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## “Revisioning” Medicaid as Part of New York’s Coverage Continuum

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**Medicaid provides health insurance coverage for 4.8 million New Yorkers, more than 25 percent of the people residing in the state. With the implementation of federal reform in 2014, perhaps as many as 1 million additional New Yorkers will secure coverage through Medicaid. By any measure, Medicaid is an important building block of health insurance coverage in New York State.**

The Medicaid Institute at the United Hospital Fund – in a new report authored by Deborah Bachrach, Patricia M. Boozang and Melinda J. Dutton of Manatt, Phelps & Phillips, LLP, in collaboration with Danielle Holahan of United Hospital Fund – explores New York’s Medicaid eligibility and enrollment in the context of federal healthcare reform and the state’s plan to centralize Medicaid administration. “ ‘Revisioning’ Medicaid as Part of New York’s Coverage Continuum” discusses the new opportunities and challenges for New York’s Medicaid infrastructure in the changing environment under federal reform and the state’s new administrative rules.

With the Affordable Care Act’s (ACA’s) passage in 2010, Medicaid is firmly established as the foundation of the nation’s coverage strategy. For New York State, indeed for every state, the challenge is to turn the ACA mandate into an on-the-ground reality. The report suggests that New York is better positioned to respond to the ACA requirements because of its 2010 legislation directing the State Department of Health, the single state Medicaid

agency in New York, to plan and implement a transition to statewide Medicaid administration from the local governments.

Some of the specific opportunities and challenges identified in the report include:

**Simplifying Eligibility Rules and Procedures in Medicaid.** New York's current eligibility and enrollment process for Medicaid and the Children's Health Insurance Program (CHIP) meets few of the ACA's requirements. As a result, the state must evaluate the byzantine web of rules that currently drives its public insurance application, eligibility and enrollment processes and requirements, and align those rules with the new imperatives of simplicity and transparency. New York's ability to reform Medicaid and integrate it into the health insurance market will be inextricably linked to the federal government's resolution of several eligibility requirements that conflict with simplification requirements of the ACA.

**Reforming Medicaid Information Systems.** The Centers for Medicare and Medicaid Services (CMS) has provided substantial guidance on the standards that state electronic eligibility systems must meet to ensure that consumers are able to seamlessly obtain and maintain the full range of health insurance options, including Medicaid and CHIP. New York's existing Medicaid eligibility and enrollment systems do not meet these standards, but with technical assistance and substantial federal dollars to help design, develop, implement and operate the systems required by the ACA, a new Medicaid eligibility system is within reach for New York.

**Leveraging New Federal Funding.** The Federal Department of Health and Human Services has announced significant funding that will support the planning and implementation required to realize the new vision for New York's, and other states', Medicaid programs. While distinct funding opportunities target planning and implementation of systems for Medicaid and for state health insurance exchanges, they share a common mandate to integrate eligibility and enrollment systems.

The report concludes that New York's legislation centralizing Medicaid administration, coupled with the ACA's mandates and funding, holds the

promise of a vastly improved infrastructure to support New York State's health insurance coverage needs.

The full report is available on the United Hospital Fund [website](#).