



[consulting](#) | [training](#) | [free webinars](#)

clay@mostlymedicaid.com | 919-727-9231

Monday Morning Medicaid Must Reads

Helping you consider differing viewpoints. Before it's illegal.

November 19, 2018

other MMRS - <http://bit.ly/2T7CP7K>

In this issue...

Article 1: **COUNTERPOINT: Medicaid expansion is unfunded, unsustainable for state of Nebraska**

Clay's summary: Voters didn't listen to this dude.

Key Excerpts from the Article: ...*It is also likely that expansion costs will far exceed projections, just as costs have in nearly every state that has expanded. [Iowa](#) spent over \$150 million more than expected. Kentucky's Medicaid program is facing a [\\$296 million budget shortfall](#) due to unpredictable costs (yes, the program itself is that much in debt). [Ohio's](#) Medicaid program costs the state an average of [\\$437 million a month](#)...*

Read full article in packet or at links provided

Article 2: **Maryland might not have properly vetted some Medicaid enrollees**

Clay's summary: Perhaps there was maybe some payments that could have been somewhat non-compliant with the law but who's to say, really? It's a gray area- move along.

Key Excerpts from the Article: *Maryland may have allowed residents who did not qualify for [Medicaid](#) into the government health program for the poor by failing to consider all of their income, according to a routine audit of the quasi-governmental agency that oversees the Maryland health exchange.*

Read full article in packet or at links provided

Article 3: Virginia facing high unexpected Medicaid costs

Clay's summary: Well at least they decided to expand and spend even more (this is all costs not-related to recent expansion largess).

Key Excerpts from the Article:

State officials said Friday that Virginia has about \$460 million in unforeseen Medicaid costs. ...The new costs, first reported by the Richmond Times-Dispatch, are unrelated to Virginia's recent decision to expand Medicaid eligibility to low-income adults under the Affordable Care Act. ...Instead, Secretary of Finance Aubrey Layne said much of the new costs stem from faulty forecasts overestimating the benefits of having private health insurers cover a greater number of some of the state's more costly Medicaid recipients. Another reason for the increase is a higher-than-expected enrollment of children in the state's Medicaid program, he said...

Read full article in packet or at links provided

Disclaimer: Mostly Medicaid provides curation as a service. The work to collect, select, highlight or summarize is value added to our readers. Original authors and publishers retain all rights to the original content created. Link backs to all curated content are provided.

SourceURL: http://www.dailynebraskan.com/opinion/counterpoint-medicaid-expansion-is-unfunded-unsustainable-for-state-of-nebraska/article_fd3a8f40-e177-11e8-bf0b-9b90fc3133e9.html

COUNTERPOINT: Medicaid expansion is unfunded, unsustainable for state of Nebraska



Art by Austin Coudriet

Tuesday, Nov. 6, is Election Day. After months of hard work, preparation, volunteering and door knocking, Election Day will determine the direction of our state and our country.

While there are some truly exceptional candidates up for consideration, people often forget that there are more than just candidates on the ballot. Individuals who exercise their right to vote will see Initiative 427 on their ballot this year, the latest effort to expand Medicaid under the Affordable Care Act, also known as Obamacare, in Nebraska.

Initiative 427 would expand Medicaid to 19- to 64-year-old able-bodied adults and leave Nebraskan taxpayers responsible for a large bill. This unpredictable

financial burden would likely lead to an increase in taxes and potential cuts to existing programs such as K-12 education, the University of Nebraska, current Medicaid services and roads. While ensuring proper health care should be a priority of the state, lawmakers need to work together to craft a better, more sustainable solution. Initiative 427 would be an unfair, unsustainable and unfunded mandate on Nebraska taxpayers. I urge students to vote "no" on this initiative.

If passed, Initiative 427 would expand Medicaid to working age, able-bodied adults without children, leaving taxpayers responsible for their medical expenses. A common myth about Medicaid expansion is that the federal government will pay for expansion costs. While it is true that Nebraska will be reimbursed for a portion of expansion costs, this statement is incredibly misleading. Nebraska taxpayers will be responsible for over \$30 million in 2019 alone. Nebraska, with its limited budget, cannot afford expansion costs as is.

