



Health Care Reform in Indian Country

Self-Governance Communication & Education

Self-Governance Tribes Striving Towards Excellence in Health Care

Substantial Increases in AI/AN Enrollment in Medicaid Expansion States and Ongoing Potential for Additional Increases in AI/AN Enrollment, Particularly in Non-Medicaid Expansion States¹

-- UPDATED BRIEF WITH 2016 DATA --

November 6, 2017

This brief seeks to provide information to Tribes on the number of American Indians and Alaska Natives (AI/ANs) gaining Medicaid coverage, by state, since enactment of the Affordable Care Act (ACA) and the number of uninsured AI/ANs who remain potentially eligible for Medicaid coverage.²

- Data are provided on the change in the number of AI/ANs enrolled in Medicaid since passage of the ACA, as well as the remaining number of uninsured AI/ANs who have household income at or less than 138% of the federal poverty level (FPL), the eligibility threshold for the ACA's Medicaid expansion.
- Data are tabulated to indicate the enrollment increases in states that have implemented the Medicaid expansion and the number of uninsured AI/ANs who potentially could gain Medicaid eligibility in states that have not yet implemented an expansion of Medicaid eligibility.

These data serve to indicate: (1) what the AI/AN Medicaid coverage gains are to date from the ACA; and, (2) what the impact would be on AI/ANs if Congress repealed the ACA Medicaid expansion authority.³

Key Findings

The ACA Medicaid expansion gives millions of lower-income residents, including many AI/ANs, the opportunity to secure comprehensive health insurance coverage, with the federal government bearing almost all of the cost.

- In the 19 states with at least one federally-recognized Tribe that have implemented the Medicaid expansion, AI/AN Medicaid enrollment has increased by almost 315,000. Further, additional enrollment of AI/ANs is occurring in these states as the Medicaid expansion is fully implemented.
- In the remaining 16 states that have not yet adopted the Medicaid expansion, more than 120,000 uninsured AI/ANs potentially would be able to enroll in Medicaid if, and when, their state acts to implement this option.

If Congress were to repeal the ACA Medicaid expansion option, the health insurance expansions—and the corresponding drop in the number of uninsured—would be reversed. And the potential for future expansions in the remaining states would be eliminated.

¹ This brief is for informational purposes only and is not intended as legal advice. For questions on this brief, please contact Doneg McDonough, TSGAC Technical Advisor, at DonegMcD@Outlook.com.

² The additional Medicaid enrollment occurred under the pre-ACA eligibility categories and the ACA Medicaid expansion eligibility categories.

³ Data are provided for states with at least one federally-recognized Tribe.

Continuation of the ACA Medicaid expansion is key to protecting these gains and further reducing the number of uninsured AI/ANs in order to secure the resources needed to meet the health care needs of hundreds of thousands of low-income AI/ANs.

It is recommended that Tribal leaders share this information with members of Congress, congressional staff, and other policymakers to communicate the critical importance of maintaining the Medicaid expansion option to the health of as many as 593,000 AI/ANs.

AI/AN Medicaid Enrollment in Medicaid Expansion States Since Enactment of the ACA

The ACA provided states with the option, beginning in 2014,⁴ of expanding their Medicaid programs to cover all residents with household incomes at or less than 138% FPL, including many AI/ANs, with the federal government covering 100% of program expenditures on health care services through 2016 and the rate gradually decreasing to a fixed level of 90% in 2020 and subsequent years. As of January 1, 2017, 31 states, including 19 with at least one federally-recognized Tribe, and the District of Columbia have adopted the Medicaid expansion.

