Work Group Update: Insurance Access

The Insurance Access work group was assigned three objectives. They are listed below and a brief progress report is provided.

- **Improve communication, collaboration, and education to all CSHCS stakeholders on the CSHCS program and the Insurance Premium Payment benefit.**

The group developed plans to address this objective through enhanced education and marketing of CSHCS. It was suggested that a more systematic approach to information sharing be developed so that information goes out on a regular basis to identified entry points within Children's Hospitals, Pediatric Regional Centers, CMS Clinics, client organizations, i.e., United Cerebral Palsy, Hemophilia Foundation, etc., reaching social workers, billing departments, case managers and others. Suggestions also included adding an eye-catching sticker to existing brochures such as, "If you lose your insurance and you have CSHCS …" Also the URL for the CSHCS website should be printed on all materials. Another outreach opportunity would be to provide information to closing businesses, unemployment offices, and the MSA Third Party Liability program. The group also recommended that information be provided to the MSA Beneficiary Help Line, departmental news briefs, and the Family Center phone line.

It should be noted that many of the recommendations for this objective are being addressed by the CSHCS Publicity Committee including printing posters, making display boards available to local CSHCS and updating the brochure.

- **Pursue the Medicaid buy-in option available for children with special health care needs through the Family Opportunity Act.**

- **Expand the Insurance Premium Payment benefit and increase enrollment**

The work group decided to address these objectives together.

The group thought it would be helpful to look at information from other states. They asked for a Michigan expert on TMA to attend a meeting. They are looking at Federal Regulations from other states, particularly Oregon. They asked for additional information on the Family Opportunity Act and invited MDCH/FOA staff to meet with them. They thought it would be helpful to define and identify broadly children within the state with special needs, including those served by the Department of Education. There was a suggestion to contact Jane Regan and Lural Baltimore from the Department of Education for information.

Lural Baltimore and Jane Regan provided data to help the workgroup understand their client population. Information on Transitional Medicaid and Transitional Medicaid Plus was presented to the workgroup by the Specialist responsible for the programs. The Analyst responsible for the Family Opportunity Act (FOA) presented information to the workgroup. The workgroup concluded that CSHCS should pursue a Medicaid Buy-In option for children with special health care needs through the Family Opportunity Act. However, Michigan is still working its version of the FOA and the workgroup will be kept abreast of the plans for Michigan.