Agenda

Current Environment

Short-Term View: Early ACA Implementation Challenges

Long-Term View: Options for the Future

Conclusion
Current Environment

- State attention is on problems with enrollment systems and broader reform

- Children not a focus even though they have much at stake
  - Parent coverage
  - Enrollment system changes
  - New outreach and enrollment initiatives

- For now, continuity of children's coverage represents an important source of stability
Impact of Parental Coverage on Children’s Coverage

- Positive effects on children’s coverage from parental coverage.
  - Greater likelihood of enrolling
  - More continuity of coverage

- Associated with more effective use of coverage, as measured by access to care, having a regular source of care, and using preventive services.

- Not clear if children need to be in same plan as parents to achieve positive effects.
1) Making new enrollment strategies work
   - Single application for all insurance affordability programs ("No wrong door")
   - Apply online, by phone, by mail, in person

2) Moving the "stair-step" kids
   - Currently, children in family may be in different programs
   - Under ACA, kids with family income 100-133% FPL currently in CHIP must move to Medicaid
   - State continues to receive enhanced CHIP match for them

3) Addressing shortcomings of the ACA’s subsidy structure
   - Family glitch
   - “Double hit” on premiums
Making New Enrollment Strategies Work for Kids: State Response

- **Challenges**
  - More complex application procedures
  - Problems with healthcare.gov
  - Hand offs between the federal Marketplace and state agencies

- **State Responses**
  - “Better door” messaging
  - Training of Navigators and other assisters
  - Monitoring Medicaid and CHIP enrollment data
  - Eliminating waiting periods
Example of “Better Door Messaging”

**Example Texas Options Tool**

**Your Texas Benefits**

- Are you...
  - A parent or caretaker?
  - Applying for a child?
  - Pregnant?
  - Age 65 or older?
  - A person who has a disability or is blind?
  - Formerly in foster care?
  - Applying for Food Stamps or Cash Help?

- Are you an adult without children...
  - Applying for help paying for health insurance?
  - Applying to buy health insurance?
  - Interested in shopping for insurance in the Health Insurance Marketplace?

Start or continue an HHSC application

Start a Health Insurance Marketplace application

Contact us | Compact with Texans | Internet policy | Texas.gov | Civil rights | Accessibility guide

Release 87.0
CHIP Waiting Periods

Note: DE, ID, KY and WA submitted SPAs to CMS to eliminate waiting periods as of 2014.
2) Moving the "stair-step" kids
- Currently, children in family may be in different programs
- Under ACA, kids with family income 100-133% FPL currently in CHIP must move to Medicaid
- State continues to receive enhanced CHIP match for them
21 States Must Move CHIP Stair-Step Kids to Medicaid

Approximately 28% of children in CHIP in these states will move to Medicaid
Estimated Share of CHIP Kids Moving to Medicaid in 2014

Source: Kaiser Family Foundation
Many states have not developed a comprehensive approach. Among states that have developed a strategy:

- Adopting a “phase-it-in” approach
- Addressing continuity of care issues
- Developing consumer information to explain transition
- Going beyond stair-step kids
3) Addressing shortcomings of the ACA’s subsidy structure
   - Family glitch
   - “Double hit” on premiums

- Family glitch: Continued Medicaid and CHIP coverage for children is major source of protection

- “Double hit” issue
  - Some states have eliminated CHIP premiums
  - A few states are adopting broader initiatives to address affordability issues (RI, VT, MA)

- Most states looking to the federal government for leadership
The Future of Children’s Coverage: A Longer View

1) Build on CHIP
   - Requires stable, reliable funding
   - States will need to address integration with broader ACA, subsidy issues, enrollment challenges
   - Benefit issues may increase over time

2) Integrate CHIP children into other public programs
   - Medicaid
   - Build on the Basic Health Program, tapping the transformation waivers that become available in 2017

3) Integrate children into Marketplaces
   - Use CHIP funds to buy children Marketplace plans
   - States will need to address benefits, cost-sharing, and network adequacy concerns
Conclusion

- Long history of state pride in children’s coverage successes

- Challenge will be retaining key elements of success while adapting CHIP to the new ACA universe
  - Ability to focus on children’s unique needs
  - Recognition that children’s well-being is linked to their families
  - Simplicity for families

- States will require a partnership – stable funding, state flexibility