



HR0593

LRB097 14449 KTG 59298 r

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HOUSE RESOLUTION

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WHEREAS, On August 2, 2011, the Budget Control Act of 2011 was signed into law creating the Joint Select Committee on Deficit Reduction, a bipartisan Congressional committee given the task of identifying an additional \$1.5 trillion in deficit reduction measures; and

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WHEREAS, The Joint Select Committee on Deficit Reduction, also known as the Super Committee, is comprised of 12 lawmakers, appointed equally by Democratic and Republican leaders in the U.S. House and the U.S. Senate; and

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WHEREAS, The Super Committee shall vote by November 23, 2011 on its debt reduction proposals and if a majority of the Super Committee reaches an agreement on all or part of a deficit reduction plan, then the proposal shall receive an up or down vote by the House and Senate by December 23, 2011; and

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WHEREAS, Changes to the Medicaid program are being considered as a component of securing a portion of the \$1.5 trillion in savings to be reported by the Super Committee; and

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WHEREAS, President Obama has forwarded recommendations to the Super Committee for \$72 billion in federal Medicaid reductions, including limits on the use of provider assessment

1 programs, changes to federal matching rate formulas, and
2 restrictions on the use of Disproportionate Share Hospital
3 payments; and

4 WHEREAS, While changes to the Medicaid program are a vital
5 component for deficit reduction, such reforms should go beyond
6 proposals seeking to limit the federal share of expenditures
7 and must focus on the underlying factors that have led to
8 unsustainable growth in the Medicaid program; and

9 WHEREAS, Medicaid Maintenance of Effort (MOE) provisions
10 contained in the Affordable Care Act (ACA) require states to
11 maintain eligibility standards, methodologies, and procedures
12 that were in place on the date of the enactment of the ACA, and
13 these MOE requirements seriously impair the ability of states
14 in fiscal crises to administer viable Medicaid programs; and

15 WHEREAS, In an attempt to control escalating Medicaid costs
16 and improve coordination of care for enrollees, Illinois
17 enacted comprehensive Medicaid reforms in 2011, including
18 changes to require applicants to submit one month of income
19 data and proof of Illinois residency when applying for Medicaid
20 coverage; and

21 WHEREAS, The Centers for Medicare and Medicaid Services
22 (CMS) submitted written correspondence to the Director of the

1 Illinois Department of Healthcare and Family Services blocking
2 implementation of these two common sense, bipartisan reforms as
3 a violation of the MOE provisions contained in the ACA; and

4 WHEREAS, The rejection of these reforms, which are already
5 in place in numerous states, hamper Illinois' ability to verify
6 which applicants and enrollees are truly eligible for Medicaid
7 services, thereby increasing Medicaid costs for both the State
8 and federal government; and

9 WHEREAS, Relaxation of the MOE requirements in the ACA
10 would provide states the flexibility to administer Medicaid
11 programs based on factors currently present in each individual
12 state and would end the practice of penalizing states that have
13 proactively implemented comprehensive coverage provisions
14 during more stable economic times; and

15 WHEREAS, Illinois' economy continues to struggle while the
16 Medicaid program consumes an ever growing percentage of
17 available revenues, estimated to result in a \$2.4 billion
18 end-of-year backlog of Medicaid bills for Fiscal Year 2012; and

19 WHEREAS, Allowing additional flexibility in developing
20 Medicaid guidelines for eligibility, methodologies, and
21 procedures will help Illinois to implement program
22 efficiencies to reduce payment backlogs, reduce hardships to

1 medical providers who are waiting for payments, and safeguard
2 care for those verifiably eligible for services; therefore, be
3 it

4 RESOLVED, BY THE HOUSE OF REPRESENTATIVES OF THE
5 NINETY-SEVENTH GENERAL ASSEMBLY OF THE STATE OF ILLINOIS, that
6 we urge the Joint Select Committee on Deficit Reduction to
7 recommend repealing the Medicaid Maintenance of Effort (MOE)
8 requirements in the Affordable Care Act which have been cited
9 by the Centers for Medicare and Medicaid Services in blocking
10 bipartisan, common sense Medicaid reforms; and be it further

11 RESOLVED, That that we urge the Congress of the United
12 States to vote to repeal the Medicaid Maintenance of Effort
13 (MOE) requirements to allow states to have the flexibility to
14 administer Medicaid programs based on current circumstances in
15 each state with the goal of providing access to care to those
16 truly in need and eligible for assistance; and be it further

17 RESOLVED, That suitable copies of this resolution be
18 presented to the 12 members of the Joint Select Committee on
19 Deficit Reduction, members of the Illinois Congressional
20 delegation, the Speaker of the United States House of
21 Representatives, the Majority Leader of the United States
22 Senate, and the President of the United States.