Governor Pete Ricketts' administration has successfully fought to maintain Nebraska's balanced budget during tough economic times and budget shortfalls. Initiative 427 would place an unpredictable financial mandate on the state's budget and would make it impossible to maintain a balanced budget without increasing taxes or cutting funds to existing programs – if not both. Additionally, the Nebraska Economic Forecasting Advisory Board is predicting a \$232 million budget shortfall between now and fiscal year 2020 to 2021 – excluding any potential Medicaid expansion funds. Between an already tight budget and upcoming revenue shortfall, the additional costs of Medicaid expansion would throw the budget into crisis. Increased taxes or cuts to existing programs would also harm many Nebraskans.

Nebraska's top-three spending categories are K-12 education, current Medicaid expenses and the University of Nebraska, making these categories the most at risk for budget cuts in order to fund Medicaid expansion. Cuts to education would not only harm our children but would likely cause an increase in property taxes to make up for lost funds. Additionally, none of the expansion funds can be used to support existing Medicaid recipients, cutting services to people with disabilities, children and pregnant women at risk. The University of Nebraska is also at risk of losing even more state funds in addition to the cuts of recent years. All students should be cautious when heading to the polls on Tuesday; a vote for Medicaid expansion could mean a vote for increased tuition prices and a reduction in campus services.

It is also likely that expansion costs will far exceed projections, just as costs have in nearly every state that has expanded. Iowa spent over \$150 million more than expected. Kentucky's Medicaid program is facing a \$296 million budget shortfall due to unpredictable costs (yes, the program itself is that much in debt). Ohio's Medicaid program costs the state an average of \$437 million a month.

Due to unpredictable costs, many states have also begun requesting to cut back Medicaid services. After Massachusetts' Medicaid spending increased to nearly 40 percent of the state's budget, the governor submitted a request to the federal government to cut services to the expansion population. Just two years after expanding Medicaid, Arkansas's governor submitted a request seeking to scale back the income requirements for the expansion population from 138 percent of the federal poverty line to 100 percent. Medicaid expansion has been harmful in other states, and Nebraska should look to them as an example.

The bottom line is Medicaid expansion is something Nebraska simply cannot afford, and individuals should vote "no" on Initiative 427.

Bailey O'Connor is the president of UNL College Republicans.

SourceURL: <https://www.baltimoresun.com/health/bs-hs-exchange-audit-20181106-story.html>

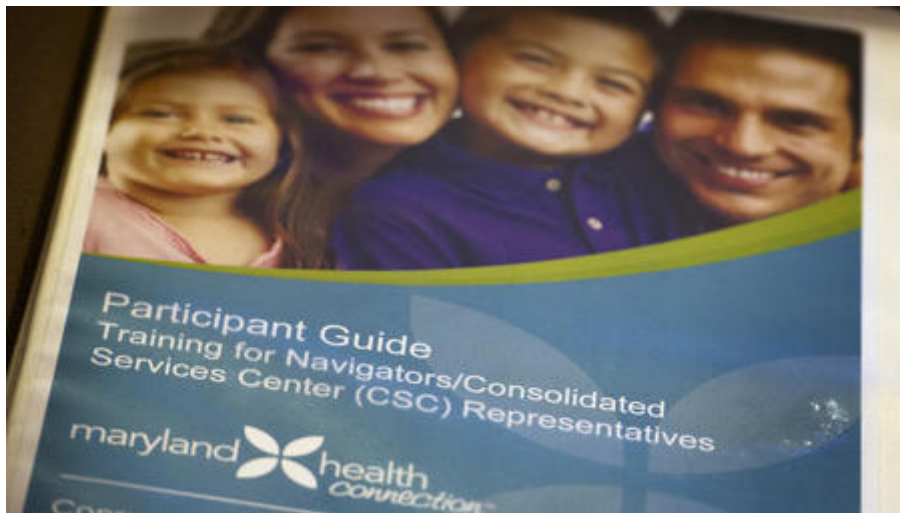
Maryland might not have properly vetted some Medicaid enrollees

Maryland may have allowed residents who did not qualify for Medicaid into the government health program for the poor by failing to consider all of their

income, according to a routine audit of the quasi-governmental agency that oversees the Maryland health exchange.

