



Men's Health Network
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To: Medicaid Directors

I am writing today on behalf of Men's Health Network (MHN), a national non-profit organization whose mission is to reach men and their families where they live, work, play and pray with health prevention messages, screening programs, educational materials, advocacy opportunities, and patient navigation. In consideration of the large number and health status of Americans who will become newly eligible for Medicaid under health care reform, I would like to encourage you to initiate a "Welcome to Medicaid" physical for new enrollees in your state.

We are joined in this request by HealthHIV and the Veterans Health Council. The Veterans Health Council works to insure that veterans get the proper diagnosis based on the impact of their particular military service. HealthHIV advances effective prevention, care and support for people living with, or at risk for, HIV/AIDS by providing education, technical assistance, and health services research to organizations, communities and professionals.

Detecting chronic or pre-chronic conditions in new Medicaid enrollees will result in significant savings in both the short- and long-term, as more costly procedures and emergencies can be avoided with appropriate primary care. As you know, newly eligible Medicaid enrollees under the Affordable Care Act will be paid for by the federal government at a rate of 100% during the first three years of implementation (2014-2016). It is vital to begin utilizing health-improving measures such as a Welcome to Medicaid visit in the beginning so that the cost savings of earlier detection and more effective treatment can be realized as the federal share of new enrollee costs gradually declines. For the substantial population of new enrollees who have undiagnosed or neglected health issues due to their previous lack of coverage (see attachment), cost savings of identifying and treating these issues before they progress could be particularly large.

According to the U.S. Census Bureau, 49.9 million Americans (16.3%) were without health insurance in 2010. It is expected that by 2019, Medicaid enrollment will increase by 16 million people, or 27%. A 2005 report of the Urban Institute and University of Maryland, Baltimore County found that almost half of all uninsured, non-elderly (under 65) adults reported having a chronic health condition. Nearly the same number had forgone needed medical care or prescription drugs because they could not afford them. As Medicaid coverage is extended to nearly all individuals at or below 133% of the Federal Poverty Level, it will be crucial to identify treatments for patients' existing diseases and implement preventive care to mitigate their risk factors for other conditions. The Welcome to Medicaid physical would be a very effective first step in doing so.

A model for this approach already exists and is replicable for Medicaid. The "Welcome to Medicare" physical provides an important baseline for new enrollees to monitor their health. From this visit, Medicare patients and their doctors can develop a personalized plan to prevent diseases and encourage healthy living. Further, by reviewing the patient's personal and family

history, doctors can tailor health information and important screenings to each patient. A similar process for new Medicaid enrollees would assist doctors in providing more effective care for their patients. Establishing a personal health baseline is particularly critical for patients who have had little or no access to health care, which will be the case for many new enrollees.

Preferably, physicians can be prepared to conduct the Welcome to Medicaid physical when a patient makes their first visit under Medicaid. When setting the appointment, providers can make patients aware of the physical and schedule it for their visit. A second option would be to set a follow-up appointment for the physical when the newly eligible patient first enters the system due to an emergency room visit or doctor's visit for an injury, flu or other health issue.

The provision of the highest quality of health care while controlling costs is the concern of all Americans. Men's Health Network is committed to being a part of this dialogue. I have enclosed two documents for your reference. The first is a profile of low-income uninsured Americans who will become eligible for Medicaid beginning in 2014. The second includes a list of recommended components for the Welcome to Medicaid physical, such as age-appropriate screenings. If we can be of assistance as your agency confronts the upcoming challenges and opportunities of health care reform, please feel free to contact us.

Sincerely,

Brandon Leonard, M.A.
Men's Health Network

Financing for Newly-Eligible Medicaid Enrollees under PPACA

Under the Patient Protection and Affordable Care Act (PPACA), Medicaid eligibility will be extended to all groups of people under age 65 with income up to 133% of the Federal Poverty Level (FPL) who are not otherwise eligible for Medicaid. This includes childless adults, parents and children. The federal government will cover the cost of most newly eligible Medicaid beneficiaries at 100% for calendar years 2014 through 2016. The federal matching rate will decrease incrementally, to 95% in 2017; 94% in 2018; 93% in 2019; and 90% from 2020 forward.¹

Recommended Components for the “Welcome to Medicaid” Visit

Men’s Health Network and our partners recommend that the “Welcome to Medicaid” physical include the following age- and lifestyle- appropriate elements:

- Clients should be asked if they have ever served in the U.S. military. If “yes”, then they should be asked when, where and MOS (military occupational specialty).
- Vision test
- Hearing test
- STD tests
- STD counseling
- HIV test²
- Blood pressure test
- Cholesterol test
- Blood glucose test and diabetes information
- Body Mass Index measurement
- Bone density (for women and men of appropriate age)
- Cancer screenings (depending on age/race/ethnicity/gender)
 - Breast cancer
 - Prostate cancer
 - Skin cancer
 - Colorectal cancer
- Preventive immunizations, if not current
- Spirometry (for lung function)
- Smoking assessment
- Mental health evaluation
- Substance abuse assessment
- Dentist visit for oral exam and teeth cleaning



¹ Kaiser Commission on Medicaid and the Uninsured. (May 2010). *Medicaid Coverage and Spending in Health Reform: National and State-by-State Results for Adults at or Below 133% FPL*.

