August 13, 2024

The Honorable Chuck Schumer Senate Majority Leader United States Senate Washington, DC 20510

The Honorable Ron Wyden Chairman Senate Committee on Finance Washington, DC 20510

The Honorable Mike Crapo Ranking Member Senate Committee on Finance Washington, DC 20510 The Honorable Mike Johnson Speaker of the House United States House of Representatives Washington, DC 20515

The Honorable Cathy McMorris Rodgers Chairwoman House Committee on Energy and Commerce Washington, DC 20515

The Honorable Frank Pallone Ranking Member House Committee on Energy and Commerce Washington, DC 20515

Dear Majority Leader Schumer, Speaker Johnson, Chairman Wyden, Chairwoman McMorris Rodgers, Ranking Member Crapo, and Ranking Member Pallone,

We, the undersigned organizations representing consumers, family members, providers, advocates, nonprofit and other health plans, and additional stakeholders, are committed to strengthening peoples' access to high-quality health coverage and care. We urge you to support 12-month continuous eligibility for adults in Medicaid and the Children's Health Insurance Program (CHIP) by passing the *Stabilize Medicaid and CHIP Coverage Act* (H.R. 5434 and S. 3138). We are grateful for your work in passing nationwide 12-month continuous eligibility for all children in Medicaid and CHIP through the *Consolidated Appropriations Act, 2023*. We urge you to continue this important work by supporting stable coverage for adults as well.

Medicaid and CHIP provide critical health coverage to more than 80 million Americans, including children, pregnant people, people with disabilities, low-income adults, and older adults. Together, these programs are a lifeline for millions of American families, covering more people than any other in the nation, and in particular serve as the <u>largest payer</u> for behavioral health care. Given the importance of Medicaid and CHIP, serious issues must be addressed to stabilize coverage for the people they serve. Collectively, we are concerned that millions of people in Medicaid and CHIP <u>lose their coverage</u> within a year – despite often still being eligible – only to re-enroll within a few months. This back and forth is known as "<u>eligibility churn</u>" and is caused by inefficient paperwork, overly burdensome reporting requirements, or temporary income fluctuations. Specifically for dually eligible beneficiaries who are jointly enrolled in Medicaid and Medicare, the <u>most common reason</u> for churn is due to challenges with complex redetermination requirements – not a change in income or eligibility.

During the COVID-19 pandemic, Medicaid enrollees were protected by the <u>continuous eligibility provision</u> built into the *Families First Coronavirus Relief Act's* funding increase to states, which temporarily halted eligibility churn for people with Medicaid. This policy yielded significant benefits to individuals with Medicaid, leading, for example, to more individuals <u>retaining coverage</u> during the postpartum period and

<u>reducing uninsurance</u> overall. As states have been "unwinding" the continuous eligibility provision over the past year and a half, enrollees are once again facing eligibility churn.

Even a small gap in coverage can have catastrophic effects on an individual's access to care and health outcomes; we know that interruptions in coverage worsen health outcomes and lead to avoidable hospitalizations or emergency room care for mental health disorders, asthma, and diabetes. Coverage gaps also raise the average monthly cost associated with covering a Medicaid enrollee and result in higher avoidable administrative costs for states, health care providers, and health plans. Typically, an adult on Medicaid is covered for less than 12 months of the year; non-elderly, non-disabled adults are only covered for about 8.6 months in a given year, while older adults and enrollees with disabilities are covered for about 10 months. Research demonstrates that low-income individuals experiencing income volatility and the resulting loss of Medicaid eligibility do not transition to other forms of insurance, such as Marketplace or employer-sponsored coverage, and instead become uninsured. Further, studies show that communities of color are the most likely to experience income volatility each year, and therefore most likely to experience short periods of uninsurance before churning once again onto Medicaid.

A nationwide policy of 12-month continuous eligibility for all adults in Medicaid and CHIP will allow for continuous and stable enrollment and for these programs to operate more like private coverage and Medicare. Stability in Medicaid and CHIP coverage will reduce bureaucracy for states that currently conduct repeated eligibility determinations for enrollees, and will relieve excessive burden on providers that strive to ensure their patients retain coverage and access to care. It will also help health providers and plans more readily maintain continuity of care management, which is vital to keeping individuals healthier, and ensure that provider panels remain more accurate. Continuous eligibility for adults protects children too, by aligning children's and parents' coverage while reducing administrative burden, financial stress, and medical debt for families. In fact, recent research found that households would save \$1 billion in health care costs if 12-month continuous eligibility were enacted for adults.

Support for continuous eligibility continues to grow. While 12-month continuous eligibility for children is a nationwide policy as of January 2024, states have to go through the lengthy process of submitting a Section 1115 waiver to provide the same policy for adults. Despite this hurdle, five states provide 12-month continuous eligibility to all or some adults, and more states are pursuing the policy. States are also using their Section 1115 waiver authority to provide multi-year continuous eligibility to children, and the Biden Administration included a state option for such a policy in its Budget Proposal for Fiscal Year 2025. Further, the recently finalized Streamlining Eligibility and Enrollment final rule makes good progress in making it easier for enrollees to retain their Medicaid and CHIP coverage.

Together, we ask Congress to build on this momentum by supporting and passing 12-month continuous eligibility for adults through the Stabilize Medicaid and CHIP Coverage Act (H.R. 5434 and S. 3138) to improve coverage and access to care for millions of Americans.

