



Georgetown University Report Warns of Unprecedented Coverage Loss for Children When Medicaid Continuous Coverage Requirement Ends

Washington, D.C. – A new [report](#) by the Georgetown University Center for Children and Families estimates that 6.7 million children are at high risk of becoming uninsured when the Medicaid continuous coverage public health emergency requirement is lifted. The continuous coverage provision was established by the Families First Coronavirus Response Act to ensure that children, parents and other individuals enrolled in Medicaid had stable health care coverage during the pandemic. It is very likely that the continuous coverage requirement will be lifted by the summer. At that time, states will need to restart annual renewals for everyone in their Medicaid programs, including children, if they have not been able to verify their eligibility using data already available to the state.

Children face varying degrees of risk of becoming uninsured depending on how well their states rise to the challenge of rechecking eligibility, communicating with families and ensuring that children do not fall through the cracks. Children may lose coverage in one of two ways – either they have become ineligible for Medicaid and must transition to other sources of health coverage such as the Children’s Health Insurance Program (CHIP) and get lost on the way; or they remain Medicaid eligible but do not complete the renewal process. Families may lose coverage simply because the renewal letter got lost in the mail.

Children in all states are at risk for becoming uninsured but those in Delaware, Florida, Georgia, Missouri, Nevada and Texas are at the highest risk because these states have not adopted key state policies that promote enrollment and retention in Medicaid and CHIP.

“When the public health emergency continuous coverage requirement lifts, states must take their time to ensure that children, pregnant women and others who are still eligible for Medicaid or CHIP are not erroneously dropped due to procedural reasons or red-tape barriers,” said Joan Alker, executive director of the Center for Children and Families and co-author of the report. “Children whose family income has risen making them no longer eligible for Medicaid, are most likely to be eligible for CHIP. States run Medicaid and CHIP so that’s where responsibility lies to ensure that millions of children don’t lose coverage during this process. With all of the concern we have heard expressed about children’s well-being of late, I hope that Governors will make this a top priority. Any gap in a child’s coverage potentially exposes families to large medical bills.”

About half of all children in the United States (40 million) are now insured through Medicaid or CHIP — the vast majority in Medicaid.



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“Even children who remain eligible for Medicaid could lose their coverage for procedural reasons such as the verification request getting lost in the mail or being sent to an old address,” warned co-author Tricia Brooks, research professor at the Georgetown University McCourt School of Public Policy a co-author of the report. “It is critical that state and federal policymakers act to minimize coverage losses, make data available to the public, and intervene quickly if children begin to lose coverage inappropriately.”

The [report](#) outlines strategies that states may adopt to promote retention of coverage such as following up with enrollees when action is required to avoid a loss a coverage and working with managed care organizations to update contact information and support the renewal process. The report also discusses ways that can be better prepared for this unprecedented challenge, including balancing the timeline to catch up on delayed actions with workforce capacity and the volume of work and boosting communications and enrollment assistance.

“Ultimately, it will be important for states to report and act on key performance metrics that indicate a need to slow down the process or hit the pause button to ensure that eligible children and families are not being disenrolled inappropriately,” said Brooks.