



CATHOLIC  
CHARITIES  
OF IDAHO

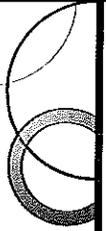
## Medicaid Redesign

Better for Idaho's patients, taxpayers, and businesses

Presented by Christine Tiddens, LMSW  
Community Outreach Director  
November, 2013



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## Introduction

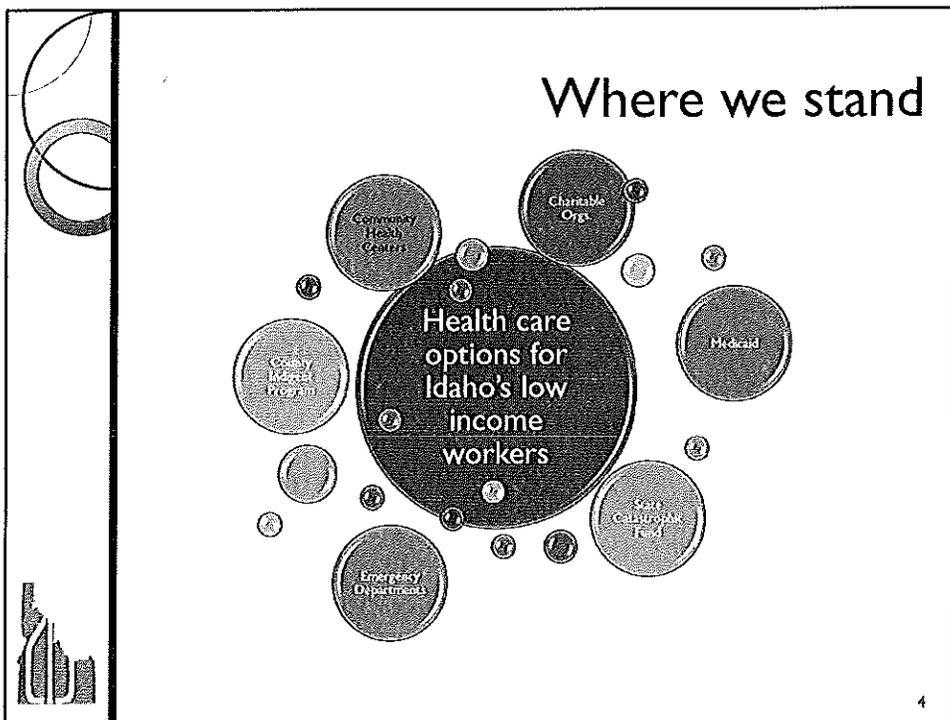
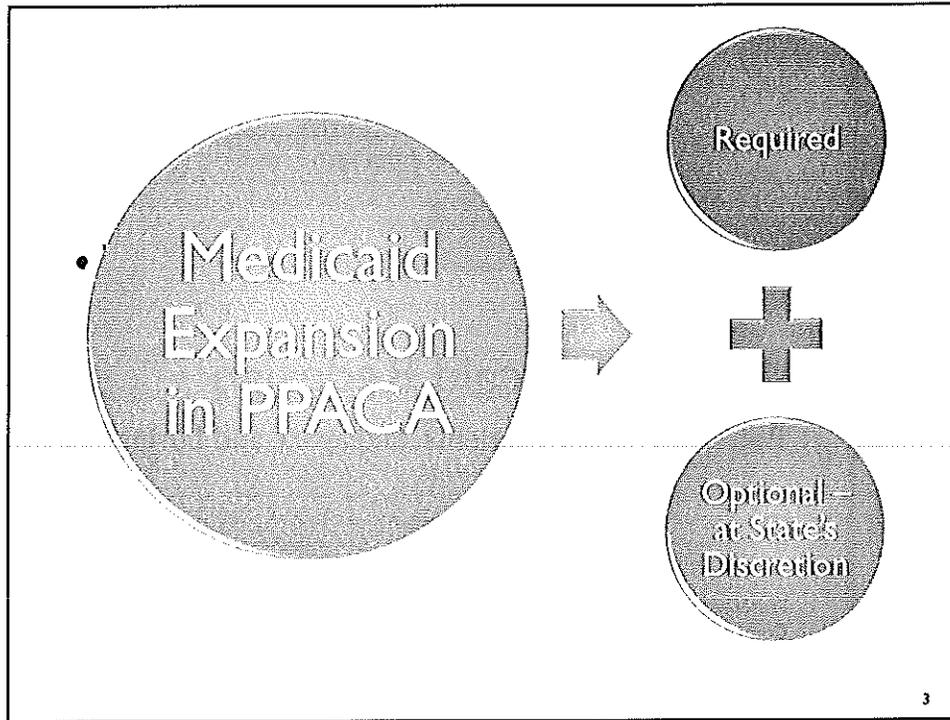
- Social justice and compassion should guide the healthcare system in Idaho
- Access to healthcare should not depend on where a person works, how much a family earns, or where a person lives

