



Children with Special Health Care Needs Rider 39(d), 83rd Legislative Session

The 2014-2015 General Appropriations Act, S.B. 1, 83rd Legislature, Regular Session, 2013 (Article II, Department of State Health Services, Rider 39) requires the Department of State Health Services to submit to the Legislative Budget Board and the Governor, annually by December 1, demographics of the clients served by the Children with Special Health Care Needs (CSHCN) Services Program, including income levels, insured status and citizenship. This data reflects client demographics for fiscal year 2015 (as of September 30, 2015) and is retrieved from the CSHCN Management Information System.

Table 1. Client Income Levels

Percent of Federal Poverty Level (FPL)	Clients Served ¹	Percent of Clients Served (%)
100% and less	1,201	69.1
101% - 150%	347	20.0
151% - 200%	160	9.2
201% or above ²	30	1.7
Grand Total	1,738	

Table 2. Client Insurance Status

Insurance Type ³	Clients Served	Percent of Clients Served (%)
Medicaid	102	5.9
Children's Health Insurance Plan (CHIP)	27	1.6
Private Insurance	47	2.7
None	1,562	89.9
Grand Total	1,738	

Table 3. Client Citizenship Status

Citizenship	Clients Served	Percent of Clients Served (%)
Citizen/ Legal Resident	242	13.9
Non-Citizen	1,496	86.1
Grand Total	1,738	

¹ Clients served numbers may change due to a 95-day claims filing deadline.

² Proof of spenddown is required for all clients above 200 percent of the Federal Poverty Level (FPL). Household income exceeding 200 percent of the FPL can be adjusted by deducting documented household medical expenses from total income.

³ Clients may be eligible for more than one type of insurance coverage (Medicaid, CHIP or private insurance) at different times in the reporting year. Therefore, the number of clients served in this report used a hierarchical methodology to list a unique count of clients. Any clients who were eligible for Medicaid at any time in the year were listed under Medicaid. Then, from the remaining client pool, anyone who was eligible for CHIP at any time in the year were listed under CHIP. All remaining clients who have private insurance were listed under private insurance, and then all clients with no other coverage during the year were listed as "none."