HEALTH CARE FOR THOSE OF LIMITED MEANS

INTRODUCTION

The 2015-17 state budget proposal significantly increases funding for Wisconsin’s Medical Assistance program, commonly known as MA or Medicaid, which provides health care coverage for children, low-income elderly, individuals with disabilities, and other vulnerable populations. The budget provides an additional $647 million in state Medicaid funding over the next two years just to preserve current program operation. The Wisconsin Catholic Conference (WCC) supports this funding increase, but also urges legislators to examine other revenue sources that would free these state funds for other uses and expand Medicaid coverage to those struggling to stay out of poverty.

CHURCH TEACHING

Access to health care for all people has been a policy goal of the U.S. bishops since 1919. The Church has a long history of caring for the ill, aged, vulnerable, and dying. Indeed, Catholic hospitals serve one in six patients nationwide. In Wisconsin, one-third of health care facilities are Catholic. As policy makers design systems to best meet the health needs of Wisconsin, Church teaching holds that such systems must retain a “preferential option for the poor,” which ensures that those of limited means have the resources to attain appropriate and quality care.

WCC POSITIONS

Mental health and substance abuse programs. The budget would expand Medicaid coverage for residence-based substance abuse treatment. The WCC supports expanding this coverage. Our Catholic Charities agencies, hospitals, and parishes run countless programs to help those struggling with substance abuse and affirm that this coverage is desperately needed.

Family Care. The budget proposes a statewide expansion of Family Care, the state’s community-based, long-term care program for low-income elderly and individuals with disabilities. However, the proposal would also substantially change the administrative oversight of Family Care providers, what organizations could serve Family Care recipients, the provision of benefits and services, and program eligibility.

Currently, most Family Care recipients are served through a regionally-based Managed Care Organization (MCO), which receives a set payment for the services provided to each individual. However, some individuals opt to instead use Wisconsin’s IRIS (Include, Respect, I Self-Direct) Program, through which eligible individuals can manage their long-term services and supports directly.

The budget would phase out the current system of MCOs over the biennium and eliminate the IRIS Program. Instead, MCOs would be required to operate statewide and meet specific insurance requirements and operational efficiencies, something that many of the current regionally-based MCOs would not be able to do. MCOs would also be required to provide primary and acute care services, in addition to long-term care services.

The WCC supports the expansion of Family Care to all Wisconsin counties. However, it opposes changing the current system in which services are provided and managed by competent local authorities and through a variety of providers, including Catholic organizations.
Non-disabled, childless adults. The budget would require the Wisconsin Department of Health Services (DHS) to seek a federal waiver requesting the authority to impose monthly premiums on non-disabled, childless adult Medicaid recipients. It would also institute drug and health screenings and a 48-month enrollment limit on these recipients, which is down from the current 60-month limit.

The WCC opposes these changes. Recipients have annual incomes of less than 100% of the federal poverty level ($11,770 for one person); placing further burdens on their access to care is unjust.

Personal Care Services. The budget would cut state funding for Medicaid personal care services by about $7.5 million ($19.5 million in total funding) and require an independent assessment of need for personal care. Personal care services allow individuals to perform activities related to daily living (ADLs), such as eating, bathing, etc. The WCC opposes placing limitations on access to these vital services.

MEDICAID FUNDING AND EXPANSION

Under the Affordable Care Act (ACA), states may opt to expand Medicaid to eligible individuals with annual incomes at or below 138% of the federal poverty level (FPL) ($16,243 for a single person). In states that opt to expand, the federal government has pledged to pay 100% of the costs until 2017 for those newly eligible to Medicaid. In the following years, federal contributions will gradually decline until reaching 90% of costs in 2020.

While not in the budget, the WCC supports accepting these federal funds. We recognize that some are concerned that federal funds for Medicaid expansion may be reduced or eliminated in future years, leaving the state to pay for the program in its entirety. Leaders of Catholic schools in the parental choice programs confront this possibility every day, as do our Catholic Charities agencies when they contract with the state or county to provide human services. Wisconsin is clearly better off because these private institutions and many others have accepted the responsibility to help those in need, using all the resources that are available to them. We ask that our state government do the same. Doing so would provide health coverage to more people of limited means and make funds available for other pressing needs.

ACTION REQUESTED

Please contact your legislators and urge them to:

2. Support the expansion of Family Care, but express concern over changes to the current system.
3. Oppose Medicaid eligibility changes, premiums, and screenings for non-disabled, childless adults.
4. Oppose funding reductions for personal care services and the new assessment mechanism.
5. Expand Medicaid in a manner that preserves state dollars by accepting federal funds.

For more information, please contact Kim Wadas at 608/257-0004.