*"The credibility of a healthcare system is not measured solely by efficiency, but above all by the attention and love given to the person, whose life is always sacred and inviolable."  
-Pope Francis*

**2** Idahoans die each week because they do not have health insurance.



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## Who are the “medically indigent”?

- Working Idahoans
- Self-employed & Small Business Employees

### Annual Cost of Living \*



\* U.S. Bureau of Labor Statistics - averages are based on 2.6 person households

- Idahoans Living with a Mental Illness
  - 21% of uninsured Idahoans live with a mental illness

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## What is the “coverage gap”?

- Idaho currently restricts Medicaid coverage
- Adults age 19-64 who cannot qualify include:
  - Non-disabled without children
  - Non-disabled with children making over 20% of poverty
- Exchange premium assistance NOT available below 100% of FPL

Idaho minimum wage = \$7.25/hr or \$15,080/yr

2013 Federal Poverty Limits	<100% FPL	100% to 125% FPL	125% to 138% FPL
Annual Income - Individual	\$0 - \$11,490	\$11,491 - \$14,362	\$14,363 - \$15,856
Annual Income - Family of 4	\$0 - \$23,550	\$23,551 - \$29,437	\$29,438 - \$32,499

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# Idaho has a choice

Status Quo      Medicaid Redesign

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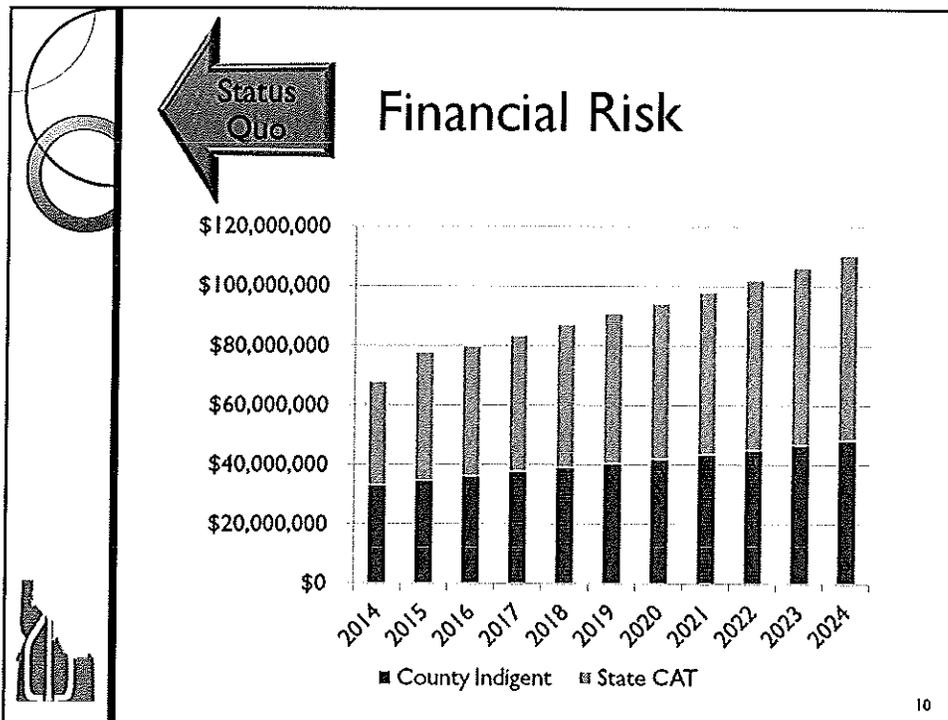
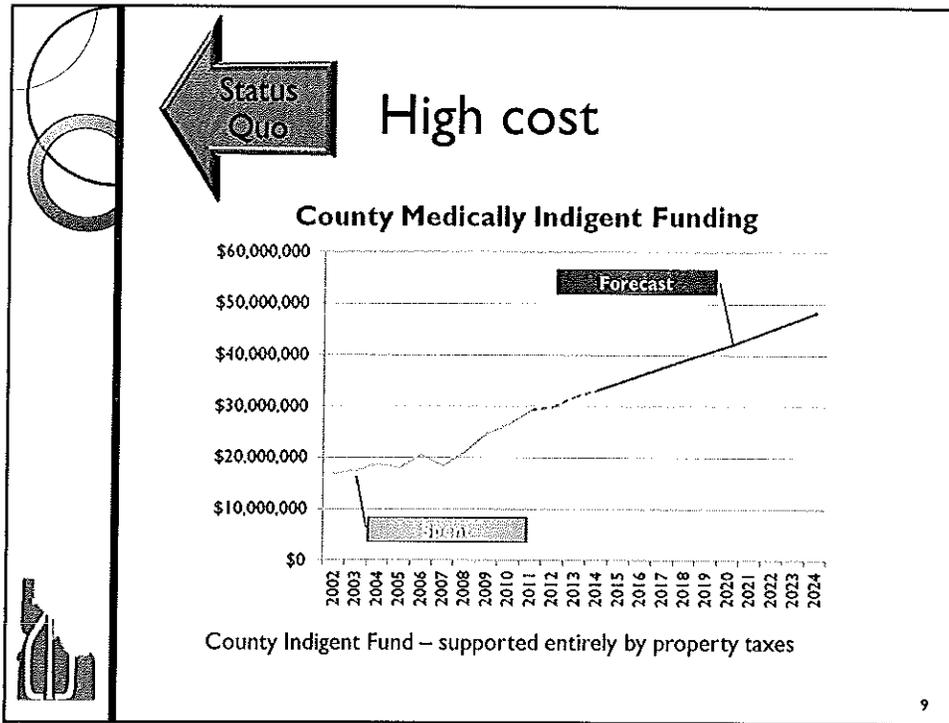
# High cost

