

General Talking Points

In addition to the below sample TPs, we recommend having at the ready: How many patients your org serves on Medicaid, percentage of revenue from Medicaid, where that revenue goes (staff salary, etc.), potential workforce impacts from significant Medicaid funding reductions, talk about partnerships with hospitals and law enforcement, including increased burdens on them if community health funding is eroded.

- Medicaid is the [largest payer](#) of mental health and substance use care services.
- **Cuts go far beyond ‘waste, fraud and abuse’:** Eliminating upwards of \$800 billion in Medicaid funding and taking away coverage from millions of Americans goes far beyond strategically targeting ‘waste, fraud and abuse.’ Many of the proposed reforms won’t reduce fraud, but they will reduce access to care for those who need it most.
- **Historic cost-shift to states:** At a time when many lawmakers are focused on improving government efficiency and reducing red tape, this bill would instead impose costly new layers of bureaucracy and administrative hurdles, leaving state leaders to make the hard decisions about which providers payments to cut, who should keep their health insurance coverage and which services to pare back or eliminate.
- **Bureaucratic red tape:** This bill will mandate new costly policies that several states have already tried and subsequently abandoned due to ineffectiveness or increased administrative burden. Proposals mandating patient cost-sharing can have significant impacts, as even modest copayments can deter Medicaid enrollees experiencing mental health and substance use challenges from seeking care.
- Many individuals with behavioral health conditions have low or no income, **making cost-sharing a significant barrier to essential services.**
- **Widespread coverage loss and reduced access to essential services:** Loss of coverage for more millions of Americans means patients will lose access to needed services like therapy, medication-assisted treatment (MAT), and psychiatric care.
- Overwhelming opposition: Polling consistently shows that voters – including the core Republican base – overwhelmingly oppose these proposed cuts to Medicaid. According to Trump pollster Fabrizio Ward, 70% of voters oppose cutting Medicaid spending to pay for tax cuts. Two-thirds of swing voters oppose, as do Trump voters by a 15-point margin.
- No programs are perfect – but Medicaid has done incredible work at expanding access to mental health and substance use care in our district and across the country.
- The amount of waste, fraud or abuse in Medicaid is miniscule. The overwhelming majority (95%) of Medicaid payments are proper. Of the 5% of “improper” payments made, 80% of them were because of administrative issues, not because of fraud or intentional misuse.

- A majority of people who voted for Donald Trump [oppose](#) moves from Congressional Republicans to cut Medicaid funding.
- Two states that have imposed Medicaid work requirements, Arkansas and Georgia, saw tens of thousands of eligible enrollees lose coverage and high administrative costs.
 - Of those disenrolled in Arkansas, **97%** were compliant or had exemptions but still lost coverage. That is, they lost coverage for administrative reasons. [\[source\]](#)
- In many rural and underserved communities, where health care options are limited, Medicaid is the foundation keeping hospital care available and accessible. When hospitals [lose funding](#), they are forced to scale back services, reduce staff or even close entirely.
- Medicaid expansion in particular has generated important [health and economic benefits](#), including reduced mortality and improved financial well-being, for those newly gaining coverage.
- [Studies](#) show Medicaid expansion has significantly increased outpatient and preventive care, reduced emergency department use and medication lapses due to cost, and improved self-reported health.
- Medicaid is playing a key role in addressing the [overdose crisis](#) as it is the single largest payer of MH and SUD care in the country. Although [U.S. overdose deaths](#) decreased in 2023 for the first time since 2018, the U.S. is still losing nearly 300 people a day to drug overdose.
- Close to 30% of [people receiving coverage through the Medicaid expansion](#) have a MH or SUD condition.
- Research shows that Medicaid coverage for children has been found to enhance health not only during childhood, but [also in adulthood](#).
- Medicaid eligibility for children has also been found to improve educational outcomes, which along with better health contributes to higher rates of employment and earnings as adults. This, in turn, generates increased tax revenues and reduced spending on public assistance programs.
- States that [expanded Medicaid](#) eligibility saw improvements in access to medications and services for MH conditions and SUD after expansion.
- Medicaid expansion of eligibility decreased [suicide mortality](#) by increasing access to MH coverage.