## Get to Know Your Medicaid Department: Questions to Ask

### **Background**

Medicaid is the cornerstone of health insurance coverage for children, families, seniors and people with disabilities. Every state has a Medicaid program but it can go by many names. For example, in California, the Medicaid program is called Medi-Cal and in Maine, it's called MaineCare.

Medicaid and CHIP play a critical role in providing health insurance to low-income families, for whom employer-sponsored or individual coverage may not be offered or be prohibitively expensive. Medicaid and CHIP provide coverage for most young children (from birth through the age of 5) with family incomes near the federal poverty level. And more than 10 million parents and other adults below 138% of the federal poverty line recently gained coverage for the first time through the Medicaid expansion. While health insurance alone does not end disparities in health status or access to care, the Medicaid expansion has helped to reduce rates of uninsurance among communities of color.

Each state Medicaid program is unique. States make the decisions over who is eligible for coverage and what services are included. But all states provide affordable, comprehensive coverage that includes services that survivors need in the short-term and over the lifespan.

The state's Medicaid Department, in partnership with the federal government, makes specific decisions about their Medicaid programs and what they cover. They make eligibility and coverage determinations for who can enroll in Medicaid and what services they can get. And the Medicaid Department also will play a role in determining what types of providers can be reimbursed for Medicaid.

The state's Medicaid Department can be an invaluable resource for DV/IPV advocates for understanding how survivors can get health insurance and supporting survivors to get the health care services they need. DV/IPV advocates may also want to work with their Medicaid Department to explore possible reimbursement to advocates for the services they provide.

DV advocates are encouraged to build relationships with their state Medicaid Department and to be a resource on and advocate for what survivors need to heal and thrive.

#### Who should I talk to?

The first question to ask is "who"? Medicaid departments can be huge and complex. Medicaid Directors are generally political appointees and work for the Governor. Speaking with the Medicaid Director and engaging their support is critical for moving policy change at the state level. For understanding the existing program and learning more about what the state already covers, there may be many different people with whom you can (and should!) talk to about coverage for survivors.

A key first task is identifying who the right people are and introducing yourself as a trusted resource in the community. You may want to ask to talk with the individual who works on eligibility for adults and parents to better understand who is eligible for Medicaid. Or you can talk to someone who works on coverage of specific benefits—such as preventive services or mental health—to better understand what services a survivor can access under Medicaid. While it may take some navigating, its worth the time to find the person who can answer your specific question.

### What does Medicaid cover in my state that is good for survivors?

Medicaid's benefit package ensures that adult beneficiaries receive a comprehensive package of critical services. Screening and brief counseling for DV/IPV is a required benefit under the women's preventive health services package. Children receive a special benefit package that guarantees all necessary screenings, services and treatments that the child needs. That said, every state has a different benefit package and coverage will look different depending on where you live. Ask your state Medicaid department to help uncover what is already covered in your state. Explain what services survivors need and offer to work with the Medicaid Department to explore ways to get those services covered. Changing benefits packages takes time but begin to build that relationship now. Remind state officials that CMS (the Centers for Medicare and Medicaid Services, the federal agency that runs Medicaid) recently reiterated their support for Medicaid to cover trauma-informed care.

# How does Medicaid cover preventive services including screening and brief counseling for DV/IPV?

Medicaid covers a wide range of preventive services and screenings for all beneficiaries including screening and brief counseling for DV/IPV. In addition, new regulations have given states the option to include more types of providers who are able to administer preventive services (as long as the services are recommended by a physician). But states have discretion on how this benefit is implemented and it is important to know how this looks in practice in your state. Explore with your Medicaid department how survivors are currently accessing preventive services like screening and brief counseling for DV/IPV. What types of providers are currently delivering this service? Are there opportunities to provide more education about this benefit to raise awareness among providers?

### If the state Medicaid program doesn't cover a wide range of trauma-informed services, how else can survivors access the services they need through Medicaid?

Medicaid programs can cover specific interventions—or broad categories of services. The state Medicaid Department may be able to explain how best to leverage the existing benefit package to help survivors get the service they need. One way to start this conversation is for advocates to prepare a list of the broad type of services that survivors might need and ask the Medicaid Department if there are ways to get those services covered.

1. Find your state Medicaid program name here.

https://www.healthcare.gov/medicaid-chip-program-names/

### How can the Medicaid Department support survivors so that they receive the necessary treatment?

Having a health insurance card is not the same thing as getting needed care. Survivors can face obstacles in getting the services. That can be due to too few providers taking new patients or difficulty in navigating the system. These can be big picture problems that can take time to solve. Ask the Medicaid Department about any initiatives they have to help navigate the healthcare system and how advocates can help ensure that survivors receive needed treatment.

# Are there care coordination and/or case management services offered that can help survivors navigate Medicaid?



Most state Medicaid programs cover case managers and care coordination for certain individuals. It is important to understand who is providing the services and what they are legally allowed to do. Having a good advocate to help with getting needed referrals and providing support services (e.g., transportation) can make a real difference for survivors. Explore with your Medicaid Department what the options are for supports to survivors for navigating Medicaid.

### Can I (or my agency) become a Medicaid provider?

In order to get reimbursed by Medicaid for providing services, you'll first need to apply to become licensed by Medicaid. Every state has a list of different types of providers who can become licensed Medicaid providers. Providers are required to practice within the scope of their license within the scope of state law, but providers can be of a wide range of disciplines and educational backgrounds. Talk to your state Medicaid Department about what it takes to become a licensed Medicaid provider and what type of providers can get reimbursed.

# What big picture changes is the state Medicaid Department considering that could impact coverage for survivors?

State Medicaid Departments regularly review the eligibility and benefit designs of their programs. Now, as states look ahead to possible budget issues resulting from the COVID-19 pandemic, states may look at ways to contain costs and, in some cases, this could mean service cuts. It is important to know what your state is already considering, or has underway. States are required to provide opportunities for public input and there will be opportunities to be involved at every stage. Offer to play an advisory role about the value of health insurance for survivors and be prepared to advocate for continued access to comprehensive coverage.

