Reducing the Texas Uninsured Population
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We envision a Texas where people of all backgrounds can fulfill their potential and contribute to our community.
Three top ways to reduce Texas’ 5 million uninsured

1. Accept billions in federal funds to provide Medicaid to “working but poor” adults: both parents and adults without any dependent kids at home.

2. Remove barriers to enrollment/renewal of *currently eligible* individuals in Texas Medicaid.

1. Cover working but poor adults in Medicaid

- Can be simple change to Texas program rules, or through an “1115 waiver”
  - 1115 waiver approach allows variations, within fed guidelines, 7 states currently
- Could cover 1.4 million uninsured adults (< 138% FPL), ~771,000 below poverty
- 90:10 (fed:state) match,
  - Plus bonus federal funding under ARPA (estd. $3.5-$6 billion)
  - Texas-based studies (2020-2021) project that extending coverage will actually save money for the state budget, or at worst have only a trivial cost (less than $2 per person per year).
  - Multiple studies can be found at the Episcopal Health Foundation’s website, and the Texas 2036 website includes their estimates of the positive fiscal impacts of Medicaid expansion.
- Possibility of a federal/congressional option (Marketplace coverage) is under consideration
Who Are Uninsured Adults Who Would Become Eligible for Medicaid if Texas Expanded?

Nearly 8 in 10 are in a family with at least one worker.

- Full-time: 60%
- Part-time only: 18%
- No workers: 22%

More than 7 in 10 are adults living below poverty.

- Below Poverty: 71%
- 100%-138% FPL: 29%

3 in 4 are people of color.

- Hispanic: 58%
- Black: 13%
- White: 25%
- Other: 4%

More than 1 in 3 are middle-aged and 13% are near-elderly, who are more likely to have substantial health needs.

- 55-64: 13%
- 35-54: 36%
- 25-34: 27%
- 19-24: 24%

761,300 females

More than half are female even though many females qualify for Medicaid as caregiver parents.
Status of State Medicaid Expansion Decisions

NOTES: Current status for each state is based on KFF tracking and analysis of state activity. See link below for additional state-specific notes.
2. Remove barriers to enrollment/renewal of currently eligible individuals in Texas Medicaid

At least 400,000 uninsured Texas children were eligible in 2019 for Medicaid or CHIP, but not enrolled.¹ Texas can remove barriers to enrollment by:

Adequately staffing its eligibility system and pursuing efficiencies through automation and use of reliable data sources

Addressing barriers for families that make it challenging to get or stay enrolled.

HHSC is facing severe shortages of eligibility workers, leading to long delays for Medicaid and SNAP

Despite substantial effort by HHSC, the eligibility system is severely understaffed:

• 1,000+ vacant eligibility worker positions, Feb 2022 (NPR)
• Backlog of 333K SNAP applications in mid-July (WFAA)
• HHSC has not met Medicaid timeliness goals for most of 2022. Only 62% of Medicaid applications were processed timely (45 days) in July 2022 (HHSC).
• 2-1-1 option 2 (state contractor: MAXIMUS) hold times are long; calls too often drop.
Texans must navigate a complex process and systems to get or stay enrolled

The primary doorways to Medicaid have many roadblocks

- Need user name and password
- Challenge to reset passwords
- Need “full case access” for basic tasks; challenge to get

Texas who have issues with YTB are funneled to 2-1-1

Website & App

Option 2 (MAXIMUS)

- Long hold time
- Calls drop
- Closed on evenings and weekends
Texas risks a substantial increase in uninsured yet eligible Texans – primarily children – due to procedural issues; not because they were found ineligible.

Barriers will be exacerbated at the end of the Public Health Emergency

Challenges:
- Understaffed eligibility system despite HHSC efforts
- Short unwinding period (TX is among only 8 states taking less than 12 months)
- Unprecedented scope of work
- TX is among 6 states where eligible children are most at risk of losing coverage (Georgetown CCF)
- TX is one of least successful states in utilizing data-driven renewals
- Renewal notices generally mailed, and HHSC does not have updated addresses for many clients.
- Community-based enrollment assisters not fully leveraged/equipped
- YTB and 211 barriers

See 10-organization letter to HHSC, March 2022
Rebuild adequate staffing of the eligibility system:

- Both state eligibility workers and 2-1-1 option 2 (state contractor) capacity

Increase efficiencies through automation and use of reliable data sources while maintaining program integrity:

- Boost rate of data-driven renewals (Arizona is at 75+. Texas is at just 7% (12/2021) one of the worst rates in the nation).
- Fully leverage reliable Texas Workforce Commission income data.
- Seek temporary waiver to renew Medicaid using verified SNAP data
- Use updated address information from USPS and MCOs
Solutions: Remove Barriers to Enrollment

Modernize Your Texas Benefits Website/App
• Make it easy for Texans to complete critical steps that should be simple: updating your address, resetting a password, getting access to your case on the app.

Provide robust support for mixed-status families
• Affects 1 in 4 Texas kids.

Maximize use of all enrollment partners/extenders in the system
• Ensure tools and policies let health centers, food banks, hospitals, community organizations, and MCOs assist clients, without having to funnel clients back to 2-1-1.
3. Maintain record-breaking enrollment at HealthCare.Gov. (Texas is poised to do so)

- 2022 enrollment grew 42% in Texas – the largest increase in the nation.
- Driven by more affordable coverage and big investments in enrollment assistance and marketing.

Source: CMS Open Enrollment Snapshots
3. Maintain record-breaking enrollment at HealthCare.Gov. (Texas is poised to do so)

- Congress appears poised to extend enhanced Marketplace subsidies for 3 years (through 2025), which have driven record enrollment.

- A fix for the “family glitch” later this year will make more Texans in working families eligible for affordable coverage.

- SB 1296 from 2021 (Sen. Johnson/Chairman Oliverson) will make 2023 coverage at HealthCare.Gov more affordable.
Background slides
Texas Families are Facing Long Delays Getting SNAP Food Assistance

Source: HHSC
Texas Families are Facing Long Delays Getting Medicaid

Percentage of Medicaid Applications and Redeterminations Disposed Timely (45 days) January 2020 to current

Source: HHSC
Most of the 5 Million Uninsured Texans are Eligible for HealthCare.Gov Subsidies or Medicaid

Coverage Eligibility of Texas Uninsured Population
2019 Texas uninsured population, using increased Marketplace subsidy eligibility for 2021-22

Ineligible today
- Ineligible: Immigration status
  - 771,000, 15%
- No subsidy: over income
  - 733,000, 14%
- No subsidy: offer of job-based coverage. “Family glitch” fix expected for 2023 will help some
  - 635,000, 13%
- Ineligible: offer of job-based coverage
  - 171,000, 3%

Eligible today
- Medicaid/CHIP (mostly)
  - 662,000, 13%
- HealthCare.Gov subsidies
  - 2,169,000, 42%

Affordable Coverage at HealthCare.Gov, 2022

- 94% of Marketplace consumers in Texas got premium subsidies
- 61% also got “cost sharing reductions” (lower deductibles/copays)
- 38% of Marketplace consumers in Texas paid $10 or less/month after subsidy
- $60 per month Average premium paid by Texans who received a subsidy

CMS, Open Enrollment Public Use Files