

MEDICAID

in Small Towns and Rural America:

A Lifeline for Children, Families, and Communities



Key Findings

1. Medicaid covers a larger share of children and families in small towns and rural areas than in large metropolitan areas. *In 2014-2015, Medicaid provided health coverage for 45 percent of children and 16 percent of adults in small towns and rural areas, compared to 38 percent and 15 percent, respectively, in metropolitan areas.* In nearly all states, a larger share of children and adults living in small towns and rural areas relies on Medicaid than those in metropolitan areas—and is more likely to be affected by increases or decreases in services.
2. *The Affordable Care Act's Medicaid expansion is having a disproportionately positive impact on small towns and rural areas.* The rate of uninsured adults in expansion states decreased 11 percentage points in the small towns and rural areas of these states between 2008-2009 and 2014-2015. This is larger than the decrease in metropolitan areas of expansion states (9 percentage points) and larger than the decrease in small towns and rural areas in states that did not accept the expansion (6 percentage points).
3. The rate of uninsured children in small towns and rural areas declined in the vast majority of states (43 out of 46 states) during the time period examined. The national rate of uninsured children in small towns and rural areas decreased by 3 percentage points. *Five states (Colorado, Nevada, New Mexico, Oregon, and South Carolina) saw very large declines of at least 8 percentage points between 2008-2009 and 2014-2015.* Three of these states (Nevada, Oregon and South Carolina) had the largest percentage point increases in children's Medicaid coverage among small towns and rural areas.

Medicaid is a vital source of health coverage nationwide, but the program's role is even more pronounced in small towns and rural areas.

A new report from Georgetown University Center for Children and Families and the University of North Carolina's NC Rural Health Research Program released in June 2017 found that Medicaid covers a larger share of nonelderly adults and children in rural and small-town areas than in metropolitan areas, a trend that is most striking among children.

Because Medicaid plays such a large role in small towns and rural areas, any changes to the program are more likely to affect the children and families living in small towns and rural communities.

The report also shows a sharp decline in the number of uninsured children since the 2008-2009 time frame. This is not primarily a result of the Affordable Care Act, but rather a bipartisan effort to ensure that children have coverage: starting with expansions of Medicaid to children under the poverty line in the 1980s and continuing with the passage of the Children's Health Insurance Program in 1997. This health coverage not only helps ensure children stay healthy and on track in school; it also provides their families a measure of financial security.

The report provides a state-by-state breakdown of Medicaid coverage and relies on data from the Census Bureau's American Community Survey (ACS). The full report and interactive maps featuring county-level information can be found on the Center for Children and Families website at <http://ccf.georgetown.edu/topic/rural-health/>.

Share of Children and Adults in Non-Metro and Metro Areas Who Are Enrolled in Medicaid, 2014-2015

State	Children with Medicaid in non-metro areas, 2014-2015 (percent)	Children with Medicaid in metro areas, 2014-2015 (percent)	Adults with Medicaid in non-metro areas, 2014-2015 (percent)	Adults with Medicaid in metro areas, 2014-2015 (percent)
United States	45%	38%	16%	15%
Alabama	52%	42%	14%	11%
Alaska	47%	31%	16%	10%
Arizona	54%	36%	34%	18%
Arkansas	61%	46%	21%	16%
California	54%	44%	28%	21%
Colorado	42%	35%	20%	15%
Connecticut	34%	32%	14%	17%
Florida	57%	44%	17%	11%
Georgia	53%	39%	13%	8%
Hawaii	48%	27%	20%	12%
Idaho	39%	35%	11%	9%
Illinois	42%	38%	19%	15%
Indiana	35%	34%	12%	12%
Iowa	36%	32%	15%	13%
Kansas	36%	27%	9%	7%
Kentucky	49%	36%	27%	19%
Louisiana	53%	48%	15%	12%
Maine	38%	30%	19%	13%
Maryland	43%	32%	19%	14%
Michigan	44%	38%	20%	19%
Minnesota	38%	28%	19%	14%
Mississippi	60%	46%	16%	12%
Missouri	41%	30%	13%	8%
Montana	35%	37%	9%	9%
Nebraska	31%	26%	7%	7%
Nevada	37%	35%	17%	14%
New Hampshire	33%	23%	11%	8%
New Mexico	59%	55%	27%	24%
New York	42%	41%	21%	22%
North Carolina	54%	39%	15%	10%
North Dakota	19%	20%	8%	9%
Ohio	40%	36%	19%	17%
Oklahoma	47%	38%	11%	8%
Oregon	52%	41%	26%	20%
Pennsylvania	40%	34%	16%	14%
South Carolina	57%	41%	17%	12%
South Dakota	34%	23%	9%	7%
Tennessee	50%	39%	17%	13%
Texas	46%	41%	9%	8%
Utah	23%	20%	8%	7%
Vermont	44%	30%	24%	19%
Virginia	44%	25%	13%	6%
Washington	53%	38%	21%	16%
West Virginia	51%	43%	26%	21%
Wisconsin	34%	31%	14%	13%
Wyoming	26%	29%	7%	8%

Notes: Differences may not sum due to rounding.

States with less than 2 percent non-metro population are excluded (Delaware, Massachusetts, New Jersey, Rhode Island, and the District of Columbia).

Medicaid counts include CHIP enrollees.

See Methodology section in the full report for additional information.

“Medicaid in Small Towns and Rural America: A Lifeline for Children, Families, and Communities,” June 2017, Georgetown University Center for Children and Families, <http://ccf.georgetown.edu/topic/rural-health/>.