

Latino Bienestar, Health Care Reform & State Children Health Insurance Plan

Brief

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Latino bienestar is largely influenced by a paradigm of cultural values, socio-economic circumstances and environmental conditions that are intrinsically connected to the health and well-being of Latino families and community. Unfortunately, the health status and economic well-being of Latinos is worsening. The social determinates of Texans, particularly among Latinos, requires Texas policy-makers to be innovative in addressing affordability, accessibility and health disparities in their health care reform strategies.

But amid this economic and health care crisis, it has become more critical that Texas find a balance of conducting the State's bi-annual business while addressing the policy needs of Texas, such as the uninsured crisis as well as developing good policies that will sustain Texans through this difficult time. For that reason, it is vital that Gov. Perry and the 81st Legislature accept and optimize the funds provided to the state from the American Recovery and Reinvestment Act (ARRA) of 2009.

Latinos account for the largest percentage change in the population. In Texas, 4 in every 9 Texas children are Latino. Latinos are also the most uninsured population, **33%, 39%, and 36%** in the U.S., Texas, and Texas border communities respectively. Latino children are 2.5 times more likely to be uninsured compared to white children.

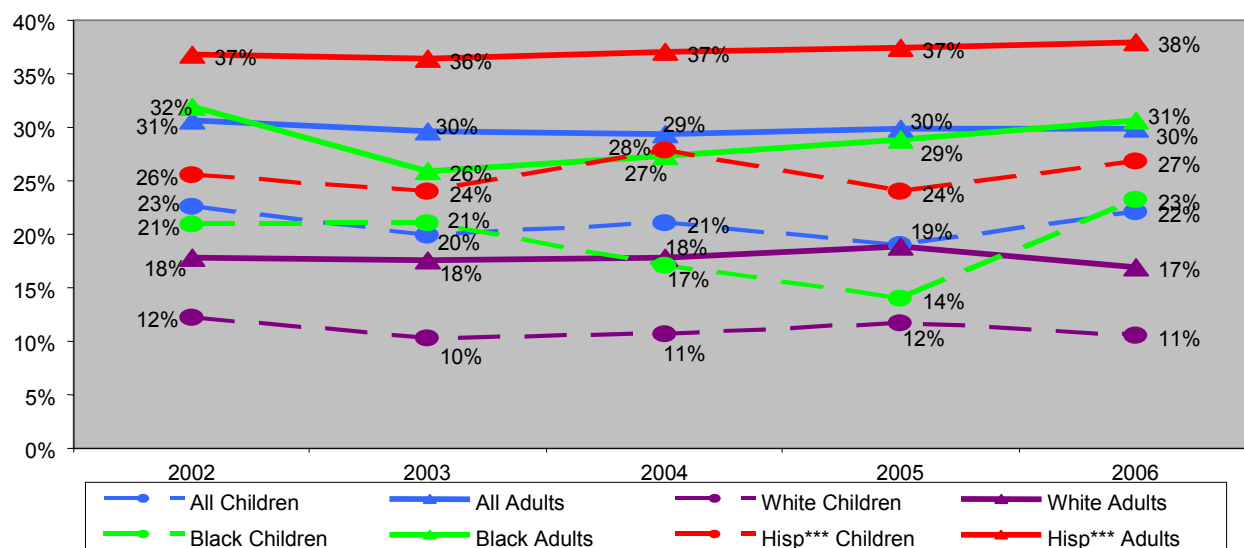
Texas ranks:

- 1st in Uninsured Children
- 1st in % of Population without health insurance
- 2nd in Income Inequality between rich and poor
- 3rd in % Living below the Federal Poverty Level
- 4th in % of Population Under 18 yrs.
- 5th in % Children Living in Poverty

Texas is among the states with the lowest coverage for children in Employer Sponsored health insurance (ESI). SCHIP often serves as the only vehicle to health insurance coverage for children of working families in Texas. Two-thirds of SCHIP enrollees live in families with no access to ESI and 73% of Texans are employed in small businesses. A Texas Department of Insurance survey cited two-thirds of all small businesses cannot afford premiums and are notable to provide health care insurance to employees. SCHIP eligible children whose parents work in a small business or are self-employed have a *one in four* chance of being uninsured compared to parents who work in a large firm (*one in ten*). Latinos primarily work in small businesses, more likely to live in poverty and be uninsured.

