

New England Alliance for Children's Health

New England 101



Connecticut

Accomplishments of 2011:

- Implementation of PE for CHIP children
 - enabled the state to submit an application to HHS for CHIPRA bonus funds
- Children's coverage and benefits unchanged
- Family(Parent) coverage unchanged
 - State could have rolled back parent eligibility to 133% FPL under ACA
- Increased access to smoking cessation coverage.
 - Any adult on Medicaid will have access to smoking cessation medications and counseling

Connecticut

Accomplishments of 2011:

- No co-pays imposed on adults or children on Medicaid
- Co-pays/premiums in CHIP rolled back due to violation of MOE requirement in ACA (per CMS)
- Maintained access to dental and vision services for adults on Medicaid
- Balanced approach to deficit reduction – revenue increases, state employee union give-backs, and cuts to services

Connecticut

Complications of 2011:

- Huge budget gap needed to be filled
- Legislation passed which allows State to increase premiums and other out-of-pocket cost-sharing on CHIP kids
- Large increases in number of children and adults on Medicaid
- Loss of coverage for legal permanent resident non-citizens adults in US for less than five years

Connecticut

Opportunities in 2012:

- Effective January 1, 2012, new delivery system for HUSKY Program
 - moving from risk-based managed care organizations to one administrative service organization (“HUSKY Health”)
 - implementation of “person-centered medical home” model
- Implementation of long-awaited “modernization” project at state Medicaid agency
 - could lead to streamlined eligibility determinations and renewals; reduced churning and gaps in coverage

Connecticut

Challenges in 2012:

- Revenue projections and anticipated cost savings from union concessions and program changes may be overly optimistic
 - If so, the Malloy administration and the legislature may propose further cuts to HUSKY and other programs
- The use of one Medicaid fee schedule could lead to fewer providers available
 - Exacerbates access to specialty care

Maine

Accomplishments in 2011:

- Protected MaineCare coverage for parents with incomes between 133% FPL and 200% FPL
- Protected MaineCare coverage for immigrant children
- On-line application for Mainecare, TANF, SNAP and Child Care subsidies

Maine

Complications in 2011:

- New administration and new legislature
- Governor ran on a strong anti-welfare message, which included MaineCare
- Significant changes to rules for MaineCare early intervention services and school-based rehabilitative services

Maine

Opportunities in 2012:

- Further implementation of CHIP quality grant
- Expanding opportunities for schools to buy local foods

Maine

Challenges in 2012:

- Threats to MaineCare eligibility and services
- Threats to successful children's programs like Head Start
- On-going challenges and complications with services for children with special needs
- On-going budgetary challenges

Massachusetts

2011 Accomplishments

- **Level funding** for Children's Medical Security Plan (CMSP), Healthy Start, School health services and school-based health centers.
- **Increased funding** for Early Intervention
- **Outreach and Enrollment**
 - Statewide Enrollment Challenge
66 organizations across Massachusetts participated
Goal: enroll 500 children during the month of May.
Almost tripled the goal with 1,479 new children enrolled.
 - Campaign focusing on Coverage Retention
Bookmark: tips to help families keep their coverage
Magnet: a reminder for families to renew their insurance annually.

Massachusetts

Challenges 2011/ 2012

- **Re-defining priorities** in a 98% coverage environment
- Advancing coverage and improving services in this **economic climate** further challenged by severely strained administrative resources
- Navigating **payment reform and ACA** implementation challenges for children with very little information to go on.
- **Anti-immigrant sentiment** makes expansion, and even retention difficult

Massachusetts

Opportunities in 2012

- Opportunity to **reduce churn** through express-lane renewals and other means. Opportunity to partner with the administration.
- **Payment reform** has the potential to improve access by containing costs, and to improve quality
 - Need to ensure access to all forms of care
 - Need to make sure quality for kids is considered
- **Implementation of the ACA** presents opportunities to make coverage more seamless, and possibly to improve services.

Massachusetts

Opportunities in 2012, cont.

- Improve **mental health service delivery** (Childrens Mental Health Campaign)
- **Advance Quality Metrics in Pediatric Care** – Mass is a recipient of a CHIPRA quality grant

Massachusetts

Coverage:

- **Addressing Churn** – turning our focus to streamlined renewal (re-write of our 12-month continuous eligibility legislation)
- **ACA Implementation** – promoting seamless coverage
- **MassHealth Expansion:** This legislation extends MassHealth coverage to youth through age 20.

Service Improvements:

- **CMSP Service Standards Improvement:** Aims to improve this limited insurance product for children not eligible for MassHealth by removing the third party administrator and giving Secretary discretion to improve benefits.
- **Childrens Mental Health Campaign:** driving service improvements for children in coordination of care and access to mental health consultations.

