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REPEAT

THE NEWSLETTER OF THE VIRGINIA INTERFAITH CENTER FOR PUBLIC POLICY

Earthbound: 1716 East Franklin Street, Richmond, VA 23223

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Contents

- Never too late to sign on to religious leader appeal letter..... 2
- Newport News comes through with resolution 2
- Photos from the 'Moral Revival' event here 3
- VICPP Board hold its September meeting 4
- State official pleads for Medicaid expansion 6
- Volunteer sign-up sheet..... 7
- 10 ways healthcare expansion could boost the state budget..... 8
- News and notes..... 11
- What is wage theft? 12

QUOTES

“We as leaders of faith and moral courage must go to the public square and provide a strong moral voice — advocating for the good of the whole, not for the destructive few — and witness against the extremists’ rhetoric and policies. We must challenge unjust systems, but we must be equally if not more fervently focused on challenging and confronting our most closely held beliefs about human value and the dignity of all people.”

—Dr. James Forbes Jr.

“There’s a book. It’s got a new part and an old part. They put it together. It’s a remarkable book. If you don’t have one, I’ll buy you one. And it talks about how we treat the poor.”

—Gov. John Kasich of Ohio

Karen Cameron (right) and Cassandra Shaw (below) speak to participants in the clergy training that was part of the Moral Revival.



‘Moral Revival’ tour comes to Richmond

VICPP staff participates in clergy ‘teach-in’ day

On Oct. 26 a large crowd gathered to hear Dr. William Barber II and other speakers as the “Time for a Moral Revolution of Values” tour stopped in Richmond. During the day about 75 pastors and other faith leaders gathered for the “Moral Political Organizing Leadership Institute and Summit,” offered by the group Repairers of the Breach.

The two-part event was co-sponsored by the Virginia Interfaith Center for Public Policy (VICPP) and the Virginia Council of Churches.

Barber spoke during the morning session of the clergy training portion of the event, and then got back in a van to return to Charlotte, N.C., where he has been present during the protests there



over the past week in the wake of the police shooting of Keith Scott, an African-American man.

Two VICPP staff members for participated in the sharing time about some key issues following lunch. The Rev. Cassandra Shaw spoke to the group on wage theft, a problem that most affects those who work in fast food, lawn crew

REVIVAL is continued on page 3

Newport News passes resolution

In its regular session Sept. 13, the City Council of the City of Newport News approved a resolution calling on the Commonwealth's General Assembly and Governor to fully accept federal Medicaid funding to provide healthcare coverage for an estimated 7,000 low-income city residents.

The resolution was offered by City Manager James Bourey.

Medicaid is the federal/state program that offers healthcare coverage for the poor and disabled. Low income persons cannot afford to purchase through the Affordable Care Act's Exchange Marketplace but don't qualify for Virginia's current Medicaid program because of its restrictive eligibility limits.

As of July, the City of Newport News Department of Human Services reported that it manages Medicaid enrollment for 37,911 eligible individuals. Using the available data, expanding health coverage by drawing

down the federal Medicaid dollars could potentially aid an additional 7,100 residents to gain coverage.

The resolution also touted the economic benefit of expanding health coverage, including bringing \$6.2 million a day from the federal government into Virginia, bolstering the state's hospital and healthcare industry and the general economy as well. The Department of Medical Assistance Services estimates that Virginia would see a net savings of \$265 million through fiscal years 2022, with the state's small match being more than offset by savings in healthcare for inmates, mental health, indigent care and other state-funded health services.

Health insurance statistics released this week by the U.S. Census Bureau indicate that the rate of uninsured fell last year in 47 states and the District of Columbia, including Virginia. Nationwide, the rate of uninsured dropped 1.3 percentage points in

2015, from 10.4 percent in 2014 to 9.1 percent. Virginia's uninsured rate in 2015 matched the national average at 9.1 percent, but decreased at a lower rate than nationally.

In Virginia many city, town and county officials know that they have a healthcare crisis. Local hospitals and healthcare facilities are struggling to provide adequate charity care. The decision on drawing down federal Medicaid dollars for a Virginia plan to close the coverage gap is a decision that must be made by the General Assembly.

According to Executive Director Kim Bobo, the Virginia Interfaith Center for Public Policy hopes these resolutions being adopted by community officials can help members of the General Assembly realize the local constituent support that exists to close Virginia's healthcare coverage gap.

For more information, visit www.virginiainterfaithcenter.org.

Text of the resolution passed by Newport News

RESOLUTION NO. 12958-16

WHEREAS, the City Council of Newport News, Virginia, represents all of the citizens of Newport News, Virginia; and

WHEREAS, it is estimated that 7,100 people in our City who do not have health insurance coverage would be eligible if Virginia accepted federal Medicaid funding to expand coverage; and

WHEREAS, Virginia's Medicaid program's current eligibility criteria excludes approximately 400,000 low income Virginians from receiving affordable health insurance coverage to provide personal health empowerment and financial stability; and

WHEREAS, expanding Medicaid or creating a state solution to use federal Medicaid funding would be good for Virginia's economy, bringing an estimated \$6.2 million per day to the Commonwealth, resulting in billions of dollars to support the healthcare industry, jobs, and Virginia's overall economy, and dwarfing future projected costs to Virginia. The Department of Medical Assistance Services estimates that Virginia would see a net savings of \$265 million through state fiscal year 2022, with the state match being more than offset by savings in healthcare for prisoners, community mental health, indigent care, and other state funded health care services; and

NOW THEREFORE BE IT RESOLVED, by the Council for the City of Newport News, Virginia, that it calls upon the General Assembly and the Governor of the Commonwealth of Virginia to fully accept Federal Medicaid funds and implement expansion of the Affordable Care Act during the next regular session of the General Assembly.