Table A1: Uninsured AI/ANs with Potential Medicaid Eligibility in Expansion States with at Least One Federally-Recognized Tribe; 2016				
State	All Uninsured AI/ANs ¹ (all income levels; 2016)	0-138% FPL ²		
		Number of AI/AN Gaining Medicaid Coverage (2010-2016)	Remaining Number of Uninsured AI/ANs (under 139% FPL)	Remaining Uninsured AI/ANs (under 139% FPL) as % of Total Uninsured AI/ANs
Alaska	40,613	13,793	9,387	23.1%
Arizona	78,705	30,976	27,472	34.9%
California	62,090	77,880	16,039	25.8%
Colorado	11,278	11,432	3,407	30.2%
Connecticut	2,450	8,646	232	9.5%
Indiana	6,662	6,925	2,113	31.7%
Iowa	3,095	-2,538	975	31.5%
Louisiana	8,573	6,403	1,716	20.0%
Massachusetts	2,116	-690	287	13.6%
Michigan	11,866	18,391	5,435	45.8%
Minnesota	14,034	-3,856	4,496	32.0%
Montana	18,970	15,154	5,936	31.3%
Nevada	8,135	8,264	2,242	27.6%
New Mexico	43,849	36,937	12,211	27.8%
New York	17,160	24,349	4,018	23.4%
North Dakota	14,274	6,679	4,067	28.5%
Oregon	14,736	29,272	5,449	37.0%
Rhode Island	1,568	1,354	0	0.0%
Washington	24,235	25,549	5,335	22.0%
TOTAL	384,409	314,920	110,817	28.8%

¹ Census Bureau, 2016 American Community Survey, 1-Year Estimates.

² Analysis of Census Bureau, 2016 American Community Survey, 1-Year Estimates. Figures assume that all AI/ANs live in a 3-person household, based on average household size of 2.87 in 2016.

⁴ Under the ACA, states could expand Medicaid prior to 2014 through a State Plan Amendment (SPA), a section 1115 waiver, or a combination of the two. Four states with substantial AI/AN populations—California, Connecticut, Colorado, and Minnesota—expanded their Medicaid programs prior to 2014.

Table A1 above provides data on the number of AI/ANs gaining Medicaid coverage in the 19 states that have at least one federally-recognized Tribe and *have* adopted the Medicaid expansion. For each state, the table shows the total number of uninsured AI/ANs (all income levels) as of 2016, the number of AI/ANs gaining Medicaid coverage over the 2010 – 2016 period, and the estimated remaining number of uninsured AI/ANs who have an income at or less than 138% FPL (and the percentage these uninsured AI/ANs are of the total number of uninsured AI/ANs in the state).

Potential AI/AN Medicaid Eligibility in Non-Expansion States

Table A2 below provides data on uninsured AI/ANs in the 16 states that have at least one federally-recognized Tribe and *have not yet* adopted the Medicaid expansion. For each state, the table shows the total number of uninsured AI/ANs (all income levels), the number of AI/ANs gaining Medicaid coverage over the 2010 – 2016 period, and the estimated remaining number of uninsured AI/ANs who have an income at or less than 138% FPL. As of 2016, more than 130,000 uninsured AI/ANs potentially could qualify for Medicaid if these states adopted the expansion. For example, more than 14,000 uninsured AI/ANs in South Dakota, more than 16,000 in Texas, and about 40,000 in Oklahoma have household income at or less than 138% FPL and would become eligible for comprehensive coverage under Medicaid if their state exercised its Medicaid expansion authority. Additional AI/ANs who have health insurance through an employer-based plan would become eligible to transition to coverage through Medicaid.

