



Georgetown University  
Health Policy Institute  
CENTER FOR CHILDREN  
AND FAMILIES

# Separate CHIP Benefits and Cost-sharing

Joe Tuschner  
Center for Children and Families  
Georgetown University Health Policy Institute

Medicaid and CHIP Payment and Access Commission  
January 23, 2014

# A Joint Project



Georgetown University  
Health Policy Institute  
CENTER FOR CHILDREN  
AND FAMILIES

the David &  
Lucile Packard  
FOUNDATION

# Goals

- Examine benefits and cost-sharing in separate CHIP programs
- Inform policymakers and stakeholders considering the role of CHIP
- Consolidate benefit and cost-sharing information in a single source
- Summarize benefits in consistent categories



# Designing Separate CHIP Benefits

- Separate CHIP benchmark options:

FEHBP Blue Cross Blue Shield option

State employee benefits

Largest HMO

Benchmark equivalent

Children's coverage pre-dating CHIP

Secretary approved

# Designing Separate CHIP Benefits

- Separate CHIP benchmark selections:

FEHBP Blue Cross Blue Shield option	1
State employee benefits	2
Largest HMO	3
Benchmark equivalent	9
Children's coverage pre-dating CHIP	3
Secretary approved	24

# Designing Separate CHIP Benefits

- Secretary approved coverage is often based on Medicaid benefits:

Same as Medicaid benefits	9
Medicaid benefits with alterations	3
Other	12

# Early and Periodic Screening, Diagnosis, and Treatment in CHIP

- 14 separate programs in 13 states offer EPSDT benefits
- They use a variety of benchmarks

Same as Medicaid benefits	9
Medicaid benefits with alterations	1
Benchmark equivalent	3
State employee health plan	1



# Utilization Management

- Medical necessity standards, prior authorization and other methods to control use of services
- State plans do not contain consistent description of UM
- Study does not assess UM
- However, UM can affect access to benefits and may be a difference between CHIP and qualified health plans

# Preliminary Findings

- Mental health and substance abuse services
- Oral health services
- Prenatal care and pre-pregnancy services
- Habilitative services and devices
- Cost-sharing
  - Premiums
  - Per service charges
  - Limits on cost-sharing



# Mental Health and Substance Abuse Services

- Parity required by law
- No deadline for compliance in Jan. 2013 State Health Official letter
- Most programs report full coverage
- Some visit limits which vary based on:
  - Inpatient/Outpatient
  - Mental health/substance abuse treatment

# Oral Health Services

- Coverage required by law, regulations not yet promulgated
- Oct. 2009 State Health Official letter provides some definition
- Most programs offer full coverage of non-orthodontic coverage, some dollar limits and exclusions
- Orthodontics frequently limited to severe malocclusions

