NO MEDICAID CUTS

The Republican Plan for Medicaid Gives Handouts to Billionaires on the Backs of Native Communities

Medicaid Is A Lifeline for Native Communities

Nearly <u>1 in 3</u> American Indian and Alaska Native (Al/ANs) and approximately 1 in 5 Native Hawaiians (NHs) are enrolled in Medicaid and the Children's Health Insurance Program (CHIP). <u>Two</u> <u>million</u> Al/ANs, half of which are children, are enrolled in Medicaid. More than <u>20%</u> of Al/AN seniors rely on Medicaid exclusively.

Medicaid is the <u>largest third-party payer</u> for the Indian Health Service (IHS) and Urban Indian Organizations (UIOs). Many facilities receive <u>30-60%</u> of their funding from Medicaid dollars.

Any cuts to Medicaid would breach the federal government's trust and treaty obligation to provide and fund health care for Al/AN/NHs. Congress has <u>made clear</u> its intent to leverage Medicaid and Medicare to fulfill this obligation, as direct federal funding for the IHS has <u>long fallen short of its legal and</u> <u>financial obligations</u>, leaving third-party payers like Medicaid to fill the gaps. It has made similar <u>commitments</u> for Native Hawaiians through the <u>Native Hawaiian Health Care Systems</u>.

Republican Cuts to Medicaid Put Native American Health and Coverage At-Risk

Every proposal on the Republican <u>wish list</u> of more than \$2 trillion in Medicaid cuts is bad news for Native communities:

- **Cutting Coverage Through Work Reporting:** Native Americans face <u>disproportionately high</u> rates of unemployment and <u>unique challenges</u> to economic development. Not only would Republican proposals to impose work reporting requirements run afoul of the federal trust and treaty obligation to provide and fund health care services, but it would be particularly devastating for <u>hundreds of thousands</u> of Native Americans struggling to find steady work.
- Cutting Coverage and Services by Pushing Costs Onto States and Tribes: Per capita caps will force programs to close their doors, deny services, or subsidize the federal trust responsibility. While the existing 100% federal medical assistance percentage (FMAP) for AI/ANs served at IHS or Tribally-

operated health programs may protect some facilities, proposals to shift administrative costs to states and to cut the federal share will have devastating implications for UIOs, the Native Hawaiian Health Care System, and other health care facilities and the millions of Native Americans who rely on them.

• Rolling Back Improvements that Help Native Americans Get Coverage and Keep It: Repealing or delaying the Medicaid Eligibility and Enrollment final rule would undo key protections for Native children enrolled in CHIP, such as prohibiting annual or lifetime limits on benefits. It could also result in the <u>nearly 72%</u> of Al/AN seniors who enrolled in both Medicaid and Medicare seeing increases in out-ofpocket costs.

Bottom Line:

There is no acceptable Medicaid coverage loss for Native Americans, whose health care is guaranteed by law. No Medicaid cuts to Native communities to fund tax handouts to billionaires.

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