FACT SHEET

HEALTH & HOME AND COMMUNITY BASED SUPPORTS

BACKGROUND

Health Care
The Affordable Care (ACA) made significant progress in expanding access to health care and protecting people with pre-existing conditions, including people with disabilities. The law also makes health care more affordable by preventing insurers from charging people with disabilities and health conditions more for health insurance, providing premium assistance, and by making some preventative care free. People with autism and other disabilities are ensured essential health benefits such as prescription drugs, physical, occupational, habilitative, and behavioral therapies that help people to live healthy and independent lives.

In December of 2018, a Texas Judge ruled the ACA unconstitutional. The Administration backed this ruling, and urged the federal courts to overturn the law in its entirety, including the Medicaid expansion. This action could lead to a loss in coverage to 30 million and would end protections for those with preexisting conditions.

A number of bills have been introduced in the House to strengthen the foundation of the ACA by reducing consumer costs and increasing state funding. One bill, the bipartisan Strengthening Health Care and Lowering Prescription Drug Costs Act (H.R. 987) passed the House in May. The bill includes provisions aimed at lowering prescription drug prices. In addition, it restores funding for Navigators and enrollment, provides funding for states to establish their own state-based exchanges and resets short-term plans as only three-month options, reversing the Administration’s efforts to expand these non-ACA compliant plans. The Senate has not taken action on this bill.

Long Term Services and Supports
The federal/state Medicaid program is an effective and cost-efficient program that provides health and long term services and supports for millions of Americans. However, many states have long waiting lists for participation in Medicaid-funded community-based supports and services.

While Medicaid is a federally administered program, states retain authority and flexibility to provide services to targeted populations on condition that they meet basic Medicaid requirements. Home and Community Based Services (HCBS) are optional services or subject to federally-approved waivers. States are allowed to cap the number of participants in HCBS which leads to long waiting lists for participation in Medicaid-funded, community-based supports and services. Steps must be taken to remove the institutional bias of federal programs and increase the investment in home and community-based services and supports.

Congress is considering several proposals that would increase authority and funding for Home and Community-based services and supports:

Money Follows the Person: The EMPOWER Care Act would reauthorize the Money Follows the Person (MFP) for five years. HR 1342 was introduced by Brett Guthrie (R-KY) and Debbie Dingell (D-MI) and was passed by the House of Representatives in June. The Senate bill (S. 548) was introduced by Rob Portman (R-OH) and Maria Cantwell (D-WA) and is awaiting movement. The MFP program gives states extra dollars to provide employment, housing and other services needed to assist people transitioning from nursing homes and institutions to apartments or group homes. It also helps states build capacity for community-based services for everyone. Money Follows the Person officially expired in 2016. Since that time, states

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had been using up whatever money they had left for the program, but all states were scheduled to exhaust their funds by the end of 2018.

**Respite Care:** Senators Susan Collins (R-ME) and Tammy Baldwin (D-WI), and Representatives Jim Langevin (D-RI) and Cathy McMorris Rodgers (R-WA) introduced the Lifespan Respite Care Reauthorization Act of 2019 (S. 995 & H.R. 2035). This program authorizes development and coordination of respite care programs for people with disabilities of all ages. The bill increases the authorization for appropriations to $10 million.

**Institutional Bias:** Another bill designed to remove the institutional bias is the Disability Integration Act (S. 117, H.R. 555) introduced by Senator Chuck Schumer (D-NY) and Representative James Sensenbrenner (R-WI). This bill requires both public and private insurance that cover any kind of long term care to give equal coverage to home and community support services, so that individuals can choose that option if it is what they want. This bill builds on the Americans with Disabilities Act and the U.S. Supreme Court’s *Olmstead* decision, and asserts that people with disabilities have a right to live in their own homes and communities and to receive the services and supports they need to do so.

**Universal Health and LTSS:** There are also several bills introduced in Congress to provide universal health care and long term services and supports: Medicare for America Act (H.R. 1384), introduced by Rep. Jayapal (D-WA); Medicare for All Act (H.R. 1129) introduced by Sen. Sanders (D-VT); and Medicare for America (HR 2452) introduced by Rep. DeLauro (D-CT). All of these bills expand the scope of benefits covered by Medicare and include home, and community based services and supports based on functional needs without income or asset limits. These proposals would greatly benefit individuals and families with autism in need of long-term services and supports in addition to quality health care services.

**Social Security:** Social Security’s SSI program provides monthly benefits to ensure income for people who are aged, blind, or have disabilities and have very low income and assets. Over 8 million people receive SSI, including nearly 6 million children and adults with autism and other disabilities.

**RECOMMENDATIONS**

The Autism Society recommends Congress:

- Support bills that protect and strengthen the Affordable Care Act; oppose efforts to repeal the ACA.
- Oppose efforts to cut, cap or eliminate the individual entitlement to Medicaid.
- Reauthorize the Money Follows the Person (MFP) by passing the EMPOWER Care Act.
- Support the Lifespan Respite Care Reauthorization Act of 2019.
- Reduce the bias in Medicaid for institutional services and significantly increase the investment in home and community-based services and supports.
- Support the inclusion of long-term services and supports in any bill to provide universal health care.
- Support the Disability Integration Act and other proposals that support the right to services in the community.
- Congress should reject any cuts to Social Security and pass the Social Security 2100 Act, S. 269, H.R. 860 to extend solvency and make benefit improvements.

**COMMITTEES OF JURISDICTION**

- Senate Finance and HELP Committees
- House Ways and Means and Energy and Commerce Committees

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