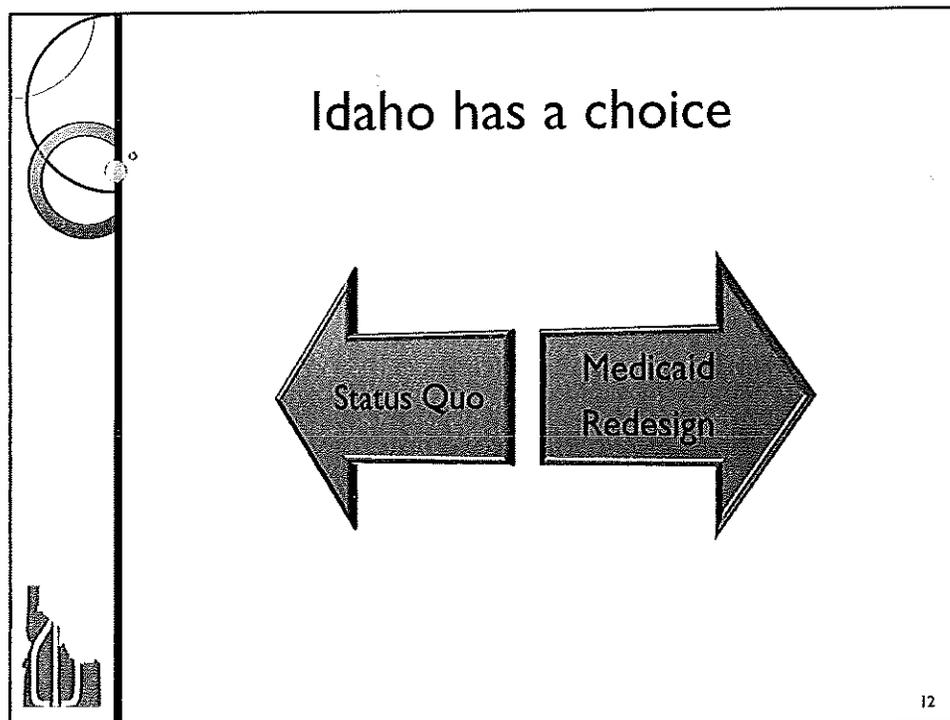
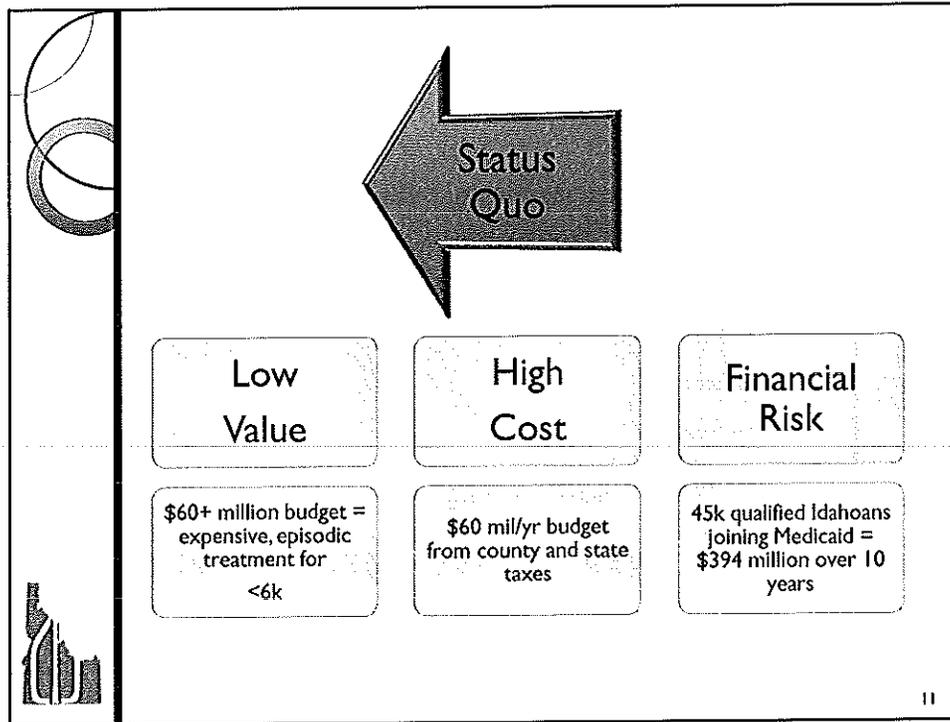
### Catastrophic Health Care Fund

