



PATHWAYS TO MEDICAID COVERAGE FOR CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS

Medicaid is a public benefit program that pays for health care and related services for vulnerable populations who meet certain federal and state eligibility criteria. For children and youth with special heath care needs (CYSHCN)¹, there are four main pathways to Medicaid coverage.



CYSHCN

One pathway is eligibility based on severe disability requiring an institutional level of care. When a child receives extended care in an institutional setting, Medicaid disregards household income as an eligibility requirement. For a child that requires an institutional level of care but can safely be cared for at home, some states offer coverage under the TEFRA State Plan Option or waivers.



About 48% of CYSHCN are insured fully or partially by public insurance.2 The most common pathway to Medicaid coverage is eligibility based on income, not health status. Regardless of how a child comes to be enrolled, Medicaid is a critically important source of adequate and affordable health care coverage for CYSHCN.



Another pathway is eligibility based on income and functional level of disability. For low-income families in most states, a child receiving supplemental security income (SSI) is eligible for Medicaid. For middleincome families of CYSHCN with high health-related expenses, states with Medicaid buy-in programs allow access to Medicaid to supplement private insurance or for primary coverage.



All children in foster care are eligible for Medicaid. Children in foster care are vulnerable in many ways and should be considered important members of the population of CYSHCN because of their increased risk for and prevalence of poor physical, developmental and mental health status and outcomes.3



CATALYST CENTER RESOURCES



Public Insurance Programs and CSHCN: A Tutorial on the Basics of Medicaid and the Children's Health Insurance Program (CHIP)

This tutorial gives an overview of Medicaid/CHIP, the populations these programs serve, and details to help think about ways to improve access to coverage for CYSHCN.

http://cahpp.org/resources/Medicaid-CHIP-tutorial



State Financing Strategies

This page links to examples of the innovative strategies states are using to improve and finance care for CYSHCN, such as Medicaid Buy-ins, TEFRA, foster care and more.

https://ciswh.org/projects/the-catalyst-center/financing-strategies/



Expanding Access to Medicaid Coverage: The TEFRA Option and Children with Disabilities

This policy brief explains what TEFRA means for pathways to Medicaid for children, a comparison of TEFRA and HCBS waivers, how TEFRA affects CYSHCN, and suggests improvements.

https://ciswh.org/wp-content/uploads/2016/02/TEFRA-policy-brief.pdf

DEFINING CYSHCN: According to the federal Maternal and Child Health Bureau, CYSHCN are those who have or are at increased risk for chronic physical, developmental, behavioral, or emotional conditions, and who also require health and related services of a type or amount beyond that required by children generally.

CITATIONS

- 1. McPherson, M., Arango, P., Fox, H., Lauver, C., McManus, M., Newacheck, P., Perrin, J., Shonkoff, J., & Strickland, B. (1998). A new definition of children with special health care needs. Pediatrics, 102(1):137-140.
- 2. Child and Adolescent Health Measurement Initiative, 2016-2017 National Survey of Children's Health (NSCH) data query. Data Resource Center for Child and Adolescent Health supported by Cooperative Agreement U59MC27866 from the U.S. Department of Health and Human Services, Health Resources and Services Administration's Maternal and Child Health Bureau (HRSA MCHB). Retrieved [2/14/19] from www.childhealthdata.org. CAHMI: www.cahmi.org.
- 3. American Academy of Pediatrics, District II Task Force on Health Care for Children in Foster Care. (2005). Fostering Health: Health care for children and adolescents in foster care. 2nd Ed. Retrieved from:
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