BKL Medicaid Calculator

Documentation

To Accompany "Long-Term Impacts of Childhood Medicaid Expansions on Outcomes in Adulthood" by David Brown, Amanda Kowalski, Ithai Lurie

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Overview

The Brown, Kowalski, Lurie (BKL) Medicaid Calculator ("medicaidcalc_bkl.dta"), computes monthly Medicaid eligibility through age 18 for birth-month cohorts born from January 1981 — December 1984. The calculator consists of the federal poverty level (FPL) eligibility thresholds that each state and Washington, D.C., used to means-test Medicaid over this period. In conjunction with this calculator, the following data are sufficient to determine if a child was eligible for Medicaid: birth month and birth year, state of residence, and income as a percentage of the FPL (a statutory function of family income, state of residence, and household size).

Detailed Description of calculator

This section documents the data sources, definitions, and key assumptions used in constructing the calculator.

The calculator contains an eligibility record for each month, year, state, and age in [0,18] for birth-month cohorts born in [January 1981, December 1984]. The data is in long format, and there are a total of 558,144 observations:

(50 states + D.C.) * 48 birth-month cohorts * min(max(Date-Birthday,0),228).

The calculator consists of 21 variables, which include various sources of eligibility and are described in the Codebook section below.

Codebook

Table 1: Codebook

Variable name	Description	Range	No. Unique
year	Year	1981-2003	23
date	Year & month (YYYYMM)	198101-200311	312
month	Month of year	1-12	12
brthyr	Year of birth	1981-1984	4
brthmn	Month of birth	1-12	12
birthday	Birthday (YYYYMM)	198101-198412	48
age	Age in years at current month	0-18	19
fips	FIPS numeric state identifier	1-56	51
stateabbrev	State of residence (abbreviation)	String	51
expanfpl[(a)]	Thresholds from Medicaid expansions to children	75-400,.	21
afdc	AFDC income eligibility thresholds (%FPL)	12.86-190.26	1,342
obra90[(b)]	Federal expansion: 100% FPL children born after Sept 30 1983 (begins July 1991)	100,.	1
obra89[(b)]	Federal expansion: 133% FPL children age < 6 (begins April 1990)	133,.	1
federal[(b)]	Binding threshold: federal expansions (max obra90 & obra89)	100,133,.	2
afdc80	AFDC income eligibility thresholds (%FPL) in 1980	30.12-121.29	51
fedafdc80	Binding threshold :federal expansions and AFDC in 1980 (max federal & afdc80)	30.12-133	53
dollarsfirst	$ of monthly income that can be deducted before the income test	0-250	14

percentremain	% of income (after dollarsfirst is deducted) that can be deducted before the income test	0-66.7	18
inc	FPL annual incremental amounts ($) for additional persons	1380-3930	62
base	FPL annual level ($) for first person in family	4310,11210	68
eligfpl[(c)]	Summary threshold, used in paper	14.15-400	1,034

Notes: (a) This variable contains 324,126 missing observations. These missing observations are for birth-month cohorts in states at times when Medicaid expansions did not apply because states chose not to take them up; they are before the expansions period, or the age group was not eligible. (b) The variable "obra90" contains 449,514 missing observations, and the variable "obra89" contains 556,308 missing observations. These missing observations are for birth-month cohorts in states and periods that do not meet the policy criteria. The variable "federal" contains zeroes instead of missing observations in the years before the policy. (c) For the period [1987, 2003], the variable "eligfpl" is the maximum of AFDC thresholds ("afdc") and Medicaid expansions for children ("expanfpl"). From 1981—1986, this variable equals the AFDC thresholds. In order to isolate the variation in birth cohorts around OBRA 1990, we set eligibility thresholds for birth-month cohorts [1983:1, 1983:9] equal to the threshold for birth-month cohort 1982:12 from July 1991 onward (the implementation date of OBRA 1990).

