MOST RECENT RESEARCH STUDIES: EFFECT OF MEDICAID ON COVERAGE, SAFETY NET PROVIDERS, HEALTH STATUS, CHILDREN’S LIVES, FAMILY SECURITY AND STATE BUDGETS

Georgetown University Center for Children and Families Research Panel on Medicaid
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[Yale Economics study finding long term effects on children getting Medicaid coverage include greater tax contributions, less likely to die prematurely, more likely to attend college, and higher wages.] Medicaid as an Investment in Children: What is the Long-Term Impact on Tax Receipts? David W. Brow, Amanda E. Kowalski, Ithai Z. Lurie, January 2015. http://economics.yale.edu/news/yale-economics-study-finds-long-term-impacts-medicaid#sthash.KM5ISUBh.dpuf


[Editorial on the above study summarizes findings (and is not behind a paywall).] Injecting Facts Into the Heated Debates Over Medicaid Expansion, Jeffrey T. Kullgren, Annals of Internal Medicine, June 21, 2016 http://annals.org/article.aspx?articleid=2515051

[“Parents who do not have coverage are less likely than insured parents to…see doctors and dentists and are more likely to forgo care for affordability reasons and have problems paying family medical bills. Uninsured parents’ disconnection from the health care system could have adverse spillover effects for children, who may be less likely to get needed health care and more likely to experience hardships if their parents’ health or finances deteriorate.”] Uninsurance among Parents, 1997–2014: Long-Term Trends and Recent Patterns, Michael Karpman, Jason Gates, Stacey McMorrow, Genevieve M. Kenney, Urban Institute, June 27, 2016. http://www.urban.org/research/publication/uninsurance-among-parents-1997-2014-long-term-trends-and-recent-patterns


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[Medicaid expansion states showed hospitalizations of uninsured people with HIV falling from 13.7% to 5.5% over the study period compared to an increase from 14.5% to 15.7% in non-expansion states.] In Four ACA Expansion States, The Percentage Of Uninsured Hospitalizations For People With HIV Declined, 2012–14, F Hellinger, Health Affairs, April 2016, Vol 35, No. 4. http://content.healthaffairs.org/content/34/12/2061.abstract

[“State Medicaid expansions to cover low-income adults were significantly associated with reduced mortality as well as improved coverage, access to care, and self reported health.”] Mortality and Access to Care among Adults after State Medicaid Expansions, B Sommers, MD, PhD, K Baicker, PhD A Epstein, MD, N Engl J Med 2012;367:1025-34. http://www.nejm.org/doi/pdf/10.1056/NEJMsa1202099

[“The ACA’s first 2 open enrollment periods were associated with significantly improved trends in self-reported coverage, access to primary care and medications, affordability, and health. Low-income adults in states that expanded Medicaid reported significant gains in insurance coverage and access compared with adults in states that did not expand Medicaid.”] Changes in Self-reported Insurance Coverage, Access to Care, and Health Under the Affordable Care Act, B Sommers, MD, PhD Munira Z. Gunja, MPH; K Finegold, PhD; T Musco, BBA JAMA. 2015;314(4):366-374. doi:10.1001/jama.2015.8421. http://jama.jamanetwork.com/article.aspx?articleid=2411283

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