

# Defending Public Health Medicaid Advocacy

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May 29, 2025

# The Importance of Medicaid

Medicaid covers over 72 million Americans (19% of population), including:

- 41% of births
- 60% of nursing home residents
- 21% of rural residents
- 35% of the disabled
- Low-income seniors

41 states plus DC expanded Medicaid through the Affordable Care Act. 21 million Americans currently enrolled in expansion Medicaid.

- Medicaid expansion associated with better health of patients and better financial health of hospitals. Most rural hospital closures and near-closures are where states have *not* expanded Medicaid.

**Medicaid financing:** Joint between federal government (Centers for Medicare and Medicaid Services (CMS), led by Mehmet Oz) and states.

- Federal Medical Assistance Percentage (FMAP): The percentage of Medicaid costs that are covered by the federal government as opposed to the states
  - ▶ By law, FMAP cannot be below 50%. Averages around 57% for traditional Medicaid, and 90% for expansion Medicaid.

# Some Medicaid Facts, and Why Cutting Medicaid is a BFD

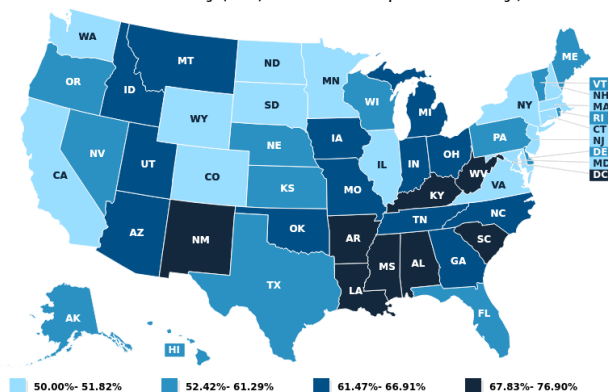
## Some Medicaid facts:

- ACA Medicaid expansion covers many people with disabilities, not just so-called able-bodied adults
- Contrary to what the Trump administration suggests, the Medicaid program is NOT riddled with waste, fraud, and abuse. Every state already has a Medicaid Fraud Control Unit.
- Medicaid is the nation's single largest payer of behavioral health coverage and as such, it plays a critical role in funding mental health and substance use disorder treatment.
- Medicaid – including its extension of postpartum coverage from 60 days to 12 months in 49 states plus D.C. – is critical in promoting maternal health, especially Black maternal health.
- Medicaid is a key payer of wraparound medical services for people experiencing homelessness.
- Medicaid expansion has proven critical to the financial security of America's community hospitals, while Medicaid cuts would increase uncompensated care of hospitals struggling to stay afloat.

# FMAP Across the States

Key issue in the ongoing Medicaid fight: Medicaid cuts are most harmful to *red* states, which are more dependent on federal government support, and many of which cannot make up the difference without making program cuts.

Federal Medical Assistance Percentage (FMAP) for Medicaid and Multiplier: FMAP Percentage, FY 2026



# The Not-so-Beautiful Bill

Early morning on May 22, House Republicans voted for the "big, beautiful bill," which among other things seeks to cut about \$700 billion from the Medicaid program over 10 years (nearly a 10% reduction every year for a decade). Not quite as draconian as the bill that came for a vote in February, but still would cause immense damage.

- Implementation of Medicaid work requirements: require documentation of 20+ hours/week of work or an approved exemption. **Administrative burden issue.**
  - ▶ Context: About 92% of people on Medicaid are already working or would be exempt. Not many people just choosing not to work.
  - ▶ Additional context: Research from Arkansas's Medicaid work requirements in 2018 showed that people who *were* working lost coverage because of the administrative burdens of documentation. No increase in employment. Also costly to administer!
- Requires states to impose cost-sharing for people in expansion Medicaid, reduction of expansion Medicaid FMAP from 90% to 80% for the 14 states plus DC that provide additional health coverage to undocumented immigrants *with their own state funds*. **State sovereignty issue.**
- Additional cut: Could trigger automatic cuts to Medicare totaling approximately \$500 billion due to the Pay-As-You-Go Act

**Expected impact on coverage:** 15 million losing coverage due to combination of Medicaid cuts and expiration of Biden era enhanced ACA marketplace subsidies.

**Coverage issue, uncompensated care issue.**

- Context: About 200 rural hospitals are at risk of closure Medicaid cuts go through → spillover effect to the privately insured!

# Getting the (Health Policy) Band Back Together

In 2017, we successfully defeated the American Health Care Act. Some differences now:

- Pro: The ACA is much more popular now than (62%) than in 2017 (49%), and more of the public generally favors expanding health insurance access
- Con: Fewer persuadable Republicans now



# What's Next?

Now that the House has voted on it, it goes to the Senate (53R-47D).

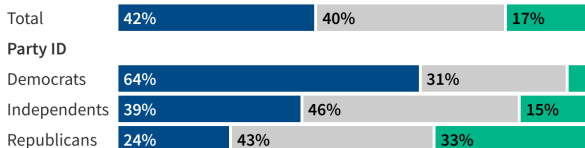
- Josh Hawley (R-MO) penned a *New York Times* op-ed advising against the Medicaid cuts given that they could be politically costly
- Ron Johnson (R-WI) expressed that there might be difficulties passing the Medicaid cuts in the Senate.

Figure 4

## Few Adults Want To See a Decrease in Federal Medicaid Spending

Do you want to see Congress increase spending on Medicaid, decrease spending, or keep it about the same?

