



WE NEED YOU!

2025 KICK OFF CHAPTER CALL



Housekeeping Items

- All participants are muted.
- There will be time at the end for Q&A, but you may ask questions using the chat box function at any time.
- If you have any technical issues, please send us a message in the chat. We will do our best to assist you.
- We will share a recording and PowerPoint slides with attendees afterwards.

2025 KICK-OFF CHAPTER CALL

January 23, 2025

Agenda

- Welcome
- Medicaid Update
- Tools and Resources
- What To Do Now
- Q&A





Claire Manning
Senior Director of
Advocacy &
Mobilization



Kim Musheno
Senior Director of
Medicaid Policy

Medicaid Update

The time for action is
now!

Congress is moving
rapidly

Staff and Members of
Congress need to
understand the impact
of Medicaid

New members and
staff need to hear
about how Medicaid
helps families and
individuals

Better to prevent cuts
than try to restore
them later

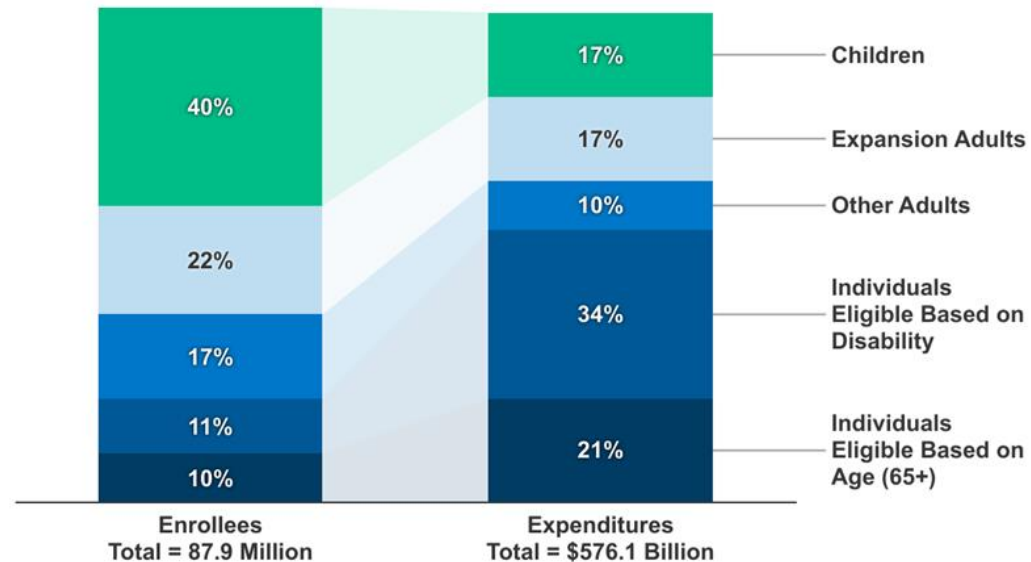
Reminder about Medicaid

- Medicaid covers nearly 80 million people.
- It's an entitlement, meaning it covers the actual amount spent on care based on eligibility.
- There is no maximum amount.
- Its cost is divided between states and the federal government. Each states pay a different portion, depending on a formula ([FMAP](#)).

Medicaid Facts

Figure 3

The Majority of Medicaid Spending is for Individuals Eligible Based on Disability or Age (65+).



NOTE: Includes full and partial benefit enrollees ever enrolled during 2019. Total may not sum to 100% due to rounding.

SOURCE: KFF analysis of the T-MSIS Research Identifiable Files, 2019.

