

Medicaid and Children's Health Insurance Program (CHIP):

Nationally & In	
	(your state)

This worksheet is designed for Title V program staff, family leaders, and other stakeholders to serve as an overview of Medicaid and CHIP. The worksheet is interactive. It includes resources you can use to customize it with state-specific information to help demonstrate the importance of Medicaid and CHIP for children with special health care needs (CSHCN). A second worksheet (http://cahpp.org/resources/title-v-medicaidchip-interactive-worksheets/) addresses the importance of Title V for CSHCN. These worksheets were created as companion materials to the Catalyst Center resource 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) available at http://cahpp.org/resources/Medicaid-CHIP-tutorial

Medicaid

The Medicaid program was created in 1965 under Title XIX of the Social Security Act. Medicaid is a federal/state partnership that operates with a combination of federal and state funding. The amount of the federal match each state receives varies based on a formula that considers the per capita income for the state in relation to the U.S. per capita income, among other factors. The match is called FMAP – the Federal Medical Assistance Percentage. FMAP ranges from 50% to almost 75%. Wealthier states receive the federal minimum, which is 50%; for each dollar the state spends, it receives a matching federal dollar. Poorer states receive a higher FMAP. (For a more detailed discussion, see Section 6, Medicaid/CHIP Tutorial available at http://cahpp.org/wp-content/uploads/2016/05/section6.pdf)

Your State	FMAP (%)	

Source: Find the FMAP for your state at http://kff.org/medicaid/state-indicator/federal-matching-rate-and-multiplier/

Medicaid and Children with Special Health Care Needs

Medicaid is an important source of health coverage for children. The comprehensive benefits, including the federally mandated Early and Periodic Screening, Diagnostics and Treatment (EPSDT) benefit are especially important for children and youth with special health care needs (For a more detailed discussion, see Section 12, Medicaid/CHIP Tutorial available at http://cahpp.org/wp-content/uploads/2016/05/section12.pdf).

Because Medicaid is an entitlement program, meaning anyone who is eligible cannot be turned away, states must comply with federal eligibility regulations. Federal law has long required states to provide Medicaid coverage to people with household income below a certain level who are in specific eligibility groups. These groups - the categorically eligible groups - include children, their parents, and people receiving SSI due to a disability. Just because an individual is categorically eligible, (he or she falls within a mandatory coverage group) does not mean he or she will qualify for Medicaid, unless he or she also qualifies based on household income.

Eligibility for Medicaid depends on two key factors

- 1. Does the individual fall within a mandatory coverage category, and
- 2. Is the individual's household income less than the state's income eligibility threshold?

Children, birth up to 18 years of age, who meet the above two criteria are eligible for Medicaid even if they have other insurance. If they have other insurance, for example through a parent's employer, Medicaid can provide supplemental coverage by providing services other insurance does not cover and by reimbursing out-of-pocket health care costs, such as the child's deductible, co-payments, or co-insurance, that other insurance did not pay. (For a more detailed discussion, see Section 4 – Medicaid/ CHIP Tutorial available at http://cahpp.org/wp-content/uploads/2016/05/section4.pdf.)

Presently, states are required to provide Medicaid to children aged 0 through 18 in households with incomes under 138% FPL, but states can choose to expand Medicaid income eligibility beyond the federal regulation. Many states have higher income eligibility limits for children birth to age 1 and for children age 1 through 5. Some states have lower income eligibility for children 6 to 18 years old than for younger children.

Resources:

- Find the children's Medicaid income eligibility for children 0 to 18 in your state at http://kff.org/health-reform/state-indicator/medicaid-and-chip-income-eligibility-limits-for-children-as-a-percent-of-the-federal-poverty-level/
- Computations for the 2016 Annual Update of the HHS Poverty Guidelines. Available at https://aspe.hhs.gov/computations-2016-poverty-guidelines. Use these guidelines to compute dollar amounts (based on family size) for percent federal poverty levels for Medicaid and CHIP eligibility in your state.

Medicaid: Optional Coverage for Children with Disabilities

States have options for providing Medicaid to children with disabilities whose family income exceeds the state's income eligibility for children, based on severity of the child's disability. The definition of disability for each optional pathway to Medicaid is more restrictive than the broad MCHB definition of CSHCN.