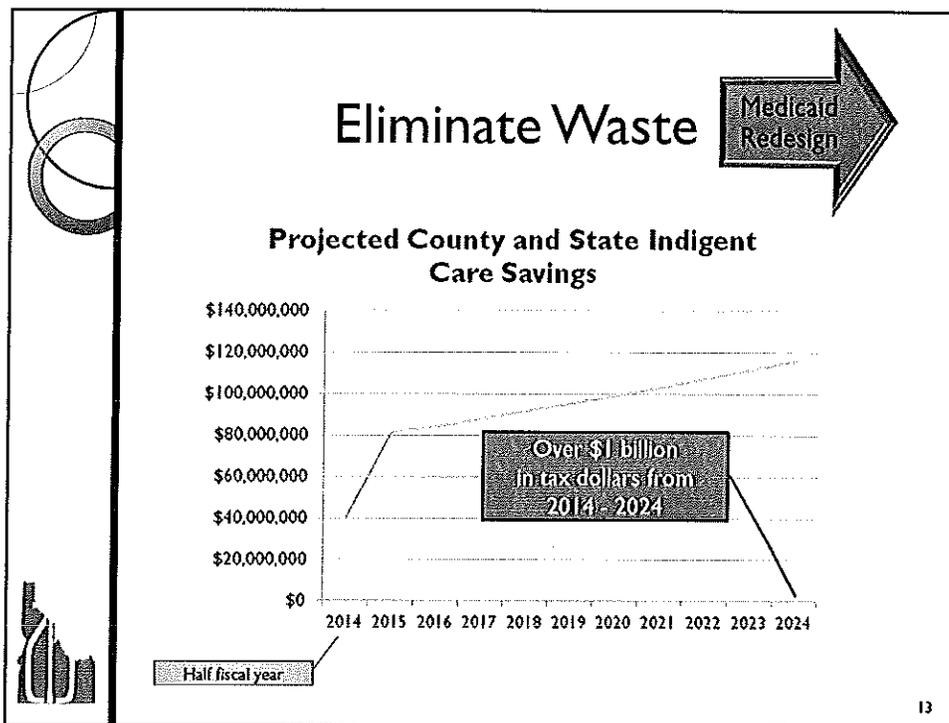
Year	Amount (\$)
2002	10,000,000
2003	12,000,000
2004	15,000,000
2005	18,000,000
2006	20,000,000
2007	20,000,000
2008	22,000,000
2009	25,000,000
2010	35,000,000
2011	25,000,000
2012	35,000,000
2013	30,000,000
2014	35,000,000
2015	45,000,000
2016	45,000,000
2017	48,000,000
2018	50,000,000
2019	52,000,000
2020	55,000,000
2021	58,000,000
2022	60,000,000
2023	62,000,000
2024	65,000,000

State Catastrophic Fund – supported entirely by income taxes

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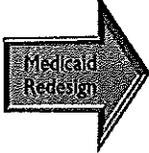






- ## Provide Coverage for Working Idahoans
- Provides coverage to adults earning <138% of FPL or a family of four must have income less than \$32,500
    - Adults age 19-64
    - Must be legal Idaho residents
  - 100% of new enrollees will be covered by federal government for 3 years
    - Share then adjusts to a 90/10 cost sharing program
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Provide Coverage for Mental Illness 

- 96% of the Adult Mental Health Service participants will be newly eligible for Medicaid
- **\$110 million saved**
- Early intervention, available treatment, and ongoing supports
- Stronger families, safer communities, and a more prosperous state



