

Mainstream Living Member Wish List

Celebrate the season of giving by supporting people with disabilities. Please deliver new, unwrapped gifts to Ames or Des Moines office by December 15. If you would like to schedule a pick-up or have questions, please contact Amber Corrieri at acorrieri@mainstreamliving.org. Please call ahead if you are donating used items.

Household Items

- Pillows and cases
- Sheets (twin and queen - LOTS)
- Bath towels (LOTS)
- Pots and pans (all sizes - LOTS)
- Dish sets (LOTS)
- Plastic cups and plates
- Silverware sets
- Cooking utensils (spoons, spatulas, etc - LOTS)
- Crockpots (4)
- Dirt Devil Bagless vacuum (2)
- Full-size comforters (5)
- Twin-size comforters (3)
- Knife set
- Kitchen towels

Personal Items

- Men's socks (black or white)
- Ladies socks
- Large sweat pants
- XL t-shirts
- Men's underwear (large and XL)
- Women's underwear (all sizes)
- Winter gloves and hats

Other Items

- Art supplies
- Coloring Books
- Picture frames
- Home décor (throw pillows, modern art)

Wanted:
compassionate,
dedicated people
looking to make a
difference in the
lives of others.



Apply now at

www.mainstreamliving.org/employment

Holiday Wish List

Make the holiday season a little brighter by fulfilling some of our members' wishes.

Shopping made easy by Amazon
CLICK. BUY. SHIP.

To View Wish List: visit <http://a.co/elGhp3Q>

- Hundreds of items are listed (most needs, some special wishes)
- Many items priced under \$20.00
- Scroll to bottom of list to view additional pages
- Items will be shipped directly to Mainstream Living office
- For added support, shop with Amazon Smile and select Mainstream Living
- Questions: Contact Amber Corrieri - acorrieri@mainstreamliving.org

amazon smile

Medicaid Changes Impact Everyone!



Medicaid is the safety net for poor, elderly or disabled Americans. Medicaid is the main publicly financed health coverage program for low-income and disabled Americans, most of whom lack access to the private health insurance system. Medicaid covers more than 62 million people, about 1 in 5 Americans. It covers roughly 1 in 3 children and 40% of all births in our country. It covers millions of people with severe disabilities, and provides extra assistance to poor, Medicare beneficiaries. Medicaid

is also the dominant source of coverage for nursing home and community-based long-term services and supports (like those Mainstream Living provides). Additionally, Medicaid provides core support for the health centers and safety-net hospitals that serve low-income and uninsured people and provide essential community services like trauma care and neonatal intensive care.

Proposing Changes.

The House of Representatives proposed serious changes to Medicaid funding as a part of their American Health Care Act (ACHA). The Senate has also proposed CUTS to Medicaid funding in their own bill, called the Better Care Reconciliation Act of 2017. The Senate version is, in some respects, more moderate than the House bill, offering more financial assistance to some lower-income people to help them defray the rapidly rising cost of private health insurance. But the Senate bill would make subsidies less generous than under current law. It would also lower the annual income limit for receiving subsidies to cover insurance premiums.

Medicaid and Community Services — A Member's Perspective

By Mariah

Medicaid is important to my health and well-being because I receive my all my health care through this. I am only able to work a few hours a week and this is the only way my needs can be met. Medicaid pays for my health care and the community support services that I receive through Mainstream Living. These services have been a great benefit to my life and help me in many ways, especially as I manage my mental health needs. I rely fully on Medicaid and the services they provide and don't know what would happen if my services were reduced or cut.

Mariah's parents note that it is a great relief to know that Mariah's financial needs regarding her health are being met. Mariah would be unable to finance her physical health and mental health needs without Medicaid. They are comforted knowing that her needs are addressed, which contributes to their well-being as well.

Older people could be disproportionately hurt because they pay more for insurance in general. Both chambers' bills would allow insurers to charge older people five times as much as younger ones; the limit now is three times. The Senate measure, like the House bill, would phase out the extra money that the federal government has provided to states as an incentive to expand eligibility for Medicaid. And like the House bill, it would put the entire Medicaid program on a budget, ending the open-ended entitlement that now exists.

Although these bills have failed to gain enough votes to pass, the threat remains as insurance premiums continue to rise and more insurers leave the market. From Mainstream Living's perspective, both bills would negatively impact the people that we serve and other people with disabilities served by every other health and human service provider in our country. We could see dramatic cuts to funding for the Medicaid program, and cuts to the services that we are able to provide.

At Mainstream Living - Medicaid is the primary funder for all the services that we provide. Any change to Medicaid funding is very serious and needs to be done with great care! Unfortunately, to this point, the focus has been on savings and tax cuts, and not the people served. The math is simple; a serious cut to Medicaid funding can have a very serious impact on the lives of the people we serve. Now is the time for us all to educate ourselves and speak up. We must all work together to Save Our Services (SOS). I believe we need to fix the existing Affordable Care Act (ACA) with both Republicans and Democrats working together for the benefit of all Americans. A one-sided solution cannot be the answer. I encourage each of you to contact your Senators and share your voice.

This is by far the biggest threat to Medicaid that our members have ever faced. I URGE you to contact Senator Ernst and Senator Grassley by phone and email. They MUST continue to hear from Iowans who may be impacted by changes to Medicaid.

