

Medicaid Matters

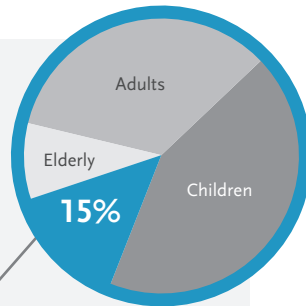
To People With Intellectual Disabilities

The government-funded health insurance program called Medicaid pays for the needed services which are provided either by private organizations like Mosaic or government agencies.

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Medicaid Enrollees

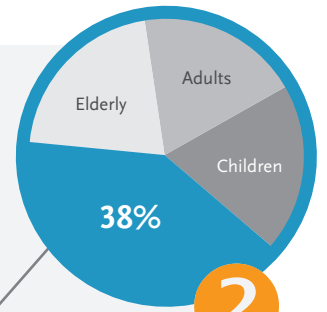
Medicaid recipients include eligible low-income adults, children, pregnant women, elderly adults and people with disabilities.



People with disabilities represent 15% of the 80.5 million Medicaid enrollees.

Medicaid Expenditures

Services for people with disabilities are the largest expense of the Medicaid program, because they require a lifetime of care.



People with disabilities account for 38% of Medicaid spending.

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Medicaid Benefits

States must offer nine benefits through Medicaid. States can also elect to offer 21 optional services. All of the services Mosaic provides are optional.



Mandatory Benefits Include:

- Inpatient hospital services
- Outpatient hospital services
- Physician services



Optional Benefits Include:

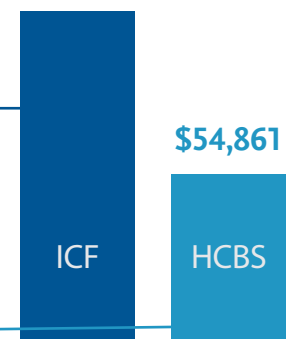
- Intermediate care facility services
- Home- and Community-Based services
- Dental and optometry services
- Prescription drugs

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Cost of Services

Intermediate Care Facilities cost more than twice the rate for services provided through **Home- and Community-Based Services**.

\$155,187



Annual cost of care per person

5

Waiting for Services

More than **590,000 people** with intellectual disabilities are on waiting lists for **Home- and Community-Based Services**.

Frequently Asked Questions

What is Medicaid?

Medicaid is a publicly funded and administered health insurance program. It provides coverage for people with disabilities, the elderly, low income adults and children.

How is Medicaid different than Medicare or private health insurance?

Medicare and private health insurance typically only cover acute health care—Medicaid covers both acute health care and long-term care. Medicaid is only offered to people who demonstrate financial need and/or qualify for other reasons, such as having a disability. The people Mosaic support qualify on both financial and disability needs.

Acute health care and long-term care? What's the difference?

Acute health care typically treats conditions like colds, influenza or broken bones through medical care. Treatments focus the short term: curing diseases, healing from accidents and preventing future illness or injuries. Other than major health events like cancer, costs are usually fairly low.

Long-term care focuses on supporting and improving the lives of people who have long-term, continual needs that cannot be cured. Treatments range from help with daily tasks like cleaning, bathing, meal prep and feeding to speech therapy, mental and behavioral health. Because these needs are life-long and require continuous care, costs are much higher.

How does Medicaid help people with intellectual and developmental disabilities (IDD)?

For most people, long-term care is too expensive for an individual or a family to afford, even with full-time employment. Almost all of the nearly 4,900 people Mosaic supports rely on long-term care to survive, with Medicaid being almost the sole funder.

How much funding does Mosaic receive from Medicaid?

Nearly 96% of Mosaic's funding comes from Medicaid.

Medicaid spending seems to be really high, why is that?

Medicaid spending has grown in the last 15-20 years because more people need and qualify for Medicaid-funded services. As baby-boomers age, more are receiving Medicaid. Additionally, more people with IDD will need increased Medicaid funding because their parents can no longer care for them at home. In the U.S. today, there are nearly one million households in which an adult with IDD is living with caregivers 60 or older.

Isn't there a way to control costs better?

Medicaid is the most cost-effective health care program in the United States. Despite its efficiencies, there are still many more people who qualify for Medicaid who aren't receiving benefits. In the US, more than 590,000 people with IDD are on waiting lists to receive care in a community setting. Community care settings (group homes, in-home support and host homes) usually cost much less than state institutional settings, but states are not required to offer community-based care to people who qualify for it.