Sincerely,

National

ACA Consumer Advocacy

Academy of Managed Care Pharmacy

Advocates for Community Health

AFL-CIO

AFT: Education, Healthcare, Public Services

Alliance of Community Health Plans

American Academy of Family Physicians

American Association on Health and Disability

American College of Osteopathic Family Physicians

American Foundation for Suicide Prevention

American Kidney Fund

American Muslim Health Professionals

American Occupational Therapy Association

American Public Health Association

America's Essential Hospitals

America's Physician Groups

Allergy & Asthma Network

Appleseed Foundation

Association for Community Affiliated Plans

Autistic Women & Nonbinary Network

CareQuest Institute for Oral Health

Catholic Health Association of the United States

Center for Health and Democracy

Center for Popular Democracy

Committee to Protect Health Care

Community Care Cooperative

Community Catalyst

Community Oriented Correctional Health Services

Conscious Talk Radio Converging Health **Coordinated Transportation Solutions** Corporation for Supportive Housing **Doctors for America DRG Claims Management Elephant Circle Epilepsy Foundation** Families USA First Focus Campaign for Children GO2 for Lung Cancer Health Care for America Now (HCAN) **Health Care Voices** HealthTeamWorks **HIV Medicine Association** Hydrocephalus Association Institute for Public Health Innovation Justice in Aging Lakeshore Foundation Leukemia & Lymphoma Society Lupus and Allied Diseases Association, Inc. Lutheran Services of America March for Moms **MAVEN Project** MomsRising

NASTAD

National Alliance on Mental Illness

Monroe Plan for Medical Care Inc.

National Association on Mental Illness

National Association of Councils on Developmental Disabilities

National Association of Dental Plans

National Association for Social Workers

National Center for Medical-Legal Partnership

National Committee to Preserve Social Security and Medicare

National Consumer Law Center

National Health Care for the Homeless Council

National Health Council

National Health Law Program

National Hispanic Health Foundation

National Immigration Law Center

National League for Nursing

National Partnership for Women & Families

NCQA, National Committee for Quality Assurance

Nest Health

Pair Team

Planned Parenthood Federation of America

Population Health Alliance

Prevent Blindness

Primary Care Collaborative

Primary Care Development Corporation

Qual-IT Strategies

Society for Social Work Leadership in Health Care

Small Business Majority

Treatment Action Group

Triage Center

Trinity Health

The Arc of the United States

The Coalition to End Social Isolation & Loneliness

The National Alliance to Advance Adolescent Health

Toney Healthcare

UnidosUS

Upstream USA

WelbeHealth, LLC

Young Invincibles

Arizona

Banner University Family Care

California

Alameda Alliance for Health

Asian Resources, Inc.

Brighter Beginnings

California Immigrant Policy Center

CalOptima Health

Dientes Community Dental Care

Health Access CA

Health Plan of San Joaquin

Health Plan of San Mateo

Inland Empire Health Plan

Insure the Uninsured Project

Kern Health Systems

L.A. Care Health Plan

Local Health Plans of California

Maternal and Child Health Access

Partnership HealthPlan of California

Santa Clara Family Health Plan

Colorado Colorado Access Colorado Consumer Health Initiative Connecticut Health Equity Solutions

Delaware

Chistian Council of Delmarva

Hawaii

AlohaCare

KKV

Illinois

AgeOptions

CountyCare/Cook County Health

EverThrive Illinois

Health & Medicine Policy Research Group

Shriver Center on Poverty Law

Indiana

Clear Healthcare Advocacy

Covering Kids & Families of Indiana

Kansas

Alliance for a Healthy Kansas

Kentucky

Kentucky Equal Justice Center

Kentucky Voices for Health

Maine

Consumers for Affordable Health Care

Maine Center for Economic Policy

Maryland

High Note Consulting, LLC

Maryland Citizens' Health Initiative

Maryland Community Health System

Patient Precision

Primary Care Coalition of Montgomery County MD Inc.

Massachusetts

Disability Policy Consortium

Fallon Health

Personal Disability Consulting

Michigan

Blue Cross Blue Shield of Michigan

Detroit Parent Network/Mothering Justice

Michigan Association of Health Plans

Michigan League for Public Policy

Minnesota

Hennepin Health

Minnesota Association of County Health Plans

Mid-Minnesota Legal Aid / Legal Services Advocacy Minnesota Budget Project

South Country Health Alliance

Mississippi

Mississippi Center for Justice

Missouri

Missouri Appleseed

Nebraska

Nebraska Appleseed

Nevada

Children's Advocacy Alliance of Nevada

New Jersey

Camden Coalition

Family Voices NJ @ SPAN Parent Advocacy Network

New Jersey Appleseed Public Interest Law Center

New Jersey Association of Mental Health & Addiction Agencies, Inc.

Oral Health Coalition

SPAN Parent Advocacy Network

New York

Amida Care

Center for Elder Law & Justice

Elderplan Inc.

Metro New York Health Care for All

United Hospital Fund of New York

North Carolina

Charlotte Center for Legal Advocacy

Vaya Health

Ohio

Ohio Federation for Health Equity and Social Justice

Oklahoma

Oklahoma Policy Institute

Take Control Initiative

Oregon

Care Oregon

Health Share of Oregon

Micronesian Islander Community

Pennsylvania

Geisinger Health Plan

PA Coalition for Oral Health

Rhode Island

Neighborhood Health Plan of Rhode Island

Protect Our Healthcare Coalition Rhode Island

South Carolina

South Carolina Appleseed Legal Justice Center

Transgender Awareness Alliance

El Paso Health
Valley AIDS Council
Utah
Voices for Utah Children
Vermont
Office of the Health Care Advocate – VT Legal Aid
Voices for Vermont's Children
Virginia
Sentara Health
Washington
Community Health Plan of Washington
Washington, DC
Rebuilding Independence My Style
West Virginia
West Virginians for Affordable Healthcare

Tennessee

Texas

Wisconsin

Tennessee Justice Center

TN Health Care Campaign

Chorus Community Health Plans

Common Ground Healthcare Cooperative

Wyoming

Health Wyoming