PASSED BY THE COUNCIL OF THE CITY OF NEWPORT NEWS ON SEPT. 13, 2016

It's not too late for clergy to sign on to healthcare letter

The Religious Leaders Sign-On Statement Supporting Closing Virginia's Healthcare Coverage Gap is posted prominently on VICPP's website and still available for signatures.

The Center hopes to grow the list of signees to at least 1,000 names by the time the General Assembly convenes in January.

Signatures must be submitted by Jan. 13, 2017. An electronic version of this sign-on statement is available for distribution to your colleagues; visit <http://goo.gl/forms/SfyAl7Sj5o> to add your name.

To see the list of the hundreds of faith leaders who have already signed the letter, go to: http://www.virginiainterfaithcenter.org/wp-content/uploads/2016/09/appeal_letter_updated_9-28-16.pdf.

REVIVAL, continued from page 1

members, carpenters and other common jobs. Wage theft can result from not getting paid the minimum wage to requiring work “off the clock” to not be provided with the work breaks that are required. Virginia has been ranked near the bottom among the 50 states on protections provided against wage theft, and its current law is overtly racist in its antiquated language.

VICPP Healthcare Director Karen Cameron then talked about Virginia General Assembly failing to accept the federal funding that would expand healthcare coverage in the Commonwealth, meaning about 400,000 residents who are the “working poor” and cannot qualify for Medicaid or afford to purchase health insurance coverage. “Virginia’s Medicaid system is among the most restrictive in the country” in terms of its qualifying requirements, Cameron said. “People without health insurance go to the E.R., and that costs us all in terms of higher medical charges.”

Looking at a map of the 19 states that have not expanded Medicaid is “like looking at a map of the Confederacy,” Cameron said. “Thank goodness for Louisiana, where the budget deficit got so bad the legislature there had to go along with expansion.”

Accepting the millions of federal dollars that could be rolling into Virginia every day, Cameron said, would also mean the creation of 16,000 new jobs, a savings of \$68 million in tax revenues, plus a savings of more than \$1 billion on special programs that are currently funded with state dollars.

Monday evening was the main event for the Moral Revival tour, which has had similar events in 10 cities around the nation so far. As part of the service, several people directly affected by issues such as wage theft, the failure of the state to accept Medicaid expansion, and the state’s incarceration policies spoke from their hearts about their experiences.

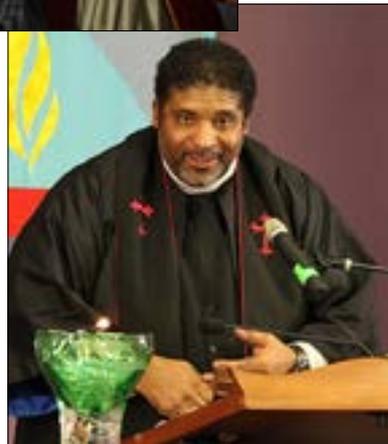
VICPP Board member Rev. Jeneé Gilchrest was among the speakers.

The featured preacher was Dr. James Forbes Jr., who noted at several points that he wanted to be finished in time for people to see the first presidential debate on TV because of the importance of this year’s election.

“What would it mean to live in an America where God’s will was taken seriously,” Dr. Forbes asked the full-house crowd at the Virginia Union University Chapel. “I think I hear God’s voice, and he’s saying “I ain’t playing around no more, y’all.”

Forbes also talked about a Sept. 21 article in *The New York Times* (“A Single Migration from Africa Populated the World, Studies Find”) that said three independent DNA studies showed that all human beings today can trace their ancestry back to a single population emerging from Africa between 50,000 and 80,000 years ago. “That means we’re all Africans!” Forbes said. “And if you’re from America, you’re African-American!”

The full video from the Oct. 26 evening service in Richmond is posted on the www.moralrevival.org website.



Scenes from the Moral Revival event held Sept. 26: Above, attendees including VICPP Board member the Rev. Jeneé Gilchrest (top) enjoy the music. The Rev. Dr. James Forbes Jr. was the preacher at the evening worship service at the Virginia Union University Chapel. At right, Dr. William Barber II was present briefly during the morning training session, but immediately left for Charlotte, N.C., to help mediate the protests there.

Center moving forward with programs

The Virginia Interfaith Center's Board of Directors met in September at the Virginia Holocaust Museum, which will also be the site of the Dec. 15 Annual Meeting.

In her Director's report, Kim Bobo reported progress in major organizational challenges, and said the Center is moving forward with programming and fundraising plans.

Expanding healthcare remains VICPP's top priority issue. "The entire staff and almost every board member has been engaged in setting up meetings with legislators or getting cities, towns and counties to pass resolutions calling on the GA to expand healthcare. We believe that the current budget crisis is another opportunity to push expanding healthcare," Bobo said.

