

Mike Pence expanded Medicaid. Here's what that means.

By Joanna Weiss | July 20, 2016

Nearly everything is politicized today, but it's still hard to find a subject more polarizing than the Affordable Care Act. To critics – including the crowds at the GOP convention – the ACA has brought needless cost and imposed excessive regulation. To supporters, it has increased access to healthcare and put the United States on pace with other industrialized countries.

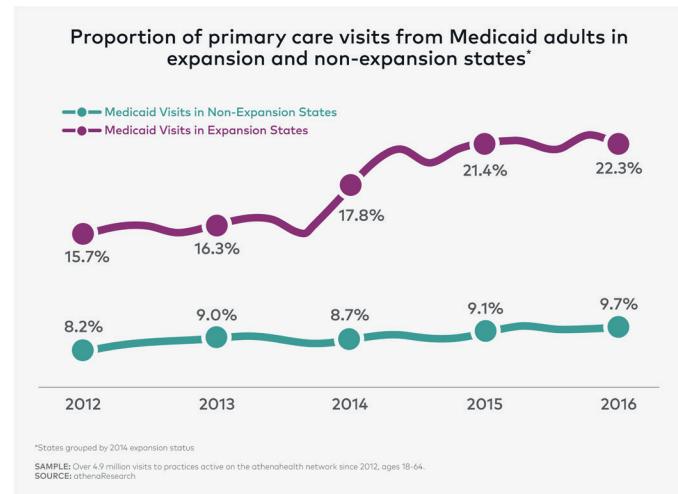
So vice presidential nominee Mike Pence finds himself navigating some tricky cross-currents. As governor of Indiana, Pence had to decide whether to accept a key provision of the ACA, expanding Medicaid eligibility in exchange for substantial federal funding.

He wound up pioneering a controversial waiver that extended healthcare to up to 350,000 Indians, while requiring them to pay premiums and enroll in health savings accounts.

For this, Pence won both criticism and praise. But data provides an objective look, for better or worse, at the effects of Medicaid expansion nationwide. When researchers analyzed records from the athenahealth network, they found some striking trends.

Since expansion took effect in 2013, the number of primary care visits by Medicaid patients in expansion

states has risen significantly – at more than twice the rate of patients in non-expansion states.



In addition, more than two-thirds of first-time Medicaid patients returned for a follow-up visit within 18 months. And new Medicaid patients were even more likely to go back for care if they had multiple chronic conditions.

The upshot? It seems that, due to Medicaid expansion, more patients are getting treatment that's more regular and coordinated. That's not the whole of the ACA, but it's a key piece of the picture.



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