

**MAINE TITLE XXI STATE PLAN  
FACT SHEET**

<b>Name of Plan:</b>	<b>MaineCare</b>
<b>Date Plan Submitted:</b>	May 19, 1998
<b>Date Plan Approved:</b>	August 7, 1998
<b>Effective Date:</b>	July 1, 1998 (Title XIX expansion) August 1, 1998 (Title XXI)
<b>Date Amendment #1 Submitted:</b>	January 5, 2000
<b>Date Amendment #1 Approved:</b>	March 1, 2001
<b>Date Amendment #1 Effective:</b>	October 1, 1999
<b>Date Amendment #2 Submitted:</b>	April 5, 2001
<b>Date Amendment #2 Approved:</b>	June 6, 2001
<b>Date Amendment #2 Effective:</b>	March 30, 2001
<b>Date Amendment #3 Submitted:</b>	June 28, 2002
<b>Date Amendment #3 Approved:</b>	September 19, 2002
<b>Date Amendment #4 Submitted:</b>	January 9, 2003
<b>Date Amendment #4 Approved:</b>	April 16, 2003
<b>Date Amendment #4 Effective:</b>	July 1, 2002
<b>Date Amendment #5 Submitted:</b>	October 6, 2004
<b>Date Amendment #5 Approved:</b>	January 5, 2005
<b>Date Amendment #5 Effective:</b>	November 1, 2004
<b>Date Amendment #6 Submitted:</b>	June 29, 2005
<b>Date Amendment #6 Approved:</b>	September 22, 2005
<b>Date Amendment #6 Effective:</b>	January 1, 2005

**Background**

- The Maine Children’s Health Insurance Program (CHIP) expanded coverage to children through age 18 in families with incomes up to and including 185 percent of the Federal poverty level (FPL) using a combination of a Medicaid expansion and a separate child health program. The Medicaid expansion covers children aged 1 through 18 in families with income up to and including 150 percent of the FPL; the separate child health program covers children in families with income above 150 percent of the FPL up to and 185 percent of the FPL. The first amendment to Maine’s CHIP state plan increased eligibility up to and including 200 percent of the FPL.

- Maine's Medicaid program covers children from birth through 12 months with family income up to and including 185 percent of the FPL, children aged 1 through 5 in families with income up to and including 133 percent of the FPL, and children aged 6 through 18 in families with income up to and including 125 percent of the FPL.

## **Amendments**

- On January 5, 2000, Maine submitted a state plan amendment to further expand the State's separate child health program to cover children from birth through age 18 in families with incomes above 185 percent up to and including 200 percent of the FPL. The amendment also removes cost sharing for American Indian and Alaska Native children.
- Maine submitted its second amendment on April 5, 2001, to expand the benefit package provided under the State's title XXI program by adding hospice services.
- Maine submitted its third amendment on June 28, 2002. This amendment updates and amends the CHIP state plan to indicate the State's compliance with the final CHIP regulations. This amendment also extends Maine's continuous eligibility period from 6 months to 12 months.
- Maine submitted its fourth amendment on January 9, 2003. This amendment implements health services initiatives (HSI) under the State's 10 percent administrative cap.

The State's health services initiatives are activities sponsored by the State's Bureau of Health under the Partnership for a Tobacco-Free Maine. Specific health services initiatives may include the following:

- Grants to providers to promote health education in schools implementing a school health program that incorporates guidelines for tobacco use, physical activity, and healthy eating and educates on the use of health care.
  - Grants for conducting outreach campaigns to promote community based pregnancy prevention projects and to promote family planning among adolescents where the providers support family life education programs for schools and communities, including education about abstinence and information on preventing sexually transmitted diseases and birth control.
  - Grants for media health campaign directed at discouraging children and adolescents from purchasing tobacco products.
- Maine submitted its fifth amendment on October 6, 2004. This amendment increases premiums for children living in families with income above 150 percent up to and including 200 percent of the FPL (separate child health program).

