

Medicaid and CHIP: The Road to Reform

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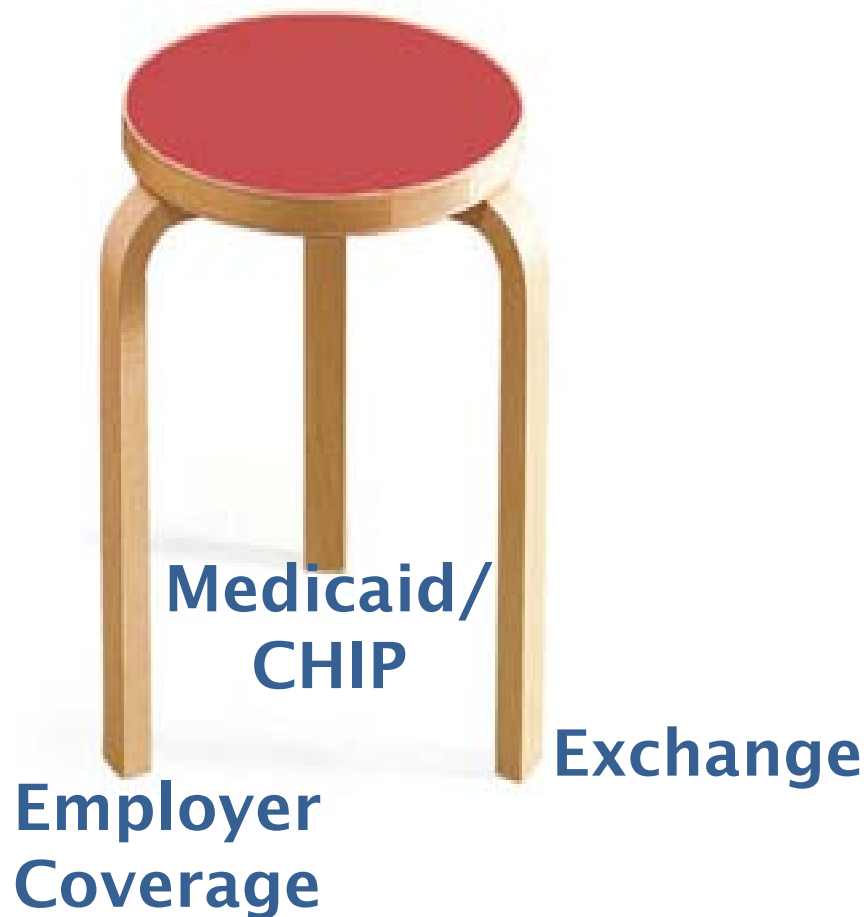
**National Association of State Mental Health
Program Directors**

