



What's at stake for Alabama Medicaid?

Alabama's Medicaid program is essential, and it has already been cut to the bone.

- Alabama Medicaid provides health coverage only to the most vulnerable Alabamians.
(Closer look: More than 1 million people – or one in five Alabamians – have Medicaid coverage.)
- Basic fact: We spend the third lowest amount in the country per Medicaid patient.
(Closer look: Alabama Medicaid spends an average of \$3,800 per patient per year. The annual cost of care for the largest enrollment category, children ages 0 to 18, averages \$2,500 per patient. At the opposite end of the cost spectrum, a full year of Medicaid nursing home care costs \$58,000. All costs include state and federal shares.)
- Basic fact: Our income limit for parents with dependent children is the lowest of any state. Adults with no children in their care and no disabilities can't qualify for Medicaid at all.
(Closer look: For a family of three, a parent doesn't qualify unless she or he makes less than \$3,700 a year.)
- Basic fact: We provide few services beyond the minimum federal requirements.
(Closer look: Alabama's handful of "optional" services include prescription drugs for adults, outpatient dialysis, prosthetics & orthotics, adult eyeglasses, and the PACE program in Mobile that helps frail seniors live at home.)
- Basic fact: Thousands of people in every Alabama county receive Medicaid coverage.
(Closer look: Wilcox County has the highest proportion at 57 percent [6,400 people]. Shelby County has the lowest at 13 percent [28,500 people]).
- Basic fact: Alabama has not accepted federal funding to expand Medicaid to cover low-income workers who don't have employer coverage and can't afford private plans.
(Closer look: To date, we've left 300,000 adults – more than half of whom are working – without coverage and forfeited more than \$6 billion in federal funds that could have boosted Alabama's economy.)

Alabama already makes it very difficult to get Medicaid coverage.

- Nearly 600,000 of Alabama's 1 million Medicaid patients are children in low-income families.
- Most of the rest (nearly 300,000) are low-income seniors and people with disabilities.
- Pregnant women with low incomes make up the next largest group (around 130,000). Low-income women ages 40 to 64 can receive life-saving breast and cervical cancer screenings and treatment through Medicaid.
- About 61,000 parents and caretaker relatives with extremely low incomes (less than \$303 per month for a family of three) also receive Medicaid.

Medicaid cuts, such as a cap on federal funding, hurt vulnerable Alabamians.

- People with chronic illness would lose life-saving drugs.
Thousands of frail seniors and people with disabilities would face a health crisis if their prescription drug coverage goes away. Daily medication means the difference between life and death for many patients.
- Rural dialysis patients would be at risk of rapid death without access to care.
Ending outpatient dialysis would force Medicaid patients to be admitted to a hospital to receive their treatments. Costs to the state would skyrocket, and patients would experience added stress. Patients who lack transportation or don't have a hospital nearby could die.
- Prosthetic patients would see quality of life decline.
Prosthetic limbs and orthotics help people with injuries or disabilities lead productive lives. Loss of this service would limit their ability to function in the community.
- Vision-impaired adults would lose functional capacity.
Not getting the glasses you need affects work productivity, driving safety and everyday activities.
- Seniors would lose the choice of community living.
If the PACE program closes, 175 elderly south Alabamians would be forced into nursing homes. That would reduce their independence and cost the state 21 percent more per person.

Medicaid cuts hurt Alabama communities.

- We already have a shortage of primary care providers.
As pediatricians and family doctors reduce services or close their practices, all their patients suffer, not just those on Medicaid. Local economies suffer, too. And lower payment rates would make it even harder to recruit new doctors to Alabama, especially in rural areas.
- We've already lost five rural hospitals in the last six years.
Alabama's 50 rural hospitals serve a high proportion of Medicaid patients. When a rural hospital closes, the "front line" of health care gets weaker for everyone. Even city residents depend on a strong rural health care system when they drive across the state. Hospital closures also cut jobs, slow local economies and discourage outside investment.
- Loss of treatment options in the community would hurt all dialysis patients. More than 8,000 Alabamians depend on dialysis, and Medicaid funding makes local treatment possible through 75 free-standing dialysis centers across the state. If facilities close because of funding cuts, it won't matter what kind of insurance card you have.
- "In Alabama, we're all on Medicaid." Many local health services we all depend on – such as pediatric and primary care, diagnostic clinics and nursing homes – could not stay open without Medicaid funding. Children's Hospital in Birmingham is a statewide facility that Medicaid funding helps make available to everyone.

Bottom line: When Medicaid gets cut, Alabama bleeds.