

The Impact of Los Angeles Healthy Kids on Access to Care, Service Use, and Health Status: Preliminary Results

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In July 2003 a new program called Healthy Kids began in Los Angeles, California. This program provides new insurance for uninsured children in families with income below 300 percent of the federal poverty level who are not entitled to Medi-Cal or Healthy Families (California's State Children's Health Insurance Program).

This report presents results from the evaluation of the Los Angeles Healthy Kids Program showing the impact of the program on newly enrolling children ages one to five years of age. We found substantial positive impacts on access to care; use of specialty and dental care services; unmet need for ambulatory, preventive, specialty and dental services; and parent confidence in getting care, satisfaction with quality of care, and reduced financial worries. For example:

- The percent of children with a usual source of medical care increased by 14.5 percentage points.
- The percent with a usual source of dental care increased by 27.6 percentage points.
- The percent with specialist care increased by 5.4 percentage points.
- The percent with dental care increased by 14.3 percentage points.
- Unmet need for specialty care decreased by 6.4 percentage points.
- Unmet need for dental care decreased by 9.1 percentage points.
- The percent of parents reporting that they were confident they could get care for their child increased by 21.8 percentage points.
- The percent of parents satisfied with their child's quality increased by 15.9 percentage points.

The strong health care safety net for children in Los Angeles provides substantial protection for uninsured children, and many already had a usual source of care and preventive care before they enrolled in the program. However, there is strong evidence that their care improved after they enrolled, especially among those who had no usual source of care before enrolling. These improvements in access and use of services—particularly specialist care—led to a 4.8 percentage point reduction in emergency room use after enrollment in Healthy Kids.

Most important, the health of these very young children improved in the year after they enrolled in the program. Similar improvements in health we also experienced by children who had been enrolled for more than a year, suggesting that the impacts of the program are sustained over time. This indicates that Healthy Kids has improved the prospects of success for these young children as they approach school age.