

Georgia's Pathways to Coverage Program

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Georgia's Pathways to Coverage Program

- Expands health care coverage for lowincome adults
- Eligibility requirements:
 - 19 -64 years old
 - Not currently covered by traditional Medicaid
 - Household income up to 100% of federal poverty level
 - Must complete and report a minimum of 80 hours per month of qualifying activities like employment, community service or higher education





Project Overview

Area of Focus

Better understand the barriers and enablers to gaining and maintaining coverage under Pathways to Coverage with a particular focus on:

- Impact of administrative processes (i.e., initial enrollment and monthly reporting)
- Impact of the qualifying activities
 requirement

Data Sources

Focus Groups

 People with household incomes near or below the federal poverty level and were currently uninsured or had previously experienced periods of uninsurance

Interviews

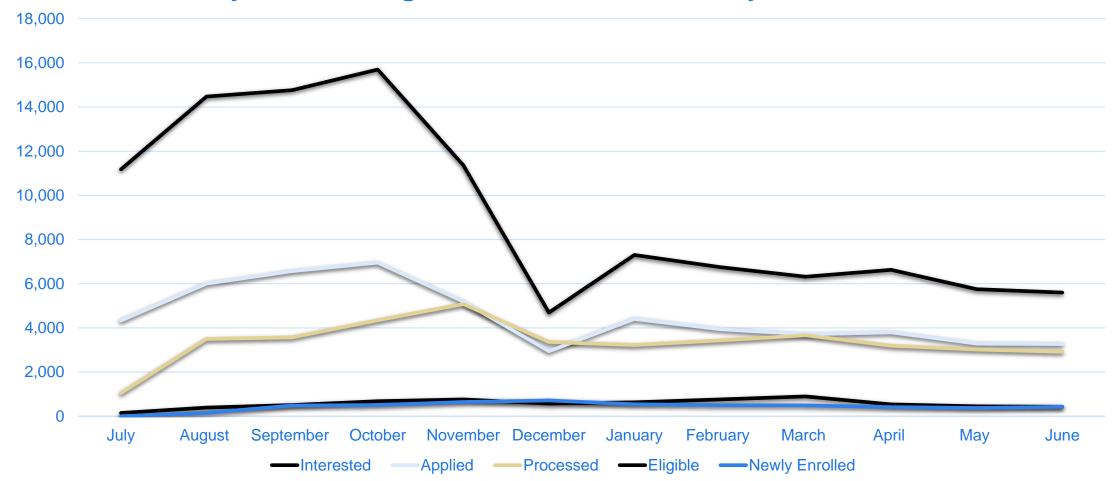
- People who had applied to or were currently/previously enrolled in Pathways to Coverage
- Enrollment assisters and health insurance navigators who had helped people apply to Pathways to Coverage (findings released in April 2024)

Publicly Available Data

- Monthly monitoring reports (application and enrollment data)
- Quarterly Medicaid expenditure reports (program cost data)
- Other Open Records requests

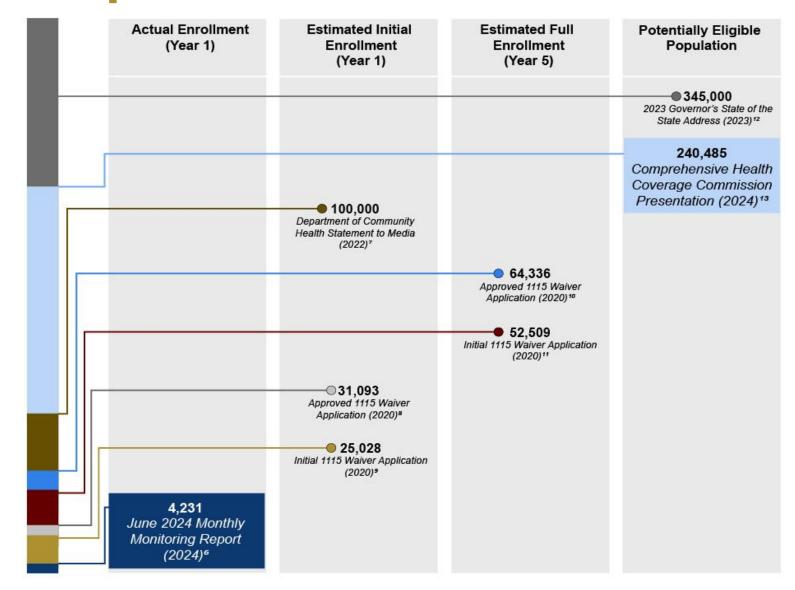
On average about 437 Georgians enrolled each month during the first year

