

**PHYSICAL AND MENTAL HEALTH**

*Vision Statement*

**All children in Indiana deserve a medical home that includes comprehensive, accessible, affordable physical and mental health care.**

THE CHILDREN'S COALITION OF INDIANA WILL ADVOCATE AND SUPPORT THE FOLLOWING:

*Advocacy*

- ◆ Promote efforts to identify, enroll and retain all eligible children and families in Hoosier Healthwise and other state assisted physical and mental health care plans.
- ◆ Promote efforts to expand physical and mental health care coverage to uninsured parents and other adults, ultimately increasing coverage of eligible but previously un-enrolled children.
- ◆ Promote efforts to expand the full continuum of behavioral health services, including community-based systems of care, (e.g., screening, treatment, rehabilitation and recovery) to all children, youth and their families.
- ◆ Support efforts to keep premiums and co-pays affordable for working families accessing state assisted physical and mental health care plans.
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- ◆ Support policies at the state level to include mentoring programs for physicians and nurse practitioners located in rural areas of the state to strengthen infant and child mental health expertise.
- ◆ Support efforts of school communities to develop and promote wellness programs that encourage healthy lifestyles through increased physical activity, availability of healthy foods and beverages, comprehensive standards-based health education, injury prevention awareness and expansion of school-based health services.

*Legislative Action*

- ◆ Support legislation that would serve more eligible Hoosier children on Medicaid Waivers in a more timely manner.
- ◆ Support monitoring of current Managed Care Organizations approval of behavioral health services and streamlining of processes.

*Administrative Action*

- ◆ Promote efforts to leverage maximum federal Medicaid dollars.
- ◆ Promote efforts to fully fund and implement the 317 Plan to eliminate the waiting lists for Medicaid Waivers for home and community-based services.
- ◆ Promote efforts to increase reimbursement rates under Medicaid which encourages provider participation and increases access to care.

*Implications of Non-action*

- ◆ Families will be unable to access or appropriately utilize quality health services.
- ◆ Many children of low-income families will not obtain health care coverage.
- ◆ Children and youth will not have access to needed behavioral health services and will be at increased risk for serious physical and behavioral health conditions.
- ◆ Failure to maximize federal Medicaid dollars contributes to reduce service availability to children and families in need.
- ◆ Overall health care costs and premiums will increase for all Hoosiers as the result of the under- and uninsured's lack of access to quality health services.

## **RATIONALE: PHYSICAL HEALTH AND MENTAL HEALTH**

### **Affordable Health Care:**

Thousands of families are unable to secure employment with health insurance benefits or their incomes make them ineligible for public health coverage programs, such as Medicaid. The number of uninsured children in working families remains a special concern throughout the nation and in Indiana. 14 percent of children living in low-income families are uninsured<sup>31</sup>. It is also estimated that 561,000 Hoosier adults are without health insurance coverage<sup>32</sup>. Uninsured individuals in Indiana create a strain because the cost of treating individuals without health coverage is higher than the cost for those individuals with coverage<sup>32</sup>. Uninsured families often delay needed care, so when treatment is sought emergency rooms are often utilized. Medical conditions often escalate into more serious and complex issues due to not accessing treatment when needed and not receiving preventative care.

In state fiscal year 2009, 754,742 children were enrolled in the Hoosier Healthwise program<sup>31</sup>. This program provides preventative care, doctor and hospital care, prescription drugs, mental health and substance abuse services, dental and vision, etc <sup>33</sup>. For those children and families that qualify for public insurance programs, it is a constant challenge to locate providers in their community that will accept Medicaid as payment for services. Several issues continue to challenge Indiana healthcare programs, such as the low reimbursement levels that are paid to providers, the stigma associated with the programs, and the ill-treatment of recipients. As a result, children's medical needs are being left untreated. All children deserve the opportunity to lead healthy and productive lives and there is a need to ensure that all children are given increased opportunities that will help them access and benefit from quality medical care.

