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ACA Implementation in Kentucky: Experiences of an Expansion State

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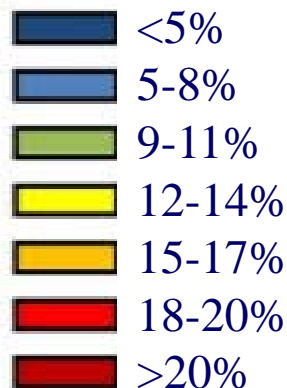
Key ACA implementation decisions

- Medicaid expansion and state-run health insurance exchange (kynect) established by executive order
- Outreach and enrollment conducted regionally by state primary care association, community action councils, public health agencies and other local agencies

Progress with coverage expansion

- 640,000 uninsured in 2013 (20.4% of nonelderly)
- 413,407 enrolled through kynect in 2014
 - 70% newly eligible for Medicaid
 - 10% previously eligible for Medicaid (woodwork)
 - 20% purchased private insurance
- 75% of kynect enrollees report previously uninsured
- 630 businesses enrolled in small business exchange
- Estimated additional 110,000 individuals enrolled outside of kynect (Kowalski 2014)

Kentucky uninsured estimates



Estimates prior to ACA, 2013



Estimates post-ACA 2014

Gallop uninsured:

2013 → 2014
20.4% 11.9%



Early signals of access & prevention

One year changes in Medicaid utilization for 2014:

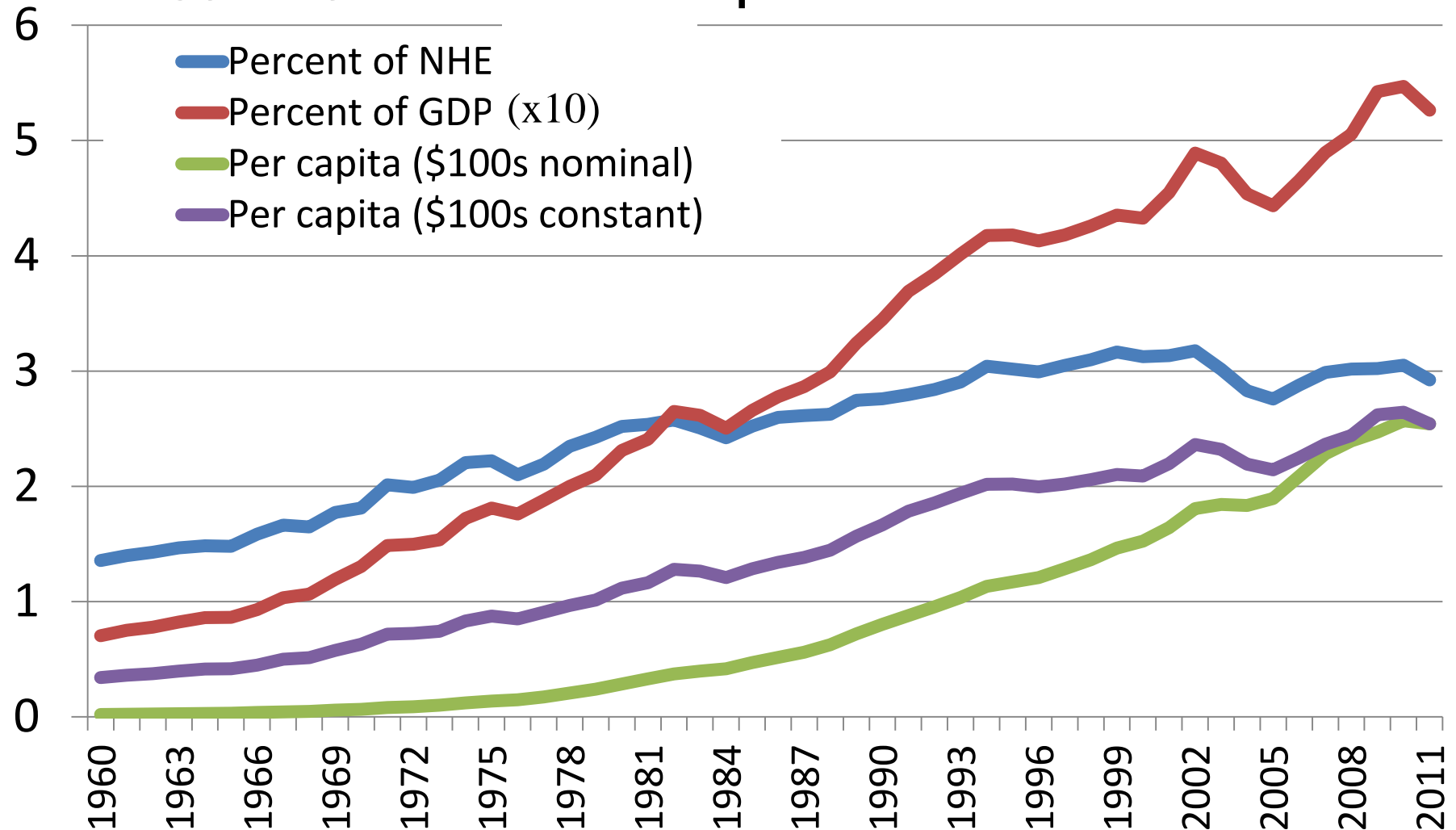
- Preventive dental visit volume up 15.8%
- Breast cancer screening volume up 36.7%
- Cervical cancer screening volume up 3.0%
- Colorectal cancer screening volume up 16.1%
- Hospitals reporting Medicaid revenue growth, reductions in uncompensated care volume