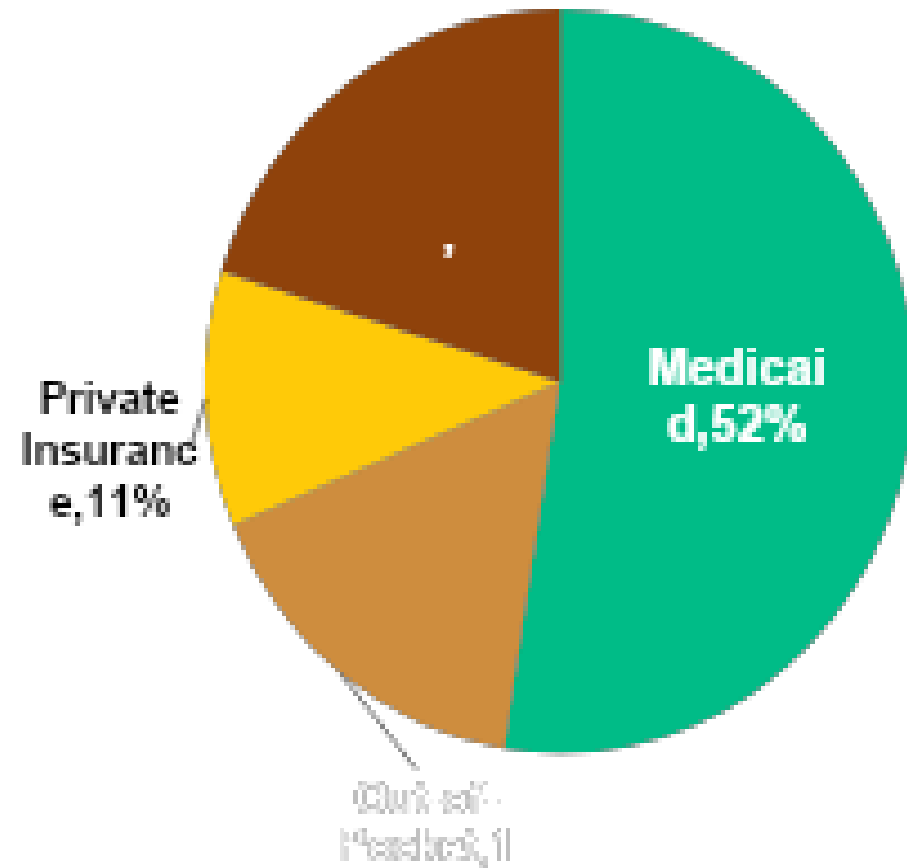
KFF

Over 6 million adults receive Medicaid-funded LTSS. ([Community Living Equity Center](#))

Medicaid is the primary payer of LTSS, this is particularly true for HCBS.

In 2020, 6% of Medicaid enrolled use LTSS, but those enrolled made up 37% of Medicaid expenditures. ([KFF](#))

