Opinion: The importance of implementing Medicaid suspension during COVID-19

Last summer, Gov. Mike Parson signed Senate Bill 514, which changes how Missouri handles people with Medicaid going to prison or jail. Previously, when people with Medicaid went to prison or jail, their insurance would be terminated. SB 514 changes the law to suspend Medicaid rather than terminating it. That way, people’s insurance can be reactivated as soon as they re-enter society. Unfortunately, SB 514 has not yet been put into effect. The COVID-19 pandemic makes it vital that Missouri implements SB 514 immediately.

Terminating people’s Medicaid is a way to avoid double-billing the government for medical care in prison or jail, not an intentional punishment, but termination has bad unintentional consequences. Whether people serve prison time or leave jail after being found innocent, they re-enter society to find their health insurance gone. They need to reapply for Medicaid, a process that takes months to complete. During those months, they lack medical care and essential medications, like insulin for diabetes, inhalers for asthma, and antihypertensives to reduce heart attack and stroke risk.

Clearly, avoiding gaps in Medicaid coverage for eligible Missourians is a good idea. That’s why Missouri Sen. Lincoln Hough (R-Springfield) introduced the idea of Medicaid suspension in SB 395 (2019) and the Missouri state legislature passed the concept in SB 514.

You may be wondering, though, how Medicaid relates to the COVID-19 pandemic. Didn’t the federal relief bill make COVID-19 tests and associated
hospital visits free?

Yes. The relief bill includes $160 billion for hospitals; some of that money is supposed to cover testing uninsured patients. MO HealthNet, Missouri’s Medicaid department, has also temporarily extended 90 days of coverage to uninsured adults who test positive for COVID-19 and have an income less than 85 percent of the federal poverty level. These are positive steps, but failing to reactivate the Medicaid of people leaving prison or jail still puts Missouri’s public health at risk.

People who have been incarcerated disproportionately suffer chronic medical conditions such as heart diseases and lung diseases. People with chronic medical conditions are at greater risk of severe cases of COVID-19. The coverage discussed above only applies to COVID-19 testing and treatment for people who test positive. It does not apply to as-yet-uninfected people who have chronic medical conditions that will increase their risk of dying once they get COVID-19.

People whose Medicaid is terminated will lose coverage for essential medications upon leaving prison or jail. Many community health providers who would usually try to help have limited their services due to social distancing. Other social determinants of health, such as social supports and employment, are worsening. Personal protective equipment (PPE), such as surgical masks, will become scarcer the longer the pandemic lasts. By the time people whose Medicaid has been terminated gets COVID-19, they may be weaker due to a lack of medicine and medical care. Their risk for a severe case may have increased dramatically. Because Missouri has a limited number of ventilators, additional severe cases increase the risk that our hospitals will be overwhelmed.

Moreover, COVID-19 is not the only disease that can require a ventilator to treat. People with chronic lung conditions such as acute asthma or emphysema may need ventilators, especially if their conditions are not managed. Eligible Missourians should keep their Medicaid coverage so they can get medicine, as well as medical advice delivered remotely (e.g. by telemedicine). That way, they will be less likely to end up in the ICU during the COVID-19 pandemic.

While overwhelmed hospitals put the whole state in danger, they may cause the biggest problems in rural areas. Since 2014, 10 of Missouri’s rural hospitals have closed. Many rural hospitals that remain open have no ICU beds. Even if Missouri has enough ICU beds for everyone who needs one, the beds may be located far away from rural patients. Medicaid-eligible people released from rural jails and prisons should have access to medication and telemedicine. Otherwise, rural hospitals, in particular, could be stretched beyond capacity.

Terminating the insurance of Medicaid-eligible Missourians puts us all at risk. Missouri should implement SB 514’s Medicaid suspension amendment immediately.

**EDITOR’S NOTE:** For up-to-date information on coronavirus, check with the [CDC](https://www.cdc.gov) and [MOHSS](https://health.mo.gov).

**Liza Weiss, Mikel Whittier**

Mikel Whittier is the Strategist of Justice and Health Equity at the Integrated Health Network. Liza Weiss is the Executive Director of Missouri Appleseed.

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