

Pediatric Access Depends on Payment Rates

It is the position of the American Academy of Pediatrics that health care reform should:

- ★ Recognize that health care providers must receive adequate payment if they are to provide comprehensive quality health services for all children.
- ★ Ensure physician payment is comparable in all commercial and government-subsidized health insurance programs for children.
- ★ Require adequate payment for Medicaid, CHIP, MediKids, and any other health plan created during health care reform is based upon the OBRA 1989 Equal Access Medicaid statutes.
- ★ Enable pediatricians to be paid through a combination of per-member-per-month (PMPM) supplements and through special third-party payer regulations/requirements for Current Procedural Terminology® (CPT) that include ERISA-exempt insurance companies, for providing a real medical home for all children.

The Issue

The Academy will do all that it can to maintain the viability of the commercial health insurance market, while assuring the presence of a safety net government-subsidized health insurance program for children who do not have access to commercial insurance.

The Academy will strongly advocate for Congress to rectify the current sad state of affairs in which the legislative, judicial, and executive branches of the federal government, along with most legislative, judicial, and executive arms of state governments, have ignored the intent of Equal Access such that many Medicaid-eligible children do not have access to the promises of EPSDT (Early and Periodic Screening, Diagnosis and Treatment) services in a pediatric medical home.

Current Status

As part of the CHIP reauthorization signed into law on February 4, a structure was included to help address the problem of payments under Medicaid/CHIP. This structure, known as the Medicaid and CHIP Payment and Access Commission (MACPAC) will provide regular analyses of information on payment to Congress. MACPAC reports will publicize what states are doing with their Medicaid and CHIP funds by providing twice yearly reports on payment rates, their link to access and recommendations for improvements.

The Academy has accumulated data to show that as commercial insurance premiums rise, crowd-out increases, and as the cost of government-subsidized health insurance rises, the number of uninsured children rises. It will be necessary to require parents to enroll their children in Medicaid, CHIP, private insurance, or MediKids if all children are to have health insurance. The Academy is working with other primary care provider organizations, major employers, and administrators of health insurance plans on ways to incentivize continuous quality improvement through the patient-centered medical home.