Uncertainties & ongoing challenges

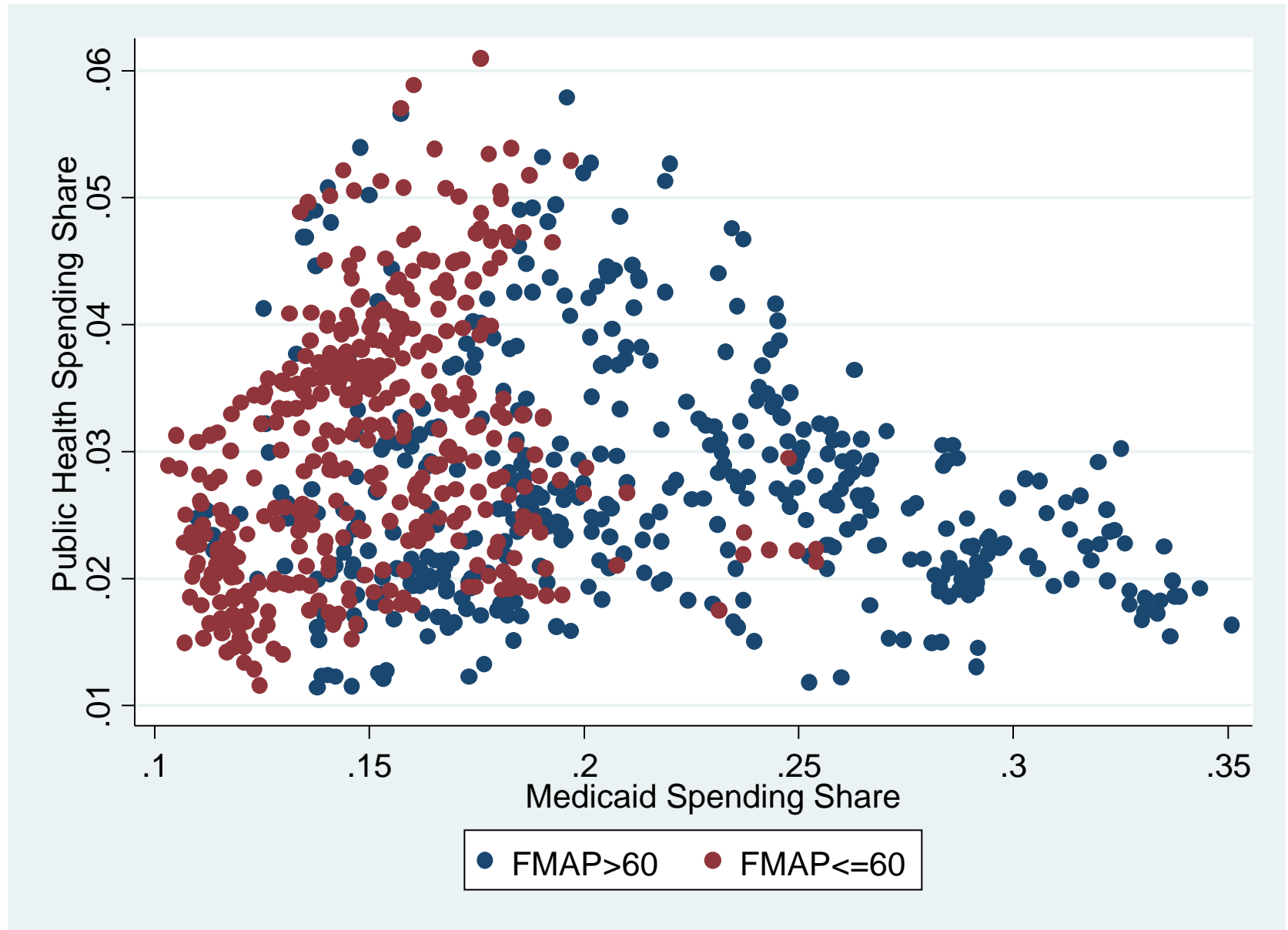
- Political opposition and legal challenges
- Exchange funding
- Delivery system & payment reform
- Public health & prevention funding

