



Lutheran
Services
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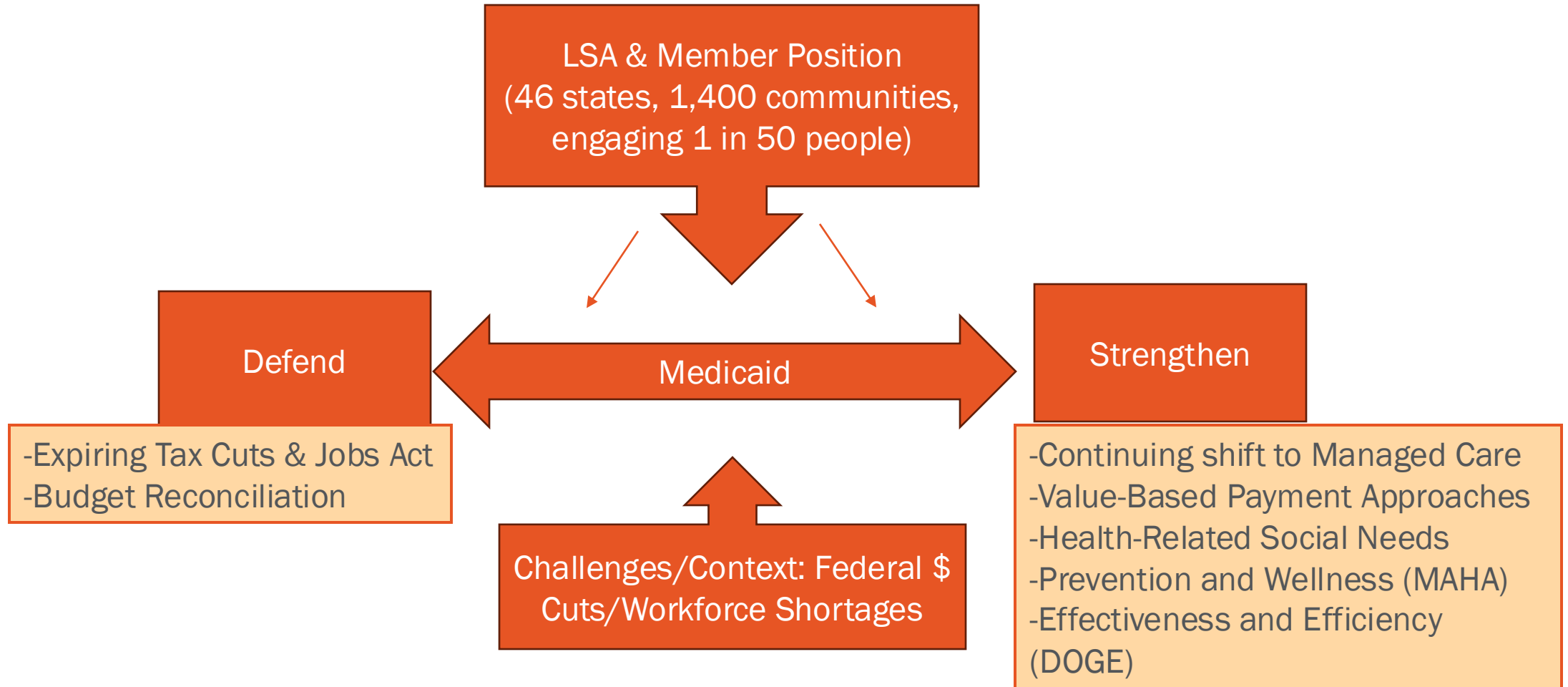
Medicaid Status Update & Advocacy 101: Building Relationships

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JUNE 12, 2025

Here We Stand
For People. For Care.
For Medicaid.

LSA's Overarching Communications/PR Needs



State of Play

How Does This Play Out?

- Senate and House must agree and pass a Budget Reconciliation Bill. And they are still seemingly charting different approaches that must be reconciled.