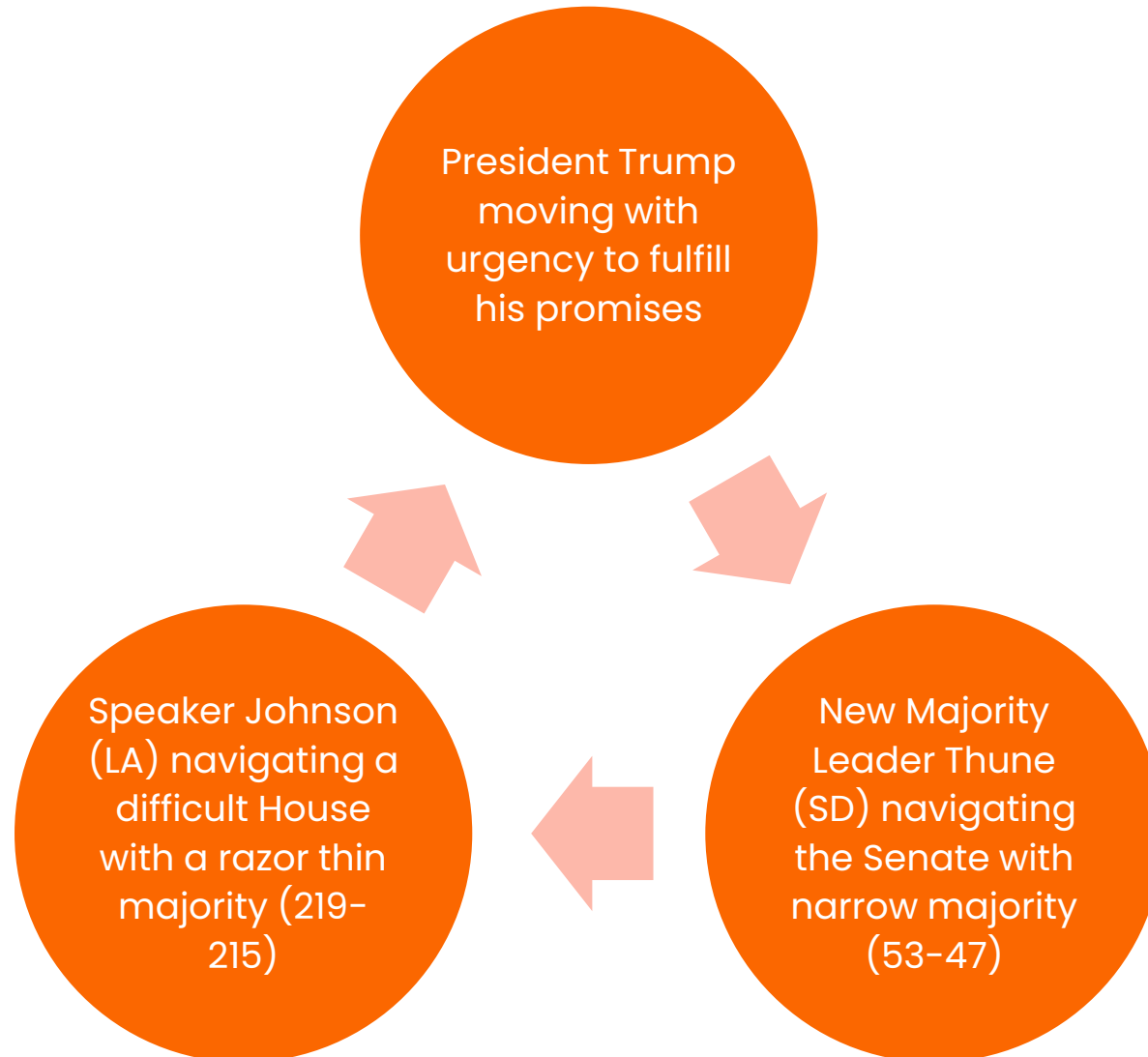
Medicaid pays for the majority of LTSS



Total National LTSS Spending = \$379 billion

SOURCE: KFF estimates based on 2018 National Health Expenditure Accounts data from CMS, Office of the Actuary.

What We Know: The Landscape



- Dominant policy goal --to greatly reduce federal spending and extend and enhance tax cuts
- Extremely divided and partisan atmosphere

What We Know So Far

- Medicaid is the big target
- Policies designed to reduce the number of people who can receive services
- Policies designed to reduce the types of services people can receive
- We need to educate all Members of Congress about the importance of Medicaid



How Will They Make Cuts?

- Use **Reconciliation** – a budget process allowing Congress to overcome any filibuster
- This means they only need 51 (not 60 votes) in Senate
- First, House and Senate must agree on a topline number – Budget Resolution
- Then they send instructions to various committees to make changes to programs to "reconcile" the program with the overall budget, e.g. cut Medicaid to meet the spending targets.

One Versus Two Bill Strategy



President Trump and House leaders want one big reconciliation bill.



Senate Majority leader Thune (SD) leaning toward two-bill strategy



Ongoing debate about structure and menu of options

Timing

- Congressional leaders want to move as quickly as possible
- A menu of options for cuts is being discussed NOW
- Budget blueprint by end of Feb.
- House Speaker Johnson announced goal to complete reconciliation bill by April 20
- Goal to have President sign by May 26

Our job is to SLOW them DOWN and get Medicaid cuts off the menu!



