

HANDS OFF OUR HEALTHCARE Keeping Families Covered

A MEDICAID CIVIL RIGHTS RESOURCE & ACTIVATION GUIDE

















OVERVIEW

What is Medicaid?

Medicaid/CHIP is the single largest source of health insurance coverage in the United States. At its height in April 2023, Medicaid provided health coverage to **over 94 million** Americans across the 50 states and the District of Columbia. This included eligible low-income adults, children, pregnant women, elderly adults, and people with disabilities. Today, approximately 81 million children, seniors, and families rely on the program for their health care.

What happened to Medicaid during the COVID-19 pandemic?

Based on COVID-19 trends, the Department of Health and Human Services declared a public health emergency (PHE). The PHE increased access to critical healthcare services, including **testing**, **vaccination**, **direct payments**, and more.

The PHE also enacted the continuous enrollment provision, which required states to ensure that Medicaid recipients had coverage and consistent access to healthcare services throughout the pandemic. Medicaid enrollment increased by over 23 million during the pandemic, primarily due to this provision.

The Public Health Emergency and continuous enrollment provision ended on March 31, 2023, officially **beginning the unwinding** of Medicaid. As of April 1, 2023, states were allowed to terminate beneficiaries' Medicaid coverage for the first time since February 2020.

MEDICAID UNWINDING TIMELINE

March 18, 2020: Families First Coronavirus Act (FFCRA) Passed

The FFCRA included a provision for Medicaid Continuous Enrollment, protecting Medicaid beneficiaries from coverage loss during the COVID-19 pandemic.

March 31, 2023: End of Continuous Enrollment Provision

Starting April 1, 2023, states were allowed to begin the process of unwinding and resume normal operations including Medicaid eligibility redeterminations.

2020 2024

December 29, 2022: Consolidated Appropriations Act Signed

The Consolidated Appropriations Act set an end date for the Medicaid continuous enrollment provision.

April 1, 2023 – March 31, 2024: Initial Unwinding Period for Medicaid

The initial period slated for states to complete checking eligibility and determining which Medicaid beneficiaries still qualify for coverage.

THE CRISIS

Where are we now?

We are in a civil rights and health equity crisis.

Since pandemic protections ended on April 1, 2023, over 25 million Americans have been kicked off Medicaid.

Research shows almost half of those terminated re-enrolled in the Medicaid program. Another 28% found a new type of insurance, and nearly one-quarter remain uninsured. This upheaval in coverage led to the largest decline in enrollment in Medicaid's history. Medicaid now covers fourteen million fewer people than at the height of the public health emergency.

Americans cannot afford to go back. A loss in coverage caused many to worry about their mental and physical health. This see-saw crisis in healthcare access is unfair, unhealthy, and unjust.

- 69% of disenrolled people had their coverage terminated for "red tape" or procedural reasons like missing paperwork or system errors—not eligibility.
- Over **5 million children** had their coverage ended.
- **More than half of those** impacted by procedural disenrollments were likely from communities of color, given their representative share of those already on Medicaid.

The Medicaid redetermination process is broken and needs to be fixed.

Otherwise, healthcare inequities continue to harm Black and Brown communities and weaken the collective health of the nation.

Despite vast differences in states' performance, all procedural terminations should be stopped. Those wrongfully terminated and still eligible should be reconnected to care. The renewal process must be simplified to protect and save lives, especially among vulnerable populations. Changes to the system must include a transition to a paperless application in addition to the current process and reforms such as using available income tax records and participation in the Supplemental Nutrition Assistance Program (SNAP) to enroll eligible people automatically.

As community advocates, we demand that our policy leaders reset the Medicaid enrollment process. We must do better now.

THE SOLUTIONS

Here are key reforms to improve the Medicaid program and ensure an effective process for those who rely on it for access to care.

1. States must make it a priority to create people-friendly eligibility processes, including:

- Clearer notices and information updates
- · Websites that are easier to navigate and complete online applications
- · Call centers that are efficient, especially with reasonable wait times
- Limited English proficiency options for every step in the process

2. States must enact automatic, paperless renewal systems:

- Everyone eligible for Medicaid should automatically qualify based on income tax records and participation in the Supplemental Nutrition Assistance Program (SNAP) without requiring families to submit paperwork
- A paperless application should be used in addition to the current process and not as a substitute for it
- Trusted community partners should be given funding and access to online portals to help people complete forms for enrollment and renewal

Other key opportunities include:

- Hassle-free transitions between Medicaid, CHIP, and the ACA marketplace
- Longer continuous eligibility for children and adults to decrease the number of people who can lose coverage during the redetermination process
- Ending work requirements that tie Medicaid coverage to employment
- EXPAND MEDICAID

STATES THAT HAVE NOT EXPANDED MEDICAID

10 states—Alabama, Florida, Georgia, Kansas, Mississippi, South Carolina, Tennessee, Texas, Wisconsin, and Wyoming—have not expanded Medicaid eligibility under the Affordable Care Act to individuals with incomes up to 138% of the federal poverty level.

If the 10 remaining states expanded their Medicaid programs, more than **2.3 million people** in America would gain access to health coverage.



MESSAGING & TALKING POINTS

Medicaid is one of the major pathways that ensures all people have access to high-quality, affordable healthcare coverage.

