



Medicaid Benefits are at Risk

The Partnership for Medicaid – a nonpartisan coalition representing clinicians, health care providers, safety net health plans, and counties – is deeply concerned that cuts being debated in Congress will result in cuts to Medicaid benefits. Even if Congress does not make changes to Medicaid benefits, the cuts being considered will lower funding to states and force them to make cuts to their Medicaid programs, most likely optional benefits. Traditional Medicaid beneficiaries, especially people with disabilities and older adults, rely disproportionately on benefits that Congress has chosen to leave optional. The following are some examples of popular optional benefits that can be offered by states that could be at risk:

Home and Community-Based Services (HCBS)

These services, including a wide variety of supports from habilitation services to personal care and private-duty nursing, help people with disabilities and older adults stay in their homes with their families and communities. Every state currently provides HCBS, and providers are already struggling to maintain access to services among a workforce shortage and low payment rates. Further cuts will exacerbate this crisis. Historically, when states experience a reduction in federal funding, they will look to cut optional services like HCBS.¹

Dental Care

Oral health is a critical component of overall health, and access to dental care is essential for preventing avoidable pain, infection, and costly emergency visits. When states reduce or eliminate Medicaid dental benefits, adults often delay care until problems become severe, leading to greater strain on emergency departments and higher long-term costs. Cuts to optional dental coverage would undermine both individual health and the fiscal sustainability of Medicaid.

Prescription Drugs

Prescription drugs help prevent, manage, and cure serious diseases, and Americans already struggle to afford them. Lowering access to prescription drugs will worsen the financial strain facing American families and exacerbate chronic health conditions.

Program of All-inclusive Care for the Elderly (PACE)

PACE, which has been called the gold standard for community-based integrated care, provides comprehensive medical and social services to older people enrolled in Medicare and Medicaid. Nearly 80 thousand families across America rely on PACE to care for their loved ones and provide high quality care coordination that it is often so difficult to navigate.

Postpartum Coverage

Medicaid is the largest payer of births in the United States. The 12 months of optional postpartum coverage provides access to medical care during a period when two-thirds of maternal deaths occur.² Proposed changes to Medicaid financing will shift costs to states and threaten states' ability to continue to finance this lifesaving postpartum coverage.

¹ Health Affairs, <https://www.healthaffairs.org/content/forefront/history-repeats-faced-medicaid-cuts-states-reduced-support-older-adults-and-disabled>

² Commonwealth Fund, https://www.commonwealthfund.org/sites/default/files/2024-05/PDF_Gunja_insights_us_maternal_mortality_crisis_international_comparison.pdf