Medicaid Expansion

**The Affordable Care Act (ACA)**

The Affordable Care Act (ACA) extended Medicaid coverage to nearly all low-income adults (those earning up to 138% of the Federal Poverty Level) and provided subsidized Marketplace coverage to adults with moderate incomes (100% - 400% of the FPL). But a 2012 Supreme Court ruling gave states the choice of whether to expand Medicaid.

Missouri is one of 14 states that have not expanded Medicaid.

**Missouri Medicaid Today**

Working-age adults without disabilities are not eligible for Medicaid unless they are custodial parents with income <= 22% of the Federal Poverty Level (annual income of $4,693 or less for a family of three).

The following Missourians are ineligible for both Medicaid and subsidized health insurance through the Marketplace:
- Childless adults earning less than 100% FPL ($12,490 annually for an individual)
- Parents earning between 22% FPL and 100% FPL ($4,693 - $21,330 annually for a family of 3)

If Missouri Expanded Medicaid

The proposed ballot initiative would expand Medicaid coverage to working-age adults without disabilities as follows:

<table>
<thead>
<tr>
<th>Category</th>
<th>Current Medicaid Eligibility in Missouri</th>
<th>Medicaid Eligibility Proposed by 2020 Ballot Initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-Disabled Adults Without Custody of Children</td>
<td>Generally ineligible</td>
<td>Eligible if income &lt;= 138% FPL ($17,236 for an individual)</td>
</tr>
<tr>
<td>Non-Disabled Adults With Custody of Children</td>
<td>Eligible if income &lt;= 22% FPL (annual income for family of three of $4,693) (This is the 3rd most restrictive eligibility requirement in the U.S.)</td>
<td>Eligible if income &lt;= 138% FPL (annual income for family of three of $29,435)</td>
</tr>
</tbody>
</table>

According to the Kaiser Family Foundation, approximately 204,000 more individuals would be eligible for coverage.1

If the initiative is successful, Missouri would become the 37th state (plus D.C.) to cover to 138% FPL (or higher).

**How Is It Funded?**

- Currently, 65% of Medicaid funding comes from the Federal government, with 35% funded by the State.
- Under Medicaid expansion, the Federal government funds 90% and the State 10%.
- Governor Parson has stated that expansion would take funds from other government programs or require a tax increase.
- The Center for Health Economics and Policy at Washington University finds that Medicaid expansion in Missouri is likely to be approximately revenue neutral, with the potential for cost savings in 2020 and increased cost savings likely 2020-2024.4
  - Due to the opportunity to receive a 90% federal match on certain expenditures currently receiving a 65% match.

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What are the Expected Benefits?

The Kaiser Family Foundation analyzed 324 studies and found the following outcomes in states expanding Medicaid:

- Sharp declines in uninsured rates among the low-income population
- Improved access to care, utilization of services, and affordability of care, with positive health outcomes such as:
  - Increases in early-stage cancer diagnosis rates
  - Decreased cigarette and nicotine product purchases & increased utilization of evidence-based smoking cessation medications
  - Improvements in access to services for the treatment of behavioral health, including opioid dependency
- Increased financial security among the low-income population and increased ability to work
- Reductions in uninsured hospital visits and uncompensated care.
- Improved hospital financial performance and significant reductions in the probability of hospital closure, especially in rural areas. Since 2014, nine rural Missouri hospitals have closed.

Who Supports Medicaid Expansion?

- Missouri Catholic Bishops
- Missouri Catholic Conference
- Catholic Charities of Saint Louis
- Catholic health systems (SSM Health, Mercy, and Ascension)
- The SVdP Voice of the Poor Committee

Other Considerations

- All Medicaid programs are required by federal law to include family planning services.
- The Hyde Amendment prohibits use of federal Medicaid dollars for abortion except in the cases of rape, incest, or to save the life of the mother. The Hyde Amendment has been added to the federal appropriations bill every year since 1977.
- In Missouri, public funds may not be used for abortions except to save the life of the mother.
- On January 31, Archbishop Carlson sent the following letter assuring Catholics that support of Medicaid Expansion is consistent with our commitment to life:

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**ARCHDIOCESE OF ST. LOUIS**

January 31, 2020

Dear Priests and Deacons,

In October of 2019, I joined my brother Catholic bishops of Missouri in issuing a statement of support for the expansion of MO HealthNet, the Medicaid program in our state. The initiative, which will appear on the ballot this fall for placement in the Missouri Constitution, will expand affordable healthcare coverage for the most vulnerable among us.

Recently, questions, concerns and speculation have surfaced regarding an argument that the federal pro-life protections in Medicaid—secured through the Hyde Amendment more than 40 years ago—would be terminated, putting government funds at risk for allocation to abortions.

We acknowledge this concern, however, with abiding trust in our Lord Jesus Christ, we cannot operate out of fear and speculation of the unknown. Our commitment to life is unwavering and lives are at stake. We must make decisions based on what we currently know to be true:

- With greater access to health insurance through Medicaid, we are saving lives and ensuring better health outcomes for our families in need.
- The risk for elimination of the Hyde Amendment is unlikely, based on its 40-plus-year history and polls showing that the majority of Americans oppose public funding of abortion.
- In the unlikely event that the Hyde Amendment is repealed, pro-life states like Missouri would pursue every legal avenue to prevent public funding for abortion through the state Medicaid programs.
- Medicaid reimbursements are vital to the healthcare delivery system, ensuring continued care to the most needy, including care provided by our Catholic hospitals.
- Many of our Catholic hospitals provide services that are left unpaid, putting the future of those institutions at risk.

The Missouri bishops’ support for this initiative is consistent with our commitment to life. I encourage you all to read more on the Missouri Catholic Conference website and in the St. Louis Review.

Please consider our responsibility as Catholics to advocate for decisions that will uphold the dignity of every human person. Our families depend on decent housing and health care to flourish.

Let us pray to God the Father to continue to guide us in our careful advocacy around legislative issues that affect the lives of so many of our brothers and sisters. Lord, amid the fear, speculation and uncertainty that surround us, help us to trust in your perfect plan for what tomorrow will bring.

God bless you all.

Sincerely yours in Christ,

+ Robert J. Carlson
Archbishop of St. Louis

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