Pre-Session Reading: Medicaid

This document is designed to prepare you for your upcoming Enhanced Learning Session (ELS) on Medicaid and child health coverage at the Spring APPD Meeting. These materials are designed to be brief – you can plan to spend about 15-20 minutes in total reviewing them. Don't worry if that seems too short, we will spend plenty of time digging in as we go through additional material together during the ELS.

Please start by reviewing the learning goals and objectives below– this will help you to focus on the most important details that we hope you will gain from our session. We will be focusing on sections 1 and 2 in our ELS but you are welcome to review section 3 as well. Next review the information the page that follows as well as the resources that are linked within it. The final page contains a glossary with some of the common lingo used when talking about Medicaid. Please try to familiarize yourself with some of these terms before our session.

Learning Goals and Objectives		
1.	Build a basic understanding of the Medicaid program and its historical context.	
	a. Describe the pertinent historical events which resulted in current structure of Medicaid.	n the development of the
	b. Highlight trends in child health coverage over time, inclu children covered and costs of care.	uding proportion of
	c. Compare the US approach to providing child health cover nations.	erage with that of other
2.	Describe the role Medicaid currently plays in providing acce	ess to care for US
	children.	
	a. Explain federal and your state's eligibility requirements	to qualify for Medicaid.
	b. Describe how Medicaid approaches unique populations: children with special healthcare needs, children in substi	
	immigrants.	
	c. Compare and contrast private and public insurance cover role of EPSDT in structuring benefits.	rage for children, and the
	d. Reflect on how differences in insurance coverage may co disparities in the US.	ontribute to health
3.	Construct a plan to advocate for health care coverage and a	ccess at the individual
	and system levels with a focus on Medicaid.	
	a. Create a messaging framework for Medicaid, considering can reach the broadest audience.	g how the language used
	b. Implement individual strategies to advocate for patient c county or state.	overage/access in your
	c. Propose systemic advocacy opportunities for Medicaid v AAP Federal Affairs.	with your AAP chapter o

Medicaid: Historical Context and Current Role in Providing Coverage

During the ELS we will be reviewing the historical context and events that led to the creation of the Medicaid program and how this program impacted on trends in child health coverage over time. We will also examine the role that Medicaid plays in child health currently, with an opportunity to explore how eligibility and coverage functions in your state.

WATCH THIS VIDEO

• *Medicaid, Explained: Why it's worse to be sick in some states than others* <u>https://www.youtube.com/watch?v=sOo_aw-xgHQ</u>

The video is 11 minutes total but the most relevant section is between 4:38-7:00, which explains very briefly how Medicaid was started and then quickly reviews some state to state variability

REVIEW THESE WEBSITES

During the ELS, we will be reviewing Medicaid eligibility and coverage at both the national and state levels – with an opportunity to specifically examine data for your state. Please take a moment to peruse these websites in advance in order to familiarize yourself with the types of data available.

- <u>https://www.medicaid.gov/medicaid/by-state/by-state.html</u>
- https://www.kff.org/medicaid/fact-sheet/where-are-states-today-medicaid-and-chip//
- https://ccf.georgetown.edu/state-childrens-health-facts/

REFLECT ON YOUR PRACTICE

During the ELS we will have the opportunity to discuss how differences in health insurance coverage contribute to health disparities. Please take a moment to reflect on experiences you may have encountered in the care of specific patients or a population that address this topic and come ready to discuss with the group.

Medicaid Lingo

Sometimes the vocabulary around Medicaid can be unfamiliar. Here is a list of common acronyms and terms that are used in this module for reference.

EPSDT – Early and Periodic Screening Diagnostic and Treatment, a comprehensive and preventive healthcare coverage package provided to those less than 21 years old qualifying for Medicaid

FMAP – Federal Medical Assistance Percentage, rates used to calculate matching funds allocated by the federal government towards joint federal-state partnerships in which benefits are administered by the states.

FPL – Federal Poverty Level, income level calculated annually used to determine eligibility for federally funded services

HRSA – Health Resources and Service Administration, an agency through the Department of Health and Human Services with a goal to improve care for vulnerable populations

FQHC – Federally Qualified Health Center, qualifies for enhanced reimbursement from Medicaid to provide comprehensive care for underserved population

CHIP – Children's Health Insurance Program, state administered program with federal matching that provides low-cost coverage to children and pregnant women in families who earn too much to qualify for Medicaid.