



Center for Medicaid & CHIP Services and Health Affairs: Policy Spotlight with Dan Tsai

Background

On Dec 3, Dan Tsai, the Director of the Center for Medicaid & CHIP Services (CMCS), participated in a [“Policy Spotlight” with Health Affairs](#), where he outlined the Biden Administration’s strategic vision for the Medicaid program. In this interview, Tsai echoed comments made at the [NAMD Fall Meeting](#) and themes from his [recent blog](#) with CMS Administrator Brooks-LaSure.

During the Policy Spotlight, Tsai re-iterated CMCS’ overarching policy priorities: coverage and access, equity, and whole-person care. He also emphasized that CMCS and states will need to work together to develop creative approaches to challenges. Tsai then discussed discrete policy areas, including:

PHE Unwinding

- CMS’ priorities are ensuring that:
 - People who are eligible for Medicaid don’t lose coverage during the unwinding
 - People who are no longer eligible for Medicaid are transitioned to other forms of coverage (Marketplace coverage, commercial insurance, etc.)
- In response to the real operational challenges that states will face, CMS has put out resources including a “punch list” of strategies to prepare for the unwinding.

Access to Care

- CMCS is thinking about churn as an access issue. Medicaid applications, renewals, and notices are often paper-based, and moving towards other modalities of communication may help decrease churn.
- There are questions around measuring access in managed care environments. Distance-based measures don’t actually reflect if a member can get care at a certain practice. CMCS is considering thinking about a “minimum standard” for access across the program.
- There are opportunities to better integrate behavioral health and primary care.

Oral Health

- The data is clear on the benefits of dental care on health outcomes, health equity, and cost. However, access is limited in many areas and many dental providers do not accept Medicaid.
- There is an opportunity for thinking through a “floor” of access, especially in the pediatric space; pediatric dental access is very low across states.

COVID-19 Vaccines

- CMCS is focused on closing disparities in vaccination rates between Medicaid members and the general public. The recent EPSDT mandatory coverage of pediatric COVID-19 vaccine counseling (with 100% FMAP) is one strategy.

Innovation and Accountability

- CMCS has a goal of moving Medicaid members into accountable care relationships, in partnership with CMMI. Fragmented FFS systems don't always work well and wrap-around care can be essential.
- CMCS is agnostic to how these accountable care relationships are structured; instead, they should lead to improvements in health outcomes and the member experience. These types of relationships will look different across different state contexts, but the broader policy conversations will apply to both FFS and managed care environments.
 - Just having a contract with a managed care organization isn't enough; states should think through how to build strong partnerships with, and oversight of, managed care entities to effectuate improvements.
- It is important to include member voice in definitions of accountability. Medicaid and our healthcare system writ large are fragmented, and accessing healthcare is often the hardest for the members with the most complex needs.

Dually-Eligible Members

- CMS is focused on increasing enrollment in Medicare Savings Programs, as these have a fundamental impact on access and affordability. Transforming the duals system is a huge task, but there are strategies that can be used now.

Equity

- Access to coverage is a fundamental component of improving health equity. We also need to think through access and outcomes in specific areas (LTSS, behavioral health, etc.) and across different demographics (race, ethnicity, LGBTQ+ status, etc.).
- CMCS' approach is focused on: 1) measurement; 2) policy; and 3) accountability for closing disparities. Stratification of a common set of metrics will be important for measuring disparities, but we will then need to make concrete investments. Postpartum coverage is one evidence-based strategy for closing disparities.