HOUSE PASSED BILL:

- **\$715 Billion in cuts to Medicaid**
- **Adds over \$2 Trillion to the Deficit**



SENATE:

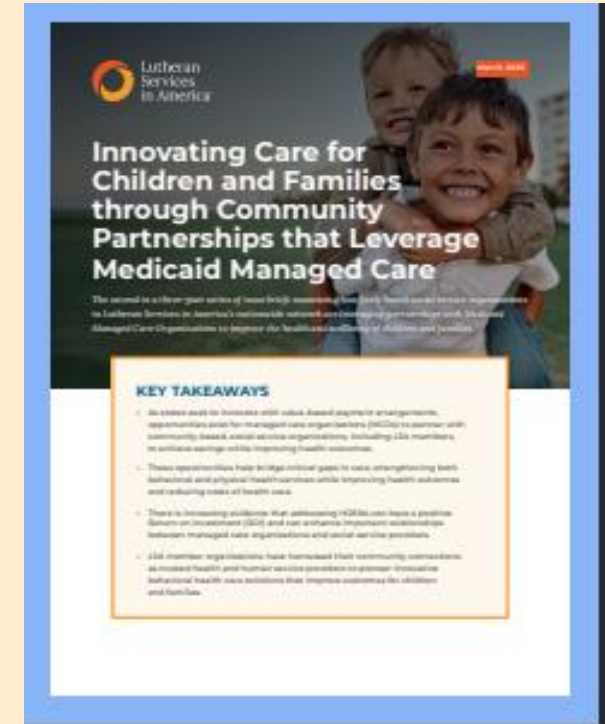
- **Senate Leadership – “Looking for \$600 Billion in Cuts to Medicaid”**

Budget Reconciliation Timeline

- May 22nd: House passed its budget reconciliation package.
- NOW (the next TWO WEEKS): Senate leadership and other Senators shape their version of the bill and negotiate changes.
- Target date of before June 30th (when the July 4th district work period begins): Senate passes their bill
- Further negotiations between House and Senate and Final Passage: later this Summer

Resources to Join Us and Get Involved!

- **Here We Stand. For People. For Care. For Medicaid.**
 - lutheranservices.org/here-we-stand
- Great FREE Resource: **Kaiser Health News**
 - <https://kffhealthnews.org/>
- NEW: **2nd Strengthening Families Issue Brief**
“Innovating Care for Children and Families through Community Partnerships that Leverage Medicaid Managed Care”



Advocacy 101: Relationship-building

Through the lens of Medicaid



WHEN: Now

WHO: Key Targets, other targets based on location

State	Chamber	First Name	Middle Initial	Last Name	Affiliation & State	Committee Assignments
Alaska	Senator	Lisa	A.	Murkowski	R-AK	HELP
Alaska	Senator	Daniel		Sullivan	R-AK	
Iowa	Senator	Joni		Ernst	R-IA	
Idaho	Senator	Michael	D.	Crapo	R-ID	Finance
Indiana	Senator	Todd		Young	R-IN	Finance
Kansas	Senator	Roger	W.	Marshall	R-KS	Finance, HELP
Louisiana	Senator	Bill		Cassidy	R-LA	Finance, HELP
Maine	Senator	Susan	M.	Collins	R-ME	Appropriations, HELP
Missouri	Senator	Eric		Schmitt	R-MO	
North Carolina	Senator	Thom		Tillis	R-NC	Finance
Ohio	Senator	Jon	A.	Husted	R-OH	HELP
Ohio	Senator	Bernie		Moreno	R-OH	
Pennsylvania	Senator	David		McCormick	R-PA	
Utah	Senator	John		Curtis	R-UT	
West Virginia	Senator	Shelley	M.	Capito	R-WV	Appropriations
West Virginia	Senator	Jim		Justice	R-WV	

Building relationships with elected officials

- Connect with their staff members
 - *Email*
 - *Phone*
- What can you offer them?
- What can you ask of them?

How to set up meetings

- Be flexible and offer options
- Phone
- Zoom or other video platforms
- Grouped meetings
- Other venues

How to conduct meetings

- What to expect
- How to prepare
 - *Look up key details in our [Congressional Directory](#)*
- Who should attend?
 - *Staff*
 - *Clients*
- What to do when you get there: who should say what?
- What do you bring with you or share?