- Maine submitted its sixth amendment on June 29, 2005. This amendment adds DirigoChoice, a managed care entity, as a service delivery option for the state's title XXI program.

### **Children Covered Under the Program**

- The State reported that 30,947 children were ever enrolled in CHIP in Federal fiscal year (FFY) 2008.

### **Administration**

- Maine's Department of Health and Human Services (DHHS) oversees the administration of the MaineCare program. The MaineCare program contains both title XIX and title XXI programs and both are administered in the same manner. Three Bureaus within DHHS share functional responsibility for the title XXI program: the Office of MaineCare Services (OMS) has primary responsibility for administration and oversight; the Office of Integrated Access and Support (OIAS) determines eligibility; and the Maine Center For Disease Control (Maine CDC) oversees the EPSDT, HSI, and immunization programs and conducts outreach and education activities.

### **Health Care Delivery System**

- MaineCare primary care case management initiative is operational in all 16 counties. MaineCare children covered under title XXI funding access services through primary care case management.
- MaineCare members may voluntarily enroll in DirigoChoice, a managed care entity, if they work for a DirigoChoice eligible business that offers the DirigoChoice plan to its employees and they meet the requirements of an eligible employee. MaineCare members who are dependents of DirigoChoice members may also enroll in DirigoChoice.
- MaineCare members not participating in primary care case management or the DirigoChoice initiative can access services through the fee-for-service system.

### **Benefit Package**

- The current Medicaid health benefit package is provided for both the Medicaid expansion and the separate child health program.

## **Cost Sharing**

- Maine's separate child health program has a sliding scale for premiums for children with family incomes above 150 percent up to and including 200 percent of the FPL according to the following schedule:
  - Above 150 up to and including 160 percent FPL: premiums are \$8 per month for the first child and \$16 per month for two or more children.
  - Above 160 up to and including 170 percent FPL: premiums are \$16 per month for the first child and \$32 per month for two or more children.
  - Above 170 up to and including 185 percent FPL: premiums are \$24 per month for the first child and \$48 per month for two or more children.
  - Above 185 up to and including 200 percent FPL: premiums are \$32 per month for the first child and \$64 per month for two or more children.

## **Coordination between Separate Child Health Program and Medicaid**

- Applicants for both programs use the same simplified eligibility form and enrollment process, which is conducted by the Office of MaineCare Services (OMS). Those determined to be Medicaid-eligible are enrolled in Medicaid. Children enrolled under title XXI criteria will be given distinct eligibility codes in order to track coverage under both programs.

## **Crowd-Out Strategy**

- The joint application requests information about current and prior insurance coverage for the most recent 3-month period. If applicants have lost coverage for reasons related to the availability of CHIP, eligibility for the separate child health program will be denied. Children who lost coverage for reasons unrelated to CHIP will remain eligible. If the coverage termination complies with the following guidelines the children will be eligible for the separate child health program:
  - The cost of the employee's share of family coverage exceeds 10 percent of family income.
  - The employer plan does not pay at least 50 percent of the cost of the child's coverage.
  - The Department determines that good cause exists for dropping the employer-based coverage.

## **Outreach Activities**

- The Department has aired television and radio public service announcements, distributed posters, and developed newsletter articles for inclusion in publications by community and professional organizations.
- The Office of MaineCare Services (OMS) works collaboratively with the Robert Wood Johnson initiative, Covering Kids and Families Campaign to conduct outreach to families.
- Each year the Department of Health and Human Services, in collaboration with the Department of Education, sends applications to each school to distribute to students during the first week of school.
- Ongoing outreach efforts are also conducted by MaineCare Member Services to assist members enroll in the primary care case management benefit within MaineCare.

### **Financial Information**

Total FFY 2009 SCHIP Allotment: \$ 39,271,706

FFY 2007 Enhanced Federal Matching Rate: 75.09%

**Date Last Updated: July 28, 2009**