

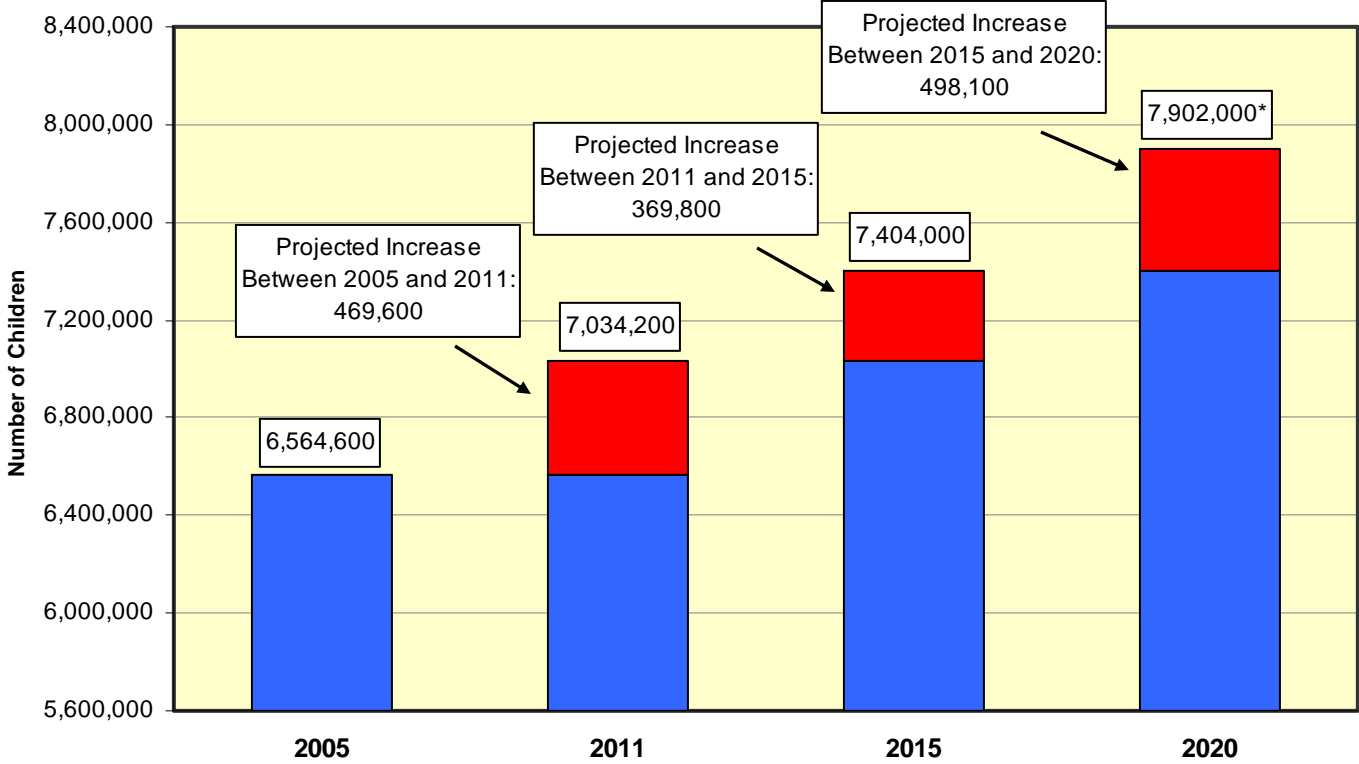
Children's Hospital Association of Texas

