

Section 10

NEXT STEPS: MAKING THE CASE FOR SUCCESSFUL PARTNERSHIPS IN YOUR STATE



Learning the specific features of Medicaid and the Children’s Health Insurance Program (CHIP) in your state is a critical step for Title V programs. Medicaid and CHIP staff may need comparable education about Title V to develop effective partnerships. With a shared understanding, partners can identify the potential benefits of working together for each agency and the children they both serve. Common goals will likely include improved care, reduced cost growth, and better support for families.

Steps for developing and improving upon agency partnerships will depend on the relationships and systems in each state. Here are some suggestions:

Find Out More About the Specifics of Your State’s Medicaid Program

- What are the income eligibility criteria for children in Medicaid and CHIP in your state? Are there many eligible children who could be enrolled, but are not? To what extent are their parents eligible for coverage?
- Does your state have a TEFRA (Katie Beckett) option for children with severe disabilities? If so, how does the Medicaid program decide whether a child is eligible?
- Do Medicaid or CHIP fund care coordination for children with special health care needs (CSHCN)? If yes, is it through a medical home? In managed care? Through a home and community-based services waiver? Through targeted case management? Through a contract with Title V?
- How does the Medicaid agency track the screening, diagnosis, and treatment services required by Early Periodic Screening, Diagnosis, and Treatment (EPSDT)? When needs are identified, is there a mechanism to track referrals and follow-up care?
- What cooperative agreements already exist between Title V and Medicaid? Do they need amending and updating?
- What quality data are collected by the Medicaid program, managed care organizations, external quality review organizations, or primary care case management programs?
- Is your state planning to expand its managed care program? If yes, will CSHCN be included? If yes, what are the plans for the procurement? Will it be a competitive bid? Will there be requirements for care coordination and care planning? What are the requirements for the provider network? How will the

Suggestions for developing and improving upon agency partnerships will depend on the relationships and systems in each state:

- Find out more about the specifics of your state’s Medicaid program;
- Develop or expand key contacts;
- Work with agency contacts to identify targeted “do-able” improvement projects for CSHCN;

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transition from fee-for-service to managed care take place? Is there consumer participation? What are the financing arrangements? Will there be risk adjustment, risk sharing, or stop-loss provisions?

Develop or Expand Key Contacts

- Who in the state Medicaid program or within your state’s managed care organizations (MCOs) works on quality measurement and will be implementing the CHIPRA quality measures? What are the challenges in collecting and using the data?
- Who is in charge of eligibility and enrollment in Medicaid and CHIP? What are they doing to implement the Medicaid and CHIP benefit and eligibility provisions of health reform?
- Who are the “go-to” people for obtaining data from the Medicaid and CHIP systems?
- Who is providing the leadership in your state that will improve the quality of care for CSHCN?

Work with Program Contacts to Identify Targeted “Do-able” Improvement Projects for CSHCN

- Where are the opportunities for improvement – where do the concerns of all agencies and consumers align?
- Based on your knowledge of the experience of children and families in the state, can you identify a small change in state policy that will make a big difference in their ability to access care?

Create Effective Formal or Informal Cross-agency Committees or Work Groups

- Is there a health reform working group or committee addressing issues of relevance to CSHCN or for all children or all persons with chronic conditions or disabilities that could include attention to CSHCN?
- Is the Medicaid agency considering adopting the health home option under the ACA? If so, where are they in the planning process, and what populations are they interested in including in the health home initiative?

Engage Patients and Families

- What agency is the designated Family-to-Family Health Information Center in your state?
- How is this agency involved in working with primary care and other providers to improve care for CSHCN?
- Could the Title V model of employing parents of CSHCN work in Medicaid and CHIP programs?

- Create effective formal or informal cross-agency committees or work groups;
- Engage patients and families.

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A Last Word

Title V programs can assist Medicaid and CHIP agencies to fulfill their responsibilities, and at the same time ensure that children with special health care needs receive the services they need. NEED is the operative word here. There are four things to keep in mind when working with Medicaid and CHIP agencies:

Needs Keep the needs of CSHCN in mind when designing, evaluating, and improving managed care and other service delivery contracts.

Enrollment Assure that CSHCN are properly enrolled and receiving the appropriate services.

Efficiencies Develop the most efficient financing mechanisms for services.

Data Help analyze and respond to outcome data in order to improve the quality of care.

This document is part of *Public Insurance Programs and Children with Special Health Care Needs: A Tutorial on the Basics of Medicaid and the Children's Health Insurance Program (CHIP)*, available in its entirety at <http://hdwg.org/catalyst/medicaid-tutorial>

Is this tutorial helpful to you? Please take our survey at <https://www.surveymonkey.com/s/MedicaidCHIPTutorialSurvey>

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