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<< Return to States' Medicaid eligibility and enrollment remained stable in 2011, report says

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Despite heavily burdened state budgets, states' Medicaid eligibility and enrollment was stable during 2011, thanks partly to the Affordable Care Act, a new report finds.

Without the ACA's requirement that states maintain current eligibility requirements, many states would have instituted Medicaid cuts to stay afloat, according to the Kaiser Family Foundation's report: "Performing Under Pressure: Annual Findings of a 50-State Survey of Eligibility, Enrollment, Renewal, and Cost Sharing Policies in Medicaid and CHIP, 2011-2012." The eligibility requirement was introduced in part to prepare for a major expansion of the program in 2014.

Long-term care takes up a third of the billions spent on Medicaid, the state-federal health insurance benefit for low-income, elderly and disabled individuals. According to the report, enrollment and eligibility remained stable because many states "found ways to improve coverage and streamline eligibility and enrollment procedures, often with a focus on using scarce state administrative funds as efficiently as possible and continuing to adopt options made available by the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) and the ACA." However, states made greater strides in covering children than low-income adults, the report author said.

The report, conducted with the Georgetown University Center for Children and Families, was released Wednesday.