

# Nearly five million removed from Medicaid have no health insurance

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16 April 2024

On Friday, the Kaiser Family Foundation (KFF) reported that nearly one-quarter of those who were disenrolled from Medicaid by federal and state governments in the US over the past year are now uninsured. This means that approximately 4.6 million people, many of whom are children, who previously qualified for Medicaid, have no health insurance.

The KFF report is based on updated findings of its ongoing “Survey of Medicaid Unwinding” which has monitored the impact of the purging of Medicaid rolls since the Biden administration implemented its post-pandemic eligibility rules beginning on April 1, 2023.

A news release on Friday states, “Nearly a quarter (23 percent) of adults who say they were disenrolled from Medicaid since early 2023 report being uninsured now, finds a new KFF national survey examining how the unwinding affected enrollees.”

According to previous data released by KFF, at least 20 million low income people have been kicked off Medicaid since the unwinding was started. The KFF data shows that 70 percent of those removed from the government health insurance program, or 14 million people, were left temporarily with no insurance.

So far, 47 percent, or 9.4 million have been re-enrolled in Medicaid, while 30 percent, or 6 million people, had another form of health coverage such as an employer-sponsored plan, Medicare, self-funding on the health insurance marketplace (Obamacare) and or through the US military. The balance, or 4.6 million people, have no insurance at all.

According to Joan Alker, executive director and co-founder of Georgetown University’s Center for Children and Families, the actual number of disenrolled and uninsured is likely to be much higher. Alker told Associated Press the undercount is because the KFF survey does not consider children, who have been one of the biggest groups affected by unwinding.

Alker added, “The question is, ‘How long are they going to stay uninsured?’ The states who want to cover their citizens are going to have to do a lot of work to get them back.”

At least half of those who were enrolled in Medicaid prior to the unwinding said they had heard little or nothing about the process that was being put in place by the Biden administration and the state governments. One of the major reasons that people have been purged from Medicaid rolls is that the re-enrollment process is complicated.

When a federal national health emergency was declared at the beginning of the COVID-19 pandemic in March 2020, rules for eligibility for the government’s Medicaid health insurance program for low income families and individuals were expanded. These rules included a provision that said once someone qualifies for the program, they cannot be removed due to changes in their economic or other circumstances that would previously have made them ineligible.

According to health insurance experts, the Biden administration’s Medicaid unwinding initiative is the largest loss of health insurance coverage in US history. This attack on public health is also taking place as the Democrats and Republicans are cutting funds from critical social programs, claiming there is no money, while they are committing untold billions of dollars for the US proxy war against Russia in Ukraine and for the Israeli genocide against Palestinians in Gaza.

The KFF survey says that one third of Medicaid enrollees have not completed their renewal process. The news release states, “About a third (35 percent) who tried to renew their coverage describe the process as difficult, and nearly half (48 percent) describe it as at least somewhat stressful. A majority (56 percent) of those disenrolled say they skipped or delayed care or prescriptions while attempting to renew their Medicaid

coverage.”

Among the most persistent problems that enrollees have had with renewal of their Medicaid coverage have been excessive wait times on the phone and issues with their paperwork. According to Michelle Levander, founding director of the Center for Health Journalism at the University of Southern California, many of those disenrolled may have been eligible for Medicaid, “but they’re caught in a bureaucratic nightmare of confusing forms, notices sent to wrong addresses and other errors.”

Meanwhile, not having health insurance in the US can be financially catastrophic for families. As Sara Rosenbaum of George Washington University’s School of Public Health and Health Services told the Associated Press, healthcare costs of any kind can be a major burden for low-income Americans. “Suddenly, a visit that didn’t cost you anything (before)—let’s say it’s going to cost you \$5. That \$5 can be \$500 for some folks,” she explained.

Kate McEvoy, executive director of the National Association of Medicaid Directors, told CBS News that millions of people are currently being redetermined for eligibility, and that has swamped some state call centers. McEvoy said efforts by states to reach out to enrollees prior to the unwinding with media campaigns, texts, emails and apps were ineffective.

Some former Medicaid enrollees are only finding out that they no longer have coverage when they go to the doctor. For example, Indira Navas of Miami, told CBS News she learned her 6-year-old son Andres had been disenrolled from Florida’s Medicaid program when she took him to an appointment in March. She had scheduled the appointment months prior and expressed frustration that her son is uninsured and unable to receive treatment for his medical condition.

Additionally, Navas also said Florida representatives could not explain why her 12-year-old daughter, Camila, remained covered by Medicaid even though the children live in the same household with their parents. “It doesn’t make sense that they would cover one of my children and not the other,” she said.



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