## Congress of the United States House of Representatives

June 16, 2021

The Honorable Joseph R. Biden, Jr. President of the United States
The White House
1600 Pennsylvania Avenue NW
Washington, DC 20500

The Honorable Kamala Harris Vice President of the United States The White House 1600 Pennsylvania Avenue NW Washington, DC 20500

Dear Mr. President and Madam Vice President,

We, the undersigned members of the Congressional Black Caucus, the Congressional Hispanic Caucus, and the Congressional Asian Pacific American Caucus together write to urge you to close the Medicaid "coverage gap" in the forthcoming American Families Plan. The coverage gap leaves over two million Americans with incomes below the poverty line uninsured and without any pathway to health coverage and almost two million more uninsured people with incomes between 100 and 138 percent of the poverty line who would be eligible if their states expanded. Closing this gap is one of the single most important steps we can take to reduce health inequities across the United States, as almost 60 percent of people affected by the coverage gap are Black, Hispanic, Asian, or Pacific Islander. Additionally, much of the affected population lives in the South, where state governments have failed to provide basic health coverage for their residents. It is unacceptable for the federal government to continue to allow some states to deny basic health coverage to these uninsured and underinsured Americans.

Medicaid provides comprehensive, affordable, quality health insurance specifically designed for low-income individuals. We urge you to ensure that, regardless of state political decisions or immigration status, everyone eligible for Medicaid expansion is finally able to access the protections of Medicaid. We were pleased that the American Rescue Plan includes a bold new incentive to encourage states to finally do the right thing and expand Medicaid. Numerous researchers have repeatedly established the value of Medicaid expansion. Over 600 studies reviewed by the Kaiser Family Foundation show that Medicaid expansion has wide-ranging benefits, including reducing overall mortality, as well as mortality associated with cancer, cardiovascular disease, and liver disease.<sup>3</sup> It has decreased racial disparities in coverage rates, affordability of care, and in some health outcomes - including maternal and infant mortality.

Closing the coverage gap would have a significant impact in addressing the Black maternal health crisis, which was the subject of a September 9, 2019 hearing of the House Energy and Commerce

<sup>&</sup>lt;sup>1</sup> Rachel Garfield, Kendel Orgera, and Anthony Damico, "The Coverage Gap: Uninsured Poor Adults in States that Do Not Expand Medicaid," Kaiser Family Foundation, January 21, 2021, https://www.kff.org/medicaid/issue-brief/the-coverage-gap-uninsured-poor-adults-in-states-that-do-not-expand-medicaid/

<sup>&</sup>lt;sup>2</sup> Judith Solomon, "Federal Action Needed to Close Medicaid 'Coverage Gap,' Extend Coverage to 2.2 Million People, Center on Budget and Policy Priorities, May 6, 2021, https://www.cbpp.org/research/health/federal-action-needed-to-close-medicaid-coverage-gap-extend-coverage-to-22-million

<sup>&</sup>lt;sup>3</sup> Madeline Guth and Meghana Ammula, "Building on the Evidence Base: Studies on the Effects of Medicaid Expansion, February 2020 to March 2021," Kaiser Family Foundation, May 6, 2021, https://www.kff.org/medicaid/report/building-on-the-evidence-base-studies-on-the-effects-of-medicaid-expansion-february-2020-to-march-2021/

Committee, and a May 6, 2021 hearing of the House Committee on Oversight and Reform. To prevent complications and ensure a healthy pregnancy and birth, people need health coverage *before* they become pregnant and throughout the entirety of their pregnancy and postpartum period. Currently, women in the coverage gap are not eligible to receive care under Medicaid until their pregnancy begins. More than half of people in the coverage gap are women, including large numbers of Black, Hispanic, and Native Hawaiian or other Pacific Islander women, and do not have a pathway to coverage until eligibility is established based on pregnancy. This means these women do not have access to vital maternal health care in those critical early weeks and months of pregnancy. This has become even more critical during the COVID-19 pandemic as Hispanic women make up the largest number of pregnant women with COVID-19 and are at increased risk of adverse pregnancy outcomes.<sup>5</sup>

The Affordable Care Act (ACA) intended for Medicaid expansion to be available to all people with low incomes regardless of where they live. In fact, the ACA fully accounted for the cost of that expansion, but the Supreme Court decision in *NFIB v. Sebelius* left decisions of expansion up to the states. Despite the evidence of the lifesaving care provided by Medicaid expansion, co state governments still refuse to expand, even with the significant financial incentives provided in the American Rescue Plan. These states additionally lose out on the fiscal benefits of expansion, which research shows produces net budget saving. These states' refusal to expand means residents of those states are denied the far-reaching benefits of expansion. In fact, a landmark study found that in states refusing to expand Medicaid, 15,600 died prematurely from 2014 to 2017, and it is likely that premature deaths are trending upward.<sup>6</sup>