The Center has been supporting the proposed regulations from the Consumer Financial Protection Board on predatory lending. The deadline for comments is Friday, Oct. 7.

Also, Bobo said she recently signed on to a letter pushing the governor to reduce solitary confinement for young people in jail.

The Center continues to work hard on fund-raising and securing grants. A direct mail piece went out recently to past donors in the database with a mailing address. There will also be an appeal at the end of the calendar year. Board members Debbie Linick and John Copenhaver have hosted house parties; Julie Swanson has one scheduled for Oct. 28.

VICPP will support two existing worker centers and will try to encourage new ones in the state.

Bobo also reported great response from outreach to Virginia labor groups and the United Methodist Women.

The Board applauded the on-going work of the Lutheran Church to reduce hunger among the state's children. That effort helped get legislation approved during the last General Assembly Session, but more work is ahead. Julie Swanson reported that the governor's office does not support additional expansion of the school breakfast program, saying that the schools in the poorest areas now offer that option. In



school systems where free breakfasts are not offered to all students, it is up to the local school board to decide whether or not to add that program.

In a related note, the Center will partner with the Coalition for Human Needs to release an analysis of the latest U.S. Census poverty figures for the Commonwealth of Virginia. The report, "The High Cost of Being Poor in Virginia," will be officially released Oct. 10. It will show that while the state and national poverty rates have declined slightly, there are still more than 900,000 adults and children remain in poverty in Virginia. And that they spend all their earnings on necessities like rent and groceries.

Among the other highlights:

- As committees reported, the Organizing Committee said it talked about the upcoming "Day for All People" in January, who might speak, changes in format, and how it can be promoted. It also reported that the monthly Chapter calls are going well, and the summer Chapter retreat was well received. Members talked about the ongoing planning meetings in about 30 key legislative districts around the state. They also talked about reduced contact and support with the judicatories around Virginia, and possible solutions.
- The Public Policy Committee talked about the work being done on expanding health coverage expansion, including sample resolutions being offered to towns and cities around the Commonwealth, the need for letter-writing campaigns in congregations, and the "Healthcare Toolkit" put together by the staff and posted on the

VICPP website. A Wage Theft Task Force has been established and is moving forward. The committee noted that the Virginia Driver's License issue has hit a snag because of a lawsuit filed against the state by the Virginia Legal Justice Center.

- Treasurer Swanson said that a recent audit of VICPP's finances found no problems. The organization has received a \$65,000 grant for the next fiscal year. Rental income (in the building) and judicatory giving are both running behind.

- The Board heard a report on VICPP's building at 1716 East Franklin Street and the cost of maintaining that building as the headquarters for the organization. A recommendation to do additional research was approved.

- The Board discussed expanding the size of the Board and will consider an amendment to the Bylaws at its December meeting, which will occur before the Annual Meeting on Dec. 15.

- VICPP is working to re-build its Richmond Chapter behind the organizational efforts of Rabbi Gary Creditor. A meeting is set for Sunday, Oct. 16, at 2 p.m.

- There is a goal to turn the Annual Meeting (see flyer, page 5) into a fundraising event. "We have modest financial expectations in year one, but we want to design an event that we can build on in future years," Kim said. To that end the staff and volunteer workers will solicit sponsors, and will organize a Silent Auction. "It would be great if every board member could help get one thing for the auction," Kim added.

SAVE THE DATE! DEC. 15th FOR THE VIRGINIA INTERFAITH CENTER'S ANNUAL MEETING 2016

*YOU ARE INVITED TO THE
ANNUAL MEETING, WHICH
WILL BE HELD AT
THE VIRGINIA
HOLOCAUST MUSEUM,
LOCATED AT
2000 EAST CARY STREET,
RICHMOND VA 23223*

THURSDAY, DEC. 15

*BUSINESS MEETING 5:30 P.M.
CELEBRATION AND AWARDS,
SILENT AUCTION, 6-9 P.M.
HEAVY HORS D'OEUVERS
WILL BE SERVED*



**virginia
interfaith
center**

FOR PUBLIC POLICY

This year, Virginia, say yes to Medicaid Expansion

By William A. Hazel Jr.

The current state of the Virginia budget requires that we revisit the issue of Medicaid expansion. There has been a lot of confusion and misinformation about the impact and costs of expansion.

It's important that we correct these misunderstandings and, frankly, frequent misrepresentations. Medicaid expansion would have made the budget shortfall smaller. More important, we still have the opportunity to take this action, making medical care available to 400,000 Virginians while relieving some of the difficult budget decisions that lie ahead.

The facts clearly show that if we expanded Medicaid coverage, Virginia would actually experience a net savings of \$71 million over the current two-year budget. These are dollars that could help ease a critical problem in Virginia: accessing and paying for mental health and substance abuse services. More people with coverage means more people can obtain treatment for mental illness or substance abuse. During the last General Assembly session, the McAuliffe administration and the legislature agreed on a new substance abuse benefit for people who are covered by Medicaid. But that critical treatment is only available to people eligible for Medicaid. Nine in 10 individuals will not benefit from these services unless we expand coverage.

Expanding coverage could also generate savings by securing federal dollars to cover state-funded care provided by local community services boards, and hospital care provided to prisoners through the Department of Corrections.

