

# **MEDICAID'S CAPACITY AS A SAFETY NET PROGRAM**

## **LESSONS FROM THE COVID-19 PUBLIC HEALTH EMERGENCY**

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[HTTPS://CPH.UKY.EDU/DEPARTMENTS/HEALTH-MANAGEMENT-POLICY](https://CPH.UKY.EDU/DEPARTMENTS/HEALTH-MANAGEMENT-POLICY)

# THE MEDICAID POPULATION

Although a health insurance program for the '**poor**,' Medicaid has important role beyond core population

- Benefits of Medicaid generally known for *chronically poor* population
- Continuing to learn more about Medicaid's role for people outside traditional Medicaid Population
- Expansions in eligibility guidelines allow for estimating the effects of Medicaid coverage and generating new insights about coverage gains among the poor
- Unexpected job loss (unemployment) associated with spells of unanticipated financial hardship and short-term transitions into poverty
- Broader use among Medicaid as a safety net program where function is similar and complementary to unemployment insurance
  - *Unemployment insurance stabilizes household financing following job loss*
  - *Medicaid could stabilize health care access following job loss*

# ROLE FOR MEDICAID IN ABSENCE OF EMPLOYER-SPONSORED HEALTH INSURANCE

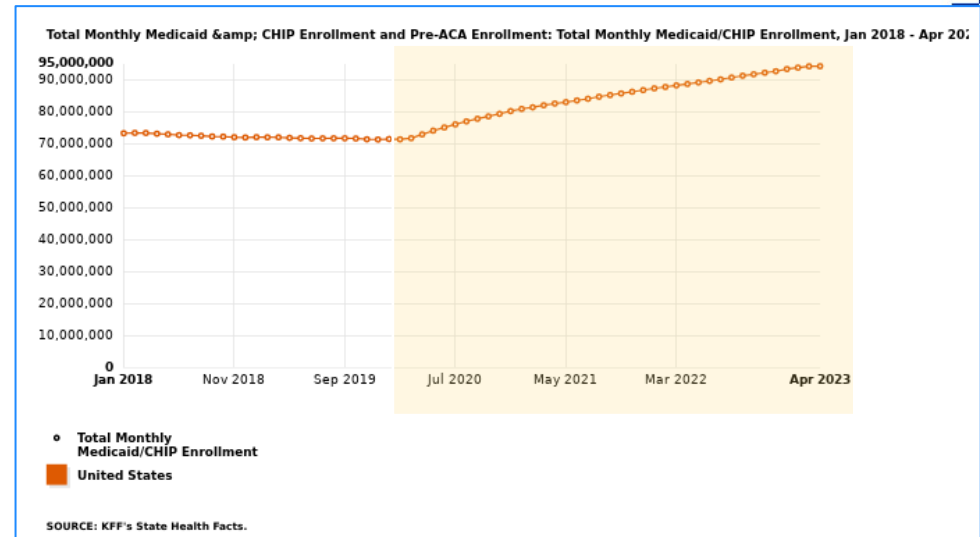
**2 in 3 Americans have private health insurance coverage--over half (54%) of all Americans receive coverage through employer-sponsored benefits in 2021.**

- Becoming unemployed can result in becoming uninsured, coverage loss due to joblessness or work instability can result in:
  - Limited access to health care
  - Declines in physical and mental health
  - Financial risks of trading off between maintaining household expenses with health care expenses or incurring medical debt
    - Can be larger risks for households with underlying medical needs (e.g., chronic conditions or prescription therapies)
- Healthcare access vulnerable during economic downturns or household financial uncertainty when coverage is coupled with work status

# MEDICAID ENROLLMENT DURING THE COVID-19 PUBLIC HEALTH EMERGENCY

Medicaid enrollment 94.1M as of April 2023

- Up 31% from 71.6M in February 2020 (just prior to PHE's onset)
- Enrollment #s reflect official totals provided to CMS from the states
  - New enrollees
  - Pre-PHE enrollees that were allowed to continuously enroll because of