An Association for the Advancement of Children's Healthcare in Texas



Medicaid Matters to Texas Children

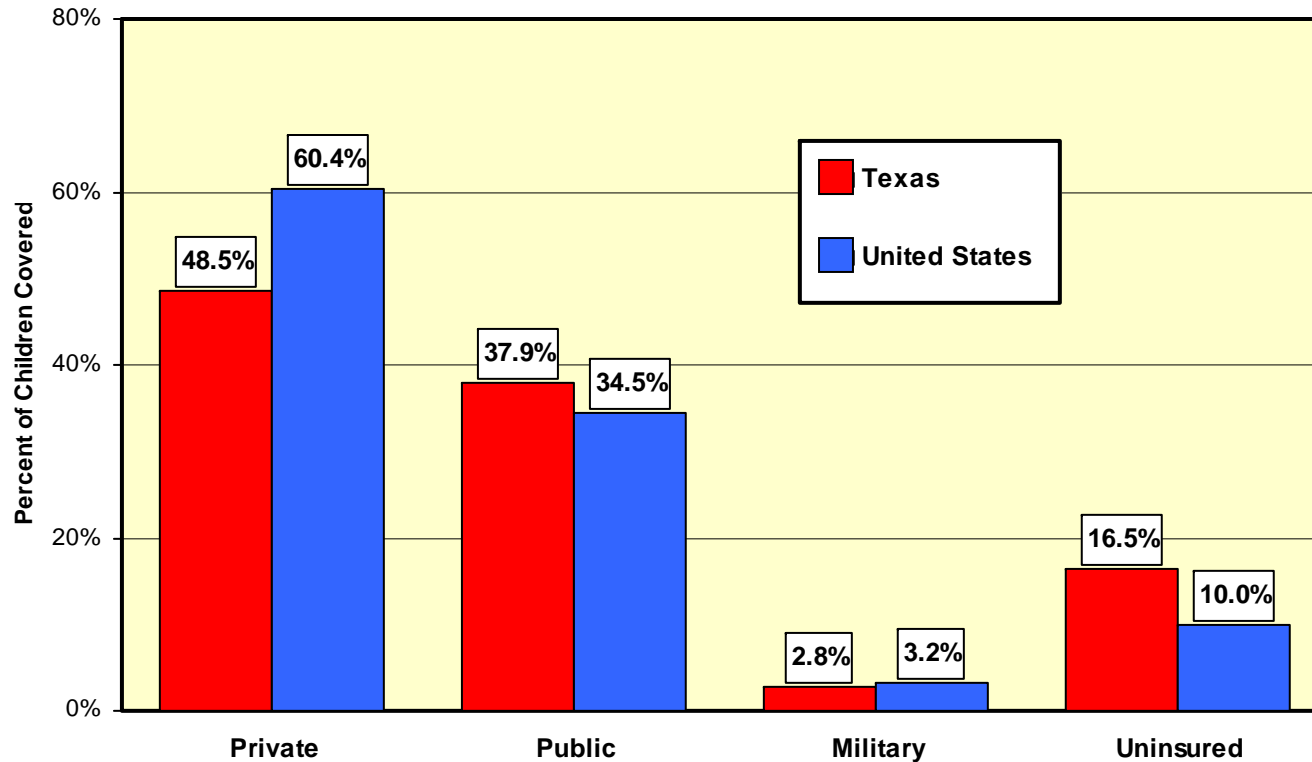
Projected Growth in the Number of Children Under 19 Years of Age Texas 2011, 2015 and 2020



* Does not equal previous year plus projected increase due to rounding.

Source: Projections of the Population of Texas and Counties in Texas by Age, Sex and Race/Ethnicity for 2000-2040 (based on 2000-2007 Migration Scenario); Population Estimates and Projections Program, Texas State Data Center, Office of the State Demographer, Institute for Demographic and Socioeconomic Research, The University of Texas San Antonio, February 2009.

Health Insurance Status for Children 0-17 Years of Age Texas and United States, 2009



Source: U.S. Census Bureau, Current Population Survey, 2010 Annual Social and Economic Supplement, Table HI05.

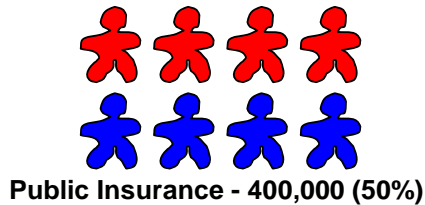
Insurance Coverage Notes: Those who report multiple types of insurance coverage (i.e., private, public, or military) are included in each category; therefore, percentages can add to more than 100 percent. Public includes Medicaid, CHIP and Medicare.

CPS Methodology Note: The CPS asks respondents about their health insurance coverage at any point in the last calendar year.

