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## **CBC Members Express Urgent Need to Pass Extension of Emergency Medicaid Relief**

*Concern Expressed About New Study Suggesting African-American Seniors More Likely to Face Problems Accessing Quality Nursing Home Care as State Budget Crisis, Recession Continue*

**Washington, DC** – With states facing an unprecedented challenge meeting their obligation to adequately support Medicaid-financed care for America’s frail, elderly and disabled – and now compounded by Congress’s failure to pass a critical extension of Medicaid (FMAP) relief to states – a new non-partisan health policy study suggests that deteriorating Medicaid rate levels across the nation disproportionately impact the ability of African-Americans to sustain ongoing access to quality nursing home care.

Commenting on the research, Representative Edolphus “Ed” Towns, (NY-10, D-NY) warned: “Besides stressing why it is essential to pass emergency Medicaid relief, it is important to express the urgent need to head off any systemic trend towards a two-tiered system of nursing facilities -- whereby the lowest performing facilities provide care to the poorest and most vulnerable populations in rural and inner-city America. That would be an intolerable development, and discussion and action are warranted to ensure equal access to care for every American.”

The research findings, outlined at a Capitol Hill briefing, are published in the new edition of *Care Context*, an Alliance for Quality Nursing Home Care policy discussion series created with analytic support from Avalere Health, a non-partisan healthcare advisory firm. The new study, entitled “Medicaid Support for Nursing Facility Care: At a Crossroads,” details the fact forty percent of all minority skilled nursing facility residents live in facilities with large Medicaid populations. Further, the study illustrates geographical strains, and facilities classified as lower-tier, based on resources and Medicaid resident population, are more prevalent in the south and east (See Map): Louisiana, Mississippi and Georgia have the highest percentage of resource-poor facilities (>36.63%). States with the second highest percentage of resource-poor facilities (12.03% -- 23.18%) include Texas, Arkansas, Illinois, Kentucky, Tennessee, North Carolina, South Carolina, West Virginia, Pennsylvania, New Jersey, New York, Massachusetts and New Hampshire.



mandating appropriate levels of Medicaid funding to support the actual cost of providing quality care?

- What initiatives should be undertaken to coordinate payments and care for beneficiaries dually eligible for Medicare and Medicaid? Should policymakers consider the benefits and limitations of a single, Federal funding stream for these beneficiaries?
- Do policymakers envision a continuing role for institutions in serving individuals with long-term care needs? If so, what is the most appropriate role and how can the service setting be adequately funded to ensure the well-being of our country's most vulnerable citizens?

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