House Reconciliation Menu Revealed



Looking for over \$5 Trillion in cuts.



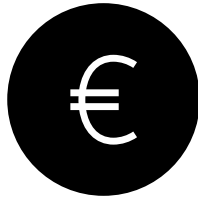
Under Medicaid section:
"Making Medicaid work for
the most vulnerable"



Suggests per capita caps to
cut \$918 Billion over 10 yrs



End higher Medicaid
reimbursements for "able-
bodied adults" - \$690 Billion



Lower federal matching
(FMAP) percentage - \$387
Billion



Adding work requirements -
\$120 Billion



Repeal American Rescue
Plan FMAP unspent funds -
\$18 Billion (there are no
unspent funds!)

Leverage Points

Small House Margin	Differing Priorities	Hard To Put Issues Together
• After a few departures, House GOP majority will temporarily be 217–215 • Losing 1 vote means a 216–216 tie. • That fails • 3 seats will be filled in April and May	• Some care about deficit and want to pay for tax cuts • Some just want to cut federal programs • Some skittish about deep program cuts • Some want to increase spending (border, defense) • Some want to extend 2017 tax cuts • Some want more tax cuts	• Some who want to cut spending will tie that to raising the debt limit • Some who want more spending will object • Some will want to pay for tax cuts; some don't • Some will want quick wins

Huge Cost-Shift to States!

- Federal government covers substantial portion of state expenses through the Federal Medical Assistance Percentage (FMAP).
- Reducing federal contributions will compel states to either increase their own spending to maintain current service levels or reduce Medicaid services.
- States may need to raise taxes, cut funding from other critical areas, or scale back Medicaid coverage.
- Such measures could lead to decreased access to healthcare and increased strain on providers and increase waiting lists for HCBS.
- Educate Governors and state legislators!

Key Activities to Stop Cuts

Educate

- **Educate chapters and advocates through webinars and tool kits**

Collaborate

- **Collaborate with broad based national coalition partners**

Identify

- **Identify initial Medicaid targets using several factors:**
 - **Family member or past federal disability supporter**
 - **Chapter strength,**
 - **Moderate members, swing districts, close race**