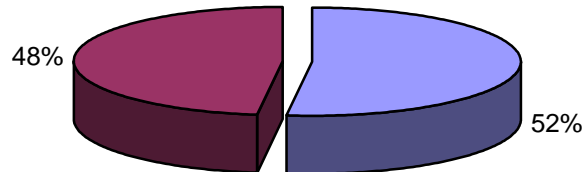
² The Centers for Disease Control and Prevention's, "Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings," advises routine HIV screening of adults, adolescents, and pregnant women in health care settings in the U.S. They also recommend reducing barriers to HIV testing. Found at: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5514a1.htm>

Profile of Potential New Medicaid Beneficiaries under PPACA

An estimated 17.1 million American adults with income at or below 133% of the Federal Poverty Line (FPL) are uninsured.¹ The following charts provide basic demographic information about this population.

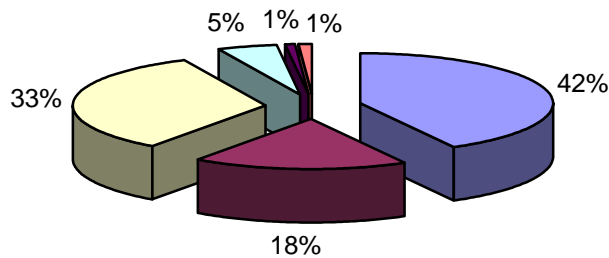
Uninsured Adults at or below 133% FPL, 2008²

By Gender



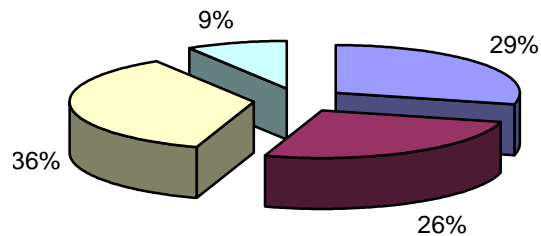
■ Male ■ Female

By Race



■ White ■ Black
 ■ Hispanic ■ Asian/S. Pacific Islander
 ■ Amer. Indian/Alaska Native ■ Two or More Races

By Age



■ 19-25 ■ 26-34 ■ 35-54 ■ 55-64

- over -

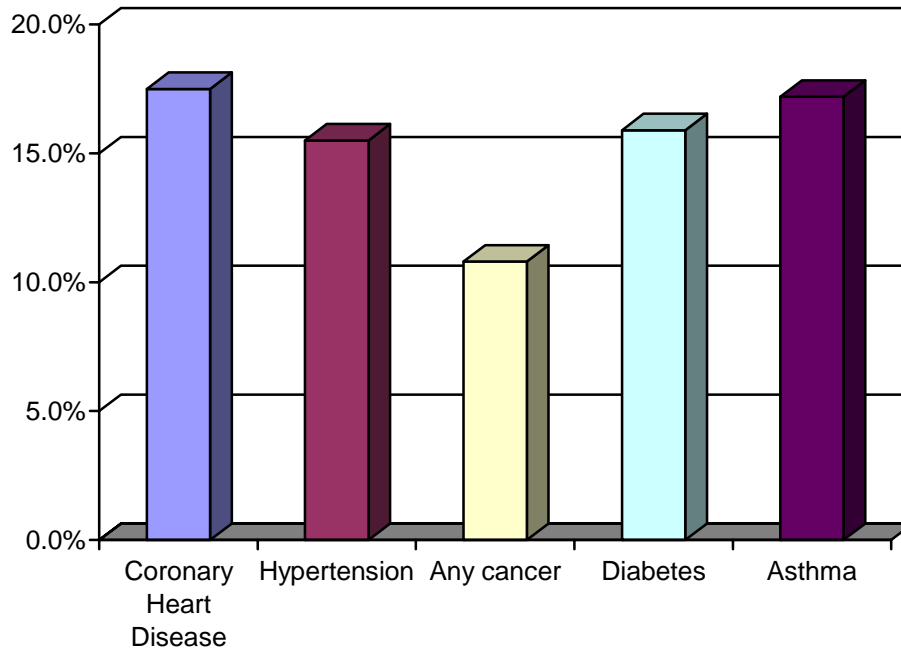
¹ Kaiser Commission on Medicaid and the Uninsured. (April 2010). *Expanding Medicaid under Health Reform: A Look at Adults at or below 133% of Poverty*. Bureau's March 2008 and 2009 Current Population Survey, Annual Social and Economic Supplements.

² The Henry J. Kaiser Family Foundation, Focus on Health Reform. (February 2010). *Expanding Medicaid: Coverage for Low-Income Adults under Health Reform*.

Chronic Health Conditions among the Non-elderly Uninsured

The following data were compiled from the Summary Health Statistics for U.S. Adults: National Health Interview Survey (NHIS), 2010.³

Uninsured as percentage of adults under 65 with selected chronic conditions



The NHIS data also indicate that among uninsured adults under age 65:

- 28.3% are obese, a significant risk factor for many chronic conditions including diabetes and heart disease
- 51.2% do not have a usual place of care
- 30.2% have not had contact with a doctor or other health care professional in at least two years
- 55.5% have never been tested for HIV



- over -

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³ U.S. Department of Health and Human Services. National Center for Health Statistics, Centers for Disease Control and Prevention. (January 2012). *Vital and Health Statistics, Series 10, Number 252, Summary Health Statistics for U.S. Adults: National Health Interview Survey, 2010.*