

Expanding Medicaid in Ohio

Impact on Ohioans earning less than 100 percent FPL

If Ohio does not move forward with Medicaid expansion, thousands of Ohioans with incomes up to 100 percent of the Federal Poverty Level (FPL) (\$23,550 for a family of four) will have no subsidized coverage assistance (see figures on next page). Those earning more than 100 percent FPL would be eligible for federal subsidies on health insurance exchanges. To the right are county-level projections for uninsured adults (19-64 years old) without dependent children who earn less than 100 percent of FPL.

Without a Medicaid expansion, substantial number of Ohioans, including more than 370,000 adults without dependent children by 2017, are projected to have no access to subsidized health coverage and will likely be uninsured.

Other Ohioans left without subsidized coverage include parents with incomes between 90 percent and 100 percent FPL.

Ohio Medicaid Expansion Study

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| County | Total uninsured childless adults in 2014 below 100 percent FPL | Total uninsured childless adults in 2017 below 100 percent FPL |
|------------|--|--|
| Adams | 1,523 | 1,561 |
| Allen | 3,522 | 3,611 |
| Ashland | 1,352 | 1,387 |
| Ashtabula | 4,075 | 4,178 |
| Athens | 2,181 | 2,236 |
| Auglaize | 977 | 1,002 |
| Belmont | 2,407 | 2,467 |
| Brown | 1,745 | 1,789 |
| Butler | 10,327 | 10,587 |
| Carroll | 978 | 1,003 |
| Champaign | 1,121 | 1,149 |
| Clark | 5,942 | 6,092 |
| Clermont | 5,272 | 5,405 |
| Clinton | 1,810 | 1,855 |
| Columbiana | 3,616 | 3,707 |
| Coshocton | 1,471 | 1,508 |
| Crawford | 1,823 | 1,869 |
| Cuyahoga | 44,698 | 45,825 |
| Darke | 1,284 | 1,317 |
| Defiance | 1,232 | 1,263 |
| Delaware | 1,883 | 1,930 |
| Erie | 2,532 | 2,595 |
| Fairfield | 4,494 | 4,607 |
| Fayette | 1,262 | 1,294 |
| Franklin | 40,652 | 41,677 |
| Fulton | 1,024 | 1,050 |
| Gallia | 1,464 | 1,500 |
| Geauga | 969 | 993 |
| Greene | 3,638 | 3,729 |
| Guernsey | 1,779 | 1,824 |
| Hamilton | 24,451 | 25,068 |
| Hancock | 1,994 | 2,044 |
| Hardin | 993 | 1,018 |
| Harrison | 568 | 583 |
| Henry | 736 | 755 |
| Highland | 1,935 | 1,984 |
| Hocking | 1,241 | 1,272 |
| Holmes | 539 | 552 |
| Huron | 2,052 | 2,103 |
| Jackson | 1,616 | 1,656 |
| Jefferson | 2,554 | 2,618 |
| Knox | 1,892 | 1,940 |
| Lake | 4,368 | 4,478 |
| Lawrence | 2,682 | 2,750 |

| County | Total uninsured childless adults in 2014 below 100 percent FPL | Total uninsured childless adults in 2017 below 100 percent FPL |
|------------|--|--|
| Licking | 4,922 | 5,046 |
| Logan | 1,705 | 1,748 |
| Lorain | 8,599 | 8,815 |
| Lucas | 17,792 | 18,240 |
| Madison | 1,177 | 1,207 |
| Mahoning | 8,790 | 9,011 |
| Marion | 2,551 | 2,615 |
| Medina | 2,714 | 2,782 |
| Meigs | 1,140 | 1,169 |
| Mercer | 801 | 821 |
| Miami | 2,186 | 2,241 |
| Monroe | 538 | 551 |
| Montgomery | 17,846 | 18,296 |
| Morgan | 585 | 600 |
| Morrow | 1,192 | 1,222 |
| Muskingum | 3,906 | 4,005 |
| Noble | 412 | 422 |
| Ottawa | 947 | 971 |
| Paulding | 617 | 632 |
| Perry | 1,647 | 1,688 |
| Pickaway | 1,793 | 1,838 |
| Pike | 1,589 | 1,629 |
| Portage | 3,698 | 3,791 |
| Preble | 1,282 | 1,314 |
| Putnam | 597 | 612 |
| Richland | 4,454 | 4,566 |
| Ross | 3,540 | 3,629 |
| Sandusky | 1,692 | 1,734 |
| Scioto | 3,650 | 3,742 |
| Seneca | 1,937 | 1,986 |
| Shelby | 1,262 | 1,294 |
| Stark | 11,892 | 12,191 |
| Summit | 16,411 | 16,825 |
| Trumbull | 7,149 | 7,329 |
| Tuscarawas | 2,786 | 2,857 |
| Union | 1,075 | 1,102 |
| VanWert | 799 | 819 |
| Vinton | 689 | 706 |
| Warren | 2,605 | 2,671 |
| Washington | 1,690 | 1,733 |
| Wayne | 2,757 | 2,827 |
| Williams | 1,236 | 1,267 |
| Wood | 2,213 | 2,269 |
| Wyandot | 489 | 502 |

