



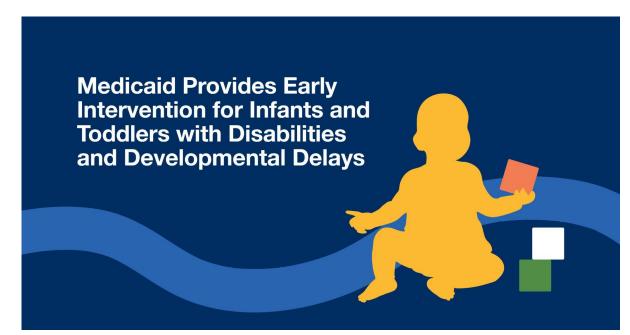


How Medicaid Helps Provides Early Intervention for Infants and Toddlers with Disabilities and Developmental Delays

April 2, 2025

Today's Plan

- 1. Medicaid Overview
- 2. How Medicaid and IDEA Part C early intervention work together
- 3. Proposals Under Consideration by Congress
- 4. Family perspective (Michigan)
- 5. State perspective (Texas)
- 6. Panel discussion, Q&A



Read the new brief <u>here</u>!



Our Speakers



Elisabeth Wright Burak, Georgetown CCF



Adriana Kohler Texans Care for Children



<u>Maureen Greer,</u> IDEA Infant & Toddler Coordinators Association



Johanna Lister ZERO TO THREE



<u>Rebecca Amidon</u>, Parent





Georgetown University McCourt School of Public Policy CENTER FOR CHILDREN AND FAMILIES

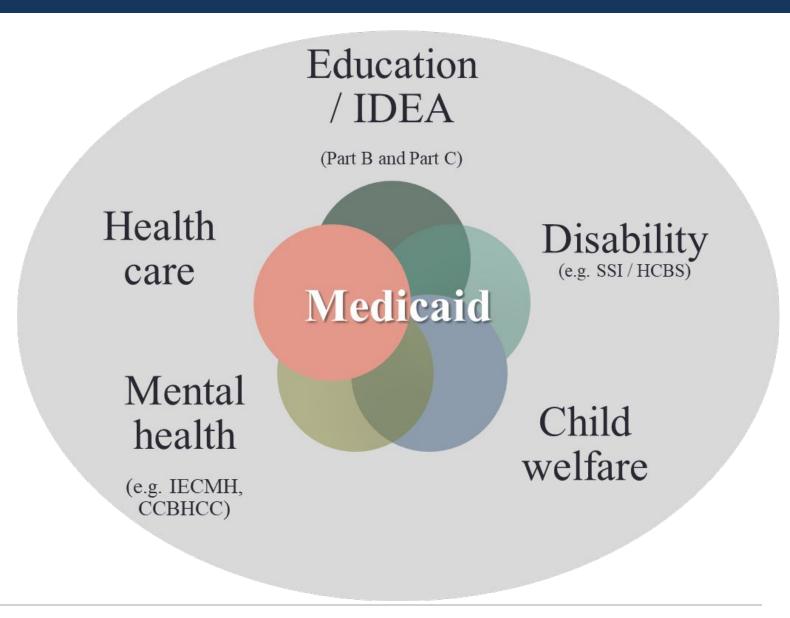


Medicaid's Many Roles

- Medicaid/CHIP provide health coverage for close to:
 - Half of all children 0-19
 - All children in foster care
 - Half of children with special health care needs (CSHCN)
 - 40 50% of all births
- Largest funder of long-term care services, substance abuse treatment, mental health services
- Medicaid plays a key role in:
 - Rural and urban communities
 - Pandemics and natural disasters

