Medicaid Unwinding: AI/AN Impact

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Data Sources

**2021 AMERICAN COMMUNITY SURVEY**

Used to obtain 2021 one-year estimates of both American Indian/Alaska Native (alone or in combination with one or more races) enrollment in Medicaid and overall population enrollment in Medicaid for each state.

**KFF MEDICAID ENROLLMENT AND UNWINDING TRACKER**

Used to obtain state-reported Medicaid enrollment and disenrollment numbers. KFF uses data from State Unwinding dashboards as well as monthly reports submitted to CMS. The data is updated on a weekly basis.

**STATE MEDICAID ENROLLMENT DATA**

Used to obtain supplemental (and in some cases more up to date) state Medicaid enrollment data. We consulted state Medicaid websites where KFF rounded enrollment numbers, or when more recent data was available than on KFF’s website.
Data Limitations & Considerations

The following limitations should be kept in mind when reviewing and applying the results of our data analysis:

- **2021 ACS data undercounts Medicaid enrollment**, larger than previous years of data (nearly 16% undercount compared to CMS enrollment data). Despite this limitation, ACS remains an important source of information on factors that are unreliable or unavailable in administrative data.

- Many states have large amounts of race data that is missing and only collect single race data. Along with misclassification of race data, these factors also contribute to **undercounting of American Indian/Alaska Natives in state-reported Medicaid data**.

- Given the limited data available, we are **unable to determine the proportion of American Indian/Alaska Natives on Medicaid that have been disenrolled**, relative to the overall population and other racial/ethnic groups. Therefore, we cannot calculate disparities in Medicaid disenrollment for AI/ANs.
Interpretation of the Estimates

- We recognize that states are all on different unwinding trajectories, and that the process of renewal may change over time in different ways for each state. Therefore, our estimates represent what we have determined as potential Medicaid unwinding numbers for American Indian/Alaska Natives at a particular point in time, acknowledging that the data is constantly changing and updating.

- Availability of disenrollment data varies by state, both in terms of up-to-date information (depending on when each state began unwinding; see slide 5) and breadth of information. KFF's Medicaid Unwinding Tracker uses data from state websites, which may not be comparable, as well as CMS.
### State Medicaid Disenrollment Dates, as of October 2, 2023

Date Unwinding Data Last Updated and Unwinding Start Date for Select States

<table>
<thead>
<tr>
<th>State</th>
<th>Unwinding Data Last Updated</th>
<th>Unwinding Start Date</th>
<th>State</th>
<th>Time Period of Available Data</th>
<th>Unwinding Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>AZ</td>
<td>August</td>
<td>April</td>
<td>OK</td>
<td>August</td>
<td>May</td>
</tr>
<tr>
<td>CA</td>
<td>August</td>
<td>July</td>
<td>OR</td>
<td>September</td>
<td>October*/June</td>
</tr>
<tr>
<td>IA</td>
<td>August</td>
<td>May</td>
<td>SD</td>
<td>June</td>
<td>April</td>
</tr>
<tr>
<td>MN</td>
<td>August</td>
<td>July</td>
<td>TN</td>
<td>June</td>
<td>June</td>
</tr>
<tr>
<td>MT</td>
<td>July</td>
<td>June</td>
<td>UT</td>
<td>August</td>
<td>May</td>
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<td>NC</td>
<td>August</td>
<td>July</td>
<td>WA</td>
<td>August</td>
<td>June</td>
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<tr>
<td>NM</td>
<td>July</td>
<td>May</td>
<td>WI</td>
<td>August</td>
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</tr>
<tr>
<td>NV</td>
<td>August</td>
<td>June</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*CMS reports October as the Effective Date of First Anticipated Terminations for First Cohort of Renewals for Oregon. However, since Oregon has reported the number of people ineligible and the first losses occurred at the end of June, we are using June as the effective date of unwinding in our calculations.*
We originally used two methods to calculate estimates for the number of AI/ANs disenrolled from Medicaid:

**Method #1:** Multiplying the number of Medicaid disenrollments (KFF) by AI/AN Medicaid enrollment rates in 2021 (ACS).

AI/AN Medicaid enrollment rates in 2021 were calculated by dividing the number of AI/AN enrolled in Medicaid by the total number enrolled in Medicaid in 2021.
Methods (Part Two)

We originally used two methods to calculate estimates for the number of AI/ANs disenrolled from Medicaid:

**Method #2:** Multiplying Medicaid disenrollment rates by the number of AI/AN enrolled in Medicaid in 2021 (ACS).

Medicaid disenrollment rates were calculated by dividing the number of Medicaid disenrollments by total number of Medicaid enrollments. Data on total number of Medicaid enrollments for each state were from the month prior to when unwinding began in that state (see slide 5).
Select State AI/AN Medicaid Disenrollment Estimates, as of October 2, 2023

Method #1: Multiply total number of Medicaid disenrollments by AI/AN Medicaid enrollment rates in 2021.
Method #2: Multiply Medicaid disenrollment rates by number of AI/AN enrolled in Medicaid in 2021.
Methods (Part Three)

Upon looking further into each states’ reporting of Medicaid enrollments and disenrollments, we devised a third method to estimate the number of AI/ANs disenrolled from Medicaid:

**Method #3:** Multiplying the number of Medicaid disenrollments (KFF) by AI/AN Medicaid enrollment rates, as reported in state Medicaid enrollment data.

