



The Catalyst Center: National Center on Health Insurance Coverage and Financing of Care for Children and Youth with Special Health Care Needs

Medicaid 101 Webinar

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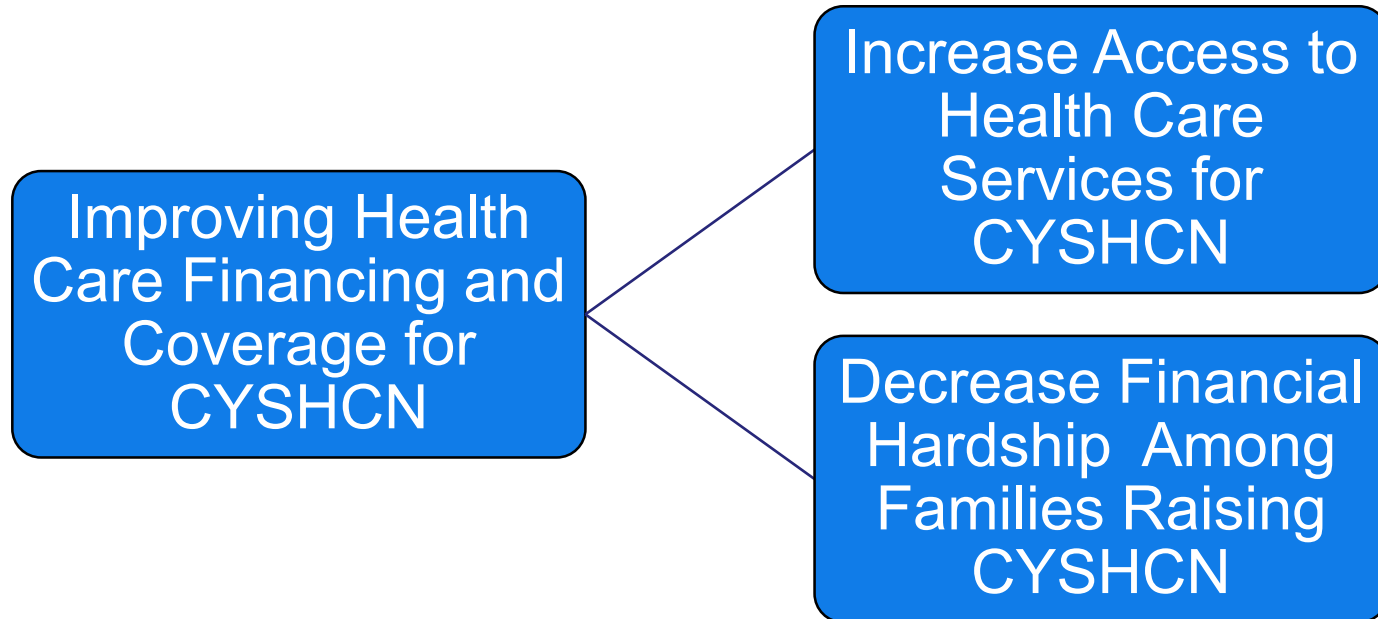
"Unity is strength. . . when there is teamwork and collaboration, wonderful things can be achieved."

--Mattie Stepanek

NPM 15: The percent of children 0 through age 17 who are **continuously** and **adequately** insured



Catalyst Center Overarching Goals



What We Do

- **Provide direct technical assistance** about health care financing policy, practice, and implementation
- **Conduct policy research** to identify and evaluate financing innovations
- **Create resources** including briefs, policy explainers, webinars, peer learning opportunities, and tutorials
- **Connect those interested in working together** to address complex financing issues

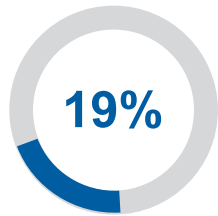




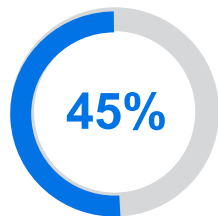
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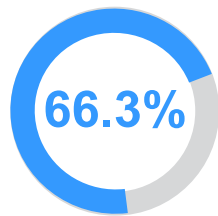
CYSHCN Data



CYSHCN represent about 19% of children



36.4% of CYSHCN have public insurance only; 8.6% of CYSHCN have a combination of public and private insurance



66.3% of CYSHCN have insurance coverage that is usually or always adequate to meet their needs



Family Financial Hardship

Catalyst Center analysis has identified three factors that contribute to financial hardship for families raising CYSHCN, even when their children have health insurance:



Higher health care costs



Higher routine expenditures



Loss of employment income



Why is Medicaid Important for CYSHCN?