Trends in public health spending

Governmental Expenditures for Public Health Activity, USDHHS National Health Expenditure Accounts

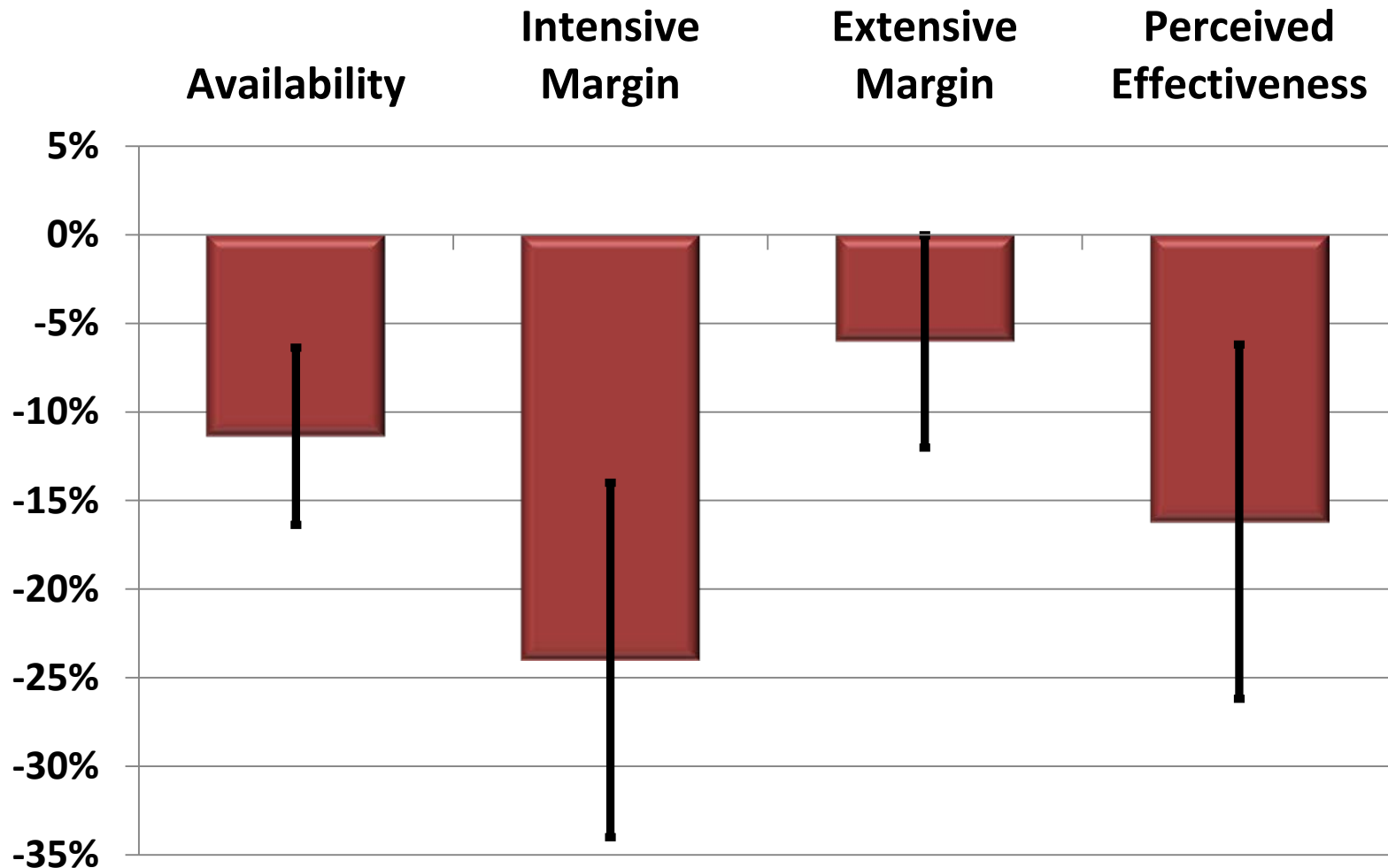


Dynamics of Medicaid and Public Health Spending



Estimated Effect of Medicaid Spending Growth on Delivery of Recommended Public Health Services

At Median Medicaid Budget Share Growth of 3.9%



Source: Mays GP et al. National Longitudinal Survey of Public Health Systems, 2014

For More Information



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