



# Maryland's Medicaid

**Maryland Medicaid covers essential supports and medical care for people with intellectual and developmental disabilities and low income children, adults and families. Maryland Medicaid exists because of the Federal Medicaid Program funding and policies. A cut to federal Medicaid cuts services to Marylanders or forces Maryland to assume greater costs.**

**In addition to the federally-mandated benefits package these services are available:**

- Long-term Care Services for people with disabilities and seniors
- Home and community-based waiver services for people with intellectual and developmental disabilities
- Autism Waiver which prevents out of home placement for children on the Autism Disorder Spectrum
- Personal Care Services for seniors and people with disabilities
- Hospice Care
- Case management rehabilitation services for HIV-infected individuals and other targeted populations
- Pharmacy services (for beneficiaries not eligible for Medicare Part D)
- Clinic Services
- Physical Therapy, Podiatry Services, Kidney Dialysis Services
- Ambulatory Surgical Center Services
- Respiratory Equipment Services
- Diabetes Care Services
- Substance Use Disorder Services and Mental Health Services
- Dental Coverage for low Income Pregnant Women
- Vision Care Services (eye examination every two years)

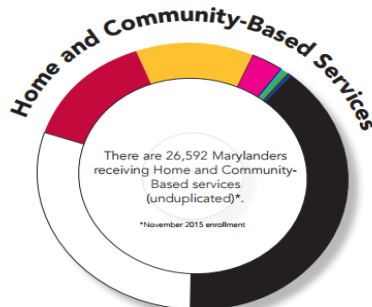
# Don't Cut Services for Marylanders

To boost health outcomes and reduce hospital stays, Maryland Medicaid offers a full range of services for all Medicaid participants. For participants younger than 21, Maryland Medicaid also covers dental services and dentures, speech, physical and occupational therapy, eye glasses, hearing aids, private duty nursing, and school-based health services.

15.7 % (133,677 of 827,426) of Medicare Beneficiaries were people with disabilities in 2012.

Maryland's home and community-based services waivers authorize Maryland Medicaid to provide services for 23,000 Marylanders with intellectual and developmental disabilities. These waivers enable people with developmental disabilities such as cerebral palsy, autism and Down syndrome to remain in their community and home. Before these waivers, thousands of people with intellectual and developmental disabilities were warehoused in institutions, costing Maryland significantly more than if people receive services in the community.

LONG TERM SERVICES AND SUPPORTS  
Home and Community-Based Services Waivers



□ Personal Assistance Services  
Provided through Community First  
Choice and Community Personal  
Assistance Services programs.  
Serves 9,565 Marylanders.

■ Medical Day Care Waiver  
Offers services in a community-  
based day care center for  
individuals ages 16 and older,  
up to seven days per week, for  
at least four hours per day.  
Serves 4,602\* Marylanders.

■ Community Options Waiver  
Provides home-based or  
assisted living facility services  
to older adults and individuals  
with physical disabilities.  
Serves 4,026 Marylanders.

■ Community Pathways Waiver  
Provides services and supports  
for individuals with  
developmental disabilities.  
Serves 12,755 Marylanders.



*The Arc Maryland is dedicated to the rights and  
quality of life of people with intellectual and  
developmental disabilities*

Your constituents with disabilities, their families, and their direct support care givers have questions and concerns with the proposed changes to Medicaid and urge you to #SaveMedicaid.

They are saying:

- We did not vote for health care reform at the expense of the most vulnerable.
- Some people with disabilities need the help of Medicaid services to get up and out to work to save their independence and jobs.
- What is a "per capita cap" and what would it mean for me and the over 8,000 children and adults with intellectual and developmental disabilities waiting for Medicaid –funded services in Maryland and thousands of children with Autism waiting for the Medicaid Autism Waiver so they can remain with their families?

Please oppose cuts to health care and Medicaid funding. Caps on Medicaid will be extremely damaging to people with disabilities and many others.

