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## Poor access for poor patients without Medicaid expansion

Patients with low incomes who are uninsured in US states that opt out of Medicaid expansion will suffer the greatest consequences in terms of reduced access to healthcare services, according to research conducted in Virginia.

In order to achieve improved access to healthcare for low-income patients, an essential component of the Patient Protection and Affordable Care Act (ACA), which became law in 2010, was that US states participate in Medicaid expansion, particularly in view of the concomitant planned reduction in federal funding to hospitals that provide care for poor and uninsured patients via Disproportionate Share Hospital (DSH) funds. However, a Supreme Court ruling indicated that the states are not required to do so, and several states (including Virginia) appear likely to opt out of Medicaid expansion primarily because of its cost.

The impact of no Medicaid expansion in Virginia on gynaecologic oncology patients was assessed at a state teaching hospital with a high proportion of low-income patients. The study included 1623 new patient referrals over a 2-year period from 2010 to 2012. Approximately 7% of patients were uninsured with an income at or below the federal poverty level. Prior to ACA, these patients would generally not be covered by Medicaid, but would rely on hospital care via DSH funds. In the absence of Medicaid expansion, these vulnerable patients would not be covered by Medicaid, would be ineligible for discounted insurance, and would be adversely affected by the proposed reduction in DSH funds, say the researchers.

Courtney-Brooks M, et al. The Patient Protection and Affordable Care Act: Impact on the care of Gynecologic Oncology patients in the absence of Medicaid expansion in Central Virginia. Gynecologic Oncology: 3 May 2013. Available from: URL: http://dx.doi.org/10.1016/j.ygyno.2013.04.468