

Congress of the United States
Washington, DC 20515

August 22, 2023

Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Baltimore, MD 21244

Dear Administrator Brooks-LaSure:

We write to strongly urge swift intervention to ensure State compliance with federal rules concerning Medicaid redeterminations to prevent the catastrophic loss of coverage occurring in Texas, which already has the disgraceful distinction of the most uninsured people in the country. Your recent enforcement letter and improved data transparency across states, along with a recent whistleblower letter from Texas Health and Human Services Commission (HHSC) staff, indicate serious procedural failures and federal rules violations by the State of Texas. To ensure Texans are not erroneously denied medical care, we urge you to exercise your statutory enforcement authorities to require a corrective action plan and pause procedural terminations if Texas does not immediately comply with federal requirements.

Nearly 600,000 Texans have had their health coverage terminated over the past four months—81% of whom lost access to a family physician due to procedural reasons, not because they were found ineligible. Due to system failures, nearly 100,000 Texans were later found to have been erroneously kicked off Medicaid and the State has begun reinstating coverage. These disruptions and coverage gaps risk patients' health and financial stability. We urge CMS to investigate and publish related information concerning the causes of these errors, all corrective actions taken and still pending that are necessary to prevent such disastrous errors from reoccurring, and data concerning the timeline for reinstatement of coverage for all affected beneficiaries.

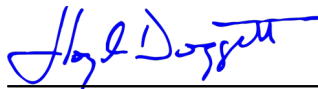
Though Texas has the tools to conduct “ex parte” renewals by automatically checking eligibility and renewing coverage for beneficiaries enrolled in other public assistance programs such as SNAP, fewer than 1% of Texans received such a renewal in the first cohort of beneficiaries undergoing the redetermination process. Meanwhile, some states have renewed over 60% of beneficiaries through the ex parte process, indicating serious flaws in Texas's program and failure to build a system that works. We urge you to conduct a thorough investigation of Texas's poor record of ex parte renewals and release such data and corrective actions the State must take to improve the ex parte review process.

Next month, Texas will begin sending notices to a third cohort of beneficiaries, which includes our most vulnerable communities, including children, seniors, and individuals with disabilities. Many of these individuals likely remain eligible for Medicaid, yet due to a faulty system and

difficulty navigating complex, bureaucratic red tape, most will likely lose their health care in what may become life and death situations for some.

This situation is preventable and time is of the essence given Texas's aggressive redetermination timeline. It is imperative that CMS work with Texas to pause procedural terminations and take corrective action to ensure due process for our many economically disadvantaged and marginalized neighbors. Much more work remains to expand coverage and ensure every Texan fulfills their human right to health care, but at a minimum, Texas must meet federal program requirements and mitigate unnecessary coverage losses under the State's existing eligibility rules. We stand ready to work with you, the State of Texas, and any willing partner to achieve this goal and protect health care access.

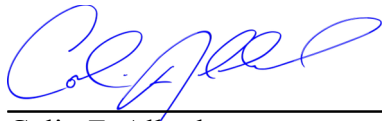
Sincerely,



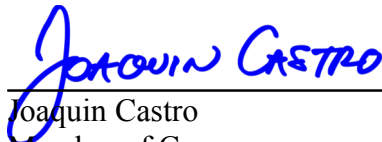
Lloyd Doggett
Member of Congress




Greg Casar
Member of Congress



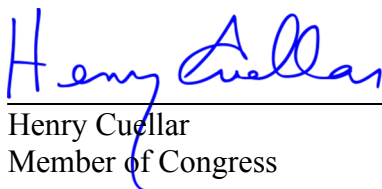
Colin Z. Allred
Member of Congress



Joaquin Castro
Member of Congress



Jasmine Crockett
Member of Congress



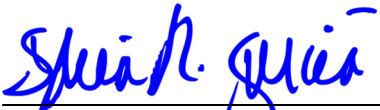
Henry Cuellar
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Veronica Escobar
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