Improving Access and Quality of Care to Children in the Medicaid Program in Texas

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Health Policy Fellowship 2007-2008

Abstract

In the Texas Medicaid system, coverage does not equal accessible, quality medical care, at least not yet. In 1993, a class action lawsuit, Frew v. Hawkins, was filed against the state alleging that Texas did not adequately provide Medicaid Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services. The main arguments of the lawsuit stemmed from inadequate notification of parents of potential Medicaid benefits for their children, problems accessing those benefits after qualification, and lack of assistance with transportation. The agreement allocated $707 million per year ($1.8 billion in state and federal funds combined), to improve outreach and education to Medicaid-enrolled families, to increase physician and dental reimbursement rates, and to improve the availability of medical and dental services in rural and border regions of the state.

The additional funding of children’s Medicaid in Texas set forth in the Frew vs. Hawkins lawsuit will increase physician and dental participation in the children’s Medicaid program. Effective patient-centered case management will identify children who have fallen behind in required physical and dental exams and provide all required social services including non-emergent medical transportation. Concentrating on case management and increasing the number of Medicaid providers of dental and medical services will positively affect the future health of children in the state of Texas and will meet the objectives of the mandates set forth in Frew vs. Hawkins.