## Consequences to Maryland

- ❖ Since the passage of the Affordable Care Act in 2010 Maryland has established the Maryland Health Benefit exchange (MBHE), expanded Medicaid to cover those previously covered under Maryland health Insurance Plan (MHIP), and repealed MHIP. These changes have resulted in a \$311 million savings in hospital uncompensated care.
- ❖ To date these changes have related to a significant increase in health care coverage for Marylanders (291,000 individuals).
- ❖ Uninsured decreased by more than 1/3 to 6.7%, which is below the 9.4% national average.
- ❖ Repeal or substantial amendments to the Affordable Care Act or cuts to Medicaid such as caps and block grants will require the State of Maryland to consider significant financial and policy decisions.
- ❖ Currently the Medicaid expansion is fully funded by the federal government, with plans to decrease Federal funding to 90% in 2020. Maryland can't afford repeals that would start eliminating the enhanced federal share of funding for coverage of the Affordable Care Act expansion population.

### What will per capita allotments mean for Maryland?

- ❖ The amount of the federal allotment would be the product of the state's per capita allotment for the 4 major beneficiary groups (aged, blind and disabled, children, and adults) and the number of enrollees in each of those four categories. This would mean that Maryland's per capita allotment would be based on the state's 2016 average Medical Assistance and non-benefit expenditures.

### What will block grants mean for Maryland?

- ❖ State funding would be determined using a base year in a manner that would assure states transition individuals currently enrolled in the Affordable Care Act's Medicaid expansion into other sources of coverage.
- ❖ If any enhanced Federal funding currently available to states for Medicaid expansion is repealed, Maryland will have to decide whether to maintain the expansion. If Maryland preserves the average, expenditures will increase substantially (\$1.27 billion in FY18, \$1.33 billion in FY19 and by FY2020, expenditures will be \$1.5 billion dollars).



## Stories from Maryland Families

### Why Medicaid Matters To Me.....Because it supports my son

Thirteen years ago, my son was strangled by his umbilical cord during delivery. He suffered a brain hemorrhage and was flown to Johns Hopkins Hospital NICU; he coded several times during the flight and his condition was grave. We were told to get in touch with the hospital chaplain and to prepare funeral arrangements.

Medicaid supports my son who is permanently disabled, has intellectual disabilities and uncontrolled seizures.

Medicaid supports my son by providing the funding for skilled caregivers to assist with his 24/7 care.

Medicaid supports my son who requires \$500.00 of diaper supplies every 30 days.

Medicaid supports my son who requires \$1500.00 a month in medications to try to control his seizures.

Medicaid supports my son because regular insurance won't.

Medicaid supports my son because it allows him to live with his family at home with his dog and two cats. It supports him to be a part of a family and a bigger community, to develop skills and a quality of life that otherwise he would not have.

Medicaid supports ME: I am a single parent, trying my best to balance his care and working full time. Without the supports he receives through Medicaid, we would face crippling medical expenses and lack of skilled care; critical needs which I cannot financially absorb.

Losing Medicaid would bankrupt us; we would have a bigger problem of homelessness, needing welfare and social assistance. With the push to repeal and replace the Affordable Care Act and cap the spending limit for Medicaid, this short-sighted attempt will result in long-term, far-reaching detrimental consequences.

Thank you for your consideration, Laura Silverman- Finksburg, Maryland

\*Thank you to the Maryland Developmental Disabilities Council for this family's story.\*

After being on the waitlist for the Autism Waiver for 8 1/2 years, our son, Elliott Brown, finally began receiving services at 15 years old.

Elliott has significant disabilities including Autism and Down syndrome. He also has disruptive behaviors which have required substantial intervention over the years.

Most notably, he was Inpatient at Kennedy Krieger Institute's Neurobehavioral Unit for nearly five months. Our health insurance denied coverage for this admission. Without the Medical Assistance provided under the Autism Waiver, Elliott would not have gotten the help that he so desperately needed.

Because of the Waiver, we were able to obtain assistance at home and when taking Elliott into the community once he was discharged. If Elliott had not received the intervention and supports, he likely would have needed residential care. Such care costs substantially more than in-home supports and would have broken apart our family. We very much want to keep Elliott at home but know we need the continuing support of Medicaid programs to do so. Please do not cut these vital Medicaid services for disabled individuals.

Barbara Brown- Bel Air, Maryland



My beautiful son Michael at 16.

To whom this may concern:

My son Michael was born with Prader-Willi Syndrome in 2001. I feared he would have a life with no meaning with very little support. As the years have gone by he has developed many medical issues, such as Autism, Vitiligo (auto immune disease), scoliosis, kyphosis and much more. Since 2008 Michael had been on the waitlist for the Autism Waiver and after a nine-year wait, we were informed he was to start receiving supports.

