

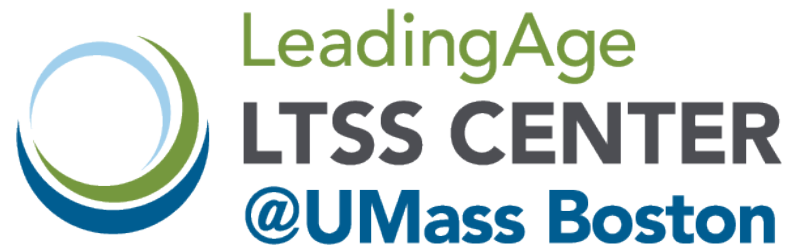


Impact of Loss of Medicaid and Profile of Medicaid Beneficiaries Age 50-64 Affected by Work Requirements

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Research bridging policy and practice

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What Happens to people who involuntarily lose their Medicaid Coverage?

How do we Evaluate what may happen to people who lose their Medicaid Coverage?

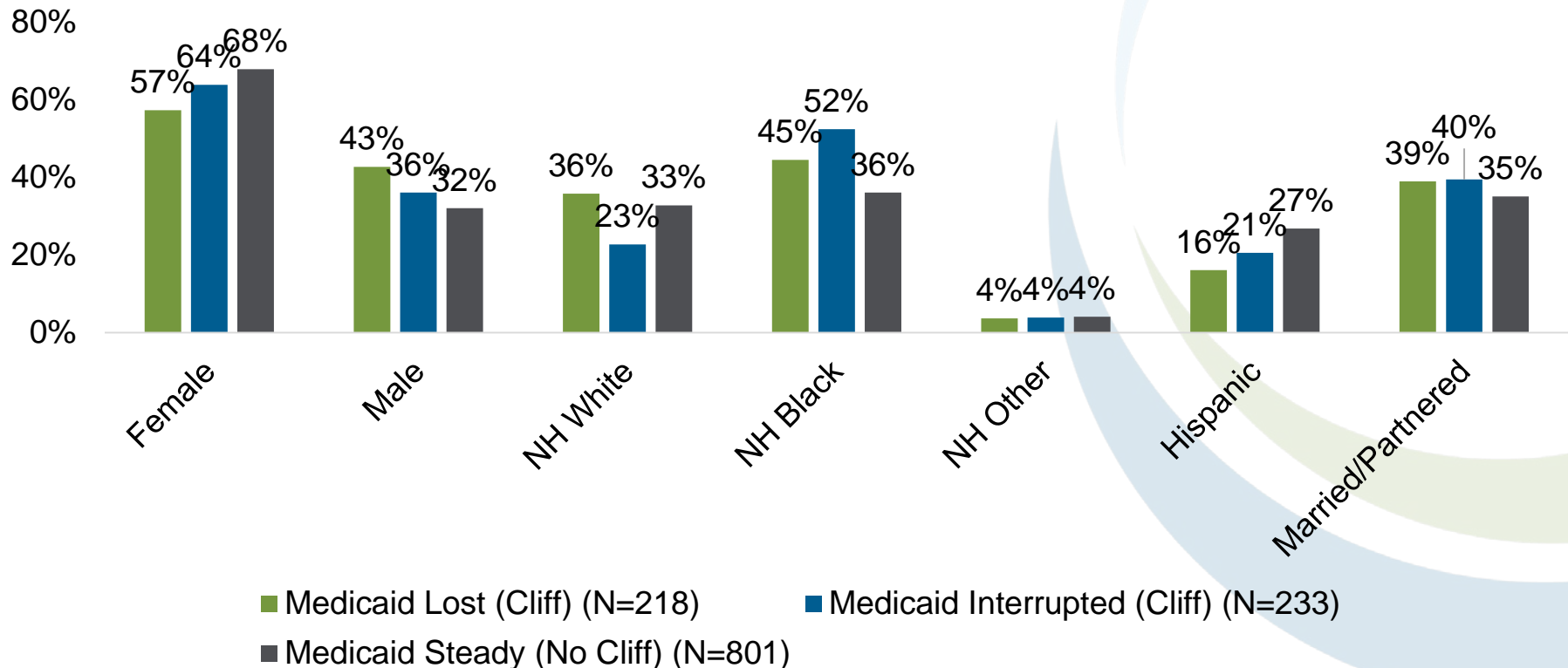
- Best way to determine impact of losing Medicaid, is to examine what happens when people involuntarily lose their Medicaid.
- Such a group of people include those that hit the “Medicare Cliff” – discontinuity in eligibility criteria for people on Medicaid before age 65 compared to after age 65 (where more stringent criteria apply), results in lost coverage.
- The analysis compares these three groups:
 - **Medicaid Lost (Cliff):** Participants who had Medicaid prior to Medicare Eligibility and lost Medicaid permanently (i.e. no Medicaid since Medicare Eligibility/hitting Cliff over 10 year follow-up).
 - **Medicaid Interrupted (Cliff):** Participants who had Medicaid prior to Medicare Eligibility and lost Medicaid temporarily (i.e. reacquired Medicaid after losing it during Medicare Eligibility/hitting Cliff over 10 year follow-up).
 - **Medicaid Steady (No Cliff):** Participants who had Medicaid prior to Medicare Eligibility and who had no changes at or post Medicare Eligibility (i.e. no changes to Medicaid utilization/no Cliff over 10 year follow-up).

Method

- Data source: Health and Retirement Study for the years 1998 – 2020
- Track individuals from the time that they become Medicare eligible over a 10 year follow-up period.
- Compare three distinct sample groups on key variables of interest.

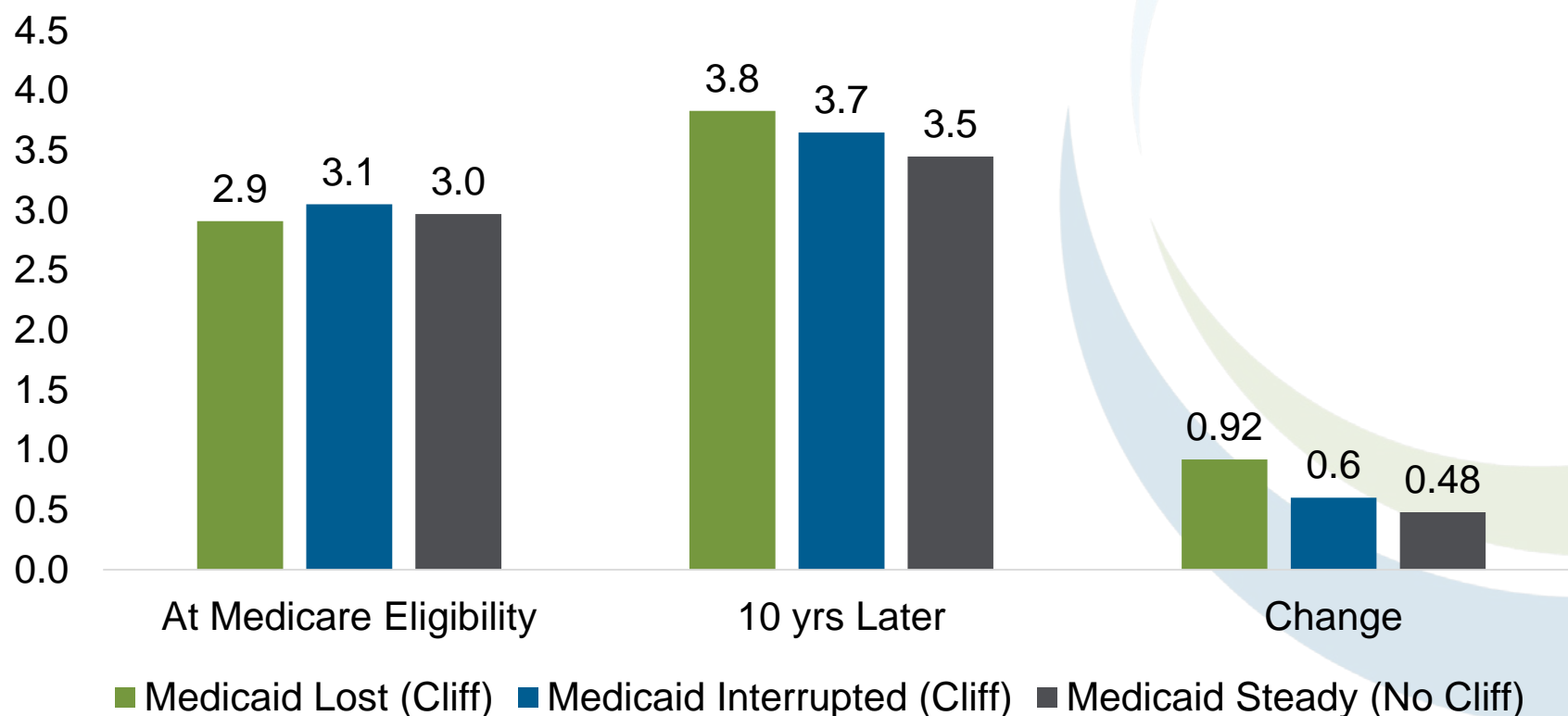
Males and Whites have a higher percentage who permanently lose Medicaid Coverage compared to those who keep it and/or experience an interruption

