Children's Hospital of Philadelphia
PolicyLab

Why Medicaid Is Important for Children and Youth With Disabilities

Health Equity

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Editor's Note: This post is part of a series exploring the role Medicaid plays in the health of children, families and communities. Our experts will examine the data, share timely research, and outline policy details related to the importance of the program for different populations. Click here to explore more posts in the series.

Medicaid coverage has lifelong positive impacts on children with intellectual and developmental disabilities (IDD)*, as well as on their families and communities. Understanding the multiple ways that Medicaid supports these children is particularly important as the program faces funding threats and great uncertainty about potential changes.

As a developmental and behavioral pediatrician who evaluates for and helps to support children with developmental conditions, I see first-hand how important Medicaid can be. For my patients with developmental disabilities, Medicaid can help them access medical and mental health care, therapies, and educational supports, and can provide stability and opportunity to families. In fact, providing information about Medicaid eligibility is one of the most important things I can do for families during a clinical visit.

Medicaid provides health coverage to approximately 2.3 million children with disabilities across the U.S. Having a disability is one coverage pathway for Medicaid, but definitions of qualifying disabilities vary by state. In Pennsylvania, children with disabilities may be on Medicaid because their family is income-eligible or they may qualify through the Medicaid for Children with Special Needs (PH95) program, regardless of the family's income. Pennsylvania's definition of disability aligns with the Social Security Administration and includes chronic medical conditions, as well as autism, intellectual and developmental disabilities, and attention-deficit/hyperactivity disorder (ADHD), among others.

How Medicaid serves children and youth with disabilities

Medicaid helps pay for and provide access to medical care, emergency care, mental health services, prescription medications, and medical equipment and supplies. For children with disabilities, in addition to covering medical and mental health clinical services, Medicaid is a crucial payer for additional supports and therapies for this population. In fact, an often under-recognized benefit of Medicaid for children with disabilities relates to the therapies and services that Medicaid covers within Early Intervention and educational settings.

Children aged 0 to 3 years can access essential services during this critical period of child development, such as physical therapy, speech and language therapy, occupational therapy, and developmental or specialized instruction, through Early Intervention Part C of the Individuals with Disabilities Education Act (IDEA).

Related to services delivered in early childhood, state and federal education funds cover only a portion of the costs for each child participating in Early Intervention. For children who are covered by Medicaid, Early Intervention Part C therapies may be paid for by Medicaid. In fact, nearly every state uses Medicaid dollars to help fund Early Intervention programs. These services have tremendous benefits for children's long-term success. Research shows that many children who receive Early Intervention services in early childhood no longer require special education supports when they enter kindergarten.

As children age, Medicaid continues to be an important payer for services for children with disabilities within schools and can provide support to allow them to attend their local public school. Medicaid can help close critical funding gaps by paying for therapies such as speech and language therapy, occupational therapy and physical therapy. These therapies are needed to assist children with disabilities to succeed in public schools, part of their right to a Free Appropriate Public Education within the IDEA. Having adequate supports, including therapies and trained personnel, can support children's participation in education in the least restrictive environment, another component of IDEA.

For autistic youth and children with other intellectual and developmental disabilities, Medicaid covers therapies such as behavioral supports (including Applied Behavioral Analysis and professional support staff) as well as technology (such as Augmentative and Alternative Communication Devices to support communication) within schools and in the community. These behavioral therapies and supports have been shown to help with social functioning, as well as improvements in skills like communication and emotional regulation, which can have tremendous impacts on children's futures.

Proposed cuts to Medicaid put these supports at risk. In combination with the proposed dismantling of the federal Department of Education, whose Office of Civil Rights investigates complaints about violations of the rights of student with disabilities, cuts to Medicaid put the future of special education and inclusion at risk for disabled students. Disability rights advocates have been vocal about this threat.

How Medicaid supports families of children and youth with disabilities and benefits their communities

While we can't fully unpack this issue here, I would highlight that Medicaid coverage can help offset the much higher costs of having a child with a disability, providing financial stability for families. There is also emerging data that Medicaid coverage can help families save more over time. By allowing children with disabilities to successfully participate in public education, Medicaid allows parents to participate in the workforce and best meet their families' needs.

Research from PolicyLab researchers has also outlined the additional time that caregivers of children and youth with special health care needs spend on care coordination, often navigating complex systems. This research showed that this increased time, or administrative burden, could lead to forgone medical care and that additional supports were needed for caregivers. This research highlights the importance of removing barriers to Medicaid access to allow families to spend more time directly caring for their children.

Medicaid provides needed funds to adequately support disabled children to participate in educational settings with typically developing peers, and with their siblings. When children with disabilities are given supports to thrive in settings such as schools together with their typically developing peers, it has been shown that all children benefit.

Medicaid is a critical lifeline for disabled children, their families and their communities. Ensuring continued financial stability of Medicaid will help populations of children with disabilities continue to access much-needed services to support their success.

**Here, I use both identity-first and person-first language, to reflect varied preferences. To read more about these terms, check out "A Primer on the Words We use to Describe Autism."*

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