The Annals of Health Law is proud to present the Seventh Issue of our online counterpart, Advance Directive. Consistent with our goal of promoting student scholarship in the area of health law, this Issue features articles corresponding to the topic of the Fifth Annual Symposium on Access to Health Care presented by the Beazley Institute for Health Law and Policy: Reinventing Medicaid in a Post-Health Reform America.

The Issue begins by examining current conditions in the United States that demonstrate the need for Medicaid coverage. First, we analyze how the rise in unemployment over the past several years has impacted Medicaid spending. Second, we discuss how reimbursement payments have affected the relationship between Medicaid beneficiaries and primary care physicians.

The Issue then goes into specific provisions and approaches within Medicaid reform. Our authors first analyze the ambiguity of the equal access provision in the Medicaid Act and how courts across the country have interpreted it inconsistently. Next, our authors discuss the role of managed care in Medicaid. We discuss the various managed care models operated by the states, including Vermont’s unofficial pilot program as its own public managed care entity for Medicaid. With primary care case management (PCCM) as a popular managed care model for the states, our authors analyze the successes and failures states have experienced in employing this model. Because primary care is emphasized in the managed care model, we then evaluate the difficulties that medical home implementation faces in transforming the primary care practice and how medical homes may be a viable primary care practice. In addition, our authors examine the managed care model and its role in Medicaid long-term care.

Next, our authors address the impact on individual states of Medicaid provisions within the Patient Protection and Affordable Care Act (PPACA). First, we examine how the Federal Medical Assistance Percentage (FMAP) will impact states’ budgets. Specifically, we discuss President Obama’s proposed “blended” FMAP and the strain it would impose on states as
Medicaid enrollment increases as a result of the PPACA. We then discuss the PPACA’s maintenance of eligibility (MOE) provisions. In particular, our authors highlight the number of children covered under the provision, despite the cost it imposes on states.

The Issue then examines the impact that Medicaid reform has on specific populations. First, we address how the PPACA will expand Medicaid coverage for the mentally ill and the shortfalls in coverage for those with mental illness. Second, our authors analyze the five-year Medicaid ineligibility period for legally residing immigrants, along with initiatives undertaken by states to provide state-funded replacement programs during that period.

Next, our authors discuss Medicaid reform in specific states. We first compare the Medicaid plans in Ohio and Arizona to illustrate two vastly different approaches by the states. Ohio has focused on administrative and structural changes, while Arizona has focused on spending cuts. Then, our authors analyze Medicaid spending and reform in Illinois, focusing on the major reforms implemented by House Bill 5420.

Finally, the Issue concludes by examining the impact of making Medicaid a completely federal program, instead of a jointly administered program with individual states. Our authors suggest that Federalizing Medicaid would be advantageous for cost and quality reasons.

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We hope you enjoy our Seventh Issue of Advance Directive.
Sincerely,

Seth D. Knocke  
Advance Directive Editor  
*Annals of Health Law*  
Loyola University Chicago School of Law