Socio-Demographic Characteristics of Three Samples over 1998-2020 time period



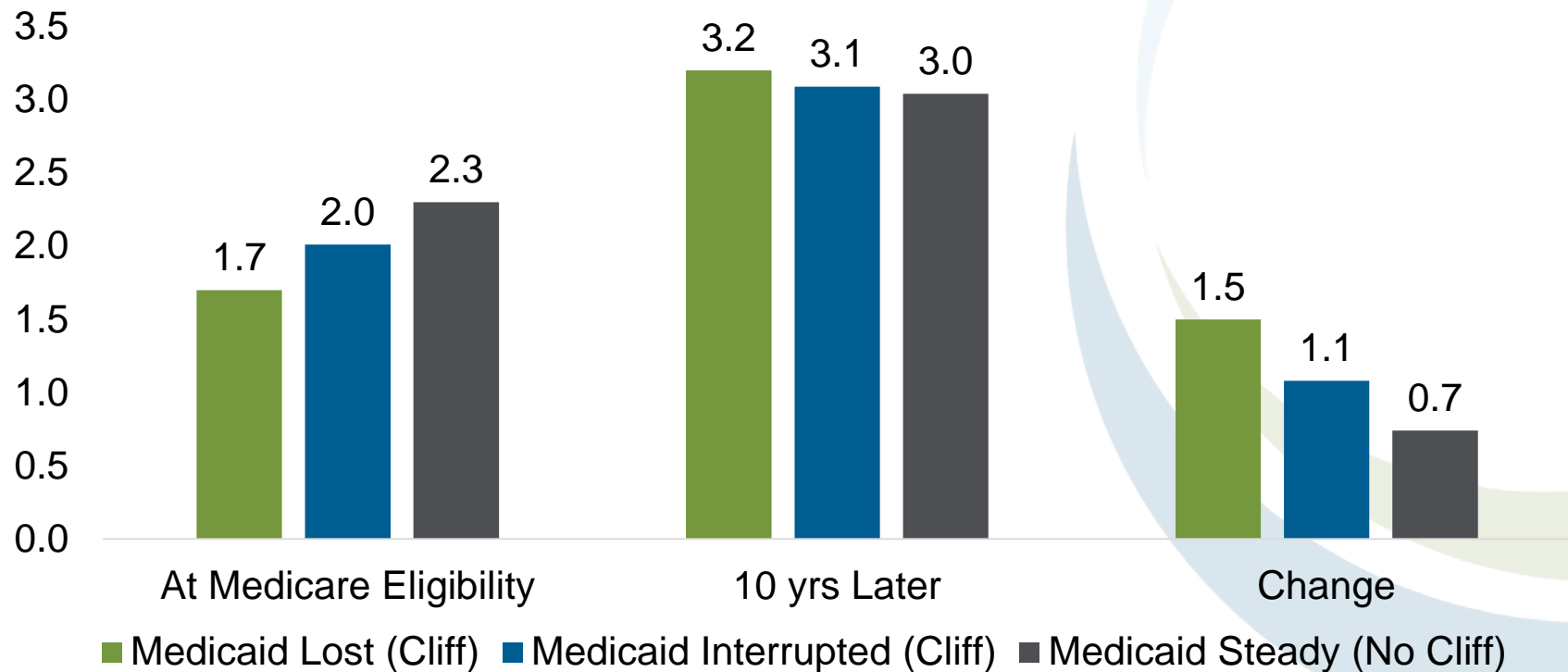
Permanent Loss of Medicaid associated with higher number of chronic conditions and greatest change in chronic conditions

Number of Chronic Conditions by Medicaid Status
(1998-2020)



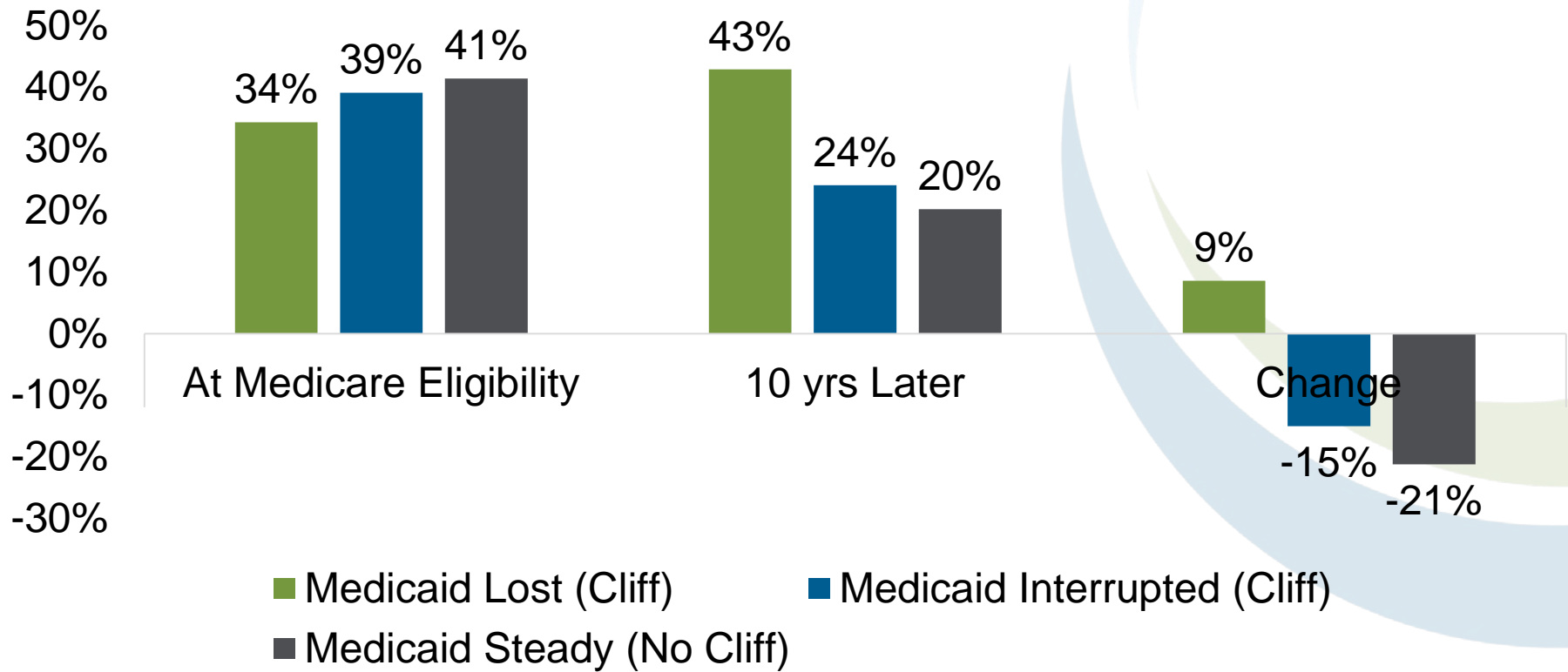
Permanent Loss of Medicaid associated with higher number of ADL Limitations and greatest change in ADL status

Number of Limitations in Activities of Daily Living by Medicaid Status (1998-2020)



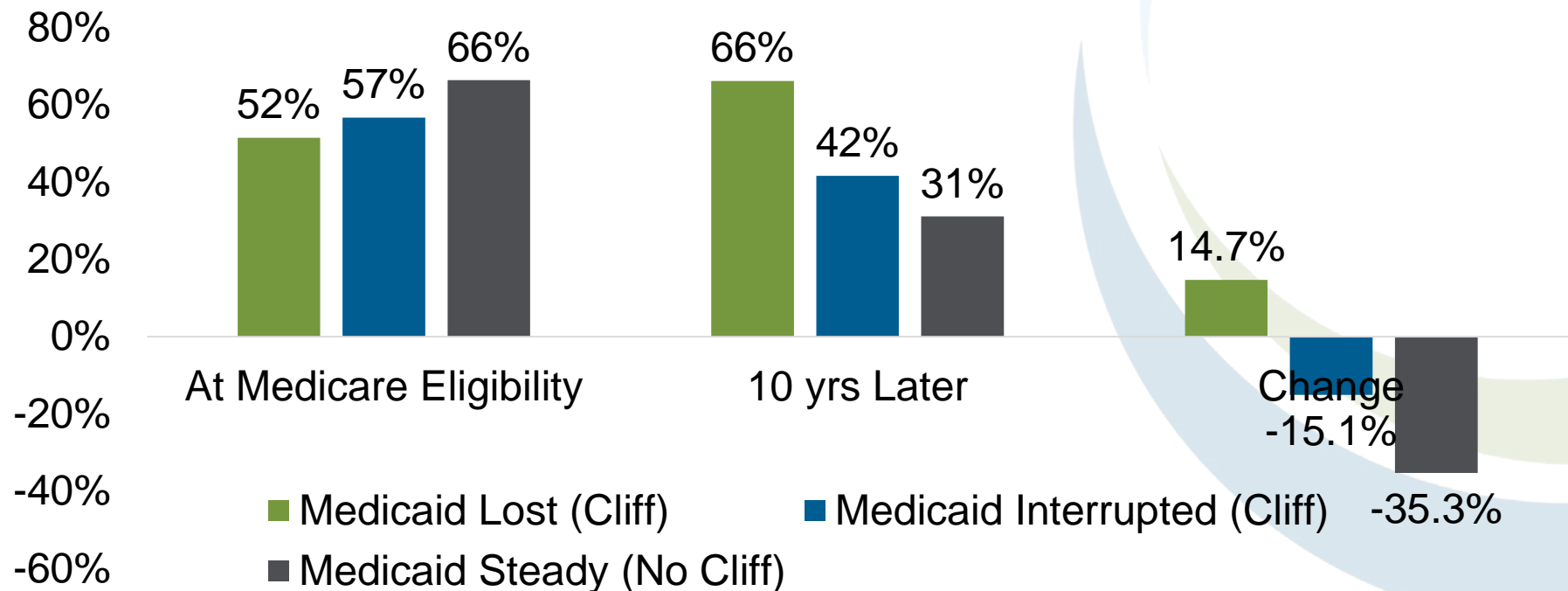
Permanent Loss of Medicaid associated with higher percentage reporting depression and largest increase in Percentage reporting Depression

Percentage of Samples with Depression by Medicaid Status (1998-2020)



