

MAKE HEALTHCARE WORK FOR YOU!

Understanding Medicaid Managed Care Plans

You have choices!



- You can change your primary care doctor at any time.
- You can change your plan at any time. You can choose from multiple plans.
- You do not need a referral for vision, dental, OB/GYN, or family planning providers.
- Plans must give you a choice of doctors and specialists.

You have rights!



- Anything medically necessary must be covered.
- Your plan must respond in 24 hours to urgent issues.
- Doctors must see you within 60 mins. of your appointment.
- You should not need to wait longer than 21 days for your first appointment.
- Your plan's member services must assist you in navigating your care.

You have responsibilities!



- You must choose a plan and doctor when you get your benefits.
- Cancel appointments or rides 48 hours in advance.
- Check out the extra benefits each plan offers.
- Call member services and the special needs unit if you are having a problem.

Work Requirement Exemptions are Not Protections

When examining the impact of Work Requirements for families and individuals that rely on Medicaid, supporters often point to exemptions, which supposedly protect beneficiaries in certain categories - people with disabilities, seniors, people with serious illnesses, and people suffering from substance use disorder, for example-- as a way of protecting vulnerable populations from losing their coverage.

Exemptions typically fail to protect these populations. Here are some reasons why people are likely to lose coverage despite falling under an "exempt" category:



Paperwork problems: work requirements lead to drastically increased paperwork, and with it folks who miss deadlines, lack proper documentation, don't know how to file paperwork, have limited access to a computer or copier, find out about deadlines with only short windows to apply, and have paperwork lost in the mail, among other problems.



System delays and backlogs: the increased strain on the system caused by an increase in paperwork and filing deadlines will lead to delays in processing documentation and longer timelines on decisions.



Strict criteria: people who fall into categories such as "disabled" or "seriously ill" must meet strict criteria that define these categories. Many will be wrongfully left out.

In fact, studies of the impact of work requirements in other safety net programs have found that people with disabilities, serious illnesses, and substance use disorders are actually disproportionately likely to lose benefits even when they should be exempt.

Source: CBPP

Find the report: www.cbpp.org/research/health/medicaid-work-requirements-will-harm-families-including-workers

MEET JODIE OF OAKDALE, PA

As a hardworking single mom of 4 who struggles to pay the bills on her part-time job as a cafeteria aide, Jodie is very concerned about the impact of Medicaid Work Requirements on her family. Jodie took her current job thanks to its better pay and opportunities for advancement as compared to the fast-food job she was previously working. It also allows her to pick up her children from school, take them to doctor's appointments, and keep up with her family responsibilities. Her part-time hours, however, wouldn't meet the minimum requirements established by HB 2138.

Jodie knows how hard it can be to get her paperwork done right. Last year, after receiving a notification to submit documents to SNAP only a week before it was due, she struggled to use the online application from her daughter's phone (she has no computer), and was temporarily cut off from the SNAP benefits her family relies on to get the food they need. Because she suffers from several chronic conditions, losing access to health insurance through Medicaid isn't an option for her, even temporarily.

HB 2138: Overview

House Bill 2138 was introduced in March and passed the House in April. The bill would impose cumbersome new requirements on families and individuals who rely on Medicaid for health coverage. Key provisions of the bill include:

- **Work Requirement:** all non-elderly, non-disabled, working age adults who are not pregnant, or in-school would be required to work 20 hours a week, complete a job search verified by the department, or complete 12 job training program-related activities a month.
- **Lockout Periods:** those who do not comply with the work requirements would be locked out of Medicaid for three, six, or nine months.
- **Biannual Redeterminations:** all non-elderly non-disabled working age adults would need to prove their situation every 6-months instead of the current 12-months.
- **Eligibility Bans:** if someone fails to comply with the biannual redeterminations, or exceeds the three lockout periods, the law would ban an individual from enrolling in Medicaid.

Those who are: attending high school, currently receiving temporary or permanent long-term disability benefits, younger than 20, older than 65, pregnant, receiving Supplemental Security Income (SSI) benefits, or residing in a mental health or correctional institution are technically exempt from the law. This is only a temporary exemption, however, and people would be forced to continually prove they need the exemption. This will result in people who should be exempt losing their coverage. In fact, studies of other safety net programs that have imposed work requirements have shown that people with disabilities, serious illness, and substance use disorders are disproportionately likely to be impacted. (Source: CBPP)

Why Oppose HB 2138 & Medicaid Work Requirements?



Program Costs: Implementing work requirements is projected to cost over \$700 million in start-up costs and at least 300 new workers. Over the course of six years, the program will cost taxpayers \$3.4 billion.



Tens of Thousands Will Lose Coverage: Work requirements are billed as a way to help people find jobs, but that's simply not true. This bill does nothing to help people find or keep good jobs; an estimated 85,000 will lose their health coverage, making it harder for them to find work in the future.



New Red Tape & Paperwork: An increase in paperwork and filing deadlines will necessitate the creation of new bureaucracy to administer the program, leading to increased strain on the system, delays, cost overruns, and errors.



Work Requirements Don't Work: Evidence shows that work requirements do nothing to help people find or keep good jobs or reduce poverty. These funds could be better spent bringing additional jobs to Pennsylvania or building our economy.