

The Disability and Aging Collaborative &



April 20, 2023

The Honorable Chuck Schumer
Majority Leader
U.S. Senate
Washington, DC 20515

The Honorable Mitch McConnell
Minority Leader
U.S. Senate
Washington, DC 20515

The Honorable Kevin McCarthy
Speaker
U.S. House of Representatives
Washington, DC 20515

The Honorable Hakeem Jeffries
Minority Leader
U.S. House of Representatives
Washington, DC 20515

Dear Leaders Schumer and McConnell, Speaker McCarthy and Leader Jeffries,

The undersigned member organizations of the Consortium for Constituents with Disabilities (CCD), and the Disability and Aging Collaborative (DAC), and other state and national organizations write to urge you to exclude Medicaid cuts or changes that limit funding or eligibility from any debt ceiling and budget negotiations and legislation. People with disabilities, older adults, family caregivers and their children, direct care workers, and other low-income individuals and families need more, not less investment in this essential health care program.

CCD is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society free from racism, ableism, sexism, and xenophobia, as well as LGBTQ+ based discrimination and religious intolerance. The Disability and Aging Collaborative (DAC) is a coalition of approximately 40

national organizations that work together to advance long-term services and support policy at the federal level. Formed in 2009, the DAC was one of the first coordinated efforts to bring together disability, aging, and labor organizations. Together we have been pushing to protect and strengthen Medicaid, which is why we are deeply concerned with proposals that include Medicaid per capita caps and work requirements.

Any funding cuts, caps, or changes that limit eligibility for the Medicaid program threaten the longstanding Medicaid guarantee for people with disabilities, older adults and their families. Medicaid is already lean and efficient, with provider payment rates significantly lower than Medicare or private insurance. The pandemic only stretched those resources thinner. Any change in federal funding will force states to cut services and eligibility. People will lose care and supports that keep them healthy and independent. Cutting Medicaid would amount to negotiating against the health and wellbeing of people with disabilities, older adults, and other low-income people and families. For many people with disabilities and older adults, accessing timely needed care is a life or death matter.

Federal Funding Caps Harm People with Disabilities and Older Adults

For example, imposing per capita caps on Medicaid spending would have devastating consequences for low-income older adults and people with disabilities:

- Care for nursing facility residents - two-thirds of whom rely on Medicaid - would be jeopardized;
- Since coverage for home and community-based services is optional under Medicaid, care for the over 7 million recipients would be at particular risk;
- Future Medicaid cuts would be far easier to make, by simply dialing down or freezing federal spending growth rates from year to year;
- Perverse incentives would be created for states to cut services for people with the highest cost needs - primarily older adults and people with disabilities who need long-term services and supports;

Additionally, the cuts that would inevitably result from these arbitrary spending limits would result in significant job losses, reduced wages and lower economic growth. Federal cuts in Medicaid would strongly affect the financial viability of rural hospitals, while states with higher than average growth rates or lower spending per person would be unfairly penalized.

Work Requirements Don't Work

The letter that Speaker McCarthy sent to President Biden laid out another troubling proposal, Medicaid work requirements. Work requirements are ineffective and unfairly punitive. Work requirements take away coverage from people who are eligible for Medicaid and often have no other insurance options, including people with disabilities, older adults, and their caregivers. Such requirements do not accommodate the needs of individual Medicaid beneficiaries, with and without disabilities, and misplace resources that could be used to provide additional services, create new job opportunities, improve access to affordable child care, or increase

funding for job training, employer accommodations, or other employment supports. It would add undue bureaucratic burdens to all beneficiaries.

We oppose any work requirements because they will result in hundreds of thousands of low income Americans, including people with disabilities and family caregivers, losing access to Medicaid services. Work requirements create barriers to Medicaid coverage and are justified by using false stereotypes about people who live in poverty lacking incentive to work. In fact, nearly four in five adults enrolled in Medicaid who are not receiving disability benefits already live in families with at least one worker.

Those adults not doing paid work are mostly either caregivers, students, or persons with chronic conditions or disabilities (who might either be temporarily unable to work or require supportive services to find and keep a job). In all, fewer than one in ten of this population of adult Medicaid beneficiaries cited some other reason for not working. This data suggests that the impact of the policy will not be to boost employment, but rather to slim the Medicaid rolls by adding more paperwork. It certainly shows that adding administrative burdens for all adult Medicaid enrollees and for states is costly and misguided.¹

It may seem simple to assert that “people with disabilities and caregivers will be exempt,” but converting such a statement into an effective policy process is complicated, expensive, and fundamentally flawed.² Identifying exactly what qualifies as a disability, ensuring that people know how to request an exemption, and creating an accessible pathway to receive such an exemption has proven both misguided and unworkable.

Access to health care coverage is a matter of life, death, and independence for millions of Americans with disabilities, older adults, and their families and friends.

CCD and DAC strongly oppose per capita caps, work requirements, and other cuts to the Medicaid program. We will oppose them in every form. It is never acceptable to cut services for low income individuals with disabilities, adults, older Americans, and children, including in debt ceiling or budget negotiations. If you have any questions, contact DAC and CCD LTSS co-chair Nicole Jorwic, nicole@caringacross.org.

Sincerely,

ACA Consumer Advocacy
Agency on Aging / Area 4

¹ JENNIFER WAGNER & JUDITH SOLOMON, *States' Complex Medicaid Waivers Will Create Costly Bureaucracy and Harm Eligible Beneficiaries*, (2018), <https://www.cbpp.org/research/health/states-complex-medicaid-waivers-will-create-costly-bureaucracy-and-harm-eligible>.

