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Survival Coalition Concerned about bills scheduled for Assembly vote that increase bureaucracy and take BadgerCare away from working people with disabilities

(MADISON) – Survival Coalition is comprised of more than 20 statewide disability organizations has concerns about two bills the full Assembly will vote on today that would increase paperwork and penalize people who are already working for not working more by taking away their health care coverage.

Although Wisconsin's BadgerCare program is considered by some policymakers as Medicaid for able-bodied people, it often is the only source of health care for many people with disabilities--including people with mental illness, people with chronic and intermittent conditions, people waiting for a disability determinacy, and people with disabilities who do not meet the nursing home level of care criteria required for Family Care or IRIS.

Many family caregivers of adults with disabilities and older adults and Direct Care Workers that people with disabilities and older adults rely on to keep them in their homes are also in BadgerCare. Many of these caregivers have been forced to leave the paid workforce or reduce employment hours to care for loved ones.

AB-934 would require people in BadgerCare to reapply every six months, doubling the amount of paperwork and time needed to keep their health care coverage. It also requires applicants to start from scratch every time, refilling the same information into blank forms. Any errors could mean no health care for six months.

"Double the deadlines, double the chance of errors, and risk for a gap in services" said Patti Becker, Survival Coalition Co-Chair. "People could lose the BadgerCare health care coverage that supports their daily long-term care needs due to a doubling of demand on an already understaffed Medicaid eligibility system.

"Family caregivers consistently describe navigating Medicaid administrative requirements and paperwork as difficult, mentally and emotionally taxing, and burdensome," said Beth Swedeen, Survival Coalition Co-Chair. "Adding yet another high stakes task to complete on an even more frequent basis makes lives that are already hard, much harder"

"People with mental illness or other disabilities and those living with significant health conditions don't always have families or other people in their lives to help them. This bill requires sick people and those who struggle with cognitive impairments to figure it out on their own or lose the health care," said Kit Kerschensteiner, Survival Coalition Co-Chair. "Many will be unable to do so successfully, with disastrous results."



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AB-936 would punish people with disabilities and others who are already working, for turning down additional hours or pay increases that jeopardize their continued eligibility for BadgerCare," Swedeen said. "Family caregivers are often arranging their lives around another person's care needs and may have to limit their participation in the workforce. They shouldn't be punished for doing the best they can."

"Twenty-eight percent of Wisconsin's Direct Care Workers rely on Medicaid for health care coverage, and most are in BadgerCare," Becker said. "The people taking care of our most vulnerable Medicaid populations qualify for Medicaid themselves. If workers lose access to BadgerCare, they may choose to work somewhere else which will make the current Care crisis worse."

"BadgerCare serves poor people, most of whom are already working. These workers have less than \$2000 in assets and make less than \$13,590 per year. People working full time minimum wage jobs are well under that income limit," Kerschensteiner said. "Taking away BadgerCare from someone who takes a raise that puts them just over the poverty line doesn't mean they can afford health care. It probably means they are forced to go without care."

Survival Coalition is comprised of more than 20 statewide disability organizations, and has members with expertise in disability law, research, policy and best practices, and providing direct services for people with disabilities.