



WHY OTOC ADVOCATES FOR MEDICAID EXPANSION



OTOC Health Care Values: 1. Quality health care should be available at the lowest possible cost.
2. No one should get seriously ill or die because they cannot afford care.

Traditional Medicaid is a public health insurance program. It currently covers 235,000 Nebraskans. A person can't get Medicaid just by having a low income. A person must fit into an eligibility group: a child, a parent, a senior (over 65), a pregnant woman, or have a disability. The low income threshold to qualify for Medicaid varies for each grouping.¹

Who Is Left Out and Would Be Covered by Medicaid Expansion

- Adults without children, between the ages of 19 and 64; and
 - Parents, who earn TOO MUCH to qualify for Medicaid (making more than \$1,005/month), but earn TOO LITTLE to qualify for aid to buy private insurance on the Health Insurance Marketplace.
 - Seniors earning more than \$1,732/month;
 - Disabled persons earning more than \$1,732/month
- These persons are in the "coverage gap".²

How Many Are In the Gap?

- 90,000 people in Nebraska have no access to assistance to pay for their health care costs.¹
- 29,700 are in Douglas County; 13,941 are in Lancaster County; 3,967 are in Sarpy County.³
- Over 61% of them are employed in one or more low wage jobs where health insurance is not offered: food service, construction, sales, cleaning and maintenance, office and administrative support, production, transportation, and personal care and services.⁴ Though employed, they do not earn enough to purchase health insurance *and* cover their other basic needs. (Most of the rest are elderly or disabled.)

2018 Poverty Level Numbers in Real Terms

100% of Poverty – Childless Adult – earns \$1,012/month; \$12,140/year

100% of Poverty – Parent in a Household of 3 – earns \$1,732/month; \$20,780/year

Medicaid Expansion Numbers in Real Terms

138% of Poverty- Childless Adult – earns \$1,396/month; 16,753/year

138% of Poverty – Parent in a Household of 3 – earns \$2,389/month; \$28,676/year²

Costs To All Of Us in NOT Expanding Medicaid

- Nebraska loses \$362,080,000 per YEAR in Federal Medicaid funding for health care services that would support clinics, hospitals, and elder care facilities around the state.⁵
- That is \$992,000 per DAY in Federal funding for health care services that will support 9,400 additional jobs per year.⁵ (These dollars are Federal taxes that Nebraskans have paid that go to 32 other states, BUT not ours.)
- No one is denied critical medical care, but people of dignity and pride who cannot pay for it, do not seek it early when illness could be more effectively addressed. Instead, a major health crisis forces them to go to the emergency room where care costs are highest. Those costs are passed on to those who have health insurance to an estimated \$1,000/year per individual/per policy.⁶ (Cost-shifting)
- Other costs include: lowered worker productivity, bankruptcies, lost consumer spending, and unnecessary, inefficient state and county spending.⁵
- The loss of life of 500 Nebraskans per year, whose illness was not tended in time to save their lives.⁷

The State of Nebraska is responsible for expanding Medicaid. It has failed to do so for 6 legislative sessions. It is time to take the question to the people. **If you are a registered voter, please sign the petition.**

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