■ Increase ■ Keep it about the same ■ Decrease



# One Impediment to Medicaid Advocacy

1 in 5 Americans are on Medicaid... but they don't all know it, so they don't all know to mobilize in its defense. **Why would that be?**

- 75% of Medicaid is privatized through UnitedHealthcare, Humana, etc.
- Many Medicaid programs go by other names:
  - ▶ California: Medi-Cal
  - ▶ Connecticut: Husky
  - ▶ Kansas: KanCare
  - ▶ Louisiana: Healthy Louisiana
  - ▶ Maine: MaineCare
  - ▶ New Mexico: Turquoise Care
  - ▶ Oklahoma: SoonerCare
  - ▶ Tennessee: TennCare
  - ▶ Washington: Apple Health
  - ▶ Wisconsin: BadgerCare

**One of our tasks is to help people understand what's at stake with these proposed cuts...**



## Navigating the Bad Politics

**One argument some have made:** Republicans may not want to vote for the Medicaid cuts because with the program's popularity – even among Republicans – and its immense impact *for Republican voters*, it will be politically costly.

**The challenge:** Republicans have strategically ensured that many of these cuts would not be felt until after the 2026 midterms... and in some cases after the 2028 election. Ex:

- Eliminates the temporary incentive for states that newly adopt expansion – Effective January 1, 2026
- Requires states to impose cost sharing on expansion adults – Effective October 1, 2028
- Reduces the expansion match rate from 90% to 80% for states providing health coverage to the undocumented – Effective October 1, 2027
- Medicaid work requirement – Effective not later than December 31, 2026, or earlier at state option
- Requires states to conduct eligibility redeterminations at least every 6 months for Medicaid expansion adults – Effective December 31, 2026

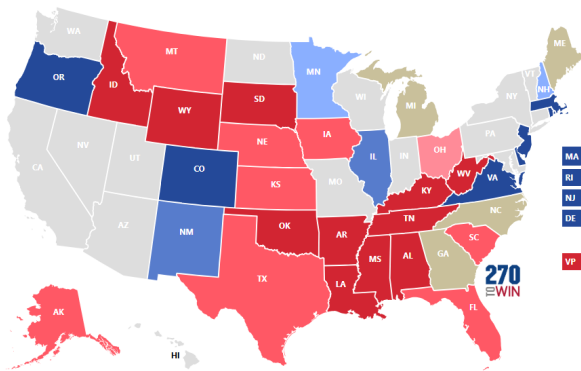
### Source:

<https://www.kff.org/tracking-the-medicaid-provisions-in-the-2025-budget-bill/>

# So, What Do We Do?

In 2026, elections will be held for 13 seats currently held by Democrats and 22 seats currently held by Republicans.

- **Why focus on 2026:** Most likely to be fearful of facing constituents (though still far out from campaign mode...).
- Need to peel off 4 votes...



# Republicans Up for Re-Election in 2026

Senator	State	Last Win Percentage	Percent of State on Medicaid	Percent of Births Financed by Medicaid
Dan Sullivan	AK	53.9%	32%	36%
Ashley Moody	FL		18%	42%
Joni Ernst	IA	51.7%	21%	38%
Roger Marshall	KS	53.2%	18%	31%
Susan Collins	ME	51.0%	20%	39%
Steve Daines	MT	55%	22%	35%
Thom Tillis	NC	48.7%	27%	37%
Pete Ricketts	NE	62.7%	19%	38%
Jon Husted	OH		26%	39%
Lindsey Graham	SC	54.4%	19%	46%
John Cornyn	TX	53.5%	14%	48%
Tom Cotton	AR	66.5%	26%	41%
Jim Risch	ID	62.6%	20%	31%
Bill Cassidy	LA	59.3%	32%	64%
Cindy Hyde-Smith	MS	54.1%	25%	57%
Markwayne Mullin	OK	61.8%	25%	52%
Mike Rounds	SD	65.7%	16%	26%
Bill Hagerty	TN	62.2%	20%	46%
Shelley Moore Capito	WV	70.3%	28%	46%
Cynthia Lummis	WY	72.9%	19%	29%

## Additional Republicans to Contact

Some additional senators not up for reelection soon, but who may be worth pressuring:

- Murkowski: Likely opposed to the cuts in their current form
- Hawley: Who knows, but wrote the *NYT* op-ed...
- Budd, Fisher, and McCormick all had very close elections (McCormick probably isn't persuadable but he's new so it's not entirely clear)

Senator	Next Up	State	Last Win Percentage	Percent of State on Medicaid	Percent of Births Financed by Medicaid
Lisa Murkowski	2028	AK	53.7%	32%	36%
Dave McCormick	2030	PA	48.8%	23%	35%
Josh Hawley	2030	MO	55.6%	20%	40%
Deb Fisher	2030	NE	53.2%	19%	38%
Ted Budd	2028	NC	50.5%	27%	37%

Many ways to contact your senator:

- Email
- Phone call to DC office (Capitol switchboard: 202-224-3121)
- Phone call to district office
- Request a meeting

For advocacy to be effective, it must be YOUR senator! The office of a Missouri senator doesn't care what Pennsylvania voters think.

- Whether you call a DC or district office, they'll still be tallying the number of calls that are supportive vs. opposed
- Be clear and concise: you don't need to know a dozen facts and figures, but try to hammer home one or two key points about how Medicaid cuts would hurt you or the people in your state.