Family Opportunity Act Medicaid Buy-In

The Family Opportunity Act (FOA) allows families whose income is higher than the state's income eligibility for children (younger than 18), but less than 300% FPL to buy in to Medicaid for a child with a SSI-level of disability. Generally, states have a sliding-scale premium for this type of Medicaid coverage. The FOA Buy-In can be the child's sole insurance, or the family may use the FOA Buy-In to supplement other health insurance a child with a disability may have. Currently, 5 states have implemented the FOA Medicaid Buy-In for Children with Disabilities. They are Colorado, Iowa, Louisiana, North Dakota, and Texas. In North Dakota, the upper income limit is 200% FPL. In the other 4 states, the income limit is up to 300% FPL.

Your State	Has FOA Medicaid Buy-In for Children with Disabilities (Yes/No	

Resources:

- The SSI disability criteria for children. Available at https://www.ssa.gov/disability/professionals/bluebook/ChildhoodListings.htm
- The Family Opportunity Act's Medicaid Buy-in Option: What We've Learned. Available at http://cahpp.org/resources/the-family-opportunity-acts-medicaid-buy-in-option/
- Frequently Asked Questions about the Family Opportunity Act's Medicaid Buy-In Option. Available at http://cahpp.org/resources/FAQ-about-FOA-Medicaid-Buy-In

TEFRA

TEFRA is the Tax Equity and Fiscal Responsibility Act, often called the Katie Beckett option. TEFRA is a state plan option for providing Medicaid to children (younger than 18) with disabilities:

- Whose family income is higher than the state's Medicaid income eligibility level for children
- Who meet the SSI clinical criteria for disability and who also require an institutional level of care
- Who can be safely cared for at home

Note: The definition for institutional level of care varies by state.

Your State	Has TEFRA/Katie Beckett Option
	(Yes/No)
Source, Find out if your state h	as a TEERA/Katio Bockett State plan option at

Source: Find out if your state has a TEFRA/Katie Beckett State plan option at http://cahpp.org/project/the-catalyst-center/financing-strategy/tefra/

Resources:

- Expanding Access to Medicaid Coverage: The TEFRA Option and Children with Disabilities.
 Available at http://cahpp.org/resources/expanding-access-medicaid-coverage-tefra-option-children-disabilities/
- Section 11 TEFRA/ Katie Beckett Option: A Pathway to Medicaid for Children with Disabilities of Public Insurance Programs and Children with Special Health Care Needs tutorial. Available at http://cahpp.org/wp-content/uploads/2016/05/section11.pdf
- The TEFRA Medicaid State Plan Option and Katie Beckett Waiver for Children. Available at http://cahpp.org/resources/tefra-medicaid-state-plan-option-katie-beckett-waiver-children/
- TEFRA and FOA Medicaid Buy-in Programs: An Educational Worksheet from the Catalyst Center. Available at http://cahpp.org/resources/tefra-and-foa-medicaid-buy-in-programs-an-educational-worksheet-from-the-catalyst-center/

Home & Community-Based Services (HCBS) Waivers

With approval from the Centers for Medicare and Medicaid Services (CMS), states can implement HCBS waivers to serve a defined population (such as individuals with autism) and provide specialized services that are not available to all other Medicaid enrollees, such as respite, special medical equipment, home modifications, case management, or other specialized services that allow an individual to live at home rather than in an institutional setting. For this reason, HCBS waivers must cost no more than institutional care. Because this rule limits the available funding, states are allowed to have a designated number of waiver slots, which means they can maintain waiting lists for waiver services. Typically, HCBS waivers serve adults and/or children with disabilities:

List of waivers, population served, and additional Medicaid services and supports in your state: •	_
• Who can safely live at home with specialized services that are not typically provided by Medi	aid
Who require an institutional level of care, and	
• Whose income is less than 300% of the SSI federal benefit level,	

Find out if your state has HCBS waivers: Go to https://www.medicaid.gov/medicaid/section-1115-demo/demonstration-and-waiver-list/waivers_faceted.html. Use the search box to select your state, waiver authority and status.

If you need help finding out which HCBS waivers in your state serve children with disabilities, contact the Catalyst Center by e-mail at: cyshcn@bu.edu

Resource:

Medicaid Waivers. Available at http://cahpp.org/project/the-catalyst-center/financing-strategy/medicaid-waivers/

Quick Comparison of Family Opportunity Act Medicaid Buy-in Programs, TEFRA/ Katie Beckett Programs, and Home and Community-based Service Waivers

	FOA	TEFRA/Katie Beckett	HCBS Waiver
Level of Care	SSI Disability	Institutional	Institutional
Income Limits	Up to 300% FPL	No Cap on Income	Maybe
Benefits	Medicaid	Medicaid	Medicaid plus additional services, such as case management, respite, home modifications, other
Authority	State Plan Amendment	State Plan Amendment	Waiver
Premiums	Generally Yes	None	Optional/None
Entitlement	Yes	Yes	No, can be waiting lists

