



[consulting](#) | [training](#) | [free webinars](#)

clay@mostlymedicaid.com | 919-727-9231

Monday Morning Medicaid Must Reads

Helping you consider differing viewpoints. Before it's illegal.

March 11th, 2019

other MMRS - <http://bit.ly/2T7CP7K>

In this issue...

Article 1: *Medicaid backlog delaying care for Ohio's needy, and payments for health providers*

Clay's summary: Its's bad but its getting better?

Key Excerpts from the Article:

More than 88,000 applications from poor Ohioans are awaiting processing by caseworkers to determine if they are eligible for Medicaid. Nearly two-thirds of the applications have been pending 45 days or longer.

The backlog actually has improved since one point last year, when nearly 110,000 requests were awaiting review, but lengthy delays continue to cause uncertainty and delayed care for needy families — and financial difficulties for many health-care providers.

Advocates for the poor say many Medicaid applicants have no or limited access to health care while they wait, which can cause life-threatening problems.

Read full article in packet or at links provided

Article 2:

State sued over Medicaid application backlog

Clay's summary: Advocates lawyer up and push for a yes or no on the growing pile of apps.

Key Excerpts from the Article:

The state of Alaska is facing a lawsuit for failing to process Medicaid applications in the time frame required by federal law.

Medicaid applications are supposed to be processed within 45 days, or within 90 days if it involves determining a disability.

As of February, at least 15,000 Alaskan have submitted an application that has not been processed. At least 10,000 of those applications were submitted in 2018.

"We've been following the problem for some years and hoping that it would get redressed, and it seemed to be getting worse and worse no matter what issues are raised to the state," attorney James Davis said.

Davis, an attorney with the Northern Justice Project civil rights law firm, filed the suit on behalf of one client with intent for it to be certified as a class-action case. Davis' client applied for Medicaid in November, but still has not had her application processed.

Read full article in packet or at links provided

Article 3: *Sen. Kennedy asks feds to investigate Louisiana Medicaid program*

Clay's summary: State lawmaker turns in his state to the federalists for Medicaid shenanigans.

Key Excerpts from the Article:

Sen. John Kennedy has asked the federal Centers for Medicare and Medicaid Services to investigate Louisiana's Medicaid program after he publicly blistered the state's health agency and its leader earlier this week.

Kennedy, R-La., wrote a letter to federal Medicaid Administrator Seema Verma asking the agency to "investigate whether or not the Louisiana Department of Health has violated federal Medicaid regulations."

His action was prompted after the state said as many as 37,000 Louisiana Medicaid recipients may be ineligible for the coverage because their income

exceeds the limit for coverage.

Read full article in packet or at links provided

Medicaid backlog delaying care for Ohio's needy, and payments for health providers

SourceURL: <https://www.dispatch.com/news/20190304/medicaid-backlog-delaying-care-for-ohios-needy-and-payments-for-health-providers>

Medicaid backlog delaying care for Ohio's needy, and payments for health providers

By [Catherine Candisky](#)

The Columbus Dispatch

Posted Mar 4, 2019 at 7:57 PM Updated Mar 5, 2019 at 6:19 AM

More than 88,000 applications from poor Ohioans are awaiting processing by caseworkers to determine if they are eligible for Medicaid. Nearly two-thirds of the applications have been pending 45 days or longer.

The backlog actually has improved since one point last year, when nearly 110,000 requests were awaiting review, but lengthy delays continue to cause uncertainty and delayed care for needy families — and financial difficulties for many health-care providers.

Advocates for the poor say many Medicaid applicants have no or limited access to health care while they wait, which can cause life-threatening problems.

"You apply and wait for care until you get approval," said Kate McGarvey, executive director of Ohio State Legal Services. "We have people waiting for drug (addiction) treatment, and one client who had a gap in coverage was able to get free treatment at a clinic but had a heart attack." The latter case raised questions about whether the heart attack could have been prevented had the client been able to see a specialist.

While the backlog is down, McGarvey said, waits for coverage in many counties, particularly urban areas, remain significant.

