Medicaid Expansion, Ryan White Are Lifelines for People With HIV

In 2014, the Affordable Care Act allowed states to expand their Medicaid programs.

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States that have opted to expand their Medicaid programs since 2014 under the Affordable Care Act (Obamacare) have a much lower rate of lack of health insurance in their adult HIV populations, AJMC reports.

Additionally, according to a new study presented at the International AIDS Conference (AIDS 2020), which was held virtually last week, the Ryan White HIV/AIDS Program remains a vital source of health coverage, even for those who are privately insured.

Two researchers from the Kaiser Family Foundation, associate director of HIV policy Lindsey Dawson, MPP, and senior vice president and director of global health and HIV policy Jennifer Kates, PhD, MPA, reported findings from the study.

The researchers based their analysis in part on 2015 to 2018 data from the Centers for Disease Control and Prevention's Medical Monitoring Project.

In 2018, 40% of adults with HIV received insurance coverage through Medicaid, while 35% were privately insured, 8% had Medicare and 7% had another form of insurance, such as coverage through the Veteran's Administration. Eleven percent were uninsured. This finding indicates that health coverage rates in the HIV population remained stable between 2015 and 2018.

By comparison, 56% of the general U.S. population has private insurance coverage.

In the states that expanded their Medicaid programs, 46% of HIV-positive individuals were on Medicaid, 34% had private insurance and 15% had Medicare plus other coverage. In the states that did not expand Medicaid, those rates were 36%, 30% and 14%, respectively. In expansion states, 6% were uninsured, compared with 20% in the nonexpansion states.

The proportion of various subpopulations of people with HIV who were privately insured was 45% among whites, 39% among men, 23% among women, 31% among Blacks and 28% among Latinos.

Fifty-four percent of women and 36% of men had Medicaid. Fourteen percent of Blacks and 15% of

Latinos were uninsured, compared with 4% of whites.

Forty-six percent of adults with HIV received medical care that was covered by Ryan White, including 82% of those who did not have insurance, 62% of those with Medicare and 38% of those with private insurance. Among those with private insurance, the proportion relying on Ryan White was 56% among those with an Obamacare health plan (called a marketplace plan) compared with 32% among those with employer-provided health coverage.

Those who received Ryan White–provided care, compared with those who did not, had higher rates of full suppression of HIV, including 75% versus 69% among those with private insurance, 64% versus 59% among those with Medicaid, 73% versus 67% among those with Medicare and 60% versus 54% among those without insurance.

In the study population as a whole, 68% of those with HIV had an undetectable viral load at their last test, and 62% had evidence indicating they had sustained fully suppressed virus over time.

“The findings from this study will provide the latest nationally representative data on insurance coverage of people with HIV in the U.S. as well as the relationship between coverage and viral suppression,” Dawson said. “Such data are critical for monitoring and assessing changes in the U.S. health financing landscape and their impact on the coverage and health of those with HIV.”

To read the AJMC article, click here.

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