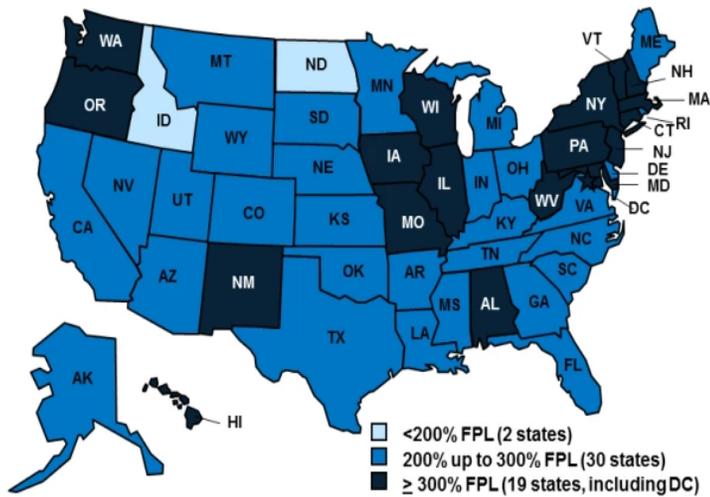


LD 1539, An Act To Provide Maine Children Access To Affordable Health Care, amended version
Information Provided by Rep. Carney

Maine has the highest rate of uninsured children in New England and is slightly above the national average. The Children’s Health Insurance Program (CHIP) provides a cost-effective way to deliver high-quality health care to Maine’s uninsured children and is a framework we can build upon to give coverage to young people who will benefit from consistent primary care.

Nationally, our rate of uninsured children increased in 2017 for the first time since data has been collected. “Coverage is important for children because it improves their access to needed services such as well child checkups and medications and provides better access to a usual source of care. Public coverage is also associated with improved educational outcomes and long-term health and economic gains.”¹ The re-authorization of CHIP in 2018 creates an opportunity to make up lost ground by utilizing the full federal match and taking other steps to improve coverage for Maine’s children.²

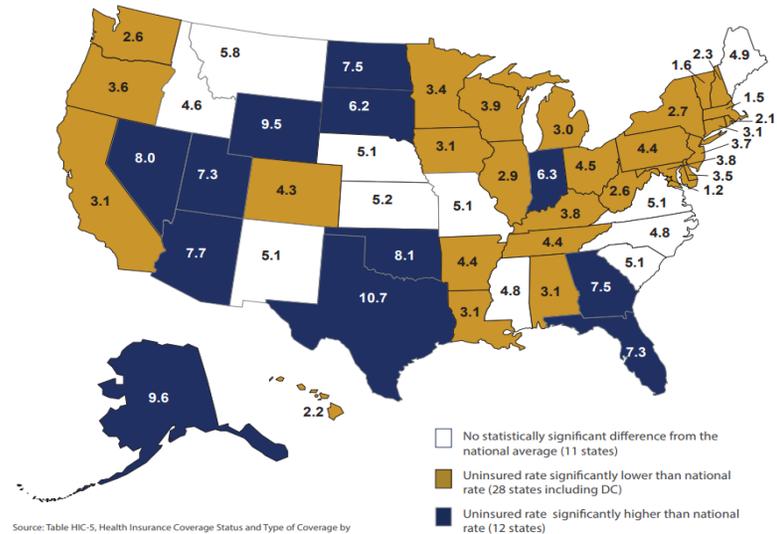
Figure 1 (below): Income Eligibility Levels for Children in Medicaid/CHIP, Jan. 2019³



NOTE: Eligibility levels are based on 2019 federal poverty levels (FPLs) for a family of three. In 2019, the FPL was \$21,330 for a family of three. Thresholds include the standard five percentage point of the FPL disregard.
 SOURCE: Based on results from a national survey conducted by the Kaiser Family Foundation and the Georgetown University Center for Children and Families, 2019.



Figure 2 (below): 12 States Had Significantly Higher Rates of Uninsured Children than the National Rate⁴



Source: Table HHC-S, Health Insurance Coverage Status and Type of Coverage by State - Children Under 19: 2008 to 2017, Health Insurance Historical Tables, U.S. Census Bureau American Community Survey (ACS).

¹ <https://ccf.georgetown.edu/2018/11/21/nations-progress-on-childrens-health-coverage-reverses-course/>

² <https://www.healthaffairs.org/doi/10.1377/hblog20180130.116879/full/>

³ <https://www.kff.org/medicaid/report/medicaid-and-chip-eligibility-enrollment-and-cost-sharing-policies-as-of-january-2019-findings-from-a-50-state-survey/>

⁴ <https://ccf.georgetown.edu/2018/11/21/nations-progress-on-childrens-health-coverage-reverses-course/>

Overview of LD 1539, amended version

The amended version of this bill proposes an efficient, cost-effective way to provide Maine children with access to affordable health care, by amending our Cub Care statute to include children who will benefit significantly from CHIP coverage.