The vital resources from both ARRA and Children's Health Insurance Program Reauthorization (CHIRA) offer Texas an opportunity to set the stage for transforming access to health care. SCHIP is a means to address growing health insurance disparities that plagues the Latino community and a large majority of Texans.

Texas Uninsured Adults* and Children by Race/Ethnicity; 2002-2006**



Source: U.S. Census Bureau Current Population Survey; 2003-2007
 *Adults are individuals 19-64 **Children are individuals 0-18 ***Hispanic includes only native and naturalized citizens

SCHIP: Addressing Health Insurance Disparities

Hispanics carry an undo burden with greater challenges to accessing health care. The health disparities in Latino families are intensified by the inequality in access to quality health care. For that reason we support policies that address:

Affordability as Latino families and children are most likely to live in poverty, be from working families who most likely work in small business and more likely to be uninsured. Hence, until some universal health care system is realized, providing opportunities for Texas families to not only access but be able to afford health care coverage through some policy means is vital. We encourage that Texas:

- **Optimize available resource** in CHIPRA to provide coverage to more children in Texas.

Accessibility is vital to healthy outcomes and addressing health care challenges of Texas Latinos who are most likely to be uninsured and reside in underserved health care areas. It is estimated that 116 of 246 Texas counties are in health professional shortage areas based on HRSA reporting. Thus, we support legislative efforts such as:

- **Expand access through the Medicaid Buy-in** programs given that Latinos are most likely to have limited access or no access to ESI. Approximately 6 in 10 families live between 200-300% Federal Poverty Level.
- **Improve continuity of care** by moving Medicaid re-enrollment from 6 month to 12 months similar to SCHIP.
- **Eliminating barriers and obstacles** in Medicaid by streamlining the eligibility system to include more staff, inter-agency information exchanges and new technology. By these efforts, Texas will have access to incentive funding from federal funds to provide more access to eligible children.
- **Improve outreach and Marketing resources** and funding of SCHIP and Medicaid program to eligible individuals.

Health Disparities: Over the next decade, the prevalence of disease will shift from Whites to Latinos who are primarily young and of working age. It is estimated that 23% of Texas children are over-weight and it is expected to grow over the next ten years particularly among low –income Black and Latino children. Therefore, the socio-economic, health disparities and environmental circumstances of uninsured Latinos must be considered to develop and implement effective policy solutions. Thus we support efforts to:

- **Increase access to preventive and primary care** such as HB 2686 (Shelton) Pilot project to increase CHIP enrollees' access to primary care services and simplify enrollment.
- **Eliminate obstacles to health care coverage** due to pre-existing conditions
- **Increasing the number of health professionals of color** through a goal of reaching parity representation.
- **Improve Medicaid reimbursement** for doctors to improve access for children

La Fe Policy Research and Education Center (La Fe PREC) is a non-profit organization established in January 2006, to engage in *policy analysis, education, leadership training, promoting civic involvement and advocacy* for system changes in health and social policies. We believe in Promoting Family and Community Well-Being through Knowledge, Trust, and Empowerment.

Bienestar (well-being) is at the heart of La Fe PREC and affirms our cultural experience and holistic values. Bienestar defines a concept that advocates for equitable access to social, economic, and health and human resources for individuals and families in our community.

Our Vision: Mexican American families have comprehensive access to health and human resources that are available, accessible, acceptable, and accountable to their health values, decisions, and needs that positively contribute to their health and Bienestar.

Our Mission: To improve the decision-making capacity of Mexican Americans leading to their increased involvement in system changes in health and social policies.

La Fe PREC is a component of **Centro de Salud Familiar- La Fe**, based in El Paso, Texas. La Fe is a multiple service organization with over 40 years of social justice, and direct service delivery experience in health care, social and mental health services, housing, economic development, and education.