

Medicaid Covers US Message Guide



Medicaid **covers** US

About this Guide

Since the launch of the Medicaid Covers US campaign, ACS CAN has conducted quantitative and qualitative public opinion research to better understand views on the Medicaid program and its value, related issues like health equity and medical debt and policies ranging from Medicaid expansion to harmful regulations like work requirements. ACS CAN has conducted numerous message tests to determine the most salient messages to illustrate the value of Medicaid and greater access to care, and defend against regulations that may pose a threat to access.

This guide aims to provide ACS CAN staff, volunteers, and partners with the resources needed to continue to fight for the expansion and protection of Medicaid, including some suggested message guidance, sample key messages, and compelling data points.

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About Medicaid Covers US

Medicaid Covers US is a campaign by The American Cancer Society Cancer Action Network (ACS CAN) to lift up the value of Medicaid for individuals, families, and communities and shine a light on the historic and contemporary inequities driven by the Medicaid coverage gap.

With the help of important community partners, Medicaid Covers US leverages the power of storytelling to elevate the value of Medicaid and show the continued injustice of the Medicaid coverage gap. This effort centers the lived experiences of real people in our communities—our neighbors and friends. This multi-media public education campaign is focused in the 10 states that have failed to expand Medicaid, and aims to promote the importance of expanding access to health coverage as part of the solution to removing barriers to health based on race, ethnicity, income, and location and achieving health equity in the United States.

Key Message Tips

- **Focus communications about Medicaid and Medicaid expansion on the people who rely on Medicaid** for critical and lifesaving health care including children, seniors, people with disabilities, pregnant people, and low-income families.
- Access to affordable health care is critical to addressing systemic racial and ethnic disparities in health care access and outcomes. **Lift up the value of Medicaid and Medicaid expansion for communities—especially communities of color—who for too long have been left without equal access to affordable health care.**
- Medicaid plays a critical role in helping cancer patients get the care they need to fight and survive the disease, and provides access to screenings and diagnostic tests that improve patient outcomes. **Talk about the importance of access to Medicaid for cancer patients and those at risk for developing cancer.**
- Access to affordable health care protects individuals and families from devastating medical debt. **Illustrate how Medicaid provides access to health care and protection from catastrophic medical bills for those who are in between jobs or were let go, work in industries where employer-sponsored coverage isn't offered, are too sick to work, or are taking care of a loved one.**

Core Message Frame

Medicaid is health insurance for low-income children and adults, including parents, pregnant people, seniors, and people with disabilities. It allows people to get regular check-ups to stay healthy, see a doctor when they are sick, detect disease early to give them the best chance at fighting cancer, access the medications they need, and go to the hospital in an emergency. Medicaid keeps hospital doors open in rural communities that provide access to lifesaving care for people with cancer and other diseases, creates jobs in our communities, and helps our state and nation become healthier and more prosperous.

But right now, more than two million people in 10 states across the country are living without access to health insurance simply because their state has refused to expand Medicaid. And more than 60% of them are people of color.

Expanding access to Medicaid helps address racial and geographic disparities in health care access and outcomes—providing access to care for people who have been systematically left without access to affordable coverage for far too long. Medicaid expansion is an essential part of the fight against cancer and to achieve health equity, so that no matter a person’s ZIP code, income, or color of their skin, they have the opportunity to get and stay healthy.

Key Messages

The Value of Medicaid

ABOUT MEDICAID

- **The Basics:** Medicaid is free or low-cost health insurance for low-income children and parents, as well as other adults with low incomes, pregnant people, seniors, and people with disabilities. It covers doctors visits, regular check-ups, screenings and tests, mental health services, prescriptions, emergency care, at-home care, and nursing home services. Medicaid allows people to get the health care they need to get and stay well and detect their cancer early to have the best chance at survival.
- **Access:** Medicaid removes barriers to accessing affordable health care. For far too many, the cost of health care is out of reach, leading many to delay needed care or avoid seeking the care at all. Many low or minimum wage workers’

employers don't offer health insurance and they make too little to afford private insurance. Access to low-cost or free health coverage through Medicaid means healthier families, healthier communities, and a healthier and stronger country.