Examples of meeting materials



MEDICAID MATTERS

Reject Any Legislative Proposal to Cut, Cap, or Block Grant the Program

Lutheran Services in America is a faith-based network of health and human service providers dedicated to advancing health and opportunity in 1,400 communities across the country. We recognize the essential role Medicaid plays in supporting working families, rural communities, older adults, people with disabilities, and others.

We urge policymakers to protect Medicaid from harmful cuts to the program in any form — including direct cuts, caps, or block grants — that would threaten access to care and financial security for millions of people in America. These measures would lead to millions of people losing access to health insurance.

Other proposed changes such as **work (reporting) requirements, more frequent income reporting requirements for enrollees, limiting states' ability to use provider taxes to support Medicaid, and reducing the federal contribution for Medicaid expansion populations** would also lead to major losses in coverage.

This would **shift significant costs and risks to states**, leading to the depletion of resources otherwise available for other essential services and to worse health outcomes for children, working parents, and others.

Medicaid provides health insurance to almost 80 million people including:

- 7.2 million older adults, among them 756,000 nursing home residents;
- 36.8 million children;
- 14 million rural residents; and
- 8.4 million adults with disabilities.

Medicaid supports hardworking families

- Cutting Medicaid would place a **huge financial burden on hardworking Americans**, many of whom work in sectors without employer-sponsored health insurance.
- Medicaid benefits are more comprehensive than private insurance at a significantly lower out-of-pocket cost to many hardworking, middle class, and low-income beneficiaries.
- Protecting Medicaid means children miss fewer school days and are more likely to earn more as adults; families have less risk of medical debt and can afford to buy groceries and pay rent; and seniors are more able to stay healthy and receive needed care.

Medicaid strengthens rural America

- Medicaid is a critical funding source keeping rural hospitals open. Since 2010, **74% of rural hospital closures have been in states that have not expanded Medicaid**.
- Cuts to Medicaid directly threaten the ability of rural hospitals, skilled nursing facilities and clinics to retain doctors, nurses, and healthcare professionals.
- Protecting Medicaid keeps emergency care available, supports rural economies, and maintains access to care for families, farmers, and small business owners in rural communities.
- When Medicaid funding is reduced, rural healthcare providers face even greater financial strain, further exacerbating existing staffing shortages, leading to longer wait times for services for patients seeking care.

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Here We Stand For People. For Care. For Medicaid.



Medicaid keeps people healthier and prevents higher costs for everyone.
By helping people stay connected to care, Medicaid prevents medical issues from escalating, reducing costly, uncompensated emergency care and the burden on hospitals, families, and taxpayers. It also gives children the foundation to grow up healthy, stay in school, and thrive because a healthier start means a stronger future for all of us.



We're using Medicaid to innovate, and we have the results to prove it.
Lutheran Services in America members are delivering real, community-based solutions that improve outcomes and lower costs. Medicaid funding is leveraged with philanthropic support and local partnerships to do more with less; a smarter, more sustainable way forward.



Medicaid is under threat and the cost of cuts will be felt by all of us.
With a growing aging population and a shrinking caregiver workforce, now is the worst time to pull support from Medicaid. Cuts would deepen the care shortage, destabilize providers, and leave families and entire communities without the support they need to stay healthy and economically secure.



Medicaid works and we should make it stronger, not smaller.
Medicaid is one of the most efficient public programs in the country, with verified eligibility, strong oversight, and low administrative costs. Medicaid should always work better, but these cuts aren't about fixing anything. They're about pulling care away from people who need it.



We reinvest in care, not profits, and communities are stronger for it.
As nonprofit providers, Lutheran Services in America members lead programs that are accountable, locally driven, and built to last. In a country where health affects everything from school attendance to workforce participation, ensuring access to care isn't just the right thing to do, it's a shared responsibility and a smart investment in community well-being.



