

medicaid and the uninsured



April 2013

Impact of the Medicaid Expansion for Low-Income Hispanics Across States

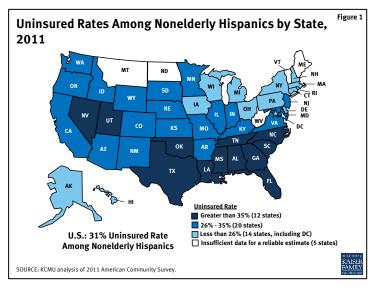
Introduction

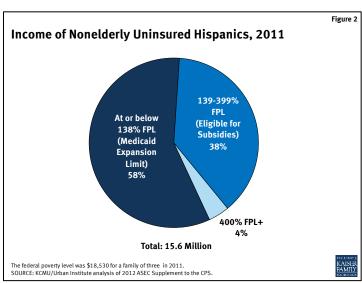
A key component of the Affordable Care Act (ACA) to significantly reduce the number of uninsured is an expansion in Medicaid eligibility to 138% of the federal poverty level (FPL) (\$15,856 for an individual in 2013). The Medicaid expansion would significantly increase eligibility for parents and adults in many states, making millions of low-income adults newly eligible for the program. While the ACA intended for the Medicaid expansion to be implemented in all states, as a result of the June 2012 Supreme Court ruling on the ACA, implementation is now effectively a state option. If a state does not expand Medicaid, poor uninsured adults in that state will not gain a new coverage option and likely remain uninsured and continue to face barriers to accessing needed care.

As states continue to weigh the decision to expand Medicaid, one important consideration is the impact of the Medicaid expansion for low-income people of color, including Hispanics. To provide greater insight into the impact of the Medicaid expansion for low-income Hispanics, this brief provides data on uninsured Hispanics across states, based on analysis of the 2011 American Community Survey. Data for all 50 states are available in the Appendix; measures for some states were not available due to sample size restrictions. Companion briefs for other racial and ethnic groups are available at http://www.kff.org/minorityhealth/8435.cfm.

Findings

As of 2011, nearly one in three (31%) Hispanics was uninsured, and nearly six in ten uninsured Hispanics had incomes below the Medicaid expansion limit. The uninsured rate for Hispanics ranged across states from 10% or less in Massachusetts and Hawaii to over 35% in 12 states, including 8 states where more than four in ten Hispanics were uninsured (AL, GA, LA, MS, NC, SC, TN, and UT) (Figure 1). Nationwide, 58% of uninsured Hispanics had incomes below the Medicaid expansion limit (Figure 2), and over two-thirds of uninsured Hispanics had incomes at or below 138% FPL in five states (AL, AR, IA, KY, and MO) (Appendix Table 1).

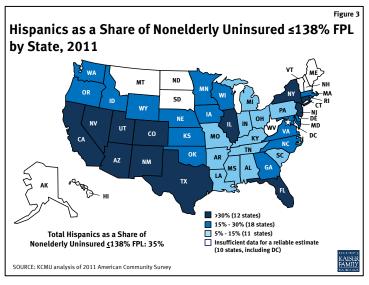


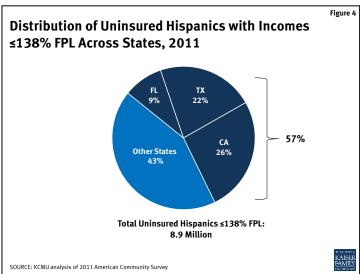




There were 8.9 million uninsured Hispanics with incomes below the Medicaid expansion limit as of 2011, who made up over one-third of all uninsured individuals with incomes at or below 138% FPL. Hispanics accounted for 35% of the total 25.4 million uninsured with incomes at or below 138% FPL, although this share varied across states (Figure 3). In five states (AZ, CA, NV, NM, and TX) Hispanics made up at least half of the uninsured at or below 138% FPL.

