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## Covering families: How generous should SCHIP be?

The State Children's Health Insurance Program (SCHIP) provides insurance coverage for an estimated 6.9 million children who are not eligible for Medicaid. Currently, 9 states provide coverage for children in families with incomes below 200% of the federal poverty level (FPL), 24 states provide coverage at 200% FPL, 9 states provide coverage between 200% and 300% FPL, and 9 states provide coverage at or above 300% FPL.

This year, national debate about SCHIP reauthorization has centered on how generous the government should be regarding family income that would qualify for the program, and whether parents should be allowed to enroll. The President's proposed budget emphasizes coverage for children under 200% FPL, while the bills passed by the House of Representatives and the Senate take different approaches to encouraging states to cover individuals in families between 200% and 300% FPL. Coverage for parents through SCHIP (currently available in 11 states) is another contentious issue, with strong arguments from legislators on both sides. Opinions of the public regarding these SCHIP issues are not known.

In March 2007, the C.S. Mott Children's Hospital's National Poll on Children's Health surveyed a nationally representative sample of households with and without children under age 18, regarding who should qualify for government-sponsored health plans based on yearly family income in ranges served by SCHIP.

Respondents were shown two vignettes describing an uninsured family consisting of a single parent with two children; the parent had a job but could not afford the health insurance offered by the employer. In one vignette, the family's yearly income was specified at \$32,000 (approximately 200% FPL). In the other vignette, the family's yearly income was specified at \$48,500 (approximately 300% FPL). For each family, respondents were asked, "Should government programs provide health insurance coverage?" Response options were coverage for children only, coverage for children and parents, or no coverage.

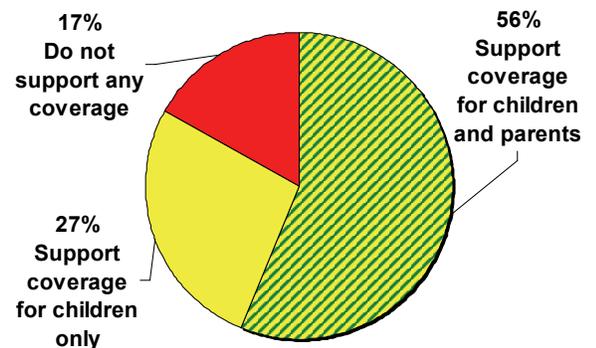
For the family with income at 200% FPL, the vast majority of respondents (83%) supported government coverage for children, and most (56%) supported coverage for children and parents (Figure 1). About one in six respondents (17%) did not support any coverage for a family with income at 200% FPL.

For the family with income at 300% FPL, most respondents (64%) supported government coverage for children, with about one-third (35%) supporting coverage for children and parents. For this vignette, 36% did not support any coverage (Figure 2, page 2).

### Report Highlights

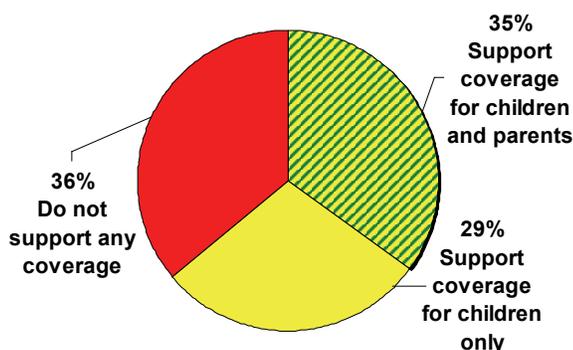
- **5 of 6 adults support government coverage for children in families with annual income up to 200% of the federal poverty level.**
- **Nearly two-thirds of adults support government coverage for children in families with annual income up to 300% of the federal poverty level.**
- **Over one-half of adults support government coverage for children and their parents in families with annual income up to 200% of the federal poverty level.**
- **About one-third of adults support government coverage for children and their parents in families with annual income up to 300% of the federal poverty level.**

Figure 1. Opinions on government coverage for a family with income at 200% of the federal poverty level.



Source: C.S. Mott Children's Hospital National Poll on Children's Health, March 2007

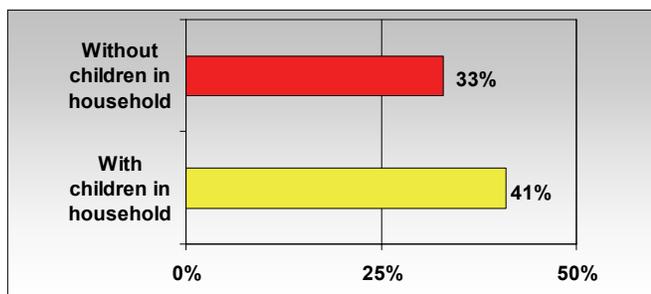
**Figure 2. Opinions on government coverage for a family with income at 300% of the federal poverty level.**



Source: C.S. Mott Children's Hospital National Poll on Children's Health, March 2007

Based on combined responses for each respondent, those with children in the household were significantly more likely than respondents without children in the household to endorse coverage for children and parents in both vignettes (Figure 3).

**Figure 3. Support for government coverage for children and parents in families at 200% and 300% of the federal poverty, with vs without children in household.**



Source: C.S. Mott Children's Hospital National Poll on Children's Health, March 2007

Blacks were more likely to support coverage for children and parents, 49%, compared with 40% of Hispanics and 31% of whites. Responses did not differ by respondent age, sex, income or health insurance coverage.

### Implications

Levels of income eligibility and coverage for parents are two central issues in this year's Congressional debate about SCHIP reauthorization. In this nationally representative sample, the public weighs in on these key questions.

Nearly two of every three adults would support government-sponsored health coverage for children in families with incomes as high as 300% of the FPL. Given that only 9 states currently use 300% FPL or higher as their eligibility threshold, our findings suggest that federal and state lawmakers who wish to expand income eligibility within their SCHIP programs may find ample public support for those initiatives.

Eleven states have implemented coverage initiatives for parents through their SCHIP programs. There is some evidence that offering coverage to parents helps promote and maintain enrollment among eligible children. On the other hand, some

legislators have argued that coverage for parents was not the intent of the original SCHIP legislation. The Senate and House versions of SCHIP reauthorization bills differ on this issue: the House bill would allow states to apply for waivers to cover parents, while the Senate bill would prohibit new waivers.

We found that a majority of American adults would support coverage for children and their parents for families with incomes up to about 200% FPL. In contrast, 35% of respondents endorsed coverage for families at 300% FPL—a lower but still considerable level of support. These findings indicate broader public support for parent coverage within lower-income families than perhaps federal and state lawmakers have appreciated previously. In this poll, we did not examine public attitudes about coverage for childless adults under SCHIP.

Importantly, support for government-sponsored health coverage through SCHIP was not universal. About one in three respondents opposed government coverage altogether for families with income at 300% FPL, and about one in six respondents opposed government coverage for families at 200% FPL. This finding is a reminder that the contentious process of SCHIP reauthorization indeed reflects opposing perspectives in the American public.

### Data Source

This report presents findings from a nationally representative household survey conducted exclusively by Knowledge Networks, Inc, for C.S. Mott Children's Hospital. The survey was administered from March 14-26, 2007, to a randomly selected, stratified group of adults aged 18 and older (n=2,076) with and without children from the Knowledge Networks standing panel that closely resembles the U.S. population. The sample was subsequently weighted to reflect U.S. population figures from the Census Bureau. The response rate was 73% among Knowledge Networks panel members contacted to participate.



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