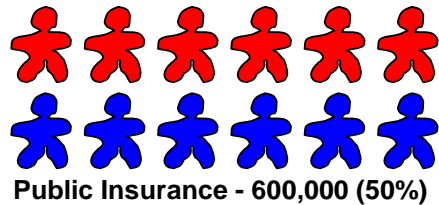
Number and Percent* of Texas Children Enrolled in Public Insurance (Medicaid or CHIP) by Age Group May 2010

 =100,000 Texas Children
Enrolled in Public Insurance
 All Others

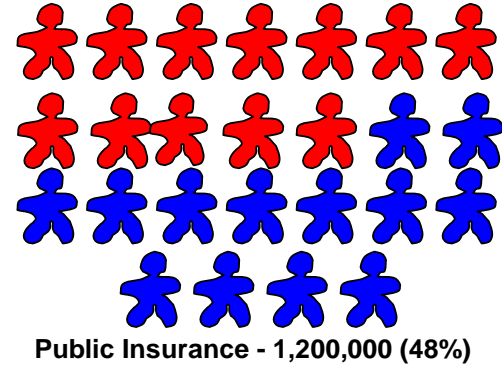
Infants and Toddlers
 0-1 Years – 800,000 Children



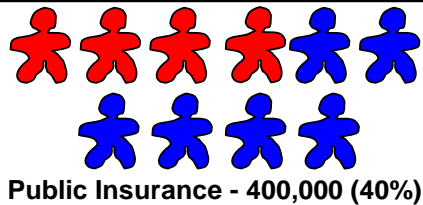
Preschool
 2-4 Years – 1,200,000 Children



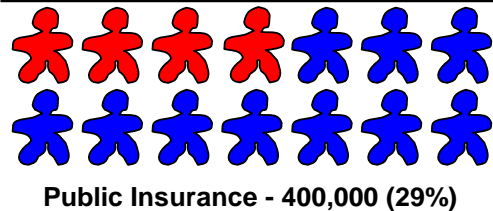
Elementary School 5-11 Years
 2,500,000 Children



Junior High School
 12-14 Years – 1,000,000 Children



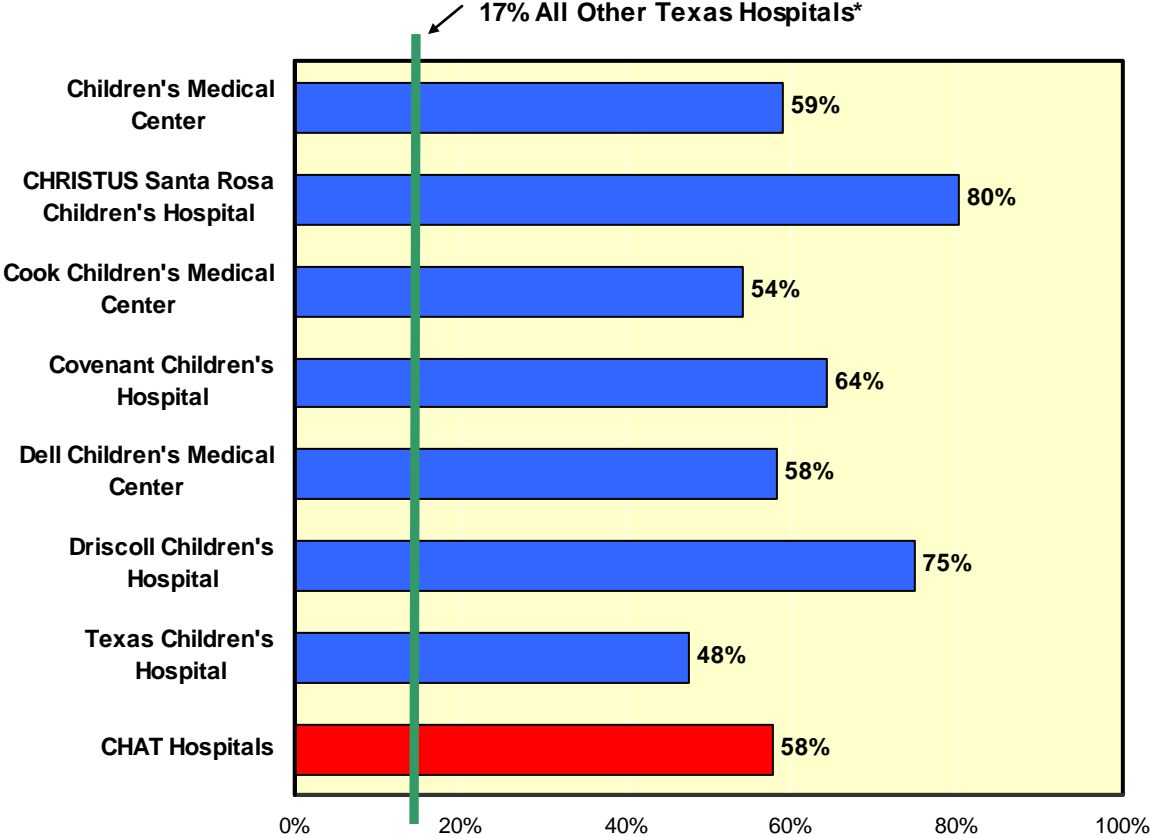
High School 15-18 Years
 1,400,000 Children



