An Update to Threats to the ACA and Medicaid: What's at Stake for Children

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Access to health care is a basic ingredient for children’s healthy development and well-being.

Prior to passage of the Affordable Care Act (ACA), many low-income parents lacked access to affordable health coverage.

Currently, the ACA and Medicaid are being threatened.
Why the ACA Matters for Early Childhood

• Affordable health insurance coverage
  ▪ For children
  ▪ For parents
  ▪ For providers

• What can you do?
  ▪ Roles for early childhood providers and advocates
Affordable Health Insurance Coverage

• Access to health care is a fundamental need for children.
  ▪ Access to health insurance provides children a healthy start in life.
• Parents’ access to health care matters greatly for children.
• Coverage for caregivers matters, too.
Timeline of Recent Health Care Events

- February 2017: Threats to the ACA and Medicaid: What’s at Stake for Children Webinar
- March 2017: AHCA introduced
- May 2017: AHCA passes the House
- June 2017: Senate Republican bill introduced
- This week: Likely vote in the Senate
The Children’s Uninsured Rate has Declined To Historic Lows

* Change is significant at the 90% confidence level. 2013 was the only year that did not show a significant one-year decline in the national rate of uninsured children. The Census began collecting data for the health insurance series in 2008, therefore there is no significance available for 2008.

Parent Coverage Has Improved Too

Source: Urban Institute tabulations of 2008-2015 National Health Interview Survey data
Notes: Parents are defined as adults ages 19 to 64 living with a biological child, adoptive child, or stepchild age 18 or under. Uninsured is at time of survey. All other adults age 19 to 64 are classified as childless.
How are Children Covered?

- Employer-Sponsored: 46.5%
- Medicaid/CHIP: 35.7%
- Other: 7.4%
- Direct Purchase (Includes Marketplace): 4.8%
- Uninsured: 5.5%

Public Coverage for Children in U.S.

Medicaid
37.1 million

CHIP
8.9 million

Marketplace
1.1 million

Sources: SEDS FY 2016 Ever-Enrolled in Medicaid/CHIP
Medicaid/CHIP: Coverage for the Nation’s Most Vulnerable Children

- 79%  [Image of people]  
  Children living in or near poverty.

- 45%  [Image of people]  
  Infants, toddlers, and pre-schoolers during the early years that are key to their healthy development and school readiness.

- 43%  [Image of people]  
  Children with disabilities or other special health care needs such as juvenile diabetes, congenital heart conditions, or asthma.

- 100%  [Image of people]  
  Children in foster care who face poverty, family dysfunction, neglect, and abuse that result in high rates of chronic health, emotional, and developmental problems.

- 48%  [Image of people]  
  Newborns in families to assure a healthy delivery and strong start during their critical first year of life.

51% of all Medicaid/CHIP enrollees in the United States are children.

Medicaid Helps Kids Succeed in Life

Medicaid helps children grow up to reach their full potential. Children enrolled in Medicaid:

- Miss fewer school days due to illness or injury
- Do better in school
- Are more likely to graduate high school and attend college
- Grow up to be healthier as adults
- Earn higher wages
- Pay more in taxes

Medicaid is the Largest Source of Federal Funds for States

Children and Families Face a Perfect Storm

- Medicaid is at risk like never before in ACA repeal and other efforts.
- CHIP funding will expire on September 30, 2017.
- Marketplace’s future is uncertain.
Examining the ACA Repeal Bills
Proposals: Marketplaces, Private Plans

Marketplaces and Private Insurance

• Eliminate Essential Health Benefits
  • Preventive
  • Maternity
  • Habilitative
  • Mental health
  • Pediatric oral health/vision

• Allow lifetime or annual limits

• Eliminate out-of-pocket consumer maximum

• Reverse coverage and cost protections for pre-existing conditions

Marketplaces

• Tax credits worth less for older enrollees

• Cost-sharing reductions end,

• Increased deductibles and other out-of-pocket costs for families
AHCA Medicaid Changes

