MEDICAID EXPANSION & THE HCH COMMUNITY:
Sharing Lessons Learned with Those in Newly Expanding States

August 15, 2018
TODAY’S DISCUSSION

Moderator: Barbara DiPietro, Senior Director of Policy, NHCHC

SEASONED EXPANSION STATES

• **MD**: Kevin Lindamood, President & CEO, HCH/Baltimore

• **NM**: Trish Grand, Director of Finance, HCH/Albuquerque

• **OR**: Rachel Solotaroff, MD, President & CEO, Central City Concern, Portland

Eowyn Rieke, MD, Associate Medical Director of Primary Care, Central City Concern, Portland

EMERGING EXPANSION STATES

• **ME**: Martin Sabol, Director of Health Services, Nasson Health Care, Springvale

  Ann Tucker, CEO, Greater Portland Health, Portland

  Lori Dwyer, President & CEO, Penobscot Community Health Center, Bangor

• **VA**: Maureen Neal, COO, Advancement, Daily Planet, Richmond
NOTES: Current status for each state is based on KFF tracking and analysis of state activity. *AR, AZ, IA, IN, MI, MT, and NH have approved Section 1115 expansion waivers. ^On June 29, 2018, the DC federal district court invalidated the Kentucky HEALTH expansion waiver approval and sent it back to HHS to reconsider the waiver program. ‡UT passed a law directing the state to seek CMS approval to partially expand Medicaid to 100% FPL using the ACA enhanced match. ID and UT have measures on their November ballots to fully expand Medicaid to 138% FPL, and expansion supporters in NE are awaiting final confirmation that the signatures they submitted for a similar initiative meet the state’s ballot initiative requirements. ◊Expansion is adopted but not yet implemented in VA and ME. (See the link below for more detailed state-specific notes.)

MOSTLY MEDICAID

• 90% of HCH clients are <100% FPL; 64% insured (2016)

Health Insurance Coverage at HCH Programs, 2016

Health Insurance Sources at HCH Programs, 2016

- Uninsured: 70%
- Medicaid/CHIP: 62%
- Medicare + Medicaid ("duals"): 19%
- Medicare/Other Public: 5%
- Private: 5%

Expansion States
Non-Expansion States

Health Insurance Coverage at HCH Programs, 2016
BIGGEST CHANGES

• Increasing staff, billing activities & budget
• Expanding non-billable services
• Working with managed care entities
• Losing state funding (NM)
• Increasing payer interest in value-based/bundled payments
• Growing interest in FQHCs
• Recruiting/retaining staff
• Meeting pent-up demand for care
• Connecting patients to specialty care & HCV treatment (among other tx)
• Educating patients about insurance
• Increasing provider documentation, intake, consents, compliance, etc.
EXPECTED, BUT NOT YET REALIZED

• Grants would decrease as billing increased
• Demand for care would eventually decrease
• Enrollments would decrease
• Competition for our patients
• Co-pays would be required and/or pose a barrier to care
• Value-based and bundled payments
EMERGING STATE QUESTIONS

• How have state Medicaid programs responded to the increase? (e.g., turnaround time, etc.)

• How can we more reliably predict changes in revenue and service utilization?

• What outreach & enrollment strategies did you use?

• Do we anticipate HRSA will reduce health center grants?

• How do I talk with my private funders about ongoing needs?

• How did you determine what services/staff to add/increase?

• Did Medicaid expansion create new staff recruitment/retention issues?
ADVICE

• Don’t underestimate the potential of Medicaid expansion to transform your business model and allow your organization to serve people more effectively.

• Prepare your billing systems (rebuild them if you need to), invest in data and staff capacity, and recruit local partners.

• Discuss with MCOs how to empanel clients to an HCH program (typically a closed system).

• Prepare for additional referral coordination, case management, care coordination, billing problems, and problem-solving with MCOs.

• Be selective about new programs that payers may want to start—especially once funding starts to flow. Stick to your areas of strength and deepen your expertise.
NATIONAL HCH COUNCIL
MEDICAID EXPANSION RESOURCES

- HCH Staff FAQs (tailored for expansion & non-expansion state workers)
- HCH Consumer FAQ
- Medicaid Expansion Event Guide
- O&E Quick Guide: Promising Strategies for Engaging the Homeless Population
- Medicaid Enrollment: Your Guide to Engaging People Experiencing Homelessness (with U.S. ICH)
- Client Engagement Tip Sheet for frontline workers
- Numerous policy briefs and webinars also available