CHILD SAFETY BLOG

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Kids on Medicaid go to the back of the health care waiting line

Children on the public Medicaid program who need to see a doctor for a serious but non-emergency health issue are shunned by many pediatricians' offices when their parents try to get appointments, according to a new study.

Two out of three get rejected entirely, and the average wait time for those who do get an appointment is three weeks longer than kids on private insurance.

Patrick A. Malone Patrick Malone & Associates, P.C. 1331 H Street N.W. Suite 902 Washington, DC 20005 pmalone@patrickmalonelaw.com www.patrickmalonelaw.com 202-742-1500 202-742-1515 (fax) This study gives scientific credence to the common hunch that children with public health insurance

receive lesser care than those with private insurance.

According to an auditing study published in the New England Journal of Medicine this month,

expanded eligibility for Medicaid and the Children's Health Insurance Program (CHIP) has not been

accompanied by easier access.

"There's never been a study this comprehensive or this rigorous that actually measured access to

specialty care, let alone children's access," said Karin V. Rhodes, M.D., an author of the study and

director of emergency care policy research in the department of emergency medicine at the

University of Pennsylvania.

Researchers telephoned clinics for medical appointments pretending to be the parent of a child with

an urgent problem that wasn't an emergency. Problems included diabetes, seizures, asthma and

broken bones. If asked, they said a primary care doctor or emergency department had referred them.

Sixty-six percent of the Medicaid-CHIP callers were denied an appointment versus 11% of privately

insured callers.

Among 89 clinics that accepted both types of insurance, the average wait time for Medicaid-CHIP

enrollees was 22 days longer than that for privately insured children.

Researchers attributed the disparity to low and delayed Medicaid fees that also were encumbered by

red tape. The study, said the New York Times, is one of only a few efforts to measure access to health

care among people with Medicaid.

Medicaid supplies coverage to one in five Americans at some point in a given year, and publicly

insured patients are poised to find themselves wedged even deeper between the rock of financially

strapped states and the hard place of diminishing coverage. As described in another New York Times

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story, the Obama administration's infusion of billions of dollars into Medicaid during the depths of the recession is expiring, and benefits are being cut for millions of recipients.

In one example from the study, Medicaid paid \$99.86 for an office visit for a problem of "moderate severity," compared with \$160 from a private insurer. Several doctors said their practices were threatened by accepting too many Medicaid patients, Rhodes reported; specialists said they would be willing to treat more Medicaid patients but the academic medical centers with which they were affiliated pressed them to see more patients with private insurance.

As health-care experts widely acknowledge, the blowback of diminishing resources will be felt elsewhere within the health-care system. Patients whose doctors refuse to accept lower Medicaid payments often turn to hospital emergency rooms for routine as well as urgent care. Other health-care providers--individuals and institutions--often try to recover lost Medicaid revenue with increased charges to privately insured patients.

Those children who get their care through emergency rooms often are sicker than kids with more ready access to the health care system, because their harried parents wait until the child is really, really sick to go to the ER. Their care winds up being more expensive than if the illness was nipped in the bud with earlier care. Thus a vicious cycle is born.

Meantime, the harsh and impossible reality for poor families is: Don't let your kid get sick.

Families interested in learning more about our firm's legal services, including legal representation for children who have suffered serious injuries in Washington, D.C., Maryland and Virginia due to medical malpractice, defective products, birth-related trauma or other injuries, may ask questions or send us information about a particular case by phone or email. There is no charge for contacting us regarding your inquiry. An attorney will respond within 24 hours.

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