



# **The ACA's Medicaid Expansion: State of the States**

**2013 National Family Planning and Reproductive  
Health Association Conference**

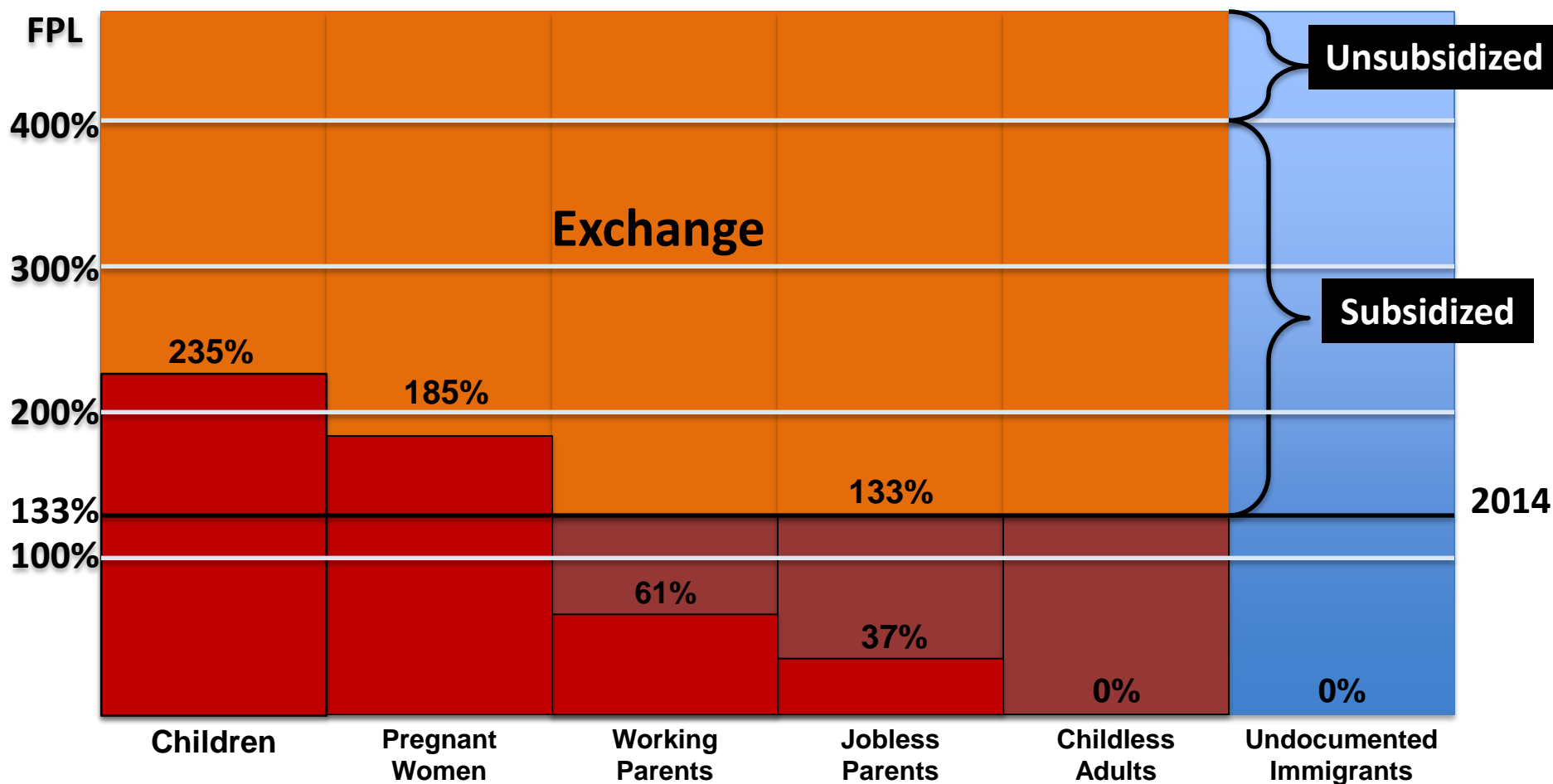
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**Center on Budget and Policy Priorities**

