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HOUSE RESOLUTION NO. 129

Offered January 15, 2013

Encouraging the Governor of the Commonwealth of Virginia to work together with the General Assembly to extend the Commonwealth's program of medical assistance pursuant to Title XIX of the United States Social Security Act as authorized by the Patient Protection and Affordable Care Act.

Patrons—Hope, BaCote, Brink, Bulova, Carr, Dance, Filler-Corn, Herring, Hester, Howell, A.T., James, Johnson, Keam, Kory, Krupicka, Lewis, Lopez, McClellan, McQuinn, Morrissey, Plum, Scott, J.M., Sickles, Spruill, Surovell, Torian, Toscano, Tyler and Ware, O.

Referred to Committee on Rules

WHEREAS, more than one million Virginia residents, or approximately 14 percent of the Commonwealth's total population, do not have health insurance; and

WHEREAS, the Commonwealth's program of medical assistance established pursuant to Title XIX of the Social Security Act and administered by the Department of Medical Assistance Services in accordance with the state plan for medical assistance provides medical services for low-income individuals who meet certain eligibility criteria who do not have access to health insurance; and

WHEREAS, the Patient Protection and Affordable Care Act, signed into law on March 23, 2010, includes provisions allowing states to extend eligibility for medical assistance to include household incomes below 138 percent of the Federal Poverty Level, an option that would extend eligibility for medical assistance services to an estimated 400,000 or more Virginians, including more than 84,000

WHEREAS, the federal government will pay 100 percent of the cost of medical assistance services for newly eligible individuals for the years 2014 through 2016, 95 percent for 2017, 94 percent for 2018, 93 percent for 2019, and 90 percent for 2020 and subsequent years; and

WHEREAS, while extending the Commonwealth's program for medical assistance services in accordance with the option included in the Patient Protection and Affordable Care Act would cost the Commonwealth an estimated \$1 billion over the next 10 years, the Commonwealth would receive an additional \$20 billion during this same period for the purpose of providing medical assistance services in the Commonwealth; and

WHEREAS, implementing the extension of medical assistance services in Virginia would provide an estimated \$3.9 billion in economic growth in the Commonwealth; and

WHEREAS, spending of federal funds associated with the extension of the Commonwealth's program of medical assistance could support more than 30,000 new jobs in the Commonwealth; and

WHEREAS, while most of the direct benefits resulting from extension of the Commonwealth's program of medical assistance would accrue to the health care sector, significant benefits would also be enjoyed by individuals, families, and businesses; and

WHEREAS, the United States Supreme Court's decision in National Federation of Independent Business et al. v. Sebelius et al. made the extension of Medicaid to newly eligible populations voluntary for the states: and

WHEREAS, Virginia's Medicaid program has grown an unsustainable 1,600 percent over the last 30 years, from five percent of state spending to 20 percent of state spending over the same period; and

WHEREAS, Virginia seeks broad authority and flexibility to reform the state program of medical assistance services in order to strengthen the program and build a more sustainable model for the future;

WHEREAS, any extension of coverage under the state plan for medical assistance is conditioned on federal financial support being maintained at current levels outlined in the Patient Protection and Affordable Care Act; now, therefore, be it

RESOLVED by the House of Delegates, That the Governor of the Commonwealth of Virginia be encouraged to work together with the General Assembly to extend the Commonwealth's program of medical assistance pursuant to Title XIX of the United States Social Security Act as authorized by the Patient Protection and Affordable Care Act and seek broad state flexibility to (i) reform and strengthen the existing state program of medical assistance services, (ii) design a benefit package and delivery reforms better suited for a potential newly covered population of low-income able-bodied adults to improve quality and reduce costs, and (iii) take advantage of the health improvement and economic benefits resulting from expenditure of federal Medicaid funds; and, be it

RESOLVED FURTHER, That the Clerk of the House of Delegates transmit a copy of this resolution to the Governor of the Commonwealth so that he may be apprised of the sense of the Virginia House of HR129 2 of 2

57 Delegates in this matter.