

759,000 children with asthma endure gaps in insurance every year

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Every year, 759,000 children with asthma may be at risk of a major asthma attack while they have no health insurance. About 30 percent of those families earn more than 200 percent of the federal poverty level, putting them above the threshold for the state children's health insurance program in most states.

“Too many children with this chronic condition are without insurance at some point during the year,” said Jill Halterman, M.D., M.P.H., associate professor of Pediatrics at the University of Rochester and author of the study that appears in *Ambulatory Pediatrics* today. “These children need to have ongoing treatment from a primary care provider to avoid serious health complications. Without that, they are at increased risk for ongoing symptoms and even hospitalization.”

About 13 percent of children with asthma were without insurance at some point during the year. That includes 2 percent – or 114,000 children – who were uninsured for the entire year. Those same children were 14 times more likely to have had an unmet need for medication than children with private insurance. Even those who gained insurance by the time of the survey were six times more likely to have missed out on needed medication.

The study, which is an analysis of data from the National Survey of Children's Health (conducted by the Center for Disease Control's National Center for Health Statistics between January 2003 and July 2004), also showed that many children with asthma were not seeing a

regular physician often enough. Almost one-third of parents of uninsured children said they had no personal primary care doctor for their child. More than one-third of parents of children who had lost insurance and about half of parents of children with no insurance for a full year said their child hadn't seen a personal doctor for preventive care in the past year.

“Healthy children should see a physician for preventive care at least once a year. Children with asthma need even more consistent care to prevent asthma attacks and other related illnesses. No year should go by for a child with asthma without at least one, if not more, visits to their regular physician to update treatment plans and address ongoing health issues,” Halterman said. “We, as physicians, have very clear guidelines about how to effectively manage a child’s asthma symptoms, but we can’t help these children if we don’t see them.”

No differences were found between children with private and public insurance, when it came to unmet needs, discontinuity in care or poor access. This suggests that consistency of coverage for children with asthma is more important than the source of insurance. Recent studies conducted by the University of Rochester Medical Center have shown that providing insurance to children with asthma through the State Child Health Insurance Program (SCHIP) reduces their unmet needs and reduces racial disparities in access to care.

“No child, especially one with a chronic health condition such as asthma, should go without health care because of situations over which they have no control. Insurance costs a lot to buy, and many people can’t get approved because of past health problems. There will always be families who earn too much to qualify for private insurance yet too little to afford private insurance. It is hard to see children suffer with conditions like asthma, where we know what to do and we know that it helps – just because they cannot get health insurance.” said Laura Shone, Ph.D.,

M.P.H., an assistant professor of pediatrics at the University of Rochester Medical Center and an author of this study and several others on children's access to care.

Source: University of Rochester Medical Center

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