**April 28, 2013**



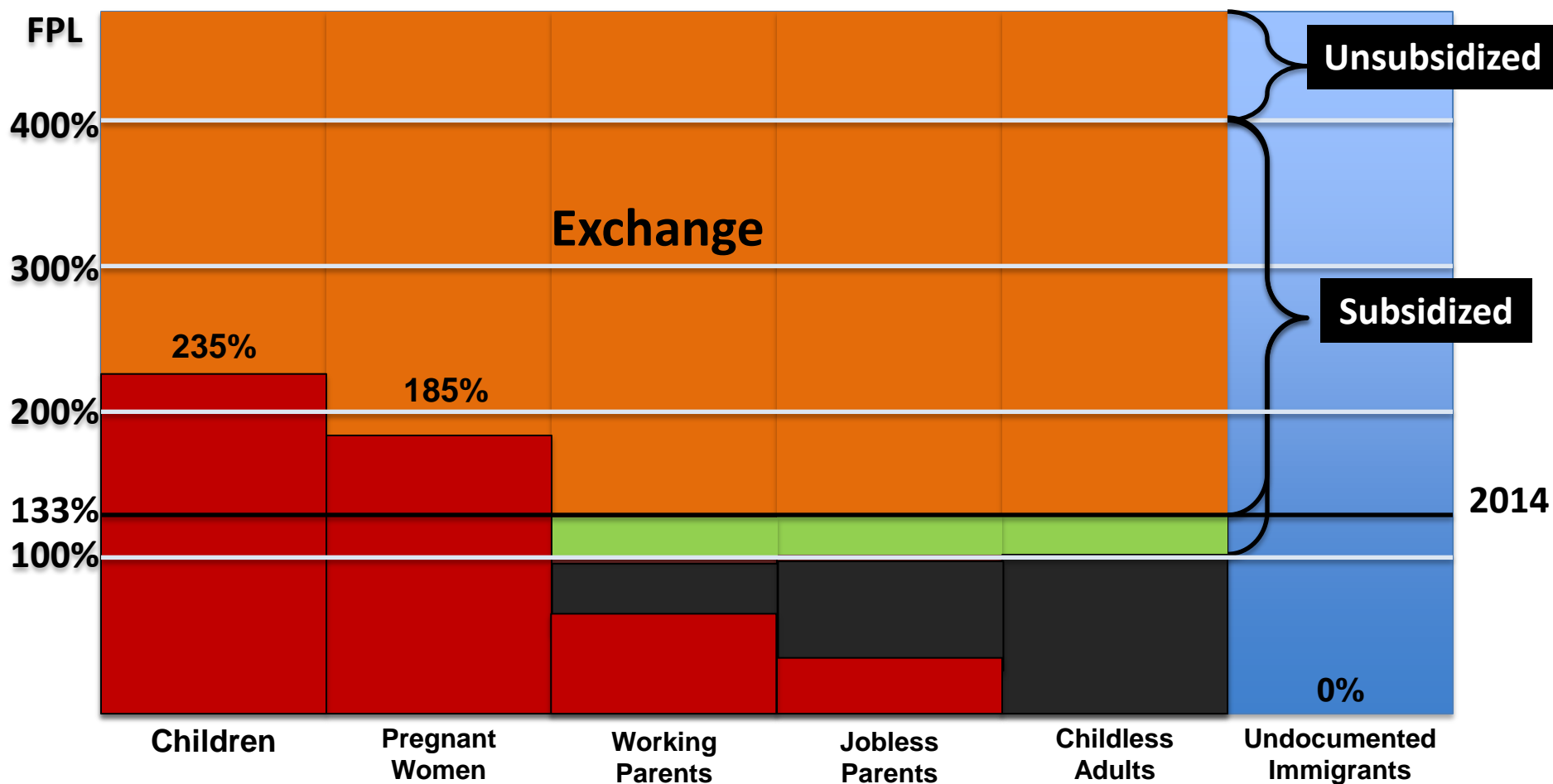
# Linking individuals to coverage in 2014