Reach

Largest single payer of healthcare services for CYSHCN



Affordability

Under federal statute, Medicaid requires little to no cost-sharing for services provided to children



Adequacy

The Medicaid EPSDT benefit requires all medically necessary services for children to be covered



What is EPSDT?

Early	Assess and identify problems as early as possible
Periodic	Check children's health status at regular, periodic, age-appropriate intervals
Screening	Provide physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
Diagnostic (aka Diagnosis)	Perform diagnostic tests to follow up (rule out or confirm) when screening identifies a risk or potential problem
Treatment	Control, correct or reduce health problems found



How is the EPSDT Benefit for Kids Different from Medicaid Benefits for Adults?

Adult Benefits

Medicaid State Plan describes mandatory and optional services for all Medicaid enrollees



EPSDT

Kids get “more” under EPSDT – any **medically necessary** service whether it’s in the state plan or not



Medical Necessity

- Definitions of Medical Necessity vary by state
- In general, medically necessary services are those that:



Improve health or lessen the impact of a condition



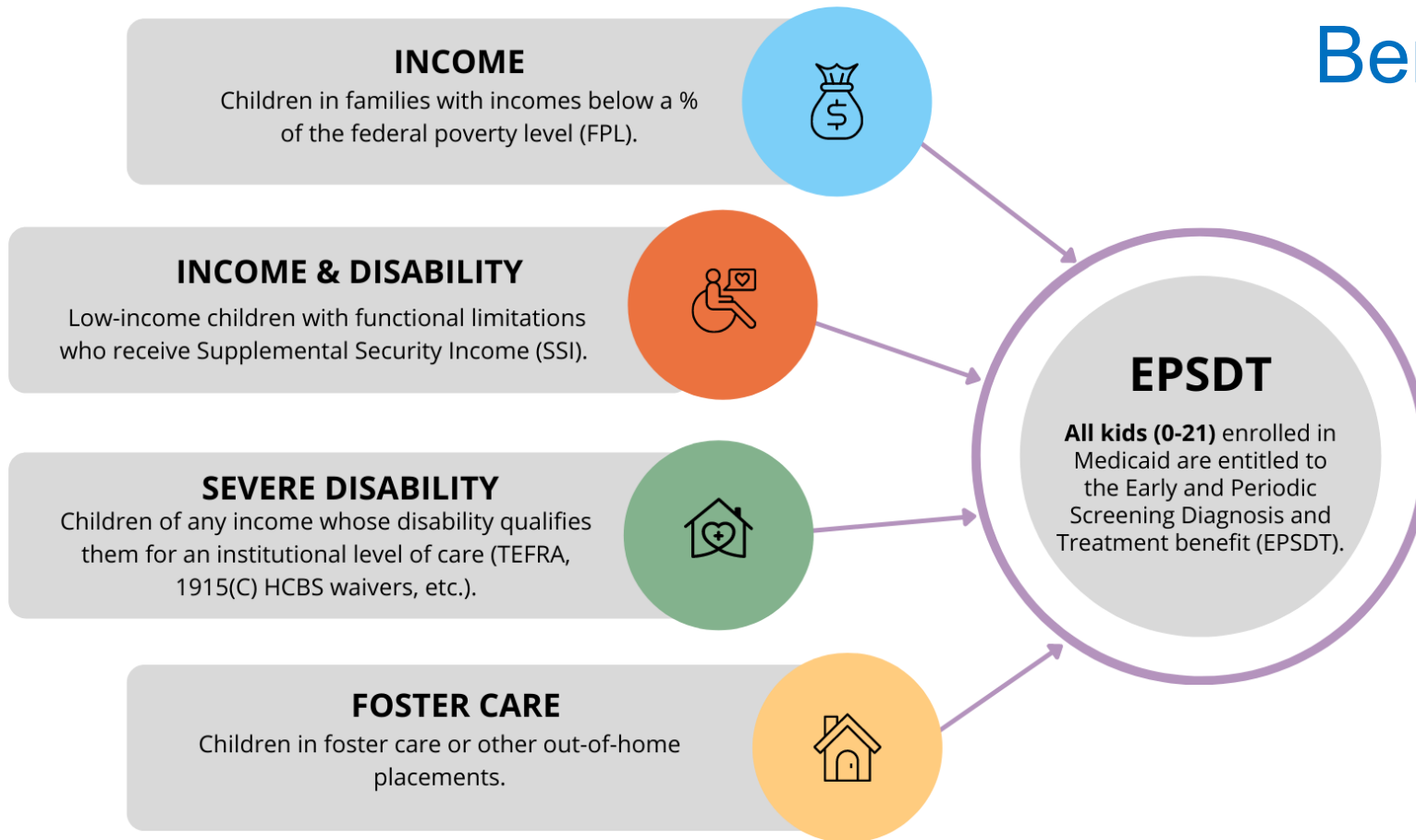