The Autism Waiver has such an impact on families with a child with a disability; we need to have this Waiver for emotional, educational and financial support. At one time the doctors said my child will amount to nothing, but with the Medicaid Waiver and everything that it has to offer, he can grow up with the support he needs, be a good citizen and live in our community. I believe that Michael, with the support of the Waiver, can accomplish this.

Thank you very much,

Terry Contrino- Bel Air, Maryland

# Medicaid Matters

This is my daughter Hanna. Hanna is here today because of the availability of Maryland's funding sources for individuals like Hanna. Everything Hanna touches from the moment she gets up in the morning has to be specialized and unique to her health, medical, and disability needs.

The medical coverage, services and supports furnished by the state of Maryland are required to care for Hanna and maintain her quality of life. These supports have supplied support care, home modifications for bathing and home access, vehicle modifications to access the community, wheelchair and other durable medical supply coverage as well as medical coverage that takes care of the extremely expensive medical care Hanna requires.



Hanna did not ask to be born with her profound disabilities. No one chooses this or can even plan for it. Without supports some people with disabilities and their families have difficulty functioning. We need to continue to have available the supports necessary to care for people with disabilities in the community. These supports help give a high level of health, comfort and happiness that every person deserves.

Please do not support any action that cuts or reduces the level of services, support and medical coverage that the state of Maryland already allocates for children and adults with disabilities.

Sincerely,

Kenneth and Heather Newcomb, parents of Hanna Newcomb- Havre De Grace, Maryland

## Katy

It is an understatement to say that a cut to the Medicaid budget would be devastating to my family. My husband Mark and I have three children, Andrew (25), Katy (19), and Alexandria (Alex 16). Our daughter Katy has Angelman Syndrome and Autism. She is nonverbal but able to communicate her wants and needs in many ways. Normally I am a very positive person and don't share our families struggles. But, because cuts would be so detrimental, I feel I need to explain without the positive slant. What I am sharing with you I would not share with Katy because I believe in encouragement and wouldn't want to hurt her feelings.

Life is certainly challenging in our house. Katy needs to be supervised at all times. She is 19 years-old but on the grade level of about first grade. She is very curious and mischievous. She has flooded our kitchen, bathrooms, broken a TV, toilets, destroyed dressers, ruined a sofa, broken chairs, started a fire in a wall, put holes in our wall, ruined doors, broken windows - this is only the expensive destruction. There are also numerous small things that have been broken and break daily. All of these things happen while Katy is under supervision. She is really fast. Can you imagine what she could do if left alone? Mark will say imagine you have a toddler that is 90 pounds and as fast as a Tasmanian devil.

Katy is a part of the Maryland Autism Waiver. This waiver is part of Medicaid and has helped our family transition from barely surviving to thriving. Katy started receiving services in 2008. Katy receives 25 hours/week of intensive support services where a tech works with Katy on goals. The goals differ from school goals and include being a part of the community. The Waiver also includes Intensive Therapeutic Integration where 15 hours/week Katy is in a group setting working on social and behavioral goals. Katy is progressing and we see improvement. She has the typical teenage mentality that everyone else is better than her parents. While the entire family helps Katy to learn new things and practice existing skills we are not able to dedicate 25 hours of intensive work a week.



We also receive yearly respite hours. My husband and I are not able to leave Katy for a weekend away but we can go out on a date. We even stayed out overnight but were back early to give Katy her medications. We are still working up to a weekend away. Respite care also allows us to work. Having a member of our family with significant disabilities has impacted us all. I can no longer work full time; Mark has given up better opportunities. We can't leave Maryland because of all the supports Katy receives. Andrew and Alex have had to miss school and social activities because Katy was sick, having a meltdown, or we did not have child care and they needed to watch their sister.

If services from the Autism Waiver are taken away, our family will not be able to fully function. Receiving supports allows me to cook dinner, clean up and do laundry. Alex is able to do his homework. Mark is able to work late or work at the dining room table. None of this would be possible without the Waiver. I would be happy to discuss Medical Assistance, the Autism Waiver, and having a child with a disability. I ask that you please DO NOT CUT MEDICAID.