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*post-Supreme Court*





## Expansion includes generous federal match for newly eligible adults

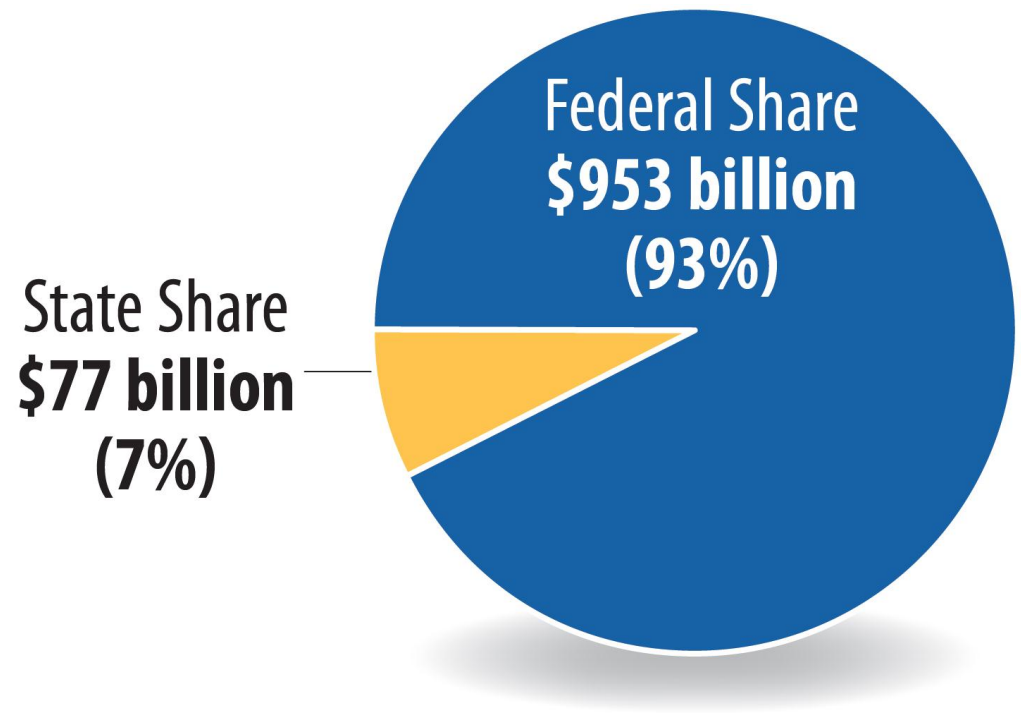
- 100 percent federal match the first 3 years
- Phases down over time but never less than 90 percent

Years	Federal Matching Rate
2014 – 2016	100%
2017	95%
2018	94%
2019	93%
2020 and beyond	90%