- Healthcare is a fundamental right that should be accessible and affordable to everyone, regardless of their background.
- Access to healthcare is an American right that we must preserve.

Unfortunately, millions of people living in one of the richest countries in the world still don't have sufficient healthcare coverage or access to an affordable healthcare plan.

- The end of the COVID-19 Public Health Emergency left millions without the healthcare safety net they need to protect their health and well-being.
- It is our responsibility to fight for every Americans' access to an affordable healthcare plan.

Failure to expand Medicaid and address coverage gaps is disproportionately harming people of color, widening existing health disparities.

 This inaction has led to an equity crisis, where historically marginalized groups - specifically Black and Brown people - bear the brunt of healthcare disparities.

We urge policymakers to end all procedural Medicaid disenrollments and re-enroll those who have been wrongfully terminated.

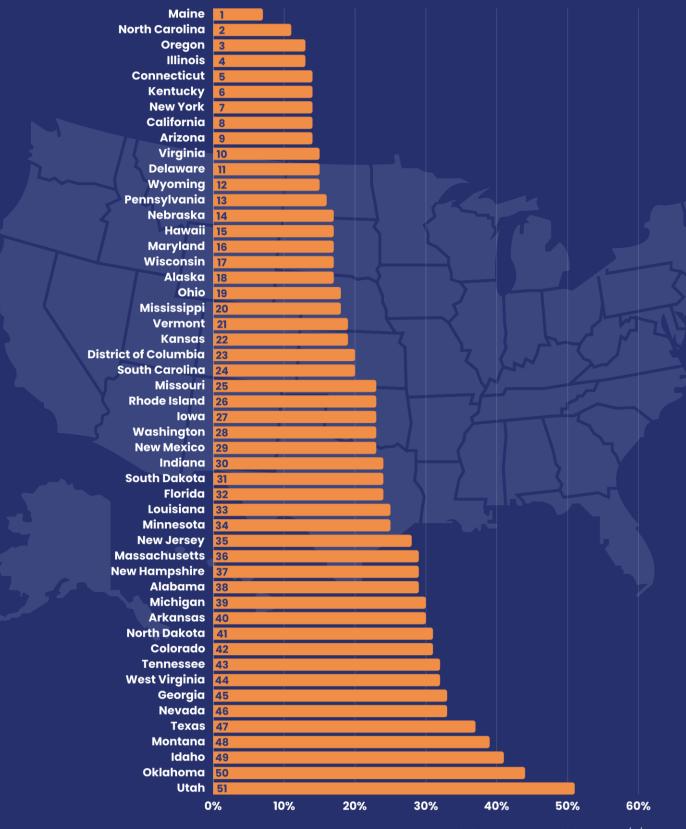
- No American who is eligible should lose coverage because of red tape and process.
- This lifesaving measure will ensure individuals who need Medicaid coverage have necessary access to a health provider and prescription medications.

All states, including the District of Columbia, need to establish a paperless renewal system in addition to their current process to eliminate high rates of procedural disensollment.

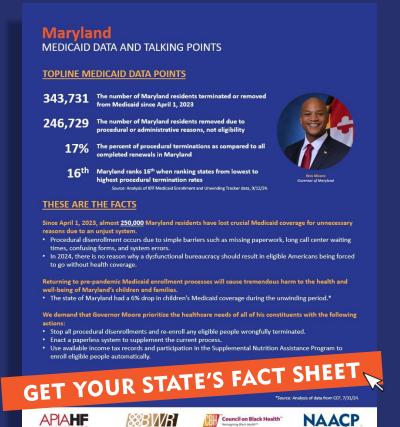
- The Medicaid program should use available income tax records and participation in the Supplemental Nutrition Assistance Program (SNAP) to enroll eligible people automatically.
- Both actions will help streamline the administrative process, reduce errors, and ensure continuity of care for Medicaid recipients.

HOW DID YOUR STATE RANK?

Procedural disenrollment rate by state, ranked from lowest (best-performing) **to highest** (worst-performing)



UNDERSTANDING YOUR STATE'S PERFORMANCE



NCNW

National
Urban League

State Medicaid Fact Sheets

View your state's topline Medicaid data, including:

- The number of residents terminated from coverage
- The number of residents removed due to procedural or administrative reasons, not eligibility
- The percentage of procedural terminations as compared to all completed renewals
- The rank when comparing states from lowest to highest procedural rate (bestperforming to worstperforming)

Familiarize yourself with statespecific talking points and the demands to reform the Medicaid enrollment process.

Download Now

UNIDOSUS

The Context • The Data • The Demands
For more information visit naacp.org/medicaid

THE CALL TO ACTION

Advocate to KEEP OUR FAMILIES COVERED in these 3 simple ways:

- <u>Urge your Governor</u> to **END** all procedural Medicaid disenrollments and **FIX** the broken enrollment system.
- Have you or a loved one lost Medicaid coverage since unwinding began? <u>Tell us your story</u>.
- Healthy communities need a healthy democracy.
 Visit the A Vote for Democracy hub to:
 - Register to vote/verify your voter registration status
 - Request an absentee ballot
 - View your state's voter guide
 - · Report voting incidents