

Medicaid Matters

MDDC Education & Advocacy Information Session

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Agenda

- Welcome!
- Why are we talking about Medicaid?
- What is Medicaid?
- How does Medicaid help people live their lives?
- What could Medicaid changes mean for our community?
- What YOU can do!

Why are we talking about Medicaid?

- Medicaid is a lifeline for people with disabilities!
- Federal lawmakers and the new Administration are looking at cutting costs by possibly cutting Medicaid funding.
- Education and advocacy are needed to help inform lawmakers, people with disabilities, and the greater public about why Medicaid matters to our community.

What is Medicaid?

- Medicaid is a public program that provides healthcare and long-term services and supports (LTSS).
- The federal government provides funding to help state governments run Medicaid.
- Medicaid serves people with disabilities, people who don't make a lot of money, children, and older adults.
- Medicaid programs are different in every state.
- More than two-thirds¹ of the Medicaid LTSS are delivered in home- and community-based settings.

Medicaid Provides HCBS

- **Direct Support Professionals (DSP)** and **Personal Care Attendants (PCA)** who assist people with activities of daily life.
- **Employment services** (i.e., job coaching and supported employment).
- **Home modifications** and **assistive technology like** ramps, door widenings, and augmentative and alternative communication (AAC) devices.
- Support to family **caregivers** of people with disabilities, like respite.
- Payment for certain services in **schools** to support learning (i.e., speech, OT, PT, and behavioral supports).
- Accessible **transportation** to and from medical appointments.

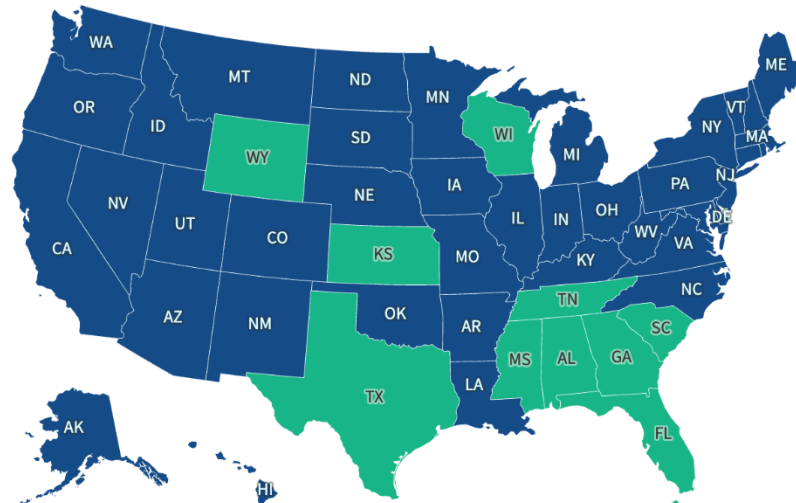
Categories of Medicaid Services

Mandatory Services

- These are Medicaid services that states are **required** to cover for eligible recipients.¹
- Mandatory services include things like doctor visits, medical care in hospitals, and LTSS provided in nursing homes and institutions.

Non-Mandatory Services

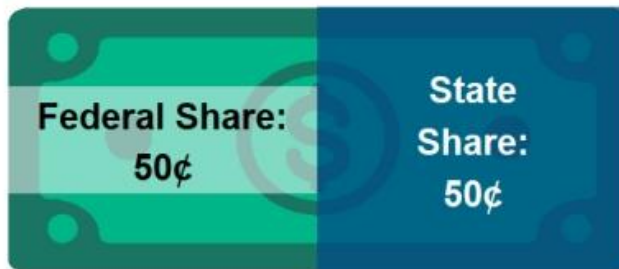
- Non-mandatory services include things like dental care, certain medicines, and therapies.
- Many HCBS are **optional** for states to provide. They mostly do so through Medicaid waiver programs.



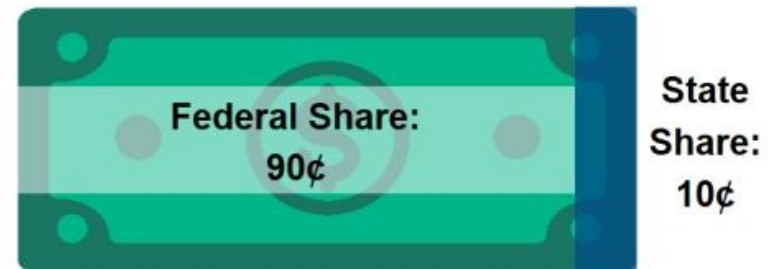
Medicaid Expansion

- The Federal government provides the majority of funding for people covered by Medicaid expansion.³
- Medicaid expansion helps people with disabilities get the care they need.

