GREENVILLE — The General Assembly has gone home for the year, but the fight over Medicaid expansion — a major building block of the federal Affordable Care Act and one of the most contested issues of the legislative session — is far from finished.

The fight almost certainly will be resurrected when lawmakers return to Columbia, but there’s no guarantee anything will change in 2014.

Mark Tompkins, a political scientist at the University of South Carolina, said Republicans in the state House of Representatives who oppose Medicaid expansion are not likely to accept the federal money to help pay for it until after the November 2014 elections.

“Most Republicans can’t afford to endorse something like this,” Tompkins said. “It’s hard for anyone to move off the current position now.”

On Wednesday, Thorton Kirby, president of the South Carolina Hospital Association, and Tony Keck, director of the state’s Medicaid agency, debated the topic at Furman University, which is hosting a four-part health care lecture series this summer. Keck estimated...
Medicaid expansion debate rages on in Upstate during Furman University health care series — The Post and Courier

they had discussed the topic together in front of different groups at least 20 times in the past year.

“We’re arguing over who is going to pay for health care,” Kirby said. “That is a very challenging debate that’s going to go on a long time.”

Kirby, the hospitals he represents and most Democratic lawmakers favor Medicaid expansion because hospitals are required by law to treat the sick whether they have health insurance or not. Under the Affordable Care Act, the federal government will decrease the amount of money it has historically paid hospitals to treat the uninsured. Expanding Medicaid to include more residents would mean fewer charity care cases, which would help preserve hospital profit margins.

“The other 49 states are offering to cover the cost of treating the uninsured in this state,” Kirby said. “Why wouldn’t we take that offer when we’re going to treat these patients anyway?”

On the opposite side of the issue, Keck, Gov. Nikki Haley and other conservatives oppose expanding Medicaid enrollment because they argue there are less expensive ways to make South Carolinians healthier and the Medicaid program is already too costly.

“We’re now spending much more on health care than we are on K–12 education and higher education,” Keck said. “We can’t make investments in these other areas if Medicaid is taking up all the extra dollars in this state.”

The Affordable Care Act, passed by Congress in 2010, was written to enroll virtually all Americans in health insurance. It includes an optional financing mechanism for states to expand Medicaid eligibility to anyone making up to 138 percent of the poverty level, which is less than $16,000 a year for a single adult.

But South Carolina legislators have chosen to decline that money from the federal government, an estimated $4.1 billion through 2017. It would have paid for more than 340,000 low-income residents to enroll in health insurance for free on Jan. 1.

About 1.1 million South Carolinians are already enrolled in Medicaid; more than half are children.

The Affordable Care Act requires that states that choose to expand Medicaid chip in a small percentage of the cost after 2017, but never more than 10 percent of the bill.

But the decision to turn down the money doesn’t prohibit the South Carolina Legislature from accepting the deal next year, or the year after that, Tompkins, the political scientist, said.

“We’ll find a way — I hope we’ll find a way,” he said. “This is a big deal. It’s important to recognize how important health care is for the working poor in South Carolina.”

Jill Fuson, manager of policy events and conferences at the Riley Institute at Furman University, said the institute chose to host a session on Medicaid expansion because, “This is certainly not a dead issue.”

The panel discussion also included Stuart Hamilton, president of the Eau Claire Cooperative Health Centers.

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