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## **ACAP and the Partnership for Medicaid Stress Importance of Medicaid's Role in Health Reform Recommendations**

**Washington, DC (May 21)** Today the Association of Community Affiliated Plans (ACAP) and 12 other members of the Partnership for Medicaid, a coalition of major stakeholder organizations in the Medicaid program, released 14 recommendations for improving Medicaid in the context of health reform. On Monday, the Partnership gave all Members of Congress and leadership of several Congressional Caucuses a preview of the recommendations, which reflect the Partnership's commitment to work together with policymakers to strengthen the Medicaid program.

Meg Murray, CEO of ACAP and Partnership for Medicaid member, stated that Congress should preserve and protect Medicaid as health care is reformed, and that safety net providers and health plans should be adequately reimbursed as part of Medicaid improvements. "Congress is thinking about how to expand coverage to low-income populations with unique needs, so it is of critical importance that Congress assure participation by health plans and safety net providers with experience serving those needs," said Ms. Murray.

The recommendations agreed to by the Partnership for Medicaid include:

1. Universal coverage and access;
2. Expand Medicaid eligibility for all Americans up to a certain level of poverty;
3. Preserve the federal guarantee of Medicaid coverage, services and consumer protections;
4. Improve provider and health plan reimbursement rates in Medicaid to ensure broad access and funding stability for safety net providers, including Federally Qualified Health Centers (FQHCs), and ensure that new subsidized coverage plans adequately pay health care providers;
5. Retain DSH payments which preserve healthcare access for low-income patients;
6. Continue Graduate Medical Education (GME) payments to ensure a high quality and adequate physician workforce;
7. Strengthen Medicaid financing by adding an automatic countercyclical mechanism to increase the federal FMAP share in economic downturns;
8. Provide access to fair pharmaceutical pricing;
9. Maintain state flexibility and continue Medicaid as a testing ground for innovation;
10. Simplify enrollment procedures and encourage outreach to eligible but un-enrolled individuals;
11. Coordinate public and private programs to meet the needs of those with special health care needs;
12. Initiate substantial long-term care financing reform;
13. Quality improvement; and
14. Reduce waste, fraud and abuse through a coordinated, systematic approach.

"We hope these recommendations help contribute to the debate on reforming our nation's health care system," stated Thomas Johnson, executive director of Medicaid Health Plans of America and chair of the Partnership for Medicaid. "All of our organizations stand ready to work with Congress and President Obama to see that Medicaid is protected and improved as lawmakers draft a comprehensive health care reform package."

The Partnership for Medicaid is a non-partisan, nationwide effort by safety net providers to preserve and improve the Medicaid program. By working in a bipartisan manner with all levels of government and affected constituency groups, we seek to provide viable solutions to improving the quality and delivery of services, with the aim of constraining costs without undermining Medicaid's fundamental goals.

ACAP is a national trade association representing 42 nonprofit safety net health plans in 23 states. ACAP's mission is to represent and strengthen these plans as they work in their communities to improve the health and well-being of vulnerable populations. The typical ACAP plan was founded by a community health center, community hospital or another community-based organization that serves safety net populations. Collectively, ACAP plans serve 6 million enrollees, over 50 percent of individuals enrolled in Medicaid-focused health plans. For more information on ACAP and the Partnership's recommendations visit [www.communityplans.net](http://www.communityplans.net).

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