

# SUPPORT EQUITY FOR SENIORS AND PEOPLE WITH DISABILITY

## Raise Medi-Cal Aged & Disabled Income Limit to Same Limit as Other Adults Health Care



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### Problem:

Most adults under 65 are eligible for free Medi-Cal with incomes up to 138% of the Federal Poverty Level (FPL), while most seniors and people with disabilities can only qualify for free Medi-Cal if their incomes are below 123% FPL – the eligibility level for the Medi-Cal Aged and Disabled Program (A&D Program). Once over the A&D income eligibility limit, seniors and people with disabilities are enrolled in Medi-Cal with a share of cost. For many this means they can't afford to use their Medi-Cal.

### Background:

The Affordable Care Act and state legislation increased the Medi-Cal income eligibility level for most adults to 138% FPL, but most seniors and people with disabilities with income above 123% FPL (a difference of about \$150 per month) have a share of cost.

A share of cost is the difference between a beneficiary's countable income and the Maintenance Need Income Level (MNIL), or what the state considers to be the base amount of income a person needs to survive on a monthly basis. Since 1989, the MNIL has been steady at \$600 per month and any income over that amount becomes that individual's share of cost. For example, a 65 year old with a monthly income of \$1,250 would have a share of cost of \$650. If that same beneficiary was 64, she would be enrolled in free Medi-Cal.

The income level for the A&D Program is 100% FPL plus \$230 for an individual or \$310 for a couple. When the program started in 2001, that was the equivalent of 133% FPL, but in 2018 the income limit is equivalent to 123% FPL (\$1,242 for an individual and \$1,682). This means that every year, the A&D program eligibility limits declines relative to the FPL.

Additionally, paying the share of cost creates significant barriers for seniors who want to live in the community and need access to affordable health care. Forced between paying for rent and food or their Medi-Cal share of cost, many seniors forgo needed medical services, prompting them to move into skilled nursing facilities at a high cost to the state and an even higher personal cost to their own independence and well-being.

Raising the A&D income limit to 138% FPL is the simplest and most cost-effective way to ensure low-income seniors have equitable access to affordable health care.

### Solution:

Appropriate \$30 million to decrease the number of low-income seniors and people with disabilities who face a high Medi-Cal share of cost. Allocate these funds to increase the A&D Program income level to 138% FPL, an amount equivalent to other adult Medi-Cal income levels.

*We urge the budget subcommittees to raise the A&D income limit.*