Income eligibility thresholds

This section documents in detail how the Medicaid eligibility thresholds were constructed within the calculator. The calculate contains eligibility variables based on three sources of eligibility: AFDC eligibility standards, statewide expansions that cover children (independent of AFDC receipt), and nationwide expansions that were federally mandated. Variables that combine these sources of variation are provided; in all cases, these variables contain the maximum of the relevant thresholds, which is the threshold that binds for eligibility.

In cases where eligibility thresholds were reported in units of dollars per month, we have converted them to a percentage of the federal poverty level (FPL) for a family of four. Data were obtained on the federal poverty levels from the Social Security administration Office of Retirement and Disability Policy annual statistical supplement, table 3.E8.

Children's eligibility 1987-2005 (expanfpl)

In the late 1980s and early 1990s, there was several nationwide expansions to Medicaid eligibility targeted at children. Essentially, these reforms provided access for children from families that would not traditionally qualify for welfare on the basis of family structure or income. We obtained thresholds for these programs, in addition to the State Children's Insurance Program ("state CHIP").

Data on income thresholds specifically for children were obtained from reports published by the Kaiser Family Foundation and the Maternal and Child Health (MCH) Updates. A full list of sources is given in the Appendix. When there is more than one threshold applicable to children, we code the largest since the largest binds. Due to the wide variety of state-specific Medicaid rules, there were occasions where we had to make a decision on which threshold to code based on additional information provided in the reports. Information on this process is available from the author.

Since the calculator was constructed using reports of thresholds at sparse points in time, we code in several federal expansions at their reported dates to precisely describe their associated timing and level of eligibility. These expansions are shown in the table below. In creating the "expanfpl" variable, we take the max of these thresholds and the thresholds obtained from from reports.

Reform	Date effective	Thresholds Coded
Omnibus Budget Reconciliation Act (1987)	Oct 1988	(Optional) infants in families with incomes below 185% of FPL *185% CT, MA, ME, MI, MS, VT* *150% IA, WV* *125% KT*
Medicare Catastrophic Coverage Act (1988)	Jul 1989	Infants in families with incomes below 100% FPL
	Jul 1990	Infants in families with incomes below 75% FPL
Omnibus Budget Reconciliation Act (1989)	Apr 1990	Children under age 6 with family incomes below 133% FPL
Omnibus Budget Reconciliation Act (1990)	Jul 1991	Children under age 19 born after September 30, 1983 with incomes below 100% FPL

Sources: Congressional Research Service (1988, 1993)

AFDC eligibility 1980-2005[1] (afdc)

The income eligibility thresholds for AFDC are coded in the variable "afdc." The thresholds provided are for a family of four people and expressed as a percentage of the FPL. We use this family size because it is the most commonly available, particularly in the earlier years when data were scarce. We are therefore comparing a per person concept of family income with a per person concept of the income threshold.

1980-1984

Data for these years were obtained for the needs standard (in $) for a family of four for the AFDC program from data files provided by Jonathan Gruber and Aaron Yelowitz for their paper "Public Health Insurance and Private Savings" *Journal of Political Economy* 107(6):1249-1274. We convert their measure of AFDC eligibility to a percentage of the federal poverty level using the method described in Box 2.

Box 2: Converting $ to FPL

$$afdc=(afdcm4*12/(base+(4-1)*inc))*100,$$

where afdc = income eligibility as a % of the federal poverty level
afdcm4 = income eligibility threshold in $ per month for a family of four
base= federal poverty level for one person ($ per year)
inc= federal poverty level per each additional person ($ per year)

1985-1995

For these years, income eligibility thresholds for the AFDC program were obtained from Dan Rosenbaum. The dataset contains one observation per state per month for the years 1984—1996. We do not use the data from 1984 or 1996. The dataset also contains variables for income eligibility thresholds for families of varying sizes. We extract the needs standard for a family of four ("ns4"). This

[1] The AFDC program was replaced by TANF in 1997. The thresholds coded into "afdc" from 1997 onwards are for TANF, although they do not factor into Medicaid eligibility.

variable provides thresholds in terms of $ per month; we convert it to a percentage of the federal poverty level as described in Box 2.