Medicaid is more than a policy. It is at the core of health care in this country.
It supports millions of people through real challenges, from illness to caregiving to disability, and helps children grow up with the security of consistent care. It also helps seniors access long-term services that Medicare doesn't cover, like nursing home care and in-home assistance. Our members see the stories behind the statistics every day: how Medicaid keeps families together, protects dignity, and strengthens lives and communities.



Medicaid Matters to Ohio

The Ohio Medicaid program covered 3 million beneficiaries as of February 2024, including traditional Medicaid, expansion, Children's Health Insurance Program (CHIP), and long-term services and supports populations. Ohio Medicaid mainly operates through Medicaid managed care plans. As a part of the Next Generation of Ohio Medicaid initiative, the state launched OhioRIS (Resilience through Integrated Systems and Excellence), a specialized managed care program for youth with complex behavioral health and multisystem needs in 2022. The initiative also included an updated recruitment of the state's Medicaid managed care program, with contracts that took effect in February 2023 with AmeriHealth Caritas, Anthem Blue Cross Blue Shield, CenturaCare, Centene/Buckeye Health Plan, Humana, Molina, and UnitedHealthcare. Ohio also operates the MyCare Ohio program to dual eligible, a network of pediatric accountable care organizations, a comprehensive maternal care program, and a Program of All-Inclusive Care for the Elderly (PACE). In May 2024, Ohio released a request for applications (RFA) for MyCare Ohio managed care organizations (MCOs) interested in providing services to individuals dually eligible for Medicare and Medicaid as part of the Next Generation MyCare Ohio program. The MyCare Ohio program currently operates under the Centers for Medicare & Medicaid Services' Financial Alignment Initiative demonstration program and is scheduled to end by December 31, 2025. Under the Next Generation MyCare Ohio program, the state is requiring MCOs to become CMS-approved fully integrated dual eligible special needs plans (FIDE-SNPs). Plans awarded a Next Generation MyCare Ohio contract will need to notify CMS of their intent to establish a FIDE-SNP in Ohio by fall 2024. The contract will run from January 1, 2026, through December 31, 2028, with the option for annual renewals. The selected FIDE-SNPs will begin coverage in the current 29 demonstration counties and the remainder of the state will be phased in. ODM reported there are approximately 150,000 individuals currently enrolled in the MyCare Ohio demonstration program, and approximately 43 percent of enrollees elect to have their Medicare and Medicaid benefits coordinated by one MCO. Effective October 2022, a single PHM provides pharmacy services across all Ohio Medicaid managed care plans and members, except for MyCare Ohio members. Total expenditures on Medicaid in Ohio were \$31.7 billion in fiscal 2023.

The Medicaid agency website can be found [here](https://ohio.gov/ohio-medicare).

Ohio Supports Medicaid



of Ohio voters say it's important to have a strong, sustainable Medicaid program in the US



of Ohio voters have a favorable view of Medicaid



of Ohio voters oppose cutting funding for Medicaid



of Ohio voters say Managed Care is important to the Medicaid

25.6% of Ohio residents are covered by Medicaid



Who Does Medicaid Cover?

Medicaid Covers...

3,014,826

Total Medicaid/CHIP Enrollment
As of February 2024

902,205

Total Medicaid Expansion Population
As of September 2023

Total State Population: 11,785,835

Ohio's Commitment to Medicaid

\$31.7 B

Total Dollars
As of fiscal year 2023

\$8.2 B

State Dollars
As of fiscal year 2023

64.6%

Federal Contribution (FMAP)

239,627

Total CHIP Enrollment
As of February 2024

2,644,062

Total Managed Care Enrollment
As of February 2024



Of Those Covered by Medicaid...

44%

Are non-disabled and non-elderly adults

13%

Are children

8%

How to follow up

- Send a thank you email
- Keep any promises you made
- Submit a request for a site visit
- Report back to Lutheran Services in America on your meeting using [our quick form](#)

Maintaining relationships

- DO become a trusted resource
- DON'T become a “pen pal”

Questions – contact LSA staff:

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THANK YOU!

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