

More than 1 million dropped from Medicaid as states start post-pandemic purge of rolls

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Gary Rush poses for a photo outside the Pennsylvania Capitol, June 7, 2023, in Harrisburg, Pa. Rush was demonstrating with the advocacy group Power to the People against the state removing people from Medicaid and says he's worried about losing his medical coverage under the program. Credit: AP Photo/Marc Levy

More than 1 million people have been dropped from Medicaid in the past couple months as some states moved swiftly to halt health care coverage following the end of the coronavirus pandemic.

Most got dropped for not filling out paperwork.

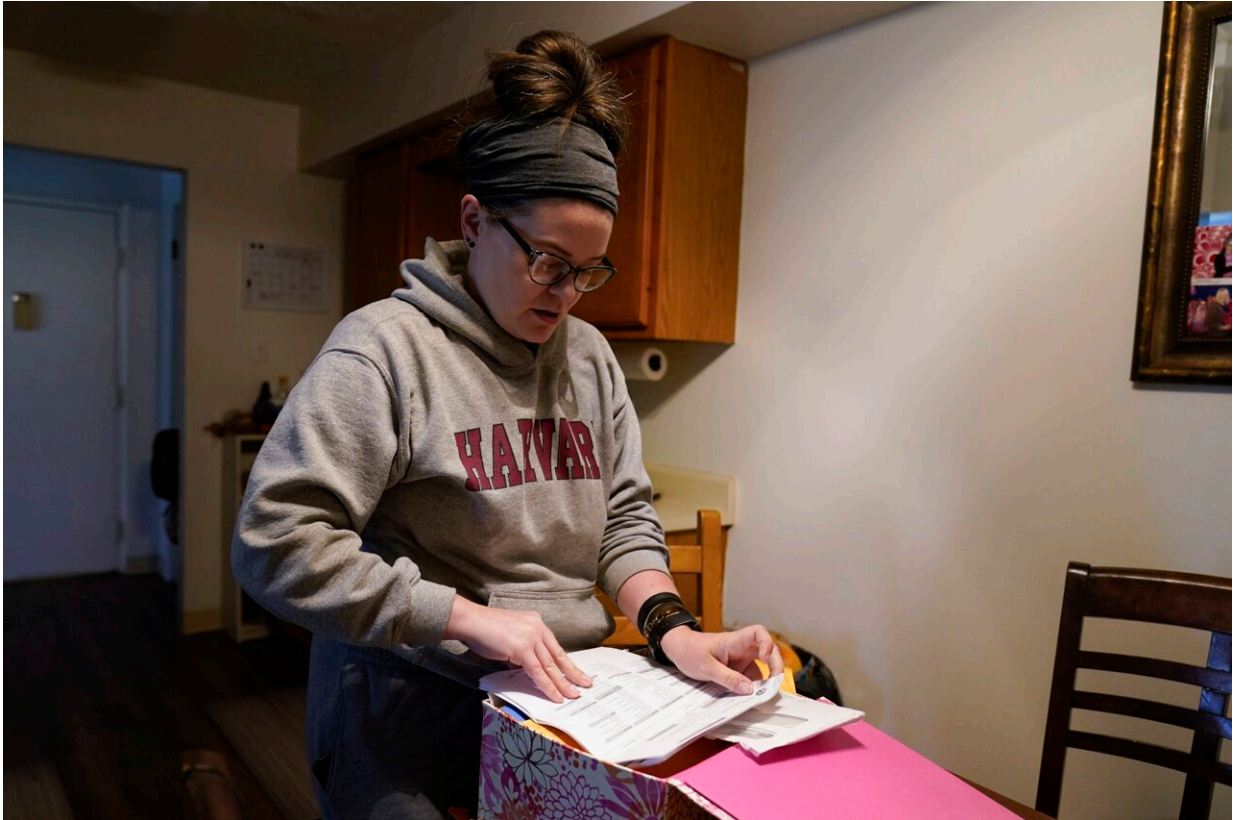
Though the eligibility review is required by the [federal government](#), President's Joe Biden's administration isn't too pleased at how efficiently some other states are accomplishing the task.

"Pushing through things and rushing it will lead to eligible people—kids and families—losing coverage for some period of time," Daniel Tsai, a top federal Medicaid official recently told reporters.

Already, about 1.5 million people have been removed from Medicaid in more than two dozen states that started the process in April or May, according to publicly available reports and data obtained by The Associated Press.

Florida has dropped several hundred thousand people, by far the most among states. The drop rate also has been particularly high in other states. For people whose cases were decided in May, around half or more got dropped in Arkansas, Idaho, Kansas, Nevada, New Hampshire, Oklahoma, South Dakota, Utah and West Virginia.

By its own count, Arkansas has dropped more than 140,000 people from Medicaid.



Samantha Richards looks over her Medicaid papers, Friday, June 9, 2023, in Bloomington, Ind. Richards has been on Medicaid her whole life and currently works two part-time jobs as a custodian. Credit: AP Photo/Darron Cummings

The eligibility redeterminations have created headaches for Jennifer Mojica, 28, who was told in April that she no longer qualified for Medicaid because Arkansas had incorrectly determined her income was above the limit.

She got that resolved, but was then told her 5-year-old son was being dropped from Medicaid because she had requested his cancellation—something that never happened, she said. Her son's coverage has been restored, but now Mojica says she's been told her husband no longer qualifies. The uncertainty has been frustrating, she

said.