New Hampshire

Accomplishments of 2011

- **CHIPRA Study Commission Issues Final Report**
Includes a review of the applicability of each of the CHIPRA expansion options and makes recommendations encouraging New Hampshire to pursue these options for improving access to health care for NH children. Voices staff member Lisa Kaplan Howe served on this commission and was specifically noted in the report for her contributions.
- **Protected NH Healthy Kids**
NH transitioning to Medicaid managed care; between strong advocacy and a proven track record of the current public-private partnership for NH Healthy Kids, advocates in NH were able to protect the population and delay transition of the program by a 1-year extension.

New Hampshire

Accomplishments of 2011

- Implementation of New Health Law, Including Establishing Oversight Committee
- Prevented NH from joining lawsuit around health care reform.
- Ensured that Granite Staters can continue to look to the NH Insurance Department for assistance and enforcement of the health insurance consumer protections contained in the new health law
- Established a legislative oversight committee that has already begun to work closely with the NH Insurance Department and NH Department of Health and Human Services to consider opportunities under the new health law.
- Exchange Planning *will* move forward – and with public input sessions!

New Hampshire

Complications of 2011

Lots!

- Faced with several challenges on several fronts – state legislature, Executive Council, onslaught of anti-health reform messages in media.
- Had to react nimbly and keep our eye on the prize – including thinking of different messengers and/or messages.
- Network Partner Overextended
Several network partners faced similar challenges, either in health care or on other fronts (i.e. organized labor, women's rights) and had difficulty participating or spending as many resources to protect/advance health care.
A lot of important issues competing for public attention and engagement.

New Hampshire

Complications of 2011

- Key Challenges from Unexpected Places

Exchange Planning prime example – passed Legislative Joint Fiscal Committee but delayed at the contract level by Executive Council; meanwhile separate legislation required the planning money to be sent back.

These types of unexpected challenges took time away from other key advocacy priorities.

New Hampshire

Opportunities in 2012

- **New Relationships with Diverse Partners**
While an initial challenge, the new legislative body and mindset gave Voices a chance to retool some of its messaging and reach out to new stakeholders, inside and outside the State House. We will continue to build these relationships in pursuit of quality, affordable health care in NH.
- **Public Education and Communications Outreach**
NH Voices for Health and network partners have focused heavily on public education and communications outreach over the past year. As more provisions of the new health law go into effect – and more challenges at the state and federal level are identified – it provides urgency and opportunity for us to talk to the public about children’s health coverage.

New Hampshire

Challenges in 2012

- Transition to Medicaid and Managed Care
Voices is looking at impact on children currently using buy-in coverage through NH Healthy Kids (children 301-400% of FPL; NH Healthy Kids Silver population) because if proposed changes to Medicaid, there will be no program for them to buy-in to
- Other Significant Challenges
 - State-Level Budget
 - Federal Debate
 - Opportunity for Voices, network partners to have breathing room to engage in advancing or expanding needed reforms
 - Retained Bill Relative to Lifetime TANF Medicaid Limit limits it to a 2-Year lifetime limit – will be up for vote first week of January

Rhode Island

Accomplishments in 2011

- General Assembly directed DHS to increase RIte Care/RIte Share premiums
 - Successfully advocated with CMS to deny state's request to implement increases
- Oral Health – RIte Smiles celebrated 5 years. New policy publications:
 - Access to Oral Health Care for RI's Children (RI Kids Count)
 - The Dental Safety Net in RI report (RI Kids Count, RI Health Center Association, RI Department of Health)

Rhode Island

Complications in 2011

- General Assembly considered reduction in parent eligibility for RItE Care/RItE Share from 175% to 133% FPL (did not enact)
- General Assembly, as budget initiative, directed DHS to increase RItE Care/RItE Share premiums for families with income between 150 – 250% FPL

Rhode Island

Opportunities for 2012

- Department of Human Services Work Support Strategies Grant
 - Improve enrollment and retention in Rite Care/ Rite Share and cross-program enrollment
- Governor's Health Care Reform Commission, Health Benefits Exchange Board
 - Ensuring children's needs for coverage, enrollment and retention are met in health care reform implementation

Rhode Island

Challenges for 2012

- Maintaining parent eligibility
- Oral surgery solutions
 - finding oral surgeons who will accept Medicaid payments for children and adults

Vermont

Accomplishments of 2011

- Coverage for immigrant pregnant women and children
- Mandate of coverage for the diagnosis and treatment of autism for kids 18 months-6 years old
- 30 day grace period implemented for premium payments for all children in Dr. Dynasaur program
- Study to improve existing and coordinate care for high risk pregnant women

Vermont

Complications of 2011

- Hurricane Irene and impact on the state budget
- State may seek to delay implementation of the autism mandate

Vermont

Opportunities in 2012

- State proposes enhanced service coordination and benefits for high risk pregnancies as result of study
- Initiative to get full dental benefits for pregnant and postpartum women
- Advocacy work in the development of Vermont's Health Insurance Exchange

Vermont

Challenges in 2012

- Maintaining existing programs and services
- Keeping coverage affordable for kids and their parents



Questions