

**EXHIBIT 40.** Use of Care among Non-Institutionalized Individuals Age 0–18 by Primary Source of Health Coverage, 2014, Data from Medical Expenditures Panel Survey

Characteristics	Primary coverage source at time of most recent interview <sup>1</sup>			
	Total	Private <sup>2</sup>	Medicaid/CHIP <sup>3</sup>	Uninsured <sup>4</sup>
<b>Total (percent distribution across coverage sources)<sup>5</sup></b>	<b>100.0%</b>	<b>53.5%</b>	<b>37.5%</b>	<b>7.3%</b>
<b>Contact with health care professionals (past 12 months)</b>				
Number of office-based visits (to a doctor or other health professional), excluding dental visits and inpatient hospital stays				
None	25.3	20.6*	27.2	46.7*
At least 1	74.7	79.4*	72.8	53.3*
1	23.5	23.0	24.4	22.0
2–3	26.4	28.0	26.6	17.9*
4 or more	24.8*	28.4*	21.7	13.4*
Had at least 1 overnight hospital stay	2.9	1.9*	2.8	†
Received care at home	1.3	†	1.4	†
Saw a general dentist	43.6*	50.7*	38.0	29.0*
Saw an orthodontist	9.2*	13.5*	4.1	4.4
<b>Receipt of appropriate care (past 12 months)</b>				
Had dental cleaning, prophylaxis, or polishing <sup>6</sup>	47.8*	46.0*	53.1	48.5
Had more than 15 office-based or hospital outpatient visits	4.1	5.0*	3.4	†
Number of emergency room visits				
None	87.2*	89.7*	84.4	88.8*
At least 1	12.8*	10.3*	15.6	11.2*
1	9.8*	8.4*	11.4	8.1*
2–3	2.7*	1.9*	3.8	†
4 or more	0.3	†	†	†

**Notes:** Percentage calculations for each item in the exhibit exclude individuals with missing and unknown values. Standard errors are available online in the downloadable Excel version of this exhibit at <https://www.macpac.gov/publication/use-of-care-among-non-institutionalized-individuals-age-0-18-by-primary-source-of-health-coverage-data-from-medical-expenditures-panel-survey/>. Due to differences in methodology (such as the wording of questions, length of recall periods, and prompts or probes used to elicit responses), estimates obtained from different survey data sources will vary. For example, the National Health Interview Survey (NHIS) is known to produce higher estimates of service use than the Medical Expenditures Panel Survey (MEPS). For purposes of comparing groups of individuals, the NHIS provides the most recent information available. For other purposes, such as measuring levels of use relative to a particular benchmark or goal, it may be appropriate to consult estimates from MEPS or another source.

\* Difference from Medicaid/CHIP is statistically significant at the 0.05 level.

† Estimate is unreliable because it has a relative standard error greater than 30 percent.

– Dash indicates zero; 0.0% indicates an amount less than 0.05% that rounds to zero.

**EXHIBIT 40. (continued)**

<sup>1</sup> Total includes all non-institutionalized children under age 19, regardless of coverage source. In this exhibit, the following hierarchy was used to assign individuals with multiple coverage sources to a primary source: Medicare, private, Medicaid/CHIP, other, uninsured. Not separately shown are the estimates for those covered by Medicare (generally children with end-stage renal disease), any type of military health plan, or other government-sponsored programs. Coverage source is defined as of the time of the most recent survey interview. Since an individual may have multiple coverage sources or changes over time, responses to survey questions may reflect characteristics or experiences associated with a coverage source other than the one assigned in this exhibit.

<sup>2</sup> Private health insurance coverage excludes plans that paid for only one type of service, such as accidents or dental care.

<sup>3</sup> Medicaid/CHIP also includes persons covered by other state-sponsored health plans.

<sup>4</sup> Individuals were defined as uninsured if they did not have any private health insurance, Medicaid, CHIP, Medicare, state- or other government-sponsored health plan, or military plan. Individuals were also defined as uninsured if they had only Indian Health Service coverage or had only a private plan that paid for one type of service, such as accidents or dental care.

<sup>5</sup> Due to the fact that a hierarchy was used in this exhibit to assign individuals with multiple coverage sources to a primary source (see note 1), the Medicaid/CHIP percentages shown in this row exclude individuals who also have Medicare (which is rare for children) or private coverage. Components do not sum to 100 percent because not all coverage sources are shown.

<sup>6</sup> Limited to people who reported a dental event in 2014.

**Source:** MACPAC, 2016, analysis of MEPS data.