"The state says it has gotten better, but it's still a problem," said Pete Van Runkle, executive director of the Ohio Health Care Association, a nursing-home-industry group.

Hundreds of nursing-home residents are awaiting word on their Medicaid applications. Many already are receiving care but unable to pay for it.

"It creates uncertainty for families and that causes angst, and from the provider perspective, they are already providing care, so it's a cash-flow problem at best and at worst they won't get paid," Van Runkle said.

Listen to the latest Buckeye Forum politics podcast:

Ohio's tax-funded Medicaid program covers nearly 3 million poor and disabled residents. Under federal guidelines, applications for coverage and annual renewals to maintain benefits must be processed within 45 days for non-disability requests and 90 days for disability ones.

The state uses a pre-enrollment eligibility system that requires applicants' income to be verified before they're approved for the program. Although coverage can be retroactive to the date of application, many health-care providers won't accept patients without coverage. After they are approved, beneficiaries must submit income information annually to maintain coverage.

State and local officials acknowledged wait times are too long for many applicants.

"It's bad. I'm not making excuses. We want to get them all cleared up," said Joel Potts, executive director of the Ohio Job and Family Services Directors

Association. Caseworkers at county human services offices review Medicaid applications.

Potts said policy changes, a new online eligibility system and insufficient staffing contribute to the backlog. Applications for long-term care take longest to process because caseworkers must identify assets going five years back to determine eligibility.

"I feel for people who are waiting for benefits, but these cases are complicated and we need more money in the system," Potts said.

In Franklin County, 5,355 Medicaid applications are awaiting review. Nearly 1,400 have been pending longer than 45 days.

Jodi Andes, spokeswoman for the county Department of Job and Family Services, said there are a number of reasons these applications take additional time, but most — about 900 — are from those needing long-term care. Their applications are much more detailed and require more verifications that usually take additional time, she said.

Franklin County's backlog is fourth highest in the state. Cuyahoga County's is the largest, at more than 16,000, followed by Lucas and Montgomery counties.

"Ohio Medicaid has been working with counties to improve their application processing time," said Medicaid spokesman Tom Betti. "We know there is still much work to do statewide, but there has been improvements in Franklin County and elsewhere. There are many factors that contribute to the backlog, but at the end of the day Ohioans deserve prompt response from all levels of government."

State officials contend the backlog is somewhat inflated because it includes renewal requests in which the applicant already has coverage, and others tagged to earlier requests by the same individual, making them appear older than they are.

To help speed the process, state officials say they are automating some computer functions now done manually by caseworkers.

Van Runkle said nursing homes are asking the state to pay Medicaid costs for those who have waited more than 45 days for a decision on their application regardless of whether they ultimately are found to be eligible. The proposal

follows an order by a federal judge last year requiring the state of Illinois to pick up Medicaid costs for backlogged applications.

State sued over Medicaid application backlog

SourceURL: <https://www.ktuu.com/content/news/State-sued-over-Medicaid-application-delays-506583141.html>

State sued over Medicaid application backlog



ANCHORAGE (KTUU) - The state of Alaska is facing a lawsuit for failing to process Medicaid applications in the time frame required by federal law.

Medicaid applications are supposed to be processed within 45 days, or within 90 days if it involves determining a disability.

As of February, at least 15,000 Alaskan have submitted an application that has not been processed. At least 10,000 of those applications were submitted in 2018.

"We've been following the problem for some years and hoping that it would get redressed, and it seemed to be getting worse and worse no matter what issues are raised to the state," attorney James Davis said.

Davis, an attorney with the Northern Justice Project civil rights law firm, filed the suit on behalf of one client with intent for it to be certified as a class-action case. Davis' client applied for Medicaid in November, but still has not had her application processed.

"The state doesn't have to provide her with medical benefits. It could say, 'No, you're not eligible,' for one reason or another. It could just give her an answer, but the state hasn't either approved her or denied her, so she's just left in limbo, which is what literally tens of thousands of other applicants just like her are-- in a state of limbo," Davis said.

