California uses the provider assessment program to stabilize Medicaid rates to nursing centers and more adequately fund quality, long term care services for seniors and individuals with disabilities. A budget proposal from Congress to reduce the effective cap on provider assessments to 5.5% would limit California’s ability to finance an already underfunded Medicaid program.

ASK CONGRESS...
To oppose any legislative proposal that would reduce the Medicaid provider assessment rate or quality assessment fee.

Provider Assessments

Current Rate: 6.00%

Impact of Reduction to 5.5%: $930 million over 10 Years

Medicaid in California

Underfunding in Nursing Center Care in 2013:
$486 million
$19.54 per Medicaid patient, per day

66.8% of residents rely on Medicaid for daily nursing center care.