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BACKGROUND
The expansion of Medicaid eligibility to most individuals with incomes below 138 percent of the poverty threshold is a provision of the 2010 Affordable Care Act. In June 2012, a Supreme Court ruling made Medicaid expansion optional for states. Among all states, Kentucky had the largest drop in the percent uninsured, from 14.3% in 2013 to 8.5% in 2014. The drop in Tennessee was only from 13.9% to 12.0%. Kentucky’s results were due to an expansion of Medicaid as well as outreach efforts and a successful online registration system, Kynect.

OBJECTIVES
To describe the characteristics of the uninsured and changes in the percent uninsured in Tennessee, using U.S. Census Bureau data from the American Community Survey (ACS) and the Small Area Health Insurance Estimates (SAHIE).

METHODS
SAHIE data and ACS one-year estimates of health insurance coverage (tables S2701 and C27016) were used in the analysis and mapping. A difference-in-difference methodology was used to simulate what might have happened in Tennessee if the State had adopted policies similar to Kentucky’s in 2014.

RESULTS
The simulation showed that based on changes in Kentucky’s percentage uninsured, an additional 258,700 persons could have been newly insured in 2014 in Tennessee; 133,100 were adults age 18 to 64 living at or below 138% of the poverty line. Groups with a high percentage of uninsured in Tennessee are identified as well as groups benefiting the most in the simulation.

CONCLUSION
State-level policies to reduce the number of uninsured can be effective if implemented.