



For people with intellectual
and developmental disabilities

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April 29, 2024

The Honorable Cathy McMorris Rodgers
Chair
Energy and Commerce Committee

The Honorable Brett Guthrie
Chair, Subcommittee on Health
Energy and Commerce Committee

The Honorable Frank Pallone
Ranking-Member
Energy and Commerce Committee

The Honorable Anna Eshoo
Ranking-member, Subcommittee on Health
Energy and Commerce Committee

Sent via email

Subject: Subcommittee on Health Hearing: Legislative Proposals to Increase Medicaid Access and Improve Program Integrity

Dear Chair McMorris Rodgers, Ranking-Member Pallone, Chair Guthrie, and Ranking-Member Eshoo:

On behalf of The Arc of the United States, I am writing to thank you and the members of the Subcommittee on Health for convening tomorrow's hearing, "*Legislative Proposals to Increase Medicaid Access and Improve Program Integrity*." The Arc is the nation's largest and oldest advocacy and services organization for people with intellectual and developmental disabilities (IDD) and their families with nearly 600 chapters in 47 states and the District of Columbia. The Arc network serves more than 1.5 million people with IDD and family members through more than 4,000 service locations.

We commend your commitment to exploring legislative solutions that aim to expand home and community-based services (HCBS). HCBS includes assistance with living independently, getting around the community, employment support, and other activities of daily living. The substantial costs to pay for these services are out of reach to most Americans and not covered by commercial health insurance or Medicare. Only Medicaid offers coverage for these services.

Unfortunately, Medicaid suffers from an "institutional bias" that mandates nursing home coverage, but makes access to supports at home or in the community optional. Right now, nearly 700,000 individuals are on waitlists for these services. Far too many are stuck in institutions against their wishes. One policy that alleviates this problem is Money Follows the Person, which pays for transitions out of institutions and back into the community. This bipartisan program has helped over 100,000 people achieve independence to date and should be a permanent feature of Medicaid, which H.R. 8109 introduced by Reps. Dingell and Balderson would achieve.

Medicaid is operated by states, meaning that portability of HCBS benefits from one state to another is not guaranteed. This means individuals and their families often cannot leave their state for better opportunities without risk of loss of services. This is particularly true for dependents with disabilities of military service members who frequently transfer locations as part of the family's commitment to the United States's safety and security. We are thankful for the Subcommittee's consideration of H.R. 8108 by Reps. Kiggans and Kaptur to address this issue.

Additionally, Medicaid comes with very complex, strict eligibility requirements. The primary pathway for people with disabilities to qualify is through Supplemental Security Income (SSI). With the exception of "209(b)" states, SSI beneficiaries are "categorically eligible" for Medicaid. Unfortunately, SSI comes with strict income and asset limits that trap people with disabilities into poverty and disincentivizes employment and independence.

Thankfully, "Medicaid Buy-In" programs give states flexibility to offer Medicaid HCBS for people with disabilities capable of full-time employment if they pay a monthly premium. Sadly, these programs remain vastly underutilized by states. To our knowledge, no federal regulations or guidance exists for these programs, a potential hinderance to implementation. We are grateful for the Subcommittee's consideration of H.R. 8107 by Reps. Ciscomani and Gluesenkamp Perez. This legislation would increase the age of one of the Medicaid buy-in pathways from 65 to 67, the Social Security full retirement age.

Beyond HCBS, Medicaid comes with punitive "Estate Recovery" rules that end up harming the least fortunate and marginalized communities through the confiscation of the family home, often the only resource available in these communities to save and escape inter-generational poverty. We are thankful for your consideration of both H.R. 8094 by Rep. Kean and H.R. 7573 by Rep. Schakowsky to try to address this issue.

We look forward to reviewing all of the bills under consideration in detail and providing any feedback we may have for the Subcommittee. Thank you once again for your leadership and commitment to this critical cause.

Sincerely,

David Goldfarb
Director of Long-Term Supports and Services Policy
The Arc of the United States