

Marv's Consulting Service

Specializing in EPSDT Services for Children

TAMES Health Resource Service Management, Inc of Illinois

The Honorable Senator Richard Durbin

March 20, 2017

Dear Senator Durbin,

This letter is a request for your co-sponsorship with Senator Tammy Duckworth of the legislative proposal entitled "Investment in Our Children Act of 2017". The proposal is an amendment to provide Medicaid-EPSDT coverage for all children from birth through age 18. A full description of the amendment and its application by CMMS is contained in the enclosed booklet.

Objective: Establish a firm / solid federal Medicaid funding base for EPSDT (Early Periodic Screening, Diagnosis and Treatment) services defined as Early Intervention /Prevention services for our children. The federal foundation base is to be at 80% of the allied health care service costs. Local education agencies, community agencies, etc. would be the providers of the services based upon their identification of the children's health and developmental needs within their communities.

Example: TAMES/Health Resource Service Mgmt, Inc., a billing service agency in Illinois, files and processes allied health care service claims with Medicaid for approximately 120 local education school districts and a few special education cooperatives in Illinois. This service addresses the allied (related) health care services to be provided to students with disabilities per IDEA. Allied Health Care service claims have been filed on those students with Medicaid coverage and the service has generated in excess of \$9 million Medicaid (at 50% FMAP) each year (FY 2013 thru FY 2015) for the education agencies. Without these funds, many of the school districts would have had to further limit these allied health care services due to extremely limited financial resources. All the Medicaid funds have been utilized for the continued provision of the IDEA services.

Projected Impact:

- a. The establishment of a Medicaid-EPSTD Services Recipient category enrolling all children (birth through age 18) and a federal funding foundation at 80% of Allied Health Care service cost is required for local communities to address the health and developmental needs of their children. The growth and development of our children must be available over multiple years as each child grows from birth – infancy – childhood – adolescence to address their health care needs to age 18.
- b. The local communities investing 20% of the cost will identify and implement the health care services needed for their children. The EPSTD - early intervention / prevention services have proven to be very cost effective and positive for our children.
- c. The multi-disciplinary allied health care service providers engage a holistic perspective of every child, whether in standard education or special education. This perspective recognizes each child’s potential to participate in his / her educational program and development toward adulthood.
- d. Specifically note the federal Medicaid-EPSTD Services includes the **mental health** services that our children need. I am convinced that had the Medicaid funds been available in CY 2012 the tragic event at **Sandy Hook Elementary School** could have been prevented. Social Workers and Psychologists key into the withdrawn and ostracized students who later may commit a violent act in retaliation. How did the non-availability of mental health services contribute to this tragedy?
- e. EPSTD is a federal mandate enacted by Congress in 1988 (Public Law 101-239), and Medicaid coverage is limited to Medicaid eligible recipients, and the health care reimbursement rate is set by the FMAP. This proposal would create a Medicaid Recipient category, “Medicaid-EPSTD Services,” enroll all children (birth through age 18), and establish the “Medicaid-EPSTD Services” reimbursement at 80% of the allied health care service costs as a national commitment. **Note:** The “Medicaid-EPSTD Service” reimbursement could only be assessed if the service has been provided to an infant, child, or adolescent.

Legislative Action:

I am confident this proposed amendment can be inserted into a “must pass” piece of legislation during this congressional session. I further believe Republican senators will endorse it as means to assist the local education districts in their respective states. In addition, the EPSDT mandate enables each local community to implement the early intervention / prevention programs based upon their identification of the developmental needs of their children.

The proposal has been reviewed by CMS (see their letter on page 17). I view it as an endorsement. I have also submitted the proposal to Senators Bernie Sanders and Elizabeth Warren and received positive responses.

A Democratic Supporter:

During the past few years I have been a contributor to your campaign fund, to the Democratic Senatorial Congressional Campaign Committee (DSCC), to the Democratic Congressional Campaign Committee and to other Democratic organizations.

Closing Comments:

1. I appreciate your consideration of this proposed legislative amendment and its enactment for our children.
2. I’m looking forward to receiving your response.
3. Finally, in June 2016, I retired as the President of HRS Mgmt, Inc and moved to Sioux Falls, South Dakota, to be near our grandchildren. I remain involved in the politics of Illinois as this is the home base for HRS Mgmt, Inc and I am an ownership partner of the corporation.

Download a PDF copy of “Investment in Our Children Act of 2017” at TAMESHRS.Com

Sincerely,

Marv Roelofs, Consultant

CC: Senator Tammy Duckworth and Senator Charles Schumer