

MCC Response to 9-point Concerns Regarding Medicaid Expansion

1. It is wrong to ask the people to pay for more abortions as the price for expanding Medicaid coverage in Missouri, as Amendment 2 does.

The Medicaid program is governed by the Hyde Amendment and does not pay for abortions except to save the life of the mother, or in cases of rape or incest. Expanding Medicaid in Missouri would not change these Hyde Amendment restrictions.

Medicaid is a federal program administered by the states. It was passed in the mid-1960's to provide health insurance coverage for the poor and currently provides health insurance coverage to the disabled, the elderly, custodial parents, pregnant women and children.

In Missouri, many working poor continue to pay the price of going without healthcare coverage, delaying seeking treatment for their chronic conditions, some even dying prematurely because they can't afford and don't have access to healthcare coverage. Being denied health coverage at the expense of your health, your ability to continue to work and support your family, and even at the expense of your life, is a life issue. Expanding the Medicaid program is a complex issue that cannot be reduced to saying that it is asking people to pay for more abortions as the price for expanding the program, especially in light of the Hyde Amendment.

2. It's the wrong time to expand Medicaid when the Hyde Amendment is under attack. If Amendment 2 is approved and the Hyde Amendment falls after that, Amendment 2 may double the number of surgical abortions that Medicaid would pay for in Missouri.

The Hyde Amendment will continue to be under attack after the August election. The MCC position of support for Amendment 2 is based upon the law as it exists today. We know we will have to continue to fight going forward. But for now, as Archbishop Carlson has said, "with abiding trust in our Lord Jesus Christ, we cannot operate out of fear and speculation of the unknown."

3. Since the target population includes adults without children, expanding Medicaid will greatly expand existing Medicaid payments for abortions that are caused by "morning after" pills.

It is estimated that 200,000-250,000 people will enroll in Medicaid if it is expanded. Not all new enrollees will be women of childbearing age. It would be nearly impossible to quantify how expanding Medicaid would lead to more abortions in this manner.

4. Medicaid is a program for the state and federal governments to pay health care providers. It is not a federal subsidy to the State Treasury. Nor is it "free money" – every taxpayer pays taxes to the state government for the federal share as well as taxes to the state government for the State's share. And every payment of federal dollars toward Medicaid expenses must be matched by the State's percentage share of these expenses.

Medicaid is a joint federal and state program with each contributing funds to pay for it through state and federal general revenue funds. Missouri currently pays 35 percent towards Medicaid with the federal government paying the remaining 65 percent. With the expanded population, Missouri would pay 10 percent, the federal government 90. The MCC agrees there is no "free money," but there would be economic benefits to Missouri in drawing down additional federal revenue.

5. Amendment 2 requires the state to maximize the federal share of Medicaid dollars that are paid to Missouri healthcare providers. That means the state government cannot replace federal Medicaid programs with its

own Missouri-funded programs that will not pay abortionists for non-abortion services (PP) or that are simply better than the federal programs.

As a Constitutional Amendment, this proposal would limit the ability of Missouri to tailor the program to Missouri. Since Medicaid is a federal program, states are limited in what they can do and must seek waivers to implement state specific alternative programs. No state can prohibit Medicaid dollars going to Planned Parenthood for non-abortion services, but the Hyde Amendment prevents Medicaid dollars paying for abortions, except as outlined above. Missouri would not have sufficient general revenue to create a Medicaid program funded solely with Missouri tax revenue.

6. The provision for maximizing federal dollars will also prevent the State from paying for lawyers (including the Attorney General's staff) to attempt to obtain protection for the unborn if the Hyde Amendment is ended. The Missouri legal cavalry would not save the day; they could not even saddle up to make the attempt.

Currently public opinion polls show that the majority of Americans do not support publicly funded abortions. The MCC believes this would have to change before the Hyde Amendment would be eliminated, or for states to be prevented from excluding abortion services in their Medicaid programs. The MCC believes it would not be politically viable or sustainable for Congress or a future administration to force states to pay for abortion in their Medicaid programs.

7. It is not surprising that Planned Parenthood and other pro-abortion organizations are among Amendment 2's most active supporters. The Circuit Court of St. Louis, Missouri has ruled that the State cannot exclude Planned Parenthood from participating in Medicaid. Unless this ruling is reversed by the Missouri Supreme Court – and that Court may not rule before the election – expanding Medicaid would shovel more money into Planned Parenthood's coffers just when Missouri has put the surgical abortion business on the ropes.

The Missouri Supreme Court has recently ruled that Missouri cannot prohibit Medicaid dollars going to Planned Parenthood through the Missouri annual budget process. If Medicaid were expanded, additional Medicaid dollars would go to Planned Parenthood for non-abortion services. This is true. But those dollars would still be governed by the Hyde Amendment, and could not be used for a abortions, except as outlined above.

8. Amendment 2 proposes a state Constitutional Amendment that, if adopted, cannot be amended by the legislature, but only by another vote of the people. If the state's budget were unable to keep up with the new costs of Medicaid, the State Legislature could not change the program to reduce Medicaid expenses.

The Missouri Court of Appeals recently ruled in a legal challenge to Amendment 2 that nothing in the language of Amendment 2 imposes a duty on the legislature to spend state dollars on Medicaid expansion, should the Amendment pass. The Missouri Supreme Court affirmed this ruling.

Specifically, the Western District Court of Appeals stated in *Cady v. Ashcroft*, "Funding for the Missouri Medicaid Program, Mo HealthNet, is appropriated annually by the General Assembly. [Amendment 2] does not direct or restrict the General Assembly's ability to change the amount of appropriations for the MO HealthNet program or to increase or decrease funding for the program based on health-care-related costs." If Amendment 2 passes, there will be further debate on how expansion of the program will be funded, if it is able to be funded at all.

The MCC supports expansion of Medicaid because of the unmet healthcare needs of the working poor and because of the importance of Medicaid to the continued existence of our hospitals, especially in rural areas. We would hope there would be a way for the legislature to fund the program going forward if Amendment 2 passes, given the continuing unmet healthcare needs in this state.

9. The Missouri Department of Social Services, the agency that manages Medicaid in Missouri, has estimated that the cost for the first year of expanded Medicaid services under Amendment 2 would be over \$2 billion dollars, of which the share owed by the State of Missouri would be over \$200 million. Where is the State going to get this money – especially since over \$400 million has had to be cut from this fiscal year's budget because of COVID-19?

See response to #8, above.