- Caps federal Medicaid funds to states—per capita cap w/ block grant option
- Phases out, effectively ends, ACA Medicaid expansion adults
- 6-month renewals for expansion adults
- Ends Hospital Presumptive Eligibility (PE)
- Ends retroactive coverage (90 days)
- Work requirements
Bills End 50+ Year Federal-State Partnership

• Complicated per-capita formula to create an annual federal cap on federal Medicaid spending

• State choice to block grant services for adults (House and Senate bills), or children and adults (House bill only)
Block Grants/Per Capita Caps Shift Costs to States

Current Medicaid Financing System

<table>
<thead>
<tr>
<th>60% FMAP State</th>
<th>Higher spending (unexpected cost growth)</th>
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<tbody>
<tr>
<td>$100 Federal Share</td>
<td>$60 State Share</td>
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<td>$40 Federal Share</td>
<td>$72 State Share</td>
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Capped Federal Medicaid Funding

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<tr>
<th>60% FMAP State</th>
<th>Expected spending with cap</th>
<th>Higher spending (unexpected cost growth)</th>
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<tbody>
<tr>
<td>$100 Federal Share</td>
<td>$40 Federal Share</td>
<td>$120 Federal Share</td>
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<td>$60 State Share</td>
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<td>$80 State Share</td>
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Chart by the Center on Budget and Policy Priorities, CCF Back to the Basics webinar series: Medicaid financing
Congressional Budget Office (CBO) Says…

<table>
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<th>HOUSE BILL – American Health Care Act (AHCA)</th>
<th>SENATE BILL - Better Care Reconciliation Act (BCRA)</th>
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<tr>
<td>23 million new uninsured by 2026</td>
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<tr>
<td>- 14 million from Medicaid</td>
<td>- 15 million from Medicaid</td>
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<td>$834 billion in Medicaid cuts over 10 years</td>
<td>$772 billion in Medicaid cuts over 10 years</td>
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Medicaid Cuts Would Grow Over Time

Chart: Center on Budget Policy and Priorities using Congressional Budget Office data, June 2017.
State Choices to Offset Capped Federal Funding

Boost State Spending

- Impose more red tape to suppress enrollment and retention
- Close or cap enrollment
- Reduce Eligibility
- Cut Benefits
- Increase Enrollee Costs
- Lower Reimbursement for Providers
Early Periodic Screening, Diagnostic and Treatment (EPSDT)

- Core benefits package for children in Medicaid
- States are required to cover all appropriate and medically necessary services needed to correct and ameliorate health conditions
- Caps make it harder for states to meet requirement
- New state flexibility in House bill “block grant” option could remove this protection
ACA Repeal and Medicaid Caps: Threats for Children

1. Millions of children, parents, caregivers lose health coverage.
2. No coverage guarantee in Medicaid.
3. No children’s benefit guarantee (EPSDT).
4. Added costs and barriers to care for families.
5. Added pressure on other state-funded programs that serve children and families.
Action Steps
What can you do?

- Contact your Senators and **urge them to reject any structural changes or cuts to Medicaid**
- Tell a story
- Get plugged in with child advocacy and health consumer advocacy groups.
- Use social media
- Stay up to date
  - Get connected with CLASP and CCF
Hi! My name is ______. I am a concerned constituent from _____. I urge Senator _______ to keep kids and their parents covered and reject any health reform proposal that includes a cap on federal funding, does not preserve and protect Medicaid as we know it, and increases the number of uninsured children and adults in America. There is no way to design a Medicaid “per capita cap” or block grant that won’t harm children. At a time when 95 percent of children in America have health coverage, we cannot move backwards.

Please call 866-426-2631 today and tell your Senators to #Protect Medicaid and #KeepKidsCovered!
Questions?
Resources
Resources

Georgetown Center for Children and Families
  • ccf.georgetown.edu
  • Say Ahhh! Our child health policy blog
  • State Child Coverage Snapshots

CLASP
  • www.clasp.org
  • For Medicaid and ACA resources: http://www.clasp.org/issues/work-supports/pages/health
  • For Child Care and Early Ed Healthcare resources:
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