1996-2005

Data on the TANF program for 1996-2005 was obtained from the Urban Institute Welfare Rules Database. We extract all variables for all states and years in the category "dollar amounts" for the coverage "majority only". Ultimately, we only make use of the variable da_v1f04, which is the need standard for a family of four expressed in $/month. This variable was converted to an annual dollar amount (by multiplying by 12) and then expressed as a percentage of the federal poverty level. This process is described in Box 2.

Income disregards

Not all income counts toward the income test. States typically allow the disregard of some amount of income associated with the cost of or earnings from work. These disregards can be in the form of a flat amount, a percentage of income, or both. The information on disregards has been coded into two variables: "dollarsfirst," which contains the amount in $ that can be subtracted from income, and "percentremain", which is a percentage that can be disregarded after the flat amount has already been subtracted. Hence the "percentremain" should be applied after the "dollarsfirst" in the computation of eligibility (this process is described in Box 3).

Data on disregards for 1984—1995 were obtained from Dan Rosenbaum. We use the 1984 disregards to impute disregards for 1980—1983. For 1997—2013, we use the income disregards for the TANF programs as a proxy for Medicaid income disregards. These data were obtained from the Urban Institute Welfare Rules Database. We use all variables from the category "Earned income disregards," coverage "majority only." We construct the disregard variables to reflect steady disregards, rather than disregards that apply only after a certain number of months since first qualifying for welfare. To do this, we use only disregards that are available in all months (when ed_#1tme = "All Months"). We use the variable "ed_#1$o%" to determine if the disregard is a dollar amount or a percentage of income. The value in "ed_edr#1" is recorded in the "dollarsfirst" or "percentremain," respectively. Some states have multiple disregards, however we only allow for one disregard of each type per state per year. We use the additional disregards when there is no "first disregard" that meets our inclusion criteria. Any state that has no disregards that meet the criteria, or has no disregards, are coded as 0. We exclude the "percentremain" disregard for Connecticut because it is set to 100% up to a threshold, and our extraction method does not allow for this complex type of disregard.

Eligibility measure used in the paper ("eligfpl")

There are two simplifications made to the calculator in constructing our eligibility measure for the paper. First, for each year we only use data from December. This is because we observe annual (rather than monthly) income, and December corresponds to the end of the tax year. Second, to isolate variation from OBRA 90, from July 1991 onwards we hold the thresholds for birth cohorts 1983:01—1983:09 fixed equal to the threshold for cohort 1982:12. We impute this way because the documents used to construct the calculator are based on an annual concept of age. The variation across the 1983 birth-month cohorts is therefore not always clean. To ensure that there is no contamination in the

control birth cohorts, we impute the thresholds for 1983:01—1983:09 on a year-by-year basis using thresholds for 1982:12.[2]

Computing eligibility

Merging the calculator with your data

The calculator should be merged into your data using the following variables: date (YYYYMM), fips (state of residence), and birthday (YYYYMM). Be cognizant that the calculator contains additional variables that might be in your data already, but that might be coded differently—such as year, month, age, and stateabbrev.

Computing eligibility for children

Eligibility is based on birth cohort, family size, and assessable family income. Since eligibility is specified as a percentage of the federal poverty level, first take annual family income in your data, then subtract disregards, and then convert the remaining dollar amount to a percentage of the FPL. To do this, you need to divide income by the federal poverty level for that child's family size. The federal poverty level is computed by taking the base amount and adding the incremental amount for each other family member; that is, if you have a family size variable, subtract one in order to remove the first individual, as they are accounted for in the base.

Box 3: Creating a measure of assessable income

Step 1: Subtract disregards

inc_assess=(faminc-dollarsfirst*12)*(1-percentremain/100)

Step 2: Convert from $/year to $FPL

incfpl= (inc_assess/(base+(famsize-1)*inc))*100

where faminc= family income ($ annual)
dollarmount= $ monthly income disregarded
percentremain=% of income after subtracting dollarsfirst that can be disregarded
incfpl= family income as % of FPL
famsize=number of people in family that are co-resident
base= federal poverty level for one person ($ per year)
inc= federal poverty level per each additional person ($ per year)

After creating a measure of assessable income a % of the federal poverty level, compare the income measure to the desired eligibility threshold contained in the calculator.

