

75 Percent of Community Health Centers Report that Patients Experience Barriers to Care As a Result of Citizenship Documentation Requirements

Children enrolled in State Children's Health Insurance Programs (SCHIP) are experiencing enrollment delays, disruptions and denials

WASHINGTON - Medicaid documentation requirements enacted by Congress in 2006 continue to present serious, ongoing problems for health centers and their patients, according to a new analysis issued by the Geiger Gibson/RCHN Community Health Foundation Research Collaborative at The George Washington University School of Public Health and Health Services (GW/SPHHS). Moreover, changes implemented in the final rule, published in 2007, did little to address these issues, or to alleviate the problems facing eligible health center patients who continue to experience the effects resulting from coverage delays and interruptions to health care. At the same time, the requirements jeopardize health centers' ability to practice in conformance with recognized standards of quality and access due to delays in patient enrollment and payer payments.

This study is the second in a two-part study that looks at the effects of the Medicaid citizenship documentation requirements contained in the Deficit Reduction Act (DRA). The first survey conducted in 2006 found that the DRA requirements adversely affected eligible patients in nine out of 10 health centers. In 2007, health centers served more than 16 million patients at over 6,200 sites nationwide, including more than 5.6 million Medicaid beneficiaries and 5.8 million low-income children. Community health centers are the largest source of comprehensive primary care for low-income patients. Findings in this study include:

- Three-quarters of all health centers continue to experience significant problems with citizenship documentation requirements for one or more eligible patient groups.
- Nearly one-half of health centers continue to report that Medicaid application and enrollment disruptions and delays continue to affect their ability to arrange for specialty care for eligible patients and many affected centers report increased costs associated with helping qualified patients with application and enrollment problems.
- Documentation requirements appear to have particularly affected access for several specific patient categories, including U.S.-born newborns, whose need for rapid management can become a particularly acute matter.

Most troubling, the authors found that despite the fact that the DRA documentation requirements do not apply to State Children's Health Insurance Programs (SCHIP) when administered as a separate program, one-third of health centers located in states with separate SCHIP programs reported that citizenship documentation requirements are being applied to SCHIP applicants.

“This study reinforces our earlier findings regarding the damage done by the law, not only to individual patients and health care providers but to the overall quality of care,” said Sara Rosenbaum, JD, Hirsh Professor and chair, SPHHS Health Policy Department and a study co-author.

"Sadly, this second-wave study shows that many health centers are continuing to report enrollment barriers, and eligible patients must wait longer for access to specialty care," said Julio Bellber, president of the RCHN Community Health Foundation, which supported the study as well as ongoing health center research and scholarship through the Collaborative. "The consequences for patient care and health center operations are significant."

Dan Hawkins, senior vice president for Policy and Programs at the National Association of Community Health Centers, said, "This rule seriously undermines health centers' efforts to ensure millions of underserved Americans have access to continuous care - essentially victimizing poor children and adults who are overwhelmingly U.S. citizens and legal residents."

The second-wave report, "Assessing the Effects of Medicaid Documentation Requirements on Health Centers and Their Patients: Results of a "Second Wave" Survey" can be downloaded at: http://www.gwumc.edu/sphhs/departments/healthpolicy/chsrp/downloads/RCHN-MedicaidDoc_10-15-2008.pdf

The first-wave report, "An Assessment of the Effects of Medicaid Documentation Requirements on Health Centers and Their Patients" can be downloaded at: http://www.gwumc.edu/sphhs/healthpolicy/chsrp/downloads/Medicaid_Doc_Requirements.pdf

About the RCHN Community Health Foundation The RCHN Community Health Foundation (RCHN CHF) is a New York-based not-for-profit operating foundation dedicated to supporting and benefiting community health centers (CHCs) in New York state and nationally. The Foundation develops and supports programmatic and business initiatives related to community health center access, pharmacy and health information technology through strategic investment, research, outreach, education, and coalition building. . For more information about RCHN CHF, contact Chief Operating Officer / EVP Feygele Jacobs at (212) 246-1122, ext. 712, or fjacobs@rchnfoundation.org.

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