Resolution: 103
(A-18)

Introduced by: New York
Subject: Oppose Medicaid Eligibility Lockout
Referred to: Reference Committee A
(Jonathan D. Leffert, MD, Chair)

Whereas, Many national health leaders such as the HHS Secretary and the Surgeon General hail from Indiana, it may be instructive to observe Indiana health initiatives; and

Whereas, Indiana’s new Medicaid waiver includes a lock-out provision whereby eligibles who fail to promptly complete the state’s periodic eligibility redetermination can no longer simply reapply for benefits and instead remain ‘locked out’ for three months; and

Whereas, Indiana officials estimate half of people who fail to satisfy the redetermination process remain eligible; and

Whereas, This rule forces people to do without coverage for missing a paperwork deadline; and

Whereas, This rule will result in discontinuation of health care delivery for thousands of our most vulnerable citizens including children and the elderly; therefore be it

RESOLVED, That our American Medical Association oppose ‘lock-out’ provisions that exclude Medicaid eligible persons for lengthy periods merely for failing to meet paperwork burdens or deadlines and support provisions that permit them to reapply immediately for redetermination. (New HOD Policy)

Fiscal Note: Not yet determined

Received: 04/25/18

RELEVANT AMA POLICY

Medicaid - Towards Reforming the Program H-290.997
Our AMA believes that greater equity should be provided in the Medicaid program, through adoption of the following principles:
(1) the creation of basic national standards of uniform eligibility for all persons below poverty level income (adjusted by state per capita income factors);
(2) the creation of basic national standards of uniform minimum adequate benefits;
(3) the elimination of the existing categorical requirements;
(4) the creation of adequate payment levels to assure broad access to care; and
(5) establishment of national standards that result in uniform eligibility, benefits and adequate payment mechanisms for services across jurisdictions.