Section C
Health Insurance and Summary

Medicaid and CHIP-RA

http://www.medicaid.gov/

Program Structure

- Title XIX Social Security Act, 1965
- Health insurance for low-income and vulnerable populations
- Entitlement program
- Administered in the Center for Medicare and Medicaid Services (CMS), DHHS

Scope of the Medicaid Program

- In FY 2007 ...
  - 55 million people
  - More than one in seven people in the United States, including one-fourth of children and one-third of births
  - $346 billion
  - 15% of nation’s health care expenditures

Populations and Services

- Low-income children and adults (44.5 million)
  - Health insurance
- Low-income elderly and persons with disabilities (14.5 million)
  - Long-term care
  - Medicare supplementary insurance
  - Health insurance for low-income disabled adults

Medicaid Enrollees and Expenditures

Medicaid enrollees and expenditures, by enrollment group (2006)

<table>
<thead>
<tr>
<th>Enrollees</th>
<th>Expenditures on benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total: 59 million</td>
<td>Total: $346 billion</td>
</tr>
</tbody>
</table>

MCH System Partners (The Very Briefest of Introductions): Holly Grason, MA

**Federally Mandated Medicaid Services**
- Inpatient and outpatient hospital
- Physician, midwife, and certified nurse practitioner
- Laboratory and X-ray
- Nursing home and home health care
- Early periodic screening diagnostic and treatment (EPSDT) for children under 21
- Family planning (since 1972)
- Rural health clinics/federally qualified health centers

**Mandatory Medicaid Coverage for Children**
- Children under 6: up to 133% FPL
- Children 6-18: <100% FPL
- Children who receive adoption assistance or foster care
- Children who qualify for SSI based on disability and income

**EPSDT**
- Expanded role for Medicaid
  - Comprehensive preventive care
  - Regular health screenings, in addition to federally required services
  - Physical exam, vision, hearing, immunizations, diagnostic and lab tests, dental exam by age 3
  - Evaluate physical and mental health, growth, development, nutritional status
- Follow-up
  - All medically necessary treatment services
  - Regardless of inclusion in state plan
  - Particular importance for children with special health care needs

**Children’s Health Insurance Program**
- Created in 1997, reauthorized in 2009 (CHIPRA)
- Provides health insurance to children and parents whose family income exceeds the threshold for Medicaid
- Covers 8 million children
- $13.5 billion federal allocation for FFY 2012

**Program Intersects**

<table>
<thead>
<tr>
<th>Program</th>
<th>Purpose</th>
<th>Legislative Base</th>
<th>Year enacted</th>
<th>Agency oversight</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title V MCH</td>
<td>Ensure the health of all mothers and children</td>
<td>Title X, Social Security Act</td>
<td>1935</td>
<td>ACHA, HRSA, DHHS</td>
</tr>
<tr>
<td>CHCs</td>
<td>Provide primary care for low-income persons</td>
<td>Section 223, Public Health Service Act</td>
<td>1965</td>
<td>BPHC, HRSA, DHHS</td>
</tr>
<tr>
<td>Title X</td>
<td>Comprehensive contraceptive services</td>
<td>Title X, Public Health Service Act</td>
<td>1970</td>
<td>OPA, DHHS</td>
</tr>
<tr>
<td>Medicaid/CHIPRA</td>
<td>Provide health insurance</td>
<td>Title XX, Social Security Act</td>
<td>1965</td>
<td>CMS, DHHS</td>
</tr>
<tr>
<td>WIC</td>
<td>Nutritional supplementation, breastfeeding,</td>
<td>Child Nutrition Act</td>
<td>1972</td>
<td>FNS, USDA</td>
</tr>
<tr>
<td>TANF/Welfare</td>
<td>Cash assistance and support self sufficiency</td>
<td>Title IV, Social Security Act</td>
<td>1964</td>
<td>ACF, DHHS</td>
</tr>
<tr>
<td>Food Stamps</td>
<td>Provide funds for food purchase</td>
<td>Food and Nutrition Act</td>
<td>1964*</td>
<td>FNS, USDA</td>
</tr>
</tbody>
</table>

**Summary**
- All children and families require economic security, food security, and health security
- The federal government, often in partnership with states, administers multiple programs to address these needs, particularly for vulnerable populations
- This policy and program schema is complex and often uncoordinated, yet remains critical in order to reduce disparities and ensure a strong social fabric and progress as a nation
Please take a moment to evaluate this lecture. Your feedback is very important and will be used for future revisions. The Evaluation link is available on the lecture page.