

THE AFFORDABLE CARE ACT AND COVERING MORE WOMEN AND FAMILIES IN MEDICAID

NORTH CAROLINA

Under the Affordable Care Act (ACA), states may expand eligibility for their Medicaid programs to provide health coverage for millions of low-income Americans but North Carolina has not yet expanded coverage. The health care law explicitly includes money for each state to cover more people through Medicaid. The federal government will pay 100 percent through 2016 and at least 90 percent of the costs after that. Forgoing the federal funds to cover more people in Medicaid creates a gap in health coverage for those who do not qualify for Medicaid today no matter how low their income, yet earn too little to receive tax credits to help them purchase private coverage. This means that failure to provide expanded coverage through Medicaid leaves vulnerable Americans without an option for health coverage.

THE COVERAGE GAP IN NORTH CAROLINA

- Approximately 438,000 people, including 204,000 women, will remain uninsured without an affordable option for health insurance because North Carolina has not accepted the federal money to expand coverage through Medicaid.¹
- If North Carolina accepted the federal money, this coverage expansion would reduce uninsurance in North Carolina by 48 percent, when combined with other reforms in the ACA.²

CLOSING THE COVERAGE GAP IS A SMARTER USE OF HEALTHCARE DOLLARS

- Estimates show that accepting the federal money and closing the coverage gap could save North Carolina \$1.4 billion dollars in uncompensated care costs over the next ten years.³
- Closing the coverage gap by covering more people through Medicaid will also bring in \$3.9 billion of federal

funding into North Carolina, helping to keep hospitals open and available in local communities.⁴

WOMEN IN THE COVERAGE GAP ALSO EXPERIENCE A HEALTH CARE GAP

Low-income uninsured women—many of whom would be eligible for health insurance if North Carolina accepted the federal money to expand Medicaid coverage—are more likely to go without care because of cost, less likely to have a regular source of care, and utilize preventive services at lower rates than low-income women with health insurance.⁵ In short, this population is in dire need of affordable health

Women will continue to suffer from limited access to care if they remain in the coverage gap between today's Medicaid program and the new coverage of the ACA. If, however, North Carolina accepts this federal money and expands coverage through Medicaid, thus eliminating the coverage gap, the state would ensure that all low-income women can access the care they need to lead healthier lives.

The data below reflect the health care gap between insured and uninsured low-income women in North Carolina. Notable findings include:

- For uninsured women in North Carolina, cost is major barrier to care – nearly 64 percent of uninsured women have faced cost as an obstacle when seeking care, compared to only 27 percent of insured women.
- Uninsured women utilize preventive services at lower rates; only 49 percent of uninsured women in North Carolina received a recommended mammogram compared to 77 percent of insured women.

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Indicator	Low-Income Women without Insurance	Low-Income Women with Insurance
In the last 12 months, have needed to see a doctor but could not because of cost*	63.9%	26.5%
Have a personal doctor or health care provider	46.3%	85.4%
Had a "regular checkup" in the last two years	68.9%	92.0%
Had a mammogram in the past two years (aged 40+)	49.1%	77.3%
Had a sigmoidoscopy or colonoscopy (aged 50+)	40.3%	67.1%
Had a Pap test in the past three years (18+)	70.1%	84.7%
Ever tested for HIV	59.8%	54.0%
In the last 12 months, have had either a seasonal flu shot or a seasonal flu vaccine that was sprayed through the nose	25.3%	41.2%

*For this question alone, a higher percentage means that fewer women are accessing care.

Source: NWLC analysis of the Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System Data (BRFSS), 2013, available at <http://www.cdc.gov/brfss/index.htm>

endnotes

- 1 Genevieve M. Kenney et. al., The Urban Institute, Opting in to the Medicaid Expansion under the ACA: Who Are the Uninsured Adults Who Could Gain Health Insurance Coverage, (August 2012), available at: <http://www.urban.org/UploadedPDF/412630-opting-in-medicaid.pdf>.
- 2 John Holahan et. al, The Urban Institute, The Cost and Coverage Implications of the ACA Medicaid Expansion: National and State-by-State Analysis, (November 2012), available at: <http://www.kff.org/medicaid/upload/8384.pdf>.
- 3 ibid
- 4 ibid
- 5 Danielle Garrett and Stephanie Glover, National Women's Law Center, Mind the Gap: Low-Income Women in Dire Need of Health Insurance, (January 2014) available at <http://www.nwlc.org/resource/mind-gap-women-dire-need-health-insurance>.