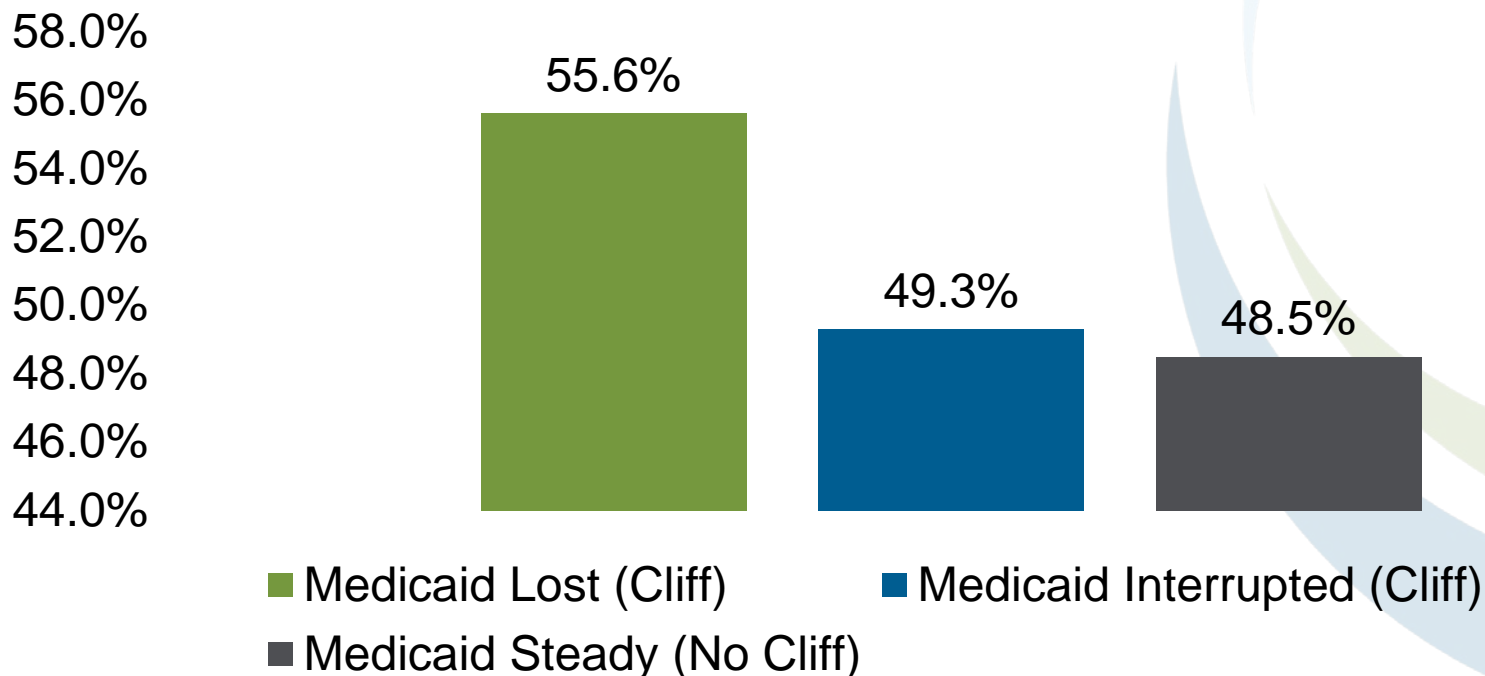
Permanent Loss of Medicaid associated with higher percentage reporting fair/poor health and largest increase in Percentage reporting fair/poor health

Percent Reporting Fair or Poor Health by Medicaid Status (1998-2020)



Permanent Loss of Medicaid associated with higher Mortality

Percentage that Died within 10 Years of Medicare Eligibility by Medicaid Status (1998-2020)

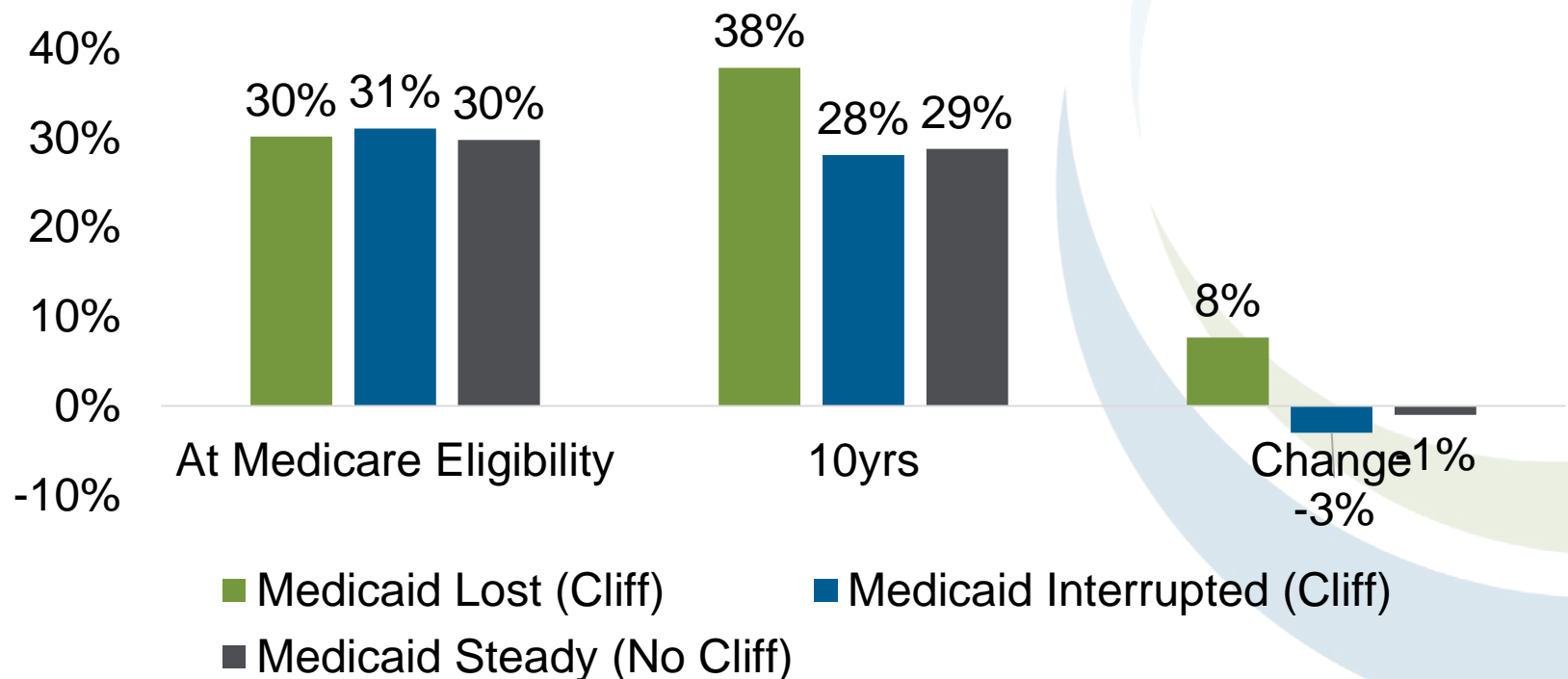


Key Findings on Health Status (statistically significant differences)

- Those who hit the Medicare Cliff and never regain eligibility:
 - Start off in better health than the other groups
 - Experience the greatest deterioration in health status over a 10 year period across a range of measures
 - ✓ Greater ADL loss
 - ✓ Greater rates of reported Depression
 - ✓ Greater rates of chronic conditions
 - ✓ Greater rates of self-reported poor/fair health
 - Have higher mortality rates than the other groups

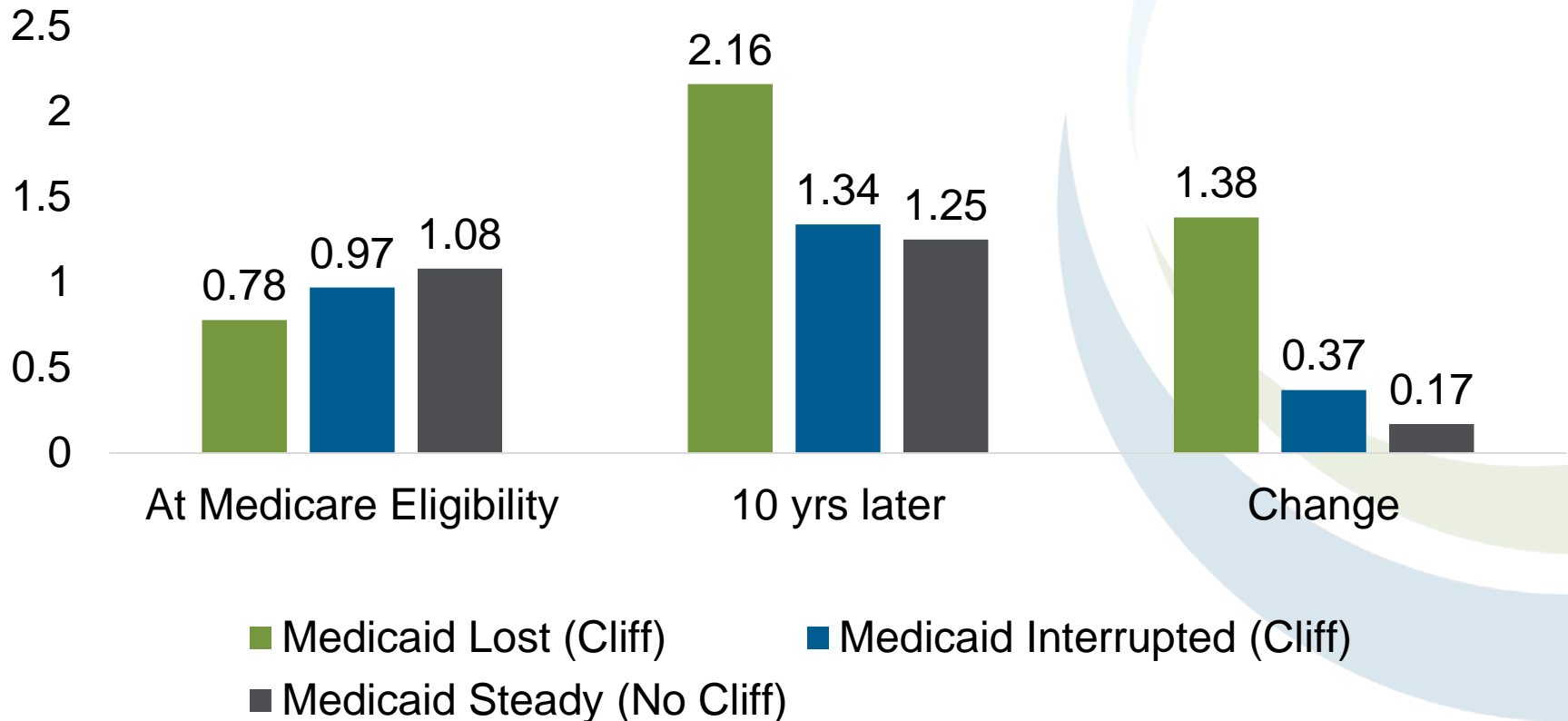
Permanent Loss of Medicaid associated with greater hospitalizations

