

Protect Medicaid Expansion

Shield over 630,000 people from automatically losing access to health coverage by supporting Budget Amendment 288 #7s!

Medicaid Expansion plays an important role in Virginia.

We all understand how crucial access to health care is, especially for people working hard to make ends meet. In 2018, Virginia expanded Medicaid under the Patient Protection and Affordable Care Act (PPACA) to provide essential care to more low-income adults, bringing peace of mind to parents and adults in every corner of Virginia, from Arlington to Abingdon. Everyone deserves a fair shot at good health, and programs like Medicaid expansion help ensure a healthier commonwealth.

- In 2018, Virginia lawmakers extended Medicaid coverage to adults earning up to 138% of the federal poverty level (FPL), or \$36,777 a year for a family of three in 2025.
- Without expansion, working parents who make more than \$13,858 a year for a family of three in 2025 (52% FPL) would make "too much" to qualify for coverage, and childless adults would be ineligible for coverage unless they were elderly or disabled.
- Medicaid expansion allows for a healthier workforce, strengthens rural hospitals, and helps children enroll in care through a "welcome mat" effect.

Federal decisions could impact Virginia in a very big way.

Some federal lawmakers have expressed a desire to reduce Medicaid funding in one of the reconciliation bills that Congress will pass in 2025. If they succeed in reducing Medicaid funding, specifically the money used to help states that have expanded Medicaid, Virginia could be among the hardest-hit states.

- The federal government funds 90% of Medicaid expansion costs, with Virginia covering the remaining 10% by leveraging a tax on private acute care hospitals.
- Virginia's 2018 budget language to expand Medicaid includes trigger language requiring the state to eliminate Medicaid expansion if the federal funding drops below the current 90% threshold.

Virginia lawmakers can act now to avoid the automatic loss of coverage for over 630,000 people, if the federal government reduces funding.

Lawmakers must be able to weigh in before mass and automatic coverage loss if federal matching funds are reduced below the current 90% threshold. The Joint Subcommittee for HHR Oversight should meet allowing lawmakers to consider their options and, within 30 days, recommend ways to raise new sustainable revenues to continue Medicaid expansion. Coverage loss due to federal cuts should not occur until after the subcommittee makes its recommendations and the General Assembly acts on them. Budget amendment 288 #7s is an important step in the right direction that allows state lawmakers to weigh in before people and families are directly impacted by federal decisions and we hope the final language is even stronger.