Medicaid and CHIP are critical to children’s healthy development and success in life.

Medicaid covers preventive services including well-child check-ups, immunizations, and dental care. Through the program’s definitive standard of care for children—known as Early and Periodic Screening, Diagnostic and Treatment (EPSDT)—Medicaid provides children with access to the care they need at a cost their parents can afford. EPSDT covers a comprehensive array of services for children, including developmental, vision and hearing screenings, so that health problems and developmental delays can be diagnosed and treated as early as possible, or averted altogether.(3) children, and (4) adults covered by Medicaid. Actual enrollment must be reported by the state for each category.

Sources of Children’s Coverage in Idaho

- Medicaid and Idaho Health Plan (CHIP): 46%
- Employer-Sponsored Insurance: 33%
- Purchased directly from an Insurer, including Marketplace plans: 7%
- Other including Medicare, Tricare, VA: 9%
- Uninsured: 6%

73% of all Medicaid/CHIP enrollees in Idaho are children.

Medicaid provides affordable access to the care children need.

Administrative costs in Medicaid at the national level are half the rate typical in private insurance. In 2015, children accounted for 41 percent of individuals enrolled in Medicaid nationwide but represented only 19 percent of Medicaid spending, with an average annual expenditure per child of $3,389.
Children's Health Insurance Coverage Rates Have Reached Historic Levels in the U.S. and Idaho, Thanks to Medicaid, CHIP, and the ACA.

**Protect Critical Protections in the ACA**

The ACA enacted critical protections that also benefit children and young adults covered by private insurance:

- Young adults between the ages of 19 and 26, an age group with the highest uninsured rates before the ACA, are able to stay on their parents’ health plan.
- Children with asthma, cancer, or disabilities cannot be excluded from coverage due to their pre-existing condition.
- Insurance companies cannot impose annual or lifetime benefit limits, which would be especially hard on families with children who have special health care needs.

**Keep Medicaid Strong**

Medicaid is a federal-state partnership that guarantees coverage for the most vulnerable children, and covers 35 million children in the U.S. Restructuring Medicaid with reduced federal funding will force states to pit children’s needs against other vulnerable groups, including individuals with disabilities and the elderly. Currently federal matching funds to states expand or shrink as the number of individuals enrolled or the cost of providing services changes based on need. Proposals like block grants or per capita caps that set limits on federal Medicaid funding—which accounts for 46 percent of all federal funding received by Idaho—will shift financial risk to the state to fill the gaps.

**Close the Coverage Gap**

Numerous studies show that children are more likely to be covered when their parents have coverage. Children also benefit from having healthier parents at home. The whole family must be covered to insulate families from the financial insecurity that comes from any family member becoming uninsured. Families without insulation from devastating medical costs remain extremely vulnerable financially.

**Support CHIP Funding**

CHIP funding expires at the end of fiscal year 2017. CHIP works because it stands on the shoulders of Medicaid. CHIP funding must be extended to provide certainty and stability for families who depend on it.

This fact sheet was created with help from the Georgetown University Center for Children and Families and the American Academy of Pediatrics. For data sources used, see [http://ccf.georgetown.edu/2017/02/06/snapshot-sources/](http://ccf.georgetown.edu/2017/02/06/snapshot-sources/)