The Pediatric Challenge

Family-to-Family Health Information Center's 2012 Partners in Care Summit Prattville, Alabama April 16-17, 2012

Faculty

Suzanne Respess Vice President Government Relations Children's of Alabama Birmingham, Alabama

The Federal Challenges

- PPACA
- Retain the dependent coverage benefits
- Retain the Medicaid reimbursement provisions for pediatric services
- Budget Control Act
- Retain protection for Medicaid from sequestration

Challenges

- FY 2013 House Budget and Appropriations
- Ensure Medicaid block grants are equitable for states who have not expanded their programs

Challenges

- Ensure child health, and particularly children with special health care needs, are protected and will have access to age appropriate/specialty providers and services
- Ensure physician training and medical research is adequately funded

Regulatory Challenges

- · Volume of rules being issued
 - -Are they contradictory creating lack of clarity to implement?
 - -Do they reduce access?
 - Do they eliminate inefficiency?
 - Do they recognize new costs or replace existing costs for services/patient care?

Questions to Pursue

- Is the benefit package enough for special needs and chronic disease management and treatment?
 - -Does it create underinsured scenario?
 - -More out of pocket expenses?
- Experimental drugs or therapies covered?

Questions to Pursue

- More managed cost than care?
- Limited provider networks?
- Does it allow for provider collaboration and a disease management continuum of care?

Alabama's Challenges

- Health exchange work non-existent
- Any ramp-up of health exchange will be in a very short time frame
 - Must be aggressive for pediatric coverages
 - Utilize AllKids as floor benefit package/benchmark

Alabama's Challenges

- State legislature involvement and viewpoint
- Parents and families need to communicate with local legislators and business communities
- Managed care for SSI/special needs populations

Medicaid Challenges

- · Changing leadership
- · Financial stability and budgeting
- Legislature
- Provider relationships
- CMS relationship

Legislature and Medicaid

- · View as a black hole
- A component of government paycheck and impeding "urgency" for some to find employments

Legislature and Medicaid

- Trust managed care companies to save the state between \$100-300 million annually
 - -\$1 billion with federal money
 - By reducing expenditures of SSI and special needs populations

Conflicting Pressures

- Aging senior population
 - More dual eligibles
- Shrinking tax base
- Demand/pressure on infrastructure
- Aging facilities prevent adequate investment in technology
- Economics

Conflicting Pressures

- Employers no longer provide coverage
- · Employees cannot afford

Communicate to Legislators

 You are a working, productive, tax generating parent of a special needs child

Communicate to Legislators

 The services provided by Medicaid providers, Children's Rehabilitation Service, Vocational Rehabilitation, Department of Education, Mental Health or any other state entity, have contributed to your child's well-being and productivity and are available few other places

Communicate

- To employers and business community
- You are employed and one of their employees
- Medicaid helps keep costs of employer coverage down
- Part of state's health insurance fabric

Challenges

- Ask businesses if any of their low wage earning employees (pregnant) or employee's children are Medicaid recipients
 - Most of them have not done the research
- Ask them to communicate with their pro-business State House or Senate member