The majority of uninsured Hispanics with incomes below the Medicaid expansion live in a small number of states. More than half (57%) of all uninsured Hispanics with incomes below the Medicaid expansion limit lived in just three states: California (26%), Texas (22%) and Florida (9%) (Figure 4).





Conclusion

In sum, these findings show that the Medicaid expansion will disproportionately impact Hispanics, and Hispanics have particularly high stakes in Medicaid expansion decisions made by a small number of states, including Texas, Florida, and California. Moreover, the data highlight the important opportunity provided by the Medicaid expansion to promote greater equity in health coverage and care and show that successfully enrolling Hispanics into coverage will be important for achieving overall success in reducing the number of uninsured. In the absence of the Medicaid expansion, poor uninsured adults will not gain a new coverage option and likely remain uninsured and continue to face barriers to accessing needed care. However, even with the expansion, many non-citizen Hispanics, including lawfully-present and undocumented immigrants, will continue to face Medicaid eligibility restrictions under the ACA.

Targeted outreach and enrollment assistance will be important for enrolling eligible Hispanics into coverage, particularly culturally and linguistically appropriate one-on-one assistance provided by trusted individuals within the community. It also will be important to address challenges Hispanics face in accessing care, such as language and literacy barriers, to ensure coverage gains translate into improved care and outcomes. Community-based safety-net providers are often viewed as a trusted source for care among Hispanics and are able to offer culturally and linguistically appropriate services. These providers will likely play a key role in enrolling uninsured Hispanics in coverage and remain an important source of care for the population.



Appendix Table 1
Nonelderly Uninsured Hispanics by Income and State, 2011

			Distribution by Income			
	Total	Percent	Total			
	Nonelderly	Uninsured	Uninsured	<138% FPL	139-400% FPL	400% FPL+
	Hispanics		Hispanics	_		
United States	48,343,357	31%	14,936,514	58%	38%	4%
Alabama	177,365	44%	78,844	70%	27%	
Alaska	39,076	18%	, 			
Arizona	1,813,427	29%	522,735	60%	36%	4%
Arkansas	182,800	32%	58,744	69%	29%	
California	13,421,387	29%	3,861,887	58%	38%	4%
Colorado	995,540	28%	278,592	58%	39%	4%
Connecticut	462,968	22%	99,656	50%	43%	
Delaware	72,796	25%	18,380	57%		
District of Columbia	55,398	18%				
Florida	3,860,420	36%	1,391,229	57%	38%	5%
Georgia	843,754	45%	376,018	63%	35%	2%
Hawaii	113,982	9%	570,018			
Idaho	173,117	32%	54,585	64%	33%	
Illinois	1,977,720	26%	521,974	57%	39%	4%
Indiana	380,450	30%	113,998	65%	33%	4%
lowa	146,511	25%	37,303	68%	30%	
Kansas	,		,			
	288,911	30%	86,100	62%	36%	
Kentucky	122,981	33%	40,897	69%	28%	
Louisiana	177,960	42%	74,646	55%	39%	
Maine	13,642					
Maryland	465,295	31%	143,960	49%	45%	6%
Massachusetts	612,534	10%	59,070	52%	38%	
Michigan	425,205	21%	87,314	63%	34%	
Minnesota	245,111	28%	68,801	54%	41%	
Mississippi	71,020	43%	30,195	57%	38%	
Missouri	201,768	32%	65,094	68%	30%	
Montana	27,441					
Nebraska	166,233	30%	49,491	55%	40%	
Nevada	700,483	37%	261,054	62%	35%	3%
New Hampshire	34,797	22%				
New Jersey	1,484,443	30%	442,989	51%	43%	7%
New Mexico	870,684	26%	228,601	60%	35%	5%
New York	3,202,137	23%	734,492	50%	43%	7%
North Carolina	795,903	44%	346,873	64%	33%	2%
North Dakota	13,835					
Ohio	338,713	25%	85,986	64%	31%	
Oklahoma	330,440	37%	123,040	60%	35%	
Oregon	447,615	30%	132,915	60%	39%	
Pennsylvania	699,151	21%	146,646	60%	36%	
Rhode Island	128,550	22%	28,053	53%	42%	
South Carolina	227,198	42%	94,951	63%	35%	
South Dakota	21,566	33%				
Tennessee	283,449	43%	122,842	63%	34%	
Texas	9,105,464	37%	3,328,746	58%	38%	4%
Utah	357,363	41%	145,222	63%	33%	
Vermont						
Virginia	611,124	33%	200,553	47%	47%	6%
Washington	753,991	32%	239,725	61%	36%	4%
West Virginia	18,808					
Wisconsin	326,793	25%	82,261	51%	43%	
Wyoming	48,346	27%		52%		
	70,370	L 170		J2/0		

