

New data aggregate Medicaid coverage criteria and show wide variation in state coverage for podiatric care

2 October 2020

New data published to LawAtlas.org today capturing details of state Medicaid coverage for podiatry care finds state Medicaid coverage for podiatric services varies widely between jurisdictions.

These data fill a vacuum of information about the variation in who is covered; what services are covered; what steps a recipient might need to take in order to get care; how much money, if any, the beneficiary might need to contribute toward the cost of their care; and how much physicians can expect to the reimbursed for care provided.

That information was previously spread across statutes, administrative regulations, agency documents, fee schedules, provider manuals, beneficiary informational materials, and websites.

"This lack of standardization has been problematic because it makes it exceedingly difficult for researchers and <u>policy-makers</u> to compare <u>coverage</u> and outcomes in one state to another. It is often a challenge just to locate coverage information in a single state," said lead researcher Tom Brewer, Ph.D., MJur, CHC, CPHLR Fellow and Associate Professor of Health Policy and Management at Kent State University. "By compiling the data in one place, we make it possible to undertake more rigorous and impactful research into the relationships between podiatric care and improved <u>clinical outcomes</u> as well as <u>cost savings</u>."

The data, which are available for free on LawAtlas.org and produced using policy surveillance, present state-level statutes, regulations, and program documents that outline state Medicaid coverage schemes for podiatric care as of October 1, 2020. Other findings include:

- Nine jurisdictions do not provide Medicaid coverage for podiatric care beyond the federally required minimums.
- Of the 42 states that generally provide podiatric coverage, 25 have laws that explicitly require prior authorization for Medicaid coverage of podiatric services, and 19 have laws that dictate some form of co-pay associated with Medicaid coverage of podiatric services.

"The genesis of this project was the so-called Great Recession in 2007 when we saw cuts in Medicaid coverage for podiatry services. Over the past decade many of the budgets were restored but now, with the COVID-19 pandemic, we're seeing states start to look at making cuts again" Brewer explained. "There is mounting evidence to support the importance of providing podiatric services, particularly for low-income individuals who disproportionately suffer from chronic diseases like diabetes, that often affect the feet."

More information: Brewer, T. Temple University Center for Public Health Law Research Policy Surveillance Program. <u>lawatlas.org/datasets/medicaid ... re-a-national-</u> <u>survey</u>

This study was funded by The Podiatry Foundation.

Provided by Temple University Center for Public Health Law Research



APA citation: New data aggregate Medicaid coverage criteria and show wide variation in state coverage for podiatric care (2020, October 2) retrieved 13 September 2022 from https://medicaid.coverage criteria and show wide variation in state coverage for podiatric care (2020, October 2) retrieved 13 September 2022 from https://medicalxpress.com/news/2020-10-aggregate-medicaid-coverage-criteria-wide.html

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