

analysis to advance the health of vulnerable populations

Maryland's Kids First Act: The Use of Tax Forms to Identify Medicaid/CHIP-Eligible Children

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Why Use Tax Information to Identify Eligible Children?

- About 86 to 89 percent of uninsured children who qualify for Medicaid/CHIP live in households that file federal income taxes
- The federal Earned Income Tax Credit (EITC) provides an incentive for low-income earners to file taxes, even when they are not legally obligated to do so
- Nationally, low-income families with children receive the EITC more than any other means-tested benefit
- Maryland has a state EITC that supplements the federal EITC
- Linking Medicaid/Children's Health Insurance Program (CHIP) outreach may prove to be an efficient method for identifying and reaching most low-income families with children who are eligible but not enrolled



The Kids First Act

- Enacted by the Maryland legislature and signed by Governor O'Malley in May 2008
- Requires a Medicaid/CHIP outreach initiative, based on information from state income tax forms
- Requires coordination between the state Comptroller (who collects taxes and is an independently elected statewide official) and Medicaid/CHIP

2008 and 2009 Tax Years

- Per the law, the taxpayer shall report on the state tax return, "the presence or absence of health care coverage," for each dependent child for whom an exemption is claimed
- The Comptroller, not the Medicaid agency, had the authority to create the exact wording on the tax return
- Based on the data on the tax return, the Comptroller <u>must send a Medicaid/SCHIP application</u> and <u>enrollment instructions</u> to taxpayers who indicate dependent children without health care coverage and whose reported income appears not to exceed Medicaid/CHIP financial eligibility limits (300% of the FPL)
- A taxpayer could not be penalized for failing to answer



2009 Maryland Individual Resident Income Tax Form

- Question on tax form
 - "If Dependent Child under age 19 is checked, does child have health insurance now? Yes or no?"
- Data collected on the tax return
 - First and last name of dependent child
 - Child's and tax filers' social security numbers
 - Relationship of dependent to taxpayer
 - Adjusted gross income
 - If child is under age 19
 - If child had health insurance at the time of filing



Medicaid/CHIP Notices Sent to Maryland Taxpayers

| Tax Return Questions | Notices Sent to Taxpayers | | |
|-------------------------------------------------------|---------------------------|------------|---------|
| | < 116% FPL | < 300% FPL | Total |
| 2007 Tax Return | | | |
| Dependent's relationship to you? | 154,709 | 291,881 | 446,590 |
| 2008 Tax Return | | | |
| Is dependent a child? | 62,566 | 89,999 | 152,565 |
| ■ Does child have health care? Yes or no? | | | |
| 2009 Tax Return | | | |
| Is dependent under age 19? | 61,869 | 84,108 | 145,977 |
| ☑ Does child have health insurance now? Yes or no? | , | | , |
| 2010 Tax Return | | | |
| ☑ Is dependent under age 19? | * | * | * |
| ☑ Does child have health insurance now? Yes or no? | | | |
| ☑ Do you allow your tax information to be shared with | | | |
| the State Medicaid/CHIP agencies for the purpose of | | | |
| identifying and enrolling your eligible children in | | | |
| affordable health care programs? (Opt-in checkbox) | | | |



Kids First Act Evaluation

- The scope of the evaluation: a qualitative review of how key decisions were made, what created the momentum to pass the law, and what may be learned from the implementation of the initiative
- How the Maryland's Kids First Act may inform the federal health care reform

Medicaid/CHIP Enrollment Growth

- As of December 2010, Maryland's Medicaid/CHIP programs have added 63,000 children—a 14 percent increase in the past 2 years
- Cannot accurately measure the enrollment growth that can be attributed to the Kids First Act outreach



Lessons Learned So Far...

- Wording of question ("health care coverage" vs. "health insurance")
- Sending applications to those who are income-ineligible (e.g., some self-employed)
 - Health care reform addresses this issue by allowing states to use Modified Adjusted Gross Income in making income eligibility determination
- Tax return filers opting not to answer the question
 - Because of the individual mandate, everyone will be required to provide health insurance information
- Applications received by individuals already enrolled in Medicaid/CHIP
- Concerns about various costs (e.g., mailings, changes in tax forms, updating the data collection system, and comptroller did not have a machine that accommodates a large mailer)



Lessons Learned continued

- Only reaches children whose parents file tax returns
- Small amount of space available on tax form
- Data sharing between the Comptroller and Medicaid was not permitted by the Attorney General
 - Legal issues concerning informed consent
- Unable to track cost-effectiveness or number of people whose enrollment resulted *because* of this outreach method



Advantages of Data Sharing

- Could reduce the size of the mailing by eliminating already-enrolled Medicaid/CHIP children from the outreach
- Could reduce the problems that occur when current Medicaid/CHIP enrollees receive the notice/application and become concerned and confused
- Could allow for better tracking of the individuals who applied as a result of the mailing