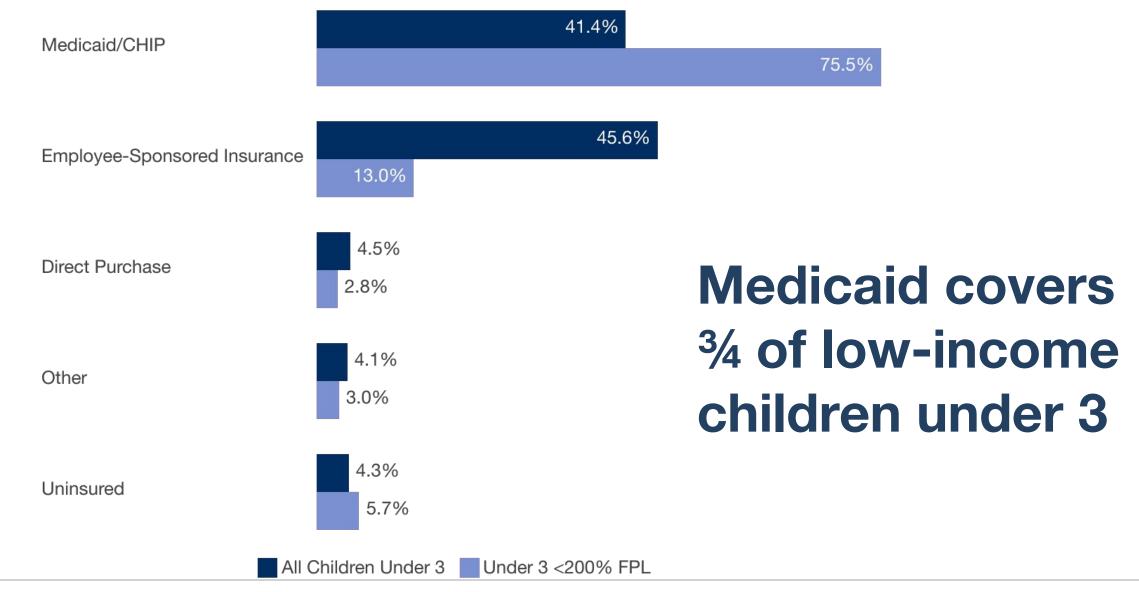


Medicaid finances a large share of services in many child-serving systems





Sources of Health Coverage for Children Under 3, 2023

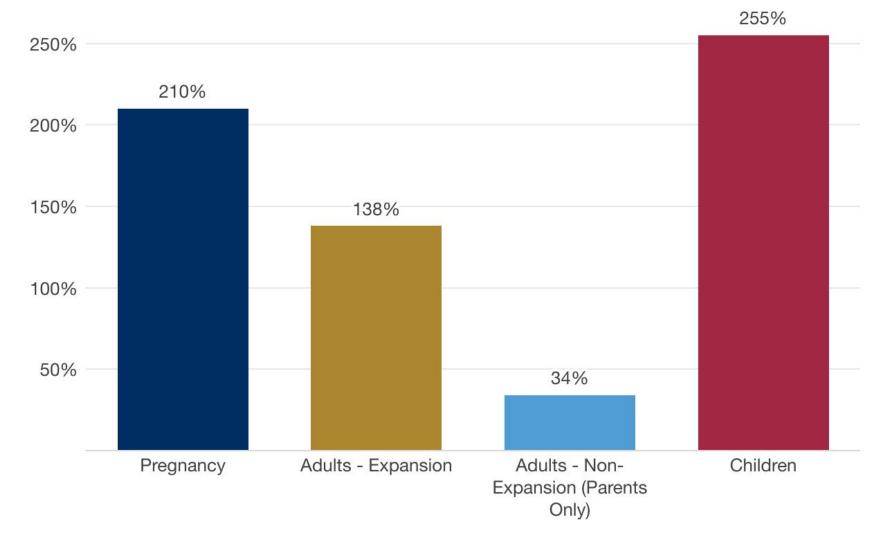




Source: Georgetown University Center for Children and Families analysis of U.S. Census Bureau 2023 American Community Survey (ACS) Public Use Microdata Sample (PUMS).

Median Income Eligibility Limit, June 2024

Medicaid provides health coverage for 72 million low-income children, adults, and seniors





Source: Brooks, T. et al., "<u>A Look at Medicaid and CHIP Eligibility, Enrollment, and Renewal Policies During</u> <u>the Unwinding of Continuous Enrollment and Beyond</u>" (KFF and Georgetown University Center for Children and Families: June 2024).

