Contact: Suzanne Wikle, Associate Director for State Health Policy and Advocacy, CLASP at **swikle@clasp.org**.
Contact: Isha Weerasinghe, Director of Public Benefits Justice, CLASP at **iweerasinghe@clasp.org**.
Contact: Juan Carlos Gomez, Director of Legislative Affairs, CLASP at **jgomez@clasp.org**.

CLASP
The Center for Law and Social Policy

Working Towards Universal Health Care

While momentum builds for universal health coverage, Congress should ensure that all children and young adults have access to comprehensive health care coverage.

Introduction: The Problem and Solution

When a child falls from the monkey bars at recess, takes a hard fall off their bike, or is injured playing sports, too often parents' thoughts quickly transition from their child's well-being to how much the injury will cost. Emergency room visits, x-rays, casts, and follow-up visits create financial burdens for many families. Instead, let's imagine a system in which families don't hesitate to seek care and simply hope issues resolve on their own, but instead have the confidence to know their tax dollars are being used to provide the care their child needs. This is achievable in America. We can have a system that values all children's health and makes sure they have affordable asthma inhalers, the developmental screens and care they need to thrive, and their physical and mental health needs meet as they enter adulthood.

Even though the U.S. is one of the wealthiest countries in the world, the majority of Americans pay to access some aspect of health care, from copays and premiums to therapy or medical bills incurred through a hospital stay. Without health care coverage, families may forego or avoid medical care from an early age. Many children and families miss critical doctors' visits, vaccinations, and screenings, and may go without needed medications. Children who do not receive medical care or interventions early in life because of the cost are much more likely to see their preventable health conditions turn into severe issues that can lead to hospitalization, chronic disease, or death.

Almost half of all adults in the U.S. noted it is difficult to pay for their health care costs.[1] Nearly one-third (36 percent) either skipped or postponed accessing health care because of cost in the past year, and at least four in ten people (43 percent) have not taken their medication as prescribed because of prescription costs.[2] The Assistant Secretary for Planning and Evaluation (ASPE) noted how both health care and child care are creating burdens on the average family, as family health care premiums increased by 20 percent from 2020 to 2024.[3] According to the U.S. Census's latest Supplemental Poverty Measure data, medical expenses alone have had the largest impact on poverty over the last year, pushing 7.7 million individuals into poverty and raising the poverty rate by 2.3 percent.[4] Still, even though the United States spends almost on average double the amount spent in other large, wealthy countries,[5] Americans' life expectancy is on average 3.7 years shorter than in comparable countries.[6]



36%

of adults in the U.S. skipped or postponed health care because of cost in the past year — and 43 percent didn't take medication as prescribed

7.7 million

people pushed into poverty by medical expenses over the last year, according to the Census Supplemental Poverty Measure

Who is Impacted, and How

The current health care system is marked by the lack of a universal and integrated system of coverage and delivery. Competition between a multitude of providers and payers has created a convoluted medical landscape that is itself often an obstacle to accessing care.[7] Going without affordable, quality health care increases the risks associated with delayed medical care, financial hardship, and medical debt.[8]

Even before the Trump Administration launched its attack on diversity, equity, and inclusion,[9] individuals in marginalized communities bore the brunt of health care inequities. Black women are three times more likely to die during pregnancy than their white counterparts.[10] Rural communities and individuals with disabilities have historically faced difficulty accessing consistent medical care. And LGBTQIA+ youth face a mental health care crisis with few avenues for relief.[11]

Research shows that Black, Latino, and Indigenous people in the U.S. rate their health as worse than their white counterparts, and have done so for more than the last two decades.[12] In fact, there was no improvement in people reporting poor or fair health across any racial or ethnic group between 1999 and 2018. One factor influencing those rates is that members of Black and Latino communities, young adults, people with low incomes, and those living in states without Medicaid expansions are the most likely to be uninsured.[13]

The health of children and young adults has worsened over the last several decades. Infants and children between the ages of 1 and 19 are more likely to die than their contemporaries in other high-income countries.[14] They are also more likely to suffer from anxiety, depression, developmental delays, poor sleep, and decreased physical activity than they were twenty years ago.[15]

These issues not only affect the children themselves or their families, but society as a whole. Many mental, behavioral, emotional, and substance use conditions that start during childhood increase in severity over time without proper attention and care.[16] Obesity and diabetes, as well as diseases found later in life like atherosclerosis and Parkinson's disease, also have been proven to have ties to childhood.[17]

Citizenship status, race, region, and poverty level all impact access to health care for adults and children alike. In one nationally representative study using National Health Institute Survey data, young adults (defined as being between the ages of 19 to 25) were the group most likely to be uninsured, with more than one in five individuals experiencing a gap in care of one year or more.[18] The reasons for this are multifactorial but include the loss of Medicaid and the Children's Health Insurance Program (CHIP), as eligibility status and income eligibility criteria becomes stricter as participants get older.[19]

Some of these disparities were ameliorated by the 2010 passage of the Affordable Care Act (ACA). Millions of U.S. residents, predominantly members of Black, Latino, Asian, and Indigenous communities and families with low incomes, showed the greatest health insurance gains from the ACA. However, the number of uninsured individuals has been rising since Trump's first term, including children.

