Understanding the Potential Role of SSI in Minimizing Unmet Health Needs among Children with Disabilities

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Child SSI provides cash aid and access to Medicaid for low-income families with children with a variety of special health care needs. Participation has grown by over 40 percent since 2000, with over 1.2 million children receiving SSI benefits in 2016, and total expenditures on child SSI exceeding $10 billion. Prior work has shown that SSI reduces the probability of a child living below the poverty line, reduces food insecurity, and plays an important role in stabilizing income over time. But despite the significant growth in this program and the fact that it is targeted to children who have significant health needs, little research has analyzed the impact of SSI on health-related outcomes for children and families served by this program. We will fill this gap by providing new evidence about the role that SSI could play in reducing unmet needs for child health services.

Our study will use the public-use National Survey on Children with Special Health Care Needs, a unique survey including approximately 40,000 children with disabilities in each survey wave. The survey contains information on SSI receipt as well as information about child health conditions, family characteristics and unmet need for a detailed set of health services including primary and specialty care, medications, therapies, mental health care, and assistive devices. We will begin with a detailed descriptive analysis documenting variation in unmet needs for child health services across disability type, demographic characteristics, family type, and geography (state), and explore the extent to which SSI use is associated with lower reported unmet needs. This research will increase the evidence base for SSI policy by identifying the most common unmet health needs among children with disabilities, identifying particular subgroups of children with disabilities who have the highest unmet health needs, and exploring how SSI could reduce these unmet needs and improve child health. These descriptive analyses will lay the groundwork for causal analyses of the impact of SSI participation on reducing unmet health needs among children with disabilities.