The Quest for Health care access for children with Special Health care Needs: Is Medicaid expansion a way out?

Children with Special Health Care Needs (CSHCN) are children that require medications (other than Multivitamins), medical care, have mental health issues or activity limitations caused by physical, mental, or emotional problems and use special therapies such as physical, occupational and speech therapy. An estimated 14.2 million children in the U.S., have special health care needs and 5 million CSHCN need to transition from a pediatric-based to adult-based health care setting yearly. To ensure appropriate care, the health care transition should be done as a planned process. Health care costs and lack of insurance can be a limiting factor and affect the efficiency of the transition. The Affordable Care Act, through its Medicaid expansion, led to increased health insurance enrollment and access to care, and decreased out-of-pocket costs on health care among all young adults, including those with disabilities.

In this study we investigated the impact of Medicaid expansion in the transition of care for CCHC, focusing on the effect pre and post covid-19 pandemic by analyzing National Survey of Children's Health 2016-2021. Data were obtained from the NCHS from 2016 to 2021; for fifty states and DC. and the status of each state was verified through the Kaiser Family Foundation database. A logistic regression with repeated measures for State using generalized estimated equation and an unstructured correlation matrix was performed.

After controlling for state-level effects and time, the odds that a CSHCN will get adequate care is 32% higher in states that have Medicaid expansion (p=0.01). During raw analysis, it was noted that during COVID-19 pandemic states with Medicaid expansion had higher percentage of kids getting their needs met.

Medicaid plays a key role for CSHCN and improves quality of care. The effect was more significant when comparing pre and post pandemic era, which is expected given the pandemic disrupted the health care transition for CSHCN.