Meet

- **Meet with The Arc champions**



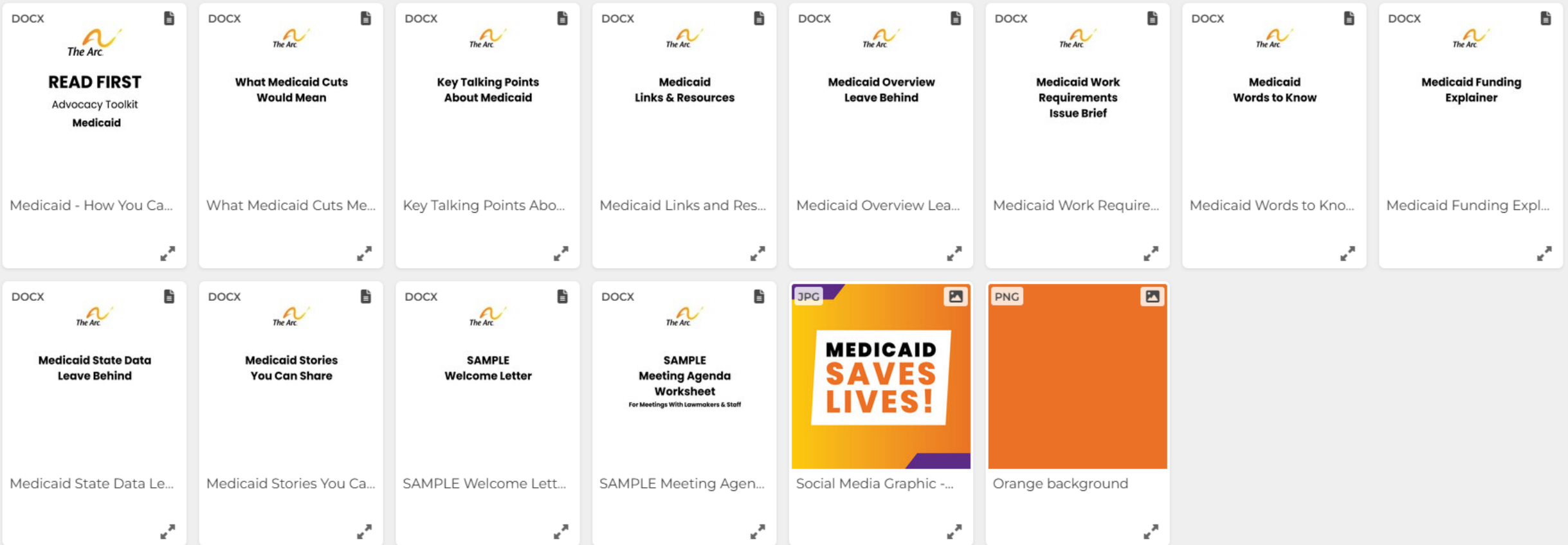
Tools & Resources

Our **NEW** 2025 Medicaid Toolkit

thearc.org/advocacytoolkits

2025 Medicaid Toolkit

This toolkit includes resources you can use to educate people with disabilities, family members, and lawmakers about the importance of and need for continued investment in Medicaid home and community-based services.





Key Medicaid Talking Points

What's Medicaid?

Medicaid is one of the biggest health care programs in the country. It helps millions of people in the U.S. get health care. This includes people with disabilities, seniors, low-income adults, pregnant women, and children. It also helps millions of people with disabilities access long-term [supports](#) and services so they can live at home in their community. Medicaid often has different names in different states. You can find yours [here](#).

Medicaid is a federal program that has nationwide requirements. Congress sets baseline rules around eligibility and financing that states must follow. Each state can add to what Congress does as it administers and runs its programs.

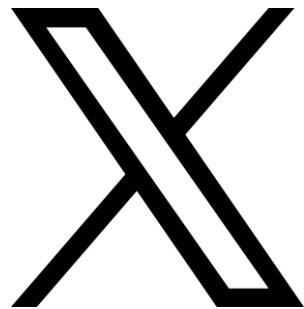
Both the federal government and state government pay for Medicaid services. Each state is entitled to federal funds to pay for Medicaid based on its [federal medical assistance percentage \(FMAP\)](#), which can vary from 50% in the wealthiest states to 75% in poorer states. As a federally protected entitlement, the federal government **must** pay its part of the services for eligible people if the state follows all federal laws and regulations.

States pay their part of Medicaid services in many ways. They may pay through general revenue, taxes, or county payments. The federal government can make changes about what is acceptable for states to use to match the federal money.

How does Medicaid help people with disabilities?

The Arc's Action Center & Social Media

- We have updated petitions & ways to write members of Congress at thearc.org/action
- #WeActWednesday on social media
- Follow, share, uplift, subscribe, and tag us on



Join Our Trainings

Calling All Advocates: Medicaid Advocacy in 2025

January 29, 4 pm Eastern Time

[Register here](#)

RECORDED WEBINARS

Protecting Medicaid's
Future in 2025

[Recording](#)

[Slides](#)

How Medicaid
Services Are Financed
& Proposals to Limit
Their Costs

[Recording](#)

[Slides](#)

Post Election & Powering
Medicaid Advocacy –
What's Next

[Recording](#)

DISABILITY POLICY SEMINAR

Save the Date

April 7-9, 2025

The Westin Hotel Downtown, Washington, DC

disabilitypolicyseminar.org

The background is a gradient of orange and yellow. On the left, there is a white chevron pointing right. On the right, there is a white chevron pointing left. The text "WE NEED YOU!" is centered between these chevrons.