# Prenatal Care and Pre-Pregnancy Services

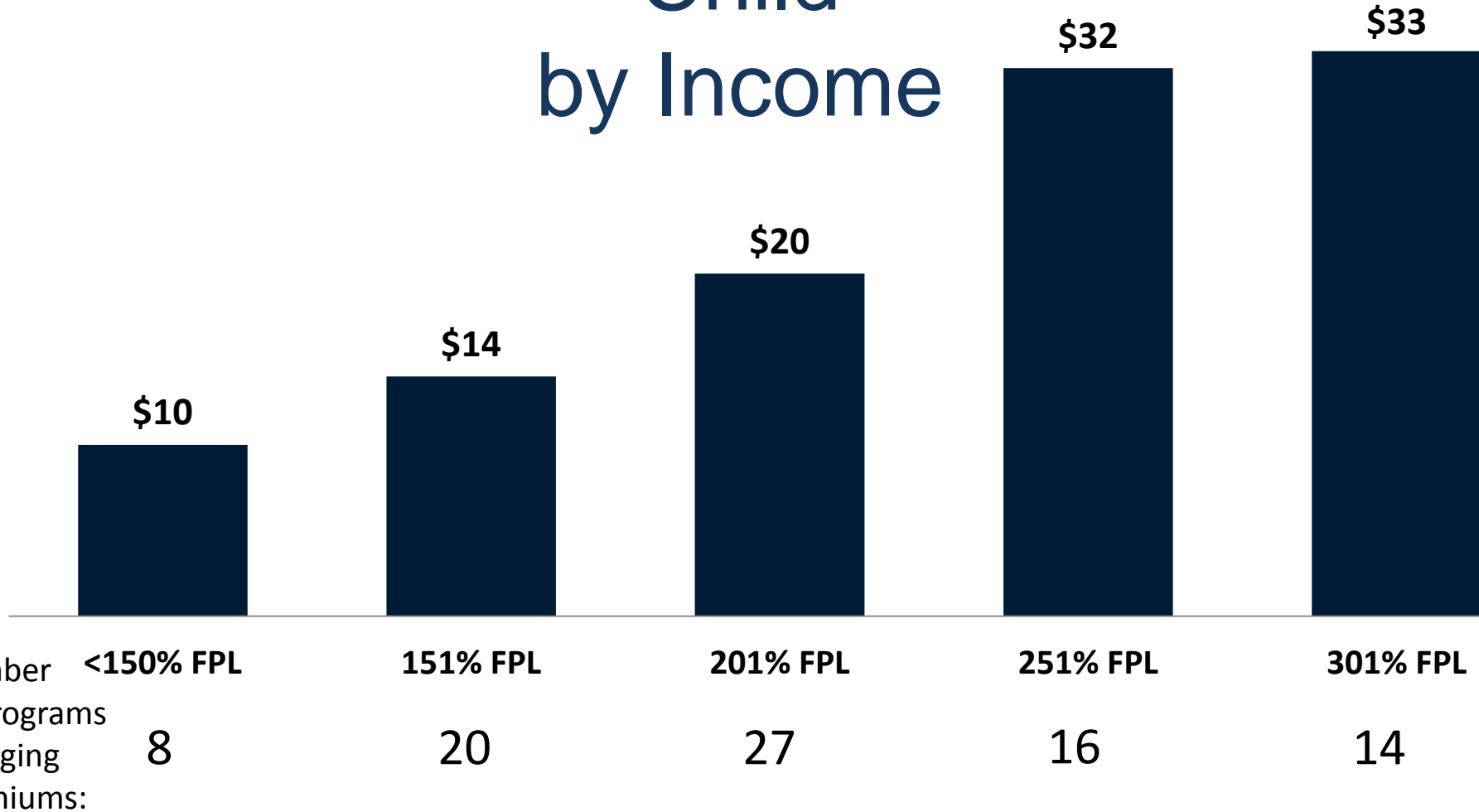
- Near universal coverage
- Medicaid covers pregnant enrollees in 2 of the 3 programs with limited coverage