*Numbers rounded to nearest 100,000; percentages based off of rounded number.

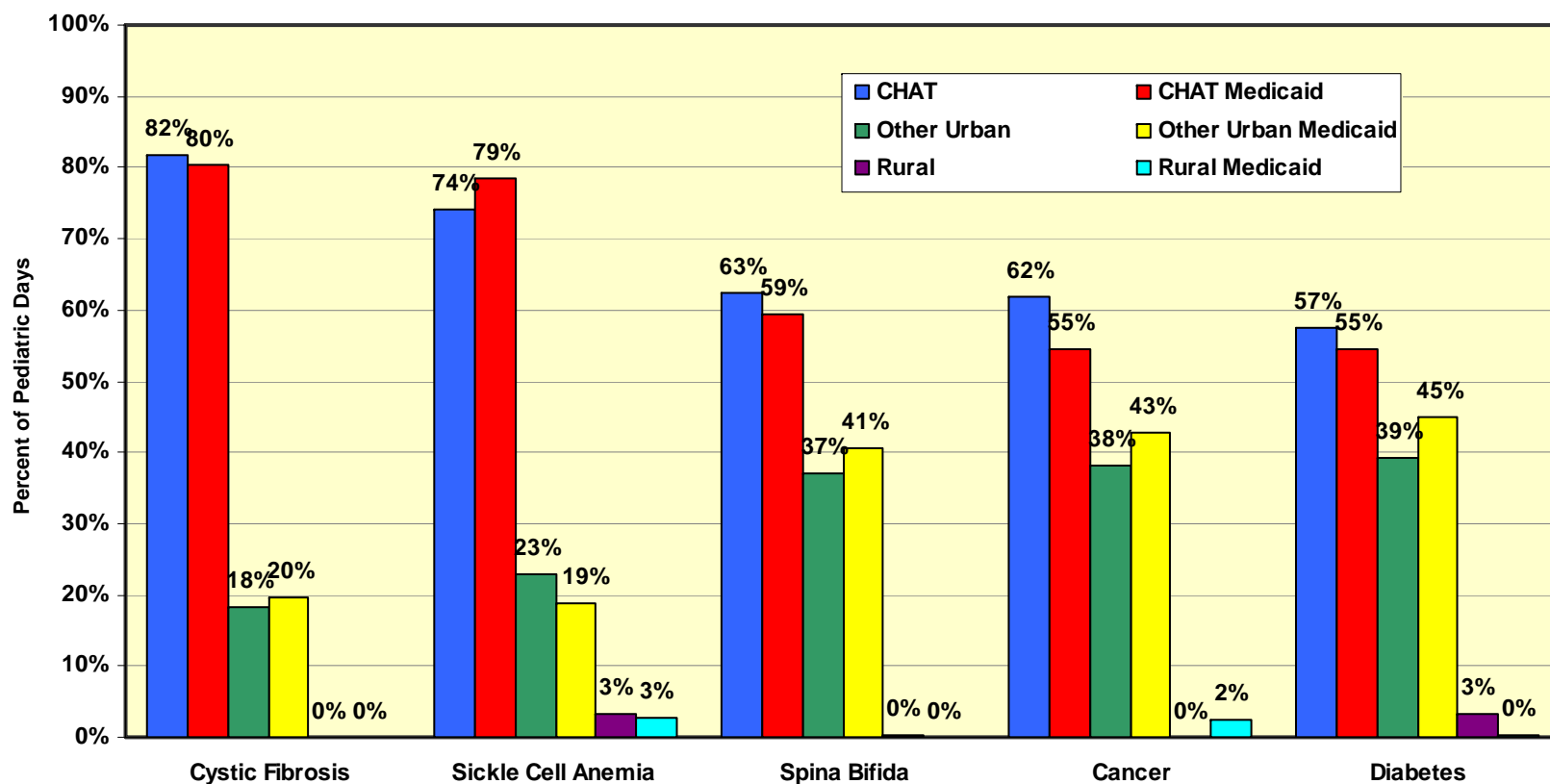
Source: Medicaid 8th Month Eligibility File (final eligibility count) & Maximus A010 CHIP Enrollment File; Research Team, Strategic Decision Support; HHSC. 2009 Population Projections by Age: 2000-2040, Texas State Data Center, Texas Population Estimates & Projections Program; University of Texas at San Antonio, February 2009.