Table A2: Uninsured AI/ANs with Potential Medicaid Eligibility in Non-Expansion States with at Least One Federally-Recognized Tribe; 2016				
State	All Uninsured AI/ANs¹ (all income levels; 2016)	0-138% FPL²		
		Number AI/AN Gaining Medicaid Coverage (2010-2016)	Remaining Number of Uninsured AI/ANs (under 139% FPL)	Remaining Uninsured AI/ANs (under 139% FPL) as % of Total Uninsured AI/ANs
Alabama	7,601	857	2,833	37.3%
Florida	36,363	5,667	10,610	29.2%
Idaho	7,138	2,184	1,931	27.1%
Kansas	7,506	-5,953	3,564	47.5%
Maine	2,367	-1,414	360	15.2%
Mississippi	5,134	1,054	3,286	64.0%
Nebraska	6,588	-5,110	1,431	21.7%
North Carolina	32,453	3,725	12,989	40.0%
Oklahoma	130,490	5,815	39,609	30.4%
South Carolina	6,382	5,474	2,767	43.4%
South Dakota	26,407	8,024	14,287	54.1%
Texas	60,286	19,611	16,406	27.2%
Utah	9,358	-549	2,550	27.2%
Virginia	7,390	11,133	2,121	28.7%
Wisconsin	12,492	-2,957	5,542	44.4%
Wyoming	6,779	-1,168	885	13.1%
TOTAL	364,734	46,393	121,172	33.2%

¹ Census Bureau, 2016 American Community Survey, 1-Year Estimates.

² Analysis of Census Bureau, 2016 American Community Survey, 1-Year Estimates. Figures assume that all AI/ANs live in a 3-person household, based on average household size of 2.87 in 2016.

Total AI/AN Medicaid Enrollment Since Enactment of the ACA

Table B below provides data on AI/AN Medicaid enrollment in the 35 states that have at least one federally-recognized Tribe over the 2010 – 2016 period. For each state, the table shows Medicaid expansion status, AI/AN enrollment by year, the change in enrollment during the seven-year period, and the remaining number of uninsured AI/ANs with a household income at or less than 138% FPL. Among these 35 states, AI/AN Medicaid enrollment rose by more than 360,000 from 2010 to 2016, with expansion states accounting for almost 315,000 of the increase. From 2015 to 2016 alone, across these 35 states Medicaid enrollment of AI/ANs increased by 96,303.