# MEDICAID ENROLLMENT AND POTENTIAL BENEFITS FOR NEWLY UNEMPLOYED

**'... I was UNEMPLOYED with NO MEDICAL INSURANCE...** I suspected that I have [COVID-19] as I was very ill and having difficulty breathing. The Emergency room doctor here ran extremely expensive test[s], most of which were unnecessary... **Thousands of dollars I have been charged just to go to the emergency room to make sure I did not have COVID. ... Now they have turned me over to a collection agency...** I have this showing up on my credit bureaus which is **crippling to me as I start to try to rebuild my life after a year of very little employment.** I cannot rent an apartment or get a car loan.'

Consumer Financial Protection Bureau. "Complaint 4389089." Consumer Financial Protection Bureau -- Consumer Complaint Database. Published May 19, 2021. Accessed April 23, 2023.  
<https://www.consumerfinance.gov/data-research/consumer-complaints/>



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**Susan B. was employed by the same business for 21 years, but was let go from her job early during the COVID-19.** Almost instantly, should could not afford the medicines she **needed** to control her blood pressure and kidney disease.

- *"I am so grateful Medicaid was there when I really needed it," .... "It's literally saving my life."*

After the 2007-2009 Great Recession, **Linda Y—a cancer survivor—became routinely underemployed.** Soon afterwards, her husband became unemployed thus losing **coverage benefits from his employer.** After Medicaid expanded in her state, she was then able to resume accessing critically needed care.

- *"Medicaid really provides such a baseline for society," .... "It maintained my health so I was able to continue working."*



After **Gail B. was diagnosed with treatable breast cancer at 47, she lost her job and employer-sponsored coverage.** With support from the Illinois Breast and Cervical Cancer Program, she was able to get the remainder of her treatments financed through Medicaid coverage:

- *"Fortunately I wasn't on Medicaid long," .... "But when I really needed it, it was there for me. It supported me through a time of crisis."*

# MEDICAID ENROLLMENT AND POTENTIAL BENEFITS FOR NEWLY UNEMPLOYED

## SIMILARITIES TO UNEMPLOYMENT INSURANCE

### Coverage stability

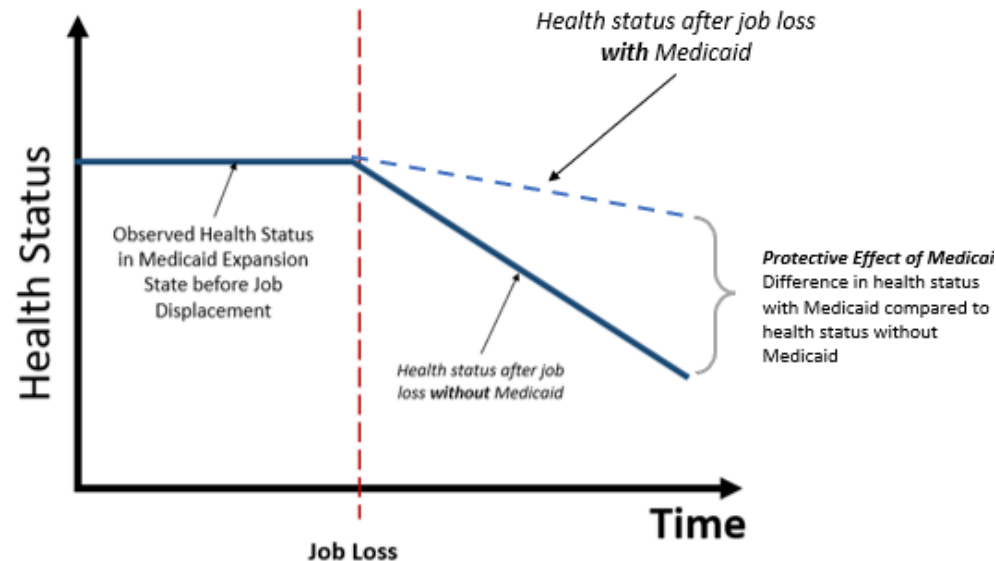
- Lower incidence of uninsurance following job loss
- Shorter gaps without coverage