### **Medicaid Waivers:**

There are two types of Medicaid Waiver Programs. One type, for children and adults whose needs are primarily medical in nature, is called the Nursing Facility Level of Care Waiver and includes two Waivers – the Aged and Disabled Waiver (A&D) and the Traumatic Brain Injury Waiver. The other type, for children and adults with developmental disabilities, is the Intermediate Care Facility for the Mentally Retarded (ICF/MR) Level of Care Waiver. There are three Indiana Medicaid Waivers requiring ICF/MR Level of Care – the Autism Waiver, the Developmental Disabilities (DD) Waiver, and the Support Services (SS) Waiver. Nursing Level of Care waivers currently have a waiting list of less than one year. However, ICF/MR waiver waiting lists are currently several years long<sup>34</sup>. This is a needed service for thousands of adults and children and served 28,453 Hoosiers in SFY 2006<sup>35</sup>. However, as of July 2008, 17,897 children and adults are on the waiting list to receive this much-needed service<sup>36</sup>. Families are challenged with caring for their disabled and medically fragile children and adult family members with limited resources and access to available treatments in the community if they are unable to obtain this waiver.

### **Mental Health Services:**

Various barriers exist to families and children receiving services for mental health disorders, such as income, Managed Care systems, and stigma. Effective mental health treatments can be very expensive and many individuals rely on their health insurance coverage to assist in paying. However, due to mental health coverage limits and eligibility guidelines for public and private insurance, many adults and children are unable to cover the cost of the needed treatment and medication. In many instances, as mental health services are not financially viable, children are being shifted to the Department of Corrections or child welfare system to address needs that would be more appropriately dealt with through mental health services.

The Hoosier Assurance Plan (HAP) is the main source of funding for mental health and addiction treatment in the state. This program is based on income eligibility and provides behavioral health care services<sup>37</sup>. Under this program, 50,956 adults were treated for serious mental illness and 29,734 children were treated for serious emotional disturbance<sup>38</sup>.

However, it has been estimated that 247,285 adults and 51,470 children between 9 and 17 have serious mental health issues in the state of Indiana<sup>38</sup>. This exemplifies the need to locate other supportive mechanisms to assist families in obtaining treatment and financing appropriate services.

**Health Care Reform:**

The Children's Coalition of Indiana would like to express support for the implementation of the Patient Protection and Affordable Care Act to the extent the act aligns with the principles supported by the coalition. CCI is supportive of several sections of the act related to children and families and is heartened by the fact that the act helps low income children by maintaining eligibility levels, expanding coverage and increasing benefits. Additionally, the act expands the adoption tax credit and income tax exclusion for taxpayers related to certain expenses related to the domestic adoption of a child. The act also creates grant opportunities or states to promote childhood development and school readiness, while reducing child abuse, neglect and injuries<sup>40</sup>. We believe these factors will greatly contribute to the increased wellbeing of Indiana's children.

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<sup>31</sup> Indiana Youth Institute. (2010). Kids count in Indiana: 2010 data book.

<sup>32</sup> Indiana Family & Social Services Administration. (2010). The facts about uninsured hoosiers.

<sup>33</sup> Indiana Family & Social Services Administration. (2007). Hoosier healthwise: Member information.

<sup>34</sup> Indiana Family & Social Services Administration (2010). Medicaid Waivers.

<sup>35</sup> Bureau of Developmental Disabilities Services (2010). Medicaid Waivers – About Indiana's Developmental Disability, Autism and Support Services Waivers.

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- 36 Division of Disability and Rehabilitative Services. (2007). Indiana fact sheet.
- 37 Division of Disability and Rehabilitative Services. (July 2008). Quarterly financial review.
- 38 Indiana Division of Mental Health and Addiction. (2005). 2004 DMHA prevalence of illness report.
- 39 National Alliance for Mental Illness Indiana. (2007). The state's voice on mental illness
- 40. AHA Regulatory Advisory. (2010). PPACA: Grant Opportunities of Interest to Hospitals.