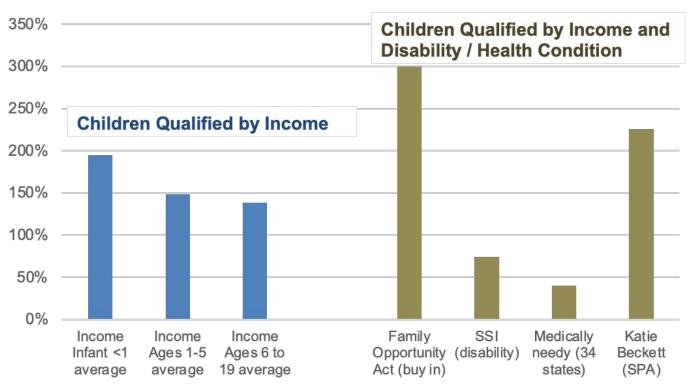
Pathways to Medicaid for Children with Disabilities

Medicaid eligibility pathways include:

- Income alone
- Income PLUS disability
 - Family Opportunity Act "buy in"
 - SSI disability
 - \circ Medically Needy
 - \odot Katie Beckett

Other waivers for people with disabilities
 (e.g., home- and community- based
 services-HCBS)

Children's Eligibility as a Percent of Federal Poverty Level (FPL), 2024





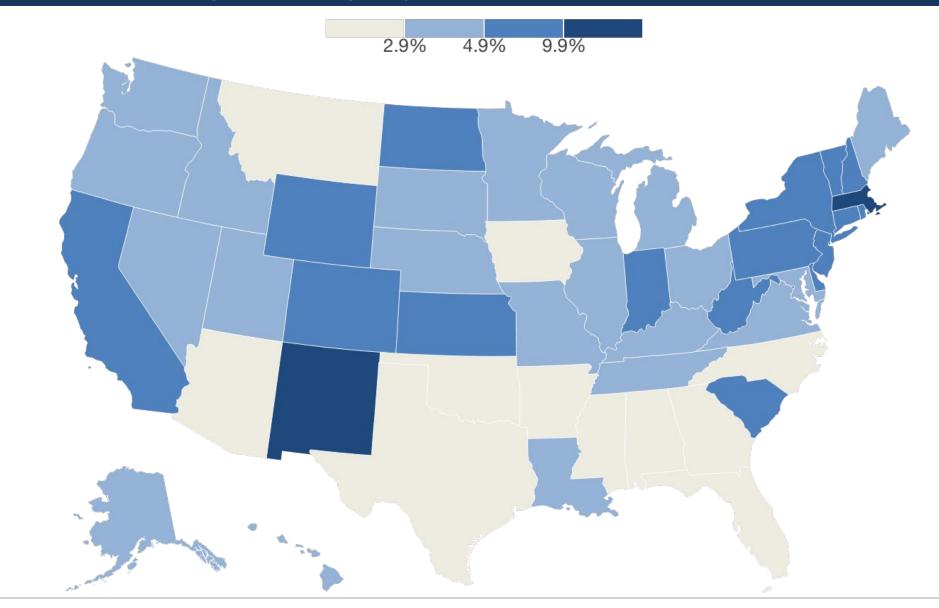
Sources: Kaiser State Health Facts Medicaid and CHIP Income Eligibility Limits for Children as a Percent of the Federal Poverty Level, Medicaid Eligibility for Medically Needy Populations and Medicaid Financial Eligibility in Pathways Based on Old Age or Disability in 2022: Findings from a 50-State Survey



Role of Medicaid in Part C Early Intervention Programs



Percentage of Population Under Age 3 Receiving Early Intervention Services Under IDEA Part C, 2023





Point in time/specific date counts. Source: U.S. Department of Education, Office of Special Education Programs. SY 2023-24 IDEA Part C Child Count and Settings State Level Data File. Accessed on July 31, 2024.

