Congress of the United States

Washington, DC 20515

November 5, 2026

Robert F. Kennedy, Jr.
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Mehmet Oz
Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Secretary Kennedy and Administrator Oz,

We write to express serious concern about recent reports of a rapidly growing backlog of Medicaid applications in Texas and to request your swift intervention to ensure Texans can receive the health coverage they need.

According to data shared by the Texas Health and Human Services Commission (HHSC), Texans are facing unprecedented delays in accessing critical healthcare services because Medicaid applications are not being processed in a timely manner. Texas' Medicaid application backlog rose from 1,671 pending applications in January 2026 to a staggering 237,505 by early September 2026.[1] The trend appears to be worsening month after month. The median time to process a Texas Medicaid application is now 68 days, and 38 percent of applications fail to meet federal standards for processing times, compared to just 10 percent earlier in the year.[2] Hundreds of thousands of Texans who depend on Medicaid coverage to access lifesaving health services are being forced to wait weeks and months without access to coverage.

Timely access to Medicaid is essential for Texans' health and financial security. Nearly four million Texans are currently enrolled in Medicaid.[3] These families rely on Medicaid to access primary care, prenatal services, medications, and lifesaving treatments. Long delays disproportionately harm children, pregnant women, seniors, and Texans with disabilities. For four months, one Texan woman received no update from HHSC on her Medicaid for Pregnant Women application—a program that would have helped her afford essential prenatal care like ultrasounds and checkups earlier in her pregnancy.[4]

Direct service providers, who help Texans apply for Medicaid and SNAP, report issues working with the HHSC contractor, Maximus, that answers and filters calls to the HHSC customer contact center. Application assistants, who are experts in eligibility and enrollment, report Maximus contractors share inaccurate information about eligibility and procedures, such as telling applicants to reapply for Medicaid instead of requesting document review by HHSC staff. Inaccurate guidance from contractors and unnecessary reapplications are part of the reason the Medicaid backlog has grown so extensively. They create additional administrative burdens for applicants who are already waiting months for health coverage and for HHSC staff who must process duplicate

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[1] Texas Health and Human Services Commission, "Healthcare Statistics," *Texas Health and Human Services*, https://www.hhs.texas.gov/about/records-statistics/data-statistics/healthcare-statistics.

[2] Under effective oversight from state executives, integrated applications increase agency efficiency and accurate enrollment experiences for applicants and enrollees. Digital Government Hub, *Implementing Benefits Eligibility + Enrollment Systems: Key Context* (February 2026).

[3] Texas Health and Human Services Commission, *HHSC Data on Medicaid Backlog: September 2026* (Texans Care for Children, September 2026), PDF.

[4] Texas Health and Human Services Commission, *HHSC Data on Medicaid Backlog: September 2026* (Texans Care for Children, September 2026), PDF.

applications, engage with exasperated applicants, and make determinations using data provided by applicants under confusion and duress.

Recent federal provisions enacted in Public Law 119-21, the One Big Beautiful Bill Act (OBBBA), have exacerbated Texas' administrative bottlenecks and placed strain on HHSC's already overwhelmed and mismanaged system. H.R. 1's expansion of the populations who must now meet work requirements to continue receiving SNAP benefits have caused state workforce and human services agencies to restructure data transfers for new enrollee groups. Since Texas HHSC uses an integrated application across human services programs like Medicaid, SNAP, and Medicare Savings Programs, infrastructural changes to one program can lead to technical errors across programs.[5] Those technical errors can wrongly end a recipient's coverage across programs, stripping people of the benefits they rely on.

Other policy shifts caused by H.R. 1 have only recently taken effect, including restrictions on eligibility for certain lawfully present immigrants as of October 1, 2026, so the current application backlog will increase. Subsequent changes are scheduled to take effect in 2027 and later years, including a shorter retroactive coverage period for Medicaid applications, further curtailed eligibility, and duplicate-enrollment checks.

HHSC has struggled with application processing in the past, which suggests the problem may be structural. Our concern is about a lack of plans in place for what comes next. HHSC currently has approximately 237,505 applications awaiting processing and a median processing time well beyond the 45-day federal standard for most applicants. If HHSC cannot meet existing obligations under current rules, there is substantial reason to doubt it can absorb new verification requirements, eligibility changes, and related system updates without further delays. Applicants who are eligible under federal law could wait longer for coverage or be denied through administrative error.

Given the scope and trajectory of Texas' backlog, we respectfully request that you:

1. Investigate the causes of the current Medicaid application backlog at HHSC, including systems, staffing, vendor contracts, and policy changes that may be impeding timely determinations.
2. Evaluate whether Texas' oversight of Maximus includes adequate training, quality assurance procedures, staffing standards, performance metrics, and corrective-action mechanisms to ensure timely and accurate processing of Medicaid applications.
3. Report to our offices whether CMS has identified any concerns regarding HHSC's oversight of Maximus that may have contributed to application processing delays, call center deficiencies, erroneous eligibility determinations, or procedural denials.
4. Exercise CMS' statutory enforcement authorities to ensure compliance with timeliness standards under 42 C.F.R. § 435.912, including requiring Texas to develop and implement a comprehensive corrective action plan. That plan should set specific timelines for reducing the backlog and restoring on-time processing performance to federal expectations; establish measurable benchmarks and public reporting on application timeliness, median processing times, and workforce capacity; expand automation and streamlined verification processes to reduce manual workload while maintaining accuracy; and provide transparency about system upgrades, contractor performance, and the use of federal and state funds dedicated to eligibility operations.

[5] Jess Huff and Dan Keemahill, "More than 200,000 Texans Are Waiting for Medicaid Approval as Enrollment Declines," *The Texas Tribune*, September 10, 2026.

5. Report back to our offices by **November 30, 2026**, with the findings of CMS' review and the steps CMS will take to monitor HHSC's progress and intervene if benchmarks are not met.

Texans who qualify for Medicaid should not have to wait months for coverage. We appreciate your attention to this urgent matter.

Sincerely,

Joaquin Castro
Member of Congress

Lloyd Doggett
Member of Congress

Jasmine Crockett
Member of Congress

Sylvia R. Garcia
Member of Congress

Greg Casar
Member of Congress

Christian D. Menefee
Member of Congress

Veronica Escobar
Member of Congress

Al Green
Member of Congress

Julie Johnson
Member of Congress

Marc A. Veasey
Member of Congress

Lizzie Fletcher
Member of Congress