

Who is covered in Rhode Island's Medicaid Program?

ELIGIBILITY GROUPS

FFS^{1,2} MCO³⁻⁵

<p>Undocumented Immigrants*</p> <p>Incarcerated**</p>	 	         	<p>Children (0-18 years)</p> <p>Current & Former Foster Care Children</p> <p>Parents and other Caretaker Relatives</p> <p>Pregnant Women</p> <p>Aged, Blind, and Disabled Adults</p> <p>Dual Eligibles</p> <p>Disabled Children</p> <p>Newly Eligible Adults</p> <p>Qualified Non-Citizens⁺</p> <p>Intellectual and Developmental Disabilities</p>
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* Emergency Medicaid services only.

** Only acute hospitalizations are covered.

+ Qualified non-citizens are subject to a 5-year waiting requirement, except for children up to 19 years of age.

Important News

May 2016 - Rhode Island began allowing voluntary opt-in enrollment to the Neighborhood INTEGRITY's Integrated Care Initiative (ICI), an integrated Medicaid and Medicare benefits under a capitated, dual-eligible financial alignment demonstration.⁶

January 2017 - Rhode Island's new 2018 budget proposal freezes rates for hospitals and nursing homes and reduces the administrative rate paid to the state's contracted managed care organizations (MCOs).⁷



Medicaid Medical Director's Network

The Medicaid program expanded its asthma interventions for enrollees as initiated by the Centers for Disease Control program.

Do Medicaid health plans provide coverage?^{* 8}

YES NO

- Neighborhood Plan of Rhode Island
- UnitedHealthcare of New England

* Excludes ACO options

How has Rhode Island's Medicaid program engaged in Managed Care?

SECTION 1115 WAIVERS⁹

The Rhode Island Comprehensive Demonstration was created to allow Rhode Island administrative flexibility over its entire Medicaid program. Under this waiver, Rhode Island manages Rite Care, Rite Share, Extended Family Planning, Rhody Health Partners, Connect Care Choice, Home and Community-Based Services, and Rite Smiles.



APPROVAL:
1/16/2009

EFFECTIVE:
7/1/2009

EXPIRATION:
12/31/2018



RHODE ISLAND MEDICAID FACTS

How is Rhode Island meeting the needs of Medicaid enrollees?

Value-Based Healthcare Initiatives

Health homes in Rhode Island provide coordinated behavioral health and primary care for Connect Care Choice enrollees with chronic mental illnesses.¹⁰

The patient-centered medical home provides comprehensive primary care services for children, youth, and adults while facilitating partnerships between patients, their personal physicians, and the patient's family. In addition, the program offers accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective care.¹¹

Rhode Island provides an Accountable Entity (AE), their version of an Accountable Care Organization (ACO), in which a provider organization is accountable for quality health care, outcomes, and the total cost of care of its population.¹² The three types of AEs that are currently running in Rhode Island include:¹³

- The Comprehensive AE program - an interdisciplinary partnership of primary care providers, inclusive of other services such as behavioral health and social support services.
- Specialized Long-Term Services and Supports (LTSS) AE Pilot Program - intended to encourage participating LTSS providers to build collaborative, integrated care delivery systems that include a continuum of care (e.g., home care, adult day, skilled nursing facilities).
- Medicaid Pre-Eligibles Pilot Program - intended to engage high volume Medicare providers in the development and implementation of targeted interventions for Medicaid Pre eligibles; especially at-risk populations residing in the community.



Family Planning

Covered family planning services include:¹⁴

- Counseling and education on birth control methods
- Pregnancy testing
- HIV counseling, testing, and referral services
- Yearly physical exams
- Screening for testicular, breast, and cervical cancer
- Diagnosis and treatment of sexually transmitted diseases, and some lab testing
- Counseling for teens on how to avoid coercive attempts to get them to have sex

Under the Rhode Island Comprehensive Demonstration, the state provides access to family planning and related services along with referrals to primary care services. Women are eligible if their family income is at or below 250% of the federal poverty level (FPL) and who would lose Medicaid eligibility under RItE Care at the end of their 60 day postpartum period.¹⁵



Women's Health

Rhode Island's Women's Cancer Screening Program provides coverage for breast and cervical cancer screening that includes:¹⁶

For ages 21 - 29:

- Cervical cancer screening (pap test alone every three years)
- Breast cancer screening (clinical breast exam, only if performed in conjunction with pap test)
- Diagnostic services and follow-up, if an abnormality is found in a screening test

For ages 30 - 39:

- Cervical cancer screening (pap test alone every three years or pap test and HPV test together every five years)
- Breast cancer screening (clinical breast exam, only if performed in conjunction with pap test)
- Diagnostic services and follow-up, if an abnormality is found in a screening test.

For ages 40 - 64:

- Cervical cancer screening (pap test alone every three years, or pap and HPV test together every five years)
- Breast cancer screening (mammogram and clinical breast exam every year)
- Diagnostic services and follow-up, if an abnormality is found in a screening test.

For age 65 and older:

- Not eligible for program services. However, there is an exception for women without Medicare Part B or who are undocumented. Both are eligible for all program services.

For women of any age:

- Women with symptoms suspicious for breast cancer or, an abnormal finding on a clinical breast exam are eligible for breast services including diagnostic follow-up.