In MA, the federal government pays **50%** of the cost of traditional Medicaid.



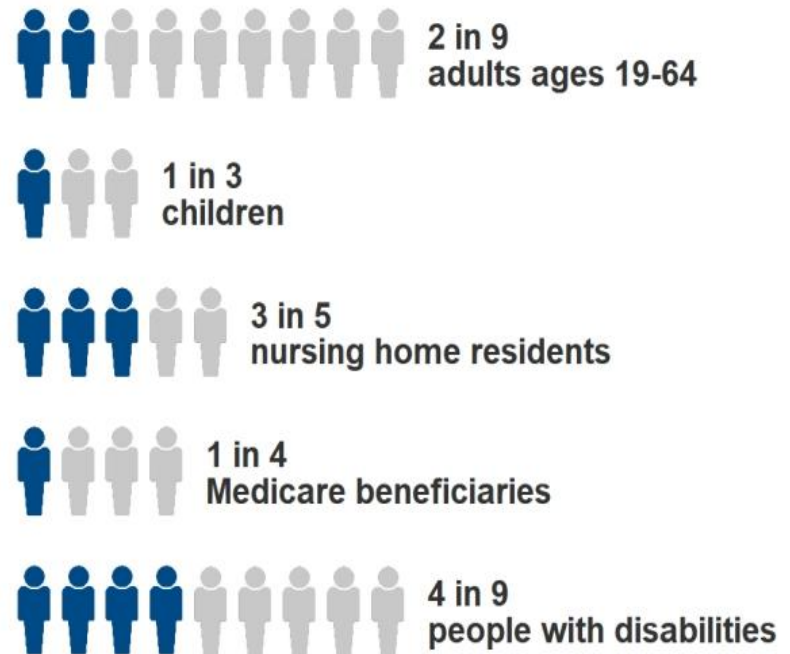
The federal government pays **90%** of the cost of the Medicaid expansion.



Medicaid in Massachusetts

- In Massachusetts, our Medicaid program is called **MassHealth**.
- There are about 1.7 million people enrolled in Medicaid in Massachusetts.³

In MA, Medicaid Covers:



Data and graphics sourced from the Kaiser Family Fund (KFF) Medicaid State Fact Sheet Profiles

Medicaid Helps Us Live our Lives



Cody Rooney is a MDDC citizen council member, a political science student at U Mass Boston, and a man with cerebral palsy

“MassHealth helps pay for my personal care attendants (PCAs who help me get around with transportation. Also, my PCAs help with grooming and things like nail cutting, without my PCAs it would look like I had claws! I’m a college student at University of Massachusetts Boston, and when I’m not on campus or I don’t have access to dining halls I also need PCAs help me cook and prepare meals.”

Medicaid Helps Us Live our Lives!



Tamara Huntley is a lead trainer at MDCC, a mother, and a woman with cerebral palsy.

"I am a widow with cerebral palsy, and I live with my 2 children who have learning disabilities. If MassHealth services get cut, I don't know what I'd do.

MassHealth provides me with all my medical equipment that helps me get around, like my crutches, wheelchair, and scooters. I rely on personal care attendants (PCAs) to work for me so I can live independently in my home.

They also help me enjoy life. For example, I have a coffee club with my family—my PCAs and I work together to get the food together and prepare so I can host.

I also rely on PCAs for transportation because there are limitations on where I can go with Paratransit. I get to go to concerts and do things I really enjoy when my PCAs can drive me."

Medicaid Helps Us Live our Lives!



"Medicaid is important to me because I want a life like everyone else!! I work, vote, and live in my community. Without Medicaid services, I couldn't do any of these things."



