

## RENEWING THE HELP ACT IS A WIN-WIN

*Renewing Montana's Medicaid expansion program will provide access to healthcare for our most vulnerable, save Montana money, and increase economic activity and jobs.*

### BACKGROUND

In 2015, the Montana State Legislature enacted the Health and Economic Livelihood Partnership (HELP) Act. The law provides health care for low-income Montanans through Medicaid and has expanded Medicaid's coverage of services and care.

*The HELP Act will expire on June 30, 2019. The Legislature must vote to renew it!*

### MONTANA SHOULD RENEW THE HELP ACT WITHOUT ADDING COUNTERPRODUCTIVE AND HARMFUL PROPOSALS TO TAKE HEALTH COVERAGE AWAY FROM PEOPLE WHO DO NOT MEET STRICT WORK AND REPORTING REQUIREMENTS.

- **The HELP Act helps low-income Montanans access healthcare:** Nearly 100,000 Montanans access healthcare, mental healthcare, or treatment for substance use disorders through the HELP Act. This includes many people who are on probation or parole and are required to participate in certain programs.
- **The HELP Act creates jobs and improves Montana's economy:** The HELP Act has saved the state \$58 million, generated more than \$47 million in new tax revenue, and each year has created 5,000 new jobs and generated more than \$270 million in new income for Montanans<sup>1</sup>. The HELP Act will continue to save Montana money every year. In 2016 the federal government paid 100 percent of the costs. Starting in 2020, the federal government will continue to pay 90 percent of the costs for this program.
- **The HELP Act makes Montana safer:** Public safety: When Medicaid expands, both violent and property crime rates fall. Researchers have found that this is driven mostly by increasing access to mental health care and substance abuse treatment.<sup>2</sup> For instance, treatment for mental health issues and substance use disorders can reduce criminal activity by up to 80 percent and reduce arrests up to 64 percent.<sup>3</sup> According to the University of Montana Bureau of Business and Economic Research, the HELP Act has reduced crime in Montana.<sup>4</sup> Research from Michigan has shown that recidivism (returning to prison within 3 years of release) rates fall by 46 percent when individuals have healthcare and social services.<sup>5</sup>
- **The HELP Act benefits the Montana Department of Corrections:** The HELP Act substantially reduces the cost to the state Department of Corrections for providing certain types of care for

<sup>1</sup> <https://dphhs.mt.gov/Portals/85/Documents/healthcare/HELP-ActOversightCommitteeReport2018.pdf>

<sup>2</sup> <https://www.brookings.edu/blog/up-front/2018/01/03/new-evidence-that-access-to-health-care-reduces-crime/>

<sup>3</sup> Center for Substance Abuse Treatment. The National Treatment Improvement Evaluation Study (NTIES). Substance Abuse and Mental Health Services Publication No. SMA-97-3156. 1997

<sup>4</sup> The Economic Impact of Medicaid Expansion in Montana. April 2018. [https://mthcf.org/wp-content/uploads/2018/04/BBER-MT-Medicaid-Expansion-Report\\_4.11.18.pdf](https://mthcf.org/wp-content/uploads/2018/04/BBER-MT-Medicaid-Expansion-Report_4.11.18.pdf)

<sup>5</sup> <https://dphhs.mt.gov/Portals/85/Documents/healthcare/MontanaHELP-Program-DOC-Medicaid-Expansion-Benefits.pdf>

incarcerated people and provides necessary treatment for mental health issues and substance use disorders. MDOC has saved over \$8 million because the Medicaid rate is cheaper than private insurance, and some services are paid out of Medicaid funds.<sup>6</sup> The HELP Act has also expanded vital services including mental health and treatment for substance use disorders to Montanans in pre-release centers. Without this access to care, hundreds of people in pre-release centers would depend on the emergency room for all care, which shifts costs to state, county and city agencies and prohibits many people from accessing that care.

- **The HELP Act enjoys bipartisan support:** The bipartisan HELP Oversight Committee recommends that Montana continues this important and cost-saving program.<sup>7</sup>
- **Proposals to take health coverage away from people who do not meet strict work and reporting requirements are harmful and counterproductive.**

*Unnecessary.* These proposals ignore the fact that the vast majority of adults on Medicaid already work. Nearly eight in ten non-disabled, non-elderly adults live in families where at least one family member works.<sup>8</sup> Montana is already successfully helping Medicaid recipients secure decent jobs. The HELP Act created a bipartisan workforce promotion program called HELP-Link that has increased non-disabled adults working by nearly 10 percent.<sup>9</sup>

*Harmful to low-income Montanans.* Many of the people who are not working are caring for children or another dependent, and therefore are unable to work. A work requirement would harm these families. Furthermore, a work requirement would harm all Medicaid recipients by forcing them to jump through bureaucratic hoops to verify they are working. This would result in many eligible individuals losing coverage.

*Costs the state of Montana.* These proposals would come at a high administrative cost for the state and create a whole new level of red tape.

## THE SOLUTION

The Legislature **must renew** Montana's Medicaid program without adding counterproductive and harmful proposals to take health coverage away from people who do not meet strict work and reporting requirements. These proposals would harm low-income Montanans and cost the state additional administrative expenses.

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<sup>6</sup> Ibid.

<sup>7</sup> <https://dphhs.mt.gov/Portals/85/Documents/healthcare/HELP-ActOversightCommitteeReport2018.pdf>

<sup>8</sup> <https://www.kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work/>

<sup>9</sup> <https://dphhs.mt.gov/Portals/85/Documents/healthcare/HELP-ActOversightCommitteeReport2018.pdf>