

# Coverage and Benefits Related to COVID-19 Medicaid and CHIP

Medicaid and the Children's Health Insurance Program (CHIP) provide health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults and people with disabilities. Medicaid and CHIP are funded jointly by states and the federal government, and the programs are administered by states, according to federal requirements. Medicaid and CHIP provide comprehensive benefits to people who are determined eligible by states. Some benefits are required and some are optional. For information on benefits offered in your state, where to access services and how to apply for coverage in your state, see Medicaid.gov.

## https://www.medicaid.gov/about-us/contact-us/contact-state-page.html

## Medicaid / CHIP Benefits

Medicaid and CHIP programs cover a broad range of benefits, which may vary by state. Some benefits are mandatory which means states are required to provide them while other benefits are optional for states to provide. More information about some benefits is described below. Specific questions regarding covered benefits should be directed to the respective state Medicaid and CHIP agency.

### Testing, Diagnostics and Laboratory Services

- Testing and diagnostic services include any medical procedures or supplies recommended by a physician or other licensed practitioner to enable him/her to identify the existence, nature or extent of illness and whether a person is sick.
- Though these are commonly covered services, testing and diagnostic services are an optional benefit category, and can vary by state.
- However, children are eligible to receive all medically necessary testing and diagnostic services.
- Laboratory and X-ray services are a mandatory benefit in Medicaid and these services are covered and reimbursed in all states.
- Specific questions about these testing, diagnostic and laboratory services should be directed to the respective state Medicaid and CHIP agency.

### **Immunizations**

• Children - Medicaid and CHIP cover recommended vaccines for children without cost sharing.



• Adults - In states that have expanded Medicaid, states must cover preventive services including vaccinations without cost sharing for adults. States have flexibility to determine whether to provide coverage of vaccines for adults covered in other eligibility groups, like low-income parents.

## Hospital Care (Inpatient and Outpatient Service)

- Beneficiaries can receive a range of inpatient hospital inpatient services for their care and treatment under the direction of a physician or dentist.
- Beneficiaries can receive a range of hospital outpatient services including preventive, diagnostic and testing, therapeutic, rehabilitative and palliative care under the direction of a physician or dentist.
- Under Medicaid, states are required to provide both inpatient and outpatient hospital services to beneficiaries. For CHIP, all states provide coverage of hospital care for children and pregnant women.

## Prescription Drugs

- Beneficiaries can receive a range of prescription drugs through Medicaid and CHIP.
- States may choose to cover specific categories of Over-the-Counter medications. Many states cover categories for fever relief, cough preparations as well as medications related to the treatment of virus symptoms.
- In some cases, states may subject some medications to prior authorization requirements or other utilization management tools.
- Prescription drug services, for both Medicaid and CHIP, are an optional benefit, although all states cover prescription services.

### Nursing Facilities

- Medicaid provides nursing facility services to low-income Medicaid beneficiaries determined eligible to receive those services in certified nursing homes.
- Medicaid certified nursing homes primarily provide three types of services:
  - Skilled nursing or medical care and related services
  - o Rehabilitation needed due to injury, disability, or illness
  - Long term care health-related care and services (above the level of room and board) not available in the community, needed regularly due to a mental or physical condition



- A nursing facility is one of many settings for long-term care, including or other services and supports outside of an institution, provided by Medicaid or other state agencies.
- Residents may be charged for some services provided in a nursing facility.
- This is a mandatory benefit and coverage rules vary by state.

## **Emergency Transportation**

- Emergency Transportation is appropriate when the beneficiary needs immediate transportation for evaluation or stabilization for an emergency medical condition, which means a medical condition that is so severe and acute (including severe pain) that a lack of immediate medical attention could result in placing the individual in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part.
- All states are required to cover emergency medical transportation. States provide necessary non-emergency transportation to providers' offices.

### Child Health Services

- Medicaid beneficiaries under age 21 and CHIP beneficiaries in some states are eligible for medically necessary services that may be covered, even if the service is not covered for adults.
- The Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, and developmental, and specialty services.
- States are required to provide comprehensive services and furnish all Medicaid coverable, appropriate, and medically necessary services needed to correct and ameliorate health conditions, based on certain federal guidelines. EPSDT is made up of screening, diagnostic, and treatment services.
- Please see the link for more information about these child health services: <u>https://www.medicaid.gov/medicaid/benefits/early-and-periodic-screening-diagnostic-and-treatment/index.html</u>

## <u>Telehealth</u>

• Telehealth (or telemonitoring) is the use of telecommunications and information technology to provide access to health assessment, diagnosis, intervention, consultation, supervision and information across distance.



• States have broad ability to cover telehealth for the delivery of Medicaid-covered services.

## **Cost Sharing and Premiums**

Cost sharing for most Medicaid and CHIP services is nominal or limited, and maximum out of pocket costs are typically capped at five percent of family income. Certain vulnerable groups, such as children and pregnant women, are <u>exempt from most out of pocket costs</u> and copayments and coinsurance cannot be charged for certain services such as emergency and preventive services. States have the option to charge premiums and to establish <u>out-of-pocket spending (cost sharing)</u> requirements for Medicaid enrollees. Out of pocket costs may include copayments, coinsurance, deductibles, and other similar charges. States can charge premiums and enrollment fees for some Medicaid beneficiaries. Because Medicaid covers particularly low-income and often very sick patients, services cannot be withheld for failure to pay, but enrollees may be held liable for unpaid copayments. Check with individual state Medicaid/CHIP programs for specifics about cost sharing.

### **Using Medicaid and CHIP in Other States**

### How do Medicaid/CHIP-eligible beneficiaries get coverage in other states?

- Beneficiaries who are temporarily evacuated from their home state can continue to be enrolled in Medicaid in the home state and receive coverage. The home state can make payments to Medicaid providers in other states.
- States receiving evacuated individuals from another state can choose to cover these individuals. The receiving state would need to submit a Medicaid state plan amendment in order to cover these out-of-state evacuees.

### **Obtaining Medicaid / CHIP Coverage**

For information for benefits offered in your state, where to access services and how to apply for coverage in your state, see Medicaid.gov.

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