IMPLEMENTING THE ACA: HOW MUCH WILL IT HELP VULNERABLE ADOLESCENTS AND YOUNG ADULTS?

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Special Thanks!

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Overview

- ACA implications for vulnerable adolescents & young adults
  - Youth in & exiting foster care
  - Youth in & exiting juvenile & criminal justice systems
  - Homeless youth
- Common themes
- Health insurance coverage pre- and post-ACA
- Important challenges

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ACA Eligibility

- Coverage through the “exchange” or “marketplace”
  - Subsidized coverage
    - Premium tax credits: 100% to 400% FPL
    - Cost sharing assistance: 100% to 250% FPL

- Medicaid
  - Children & adolescents through age 18
    - Maintenance of effort
    - Required coverage at least to 138% FPL
  - Young adults
    - Medicaid expansion critical
ACA Benefits

“Essential Health Benefits”

- All private plans offered through the Exchange must cover 10 essential health benefits
  - State flexibility
  - Benchmark plans
  - Monitoring & advocacy

- States opting for Medicaid expansion must cover at least 10 essential health benefits for newly eligible adult beneficiaries
Essential Health Benefits

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance abuse disorder services, including behavioral health treatment
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care

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Preventive Services

- No cost sharing in private health plans
- In-network providers

Scope
- USPSTF grade A or B recommended services
- Bright Futures recommended services for adolescents
- CDC ACIP recommended vaccines
- Services recommended in Women's Preventive Services Guidelines (IOM)
Vulnerable Groups – Common Themes

- Significant overlap & intersection among 3 groups
- Overrepresentation of racial & ethnic minorities
- High rates of serious health problems
- High rates of uninsurance & reliance on Medicaid
- Disconnection from familial, adult, & social supports
Foster Youth – Pre-ACA

- Most foster youth covered by Medicaid
- Many lost coverage when aging out at age 18
- 2010 study found ½ lacked coverage by age 23 or 24
- Foster Care Independence Act 1999
  - Medicaid expansion option to age 21
  - 33 states implemented option by January 2011

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Foster Youth — Post-ACA

- ACA requires Medicaid coverage for former foster youth to age 26
  - In foster care and enrolled in Medicaid at age 18 (or older as specified by state)
  - No income or assets test
  - Limited to state where youth was in foster care??
- Estimated 74,000 former foster youth enrolled by 2017

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Many youth involved in juvenile or criminal justice system had Medicaid coverage prior to entry into residential placement or incarceration.

- States required to cover ages 6-18 to 100% FPL
- Many states extended coverage to higher levels.

Those incarcerated or confined in “public institutions” lost Medicaid during incarceration.

- Option to suspend coverage not adopted by many state and local agencies.
Justice Systems Youth – Post-ACA

- Medicaid expansion
  - One half of states expanding Medicaid at this time

- Subsidized coverage through the ACA exchanges
  - Available beginning at 100% FPL
  - Not available below 100% FPL

- Coverage on a parent’s plan to age 26

- Employer based coverage unlikely
Homeless Youth – Pre-ACA

- Comprehensive data on health insurance coverage of homeless youth not available
- Many uninsured
- Many Medicaid eligible
  - Application & enrollment barriers
    - Requirement for parent’s signature
    - Verification of family income
    - Fixed address
- Heavy reliance on ER & sites for free care
Medicaid

- Eligibility in states without expansion
  - Pregnant
  - Parent of dependent child
  - Disabled

- Eligibility in states with expansion
  - At least up to 138% FPL

Other coverage options unlikely for these youth
Medicaid Challenges

- Expansion critical for vulnerable groups
- As of October 22, 2013
  - 25 states & DC expanding Medicaid
    - Minimum eligibility level = 138% FPL
  - 25 states not expanding at this time
    - Only 1 of those states provides ANY coverage for single non-parent adults without disabilities
    - Coverage for parents of dependent children ranges from 16% to 128% FPL with median at 47% FPL

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Outreach and Enrollment Challenges

- States required to engage in outreach to vulnerable populations:
  “...conduct outreach to and enroll in Medicaid/CHIP vulnerable and underserved populations, including unaccompanied homeless youth, children with special health care needs, pregnant women, racial and ethnic minorities, rural populations and individuals with HIV/AIDS.” § 2201(b) (amending 42 U.S.C. § 1397aa)

- Streamlined application procedures
- Enrollment assistance for exchange plans

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Conclusion

- Ensuring access to affordable insurance & essential health services for vulnerable adolescents & young adults under the ACA will be complex & challenging
  - Federal laws
  - State laws
  - Health care professionals & advocates

- ACA will help vulnerable adolescents & young adults – how much???
Thank You!