

ENHANCING MEDICAID AND ENSURING A STRONG SAFETY NET

THE ISSUE

Public health insurance programs such as Medicaid and the Children's Health Insurance Program (CHIP) are the foundation of our nation's safety net and provide necessary health care services to working families, children, the elderly and the disabled, many of whom would be uninsured in the absence of a strong and vital Medicaid program. Medicaid provides health coverage for over 90 million individuals and is also a major source of financing for long-term care and a primary funding source for America's safety net institutions. That includes many Catholic hospitals and nursing homes that serve a disproportionate share of the low-income, uninsured and underinsured in their communities every day. The state option to expand Medicaid coverage to vulnerable individuals who do not have access to nor can afford health care coverage is a critical step to ensuring health care coverage for all. These vulnerable individuals are low-income working parents with incomes below 138% of the poverty line; their children, who are more likely to be enrolled in programs for which they are already eligible when their parents are also covered; adults with no children who cannot get Medicaid, no matter how poor they are; and all races, but with minorities disproportionally represented. Under the Affordable Care Act's (ACA) Medicaid expansion, everyone with an income below 138% of the federal poverty level (approximately \$15,800 for an individual), regardless of their age, sex or parental status, would qualify for Medicaid coverage.

MINISTRY TRADITION

For decades CHA and our members have carried the message that health care is a basic human right essential to human flourishing, and we have advocated policies to ensure that everyone has access to affordable health care. We are inspired by the wisdom of the social doctrine of the Church, which teaches that each person is created in the image of God; that each human life is sacred and possesses inalienable worth; and that health care is essential to promoting and protecting the inherent dignity of every individual. The first principle in our *Vision for U.S. Health Care* affirms our call to pay special attention to the needs of the poor and the vulnerable, those most likely to lack access to health care, in our journey towards affordable, accessible health care for all. This commitment is why the Catholic health ministry has strongly supported public health care programs like Medicaid and CHIP.

CHA'S POSITION AND ACTIVITIES

The Catholic Health Association (CHA) supports efforts to strengthen our nation's public health insurance programs. The fundamental structure of the Medicaid program as an entitlement for the low-income, the elderly and the disabled in our country must be preserved and strengthened. Today, Medicaid provides a safety net for its beneficiaries and states as well through the program's commitment to matching federal funds. CHA advocates a strong federal presence in Medicaid, overall expansion to all low-income families and individuals and restoration of benefits to legal immigrants. CHA supports several ways to preserve and strengthen Medicaid, including:

Preventing Medicaid Coverage Loss as States Begin Their Redetermination
Process— With the changes made in law by the Consolidated Appropriations Act of 2023,

states can begin the process of redetermining eligibility for beneficiaries who were prevented from losing their coverage during the public health emergency. Through CHA's Protect What's Precious campaign, we continue to work with our members and policy makers to ensure that millions of individuals, families and children do not lose their Medicaid and CHIP coverage.

• Medicaid Financing and Funding – CHA continues to urge Congress to reject cuts and structural changes to Medicaid funding as part of any federal deficit reduction effort or program restructuring. Congress must maintain the Medicaid entitlement and continue to provide the program with adequate and sustainable funding to ensure the ability of health care providers, including providers of long-term care services, to maintain quality and compassionate care for the over 90 million vulnerable Americans who rely on Medicaid for their health care.

CHA is specifically opposed to the capping of federal financing through a "per capita cap" and block-granting of the Medicaid program to the states through regulation, state waivers or legislation. Such proposals simply shift the cost burden onto individual beneficiaries, health providers, and local and state governments. While this may seem to be a solution to reducing the federal deficit or "improving" the Medicaid program, the long-term effects of this strategy will be to further erode the safety net and jeopardize the health and economic safety of millions of Americans.

CHA also supports initiatives in Congress to protect hospitals from cuts in the Medicaid Disproportionate Share Hospital (DSH) program that would remove billions in funding to providers of health services to our most vulnerable. While language adopted in the Consolidated Appropriations Act of 2021Act eliminated some of these cuts and delayed the remainder, Congress must ensure a longer-term solution beyond Fiscal Year 2023.

- Improve access and care coordination—CHA strongly supports efforts to coordinate and integrate person-centered health care services along the continuum of care and greater use of telehealth, medical homes, care coordinators and chronic care management, especially for those dually eligible for Medicaid and Medicare. CHA supports the *Stabilize Medicaid and CHIP Coverage Act*, which proposes a 12-month continuous enrollment period allowing beneficiaries to maintain their coverage and minimizing disruptions in their care.
- Behavioral Health Care Services—CHA supports efforts to improve access to behavioral health care services in all care settings. CHA continues to support extending and expanding the Certified Community Behavioral Health Clinics (CCBHCs) demonstration program which expands access to mental health and addiction care in community-based settings.
- Extending Postpartum Coverage for a Full Year—CHA calls on Congress to permanently extend Medicaid postpartum coverage for a full year and increase the federal matching rate consistent with recommendations from the non-partisan Medicaid and CHIP Payment Advisory Committee (MACPAC). Medicaid provides critical health care coverage

for pregnant women, covering 43% of births nationwide. However, Medicaid coverage for pregnant women is not comprehensive and also ends roughly 60 days after delivery in most states. We encourage states to take up the state option created under the American Rescue Plan Act and made permanent in the Consolidated Appropriations Act of 2023.

- Support Long Term Care Services and Supports and Home and Community Based Services—CHA members have served our nation's seniors and disabled communities for decades. This work is essential as our population continues to age. Medicaid is the nation's largest payer of long-term supports and services and it is imperative that resources are invested to better support low-income individuals and their families needing long-term care.
- Medicaid Expansion—CHA continues to support the expansion of the Medicaid program to everyone under 138 percent of the federal poverty level. We welcome the new financial incentives for the remaining non-expansion states in the American Rescue Plan, which would guarantee coverage to an estimated four million individuals. We also support initiatives that immediately address the Medicaid Coverage Gap, to ensure that the more than 2 million Americans residing in non-expansion states get the coverage they need:

Health Disparities—Expanding Medicaid helps us to achieve health equity. The existence of racial and ethnic disparities in health outcomes, access to care and receipt of quality health care is in direct opposition to the mission and social teaching of Catholic health care.

Medicaid and Hospitals—The Medicaid expansion is also crucial for our hospitals, many of which are struggling to continue to provide care to those who can afford to pay little or nothing. While Medicaid reimbursement rates are not what they should be, it is helpful to get any payment for care that would otherwise be provided for free. Making sure states maintain the option to expand Medicaid is important for both low-income uninsured patients and the hospitals that serve them.

Vulnerable Populations—By supporting Medicaid expansion, the Catholic health ministry once again is called to stand up for the least among us. We urge lawmakers and policy officials at the state and federal levels to protect and expand the availability of Medicaid for families who cannot afford access to health care without it. CHA is committed to ensuring that low-income populations retain and gain the access to coverage extended to them under the ACA. CHA also continues to urge Congress to protect Medicaid funding for the territories which face significant funding shortfalls because of expiring ACA funds.

■ Pushing back against work requirements—CHA continues to push back on harmful work requirement provisions in state Medicaid waivers, which have led to loss of coverage for beneficiaries. CHA has joined in an amicus brief with several provider organizations to argue against the approval of these waivers.