The Family Opportunity Act's Medicaid Buy-in Option: What We've Learned

The Catalyst Center Team



Health and Disability Working Group Boston University School of Public Health The Family Opportunity Act's Medicaid Buy-in Option

Part of the 2005 Deficit Reduction Act

Families can 'buy into' Medicaid coverage for a child:

- With a 'severe' disability SSI level
- Full Medicaid coverage if uninsured
- Partial or wrap around coverage if privately insured

FOA Provisions

- Family income must be below 300% of FPL (AGI)
- Premiums may be charged
- States may provide premium assistance to maintain private coverage.



2009 HHS Federal Poverty Guidelines

300% of the FPL

Making the case for FOA: Questions that come up.....

If we expand SCHIP eligibility to 300% of the FPL, do we still need FOA?

FOA compared to SCHIP expansion

	SCHIP	FOA
Level of care	None	SSI disability
Income Ievel	That depends	300% FPL
Benefits	More limited than Medicaid?	Medicaid
Private insurance	No	Yes
Premiums	Yes	Yes

Why not just expand our waiver slots?

How is this different from Katie Beckett/TEFRA?

FOA compared to waivers/TEFRA

	Waiver	TEFRA	FOA
Level of care	Institutional	Institutional	SSI disability
Income level	None	None	300% FPL
Benefits	Medicaid + case mgmt, respite, home mods	Medicaid	Medicaid
Authority	Waiver	State Plan	State plan
Premiums	Optional/none	None	Yes
Entitlement	No	Yes	Yes

Won't universal health care reform fix the problem?

- History of children's issues & disability issues not being first considerations (birth of Family Voices!)
- Depth vs. breadth
- Massachusetts experience

And insurance coverage isn't the whole story.....



Breaking the Link between Special Health Care Needs and Financial Hardship



^{for}Children&Youth with streat many cases

Current Status of State Legislation

Program Implemented: North Dakota, Louisiana

Legislation Passed: Iowa, Illinois

Recent Interest/Activity: Arizona, California, Connecticut, Indiana, Maine, Nevada, New York, North Carolina, Ohio, Oregon, South Dakota, Texas*

*These are the states we are aware of. There may be work happening in other states or within these states by other stakeholders that we are not aware of.

Is there another way to get an FOA buy-in program in our state without legislation? The experience of implementation states – North Dakota example

•Program parameters (% of FPL, age phase-in, etc.)

- Premium schedule
- Outreach
- •Enrollment
- Take up and crowd out
- •Lessons learned....

The experience of implementation states – Louisiana example

- Program parameters (% of FPL, age phase-in, etc.)
- Premium schedule
- Outreach
- Enrollment
- Take up and crowd out
- Lessons learned....

Catalyst Center resources

- Breaking the Link: Special Health Care Needs and Financial Hardship - publication
- Payer of Last Resort policy brief
- Medicaid as a Second Language glossary
- Medicaid Buy-In brief
- Frequently Asked Questions about FOA
- Sample legislation
- Cost and impact estimates:
 - The number of children potentially impacted per state
 - The cost of implementing the program per state

Catalyst Center estimates

- •Developed in response to a family leader request (2006)
- •Dissemination (2006 to present)
 - •Conducted regional conference calls with Family Voices network
 - •Topical meeting and conference call
 - Presentations at national meetings
 - •Release calls with various stakeholder groups in individual states (19 to date)

Estimates, continued

 Modified in 2008: new number data from updated National Survey of CSHCN (2005) and new cost data from MSIS

•Contact the Catalyst Center for YOUR state's estimate!

Who we are: the Catalyst Center

- Funded by the Maternal and Child Health Bureau
- A project of the Health and Disability Working Group at the Boston University School of Public Health
- The National Center dedicated to the MCHB outcome measure: "...all children and youth with special health care needs have access to adequate health insurance coverage and financing".

What we do

- <u>Create resources</u> (publications, topical conference calls, annual meetings)
- <u>Answer TA questions</u> about health care financing policy for CSHCN
- <u>Guide stakeholders</u> to data sources outside our own work
- <u>Connect those interested in working</u> <u>together</u> to address complex financing issues

For more information

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