² Kali Grant et al., *Unworkable & Unwise: Conditioning Access to Programs that Ensure a Basic Foundation for Families on Work Requirements*, 43 (2019), <https://www.georgetownpoverty.org/wp-content/uploads/2019/02/Unworkable-Unwise-20190201.pdf>.

Allies for Independence
AltaMed Health Services
American Association of People with Disabilities
American Association on Health and Disability
American Muslim Health Professionals
American Network of Community Options and Resources (ANCOR)
American Speech-Language-Hearing Association
Andrew County Ministries, Inc RSVP
APIAHF
Area Agency on Aging District 7 (Ohio)
Assistive Technology Law Center
Association of Asian Pacific Community Health Organizations (AAPCHO)
Association of Maternal & Child Health Programs
Association of People Supporting Employment First (APSE)
Autism Society of America
Autistic People of Color Fund
Autistic Self Advocacy Network
Autistic Women & Nonbinary Network
Bazelon Center for Mental Health Law
Bread for the City
Bubble Land Child Care
California Advocates for Nursing Home Reform
California Foundation for Independent Living Centers (CFILC)
Caring Across Generations
Care in Action
Care Weavers - Patient Care Advocates
Center for Medicare Advocacy
CenterLink: The Community of LGBTQ Centers
Central Arizona Shelter Services
Charlotte Center for Legal Advocacy
Choice in Aging
Christopher & Dana Reeve Foundation
City of Wauwatosa
Colorado Center on Law and Policy
Colorado Consumer Health Initiative
CommunicationFIRST
Communities Actively Living Independent & Free
Community Access and Disability Center
Community Catalyst
Consumer Directed Action of New York
Crohn's & Colitis Foundation
Detroit Disability Power
Disability Law Center
Disability Law Center (MA)

Disability Law Center of Utah
Disability Law Colorado
Disability Policy Consortium
Disability Rights & Resources
Disability Rights Education and Defense Fund (DREDF)
Disability Rights Florida
Disability Rights Michigan
Disability Rights North Carolina
Disability Rights South Carolina
Disability Rights Texas
Disability Rights Wisconsin
Disciples Center for Public Witness (Disciples of Christ)
Diverse Elders Coalition
Economic Opportunity Institute
Empowered Aging of Contra Costa County
Encuentro
Epilepsy Foundation
Equal Rights Advocates
EverThrive Illinois
Families USA
Family Voices
Georgia Equality
GO2 for Lung Cancer
Golden State Opportunity
Hand in Hand: The Domestic Employers Network
Hoosier Action
Indiana Disability Rights
Indivisible Marin
Iowa Citizens for Community Improvement
IRRC
Jewish Family Services, Inc.
Jewish Federations of North America
Justice in Aging
JusticePoint, Inc.
Lakeland Park Service Coordinator
Lakeshore Foundation
Legal Action Center
Leslie Fenninger
LifeLong Medical Care, Inc.
LifeTime Resources, Inc.
Little Lobbyists
Lutheran Services in America
Maine Equal Justice
Medicare Rights Center

Mental Health Hookup
Mercer County Senior Citizen Center
MKE MENTAL HEALTH TASK FORCE
MomsRising
Muscular Dystrophy Association
National Academy of Elder Law Attorneys
National Alliance on Mental Illness
National Association of Councils on Developmental Disabilities
National Center for Parent Leadership, Advocacy, and Community Empowerment (National PLACE)
National Consumer Voice for Quality Long-Term Care
National Council on Aging
National Council on Independent Living
National Disability Rights Network(NDRN)
National Domestic Workers Alliance
National Employment Law Project
National Health Law Program
NATIONAL INDIAN COUNCIL ON AGING
National PACE Association
National Partnership for Women & Families
National Respite Coalition
National Viral Hepatitis Roundtable (NVHR)
National Women's Law Center
Network Lobby for Catholic Social Justice
New Disabled South
New Disabled South Rising
New York Legal Assistance Group (NYLAG)
New York State Association of Resident Service Coordinators
North Dakota Protection & Advocacy Project
North Seattle Progressives
Northwest Harvest
Nourish California
NYAPRS.org
Our Mother's Voice
Pathfinders Milwaukee, Inc.
People's Action
PRC
Progressive Democrats of America (PDA)
Project Guardianship
Protect Our Care
Public Citizen
Public Justice Center
Senior Advocacy Network
Senior Advocates of the Desert

Senior Citizens' Law Office
Senior Staff Attorney, Greater Boston Legal Services
Service Employees International Union (SEIU)
SHIP
Sirona Recovery, Inc.
Sojourners
South Carolina Appleseed Legal Justice Center
Special Needs Alliance
Sunny Cal ADHC
TASH
Tasha Yorey Enterprises
Tennessee Justice Center
The Arc of New Mexico
The Arc of the United States
The Arc of Washington State
The Center for Disability Empowerment
The Children's Partnership
The Commonwealth Institute for Fiscal Analysis
The Difference Principle, Inc.
The Kelsey
The Myalgic Encephalomyelitis Action Network
Union for Reform Judaism
United Church of Christ Justice and Local Church Ministries
Virginia Poverty Law Center
VOYCE
Washington Anti-Hunger & Nutrition Coalition
Washtenaw Association for Community Advocacy (ACA)
Well Spouse Association
WI Department of Corrections