



Medicaid 101

The basics of publicly funded healthcare.



Medicare Vs Medicaid

- Medicare:
 - Over 65, or Disabled
 - Federally Managed program
- Medicaid
 - Resource & Need Based
 - State – Federal Partnership



Social Security Act

- 1965 – Amended to include the authority for both Medicare and Medicaid.
- Provides authority for states to administer their Medicaid program within Federal Guidelines.
 - CFR – Code of Federal Regulations
 - MCA – Montana Code Annotated
 - ARM – Administrative Rules of Montana
- Medicaid programs vary considerably across the country.



What is Medicaid???

- Different from Medicare
- Legal Authority based in Social Security Act
- Federal/State Program
- Eligibility
- State Plan Services
 - Mandatory
 - Optional



Federal – State Partnership

- Federal Government
 - Center for Medicare and Medicaid Services
 - Provides guidelines
 - CFRs
 - 73% Federal Financial Participation
- State Government
 - DPHHS
 - MMIS
 - Manages Medicaid programs based on ARMs and Legislative Authority
 - 27% State Financial Participation

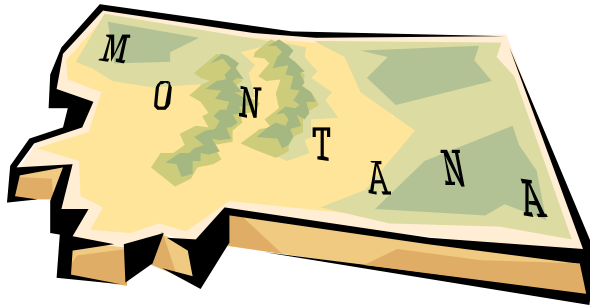
For every \$100 of Medicaid claims, \$73 is from the federal gov't.



Medicaid & Money

- As a partnership program, general fund dollars must be available to receive the federal match.
 - When general fund is tight, the Medicaid program must adjust programs to meet budgetary requirements.
 - General fund to operate the program is obtained from the Mt. State Legislature.

Medicaid Services



- States participating in Medicaid are required to provide specific services. “Mandatory”
- States have the option to provide others. “Optional”
- A state plan service is available to all Medicaid individuals who need the service and meet any medical requirements. “Entitlement Program”
- A waiver program has received permission from CMS to do something different, thereby waiving CMS requirements.
 - Demonstration
 - Home & Community Based



Mandatory State Plan Services

- Inpatient Hospital
- Outpatient Hospital
- Physician
- Nurse Midwife
- Nurse Practitioner
- Laboratory & X-ray
- Nursing Facility Care – for 21 yrs and older
- Early & Periodic Screening, Diagnosis and Treatment (EPSDT) *
 - Includes: outpatient chemical dependency treatment, chiropractic, dietitian, residential treatment facilities, private duty nursing, respiratory therapy, school based services, therapeutic group and foster care.
- Family Planning
- Home Health, including durable medical equipment & supplies
- Rural Health clinics (including FQHCs)
- Medical and Surgical Services of a Dentist
- Transportation

* we'll talk more about this later



Optional State Plan Services

- Ambulatory Surgical Centers
- Dental/Denturist Services
- Audiology/Hearing Aids
- Eyeglasses/Optometric
- Community Mental Health
- Home Dialysis Attendant
- Psychology
- Licensed Professional Counselors
- Freestanding Dialysis Clinic
- Diagnostic Clinic
- Targeted Case Management
- Mid-Level Practitioners
- Prescribed Drugs
- ICF/MR
- Speech, Physical & Occupational Therapies
- Personal Assistance
- Podiatry
- Social Work
- Nurse Specialist
- Hospice
- Home Infusion Therapy



Some Fundamentals of Medicaid

- Freedom of Choice
- Service Definitions
- Comparability
- State-wideness
- Payment in Full
- Recipient Confidentiality
- Right to Fair Hearing on Adverse Actions
- “Equally effective less costly service”
- Medically Necessary



"EPSDT"

- Early & Periodic Screening, Diagnosis, and Treatment
 - Partnership between providers & Medicaid, base on the principle that early detection & treatment of medical problems is best.
 - Designed to encourage providers to screen for specific pediatric problems, order diagnostic services and treat problems found or refer elsewhere for treatment.
 - State provides extended services to those under the age of 21.
 - outpatient chemical dependency treatment, chiropractic, dietitian, residential treatment facilities, private duty nursing, respiratory therapy, school based services, therapeutic group and foster care.



PASSPORT

- Medicaid managed care program where the client selects a primary care provider who manages the client's health care needs.
 - Manage the delivery of health care to Medicaid clients in order to improve or maintain access and quality.
 - Utilization control
 - Most services to PASSPORT clients must be approved or provided by the PASSPORT provider.



Prior Authorization

- The approval process required BEFORE certain services or supplies are paid by Medicaid.
 - Obtained before the service or supply is provided.
 - Process for Prior Authorization is outlined in the provider manuals. Ask the provider.
 - Examples: Transportation services, some durable medical equipment, private duty nursing, etc.



Medicaid Eligibility

A topic for next time..



Bare Basics

- Categorical – An individual or couple who meet all non financial eligibility criterion and whose incomes does not exceed the categorically needy limits.
 - Blind, Aged, FAIM, SSA Disabled
- Medically Needy – An individual or couple otherwise eligible for medical assistance but whose incomes exceeds the limits allowed for categorically eligible.
 - Incurment – The amount of medical expense for which the client is liable before Medicaid will begin paying any bills.
 - Cash Option
- Contact your local office of public assistance.



Questions?

