

Section 1115 Demonstrations: Florida MEDS-AD

Public Comments

Title	Description	Created At
test comment		2012-06-15 10:22
test		2012-06-15 09:57
<p>The AIDS Institute is concerned about the negative impact the proposed amendment could have on those living with HIV.</p>	<p>The AIDS Institute is a national nonprofit organization, based in Tampa, Florida, providing leadership in HIV/AIDS public policy, research, advocacy, and education that seeks to reduce the number of new HIV infections and bring people who are HIV positive into lifesaving care and treatment. A central component of the organization's advocacy efforts is to help improve access to healthcare for people living with HIV.</p> <p>The AIDS Institute urges CMS not to approve the harmful Medicaid amendment the State of Florida is seeking through the 1115 Demonstration, Florida MEDS-AD, submitted April 26, 2012. We are particularly concerned about the negative impact it could have on those living with HIV, for whom access to and continuity of care is critical.</p> <p>The State of Florida is seeking to fundamentally change its "medically needy" Medicaid program. The program currently serves approximately 250,000 enrollees annually and covers the cost of medical care when low income individuals have incurred catastrophic medical expenses. According to a 2002 report over 1,000 Floridians living with HIV are eligible for Medicaid through the "medically needy" category. As more people are now living with HIV since the publication of that report, that number today is likely much greater.</p> <p>Currently, when an eligible patient demonstrates that they have acquired a certain threshold of medical expenses, Medicaid will cover the cost of medical care. However this amendment, if approved, would change that. The amendment would require an individual to pay, an often unaffordable, monthly premium out of pocket in order to access any Medicaid covered care. Further, an individual unable to afford the premiums for three months in a row would be kicked out of the system altogether. Florida CHAIN estimates that these premiums could total as much as 90% of a disabled person's income and 80% of a parent of two's income. Even among those for whom premiums may be lower, any additional cost-sharing can be unaffordable for low-income individuals who are already struggling to afford the typical expenses incurred in any household budget. We know from experience that many patients will often forgo care when faced with unaffordable health care expenses.</p>	2012-06-04 09:41

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	<p>This amendment would have devastating effects on many poor and sick individuals, but we are particularly concerned about the HIV positive population. For individuals living with HIV, continuity of care and access to drugs is critical to good health and preventing progression of the disease. An individual who lapses out of care will potentially face detrimental medical setbacks which are typically more difficult to treat and are more costly in the long run. Further, keeping a person living with HIV in care also has positive effects on public health, because we know that when a positive individual is in care and has a viral load suppressed through medications, the ability to transmit the virus is reduced by up to 96%.</p> <p>Low income people living with HIV simply cannot afford the cost of care and treatment (medications alone typically run over \$20,000 per year) without assistance. These proposed changes to the “medically needy” program would act as a harmful cost-containment strategy, deterring low-income HIV patients from accessing care. It would have a devastating impact on individuals and families and could also negatively impact public health.</p> <p>This amendment shifts the costs to the individual without necessarily improving access to care. We ask that CMS carefully consider the impact this policy change would have on some of the poorest and sickest members of the community, individuals and families who can least afford such a change, and reject the amendment.</p>	
<p>Who is looking into waste and other normal methods of saving money rather than cuts?</p>	<p>Rather than spend all this time and effort trying to find ways to cut medical services, can anyone tell me who is spending equal time scrutinizing the budgets, looking for waste, duplication of effort and unnecessary expense within the system? It seems to me that no one is talking about all these opportunities that very well could produce as much if not more savings rather than killing people in the process of a political malaise produced alternative agenda's</p>	<p>2012-05-23 19:07</p>
<p>As a Licensed Clinical Social Worker working with many children who utilize Medicaid services they are essential and costsaving</p>	<p>With continued ability of access to Medicaid services for as many children as possible; there will be less need for hospitalizations and other costly services and the children will be more healthy as well; lives are saved everyday for children who have Medicaid services and the families caring for them are just able to pay mortgages and buy food; this essential services not only saves lives but prevents future health care costs from rising. A ***** infant with a heart problem that has regular follow up care has fewer hospitalizations and a better survival rate. In the past seven years I have worked with numerous children who have received health care from community providers that prevented their hospitalization and ER visits; I have had cases where the Medicaid was not active and they had to be seen at ER for much higher costs. Coverage for</p>	<p>2012-05-23 15:13</p>

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	all children with Medicaid who have no other health care is essential, cost effective and SAVES LIVES. I witness this everyday in my work as an assessor of children's health including emotional healthcare which also prevents hospitalizations and more expensive treatments.	
The chief reason for disenrollment from Florida's KidCare program is failure to pay monthly premium. This proposal ignores that fact.	The chief reason for disenrollment from Florida's KidCare program is failure to pay monthly premium. This proposal ignores that fact.	2012-05-23 13:55
State says MedNeedy must pay huge premiums up to \$1800/mo. or lose all Medicaid access,while marketing as continuous coverage.Cruel&deceptive		2012-05-23 13:34
This proposal demonstrates the need for CMS to apply the new waiver transparency guidelines to waiver amendments.		2012-05-15 10:55