

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

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OJJDP Coordinating Council
Washington, DC – November 13, 2013

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

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

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 1/2 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

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

Justice Systems Youth – Pre-ACA

- 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

Homeless Youth – Post-ACA

- 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

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

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!