>13</sup> Medicaid expansion states also have lower maternal mortality rates,<sup>14</sup> and women in expansion states may be less likely to develop postpartum depression<sup>15</sup> and to receive treatment for this common condition.<sup>16</sup> And a large study of hospitalizations after pregnancy published last year found “the first evidence of a decrease in postpartum hospitalizations associated with expanded Medicaid.”<sup>17</sup>

Expansion is associated with lower rates of infant mortality among Hispanic infants<sup>18</sup> and higher rates of health insurance coverage of infants.<sup>19</sup> The most recent research continues to show the association of Medicaid expansion with a decline in infant mortality of Black and Hispanic infants over multiple years.<sup>20</sup> Another recent study found that states expanding Medicaid had lower levels of fetal death, infant death and preterm birth rates overall.<sup>21</sup> One study of mothers who gained Medicaid coverage during early expansions in the 1980s found that their children were less likely to have low birth weights, and moreover that their children’s children also saw improvements in birth weights and preterm births.<sup>22</sup>

Research has even found that caregivers in expansion states report experiencing fewer poor mental health days,<sup>23</sup> and parents may spend more time on activities like food preparation and childcare.<sup>24</sup>

## Medicaid expansion has additional positive effects for children and their families.

Medicaid expansion has been associated with other positive effects for children such as a reduction in school absenteeism<sup>25</sup> and dropout rates,<sup>26</sup> increased child support,<sup>27</sup> fewer reported cases of child neglect,<sup>28</sup> improved coverage among former foster youth,<sup>29</sup> and lower rates of youth robbery and assault charges.<sup>30</sup> Finally, expansion can increase the likelihood that children receive annual check-ups,<sup>31</sup> is associated with improvements in young children’s mental health<sup>32</sup> and better outcomes for children with cancer.<sup>33</sup>

## Parents who get enrolled in health coverage through Medicaid expansions are more likely to enroll their children in health coverage.

Expanding coverage for parents and other adults creates a “welcome mat” effect for children who are eligible for Medicaid but not currently enrolled—either because their parent did not know they were eligible or had encountered barriers to enrollment. Multiple research studies have documented this effect. An initial large study of parental Medicaid expansions over 20 years ago found that children in states extending Medicaid to more parents had many more children who also enrolled in Medicaid.<sup>34</sup> A 2016 study on coverage increases for children found expansion states continued to reduce the numbers of uninsured children compared to non-expansion states.<sup>35</sup> The first large national study of ACA Medicaid expansions published in 2017 found a strong link as well and has been followed by similar studies.<sup>36, 37</sup> Another 2022 study of community health center patients found an increase in insured visits among children whose parents gained Medicaid coverage during expansion.<sup>38</sup> Overall, states that have adopted the Medicaid expansion consistently have lower rates of uninsured children.<sup>39,40</sup>



## Conclusion

Opponents of Medicaid expansion often argue that enacting expansion will harm “traditional” Medicaid beneficiaries including children. In fact, the opposite is true. Studies have documented multiple positive effects for children of expanding coverage for parents and other adults including higher child coverage rates, lower rates of infant mortality and higher birthweights, and improved school and health outcomes. Finally, improved financial security for the family accrues when all members of the family have health insurance.

This factsheet was written by Adam Searing and Aubrianna Osorio. The authors would like to thank Joan Alker and Catherine Hope for their editing and assistance. Design and layout provided by Nancy Magill.

The Georgetown University Center for Children and Families (CCF) is an independent, nonpartisan policy and research center based at the McCourt School of Public Policy. CCF conducts research, analyzes data, develops strategies, and offers solutions to improve the health of America’s children and families, particularly those with low and moderate incomes.

## Endnotes

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