

April 11, 2018

ABOUT

Medicaid Expansion Helps People with Disabilities, Too

The budgets passed by the Virginia House and Senate highlight two different pathways to improve health care access for the commonwealth: one concrete and funded, the other aspirational. While the House has welcomed federal funds to extend health insurance to hundreds of thousands of low-income Virginians, the Senate aims to prioritize individuals with intellectual and developmental disabilities (ID/DD). Unfortunately, the Senate does not have the funding to implement their priorities. But if the Senate agrees to the Medicaid expansion proposal put forth by the House, they could use the savings from that to also help more individuals with ID/DD. The budget impasse could transform to a win-win situation for both chambers.

Virginia currently has three waivers through the existing Medicaid program to provide home and community-based services for people with ID/DD. These waivers provide a variety of supplemental care and supports -- such as employment and day services, crisis support, assistive technology, nursing, and personal assistance -- to people who generally have basic health coverage through employer-based coverage, Medicaid, Medicare, or FAMIS. In order to receive these supplemental services through the Medicaid program, an individual must meet eligibility requirements and a waiver slot must be available.

The Senate claims to prioritize these individuals by including language in the budget, reflecting legislation by the Senate (SB915), to create a Priority Needs Access Program. This program would provide healthcare to people with serious mental illness making up to 138 percent of the federal poverty level (\$16,643 for one person in 2018) and increase eligibility to others who have specific medical and mental health needs. But the program would be limited to 20,000 people. The bill and the corresponding budget language also direct the Department of Medical Assistance Services to add waiver slots to provide home and community-based services to nearly 2,300 people with ID/DD, contingent on available funding.

But there is no funding allocated to make this plan a reality. The legislation states that this program will become effective if funds become available. And here's the thing: funds could become available if the Senate chooses to accept federal funding to expand the Medicaid program.

By accepting federal funds to expand Medicaid and using a provider assessment to cover the state's costs of expansion, the House estimates a savings of \$371 million dollars for the state over the next two years. With the savings, the House chose to invest almost \$270 million more in K-12 and higher education than the Senate, as well as additional investments in state and local police departments and economic development.



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The Senate has many options. One is to accept federal funds to expand Medicaid alongside a provider assessment. The savings from that could more than pay for the 2,300 waivers included in SB915 and at the same time would be providing access to quality healthcare to nearly 400,000 Virginians. The House and Senate could also recognize the strengths in each budget and distribute the estimated savings over many areas of investment -- funding additional waiver slots beyond the 825 already included in the governor's, House, and Senate budgets, as well as additional investments in education and public safety as proposed by the House.

In other words, the Senate can not only fund its goal, it can do even more for more people. Think of Medicaid expansion like a curb cut -- the place in the sidewalk that serves as a ramp to allow easy access between the sidewalk and the street. Originally designed to help people in wheelchairs (one of the first ones was installed in Michigan in 1945 to assist WWII veterans), today, parents with strollers, small children, people with limited mobility, and others also benefit. Like a curb cut, Medicaid expansion would remove a barrier to accessing health care for low-income families, and it could also help people across the commonwealth in many ways. But only if lawmakers are willing to put money where their aspiration is.

-- Sherri Egerton, *Communications & Research Assistant*

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