

U.S. SENATOR BOB CASEY



CHAIRMAN Special Committee on Aging

The Disaster Relief Medicaid Act (DRMA)

Why do we need the Disaster Relief Medicaid Act?

As climate-related disasters increase, millions of people are being forced to abandon their homes and relocate with no idea of when they will be able to return. After Hurricane Katrina hit Louisiana in 2005, over one million evacuees were displaced to Texas, Arkansas, and parts of Mississippi, some had to move as far away as California and Massachusetts. The 2018 California wildfires forced over 350,000 individuals from their homes. In 2022 alone, 3.3 million Americans were displaced due to natural disasters.

The stresses of relocating can be even more challenging for individuals and families who depend on Medicaid to access essential services, medical equipment and supplies, and treatments. Because Medicaid is partially funded by the federal government but administered by the state, a person must be a resident of the state to receive Medicaid services. In addition to losing their homes and communities, Medicaid beneficiaries who are forced to relocate also risk losing access to the care they need.

Older adults and people with disabilities are especially hard hit by emergency relocations. People receiving Medicaid home and community-based services (HCBS) do so through a waiver that each state applies for through the federal government. Many states have waiting lists that do not carry over when people move to another state. The loss of health care and long-term services and supports threatens these individuals' health, independence, quality of life, job opportunities and more.

What will the Disaster Relief Medicaid Act do?

The Disaster Relief Medicaid Act would ensure that individuals eligible for Medicaid who are forced to relocate due to a disaster can continue to access their Medicaid-supported services. This legislation would designate an individual who resides in an area covered under a national disaster or public health emergency declaration as a "Relief-Eligible Survivor" and allow them continued Medicaid coverage.

The Disaster Relief Medicaid Act provides a limited time, one hundred percent federal match for displaced individuals and technical assistance and support for states to develop innovative strategies to respond to an influx of out-of-state individuals. The bill also creates a grant program to help states develop an emergency response corps to provide home and community-based services. It would mean that disaster relocation will never again force Medicaid recipients to lose access to health care and other services they rely on.

Disaster Relief Medicaid Act: Section-By-Section Summary

Section 1 – Short Title

Officially names the legislation the Disaster Relief Medicaid Act.

Section 2 – Medicaid Relief for Disaster Survivors

Ensures Medicaid services and supports are available for individuals forced to relocate to another state as a result of a disaster or emergency. Designates a Medicaid-eligible individual who resides in an area covered under a presidential disaster declaration, a national emergency declaration, or a public health emergency declared by the Secretary of Health and Human Services as a Relief-Eligible Survivor and permits them to continue to access their Medicaid services if they are forced to relocate to another state as a result of the disaster.

Section 3 – Promoting Effective and Innovative State Responses to Increased Demand for Medical Assistance Following a Disaster

Provides technical assistance and support to develop innovative state strategies to respond to an influx of out-of-state individuals due to a disaster and permits states to utilize out-of-state providers in order to help meet that demand. This section also creates a grant to help states develop an emergency response corps to provide home and community-based services to Relief-Eligible Survivors.

Section 4 – Targeted Medicaid Relief for Direct Impact Areas

Guarantees a limited time 100 percent federal matching payment (FMAP) for states designated as emergency areas to meet the medical assistance needs of Relief-Eligible Survivors.

Section 5 – Authority to Waive Requirements during National Emergencies with Respect to Evacuees from an Emergency Area

Allows the Secretary of Health and Human Services to designate an area that receives an influx of individuals as the result of a disaster to be designated as an emergency area.

Section 6 – Exclusion of Disaster Relief Coverage Period in Computing Medicare Part B Late Enrollment Period

Ensures that an individual who is forced to relocate due to a disaster is not penalized for failing to enroll in Medicare Part B.

Section 7 – Effective Date

Requires the legislation to take effect immediately upon being signed into law but permits the Secretary of Health and Human Services to grant a delay in states where additional legislation is required to meet the provisions of this legislation.

Section 8 – Impact Evaluation and Reporting

Requires the Secretary of Health and Human Services to contract with an independent nonprofit entity to conduct a multi-year evaluation on the legislation's impact on states and individuals.