

# THE REIMBURSEMENT LANDSCAPE

# Medicaid 101

- *Medicaid is the nation's main public health insurance program for low-income people of **all ages**.*
- *Medicaid is financed through a federal-state partnership, and **each state designs and operates its own program** within broad federal guidelines.*
- *States have traditionally provided benefits using a fee-for-service system, but Medicaid benefits have been **increasingly offered through a managed care delivery system**.*

# Existing Medicaid Authority

- Medicaid Managed Care contracts or incentives
- Reimbursement for direct services
- Medicaid Administrative Claiming
- Other programs
  - ▣ EPSDT
  - ▣ Health homes

# Mechanisms for Change

- State Plan Amendments
- Waivers



# SPAs and Waivers

## SPAs AND WAIVERS AT A GLANCE<sup>4</sup>

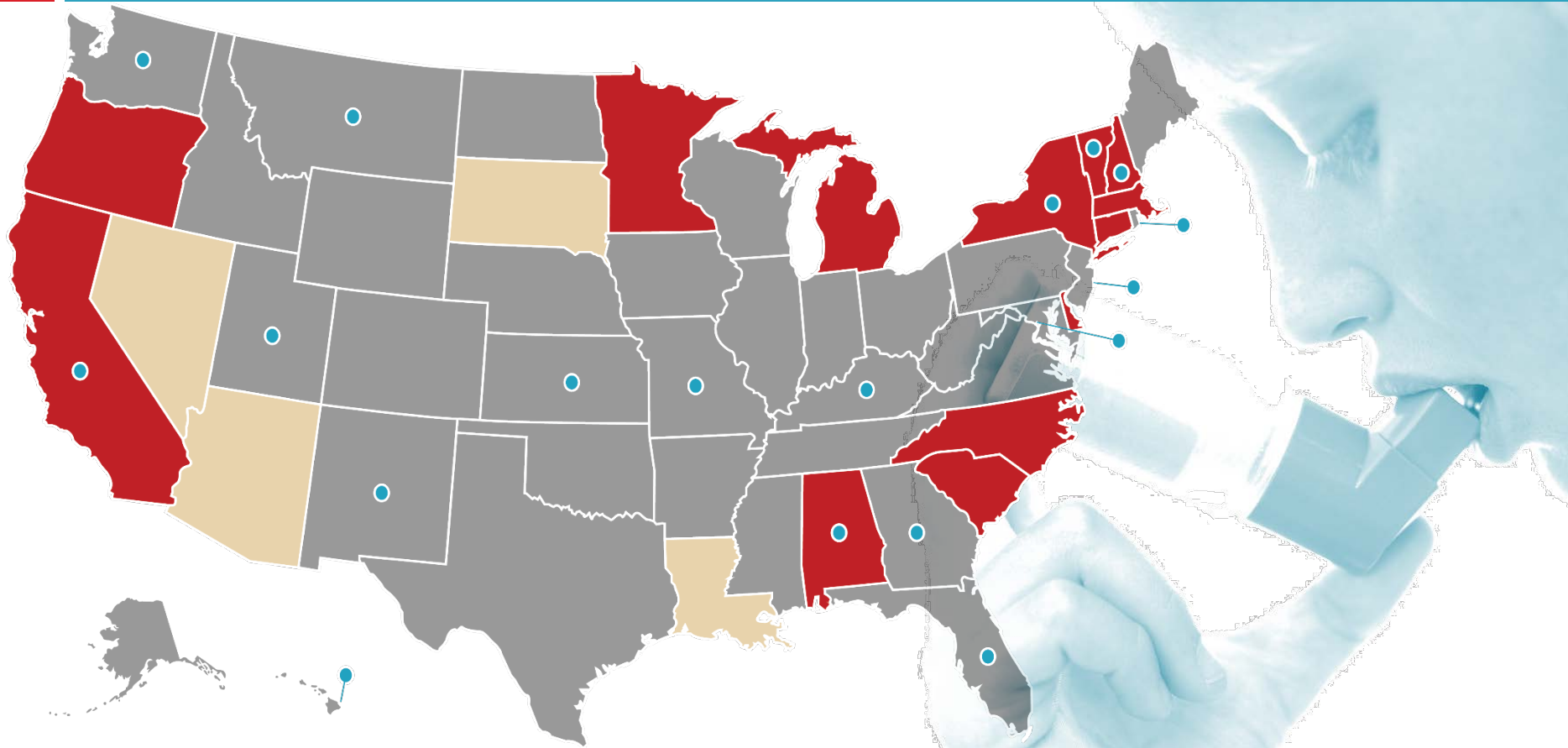
	State Plan Amendment	Waivers
<b>When to use it</b>	To propose a change to a state's Medicaid plan that falls within federal rules and requirements.	To submit a formal request to have specific federal rules or requirements "waived" to test a new service, delivery system change or policy that falls outside of federal rules or regulations.
<b>Requirements</b>	Must comply with federal rules and requirements and typically must meet criteria for statewideness, comparability and choice of providers. No budget or cost requirements.	Must meet cost requirements specific to the type of waiver (e.g., 1115 waivers must be budget neutral). No requirements for statewideness, comparability or choice of providers.
<b>Approval process</b>	CMS will review and respond within 90 days. If CMS requests additional information during the 90 day window, the "clock" is stopped until the information is received.	Depends on the type of waiver, but can involve a lot of discussion and negotiation between CMS and the state. 1115 waiver approval processes must be transparent and provide opportunity for public comment.
<b>Duration</b>	If approved, the change is permanent (unless modified by a subsequent SPA).	For 1115 waivers, the approval is typically for an initial five year period with an option to renew for an additional three years.