Source: OSU 2013

figure 1
Current Medicaid eligibility

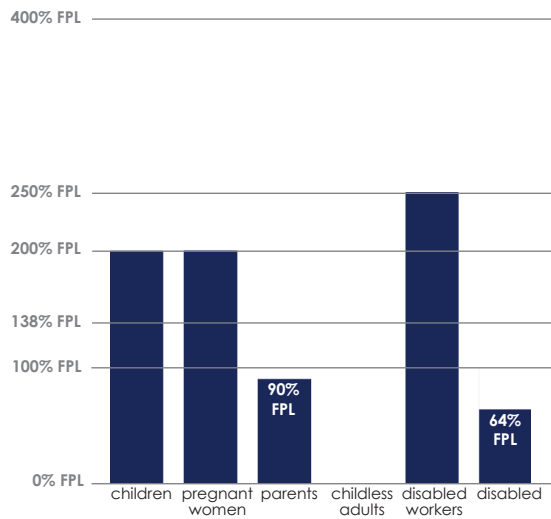
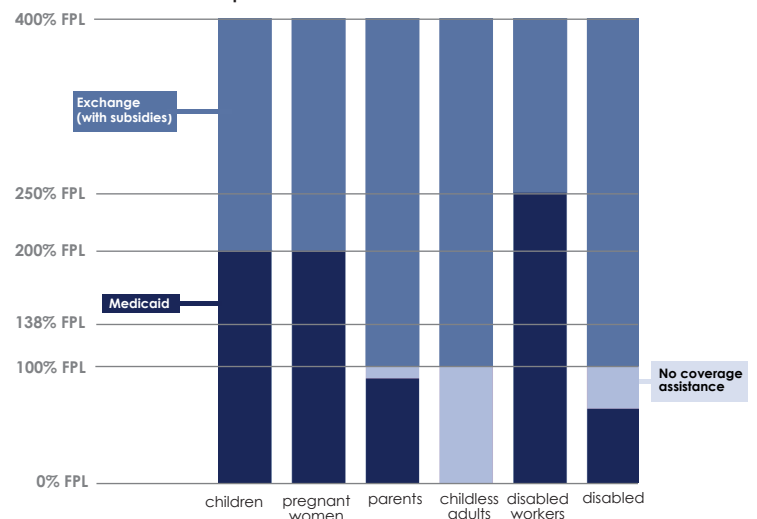


figure 2
Subsidized health coverage eligibility in 2014 without Medicaid expansion



Why health insurance matters

In 2009 The Institute of Medicine issued a report that summarizes the extensive body of research that establishes the many ways that health insurance improves access to health care, appropriateness and quality of care and health outcomes.¹

This research finds that compared to insured individuals, uninsured adults and children are more likely to:

- Lack a usual source of care and routine check-ups
- Have medical debt
- Have unmet health needs

This lack of access and increased cost burden leads to several negative health outcomes for uninsured adults and children:

- Poorly managed chronic disease (such as inadequate blood pressure control)
- Cancer diagnosed at an advanced stage
- Poor self-reported mental and physical health status and functioning
- Mortality²

In addition to this national research, Ohio studies have found similar results. The Ohio Health Issues Poll found that 84% of insured adult Ohioans had a usual source of care, compared to only 51% of uninsured Ohioans.³ Analysis of the 2010 Ohio Family Health Survey concluded that compared to insured Ohioans, the uninsured were less likely to use medical and dental care and reported worse physical and mental health status.⁴

Providing coverage to more uninsured Ohioans will provide an opportunity to manage costs and leverage health system reforms. Without coverage, uninsured Ohioans will continue to lack care and, on balance, experience more negative health outcomes compared to insured Ohioans.

Notes

1. Institute of Medicine, 2009. "America's Uninsured Crisis: Consequences for Health and Health Care."
2. Wilper, Andrew P., Steffie Woolhandler, Karen E. Lasser, Danny McCormick, David H. Bor, and David U. Himmelstein. "Health Insurance and Mortality in US Adults" American Journal of Public Health 2009; 99:2289-2295.
3. "Usual Source of Care and Wait Times in Ohio" Ohio Health Issues Poll report. The Health Foundation of Greater Cincinnati. August 2012.
4. Hull, Sharon K., Kristin R. Baughman, Joseph J. Sudano, Mike Hewit, and Ryan C. Burke. "Effective access to health care providers and services in Ohio: Analysis of intermediate and proximate outcomes."