WE NEED YOU!

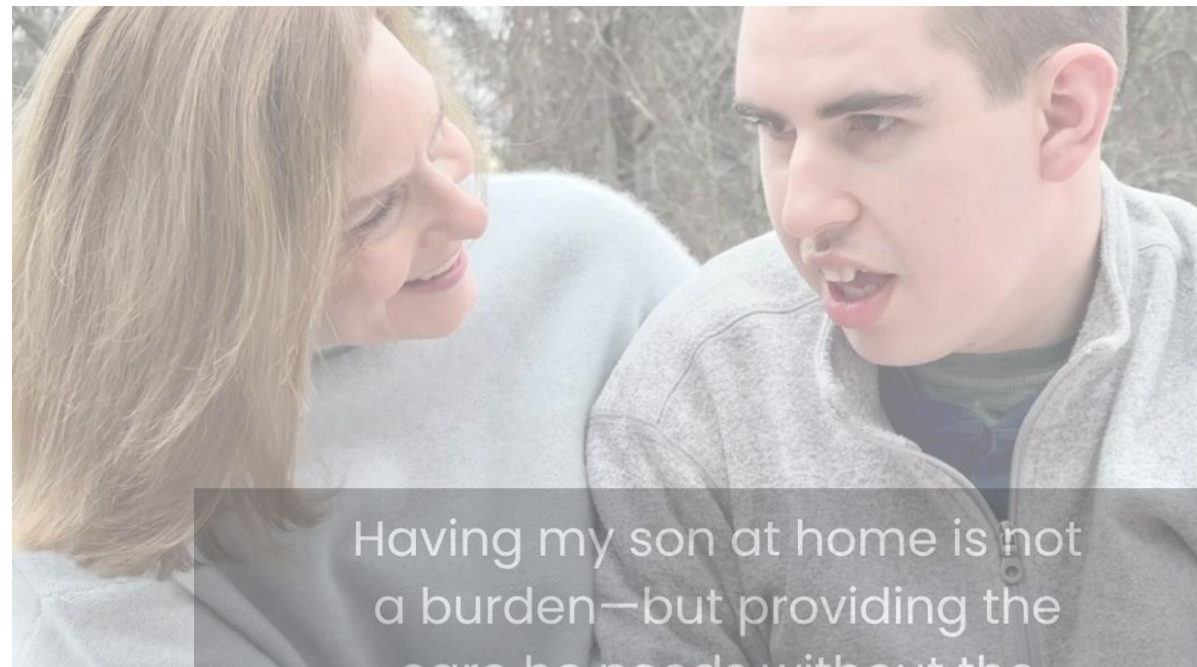
1

Educate Your Members of Congress

- Introduce yourself – Meet at District office! Town Hall events! Recess is coming up! (Use Lawmaker Outreach toolkit)

*****Tell us what you hear*****

- Bring people to share their stories about Medicaid
- Invite your lawmakers to see your Medicaid programs



Having my son at home is not a burden—but providing the care he needs without the help he's due is **taxing at best and unsustainable and dangerous at worst.**

– Barbara

Educate Your Network & Ask Them to Advocate!

2

- **WE NEED PEOPLE CONTACTING CONGRESS:**
Promote action alerts
- Follow us on social media – we will post updates there!
- Share your own messages and stories online. We have sample content in our toolkit – we need a drum beat!



How to get involved

Educate

- Contact your members of Congress to educate them about the importance of Medicaid.

Share

- Share Action Alerts with your networks.

Connect

- Connect Storytellers to members of Congress (+ us!) and invite us to speak with your advocates.

Act

- Come to DC for: Disability Policy Seminar, rallies, in person meetings.



Questions?



THANK YOU

Find us at
thearc.org/staff