Medicaid Expansion the Conservative Thing to Do

Conservatives squirm when they hear “welfare.” But by actually expanding Medicaid, conservative state lawmakers would prove their policy actually squares with their rhetoric.

The U.S. Supreme Court last year dealt a blow to President Barack Obama’s Affordable Care Act when it ruled that the individual states can decide whether to expand the nation’s massive welfare program. Twenty-five states — predominantly red states, including Idaho — haven’t extended the program to include people earning 138 percent of the poverty threshold or less. The expansion would make Medicaid accessible to an additional 80,000 Idahoans, the Legislature’s Medicaid expansion workgroup reported last summer. The federal government would pick up 100 percent of the expansion’s cost for the first few years. The federal-state split would drop to a 90 percent-10 percent by 2020.

We’ve been told by numerous lawmakers that Otter won’t push for Medicaid expansion in the 2014 legislative session. The governor’s spokesman, Jon Hanian, told us he couldn’t “confirm or deny” what we are hearing and said that Otter’s agenda, or lack there of, will be made clear in January’s State of the State address.

We don’t expect Otter to mention Medicaid expansion, a silent acknowledgement of his intentions to ignore the issue in a campaign year when he’s facing a tea party challenge. Otter’s muteness on the issue will be welcomed by many Republican lawmakers, who are also leery of angering the conservative wings of their party.

Too bad. Screeching politics aside, it’s a bad move.

Idaho’s 44 counties have seen their indigent funds explode in recent years. More than $67 million is expected to be spent in the current year on the social services for the working poor who often don’t qualify for Medicaid. That number is projected to jump $92 million by 2020 if the largely federally funded Medicaid expansion doesn’t happen, says a report drafted by the Legislature’s Medicaid expansion workgroup. That’s money paid by local taxpayers for services that could be paid for by the nation’s entire tax base. But Medicaid expansion could mean a lot more in the way of savings than just medical care for the working poor.

Every year, Idaho lawmakers gripe about the skyrocketing cost of the state prison system, which now constitutes roughly 20 percent of the budget. A single inmate annually costs the state $27,000. Between 60 and 65 percent of the state’s inmate population suffer from mental illness or drug addiction, estimates the state Department of Correction.

Rep. Fred Wood, R-Burley, a physician and member of the legislative task force, rightly argues that broadening Medicaid to include drug-addicted or mentally disturbed parolees — a provision of the ACA’s expansion
package — would no doubt slash prison costs by providing services for people who would otherwise end up back in the clink. Even the finest drug treatment programs cost just $6,000 per-patient, Wood said.

“They’re not really criminals in the classic sense,” Wood said. “They’re just people unable to cope with society.”

Those people, as it now stands, are too often frequent flyers in the costly judicial system.

The savings on inmates alone could top $130 million over 10 years, should Medicaid be expanded, Wood said. Expansion proponents expect the figure to grow when the Idaho Department of Correction finishes its analysis for the coming legislative session.

It’s true that 2014 is an election year and again voting to institute a piece of Obamacare would rile some hardliners and generate a few primary challenges.

But expanding Medicaid is the right thing to do. We hope Otter and lawmakers surprise us this winter and choose what’s right for the state over what’s best for their political fortunes.

After all, we’re already paying for Obamacare whether we like it or not.