The “Creative Solutions” section features four articles that focus on innovative efforts to address a variety of shortcomings in current public programs to provide health coverage to low-income children. In general, the programs highlighted here strive to address gaps in coverage, streamline enrollment procedures, and create more cohesive systems.

The article by Curtis and Neuschler explores ways to help working parents who cannot afford to insure their children, even when their employers offer health coverage. The article discusses the benefits and obstacles to linking public and private employer benefits through subsidies known as premium assistance, and describes the experiences of some states that have these programs.

Two articles describe potentially complementary efforts to streamline enrollment. As Horner, Lazarus, and Morrow detail, an express lane eligibility (ELE) strategy would enable families whose children participate in other safety net programs (for example, the National School Lunch program) to sign up simultaneously for all the programs for which they are eligible. The next article by Klein explains how a presumptive eligibility (PE) strategy would use the information from a family’s application in one program to determine whether the child is eligible for another program, but would automatically assume that the child was eligible until proven otherwise. In addition, children could start using benefits while their application was being processed. Both ELE and PE would move enrollment into the communities to make the process more convenient and less intimidating for families.

Finally, the fourth article by Wong details two county-level initiatives to expand insurance coverage for children who do not meet state eligibility criteria. Santa Clara County, California, has developed an insurance expansion model, while King County, Washington, is using a service coordination model to provide children with a regular source of care. The article describes the approach each county has taken, the similarities and differences between the two, and lessons for other counties that want to create similar initiatives.

These four articles illustrate the opportunities and challenges facing those who are trying to expand and improve health coverage for America’s low-income children.