### Continuity in healthcare access

- Maintain chronic condition management
- Prescription drug fills/refills

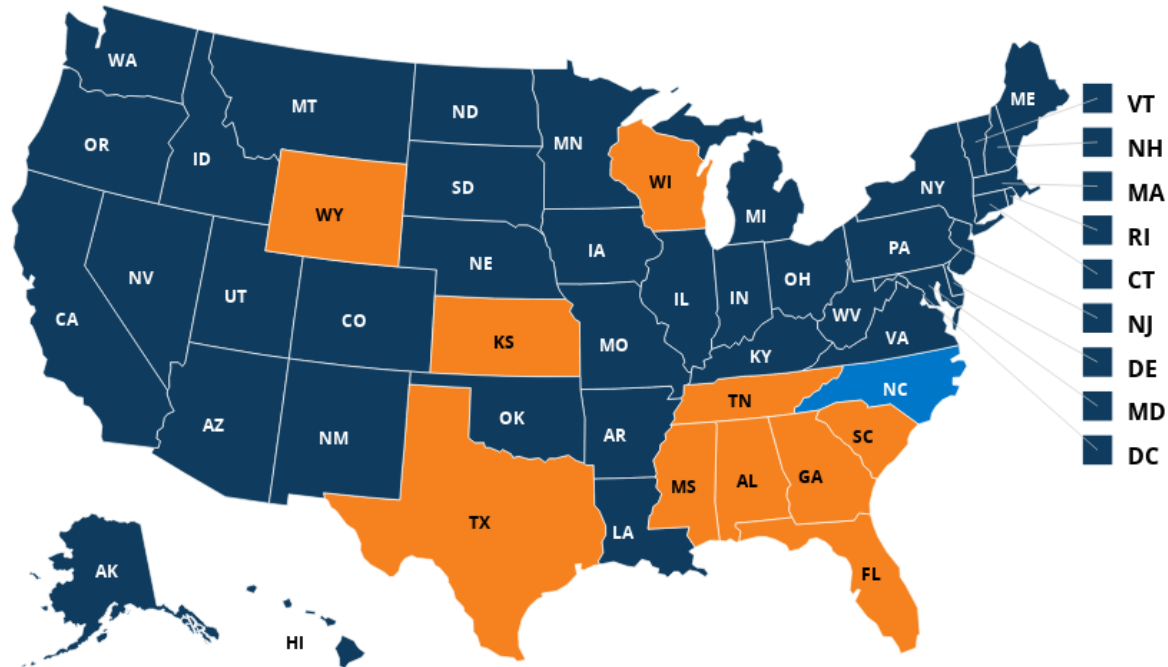
### Protection from OOP burden

- Lower likelihood of delay/forgo medical need due to cost (i.e., because of coverage and income loss)
- Lower likelihood of medical debt