Prevent a condition



Cure or restore health



The EPSDT Benefit



NOTE: There is no EPSDT benefit for child enrollees in State Health Insurance Marketplace plans or separate CHIP programs, unless specified in the CHIP plan language (uncommon)

EPSDT and Medicaid Managed Care

- Children enrolled in Medicaid managed care are still entitled to EPSDT
 - Some states have their MCOs provide and report on services under EPSDT
 - In others, Medicaid is responsible for covering services which fall outside the MCO contract
 - It's all in the contracting....and knowing who is responsible for what



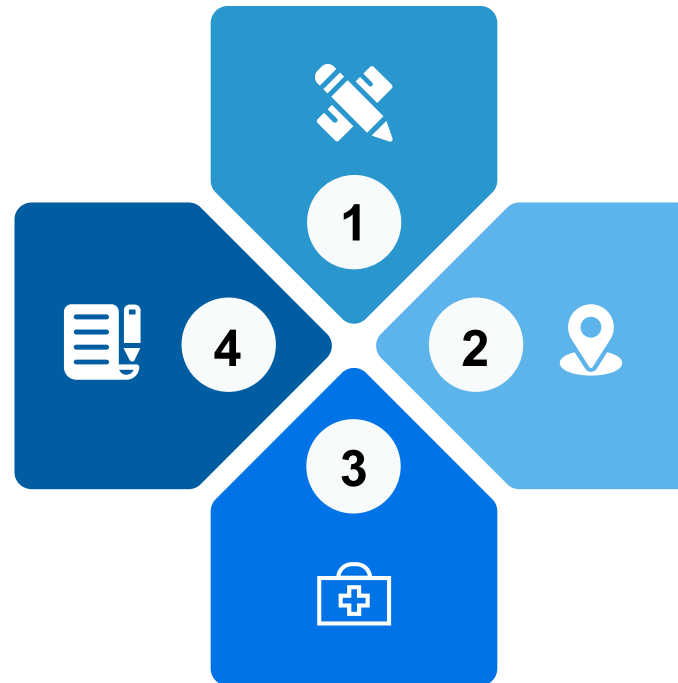
Not just Health Services: Administrative Services under EPSDT

1. Education

State Medicaid agencies must provide education about the EPSDT benefit to families

4. Reporting

State Medicaid agencies must meet specific Medicaid reporting requirements



2. Assistance

Help families access services under EPSDT through transportation and scheduling assistance

3. Coordination

Assist in securing uncovered services, particularly services offered by state Women, Infants, and Children (WIC) and Title V programs



How States Make Changes to their Medicaid Program

State Plan Amendment (SPA)