Percentage with Hospital Stays at Medicare Eligibility and 10 Years Later (1998-2020)



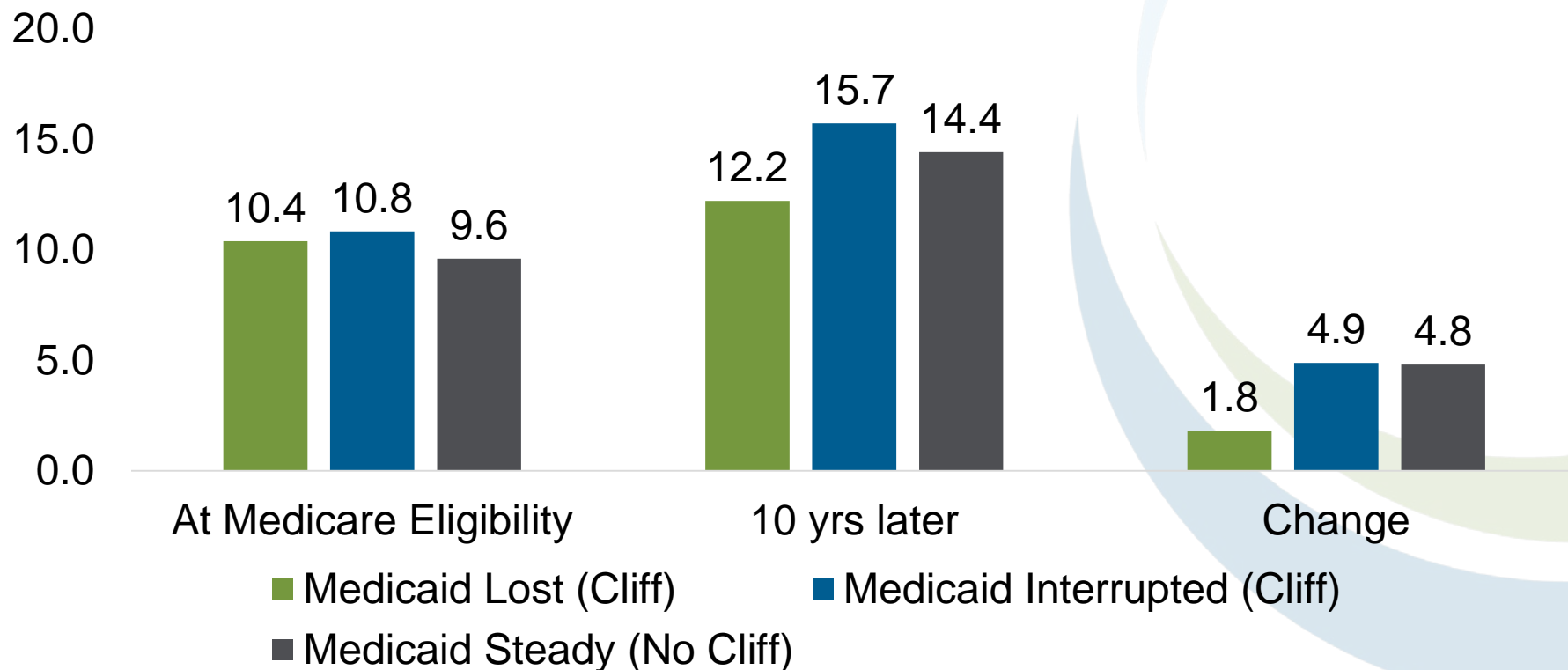
Permanent Loss of Medicaid associated with greater hospital admission days

Hospital Admitted Days at Medicare Eligibility and 10 Years Later (mean) (1998-2020)



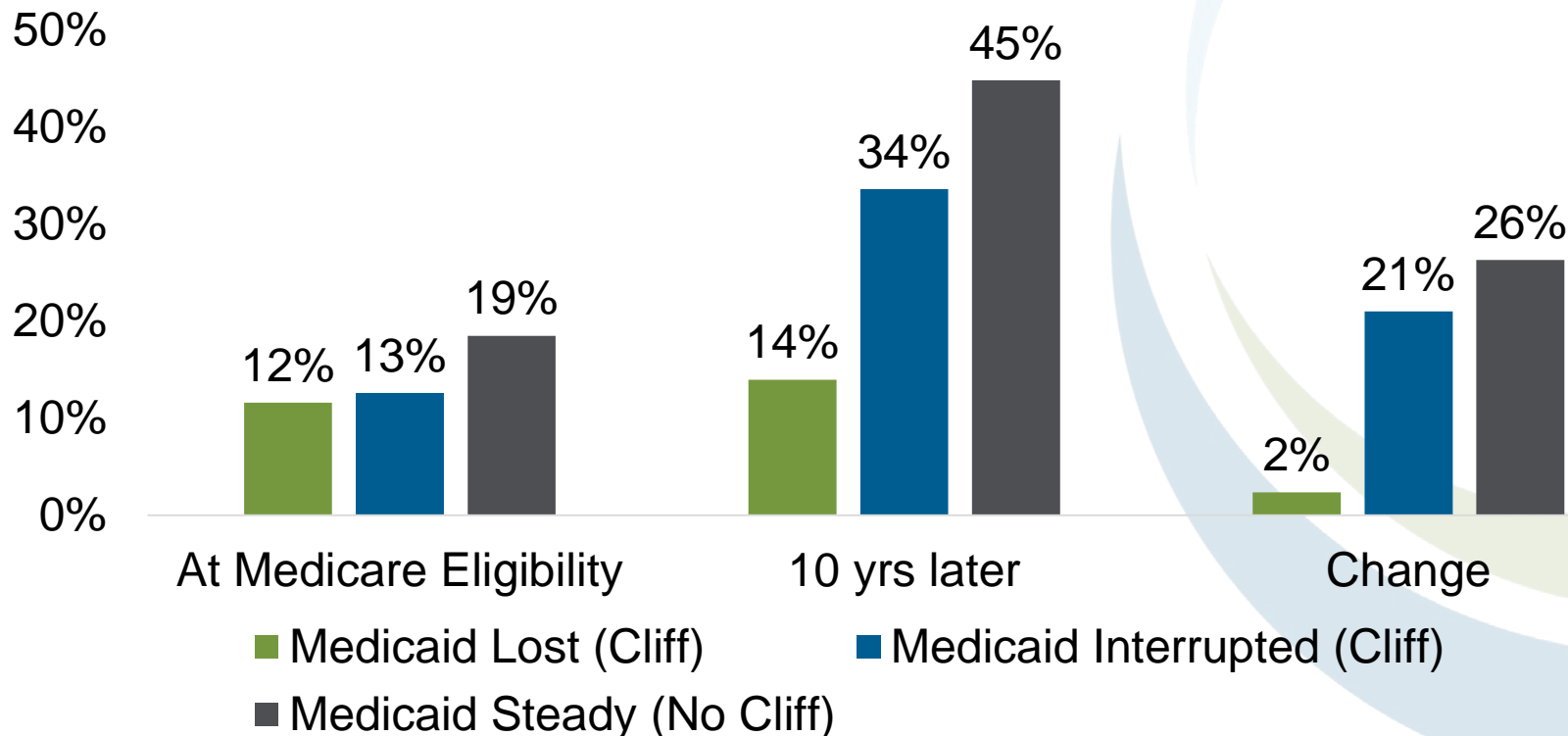
Permanent Loss of Medicaid associated with lower rates of physician visits

Doctor Visits at Medicare Eligibility and 10 Years Later
(1998-2020)



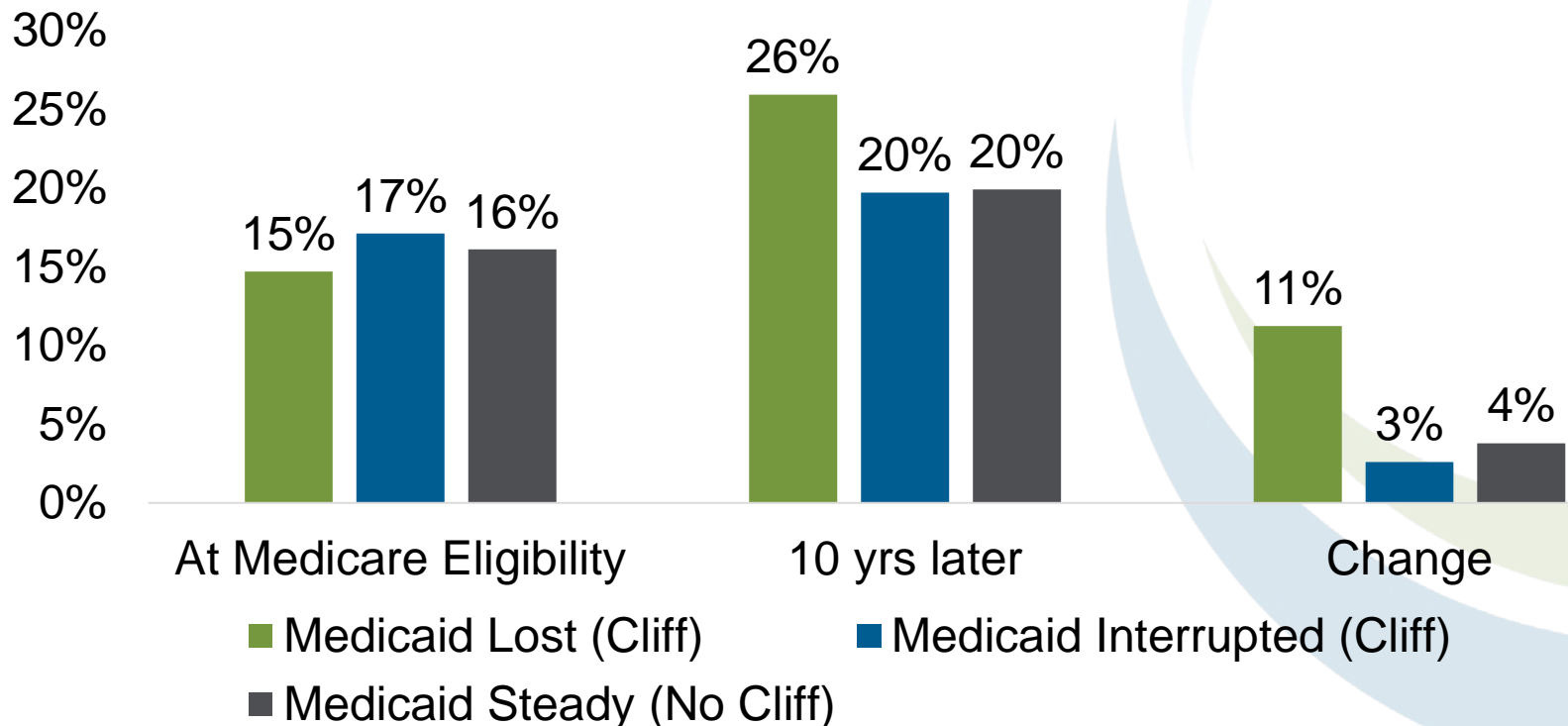
Permanent Loss of Medicaid associated with lower use of home health care

