

Healthcare exchanges and medicaid eligibility

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Healthcare Exchanges and Medicaid eligibility in accordance with ObamaCare

The ObamaCare Medicaid Expansion program is among the largest milestones as far as healthcare reform is concerned as it seeks to expand Medicaid to most of the poorest people in the country so that almost fifty percent of all the Americans who are not insured can be covered (Thompson, 2012). Nevertheless, changing the law will result in numerous working families being left without any cover by 2016. Therefore, it is important that state governors and Legislatures be aware that implementing Healthcare Exchanges and increasing Medicaid eligibility in accordance with Obamacare will make health insurance more accessible for approximately half of the people who are not insured. Therefore, allowing them not to be part of the ObamaCare Medicaid expansion will mean that millions of people will not be covered and at the same time, the tax payers will incur costs.

State governors as well as lawmakers not implementing Healthcare Exchanges and not increasing Medicaid eligibility in harmony with ObamaCare should be aware that the Americans who are not insured cost the taxpayers' money as they use expensive emergency services rather than accessing preventive care which they require. The states that will not create a marketplace or expand Medicaid will require federal tax funds in order to subsidize numerous people who would have qualified for Medicaid if the states adhered to the expansion (Atlas, 2010). The costs associated with Medicaid are covered by the federal and state governments. In case all states act in accordance with the ObamaCare Medicaid Expansion, they would pay seventy six billion dollars in order to ensure that more than twenty one million people are insured, and that will account for more than a

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half of all the uninsured individuals in the nation.

References

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- Thompson, F. (2012). Medicaid politics. Washington, DC: Georgetown University Press.