

IDAHO TITLE XXI PROGRAM & AMENDMENT FACT SHEET

Name of Plan:	Idaho Children's Health Insurance Plan
Date Plan Submitted:	February 17, 1998
Date Plan Approved:	June 15, 1998
Effective Date of Plan:	October 1, 1997
Date Amendment #1 Submitted:	October 13, 1998
Date Amendment #1 Approved:	December 4, 1998
Date Amendment #1 Effective:	July 1, 1998
Date Amendment #2 Submitted:	March 21, 2000
Date Amendment #2 Approved:	March 1, 2001
Date Amendment #2 Effective:	January 1, 2000
Date Amendment #3 Submitted:	June 28, 2002
Date Amendment #3 Approved:	September 19, 2002
Date Amendment #3 Effective:	July 1, 2002
<i>Date Amendment #4 Submitted:</i>	<i>February 25, 2004</i>
<i>Date Amendment #4 Approved:</i>	<i>June 10, 2004</i>
<i>Date Amendment #4 Effective:</i>	<i>July 1, 2004</i>

Background

- On February 17, 1998, Idaho submitted a Title XXI State plan to expand Medicaid coverage to optional targeted low-income children up to age 19 with incomes through 160 percent of the Federal poverty level (FPL).

Amendments

- On October 13, 1998, the State submitted an amendment to its approved Title XXI plan to lower the income eligibility standards from incomes through 160 percent of the FPL to incomes through 150 percent of the FPL, retroactive to July 1, 1998. This change was mandated by the Idaho legislature, and the State discussed this change in its original Title XXI Plan proposal.
- On March 21, 2000, Idaho submitted an amendment to its Title XXI plan to implement program design changes to increase coordination of efforts across agencies, simplify the application, and improve media and outreach approaches.
- Idaho submitted its third amendment on June 28, 2002. This amendment updates and amends the SCHIP State Plan to indicate the State's compliance with the final SCHIP regulations.

- *On February 25, 2004, Idaho submitted an amendment to create a separate child health program (CHIP B), to expand coverage to children with family incomes over 150 percent through 185 percent of the FPL.*

Children Covered Under Program

- *In FFY 2003, the State reported that 16,877 children were ever enrolled in its SCHIP program.*

Administration

- The program is administered by the State Medicaid Agency.

Health Care Delivery System

- *The State utilizes its current Medicaid delivery system to provide services to CHIP A and CHIP B enrollees. The delivery system is a primary care case management model.*

Benefit Package

- The standard Medicaid benefits package is offered to the children covered under CHIP A, the title XXI Medicaid expansion. The benefit package includes inpatient and outpatient hospital, inpatient psychiatric, physician services, dental services, other practitioners, clinic services, home health, family planning, lab and X-ray services, prescriptions, and EPSDT services.
- *Benefits provided under CHIP B, the separate child health program, are through Secretary-approved coverage. The benefit package includes well-baby and well-child services, immunizations, emergency services, inpatient and outpatient care, prescription drugs, diagnostic services, dental services, vision services, and inpatient and outpatient mental health services.*

Cost Sharing

- *Premiums are not imposed for families at or below 150 percent of the FPL (CHIP A). For families over 150 percent through 185 percent (CHIP B), premiums are \$15 per member per month. There are no copayments imposed on children in either program.*

Coordination Between SCHIP and Medicaid

- Idaho uses a single application, and children are first evaluated for regular Medicaid. Those who are found eligible for regular Medicaid are enrolled in Medicaid. A child who is eligible for Medicaid is ineligible for the SCHIP.

Crowd-Out Strategy

- *Idaho requires a 6-month period of uninsurance for CHIP B. The application requires information on when the child was last covered by health insurance. Exceptions to the period of uninsurance will be made if the applicant lost private insurance through no fault of their own (i.e., employer driven) or due to hardship. In addition, substitution of coverage under CHIP B is monitored by tracking the number of eligibility denials due to having creditable insurance is tracked and reported.*

Outreach

- Idaho has developed a multi-dimensional approach to outreach including but not limited to:
 - Building on existing regional successes through emphasis on targeted, grass-roots outreach.
 - State-level coordination across all Department of Health and Welfare divisions.
 - Establishment of a virtual resource network for SCHIP.

Financial Information

Total FFY '04 SCHIP Allotment -- \$16,958,002

FFY '04 Enhanced Federal Matching Rate – 79.32%

Date Last Updated: CMSO, FCHPG, DSCHI on May 13, 2004