July 14, 2010

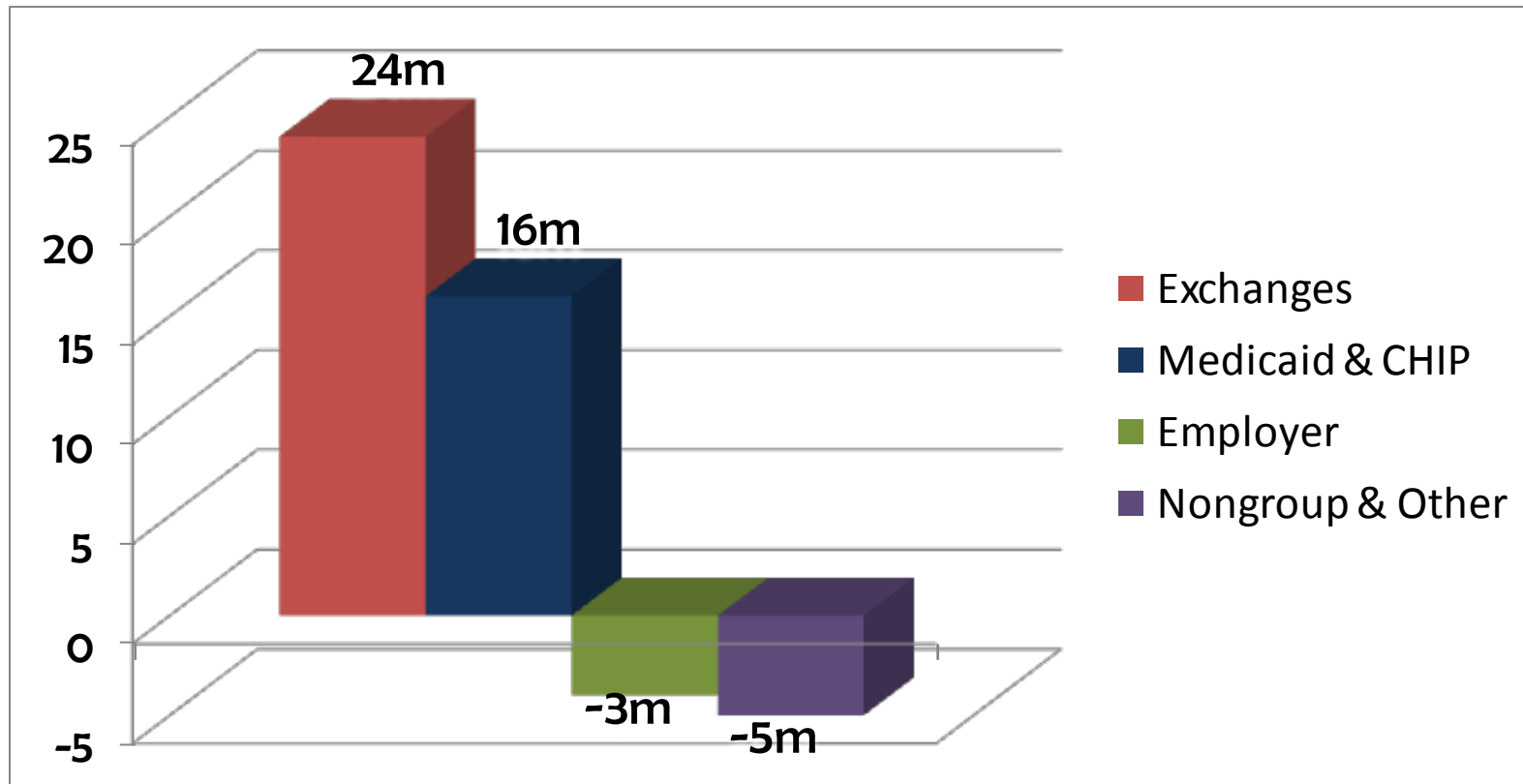
CMCS: Our Mission

- ❖ To work with states to make the Medicaid and CHIP programs the best they can be
- ❖ Beneficiaries are our focus
- ❖ CHIPRA is an opportunity to redouble our efforts for children and lead the way to health reform
- ❖ Partnerships are critical to success

A System of Coverage



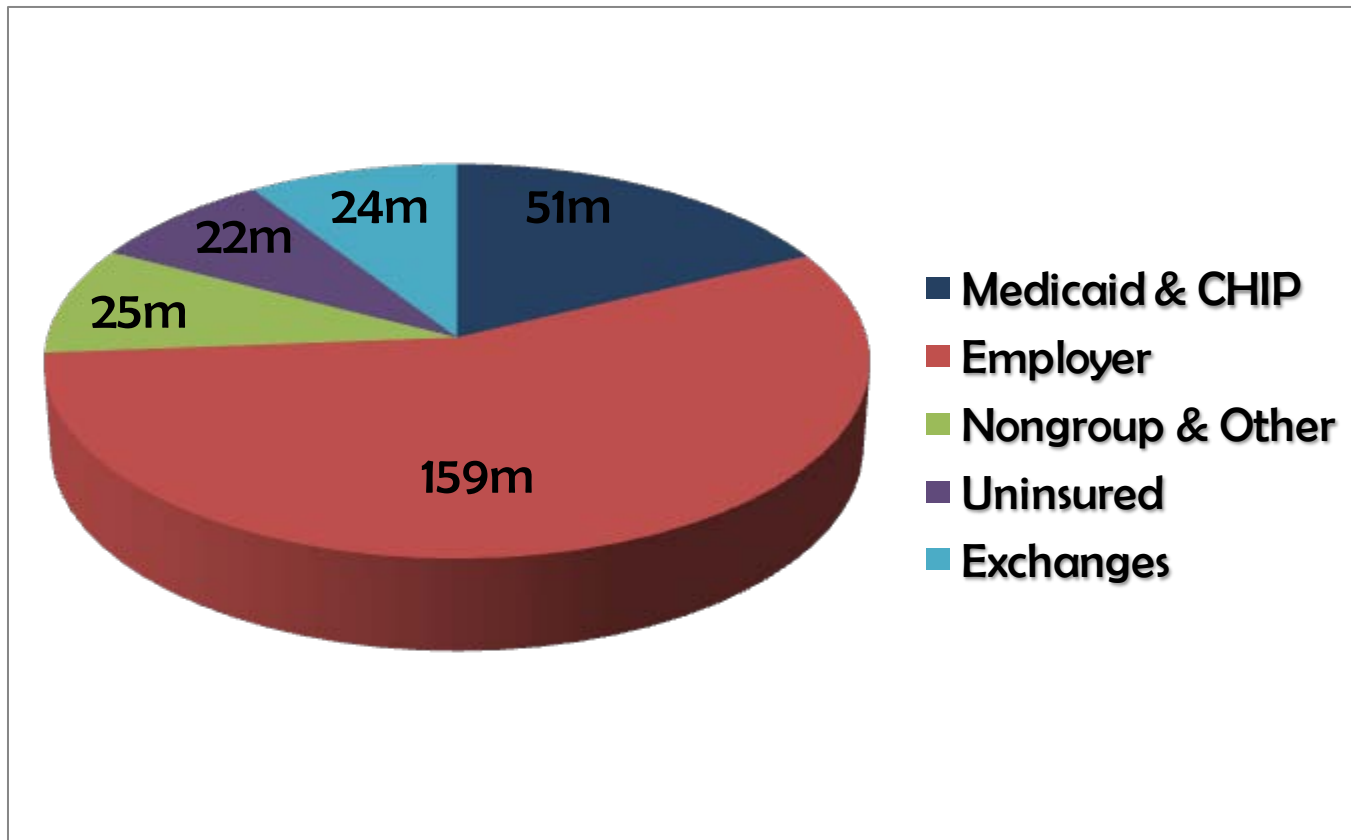
The ACA: Projected Changes in Coverage by 2019



