

Children's Health Services in the HUSKY Program

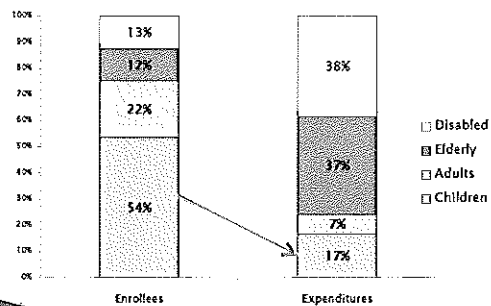
Presentation to
the Medical Inefficiency Committee
February 8, 2010

Connecticut's HUSKY Program

- › HUSKY A: Medicaid for children and families with household income less than 185% federal poverty level (\$40,793 for family of 4)
- › HUSKY A enrollment (as of 2/1/10)
241,606 children under 19
123,295 adults 19 and over

Connecticut Voices for Children

Distribution of Medicaid Enrollees and
Expenditures, Connecticut FY2006



Connecticut Voices for Children

Medicaid's Early and Periodic Screening, Diagnosis, and Treatment Program

How Poverty Affects Early Health

Poor children are less likely to be in good health and more likely to experience:

- Poor birth outcomes
- Chronic health conditions (asthma, dental caries)
- Cognitive problems and developmental delays
- Poor nutrition
- Lead poisoning
- Mental health conditions
- Vision and hearing problems
- Emergency care for conditions that are preventable or treatable with primary care

Connecticut Voices for Children

What is EPSDT?

- › 1967 amendment to Title XIX of the Social Security Act (Medicaid)
- › Ensures timely and comprehensive preventive care and treatment for children under 21 in low income families
- › Largest comprehensive child health program in the United States

Connecticut Voices for Children

Objectives of EPSDT

- › Assure availability and accessibility of required health care
- › Help recipients and their parents or guardians effectively use these resources
- › Provide comprehensive care, including timely preventive child health services

Connecticut Voices for Children

What is the EPSDT Benefit?

- › Informing
- › Support services
- › Screening
- › Diagnostic
- › Treatment
- › Case Management
- › Reporting

Connecticut Voices for Children

Screening

- › Comprehensive health & developmental history
- › Age-appropriate immunizations
- › Comprehensive unclothed physical exam
- › Laboratory tests, including lead toxicity screening
- › Health education and anticipatory guidance
- › Vision and hearing services
- › Dental services

Connecticut Voices for Children

Treatment

States must provide "such other necessary health care, diagnostic services, treatment and other measures ... to correct or ameliorate defects and physical and mental illnesses and conditions discovered by the screening services, whether or not such services are covered under the State plan."

42 U.S.C. Secs.1396a(a)(43) and 1396d(r)(5)

Connecticut Voices for Children

Medical Necessity

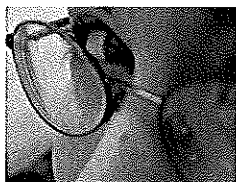
- › Coverage for medically necessary services should be driven by what the individual child needs to correct or ameliorate a defect or condition
- › Limits on the amount, duration and scope of care that may apply to adults should NOT limit EPSDT coverage

Connecticut Voices for Children

Why EPSDT Matters

Connecticut Voices for Children

EPSDT Covers Needs of Individual Children



- › Waterbury family with two children who needed new glasses (child 7 lost hers and child 9 broke his)
- › Managed care plan said children were entitled to one pair per year

Connecticut Voices for Children

EPSDT Includes Support Services

- › 6 year old Willimantic boy needed dental care
- › Mother is Spanish-speaking
- › Needed transportation for appointment Friday July 2 at Hartford clinic



Connecticut Voices for Children

EPSDT Ensures Optimal Care for Children with Special Needs



- › Baby born 3 months premature was in UCHC NICU
- › 21-year old mother was breast-feeding and needed to learn to care for the baby
- › Mother could no longer afford taxi ride from Meriden to Farmington

Connecticut Voices for Children

EPSDT Covers Medically Necessary Care for Children with Special Needs



- › Three-year old child with special needs wears diapers
- › Mother was informed that diapers would no longer be covered when the child turns 4

Connecticut Voices for Children

Implications of Changing Definition of Medical Necessity

Connecticut Voices for Children

Risks to Children's Health Care

- › How will parents know that their children are entitled to all medically necessary care?
- › How will providers know that the new definition should not limit children's health services?
- › How will managed care organizations know that the limits they can impose in commercial policies are not permitted for children in Medicaid?

Connecticut Voices for Children

Risks to Care for Children with Special Needs

- › Will children with chronic health conditions receive needed services that are age and developmentally appropriate?
- › Will children with disabilities receive care and services that help them achieve and maintain optimal function?

Connecticut Voices for Children

Steps to Ensure Children Receive All Medically Necessary Care

- › Connecticut has an affirmative obligation to ensure children actually receive the care they need
- › Connecticut must:
 - Inform parents
 - Inform providers
 - Improve oversight of managed care contractors
 - Monitor health care access and quality for children with special needs

Connecticut Voices for Children

For more information:

- › Mary Alice Lee, Ph.D.
- › Senior Policy Fellow
- › Connecticut Voices for Children
- › 33 Whitney Avenue
- › New Haven, Connecticut 06510
- › 203-498-4240
- › malee@ctkidslink.org

Connecticut Voices for Children