Percentage with Home Care at Medicare Eligibility and 10 Years Later (mean) (1998-2020)



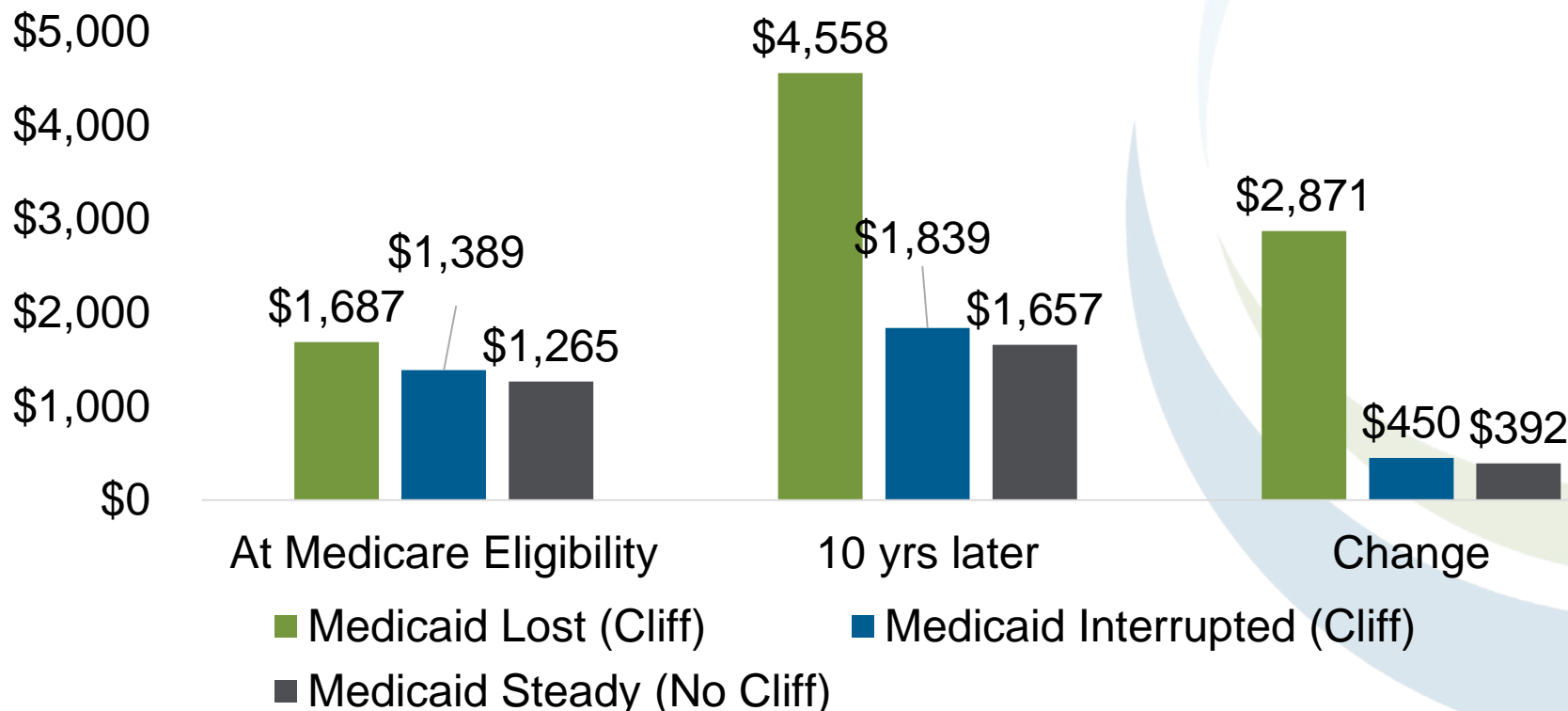
Permanent Loss of Medicaid associated with greater Outpatient Surgeries

Percentage with Outpatient Surgery at Medicare Eligibility and 10 Years Later (mean) (1998-2020)



Permanent Loss of Medicaid associated with Higher out-of-pocket payments

Out of Pocket Medical Costs at Medicare Eligibility and 10 Years Later (mean) (1998-2020)

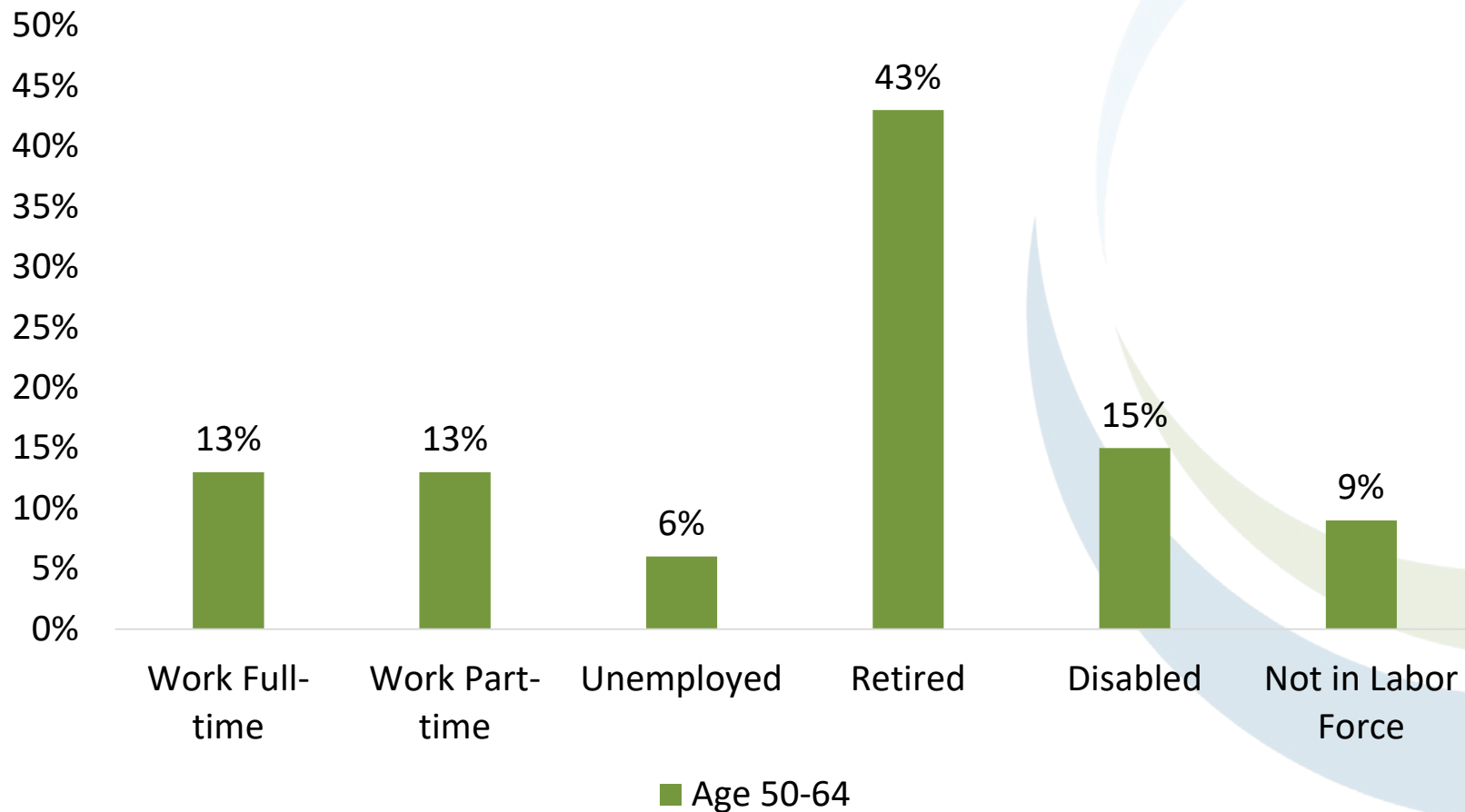


Key Findings on Health Services Utilization (statistically significant differences)

