

Testimony of Stephanie Eglinton,
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Before the Joint Standing Committee on Health Coverage, Insurance and Financial Services

LD 1463, An Act to Make Health Care Coverage More Affordable for

Working Families and Small Businesses

May 12, 2021

Senator Sanborn, Representative Tepler, and members of the Committee on Health Coverage, Insurance and Financial Services, my name is Stephanie Eglinton and I am offering testimony in support of LD 1463 on behalf of the Maine Children's Alliance, a state-wide nonpartisan, non-profit research and advocacy organization whose mission is to advocate for sound policies and promote best practices to improve the lives of Maine's children, youth and families.

Access to quality, affordable health care is critical for child health and well-being. When children have insurance, they can get the preventive care they need to grow and develop and are more likely to have positive, long-term health outcomes. Research shows that children without health insurance are more likely to have significant trouble accessing care when they need it. Nationally, the rate of uninsured children had been decreasing in recent years due in large part to Medicaid, the Children's Health Insurance Program (CHIP), and the Affordable Care Act (ACA). These programs work together to cover eligible children and families who qualify based on family income. In addition, research shows that health care coverage for children and parents is linked. When parents do not have access to health insurance, their children are more likely to be uninsured, regardless of eligibility.

Despite Medicaid expansion, the rate of uninsured children increased in 2019 to 5.2 percent nationally and to 5.7 percent in Maine.<sup>5</sup> This means approximately 14,500 Maine children do not

<sup>1.</sup> Bloom B, Cohen RA, Freeman G. Summary health statistics for U.S. children: National Health Interview Survey, 2011, National Center for Health Statistics. Vital Health Stat 10(254). 2012.

<sup>2.</sup> Kaiser Commission on Medicaid and the Uninsured. The Uninsured: A Primer – Key Facts About Health Insurance and the Uninsured in the Era of Health Reform. Washington, DC (2016).

<sup>3.</sup> Alker, J., Chester, A., Georgetown University Health Policy Institute, Center for Children and Families. Children's Health Coverage Rate Now at Historic High of 95 Percent. Washington, D.C. (2016)

<sup>4.</sup> Institute of Medicine (US) Committee on the Consequences of Uninsurance. Washington (DC): National Academies Press (US): 2002

<sup>5.</sup> KIDS COUNT Data Center, Children under age 19 without health insurance in Maine <a href="https://datacenter.kidscount.org/data/tables/8437-children-under-age-19-without-health-insurance?loc=21&loct=2#detailed/2/any/false/37,871,870,573,869,36,868,867,133,38/any/17058,17059">https://datacenter.kidscount.org/data/tables/8437-children-under-age-19-without-health-insurance?loc=21&loct=2#detailed/2/any/false/37,871,870,573,869,36,868,867,133,38/any/17058,17059</a>

<sup>6.</sup> Kaiser Family Foundation, The ACA Family Glitch and Affordability of Employer Coverage <a href="https://www.kff.org/health-reform/issue-brief/the-aca-family-glitch-and-affordability-of-employer-coverage/">https://www.kff.org/health-reform/issue-brief/the-aca-family-glitch-and-affordability-of-employer-coverage/</a>

have health insurance coverage. With more than half of Maine children receiving health care coverage through private insurance, it is likely that the COVID-19 crisis is having an impact on children's health insurance coverage, as parents have lost employment, and with it, their health insurance.

LD 1463 addresses the "family glitch" when an employer offers family coverage, but the employee cannot afford to add their spouse or children to the plan. An estimated 34,000 Mainers find themselves in this situation, and as many as half of them are children. Due to a glitch in the Affordable Care Act, the offer of family coverage from the employer prevents the family members from qualifying for subsidies in the Marketplace, leaving them with no options for affordable health coverage.

For low-income Mainers who do not qualify for MaineCare, but do qualify for subsidies on the Marketplace, those subsidies are still not adequate to make their health care affordable. The Kaiser Family Foundation estimates that only 63 percent of Mainers eligible for Marketplace subsidies in 2019 were enrolled in a subsidized plan. Increasing subsidies by even a small amount can dramatically increase enrollment among eligible people, who may otherwise be forced to choose to spend scarce financial resources on other basic needs.

Affordable, adequate health care coverage was already unattainable for too many Mainers before the pandemic. The public health and resulting economic crisis have only underscored the importance of health care for all Mainers to ensure our collective health and well-being. When Mainers can afford coverage, they can get routine and preventive health care. When parents have health care coverage, it is more likely their children will get the care they need to grow and develop in a healthy way.

We have a unique opportunity through this legislation to capitalize on millions of dollars - money that would otherwise be lost – to make health coverage more affordable for Mainers at a time when access to care has never been more important. This is a commonsense approach we should take to invest in the health and well-being of the families, children, and communities of our state.

Thank you for your consideration.

<sup>7.</sup> Kaiser Family Foundation, Marketplace Enrollees Receiving Financial Assistance as a Share of the Subsidy-Eligible Population <a href="https://www.kff.org/health-reform/state-indicator/marketplace-enrollees-eligible-for-financial-assistance-as-a-share-of-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subsidy-eligible-subs

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