"It was like fixing one thing and then another problem came up, and they fixed it and then something else came up," Mojica said.

Arkansas officials said they have tried to renew coverage automatically for as many people as possible and placed a special emphasis on reaching families with children. But a 2021 [state law](#) requires the post-pandemic eligibility redeterminations to be completed in six months, and the state will continue "to swiftly disenroll individuals who are no longer eligible," the Department of Human Services said in statement.

Arkansas Gov. Sarah Huckabee Sanders has dismissed criticism of the state's process.



Samantha Richards stands outside of her apartment, Friday, June 9, 2023, in Bloomington, Ind. Richards has been on Medicaid her whole life and currently works two part-time jobs as a custodian. Credit: AP Photo/Darron Cummings

"Those who do not qualify for Medicaid are taking resources from those who need them," Sanders said on Twitter last month. "But the pandemic is over—and we are leading the way back to normalcy."

[More than 93 million people](#) nationwide were enrolled in Medicaid as of the most recent available data in February—up nearly one-third from the pre-pandemic total in January 2020. The rolls swelled because federal law prohibited states from removing people from Medicaid during the health emergency in exchange for providing states with increased funding.

Now that eligibility reviews have resumed, states have begun plowing through a backlog of cases to determine whether people's income or life circumstances have changed. States have a year to complete the process. But tracking down responses from everyone has proved difficult, because some people have moved, changed contact information or disregarded mailings about the renewal process.

Before dropping people from Medicaid, the Florida Department of Children and Families said it makes between five and 13 contact attempts, including texts, emails and phone calls. Yet the department said 152,600 people have been non-responsive.

Their coverage could be restored retroactively, if people submit information showing their eligibility up to 90 days after their deadline.



Samantha Richards speaks about her experience with Medicaid, Friday, June 9, 2023, in Bloomington, Ind. Richards has been on Medicaid her whole life and currently works two part-time jobs as a custodian. Credit: AP Photo/Darron Cummings

Unlike some states, Idaho continued to evaluate people's Medicaid eligibility during the pandemic even though it didn't remove anyone. When the enrollment freeze ended in April, Idaho started processing those cases—dropping nearly 67,000 of the 92,000 people whose cases have been decided so far.

"I think there's still a lot of confusion among families on what's happening," said Hillarie Hagen, a health policy associate at the

nonprofit Idaho Voices for Children.

She added, "We're likely to see people showing up at a doctor's office in the coming months not knowing they've lost Medicaid."

Advocates fear that many households losing coverage may include children who are actually still eligible, because Medicaid covers children at higher income levels than their parents or guardians. [A report last year](#) by the U.S. Department of Health and Human Services forecast that children would be disproportionately impacted, with more than half of those disenrolled still actually eligible.

That's difficult to confirm, however, because the federal Centers for Medicare & Medicaid Services doesn't require states to report a demographic breakdown of those dropped. In fact, CMS has yet to release any state-by-state data. The AP obtained data directly from states and from other groups that have been collecting it.



Samantha Richards stands outside of her apartment, Friday, June 9, 2023, in Bloomington, Ind. Richards has been on Medicaid her whole life and currently works two part-time jobs as a custodian. Credit: AP Photo/Darron Cummings

Medicaid recipients in numerous states have described the eligibility redetermination process as frustrating.

Julie Talamo, of Port Richey, Florida, said she called state officials every day for weeks, spending hours on hold, when she was trying to ensure her 19-year-old special-needs son, Thomas, was going to stay on Medicaid.

She knew her own coverage would end but was shocked to hear Thomas' coverage would be whittled down to a different program that could force

her family to pay \$2,000 per month. Eventually, an activist put Talamo in contact with a senior state healthcare official who confirmed her son would stay on Medicaid.

"This system was designed to fail people," Talamo said of the haphazard process.

Some states haven't been able to complete all the eligibility determinations that are due each month. Pennsylvania reported more than 100,000 incomplete cases in both April and May. Tens of thousands of cases also remained incomplete in April or May in Arizona, Arkansas, Indiana, Iowa, New Mexico and Ohio.



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"If states are already behind in processing renewals, that's going to snowball over time," said Tricia Brooks, a research professor at the Georgetown University Center for Children and Families. "Once they get piles of stuff that haven't been processed, I don't see how they catch

up easily."

Among those still hanging in the balance is Gary Rush, 67, who said he was notified in April that he would lose Medicaid coverage. The Pittsburgh resident said he was told that his retirement accounts make him ineligible, even though he said he doesn't draw from them. Rush appealed with the help of an advocacy group and, at a hearing this past week, was told he has until July to get rid of about \$60,000 in savings.

Still, Rush said he doesn't know what he will do if he loses coverage for his diabetes medication, which costs about \$700 a month. Rush said he gets \$1,100 a month from Social Security.

In Indiana, Samantha Richards, 35, said she has been on Medicaid her whole life and currently works two part-time jobs as a custodian. Richards recalled receiving a letter earlier this year indicating that the pandemic-era Medicaid protection was ending. She said a local advocacy group helped her navigate the renewal process. But she remains uneasy.

"Medicaid can be a little unpredictable," Richards said. "There is still that concern that just out of nowhere, I will either get a letter saying that we have to reapply because we missed some paperwork, or I missed a deadline, or I'm going to show up at the doctor's office or the pharmacy and they're going to say, 'Your insurance didn't go through.'"

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