

# PUBLIC HEALTH OUTCOMES OF HEALTHCARE ACCESS



A Resource for Improving Measurable Impact  
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## Healthcare Access

### What is the problem?

Access to and affordability of healthcare are significantly worse for low-income adults in Texas than in other southern states (including Arkansas, Kentucky, and Louisiana).<sup>1</sup>

**54% of low-income adults in Texas do not have a primary care physician.**<sup>1</sup> This leads to increased ER visits, impacting subsidized taxpayer dollars and health insurance buyers.<sup>2</sup>

### Improved access to healthcare can be accomplished by:

- Enabling services – care coordination, health education, transportation, and assistance with obtaining food, shelter, and benefits<sup>7</sup>
- State Medicaid expansion<sup>8,9</sup>
- Access to telehealth services<sup>10-13</sup>
- Incentives to enhance workplace insurance provision

### Improved access to healthcare is associated with:

- Increased care utilization, and decreased uncompensated care costs, such as emergency room visits<sup>3</sup>
- Greater provider capacity<sup>3</sup>
- Improved self-reported health and health outcomes<sup>2</sup>
- Increased likelihood of having a personal physician and having at least one outpatient physician visit<sup>4,5</sup>
- Increased awareness and control of hypertension among low-income adults<sup>4</sup>
- Increased probability of getting an HIV test<sup>5</sup>
- Greater ability to afford follow-up care and pay medical bills<sup>6</sup>

## Health Outcomes

Medicaid expansion has provided public health researchers the opportunity to study the impact of increased healthcare access. Research shows that state Medicaid expansion has significant associations with:

Improved access to healthcare among low-income adults [14]

Higher rates of diabetes management [15] and mental health management [16,17]

Slower rates of health decline, especially among low-income adults, in southern states [18]

Delays in seeking care due to appointment availability or wait times [6]



<sup>1</sup> Increased healthcare utilization and improved self-reported health may not be sustained in the long term<sup>14</sup>

<sup>2</sup> Despite increased access to care, researchers did not find significantly different rates of ICU admissions or in-hospital mortality among patients with COPD, asthma or heart failure<sup>19</sup>

**Additional notes on health outcomes of state Medicaid expansion:**

- Compared to states without Medicaid expansion, adults in states that expanded Medicaid report significantly fewer mental health days and reduction in depression diagnoses.<sup>20</sup>
- Research suggests provision of healthcare to existing patients was not reduced to accommodate newly insured patients.<sup>14</sup>
- Healthcare providers and agencies implement strategies, such as increasing the supply of primary care physicians, that may help alleviate delays in care experienced due to appointment availability or wait times.<sup>6</sup>
- Physicians report significantly more newly insured patients with type 2 diabetes in Medicaid expansion states, a precursor to improving long-term outcomes for these patients.<sup>21</sup>
- Substance Use Disorder facilities and residential treatment settings report a 10% and 34% respective increase in psychiatric medication prescriptions following Medicaid expansion, which facilitates integrated treatment.<sup>17</sup>

**Economic Outcomes**

Medicaid expansion has provided public health researchers the opportunity to study the economic impact of increased healthcare access:

RURAL AREAS	State Medicaid expansion has been associated with a 1.2% increase in average operating margins for health systems. This benefit is even greater among rural hospitals (2.5% increase in operating margins). [22]
HEALTH SYSTEMS	State Medicaid expansion has been associated with a 36% decrease in uncompensated care expenditures in both rural and nonrural areas. [22]
CASE STUDY FROM MICHIGAN	Costs of Medicaid Expansion have been found to be offset by decreases in non-Medicaid health program expenses and increased revenue from provider taxes. [23]
STATE BUDGETS	State Medicaid Expansion leads to significant budget savings and revenue increases, providing states with additional resources to fund other priorities or cut taxes. Virginia's Expanded Medicaid Program implemented in 2019 doubled its projected Medicaid savings. [24]

**Summary**

Medicaid expansion serves as a lesson for the effectiveness and impact of increasing healthcare access on health and quality of life outcomes. Similarly, policy solutions such as increased workforce participation,

telehealth, rural health care center care, and enabling services, can increase access and utilization of healthcare services.

TX RPC Network Member Content Expert

**Katelyn Jetelina, PhD**

The University of Texas Health Science Center at Houston (UTHealth) School of Public Health in Dallas

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