



The District's Dime

Going Beyond the Budget Book

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Will the Mayor's 2017 Budget Take Steps to Ensure Immigrants Have Access to Health Insurance?

By Ed Lazere

Mayor Bowser's fiscal year 2017 (FY 2017) budget proposal – which will be released this Thursday – offers an opportunity to reverse barriers the city has set up that make it hard for many residents to get affordable health insurance. DC residents in the Healthcare Alliance program – immigrants who are either undocumented or do not meet Medicaid's immigration standards – face restrictive eligibility procedures that have resulted in many going without care. This in turn contributes to other problems, like residents waiting too long to seek care and then needing costly medical services.

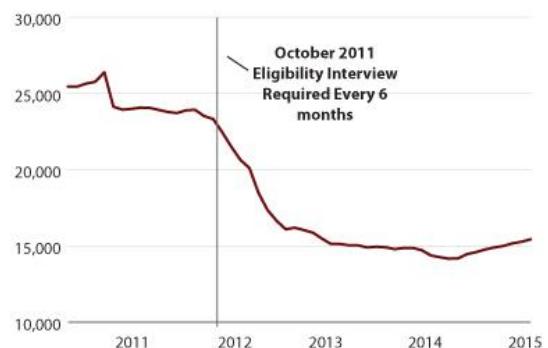
If the District is to be a place where health insurance is universally accessible, we must make it easier for eligible residents to apply for and maintain their Alliance benefit. We hope the mayor's FY 2017 budget will address this.

The Healthcare Alliance program serves low-income adults in the District who are not eligible for Medicaid or Medicare and do not receive private insurance – mostly undocumented immigrants. In 2011, DC implemented a strict eligibility procedure which requires Alliance beneficiaries to have an in-person, face-to-face interview with the Department of Human Services (DHS) every six months. This strict eligibility requirement has led to the program shrinking from 25,000 beneficiaries to 15,000. That likely means thousands of eligible residents are going without insurance.

There are several problems with the requirement:

- **It is hard for eligible beneficiaries – especially those who work and/or have young children – to maintain their benefit.** The Department of Healthcare Finance reports that between 50 and 67 percent of cases are terminated because of failure to complete the interview requirement. This leaves many without health coverage. And the burden is great on those who do complete the eligibility requirement. Alliance beneficiaries report to advocates that they line up as early as 5 or 6 a.m. just to be seen by staff, and many must come back multiple times to complete the application and renewal process.

HEALTHCARE ALLIANCE ENROLLMENT, JULY 2014 - JAN. 2015



Source: November 2010 to March 2015 MCAC Enrollment Reports, Department of Health Care Finance

- **It costs DC money.** DC has to hire more staff to manage the increased number of applicants resulting from this requirement. What's more, the requirement appears to increase health costs for the program, as many residents avoid primary care and only sign up for the Alliance when they are medically very needy.
- **It is operationally troublesome for DHS and harms other DHS program beneficiaries.** DHS has long wait and processing times for public benefit programs, and the added volume of beneficiaries who must fulfill the interview requirement only adds to those problems. Furthermore, the operational problems caused by the Alliance requirements makes it harder for DHS to process eligibility claims for individuals receiving other benefits such as Medicaid, food stamps, and TANF.

For these reasons, five community groups have drafted a letter in hopes of changing the requirements of the DC Healthcare Alliance program. The letter proposes to:

- **Change the six-month interview requirement to an annual interview.** This change would put the Alliance program's rules more in line with Medicaid and ease long lines and wait times at DC's DHS service centers.
- **Allow community health workers to assist with parts of the application and annual interview.** This would alleviate some of DHS's immediate workload pressures at service centers and help beneficiaries who have relationships with a health center.

When Mayor Bowser's budget comes out this week, we'll be looking to see if it proposes changes to make it easier for residents to keep their health benefits through the Healthcare Alliance.