# Medicaid Reimbursement Policies: 2014 Survey

- Online surveys (asthma, lead)
- Sent to program contacts and Medicaid Directors in Spring 2014
- Responses from 46 states for asthma

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## Current State of Play: ASTHMA



■ Medicaid reimbursement in place (may be on limited scale)

● Exploring Medicaid reimbursement (or expansion of services)

■ None or unsure

■ No response to survey

# Reimbursement by the numbers:

## Home-based asthma services

13

states have some Medicaid reimbursement for home-based asthma services in place (may be on very limited scale)

3

additional states expect to have some Medicaid reimbursement for home-based asthma services in place within a year

19

states are exploring Medicaid reimbursement for home-based asthma services (or an expansion of existing services)



# Who is eligible for these services?

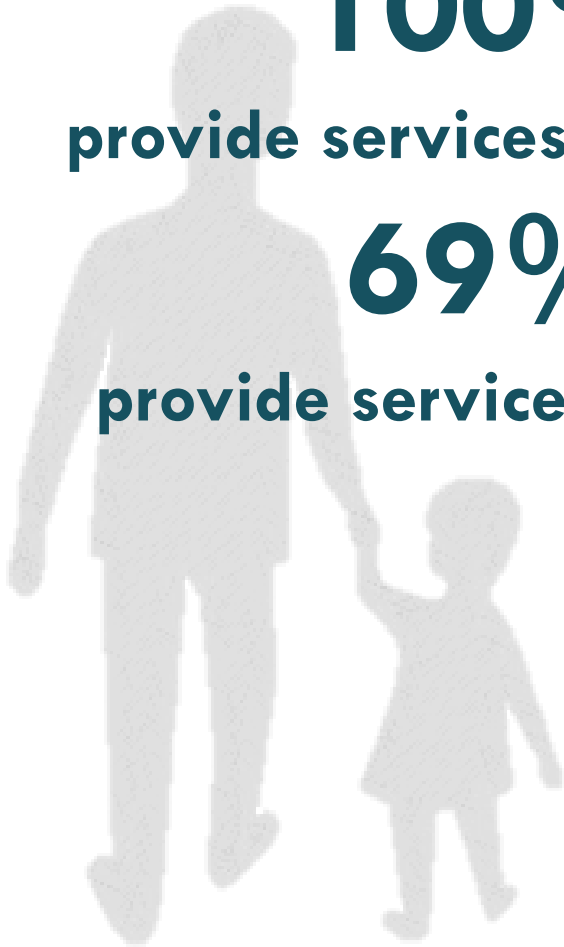
Among states with services in place (select all that apply)

**100%**

**provide services to children**

**69%**

**provide services to adults**



## OTHER REQUIREMENTS

- Recent hospitalization or ED visit (62%)
- Other healthcare utilization (38%)
- ACT score (15%)
- Location of patient's residence (15%)
- Allergen testing, screening questions about home environment, referral from school/daycare (8%)

# What services are reimbursable?

Among states with services in place (select all that apply)

**Self-management education, 77%**

**Assessment of primary residence, 69%**

**In-home education about triggers, 54%**

**Low-cost supplies, 38%**

**Assessment of a second residence, daycare or school, 23%**

**Structural remediation, 15%**

# What type of staff provide services?

Among states with services in place (select all that apply)

**Nurses, 77%**

**Certified Asthma Educators, 54%**

**Respiratory Therapists, 38%**

**CHWs, 31%**

**Housing Professional, 15%**

**Sanitarian/Environmental Health Professional, 15%**

**Social Workers, 15%**



# Who is billing for these services?

Among states with services in place (select all that apply)

**Medicaid Managed Care Orgs, 54%**

**Visiting Nurse/Home Health Agencies, 46%**

**Hospitals/Clinics, 38%**

**Local Health Dept, 31%**

**Other Healthcare Providers, 15%**

**State Health Dept, 8%**

**Community-Based Orgs, 8%**

**Other, 8%**



# How many visits?

# How much reimbursement?

*Variable data quality. Interpret with caution!*

## NUMBER OF VISITS:

**1-10  
visits**

Most states reported a range of possible number of visits. The minimum number of visits reported was 1 and the maximum number was 10 visits.

