

ObamaCare's Medicaid Expansion Limits Medical Choices

By DR. JEFFREY A. SINGER October 30, 2014

The national debate over the Affordable Care Act's Medicaid expansion is nowhere close to being finished. Just ask my patients, who were forced off their private insurance and into the failing, government-run health care program.

This was one of the ACA's (or ObamaCare's) many unintended consequences.

In the 27 states that have expanded Medicaid — including my state, Arizona — many middle-class individuals and families with private health insurance shopped around on Healthcare.gov for their 2014 health care plans.

They reasonably assumed they could continue using their private plan, or perhaps even purchase a different plan that better fit their needs. Instead, they were forced into Medicaid because of their income level, whether they liked it or not.

You may be asking whether this is a big deal. After all, Medicaid is free for those who qualify for it. But this comes with significant trade-offs.

In exchange for paying no money, Medicaid patients receive severely limited access to doctors and health care, ultimately leaving them with worse health outcomes.

Two recent patients of mine illustrate these trade-offs. The first patient shows the dangers of Medicaid. She had recently undergone a full mastectomy to treat her breast cancer, making her a candidate for reconstructive surgery immediately following the initial procedure.

Unfortunately, Arizona's Medicaid expansion had recently pushed her out of private insurance and into Medicaid; her treatment options were severely limited as a result. Only one doctor in the area could perform the procedure, meaning she will have to wait up to nine months for her reconstruction.

Had she not been forced into Medicaid, she would have enjoyed access to a number of qualified physicians. This would have let her receive the reconstructive surgery immediately after the mastectomy, dramatically lessening the disruption to her health and her life.

The second patient demonstrates the freedom — and better health outcomes — for patients who don't have Medicaid (and may not even have private insurance).

The patient, a single mother not on Medicaid, had high family risk for breast cancer and an unexplained breast infection. She needed an MRI to ensure it was not cancerous.

Working together, we found a physician who could conduct the scanning for an affordable, \$300 cash payment.

Even though she had no insurance at all, she received the treatment and tests she needed in a timely and affordable manner.

The results for these two patients couldn't be more different. My patient with Medicaid now has to wait months for the medical attention she needs. My patient without Medicaid received the care she needed when she needed it, even though it cost her a small amount. She is today in better health.

Thanks to ObamaCare's Medicaid expansion, too many of my patients have been unwillingly put in the first situation — ultimately costing them their health care freedom, and possibly even their good health.

This unwanted change is being forced on patients across the country.

According to a recent study, perhaps up to 80% of ObamaCare's new Medicaid enrollees previously had private insurance plans.

These people are being shunted into a health care program that is substandard to private market alternatives.

Fewer physicians are accepting new Medicaid patients than ever.

Five years ago, 55% of physicians reported accepting new Medicaid patients; today, that number has dropped to 45%.

As illustrated above, this lack of doctors leads to increased wait times for medical care, which ultimately leads to worse health outcomes for these patients.

One recent study found that Medicaid is not only worse than private insurance — it can be worse than having no insurance at all. Medicaid patients were 25% likelier to have an in-hospital death than those completely without health insurance.

The same study also found that, compared with private insurance, Medicaid patients were twice as likely to have an in-hospital death, had the longest lengths of hospital stays and had the highest costs.

Other studies have reached similar conclusions. Two studies from the University of Pennsylvania and Johns Hopkins University found that Medicaid patients have higher mortality rates and higher death rates than patients with private health insurance.

These are startling results for a government-run health care system advertised as a quality substitute for private insurance. In reality, ObamaCare has created a two-tier health care system — and it's forcing millions of patients out of the top tier and into the bottom.

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