Percent Medicaid Days for CHAT Hospitals, 2009



*Includes all Medicaid Days, both children and adult.
Source: 2009 Annual Survey of Hospitals, Center for Health Statistics, DSHS.

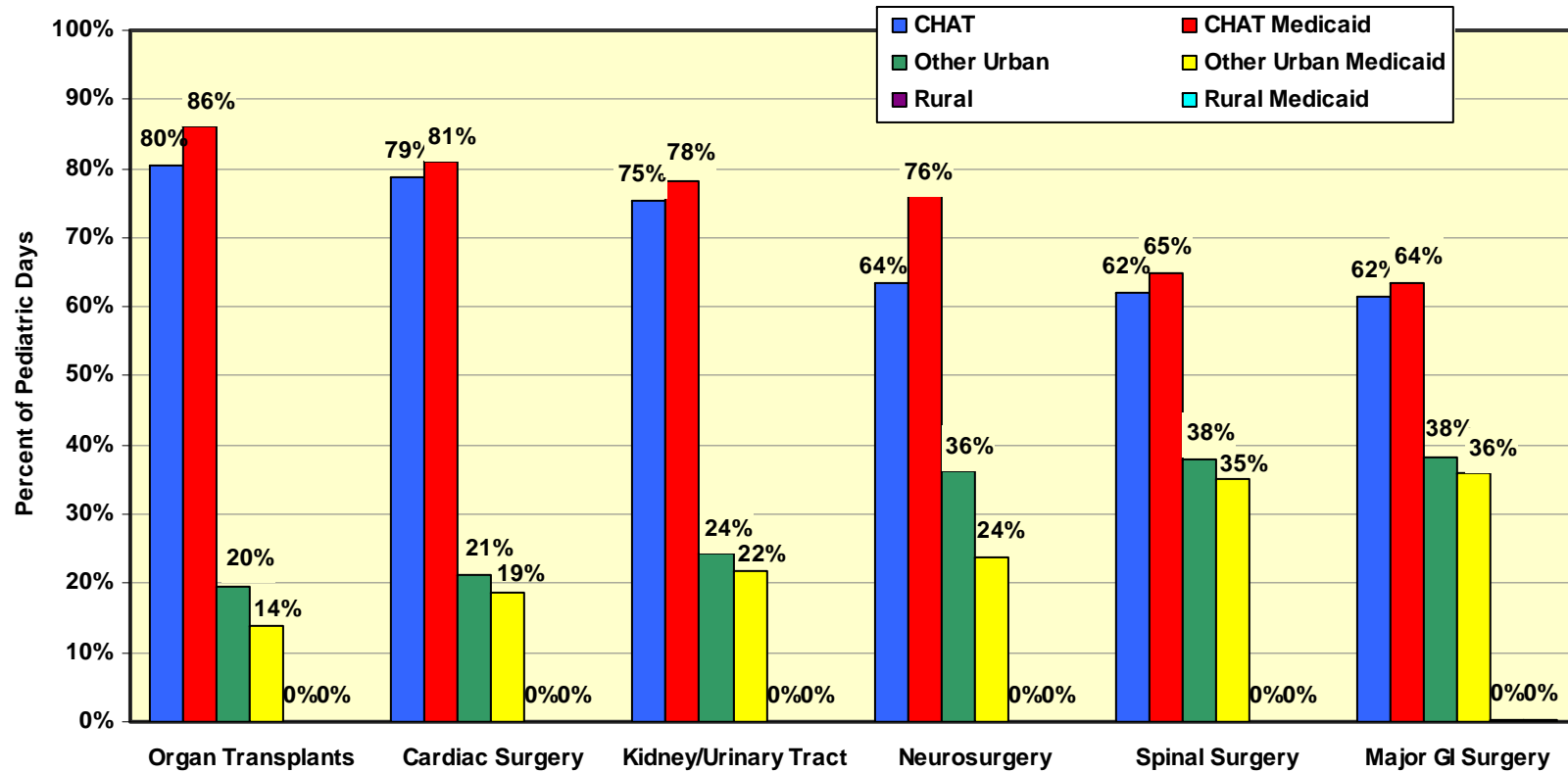
Chronic Conditions: Percent of Pediatric Days by Type CHAT, Other Urban & Rural Hospitals in Texas, 2008