Kimberly Marchman- Aberdeen, Maryland

## Sam

My son Sam is charming, funny, and affectionate. He also has autism. Not the kind of autism you see in the movies where a beautiful child silently reveals his special powers. Sam has the kind of autism where he's screaming in frustration at 3 a.m., while banging his head against the wall until it bleeds. When Sam's adolescence arrived, aggression came with it. Sam pulled out all my hair; I was covered with bruises, and had little sleep. On school vacations, we were imprisoned at home, not even able to get to the grocery to buy milk.

Today Sam lives in a house with two other young men, supported by wonderful trained staff. He goes hiking in the woods and swimming at the Y. The exercise helps him stay emotionally stable. A behavioral psychologist helps him practice self-calming. Sam has not had a serious aggression in years. And I am Mommy again, not his 24/7 caregiver, jacked up on coffee, desperately trying to stay awake and keep him safe. Sam and I go out to lunch at restaurants, accompanied by his staff. Sam laughs and gives me a hug.

All this is made possible by Medicaid. Medicaid changes lives. It changed Sam's life. It's changed my life.

Ms. Pederson- Anne Arundel County

## Carter

Our son, Carter, has autism. Because of Medicaid Home and Community waiver funds, he is now able to live on his own and be a successful young man. While living at home he was violent and aggressive and we could not handle his needs. He was on a severe downhill spiral. We have aged out of the work force thus this funding is critical for his independence. It allows Carter to work a job, volunteer in his community and have a living arrangement that works for him. It allows him to have his freedom as he gets older. He also receives health care which is important to his overall wellbeing. The services made possible by Medicaid funds make our son's life much more enjoyable and gives him the satisfaction of being as successful young adult. Carter is living a life of his choosing - he is a joy to be around.

Thank you,

Robert and Susan Bodell- Boyds, Maryland

The loss of Medicaid would be devastating for individuals with disabilities and seniors on a fixed income. Many of them already live at poverty level. Medicaid coverage makes a huge impact on their lives and ability to access services and supports.

Here are real life examples:

- Scott receives SSI and SSDI. His total monthly income is \$753. He pays monthly room and board of \$375, day program activity fees of \$55, OTC medications of \$45.52 and other non-covered medical expenses of \$55. He does have the luxury of cable which costs him \$37 a month. After these bills are paid he has \$185.48 remaining to cover personal care items, clothing, dental, recreation and all other costs. If he did not have Medicaid, he would have to pay Part B Medicare fee of \$134 and Part D prescription plan of at least \$50 a month. Scott would then have \$1.48 a month left to cover the rest of his other needs. Scott is quadriplegic with an intellectual disability and his health does not allow him to work.
- Tony's income is \$753 a month. He was employed but declining health makes it extremely difficult to work even if he could find an employer. After his room and board and prescriptions costs, Tony has \$300 left a month. He needed a significant amount of dental work, so he was supported in finding a dentist that would let him pay monthly. While he was working to pay the dentist, his wheelchair foot rest and wheels did not function. These weren't covered by MA so he had to pay out of pocket for repairs which meant taking longer to pay to have the dental work completed. It took Tony 5 months for payments to the dentist before he could have the dental work he needed. If he had to pay Medicare Part B and Part D, it would have taken him 11 months before he could have the dental work completed.
- Joanne worked for most of her adult life but her decreased mobility and seizures made it necessary for her to retire. She contributed enough to SSA to earn \$598 a month based on her own work record. She gets an additional \$155 in SSI funds. After covering basic necessities, she doesn't have enough money for personal care items, clothes, and never mind anything recreational.

The loss of Medicaid would have a distressing and harmful effect on these people's lives. There are numerous individuals that just barely manage with little or nothing left over for dental care, clothes - not to even consider doing something fun.

Sue Rattman, CPWIC

Resource & Benefits Coordinator- The Arc Northern Chesapeake Region







Congressmen Steny H. Hoyer, Elijah E. Cummings, Sarbanes, and Jamie Raskin led a rally in Annapolis this week to petition Governor Hogan to state his position on the American Health Care Act. The AHCA will cut health care services to 350,000 Maryland citizens. Tens of thousands of Maryland residents impacted are citizens with intellectual and/or developmental disabilities. Congressman Cummings said that he is begging Governor Hogan to, "Stand up and add your voice to people who are forcefully and publicly opposing the American Health Care Act."