Background
The Affordable Care Act (ACA) establishes a new mandatory Medicaid eligibility group consisting of non-pregnant adults between 19-65 with incomes ≤ 133% FPL. (Functionally, with the 5% income disregard required by ACA, this category will include populations with countable income ≤ 138% FPL.)

How many newly eligible Illinoisans will gain coverage through Medicaid?

- It depends on who’s counting, and how.
- While estimates vary, the implications are the same: Illinois must prepare for a significant increase in Medicaid enrollment, and establish a benchmark benefit package appropriate for the newly eligible group.

What do we know about this large group of newly eligible Illinoisans?

- The Urban Institute’s tabulations of 210 American Community Survey Data provides some insight into the demographics of the newly eligible population in Illinois (percentages rounded to whole numbers):
  - Age distribution
    - 27% are age 19-24
    - 27% are age 25-34
    - 32% are age 35-54
    - 14% are age 55-64
  - Sex
    - 58% are male
    - 42% are female
  - Race/ethnicity
    - 51% are white
    - 16% are Hispanic
    - 28% are Black
    - 6% are other race
  - By citizenship status
    - 96% are U.S. citizens
  - 4% are legal immigrants

(Opting in to the Medicaid Expansion under the ACA: Who Are the Uninsured Adults Who Could Gain Health Insurance Coverage? Timely Analysis of Immediate Health Policy Issues, August 2012)

- The Center for Health Care Strategies examined existing state programs for low-income adults without dependent children to gain insights on the newly eligible population. Findings suggest:
  - This population will include many relatively healthy people as well as a significant number of individuals with multiple co-morbidities and high levels of likely service utilization.
  - Individuals who are below 50% FPL will have the highest levels of morbidity, including high rates of mental illness and substance abuse.
  - Different participation rates among population subsets will drive Medicaid costs; those with more complex needs are likely to enroll first.
  - Costs for the newly eligible group on average are likely to be greater than costs for parents currently covered by Medicaid, but less than costs for adults with disabilities.

(Covering Low-Income Childless Adults in Medicaid: Experiences from Selected States, August 2010)

- SAMHSA has released some analysis of prevalence rates for certain behavioral conditions among the newly eligible Medicaid population in Illinois:
  - 4.9% have serious mental illness
  - 12.1% experience serious psychological distress
  - 14.9% have substance use disorders