

Healthcare Reform Implementation Timeline – Medicaid Provisions

3/30/10

	2010	2011	2012	2013	2014	Beyond
Ensuring Medicaid Flexibility for States: States may begin to expand Medicaid eligibility up to 133% of the Federal Poverty Level and receive their current federal matching rate (FMAP).	Apr. 1					
Maintaining CHIP Eligibility: States must maintain current eligibility levels for CHIP through Sept. 2019 (“current” refers to the eligibility levels as of the date of enactment of the health care reform bill). States will receive a 23% increase in the CHIP match rate through 2019. There is no provision to reauthorize CHIP after 2019.	Date of enactment			Increased Match Begins Oct. 1		No provision to reauthorize CHIP after 2019
Medicaid Medical Home Pilot: Provides states the option of enrolling Medicaid beneficiaries with chronic conditions, including serious and persistent mental illness, into a health home. Grants of up to \$25 million will be provided.		Jan. 1				
Improving Health Care Quality and Efficiency: Establishes a new Center for Medicare & Medicaid Innovation to test innovative payment and service delivery models.		Jan. 1				
Partial Hospitalization Providers: Establishes new requirements for community mental health centers that provide Medicare partial hospitalization services in order to prevent fraud and abuse.		Apr. 1				
Increasing Access to Home- and Community-Based Services: Creates a new Community First Choice Option, allowing States to offer HCBS to disabled individuals through Medicaid.		Oct. 1				
Medicaid Emergency Psychiatric Demonstration Project: HHS will establish a 3-year, \$75 million Medicaid demonstration project to reimburse certain institutions for mental disease for services provided to Medicaid beneficiaries age 21-65 who are in need of medical assistance to stabilize an emergency psychiatric condition.		Oct. 1*				

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Medicaid Accountable Care Organization Pilot Program: Establishes a demonstration project that allows qualified pediatric providers to be recognized and receive payments as ACOs under Medicaid.			Jan. 1			Ends on Dec. 31, 2016
Improving Preventive Health Coverage: Provides an enhanced federal match rate for State Medicaid programs to cover evidence-based preventive services with no cost-sharing.				Jan. 1		
Payments to primary care physicians: Requires that Medicaid payment rates to primary care physicians for primary care services be no less than 100% of Medicare payment rates in 2013 and 2014. Provides a 100% federal match for meeting this requirement.				Jan. 1		
Increasing Access to Medicaid: Medicaid eligibility in all states will increase to 133% of poverty for all non-elderly individuals.**					Jan. 1	

*Funding is authorized for FY 2011. Actual implementation date will depend on regulations to be issued by HHS.

**From 2014-2019, federal match rates for the expansion vary by year and by whether the state is considered an “expansion” state. By 2020, the federal government will bear 90% of the costs of the expansion in all states.

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