[&]quot;--" = Sample size is not sufficient for a reliable estimate; totals may not sum to 100% due to rounding and sample size restrictions.

SOURCE: KCMU analysis of 2011 American Community Survey.



Appendix Table 2
Hispanics as a Share Of Total Uninsured At or Below 138% FPL by State, 2011

	Uninsured ≤138% FPL				
	Total,				
	All Races/	Number Hispanic	Percent Hispanic		
	Ethnicities				
United States	25,388,898	8,870,614	35%		
Alabama	428,771	55,334	13%		
Alaska	58,360				
Arizona	592,906	322,845	54%		
Arkansas	288,127	41,280	14%		
California	3,750,129	2,296,737	61%		
Colorado	362,024	163,262	45%		
Connecticut	137,632	52,504	38%		
Delaware	35,228	10,654	30%		
District of Columbia	23,259				
Florida	2,150,076	818,878	38%		
Georgia	1,137,358	246,857	22%		
Hawaii	57,172				
Idaho	124,214	34,987	28%		
Illinois	918,077	306,712	33%		
Indiana	513,334	75,407	15%		
lowa	145,639	26,193	18%		
Kansas	200,549	54,789	27%		
Kentucky	384,505	28,729	7%		
Louisiana	443,862	42,124	9%		
Maine	62,738				
Maryland	292,021	73,100	25%		
Massachusetts	113,765	31,490	28%		
Michigan	693,159	56,934	8%		
Minnesota	208,124	38,213	18%		
Mississippi	313,219	17,728	6%		
Missouri	459,648	45,374	10%		
Montana	85,341				
Nebraska	115,708	27,954	24%		
Nevada	327,917	163,404	50%		
New Hampshire	54,890	103,101			
New Jersey	545,016	234,481	43%		
New Mexico	235,326	143,329	61%		
New York	1,067,418	381,473	36%		
North Carolina	887,675	228,939	26%		
North Dakota	29,054	220,939	2070		
Ohio		55 560			
Oklahoma	783,018 388,015	55,560 76,595	7% 20%		
Oregon	323,327	82,699	26%		
_			14%		
Pennsylvania	656,905	90,174			
Rhode Island	56,530 468,705	15,182	27%		
South Carolina South Dakota	•	61,672	13%		
	48,176	90 941			
Tennessee	557,640	80,841	14%		
Texas	3,126,043	1,970,983	63%		
Utah	231,645	92,856	40%		
Vermont	14,417		400/		
Virginia	525,449	98,191	19%		
Washington	494,260	149,083	30%		
West Virginia	166,696				
Wisconsin	270,069	42,488	16%		
Wyoming	35,762 ficient for a reliable	6,955	19%		

[&]quot;--" = Sample size is not sufficient for a reliable estimate.

SOURCE: KCMU analysis of 2011 American Community Survey.

This publication (#8435_H) is available on the Kaiser Family Foundation's website at www.kff.org.

The Kaiser Commission on Medicaid and the Uninsured provides information and analysis on health care coverage and access for the low-income population, with a special focus on Medicaid's role and coverage of the uninsured. Begun in 1991 and based in the Kaiser Family Foundation's Washington, DC office, the Commission is the largest operating program of the Foundation. The Commission's work is conducted by Foundation staff under the guidance of a bipartisan group of national leaders and experts in health care and public policy.