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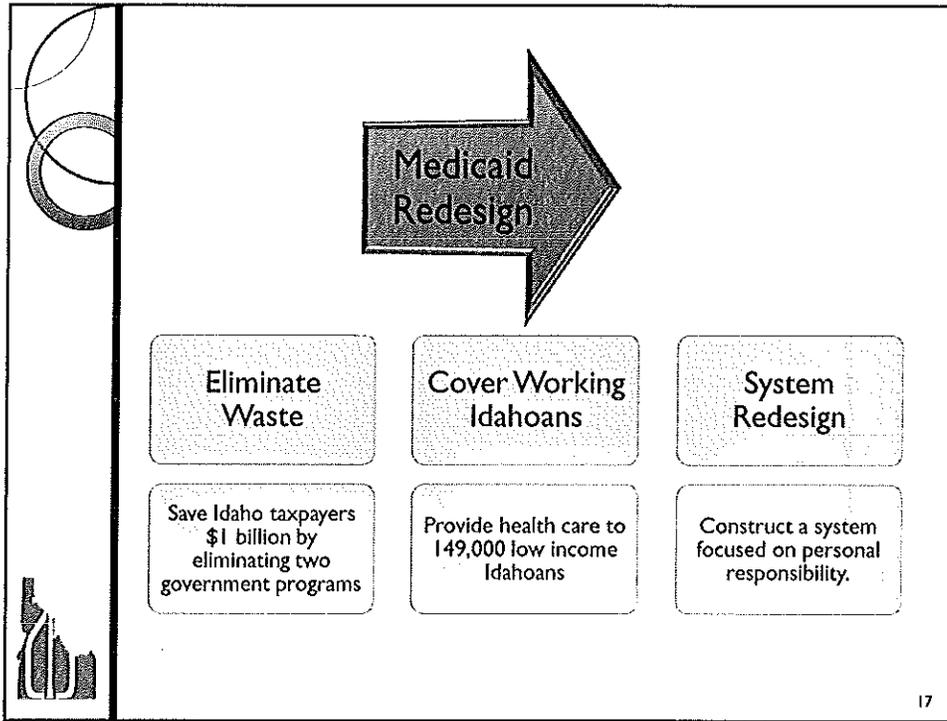


Redesign the System 

- Personal responsibility and accountability
- Coordinated Care
- Managed Care for chronic conditions
- Reduce waste through technology and electronic health records



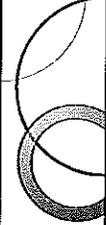
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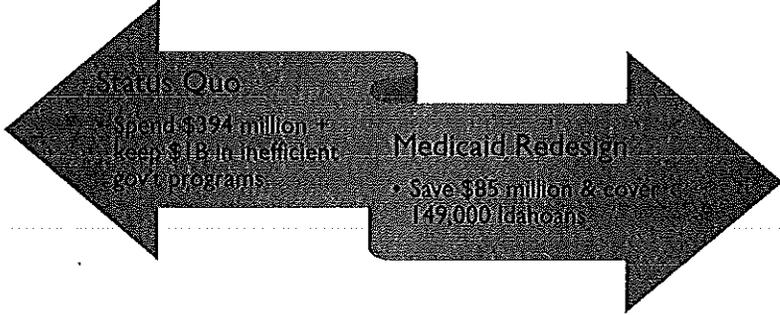
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	Status Quo		Medicaid Redesign	
Costs/Savings 2011/2013		+		
State Medicaid	\$394 Million	+	\$649 Million	
State CAT Program	\$540 Million			\$540 Million
County Indigent Program	\$478 Million			\$478 Million
DHW mental health	\$110 Million			\$110 Million
<b>Total Costs / Savings</b>	<b>\$1.5 Billion</b>			<b>\$85 Million</b>

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## Only one choice



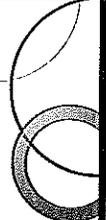
**Status Quo**  
• Spend \$394 million + keep \$1B in inefficient gov. programs

**Medicaid Redesign**  
• Save \$85 million & cover 149,000 Idahoans

We can prevent over **100** deaths a year in Idaho.



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## For More Information...

- The Right Medicine for Idaho Coalition
  - [www.TheRightMedicineForIdaho.org](http://www.TheRightMedicineForIdaho.org)
- Video: The Medicaid Option for Idaho
  - [http://youtu.be/02S\\_A7ul\\_5M](http://youtu.be/02S_A7ul_5M)
- Governor Otter's Medicaid Expansion Workgroup
  - <http://gov.idaho.gov/priorities/Workgroups.html>
- For additional questions or for a list of resources used in the presentation, please contact:  
Christine Tiddens, LMSW  
[ctiddens@ccidaho.org](mailto:ctiddens@ccidaho.org)



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