Each year we wait, we are missing an opportunity to receive more than \$200 million in federal support to access prescription drugs, outpatient services and special mental health services. The Joint Subcommittee to Study Mental Health Services in the 21st Century, led by Sen. Creigh Deeds, met recently to discuss ways to improve care for individuals with mental illness and lessen demands on our state hospitals and jails.

Expanding Medicaid would help. In



fact, it would be a game changer.

As we contemplate future budget cuts over the coming months, it is frustrating that we have already turned down \$8 billion in federal funding that would have gone directly to Virginia families for medical care.

Opponents of expansion seek to justify their failure to bring those dollars home to their constituents by pointing to a recent report from the Centers for Medicare and Medicaid Services.

The report noted that many states choosing to expand coverage have experienced higher costs than originally predicted. Again, those critics conveniently ignore key facts that undermine their soundbite propaganda. Much of the additional expense seen in those other states is driven by increased enrollment in the existing Medicaid program.

As this country grapples with how best to reform our health care system, the issue has generated a stream of headlines. Citizens in every state are learning more about their options, and they are seeking out new avenues for medical services. In many cases, they discover that they are already eligible for Medicaid, even without expansion, and they enroll.

This trend is not limited to states that opted to expand coverage, however. We're seeing the same enrollment growth in Virginia, but without the financial benefits that could help us to offset those costs. We estimate

that for fiscal years 2016-2017, these enrollees will cost Virginia about \$135 million — without expansion. Another factor driving costs in expansion states is that newly covered people have higher medical costs.

In Virginia, we have already adopted cost estimates anticipating that new enrollees would cost more than those already receiving services. After all, these are people who have been forced to go without regular medical care — in some cases for many years.

If we expand Medicaid, Virginia will bear some of the cost of these new enrollees, but those costs are still outweighed by the savings. For example, we could save nearly \$100 million in state taxpayer funds each year for indigent care provided at the hospitals operated by the University of Virginia and Virginia Commonwealth, as well as private hospitals around the state.

We have a unique opportunity to expand Medicaid or craft some hybrid that meets the unique needs of our Commonwealth.

This year's budget shortfall should not be an excuse to procrastinate on expansion yet again. It should be the reason we give expansion another look and finally make the right decision for our citizens.

-William Hazel Jr. is serving his second term as Secretary of Health and Human Resources for the Commonwealth of Virginia, a post he has held since 2010. This column first appeared in the Sept. 10 Times-Dispatch.

Upcoming district planning meetings

Del. Loupassi/Sen. Sturtevant Second Planning Meeting
Thursday, Oct. 13, 6:30-8:30 p.m.
Location: Bon Air Library, Bon Air Room A, 9103 Rattlesnake Rd., Richmond, 23235

Crossover Ministry Coffee with Legislators
Wednesday, Nov. 30, Noon-1 p.m.
Location: 108 Cowardin Ave., Richmond, 23224

Volunteering for the Virginia Interfaith Center



Yes, I'd like to get more involved with the Virginia Interfaith Center for Public Policy and help advocate policies that improve conditions and opportunities for low-income Virginians. I will:

- Contact my Delegate about expanding comprehensive health care in Virginia.
- Contact my Senator about expanding comprehensive health care coverage in Virginia.
- Contact my city, town or county councilors about passing a resolution calling upon the General Assembly to expand health coverage by drawing down federal Medicaid dollars. My city, town or county is _____.
- Host an educational forum at my school/organization.
- Organize a letter-writing opportunity and seek to get at least ten letters.
- Pray for the leadership of the Virginia General Assembly.
- Volunteer in the VICPP office in Richmond or with a local VICPP chapter.
- Other: _____

I would like the Virginia Interfaith Center for Public Policy to:

- Email me the **Health Care Access Toolkit**, which includes background on the issues, resources on how to organize meetings with elected leaders and letter-writing opportunities, and a sample resolution.
- Send me a request for support that I can take to my organization/congregation/school.
- Call me about starting or joining a chapter in my community.
- Other: _____

Title: _____ Name: _____

School/Organization: _____

Role in group (if any): _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Phone: _____

Please mail to:

The Virginia Interfaith Center
1716 E. Franklin St.
Richmond, VA 23223

10 ways healthcare expansion could save the budget

I'm sure you've seen the news about how Virginia is facing a state budget deficit. You probably also heard some very confusing comments about what would happen to the budget deficit if Virginia expanded health coverage by drawing down federal Medicaid dollars.

We're not sure if our legislators are simply confused by the plethora of studies and numbers or if some are trying to intentionally ignore the facts and mislead the public. But regardless of what is going on, it is important that you know the facts so you can present them to our legislators, friends and the media. Thus, we've developed this fact sheet to help you understand what is going on and to help respond to the confusing statements some legislators are making.

The pending state budget deficit creates an opportunity. We can reduce the budget deficit and expand healthcare to poor people at the same. This would be a "win-win" for Virginia.

If you haven't yet communicated your concern to your legislator, click [HERE](#) and send a letter to your Delegate and Senator urging them to close part of the deficit by expanding healthcare in Virginia.

If you want to engage your congregation, click [HERE](#) to download VICPP's healthcare toolkit.