In 2025, there were nearly four and a half million children in the U.S. without insurance.[20] This increase from previous years was likely due in part to the end of Medicaid continuous coverage after the COVID-19 pandemic, in part because of rising costs that were unsustainable for families, and in part because of changes in immigration policy and enforcement regarding public charge.[21] Because of the "chilling effect" that public charge and immigration enforcement have caused, some immigrants with access to public benefits and health coverage refuse to access key health and social services.[22]

4.4 million **children in the U.S. were without health insurance in 2025**

The second Trump Administration has rolled back health care provisions, widening the cracks already present in the health care system. **H.R.1** resulted in the largest cut to Medicaid in history,[23] and millions are projected to lose Medicaid coverage in the coming decade. Estimates indicate that 41 percent of all children in the U.S. were enrolled in Medicaid in January 2025.[24] Many of those are in families with parents enrolled through Medicaid expansion. As those parents face eligibility changes and more administrative barriers, like increased paperwork, many will lose their Medicaid coverage. Some will lose coverage because they are no

longer eligible, but it's likely that most will lose coverage because the process becomes harder to navigate. Although children's eligibility will not change, they are also likely to lose coverage if their parents lose coverage.[25] Medicaid recipients and health facilities in both states that have and have not expanded Medicaid will all feel the brunt of the law's impacts in the coming years.[26,27]

These cuts will be particularly devastating to children. Approximately half[28] of the children in the U.S. rely on Medicaid and CHIP programs. Reducing Medicaid funding will translate into millions of children going without preventative and wrap-around care. By contrast, when health insurance is paired with basic needs such as the Supplemental Nutrition Assistance Program, the Child Tax Credit, and the Earned Income Tax Credit, health outcomes can greatly improve.

AFFORDABILITY CRISIS IN PRACTICE

$6,000
EXTRA OUT OF POCKET IN A YEAR


A GROWING FAMILY


NEVADA

When families decide to bring a new baby into their family, there are a lot of costs to consider: child care, car seats, baby gear, diapers, and maybe formula. What families are often surprised to add to that list is health care. For some families, adding a new child to their employer or marketplace health insurance can be a shock to their budget–adding a child to their plan may create an extra monthly cost of several hundred dollars, plus an increase in their deductible. For example, when a family in Nevada adds their new baby to their employer plan, they learn it will cost an extra $250 per month in premium payments and add $3,000 per year to their deductible. **This could mean an extra $6,000 out of pocket for the family.**

Next Steps

One important step in achieving universal health care coverage is to focus on health coverage for all children and youth, from birth to age 26. The **MediKids Act** is one avenue for achieving this vision. It would automatically enroll all kids into health coverage at birth and provide continuous eligibility for children and youth from birth to age 26, regardless of income, health condition, or immigration status. The federal government would cover 100 percent of the cost.[29]

> *A truly universal health care system for children affirms that all children–regardless of which state or zip code they live in–deserve health insurance, and their families deserve the peace of mind that comprehensive insurance provides.*

Raising children is expensive. Health care is one of the reasons children are expensive. Within days of a baby's birth families reach out to their employer to add their child to their health insurance, and many are surprised at the cost. Depending on their employer plans, many families may face additional hundreds of dollars a month in premium expenses to add a dependent or dependents. For some plans, adding a child may mean a higher annual deductible for the family, costing them hundreds or thousands more out of pocket. A KFF study found that across both large and small firms that provide employer-sponsored health care, employees were required to pay a greater percentage of premiums for dependents.[30] A March 2025 report from ASPE highlighted health care, along with child care, as contributing to the unsustainable and growing cost of raising a family in America.[31] Across the country, research shows that more than 40 percent of people are moderately or severely burdened by their health care needs, including 36 percent of children who live in families with this burden.[32]

Providing health insurance to all children and young adults is beneficial in multiple ways. It will reduce the direct cost of raising children, decrease budget stress for families, protect families against medical debt, and provide all children with the physical and mental health care they need to grow into thriving adults.

A critical part of protecting the health of children and young adults is addressing their mental health and well-being. Beyond expanding health coverage, services for children and youth must be oriented around the individual and provided in a way that is culturally responsive in order to be effective.[33,34]

CLASP believes in a universal health coverage system that supports all people that follows these core principles:[35]

- Health care is a fundamental human right. All persons should receive comprehensive, affordable, and equitable health care that addresses their needs.
- Changes to our health care system must explicitly promote equity and address health inequities.
- Funding must be designed and implemented in an economically progressive manner.
- Universal coverage and health equity depend on successful and thoughtful implementation, administration, and policy.
- Addressing health outcomes requires attention to social determinants of health.

While we build momentum for universal health care, we urge Congress to ensure that all children and young adults have access to comprehensive health care coverage.

ABOUT THIS BRIEF · ABOUT CLASP

This brief is part of A Stronger Foundation, CLASP's recommendations for the 120th Congress, and is designed to be read and shared as a standalone brief. CLASP is a national, nonpartisan anti-poverty organization advancing policy solutions that work for people with low incomes. · clasp.org

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