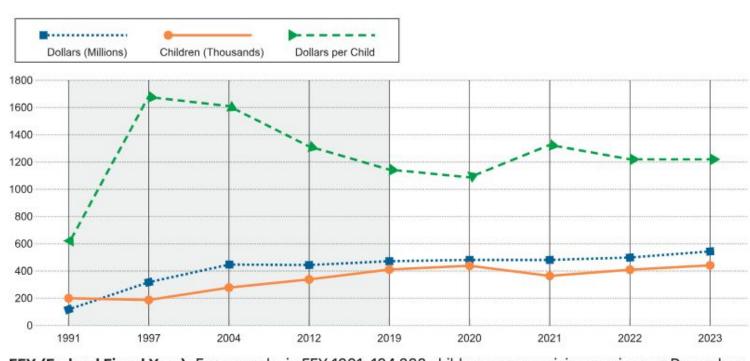
Medicaid and IDEA Part C Early Intervention

Торіс	Medicaid	IDEA Part C Early Intervention (EI)
Purpose	For the purpose of enabling each State to furnish medical assistance for individuals whose income and resources are insufficient to meet the costs of necessary medical services. The goal of (Medicaid's child benefit) EPSDT is to ensure that individual eligible children get the health care they need, when they need it, in the most appropriate setting.	The general purpose of the IDEA Part C is to aid states in creating and maintaining "a statewide, comprehensive, coordinated, multidisciplinary, interagency system." El programs designed to ensure that all infants and toddlers with diagnosed disabilities or developmental delays are identified and evaluated and have an individualized plan developed to meet their and their families' unique needs.
Eligibility	Income and categorical eligibility criteria including disability status, which vary by state.	No income criteria, eligibility based on health and disability status, which vary by state
Benefits / entitlement to services	Child health benefit = Early, Periodic, Screening, Diagnostic and Treatment (EPSDT). Broad set of screening, diagnosis and treatment/intervention services.	Services in Individualized Family Services Plan (IFSP) frequently include: occupational & physical therapy, vision, speech/ audiology, nutrition, special instruction, psychological and social work, and health services, along with service coordination.
Financing	Open-ended federal matching contribution for a percentage of costs for services	Federal grants to states based on the percentage of children under age 3. Fixed amounts without regard to program costs or number of children served.

Federal Part C grants to states fall short of spending per child / expenditures for program

Part C Infant and Toddler Program Federal Appropriations and National Child Count 1987–2023

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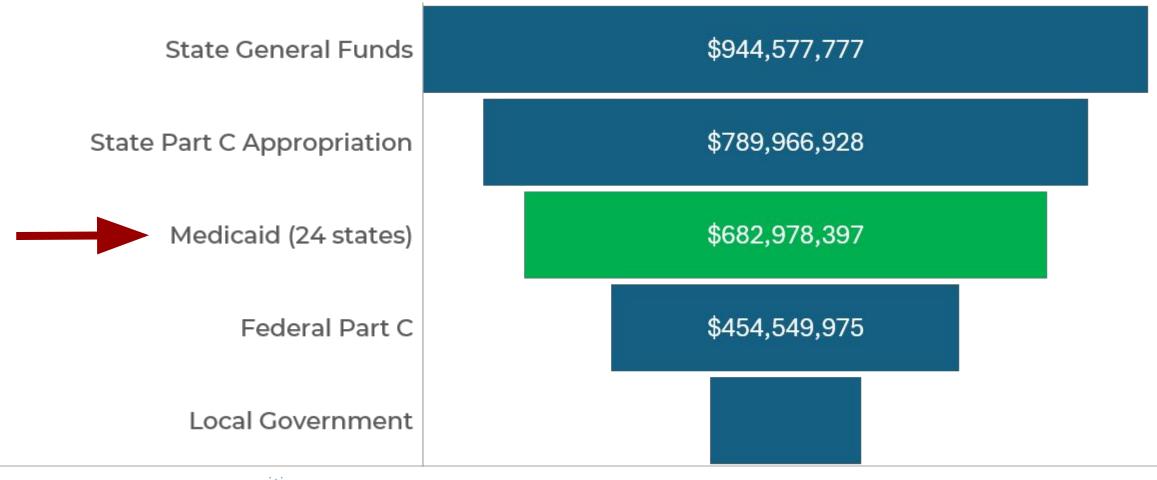
FFY (Federal Fiscal Year): For example, in FFY 1991, 194,363 children were receiving services on December 1, 1990.