Since we are only interested in whether children have access to any kind of health insurance through Medicaid, we create a variable called "eligfpl", which contains our threshold of interest. For the period 1987-2005, this is the maximum of AFDC thresholds ("afdc") and Medicaid expansions for children ("expanfpl"). From 1980-1986 it is the AFDC thresholds. In order to isolate the variation in birth cohorts

[2] In 2001 the 1982:12 cohort had aged out of the calculator. For 2001 we set the thresholds for the 1983:01-1983:09 cohorts (at age 18) equal to their age 17 thresholds. This is the same as setting the thresholds equal to the age 18 threshold for 1982:12 (in 2000) because there are no changes in Medicaid eligibility for these cohorts during this period. By 2001 states have implemented CHIP expansions. This eliminates the difference between cohorts 1983:01-1983:9 and 1983:10-1983:12, which was a result of OBRA 1990.

around OBRA 1990, we set thresholds for birth cohorts 1983:1-1983:9 equal to the threshold for 1982:12 from July 1991 onwards (the implementation date of OBRA 1990).

Computing eligibility for children is then simply a matter of comparing their family income as a % of the FPL with the eligibility threshold for their birth cohort in their state of residence (shown in Box 4).

Box 4: Computing eligibility – Children

Eligible=yes if incfpl<=eligfpl

We do not consider additional measures of family structure when computing Medicaid eligibility. While the Medicaid expansions for children and state CHIP programs did not impose restrictions on family structure for eligibility, the AFDC program was generally restricted to single-parent families, unless the state had an AFDC Unemployed Parent program (and one of the parents met the criteria for that program). Users of the calculator have the option of imposing a family structure restriction, as it is implemented by restricting the sample of potential eligibles in your own data.

Computing simulated eligibility in the CPS

We compute eligibility in the Current Population Survey (CPS) March Supplement using the eligibility measure "eligfpl," described previously. We take a national sample from each year of eligibility (1981—2003), and use that sample to compute eligibility in each state. For example, eligibility for California in 1996 is computed using everyone surveyed in 1996 and applying the rules for Medicaid eligibility in California in 1996. To find eligibility for Alabama in 1996 we take the sample group of people and compute eligibility using the 1996 rules for Alabama. For 1995, we use individuals surveyed in 1995.

The purpose of the annual sample simulation is to compute eligibility using only variation in the legislative generosity of Medicaid eligibility in states over time. We want to remove the effect of changes in the statewide economic and demographic characteristics. For example, this computation removes the effect that a recession has in one particular state in the demographics of that state in that particular year.

Defining family income

This section explains the construction of families in the CPS. Once the families have been constructed we create a measure of family income as the sum across family members of the total personal income variable.

The CPS identifies households using the variable "serial." A household is defined as people who live in the same housing unit, regardless of their relationship with each other. For the calculator, we need to define a family unit that roughly matches the family unit that would be considered for eligibility. We follow the general approach suggested by Currie and Gruber (1994)—which is to define the family unit as an adult (a person aged 19 or more), married spouses, and children under the age of 19. This means that any adult children, unmarried partners, and other relatives and non-relatives living in the household will be defined as being in their own family unit.

A complication to this definition is how to treat teenage parents. For the purpose of assigning a family identifier, they are treated as a separate family from their parents. Teen parents represent at most 0.11% of the sample in any one year. Hence, this should not have a sizable effect on our estimates of eligibility.

We require childless individuals under the age of 18 to be matched to an adult; they cannot form their own family unit unless they have their own child. There are some children dropped from the sample because they cannot be matched to an adult in the household. They represents at most 0.13% of the sample in any one year

Defining family size

Family size is determined by summing up the number of people recorded in the family. If there are family members that do not have an entry in the survey, they will not be counted. The reason for using the count, rather than the family size variable that is included in the CPS, is that we have used a stricter definition of family than the CPS. If we tried to adjust this variable to account for the changes in family groupings, we would have to decide which family to assign the remainder of the family count; that is, persons counted in the family size that do not have an entry in the survey.