Resource:

• TEFRA and FOA Medicaid Buy-in Programs: An Educational Worksheet from the Catalyst Center. Available at http://cahpp.org/resources/tefra-and-foa-medicaid-buy-in-programs-an-educational-worksheet-from-the-catalyst-center/

The Children's Health Insurance Program (CHIP)

The Children's Health Insurance Program (CHIP), created in 1997 as Title XXI of the Social Security Act, is a public insurance program for uninsured children (and, if a state chooses, pregnant women) in families whose income exceeds the Medicaid income eligibility limit for children. Like Medicaid, CHIP is a federal/state partnership. States receive federal dollars to help fund CHIP. The federal contribution for CHIP is called the enhanced Federal Medical Assistance Percentage (eFMAP). Like FMAP, eFMAP varies depending on the state, and is calculated by increasing the state's FMAP by 30 points, not to exceed 100%. For fiscal year 2017, eFMAP ranges from 88% to 100%

Your State	eFMAP (%)	
Source: Find the eFMAP for your state at http://kff.org/other/state-		
indicator/enhanced-federal-matching-rate-chip/		

Unlike Medicaid, which is an entitlement, the amount of federal dollars states receive for their CHIP programs are capped. This means each state sets its own income eligibility rules within federal guidelines. States can also close enrollment and maintain waiting lists if they reach their cap limit. In addition, states have greater flexibility in how they structure their CHIP programs than in Medicaid. For example, they can use CHIP funds to expand Medicaid eligibility and follow Medicaid rules. States can implement separate CHIP programs, which have more flexibility; or they can do a combination of both.

Name of CHIP program in your state:	
Type of CHIP program in your state:	

Find the CHIP program name and type in your state at http://kff.org/other/state-indicator/chip-program-name-and-type/

CHIP Benefits

If your state uses CHIP funds to expand Medicaid, children receive Medicaid benefits, including EPSDT. If your state operates a separate CHIP program, children receive benchmark coverage similar to private health plans, which does not include the EPSDT benefit. If your state operates a combination, children in the Medicaid expansion receive Medicaid benefits, including EPSDT; children in the separate CHIP program receive benchmark coverage.

Medicaid and CHIP Program Costs

States are prohibited from assessing premiums, enrollment fees, or cost-sharing for children enrolled in Medicaid with household income less than 150% FPL. States may assess premiums, enrollment fees, or cost-sharing for children enrolled in Medicaid with household income above 150% FPL. It is more common for states to assess premiums, enrollment fees, or cost-sharing for CHIP.

	Has Medicaid Fees for Children (Yes/No)	CHIP Fees for Children (\$)
Your State		

Resources:

- Find out in your state: Medicaid & CHIP Premium, Enrollment Fee, and Cost-Sharing Requirements for Children, January 2016. Available at https://kaiserfamilyfoundation.files.wordpress.com/2016/01/8825-table-15.pdf
- Medicaid & CHIP Premiums and Enrollment Fees for Children at Selected Income Levels. Available at https://kaiserfamilyfoundation.files.wordpress.com/2016/01/8825-table-16.pdf
- Medicaid & CHIP Cost-Sharing Amounts for Selected Services for Children at Selected Income Levels. Available at https://kaiserfamilyfoundation.files.wordpress.com/2016/01/8825-table-18.pdf
- Medicaid and CHIP are both federal/state partnerships that operate with a combination of federal and state funds. But there are important differences. See an infographic with a comparison of Medicaid and CHIP at http://cahpp.org/wp-content/uploads/2016/06/medicaid-chip-infographic.pdf.

Children's Medicaid & CHIP Income Eligibility in	
	(your state)

Age (years)	Medicaid Income Limit	Separate CHIP Income Limit
	(% FPL)	(% FPL)
0-1		
1-5		
6-18		

Source: Find the Medicaid and CHIP Income Eligibility Limits for Children as a Percent of the Federal Poverty Level in your state at http://kff.org/health-reform/state-indicator/medicaid-and-chip-income-eligibility-limits-for-children-as-a-percent-of-the-federal-poverty-level/

Have questions? We can help. Contact the Catalyst Center for technical assistance, additional resources, data and analysis.

Contact us:

Web: www.catalystctr.org Phone: 617-638-1930 Email: cyshcn@bu.edu

Was this worksheet helpful?

Please take our survey at: https://bostonu.qualtrics.com/jfe/form/SV_0V6X2dryag4diV7

About the Catalyst Center:

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