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# Children's Medical Center Dallas joins effort to cut number of uninsured children

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[Texas](#) leads the nation in the number of uninsured children, and with the [White House](#) now focused on health care reform, Children's Medical Center [Dallas](#) sees an opportunity for key policy changes.

The hospital said Monday that it has joined the National Association of Children's Hospitals to bolster its voice in Washington's health reform discussions.

One problem the association cited with current state and federal options for children is that a child's chances of being uninsured vary dramatically among states, from a low of one in 30 children in [Massachusetts](#) to a high of one in five children in Texas.

"Texas has policies that make it difficult for many to get insurance," said Julia Easley, director of the advocacy program at Children's Medical Center Dallas.

She said 1.5 million Texas children are uninsured.

If all children eligible for the state's Medicaid and the Children's Health Insurance Plan were enrolled today, the number of uninsured children would drop by 70 percent, from 8.8 million to fewer than 3 million, according to the association's statistics.

Easley wants Texas lawmakers to increase the CHIP insurance eligibility period from six months to a year.

"It's a hassle to get through the application process," Easley said. "Many parents have to do it several times, or they don't send in the right paperwork. Even after you're approved, two months later you get a renewal notice that your child's insurance is going to run out in four months."

The longer children have health insurance, the better access they have to health care, according to a February research report from the [Institute of Medicine](#) of the National Academies, a nonprofit biomedical science, medicine and health research group in Washington, D.C.

Tara Haggerty, a 37-year-old single mother in Dallas, said her children, Isaiah, 12, and Leah, 6, would be uninsured if they did not qualify for Medicaid and CHIP.

Leah, who has attention deficit hyperactivity disorder, requires a \$200 medication every 30 days.

But underscoring another dilemma with the state's Medicaid system, Haggerty, a receptionist at Head Start of Greater Dallas earning \$10.69 an hour, recently turned down a promotion to an administrative assistant

position earning \$13.17 an hour.

By accepting the job, she would be making too much money under the state's Medicaid and CHIP rules.

"Right now it's more important to have their health coverage than the extra income," Haggerty said.

The association also wants to eliminate the indirect discrimination between publicly and privately insured children, as children with government-backed insurance plans have a tougher time finding a doctor.

Pediatricians have an incentive to not take on patients with Medicaid coverage. On average, Medicaid reimburses pediatricians at 69 percent of the rate that would be paid under Medicare and 56 percent of commercial insurance rates, according to the association.