



**CONSORTIUM FOR CITIZENS  
WITH DISABILITIES**

July 13, 2020

The Honorable Bob Casey  
393 Russell Senate Office Building  
Washington, DC 20510

Senator Casey:

On behalf of the Consortium for Citizens with Disabilities (CCD) task forces on Health and Long-Term Services and Supports, we write to express our support for the Coronavirus Medicaid Response Act (S. 4108)

CCD is the largest coalition of national organizations working together to advocate for federal public policy that ensures the self-determination, independence, empowerment, integration and inclusion of children and adults with disabilities in all aspects of society.

The Coronavirus Medicaid Response Act would both improve our response to the current pandemic and help our nation prepare for future public health emergencies and economic downturns by building in automatic support to state Medicaid programs. Congress has frequently responded to economic downturns by providing relief to states through increases in the Medicaid Federal Medical Assistance Percentage (FMAP). This bill would improve that process by tying increases in the FMAP to state unemployment levels during economic downturns, creating a rapid and automatic stabilizing mechanism for state budgets and our national economy during difficult times. States would receive immediate assistance and have the assurance that increased federal financial participation would last until conditions improve.

In addition to being the largest payer of long-term services and supports (LTSS) for people with disabilities, Medicaid provides an essential pathway to coverage for millions of people living in the U.S. When our nation experiences an economic downturn or public health crisis, more people turn to Medicaid for coverage at precisely the moment when state revenues decline. Without additional federal support, states may be forced to cut Medicaid exactly when it is needed most. These cuts typically first occur in optional services that people with disabilities most often need: physical, occupational, and speech therapy and home and community-based services.

As we have learned through the COVID-19 pandemic, states cannot wait for Congress to respond to crisis. States have already made Medicaid cuts due to Congress's inaction to further increase the FMAP. In addition, poor state economic conditions are likely to last beyond the officially declared public health emergency period, and Medicaid programs will continue to need enhanced support to meet existing and increased health care and LTSS needs. The Coronavirus Medicaid Response Act would solve both these problems and we applaud the introduction of this

important legislation. For any follow up, please contact Rachel Patterson at the Epilepsy Foundation at [rpatterson@efa.org](mailto:rpatterson@efa.org).

Sincerely,

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