



PRESS RELEASE:

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## Utah's *KIDS COUNT* Child Health Ranking Drops From 7<sup>th</sup> in 2015 to 27<sup>th</sup> in 2016

*Utah's child health insurance and child death rates stagnated while most of the nation improved*

SALT LAKE CITY – Utah barely held on to a top ten position in the annual 2016 Annie E. Casey Foundation *KIDS COUNT*<sup>®</sup> *Data Book* report, ranking 10<sup>th</sup> among 50 states, in spite of a dramatic change in the health domain, where Utah dropped from seventh in 2015 to 27<sup>th</sup> in 2016. Utah's second place ranking for the family and community domain and eighth place ranking for economic well-being remained unchanged. Utah ranked 21<sup>st</sup> for education, up from 29<sup>th</sup> in 2015.

The most recent *Data Book* rankings use 2014 health insurance coverage data—the first dataset to reflect nationwide changes in coverage due to implementation of the Affordable Care Act (ACA). Most of the nation experienced significant gains in children's health insurance coverage between 2013 and 2014, when major provisions of the ACA took effect. The uninsured rate for children in the United States declined significantly from 7.1 percent in 2013 to 6.0 percent in 2014. States that expanded Medicaid coverage to more uninsured adults through the ACA saw nearly double the rate of decline in uninsured children compared to states like Utah that didn't accept the ACA's Medicaid option. Between 2013 and 2014, the uninsured rate for Utah children remained relatively stagnant at 9 percent.

Utah now has one of the lowest rates of child health insurance coverage in the nation. Even more alarming, Utah is worst in the nation for insuring Hispanic children and children with family incomes below 200% of the federal poverty level. Nationwide, 9.7 percent of Hispanic children are uninsured but 23.4 percent of Utah Hispanic children are uninsured. In 2014, 17 percent of Utah children in families living below poverty did not have health insurance coverage compared to 7 percent nationwide.

Utah is one of only two states where the child and teen death rate has not decreased since 2008. The nation's teen and child death rate dropped from 29 deaths per 100,000 children ages 1 to 19

in 2008 to 24 children per 100,000 in 2014. Utah's 2014 teen and child death rate exceeded the national rate at 28 per 100,000, with no progress since 2008, when the rate was also 28 per 100,000. Teen suicide is on the rise in Utah. In 2008, Utah saw 27 youth ages 10-19 commit suicide for a rate of 6.2 per 100,000. By 2014 the number of suicides in the same age group had doubled to 60 for a rate of 12.6. This increase coupled with a stagnation in health insurance is a big part of why the state's health ranking fell.

“As other states accept Medicaid expansion dollars and reduce their child death rates, Utah's ranking will continue to drop unless we take similar steps to improve children's health here in Utah,” said Terry Haven, deputy director of Voices for Utah Children. Haven listed several ways Utah could improve children's health:

- Cover the gap. States that fully expanded Medicaid saw more improvement in children's health insurance coverage than states like Utah. Utah lawmakers chose to leave money on the table in Washington rather than fully cover the gap. Expanding Medicaid would help Utah address the state's low enrollment of eligible children in Medicaid and CHIP, as newly eligible adults enroll their whole families. At least 22 percent of Utah children who are eligible for CHIP and Medicaid are not enrolled.
- Follow through with 2016 legislation work. During the most recent session, Utah lawmakers started to remove some of the barriers to children's enrollment. They added intent language to end the 5-year wait for lawfully residing immigrant children, chose to study options to improve continuity in children's Medicaid care, and allocated one-time funding to Medicaid and CHIP outreach for the first time in years.
- Adopt 12-month continuous eligibility for children on Medicaid to assure continuity in coverage and fully restore outreach funding for CHIP and Medicaid to help reduce high rates of non-insurance, particularly among Hispanic children.
- Expand children and family's access to regular developmental and behavioral health screenings, referral and treatment services, to help address children's mental health needs before they escalate.

The *Data Book* shows that teenagers across the nation—including Utah—are avoiding bad choices that could derail their future prospects. Since 2008, in almost every state including Utah, teen drug and alcohol abuse has declined by double digits. In Utah, the teen birth rate fell by more than 40 percent; and a higher percent of high school kids are graduating on time. Nationally, comparing data between 2008 and 2014, teen birth rates fell by 40 percent, drug and alcohol abuse dropped by 38 percent, and the percent of teens graduating on time increased by 28 percent.

These improvements are remarkable given the economic challenges faced by far too many families. Despite rising employment numbers, more children lived in poverty in 2014 than in 2008. In Utah, the child poverty rate rose from 10 percent to 13 percent during that time period.

“With more young people making smarter decisions, we must fulfill our part of the bargain, by providing them with the educational and economic opportunity that youth deserve,” said Patrick McCarthy, president and CEO of the Casey Foundation.

In the *Data Book*, the Casey Foundation offers a number of recommendations for how policy makers can ensure all children are prepared for the future:

- Increase opportunity by expanding access to high-quality Pre-K and early childhood services so that all children are prepared to succeed in school. In addition, expand access to higher education and training so that every low-income child has a fair chance to develop his or her potential.
- Increase the Earned Income Tax Credit for low-income workers who do not have dependent children. This strategy will bolster workers, who may in fact be helping to support children who do not live with them and who are struggling to get by on low wages.
- Policies can ensure American families have a measure of security, particularly low-income parents of young children, by providing paid family leave that helps them balance their obligations at home and in the workplace.

The 2016 *Data Book* will be available June 21 at 12:01 a.m. EDT at [www.aecf.org](http://www.aecf.org). An embargoed copy is available here: [LINK](#)

Additional information is available at [datacenter.kidscount.org](http://datacenter.kidscount.org), which also contains the most recent national, state and local data on hundreds of indicators of child wellbeing. The Data Center allows users to create rankings, maps and graphs for use in publications and on websites, and to view real-time information on mobile devices.

*Voices for Utah Children works to make Utah a place where all children thrive. We start with one basic question: "Is it good for kids?" At Voices for Utah Children, we believe that every child deserves the opportunity to reach his or her full potential. And to achieve this vision, we focus on five key areas that benefit the healthy development of all children. For more information, visit [utahchildren.org](http://utahchildren.org).*

*The Annie E. Casey Foundation creates a brighter future for the nation's children by developing solutions to strengthen families, build paths to economic opportunity and transform struggling communities into safer and healthier places to live, work and grow. KIDS COUNT<sup>®</sup> is a registered trademark of the Annie E. Casey Foundation. For more information, visit [www.aecf.org](http://www.aecf.org).*

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