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***Graham-Cassidy proposal would devastate Medi-Cal and cripple
California's public health care systems***

OAKLAND, CA, September 26, 2017 – The California Association of Public Hospitals and Health Systems (CAPH) is urging all California lawmakers to join in opposition to the Graham-Cassidy proposal, which would dismantle the Medicaid expansion and state exchanges, and slash the Medicaid program in California (Medi-Cal) and across the nation.

“The statement by the CBO that Graham-Cassidy would reduce the number of people with comprehensive health insurance by millions - and that it would take weeks for a full analysis - reveals both how dangerous this proposal would be to our most vulnerable patients, and how reckless it would be for any of California’s elected officials to support it,” said CAPH President and CEO Erica Murray. “This bill could do twice as much damage to California as either of the previous proposals, and could cause irreparable harm to the state’s health care safety net and the communities that it serves.”

“Although some key Senators have spoken out against this proposal, if this battle has taught us anything, it’s that we cannot take our guard down,” said Murray. “We must keep standing up for the millions of Californians whose health would be at risk.”

CAPH represents California’s 21 public health care systems, which make up the heart of the state’s health care safety net, operating in 15 counties where 80% of the state’s population lives. These county-owned and operated facilities and University of California medical centers together account for just 6% of the state’s hospitals but provide care to 35% of Medi-Cal beneficiaries in the communities they serve. Public health care systems and their patients would be disproportionately affected by the sweeping cuts proposed in the Graham-Cassidy bill.

Public health care systems operate half of California’s top level trauma and burn centers, train more than half of all new doctors in the state, and provide more than 75,000 jobs. These health care systems are an integral part of their communities, and rely on a strong and stable Medi-Cal program to provide high-quality care to patients, particularly low-income individuals and families. Eliminating funding for the expansion and exchanges and instituting a per-person cap on spending would cost the state an estimated \$53 billion per year.

“Claims that this proposal would create more state flexibility are blatantly false. Such so-called flexibility would in fact leave California with an unfillable budget hole,” said Murray. “The proposed cuts would likely result in millions having coverage taken away and massive costs being passed on to local communities. Nearly all Californians would suffer in some way, with those who can afford it the least standing to lose the most.”