

Uninsured children most at risk for insufficient health care experiences

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Researchers at the Keck School of Medicine at the University of Southern California (USC) examined medical home trends in children's primary care from 2003 to 2012 and found that while this specific healthcare model has improved children's primary care overall, certain aspects of children's patient care experience have worsened. Moreover, upon analyzing various at-risk profiles, the team found that uninsured children were subject to more insufficient levels of care.

The study, entitled "National Trends in Indicators of a Medical Home for Children," was published in the March issue of *Maternal and Child Health Journal*. Researchers have previously examined the effectiveness of the [medical home](#), a team-based approach to healthcare that includes a personal physician who provides accessible, continuous, comprehensive and family-centered care to each patient. However, this unique medical home study measures success based on patient experience rather than physician experience.

"Overall, the medical home experience has improved over time for children across the nation, although some aspects have worsened," said Gregory Stevens, PhD, associate professor of family medicine and preventive medicine at Keck School of Medicine and lead author of the study. "Children have better access to healthcare and a more continuous experience with their physicians. But children do not always have sufficient time with their physicians, and may not be receiving all the medical care that they need."

To better analyze children's medical home experiences, the team created several sociodemographic subgroups. In situations where children did not have positive medical home experiences, the team identified risk factors that may have contributed to poor outcomes, such as the level of education of the child's parents, amount of insurance coverage and whether or not the child lived under the poverty line.

"We found that children identified with more risk factors had more volatile changes in their healthcare," said Alice Kim, MPH, project associate at the RAND Corporation, who co-authored the study.

"Primary care experiences for vulnerable children decline more sharply when the overall healthcare environment declines; but they also improve more when resources are abundant."

There was one subgroup, however, that seemed to fall behind even when other at-risk subgroups improved. Uninsured children had the lowest and most unstable medical home experiences over the past decade. The uninsured subgroup also had the children in most need of constant, quality care.

"We need to make extra efforts to ensure that all children have access to quality healthcare," said Stevens. "Even if the Affordable Care Act is implemented exactly as planned, millions of people are expected to go without insurance, including children. We need to think of other ways to ensure that insurance is available for all [children](#), or we need to expand other community resources."

More information: Gregory D. Stevens et al. National Trends in Indicators of a Medical Home for Children, *Maternal and Child Health Journal* (2015). [DOI: 10.1007/s10995-015-1902-z](https://doi.org/10.1007/s10995-015-1902-z)

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