- **Stronger Communities:** Medicaid makes it possible for hospitals, clinics, doctors, and schools to provide services that strengthen our communities—like screenings to detect asthma and vision problems in children early, allowing them to participate, thrive, and succeed in school. Medicaid creates jobs, keeps businesses open, and creates a healthier and stronger workforce. Medicaid makes our communities stronger.
- **Financial Security:** No one should have to choose between getting the health care they need and paying for rent, gas, or groceries because of high costs. For those who don't get health insurance through their employer or qualify for subsidies through the ACA Marketplace, Medicaid provides the peace of mind to get the care they need without the fear of catastrophic bills and medical debt. And for those laid off or become too sick to work—Medicaid provides temporary assistance by ensuring them access to affordable health care.
- **Rural Health:** In rural communities, the time it takes to drive to the hospital can mean life or death. Medicaid keeps rural hospitals and clinics open to provide critical access to quality, lifesaving care. Hospitals and clinics are often some of the largest employers in rural communities, creating well-paying jobs and growing local economies. Medicaid makes the difference for rural communities.

MEDICAID AND EQUITY

- **Barriers to Access:** Improving access to affordable health care is a critical part of addressing systemic racial and ethnic disparities in health care access and outcomes. Medicaid helps break down barriers and improve access to health coverage and care. It's an important step towards achieving health equity, so that everyone—no matter their ZIP code, income, or the color of their skin—has a fair and just opportunity to get and stay healthy.
- **Historic and Contemporary Inequities:** Having health insurance makes a difference in whether, when, and where people get health care. People without health insurance are far more likely than those with insurance to delay care or forgo it altogether, and Black people are 1.5 times more likely to be uninsured than White people. Medicaid improves access to affordable health care in communities of color who have been left without access for far too long.

- **Racism:** Discrimination due to a person’s race and color of their skin can limit their ability to be healthy and get care when they are sick. Discrimination and systemic racism are part of the reason that Black people are still 1.5 times more likely to be uninsured than White people. Medicaid helps address these disparities by leveling the playing field—helping individuals and families of color in historically under-resourced communities access health coverage to get the care they need to get and stay healthy.
- **Medicaid Works:** The expansion of Medicaid in 40 states has reduced the number of people who are uninsured and helped to mitigate the financial burden of health care across the country. Since then, people of color have seen the largest gains in health insurance coverage. Medicaid works to address systemic racial and ethnic disparities in health coverage and outcomes.

Medicaid and Equity Data Points

- The proportion of uninsured adults is greater among Hispanic (24.5%) and Black (13.5%) persons than white adults. SOURCE: [The Commonwealth Fund, 2023](#)
- About 1 in 5 Black adults and 1 in 10 Hispanic adults say they’ve been treated unfairly or with disrespect by a health care provider because of their race or ethnic background. SOURCE: [KFF, 2023](#)
- At least 1 in 5 adults across racial and ethnic groups say they or a family member living with them had a problem paying for health care in the past year. SOURCE: [KFF, 2023](#)

MEDICAID AND CANCER

- **Best Chance:** Millions of Americans have cancer. For many of them, Medicaid makes it possible to get the care they need to fight the disease. It covers cancer screenings, diagnostic tests, treatments, surgeries, prescription medications, and follow-up care. Medicaid provides cancer patients the best chance to survive the disease.
- **Prevention:** From cancer screenings like mammograms and colonoscopies to the latest breakthroughs in treatment, Medicaid provides millions of Americans access to care that could prevent cancer and save their lives.
- **Cost:** Without health insurance, cancer treatment can be incredibly costly, leading to harmful medical debt and putting families at risk. People without health insurance are also more likely to be diagnosed with cancer at a late stage,

when the disease is harder to treat, more costly and more difficult to survive. Nobody should have to choose between the lifesaving cancer care they need and financial stability for themselves and their families.

