Who gets Medicaid in Pennsylvania?

In tandem with its effort to “repeal and replace” the Affordable Care Act, Congress is taking steps to cut and “cap” federal funding for Medicaid, thereby shifting more costs onto the states.

A House bill introduced on March 6th to repeal the ACA would reduce federal funding for Medicaid by $370 billion over ten years, according to an analysis by the Center for Budget & Policy Priorities. In response to such a drastic cut in federal funding, Pennsylvania would have no choice but to limit Medicaid enrollment and cut benefits.

Who gets Medicaid in Pennsylvania? What difference does it make in their lives? Here we highlight a handful of Pennsylvanians who have agreed to share their stories.

Children with Special Needs

Brody Park,
Wayne County

Because of Medicaid, Brody’s parents are able to care for him in their home, rather than a hospital or institution.

Brody is a 9-year-old boy diagnosed with Lesch-Nyhan Syndrome (LNS), a rare genetic disorder that results in neurological and physical disabilities and self-injurious behavior. Brody uses a wheelchair to get around, is limited in his ability to communicate, and requires constant one-on-one supervision and care. When his parents are at work or sleeping, Medicaid covers the skilled nurse needed to administer his medications, feed him through a G-tube, and ensure his safety when he tries to hurt himself. Medicaid allows Brody to receive care in his own home.
**Benjamin Graham**  
**Luzerne County**

Because of Medicaid, Benjamin is able to attend school despite his significant health problems.

Benjamin is a 7-year-old boy with Lennox Gastaut Syndrome, a severe form of epilepsy that is very difficult to treat. He experiences multiple types of seizures, including grand mal seizures where he stops breathing. These seizures can occur without warning. As a result, when Benjamin is at school and away from his parents, he needs a one-on-one nurse to watch for seizure activity and to administer rescue medication. The school nurse splits her time between two elementary schools and cannot meet his needs. Medicaid provides the one-on-one nurse that allows Benjamin to attend school safely.

**Older Adults & Adults with Disabilities**

**Susan & Grant Amway**  
**Chester County**

Susan and Grant both have disabilities, and depend on Medicaid and Medicare to get the health care they need. Medicaid covers the in-home supports that Grant needs to stay out of a nursing home and in his own home with Susan.

Grant suffers from a number of health problems, including traumatic brain injury, heart failure, diabetes, and esophageal cancer. He is treated by a team of nearly three dozen doctors and takes over 50 medications. Susan has health problems too. She suffers from epilepsy, sleep apnea, spinal cord damage, and a heart condition that increases her risk of stroke. They get by on Social Security Disability benefits alone. Medicaid covers the Medicare cost-sharing and deductibles that they would not be able to otherwise afford (for doctor’s visits and Grant’s wheelchair, for example).
Medicaid also covers the items that Medicare doesn’t, like suppositories, adult diapers, and liquid nutrition. Although navigating the two insurances has presented challenges over the years, they are extremely grateful for Medicaid.

Grant has been able to avoid a nursing home and stay in his home because of Medicaid long term care supports. Through a “waiver” program that provides in-home services and supports, Medicaid covers 40 hours a week of personal care assistance. It also covered a home modification to make Grant’s bathroom accessible and a special hospital bed he needed because of his size. And it covers the regular service and repair of a wheelchair lift that enables Grant to get out of his house to attend his medical appointments and participate as fully as possible in life activities. Grant and Susan are thankful that they receive this help through Medicaid so that, despite their disabilities, they can continue living with one another and in the house that they love.

Linda Morris
Allegheny County

As she approaches her 61st birthday, Linda Morris likes to spend as much time as she can with her granddaughter. Having Medicaid coverage has helped her maximize that time. Medicaid has allowed her to get the care she needed to stabilize her health and avoid going back into the hospital. Linda enrolled in expanded Medicaid in 2015. Prior to that, she had been uninsured for over seven years. Following her husband’s death, she could afford neither health insurance nor the regular testing supplies and insulin required to manage her diabetes. She also struggled to afford the medications needed for her depression and bipolar disease.

Now on Medicaid, Linda continues to have health issues – like the diabetic retinopathy that causes swelling and bleeding in her eyes – but her health is stable. Medicaid has allowed her to afford her medications, to keep her regular therapy appointments, and to bring her blood glucose down from alarming levels to under control. (Her A1C level has fallen from 12 to 7.4.) Medicaid has allowed Linda to worry less about her health and to focus on more important things, like spending time with her granddaughter.
Low-Wage Workers

Wendy White
Tioga County

Despite her significant health problems, Wendy works full-time. She’s able to work forty hours a week or more as a caretaker because Medicaid allows her to manage her degenerative disc disease, diabetes, and other health conditions. Her job does not offer health insurance. She has had Medicaid for nearly a year, and it has given a quality of life she would not otherwise have. Medicaid covers the physical therapy she needs for her back, the insulin she needs for her diabetes, and the medications she needs for her cardiac problems. Medicaid allows her work.

As Wendy explains, “I don’t know where I would be right now without Medicaid, probably sitting home sick and in pain.”

Take Action

Share your own stories about Medicaid’s value and the importance of continued federal funding. Individuals who are worried about the future of Medicaid are encouraged to call their U.S. Representatives and Senators.

Press inquiries should be directed to Kyle Fisher at KFisher [at] phlp [dot] org.

Pennsylvania Health Law Project – March 2017