

May 12, 2006

Secretary Mike Leavitt
Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear Secretary Leavitt:

The organizations listed below, representing health care providers, health care systems and other health care organizations, would like to share with you our concerns about a section of the Deficit Reduction Act (DRA, P.L. 109-171) that may have a significant impact on beneficiaries and the ability of states and health care providers to enroll patients in the Medicaid program.

The provision, section 6036 of the DRA, goes into effect on July 1, 2006, and requires Medicaid applicants claiming to be U.S. citizens to produce “satisfactory documentary evidence” of U.S. citizenship or nationality to qualify for benefits. The statute identifies acceptable documents such as a U.S. passport, U.S. Certificate of Naturalization or Certificate of U.S. Citizenship. However, it also permits you to specify, by regulation, other documents that can reliably prove U.S. citizenship.

On behalf of our organizations, we urge you to exercise the authority granted to you by section 6036 of the DRA to allow maximum flexibility in determining satisfactory documents to verify citizenship for Medicaid enrollment. We also ask that you adopt policies that satisfy the DRA requirement but accommodate special needs patients, such as current Medicaid recipients, who for various reasons, including mental impairment, are unable to retrieve the documents they need to prove citizenship.

By relying only on the documents specified in the statute as proof of citizenship, we believe significant, unintended enrollment barriers will exist for millions of low-income citizens who would otherwise meet all Medicaid eligibility requirements. Furthermore, we believe that certain groups should be “grandfathered” as presumptively eligible for Medicaid, and ask that you include such provisions in your implementation plan.

We also ask that you adopt implementation plans that limit the burden on hospitals to conduct verifications of current Medicaid recipients. While hospitals may play some role in verifying new applicants they assist with Medicaid enrollment, validating Medicaid eligibility is first and foremost the responsibility of state governments. The burden of verifying eligibility of existing Medicaid recipients should not be passed along to hospitals and other providers.

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While we appreciate the need to ensure Medicaid's integrity, we believe an inflexible documentation policy is a disservice to otherwise eligible and vulnerable individuals. We look forward to working with you to develop an acceptable policy that preserves the Medicaid safety net for America's neediest population.

Sincerely,

American Hospital Association
Association of American Medical Colleges
The Catholic Health Association of the United States
Federation of American Hospitals
National Association of Children's Hospitals
National Association of Public Hospitals and Health Systems
Premier
VHA Inc.