Total new coverage = 32 million

Source: Congressional Budget Office,
March 2010

Sources of Coverage by 2019: Under 65



Source: Congressional Budget Office, March 2010

Medicaid and CHIP for Children and Adults

- ❖ Medicaid coverage for adults under 133 percent of the poverty line
 - ❖ Two States are already on the way
- ❖ CHIP and Medicaid coverage for children at higher incomes (March 23, 2010 levels)
- ❖ Simpler rules and Coordination with the Exchange
- ❖ Eligible means enrolled

New Paradigm

- ❖ Reform is predicated on the principle that everyone who is eligible is enrolled; and that coverage is stable
- ❖ Necessary to achieve coverage, quality and cost containment objectives
- ❖ Need to rethink Medicaid enrollment/renewal across the system; simplified Medicaid rules and other features of reform will make this easier
- ❖ Essential to make a **system** out of different components

2014 Begins Now!



Policy Guidance

Released:

- ❖ Early option for Federal funding for Medicaid coverage of low-income adults beginning April 1, 2010. (April 9, 2010)
- ❖ Medicaid Drug Rebate changes (April 22, 2010)
Family Planning option under ACA
- ❖ CHIPRA coverage for “Lawfully Residing” Pregnant Women and Children
- ❖ CHIPRA Translation and Interpretation services

Beyond Enrollment

- ❖ Payment and service delivery reform (e.g., Incentives to improve prenatal care; medical homes)
- ❖ Access to care (e.g., MACPAC)
- ❖ Prevention (e.g., Family planning services, preventive care for adults)
- ❖ Quality (e.g., Core measures for adult quality and performance measurement)
- ❖ Data, analysis, transparency

Collaboration with States is Essential

Systems Support Eligibility Rules Benefit Designs FMAP Rules Basic Option Data Performance Standards ...