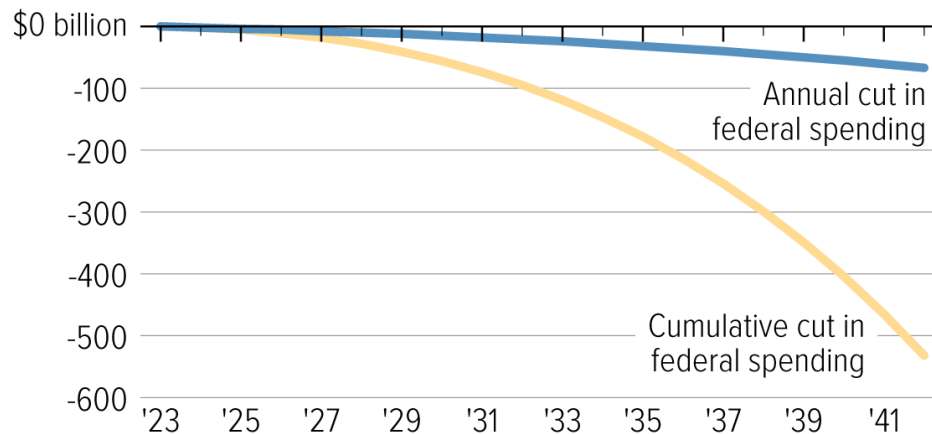
Craig Heller

What Could Changes to Medicaid Mean?

- There is not enough funding to support everyone with DD in Massachusetts. Many people and families who need services are [waiting](#).⁴
- If there are more [cuts to Medicaid](#),⁵ even more people with disabilities will not get the help they need.
- Some non-mandatory programs, like HCBS waivers, could receive less funding.
- There could be longer wait times for services and fewer direct care workers.
- Without supports, people may be at a higher risk for living in institutions.

What could happen if Medicaid funding is cut?

Total Medicaid Cuts From a Per Capita Cap Would Grow Over Time



Note: This hypothetical example illustrates how Medicaid federal funding cuts resulting from per capita caps would compound over time. For simplicity, annual growth in per-enrollee spending is capped at 4 percent while actual per-enrollee spending growth equals 4.4 percent each year for all states. Spending is assumed to equal \$700 billion in the first year, with the federal government funding 60 percent and states contributing the other 40 percent. Enrollment and state Medicaid policies are assumed to hold constant.

Source: CBPP analysis

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Certain types of [caps](#) “would incentivize states to aggressively limit spending for populations with greater health care costs (and needs), such as people with disabilities and seniors.” ⁵

Advocates are Making their Voices Heard

- National Association of Councils on Developmental Disabilities ([NACDD](#)) hosted a Coalition Call-in Day on February 6th
- Advocates all across the country called the “Hands Off Medicaid Hotline” to share how Medicaid matters to them.
- This means, many advocates called their representatives on Capitol Hill *at the same time* to draw attention to this issue.
- **This was just one day!** You can make your voice heard any and every day moving forward.

What Can You Do?

- Make your voice heard!
- Share your Medicaid story with the MDDC:
 - You can fill out our [survey](#)
 - You can contact a MDDC staff member:
 - Josh Gladstone joshua.gladstone@mass.gov or Kaitlin Stober: kaitlin.stober@mass.gov
- [Find your state representative](#) and contact them
- Share these advocacy opportunities with your networks

Additional Resources



- [Autistic Self-Advocacy Network Guide to Medicaid](#)



- [NACDD Medicaid Fact Sheet](#)

References

- 1: Wolk, Abby, and Alice Burns. “A Look at Waiting Lists for Medicaid Home- and Community-Based Services from 2016 to 2024.” *KFF*, 31 Oct. 2024, www.kff.org/medicaid/issue-brief/a-look-at-waiting-lists-for-medicaid-home-and-community-based-services-from-2016-to-2024/
- 2: “Status of State Medicaid Expansion Decisions.” *KFF*, 22 Nov. 2024, www.kff.org/status-of-state-medicaid-expansion-decisions/
- 3: “Medicaid State Fact Sheets.” *KFF*, 14 Aug. 2024, www.kff.org/interactive/medicaid-state-fact-sheets/
- 4: “I’m Still Waiting.” *The Arc of Massachusetts*, 20 May 2024, thearcofmass.org/waiting
- 5: Lukens, Gideon, and Elizabeth Zhang. “Medicaid per Capita Cap Would Harm Millions of People ...” *Center on Budget and Policy Priorities*, 7 Jan. 2025, www.cbpp.org/research/health/medicaid-per-capita-cap-would-harm-millions-of-people-by-forcing-deep-cuts-and