# Federal government will bear nearly all costs of the expansion

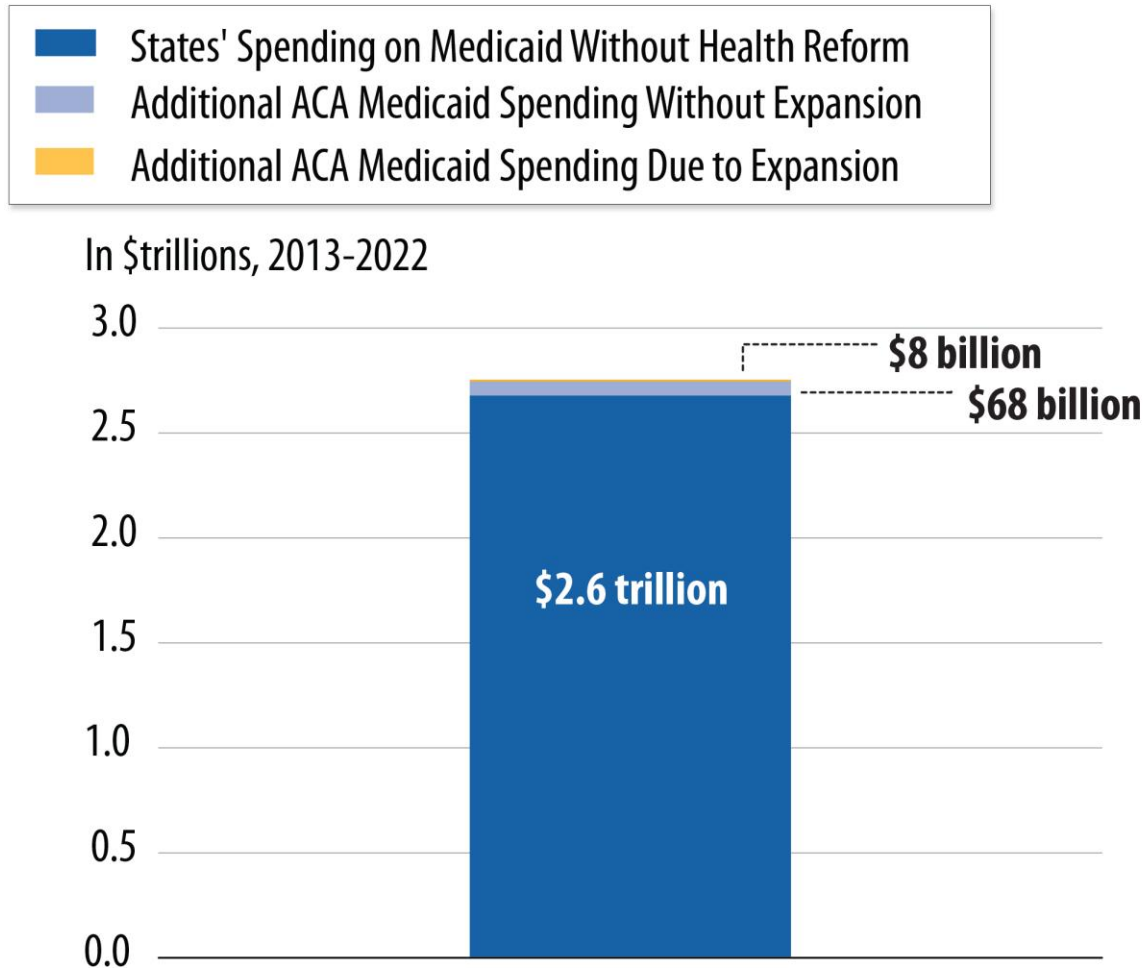
- From 2013-2022:
  - State spending: \$77 billion
  - Federal spending: \$953 billion



Source: KFF and Urban Institute.



# Expansion decision will have minimal impact on state Medicaid costs



Source: KFF and Urban Institute.

