



# Legislation and Policy in 2017

---

Oh My!

---

# What we are watching...

- Va 2017 legislature
- CHIP funding
- ACA (repeal and replace?)
- Medicaid
  - Expansion?
  - Funding?
  - Benefits?

---

# 2017 Va Legislature

- Health Care Subcommittee
- Hygienist Legislation
  - Remote supervision
  - Community settings
  - Referral to a dental home

# FAMIS Funding

- FAMIS funding (known as CHIP federally) ends September 2017
- Over 105,000 Virginia children and pregnant women covered for dental and medical services



---

# Current status of ACA and Medicaid

- Budget Resolution
  - Party lines
  - Directs congress to begin to outline a plan to defund ACA
  - Only relevant for portions of ACA with funding attached
  - This is not a budget reconciliation bill- precursor to budget reconciliation bill

# Trump Statements on ACA replacement

- Kids will still be able to stay until parents' insurance until 26 – (*no current potential replacement plans include this*)
- Preexisting condition exemption will stay (*current potential replacement plans only cover pre-existing conditions if coverage has been continuous*)
- No mandate to purchase coverage
- “Insurance for everybody”

# Republican Replacement Plan

- Repeals tax subsidies based on income – replaces with credits based on age:
  - In 2016, [378,838](#) Virginians purchased insurance through the individual market, of those enrollees, **84.2% received subsidies avg. \$276/month** (the average pre-subsidy premium for those who enrolled during open enrollment was \$366/month; the subsidies offset the majority of that cost for those who are subsidy-eligible)
- Repeals Medicaid Expansion
- Replaces DSH funding
- Increases allowable contributions to HSAs
- Replaces traditional Medicaid with Block grant or PPC

---

# Potential Va Health Care Implications

- ACA repeal
  - Exchange ramifications
  - CMMI funding/pilot programs (\$25 million)
  - Economic trickledown (job loss, ED use, Safety Net burden)
    - 52,000 jobs lost b/c of repeal of tax credits alone
- Medicaid
  - Block grants of PP caps
  - Less overall funding
  - Less restrictions
    - Opens door to eligibility and benefit changes



---

# Block Grants

- Lump sum to states based on baseline year
- State flexibility
- Designed to save revenue
- Does not vary based on health care costs or # of people served

---

# Per Capita Cap

- Federal funding capped on a per person basis
- Cap typically varies by enrollee group
  - Aged blind disabled
  - Adults
  - Children
- Funding does adjust based on number served
- Likely subject to national aggregate cap

---

# What does this mean

Medicaid will operate with less money:

- Reimbursement
- Eligibility
- Services

---

QUESTIONS???