

## FACT SHEET: Illinois Medicaid Expansion (HB 6253)

### What is the Medicaid Expansion?

A central goal of the Affordable Care Act (ACA) is to significantly reduce the number of uninsured by providing a continuum of affordable coverage options through Medicaid and new Health Insurance Exchanges. States have the option to expand their Medicaid programs to cover adults age 19-64 who have income under 138% of the Federal Poverty Level (approximately \$16,000 per year), with 100% federal financing for the first three years, beginning in 2014. Illinois should take advantage of this federal financing opportunity to provide health care coverage to the uninsured and to save state general revenue funds.

### Why don't these individuals qualify for Medicaid now?

Adults who do not meet a specific categorical requirement (such as being older than age 65, have certain disabilities or is a parent of a child under 18) have never been eligible for any public health care coverage under Medicaid, even if they are very low income. Some of these adults have a disability or special health care needs but do not meet the cumbersome disability requirements of the Social Security Administration. In addition, the majority of this population is employed, but works at low wage or part time jobs without access to health insurance.

### How many uninsured adults might be covered under an Illinois Medicaid Expansion?

Of the 1.7 million uninsured adults in Illinois, approximately 600,000 are very low income (below 138% FPL) and would be eligible for Medicaid. Many of these individuals are not able to access critical care now due to lack of Medicaid coverage.

### Why is it so important for Illinois to expand Medicaid?

- It makes an additional 600,000 Illinois residents eligible for comprehensive medical benefits.
- It builds on the new Cook County waiver program, "CountyCare," which is already enrolling Cook County low income uninsured adults into Medicaid.<sup>1</sup>
- It will bring federal matching funds into Illinois to cover mental health and other services that are currently only state-funded.
- The state and local governments will spend less on uncompensated care. Kaiser estimates that total uncompensated care in Illinois would decline by approximately \$953 million from 2013-2022. Providers such as hospitals, physicians and pharmacies will receive more revenue for services for which they would otherwise receive little or no payment.<sup>2</sup>
- It will provide financial relief to Townships and general assistance units by paying for some of the bills of general assistance recipients and reducing the amount of free care provided to the uninsured.
- It will provide access to affordable preventive and maintenance medical care through a medical home, which help to keep adults out of costly emergency rooms.

<sup>1</sup> <http://www.cookcountyhhs.org/patient-services/county-care/>

<sup>2</sup> "The Cost and Coverage Implications of the ACA Medicaid Expansion: National and State-by-State Analysis." Kaiser Commission on Medicaid and the Uninsured, November 2012. ([www.kff.org](http://www.kff.org)).

## HDA CLIENT EXAMPLES

**Teneisha** is a 20 year old woman from Elgin working part time and enrolled in college. She has a condition in which membranes grow in her throat and must be removed by surgery twice a year or they cut off her ability to swallow and speak. Her parents do not have access to group health care coverage and her college health care policy will not cover her pre-existing condition. After turning 19, Teneisha aged out of the Medicaid All Kids program. She is not eligible for any other Medicaid category because she is not disabled and is not a parent. Teneisha had to forgo surgery this year because she was unable to afford it, and her condition eventually deteriorated so much that her speech became unintelligible. HDA was able to get Teneisha charity care to cover surgery this year; however, she is still unsure how she will cover the next one. *Teneisha would be eligible for Medicaid in 2014 if Illinois expanded Medicaid.*

**Carol** is a single 58 year old home health worker from Southern Illinois who was diagnosed with cancer last year. She had no health insurance because she could not afford private coverage and her employer did not offer coverage. Although Carol is low income, she is not eligible for Medicaid because she is not disabled, over age 65 or a parent of a minor child. She was not able to get treatment immediately because she could not access health care coverage. HDA was able to get a hospital to accept her for treatment under charity care but she has no coverage for follow up scans and medical care. Carol is back at work but without access to appropriate follow up care and tests, her prospects for good health are uncertain. *Carol would be eligible for Medicaid in 2014 if Illinois expanded Medicaid.*

**Access to affordable health insurance through the Medicaid Expansion will increase access to preventative care, prevent more expensive acute care episodes and allow Carol and Teneisha to be both employable and productive citizens.**

How will the Medicaid Expansion (HB 6253) impact YOUR community?  
Go to <http://visualizingreform.illinoishealthmatters.org> and map it now!



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