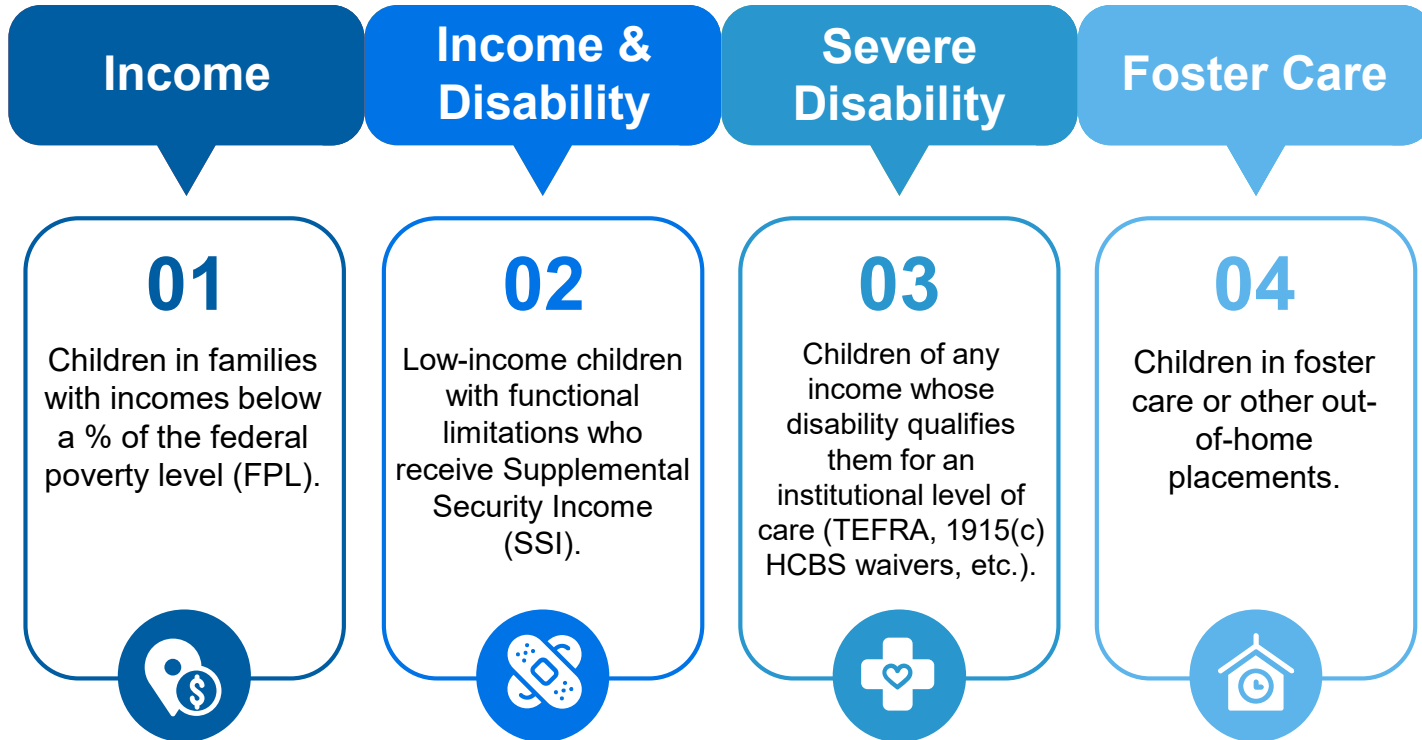
- Can address any part of the state plan (eligibility, benefits, provider payments, etc.)
- No cost neutrality requirement
- Permanent (doesn't expire)
- No waiting lists

Waivers

- Medicaid benefits and often includes additional LTSS
- Cost neutrality required
- Waiting lists allowed and typical
- Time-limited – must be renewed regularly
- State-wideness and comparability “waived” – special benefits for special populations, for example



Pathways to Medicaid for Children



Pathways to Medicaid for Children



Path #1: eligibility based on income, not health status

Location	Medicaid Coverage for Infants Ages 0-1		Medicaid Coverage for Children Ages 1-5		Medicaid Coverage for Children Ages 6-18	
	Medicaid Funded	CHIP-Funded for Uninsured Children	Medicaid Funded	CHIP-Funded for Uninsured Children	Medicaid Funded	CHIP-Funded for Uninsured Children
United States ¹	195%	217%	148%	216%	138%	155%

Source
[Medicaid and CHIP Eligibility, Enrollment, Renewal, and Cost Sharing Policies as of January 2022: Findings from a 50-State Survey](#), Kaiser Family Foundation, March 2022. Based on a national survey conducted by the Kaiser Program on Medicaid and the Uninsured with the Georgetown University Center for Children and Families, 2022.