Thanks for your support and advocacy.

—Kim Bobo

FACT ONE: Currently, the only long-term, sustainable way for Virginia to help most of its low-income workers and their families who are without comprehensive health coverage is to draw down federal Medicaid dollars.

BACKGROUND: Currently Virginia has 400,000 people who would gain comprehensive health insurance if Virginia drew down federal Medicaid dollars. These dollars could be used to expand who is covered under Medicaid to include many more low-income people or Virginia could develop its own plan and use federal Medicaid dollars for this Virginia plan.

Instead of creating a uniquely state solution or expanding Medicaid to help hundreds of thousands of Virginians, the General Assembly has increased its funds for free health clinics from \$3 million to \$6 million, which is a drop in the bucket compared to the \$1.2 billion per year that the state could draw down in federal Medicaid dollars. With a budget deficit and many competing needs, Virginia can no longer plug the holes in its healthcare system with largely State taxpayer dollars while a significant pot of Federal dollars goes unused by Virginia for Virginians.

FACT TWO: Drawing down federal Medicaid dollars would reduce the state budget.

BACKGROUND: Even though it appears counterintuitive, drawing down federal Medicaid dollars would not only help low-income families in Virginia get healthcare, but it would actually bring more money into the state than the state would have to spend. Expanding healthcare in Virginia by drawing down federal Medicaid dollars would result in a net savings of \$71 million over the current two-year budget. Here's why:

Currently, the state spends a lot of its money on trying to

provide some level of healthcare to low-income or indigent people. This money is currently paid for 100 percent by the state coffers. The most that Virginia will ever have to pay for the healthcare expansion programs is 10 percent of the costs and that's not even till 2021. (In 2014-2016, the federal government would have paid for all of the healthcare expansion costs.) Not only has Virginia already turned down \$8 billion in federal funding, but according to a new report by the Virginia Poverty Law Center and The Commonwealth Institute, over the next six years, Virginia could save \$1.55 billion it currently spends on various healthcare programs, including the millions the state pays for charity care provided by health systems run by the University of Virginia and Virginia Commonwealth University, community mental health and substance abuse services, and other targeted health programs. In order to save this \$1.55 billion, Virginia would need to expand its coverage and draw down federal Medicaid dollars. To do so, the total cost over the next six years would be \$1.3 billion. The math is fairly straight-forward: over the next six years, Virginia would bring in \$256 million additional dollars over its costs, but ONLY if it expands health coverage.

The Commonwealth Institute and the Virginia Poverty Law Center are not the only ones who believe there will be savings. In 2014, PricewaterhouseCooper analyzed the fiscal impact of the Affordable Care Act. It found that the law's total affect would be \$1.021 billion in savings through 2022, but only \$601 million from the expansion of health coverage. Whatever numbers you choose to believe show that Virginia will bring in more federal dollars than it will spend if it expands health coverage by drawing down federal Medicaid dollars.

FACT THREE: Medicaid expansion has been good economically for states that have expanded.

BACKGROUND: The Robert Wood Johnson Foundation's Urban Institute published a paper entitled "What is the Result of States Not Expanding Medicaid?" This study found that "for every \$1 that a state invests in Medicaid Expansion, \$13.41 in federal funds will flow into the state." Specifically, for Virginia, the study estimated that the Commonwealth would spend \$1.326 billion to expand Medicaid over a 10-year period. However, over that same 10-year span, the cost to the state of not expanding Medicaid would be \$14.7 billion, plus another \$6.2 billion lost in hospital reimbursements.

New Jersey Gov. Chris Christie sang expansion's praises for his state, which is saving \$500 million a year by accepting federal money. "There were many naysayers, both inside the state and around the country, who criticized the choice [to expand Medicaid]," Christie said at a press conference on August 29, 2016. "Suggestions that if we did Medicaid expansion that we would further burden the state budget were wrong then and are now proven wrong."

Unfortunately, some in the Virginia General Assembly continue to spread confusion. That same day, Aug. 29, one well-known Virginia Senator said, "The program has been a financial drag on states that have expanded... If, in fact, Virginia had expanded Medicaid... the shortfall that we would have in revenue would have been exacerbated,"

Response to the state deficit

The economic impacts of Medicaid expansion have been analyzed comprehensively in a total of 16 states. Each of these studies have found that, prior to 2020, expansion on balance will save rather than cost the state money, and that starting in 2020 (when the federal match drops to 90 percent), financial benefits to state governments will be approximately equal to their costs.

Arkansas now projects a net positive impact on its state budget of \$637 million from 2017-2021. Kentucky has had a \$300 million net positive impact on its state general fund in two years, and projects \$820 million in savings from 2014-2021. New Mexico's expansion is projected to create a \$316 million surplus in its state general fund between 2014-2021.



FACT FOUR: Medicaid costs are going up in states, but NOT because of Medicaid expansion or states drawing down federal Medicaid dollars for expansion. And, states that have expanded Medicaid or drawn down federal Medicaid dollars have lower rates of growth in their state general funds spent on Medicaid.