Medicaid Expansion

ABOUT MEDICAID EXPANSION

- **Left Behind:** In the decade since the passage of the Affordable Care Act, 40 states and the District of Columbia have expanded Medicaid and provided affordable health care to over 21 million people. In the 10 states that remain, over two million people have been left behind by lawmakers who have chosen politics over the health of the residents of their state.
- **The Gap:** In the 10 states that have refused to expand Medicaid, over two million people fall in the “Medicaid coverage gap.” These people make “too much” to qualify for Medicaid but cannot afford private insurance through the marketplace –leaving them with no affordable health care options. Without access to health care, they are living sicker and dying younger than those in states that have closed the Medicaid coverage gap.
- **State Lines:** Where you live shouldn’t determine whether you live. But for the two million people living in the 10 states that haven’t expanded Medicaid, this is their reality. Without access to affordable health coverage, they’re more likely to delay needed care or avoid seeking the care they need to get and stay healthy. For many of them, residents of neighboring states have access to affordable health care because their state lawmakers have expanded Medicaid. Crossing a state line shouldn’t mean the difference between having access to affordable care or not.
- **A Good Deal:** Medicaid expansion is a good deal for states. The federal government pays 90% of the costs of expanding Medicaid to cover low-income parents and adults with low incomes. Lawmakers are knowingly putting politics first when they refuse to expand Medicaid. They are leaving money on the table that would help individuals and families in their state by refusing to expand access to Medicaid. Every federal dollar they turn away from their Medicaid program means less money coming into their state and more going to others.

- **Rural:** Medicaid expansion helps keep rural hospitals and clinics open. People need health care, whether or not they have health insurance. When people are left without access to health coverage, hospitals must provide even more uncompensated care—and taxpayers are left to foot the bill. If hospitals aren't reimbursed for the care they provide, they are forced to make tough decisions like laying off staff to stay afloat or closing their doors—hurting rural families, communities, and local economies.
- **Medical Debt:** People living in the 10 states where lawmakers have refused to expand Medicaid are dramatically more likely to have medical debt than those in expansion states. The reason is simple: being uninsured is one of the factors that leads to high levels of medical debt—and in these 10 states, over two million people are living without insurance because they fall in the Medicaid coverage gap. There is clear evidence that Medicaid expansion is a proven way to lower medical debt. Now it's up to lawmakers.

MEDICAID EXPANSION AND HEALTH EQUITY

- **Politics Ahead of People:** Where you live shouldn't determine whether you live. But two million people in 10 states across the country are living without access to affordable health care because they live in a state where lawmakers have refused to expand Medicaid. 60% of people living in the Medicaid coverage gap are people of color and 97% of them live in the American South—left behind because leaders in those states won't do the right thing.
- **Shorter & Sicker:** Nobody should live a shorter or sicker life because of how much money they make, the color of their skin, or where they live. But over two million people are living without access to health insurance simply because their state has refused to expand Medicaid. 97% of them live in the American South and more than 60% of them are people of color. Expanding Medicaid will help address the historic and long-standing health disparities driven by the Medicaid coverage gap.
- **Disparities:** Access to affordable health care is critical to addressing systemic racial and ethnic disparities in health care access and outcomes. Medicaid expansion would increase access to affordable health care for communities—especially communities of color—who for too long have been left without equal access to affordable health care.

- **One Part:** Health coverage is something we all need and we all deserve. But factors like race, ethnicity, income, gender, employment, and where you live can affect your access to affordable coverage. Medicaid expansion is one part of a solution to achieve health equity in the United States—so that everyone has a just and fair opportunity to get and stay healthy.

Medicaid Expansion Data Points

- The uninsurance rate would drop by 25% if the remaining 10 states expanded their Medicaid programs. SOURCE: [RWJF, 2023](#)
- Between 2013 and 2022, the gap in uninsured rates between White and Black adults under age 65 shrank by 67% in expansion states versus 47% in non-expansion states. The gap between White and Latino adults shrank by 48% in expansion states versus 30% in non-expansion states. SOURCE: [CBPP, 2024](#)
- Hospitals in expansion states are 84% less likely to close than in non-expansion states, with rural hospitals being 62% less likely to close. And a majority (74%) of rural hospital closures happened in states where Medicaid expansion was not in place or had been in place for less than a year. SOURCES: [Health Affairs, 2018](#), [The Chartis Center for Rural Health, 2022](#), [AHA, 2022](#)
- It's estimated that each low-income person who gains health coverage through Medicaid expansion has a \$1,140 reduction in medical debt. SOURCE: [CBPP, 2020](#)