Note: Includes inpatient discharge data for pediatric cases under age 18, excluding obstetrics and normal newborns. Conditions are defined on the basis of APR-DRG categories and severity subclasses or on the basis of principal and secondary diagnoses. The number of hospitals reporting include: CHAT - 7 hospitals; other urban - 291 hospitals; and rural - 70 hospitals. Approximately 90 additional rural hospitals were not required to report discharge data in 2008.

Source: Texas Hospital Inpatient Discharge Public Use Data File, 2008; State Center for Health Statistics, DSHS.

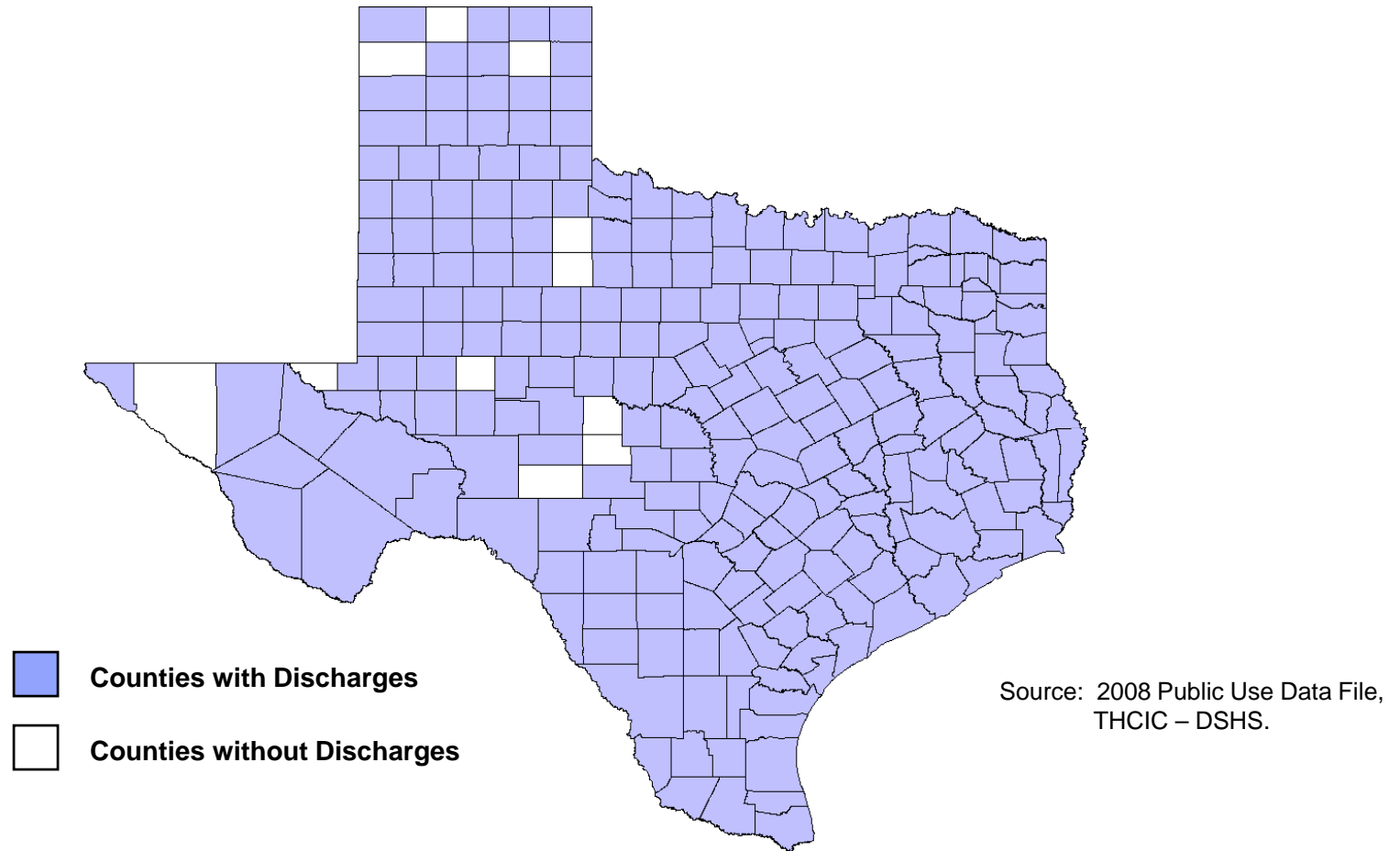
Surgical Services: Percent of Pediatric Days by Type CHAT, Other Urban & Rural Hospitals in Texas, 2008



