

How expanding Medicaid will improve healthcare equity for all North Carolinians

Improving health insurance coverage can have a ripple effect. By expanding Medicaid, North Carolina could take great steps toward health equity and improving the health of our entire community.

Many North Carolinians must choose between going to the doctor and buying food or other necessities every day. A 2021 poll conducted by Altarum found that [more than 3 in 5 state residents](#) experienced healthcare affordability burdens in the past year and more than 3 in 4 (78%) are worried about affording healthcare in the future. According to analysis by the Kaiser Family Foundation, in 2021 as many as [9.4% of non-elderly North Carolinians](#) were uninsured and faced the full financial burdens of their healthcare, despite living in a state with a wealth of medical care and research abilities; half of those uninsured were [people of color](#).

According to [the North Carolina Justice Center](#), the uninsured rate among White North Carolinians is 9.6%, while 11% of Black state residents are uninsured. The greatest disparity though is among Latinx North Carolinians, for whom the uninsured rate is 30.3%. Beyond race and ethnicity, there are additional disparities between North Carolina's urban and rural counties, which make up more than half of the state. An analysis published in the North Carolina Medical Journal found that as many as [20 of the 22 counties with the highest uninsured rates were rural](#).

Far too often, these neighbors and patients choose to delay care for economic reasons, leading to poorer health which, in turn, requires more serious and, often more costly, medical attention. This puts an even greater strain on our healthcare system, and hospitals must absorb these costs when uninsured patients cannot pay for the care they need. But there is an option on the table that advocates believe will improve the health of our entire community, Medicaid expansion.

North Carolina is one of only a dozen states that has not yet expanded Medicaid under the Affordable Care Act. If passed by the General Assembly, the Medicaid Expansion and Healthcare Access and Stabilization Program (HASP) would give healthcare coverage to anyone in North Carolina making less than 138% of the federal poverty level (approximately \$17,609 for an individual in 2020).

According to the Kaiser Family Foundation, a nonpartisan health policy research organization, this would possibly cover up to 600,000 people in the state and as many as [372,400 currently uninsured nonelderly adults](#), the majority of whom live below the federal poverty level. North Carolinians have a preview of how this expansion could positively affect healthcare for many in the state. A [recent article in Politico](#) outlined how Medicaid expansion has already made a huge difference for low-income pregnant women in North Carolina.

Pregnant women in North Carolina had already been covered by Medicaid but prior to April 2022, that care only extended 90 days after the mother gave birth. In April, North Carolina became one of 15 states to extend Medicaid coverage to mothers until 12 months postpartum. That means physicians and care providers no longer have to rush their treatment plans into the 90 days of postpartum coverage and that new mothers will be able to receive focused care until their child's first birthday. It's estimated this step could help more than 50,000 women. According to the Georgetown University Health Policy Institute Center for Children and Families, [multiple studies have shown](#) that if we continue toward full Medicaid expansion, we can expect to see [declines in maternal mortality](#) and significant increases in the access and use of care for pregnant women and mothers, like other states have.

Beyond maternal mortality, a [review of over 400 studies](#) compiled by the Kaiser Family Foundation showed that Medicaid expansion is associated with a series of system-wide positive health and economic outcomes. These include greater access to care, decreased uncompensated care costs, reduced medical debt, increased coverage, increased use of care, and improved affordability of care.

Medicaid expansion has dramatically lowered uninsured rates, leading to healthier outcomes and greater financial security for those who gained this coverage. This has improved racial disparities in health outcomes, insurance coverage and access to care. All which leads to more positive health outcomes especially for those with cancer, chronic conditions, and disabilities. North Carolina could expect to see an even greater impact on health equity, as half of those who would become eligible for Medicaid under expansion are people of color, and, according to the North Carolina Rural Center, most of the counties with the highest rates of uninsured residents are rural.

Rural hospitals are often the only healthcare provider in their communities as well as one of the largest local employers. Medicaid expansion could have some of its greatest impact on the economies in those areas, helping ease the financial stress on rural hospitals.

In states where expansion has happened, hospitals have seen reductions in uncompensated care costs. In 2021 alone, NCHA reports that North Carolina hospitals provided approximately [\\$1.2 billion in charity](#) care, otherwise known as uncompensated care to patients who can't afford to pay.

It is vital to the financial stability of these rural hospitals, to slow these expenses. Unfortunately, the rate of rural hospital closures across the US is accelerating, and more than twice as many [rural hospitals closed between 2013 and 2017](#) than the previous five-year period.

For many of these healthcare systems, the coronavirus pandemic only exasperated these already dire conditions.

NCHA believes that expanding Medicaid and passing the Healthcare Access and Stabilization Program (HASP) will prioritize affordable healthcare for over 600,000 North Carolinians and that

Medicaid expansion is the single, most important step the state can take to achieve health equity for all North Carolinians.

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