

Rhode Island KIDS COUNT Budget Analysis – FY 2010 Budget Proposal

Implications for Health Insurance Coverage for Children and Families in Rhode Island

The General Assembly is considering Governor Carcieri's proposed state FY 2010 budget (H-5983), for July 2009 – June 2010.

Budget Provisions that Support Health Coverage for Children

FY10 Budget	Proposal	# of People Affected
Article 28	<p>Provides that non-citizen children who are lawfully residing in the U.S. are eligible for RItE Care coverage. This would restore RItE Care eligibility for immigrant children who are lawfully residing in Rhode Island who lost coverage in June 2008. DHS would need about 3 months after the budget is passed to accomplish all public and administrative tasks necessary for restoration.</p> <p>Upon its recent reauthorization, the federal <i>Children's Health Insurance Program (CHIP)</i> will now provide enhanced federal matching funds for immigrant children who are lawfully residing in the U.S., which was not previously available.</p> <p>NOTE: This article does not restore coverage for immigrant children who are undocumented.</p>	1,600 children
	<p>There were no proposed cuts to RItE Care income eligibility levels for children under age 19 in either the FY09 Supplemental or the FY10 Budgets.</p>	

Budget Provisions that Limit Health Coverage for Children, Parents, and Pregnant Women

FY10 Budget	Proposal	Projected FY 2010 Savings	# of People Affected
DHS Budget Initiative	<p>Eliminates the RItE Care buy-in program for pregnant women with incomes between 250% - 350% FPL (\$44,000 - \$61,600 for a family of three in 2008). Under this program, a pregnant woman pays a monthly premium of \$294.80 (the full cost of coverage) to one of the RItE Care health plans and receives RItE Care health insurance coverage that allows her to obtain prenatal care throughout her pregnancy. The only cost to the state is \$8,378 for each delivery, which is paid to the hospital.</p> <p><i>This budget provision was moved from the Supplemental FY09 budget to the FY10 budget.</i> The proposed implementation date has been moved from May 1, 2009 to at least July 1, 2009 (actual date still to be determined as part of FY10 budget). Women currently enrolled in SOBRA would have their coverage continued; no new women would be enrolled. DHS held a public hearing on April 2, 2009.</p>	<p>\$234,584 general revenues (28 women x \$8,378 per birth)</p> <p>No federal funds saved; program is entirely state funded</p>	26 women are currently enrolled (program is budgeted for 28 women total annually)
Article 40	<p>Eliminates dental coverage for parents over the age of 21 enrolled in RItE Care. Children, pregnant women, children with special health care needs and children in substitute care enrolled in RItE Care would retain their dental benefits, as would disabled adults and the elderly.</p>	<p>\$527,000 general revenues</p> <p>\$1.1M total</p>	38,000 parents
DHS Budget Initiative	<p>Redesigns the Emergency Department (ED) visit benefit to limit all children and adults enrolled in Medicaid (including RItE Care members) to 12 visits to the Emergency Department per year. DHS estimates that less than 1% of all Medicaid enrollees would be affected. However, there are about 200 Medicaid members who use the Emergency Department more than 120 times per year, mostly for mental health and substance-abuse related disorders. This initiative aims to encourage hospitals to work more closely with primary care and behavioral health care providers to develop alternative treatment arrangements for people who use the ED frequently.</p>	<p>\$1.5M general revenues</p>	All RItE Care members would have their benefit limited, but there are few that use it more than 2-3 times per year.