Household Poverty and Young Adult Utilization of the Dependent Coverage Provision of the Affordable Care Act
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Introduction
This study seeks to identify the effects of the Dependent Coverage Provision on insurance coverage for young adults by describing group changes in:
1) Uninsurance;
2) Types of health insurance; and
3) Sources of private insurance for young adults; based on the household’s position relative to Federal Poverty Level (FPL), before and after the implementation of the Dependent Coverage Provision.

Data and Methods
- Data from 2007 to 2014 Integrated Health Interview Series (IHIS), harmonized version of National Health Interview Survey created by Minnesota Population Center.
- Time Trends: Linear models regressed on year by subpopulation. Significance levels are for coefficient of year. Analyses look at two measures of uninsurance by household income.
- Changes from Pre-Reform Period: Mean differences between pooled years 2007-2009 (Pre-Reform) and 2011-2013 (Post-Reform) evaluated using two-sample t-tests. Analyses look at measures of insurance access and composition.
- Covariates: IHIS provides wealth of demographic information, including region of residence, U.S. citizenship, race/ethnicity, gender, self-reported health status, educational attainment and limitation by chronic condition.

Key Findings
- Uninsurance declined for near-poor and not-poor young adults, but not for poor.
- Changes from Pre-Reform Period:
  - Uninsurance fell among not-poor and near-poor. Poor young adults saw no change in uninsurance. Not-poor are only group with increase in private insurance rate.
  - Dependent ESI increase and Policyholder ESI decrease have monotonic correlation with poverty level.

Discussion
- Dependent Coverage Provision insurance options were more accessible to higher income young adults.
- Not-poor young adults may have parents with employer-sponsored insurance that offers dependent coverage, or are better able to afford the premiums for dependent coverage.
- Increased uptake of dependent ESI by not-poor may mitigate reduction in Policyholder ESI, consistent with research finding increased labor participation for adults above age cutoff for dependent coverage eligibility.

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