



The Truth About Medicaid Funding and the FFCRA

THE PROBLEM: CONGRESS REMOVED STATES' ABILITY TO PROPERLY MANAGE THEIR MEDICAID PROGRAMS

Under the Families First Coronavirus Response Act's Maintenance of Effort (MOE) provision states must cover ineligible Medicaid enrollees to receive increased matching funds.

States are also blocked from:



strengthening eligibility standards



raising premiums



increasing local contributions to Medicaid

This was **far more restrictive** than any other previous FMAP bump, including the one given in 2009.

HOW IT WORKS: STATES CANNOT REMOVE INELIGIBLE ENROLLEES IF THEY ACCEPT FEDERAL COVID FUNDS



Congress temporarily increased the portion of Medicaid costs paid by the federal government to the states (FMAP) **by 6.2 percent**.



In exchange, states **cannot remove even ineligible enrollees** unless they voluntarily ask to be removed or move out of state.



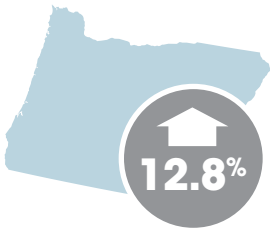
States must provide Medicaid coverage **to every current enrollee**—including the ineligible—to receive the funds increase.



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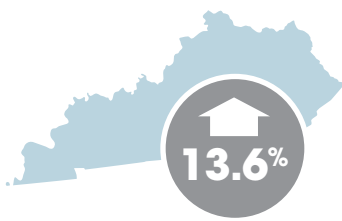
THE RESULT: STATES HAVE EXPERIENCED SOARING ENROLLMENT, ELEVATED COSTS, AND LOCKED-IN ENROLLEES

In 2020, state Medicaid administrators reported an **8.2 percent increase in Medicaid enrollment**—the largest hike in Medicaid enrollment since the implementation of Medicaid expansion under ObamaCare.



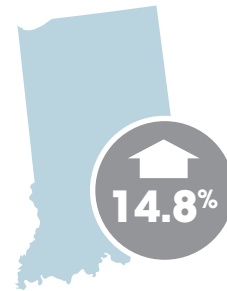
Oregon saw a **12.8 percent Medicaid enrollment spike.**

(January 2020 through November 2020)



Kentucky saw a **13.6 percent enrollment increase.**

(January 2020 through September 2020)



In Indiana, **enrollment increased by nearly 15 percent** in 2020.

(January 2020 through September 2020)

Across just 13 states, roughly **two million Medicaid enrollees' redeterminations have been delayed** as of late 2020 and early 2021. And among just seven states, more than 500,000 enrollees already deemed ineligible are locked-in to Medicaid.

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