Dollars (Millions): Amount of IDEA Part C funds distributed to states. Source: C Department of Education Budget Tables



Early Childhood Technical Assistance Center (ECTA), Part C Infant and Toddler Program Federal Appropriations and National Child Count 1987–2023 (updated September 9, 2024), Frank Porter Graham Child Development Institute. University of North Carolina. Available here.

Part C El Funds Come from Various Sources







2023 Part C Program Survey Findings

(n=46 state El programs)

- On average, states reported 55% of Part C children were enrolled in Medicaid, ranging from 0% to 95%.
- Medicaid represented **39% of Part C funding**, ranging from 5% to 79%
- Nearly all (44 of 46) states reported using Medicaid funding for both administration and direct services.
- For the 22 states that reported on funding level, Medicaid totaled nearly \$683 million in financing for Part C EI services.





Public Policy

STATUS OF PROPOSALS TO CHANGE MEDICAID POLITICOPRO POLICY

AS OF APRIL 1, 2025

POLITICOPRO

Trump may 'love and cherish' Medicaid. He and Congress aren't ruling out cutting it.



Even Sen. Tommy Tuberville (R-Ala.), a loyal Trump ally, said during <u>a Fox</u> <u>Business interview</u> on Monday that the Medicaid cuts in the House bill could "decimate" his state, adding that Republicans need to "find a way around it."

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KFF HEALTH NEWS & POLITIFACT HEALTHCHECK

Bill That Congressman Says Protects Medicaid Doesn't — And Would Likely Require Cutting It

Former GOP lawmaker warns of political perils of Medicaid cuts

Larry Bucshon told POLITICO Republican lawmakers need to be careful about the massive cuts they're considering for the program.



Sources: B. Leonard and A. Cancryn, <u>Trump may 'love and cherish' Medicaid. He and Congress aren't ruling out cutting it</u>, POLITICO Pro, February 6, 2025. J. Appleby, <u>Bill That Congressman Says Protects Medicaid Doesn't– And Would Likely Require Cutting It</u>, KFF Health News, March 25, 2025. A. Desiderio, L. Weiss, and M. Cohen, <u>Cheat Sheet: Senators to Watch as GOP Pushes Trump Agenda</u>, Punchbowl News, March 25, 2025. K. Hooper, <u>Former GOP Lawmaker Warns of Political Perils of Medicaid Cuts</u>, POLITICO PRO, March 18, 2025.

Proposals for Medicaid Policy Change

Limits on federal funds

- Some proposals would impose a per capita cap on federal Medicaid funding or use Medicaid block grant.
- Restructures Medicaid financing: States would receive a fixed amount of federal Medicaid funds regardless of actual costs.

Other structural threats

- Impose work requirements.
- Restrict state use of provider taxes.
- Increase rules and red tape as barriers to enrollment.
- Eliminate 90% FMAP matching rate for ACA Medicaid expansion (adults).
- Restrict coverage of immigrants.



Where Things Stand

- Need Concurrent Budget Resolution to pass House and Senate
 - Sets targets for spending and cuts
 - Medicaid cut of at least \$880B under consideration
 - Likely vote April
- Next prepare for Budget Reconciliation bill
 - Details on how to reach spending targets being discussed now

Source:

House and Senate FY 2025 Budget Resolutions As Passed in Both Houses

	Senate Concurrent Resolution 7 (02/21/2025)	House Concurrent Resolution 14 (02/25/2025)
Target Medicaid- related reconciliation spending reductions	Spending reduction target: \$1 Billion (floor) "TITLE II—RECONCILATIONSEC. 2002. RECONCILIATION IN THE SENATE(f) COMMITTEE ON FINANCE.—The Committee on Finance of the Senate shall report changes in laws within its jurisdiction that reduce the deficit by not less than \$1,000,000,000 for the period of fiscal years 2025 through 2034." (link)	Spending reduction target: \$880 Billion (floor) "TITLE II—RECONCILIATION AND RELATED MATTERSSEC. 2001. RECONCILIATION IN THE HOUSE OF REPRESENTATIVES(4) COMMITTEE ON ENERGY AND COMMERCE.—The Committee on Energy and Commerce shall submit changes in laws within its jurisdiction to reduce the deficit by not less than \$880,000,000,000 for the period of fiscal years 2025 through 2034." (link)
Additional instructions	Proposes \$1 billion spending reduction for House "TITLE II—RECONCILIATIONSEC. 2001. RECONCILIATION IN THE HOUSE OF REPRESENTATIVES(d) COMMITTEE ON ENERGY AND COMMERCE.—The Committee on Energy and Commerce of the House of Representatives shall report changes in laws within its jurisdiction that reduce the deficit by not less than \$1,000,000,000 for the period of fiscal years 2025 through 2034." (link)	No proposed Senate instructions
Additional language	Focuses on vulnerable populations "TITLE III—RESERVE FUNDSSEC. 3003. DEFICIT- NEUTRAL RESERVE FUND RELATING TO PROTECTING MEDICARE AND MEDICAID. The Chairman of the Committee on the Budget of the	Consequences of not meeting spending reduction target "TITLE IV—POLICY STATEMENTSSEC. 4002. POLICY STATEMENT ON MANDATORY SPENDING DEDUCTION: (b) POLICY ON MANDATORY



https://geigergibson.publichealth.gwu.edu/comparing-house-and-senate-fy-2025-budget-resolutionswhat-comes-next

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Rebecca and her family traveled to Washington DC in 2024 to participate in Strolling Thunder where they were able to speak directly to Michigan lawmakers about the national child care crisis.

Rebecca's daughter, Indigo– she'll be 2 in May!



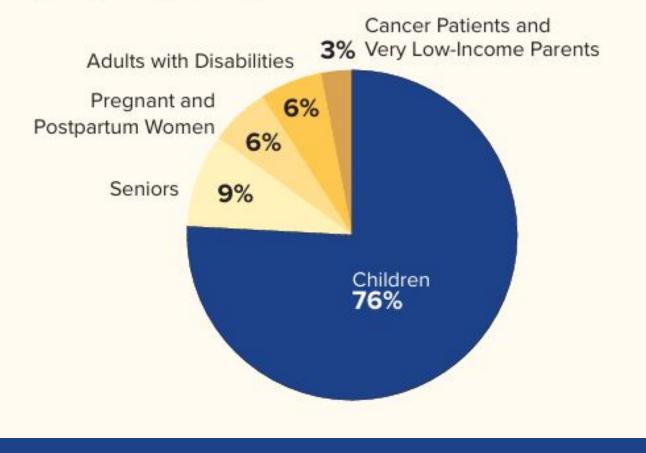




Perspectives from Texas

Adriana Kohler Policy Director In Texas, Medicaid primarily provides health insurance to children, pregnant and postpartum women, people with disabilities, and seniors.

Texas' Medicaid Enrollment by Eligibility Group¹





"Medicaid has been a lifesaver for us."

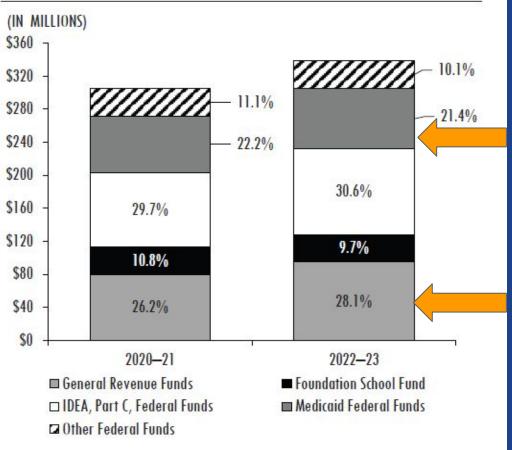


When Catreyal, Camille, and Journii's mom died, their grandma took them in.