We also adjust the family size for teenage parents after 1985 when considering their parents income to account for the extra people it is supporting. For example, if an unmarried teenage female and her baby live with her mother, we will assess the teenager's income (which includes her mother's income) against the income rule for a family of three.

In cases where there is a teenage parent present in the household, we adjust the size of the family of which they would have been a member had they not had their own child. We include them so that the rest of the family unit can be assessed for AFDC. The purpose of this method is to capture (albeit imperfectly) the fact that in reality there is a joint assessment of the teenager and the parents but that the parents' circumstances don't necessarily preclude the teenager from eligibility.

Codebook

Simulated eligibility in the CPS is contained in the file "medicaidcalc_cpsinst_bkl.dta." There are 18 variables and 46,512 rows. There is an observation for each birth cohort in each year in each state. The variables are described in Table 2.

Table 2: Codebook: Simulated Eligibility

Variable name	Description	Range	No. Unique
year	Year	1981-2003	23
brthyr	Year of birth	1981-1984	4
brthmn	Month of birth	1-12	12
cohort	Birthday (YYYYMM)	198101-198412	48
age	Age in years at current month	0-18	19
fips	FIPS numeric state identifier	1-56	51
sim_eligfpl	Simulated eligibility using eligfpl* by state, year, age	0.03-0.87	3,088
sim_fafdc	Simulated eligibility using binding threshold of federal expansions (max obra90 & obra89) and AFDC by state, year, age	0.01-0.62	3,196
sim_fed	Simulated eligibility using binding threshold of federal expansions (max obra90 & obra89) by state, year, age	0-0.62	368
sim_obra90	Simulated eligibility through OBRA 90 by state, year, age	0-0.62	368
sim_afdc	Simulated eligibility through AFDC by state, year, age	0.01-0.25	3,331
sim_expanfp	Simulated eligibility through Medicaid expansions by state, year,	0-0.47	85

sim_eligfpl_c	Cumulative by age: Simulated eligibility using eligfpl by state, year, age	0.07-9.00	4,363
sim_fafdc_c	Cumulative by age: Simulated eligibility using binding threshold of federal expansions (max obra90 & obra89) and AFDC by state, year, age	0.048-5.91	4,392
sim_fed_c	Cumulative by age: Simulated eligibility using binding threshold of federal expansions (max obra90 & obra89) by state, year, age	0-4.90	443
sim_obra90_c)	Cumulative by age: Simulated eligibility through OBRA 90 by state, year, age	0-4.90	443
sim_afdc_c	Cumulative by age: Simulated eligibility through AFDC by state, year, age	0.05-3.11	3,831
sim_expanfpl_c	Cumulative by age: Simulated eligibility through Medicaid expansions by state, year, age	0-4.07	85

*This is our full measure of eligibility and is described in detail on page 8.

References

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Yelowitz, A (1997) "Will Extending Medicaid to Two-Parent Families Encourage Marriage?", *Institute for Research Poverty Discussion Paper 1118-97,* http://www.ssc.wisc.edu/irpweb/publications/dps/pdfs/dp111897.pdf, accessed 5/12/2015.

Appendix: Data sources for Medicaid expansions for children

	Publication details			
Date of data (coded as)	Reference	Table	Page	URL
January 1990 (start dates 1987-1989)	National Governors' Association, MCH Update: State Coverage of Pregnant Women and Children – January 1990, National Governors' Association, Health Programs, NGA Center for Policy Research, Washington DC.	1	12	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
July 1990 (Jul 1990)	National Governors' Association, MCH Update: State Coverage of Pregnant Women and Children – July 1990, National Governors' Association, Health Programs, NGA Center for Policy Research, Washington DC.	1	-	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
July 1991 (Jul 1991)	National Governors' Association, MCH Update: State Coverage of Pregnant Women and Children – July 1991, National Governors' Association, Health Programs, NGA Center for Policy Research, Washington DC.	1	-	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
July 1992 (Jul 1992)	National Governors' Association, MCH Update: State Coverage of Pregnant Women and Children – July 1992, National Governors' Association, Health Policy Studies, NGA Center for Policy Research, Washington DC.	1	-	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
July 1993 (Jul 1993)	National Governors' Association, MCH Update: State Coverage of Pregnant Women and Children – July 1993, National Governors' Association, Health Policy Studies, NGA Center for Policy Research, Washington DC, December 1993.	1,2	-	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
July 1994 (Jul 1994)	National Governors' Association, MCH Update: State Coverage of Pregnant Women and Children – July 1994, National	1,2	-	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-