MEDICAID EXPANSION AND CANCER

- **Lifesaving Care:** Where you live shouldn't determine whether you live. But, for millions of low-income Americans, the state they live in could determine if they have access to health care services, including cancer care. To date, 40 states and the District of Columbia have expanded Medicaid, providing more than 21 million individuals and families access to health care coverage and to lifesaving tests like mammograms, colonoscopies, and other cancer screenings. Expanding Medicaid in the remaining 10 states would open the same door for millions more.
- **Better Odds:** Access to affordable coverage like Medicaid significantly improves chances of diagnosing, treating, and surviving cancer. Newly-diagnosed cancer patients living in states that have expanded Medicaid eligibility are more likely to be diagnosed with early-stage disease than those living in non-expansion states and see higher rates of survivorship because of it. Expanding Medicaid would provide millions more individuals and families with access to lifesaving care including mammograms, colonoscopies, and other cancer screenings.

- **Cancer & Equity:** Expanding Medicaid is an important part of the fight against cancer—and for achieving health equity. There are major racial disparities in the treatment and outcomes for many types of cancer. Expanding Medicaid would increase access to critical screenings, treatment, and care for communities—especially communities of color—who for far too long have lacked access to quality, affordable cancer care.

Medicaid Expansion and Cancer Data Points

- A recent study found that newly diagnosed cancer patients living in states that had expanded Medicaid had better survival than those living in non-expansion states. SOURCE: [ACS, 2024](#)
- 57% of those in states that have not yet expanded Medicaid have had medical debt related to their cancer compared to 47% of those in states that have implemented expansion. SOURCE: [ACS CAN, 2024](#)

Defending Medicaid

The challenges facing Medicaid right now look very different than they did during the height of the COVID-19 pandemic. At the federal and state levels, we face renewed efforts to make access to Medicaid more difficult for those who need it most, and as the unwinding of continuous Medicaid eligibility during the Public Health Emergency concludes, millions of people who rely on Medicaid for the care they need have lost access to care. What follows are research-based suggestions on how best to elevate the value and importance of Medicaid in the face of these challenges.

WORK REQUIREMENTS

“Work requirements” describe any policy that requires proof of a minimum level of employment or number of hours worked in order to qualify for health coverage through Medicaid, with limited exceptions. These policies hurt working individuals and working families and create unnecessary barriers to access needed health care. Proponents of work requirements for Medicaid rely on personal responsibility arguments, messaging about work-status, and discussions of who is or is not deserving of health coverage. Their claims are centered around false arguments that we cannot afford to extend these policies or that people will unfairly take advantage of them and abuse the system.



KEY TIP: Keep the focus on the diverse populations who rely on Medicaid including seniors in nursing homes, people with disabilities, and low-income children and families.

- **Less Able to Work:** Work requirements don't actually help people get and stay healthy enough to work. To look for and keep a job, you need to be healthy. Punishing people who have lost a job—or even just a couple shifts at their job—by taking away their access to medications and medical care will only make them sicker and less able to work in the future.
- **Who “Should” Work:** Medicaid work requirements are an attempt to divide people based on whether or not they meet a very limited definition of who should work. People who are recovering from or living with serious diseases like cancer, or those who have serious chronic illnesses often fit this definition of who “should” work, when they actually aren't able to. If work requirements were introduced, they'd lose their Medicaid health insurance at a time when they need it most.
- **Chronic Conditions:** Work requirements can actually make it harder for people to get and stay healthy enough to work, especially for cancer patients and people who rely on regular prescriptions to manage chronic conditions. When more people with chronic conditions are uninsured, it costs all of us. It means crowded ERs, costly uncompensated care at local hospitals, and mounting medical debt.
- **Shift Work:** Work requirements are unfair to people who do shift work with no control over their own schedules. It's often a double whammy for workers—most shift jobs offer lower wages, making health care unaffordable and workers are often at the mercy of a boss who can cut back on their hours without warning.

