87% of Georgians have health insurance and are covered by these kinds of coverage:

**Medicaid**
- 1.9 million Georgians
  - Two-thirds of Georgia Medicaid beneficiaries are low-income children. Low-income pregnant women, people with disabilities, seniors, and some very low income parents (making less than $6000 per year) also qualify for coverage.

**Medicare**
- 1.5 million Georgians
  - Medicare covers seniors, some people with disabilities, and people living with End-Stage Renal disease.

**Job-based insurance**
- 3.7 million adults & 1.2 million children

**Individual coverage**
- 700,000 Georgians
  - About 490,000 Georgians purchase their private coverage through the ACA Marketplace. Most (about 90%) receive financial help to lower their premiums and out of pockets costs.

240,000 people are stuck in Georgia’s coverage gap

This system leaves out low-wage workers, young people, veterans and people whose physical or mental health conditions prevent them from working and do not make enough income to qualify for financial help on the health insurance Marketplace.

- The majority of people who are left out are working. Many of these workers are in some of Georgia’s most important economic sectors, such as construction, transportation, education, and retail.

- 27,000 uninsured Georgia veterans fall in Georgia’s coverage gap.
Georgia’s policy makers have the ability to draw down federal dollars to ensure that every low-income Georgian has an insurance card in their purse or wallet.

Studies from other states have shown that insuring low-income residents:
- Reduces uncompensated care provided by hospitals
- Strengthens the finances of rural hospitals
- Increases the amount of preventive care (like cancer screenings) that people receive
- Improves disease management for chronic conditions like diabetes and asthma
- Protects the finances of low-income families
- Allows patients to seek care earlier when they get sick
- Is an affordable investment of state dollars

By putting an insurance card in every Georgian’s purse or wallet, policy makers can prevent job losses and economic decline, support rural communities, and stem the opioid crisis.

Prevent job loss and economic decline
- Increasing the number of Georgians with insurance would prevent rural hospital closures and the resulting loss of health care jobs and jobs within the surrounding communities.
- It is easier for physicians and other providers to sustain practices when more patients have insurance. Georgia has the 5th highest rate of uninsured, making it an unappealing place to start a practice. Currently, about half of the health care providers trained in Georgia leave the state to practice.
- Other states have seen job gains of 12,000 (Kentucky), 30,000 (Michigan) and 31,000 (Colorado) after they extended insurance to low-income residents.

Support rural communities
- Six of Georgia’s rural hospitals have closed since 2013. Hospital closures are followed by job losses and often community decline. Increasing the number of Georgians with insurance helps to strengthen rural hospitals and keep rural communities vibrant.

- Georgia hospitals employed 143,554 people and those hospitals indirectly created an additional 349,067 full-time jobs in Georgia.
- Rural Georgians are more likely to be uninsured than urban and suburban Georgians. The Georgia Chamber of Commerce predicts that 25% of rural Georgians will lack health insurance within 5 years.

Help more people access substance use treatment services
- About 25% of uninsured Georgians who would gain insurance coverage have a serious mental illness or substance use disorder. People are significantly more likely to receive treatment if they have health insurance.
- More than 400,000 Georgians needed but did not receive substance use treatment in 2016.
- The cost of providing medication-assisted substance use treatment costs $4000 annually, thousands of dollars less than the same amount

NOW IS THE TIME TO TAKE ACTION.
Support legislation that puts insurance cards in the pockets of all low-income Georgians.