	Governors' Association, Health Policy Studies, NGA Center for Policy Research, Washington DC, August 1994.			content-list/maternal-and-child-health-mch-up.html
Sep 1995 (Sep 1995)	National Governors' Association Center for Best Practices, MCH Update September 1995: State Coverage of Pregnant Women and Children, National Governors' Association Center for Best Practices, Health Policy Studies Division Washington DC, September 1995.	1	6	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Sep 1996 (Sep 1996)	National Governors' Association Center for Best Practices, MCH Update September 1996: State Coverage of Pregnant Women and Children, National Governors' Association Center for Best Practices, Health Policy Studies Division Washington DC, September 1996.	1	4	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Sep 1997 (Sep 1997)	National Governors' Association Center for Best Practices, MCH Update: State Coverage of Pregnant Women and Children, National Governors' Association Center for Best Practices, Health Policy Studies Division Washington DC, September 1997.	1	6	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Sep 1998 (Sep 1998)	National Governors' Association Center for Best Practices, MCH Update: State Coverage of Pregnant Women and Children, National Governors' Association Center for Best Practices, Health Policy Studies Division Washington DC, September 1998.	2	5-6	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Oct 1999 (Oct 1999)	National Governors' Association Center for Best Practices, Income Eligibility for Pregnant Women and Children, National Governors' Association Center for Best Practices, Health Policy Studies Division, Washington DC, January 2000.	1,2	4-7	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Oct 2000 (Oct 2000)	National Governors' Association Center for Best Practices, Maternal and Child Health (MCH) Update: States have Expanded Eligibility and Increased Access to Health Care for Pregnant Women and Children, National Governors' Association Center for Best Practices, Health Policy Studies Division, Washington DC, February 2001.	1,2	7-10	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html

Oct 2001 (Oct 2001)	National Governors' Association Center for Best Practices, MCH Update 2001: Trends in State Health Insurance Coverage of Pregnant Women, Children and Parents, National Governors' Association Center for Best Practices, Health Policy Studies Division, Washington DC, May 2002.	2,3	8-11	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Oct 2002 (Oct 2002)	National Governors' Association Center for Best Practices, MCH Update 2002: State Health Coverage for Low-Income Pregnant Women, Children and Parents, National Governors' Association Center for Best Practices, Health Policy Studies Division, Washington DC, June 2003.	6,7	16-19	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
Oct 2003 (Oct 2003)	National Governors' Association Center for Best Practices, MCH Update 2002: States Protect Health Care Coverage during Recent Fiscal Downturn, National Governors' Association Center for Best Practices, Health Division, Washington DC.	6,7	17-20	http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-health-publications/col2-content/main-content-list/maternal-and-child-health-mch-up.html
July 2004 (Jul 2004)	Cohen Ross, D, and Cox, L, Beneath the Surface: Barriers Threaten to Slow Progress on Expanding Health Coverage of Children Families: A 50 State Update on Eligibility, Enrollment Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP, Kaiser Commission on Medicaid and the Uninsured, October 2004.	1	30	http://www.cbpp.org/files/10-4-04health.pdf
July 2005 (Jul 2005)	Cohen Ross, D and L Cox, In a Time of Growing Need: State Choices Influence Health Coverage Access for Children and Families. A 50 State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP for Children and Families, Kaiser Commission on Medicaid and the Uninsured, October 2005.	1	31	http://kff.org/medicaid/poll-finding/in-a-time-of-growing-need-state/