



COST & COVERAGE
COLLABORATIVE

THE BRIEFING ROOM:

Responding to Medicaid Work Requirements & Waste, Fraud, and Abuse

WEBINAR

April 2, 2025

Please drop your name and organization into the chat.

Overall Takeaways



Keys to Message Success



Keep it simple & big picture

This is about **terminating healthcare**, not a budget and spending fight

Focus on people

This is about **people getting hurt**, not about dollars and cents

Connect to public anger

Avoid defending the status quo – **focus on wealthy corporations**, AND high costs

We CAN and MUST respond on work requirements & WFA

We don't need to shy away from these topics – but we should use it as an opportunity to **shift to offense**

Takeaways Cheat Sheet



Too far, too fast:

- Leaders in Congress are going **too far, too fast. Recklessly** cutting \$880 billion from Medicaid will terminate healthcare for more than 15 million people.

Who gets hurt:

- You can't cut \$880 billion from Medicaid without terminating healthcare for 15 million people, including people fighting cancer, seniors in nursing homes, children, veterans, and people with disabilities.

Corporate greed & costs:

- Cutting \$880 billion from Medicaid does nothing to crack down on corporate greed and price gouging that's making healthcare so expensive.

Takeaways Cheat Sheet



Work Requirements

- **Making people sicker is the opposite of common sense.**
- **Work requirements punish people** [fighting cancer and other serious chronic diseases, gig workers and freelancers, caregivers, and people who get laid off] **by taking away their access to medications and healthcare.**

Waste, Fraud, & Abuse

- Cutting \$880 billion from Medicaid **does nothing to address waste, fraud, and abuse.** Instead, it **terminates healthcare for millions.**
- **Instead of working to lower our costs,** some in Congress are rushing too far, and too fast, to cut Medicaid by \$880 billion.
- Their plan will terminate healthcare for those who can least afford it and increase healthcare costs for all of us – **while doing nothing to address waste, fraud, and abuse.**

Shift to Offense: Cuts



If they say:

“We have to strengthen Medicaid for the people it was designed for by cutting excessive spending.”



“Medicaid is the fastest growing federal program. The costs are spiraling and we have to get spending under control before it bankrupts us.”



We say:

It defies common sense to think people who need care won't be left behind. You can't **rush to cut \$880 billion** without **terminating healthcare for millions of people**. Seniors in nursing homes, veterans, children, and people with disabilities would have the healthcare they need **terminated** as a result.

Healthcare costs in this country continue to skyrocket. But instead of focusing on lowering costs, some in Congress are putting the profits of their donors ahead of patients, **terminating healthcare for millions in the process**. We need to focus on bringing down healthcare costs - not terminating people's care.

Shift to Offense: Work Requirements



If they say:

“It’s common sense, if you receive Medicaid benefits you should have to prove you’re working. Work is good for you. You find dignity in work.”



We say:

It’s the opposite of common sense. It will actually make it harder for people to get and stay healthy enough to work. **In order to work, you have to be healthy enough to show up.** Punishing people fighting cancer and other serious chronic diseases, gig workers and freelancers, caregivers, and people who get laid off – by terminating their healthcare will only make them sicker and less able to work.

Shift to Offense: Waste, Fraud, and Abuse



If they say:

“Medicaid is filled with waste, fraud, and abuse. It’s estimated that there’s \$50 billion of fraud every year. That’s \$50 million in taxpayer dollars. We need to crack down on this and that starts with major spending cuts.”



We say:

Cutting \$880 billion from Medicaid **does nothing to address waste, fraud, and abuse.** Instead, it terminates healthcare for millions of seniors in nursing homes, veterans, children, and people with disabilities.