What the Bill Does	Significance
<ul style="list-style-type: none">• CHIP eligibility changes from 200% to 300% FPL.	<ul style="list-style-type: none">➤ Leverages federal match up to 300% FPL to improve Maine’s rate of insured children.⁵
<ul style="list-style-type: none">• Parents no longer pay premiums for CHIP.	<ul style="list-style-type: none">➤ Removes barriers that are offset by decreased enrollment, cost of ER care, and administrative expenses.⁶
<ul style="list-style-type: none">• Children are not subject to waiting period.	<ul style="list-style-type: none">➤ Maintains continuity of coverage and reduces the ‘churn’ that disrupts care.⁷
<ul style="list-style-type: none">• DHHS will initiate outreach services, or enter into a contract for outreach services, by January 1, 2020.	<ul style="list-style-type: none">➤ Funds outreach to ensure 100% children eligible for Medicaid and CHIP get health care.⁸

⁵ <https://www.kff.org/medicaid/fact-sheet/summary-of-the-2018-chip-funding-extension/>

⁶ <https://www.kff.org/medicaid/issue-brief/the-effects-of-premiums-and-cost-sharing-on-low-income-populations-updated-review-of-research-findings/>

⁷ <http://files.kff.org/attachment/Report-Medicaid-and-CHIP-Eligibility-Enrollment-Renewal-and-Cost-Sharing-Policies-as-of-January-2018>

⁸ <https://ccf.georgetown.edu/2018/11/21/nations-progress-on-childrens-health-coverage-reverses-course/>

What is at stake?

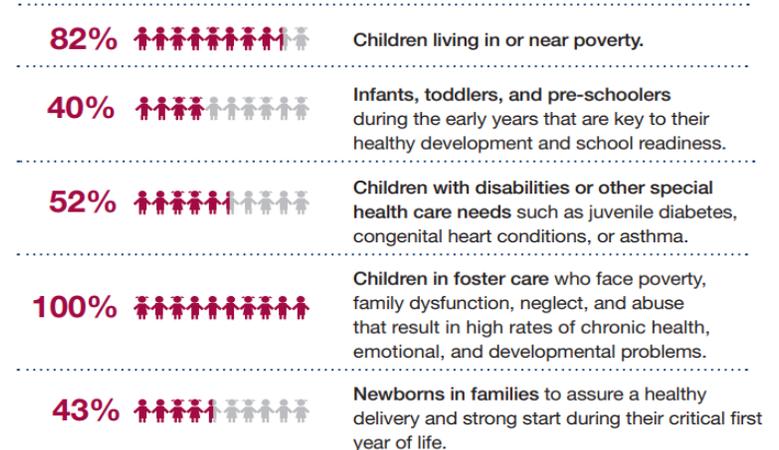
- CHIP helps children reach their full potential.
 - CHIP/Medicaid provides a comprehensive child-focused benefit: the Early and Periodic Screening, Diagnostic, and Treatment benefit (EPSDT). It is designed to ensure that children receive recommended preventive screenings, follow-up diagnostic assessments, and all medically necessary services that health care providers deem essential to prevent, treat or improve the diagnosed condition.⁹
 - CHIP/Medicaid reduces infant and childhood mortality, because it leads to greater utilization of preventive and acute health services.¹¹
- Research has also linked CHIP/Medicaid coverage in childhood to long-term benefits, including:^{12, 13}
 - Improvements in educational outcomes at the elementary, high school and college levels.
 - Decreased high school dropout and increased college attendance and completion rates.
 - Healthier adolescents, with lower rates of eating disorders, drinking, and mortality, and adults with lower rates of hospitalizations and ER visits and a 26% decline in the incidence of high blood pressure
 - Decreased probability of debt and bankruptcy for families, shielding children from poverty and reducing their exposure to adverse childhood experiences that can influence their health in later life.
 - Economic benefits in adulthood, including increased employment and higher tax payments.

Figure 3 (below): Children served by CHIP¹⁰



Medicaid and MaineCare (CHIP) serve Maine's most vulnerable children.

A large share of at-risk children rely on public coverage, as reflected by the percentage of Maine children in each group below that depend on Medicaid and MaineCare (CHIP) for health care they need to thrive:



⁹ <https://ccf.georgetown.edu/wp-content/uploads/2017/03/Medicaid-provides-needed-access-to-care.pdf>

¹⁰ https://www.aap.org/en-us/Documents/ccs_factsheet_maine.pdf

¹¹ <https://ccf.georgetown.edu/wp-content/uploads/2017/03/Medicaid-provides-needed-access-to-care.pdf>

¹² <https://ccf.georgetown.edu/wp-content/uploads/2017/03/MedicaidSmartInvestment.pdf>

¹³ <https://ccf.georgetown.edu/2015/07/27/medicaid-50-look-long-term-benefits-childhood-medicare/>