Fortunately, Medicaid health insurance covers the kids' annual check ups, trips to the dentist, and medicine when they're sick — plus physical therapy and nurses to help Catreyal manage cerebral palsy.



FIGURE 145 EARLY CHILDHOOD INTERVENTION PROGRAM APPROPRIATIONS BY FUND TYPE 2020–21 AND 2022–23 BIENNIA



NOTE: IDEA, Part C=the federal Individuals with Disabilities Education Act, Part C, Program for Infants and Toddlers with Disabilities. SOURCE: Legislative Budget Board. Texas Early Intervention leverages over a dozen funding sources

Medicaid
Medicaid is a critical source of
federal
funds
funding for Texas' ECI program

• Not included in this graph:

- Some therapy services funded through Medicaid and CHIP
- Private insurance

State funds,

Medicaid

match

including state

Ο

- Family Cost Share
- Locally collected funds



Cautionary Tale

Starting in 2011 and continuing in subsequent years, TX state policymakers made changes that affected infants and toddlers in El

- Decreased state funding for El (11% drop in funding)
- Reduced Medicaid reimbursement rates for children's therapies offered through EI and private home health agencies (speech, physical, occupational therapies)
- Narrowed program eligibility



Cautionary Tale

Impact was devastating

- El providers dropped out (58 providers in 2011; now 40)
- Decline in kids' enrollment (14% drop 2011 2015; much bigger drop in certain areas)
- Reduced staff for Child Find outreach activities
- Increased staff caseloads that threaten program quality
- Participating providers take on larger service areas
- Narrower eligibility meant many toddlers entered El later (2+ years old) and/or kids had higher needs once enrolled



Progress made over the last few years

- Steady boost in state funding over the last few years
- Kids enrollment in El has increased, especially after COVID

Stable funding through Medicaid is critical

"[We cover a] 20,000 mile service area, but don't have enough staff to carry the work and travel."

 ECI provider who participated in the 2023 survey

38% 0

State funding per child for ECI has dropped by 38 percent in real dollars since 2010.



What You Can Do

- Educate policymakers and key decision makers about the value of Medicaid and its role in the health and development of infants, toddlers, and their families.
- Highlight the harmful impacts Medicaid cuts would have on families, early intervention providers, the health system, state budgets and state economies.
- Leverage power of coalitions and partnerships to raise awareness of the importance of Medicaid for children, early intervention, supports for other children with disabilities, child care workforce, and more.
- Partner with groups representing the spectrum of Medicaid beneficiaries (e.g. advocates for seniors, adults with disabilities).



Reactions and Reflections?



For More Information

Website/Say Ahhh! Blog:

https://ccf.georgetown.edu/

State Coverage Data, Info:

- <u>Medicaid's Role in Small Towns and Rural Areas</u> -CCF report, state and county maps <u>Medicaid/CHIP Coverage by Congressional</u> <u>District & by School Districts, 2019-2023</u>

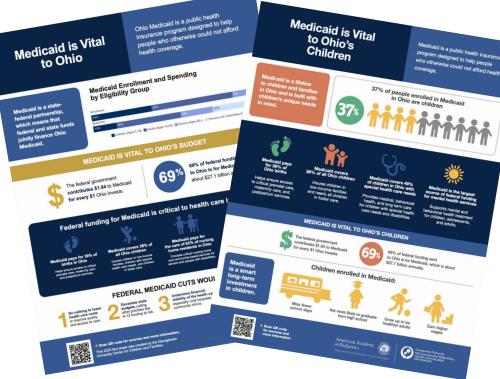
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Medicaid 2025 & Fact Sheets -50 state fact sheets and a growing library of population-specific briefs including Medicaid & Early Intervention