

# Medicaid Expansion's Impacts on Prescription Drug Access

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**The Menges Group**

Strategic Health Policy & Care Coordination Consulting

# Introduction and Summary Findings

- Medicaid Expansion has profoundly increased access to prescription medications. We have estimated that approximately 1.2 billion additional prescriptions occurred across the 10-year timeframe 2014-2023, attributable to Medicaid Expansion in 18 states. These states adopted Medicaid Expansion during 2014 under the Affordable Care Act (and which had not previously covered this population).
- In CY 2023, the average pre-rebate cost per Medicaid prescription was \$136 overall, equating to an average annual cost of more than \$1,600 per medication. For many medications, such as insulin, this annual cost exceeds \$5,000.
- Due to these costs and the modest income levels of the population eligible for Medicaid Expansion, it can reasonably be concluded that a large proportion of the above-tabulated (1.2 billion) medications would not have been accessed had the states not adopted Medicaid Expansion.

# Methodology Description

- Across the ten-year timeframe (2014-2023), we estimated the number of additional prescriptions that are attributable to Medicaid Expansion.
- We tabulated annual Medicaid prescription usage in 18 states that expanded Medicaid during CY2014 (and which had not substantially covered the expansion population pre-ACA). These states include: AR, CA, CO, CT, IL, IA, KY, MD, MI, MN, NV, NJ, NM, ND, OH, OR, WA, and WV.
- We compared Medicaid usage trends by year in the Expansion states with usage across six states that had not adopted Medicaid expansion at any point during the 2014-2023 timeframe (AL, FL, GA, MS, SC, and WY).
- States were excluded if they meaningfully covered the Medicaid Expansion population prior to 2014, adopted Expansion in 2015 or later, or had data validity issues with the information source we drew upon (the CMS State Drug Utilization Data).
- Tabulations were made overall (across all Medicaid prescriptions) and in three therapeutic classes: antidepressants, insulin, and bronchodilators.
- As an example, bronchodilator prescription volume across the non-Expansion states increased by 2.2% between 2013 and 2017. Volume across the Expansion states was 53.9% higher in 2017 versus 2013. We therefore attributed a 51.7% increase in bronchodilators to the implementation of Medicaid Expansion across the 18 Expansion states for CY2017.

# Findings: Total Prescription Volume

- Across the 18 Expansion states and across the 10-year timeframe assessed, **nearly 1.2 billion additional prescriptions were filled**, attributable to the adoption of Medicaid Expansion.
- This represented an estimated **56% increase** in overall Medicaid medication prescription volume.

All Medicaid Prescriptions			
2014 Medicaid Expansion States (n=18)	2014	2023	10 Year Total, 2014-2023
Actual Medicaid Prescription Volume	263,193,346	336,107,504	3,299,278,466
Estimated Prescriptions Without Expansion (based on observed usage trends across six non-Expansion states)	209,719,614	217,645,808	2,120,922,018
Additional Prescriptions Attributable to the Adoption of Medicaid Expansion			
Number	53,473,732	118,461,696	1,178,356,448
Percent increase	25%	54%	56%

# Drug Class Findings: Antidepressants

- Across the 18 Expansion states and across the 10-year timeframe assessed, **over 90 million additional antidepressant prescriptions were accessed**, attributable to Medicaid Expansion's adoption.
- This suggests improved mental health treatment on a very large scale.
- The volume change represented a **59% increase** in Medicaid antidepressant prescription volume.

Medicaid Antidepressant Prescriptions			
2014 Medicaid Expansion States (n=18)	2014	2023	10 Year Total, 2014-2023
Actual Medicaid Prescription Volume	17,121,873	26,325,412	244,662,499
Estimated Prescriptions Without Expansion (based on observed usage trends across six non-Expansion states)	12,803,047	17,297,714	154,018,529
Additional Prescriptions Attributable to the Adoption of Medicaid Expansion			
Number	4,318,826	9,027,698	90,643,970
Percent increase	34%	52%	59%

# Drug Class Findings: Insulin

- Across the 18 Expansion states and across the 10-year timeframe assessed, **over 17 million additional insulin prescriptions were accessed**, attributable to Medicaid Expansion's adoption.
- Given the importance of affordable insulin access for persons needing this medication, this volume increase has considerable clinical value among Medicaid Expansion enrollees.
- The volume change represented a **59% increase** in Medicaid insulin prescription volume.

Medicaid Insulin Prescriptions			
2014 Medicaid Expansion States (n=18)	2014	2023	10 Year Total, 2014-2023
Actual Medicaid Prescription Volume	3,498,035	4,216,286	46,008,969
Estimated Prescriptions Without Expansion (based on observed usage trends across six non-Expansion states)	2,665,252	2,778,105	28,886,088
Additional Prescriptions Attributable to the Adoption of Medicaid Expansion			
Number	832,783	1,438,181	17,122,881
Percent increase	31%	52%	59%

# Drug Class Findings: Bronchodilators

- Across the 18 Expansion states and across the 10-year timeframe assessed, **over 43 million additional bronchodilator prescriptions were accessed**, attributable to Medicaid Expansion's adoption.
  - This suggests improved respiratory health treatment occurred on a very large scale.
  - The volume change represented a **44% increase** in Medicaid bronchodilator prescription volume.

Medicaid Bronchodilator Prescriptions			
2014 Medicaid Expansion States (n=18)	2014	2023	10 Year Total, 2014-2023
Actual Medicaid Prescription Volume	11,648,032	14,550,974	142,891,629
Estimated Prescriptions Without Expansion (based on observed usage trends across six non-Expansion states)	10,054,572	9,695,243	99,414,188
Additional Prescriptions Attributable to the Adoption of Medicaid Expansion			
Number	1,593,460	4,855,731	43,477,441
Percent increase	16%	50%	44%

# Concluding Observations

- The additional prescriptions attributable to Medicaid Expansion shown on the previous four slides represent a massive increase in medication access. Across the ten-year period 2014-2023, the additional Medicaid prescriptions attributable to Medicaid Expansion (across the 18 states assessed) were **1.178 billion overall**, 90.6 million for antidepressants, 17.1 million for insulin, and 43.5 million for bronchodilators.
- More than 80% of new Medicaid Expansion enrollees were previously uninsured, and all had modest income levels.
  - Average pre-rebate costs per Medicaid prescription during CY2023 were **\$136 overall, \$20 for antidepressants, \$420 for insulin, and \$142 for bronchodilators**.
  - At these price points, it can reasonably be concluded that a large proportion of the above-tabulated medications would not have been accessed (had the states not adopted Medicaid Expansion).
- All these additional Medicaid prescriptions occurred in concert with access to physician (and other prescriber) services.
- Substantial medication access opportunities exist among the remaining non-Expansion states, via adoption of Expansion coverage.



# 5 Slide Series Overview

Our 5 Slide Series is typically a monthly publication whereby we briefly discuss/address a selected topic outside the confines of our client engagements. The Menges Group has developed a variety of datasets that we use to support our 5 Slide Series and client projects.

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