# EXPANDED MEDICAID ELIGIBILITY FACILITATES MORE ENROLLMENTS AMONG THE UNEMPLOYED

Status of State Action on the Medicaid Expansion Decision



■ Adopted and Implemented ■ Adopted but Not Implemented ■ Not Adopted

SOURCE: KFF, kff.org



# EXPANDED MEDICAID ELIGIBILITY FACILITATES MORE ENROLLMENTS AMONG THE UNEMPLOYED

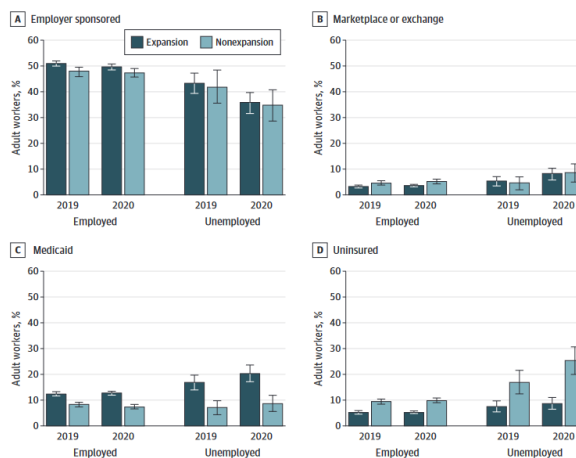
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Original Investigation

## Comparison of Unemployment-Related Health Insurance Coverage Changes in Medicaid Expansion vs Nonexpansion States During the COVID-19 Pandemic

Joseph Benitez, PhD

Figure 2. Health Insurance Coverage Levels by State Medicaid Expansion Status and 2020 Employment Status



JAMA Health Forum. 2022;3(6):e221632. doi:10.1001/jamahealthforum.2022.1632

DATAWATCH COVID-19

HEALTH AFFAIRS > VOL. 42, NO. 5: MARKETS, PAYMENTS & MORE

## Changes In Health Coverage During The COVID-19 Pandemic

Paul D. Jacobs and Asako S. Moriya

AFFILIATIONS

PUBLISHED: MAY 2023

https://doi.org/10.1377/hlthaff.2022.01469

### Abstract

The COVID-19 pandemic had the US. Using data from the Med of Medicaid coverage for children pandemic. Fewer people who had than in 2018–19 (7.8 percent).



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## Medicaid Enrollment among the Unemployed During the COVID-19 Pandemic and Beyond

Joseph Benitez, Elizabeth Williams, and Robin Rudowitz

Published: Dec 13, 2022



## Health Insurance, Labor Market Shocks, and Mental Health During the First Year of the COVID-19 Crisis ☆

Sanders Korenman, Rosemary T. Hyson

DOI: 10.1111/1475-6773.14029

RESEARCH ARTICLE

HSR Health Services Research

## COVID-19-related Medicaid enrollment in Medicaid expansion and non-expansion states

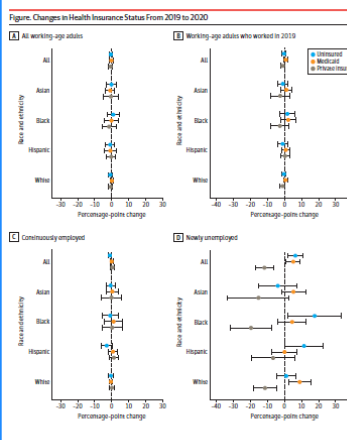
Joseph A. Benitez PhD<sup>1</sup> | Lisa Dubay PhD<sup>2</sup>

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Research Letter

## Racial and Ethnic Differences in Insurance Outcomes After Job Loss During the First Year of the COVID-19 Pandemic

Zhanji Zhang, MSc; José J. Escarce, MD, PhD; Dennis Rüniger, PhD; James Campbell, BA; Peter J. Huckfeldt, PhD



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# REMAINING CONSIDERATIONS FOR MEDICAID POLICY

- Medicaid 'population' is dynamic; still much to know about the sub-population of non-traditional or **non-core** Medicaid enrollees
- Unemployment is at all-time low, but employment stability among non-core Medicaid population is uncertain
  - Constitutes Medicaid's safety net population
  - New insights on Medicaid's role as a household stabilizer (~unemployment insurance)
  - Impacts of other policy levers shaping Medicaid take-up and disenrollment
- Impacts of unwinding COVID-19 PHE policies on non-core Medicaid population
  - Coverage status and access to alternative coverage sources among disenrolled
  - Persons with Long-COVID complications still on Medicaid



# THANK YOU!

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