Some states provide a breakdown by race and/or ethnicity for their Medicaid enrollment data. For these states, we pulled AI/AN data from the most recent month available.
Select State AI/AN Medicaid Disenrollment Estimates, as of October 2, 2023 (cont.)

States for which Method 3 is lower than Method 1 & 2

**Method #3:** Multiplying the number of Medicaid disenrollments (KFF) by AI/AN Medicaid enrollment rates, as reported in state Medicaid enrollment data.
Select State AI/AN Medicaid Disenrollment Estimates, as of October 2, 2023 (cont.)

States for which Method 3 is between Method 1 & 2

Method #3: Multiplying the number of Medicaid disenrollments (KFF) by AI/AN Medicaid enrollment rates, as reported in state Medicaid enrollment data.
Select State AI/AN Medicaid Disenrollment Estimates, as of October 2, 2023 (cont.)

State for which Method 3 is higher than Method 1 & 2

Method #3: Multiplying the number of Medicaid disenrollments (KFF) by AI/AN Medicaid enrollment rates, as reported in state Medicaid enrollment data.
We found that a couple of states directly report disenrollment data for American Indian/Alaska Natives throughout unwinding. For these states (Oklahoma and Minnesota), we pulled AI/AN disenrollment data from the state websites and displayed them on the next slide, alongside our estimates generated using Methods 1-3.
State-Reported AI/AN Medicaid Disenrollments, as of October 2, 2023

Method #1: Multiply total number of Medicaid disenrollments by AI/AN Medicaid enrollment rates in 2021.
Method #2: Multiply Medicaid disenrollment rates by number of AI/AN enrolled in Medicaid in 2021.
Method #3: Multiplying the number of Medicaid disenrollments (KFF) by AI/AN Medicaid enrollment rates, as reported in state Medicaid enrollment data.
References


Nevada Department of Health and Human Services. (2023). Monitoring Medicaid Enrollments, Disenrollments, and Renewals in Nevada. Retrieved October 2, 2023 from https://app.powerbigov.us/view?r=eYe3JrlajGW2wi4NDe7ZDnJfMy00ZmRlWJhMTk1NDI3NzMyUmUyYTU0MGU2LW10c29sdXR5YW90c2FhLTE1NDRkMjcwMzk4MCJ9

Oregon Health Authority. (2023, August 22). Latest monthly data continues to show nearly 8 out of 10 Oregonians keeping medical benefits as state reviews eligibility. Retrieved September 5, 2023 from https://content.govdelivery.com/accounts/ORDHS/bullets/36c3bbd

Oregon Health Authority. (2023). Medicaid Monthly Population Report for Oregon. Retrieved October 2, 2023 from https://app.powerbigov.us/view?r=eYe3JrlalMTRhMmNjZDktYy4OS00MzUxLTI4NTA1NzI4LiwiQTYyM2U4LTk1L24yMzktNk5Y04ZJQ4LTEzYWRjOTQ1MmY0Yy39

References (cont.)


Questions?

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<thead>
<tr>
<th>State</th>
<th>Percent Missing Race Data</th>
<th>Race Data Collection Standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>AZ</td>
<td>34.43%</td>
<td>Single Race (AI/AN Only)</td>
</tr>
<tr>
<td>IA</td>
<td>28%</td>
<td>Single Race and Ethnicity (non-Hispanic AI/AN Only)</td>
</tr>
<tr>
<td>MN</td>
<td>8.33%</td>
<td>Single Race (AI/AN Only)</td>
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<tr>
<td>MT</td>
<td>No information</td>
<td>No information</td>
</tr>
<tr>
<td>NC</td>
<td>0.9%</td>
<td>Single Race (AI/AN Only)</td>
</tr>
<tr>
<td>NM</td>
<td>No information</td>
<td>No information</td>
</tr>
<tr>
<td>OK</td>
<td>6%</td>
<td>Single Race (AI/AN Only)</td>
</tr>
<tr>
<td>OR</td>
<td>31.2%</td>
<td>Single Race (AI/AN Only)</td>
</tr>
<tr>
<td>SD</td>
<td>0.0%</td>
<td>Single Race (AI/AN Only)</td>
</tr>
<tr>
<td>WA</td>
<td>7.31%</td>
<td>Single Race (AI/AN Only)</td>
</tr>
</tbody>
</table>