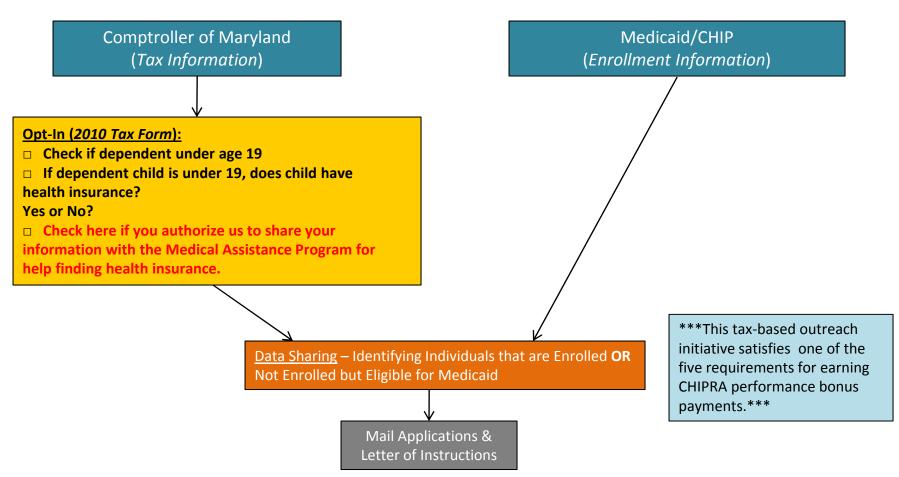


Kids First Express Lane Eligibility Act of 2010

- Passed in April 2010 by the Maryland General Assembly
- Requires the Medicaid agency and the Comptroller's Office to enter into an interagency agreement allowing the sharing of state income tax return information for Medicaid/CHIP eligibility determination
- Notice of this information sharing must be included on income tax return forms
- Comptroller must include a check box allowing individuals to opt in to participate



Kids First Eligibility Process - CY 2011



Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA)

- CHIPRA provides financial incentives for states to increase enrollment in Medicaid and CHIP
- CHIPRA performance bonuses provide states an enhanced Federal Medical Assistance Percentage (FMAP) if states:
 - Increase enrollment relative to their July 1, 2008, baseline level
 - Implement five of eight outreach and enrollment strategies specified in CHIPRA
- In Maryland, the tax-based outreach initiative satisfied one of the five requirements for earning CHIPRA performance bonus funds



The Affordable Care Act (ACA): New Tax-Based Outreach Opportunities

- The ACA allows federal tax return information to be used for state Medicaid/CHIP outreach
- The ACA permits consumers to initiate an eligibility determination by authorizing the disclosure of relevant tax-information directly to the state Exchanges
- Section 1413 of the ACA allows data sharing between specified federal agencies, including the IRS, and "applicable state health subsidy programs," such as Medicaid and CHIP
- Authorizes the Secretary of the U.S. Department of Health and Human Services to develop model data-sharing agreements and enter into agreements to facilitate data sharing

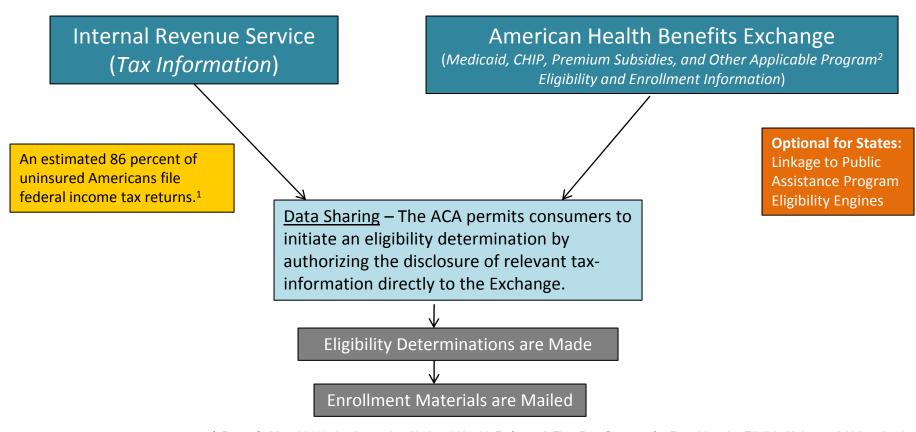


The ACA continued

- Data sharing is limited to the following data:
 - A taxpayer's identity
 - Filing status
 - Number of dependents claimed
 - Modified gross income
 - Tax year
- This information may be used only for purposes of determining eligibility for state Medicaid/CHIP programs
- Data sharing cannot occur until the administrative structures to support it are in place



Federal Eligibility Process



¹ Dorn, S (May 2011). *Implementing National Health Reform: A Five-Part Strategy for Reaching the Eligible Uninsured*. Urban Institute. Washington, D.C.

² Section 1413 of the ACA defines applicable state health programs as Medicaid, CHIP, Premium Tax Credits for Exchange Enrollment, or a Basic Health Option.



About The Hilltop Institute

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