Contact Information:

Senator Grassley

www.grassley.senate.gov/constituents/questions-and-comments
phone: 202-224-3744

Senator Ernst

www.ernst.senate.gov/public/index.cfm/email-joni
phone: 202-224-3254

Thank you.
-Bill Vaughn.



Medicaid and Community Based Services

— A Parent's Perspective

By Shelley Ackermann



"Two Homes for Andy" was the title of a Des Moines Register column written about Andy several years ago. It was written after I challenged the columnist on an article she wrote about institutionalizing children with disabilities. At that time, the only place for someone under 21 with intense medical needs was a 31 bed skilled nursing unit in what is now ChildServe. Andy's care was fantastic and delivered the only place in Iowa that could provide such services.

After Andy aged out of children's services, he only had two real options: a nursing home or adult skilled nursing which was located 2 ½ hours from our home in central Iowa. There weren't community-based services for his level of need anywhere close to us. After several months, he was able to move closer. That group home was only 1 ½ hours from us. After 3 ½ years of traveling every weekend and times when Andy was sick, he had the opportunity to move to Ames. Mainstream Living had opened its first HCBS waiver home able to care for young adults with intense medical needs. Andy was finally "home".

Aspen House is only a 10 minute drive from our house. We get to enjoy visits and do outings several times a week rather than just weekly or every couple of weeks. Time we had spent traveling to see him could be spent WITH him. Andy is part of the Ames community and Somerset neighborhood. He loves going to movies at Cinemark, seeing the fireworks and 4th of July parade, shopping at the mall, going to ISU sports, and attending events at CY Stephens. These are the things others can do and

often take for granted. At times, Andy's social calendar is busier than ours. None of this would be possible without Medicaid support. Our health insurance covers the cost of most of Andy's acute health needs; however, it doesn't pay a penny toward his daily care needs. Because of the quality of his care (both physical and emotional), I believe Andy has lived longer. When he lived so far away, he got depressed. We did, too. He is an important part of our family and the community. He teaches others. He has exceeded expectations for projected abilities.

We are not poor, but we could never afford the care Andy requires and receives in the community setting. And it's not just Andy. He has four housemates in Aspen House. Mainstream also operates two other houses for young adults who are medically fragile. Then there are the other homes as well as supported community living and other services. And it goes way beyond Mainstream. Medicaid services and funding impacts them all. Please don't tell me Andy doesn't deserve good quality care in his community. That may not be the overt message in Medicaid cuts, but it is the underlying message. He and people like him are not important or don't matter. Unless or until someone has family member with these unique needs, they may not understand the whole picture. Those who don't have that experience are typically the folks who want to cut Medicaid funding and services. They don't understand that our loved ones need and deserve to be treated with the same dignity, respect, and opportunities as the average or "normal" person. It's because they have never had that loss. I don't wish it upon anyone. We are constantly advocating for our families. When it comes to budgets, Medicaid is the target because of the cost. Caring for those in need (financial, medical, mental health, etc.) is not cheap. But we know what happens to almost all cheap things—they break. And why be cheap for this group of people? Do they not deserve the care they need? Are they not important? It will cost more in the long haul to do things on the cheap, just trying to get by applying quick fixes and patches. Or just let it fail and let our kids be marginalized, be unimportant, be hurt.

—Shelley Ackerman is the mother of Andy, a member served by Mainstream until just this past month when his family moved out of state due. Mainstream Living will miss Andy's smile and the way the Ackermann's advocated for all people with disabilities.

Medicaid in Iowa

What is Medicaid?

Medical Assistance (Medicaid—Title XIX) provides medically necessary healthcare coverage for financially needy children, parents with children, people with disabilities, elderly people, and pregnant women. According to the Department of Human Services, the goal is for members to live healthy, stable, and self-sufficient lives.

What does it cover?

- Healthcare Services - physician care, hospital services, labs, prescription drugs, home health care, chiropractic care, physical therapy, and dental care.
- Behavioral Care Services - community mental health services, hospital services, physician care, psychiatric care, outpatient treatment and therapy, rehabilitative mental health services, and substance abuse treatment.
- Long-Term Care Services - nursing home care, Intermediate Care Facilities for the Mentally Retarded (ICF/MR), and home and community based support that allows individuals to remain in their homes.
- Home and Community Based Supports (HCBS) allow members to remain in their homes at a lower cost than being served in a facility.

The Numbers

- The average cost of a member in a nursing facility is \$47,034 per year, versus \$10,389 for a person served through an HCBS waiver.
- The average annual cost of a member in an Intermediate Care Facility for the Intellectually Disabled is \$150,444, versus an average cost of \$36,181 for a person served through the HCBS waiver.
- 58% of Medicaid members are children, but they account for only 19% of costs.
- 19% of members are people with disabilities, but they account for over half of Medicaid expenses.
- The top 5% high cost/high risk Medicaid members have an average of 4.2 chronic conditions, receive care from five different physicians, and receive prescriptions from 5.6 prescribers. They account for 90 percent of all hospital readmissions within 30 days, 75% of total inpatient hospital costs, and 50% of prescription drug costs.
- Medicaid payments to hospitals total over \$700 million per year

Source: Iowa Department of Human Services; http://dhs.iowa.gov/sites/default/files/15-6_Improve_Health_Status.pdf