

Protect the Affordable Care Act



Protect the Affordable Care Act (ACA). Congress should not repeal the ACA without a replacement plan that will continue to cover more than 21 million people who have been able to get health insurance since its enactment. Access to health care is a vital tool to prevent child abuse and foster care placements. *The CWLA National Blueprint for Excellence in Child Welfare states that Children, youth, and Families should have access to health care in their communities, and their health care needs should be met.* Access to health care is a significant factor in whether families come in contact with the child welfare system. Children in foster care are at higher risk for physical and mental health issues, stemming from the maltreatment that led to their placement or from preexisting health conditions and unmet long-term health care needs.

The Congressional Budget Office recently reported that the American Health Care Act will result in 24 million people losing health care coverage. Many of the people losing coverage will be children. Enacting legislation that causes such harm is abhorrent and cruel. It runs directly counter to all we have learned about the critical role that proper health care plays in supporting child well-being.

As President Trump has indicated, health care is a complex issue and the same is true of child welfare. The child welfare system must support child safety, permanence, and well-being. This requires a focus on the mental and physical health of children and their families and communities. Strong, healthy families and communities are essential to reducing the need for children to enter the child welfare system.

In 2016, the Department of Health and Human Services released their most recent child welfare data. In their release, officials at the Administration on Children, Youth and Families (ACYF) interviewed child welfare directors in states experiencing the highest increase in foster care numbers, and state officials informed ACYF on what the data suggest: A rise in parental substance use is likely a major factor driving up the number of children in foster homes. Citing opioid and methamphetamine use as the most debilitating and prevalent substances used, some state officials expressed concern that the problem of substance use is straining their child welfare agencies.

Last year's foster care numbers released by HHS highlighted the fact that in 2015, 427,910 children were in foster care, which represented an eight-percent increase since 2012. New data suggests that drug abuse by the parent as the primary reason for the child's removal in 32 percent of cases, and a parent's inability to cope a factor in a child's removal in 14 percent of cases. The reduction or elimination of this expanded behavioral health coverage would no doubt increase these numbers.

Through the Affordable Care Act, more than \$5.5 billion in substance use and mental health services has been made available, according to research by Dr. Richard Frank and Dr. Sherry

Glied of Harvard Medical School and the Wagner School of Public Service at NYU. By comparison the 2016 Cures Act (PL 114-255) provided \$500 million this year and \$500 million in 2018.

According to Dr. Frank and Dr. Glied, a full repeal of the ACA would result in a loss of coverage for 2.8 million people with a substance use disorder, including 220,000 people who have an opioid addiction. Additionally, it would eliminate mental health coverage to 1.2 million people with a serious mental health disorder. According to the National Center on Behavioral Health, Medicaid pays for 49.5 percent of medication-assisted treatment in Ohio, 44.7 percent in West Virginia, and 44 percent in Kentucky. Imagine the impact on foster care caseloads, child maltreatment, and other areas of child welfare if the expanded behavioral health and substance use treatment is either repealed or cut back as this legislation proposes.

To eliminate or reduce this historic expansion of behavioral health services at the very time that many states are facing a new and expanding addiction through opioids would be tragic, and would likely increase foster care placements even more than the recent impact of opioids in several states.

A recent interview in *USA Today* highlighted mental health programs developed by the Montefiore Health System in the Bronx. They quoted psychiatrist Henry Chung, chief medical officer of Montefiore's care management organization, as saying the success of these programs are contingent upon patients getting early treatment in primary care. He went on to say the new mental health provisions in the recently enacted 21st Century Cures Act that improve access to treatment need "to be combined with strong, affordable insurance. You can't have one without the other or some of that progress will be taken away."

CWLA is concerned about proposals that would replace the ACA with alternatives that do not work. One example are high risk pools. High Risk pools are likely to be a part of an ACA repeal as a way to guarantee coverage for people who are refused insurance by companies. But high risk pools have not worked as the [Commonwealth Fund has outlined](#) based on experience of several states. High risk pools can require premiums sometimes 250 percent higher than the individual insurance market and still require annual deductibles of \$25,000 per year. A Ryan plan may provide between \$25 billion to \$100 billion over ten years as the solution. A [recent report by National Public Radio](#) cites the Commonwealth Fund estimates that to be effective these pools would cost \$178 billion *a year*.

We need to advance a child welfare continuum of care based on prevention, intervention, placement, and permanency: prevention of child abuse before it happens; intervention to keep families together when it is best for the child; placement in foster care that must be short and must be quality care; and permanency for families that reunify, adopt, or are kinship families, securing a future for youth who exit to adulthood. Access to health care coverage that includes basic health care, as well as coverage of substance use treatment and mental health services, are critical to this entire continuum.