To advance the goals of Medicaid and the ACA, it is also critical to prioritize the elimination of disparities in Medicaid funding for Puerto Rico and the U.S. territories and grant access to Medicaid and marketplace coverage to Deferred Action for Childhood Arrivals (DACA) recipients. Specifically, we request that HHS repeal 45 C.F.R. § 152.2(8), which excludes DACA recipients from the definition of "lawfully present" and, consequently from benefits under the ACA. As a result of current regulations and guidance, DACA recipients cannot:

- a) Obtain comprehensive health insurance under Medicaid or the Children's Health Insurance Program (CHIP) in most states;
- b) Receive federal premium tax credits to make private health insurance affordable in the marketplace (even though DACA recipients still file and pay federal taxes); or
- c) Purchase health insurance in the ACA's health insurance marketplace, even at full cost using their own funds;

Recovery legislation presents a unique, historic opportunity to close the gaps in coverage for the millions of people in the Medicaid coverage gap, people who rely on Medicaid in Puerto Rico and the territories, and DACA recipients. We must take advantage of this once-in-a-generation opportunity to bring affordable health care to all Americans. There are various ways to close these gaps and bring lifesaving coverage to millions of Americans—through enrollment in a public option plan offered in the marketplace as set forth in President Biden's campaign plan, a

<sup>&</sup>lt;sup>4</sup> Medicaid Initiatives to Improve Maternal and Infant Health and Address Racial Disparities | KFF

<sup>&</sup>lt;sup>5</sup> https://covid.cdc.gov/covid-data-tracker/#pregnant-population

<sup>&</sup>lt;sup>6</sup> Sarah Miller, Norman Johnson, and Laura R. Wherry, "Medicaid and Mortality: New Evidence from Linked Survey and Administrative Data," National Bureau of Economic Research working paper, July 2019, https://www.nber.org/papers/w26081.

federally-administered Medicaid plan, through enrollment in marketplace plans adjusted to align with Medicaid for those in the 12 non-expansion states, by eliminating disparities in Medicaid funding for Puerto Rico and the territories, and by granting access to ACA benefits for DACA recipients. Regardless, coverage should be as similar as possible to Medicaid to ensure that people in the coverage gap can experience the robust, positive impact of Medicaid.

The coronavirus pandemic has only illuminated the far-reaching, fatal consequences of inadequate access to health care. Addressing the Medicaid coverage gap is critical both in correcting decades of unacceptable and unjust denial of health care coverage to underserved and minority populations throughout the United States and in protecting our nation from future pandemics. Simply put, it is imperative that Congress and the Biden-Harris Administration enact policies to close the coverage gap to significantly reduce racial health disparities and ensure all Americans have access to basic health care. We look forward to working with you to reduce racial disparities associated with the coverage gap and finally realize the promise of the Affordable Care Act for all Americans, regardless of where they live.

Sincerely,

Robin L. Kelly Member of Congress Chair, CBC Health

air, CBC Heal Braintrust ソ Yvette Clarke

Yvette Clarke Member of Congress Joyce Beatty Member of Congress Chair, Congressional Black

Caucus

Judy Chu Member of Congress Chair, Congressional Asian Pacific American Caucus

Raul Ruiz, M.D. Member of Congress Chair, Congressional Hispanic Caucus

/s/ Barbara Lee Member of Congress /s/ Cori Bush Member of Congress

Nanette Diaz Barragán Member of Congress

/s/

/s/ Joaquin Castro Member of Congress

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Grace F. Napolitano	Ritchie Torres	Lauren Underwood	Val Butler Demings
Member of Congress	Member of Congress	Member of Congress	Member of Congress
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Al Green	Anthony G. Brown	Frederica S. Wilson	Deborah K. Ross
Member of Congress	Member of Congress	Member of Congress	Member of Congress
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Brenda L. Lawrence	Mike Levin	Adriano Espaillat	Senator Cory A. Booker
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Gwen Moore	Karen Bass	Senator Raphael Warnock	G. K. Butterfield
Member of Congress	Member of Congress	Member of Congress	Member of Congress
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Lucille Roybal-Allard	Sylvia R. Garcia	Tony Cárdenas	Ted W. Lieu
Member of Congress	Member of Congress	Member of Congress	Member of Congress
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