July 2, 2020

Dear Gov. Edwards:

The undersigned community, nonprofit and healthcare organizations representing tens of thousands of Louisianans, urgently request you to veto harmful language in House Bill 1 about the administration of the state’s Medicaid program. Specifically, we request a line-item veto of lines 23 - 53 on Page 70 and lines 1 - 3 on Page 71 (Reengrossed version).

As passed by the Legislature, House Bill 1 requires the Louisiana Department of Health to institute new and costly eligibility checks on Medicaid patients. This policy change is unnecessary and would consume scarce resources that would be better used to provide healthcare services as the state combats Covid-19. We know that the impact of the COVID-19 pandemic, including massive health and economic challenges, will remain even after the officially declared public health emergency ends. Now is not the time to ensnare our citizens in bureaucratic processes. (See Louisiana Medicaid enrollment dips again, continuing months-long slide by Sam Karlin: “Those people have 10 days to provide information proving they do qualify”).

The proposed eligibility checks are unnecessary and redundant. Frequent eligibility checks increase the likelihood that eligible Medicaid recipients become uninsured due to administrative processes. This runs counter to policy goals focused on expanding access to care and efficient use of resources.
The proposed annual eligibility checks would cause administrative costs to soar with little to no savings. The use of federal tax data is rightfully highly restricted and would require expensive changes to physical office space and screening, hiring and training additional personnel. The Louisiana Department of Health has estimated that it would cost $42 million to comply with this mandate.

Creating barriers to health care coverage is dangerous. When an eligibility check is conducted, any discrepancy, which could simply be from outdated data, triggers a required response from the patient. This policy would create a high burden on patients. In addition to having irregular work hours, many Medicaid patients move frequently and lack access to a personal computer or fax machine. This leads to eligible people being kicked off the program because they don’t receive the notice or aren’t able to respond in time.

Consider for a moment, a woman with breast cancer going to receive a needed chemotherapy treatment. Or another Louisianan with heart disease who has to have emergency surgery after a heart attack. Or a woman covered under Medicaid expansion in need of critical care after 60 days postpartum. And then think about the compounding stress of their health insurance card being denied because they missed a notice in the mail.

We do understand that at times, people transition away from Medicaid. This is a good thing. However, the transition should be orderly and efficient, providing continuity of coverage and care. When people exceed the income threshold for Medicaid, they should be connected to the healthcare.gov exchange or other sources of coverage and there should be robust communication of the change.

Your decision to expand Medicaid has been transformative for Louisiana, and has been absolutely critical for hundreds of thousands of people during this pandemic. When we eventually begin to emerge from the pandemic, we hope to continue working with you to move the state forward towards increased access to health insurance coverage and improved health outcomes. The language in House Bill 1 diverts us from those goals. We strongly urge you to use your line-item veto authority to excise these provisions from the budget.

Respectfully,

504HealthNet
American Cancer Society Cancer Action Network
League of Women Voters Louisiana
Louisiana Budget Project
Louisiana Partnership for Children and Families
Louisiana Primary Care Association
March of Dimes
National Birth Equity Collaborative
Power Coalition for Equity and Justice
United Way of Southeast Louisiana
Volunteers of America Southeast Louisiana