Full coverage	39
Coverage with limitations or exclusions	3
No coverage	0

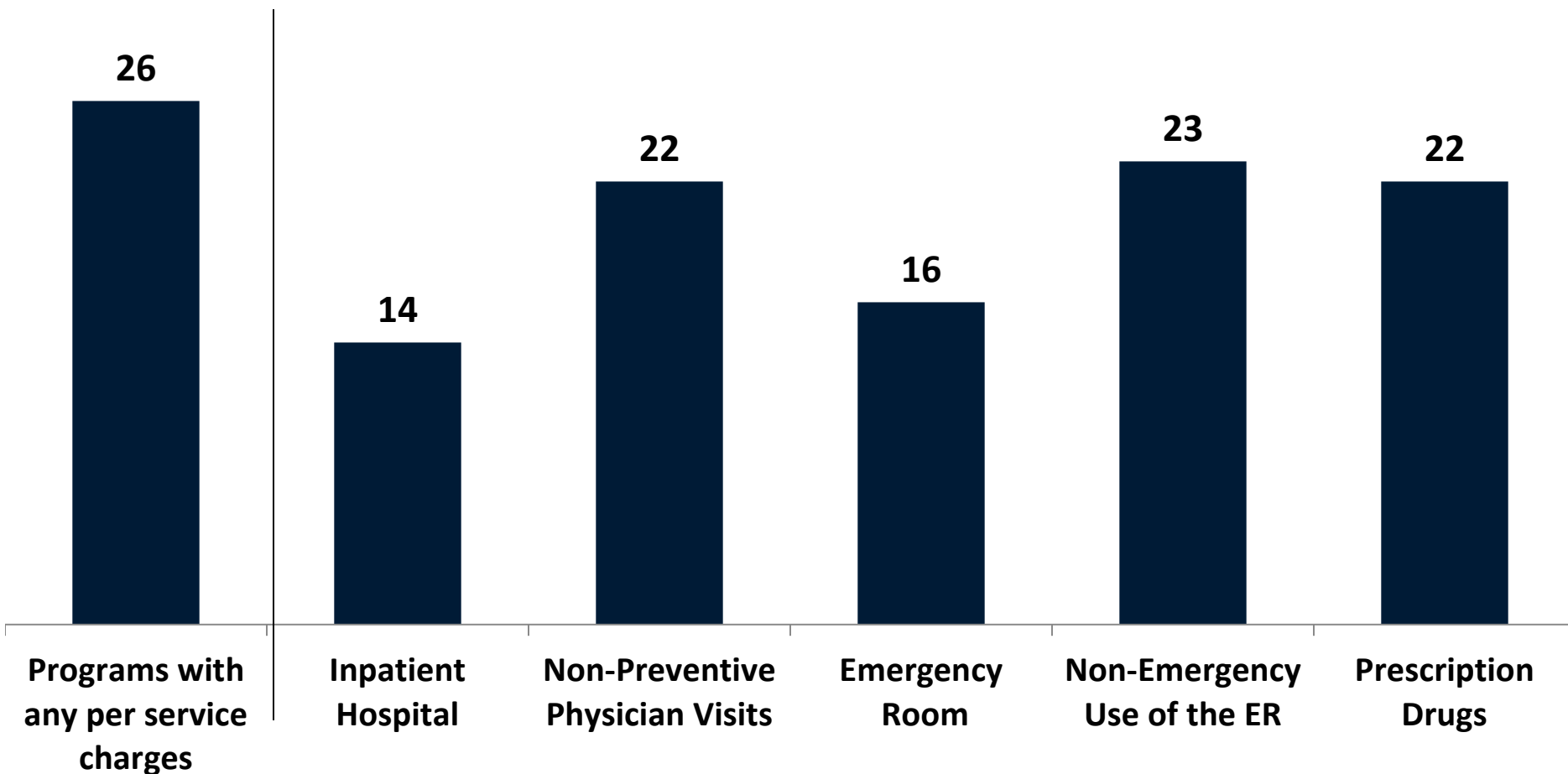
# Habilitative Services and Devices

- Not separately defined in state plans
- May be included in:
  - Physical, Occupational, Speech/Language Therapies (All programs cover, 17 with limits)
  - Durable Medical Equipment (All programs cover, 8 with limits)
- Coverage may depend on medical necessity standard, which we did not review

# Median Monthly Premiums per Child by Income



# Programs with per Service Charges





# Limits on Premiums and Cost-Sharing

- 18 programs have a cap lower than 5% of family income:

No charges beyond premiums	11
Cost-sharing limit lower than federal cap	7

- The 5% cap applies in the remaining 24 programs

# For More Information

- Joe Touschner, Senior Health Policy Analyst
- Georgetown University Center for Children and Families
- [jdt38@georgetown.edu](mailto:jdt38@georgetown.edu)
- Joanne Jee, Program Director
- National Academy for State Health Policy
- [jjee@nashp.org](mailto:jjee@nashp.org)

NATIONAL ACADEMY  
*for* STATE HEALTH POLICY<sup>®</sup>



Georgetown University  
Health Policy Institute  
CENTER FOR CHILDREN  
AND FAMILIES