The Maryland Health Benefit Exchange was created under the [Affordable Care Act](#), known as Obamacare, to run an online insurance portal where people could buy insurance if they did not get coverage at work. In Maryland, residents also sign up for Medicaid through the exchange.

Close to 1.3 million Marylanders — about 20 percent of the population — are enrolled in Medicaid, which was expanded as part of Obamacare.



During the audit, spanning fiscal 2015 through fiscal 2017, auditors checked a small number of cases and found that more than a third of the time the exchange considered only state-collected income information and not data from federal sources.

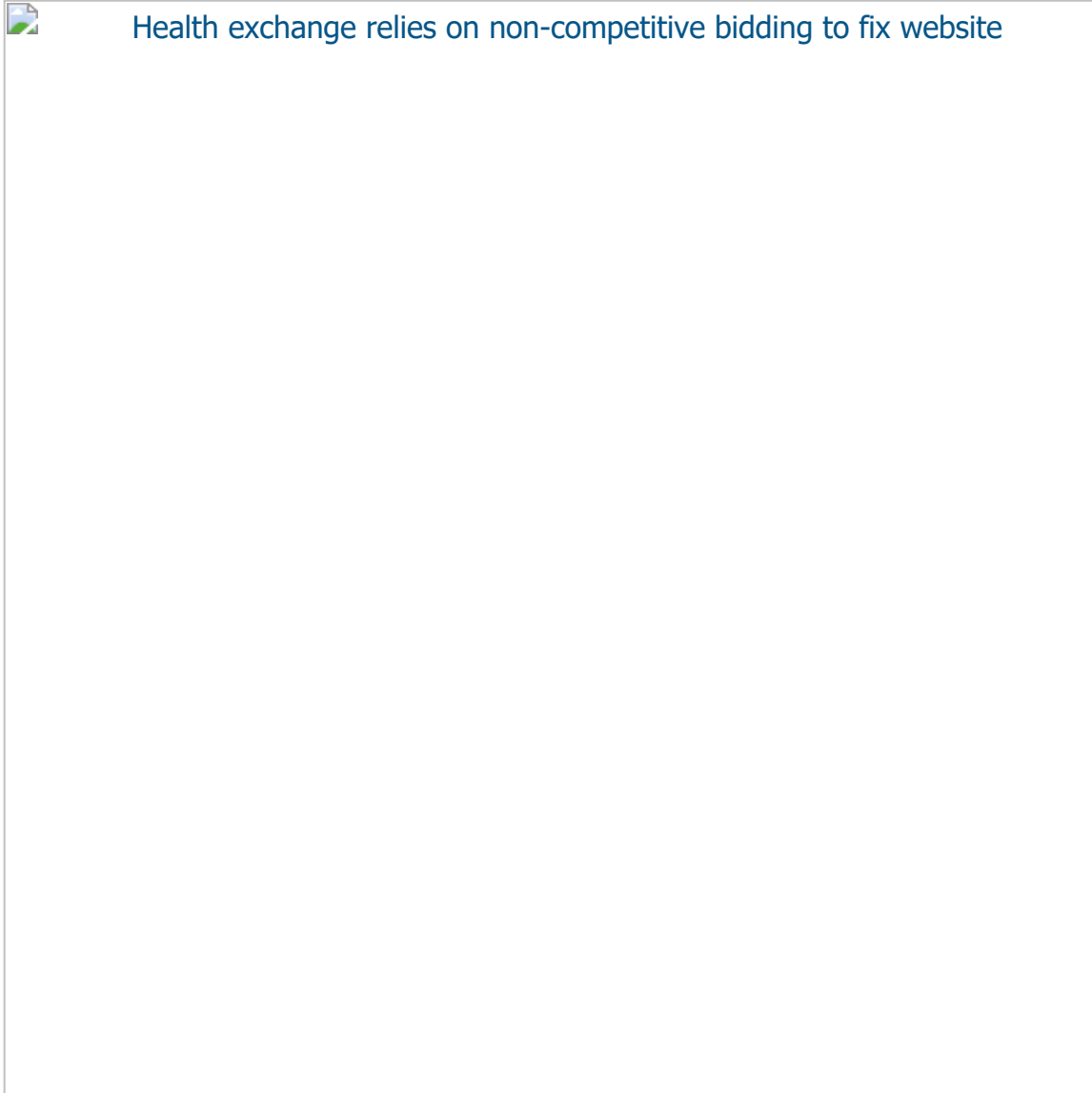
Federal sources are far more comprehensive, possibly allowing people who earn too much to enter or remain in the Medicaid program.

