



MACPAC
Medicaid and CHIP Payment and Access Commission



Comparing CHIP Benefits to Medicaid, Exchange Plans, and Employer-Sponsored Insurance

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Overview

- Health benefit coverage
- Comparisons of CHIP coverage to other services
- Limitations
- Possible approaches for addressing comparability of benefits

Health Benefit Coverage

CHIP benefits: States have flexibility in benefit design

Medicaid benefits: Mandatory and optional benefits, and must cover EPSDT benefits for children

Exchange plans: State flexibility in defining 10 EHB, and some plans may exclude pediatric dental if stand-alone coverage is available

Employer-sponsored insurance: Highly variable, designed by employers and insurers with few federal requirements

Comparison of CHIP Coverage to Other Sources

Most major medical services are covered by all sources of coverage

For other benefits, coverage varies:

- Dental coverage in exchange plans and employer-sponsored insurance is an area of concern
- Variability of a covered benefits within a source makes it difficult to compare across different coverage sources

Limitations

Benefits categories: lack specificity that would be useful in making comparisons

Scope of coverage: even though a benefit is offered, data are not available to compare the number and type of services people can receive

Medical necessity: can be used to expand or limit coverage

Possible Approaches for Addressing Comparability of Benefits

Change the EHB definition of pediatric services

Provide states the option of establishing a pediatric-specific EHB benchmark

Require all exchange plans to embed pediatric dental coverage

Augment existing exchange subsidies to include the cost of stand-alone dental coverage