

May 8, 2023

The Honorable Chuck Schumer Majority Leader U.S. Senate S-221 Capitol Bldg. Washington, D.C. 20510

The Honorable Kevin McCarthy Speaker U.S. House of Representatives H-232 Capitol Bldg. Washington, D.C. 20515 The Honorable Mitch McConnell Minority Leader U.S. Senate S-230 Capitol Bldg. Washington, D.C. 20510

The Honorable Hakeem Jefferies Minority Leader U.S. House of Representatives H-204 Capitol Bldg. Washington, D.C. 20515

RE: Medicaid Reforms Must Be Policy Driven, Not Budget Driven

Dear Majority Leader Schumer, Minority Leader McConnell, Speaker McCarthy, and Minority Leader Jefferies:

The members of the Partnership for Medicaid -- a nonpartisan, nationwide coalition of organizations representing clinicians, health care providers, safety net health plans and counties -- are writing about our concerns on legislation around the debt ceiling which could include broad-based work requirements as a mandatory condition for Medicaid eligibility.

Instead, we ask that Congress work together to build on the policies that have enhanced and expanded coverage for the individuals, children and families enrolled in Medicaid these last couple of years. We know that the bipartisan improvements that ensured continuous eligibility for the 44 million children in Medicaid and CHIP, the one year of postpartum coverage for mothers and babies, significant investments in Medicaid funding for the U.S. territories and the ability to coordinate the care of justice involved youth are significant and equitable steps forward for our health care system. The Partnership for Medicaid strongly supported these longstanding policies.

At the outset, it is important to note that the vast majority of Medicaid enrollees already work or face barriers to obtaining employment. According to the Kaiser Family Foundation (KFF), prior to the pandemic, the majority (63%) of non-dual (i.e., not also enrolled in Medicare), non-SSI, nonelderly Medicaid adults were already working full or part-time. Among those not working, most were not working due to caregiving (12%), illness or disability (10%), or school attendance (7%). Many of these reasons would likely qualify as exemptions from work requirement policies in most states, leaving just 7% of Medicaid adults (who reported that they were retired, unable to find work, or were not working for another reason). We also note that in their most recent estimates, KFF found that in 2024, 1.7 million Medicaid enrollees would not meet work or reporting requirements and potentially face disenrollment. Work requirements serve as an additional burden for enrollees and the state systems that must implement them.

Any Medicaid work requirement proposals arrive at a time when the program is "unwinding" from previous coverage expansions tied to covid-19 Public Health Emergency (PHE) declarations that could leave as many as 15 million low-income Americans without health insurance coverage. Our members are at the frontlines of any policies that could result in coverage loss for Medicaid beneficiaries. Our specific concern is that the Medicaid "unwinding" process required by the Consolidated Appropriations Act passed last year, combined with the work requirements under consideration will limit access to health services while producing a wave of uncompensated care straining the capacity of Medicaid safety net providers already dealing with severe workforce crises.

The Partnership has long supported thoughtful Medicaid policy reforms that will improve the program by producing both fiscal savings for states and the federal government along with better clinical results and support for beneficiaries. At the same time, for nearly two decades, the coalition has always maintained that Medicaid reforms should be driven by better programmatic outcomes.

The Partnership for Medicaid stands ready as a resource to engage in policy driven reforms to the Medicaid program, but strongly opposes budget driven changes that would limit eligibility and coverage and cause unintended harm to many beneficiaries.

Sincerely,

The Partnership for Medicaid http://www.partnershipformedicaid.org/