



Top 10 Reasons to Expand Health Care Coverage in Wisconsin

- 1) **Cover the uninsured.** Over 11% of people in Wisconsin (more than 550,000) could benefit from a coverage expansion. The uninsured currently use the emergency room for health care and often suffer from worsened health without access to needed services.¹
- 2) **End the waiting list.** 153,388 of our friends, neighbors and relatives in Wisconsin are on a waiting list for health care coverage. Coverage expansions can provide an option for some of these folks and link them to the much needed care.²
- 3) **Reduce uncompensated care costs.** Wisconsin Hospitals provide over \$1.2 billion in uncompensated care annually for people without any health insurance or inadequate insurance. Most health care providers socialize and redistribute uncompensated care costs to other payors, which results in higher overall health care costs that we all pay. A Coverage expansion can reduce uncompensated care costs and cost shifting!³
- 4) **Help local property tax payors.** Wisconsin Counties spend over \$430 million annually to pay for mental health services. Some of these payments could be picked up by Medicaid and help reduce local property tax levies.⁴
- 5) **JOBS!** Wisconsin may receive over \$4.2 billion in federal funds over the first five years that will spread to every county in the state with health facilities, creating and maintaining jobs.⁵
- 6) **Save the state money!** Wisconsin will end up \$248 million ahead on the financial ledger if we expand coverage for the uninsured.⁶
- 7) **Secure our share of Federal dollars!** Wisconsin ranks 32nd out of 50 states in securing federal dollars and 49th out of 50 in related federal salaries and wages. Expanding health coverage will bring home federal dollars and help promote economic growth in Wisconsin.⁷
- 8) **Federal funds pay the vast majority of program costs.** The program is 100% federally funded for the first three years! The rate extends from 95 to 90% by 2020.⁸
- 9) **Reduce medical debt and medical bankruptcy.** Medical debt and medical bankruptcy cases overburden the Court system. Improved access to care for the uninsured will reduce these cases and save the court system precious resources.⁹
- 10) **Reduce mortality and morbidity in Wisconsin.** Improved access to health care will reduce mortality and morbidity rates for people that lack health insurance.¹⁰



¹ Kaiser Family Foundation State Health Facts: Wisconsin.

<http://www.statehealthfacts.org/profileind.jsp?sub=40&rgn=51&cat=3>

² ABC for Health keeps track of clients enrolled in the BadgerCare Plus Core Plan. The State of Wisconsin Department of Health and Family Services does not provide this information to the public.

³ WHA Informational Center Uncompensated Health Care Report:

http://www.whainfocenter.com/data_resources/2011Uncompensated.pdf

See also, “The Financial Benefit to Hospitals from State Expansion of Medicaid,” Robert Wood Johnson

http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/03/the-financial-benefit-to-hospitals-from-state-expansion-of-medic.html?cid=xem_259medicaidB&cid=

⁴ Legislative Fiscal Bureau Information Report 50, January 2013: http://legis.wisconsin.gov/lfb/publications/Informational-Papers/Documents/2013/50_services%20for%20persons%20with%20mental%20illness.pdf

⁵ How Much Would the Medicaid Expansion Cost Your State? Annie Lowrey, New York Times, July 2, 2012,

<http://economix.blogs.nytimes.com/2012/07/02/how-much-would-the-medicare-expansion-cost-your-state/>

Also compare to another Midwestern State- Missouri

http://web.mhanet.com/uploads/media/Exec_Summary_MU_Medicaid_Expansion_Economic_Report.pdf

⁶ The Cost and Coverage Implications of the ACA Medicaid Expansion: National and State-by-State Analysis, November 2012,

http://www.kff.org/medicaid/upload/8384_ES.pdf

Also, see Legislative Fiscal Bureau Analysis of the Medicaid Proposal in the Budget:

http://legis.wisconsin.gov/lfb/publications/Miscellaneous/Documents/2013_02_15WILeg_EP_SA.pdf

⁷ Census Bureau reports on federal spending for 2010 (released in Sept. 2011: <http://www.census.gov/prod/2011pubs/cffr-10.pdf>. Also see earlier data: <http://taxfoundation.org/article/federal-tax-burdens-and-expenditures-state>

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⁸ Urban Institute’s “Consider Savings as Well as Costs: Timely Analysis of Immediate Health Policy Issues” (July 2011):

<http://www.urban.org/uploadedpdf/412361-consider-savings.pdf>

Also, see 42 CFR Part 433 DHHS (CMS) Final Rule “Medicaid Program; Increased Federal Medical Assistance Percentage

Changes under the Affordable Care Act.” http://www.ofr.gov/OFRUpload/OFRData/2013-07599_PI.pdf

⁹ Medical Bankruptcy in the United States, 2007: Results of a National Study. David U. Himmelstein Deborah Thorne, PhD,

Elizabeth Warren, JD, Steffie Woolhandler, MD, MPH Am J Med. 2009 Aug;122(8):741-6,

<http://www.ncbi.nlm.nih.gov/pubmed/19501347>

¹⁰ Will Expanding Medicaid Coverage to Low-Income Uninsured Childless Adults under the Affordable Care Act Improve Health? Evidence from Wisconsin, T. DeLeire, L. Dague, L. Leininger, K. Voskuil, D. Friedsam,

<http://liberalarts.iupui.edu/cher/uploads/docs/deleirepaper.pdf>

Also, see Mortality and Access to Care among Adults after State Medicaid Expansions, B. Sommers, K. Baicker, and A.

Epstein, N Engl J Med 2012; 367:1025-1034, <http://www.nejm.org/doi/full/10.1056/NEJMSa1202099>