

Updated July 2017 | Fact Sheet

Medicaid's Role in Colorado

Medicaid in Colorado

- Nearly **1.4 million** people in Colorado **are covered by Medicaid** (19% of the population). While eight in ten (80%) enrollees are children and adults, more than half (59%) of the state's Medicaid spending is for the elderly and people with disabilities.
- **77,500** (12%) of Colorado **Medicare enrollees** are also **covered by Medicaid**, which accounts for over a third (34%) of Medicaid spending.
- **40% of all children** in Colorado are **covered by Medicaid**, including **29% of children with special health care needs**.
- **61% of nursing home residents** in Colorado **are covered by Medicaid** and **33% of Medicaid long-term care spending** is for nursing home care. Medicare beneficiaries rely on Medicaid for assistance with services not covered by Medicare, particularly long-term care.
- Colorado **has a federal Medicaid matching assistance percentage (FMAP) of 50%**. For every \$1 spent by the state, the Federal government matches \$1. **Over half (52%) of all federal funds Colorado receives are for Medicaid**. In Calendar Year 2017, the federal match rate for the Medicaid expansion population is 95%.

What is at Risk under a Per Capita Cap?

- **Capping Medicaid funding would reduce the federal assistance for Colorado to maintain its current Medicaid program.**
 - Under the Better Care Reconciliation Act of 2017 (BCRA), to maintain its current Medicaid program, **Colorado would have to make up \$9.2 billion in loss of federal funds** between 2020-2029, including \$6.4 billion for the phase-out of the enhanced match for the ACA expansion and \$2.8 billion for the per enrollee cap on all groups.
 - If Colorado dropped the Medicaid expansion in response to the loss of enhanced federal financing, **the state would forgo an additional \$12 billion** over the 2020-2029 period, and by 2029, **534,000 Coloradans** estimated to be covered in the expansion group would **lose Medicaid coverage**.
- **Capping Medicaid could lock in historical state differences in state spending, disproportionately affecting states with low Medicaid spending per enrollee.** Colorado has lower than national average Medicaid spending per enrollee (\$4,898).
- **Capping federal Medicaid funding could jeopardize Medicaid programs designed to improve quality of life and access to long-term care for people with disabilities.** 10% of Colorado's non-institutionalized population reported a disability.

- **Reducing federal funds through a per capita cap or block grant would limit Colorado’s ability to respond to public health crises such as the opioid epidemic, HIV, or Zika.**
 - Colorado’s opioid death rate is 8.7 deaths per 100,000 population in 2015. From 2013 to 2015, Colorado’s opioid death rate has grown by 9%.
 - There are more than 11,000 people living with HIV in Colorado and Medicaid is the single largest source of coverage for people with HIV in the U.S.
 - Colorado has one of the highest share of reported poor mental health status (37%) in the country and more than half (57%) of people are overweight or obese.
- **Capping Medicaid can limit states’ ability to respond to demographic changes in their state that affect demand for Medicaid and other public health services.** The projected growth rate of the 85+ population in Colorado is 54% between 2015 and 2030, a population more likely to require nursing home care. Medicaid is the primary payer for nursing home care.