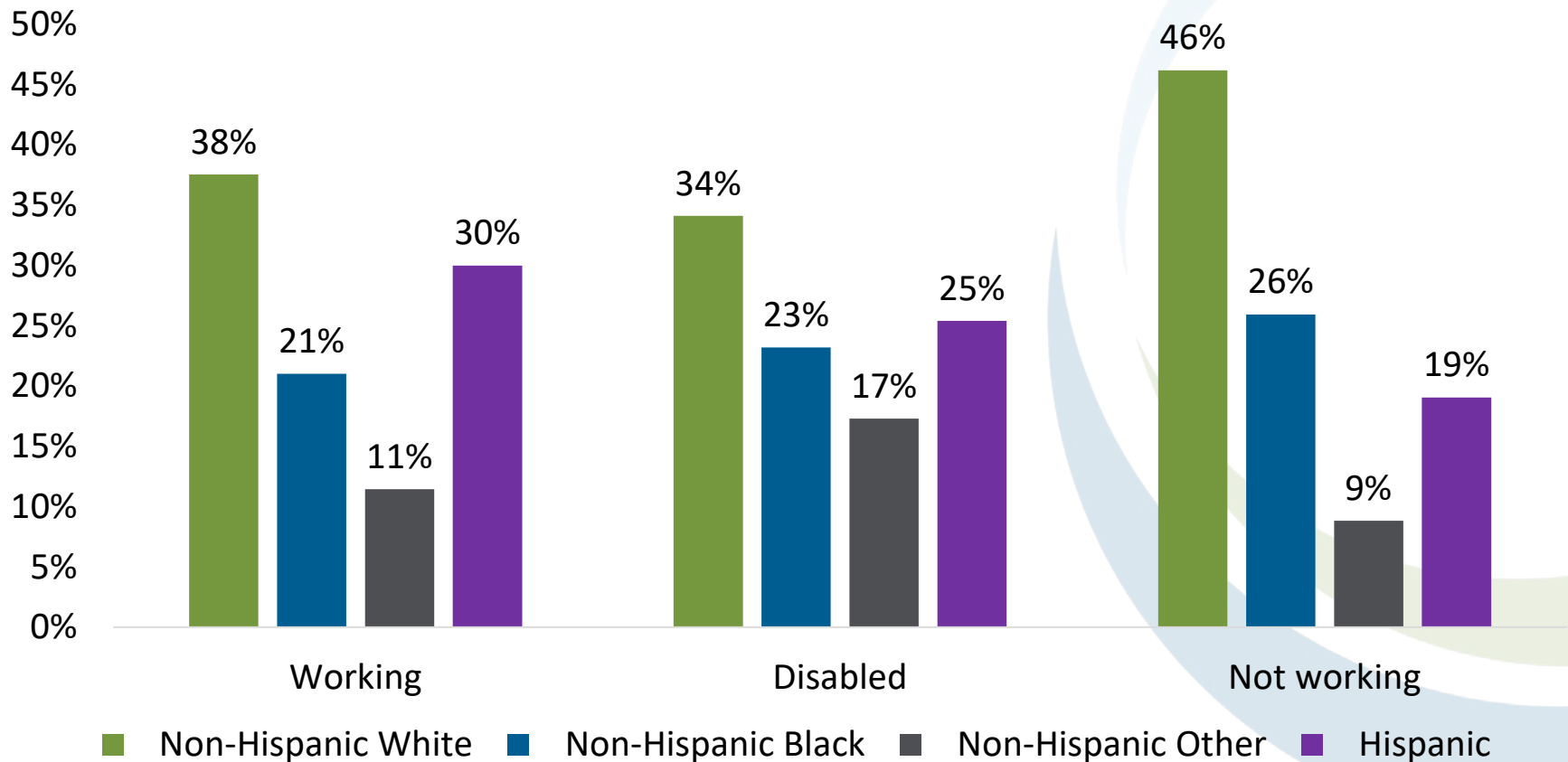
- Those who lose Medicaid Permanently:
 - Have higher utilization of multiple services the longer they remain off of Medicaid
 - Experience the greatest increase in health services use over a 10 year period across the following service categories:
 - ✓ Greater percentage reporting Inpatient hospitalizations
 - ✓ Higher admission days
 - ✓ Lower percentage reporting physician visits
 - ✓ Lower percentage reporting home care use
 - ✓ Higher percentage reporting outpatient surgeries
 - ✓ Greater out-of-pocket health care spending

Who is Affected by Work Requirements among Medicaid Beneficiaries age 50 to 64?

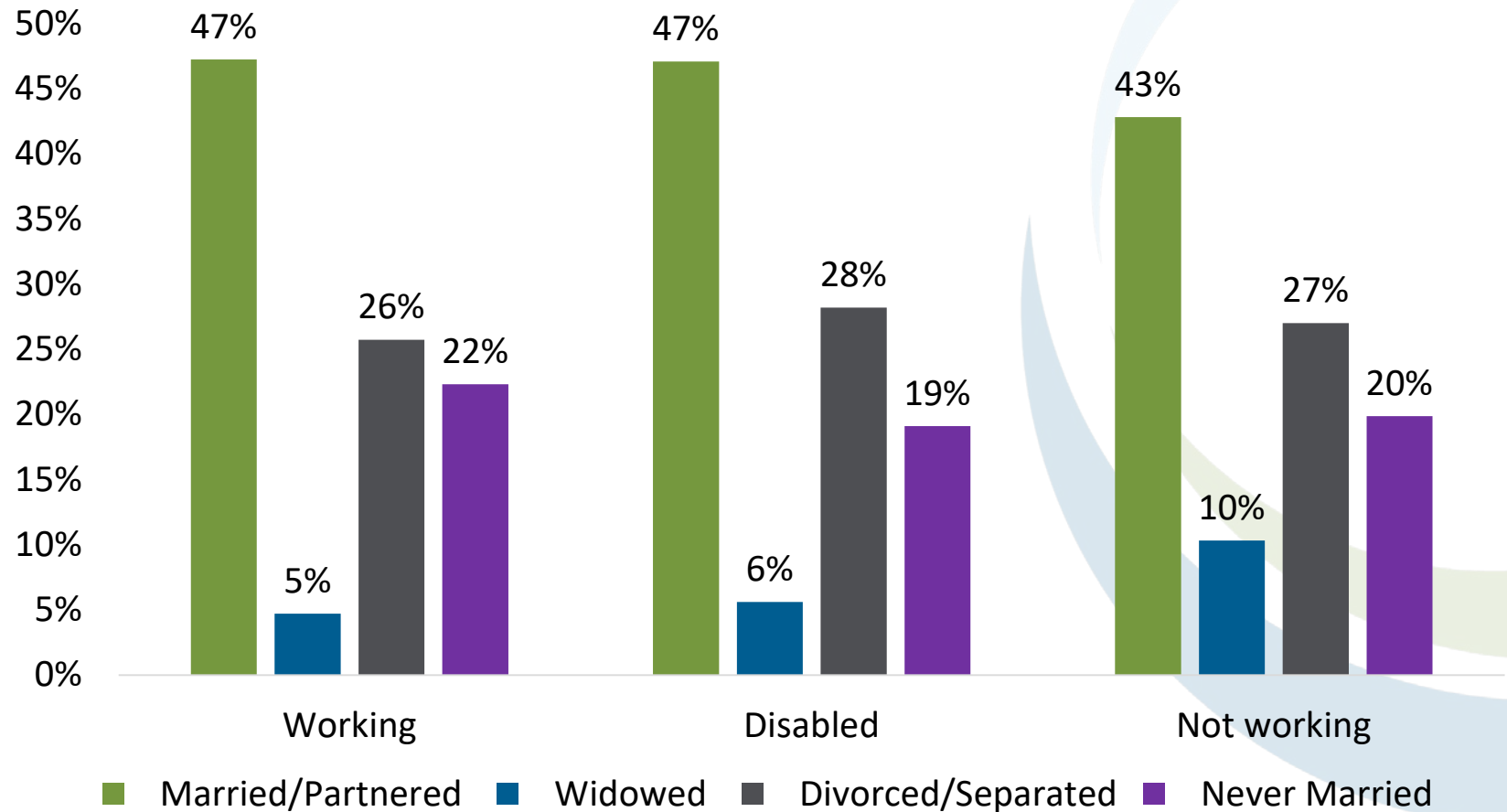
Percentage of Medicaid Beneficiaries Age 50-64 by Work Status (2020)



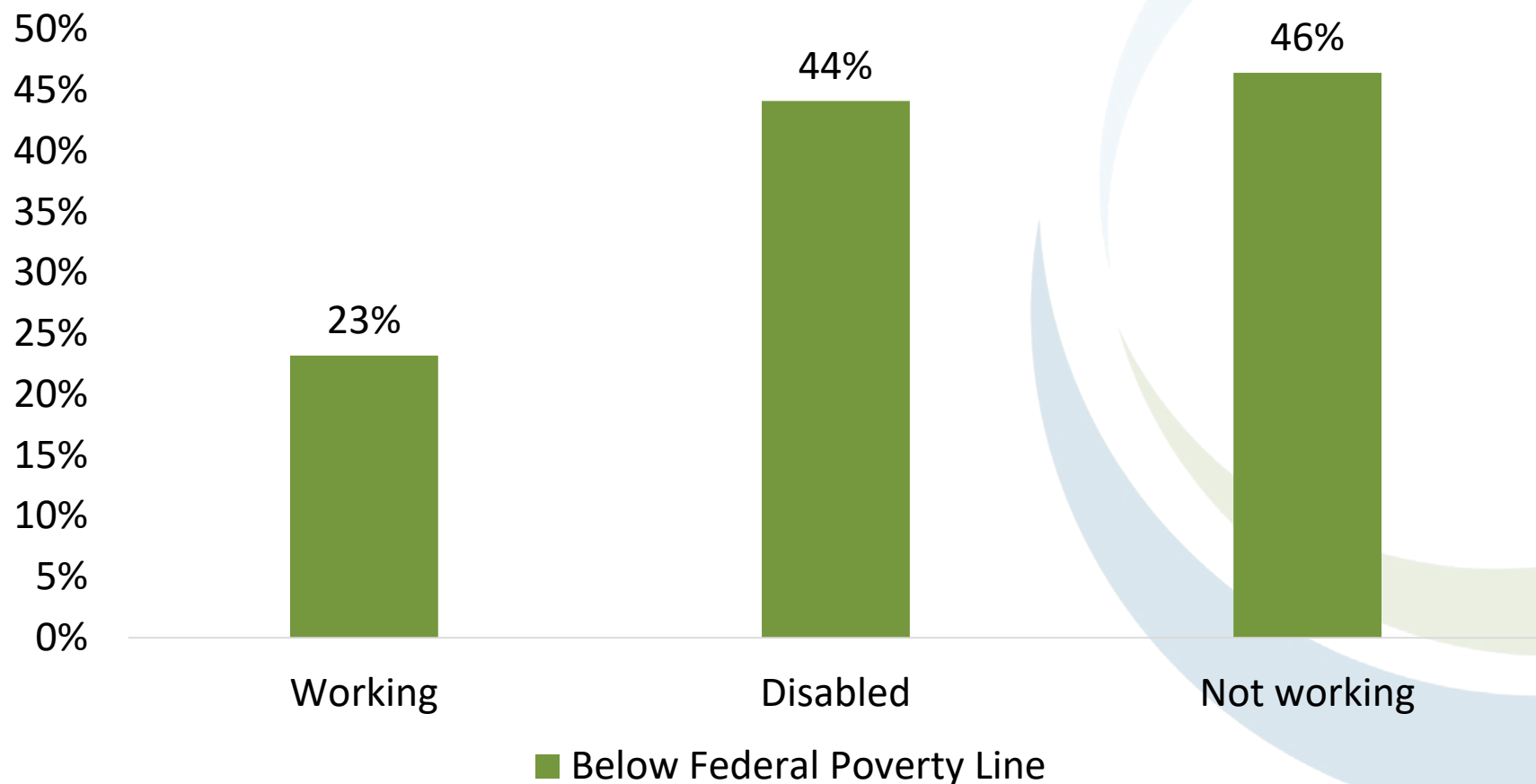
Medicaid Beneficiaries Age 50-64 by Work Status and Race/Ethnicity