Note: Includes inpatient discharge data for pediatric cases under age 18, excluding obstetrics and normal newborns. Conditions are defined on the basis of APR-DRG categories and severity subclasses. The number of hospitals reporting include: CHAT - 7 hospitals; other urban - 291 hospitals; and rural - 70 hospitals. Approximately 90 additional rural hospitals were not required to report discharge data in 2008.

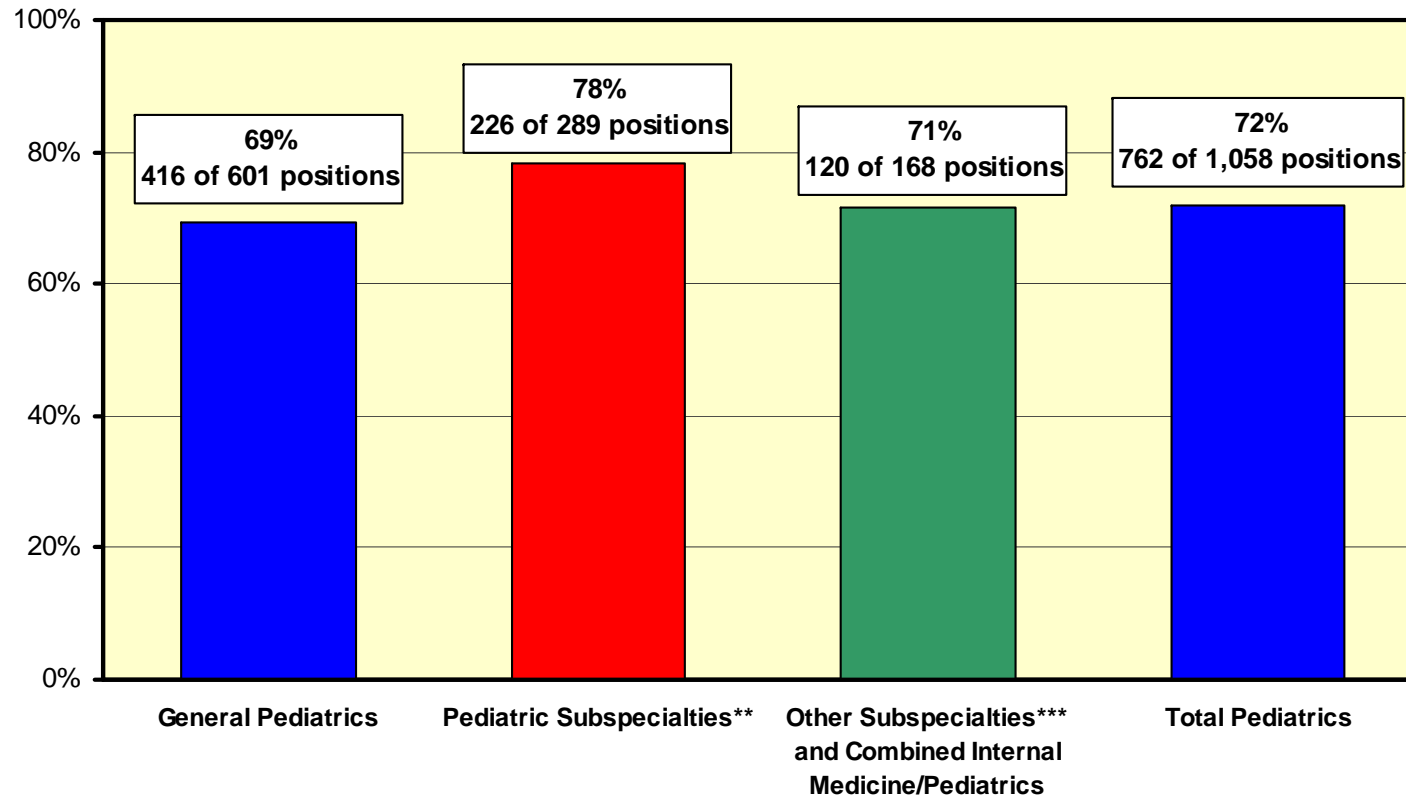
Source: Texas Hospital Inpatient Discharge Public Use Data File, 2008; State Center for Health Statistics, DSHS.

CHAT Hospitals Provided Inpatient Care to Children Living in 243 of Texas' 254 Counties in 2008



Approximately 6,000 children, less than one-tenth of 1% of the state's seven million children, lived in the remaining 11 counties.

ACGME Accredited Programs Percent of Filled Positions Receiving Training* in CHAT Hospitals, 2010-2011 Academic Year



*Includes all rotations of any length noted for CHAT member hospitals.

**Includes the following pediatric subspecialties: adolescent medicine, neonatal-perinatal, cardiology, critical care, emergency medicine, endocrinology, gastroenterology, hematology/oncology, infectious disease, nephrology, pulmonology, rheumatology, and sports medicine.