RItE Care covers pregnant women with family income up to 258 percent of the federal poverty level (FPL).¹⁷ Services for pregnant women include:¹⁹

- Services to help smokers quit and reduce exposure to secondhand smoke.
- Offer free support to pregnant women and families with young children through our family visiting programs.
- Oversee newborn health screening.
- Collaborate with and support healthcare providers to decrease the rate of premature births and increase the number of planned pregnancies in Rhode Island.
- Collaborate with and support health care providers and community groups working to increase breastfeeding rates in Rhode Island.
- Coordinate statewide efforts to reduce lead exposure in children and create safer living environments for all Rhode Islanders.



How is Rhode Island meeting the needs of Medicaid enrollees?

Mental Health and Substance Use Disorder

Mental health services for adults are covered when they are approved by a licensed practitioner (excluding crisis intervention services). Mental health psychiatric rehabilitative residence services must be authorized by a physician, specifically. Further documentation is required for members who need more than 20 outpatient visits. Case management is carved out for individuals covered by a managed care program. Covered services include:^{19, 20}



- Crisis intervention
- Community psychiatric supportive treatment
- Intensive supervision day treatment
- Case management
- Psychiatric rehabilitation day program
- Assertive community treatment program



In addition to the above-mentioned services, children are also eligible to receive:¹⁹



- Psychiatric diagnostic interview examination, including history, mental status, and disposition
- Psychotherapy
- Psychotherapy with a family member
- Comprehensive medication services
- Family psychotherapy
- Lead investigations



Substance use disorder treatment services include:²¹



- Alcohol and drug treatment program
- Alcohol and drug assessment
- Substance abuse counseling and therapy
- Group counseling
- Residential counseling
- Covered drug therapies: methadone, naloxone, naltrexone, and disulfiram²²



Oral Health

Covered oral health services for children under 21 years of age include:²³

- Dental exams, cleanings, fluoride every six months
- Sealants for permanent molars every five years
- X-rays
- Fillings
- Crowns
- Dentures
- Space maintainers
- Extractions and other oral surgeries
- Orthodontics as medically necessary
- Emergency services

Services are covered for adults 21 years of age and older through Medicaid dental services. There is also a nursing home mobile dental program for Medicaid enrollees who have been in a nursing home for at least 45 days.²⁴ Services include:²⁵

- Cleaning and oral exam every six months
- X-rays
- Root canal therapies
- Restorations
- Periodontal services
- Prosthodontic services
- Emergency and palliative services
- Extractions, oral surgeries, and palliative services





RI

Timeline

Federal

Rhode Island

President Johnson signs Social Security Amendments of 1965, creating Medicaid as public health program for the poor.

1965

Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services are a requirement for children enrolled in Medicaid.

1967



1966

The State of Rhode Island adopts the Medicaid program.²⁶



Supplemental Security Income (SSI) program becomes Medicaid eligibility category for the elderly and persons with disabilities.

1972



Home and Community-Based Services (HCBS) waivers created for Long-Term Care (LTC) and Disproportional Share Hospital (DSH) payments.

1981

Children and pregnant women become mandatory Medicaid eligibility groups.

1984

Children up to age 6 and pregnant women up to 133 percent of the federal poverty level (FPL) become eligible; EPSDT benefit expanded.

1989

Mandatory eligibility extended to children ages 6 to 18 years in families up to 100 percent FPL; eligibility phased in from 1990 through 2002.

1990



Balanced Budget Act of 1997 allows Medicaid to be delivered through managed care organizations; State Children's Health Insurance Program (CHIP) created; states now have option to provide coverage for uninsured children in low-income families above FPL.

1997

1994

Rhode Island begins offering comprehensive, risk-based managed care through Rite Care, providing coverage for low-income children and families with a phased-in expansion over time to also include low-income working families and children with special health care needs. Rite Care covers acute, primary, and specialty care; pharmacy; and behavioral health services across the state, excluding foster care children.¹⁰

Olmstead decision allows expanded HCBS coverage for persons with disabilities.

1999



Rhode Island starts operating a program for the all-inclusive care for the elderly (PACE) program to provide all Medicaid and Medicare services to individuals age 55 and older who require a nursing home-level of care.¹⁰

2005

Rite Smiles begins offering children oral health services.¹⁰

2006

Rhode Island creates Connect Care Choice, providing primary care services and case management to most adults with disabilities.¹⁰

2007

2008

Affordable Care Act (ACA) expands Medicaid eligibility to adults with incomes up to 138 percent FPL.

2010

Rhode Island introduces Rhody Health Partners, a managed care program that offers acute and primary care services to older adults and individuals with disabilities who are not eligible for Connect Care Choice.¹⁰

National Federation of Independent Business v. Sebelius decision makes Medicaid expansion optional for states.

2012

Rhode Island begins integrating long-term services and supports (LTSS) for adults with developmental disabilities and behavioral health services for individuals with serious and persistent mental illnesses who are not yet covered.¹⁰

2013

ACA implementation begins.

2014

2014

State of Rhode Island authorizes Medicaid expansion to cover eligible adults up to 138% of the federal poverty level (FPL).²⁷ The state also implements a state-run exchange program called HealthSource RI.²⁷

2016

32 states and the District of Columbia (DC) have expanded Medicaid since passage of the ACA.

2017

2017

Rhode Island pilots an Accountable Care Organization (ACO) program with six Medicaid "Accountable Entities" (AEs).²⁸
Rhode Island allows new Medicaid applicants who are functionally eligible for LTSS to self-attest financial eligibility to receive a limited benefit package of home and community-based services (HCBS) for three months while their full financial eligibility determination is reviewed.²⁷