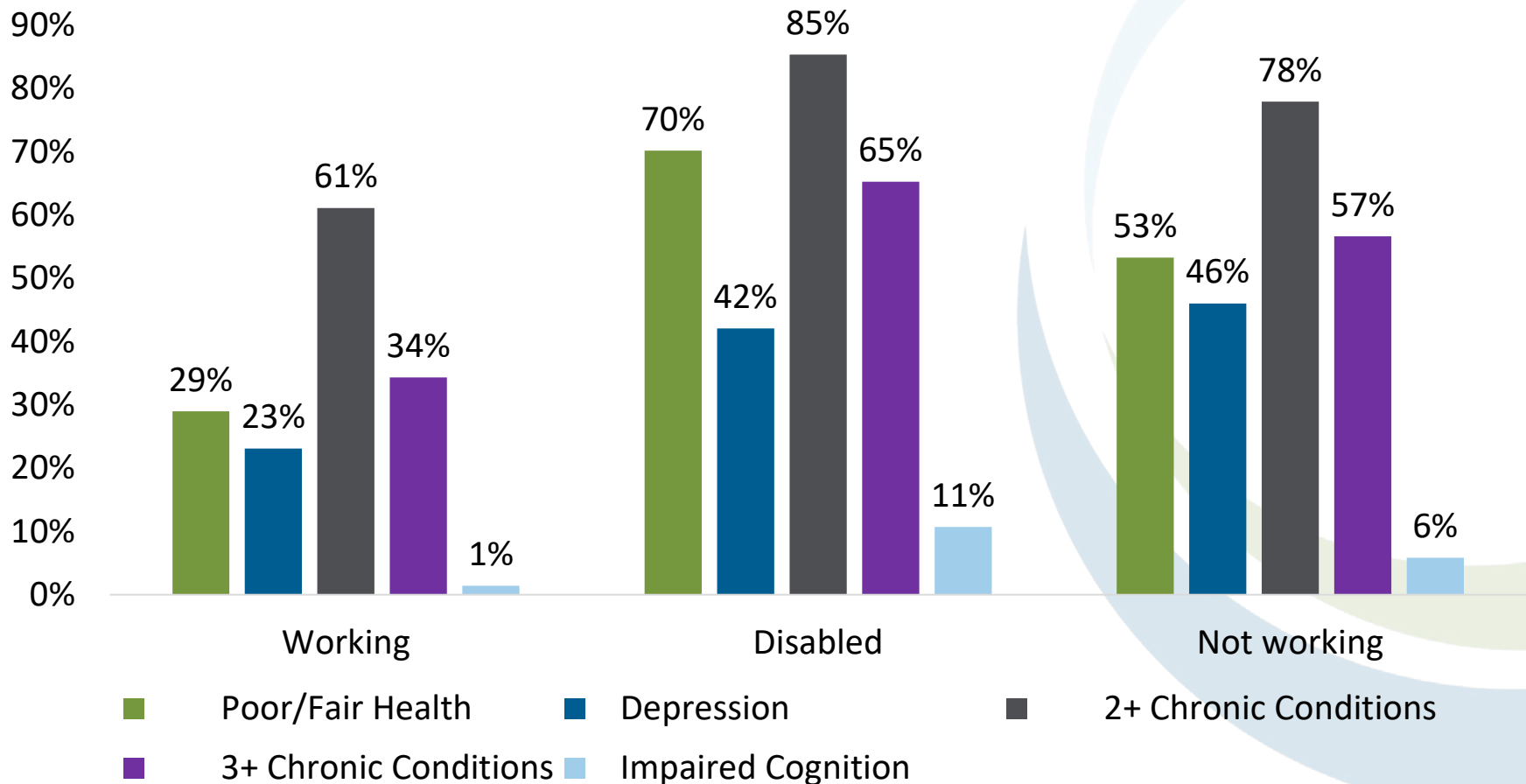
Medicaid Beneficiaries Age 50-64 by Work and Marital Status



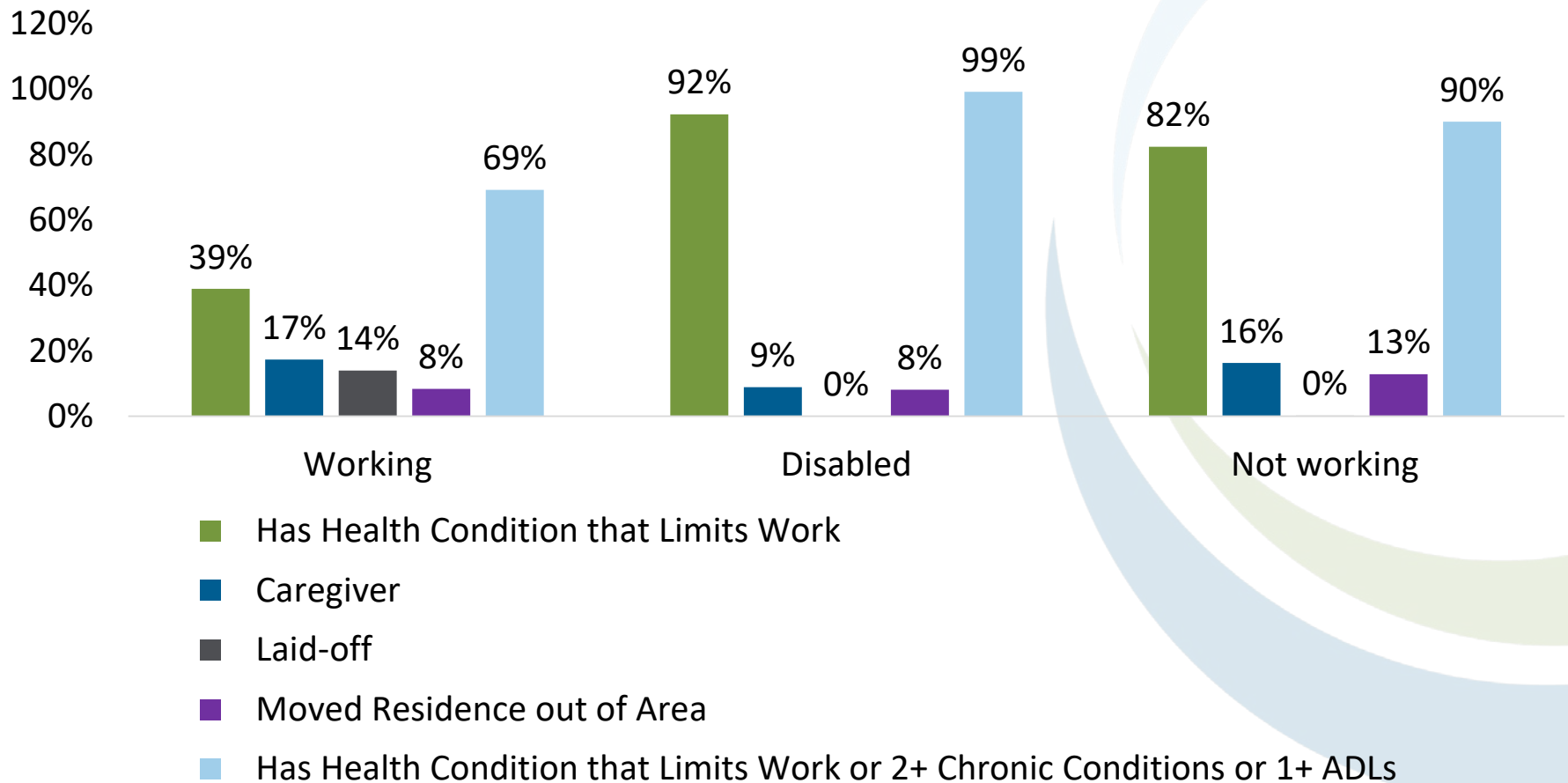
Slightly less than half of Medicaid Beneficiaries Age 50-64 who are not working, live below the Federal Poverty Line



