

Medicaid Expansion 101

Medicaid 101

- As the largest source of reproductive health care in the nation, Medicaid provides critical
 preventive and primary care services to low-income women, including birth control, sexually transmitted
 infection (STI) testing and treatment, and pre- and post-natal care.
- Medicaid covers health care services for 1 in 10 women nationally, and it is even more important for low-income women, serving more than 1 in 5 women with incomes at or below 200 percent of the federal poverty level (FPL).
- For millions of women, Medicaid makes the difference between access to cancer screenings and birth control or going without. Recent studies have shown that women with Medicaid coverage are more likely than uninsured women to have received a Pap test in the last two years.
- A new study from Harvard School of Public Health found that states that substantially expanded
 Medicaid coverage to adults had a 6.1 percent decline in death rates in individuals ages 20-64.

Medicaid & Planned Parenthood

- Nationwide, nearly half of Planned Parenthood patients rely on Medicaid coverage to access preventive health care, including cancer screenings and birth control.
- Planned Parenthood plays a fundamental role in meeting the health care needs of millions of low-income and underserved women.
- Over 36 percent of women receiving publicly funded family planning care receive their care at
 Planned Parenthood health centers, even though Planned Parenthood only makes up about
 11 percent of the publicly funded family planning clinics nationwide.



Medicaid Expansion 101

Medicaid Expansion: Cost Savings

- The Supreme Court ruled to uphold the vast majority of the Affordable Care Act, but struck down the
 provision that required states to expand their Medicaid programs to cover all individuals under 138
 percent of the poverty line. Now, states have an option whether to expand Medicaid under the
 Affordable Care Act.
- The federal government will finance the full cost of covering newly eligible individuals in states that
 expand their Medicaid program for the first three years (2014-2016). Federal funds only slightly decrease
 in subsequent years with the federal government paying an astounding 90 percent of the
 costs in 2020 and beyond.
- If all states accept the federal money to expand their Medicaid programs, an additional 7 million women will be able to get preventive health screenings, birth control, checkups, and the care they need to manage chronic conditions. Of these women, 4.6 million women will be of reproductive age (ages 19-44).
- The Urban Institute estimates that states will save between \$26 and \$52 billion from 2014 to 2019, and the Lewin Group estimates state and local savings of \$101 billion in uncompensated care when patients receive care and are unable to pay for it.
- Accepting federal funds means that a state can cover more hardworking people and their families — and save taxpayer dollars that are currently spent to treat uninsured individuals. Hardworking families need the security of quality health coverage to get the care they need when they need it without facing huge medical bills.
- In states that accept the federal money to cover more people through Medicaid, many people with lower incomes will also be able to get affordable coverage. However, if a state turns down the money, those with lower incomes will fall into a "coverage gap." In other words, they will not get any help toward affording health insurance, while many people with higher incomes will still get help.
- Providing more affordable coverage to low-income individuals and families will help save taxpayer dollars, particularly in regards to family planning where every dollar invested in family planning serves saves nearly \$4 for American families.