



**CONSORTIUM FOR CITIZENS
WITH DISABILITIES**

Statement of the Consortium for Citizens with Disabilities
on the Congressional Budget Office's Score of the Better Care Reconciliation Act

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Last night, the Congressional Budget Office (CBO) released a score of the Senate healthcare bill, the Better Care Reconciliation Act (BCRA). The score confirmed our worst concerns about the bill, estimating that Medicaid will be cut by \$772 billion and that 15 million people will lose Medicaid coverage over the next 10 years, in addition to millions more Americans losing access to affordable and comprehensive coverage in the private markets.

These results alone are unacceptable, but the report also highlights how much damage BCRA will cause in the longer-term. BCRA's most severe Medicaid cuts do not begin until 2025, and CBO only estimated those cuts for two years. Even that limited estimate shows exactly how devastating these cuts will be for states: the Medicaid cuts in 2025 and 2026 are \$4 billion and \$8 billion more than the cuts in the House bill and "that gap would continue to widen because of the compounding effect of the differences in spending growth rates." CBO also notes that "[s]tates would not have substantial additional flexibility under the per capita caps," leaving states to work within the current structure. States will have to make hard choices in the first 8 years "to arrive at more efficient methods for delivering services (to the extent feasible) and to decide whether to commit more of their own resources, cut payments to health care providers and health plans, eliminate optional services, restrict eligibility for enrollment, or adopt some combination of those approaches." After 8 years of hard choices, states will be faced with even more massive cuts.

As states make hard choices, people with disabilities who rely on home- and community-based services (including waivers services) are particularly at risk, since these services are optional. And after almost a decade of hard choices and \$772 billion less in federal Medicaid, we have little doubt that these "optional" services will be cut. The lives of adults and children with disabilities literally depend on access to Medicaid; the per capita caps and effective repeal of the Medicaid expansion will endanger millions of people with disabilities.

Nor does the proposed carve-out for some children with disabilities, that CBO briefly mentions, provide any protections from these drastic cuts. It is unclear from BCRA how these children will be identified—children with disabilities enter the Medicaid program through many different eligibility pathways. If only the social security pathway were utilized, millions of children with disabilities would be excluded from this carve-out. In addition, children with disabilities, especially those in rural areas, depend on the healthcare infrastructure that Medicaid supports. As

Medicaid funding disappears, so will the infrastructure that allows children with disabilities to access the services they need in their communities. This infrastructure issue will be compounded in rural areas by the changes to the private insurance market. As CBO points out, “[s]ome sparsely populated areas might have no nongroup insurance offered because the reductions in subsidies would lead fewer people to decide to purchase insurance—and markets with few purchasers are less profitable for insurers.” As those areas also face Medicaid cuts, healthcare infrastructure will degrade. And regardless of geographic location, children with disabilities become adults with disabilities, who will fall off an age cliff into a decimated Medicaid program as soon as they turn 19. The carve-out implicitly acknowledges that Medicaid under per capita caps is unacceptable for people with disabilities—of all ages.

The CBO report as a whole confirms CCD’s opposition to BCRA. CCD urges all Senators to vote NO on the Better Care Reconciliation Act and instead, work through the full Senate committee process and in a bipartisan manner to ensure that all adults and children with disabilities have access to the comprehensive, accessible, and affordable health and long term services and supports they need.