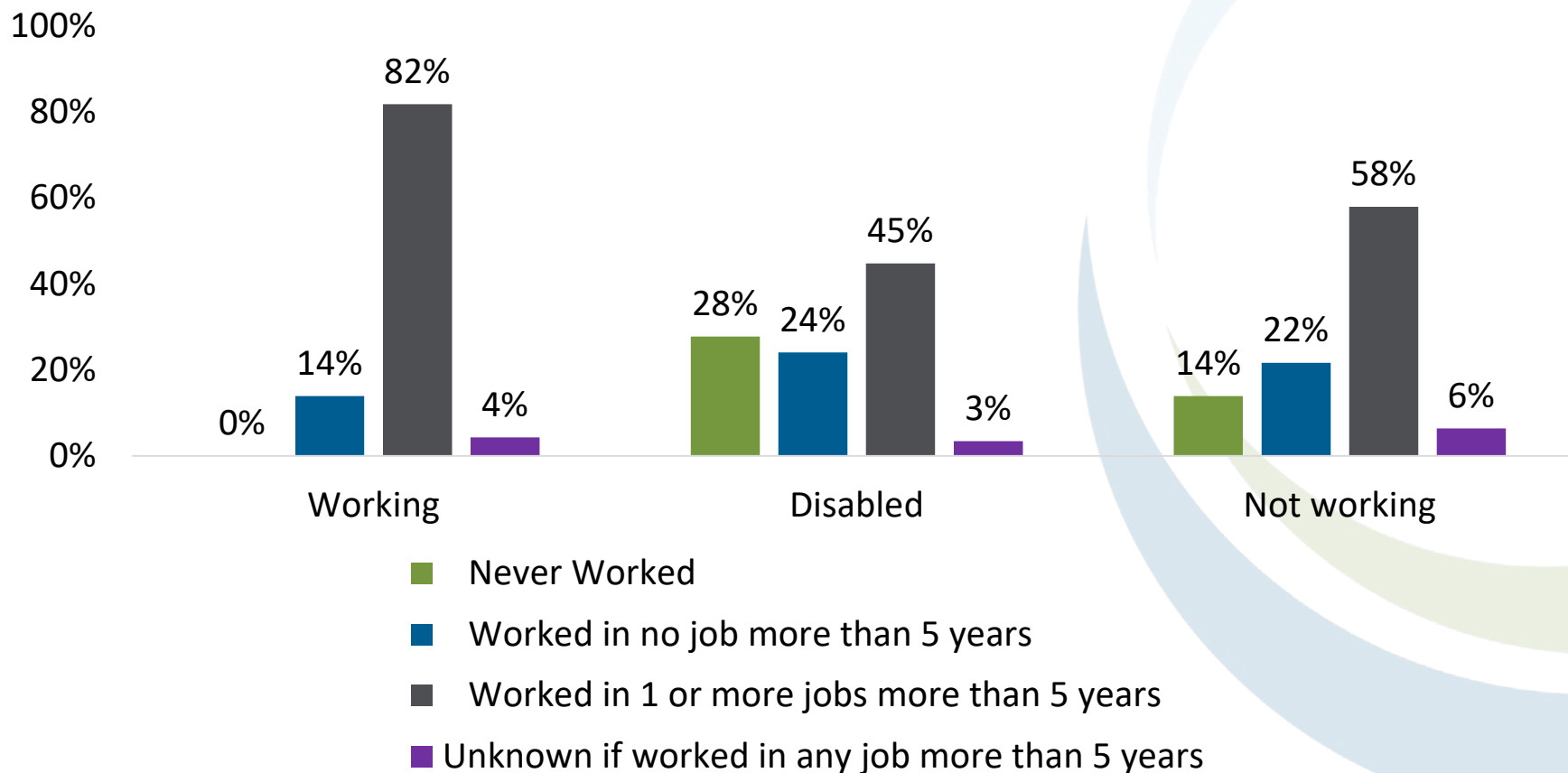
Eight in ten Medicaid Beneficiaries age 50 to 64 who are not working have two or more chronic conditions



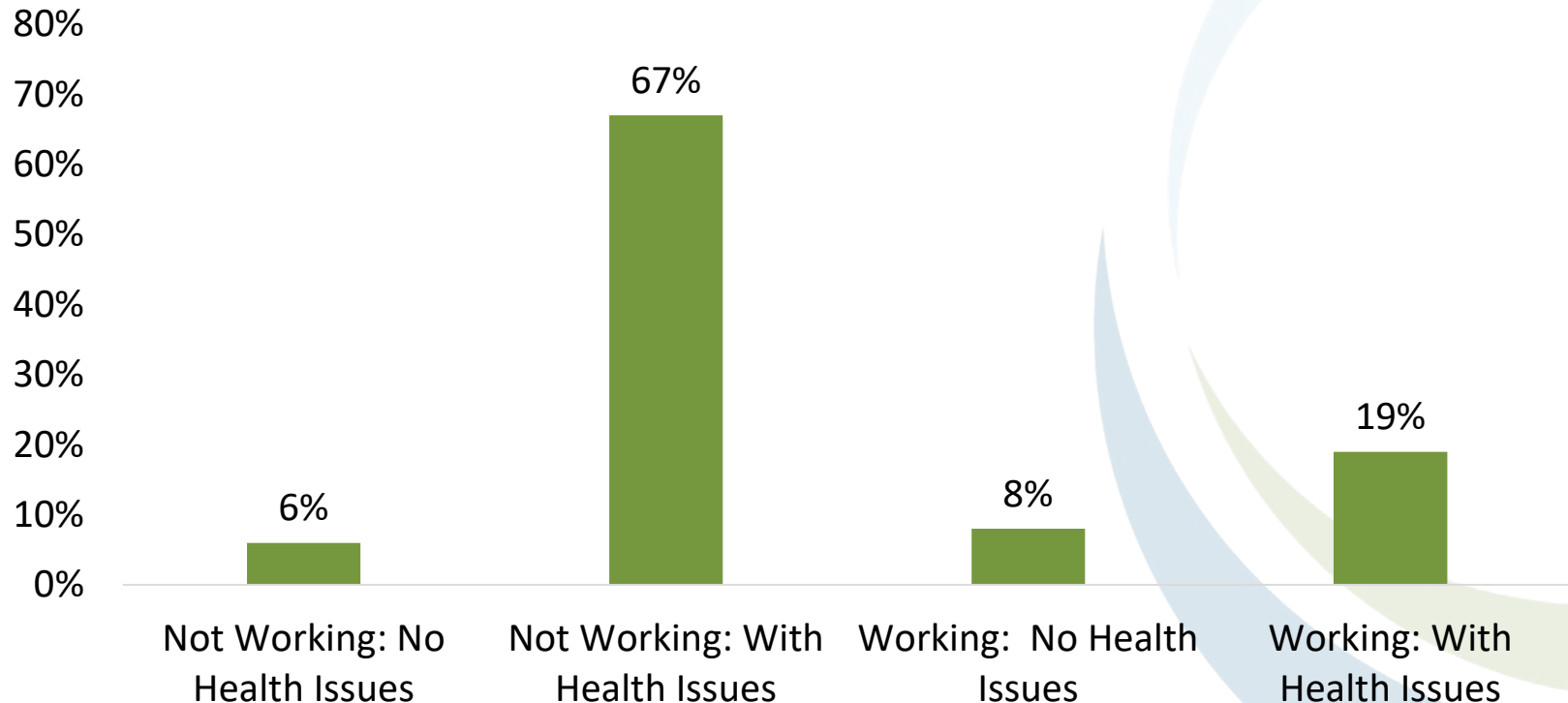
Nine in ten Medicaid beneficiaries age 50 to 64 who are not working have a health condition that limits their ability to work



Most Medicaid Beneficiaries Age 50-64 have worked in the past



Only 6% of Medicaid Beneficiaries age 50 to 64 have no health issues and are not working



Definition of Health Issues: (1) have "a health condition that limits work", or (2) 2+ chronic conditions (high blood pressure, heart disease, lung disease, stroke, diabetes, cancer, arthritis, diagnosed psychological problems); or 1+ ADLs (dressing, bathing, walking, eating, toileting, or getting in/out of bed).

Socio-Demographic Profile of 6% of Medicaid Beneficiaries Age 50 to 64 who are not Working and Have no Health issues

Socio-Demographic Characteristics	Result
<u>Average Age</u>	60.0
<u>Gender</u>	
Female	61.2%
Male	38.8%
<u>Race/Ethnicity</u>	
Non-Hispanic White	21.4%
Non-Hispanic Black	18.8%
Non-Hispanic Other	24.0%
Hispanic	35.8%
<u>Foreign Born</u>	52.6%

Socio-Demographic Profile of 6% of Medicaid Beneficiaries Age 50 to 64 who are not Working and Have no Health issues

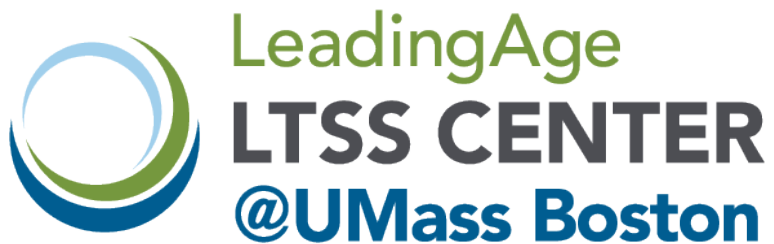
Socio-Demographic Characteristics	Result
<u>Marital Status</u>	
Married/Partnered	61.2%
Widowed	6.0%
Divorced/Separated	21.6%
Never Married	11.2%
<u>Financial Characteristics</u>	
Household Income (Median)	\$16,017
Net Wealth (Median)	\$80,500
Below FPL	42.0%

Socio-Demographic Profile of 6% of Medicaid Beneficiaries Age 50 to 64 who are not Working and Have no Health issues

Socio-Demographic Characteristics	Result
<u>Employment Factors</u>	
Has Health Condition that Limits Work	0.0%
Caregiver	16.6%
Laid-off	2.0%
Moved Residence out of Area	9.3%
<u>Job History</u>	
Never Worked	16.9%
Worked with no 5+ years job	18.3%
Worked with 1 or more 5+ years job(s)	50.4%
Worked unknown if any 5+ year job	13.4%

Key Observations

- Just over half of the age 50 to 64 Medicaid sample does not work (not including those who are disabled):
 - Nearly half of these Medicaid beneficiaries are retired
 - Non-Hispanic whites have the highest percentage of non-working beneficiaries & make up half of those retired
 - Most non-working beneficiaries report either a health issue that limits work, and/or 2+ chronic conditions and/or, 1+ ADLs
- Only 6% of the total age 50 to 64 Medicaid sample is not working and doesn't report any health issues that may limit work
 - This group has higher percentages of females, Hispanics, married individuals, retirees, and Pacific state residents
 - Nearly one-fifth are caregivers



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