** This message was more effective when used with 18-34 year-olds than with other age groups, as well as with people with high school or less education.*

Defending Medicaid Data Points

- More than 6 in 10 adults with Medicaid coverage work full or part time. Leading reasons for not working among were caregiving responsibilities, illness or disability, or school attendance. SOURCE: [KFF, 2023](#)
- In Arkansas, more than 18,000—or 1 in 4 people who were subject to a Medicaid work requirement lost their coverage in the first seven months of the policy. SOURCE: [CBPP, 2023](#)

Storytelling: Lifting Up Lived Experience

Many of us have experience with and have benefitted from Medicaid—as a patient, a provider, or a member of the community. Medicaid may provide health insurance to you, your family members, friends, or neighbors. Maybe you know people who can't afford health coverage because the cost of private insurance is out of reach and their state has not expanded Medicaid. Or, you may have a sustainable rural hospital and healthy work force in your community because Medicaid is there to support the health care system. Whatever your connection, Medicaid plays an important role in the health of our families, communities, and economy.

Telling stories about the impact of Medicaid is a critical part of helping decision-makers understand the importance of Medicaid. There are many ways that you can share your story and perspective:

- A social media post sharing your story or inviting others to share theirs
- A letter to the editor or opinion piece in your local paper
- A letter, email, or call to your state legislators
- Sharing your story at key legislative hearings
- A conversation with a family member or colleague who might not see the importance of Medicaid or expanding the program

Here are some tips to support sharing your story:

- **Use Strong Messages:** Review the messages in this toolkit and incorporate some of them in your story to ensure you are elevating effective points about the value of Medicaid or Medicaid expansion.
- **Keep it Brief:** Consider your word count—newspapers typically hold letters to the editor to a 150–250 word maximum, so be sure to check with the paper ahead of time to make sure you are within the allowable word count. And in general, a shorter story is more likely to gain traction on social media or stick with your legislator.
- **Be You:** Your personal perspective about how Medicaid impacts real people in your community is valuable. You have a unique experience that no one else

brings to the discussion. Be sure to explain why Medicaid or Medicaid expansion matters in the context of your personal story.

- **Get Local:** Remember to localize your stories. Editors, friends, and legislators are looking to understand or show how bigger issues impact your local area. And, smaller papers and blogs are often easier to place content in than major publications.
- **Keep it Simple:** The person reading your story may have never heard of this issue before, so write your story as if you're explaining it to your neighbor for the first time. Avoid acronyms or "inside ballgame" language.
- **Pick One Fact:** Try to stick to one key fact. Because we are so passionate about this issue, you may have a lot of information you want to share. But if you give too many stats and facts, or facets of your story, they will not stick with your reader. Pick the one or two you think are the most powerful and make your case with those.
- **Submit Once:** For a letter to the editor, don't submit the same letter to multiple newspapers in the same market. Editors don't like to see something from their paper printed in a competing paper, and it may hurt your chances of getting published now and in the future.
- **Get Creative:** Are you posting something on your social media page? Try taking a video of yourself or sharing photos that connect with your story.

Social Media

We encourage you to share these messages on social media. You can download sample social graphics [here](#).

It's time to expand Medicaid in the remaining 10 states.

American Cancer Society Cancer Action Network

MEDICAID COVERAGE GAP:
PEOPLE WHO MAKE "TOO MUCH" TO QUALIFY FOR MEDICAID BUT TOO LITTLE TO AFFORD PRIVATE HEALTH INSURANCE

LEARN MORE

IN THE AMERICAN SOUTH,
PEOPLE ARE STILL DENIED THE HEALTH CARE THEY DESERVE BECAUSE OF

- HOW MUCH MONEY THEY MAKE
- THE COLOR OF THEIR SKIN
- THEIR ZIP CODE

LEARN MORE

American Cancer Society Cancer Action Network

Medicaid is health insurance for **people who don't get coverage through their job.**

American Cancer Society Cancer Action Network

Patients shouldn't have to choose between feeding their family or visiting the doctor.
Together, we can demand change.

American Cancer Society Cancer Action Network

More than two million cancer patients and survivors rely on Medicaid for their health care needs.

Share your story 🗣️