

PROTECT ACCESS TO AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY SERVICES COVERED BY MEDICAID



ACTION REQUESTED

Urge Congress to protect access to audiology and speech-language pathology services by opposing additional Medicaid funding cuts and program restrictions.



SOLUTION:

Tell Congress to Preserve Access to Care for Medicaid Beneficiaries

Congress should reject additional Medicaid funding cuts and/or eligibility restrictions, especially considered through budget reconciliation, which would further erode access to medically necessary care. Instead, Congress should provide resources that enhance states' existing capacity to address FWA rather than create new and burdensome administrative processes.



ISSUE:

States Are Struggling to Meet the Health Care Needs of Their Most Vulnerable Residents After Medicaid Funding Cuts and Program Changes

Medicaid is an essential safety net program that 88 million Americans rely on for their health care, including 54 million seniors, children, and people with disabilities. There are already significant hurdles to meeting the health care needs of this population, such as low reimbursement rates, restrictive prior authorization policies, and delayed response times from Medicaid managed care plans.

The One Big Beautiful Bill Act (OBBBA) signed into law last year created new roadblocks for patient access to care by reducing federal Medicaid funding, imposing bureaucratic work requirements, and instituting changes that make it more difficult for beneficiaries to enroll and maintain eligibility in the program. The law's impact is already forcing states to make difficult decisions as they contend with less federal funding and burdensome mandates while being required to balance their budgets.

For example:

- Colorado has announced almost 10% in Medicaid provider payment reductions, including rollback of a needed 1.6% rate increase from 2024.
 - North Carolina implemented a 3% cut to Medicaid payments for all providers, citing projected funding shortfalls caused by OBBBA.
 - Idaho reduced Medicaid reimbursement rates by 3% across multiple provider types shortly after the passage of OBBBA, reflecting anticipated reductions in federal funding.
 - Vermont has cut certain Early Intervention payment rates by 50%.
 - Georgia Medicaid managed care organizations have cut rates by 20%.
- Congress is considering additional funding cuts and program changes to address perceived fraud, waste, and abuse (FWA). However, high administrative costs and chronic understaffing make such state-led FWA investigations challenging. The Centers for Medicare & Medicaid Services has reported that 77% of improper Medicaid payments were the result of insufficient documentation, which is "generally not indicative of fraud or abuse." States need additional support to properly investigate all reports of fraud through existing, proven mechanisms. Cutting additional federal funding and/or mandating new requirements without sufficient resources will simply force states to further cut program costs at the expense of their residents, limiting access to care and raising taxpayer costs.

