



Virginia MIRC <vamirc@mirc.virginia.gov>

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## New MIRC Comment

1 message

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Thu, Oct 3, 2013 at 2:08 PM

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**Organization Name** - retired

**Comment** -



Medicaid.docx

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I hope that Virginia expands Medicaid because otherwise valuable federal dollars and jobs will be lost. Essentially the federal government is promising \$9 for every \$1 spent by Virginia. If the federal government reneges, then Virginia can cut back but I know that would be difficult. To offset any Virginia costs, I have two suggestions. One is to tax 20% of the value of a house in excess of the median value of houses sold in Virginia if the homeowner enters a Medicaid-paid long term care facility. First all houses sold at below the median level are exempt and second only the portion above the median level is taxed. Medicaid should be for poor persons but many middle- and upper-income people benefit from it by putting "grandma" in a long-term care facility after the family home has been transferred out of "grandma's" name. My second idea is to allow for differential payments based on if a patient sees a nurse, a nurse practitioner, a physician's assistant, or a physician. I am on Medicare and if I go to Harrisonburg Medical Associates, for example, Medicare pays the same regardless if I see a nurse practitioner or a physician. Medicaid could offer no co-pays if one sees a nurse, nurse practitioner, or physician's assistant and a small co-pay if one sees a physician. Medicaid could then reimburse for service based on the degree of the provider. This would encourage poor to see nurses or nurse practitioners if sufficient and thus save the state money. Also in various areas with community clinics Medicaid could contract with clinics to save paperwork and money if enough people were to be covered.