



Virginia MIRC <vamirc@mirc.virginia.gov>

New MIRC Comment

1 message

Sun, Sep 29, 2013 at 7:26 PM

Reply-To: [REDACTED]

To: vamirc@mirc.virginia.gov

First Name - Kathryn

Last Name - Merritt

Organization Name - VOPA

Comment - I would like to speak on the Medicaid expansion



Expand Medicaid in Virginia.docx

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I am writing to urge the commission to expand Medicaid in Virginia support Medicaid Expansion because it will enable thousands of adults with mental health disorders to gain access to mental health care. During the past year alone, six in ten adults experiencing serious mental illness went without mental health care, in large part due to having no insurance.

We are caregivers for two adults who are unable to work because Of a mental disability, they have no insurance, because of their ages we cannot include Those on our insurance, Medicaid would help them receive the care they need.

Under Virginia's current strict eligibility, thousands of low Income adults who live with mental illness do not qualify for Medicaid. Expansion will change that. Virginia already spends millions of dollars through the State General Fund to provide health care for people who are uninsured. Medicaid Expansion would be a more cost effective way of providing coverage.

Medicaid Expansion Debate Has Highlighted Medicaid Concerns

- Concern that federal government might not live up to its commitment for ongoing funding, due to its focus on federal debt
- Concern about local political backlash
- Concern about access and lack of providers to serve more Medicaid patients
- Concern that current Medicaid program can be improved and should be reformed first.
- State Medicaid programs are designed and administered by state policy makers, within federal rules.
- Each state Medicaid program is unique
- State programs vary based on state decisions on

- Eligibility, provider payment levels, benefits and limits on benefits, cost sharing, delivery systems, use and types of managed care, quality requirements, special initiatives and innovations
- Decisions reflect state priorities, fiscal realities, health care systems, traditions and values

Summary

- States have several options to include reforms when covering adults to 133% of FPL
- Personal responsibility requirements, through cost sharing, premiums, incentives for healthy behaviors
- Private insurance options
- Managed care, with mandatory enrollment
- Coordinated, integrated care tailored to populations with chronic conditions.
- CMS must approve plans, within federal law

Submitted by,

Kathryn Merritt