The report also found that the agency did not properly limit who had access to the system and could override eligibility determinations.

The auditors did not determine how many people, if any, received benefits to which they were not entitled.

Michele Eberle, the executive director of the Maryland Health Benefit Exchange, did not dispute the bulk of the findings in a written response to auditors and said the agency would retool its procedures to consider all income sources. She said

deep access to the system would be limited to so-called SuperUsers whose job is to address eligibility snafus.



Auditors also found a half dozen other contracting and security issues at the exchange as part of the financial review, some of which were related to the botched launch of the exchange in 2014 and the scramble to fix it. The site crashed on the first day and required a complete technical overhaul. It has run smoothly ever since.

Eberle said systems are all being improved to address the issues, such as not clearing certain information technology contracting with the exchange board, an issue [first reported by The Baltimore Sun in 2015](#); potentially limiting bidding by not allowing sufficient time for proposals; and not properly securing data on formerly used servers.

SourceURL: <https://www.modernhealthcare.com/article/20181105/NEWS/181109964>

Virginia facing high unexpected Medicaid costs

By Associated Press | November 5, 2018

Virginia is facing a huge bill for unexpected Medicaid costs that hamper proposed new spending on things like school improvements or tax breaks for the poor.

State officials said Friday that Virginia has about \$460 million in unforeseen Medicaid costs.

The new costs, first reported by the Richmond Times-Dispatch, are unrelated to Virginia's recent decision to expand Medicaid eligibility to low-income adults under the Affordable Care Act.

Instead, Secretary of Finance Aubrey Layne said much of the new costs stem from faulty forecasts overestimating the benefits of having private health insurers cover a greater number of some of the state's more costly Medicaid recipients. Another reason for the increase is a higher-than-expected enrollment of children in the state's Medicaid program, he said.

Medicaid is a federal-state collaboration that provides publicly funded health care to poor and disabled people. Its share of the state budget has been steadily

growing for several years, limiting Virginia's ability to spend in other areas like education and transportation.

The new Medicaid costs could complicate how lawmakers deal with projected windfalls when they take up the state budget during next year's legislative session. State revenues could grow by hundreds of millions of new dollars due to last year's federal tax overhaul and a court ruling that broadened the state's ability to tax online purchases.

Democratic Gov. Ralph Northam has announced he wants to use part of the extra state revenue from federal tax cuts to give a tax break to low- and moderate-income families. Northam wants to make the earned-income tax credit fully refundable.

Republican state Sen. Bill Stanley has been pushing to use new income from online sales taxes to repair and replace the state's aging public school buildings, many of which are in poor condition.

"I was kind of heartbroken on what effect that will have" on school spending, Stanley said when the governor told about the new Medicaid costs Thursday.

Northam spokeswoman Ofirah Yheskel said the governor and his team are still developing a proposed budget to present to lawmakers in December.