

Medicaid Unwinding

“Staggering numbers” of Americans are losing coverage.

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During the COVID-19 pandemic, the Families First Coronavirus Response Act required states to keep people enrolled in Medicaid, the health insurance program for low-income and disabled Americans, even if they no longer met the requirements. Beginning April 1, in what’s called the Medicaid unwinding, states started returning to regular operations, meaning no more mandatory continuous enrollments.

KFF, formerly the Kaiser Family Foundation, estimates that between 8 million and 24 million people will lose coverage over the next year. A KFF report from May found that most people were dropped because of missing paperwork and other procedural errors, not because they didn’t qualify. In Indiana, for example, 53,000 folks lost coverage the first month, 89% of them due to technicalities—“staggering numbers,” as Ed Clere, a Republican lawmaker from the state, described it. Lawmakers, advocates and the Biden White House are urging states to slow the disenrollments.

Coverage varies from state to state. Most states expanded Medicaid under the Affordable Care Act (Obamacare). The 10 holdouts are Alabama, Florida, Georgia, Kansas, Mississippi, South Carolina, Tennessee, Texas, Wisconsin and Wyoming, exacerbating health disparities in the South.

The unwinding takes place as new reports show that Medicaid expansion improved treatment and survival for young women with breast cancer, decreased mortality and racial disparities among people with gastrointestinal cancers and increased palliative care for people with advanced cancer. Lisa Lacasse, president of the American Cancer Society Cancer Action Network, summed it up thus: “Research continues to underscore the impact increasing access to comprehensive, affordable health insurance through Medicaid has on cancer patient survival.”