BACKGROUND: This is a bit confusing because many, including some Virginia legislators, confuse the existing Medicaid programs with the expansion programs that either expand Medicaid to serve more people or that use additional federal Medicaid dollars to support a state-developed program to expand healthcare. (Most observers believe that Virginia legislators will not want to simply expand Virginia's Medicaid program, but will develop a Virginia healthcare expansion program, similar to one developed a few years ago by Senators Watkins, Stosch and Hanger, that can be supported with the federal Medicaid expansion dollars.)

The "regular" Medicaid program is a public health insurance program for low-income people that was started by the federal government in 1965 to cover low-income seniors, people with disabilities, pregnant women, children, and other vulnerable populations. In Virginia, more than 834,000 people have health coverage through Medicaid, which is jointly funded through federal and state dollars and administered by the state. For most current Medicaid enrollees, every dollar Virginia spends is matched by a dollar in federal funds. So, Virginia and every other state pays a significant share of the costs for its "regular" Medicaid program.

In every state, the regular Medicaid program costs are increasing, largely due to the cost of covering low-income seniors in long-term care. The population is aging, people are living longer, and the costs of the regular Medicaid program are going up. Moreover, as noted by Virginia's Secretary of Health and Human Services, Dr. Bill Hazel, as people in every state learn more about their coverage options, they

find out that they and/or their family members "are already eligible for Medicaid, even without expansion, and they enroll." Moreover, newly covered people have higher medical costs than previously projected, often due to not receiving needed primary and preventative health services for years. These healthcare costs for caring for uninsured people don't disappear if they don't get Medicaid coverage. They are just born by other parts of society in criminal justice, disability, healthcare provider, and other costs. Moreover – and this is really important to note – as reported by the Kaiser Family Foundation, "state general fund spending on Medicaid costs are growing faster in states that have not expanded health coverage than those that have" (3.4 percent versus 6.9 percent). Finally, Virginia's projected cost of expansion accounts for the enrollment and cost experience from states that have expanded.

Unfortunately, often when Virginia legislators are talking about expanding healthcare by drawing down federal Medicaid dollars (the expansion dollars), they make sweeping derogatory statements about how Medicaid programs are a financial drain on the states. Although it is true that the regular Medicaid programs, primarily due to the costs associated with caring for seniors and the disabled, are placing financial strains on states, it is NOT the expansion programs that are the problem.

FACT FIVE: Expanding healthcare by drawing down federal Medicaid dollars will create jobs.

BACKGROUND: Because so much extra money is coming in to the state for healthcare coverage and hospitals get reimbursed for more previously uncompensated care, The Commonwealth Institute estimates that expanding healthcare in Virginia by drawing down these new federal Medicaid dollars will add almost 16,000 jobs to Virginia. The average healthcare sector job pays about \$60,000, so these are good paying jobs with benefits. For rural and/or low-income areas, in particular, these dollars could make healthcare provider practices more financially stable and available, as well as help build the local economy.

A study in Missouri found that expansion states had three times the growth rate in healthcare jobs as those without expansion during 2014. In Kentucky, the accounting firm of Deloitte found that the decision to expand Medicaid created twice the number of new jobs than had been projected.

FACT SIX: Virginia's Medicaid reforms are working.

BACKGROUND: In 2013, Virginia lawmakers decided to reform the state's existing (regular) Medicaid program. These reforms have saved the state more than \$100 million dollars. Unfortunately, some legislators continue to say things like, "Medicaid is broken." Although there is always room for improving programs, especially ones as complicated as healthcare programs, it should not be used as a smokescreen for not providing healthcare for uninsured Virginians.

FACT SEVEN: The Affordable Care Act is here to stay.

BACKGROUND: The Affordable Care Act will be reformed, changed, and probably expanded and improved, but it is not going away. All other industrialized nations have programs that provide healthcare for their citizens, because it is the humane and financially sound thing to do. It makes sense

EXPANSION is continued on page 10

Response to the state deficit

EXPANSION, continued from page 9

that the U.S. would develop and keep such a program. There are many legislators who do not like the Affordable Care Act. Some think that government shouldn't fund healthcare and/or people shouldn't be required to have health insurance coverage. Others believe that the Act should have allowed a "public option."

Whatever the criticisms of the Act, it is not going to go away and, most agree, that "unwinding" the impact of the law would be a public relations, financial and political problem for those trying to do it. In fact, many legislators who publicly decry the Affordable Care Act, recognize that it will likely stay and that Virginia will "eventually" draw down federal Medicaid dollars to expand healthcare.

It would be better for Virginians if the General Assembly would accept those dollars in 2017 rather than waiting a few years and having thousands of Virginians suffer needlessly and/or not receive preventative and primary care services that could enhance and prolong their lives.

Virginia residents pay their share of federal taxes, but Virginians are not benefiting as much as other states because the state is not tapping those federal Medicaid dollars for healthcare expansion. Why not enjoy some of the benefits taxpayers are already paying for?

FACT EIGHT: Healthcare continues to change rapidly.

BACKGROUND: Healthcare provision in the U.S. has changed dramatically in the last 20 years and is likely to change a lot more in the next decade. Few doctors want to be in solo practices anymore. Physicians Assistants and Nurse Practitioners are taking on growing roles to allow them and physicians to function at the top of their skill ranges. Hospitals have merged and consolidated. Insurance companies are changing policies and are merging or attempting to merge. Most would admit that our healthcare system needed and continues to need reform in order for the U.S. to compete

with other industrialized nations.