Pathways to Coverage Enrollment Trends, July 2023 - June 2024



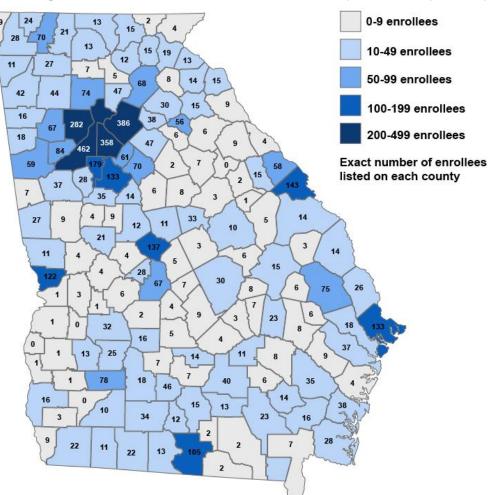
Source: GBPI analysis of Pathways to Coverage Monthly Monitoring Reports, July 2023 – June 2024 Note: In November 2023, the state added an additional screen in the online application process

Actual enrollment far lower than expectations and need



More than 40% of Georgia's counties had fewer than 10 enrollees

Pathways to Coverage, Cumulative Enrollment by County, July 2023 – June 2024



Source: Georgia Department of Community Health (2024, October 23). Pathways to Coverage cumulative county-level enrollment data. (Obtained through an Open Records Request; requested Pathways to Coverage cumulative county-level enrollment as of June 30, 2024; received October 2024).

Applicants face a high 'paperwork' burden and report confusion and lack of customer support

"I don't know how it works, or who qualifies for what, or how it's going, but when I first had to apply for Medicaid, I went to the people who I knew used the government services. And I was like, 'What's that Georgia Pathways?' And they were like, 'Oh, I ain't never heard of that, girl. I don't know what that is.' I guess more people would apply if they had more knowledge about it or access to it."

-Interview Participant

"I've gone to the place, the Division of Family and Children Services, myself because it's hard to get them on the phone. And once you get there, they gatekeep there. They won't just let you sit and talk to anybody, no caseworker. They try to help you at that window. And there is also a little room that has computers set up. And they'll log you into the computer, but they don't know how to help you do a lot of stuff, or they just don't want to. I'm not sure. But they act as if, you know, everybody's supposed to be computer-literate.... A lot of us are crying for help out here and there's no help."

-Interview Participant

"I tried to enroll through the Gateway, but I got rejected. To be honest, I'm not so sure why I get rejected."

-Interview Participant



The qualifying activities requirement may be a barrier to accessing the program

"I was never able to see a doctor until I got a job. I had been dealing for at least half of last year, up until April. I didn't have a job at first, but they kind of forced me to get one because I needed to see a doctor. It's so ridiculous because at the time when I applied, oh, my God, I was in a bad space because it was so much going on with me. And I had to wait it out until this year to go see a doctor, because I got a job this year. I feel like it shouldn't have to come to that."

Interview Participant

"So, they told me to get a job working at least 20 hours, so I end up getting a job. Once I got the job, they told me I'm disqualified because I make too much. So I'm like, 'Wow. This is crazy.' If someone's trying, at least, you know, help them, meet them halfway if they're trying. I can see if it's because I'm not doing anything and I'm just asking for help and just not trying to, you know, work or not trying to do something that's productive. I can understand that, but if a person is trying to do something, I feel like you shouldn't disqualify them."

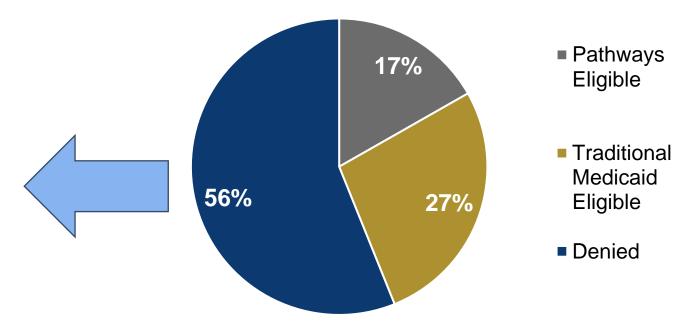
Interview Participant



Failure to meet the qualifying activities requirement accounted for 19% of denials

Eligibility Determinations Among Processed Applications, July 2023 – June 2024

19% of denials due to failure to report adequate qualifying hours or failure to provide sufficient verification of hours (based on reporting from March – June 2024)



Source: GBPI analysis of Pathways to Coverage Monthly Monitoring Reports, July 2023 – June 2024

For Georgians who have been able to enroll, program provides critical health care coverage

"And then I got Pathways, and then I was able to see a neurologist, got an MRI, figured out there's a cyst in my neck that if it grows, it could cause permanent disability. And so I was able to get it worked up, which was three MRIs and a nerve-conduction study, and see a neurologist to follow. And so that if I hadn't had Pathways, I would've never found it and not known that this could lead to permanent pain and paralysis."

