The Impact of Medicaid Expansion on Those Lacking Housing Basics, 2010-19

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RESEARCH OBJECTIVE

- Virtually no study exists that discusses the relationship between housing quality, as measured by having certain basic necessities, and the likelihood of having health insurance coverage.
- Individuals with housing issues are typically identified as having more healthcare needs such as infectious diseases.
- The purpose of this study is to investigate disparities in health insurance coverage among individuals with various levels of housing quality, excluding those who are experiencing homelessness.

POPULATION STUDIED

- By using available data from the American Community Survey, 2010-2019, we expose how those individuals lacking housing basics gained health insurance coverage after the ACA was implemented.
- Basic necessities are defined as access to the following: bathtub or shower, heating, sink with a faucet, stove or range, telephone service, refrigerator.
- Individuals whose homes lack at least one of the aforementioned are considered as having at least one basic necessity.
- The focus is on individuals 0-64 years of age earning 400% or less of the FPL.

PRINCIPAL FINDINGS

- Adjusted uninsured rates decreased 5.19 percentage points more in Medicaid expansion states than in non-expansion states among those lacking at least one basic necessity among individuals with income up to 400% of FPL.
- Adjusted Medicaid coverage increased 9.94 percentage points more in expansion states than in non-expansion states among those lacking at least one basic necessity.
- There is a 1.90 percentage point greater adjusted increase in employer sponsored private insurance coverage in non-expansion states than expansion states.
- We also find that insurance coverage rates increased for both groups after the ACA implementation in both expansion and non-expansion states.

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IMPLICATIONS FOR POLICY AND PRACTICE

The basis for these dissimilarities may include barriers related to income, educational level as well as other factors. Policies that would affect health insurance coverage in the future should consider the effect on a higher budgetary priority on housing.

CONCLUSION

- Those living in homes lacking at least one basic necessity displayed the highest improvements in insurance coverage.
- However, disparities in coverage continue to persist between individuals whose housing lacks at least one basic necessity and those with complete housing.

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