

## Strengthening Medicaid in National Health Reform

Medicaid has long provided a foundation of health care coverage for people with low incomes and special health care needs. A reformed national health system should strengthen and expand Medicaid to provide comprehensive coverage and high-quality, culturally-appropriate care to people with low incomes, children, and people with special health needs. Medicaid is an important foundation for expanded health coverage and health reform legislation should reflect these principles:

- **Expand Medicaid’s eligibility floor to at least 150 percent FPL and ensure that currently enrolled children are not transferred into the Exchange unless the coverage and cost-sharing protections they receive are as strong as those in Medicaid.** Increasing eligibility will help more families get the quality health care they need.
- **Encourage states to expand eligibility and benefits beyond federal minimums as necessary to meet the needs of their residents by providing federal matching funds.** This flexibility is needed, given wide variation in cost of living and other local factors.
- **Protect requirements for comprehensive services for all patients, especially children, through Medicaid.** Low-income children are at greater risk for poor health outcomes, and Medicaid provides comprehensive services through the Early Periodic Screening Diagnosis and Treatment (EPSDT) Program. These services are best delivered through a single source, not by wrapping supplemental services around a narrow benefit package, which could weaken the coordination of care for families. However, wrap-around coverage is important for middle- and higher-income children and adults with special health care needs, who often have private coverage that does not cover services such as durable medical equipment.
- **Set strong and transparent standards for health plans that serve the special populations covered by Medicaid.** Federal and state policymakers should hold plans accountable by strengthening standards for quality, network adequacy, and cultural and linguistic competency.
- **Maintain strong cost-sharing protections.** Increased cost-sharing—in the form of premiums, co-payments and deductibles—makes coverage unaffordable and leads families to forgo necessary treatments. Medicaid should continue cost-sharing protections that shield families from financial harm.
- **Encourage greater provider participation in the Medicaid program by increasing payments to providers.** Some states have difficulty recruiting necessary primary care providers and specialists to Medicaid, especially for underserved areas and minority and

immigrant populations. A minimum standard for Medicaid provider rates could help remedy this problem and improve access for patients.

- **Develop quality measures in Medicaid that ensure high-quality, cost-effective services and coordinated care across health settings.** Our ultimate goal is to improve health outcomes by expanding coverage and ensuring high-quality care. As a starting point, apply Medicare quality standards to Medicaid where appropriate and extend the CHIPRA quality provisions to Medicaid as proposed by the Senate Finance Committee. Medicaid should transition to a stronger medical home model that coordinates care across settings for all services for every Medicaid enrollee. Additional quality measures must focus on children, who have markedly different care needs than adults.
- **Create simple, streamlined ways for people to enroll in and renew Medicaid coverage.** Improve enrollment and retention for all enrollees by eliminating face-to-face interviews and asset tests, requiring 12-month continuous eligibility, and creating state performance measures for enrollment and retention. Increase ease of enrollment through outreach and standardized, family-friendly application forms.
- **Automatically increase federal Medicaid matching funds in periods of economic downturn.** Because Medicaid is a countercyclical program, the federal government needs to help states respond to increased Medicaid costs when unemployment rises and state revenues decline.

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**Louisiana Consumer Healthcare Coalition** is a coalition of organizations allied in our commitment to realizing a consumer-centered health care system that provides comprehensive, affordable, quality care for everyone, especially the most vulnerable. We work to achieve this through multi-disciplinary, collaborative efforts in public policy, advocacy, education and service to consumers in Louisiana. *For more information, please contact Moriba A. Karamoko at (337) 781-8745 or [moribakaramoko@hotmail.com](mailto:moribakaramoko@hotmail.com)*