-Interview Participant



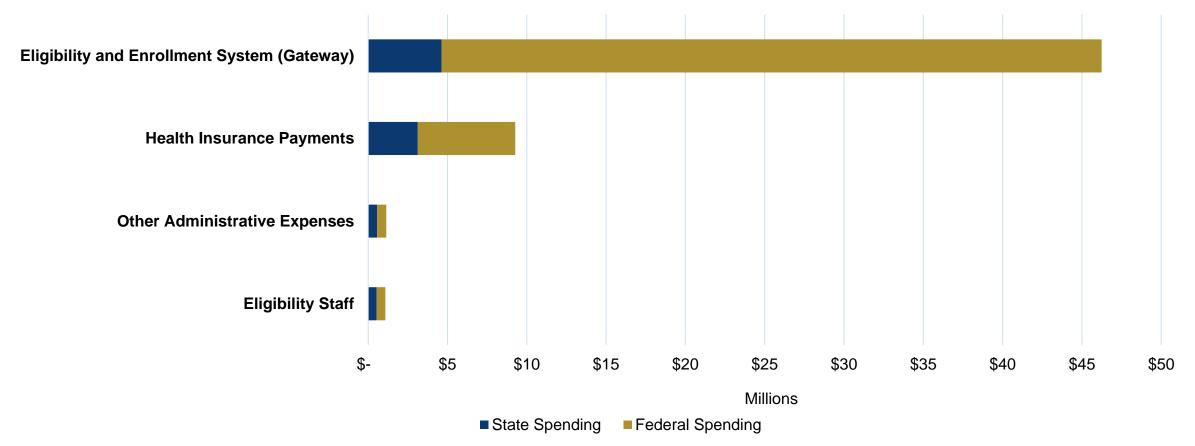
About \$13,360 spent on average per enrollee in total spending through the end of the first year of program implementation

Category	Combined State and Federal Spending, Prior to Program Launch January 2021 – June 2023	Combined State and Federal Spending, First Year of Program July 2023 – June 2024
Eligibility and Enrollment System (Gateway)	\$31,743,288	\$14,498,434
Health Insurance Payments	\$0	\$9,268,854
Other Administrative Expenses	\$0	\$1,140,266
Eligibility Staff	\$0	\$1,076,754
TOTAL	\$31,743,288	\$25,984,308

Source: GBPI analysis of Pathways to Coverage program costs based on Georgia's quarterly Medicaid expenditure reports. (Obtained through multiple Open Records Requests to Department of Community Health; requested CMS-64 forms that cover January 2021 – June 2024; received at multiple timepoints between December 2023 – August 2024).

Most state and federal funds spent on online eligibility and enrollment system rather than health care benefits

Pathways to Coverage State and Federal Spending by Category, January 2021 – June 2024



Source: GBPI analysis of Pathways to Coverage program costs based on Georgia's quarterly Medicaid expenditure reports. (Obtained through multiple Open Records Requests to Department of Community Health; requested CMS-64 forms that cover January 2021 – June 2024; received at multiple timepoints between December 2023 – August 2024).

Where are we now?

- As of March 31, 2025:
 - About 7,000 Georgians actively enrolled
 - Almost \$92M in combined state and federal spending
- Spring 2025 1115 waiver extension application offers opportunity for program improvement
 - Removal of monthly reporting
 - Removal of premiums
 - Addition of new qualifying activities



Visit GeorgiaPathways.org for more information and resources

Lessons learned for current federal debate

- Work requirements create additional bureaucratic redtape for both consumers and state agency staff
- Work requirements are costly to implement most of the administrative start-up costs will be borne by federal government
- Work requirements suppress enrollment even among those who are potentially eligible

For questions, feedback, or more information, please email me at Ichan@gbpi.org



THANK YOU

Thoughtful Analysis, Responsible Policy

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