Pathways to Medicaid for Children



Path #2: eligibility based on income and functional level of disability

- Low-income children with functional limitations who receive Supplemental Security Income (SSI)
- Middle(ish) income family with high health-related expenses through Medicaid buy-in programs for disabled children



The Family Opportunity Act's (FOA) 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
 - Supplemental coverage if privately insured
- Few states have implemented this state plan option



FOA Provisions

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

2022 HHS Federal Poverty Guidelines (300% FPL)

Household/ Family Size	Poverty Guidance
1	\$40,770
2	\$54,930
3	\$69,090
4	\$83,250
5	\$97,410
6	\$111,570
7	\$125,730
8	\$139,890



Pathways to Medicaid for Children




Path #3 – eligibility based on severe disability
(institutional level of care)

- TEFRA/Katie Beckett state plan option (SPA)
- 1915(c) Home- and Community-Based Services (HCBS) Waivers



Pathways to Medicaid for Children

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- Path #4 – Foster care
- All children in foster care are enrolled in Medicaid
 - Children in foster care are more likely to have a special health care need
 - All children in foster care are considered “at risk” of having a special health care need, and are considered CYSHCN



Pathways to Medicaid for Children: Comparison Chart

	Income	SSI	FOA/Buy-In	TEFRA	HCBS waiver	Foster care
Income limit	≥ 138% FPL	≤ 100% FPL	≤ 300% FPL	No	No	No
Functional level of disability	No	Yes	Yes	No	No	No
Institutional level of care	No	No	No	Yes	Yes	No



What is Medicaid Managed Care (MMC)?



Health care delivery system organized to manage cost, utilization, and quality



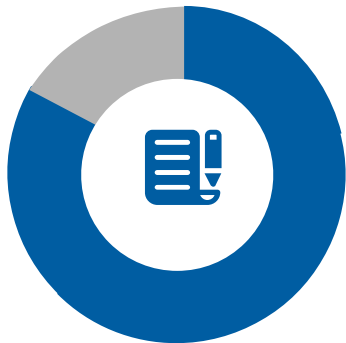
Within a managed care arrangement, entities are paid a capitated (per-member) rate by the state Medicaid agency to run the program and pay providers for the care of people enrolled in the MMC program



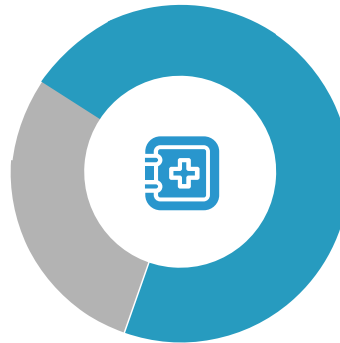
MMC models vary by state, and can include contracting with managed care organizations, primary care case management, or prepaid inpatient health plans



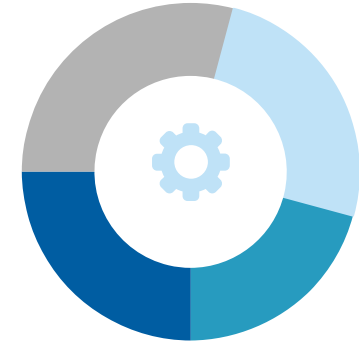
Medicaid Managed Care Organizations and CYSHCN



41 states
(including DC)
had contracts
with Medicaid
MCOs as of July
2021



As of July 2020,
38 states
enrolled
CYSHCN in
specific MCOs



Managed care
organizations in
many states provide
enabling services,
including care
coordination, to
enrollees





Poll



Additional Resources

- Georgetown Center for Children and Families' Medicaid Learning Lab Webinar Series
 - <https://ccf.georgetown.edu/2021/02/05/medicaid-learning-lab/>
- The Catalyst Center's "Public Insurance Programs and Children with Special Health Care Needs: A Tutorial on the Basics of Medicaid and the Children's Health Insurance Program (CHIP)"
 - <http://ciswh.org/resources/Medicaid-CHIP-tutorial>



Questions/Comments?



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