*** Includes the following subspecialties: pediatric anesthesiology, child neurology, pediatric orthopaedics, pediatric otolaryngology, pediatric pathology, child & adolescent psychiatry, pediatric radiology, pediatric surgery, pediatric urology, congenital cardiac surgery, pediatric rehabilitation, and internal medicine/pediatrics.

Source: Accreditation Council for Graduate Medical Education; www.acgme.org/adspublic; accredited programs search; December 3, 2010.

Limited Availability of Pediatric Subspecialists in Texas

Subspecialty	2010		Texas Ratio as a Percent of the U.S. Ratio*
	No. of Physicians Texas	U.S.	
Adolescent Medicine	25	499	54.2%
Developmental-Behavioral Pediatrics	27	520	56.1%
Rheumatology	12	225	57.7%
Endocrinology	53	932	61.5%
Emergency Medicine	91	1,472	66.8%
Nephrology	33	473	75.4%
Gastroenterology	67	960	75.4%
Infectious Disease	73	984	80.2%
Cardiology	127	1,704	80.6%
Pulmonology	65	848	82.9%
Critical Care	138	1,707	87.4%
Hematology-Oncology	133	1,581	90.9%
Neonatal-Perinatal Medicine	335	3,974	91.1%

*(No. of Diplomates per 100,000 Children <18 in Texas)/(No. of Diplomates per 100,000 Children <18 in the U.S.)

Source: American Board of Pediatrics 2010-2011 Workforce Data
<https://www.abp.org/abpwebsite/stats/wrkfrc/workforce10.pdf>