Federal Actions

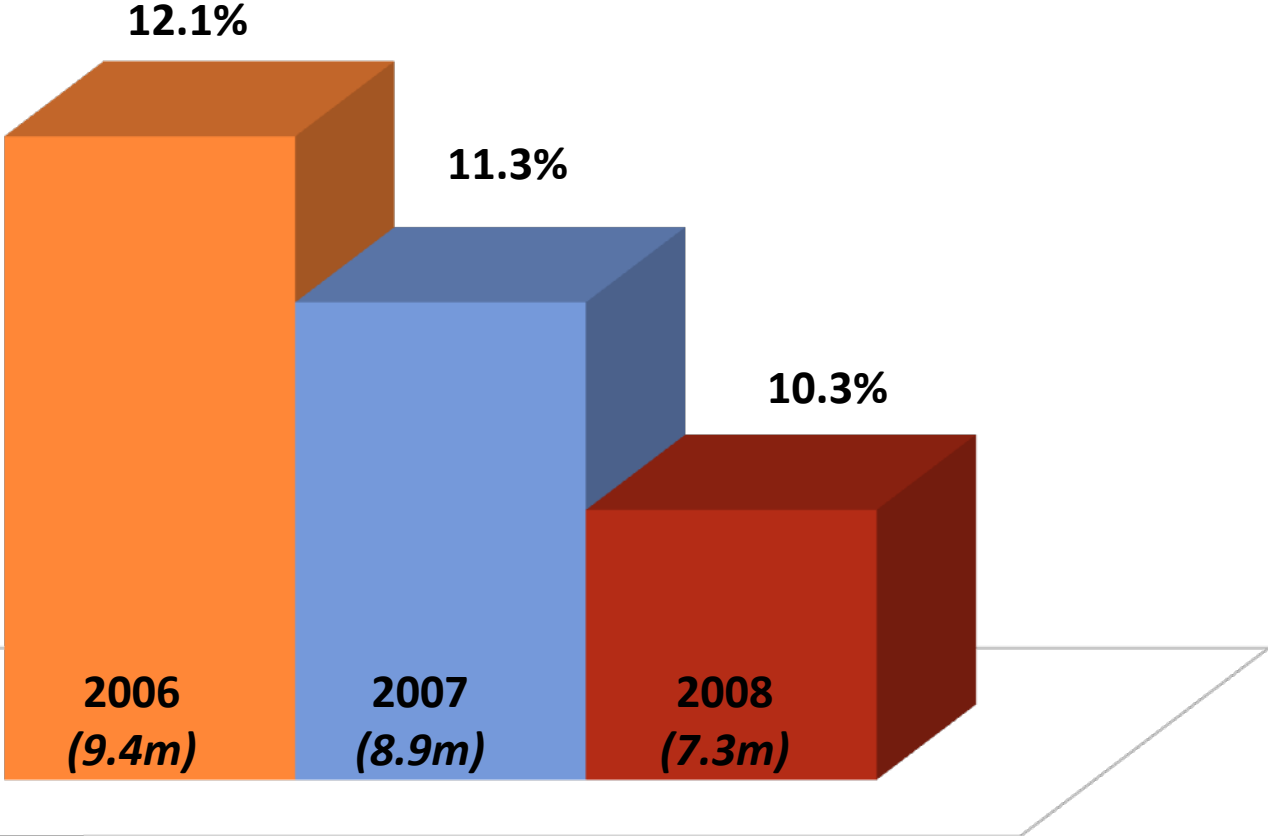
2010

2014

Exchange/Medicaid Org Structure Adopt New Laws/Budgets System Changes New Rules/Forms Provider Networks/Contracts Staffing Training Enrollment ...

State Actions

Continuing the Progress: Enrolling Uninsured Kids



Note: Values correspond to the percentage of children 0-18 without health insurance coverage in the given year. Each italicized number in () represents the total number of people (in millions) in the age group without coverage in that year.

Source: John Holahan and Allison Cook, "Changes in Health Insurance Coverage 2007-2008: Early Impact of the Recession," Kaiser Commission on Medicaid and the Uninsured (October 2009); www.kff.org

Building on Success

- ❖ Uninsured rate for children has declined significantly
- ❖ Progress even in parts of the country with the highest uninsured rates
- ❖ Disparities in coverage are narrowing
- ❖ Coverage gaps and churning can be prevented

Children's Coverage Does Not Need to Wait

The Secretary's Challenge: Enroll the 5 million uninsured children who are currently eligible for Medicaid or CHIP over the next five years



The Secretary's Challenge

“We all have a stake in America’s children, and together, we will assure that millions more get the care they need.”

*HHS Secretary Kathleen Sebelius
-- February 4, 2010*



Lessons Learned: Simplification

No in-person interview at renewal for Medicaid coverage	49 States
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Online applications for Medicaid/CHIP	25 States
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12 months continuous eligibility	22 States
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Self-declaration of income at enrollment	12 States
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Express Lane Eligibility	3 States
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“Performance Bonus”

- ❖ Added Federal support when States are successful enrolling Medicaid-eligible children
 - ❖ 5 out of 8 program features
 - ❖ Enrollment gains
- ❖ 9 States received bonuses in the first year (FY 2009)

CHIPRA: Investment in Measuring the Quality of Care for Children

- ❖ Core set of new quality standards for children covered through Medicaid and CHIP
- ❖ 10 demonstration grants to States undertaking promising strategies for improving the quality of care for children through quality measurement, delivery models such as medical homes, and health information technology
- ❖ Voluntary State Reporting
- ❖ Develop HER Program
- ❖ Pediatric/Measures Program



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National Children's Health Insurance Summit



Strategies For Increasing Enrollment and Retention

Chicago, November 4-6, 2009

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**Key to Reaching Our Goals:
Assuring that all Partners are
at the Table**