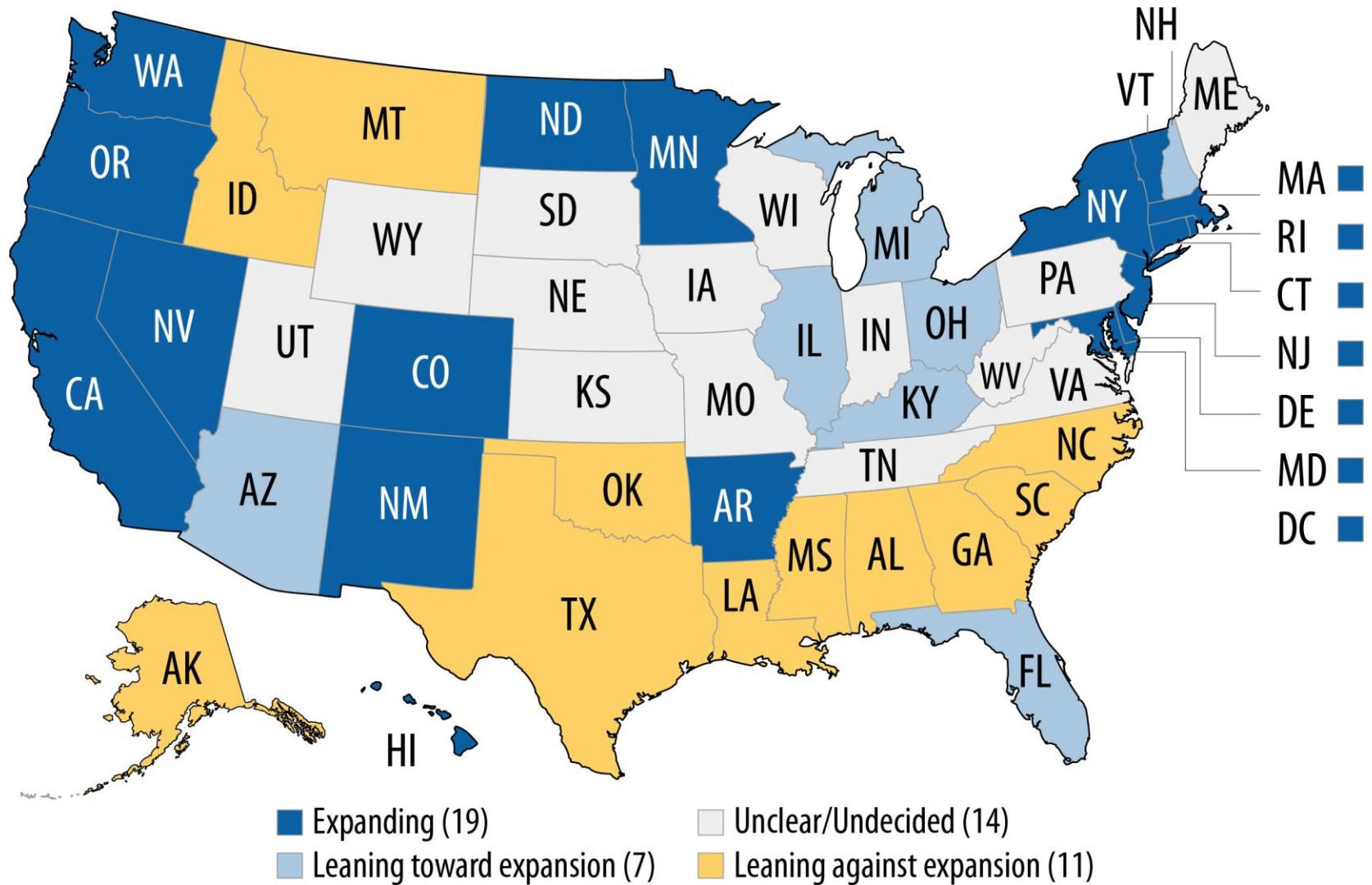


# Federal funding for the Medicaid expansion will be stable

- The Obama Administration no longer supports a blended matching rate in deficit reduction negotiations
- In January announced they no longer support *any* cuts to Medicaid that shift costs to states



# Status of State Medicaid Expansion for 2014



\* As of April 24, 2013





# Premium assistance and the Medicaid expansion

- Use Medicaid dollars to purchase coverage in the exchange
  - Arkansas proposal: Entire expansion population
  - Ohio: Population between 100% and 133%
- March guidance from CMS made clear:
  - Population would still be Medicaid beneficiaries
  - Medicaid benefits must be wrapped around
  - An 1115 waiver will be needed if premium assistance is to be made mandatory



# Benefits to state budgets from expanding

- Offset spending in other parts of the state budget, for example:
  - uncompensated care
  - substance abuse treatment services
  - State-funded public health programs
- Increased state tax revenue
  - Income taxes
  - Provider taxes
  - Corporate taxes



# Building support for expansion

- An extremely good deal
  - *Accept the federal funds*
- Positive impact on working families
  - *Continuous coverage will create a healthier and more productive workforce*
  - *Women will gain access to preventive care, birth control, check ups*
- Important for Hospitals
  - *Reduce ER spending and keep local hospitals open*
- Must stay competitive with neighboring states



# Resources and Contact Information

- CBPP's [Medicaid expansion tool kit](#) includes:
  - CBPP papers and blogs related to the expansion
  - Notable pro-expansion work from state groups
  - Fact sheets of the impact on each state
  - Fact sheets of the impact of certain populations (Vets, Native Americans, persons with HIV/AIDS, working adults, women)

## Contact Information

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