In this changing time, hospitals and insurance companies are adjusting to various healthcare marketplaces. Recent news about various companies pulling out of particular states does not mean that expanding healthcare is a bad thing to do or that health coverage can't work in the long-term. Rather, it simply means that healthcare is continuing to change rapidly. Changes may need to be made in the Affordable Care Act to address some of the rapid changes in healthcare, but it should not be used as one more excuse for the Virginia General Assembly to delay in expanding health coverage.

FACT NINE: Virginia can back out of the expansion of healthcare if the federal government doesn't continue to pay its 90 percent share.

BACKGROUND: Some legislators have expressed concern that the federal government might renege on its promise to pay 90 percent of Medicaid expansion costs starting in 2020. If it does, then costs to the state could increase substantially. Simply put, some legislators do not trust the federal government to keep its word, even though the law has enacted by Congress, signed by the President and upheld by the Supreme Court. The Supreme Court's decision gives discretion to states relative to if they want to participate in use of Medicaid dollars to expand healthcare coverage.

FACT TEN: Virginia Hospitals proposed a provider tax to cover the state match.

BACKGROUND: Even though the research shows that Virginia would gain more income than it would lose if it drew down Medicaid dollars, the Virginia Hospital and healthcare Association, in December 2015, agreed to support a provider tax to cover the state match required to draw down the federal Medicaid dollars. This offer essentially guaranteed that the state could not lose money on expanding healthcare. Even so, the General Assembly declined the Hospital and healthcare Association's offer.



News and notes from around the state

BOBO SPEAKS AT SHENANDOAH

Executive Director Kim Bobo recently gave the public Davis Lecture at Shenandoah University and spoke in two Shenandoah classes — one on interfaith and one on Christian discipleship.

While in Winchester, Kim also met with the Shenandoah campus ministers, had lunch with faculty and dinner with student leaders and faculty, and participated in a House Party hosted by Dr. John Copenhaver and his wife, Marsha.



Kim Bobo and Dr. John Copenhaver (center) pose during Bobo's multi-day visit to Shenandoah University.

THE 'FIGHT FOR \$15'

Board member Dr. John Whitley has petitioned the Williamsburg City Council to raise the local Minimum Wage to \$15 an hour.

"For too long we have been complicit in permitting workers to be denied affordable housing, decent transportation, healthcare and many other expectations of employment by our supporting repressive and unjust wages. These workers make our economy viable and sustainable," wrote Whitley.

Whitley also listed healthcare coverage expansion and repeal the "Right to Work" bill as legislative priorities.

CHECK YOUR VOTER REGISTRATION

Make sure your vote counts on Nov. 8 — check your voter information on the Virginia Department of Elections website, <http://elections.virginia.gov>. The deadline to register for the November elections is Oct. 17.

FREE CLINIC IN PETERSBURG

Dr. Khalid Matin, a leading oncologist at VCU Massey Cancer Center, told VCV about a free clinic that he and colleagues from the Virginia Chapter of the Association of Physicians of Pakistani Descent of North America (APPNA) have started in Petersburg. They have a free health screening and food drive event coming up on Oct. 8 from 10 a.m. to 2 p.m., at Pathways Clinic, 1200 W. Washington St., Petersburg, 23803. This is part of their monthly free clinic program at Pathways. For more information, or to make an appointment, call 804-862-1104, ext. 301.

RIGHT CARE ACTION WEEK

During Right Care Action Week (Oct. 16-22), people around the country will join together for community conversations about what our healthcare system should look like. Everyone — physician, nurse, public health student, patient, family member, community member or anything else — can take part. In the Richmond area, there are two events planned for that week: Thursday, Oct. 20, from 6-8 p.m. at Sandston Library, and Saturday, Oct. 22, from 11 a.m. to 1 p.m., at North Park Library (both are branches of Henrico County Library). VCV will have a table at both events, and we invite you to join these community conversations about access and quality in healthcare. For more information, contact Casey Quinlan at casey@mightycasey.com, or at 804-467-5716.

VIRGINIA ORAL HEALTH SUMMIT

Oral Health is Health: Breaking through Barriers & Influencing Change is set for Nov. 10 in Richmond, presented by the Virginia Oral Health Coalition. The event will include unveiling the Virginia Oral Health Report Card, and explore measures, trends, research and activities in Virginia to gauge population health and identify opportunities for improvement. Attendees will have the opportunity to enhance their skills in crafting oral health messages and leading change amidst challenge, while meeting new partners in oral health advocacy. Continuing education credit provided. To register, visit <http://bit.ly/OralHealth16> by Nov. 2. Direct questions about the Summit to Samantha Dorr at 804-269-8722 or sdorr@vaoral-health.org.

SILENT AUCTION DONATIONS

The Virginia Interfaith Center is holding its Annual Meeting on Dec. 15, and is planning to hold its first ever silent auction as part of the meeting. The funds raised will go toward the Center's important work of social justice, and advancing and advocating for public policies that better serve low-income, vulnerable, and under-represented communities in Virginia.

Any kind of item, gift certificate or service you can give will be greatly appreciated. In acknowledgment of your donation your business will receive recognition in the auction program and the newsletter. And keep in mind that your donation is tax-deductible.