## REIMBURSEMENT AMOUNT:

**\$80.98-\$200  
per visit**

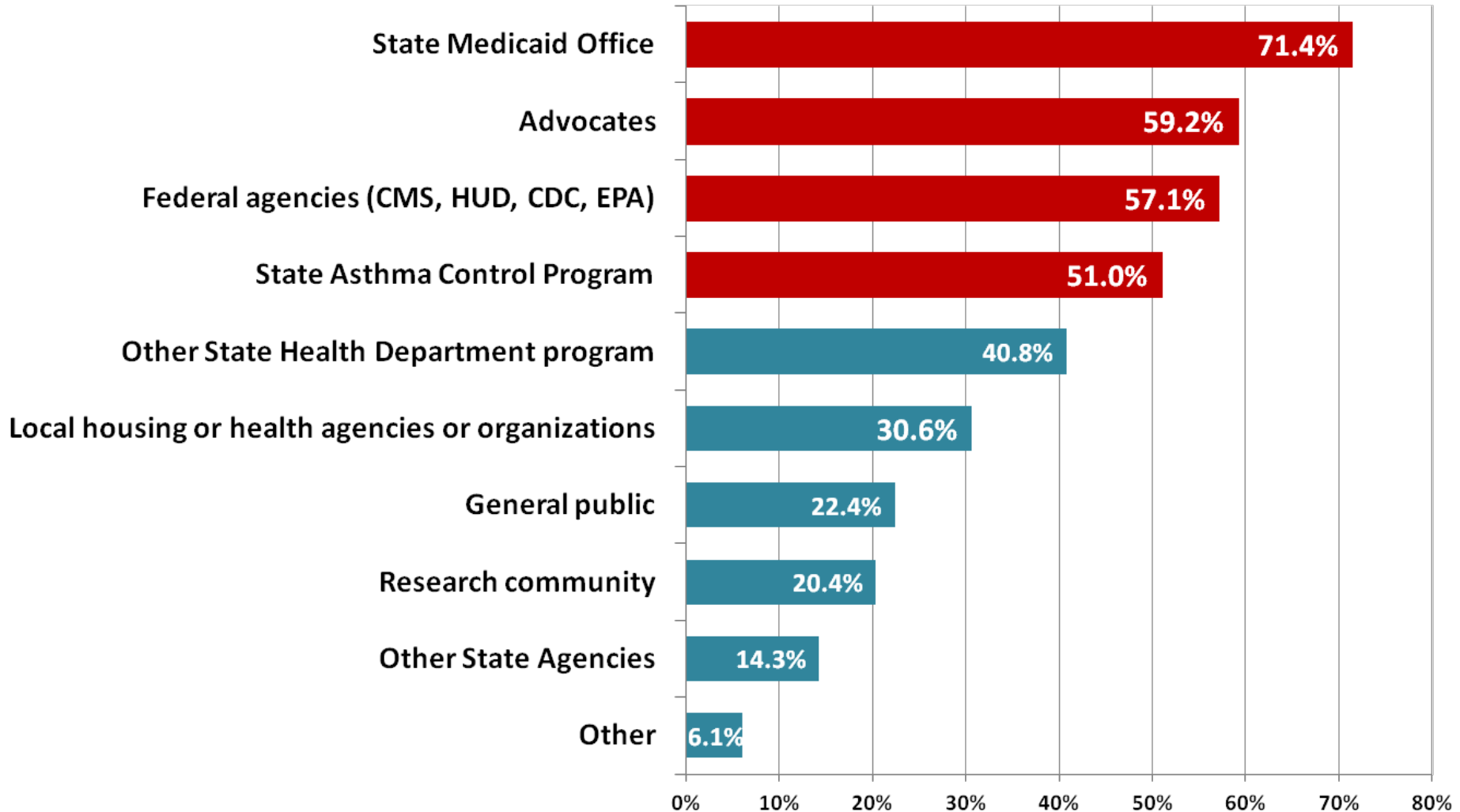
Most states reported a range of per visit reimbursement levels. Combined with the range of possible number of visits, this translates roughly into a total reimbursement range of \$162-\$1,000 per patient.

# Most influential drivers (average ratings)

(4=Very important, 3=Important, 2=Somewhat Important, 1=Not important)

- ❑ Credible information about potential costs and savings (3.7)
- ❑ Credible information about potential improvements in health outcomes (3.6)
- ❑ Political will/leadership (3.5)
- ❑ Federal funding for State Asthma Control program (3.4)
- ❑ Relationships/partnerships to get issue on table (3.4)
- ❑ Promotion of service by State Asthma Control Program (3.3)
- ❑ Established workforce infrastructure to deliver services (3.3)
- ❑ Information/evidence from local/regional pilots (3.3)
- ❑ Credentialing infrastructure for eligible providers (3.3)
- ❑ Advocacy/interest from healthcare community (3.2)
- ❑ Change in EHB rule (3.2)
- ❑ Healthcare reform (e.g., ACA) (3.1)
- ❑ Individual champions within state agencies (3.1)
- ❑ Advocacy/interest from other local or external partners/stakeholders (3.0)
- ❑ NAEPP clinical guidelines (3.0)
- ❑ CDC Community Guide (3.0)
- ❑ ...

# Most influential groups



# Other healthcare financing



- **7 states** reported at least one private/commercial payer in their state; an additional 7 are aware of pending efforts
- **6** Hospital Community Benefits
- **2** ACOs
- **1** Social Impact Bond
- **12** State-funded programs



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**National Center for  
Healthy Housing**