Examples of formerly incarcerated women whose health was endangered as a result of the delay between their release date and the activation of their Medicaid, in support of S-5875/A-8356, sponsored by Senator Kemp Hannon and Assemblymember Keith Wright, which would require New York to suspend, rather than terminate, Medicaid for people entering prison and jail with prior enrollment. Under this proposal, Medicaid would be restored for individuals immediately upon their release from prison.

At the time of her release, Arlene was already on the liver transplant list at Westchester Medical Center for end-stage liver disease as a result of her Hepatitis C infection. Once Arlene was released, she was no longer a candidate for transplant at Westchester Medical. In addition to applying for Medicaid, when Arlene came home from prison, she had to find a new doctor and hospital to be re-evaluated for a transplant operation. During this process Arlene was hospitalized several times and her condition worsened. It took months for Arlene’s Medicaid to be activated. Finally, after five months, Arlene was transferred to Mt. Sinai Hospital where she received the transplant that she desperately needed.

Wanda had a diagnosis of hypertension and high cholesterol. She left prison with only a few weeks of medication. Because she had to wait for her Medicaid to be processed, Wanda was not able to pay for the prescriptions that a doctor at a community hospital gave to her. As a result, she was eventually admitted to the hospital with cardiac symptoms and forced to undergo angioplasty and placement of a stent for coronary artery disease. These procedures may have been avoided if Wanda had been able to obtain the necessary medication in a timely fashion.

Martha had recurrent breast cancer and had received treatment during her incarceration. Martha was released a few days before she was scheduled for reconstructive breast surgery. She also developed lymph edema, a complication of her mastectomy, which required medical treatment. As a result of the delay in processing Martha’s Medicaid application after her release, she had to wait six months to get the treatment and the reconstructive surgery she needed.

While she was incarcerated, Julia was diagnosed with Hepatitis C with severe liver damage. After Julia was released, it took months for her Medicaid to be activated, and it was not until five months later that Julia finally began to receive the appropriate treatment for her illness.
During her incarceration, Laura suffered serious complications while having surgery. Although Laura had Medicaid before going into prison, she had to wait for more than three months to get the coverage she needed in order to secure appropriate follow-up care for her surgery after her release.

Lois was released from prison with only two weeks of medication for her serious hypertension condition. Because of various complications, Lois was unable to get her prescription filled the first time she visited a hospital in the community after prison. As a result, her blood pressure eventually rose to a dangerously high level. For the next two months while she waited for her Medicaid coverage to be processed, Lois had to go back and forth to the emergency room every few weeks to get her medication.

Doreen had several psychiatric diagnoses in addition to a seizure disorder condition and hypertension. After prison, Doreen had to be taken to Kings County Psychiatric Emergency Room for an evaluation. It turned out that Doreen needed to change her mental health medication. Because her Medicaid had not been activated, the only way for Doreen to get her medication was to continually go to the hospital emergency room to have the doctor write and fill prescriptions for her.