Examples of gifts include:

- *Tickets to concerts, sports and other events;*
- *Restaurant vouchers;*
- *Artwork or handmade crafts;*
- *Use of a vacation home;*
- *An hour of business (legal, resume, etc.) or personal services (nail, hair, etc.);*
- *A round of golf;*
- *Books (especially those signed by the author);*
- *Gift baskets that represent a special topic or area;*
- *Prepare a meal at your home;*

Donations are only limited by your creativity!

There's a handy form available for you to fill out for each gift donation.

For more information or to make a donation, contact Neill Caldwell at neill@virginiainterfaithcenter.org or 804-643-2474.

Wage theft is widespread in Virginia

What is wage theft? Wage theft is the illegal underpayment or nonpayment of a worker's wages. Wage theft happens in a variety of ways. Wage theft occurs when unethical employers break either federal or state laws by:

- Not paying the minimum wage.
- Not paying the overtime premium for hours worked over 40.
- Stealing workers' tips.
- Not paying for all hours worked.
- Calling workers independent contractors when they are really employees, thereby not paying the employer side of payroll taxes, workers compensation insurance, unemployment insurance and overtime.
- Taking illegal deductions from workers' pay.
- Giving workers paychecks that bounce.

In what sectors does it occur? Although wage theft can occur in almost any sector, it is common in many sectors that pay low wages. Low-income workers are often the victims of wage theft, making it doubly hard to buy food and pay the rent. Sectors in Virginia in which wage theft is widespread include: Agriculture (farmworkers), Poultry workers, Restaurants, Retail, Car washes, Landscaping, Residential construction and Home care/child care

How widespread is the problem? Although there have been no comprehensive studies on wage theft in Virginia, the national studies indicate that one out of four low-wage workers is not being paid the minimum wage and three-fourths of low-wage workers who work more than 40 hours a week are not being paid all their overtime premiums. Several hundred thousand workers are probably being cheated of wages by unethical employers not paying minimum wage or overtime. Worker centers, legal clinics, social services and congregations that serve low-income families know all too well how common wage theft is in Virginia.

Who is hurt by wage theft? Wage theft hurts:

- Workers and their families. Low-income workers who are not paid all their legally owed wages struggle to buy

food and pay rent. Wage theft contributes to hunger and poverty in Virginia.

- Employers. Honest and ethical employers, which most employers strive to be, are undercut by employers who steal from workers. Wage theft places good employers at a competitive disadvantage, especially in sectors like residential construction and landscaping in which employers routinely bid on jobs.

- Taxpayers. Employers who misclassify workers or underpay workers do not pay their fair share of taxes, thus shifting the burden to good employers and all taxpayers.

- All Virginians. Wage theft hurts all Virginians because it undermines economic growth. The fastest way to stimulate the economy is to put more money into the hands of low-income families because they spend it in the community, which stimulates jobs and economic growth. When workers aren't paid all their wages, they are spending less in the community and turn to public services and private charities to feed and house their families, thus restricting economic growth throughout the Commonwealth.

Why is wage theft rampant in Virginia? There are many causes for wage theft, but the primary ones are:

- Greed. Although there are many excellent employers in Virginia who pay workers fairly and legally, there are too many who cheat workers by not paying them all their legally owed wages. Some employers are extremely devious in how they bounce checks, record hours and misclassify workers. Others are simply not as diligent as they should be in ensuring that their managers and subcontractors are paying people legally. Either way, whether sins of commission or omission, workers are having their wages stolen and employers are breaking the law. The driving motivation is greed.

- Workers don't know their rights. Most workers do not know what their rights are in the workplace and have no idea what to do if their rights are being violated. Workers' lack of knowledge contributes to wage theft.

- Employers don't know the law. Al-

though some employers intentionally break the law, others have not paid attention to the laws governing payment of workers. But in the same way that employers can't avoid paying taxes by claiming they didn't understand the law, they shouldn't be able to underpay workers by claiming they didn't understand the law. Workers deserve all their wages and employers must obey the laws.

- Too few enforcement staff. The wage enforcement divisions of the federal Department of Labor and the Department of Labor and Industries (DOLI) do not have enough staff and resources to adequately protect Virginia's workers.

- Virginia's wage payment law is weak. Virginia has one of the weakest wage payment laws in the nation. It exempts large groups of workers (almost all are categories of jobs that were historically held by African Americans) and gives few enforcement tools to DOLI.

- Workers aren't organized. It is difficult for workers to challenge wage theft by themselves because they fear losing their jobs. When workers are organized in unions, worker associations, worker centers or settlement houses, they learn their rights and can work together to fight wage theft. Virginia has a very low unionization rate and only two worker centers.

How can you stop or deter wage theft? You can:

- Make sure your congregation, organization or place of business is paying workers legally.
- Ask how workers are paid when you hire contracted services.
- Pay your restaurant wait staff in cash. Approximately ten percent of tipped workers don't get all their tips.
- Educate workers in your community or congregation about their rights.
- Educate employers in your community or congregation.
- Support workers who organize to challenge wage theft.
- Join with VICPP in raising awareness about this problem in Virginia and strengthening enforcement throughout the Commonwealth. Sign up for advocacy alerts at www.virginiainterfaithcenter.org.