No representative from the Department of Health and Social Services or the governor's office responded to requests for comment Friday, but a webpage on the DHSS website is dedicated to information on the application backlog.

The website states that applicants who have submitted an application in the last 90 days and have not received notice of their status do not need to submit a new application. The website states that the office will have limited services three days a week so staff can focus on addressing the out-of-date workload.

"There is no factual debate," Davis said. "I think the state is going to concede that it's violating the law. The question is how best to fix it, and there has to be a will to fix it."

Davis says the purpose of the lawsuit is to have the court order the state to comply with existing laws.

"We're not saying, 'Give people Medicaid/Don't give them Medicaid,' but at least follow the law and give them a decision on whether or not they're entitled to Medicaid or not," Davis said. "It's just a matter of giving them a yes or a no. People have a right to a yes or no and I think people have a right to ask the state government to follow the law just like the rest of us."

Get the latest updates from ktuu.com delivered to your browser

USA Today Network: First source for La. political news

SourceURL: <https://www.thenewsstar.com/story/news/2019/02/28/sen-kennedy-asks-feds-investigate-la-medicare-program/3016259002/>

Sen. Kennedy asks feds to investigate Louisiana Medicaid program

[Greg Hilburn](#), Monroe News Star Published 12:05 p.m. CT Feb. 28, 2019 | Updated 12:15 p.m. CT Feb. 28, 2019

Greg Hilburn covers Louisiana politics for USA Today Network. Greg Hilburn/USA Today Network

[CONNECT](#)[TWEET](#)[LINKEDIN](#)[COMMENT](#)[EMAIL](#)[MORE](#)

Sen. John Kennedy has asked the federal Centers for Medicare and Medicaid Services to investigate Louisiana's Medicaid program after he publicly blistered the state's health agency and its leader earlier this week.

Kennedy, R-La., wrote a letter to federal Medicaid Administrator Seema Verma asking the agency to "investigate whether or not the Louisiana Department of Health has violated federal Medicaid regulations."

His action was prompted after the state said as many as 37,000 Louisiana Medicaid recipients may be ineligible for the coverage because their income exceeds the limit for coverage.



Republican U.S. Sen. John Kennedy (Photo: Courtesy photo)

Kennedy calculated the cost of the insurance for those who are possibly ineligible could be as high as \$200 million and called the state health department a "dumpster fire" and Secretary Rebekah Gee "incompetent."

But Gee noted the Centers for Medicare and Medicaid Services alerted her agency last week that the state's Medicaid program "is one of only a few in the nation that has used best practices to combat fraud and abuse."

Gee, an appointment of Democratic Gov. John Bel Edwards, said securing and installing the new technology to root out ineligible recipients or fraud should be applauded rather than criticized and saves taxpayer dollars.

"This independent, unbiased review recognizes our program integrity unit for using innovative approaches to prevent and detect Medicaid fraud," Gee said this week in an email to USA Today Network. "Because of the commitment of this administration, Louisiana now has an eligibility and enrollment system that is more robust than what had been in place for decades."

Kennedy's letter acknowledged the department "has taken steps to improve Medicaid eligibility determinations," but only "after pressure from Congress and the Louisiana Legislative Auditor."

In his letter Kennedy also asked the federal agency to "detail what can be done to recover improperly spent tax dollars from medicaid recipients."

But the funding actually goes to manage care companies rather than to individuals.

Most of the 37,000 people identified by the state are part of the Medicaid expansion Edwards ushered in as one of his first orders of business in 2016.

The expansion insured about 500,000 more Louisianians and slashed the state's uninsured rate in half.

Edwards touts the expansion as one of his top achievements, but some Republicans have been critical of the expansion's cost and growth.

Greg Hilburn covers state politics for the USA TODAY Network of Louisiana. Follow him on Twitter @GregHilburn1

CONNECT [TWEET](#) [LINKEDIN](#) [COMMENT](#) [EMAIL](#) [MORE](#)