



Youngest Californians Need Continuous Medi-Cal Coverage

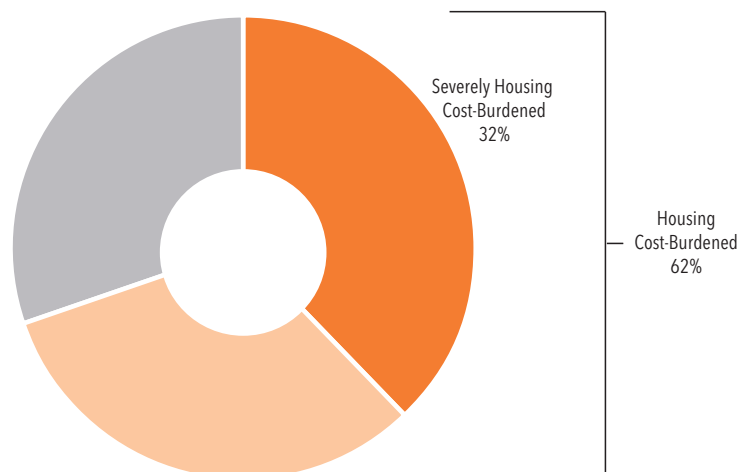
APRIL 2022 | BY ADRIANA RAMOS-YAMAMOTO AND SARA KIMBERLIN

Consistent access to health care is necessary for everyone to be healthy and thrive. During the pandemic, millions of Californians with low incomes have been able to keep their Medi-Cal coverage without administrative renewals and regardless of changes to their income. This is because of a temporary “continuous coverage” federal provision.¹ Despite ongoing hardships due to the pandemic, this federal provision may expire soon, which would disrupt health coverage for many.

Continuous health coverage allows children to receive preventive and primary care services, which is crucial for very young children. Children who face housing insecurity are particularly vulnerable to losing coverage. When families move, double up with other households, or fall into homelessness, they may not receive timely information or submit paperwork required to maintain coverage, and they could lose continuity of care. About 6 in 10 children under age 5 who are income-eligible for Medi-Cal live in households that pay an unaffordable amount toward housing, placing them at risk of unstable housing and making continuous coverage critical.

About 6 in 10 Young Children Eligible for Medi-Cal Are at Risk of Housing Insecurity

Children Under Age 5 Eligible for Medi-Cal in Housing Cost-Burdened Households, 2019



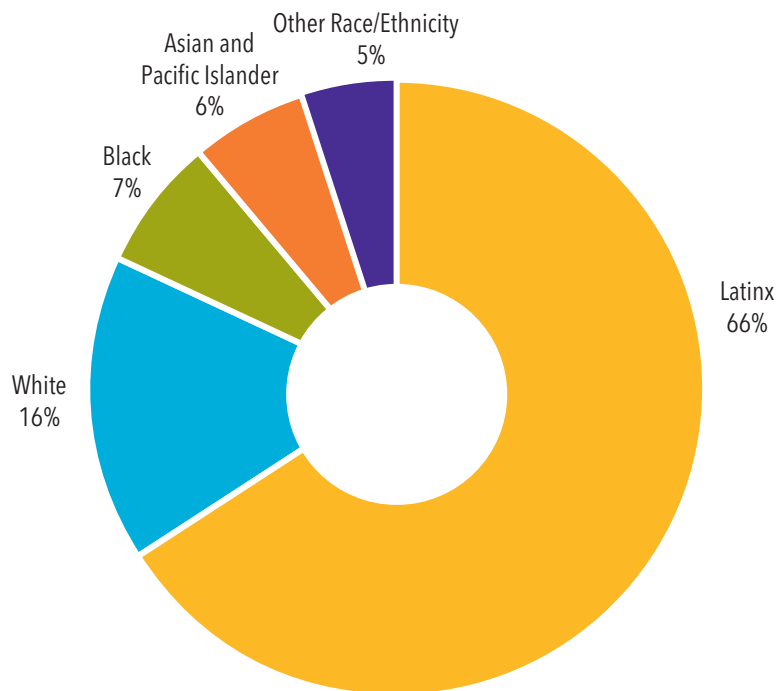
Note: Children identified as Medi-Cal-eligible based on Modified Adjusted Gross Income (MAGI). Housing cost-burdened defined as household paying more than 30% of income toward housing and severely cost-burdened defined as household paying more than 50% of income toward housing. Source: Budget Center analysis of US Census Bureau, American Community Survey public-use microdata downloaded from IPUMS USA, using tax simulation model developed for the California Poverty Measure, a joint project of Stanford Center on Poverty & Inequality and Public Policy Institute of California.

The loss of continuous health coverage will particularly affect Latinx children in California. Latinx children make up about 2 in 3 (66%) young children who are income-eligible for Medi-Cal and live in households that pay an unaffordable amount of their income toward housing, exposing the damaging effects of racism.

State policymakers should provide continuous coverage for children on Medi-Cal until at least their fifth birthday. Every child should have the resources and opportunity to grow up healthy and thrive.

About 2 in 3 Young Children Eligible for Medi-Cal and at Risk of Housing Insecurity Are Latinx

Race/Ethnicity of Medi-Cal-Eligible Children Under 5 in Housing Cost-Burdened Families, 2019



Note: Children identified as Medi-Cal-eligible based on Modified Adjusted Gross Income (MAGI). Housing cost-burdened defined as household paying more than 30% of income toward housing. Source: Budget Center analysis of US Census Bureau, American Community Survey public-use microdata downloaded from IPUMS USA, using tax simulation model developed for the California Poverty Measure, a joint project of Stanford Center on Poverty & Inequality and Public Policy Institute of California.

¹ A provision in the federal Families First Coronavirus Response Act prohibits states from disenrolling Medicaid beneficiaries during the federally declared Public Health Emergency (PHE). The PHE will expire on April 16, 2022 unless the US Secretary of Health and Human Services Secretary extends it again.