

Crowd gathers in I.F. to oppose Medicaid cuts

More than 100 people rallied Monday in front of the offices of Rep. Mike Simpson and Sen. Mike Crapo. They were there to protest proposed cuts to Medicaid under the American Health Care Act, which recently passed the House but has yet to be taken up by the Senate. Both Simpson and Rep. Ra'l Labrador voted for the bill.

The bill is projected to leave tens of millions uninsured while achieving small deficit reductions and large tax cuts for high-income households.

Julie Gonzales told the assembled crowd that the bill reflects poorly on American society.

"The true measure of any society can be found in how it treats its most vulnerable members," she said, repeating a quote commonly attributed to Mahatma Gandhi.

Gonzales' daughter, Macie, has autism severe enough that she cannot speak. When Macie was first diagnosed, Gonzales said, "I had no idea what to do."

"I was scared and alone," she said. "This is something I knew nothing about."

She found caregivers who gave her daughter a variety of services that have helped her function better, she said.

"Finally, I thought someone was there to help," Gonzales said. "And they did so much to help."

And all of those caregivers were funded by Medicaid, she said.

Gonzales said her daughter is currently working to learn typing as an alternative means of expressing what she is thinking. It's early in the process, but Gonzales is hopeful. If Medicaid is cut severely, however, she worries that her daughter might never gain the ability to communicate.

Holly Giglio is the mother of an 18-year-old boy with Down's syndrome and autism. He, too, is nonverbal. Giglio said despite her family earning a good income, many services her child needs, including services in school and therapy, would be unattainable without Medicaid.

"My husband works at the site," she said. "My husband makes decent money. We have excellent health care. But we needed Medicaid."

James Steed, a member of the Idaho Council on Developmental Disabilities who is himself disabled, blasted the AHCA as a measure that would do great harm to people like him.

"Eight-hundred billion dollars — that's what they want to take away from Medicaid," Steed told the crowd. "That takes away people's ability to live on their own. ... That takes away the possibility of them living a life free, with choice and control of their own lives."

The AHCA is, in fact, projected to cut \$834 billion from Medicaid over the next decade.

Over the next decade, the bill would reduce the deficit by \$119 billion, or about 1.3 percent of the cumulative \$9.3 trillion in deficits expected in the coming decade. A much larger portion of the money saved

through the cuts, about \$664 billion, would go to tax reductions for high-income households, eliminating fees imposed on medical device manufacturers and excise tax reductions.

According to estimates by the nonpartisan Congressional Budget Office, about one in six Medicaid recipients would lose coverage under the AHCA, about 14 million nationwide, over the next decade. That doesn't factor in population growth. The declines are expected to continue growing steadily after that.

The Government Accountability Office's report on Medicaid, released last month, doesn't contain estimates of the prevalence of Medicaid waste, abuse or fraud. It notes that oversight of the program is hindered by inadequate reporting by states.

"Complete and accurate data on state financing and payments to individual providers is essential for (the Center for Medicare and Medicaid Studies) to effectively oversee state Medicaid programs," the GAO wrote. "Without more transparent information on state funding sources and program payments, CMS is unable to determine whether program expenditures are appropriate or to ensure the fiscal integrity of the program."

Several people at Monday's rally said there may be problems with fraud in Medicaid. But there's no reason to think just cutting spending will help to reduce waste, abuse or fraud, they said. Doing so would require funding additional oversight.

The AHCA allows states a choice between taking a lump yearly sum for Medicaid services (what's called a "block grant") or give states a limited yearly amount per Medicaid enrollee (what's called a "per capita cap").

The one major prior example of turning an entitlement into a block grant is the Temporary Aid for Needy Families program, which replaced the old Aid for Families with Dependent Children program, colloquially known as "welfare," in the mid-1990s.

As the Post Register previously reported, 20 years after Idaho took over managing the TANF block grant, fewer than 100 families receive any cash assistance. That can't be explained by falling poverty rates since poverty rates have risen sharply over that period both statewide and nationally. The population living in the most extreme poverty, families subsisting on less than \$2 per person per day, has roughly doubled nationwide.

Matt Wimmer, who directs the Medicaid program in Idaho, previously said a block grant system could allow the state the flexibility to innovate and provide better care, so long as it didn't involve major cuts in spending over time.

"On the other hand, a capped block grant would be a challenge and a distinct threat to Idaho's ability to serve its people effectively," Wimmer said in February. "It would initially allow states to design more efficient and effective programs, but medical inflation would gradually decrease its value, which in turn could require tough decisions on eligibility, service array and provider reimbursement."

###