



March of Dimes Foundation

Rhode Island Chapter
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RI Medicaid 1115 Waiver Extension Request
74 West Rd., Building 74
Cranston, RI 02920

Thank you for the opportunity to provide comments on the January 2013 Rhode Island 1115 Waiver Extension Request.

The mission of the March of Dimes is to improve the health of women of childbearing age, infants, and children by preventing birth defects, premature birth, and infant mortality. As part of that mission, March of Dimes believes that all women of childbearing age, infants, and children should have access to affordable, comprehensive health insurance coverage that meets their needs.

In reviewing the 1115 Waiver Extension Request, we would like to express the following comments.

Medicaid Expansion

The 1115 Waiver Extension Request notes that Executive Office of Health and Human Services (EOHHS) intends to seek General Assembly approval to submit a State Plan Amendment to implement the Medicaid expansion available in the Affordable Care Act.

Studies have shown conclusively that lack of access to health coverage causes women to delay or forego needed health treatment, including both preventive and sick care. For women of childbearing age, this means that critical opportunities to improve their health before pregnancy are missed. If women can obtain regular health care services to help them quit smoking, achieve a healthy weight, and maintain normal blood pressure and blood sugar levels, they are much more likely to have a healthy pregnancy and baby. The Medicaid expansion provides state with the opportunity to extend health coverage to women before and between pregnancies, improving health for both them and their infants. In Rhode Island, approximately 10,000 women of childbearing age would become eligible for Medicaid coverage if the program is expanded to include non-elderly individuals with incomes up to 133 percent of the federal poverty level (FPL).

Streamlined Application Process and Consumer Assistance

It is important for state Medicaid programs to facilitate timely and appropriate coverage for pregnant women, infants, and children. Therefore, March of Dimes is supportive of the initiatives in the 1115 Waiver Extension Request to increase coordination and integration with the Medicaid program with other publicly financed health care programs. In addition, we are supportive of the creation of a Consumer Assistance Program housed at EOHHS that will support and help coordinate all of the information and referral, options counseling, eligibility assistance, and case management that occurs across the EOHHS agencies.

Continuity of Coverage

Continuity of coverage is critical, particularly for pregnant women for the duration of their pregnancy and for postpartum care and for individuals managing a chronic condition or receiving specific treatment. Therefore, March of Dimes support the provision included in the Waiver Extension Request to ensure continuity of coverage for persons who lose eligibility for Medicaid or CHIP and, as a result, become eligible for a Qualified Health Plan through the exchange by retaining Medicaid or CHIP eligibility until enrollment in the Qualified Health Plan begins.



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Family Planning

A central purpose of family planning is to ensure that each baby is born as healthy as possible by helping the mother to be as healthy as possible, starting before pregnancy. It is very important for women to have access to a health care provider before they become pregnant to assess their general health and to address chronic conditions, such as diabetes or hypertension; poor eating habits; and tobacco or substance abuse. In addition, interconception care, or care between pregnancies, is also important. Appropriate birth spacing can help reduce preterm birth.

Therefore, March of Dimes supports the continued provision of 24 months of family planning services to pregnant women after 60 days post-partum coverage, and supports the inclusion of preconception counseling, tobacco cessation counseling and pharmacotherapy, and folic acid supplements, all of which will help improve the health of women of childbearing age and their children, in the Extended Family Program proposed in the 1115 Waiver Extension Request.

Use of Quality Measures

Collecting and reporting quality measure data in every state allows policymakers, consumers, health officials, and others to see a comprehensive picture of how well public programs, like Medicaid and CHIP, and private insurers are serving women of childbearing age, infants, and children. Quality measurement and reporting provides a mechanism to hold Medicaid and CHIP programs accountable, to ensure they are providing access to the most clinically appropriate care. Quality measurement, reporting, and improvement can also identify and reduce instances in which clinically improper care, such as elective, non-medically indicated deliveries before 39 weeks, is administered.

Among the quality measures in the Medicaid Adult Quality Measures Core Set and the CHIPRA Core Set of Pediatric and Perinatal Quality Measures that March of Dimes considers priorities are: 1) Elective deliveries 37-39 weeks gestation and 2) Percent of Live Births Weighing Less than 2500 Grams. We are encouraged that the 1115 Waiver Extension Request will include an incentive payment structure based on these two quality measures.

Cost Sharing

The 1115 Waiver Extension Request institutes cost sharing up to 5 percent of family income for children under age 1 whose family income is 185-250 percent FPL, for children older than 1 but less than 19 whose family income is 133-250 percent FPL, and for pregnant women whose family income is 185-250 percent FPL.

Studies have shown that cost sharing reduces utilization and access to care, especially among low income populations, who may have the greatest need for services. Family planning services are an essential part of preconception health care which is associated with better birth outcomes and cost savings. Cost sharing has the potential to reduce access to these necessary services and could ultimately increase Medicaid costs due to greater incidence of poor birth outcomes.

Sincerely,

A handwritten signature in black ink that reads 'Nichole L. Aguiar'.

Nichole L. Aguiar
Director of Program Services