Children's Hospital of Philadelphia
PolicyLab

What Can Governor Tom Wolf do to Improve the Health of Pennsylvania Children and Families? Part I

Population Health Sciences

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Tom Wolf was sworn in as Governor last week, and while he faces several challenges (namely a $2.3 billion deficit and a legislature controlled by his opposing party), he is also poised to improve the lives of Pennsylvanians – particularly children and families.

PolicyLab houses many public health clinicians and policy experts, and so I decided to ask them for advice for the new governor. Below you will find two recommendations that rose to the top. I will post more recommendations in the coming weeks.

1. Address concerns regarding the eligibility and medical benefits of the three benefit packages under the *Healthy Pennsylvania* Medicaid expansion plan, and particularly the issues related to individuals with chronic health needs.

Children's health is affected by the health of their parents. While most children in Pennsylvania have health insurance coverage, their parents may not. Governor Tom Wolf stated recently, "My top priority is to expand Medicaid to cover hundreds of thousands of Pennsylvanians." Former Governor Tom Corbett's vehicle to expand Medicaid in the state was *Healthy Pennsylvania*, which is what is available to Pennsylvania right now. Whether Governor Wolf unravels *Healthy Pennsylvania* plan remains an open question. In the meantime, there are eligibility and enrollment issues that need to be addressed immediately.

By way of background: There are three benefit packages: Healthy, Healthy Plus, and *Healthy PA* Private Coverage Option (PCO) under the *Healthy Pennsylvania* Medicaid expansion plan. The Healthy benefits package has reduced medical benefits compared to prior Medical Assistance coverage, as well as limits on services like doctor's visits, blood tests and other lab work, and x-rays. The Healthy Plus benefits package is

the most similar to prior Medical Assistance coverage, but it is only for pregnant women, seniors, and people with certain disabilities or health problems. The *Healthy PA* PCO benefits package does not cover all the same doctors or mental health providers as the other benefits packages. It has been well documented that mental health is as important as physical health, and it is strongly recommended that all benefits packages provide the same access to mental health providers.

The concerns: Some individuals are being deemed ineligible for the benefits package most suited to their medical needs. Anecdotally, we know that young adults with HIV are being enrolled in the Healthy benefits package instead of Healthy Plus, which is the benefits package we would expect for young adults with this type of chronic condition. These concerns are not ours alone: two lawsuits have been filed by Community Legal Services about these issues. There is also concern that individuals who have never had health insurance will be deemed ineligible for the Healthy Plus package, when in reality, that may be the best benefits package for them. One potential strategy to address this concern is to strengthen the Healthy Plus benefits package while at the same time making it the default benefits package for all enrollees.

2. Support the extension of the Children's Health Insurance Program (CHIP) funding at the federal level, and then work as a state to monitor the quality of benefits for children under qualified health plans (QHPs) and to ensure better coordination between QHPs and CHIP.

Pennsylvania has a long history of success with its CHIP program. Federal CHIP funding is set to expire at the end of September 2015, and this funding supports health care coverage to more than 150,000 children in Pennsylvania today. If CHIP goes away, many of these children will obtain health insurance coverage from Qualified Health Plans (QHPs) sold in the health insurance Marketplaces. However, there is no guarantee that the QHPs provide the same or better coverage as CHIP plans. In fact, research done by PolicyLab and others has shown that coverage under QHPs varies widely from state to state, and there are significant exclusions, particularly for children with developmental disabilities and other special health care needs. In light of this, the new gubernatorial administration should support the extension of CHIP funding at the federal level, and then work as a state to plan better coordination between CHIP and QHPs and to ensure that pediatric benefits within QHPs are adequate.

Stay tuned for more recommendations to come in the following weeks.