Table B: AI/AN Medicaid Enrollment in States with at Least One Federally-Recognized Tribe; 2010-2016										
State	Medicaid Expansion Status	AI/AN Medicaid Enrollment, by Year ¹ (Shading Indicates Year Medicaid Expansion Took Effect, if Implemented)							Change (2010-2016)	Remaining Uninsured ² (0-138% FPL)
		2010	2011	2012	2013	2014	2015	2016		
Alabama	No	10,451	11,694	14,565	10,327	15,518	12,578	11,308	857	2,833
Alaska	Yes	43,518	35,726	48,369	45,853	43,340	49,519	57,311	13,793	9,387
Arizona	Yes	132,452	138,926	128,442	128,848	151,966	149,385	163,428	30,976	27,472
California	Yes	180,674	191,251	191,206	202,205	232,548	255,818	258,554	77,880	16,039
Colorado	Yes	25,340	34,218	26,648	28,246	46,316	37,358	36,772	11,432	3,407
Connecticut	Yes	10,087	7,324	8,684	9,839	12,308	15,192	18,733	8,646	232
Florida	No	32,714	39,488	29,370	28,462	34,315	33,765	38,381	5,667	10,610
Idaho	No	11,097	8,711	8,112	8,986	8,782	11,803	13,281	2,184	1,931
Indiana	Yes	8,844	15,271	13,723	12,231	16,758	11,507	15,769	6,925	2,113
Iowa	Yes	10,076	14,454	12,294	10,289	8,629	10,730	7,538	-2,538	975
Kansas	No	18,806	15,660	16,530	11,621	12,037	12,702	12,853	-5,953	3,564
Louisiana	Yes	15,065	18,449	13,858	16,544	12,635	15,327	21,468	6,403	1,716
Maine	No	8,706	10,160	11,721	11,514	13,159	10,939	7,292	-1,414	360
Massachusetts	Yes	16,649	14,354	15,304	19,554	18,221	22,404	15,959	-690	287
Michigan	Yes	40,308	49,410	42,664	48,482	49,535	52,375	58,699	18,391	5,435
Minnesota	Yes	45,042	40,178	37,895	42,488	41,235	36,799	41,186	-3,856	4,496
Mississippi	No	7,132	4,463	5,688	5,983	6,464	8,791	8,186	1,054	3,286
Montana	Yes	24,948	20,652	31,656	29,960	26,359	28,997	40,102	15,154	5,936
Nebraska	No	11,908	11,376	9,998	8,827	9,478	9,367	6,798	-5,110	1,431
Nevada	Yes	8,879	9,370	12,017	12,906	14,066	19,102	17,143	8,264	2,242
New Mexico	Yes	66,751	77,379	70,986	82,033	91,111	105,685	103,688	36,937	12,211
New York	Yes	50,667	55,019	65,073	63,492	78,738	69,794	75,016	24,349	4,018
North Carolina	No	58,308	53,437	56,316	57,495	57,499	57,779	62,033	3,725	12,989
North Dakota	Yes	12,692	13,091	12,045	16,608	18,409	17,061	19,371	6,679	4,067
Oklahoma	No	118,600	117,557	125,494	123,202	116,748	121,030	124,415	5,815	39,609
Oregon	Yes	31,377	32,991	36,673	33,917	53,749	47,524	60,649	29,272	5,449
Rhode Island	Yes	5,732	4,117	4,907	2,985	5,995	7,129	7,086	1,354	0
South Carolina	No	7,749	12,875	7,775	9,309	11,088	9,132	13,223	5,474	2,767
South Dakota	No	33,561	38,137	39,819	37,552	36,519	36,255	41,585	8,024	14,287
Texas	No	48,106	60,854	66,109	59,001	54,785	71,885	67,717	19,611	16,406
Utah	No	15,984	12,826	13,237	12,273	13,045	12,832	15,435	-549	2,550
Virginia	No	8,318	12,970	17,609	12,852	9,640	13,925	19,451	11,133	2,121
Washington	Yes	58,987	60,702	56,778	58,575	75,442	73,879	84,536	25,549	5,335
Wisconsin	No	32,976	26,014	35,115	31,731	29,653	33,191	30,019	-2,957	5,542
Wyoming	No	7,951	7,432	7,357	6,552	6,156	3,906	6,783	-1,168	885
TOTAL (Expansion States)		788,088	832,882	829,222	865,055	997,360	1,025,585	1,103,008	314,920	110,817
TOTAL (Non-Expansion States)		432,367	443,654	464,815	435,687	434,886	459,880	478,760	46,393	121,172
GRAND TOTAL		1,220,455	1,276,536	1,294,037	1,300,742	1,432,246	1,485,465	1,581,768	361,313	231,990
			+56,081	+73,582	+80,287	+211,791	+265,010	+361,313		

¹ Census Bureau, 2010-2016 American Community Survey, 1-Year Estimates. Montana and Louisiana implemented the Medicaid expansion in January 2016 and July 2016, respectively. Shading indicates the year the Medicaid expansion went into effect, if any.

² Analysis of Census Bureau, 2016 American Community Survey, 1-Year Estimates. Figures assume that all AI/ANs live in a 3-person household, based on average household size of 2.87 in 2016.

These health insurance expansions—and the corresponding drop in the number of uninsured—would be reversed if Congress defunded the Medicaid expansion option. For example, the vast majority of the 77,880 newly-eligible AI/ANs who gained Medicaid coverage in California since 2010 would lose that coverage. In New Mexico, 36,937 AI/ANs would be at risk of losing Medicaid coverage. And in Colorado, the nearly 50% increase in AI/ANs with Medicaid coverage—from 25,340 to 37,358—would be lost if Congress repealed the Medicaid expansion authority.

Recently released Census data for 2016 showed substantial increases in Medicaid enrollment among AI/ANs—and reductions in the number of uninsured AI/ANs—in Medicaid expansion states. In particular, Alaska and Montana experienced significant Medicaid enrollment growth among AI/ANs, as the Medicaid expansions in these states began in September 2015 and January 2016, respectively. According to Census data, from 2015 to 2016, Medicaid enrollment among AI/ANs increased by 7,792 in Alaska and by 11,105 in Montana.